



HL7 Data Exchange

*indicates a required field

Request Type*	User Information
<input type="checkbox"/> Add	First Name*
<input type="checkbox"/> Modify	Middle Initial*
<input type="checkbox"/> Remove	Last Name*
	Credentials
	Phone
	Email*

Permission(s) * <i>(Check all that apply)</i>
<input type="checkbox"/> Reporting Only (VXU)
<input type="checkbox"/> Query Only (QBP)
<input type="checkbox"/> Bi-Directional (VXU + QBP)

I have read the VacTrAK Contract terms and I am authorizing the above changes to be made on behalf of this organization/facility for electronic data exchange.

Organization Name:

Facility Name and VFC PIN:

VacTrAK Administrator Name (print):

VacTrAK Administrator Signature:

Submit form to: VacTrAK - Email: vactrak@alaska.gov | Fax: 907-562-7802 | Phone: 907-269-0312