

MBTelehealth provides secure, real-time, room-based videoconferencing between two or more locations. Used in Manitoba and surrounding jurisdictions to support health-care delivery.
(Note: there may be costs associated with this service.)

Part 1: Site Information

Site Name

Date of request (dd/mm/yyyy)

Site Address

Unit Street # Street name or post office box number Postal Code

City/Town

Telephone number

Fax number

Primary Contact information: person responsible for working with MBTelehealth during implementation

Last name

First name

Job title/position

Email

Daytime telephone number

Part 2: Administrative

Is the site owned and operated by:

Manitoba RHA Indicate which RHA: _____

CancerCare Manitoba Diagnostic Services of Manitoba Federal

First Nations Fee For Service Provincial Other (describe): _____

Do you have funding for the associated equipment/licensing that may be required? Yes No

How would you describe your site:

Health centre Hospital Nursing station

Specialty clinic Long term care and rehab Primary care Other _____

Part 3: Application Approval

All applications must be approved by the appropriate authority for the site prior to submission (e.g. CEO, Program Director, Clinic Owners). Please indicate the name and title of that person below:

Please print name: _____ Title: _____

Send completed form to:

MBTelehealth
772-715 McDermot Ave.
John Buhler Research Centre
Winnipeg MB R3E 3P4
Email: servicedesk@sharedhealthmb.ca
Fax: 1-204-975-7787

For more information:

Website: www.mbtelehealth.ca
Phone: 204-940-8500 Option 4, Option 1
(toll-free) 1-866-999-9698 Option 4, Option 1