

## MEDICAL EXAMINER DESIGNEE REGISTRATION

E-FORCSE<sup>®</sup> requires that every individual register as a separate user, using their email address as their username within the system. A designee will not have access to E-FORCSE until the agency administrator affirmatively accepts responsibility for the designee and links the designee to the agency administrator's account. The designee is required to review the "PMP AWARxE Law Enforcement and Regulatory User Support Manual" and the "E-FORCSE<sup>®</sup> Information Security and Privacy Training Course " and complete the "Authorized User Certification Form" prior to registration.

The registration process is comprised of three screens: the account settings screen, the role selection screen, and the demographics screen. All three screens must be completed before the user can successfully submit their registration.

## **Registration Process**

- 1 To request a new account in PMP AWARxE, open an Internet browser window and navigate to https://florida.pmpaware.net.
- 2 Click the Create Account link. The next screen requires the user to enter a valid email address and select a password. The password must be entered a second time for validation. Note: the password must contain 10 characters, including 1 capital letter and 1 special character (such as !,@,#,\$). Click Save and Continue.
- 3 Click on the +Other link and select Medical Examiner—Delegate role. Click Save and Continue.
- 4 Enter the following personal information and employer information. Note: Required fields are indicated with a red asterisk.

*Personal Information*: Enter employee identification number or badge number, position, name, date of birth, and primary contact phone number, and mobile number, if available.

*Employer Information*: Enter agency name, address, and phone number.

*Delegate (Designee) Information:* All designees should enter the email address of their Medical Examiner (Administrator) s their "Selected Supervisor".

Once complete click **Submit Your Registration**.

- **5** To complete registration, the user must provide the completed "Authorized User Certification Form" to their Medical Examiner (Administrator) to maintain on file.
- 6 The agency administrator receives an email alerting them a delegate account is pending approval. The agency administrator approves or rejects the request.
- 7 Once your registration is approved by the State Administrator, you will be notified via email. **Registration is complete.**

For more information visit www.e-forcse.com.

For technical assistance, please contact our Help Desk at (877) 719-3120.

## Conter Conter

Licensing Board Investigator
Peer Assistance Program / Recovering I
Medical Examiner - Delegate
Medical Examiner/Coroner
Save and Continue
Delegate
I am a delegate for the following people...\*
Email
Add
Selected Supervisors

Florida HEALTH