



CAMH TeleMental Health Services – OTN & PCVC Tip Sheet (Allied Health Professionals)

If you do NOT have an OTN or PCVC account.

1. Complete the PCVC Registration Form (also attached below)
** Please complete both forms using your CAMH email address and send completed forms to TeleMentalHealth@camh.ca **

Resources:

- Remote Access Portal
- VPN Access
- Physician Tip Sheet
- PCVC Tip Sheet

OTN Allied Health Professional – New User Application Form

Field	Response
*Profession - Please confirm one: Physician, Nurse, Allied Health Professional, Telemedicine Coordinator: Clinical, Telemedicine Coordinator: Non-Clinical, Technical Support, Organizational Administration	Allied Health Professional
Professional Registration Number:	
Salutation - Please select one: Dr, Miss, Mr, Mrs, Ms	
*Legal First Name	
*Legal Last Name	
Middle Initial	
*Registered with (college of)	
*Clinical Specialty	
*Email	
*Phone & extension	
What Service Would you like to get started with? (eVisit, eConsult, Scheduling, Telederm, Home Video Visits, Specialists & Services Directory)	eVisit
*Do you have a ONE ID account?	
If yes, what is your ONE ID username? (xxx.xxx@oneid.on.ca)	