



New Jersey Department of Health
Office of Local Public Health

Red Book - Local Health Emergency Contact Directory ACCOUNT CREATION AND ACCESS REQUEST

Instructions: This access request must be submitted by the Health Officer. Please, complete the following information and send the completed form to contact.LHR@doh.nj.gov. An account will be set up with permission for the individual listed to access the Red Book - Local Health Emergency Contact Directory. Please allow ten (10) business days for this request to be processed.

First Name: _____ Last Name: _____

Local Health Department: _____

Email: _____ Telephone: _____ Extension: _____

Does this person currently have a Hippocrates account? - Yes - No

Does this person need access to the Red Book directory? - Yes - No

If yes, what Red Book role should we assign to this individual?

- View / Modify Records
- View Only

Will this person also need access to the Local Health Report (LHR)? - Yes - No

If yes, what LHR role should we assign to this individual?

- Health Officer (the health officer in charge)
- Approver (a trusted supervisor)
- Data Enterer

Comments:

Health Officer Signature: _____ Date: _____

Office of Local Public Health
New Jersey Department of Health
P.O. Box 360
Trenton, NJ 08625-0360

contact.LHR@doh.nj.gov