# RIZIV/INAMI Digital Referral Prescription (UHMEP) - TESTING DAY

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| ℹ️ Please send this completed form to [Support-Uhmep@smals.be](mailto:Support-Uhmep@smals.be) |

## Organization information

**1.Your Organization Name**

Click or tap here to enter text.

**2. What Digital Referral Prescription Components are you using for DRP Nursing Care integration?**

Web Application

Web Components

API REST FHIR

**3. What is your current integration status for this testing session?**

*ℹ️ Machine to Machine authentication is not currently supported for this event.*

My IAM client (healthcare) is configured by eHealth

I can interact with one of the UHMEP services in ACC therefore, I can perform a series of end-to-end tests.

My eHealth client is configured, but I need technical assistance to integrate with the UHMEP service in ACC before be able to create a prescription.

Other

Click or tap here to enter text.

**4. Can you send us an "un-exchanged" and "exchanged" ACCESS TOKEN, so we can verify its validity with the test sessions?**

Click or tap here to enter text.

**5. During which available time slot would you prefer to participate in testing and for which component?**

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| --- | --- | --- |
|  | **11:00 – 12:00** | * WebApp * Web Component * FHIR REST API |
|  | **13:00 – 16:00** | * WebApp * Web Component * FHIR REST API |

**6. Please provide your TESTERS information**

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| --- | --- | --- | --- |
| **Tester Name** | **Role** *(Physician, Nurse)* | **Tester NIHII Number** | **Tester SSIN** |
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