

**PATIENT ONLINE REGISTRATION FORM
ACCESS TO GP ONLINE SERVICES**

Surname	
First Name	
Date of Birth	
Address	
E-mail Address	
Telephone Number	
Mobile Number	

I WISH TO ACCESS THE FOLLOWING ONLINE SERVICES (please tick all that apply):

1. Booking Appointments	<input type="checkbox"/>
2. Requesting Repeat Prescriptions	<input type="checkbox"/>
3. [REDACTED]	<input type="checkbox"/>
4. Accessing my Full Medical Record This may be granted once your Record has been reviewed by a Clinician (from date of request)	<input type="checkbox"/>
5. I require a new Password/Login to be issued (If you have previously had online access to your medical record but are unable to use your existing password)	<input type="checkbox"/>

APPLICATION FOR ONLINE ACCESS TO MY MEDICAL RECORD

**I wish to access my medical record online and understand and agree with each statement
(please tick all boxes if you agree)**

1. I have read and understood the information on the reverse of this form	<input type="checkbox"/>
2. I will be responsible for the security of the information that I see or download	<input type="checkbox"/>
3. If I choose to share my information with anyone else, this is at my own risk	<input type="checkbox"/>
4. I will contact the practice as soon as possible if I suspect that my account has been accessed by someone without my agreement	<input type="checkbox"/>
5. If I see information in my record that is not about me or is inaccurate, I will log out immediately and contact the practice as soon as possible	<input type="checkbox"/>

Patient Signature		Date	
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For Practice Use Only

Photo ID (please tick)	Address ID - last 3 months (Please tick)
Passport Driving Licence Bus Pass Firearms Licence Other Receptionist Initials	Utility Bill Bank or Credit Card Statement Benefit Statement <i>(Not mobile phone bill please)</i> Other

Important Information – Please read before returning this form

If you wish to, you can now use the internet to book appointments with a GP, Nurse Practitioner or Nurse, request repeat prescriptions for any medications you take regularly and view your medical record online. You can still use the telephone or call into the surgery for any of these services as well. It is your choice.

It will be your responsibility to keep your login details and passwords safe and secure. If you know or suspect that your record has been accessed by someone that you have not agreed should see it, then you should change your password immediately.

If you can't do this for some reason, we strongly recommend that you contact the surgery so that we can remove your online access until you are able to reset your password.

If you print out any information from your record, it is also your responsibility to keep this secure. If you are at all worried about keeping printed copies safe, we strongly recommend that you do not make copies at all.

Before you apply for online access to your record, there are some other things to consider.

Although the chances of any of these things happening are very small, you will be asked that you have read and understood the following before you are given login details.

<p>Forgotten History There may be something you have forgotten about in your record that you might find upsetting.</p>

<p>Abnormal Results or Bad News If the surgery has given you access to your medical record, you may see something that you might find upsetting. This may occur before you have spoken to one of the clinician's or while the surgery is closed and you cannot contact us.</p>

<p>Choosing to Share your Information with Someone It's up to you whether or not to share your information with others – perhaps family members or carers. It is your choice, but also your responsibility to keep the information safe and secure.</p>

<p>Coercion If you think you may be pressured into revealing details from your medical record to someone else against your will, it is best that you do not register for access at this time.</p>

<p>Misunderstood Information Your medical record is designed to be used by clinical professionals to ensure that you receive the best possible care. Some of the information within your medical record may be highly technical, written by specialists and not easily understood. If you require further clarification, please contact the surgery for a clearer explanation.</p>

<p>Information about Someone Else If you spot something in your record that is not about you or notice any other errors, please log out of the system immediately and contact the surgery as soon as possible.</p>

<p>Proxy Access Parents may request a proxy access to their children's records; this will cease automatically when the child reaches the age of 13. Any subsequent proxy access will need to be authorised by the patient annually until the age of 16. Gillick Competency test will be carried out for a child aged between 13 to 16 requesting access to their own records.</p>
