

The Stubbington Medical Practice
Application for Online Access to My Medical Record
For patients aged 16 and above

Please note Family members will need to have individual email addresses

Please provide a proof of address or a piece of photo ID with this application form.

I wish to have access to the following online services (please tick all that apply):

Surname	Date of birth
First name	
Address	
Email address	
Telephone number	Mobile number
Booking appointments	<input type="checkbox"/>
Requesting repeat prescriptions	<input type="checkbox"/>
Access to Allergies, medication and Immunisation information	<input type="checkbox"/>
Detailed access to my medical record	<input type="checkbox"/>

I wish to access my medical record online and understand and agree with each statement:

I have read and understood the information leaflet provided by the practice	<input type="checkbox"/>
I will be responsible for the security of the information that I see or download	<input type="checkbox"/>
If I choose to share my information with anyone else, this is at my own risk	<input type="checkbox"/>
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"/>
If I see information in my record that is not about me or is inaccurate, I will contact the practice as soon as possible	<input type="checkbox"/>
Signature	Date

Application for DETAILED CODED RECORDS ACCESS – PLEASE READ THIS INFORMATION

It will be your responsibility to keep your login details and password 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 recommend that you contact the practice so that we can remove 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 recommend that you do not make copies at all.

The practice may not be able to offer online access due to a number of reasons such as concerns that it could cause harm to physical or mental health or where there is reference to third parties. The practice has the right to remove online access to services for anyone that doesn't use them responsibly.

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

It's up to you whether or not you share your information with others – perhaps family members or carers. It's your choice, but also your responsibility to keep the information safe and secure.

Timescales

Booking appointments, requesting repeat prescriptions, Questionnaires and Summary Care Record access will take up to 5 days to action. If required, your request for detailed coded records access will be given to your doctor to consider. This can take up to 28 days to action as clinical work takes priority over administrative tasks such as this. Upon approval, this function will be added to your online account.

I read and understood all the information above and read the timescales	
Signature:	Date:

For practice use only

Patient NHS number		Practice computer ID number	GP Initials
Identity verified by (initials)	Date	Method Vouching <input type="checkbox"/> Photo ID and proof of residence <input type="checkbox"/>	
Authorised by			Date