Tutbury PracticePatient Online Access registration form

Completing this form will provide you with online access to book appointments and request repeat prescriptions. You will also be able to see test results, immunisations and consultations from the date of registration. If you wish to register for online access, please read the notes on the back of this form first then complete this application and return it in person, along with the required forms of identification (see the back of this form for ID examples).

Applicants for this service must be over 16 years of age.

1	Patient details	*complete in BLOCK CAPITALS																				
	First name																					
	Last name																					
	Date of birth		D	D	/	M	M	/	Υ	Υ	Υ	Υ		•	•	•	•	•				
	Landline number	r																				
	Mobile number																					
	Email address**																					
	This email address will be used to send your login details.																					
	sena your login aet	aiis.																				
	**If you do not have an email address or do not want to provide one, you will need to collect your login details from the reception. If this is the case, you will be notified by text when they are ready to collect.																					
2	Declaration: Ple	ase read these s	tate	men	its a	nd t	ick t	to co	onfir	m t	hat	you	und	ders	tand	d an	d ag	ree	witl	h ea	ch	
	I have read and understood the information provided on the back of this form.														< Tick here							
	I understand that the information I am given access to is from my own personal health records and may contain information that I do not wish to share with others. If I do choose to share this information with anyone else I will be responsible for the security of that information and I share it at my own risk.													ick he	ere							
	If I suspect that my account has been accessed by someone without my permission, I will contact the practice as soon as I am able to, either by phone, in person or in writing.														:re							
3	Patient Signature			Date																		
For practice use only Date set up											Notes											
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Patient ID verified by		C.D.				ate					Ι.	D D		D I :	15	,					_	
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Level of access enabled		DCR N	1eds	Ш	Д	ppo	intme	ents	Ш		Re	ques	t Dec	clined	d [_							

When returning your form, please bring 2 types of ID:

One must be photo identification such as a passport or driving licence; one must be evidence of your home address such as a utility bill or bank statement (which is no older than three months) or a photo driving licence with address. If providing a bank statement as identification, please remember to blackout any bank account numbers.

The practice will email your registration details to you if an email address has been provided on the front of this form. If you have not provided an email address, your registration details will need to be collected from the practice. A text will be sent to you when they are ready to collect. We aim to set up your online access within 5 working days however if you are transferring from another practice this may take a little longer.

Important patient information:

Your records contain information that is private and specific to yourself, so it is your responsibility to keep your login details safe and secure. Treat your login information as you would your bank details or debit card number. If you suspect your account has been accessed by someone without your consent you must change your password immediately. This can only be done by yourself on patientaccess.com, through the NHS app or whichever platform you have chosen to use to view your records. If you cannot do this right away, we strongly advise that you contact the practice as soon as you are able and ask us to suspend your online access until you can reset your password.

It is your choice whether or not to share information from your records with others. It is also your responsibility to keep your medical information safe and secure when viewing it on your computer or any other device. Do not view it where there are people who might see any information that you do not wish to disclose.

If you print out any information from your record, it is your responsibility to keep it safe and secure.

For more information on keeping you records safe and secure, a helpful leaflet is available. This can be requested from reception or downloaded here: https://shorturl.at/uADKP

At the moment you may only be able to see your consultations and documents from the date access was set up. This may change in the future but please note that this is controlled by policy makers at NHS Digital, not by this Practice.

Please be aware that your online records may contain details from past medical history that you may have forgotten about. It may contain information which refers to abnormal test results and you may find some of this information upsetting. Please remember that the records are often written using technical medical terms as this helps clinical professionals to communicate clearly and quickly about your healthcare. If there is anything in your record that you do not understand, please contact the Practice either by phone, in person or in writing.

If you find something in your record that does not relate to you or you find any errors in your medical records, please contact the practice as soon as you are able to, either by phone, in person or in writing.

If you leave the Practice you may need to register again for online access at your new Practice.

The practice will not approve online access if it is deemed this may cause physical and/or mental harm to the patient. Practice management also has the right to remove online access to services for anyone that does not use them responsibly. If this happens and you wish to appeal, this can be done by contacting the practice in the first instance by phone, in person or in writing. You can also contact the Information Commissioners Office online or by phone on 0303 123 1113.

If you have any doubts about registering for online access or if you are worried that you may be put under pressure to reveal details from your medical record to someone else against your will, we would strongly advise that you do not register for this service. If you have any questions relating to this application please contact the practice.

