

# The Surgery – 200 Osborne Road

www.thesurgery.org

## Patient Online Access to Your Medical Record

Surname	
First name	
Date of birth	
Address	
Postcode	
Email address (please print clearly)	
Tel No (home)	
Mobile No	

### 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 items, sign and date or this application cannot be processed)

1. I have read and understood the information leaflet provided by the practice.	<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 it not about me, or is inaccurate I will contact the practice as soon as possible.	<input type="checkbox"/>

Signature		Date	
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### For practice use only

Identity verified through (tick all that apply)	Photo ID <input type="checkbox"/> Proof of residence <input type="checkbox"/> Other (Pls specify) <input type="checkbox"/> .....	Initials of verifier:	Date:
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## Before you apply for Online Access to your medical records there are some other things to consider

### **Forgotten history:**

There may be something you have forgotten about, in your records, that you might find upsetting.

### **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 records may be highly technical, written by specialists and not easily understood. If you require further clarification, please contact the surgery for a clearer explanation by a clinician.

### **Choosing to share your information with someone:**

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.

### **Coercion:**

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 online access at this time.

### **Information about someone else:**

If you spot something in the record that is not about you or notice any other errors, please log out of the system and contact the IT manager at the practice as soon as possible.

### **Patients under 16:**

Following guidance from the BMA patients under the age of 16 will only have restricted access to their records, this will include the ability to make appointments and request repeat medication and therefore will not be required to provide ID verification or fill out the registration form as this can be done online.