

Application for Access to GP Online Services – Things To Consider

Before you apply for online access to your medical health record, there are some 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 when you sign up for online services.

Forgotten history

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

Abnormal results or bad news

If your GP has given you access to test results or letters, you may see something that you find upsetting to you. This may occur before you have spoken to your doctor or while the surgery is closed and you cannot contact them.

Choosing to share your information with someone

It's up to you whether you share your information with others or not – 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 access at this time.

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.

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 immediately and contact the practice as soon as possible.

More information

For more information about keeping your healthcare records safe and secure, you will find a helpful leaflet produced by the NHS in conjunction with the British Computer Society:

Keeping your online health and social care records safe and secure

<http://www.nhs.uk/NHSEngland/thenhs/records/healthrecords/Documents/PatientGuidanceBooklet.pdf>

Application For Online Access To My Medical Record

Surname	Date of birth
First name	
Address	
Postcode	
Email address	
Telephone number	Mobile number

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

1.	Booking Appointments	<input type="checkbox"/>
2.	Requesting Repeat Prescriptions	<input type="checkbox"/>
3.	My Medical Record	<input type="checkbox"/>

I wish to access my medical record online and understand and agree with each statement (tick)

1.	I have read and understood the Things To Consider Sheet	<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 contact the practice as soon as possible	<input type="checkbox"/>

Signature	Date
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For practice use only

Patient NHS number		Practice computer ID number	
Identity verified by (initials)	Date	Method	
		Vouching <input type="checkbox"/> Vouching with information in record <input type="checkbox"/> Photo ID and proof of residence <input type="checkbox"/>	
Authorised by			Date
Date account created			
Date passphrase sent			
Level of record access enabled		Notes / explanation	
Contractual minimum <input checked="" type="checkbox"/>			
Other.....			