

VERSION	DATE PUBLISHED	LATEST REVIEW
Version 1	March 2016 (Reviewed Annually)	Mrs D Mitchell March 2016

BUDLEIGH SALERTON MEDICAL CENTRE

PATIENT ONLINE SERVICES APPLICATION FORM

In accordance with data protection principles, to enable access to our online services we require you to complete this form. Two forms of ID are required and this must include photo ID. If you are not the patient, you will need speak with Mrs Trudy Carter, Practice Manager regarding your request.

Patient Full Name: **Date of Birth:**

Address:

Tel (Home): **Tel (Mobile):**

I wish to have access to the following services (please tick):

- Viewing, booking and cancelling appointment
- Requesting repeat medications
- Accessing my medical record

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

- I have read and understood the information leaflet provided by the practice
- I will be responsible for the security of the information that see or download
- If I choose to share my information with anyone else, this is at my own risk
- I will contact the practice as soon as possible if I suspect my account has been accessed by someone without my agreement
- If I see information in my record which is not about me, or is inaccurate I will contact the practice as soon as possible

Signed: **Date:**

Applicant: Please hand this completed form to the surgery reception and wait for your registration letter to be generated. It would be helpful if you could do this between 12.00 noon and 2.30pm when the surgery is less busy.

For practice use only:

Identity verified through (tick all that apply – a minimum of 2):	Vouching <input type="checkbox"/> Vouching with information in record <input type="checkbox"/> Photo ID <input type="checkbox"/> Proof of residence <input type="checkbox"/>	
Name and signature of staff member who verified and issued registration letter to patient:	Name:	Date:
	Signature:	

Practice: Once complete please forward this form for scanning into the patient's medical records.