

# **Patient Services - Patient registration form**

If you would like to register for this online service please complete the form below and return it to your practice in person, along with a valid form of identification, for example photo ID or your passport.

Once you are registered, the practice will give you the information that will enable you to create a username and password.

Patient details	Plea	se c	om	olete	e in	BLO	ск с	API1	ALS											
Patient forename																				
Patient surname																				
Date of birth									(dd/mm/yyyy)											
Email address																				
	This rem			ddr	ess v	will l	be u	sed l	by y	our	prac	ctice	to s	end	l you	ı no	tific	atio	ns a	nd
Mobile number																				
If you consent to the	Pra	ctic	e se	end	ing	you	tex	t m	essa	age	s, p	leas	e ti	ck ł	nere	e: [	]			
Signature																				
Date																				
Completing the forn	n on	be	half	of	the	pat	tien	t?												
Print forename																				
Print surname																				
Relationship																				
to patient																				
Signature																				
Date																				

### NOTE

- It is not possible for anyone under 16 to register for an online account.
- The Practice reserves the right to suspend an account if we believe it is being misused in anyway.
- We may seek written consent if the account is being set up on behalf of someone else.
- It is the patient's responsibility to inform the Practice of any changes to their email address.

## **About Vision online services**

We offer an online service for our patients so you can book your appointments and order your repeat prescriptions online at your convenience.

#### Online appointment booking

Have the flexibility to book routine GP and cancel any of your appointments from home, at work or any location with internet access. You don't need to queue at the practice, wait on the telephone and you can manage your appointments outside practice opening hours.

#### Request your repeat prescriptions online

Request your repeat prescriptions quickly online by logging into your account and simply ticking the appropriate boxes. You can review the progress of your repeat prescriptions and any message that the practice may have sent to you.

#### **Access to Medical Records**

You may also request access to be able to view aspects of you medical record. Currently only your medication history and any allergies or adverse reactions are available to view. This functionality will expand over the next few years. Please indicate below which parts of your record you would like to be able to view online (when available).

☐ Medical History (e.g	. dia	gno	ses)									
☐ Medication History												
☐ Risks & warnings (Al	lerg	ies e	etc.)									
☐ Procedures (Operati	ions	& V	acci	natio	ons)							
☐ Investigations (Test	resu	ılts)	– NE	3 Үо	u ma	ay b	e ab	le to	vie	w re	esults before a GP has commented on or	
reviewed them.												
$\square$ Examinations (measurements such as BP or weight)												
☐ Events & Appointme	ents	(List	t of a	appo	ointn	nent	s at	Prac	ctice	, ref	errals done etc)	
☐ All of the above												
• •	dat	e an	d sig	gn b	elow	ı. Re	men	nber	to i	ndic	ess to parts of your medical records, ate above which areas you would like to	
Patient Name:											Date of Birth:	
Sign:											Date:	
Staff use only												
Patient ID seen												
Type of ID												
Staff name												
Date	D	D	/	M	M	/	Υ	Υ	Υ	Υ		