FOR RHC USE ONLY (PATIENT SERVICE	Form given out by: (Initials and date)	
Form Received & identity verified by: (initials and date)	Method: ☐ Vouching ☐ Photo ID & proof of residence (2x To	otal)
Ramsey Health ( Application for online access to	Centre my medical record (Aged 16 and above)	
Surname	Date of Birth	
First name		
Address	Postcode	
Email address		
Telephone number	Mobile number**	
**Please tick here if you consent to receiving	ing communications from us via text message	<u> </u>
1. I will be responsible for the securead and understood the information.	urity of the information I see or download and I have ation on the next page.	
If I choose to share my information with anyone else, this is at my own risk		
<ol> <li>If I suspect that my account has been accessed by someone without my agreement, I will contact the practice as soon as possible</li> </ol>		
If I see information in my record that is not about me or is inaccurate, I will contact the practice as soon as possible		
5. If I think that I may come under μ unwillingly I will contact the pract	pressure to give access to someone else tice as soon as possible	
Signature	Date	
FOR RHC USE ONLY (ADMIN)	·	
Email verified? Reminder/s sent:	GP consent task sent to: on:	
Authorised by: Task date: (GP initials)	Date account created & passphrase	sent:
Any other info:	ſ	
Reviewed: November 2023 Saved in: s:\dept-admin team\emily mcgre access registration form 01 nov 2023.docx	egor\systm0nline\access to own records request forms\on	ıline

# Online Access to Medical Records – Important Notes (Please Read)

### **PLEASE NOTE:**

- It will be your responsibility to keep your login details and password safe and secure. If you know or suspect that your record has been accessed by someone that you have not agreed should see it, then you should change your password immediately. Access can also be gained on some phones using fingerprints or Face ID please consider this.
- If you have concerns about this, we recommend that you contact the practice so that they can remove online access until you are able to reset your password.
- If you print out any information from your record, it is also your responsibility to keep this secure. If
  you are at all worried about keeping printed copies safe, we recommend that you do not make
  copies at all.
- The practice may not be able to offer online access due to a number of reasons such as concerns
  that it could cause harm to physical or mental health or where there is reference to third parties. The
  practice has the right to remove online access to services for anyone they feel it could harm or be
  put at risk.

# Key considerations

## 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 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 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.