

Watton Medical Practice

Application for Systmone online

PLEASE REMEMBER TO BRING YOUR IDENTIFICATION DOCUMENTS, ONE OF WHICH SHOULD SHOW YOUR PHOTOGRAPH

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. Limited access to parts of my medical record <u>(please note, when you receive your password you will need to log onto your Systmone online account and request access to your detailed coded record. The surgery will then process your request)</u>	<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 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 is not about me or is inaccurate, I will contact the practice as soon as possible	<input type="checkbox"/>
Signature	Date

Note: There is a need for administration staff who have a legitimate reason to add data, to access your medical records and make entries to these; as well as the GP's and clinical staff. Therefore please be aware that you will see these staff names' on your record.

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 type="checkbox"/>			
Other.....			