

ROSMELLYN SURGERY

St Clare Medical Centre, St Clare Street, Penzance, Cornwall, TR18 3DX Telephone: 01736 330909 Email: nhskernowccg.rosmellynpenzanceitk@nhs.net Dr C J Rowe Dr B W Penfold Dr K L A Tunstall Dr E A Schwarz

Online Services Application Form

Please return this completed form along with a copy of your photo ID and proof of address to Rosmellyn Surgery by email nhskernowccg.rosmellynpenzanceitk@nhs.net or posting your form to us, or returning it in person.

First name Address Postcode Email address Telephone number Mobile number When you have signed up to Patient Access on your smart phone or computer, or on the NHS App on your smartphone you will be able to access your Repeat Prescriptions and Allergies. Once your online access is set up, if you would like more detailed access to your medical records please tick below which, or all you would like to access and return this form to us and we will get in touch. Immunisations Laboratory Test Results Coded Medical Records Future Medical Record Access to Documents & Consultations I wish to access my medical record online and understand and agree with each statement (tick) I have read and understood the information provided by the practice I will be responsible for the security of the information that I see or download If I choose to share my information with anyone else, this is at my own risk If I suspect that my account has been accessed by someone without my agreement, I will contact the practice as soon as possible If I see information in my record that is not about me or is inaccurate, I will contact the practice as soon as possible If I think that I may come under pressure to give access to someone else unwillingly I will contact the practice as soon as possible Signature Date Photo ID seen & proof of address Personal vouching for who patient is (must be themselves) Date access granted: Signed: Should only be granted once Patient Access or NHS App is set up and they have requested		9 1 1				
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