

## New Patient Registration Form - Adult

Do you have any special communication needs?  Yes  No

If yes:  Sign Language  Large Print  Other .....

**CONFIDENTIAL MEDICAL REGISTRATION FORM**

Please complete all pages in FULL using BLOCK capitals

Title:  Mr  Mrs  Miss  Ms

Surname

First Names (in full)

Previous Surnames

Date of Birth (day/month/year)

NHS Number

Male  Female

Marital Status

Ethnicity

- Arab
- Asian or Asian British – Indian
- Asian or Asian British – Pakistani
- Asian or Asian British – Bangladeshi
- Asian or Asian British – any other Asian background
- Black or Black British – Caribbean
- Black or Black British – African
- Black or Black British – any other Black background
- Chinese
- Mixed – White and Black Caribbean
- Mixed – White and Black African
- Mixed – White and Asian
- Mixed – Any other mixed background
- White – British
- White – Irish
- White – any other White background
- Any other

Town & country of Birth

Address

Post Code:

Telephone number:

Mobile number:

Email address:

**Please help us trace your previous medical records by providing the following information:**

Your previous address in UK

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## If you are returning from the Armed Forces:

Address before enlisting

Enlistment date

Service/  
Personnel number

Date of discharge

### GDPR Consent

For the purposes of direct care:

I consent to Twyford Surgery contacting me by letter

Opt-in  Opt-out

I consent to Twyford Surgery contacting me by telephone

Opt-in  Opt-out

I consent to Twyford Surgery contacting me by mobile (verbally)

Opt-in  Opt-out

I consent to Twyford Surgery contacting me by mobile (SMS/text)

Opt-in  Opt-out

I consent to Twyford Surgery contacting me by email

Opt-in  Opt-out

For the purposes of marketing

I consent to Twyford Surgery contacting me by letter

Opt-in  Opt-out

I consent to Twyford Surgery contacting me by telephone

Opt-in  Opt-out

I consent to Twyford Surgery contacting me by mobile (verbally)

Opt-in  Opt-out

I consent to Twyford Surgery contacting me by mobile (SMS/text)

Opt-in  Opt-out

I consent to Twyford Surgery contacting me by email

Opt-in  Opt-out

Signed.....Date.....

Consent choices recorded in EMIS Patient Record by ....., on.....

### Next of kin .....

Name:

Telephone:

Relationship:

Name of previous Doctor

Address of previous Doctor

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## If you are from abroad:

Registered with a GP

If previously resident in UK  
date of leaving

Date you first  
came to UK

Date of return to the UK

## Carer section: this allows us to support you if you are or have a carer

Are you a carer? (Not professional carers)  Yes  No

Who do you care for?

Do you have a carer?  Yes  No

If yes, please tell us the name & address of your  
Carer:

Are you happy for us to contact your carer  
about you?  Yes  No

## Choose where you would like to collect your prescriptions and nominate your preferred Pharmacy

Name	Location	Please nominate one
Twyford Pharmacy	Twyford, next to Surgery	
Twyford Pharmacy, at Colden Common Surgery Spring Lane	Patients will receive a text notification when their prescription is ready to collect	
Colden Common Surgery	MEDPOINT – secure 24h dispensing machine	
Boots	Eastleigh	
Boots	High Street Winchester	
Lloyds Pharmacy	Sainsbury's	
Colden Chemist	Colden Common	
Other		
*We offer a delivery service where appropriate		

## Lifestyle

Please enter your height & weight:

Height:	Weight:
	Blood Pressure

## Lifestyle smoking

Do you smoke:  Yes  No

If yes:  Cigarette  Cigars  Pipe

Are you an ex-smoker?  Yes  No

When did you give up?

How many cigarettes/  
cigars do you smoke daily?

Would you like help to quit smoking?

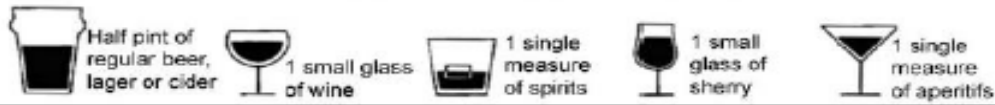
Yes  No

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## Lifestyle alcohol

Alcohol						
Questions	Scoring System					Your Score
	0	1	2	3	4	
How often do you have a drink that contains alcohol?	Never	Monthly or less	2 – 4 times per month	2 – 3 times per week	4+ times per week	
How many units of alcoholic do you have on a typical day when you are drinking?	1 - 2	3 – 4	5 – 6	7 – 8	10+	
How often do you have 6 or more standard drinks on one occasion?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	

## This is one unit of alcohol...



## ...and each of these is more than one unit



## Lifestyle exercise

Do you exercise:  Yes  No

If yes, please answer the following questions

What exercise do you do?

How often do you exercise?

Signature

Date

I confirm that the information I have provided is true to the best of my knowledge.

Signed:

Date:

Signature of patient  Signature on behalf of patient

## Staff use only

I.D Checked by	Date
Codes added?	
9NN60 <input type="checkbox"/> Please tick	67DJ <input type="checkbox"/> Please tick
918G Patient is a carer <input type="checkbox"/> Please tick	If not opted out, has access to online record been given <input type="checkbox"/> Tick

To maintain continuity of clinical care, we upload **certain** medical information so that it is available to other healthcare organisations (eg Emergency Departments). Please read the accompanying leaflet which details what part of your record is extracted and how it is used to help other NHS organisations.

## Patient Information Leaflet

Twyford Surgery

Telephone: 01962 712906

### Data Sharing

#### Introduction

This leaflet explains **why** information is collected about you, the **ways** in which this information may be used and who will be collecting it.

#### Data Matters and the National Opt-Out

Your health records contain confidential patient information, which can be used to help with research and planning. If you would like this to stop, you can opt out of this yourself or on behalf of someone else. For example, if you are a parent or guardian of a child under the age of 13.

Your choice will only apply to the health and care system in England. This does not apply to health or care services accessed in Scotland, Wales or Northern Ireland.

You can stop your confidential patient information being used for research and planning. Your confidential patient information will still be used for your individual care. Any choice you make will not change this.

#### Making your choice

##### Routes to set an opt-out - [Online](#)

The preferred route for patients to set a national data opt-out preference is through [the nhs.uk website](#), which has information about the opt-out to help you make informed choices. Anyone using the website is required to verify their identity with their name, date of birth, NHS number or postcode, a mobile phone number, or an email address which is collected by their GP and recorded on the GP System to be transferred to the central Patient Demographic Service on a regular basis.

If you cannot confirm your identity then you can use the telephone service to guide you through the service. The website is available 24 hours a day, seven days a week, from 25 May 2018.

##### Routes to set an opt-out - **Supported telephone service**

Patients can set their national data opt-out choice using a telephone service on 0300 303 5678. When calling this line patients will need to confirm their identity by providing their NHS number, name and date of birth. If you do not know your NHS number the contact centre may ask for your postcode to confirm a match.

#### Summary Care Record (SCR)

If you decide to have a SCR, it will contain important information about any medicines you are taking, allergies you suffer from and any bad reactions to medicines that you have had. This does not include diagnosis or procedures.

Giving healthcare staff access to this information can prevent mistakes being made when caring for you in an emergency or when your GP practice is closed. Your Summary Care Record will also include your name, address, date of birth and your unique NHS Number to help identify you correctly. If you and your GP decide to include more information it can be added,

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but only with your express permission.

For more information: Phone 0300 123 3020 or visit [www.nhscarerecords.nhs.uk](http://www.nhscarerecords.nhs.uk)

## Care and Health Information Exchange (CHIE)

The CHIE is an electronic summary record for people living in Hampshire, Portsmouth and Southampton. GP Surgeries, hospitals, social care and community care teams collect information about you and store it electronically on separate computer systems. The CHIE stores summary information from these organisations in one place, so that, with your consent, professionals can view it to deliver better care to you. This record contains more information than the SCR, but is only available to organisations in Hampshire.

For more information visit: [chie.org.uk](http://chie.org.uk)

## EMIS Data Sharing

The practice uses a clinical computer system called EMIS to store your medical information. The system is also used by other GP practices, Child Health Services, Community Services, Hospitals, Out of Hours, Palliative Care services and many more. This means your information can be shared with other clinicians so that everyone caring for you is fully informed about your medical history including medication and allergies.

## Health Check Programme

To ensure you receive the best possible care, we may contact you to invite you to participate in health improvement programmes, for example the NHS Health Check, a cardiovascular disease prevention programme for people aged 40-74 not previously diagnosed with cardiovascular disease. We may invite you for an appointment using a data processor who works entirely under our direction. Nobody outside the healthcare team in the practice will see confidential information about you during the invitation process.

We maintain our legal duty of confidentiality to you at all times. We will only ever use or pass on information about you if others involved in your care have a genuine need for it. We will not disclose your information to third parties without your permission unless there are exceptional circumstances, such as when the health or safety of others is at risk or where the law requires information to be passed on.

You have a right under the General Data Protection Regulation 2018 to find out what information we hold about you. This is known as 'the right of subject access'. If you would like to make a subject access request, please do so in writing to the practice manager. If you would like to know more about how we use your information, or if you do not want us to use your information in this way, please contact the practice manager.

## Benefits of sharing information

Sharing information can help improve understanding, responses to different treatments and potential solutions. Information will also help to:

- Provide better information to out of hours and emergency services
- Prevent Prescribing of medication to which you may already have an allergy
- Make more informed prescribing decisions about drugs and dosages Avoid unnecessary duplication in prescribing
- Increase clinician confidence when providing care
- Results of investigations, such as X-rays and laboratory tests
- Reduce referrals, ambulance journey admissions, tests, time wastage and visits to healthcare premises
- Find out basic details about you, such as address and next of kind

## Do I have a choice?

Yes. You have the right to prevent confidential information about you from being shared or used for any purpose other than providing your care, except in special circumstances. If you do not want information that identifies you to be shared outside this Practice, complete the sheet enclosed in this leaflet. This will prevent your confidential information being used other than where necessary by law.

## Objecting on behalf of others

If you are a carer and have a **Lasting Power of Attorney for Health and Welfare** then you can object on behalf of the patient who lacks capacity. If you do not hold a **Lasting Power of Attorney** then you can raise your specific concerns with the patient's GP. If you have parental responsibility and your child is not able to make an informed decision for themselves, then you can

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make a decision about information sharing on behalf of your child. If your child is competent then this must be their decision.

## Data Sharing

Please complete the information below with your choices on sharing your data and hand to Reception

**Name:** ..... **Date of Birth:** .....

**Address:** .....

.....  
.....

**National Data opt out** (You can decide if health and care information that could identify you is used for research and planning) NHS Digital.

Following the new GDPR, NHS Digital is producing information and guidance for the National Data Opt out. Please see the information attached to this form or visit [nhs.uk/your-nhs-data-matters](https://www.nhs.uk/your-nhs-data-matters)

**Summary Care Record** The SCR is an electronic record of important patient information, created from GP medical records. It can be seen and used by authorised staff in other areas of the health and care system involved in the patient's direct care.

Summary care Record opt-in

(N.B. this will mean NHS Healthcare staff caring for you may not be aware of your current medications, any allergies or reactions to opt-out  previous medication.) Code 9Ndo

**Care and Health Information Exchange** (previously the Hampshire health record) patient information shared between health and social care services across Hampshire, Isle of Wight, Farnham and surrounding borders, including Hampshire's OOH service.

CHIE Code 93C0 opt-in   
Code 93C1 opt-out

**EMIS** (EMIS is the clinical computer system used by many NHS Services, allowing your information to be shared across them, with the aim of better care, including the **MHH HUB in Winchester, to be able to access the service at the Hub you will need to opt-in.**

Information about me being shared with opt-in

other services using EMIS opt-out