BRENT AREA MEDICAL CENTRE

PATIENT ACCESS TO CLINICAL SYSTEM

Terms and Conditions

- To apply for on-line access to the Practice's clinical system, patients must complete the declaration below and return this form to Practice.
- Applications are "one per patient". Acceptance of one member of a family does not imply acceptance of other / further family members.
- Applications for on-line access will not be considered for patients who are under the age of 16.
- Where access is granted passwords will only be released direct to the patient and not to a parent (in relation to patients 16 18 years) or other third party. Where a parent or other person requires access to the system to book an appointment or deal with the affairs of the minor, it is acceptable for the minor to provide the password to the third party. The practice will not provide access detail directly.
- Where access is refused this will be in writing. A reason will only be given at the discretion of the Partners.
- Patients with a history of none-attendance at pre-booked appointments (without cancelling) will not normally be granted access to on-line appointment booking.
- On-line appointments booked are to be cancelled by the patient as soon as it is determined that it is no longer required.
- The Practice will not allow misuse of the on-line system and will monitor usage by individual patients. Where it is considered that a patient is misusing the system or is acting in a way detrimental to the availability of the appointment system, or other facilities, a warning letter will be issued. Where the situation does not improve, or recurs, access will be removed permanently and without further notice, at the discretion of the Partners.
- Repeat prescriptions may be ordered where these appear on the repeat list, which is provided to patients on the tear-off portion of the last prescription issued. The request must match the repeat list exactly and must be due. Other items may be ordered or requested using this facility.
- Approved access requests will be notified along with access instructions.

Agreement

I agree to the above Terms and time at the discretion of the Pa	· ·	which may be reasona	ably imposed from time to
Signed:			
Name:	Date:		

Brent Area Medical Centre

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Dr SL Aung
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DRCOG MRCGP

EMIS ACCESS

Patients can now request to book appointments and order repeat prescriptions online. You will however need to register with the Practice in the first instance.

On receipt of your request we will then send you a "Registration to use the Internet Application Booking Facility" which will include your:

- Pin number
- Practice number
- Access ID
- NHS number

If you are interested, please complete the questions below and the declaration. Return both forms to the Practice with a form of identification (ie. driver's licence, passport). We are unable to issue a registration without confirming your identity and each person applying for registration must attend the Practice with his or her identification.

Full Name:					
Date of Birth:					
Address:					
Postcode:					
Telephone number:					
•					
Interested in online	YES /	NO			
prescriptions:					
Interested in online	YES /	NO			
booking appointments:					
Comments:					

For office use only:	Type of identification seen:		
	By whom:	Date:	
	Pin issued: YES / NO		