

OPT IN FORM – MEDICAL RECORDS

Please tick the relevant scheme(s) that you wish to **opt back into**.
If you are not sure what you have already opted out of, please do contact Dr Neil Bhatia and he will be able to tell you

- I would like to **OPT BACK INTO** the Summary Care Record
This *may* also opt you back into Share Your Care, so please tick here if required:
 - Please ensure that I remain **opted out** of Share Your Care*

 - I would like to **OPT BACK INTO** EMIS Web data streaming
This *may* also opt you back into Share Your Care, so please tick here if required:
 - Please ensure that I remain **opted out** of Share Your Care*

 - I would like to **OPT BACK INTO** all “secondary” uses of my GP record, including GDPR

 - I would like to **OPT BACK INTO** Share Your Care
-

Name:

Signature:

DOB:

Your name/signature & relationship if applying on behalf of another person (e.g. parent/legal guardian):

Please hand this form into reception, or post it to the surgery
or email it to Dr Neil Bhatia (Neil.Bhatia@nhs.net)