



Patient Access Application Form

Patient to complete:

Name:	
Date of Birth:	
Address:	
Email address (optional):	
Telephone number:	
Mobile number:	
Practice Guidance and Terms & Conditions read and understood:	YES/NO (delete as appropriate)

I have understood and will adhere to the Practice Guidance and terms and Conditions for the use of patient Access. I understand that failure on my part to adhere to the guidance may result in my Patient Access registration being terminated. I understand that this will in no way affect my registration with the practice. I also acknowledge that the practice may send me text/email reminders.

Signed: _____

Date: _____

Practice staff use only:

Proof of photographic ID given eg. Passport, driving license:	YES/NO (delete as appropriate)
Identity confirmed:	YES/NO (delete as appropriate)

Signed: _____





PATIENT ACCESS

PRACTICE GUIDANCE AND TERMS & CONDITIONS

Before registering to use Patient Access we would appreciate if you could read the following guidance and Terms & Conditions. Please keep this page for future reference.

This service is currently available to order repeat medications only, any other medication should be ordered in the usual way. Please bear in mind that not all types of medication are available on repeat.

Log-in details – The practice cannot accept responsibility if you lose or share your log-in details. Your log-in details will expire after 14 days and we strongly recommend that you register as soon as possible, creating your personal and secure password. Children and young adults over 15 must register themselves and pick up their registration letter in person from the practice with proof of ID. ***Do not share your log-in details with anyone.***

Please note – an email address and mobile number are required to use this facility. All family members must have separate email addresses (For example two adults and two children registering from the same household need four separate email address to be able to register all members of the household)

Carers – If you are a carer or hold a Power of Attorney for a patient we must have that person's prior consent to release registration details to you along with proof of your identity.

Inappropriate use – We will be monitoring the use of this service and we are sure that you will find it most useful. If however, we find that any users are abusing the service, we will revoke your access to the service and you will have to liaise with our reception team for services. ***Please note that access to this service can be withdrawn at any point without notice.***

If you have any problems – You can use the live chat function on the [Patient Access](#) website, there are also user guides and videos available at [Patient Access Support Portal](#). Alternatively, you can contact the practice and we will be happy to help.

Guidance notes

- Log into your Patient Access account and scroll down to repeat prescriptions.
- Select 'Make a request' and you will see a list of your current repeat medications which you can select from. There is also a comment box underneath where you can type any messages you have relating to the medication. You can also use this to enter the chemist name that you wish to collect your prescription from if you are not already coded for this.
- Click 'submit request', check the details are correct and then select 'Confirm'. Please allow at least 24 hours for staff to process your request. Prescriptions are not processed over weekends or public holidays.
- Log into your account and scroll down to Repeat Prescriptions again where you can check the progress of your request.
- If the request has been accepted your prescription will be available within 48 hours either for collection from the surgery or from your chosen chemist.
- If the request is declined by the practice there will be a comment as to the reason why.