

Consent to Proxy Access to Patient Online Access

Where the patient has capacity:

It is preferable that the patient requests access and then chooses to share access to their record with another person - rather than the practice giving access to a patients records directly to another person.

Where this isn't possible then the patient needs to complete the following form.

I,..... (name of patient), give permission to my GP practice to give the following person/ organisation proxy access to the online services as indicated below.

Full Access <ul style="list-style-type: none">• Current acute and repeat medication• Allergies• Immunisations• Update personal details• Book and cancel appointments• Test Results - including free text• All coded information	Standard Standard Standard Standard Standard Standard Yes/No
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I reserve the right to reverse any decision I make in granting proxy access at any time.

I understand the risks of allowing someone else to have access to my health records.

I have read and understand the information leaflet provided by the practice

Signature of patient	Date
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