|  |
| --- |
| **THE PANTON PRACTICE****Sharing Your Health Record Opt Out Form** |
| **Sharing Your Health Record for the Purposes of Your Direct Care** |
| **As a default, we will set your record as available to share both in SystmOne and the Summary Care Record.** Do you consent to your GP Practice sharing your health record with other local organisations who care for you? [ ]  Yes *(recommended option)* [ ]  No, except in an emergency.  [ ]  No, never *(not recommended)*Do you consent to your GP Practice viewing your health record from other organisations that care for you? [ ]  Yes *(recommended option)* [ ]  No |
| **Your Summary Care Record (SCR)** |
| Do you consent to having an Enhanced Summary Care Record with Additional Information? [ ]  Yes *(recommended option)* [ ]  No, Basic Summary Care Record only [ ]  No, I do not want a Summary Care Record |
| **Data sharing for Research (Not for direct care)** |
| If you do not mind your data being used for research purposes, you do not need to do anything else.  [ ]  I do not wish identifiable data about me to leave the practice.(XaaVL) [ ]  I do not wish data about me to be shared by HSCIC . (XaZ89)  |
| **Signature** |
| Signature |  |
|  | [ ]  Signed on behalf of patient |
| Name |   |
| Date |  |