

Pendle View Medical Practice

Leaflet for third party consent to medical information

47 Arthur Street

Brierfield

Nelson

BB9 5RZ

Frequently asked questions

What is third party consent?

There are times when you may decide to give permission for another person – e.g. family member, carer etc – to be able to access your information. In order to allow this access we need to have written permission on record

Can I change my mind?

Yes you can withdraw this permission/consent at any time

How do I give my consent/permission?

To authorise or withdraw consent you will need to complete the attached form. This will need to be completed and signed by both parties and returned to the surgery. This will then be scanned onto your records to show that permission has been given.

ACCESS TO MEDICAL INFORMATION

PATIENT DETAILS

SURNAME	
FIRST NAME	
ADDRESS	
POSTCODE	
CONTACT TELEPHONE NUMBER	
SIGNATURE	
DATE	

ACCESS TO MEDICAL INFORMATION

NOMINATED INDIVIDUALS DETAILS

SURNAME	
FIRST NAME	
ADDRESS	
POSTCODE	
CONTACT TELEPHONE NUMBER	
RELATIONSHIP TO PATIENT	
SIGNATURE	
DATE	

DATE HANDED TO RECEPTION STAFF

ACCEPTED BY
