**OPT OUT FORM – MEDICAL RECORDS**

Please tick the relevant scheme(s) that you wish to opt-out of.

(You can opt back in to any/all of them at any time in the future)

I would like to opt-out of **the Summary Care Record**

Please could you add the relevant “electronic flag”/read

code *9Ndo* to my medical record

I would like to opt-out of ***all* “secondary” uses of my GP**

**record** (including mandatory uploads to NHS Digital)

Please could you add the relevant “electronic flags”/read

codes *9Nu0* and *9Nu4* to my medical record

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/fax it to the surgery