LANGTHORNE HEALTH CENTRE **13 LANGTHORNE ROAD** LONDON, E11 4HX **TELEPHONE NUMBER: 0208 539 2585**



DATA SHARING

Name: Date of Birth:

You, the patient, in a consultation with one of our healthcare professional's, can choose to permit or restrict access to information entered into your personal record at L.L Medical Care Ltd (Agarwal & Agrawal Practice)

You, the patient, will be asked to give your record sharing consent with L.L Medical Care Ltd (Agarwal & Agrawal Practice)

You're consent can be changed anytime.

SHARING OUT

Do you, the patient, wish to consent to the data sharing of data h with L.L Medical Care Ltd (Agarwal & Agrawal Practice) with any other organisation that may care for the patient? – Please tick the appropriate box...

YES – Share data with the organisation

NO – Do not share any data recorded here

Consent not asked

SHARING IN

Do you the patient, consent to the viewing of data with L.L Medical Care Ltd (Agarwal & Agrawal Practice) with other care services that may care for the patient where you, the patient, has agreed to make the data shareable? - Please tick the appropriate box...

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CONSENT GIVEN CONSENT REFUSED CONSENT NOT ASKED

Date:

Signature: