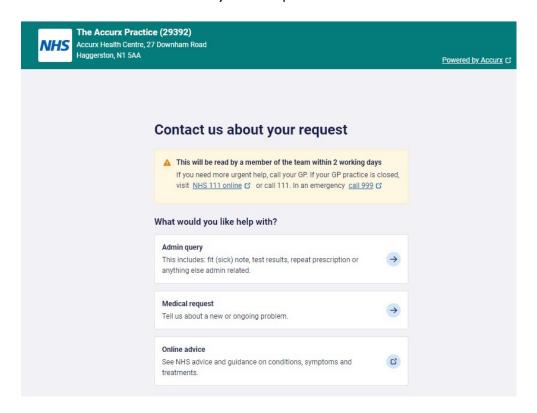
HOW TO SUBMIT AN ONLINE REQUEST TO YOUR GP PRACTICE



Please note! If your medical query is urgent then contact '111' or for a medical emergency contact, '999'.

If you want to submit a query to your GP practice you will need to visit their website. A link should be provided that allows you to begin submitting your query. However, if this is not clear then you will need to contact your GP practice.



When selecting the link you will be able to see the name of your practice, the address of the practice, a standard warning message indicating the expected duration for your query to be responded to, and information on what to do if your query is a medical emergency.

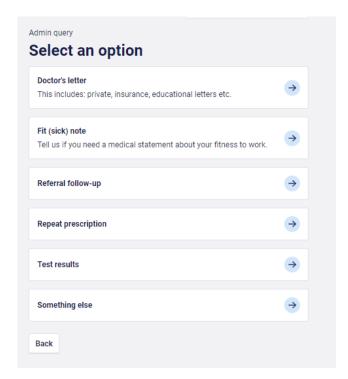
Below this information are three choices to select from based on the nature of your query.

"I have an admin query"

Selecting this option will allow you to:

- Request a doctor's note
- Request a fit (sick) note
- Ask questions or get an update on a referral
- Request your Repeat Prescription
- Follow-up on Test Results (Blood Test, Scans, etc.)
- Any other advice or information that is not medically related



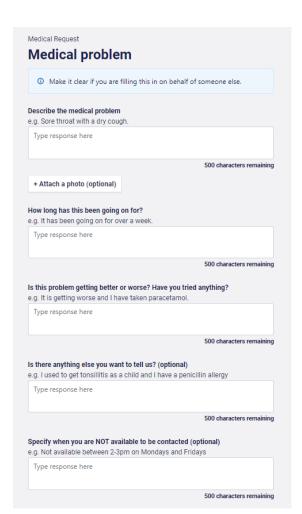


"I want help for a medical issue"

Selecting this option will allow you to submit a request to get help regarding a medical issue. You will be asked to provide the following:

- A description of the medical problem (Option to attach up to 5 photos)
- Describe how long you have experienced these symptoms or had concerns, as well as whether these symptoms/concerns are better or worse
- Describe what you are particularly worried about.*
- How you would like your GP practice to help
- List times that you are not available to be contacted during GP opening times.*
- * = are option fields and do not require you to enter any information if you don't want/need to.





Medical Urgency Check

Following the option you select, you will be asked to confirm whether you are experiencing any of the below symptoms.

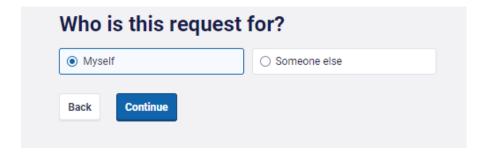
Confirm this is not an emergency Adults Children Call 999 or go to A&E now if you or someone has any of • signs of a heart attack (chest pain, pressure, heaviness, tightness or squeezing across the chest) • signs of a stroke (face dropping on one side, cannot hold both arms • sudden confusion or delirium (unsure of own name or age) • suicide attempt (by taking something or self-harming) • severe difficulty breathing (not being able to get words out, choking a serious accident, or severe injuries burns or scalds • heavy bleeding (spraying, pouring or enough to make a puddle) · severe injuries (after a serious accident or assault) • a seizure or fit (shaking, jerking, or unconscious & can't be woken up) • sudden, rapid swelling (of the lips, mouth, throat or tongue) British Sign Language (BSL) speakers can make a BSL video call to 999. Deaf, hard of hearing or speech-impaired people can use 18000 to contact 999 using text relay or a textphone. A In an emergency don't use this form as your request will NOT be seen immediately. If it's not an emergency but you need medical help right now, please call your GP. If your GP practice is closed visit NHS 111 online co or call 111. I confirm, none of these are present

If you are experiencing any of these symptoms and acknowledge this you will be signposted to the emergency services.



Personal Details

You will be asked to provide your personal details before submitting your request. Providing this information will allow your GP to match your medical record to the request you have submitted in this form.



Your details	
Provide details so we can	identify who this request is for.
First Name	
Last Name	
Last Haine	
Date of birth	
For example 26 2 1956 Day	Month Year
	Ted Ted
Sex	
Please select	
Why aren't there mo	ore options?
Postcode	
Your phone number A mobile number is prefer	red.
How would you like to be	contacted? (Select all that apply)
-	llow your preferences, this may not always be possible
☐ Text message	
☐ Phone call	
Do you want to verify your	identity by receiving an access code?
This will help process your	
O Yes, verify	O No, skip this step
Back Continue	



If you are submitting this form on behalf of someone else then you will be asked to provide your own details along with the person's details that you are submitting this form. Examples of when and might be the case will include (but are not limited to);

- You are the person's guardian/parent.
- You are the person's carer.
- You are contacting the practice and have asked the receptionist to complete this for you.

Who is this request for?	
O Myself	Someone else
Back	

Your details	
Provide details so we can contact you.	
First Name	
Last Name	
Your phone number	
rour priorie ridinoes	
Relationship to patient	
Patient details	
Provide details so we can identify who this requ	est is for.
First Name	
Date of birth	
For example 26 2 1956	Year
For example 26 2 1956	Year
For example 26 2 1956 Day Month	Year
For example 26 2 1956 Day Month	Year
For example 26 2 1956 Day Month Sex	Year
For example 26 2 1956 Day Month Sex Please select	
For example 26 2 1956 Day Month Sex	Year
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For example 26 2 1956 Day Month Sex Please select	· ·
For example 26 2 1956 Day Month Sex Please select	that apply)
For example 26 2 1956 Day Month Sex Please select	that apply)
Sex Please select	that apply)



Once you have completed your details and entered your phone number* you will then be asked whether you want to verify your identity by receiving an access code.

*= You must ensure that you enter a valid UK mobile number.

Do you want to verify your identity by This will help process your request fa	
O Yes, verify	O No, skip this step

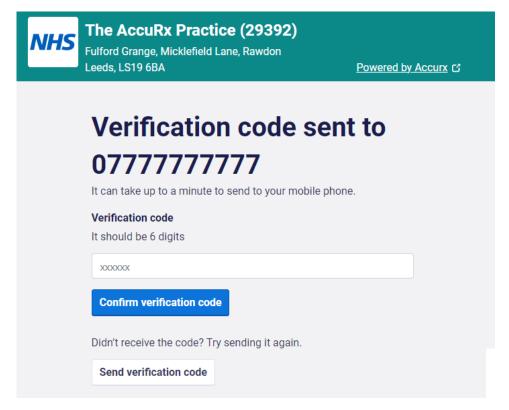
What happens if I select, 'Yes, verify'?

If you click 'Yes, verify' and then 'Continue' you will be sent an SMS message with a verification code to enter on the next page (see below). This verification code is known as a two-step authentication process and it allows your GP to match your request to your health record much faster.

(Please note, this code isn't a confirmation of your request submission.)

Today 09:21

Your verification code is 691545 Thanks, The AccuRx Practice (29392)





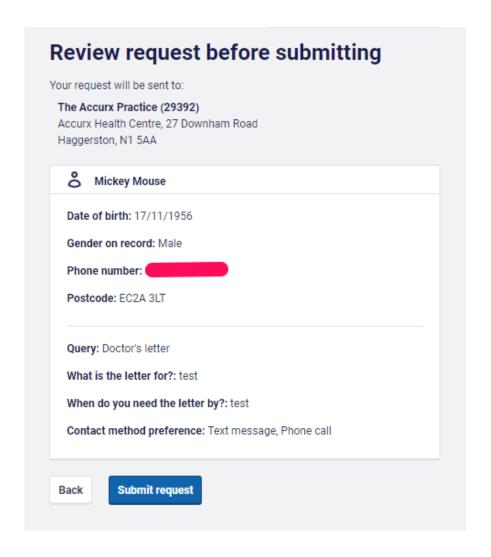
What happens if I select, 'No, skip this step'?

If you click 'No, skip this step" then you will be able to continue to complete the form however, it may mean that there will be a slight delay in your request being completed. Your GP will have to manually locate your health record and match it with your request.

Confirming Your Request

Once you are satisfied with the information you have provided and you have provided your details (and completed the two-step verification process) then you will be able to:

- · Confirm you are sending this to the correct practice,
- · Confirm that all the information you have provided is relevant and accurate,
- · Confirm that you have entered your personal details correctly,
- State the best method to contact you, 'Text message' or 'Phone Call',





When you are finished you will need to select the, 'Submit Request' button at the bottom of the screen.

Submit request

Following that, you will be navigated to the next page confirming that your request form has been submitted.

