



# Langport Surgery

Please complete all pages in FULL using BLOCK capitals

## CONFIDENTIAL MEDICAL REGISTRATION FORM (ADULT)

Title:  Mr  Mrs  Miss  Ms

Sex:  Male  Female

Surname

First Names (in full)

Preferred Calling Name

Previous Surname(s)

Date of Birth (dd/mm/yyyy)  NHS Number (10 digits)

Town & Country of Birth

Address   
Post Code:

Telephone number  Mobile number

Email address

### Please help us trace your previous medical records by providing the following information:

Your previous address in the UK   
Post Code:

Name of Previous GP

Name and Address of Previous GP Surgery   
Post Code:

### If you are from abroad (Overseas Questionnaire also to be completed):

Your first UK address where Registered with a GP   
Post Code:

If previously resident in the UK date of leaving  Date you first came to the UK

**If you are returning from the Armed Forces:**

Addresss before enlisting  Post Code:

Enlistment date  Date of leaving forces

**Please tell us about yourself:**

Please list any allergies you have

What is your height?  What is your weight?

**Lifestyle smoking**

Do you smoke?  Yes  No If yes, which of the following do you smoke;  Cigarettes  Roll Own Cigarettes

Are you an ex-smoker?  Yes  No When did you give up?

How many cigarettes do you or did you smoke?  <1/day  1-9/day  10-19/day  20-39/day  40+/day

If you smoke rolled cigarettes  how many grams a week do you or did you smoke?

**Lifestyle alcohol**

Do you drink alcohol?  Yes  No If yes how many units a week?   
(1 unit = 1/2 pint of beer/cider, 1 glass of wine, 1 measure of spirit)

Please also complete our Alcohol Use Questionnaire

**Family History**

Has a close relative suffered with any of the following?  
Heart disease under 60 years of age?  Yes  No Which relative(s)   
Heart disease over 60 years of age?  Yes  No Which relative(s)   
Stroke?  Yes  No Which relative(s)

Are you Housebound?  Yes  No

Do you have a carer?  Yes  No

*A carer as defined by Carer UK is someone of any age who "provides unpaid care and support to ill, frail or disabled friends or family members who could not manage without help"*

Information about your carer:

Full Name

Relationship

Address  
(if different from yours)   
Post Code:

Telephone Number  Mobile Number

Is this person registered at Langport Surgery?  Yes  No

**Communication requirements**

Do you have any communication needs relating to a disability, impairment or sensory loss?  
*For example Large Print, Sign Language, Easyread, Braille etc.*

If so, please state

**Ethnicity**

Please indicate your ethnic origin:

- British or mixed British  Irish  African  Caribbean  Indian  Pakistani  
 Bangladeshi  Chinese  Other (please state):   
 Do not wish to state

Spoken First Language

**Next of kin**

Name

Relationship to Patient

Address   
Post Code:

Telephone Number  Mobile Number

## Supply of Medicines and Appliances Prescribed by Langport Surgery

We are a dispensing practice for any patient who resides more than 1 mile (1.6 kilometres) 'as the crow flies' from a chemist. They have the choice for their prescriptions to be provided by the dispensary at the surgery. If this applies to you and you wish us to dispense your prescriptions please tick the box below:

I live more than 1 mile 'as the crow flies' from the nearest chemist

Signature

I confirm that the information I have provided is true to the best of my knowledge.

Sign:

Date:

Signature of patient  Signature on behalf of patient

## NHS Organ and Blood Donation Register

If you wish to register on the NHS Organ or Blood Donation Register please self-register on [www.nhsbt.nhs.uk](http://www.nhsbt.nhs.uk) or telephone the helpdesk on 0300 123 2323

## IMPORTANT INFORMATION

Patients **MUST** bring the following documents when handing in this form at reception;

**Photographic Identification** – Passport or Driving Licence

AND

**Document confirming address** –

Tenants Rental Agreement, Mortgage Company letter, Solicitors letter, Insurance Company letter, Utility Bill (not mobile phone), Bank Correspondence

**Patients from Overseas** who are registering with a GP surgery for the first time and intend to reside in the UK permanently **MUST** bring the following documents when handing in this form at reception;

Photographic Identification – Passport or Identity Card

AND

Document which shows proof of settled residency –

Rental/Housing agreement, Utility Bill (not mobile phone), Bank Correspondence, Document from employer confirming employment



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## ONLINE MEDICATION ORDERING

Do you take any Repeat Medications? Set up online prescription ordering today by downloading the NHS App or visiting [www.patientaccess.com](http://www.patientaccess.com)

You will be sent a Linkage Key and an Account Code to the email you have provided below once you have been registered at the surgery. This will link you to Langport Surgery and allow you to order your medication online.

I would like to set up Online Prescription Ordering

Full Name

Date of Birth (dd/mm/yyyy)

Mobile number

Email address

By Signing below, I agree to Langport Surgery activating my online Medication Ordering via Patient Access or the NHS App.

Signed: .....

Date: .....

## OFFICE USE ONLY

Date application form received.....

ID verified by .....

**Method of identification (please tick all that apply):**

- Identification document(s) provided (please state).....
- Identification vouched by staff member (please state).....
- Identification vouched with confirmation of information held in medical record

**Please tick the following once completed:**

- EMIS settings configured
- Patient informed/provided with logon details

Date of completion.....



## Alcohol Use Disorders Identification Test

Full Name

DOB

For each question select your answer and tick the appropriate box (please complete ALL questions)

One unit of alcohol is: ½ pint average strength beer/lager OR one glass of wine OR one single measure of spirits. A can of high strength beer or lager may contain 3-4 units.

**1. How often do you have a drink containing alcohol?**

Never  Monthly or less  2-4 times a month  2-3 times a week  4 or more times a week

**2. How many units of alcohol do you drink on a typical day when you are drinking?**

1 or 2  3 or 4  5 or 6  7, 8 or 9  10 or more

**3. How often do you have six or more units of alcohol on one occasion?**

Never  Less than monthly  Monthly  Weekly  Daily or almost daily

**4. How often during the last year have you found that you were not able to stop drinking once you had started?**

Never  Less than monthly  Monthly  Weekly  Daily or almost daily

**5. How often during the last year have you failed to do what was normally expected from you because of drinking?**

Never  Less than monthly  Monthly  Weekly  Daily or almost daily

**6. How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session?**

Never  Less than monthly  Monthly  Weekly  Daily or almost daily

**7. How often during the last year have you had a feeling of guilt or remorse after drinking?**

Never  Less than monthly  Monthly  Weekly  Daily or almost daily

**8. How often during the last year have you been unable to remember what happened the night before because you had been drinking?**

Never  Less than monthly  Monthly  Weekly  Daily or almost daily

**9. Have you or someone else been injured as a result of your drinking?**

No  Yes, but not in the last year  Yes, during the last year

**10. Has a relative or friend or doctor or another health worker been concerned about your drinking or suggested you cut down?**

No  Yes, but not in the last year  Yes, during the last year

STAFF USE ONLY

Code 38D4  
(Total out of 12)

Code 38D4  
(Total out of 40)





# NHS Summary Care Record



Langport Surgery is supporting Summary Care Records and as a patient you have a choice.

## What is the NHS Summary Care Record?

The NHS Summary Care Record is a short summary of your GP medical records. Its intention is to help clinicians in Accident and Emergency, 'Out of Hours' and other health services, that do not know your medical history but wish to provide you with safe, timely and effective treatment.

Essential details about your healthcare can be difficult to remember, particularly when you are unwell or have complex care needs. Having a Summary Care Record helps you recall vital information when receiving care. Only authorised healthcare professionals providing you with care in England, will be allowed to access your record, this is once they have asked your permission.

## What medical information is included in the NHS Summary Care Record?

The **Basic Summary Care Record** contains basic information about:

- Allergies you suffer from
- Medication you are taking
- Any bad reactions to medicines you have previously taken

The **Enhanced Summary Care Record** contains additional information including:

- Your illnesses and health problems
- Operations and vaccinations you have had in the past
- How you would like to be treated - such as where you would prefer to receive care
- What support you might need
- Who should be contacted for more information about you

## Please tick a box and sign below:

- Yes I want a **Basic** Summary Care Record (Code as: 9Ndm)
- Yes I want an **Enhanced** Summary Care Record (Code as: 9Ndn)
- No I do not want a Summary Care Record (Code as: 9Ndo)

Name of patient: ..... Date of Birth: .....

Signature: ..... Date: .....

If you are completing this form on behalf of another person, please ensure that you fill out their details above; **you** sign the form above and provide your details below:

Name: .....

Capacity – please circle one

Parent	Legal Guardian	Lasting power of attorney for health and welfare
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# Welcome to Langport Surgery!

Please fill out all the forms enclosed and return them to the surgery; your registration can take up to 2 weeks to complete and you will be notified when this has been done. If you need be seen urgently, please make the Receptionist aware and this process will be expedited for you.

## HOW TO CONTACT THE DOCTOR

Langport Surgery is an online practice; this means that all contact with the Doctor or Acute Care Team must come through an Online Consultation in the first instance.

### What is an Online Consultation?

It's a way to send a secure message to your doctor to request help or advice or tell them about your problem. You no longer need to wait for an appointment to do this.

The doctor may be able to deal with your query online, by replying to your question or they may need to book you a telephone or face to face appointment.

### What do I need to do now?

Please register in full by visiting [www.langportsurgery.co.uk](http://www.langportsurgery.co.uk) and click on the blue box titled 'Online Consultations'. Here you can sign up and be ready for whenever you might need to start an online consultation.

We aim to deal with all queries on the day, so contact us on a day you are available. You can add comments about your availability whilst submitting your request. If you would like to contact a particular doctor, please send your query in on a day that doctor works (usual working days can be found on our website).

You can submit your query between 6am and 4pm. If you have an urgent medical emergency after 4pm you should contact our reception team who will be able to help. If you do not have access to the internet or are struggling to submit your request, please do contact Reception on 01458 250464 where a receptionist will be happy to help you!

### How long until I hear back?

All medical queries are reviewed by a doctor you can expect a response on the same day in most cases. Replies for administrative queries are usually actioned within 48 hours.

## USEFUL INFORMATION

<b>Langport Surgery Main Number:</b>	01458 250464
<b>Langport Surgery Website:</b>	<a href="http://www.langportsurgery.co.uk">www.langportsurgery.co.uk</a>
<b>Acute Eyecare Service (ACES):</b>	Please contact Reception for local ACES provision
<b>Dental Advice Line:</b>	0300 123 7691
<b>Local Minor Injuries Units:</b>	Bridgwater Community Hospital, Bower Ln, Bridgwater TA6 4GU (8am – 8.30pm) West Mendip Hospital, Old Wells Rd, Glastonbury BA6 8JD (8am – 8.30pm)