

Registration – Additional Information

Full Name	<input type="text"/>
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Date of Birth	<input type="text"/>	Height	<input type="text"/>	Weight	<input type="text"/>
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Mobile Number	<input type="text"/>
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Do you consent for to The Clays Practice send messages to you regarding your health and appointments	<input type="text"/> Yes / No
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Other telephone	<input type="text"/>
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Email Address	<input type="text"/>
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Do you consent for The Clays Practice to email you about your health and appointments	<input type="text"/> Yes / No
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Ethnicity

White – British	<input type="text"/>	White – Cornish	<input type="text"/>	White – Other	<input type="text"/>	White & Black Caribbean	<input type="text"/>	
White & Black African	<input type="text"/>	White & Asian	<input type="text"/>	Asian – Indian	<input type="text"/>	Asian – Pakistani	<input type="text"/>	
Asian – Bangladeshi	<input type="text"/>	Black – Caribbean	<input type="text"/>	Black – African	<input type="text"/>	Black – Other	<input type="text"/>	
Asian – Chinese	<input type="text"/>	If you selected “Other”, please specify:					<input type="text"/>	<input type="text"/>

Your main language	<input type="text"/>	If other than English, do you need a translator?	<input type="text"/> Yes / No
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Next of Kin – For emergencies (OPTIONAL)

Name	Contact Number	Relationship
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Military Veteran

All veterans are entitled to priority access to NHS care for conditions associated with their time within the armed forces (service-related).

If you are a military veteran, and would like us to be aware of the fact, please indicate so below

Armed Forces Reservist	<input type="text"/>	Army personnel	<input type="text"/>	RAF Personnel	<input type="text"/>	Royal Marines Personnel	<input type="text"/>
Royal navy Personnel	<input type="text"/>	Trainee – Armed Forces	<input type="text"/>	Armed Forces Other	<input type="text"/>		

Caring Details

Are you a Carer?

Yes	<input type="text"/>	No	<input type="text"/>
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Do you HELP to look after someone close who could not manage without you? **If so, you are a carer!**

Carers provide help and support to a partner, relative, child, friend or neighbour who could not manage without your help due to physical or mental illness, disability, frailty, life-limiting illness or addiction.

Once the Practice knows you are a carer, we may be able to offer you further assistance, such as free flu-vaccination and information on available support. **If** the person you care for agrees, enter their details below:

Name	Contact Number	Relationship
<input type="text"/>	<input type="text"/>	<input type="text"/>

Does someone else care for you?

Yes	<input type="text"/>	No	<input type="text"/>
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Does someone else, a relative or a friend or a neighbour, help to care for you? **If** the person who helps care for you agrees, please enter their details below:

Name	Contact Number	Relationship
<input type="text"/>	<input type="text"/>	<input type="text"/>

Smoking

Do you Smoke	Yes / No / Ex-Smoker
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If "Yes", how many?		If ceased, when?	
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Alcohol Screening

1 unit is typically:

Half-pint of regular beer, lager or cider; 1 small glass of low ABV wine (9%); 1 single measure of spirits (25ml)

UNIT GUIDE



The following drinks have more than one unit:

A pint of regular beer, lager or cider, a pint of strong /premium beer, lager or cider, 440ml regular can cider/lager, 440ml "super" lager, 250ml glass of wine (12%)



Audit-C Questions	Scoring System					Your Score
	0	1	2	3	4	
How often do you have a drink containing alcohol	Never	Monthly or less	2-4 times per month	2-3 times per week	4+ times per week	
How many units of alcohol do you drink on a typical day when you are drinking?	1 – 2	3 – 4	5 – 6	7 – 9	10+	
How often have you had 6 or more units if female, or 8 or more if male, on a single occasion in the last year?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
					TOTAL:	

Summary Care Record (SCR)

The NHS is using an electronic record called the SCR to support patient care. The SCR is a copy of key information from your GP record. It provides authorised healthcare staff with faster, secure access to essential information about you when you need unplanned care (Such as A+E) or when your GP practice is closed.

It will allow for more clinically appropriate action or decisions to be made during consultation with the patient. You can opt out if you wish: **(Please tick ONE of the following options)**

I want a (full) Summary Care Record with core and additional information	<input type="checkbox"/>
I want a core Summary Care Record (express consent for medication, allergies and adverse reactions only)	<input type="checkbox"/>
I wish to opt out of the Summary care Record. I understand that if I opt out of the Summary Care Record, health services will not be able to access my essential health records in an emergency.	<input type="checkbox"/>

Record Sharing

As an informed patient, you can choose to permit or restrict access to the information entered into your health record. Your consent can be changed at any time.

Sharing Out

Do you consent to the sharing of data recorded at The Clays with any other organisations that may care for you?

Yes – Share data with other organisations

No – do not share any data recorded here

Sharing In

Do you consent to the viewing of data by The Clays that is recorded at other care services that may care for you

Yes – Consent Given

No – Consent refused

Signed:

Date: