

NHS England's Care.Data – Opt-Out Form

NHS England's care.data system aims to provide timely, accurate information to citizens, clinicians and commissioners about the treatments and care provided by the NHS.

Please refer to the NHS England's care.data patient information leaflet before completing this form. The NHS England's care.data patient information leaflet can be found on the NHS Choices website (www.nhs.uk)

OPT-OUT FORM – CONFIDENTIAL

- A. I do not want any identifiable information about me to be shared with the Health and Social Care Information Centre.**

I understand that in the event of a national emergency this opt-out may be overridden.
I understand that this opt-out only applies to records held by my GP practice and not to records held by hospitals or any other health services (9Nu0)

- B. I am happy for identifiable information about me to be shared with the Health and Social Care Information Centre for use within the NHS but I do not consent information about me being passed on to any other organisation or third party for any purpose (9Nu4).**

- C. Please complete in BLOCK CAPITALS**

Title: _____ Date of Birth: _____

Surname: _____ Forename: _____

Address: _____

_____ Postcode: _____

Telephone Number: _____

Signature: _____ Date: _____

- D. If you are filling out this form on behalf of another person or a child, their registered GP will consider this request. Please ensure that you fill out their details in section C and your details in section D.**

Your Name: _____

Your Signature: _____

Relationship to Patient: _____ Date: _____

FOR PRACTICE USE ONLY: Patient record updated with Read Code 9Nu0 'Dissent from secondary use of GP patient identifiable data' and Read Code 9Nu4 'Dissent from disclosure of personal confidential data by Health and Social Care Information Centre'.

Date Completed _____ Initials: _____