

# Bartlett Group Practice

## E-mail and SMS Consent (over 16y only)

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Mr/Mrs/Miss/Ms \_\_\_\_\_

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

We would like to use text messages and/or emails to:

- Remind you of your appointment
- Inform you of actions required following test results.
- Invite you to make routine appointments and/or for chronic condition reviews (e.g. for asthmatic & diabetic patients).
- Send you general information about the surgery and/or appropriate campaigns.

If you would like to register for this service please ensure you have read and agree to the following terms and conditions and return this form to the surgery.

### Terms & conditions

- I acknowledge that text messages & emails are an additional service and that these may not take place on all / or on any occasion, and that the responsibility of attending appointments or cancelling them still rests with me.
- I can cancel the text message / email facility at any time.
- The surgery does not offer a reply facility to enable patient to respond to texts or emails directly.
- Text messages and emails are generated using a secure facility however I understand that they are transmitted over a public network onto a personal telephone or email address and as such may not be secure.
- I accept that it is my responsibility to inform the surgery if I change my contact details.

I consent to communication via e-mail	YES	NO	e-mail address
I consent to communication via SMS	YES	NO	Mobile tel. no.

Signature \_\_\_\_\_ Date \_\_\_\_\_

For practice use only	Scanned and coded by	
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