

## Health & Social Care Information Centre (HSCIC) opt out form

Please ensure you have read the patient leaflet 'How information about you helps us to provide better care' before completing this form.

I object to any of my Personal Confidential Data from leaving the HSCIC secure environment

I object to any extraction of my Personal Confidential Data from my GP practice unless there is (a) a statutory duty to share information (b) a court order or (c) an overriding public interested in disclosure

I agree to share details of my medication, allergies and alerts (eg hard of hearing, requires large print, keycode etc) with Doctors and Hospitals/Out of Hours/Ambulance Services providing medical care

Name:

Date of Birth:

Telephone number:

Signed:

**Please note that your NHS number will be given to HSCIC in order for them to apply the objection**

Please return this form to:

**Crabbs Cross Surgery  
38 Kenilworth Close  
Crabbs Cross  
Redditch  
B97 5JX**

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EMISNQCO197