## How to register with a GP surgery

To register yourself or someone else with a GP surgery, fill in this form and give it to the surgery you want to register with.

#### You should:

- use a 'tick' or 'x' for boxes where necessary
- complete all sections that apply to you or the person you are registering
- · provide as much information as possible
- use BLOCK CAPITALS
- if you cannot answer a question or it does not apply write 'Not applicable' or 'N/A'
- · only use black or blue ink
- ask at the reception desk of the surgery you want to register with if you need help completing this form

#### Which sections should be completed?

- · Part A all sections that apply.
- Part B this section is optional, but will help the GP provide the best care.
- Part C only complete these sections if you do not normally live in the UK.

You may be contacted by the GP surgery if you do not complete all the relevant sections.

### Register online

It is quick and secure to register with a new GP surgery online. Check the website of the surgery you want to register with for a link for the 'Register to a GP surgery' service.

#### **PART A**

Try to provide as much information as possible. If a question does not apply to you or the person you are registering write 'Not applicable' or 'N/A'.

### Section 1 - Who is registering?

Are you registering	
Yourself (Go to Section 2 - Patient details)	Someone else
rovide your details if you are registering someone els	se.
rovide your details if you are registering someone els Your name	se.  4 Your contact phone number



You can help save lives as a blood or organ donor. Become someone's lifeline. **Visit www.nhsbt.nhs.uk/lifeline** or **call us on 0300 123 23 23.** 

# **Section 2 - Details of patient registering**

	Title	13	Name and address of UK GP surgery you registered w
	First name		
			Postcode
	Last name	14	Have you ever lived somewhere else in the UK?
-			Yes No
J	Middle name (if you have one)	15	Last address in the UK
	Previous last name		
			Postcode
	Date of birth DD MM YYYY		The NHS and your GP surgery can use these details to call, text or email you about health care services.  All phone numbers must be registered in the UK.
	What is your sex as recorded on your NHS record?	16	Home phone number
	Female Male Intersex	A PAIN	
	Not specified or known	17	Mobile phone number
]	NHS number (if you have it)		
		18	Email address
	Village, town or city of birth		
	Country of birth	19	Name of emergency contact
	Country of Birth		
i	Current address	20	Phone number of emergency contact
	ourient address		
		21	Their relationship to you
	Postcode		
	No fixed address	22	Name of next of kin
	What postcode did you give to the last GP surgery you registered with?	23	Phone number of next of kin
		24	Their relationship to you

# Section 3 - Patients under 18 years

Where were they born?	2 Where was the mother living when the baby was bo
England Northern Ireland Wales	
Isle of Man Scotland Outside the UK	
	Postcode
For nationto under 19 years	DATE OF THE SECOND STREET
For patients under 18 years	
Do you attend any of the following?	3 Are any of these involved in your care?
School Nursery Home school	Hospital specialist Health worker
None of these	Social worker None of these
None of triese	Social Worker Notice of these
Address	4 Have you had all your routine vaccinations?
	Yes No Don't know
E	5 Did you get your routine vaccinations in the UK?
	Did you get your fourne vaccinations in the one
Postcode	Yes No Don't know
ion 4 - Additional information	
What is your ethnic group?	(C) Asian or Asian British
	(C) Asian or Asian British  Indian Pakistani Bangladeshi
What is your ethnic group?	Indian Pakistani Bangladeshi
What is your ethnic group?  Choose one section from A to E, then tick one box to best	Indian Pakistani Bangladeshi Chinese
What is your ethnic group?  Choose one section from A to E, then tick one box to best describe your ethnic group or background.  (A) White	Indian Pakistani Bangladeshi
What is your ethnic group?  Choose one section from A to E, then tick one box to best describe your ethnic group or background.  (A) White  English, Welsh, Scottish, Northern Irish or British	Indian Pakistani Bangladeshi Chinese
What is your ethnic group?  Choose one section from A to E, then tick one box to best describe your ethnic group or background.  (A) White	Indian Pakistani Bangladeshi Chinese
What is your ethnic group?  Choose one section from A to E, then tick one box to best describe your ethnic group or background.  (A) White  English, Welsh, Scottish, Northern Irish or British  Irish  Gypsy or Irish Traveller	Indian Pakistani Bangladeshi Chinese Any other Asian background  (D) Black/African/Caribbean/British
What is your ethnic group?  Choose one section from A to E, then tick one box to best describe your ethnic group or background.  (A) White  English, Welsh, Scottish, Northern Irish or British	Indian Pakistani Bangladeshi Chinese  Any other Asian background  (D) Black/African/Caribbean/British  African Caribbean
What is your ethnic group?  Choose one section from A to E, then tick one box to best describe your ethnic group or background.  (A) White  English, Welsh, Scottish, Northern Irish or British  Irish Gypsy or Irish Traveller  Any other White background	Indian Pakistani Bangladeshi Chinese Any other Asian background  (D) Black/African/Caribbean/British
What is your ethnic group?  Choose one section from A to E, then tick one box to best describe your ethnic group or background.  (A) White  English, Welsh, Scottish, Northern Irish or British  Irish  Gypsy or Irish Traveller  Any other White background  (B) Mixed or multiple ethnic groups	Indian Pakistani Bangladeshi Chinese  Any other Asian background  (D) Black/African/Caribbean/British  African Caribbean
What is your ethnic group?  Choose one section from A to E, then tick one box to best describe your ethnic group or background.  (A) White  English, Welsh, Scottish, Northern Irish or British  Irish Gypsy or Irish Traveller  Any other White background	Indian Pakistani Bangladeshi Chinese  Any other Asian background  (D) Black/African/Caribbean/British African Caribbean  Any other Black, African or Caribbean background
What is your ethnic group?  Choose one section from A to E, then tick one box to best describe your ethnic group or background.  (A) White  English, Welsh, Scottish, Northern Irish or British  Irish  Gypsy or Irish Traveller  Any other White background  (B) Mixed or multiple ethnic groups	Indian Pakistani Bangladeshi Chinese  Any other Asian background  (D) Black/African/Caribbean/British African Caribbean  Any other Black, African or Caribbean background  (E) Other ethnic group
What is your ethnic group?  Choose one section from A to E, then tick one box to best describe your ethnic group or background.  (A) White  English, Welsh, Scottish, Northern Irish or British  Irish  Gypsy or Irish Traveller  Any other White background  (B) Mixed or multiple ethnic groups  White and Black Caribbean	Indian Pakistani Bangladeshi Chinese  Any other Asian background  (D) Black/African/Caribbean/British African Caribbean  Any other Black, African or Caribbean background

## **Section 4 - Additional information**

2 Have	you registered with a UK GP before?	10	Do you	have a	carer	?				
	Yes No	H	Ye	s	N	0				
	u have moved to the UK, what date did	11	What is	your re	lation	ship to	your	carer	?	
you	arrive?									
							1			
4 Have	you ever served in the UK Armed Forces or were	12	What ty	pe of ca	irer ar	e they	?			
	ver registered with a Ministry of Defence GP in	Jury,	Yo	ung care	er, und	ler 18		Paid	as a jo	ь
the o	K or overseas?		Un	paid, bu	t may	get bei	nefits		Foster	carer
	Yes No Prefer not to say	40	C		4 4 4 1 4 11					
If you	were given a FMED133A form (sometimes called	13	Carer's	contac	t telep	onone	numb	er		
	1ED1 form) when you left the UK Armed forces,									اللاللا
you s	nould give this to your GP surgery.	14	What ph	narmacy	do y	ou war	nt you	r pres	criptio	ns sent to?
5 Do y	ou need an interpreter for your appointments?						1			
	Yes No		Pharma	icy addr	ess					80.0
6 What	language?									
O What	ranguage r		-							
			Postco	do						
	British Sign Language (BSL)		Posico	ue				,TT	V.D.	5 m 5 m
7 Are ye	ou a carer?		You can							
Aley	a cate ?		your GP Your sur						э а рла	macy.
	res No	15			41					
8 What	s your relationship to the person you are caring for?	13	Do you pharmae		e thai	n 1 mil	e tron	n your	neares	st —
1.5			Yes		No					
					140					
9 What	type of carer are you?	16	Would y appliance					-	-	icines or
	oung carer, under 18 Paid as a job		прими	.03 11 0111	your	ileal e	at pric	iiiiacy		
	Inpaid, but may get benefits Foster carer		Yes		No					
	mpaid, but may get benefits									
Do	you want important information from your GP record to	he avai	lable to c	ther he	alth a	nd car	a prof	acciar	nale?	
	r GP surgery needs permission to share important information ord (SCR). Your SCR can only be shared with health and ca									
	. It gives them access to vital information from your GP reco									1 = 1
	Yes, share a Summary Care Record with additional inf	ormatic	n							
	Includes details of your medicines, allergies, adverse reac			al inform	nation,	, which	includ	des det	ails of a	any
	significant illnesses and health problems, operations and v	vaccinati	ons							
	Yes, share a Summary Care Record without additional									
	Includes details of your medicines, allergies and adverse r	eactions	only							ME.
45.4	No, do not share a Summary Care Record									
33	Details of your medicines, allergies, adverse reactions and involved in your direct care	d any ad	ditional in	formatio	n will r	not be s	shared	d with a	anyone	
3_ 7	,							_		

## **PART B**

You do not have to complete this section. But any information you do give will help the GP give you the best care.

### **Section 5 - Patient health**

1	Have you ever had any of these conditions?	10 Allergies	
	Alzheimer's disease or dementia		
	Asthma Cancer Diabetes		
	Epilepsy Heart disease		
	High blood pressure (hypertension)		
	Stroke Thyroid disease		
2	What best describes you?		
	I smoke I used to smoke		
	I have never smoked Prefer not to say		
3	On average, how many cigarettes do you smoke a day?		
4	What date did you stop smoking? DD MM YYYY		
M			
5	How often do you drink alcohol?		
	Never Monthly or less	11 Mental health conditions	
	2 to 4 times a month 2 to 3 times a week		
	4 or more times a week Prefer not to say		
6	How many units of alcohol do you drink on a typical		
	day when you are drinking? 1 pint of 4% beer is 2.5 units. a small 125ml glass of		
	wine is 1.5 units and a 25ml shot of spirits is 1 unit.	4,3-1	
	Units		
7	How often have you had six or more units of		E
	alcohol on a single occasion in the last year?	n in the	
	Never Less than monthly		
	Monthly Weekly Daily or almost daily		
	Prefer not to say		
8	What is your weight?		
	Kilograms Or Stone Pounds		
9	What is your height?		
	Centimetres Or Foot Inches		

# Section 5 - Patient health (continued)

12	Disabilities		14	Give details of any medication you are taking
1				
100				
			mH.	
				1
			THE S	43
				20
		F		
				Are any of these repeat prescriptions?
13	Other medical conditions			Yes No
13	Other medical conditions		15	Do you or your carer need to be communicated in an
				accessible format? For example, braille, audio, large format or EasyRead.
				Tell us what you need
				Tell us what you need
		H		
				Do you or your carer need any reasonable adjustments
				to make your visit to the GP surgery accessible? For example, an audible or visual alert in the waiting room,
				access to a hearing loop or the support of a note taker.
				Tell us what you need
				70

### PART C

### Section 6 - Patients from abroad

Complete this section if you are:

- · visiting the UK and do not normally live here.
- currently living in the UK, but do not think of it as your permanent country of residence. For example, you are studying here or have come to the
  UK as part of your job.
- a permanent resident in the UK and receive a pension or benefit from a European country.

#### Information on eligibility to free care outside the GP practice

Anyone can register with a GP practice and receive free medical care from that practice. However, should you be referred for treatment outside the practice or need unplanned care, for example at a hospital, charges may apply if you are a visitor or temporary resident.

Some groups of visitors or temporary residents are eligible to receive this care free of charge. Documentation may be required to demonstrate eligibility.

Examples of those eligible include:

- · refugees, asylum seekers, those receiving certain forms of state support
- · suspected or confirmed victims of modern slavery and human trafficking
- temporary residents with a valid visa of over 6 months. You may have paid the immigration health surcharge with your visa application. Note that assisted conception services remain chargeable to this group
- visitors from the EEA will need to provide their EHIC (European Health Insurance Card), which covers immediately necessary unplanned treatment, or a S2 form which covers planned treatment.

Additionally, some services are free of charge to all visitors, including diagnosis and treatment for infectious diseases and sexually transmitted infections.

Immediate necessary care, maternity care and other urgent care that cannot wait until a chargeable visitor's departure from the UK will not be withheld or delayed due to charges. But non-urgent treatment will not be given until full payment is received.

More information can be found in the patient leaflet available from the GP practice.

Select the sta	tament that	annline	to vou

I understand I may have to pay for NHS treatment outside of the GP practice.
I do not have to pay for NHS treatment outside of the GP practice and have documents to prove this.
I do not know if I have to pay for treatment.

### **PART C**

### Section 6 - Patients from abroad (continued)

Giving us this information means that if you need NHS care outside the GP practice and you are entitled to that care without charge, it will be easier for you to demonstrate this entitlement.

We'll use the information to establish your chargeable status in order to recover NHS costs from countries responsible for your healthcare where applicable. This will not impact your entitlement to register with the GP practice or to receive free GP services.

I have an S1 form issued by an EU or EEA member state	I am in receipt of a European pension or benefit
I am entitled to an EHIC card, but I do not have one	e I am in the UK as part of my employment
I have an EHIC card issued by an EU or EEA member state	None of these
Enter details from your EHIC  Country code	5 Personal identification number
	5 Personal identification number
	5 Personal identification number  6 Identification number of the institution
Country code	
Country code  Name	6 Identification number of the institution

#### How will your EHIC and S1 data be used?

By using your EHIC for NHS treatment costs your EHIC data and GP appointment data will be shared with NHS secondary care (hospitals) and NHS Digital solely for the purposes of cost recovery. Your clinical data will not be shared in the cost recovery process. Your EHIC or S1 information will be shared with Business Service Authority for the purpose of recovering your NHS costs from your home country.