Application for online booking of appointments and repeat prescriptions (over 16s only)

Online booking of appointments and repeat prescriptions Terms of Use

By signing the application form, you agree to be bound by the following terms and conditions:

You personally need to request activation of the service. Please fill out a form available from reception or from the website. Once we have processed your application we will send you your login details to your registered address. This may take several weeks. It is fraudulent to request activation for another person.

Your login is not transferable and you must not share your details with anyone else. You should notify us immediately if anyone could have accessed your login details. Primrose Lane Medical Centre will not be held responsible for any breach of your confidentiality as a result of you disclosing your login details, be this deliberate or accidentally. Please note that in the future, this service might be extended to give you access to your full notes, your prescriptions and secure messaging with your clinician. So, please, do make sure that your login remains safe.

If the appointment system is available, you can book any routine appointment with a GP. You still need to telephone the surgery on 01383 414874 to book urgent, nursing or specialist clinic appointments.

You must not book more appointments than you actually need and you must cancel in good time, appointments you can't attend. We are usually able to fill appointments again if you give us just 1 hours' notice. Appointments can be cancelled either on-line or by telephoning the surgery.

We reserve the right to deny or withdraw your access to this service at any time. This could be for organisational or clinical reasons and whilst we endeavour to notify you of a denial or cancellation of online access we may not always do so. This does not affect your registration with the practice but you would have to access our services by phone or in person instead. Due to confidentiality issues we do not register patients under 16 years of age

Name	
Date of birth	
Address	
Date	
Signature	