## ARDEN MEDICAL CENTRE ADULT CONFIDENTIAL MEDICAL QUESTIONNAIRE

To assist with your care pending the arrival of your full medical records from your last surgery, please complete the following questions:-

Surname	Forename
Previous Name	First Language
Address & Postcode	
Ethnicity	Marital status
Home Tel No:	Mobile Tel No:
Preferred contact telephone no: HOME / MOBIL	,
Date of birth	Country of birth
Occupation	E-mail address
Do you consent to SMS (text messages) / e-mails practice news?	VEC/NO
Important past and present illnesses / operation e.g. diabetes, appendectomy, heart disease.	
<b>Medication</b> : Please detail any medication taken r	egularly:
Allergies / sensitivities: (A) Drugs	
(B) Other: (e.g. sticking plaster)	

Family history: Please give relationship of the relative to developed the condition.  Heart disease:	you (e.g. moth	er, brother) and	d their approximate	age when they
Stroke:				
Diabetes:				
Cancer:				
Other:				
Smoking				
Do you smoke?	Yes/No	If Yes, how ma	ıny?	
If No, have you ever smoked	Yes/No	If Yes, when did	d you stop?	
At the Practice we have on help you. They can assess		•	•	
I would like one of the	smok	es to contact m	e regarding helping	g me to stop
Carers Do you have a carer? Yes/N		If yes, please p	provide carer's name	
Do you have responsibility for	_		No	
<b>Accessibility</b> Do you have any information o	or communication	n needs?		Yes / No
If so, please specify your n	eeds & how we d	can assist you		
Examples of this could include Deaf or have a hearing los Deafblindness (dual senso Autism Communication impairmen Aphasia (difficulty in comm	s ry loss) nt (speech & lang	uage)	Blind or have a vis People with a lear Dementia n words)	

YOUR NAME.....

## Online services (www.ardenmedicalcentre.co.uk)

Arden Medical Centre offers some facilities online including:

Booking GP appointments

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- Ordering repeat prescriptions
- Updating your contact details
- Viewing your summary care record
- · Viewing your coded medical record

If you wish to register for our online facility please complete attached form or see reception - Please note proof of ID will be required.

## Alcohol Screening - Please complete BOTH sides of this questionnaire

Questions		Scoring system				Your
Questions	0	1	2	3	4	score
How often do you have a drink containing alcohol?	Never	Monthly or less	2 - 4 times per month	2 - 3 times per week	4+ times per week	
How many units of alcohol do you drink on a typical day when you are drinking?	1 -2	3 - 4	5 - 6	7 - 9	10+	
How often do you have 6 or more drinks on a single occasion?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	

## NHS guide to alcohol units





Men & Women are advised not to regularly drink more than 14 units a week (Source: NHS Choices website)

## **Score from Alcohol Screening (other side)**

**SCORE** 

**Remaining AUDIT questions** 

Scoring system				Your	
0	1	2	3	4	score
	Less			Daily	
Never	than	Monthly	Weekly		
	monthly	,			
	-			•	
	Less				
Never		Monthly	Weekly		
	monthly			daily	
	Loop			Daily	
Novor		Monthly	Mookly	or	
INEVE		IVIOLITIII	VVECKIY	almost	
	monuny			•	
	Less			,	
Never	than	Monthly	Weekly		
	monthly	-			
				•	
Never		Monthly	Weekly	almost	
	monthly			daily	
		Yes,		Yes,	
		but not		during	
No					
No				_	
INU					
	Never Never	Never Less than monthly  Never Less than monthly  Never Less than monthly  Less than monthly  Less than monthly  Less than monthly  Never Less than monthly  Never Less than monthly	Never Less than monthly  Never Less than monthly  Never Less than monthly  Less than monthly  Less than monthly  Never Less than monthly  Less than monthly  Never Less than monthly  Yes, but not in the last year  Yes, but not	NeverLess than monthlyMonthlyWeeklyNeverLess than monthlyMonthlyWeeklyNeverLess than monthlyMonthlyWeeklyNeverLess than monthlyMonthlyWeeklyNeverLess than monthlyMonthlyWeeklyNeverLess than monthlyMonthlyWeeklyNoYes, but not in the last yearYes, but not in the lastNoYes, but not in the last	Never than monthly less than m

**Scoring:** 0 - 7 Lower risk, 8 - 15 Increasing risk, 16 – 19 Higher risk, 20+ Possible dependence (SIAS referral)

YES/NO

**TOTAL** 

Would you like further health information regarding alcohol

If you are concerned about your drinking habits, please make an appointment with the Doctor. They would be happy to discuss this with you.

Please read the alcohol awareness leaflet included in this pack

Office use only

Contact re smoking cessation Y/N (if Yes, task RN) Appt with GP re alcohol score 16+ Y/N (send task to GP)

Further info re alcohol Y/N (send task to PN)

		TOOK NAME	
Screening			
		e feeling of being nervous, anxious, stop worrying?	Yes/No
During the past me for much of the time		een troubled by feeling low or depressed	Yes/No
During the past mused to enjoy?	During the past month, have you been troubled by not enjoying things you used to enjoy?		Yes/No
Would you like to di	scuss these ans	wers further with the GP?	YES/NO
	•	ible for generally overseeing your medical SP is not available you can continue to se	_
Your named GP is all	ocated by the mo	nth which you registered at the practice:	
Month of registration January / May / Septe February / June / Oct March / July / Novem April / August / Decer If you have any querie	ober ber nber	Named GP Dr Suzanne England Dr Lucy Barnsley Dr Nom Ullah Dr Clare Bailey olease contact the practice manager.	
Alcohol information Data sharing inform Data sharing opt ou	sheet ation	are correct and that I have been given:	

Office use only Refer to GP for further advice / support (if indicated) Date data entered on to computer ...... Staff initials..... Please put documentation for scanning into patient records

Signature ...... Date .....

## **Alcohol and Sensible Drinking**

See your doctor or practice nurse if you are drinking above the safe limits and are finding it difficult to cut down.

## What are the recommended safe limits of alcohol drinking?

- Men and women are advised not to regularly drink more than 14 units a week
- Spread your drinking over three days or more if you drink as much as 14 units a week

Fourteen units is equivalent to six pints of average strength beer or 10 small glasses of low strength wine.

• **Pregnant women**. The exact amount that is safe is not known. Therefore, advice from the Department of Health is that pregnant women and women trying to become pregnant should not drink at all. If you do choose to drink when you are pregnant then limit it to one or two units, once or twice a week.

In general, the more you drink above the safe limits, the more harmful alcohol is likely to be. And remember, binge drinking can be harmful even though the weekly total may not seem too high. For example, if you only drink once or twice a week, but when you do you drink 4-5 pints of beer each time, or a bottle of wine each time, then this is a risk to your health. Also, even one or two units can be dangerous if you drive, operate machinery, or take some types of medication.

#### What is a unit of alcohol?

One unit of alcohol is about equal to:

- half a pint of ordinary strength beer, lager, or cider (3-4% alcohol by volume), or
- a small pub measure (25 ml) of spirits (40% alcohol by volume), or
- a standard pub measure (50 ml) of fortified wine such as sherry or port (20% alcohol by volume)

There are one and a half units of alcohol in:

- a small glass (125 ml) of ordinary strength wine (12% alcohol by volume), or
- a standard pub measure (35 ml) of spirits (40% alcohol by volume)

But remember, many wines and beers are stronger than the more traditional ordinary strengths.

### **Health risks**

About 1 in 3 men, and about 1 in 7 women, drink more than the safe levels. Many people who drink heavily are not addicted to alcohol, and are not alcoholics. To stop or reduce alcohol would not be a problem if there was the will to do so. However, for various reasons, many people have got into a habit of drinking regularly and heavily. But, drinking heavily is a serious health risk.

You should regularly talk to your children about the risks of alcohol in a way that is appropriate

If you would like this information in an alternative format or you need help communicating with us, please let us know

for their age. If you feel your child is having a problem with alcohol, talk to your GP as there are services now available for young people.

If you drink heavily you have an increased risk of developing:

Liver problems

Pancreatitis (severe inflammation of the pancreas)

Sexual difficulties such as impotence

Stomach disorders

High blood pressure

Mental health problems

Muscle and heart muscle disease Some cancers

Obesity

Drinking alcohol is associated with a much increased risk of accidents. In particular, injury and death from fire and car crashes. About 1 in 7 road deaths are caused by drinking alcohol.

## Alcohol dependence

If you are alcohol dependent you have a strong desire for alcohol and have great difficulty in controlling your drinking. In addition, your body is used to lots of alcohol. Therefore, you may develop withdrawal symptoms 3-8 hours after your last drink as the effect of the alcohol wears off. So, even if you want to stop drinking, it is often difficult because of withdrawal symptoms. The symptoms include: feeling sick, trembling, sweating, craving for alcohol, feeling unwell. As a result, you may drink regularly to prevent withdrawal symptoms.

## Further resources and sources of help

Drinkline - National Alcohol Helpline

Tel: 0800 917 8282

Offers help to callers worried about their own drinking and support to the family and friends of people who are drinking. Advice to callers on where to go for help.

#### Drinkaware

Web: www.drinkaware.co.uk

A charity which aims to change the UK's drinking habits for the better. Drinkaware promotes responsible drinking and finds innovative ways to challenge the national drinking culture to help reduce alcohol misuse and minimise alcohol-related harm.

## Alcoholics Anonymous

PO Box 1 10 Toft Green, York, YO1 7ND

Helpline: 0845 769 7555 Web: www.alcoholics-anonymous.org.uk

There are over 3,000 meetings held in the UK each week with over 40,000 members. The only requirement for membership is a desire to stop drinking.

## AL-Anon Family Groups

61 Great Dover Street, London, SE1 4YF

Tel: 020 7403 0888 Web: www.al-anonuk.org.uk

Offers support for families and friends of alcoholics whether the drinker is still drinking or not.

## Department of Health

Web: www.dh.gov.uk/en/Publichealth/Healthimprovement/Alcoholmisuse/index.htm

The DOH alcohol misuse page includes information on the National Alcohol Strategy, and policy and advice on sensible drinking and the prevention of alcohol misuse

## Arden Medical Centre

'Dedicated to providing a comprehensive, caring and patient-centred service'

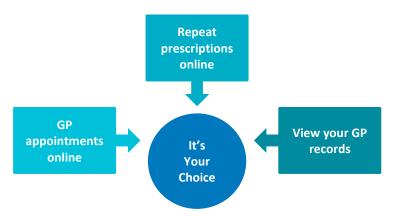
# Online Services Records Access Patient information leaflet 'It's your choice'

If you wish to, you can now use the internet to book appointments with a GP, request repeat prescriptions for any medications you take regularly and look at your medical record online. You can also still use the telephone or call in to the surgery for any of these services as well. It's your choice.

Being able to see your record online might help you to manage your medical conditions. It also means that you can even access it from anywhere in the world should you require medical treatment on holiday. If you decide not to join or wish to withdraw, this is your choice and practice staff will continue to treat you in the same way as before. This decision will not affect the quality of your care.

You will be given login details, so you will need to think of a password which is unique to you. This will ensure that only you are able to access your record – unless you choose to share your details with a family member or carer.

The practice has the right to remove online access to services. This is rarely necessary but may be the best option if you do not use them responsibly or if there is evidence that access may be harmful to you. This may occur if someone else is forcing you to give them access to your record or if the record may contain something that may be upsetting or harmful to you. The practice will explain the reason for withdrawing access to you and will re-instate access as quickly as possible.



It will be your responsibility to keep your login details and password safe and secure. If you know or suspect that your record has been accessed by someone that you have not agreed should see it, then you should change your password immediately.

If you can't do this for some reason, we recommend that you contact the practice so that they can remove online access until you are able to reset your password.

If you print out any information from your record, it is also your responsibility to keep this secure. If you are at all worried about keeping printed copies safe, we recommend that you do not make copies at all.

The information that you can see online may be misleading if you rely on it alone to complete insurance, employment or legal reports or forms.

Be careful that nobody can see your records on screen when you are using Patient Online and be especially careful if you use a public computer to shut down the browser and switch off the computer after you have finished.

# Before you apply for online access to your record, there are some other things to consider.

Although the chances of any of these things happening are very small, you will be asked that you have read and understood the following before you are given login details.

## Things to consider

## Forgotten history

There may be something you have forgotten about in your record that you might find upsetting.

#### Abnormal results or bad news

If your GP has given you access to test results or letters, you may see something that you find upsetting. This may occur before you have spoken to your doctor or while the surgery is closed and you cannot contact them. If this happens please contact your surgery as soon as possible. The practice may set your record so that certain details are not displayed online. For example, they may do this with test results that you might find worrying until they have had an opportunity to discuss the information with you.

### Choosing to share your information with someone

It's up to you whether or not you share your information with others – perhaps family members or carers. It's your choice, but also your responsibility to keep the information safe and secure. If it would be helpful to you, you can ask the practice to provide another set of login details to your Online services for another person to act on your behalf. They would be able to book appointments or order repeat prescriptions. They may be able to see your record to help with your healthcare if you wish. Tell your practice what access you would like them to have.

#### Coercion

If you think you may be pressured into revealing details from your patient record to someone else against your will, it is best that you do not register for access at this time.

#### Misunderstood information

Your medical record is designed to be used by clinical professionals to ensure that you receive the best possible care. Some of the information within your medical record may be highly technical, written by specialists and not easily understood. If you require further clarification, please contact the surgery for a clearer explanation.

#### Information about someone else

If you spot something in the record that is not about you or notice any other errors, please log out of the system immediately and contact the practice as soon as possible.

## More information

For more information about keeping your healthcare records safe and secure, you will find a helpful leaflet produced by the NHS in conjunction with the British Computer Society:

Keeping your online health and social care records safe and secure <a href="http://www.nhs.uk/NHSEngland/thenhs/records/healthrecords/Documents/PatientGuidanceBooklet.pdf">http://www.nhs.uk/NHSEngland/thenhs/records/healthrecords/Documents/PatientGuidanceBooklet.pdf</a>

## **Application for online access**

## Identification is required to process this application. Please bring photo ID to reception with this form to obtain your online access

Surname		Date of birth	
First name			
Address			
		Postcode	
		Posicode	
Email address			
Telephone number		Mobile number	
Ludah ta hawa asasa ta tha fe	- U a v dia a a a lina a a a m	sings (mlangs tiple all that apply).	
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Requesting repeat pr			
Accessing my Summ			
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4. Accessing my medic	arrecord (orny ava-	liable for patients over Toyrs)	
I wish to access my medical rec	ord online and unde	erstand and agree with each statement (ti	ick)
		tion leaflet provided by the practice	
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		anyone else, this is at my own risk	
		ccessed by someone without my	
agreement, I will contact	the practice as soc	on as possible	
		not about me or is inaccurate, I will	
contact the practice as so			
6 If I think that I may an			
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Please put completed form for scanning (non-workflow)