

Name and Address of Nominated Dispenser:

Post Code:

- Nomination has been explained to me by staff at my GP practice/ community pharmacy/ appliance contractor. I have retained the attached leaflet providing an overview of EPS and 'nomination' and I understand what I have to do.
- I understand that EPS is an NHS-funded service and the Repeat Prescription Collection Service is a separate service run by the pharmacy.
- I confirm that I have made my nomination of my own free will and have not been influenced or given a gift to select a particular nomination.

☐ I am the patient's parent /

☐ guardian I am the patient's
representative

Signed:

Date:

Time:

Print Name:

Staff Signature:

Staff Name:

How can you use EPS?

Your need to choose where you want your GP to send your electronic prescription. This is called 'nomination'. You can choose:

- A pharmacy
- A dispensing appliance contractor (if you use one)
- Your dispensing GP practice (if you are eligible)

Once you have been given information about the service and provided consent, any of the above healthcare professionals can register your nomination on your behalf.

Is EPS reliable, secure and confidential?

Yes. Your electronic prescription will only be seen by the same people that see your paper prescriptions now:

- GP practices
- Pharmacies
- NHS prescription payments
- Fraud agencies.

You can check your nomination status securely and confidentially at any GP, pharmacy, dispensing appliance contractors or dispensing GP practice that offers EPS.

More information about the Electronic Prescription Service, including more common questions, can be accessed on our website at: **www.cfh.nhs.uk/eps**

Or you can ask a member of staff at any pharmacy or dispensing appliance contractor, or at your GP practice for more information.

**Electronic Prescription
Service (EPS)**



Patient Nomination Request

What is the Electronic Prescription Service (EPS)?

EPS is an NHS-funded service in England. It gives you the chance to change how your GP sends your prescription to the healthcare professional you choose to get your medication or appliances from.

What does this mean for you?

If you currently collect your repeat prescriptions from your GP, you will not have to visit your GP practice to pick up your paper prescription. Instead, your GP will send it electronically to the place you choose, saving you time. You will have more choice about where to get your medication from because it can be collected from a pharmacy near where you live, work or shop. You may also not have to wait as long at the pharmacy as there will be more time for your repeat prescriptions to be prepared before you arrive.

Is this service right for you?

YES – if you have a stable condition and you:

- Don't want to go to your GP practice every time to collect your repeat prescription
- Collect your medicines from the same place most of the time
- Already use a prescription collection service.

NO – if you:

- Don't get prescriptions very often
- Pick up your medicines from different places
- Travel or work away from home a lot.

Can I change my nomination or cancel it and get a paper prescription

Yes you can. Nomination is very flexible and can be changed or cancelled at any time. You can do this by either:

- Asking a member of staff at **any** pharmacy or dispensing appliance contractor that offers the service
- Asking a member of staff at your GP practice, or

Tell them before your prescription is due or your prescription might be sent to the wrong place. It is important to remember that you don't have to use nomination on every occasion. If you don't wish to use nomination on a particular prescription, you should let your GP practice know before the prescription is issued.



Please see back page for more information



NHS Electronic Prescription Service (EPS) Patient Nomination Request

Full Name:

Address:

Postcode: Telephone:

Date of Birth: Gender: Male ☐ Female ☐

Email Address:

NHS Number:
(this can be found at the top right hand section of your prescription)

Please provide your name and address if you are a representative of the patient

Full Name:

Address:

Postcode: Telephone: