

SMS (Short Message Service) Appointment Reminders Parental Consent for patients up to 13 years of age

The Practice currently uses SMS text messaging for appointment confirmation, reminders and release of general information. Initially, an SMS text message will be sent containing your appointment details once you have booked an appointment with a further message being sent 48 hours before the appointment is due, as a reminder.

This service is now available for children up to 13 years of age. Parents / Guardians are able to register their children who are under the age of 13 years but once the child reaches their 13th Birthday this facility will be removed and Mobile Number below deleted from their patient record; this is to ensure that patient confidentiality is maintain as best as possible and you will receive prior notification from the Practice before this access is removed. The requesting parent/guardian must be registered at the same address as the child in order to access this service.

For now, this service is not available for 13 to 15 year olds, although they will be able to re-register in their own right from their 16th birthday.

If you would like to receive SMS Appointment Reminders for your child then please complete the slip below and hand it in at reception.

You may withdraw your consent at any time by notifying Reception either verbally or in writing.

I would like to receive SMS messages Appointment Reminders for my child named below.

I fully understand that it is my responsibility to provide The Deepings Practice with any change of mobile phone number.

Childs Full Name:	<input type="text"/>		
Date of Birth:	<input type="text"/>	Mobile Number to be used:	<input type="text"/>
Address:	<input type="text"/>		
Parent / Guardians Full Name:	<input type="text"/>		
Signature of Parent / Guardian:	<hr/>		Date: <hr/>

Disclaimer

If you agree to the Practice contacting you via the telephone number provided above, we agree to adhere to the following:

1. The telephone number you have provided will only be used by the practice in relation to the healthcare services offered by the practice. You will not be contacted in relation to any other types of products or services and your information will not be passed onto any other parties.
2. If at any time you would like to opt-out of the above service, please make a personal request to the practice and you will be opted out of the service within 48 hours. We would ask that you provide your reason for opting out to help us review and improve the service in the future.

For Office use:

Patient Record Update by:

Date: