

Patient Opt Out from treatment by private NHS providers

Patient Name (print)

D.O.B./...../..... **Postcode**.....

Dr...... (Name of GP)

Surgery.....(GP Practice name)

I wish to exercise the choice of treatment provider offered to me by the **Health and Social Care Act 2012**.

I wish to be offered tests, treatment and care from NHS internal providers only, and not from private companies contracted to the NHS (unless such a service is not available from an NHS internal provider). The NHS should always be the preferred provider.

Please will you arrange for my medical records and notes to be tagged 'NPP' or 'No Private Providers' so that my choice is explicitly clear for whenever a referral is made by the practice. Thank you for your cooperation.

Signed

Date/...../.....

Countersigned by Parent/Guardian if under 16 years of age

Name **Signed**

Relationship (Parent/Guardian/Other)

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