

Sun Lane Surgery, Sun Lane, Hythe, Kent. CT21 5JX

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New Patient Questionnaire

The Doctors and Staff at Sun Lane Surgery wish to welcome you to the practice and encourage you to use the basic facilities outline in the Practice Information. This questionnaire is designed to provide us with the basic information needed for your continuing healthcare before your medical records arrive from your previous doctor. We like to see all new patients for a simple health check within four weeks of registration. Please bring a specimen for testing.

If you are taking any regular medication we would ask you to make an appointment with one of our doctors and bring a recent copy of your repeat prescription from your previous surgery. If you do not have a repeat prescription slip, please bring along your medication you are currently taking. This will help to organized your repeat medication as soon as possible.

Telephone numbers are vital to our service and we would ask you to provide a number where you can be contacted, and to keep us updated when you change your mobile number.

All information held on our database is confidential and covered by the Data Protection Act

If you would like to have a family member speak on your behalf please pick up a Carer Form from reception.

Date

Mr / Mrs / Miss / Ms(other please indicate).....

Surname

Forenames

D.O.B

Address

.....Post Code.....

Tele No Mobile Work

Occupation

Next of kin (name)Relationship.....

Contact Telephone Numbers.....