

This is your

Issued by PCT (or Agency):

NHS medical card

Please keep it in a safe place. It is proof that you are entitled to NHS treatment.

Your NHS Number is

Please tell us this number if you get in touch with us. It will help us to find your records more quickly.

EXAMPLE

Your doctor is

Your date of birth

What to do if you want to change your doctor

To the patient

Please read the notes about this on the other side of this card

Fill in this part of the card and give it to the new doctor to sign it

Your signature

Date / /
If you are not the patient, please say what your relationship is to the patient

Name and address if either is different from above

Postcode

To the new doctor

Please fill in this part of the card

Your name

Your code number

Your signature to accept this patient

Date / /
If you will be dispensing drugs, tick here
If you claim a rural practice payment
number of miles between your
main surgery and the patient's home

Office use

PCT cipher GCM

Card issued on

26.07.04