Friends Provident International

Access to medical reports

Important information relating to access to your medical records.

Please read this section carefully before signing, as it states what your rights are under The Access to Medical Reports Act 1988 and The Access to Medical Reports (NI) Order 1991.

To process your application and review any scheme issued, we may need to apply for a medical report from any doctor you may have seen over the years. To apply, you need to give your consent by signing the medical declaration and consent section of this form.

You can choose from three courses of action:

1 Give your consent without asking to see the doctor's report before it is sent to us. The report will then be sent directly to us by the doctor.

If you give consent to us obtaining a report without indicating that you wish to see it, you can change your mind by contacting the doctor before the report is sent to us in which case you will have the opportunity to see the report and ask the doctor to change the report or add your comments before it is sent to us. Alternatively, you can withhold your consent to its release.

2 Give your consent, but ask to see any report before it is sent to us. You will have 21 days after we notify you that we have requested a report to contact the doctor and make arrangements to see the report. If you don't contact the doctor within 21 days, he will be entitled to send the report directly to us. If you contact the doctor asking to see the report, you will need to give the doctor written consent before he can release it to us. You may ask the doctor to change the report if you think it is misleading. If the doctor refuses, you can add your own comments to the report before it is sent to us. This does not prevent you from applying to other companies for insurance.

3 Withhold your consent but, if you do, please bear in mind that we may be unable to accept the application.

Whether or not you ask to see the report before it is sent, you have the right to ask to see a copy, provided that you ask within six months of the report arriving with us. If you ask for a copy the doctor can charge you a reasonable fee to cover the costs of supplying it.

Your doctor can withhold access to the report if they believe it would cause physical or mental harm to you or others, or it would reveal the identity of another person without their consent (other than that provided by a health professional in their professional capacity in relation to your care).

The medical report will ask your doctor about the following:

- your current and past health
- any care, medication or treatment you are currently receiving
- the results of referrals or tests you are waiting for
- any time off work in the last three years
- details of any relevant illness, trauma, or referrals for specialist advice or treatment, hospital admissions, consultations with your GP or any other medical adviser, therapist or counsellor, in particular whether you have a history of;
  - malignancy (cancer), cardiovascular (heart) disease, diabetes, and degenerative (gradually worsening) diseases
  - musculoskeletal disease or injury, for example, arthritis, rheumatism, back problems or any other disorder of the joints or muscles;

- anxiety, depression, neurosis (such as phobias, obsessions and so on), psychosis (a mental disorder where you lose contact with reality), stress or fatigue;
- suicidal thoughts or attempts at suicide; or
- conditions related to drug or alcohol misuse or smoking or chewing tobacco;
- details of any biopsies, blood tests, electrocardiograms (heart test), height, weight if measured in the last two years, urinalyses (tests on urine), x-rays, or other investigations
- any blood pressure readings in the last three years
- any history of disease among your parents or brothers or sisters that you have told your doctor about.

We have asked your doctor not to reveal information about:

- negative tests for HIV, hepatitis B or C
- any sexually-transmitted diseases unless there could be long term effects on your health; or
- predictive genetic test results unless there is a favourable test result which shows that you have not inherited a condition your family suffers from.

The information you and your doctor provide about your health may result in us:

- refusing to provide insurance;
- increasing premiums above standard rates; or
- setting premiums at standard rates.

Medical declaration and consent

I confirm that I have read the important information relating to the access to my medical records.

I give my consent to Friends Provident International seeking information, including medical reports, from any doctor I've consulted about anything that affects my physical or mental health and I authorise the giving of this information.

This consent shall also apply in the event of any claim, including a death claim.

I have been informed of my statutory rights under the Access to Medical Reports Act 1988 and The Access to Medical Reports (NI) Order 1991, and, in connection with this current application, consent to Friends Provident International, obtaining medical information from any doctor who, at any time, has attended to me, or from any other relevant person concerning anything which affects my physical or mental health and I agree that a copy of this consent shall have the validity of the original. I agree that Friends Provident International may request a medical report following the issue of any scheme, using this consent, for a period of up to six months or any time after my death.

I do not wish to see any report before it is sent to Friends Provident International.

If you would like to see any report before it is sent to us, please delete the above bold statement.

If you don't consent to us obtaining a medical report, please put a cross in the following box. ☐

You can withhold your consent but, if you do, please bear in mind that we may be unable to accept your application.

Application number or reference

First Life Assured signature

Signature

Full name (in BLOCK capitals)

Date

Second Life Assured signature

Signature

Full name (in BLOCK capitals)

Date

Data Privacy

We take the responsibility of handling your personal data very seriously and we will only ask you for details required to process your requests to us. Please be aware of our privacy policy – please visit **www.fpinternational.com/legal/privacy-and-cookies.jsp** to view the full policy, or this can be provided on request.

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