

For office use only

SR No.



Medical Underwriting

Consent to obtain medical records

Please complete in **BLOCK CAPITALS** and in **black ink**.

In order to consider your application, we'll need to obtain copies of your medical records. We can only obtain these with your consent and will need you to complete the declaration below.

Under the Access to Medical Reports Act 1988 (or the Access to Personal Files and Medical Reports (Northern Ireland) Order 1991), you've certain rights in relation to reports requested by us which have been prepared by your doctor(s), which are summarised as follows:

- If you indicate (in the declaration below) that you don't want to see the report we won't let you know if we apply for one. If you decide that you want to see the report, before it is sent to us, you can write to your doctor within 21 days to make arrangements to see it.
- If you indicate (in the declaration below) that you do want to see the report we'll write to you at the same time we contact your doctor. We'll let the doctor know that you'd like to see the report; you then have 21 days to contact your doctor to make arrangements to see it. When you've seen the report your doctor might not send it to us until you've given consent to do so. If you don't contact your doctor within 21 days the report will be sent to us.
- You can ask your doctor if they'll amend any part of the report which you consider to be incorrect or misleading. If your doctor is not in agreement, you may attach your comments.
- You can ask your doctor to see a copy of the report up to 6 months after we've received it. If you ask for a copy of your report your doctor may charge you a fee to cover the cost.
- In some circumstances your doctor may decide, in the interest of your health, or to respect the interest of other persons, that you shouldn't see all or part of the report. Your doctor will notify you of this and you'll have the right to see any remaining part of the report. If it's the whole of the report which is affected, this won't be given to us without your consent.
- You can withhold your consent (in which case we may be unable to proceed with your application).

Please note: If you make a claim we may need to obtain further medical information to be able to fully assess it. We'll only ask for the information we need to be able to assess the claim. To speed up the process, we will rely on the consent you've provided here, but we'll remind you of that at the time of the claim and your rights in relation to it. You don't have to provide permission at this stage, but if you don't, we may not be able to assess your claim.

Declaration

Please read the declaration and complete parts 1 & 2

Authorisation for the release of medical information

I have read the section about my rights under the Access to Medical Reports Act 1988 (or the Access to Personal Files and Medical Reports (Northern Ireland) Order 1991). I agree to the provision of any and/or all of my medical records to Aviva in connection with this application.

By signing below, I give my permission to any institution or person (including, but not limited to, hospitals, doctors, nurses and health professionals) who've been involved in my treatment both past and present, to provide Aviva (and third parties acting on its behalf) with any information, including full medical records, reports or notes, concerning my physical or mental health.

1. Insured person's details

Name
(block capitals)

Policy number

Member number

Date

Signature

Signature of applicant (or signature of their parent or guardian if the person to be insured is under 16 years of age)

This consent will last until your policy ends. If you wish to specify an expiration date for this consent, please state it here:

2. GP details

GP's name
(block capitals)

Address

GP telephone number
(please include dialling code)

I DO NOT wish to see the report before it is sent to Aviva (please delete if you wish to see the report before it is sent to us).