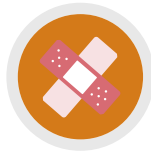


# WHAT CAN I DO ON KLINIK?



REQUEST AN APPOINTMENT



REQUEST NURSING APPOINTMENTS



CANCEL/REQUEST FOLLOW-UP APPOINTMENTS



REQUEST REFERRAL INFO, TEST RESULTS & SICK NOTES



ORDER REPEAT PRESCRIPTIONS/ ASK MEDICATION QUERIES



UPDATE PERSONAL DETAILS, SEND ENQUIRIES/INSURANCE REQUESTS



## NEED MORE HELP?

Checkout our Website and/or YouTube Channel (Lea Vale Medical Group) to see more detailed instructional resources

## ACCESS KLINIK

Website: [www.leavale.nhs.uk](http://www.leavale.nhs.uk)

SCAN ME!



LEA VALE MEDICAL

# ONLINE SERVICES

HOW TO REQUEST A NURSING APPOINTMENT USING KLINIK

[www.leavale.nhs.net](http://www.leavale.nhs.net)

## 1. GO TO OUR KLINIK PORTAL

From our website (leavale.nhs.net), click on the "Klinik" banner to open the portal

KLINIK  
ACCESS

Contact us online. Get help from your GP with our online consultation service.

Start Now

## 2. LOG IN

Select your preferred access method from the Lea Vale Klinik homepage.

Continue

OR

**NHS** Sign in with NHS login

Click the "Continue" button

Use your NHS login

## 3. SELECT "NURSING APPOINTMENTS"

Nurse appointments

## 4. SELECT THE SERVICE YOU NEED

Select the type of nursing appointment you need

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> BLOOD TESTS         | <input type="checkbox"/> CONTRACEPTION       | <input type="checkbox"/> INJECTIONS             |
| <input type="checkbox"/> STITCH/CLIP REMOVAL | <input type="checkbox"/> VACCINATION (18+)   | <input type="checkbox"/> CHILDHOOD IMMUNISATION |
| <input type="checkbox"/> SMEAR TEST          | <input type="checkbox"/> LONG-TERM CONDITION |   |

## 5. PROVIDE US WITH DETAILS ABOUT YOUR REQUEST

Fill in the text box with the requested information for the type of nursing appointment you need.

Enter Required Details Here...

## 6. PROVIDE PERSONAL DETAILS

if you log in with your NHS login, this will already be filled out

Fill in your information below.

Patient Details

First full name \*

Last name \*

John

Smith

## 7. SELECT HOW YOU WOULD LIKE US TO CONTACT YOU



SMS



PHONE



EMAIL

## 8. CLICK SUBMIT

You will get an email summary of your request

Submit >

## SO, WHAT INFO DO I NEED TO PROVIDE?

### BLOOD TESTS

Request the appointment within 10 days of when you need it by. Must be advised by a clinician

### INJECTIONS

What type of injection you are due (i.e., B12, Zoladex, Prostag, etc.)

### STITCH/CLIP REMOVAL

When are you due your stitch, suture, or clip removal

### SMEAR TEST

Available Times, Dates & Preferred Surgery

### CONTRACEPTION APPOINTMENT

Which contraceptive type you require (i.e., Oral contraception, depot injection, implant or coil, etc.)

### CHILDHOOD IMMUNISATION OR 18+ VACCINATION

Which vaccination you/your child requires

### LONG-TERM CONDITION (LTC)

Details from last LTC review or your question