

Dear Resident,

Thank you for participating in this health screening.

The Neighbourhood Health Service (NHS)

NHS is the flagship community health project at the NUS Yong Loo Lin School of Medicine. Since 2007, NHS has brought free screening & follow-up services to the doorsteps of rental block residents.

In 2019, NHS is organising two screenings at Kampong Glam & Queenstown (Leng Kee).

Joint Partnership

This year, NHS has pioneered a novel partnership with the respective Regional Health Systems (RHSes) & the Health Promotion Board (HPB), facilitated by the Agency for Integrated Care. This partnership has resulted in a more holistic & community-based health screening that is aligned with national screening efforts—the first of its kind in Singapore.

This screening closely integrates the RHSes' community chronic disease screenings & fall prevention programme, as well as HPB's nationwide functional screening framework, with the strong support of the National Dental Centre Singapore, Singapore Eye Research Institute, Singapore General Hospital, Singapore Cancer Society & respective Senior Cluster Network Operators. All relevant screening data will be shared in a confidential manner with the National Electronic Health Record, for effective follow-up.

NHS aims to promote holistic health among its participants by offering multi-level tests for five different categories—chronic diseases, functional modalities, fall prevention, cancer & mental health—while also providing crucial social work assistance.

Thank you for giving us the opportunity to serve you.

Organised by:



Yong Loo Lin
School of Medicine



Department of Social Work
Faculty of Arts & Social Sciences

LEE KONG CHIAN
SCHOOL OF MEDICINE

Healthcare Partners:



Tan Tock Seng
HOSPITAL
National Healthcare Group

sata
CommHealth†



NHS 2019: PARTICIPANT'S CONSENT FORM

1. Consent to Screen and Follow-up

I consent to undergo health screening tests ("**Tests**") for one or more of the following: chronic diseases (obesity, diabetes mellitus, hyperlipidaemia and high blood pressure) and / or cancers (breast and cervical cancer for women only, colorectal cancer for both men and women) and / or functional screening and follow-up under the Neighbourhood Health Service (NHS) Screening and Follow-Up Programme ("**Programme**") organised by NHS. The Tests will be conducted by NHS and / or appointed healthcare institutions / clinics / service providers participating in the Programme ("**Service Providers**").

I understand that I should see a doctor if any of my Test results are abnormal. I further understand that there are limitations to the Tests and that they are not conclusive in detecting or ruling out medical risk factors or conditions. I should see a doctor if I feel unwell or have any symptoms even if the Test results are normal.

Depending on my Test results, I may be contacted and/or referred by NHS or the Service Providers for post-screening follow-up within the Programme.

(NOTE: The Fecal Immunochemical Test (FIT) results will be released by Singapore Cancer Society.)

2. Collection and Use of Information

I acknowledge that my personal data, Test results, and relevant screening and follow-up information, (collectively, "**Information**") will be collected and used by NHS and Service Providers for the purposes of administering the Programme, conducting the Tests, and managing and implementing follow-up action arising from the Test results. I also acknowledge that the Information will be retained by NHS, the National Electronic Health Record (NEHR), Ministry of Health (MOH) and Health Promotion Board (HPB) and that aggregate/de-identified Information may be used for research, statistical and planning purposes.

3. Authorisation

I authorise NHS and Service Providers to approach other healthcare institutions/clinics which are in the possession of my screening, follow-up, further assessment and/or treatment records relevant to the Programme to request for such records (if any) for the purposes of patient care, treatment or clinical / programme review.

4. Disclosure of Information

Unless otherwise indicated below, I consent to NHS directly disclosing the Information and my past screening and follow-up information¹ to NHS' collaborators² (where necessary) for the purposes of checking if I require re-screening, further tests, follow-up action and / or referral to community programmes/activities.

☐ I do not consent to NHS disclosing the Information and my past screening and follow-up information to NHS' collaborators for the abovementioned purposes.

PARTICIPANT INFORMATION									
FULL NAME:					NRIC:				
SIGNATURE:					VENUE:	<input type="checkbox"/> Kampong Glam		<input type="checkbox"/> Queenstown	
					DATE:	<input type="checkbox"/> 7 Sep (Sat) <input type="checkbox"/> 8 Sep (Sun)		<input type="checkbox"/> 5 Oct (Sat) <input type="checkbox"/> 6 Oct (Sun)	
CONSENT-TAKER INFORMATION									
EXPLAINED IN (please circle):	English / Chinese / Malay / Tamil / Others:								
FULL NAME:					MATRICULATION / STUDENT ID:				
SIGNATURE:					SCHOOL:	NUS / NTU / Duke-NUS / NYP / SIT			
					COURSE:	Medicine / Nursing / PT / OT			

¹ Refers to Participant's past screening and follow-up information under NHS' Screening and Follow-Up Programme.

² Collaborators refer to organisations / institutions that work in partnership with NHS for the provision of screening and follow-up related services, such as but not limited to: MOH, HPB, Regional Health Systems, Senior Cluster Network Operators, etc.