Radiology Referral Form - over 16 years old

NHS Southern Health NHS Foundation Trust

Contact Details for the services	
Email	radoffice@southernhealth.nhs.uk - **All referrals must be emailed**
Address	**Radiology, LNFH, Wellworthy Rd, Lymington, Hants, SO41 8QD**
Telephone	X-ray – 01590 663110 - MRI/CT – 01590 663125 - Ultrasound – 01590 663120

RADIOLOGY WILL CONTACT THE PATIENT WITH DETAILS OF THEIR APPOINTMENT

Patient's details				Patient's background and culture	
Name	Full Name			Ethnicity	Ethnic Origin
				1st language	Main Language
DOB	Date of Birth	Age	Age	Interpreter required? Interpreter required	
Sex	Gender(full)			Military Veteran?	
Address & postcode	Home Full Address (stacked)			**Referrer details**	
				Referring Clinician	
				Address	Organisation Name Organisation Full Address (stacked)
NHS No	NHS Number			Tel no	Organisation Telephone Number
Hospital No	Hospital Number			Email	Organisation E-mail Address
Home tel	Patient Home Telephone			Referral date	Short date letter merged
Work tel	Patient Work Telephone			Date received	
Mobile tel	Patient Mobile Telephone				
Email	Patient E-mail Address				
Preferred contact method	Home ☐	Work ☐		Mobile ☐	E-mail ☐

Social Information				
Social Context	Has a Carer ☐	Is a Carer ☐	Lives Alone ☐	
Transport Issues	Chair: ☐	**Transport required:** ☐		**Hoist required:** ☐
Next of Kin				
Relationship to Patient			Telephone No	
Infection Risk				
Smoking History				
Pregnancy Status	Pregnant	Y / N	LMP:	

Reason for referral	
Clinical Indications and questions to be answered:	
Examination / Area of interest	
Signature: authorised referrer IR(ME)R 2017:	Printed Name:
Job Title:	Contact Number:

Important information

<table>
<tr><td>RADIOLOGY BOOKED APPOINTMENT SERVICE

For URGENT referrals, please indicate on the referral form and we will contact the patient directly.

FORM VALID FOR 1 MONTH ONLY</td><td>Sites:
x-ray- Lymington and Romsey
Ultrasound- Lymington Romsey and Hythe

No transport or hoist patient access at Romsey or Hythe

*Please Note: DO NOT bring children to Radiology appointments. We are unable to supervise during examination.</td></tr>
<tr><td colspan="2">INCOMPLETE / ILLEGIBLE FORMS WILL BE RETURNED</td></tr>
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