Dr R Caudwell

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Southport

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Dr S Biswas

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Practice Management

Nicole Marshall

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Date

Outpatient Appointments

Hospital name and address

**Dear Sir / Madam**

Your full name

Your date of birth Your NHS Number (if you know it)

Your address

Your preferred telephone number

**This patient was referred to you for assessment of:**

Write your original problem here

**They await a first appointment, but report the following change in their condition**

**since referral:**

Explain briefly what has changed since The Family Surgery referred you to the specialist

**We request that you take the following action**

* **Pass the original referral letter and this letter to a clinician to determine whether their assessment might be expedited**
* **Contact the patient directly to inform them the outcome of that decision, and their likely wait for an appointment**
* **File this letter, and document your decision, in the patient’s hospital medical record.**

**Yours faithfully**

**Drs Caudwell, Biswas & Bonsor**