



Outpatients Appointments

← Please add Specialist's name, Hospital Specialty and Address to the left

Date:

← Please add the date and Complete Your Details below

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 below:*

They await a first appointment, but report the following change in their condition since referral: *Explain briefly what has changed since your last contact with 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,

Dr A Farrell