

Tick Here if Private Patient	Urgent – Date Required	Referred Under Cancer Target		
LOCATION JC Dermatology Outpatients - (JDERM)	CONSULTANT (circle as appropriate) Dr J Azad (AZAJ) Dr A Carmichael (CARAJ) Dr P Cousen (COUP) Dr T Cunliffe (CUNLTP) Dr S Darne (DARS) Dr T Derry (DERTMD) Dr S Fatah (FATS) Dr P Kamali (KAMPE) Dr D Seukeran (SEUD) Dr D Tang (TAND) Dr A Makanjuola (ABIM)	Please tick here if this is an INFLAMMATORY SKIN for reporting by skin team ☐		
EXTRA REPORT COPIES TO: PATIENT DETAILS NHS NO: HOSPITAL NO: SURNAME: FIRST NAME: ADDRESS: DOB: SEX:				
NATURE & SOURCE OF SPECIMEN	DATE/TIME TAKEN		Pathology use only- USER ID NUMBER	
			BANDED BY	
			BAND 2WR/A	
			BAND B	
PREVIOUS HIST/CYT REFERENCES		BAND C		
CLINICAL DETAILS		REPORTING PATHOLOGIST (INITIALS)		
		HOE		
		DISSECTOR		
		CUT-UP ASSISTANT		
		HSREQ		
		CPRES (NAKED EYE)		
		EMBEDDOR		
		MODULE NO		
PRINT NAME OF OPERATING SURGEON		QUALITY ASSESSOR		
REQUESTOR'S SIGNATURE		REPORT TYPED & DATE		