

THE CAMBRIDGE UROLOGY CLINIC

GPs Referral Form

In booking appointments we aim to meet the individual needs of each patient and will provide a response to match their priorities.

We encourage you to make generic referrals to the Cambridge Urology Clinic and we will then liaise with your patient and arrange a convenient appointment, whether their priority is to see a particular consultant or to come at a particular time. However we recognise there are times when you may wish to refer your patient to a specific consultant and we are happy to accommodate this.

We are very happy to receive a written referral from you or you may find it easiest to complete this generic referral form.

GP's Contact Details:

Name/Practice Name:

Practice Address:

Telephone: Fax:

Email:

Patients Details:

Name:

DOB: NHS Number:



Mr Vincent Gnanapragasam
PhD FRCS(Urol)
GMC No: 4122120

Mr Nikesh Thiruchelvam
MD FRCS(Urol) FEBU
GMC No: 4303941

Mr William Turner
MD FRCS(Urol)
GMC No: 2848662

The Cambridge Urology Clinic LLP is a Limited Liability Partnership registered in England and Wales, company number OC349477
Registered Office: Spire Cambridge Lea Hospital, 30 New Road Impington, Cambridge, CB24 9EL

All Correspondence to:
The Cambridge Urology Clinic, Spire Cambridge Lea Hospital, 30 New Road, Impington, Cambridge, CB24 9EL
Telephone/Fax: 01223 226927

THE CAMBRIDGE UROLOGY CLINIC

Address:

Reason for referral
and Relevant History:

Medication:

Allergies:

Please send your completed referral to:

Post: The Cambridge Urology Clinic, Spire Cambridge Lea Hospital, 30 New Road, Impington, Cambridge. CB24 9EL

Fax: 01223 266927 **Tel:** 01223 266927



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