

SURGICAL LISTING & HISTOPATHOLOGY REQUEST FORM

Listing Clinician Dr James Byrne

14-Jun-2022

126526.

28/6/22
10-11 176.22

Surname Mason	First Name Vernon	27-Aug- 1936	Gender M	Age 85y	NHS No 440 462 9141	EMIS No 126526
------------------	----------------------	-----------------	-------------	------------	------------------------	-------------------

SECTION A: TO BE COMPLETED BY CLINICIAN AT TIME OF LISTING:

Single Slot	2 weeks Fast track biopsy	Any clinician (shave/punch/C&C)
Double Slot	1 month	Exc/Inc biopsy trunk and limbs
	2 months/3months	Exc/ Inc biopsy head and neck OR nail biopsy
Suspicious of MM/SCC?	Yes / No	Listing for Specific clinician:

Specimen Site	Procedure (Excisional/ Incisional etc)	Clinical History	PACEMAKER (Y/N)
1. Left Frontal Temporal area	Incision Biopsy	Rapidly growing pink nodule ? KA/SCC	(Y/N) N6
2. Helix Left ear	Incision biopsy	scaling/ulcerated area on helix ? Bowenoid AK	Patients requiring Excision/Incisional procedure who have a pacemaker in -situ should be referred externally

SECTION B: TO BE COMPLETED BY CLINICIAN LISTING THIS PATIENT

A) Have you indicated the site on the anatomical body map?	Yes
B) Has the patient confirmed the marked site and procedure	Yes/No
C) Have you photographed the site of the lesion	Yes/ No/ Photographed on patient's own phone
SAME DAY SURGERY ONLY	Yes
Have you marked the site of the lesion	

SECTION C: TO BE COMPLETED BY OPERATOR ON DAY OF SURGERY:

DERMATOLOGICAL SURGEON

SIGNATURE

SAMPLE TIME

☒ 2WW

☐ Urgent

☐ Routine

W. MACRADA

[Signature]

10 10 10

MACRADA

SAMPLE DATE

10 10 22

LAB USE ONLY

DATE RECEIVED

DDMMYYYY

TIME RECEIVED (24 HR)

HHMM

SNICK
177777
HERE