

SURGICAL LISTING & HISTOPATHOLOGY REQUEST FORM

Listing Clinician *Dr Harris*

126244 04/05/22

Surname Beech	First Name Penelope	11-May- 1949	Gender F	Age 72y	NHS No 456 127 3190	EMIS No 14430
------------------	------------------------	-----------------	-------------	------------	------------------------	------------------

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? <i>(Yes)</i> / No	Listing for Specific clinician:	

Specimen Site	Procedure (Excisional/ Incisional etc)	Clinical History	PACEMAKER (Y/N)
1. <i>RIGHT UPPER ANT. CHEST</i>	<i>Excision.</i>	<i>Darker changing pigmented patch ? L.M.M.</i>	
2.			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?	<i>(Yes)</i>
B) Has the patient confirmed the marked site and procedure	<i>(Yes)</i> / No
C) Have you photographed the site of the lesion	<i>(Yes)</i> / No / Photographed on patient's own phone
SAME DAY SURGERY ONLY	<i>(Yes)</i>
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

BLACK

[Signature]

09.03.20

SAMPLE DATE

31.05.22

LAB USE ONLY

DATE RECEIVED

DDMMYYYY

TIME RECEIVED (24 HR)

HHMM

STICK
BIOHAZARD
LABEL HERE

SURGICAL LISTING - ANATOMICAL BODY MAP

BEECH, Penelope (Mrs) 11-May-1949

