

SURGICAL LISTING & HISTOPATHOLOGY REQUEST FORM

Listing Clinician DermNurseSpecialist Sali Putt 15-Jun-2022

Surname Friend	First Name David	10-Nov- 1940	Gender M	Age 81y	NHS No 474 064 2905	EMIS No 137034
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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. Mid scalp	Punch Biopsy	1 cm x 6mm raised lesion, changed + grown in size over past month. Prev SCC on left zygoma in 2018.	N.
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?	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 Have you marked the site of the lesion	Yes

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

DERMATOLOGICAL SURGEON

SIGNATURE

SAMPLE TIME

- ☒ 2WW
☐ Urgent
☐ Routine

W. MACDONALD

[Signature]

11 10 15

SAMPLE DATE

17 06 22

STICK
BIOHAZARD
LABEL HERE

LAB USE ONLY

DATE RECEIVED

D D M M Y Y Y Y

TIME RECEIVED (24 HR)

H H M M

17/6/22.
11.00
DR WM.