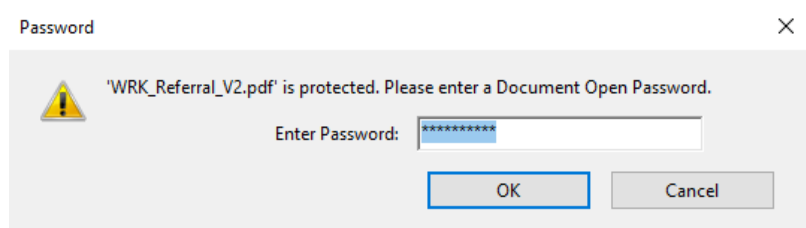


Referrals- how to complete

Please note: You will need the latest version of Adobe Acrobat Reader DC installed on your computer in order to use e-referral which is in PDF format

- Once the PDF referral form is opened (using the password sent in the email with the referral PDF), please complete all boxes.



CLIENT DETAILS	
NHS Number	<input type="text"/>
Title	<input type="text"/>
Forename(s)	<input type="text"/>
Surname	<input type="text"/>
Gender	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Not known <input type="radio"/> Not Specified
Date of Birth (DD/MM/YYYY)	<input type="text"/>
Ethnic Origin	<input type="text"/>

Boxes outlined in **RED** are **MANDATORY**. The more information you are able to share about the client, the quicker we can make the appropriate outcome regarding their assessment / treatment.

MEDICAL CONDITIONS / HEALTH IMPAIRMENTS	
Relevant medical condition <i>(select or free text)</i>	<input type="text"/>
Will the condition last longer than 6 months?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other medical conditions including pressure sores, falls, seizures or blackouts	<input type="text"/> <ul style="list-style-type: none"> <input type="checkbox"/> Aarskog–Scott syndrome <input type="checkbox"/> Abdominal Pain <input type="checkbox"/> Abscess <input type="checkbox"/> Achondroplasia

- There are some **picklists** available on the PDF. However, it is **possible to free-type** in the boxes alongside. If the information available exceeds the character limit for the box, please add the additional information to the 'Other client information' field.

OTHER CLIENT INFORMATION	
Any extra information relevant to referral	<input style="width: 100%; height: 100%;" type="text"/>

- Once all the boxes are complete, click **Submit** at the bottom of the referral form and this will attach the referral to an email from you, which has been pre-populated with the Wheelchair

Service NHS.net mailbox details. Once sent, you should get an auto- acknowledgement email to say that it has been received.

- The completed referral form can be saved if desirable by using the “save as” pathway. You should click on **Clear Form** at the bottom of the referral to clear the details (this won't clear your referrer details, but this can be done manually if necessary). The form is ready now for completion of the next referral. When closing the PDF, **do not save the changes** as the form needs to remain unpopulated for future use. Your unique referrer details will remain completed at the bottom of the form.

For information: For information governance purposes, the completed referral forms are password protected and encrypted using 128Bit AES Strong Encryption.