


# Referral form - Bristol Medical Imaging Partners LLP

info@bristolmedicalimaging.com

Partners: Dr Shoba Philip, Dr Mike Darby, Dr Paul McCoubrie, Dr Mark Thornton

<b>Spire Bristol Hospital</b> The Glen, Redland Hill Bristol BS6 6UT X-Ray: 0117 980 4010 Fax: 0117 923 8223  <b>Nuffield Health Bristol</b> Chesterfield Hospital 3 Clifton Hill Bristol BS8 1BN Tel: 0117 987 2727 Appointments: 0117 906 4878 Fax: 0117 925 4909  <b>Southmead Hospital</b> Dept. of Radiology Monk's Park Road Bristol BS10 5NB X-Ray: 0117 323 5128 Fax: 0117 323 5122	<b>Patient's details: Name, Date of Birth, Address:</b>  <b>Tel. Home:</b>  <b>Tel. Work/Mobile:</b>	<b>Investigation(s) required:</b>
	<b>Clinical information:</b>	<b>Referring Clinician's name:</b>  <b>Address for report:</b>  <b>Tel:</b>  <b>Clinician's signature:</b>  <b>Date:</b>
<b>bristolmedicalimaging.com</b> 	<b>Justified by:</b>  <b>Films:</b>	<b>Radiographer:</b>  <b>Dose:</b>

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