

**Macmillan Improving the Cancer Journey Service.**

Please email this form to loth.icj@nhslothian.scot.nhs.uk

|  |  |  |  |
| --- | --- | --- | --- |
| **Referral for** | Patient [ ]  | Carer [ ]  | Family [ ]  |
| **The client/carer consents to this referral \*** | Yes [ ]  |
| **Name**  |  | **DoB** |  |
| **Address** |  | **CHI**  |  |
| **Phone**  |  | **Email** |  |
| **SR1 or BASRiS completed?**(These are benefits for people with a terminal illness) |  Not applicable [ ]  SR1 completed [ ]  BASRiS completed [ ]  |

**If no footer to your email please complete below**

|  |  |
| --- | --- |
| **Name**  |  |
| **Job Title**  |  |
| **Organisation** |  |
| **Phone**  |  | **Email**  |  |

|  |  |
| --- | --- |
| **Cancer diagnosis** |  |
| Any additional information you would like to share with ICJ |  |

|  |  |
| --- | --- |
| **Date** |  |