

Procedure for Referring to Hydrotherapy at The Physiotherapy Centre, Holy Cross Hospital, Haslemere.

- 1) Please complete the front sheet with **ALL** the referrer's details so they can easily be contacted if required.
- 2) The Hydrotherapy Health Screen and Referral must be filled in as accurately as possible. Patients access the pool via steps or a hoist – **please ensure patient transfers and their ability to manage stairs is documented** to allow safe access to the pool.
- 3) **Referrals should be faxed to 01428 644007 or emailed to therapy@holycross.org.uk**
- 4) Once the referral is received we will contact the patient to make a hydrotherapy appointment and explain what they should expect.
- 5) Information regarding the patient's treatment details and progress will be made available to the referrer upon request.

Details of referring physiotherapist:

Name:	
Workplace Address:	
Contact Tel No:	
Email address:	
Signed:	

For RSCH only: Is this an NHS referral? YES NO

*Please note that only one session will be funded by the NHS and all patients being referred should be informed of this prior to referral.

NHS referrals should be emailed to: holy.cross@nhs.net

Hydrotherapy Referral Form

Date:

Patient details

Name	
Address	
DOB	
Contact telephone number	

HPC:

PMH:

DH:

SH:

Objective assessment:

Treatment given:

Aims/clinical reasoning for hydro:

