**Islay and Jura Patient Travel Booking request form**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| First name |   | Surname |  |   |
| Mobile Number |   | Date of Birth (CHI) |  |
| Landline number |  | Registered Practice |   |
| Hospital Attending |   |
| Date and Time of appointment |   |
| Clinic or Department |   |
| Method of Transport |  |
| Departure Date/Time |   |
| Return Date/Time |   |
| Car Make/Model/Registration |   |
| Special Assistance |  |
| Name of proposed Escort  | Please note it must be medically necessary for the patient to be accompanied on their journey. Patients under 16 automatically receive an escort, patients ages 16-18 can choose to be accompanied by a parent/guardian. |
|

|  |  |
| --- | --- |
| Does the patient require help to ensure they fully understand and remember information relating to their health and to make an informed decision regarding their care? | Yes [ ]  No [ ]  |
| Does the patient have severely restricted vision? | Yes [ ]  No [ ]  |
| Does the patient have difficulty communicating without assistance? | Yes [ ]  No [ ]  |
| Does the patient have severely restricted mobility but are not in receipt of higher level Disability Living Allowance (DLA) or enhanced Personal Independence Payment (PIP)? | Yes [ ]  No [ ]  |
| Does the patient require a high level of assistance with personal care but are not in receipt of higher level DLA or enhanced PIP? | Yes [ ]  No [ ]  |
| The escort is required to support the patient following an urgent referral, i.e. an appointment being issued within two weeks of the patient’s GP making the referral. **Including urgent maternity appointments.**  | Yes [ ]  No [ ]  |
| The escort is required to return with the patient following an emergency admission? | Yes [ ]  No [ ]  |
| The escort is required to provide assistance following specific procedures e.g. day surgery, endoscopy, colonoscopy, eye examinations | Yes [ ]  No [ ]  |
| The escort is required to provide assistance following specific treatments, e.g. chemotherapy, radiology | Yes [ ]  No [ ]  |
| The escort is required to provide assistance following a general anaesthetic, **first scan for maternity patients and 20 week scan.** | Yes [ ]  No [ ]  |
| The escort is required as an eye witness for the patient, e.g. epilepsy, dizzy spells. | Yes [ ]  No [ ]  |

 |

If you have not answered YES to any of the above questions please explain why it is **medically necessary** for the patient to be accompanied on their journey. The Patient Transport team at Islay Hospital do not have access to GP records. In some cases, it may be necessary for the Patient Transport team to confirm circumstances and/or ask the patient’s GP for authorisation to approve an escort.