

## Please note

We will contact your GP to confirm diagnosis and provide feedback following our consultation in line with professional guidelines.

Once we receive your referral, we will check the form and place you on our waiting list. Your appointment may be in person, via video consultation, or by telephone.

Urgent cases will be given priority so please be sure to include as much detail as possible in your referral.

## Please return your completed form to:

Department of Nutrition and Dietetics, Western Isles Hospital, Macaulay Road, Stornoway, Isle of Lewis HS1 2AF. Or email: [wi.dietetics@nhs.scot](mailto:wi.dietetics@nhs.scot)

## Further help and information

Dietetics Department, Western Isles Hospital, MacAulay Road, Stornoway, Isle of Lewis, HS1 2AF. Telephone 01851 708279. Email: [wi.dietetics@nhs.scot](mailto:wi.dietetics@nhs.scot)

## We are listening - how did we do?

We welcome your feedback, as it helps us evaluate the services we provide. If you would like to tell us about your experience:

- speak to a member of staff
- visit our website [www.wihb.scot.nhs.uk/feedback](http://www.wihb.scot.nhs.uk/feedback) or share your story at: [www.careopinion.org.uk](http://www.careopinion.org.uk) or tel. 0800 122 31 35
- tel. 01851 704704 ext. 2236 or 07977 708701 Monday-Friday between 10am-4pm (answerphone available).

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### Disclaimer

The content of this leaflet is intended to augment, not replace, information provided by your clinician. It is not intended nor implied to be a substitute for professional medical advice. Reading this information does not create or replace a doctor-patient relationship or consultation. If required, please contact your doctor or other health care provider to assist you to interpret any of this information, or in applying the information to your individual needs.

Bòrd SSN nan Eilean Siar  
NHS Western Isles



# Department of Nutrition and Dietetics Self-Referral Form



This Self Referral form allows you to refer yourself to a dietitian without having to see your GP first. You can see a dietitian if you have any concerns about your diet or nutrition.

Please complete the form on the reverse of this sheet as fully as possible. and return it to us at the details on the back page. On receipt, we will be in touch with you to arrange an appointment.

**Please note.** This form is for general public self-referrals only. Health professionals should not use this form, but instead refer via SCI Gateway. We can only accept referrals from people who live in the Western Isles.

**If your problem requires urgent attention, is severe or is worsening, please seek more urgent medical attention by telephoning your GP, or freephone NHS 24, tel. 111.**

Name: .....

Date of Birth: ...../...../.....

Address: .....

.....

.....

Postcode: .....

Contact Numbers: .....

Home ..... Work ..... Mobile .....

Email: .....

GP Practice: .....

Estimated Weight: .....

Estimated Height: .....

Have you had any unintentional weight loss? .....

Why would you like to see a dietitian?

**Please list your existing medical conditions**

Empty box for listing existing medical conditions.

**Please list your current medication below:**

Empty box for listing current medication.

**Are you seeing any other health professionals** Yes  No   
If yes, please state who

.....  
**Do you have any additional support needs** Yes  No   
If yes, please state what

.....  
**Do you have a disability or long term condition?** Yes  No   
If yes, please state what

.....  
**Do you require an interpreter?** Yes  No   
If yes, please state which language

.....  
**Do you have the ability to attend an appointment by video consultation if offered?** Yes  No

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**To be completed if different to person being referred**

Are you completing this form on behalf of someone else? Yes  No

Has consent been received from person being referred? Yes  No

What is your relationship to person being referred? .....

Who is best person to contact regarding this referral? .....

Telephone number (if different to person being referred) .....