

### **REFERRAL FORM**

Cambourne Clinical Psychology. Dr Rachel Benford-Brown and Dr Lynda Teape, registered and chartered clinical psychologists.

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Consulting Rooms: Cambourne Psychology, Regus, Compass House, Vision Park, Histon, Cambridge, CB24 9AD.

#### **Client Information**

Full name and title:

Date of birth:

Home address:

Telephone number:

Email address:

# Reason for referral/presenting difficulties:

Treatment history:

Current prescribed medication:

Risk History and current risks/concerns:

Other Agencies involved:

Other relevant information:

# Cambourne Clinical Psychology, Regus, Compass House, Vision Park, Chivers Way, Histon, Cambridge, CB24 9AD

Tel: 0796 11 64 337 Web: www.cambourneclinicalpsychology.com

# **Referrer Details**

Referrer's name and profession:

Referrer's address:

Referrer's Contact Number:

If not referred by GP, please complete the section below:

General Practitioner's name:

General Practitioner's address:

Please confirm that you have discussed this referral with your client and they have given their consent for us to contact them to discuss the referral further.

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