

Physiotherapy Pelvic Health – Self Referral Form

Your Details	Your problem (please tick all that apply)
NAME	Leaking urine
ADDRESS	Urinary urgency / frequency
	Prolapse
	Bowel problem – constipation / leakage/ other
	Pelvic pain
POSTCODE	Difficulty with pelvic floor muscle exercises
PHONE	
DATE OF BIRTH	Something else? Please give details
Your doctor's name	Is there any other information you would like us to have? You can write on the other side of this sheet, or attach a separate sheet of paper.
Your doctor's	
address	

Once you have filled this form in please hand it in to your nearest physiotherapy department or GP surgery, or send it to one of the Pelvic Health Physiotherapists listed — either way we will ensure your referral goes to the closest and best qualified person to treat you.

Kirsteen Ferguson, Pelvic Health Specialist Physiotherapist, Physiotherapy Department, Raigmore Hospital, Old Perth Road, Inverness, IV2 3UJ

Alison Clarke, Pelvic Health Specialist Physiotherapist, Robertson Health Centre, Alness, IV17 OUN

Sylvia Craine, Pelvic Health Specialist Physiotherapist, Caithness General Hospital, Bankhead, Wick, KW1 5NS

Wendy Rarity, Pelvic Health Specialist Physiotherapist, Cowal Community Hospital, 360 Argyll Street, Dunoon, PA23 7RL

If you have any of the following, please see your GP <u>before</u> self referring for physiotherapy

Stinging or burning sensation when you pass urine, or blood in your urine

Any unusual / unexpected bleeding or staining from the vagina

Any bleeding from the anus (back passage)

Persistent abdominal pain

Persistent abdominal bloating which does not come and go

Difficulty eating or finding you feel full early in a meal

Recent weight loss without trying

Any numbness, tingling or muscle weakness

Have you seen any medical professionals with this problem? Yes/ No
If yes, please give details
How long has it been a problem ? (please circle)
Weeks / months / years