

Patient Referral for Urology Assessment

Referring Physician: Dr. John Smith

Practice Name: ABC Medical Clinic

Address: 123 Health St., Suite 456, City, State, Zip Code

Phone: (123) 456-7890

Date: October 2, 2023

To:

Urology Specialist: Dr. Emily Johnson

Practice Name: XYZ Urology Group

Address: 789 Care Ave., Suite 101, City, State, Zip Code

Patient Information:

Name: Jane Doe

Date of Birth: January 15, 1980

Contact Number: (987) 654-3210

Referral Reason:

Ms. Jane Doe presents with recurrent urinary tract infections and dysuria. A urological evaluation is needed to determine the underlying causes and appropriate management. Previous treatments have included antibiotics, but symptoms persist.

Relevant Medical History:

- History of urinary tract infections
- No significant past medical history
- Medications: None currently
- Allergies: No known drug allergies

Requested Assessment:

Comprehensive urological evaluation including urinalysis, renal function tests, and possible imaging studies as deemed necessary.

Attachments:

Recent lab results and imaging can be provided upon request.

Thank you for your attention to this matter. Please do not hesitate to contact me for further information.

Sincerely,

Dr. John Smith
ABC Medical Clinic