



Northern, Eastern and Western Devon  
Clinical Commissioning Group

Devon Referral Support Services

Tel: DRSS Tel no

## Are you in shape?

Patient Name/Address

Date

### PRIVATE & CONFIDENTIAL

Dear Title and Surname.

**Unique Booking Reference Number (UBRN): UBRN**

Your GP has recently requested a specialist 'Specialty Name' opinion on your care. This request may result in:

- advice on treatment options and/or tests
- OR**
- a recommendation for an appointment.

Please telephone your local NHS Referral Support Service (DRSS) on **DRSS Tel no** and we can advise you on what happens next. Textphone (minicom) users please phone 18001 and then **DRSS Tel no**.

The staff will need you to confirm your Unique Booking Reference Number (UBRN as quoted above) and your name, date of birth and the address where you live.

We are open Monday to Friday, 8am – 5pm.

Yours sincerely

Devon Referral Support Service

**For alternative versions of this letter please ring the helpline on 01626 883 888 or email [cab.helpdesk@nhs.net](mailto:cab.helpdesk@nhs.net). Textphone (minicom) users please phone 18001 and then the helpline number.**

If you would like more information about DRSS, the referral process or improving your overall health prior to surgery please have a look at the DRSS web site at <http://devon-rss.nhs.uk>

We would very much like you to let us know your opinion on how well we dealt with your referral so that we can improve the service that we offer. There is a short survey available online at <https://www.surveymonkey.co.uk/r/drssfeedback> . Thank you for your time.