



# Syracuse Plastic Surgery

Skin and Wellness

## **SEND ME TO SPS!**

Referring Provider: \_\_\_\_\_ Office #: \_\_\_\_\_

Practice Name: \_\_\_\_\_ Fax #: \_\_\_\_\_

Practice Address \_\_\_\_\_

PCP Name( If different than the referring): \_\_\_\_\_

Patient Name: \_\_\_\_\_ DOB \_\_\_\_\_

Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Will a supplied interpreter be needed for this appointment?  No  Yes

Language: \_\_\_\_\_

Health Insurance: \_\_\_\_\_ Subscribers Name: \_\_\_\_\_

Policy #: \_\_\_\_\_ Group# \_\_\_\_\_ Subscribers DOB \_\_\_\_\_

If Tricare, relationship to military member \_\_\_\_\_

Military members SS# \_\_\_\_\_

### **Reason for Referral for Dermatology Appt:**

Patient would like to establish routine skin checks/ cancer screening

Dermatologic Concern and Description: \_\_\_\_\_

Suspected Diagnosis: \_\_\_\_\_

Personal history of melanoma:  Yes  No

Family history of melanoma:  Yes  No

**\* If available, please provide copies of any relevant tests or biopsy reports.**

Dermatology Triage Guidelines **(Circle most relevant)**

Urgent (Please see within 24-72 hours)

- New or changing pigmented lesion - Ruptured cyst - Ulcerated hemangioma
- Bullous dermatosis (blisters/ blistering rash) - Eruptive rash (new/ concerning)

Semi Urgent (Please see within two weeks)

- Eczema and psoriasis flares/dermatitis
- Skin lesions concerned for non-melanoma skin cancer,
- Hemangioma

**Non Urgent (next available appointment)**

Chronic rash - Onychomycosis and other nail complaints - Acne - Actinic keratosis - Birth marks  
Cosmetic concerns (including skin tags) - Cysts - Alopecia - Warts/molluscum

The examples above are guidelines, if you have any questions, concerns or need a patient seen urgently, please call our office at (315) 299-5313 to speak with our scheduling consultant or one of our providers.