

Mycology
St John's Specialist Dermatology Laboratories
St Thomas' Hospital
Westminster Bridge Road London SE1 7EH



Tel: 020 7188 6400

MYCOLOGY REQUEST FORM

Send to:		Requester:		
Mycology Department, St. John's Institute of Derma St. Thomas's Hospital, Westminster Bridge Road, London, SE1 7EH				
Details of Patient: (Please complete in BLOCK letters.)				
Surname:				
First Name:				
Hospital /NHS Number:				
Date of Birth:			M/F:	
Country of Origin:			,	
Previous Mycology No:				
Provisional Diagnosis and Relevant History:				
Sites to be examined:				
Date Specimen Taken:				
Date:		Signature:		

Version: 1.6

File Name: DMM-PD-02 External Request Form Issue Date: October 2022

Page **1 of 1** Authorised by: Lucy Hillman-Ment