



## Psychological Pathways

### Medico-legal referral Initial information intake

#### Client details

Client name:	
DOB:	
Next of kin: (If client is a minor)	
Address:	
Contact email:	
Contact number:	

#### Solicitor details

Solicitor firm:	
Name of solicitor making the referral:	
Contact person if different from above:	
Client reference number:	

#### Details of the index event & case

Nature of incident:	
Date of the incident:	
Any reading info provided?	