CAREDRIVE / HOSPITAL SERVICES

Patient Transport Booking Request

Non-emergency journeys | Booking confirmed separately

01 Requesting hospital contact

Hospital / department

Staff member name

Staff direct phone

Staff work email

02 Journey details

Travel date (DD / MM / YYYY)

Requested pickup time

Pickup address / entrance

Destination address / entrance

Journey type (select one)

- [ ] One-way
- [ ] Return
- [ ] Recurring

03 Passenger & accessibility

Passenger name

Passenger / authorised contact number

Assistance requested (subject to vehicle suitability)

- [ ] Walking aid
- [ ] Folded wheelchair
- [ ] Support person
- [ ] Other

Total passengers

Operational notes - no diagnoses or clinical information

Share patient details only through an agreed secure channel. Do not include clinical records.
CareDrive will confirm the transport plan, pricing and driver details before booking.