

General Hospital use only	Clinic	Day Date	Time	Hospital No.
SCI Gateway Electronic Referral MEDICAL IN CONFIDENCE <u>Patient Consent has been given for information sharing</u>			Date Referral Created	
			17-Mar-2016	
			Date Referral Submitted	
			21-Mar-2016 @ 07:58:01	

Unique Care Pathway Number: **101011039797F**CHI No: **0710902042**

REFERRAL TO	
OphthalmologyC7 Grampian General Protocol	——— Consultant / receiving practitioner and/or specialty clinic
Aberdeen Royal Infirmary Foresterhill Road Aberdeen AB25 2ZN	——— Hospital and hospital address Hospital unit no. N101H Email address -
Urgency of referral Routine Sensitivity of referral Sensitive	

PATIENT DETAILS	
Surname Cameron Forename(s) Cherie Title Miss Sex Female Date of birth 07-Oct-1990 CHI No. 0710902042	Patient's address 12 Beattie Avenue Aberdeen AB25 3AP Contact details Home: 919247/ 07943 368618

REFERRING PRACTITIONER DETAILS	
Name Dr. Hani Zakri GP Code 62367 GMC Code 6128832 Practice name Denburn Medical Practice (30078) Practice code 30078	Practice address Denburn Health Centre Rosemount Viaduct Aberdeen AB25 1QB Contact details Voice: 01224 643333

ADMINISTRATIVE INFORMATION
This referral letter is complete, has been checked by the referring GP and authorised for transmission. Referred By: Registered GP

CLINICAL INFORMATION

History of presenting complaint / examination findings / investigation results**Presenting complaint****Description:** blurred vision and headaches**Referral** Dear Dr**Summary:**

I would appreciate your review of this 26 year old girl who presents with recurrent headaches and blurred vision. She was reviewed by an Optician who noted tortuous blood vessels that were abnormal for her young age.

Today on examination she has normal visual fields and normal pupil reaction. In addition I did note these said tortuous vessels.

She continues despite her vision being corrected by glasses to have these episodes of blurred vision that occur for a short time. She has started to have headaches and these seem to be migrainous in nature but does not seem affected by her blurred vision and seem separate in nature.

I would appreciate your review of her vision and further input.

Kind regards

Dr M Broome

Dr K Moulton signed on behalf

Examinations and Investigations

Current smoker	-	29-Jun-2015
Trying to give up smoking	-	27-May-2015
Cigarette smoker	-	27-May-2015
Alcohol consumption, 1 units/week	-	09-Apr-2014
Alcohol consumption 4 units/week	no abdo pain today. , to come back if no improvement	07-Oct-2011
Alcohol intake within recommended sensible limits	-	14-Dec-2010
Aerobic exercise 3+ times/week	-	09-Apr-2014

Investigations

NB:	THE PAST MEDICAL HISTORY SECTION MAY CONTAIN ONLY DATA JUDGED - OF THE HIGHEST SIGNIFICANCE TO THE PATIENT'S GP RECORD	-
NB:	IT MAY NOT CONTAIN DATA FROM LABS OR RADIOLOGY FOR WHICH SCI - STORE SHOULD BE CONSULTED	-
Patient Weight in Kilograms	54	-
Patient Height in Metres	154	-
Patient BMI	22.77	-

Reason for referral**Care type requested:** Out Patient**Expected outcome:** Not Specified**Past medical history****Pre-existing conditions**

<u>Description</u>	<u>Laterality</u>	<u>Modifier</u>	<u>Extension</u>	<u>Date of onset</u>
Gastritis unspecified	-	-	-	07-Oct-2011
Fracture of metatarsal bone	-	-	conservative treatment	06-Sep-2000

Medication Details**Current and recent medication**

No medications recorded

Past Medication Section

<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Sumatriptan Succinate Tablets 50 mg	-	6 tablet	ONE TO BE TAKEN - AS REQUIRED. DOSE MAY BE REPEATED AFTER 2 HOURS IF MIGRAINE RECURS	-	11-Mar-2016	42Days
Dermol Cream 500 gram bottle	-	1 bottle	APPLY WHEN REQUIRED AND AS SOAP SUBSTITUTE	-	03-Mar-2016	42Days
Eumovate Cream 0.05 %	-	30 GRAM	APPLY THINLY 1-2 - TIMES DAILY - ON DRY SKIN EXCEPT ON BREAST	-	03-Mar-2016	42Days
Chlorphenamine Tablets 4 mg	-	28 TABLET	ONE TABLET EVERY 4-6 HOURS AS REQUIRED (MAX 6 DAILY)	-	03-Mar-2016	5Days
Flucloxacillin Capsules 500 mg	-	28 CAPSULE	ONE QDS	-	03-Mar-2016	42Days

Clinical warnings

No clinical alert data available

Additional relevant information

No family history information available

Application Version
No. **2.1.1c**Stylesheet Version
No. **5.93**

Signature of referring doctor (or other professional)

Date

Hospital use only	Clinic	Day Date	Time	Hospital No.
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SCI GATEWAY ELECTRONIC REFERRAL LETTER
MEDICAL IN CONFIDENCE

Patient Consent has been given for information sharing

Date Referral Created
01-Aug-2012
Date Referral Submitted
07-Aug-2012 @ 07:55:18

Unique Care Pathway Number:**1010039851230**

CHI No:**0710902042**

REFERRAL TO	
GastroenterologyA9 Grampian General Protocol	— Consultant / receiving practitioner and/or specialty clinic
Aberdeen Royal Infirmary Foresterhill Road Aberdeen AB25 2ZN	— Hospital and hospital address Hospital unit no. N101H Email address -
Urgency of referral	Routine
Sensitivity of referral	Sensitive

PATIENT DETAILS	
Surname	Cameron
Forename(s)	Cherie
Title	Miss
Sex	Female
Date of birth	07-Oct-1990
CHI No.	0710902042
Patient's address	12 Beattie Avenue Aberdeen AB25 3AP
	Contact number(s)
	Voice:919247

REFERRING PRACTITIONER DETAILS	
Name	Dr. Amir Iqbal
GP Code	62723
GMC Code	6050971
Practice name	Denburn Medical Practice (30078)
Practice code	30078
Practice address	Denburn Health Centre Rosemount Viaduct Aberdeen AB25 1QB
	Contact number(s)
	Voice:01224 643333

ADMINISTRATIVE INFORMATION
This referral letter is complete, has been checked by the referring GP and authorised for transmission. Referred By:Registered GP

CLINICAL INFORMATION

History of presenting complaint / examination findings / investigation results**Presenting complaint****Description:** upper abdominal pain**Comment:** Dear Dr

I am writing to refer this lady for further review of her epigastric pain with some associated vomiting. This has been present over the last few weeks. She has been seen several times and started on Omeprazole, Metoclopramide and also analgesics.

Abdominal examination revealed some epigastric tenderness. She has had no weight loss and has been vomiting no blood. Her stools are normal and she has no difficulty swallowing. Of note she had a previous admission last year and had an OGD done at that point that showed gastritis and duodenitis. She was also found to be H-Pylori positive and received eradication therapy. Her symptoms seemed to settle but have worsened of late and do not seem to be controlled by a maximum PPI and prokinetic medication. Also of note she also has a microcytic hypochromic anaemia with an HB of 102 , MCV of 68 and MCH of 20.

She says that her periods are actually quite light and only last for a few days at a time. Therefore I wondered if she developed this iron deficiency anaemia more in her relation to her gastric symptoms rather than a gyne cause. I would appreciate if you could see her for further review and investigation as you see fit.

Thank you.

Yours sincerely

Dr Iqbal

Examinations and Investigations

Current smoker	,	07-Oct-2011
Current smoker	has just been given NRT.	14-Dec-2010
Cigarette smoker	-	05-Jun-2009
Alcohol consumption 4 units/week	no abdo pain today. , to come back if no improvement	07-Oct-2011
Alcohol intake within recommended sensible limits	-	14-Dec-2010
Alcohol consumption, 1 units/week	-	05-Jun-2009

Investigations

NB:	THE PAST MEDICAL HISTORY SECTION MAY CONTAIN ONLY DATA JUDGED - OF THE HIGHEST SIGNIFICANCE TO THE PATIENT'S GP RECORD	-
NB:	IT MAY NOT CONTAIN DATA FROM LABS OR RADIOLOGY FOR WHICH SCI - STORE SHOULD BE CONSULTED	-
Patient Weight in Kilograms	51	-
Patient Height in Metres	154	-
Patient BMI	21.5	-

Reason for referral**Care type requested:** Out Patient**Expected outcome:** Not Specified**Past medical history****Pre-existing conditions**

<u>Description</u>	<u>Laterality</u>	<u>Modifier</u>	<u>Extension</u>	<u>Date of onset</u>
Fracture of metatarsal bone	-	-	conservative treatment	06-Sep-2000

Medication Details**Current and recent medication**

<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Omeprazole Capsules (Gastro-Resistant) 20 mg	0103050P0AAAGAG	112 CAPSULES	TAKE TWO ONCE DAILY	-	26-Mar-2012	-
<u>Past Medication Section</u>						
<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Metoclopramide Hydrochloride Tablets 10 mg	-	42 tablet	ONE THREE TIMES A DAY	-	27-Jul-2012	42Days
Helicobacter Test Infai Diagnostic Test	-	1 kit	AS DIRECTED	-	27-Jul-2012	42Days
Prochlorperazine Maleate Buccal tablets 3 mg	-	20 tablet	ONE TO BE DISSOLVED BETWEEN UPPER LIP AND GUM THREE TIMES A DAY	-	26-Jul-2012	7Days
Tramadol Hydrochloride Capsules 50 mg	-	100 capsule	ONE OR TWO TO BE TAKEN FOUR TIMES A DAY AS REQUIRED FOR PAIN	-	25-Jul-2012	42Days
Clinical warnings						
No clinical alert data available						
Additional relevant information						
No family history information available						

Signature of referring doctor (or other professional)	Date

Please email any feedback to: grampian.cisteam@nhs.net
Please note that any change or support requests to the above address will be ignored



De Alan

56-58 Union Street
Aberdeen
Aberdeenshire
AB10 1BB

Tel 01224 641234
Fax 01224 636375
Web specsavers.co.uk/aberdeen

Tom Simpson FBDO CL
Dispensing Optician

David McGinty BSc (Hons) MCOptom
Registered Optometrist

David Quigley BSc (Hons) MCOptom
Registered Optometrist

To DR

RE: *CHERIE CAMERON*

D.O.B: *7/10/1990*

Px has presented with signs and symptoms of dry eyes, this is R/L/*BOTH* eyes.

Could you please prescribe the following medication on repeat prescription:

Hypromellose 0.5% eye drops at least *4X DAILY*

Celluvise eye drops at least

Carbomer eye gel at least

Lacrilube eye ointment

We would be happy to review again, if required in the future.

Many thanks.

C Bradley
28/5/13

[Signature]



Registered Company Aberdeen Visionplus Limited
Registered in England No 2787067 VAT No 609 6430 37
Registered Office Forum 6 Parkway Solent Business Park Whiteley Fareham PO15 7PA
Directors A list of directors is available from the Registered Office



Dr Gibson
Denburn Health Centre
Rosemount Viaduct
Aberdeen
AB25 1QB

56-58 Union Street
Aberdeen
Aberdeenshire
AB10 1BB

Tel 01224 641234
Fax 01224 636375
Web specsavers.co.uk/aberdeenshire

Tom Simpson FBDO CL
Dispensing Optician

David McGinty BSc (Hons) MCOptom
Registered Optometrist

David Quigley BSc (Hons) MCOptom
Registered Optometrist

28 May 2013

Dear Dr Gibson,

RE: GP Action Required to: GP to Manage

Miss Cherie Cameron

DOB : 07/10/1990

NHS No.:

Address: 12 Beattie Avenue, ABERDEEN, AB25 3AP

Telephone No.: 07514 857755

Prescription details from current sight test: 28 May 2013

	Vision	Sph	Cyl	Axis	Prism H	Prism V	VA	Add	Near VA	Previous VA 06 December 2011
RE		-0.75	+0.75	80.0			6/6		N5	6/5
LE		-1.50	+0.50	85.0			6/6		N5	6/5

RE Intra-Ocular Pressure mmHg	
LE Intra-Ocular Pressure mmHg	

RE Disc Appearance Healthy	Visual Fields Normal
LE Disc Appearance Healthy	

Reason for Referral: Unexplained Headaches

This px attended for a routine sight test c/o headaches. She described the headaches as frontal headaches with increasing freq. I only found a small change in her prescription which would not account for the headaches and visual field analysis showed no defect. She also told me that she has not been sleeping well lately, uses a VDU a lot and occasionally suffers migraine. It is more likely that the px's symptoms are due to fatigue. I refer to your care.

Yours Sincerely,

Cahir Bradley

GOC/GMC No.: 01-26765

Statement: The reason for this referral has been explained to the patient or guardian who agrees to it. The patient or guardian also consents to information being exchanged between the Hospital Eye Service, their General Medical Practitioner and optometrist or ophthalmic medical practitioner.



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Registered Office Forum 6 Parkway Solent Business Park Whiteley Fareham PO15 7PA
Directors A list of directors is available from the Registered Office

GP Copy



Aberdeen Royal Infirmary
Foresterhill
Aberdeenshire
AB25 2ZN

Miss Cherie Cameron
12 Beattie Avenue
Aberdeen
AB25 3AP

Date: 26/11/2012
CHI Number: 0710902042

Dear Miss Cameron,

I write to inform you that you have been removed from the **Gastroenterology** Waiting List. Please see your GP should you require a new referral.

Yours sincerely,

Medical Secretary

GP Cover Note



Aberdeen Royal Infirmary
Foresterhill
Aberdeenshire
AB25 2ZN

A Iqbal
Denburn Medical Practice
Denburn Health Centre
Rosemount Viaduct
Aberdeen
AB25 1QB

Dear A Iqbal

Here is a copy of a letter sent to one of your patients

Regards

NHS Grampian, Aberdeen Royal Infirmary		RADIOLOGY REPORT	
		Page 1 of 1	
Name:	Cherie Cameron	Referrer:	GP
Address:	12 Beattie Avenue Aberdeen	Address:	SIDDIQUE ABDUL- RASHID DENBURN MEDICAL PRACTICE DENBURN HEALTH CENTRE ROSEMOUNT VIADUCT AB25 1QB
Postcode:	AB25 3AP		
D.O.B.	07.10.1990		
		CHI No:	0710902042
		Sec.ID:	0929924J, 0710902042
		Book No:	31462953

Exam Date: 28.08.2012 Exam: US Abdomen

The liver is normal in size, shape and echotexture. No focal abnormalities or biliary duct dilatation.
Normal gallbladder, spleen, aorta and both kidneys.
The urinary bladder is empty.
Unable to visualise pancreas, due to overlying bowel gas.

Conclusion: Normal scan.

Reported By: LYNNE BAIN, Sonographer
Reported Date: 28/08/2012
Verified by: LYNNE BAIN, Sonographer on 28/08/2012

Reported Date: 28/08/2012
Reported By: LYNNE BAIN, Sonographer

