

Subject Access Request



Patient	Mr Rafael Viola
Date of birth	21-July-1959 (age 67)
Gender	M
NHS number	4001475723
Patient's address	101 Bradestone Road Nuneaton CV11 4QS
Date range selected	Full record
Organisation	INSLAW
Reference	100989

Problems

Active

11-Aug-2026 Dr ***** Sandoo *****

Productive cough

04-Aug-2025 *****

Coronary arteriosclerosis

(ED Discharge summary 4.8.25)

09-July-2024 *****

Left ventricular systolic dysfunction

29-Apr-2024 *****

Acute non-ST segment elevation myocardial infarction

29-Apr-2024 *****

Coronary artery bypass graft

Patent LIMA -LAD graft

29-Apr-2024 *****

Viral hepatitis C

taken from letter

25-Mar-2021 Dr ***** Sandoo *****

Depressive disorder

11-Jan-2018 *****

[X]Osteopenia

10-Apr-2014 *****

Chronic obstructive airways disease

10-Apr-2014 *****

IHD - Ischaemic heart disease

10-Apr-2014 *****

Peripheral vascular disease NOS

10-Apr-2014 *****

Osteoporosis

01-Jan-2006 Dr ***** Fenby (FEN)

HIV infection

Significant Past

29-Apr-2024 *****

History of cannabis misuse

cannabis smoker - taken from letter

28-Apr-2024 *****

Coronary angiography

?PCI

12-Aug-2021 Dr ***** Areje *****

Gastric ulcer

09-Jun-2020 Dr ***** Hanif *****

Gastric ulcer

06-Jun-2017 Dr ***** Fenby (FEN)

History of sexual abuse

11-Apr-2017 Dr ***** Fenby (FEN)

Avascular necrosis of the head of femur (Bilateral)

19-Oct-2016 *****

Chronic low back pain

07-Sept-2015 *****

Ischaemic foot (Right)

12-July-2010 *****

Closed fracture of the distal radius, unspecified

01-Jan-2008 *****

Coronary artery bypass graft operations

09-Jan-1996 *****

H/O: depression

09-Jan-1996 *****

Alcohol dependence syndrome

30-Dec-1899 *****

H/O: drug abuse

Minor Past

21-Feb-2025 Dr *** Hassan *******

Medication review with patient

06-Jan-2025 Dr *** Arikawe *******

Musculoskeletal chest pain

31-Aug-2022 Dr *** Sandoo *******

Folic acid deficiency

16-Aug-2022 Dr *** Azuamah *******

Multiple symptoms

19-May-2022 Dr *** Muhammad (muh6453)**

Skin lesion

13-Jan-2022 Dr *** Areje *******

Heel pain

?pressure sore

04-Nov-2021 *****

Chest pain

left sided

12-Aug-2021 Dr *** Areje *******

Advice about treatment given

23-Oct-2020 Dr *** Mason (Mason)**

Folic acid deficiency

29-Sept-2020 Dr *** Areje *******

Muscle strain

01-July-2020 Dr *** Hanif *******

Chronic cough

25-Apr-2020 *****High risk category for developing complication from COVID-19 infection
immunodeficiency as per Dr Mason**25-Apr-2020 *******

Risk of exposure to communicable disease

02-Dec-2019 *****

Gastritis unspecified

22-Jan-2019 *****

Vomiting of blood

22-Jan-2019 *****

Chest pain

14-Dec-2018 *****

Low mood

02-Dec-2018 *****

Cannot sleep - insomnia

18-Jun-2018 Dr *** Fenby (FEN)**

Varicose eczema (Bilateral)

06-Jun-2017 Dr *** Fenby (FEN)**

Insomnia NOS

13-Dec-2016 Dr *** Fenby (FEN)**

Hip pain

Consultations

11-Aug-2026 Mr Rapid Health (RapidHealth) Awaiting clinical code migration to EMIS Web

Email sent Indirect encounter NOS Email sent to
 Kayleighviola24@gmail.com.
 Subject Subject Your Chaucer Surgery request has been
 received
 Message message
 Rapid reference TA/103071
 reference

11-Aug-2026 Mr Rapid Health (RapidHealth) Awaiting clinical code migration to EMIS Web

Email sent Indirect encounter NOS Email sent to
 violarafael1@gmail.com.
 Subject Subject Your Chaucer Surgery request has been
 received
 Message message
 Rapid reference TA/103071
 reference

11-Aug-2026 Mr Rapid Health (RapidHealth) Awaiting clinical code migration to EMIS Web

Rapid type Rapid type Medical Request - practice review
 Description Description Notes from the patient of a medical request
 for practice review
 Action type Action type Practice saved
 Information source Information source Direct from patient via Rapid Health
 Patient concern Patient concern Chest infection
 Patient free-text Patient free-text Hiya seems to be a chest infection, abx
 text required please
 Help requested Help requested Prescription
 Pathway used Pathway used Cardiopulmonary
 Practice note Practice note Called informed of appt
 Patient confirms Patient confirms I do not need A&E because the GP has
 treated me for this in the past and I feel well enough to
 wait.
 Observations Observations • Shortness of breath: Gets out of breath
 easily, Working hard to breathe, Feels like can't get
 enough air, Feels short of breath • General symptoms:
 Cold or flu symptoms, Cough • Duration of symptoms: 2-
 14 days • Symptoms onset: Gradual (or not sure) •
 Progression of shortness of breath in the last 6 hours:
 Stayed the same • Increased usage of inhaler/inhaler not
 working as well: I do not have an inhaler • Dyspnoea level:
 Have stopped doing most, or all, of their usual daily
 activities, Gets short of breath when dressing or
 undressing, or doing similar activities • SOB impact on
 sleep: Waking with SOB • SOB relieved by rest or GTN:
 GTN • Triggers: Eating a meal, Exercise or physical
 activity, Lying down flat • Patient temperature: Doesn't
 know • Swelling of feet, ankles, calves / lower legs: Yes •
 Phlegm: Yellow or white • Additional associated symptoms:
 Runny nose or nasal congestion, Wheeze • Smokes
 cigarettes or cannabis: Yes • Cardiopulmonary past
 medical history and risk factors: Heart failure • Other
 relevant cardiopulmonary history: Acid reflux, Anxiety,
 COPD, Stomach ulcer (peptic ulcer) • Immunosuppressive
 patients: Weak immune system (caused by genetic
 disorder)
 Other answers Other answers • Recent DVT risk factors: None • Recent
 back or chest injury: No • Recently travelled abroad: No •
 Painful to take a deep breath: No • Breathing impact
 factors: None • Feels feverish: No • Coughing blood
 (haemoptysis): No • High risk symptoms: None • Active or
 exercises regularly: No
 Rapid reference TA/103071
 reference

11-Aug-2026 Dr *** Sandoo ***** The Chaucer SurgeryGP Surgery**

Problem Productive cough
 History History Patient presents with fatigue and chesty cough
 over 3/52. History: C/O fatigue, excessive sleepiness,
 chesty cough on and off for 3/52. Wakes feeling unwell.
 Mild breathing difficulties. No fever, rashes, vomiting. no
 other sx PMH: COPD. SH: Smokes 40 cigarettes/day.
 Lives alone, retired. Examination: talking in full sentences,
 alert interactive, not sob/wheezy Impression: 1. Possible
 respiratory tract infection. Plan: Prescribed antibiotics.
 Advised fluids, steam inhalation, paracetamol, lemon and
 honey cough mixture. If not improving, will arrange for
 examination and possible CXR. Safety netting: advised to
 seek further help if symptoms worsen or do not improve.

04-Aug-2026 Mr Abtrace REMOTEBOT (ABTRB) Awaiting clinical code migration to EMIS Web

Comment Comment note SMS sent to ***** via Abtrace tool.
Message: Dear Rafael Viola, We note that we do not have your smoking status recorded on our records. Could you please complete the details in order to update your records. abtr.co/mYweu Chaucer Surgery

Comment General health questionnaire (assessment scale)

Comment Smoking monitoring invitation (procedure)

Comment note Staff note via Abtrace tool: Smoking Status Request

30-July-2026 Mr Abtrace REMOTEBOT (ABTRB) Awaiting clinical code migration to EMIS Web

Comment Comment note E-Mail sent to violarafael1@gmail.com via Abtrace tool. Subject: Smoking Status; Content: Dear Rafael Viola, We note that we do not have your smoking status recorded on our records. Could you please complete the details in order to update your records. Click here to access the questionnaire: <https://abtr.co/mYogx Chaucer Surgery Off School Walk Attleborough Nuneaton, CV11 4UZ>

This is sent from a no-reply mailbox. To respond to this message, please contact the practice directly.

Comment Smoking monitoring invitation (procedure)

15-July-2026 Mr Abtrace REMOTEBOT (ABTRB) Awaiting clinical code migration to EMIS Web

Comment Comment note E-Mail sent to violarafael1@gmail.com via Abtrace tool. Subject: Smoking Status; Content: Dear Rafael Viola, We note that we do not have your smoking status recorded on our records. Could you please complete the details in order to update your records. Click here to access the questionnaire: <https://abtr.co/mY3H5 Chaucer Surgery Off School Walk Attleborough Nuneaton, CV11 4UZ>

This is sent from a no-reply mailbox. To respond to this message, please contact the practice directly.

Comment Smoking monitoring invitation (procedure)

14-July-2026 Mr Abtrace REMOTEBOT (ABTRB) Awaiting clinical code migration to EMIS Web

Comment Comment note SMS sent to ***** via Abtrace tool.
Message: Dear Rafael Viola, We note that we do not have your smoking status recorded on our records. Could you please complete the details in order to update your records. abtr.co/mYPYq Chaucer Surgery

Comment General health questionnaire (assessment scale)

Comment Smoking monitoring invitation (procedure)

Comment note Staff note via Abtrace tool: Smoking Status Request

08-July-2026 *** The Chaucer SurgeryGP Surgery**

Comment Medication reconciliation

Comment Comment SW dietetic service letter 07.07.26

Comment New medication:

Comment - nutricrem nualtra 2 pots per day

Comment pt experiencing reflux symptoms, takes omeprazole and lansoprazole, experiences choking 3x/week - dietician to refer to SLT for swallow

Comment Comment spoke to pt to discuss letter, in contact with SLT today

Medication Medication (NOT ISSUED) Nutricrem dessert (Flavour Not Specified) two pots daily , 7000 gram

07-July-2026 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
DTclinical2 Supplements South Warwickshire Foundation Trust Dietetics

Additional Letter encounter

07-July-2026 *** Awaiting clinical code migration to EMIS Web**

01-July-2026 Lab Results Quantitv faecal immunochem tst NO CLINICAL DETAILS
Quantitv faecal immunochem tstAnaemia ?Cause *: *: * Please note that if the FIT result is <10 ugHb/g, no excess blood detected in faeces. Follow up according to symptoms, check Haemoglobin and consider for routine referral.) If greater than or equal to 10 ugHb/g, patient may have already been referred on a 2ww (secondary care will action). If not referred please refer on a 2ww proforma. (*****) - Normal, no action:
Quantitv faecal immunochem tst 7 ug Hb/g faeces (No range available)

30-Jun-2026 Mr Abtrace REMOTEBOT (ABTRB) Awaiting clinical code migration to EMIS Web

Comment Comment note E-Mail sent to violarafael1@gmail.com via Abtrace tool. Subject: Smoking Status; Content: Dear Rafael Viola, We note that we do not have your smoking status recorded on our records. Could you please complete the details in order to update your records. Click here to access the questionnaire: <https://abtr.co/mY2lj> Chaucer Surgery Off ***** Walk Attleborough Nuneaton, CV11 4UZ

This is sent from a no-reply mailbox. To respond to this message, please contact the practice directly.

Comment Smoking monitoring invitation (procedure)

25-Jun-2026 Dr *** Ogochukwu ***** The Chaucer SurgeryGP Surgery**

History History Enhanced Access.
History History Telephone consultation.
History History Discussed recent routine blood tests as routine.
History History Triglycerides elevated on Statins.
History History Lives alone, uncertain about diet quality, eats breakfast and a lot of fruit.
History History Haemoglobin less than normal, denies any bleeding from any orifices.
History History Denies visible blood in stool or urine.
History History Previous Medical History: Previous issues with weight loss and muscle problems.
History History Medications: Statin.
History History Results: Blood sugar normal. Vitamin B12 normal. Folate normal. Iron studies normal. Vitamin D 103, stated normal range more than 49. Thyroid function normal. Total cholesterol 4.8, stated target less than 5. Triglycerides 3.1, stated target less than 1.7. Kidney function largely normal, interpreted as dehydrated. Liver function normal. Calcium normal. Haemoglobin decreased from 150 to 125, reference range 130 to 170.

Comment Comment Raised triglycerides.
Comment Comment Mild anaemia.
Comment Comment Possible dehydration from renal function.
Comment Comment Plan: - Dietary advice to reduce fats and oily foods. - Encourage hydration. - FIT test ordered for occult blood in stool. - Reassured that most results are normal.

23-Jun-2026 Mr Abtrace REMOTEBOT (ABTRB) Awaiting clinical code migration to EMIS Web

Comment Comment note SMS sent to ***** via Abtrace tool. Message: Dear Rafael Viola, We note that we do not have your smoking status recorded on our records. Could you please complete the details in order to update your records. abtr.co/mYmUo Chaucer Surgery

Comment General health questionnaire (assessment scale)

Comment Smoking monitoring invitation (procedure)

Comment Comment note Staff note via Abtrace tool: Smoking Status Request

19-Jun-2026 *** ***** ***** Awaiting clinical code migration to EMIS Web**

Comment Comment Online questionnaire not completed by patient

Comment Comment Link expired on: 19/06/2026 at 10:23

19-Jun-2026 *** Awaiting clinical code migration to EMIS Web**

Comment ***** *****

Comment SMS text message sent to patient Dear Mr Viola, A telephone appointment has been made for you on June 25th with Dr Ogochukwu to discuss your test results This call will take place in the evening Please ensure you have your phone to hand to take this call or let us know if you will not be available Thanks The Chaucer Surgery Sent on 19/06/2026 at 11:50

17-Jun-2026 Dr *** Smith ***** Awaiting clinical code migration to EMIS Web**

16-Jun-2026 Lab Results Haemoglobin A1c level NO CLINICAL DETAILS
Haemoglobin A1c level Note, new method from 01/10/25) DIAGNOSIS OF DIABETES MELLITUS: HbA1c of 48 mmol/mol and above is diagnostic of DM (WHO 2011) 42-47 mmol/mol indicates high risk of DM (NICE Guidance PH38 2012)) MONITORING OF DIABETES MELLITUS (Adults): Type 2 target values: 48 mmol/mol - 57 mmol/mol (NICE Guideline NG28) Type 1 target values: 48 mmol/mol or lower (NICE Guideline NG17)(*****) - Normal, no action:
HbA1c level - IFCC standardised 38 mmol/mol (Range: <42)

16-Jun-2026 *** Kayley ***** The Chaucer SurgeryGP Surgery**

Additional Additional note OneLauncher NonPrescriber used

Additional Consent given for blood test

Procedure Blood sample taken R hand

16-Jun-2026 Dr ***** Smith ***** Awaiting clinical code migration to EMIS Web

Lab Results	Full blood count - FBC NO CLINICAL DETAILS	
	Full blood count - FBCMOT (heart failure) *: * *: *(*****) - Abnormal - Contact Patient:	
Total white cell count, 10.50 10 ⁹ /L	10.5 10 ⁹ /L	(Range: 4 - 11)
Red blood cell (RBC) count	4.07 10¹²/L	(Range: 4.5 - 5.3)
Haemoglobin estimation	125 g/L	(Range: 130 - 170)
Haematocrit, 0.380 L/L	0.38 L/L	(Range: 0.4 - 0.5)
Mean corpuscular volume (MCV)	93.4 fL	(Range: 82 - 105)
Mean corpusc. haemoglobin(MCH)	30.7 pg	(Range: 27 - 32)
Mean corpusc. Hb. conc. (MCHC)	329 g/L	(Range: 315 - 345)
Platelet count	328 10 ⁹ /L	(Range: 140 - 400)
Neutrophil count	6.86 10 ⁹ /L	(Range: 2 - 7)
Lymphocyte count	2.47 10 ⁹ /L	(Range: 1 - 3)
Monocyte count	0.63 10 ⁹ /L	(Range: 0.2 - 1)
Eosinophil count	0.24 10 ⁹ /L	(Range: 0.02 - 0.5)
Basophil count	0.08 10 ⁹ /L	(Range: 0.01 - 0.1)
COMMENTS ""		(No range available)
HYPOCHROMASIA, 10.00 %	10 %	(No range available)

16-Jun-2026 Dr ***** Smith ***** Awaiting clinical code migration to EMIS Web

Lab Results	Liver function test NO CLINICAL DETAILS	
	Liver function test***** - Normal, no action:	
Serum total protein	76 g/L	(Range: 60 - 80)
Serum albumin	48 g/L	(Range: 35 - 50)
Serum total bilirubin level	6 umol/L	(Range: <21)
Total alkaline phosphatase	91 u/L	(Range: 30 - 130)
Serum ALT level	12 u/L	(Range: 10 - 49)
	Bone profile***** - Normal, no action:	
Serum calcium	2.37 mmol/L	(Range: 2.17 - 2.56)
Serum adjusted calcium conc	2.21 mmol/L	(Range: 2.17 - 2.56)
Serum albumin	48 g/L	(Range: 35 - 50)
Total alkaline phosphatase	91 u/L	(Range: 30 - 130)
	Urea and electrolytes***** - Satisfactory - No Action:	
Serum sodium	137 mmol/L	(Range: 133 - 146)
Serum potassium	4.3 mmol/L	(Range: 3.5 - 5.3)
Serum urea level	8.1 mmol/L	(Range: 2.5 - 7.8)
Serum creatinine	57 umol/L	(Range: 59 - 104)
eGFRcreat (CKD-EPI)/1.73 m ² eGFR results reported	90 mL/min/1.73m ²	(No range available)
using CKD-EPI formula from 06/01/26. eGFR G 1		
Normal to increased GFR eGFR is not recommended for use in individuals with unstable creatinine concentrations (including pregnancy, hospitalised patients, serious comorbidity conditions, AKI), and for persons with extremes of muscle mass and diet (including amputees, bodybuilders, muscle wasting disease, malnutrition). An eGFR of >60mL/min/1.73m ² is considered normal in most patients if they do not have other signs of renal damage such as proteinuria. If concerned about kidney function then check urine albumin:creatinine ratio and consider requesting ultrasound of kidneys.		

16-Jun-2026 Dr ***** Smith ***** Awaiting clinical code migration to EMIS Web

Lab Results	LIPIDS NO CLINICAL DETAILS	
	LIPIDS Comment:) HDL values <1.0 mmol/L are associated with an increased risk) of coronary heart disease. This is also the case if the total) cholesterol to HDL ratio is >5.0.)(*****) - Satisfactory - No Action:	
Serum total cholesterol level	4.8 mmol/L	(No range available)
Serum HDL cholesterol level, 1.0 mmol/L	1 mmol/L	(Range: >1)
Serum triglycerides	3.1 mmol/L	(Range: <1.7)
Serum cholesterol/HDL ratio	4.8	(No range available)
Calculated LDL cholesterol lev	2.4 mmol/L	(No range available)
Se non HDL cholesterol level	3.8 mmol/L	(No range available)

16-Jun-2026 ***** Awaiting clinical code migration to EMIS Web

Lab Results	Serum TSH level NO CLINICAL DETAILS
	Serum TSH level(*****) - Normal, no action:

16-Jun-2026 ***** Awaiting clinical code migration to EMIS Web

Lab Results	Serum total 25-OH vit D level NO CLINICAL DETAILS	
	Serum total 25-OH vit D level(*****) - Normal, no action:	
Serum total 25-OH vit D level	103 nmol/L	(Range: >49)

16-Jun-2026 ***** Awaiting clinical code migration to EMIS Web

Lab Results	TRANSFERRIN NO CLINICAL DETAILS	
	TRANSFERRIN(*****) - Normal, no action:	
Serum transferrin	3.1 g/L	(Range: 2.2 - 3.7)
Serum iron level	14 umol/L	(Range: 12 - 31)
Transferrin saturation index	18 %	(No range available)
	B12/folate level(*****) - Normal, no action:	
Serum vitamin B12	273 ng/L	(Range: 211 - 911)
Serum folate, 24.0 ug/L	24 ug/L	(Range: >5.4)

12-Jun-2026 *** Awaiting clinical code migration to EMIS Web**

Comment Comment Email sent to: violarafael1@gmail.com
 Comment E-mail sent to patient Please DO NOT reply to this email address as it will NOT be delivered to your healthcare provider. Dear Mr Viola, We are currently updating our records to ensure all our patients receive the most accurate preventive care. Do you have a *****, **** or **** who has been diagnosed with prostate cancer? Please let us know by choosing the option from questionnaire so we can arrange appropriate follow-up for you. Thanks, Dr Ade Please complete this questionnaire: <https://accrux.nhs.uk/c/p-derecy7yq7> The Chaucer Surgery Email sent on 12/06/2026 10:02:27

11-Jun-2026 Mr Abtrace REMOTEBOT (ABTRB) Awaiting clinical code migration to EMIS Web

Comment Comment note E-Mail sent to violarafael1@gmail.com via Abtrace tool. Subject: Smoking Status; Content: Dear Rafael Viola, We note that we do not have your smoking status recorded on our records. Could you please complete the details in order to update your records. Click here to access the questionnaire: <https://abtr.co/m76in> Chaucer Surgery Off ***** Walk Attleborough Nuneaton, CV11 4UZ

 This is sent from a no-reply mailbox. To respond to this message, please contact the practice directly.
 Comment Smoking monitoring invitation (procedure)

02-Jun-2026 Mr Abtrace REMOTEBOT (ABTRB) Awaiting clinical code migration to EMIS Web

Comment Comment note SMS sent to ***** via Abtrace tool. Message: Dear Rafael Viola, We note that we do not have your smoking status recorded on our records. Could you please complete the details in order to update your records. abtr.co/m7Qd3 Chaucer Surgery
 Comment General health questionnaire (assessment scale)
 Comment Smoking monitoring invitation (procedure)
 Comment Comment note Staff note via Abtrace tool: Smoking Status Request

27-May-2026 Mr Abtrace REMOTEBOT (ABTRB) Awaiting clinical code migration to EMIS Web

Comment Comment note E-Mail sent to violarafael1@gmail.com via Abtrace tool. Subject: Smoking Status; Content: Dear Rafael Viola, We note that we do not have your smoking status recorded on our records. Could you please complete the details in order to update your records. Click here to access the questionnaire: <https://abtr.co/m7E-Z> Chaucer Surgery Off ***** Walk Attleborough Nuneaton, CV11 4UZ

 This is sent from a no-reply mailbox. To respond to this message, please contact the practice directly.
 Comment Smoking monitoring invitation (procedure)

12-May-2026 Mr Abtrace REMOTEBOT (ABTRB) Awaiting clinical code migration to EMIS Web

Comment Comment note SMS sent to ***** via Abtrace tool. Message: Dear Rafael Viola, We note that we do not have your smoking status recorded on our records. Could you please complete the details in order to update your records. abtr.co/m7txD Chaucer Surgery
 Comment General health questionnaire (assessment scale)
 Comment Smoking monitoring invitation (procedure)
 Comment Comment note Staff note via Abtrace tool: Smoking Status Request

12-May-2026 Mr Abtrace REMOTEBOT (ABTRB) Awaiting clinical code migration to EMIS Web

Comment Comment note E-Mail sent to violarafael1@gmail.com via Abtrace tool. Subject: Smoking Status; Content: Dear Rafael Viola, We note that we do not have your smoking status recorded on our records. Could you please complete the details in order to update your records. Click here to access the questionnaire: <https://abtr.co/m7tIM> Chaucer Surgery Off School Walk Attleborough Nuneaton, CV11 4UZ

 This is sent from a no-reply mailbox. To respond to this message, please contact the practice directly.
 Comment Smoking monitoring invitation (procedure)

07-May-2026 Dr *** Smith ***** The Chaucer Surgery Awaiting clinical code migration to EMIS Web**

Document Referral to community dietician
 V1 PCN Dietitian referral form

07-May-2026 Dr ***** Smith ***** The Chaucer SurgeryGP Surgery

Additional note PCIT Referral Tree used
 Test Request Unknown specimen
 Problem Medication review with patient
 History here with *****
 History Several issues:
 History weight loss, muscle wasting: prescribed fortisips but refuses them. wants alternative. does not walk- self transfers. diet poor- no motivation or appetite- chronic. Unable to weigh. Poor diet intake of calcium and known osteoporosis. refused adcal
 History low BP: sometimes light headed on transfers and when gets out of bed: home BP 98/55, 101/70, 118/69 here (pulse 57). Has no oedema, so will stop thiazide. ***** checks BP
 History Poor sleep: ***** requests melatonin: aware short time of use. patient doesn't want Z drugs.
 History Known HepC and HIV. On HAART and CD4 is good, VL undetectable. Goes 6 monthly
 Comment 1. Happy to have Hux D3 once weekly for 10 weeks
 Comment 2. Bloods
 Comment 3. dietician ref (if can weigh safely at home, they will)
 Comment 4. stop thiazide
 Comment 5. Melatonin- not for more than 3 x 30 day repeats

07-May-2026 ***** Awaiting clinical code migration to EMIS Web

Comment Email sent to outside agency (finding) cwcb.dietitian@nhs.net
 Comment Dear Colleague, RE: Rafael Viola, 21-Jul-1959, 400 147 5723, Male Please find attached a referral for the above patient for your attention. Thanks, ***** The Chaucer Surgery Attachments: Referral to community dietician VIOLA, Rafael (Mr) 1205 07-May-2026.rtf

27-Apr-2026 Mr Rapid Health (RapidHealth) Awaiting clinical code migration to EMIS Web

Email sent Indirect encounter NOS Email sent to Kayleghviola24@gmail.com.
 Subject Subject Your Chaucer Surgery request has been received
 Message message
 Rapid reference TA/58956
 reference

27-Apr-2026 Mr Rapid Health (RapidHealth) Awaiting clinical code migration to EMIS Web

Email sent Indirect encounter NOS Email sent to violarafael1@gmail.com.
 Subject Subject Your Chaucer Surgery request has been received
 Message message
 Rapid reference TA/58956
 reference

27-Apr-2026 Mr Rapid Health (RapidHealth) Awaiting clinical code migration to EMIS Web

Rapid type Description Rapid type Medical Request - practice review
 Description Notes from the patient of a medical request for practice review
 Action type Practice saved
 Information source Direct from patient via Rapid Health
 Patient concern Patient concern General health check
 Patient free-text Patient free-text Please book Rafael for a general review. His mobility has declined with pain on standing, vascular issues seem worse, and he has ongoing chest/heart concerns. Could he have a check-up, blood test, and leg circulation check? He may have lost weight; nutrition advice would help.
 Help requested Help requested Referral for test or investigation
 Pathway used Pathway used General
 Practice note Practice note accurx sent with appt
 Observations Observations • Common symptoms: Fatigue, Weight loss, Feeling generally unwell • Symptom onset: Over a month • High risk symptoms: Drowsiness • Cancer, Diabetes and Depression ***** flags: Heart palpitations, New pain for over 2 weeks (back pain, abdominal pain, headache etc), Sleeping difficulties • Immunosuppressive patients: Weak immune system (caused by genetic disorder) • Mood: Low • Concentration: Reduced and affecting my work/life • Sleeping outside normal sleeping time: A lot • Appetite: Reduced • Bowel motions: Very soft or watery - I have diarrhea • Urination difficulties: Yes • Difficult or uncomfortable to swallow water or food: Yes • Patient temperature: Doesn't know • OTC drugs (eg paracetamol/ibuprofen) relieve symptoms: They help fully • High-risk comorbidities: Bedbound (you are confined to bed), Chronic illness of the lungs (asthma, COPD, cystic fibrosis), Heart problems (heart failure, cardiomyopathy, valvular defects)
 Other answers Other answers • Concern today: None of the above • Stroke symptoms: None • Sleeping well: No • Nausea or vomiting: No • Changed bowel habits: None of the above • Lumps on body: No • Skin changes: None
 Saved by Tessa *****
 Rapid reference TA/58956

27-Apr-2026 ***** Awaiting clinical code migration to EMIS Web

Comment *****
 Comment SMS text message sent to patient Dear ***** of Mr Viola, We have arranged a face to face consultation with the GP on 7th May at 11:45 to discuss his welfare. Regards Triage Team The Chaucer Surgery Sent on 27/04/2026 at 17:15

16-Apr-2026 Mr ***** Azam ***** The Chaucer SurgeryGP Surgery

Problem Ramipril - UEs Monitoring
 Comment - UEs due every 12 months. - Last done - Aug 2025. - Bloods up-to-date - Results copied from T-Quest to up-date records.

16-Apr-2026 Dr ***** Smith ***** Awaiting clinical code migration to EMIS Web

04-Aug-2025 Lab Results Urea and electrolytes NO CLINICAL DETAILS
Urea and electrolytes***** Copy To Me Externally Entered ***** (*****) - Copied from tQuest:
 Serum sodium 139 mmol/L (Range: 133 - 146)
 Serum potassium 4.1 mmol/L (Range: 3.5 - 5.3)
 Serum urea level **8.5 mmol/L** (Range: 2.5 - 7.8)
 Serum creatinine 66 umol/L (Range: 59 - 104)

16-Apr-2026 Dr ***** Smith ***** Awaiting clinical code migration to EMIS Web

04-Aug-2025 Lab Results Urea and electrolytes NO CLINICAL DETAILS
Urea and electrolytes***** Copy To Me Externally Entered ***** (*****) - Copied from tQuest:
 Serum sodium 139 mmol/L (Range: 133 - 146)
 Serum potassium 4.1 mmol/L (Range: 3.5 - 5.3)
 Serum urea level **8.5 mmol/L** (Range: 2.5 - 7.8)
 Serum creatinine 66 umol/L (Range: 59 - 104)

09-Apr-2026 *** Awaiting clinical code migration to EMIS Web**

Comment Informing patient (procedure)
 Comment ~~Comment~~ Dear Mr Viola, When ordering your repeat prescription, please check what medicines you already have at home and only order what you need. Don't worry, you will still be able to order others in future. For more info, visit www.happyhealthylives.uk/yourmeds. Regards The Chaucer Surgery NHS app message sent on 09/04/2026 14:39:18

02-Apr-2026 *** Awaiting clinical code migration to EMIS Web**

Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, Please click the link attached to complete the online form. <https://chaucersurgery-consult.uk.rapidhealth.co.uk> Reception The Chaucer Surgery Sent on 02/04/2026 at 08:44

02-Apr-2026 Mr Rapid Health (RapidHealth) Awaiting clinical code migration to EMIS Web

Email sent Indirect encounter NOS Email sent to Violarafael1@gmail.com.
 Subject ~~Subject~~ Your Chaucer Surgery request has been received
 Message message
 Rapid reference TA/48180

02-Apr-2026 Mr Rapid Health (RapidHealth) Awaiting clinical code migration to EMIS Web

Rapid type Rapid type Medical Request - practice review
 Description ~~Description~~ Notes from the patient of a medical request for practice review
 Action type ~~Action type~~ Practice saved
 Information source Information source Direct from patient via Rapid Health
 Patient concern Patient concern Sob and dry cough
 Patient free-text Patient free-text Currently have had a productive cough for nearly 4 weeks, quite breathless and pain when coughing. Struggling to bring up phlegm, need abx and steroids please
 Help requested Help requested Medical appointment
 Pathway used Pathway used Cardiopulmonary
 Observations ~~Observations~~ • Shortness of breath: Working hard to breathe, Feels short of breath • General symptoms: Cough • Duration of symptoms: Over 2 weeks • Symptoms onset: Gradual (or not sure) • Recent DVT risk factors: Bed rest for 3 days or more • Recently travelled abroad: Yes • Progression of shortness of breath in the last 6 hours: Stayed the same • Increased usage of inhaler/inhaler not working as well: I do not have an inhaler • Dyspnoea level: Have stopped doing most, or all, of their usual daily activities • SOB impact on sleep: Waking with SOB • Painful to take a deep breath: Yes • SOB relieved by rest or GTN: Rest • Triggers: Exercise or physical activity, Lying down flat, No known trigger • Patient temperature: Doesn't know • Phlegm: Yellow or white • Additional associated symptoms: Hoarseness or a change in voice, Runny nose or nasal congestion, Wheeze • Smokes cigarettes or cannabis: Yes • Cardiopulmonary past medical history and risk factors: Heart failure, History of heart disease • Other relevant cardiopulmonary history: Acid reflux, Anxiety, COPD, Stomach ulcer (peptic ulcer)
 Other answers ~~Other answers~~ • Recent back or chest injury: No • Breathing impact factors: None • Feels feverish: No • Swelling of feet, ankles, calves / lower legs: No • Coughing blood (haemoptysis): No • High risk symptoms: None • Active or exercises regularly: No • Immunosuppressive patients: None
 Saved by Saved by *****
 Rapid reference TA/48180

02-Apr-2026 *** Awaiting clinical code migration to EMIS Web**

Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, Thank you for your recent online consultation. Unfortunately, we are at full capacity today and are unable to offer any further appointments. We are very sorry for the inconvenience this may cause. As your symptoms may require assessment and treatment, we would strongly advise attending the Urgent Care Centre today so you can be seen as soon as possible. Thank you for your understanding, and please accept our sincere apologies. Triage Team The Chaucer Surgery Sent on 02/04/2026 at 14:55

24-Mar-2026 *** The Chaucer SurgeryGP Surgery**

Test Request Unknown specimen
 Comment Comment Medication monitoring

24-Mar-2026 *** Awaiting clinical code migration to EMIS Web**

Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, You are due a blood test for medication monitoring. Can you please contact the reception. Reception The Chaucer Surgery Sent on 24/03/2026 at 16:16

12-Mar-2026 *** Awaiting clinical code migration to EMIS Web**

Comment Advice given about bowel cancer screening programme (situation)
 Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, We've been informed that you have not yet completed your bowel screening test. Please arrange your bowel cancer screening by calling the free helpline on 08007076060. For more information visit: www.nhs.uk/conditions/bowel-cancer-screening Reception The Chaucer Surgery Sent on 12/03/2026 at 18:25

10-Mar-2026 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
 DNA Letter Hospital St ***** Bowel Cancer Screening
 Additional Bowel cancer screening programme

10-Mar-2026 *** The Chaucer SurgeryGP Surgery**

Comment Comment Pt requesting wheelchair referral- sms sent to pt for further information required before able to refer. If wants for outdoor use only, unable to refer and pt to be signposted to private service.

10-Mar-2026 *** Awaiting clinical code migration to EMIS Web**

Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, I have received your referral request for a wheelchair. Before I can refer you I need some further information: - do you require a wheelchair to use indoor and/or outdoor - reason you require a wheelchair - how do you mobilise currently in and out of the home and to appointments or other daily activities - are you able to sit without support You can reply to me on the link below or call the Surgery and let us know. Without this information we cannot progress your request, TO RESPOND, please follow this link: <https://accurx.nhs.uk/c/p-qetnaczfhe> Thanks, *****
 The Chaucer Surgery Sent on 10/03/2026 at 14:14

06-Mar-2026 *** Misba Azam (Azam) The Chaucer SurgeryGP Surgery**

Comment Failed encounter : called to discuss med review and prasugrel duration but no answer 11.45, 12.31. No option to leave voicemail
 Comment Comment Prasugrel removed off repeat today as treatment was for 12/12 so should have been stopped April 2025 (see cardio letter 20.06.24). Also not mentioned in most recent cardiology letter
 Comment Telephone encounter with pt's ***** Informed her that prasugrel should have been stopped after 12/12 and to ask pt to stop now. Advised if any stock at home then return to community pharmacy. Advised removed off repeat

27-Feb-2026 *** Awaiting clinical code migration to EMIS Web**

Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, A telephone appointment has been made for you on March 6th with clinical pharmacist Misba to review your medications This call will take place in the morning Please ensure you have your phone to hand to take this call or let us know if you will not be available TO RESPOND, please follow this link: <https://accurx.nhs.uk/c/p-yn6e52uyba> Thanks The Chaucer Surgery Sent on 27/02/2026 at 18:04

23-Feb-2026 *** Awaiting clinical code migration to EMIS Web**

Comment Pneumococcal vaccination invitation short message service text message sent (situation)
 Comment Dear Mr Viola, You are due for a pneumococcal vaccination. Please contact us to book an appointment. Find more information about the vaccine here: nhs.uk/conditions/vaccinations/pneumococcal-vaccination Regards The Chaucer Surgery NHS app message sent on 23/02/2026 08:07:16

23-Feb-2026 *** Awaiting clinical code migration to EMIS Web**

Comment Herpes zoster vaccination invitation short message service text message (procedure)
 Comment Dear Mr Viola, You are due a free shingles vaccine. Please contact us to book an appointment. Find out more about the vaccine here: www.nhs.uk/conditions/vaccinations/shingles-vaccination Regards The Chaucer Surgery NHS app message sent on 23/02/2026 08:07:27

17-Feb-2026 *** Awaiting clinical code migration to EMIS Web**

Comment Smoking monitoring invitation (procedure)
 Comment Dear Mr Viola, To help us keep your medical record up to date, please complete some questions about your health habits. Regards Please complete this questionnaire: <https://accurx.nhs.uk/c/p-dpnjq2vwzm> The Chaucer Surgery NHS app message sent on 17/02/2026 14:28:04

16-Feb-2026 *** Awaiting clinical code migration to EMIS Web**

Comment COPD monitoring invitation (procedure)
 Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, You are due your annual breathing condition (COPD) review. Please book a routine appointment, and remember to bring all your COPD medication to the appointment. Reception The Chaucer Surgery Sent on 16/02/2026 at 10:44

03-Feb-2026 *** Awaiting clinical code migration to EMIS Web**

Comment Drugs of addiction education (procedure)
 Comment Dear Mr Viola, As part of our ongoing commitment to safe prescribing, we are inviting you to book a review with our pharmacist. This review focuses on certain medications. Reception To book: <https://accurx.nhs.uk/c/p-jwgme2zdxy> (Expires in 7 days) The Chaucer Surgery NHS app message sent on 03/02/2026 09:11:37

06-Jan-2026 *** Awaiting clinical code migration to EMIS Web**

Comment Comment note (record artifact) SMS sent to ***** via Abtrace tool. Message: Dear Rafael Viola, Our records show that you have still not had your annual flu vaccination. Please contact the surgery to book an appointment or if you wish to decline let us know. Chaucer Surgery

02-Dec-2025 *** Awaiting clinical code migration to EMIS Web**

Comment Comment Dear Mr Viola, We are going live with Rapid Health as of 7:30am tomorrow (Wednesday 3rd December). Please go onto our website to complete a form or use this link: <https://chaucersurgery-consult.uk.rapidhealth.co.uk> when you require an appointment - this cannot be done before 7:30am. Regards, The Chaucer Surgery NHS app message sent on 02/12/2025 18:01:52

01-Dec-2025 *** Awaiting clinical code migration to EMIS Web**

Comment Comment Dear Mr Viola, Following your feedback - from Wednesday 3rd December we are changing to a new online appointment system - Rapid Health. Submit your request on our website and we'll get back to you by the end of the next working day. More info: <https://vimeo.com/948772217f3e9d87d1b?share=copy>
Regards, The Chaucer Surgery NHS app message sent on 01/12/2025 16:03:37

25-Nov-2025 *** Awaiting clinical code migration to EMIS Web**

Comment *****
Comment SMS text message sent to patient Dear Mr Viola, Thank You for your E-Consult. An appointment has been made for Monday 8th December at 5pm. If your symptoms worsen please submit a new E-Consult or contact 111 for advice. Triage Team The Chaucer Surgery Sent on 25/11/2025 at 13:50

25-Nov-2025 *** Awaiting clinical code migration to EMIS Web**

Comment Comment eConsult lite eConsult online consultation for Rafael Viola, DOB 21-07-1959 submitted on 25/11/2025, 08:10 eConsult reference ID: bcefd6de-6d39-4c2d-9761-347be3961c63, Triage Outcome: GP, 2 weeks, Face-to-face
Comment Comment Ideas, concerns & expectations Q1: Would you like help from a particular clinician? A1: Yes Q2: Which clinician is preferred? A2: A GP
Comment eConsultation via Online application
Document Attachment
Viola_21_07_1959_bcefd6de.pdf

07-Oct-2025 *** The Chaucer SurgeryGP Surgery**

Comment Comment Telephone consultation lead by Mashal Trainee pharmacist
Comment Comment Discuss meds following recent discharge from cardiology at GEH
Comment Comment No change in medication
Comment Comment to continue with the current medication
Comment Comment discussed with patient if experience any problems to contact

29-Sept-2025 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
Clinic Letter ***** Eliot Hospital Cardiology Department If you have received this document in error or this is no longer your patient, please contact GEH NHS Trust 'Docman Patient Letter', the patient's NHS Number and the Event Date on the letter.
Additional Letter encounter

19-Sept-2025 *** Awaiting clinical code migration to EMIS Web**

Comment Influenza vaccination invitation first short message service text message sent (situation)
Comment Comment Dear Mr Viola, A free flu vaccine is available for you at the practice. If you don't want one, or have already received it elsewhere please let us know. Regards To respond: <https://accuix.nhs.uk/c/p-ew5arg44b8> (Expires in 7 days) The Chaucer Surgery NHS app message sent on 19/09/2025 08:03:11

27-Aug-2025 *** The Chaucer SurgeryAdministration note**

Comment Failed encounter 16:02 and 17:02 - tried calling for meds review, going to VM

04-Aug-2025 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
case summary West Midlands Ambulance Service Ambulance Service
Additional Seen by ambulance crew

04-Aug-2025 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
ED Discharge Summary ***** Eliot Hospital General Correspondence
Additional Seen in cardiology clinic

04-Aug-2025 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
Unscheduled Care ***** Eliot Hospital Accident & Emergency
Additional Seen in hospital casualty

04-Aug-2025 Dr *** Hassan ***** The Chaucer Surgery**Awaiting clinical code migration to EMIS Web

Referral Document Referral to cardiology service . *Referral Type: Outpatient*
 e-RS Letter (04-Aug-2025)
NHS e-Referral UBRN 000459614986 for Referral to cardiology service

Document Referral Letter (04-Aug-2025)
NHS e-Referral UBRN 000459614986 for Referral to cardiology service

04-Aug-2025 *** The Chaucer Surgery**Administration note

Problem Coronary arteriosclerosis (ED Discharge summary 4.8.25)

History Medication reconciliation done by clinical pharmacist

History History 2 week history of intermittent chest pain, squeezing pain, non-radiating

History History pt been pain free in ED

History History Plan was discussed with consultant cardiologist

History History - Bisoprolol to increase to 5mg OD

History History - pt to start on ranolazine 375mg BD

History History GP to review - if symptoms persist then ranolazine can be increased to 500mg BD in 4 weeks time

Medication Medication (NOT ISSUED) Ranolazine 375mg modified-release tablets One To Be Taken Twice A Day, 56 tablet

01-Aug-2025 *** The Chaucer Surgery**GP Surgery

Document eConsultation via online application
eConsultation via online application (01-Aug-2025)

01-Aug-2025 Dr *** Hassan ***** The Chaucer Surgery**Telephone consultation

Problem Left ventricular systolic dysfunction

History History - Requesting new referral to cardiology following previous cardiac care - Myocardial infarction 16 months ago with subsequent triple bypass surgery in June 2024 - Currently experiencing chest pain described as pain across the top of the chest associated with feeling shaky - Symptoms are similar to those experienced prior to the previous myocardial infarction - was residing in Spain

History History - Expressing concern about current cardiac medication effectiveness, wants full heart "MOT"

Comment Comment - Cardiology referral to be arranged for ongoing cardiac symptoms and medication review

03-July-2025 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
Clinic Letter - UH University Hospitals Coventry and Warwickshire NHS Trust Trauma & Orthopaedics
If you have received this document in error or this is no longer your patient, please contact UHCW NHS Trust on 024 7696 8000, quoting 'Docman Patient Letter', the patient's NHS Number and the Event Date on the letter.

Additional DNA hospital appointment

15-Apr-2025 *** Awaiting clinical code migration to EMIS Web**

History Medical report requested Subject Access Request requested by third party (AviSons Solicitors, Ref: 2501681KS)

24-Feb-2025 Dr *** Arikawe ***** The Chaucer Surgery**GP Surgery

History Telephone encounter ID confirmed

History History Reports being under specialist care Missed recent appointment with consultant, specialist to schedule f/up in 6 months Concerned about current medications, thinks its too much multiple heart-related medications Denies any worsening symptoms. As still open to cardiology, advised to contact specialist with any concern

21-Feb-2025 Dr *** Hassan ***** The Chaucer Surgery Telephone consultation**

Problem Medication review with patient
 History Patient identity verified
 History History noted last consult with clinical pharmacist
 History History - Long-term diazepam use since 2017, currently taking 2mg three times daily - Reports being stable on current dose with no side effects - Acknowledges medication dependence - New dry cough and chest tightness - COPD symptoms: persistent cough and chest tightness Past Medical History: - Myocardial infarction in June 2024 with triple bypass - PTSD - Anxiety - Insomnia - COPD - Uses wheelchair - History of alcohol and substance use, 13 years abstinent - Currently engaging in counselling
 Comment Comment agreed phone appt next week to discuss heart issues, states he can't come in f2f and wants referral to cardiology
 Comment Comment Impression: - Stable on current diazepam regime - Acute COPD exacerbation Management Plan: - Prescribed 5-day course of antibiotics for COPD exacerbation, pt declined step up inhalers or review with copd nurse - Follow-up telephone appointment to be arranged to discuss cardiac issues - Long-term plan: Consider gradual dose reduction of diazepam when appropriate and patient willing - Provided CGL (Change Grow Live) service information for further support

21-Feb-2025 Dr *** Hassan ***** Awaiting clinical code migration to EMIS Web**

Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, <https://www.changegrowlive.org/about-us#:~:text=What%20Change%20Grow%20Live%20is,your%20mental%20and%20physical%20wellbeing.>
 Thanks, ***** Hassan The Chaucer Surgery

21-Feb-2025 Dr *** Hassan ***** Awaiting clinical code migration to EMIS Web**

Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, <https://www.changegrowlive.org/about-us#:~:text=What%20Change%20Grow%20Live%20is,your%20mental%20and%20physical%20wellbeing.>
 Thanks, ***** The Chaucer Surgery

17-Feb-2025 *** Awaiting clinical code migration to EMIS Web**

Comment *****
 Comment SMS text message sent to patient Dear Viola Reminder for telephone appointment booked 21.2.25. Reception The Chaucer Surgery Scheduled to send on 20/02/2025 08:00:00

10-Feb-2025 *** Awaiting clinical code migration to EMIS Web**

Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, We have been informed that you did not attend a recent hospital appointment. Please contact the surgery to discuss the need for re-referral for another appointment if needed. reception The Chaucer Surgery

07-Feb-2025 *** Awaiting clinical code migration to EMIS Web**

Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, A telephone appointment has been booked on Friday 21st February with Dr ***** to discuss your medication. Regards, The Chaucer Surgery

05-Feb-2025 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
 DNA Clinical Letter ***** Eliot Hospital General Medicine
 Additional Letter encounter

05-Feb-2025 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
 DNA Letter ***** Eliot Hospital Cardiology
 Additional DNA hospital appointment

03-Feb-2025 Mr ***** Azam ***** The Chaucer SurgeryGP Surgery

Problem Depression , Anxiety and Insomnia
 Comment Diazepam Review - Reports long-term diazepam use since 2017: currently taking 2mg TDS - No missed doses. - Reports dependence on medication, declines dose reduction. - Previous history of alcohol and *****: 13 years abstinent. - PMHx: triple bypass, heart attack, stroke, PTSD - Reports headaches, muscle spasms, anxiety, insomnia. - Uses wheelchair. - Previous *****. - Currently stable on diazepam regime. - Reports no side effects from current dose. Assessment & Plan: 1. Diazepam dependence - Counselling regarding risks of dependence and addiction. - Counselling regarding withdrawal symptoms. - Advised regarding red flags: drowsiness, breathing difficulties, confusion. - Patient declines dose reduction at present. - Current prescription to continue: diazepam 2mg TDS. - Advised to avoid alcohol whilst on medication. - UGP to review diazepam dose - UGP tasked.

06-Jan-2025 Dr ***** Arikawe ***** The Chaucer SurgeryGP Surgery

Additional Additional note PCIT HP238 used
 Additional Atrial fibrillation screening
 History Face to face consultation seen with *****. ID confirmed.
 History Reports left sided chest pain: dull in nature, intermittent, worse when lying in bed Pain localised to chest area, non-radiating. Not related to physical activity
 PMHx: COPD with consistent cough
 History Denies any fever
 History No DiB.
 History eating and drinking fine,
 History Known to cardiology - has stent
 History Still heavy smoking and willing to try medication to help with this
 Examination Mobilized with wheelchair, Speaking in full sentences, not pale, not dehydrated.
 Examination T 36.1, PR 83, RR 16, Sat 98
 Examination Chest is clear, no crackles/wheeze.
 Examination HS 1 2
 Problem Musculoskeletal chest pain
 Comment Advised no concerning findings.
 Comment To use analgesia as required.
 Comment Trial of Varenicline. has had this before.
 Comment TCB if worsening features/DiB/lethargy, new concerns

03-Jan-2025 ***** ***** ***** ***** Awaiting clinical code migration to EMIS Web

Comment eConsult lite eConsult online consultation for Rafael Viola, DOB 21-07-1959 submitted on 03/01/2025, 08:31 eConsult reference ID: a0e2e275-b196-4e4a-9f23-977544aaec6e
 Comment Ideas, concerns & expectations Q1: Would you like help from a particular clinician? A1: No
 Comment eConsultation via Online application
 Document Attachment
 Viola_21_07_1959_a0e2e275.pdf

02-Jan-2025 ***** Awaiting clinical code migration to EMIS Web

Comment Influenza vaccination invitation first short message service text message sent (situation)
 Comment Dear Mr Viola, A flu vaccine is available for you at the practice. If you don't want one, or have already received it elsewhere please let us know. To respond: <https://accrux.nhs.uk/c/p-akj3bh2m9y> (Expires in 7 days)
 The Chaucer Surgery NHS app message sent on 02/01/2025 12:25:01

18-Dec-2024 ***** Awaiting clinical code migration to EMIS Web

Comment Administration note
 Comment Dear Mr Viola, With immediate effect our online appointment opening time has changed to 7.30am. This means you will be able to submit a online request from 7.30am until 4.30pm going forward. The Chaucer Surgery NHS app message sent on 18/12/2024 15:47:03

25-Oct-2024 ***** Awaiting clinical code migration to EMIS Web

Comment Influenza vaccination invitation second short message service text message sent (situation)
 Comment Dear Mr Viola, This is a reminder that a free flu vaccine is available for you at the practice. If you don't want one, or have already received it elsewhere please let us know. To respond: <https://accrux.nhs.uk/c/p-bpgt25c4c5> (Expires in 7 days)
 The Chaucer Surgery

14-Oct-2024 Mr ***** Azam ***** The Chaucer SurgeryGP Surgery

Problem Comment Problem Ramipril - UEs Monitoring
 Comment Bloods done in Hospital Last done Sept 2024
 Bloods up to date Results copied from T-Quest to up-date records.

14-Oct-2024 *** Awaiting clinical code migration to EMIS Web**

19-Sept-2024 Lab Results Liver function test NO CLINICAL DETAILS
Liver function test***** Copy To Me Externally Entered ***** - Copied from tQuest:
 Serum total protein 76 g/L (Range: 60 - 80)
 Serum albumin 44 g/L (Range: 35 - 50)
 Serum total bilirubin level 6 umol/L (Range: <21)
 Total alkaline phosphatase 102 u/L (Range: 30 - 130)
 Serum ALT level 21 u/L (Range: 10 - 49)

14-Oct-2024 *** Awaiting clinical code migration to EMIS Web**

19-Sept-2024 Lab Results ESTIMATED GFR NO CLINICAL DETAILS
ESTIMATED GFR***** Copy To Me Externally Entered ***** Normal kidney if no proteinuria, haematuria, or abnormal kidneys on US S. UK CKD guidelines are available at www.renal.org/CKDguide/ckd.html EGFR calculated using parameters for white male. (If black multiply result by 1.21; if female multiply result by 0.742)(*****) - Copied from tQuest:
 GFR calculated abbreviated MDRD 90 mL/min/1.73m2 (No range available)
 Serum creatinine 61 umol/L (Range: 59 - 104)
 EGFR DUMMY ITEM Y (No range available)

14-Oct-2024 *** Awaiting clinical code migration to EMIS Web**

19-Sept-2024 Lab Results Urea and electrolytes NO CLINICAL DETAILS
Urea and electrolytes***** Copy To Me Externally Entered ***** - Copied from tQuest:
 Serum sodium 138 mmol/L (Range: 133 - 146)
 Serum potassium, 4.0 mmol/L 4 mmol/L (Range: 3.5 - 5.3)
 Serum urea level **8.4 mmol/L** (Range: **2.5 - 7.8**)
 Serum creatinine 61 umol/L (Range: 59 - 104)

14-Oct-2024 *** Awaiting clinical code migration to EMIS Web**

19-Sept-2024 Lab Results CHOLESTEROL HDL NON-FAST NO CLINICAL DETAILS
CHOLESTEROL HDL NON-FAST***** Copy To Me Externally Entered ***** - Copied from tQuest:
 Serum total cholesterol level 3.7 mmol/L (No range available)
 Serum HDL cholesterol level **0.9 mmol/L** (Range: **>1**)
 Serum cholesterol/HDL ratio 4.1 (No range available)
 Serum non HDL (high density lipoprotein) cholesterol level 2.8 mmol/L (No range available)

14-Oct-2024 *** Awaiting clinical code migration to EMIS Web**

19-Sept-2024 Lab Results BNP NO CLINICAL DETAILS
BNP***** Copy To Me Externally Entered ***** HF community '! : NTpro-BNP 47-236 pmol/L - Uncertain diagnosis; ec hocardiogram and specialist assessment within 6 weeks. (NICE guideline NG106, 2018) (*****) - Copied from tQuest:
 NT-PROBNP 113 pmol/L (No range available)

14-Oct-2024 *** Awaiting clinical code migration to EMIS Web**

19-Sept-2024 Lab Results Full blood count - FBC NO CLINICAL DETAILS
Full blood count - FBC***** Copy To Me Externally Entered ***** - Copied from tQuest:
 Total white cell count **16.47 x10⁹/L** (Range: **4 - 11**)
 Red blood cell (RBC) count 4.66 x10¹²/L (Range: 4.5 - 5.3)
 Haemoglobin estimation 150 g/L (Range: 130 - 170)
 Haematocrit 0.471 L/L (Range: 0.4 - 0.5)
 Mean corpuscular volume (MCV) 101.2 fL (Range: 82 - 105)
 Mean corpusc. haemoglobin(MCH) **32.2 pg** (Range: **27 - 32**)
 Mean corpusc. Hb. conc. (MCHC) 318 g/L (Range: 315 - 345)
 Platelet count 298 x10⁹/L (Range: 140 - 400)
 Neutrophil count **12.38 x10⁹/L** (Range: **2 - 7**)
 Lymphocyte count 2.93 x10⁹/L (Range: 1 - 3)
 Monocyte count 0.58 x10⁹/L (Range: 0.2 - 1)
 Eosinophil count 0.23 x10⁹/L (Range: 0.02 - 0.5)
 Basophil count **0.13 x10⁹/L** (Range: **0.01 - 0.1**)
 COMMENTS / (No range available)
 HYPOCHROMASIA, 3.00 % 3 % (No range available)
 FLAGS / (No range available)

14-Oct-2024 *** Awaiting clinical code migration to EMIS Web**

22-May-2024 Lab Results Serum lipids NO CLINICAL DETAILS
Serum lipids***** Copy To Me Externally Entered ***** Comment:) HDL values <1.0 mmol/L are associated with an increased risk) of coronary heart disease. This is also the case if the total) cholesterol to HDL ratio is >5.0.)(***** - Copied from tQuest:

Serum total cholesterol level	5.2 mmol/L	(No range available)
Serum HDL cholesterol level	0.9 mmol/L	(Range: >1)
Serum triglycerides	2.6 mmol/L	(Range: <1.7)
Serum cholesterol/HDL ratio	5.8	(No range available)
Calculated LDL cholesterol lev	3.1 mmol/L	(No range available)
Serum non HDL (high density lipoprotein) cholesterol level	4.3 mmol/L	(No range available)

14-Oct-2024 *** Awaiting clinical code migration to EMIS Web**

22-May-2024 Lab Results AKI ALERT NO CLINICAL DETAILS
AKI ALERT***** Copy To Me Externally Entered ***** An Acute Kidney Injury Alert has been generated based on the serum] creatinine result for this sample. Subsequent action is the] responsibility of the requesting clinician.] If this is likely to represent AKI try to establish the underlying cause.] Consider the patient's clinical condition, fluid status, vital signs,] and current medication as well as the possibility of an intrinsic renal] or obstructive cause. Consider whether referral to or discussion with the medical or renal team is needed.] Please refer to NICE CG169 Acute Kidney injury,] www.nice.org/guidance/cg169)(***** - Copied from tQuest:

AKI WARNING FLAG	1	(No range available)
AKI ALERT AKI stage 1 warning.		(No range available)

14-Oct-2024 *** Awaiting clinical code migration to EMIS Web**

22-May-2024 Lab Results Haemoglobin A1c level NO CLINICAL DETAILS
Haemoglobin A1c level***** Copy To Me Externally Entered ***** DIAGNOSIS OF DIABETES MELLITUS: HbA1c of 48 mmol/mol and above is diagnostic of DM (WHO 2011) 42-47 mmol/mol indicates high risk of DM (NICE Guidance PH38 2012)) MONITORING OF DIABETES MELLITUS (Adults): Type 2 target values: 48 mmol/mol - 57 mmol/mol (NICE Guideline NG28) Type 1 target values: 48 mmol/mol or lower (NICE Guideline NG17)(***** - Copied from tQuest:

HbA1c level - IFCC standardised	38 mmol/mol	(No range available)
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20-Sept-2024 *** Awaiting clinical code migration to EMIS Web**

Comment Influenza vaccination invitation first short message service text message sent (situation)
 Comment Dear Mr Viola, A free Flu vaccine is available for you to book at the practice. If you don't want one, or have already received it elsewhere please let us know. To respond: <https://accrux.nhs.uk/c/p-49fr484rhy> (Expires in 7 days) The Chaucer Surgery NHS app message sent on 20/09/2024 14:55:03

14-Sept-2024 Dr *** Hassan ***** Awaiting clinical code migration to EMIS Web**

Comment Dear Mr Viola, We have contacted you previously, requesting blood tests be booked as part of mandatory medication monitoring. However, this has not been done yet. As this is a medication safety concern, we would have to consider taking your medications off repeat and reducing it to weekly scripts. To avoid this, kindly contact the reception to arrange for your blood test. The Chaucer Surgery NHS app message sent on 13/09/2024 13:21:02

22-Aug-2024 *** Awaiting clinical code migration to EMIS Web**

Comment Smoking monitoring invitation
 Comment Dear Mr Viola, To help us keep your medical record up to date, please complete some questions about your health habits. Please complete this questionnaire: <https://accrux.nhs.uk/c/p-46nkgm2psk> The Chaucer Surgery NHS app message sent on 22/08/2024 14:19:04

01-Aug-2024 *** Awaiting clinical code migration to EMIS Web**

Comment Administration note
 Comment Dear Mr Viola, Further to our previous message, we are now ready to launch our new appointment booking process for appointments other than with a nurse. From 1st August please use the following link to request an appointment at anytime of the day, this is to try and stop the 8am rush. <https://chaucersurgery.webgp.com/> alternatively head to our website. Do not worry if you cannot access online, our reception staff will help just give us a call. The Chaucer Surgery NHS app message sent on 01/08/2024 09:12:02

31-July-2024 *** Awaiting clinical code migration to EMIS Web**

Comment Administration note
 Comment *Comment* Dear Mr Viola, Further to our previous message, we are now ready to launch our new appointment booking process for appointments other than with a nurse. From 1st August please use the following link to request an appointment at anytime of the day, this is to try and stop the 8am rush.
<https://chaucersurgery.webgp>. alternatively head to our website. Do not worry if you cannot access online, our reception staff will help just give us a call. The Chaucer Surgery NHS app message sent on 31/07/2024 19:01:03

24-July-2024 *** Awaiting clinical code migration to EMIS Web**

Comment Administration note
 Comment *Comment* Dear Mr Viola, Further to our previous message we have had to postpone the launch of our new online service. We will communicate with you once again once we are ready to launch. Please accept our apologies. The Chaucer Surgery NHS app message sent on 24/07/2024 19:01:12

22-July-2024 *** Awaiting clinical code migration to EMIS Web**

Comment Administration note
 Comment *Comment* Dear Mr Viola, Chaucer Surgery are improving the way we are managing our patients in the most suitable way possible. WEF 25th July the way you request appointments will change. Instead of trying to beat the 8am rush, all patients will be asked to submit an online enquiry which will be clinically triaged to your needs. This is to ensure that you receive the right care at the right time by the right person. Further details will follow before we launch. The Chaucer Surgery NHS app message sent on 22/07/2024 15:54:00

09-July-2024 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
*Clinic Letter ***** Eliot Hospital Cardiology*
 Additional Seen in cardiology clinic

09-July-2024 Dr *** Arikawe ***** Awaiting clinical code migration to EMIS Web**

Comment Education about Fournier's gangrene (procedure)
 Comment *Comment* Dear Mr Viola, This message is to alert you to the potential side effects and risks of using the SLGT2 inhibitor medication (-gliflozin) you have been prescribed. Please ensure that you maintain good hydration whilst taking this medication and report any concern about urinary infection, thrush or infection to the skin around the genitals for review with a clinician.
<https://www.nhs.uk/medicines/dapagliflozin/side-effects-of-dapagliflozin/> The Chaucer Surgery NHS app message sent on 08/07/2024 08:00:07

27-Jun-2024 Dr *** Khan ***** The Chaucer SurgeryAdministration note**

Regime Medication review
 Review

20-Jun-2024 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
*Clinical Letter ***** Eliot Hospital Cardiology*
 Additional Letter encounter

13-May-2024 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
*Clinical Letter ***** Eliot Hospital Cardiology*
 Additional Letter encounter

08-May-2024 Dr ***** Obidinanwa ***** The Chaucer Surgery Telephone consultation

Problem	Depression
History	History feeling low and going through a lot of stress
History	History has a court process going on with the catholic church
History	History feeling tired. low energy
History	History has had recent bloods at the hospital
History	History on fluoxetine 60mg daily and getting private counselling
History	No thoughts of deliberate self harm
History	No suicidal thoughts
History	History not seeking more medication
History	History lives alone
History	History just wanted to speak to someone
Comment	Comment patient appears safe and getting help
Comment	Comment ring back if any further issues

03-May-2024 ***** Bakang ***** The Chaucer Surgery Administration note

Additional	Additional note OneLauncher Additional Roles used PCIT
Assessment	Medication reconciliation done by clinical pharmacist
History	Date letter/discharge was scanned: 29.04.24
History	Letter/discharge came from: Cardiology
History	Medication commenced clopidogrel, dapagliflozin, lansoprazole 30mg od, ramipril 1.25mg on at night
History	Medication changed bisoprolol increased to twice a day
History	Additional comments? clopidogrel for 12 month, aspirin for life
Medication	Medication (NOT ISSUED) Clopidogrel 75mg tablets One To Be Taken Each Day until April 25, 28 tablet
Medication	Medication (NOT ISSUED) Dapagliflozin 10mg tablets One To Be Taken Daily, 28 tablet
Medication	Medication (NOT ISSUED) Ramipril 1.25mg capsules One To Be Taken At Night, 28 capsule
Medication	Medication (NOT ISSUED) Lansoprazole 30mg gastro-resistant capsules One To Be Taken Each Morning, 28 capsule

29-Apr-2024 ***** Awaiting clinical code migration to EMIS Web

Comment	Smoking monitoring invitation
Comment	Comment Dear Mr Viola, To help us keep your medical record up to date, please complete some questions about your health habits. Please complete this questionnaire: https://accrux.nhs.uk/c/p-d87k8qsr2 The Chaucer Surgery NHS app message sent on 29/04/2024 16:45:03

29-Apr-2024 ***** Awaiting clinical code migration to EMIS Web

Comment	Referral for smoking cessation service offered
Comment	Comment Dear Mr Viola, Smoking can lead to strokes, cancer, heart and lung disease. We strongly advise quitting. The best way to stop is with a combination of medication and specialist support. You can self-refer if you wish to join the Quit 4 Good stop smoking service. https://fitterfutures.everyonehealth.co.uk/stop-smoking-self-referral-form/ The Chaucer Surgery NHS app message sent on 29/04/2024 16:46:03

28-Apr-2024 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional	Attachment
Additional	Result University Hospitals Coventry and Warwickshire NHS Trust CARDIOLOGY Result

25-Apr-2024 ***** Awaiting clinical code migration to EMIS Web

Comment	***** *****
Comment	SMS text message sent to patient Dear Mr Viola, Can you please reception to discuss a recent ambulance report received. Reception The Chaucer Surgery Scheduled to send on 25/04/2024 12:00:00
Comment	Comment Please confirm where pt lives Ambulance report 24.4.24 states pt ***** Spain. Has returned from Spain as no medical insurance

24-Apr-2024 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional	Attachment
Additional	case summary West Midlands Ambulance Service DEPARTMENT
Additional	Seen by ambulance crew

24-Apr-2024 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
Unscheduled Care NHS 111 NHS 111
 Additional Letter encounter

24-Apr-2024 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
Inpatient Discharge (eDischarge) University Hospitals Coventry and Warwickshire NHS Trust CARDIOLOGY If you have received this document in error or this is no longer your patient, please contact UHCW NHS Trust on 024 7696 8000, quoting 'Docman Patient Letter', the patient's NHS Number and the Event Date on the letter.
 Additional Seen in cardiology clinic

23-Apr-2024 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
ED Discharge University Hospitals Coventry and Warwickshire NHS Trust ACCIDENT & EMERGENCY If you have received this document in error or this is no longer your patient, please contact UHCW NHS Trust on 024 7696 8000, quoting 'Docman Patient Letter', the patient's NHS Number and the Event Date on the letter.
 Additional Seen in hospital casualty

23-Apr-2024 Dr *** Osazuwa ***** The Chaucer SurgeryGP Surgery**

History History discussed over the phone
 History History id confirmed
 History History says having chest pains
 History History going on for the past 4 weeks
 History History described as a pressure
 History History now worsening
 History History has BG: IHD, peripheral vascular disease , COAD
 History History has been using his GTN spray quite frequently ,
 History was previously helping but now no longer heling
 History History not sure what is happening
 History History keen to have some help
 Comment Comment advised would need investigations done:
 bloods , ecg , chest xray
 Comment Comment advised would be best to get to the ED
 Comment Comment would head over there now

15-Apr-2024 *** Joy App (Joy1) Awaiting clinical code migration to EMIS Web**

Comment Comment Added by Jayde ***** (PCN Social prescribing link worker)
 Comment Comment Consultation completed
 Comment Comment NOTES - CONSULTATION DETAILS I have spoken with Rafael this afternoon, Rafael explained that he is currently in Spain. I have suggested that his supporting letter that he had requested for had been completed and suggested that the charge would be £25. Rafael stated that he is really happy that this has been completed for him and stated that he would get his ***** to come and collect this. I asked Rafael if there was anything further that I could support with - stated that he is due to come back to England in a few weeks time and has asked if I am able to request for a telephone appointment with the Dr - explained that he struggles to book and appointment. I have suggested that I would request this through reception to book him in for one. Rafael stated that it was in relation to his angina / pain. I asked Rafael if there was anything further that I could support wit . Stated that there was nothing else at the present time.
 PERSONAL WELLBEING SCORE Score: 82% (Very high)
 Comment Telephone follow-up
 Comment Personal Wellbeing Score (ONS4) rating - I am satisfied with my life
 Comment Personal Wellbeing Score (ONS4) rating - what I do in my life is worthwhile
 Comment Personal Wellbeing Score (ONS4) rating - I was happy yesterday
 Comment Personal Wellbeing Score (ONS4) rating - I was not anxious yesterday

15-Apr-2024 *** Joy App (Joy1) Awaiting clinical code migration to EMIS Web**

Comment Comment Added by Jayde ***** (PCN Social prescribing link worker)
 Comment Comment Rafael was discharged successfully
 Comment Comment Patient referral has now been closed to social prescribing. Patient wanted supporting letter to support with his housing needs. Letter completed and patient has stated that there is no further support required at the present time. Patient able to make further contact with the surgery if requiring any further support.

04-Apr-2024 *** The Chaucer Surgery Awaiting clinical code migration to EMIS Web**

Document Letter sent to outside agency
TWIC

04-Apr-2024 *** The Chaucer Surgery Awaiting clinical code migration to EMIS Web****03-Apr-2024 ***** Joy App (Joy1) Awaiting clinical code migration to EMIS Web**

Comment Comment Added by Jayde ***** (PCN Social prescribing link worker)

Comment Comment Consultation completed

Comment Comment NOTES - CONSULTATION DETAILS I have spoken with Rafael this morning and introduced myself and explained my role and reason for calling and had a long conversation with him. Rafael explained that he has struggling with his mental health due to ongoing PTSD, anxiety and depression following on from a sexual assault. Rafael explained that he has been getting support and counselling through ROSA which has been a lifeline for him. Rafael explained that he is a wheelchair user and often finds himself in bed. Explained that he had been assessed for a social care package however has declined the care package due to him having to contribute £70 a week and stated that he cannot afford this. Rafael explained that his ***** is his career and will come and see him twice a day. Explained that she does his cleaning, washing, personal care ect. Rafael explained that he would like a supporting letter from the Dr as he wants to move back to Coventry so he can be near his family. Explained that none of his family ***** Nuneaton and feels that he is isolated and has limited quality of life. I have explained to Rafael that I can request for a supporting letter for him but have explained due to no recent consultation may not be much information on this. I have encouraged Rafael to get as much supporting information as he can to apply for accommodation in Coventry. He has explained that he has a supporting letter from Rosa, from Adult social care and from his counsellor. I asked Rafael if he needed support with completing the application. Stated yes - explained about the together service and how they would be able to support, however Rafael explained that he had worked with them before and stated that he has applied twice for Coventry but explained that he did not send any of the supporting evidence. I have suggested to Rafael that if his ***** is able to support him with getting the application started and then sending the supporting letters that he does have at the present time to the application and explained that he can send over any additional supporting letters once he has received them. Rafael explained that he is going to see his family in Spain on Saturday and his family there will care for him. I asked Rafael if there was anything additional I could support with at the present time, declined to any further support and has just requested the supporting letter from the GP. I have suggested to Rafael I would follow up with the surgery to request for a supporting letter and I have explained that it may be chargeable. Happy with the plan. I will follow up in 2 weeks time to see if the supporting letter has been completed.

PERSONAL WELLBEING SCORE Score: 40% (Low)

Comment Telephone triage

Comment Referral to social prescribing service

Comment Has an informal carer

Comment Housing unsuited to needs

Comment Personal Wellbeing Score (ONS4) rating - I am satisfied with my life

Comment Personal Wellbeing Score (ONS4) rating - what I do in my life is worthwhile

Comment Personal Wellbeing Score (ONS4) rating - I was happy yesterday

Comment Personal Wellbeing Score (ONS4) rating - I was not anxious yesterday

19-Mar-2024 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
Clinical Letter University Hospitals Coventry and Warwickshire

Additional Screening

15-Mar-2024 *** Awaiting clinical code migration to EMIS Web**

Comment Seasonal influenza vaccination declined
 Comment *Comment* Dear Mr Viola, Our records indicate that you have not had your Flu jab. We will therefore decline you for this year. If you do still wish to have your flu vaccine this season you can do so before 31st March please contact reception to book. The Chaucer Surgery NHS app message sent on 15/03/2024 07:45:01

11-Mar-2024 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
Clinical Letter Coventry & Warwickshire Partnership Trust Mental Health
 Additional Seen in mental health clinic

28-Feb-2024 Dr *** Arikawe ***** Awaiting clinical code migration to EMIS Web**

Comment Offer of statin therapy
 Comment *Comment* Dear Mr Viola, Your health records indicate that you would benefit from being prescribed a statin. A statin is to lower cholesterol and reduce cardiovascular risk. If you would like to be prescribed a statin please let reception know. <https://www.nhs.uk/conditions/cardiovascular-disease/> The Chaucer Surgery NHS app message sent on 28/02/2024 16:34:13

28-Feb-2024 Dr *** Arikawe ***** Awaiting clinical code migration to EMIS Web**

Comment *Comment* Dear Mr Viola, Apologies, please ignore the last message you got about statins The Chaucer Surgery NHS app message sent on 28/02/2024 17:07:00

23-Feb-2024 *** Awaiting clinical code migration to EMIS Web**

Comment Chronic obstructive pulmonary disease monitoring invitation

 Comment SMS text message sent to patient Dear Mr Viola, You are due your annual breathing condition (COPD) review. Please book a routine appointment, and remember to bring all your COPD medication to the appointment. Reception The Chaucer Surgery

20-Feb-2024 *** Awaiting clinical code migration to EMIS Web**

Comment Influenza vaccination invitation second short message service text message sent (situation)
 Comment *Comment* Dear Mr Viola, Our records show you have not had your flu jab. Please book an appointment with the surgery if you still wish to have this or let us know if you wish to decline. The Chaucer Surgery NHS app message sent on 20/02/2024 09:03:01

26-Jan-2024 *** Awaiting clinical code migration to EMIS Web**

Comment Advice given about bowel cancer screening programme

 Comment SMS text message sent to patient Dear Mr Viola, We've been informed that you have not yet completed your bowel screening test. Please arrange your bowel cancer screening by calling the free helpline on 08007076060. For more information visit: www.nhs.uk/conditions/bowel-cancer-screening Reception The Chaucer Surgery

24-Jan-2024 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
*Result Hospital St ***** Bowel Cancer Screening*
 Additional DNA hospital appointment

22-Jan-2024 *** The Chaucer Surgery Awaiting clinical code migration to EMIS Web**

Document Social prescribing offered
Warwickshire Social-Prescribing-Referral-Form-version-5.docx.ewdt

22-Jan-2024 *** Awaiting clinical code migration to EMIS Web**

Comment Email sent to outside agency
 scwcsu.hexsupportcandw@nhs.net
 Comment *Comment* Dear Colleague, RE: Rafael Viola, 21-Jul-1959, 400 147 5723, Male Please find attached a referral for the above patient for your attention. Thanks, ***** The Chaucer Surgery Attachments: Social prescribing offered VIOLA, Rafael (Mr) 0848 22-Jan-2024.rtf

16-Dec-2023 Dr *** Sanusi ***** Enterprise consultation**

History	History	seen with *****
History	History	scrotal lesion noted few weeks ago
History	History	increased in size, associated redness and possibly infected
History	History	no hx of trauma
History	History	worsening pain
History	History	no urinary sympmts, urethral discharge, dysuria etc
Examination	Examination	procedure explained, consent obtained
Examination	Examination	Provision of chaperone refused
Examination	Examination	punctate swelling, redness noted on scrotal sac. no testicular involvement
Comment	Comment	antibiotics issued
Comment	Comment	advised to keep affected area clean and dry
Comment	Comment	monitor for worsening symptmd
History	History	LRTI
History	History	long term smoking history
History	History	ongoing productive cough
History	History	no haemoptysis
History	History	associated discomfort with breathing
Examination	Examination	wheezing, bibasal crackles
Examination	Examination	temp - 36.7
Examination	Examination	rr- 18/min
Comment	Comment	antibiotics and steroids issued
Comment	Comment	salbutamol inhaler and spacer - ran out and nbot had one in a while
Comment	Comment	discussed smoking cessation - tried in the past but currently not keen

05-Dec-2023 *** Paula ***** The Chaucer Surgery Awaiting clinical code migration to EMIS Web**

Referral Document	Referral to orthopaedic surgeon . Referral Type: Outpatient e-RS Letter (05-Dec-2023) NHS e-Referral UBRN 000420322519 for Referral to orthopaedic surgeon
Document	Referral Letter (05-Dec-2023) NHS e-Referral UBRN 000420322519 for Referral to orthopaedic surgeon

04-Dec-2023 *** Paula ***** The Chaucer Surgery Telephone consultation**

History	Telephone consultation
History	History DOB verified
History	History PC: Pt stated due to heart problems has been told not suitable for orthopaedic surgery ? bilater hip pain , advised hip replacement needed but not advised due to cardiac risks outweighing surgery
History	History Has COPD and spasms in chest
History	History Just taking paracetamol as not wanting to take anything stronger , stated has been on gabapentin, morphine and codeine many years ago and was gradually weaned off them. Stated he dose not want to return to having medication again
History	History Non mobile and in wheelchair due to poor health and multi factors with IHD, COPD and PAD
History	History Stated has been on analgesia previously and stated does not want to be on pain medication due to the effects of these. Today he decline a prescription for analgesia
History	History Pt DNA an appointment with trauma and orthopedics 2021 due to feeling disappointed that he may not be able to have surgery due to his existing poor health
History	History Is not asking for re-referral to T&O for further assessment as b/l hip pain is getting more debilitating
History	History task to secs for T& O referral please

03-Nov-2023 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional	Attachment REPORT Health Harmonie DERMATOLOGY
Additional	Seen in dermatology clinic
Additional	Letter encounter

03-Nov-2023 External User () Awaiting clinical code migration to EMIS Web

Comment	Open access service Administered by ***** (Reg Code: 79B0191E) Vaccination Provider ODS Code: C400J
Document	Administration of vaccine Notification of Vaccination (03-Nov-2023)
02-Nov-2023 Procedure	Immunisation course to maintain protection against SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) (Moderna, Inc,07-Nov-2023,710023A,Right upper arm structure)

06-Oct-2023 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional	Attachment Clinical Letter ***** Eliot Hospital Ophthalmology
Additional	DNA hospital appointment

31-July-2023 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
*Clinical Letter ***** Eliot Hospital Sexual Health*
 Additional Letter encounter

11-May-2023 *** The Chaucer Surgery Telephone consultation**

Comment Care co-ordinator
 Comment *Comment* Spoke with Lindsey call advisor from adult social care to request for financial assessment with help for care.
 Comment *Comment* Lindsey advised she will contact both ***** (*****) and Rafael to get some more information and will then make the necessary request for assessment.

04-May-2023 *** Awaiting clinical code migration to EMIS Web**

Comment Smoking cessation advice
 Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, Smoking can lead to strokes, cancer, heart and lung disease. Our records indicate you are a smoker and we strongly advise quitting. The best way to stop is with a combination of medication and specialist support. You can try the NHS Quit Smoking app, or for more information visit: www.nhs.uk/smokefree SMS sent on 04/05/2023 12:01:10

03-May-2023 *** The Chaucer Surgery Telephone call to relative/carer**

Comment Care co-ordinator
 Comment *Comment* Spoke to ***** (*****) today to see how I can support *****.
 Comment *Comment* ***** states that ***** is in bed every day, says he has a wheelchair that he transfers from and to bed.
 Comment *Comment* ***** states that she goes in every day to prepare meals etc, does the cleaning weekly and also does the shopping, Twice weekly she assists with washing and dressing him, but the rest of the time he ***** his clothes, ***** says that she is only managing with what she can do as she has her own family and she ***** Kersley and is the only one out of her ***** that supports *****.
 Comment *Comment* ***** says ***** had ***** in the past but they charged too much and had to let them go as was taking most of his benefit to pay for care.
 Comment *Comment* Says he relies on takeaways as well, and is susceptible to self neglect and says if she wasn't around for a while then he would just stay as he was which is a concern.
 Comment *Comment* ***** also says that he has grab rails, walk in shower, hospital bed, raised toilet seat in place.
 Comment *Comment* Concerns are just around his mobility and feels he is not always safe to transfer and spends a lot of time on his own.
 Comment *Comment* ***** says she will take ***** BP and let us know the results.
 Comment *Comment* I have advised that I can make a referral to social care team for a financial assessment and see what help we can get for ***** also a referral to Physio and see if they can help with his mobility.
 Comment *Comment* ***** happy for all the support we can offer *****.
 Comment *Comment* Advised I will call in couple of weeks to see how things are going and if any further support from myself is needed.
 Additional Cigarette smoker as recorded by ***** 40 /day

11-Apr-2023 *** Vikki ***** Awaiting clinical code migration to EMIS Web**

Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, Would you like your pneumonia vaccination? TO RESPOND, please follow this link: (link will autogenerate here)
 Thanks, Vikki ***** The Chaucer Surgery

04-Apr-2023 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
*Clinical Letter ***** Eliot Hospital Ophthalmology*
 Additional Seen in ophthalmology clinic

10-Mar-2023 *** Awaiting clinical code migration to EMIS Web**

Comment Influenza vaccination invitation SMS text message sent
 Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, There is still chance if you wish to take advantage of your free flu jab. Please contact the surgery to book in with our practice nurse. If we do not hear from you by the 24th March we will automatically decline this flu season's invite.

13-Feb-2023 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
 Clinical Letter ***** Eliot Hospital ophthalmology
 Additional Letter encounter

09-Feb-2023 Dr *** Sandoo ***** The Chaucer SurgeryAdministration note**

Regime Medication review
 Review

08-Feb-2023 Dr *** Iles ***** Awaiting clinical code migration to EMIS Web**

Comment Invitation for structured medication review
 Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, A review of your records shows more than 10 prescriptions of a potentially addictive medication over the past 12 months. It is important that we review this to avoid complications of long term use of potentially dangerous addictive medications. Please contact reception to book a medication review with our Clinical Pharmacist. Further information is available here: <https://patient.info/mental-health/insomnia-poor-sleep/benzodiazepines-and-z-drugs>

08-Feb-2023 Dr *** Iles ***** Awaiting clinical code migration to EMIS Web**

Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, A review of your current medication is due. To help us complete this, we need some up-to-date medical information. Please complete this questionnaire: <https://florey accurx.com/2zqg2v3w5s> The Chaucer Surgery

23-Jan-2023 Dr *** Azuamah ***** The Chaucer SurgeryTelephone consultation**

Problem Medication review with patient
 History History Telephone consultation. Patient ID confirmed.
 History History Also known to have glaucoma and been referred back to eye specialists as missed his appointments. Not yet had an appointment. Advised to contact booking office in GEH to chase appointment. If no positive response, can recontact surgery.
 Comment Medication review done

23-Nov-2022 External User () Awaiting clinical code migration to EMIS Web

Comment Open access service | Administered by ***** Bryniarska |
 Document Vaccination Provider ODS Code: C400J
 Administration of vaccine
 Notification of Vaccination (23-Nov-2022)
 22-Nov-2022 Procedure Immunisation course to maintain protection against SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) (Pfizer Ltd,01-Jan-2023,GE1643,Left upper arm structure)

15-Nov-2022 Dr *** Iles ***** Awaiting clinical code migration to EMIS Web**

Comment COPD (chronic obstructive pulmonary disease) monitoring
 Comment SMS text message first invitation
 Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, I'd like you to complete some questions about your breathing condition (COPD) via the link below. Please complete this questionnaire: <https://florey accurx.com/wn992cn8ex> The Chaucer Surgery

11-Oct-2022 *** Awaiting clinical code migration to EMIS Web**

Comment Comment Online questionnaire not completed by patient

11-Oct-2022 *** Awaiting clinical code migration to EMIS Web**

Comment Comment Online questionnaire not completed by patient

11-Oct-2022 *** Awaiting clinical code migration to EMIS Web**

Comment Comment Online questionnaire not completed by patient

27-Sept-2022 ***** Vikki ***** Awaiting clinical code migration to EMIS Web

Comment COPD monitoring SMS invitation
 Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, I'd like you to complete some questions about your breathing condition (COPD) via the link below. Please complete this questionnaire: (link will autogenerate here) Thanks, Vikki
 ***** The Chaucer Surgery

27-Sept-2022 ***** Vikki ***** Awaiting clinical code migration to EMIS Web

Comment COPD monitoring SMS invitation
 Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, I'd like you to complete some questions about your breathing condition (COPD) via the link below. Please complete this questionnaire: (link will autogenerate here) Thanks, Vikki
 ***** The Chaucer Surgery

27-Sept-2022 ***** Awaiting clinical code migration to EMIS Web

Comment COPD monitoring SMS invitation
 Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, I'd like you to complete some questions about your breathing condition (COPD) via the link below. Alternatively you can contact reception to book a face to face appointment. Please complete this questionnaire: (link will autogenerate here) ***** The Chaucer Surgery

12-Sept-2022 Dr ***** Iles ***** Awaiting clinical code migration to EMIS Web

Comment Influenza vaccination invitation SMS text message sent
 Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, You are eligible for your FREE NHS FLU JAB. We have ordered this for you at the surgery and they are expected to arrive next week. If you don't want one, or have already received it elsewhere, please let us know using the link below. This is important as it lets us update our records and offer the vaccination to someone else. You will receive an invitation to book your jab with us once we have taken delivery of the vaccine. Please complete this questionnaire: florey.accrux.com/n67xptghej The Chaucer Surgery

31-Aug-2022 Dr ***** Sandoo ***** The Chaucer Surgery Telephone consultation

Problem Folic acid deficiency
 History Telephone encounter - called to discuss recent blood results, talked him through them,
 History all ok, folate was a little low and we discussed dietary sources and start rx course for 3/12 and then move onto otc maintenance dose
 History Pt happy with the plan.

26-Aug-2022 ***** Awaiting clinical code migration to EMIS Web

Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, the Dr would like to speak with you regarding your recent blood results, please call the surgery to arrange a telephone consultation with the Doctor Thankyou. The Chaucer Surgery

23-Aug-2022 ***** Awaiting clinical code migration to EMIS Web

22-Aug-2022 Lab Results Haemoglobin A1c level NO CLINICAL DETAILS
Haemoglobin A1c level*Dementia screen/memory clinic *: *: * DIAGNOSIS OF DIABETES MELLITUS: HbA1c of 48 mmol/mol and above is diagnostic of DM (WHO 2011) 42-47 mmol/mol indicates high risk of DM (NICE Guidance PH38 2012)) MONITORING OF DIABETES MELLITUS (Adults): Type 2 target values: 48 mmol/mol - 57 mmol/mol (NICE Guideline NG28) Type 1 target values: 48 mmol/mol or lower (NICE Guideline NG17)(SarahB7) - Normal, no action:
 HbA1c lev - IFCC standardised 41 mmol/mol (No range available)

23-Aug-2022 Dr ***** Sandoo ***** Awaiting clinical code migration to EMIS Web

22-Aug-2022 Lab Results B12 + FOLATE NO CLINICAL DETAILS
B12 + FOLATELow serum folate - suggest review FBC, take dietary history, and supplement folate if appropriate.***** - Abnormal - No Action:
 Serum vitamin B12 403 ng/L (Range: 191 - 663)
 Serum folate Revised Folate reference values (27/7/18) 2.3 ug/L (Range: 3.3 - 19.3)

22-Aug-2022 Dr ***** Sandoo ***** Awaiting clinical code migration to EMIS Web

Lab Results	Full blood count - FBC NO CLINICAL DETAILS		
	Full blood count - FBC***** - just out of range:		
	Total white cell count	11.12 10 ⁹ /L	(Range: 4 - 11)
	Red blood cell (RBC) count	4.14 10 ¹² /L	(Range: 4.5 - 5.3)
	Haemoglobin estimation	135 g/L	(Range: 130 - 170)
	Haematocrit	0.422 L/L	(Range: 0.4 - 0.5)
	Mean corpuscular volume (MCV)	102.1 fL	(Range: 82 - 105)
	Mean corpusc. haemoglobin(MCH)	32.7 pg	(Range: 27 - 32)
	Mean corpusc. Hb. conc. (MCHC)	320 g/L	(Range: 315 - 345)
	Platelet count	231 10 ⁹ /L	(Range: 140 - 400)
	Neutrophil count	7.23 10 ⁹ /L	(Range: 2 - 7)
	Lymphocyte count	2.95 10 ⁹ /L	(Range: 1 - 3)
	Monocyte count	0.48 10 ⁹ /L	(Range: 0.2 - 1)
	Eosinophil count	0.22 10 ⁹ /L	(Range: 0.02 - 0.5)
	Basophil count	0.11 10 ⁹ /L	(Range: 0.01 - 0.1)
	COMMENTS ""		(No range available)
	HYPOCHROMASIA, 2.80 %	2.8 %	(Range: <6)
	%HYPO & CHR COMMENT Please note new Normal		(No range available)
	Range for MCV, as a consequence of implementation of new analysers.		

22-Aug-2022 ***** Awaiting clinical code migration to EMIS Web

Lab Results	Serum TSH level NO CLINICAL DETAILS		
	Serum TSH level IN.B. Please note the new TSH reference range from 1st April 2015(SarahB7) - Normal, no action:		

22-Aug-2022 ***** Awaiting clinical code migration to EMIS Web

Lab Results	Liver function test NO CLINICAL DETAILS		
	Liver function test (SarahB7) - Abnormal - No Action:		
	Serum total protein	68 g/L	(Range: 60 - 80)
	Serum albumin	41 g/L	(Range: 35 - 50)
	Serum total bilirubin level	3 umol/L	(Range: 4 - 25)
	Total alkaline phosphatase	86 u/L	(Range: 40 - 130)
	Serum ALT level	13 u/L	(Range: 10 - 50)
	Bone profile (SarahB7) - Normal, no action:		
	Serum calcium	2.32 mmol/L	(Range: 2.1 - 2.58)
	Serum adjusted calcium conc, 2.30 mmol/L	2.3 mmol/L	(Range: 2.1 - 2.58)
	Serum albumin	41 g/L	(Range: 35 - 50)
	Total alkaline phosphatase	86 u/L	(Range: 40 - 130)
	Urea and electrolytes (SarahB7) - Normal, no action:		
	Serum sodium	141 mmol/L	(Range: 133 - 146)
	Serum potassium	4.3 mmol/L	(Range: 3.5 - 5.3)
	Serum urea level	6.8 mmol/L	(Range: 2.5 - 7.8)
	Serum creatinine	65 umol/L	(Range: 65 - 105)

22-Aug-2022 ***** Awaiting clinical code migration to EMIS Web

Lab Results	ESTIMATED GFR NO CLINICAL DETAILS		
	ESTIMATED GFR Normal kidney if no proteinuria, haematuria, or abnormal kidneys on US S. UK CKD guidelines are available at www.renal.org/CKDguide/ckd.html EGFR calculated using parameters for white male. (If black multiply result by 1.21; if female multiply result by 0.742)(SarahB7) - Normal, no action:		
	GFR calculated abbreviated MDRD	90 mL/min/1.73m2	(No range available)
	Serum creatinine	65 umol/L	(Range: 65 - 105)

19-Aug-2022 ***** The Chaucer SurgeryTelephone call to a patient

Comment	Care co-ordinator		
Comment	Comment Spoke with Rafael today and explained my role.		
Comment	Comment Rafeal says that his ***** is his carer and does everything for him shopping, cleaning, finance, meals etc.		
Comment	Comment Rafeal says that ***** also has LPOA for h+w and finance.		
Comment	Comment Rafeal has declined any further support at the moment, but advised in the future if needed then to contact me.		

17-Aug-2022 Dr ***** Azumah ***** The Chaucer SurgeryAwaiting clinical code migration to EMIS Web

Referral Document	Referral to glaucoma clinic . Referral Type: Outpatient		
	e-RS Letter (17-Aug-2022)		
	NHS e-Referral UBRN 000391124535 for Referral to glaucoma clinic		
Document	Referral Letter (17-Aug-2022)		
	NHS e-Referral UBRN 000391124535 for Referral to glaucoma clinic		

16-Aug-2022 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional	Administration
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16-Aug-2022 Dr *** Azuamah ***** The Chaucer Surgery Telephone consultation**

Test Request Unknown specimen
 History History Came with *****.
 History History Has concerns of short term memory. Not sure if related to age.
 Problem Multiple symptoms
 Examination Examination Alert, active, GCS-15
 Examination Examination 6CIT (Six Item Cognitive Impairment Test) total score 5 /28
 Comment Comment Memory problems likely related to age.
 Comment Comment Bloods to screen for causes of memory loss
 History History Requesting referral to eye clinic
 History History Previously under the eye clinic for glaucoma monitoring but lost to FU. Not had a review in 4yrs. Wants to be referred back.
 Comment Comment Referral to Ophthalmology Dear Doctor, I would appreciate your specialist assessment of this 63 year old who normally has yearly glaucoma monitoring through the Newmedica Glaucoma monitoring service. Patient mentions he has not had a review for 4 years as he missed the appointments. He now wants to be referred back I would appreciate if your team could please kindly review her. Thanks and I appreciate your help. Kind regards Dr. ***** Azuamah
 History History Chest discomfort
 History History Gets occasional episodes of chest discomfort lasting about 30mins. Occurs sparingly, about once in 3 months. Not had episode for a while. Previous hx of IHD. No SOB, occasional palpitations. Feels fine now.
 Examination Examination Pulse rate Regular 65 beats/min
 Examination Examination Chest - Clear, S1, S2, M0
 Comment Comment Reassured, No concerns on examination and currently asymptomatic
 Comment Comment Book for ECG. If persistent chest pain >20mins, to go to AE

16-Aug-2022 *** Teresa ***** The Chaucer Surgery GP Surgery**

Additional Additional Body mass index (calculation based on height entry 30-Jan-2018, NB prior to age 70 average height loss is 1cm per 10 years). 25.41 kg/m2
 Additional Additional Weight monitoring Current weight 67.5 kg equates to 10 st, 9 lb. A 8% gain from the previous reading (62.4kg, 30-Jan-2018). Based on the height entry (30-Jan-2018) a healthy weight is likely to be 49 - 66kg (7 st, 10 lb - 10 st, 6 lb)
 Procedure Procedure Keep Well health check
 Procedure Procedure Body weight 67.5 kg
 Procedure Procedure Urinalysis requested - pt could not do today will bring back
 Procedure Procedure Diet education - very restricted as either has takeaways or simple foods he can do himself, is in wheelchair
 Procedure Procedure alcohol - teetotal
 Procedure Procedure Heavy cigarette smoker (20-39 cigs/day)
 Procedure Procedure Smoking cessation counselling - not interested in giving up cigarettes
 Procedure Procedure advised to increase fruit and vegetables in diet where possible
 Procedure Procedure does not appear to have engaged in some of the medical appointments at hospital - as does not like going there
 Procedure Procedure given private phlebotomists contact details as has not had home bloods done as was out when they attended - also takes offence to having notes on form that risk of infection as HIV positive

29-July-2022 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Additional Attachment
 Clinical Letter RoSa Independent Sexual Violence Advisor
 Additional Additional Administration

28-July-2022 *** Awaiting clinical code migration to EMIS Web**

Comment Comment Administration note

 Comment Comment SMS text message sent to patient Dear Mr Viola, We have been informed that following BT/Openreach announcement of expected strike action on 29th July & 1st August that GP Practices in our area may experience issues with their IT systems and phone systems. If this does happen we would like to apologise in advance but unfortunately it is out of our control. We do have measurements in place however our service capabilities will be reduced should the practice be impacted.

09-Jun-2022 *** Awaiting clinical code migration to EMIS Web**

Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, An appointment has been booked at the surgery 15.6.22 at 10.00 with the nurse. Thanks, ***** Cope The Chaucer Surgery

26-May-2022 *** Awaiting clinical code migration to EMIS Web**

Comment Comment Online questionnaire not completed by patient

20-May-2022 Dr *** Azuamah ***** The Chaucer Surgery Awaiting clinical code migration to EMIS Web**

Comment Comment UHCW triage
 Referral Referral to dermatologist . Referral Type: Outpatient
 Document e-RS Letter (20-May-2022)
 NHS e-Referral UBRN 000385730643 for Referral to dermatologist
 Document Referral Letter (20-May-2022)
 NHS e-Referral UBRN 000385730643 for Referral to dermatologist

19-May-2022 Mr pcti domman1 (dme6453a) Awaiting clinical code migration to EMIS Web

Additional Attachment
 Email Chaucer Surgery Letter from patient *****
 Additional Letter encounter

19-May-2022 *** Awaiting clinical code migration to EMIS Web**

Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, please take a picture & follow the Link Thankyou . TO RESPOND, please follow this link: (link will autogenerate here) The Chaucer Surgery

19-May-2022 *** Awaiting clinical code migration to EMIS Web**

Comment Comment Online questionnaire completed by patient
 Comment Comment Dear Mr Viola, please take a picture & follow the Link Thankyou . The Chaucer Surgery Response: This has only happened over the past 3 weeks but it has got bigger and is rough to touch. Patient attached photo or document
 Additional Additional
<https://web.accurx.com/api/portal/patientupload/9752/13363824/vawpkx4ntd>
 Additional Additional
<https://web.accurx.com/api/portal/patientupload/9752/13363824/fysvcs42wg>
 Additional Additional
<https://web.accurx.com/api/portal/patientupload/9752/13363824/xhtm7j4pc>

19-May-2022 Dr *** Muhammad (muh6453) The Chaucer Surgery Telephone consultation**

Problem Skin lesion
 History Referral to dermatology service
 History History Dear Colleagues
 History History ?suspected AK or BCC left upper forehead
 History History Background - List as IHD, previus CAB, significant PVD, HIV positive under sexual health clinic, Previous hep c positive , previous IVD user, documented COPD, previous alcohol excess.
 Comment Comment This 62 year old chap presents with a slow growing flesh coloured lesion over the past two months as above. I wonder whether this is a BCC and would value expert assessment. As noted, he has a significant past and current medical history
 Comment Comment Yours faithfully
 Comment Comment Dr FM

17-May-2022 Dr *** Iles ***** Awaiting clinical code migration to EMIS Web**

Comment *****
 Comment SMS text message sent to patient Dear Mr Viola, I'd like you to submit your blood pressure reading. If you don't have access to a blood pressure monitor at home, please contact one of our receptionists about your options. Please complete this questionnaire: (link will autogenerate here) Thanks, Dr Iles The Chaucer Surgery

17-May-2022 *** Awaiting clinical code migration to EMIS Web**

Comment Comment Online questionnaire not completed by patient