

**EC Discharge Letter:**  
**Document Output:**  
**Output**

**\* Final Report \***

**Medway NHS Foundation Trust**  
**Windmill Road**  
**Gillingham**  
**Kent**  
**ME7 5NY**

**Tel: 01634 830000**

**GP Details:** DR F IGWE  
ST GEORGES MEDICAL CENTRE  
ST GEORGES MEDICAL CENTRE  
55 ST GEORGES AVENUE  
SHEERNESS  
KENT  
ME12 1QU

**Date:** 09/08/2024

**Patient Discharge Letter**

**PATIENT DEMOGRAPHICS**

**Patient name:** KATRINA MARGERY  
**Date of birth:** 24/5/1967  
**Gender:** Female  
**NHS number:** 4000670514  
**Hospital Number:** 670524AL  
**Patent address:** Flat 1, Wing House  
Wing Road, Leysdown-on-Sea  
ME12 4QR  
**Patient telephone number:** 07484257634

**GP Practice**

**GP Practice Details:** DR F IGWE  
ST GEORGES MEDICAL CENTRE  
ST GEORGES MEDICAL CENTRE  
55 ST GEORGES AVENUE  
SHEERNESS  
KENT  
ME12 1QU

**Attendance Details**

**Date and Time of Arrival:** 09-Aug-2024 10:53

**Reason for attendance:** Other than above

**Attendance category:** 4. Planned Follow-up Emergency Care Attendance within 7 days of the First Emergency Care Attendance at THIS Emergency Care Department

**Referred Details**

**Referrer Details:**

**CLINICAL NARRATIVE****PRESENTING COMPLAINTS OR ISSUES**

**Presenting Complaint:** Mrs Margery was booked at SDEC for follow up after she was discharged from AMU when she was admitted with Polyarthrititis, non blanching rashes , infected toe nails probably Reactive Arthritis.She was reviewed by Rheumatology while she was admitted.requested vasculitis screen.

Her bloods show -ve vasculitis screen and Rheumatoid screen.

**Chief Complaint Group:** Skin

**Chief Complaint:** Rash

**Chief Complaint Additional Information:** Today her symptoms are improving and rash are clearing gradually.She had R leg pain and doppler exclude DVT .

Bloods today show improved inflammatory markers.CRP 15.2 from 66.

She is advised to complete course of oral Flucloxacillin.

**PROCEDURES****Treatment:**

**Date/Time of Treatment:** 09-Aug-2024 17:00

**DIAGNOSIS**

**Diagnosis Group 1:**

**Diagnosis Group:**

**Primary Diagnosis Qualifier:** Confirmed diagnosis

**Diagnoses Other:** Reactive arthritis

infected toe nail

## **LEGAL INFORMATION**

### **SAFEGUARDING ISSUES**

**Is there a safeguarding issue or concern?**

### **PLAN AND REQUESTED ACTIONS**

complete course of oral Flucloxacillin

GP to follow up and repeat bloods after 7 days.

## **MEDICATIONS AND MEDICAL DEVICES**

## **DISCHARGE DETAILS**

**Date & time of discharge:** 09-Aug-2024 16:51

**Discharge Status Group:** Treatment complete

**Discharge Status:** Treatment complete

**Discharge Destination Group:** Discharged

**Discharge destination:** Usual place of residence / family members

**Escalation Category:** GREEN - Standard Level

|                              |
|------------------------------|
| <b>DISCHARGING CLINICIAN</b> |
| Name:                        |

|                                 |
|---------------------------------|
| <b>PERSON COMPLETING RECORD</b> |
|---------------------------------|

|                                                                 |
|-----------------------------------------------------------------|
| Name: A Jamal<br>Grade: SAS<br>Professional Identifier: 7651014 |
|-----------------------------------------------------------------|

|                                             |
|---------------------------------------------|
| <b>SENIOR REVIEWING CLINICIAN</b>           |
| Name:<br>Grade:<br>Professional Identifier: |

|                                        |
|----------------------------------------|
| <b>CONTACT FOR FURTHER INFORMATION</b> |
| 6644                                   |

**MFT ED Discharge Letter Output2 FT**  
**Medway Data Collection:**

09-Aug-2024 17:02

**Electronic Signatures:**

**Jamal, Ashraf (Doctor)** (Signed 09-Aug-2024 17:02)  
*Authored: EC Discharge Letter, Document Output*

***Last Updated: 09-Aug-2024 17:02 by Jamal, Ashraf (Doctor)***