McLeish Wendy CHI: 2505876061

Clinic Letter

NHS
Greater Glasgow and Clyde

Plastic Surgery Unit
84 Castle Street
Glasgow
G4 0SF
0141 211 4000

Dr. MM Morris
Meadowpark Surgery
568 Alexandra Parade
Glasgow
G31 3BP

Main Switchboard: 0141 211 4000
Department: Plastic Surgery
Contact Tel: 0141 201 6394
Enquiries to: Dionne.McLeod@ggc.scot.nhs.uk
Letter Date: 27/06/2023
Reference: DM/BB
Dictated Date: 27/06/2023
Transcribed Date: 04/07/2023

Dear Dr. MM Morris,

Wendy McLeish; D.O.B: 25 May 1987; CHI: 2505876061
FLAT 3/2, 312 CUMBERNAULD RD, Glasgow, Lanarkshire, G31 3LY

Attendance: Specialty - Plastic Surgery; Clinic - GRGPCPS3-GENERIC PLASTICS CONS TUES AM
Date and Time of Appointment - 27/06/2023 08:50

Clinical Comments:
Diagnosis: resolved lesion right nasal side wall.

Plan: discharge.

I met with this lady in clinic today. She was referred in 2022 with a lesion on her right nasal side wall suspicious of a basal cell carcinoma. Photographs then show a clear lesion present. On review today, this has now resolved, leaving only a mild area of erythema. There was no raised or rolled edge presence and no clinical evidence of BCC or skin malignancy. Therefore reassured that she doesn't require any treatment. I've taken a further photograph to record the improvement and discharged her from the clinic. I've asked her to return to see yourself if the lesion recurs.

Kind regards,

Yours sincerely,

Mr David McGill

Consultant Plastic Surgeon

Electronically Signed: Mr David McGill, Consultant

cc.

McLeish Wendy CHI: 2505876061

Final Discharge Letter

NHS
Greater Glasgow and Clyde

Glasgow Royal Infirmary
Alexandra Parade
Glasgow
G31 2ER
0141 211 4000

Main Switchboard:
Department: General Medicine
Contact Tel: 0141 201 6655
Enquiries to: Megan.Kelly3@ggc.scot.nhs.uk

Letter Date: 20/04/2023
Reference: CA/MK
Dictated Date: 19/04/2023
Transcribed Date: 20/04/2023

Dr. MM Morris
Meadowpark Surgery
568 Alexandra Parade
Glasgow
G31 3BP

Dear Dr. MM Morris,

Wendy McLeish; D.O.B: 25/05/1987; CHI: 2505876061
FLAT 3/2, 312 CUMBERNAULD RD, Glasgow, Lanarkshire, G31 3LY

Admission: Specialty - General Medicine; Ward - GRI C19 Ward 46 Medical
Consultant - Dr Christine Aiken; Date of Admission - 25/03/2023
Date of Discharge - 26/03/2023; Discharged to - Private Residence - no additional detail added

Follow Up: Nil

Clinical Comments:
Wendy McLeish was admitted via the Assessment Unit with 2-3 week history of feeling confused and falls. She denied any symptoms preceding the falls but admitted to 3 episodes of faecal incontinence when she passed liquid stool. Her concern was that this was similar to the symptoms she had with her previous pneumonia when she required ECMO.

Examination revealed her to be mildly hypotensive at 97mm Hg systolic with mildly reduced coordination of her left side. Blood tests showed a slight elevated white cell count at 13.5 but nil else of note. CT head showed no abnormalities and she was mobile with no issues on the ward. She had no further episodes of faecal incontinence and she was felt for discharge. The suspicion was that she had gastroenteritis leading to her symptoms. No routine follow up has been arranged.

Yours sincerely,

Dr Christine Aiken

Consultant Physician Acute Medicine

Electronically Signed: Dr Christine Aiken, Consultant

McLeish Wendy CHI: 2505876061

Letter to Patient:

NHS
Greater Glasgow and Clyde

Glasgow Royal Infirmary
Alexandra Parade
Glasgow
G31 2ER
Main Switchboard: 0141 211 4000
Department: Respiratory Department
Contact Tel: 0141 201 3831
Enquiries to: Fiona MacLellan
Letter Date: 30/03/2023
Reference: AW/RS
Dictated Date: 28/03/2023
Transcribed Date: 29/03/2023

Wendy McLeish
FLAT 3/2
312 CUMBERNAULD RD
Glasgow
Lanarkshire
G31 3LY

Dear Wendy,

Thank you for attending for your CT scan which has now been reported.

There is some longstanding changes which we feel is likely the sequelae of your sever lung infection in 2011.

There is some new scattered changes which look a bit more recent and we wondered whether or not at the time of the scan you had a recent or ongoing infection. A follow up has been advised and I will get this organised.

Yours sincerely

Dr A Wright

Consultant in Respiratory Medicine

Electronically Signed: Dr Angela Wright, Consultant

cc.
Dr Morris
Meadowpark Surgery

McLeish Wendy CHI: 2505876061

Final Discharge Letter

NHS
Greater Glasgow and Clyde

Glasgow Royal Infirmary
Alexandra Parade
Glasgow
G31 2ER
0141 211 4000

Main Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
Dictated Date:
Transcribed Date:

General Medicine
0141 201 6655
Megan.Kelly3@ggc.scot.nhs.uk
20/04/2023
CA/MK
19/04/2023
20/04/2023

Dr. MM Morris
Meadowpark Surgery
568 Alexandra Parade
Glasgow
G31 3BP

Dear Dr. MM Morris,

Wendy McLeish; D.O.B: 25/05/1987; CHI: 2505876061
FLAT 3/2, 312 CUMBERNAULD RD, Glasgow, Lanarkshire, G31 3LY

Admission: Specialty - General Medicine; Ward - GRI C19 Ward 46 Medical
Consultant - Dr Christine Aiken; Date of Admission - 25/03/2023
Date of Discharge - 26/03/2023; Discharged to - Private Residence - no additional detail added

Follow Up: Nil

Clinical Comments:
Wendy McLeish was admitted via the Assessment Unit with 2-3 week history of feeling confused and falls. She denied any symptoms preceding the falls but admitted to 3 episodes of faecal incontinence when she passed liquid stool. Her concern was that this was similar to the symptoms she had with her previous pneumonia when she required ECMO.

Examination revealed her to be mildly hypotensive at 97mm Hg systolic with mildly reduced coordination of her left side. Blood tests showed a slight elevated white cell count at 13.5 but nil else of note. CT head showed no abnormalities and she was mobile with no issues on the ward. She had no further episodes of faecal incontinence and she was felt for discharge. The suspicion was that she had gastroenteritis leading to her symptoms. No routine follow up has been arranged.

Yours sincerely,

Dr Christine Aiken

Consultant Physician Acute Medicine

Electronically Signed: Dr Christine Aiken, Consultant

cc.

NHS Confidential: Personal data about a patient

McLeish Wendy CHI: 2505876061 DoB: 25-May-1987

Immediate Discharge Letter

NHS Greater Glasgow and Clyde

Highly Sensitive: No
Consent for Sharing Withheld: No

MARGARET MORRISMeadowpark Surgery,568 Alexandra Parade,Glasgow, G31 3BP

Main Switchboard:
Date of Completion: 19-Apr-2023

Dear MARGARET MORRIS,

Name	CHI	DoB	Address
Wendy McLeish	**2505876061**	**25-May-1987**	**FLAT 3/2, 312 CUMBERNAULD RD, Glasgow, Lanarkshire, G31 3LY**

Admitted	Type	Discharged	Destination
25-Mar-2023 00:42	IP	26-Mar-2023	

Specialty	Consultant	Ward	Telephone
General Medicine	Aiken	GRI C19 Ward 46 Medical	

Primary Diagnosis
There is no data to display.

Secondary Diagnosis
There is no data to display.

Significant Operations / Procedures:
There is no data to display.

Last Discharge Review: Lorena Mihaita (Lorena Mihaita - Foundation Year 2) on 26 Mar 2023 16:30

Discharge Medication:

McLeish Wendy CHI: 2505876061 DoB: 25-May-1987

Active Drug Name	Route	Dose	Disp	Reason	Further Details	ECS	Since Admission
Airomir 100micrograms/dose Autohaler (Teva UK Ltd)	inhalation	200 micrograms four times daily when required	No	Patient's own supply			Added
Dihydrocodeine 30mg tablets	oral	60 mg four times daily when required	No	Patient's own supply			Added
Gabapentin 100mg capsules	oral	1 capsule three times daily	No	Patient's own supply			Added
Lamotrigine 25mg tablets	oral	75 mg once daily	No	Patient's own supply			Added
Lidocaine 5% medicated plasters	topical	1 patch once daily when required	No	Patient's own supply			Added
Sertraline 50mg tablets	oral	1 tablet once daily	No	Patient's own supply			Added

"Added" means this medicine was added to the Clinical Portal record after admission. It does not necessarily mean this medicine was started by the hospital.

Dispensing Comments
There is no data to display.

Withheld Medication:

Date	Withheld Drug Name	Route	Dose	Note	Withheld Reason
There is no data to display.					

Stopped Medication:

Date	Stopped Drug Name	Route	Dose	Note	Stopped Reason
2023-03-26	Desogestrel 75microgram tablets (Cerelle)	oral	1 Tab Daily,		Stopped before admission
2023-03-26	Mirtazapine 45mg tablets	oral	ONE TO BE TAKEN AT NIGHT,		Stopped before admission
2023-03-26	Propranolol 10mg tablets	oral	when required ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED,		Stopped before admission

Reason for Admission and Presenting Complaints	Admission Category
No data available	No data available

NHS Confidential: Personal data about a patient

McLeish Wendy CHI: 2505876061 DoB: 25-May-1987

Clinical Comments:	Dear doctor, Thank you for taking over the care of Wendy Mcleish (35 year old female) who was admitted in ward 46 GRI with three weeks history of confusion and ataxia. She also had 3 episodes of faecal incontinence (liquid stools). O/E, there was slight decrease in co-ordination, rest of the examination including neuro exam was normal. Chest XR showed nil focal , CT brain showed nothing significant. ---------- Regards Ward 46
Discharge Comments:	
Follow Up:	No none
Results Awaited:	No
Pharmacist Comments:	
Final Discharge Letter to Follow:	Yes

Yours sincerely,

Lorena MIHAITA

Prescription Review
Checked by: Lorena MIHAITA (Foundation Year 2)
Discharged by: Christine AIKEN (GRI- medical)

Acute Services Division

Diagnostics Directorate

Ultrasound Scanning
Imaging Department
Stobhill Hospital
133 Balornock Road
Glasgow
G21 3UW

NHS
Greater Glasgow and Clyde

Dr Samuel Broadley
Meadowpark Surgery
568 Alexandra Parade
Glasgow
G31 3BP

Tel: 0141 347 8367
Date: 25-Mar-2023
CHI No: 2505876061
Hosp Ref: G207H
Page No: **Page 1 of 1**

Dear Doctor,

We would like to inform you that the patient below has failed to arrive for a radiology appointment.

Patient: Miss Wendy McLeish
Date of birth: 25-May-1987
CHI No: 2505876061
Patient Address:
FLAT 3/2
312 CUMBERNAULD RD
GLASGOW
LANARKSHIRE
G31 3LY
Patient GP: Dr Margaret Morris Practice: Meadowpark Surgery
Referrer: Dr Samuel Broadley Source: Meadowpark Surgery

For: **US Soft tissue**
On: **Friday 24 March 2023 at 3:50 pm**
At: **Stobhill Hospital, Ultrasound Scanning**

Please note that in some cases DNAs are due to incorrect patient address details on the request form.
We are concerned that your patient still requires their examination.
If this is the case, could you please confirm this and re-request in the normal manner.

We have notified your patient of this DNA.

Yours sincerely

Diagnostics Administrator

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC Plastics Referral Protocol

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Plastic Surgery
GGC Plastics

— **Consultant / receiving practitioner** and/or **specialty clinic**

Glasgow Royal Infirmary
84 Castle Street
Glasgow
G4 0SF

— **Hospital** and **hospital address**

Hospital location code.
G107H

Email address
-

Urgency of referral	Urgent - Suspected Cancer		
Date of referral	02-May-2023	**Date sent**	02-May-2023

PATIENT DETAILS

Surname	McLeish
Forename(s)	Wendy
Title	Miss
Sex	Female
Date of birth	25-May-1987
CHI no.	2505876061
Area of Residence	-

Patient's address

Flat 3.2
312 Cumbernauld Road
Glasgow
G31 3LY

Contact number(s)

Voice:07912347436

101029472044I

Unique Care Pathway Number: 101029472044I

REGISTERED GP DETAILS

Name	Dr Margaret Morris		
GMC code	4305792	GP code	05029
Practice name	Meadowpark Surgery (18882)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)

Voice:0141 554 0464
Facsimile:0141 550 2002

REFERRING GP DETAILS

Name	Dr. Sabha Ali		
GMC code	6156945	GP code	08541
Practice name	Meadowpark Surgery (46625)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)

Voice:0141 554 0464

CLINICAL INFORMATION

History of presenting complaint

Presenting complaint

Description: Suspicious lesion on nose. missed appointment.

Comment: Dear Plastics,
This patient missed her appointment regarding a crusted lesion on her nose. She would like to be seek your advice and has asked for a re-referral.
Many thanks for considering this,
Dr S Ali

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history

Pre-existing conditions (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Bronchiectasis	-	29-Mar-2023	29-Mar-2023
Lumbago with sciatica	-	01-Feb-2023	01-Feb-2023
Asthma	-	12-Sep-2022	12-Sep-2022
Vulnerable child in family	-	16-Mar-2021	16-Mar-2021
Assault by bite of human being	by partner. bite to R ear, blunt head trauma by bottle.	01-Nov-2019	01-Nov-2019
Social worker involved	-	02-Sep-2019	02-Sep-2019
Alcohol problem drinking	-	02-Sep-2019	02-Sep-2019
Miscarriage	surgical ERPC	03-Sep-2015	03-Sep-2015
Pneumonia due to unspecified organism	(Bilateral)	30-Dec-2011	30-Dec-2011
Adult respiratory distress syndrome	-	30-Nov-2011	30-Nov-2011
Overdose of drug	fluoxetine	22-Sep-2011	22-Sep-2011
Anxiety with depression	-	19-Jul-2011	19-Jul-2011
Death of father	-	31-Jan-2011	31-Jan-2011
Has a tremor	seen by nuerologist 2012, felt to be benign	01-Apr-2007	01-Apr-2007
Death of mother	age 29 MI	01-Jan-1991	01-Jan-1991

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Elective caesarean delivery NOS	26-Feb-2017	26-Feb-2017

Current medication (Active Repeat medication issued within the last 12 months)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Ralvo Medicated Plaster 700 mg	30	30 patch	APPLY ONE PLASTER ONCE DAILY (12 HOURS ON 12 HOURS OFF)	-	28-Feb-2023	18-Apr-2023
Dihydrocodeine Tablets 30 mg	224	224 tablet	TAKE 2 TABLETS FOUR TIMES DAILY	-	28-Feb-2023	18-Apr-2023
Gabapentin Capsules 100 mg	84	84 capsule	TAKE ONE CAPSULE THREE TIMES DAILY	-	28-Feb-2023	18-Apr-2023
Lamotrigine Tablets 50 mg	28	28 tablet	TAKE ONE TABLET ONCE DAILY (TOTAL DAILY DOSE 75MG)	-	11-Oct-2022	18-Apr-2023
Lamotrigine Tablets 25 mg	28	28 tablet	TAKE ONE TABLET ONCE DAILY (TOTAL DAILY DOSE 75MG)	-	11-Oct-2022	18-Apr-2023

Clenil Modulite Cfc-free inhaler 100 micrograms/actuation	2	2 INHALER	TWO PUFFS TO BE INHALED TWICE A DAY	-	12-Sep-2022	18-Apr-2023
Salbutamol Cfc-free inhaler 100 micrograms/puff	1	1 INHALER	ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY	-	12-Aug-2021	18-Apr-2023

Recent medication (Any medication issued within last 90 days not shown above)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Cyclizine Tablets 50 mg	15	15 tablet	ONE TO BE TAKEN THREE TIMES A DAY	-	16-Mar-2023	16-Mar-2023
Mirtazapine Tablets 15 mg	21	21 tablet	WEEK 1 - TAKE 2 TABLETS ONCE DAILY. WEEK 2 - TAKE ONE TABLET ONCE DAILY FOR 1 WEEK THEN STOP	-	28-Feb-2023	28-Feb-2023
Sertraline Hydrochloride Tablets 50 mg	28	28 tablet	WEEK 3 ONWARDS - TAKE ONE TABLET ONCE DAILY	-	28-Feb-2023	28-Feb-2023
Gabapentin Capsules 100 mg	84	84 capsule	TAKE ONE CAPSULE THREE TIMES DAILY	-	01-Feb-2023	01-Feb-2023
Paracetamol Tablets 500 mg	224	224 tablet	TAKE 2 TABLETS FOUR TIMES DAILY	-	01-Feb-2023	01-Feb-2023
Dihydrocodeine Tablets 30 mg	224	224 tablet	TAKE 2 TABLETS FOUR TIMES DAILY	-	01-Feb-2023	01-Feb-2023
Ralvo Medicated Plaster 700 mg	30	30 patch	APPLY ONE PLASTER ONCE DAILY (12 HOURS ON 12 HOURS OFF)	-	01-Feb-2023	01-Feb-2023
Co-Codamol 30/500 Tablets	50	50 TABLET	TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)	-	23-Jan-2023	23-Jan-2023
Mirtazapine Tablets 45 mg	28	28 tablet	ONE TO BE TAKEN AT NIGHT	-	10-May-2022	16-Feb-2023

Blood Pressure

Date Recorded	Systolic	Diastolic
08-Sep-2022	122	92
21-Sep-2021	120	60
17-Jul-2018	128	77
09-Jul-2015	123	90
08-Aug-2013	116	77

Body Measurements

Date Recorded	Height	Weight	BMI
10-Oct-2022	-	90	-
10-Jun-2021	160.02	82.55	32.24
23-Mar-2021	158	83	33.25
23-Mar-2021	-	83	-
17-Jul-2018	-	-	29.64

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Height (m):	160.02	-
Weight (kg):	90	-
BMI (Weight / Height):	32.24	-
Non-smoker :		08-Sep-2022
Non-smoker :	hx noted, ongoing longstanding anxiety, tremors, seen by neurology and advised related to anxiety, using propranolol, feels doesn't help her, also uses saba for sob up stairs at times, bu- TRUNCATED	07-Oct-2021

Ex-smoker - amount unknown :		12-Aug-2021
Never smoked tobacco:		10-Jun-2021
Never smoked tobacco:		16-Sep-2019
Non-drinker alcohol :		07-Oct-2021
Alcohol consumption, 1 units/week:		10-Jun-2021
Alcohol consumption, 3 units/week:		17-Apr-2012
Light drinker - 1-2u/day:	Alcohol Intake$$.clm - Repeat after an Interval	21-Jan-2010

Clinical warnings

Allergies

Description	Comment	Date recorded
Adverse reaction to propranolol	possible wheeze with this	29-Apr-2016

Additional Support Needs

No known ASN requirements

Additional relevant information

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

Patient will accept cancellation or short notice appointment (within 1-6 days):Yes

Referred By:Referring GP

Electronic Attachment Present:No

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) **Date**

McLeish Wendy CHI: 2505876061

Letter to Patient:

NHS
Greater Glasgow and Clyde

Plastic Surgery Unit
84 Castle Street
Glasgow
G4 0SF
Main Switchboard: 0141 211 4000
Department: Plastics
Contact Tel: 0141 201 6394
Enquiries to: dionne.macleod@ggc.scot.nhs.uk

Letter Date: 03/04/2023
Reference: JS/PL
Dictated Date: 14/03/2023
Transcribed Date: 24/03/2023

Wendy McLeish
FLAT 3/2
312 CUMBERNAULD RD
Glasgow
Lanarkshire
G31 3LY

Dear Miss McLeish,

I understand that you have been unable to attend the Plastic Surgery Clinic on two occasions with regard to the lesion on your nose.

Your referring Doctor suspected the may be skin cancer. I would encourage you to reattend your GP and seek further referral for specialist advice.

Kind regards

Yours sincerely

John Scott

Consultant Plastic Surgeon

Electronically Signed: Mr John Scott, Consultant

cc. Dr M.M. Morris ✓
Meadowpark Surgery
568 Alexandra Parade
GLASGOW
G31 3BP

Glasgow City HSCP
Health and Social Care Partnership

Chief Officer
David Williams
MA (Hons) CQSW

Glasgow City Health and Social Care Partnership
Glasgow Psychological Trauma Service
The Anchor
Units G1, G2 & G3
Festival Business Centre
150 Brand Street
Glasgow
G51 1DH

www.glasgow.gov.uk
www.nhsggc.org.uk
Tel: 0141 303 8968

CHI: 250 587 6061
Ref: TM/AM

Date Typed: 15 March 2023

CONFIDENTIAL
Dr S Broadley
Dr Raymond Orr & Parners
568 Alexandra Parade
Glasgow
G31 3BP

Dear Dr Broadley

Re: Wendy McLeish DOB: 25.05.1987
Flat 3/2, 312 Cumbernauld Road, Glasgow G31 3LY

Thank you for considering our service for your patient. My MDT colleagues have discussed this referral with the information available to us. We also tried to reach out to the relevant social worker involved with Ms McLeish but was not able to make contact.

We did not think she met our full criteria for severe CPTSD nor did we think the time was right for exploration work and in depth change based psychological intervention such as re-processing therapy at time of significant stress.

We thought first steps could be supportive such as a listening ear from a counsellor. This could offer a containing space for her to normalise her thoughts and feelings in the context of what appears an acute stress response and subsequent emotional distress. Her current stressors are likely to be exacerbating memories from the past which is reported as ruminative and at times intruding. She may benefit from help to apply coping tools that could stabilise some of the distress and heightened anxiety and we thought Lifelink could be a service that would best match her current mental health need.

Once the current stress regarding the care of her children are resolved then it would be useful to review the need for trauma focused psychological input. We did not think she required a specialist service and as such have declined this referral.

We would be happy to discuss this further our duty days are Monday, Wednesday and Friday.

Yours sincerely

T MacMillan

Tracy MacMillan
Art Psychotherapist
Glasgow Psychological Trauma Service

NHS Greater Glasgow and Clyde

Glasgow City Council

McLeish Wendy CHI: 2505876061

Clinic Letter

Plastic Surgery Unit
84 Castle Street
Glasgow
G4 0SF
0141 211 4000

Dr. MM Morris
Meadowpark Surgery
568 Alexandra Parade
Glasgow
G31 3BP

Main Switchboard:	
Department:	Plastic Surgery Unit
Contact Tel:	0141 201 6394
Enquiries to:	dionne.macleod@ggc.scot.nhs.uk
Letter Date:	14/03/2023
Reference:	NF/PL
Dictated Date:	24/03/2023
Transcribed Date:	14/03/2023

Dear Dr. MM Morris,

Wendy McLeish; D.O.B: 25 May 1987; CHI: 2505876061
FLAT 3/2, 312 CUMBERNAULD RD, Glasgow, Lanarkshire, G31 3LY

Attendance: Specialty - Plastic Surgery; Clinic - GRGPCPS3-GENERIC PLASTICS CONS TUES AM
Date and Time of Appointment - 14/03/2023 09:50

Clinical Comments:
This lady has failed to turn up in the Plastic Surgery Clinic on two occasions regarding the referral for the lesion on her nose.

No further appointments have been sent but the patient has been written to directly to inform of the potential concerns of a skin cancer.

She has been advised to seek medical advice accordingly.

Yours sincerely

John Scott

Consultant Plastic Surgeon

Electronically Signed: Mr John Scott, Consultant

cc.

NHS Greater Glasgow and Clyde OOH Call Incident Report

Call number:	**6911875**	Receive Date:	**9-Mar-2023 13:47**
Patient's Name:	**Wendy Mcleish**		
Date of birth:	**25-May-1987 (35 years)**	Gender:	**F**
Address:	**3/2** **312 Cumbernauld Road** **Glasgow** **G31 3LY**	Current Address:	**3/2** **312 Cumbernauld Road** **Glasgow** **G31 3LY**
Return Contact No:			
Tel No: Mobile No:	**07912 347436**		**07912 347436**
Priority:	**Routine**	Call Origin:	
Received:	**9-Mar-2023 13:47**	Calltype:	**NHS24 Advised (Info Only)**
Advised: Cons start:	**14:01**	Arrived PCC: Cons End:	
Consulting Doctor:		Own doctor:	**Anne McGinley**

CHI Number:
2505876061

NHSD details:

Receptionist:
CHESTPAINS- 5 HOURS AGO
NOA4 Pt advised to contact Practice within 4 Hrs - Info Only
Clinical summary created by: Graeme Adamson (Call Taker Si) () [09/03/2023 14:01:23] Reason for call: CHESTPAINS- 5 HOURS AGOConfirmed Symptom(s): Has Fever Endpoint Management Selected (CT) Chest pain Additional details of problem(s): Heaviness, pressure or tightness in chest Crushing discomfort in chest Constricting band in chest Chest pain for more than 12 hours or pain not constant (supervision sought) Associated Features/Red Flags: Changes in normal skin colour Feeling cold and sweaty Changes in normal breathing pattern Symptom(s) not found: No pain radiating to jaw or upper back or neck or an arm No pain moving through to the back No pain between shoulder blades Not nauseated or vomiting Risk Factor(s): No

travel outside Europe in last 21 days or to an affected country Call Detail(s): Clinical supervisor: HILARY FINDLAY 09:03:2023 13:49:34 ADAMSONG.. DW CS MAGS HONEYMAN KEYWORDS ADVISED.. CONFUSED SINCE WAKING THIS MORNING .BALANCE ISSUES.HX OF LUNG ISSUES AFTER PHNUMONIA 2012 PERSISTENT CHEST INFECTIONS SEEING RESPIRORY CT SCAN BOOKED FOR JULY.LUNG FEEL LIKE CRUSHING TOGETHER.STRUGGLING TO BREATH WHEN WALKING.USING INHALERS.. DW SCN HILARY FINDLAY CHESTPAIN WORSE ON DEEP BREATHING COUGHINH AND MOVING .FEVER.ENCOURAGED TO USE BLUE INHALE DURING CALL.ONLY USED ONCE TODAY.ADVISED PARACETAMOL.GP IN HOURS TO REVIEW.. Outcome: Pt advised to contact Practice within 4 Hrs - Info Only

---

Followups:
None

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC Acute Med Patient Info Protocol

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Medical
GGC Acute Med Patient Info

— **Consultant / receiving practitioner** and/or **specialty clinic**

Acute Assessment - Supplementary Information
SCI Gateway Virtual Location code

— **Hospital** and **hospital address**

Hospital location code.
G135G

Email address
-

Urgency of referral Routine
Date of referral 24-Mar-2023 **Date sent** 24-Mar-2023

PATIENT DETAILS

Surname	McLeish
Forename(s)	Wendy
Title	Miss
Sex	Female
Date of birth	25-May-1987
CHI no.	2505876061
Area of Residence	-

Patient's address

Flat 3.2
312 Cumbernauld Road
Glasgow
G31 3LY

Contact number(s)

Voice:07912347436

1010291277088 Unique Care Pathway Number: 1010291277088

REGISTERED GP DETAILS

Name	Dr Margaret Morris		
GMC code	4305792	GP code	05029
Practice name	Meadowpark Surgery (18882)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)

Voice:0141 554 0464
Facsimile:0141 550 2002

REFERRING GP DETAILS

Name	Dr Matthew Lyons		
GMC code	7134018	GP code	02836
Practice name	Meadowpark Surgery (18882)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)

Voice:0141 554 0464
Facsimile:0141 550 2002

CLINICAL INFORMATION

History of presenting complaint

Presenting complaint

Description: new confusion/ataxia/falls/incontinence

Comment: Many thanks for seeing this 35 year old patient who presents with several weeks of worsening confusion/unsteadiness and falls. She has a history of alcohol and polysubstance misuse but both the patient and her partner are adamant she has been adamant form alcohol and drugs for some time. In the past week she has had 2 falls at home when she was found on the floor by her partner having been faecally incontinent. Today she is markedly ataxic and has poor upper and lower limb coordination. There is normal tone/power/sensation in all 4 limbs. She has a history of sciatcica with left thigh pains but these symptoms are unchanged currently.

She has also been reporting a productive cough in the past week with some green sputum although her chest is clear. She has a background of pneumonia requiring ECMO 10 years ago.

In view of her unusual symptoms I wonder whether she requires some brain imaging in addition to a drug screen.

Kind regards

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history

Pre-existing conditions (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Lumbago with sciatica	-	01-Feb-2023	01-Feb-2023
Asthma	-	12-Sep-2022	12-Sep-2022
Vulnerable child in family	-	16-Mar-2021	16-Mar-2021
Assault by bite of human being	by partner. bite to R ear, blunt head trauma by bottle.	01-Nov-2019	01-Nov-2019
Social worker involved	-	02-Sep-2019	02-Sep-2019
Alcohol problem drinking	-	02-Sep-2019	02-Sep-2019
Pityriasis versicolor	-	18-Feb-2019	18-Feb-2019
Miscarriage	surgical ERPC	03-Sep-2015	03-Sep-2015
Pneumonia due to unspecified organism	(Bilateral)	30-Dec-2011	30-Dec-2011
Adult respiratory distress syndrome	-	30-Nov-2011	30-Nov-2011
Overdose of drug	fluoxetine	22-Sep-2011	22-Sep-2011
Anxiety with depression	-	19-Jul-2011	19-Jul-2011
Death of father	-	31-Jan-2011	31-Jan-2011
Has a tremor	seen by nuerologist 2012, felt to be benign	01-Apr-2007	01-Apr-2007
Death of mother	age 29 MI	01-Jan-1991	01-Jan-1991

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Elective caesarean delivery NOS	26-Feb-2017	26-Feb-2017

Current medication (Active Repeat medication issued within the last 12 months)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Ralvo Medicated Plaster 700 mg	30	30 patch	APPLY ONE PLASTER ONCE DAILY (12 HOURS ON 12 HOURS OFF)	-	28-Feb-2023	22-Mar-2023
Gabapentin Capsules 100 mg	84	84 capsule	TAKE ONE CAPSULE	-	28-Feb-	22-Mar-

			THREE TIMES DAILY		2023	2023
Lamotrigine Tablets 50 mg	28	28 tablet	TAKE ONE TABLET ONCE DAILY (TOTAL DAILY DOSE 75MG)	-	11-Oct-2022	23-Mar-2023
Lamotrigine Tablets 25 mg	28	28 tablet	TAKE ONE TABLET ONCE DAILY (TOTAL DAILY DOSE 75MG)	-	11-Oct-2022	23-Mar-2023
Clenil Modulite Cfc-free inhaler 100 micrograms/actuation	2	2 INHALER	TWO PUFFS TO BE INHALED TWICE A DAY	-	12-Sep-2022	23-Mar-2023
Salbutamol Cfc-free inhaler 100 micrograms/puff	1	1 INHALER	ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY	-	12-Aug-2021	23-Mar-2023

Recent medication (Any medication issued within last 90 days not shown above)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Cyclizine Tablets 50 mg	15	15 tablet	ONE TO BE TAKEN THREE TIMES A DAY	-	16-Mar-2023	16-Mar-2023
Mirtazapine Tablets 15 mg	21	21 tablet	WEEK 1 - TAKE 2 TABLETS ONCE DAILY. WEEK 2 - TAKE ONE TABLET ONCE DAILY FOR 1 WEEK THEN STOP	-	28-Feb-2023	28-Feb-2023
Sertraline Hydrochloride Tablets 50 mg	28	28 tablet	WEEK 3 ONWARDS - TAKE ONE TABLET ONCE DAILY	-	28-Feb-2023	28-Feb-2023
Dihydrocodeine Tablets 30 mg	224	224 tablet	TAKE 2 TABLETS FOUR TIMES DAILY	-	28-Feb-2023	22-Mar-2023
Gabapentin Capsules 100 mg	84	84 capsule	TAKE ONE CAPSULE THREE TIMES DAILY	-	01-Feb-2023	01-Feb-2023
Paracetamol Tablets 500 mg	224	224 tablet	TAKE 2 TABLETS FOUR TIMES DAILY	-	01-Feb-2023	01-Feb-2023
Dihydrocodeine Tablets 30 mg	224	224 tablet	TAKE 2 TABLETS FOUR TIMES DAILY	-	01-Feb-2023	01-Feb-2023
Ralvo Medicated Plaster 700 mg	30	30 patch	APPLY ONE PLASTER ONCE DAILY (12 HOURS ON 12 HOURS OFF)	-	01-Feb-2023	01-Feb-2023
Co-Codamol 30/500 Tablets	50	50 TABLET	TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)	-	23-Jan-2023	23-Jan-2023
Lamotrigine Tablets 50 mg	112	112 TABLET	WEEK 1+2 - TAKE ONE TABLET ONCE DAILY. WEEK 3 ONWARDS - TAKE ONE TABLET ONCE DAILY (TOTAL DAILY DOSE 75MG)	-	10-Oct-2022	10-Oct-2022
Lamotrigine Tablets 25 mg	28	28 tablet	WEEK 3 ONWARDS - TAKE ONE TABLET TWICE DAILY (TOTAL DAILY DOSE 75MG)	-	10-Oct-2022	10-Oct-2022
Fexofenadine Hydrochloride Tablets 180 mg	60	60 tablet	TAKE ONE TABLET UP TO TWICE DAILY	-	10-Oct-2022	10-Oct-2022
Mirtazapine Tablets 45 mg	28	28 tablet	ONE TO BE TAKEN AT NIGHT	-	10-May-2022	16-Feb-2023

Blood Pressure

Date Recorded	Systolic	Diastolic
08-Sep-2022	122	92
21-Sep-2021	120	60
17-Jul-2018	128	77
09-Jul-2015	123	90
08-Aug-2013	116	77

Body Measurements

Date Recorded	Height	Weight	BMI
10-Oct-2022	-	90	-
10-Jun-2021	160.02	82.55	32.24
23-Mar-2021	158	83	33.25
23-Mar-2021	-	83	-
17-Jul-2018	-	-	29.64

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Non-smoker :		08-Sep-2022
Non-smoker :	hx noted, ongoing longstanding anxiety, tremors, seen by neurology and advised related to anxiety, using propranolol, feels doesn't help her, also uses saba for sob up stairs at times, bu- TRUNCATED	07-Oct-2021
Ex-smoker - amount unknown :		12-Aug-2021
Never smoked tobacco:		10-Jun-2021
Never smoked tobacco:		16-Sep-2019
Non-drinker alcohol :		07-Oct-2021
Alcohol consumption, 1 units/week:		10-Jun-2021
Alcohol consumption, 3 units/week:		17-Apr-2012
Light drinker - 1-2u/day:	Alcohol Intake$$.clm - Repeat after an Interval	21-Jan-2010

Clinical warnings

Allergies

Description	Comment	Date recorded
Adverse reaction to propranolol	possible wheeze with this	29-Apr-2016

Additional Support Needs

No known ASN requirements

Additional relevant information

Contact with patient today:Face to Face

Route of Travel:Private

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

Patient will accept cancellation or short notice appointment (within 1-6 days):Yes

Referred By:Referring GP

Electronic Attachment Present:No

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) **Date**

NHS Confidential: Personal data about a patient

PARTNERS
IAN MOIR
LL.B., Dip.L.P., N.P.
PAUL SWEENEY
LL.B., (Hons), Dip.L.P

MOIR AND SWEENEY
LITIGATION
incorporating
Turnbull | McCarron
Limited
SOLICITORS

457 Duke Street
Glasgow, G31 1RD
Tel: 0141 554 3535

879 Govan Road
Glasgow, G51 3DL
Tel: 0141 429 2724

124 Westmuir Street
Glasgow, G31 5BW
Tel: 0141 551 0096

enquiries@moirandsweeney.com
www.moirandsweeney.com

CW/GW/2618/8

Please ask for our Carole-Anne Wilson

10th February 2023

Meadowpark Surgery
568 Alexandra Parade
Dennistoun
Glasgow
G31 3BP

Dear Sirs,

Wendy McLeish (DOB 25.05.87)

We refer to the above and confirm we act on behalf of Ms McLeish in respect of civil court proceedings.

We should be grateful if you would provide us with a copy of Ms McLeish's medical records and enclose a mandate authorising the release of the same.

We thank you for your assistance and look forward to hearing from you in early course.

Yours faithfully,

Moir & Sweeney Litigation

NHS Confidential: Personal data about a patient

[redacted]

MEDICAL MANDATE

I, Wendy McLeish (DOB - 29/05/1987) residing at 3/2, 312 Cumbernauld Road, Glasgow

Hereby authorise

Dr Broadly

Address Meadow Park Surgery.

To release details from my medical records as requested by my solicitors, Messrs Moir and Sweeney Litigation , 124 Westmuir Street, Glasgow, G31 5BW

Signed W N Leish Date 30/11/23

Acute Services Division

Diagnostics Directorate

Radiology Department
(Ground Floor QEB, 16 Alexandra Parade)
Glasgow Royal Infirmary
84 Castle Street
Glasgow
G4 0SF

NHS
Greater Glasgow and Clyde

Dr Margaret Morris
Meadowpark Surgery
568 Alexandra Parade
Glasgow
G31 3BP

Tel: 0141 242 9722
Date: 07-Feb-2023
CHI No: 2505876061
Hosp Ref: G107H
Page No: **Page 1 of 1**

Dear Doctor,

We would like to inform you that the patient below has failed to arrive for a radiology appointment.

Patient: Miss Wendy McLeish
Date of birth: 25-May-1987
CHI No: 2505876061
Patient Address:
FLAT 3/2
312 CUMBERNAULD RD
GLASGOW
LANARKSHIRE
G31 3LY
Patient GP: Dr Margaret Morris Practice: Meadowpark Surgery
Referrer: Dr Margaret Morris Source: Meadowpark Surgery

For: **a Chest x-ray**
On: **Monday 06 February 2023 at 9:10 am**
At: **Glasgow Royal Infirmary, Radiology Department**

Please note that in some cases DNAs are due to incorrect patient address details on the request form.
We are concerned that your patient still requires their examination.
If this is the case, could you please confirm this and re-request in the normal manner.

We have notified your patient of this DNA.

Yours sincerely

Diagnostics Administrator

McLeish Wendy CHI: 2505876061

Clinic Letter

NHS
Greater Glasgow and Clyde

Glasgow Royal Infirmary
Alexandra Parade
Glasgow
G31 2ER
0141 211 4000

Respiratory Medicine
0141 201 3831
Fiona.maclellan@ggc.scot.nhs.uk

Dr. MM Morris
Meadowpark Surgery
568 Alexandra Parade
Glasgow
G31 3BP

Main Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date: 18/01/2023
Reference: AW/LMF
Dictated Date: 24/01/2023
Transcribed Date: 24/01/2023

Dear Dr. MM Morris,

Wendy McLeish; D.O.B: 25 May 1987; CHI: 2505876061
FLAT 3/2, 312 CUMBERNAULD RD, Glasgow, Lanarkshire, G31 3LY

Attendance: Specialty - Respiratory Medicine; Clinic - GRAWRE5-DR A WRIGHT RESP WED AM
Date and Time of Appointment - 18/01/2023 09:00

Requested Out-patient Investigations:
HRCT

Follow Up: Respiratory Clinic Dr Wright 19 July 2023 at 9.20 am

Clinical Comments:
Diagnoses:

1. Previous intubation and ventilation and ECMO for severe pneumonia
2. Non-smoker

Plan from Clinic:

1. HRCT scan – requested
2. PFT's

Thank you for referring the above patient who I reviewed face to face on 18 January 2023. Apologies that the letter was not dictated at the time of clinic.

As you will be aware Wendy has a severe respiratory history in that about ten years ago she was intubated and ventilated due to severe type 1 respiratory failure secondary to a pneumonia. She was actually transferred to Leicester where she had ECMO.

Over the years Wendy has not been largely troubled by her chest however she now is. In October she had treatment for pneumonia and she feels that since then she has just been troubled by ongoing cough and sputum. She has had four sources of antibiotics for this. I cannot see any recent sputum samples.

She also feels very breathless doing any sort of walking, however on better days can get out to the shops. She is able to sleep through the night and does not have any nocturnal symptoms.

As a teenager she had the odd cigarette, however was not a smoker. She does not vape or use any e-cigarettes. She does not have any pets and is allergic to cats. She has hay fever.

In clinic she was comfortable at rest, there was no finger clubbing. Auscultation did reveal some creps and I wonder whether or not her previously severe pneumonia has resulted in some bronchiectasis. I have therefore booked an HRCT scan and we are still awaiting PFT's.

Wendy would like me to clarify that she has never been a regular smoker. The referral does point towards a smoking history however she says that she said she only ever had the odd cigarette as a teenager.

Yours sincerely

Angela Wright

Consultant Respiratory Physician

Electronically Signed: Dr Angela Wright, Consultant

cc.

McLeish Wendy CHI: 2505876061

Emergency Attendance Letter

NHS Greater Glasgow and Clyde

Emergency Department
Glasgow Royal Infirmary
Alexandra Parade
Glasgow
Lanarkshire
G31 2ER

Dept. Contact Details:
Tel:
Fax:
Email:

Date Completed: 14/01/2023

Consultant: Dr Christine Aiken

MM Morris
Meadowpark Surgery
568 Alexandra Parade
Glasgow
Glasgow
G31 3BP

Dear MM Morris

Re: **McLeish Wendy** DOB: **25/05/1987** CHI: **2505876061**
FLAT 3-2
Glasgow G31 3LY

Attended on: **11/01/2023 at 11:15 hrs.** Departed on: **11/01/2023 at 16:34 hrs.**
Discharge Type: **01a - Discharge with no follow up** Destination: **Private residence**
Previous ED Attendance in last 12 months: **0**

Presenting complaint
medical - letter on Portal. cough and pleuritic chest pain ? pe hx pneumonia

Nursing Assessment:
2/12 of ongoing cvhest infections has had 4 courses of abx with no improvement. had CAP 10 years ago with ITU admission. under respiratory. Worsing SOB and CP this AM. Reduced SPO2 at GP normal in triage. appears vague PMH Asthma, Bronchitis

Investigations in ED:

1. Full Blood Count	**2. Coagulation screen**	**3. Urea and Electrolytes**
4. Glucose	**5. LFT**	**6. Bone Profile**
7. CRP	**8. D - Dimer**	**9. Troponin I hs**
10. Coagulation screen	**11. XR Chest**	

McLeish Wendy CHI: 2505876061

Diagnosis:

Diagnosis	Side	Site
Other Chest Pain		

Procedures: **None**

Immunisations: **None**

Dispensed Medication: **Please see Clinician Notes**

Clinician Notes:

Dear Doctor, Mrs McLeish presented to the AAU on the 11/01/23 with SOB and right anterior and central stabbing chest pain. ECG: NSR, old incomplete RBBB and old TWI in V1,V2. D-Dimer negative; Troponin negative; remaining bloods unremarkable. CXR clear. Pain likely MSK Patient medically fit for discharge, with worsening advice. Thank you very much for your ongoing care of this patient in the community. Kindest regards AAU GRI

Followup :

Highly sensitive: N Consent for sharing withheld: N

Yours sincerely,
Thea Rodig
Doctor

Copies to:

1. MM Morris (GP)

School Address:

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC Psychological Trauma Service Referral Protocol

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Psychological Trauma Service
GGC Psychological Trauma

Other Mental Health Services
SCI Gateway Virtual Location Code
NHS Greater Glasgow & Clyde

Consultant / receiving practitioner and/or **specialty clinic**

Hospital and **hospital address**

Hospital location code.
G005G

Email address
-

Urgency of referral	ROUTINE		
Date of referral	02-Mar-2023	**Date sent**	02-Mar-2023

PATIENT DETAILS

Surname	McLeish
Forename(s)	Wendy
Title	Miss
Sex	Female
Date of birth	25-May-1987
CHI no.	2505876061
Area of Residence	-

Patient's address

Flat 3.2
312 Cumbernauld Road
Glasgow
G31 3LY

Contact number(s)

Voice:07912347436

1010289088934

Unique Care Pathway Number: 1010289088934

REGISTERED GP DETAILS

Name	Dr Margaret Morris		
GMC code	4305792	GP code	05029
Practice name	Meadowpark Surgery (18882)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)

Voice:0141 554 0464
Facsimile:0141 550 2002

REFERRING GP DETAILS

Name	Dr. Samuel Broadley		
GMC code	7477241	GP code	06807
Practice name	Meadowpark Surgery (46625)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)

Voice:0141 554 0464

CLINICAL INFORMATION

History of presenting complaint

Presenting complaint

Description: Childhood trauma: PTSD symptoms

Comment: Dear Colleague,

This 35-year old patient presents with multiple-decades' history of anxiety symptoms: Anxiousness, panic episodes, poor sleep, racing thoughts, irritability. These are associated with bouts of low mood with anhedonia. She denies any thoughts of self-harm or suicide and she feels safe and well-supported.

She has been prescribed multiple anxiolytic, anti-depressant and mood-stabilising therapies and she is currently taking Lamotrigine 75mg (once daily) and Mirtazepine (30mg at night).

She experiences significant ongoing social stressors: Wendy is going through a child custody battle with her ex-partner and receives Social Work support. In the past couple of months over this period, Wendy has been ruminating and reliving traumatic events from her early life, experiencing them "like real" and "hears them." She becomes acutely agitated and develops adrenalin-associated panic episodes that can come on at any time and have a dramatic impact on her daily functioning. She reports symptoms of increased paranoid thoughts and hypervigilance - nil pervasive delusional thoughts.

On discussion (28th February 2023), she disclosed that at a young age, she was repeatedly physically assaulted by her Mum's Sister with a baseball bat. Much later in childhood, she recalled finding her Dad unwell and lying out in the community having suffered an overdose. She also reports ruminating on traumatic episodes in childhood, when she found her friend dead at a young age from unknown cause.

On assessment: Wendy demonstrated excellent insight into the impact of her childhood trauma and her thoughts and feelings; her thoughts were organised with no psychotic features; she was not intoxicated; she was very tearful and became agitated discussing these previous traumatic episodes and the impact on her then but also reliving these in adulthood and ongoing hypervigilant episodes.

Wendy certainly demonstrates multiple symptoms that are possibly indicative of PTSD in context of her symptoms. I would be grateful if given her vulnerability and ongoing mental health issues for your further specialist support.

Many thanks,
Dr Samuel Broadley

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history

Pre-existing conditions (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Lumbago with sciatica	-	01-Feb-2023	01-Feb-2023
Asthma	-	12-Sep-2022	12-Sep-2022
Vulnerable child in family	-	16-Mar-2021	16-Mar-2021
Assault by bite of human being	by partner. bite to R ear, blunt head trauma by bottle.	01-Nov-2019	01-Nov-2019
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Death of father	-	31-Jan-2011	31-Jan-2011
Has a tremor	seen by nuerologist 2012, felt to be benign	01-Apr-2007	01-Apr-2007

Death of mother	age 29 MI	01-Jan-1991	01-Jan-1991

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Elective caesarean delivery NOS	26-Feb-2017	26-Feb-2017

Current medication (Active Repeat medication issued within the last 12 months)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
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Fexofenadine Hydrochloride Tablets 180 mg	60	60 tablet	TAKE ONE TABLET UP TO TWICE DAILY	-	10-Oct-2022	10-Oct-2022

Clarithromycin Tablets 500 mg	10	10 TABLET	ONE TO BE TAKEN TWICE A DAY FOR 5 DAYS	-	23-Sep-2022	23-Sep-2022
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23-Mar-2021	-	83	-
17-Jul-2018	-	-	29.64

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Description/Question	Result/Comment	Date
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Non-smoker :	hx noted, ongoing longstanding anxiety, tremors, seen by neurology and advised related to anxiety, using propranolol, feels doesn't help her, also uses saba for sob up stairs at times, bu- TRUNCATED	07-Oct-2021
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Never smoked tobacco:		10-Jun-2021
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Alcohol consumption, 3 units/week:		17-Apr-2012
Light drinker - 1-2u/day:	Alcohol Intake$$.clm - Repeat after an Interval	21-Jan-2010

Clinical warnings

Allergies

Description	Comment	Date recorded
Adverse reaction to propranolol	possible wheeze with this	29-Apr-2016

Additional Support Needs

No known ASN requirements

Additional relevant information

Has this referral been discussed with the client:yes

Agencies/Services Involved:Social work involvement in child custody process

Risk of Suicide:No

Past history of suicide attempt:Don't Know
Risk of deliberate self harm:No
Is patient responsible for children?:Yes
Risk to others including children/dependents/clinicians/other:No
Risk from others:No
Risk of Self Neglect:No
Current substance misuse issues:No
Is the client an asylum seeker or refugee:No
Is the client a victim of trafficking?:No
OK to send correspondence to home address?:Yes
Patient will accept any site:Yes
Patient will accept cancellation or short notice appointment (within 1-6 days):Yes
Referred By:Referring GP
Electronic Attachment Present:No

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) **Date**

Acute Services Division

Diagnostics Directorate

Radiology Department
(Ground Floor QEB, 16 Alexandra Parade)
Glasgow Royal Infirmary
84 Castle Street
Glasgow
G4 0SF

NHS
Greater Glasgow and Clyde

Dr Graham Strain
Meadowpark Surgery
568 Alexandra Parade
Glasgow
G31 3BP

Tel: 0141 242 9722
Date: 06-Jan-2023
CHI No: 2505876061
Hosp Ref: G107H
Page No: **Page 1 of 1**

Dear Dr Graham Strain,

The following radiology request has been **RETURNED** for the reason below.

Patient: Miss Wendy McLeish
Date of birth: 25-May-1987
CHI No: 2505876061
Date of Request: 18-Nov-2022

Examination(s) Requested: XR Chest

Reason for Returning
Booking Notes: This request has been identified as a duplicate and we are therefore returning this to you. new request was submitted and patient will be contacted.

In many cases additional information is all that is required. Can you please therefore review this patient and either submit another referral form, giving additional information or contact a Consultant Radiologist for guidance.

Yours sincerely

Diagnostics Administrator

McLeish Wendy CHI: 2505876061

Clinic Letter

Plastic Surgery Unit
84 Castle Street
Glasgow
G4 0SF
0141 211 4000

Dr. MM Morris
Meadowpark Surgery
568 Alexandra Parade
Glasgow
G31 3BP

Main Switchboard:	0141 211 4000
Department:	Plastic Surgery Unit
Contact Tel:	0141 201 6405
Enquiries to:	Sheryl.Noble@ggc.scot.nhs.uk
Letter Date:	13/12/2022
Reference:	NF/MG
Dictated Date:	13/12/2022
Transcribed Date:	20/01/2023

Dear Dr. MM Morris,

Wendy McLeish; D.O.B: 25 May 1987; CHI: 2505876061
FLAT 3/2, 312 CUMBERNAULD RD, Glasgow, Lanarkshire, G31 3LY

Attendance: Specialty - Plastic Surgery; Clinic - GRGPCPS3-GENERIC PLASTICS CONS TUES AM
Date and Time of Appointment - 13/12/2022 08:30

Clinical Comments:
Diagnosis: Suspicious lesion side of nose.

Wendy McLeish was scheduled to be seen in the See & Treat Clinic at Glasgow Royal Infirmary today regarding her crusted lesion on the side of her nose. She did not attend this appointment. We will send her one further appointment.

Yours sincerely

Mr Neil Fairbairn

Consultant Plastic Surgeon

Electronically Signed: Mr Neil Fairbairn, Consultant

cc.

Glasgow Royal Infirmary: Diagnostic Imaging Report

Patient	WENDY MCLEISH	**Address**	FLAT 3-2, 312 CUMBERNAULD RD, GLASGOW, LANARKSHIRE, G31 3LY
DOB	25/05/1987	**CHI No.**	2505876061
Ref. Source	Meadowpark Surgery	**Practice Code**	46625
Referrer	Dr Samuel Broadley	**Exam Date**	17/11/2022 12:48

Report Summary

Clinical History :
persistent cough - ongoing left basal changes post-consolidation on 19th Oct - discussed with respiraotry who advised further repeat x-ray please 4-6 weeks later (from date commencing 16th November)

XR Chest

XR Chest :
Compared to 19/10/2022 there has been further clearance of the left lower zone.
Appearances in keeping with slowly resolving infective/inflammatory change.
There are no additional significant new or suspicious findings.

Last verified by: 3488188 (Dr Sean Kelly)
Reported by: 3488188 (Dr Sean Kelly)

Respiratory Medicine
Glasgow Royal Infirmary
Alexandra Parade
Glasgow
G31 2ER

04/11/2022

Dr S Broadley
Meadowpark Surgery
568 Alexandra Parade
Glasgow
G31 3BP

Dear Dr S Broadley
CHI Number: 2505876061
Patient Name: Wendy McLeish
Referral Date: 04/11/2022

Advice Response to recent Referral:

Thank you for your letter about this patient.

I can see that she is already on the waiting list for a respiratory appointment. As a 35 year old non smoker (smoking status not entirely clear from SCI Gateway referral) her overall risk of lung cancer is low and the CXR does suggest improvement a 5 weeks after the first one, so I would suggest in the interim period before her clinic appointment that you organise a further CXR in about 4-6 weeks.

Kind regards

Yours Sincerely

Dr Brian Choo-Kang

User ID: Brian Choo-Kang

OP Advice Letter

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC Acute Med Patient Info Protocol

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Medical
GGC Acute Med Patient Info

— **Consultant / receiving practitioner** and/or **specialty clinic**

Acute Assessment - Supplementary Information
SCI Gateway Virtual Location code

— **Hospital** and **hospital address**

Hospital location code.
G135G

Email address
-

Urgency of referral	Routine		
Date of referral	11-Jan-2023	**Date sent**	11-Jan-2023

PATIENT DETAILS

Surname	McLeish
Forename(s)	Wendy
Title	Miss
Sex	Female
Date of birth	25-May-1987
CHI no.	2505876061
Area of Residence	-

Patient's address

Flat 3.2
312 Cumbernauld Road
Glasgow
G31 3LY

Contact number(s)

Voice:07912347436

101028407080X

Unique Care Pathway Number: 101028407080X

REGISTERED GP DETAILS

Name	Dr Margaret Morris		
GMC code	4305792	GP code	05029
Practice name	Meadowpark Surgery (18882)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)

Voice:0141 554 0464
Facsimile:0141 550 2002

REFERRING GP DETAILS

Name	Dr. Sabha Ali		
GMC code	6156945	GP code	08541
Practice name	Meadowpark Surgery (46625)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)

Voice:0141 554 0464

CLINICAL INFORMATION

History of presenting complaint

Presenting complaint

Description: SOB. chest pain

Comment: This patient is c/o R sided chest pain since last nght. It is worse when taking a breath in. There is no blood in her sputum. She is c/o breathlessness. She has suffered from pneumonia in the past. There no no vomiting. She feels wheezy.
o/e talking in sentences with ease. sats 95% p-115. no bovius creps R side. Tender R side of chest wall and upper abdomen. Reducd sats and tachycarida ? P.e ? LRTI.
Many Thanks. for seeing her, Dr S Ali

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history

Pre-existing conditions (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Asthma	-	12-Sep-2022	12-Sep-2022
Vulnerable child in family	-	16-Mar-2021	16-Mar-2021
Assault by bite of human being	by partner. bite to R ear, blunt head trauma by bottle.	01-Nov-2019	01-Nov-2019
Social worker involved	-	02-Sep-2019	02-Sep-2019
Alcohol problem drinking	-	02-Sep-2019	02-Sep-2019
Pityriasis versicolor	-	18-Feb-2019	18-Feb-2019
Miscarriage	surgical ERPC	03-Sep-2015	03-Sep-2015
Pneumonia due to unspecified organism	(Bilateral)	30-Dec-2011	30-Dec-2011
Adult respiratory distress syndrome	-	30-Nov-2011	30-Nov-2011
Overdose of drug	fluoxetine	22-Sep-2011	22-Sep-2011
Anxiety with depression	-	19-Jul-2011	19-Jul-2011
Death of father	-	31-Jan-2011	31-Jan-2011
Has a tremor	seen by nuerologist 2012, felt to be benign	01-Apr-2007	01-Apr-2007
Death of mother	age 29 MI	01-Jan-1991	01-Jan-1991

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Elective caesarean delivery NOS	26-Feb-2017	26-Feb-2017

Current medication (Active Repeat medication issued within the last 12 months)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Lamotrigine Tablets 50 mg	28	28 tablet	TAKE ONE TABLET ONCE DAILY (TOTAL DAILY DOSE 75MG)	-	11-Oct-2022	10-Nov-2022
Lamotrigine Tablets 25 mg	28	28 tablet	TAKE ONE TABLET ONCE DAILY (TOTAL DAILY DOSE 75MG)	-	11-Oct-2022	10-Nov-2022
Clenil Modulite Cfc-free inhaler 100 micrograms/actuation	2	2 INHALER	TWO PUFFS TO BE INHALED TWICE A DAY	-	12-Sep-2022	10-Nov-2022
Mirtazapine Tablets 45 mg	28	28 tablet	ONE TO BE TAKEN AT NIGHT	-	10-May-2022	10-Nov-2022
Salbutamol Cfc-free inhaler 100 micrograms/puff	1	1 INHALER	ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR	-	12-Aug-2021	10-Nov-2022

TIMES A DAY

Recent medication (Any medication issued within last 90 days not shown above)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Lamotrigine Tablets 50 mg	112	112 TABLET	WEEK 1+2 - TAKE ONE TABLET ONCE DAILY. WEEK 3 ONWARDS - TAKE ONE TABLET ONCE DAILY (TOTAL DAILY DOSE 75MG)	-	10-Oct-2022	10-Oct-2022
Lamotrigine Tablets 25 mg	28	28 tablet	WEEK 3 ONWARDS - TAKE ONE TABLET TWICE DAILY (TOTAL DAILY DOSE 75MG)	-	10-Oct-2022	10-Oct-2022
Fexofenadine Hydrochloride Tablets 180 mg	60	60 tablet	TAKE ONE TABLET UP TO TWICE DAILY	-	10-Oct-2022	10-Oct-2022
Clarithromycin Tablets 500 mg	10	10 TABLET	ONE TO BE TAKEN TWICE A DAY FOR 5 DAYS	-	23-Sep-2022	23-Sep-2022
Prednisolone Tablets 5 mg	40	40 TABLET	EIGHT TO BE TAKEN IN THE MORNING	-	12-Sep-2022	12-Sep-2022
Clarithromycin Tablets 500 mg	10	10 TABLET	ONE TO BE TAKEN TWICE A DAY FOR 5 DAYS	-	12-Sep-2022	12-Sep-2022
Amoxicillin Capsules 500 mg	15	15 CAPSULE	ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS	-	08-Sep-2022	08-Sep-2022
Benzydamine Hydrochloride Spray Sugar Free 0.15 %	1	1 SPRAY	USE 4-8 SPRAYS ONTO AFFECTED AREA EVERY 90 MINUTES TO 3 HOURS	-	08-Sep-2022	08-Sep-2022
Lamotrigine Tablets 25 mg	56	56 tablet	START AT ONE DAILY FOR 2 WEEKS. INCREASE DOSE BY 25MG EVERY 2 WEEKS UNTIL YOU REACH A DOSE OF 75MG TWICE DAILY (3 IN THE MORNING AND 3 AT NIGHT)	-	06-Sep-2022	06-Sep-2022
Propranolol Hydrochloride Tablets 40 mg	84	84 TABLET	ONE TO BE TAKEN THREE TIMES A DAY	-	10-May-2022	27-Jul-2022

Blood Pressure

Date Recorded	Systolic	Diastolic
08-Sep-2022	122	92
21-Sep-2021	120	60
17-Jul-2018	128	77
09-Jul-2015	123	90
08-Aug-2013	116	77

Body Measurements

Date Recorded	Height	Weight	BMI
10-Oct-2022	-	90	-
10-Jun-2021	160.02	82.55	32.24
23-Mar-2021	158	83	33.25
23-Mar-2021	-	83	-
17-Jul-2018	-	-	29.64

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Non-smoker :		08-Sep-2022
Non-smoker :	hx noted, ongoing longstanding anxiety, tremors, seen by neurology and advised related to anxiety, using propranolol, feels doesn't help her, also uses saba for sob up	07-Oct-

	stairs at times, bu- TRUNCATED	2021
Ex-smoker - amount unknown :		12-Aug-2021
Never smoked tobacco:		10-Jun-2021
Never smoked tobacco:		16-Sep-2019
Non-drinker alcohol :		07-Oct-2021
Alcohol consumption, 1 units/week:		10-Jun-2021
Alcohol consumption, 3 units/week:		17-Apr-2012
Light drinker - 1-2u/day:	Alcohol Intake$$.clm - Repeat after an Interval	21-Jan-2010

Clinical warnings

Allergies

Description	Comment	Date recorded
Adverse reaction to propranolol	possible wheeze with this	29-Apr-2016

Additional Support Needs

No known ASN requirements

Additional relevant information

Contact with patient today:Face to Face
Route of Travel:Private
OK to send correspondence to home address?:Yes
Patient will accept any site:Yes
Patient will accept cancellation or short notice appointment (within 1-6 days):Yes
Referred By:Referring GP
Electronic Attachment Present:No

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) **Date**

McLeish Wendy CHI: 2505876061

Clinical letter - GP:

NHS
Greater Glasgow and Clyde

Glasgow Royal Infirmary
Alexandra Parade
Glasgow
G31 2ER
Main Switchboard: 0141 211 4000
Department: Respiratory Medicine
Contact Tel: 0141 201 3831
Enquiries to: Dr Bayes' Secretary
Letter Date: 28/10/2022
Reference: HB/MAC
Dictated Date: 14/10/2022
Transcribed Date: 14/10/2022

Dr. MM Morris
Meadowpark Surgery
568 Alexandra Parade
Glasgow
G31 3BP

Dear Dr Morris ,

Wendy McLeish; D.O.B: 25/05/1987; CHI: 2505876061
FLAT 3-2, 312 CUMBERNAULD RD, Glasgow, Lanarkshire, G31 3LY

Thank you for your referral regarding the above 35 year old lady with cough and recent lower respiratory tract infections/pneumonia on chest x-ray. I have organised for her to be reviewed at the Respiratory Clinic but it is likely that this represents post infective cough. It would be worthwhile doing an updated chest x-ray at 4-6 weeks to ensure resolution of the changes at her left base. This was the suggestion in the report and you may already have this in hand. I will leave this with you and obviously if there is any concern on the repeat chest x-ray, please do not hesitate to contact us.

Yours sincerely

DR HANNAH BAYES

Consultant Respiratory Physician

Electronically Signed: Dr Hannah Bayes, Consultant

cc.

Glasgow Royal Infirmary: Diagnostic Imaging Report

Patient	WENDY MCLEISH	**Address**	FLAT 3-2, 312 CUMBERNAULD RD, GLASGOW, LANARKSHIRE, G31 3LY
DOB	25/05/1987	**CHI No.**	2505876061
Ref. Source	Meadowpark Surgery	**Practice Code**	46625
Referrer	Dr Matthew Lyons	**Exam Date**	19/10/2022 10:09

Report Summary

Clinical History :
repeat CXR in 4-6 weeks please as per previous report. bibasal opacification L>R. ?resolution of infection.

XR Chest

Chest x-ray
Comparison 14 September 2022
Mediastinum unremarkable
Asymmetry left base has improved but not resolved
Recommend further followup
Dr R Davies Medica Reporting
GMC 3588040
If you are a clinician and have a query on this report, please call Medica on 01424 377 901 or email clinical@medicagroup.co.uk

Last verified by: 3588040 (Dr Russell Davies)
Reported by: 3588040 (Dr Russell Davies)

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC General Referral or Advice Protocol (Glasgow, vR20.5)

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Respiratory Medicine
GGC General Referral or Advice

— **Consultant / receiving practitioner** and/or **specialty clinic**

Glasgow Royal Infirmary
84 Castle Street
Glasgow
G4 0SF

— **Hospital** and **hospital address**

Hospital location code.
G107H

Email address
-

Urgency of referral Urgent - Suspected Cancer
Date of referral 03-Nov-2022 **Date sent** 03-Nov-2022

PATIENT DETAILS

Surname	McLeish
Forename(s)	Wendy
Title	Miss
Sex	Female
Date of birth	25-May-1987
CHI no.	2505876061
Area of Residence	-

Patient's address

Flat 3.2
312 Cumbernauld Road
Glasgow
G31 3LY

Contact number(s)
Voice:07912347436

101027872658X Unique Care Pathway Number: 101027872658X

REGISTERED GP DETAILS

Name	Dr Margaret Morris		
GMC code	4305792	GP code	05029
Practice name	Meadowpark Surgery (18882)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)
Voice:0141 554 0464
Facsimile:0141 550 2002

REFERRING GP DETAILS

Name	Dr. Samuel Broadley		
GMC code	7477241	GP code	06807
Practice name	Meadowpark Surgery (46625)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)
Voice:0141 554 0464

CLINICAL INFORMATION

History of presenting complaint

Presenting complaint

Description: Ongoing persistent cough post-LRTI - persistent post-consolidative changes left base

Comment: Thank you for your advice regarding this patient's ongoing persistent cough post-treatment for LRTI + routine specialist review of this. I am writing to update that her repeat CXR has been reported with "asymmetry left base has improved but not resolved". I would be grateful for your specialist assessment as appropriate in light of this finding - please let me know if you require any further information from original referral. Many thanks

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history

Pre-existing conditions (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Asthma	-	12-Sep-2022	12-Sep-2022
Vulnerable child in family	-	16-Mar-2021	16-Mar-2021
Assault by bite of human being	by partner. bite to R ear, blunt head trauma by bottle.	01-Nov-2019	01-Nov-2019
Social worker involved	-	02-Sep-2019	02-Sep-2019
Alcohol problem drinking	-	02-Sep-2019	02-Sep-2019
Pityriasis versicolor	-	18-Feb-2019	18-Feb-2019
Miscarriage	surgical ERPC	03-Sep-2015	03-Sep-2015
Pneumonia due to unspecified organism	(Bilateral)	30-Dec-2011	30-Dec-2011
Adult respiratory distress syndrome	-	30-Nov-2011	30-Nov-2011
Overdose of drug	fluoxetine	22-Sep-2011	22-Sep-2011
Anxiety with depression	-	19-Jul-2011	19-Jul-2011
Death of father	-	31-Jan-2011	31-Jan-2011
Has a tremor	seen by nuerologist 2012, felt to be benign	01-Apr-2007	01-Apr-2007
Death of mother	age 29 MI	01-Jan-1991	01-Jan-1991

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Elective caesarean delivery NOS	26-Feb-2017	26-Feb-2017

Current medication (Active Repeat medication issued within the last 12 months)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Clenil Modulite Cfc-free inhaler 100 micrograms/actuation	2	2 INHALER	TWO PUFFS TO BE INHALED TWICE A DAY	-	12-Sep-2022	12-Sep-2022
Mirtazapine Tablets 45 mg	28	28 tablet	ONE TO BE TAKEN AT NIGHT	-	10-May-2022	11-Oct-2022
Salbutamol Cfc-free inhaler 100 micrograms/puff	1	1 INHALER	ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY	-	12-Aug-2021	11-Oct-2022

Recent medication (Any medication issued within last 90 days not shown above)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Lamotrigine Tablets 50 mg	28	28 tablet	TAKE ONE TABLET ONCE DAILY (TOTAL DAILY DOSE 75MG)	-	11-Oct-2022	11-Oct-2022

Lamotrigine Tablets 25 mg	28	28 tablet	TAKE ONE TABLET ONCE DAILY (TOTAL DAILY DOSE 75MG)	-	11-Oct-2022	11-Oct-2022
Lamotrigine Tablets 50 mg	112	112 TABLET	WEEK 1+2 - TAKE ONE TABLET ONCE DAILY. WEEK 3 ONWARDS - TAKE ONE TABLET ONCE DAILY (TOTAL DAILY DOSE 75MG)	-	10-Oct-2022	10-Oct-2022
Lamotrigine Tablets 25 mg	28	28 tablet	WEEK 3 ONWARDS - TAKE ONE TABLET TWICE DAILY (TOTAL DAILY DOSE 75MG)	-	10-Oct-2022	10-Oct-2022
Fexofenadine Hydrochloride Tablets 180 mg	60	60 tablet	TAKE ONE TABLET UP TO TWICE DAILY	-	10-Oct-2022	10-Oct-2022
Clarithromycin Tablets 500 mg	10	10 TABLET	ONE TO BE TAKEN TWICE A DAY FOR 5 DAYS	-	23-Sep-2022	23-Sep-2022
Prednisolone Tablets 5 mg	40	40 TABLET	EIGHT TO BE TAKEN IN THE MORNING	-	12-Sep-2022	12-Sep-2022
Clarithromycin Tablets 500 mg	10	10 TABLET	ONE TO BE TAKEN TWICE A DAY FOR 5 DAYS	-	12-Sep-2022	12-Sep-2022
Amoxicillin Capsules 500 mg	15	15 CAPSULE	ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS	-	08-Sep-2022	08-Sep-2022
Benzydamine Hydrochloride Spray Sugar Free 0.15 %	1	1 SPRAY	USE 4-8 SPRAYS ONTO AFFECTED AREA EVERY 90 MINUTES TO 3 HOURS	-	08-Sep-2022	08-Sep-2022
Lamotrigine Tablets 25 mg	56	56 tablet	START AT ONE DAILY FOR 2 WEEKS. INCREASE DOSE BY 25MG EVERY 2 WEEKS UNTIL YOU REACH A DOSE OF 75MG TWICE DAILY (3 IN THE MORNING AND 3 AT NIGHT)	-	06-Sep-2022	06-Sep-2022
Amoxicillin Capsules 500 mg	15	15 CAPSULE	ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS	-	15-Jul-2022	15-Jul-2022
Hyoscine Butylbromide Tablets 10 mg	56	56 tablet	ONE TO BE TAKEN THREE TIMES A DAY	-	15-Jul-2022	15-Jul-2022
Propranolol Hydrochloride Tablets 40 mg	84	84 TABLET	ONE TO BE TAKEN THREE TIMES A DAY	-	10-May-2022	27-Jul-2022

Blood Pressure

Date Recorded	Systolic	Diastolic
08-Sep-2022	122	92
21-Sep-2021	120	60
17-Jul-2018	128	77
09-Jul-2015	123	90
08-Aug-2013	116	77

Body Measurements

Date Recorded	Height	Weight	BMI
10-Oct-2022	-	90	-
10-Jun-2021	160.02	82.55	32.24
23-Mar-2021	158	83	33.25
23-Mar-2021	-	83	-
17-Jul-2018	-	-	29.64

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Non-smoker :		08-Sep-2022

Non-smoker :	hx noted, ongoing longstanding anxiety, tremors, seen by neurology and advised related to anxiety, using propranolol, feels doesn't help her, also uses saba for sob up stairs at times, bu- TRUNCATED	07-Oct-2021
Ex-smoker - amount unknown :		12-Aug-2021
Never smoked tobacco:		10-Jun-2021
Never smoked tobacco:		16-Sep-2019
Non-drinker alcohol :		07-Oct-2021
Alcohol consumption, 1 units/week:		10-Jun-2021
Alcohol consumption, 3 units/week:		17-Apr-2012
Light drinker - 1-2u/day:	Alcohol Intake$$.clm - Repeat after an Interval	21-Jan-2010

Clinical warnings

Allergies

Description	Comment	Date recorded
Adverse reaction to propranolol	possible wheeze with this	29-Apr-2016

Additional Support Needs

No known ASN requirements

Additional relevant information

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

Patient will accept cancellation or short notice appointment (within 1-6 days):Yes

Referred By:Referring GP

Electronic Attachment Present:No

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) **Date**

PRIVATE AND CONFIDENTIAL
Scottish Ambulance Service
National Headquarters
1 South Gyle Crescent
Edinburgh
EH12 9EB
Tel - 0131 314 0000

Date : 14 Oct 2022
CHI Number : 2505876061

Dear Doctor, (Practice Code - 46625)

Wendy McLeish, 25/05/87 , 3/2 312 CUMBERNAULD ROAD DENNISTON GLASGOW

Wendy McLeish, was attended by ambulance crew on 14 Oct 2022 but was not conveyed to hospital.

The full electronic patient record is also attached for your information. If you require further information please contact sas.gpepr2@nhs.scot , stating the Incident number CR009165669.

Yours sincerely,

Scottish Ambulance Service

TerraPACE REPORT			
Time	01:03	Date	14/10/2022

PATIENT AND INCIDENT DETAILS	
Incident number	CR009165669
Name	Wendy McLeish
CHI Number	2505876061
Date of Birth	1987-05-25
Additional Comments and Observations	Attended 999 call @ 00.22 for 35 yr old female. O/a met by pt and pt partner. Pt alert and able to talk in sentences. Pt advised that has been diagnosed with pneumonia and is awaiting chest-xray and has to provide sputum sample to GP. Pt advised has been feeling unwell tonight, called NHS 24 who then advised for ambulance to attend. O/e full chest examination carried out and noted. Pt advised chest felt tight when breathing in and out but no chest pain. ECG NSR, BP 142/96, PR 101, RR 14, Sp02 97%, temp 37.0, BM 5.1, GCS 15. Pt advised did not wish to travel to hospital and would attend out patient tomorrow for chest x-ray. Crew advised pt if symptoms became worse to call 999. Pt left in care of partner.
Additional Comments: Presenting Complaint	SOB, CHEST TIGHTNESS

PATIENT ASSESSMENT			
AVPU		Alert	
Circulation			
Pulse Rate	101	**BP**	142/96
Cap Refill		**ECG Rhythm**	Sinus Rhythm
Rhythm		**Arm**	Left
Central/Peripheral		**ECG**	3 Lead
IV(L)		**IV(R)**	
IO(L)		**IO(R)**	

Observations

Time	P	RR	BP	SpO2	CR	GCS	AVPU	ETCO2	T	BM	ECG	P(L)	P(R)	PEF
00:25	101	14	142/96	97		15	Alert		37	5.1	Sinus Rhythm	2	2	

HISTORY	
AMPLE	
Allergies	None
Medication	Salbutamol, Lamotrigine, Fexofenadine
Past Medical History	ANXIETY, DEPRESSION
Last Eaten	Unknown

Events Prior	UNKNOWN
Social History	
Lives alone	
MEDICAL	
TRAUMA	
OBSTETRICS/GYNAE	
OTHER	

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

2021 GGC General Referral Protocol (Glasgow, vR20.5)

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Dermatology
GGC General Referral

— **Consultant / receiving practitioner** and/or **specialty clinic**

Glasgow Royal Infirmary
84 Castle Street
Glasgow
G4 0SF

— **Hospital** and **hospital address**

Hospital location code.
G107H

Email address
-

Urgency of referral	Urgent		
Date of referral	28-Oct-2022	**Date sent**	28-Oct-2022

PATIENT DETAILS

Surname	McLeish
Forename(s)	Wendy
Title	Miss
Sex	Female
Date of birth	25-May-1987
CHI no.	2505876061
Area of Residence	-

Patient's address

Flat 3.2
312 Cumbernauld Road
Glasgow
G31 3LY

Contact number(s)
Voice:07912347436

101027815472K

Unique Care Pathway Number: 101027815472K

REGISTERED GP DETAILS

Name	Dr Margaret Morris		
GMC code	4305792	GP code	05029
Practice name	Meadowpark Surgery (18882)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)
Voice:0141 554 0464
Facsimile:0141 550 2002

REFERRING GP DETAILS

Name	Dr. Matthew Lyons		
GMC code	7134018	GP code	02836
Practice name	Meadowpark Surgery (46625)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)
Voice:0141 554 0464
Facsimile:0141 550 2002

CLINICAL INFORMATION

History of presenting complaint

Presenting complaint

Description: ?BCC

Comment: I would be grateful for your opinion regarding a crusting lesion on the side of this patient's nose. It has a slightly rolled edge. She spends a lot of time on sunbeds and the lesion itself has been painful and is enlarging. I have attached some photos.

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history

Pre-existing conditions (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Asthma	-	12-Sep-2022	12-Sep-2022
Vulnerable child in family	-	16-Mar-2021	16-Mar-2021
Assault by bite of human being	by partner. bite to R ear, blunt head trauma by bottle.	01-Nov-2019	01-Nov-2019
Social worker involved	-	02-Sep-2019	02-Sep-2019
Alcohol problem drinking	-	02-Sep-2019	02-Sep-2019
Pityriasis versicolor	-	18-Feb-2019	18-Feb-2019
Miscarriage	surgical ERPC	03-Sep-2015	03-Sep-2015
Pneumonia due to unspecified organism	(Bilateral)	30-Dec-2011	30-Dec-2011
Adult respiratory distress syndrome	-	30-Nov-2011	30-Nov-2011
Overdose of drug	fluoxetine	22-Sep-2011	22-Sep-2011
Anxiety with depression	-	19-Jul-2011	19-Jul-2011
Death of father	-	31-Jan-2011	31-Jan-2011
Has a tremor	seen by nuerologist 2012, felt to be benign	01-Apr-2007	01-Apr-2007
Death of mother	age 29 MI	01-Jan-1991	01-Jan-1991

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Elective caesarean delivery NOS	26-Feb-2017	26-Feb-2017

Current medication (Active Repeat medication issued within the last 12 months)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Clenil Modulite Cfc-free inhaler 100 micrograms/actuation	2	2 INHALER	TWO PUFFS TO BE INHALED TWICE A DAY	-	12-Sep-2022	12-Sep-2022
Mirtazapine Tablets 45 mg	28	28 tablet	ONE TO BE TAKEN AT NIGHT	-	10-May-2022	11-Oct-2022
Salbutamol Cfc-free inhaler 100 micrograms/puff	1	1 INHALER	ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY	-	12-Aug-2021	11-Oct-2022

Recent medication (Any medication issued within last 90 days not shown above)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Lamotrigine Tablets 50 mg	28	28 tablet	TAKE ONE TABLET ONCE DAILY (TOTAL DAILY DOSE 75MG)	-	11-Oct-2022	11-Oct-2022

Lamotrigine Tablets 25 mg	28	28 tablet	TAKE ONE TABLET ONCE DAILY (TOTAL DAILY DOSE 75MG)	-	11-Oct-2022	11-Oct-2022
Lamotrigine Tablets 50 mg	112	112 TABLET	WEEK 1+2 - TAKE ONE TABLET ONCE DAILY. WEEK 3 ONWARDS - TAKE ONE TABLET ONCE DAILY (TOTAL DAILY DOSE 75MG)	-	10-Oct-2022	10-Oct-2022
Lamotrigine Tablets 25 mg	28	28 tablet	WEEK 3 ONWARDS - TAKE ONE TABLET TWICE DAILY (TOTAL DAILY DOSE 75MG)	-	10-Oct-2022	10-Oct-2022
Fexofenadine Hydrochloride Tablets 180 mg	60	60 tablet	TAKE ONE TABLET UP TO TWICE DAILY	-	10-Oct-2022	10-Oct-2022
Clarithromycin Tablets 500 mg	10	10 TABLET	ONE TO BE TAKEN TWICE A DAY FOR 5 DAYS	-	23-Sep-2022	23-Sep-2022
Prednisolone Tablets 5 mg	40	40 TABLET	EIGHT TO BE TAKEN IN THE MORNING	-	12-Sep-2022	12-Sep-2022
Clarithromycin Tablets 500 mg	10	10 TABLET	ONE TO BE TAKEN TWICE A DAY FOR 5 DAYS	-	12-Sep-2022	12-Sep-2022
Amoxicillin Capsules 500 mg	15	15 CAPSULE	ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS	-	08-Sep-2022	08-Sep-2022
Benzydamine Hydrochloride Spray Sugar Free 0.15 %	1	1 SPRAY	USE 4-8 SPRAYS ONTO AFFECTED AREA EVERY 90 MINUTES TO 3 HOURS	-	08-Sep-2022	08-Sep-2022
Lamotrigine Tablets 25 mg	56	56 tablet	START AT ONE DAILY FOR 2 WEEKS. INCREASE DOSE BY 25MG EVERY 2 WEEKS UNTIL YOU REACH A DOSE OF 75MG TWICE DAILY (3 IN THE MORNING AND 3 AT NIGHT)	-	06-Sep-2022	06-Sep-2022
Amoxicillin Capsules 500 mg	15	15 CAPSULE	ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS	-	15-Jul-2022	15-Jul-2022
Hyoscine Butylbromide Tablets 10 mg	56	56 tablet	ONE TO BE TAKEN THREE TIMES A DAY	-	15-Jul-2022	15-Jul-2022
Propranolol Hydrochloride Tablets 40 mg	84	84 TABLET	ONE TO BE TAKEN THREE TIMES A DAY	-	10-May-2022	27-Jul-2022

Blood Pressure

Date Recorded	Systolic	Diastolic
08-Sep-2022	122	92
21-Sep-2021	120	60
17-Jul-2018	128	77
09-Jul-2015	123	90
08-Aug-2013	116	77

Body Measurements

Date Recorded	Height	Weight	BMI
10-Oct-2022	-	90	-
10-Jun-2021	160.02	82.55	32.24
23-Mar-2021	158	83	33.25
23-Mar-2021	-	83	-
17-Jul-2018	-	-	29.64

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Non-smoker :		08-Sep-2022

Non-smoker :	hx noted, ongoing longstanding anxiety, tremors, seen by neurology and advised related to anxiety, using propranolol, feels doesn't help her, also uses saba for sob up stairs at times, bu- TRUNCATED	07-Oct-2021
Ex-smoker - amount unknown :		12-Aug-2021
Never smoked tobacco:		10-Jun-2021
Never smoked tobacco:		16-Sep-2019
Non-drinker alcohol :		07-Oct-2021
Alcohol consumption, 1 units/week:		10-Jun-2021
Alcohol consumption, 3 units/week:		17-Apr-2012
Light drinker - 1-2u/day:	Alcohol Intake$$.clm - Repeat after an Interval	21-Jan-2010

Clinical warnings

Allergies

Description	Comment	Date recorded
Adverse reaction to propranolol	possible wheeze with this	29-Apr-2016

Additional Support Needs

No known ASN requirements

Additional relevant information

OK to send correspondence to home address?:Yes
Patient will accept any site:Yes
Patient will accept cancellation or short notice appointment (within 1-6 days):Yes
Referred By:Referring GP
Electronic Attachment Present:Yes

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) **Date**

NHS Greater Glasgow and Clyde OOH Call Incident Report

Call number:	**6770875**	Receive Date:	**13-Oct-2022 21:56**
Patient's Name:	**Wendy Mcleish**		
Date of birth:	**25-May-1987 (35 years)**	Gender:	**F**
Address:	**3/2** **312 Cumbernauld Road** **Glasgow** **G31 3LY**	Current Address:	**3/2** **312 Cumbernauld Road** **Glasgow** **G31 3LY**
Return Contact No:			
Tel No:	**07912 347436**		**07912 347436**
Mobile No:			
Priority:	**999/Emergency**	Call Origin:	
Received:	**13-Oct-2022 21:56**	Calltype:	**Ambulance**
Advised:	**22:15**	Arrived PCC:	
Cons start:		Cons End:	
Consulting Doctor:		Own doctor:	**Anne McGinley**

CHI Number:
2505876061

NHSD details:

Receptionist:
SAS Ref: 9165482 CHEST TIGHTNESS - 1 HR
EMGI 999 contacted - For information only
Clinical summary created by: Saskia Thain (Call Taker Si) () [13/10/2022 22:15:49]
Reason for call: SAS Ref: 9165482 CHEST TIGHTNESS - 1 HRConfirmed Symptom(s): Has Fever Chest pain Additional details of problem(s): Pain moving through to the back Pain radiating to jaw or upper back or neck or an arm Heaviness, pressure or tightness in chest Intermittent chest pain over past few days/weeks but now constant Chest pain worse with a deep breath Chest pain worse with movement Chest pain worse with coughing Associated Features/Red Flags: Feeling cold and sweaty Changes in normal breathing pattern Lightheaded/dizzy Symptom(s) not found: No constricting band in chest No crushing discomfort in chest No pain between shoulder blades Not nauseated or vomiting No changes in normal skin colour No palpitations No chest injury in last 24 hours Risk Factor(s): No travel outside Europe in last 21 days or to an affected country Call Detail(s): Clinical supervision not used 13:10:2022

21:56:47 THAINS2.. TIGHTNESS WORSE WHEN TALKING. LIGHTHEADED. FEELING HOT/COLD, SHAKEY + SHIVERY. RECENT H/O PNEUMONIA. SEEN BY GP 11/10 - ADVISED STILL SIGNS OF INFECTION FOLLOWING RECENT PNEUMONIA + TO ARRANGE ANOTHER XRAY... PRESSURE IN FRONT OF CHEST. HEADACHE. HAS HAD PALPITATIONS - NOT NOW... CALL TAKEN OVER BY SCN J.BOYLE - WORSENING CHEST PAIN/BREATHING DIFFICULTY. AUDIBLE WHEEZE. RECENT PNEUMONIA. GP WAS CONCERNED MAY HAVE REMAINING INFECTION; HAS ARRANGED OUT PATIENT XRAY... SUDDEN WORSENING IN LAST 1 HR. ADVISED 999 AMBULANCE ARRANGED; 9165482.. Outcome: 999 contacted - For information only

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Followups:
None

GP Links Microbiology Report

Patient Details

Surname	MCLEISH
Forename	WENDY
CHI	2505876061
Date of birth	25.05.1987
Address	Flat 3.2 312 Cumbernauld Road Glasgow G31 3LY

Specimen Details

Specimen Number	M,22.1209777.Y
Specimen Type	Sputum
Date/Time Collected	29.09.22 / 16:51
Date/Time Received	29.09.22 / 18:37
Requested By	Dr Matthew Lyons
GP Practice	46625
Date/Time Reported	30.09.22 / 11:42

Results

Report issued by NHS GG&C Microbiology North Sector
Enquiries 0141 201 8551
** FINAL REPORT **

INVESTIGATION: Routine Culture
SPECIMEN TYPE: Sputum

CONS/GP: Dr Matthew Lyons Order No:IS18587331
LOCATION: Meadowpark Surgery

CULTURE RESULT: No significant growth

If TB/Mycobacteria is suspected, TB culture must be
specifically requested on TRAK/ICE or Microbiology form

Tests included in UKAS Accreditation (8078) Scope.

Senders ref. no.

Authorised by: Fiona Turner (SBMS)
Date/Time authorised: 30.09.2022 11:41
** END OF REPORT **

Glasgow Royal Infirmary: Diagnostic Imaging Report

Patient	WENDY MCLEISH	**Address**	FLAT 3-2, 312 CUMBERNAULD RD, GLASGOW, LANARKSHIRE, G31 3LY
DOB	25/05/1987	**CHI No.**	2505876061
Ref. Source	Meadowpark Surgery	**Practice Code**	46625
Referrer	Dr Samuel Broadley	**Exam Date**	14/09/2022 11:51

Report Summary

Clinical History :
chronic cough 4 weeks clear sputum with exertional SOB. wheeze all zones on auscultation, nil focal creps. CXR pelase to assess for focal mass / consolidation

XR Chest

XR Chest :
Compared to 06/12/2016 there is subtle increased air space opacification of both lung bases particularly the left which are in keeping with possible infection.
The remainder of lung fields are clear.
A fully inspired centred PA film in 4-6 weeks time following any treatment deemed necessary is advised to assess clearance.

Last verified by: 3488188 (Dr Sean Kelly)
Reported by: 3488188 (Dr Sean Kelly)

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC General Referral or Advice Protocol (Glasgow, vR20.5)

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Respiratory Medicine
GGC General Referral or Advice

Consultant / receiving practitioner and/or **specialty clinic**

Glasgow Royal Infirmary
84 Castle Street
Glasgow
G4 0SF

Hospital and **hospital address**

Hospital location code.
G107H

Email address
-

Urgency of referral Routine
Date of referral 13-Oct-2022 **Date sent** 14-Oct-2022

PATIENT DETAILS

Surname	McLeish
Forename(s)	Wendy
Title	Miss
Sex	Female
Date of birth	25-May-1987
CHI no.	2505876061
Area of Residence	-

Patient's address

Flat 3.2
312 Cumbernauld Road
Glasgow
G31 3LY

Contact number(s)
Voice:07912347436

1010276753467 Unique Care Pathway Number: 1010276753467

REGISTERED GP DETAILS

Name	Dr Margaret Morris		
GMC code	4305792	GP code	05029
Practice name	Meadowpark Surgery (18882)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)
Voice:0141 554 0464
Facsimile:0141 550 2002

REFERRING GP DETAILS

Name	Dr. Samuel Broadley		
GMC code	7477241	GP code	06807
Practice name	Meadowpark Surgery (46625)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)
Voice:0141 554 0464

CLINICAL INFORMATION

History of presenting complaint

Presenting complaint

Description: Advice - Persistent Cough weeks post LRTI treatment (Left basal consolidation on initial x-ray)

Comment: Dear Colleague,

This 35-year old patient presents with five weeks' history of productive cough and increased shortness of breath following a coryzal illness. She has a more longstanding history of intermittent episodes of shortness of breath on exertion with wheeze with a background of eczema and hayfever. She is an ex-smoker.

She was initially assessed for this in September 2022 following her acute symptoms and found to have a diffuse wheeze heard to all zones with no focal crepitations, with saturations at 98% on room air. As she was already prescribed Propranolol for anxiety symptoms, the patient was hesitant to stop this. She was then prescribed Prednisolone and Clenil alongside Arithromycin antibiotics.

An acute chest x-ray shows evidence of bibasal air space opacification, particularly to the left side. It is reportedly in keeping with possible infection.

She then contacted us two weeks later where she reported that her cough remained unchanged and was then prescribed a course of Amoxicillin.

She attended us on Monday 10th October 2022 for a review and reported that her wheeze had dramatically improved but continuing to cough up thick clear sputum with no blood. She does not describe any unexplained weight loss or examination.

On examination (10th October 2022): She has a normal habitus and weighs 90kg; her chest is clear at all zones; heart rate is 80bpm (regular); no clubbing or lymphadenopathy.

In light of her background and the recent x-ray findings, I would be grateful for your specialist advice on appropriate next steps or investigations.

Many thanks,
Dr Samuel Broadley

Reason for referral

Care type requested: Out Patient

Expected outcome: Advise

Past medical history

Pre-existing conditions (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Asthma	-	12-Sep-2022	12-Sep-2022
Vulnerable child in family	-	16-Mar-2021	16-Mar-2021
Assault by bite of human being	by partner. bite to R ear, blunt head trauma by bottle.	01-Nov-2019	01-Nov-2019
Social worker involved	-	02-Sep-2019	02-Sep-2019
Alcohol problem drinking	-	02-Sep-2019	02-Sep-2019
Pityriasis versicolor	-	18-Feb-2019	18-Feb-2019
Miscarriage	surgical ERPC	03-Sep-2015	03-Sep-2015
Pneumonia due to unspecified organism	(Bilateral)	30-Dec-2011	30-Dec-2011
Adult respiratory distress syndrome	-	30-Nov-2011	30-Nov-2011
Overdose of drug	fluoxetine	22-Sep-2011	22-Sep-2011
Anxiety with depression	-	19-Jul-2011	19-Jul-2011
Death of father	-	31-Jan-2011	31-Jan-2011
Has a tremor	seen by nuerologist 2012, felt to be benign	01-Apr-2007	01-Apr-2007
Death of mother	age 29 MI	01-Jan-1991	01-Jan-1991

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded

Elective caesarean delivery NOS	26-Feb-2017	26-Feb-2017

Current medication (Active Repeat medication issued within the last 12 months)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Clenil Modulite Cfc-free inhaler 100 micrograms/actuation	2	2 INHALER	TWO PUFFS TO BE INHALED TWICE A DAY	-	12-Sep-2022	12-Sep-2022
Mirtazapine Tablets 45 mg	28	28 tablet	ONE TO BE TAKEN AT NIGHT	-	10-May-2022	11-Oct-2022
Salbutamol Cfc-free inhaler 100 micrograms/puff	1	1 INHALER	ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY	-	12-Aug-2021	11-Oct-2022

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Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Lamotrigine Tablets 50 mg	28	28 tablet	TAKE ONE TABLET ONCE DAILY (TOTAL DAILY DOSE 75MG)	-	11-Oct-2022	11-Oct-2022
Lamotrigine Tablets 25 mg	28	28 tablet	TAKE ONE TABLET ONCE DAILY (TOTAL DAILY DOSE 75MG)	-	11-Oct-2022	11-Oct-2022
Lamotrigine Tablets 50 mg	112	112 TABLET	WEEK 1+2 - TAKE ONE TABLET ONCE DAILY. WEEK 3 ONWARDS - TAKE ONE TABLET ONCE DAILY (TOTAL DAILY DOSE 75MG)	-	10-Oct-2022	10-Oct-2022
Lamotrigine Tablets 25 mg	28	28 tablet	WEEK 3 ONWARDS - TAKE ONE TABLET TWICE DAILY (TOTAL DAILY DOSE 75MG)	-	10-Oct-2022	10-Oct-2022
Fexofenadine Hydrochloride Tablets 180 mg	60	60 tablet	TAKE ONE TABLET UP TO TWICE DAILY	-	10-Oct-2022	10-Oct-2022
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Prednisolone Tablets 5 mg	40	40 TABLET	EIGHT TO BE TAKEN IN THE MORNING	-	12-Sep-2022	12-Sep-2022
Clarithromycin Tablets 500 mg	10	10 TABLET	ONE TO BE TAKEN TWICE A DAY FOR 5 DAYS	-	12-Sep-2022	12-Sep-2022
Amoxicillin Capsules 500 mg	15	15 CAPSULE	ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS	-	08-Sep-2022	08-Sep-2022
Benzydamine Hydrochloride Spray Sugar Free 0.15 %	1	1 SPRAY	USE 4-8 SPRAYS ONTO AFFECTED AREA EVERY 90 MINUTES TO 3 HOURS	-	08-Sep-2022	08-Sep-2022
Lamotrigine Tablets 25 mg	56	56 tablet	START AT ONE DAILY FOR 2 WEEKS. INCREASE DOSE BY 25MG EVERY 2 WEEKS UNTIL YOU REACH A DOSE OF 75MG TWICE DAILY (3 IN THE MORNING AND 3 AT NIGHT)	-	06-Sep-2022	06-Sep-2022
Amoxicillin Capsules 500 mg	15	15 CAPSULE	ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS	-	15-Jul-2022	15-Jul-2022
Hyoscine Butylbromide Tablets 10 mg	56	56 tablet	ONE TO BE TAKEN THREE TIMES A DAY	-	15-Jul-2022	15-Jul-2022
Propranolol Hydrochloride Tablets 40 mg	84	84 TABLET	ONE TO BE TAKEN THREE TIMES A DAY	-	10-May-2022	27-Jul-2022
			ONE TO BE TAKEN AT NIGHT WHEN		10-	10-

Zopiclone Tablets 7.5 mg	7	7 TABLET	REQUIRED FOR ACUTE ANXIETY. ONE-OFF COURSE - NOT FOR RECURRENT OR LONG-TERM USE	-	May-2022	May-2022

Blood Pressure

Date Recorded	Systolic	Diastolic
08-Sep-2022	122	92
21-Sep-2021	120	60
17-Jul-2018	128	77
09-Jul-2015	123	90
08-Aug-2013	116	77

Body Measurements

Date Recorded	Height	Weight	BMI
10-Oct-2022	-	90	-
10-Jun-2021	160.02	82.55	32.24
23-Mar-2021	158	83	33.25
23-Mar-2021	-	83	-
17-Jul-2018	-	-	29.64

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Non-smoker :		08-Sep-2022
Non-smoker :	hx noted, ongoing longstanding anxiety, tremors, seen by neurology and advised related to anxiety, using propranolol, feels doesn't help her, also uses saba for sob up stairs at times, bu- TRUNCATED	07-Oct-2021
Ex-smoker - amount unknown :		12-Aug-2021
Never smoked tobacco:		10-Jun-2021
Never smoked tobacco:		16-Sep-2019
Non-drinker alcohol :		07-Oct-2021
Alcohol consumption, 1 units/week:		10-Jun-2021
Alcohol consumption, 3 units/week:		17-Apr-2012
Light drinker - 1-2u/day:	Alcohol Intake$$.clm - Repeat after an Interval	21-Jan-2010

Clinical warnings

Allergies

Description	Comment	Date recorded
Adverse reaction to propranolol	possible wheeze with this	29-Apr-2016

Additional Support Needs

No known ASN requirements

Additional relevant information

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

Patient will accept cancellation or short notice appointment (within 1-6 days):Yes

Referred By:Referring GP

Electronic Attachment Present:No

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) **Date**

McLeish Wendy CHI: 2505876061

Clinical letter - GP:

NHS
Greater Glasgow and Clyde

Queen Elizabeth University Hospital
1345 Govan Road
Glasgow
G51 4TF
Main Switchboard: 0141 201 1100
Department: Neurology
Contact Tel: 0141 232 7591
Enquiries to: Maggie.Edden@ggc.scot.nhs.uk
Letter Date: 06/09/2022
Reference: OJ/ME
Dictated Date: 26/08/2022
Transcribed Date: 29/08/2022

Dr. MM Morris
Meadowpark Surgery
568 Alexandra Parade
Glasgow
G31 3BP

Dear Dr Morris,

Wendy McLeish; D.O.B: 25/05/1987; CHI: 2505876061
FLAT 3-2, 312 CUMBERNAULD RD, Glasgow, Lanarkshire, G31 3LY

Wendy called in to say that she is taking seizures up to 3 times a month, apparently **generalised tonic clonic seizures**, where she also bruises herself. As you are aware, the MRI of the head had displayed multiple tiny foci T2 hyperintensity within the white matter and the EEG displayed an isolated left sided temporal sharp wave.

She continues to drink half a bottle of vodka once or twice or twice a month, but does not feel that he seizures are associated with this. Nonetheless, I suggested that she reduce the amount of alcohol she drinks, since this probably lowers her seizure threshold.

She was keen to start medication. I suggested that she start on Lamotrigine 25 mg od, increasing fortnightly in 25 mg increments to 75 mg bd. I also mentioned to her that should she notice any skin rash within the first 2 or 3 weeks, she should immediately discontinue the medication, since this could indicate that she is allergic to the medication.

I shall review her in the coming months.

Yours sincerely

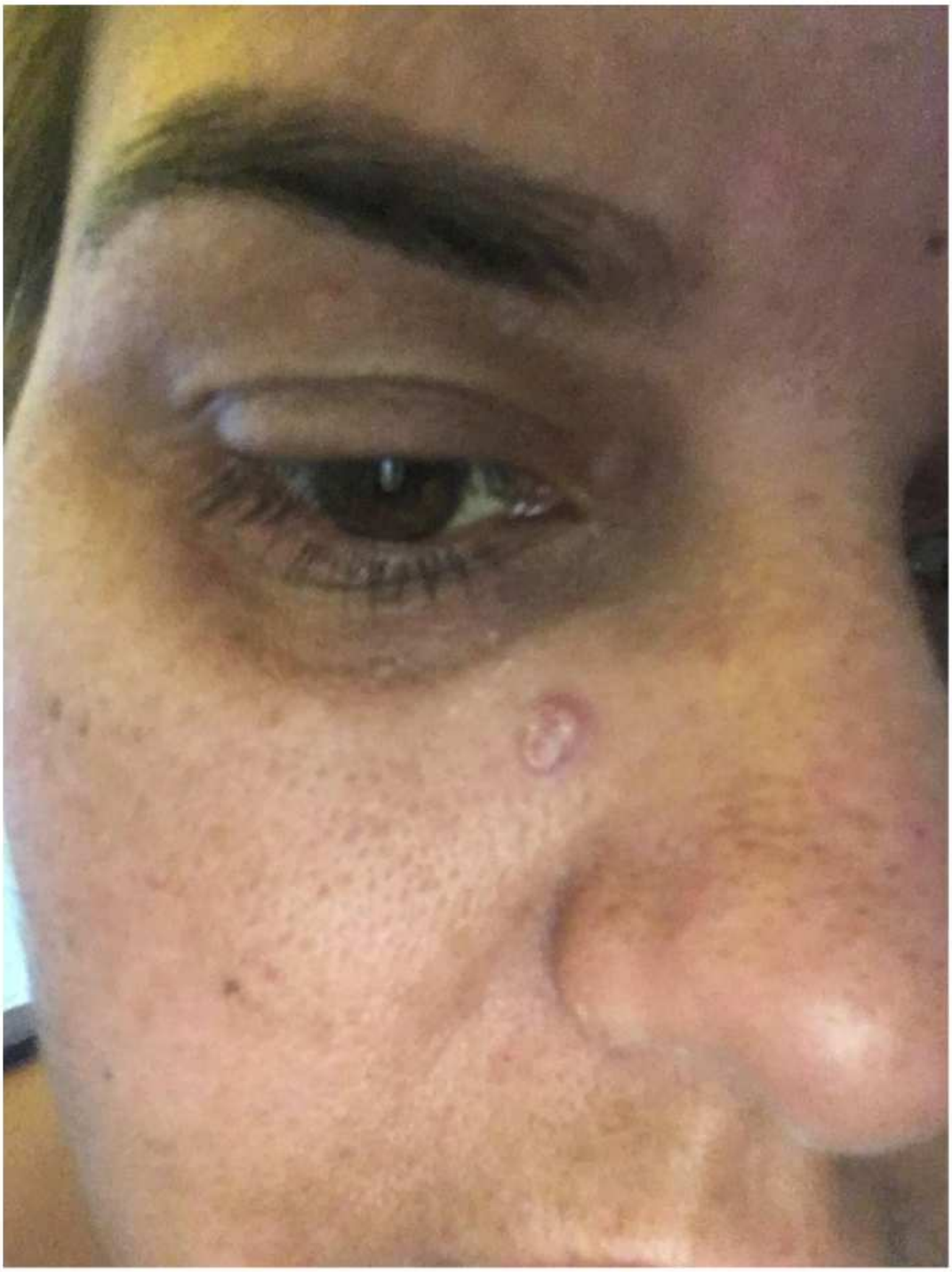
Dr Oswald Jack

Consultant Neurologist

Electronically Signed: Dr Oswald Jack, Consultant

cc.

NHS Confidential: Personal data about a patient



NHS Confidential: Personal data about a patient

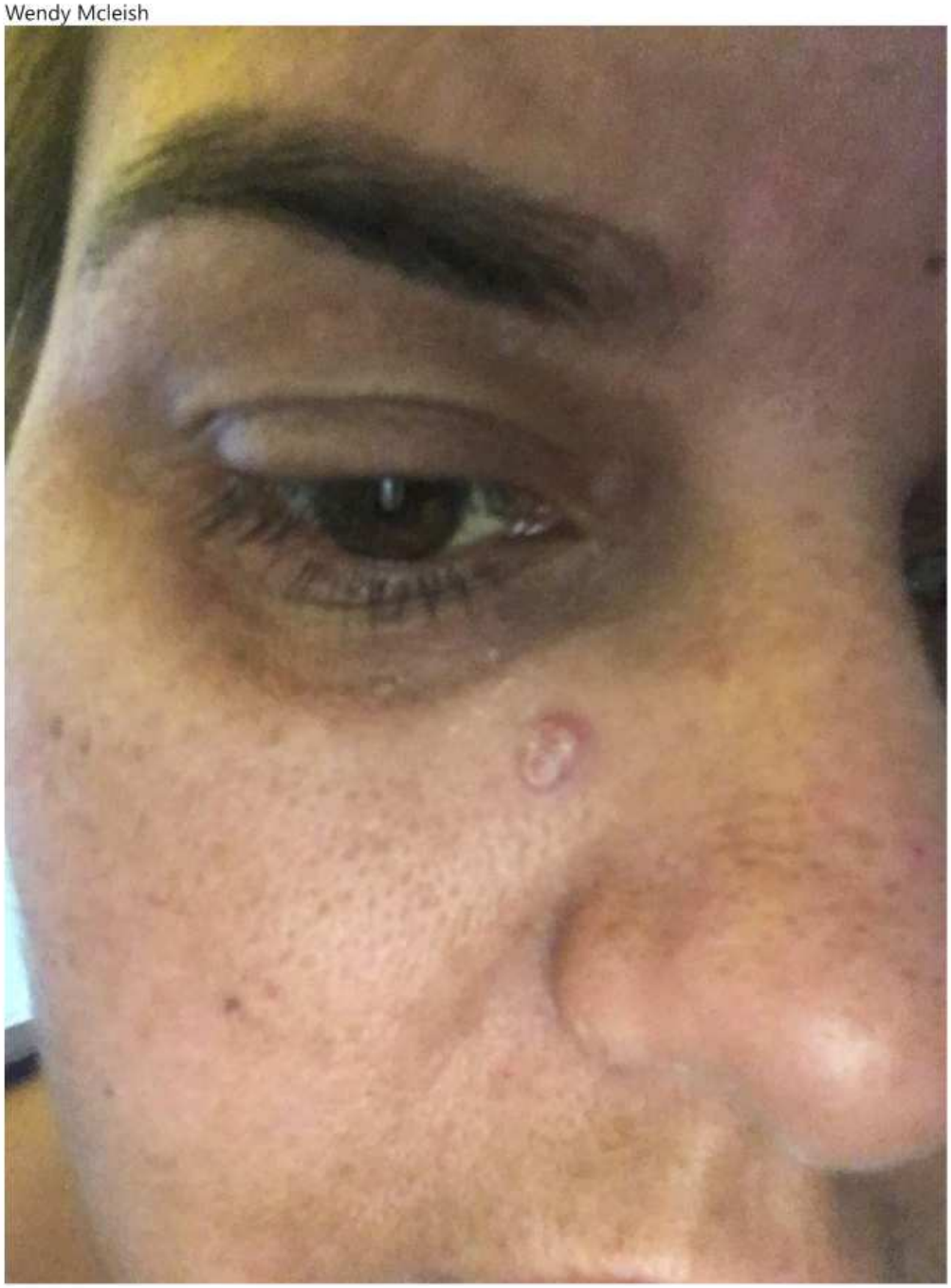
Re: Test email

Wendy Ward <wardwendy45@gmail.com>

Fri 26/08/2022 09:07

To: gp46625clinical (Meadowpark Surgery) <ggc.gp46625clinical@nhs.scot>

Wendy Mcleish



NHS Confidential: Personal data about a patient

Sent from my iPhone

On 26 Aug 2022, at 09:06, gp46625clinical (Meadowpark Surgery) <ggc.gp46625clinical@nhs.scot> wrote:

Kind Regards,

Meadowpark Surgery
568 Alexandra Parade
Glasgow
G31 3BP
0141 554 0464

McLeish Wendy CHI: 2505876061

Clinic Letter

NHS
Greater Glasgow and Clyde

Queen Elizabeth University Hospital
1345 Govan Road
Glasgow
G51 4TF
0141 201 1100

Dr. MM Morris
Meadowpark Surgery
568 Alexandra Parade
Glasgow
G31 3BP

Main Switchboard:
Department: Neurology
Contact Tel: 0141-201-2473
Enquiries to: Jean.mcdonald@ggc.scot.nhs.uk
Letter Date: 21/06/2022
Reference: VC/JMcD
Dictated Date: 21/06/2022
Transcribed Date: 29/06/2022

Dear Dr. MM Morris,

Wendy McLeish; D.O.B: 25 May 1987; CHI: 2505876061
FLAT 3-2, 312 CUMBERNAULD RD, Glasgow, Lanarkshire, G31 3LY

Attendance: Specialty - Neurology; Clinic - SGVCNE3-DR CHANDRAN MDC CLINIC TUESDAY AM
Date and Time of Appointment - 21/06/2022 10:00

Follow Up: None arranged.

Clinical Comments:
Problem List

Generalised tremor - primarily related to anxiety.

Change to Medication

None.

Planned Investigations

None.

Follow-Up

None arranged.

Comments

I evaluated this 35 year old lady at the Movement Disorders Clinic today as a face to face consultation. She reports experiencing tremor for several years probably with onset in childhood but particularly worse over the last year. She had previously been seen by Dr Pushkar Shah in 2012 and a diagnosis of anxiety related tremor was made.

She reports experiencing tremor involving both upper limbs present continuously. This interferes with her activities like writing, buttoning or ..... She can also experience a sense of inner tremulousness and a tremor involving both lower extremities. This occurs particularly when she is outside the home. No tremor is observed at rest.

She reports no change to sense of smell. She sleeps well and reports no dream enactment behaviour. Her mood can be up and down but she reports being anxious almost all the time. This sense of anxiety is worsened when she is outside the house e.g. in the shops. She finds the tremor is particularly worse when she wakes up in the morning and she feels the sense of inner tremulousness and this does get better to some extent as the day progresses. She reports no change to speech, swallowing, bowel or bladder function.

Past Medical History

Paroxysmal events ? suspected seizure, depression, anxiety, acute respiratory distress syndrome secondary to pneumonia 2012, shortness of breath and breathing difficulties since then.

Current Medications

Propranolol, Mirtazepine, Salbutamol inhalers 4-6 times per day, Serral (??).

Family History

Limited information available.

Social History

She lives by herself. She does not smoke, drink alcohol or use recreational drugs.

Physical Examination

She was alert and oriented. There was masking of facial expression which was mild. Speech appeared normal, visual fields were normal, extra-ocular movements were normal in range. Tone was normal in all 4 limbs, no rest tremor was observed, a slight irregular jerky tremor was seen in both upper limbs on maintaining posture and on intention. No postural or rest tremor was seen in the lower limbs. There was no evidence of bradykinesia to finger tap, hand movements in the upper limbs, there was slight bradykinesia to alternating movements in both upper limbs, to leg agility and toe tap in both lower limbs. There was no clear decrement and it seemed to be more hesitation in the lower limbs. Stance and gait were unremarkable. She was able to get up from a chair unaided.

Opinion and Recommendations

This 35 year old lady presents with a history of tremor involving all 4 limbs and a sense of inner tremulousness on a background of significant anxiety. On examination today there was a very slight irregular jerky tremor in both upper limbs which were not severe enough to limit function. Given the history of variability in her presentation I suspect anxiety is the main driver for her tremor. She is already on Propranolol and I would not make any additional recommendation with regards to treatment. I think that better management of her anxiety would potentially be helpful in controlling her symptoms. I have not arranged for follow-up under Neurology at the present time.

Yours sincerely

Dr Vijay Chandran

Consultant Neurologist

Electronically Signed: Dr Vijay Chandran, Consultant

cc.

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC Direct Access Spirometry (Glasgow, vR20.5)

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Spirometry
GGC Direct Access Spirometry

— **Consultant / receiving practitioner** and/or **specialty clinic**

Respiratory Direct Access Services
NHS Greater Glasgow & Clyde

— **Hospital** and **hospital address**

Hospital location code.
G035G

Email address
-

Urgency of referral Routine
Date of referral 12-Sep-2022 **Date sent** 12-Sep-2022

PATIENT DETAILS

Surname	McLeish
Forename(s)	Wendy
Title	Miss
Sex	Female
Date of birth	25-May-1987
CHI no.	2505876061
Area of Residence	-

Patient's address

Flat 3.2
312 Cumbernauld Road
Glasgow
G31 3LY

Contact number(s)
Voice:07912347436

1010273957533 Unique Care Pathway Number: 1010273957533

REGISTERED GP DETAILS

Name	Dr Margaret Morris		
GMC code	4305792	GP code	05029
Practice name	Meadowpark Surgery (18882)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)
Voice:0141 554 0464
Facsimile:0141 550 2002

REFERRING GP DETAILS

Name	Dr. Samuel Broadley		
GMC code	7477241	GP code	06807
Practice name	Meadowpark Surgery (46625)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)
Voice:0141 554 0464

CLINICAL INFORMATION

History of presenting complaint

Presenting complaint

Description: COPD

Comment: 35yo smoker presents with SOBOE, chronic cough productive of sputum and exertional wheeze. No overt diurnal features. Trialled on clenil inhaler recently. On examination can hear diffuse wheeze all zones, Sats 98% RA, no clubbing. Spirometry please to assess for obstructive airways disease in light of smoking history.

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history

Pre-existing conditions (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Chest infection NOS	-	08-Sep-2022	08-Sep-2022
Vulnerable child in family	-	16-Mar-2021	16-Mar-2021
Assault by bite of human being	by partner. bite to R ear, blunt head trauma by bottle.	01-Nov-2019	01-Nov-2019
Social worker involved	-	02-Sep-2019	02-Sep-2019
Alcohol problem drinking	-	02-Sep-2019	02-Sep-2019
Pityriasis versicolor	-	18-Feb-2019	18-Feb-2019
Miscarriage	surgical ERPC	03-Sep-2015	03-Sep-2015
Pneumonia due to unspecified organism	(Bilateral)	30-Dec-2011	30-Dec-2011
Adult respiratory distress syndrome	-	30-Nov-2011	30-Nov-2011
Overdose of drug	fluoxetine	22-Sep-2011	22-Sep-2011
Anxiety with depression	-	19-Jul-2011	19-Jul-2011
Death of father	-	31-Jan-2011	31-Jan-2011
Has a tremor	seen by nuerologist 2012, felt to be benign	01-Apr-2007	01-Apr-2007
Death of mother	age 29 MI	01-Jan-1991	01-Jan-1991

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Elective caesarean delivery NOS	26-Feb-2017	26-Feb-2017

Current medication (Active Repeat medication issued within the last 12 months)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Clenil Modulite Cfc-free inhaler 100 micrograms/actuation	2	2 INHALER	TWO PUFFS TO BE INHALED TWICE A DAY	-	12-Sep-2022	12-Sep-2022
Mirtazapine Tablets 45 mg	28	28 tablet	ONE TO BE TAKEN AT NIGHT	-	10-May-2022	12-Sep-2022
Salbutamol Cfc-free inhaler 100 micrograms/puff	1	1 INHALER	ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY	-	12-Aug-2021	12-Sep-2022

Recent medication (Any medication issued within last 90 days not shown above)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Prednisolone Tablets 5 mg	40	40 TABLET	EIGHT TO BE TAKEN IN THE MORNING	-	12-Sep-2022	12-Sep-2022

Clarithromycin Tablets 500 mg	10	10 TABLET	ONE TO BE TAKEN TWICE A DAY FOR 5 DAYS	-	12-Sep-2022	12-Sep-2022
Amoxicillin Capsules 500 mg	15	15 CAPSULE	ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS	-	08-Sep-2022	08-Sep-2022
Benzydamine Hydrochloride Spray Sugar Free 0.15 %	1	1 SPRAY	USE 4-8 SPRAYS ONTO AFFECTED AREA EVERY 90 MINUTES TO 3 HOURS	-	08-Sep-2022	08-Sep-2022
Lamotrigine Tablets 25 mg	56	56 tablet	START AT ONE DAILY FOR 2 WEEKS. INCREASE DOSE BY 25MG EVERY 2 WEEKS UNTIL YOU REACH A DOSE OF 75MG TWICE DAILY (3 IN THE MORNING AND 3 AT NIGHT)	-	06-Sep-2022	06-Sep-2022
Amoxicillin Capsules 500 mg	15	15 CAPSULE	ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS	-	15-Jul-2022	15-Jul-2022
Hyoscine Butylbromide Tablets 10 mg	56	56 tablet	ONE TO BE TAKEN THREE TIMES A DAY	-	15-Jul-2022	15-Jul-2022
Propranolol Hydrochloride Tablets 40 mg	84	84 TABLET	ONE TO BE TAKEN THREE TIMES A DAY	-	10-May-2022	27-Jul-2022
Zopiclone Tablets 7.5 mg	7	7 TABLET	ONE TO BE TAKEN AT NIGHT WHEN REQUIRED FOR ACUTE ANXIETY. ONE-OFF COURSE - NOT FOR RECURRENT OR LONG-TERM USE	-	10-May-2022	10-May-2022
Mirtazapine Tablets 45 mg	28	28 TABLET	ONE TO BE TAKEN AT NIGHT	-	04-Apr-2022	04-Apr-2022

Blood Pressure

Date Recorded	Systolic	Diastolic
08-Sep-2022	122	92
21-Sep-2021	120	60
17-Jul-2018	128	77
09-Jul-2015	123	90
08-Aug-2013	116	77

Body Measurements

Date Recorded	Height	Weight	BMI
10-Jun-2021	160.02	82.55	32.24
23-Mar-2021	158	83	33.25
23-Mar-2021	-	83	-
17-Jul-2018	-	-	29.64
29-Apr-2014	-	74	-

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Weight (kg):	82.55	-
Height (m):	160.02	-
BMI (Weight / Height):	32.24	-
Non-smoker :		08-Sep-2022
Non-smoker :	hx noted, ongoing longstanding anxiety, tremors, seen by neurology and advised related to anxiety, using propranolol, feels doesn't help her, also uses saba for sob up stairs at times, bu- TRUNCATED	07-Oct-2021
Ex-smoker - amount unknown :		12-Aug-2021
Never smoked tobacco:		10-Jun-2021
Never smoked tobacco:		16-Sep-2019

Non-drinker alcohol :		07-Oct-2021
Alcohol consumption, 1 units/week:		10-Jun-2021
Alcohol consumption, 3 units/week:		17-Apr-2012
Light drinker - 1-2u/day:	Alcohol Intake$$.clm - Repeat after an Interval	21-Jan-2010

Investigations

Description/Question	Result/Comment	Date
Persistent Cough:	YES	-
Change in MRC grade in known COPD:	NO	-
Breathlessness:	YES	-
Regular sputum:	YES	-
Known COPD:	NO	-
Known asthma:	NO	-
Previous Spirometry:	NO	-
Known current MRSA in sputum:	NO	-
Possible tubercle – if yes, do not refer till clear:	NO	-
Recent chest infection/COPD exacerbation:	YES	-
If Yes Date:	2022-09-12	-
Recent Eye surgery:	NO	-
Smoking history:	Current smoker	-

Clinical warnings

Allergies

Description	Comment	Date recorded
Adverse reaction to propranolol	possible wheeze with this	29-Apr-2016

Additional Support Needs

No known ASN requirements

Additional relevant information

Short acting b-agonist:YES
Long acting b-agonist:NO
Long acting anti-cholinergic:NO
Long acting combined inhaled steroid/long acting b-agonist:NO
Inhaled steroid:YES
Oral steroid:NO
Preferred site:Glasgow Royal Infirmary
OK to send correspondence to home address?:Yes
Patient will accept any site:Yes
Patient will accept cancellation or short notice appointment (within 1-6 days):Yes
Referred By:Referring GP
Electronic Attachment Present:No

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) **Date**

NHS Confidential: Personal data about a patient

CDRS Referral

Referrer Name: Dr. Broadley

GP Practice: Meadowpark Surgery

Patient name: Wendy McLeish

Date of Birth: 25/05/1987

Patient Contact Details: 312 Cumbernauld Road. 07912347436

Referral date: 19/04/2022

Discharge date: 04/05/2022

Patient has engaged: Yes

Consent given to share information? Yes

Outcomes
1. Activity planning for when she has visitation with daughter
2.
3.

Coping Strategies Suggested
1. Mindfulness practice
2.
3.

Any additional information:

This was Wendy's second referral to our service. Wendy and I had one lengthy call 20/04. She opened up about the grief she feels for her contact with her daughter being reduced. A check in was arranged. Contact attempted from 27/04 - 29/04, no answer.

*Person is contacted 6 times before being discharged for non-engagement.

Signed: Hera Mohammad

Position: Distress Response Worker

Date: 05/05/2022

NHS Confidential: Personal data about a patient

Meadowpark Surgery

568 Alexandra Parade, Glasgow G31 3BP
Tel: 0141 554 0464 www.meadowparksurgery.co.uk

Date: 28th April 2022

To Whom This May Concern,

Re: Miss Wendy McLeish (D.O.B: 25/05/1987)
Flat 3/2 312 Cumbernauld Road, Glasgow G31 3LY

I am writing this letter in my capacity within my capacity as this patient's General Practitioner.

I can confirm that within Miss Wendy McLeish's clinical notes, there is a coded significant past diagnosis listed of "substance misuse of cannabis" dated on the 16th of March 2021. There is also a significant listed past diagnosis of "alcohol problem drinking" dated on the 2nd of September 2019.

These coded previous diagnoses were entered by a previous GP prior to her registration at Meadowpark Street Surgery.

I can confirm from my reviews with Wendy following and on reviews of previous clinical documentation that I can find no overt positive evidence to suggest or confirm that the patient has had either of these conditions.

Given that these previous coded diagnoses were made by another General Practitioner at another practice, I cannot comment further on the reasons for why this was documented at this time.

Any further information as to the reasons behind that documentation would be appropriately sought from the relevant coding clinician from that time.

I am sorry to hear that Wendy was upset when discussing her medical records. We are of course happy to discuss this with her if she has any further concerns and she also has the right to request her full medical records for her own reference at any time as she wishes.

Yours sincerely,

Dr Samuel Broadley
GMC 7477241

[redacted]

NHS Confidential: Personal data about a patient

Please contact: Jacqueline Doyle
Our Ref: JD/DMK/BD/MCLE497
Your Ref:
Date: 21st April, 2022

JACQUELINE DOYLE & CO SOLICITORS

1 Tollcross Road
Parkhead
Glasgow G31 4UG
Tel: 0141 550 2333
Fax: 0141 550 8008

Legal Post:
DX 500416 Dennistoun 2
www.jdsolicitors.co.uk

Dr Orr
Meadowpark Surgery
214 Meadowpark Street
Glasgow
G31 2TE

Dear Sirs

Ms Wendy McLeish, DOB 25/05/1987
PIP Appeal re decision dated 20/10/2021

Thank you for your email dated 29th March 2022 when you had sent us a copy of the medical records for the above named client.

We have now discussed the medical records in detail with our client. She more or less states that the medical records are pretty accurate, however, she does take issue where the entries mention cannabis use and alcohol consumption. According to our client she has never smoked cannabis. She does not even smoke tobacco. Her ex-partner used to smoke cannabis but it certainly mentions in the medical records that the cannabis use seems to be attributed to our client. We may be picking this up wrong and it may not be. With regard to alcohol, she used to drink alcohol some years ago before she had her child. We appreciate that the child is in care but our client states that she does not think the entries regarding alcohol have anything to do with her seizures.

We would ask if possible if you could clarify this situation because it is quite important that we know whether the medical records are accurate or not. Our client seemed a bit upset when we were discussing the medical records with her and hopefully you can clarify the situation for us.

Yours faithfully

J.Doyle

Jacqueline Doyle
Partner
Jacqueline Doyle & Co
211

JD HOMES

SCOTTISH LEGAL AID BOARD

McLeish Wendy CHI: 2505876061

Clinical letter - GP:

NHS
Greater Glasgow and Clyde

Queen Elizabeth University Hospital
1345 Govan Road
Glasgow
G51 4TF
Main Switchboard: 0141 201 1100
Department: Neurology
Contact Tel: 0141 232
Enquiries to: Maggie.Edden@ggc.scot.nhs.uk
Letter Date: 06/04/2022
Reference: OJ/GL
Dictated Date: 04/04/2022
Transcribed Date: 04/04/2022

Dr. MM Morris
Meadowpark Surgery
568 Alexandra Parade
Glasgow
G31 3BP

Dear Dr Morris,

Wendy McLeish; D.O.B: 25/05/1987; CHI: 2505876061
FLAT 3-2, 312 CUMBERNAULD RD, Glasgow, Lanarkshire, G31 3LY

The **EEG** displayed an isolated left sided temporal sharp wave, no other abnormality present.

Information for Patient - *There was one minor abnormality on EEG, which is not necessarily significant. It is not clear whether you are suffering with epilepsy or whether alcohol consumption may have triggered seizures. It will also be interesting to hear whether you have had any further seizures. It may be necessary to obtain some information from your partner, who may have witnessed the seizures or have pertinent information associated with the seizures.*

Yours sincerely

Dr Oswald Jack

Consultant Neurologist

Electronically Signed: Dr Oswald Jack, Consultant

cc. Wendy McLeish
Flat 3-2
312 Cumbernauld Road
Glasgow G31 3LY

For Official Use Only	Date Received:

gamh
Glasgow Association for Mental Health

Referral Form

1. PERSON REQUESTING SERVICE

Date 4/4/2022

Name:	CHI: 2505876061 25/05/1987 F MCLEISH, Wendy Flat 3.2,312 Cumbernauld,G31 3LY 07912347436	Date of Birth:
Address:		Age:
Post Code:	Dr M Morris, 4305792 Dr Orr, G313BP 04/04/2022 16:53. Practice: 46625	Gender:
Telephone/Mobile:		Email Address:

Is this person actively engaged with CMHT Yes ☐ No ☑

Is this person actively engaged with PCMHT Yes ☐ No ☑

Can we contact this person directly? Yes ☑ No ☐

Can we contact this person by: letter ☑ phone ☑ mobile ☑ Email

Does this person know you are contacting GAMH on their behalf? Yes ☑ No ☐

Need for Interpreter? No ☑ Yes ☐ Which language? _____

Does this person have any additional communication, or other, requirements **(eg: Deaf, Hard of hearing, visual impairment, mobility etc.)?**

NIL

Does this person have the support of an unpaid Carer? Yes ☐ No ☑

Any Carer Support needs within the household? Yes ☐ No ☑

Are there Children and Young People living at this address? Yes ☐ No ☑

Are there any Money/Debt issues? Yes ☐ No ☑

2. PERSON MAKING REFERRAL

Contact Person DR SAM BRADLEY Designation GP

Agency _____

Address MEADOWPARK SURGERY
568 ALEXANDRA PARADE
GLASGOW
G31 3BP

Post Code _____ Telephone 0141 554 0464
PRACTICE CODE 46625

Mobile _____ Signed _____

3. Please let us know about this person's mental health issues. Why do you think this person needs a service from GAMH, or in what way do you think we can help.

ANXIETY (CHRONIC) + SOCIAL ISOLATION - MAY BENEFIT FROM 1:1 SUPPORT WITH THIS.

4. Which service do you think is most appropriate?:-

1:1 Support ☑ (6 Months Support) Group Work ☐ (6 Months Support)

Befriending ☐ (6 Months Support) Carer Support ☐ (1 Year Support)

5. Are there any areas of safety/risk we should know about (eg: the area person lives; risks to person & others, self harm)? If areas of safety/risk are identified we will contact you for some more information.

NIL

6. Is there anything else you think we should know (including your contact with other GAMH projects, other agencies, gender of workers, etc)?

I

Please return this form to: Glasgow Association for Mental Health
North Service Centre
St Andrews by the Green
33 Turnbull Street, Glasgow, G1 5PR

This referral form is available in larger print on request:
☎ Tel: 0141 552 5592 ✉ referrals@GAMH.org.uk

Ethnic Monitoring

Please tell us about your ethnic group. The groups **A – E** are the same as used in the 2001 Census for Scotland. **Choose ONE section from A to E,** then tick the appropriate box to indicate your cultural background. We also ask people if their ethnic group is **Gypsy Traveller** please tick this box if this applies to you.

A. White

- [x] Scottish
- [ ] Other British:
- [ ] Irish
- [ ] Any other white background, please specify.....

B. Mixed

- [ ] Any mixed background, please specify.....

C1. Asian, Asian Scottish Or Asian British

- [ ] Indian
- [ ] Pakistani
- [ ] Bangladeshi
- [ ] Any other Asian background, please specify.....

C2. Chinese

- [ ] Chinese
- [ ] Any other Chinese background, please specify.....

D. Black, Black Scottish Or Black British

- [ ] Caribbean
- [ ] African
- [ ] Any other black background, please specify.....

E. Other Ethnic Background

- [ ] Any other background, please specify.....

F. Gypsy Traveller

- [ ] Gypsy Traveller

G. Ethnic group not provided

- [ ] **Ethnic group not provided**

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC Third Sector Referral Protocol (Glasgow, vR20.5)

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Glasgow City CDRS
GGC Third Sector Referral

— **Consultant / receiving practitioner** and/or **specialty clinic**

Distress Response Services
SCI Gateway Virtual Location

— **Hospital** and **hospital address**

Hospital location code.
G153G

Email address
-

Urgency of referral Urgent
Date of referral 19-Apr-2022 **Date sent** 19-Apr-2022

PATIENT DETAILS

Surname	McLeish
Forename(s)	Wendy
Title	Miss
Sex	Female
Date of birth	25-May-1987
CHI no.	2505876061
Area of Residence	-

Patient's address

Flat 3.2
312 Cumbernauld Road
Glasgow
G31 3LY

Contact number(s)
Voice:07912347436

101026099784Z Unique Care Pathway Number: 101026099784Z

REGISTERED GP DETAILS

Name	Dr Margaret Morris		
GMC code	4305792	GP code	05029
Practice name	Meadowpark Surgery (18882)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)
Voice:0141 554 0464
Facsimile:0141 550 2002

REFERRING GP DETAILS

Name	Dr. Samuel Broadley		
GMC code	7477241	GP code	06807
Practice name	Meadowpark Surgery (46625)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)
Voice:0141 554 0464

CLINICAL INFORMATION

History of presenting complaint

Presenting complaint

Description: Acute anxiety, insomnia, distress

Comment: 34yo patient with longstanding anxiety and depression. Under GP follow-up for anxiety symptoms - currently her mirtazapine has been increased in dose. Unfortunately over the last 1-2 weeks she reports that contact with her child (who is in kinship care) has been reduce to once weekly secondary to social work. As a result of this the patient states she feels much more anxious, tearful and distressed, struggling to sleep at night and feeling isolated at times. No thoughts of harm / suicide, feels safe and well supported but struggling with these symptoms in context of recent stressful event. The patient remains under GP follow-up - I'd be grateful for your specialist support in the interim in light of her worsening symptoms. She has been given appropriate worsening advice in the interim. Many thanks

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history

Current medication (Active Repeat medication issued within the last 12 months)

No current medications recorded

Recent medication (Any medication issued within last 90 days not shown above)

No recent medications recorded

Blood Pressure

No Blood Pressures Recorded

Body Measurements

No Body Measurements Recorded

Clinical warnings

Additional Support Needs

No known ASN requirements

Additional relevant information

Has the patient given consent for sharing of information?:Yes

Patient will accept any site:Yes

Patient will accept cancellation or short notice appointment (within 1-6 days):Yes

Referred By:Referring GP

Electronic Attachment Present:No

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) **Date**

Registration Details - Patient No: 20331

Personal details...		Address details...	
Date of birth	25/05/1987	Post Code	G31 3LY
Sex	F	House Name Flat No	Flat 3.2
Surname	McLeish	No and Street	312 Cumbernauld Road
Previous Surname		Village	
Forenames	Wendy	Town	Glasgow
Calling Name	Wendy	County	G
Title	Miss		
Birth Surname			
Marital Status			
Ethnic Origin	(White) Scottish		

HA/HB Details...		Contact details...	
Trading partner	Greater Glasgow	Home Tel No	07912347436
Registered GP	Dr Margaret Morris	Work Tel No	
Usual GP	Dr Margaret Morris	Mobile Tel No	
Residential Inst		E Mail Address	
Branch Surgery			
CHI Number	2505876061		
NHS Number			

Practice Information...		Distances	
Dispensing	N	Rural Mileage	
Hospital Number		Blocked Special	
Records At		Walking Quarters	

Further Information		Upload Consent	
Long/Short stay or Dead		SCI-DC Consent	Implied Consent (default)
Date of registration	10/06/2021		

AMS\MCR Details		ECS (GP Summary) Consent	
AMS Consent	Yes	Patient Consent	Implied Consent (default)
Pharmacy Details			
Item Collected Check	No		
MCR Suitability Status	-1		
MCR Registration Status	1		

Medical Record

Problems

Active Problems		Authorised By	Code
21/03/2022	Cervical cytology screen	Sister Hirrell	685-1
02/03/2022	Stress at home	Dr Broadley	13HT1
16/03/2021	Substance misuse of Cannabis	Dr Sheppard	EMISNQND9
16/03/2021	Vulnerable child in family	Dr Sheppard	13IQ

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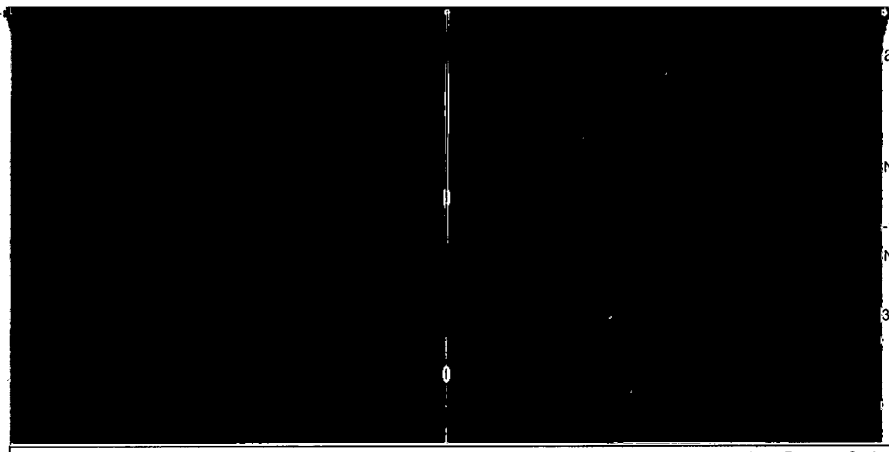
23/03/2022



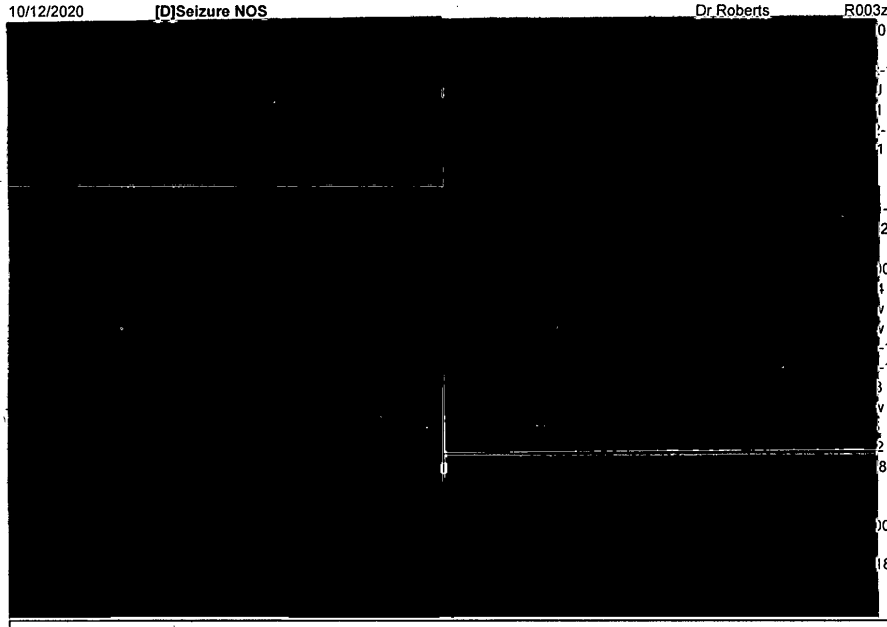
NQND16

-1

NQMI91

3

Past Problems		Authorised By	Code
20/01/2022	**Did not attend - no reason**	Dr Broadley	9N42
07/10/2021	**Anxiousness**	Dr Gibson	1B13
05/10/2021	**Failed encounter - no answer when rang back**	Dr Morris	9N4C
21/09/2021	**Pill check**	Sister Hirrell	614E-1
30/07/2021	**[D]Seizure NOS**	Doctor Lyons	R003z-1
11/06/2021	**Failed encounter - message left on answer machine**	Dr McNee	9N4F
10/12/2020	**[D]Seizure NOS**	Dr Roberts	R003z-1



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1

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2

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2

8

0-2

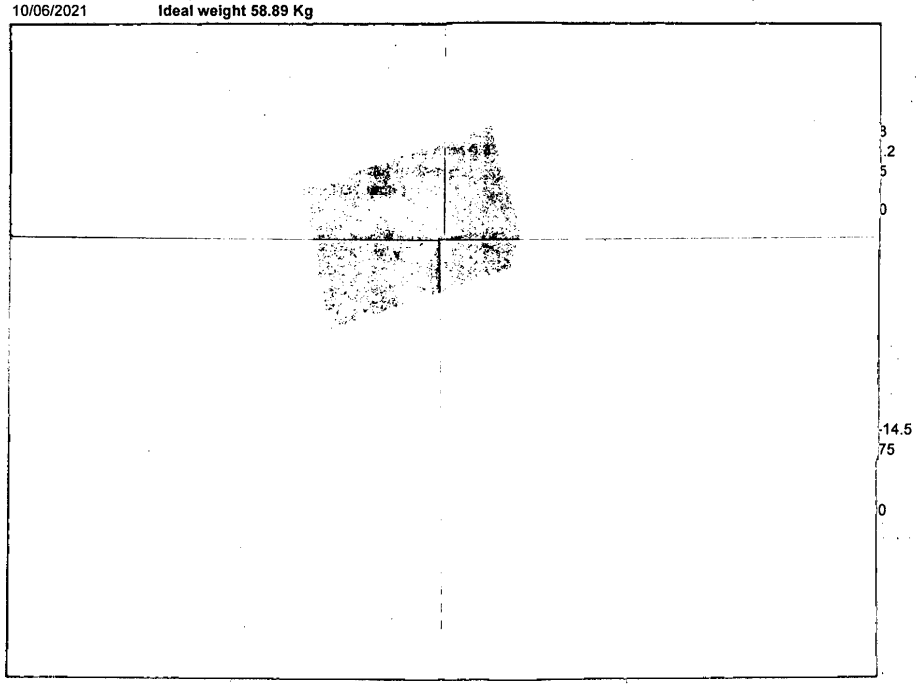
18882g1771

Health Admin Problems	Authorised By	Code

Investigations		Authorised By	Code
14/01/2022	**(Non Coded Event - HbA1C (IFCC))** (Source: LAB) .		
14/01/2022	**(Non Coded Event - Glucose)** (Source: LAB) . Non-fasting sample|		
14/01/2022	**(Non Coded Event - Full Blood Count)** (Source: LAB) .		
14/01/2022	**(Non Coded Event - Bone Profile)** (Source: LAB) . (NA) Specimen haemolysed, result invalid.|		
14/01/2022	**(Non Coded Event -)** (Source: LAB) . (NA) Specimen haemolysed, result invalid.|		
14/01/2022	**Liver function tests** (Source: LAB) . (NA) Specimen haemolysed, result invalid.|		44D..
14/01/2022	**(Non Coded Event - Thyroid funct test)** (Source: LAB) .		

Values			
Date	Last Entry	Normal Range	Normal Range

		Indicator	
14/01/2022	Haemoglobin A1c level - IFCC standardised 28 mmol/mol	....|.....	20-41
14/01/2022	Plasma glucose level 4.5 mmol/L	....|.....	3.5-6
14/01/2022	Total white cell count 8 x10^9/l	.....|...	4-10
14/01/2022	Red blood cell (RBC) count 4.15 x10^12/l	..|.....	3.8-5.8
14/01/2022	Haemoglobin estimation 144 g/l	.....|....	115-165
14/01/2022	Haematocrit 0.398 l/l	...|.....	0.37-0.47
14/01/2022	Mean corpuscular volume (MCV) 95.9 fl	.....|...	83-101
14/01/2022	Mean corpusc. haemoglobin(MCH) 34.7 pg	..... |	27-32
14/01/2022	Platelet count 324 x10^9/l	.....|...	150-410
14/01/2022	Neutrophil count 4.9 x10^9/l	.....|....	2-7
14/01/2022	Lymphocyte count 2.3 x10^9/l	...|.....	1.1-5
14/01/2022	Monocyte count 0.7 x10^9/l	.....|....	0.2-1
14/01/2022	Eosinophil count 0.13 x10^9/l	..|.....	0.02-0.5
14/01/2022	Basophil count 0 x10^9/l	|.....	0-0.1
14/01/2022	Nucleated red blood cell count 0 x10^9/l		
14/01/2022	Serum calcium 2.24 mmol/L	.|.....	2.2-2.6
14/01/2022	Corrected serum calcium level 2.29 mmol/L	..|.....	2.2-2.6
14/01/2022	Serum inorganic phosphate NA	|	0.8-1.5
14/01/2022	Serum albumin 36 g/L	.|.....	35-50
14/01/2022	Serum alkaline phosphatase 61 U/L	...|.....	30-130
14/01/2022	Serum sodium 137 mmol/L	...|.....	133-146
14/01/2022	Serum potassium NA	|	3.5-5
14/01/2022	Serum chloride 109 mmol/L	.....|	95-108
14/01/2022	Serum urea level 4.8 mmol/L	....|.....	2.5-7.8
14/01/2022	Serum creatinine 57 umol/L	..|.....	40-130
14/01/2022	GFR calculated abbreviated MDRD > 60		
14/01/2022	Serum total bilirubin level 9 umol/L		
14/01/2022	ALT/SGPT serum level 23 U/L	.....|.....	5-40
14/01/2022	AST serum level NA		
14/01/2022	Serum TSH level 1.01 mU/L	.|.....	0.35-5
14/01/2022	Serum free T4 level 11.2 pmol/L	..|.....	9-21
14/01/2022	Serum total T3 level		
21/09/2021	O/E - BP reading		
21/09/2021	Blood pressure reading 120/60 mm Hg		
12/08/2021	Urinalysis = no abnormality		
10/06/2021	Alcohol consumption 1 units/week		
10/06/2021	O/E - height 160.02 cm	.....|....	10-250
10/06/2021	O/E - weight 82.55 Kg		
10/06/2021	Body Mass Index 32.24	..... |	20-25
10/06/2021	Ideal weight 58.89 Kg		



[redacted]

Attachments			Authorised By	Code
02/03/2022	**eMED3 (2010) new statement issued, not fit for work** FitNote.pdf, (Diagnosis: Stress at home; Duration: 02/03/2022 - 30/03/2022)	FitNote_66a02617-13d8-47a0-b996-4c7da13f7879.pdf	Dr Broadley	9D15
03/02/2021	**Attachment** Referral Letter (03-Feb-2021), for EMISSPR400: Neurology referral (SCI Gateway Referral)	Referral Letter 2594021.html	Dr Sheppard	EMISATTACHMENT

Overdue Diary Entries		Authorised By	Code
17/07/2021	**Cervical smear due OVERDUE** SCCRS Recall	Ms Reid	685F.

Alerts		Authorised By	Code
	None		

Referrals		Authorised By	Code
07/10/2021	**EMISSPR1: Speciality referrals (SCI Gateway Referral)**	Dr Gibson	EMISSPR1
03/08/2021	**8H...: Referral for further care (SCI Gateway Referral)**	Dr Morris	8H
15/06/2021	**8H...: Referral for further care (SCI Gateway Referral)**	Dr Morris	8H
03/02/2021	**EMISSPR400: Neurology referral (SCI Gateway Referral)** SelfReferral, Out Patient	Dr Sheppard	EMISSPR400-18882g437

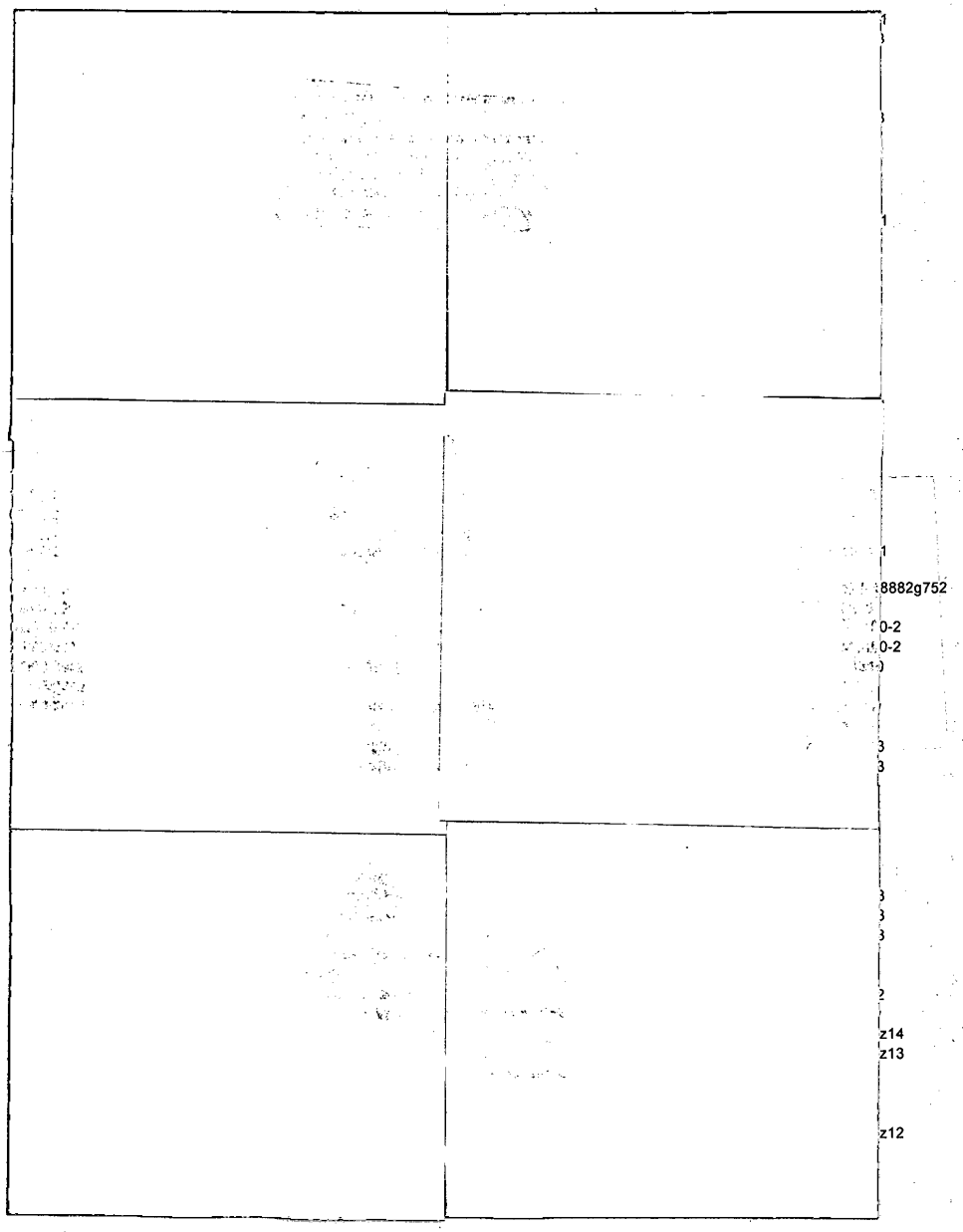
Immunisations		Authorised By	Code
	None		

Health Status		
[redacted]	~~White Scottish~~	
[redacted]	~~Cervical smear result Cervical smear negative.~~	
10/06/2021	**Height 160.02 cm**	
10/06/2021	**Weight 82.55 Kg**	
10/06/2021	**Body Mass Index 32.24 kg/m2**	
21/09/2021	**Blood pressure reading O/E - BP reading**	
21/09/2021	**Blood pressure reading 120/60 mm Hg**	
10/06/2021	**Alcohol consumption 1 units/week**	
07/10/2021	**Smoking Status Non-smoker**	

Other Observations		Authorised By	Code
21/03/2022	**O/E Cervix: transitional zone seen**	Sister Hirrell	EMISHGT62
21/03/2022	**O/E - no vaginal discharge**	Sister Hirrell	26A1
21/03/2022	**O/E-vaginal speculum exam. NAD**	Sister Hirrell	2691
21/03/2022	**Cervical smear taken**	Sister Hirrell	7E2A2
20/03/2022	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: See MJog for Smart Message Details.		9N3G

14/03/2022	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment on Mon, 21 of Mar at Meadowpark Surgery. This will be a telephone consultation unless you have been asked to attend face to face. If unable to attend please send CANCEL to 07903590756.		9N3G
28/02/2022	**SMS text sent to patient** Summary of text message sent to patient / Dear Wendy McLeish, We wish to consolidate our services onto our main site at 568 Alexandra Parade. We propose to close our small branch surgery at 214 Meadowpark Street later this year. For more information and a link to patient feedback, please visit our website at www.meadowparksurgery.co.uk Kind Regards Meadowpark Surgery 0141 554 0464 / Branch Surgery Closure Text Message		9N3G
22/02/2022	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: See MJog for Smart Message Details.		9N3G
16/02/2022	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment on Wed, 23 of Feb at Meadowpark Surgery. This will be a telephone consultation unless you have been asked to attend face to face. If unable to attend please send CANCEL to 07903590756.		9N3G
02/02/2022	**SMS text received from patient** Type: Appointment Reminder Status: Reply Received Message: See MJog for Smart Response Details.		9N3H
02/02/2022	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: See MJog for Smart Message Details.		9N3G
27/01/2022	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment on Thu, 03 of Feb at Meadowpark Surgery. This will be a telephone consultation unless you have been asked to attend face to face. If unable to attend please send CANCEL to 07903590756.		9N3G
25/01/2022	**Failed encounter** - calling to rechedule F2F appt for today with Dr Broadley - change to next week if calls back. I will send an Mjog text also.	Ms Carruth	9N4
25/01/2022	**SMS text sent to patient** Summary of smart message sent to patient / Message from Meadowpark Surgery Dear Wendy, Due to unforeseen circumstances we will need to cancel your 10:20am face to face appointment with Dr Broadley this morning. Please contact the surgery to re-schedule for next week. Kind Regards Meadowpark Surgery 0141 554 0464		9N3G
24/01/2022	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: See MJog for Smart Message Details.		9N3G
19/01/2022	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: See MJog for Smart Message Details.		9N3G
18/01/2022	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment on Tue, 25 of Jan at Meadowpark Surgery. This will be a telephone consultation unless you have been asked to attend face to face. If unable to attend please send CANCEL to 07903590756.		9N3G
14/01/2022	**Blood sample -> Lab NOS**	Mrs Fullerton	4145
13/01/2022	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment on Thu, 20 of Jan at Meadowpark Surgery. This will be a telephone consultation unless you have been asked to attend face to face. If unable to attend please send CANCEL to 07903590756.		9N3G
13/01/2022	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: See MJog for Smart Message Details.		9N3G
12/01/2022	**Failed encounter** - rang out then went to giffgaff voicemail - calling to offer F2F appt as per message below	Ms Carruth	9N4
07/01/2022	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment on Fri, 14 of Jan at Meadowpark Surgery. This will be a telephone consultation unless you have been asked to attend face to face. If unable to attend please send CANCEL to 07903590756.		9N3G
06/01/2022	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: See MJog for Smart Message Details.		9N3G
31/12/2021	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment on Fri, 07 of Jan at Meadowpark Surgery. This will be a telephone consultation unless you have been asked to attend face to face. If unable to attend please send CANCEL to 07903590756.		9N3G
29/12/2021	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: See MJog for Smart Message Details.		9N3G
23/12/2021	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment on Thu, 30 of Dec at Meadowpark Surgery. This will be a telephone consultation unless you have been asked to attend face to face. If unable to attend please send CANCEL to 07903590756.		9N3G
22/12/2021	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: See MJog for Smart Message Details.		9N3G
16/12/2021	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment on Thu, 23 of Dec at Meadowpark Surgery. This will be a telephone consultation unless you have been asked to attend face to face. If unable to attend please send CANCEL to 07903590756.		9N3G
07/10/2021	**Non-drinker alcohol**	Dr Gibson	1361-2
	Non-smoker hx noted, ongoing longstanding anxiety, tremors, seen by		

07/10/2021	neurology and advised related to anxiety, using propranolol, feels doesn't help her, also uses saba for sob up stairs at times, but aware not to use b-blocker and saba at same time, feels b=blocker doesn't work for anxiety either, note hx with vunerable child, states daughter 4 y/o old in care of sister in law, sees her 3 times a week supervised for 2 hours, upset with this, under court review , stressed with this, not sleeping, no illicit drugs,	Dr Gibson	1371-1
28/09/2021	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appt on Tue 05 of Oct at Meadowpark Surgery. This will be a telephone consultation unless you have been told to attend a face to face appointment. Please text CANCEL to 07903590756 if you can't attend.		9N3G
14/09/2021	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appt on Tue 21 of Sep at Meadowpark Surgery. This will be a telephone consultation unless you have been told to attend a face to face appointment. Please text CANCEL to 07903590756 if you can't attend.		9N3G
12/08/2021	**Ex-smoker - amount unknown**	Dr McNee	137F
30/07/2021	**Anxiety with depression (REVIEW)**	Doctor Lyons	E2003
29/07/2021	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appt on Fri 30 of Jul at Meadowpark Surgery. This will be a telephone consultation unless you have been told to attend a face to face appointment. Please text CANCEL to 07903590756 if you can't attend.		9N3G
23/07/2021	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment on Fri, 30 of Jul at Meadowpark Surgery. This will be a telephone consultation unless you have been asked to attend face to face. If unable to attend please send CANCEL to 07903590756.		9N3G
16/06/2021	**Notes summary on computer**	Mrs Sweeney	9344
15/06/2021	**Anxiety with depression (REVIEW)**	Dr Morris	E2003
10/06/2021	**Never smoked tobacco**	Mrs Robinson	1371
30/03/2021	**Vulnerable child in family (REVIEW)**	Dr Sheppard	13IQ
23/03/2021	**Drug therapy discontinued** Mirtazapine Tablets 45 mg 56 tablet Medication dosage changed wt gain	Dr Sheppard	8B3R
23/03/2021	**Vulnerable child in family (REVIEW)**	Dr Sheppard	13IQ
23/03/2021	**Has a tremor (REVIEW)**	Dr Sheppard	1B22
23/03/2021	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
23/03/2021	**SMS text sent to patient** We are receiving a huge amount of phone calls regarding repeat prescriptions. Having requested a prescription please wait 48hrs then collect from the nominated pharmacy. Do not call us unless your prescription is not with your pharmacy after 48hrs. Please note Boots in health centre ask for 72hrs before collecting.	Mr User	9N3G-18882g2
18/03/2021	**Has a tremor (REVIEW)**	Dr Roberts	1B22
18/03/2021	**Anxiety with depression (REVIEW)**	Dr Roberts	E2003
17/03/2021	**SMS text sent to patient**	Mr User	9N3G-18882g2
16/03/2021	**Substance misuse of Cannabis (REVIEW)**	Dr Roberts	EMISNQND9
16/03/2021	**Vulnerable child in family (REVIEW)**	Dr Roberts	13IQ
16/03/2021	**Alcohol problem drinking (REVIEW)**	Dr Roberts	E23-2
16/03/2021	**Social worker involved (REVIEW)**	Dr Roberts	13G4
16/03/2021	**Anxiety with depression (REVIEW)**	Dr Roberts	E2003
16/03/2021	**Substance misuse of Cannabis (REVIEW)**	Dr Sheppard	EMISNQND9
16/03/2021	**Vulnerable child in family (REVIEW)**	Dr Sheppard	13IQ
16/03/2021	**Social worker involved (REVIEW)**	Dr Roberts	13G4
16/03/2021	**Alcohol problem drinking (REVIEW)**	Dr Roberts	E23-2
16/03/2021	**Social worker involved (REVIEW)**	Dr Roberts	13G4
16/03/2021	**Anxiety with depression (REVIEW)**	Dr Roberts	E2003
09/02/2021	**Drug over usage checked**	Ms Boyle	8BIm
08/02/2021	**[D]Seizure NOS (REVIEW)**	Dr Tran	R003z-1
22/12/2020	**Assault by bite of human being (REVIEW)**	Dr Sheppard	TLxy0
22/12/2020	**Social worker involved (REVIEW)**	Dr Sheppard	13G4
22/12/2020	**[D]Seizure NOS (REVIEW)**	Dr Roberts	R003z-1
22/12/2020	**Social worker involved (REVIEW)**	Dr Roberts	13G4
10/12/2020	**Social worker involved (REVIEW)**	Dr Roberts	13G4
10/12/2020	**Alcohol problem drinking (REVIEW)**	Dr Roberts	E23-2
23/10/2020	**Drug therapy discontinued** Propranolol Hydrochloride Tablets 40 mg 56 tablet Medication stopped due to adverse reaction wheeze on highe in the past	Dr Sheppard	8B3R
23/10/2020	**Drug therapy discontinued** Propranolol Hydrochloride Tablets 10 mg 28 tablet Medication dosage changed	Dr Sheppard	8B3R
23/10/2020	**Has a tremor (REVIEW)**	Dr Sheppard	1B22
23/10/2020	**Alcohol problem drinking (REVIEW)**	Dr Sheppard	E23-2
23/10/2020	**Social worker involved (REVIEW)**	Dr Sheppard	13G4
18/08/2020	**Pityriasis versicolor (REVIEW)**	Dr Sheppard	AB10
04/02/2020	**Drug therapy discontinued** Mirtazapine Tablets 45 mg 28 tablet Medication no longer required	Dr Roberts	8B3R
04/02/2020	**Drug therapy discontinued** Propranolol Hydrochloride Tablets 10 mg 28 tablet Medication no longer required	Dr Roberts	8B3R
		Dr Sheppard	E23-2
		Dr Roberts	E2003



Consultations	
21/03/2022 11:07	Sister Lisa Hirrell at Meadowpark Surgery
Problem (NEW)	**Cervical cytology screen**
Examination	Cervical smear taken
	O/E-vaginal speculum exam. NAD
	O/E - no vaginal discharge
Comment	Attended for the above , cervical smear taken with consent . No menses as on POP , No IRB/PCB - advised of time scale for results.
Additional	O/E Cervix: transitional zone seen
---	---
-	---

21/03/2022 10:15	Ms Jacqueline O'May at Meadowpark Surgery
Comment	Pt returned call - Pt would like f2f app which I booked for pt as per Dr Broadleys ins below - Pt said she would like another fitnote from 30/3/22
-	----
21/03/2022 09:21	Dr Samuel Broadley at Meadowpark Surgery
History	failed encounter x2 straight to voicemail. message left. if calls back please re-appoint routine telephone / f2f appt - can offer a 1-hour time window within surgery hours (if tel appt) that suits patient for this - can extend fit note while awaiting this
-	----
20/03/2022	at MJog
Additional	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: See MJog for Smart Message Details.
-	----
14/03/2022	at MJog
Additional	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment on Mon, 21 of Mar at Meadowpark Surgery. This will be a telephone consultation unless you have been asked to attend face to face. If unable to attend please send CANCEL to 07903590756.
-	----
02/03/2022 15:09	Ms Alana Carruth at Data Entry
Comment	call back from patient - relayed message from Dr Broadley - has routine telephone consultation booked 21/03/22
-	----
02/03/2022 14:54	Ms Alana Carruth at Data Entry
Comment	attempt to call patient to relay message from Dr Broadley - rang out then went to GiffGaff voicemail
-	----
02/03/2022 12:11	Dr Samuel Broadley at Meadowpark Surgery
Problem (FIRST)	**Stress at home**
History	not an emergency situation warranting duty doctor review today - reviewed background and previous notes - given reported circumstances will issue an initial fit note for stress while awaiting routine GP review to discuss home situation in detail and agree a long-term plan to support her
Additional	eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: Stress at home; Duration: 02/03/2022 - 30/03/2022)
-	----
02/03/2022 08:25	Ms Alana Carruth at Data Entry
Comment	call from patient - states needs a fitnote today as has been put off income support and Universal Credit need a Fitnote within next 5 days or they will state she is fit for work because her child is now 5 years old. Explained same day appointments are for same day illness but insistant needs appt today. Has pre-booked appt 21/03/22.
-	----
28/02/2022	at MJog
Additional	SMS text sent to patient Summary of text message sent to patient / Dear Wendy McLeish, We wish to consolidate our services onto our main site at 568 Alexandra Parade. We propose to close our small branch surgery at 214 Meadowpark Street later this year. For more information and a link to patient feedback, please visit our website at www.meadowparksurgery.co.uk Kind Regards Meadowpark Surgery 0141 554 0464 / Branch Surgery Closure Text Message
-	----
22/02/2022	at MJog
Additional	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: See MJog for Smart Message Details.
-	----
21/02/2022 17:20	Dr Graham Strain at Meadowpark Surgery
Medication	Cerelle Tablets 75 micrograms *168 tablet 1 Tab Daily*
-	----
21/02/2022	Mrs Audrey Hughes at Meadowpark Surgery
Comment	sp- Cerrelle
-	----
16/02/2022	at MJog
	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment on Wed, 23 of

Additional	Feb at Meadowpark Surgery. This will be a telephone consultation unless you have been asked to attend face to face. If unable to attend please send CANCEL to 07903590756.
-	----
02/02/2022	at MJog
Additional	SMS text received from patient Type: Appointment Reminder Status: Reply Received Message: See MJog for Smart Response Details.
-	----
02/02/2022	at MJog
Additional	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: See MJog for Smart Message Details.
-	----
27/01/2022	at MJog
Additional	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment on Thu, 03 of Feb at Meadowpark Surgery. This will be a telephone consultation unless you have been asked to attend face to face. If unable to attend please send CANCEL to 07903590756.
-	----
25/01/2022 08:23	Ms Alana Carruth at Data Entry
Comment	Failed encounter - calling to rechedule F2F appt for today with Dr Broadley - change to next week if calls back. I will send an Mjog text also.
-	----
25/01/2022	at MJog
Additional	SMS text sent to patient Summary of smart message sent to patient / Message from Meadowpark Surgery Dear Wendy, Due to unforeseen circumstances we will need to cancel your 10:20am face to face appointment with Dr Broadley this morning. Please contact the surgery to re-schedule for next week. Kind Regards Meadowpark Surgery 0141 554 0464
-	----
24/01/2022	at MJog
Additional	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: See MJog for Smart Message Details.
-	----
20/01/2022 15:54	Dr Samuel Broadley at Meadowpark Surgery
Problem (FIRST)	**Did not attend - no reason**
-	----
20/01/2022 12:03	Dr Samuel Broadley at Patient Not Seen - Information Only
History	reviewed bloods ahead of appt - all satisfactory. likely would aim to try stopping propranolol to see if helps with faitgue + wheeze symptoms - will discuss
-	----
19/01/2022	at MJog
Additional	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: See MJog for Smart Message Details.
-	----
18/01/2022	at MJog
Additional	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment on Tue, 25 of Jan at Meadowpark Surgery. This will be a telephone consultation unless you have been asked to attend face to face. If unable to attend please send CANCEL to 07903590756.
-	----
17/01/2022 10:14	Mrs Ann Marie MacLennan at Data Entry
Comment	Review appt
-	----
14/01/2022	Mrs Pauline Sweeney at General Practice Surgery
Result	(Non Coded Event - HbA1C (IFCC))
-	----
14/01/2022	Mrs Pauline Sweeney at General Practice Surgery
Result	(Non Coded Event - Glucose)
-	----
14/01/2022	Mrs Pauline Sweeney at General Practice Surgery
Result	(Non Coded Event - Full Blood Count)
-	----

14/01/2022	Mrs Pauline Sweeney at General Practice Surgery
Result	(Non Coded Event - Thyroid funct test) Liver function tests (Non Coded Event -) (Non Coded Event - Bone Profile)
-	----
14/01/2022	Mrs Sharon Fullerton at Meadowpark Surgery
Problem	**Blood sample -> Lab NOS**
Comment	Both ears compacted with wax. Washout completed TM now visible in both ears no problems.
Test Request	Glucose - *Completed*, Bone Profile - *Completed*, Urea and Electrolytes - *Completed*, Liver Function Tests - *Completed*, Thyroid function tests - *Completed*, HbA1c - *Completed*, Full Blood Count - *Completed*
-	----
13/01/2022 09:21	Mrs Audrey Hughes at Meadowpark Surgery
Comment	pt called back app booked
-	----
13/01/2022	at MJog
Additional	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment on Thu, 20 of Jan at Meadowpark Surgery. This will be a telephone consultation unless you have been asked to attend face to face. If unable to attend please send CANCEL to 07903590756.
-	----
13/01/2022	at MJog
Additional	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: See MJog for Smart Message Details.
-	----
12/01/2022 17:31	Ms Alana Carruth at Data Entry
Comment	Failed encounter - rang out then went to giffgaff voicemail - calling to offer F2F appt as per message below
-	----
11/01/2022 12:18	Dr Samuel Broadley at Meadowpark Surgery
History	note concerns about propranolol given some wheeze on examinations - may have to stop this while investigating respiratory issues. has appt for bloods on 14/1. **please can staff organise f2f appt with me in 2 weeks to re-examine breathing and can review blood results**
Medication	Propranolol Hydrochloride Tablets 10 mg *84 tablet ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED* Mirtazapine Tablets 30 mg *56 TABLET ONE TO BE TAKEN AT NIGHT*
-	----
11/01/2022 10:37	Ms Alana Carruth at Data Entry
Comment	sr - mirtazipine, propanolol (3/3 issued)
-	----
07/01/2022	at MJog
Additional	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment on Fri, 14 of Jan at Meadowpark Surgery. This will be a telephone consultation unless you have been asked to attend face to face. If unable to attend please send CANCEL to 07903590756.
-	----
06/01/2022	at MJog
Additional	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: See MJog for Smart Message Details.
-	----
31/12/2021	at MJog
Additional	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment on Fri, 07 of Jan at Meadowpark Surgery. This will be a telephone consultation unless you have been asked to attend face to face. If unable to attend please send CANCEL to 07903590756.
-	----
29/12/2021	at MJog
Additional	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: See MJog for Smart Message Details.
-	----
23/12/2021	at MJog

Additional	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment on Thu, 30 of Dec at Meadowpark Surgery. This will be a telephone consultation unless you have been asked to attend face to face. If unable to attend please send CANCEL to 07903590756.
-	----
22/12/2021	at MJog
Additional	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: See MJog for Smart Message Details.
-	----
16/12/2021	at MJog
Additional	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment on Thu, 23 of Dec at Meadowpark Surgery. This will be a telephone consultation unless you have been asked to attend face to face. If unable to attend please send CANCEL to 07903590756.
-	----
09/12/2021 14:33	Dr Samuel Broadley at Meadowpark Surgery
History	SOB and fatigue and some right-sided chest wall discomfort. worried about chest infection. right ear sore + blocked + some vertiginous dizziness. denies any drug misuse at present, states not smoking
Examination	apperas intoxicated + slightly tremulsous ?benzos. RR 16, chest good air entry minimal wheeze to lower zones, no creps, HR 80, otoscopy - both ears blocked with wax.
Comment	consider stopping propranolol. amoxicillin + pred course acutely given clear longstanding smoking history. routine bloods for fatigue. appt made for bloods + ear syringing
Medication	Amoxicillin Capsules 500 mg *15 CAPSULE ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS* Prednisolone Tablets 5 mg *40 TABLET EIGHT TO BE TAKEN IN THE MORNING*
Test Request	Glucose - *Requested*, Bone Profile - *Requested*, Urea and Electrolytes - *Requested*, Liver Function Tests - *Requested*, Thyroid function tests - *Requested*, HbA1c - *Requested*, Full Blood Count - *Requested*
-	----
09/12/2021 11:06	Dr Amanda Gibson at Telephone consultation during COVID-19
History	2/52 sore ears, using ear drops - not helping, bilateral, no hearing issues, feels dizzy and off balance, on and off, fell this morning getting out of bed, no injuries, no fevers, reduced appetite, doesn't have much of appetite, feels SOB at times aswell on walking around house/short distances, no cough, pain to back on R side of back, not pleuritic, doesn't appear SOB over phone, tired at times
Comment	given f2f appt to review , vague in conversation over phone
-	----
09/12/2021 08:13	Ms Jacqueline O'May at Meadowpark Surgery
Comment	Pt said both of her ears are sore and its knock off her balance has been using ear drops for 1 week and they are not helping - also mentioned she has pain on the left side of her back.
-	----
10/11/2021 13:23	Dr Sabha Ali at Meadowpark Street Surgery
Problem	sr issued
-	----
10/11/2021 09:41	Mrs Ruth Gallacher at Meadowpark Surgery
Comment	patient req mirtazepine
-	----
07/10/2021 10:39	Dr Amanda Gibson at Meadowpark Surgery
Problem (FIRST)	**Anxiousness**
History	Non-smoker hx noted, ongoing longstanding anxiety, tremors, seen by neurology and advised related to anxiety, using propranolol, feels doesn't help her, also uses saba for sob up stairs at times, but aware not to use b-blocker and saba at same time, feels b=blocker doesn't work for anxiety either, note hx with vunerable child, states daughter 4 y/o old in care of sister in law, sees her 3 times a week supervised for 2 hours, upset with this, under court review , stressed with this, not sleeping, no illicit drugs, Non-drinker alcohol
Comment	spoke about anxiety and methods to help symptoms, exercise, speaking to people, would be keen to speak to counsellor, was referred to GAMH and Quarriers by social work but still no input yet, ?CDRS, will refer
New Referral	(NHS), , , , EMISSPR1: Speciality referrals (SCI Gateway Referral)
-	----
05/10/2021 11:03	Dr Margaret Morris at Telephone Consultation

Problem	spoke to Wendy - quite difficult to hear her but it seems she is upset as she has been told by SW that she will not get her daughter back - apparently her daughter is under the care of her sister in law
Comment	feels it is affecting her mental health - wishes to see GP in person - can only come later in week as attending for SW reports at present - agreed can have appt on Thursday
-	-
05/10/2021 09:39	Dr Margaret Morris at Data Entry
Problem (FIRST)	**Failed encounter - no answer when rang back**
-	-
28/09/2021	at MJog
Additional	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appt on Tue 05 of Oct at Meadowpark Surgery. This will be a telephone consultation unless you have been told to attend a face to face appointment. Please text CANCEL to 07903590756 if you can't attend.
-	-
21/09/2021 10:17	Sister Lisa Hirrell at Meadowpark Surgery
Problem (FIRST)	**Pill check**
Examination	O/E - BP reading Blood pressure reading 120/60 mm Hg
Family History	No Diab , CVD , VTEs , Breast Ca .
Comment	New patient to surgery awaiting on being reviewed at seizure clinic . No reports of side effects with POP , Reports good compliance with POP aware of missed/late pill guidelines. Px alrasy issued prior to patient appt . BP - satisfactory
-	-
15/09/2021 12:26	Dr Amanda Gibson at Meadowpark Surgery
History	s/r given
-	-
14/09/2021 15:31	Mrs Ann Marie MacLennan at Data Entry
Comment	SR - Mirtazipine 30mg
-	-
14/09/2021 15:01	Dr Sabha Ali at Meadowpark Street Surgery
Problem	sr- is on 30mg mirtazapine. to speak to GP if wishes to increase dose.
-	-
14/09/2021 14:42	Ms Jacqueline O'May at Meadowpark Surgery
Comment	Pt requests Mirtazapine 45mg
-	-
14/09/2021	at MJog
Additional	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appt on Tue 21 of Sep at Meadowpark Surgery. This will be a telephone consultation unless you have been told to attend a face to face appointment. Please text CANCEL to 07903590756 if you can't attend.
-	-
13/09/2021 15:44	Mrs Ruth Gallacher at Meadowpark Surgery
Comment	patiet req cerelle- will arrange contraception review with nurse - please issue a small supply as she has run out
-	-
13/09/2021 15:37	Mrs Ruth Gallacher at Meadowpark Surgery
Comment	patient ordering cerelle on repeat px line- left message on ans mach to arrange a contraception review with PN
-	-
12/08/2021 14:05	Dr Mena McNee at Telephone Consultation
History	Asking for an inhaler - lives in a flat - feels short of breath when walking, climbing stairs, or walking long distances. Had this for years and used to take SABA with good effect - asking for same.
Social	Ex-smoker - amount unknown
Comment	Agreed to issue but advised that beta-blockers contraindicated as interferes with mechanism of action and can cause bronchospasm - says she hardly uses beta-blocker now and only for panic attacks.
Medication	Salbutamol Cfc-free inhaler 100 micrograms/puff *1 INHALER ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY*
-	-
History	Thinks has a uti - itchy down below and sore when passes urine more frequently.

Comment	Will hand in sample - if clear - manage as thrush.
-	-
12/08/2021 08:08	Mrs Ann Marie MacLennan at Meadowpark Surgery
Comment	Pain between shoulder blades, making her breathless, thinks she need an inhaler, pneumonia 2yrs ago, also thinks she may have a UTI, - will hand sample in
-	-
12/08/2021	Mrs Sharon Fullerton at Meadowpark Surgery
Comment	Urinalysis = no abnormality
-	-
03/08/2021 12:26	Ms Bridget Orr at Meadowpark Surgery
Comment	referral to QEUH first seizure clinic via Dr Lyons
-	-
30/07/2021 14:27	Doctor Matthew Lyons at Meadowpark Surgery
Problem (REVIEW)	**Anxiety with depression**
History	tel consult. patient on a bus- slightly difficult to hear - offered to phone back but patient happy to discuss things on the bus. ongoing anxiety. on propranolol and mirtaz 30mg. was reduced from 45mg a few weeks ago due to weight gain., feels mirtaz has never helped with anxiety but does help with sleep. recent cmht referral. spoke to cpn last week and was expecting a call back this week after MDT. asking about additional meds for anxiety - explained would be beter to wait for plan from cmht.
-	
Problem (NEW)	**[D]Seizure NOS**
History	reports having had a seizure 6 days ago witnessed by her boyfriend whilst watching tv at hoime. no tongue biing, no incontinence. patient states she has no recollection of event. boyfriend didn't call SAS as says only lasted a few mins - reports body going stiff then all4 limbs shaking. no injuries sustained. fewels well at present. denies any recent alkcohol or illicit drugs. ref to 1st seizure clinic in december and re-referref feb - not heard anything. will send further referral for info to neurology to update re: further seizure.
-	-
26/07/2021 16:35	Dr Graham Strain at Meadowpark Surgery
Medication	Mirtazapine Tablets 30 mg *56 tablet ONE TO BE TAKEN AT NIGHT*
-	-
26/07/2021 15:37	Miss Rachel Greene at Meadowpark Surgery
Comment	sr mirtazipine
-	-
22/07/2021 16:45	Mrs Jacqueline Robinson at Meadowpark Surgery
Comment	Wants to speak to gp regarding medication
-	-
15/06/2021 14:49	Ms Bridget Orr at Meadowpark Surgery
Comment	referral to cmht arran centre banked
-	-
15/06/2021 14:06	Dr Margaret Morris at Telephone Consultation
Problem (REVIEW)	**Anxiety with depression**
History	new patient - requesting CPN referral for anger management, anxiety and depression - agree I will refer her
Comment	spoke to Arthur Jarvis SW - she has a daughter Khara aged 4 years who has been in local authority care for 18 months and is likley to remain there - history of alcohol and cannabis misuse - attended nursery with Khara drunk on one occasion - also noted to be strongly smelling of cannabis by carers but she denies drug use - request for CPN has come from Wendy (not social work) - no other children - has partner James who has been violent to her and is also involved in alcohol/cannabis
Medication	Mirtazapine Tablets 30 mg *56 tablet ONE TO BE TAKEN AT NIGHT*
-	-
15/06/2021 08:11	Mrs Ruth Gallacher at Meadowpark Surgery
Comment	new patient- requires cpn input
-	-
11/06/2021 10:29	Dr Mena McNee at Meadowpark Surgery
Problem (FIRST)	**Failed encounter - message left on answer machine**
History	Asked to call Arthur - social worker - see workflow. Message left to call back.
-	-
26/05/2021	Dr Lachlan Calder at Phone Encounter

History	SW Karen (07435735240) trying to get in touch with us. I phoned back - no answer. I have left a message on her answering machine.
-	----
26/05/2021	Mrs Donna Rogers at Easterhouse Health Centre
Comment	Safegauarding - Admin task called pt today @ 9.15. PT confirmed she has moved and is now in G31 3LY. full address is flat 3-2 312 Cumbernauld Road. I advised Pt she is now outwith our area, she is aware of this and will be looking for new GP. Address passed to PM.
-	----
30/03/2021	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Vulnerable child in family**
History	discussed at safeguarding meeting no dosordered thought nor bipolar NOC re khara
-	----
23/03/2021 16:04	Dr Emma Sheppard at Medication Course Ended
Medication	Drug therapy discontinued Mirtazapine Tablets 45 mg 56 tablet Medication dosage changed wt gain
-	----
23/03/2021 16:00	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Anxiety with depression**
History	approrpitely low, given sress of dispute w inlaws. not suicidal ,
Examination	O/E - weight, 83 Kg has gained, wants to stay on mirtaz cs helps her sleepp > try lower dose for sedation wout wt gain
Comment	agrees occ health re treamour. is moving 3-2 312 cumbernauld rd G31 3LY permamanet move > rereg. al the best
-	
Problem (REVIEW)	**Has a tremor**
History	says struggels to write
Examination	neuo exam reflexes brisk but symoetcial no bulbar nor facial weekness, some intention tremor
Medication	Mirtazapine Tablets 30 mg 56 tablet ONE TO BE TAKEN AT NIGHT
-	
Comment	not planning preg bu avoid primidone mnoentehess for se. try occ health/physio approach
-	
Problem (REVIEW)	**Vulnerable child in family**
History	I told w that as she has no confidant I recommend ongoing support for her, shde doesn't disagree. I sugest avoid alcohol/drugs given Hxseuizrure, she denies current, upset that current carer has been in hosp w what W understands to be widrawal seizre
-	----
18/03/2021	Dr Kathryn Roberts at Easterhouse Health Centre
History	rtnd GP call from yest. Please call after 11 as has contact with child. Phoned 13.40 Says her social worker has asked her to call us again as Wendy feels anxiety and tremor really bad a the moment. Says has been takign propranolol but prn. Advised I would suggest TDS at the moment to help tremor and anxiety, needs to be compliant with mirtazapine for it to work at its best - has not had script since December, plans to collect new script from pharmacy today. A little irritable on phone when I suggested there may not be something we can prescribe to help with anxiety and may be that needs other supports such as the ones we discussed and spoke about with her SW too. 'surely theres something better you can prescribe?' Could consider switch from mirtazapine and or inc dose of bblocker but I think needs to come in for f2f review given sudden escalation in symptoms and contact with us.
-	
Problem (REVIEW)	**Anxiety with depression**
-	
Problem (REVIEW)	**Has a tremor**
-	----
17/03/2021	Dr Anne McGinley at Data Entry
History	anxiety and tremors looking for adv. message left on voicemail to call us 10.50h
-	----
16/03/2021	Dr Kathryn Roberts at Easterhouse Health Centre
	Phoned Wendy 14.21 - she said initially had script in pharmacy but I said not possible as has not had a script printed since 30/12. She admits sometimes forgetting to take, advised this may have negative impact on her mood/anxiety. Discussed measures such as keeping meds somewhere in house she will see

History	them every day and remember to take or setting alarm on her phone to remind her. Discussed planned support from womens aid, the anchor and SW. I don't feel CMHT can add anything currently. Mood is low and tearful, gets angry very quickly, people have said this means she has 'bipolar', I don't think this represents bipolar. Agreed restart meds reg, review few weeks. Denies thoughts of self harm or suicide at all. Says has keys to move house but not moved yet - SAYS MOVING TO 3/2 312 CUMBERNAULD ROAD G31 3LY - PLEASE CHECK NEXT CONTACT IF SHE HAS MOVED - advised will need to register with another gp when moves as G31 not covered by us.
Problem (REVIEW)	**Anxiety with depression**
Problem (REVIEW)	**Social worker involved**
Problem (REVIEW)	**Alcohol problem drinking**
Problem (REVIEW)	**Vulnerable child in family**
Problem (REVIEW)	**Substance misuse of Cannabis**

16/03/2021	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Vulnerable child in family**
Problem (REVIEW)	**Substance misuse of Cannabis**
History	noted

16/03/2021	Dr Kathryn Roberts at Easterhouse Health Centre
History	Phoned SW Karine Carlyn 07435 735 240 - lengthy conversation. Multiple events recently leading to change in access for Wendy to Khara. There have been a couple of 'violent incidents' between her and ex-partner James - end of Jan/early feb - police involvement. In January nursery also reported Wendy appeared under the influence and a unannounced SW visit to the house corroborated this. SW says house strongly smelt of cannabis, poss tried to have been covered by huge amounts of air freshener. Karine says Wendy became angry ++ with the other SW present and 'came within an inch of assaulting her' - police were involved. Also Wendy knows ex partner James not allowed to stay overnight in house and Khara told carers/SW that daddy had stayed over and mummy had told her not to tell. Also incident this week of Wendy shouting and aggressive towards kinship carer in front of daughter. A childrens panel has been called, likely to be held couple of weeks. SW Karine under impression Wendy is taking mirtazapine and propranolol reg but has not ordered since December - I will d/w Wendy. I don't think CMHT are best placed for 'anger issues' - this is not a medical diagnosis. Suggest SW support Wendy with accessing The Anchor or Moira Anderson with regards childhood trauma and support, suggested also Tom Allen centre for anger issues. Also been referred to womens aid for support. Advised still awaiting seizure clinic.
Problem (REVIEW)	**Social worker involved**

16/03/2021	Dr Kathryn Roberts at Easterhouse Health Centre
History	req to be reffered to Auchinlea fast T if possible . 07912347436. Phoned 12.18 Wendy says has been speaking to SW Karine Carlyn 07435 735 240 and told her to speak to GP about CMHT referral for 'anger issues' as Wendy says she got angry and 'chased the SW' out the house when accused of smoking cannabis. Says was prev getting daily unsupervised contact with daughter Khara but has been reduced to twice weekly supervised visits, really upset with this, a bit teary. Also says has recently lost a close friend.. Advised Wendy I would phone SW to discuss and get back to her. Wendy denies any drug use. Says 'hardly drinks' 'rare occasion now'. Last drink last night - 3 G+T's. Says has been falling out with Kharas kinship carer who Wendy says has been limiting video contact with Khlara.
Problem (REVIEW)	**Anxiety with depression**
Problem (REVIEW)	**Social worker involved**
Problem (REVIEW)	**Alcohol problem drinking**

-	----
16/03/2021	Dr Emma Sheppard at Data Entry
History	phone call made x2 , answerphone message left to please return call giff gaff . req to be reffered to Auchinlea fast T if possible . 07912347436
-	----
08/02/2021	Dr Richard Tran at Telephone Consultation
Problem (REVIEW)	**[D]Seizure NOS**
History	Telephone consultation due to covid pandemic. Patient reports further seizures witnessed by ex partner - one last week and one yesterday evening. Last night's seizure - unsure on exact duration but reports 5-10mins. Description of foaming at mouth, eyes rolling, whole body shaking and being dazed for a while afterwards. Denies fevers. Feels back to normal now. Daughter not present / did not witness event. Recent feeling of anxiety - mainly due to concerns with social work and daughter not living with her full time. Also moving house and friend recently passed away. Denies recent drug use, says only drinks approximatey once per month at present, denies alcohol intake associated with recent events. Note referral to first seizure clinic has been scaled up from routine to urgent by Dr ES. Patient happy with this. D/W Dr AM, no additional action required at present.
-	----
08/02/2021	Dr Anne McGinley at Telephone Consultation
History	anxiety bad also had sezuire last night not feeeling since then
-	----
22/12/2020	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Social worker involved**
History	arthur reports reassurd that w not intoxicated on the am of assessment ? seizure was shortly after that,I pointed out cannt rule out withdrawa seizure, I hgihglighted we not getting any info asked for copies of correspondnace, he will reply if I will correspond to arthur.jarvis@sw.glasgow.gov.uk . I highighted that to my knwoledge W has no postive adult support in her life other than partner , A does nto disagree, I think W should remain supproted even if Khara retunred to her care
-	
Problem (REVIEW)	**Assault by bite of human being**
History	arthur highlightss that scra decisions made without knoweldge of this 1 11 19 incident because W did not press charges, he remains cocnernd about that
-	----
22/12/2020	Dr Kathryn Roberts at Easterhouse Health Centre
History	Phoned social care direct. SW is Arthur Jarvis based in Parkhead office 0141 565 0100 and 565 0140. He is not available when I phoned 11.50am, they have taken message and will ask him to phone back. ?update on Khara - are there any plans to move back to Wendy, note recent hospital admission.
-	
Problem (REVIEW)	**Social worker involved**
-	
Problem (REVIEW)	**[D]Seizure NOS**
-	----
10/12/2020	Dr Kathryn Roberts at Easterhouse Health Centre
History	Admitted to hospital with seizure. CT head nil acute. Denied recent alcohol. Has been referred first seizure clinic.
-	
Problem (FIRST)	**[D]Seizure NOS**
-	
Problem (REVIEW)	**Alcohol problem drinking**
-	
History	?Kara still in kinship care. for SW update.
-	
Problem (REVIEW)	**Social worker involved**
-	----
23/10/2020 12:09	Dr Emma Sheppard at Medication Course Ended
Medication	Drug therapy discontinued Propranolol Hydrochloride Tablets 40 mg 56 tablet Medication stopped due to adverse reaction wheeze on highe in the past
-	----
23/10/2020 11:47	Dr Emma Sheppard at Medication Course Ended
Medication	Drug therapy discontinued Propranolol Hydrochloride Tablets 10 mg 28 tablet

	Medication dosage changed
-	----
23/10/2020	Dr Emma Sheppard at Medication Course Commence
Medication	Propranolol Hydrochloride Tablets 40 mg 56 tablet 1 Tab Twice daily (never issued).
-	----
23/10/2020	Dr Emma Sheppard at Phone Encounter
Problem (REVIEW)	**Social worker involved**
History	tried to get erailer on phone to police as daughter had an accident when in kinship care, this has made her v stressed, Kara due home before christmas
-	
Problem (REVIEW)	**Alcohol problem drinking**
History	not drinking now, no subs misue she says
-	
Problem (REVIEW)	**Has a tremor**
History	wants toi incr propran as stress of alochol assess etc, diffcult due to tesne relationship w foster carer, some anx re child coming for overnights... somunds goo today, nice interaction w child heard on phone, not intoxicvated
Medication	Propranolol Hydrochloride Tablets 10 mg 84 tablet ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED
-	
Comment	wheeze o higher dose in the past, has been taking 10 x 4 at a time if bad > incr amount not dose and stop if wheeze ADVISED THAT NO OTHER MEDS SUITABLE FOR TREMOUR, primidone too toxic givn fertility etc > encoruage cont w womens aid counselling and stress reduction w sw team
-	----
23/10/2020	Dr Emma Sheppard at Data Entry
History	phone call made, answerphone message left to please return call re anxiety is worse. Mob please. (unavailable 11.15-12noon nursery pickup)
-	----
01/10/2020	Ms Liz Bannachan at Data Entry
Comment	Cerelle mirtazapine & propranalol printed as per Dr Sheppard
-	----
30/09/2020	Dr Anne McGinley at Script Request
History	mood has been low but better now. managing to get out to nursery etc. appetite good, sleep variable, mirtazipine helps. SW arrange taxi Mon -Frid to paick up daughter from kinship carer in Bellshill, and to drop her off at 4.30. fallout with aunt just now so variable contact at weekend. Panel hearing coming up..... SW arranging house move ? 2 bedroomed ?? return of daughter to Wendy's care. N alcohol during week, rarely at weekend.
Comment	CT meds
Medication	Cerelle Tablets 75 micrograms 168 tablet 1 Tab Daily Mirtazapine Tablets 45 mg 28 tablet ONE TO BE TAKEN AT NIGHT Propranolol Hydrochloride Tablets 10 mg 28 tablet ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED FOR ANXIETY
-	----
18/08/2020	Dr Emma Sheppard at Phone Encounter
Problem (REVIEW)	**Pityriasis versicolor**
History	out and bout, asks to return call after 13 30 , clotrim works then it reruns, no wt loss, things are more stable, getting wean unsup 11 > 16,00 and hopeful that back from aunts soon
Test request	Glucose - Requested, CRP - Requested, Urea and Electrolytes - Requested, Gamma GT - Requested, Liver Function Tests - Requested, Thyroid function tests - Requested, Full Blood Count - Requested, Chronic Viral Hepatitis Screen - Requested, HIV antibody/antigen (Ab/Ag) screen - Requested
-	----
17/08/2020	Dr Emma Sheppard at Data Entry
History	req clotrim, bbv screen neg 2016 please d/w GP re this
-	----
13/07/2020 15:38	Dr Danish Sohail at Easterhouse Health Centre
History	propronolo and mirtazapine,noted telephonic review on 28/04
-	----
27/05/2020	Dr Anne McGinley at Script Request
Medication	Clotrimazole Cream 1 % 40 gram APPLY TWO TIMES DAILY TO BACK FOR 1-2 WEEKS
-	----

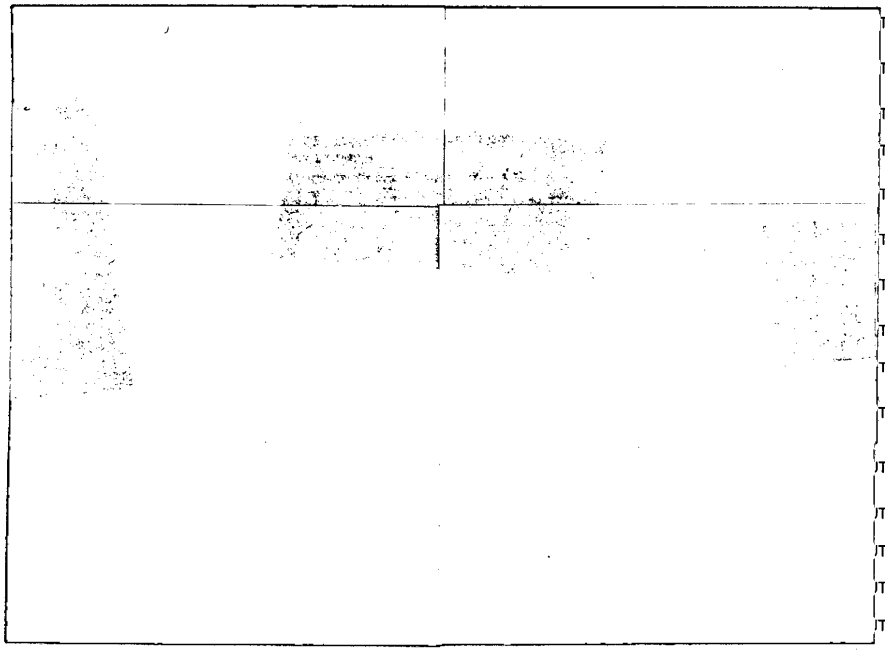
28/04/2020	Dr Anne McGinley at Telephone Consultation
History	returning call back from yesterday, wrong number for pt now updated. mood 'good' says stable, getting out of the house fro short walks, shopping. says no alcohol. friend staying with her. daughter staying with aunt. uses prn propanolol -small dose.
Examination	appropriate, cheerful on phone, sober.
Comment	CT meds, can phone for next script. worsenning advice.
Medication	Mirtazapine Tablets 45 mg 28 tablet ONE TO BE TAKEN AT NIGHT
	Propranolol Hydrochloride Tablets 10 mg 56 tablet ONE TO BE TAKEN UP TO 3 THREE TIMES A DAY IF NEEDED FOR ANXIETY
	Clotrimazole Cream 1 % 40 gram APPLY TWO TIMES DAILY TO BACK FOR 1-2 WEEKS
-	
History	flare of rash on back as before, pitoriasis versicolor, still has ketoconazole shampoos, asking for cream. advised use shampoo ? benefit of topical
-	-
27/04/2020	Dr Kathryn Roberts at Easterhouse Health Centre
History	Patient returned call today re med review. PHoned 12.58 - straight to voicemail, message left to call us back please. Phoned 13.59 - straight to voicemail again
-	-
24/04/2020 11:24	Dr Warren Brownlee at Telephone Consultation
History	Returned patient call. No answer. Message left asking her to call back the practice. I think she is calling to review meds as per 6 April consultation.
-	-
06/04/2020	Dr Kathryn Roberts at Easterhouse Health Centre
History	Tried phoning - straight to voicemail, message left to call us back. Note stapled to scripts 'please contact surgery to speak to gp before next prescription. Please note shorter supply of medication'. I note request late ?compliance with meds.
Medication	Mirtazapine Tablets 45 mg 14 tablet ONE TO BE TAKEN AT NIGHT
	Propranolol Hydrochloride Tablets 10 mg 28 tablet ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY
	Cerelle Tablets 75 micrograms 84 tablet 1 Tab Daily
-	-
21/02/2020 14:15	Dr Warren Brownlee at Easterhouse Health Centre
History	Mirtazapine and Propranolol. Please make appointment for review.
-	-
04/02/2020 13:20	Dr Kathryn Roberts at Medication Course Ended
Medication	Drug therapy discontinued Mirtazapine Tablets 45 mg 28 tablet Medication no longer required
-	-
04/02/2020 13:20	Dr Kathryn Roberts at Medication Course Ended
Medication	Drug therapy discontinued Propranolol Hydrochloride Tablets 10 mg 28 tablet Medication no longer required
-	-
04/02/2020	Dr Kathryn Roberts at Easterhouse Health Centre
History	mirtazapine and propranolol off repeat until review

Medication

Current Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
21/02/2022	**Cerelle Tablets 75 micrograms** 1 Tab Daily 168 tablet	21/02/2022P	Dr Graham Strain	ACUTE
11/01/2022	**Mirtazapine Tablets 30 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	10/03/2022P	Dr Margaret Morris	REPEAT
12/08/2021	**Salbutamol Cfc-free inhaler 100 micrograms/puff** ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY 1 INHALER	03/02/2022P	Dr Mena McNee	REPEAT
15/06/2021	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED 84 tablet	10/03/2022P	Dr Margaret Morris	REPEAT

Past Date Commenced	Drug Details	Date Last Issue	Authorised By	Type

09/12/2021	**Amoxicillin Capsules 500 mg** ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS 15 CAPSULE	09/12/2021P	Dr Margaret Morris	ACUTE
09/12/2021	**Prednisolone Tablets 5 mg** EIGHT TO BE TAKEN IN THE MORNING 40 TABLET	09/12/2021P	Dr Margaret Morris	ACUTE
10/11/2021	**Mirtazapine Tablets 30 mg** ONE TO BE TAKEN AT NIGHT 56 tablet	10/11/2021P	Dr Margaret Morris	ACUTE
15/09/2021	**Mirtazapine Tablets 30 mg** ONE TO BE TAKEN AT NIGHT 56 tablet	15/09/2021P	Dr Margaret Morris	ACUTE
13/09/2021	**Cerelle Tablets 75 micrograms** 1 Tab Daily 168 tablet	13/09/2021P	Dr Margaret Morris	ACUTE
15/06/2021	**Mirtazapine Tablets 30 mg** ONE TO BE TAKEN AT NIGHT 56 tablet	15/06/2021P	Dr Margaret Morris	ACUTE
15/06/2021	**Mirtazapine Tablets 30 mg** ONE TO BE TAKEN AT NIGHT 56 tablet	26/07/2021P	Dr Graham Strain	ACUTE
23/03/2021	**Cerelle Tablets 75 micrograms** 1 Tab Daily 168 tablet	Not Issued	Dr Emma Sheppard	ACUTE
23/03/2021	**Mirtazapine Tablets 30 mg** ONE TO BE TAKEN AT NIGHT 56 tablet	Not Issued	Dr Emma Sheppard	ACUTE
30/09/2020	**Cerelle Tablets 75 micrograms** 1 Tab Daily 168 tablet	Not Issued	Dr Anne McGinley	ACUTE
13/07/2020	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	Not Issued	Dr Anne McGinley	ACUTE
13/07/2020	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 28 tablet	Not Issued	Dr Anne McGinley	ACUTE
27/05/2020	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	Not Issued	Dr Anne McGinley	ACUTE
27/05/2020	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 28 tablet	Not Issued	Dr Anne McGinley	ACUTE
28/04/2020	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	Not Issued	Dr Anne McGinley	ACUTE
28/04/2020	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO 3 THREE TIMES A DAY IF NEEDED FOR ANXIETY 56 tablet	Not Issued	Dr Anne McGinley	ACUTE
28/04/2020	**Clotrimazole Cream 1 %** APPLY TWO TIMES DAILY TO BACK FOR 1-2 WEEKS 40 gram	Not Issued	Dr Anne McGinley	ACUTE
06/04/2020	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 14 tablet	Not Issued	Dr Anne McGinley	ACUTE
06/04/2020	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 28 tablet	Not Issued	Dr Anne McGinley	ACUTE
06/04/2020	**Cerelle Tablets 75 micrograms** 1 Tab Daily 84 tablet	Not Issued	Dr Anne McGinley	ACUTE
21/02/2020	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	Not Issued	Dr Anne McGinley	ACUTE
21/02/2020	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 56 tablet	Not Issued	Dr Anne McGinley	ACUTE



NHS Confidential: Personal data about a patient

Please contact: Jacqueline Doyle
Our Ref: JD/BR/BD/MCLE49/2
Your Ref:
Date: 18th November 2021

JACQUELINE DOYLE & CO SOLICITORS

1 Tollcross Road
Parkhead
Glasgow G31 4UG
Tel: 0141 550 2333
Fax: 0141 550 8008

Legal Post:
DX 500416 Dennistoun 2
www.jdsolicitors.co.uk

Dr Orr
Meadowpark Surgery
214 Meadowpark Street
Glasgow
G31 2TE

Dear Sirs

Ms Wendy McLeish, DOB 25/05/1987
PIP Appeal re decision dated 20/10/2021

We are assisting the above named in connection with an Appeal against refusal to award Personal Independence Payment. In order to assist our client further we would be very grateful if you would provide a copy of our client's medical records, including details on diagnoses, medication prescribed and also any correspondence between the GP and Specialists or other medical professionals involved in the care of our client for the last two years.

We would advise that The Scottish Legal Aid Board have stated that under GDPR Regulations you are not entitled to charge a fee for this request. We also note that under GDPR Regulations you require to provide these medical records within one month from the day after you receive this request. We enclose a mandate signed by our client authorising release of this information and look forward to hearing from you.

We are much obliged to you for your co-operation.

Yours faithfully

Jacqueline Doyle
Partner
Jacqueline Doyle & Co

Enc

152

JD HOMES

SCOTTISH LEGAL AID BOARD

NHS Confidential: Personal data about a patient

JACQUELINE DOYLE & CO
SOLICITORS

MANDATE FOR MEDICAL MATTERS

Name: WENDY MCLEISH File Reference: MCLE49/2

DOCTOR/HOSPITAL DETAILS
Name of Doctor: ORR
Address of Medical Practice/Hospital: MEADOWPARK H-C MEADOWPARK ST GLASGOW G31

I, WENDY MCLEISH

Date of Birth: 25/MAY/1987

Residing at: 312 CUMBERNAULD RD F3/2 GLASGOW G31 3LY

Hereby authorise and instruct you to release all information as requested by Jacqueline Doyle & Co Solicitors to the address indicated below in connection with my:

REQUEST FOR PAST 2 YRS MED-RECORDS

Signed: W J. McLeish Dated: 02/NOV/2021

Jacqueline Doyle & Co Solicitors
1 Tollcross Road
Parkhead
Glasgow
G31 4UG
Telephone Number: 0141 550 2333
Fax Number: 0141 550 8008

LP 4 Dennistoun
www.jdsolicitors.co.uk

McLeish Wendy CHI: 2505876061

Clinical letter - GP:

NHS
Greater Glasgow and Clyde

Queen Elizabeth University Hospital
1345 Govan Road
Glasgow
G51 4TF

Dr. MM Morris
Meadowpark Surgery
568 Alexandra Parade
Glasgow
G31 3BP

Main Switchboard: 0141 201 1100
Department: Neurology
Contact Tel: 0141 232 7591
Enquiries to: Maggie.Edden@ggc.scot.nhs.uk
Letter Date: 24/01/2022
Reference: OJ/ME
Dictated Date: 20/12/2021
Transcribed Date: 24/12/2021

Dear Dr Morris,

Wendy McLeish; D.O.B: 25/05/1987; CHI: 2505876061
FLAT 3-2, 312 CUMBERNAULD RD, Glasgow, Lanarkshire, G31 3LY

Further to my correspondence from the neurology clinic on 19 October 2021, the **MRI of the head** displays multiple tiny foci of T2 hyperintensity within the white matter, which is non specific. There is no significant focal atrophy or intracranial mass or cortical abnormality.

Information for patient:

There were no significant findings in the MRI of the head.

Yours sincerely

Dr Oswald Jack

Consultant Neurologist

Electronically Signed: Dr Oswald Jack, Consultant

cc. Miss Wendy McLeish
3/2
312 Cumbernauld Road
Glasgow
G31 3LY

Meadowpark Surgery

Ear Irrigation Consent Form

Ear irrigation is a procedure which is carried out to clear wax from the ear canal It is not risk free and is therefore only carried out if the ear is completely blocked with wax.

To minimize the risk to the ear and to ease removal the wax should first be softened using olive oil (2-3 drops) applied to the affected ear/s at least twice daily. When instilling oil lie on your side with the affected ear uppermost and remain lying for at least 10 minutes, do not insert cotton wool. Repeat for the other ear if required. This should be carried out for at least 5-7 days prior to ear irrigation.

Past History (please circle)

Previous ear drum perforation Yes /No

Previous ear surgery and/or grommets Yes/ No

Permanent deafness in *one ear* Yes/ No

Cleft palate Yes No

Ear infection within the last 6 weeks Yes/ No

Previous problem following ear irrigation Yes/ No

Tinnitus Yes/ No

Mucous discharge from ear/s within the last 12 months Yes/ No

I understand that ear irrigation carries a rare risk of perforation to the ear drum. I understand and consent to the proposed treatment.

Patient Signature and Date 14/1/22 X W. McLeish

Nurse signature and Date 14/1/22 S. Fulke

Blood Sciences Biochemistry Report

Patient Details

Surname	MCLEISH
Forename	WENDY
CHI	2505876061
Date of birth	25.05.1987
Sex	Female
Address	Flat 3.2 312 Cumbernauld Road Glasgow LANARKSH G31 3LY

Specimen Details

Specimen Number	B,22.4347978.Q
Specimen Type	Blood
Date/Time Collected	14.01.22 / 10:08
Date/Time Received	14.01.22 / 13:47
Requested By	Dr Sam Broadley
GP Practice	46625
Date/Time Reported	17.01.22 / 14:52
Details	tatt

Results

HbA1C (IFCC) - Authorised on 17.01.22 at 14:47

HbA1c (IFCC)	28	mmol/mol	(20-41)

End of Report

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

2021 GGC General Referral Protocol (Glasgow, vR20.5)

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Neurology
GGC General Referral

— **Consultant / receiving practitioner** and/or **specialty clinic**

Glasgow Royal Infirmary
84 Castle Street
Glasgow
G4 0SF

— **Hospital** and **hospital address**

Hospital location code.
G107H

Email address
-

Urgency of referral Routine
Date of referral 04-Apr-2022 **Date sent** 04-Apr-2022

PATIENT DETAILS

Surname	McLeish
Forename(s)	Wendy
Title	Miss
Sex	Female
Date of birth	25-May-1987
CHI no.	2505876061
Area of Residence	-

Patient's address

Flat 3.2
312 Cumbernauld Road
Glasgow
G31 3LY

Contact number(s)
Voice:07912347436

101025993459X Unique Care Pathway Number: 101025993459X

REGISTERED GP DETAILS

Name	Dr Margaret Morris		
GMC code	4305792	GP code	05029
Practice name	Meadowpark Surgery (18882)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)
Voice:0141 554 0464
Facsimile:0141 550 2002

REFERRING GP DETAILS

Name	Dr. Samuel Broadley		
GMC code	7477241	GP code	06807
Practice name	Meadowpark Surgery (46625)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)
Voice:0141 554 0464

CLINICAL INFORMATION

History of presenting complaint

Presenting complaint

Description: Longstanding tremor

Comment: 34yo patient with longstanding multiple-decade history of widespread tremor. In context of anxiety and previous alcohol + polysubstance misuse - reports has been abstinent for a prolonged period. Remains under GP follow-up for anxiety symptoms - feels propranolol only thing that can improve things on occasion - tolerates this without wheeze in context of asthma diagnosis.

She has presented reporting worsening tremor symptoms over the last few months. This is most notable to both hands equally. No associated weakness / sensory changes / pain / co-ordination issues. No focal weakness / slowness in movements. No memory changes.

On examination she appears well with a course variable tremor. Power + function normal and equal with subjective sensation normal also. No co-ordination issues or past pointing with a normal gait.

She received a neurology review of this tremor in 2012 where it was felt these were attributed to anxiety. However in light of its chronicity and worsening features irrespective of her anxiety, I'd be grateful for your routine specialist assessment.

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history

Pre-existing conditions (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Vulnerable child in family	-	16-Mar-2021	16-Mar-2021
Assault by bite of human being	by partner. bite to R ear, blunt head trauma by bottle.	01-Nov-2019	01-Nov-2019
Social worker involved	-	02-Sep-2019	02-Sep-2019
Alcohol problem drinking	-	02-Sep-2019	02-Sep-2019
Pityriasis versicolor	-	18-Feb-2019	18-Feb-2019
Miscarriage	surgical ERPC	03-Sep-2015	03-Sep-2015
Pneumonia due to unspecified organism	(Bilateral)	30-Dec-2011	30-Dec-2011
Adult respiratory distress syndrome	-	30-Nov-2011	30-Nov-2011
Overdose of drug	fluoxetine	22-Sep-2011	22-Sep-2011
Anxiety with depression	-	19-Jul-2011	19-Jul-2011
Death of father	-	31-Jan-2011	31-Jan-2011
Has a tremor	seen by nuerologist 2012, felt to be benign	01-Apr-2007	01-Apr-2007
Death of mother	age 29 MI	01-Jan-1991	01-Jan-1991

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Elective caesarean delivery NOS	26-Feb-2017	26-Feb-2017

Current medication (Active Repeat medication issued within the last 12 months)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Salbutamol Cfc-free inhaler 100 micrograms/puff	1	1 INHALER	ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY	-	12-Aug-2021	03-Feb-2022
Propranolol Hydrochloride Tablets 10 mg	84	84 tablet	ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED	-	15-Jun-2021	10-Mar-2022

Recent medication (Any medication issued within last 90 days not shown above)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Mirtazapine Tablets 45 mg	28	28 TABLET	ONE TO BE TAKEN AT NIGHT	-	04-Apr-2022	04-Apr-2022
Cerelle Tablets 75 micrograms	168	168 tablet	1 Tab Daily	-	21-Feb-2022	21-Feb-2022
Mirtazapine Tablets 30 mg	56	56 TABLET	ONE TO BE TAKEN AT NIGHT	-	11-Jan-2022	10-Mar-2022
Amoxicillin Capsules 500 mg	15	15 CAPSULE	ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS	-	09-Dec-2021	09-Dec-2021
Prednisolone Tablets 5 mg	40	40 TABLET	EIGHT TO BE TAKEN IN THE MORNING	-	09-Dec-2021	09-Dec-2021
Mirtazapine Tablets 30 mg	56	56 tablet	ONE TO BE TAKEN AT NIGHT	-	10-Nov-2021	10-Nov-2021

Blood Pressure

Date Recorded	Systolic	Diastolic
21-Sep-2021	120	60
17-Jul-2018	128	77
09-Jul-2015	123	90
08-Aug-2013	116	77
14-Jan-2013	118	86

Body Measurements

Date Recorded	Height	Weight	BMI
10-Jun-2021	160.02	82.55	32.24
23-Mar-2021	158	83	33.25
23-Mar-2021	-	83	-
17-Jul-2018	-	-	29.64
29-Apr-2014	-	74	-

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Non-smoker :	hx noted, ongoing longstanding anxiety, tremors, seen by neurology and advised related to anxiety, using propranolol, feels doesn't help her, also uses saba for sob up stairs at times, bu- TRUNCATED	07-Oct-2021
Ex-smoker - amount unknown :		12-Aug-2021
Never smoked tobacco:		10-Jun-2021
Never smoked tobacco:		16-Sep-2019
Never smoked tobacco:		17-Jul-2018
Non-drinker alcohol :		07-Oct-2021
Alcohol consumption, 1 units/week:		10-Jun-2021
Alcohol consumption, 3 units/week:		17-Apr-2012
Light drinker - 1-2u/day:	Alcohol Intake$$.clm - Repeat after an Interval	21-Jan-2010

Clinical warnings

Allergies

Description	Comment	Date recorded

Adverse reaction to propranolol	possible wheeze with this	29-Apr-2016

Additional Support Needs

No known ASN requirements

Additional relevant information

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

Patient will accept cancellation or short notice appointment (within 1-6 days):Yes

Referred By:Referring GP

Electronic Attachment Present:No

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) **Date**

Blood Sciences Biochemistry Report

Patient Details

Surname	MCLEISH
Forename	WENDY
CHI	2505876061
Date of birth	25.05.1987
Sex	Female
Address	Flat 3.2 312 Cumbernauld Road Glasgow LANARKSH G31 3LY

Specimen Details

Specimen Number	B,22.4347979.H
Specimen Type	Blood
Date/Time Collected	14.01.22 / 10:08
Date/Time Received	14.01.22 / 13:38
Requested By	Dr Sam Broadley
GP Practice	46625
Date/Time Reported	14.01.22 / 14:52
Details	tatt

Results

Bone Profile - Authorised on 14.01.22 at 14:26

Calcium		2.24	mmol/L	(2.20-2.60)
Calcium (adjusted)		2.29	mmol/L	(2.20-2.60)
Phosphate		NA	mmol/L	
Albumin		36	g/L	(35-50)
Alkaline Phosphatase		61	U/L	(30-130)

Comments:
(NA) Specimen haemolysed, result invalid.

Urea & Electrolytes - Authorised on 14.01.22 at 14:26

Sodium		137	mmol/L	(133-146)
Potassium		NA	mmol/L	
Chloride	+	109	mmol/L	(95-108)
Urea		4.8	mmol/L	(2.5-7.8)
Creatinine		57	umol/L	(40-130)
Estimated GFR		>60	ml/min	(>60)

Comments:
(NA) Specimen haemolysed, result invalid.

Liver Function Tests - Authorised on 14.01.22 at 14:26

Total Bilirubin	9	umol/L	(<20)
ALT	23	U/L	(<50)
AST	NA	U/L	
Alkaline Phosphatase	61	U/L	(30-130)
Albumin	36	g/L	(35-50)

Comments:
(NA) Specimen haemolysed, result invalid.

Thyroid funct test - Authorised on 14.01.22 at 14:46

Blood Sciences Biochemistry Report

TSH	1.01	mU/L	(0.35-5.00)
Free T4	11.2	pmol/L	(9.0-21.0)
Total T3		nmol/L	

End of Report

Blood Sciences Biochemistry Report

Patient Details

Surname	MCLEISH
Forename	WENDY
CHI	2505876061
Date of birth	25.05.1987
Sex	Female
Address	Flat 3.2 312 Cumbernauld Road Glasgow LANARKSH G31 3LY

Specimen Details

Specimen Number	B,22.4347977.Z
Specimen Type	Blood
Date/Time Collected	14.01.22 / 10:08
Date/Time Received	14.01.22 / 13:46
Requested By	Dr Sam Broadley
GP Practice	46625
Date/Time Reported	14.01.22 / 16:02
Details	tatt

Results

Glucose - Authorised on 14.01.22 at 15:58

Glucose	4.5	mmol/L	(3.5-6.0)

Comments:
Non-fasting sample

End of Report

Blood Sciences Haematology Report

Patient Details

Surname	MCLEISH
Forename	WENDY
CHI	2505876061
Date of birth	25.05.1987
Sex	Female
Address	Flat 3.2 312 Cumbernauld Road Glasgow LANARKSH G31 3LY

Specimen Details

Specimen Number	B,22.5832367.G
Specimen Type	Blood
Date/Time Collected	14.01.22 / 10:08
Date/Time Received	14.01.22 / 14:47
Requested By	Dr Sam Broadley
GP Practice	46625
Date/Time Reported	14.01.22 / 15:02
Details	tatt

Results

Full Blood Count - Authorised on 14.01.22 at 14:57

White Blood Count		8.0	x10^9/l	(4.0-10.0)
Red Cell Count		4.15	x10^12/l	(3.80-5.80)
Haemoglobin		144	g/l	(115-165)
Haematocrit		0.398	l/l	(0.370-0.470)
Mean Cell Volume		95.9	fl	(83.0-101.0)
MCH	+	34.7	pg	(27.0-32.0)
Platelet Count		324	x10^9/l	(150-410)
Neutrophils		4.9	x10^9/l	(2.0-7.0)
Lymphocytes		2.3	x10^9/l	(1.1-5.0)
Monocytes		0.7	x10^9/l	(0.2-1.0)
Eosinophils		0.13	x10^9/l	(0.02-0.50)
Basophils		0.0	x10^9/l	(0.0-0.1)
Nucleated RBC		0.0	x10^9/l	

End of Report

NHS Greater Glasgow and Clyde OOH Call Incident Report

Call number:	**6544706**	Receive Date:	**16-Dec-2021 17:23**
Patient's Name:	**Wendy Mcleish**		
Date of birth:	**25-May-1987 (34 years)**	Gender:	**F**
Address:	**3/2** **312 Cumbernauld Road** **Glasgow** **G31 3LY**	Current Address:	**3/2** **312 Cumbernauld Road** **Glasgow** **G31 3LY**
Return Contact No:			
Tel No:	**07912 347436**		**07912 347436**
Mobile No:			
Priority:	**Pr 4 Within 4 hrs**	Call Origin:	
Received:	**16-Dec-2021 17:23**	Calltype:	**PCEC Within 4 Hrs**
Advised:	**18:05**	Arrived PCC:	**16-Dec-2021 19:34**
Cons start:	**16-Dec-2021 19:46**	Cons End:	**16-Dec-2021 20:18**
Consulting Doctor:	**Robin MacIntosh**	Own doctor:	**Anne McGinley**

CHI Number:
2505876061

NHSD details:

Receptionist:
PAIN IN CHEST 4WEEKS
PCC4 PCEC within 4 Hrs
Clinical summary created by: Aidan Kelly (Call Taker Si) () [16/12/2021 18:05:07] Reason for call: PAIN IN CHEST 4WEEKSConfirmed Symptom(s): Endpoint Management Selected (CT) Call Detail(s): Clinical supervisor: CS K. DAVIE 16:12:2021 17:24:17 KELLYA3.. NO COUGH, NO FEVER, NO LOSS/CHANGE IN SMELL/TASTEVISITED DOCTORS, CHECKED CHEST, PREVIOUS PROBLEMS WITH PNEUMONIA, PAIN IN BACK RIGHT CHEST, SHORTNESS OF BREATH.. 5DAYS CYCLE OF AMOXICILLIN AND STEROIDS, FINSIHED YESTERDAY STILL GETTING BREATHLESS, PAIN MOVING DOWN BACK, USES INHALER, CAN'T SEE IN EARS, BLOCKED WITH WAX.. PHONED NHS24 CALL DEALTH WITH AT THE TIME.. COVID ASSESSMENT TOOL DW CS K. DAVIE ONGOING UPPER BACK PAIN, WORSE ON MOVEMENT, PAIN WORSE TODAY SHORTNESS OF MREATH 1MONTH, PCR NEGATIVE LAST WEEK, STEROIDS AND ANTIBIOTICS

FINISHED, DID HAVE SOME EFFECT INITIALY. PCEC4.. Outcome: PCEC within 4 Hrs

---

Consultation details:

History - **2-3 weeks right subscapular pain with anxiety and SOB. Had sore back initially and moved to chest wall below scapula. More painful with movement. Not pleuritic. Has been feeling SOB when walking for several months and feels it got worse over last week. No fever or cough. No long haul travel, COCP, previous VTE or FH VTE.**
2012 right sided pneumonia requiring ECMO and she is very anxious about being so unwell again. Background generalised anxiety.

Examination - **Looks anxious but well. RR 16 sats 97% HR 86 reg BP normal. apyrexic. Chest clear. Tender over chest wall just below right scapula. Pain on rotation of spine.**

Diagnosis - **MSK related pain. Anxiety causing sensation of SOB with normal sats.**

Treatment - **Advised simple analgesia, light exercise and PT if not resolving. worsening statement given.**

Followups:
No Follow Up

Clinical Codes:
R065. [D]Chest pain

NHS Greater Glasgow and Clyde OOH Call Incident Report

Call number:	**6538102**	Receive Date:	**9-Dec-2021 10:22**
Patient's Name:	**Wendy Mcleish**		
Date of birth:	**25-May-1987 (34 years)**	Gender:	**F**
Address:	**3/2** **312 Cumbernauld Road** **Glasgow** **G31 3LY**	Current Address:	**3/2** **312 Cumbernauld Road** **Glasgow** **G31 3LY**
Return Contact No:			
Tel No: Mobile No:	**07912 347436**		**07912 347436**
Priority:	**Pr No Action Reqd**	Call Origin:	
Received:	**9-Dec-2021 10:22**	Calltype:	**No Action Required By Co-op**
Advised: Cons start:	**10:35**	Arrived PCC: Cons End:	
Consulting Doctor:		Own doctor:	**Anne McGinley**

CHI Number:
2505876061

NHSD details:

Receptionist:
BACK PAIN - 3/52
NOA4 Pt advised to contact Practice within 4 Hrs - Info Only
Clinical summary created by: Shelley Grandison (Call Taker Si) () [09/12/2021 10:35:41] Reason for call: BACK PAIN - 3/52Confirmed Symptom(s): Pain in upper back Short of breath or changes in normal breathing Symptom(s) not found: No fever Call Detail(s): Clinical supervisor: Z THOMPSON 09:12:2021 10:23:15 GRANDISONS.. PAIN AT R LUNG AREA IN BACK, EARS SORE - WORSE AT R SIDE, SIMILAR SYMPTOMS WHEN HAVING PNUEMONIA 10 YEARS AGO - INDUCED COMA, EARS ARE KNOCKING OFF BALANCE, CONTACTED GP THIS AM WHO IS GOING TO CALL BACK TODAY - NO C19 SYMPTOMS... INCREASED INHALER USE... AT TIME OF

CALL - NOT APPROPRIATE FOR A&E, AWAITING GP CALL BACK, AFTER CLINICAL ASESSMENT - ADVISED THIS IS REQUIRED TODAY DUE TO SYMPTOMS AND HISTORY, PT APPEARS ANXIOUS DUE TO PMH - IN HOURS GP... Outcome: Pt advised to contact Practice within 4 Hrs - Info Only

---

Followups:
None

McLeish Wendy CHI: 2505876061

Clinic Letter

NHS
Greater Glasgow and Clyde

Queen Elizabeth University Hospital
1345 Govan Road
Glasgow
G51 4TF
0141 201 1100

Dr. MM Morris
Meadowpark Surgery
568 Alexandra Parade
Glasgow
G31 3BP

Main Switchboard:	
Department:	Neurology
Contact Tel:	0141 232 7591
Enquiries to:	Maggie.Edden@ggc.scot.nhs.uk
Letter Date:	19/10/2021
Reference:	OJ/ME
Dictated Date:	19/10/2021
Transcribed Date:	25/10/2021

Dear Dr. MM Morris,

Wendy McLeish; D.O.B: 25 May 1987; CHI: 2505876061
FLAT 3-2, 312 CUMBERNAULD RD, Glasgow, Lanarkshire, G31 3LY

Attendance: Specialty - Neurology; Clinic - SUOJNE3-DR JACK NEUROLOGY TUES AM
Date and Time of Appointment - 19/10/2021 12:00

Requested Out-patient Investigations:
MRI EEG

Clinical Comments:
Thank you for the referral of this 34 year old lady, who first took a seizure mid morning of 8 December last year. She had been shopping in Farmfoods, felt slightly dizzy and sat down. She then got up and continued shopping. The next thing she remembers is awakening on the ground.

According to your referral she had been in a queue, when she took a tonic clonic seizure lasting a minute without any urinary incontinence or tongue bite. Postictally she was tired and confused. She spent overnight in hospital and apparently in the evening there was a further seizure. She apparently felt normal the next morning. She added that on the morning of her seizure she had had a meeting with her social worker, but it had not been her usual social worker and she felt she was anxious and stressed. Her daughter has been living with her paternal aunt for the last 2 years and she is hoping to gain custody of her daughter again. speaking to her today she did not appear to have any strategy how to attain this.

The lady had an unremarkable CT of the head.

6 - 8 weeks ago she had a further seizure in the evening, whilst sitting watching television. Her partner witnessed the event, a tonic clonic seizure. There was again no urinary incontinence or any tongue bite. Postictally she felt tired and confused, and went to bed, awakening the next morning

feeling fine. She denies either of the 2 seizures occurring under the influence of alcohol or recent alcohol consumption.

Past medical history includes depression and anxiety, and she is currently on Propranolol and Mirtazapine. She is not aware of any medication related allergy. She is a non smoker and drinks once or twice a month half a bottle of vodka. Until pregnancy with her now 4 year old daughter, she had drunk considerable more. She is not familiar with her family. She is unemployed. She sleeps between 4 and 12 hours a night, and often has sleep deficits. She is under considerable stress, worrying about being able to see her daughter.

The lady has taken 2 or 3 tonic clonic seizures. It has not been absolutely clear, whether there was any connection with excessive alcohol consumption. Hoping to get more details on the last seizure, I would have to phone her partner today, but he apparently does not have a mobile phone. I have requested an MRI of the head. **With this correspondence** I have also **requested an EEG** to establish, whether there is any indication of ongoing (focal) epileptiform activity. I was reluctant to put her on medication without further information from her partner on her current alcohol consumption and whether there is any connection with her seizures. If one were to start her on medication, I would be inclined to start her on Lamotrigine, but as mentioned above, with the current information she will not be started on medication.

Yours sincerely

Dr Oswald Jack

Consultant Neurologist

Electronically Signed: Dr Oswald Jack, Consultant

cc. Consultant Neurophysiologist
Neurophysiology Department
QEUH

Patient label

20331.
Wendy
McLeish.

URINE SPECIMENS

Please fill in request

Urine result

URINALYSIS.
NAD.

Requested By..... Patient .....

Contact phone number..... 07912 347436 .....

Symptoms: Frequency ☐ Pain ☑ other please specify..... Itch. .....

Pregnant: ~~YES~~/NO

Duration of symptoms..... 4/7. .....

Allergies.....

McLeish Wendy CHI: 2505876061

Clinic Letter

NHS
Greater Glasgow and Clyde

Glasgow Royal Infirmary
Alexandra Parade
Glasgow
G31 2ER
0141 211 4000

Podiatry
0141 347 8909

Dr. MM Morris
Meadowpark Surgery
568 Alexandra Parade
Glasgow
G31 3BP

Main Switchboard:	
Department:	
Contact Tel:	
Enquiries to:	
Letter Date:	08/07/2021
Reference:	
Dictated Date:	08/07/2021
Transcribed Date:	08/07/2021

Dear Dr. MM Morris,

Wendy McLeish; D.O.B: 25 May 1987; CHI: 2505876061
FLAT 3-2, 312 CUMBERNAULD RD, Glasgow, Lanarkshire, G31 3LY

Attendance: Specialty - Podiatry; Clinic - SHP4R17-GENERAL PODIATRY 4 THURSDAY AM
Date and Time of Appointment - 08/07/2021 10:15

Clinical Comments:
Telephone appointment S: Patient contacted due to painful corns O: Patient states she has corns between her toes and on the sole of her feet which are painful. She has used plasters which have not helped. She states one of her toe nails fell off a year ago and is growing back and there is some redness around the nail, no signs of infection. A: Expalined to patient the nail may grow back in a different shape or thickness so advsied to clear the sulcus with a soft brush as there may be a tightness in the sulcus, advised to file nail to maintain. Explained current service delivery and that we could not see her for corns at this time. Advised patient I would add her to the waiting list but it may be a number of months before she is appointed. Advsied she could go privately for treatment, file callus and apply emollient. Expalined the corns between her toes are likely caused by footwear advised wider toe box and suggetsed gel pads between toes. Advised to call back if she has further concerns. P: Added to routine waiting list for painful lesions E: Routine need R: When routine clinics resume Rebecca Smtih (Poditrist)

Electronically Signed: ,

cc.

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC Third Sector Referral Protocol (Glasgow, vR15.0)

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Glasgow City CDRS
GGC Third Sector Referral

— **Consultant / receiving practitioner** and/or **specialty clinic**

Compassionate Distress Response Service
SCI Gateway Virtual Location code

— **Hospital** and **hospital address**

Hospital location code.
G144G

Email address
-

Urgency of referral Routine
Date of referral 07-Oct-2021 **Date sent** 07-Oct-2021

PATIENT DETAILS

Surname	McLeish
Forename(s)	Wendy
Title	Miss
Sex	Female
Date of birth	25-May-1987
CHI no.	2505876061
Area of Residence	-

Patient's address

Flat 3.2
312 Cumbernauld Road
Glasgow
G31 3LY

Contact number(s)

Voice:07912347436

101024548225N Unique Care Pathway Number: 101024548225N

REGISTERED GP DETAILS

Name	Dr Margaret Morris		
GMC code	4305792	GP code	05029
Practice name	Meadowpark Surgery (18882)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)

Voice:0141 554 0464
Facsimile:0141 550 2002

REFERRING GP DETAILS

Name	Dr. Amanda Gibson		
GMC code	7133599	GP code	06131
Practice name	Meadowpark Surgery (46625)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)

Voice:0141 554 0464

CLINICAL INFORMATION

History of presenting complaint

Presenting complaint

Description: Ongoing anxiety

Comment: Dear Colleague,

I would be grateful for your input with this 34 y/o female who has longstanding anxiety and struggling. She is awaiting input from GAMH but this has been sometime.

She is currently tremulous but this is longstanding due to anxiety. She struggles with getting out the house and using propranolol and mirtazapine but not helping. She agrees she may benefit from support and counselling and I would be grateful for your input currently. Her 4 y/o child is under the care of her sister in law and she gets supervised visits. This is making her distressed and anxious at times.

I would be grateful for your input and support.

Kind regards,

Dr Amanda Gibson
GP

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history

Current medication (Active Repeat medication issued within the last 12 months)

No current medications recorded

Recent medication (Any medication issued within last 90 days not shown above)

No recent medications recorded

Blood Pressure

No Blood Pressures Recorded

Body Measurements

No Body Measurements Recorded

Clinical warnings

Additional Support Needs

No known ASN requirements

Additional relevant information

Has the patient given consent for sharing of information?:Yes

Patient will accept any site:Yes

Patient will accept cancellation or short notice appointment (within 1-6 days):Yes

Referred By:Referring GP

Electronic Attachment Present:No

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) **Date**

NHS Confidential: Personal data about a patient

APPLICATION TO REGISTER PERMANENTLY WITH A GENERAL MEDICAL PRACTICE

NHS SCOTLAND

1. PERSONAL DETAILS (ALL FIELDS MARKED * ARE MANDATORY AND MUST BE COMPLETED AS FULLY AS POSSIBLE)

Male* ☐ Female* ☑ Is this your first registration with a GP Practice in the UK?* Yes ☑ No ☐ Will you be in the area for more than 3 months?* Yes ☑ No ☐
(If 'No', please complete a temporary resident form)

Date of Birth* 25-05-1957 20331

Title* Miss

Surname* McLeish

Forenames* Wendy

Previous Surname*

email address # Wardwendy45@gmail.com

Address* 312 – Cumbernld Rd Flat 312

Postcode* G31 3LY

Telephone #

Mobile # 07912345438

The following information can be found on your current medical card:

Community Health Index (CHI) Number*

NHS Number*

The following information can be found on your birth certificate:

Town of Birth* Glasgow

Country of Birth* Lanarkshire

Registered district of birth (Scotland only)

Mother's maiden name O'Donnell

the data supplied in these fields will not be input to, or updated in, the Community Health Index (CHI), but will be held on the GP Practice's system

2. HELP US TO TRACE YOUR PREVIOUS GP HEALTH RECORDS BY PROVIDING THE FOLLOWING INFORMATION

Address in UK when you were last registered with a GP*

126 Liberton St
G33 2HS

Postcode* G33 2HS

Name and address of previous GP Practice in UK*

Lochend Surgery
E-House Heath centre

Postcode* G6

If you are from abroad:

Date you first came to live in the UK* DD-MM-YYYY

If previously resident in the UK, date of leaving* DD-MM-YYYY

Your most recent country of residence

If you have served in the British Armed Forces:

Enlistment date* DD-MM-YYYY

Are you a Reservist?* ☐ Yes ☐ No

Leaving date* DD-MM-YYYY

Is this your first registration with a GP since leaving the Armed Forces?* ☐ Yes ☐ No

Service Number

If yes, please provide your address before enlisting*

Postcode*

3. VOLUNTARY AUTHORISATION FOR ORGAN OR TISSUE DONATION

I would like to join the NHS Organ Donor Register as someone whose organs may be used for transplantation after my death. Please tick the boxes that apply. Your consent to organ donation will be shared with NHS Blood and Transplant together with the information you have provided in Section 1 including your name, gender, date of birth address and CHI number. For more information on being an organ donor or privacy, please ask for the leaflet on joining the NHS Organ Donor Register or visit www.organdonationscotland.org

Any of my organs and tissue ☑ Or my

Kidneys ☐ Eyes ☐ Heart ☐ Lungs ☐ Liver ☐ Pancreas ☐ Small bowel ☐ Tissue ☐

Notes on tissue - heart valves and corneas come under the 'heart' and 'eyes' boxes respectively so the 'tissue' box covers donating other types of tissue, such as your tendons.

Patient signature W. McLeish Date 06-06-2021

4. HOW WE USE YOUR INFORMATION

The information you have provided will be used by NHS Scotland to carry out its various functions and services including scheduling appointments, ordering tests, hospital referrals and sending correspondence.

Your information, including your name, gender, date of birth and address, will be passed to NHS National Services Scotland where it will be held on the Community Health Index (CHI). This information is used to register you with the GP Practice, transfer your medical records between GP practices in the UK, make payments to GP Practices for medical services provided, and to process and issue medical exemption certificates and entitlement cards.

NHS National Services Scotland shares information about you within NHSScotland to assist in the provision and improvement of NHS services and the health of the public. When we do this, we do it as described by NHS Scotland in the NHS Inform website under the "How the NHS handles your personal health information" section.

NHS Scotland is made up of various organisations such as NHS Health Boards, GP practices, the Scottish Ambulance Service or NHS National Services Scotland (the common name of the Common Services Agency for the Scottish Health Service). These organisations are individually responsible for your personal health information. In terms of data protection and privacy laws, they are known as 'data controllers'.

Find out more about NHS Scotland in the link provided above.

5. PATIENT DECLARATION

I declare that the information I have given on this form is correct and complete. I understand that, if it is not, appropriate action may be taken. To enable NHS National Services Scotland to confirm my eligibility to lawfully register with a GP and for the purposes of prevention, detection, and investigation of crime, the minimum necessary information from this form could be disclosed to relevant authorities.

I understand that more comprehensive information about how NHS Scotland handles my data is available from NHS Inform.

This information can be provided in other languages and formats on request. The NHS inform helpline provides an interpreting service.

Patient/Patient's representative signature W. Meek. Date 16 - 6 - 2021

Representative's name (if applicable)

Relationship to patient (if applicable)

6. FOR PRACTICE USE

GP reference number - GP name

Practice code - Mileage (No.) Road Water Footpath

Identification seen - do not take or retain photocopies

*Please initial each relevant box (it is recommended that at least one form of identification is seen to positively identify the applicant **although it is not mandatory to provide identification to register**)*

Birth Cert. ☐ Student ID Card ☐ Driving Licence ☑ Passport or HC2 Cert. ☐ Home Office App Reg Card ☐ Other/None - specify Receptionist initials

I accept this patient onto the practice list and declare that, to the best of my knowledge, this information is correct. I acknowledge that the details may be authenticated from appropriate records, and that payments generated from this patient registration will be subject to Payment Verification.

Authorised Practice signature Date DD - - YYYY

7. OFFICIAL USE ONLY

Input by

Checked by

Date DD - - YYYY

Practice Stamp

NEW PATIENT QUESTIONNAIRE

Meadowpark Street Surgery

We would be grateful if you could complete this questionnaire. It will help us to help you until your records arrive from your previous doctor.

Today's date					
Surname Mcash			**First name(s)** Wendy		
Date of birth 25/5/87			**Email Address:** Wardwendy45@gmail.com		
Address 312 cumbernauld Rd Flat 3/2					
Postcode: G31 3LY		**Telephone / Mobile no:** 07912347436		**Occupation:** Unemployed	
Ethnicity (please tick)					
White	✓	**Black Caribbean**		**Black African**	
Indian		**Pakistani**		**Bangladeshi**	
Chinese		**Mediterranean**		**Other**	
Name and relationship Of next of kin? James Ward bf 12yr			**Contact tel no next of kin** 07858393379 Consent to share this information with ambulance and emergency services ☐		
Do you look after someone who is ill, frail, disabled or mentally ill? No					
If yes what is relationship to you?					
Name and Address of previous GP					

[redacted]

Past medical problems (include operations) please include date of procedure or medical problem

Severe Anxity causing bad Tremors
Depression
breathing Problems since phemonia ICU 2001
bad scarring

Current medical problems

memory loss

Current medications

Mirtazipine 30 mg
Propanolol 10 mg

Allergies

Hayfever

Family history

Is there a history of the following conditions in your immediate family?

Condition	Relationship	Age of onset (approximate)
Asthma		
Diabetes mellitus		
High blood pressure		
Heart attack	mother	28
Stroke		
Others …		
Do you smoke? NO	Cigarettes / pipe? How much?	Are you ex smoker? How many?

Do you drink alcohol? Rarely	Units per week
Weight 13 stone	Height 5'3
How often do you exercise try	Are you vegetarian? NO
Date of last tetanus vaccination	
For women	
Number of pregnancies 2	Number of children 1
Date of last cervical smear Dont	
Contraception Yes	
For nurses use	***BP*** / ***Urinalysis***

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC General Referral Protocol (Glasgow, vR15.0)

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Neurology - First Seizure
GGC General Referral

Consultant / receiving practitioner and/or **specialty clinic**

Queen Elizabeth University Hospital
1345 Govan Road
Glasgow
G51 4TF

Hospital and **hospital address**

Hospital location code.
G405H

Email address
-

Urgency of referral Urgent Patient already referred to first seizure clinic - further referral for information only as patient reporting further seizures

Date of referral 03-Aug-2021 **Date sent** 03-Aug-2021

PATIENT DETAILS

Surname	McLeish
Forename(s)	Wendy
Title	Miss
Sex	Female
Date of birth	25-May-1987
CHI no.	2505876061
Area of Residence	-

Patient's address

Flat 3.2
312 Cumbernauld Road
Glasgow
G31 3LY

Contact number(s)

Voice:07912347436

101024007319S Unique Care Pathway Number: 101024007319S

REGISTERED GP DETAILS

Name	Dr Margaret Morris		
GMC code	4305792	GP code	05029
Practice name	Meadowpark Surgery (18882)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)

Voice:0141 554 0464
Facsimile:0141 550 2002

REFERRING GP DETAILS

Name	Dr. Margaret Morris		
GMC code	4305792	GP code	05029
Practice name	Meadowpark Surgery (46625)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)

Voice:0141 554 0464

CLINICAL INFORMATION

History of presenting complaint

Presenting complaint

Description: Patient referred to first seizure clinic reporting further seizures

Comment: Dear Colleague,

Miss McLeish was already referred to the first seizure clinic in December 2020 from Accident and Emergency at Glasgow Royal Infirmary following a witnessed tonic-clonic seizure.

She has not yet heard about an appointment for your service but she tells me that she had a further apparent tonic-clonic seizure six days ago (from July 30 2021) which was witnessed by her boyfriend who said that it lasted less than five minutes and did not call an ambulance at the time. It occurred when she was sitting watching television in their flat. Her boyfriend describes her body going rigid and then all four of her limbs "violently shaking." She did not bite her tongue and there was no incontinence. She has no recollection whatsoever of the event.

She does have a history of drug and alcohol misuse although she denies using illicit drugs and/or alcohol more recently prior to this further event.

Many thanks,

Dr Matthew Lyons,
Locum GP

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history

Pre-existing conditions (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Vulnerable child in family	-	16-Mar-2021	16-Mar-2021
Assault by bite of human being	by partner. bite to R ear, blunt head trauma by bottle.	01-Nov-2019	01-Nov-2019
Alcohol problem drinking	-	02-Sep-2019	02-Sep-2019
Social worker involved	-	02-Sep-2019	02-Sep-2019
Pityriasis versicolor	-	18-Feb-2019	18-Feb-2019
Miscarriage	surgical ERPC	03-Sep-2015	03-Sep-2015
Pneumonia due to unspecified organism	(Bilateral)	30-Dec-2011	30-Dec-2011
Adult respiratory distress syndrome	-	30-Nov-2011	30-Nov-2011
Overdose of drug	fluoxetine	22-Sep-2011	22-Sep-2011
Anxiety with depression	-	19-Jul-2011	19-Jul-2011
Death of father	-	31-Jan-2011	31-Jan-2011
Has a tremor	seen by nuerologist 2012, felt to be benign	01-Apr-2007	01-Apr-2007
Death of mother	age 29 MI	01-Jan-1991	01-Jan-1991

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Elective caesarean delivery NOS	26-Feb-2017	26-Feb-2017

Current medication (Active Repeat medication issued within the last 12 months)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Propranolol Hydrochloride Tablets 10 mg	84	84 tablet	ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED	-	15-Jun-2021	26-Jul-2021

Recent medication (Any medication issued within last 90 days not shown above)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Mirtazapine Tablets 45 mg	56	56 tablet	ONE TO BE TAKEN AT NIGHT	-	30-Sep-2020	16-Mar-2021
Propranolol Hydrochloride Tablets 10 mg	84	84 tablet	ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED	-	23-Oct-2020	13-Apr-2021
Cerelle Tablets 75 micrograms	168	168 tablet	1 Tab Daily	-	23-Mar-2021	23-Mar-2021
Mirtazapine Tablets 30 mg	56	56 tablet	ONE TO BE TAKEN AT NIGHT	-	23-Mar-2021	23-Mar-2021
Propranolol Hydrochloride Tablets 10 mg	84	84 tablet	ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED	-	15-Jun-2021	15-Jun-2021
Mirtazapine Tablets 30 mg	56	56 tablet	ONE TO BE TAKEN AT NIGHT	-	15-Jun-2021	15-Jun-2021
Mirtazapine Tablets 30 mg	56	56 tablet	ONE TO BE TAKEN AT NIGHT	-	15-Jun-2021	26-Jul-2021

Blood Pressure

Date Recorded	Systolic	Diastolic
17-Jul-2018	128	77
09-Jul-2015	123	90
08-Aug-2013	116	77
14-Jan-2013	118	86
11-Jan-2013	118	77

Body Measurements

Date Recorded	Height	Weight	BMI
10-Jun-2021	160.02	82.55	32.24
23-Mar-2021	158	83	33.25
23-Mar-2021	-	83	-
17-Jul-2018	-	-	29.64
29-Apr-2014	-	74	-

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Never smoked tobacco:		10-Jun-2021
Never smoked tobacco:		16-Sep-2019
Never smoked tobacco:		17-Jul-2018
Never smoked tobacco:		04-Jan-2018
Never smoked tobacco:		14-Jul-2016
Alcohol consumption, 1 units/week:		10-Jun-2021
Alcohol consumption, 3 units/week:		17-Apr-2012
Light drinker - 1-2u/day:	Alcohol Intake$$.clm - Repeat after an Interval	21-Jan-2010

Clinical warnings

Allergies

Description	Comment	Date recorded
Adverse reaction to propranolol	possible wheeze with this	29-Apr-2016

Additional Support Needs

No known ASN requirements

Additional relevant information

OK to send correspondence to home address?:Yes
Patient will accept any site:Yes
Patient will accept cancellation or short notice appointment (within 1-6 days):Yes
Referred By:Locum
Electronic Attachment Present:No

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) **Date**

Wendy McLeish Date of Birth 25-05-1987 (OFFICIAL)

Jarvis, Arthur (Social Work) <Arthur.Jarvis@glasgow.gov.uk>
Thu 10/06/2021 15:19
To: gp46625clinical (Meadowpark Surgery) <ggc.gp46625clinical@nhs.scot>

OFFICIAL

Good afternoon,

I am the allocated social worker for the daughter of the above named woman who has informed that as she is requesting a new CPN, a letter, or some confirmation is required from this Department.

Could someone please give me a call on either of the numbers below to discuss this matter,

Thanks,

Arthur

Arthur Jarvis
Social Worker
Glasgow Health & Social Care Partnership
North East Children and Families
871 Springfield Road, Glasgow, G31 4HZ
arthur.jarvis@glasgow.gov.uk
Tel 0141 565 0141
Blackberry 07880261902
Mobile 07761688285

OFFICIAL

We are using protective marking software to mark all our electronic and paper information based on its content, and the level of security it needs when being shared, handled and stored. You should be aware of what these marks mean for you when information is shared with you:

1. **OFFICIAL SENSITIVE** (plus one of four sub categories: Personal Data, Commercial, Operational, Senior Management) - this is information regarding the business of the council or of an individual which is considered to be sensitive. In some instances an email of this category may be marked as PRIVATE
2. **OFFICIAL** - this is information relating to the business of the council and is considered not to be particularly sensitive
3. **NOT OFFICIAL** – this is not information about the business of the council.

For more information about the Glasgow City Council Protective Marking Policy please visit https://glasgow.gov.uk/protectivemarking

For further information and to view the council's Privacy Statement(s), please click on link below:www.glasgow.gov.uk/privacy

Susanne Millar
Chief Officer

Our Ref: GMcC/AJ
Job ID: 100061061
Date: 30/07/2021

PRIVATE & CONFIDENTIAL

Dr MM Morris
Meadowpark Surgery
568 Alexandra Parade
Glasgow
G31 3BP

Mental Health
Arran Resource Centre
121 Orr Street
Bridgeton
Glasgow
G40 2BJ
0141 232 1200

www.nhsggc.org.uk

Dear Dr Morris

RE: Wendy McLeish DOB: 25/05/1987 CHI: 2505876061
Address: Flat 3/2 312 Cumbernauld Road, Glasgow, G31 3LY

Please see attached the summary of Adult Mental Health Initial Assessment including formulation and risk.

If you require any further information do not hesitate to contact me.

Yours sincerely

Gail McCulloch
Community Psychiatric Nurse

Susanne Millar
Chief Officer

Summary

Name: Wendy McLeish	CHI: 2505876061
Summary of assessment ***(Key findings, relevant negatives, initial formulation considering predisposing, precipitating, perpetuating and protective factors)***	
Reactive period o ffeeling mood is lower following daughter being moved into local authority care. Recent charges agains ther and partner of domestic violence and ongoing investigations re ?incident wit Social Worker. Nil evidence of mental illness. Reported mood low however reactive, sleep and appetite good, functioning and enjoying daily activities. Discussed ?anger management however did not feel that this is something she sturggles with. Current presentation appears to be chronic and worsening in relation to ongoing social stressors. Little insight or acknowledgement of self-management strategies she could utilise. Chaotic relationship with partner. Brought up in care and moved around a lot. Denies trauma in childhood. Denies current drug/alcohol use.	
Overall impression of risk ***(CRAFT to be completed separately)***	
On assessment denied experiencing thoughts/plan of suicide. Denies thoughts of self harm and conviction of domestic abuse against partner. Reported previous overdose around 2012. Daughter and family protective factors.	
Immediate actions ***(including information provided)***	
Discuss at MDT. Provided with telephone numbers should she require additional support. Wendy seeking "someone to talk to about mental health". Explained role of CPN and discussed consideration of structured intervention, did not appear keen on same. Has not engaged with writer to feedback from MDT. Wendy contacted writer 2 days following assessment whilst having an argument with her partner. Stated that she needed someone with her ove rthe weekend or she may "throw herself out the window". Hung up phone on writer. Writer called back. Wendy continued to argue with partner however stated she was "fine" and things were "the same but nothing I can do about it".	
Outcome of MDT discussion/ Treatment plan ***(including follow up arrangements if relevant)***	
Not felt to have mental illness at present. Mood related to reduced supervised contact with daughter following domestic assault with partner. Difficulty regulating emotions and anger at times but unsure about engaging in treatment for same. Has not responded to telephone calls from writer. Spoke with next of kin who confirmed that Wendy is safe and "fine". * Please consider GAMH for social and practical support. * Discharge from CMHT ar present.	
Primary Diagnosis:	?Anger management issues. Low mood in reaction to reduced contact with daughter.

Susanne Millar
Chief Officer

Any additional diagnoses:			
Suitable for psychological therapies (Y/N): N. Not currently feeling this would be appropriate for her.			
Name:	**Gail McCulloch**	**Designation:**	CPN
Signature:		**Date:**	20.07.2021

Authorised on 30/07/2021 16:51:36 by Gail McCulloch.

Practitioner Services

Medical
Meridian Court
5 Cadogan Street
Glasgow, G2 6QE
Tel 0141 300 1300
Text Relay: 18001 0141 300 1300
www.nhsnss.org/services/practitioner

NHS National Services Scotland

Lochend Surgery
Easterhouse Health Centre
9 Auchinlea Rd
Glasgow
G34 9HQ

Date : 27 May 2021
Your Ref : 4647
Our Ref : GMSRGL003/O/ (2505876061)

Extension : 1356
Direct Line: 0141 300 1356
E-mail : christine.mcgavin@nhs.scot

Dear Doctor(s)

Geographical Removal

I acknowledge receipt of your communication intimating that you wish the name of the undernoted patient removed from the practice.

The patient has been notified accordingly and their name will be removed from the practice list under the terms of Schedule 6 Part 2 of the National Health Service (General Medical Services Contract) (Scotland) Regulations 2018 from 03 June 2021 unless they register with another practice before this date.

A formal request will then be made for the return of their medical records which should be retained until this time.

Yours sincerely

Mrs Christine McGavin
Assistant Registration Manager

Patients(s) referred to: -

Wendy McLeish, CHI 2505876061
312 Cumbernauld Rd, Glasgow, G31 3LY

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC Mental Health Referral Protocol - Glasgow (Glasgow, v17.0)

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Arran Resource Centre - CMHT Adult
GGC Mental Health

— **Consultant / receiving practitioner** and/or **specialty clinic**

Community Mental Health Team - Adult
SCI Gateway Virtual Location code

— **Hospital** and **hospital address**

Hospital location code.
G002G

Email address
-

Urgency of referral Routine
Date of referral 15-Jun-2021 **Date sent** 15-Jun-2021

PATIENT DETAILS

Surname	McLeish
Forename(s)	Wendy
Title	Miss
Sex	Female
Date of birth	25-May-1987
CHI no.	2505876061
Area of Residence	-

Patient's address

Flat 3.2
312 Cumbernauld Road
Glasgow
G31 3LY

Contact number(s)
Voice:07912347436

101023613209T Unique Care Pathway Number: 101023613209T

REGISTERED GP DETAILS

Name	Dr Margaret Morris		
GMC code	4305792	GP code	05029
Practice name	Meadowpark Surgery (18882)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)
Voice:0141 554 0464
Facsimile:0141 550 2002

REFERRING GP DETAILS

Name	Dr. Margaret Morris		
GMC code	4305792	GP code	05029
Practice name	Meadowpark Surgery (46625)		
Practice code	46625		

Practice address

568 Alexandra Parade
Glasgow
G31 3BP

Contact number(s)
Voice:0141 554 0464

CLINICAL INFORMATION

History of presenting complaint

Presenting complaint

Description: anxiety and depression

Comment: Dear Colleague,

This 34-year old lady has recently joined our practice. She has requested referral for some CPN input as she feels she would benefit from support.

She has a long history of anxiety, depression and some aggressive behaviour and anger management. She was previously seen by Auchinlea and in the past by the Perinatal Mental Health when she was pregnant with her daughter Khara.

Ms McLeish appears to have been treated in the past with Fluoxetine. At present, she is taking Mirtazepine as she has done for a number of years, but she currently does not feel that it is helping.

She has significant social issues in that she is separated from her daughter Khara who is currently under local authority care and this is weighing on her mind.

She denies any current drug or alcohol misuse although in her history, I do think these have been a problem in the past but certainly she says that "she hardly ever touches alcohol or cannabis."

She would appreciate your review possibly with a view to looking into psychological therapies and reviewing her medication.

Yours sincerely,
Dr Margaret Morris

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history

Pre-existing conditions (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Vulnerable child in family	-	16-Mar-2021	16-Mar-2021
Assault by bite of human being	by partner. bite to R ear, blunt head trauma by bottle.	01-Nov-2019	01-Nov-2019
Social worker involved	-	02-Sep-2019	02-Sep-2019
Alcohol problem drinking	-	02-Sep-2019	02-Sep-2019
Pityriasis versicolor	-	18-Feb-2019	18-Feb-2019
Miscarriage	surgical ERPC	03-Sep-2015	03-Sep-2015
Pneumonia due to unspecified organism	(Bilateral)	30-Dec-2011	30-Dec-2011
Adult respiratory distress syndrome	-	30-Nov-2011	30-Nov-2011
Overdose of drug	fluoxetine	22-Sep-2011	22-Sep-2011
Anxiety with depression	-	19-Jul-2011	19-Jul-2011
Death of father	-	31-Jan-2011	31-Jan-2011
Has a tremor	seen by nuerologist 2012, felt to be benign	01-Apr-2007	01-Apr-2007
Death of mother	age 29 MI	01-Jan-1991	01-Jan-1991

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Elective caesarean delivery NOS	26-Feb-2017	26-Feb-2017

Current medication (Active Repeat medication issued within the last 12 months)

No current medications recorded

Recent medication (Any medication issued within last 90 days not shown above)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Mirtazapine Tablets 45 mg	56	56 tablet	ONE TO BE TAKEN AT NIGHT	-	30-Sep-2020	16-Mar-2021
Propranolol Hydrochloride Tablets 10 mg	84	84 tablet	ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED	-	23-Oct-2020	13-Apr-2021
Cerelle Tablets 75 micrograms	168	168 tablet	1 Tab Daily	-	23-Mar-2021	23-Mar-2021
Mirtazapine Tablets 30 mg	56	56 tablet	ONE TO BE TAKEN AT NIGHT	-	23-Mar-2021	23-Mar-2021
Propranolol Hydrochloride Tablets 10 mg	84	84 tablet	ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED	-	15-Jun-2021	15-Jun-2021
Mirtazapine Tablets 30 mg	56	56 tablet	ONE TO BE TAKEN AT NIGHT	-	15-Jun-2021	15-Jun-2021
Mirtazapine Tablets 30 mg	56	56 tablet	ONE TO BE TAKEN AT NIGHT	-	15-Jun-2021	15-Jun-2021
Propranolol Hydrochloride Tablets 10 mg	84	84 tablet	ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED	-	15-Jun-2021	15-Jun-2021

Blood Pressure

Date Recorded	Systolic	Diastolic
17-Jul-2018	128	77
09-Jul-2015	123	90
08-Aug-2013	116	77
14-Jan-2013	118	86
11-Jan-2013	118	77

Body Measurements

Date Recorded	Height	Weight	BMI
10-Jun-2021	160.02	82.55	32.24
23-Mar-2021	158	83	33.25
23-Mar-2021	-	83	-
17-Jul-2018	-	-	29.64
29-Apr-2014	-	74	-

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Never smoked tobacco:		10-Jun-2021
Never smoked tobacco:		16-Sep-2019
Never smoked tobacco:		17-Jul-2018
Never smoked tobacco:		04-Jan-2018
Never smoked tobacco:		14-Jul-2016
Alcohol consumption, 1 units/week:		10-Jun-2021
Alcohol consumption, 3 units/week:		17-Apr-2012
Light drinker - 1-2u/day:	Alcohol Intake$$.clm - Repeat after an Interval	21-Jan-2010

Clinical warnings

Allergies

Description	Comment	Date recorded
Adverse reaction to propranolol	possible wheeze with this	29-Apr-2016

Additional Support Needs

No known ASN requirements

Additional relevant information

Risk of Suicide:Don't Know
Past history of suicide attempt:Don't Know
Risk of deliberate self harm:Don't Know
Is patient responsible for children?:Yes
If yes to patient responsible for children, please give details:child Khara age 4 years currently in local authority care
Risk to others including children/dependents/clinicians/other:Don't Know
Risk from others:Don't Know
Risk of Self Neglect:Yes
If yes to Risk of Self Neglect, please give details:poorly motivated to self care
OK to send correspondence to home address?:Yes
Patient will accept any site:Yes
Patient will accept cancellation or short notice appointment (within 1-6 days):Yes
Referred By:Referring GP
Electronic Attachment Present:No

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) **Date**

Registration Details

Personal details...		Address details...	
Date of birth	25/05/1987	**Post Code**	G31 3LY
Sex	F	**House Name Flat No**	
Surname	Mcleish	**No and Street**	312 Cumbernauld Rd
Previous Surname		**Village**	
Forenames	Wendy	**Town**	Glasgow
Calling Name	Wendy	**County**	
Title	Miss		
Birth Surname			
Marital Status	Marital status unknown		
Ethnic Origin	(White) Scottish		
Gpass Patient ID			

HA/HB Details...		Contact details...	
Trading partner	Greater Glasgow	**Home Tel No**	07912347436
Registered GP	Dr Anne McGinley	**Work Tel No**	
Usual GP	Dr Anne McGinley	**Mobile Tel No**	
Residential Inst		**E Mail Address**	
Branch Surgery			
CHI Number	2505876061		
NHS Number	617/87/408		

Practice Information...		Distances	
Dispensing	N	**Rural Mileage**	
Hospital Number		**Blocked Special**	
Records At	Easterhouse Health Centre	**Walking Quarters**	

Further Information		Upload Consent	
Long/Short stay or Dead		**SCI-DC Consent**	Implied Consent (default)
Date of registration	28/04/2020		

AMS\CMS Details		ECS (GP Summary) Consent	
AMS Consent	Yes	**Patient Consent**	Implied Consent (default)
Pharmacy Details			
Item Collected Check	Yes		
CMS Suitability Status	-1		
CMS Registration Status	1		

Problems

Active Problems		Authorised By	Code
16/03/2021	Substance misuse of Cannabis	Dr Sheppard	EMISNQND9
16/03/2021	Vulnerable child in family	Dr Sheppard	13IQ
01/11/2019	Assault by bite of human being by partner. bite to R ear, blunt head trauma by bottle.	Dr McGinley	TLxy0
02/09/2019	Alcohol problem drinking	Dr McGinley	E23-2
02/09/2019	Social worker involved	Dr McGinley	13G4
18/04/2019	Total notes on computer	Ms Boyle	9346
18/02/2019	Pityriasis versicolor	Dr Receveaux	AB10
26/02/2017	Elective caesarean delivery NOS	Mrs O'Neill	7F12z
03/09/2015	Miscarriage surgical ERPC	Mrs O'Neill	L04-1
06/06/2012	Substance misuse of Benzodiazepines	Dr Sheppard	EMISNQND16
30/12/2011	Pneumonia due to unspecified organism (Bilateral)	Dr Malek	H26
30/11/2011	Adult respiratory distress syndrome	Dr Wilson	H585-1
01/11/2011	Misuse of Cocaine unspecified (Primary)	Dr Sheppard	EMISNQMI91
22/09/2011	Overdose of drug fluoxetine	Dr Wilson	SL-5
19/07/2011	Anxiety with depression	Dr Sheppard	E2003
31/01/2011	Death of father	Dr Rafferty	13M7
01/04/2007	Has a tremor seen by nuerologist 2012, felt to be benign	Dr Sheppard	1B22
01/01/1991	Death of mother age 29 MI	Ms Fergusson	13M8

Past Problems		Authorised By	Code
10/12/2020	**[D]Seizure NOS**	Dr Roberts	R003z-1
16/09/2019	**Assault by bite of human being**	Dr Roberts	TLxy0
10/06/2019	**Suspected UTI**	Dr Roberts	1J4
09/04/2019	**Upper respiratory tract infection NOS**	Dr Sheppard	H05z-1
11/10/2018	**Police domestic incident report received**	Dr Sheppard	9NDJ
17/07/2018	**Cervical cytology screen**	Mrs King	685-1
05/06/2017	**Hay fever - unspecified allergen**	Dr Roberts	H172-1
07/04/2017	**Postnatal exam. - maternal**	Dr Sheppard	62S-1
17/03/2017	**Dressing of wound**	Ms Gilmartin	81H
05/12/2016	**Cough**	Dr Receveaux	171
02/11/2016	**Whooping cough vaccination (GMS)**	Ms Gilmartin	655-1
29/04/2016	**Adverse reaction to propranolol** possible wheeze with this	Dr Sheppard	TJC02
09/07/2015	**Patient pregnant**	Dr Connolly	62
08/04/2015	**Ingrowing great toe nail (Right)**	Dr Connolly	M2300
30/07/2013	**Dyspepsia**	Dr Sheppard	J16y4
28/06/2013	**Advice about long acting reversible contraception**	Dr Sheppard	8CAw
11/01/2013	**Advice about long acting reversible contraception**	Dr Sheppard	8CAw
11/01/2013	**Upper respiratory tract infection NOS**	Dr Sheppard	H05z-1
10/09/2012	**Upper respiratory tract infection NOS**	Dr Sheppard	H05z-1
22/08/2012	**Letter sent to patient**	Dr Sheppard	9NC3
21/08/2012	**Advice about long acting reversible contraception**	Dr Sheppard	8CAw
07/08/2012	**Letter encounter to patient**	Dr Sheppard	9N35
06/06/2012	**Alcohol problem drinking**	Dr Sheppard	E23-2
11/05/2012	**Furunculosis of external auditory meatus (Left)**	Dr Sheppard	F5018
17/04/2012	**Unprotected intercourse**	Dr Sheppard	1565
17/04/2012	**Abdominal pain**	Dr Sheppard	1969
16/03/2012	**Hair loss**	Dr Paton	M2400-2
16/03/2012	**Abdominal pain**	Dr Paton	1969
16/03/2012	**Cough (Mild, Occasional)**	Dr Paton	171
26/08/2011	**Overdose of drug**	Dr Sheppard	SL-5

Health Admin Problems	Authorised By	Code

Investigations

Investigations		Authorised By	Code
20/06/2019	**(Non Coded Event - C.trachomatis/GC PCR)** (Source: LAB) . This is a VULVOLVAGINAL SWAB sample.|		
17/07/2018	**Cervical Cytology** (Source: Manually filed) . Routine Recall -		4K22.
05/12/2016	**(Non Coded Event - C-reactive Protein)** (Source: LAB) .		
05/12/2016	**(Non Coded Event - Coagulation Screen)** (Source: LAB) .		
05/12/2016	**(Non Coded Event - D-Dimer (IL DDHS))** (Source: LAB) . The above reference range applies to patients with suspected VTE.|In other populations the reference range is 0-243 ng/mL.|		
05/12/2016	**(Non Coded Event - Coagulation Screen)** (Source: LAB) .		
05/12/2016	**(Non Coded Event - Full Blood Count)** (Source: LAB) .		
30/09/2015	**(Non Coded Event - Bone Profile)** (Source: LAB) . Alkaline Phosphatase results IFCC aligned from 03/08/15.|		
30/09/2015	**(Non Coded Event - Urea & Electrolytes)** (Source: LAB) .		
30/09/2015	**(Non Coded Event - Liver Function Tests)** (Source: LAB) . Alkaline Phosphatase results IFCC aligned from 03/08/15.|		
30/09/2015	**(Non Coded Event - Full Blood Count)** (Source: LAB) .		
15/05/2015	**Cervical Cytology** (Source: Manually filed) . Routine Recall -		4K22.
18/03/2014	**Liver function test** (Source: LAB) .		44D6.
18/03/2014	**Thyroid function test** (Source: LAB) . Euthyroid TFT results|		442J.
04/03/2014	**Liver function test** (Source: LAB) .		44D6.
20/08/2013	**Plasma C reactive protein** (Source: LAB) .		44CC.
30/07/2013	**Liver function test** (Source: LAB) .		44D6.
30/07/2013	**Full blood count - FBC** (Source: LAB) .		424..
30/07/2013	**Serum ferritin** (Source: LAB) .		42R4.
30/07/2013	**Full blood count - FBC** (Source: LAB) .		424..
14/01/2013	**Full blood count - FBC** (Source: LAB) .		424..
14/01/2013	**(Non Coded Event - Amylase)** (Source: LAB) .		
14/01/2013	**Urea and electrolytes** (Source: LAB) .		44JB.
14/01/2013	**Liver function test** (Source: LAB) .		44D6.
04/09/2012	**Liver function test** (Source: LAB) .		44D6.
17/04/2012	**Cervical Cytology** (Source: Manually filed) . Routine Recall -		4K22.

Values

Values			
Date	Last Entry	Normal Range Indicator	Normal Range
23/03/2021	O/E - weight 83 Kg has gained, wants to stay on mirtaz cs helps her sleepp > try lower dose for sedation wout wt gain		
23/03/2021	O/E - height 158 cm	...../....	10-250
23/03/2021	Body Mass Index 33.25	..... |	20-25
16/09/2019			
16/09/2019	Never smoked tobacco		
20/06/2019	Chlamydia trachomatis nucleic acid detection		
20/06/2019	Neisseria gonorrhoeae nucleic acid detection		
17/07/2018	Cervical smear: negative Routine Recall -		
17/07/2018	Blood pressure reading 128/77 mm Hg		
05/12/2016	Serum C reactive protein level 8 mg/L	...../..	0-10
05/12/2016	Prothrombin time 12 s	...../..	9-13
05/12/2016	1.1 (Non Coded Event - PT Ratio)		
05/12/2016	APTT 28 s	./.....	27-38
05/12/2016	Activated partial thromboplastin time ratio 0.9	../.....	0.8-1.2
05/12/2016	11 s (Non Coded Event - Thrombin time)	/.....	11-15
05/12/2016	0.9 (Non Coded Event - TCT ratio)		
05/12/2016	DDimer level 459 ng/ml	..... |	0-230
05/12/2016	Total white cell count 10.5 x10^9/l	...../.	4-11
05/12/2016	Red blood cell (RBC) count 4.04 x10^12/l	./.....	3.8-5.8
05/12/2016	Haemoglobin estimation 124 g/l	../.....	115-165
05/12/2016	Haematocrit 0.355 l/l	/	0.37-0.47
05/12/2016	Mean corpuscular volume (MCV) 87.9 fl	..../.....	80-100
05/12/2016	Mean corpusc. haemoglobin(MCH) 30.7 pg	...../...	27-32
05/12/2016	Platelet count 270 x10^9/l	...../.....	150-400
05/12/2016	Neutrophil count 7.7 x10^9/l	...../	2-7.5
05/12/2016	Lymphocyte count 2 x10^9/l	../.....	1.5-4
05/12/2016	Monocyte count 0.7 x10^9/l	...../..	0.2-0.8
05/12/2016	Eosinophil count 0.06 x10^9/l	../.....	0-0.4
05/12/2016	Basophil count 0 x10^9/l	/.....	0-0.1
05/12/2016	Nucleated red blood cell count 0 x10^9/l		
05/12/2016	O/E - temperature normal		
05/12/2016	O/E - pulse rate 91 beats/minute		
18/05/2016	PFR - peak flow rate 390 L/min		
29/04/2016	Predicted peak flow 435 l/min		
30/09/2015	Serum calcium 2.31 mmol/L	.../.....	2.2-2.6
30/09/2015	Corrected serum calcium level 2.36 mmol/L	..../.....	2.2-2.6
30/09/2015	Serum inorganic phosphate 0.78 mmol/L	/.....	0.8-1.5
30/09/2015	Serum albumin 36 g/L	./.....	35-50
30/09/2015	Serum alkaline phosphatase 99 U/L	...../...	30-130
30/09/2015	Serum sodium 136 mmol/L	../.....	133-146
30/09/2015	Serum potassium 4.4 mmol/L	...../.....	3.5-5.3
30/09/2015	Serum chloride 106 mmol/L	...../..	95-108
30/09/2015	Serum urea level 5.6 mmol/L	...../....	2.5-7.8
30/09/2015	Serum creatinine 61 umol/L	../.....	40-130
30/09/2015	GFR calculated abbreviated MDRD > 60		
30/09/2015	Serum total bilirubin level 13 umol/L		
30/09/2015	ALT/SGPT serum level 25 U/L	...../....	5-40
30/09/2015	AST serum level 17 U/L		
09/07/2015	Fast alcohol screening test 8 /16		
09/07/2015	O/E - BP reading		
09/07/2015	Ex smoker 2005		
18/03/2014	Serum TSH level 1.9 mu/L	.../.....	0.35-5
18/03/2014	Serum free T4 level 13 pmol/L	.../.....	9-21
18/03/2014	Hepatitis C antibody test negative		
09/08/2013	Total alkaline phosphatase 86 IU/L		
09/08/2013	Serum troponin I level 0.04 ng/L		
30/07/2013	Total white blood count 9.2 10^9/L	...../...	4-11
30/07/2013	Red blood cell distribution width 12.6 %	..../.....	11.5-14.5
30/07/2013	Serum ferritin 194 ng/ml	...../...	10-275
01/07/2013	HAD scale: anxiety score 14 /21	...../...	0-21
01/07/2013	HAD scale: depression score 17 /21	...../..	0-21

14/01/2013	**Serum amylase level 61 U/L**		
14/01/2013	**Glomerular filtration rate > 60**		
21/09/2012	**U-S abdominal scan - Normal**		
04/09/2012	**Serum gamma-glutamyl transferase level 98 U/L**		
08/08/2012	**Standard chest X-ray - Please make at an appointment to see us for the result of the Chest Xray at your convenience.**		
17/04/2012	**Endocervical chlamydia swab - NORMAL**		
17/04/2012	**Alcohol consumption 3 units/week**	|.....	>0
05/04/2012	**Serum total protein 71 g/L**		
05/04/2012	**Serum globulin 38 g/L**		
23/03/2012	**Transferrin level 3.2 g/l**		
23/03/2012	**Serum iron level 12 ug/dL**		
19/03/2012	**Free T4 level 12 pmol/l**	|.....	13-30
19/03/2012	**Serum folate 3.4 ug/l**	|.....	4-18
19/03/2012	**Serum vitamin B12 206 ng/l**	.|.....	160-925
19/03/2012	**Serum creatine kinase level 69 U/L**	...|.....	24-195
03/03/2012	**Hepatitis B screening test negative**		
31/01/2011	**Ideal weight 57.42 Kg**		
31/01/2011	**Ex-Cigarette Smoker 10 cigs/day (past)**		
04/02/2010	**O/E - BP reading normal B P Screening$$.clm - Repeat after an Interval**		

Attachments

Attachments	Authorised By	Code

None

Due Diary Entries

Due Diary Entries		Authorised By	Code
17/07/2021	**Cervical smear due** SCCRS Recall	Ms Reid	685F.

Overdue Diary Entires

Overdue Diary Entries		Authorised By	Code
30/01/2021	Medication review **OVERDUE**	Dr McGinley	8B314

Alerts

Alerts	Authorised By	Code
None		

Drug Allergies

Drug Allergies		Authorised By	Code
29/04/2016	**Adverse reaction to propranolol** possible wheeze with this	Dr Sheppard	TJC02

Non-Drug Allergies

Non Drug Allergies	Authorised By	Code
None		

Family History

Family History	Authorised By	Code
None		

Referrals

Referrals		Authorised By	Code
03/02/2021	**EMISSPR400: Neurology referral (SCI Gateway Referral)**	Dr Sheppard	EMISSPR400
14/07/2016	**EMISSPR510: Ante-natal clinic referral (SCI Gateway Referral)**	Dr Wilson	EMISSPR510
09/07/2015	**8H57.: Obstetric referral (SCI Gateway Referral)**	Dr Connolly	8H57
09/04/2015	**8H7X.: Refer to podiatry (SCI Gateway Referral)**	Dr Connolly	8H7X
18/01/2012	**EMISSPR400: Neurology referral (SCI Gateway Referral)**	Dr Malek	EMISSPR400
12/07/2011	**8Hc1.: Referral to mental health crisis team (SCI Gateway Referral)**	Dr McGinley	8Hc1
13/08/2010	**Referral for further care** Refered To: Glasgow Royal Infirmary, NHS. Referral Type: Out Patient. Speciality Type: Neurology. Referral Nature: Investigate. , Referral Reason: Essential tremour ?	Dr Wilson	8H

Immunisations

Immunisations		Authorised By	Code
02/11/2016	**Low dose diphth, tet, acellular pert and inactiv polio vacc** ac39b086b exp 05/2018 left arm **(GMS)**	Ms Gilmartin	65I8
02/11/2016	**Whooping cough vaccination (GMS)**	Ms Gilmartin	655-1
24/10/2016	**Consent given for seasonal influenza vaccination**	Ms Bannachan	68NV0
24/10/2016	**Seasonal influenza vaccination (Left arm)** Batch no 33749411A exp 06/17 **(GMS)**	Ms Bannachan	65ED
24/10/2016	**Influenza vacc. administratn.**	Ms Bannachan	9OX
04/06/1992	**Booster DT(double)+polio vacc.** Preschool Immunis.$$.clm - No Action Required In GP care	Ms Fergusson	65K4
28/06/1989	**Measles/mumps/rubella vaccn.** Mmr Immunis.$$.clm - No Action Required In GP care	Ms Fergusson	65M1
31/05/1989	**Third DTP (triple)+polio vacc.** 3rd Primary Immunis.$$.clm - Repeat after an Interval In GP care	Ms Fergusson	65I3
04/01/1989	**Second DTP (triple)+polio vacc** 2nd Primary Immunis.$$.clm - Repeat after an Interval In GP care	Ms Fergusson	65I2
11/08/1988	**First DTP (triple)+polio vacc.** 1st Primary Immunis.$$.clm - Repeat after an Interval In GP care	Ms Fergusson	65I1

Health Status

Health Status	
	Cervical smear
17/07/2018	result Cervical smear: negative
21/01/2010	Notes summary on computer
23/03/2021	Height 158 cm
23/03/2021	Weight 83 Kg
23/03/2021	Body Mass Index 33.25 kg/m2
17/07/2018	Blood pressure reading 128/77 mm Hg
09/07/2015	Blood pressure reading O/E - BP reading
16/09/2019	Smoking Status Never smoked tobacco

Miscellaneous

Other Observations		Authorised By	Code
30/03/2021	**Vulnerable child in family (REVIEW)**	Dr Sheppard	13IQ
23/03/2021	**Vulnerable child in family (REVIEW)**	Dr Sheppard	13IQ
23/03/2021	**Has a tremor (REVIEW)**	Dr Sheppard	1B22
23/03/2021	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
23/03/2021	**SMS text sent to patient** We are receiving a huge amount of phone calls regarding repeat prescriptions. Having requested a prescription please wait 48hrs then collect from the nominated pharmacy. Do not call us unless your prescription is not with your pharmacy after 48hrs. Please note Boots in health centre ask for 72hrs before collecting.		9N3G
18/03/2021	**Has a tremor (REVIEW)**	Dr Roberts	1B22
18/03/2021	**Anxiety with depression (REVIEW)**	Dr Roberts	E2003
17/03/2021	**SMS text sent to patient**		9N3G
16/03/2021	**Substance misuse of Cannabis (REVIEW)**	Dr Roberts	EMISNQND9
16/03/2021	**Vulnerable child in family (REVIEW)**	Dr Roberts	13IQ
16/03/2021	**Alcohol problem drinking (REVIEW)**	Dr Roberts	E23-2
16/03/2021	**Social worker involved (REVIEW)**	Dr Roberts	13G4
16/03/2021	**Anxiety with depression (REVIEW)**	Dr Roberts	E2003
16/03/2021	**Substance misuse of Cannabis (REVIEW)**	Dr Sheppard	EMISNQND9
16/03/2021	**Vulnerable child in family (REVIEW)**	Dr Sheppard	13IQ
16/03/2021	**Social worker involved (REVIEW)**	Dr Roberts	13G4
16/03/2021	**Alcohol problem drinking (REVIEW)**	Dr Roberts	E23-2
16/03/2021	**Social worker involved (REVIEW)**	Dr Roberts	13G4
16/03/2021	**Anxiety with depression (REVIEW)**	Dr Roberts	E2003
09/02/2021	**Drug over usage checked**	Ms Boyle	8Blm
08/02/2021	**[D]Seizure NOS (REVIEW)**	Dr Tran	R003z-1
22/12/2020	**Assault by bite of human being (REVIEW)**	Dr Sheppard	TLxy0
22/12/2020	**Social worker involved (REVIEW)**	Dr Sheppard	13G4
22/12/2020	**[D]Seizure NOS (REVIEW)**	Dr Roberts	R003z-1
22/12/2020	**Social worker involved (REVIEW)**	Dr Roberts	13G4
10/12/2020	**Social worker involved (REVIEW)**	Dr Roberts	13G4
10/12/2020	**Alcohol problem drinking (REVIEW)**	Dr Roberts	E23-2
23/10/2020	**Has a tremor (REVIEW)**	Dr Sheppard	1B22
23/10/2020	**Alcohol problem drinking (REVIEW)**	Dr Sheppard	E23-2
23/10/2020	**Social worker involved (REVIEW)**	Dr Sheppard	13G4
18/08/2020	**Pityriasis versicolor (REVIEW)**	Dr Sheppard	AB10
12/12/2019	**Alcohol problem drinking (REVIEW)**	Dr Sheppard	E23-2
14/11/2019	**Anxiety with depression (REVIEW)**	Dr Roberts	E2003
16/09/2019	**Alcohol problem drinking (REVIEW)**	Dr Roberts	E23-2
16/09/2019	**Social worker involved (REVIEW)**	Dr Roberts	13G4
10/09/2019	**Social worker involved (REVIEW)**	Dr Sheppard	13G4
02/09/2019	**Alcohol problem drinking (REVIEW)**	Dr Sheppard	E23-2
10/06/2019	**Anxiety with depression (REVIEW)**	Dr Roberts	E2003
17/05/2019	**Anxiety with depression (REVIEW)**	Dr Roberts	E2003
05/03/2019	**Rep.presc. monitoring NOS**	Mrs Dickson	66RZ
18/02/2019	**Anxiety with depression (REVIEW)**	Dr Receveaux	E2003
01/11/2018	**Police domestic incident report received (REVIEW)**	Dr Sheppard	9NDJ
01/11/2018	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
25/09/2018	**Anxiety with depression (REVIEW)**	Dr Fleck	E2003
15/08/2018	**Anxiety with depression (REVIEW)**	Dr Receveaux	E2003
17/07/2018	**Anxiety with depression (REVIEW)**	Dr Morrison	E2003
17/07/2018	**Health ed. - exercise**	Mrs King	6798
17/07/2018	**Health ed. - diet**	Mrs King	6799
17/07/2018	**Health ed. - alcohol**	Mrs King	6792
17/07/2018	**Never smoked tobacco**	Mrs King	1371
04/06/2018	**Did not attend - no reason**	Ms Reilly	9N42
04/01/2018	**Anxiety with depression (REVIEW)**	Dr Roberts	E2003
23/06/2017	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
23/06/2017	**Advice about long acting reversible contraception** sore nose ? cold sore, wamed to stop nsaid if gi problems or wheeze develops , , cosnidering conception next copule of years wants to cont w POP for now	Dr Sheppard	8CAw
07/04/2017	**Elective caesarean delivery NOS (REVIEW)**	Dr Sheppard	7F12z
07/04/2017	**Advice about long acting reversible contraception** happy on POP, cosiderign futher preg, aware caustion on higher dose mirtaz, wants to stay on higher dose even though wt gain. bladder bowe IOK , smear due next may. declines all options	Dr Sheppard	8CAw

10/03/2017	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
10/03/2017	**Has a tremor (REVIEW)**	Dr Sheppard	1B22
28/02/2017	**Rep.presc. monitoring NOS**	Ms Boyle	66RZ
28/07/2016	**Patient pregnant**	Mrs Rogers	62
14/07/2016	**Medication review done**	Dr Wilson	8B3V
29/04/2016	**Has a tremor (REVIEW)**	Dr Sheppard	1B22
09/07/2015	**Brief intervention for excessive alcohol consumptn completed**	Dr Connolly	9k1A
09/07/2015	**Alcohol screen - fast alcohol screening test completed**	Dr Connolly	9k16
15/05/2015	**O/E Cervix: transitional zone seen**	Dr Sheppard	EMISHGT62
15/05/2015	**O/E - no vaginal discharge**	Dr Sheppard	26A1
15/05/2015	**O/E-vaginal speculum exam. NAD**	Dr Sheppard	2691
15/05/2015	**Cervical smear taken**	Dr Sheppard	7E2A2
15/05/2015	**Last menstrual period -1st day** 1 5 15	Dr Sheppard	1513
10/10/2014	**SMS text sent to patient** Initial consent-to-message request received		9N3G
22/09/2014	**Rep.presc. monitoring NOS**	Ms Boyle	66RZ
29/04/2014	**Brief intervention for excessive alcohol consumptn completed**	Ms Bannachan	9k1A
29/04/2014	**Alcohol screen - fast alcohol screening test completed**	Ms Bannachan	9k16
29/04/2014	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
29/04/2014	**Brief intervention for excessive alcohol consumptn completed** discussed LFTs improving but not normal last time, is aiming for wt loss, also advised to try and reduce alcohol, rRPT LFTS NEXT TIME due mirtaz.	Dr Sheppard	9k1A
29/04/2014	**Alcohol problem drinking (REVIEW)**	Dr Sheppard	E23-2
29/04/2014	**Never smoked tobacco**	Ms Bannachan	1371
18/03/2014	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
18/03/2014	**Has a tremor (REVIEW)**	Dr Sheppard	1B22
08/08/2013	**Never smoked tobacco** Sore across back. Not breathless. Chest clear. Temperature nomral. PO2 99 Pulse 90 pASIN COMING AND GOING. Has also had diarrhoea today. Has been to toliet 4-5 times. No blood in diarrhoea. No vomiting. cxr	Dr Wilson	1371
08/08/2013	**Telephone encounter** has pain in her back finding it hard to breath 316 2392/ / back pain sicne am, no red flags , full control on the urination and bowels, mild diarrhoea, concerend this may be pneumonia ended up inn the hosptial inn the past, sometimes hard to breath, but no cough or fever, lives with boy friend , offered a HV if she wishes, but tired to convince may not serious problem and by talking to her she has no problems with breathibng. But patient not keen for a HV either by me or Dr. Wilson today and only wants to talk to Dr. ES , thinks she can only knows her conditon, informed Dr. MW.	Dr Bhuvanagiri	9N31
01/08/2013	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
01/08/2013	**Dyspepsia (REVIEW)**	Dr Sheppard	J16y4
30/07/2013	**Death of father (REVIEW)**	Dr Sheppard	13M7
01/07/2013	**Depression screening using questions**	Ms Hutchison	6896
28/06/2013	**Non-smoker** ,	Dr Sheppard	1371-1
28/06/2013	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
14/06/2013	**Brief intervention for excessive alcohol consumptn completed**	Dr Sheppard	9k1A
14/06/2013	**Depression screening using questions**	Mrs Rogers	6896
14/06/2013	**Brief intervention for excessive alcohol consumptn completed**	Dr Sheppard	9k1A
14/06/2013	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
24/05/2013	**Alcohol screen - fast alcohol screening test completed**	Ms Boyle	9k16
04/03/2013	**Reassurance given** O/E temp 36.5 , RR 20 mt, SAO2 98 %, CVS, resp nad, neck no Ln prewsent/ Ears and throat nad, / plan; for paracetamol and if worsens pl contact NHS 24, if not improved please contact in 1/52.	Dr Bhuvanagiri	8C9
11/01/2013	**Non-smoker** systemically better but still clear productive cough after RTI 26 12 12, cocnem re risk ards recurmace. , denies inh subs misuse	Dr Sheppard	1371-1
20/12/2012	**DNA hospital appointment** - GAMH	Ms Bannachan	9N4H
21/08/2012	**Scottish - ethnic category 2001 census**	Ms Reid	9i21
21/08/2012	**Brief intervention for excessive alcohol consumptn completed** . arrange review if worse or not getting better	Dr Sheppard	9k1A
21/08/2012	**Health ed. - alcohol** long chat re contra options, , thinking of baby in next yr or so, declies alcohol contacts today, will consider	Dr Sheppard	6792
17/04/2012	**Health ed. - exercise**	Ms Fergusson	6798
17/04/2012	**Cervical neoplasia screen (GMS)**	Ms Fergusson	6859
17/04/2012	**Never smoked tobacco**	Ms Fergusson	1371
17/04/2012	**Contraception counselling** worried re STi risk vboyfriend, still no cotnraception , asymptomatic but smear, chalmydia and HCG please. +++. bamardoes will support	Dr Sheppard	6777
17/04/2012	**Overdose of drug (REVIEW)**	Dr Sheppard	SL-5
17/04/2012	**Has a tremor (REVIEW)**	Dr Sheppard	1B22
05/04/2012	**Overdose of drug (REVIEW)**	Dr Sheppard	SL-5
05/04/2012	**Non-smoker** 3w, worried this and L Ot ext may precip another pneuminia, sats 98%, chest clear pulse 75 apyrexial but agreed to abtics nonetheless. (incl denies inhaled subs misuse)	Dr Sheppard	1371-1

05/04/2012	**Cough (Mild) (REVIEW)**	Dr Sheppard	171
05/04/2012	**Overdose of drug (REVIEW)**	Dr Sheppard	SL-5
05/04/2012	**Hair loss (REVIEW)**	Dr Sheppard	M2400-2
23/03/2012	**Hair loss (REVIEW)**	Dr Sheppard	M2400-2
23/03/2012	**Benign essential tremor (REVIEW)**	Dr Sheppard	F1310
16/03/2012	**Advice about long acting reversible contraception**	Dr Paton	8CAw
16/03/2012	**Current non-smoker**	Dr Paton	137L
20/09/2011	**Depression screening using questions**	Ms Bannachan	6896
20/09/2011	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
30/08/2011	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
26/08/2011	**Depression screening using questions**	Ms Reid	6896
14/08/2011	**Cervical smear defaulter** Exclusion From SCCRS Until 14/11/2013. Reason: Defaulter	Ms Boyle	9O8S
11/08/2011	**Repeat prescription** Came to collect Med 3, see below. Med 3 copy kindly issued by Dr Henderson this morning, given to patient. Also requested for cetirizine and propranolol, issued on acute as previously.	Dr Malek	8B4-1
29/07/2011	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
26/07/2011	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
25/07/2011	**Anxiety with depression**	Ms Boyle	E2003
25/07/2011	**Depression screening using questions**	Ms Bannachan	6896
19/07/2011	**Death of father (REVIEW)**	Dr Sheppard	13M7
05/02/2010	**Plain X-ray sternum** normal priority=2	Ms Reid	5265
05/02/2010	**Plain x-ray of chest** normal priority=2	Ms Reid	7P042
04/02/2010	**Advice about long acting reversible contraception** priority=2	Dr Wilson	8CAw
03/02/2010	**Patient MRE received from HB** priority=1	Mrs Rogers	9125
22/01/2010	**Pat. GP7B/GP8B card from HB** priority=1	UnknownUser	9124
21/01/2010	**Notes summary on computer**	Ms Boyle	9344
21/01/2010	**Never smoked tobacco** Smoker$$ Status.clm - No Action Required	Mrs Rogers	1371
21/01/2010	**Light drinker - 1-2u/day** Alcohol Intake$$.clm - Repeat after an Interval	Mrs Rogers	1363
21/01/2010	**White Scottish** : priority=2	Mrs Rogers	9S13
21/01/2010	**Patient reg. form sent to HB** priority=1	Mrs Rogers	9123
06/06/2007	**3rd haemophilus B vaccination** priority=2	Ms Fergusson	657C
24/05/2007	**[V]Rabies vaccination** ACWY priority=2	Ms Fergusson	ZV045
09/05/2007	**2nd hepatitis B vaccination** priority=2	Ms Fergusson	65F2
11/04/2007	**1st hepatitis B vaccination** priority=2	Ms Fergusson	65F1
20/03/2007	**First hepatitis A and typhoid vaccination** priority=2	Ms Fergusson	65ML
20/03/2007	**Low dose diphtheria, tetanus and inactivated polio vaccinati** priority=2	Ms Fergusson	65K5
08/02/2002	**BCG vaccination** priority=2	Ms Fergusson	653
23/03/2000	**First Meningitis C Vaccination** Meningitis C Imm.clm - No Action Required In GP care	Ms Fergusson	657E
26/10/1994	**Child: clinical psychologist** in care a lot as a child Sexualised behaviour as a child priority=1	Ms Fergusson	64R7
05/01/1990	**At risk of physical abuse** priority=1	Ms Fergusson	13ZT

Consultations

Consultations	
26/05/2021	Dr Lachlan Calder at Phone Encounter
History	SW Karen (07435735240) trying to get in touch with us. I phoned back - no answer. I have left a message on her answering machine.
26/05/2021	Mrs Donna Rogers at Easterhouse Health Centre
Comment	Safegauarding - Admin task called pt today @ 9.15. PT confirmed she has moved and is now in G31 3LY. full address is flat 3-2 312 Cumbernauld Road. I advised Pt she is now outwith our area, she is aware of this and will be looking for new GP. Address passed to PM.
30/03/2021	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Vulnerable child in family**
History	discussed at safeguarding meeting no dosordered thought nor bipolar NOC re khara
23/03/2021 16:00	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Anxiety with depression**
History	approrpitely low, given sress of dispute w inlaws. not suicidal ,
Examination	O/E - weight 83 Kg has gained, wants to stay on mirtaz cs helps her sleepp > try lower dose for sedation wout wt gain
Comment	agrees occ health re treamour. is moving 3-2 312 cumbernauld rd G31 3LY permamanet move > rereg. al the best
Problem (REVIEW)	**Has a tremor**
History	says struggels to write
Examination	neuo exam reflexes brisk but symoetcial no bulbar nor facial weekness, some intention tremor
Medication	Mirtazapine Tablets 30 mg *56 TABLET ONE TO BE TAKEN AT NIGHT*
Comment	not planning preg bu avoid primidone mnoentehess for se. try occ health/physio approach
Problem (REVIEW)	**Vulnerable child in family**
History	I told w that as she has no confidant I recommend ongoing support for her, shde doesn't disagree. I sugest avoid alcohol/drugs given Hxseuizrure, she denies current, upset that current carer has been in hosp w what W understands to be widrawal seizre
18/03/2021	Dr Kathryn Roberts at Easterhouse Health Centre
History	rtnd GP call from yest. Please call after 11 as has contact with child. Phoned 13.40 Says her social worker has asked her to call us again as Wendy feels anxiety and tremor really bad a the moment. Says has been takign propranolol but prn. Advised I would suggest TDS at the moment to help tremor and anxiety, needs to be compliant with mirtazapine for it to work at its best - has not had script since December, plans to collect new script from pharmacy today. A little irritable on phone when I suggested there may not be something we can prescribe to help with anxiety and may be that needs other supports such as the ones we discussed and spoke about with her SW too. 'surely theres something better you can prescribe?' Could consider switch from mirtazapine and or inc dose of bblocker but I think needs to come in for f2f review given sudden escalation in symptoms and contact with us.
Problem (REVIEW)	**Anxiety with depression**
Problem (REVIEW)	**Has a tremor**
17/03/2021	Dr Anne McGinley at Data Entry
History	anxiety and tremors looking for adv. message left on voicemail to call us 10.50h
16/03/2021	Dr Kathryn Roberts at Easterhouse Health Centre

History — Phoned Wendy 14.21 - she said initially had script in pharmacy but I said not possible as has not had a script printed since 30/12. She admits sometimes forgetting to take, advised this may have negative impact on her mood/anxiety. Discussed measures such as keeping meds somewhere in house she will see them every day and remember to take or setting alarm on her phone to remind her. Discussed planned support from womens aid, the anchor and SW. I don't feel CMHT can add anything currently. Mood is low and tearful, gets angry very quickly, people have said this means she has 'bipolar', I don't think this represents bipolar. Agreed restart meds reg, review few weeks. Denies thoughts of self harm or suicide at all. Says has keys to move house but not moved yet - SAYS MOVING TO 3/2 312 CUMBERNAULD ROAD G31 3LY - PLEASE CHECK NEXT CONTACT IF SHE HAS MOVED - advised will need to register with another gp when moves as G31 not covered by us.

Problem (REVIEW) **Anxiety with depression**

Problem (REVIEW) **Social worker involved**

Problem (REVIEW) **Alcohol problem drinking**

Problem (REVIEW) **Vulnerable child in family**

Problem (REVIEW) **Substance misuse of Cannabis**

16/03/2021 Dr Emma Sheppard at Data Entry

Problem (REVIEW) **Vulnerable child in family**

Problem (REVIEW) **Substance misuse of Cannabis**

History — noted

16/03/2021 Dr Kathryn Roberts at Easterhouse Health Centre

History — Phoned SW Karine Carlyn 07435 735 240 - lengthy conversation. Multiple events recently leading to change in access for Wendy to Khara. There have been a couple of 'violent incidents' between her and ex-partner James - end of Jan/early feb - police involvement. In January nursery also reported Wendy appeared under the influence and a unannounced SW visit to the house corroborated this. SW says house strongly smelt of cannabis, poss tried to have been covered by huge amounts of air freshener. Karine says Wendy became angry ++ with the other SW present and 'came within an inch of assaulting her' - police were involved. Also Wendy knows ex partner James not allowed to stay overnight in house and Khara told carers/SW that daddy had stayed over and mummy had told her not to tell. Also incident this week of Wendy shouting and aggressive towards kinship carer in front of daughter. A childrens panel has been called, likely to be held couple of weeks. SW Karine under impression Wendy is taking mirtazapine and propranolol reg but has not ordered since December - I will d/w Wendy. I don't think CMHT are best placed for 'anger issues' - this is not a medical diagnosis. Suggest SW support Wendy with accessing The Anchor or Moira Anderson with regards childhood trauma and support, suggested also Tom Allen centre for anger issues. Also been referred to womens aid for support. Advised still awaiting seizure clinic.

Problem (REVIEW) **Social worker involved**

16/03/2021 Dr Kathryn Roberts at Easterhouse Health Centre

History — req to be reffered to Auchinlea fast T if possible . 07912347436. Phoned 12.18 Wendy says has been speaking to SW Karine Carlyn 07435 735 240 and told her to speak to GP about CMHT referral for 'anger issues' as Wendy says she got angry and 'chased the SW' out the house when accused of smoking cannabis. Says was prev getting daily unsupervised contact with daughter Khara but has been reduced to twice weekly supervised visits, really upset with this, a bit teary. Also says has recently lost a close friend.. Advised Wendy I would phone SW to discuss and get back to her. Wendy denies any drug use. Says 'hardly drinks' 'rare occasion now'. Last drink last night - 3 G+T's. Says has been falling out with Kharas kinship carer who Wendy says has been limiting video contact with Khlara.

Problem (REVIEW) **Anxiety with depression**

Problem (REVIEW) **Social worker involved**

Problem (REVIEW) **Alcohol problem drinking**

16/03/2021 Dr Emma Sheppard at Data Entry

History — phone call made x2 , answerphone message left to please return call giff gaff . req to be reffered to Auchinlea fast T if possible . 07912347436

08/02/2021 Dr Richard Tran at Telephone Consultation

Problem (REVIEW)	**[D]Seizure NOS**
History	Telephone consultation due to covid pandemic. Patient reports further seizures witnessed by ex partner - one last week and one yesterday evening. Last night's seizure - unsure on exact duration but reports 5-10mins. Description of foaming at mouth, eyes rolling, whole body shaking and being dazed for a while afterwards. Denies fevers. Feels back to normal now. Daughter not present / did not witness event. Recent feeling of anxiety - mainly due to concerns with social work and daughter not living with her full time. Also moving house and friend recently passed away. Denies recent drug use, says only drinks approximatey once per month at present, denies alcohol intake associated with recent events. Note referral to first seizure clinic has been scaled up from routine to urgent by Dr ES. Patient happy with this. D/W Dr AM, no additional action required at present.

08/02/2021	Dr Anne McGinley at Telephone Consultation
History	anxiety bad also had sezuire last night not feeeling since then

22/12/2020	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Social worker involved**
History	arthur reports reassurd that w not intoxicated on the am of assessment ? seizure was shortly after that,I pointed out cannt rule out withdrawa seizure, I hgihglighted we not getting any info asked for copies of correspondnace, he will reply if I will correspond to arthur.jarvis@sw.glasgow.gov.uk . I highighted that to my knwoledge W has no postive adult support in her life other than partner , A does nto disagree, I think W should remain supproted even if Khara retunred to her care
Problem (REVIEW)	**Assault by bite of human being**
History	arthur highlightss that scra decisions made without knoweldge of this 1 11 19 incident because W did not press charges, he remains cocnemd about that

22/12/2020	Dr Kathryn Roberts at Easterhouse Health Centre
History	Phoned social care direct. SW is Arthur Jarvis based in Parkhead office 0141 565 0100 and 565 0140. He is not available when I phoned 11.50am, they have taken message and will ask him to phone back. ?update on Khara - are there any plans to move back to Wendy, note recent hospital admission.
Problem (REVIEW)	**Social worker involved**
Problem (REVIEW)	**[D]Seizure NOS**

10/12/2020	Dr Kathryn Roberts at Easterhouse Health Centre
History	Admitted to hospital with seizure. CT head nil acute. Denied recent alcohol. Has been referred first seizure clinic.
Problem (FIRST)	**[D]Seizure NOS**
Problem (REVIEW)	**Alcohol problem drinking**
History	?Kara still in kinship care. for SW update.
Problem (REVIEW)	**Social worker involved**

23/10/2020	Dr Emma Sheppard at Phone Encounter
Problem (REVIEW)	**Social worker involved**
History	tried to get erailer on phone to police as daughter had an accident when in kinship care, this has made her v stressed, Kara due home before christmas
Problem (REVIEW)	**Alcohol problem drinking**
History	not drinking now, no subs misue she says
Problem (REVIEW)	**Has a tremor**
History	wants toi incr propran as stress of alochol assess etc, diffcult due to tesne relationship w foster carer, some anx re child coming for overnights... somunds goo today, nice interaction w child heard on phone, not intoxicvated
Medication	Propranolol Hydrochloride Tablets 10 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED*
Comment	wheeze o higher dose in the past, has been taking 10 x 4 at a time if bad > incr amount not dose and stop if wheeze ADVISED THAT NO OTHER MEDS SUITABLE FOR TREMOUR, primidone too toxic givn fertility etc > encoruage cont w womens aid counselling and stress reduction w sw team

23/10/2020	Dr Emma Sheppard at Data Entry
History	phone call made, answerphone message left to please return call re anxiety is worse. Mob please. (unavailable 11.15-12noon nursery pickup)

01/10/2020	Ms Liz Bannachan at Data Entry
Comment	Cerelle mirtazapine & propranalol printed as per Dr Sheppard
30/09/2020	Dr Anne McGinley at Script Request
History	mood has been low but better now. managing to get out to nursery etc. appetite good, sleep variable, mirtazipine helps. SW arrange taxi Mon -Frid to paick up daughter from kinship carer in Bellshill, and to drop her off at 4.30. fallout with aunt just now so variable contact at weekend. Panel hearing coming up..... SW arranging house move ? 2 bedroomed ?? return of daughter to Wendy's care. N alcohol during week, rarely at weekend.
Comment	CT meds
Medication	Cerelle Tablets 75 micrograms *168 tablet 1 Tab Daily* Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *28 tablet ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED FOR ANXIETY*
18/08/2020	Dr Emma Sheppard at Phone Encounter
Problem (REVIEW)	**Pityriasis versicolor**
History	out and bout, asks to return call after 13 30 , clotrim works then it reruns, no wt loss, things are more stable, getting wean unsup 11 > 16,00 and hopeful that back from aunts soon
Test Request	Glucose - *Requested*, CRP - *Requested*, Urea and Electrolytes - *Requested*, Gamma GT - *Requested*, Liver Function Tests - *Requested*, Thyroid function tests - *Requested*, Full Blood Count - *Requested*, Chronic Viral Hepatitis Screen - *Requested*, HIV antibody/antigen (Ab/Ag) screen - *Requested*
17/08/2020	Dr Emma Sheppard at Data Entry
History	req clotrim, bbv screen neg 2016 please d/w GP re this
13/07/2020 15:38	Dr Danish Sohail at Easterhouse Health Centre
History	propronolo and mirtazapine,noted telephonic review on 28/04
27/05/2020	Dr Anne McGinley at Script Request
Medication	Clotrimazole Cream 1 % *40 gramAPPLY TWO TIMES DAILY TO BACK FOR 1-2 WEEKS*
28/04/2020	Dr Anne McGinley at Telephone Consultation
History	returning call back from yesterday, wrong number for pt now updated. mood 'good' says stable, getting out of the house fro short walks, shopping. says no alcohol. friend staying with her. daughter staying with aunt. uses pm propanolol -small dose.
Examination	appropriate, cheerful on phone, sober.
Comment	CT meds, can phone for next script. worsenning advice.
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *56 tablet ONE TO BE TAKEN UP TO 3 THREE TIMES A DAY IF NEEDED FOR ANXIETY* Clotrimazole Cream 1 % *40 gramAPPLY TWO TIMES DAILY TO BACK FOR 1-2 WEEKS*

History	flare of rash on back as before, pitoriasis versicolor, still has ketoconazole shampoos, asking for cream. advised use shampoo ? benefit of topical
27/04/2020	Dr Kathryn Roberts at Easterhouse Health Centre
History	Patient returned call today re med review. PHoned 12.58 - straight to voicemail, message left to call us back please. Phoned 13.59 - straight to voicemail again
24/04/2020 11:24	Dr Warren Brownlee at Telephone Consultation
History	Returned patient call. No answer. Message left asking her to call back the practice. I think she is calling to review meds as per 6 April consultation.
06/04/2020	Dr Kathryn Roberts at Easterhouse Health Centre
History	Tried phoning - straight to voicemail, message left to call us back. Note stapled to scripts 'please contact surgery to speak to gp before next prescription. Please note shorter supply of medication'. I note request late ?compliance with meds.
Medication	Mirtazapine Tablets 45 mg *14 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *28 tablet ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY* Cerelle Tablets 75 micrograms *84 tablet 1 Tab Daily*
21/02/2020 14:15	Dr Warren Brownlee at Easterhouse Health Centre

History	Mirtazapine and Propranolol. Please make appointment for review.

04/02/2020	Dr Kathryn Roberts at Easterhouse Health Centre
History	mirtazapine and propranolol off repeat until review

29/01/2020 14:18	Dr Warren Brownlee at Script Request
History	Note review in November.
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
	Propranolol Hydrochloride Tablets 10 mg *28 TABLET ONE TO BE TAKEN UP TO THREE TIMES A DAY AS REQUIRED FOR ANXIETY*

27/12/2019	Dr Kathryn Roberts at Easterhouse Health Centre
History	sent letter 12/12/19 to make appt to see gp
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*

12/12/2019	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Alcohol problem drinking**
History	see kaharas notes, khara w paternal aunt sharon ward , sharon concernd relvelaed to HV to that recurrent CSA, mum alcoholic, ? consider anchor. , letter tci , note wlaos binge drinking wil need thiamine etc

14/11/2019	Dr Kathryn Roberts at Easterhouse Health Centre
History	I have left note for HV re ?any update since A&E presentation 01/11?
Problem (REVIEW)	**Anxiety with depression**
Medication	Propranolol Hydrochloride Tablets 10 mg *28 tablet ONE TO BE TAKEN UP TO THREE TIMES A DAY AS REQUIRED FOR ANXIETY*
	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*

01/11/2019	Mrs Donna Rogers at Data Entry
Comment	A&E - Assaulted

15/10/2019 14:39	Dr Warren Brownlee at Script Request
History	Propranolol, Mirtazapine, Cerelle

19/09/2019	Dr Kathryn Roberts at Easterhouse Health Centre
History	Spoke with HV Lisa, SW at visit yesterday arranged for Wendy's friend to come and look after children that day because of concerns. SW is aware of recent A&E presentation and HV Lisa also informed SW re finger biting incident. SW will be following up.

18/09/2019	Dr Anne McGinley at Data Entry
History	HV phoned, asking if mirtazepine (45mg taken last night) and propanolol taken this am, would cause slurred speech. not new meds and, no noted reactions to these in previous consultations. I hav eadvise not the cause of slurred speech. HV and SW are stil assessing situation.

18/09/2019	Dr Anne McGinley at Data Entry
History	from HV. cancelled visit last week for daughters 30/12 assessment, bacause her partner going in for operation. due to go out pm with SWorker this afternoon. W phoned to cancel todays visit, said partner has operation today at hospital! sounded slurred on phone. HV checking no other conditions that would make her sound slurred on phone-none. HV and SW will do an urgent visit today.

16/09/2019	Dr Kathryn Roberts at Easterhouse Health Centre
Medication	Co-Amoxiclav 500/125 Tablets *21 tablet ONE TO BE TAKEN THREE TIMES A DAY*
History	Says was out on night out Saturday 07/09/19, when came out of club was trying to break up a fight and someone bit her on finger. Did not seek medical attention but now worried re infection. Not systemically unwell. Wound on finger has been scabbing over but keeps breaking open. Some tenderness and swelling v locally around area of wound, no discharge, no tracking up finger/hand. Good ROM in finger and normal perfusion to tip of finger. Start co-amoxiclav. Also has some angular cheilitis past couple of days.
Problem (FIRST)	**Assault by bite of human being**
Medication	Clotrimazole And Hydrocortisone Cream 1 % + 1 % *15 gram APPLY THINLY TO THE AFFECTED AREA TWICE DAILY*

History	Discussed incident that led to A&E presentation. Says thought partner had locked her in house but in end turned out he had not and she had keys there. Says had been intoxicated as had been out night before and drinking till late, childs aunty had brought child back to her house in morning but as she was still drunk had phoned friend to come and pick her up for the day. Says partner relationship on/off and he is currenlty not living in house with them but they still see him reg and getting on ok at the moment. Declines help from eg womens aid. Appears mildly anxious. Smiling, casually dressed, well kempt, make up on. Daughter in room, playing, smiling, waving to me, appears to interact normally with mum.
Problem (REVIEW)	**Social worker involved**
Comment	Says s/w attended house couple of weeks ago and told they would be in touch but never heard anything since. Advised her I will phone them for update.
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History	Says drinking on nights out but denies any regular excess. Says feels mood ok at moment. Some stress as in private let and has been given notice to leave so has been to housing dept who are going to sort her out temp accomodation, she hopes in same area so she doesn't lose waiting list place for daughters nursery. Advised we have community links who may be helpful with current issues, she seemed interested but didn't ask for appt.
Problem (REVIEW)	**Alcohol problem drinking**

16/09/2019	Mr Touchscreen Touchscreen at Touchscreen
History	Never smoked tobacco Note: Patient entered data

15/09/2019	Ms Suzanne Reid at Data Entry
Comment	OOH - WORSENING PAIN

10/09/2019	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Social worker involved**
History	discussed w HV lisa my cocnern that W may have vulnerabilties relating to orphan/ difficult teenage years. declining support... please cosmider offer again , consider Links ???? AP1 if cont to decline support.

09/09/2019	Dr Anne McGinley at Data Entry
History	HV contactingf SWork and visiting W on 11/9/19

05/09/2019	Dr Anne McGinley at Data Entry
History	hv LISA NOT AVAILABLE. records checked by nursery nurse. swork contaced 3/9. I will phone HV tomorrow

02/09/2019	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Alcohol problem drinking**
History	mirtaz off repeat for now til seen

02/09/2019	Dr Anne McGinley at Data Entry
History	16/8/19 SEE SEE A&E. locked in house with daughter and friend, by partner who took keyes. had to climb out of ground floor window, ambulance assessed, taken to A&E. intoxicated and drowsy, knives and joints in house, unsuitable child care. notification to SWork (already under SWork 21/1/19), sister in law Sharon Ward collected child. HV informed. See GP.

23/08/2019	Dr Warren Brownlee at Easterhouse Health Centre
Problem	Med Req
Medication	Propranolol Hydrochloride Tablets 10 mg *56 tablet ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY*

16/08/2019	Ms Ashley Reilly at Easterhouse Health Centre
Comment	A&E - APPEARS INTOXICATED - Admin staff to contact patient Tell patient to make appointment with GP on encounters, HV informed

25/07/2019	Dr Lachlan Calder at Script Request
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *56 tablet ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY* Cerelle Tablets 75 micrograms *168 tablet ONE EVERY DAY*

24/06/2019	Dr Lachlan Calder at Phone Encounter
History	Wendy asking if she should finish the course of Trimetjoprim as Urine Culture negative - I said she should in order to prevent buiding up an resistance.

20/06/2019	Ms Ashley Reilly at Easterhouse Health Centre
Comment	URINE - Tell Patient Normal
20/06/2019	Dr Kathryn Roberts at Easterhouse Health Centre
History	See consultation 10/06, suprapubic pain resolved but now has some dysuria again. No fevers or vomiting. No vaginal discharge. Found out few days ago that partner of 9 years has slept with someone else, he has now left to mothers house. She is wanting check for STI. Will self swab at home and will consider blood tests for BBV. Advised to phone for results
Medication	Trimethoprim Tablets 200 mg *14 tablet ONE TO BE TAKEN TWICE A DAY*
Test Request	Midstream Urine (C&S) - *Completed*, Chlamydia/Gonorrhoea PCR - Vulvovaginal - *Completed*
13/06/2019	Dr Lachlan Calder at Script Request
Medication	Propranolol Hydrochloride Tablets 10 mg *56 tablet ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY*
10/06/2019	Dr Kathryn Roberts at Easterhouse Health Centre
History	Past week some suprapubic pain when passing urine only. Also some dysuria. No blood. No vomiting. No fevers. Has also had a cough but feels getting better now. Wondering if I can check chest.
Examination	Looks well. Temp 35.9. P80 reg. Sp02 99%oa Chest has good ae and sounds clear, resonant. Urine preg test negative. Urinalysis - leucocytes ++ and trace of blood.
Problem (FIRST)	**Suspected UTI**
Comment	Advised 3 days antibiotics and reg oral fluids, see gp if unresolving.
Medication	Trimethoprim Tablets 200 mg *6 TABLET ONE TO BE TAKEN TWICE A DAY*
History	Says sometimes forgets to take medications but thinks remembers most days. Feels mirtazapine is helping mood and also helps sleep. No recent thoughts of self harm or suicide. In with daughter in pram today, interacting ok with her and giving her smiles.
Problem (REVIEW)	**Anxiety with depression**
17/05/2019	Dr Kathryn Roberts at Easterhouse Health Centre
History	Late order for meds ?compliance - monitor
Problem (REVIEW)	**Anxiety with depression**
Medication	Propranolol Hydrochloride Tablets 10 mg *56 tablet ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY* Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
09/04/2019	Dr Emma Sheppard at Data Entry
Problem (NEW)	**Upper respiratory tract infection NOS**
History	1 wee not well 2 days feversymps and cough , note PMHX pneumonia
Examination	no SOBOE, full sentances, chest clear, resps normal, capillary refill normal, apyrexial, , pulse 60 and sats 98.
Comment	can phone for abtics if no better 2d, see if worse
19/03/2019	Dr Emma Sheppard at Script Request
History	PROPANALOL
21/02/2019	Dr Pierre Receveaux at Data Entry
History	Spoke to SW. Visiting regularly - had smelt ?cannabis in house before. Dad on trial, not meant to be in house but ?is Wendy planning on taking him back in. House well kempt when HV goes to visit. Next visit could ask ?dad in house ? any drugs - HV suspects not Wendy but dad could be the one taking cannabis but no evidence at present.
18/02/2019	Dr Pierre Receveaux at Easterhouse Health Centre
Problem (FIRST)	**Pityriasis versicolor**
History	rash weeks upper back, can be a bitch itchy, some change in pigment
Examination	?pityriasis versicolor, definitely appears fungal type rash. Some erythema/slight scale, no plaque.
Result	see us back if doesn't resolve/worsens
Medication	Ketoconazole Shampoo 2 % *120 ML APPLY ONCE DAILY TO THE AFFECTED AREA FOR 5 DAYS*
Problem (REVIEW)	**Anxiety with depression**
History	feels quite good just now. Wants to continue on mirtazapine. No self-harm suicide thoughts. Reports things are going well at home. Sleep can be a bit disturbed at times but not bad. In with child, seems appropriate. Feels mirtazapine helpful, not wanting to consider stopping just now

Examination	affect reactive, no suggestion intoxication/no smell alcohol or cannabis
Result	c/w mirtazapine, limited repeat, see us if worsening/self harm suicide thoughts/wanting to stop
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*

21/01/2019	Dr Anne McGinley at Data Entry
History	see Gp for review
Medication	Mirtazapine Tablets 45 mg *14 tablet ONE TO BE TAKEN AT NIGHT*

31/12/2018	Dr James Curran at Script Request
Medication	Cerelle Tablets 75 micrograms *168 tablet ONE EVERY DAY*

18/12/2018	Dr Anne McGinley at Script Request
History	please see GP as below
Medication	Propranolol Hydrochloride Tablets 10 mg *28 tablet ONE TO BE TAKEN THREE TIMES A DAY PRN*

14/12/2018	Dr Anna Fleck at Easterhouse Health Centre
Comment	request for mirtazepine.
Medication	Mirtazapine Tablets 45 mg *28 tablet 1 Tab At night*

20/11/2018	Dr Anna Fleck at Script Request
Comment	pharmacy req mirtazapine propranalol
Medication	Mirtazapine Tablets 45 mg *28 tablet 1 Tab At night* Propranolol Hydrochloride Tablets 10 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY*

01/11/2018	Dr Emma Sheppard at Easterhouse Health Centre
Problem (REVIEW)	**Anxiety with depression**
History	? drug misuse. HV notes mell of cannabis flat affect not forthcoming, tci revew LETTER SENT SEE B4 next pelase
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Problem (REVIEW)	**Police domestic incident report received**
History	partner still living seperately

18/10/2018	Dr Anna Fleck at Script Request
Comment	pharmacy req mirtazapine propranalol
Medication	Propranolol Hydrochloride Tablets 10 mg *56 tablet ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY* Mirtazapine Tablets 45 mg *28 tablet 1 Tab At night*

11/10/2018	Dr Emma Sheppard at Data Entry
Problem (FIRST)	**Police domestic incident report received**
History	sw and HV sheila quigley also ifnormed, joint visits x 2 , W accepting incident ,? aggression on either side, khara not present, and relationship wanting to be ongoing both parties > social work have withdrawn. W declining supports, case handed back to Lisa, I sugest Barnardoes as previously effective support from them
Examination	S states at times W presentation slow could be suggestive of sedation.

01/10/2018	Dr Pierre Receveaux at Script Request
History	Mirtzapine and Propranolol
Comment	issued 1 month supply last week

25/09/2018	Dr Anna Fleck at Script Request
Problem (REVIEW)	**Anxiety with depression**
Comment	script request for mirtazepine and propanolol.
Medication	Mirtazapine Tablets 45 mg *28 tablet 1 Tab At night* Propranolol Hydrochloride Tablets 10 mg *56 tablet ONE TO BE TAKEN UP TP THREE TIMES A DAY IF NEEDED FOR ANXIETY*

15/08/2018	Dr Pierre Receveaux at Easterhouse Health Centre
Problem (REVIEW)	**Anxiety with depression**
History	Mirtzapine and Propranolol
Comment	last mental health r/v 17/7/18
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *56 tablet ONE TO BE TAKEN UP TO THREE TIMES A DAY IF REQUIRED FOR ANXIETY SYMPTOMS*

17/07/2018	Ms Ashley Reilly at Easterhouse Health Centre

Comment	SMEAR - Tell Patient Normal

17/07/2018	Dr Carys Morrison at Easterhouse Health Centre
Problem	cherry angioma
History	noticed one on abdo and one on arm - requesting check
Comment	Dx confirmed, reassured
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Problem (REVIEW)	**Anxiety with depression**
History	feels mirtaz helps. forgets a few days per month to take it but reasonably consistent otherwise. feels mood is better on it and things are 'stable'. not very forthcoming otherwise
Comment	ok to continue current dose - advised we will review periodically to ensure still ok

17/07/2018	Mrs Allison King at Easterhouse Health Centre
Problem (FIRST)	**Cervical cytology screen**
Examination	Blood pressure reading 128/77 mm Hg
	Body Mass Index, 29.64
Social	Never smoked tobacco
Comment	cerelle pop smear today amenorrhoea with pop states taking regularly no missed pills no pregnancy risk ..smear due today
Additional	Health ed. - alcohol
	Health ed. - diet
	Health ed. - exercise

11/07/2018	Dr Carys Morrison at Script Request
History	mirtazapine propranalol cerelle
Comment	need up to date BP. note recent reviews and dna june. also 1m delay in mirtaz ?taking regularly - pleae make review appt
Medication	Cerelle Tablets 75 micrograms *168 tablet ONE EVERY DAY*
	Propranolol Hydrochloride Tablets 10 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY*
	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*

04/06/2018	Ms Ashley Reilly at Easterhouse Health Centre
Comment	Did not attend - no reason

24/05/2018	Dr Carys Morrison at Script Request
History	mirtazapine and propranolol
Comment	see review in april
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
	Propranolol Hydrochloride Tablets 10 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY*

18/04/2018	Dr Anne McGinley at Easterhouse Health Centre
History	posterior chest pains, as before. intermittent since RTI. just wants checked. no cough/SOB/wheeze/fever. generally well
Examination	apyrex PO2 97 resp normal Chest clear AE normal / saome discomfort springing R chest wall, mild
Comment	? muscular, lifting+++
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
	Propranolol Hydrochloride Tablets 10 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY*
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History	mood improved, anxiety better byt still affects functionning, CT meds, will self ref PCMHT

12/03/2018	Dr Carys Morrison at Script Request
History	mirtazapine propanalol
Comment	review for next script
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
	Propranolol Hydrochloride Tablets 10 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY*

29/01/2018	Dr Kathryn Roberts at Easterhouse Health Centre
Medication	Propranolol Hydrochloride Tablets 10 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY*
	Cerelle Tablets 75 micrograms *168 tablet ONE EVERY DAY*
	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*

04/01/2018	Dr Kathryn Roberts at Easterhouse Health Centre
History	Discussed mirtazapine. Says stopped them as had been feeling much better, however decided to restart them for anxiety only as feels helps anxiety. Denies any current low mood. Reactive, smiling today.
Problem (REVIEW)	**Anxiety with depression**
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History	Just wanting chest checked out as has had intermittent pains posterior chest past 3-4 weeks. Prev ICU admission with pneumonia 6 yrs ago and since then has occasionally had similar pains, sometimes given antibiotics for it, sometimes not. E+D normally, no vomiting or fevers or SOB. Occasionally brings up some sputum but nil reg.
Examination	Alert, looks well. Afebrile. Warm peripheries cRT<2secs. P76 reg. Sp02 99%oa RR 12-14. BP 135/92. HS normal. Chest has good ae bilaterally and sounds clear. moist mucous membranes.
Comment	No indication for antibiotics today but strong worsening/unresolving advice given to return if worsening/new symptoms or not settling like normal

04/01/2018	Mr Touchscreen Touchscreen at Touchscreen
History	Never smoked tobacco
	Note: Patient entered data

21/12/2017	Dr Danielle McGurn at Script Request
History	req mirtazapine asked if could have for today as none left. Last issued Sept. Call to Wendy - stopped taking them for a "few weeks" but has been back on continuously for past 3/52. Have issued that she make an appnt for review in January before Prx runs out.

21/09/2017	Dr Kathryn Roberts at Easterhouse Health Centre
History	late request ?compliance, discuss at next review
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
	Propranolol Hydrochloride Tablets 10 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY*

27/07/2017	Dr Kathryn Roberts at Easterhouse Health Centre
Medication	Beclometasone Aqueous nasal spray 50 micrograms/actuation *200 DOSE TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY*
	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
	Propranolol Hydrochloride Tablets 10 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY*

23/06/2017	Dr Emma Sheppard at Data Entry
Problem	sore nose
History	Advice about long acting reversible contraception sore nose ? cold sore, warned to stop nsaid if gi problems or wheeze develops , , cosnidering conception next copule of years wants to cont w POP for now
Medication	Naseptin Cream *20 gramAPPLY TWICE A DAY*
	Ibuprofen Tablets 400 mg *24 tablet ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD*
	Cerelle Tablets 75 micrograms *168 tablet ONE EVERY DAY*
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Problem (REVIEW)	**Anxiety with depression**
Examination	looks the happeist ai have ever seen her

05/06/2017	Dr Kathryn Roberts at Easterhouse Health Centre
History	Gets every year, requesting antihistamine and nasal spray, pharmacy wouldn't give her and told her ot see gp?
Problem (FIRST)	**Hay fever - unspecified allergen**
Medication	Cetirizine Hydrochloride Tablets 10 mg *60 tablet ONE TO BE TAKEN EACH DAY*
	Beclometasone Aqueous nasal spray 50 micrograms/actuation *200 DOSE TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY*
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History	Wanting chest checked over as some recent intermittent sharp shooting pains in right lateral chest wall area and thought might be chest inf. No cough, no sputum, no fevers, no vomiting. Pains are sharp and last a few seconds only. None today, once yesterday. No sob or pleuritic type pains
Examination	Looks well. Temp 36.8. P80 reg. Sp02 99%oa RR 12. HS normal. Chest has good ae and sounds clear, resonant. No abnormality of chest wall in area described.
Comment	Likely msk pain, advised see gp if worsening/changes.
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History	14 weeks post natal, erratic bleeding. Period type bleeds. Does get breaks in between but no pattern to it. Taking cerelle reg. Likely just needing time to settle postnatally and on POP so will keep diary of pattern and return to us few weeks. No post coital bleeding or dyspareunia. Smear up to date.
01/06/2017	Dr Anne McGinley at Data Entry
History	review tremor at next appt.
30/05/2017	Dr Kathryn Roberts at Easterhouse Health Centre
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
	Propranolol Hydrochloride Tablets 10 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY*
07/04/2017	Dr Emma Sheppard at Easterhouse Health Centre
Problem (FIRST)	**Postnatal exam. - maternal**
History	Advice about long acting reversible contraception happy on POP, cosiderign futher preg, aware caustion on higher dose mirtaz, wants to stay on higher dose even though wt gain. bladder bowe lOK , smear due next may. declines all options
Examination	well cheerful supported by in laws
Medication	Cerelle Tablets 75 micrograms *84 tablet ONE A DAY EVERY DAY*
Problem (REVIEW)	**Elective caesarean delivery NOS**
History	wpund better she says
31/03/2017	Ms Rhonda Gilmartin at Easterhouse Health Centre
Problem	wound dressing
Comment	almost healed, inadine and mepore no more leaakge advised to keep dry and return in a week.
30/03/2017	Dr Kathryn Roberts at Easterhouse Health Centre
History	Swab grew staph senstive to fluclox. Phoned 12.35 and advised. Will collect script.
Medication	Flucloxacillin Capsules 500 mg *28 CAPSULE ONE TO BE TAKEN FOUR TIMES A DAY*
24/03/2017	Ms Rhonda Gilmartin at Easterhouse Health Centre
Test Request	Wound Swab (C&S) #1 - *Completed*
24/03/2017	Ms Rhonda Gilmartin at Easterhouse Health Centre
Problem	dressing
Comment	a little swollen and wet today, no other signs of infection, may have got wet, betadine and mepore only review next week. swabbed incase
21/03/2017	Ms Rhonda Gilmartin at Easterhouse Health Centre
Problem	wound dressing removal of suture
Comment	small suture tail visible today and clipped wound almost healed .5 cm only dressed as before advised to keep dry
17/03/2017	Ms Rhonda Gilmartin at Easterhouse Health Centre
Problem (FIRST)	**Dressing of wound**
Comment	much improved today, less leakage, almost healed, review tues advised to keep dry and change as beore only if needed.
14/03/2017	Ms Rhonda Gilmartin at Easterhouse Health Centre
Problem	wound dressing
Comment	wound dressing, not much change no signs of infection, changed 1 since visit, still slight overgranulated, carry on as before and review friday, discussed checking for signs of infection. spare given to change, no signs of sutures.
10/03/2017	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Has a tremor**
History	OK on lower dose prorpan, dr catwell suggesting switch this > 10mgs fiven
Problem (REVIEW)	**Anxiety with depression**
History	seems cheerful, has met HV etc,cosniering depo, I cocnern re mood, try POP cosnder implant
10/03/2017	Ms Rhonda Gilmartin at Data Entry

Comment	? undissolved suture on righ side of section wound, open 1/2 cm, no signs of infection, slightly overgranulated, inadine and mepore applied and supplied advised to change if gets wet or 20 p strikethrough, and seek ooh if worse signs of infection. review tues.
10/03/2017	Dr Emma Sheppard at Data Entry
History	looks really well 2 post section but wound leaking
28/02/2017	Ms Kay Boyle at Easterhouse Health Centre
Result	Rep.presc. monitoring NOS
26/02/2017	Mrs Nicole O'Neill at Easterhouse Health Centre
Comment	discharged following delivery - propranolol has been reduced and can be titrated back up if needed at review appts (discuss at postnatal check?)
24/02/2017	Ms Liz Bannachan at Data Entry
Comment	I have d/w HV, they planning additional support
21/02/2017	Dr Anne McGinley at Script Request
History	cherck compliance at next appt
10/01/2017	Dr Anne McGinley at Data Entry
History	support from perinatal mental health team, plan, increased risk of anxiety
22/12/2016	Dr Kate Magee at Script Request
History	Mirtazapine and Propranolol
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *28 tablet ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED*
07/12/2016	Mrs Donna Rogers at Data Entry
Comment	admitted with chest infection
05/12/2016	Mrs Nicole O'Neill at Easterhouse Health Centre
Result	blood,coagulation,d dimer- raised DDimer, already assessed
05/12/2016	Dr Pierre Receveaux at Easterhouse Health Centre
History	Note FBC fairly normal (wcc normal, neutrophils 7.7, CRP normal), d dimer slightly raised at 459. D/W med reg, high risk patient for PE, probably can't confidently say she doesn't have one esp considering not particularly infective picture on other bloods. Tried to refer to ARU - asked to refer to obs instead. Referred obs reg - happy to receive princess royal maternity. Wendy being driven up tonight.
05/12/2016	Dr Pierre Receveaux at Easterhouse Health Centre
Problem (NEW)	**Cough**
History	1-2 weeks cough, green sputum, some pain left lower posterior chest on inspiration. 27 weeks pregnant, things going well from this point of view. No haemoptysis, no leg swelling, no recent travel. Previous pneumonia. Not SOB.
Examination	O/E - pulse rate 91 beats/minute SPO2 96% on air Chest - L coarse basal breathing sounds, some R coarse basal breathing sounds. otherwise clear. O/E - temperature normal
Result	d/w dr w - d dimer might be useful to rule out PE, unlikely, worsening advice.
Medication	Amoxicillin Capsules 500 mg *21 capsule ONE TO BE TAKEN THREE TIMES A DAY*
Test Request	CRP - *Completed*, Full Blood Count - *Completed*, D - Dimer - *Completed*
15/11/2016	Dr Pierre Receveaux at Script Request
History	propranalol mirtazapine
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
02/11/2016	Ms Rhonda Gilmartin at Easterhouse Health Centre
Problem (FIRST)	**Whooping cough vaccination (GMS)**
Comment	22 weeks gest
Additional	Low dose diphth, tet, acellular pert and inactiv polio vacc ac39b086b exp 05/2018 left arm **(GMS)**
24/10/2016	Ms Liz Bannachan at Data Entry

Comment	In for flu vac, not had before so Dr Receveaux seen and administered
24/10/2016	Ms Liz Bannachan at Data Entry
Comment	Flu vac given by dr Receveaux as not had before
Result	Influenza vacc. administratn.
Additional	Seasonal influenza vaccination (Left arm) Batch no 33749411A exp 06/17 **(GMS)** Consent given for seasonal influenza vaccination
11/10/2016	Dr Pierre Receveaux at Script Request
History	mirtazapine 45mg propranalol
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *28 tablet ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED*
15/09/2016	Dr Marie Wilson at Easterhouse Health Centre
History	Mirtazapine dose increased to 45 MG daily. Letter from Psychiatrist. Should have 10 days left of 30 mg so issued with 10 15 mg tabs - can then be chanded to 45mg daily.
Medication	Mirtazapine Tablets 15 mg *10 tablet ONE TO BE TAKEN AT NIGHT*
26/08/2016	Dr Kate Magee at Script Request
History	mitazipine and propananol
Medication	Mirtazapine Tablets 30 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *28 tablet ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED*
15/08/2016	Ms Suzanne Reid at Data Entry
Comment	FYI,see maternity re EDD 1 3 17. d/w MW and review case, no overt qulification for SNIPS but definitely some vulberability and previus subs misuse > d/w HV but NOT ref to snips.
28/07/2016	Mrs Donna Rogers at Data Entry
Comment	Patient pregnant
25/07/2016	Dr Kate Magee at Easterhouse Health Centre
History	Understood from last consultation that would be seen earlier for booking scan due to previous miscarriage. Received appt this morning for 30th August and upset she is having to wait so long. No abdo pains or bleeding. Not clear from last visit exactly what was said. Expect was warned might be seen earlier. Previous miscarriage mentioned in referral so vetting team obviously thought safe to wait until normal 10-12 week scan.
Comment	Wendy incredibly anxious and distressed at thought of having to wait another 4-5 weeks. Tried to reassure but not successful. D/W MW - no need for early scan. Wendy misunderstood advice. Agreed that I would write to ANC to see if we can bring forward scan due to high levels of anxiety but unlikley to be successful.
19/07/2016	Ms Liz Bannachan at Data Entry
Comment	Psych have referred onto perinatal mental health services.
14/07/2016	Dr Marie Wilson at Easterhouse Health Centre
History	Pregnant. LMP - Thinks end of May. Para 0+1 Miscarriage last September. On Mirtazapine. Limited information on safety in pregnancy. Discussed trying to reduce - not sure - will think about this. Has stopped alcohol. No other drugs. Feeling well. Would like to reduce Mirtazpaine to 30mg initially. Will self refer to PMHT. Lives with partner.
Medication	Folic Acid Tablets 400 micrograms *56 TABLET ONE TO BE TAKEN EACH DAY* Mirtazapine Tablets 30 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *28 tablet ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED*
New Referral	(NHS), , , , EMISSPR510: Ante-natal clinic referral (SCI Gateway Referral)
Additional	Medication review done
14/07/2016	Mr Touchscreen Touchscreen at Touchscreen
History	Never smoked tobacco Note: Patient entered data
08/06/2016	Dr Kate Magee at Script Request
History	Mirtazapine and propranolol

Medication	Propranolol Hydrochloride Tablets 10 mg *28 tablet ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED* Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*

18/05/2016	Dr Kate Magee at Easterhouse Health Centre
History	Review of breathing. Cough resolved and feeling better after taking antibiotics. Doesn't think salbutamol helped much. Has not had propranolol for a week and is feeling much more anxious. Keen to restart.
Examination	PFR - peak flow rate 390 L/min
Medication	Propranolol Hydrochloride Tablets 10 mg *28 tablet ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED*
Comment	Peak flow improved but difficult to tell whether due to ABx or stopping beta blocker. Explained that propranolol not ideal in pregnancy. Wendy still keen to have. Agree to low dose on PRN basis rather than regularly. Review in 4 weeks. Sooner if needed.

03/05/2016	Dr Kate Magee at Script Request
History	amoxicillin mirtazapine propranalol thrown out by mistake can she have new script
Medication	Amoxicillin Capsules 500 mg *15 CAPSULE ONE TO BE TAKEN THREE TIMES A DAY* Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *21 tablet ONE TO BE TAKEN THREE TIMES A DAY*
Comment	Last issue cancelled and items re-issued.

29/04/2016	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Has a tremor**
History	felt this and panic worse of propran so restarted, comes today to me with a cough and green spit, worried re recurrance of pneumonia
Examination	PFR - peak flow rate 295 L/min no SOBOE, full sentances, chest clear, resps normal, capillary refill normal, apyrexial, no rash or meningism, pulse 82 sats 98% Predicted peak flow 435 l/min
Comment	try titrate off propran slowly next week and repeat peak flow in case this is cause of cough. note aiming fpopreg would be better off prorpan for this
Medication	Salbutamol Cfc-free inhaler 100 micrograms/puff *1 INHALER ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY* Volumatic Spacer device *1 device TO BE USED AS DIRECTED* Propranolol Hydrochloride Tablets 10 mg *21 tablet ONE TO BE TAKEN THREE TIMES A DAY* Amoxicillin Capsules 500 mg *15 CAPSULE ONE TO BE TAKEN THREE TIMES A DAY*
Problem (FIRST)	**Adverse reaction to propranolol** possible wheeze with this

20/04/2016	Dr Kate Magee at Script Request
History	propranalol
Comment	Needs to see GP for this as per previous. Should still have 10 days left.

01/04/2016	Dr Kate Magee at Script Request
History	mitrazipine propanol
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 40 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY*
Comment	To see GP for review before next - message left with script.

15/03/2016	Dr Kate Magee at Easterhouse Health Centre
Medication	Hydrocortisone And Miconazole Cream 1 % + 2 % *30 GRAM APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE DAILY*
History	Red, itchy rash under both armpits for the past 5 days. Started on left but now on right too. Has had before and got cream for it. No fevers or systemic upset.
Examination	Fungal looking red rash under both axillae. Well demarcated area with whitish border. No surrounding erythema.
Comment	Try daktacort and review in 2 weeks if not settled.
Medication	Paracetamol Tablets 500 mg *56 TABLET TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)* Ibuprofen Tablets 400 mg *42 TABLET ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD*

History	Right sided headache off an on for past 2 days. Dull ache on side of head. Comes and goes. Not tried any pain relief. No visual disturbance or limb weakness. No obvious trigger. Doesn't feel unwell. No nausea, neck stiffness or rash. No viral like symptoms.
Examination	Not currently in pain. No scalp tenderness. Vision normal. Neurology normal in all four limbs. ENT - NAD.
Comment	?viral ?tension/stress related. No red flags. To try simple analgesia and review if symptoms persist or worsen.

Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
History	Struggling with mood and anxiety. Tremor is worsening and propanolol has made no difference. Ix by Neurology who felt related to anxiety rather than benign intentional tremor or significant pathology. Has not engaged with PCMHT in the past but would consider this for anxiety management. Keen to increase mirtazapine.
Comment	Given PCMHT leaflet and enocuraged to contact. Agreed to increase mirtazapine but monitor for weight gain. To stop propranolol if not helping. Review in 4 weeks. Sooner if mood deteriorates.

History	Abnormally low peak flow on PIP medical so was advised to see GP. Has had longstanding issues with SOBOE and cough at night time. Denies wheeze or chest tightness. No family history of atopy but worried she has asthma. Never had trial of inhalers. Very keen to have further tests.
Comment	This was 4th problem in one appt so needs to come back for discussion about peak flow diary and trial of inhalers. Advised to make appt for next week.

18/02/2016 — Dr Marie Wilson at Script Request

History	propranolol
Medication	Propranolol Hydrochloride Tablets 40 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY*

01/02/2016 — Dr Kate Magee at Script Request

History	mirtazapine & propranalol
Medication	Mirtazapine Tablets 30 mg *28 tablet 1 Tab At night* Propranolol Hydrochloride Tablets 40 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY*

06/01/2016 — Dr Kate Magee at Script Request

History	mirtzapine and propranolol
Medication	Mirtazapine Tablets 30 mg *28 tablet 1 Tab At night* Propranolol Hydrochloride Tablets 40 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY*
Comment	Has been seen recently.

02/12/2015 — Dr Carys Morrison at Easterhouse Health Centre

History	pain in right lower ribs posteriorly for a couple of months, worse in last few days. cough with yellow sputum. pain can be pleuritic, most aware of it when lying in bed at night. no trauma to ribs
Examination	t36.6 hr 97 sats 99% chest: few scattered creps right base. nil to see externally, but tender right lower ribs. normal expansion
Comment	treat as LRTI, nsaid for rib pain - ?msk, exacerbated by chest. discussed mood - still has bad days but overall ok on mirtaz. a little drowsy in monings.
Medication	Amoxicillin Capsules 500 mg *15 CAPSULE ONE TO BE TAKEN THREE TIMES A DAY* Ibuprofen Tablets 400 mg *42 TABLET ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD* Omeprazole Capsules (Gastro-Resistant) 20 mg *28 capsule ONE TO BE TAKEN EACH DAY*

24/11/2015 — Dr Carys Morrison at Script Request

History	propranalol & mirtazapine
Comment	last requested 29/9 - short course mirtaz issued, to see GP before next
Medication	Propranolol Hydrochloride Tablets 40 mg *56 Tablet(s) ONE TO BE TAKEN UP TO THREE TIMES A DAY IF NEEDED* Mirtazapine Tablets 30 mg *14 tablet ONE TO BE TAKEN AT NIGHT*

20/10/2015 — Dr Emma Sheppard at Data Entry

Problem	otitis externa?
History	bilat impacted wax has been using a cotton bud R ear and scalp now sore, co-cod not helping, has had GI upset w NSAID in past, not preg at them moment
Examination	no rash, apyrex, mouth OK, arrange review if worse or not getting better

Comment	warned to stop nsaid if gi problems or wheeze develops
Medication	Cerumol Ear drops *11 ML PUT FIVE DROPS INTO THE LEFT EAR(S) TWICE A DAY FOR THREE DAYS*
	Betnesol-N Drops *10 ML APPLY TWO TO THREE DROPS INTO THE RIGHT EAR(S) THREE TO FOUR TIMES DAILY FOR UP TO 14 DAYS*
	Ibuprofen Tablets 400 mg *12 tablet ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD*
	Omeprazole Capsules (Gastro-Resistant) 20 mg *4 capsule ONE TO BE TAKEN EACH DAY*
	Folic Acid Tablets 400 micrograms *56 TABLET ONE TO BE TAKEN EACH DAY*

20/10/2015	Dr Emma Sheppard at Data Entry
History	pain travelling down neck not sure if ear inf 07454750438, phoned, sore to swallow. no ear discharge
Comment	PMHx furunculosis tci

05/10/2015	Dr Kate Magee at Easterhouse Health Centre
History	In to discuss tremor as per previous appt. Explained had discussed with neurology specialists who advised higher dose of propranolol. Wendy happy to try this.
Medication	Propranolol Hydrochloride Tablets 80 mg *84 tablet ONE TO BE TAKEN THREE TIMES A DAY*
	Ibuprofen Gel 5 % *30 gram APPLY 3 TIMES A DAY*
Comment	Will come back for review of mood in 4 weeks - sooner if needed.

02/10/2015	Dr Kate Magee at Data Entry
Comment	Discussed with Neuro on call re tremor. Looking back on notes it looks like benign essential tremor was not diagnosed and neurologists thought more likely to be anxiety related. Advice therefore is to increase dose of propranolol rather than using any other meds. Primidone and topirimate other options but not commonly used due to SE's and ?teratogenicity.

30/09/2015	Dr Kate Magee at Easterhouse Health Centre
Medication	Co-Codamol 8/500 Tablets *60 tablet ONE OR TWO TO BE TAKEN FOUR TIMES A DAY*
History	Pain under right ribs and round into back for past 4 days. Not eased with paracetamol. Worse on bending forwards. No cough or SOB but worried as has previously had pneumonia and ended up on ITU. Feeling otherwise OK in herself. Difficult to tell whetherRUQ pain or rib pain. Previous deranged LFT's but Abdo USS in 2013 normal.
Examination	Well, apyrexial. HR 70bpm. Chest clear HS1+11+0. ENT Mildly tender RUQ and across lower ribs. Abdo soft. BS present.
Medication	Ibuprofen Gel 5 % *30 gram APPLY 3 TIMES A DAY*
Comment	Unsure if abdo or chest. To try analgesia and will do bloods for LFT's. If develops cough or SOB then needs to see GP for review as maybe LRTI. Will review on Monday with results.
Test Request	Bone Profile - *Completed*, Urea and Electrolytes - *Completed*, Liver Function Tests - *Completed*, Full Blood Count - *Completed*

Medication	Mirtazapine Tablets 30 mg *28 tablet 1 Tab At night*
	Propranolol Hydrochloride Tablets 40 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY*
History	Managing to cope after miscarriage. Boyfriend being very supportive. Feels mood not to bad given the circumstances. Been taking tewo mirtazapine at night for a while so asking for this to be changed. Doesn't think propranolol is helping tremor. Now that no longer pregnant is there something else she can have instead.
Comment	For 30mg mirtazapine nocte. Will look into other meds for tremor and discuss at review appt on Monday.

17/09/2015	Dr Kate Magee at Data Entry
Medication	Propranolol Hydrochloride Tablets 40 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY*
	Mirtazapine Tablets 15 mg *14 tablet 1 Tab At night*
Comment	D/W Dr ES - happy to send out short script in the post and see for next.

17/09/2015	Dr Kate Magee at Script Request
History	Mirtazapine, propanolol
Comment	Likely to be requesting to restart afetr misacrriage - tried to contact but no answer. Message left to phone us back.

07/09/2015	Mrs Nicole O'Neill at Easterhouse Health Centre
Comment	A&E PVB
12/08/2015	Dr Anne McGinley at Data Entry
History	HAS BEEN REF TO PERINATAL MAT SERVICES FOR MILD/MOD DEPN AND ANXIETY.
11/08/2015	Dr Marie Wilson at Easterhouse Health Centre
History	mirtazapine was to reduce this but none left will take evry 2nd day
Medication	Mirtazapine Tablets 15 mg *7 tablet ONE TO BE TAKEN ALTERNATE DAYS AND THEN STOP*
31/07/2015	Dr Emma Sheppard at Script Request
History	mirtazapine, handt taken in advice to reduce and stop, advised to do so with this and stop propranoll. note alcohol risk and no longer supported by barnardoes > she knows I will write to midwives re may need extra support (says partner still supportive)
09/07/2015	Ms Liz Bannachan at Data Entry
Comment	Had score of 8 on alcohol form, seen Dr Connolly 1st before filing in form
09/07/2015	Dr Martin Connolly at Easterhouse Health Centre
Problem (FIRST)	**Patient pregnant**
History	Prim pregnancy. No problems so far. LMP 22/05/15. EDD 26/02/16. Lives w boyfriend. On mirtazapine and propranolol for tremor.
Examination	O/E - BP reading
	Blood pressure reading 123/90 mm Hg
Comment	Start folic acid. Refer for ANC. Advised we will likely want to stop mirtaz during pregnancy.
Examination	Fast alcohol screening test, 8 /16
Medication	Folic Acid Tablets 400 micrograms *56 TABLET ONE TO BE TAKEN EACH DAY*
Result	Alcohol screen - fast alcohol screening test completed
	Brief intervention for excessive alcohol consumptn completed
09/07/2015	Mr Touchscreen Touchscreen at Touchscreen
History	Ex smoker (Stopped 2005)
	Note: Patient entered data
15/05/2015	Dr Emma Sheppard at Script Request
History	Last menstrual period -1st day 1 5 15
Examination	Cervical smear taken
	O/E-vaginal speculum exam. NAD
	O/E - no vaginal discharge
Comment	chaperone offered declined , hard to see os
Additional	O/E Cervix: transitional zone seen
14/05/2015	Dr Marie Wilson at Script Request
History	Mirtazapine
08/04/2015	Dr Martin Connolly at Easterhouse Health Centre
Problem (FIRST)	**Ingrowing great toe nail (Right)**
History	IGTN R great toe. Painful in certain shoes and when touches. Has been for several weeks. Wondering about referral to podiatry.
Examination	Ingrowth entire length of nail on medial side. No infection.
Comment	Likely does require more than simple self care. Self care advice given anyway, will ref podiatry.
26/03/2015	Dr Marie Wilson at Script Request
History	MIRTAZAPINE
06/02/2015	Dr Emma Sheppard at Data Entry
History	4 weeks of R chest wall pain and SOBOE, worried re
20/01/2015	Dr Martin Connolly at Script Request
Comment	Mirtazapine.
24/11/2014	Dr Danielle McGurn at Script Request
History	mirtazapine.
Comment	Two weeks early in requesting - monitor ongoing use.

Medication	Mirtazapine Tablets 15 mg *56 TABLET ONE TO BE TAKEN AT NIGHT*
14/10/2014	Dr Marie Wilson at Script Request
History	mirtazapine
22/09/2014	Ms Kay Boyle at Easterhouse Health Centre
Result	Rep.presc. monitoring NOS
05/09/2014	Dr Emma Sheppard at Data Entry
Problem	pre-conception counselling
History	PELVIC PAIN AND NOCturia, urinalyssis leucs ++
Examination	apyexial pulse 79
Comment	Imp 2w, trying for preg . aware would need to stop propran and consider mirtaz if preg. also tends to alt consipan/diah, blames diet, delcines Rx, arrange review if worse or not getting better . hcg-ve
Medication	Trimethoprim Tablets 200 mg *6 TABLET ONE TO BE TAKEN TWICE A DAY*
History	chest wall pain, not pleuritic no dvt, sats 96%, chest clear, resps normal, capillary refill normal,apyrexial, and sats
Comment	? sl sedated. arrange review if worse or not getting better
01/09/2014	Dr Martin Connolly at Easterhouse Health Centre
Comment	mirtazapine, should now be running out. Issued.
02/07/2014	Dr Kate Magee at Script Request
History	mirtazapine
Comment	2 months issued last week.
26/06/2014	Dr Emma Sheppard at Script Request
History	mirtazapine
29/04/2014	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Alcohol problem drinking**
History	fast score 7, she does not see this as a problem, in fact mood is good at the moment.
Comment	Brief intervention for excessive alcohol consumptn completed discussed LFTs improving but not normal last time, is aiming for wt loss, also advised to try and reduce alcohol, rRPT LFTS NEXT TIME due mirtaz.
Problem (REVIEW)	**Anxiety with depression**
History	better on mitaz
Examination	O/E - weight 74 Kg
Problem	lfts abnomral
History	hep creen negative
29/04/2014	Ms Liz Bannachan at Data Entry
Comment	message sent to dr sheppard re alcohol fast
29/04/2014	Ms Liz Bannachan at Data Entry
Examination	Fast alcohol screening test, 7 /16
Social	Never smoked tobacco
Result	Alcohol screen - fast alcohol screening test completed Brief intervention for excessive alcohol consumptn completed
02/04/2014	Dr Kate Magee at Data Entry
Comment	Hepatitis B+C tests negative.
18/03/2014	Ms Liz Bannachan at Data Entry
Result	Hepatitis C antibody test negative
18/03/2014	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Has a tremor**
History	a little better on propran, asking for alterntaive, recommend general increase activity
Medication	Mirtazapine Tablets 15 mg *56 TABLET ONE TO BE TAKEN AT NIGHT* Ibuprofen Gel 5 % *30 gram APPLY 3 TIMES A DAY* Elasticated Tubular Bandage Bp 7.5 cm size D *0.5 m TO BE USED AS DIRECTED*

	Propranolol Hydrochloride Tablets 40 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY CAN BE ISSUED AS HALF 80MG TABLET TRHEE TIMES A DAY*
Problem	Ifts abno
History	slightly, consistent w fatty liver? abdo pain a little better on Rx for dyspsp
Comment	hep screen as past risk fa though no new ones that W identifies, ferritin
Problem (REVIEW)	**Anxiety with depression**
History	sleep a little better w mirtaz, see for next for results
04/03/2014	Ms Linda Hutchison at Easterhouse Health Centre
Comment	LFTs raised. (has appt with dr s pre-arranged)
04/03/2014	Dr Emma Sheppard at Data Entry
History	symps same, req maalox for abdo (cannot tol peptac). req LFTs, see w result. ALo wanted to switch fluox, see 2w to titrate mirtaz, start in 2d time
25/02/2014	Dr Emma Sheppard at General Practice Surgery
Additional	WML document Insomnia (Poor Sleep) Printed
25/02/2014	Dr Emma Sheppard at Data Entry
History	2 months of "itching inside" and epigastric pain, veryworried re this and abdo swelling, exac of long standing insomnia. no red flags, not drug seeking. denies subs misuse/xs caffeine now.
Examination	no rash, no massess (abdo fold cosnstnet w wt gain) is teder epigastrium, no jaundice. Mood guarded and worried looking. I was NOT able to identify I.C.E.
Comment	tried to reassure ++. consider switch to mirtaz or tricylc, try empirical PPI 1w and review ?? for bloods
Medication	Omeprazole Capsules (Gastro-Resistant) 20 mg *7 capsule ONE TO BE TAKEN EACH DAY*
13/02/2014	Dr Marie Wilson at Script Request
History	Fluoxetine and Propranolol
20/01/2014	Dr Elizabeth Paton at Script Request
History	propranolol and fluoxetine
Medication	Propranolol Hydrochloride Tablets 40 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY CAN BE ISSUED AS HALF 80MG TABLET TRHEE TIMES A DAY* Fluoxetine Hydrochloride Capsules 20 mg *30 capsule ONE TO BE TAKEN EACH DAY*
16/12/2013	Dr Elizabeth Paton at Script Request
History	fluoxetine propranolol
03/12/2013	Dr Elizabeth Paton at Easterhouse Health Centre
History	had the cold for 2 weeks. was getting better but back again now. sore throat / head / ears / runny nose / cough. taking paracetamol and cough syrup.
Examination	35.2 sats 96% pulse 78 ears - both waxy, unable to visualise TMS, runny nose, sniffing, chesty cough heard. chest clear on auscultation
Comment	URTI - possibly 2 separate illnesses one after the other. continue current management.
22/11/2013	Dr J Curran at Script Request
Medication	Fluoxetine Hydrochloride Capsules 20 mg *30 capsule ONE TO BE TAKEN EACH DAY* Propranolol Hydrochloride Tablets 40 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY CAN BE ISSUED AS HALF 80MG TABLET TRHEE TIMES A DAY*
24/10/2013	Dr Ashok Bhuvanagiri at Easterhouse Health Centre
Comment	fluoxetine propranolol
27/09/2013	Dr Emma Sheppard at Script Request
History	cilest, bp o K RECENTLY,COUNSELLED RE long acting alts in June
27/09/2013	Dr Emma Sheppard at Script Request
History	propranolol and fluoxetine

Medication	Propranolol Hydrochloride Tablets 40 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY CAN BE ISSUED AS HALF 80MG TABLET TRHEE TIMES A DAY*

20/08/2013	Dr Emma Sheppard at Data Entry
History	diah, back pain sob settled on amoxi Rx in A&E for "urine infection". MSU incomclusive > rpt. crp d dimer high > rpt
Examination	pulse 75, sats 98%, well apyrexial, no clincial VTE, arrange review if worse or not getting better . cosndier STI screen if pyuria persists (no symps or known contacts)

09/08/2013	Dr James Curran at Easterhouse Health Centre
History	still having diarrhoea more SOB today and pain both sides of ribs and anterior chest also felt SOB when walking some symprtoms similaer to episode of pneumonia she had in 2001 -was on ECMO intubated
Examination	p 90 rr 20 sat 98% t 37.2 chest clear
Comment	prob viral but patient very concerned in view of similarity to previous episode - refer medical receiving

08/08/2013	Dr Marie Wilson at Easterhouse Health Centre
History	Never smoked tobacco Sore across back. Not breathless. Chest clear. Temperature nomral. PO2 99 Pulse 90 pASIN COMING AND GOING. Has also had diarrhoea today. Has been to toliet 4-5 times. No blood in diarrhoea. No vomiting. cxr
Examination	O/E - BP reading
	Blood pressure reading 116/77 mm Hg Abdomen soft. No guarding or rebound. No tenderness on examination. Likely viral infection?. nO OTHER HOUSEHOLD CONTACTS AFFECTED.
Medication	Paracetamol Tablets 500 mg *32 tablet TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)*

08/08/2013	Dr Ashok Bhuvanagiri at Easterhouse Health Centre
Comment	Telephone encounter has pain in her back finding it hard to breath 316 2392/ / back pain sicne am, no red flags , full control on the urination and bowels, mild diarrhoea, concerend this may be pneumonia ended up inn the hosptial inn the past, sometimes hard to breath, but no cough or fever, lives with boy friend , offered a HV if she wishes, but tired to convince may not serious problem and by talking to her she has no problems with breathibng. But patient not keen for a HV either by me or Dr. Wilson today and only wants to talk to Dr. ES , thinks she can only knows her conditon, informed Dr. MW.

08/08/2013	Dr Marie Wilson at Easterhouse Health Centre
History	Has pain in her back finding it hard to breath 316 2392 - Sore back , diarrhoea, feeling more breathless. Offered to see today. Will come down to surgery.

01/08/2013	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Dyspepsia**
History	no further black stool. Close questioning exludes classic malaena. Hgb OK. had been taking friends diclofenac. stop this, se after 3w PPI as peptac no help
Medication	Omeprazole Capsules (Gastro-Resistant) 20 mg *21 capsule ONE TO BE TAKEN EACH DAY*
- - - - - - - - - - - - - - - -	
Problem (REVIEW)	**Anxiety with depression**
History	anx symps persist despite fluox 8w. propran not working > stop this. see 3w + PRN. must be seen w sample if further malaena

30/07/2013	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Death of father**
History	will phone cruse
Examination	allergic to "sliimming patches" > contact dermatitis abdo
Medication	Hydrocortisone Cream 1 % *30 GRAM APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE DAILY*
	Peptac Liquid (aniseed) *100 ml 10-20ML TO BE TAKEN AFTER MEALS AND AT BEDTIME*
- - - - - - - - - - - - - - - -	
Problem (FIRST)	**Dyspepsia**
History	?? occ malaema but no other red flags. friends tabs help
Examination	abdo OK but wt gain
Comment	urgent appt made for results, try peptac meanwhile
Test Request	FBC, LFTs, TFTs, Ferritin

16/07/2013	Dr Ashok Bhuvanagiri at Easterhouse Health Centre

Medication	Propranolol Hydrochloride Tablets 40 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY PRN*

12/07/2013	Dr Marie Wilson at Easterhouse Health Centre
History	Sore throat, fever for past week. Throat red. Ear soft wax. Chest clear. oPTIONS DISCUSSED.
Medication	Phenoxymethylpenicillin Tablets 250 mg *56 tablet TWO TABLETS FOUR TIMES DAILY*

28/06/2013	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Anxiety with depression**
History	bit better. feels aclohol imrpioved. feels main prob is unresolved bereavement issues. bro in prison 13yrs and doesn't want her to spread dads ashes til he comes out. didn't get on w GAMH when barnardoes ended, but nisses the support
Comment	info re cruse etc . see 4w. suicidal ideas occ so gives tabs to boyfriend
Medication	Fluoxetine Hydrochloride Capsules 20 mg *30 capsule ONE TO BE TAKEN EACH DAY*
- - - - - - - - - - - - - - - -	
Problem (NEW)	**Advice about long acting reversible contraception**
Examination	O/E - weight 74 Kg
History	Non-smoker ,
	Body Mass Index 29.5 kg/m2
Comment	wt steady, hard to lose as doesn't get out due to low mood/stress. contemplating conception in 1yr, svoid SSRI at that time. prefers COCP meanwhile, aware options
Medication	Cilest Tablets *126 tablet AS DIRECTED*

14/06/2013	Mrs Donna Rogers at Data Entry
Examination	HAD scale: anxiety score, 15 /21
	HAD scale: depression score, 13 /21
Additional	Depression screening using questions

14/06/2013	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Anxiety with depression**
History	With louise, feels a little better back on SSRI, denies reg alcohol. no suidical plans. ? suicidal ideas but feels low risk "because my boyfirend takes the tabs". declines reref support servicess, doesn't percieve any xs of subs such as alcohol. see 2w + PRN
Examination	well presented but sl withdrawn
Comment	Brief intervention for excessive alcohol consumptn completed
Medication	Fluoxetine Hydrochloride Capsules 20 mg *14 capsule ONE TO BE TAKEN EACH DAY*
	Beclometasone Aqueous nasal spray 50 micrograms/actuation *200 DOSE TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY*
Comment	Brief intervention for excessive alcohol consumptn completed

04/06/2013	Dr Emma Sheppard at Data Entry
History	07500386935 carer called to let us no re concerns about pts odd behaviour
Comment	friend and "carer" Louise says not taking antidepressants , is considering restart. Wendy is aware of this phonecall and OK for us to share concerns. now not bothering to get dressed, not caring for herself. Wendy lives alone +/- boyfirend . Louise doesn't believe she is at risk overdose, feels deterioration down to stopping SSRI, suggest appt. L will help facilitate. (note high fast score and prev drug misuse etc, not mentioned to L)

28/05/2013	Dr Emma Sheppard at Data Entry
History	propanolol cilest, needs To make an appointment re FAST etc
Medication	Propranolol Hydrochloride Tablets 40 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY PRN*
	Cilest Tablets *21 tablet ONE A DAY SEE GP BEFORE NEXT PLEASE*

24/05/2013	Ms Kay Boyle at Easterhouse Health Centre
Examination	Fast alcohol screening test, 11 /16
Comment	Please discuss alcohol consumption with pt.
Result	Alcohol screen - fast alcohol screening test completed

23/05/2013	Dr Ashok Bhuvanagiri at Easterhouse Health Centre
History	C/O injury to the left anke 1/52 ago, not happened at work, painsul ankle sinc ethen, but can walk and put on the shoes.

Examination	O/E not inflammed not tender joint, can walk , only pain in the med. malleolus/ plan; piroxicom gel and paracetamol, physio if not improved in 2/52, r/v again if not improved in 4/52.
Medication	Piroxicam Gel 0.5 % *60 gramAPPLY 3 TIMES A DAY*

23/05/2013	Ms Suzanne Reid at Data Entry
Comment	patient scored 11 in fasting questionnaire - message sent to dr ashok.

18/03/2013	Dr Marie Wilson at Script Request
History	propranolol
Medication	Propranolol Hydrochloride Tablets 40 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY PRN*

04/03/2013	Dr Ashok Bhuvanagiri at Easterhouse Health Centre
History	c/o PAIN INN THE RT. SIDE OF CEHST SINCE SHE GOT PNEUMONIA/ NO SOB/ NOT PPTED SDFBY EXERSION/EMOTION. NO COUGH/ SOMETINES SPIT. NO THER PROBLEMS.
Examination	Reassurance given O/E temp 36.5 , RR 20 mt, SAO2 98 %, CVS, resp nad, neck no Ln prewsent/ Ears and throat nad, / plan; for paracetamol and if worsens pl contact NHS 24, if not improved please contact in 1/52.
Medication	Paracetamol Tablets 500 mg *32 tablet TWO TABLETS TO BE TAKEN FOUR TIMES DAILY*

11/02/2013	Dr Marie Wilson at Script Request
History	propranolol

16/01/2013	Dr Ashok Bhuvanagiri at Easterhouse Health Centre
Comment	FBC normal.

14/01/2013	Ms Suzanne Reid at Data Entry
Comment	u&e,lft - normal

14/01/2013	Ms Suzanne Reid at Data Entry
Comment	fbc - normal

14/01/2013	Dr Kathryn Roberts at Easterhouse Health Centre
History	Upper abdomen feels bloated, 'tight and tingly' constantly since yesterday. No vomiting. No indigestion/heartburn symptoms. E+D ok, not feeling feverish, bowels moving ok and pu ok. Worried about liver as ?told prob with liver when in hosp 2011 with pneumonia - can't see this in notes/letters. Does drink heavily every weekend - vomits with it. Discomfort in upper abdo not related to respiration but can be worse on coughing or on bending over. Started antibiotics yesterday for cough/urti. No haemoptysis/sob/chest pain.
Examination	O/E - BP reading Blood pressure reading 118/86 mm Hg Temp 36.3 Pulse 60 reg. Sp02 98%on air. Looks well, crt<2secs. HS normal. Chest clear. Abdo soft, mild epigastric ruq tenderness on deep palpation. no masses and no hepatomegaly. Bs normal.
Medication	Omeprazole Capsules (Gastro-Resistant) 20 mg *14 capsule ONE TO BE TAKEN EACH DAY*
Comment	?musculoskeletal pain from coughing ?gastritis from alcohol. No nsaid use. Check fbc, lfts. Start ppi. Continue antibiotics, paracetamol prn. Avoid alcohol and ibuprofen. Review few days, worsening advice given meantime

14/01/2013	Dr Anne McGinley at Data Entry
History	swollen stomach req advice - 07733979634. since uesterday pain over ? epig/liver. constant, describes as severe, no analgesia. relates to Abiotic. worse on coughing. intake Ok, no vomiting, alcohol excess 3 days ago. see doc.

11/01/2013	Dr Emma Sheppard at Data Entry
Problem (NEW)	**Upper respiratory tract infection NOS**
History	Non-smoker systemically better but still clear productive cough after RTI 26 12 12, cocnern re risk ards recurmace. , denies inh subs misuse
Examination	O/E - BP reading well apyrexial, pulse 63 reg , capillary refill OK, sats 96%, chest clear Blood pressure reading 118/77 mm Hg
Comment	arrange review if worse or not getting better , Rx amoxi
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Problem (NEW)	**Advice about long acting reversible contraception**
History	may conceive yr after next, not keen on l.a.ar.c.. Prob avoid depo p but coil may be an option, discuseed risks benegfits

04/01/2013	Dr Marie Wilson at Script Request
History	CILEST AND PROPRANOLOL
Medication	Cilest Tablets *63 tablet TO BE TAKEN AS DIRECTED*
	Propranolol Hydrochloride Tablets 40 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY PRN*
20/12/2012	Ms Liz Bannachan at Data Entry
Comment	DNA hospital appointment - GAMH
30/11/2012	Dr James Curran at Script Request
History	To make an appointment for BP before next
Medication	Cilest Tablets *126 tablet 1 Tab Daily*
	Propranolol Hydrochloride Tablets 40 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY PRN*
24/10/2012	Dr Anne McGinley at Data Entry
History	propranolol
Medication	Propranolol Hydrochloride Tablets 40 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY PRN*
21/09/2012	Ms Liz Bannachan at Easterhouse Health Centre
Result	U-S abdominal scan - Normal
13/09/2012	Dr Emma Sheppard at Script Request
History	propranolol - carried over from last night
10/09/2012	Dr Emma Sheppard at Data Entry
Problem (FIRST)	**Upper respiratory tract infection NOS**
History	concernd re high risk LRTI
Examination	well apyrex pulse 72 chest clear
Comment	agree prophylactic abtics, esp as also smoker w ? cocaie rel lung damage
Medication	Amoxicillin Capsules 500 mg *15 CAPSULE ONE TO BE TAKEN THREE TIMES A DAY*
04/09/2012	Ms Suzanne Reid at Data Entry
Comment	LFT - Letter Sent, Repeat after an Interval - Send Letter
04/09/2012	Dr Emma Sheppard at Phone Encounter
History	Jackie Robertson from Barnadoes, advocateing re anx about pneumonia recurrance. R pain localised to RUQ, tender epigast and ruq , lots of reflux she thinks due to SSRI, consdier stopping SSRI if not able to reduce drinking. uusss for gall stones, lfts, see 4w, sooner arrange review if worse or not getting better
Examination	pulse 77 sats 98% , ear OK, mouth partially erupted wisdom, appears a little distant ? sl intoxication but denies canabis etc last few days
Medication	Omeprazole Capsules (Gastro-Resistant) 20 mg *42 capsule ONE TO BE TAKEN EACH DAY*
Comment	occ iedas dsh esp when drinking > weekly pick up and advocate alcohol services ++++ again
Medication	Fluoxetine Hydrochloride Capsules 20 mg *56 CAPSULE TWO TO BE TAKEN EACH DAY WEEKLY DISEPNSE PLEASE*
30/08/2012	Ms Suzanne Reid at Data Entry
History	SORE EAR 2 DAYS AND SORE SIDE 2 MONTHS SEE TUE AS PLANNED AND CALL TOMORROW TO SEEN IF WORST. ES
30/08/2012	Dr Emma Sheppard at Data Entry
History	jackie robertson @ barnardos looking for emergancy appt for pt 332 8580, message left pls return call
22/08/2012	Dr Emma Sheppard at Phone Encounter
Problem (FIRST)	**Letter sent to patient**
History	The specialist Dr Poon says that your chest XRAY is fine, sorry for any unnecessary concern
21/08/2012	Dr Emma Sheppard at Data Entry
Problem (FIRST)	**Advice about long acting reversible contraception**
History	O/E - BP reading
Examination	Blood pressure reading 103/67 mm Hg
Comment	Health ed. - alcohol long chat re contra options, , thinking of baby in next yr or so, declies alcohol contacts today, will consider

	Brief intervention for excessive alcohol consumptn completed . arrange review if worse or not getting better
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Problem	chest wall pain
History	xray prob OK, message left for radiographer pls advise. Symps progressing to sound GI no red flags.
Examination	sats 99% chest clear HS normal pylse reg 72, I will let her know if needs further resp Ix

08/08/2012	Ms Suzanne Reid at Data Entry
Result	Standard chest X-ray - Please make at an appointment to see us for the result of the Chest Xray at your convenience.

07/08/2012	Dr Emma Sheppard at Phone Encounter
Problem (FIRST)	**Letter encounter to patient**
History	was given xray referral yesterday with other pts name on it looking for new form
Comment	Sorry I was not able to get hold of you on the phone. I enclose a new form and apologise for any inconvenience. I can confirm that it was indeed yourself that Dr Wilson planned to arrange XRAY for. Please let us know if you have any further concerns or questions, please see Dr Wilson or myself for the result

06/08/2012	Dr Marie Wilson at Easterhouse Health Centre
History	Right sided pain over right lower chest wall. Had a cough that settled. No spit. Had Pneumonia in November. Pain not pleuritic. Chest clear.
Examination	O/E - BP reading Blood pressure reading 126/81 mm Hg O/E - pulse rate 73 beats/minute
Test Request	CXR

26/07/2012	Dr Elizabeth Paton at Script Request
History	cilest, fluoxetine, propranolol - 1/12 only of pill, needs BP check etc. ? compliance with fluoxetine. to see doctor
Medication	Cilest Tablets *21 tablet 1 Tab Daily AS DIRECTED*

07/06/2012	Dr Marie Wilson at Easterhouse Health Centre
History	fINE RASH ON ARMS AND UPPER LEGS ? Prickly heat.
Medication	Cetirizine Hydrochloride Tablets 10 mg *56 TABLET ONE TO BE TAKEN EACH DAY* Crotamiton Cream 10 % *100 GRAM APPLY THINLY TWO TO THREE TIMES A DAY* Fluoxetine Hydrochloride Capsules 20 mg *56 CAPSULE TWO TO BE TAKEN DAILY* Cerumol Ear drops *11 ML PUT FIVE DROPS INTO THE AFFECTED EAR(S) TWICE A DAY FOR 2 WEEKS*

06/06/2012	Dr Anne McGinley at Data Entry
History	Propranolol
Medication	Propranolol Hydrochloride Tablets 40 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY PRN*

06/06/2012	Dr Emma Sheppard at Data Entry
History	see CMHT assessment which finds street benzodiazepine and alcohol misuse to be her primary problem , declined CAT > ref GAMH
Problem (FIRST)	**Substance misuse of Benzodiazepines**
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Problem (FIRST)	**Alcohol problem drinking**

11/05/2012	Dr Emma Sheppard at Data Entry
Problem (FIRST)	**Furunculosis of external auditory meatus (Left)**
History	reviewed after TR Stuart, syringe diffiuclt, wasx still dry, seems using drops OD only, pain exacerbated by procedure > aborted. the wx removed reveals an inflammed canal ? furuncluosis, impacted dry wax persists > abtics and resyringed after 2 weeks tds drops
Medication	Cerumol Ear drops *11 ML PUT FIVE DROPS INTO THE AFFECTED EAR(S) TWICE A DAY FOR 2 WEEKS*

24/04/2012	Dr Elizabeth Paton at Easterhouse Health Centre
History	left earache for several weeks. no associated symptoms. no improvement with olive oil drops since 17/4/12. would like them syringed.
Examination	both ear canals full of soft wax.

Comment	treatment room card given for ear syringing. to continue with olive oil drops until then and will come back for further look at ears if pain continues.
History	appt for auchinlea fri 27/4. wendy not received appt letter yet - copy printed for her.

23/04/2012	Dr Elizabeth Paton at Data Entry
History	neurological opinion (Dr Shah) - tremors are secondary to anxiety.

19/04/2012	Dr Emma Sheppard at Data Entry
History	nicola @ achinlea said pt should be seen within 14 days
Comment	Wendy asked me to look @ a copy of her DLA application. In this she states that she needs constant supervision due to her risk of suicide and tremour/risk of falls

17/04/2012 00:00	Ms Kay Boyle at General Practice Surgery
Result	Cervical Cytology
Follow up	(diary entry deleted) (Not Known)

17/04/2012	Ms Suzanne Reid at Easterhouse Health Centre
Comment	Endocervical chlamydia swab - NORMAL

17/04/2012	Dr Emma Sheppard at Data Entry
History	darrren chapman @ barnardos 16+ wishing to discuss pt 332 8580, reref see letter

17/04/2012	Ms Marian Fergusson at Easterhouse Health Centre
History	1st cx smear cx ectopy states she is on the pill has had a recent rx for this chlamydis test done as was cx smear ectopy pt coped very well Beta HCG NEG BP 112/72 CHLAMYDIA TEST ALSO DONE
Examination	Blood pressure reading 112/72 mm Hg
Social	Alcohol consumption, 3 units/week Never smoked tobacco
Additional	Cervical neoplasia screen **(GMS)** Health ed. - exercise

17/04/2012	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Has a tremor**
History	anx re feels she has nervbe damage L leg from IV access groin, had d/w neuro OPA mid march, I will chase letter
Problem (NEW)	**Abdominal pain**
History	feels due to abbno LFTs, , alcohol advice re gamma gt still rasied
Problem (REVIEW)	**Overdose of drug**
History	w barnadoes supprt. boyfriend NOT supprotive. barnadoes will help her chase CMHT. no futher DSH but does have tabs at home.
Problem (FIRST)	**Unprotected intercourse**
History	Contraception counselling worried re STi risk vboyfriend, still no cotnraception , asymptomatic but smear, chalmydia and HCG please. +++. barnardoes will support

05/04/2012	Ms Liz Bannachan at Data Entry
Comment	Lfts - liver test up a bit, please come in to discuss this and how you are

05/04/2012	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Overdose of drug**
History	CMHT have contacted and given crisis cotnacts , she declined assemssent today ? as had sandyford appt. d/w duty officer who will try to cotnact boyfirend

05/04/2012	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Hair loss**
History	sl low transferring index but suidical ideas > iron not given yet.
Medication	Gentamicin Ear/eye drops 0.3 % *10 ML ONE OR TWO DROPS UP TO SIX TIMES A DAY, OR MORE FREQUENTLY IF REQUIRED* Amoxicillin Capsules 500 mg *15 CAPSULE ONE TO BE TAKEN THREE TIMES A DAY*
Problem (REVIEW)	**Overdose of drug**

History	5d ago, see urgent ref CMHT,
Test Request	LFTs
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Problem (REVIEW)	**Cough (Mild)**
History	Non-smoker 3w, worried this and L Ot ext may precip another pneuminia, sats 98%, chest clear pulse 75 apyrexial but agreed to abtics nonetheless. (incl denies inhaled subs misuse)

23/03/2012	Ms Liz Bannachan at Data Entry
Comment	Normal
Result	Serum iron level 12 ug/dL Transferrin level, 3.2 g/l

23/03/2012	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Benign essential tremor**
History	w Barnardoes support (they will not discharge her just now) came for results blodos, lfts grossly abno at time of pneumonia, now normalising > ressured
Medication	Propranolol Hydrochloride Tablets 40 mg *168 tablet ONE TO BE TAKEN THREE TIMES A DAY*
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Problem (REVIEW)	**Hair loss**
History	consistent w telogen affluviium, tfts OK, iron studies done (mcv OK but lives on pasta). see once neuro letter in, she implies that they are thinking tremour exac by deconditioning, have ref physio

20/03/2012	Dr Emma Sheppard at Data Entry
History	gamma gt raised, To make an appointment . letter sent . note I had seen in passing d/w her 16 3 12 re consent to d/w Barnardoes team if we are concernd, eg DNA neuro for exclusion of Huntingtons. she agred

19/03/2012	Ms Liz Bannachan at Data Entry
Comment	FBC, b12, folate, ck & tfts - Normal

16/03/2012	Mrs Donna Rogers at Data Entry
Comment	U&E,LFT - Appointment with GP,Letter Sent

16/03/2012	Dr Elizabeth Paton at Easterhouse Health Centre
History	requesting various tablets 1. fluoxetine - mood up and down, has no family, some support from friends but most of time at home alone, does have a boyfriend that sometimes stays. has been taking 2x20mg rather than 1 as prescribed. wishes to stay at 2x20mg as felt that 1 previously ineffective. 2. contraceptive pill - happy on current pill, no problems. BP ok in Jan 3. propranolol - dues to see neruologist on monday 19/3/12, can continue until neuro review.
Medication	Fluoxetine Hydrochloride Capsules 20 mg *56 CAPSULE TWO TO BE TAKEN DAILY*
Additional	Advice about long acting reversible contraception
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Problem (FIRST)	**Cough (Mild, Occasional)**
History	cough for last 2 days, non-productive, systemically well. associated with occasional pain in ribs after coughing. was told by resp to get coughs checked out early.
Examination	temp 35.1, sats 98% on air, hr 80. looks well. throat slightly red, not infected. chest clear
Social	Current non-smoker
Comment	has resp appointment 26/3/12. reassured at present but advised to come back should symptoms worsen.
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Problem (FIRST)	**Abdominal pain**
History	upper abdo pain, seems to be mainly RUQ / epigastric area. constant. no urinary / bowel symptoms. often worse after alcohol.
Examination	abdo soft, non-tender. ?palpable liver edge.
Social	slightly vague about alcohol intake but states only at the weekends.
Test Request	U and E, LFTs, Serum amylase level
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Problem (FIRST)	**Hair loss**
History	has noticed large clumps of hair falling out recently particularly on brushing hair / in the shower. ran out of time in consultation to discuss further today but will make further appointment for review.

03/03/2012	Ms Liz Bannachan at Data Entry
Result	Hepatitis C antibody test negative Hepatitis B screening test negative
27/02/2012	Dr Elizabeth Paton at Script Request
History	propanolol - still not been in for review as requested. awaiting neurology appointment. 1 week supply given in meantime
14/02/2012	Dr Marie Wilson at Easterhouse Health Centre
History	propranolol and fluoxetine
Medication	Fluoxetine Hydrochloride Capsules 20 mg *28 capsule ONE TO BE TAKEN EACH DAY*
18/01/2012	Dr Dalila Malek at Easterhouse Health Centre
New Referral	(NHS), , , , EMISSPR400: Neurology referral (SCI Gateway Referral)
16/01/2012	Dr Dalila Malek at Easterhouse Health Centre
History	secretary at SGH, Dr Miller to phone me back this PM.
16/01/2012	Dr Dalila Malek at Easterhouse Health Centre
History	In for review, feels better. tremor slightly better but still there. Could not get hold of Dr Miller, was told she has a clinic at GRI this PM will try phoning again later on, write letter if I don't get through. Also regarding F/U from resp point of view wendy was told by hospital she will have appointment in 4-6 weeks from discharge, **chase if not received,** still awaiting discharge summary.
Comment	requesting letter, said asked Money Adviser for home visit as was told by hospital not to go out for at least one to two months, they requested a doctor's letter. will discuss with Dr Wilson first. phone number above correct.
11/01/2012	Dr Dalila Malek at Easterhouse Health Centre
History	phoned Ward 7 on 232 0740 for more infor re: recent admission: spoken to Dr E.Johnstone who kindly reviewed Wendy's notes: admitted 20th of novemebr SOB chest discomfort and diarrhoea. treated as CAP, deteriorated and transferred to ITU on the 23rd bilat consolidation, needed haemodialysis, transferred to leister for ECMO. came back to GRI a week afterwards, stepped down to ward 7 on the 20th of December had deranged LFTs USS NAD thought to be due to ECMO. odd tremor noted referred neurology, seen by Dr MIller asked for blood test inclu urinary copper, vasculitis screen done in GRI also recommended investigations for Huntington's. plan was to see her again in one week, self discharged on Monday 02/01/12 prior to that. On discharge was stable from resp point of view, was awaiting neurology review and plans before official discharge. on self-discharge latest bloods CRP 3, WCC7, LFTs improved, antibiotics all completed before discharge. no propranolol on cardex. consultant Dr Chalmers.
Comment	Plan: review as planned, to contact Dr Miller and discuss plans. await written discharge summary.
11/01/2012	Dr Marie Wilson at Easterhouse Health Centre
History	See discharge letter. ARDS - very ill in ITU - admitted end of November for 6 weeks.
10/01/2012	Ms Suzanne Reid at Data Entry
Comment	No discharge letter from 20/11/11 as patient self discharged ward 7/16 Resp. 211-0738. pt reports was in coma for 5 weeks was also in ward 52, 232-0517. I will try and find out some clinical info. Dr ES
09/01/2012	Dr Dalila Malek at Easterhouse Health Centre
History	attended re: troublesome tremor requests referral to neurology, was in hospital for 6 weeks initially ITU then stepped down to ward 7 ?pneumonia (letter awaited) required trachyostomy and ?pleural fluid aspiration, stated self discharged on monday as was awaiting neurology review re tremor could not wait ?referred while in hospital. states has not been getting propranolol while in hospital hence tremor worse, started it again only on monday. referred to neuro in 2010, DNA letter said never received appointment.
Examination	O/E - BP reading marked resting tremor. Blood pressure reading 111/89 mm Hg , HR 80 reg. temp 36.7, sats 97%, chest clear nill added heared.
Comment	can refer neurology today, I will await further info from admission first, review again for improvement in one week now that started propranolol. worsening advice given.
05/01/2012	Dr Emma Sheppard at Script Request

History	propranolol fluoxetine, note recent admisiion w ? pneumonia ??? seizures (in retrospect prob rigors), asked To make an appointment
Medication	Propranolol Hydrochloride Tablets 40 mg *42 tablet ONE TO BE TAKEN THREE TIMES A DAY SEE DOC FOR NEXT*

20/11/2011	Ms Liz Bannachan at Data Entry
Comment	OOH - seizures

19/11/2011	Ms Suzanne Reid at Data Entry
Comment	OOH - SEIZURES

16/11/2011	Dr Gayle Henderson at Easterhouse Health Centre
History	cant hear out of left ear for last 2/52. no pain or discharge. no prev ear probs. No fever - otherwise well.
Examination	Looks well. impacted wax in both ears.
Comment	ADvised to use ear drops and avoid cotton buds. Review in 1/52 ? will require ear syringing.
Medication	Olive Oil Ear drops *10 ML PUT THREE TO FOUR DROPS INTO THE AFFECTED EAR(S) TWO TO THREE TIMES A DAY FOR THREE TO FIVE DAYS*

01/11/2011	Dr Emma Sheppard at Data Entry
History	mood a little more reactive, not sleeping well but functions OK. I would prefer to avoid sleeping tab. denies ideas of DSH, feels safe w 56 tabs fluox CAN phone for next

28/09/2011	Dr Gayle Henderson at Data Entry
History	propanolol
Medication	Propranolol Hydrochloride Tablets 40 mg 100 TABS 1 Tab 3 times daily

20/09/2011	Ms Liz Bannachan at Data Entry
Examination	HAD scale: anxiety score, 11 /21
	HAD scale: depression score, 13 /21
Additional	Depression screening using questions

20/09/2011	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Anxiety with depression**
History	med3 6w, getting lots of helpful input from crisis team, has been ref carr gom and pscyhology. Is not wanting CSA counselling at the moment but is aware that this is available
Examination	on time, wellpresented, looks better
Comment	can phone for next and tabs if feels input ontinuing to help

11/09/2011	Ms Suzanne Reid at Data Entry
Comment	ooh recommed chest wall pain for A&E.

01/09/2011	Mrs Donna Rogers at Data Entry
Comment	(as per Dr Shepp request) - David Cross from Auchinlea has tried to call patient x2 no answer he has sent letter to patient with urgent appointment for 6th Sept at 10am

31/08/2011	Ms Liz Bannachan at Data Entry
Comment	OOH - Sucidal

30/08/2011	Dr Emma Sheppard at Phone Encounter
Problem (REVIEW)	**Anxiety with depression**
History	spoke w David Cross duty CMHT (SW) , she has been allocated to SW but he will make this allocation an urgent one. she will be contacted in a fe w days to make an appt within 7d

30/08/2011	Ms Kay Boyle at Easterhouse Health Centre (13448)
Additional	Anxiety with depression

26/08/2011	Dr Emma Sheppard at Data Entry
Problem (FIRST)	**Overdose of drug**
Medication	Fluoxetine Hydrochloride Capsules 20 mg 28 capsule ONE TO BE TAKEN EACH DAY WEEKLY DISPENSE
History	OD of SSRI 4d ago, admitted hosp, self Dx before saw psych liason. no suicidal plans now, with Barnardos Marie Paton support person,sees her weekly. has been offered psycho Tx by barnardos

26/08/2011	Ms Suzanne Reid at Data Entry
Examination	HAD scale: anxiety score, 15 /21
	HAD scale: depression score, 15 /21
Additional	Depression screening using questions
14/08/2011 00:00	Ms Kay Boyle at General Practice Surgery
Comment	Cervical smear defaulter Exclusion From SCCRS Until 14/11/2013. Reason: Defaulter
11/08/2011	Dr Dalila Malek at Easterhouse Health Centre
History	Repeat prescription Came to collect Med 3, see below. Med 3 copy kindly issued by Dr Henderson this morning, given to patient. Also requested for cetirizine and propranolol, issued on acute as previously.
11/08/2011	Dr Gayle Henderson at Data Entry
History	req copy of sick line (lost) dated 9/08/11 for 4 weeks
Comment	MED 3 issued to pt on 29/7/11 for 4 weeks. have reisued a copy of this med 3 (anxiety and depression) from 29/7/11 to 26/8/11.
29/07/2011	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Anxiety with depression**
History	still feels spaced out even though off antihist. , suggestive of depersonilisation consistent w marked social stressors so med 3 A&D 4w, see then + PRN. wanting benefit advice and advice re prison visiting (gets to see bro 3 x/mnth) > sighposting to community resources. no formal DSH plans, wants to cont fluox. seems organised in thought, reassured no psychosis apparent
Examination	rash under arms and thighs ? allergic ??? erythrasma, stop shaving, empirical antifungal To arrange review if worse or not getting better
Medication	Miconazole Nitrate Cream 2 % 30 GRAM APPLY TWICE DAILY CONTINUING FOR 10 DAYS AFTER LESIONS HAVE HEALED
	Fluoxetine Hydrochloride Capsules 20 mg 28 capsule ONE TO BE TAKEN EACH DAY DISPENSE FORTNIGHTLY
26/07/2011	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Anxiety with depression**
25/07/2011	Ms Liz Bannachan at Data Entry
Examination	HAD scale: anxiety score, 11 /21
	HAD scale: depression score, 13 /21
Additional	Depression screening using questions
19/07/2011	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Death of father**
History	feels drowsy and spaced out on tabs.
Examination	flat, weepy, feels unsafe on own w vague suicidal ideas though no formal suicdal plans or PMHx DSH.
Medication	Fluoxetine Hydrochloride Capsules 20 mg 10 capsule ONE TO BE TAKEN EACH DAY
Comment	declines phone nos. info to CMHT : Wendy has felt drowsy on citalopram and wanted to stop this + try fluox. (though co prescription of antihistamine may play a part) . She feels unsafe on her own with suicidal ideas but no plans and no past history. She is socially isolated due to death/imprisonment of key family members but does have 2 neighbours who spend a lot of time with her when she feels unsafe. see 7-10 d + PRN
12/07/2011	Dr James Curran at Easterhouse Health Centre
History	low mood 6m mood swings poor sleep since father died. brother in prison no close family PH abuse as child.wondering about tracking down abusers. with neighbour. occ alcohol street valium to help her sleep. occ episodes of getting aggressive. refer cmht Rx see 3-4w MED3 4w 'low mood/anxiety'
Examination	sl flat slow speech
Medication	Citalopram Hydrobromide Tablets 10 mg 28 tablet 1 Tab Daily WEKLY DISPENSE
	Beclometasone Aqueous nasal spray 50 micrograms/actuation 180 dose TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY
	Cetirizine Hydrochloride Tablets 10 mg 30 TABS 1 Tab Daily
	Propranolol Hydrochloride Tablets 40 mg 100 TABS 1 Tab 3 times daily
28/06/2011	Ms Suzanne Reid at Data Entry
Comment	OOH - LEFT BREAST PAIN

16/06/2011	Dr Marie Wilson at Easterhouse Health Centre
History	Fell on Tuesday. Bruised over hip and side. Mobility normal but is sore.
Medication	Diclofenac Sodium E/c tablets 50 mg 28 tablet ONE TO BE TAKEN THREE TIMES A DAY WITH OR AFTER FOOD Co-Codamol 30/500 Tablets 60 tablet TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)
History	Hay fever. Mainly nasal symptoms.
Medication	Beclometasone Aqueous nasal spray 50 micrograms/actuation 400 DOSE TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY
15/06/2011	Dr Anne McGinley at Telephone Consultation
History	07769733984 fell last night thinks cracked rib no problems breathing. fell climbing over veranda, not high. pain on movement, no analgesia yet, no other resp symptoms. advised re STI, poss fracture. will take analgesia, make appt for tomoro. worsenning advice.
Medication	Co-Codamol 8/500 Tablets 32 tablet ONE OR TWO TO BE TAKEN FOUR TIMES A DAY
07/06/2011	Dr James Curran at Script Request
Medication	Propranolol Hydrochloride Tablets 40 mg 100 TABS 1 Tab 3 times daily
05/05/2011	Dr Marie Wilson at Script Request
History	propranolol
13/04/2011	Dr James Curran at Easterhouse Health Centre
Medication	Cilest Tablets 126 tablet 1 Tab Daily
31/03/2011	Dr Marie Wilson at Easterhouse Health Centre
History	propranolol
16/02/2011	Dr Marie Wilson at Script Request
History	propranolol
31/01/2011	Dr Joy Rafferty at Easterhouse Health Centre
Problem (FIRST)	**Death of father**
History	dad died last week, was in hospital but unexpected as planning for him to get home. not working as was dads carer. shocked by news. numb. funeral on weds. aunt has been helpign arrange but upset with aunt for saying she is next of kin. lives alone, mum also dead, has brother but he is in jail. has friends she can talk to , going to see one today. wanting sick line for job centre and something to help her sleep. not sleeping, mood low, no thoughts of self harm
Medication	Temazepam Tablets 10 mg 7 TABLET ONE TO BE TAKEN AT NIGHT
Examination	very quiet, not saying much unless asked direct questions, seems shocked
Result	short course sleeping tablets, review 1 week, med 3 - 2 weeks, bereavement. offered cruse, not wanting to talk to anyone she doesn't know. worsening advice given
31/01/2011	Ms Linda Hutchison at Data Entry
Examination	Blood pressure reading 112/83 mm Hg Ex-Cigarette Smoker, 10 cigs/day (past) O/E - height, 158 cm O/E - weight, 57 Kg Body Mass Index, 22.83 Ideal Weight, 57.42 Kg
Result	ht wt bp and smoking done
31/12/2010	Dr Marie Wilson at Script Request
History	Request for cilest Last BP check Feb - see for next script.
Medication	Cilest Tablets 63 tablet 1 Tab Daily AS DIRECTED
25/10/2010	Ms Linda Hutchison at Easterhouse Health Centre
Comment	dna'd gri neurology
25/10/2010	Ms Liz Bannachan at Easterhouse Health Centre
History	DNA - Neurology priority=2
13/08/2010	Dr Marie Wilson at Easterhouse Health Centre
History	SCI Electronic Referral priority=2

	Referral for further care Refered To: Glasgow Royal Infirmary, NHS. Referral Type: Out Patient. Speciality Type: Neurology. Referral Nature: Investigate. , Referral Reason: Essential tremour ?
13/08/2010	Dr Marie Wilson at Easterhouse Health Centre
History	Tremour hands. Most days. Sounds like benign essential tremour. Does not stop her daily activities but finds very annoying / embarassing. Propranalol made lirrle difference. Would like to stay on this meanting. Refer Neurology for assessment firs before considering primidone and to consider other alternatives. Smear discussed. priority=2
08/07/2010	Dr Marie Wilson at Easterhouse Health Centre
History	? Benign essential tremour. Alcohol helps. Only once weekly. No drugs no loss of consciousness. No adverse effect on life / skills etc. Options discussed. priority=2
21/04/2010	Ms Registrar. at Easterhouse Health Centre
History	glass cut to thumb and index fingure 4 days ago 2stitches to thumb but tight steristips to index fingure. thumb ok but index fingure sore ,sore to touch, says throbbing. pus came out on removing steristrips and pain subsided 1.5 cm laceration on pulp of distal phalynx.cleaned ,card for treatment room for dressing, antibiotics.c/o swellingon rt side of face for long time nothing visible to see to make app priority=2
26/03/2010	Dr Emma Sheppard at Easterhouse Health Centre
History	CONJUCTIVITIS:now bilat red eyes, stcuk lids in ams, OTC ? chloramphenical "rubbish" want sstonger abtic, feels she is low risk STI, try fusidic acid then see doc w OTC bottle if no better. LVS too priority=2
25/03/2010	Ms Suzanne Reid at Easterhouse Health Centre
History	OOH - EYE INFECTION priority=2
05/02/2010	Ms Suzanne Reid at Easterhouse Health Centre
History	chest & stemum xray - normal priority=2 Plain x-ray of chest normal priority=2 Plain X-ray stemum normal priority=2
04/02/2010	Dr Marie Wilson at Easterhouse Health Centre
History	Sore anterior chest wall. RTA 7 months ago. Sore LAST 1-2 weeks. Finds it hard to sleep because of pain. Pain over stemum. Has never had semar. Will make appt with pracitc nures. Requests OCP HAS BEEN TAKING CILEST FROM PROEVIOUS GP. Happy with OCP for contraception. priority=2 Advice about long acting reversible contraception priority=2 Systolic blood pressure Diastolic blood pressure O/E - BP reading normal B P Screening$$.clm - Repeat after an Interval (diary entry deleted) (Not Known)
04/02/2010	Ms Marian Fergusson at Easterhouse Health Centre
History	Low dose diphtheria, tetanus and inactivated polio vaccinati priority=2 First hepatitis A and typhoid vaccination priority=2 [V]Rabies vaccination ACWY priority=2 1st hepatitis B vaccination priority=2 2nd hepatitis B vaccination priority=2 3rd haemophilus B vaccination priority=2 BCG vaccination priority=2
Problem	**At risk of physical abuse** priority=1
Problem	**Death of mother** age 29 MI
Problem	**Child: clinical psychologist** in care a lot as a child Sexualised behaviour as a child priority=1
History	First DTP (triple)+polio vacc. 1st Primary Immunis.$$.clm - Repeat after an Interval In GP care (diary entry deleted) (Not Known) Second DTP (triple)+polio vacc 2nd Primary Immunis.$$.clm - Repeat after an Interval In GP care (diary entry deleted) (Not Known) Third DTP (triple)+polio vacc. 3rd Primary Immunis.$$.clm - Repeat after an Interval In GP care (diary entry deleted) (Not Known)

Booster DT(double)+polio vacc. Preschool Immunis.$$.clm - No Action Required
In GP care
Measles/mumps/rubella vaccn. Mmr Immunis.$$.clm - No Action Required
In GP care
First Meningitis C Vaccination Meningitis C Imm.clm - No Action Required
In GP care

03/02/2010 — Mrs Donna Rogers at Easterhouse Health Centre
History — Automatically generated by transaction priority=2
Problem — **Patient MRE received from HB** priority=1

22/01/2010 — UnknownUser at Easterhouse Health Centre
History — Automatically generated by transaction priority=2
Problem — **Pat. GP7B/GP8B card from HB** priority=1

21/01/2010 — Dr Anne McGinley at Easterhouse Health Centre
History — White Scottish : priority=2
Light drinker - 1-2u/day Alcohol Intake$$.clm - Repeat after an Interval (diary entry deleted) (Not Known)
Never smoked tobacco Smoker$$ Status.clm - No Action Required

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21/01/2010 — Mrs Donna Rogers at Easterhouse Health Centre
History — Automatically generated by transaction priority=2
Problem — **Patient reg. form sent to HB** priority=1

Current Medication

Current Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
23/10/2020	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED 84 TABLET	13/04/2021P	Dr Emma Sheppard	REPEAT

Past Medication

Past Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
23/03/2021	**Cerelle Tablets 75 micrograms** 1 Tab Daily 168 tablet	23/03/2021P	Dr Emma Sheppard	ACUTE
23/03/2021	**Mirtazapine Tablets 30 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	23/03/2021P	Dr Emma Sheppard	ACUTE
30/09/2020	**Cerelle Tablets 75 micrograms** 1 Tab Daily 168 tablet	01/10/2020P	Dr Anne McGinley	ACUTE
13/07/2020	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	17/08/2020P	Dr Anne McGinley	ACUTE
13/07/2020	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 28 tablet	17/08/2020P	Dr Anne McGinley	ACUTE
27/05/2020	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	01/06/2020P	Dr Anne McGinley	ACUTE
27/05/2020	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 28 tablet	01/06/2020P	Dr Anne McGinley	ACUTE
28/04/2020	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	28/04/2020P	Dr Anne McGinley	ACUTE
28/04/2020	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO 3 THREE TIMES A DAY IF NEEDED FOR ANXIETY 56 tablet	28/04/2020P	Dr Anne McGinley	ACUTE
28/04/2020	**Clotrimazole Cream 1 %** APPLY TWO TIMES DAILY TO BACK FOR 1-2 WEEKS 40 gram	01/06/2020P	Dr Anne McGinley	ACUTE
06/04/2020	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 14 tablet	06/04/2020P	Dr Anne McGinley	ACUTE
06/04/2020	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 28 tablet	06/04/2020P	Dr Anne McGinley	ACUTE
06/04/2020	**Cerelle Tablets 75 micrograms** 1 Tab Daily 84 tablet	06/04/2020P	Dr Anne McGinley	ACUTE
21/02/2020	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	21/02/2020P	Dr Anne McGinley	ACUTE
21/02/2020	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 56 tablet	21/02/2020P	Dr Anne McGinley	ACUTE
15/10/2019	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	15/10/2019P	Dr Anne McGinley	ACUTE
15/10/2019	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 56 tablet	15/10/2019P	Dr Anne McGinley	ACUTE
15/10/2019	**Cerelle Tablets 75 micrograms** ONE EVERY DAY 168 tablet	15/10/2019P	Dr Anne McGinley	ACUTE
16/09/2019	**Co-Amoxiclav 500/125 Tablets** ONE TO BE TAKEN THREE TIMES A DAY 21 tablet	16/09/2019P	Dr Anne McGinley	ACUTE
16/09/2019	**Clotrimazole And Hydrocortisone Cream 1 % + 1 %** APPLY THINLY TO THE AFFECTED AREA TWICE DAILY 15 gram	16/09/2019P	Dr Anne McGinley	ACUTE
25/07/2019	**Cerelle Tablets 75 micrograms** ONE EVERY DAY 168 tablet	25/07/2019P	Dr Anne McGinley	ACUTE
25/07/2019	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 56 tablet	23/08/2019P	Dr Anne McGinley	ACUTE
20/06/2019	**Trimethoprim Tablets 200 mg** ONE TO BE TAKEN TWICE A DAY 14 tablet	20/06/2019P	Dr Anne McGinley	ACUTE
10/06/2019	**Trimethoprim Tablets 200 mg** ONE TO BE TAKEN TWICE A DAY 6 TABLET	10/06/2019P	Dr Anne McGinley	ACUTE
17/05/2019	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 56 tablet	13/06/2019P	Dr Anne McGinley	ACUTE
19/03/2019	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 56 tablet	19/03/2019P	Dr Emma Sheppard	ACUTE
18/02/2019	**Ketoconazole Shampoo 2 %** APPLY ONCE DAILY TO THE AFFECTED AREA FOR 5 DAYS 120 ML	18/02/2019P	Dr Anne McGinley	ACUTE
18/02/2019	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	23/08/2019P	Dr Anne McGinley	ACUTE
21/01/2019	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 14 tablet	21/01/2019P	Dr Anne McGinley	ACUTE
31/12/2018	**Cerelle Tablets 75 micrograms** ONE EVERY DAY 168 tablet	31/12/2018P	Dr Anne McGinley	ACUTE

18/12/2018	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY PRN 28 tablet	18/12/2018P	Dr Anne McGinley	ACUTE
20/11/2018	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY 56 tablet	20/11/2018P	Dr Anne McGinley	ACUTE
18/10/2018	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 56 tablet	18/10/2018P	Dr Anne McGinley	ACUTE
25/09/2018	**Mirtazapine Tablets 45 mg** 1 Tab At night 28 tablet	14/12/2018P	Dr Anne McGinley	ACUTE
25/09/2018	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TP THREE TIMES A DAY IF NEEDED FOR ANXIETY 56 tablet	25/09/2018P	Dr Anne McGinley	ACUTE
15/08/2018	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	15/08/2018P	Dr Anne McGinley	ACUTE
15/08/2018	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY IF REQUIRED FOR ANXIETY SYMPTOMS 56 tablet	15/08/2018P	Dr Anne McGinley	ACUTE
11/07/2018	**Cerelle Tablets 75 micrograms** ONE EVERY DAY 168 tablet	11/07/2018P	Dr Anne McGinley	ACUTE
11/07/2018	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY 84 TABLET	11/07/2018P	Dr Anne McGinley	ACUTE
11/07/2018	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	11/07/2018P	Dr Anne McGinley	ACUTE
12/03/2018	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	24/05/2018P	Dr Anne McGinley	ACUTE
12/03/2018	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY 84 TABLET	24/05/2018P	Dr Anne McGinley	ACUTE
29/01/2018	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY 84 TABLET	29/01/2018P	Dr Anne McGinley	ACUTE
29/01/2018	**Cerelle Tablets 75 micrograms** ONE EVERY DAY 168 tablet	29/01/2018P	Dr Anne McGinley	ACUTE
21/12/2017	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	29/01/2018P	Dr Anne McGinley	ACUTE
21/09/2017	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	21/09/2017P	Dr Anne McGinley	ACUTE
21/09/2017	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY 84 TABLET	21/09/2017P	Dr Anne McGinley	ACUTE
27/07/2017	**Beclometasone Aqueous nasal spray 50 micrograms/actuation** TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY 200 DOSE	27/07/2017P	Dr Anne McGinley	ACUTE
27/07/2017	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	27/07/2017P	Dr Anne McGinley	ACUTE
27/07/2017	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY 84 TABLET	27/07/2017P	Dr Anne McGinley	ACUTE
23/06/2017	**Naseptin Cream** APPLY TWICE A DAY 20 gram	23/06/2017P	Dr Emma Sheppard	ACUTE
23/06/2017	**Ibuprofen Tablets 400 mg** ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD 24 tablet	23/06/2017P	Dr Emma Sheppard	ACUTE
23/06/2017	**Cerelle Tablets 75 micrograms** ONE EVERY DAY 168 tablet	23/06/2017P	Dr Emma Sheppard	ACUTE
05/06/2017	**Cetirizine Hydrochloride Tablets 10 mg** ONE TO BE TAKEN EACH DAY 60 tablet	05/06/2017P	Dr Anne McGinley	ACUTE
05/06/2017	**Beclometasone Aqueous nasal spray 50 micrograms/actuation** TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY 200 DOSE	05/06/2017P	Dr Anne McGinley	ACUTE
30/05/2017	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	30/05/2017P	Dr Anne McGinley	ACUTE
30/05/2017	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY 84 TABLET	30/05/2017P	Dr Anne McGinley	ACUTE
30/03/2017	**Flucloxacillin Capsules 500 mg** ONE TO BE TAKEN FOUR TIMES A DAY 28 CAPSULE	30/03/2017P	Dr Anne McGinley	ACUTE
10/03/2017	**Cerelle Tablets 75 micrograms** ONE A DAY EVERY DAY 84 tablet	07/04/2017P	Dr Emma Sheppard	ACUTE
10/03/2017	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY 84 TABLET	10/03/2017P	Dr Emma Sheppard	ACUTE
21/02/2017	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	07/04/2017P	Dr Emma Sheppard	ACUTE
21/02/2017	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED 28 tablet	21/02/2017P	Dr Anne McGinley	ACUTE
05/12/2016	**Amoxicillin Capsules 500 mg** ONE TO BE TAKEN THREE TIMES A DAY 21 capsule	05/12/2016P	Dr Anne McGinley	ACUTE
15/11/2016	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	22/12/2016P	Dr Anne McGinley	ACUTE
11/10/2016	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	11/10/2016P	Dr Anne McGinley	ACUTE

11/10/2016	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED 28 tablet	22/12/2016P	Dr Anne McGinley	ACUTE
15/09/2016	**Mirtazapine Tablets 15 mg** ONE TO BE TAKEN AT NIGHT 10 tablet	15/09/2016P	Dr Marie Wilson	ACUTE
26/08/2016	**Mirtazapine Tablets 30 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	26/08/2016P	Dr Anne McGinley	ACUTE
26/08/2016	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED 28 tablet	26/08/2016P	Dr Anne McGinley	ACUTE
14/07/2016	**Mirtazapine Tablets 30 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	14/07/2016P	Dr Marie Wilson	ACUTE
18/05/2016	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED 28 tablet	14/07/2016P	Dr Marie Wilson	ACUTE
18/05/2016	**Beclometasone Aqueous nasal spray 50 micrograms/actuation** TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY 200 DOSE	18/05/2016P	Dr Anne McGinley	ACUTE
18/05/2016	**Cetirizine Hydrochloride Tablets 10 mg** ONE TO BE TAKEN EACH DAY 56 TABLET	18/05/2016P	Dr Anne McGinley	ACUTE
29/04/2016	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY 21 tablet	03/05/2016P	Dr Anne McGinley	ACUTE
29/04/2016	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	08/06/2016P	Dr Anne McGinley	ACUTE
29/04/2016	**Amoxicillin Capsules 500 mg** ONE TO BE TAKEN THREE TIMES A DAY 15 CAPSULE	03/05/2016P	Dr Anne McGinley	ACUTE
29/04/2016	**Salbutamol Cfc-free inhaler 100 micrograms/puff** ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY 1 INHALER	29/04/2016P	Dr Emma Sheppard	ACUTE
29/04/2016	**Volumatic Spacer device** TO BE USED AS DIRECTED 1 device	29/04/2016P	Dr Emma Sheppard	ACUTE
01/04/2016	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY 56 tablet	01/04/2016P	Dr Anne McGinley	ACUTE
15/03/2016	**Hydrocortisone And Miconazole Cream 1 % + 2 %** APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE DAILY 30 GRAM	15/03/2016P	Dr Anne McGinley	ACUTE
15/03/2016	**Paracetamol Tablets 500 mg** TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS) 56 TABLET	15/03/2016P	Dr Anne McGinley	ACUTE
15/03/2016	**Ibuprofen Tablets 400 mg** ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD 42 TABLET	15/03/2016P	Dr Anne McGinley	ACUTE
15/03/2016	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	01/04/2016P	Dr Anne McGinley	ACUTE
06/01/2016	**Mirtazapine Tablets 30 mg** 1 Tab At night 28 tablet	01/02/2016P	Dr Anne McGinley	ACUTE
06/01/2016	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY 56 tablet	18/02/2016P	Dr Marie Wilson	ACUTE
02/12/2015	**Amoxicillin Capsules 500 mg** ONE TO BE TAKEN THREE TIMES A DAY 15 CAPSULE	02/12/2015P	Dr Anne McGinley	ACUTE
02/12/2015	**Ibuprofen Tablets 400 mg** ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD 42 TABLET	02/12/2015P	Dr Anne McGinley	ACUTE
02/12/2015	**Omeprazole Capsules (Gastro-Resistant) 20 mg** ONE TO BE TAKEN EACH DAY 28 capsule	02/12/2015P	Dr Anne McGinley	ACUTE
24/11/2015	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY IF NEEDED 56 Tablet(s)	24/11/2015P	Dr Anne McGinley	ACUTE
24/11/2015	**Mirtazapine Tablets 30 mg** ONE TO BE TAKEN AT NIGHT 14 tablet	24/11/2015P	Dr Anne McGinley	ACUTE
20/10/2015	**Cerumol Ear drops** PUT FIVE DROPS INTO THE LEFT EAR(S) TWICE A DAY FOR THREE DAYS 11 ML	20/10/2015P	Dr Emma Sheppard	ACUTE
20/10/2015	**Betnesol-N Drops** APPLY TWO TO THREE DROPS INTO THE RIGHT EAR(S) THREE TO FOUR TIMES DAILY FOR UP TO 14 DAYS 10 ML	20/10/2015P	Dr Emma Sheppard	ACUTE
20/10/2015	**Ibuprofen Tablets 400 mg** ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD 12 tablet	20/10/2015P	Dr Emma Sheppard	ACUTE
20/10/2015	**Omeprazole Capsules (Gastro-Resistant) 20 mg** ONE TO BE TAKEN EACH DAY 4 capsule	20/10/2015P	Dr Emma Sheppard	ACUTE
05/10/2015	**Propranolol Hydrochloride Tablets 80 mg** ONE TO BE TAKEN THREE TIMES A DAY 84 tablet	05/10/2015P	Dr Anne McGinley	ACUTE
30/09/2015	**Co-Codamol 8/500 Tablets** ONE OR TWO TO BE TAKEN FOUR TIMES A DAY 60 tablet	30/09/2015P	Dr Anne McGinley	ACUTE
30/09/2015	**Ibuprofen Gel 5 %** APPLY 3 TIMES A DAY 30 gram	05/10/2015P	Dr Anne McGinley	ACUTE
30/09/2015	**Mirtazapine Tablets 30 mg** 1 Tab At night 28 tablet	30/09/2015P	Dr Anne McGinley	ACUTE
17/09/2015	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY 56 tablet	30/09/2015P	Dr Anne McGinley	ACUTE

17/09/2015	**Mirtazapine Tablets 15 mg** 1 Tab At night 14 tablet	17/09/2015P	Dr Anne McGinley	ACUTE
11/08/2015	**Mirtazapine Tablets 15 mg** ONE TO BE TAKEN ALTERNATE DAYS AND THEN STOP 7 tablet	11/08/2015P	Dr Marie Wilson	ACUTE
14/05/2015	**Mirtazapine Tablets 15 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	14/05/2015P	Dr Marie Wilson	ACUTE
08/04/2015	**Cetirizine Hydrochloride Tablets 10 mg** ONE TO BE TAKEN EACH DAY 56 TABLET	08/04/2015P	Dr Anne McGinley	ACUTE
08/04/2015	**Beclometasone Aqueous nasal spray 50 micrograms/actuation** TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY 200 DOSE	08/04/2015P	Dr Anne McGinley	ACUTE
26/03/2015	**Mirtazapine Tablets 15 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	26/03/2015P	Dr Marie Wilson	ACUTE
06/02/2015	**Piroxicam Gel 0.5 %** Rub into the affected site three to four times daily 60 GRAM	06/02/2015P	Dr Emma Sheppard	ACUTE
20/01/2015	**Mirtazapine Tablets 15 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	20/01/2015P	Dr Anne McGinley	ACUTE
14/10/2014	**Mirtazapine Tablets 15 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	24/11/2014P	Dr Anne McGinley	ACUTE
05/09/2014	**Trimethoprim Tablets 200 mg** ONE TO BE TAKEN TWICE A DAY 6 TABLET	05/09/2014P	Dr Emma Sheppard	ACUTE
01/09/2014	**Mirtazapine Tablets 15 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	01/09/2014P	Dr Anne McGinley	ACUTE
26/06/2014	**Mirtazapine Tablets 15 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	26/06/2014P	Dr Emma Sheppard	ACUTE
18/03/2014	**Mirtazapine Tablets 15 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	29/04/2014P	Dr Emma Sheppard	ACUTE
18/03/2014	**Ibuprofen Gel 5 %** APPLY 3 TIMES A DAY 30 gram	18/03/2014P	Dr Emma Sheppard	ACUTE
18/03/2014	**Elasticated Tubular Bandage Bp 7.5 cm size D** TO BE USED AS DIRECTED 0.5 m	18/03/2014P	Dr Emma Sheppard	ACUTE
04/03/2014	**Mirtazapine Tablets 15 mg** ONE TO BE TAKEN AT NIGHT 20 tablet	04/03/2014P	Dr Emma Sheppard	ACUTE
04/03/2014	**Hydrocortisone Cream 1 %** APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE DAILY 30 GRAM	04/03/2014P	Dr Emma Sheppard	ACUTE
04/03/2014	**Co-Magaldrox 195/220 Sugar-free suspension** 10-20MLS TO BE TAKEN AFTER FOOD AND AT BEDTIME AS REQUIRED 500 ML	04/03/2014P	Dr Emma Sheppard	ACUTE
25/02/2014	**Omeprazole Capsules (Gastro-Resistant) 20 mg** ONE TO BE TAKEN EACH DAY 7 capsule	25/02/2014P	Dr Emma Sheppard	ACUTE
13/02/2014	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 30 capsule	13/02/2014P	Dr Marie Wilson	ACUTE
16/12/2013	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 30 capsule	20/01/2014P	Dr Anne McGinley	ACUTE
16/12/2013	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY CAN BE ISSUED AS HALF 80MG TABLET TRHEE TIMES A DAY 56 tablet	20/01/2014P	Dr Anne McGinley	ACUTE
24/10/2013	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY CAN BE ISSUED AS HALF 80MG TABLET TRHEE TIMES A DAY 56 tablet	22/11/2013P	Dr Anne McGinley	ACUTE
24/10/2013	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 30 capsule	22/11/2013P	Dr Anne McGinley	ACUTE
27/09/2013	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 30 capsule	27/09/2013P	Dr Emma Sheppard	ACUTE
27/09/2013	**Cilest Tablets** AS DIRECTED 126 tablet	27/09/2013P	Dr Emma Sheppard	ACUTE
20/08/2013	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY CAN BE ISSUED AS HALF 80MG TABLET TRHEE TIMES A DAY 56 tablet	27/09/2013P	Dr Emma Sheppard	ACUTE
08/08/2013	**Paracetamol Tablets 500 mg** TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS) 32 tablet	08/08/2013P	Dr Marie Wilson	ACUTE
01/08/2013	**Omeprazole Capsules (Gastro-Resistant) 20 mg** ONE TO BE TAKEN EACH DAY 21 capsule	01/08/2013P	Dr Emma Sheppard	ACUTE
30/07/2013	**Hydrocortisone Cream 1 %** APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE DAILY 30 GRAM	30/07/2013P	Dr Emma Sheppard	ACUTE
30/07/2013	**Peptac Liquid (aniseed)** 10-20ML TO BE TAKEN AFTER MEALS AND AT BEDTIME 100 ml	30/07/2013P	Dr Emma Sheppard	ACUTE
30/07/2013	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 30 capsule	22/08/2013P	Dr Anne McGinley	ACUTE
19/07/2013	**Cetirizine Hydrochloride Tablets 10 mg** ONE TO BE TAKEN EACH DAY 56 TABLET	19/07/2013P	Dr Anne McGinley	ACUTE
12/07/2013	**Phenoxymethylpenicillin Tablets 250 mg** TWO TABLETS FOUR TIMES DAILY 56 tablet	12/07/2013P	Dr Marie Wilson	ACUTE
28/06/2013	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 30 capsule	28/06/2013P	Dr Emma Sheppard	ACUTE

28/06/2013	**Cilest Tablets** AS DIRECTED 126 tablet	28/06/2013P	Dr Emma Sheppard	ACUTE
19/06/2013	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY PRN 84 TABLET	16/07/2013P	Dr Anne McGinley	ACUTE
14/06/2013	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 14 capsule	14/06/2013P	Dr Emma Sheppard	ACUTE
14/06/2013	**Beclometasone Aqueous nasal spray 50 micrograms/actuation** TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY 200 DOSE	14/06/2013P	Dr Emma Sheppard	ACUTE
04/06/2013	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 10 capsule	04/06/2013P	Dr Emma Sheppard	ACUTE
28/05/2013	**Cilest Tablets** ONE A DAY SEE GP BEFORE NEXT PLEASE 21 tablet	28/05/2013P	Dr Emma Sheppard	ACUTE
23/05/2013	**Paracetamol Tablets 500 mg** TWO TABLETS TO BE TAKEN FOUR TIMES DAILY 32 tablet	23/05/2013P	Dr Anne McGinley	ACUTE
23/05/2013	**Piroxicam Gel 0.5 %** APPLY 3 TIMES A DAY 60 gram	23/05/2013P	Dr Anne McGinley	ACUTE
23/05/2013	**Cetirizine Hydrochloride Tablets 10 mg** ONE TO BE TAKEN EACH DAY 56 TABLET	23/05/2013P	Dr Anne McGinley	ACUTE
18/04/2013	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY PRN 84 TABLET	28/05/2013P	Dr Emma Sheppard	ACUTE
04/03/2013	**Paracetamol Tablets 500 mg** TWO TABLETS TO BE TAKEN FOUR TIMES DAILY 32 tablet	04/03/2013P	Dr Anne McGinley	ACUTE
11/02/2013	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY PRN 84 TABLET	18/03/2013P	Dr Marie Wilson	ACUTE
14/01/2013	**Omeprazole Capsules (Gastro-Resistant) 20 mg** ONE TO BE TAKEN EACH DAY 14 capsule	14/01/2013P	Dr Anne McGinley	ACUTE
11/01/2013	**Amoxicillin Capsules 500 mg** ONE TO BE TAKEN THREE TIMES A DAY 15 CAPSULE	11/01/2013P	Dr Emma Sheppard	ACUTE
04/01/2013	**Cilest Tablets** TO BE TAKEN AS DIRECTED 63 tablet	04/01/2013P	Dr Marie Wilson	ACUTE
30/11/2012	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY PRN 84 TABLET	04/01/2013P	Dr Marie Wilson	ACUTE
30/11/2012	**Cilest Tablets** 1 Tab Daily 126 tablet	30/11/2012P	Dr Anne McGinley	ACUTE
13/09/2012	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY PRN 84 TABLET	24/10/2012P	Dr Anne McGinley	ACUTE
10/09/2012	**Amoxicillin Capsules 500 mg** ONE TO BE TAKEN THREE TIMES A DAY 15 CAPSULE	10/09/2012P	Dr Emma Sheppard	ACUTE
04/09/2012	**Omeprazole Capsules (Gastro-Resistant) 20 mg** ONE TO BE TAKEN EACH DAY 42 capsule	04/09/2012P	Dr Emma Sheppard	ACUTE
04/09/2012	**Fluoxetine Hydrochloride Capsules 20 mg** TWO TO BE TAKEN EACH DAY WEEKLY DISEPNSE PLEASE 56 CAPSULE	04/09/2012P	Dr Emma Sheppard	ACUTE
21/08/2012	**Cilest Tablets** TO BE TAKEN AS DIRECTED 63 tablet	21/08/2012P	Dr Emma Sheppard	ACUTE
21/08/2012	**Peptac Liquid (peppermint)** 10-20ML TO BE TAKEN AFTER MEALS AND AT BEDTIME 500 ML	21/08/2012P	Dr Emma Sheppard	ACUTE
21/08/2012	**Fluoxetine Hydrochloride Capsules 20 mg** ONE OR TWO TO BE TAKEN EACH DAY 56 CAPSULE	21/08/2012P	Dr Emma Sheppard	ACUTE
26/07/2012	**Cilest Tablets** 1 Tab Daily AS DIRECTED 21 tablet	26/07/2012P	Dr Anne McGinley	ACUTE
26/07/2012	**Fluoxetine Hydrochloride Capsules 20 mg** TWO TO BE TAKEN DAILY 56 CAPSULE	26/07/2012P	Dr Anne McGinley	ACUTE
26/07/2012	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY PRN 84 TABLET	26/07/2012P	Dr Anne McGinley	ACUTE
07/06/2012	**Cetirizine Hydrochloride Tablets 10 mg** ONE TO BE TAKEN EACH DAY 56 TABLET	07/06/2012P	Dr Marie Wilson	ACUTE
07/06/2012	**Crotamiton Cream 10 %** APPLY THINLY TWO TO THREE TIMES A DAY 100 GRAM	07/06/2012P	Dr Marie Wilson	ACUTE
06/06/2012	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY PRN 84 TABLET	06/06/2012P	Dr Anne McGinley	ACUTE
22/05/2012	**Betamethasone And Neomycin Drops 0.1 % + 0.5 %** 3 DROPS FOUR TIMES A DAY 5 ml	22/05/2012P	Dr Emma Sheppard	ACUTE
11/05/2012	**Flucloxacillin Capsules 500 mg** ONE TO BE TAKEN FOUR TIMES A DAY 20 capsule	11/05/2012P	Dr Emma Sheppard	ACUTE
11/05/2012	**Fluoxetine Hydrochloride Capsules 20 mg** TWO TO BE TAKEN DAILY 56 CAPSULE	07/06/2012P	Dr Marie Wilson	ACUTE
11/05/2012	**Cerumol Ear drops** PUT FIVE DROPS INTO THE AFFECTED EAR(S) TWICE A DAY FOR 2 WEEKS 11 ML	07/06/2012P	Dr Marie Wilson	ACUTE
17/04/2012	**Olive Oil Ear drops** PUT THREE TO FOUR DROPS INTO THE AFFECTED EAR(S) TWO TO THREE TIMES A DAY FOR THREE TO FIVE DAYS 10 ML	17/04/2012P	Dr Emma Sheppard	ACUTE
05/04/2012	**Gentamicin Ear/eye drops 0.3 %** ONE OR TWO DROPS UP TO SIX TIMES A DAY, OR MORE FREQUENTLY IF REQUIRED 10 ML	05/04/2012P	Dr Emma Sheppard	ACUTE
05/04/2012	**Amoxicillin Capsules 500 mg** ONE TO BE TAKEN THREE TIMES A DAY 15 CAPSULE	05/04/2012P	Dr Emma Sheppard	ACUTE

23/03/2012	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY 168 tablet	23/03/2012P	Dr Emma Sheppard	ACUTE
16/03/2012	**Fluoxetine Hydrochloride Capsules 20 mg** TWO TO BE TAKEN DAILY 56 CAPSULE	16/03/2012P	Dr Anne McGinley	ACUTE
27/02/2012	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY SEE DOC FOR NEXT 21 tablet	16/03/2012P	Dr Anne McGinley	ACUTE
14/02/2012	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 28 capsule	14/02/2012P	Dr Marie Wilson	ACUTE
05/01/2012	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY SEE DOC FOR NEXT 42 tablet	14/02/2012P	Dr Marie Wilson	ACUTE
05/01/2012	**Fluoxetine Hydrochloride Capsules 20 mg** TWO TO BE TAKEN EACH DAY WEEKLY DISPENSE 30 capsule	05/01/2012P	Dr Emma Sheppard	ACUTE
16/11/2011	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	16/11/2011P	Dr Gayle Henderson	ACUTE
16/11/2011	**Olive Oil Ear drops** PUT THREE TO FOUR DROPS INTO THE AFFECTED EAR(S) TWO TO THREE TIMES A DAY FOR THREE TO FIVE DAYS 10 ML	16/11/2011P	Dr Gayle Henderson	ACUTE
01/11/2011	**Fluoxetine Hydrochloride Capsules 20 mg** TWO TO BE TAKEN DAILY 56 CAPSULE	01/11/2011P	Dr Emma Sheppard	ACUTE
28/09/2011	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	28/09/2011P	Dr Gayle Henderson	ACUTE
27/09/2011	**Fluoxetine Hydrochloride Capsules 20 mg** TWO TO BE TAKEN DAILY 56 CAPSULE	27/09/2011P	Dr Dalila Malek	ACUTE
27/09/2011	**Zopiclone Tablets 7.5 mg** 1 Tab At night 14 tablet	27/09/2011P	Dr Dalila Malek	ACUTE
14/09/2011	**Fluoxetine Hydrochloride Capsules 20 mg** TAKE 20 MG THEN 40 MG ALTERNATE DAYS 40 capsule	14/09/2011P	Dr Anne McGinley	ACUTE
26/08/2011	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY WEEKLY DISPENSE 28 capsule	26/08/2011P	Dr Emma Sheppard	ACUTE
11/08/2011	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	11/08/2011P	Dr Dalila Malek	ACUTE
29/07/2011	**Miconazole Nitrate Cream 2 %** APPLY TWICE DAILY CONTINUING FOR 10 DAYS AFTER LESIONS HAVE HEALED 30 GRAM	29/07/2011P	Dr Emma Sheppard	ACUTE
29/07/2011	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY DISPENSE FORTNIGHTLY 28 capsule	29/07/2011P	Dr Emma Sheppard	ACUTE
19/07/2011	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 10 capsule	19/07/2011P	Dr Emma Sheppard	ACUTE
12/07/2011	**Citalopram Hydrobromide Tablets 10 mg** 1 Tab Daily WEKLY DISPENSE 28 tablet	12/07/2011P	Dr Locum Locum	ACUTE
12/07/2011	**Beclometasone Aqueous nasal spray 50 micrograms/actuation** TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY 180 dose	12/07/2011P	Dr Locum Locum	ACUTE
12/07/2011	**Cetirizine Hydrochloride Tablets 10 mg** 1 Tab Daily 30 TABS	11/08/2011P	Dr Locum Locum	ACUTE
16/06/2011	**Diclofenac Sodium E/c tablets 50 mg** ONE TO BE TAKEN THREE TIMES A DAY WITH OR AFTER FOOD 28 tablet	16/06/2011P	Dr Marie Wilson	ACUTE
16/06/2011	**Co-Codamol 30/500 Tablets** TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS) 60 tablet	16/06/2011P	Dr Marie Wilson	ACUTE
16/06/2011	**Beclometasone Aqueous nasal spray 50 micrograms/actuation** TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY 400 DOSE	16/06/2011P	Dr Marie Wilson	ACUTE
15/06/2011	**Co-Codamol 8/500 Tablets** ONE OR TWO TO BE TAKEN FOUR TIMES A DAY 32 tablet	15/06/2011P	Dr Anne McGinley	ACUTE
07/06/2011	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	12/07/2011P	Dr Locum Locum	ACUTE
13/04/2011	**Cilest Tablets** 1 Tab Daily 126 tablet	13/04/2011P	Dr Locum Locum	ACUTE
13/04/2011	**Cilest Tablets** 1 Tab Daily AS DIRECTED 63 tablet	16/03/2012P	Dr Anne McGinley	ACUTE
31/03/2011	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	05/05/2011P	Dr Marie Wilson	ACUTE
16/02/2011	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	16/02/2011P	Dr Marie Wilson	ACUTE
31/01/2011	**Temazepam Tablets 10 mg** ONE TO BE TAKEN AT NIGHT 7 TABLET	31/01/2011P	Dr Joy Rafferty	ACUTE
31/12/2010	**Cilest Tablets** 1 Tab Daily AS DIRECTED 63 tablet	31/12/2010P	Dr Marie Wilson	ACUTE
01/12/2010	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	29/12/2010P	Dr Anne McGinley	ACUTE
19/10/2010	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	19/10/2010P	Dr Emma Sheppard	ACUTE

17/09/2010	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	17/09/2010P	Dr Emma Sheppard	ACUTE
13/08/2010	**Aciclovir Cream 5 %** 1 CREAM	13/08/2010P	Dr Marie B Wilson	ACUTE
13/08/2010	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	13/08/2010P	Dr Marie B Wilson	ACUTE
13/08/2010	**Cilest Tablets** 126 TABS	13/08/2010P	Dr Marie B Wilson	ACUTE
08/07/2010	**Cetirizine Hydrochloride Tablets 10 mg** 1 Tab Daily 30 TABS	08/07/2010P	Dr Marie B Wilson	ACUTE
08/07/2010	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	08/07/2010P	Dr Marie B Wilson	ACUTE
21/04/2010	**Flucloxacillin Capsules 250 mg** 1 Cap 4 times daily 20 CAPS	21/04/2010P	Ms Registrar.	ACUTE
26/03/2010	**Fusidic Acid M/R Eye Drops 1 %** 1 Drop Twice daily 5 DROPS	26/03/2010P	Dr Emma Sheppard	ACUTE
04/02/2010	**Cilest Tablets** 126 TABS	04/02/2010P	Dr Marie B Wilson	ACUTE
04/02/2010	**Ibuprofen Tablets 400 mg** 1 Tab 3 times daily 48 TABS	04/02/2010P	Dr Marie B Wilson	ACUTE
23/10/2020	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab Twice daily 56 tablet	01/04/2016P	Dr Emma Sheppard	REPEAT
30/09/2020	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	16/03/2021P	Dr Emma Sheppard	REPEAT
30/09/2020	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED FOR ANXIETY 28 tablet	01/10/2020P	Dr Anne McGinley	REPEAT
14/11/2019	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY AS REQUIRED FOR ANXIETY 28 TABLET	29/01/2020P	Dr Anne McGinley	REPEAT
14/11/2019	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	29/01/2020P	Dr Anne McGinley	REPEAT
05/09/2014	**Folic Acid Tablets 400 micrograms** ONE TO BE TAKEN EACH DAY 56 TABLET	14/07/2016P	Dr Marie Wilson	REPEAT
13/02/2014	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY CAN BE ISSUED AS HALF 80MG TABLET TRHEE TIMES A DAY 56 tablet	15/07/2015P	Dr Anne McGinley	REPEAT

File Status	Filed.	**Tasks**	No Tasks.
Assigned User	Dr Anne McGinley	**Filed By User**	Ms Kay Boyle
Patient Matched	Yes.	**SCCRS Message Type**	Exclusion

electronic Notification of Cervical Cytology Results Service
Exclusion Information

CHI Number	2505876061
Name	MCLEISH, WENDY
Date Of Birth	25/ 05/ 1987
GMC Code of Registered GP	3341180
Practice Code	G46471

Exclusion Reason	**Defaulter**
Exclusion Date	**14/ 08/ 2011**
Exclusion End Date	**14/ 11/ 2013**
Extended	**No**
Closed	**No**
Next Recall Date	**28/ 10/ 2007**

File Status	Filed.	**Tasks**	No Tasks.
Assigned User	Dr Anne McGinley	**Filed By User**	Ms Kay Boyle
Patient Matched	Yes.	**SCCRS Message Type**	Result

electronic Notification of Cervical Cytology Results Service

New Result

CHI Number	2505876061
Name	MCLEISH, WENDY
Date Of Birth	25/ 05/ 1987
GMC Code of Registered GP	3341180
Practice Code	G46471

Smear Taker	marian fergusson
Reporting Location	NHS GGC

SCCRS ID	**1213697026**
Laboratory ID	**12G4016066**
Smear Taken Date	**17/ 04/ 2012 00:00:00**
Result	**Negative (4K22.)**
Report Comments	
Recommended Management	**Routine Recall - 3 years**
Recall Date	**17/ 04/ 2015**

Lab Report ID : N,12.8519054.E
Filed By User : Mrs Donna Rogers
Assigned to :

Coding Status : Coded
File Status : Filed
Task Status : No Tasks

Patient Details : (4917) Wendy Mcleish DOB : 25/05/1987 CHI : 2505876061 SEX : F

**** ABNORMAL ****

SPECIMEN : Specimen

	Abn	Value	Units	Range	Status
R **Liver function test**	**Y**				
Total Bilirubin		15	umol/L	(<<20 U)	NK
Alanine Transaminase		28	U/L	(<<50 U)	NK
Gamma-GT	+	98	U/L	(<<40 U)	NK
Alkaline Phosphatase		64	U/L	(40-150 U)	NK
Albumin		34	g/L	(32-45 U)	NK

Sample Collected Date : 04/09/2012 10:19:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 04/09/2012 17:59:00
Received Date : 05/09/2012 07:00:12
Requestor :
Requestor GMC Code :

Lab Report ID : N,13.8822540.N **Coding Status** : Part Read Coded
Filed By User : Mrs Donna Rogers **File Status** : Filed
Assigned to : **Task Status** : No Tasks

Patient Details : (4917) Wendy Mcleish DOB : 25/05/1987 CHI : 2505876061 SEX : F

SPECIMEN : Specimen

	Abn	Value	Units	Range	Status
R Amylase					
Amylase		61	U/L	(<<100 U)	NK
R **Urea and electrolytes**					
Sodium		137	mmol/L	(135-145 U)	NK
Potassium		4.4	mmol/L	(3.5-5.0 U)	NK
Chloride		108	mmol/L	(98-108 U)	NK
Urea		6.4	mmol/L	(2.5-7.5 U)	NK
Creatinine		57	umol/L	(40-130 U)	NK
Estimated GFR		> 60	ml/min	(>>60 U)	NK
R **Liver function test**					
Total Bilirubin		17	umol/L	(<<20 U)	NK
Aspartate Transamina		20	U/L	(<<40 U)	NK
Alanine Transaminase		34	U/L	(<<50 U)	NK
Alkaline Phosphatase		84	U/L	(40-150 U)	NK
Albumin		34	g/L	(32-45 U)	NK

Sample Collected Date : **14/01/2013 15:28:00**
Collection Start Date :
Collection End Date :
Received by Lab Date : **14/01/2013 18:03:00**
Received Date : **14/01/2013 19:00:29**
Requestor :
Requestor GMC Code :

Lab Report ID : R,13.5028408.L
Filed By User : Mrs Donna Rogers
Assigned to :

Coding Status : Coded
File Status : Filed
Task Status : No Tasks

Patient Details : (4917) Wendy Mcleish DOB : 25/05/1987 CHI : 2505876061 SEX : F

Report Text :

-NONE GIVEN

SPECIMEN : Citrate/EDTA

	Abn	Value	Units	Range	Status
R **Full blood count - FBC**					
White Cell Count		7.2	10^9/L	(4.0-11.0 U)	NK
Red Cell Count		4.26	10^12/L	(3.80-5.80 U)	NK
HAEMOGLOBIN		134	g/l	(115-165 U)	NK
Haematocrit		0.392	L/L	(0.370-0.470 U)	NK
MCV		92.0	fL	(78.0-99.0 U)	NK
MCH		31.5	pg	(27.0-32.0 U)	NK
RDW		11.9	%	(11.5-14.5 U)	NK
Platelets		386	10^9/L	(150-400 U)	NK
Neutrophils		3.2	10^9/L	(2.0-7.5 U)	NK
Lymphocytes		3.2	10^9/L	(1.5-4.0 U)	NK
Monocytes		0.6	10^9/L	(0.2-0.8 U)	NK
Eosinophils		0.08	10^9/L	(0.04-0.40 U)	NK
Basophils		0.04	10^9/L	(0.01-0.10 U)	NK

Sample Collected Date : 14/01/2013 15:28:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 14/01/2013 18:23:00
Received Date : 15/01/2013 07:00:13
Requestor :
Requestor GMC Code :

Lab Report ID : R,13.5340806.D
Filed By User : Ms Linda Hutchison
Assigned to :

Coding Status : Coded
File Status : Filed
Task Status : No Tasks

Patient Details : (4917) Wendy Mcleish DOB : 25/05/1987 CHI : 2505876061 SEX : F

**** ABNORMAL ****

Report Text :

-?MALAERA

SPECIMEN : Citrate/EDTA

	Abn	Value	Units	Range	Status
R **Full blood count - FBC**	**Y**				
White Cell Count		9.2	10^9/L	(4.0-11.0 U)	NK
Red Cell Count		4.36	10^12/L	(3.80-5.80 U)	NK
Haemoglobin		141	g/l	(115-165 U)	NK
Haematocrit		0.402	L/L	(0.370-0.470 U)	NK
MCV		92.2	fL	(78.0-99.0 U)	NK
MCH	+	32.3	pg	(27.0-32.0 U)	NK
RDW		12.6	%	(11.5-14.5 U)	NK
Platelets		300	10^9/L	(150-400 U)	NK
Neutrophils		5.0	10^9/L	(2.0-7.5 U)	NK
Lymphocytes		3.2	10^9/L	(1.5-4.0 U)	NK
Monocytes		0.6	10^9/L	(0.2-0.8 U)	NK
Eosinophils		0.30	10^9/L	(0.04-0.40 U)	NK
Basophils		0.08	10^9/L	(0.01-0.10 U)	NK
R **Serum ferritin**					
Ferritin Assay		194.0	ng/ml	(10.0-275.0 U)	NK

Sample Collected Date : 30/07/2013 16:23:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 30/07/2013 18:00:00
Received Date : 31/07/2013 07:00:08
Requestor :
Requestor GMC Code :

Lab Report ID : N,13.8377787.C **Coding Status** : Coded
Filed By User : Ms Linda Hutchison **File Status** : Filed
Assigned to : **Task Status** : No Tasks

Patient Details : (4917) Wendy Mcleish DOB : 25/05/1987 CHI : 2505876061 SEX : F

SPECIMEN : Specimen

	Abn	Value	Units	Range	Status
R Liver function test					
Total Bilirubin		17	umol/L	(<<20 U)	NK
Aspartate Transamina		27	U/L	(<<40 U)	NK
Alanine Transaminase		37	U/L	(<<50 U)	NK
Alkaline Phosphatase		90	U/L	(40-150 U)	NK
Albumin		37	g/L	(32-45 U)	NK

Sample Collected Date : 30/07/2013 16:23:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 30/07/2013 17:50:00
Received Date : 31/07/2013 07:00:11
Requestor :
Requestor GMC Code :

Lab Report ID : N,13.8431486.Q
Filed By User : Ms Linda Hutchison
Assigned to :

Coding Status : Coded
File Status : Filed
Task Status : No Tasks

Patient Details : (4917) Wendy Mcleish DOB : 25/05/1987 CHI : 2505876061 SEX : F

**** ABNORMAL ****

SPECIMEN : Specimen

	Abn	Value	Units	Range	Status
R Plasma C reactive protein	Y				
C-reactive Protein	+	14	mg/L	(<<10.0 U)	NK

Sample Collected Date : 20/08/2013 16:40:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 21/08/2013 13:46:00
Received Date : 21/08/2013 19:00:56
Requestor :
Requestor GMC Code :

Lab Report ID : N,14.8190714.N **Coding Status** : Coded
Filed By User : Ms Linda Hutchison **File Status** : Filed
Assigned to : **Task Status** : No Tasks

Patient Details : (4917) Wendy Mcleish DOB : 25/05/1987 CHI : 2505876061 SEX : F

**** ABNORMAL ****

SPECIMEN : Specimen

	Abn	Value	Units	Range	Status
R **Liver function test**	**Y**				
Total Bilirubin		12	umol/L	(<<20 U)	NK
Aspartate Transamina	+	47	U/L	(<<40 U)	NK
Alanine Transaminase	+	134	U/L	(<<50 U)	NK
Alkaline Phosphatase		114	U/L	(30-130 U)	NK
Albumin		35	g/L	(35-50 U)	NK

Sample Collected Date : **04/03/2014 15:53:00**
Collection Start Date :
Collection End Date :
Received by Lab Date : **04/03/2014 17:46:00**
Received Date : **05/03/2014 07:00:08**
Requestor :
Requestor GMC Code :

Lab Report ID : N,14.8241028.R
Filed By User : Mrs Donna Rogers
Assigned to :

Coding Status : Coded
File Status : Filed
Task Status : No Tasks

Patient Details : (4917) Wendy Mcleish DOB : 25/05/1987 CHI : 2505876061 SEX : F

**** ABNORMAL ****

SPECIMEN : Specimen

	Abn	Value	Units	Range	Status
R **Liver function test**	**Y**				
Total Bilirubin		17	umol/L	(<<20 U)	NK
Aspartate Transamina		35	U/L	(<<40 U)	NK
Alanine Transaminase	+	85	U/L	(<<50 U)	NK
Alkaline Phosphatase	+	134	U/L	(30-130 U)	NK
Albumin	-	34	g/L	(35-50 U)	NK
R **Thyroid function test**					
-Euthyroid TFT results					
TSH		1.9	mu/L	(0.35-5.00 U)	NK
Free T4		13	pmol/L	(9-21 U)	NK

Sample Collected Date : **18/03/2014 16:30:00**
Collection Start Date :
Collection End Date :
Received by Lab Date : **18/03/2014 17:35:00**
Received Date : **19/03/2014 07:00:27**
Requestor :
Requestor GMC Code :

File Status	Filed.	**Tasks**	No Tasks.
Assigned User	Dr Anne McGinley	**Filed By User**	Ms Liz Bannachan
Patient Matched	Yes.	**SCCRS Message Type**	Result

electronic Notification of Cervical Cytology Results Service

New Result

CHI Number	2505876061
Name	MCLEISH, WENDY
Date Of Birth	25/ 05/ 1987
GMC Code of Registered GP	3341180
Practice Code	G46471

Smear Taker	Emma Sheppard
Reporting Location	NHSGGC

SCCRS ID	**1341937236**
Laboratory ID	**15G4041301**
Smear Taken Date	**15/ 05/ 2015 00:00:00**
Result	**Negative (4K22.)**
Report Comments	
Recommended Management	**Routine Recall - 3 years**
Recall Date	**15/ 05/ 2018**

Lab Report ID : B,15.6322683.S **Coding Status** : Part Read Coded
Filed By User : Mrs Donna Rogers **File Status** : Filed
Assigned to : **Task Status** : No Tasks

Patient Details : (4917) Wendy Mcleish DOB : 25/05/1987 CHI : 2505876061 SEX : F

Report Text :

-RUQ pain ?liver/gallbladd...

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R Full Blood Count					
White Blood Count		8.6	x10^9/l	(4.0-11.0 U)	NK
Red Cell Count		4.35	x10^12/l	(3.80-5.80 U)	NK
Haemoglobin		133	g/l	(115-165 U)	NK
Haematocrit		0.385	l/l	(0.370-0.470 U)	NK
Mean Cell Volume		88.5	fl	(80.0-100.0 U)	NK
MCH		30.6	pg	(27.0-32.0 U)	NK
Platelet Count		322	x10^9/l	(150-400 U)	NK
Neutrophils		4.5	x10^9/l	(2.0-7.5 U)	NK
Lymphocytes		3.3	x10^9/l	(1.5-4.0 U)	NK
Monocytes		0.6	x10^9/l	(0.2-0.8 U)	NK
Eosinophils		0.2	x10^9/l	(0.0-0.4 U)	NK
Basophils		0	x10^9/l	(0.0-0.1 U)	NK
Nucleated RBC		0	x10^9/l		NK

Sample Collected Date : 30/09/2015 16:23:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 30/09/2015 18:13:00
Received Date : 30/09/2015 19:01:00
Requestor :
Requestor GMC Code :

Lab Report ID : B,15.5125633.W
Filed By User : Mrs Donna Rogers
Assigned to :

Coding Status : Part Read Coded
File Status : Filed
Task Status : No Tasks

Patient Details : (4917) Wendy Mcleish DOB : 25/05/1987 CHI : 2505876061 SEX : F

**** ABNORMAL ****

Report Text :

-RUQ pain ?liver/gallbladd...

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R Bone Profile	**Y**				
-Alkaline Phosphatase results IFCC aligned from 03/08/15.					
Calcium		2.31	mmol/L	(2.20-2.60 U)	NK
Calcium (adjusted)		2.36	mmol/L	(2.20-2.60 U)	NK
Phosphate	-	0.78	mmol/L	(0.80-1.50 U)	NK
Albumin		36	g/L	(35-50 U)	NK
Alkaline Phosphatase		99	U/L	(30-130 U)	NK
R Urea & Electrolytes					
Sodium		136	mmol/L	(133-146 U)	NK
Potassium		4.4	mmol/L	(3.5-5.3 U)	NK
Chloride		106	mmol/L	(95-108 U)	NK
Urea		5.6	mmol/L	(2.5-7.8 U)	NK
Creatinine		61	umol/L	(40-130 U)	NK
Estimated GFR		> 60	ml/min	(>>60 U)	NK
R Liver Function Tests					
-Alkaline Phosphatase results IFCC aligned from 03/08/15.					
Total Bilirubin		13	umol/L	(<<20 U)	NK
ALT		25	U/L	(<<50 U)	NK
AST		17	U/L	(<<40 U)	NK
Alkaline Phosphatase		99	U/L	(30-130 U)	NK
Albumin		36	g/L	(35-50 U)	NK

Sample Collected Date : 30/09/2015 16:23:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 30/09/2015 18:58:00
Received Date : 01/10/2015 07:00:41
Requestor :
Requestor GMC Code :

Lab Report ID : B,16.6441019.B
Filed By User : Mrs Nicole O'Neill
Assigned to :

Coding Status : Part Read Coded
File Status : Filed
Task Status : No Tasks

Patient Details : (4917) Wendy Mcleish DOB : 25/05/1987 CHI : 2505876061 SEX : F

**** ABNORMAL ****

Report Text :

-L pleuritic type pain, po...

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R Full Blood Count	**Y**				
White Blood Count		10.5	x10^9/l	(4.0-11.0 U)	NK
Red Cell Count		4.04	x10^12/l	(3.80-5.80 U)	NK
Haemoglobin		124	g/l	(115-165 U)	NK
Haematocrit	-	0.355	l/l	(0.370-0.470 U)	NK
Mean Cell Volume		87.9	fl	(80.0-100.0 U)	NK
MCH		30.7	pg	(27.0-32.0 U)	NK
Platelet Count		270	x10^9/l	(150-400 U)	NK
Neutrophils	+	7.7	x10^9/l	(2.0-7.5 U)	NK
Lymphocytes		2.0	x10^9/l	(1.5-4.0 U)	NK
Monocytes		0.7	x10^9/l	(0.2-0.8 U)	NK
Eosinophils		0.06	x10^9/l	(0.00-0.40 U)	NK
Basophils		0	x10^9/l	(0.0-0.1 U)	NK
Nucleated RBC		0	x10^9/l		NK

Sample Collected Date : 05/12/2016 11:56:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 05/12/2016 14:13:00
Received Date : 05/12/2016 15:00:26
Requestor :
Requestor GMC Code :

Lab Report ID : B,16.6440939.G **Coding Status** : Part Read Coded
Filed By User : Mrs Donna Rogers **File Status** : Filed
Assigned to : **Task Status** : No Tasks

Patient Details : (4917) Wendy Mcleish DOB : 25/05/1987 CHI : 2505876061 SEX : F

**** ABNORMAL ****

Report Text :

-L pleuritic type pain, po...

SPECIMEN : Blood

		Abn	Value	Units	Range	Status
R	**Coagulation Screen**					
	Prothrombin Time		12	s	(9-13 U)	NK
R	PT Ratio		1.1			NK
	APTT		28	s	(27-38 U)	NK
	APTT Ratio		0.9		(0.8-1.2 U)	NK
R	Thrombin time		11	s	(11-15 U)	NK
R	TCT ratio		0.9			NK
R	**D-Dimer (IL DDHS)**	**Y**				
	-The above reference range applies to patients with suspected VTE.					
	-In other populations the reference range is 0-243 ng/mL.					
	D-Dimer	+	459	ng/ml	(0-230 U)	NK

Sample Collected Date : **05/12/2016 11:56:00**
Collection Start Date :
Collection End Date :
Received by Lab Date : **05/12/2016 13:58:00**
Received Date : **05/12/2016 19:00:06**
Requestor :
Requestor GMC Code :

Lab Report ID : B,16.5033556.K
Filed By User : Mrs Donna Rogers
Assigned to :

Coding Status : Part Read Coded
File Status : Filed
Task Status : No Tasks

Patient Details : (4917) Wendy Mcleish DOB : 25/05/1987 CHI : 2505876061 SEX : F

Report Text :

-L pleuritic type pain, po...

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R C-reactive Protein					
C Reactive Protein		8	mg/L	(0-10 U)	NK

Sample Collected Date : 05/12/2016 11:56:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 05/12/2016 14:03:00
Received Date : 05/12/2016 19:00:14
Requestor :
Requestor GMC Code :

File Status	Filed.	**Tasks**	No Tasks.
Assigned User	Dr Anne McGinley	**Filed By User**	Ms Suzanne Reid
Patient Matched	Yes.	**SCCRS Message Type**	Result

electronic Notification of Cervical Cytology Results Service

New Result

CHI Number	2505876061
Name	MCLEISH, WENDY
Date Of Birth	25/ 05/ 1987
GMC Code of Registered GP	3341180
Practice Code	G46471

Smear Taker	Alison King
Reporting Location	NHSGGC

SCCRS ID	**1473861826**
Laboratory ID	**18G4055857**
Smear Taken Date	**17/ 07/ 2018 00:00:00**
Result	**Negative (4K22.)**
Report Comments	
Recommended Management	**Routine Recall - 3 years**
Recall Date	**17/ 07/ 2021**

Lab Report ID : V,19.0340627.A **Coding Status** : Part Read Coded
Filed By User : Ms Ashley Reilly **File Status** : Filed
Assigned to : **Task Status** : No Tasks

Patient Details : (4917) Wendy Mcleish DOB : 25/05/1987 CHI : 2505876061 SEX : F

Report Text :

-urinary symptoms, risk o....

SPECIMEN : Vulvovaginal swab

	Abn	Value	Units	Range	Status
R C.trachomatis/GC PCR					
-This is a VULVOLVAGINAL SWAB sample.					
C. trachomatis :					NK
-Not detected by PCR					
N. gonorrhoeae :					NK
-Not detected by PCR					

Sample Collected Date : 20/06/2019 15:34:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 27/06/2019 11:51:00
Received Date : 01/07/2019 11:00:02
Requestor :
Requestor GMC Code :

Hospital use only	Clinic	Day Date	Time	Hospital No.

Transport required?

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC Single Stylesheet - [standard|dental|diagnostic imaging]

Mental Health Referral Protocol - Glasgow (Glasgow, v13.0)

REFERRAL TO

Auchinlea Resource Centre
G Mental Health

— **Consultant / receiving practitioner**and/or**specialty clinic**

Community Mental Health Team (Greater Glasgow & Clyde)
SCI Gateway Virtual Location code

— **Hospital**and **hospital address**

Hospital location code.
G002G

Email address
-

Urgency of referral ROUTINE
Date of referral 12-Jul-2011 **Date sent** 12-Jul-2011

PATIENT DETAILS

Surname	Mcleish
Forename(s)	Wendy
Title	Miss
Sex	Female
Date of birth	25-May-1987
CHI no.	2505876061
Area of Residence	-

Patient's address

0/1 51 Coxton Place
GARTHAMLOCK
Glasgow
G33 5EJ

Contact number(s)

Voice:07769733984

1010022572691 Unique Care Pathway Number: 1010022572691

REGISTERED GP DETAILS

Name	Dr Anne McGinley		
GMC code	3341180	GP code	07307
Practice name	Easterhouse Health Centre (13448)		
Practice code	46471		

Practice address

9 Auchinlea Road
Easterhouse
Glasgow

Contact number(s)

Voice:0141 531 8150
Facsimile:0141 531 8158

REFERRING GP DETAILS

Name	Dr. Anne McGinley		
GMC code	3341180	GP code	07307
Practice name	Dr Wilson, Dr Mcginley & Dr Sheppar (46471)		
Practice code	46471		

Practice address

Easterhouse Health Centre
9 Auchinlea Road
Glasgow

Contact number(s)

Voice:0141 531 8150

** **Please address any correspondence to Dr Curran Locum** **

CLINICAL INFORMATION

History of presenting complaint
Presenting complaint

Description: Low Mood Mood Swings

Comment: Dear Doctor,
I wonder if you would see this 24 yr old lady. She has been complaining of low mood and mood swings over the past 6 months at least which has ben worse since her father died. She has no close family as her mother died when she was younger and her brother is in prison currently. She finds it difficult to leave the house most of the time and has been getting occasionally anxious or aggressive with people round about her. She drinks occasionally and has been taking street valium to help her sleep at times. Her mood did appear low today and I started her on some Citalopram. She also mentioned that she had been abused as a child and had been recently wondering about tracking down the abusers to discuss the situation with them. She seems to have a lot of under lying issues and I wonder if she would benefit from seeing somebody for further exploration of these.

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history
Pre-existing conditions (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Death of father	-	31-Jan-2011	31-Jan-2011
Benign essential tremor	-	08-Jul-2010	08-Jul-2010
Death of mother	age 29 MI	01-Jan-1991	01-Jan-1991

Current medication (Active Repeat medication issued within the last 12 months)

No current medications recorded

Recent medication (Any medication issued within last 90 days not shown above)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Citalopram Hydrobromide Tablets 10 mg	28	28 tablet	1 Tab Daily WEKLY DISPENSE	-	12-Jul-2011	12-Jul-2011
Beclometasone Aqueous nasal spray 50 micrograms/actuation	180	180 dose	TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY	-	12-Jul-2011	12-Jul-2011
Cetirizine Hydrochloride Tablets 10 mg	30	30 TABS	1 Tab Daily	-	12-Jul-2011	12-Jul-2011
Diclofenac Sodium E/c tablets 50 mg	28	28 tablet	ONE TO BE TAKEN THREE TIMES A DAY WITH OR AFTER FOOD	-	16-Jun-2011	16-Jun-2011
Co-Codamol 30/500 Tablets	60	60 tablet	TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)	-	16-Jun-2011	16-Jun-2011
Beclometasone Aqueous nasal spray 50 micrograms/actuation	400	400 DOSE	TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY	-	16-Jun-2011	16-Jun-2011
Co-Codamol 8/500 Tablets	32	32 tablet	ONE OR TWO TO BE TAKEN FOUR TIMES A DAY	-	15-Jun-2011	15-Jun-2011
Propranolol Hydrochloride Tablets 40 mg	100	100 TABS	1 Tab 3 times daily	-	07-Jun-2011	12-Jul-2011
Cilest Tablets	63	63 tablet	1 Tab Daily AS DIRECTED	-	13-Apr-2011	13-Apr-2011
Cilest Tablets	126	126 tablet	1 Tab Daily	-	13-Apr-2011	13-Apr-2011
Propranolol Hydrochloride Tablets 40 mg	100	100 TABS	1 Tab 3 times daily	-	31-Mar-2011	05-May-2011
Propranolol Hydrochloride Tablets 40 mg	100	100 TABS	1 Tab 3 times daily	-	16-Feb-2011	16-Feb-2011
Temazepam Tablets 10 mg	7	7 TABLET	ONE TO BE TAKEN AT NIGHT	-	31-Jan-2011	31-Jan-2011

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Never smoked tobacco:	Smoker$$ Status.clm - No Action Required	21-Jan-2010
Light drinker - 1-2u/day:	Alcohol Intake$$.clm - Repeat after an Interval	21-Jan-2010

Clinical warnings

Additional relevant information
Administrative information

OK to send correspondence to home address?:Yes
Patient will accept any site:Yes
Patient will accept cancellation or short notice appointment (within 1-6 days):Yes
Patient has disability or requires wheelchair access:No
Referred By:Referring GP
Electronic Attachment Present:No
Correspondence recipient:Dr Curran Locum

Signature of referring doctor (or other professional)

Date

Hospital use only	Clinic	Day Date	Time	Hospital No.

Transport required?

REFERRAL LETTER

MEDICAL IN CONFIDENCE

REFERRAL TO

Neurology
GGC General Referral

— **Consultant / receiving practitioner** and/or **specialty clinic**

Glasgow Royal Infirmary
84 Castle Street
Glasgow
G4 0SF

— **Hospital** and **hospital address**

Hospital location code.
G107H

Email address
-

Urgency of referral ROUTINE
Date of referral 18-Jan-2012 **Date sent** 18-Jan-2012

PATIENT DETAILS

Surname	Mcleish
Forename(s)	Wendy
Title	Miss
Sex	Female
Date of birth	25-May-1987
CHI no.	2505876061
Area of Residence	-

Patient's address

0/1 51 Coxton Place
GARTHAMLOCK
Glasgow
G33 5EJ

Contact number(s)

Voice:07769733984

101003059742N Unique Care Pathway Number: 101003059742N

REGISTERED GP DETAILS

Name	Dr Anne McGinley		
GMC code	3341180	GP code	07307
Practice name	Easterhouse Health Centre (13448)		
Practice code	46471		

Practice address

9 Auchinlea Road
Easterhouse
Glasgow
G34 9HQ

Contact number(s)

Voice:0141 531 8150
Facsimile:0141 531 8158

REFERRING GP DETAILS

Name	Dr. Dalila Malek		
GMC code	6128612	GP code	54241
Practice name	Dr Wilson, Dr Mcginley & Dr Sheppar (46471)		
Practice code	46471		

Practice address

Easterhouse Health Centre
9 Auchinlea Road
Glasgow
G34 9HQ

Contact number(s)

Voice:0141 531 8150

CLINICAL INFORMATION

History of presenting complaint
Presenting complaint

Description: Tremor

Comment: Dear Dr Miller,

Many thanks for seeing this young lady at your clinic. I believe she has been referred to you as an inpatient regarding an odd tremor, while in ward 7 at GRI when she had a prolonged admission for pneumonia in November 2011. She has unfortunately self-discharged prior to review.

Wendy has a known history of benign essential tremor since 2010, has been on Propranolol and she was first referred to neurology that year for further management. She did not keep her appointment.

Her tremor has been gradually worsening with little benefit from Propranolol and she is very keen for your specialist opinion. She confirmed she would attend on this instance and I have confirmed her current address as above. We would greatly value your input.

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history
Pre-existing conditions (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Adult respiratory distress syndrome	-	30-Nov-2011	30-Nov-2011
Overdose of drug	fluoxetine	22-Sep-2011	22-Sep-2011
Benign essential tremor	-	08-Jul-2010	08-Jul-2010

Current medication (Active Repeat medication issued within the last 12 months)

No current medications recorded

Recent medication (Any medication issued within last 90 days not shown above)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Fluoxetine Hydrochloride Capsules 20 mg	30	30 capsule	TWO TO BE TAKEN EACH DAY WEEKLY DISPENSE	-	05-Jan-2012	05-Jan-2012
Propranolol Hydrochloride Tablets 40 mg	42	42 tablet	ONE TO BE TAKEN THREE TIMES A DAY SEE DOC FOR NEXT	-	05-Jan-2012	05-Jan-2012
Propranolol Hydrochloride Tablets 40 mg	100	100 TABS	1 Tab 3 times daily	-	16-Nov-2011	16-Nov-2011
Fluoxetine Hydrochloride Capsules 20 mg	56	56 CAPSULE	TWO TO BE TAKEN DAILY	-	01-Nov-2011	01-Nov-2011
Propranolol Hydrochloride Tablets 40 mg	100	100 TABS	1 Tab 3 times daily	-	28-Sep-2011	28-Sep-2011
Fluoxetine Hydrochloride Capsules 20 mg	56	56 CAPSULE	TWO TO BE TAKEN DAILY	-	27-Sep-2011	27-Sep-2011
Zopiclone Tablets 7.5 mg	14	14 tablet	1 Tab At night	-	27-Sep-2011	27-Sep-2011
Fluoxetine Hydrochloride Capsules 20 mg	40	40 capsule	TAKE 20 MG THEN 40 MG ALTERNATE DAYS	-	14-Sep-2011	14-Sep-2011
Fluoxetine Hydrochloride Capsules 20 mg	28	28 capsule	ONE TO BE TAKEN EACH DAY WEEKLY DISPENSE	-	26-Aug-2011	26-Aug-2011
Propranolol Hydrochloride Tablets 40 mg	100	100 TABS	1 Tab 3 times daily	-	11-Aug-2011	11-Aug-2011
Cetirizine Hydrochloride Tablets 10 mg	30	30 TABS	1 Tab Daily	-	12-Jul-2011	11-Aug-2011

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Never smoked tobacco:	Smoker$$ Status.clm - No Action Required	21-Jan-2010
Light drinker - 1-2u/day:	Alcohol Intake$$.clm - Repeat after an Interval	21-Jan-2010

Clinical warnings

Additional relevant information
Administrative information

OK to send correspondence to home address?:Yes
Patient will accept any site:Yes
Patient will accept cancellation or short notice appointment (within 1-6 days):Yes
Patient has disability or requires wheelchair access:No
Referred By:Referring GP
Electronic Attachment Present:Yes

Signature of referring doctor (or other professional)	**Date**

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC General Referral Protocol (Glasgow, vR17.0)

REFERRAL TO

East Glasgow Podiatry
GGC General Referral

— **Consultant / receiving practitioner** and/or **specialty clinic**

GGC Podiatry
NHS Greater Glasgow & Clyde

— **Hospital** and **hospital address**

Hospital location code.
G025G

Email address
-

Urgency of referral	ROUTINE		
Date of referral	09-Apr-2015	**Date sent**	09-Apr-2015

PATIENT DETAILS

Surname	Mcleish
Forename(s)	Wendy
Title	Miss
Sex	Female
Date of birth	25-May-1987
CHI no.	2505876061
Area of Residence	-

Patient's address

0/1 51 Coxton Place
GARTHAMLOCK
Glasgow
G33 5EJ

Contact number(s)

Voice:07454750438

101009031853I Unique Care Pathway Number: 101009031853I

REGISTERED GP DETAILS

Name	Dr Anne McGinley		
GMC code	3341180	GP code	07307
Practice name	Easterhouse Health Centre (13448)		
Practice code	46471		

Practice address

9 Auchinlea Road
Easterhouse
Glasgow
G34 9HQ

Contact number(s)

Voice:0141 531 8150
Facsimile:0141 531 8158

REFERRING GP DETAILS

Name	Dr. Martin Connolly		
GMC code	7036867	GP code	99999
Practice name	Dr Wilson, Dr Mcginley & Dr Sheppar (46471)		
Practice code	46471		

Practice address

Easterhouse Health Centre
9 Auchinlea Road
Glasgow
G34 9HQ

Contact number(s)

Voice:0141 531 8150

CLINICAL INFORMATION

History of presenting complaint
Presenting complaint

Description: Ingrown toenail

Comment: I would be grateful for any input you could offer with Wendy. She has a several month history of ingrown toenail on the right great toe. There is no evidence of infection, but it is causing problems particularly with certain shoes and local pressure. On examination it appears to be ingrown along the entire length of the medial side and I think she would struggle to get much improvement with the self management we discussed at her appointment.

The nail itself looks healthy and she is fit and well so I suspect with some additional input we can improve things.

Many thanks,

Dr Martin Connolly
GPST3

Reason for referral

Care type requested: Out Patient
Expected outcome: Not Specified

Past medical history
Pre-existing conditions (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Ingrowing great toe nail (Right)	-	08-Apr-2015	08-Apr-2015
Alcohol problem drinking	-	06-Jun-2012	06-Jun-2012
Pneumonia due to unspecified organism (Bilateral)	-	30-Dec-2011	30-Dec-2011
Adult respiratory distress syndrome	-	30-Nov-2011	30-Nov-2011
Overdose of drug	fluoxetine	22-Sep-2011	22-Sep-2011
Anxiety with depression	-	19-Jul-2011	19-Jul-2011
Death of father	-	31-Jan-2011	31-Jan-2011
Has a tremor	seen by nuerologist 2012, felt to be benign	01-Apr-2007	01-Apr-2007
Death of mother	age 29 MI	01-Jan-1991	01-Jan-1991

Current medication (Active Repeat medication issued within the last 12 months)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Folic Acid Tablets 400 micrograms	56	56 TABLET	ONE TO BE TAKEN EACH DAY	-	05-Sep-2014	05-Sep-2014
Propranolol Hydrochloride Tablets 40 mg	56	56 tablet	ONE TO BE TAKEN THREE TIMES A DAY CAN BE ISSUED AS HALF 80MG TABLET TRHEE TIMES A DAY	-	13-Feb-2014	26-Mar-2015

Recent medication (Any medication issued within last 90 days not shown above)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Cetirizine Hydrochloride Tablets 10 mg	56	56 TABLET	ONE TO BE TAKEN EACH DAY	-	08-Apr-2015	08-Apr-2015
Beclometasone Aqueous nasal spray 50 micrograms/actuation	200	200 DOSE	TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY	-	08-Apr-2015	08-Apr-2015
Mirtazapine Tablets 15 mg	56	56 TABLET	ONE TO BE TAKEN AT NIGHT	-	26-Mar-2015	26-Mar-2015
Piroxicam Gel 0.5 %	60	60 GRAM	Rub into the affected site three to four times daily	-	06-Feb-2015	06-Feb-2015
Mirtazapine Tablets 15 mg	56	56 TABLET	ONE TO BE TAKEN AT NIGHT	-	20-Jan-2015	20-Jan-2015
Mirtazapine Tablets 15 mg	56	56 TABLET	ONE TO BE TAKEN AT NIGHT	-	14-Oct-2014	24-Nov-2014

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Never smoked tobacco:		29-Apr-2014
Never smoked tobacco :	Sore across back. Not breathless. Chest clear. Temperature nomral. PO2 99 Pulse 90 pASIN COMING AND GOING. Has also had diarrhoea today. Has been to toliet 4-5 times. No blood in diarrhoe- TRUNCATED	08-Aug-2013
Non-smoker :	,	28-Jun-2013
Non-smoker :	systemically better but still clear productive cough after RTI 26 12 12, cocnern re risk ards recurrnace. , denies inh subs misuse	11-Jan-2013
Never smoked tobacco:		17-Apr-2012
Alcohol consumption, 3 units/week:		17-Apr-2012
Light drinker - 1-2u/day:	Alcohol Intake$$.clm - Repeat after an Interval	21-Jan-2010

Clinical warnings

Additional relevant information

Administrative information

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

Patient will accept cancellation or short notice appointment (within 1-6 days):Yes

Patient has disability or requires wheelchair access:No

Referred By:Referring GP

Electronic Attachment Present:No

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional)

Date

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC Obstetrics (Glasgow, vR13.0)

REFERRAL TO

Obstetrics
GGC Obstetrics

— **Consultant / receiving practitioner** and/or **specialty clinic**

The Princess Royal Maternity Unit
16 Alexandra Parade
Glasgow
G31 2ER

— **Hospital** and **hospital address**

Hospital location code.
G108H

Email address
-

Urgency of referral	ROUTINE		
Date of referral	09-Jul-2015	**Date sent**	09-Jul-2015

PATIENT DETAILS

Surname	Mcleish
Forename(s)	Wendy
Title	Miss
Sex	Female
Date of birth	25-May-1987
CHI no.	2505876061
Area of Residence	-

Patient's address

0/1 51 Coxton Place
GARTHAMLOCK
Glasgow
G33 5EJ

Contact number(s)

Voice:07454750438

101009577469U Unique Care Pathway Number: 101009577469U

REGISTERED GP DETAILS

Name	Dr Anne McGinley		
GMC code	3341180	GP code	07307
Practice name	Easterhouse Health Centre (13448)		
Practice code	46471		

Practice address

9 Auchinlea Road
Easterhouse
Glasgow

Contact number(s)

Voice:0141 531 8150
Facsimile:0141 531 8158

REFERRING GP DETAILS

Name	Dr. Martin Connolly		
GMC code	7036867	GP code	99999
Practice name	Dr Wilson, Dr Mcginley & Dr Sheppar (46471)		
Practice code	46471		

Practice address

Easterhouse Health Centre
9 Auchinlea Road
Glasgow

Contact number(s)

Voice:0141 531 8150

CLINICAL INFORMATION

History of presenting complaint
Presenting complaint

Description: Pregnant

Comment: Many thanks for arranging antenatal care of this primagravida. LMP 22/05/15. No known obstetric issues. BP 123/79 today. Ex smoker. Started on folic acid and given dietary advice. On mirtazapine, advised will aim to reduce/stop during pregnancy.

Kind regards,

Dr Martin Connolly

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history

Pre-existing conditions (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Alcohol problem drinking	-	06-Jun-2012	06-Jun-2012
Pneumonia due to unspecified organism (Bilateral)	-	30-Dec-2011	30-Dec-2011
Adult respiratory distress syndrome	-	30-Nov-2011	30-Nov-2011
Overdose of drug	fluoxetine	22-Sep-2011	22-Sep-2011
Anxiety with depression	-	19-Jul-2011	19-Jul-2011
Death of father	-	31-Jan-2011	31-Jan-2011
Has a tremor	seen by nuerologist 2012, felt to be benign	01-Apr-2007	01-Apr-2007
Death of mother	age 29 MI	01-Jan-1991	01-Jan-1991

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Patient pregnant	09-Jul-2015	09-Jul-2015

Current medication (Active Repeat medication issued within the last 12 months)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Folic Acid Tablets 400 micrograms	56	56 TABLET	ONE TO BE TAKEN EACH DAY	-	05-Sep-2014	09-Jul-2015
Propranolol Hydrochloride Tablets 40 mg	56	56 tablet	ONE TO BE TAKEN THREE TIMES A DAY CAN BE ISSUED AS HALF 80MG TABLET TRHEE TIMES A DAY	-	13-Feb-2014	14-May-2015

Recent medication (Any medication issued within last 90 days not shown above)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Mirtazapine Tablets 15 mg	56	56 TABLET	ONE TO BE TAKEN AT NIGHT	-	14-May-2015	14-May-2015
Cetirizine Hydrochloride Tablets 10 mg	56	56 TABLET	ONE TO BE TAKEN EACH DAY	-	08-Apr-2015	08-Apr-2015
Beclometasone Aqueous nasal spray 50 micrograms/actuation	200	200 DOSE	TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY	-	08-Apr-2015	08-Apr-2015
Mirtazapine Tablets 15 mg	56	56 TABLET	ONE TO BE TAKEN AT NIGHT	-	26-Mar-2015	26-Mar-2015
Piroxicam Gel 0.5 %	60	60 GRAM	Rub into the affected site three to four times daily	-	06-Feb-2015	06-Feb-2015

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Ex smoker (Stopped 2005):		09-Jul-2015
Never smoked tobacco:		29-Apr-2014
Never smoked tobacco :	Sore across back. Not breathless. Chest clear. Temperature nomral. PO2 99 Pulse 90 pASIN COMING AND GOING. Has also had diarrhoea today. Has been to toliet 4-5 times. No blood in diarrhoe- TRUNCATED	08-Aug-2013
Non-smoker :	,	28-Jun-2013
Non-smoker :	systemically better but still clear productive cough after RTI 26 12 12, cocnern re risk ards recurrnace. , denies inh subs misuse	11-Jan-2013
Alcohol consumption, 3 units/week:		17-Apr-2012
Light drinker - 1-2u/day:	Alcohol Intake$$.clm - Repeat after an Interval	21-Jan-2010

Investigations

Description/Question	Result/Comment	Date
Chosen place for Delivery:	Maternity Unit	-
LMP (last menstrual period) :	2015-05-22	-
EDD (expected date of delivery) estimated:	2016-02-22	-
Are you aware of any Vulnerability or Child Protection issues in relation to this pregnancy?:	Not Known	-

Clinical warnings

Additional relevant information

Administrative information

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

Patient will accept cancellation or short notice appointment (within 1-6 days):Yes

Patient has disability or requires wheelchair access:No

Referred By:Referring GP

Electronic Attachment Present:No

Signature of referring doctor (or other professional)

Date

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC Obstetrics (Glasgow, vR13.0)

REFERRAL TO

Obstetrics
GGC Obstetrics

— **Consultant / receiving practitioner** and/or **specialty clinic**

The Princess Royal Maternity Unit
16 Alexandra Parade
Glasgow
G31 2ER

— **Hospital** and **hospital address**

Hospital location code.
G108H

Email address
-

Urgency of referral Routine
Date of referral 14-Jul-2016 **Date sent** 14-Jul-2016

PATIENT DETAILS

Surname	Mcleish
Forename(s)	Wendy
Title	Miss
Sex	Female
Date of birth	25-May-1987
CHI no.	2505876061
Area of Residence	-

Patient's address

0/1 51 Coxton Place
GARTHAMLOCK
Glasgow
G33 5EJ

Contact number(s)

Voice:07454750438

101011771902N Unique Care Pathway Number: 101011771902N

REGISTERED GP DETAILS

Name	Dr Anne McGinley		
GMC code	3341180	GP code	07307
Practice name	Easterhouse Health Centre (13448)		
Practice code	46471		

Practice address

9 Auchinlea Road
Easterhouse
Glasgow

Contact number(s)

Voice:0141 531 8150
Facsimile:0141 531 8158

REFERRING GP DETAILS

Name	Dr Marie Wilson		
GMC code	2551656	GP code	01376
Practice name	Easterhouse Health Centre (13448)		
Practice code	46471		

Practice address

9 Auchinlea Road
Easterhouse
Glasgow

Contact number(s)

Voice:0141 531 8150
Facsimile:0141 531 8158

CLINICAL INFORMATION

History of presenting complaint
Presenting complaint

Description: Pregnant

Comment: Pregnant. LMP - Thinks end of May but not sure. Para 0+1 Miscarriage last September. On Mirtazapine. Limited information on safety in pregnancy. Discussed trying to reduce - not sure - will think about this. Has stopped alcohol. No other drugs. Feeling well.

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history
Pre-existing conditions (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Miscarriage	surgical ERPC	03-Sep-2015	03-Sep-2015
Alcohol problem drinking	-	06-Jun-2012	06-Jun-2012
Pneumonia due to unspecified organism (Bilateral)	-	30-Dec-2011	30-Dec-2011
Adult respiratory distress syndrome	-	30-Nov-2011	30-Nov-2011
Overdose of drug	fluoxetine	22-Sep-2011	22-Sep-2011
Anxiety with depression	-	19-Jul-2011	19-Jul-2011
Death of father	-	31-Jan-2011	31-Jan-2011
Has a tremor	seen by nuerologist 2012, felt to be benign	01-Apr-2007	01-Apr-2007
Death of mother	age 29 MI	01-Jan-1991	01-Jan-1991

Current medication (Active Repeat medication issued within the last 12 months)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Folic Acid Tablets 400 micrograms	56	56 TABLET	ONE TO BE TAKEN EACH DAY	-	05-Sep-2014	14-Jul-2016

Recent medication (Any medication issued within last 90 days not shown above)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Propranolol Hydrochloride Tablets 10 mg	28	28 tablet	ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED	-	18-May-2016	08-Jun-2016
Beclometasone Aqueous nasal spray 50 micrograms/actuation	200	200 DOSE	TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY	-	18-May-2016	18-May-2016
Cetirizine Hydrochloride Tablets 10 mg	56	56 TABLET	ONE TO BE TAKEN EACH DAY	-	18-May-2016	18-May-2016
Salbutamol Cfc-free inhaler 100 micrograms/puff	1	1 INHALER	ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY	-	29-Apr-2016	29-Apr-2016
Volumatic Spacer device	1	1 device	TO BE USED AS DIRECTED	-	29-Apr-2016	29-Apr-2016
Propranolol Hydrochloride Tablets 10 mg	21	21 tablet	ONE TO BE TAKEN THREE TIMES A DAY	-	29-Apr-2016	03-May-2016
Mirtazapine Tablets 45 mg	28	28 tablet	ONE TO BE TAKEN AT NIGHT	-	29-Apr-2016	08-Jun-2016
Amoxicillin Capsules 500 mg	15	15 CAPSULE	ONE TO BE TAKEN THREE TIMES A DAY	-	29-Apr-2016	03-May-2016
Propranolol Hydrochloride Tablets 40 mg	56	56 tablet	ONE TO BE TAKEN THREE TIMES A DAY	-	01-Apr-2016	01-Apr-2016
Hydrocortisone And Miconazole Cream 1 % + 2 %	30	30 GRAM	APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE DAILY	-	15-Mar-2016	15-Mar-2016
Paracetamol Tablets 500 mg	56	56 TABLET	TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)	-	15-Mar-2016	15-Mar-2016
Ibuprofen Tablets 400 mg	42	42 TABLET	ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD	-	15-Mar-2016	15-Mar-2016
Mirtazapine Tablets 45 mg	28	28 tablet	ONE TO BE TAKEN AT NIGHT	-	15-Mar-2016	01-Apr-2016
Mirtazapine Tablets 30 mg	28	28 tablet	1 Tab At night	-	06-Jan-2016	01-Feb-2016
Propranolol Hydrochloride Tablets 40 mg	56	56 tablet	ONE TO BE TAKEN THREE TIMES A DAY	-	06-Jan-2016	18-Feb-2016

Blood Pressure

Date Recorded	Systolic	Diastolic
09-Jul-2015	123	90
08-Aug-2013	116	77
14-Jan-2013	118	86
11-Jan-2013	118	77
21-Aug-2012	103	67

Body Measurements

Date Recorded	Height	Weight	BMI
29-Apr-2014	-	74	-
28-Jun-2013	158	74	29.5
31-Jan-2011	158	57	22.83

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Never smoked tobacco:		14-Jul-2016
Ex smoker (Stopped 2005):		09-Jul-2015
Never smoked tobacco:		29-Apr-2014
Never smoked tobacco :	Sore across back. Not breathless. Chest clear. Temperature nomral. PO2 99 Pulse 90 pASIN COMING AND GOING. Has also had diarrhoea today. Has been to toilet 4-5 times. No blood in diarrhoe- TRUNCATED	08-Aug-2013
Non-smoker :	,	28-Jun-2013
Alcohol consumption, 3 units/week:		17-Apr-2012
Light drinker - 1-2u/day:	Alcohol Intake$$.clm - Repeat after an Interval	21-Jan-2010

Investigations

Description/Question	Result/Comment	Date
Chosen place for Delivery:	Maternity Unit	-
Risk Assessment on booking identified in this pregnancy:	High Risk	-
LMP (last menstrual period) :	2016-05-31	-
EDD (expected date of delivery) estimated:	2016-02-07	-
High risk factors:	Previous miscarriage - anxious for early scan because of this and unsure about dates. On Mirtazapine for depression. PH Alcohol problms - has stopped drinking now.	-
Are you aware of any Vulnerability or Child Protection issues in relation to this pregnancy?:	Yes	-
Vulnerability Details:	PH Alcohol problems. Depression.	-

Clinical warnings

Allergies

Description	Comment	Date recorded
Adverse reaction to propranolol	possible wheeze with this	29-Apr-2016

Additional relevant information

Administrative information

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

Patient will accept cancellation or short notice appointment (within 1-6 days):Yes

Referred By:Referring GP

Electronic Attachment Present:No

Signature of referring doctor (or other professional)

Date

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC General Referral Protocol (Glasgow, vR15.0)

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Neurology - First Seizure
GGC General Referral

Consultant / receiving practitioner and/or **specialty clinic**

Queen Elizabeth University Hospital
1345 Govan Road
Glasgow
G51 4TF

Hospital and **hospital address**

Hospital location code.
G405H

Email address
-

Urgency of referral	Urgent ESCALATED FROM ROUTINE solo mum, welfre concerns re child		
Date of referral	03-Feb-2021	**Date sent**	03-Feb-2021

PATIENT DETAILS

Surname	Mcleish
Forename(s)	Wendy
Title	Miss
Sex	Female
Date of birth	25-May-1987
CHI no.	2505876061
Area of Residence	-

Patient's address

126 liberton street
Carntyne
Glasgow
G33 2HJ

Contact number(s)

Voice:07912347436

101022571537H Unique Care Pathway Number: 101022571537H

REGISTERED GP DETAILS

Name	Dr Anne McGinley		
GMC code	3341180	GP code	07307
Practice name	Easterhouse Health Centre (13448)		
Practice code	46471		

Practice address

9 Auchinlea Road
Easterhouse
Glasgow
G34 9HQ

Contact number(s)

Voice:0141 531 8150
Facsimile:0141 531 8158
E-mail:GG-UHB.gp46471clinical@nhs.net

REFERRING GP DETAILS

Name	Dr. Emma Sheppard		
GMC code	3665273	GP code	07111
Practice name	Lochend Surgery (46471)		
Practice code	46471		

Practice address

Easterhouse Health Centre
9 Auchinlea Road
Glasgow
G34 9HQ

Contact number(s)

Voice:0141 531 8150
Facsimile:0141 531 8158

CLINICAL INFORMATION

History of presenting complaint

Presenting complaint

Description: seizure and welfare concerns re child

Comment: Wendy was referred in December 2020 from A&E GRI with witnessed tonic clonic seizure. History therein is recorded as occasional alcohol, please note as recent as 2019 significant alcohol and intoxication + other drug use, more recent history uncertain though definitely less . IShe is not yet appointed to clinic. I am hereby escalating in part relating to fact that Wendy's young child is currently not in her care but being considered for return to her care by social work. Social work are under the impression that Wendy was not intoxicated at time of seizure this is not a withdrawal seizure. I have explained that withdrawal seizure is still possible, but would be most grateful for your opinion on whether it was. We would, also be grateful for consideration of more urgent exclusion of and or management of epilepsy, not least as Wendy would be solo parenting and very limited external support

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history

Pre-existing conditions (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Assault by bite of human being	by partner. bite to R ear, blunt head trauma by bottle.	01-Nov-2019	01-Nov-2019
Social worker involved	-	02-Sep-2019	02-Sep-2019
Alcohol problem drinking	-	02-Sep-2019	02-Sep-2019
Pityriasis versicolor	-	18-Feb-2019	18-Feb-2019
Miscarriage	surgical ERPC	03-Sep-2015	03-Sep-2015
Pneumonia due to unspecified organism (Bilateral)	-	30-Dec-2011	30-Dec-2011
Adult respiratory distress syndrome	-	30-Nov-2011	30-Nov-2011
Overdose of drug	fluoxetine	22-Sep-2011	22-Sep-2011
Anxiety with depression	-	19-Jul-2011	19-Jul-2011
Death of father	-	31-Jan-2011	31-Jan-2011
Has a tremor	seen by nuerologist 2012, felt to be benign	01-Apr-2007	01-Apr-2007
Death of mother	age 29 MI	01-Jan-1991	01-Jan-1991

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Elective caesarean delivery NOS	26-Feb-2017	26-Feb-2017

Current medication (Active Repeat medication issued within the last 12 months)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Propranolol Hydrochloride Tablets 10 mg	84	84 TABLET	ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED	-	23-Oct-2020	30-Dec-2020
Mirtazapine Tablets 45 mg	56	56 TABLET	ONE TO BE TAKEN AT NIGHT	-	30-Sep-2020	30-Dec-2020

Recent medication (Any medication issued within last 90 days not shown above)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Cerelle Tablets 75 micrograms	168	168 tablet	1 Tab Daily	-	30-Sep-2020	01-Oct-2020
Propranolol Hydrochloride Tablets 10 mg	28	28 tablet	ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED FOR ANXIETY	-	30-Sep-2020	01-Oct-2020

Blood Pressure

Date Recorded	Systolic	Diastolic
17-Jul-2018	128	77
09-Jul-2015	123	90
08-Aug-2013	116	77
14-Jan-2013	118	86
11-Jan-2013	118	77

Body Measurements

Date Recorded	Height	Weight	BMI
17-Jul-2018	-	-	29.64
29-Apr-2014	-	74	-
28-Jun-2013	158	74	29.5
31-Jan-2011	158	57	22.83

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Never smoked tobacco:		16-Sep-2019
Never smoked tobacco:		17-Jul-2018
Never smoked tobacco:		04-Jan-2018
Never smoked tobacco:		14-Jul-2016
Ex smoker (Stopped 2005):		09-Jul-2015
Alcohol consumption, 3 units/week:		17-Apr-2012
Light drinker - 1-2u/day:	Alcohol Intake$$.clm - Repeat after an Interval	21-Jan-2010

Clinical warnings

Allergies

Description	Comment	Date recorded
Adverse reaction to propranolol	possible wheeze with this	29-Apr-2016

Additional Support Needs

No known ASN requirements

Additional relevant information

OK to send correspondence to home address?:Yes
Patient will accept any site:Yes
Patient will accept cancellation or short notice appointment (within 1-6 days):Yes
Referred By:Referring GP
Electronic Attachment Present:Yes

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional)

Date

End of Document. Total Pages (including this one): 96

LOCHEND SURGERY,
Easterhouse Health Centre
9 Auchinlea Road
Glasgow G34 9HQ
☎ 0141-531 8150
fax: 0141 531 8158

Dr. Anne McGinley MBChB, MRCGP, MSc Sports Med
Dr. Emma Sheppard MBBS.MRCGP,DRCOG,DFFP
Dr. Kathryn Roberts MBChB,MRCGP

26.05.21

Ms Wendy McLeish,
312 Cumbernauld Road,
Glasgow.
G31 3LY

Dear Wendy,

Further to today's conversation with our Mrs Rogers, we have removed you from our patients list for the undernoted reason:

Moved out of practice area

We would advise that you register with another GP as soon as possible. If you have any problems registering with a GP you should telephone: 0141 300 1300 – Glasgow Registrations, and they will be able to allocate you to a GP practice.

Yours sincerely

Kay Boyle.

Kay Boyle (Practice Manager)

LOCHEND SURGERY,
Easterhouse Health Centre
9 Auchinlea Road
Glasgow G34 9HQ
☎ 0141-531 8150
fax: 0141 531 8158

Dr. Anne McGinley MBChB, MRCGP, MSc Sports Med
Dr. Emma Sheppard MBBS.MRCGP,DRCOG,DFFP
Dr. Kathryn Roberts MBChB,MRCGP

26.05.21

Ms Wendy McLeish,
312 Cumbernauld Road,
Glasgow.
G31 3LY

Dear Wendy,

Further to today's conversation with our Mrs Rogers, we have removed you from our patients list for the undernoted reason:

Moved out of practice area

We would advise that you register with another GP as soon as possible. If you have any problems registering with a GP you should telephone: 0141 300 1300 – Glasgow Registrations, and they will be able to allocate you to a GP practice.

Yours sincerely

Kay Boyle.

Kay Boyle (Practice Manager)

LOCHEND SURGERY,
Easterhouse Health Centre
9 Auchinlea Road
Glasgow G34 9HQ
☎ 0141-531 8150
fax: 0141 531 8158

Dr. Anne McGinley MBChB, MRCGP, MSc Sports Med
Dr. Emma Sheppard MBBS.MRCGP,DRCOG,DFFP
Dr. Kathryn Roberts MBChB,MRCGP

26.05.21

Registrations,
Practitioner Services,
Meridian Court,
First Floor,
5 Cadogan Street,
Glasgow. G2 6QE

Dear Sirs,

I would be grateful if the following patient(s) could be removed from my list

Wendy McLeish 2505876061

Optional - supplementary information requested by LMC/PCT

Reason for removal:

Moved out of practice area
New Address:312 Cumbernauld Road, Glasgow. G31 3LY

I have written to the patient explaining the reason for removal.

Yours sincerely

Drs McGinley, Sheppard & Roberts

Registration Details - Patient No: 4917

Personal details...		Address details...	
Date of birth	25/05/1987	**Post Code**	G31 3LY
Sex	F	**House Name Flat No**	
Surname	Mcleish	**No and Street**	312 Cumbernauld Rd
Previous Surname		**Village**	
Forenames	Wendy	**Town**	Glasgow
Calling Name	Wendy	**County**	
Title	Miss		
Birth Surname			
Marital Status	Marital status unknown		
Ethnic Origin	(White) Scottish		
Gpass Patient ID			

HA/HB Details...		Contact details...	
Trading partner	Greater Glasgow	**Home Tel No**	07912347436
Registered GP	Dr Anne McGinley	**Work Tel No**	
Usual GP	Dr Anne McGinley	**Mobile Tel No**	
Residential Inst		**E Mail Address**	
Branch Surgery			
CHI Number	2505876061		
NHS Number	617/87/408		

Practice Information...		Distances	
Dispensing	N	**Rural Mileage**	
Hospital Number		**Blocked Special**	
Records At	Easterhouse Health Centre	**Walking Quarters**	

Further Information		Upload Consent	
Long/Short stay or Dead		**SCI-DC Consent**	Implied Consent (default)
Date of registration	28/04/2020		

AMS\CMS Details		ECS (GP Summary) Consent	
AMS Consent	Yes	**Patient Consent**	Implied Consent (default)
Pharmacy Details			
Item Collected Check	Yes		
CMS Suitability Status	-1		
CMS Registration Status	1		

Medical Record

Problems

Active Problems		Authorised By	Code
02/09/2019	Social worker involved	Dr McGinley	13G4
16/03/2021	Vulnerable child in family	Dr Sheppard	13IQ
31/01/2011	Death of father	Dr Rafferty	13M7
01/01/1991	Death of mother age 29 MI	Ms Fergusson	13M8
01/04/2007	Has a tremor seen by nuerologist 2012, felt to be benign	Dr Sheppard	1B22
26/02/2017	Elective caesarean delivery NOS	Mrs O'Neill	7F12z
18/04/2019	Total notes on computer	Ms Boyle	9346
18/02/2019	Pityriasis versicolor	Dr Receveaux	AB10
19/07/2011	Anxiety with depression	Dr Sheppard	E2003
02/09/2019	Alcohol problem drinking	Dr McGinley	E23-2
01/11/2011	Misuse of Cocaine unspecified (Primary)	Dr Sheppard	EMISNQMI91
06/06/2012	Substance misuse of Benzodiazepines	Dr Sheppard	EMISNQND16

16/03/2021	Substance misuse of Cannabis	Dr Sheppard	EMISNQND9
30/12/2011	Pneumonia due to unspecified organism (Bilateral)	Dr Malek	H26
30/11/2011	Adult respiratory distress syndrome	Dr Wilson	H585-1
03/09/2015	Miscarriage surgical ERPC	Mrs O'Neill	L04-1
22/09/2011	Overdose of drug fluoxetine	Dr Wilson	SL-5
01/11/2019	Assault by bite of human being by partner. bite to R ear, blunt head trauma by bottle.	Dr McGinley	TLxy0

Past Problems		Authorised By	Code
17/04/2012	**Unprotected intercourse**	Dr Sheppard	1565
05/12/2016	**Cough**	Dr Receveaux	171
16/03/2012	**Cough (Mild, Occasional)**	Dr Paton	171
17/04/2012	**Abdominal pain**	Dr Sheppard	1969
16/03/2012	**Abdominal pain**	Dr Paton	1969
10/06/2019	**Suspected UTI**	Dr Roberts	1J4
09/07/2015	**Patient pregnant**	Dr Connolly	62
07/04/2017	**Postnatal exam. - maternal**	Dr Sheppard	62S-1
02/11/2016	**Whooping cough vaccination (GMS)**	Ms Gilmartin	655-1
17/07/2018	**Cervical cytology screen**	Mrs King	685-1
17/03/2017	**Dressing of wound**	Ms Gilmartin	81H
28/06/2013	**Advice about long acting reversible contraception**	Dr Sheppard	8CAw
11/01/2013	**Advice about long acting reversible contraception**	Dr Sheppard	8CAw
21/08/2012	**Advice about long acting reversible contraception**	Dr Sheppard	8CAw
07/08/2012	**Letter encounter to patient**	Dr Sheppard	9N35
22/08/2012	**Letter sent to patient**	Dr Sheppard	9NC3
11/10/2018	**Police domestic incident report received**	Dr Sheppard	9NDJ
06/06/2012	**Alcohol problem drinking**	Dr Sheppard	E23-2
11/05/2012	**Furunculosis of external auditory meatus (Left)**	Dr Sheppard	F5018
09/04/2019	**Upper respiratory tract infection NOS**	Dr Sheppard	H05z-1
11/01/2013	**Upper respiratory tract infection NOS**	Dr Sheppard	H05z-1
10/09/2012	**Upper respiratory tract infection NOS**	Dr Sheppard	H05z-1
05/06/2017	**Hay fever - unspecified allergen**	Dr Roberts	H172-1
30/07/2013	**Dyspepsia**	Dr Sheppard	J16y4
08/04/2015	**Ingrowing great toe nail (Right)**	Dr Connolly	M2300
16/03/2012	**Hair loss**	Dr Paton	M2400-2
10/12/2020	**[D]Seizure NOS**	Dr Roberts	R003z-1
26/08/2011	**Overdose of drug**	Dr Sheppard	SL-5
29/04/2016	**Adverse reaction to propranolol** possible wheeze with this	Dr Sheppard	TJC02
16/09/2019	**Assault by bite of human being**	Dr Roberts	TLxy0

Health Admin Problems		Authorised By	Code

Investigations		Authorised By	Code
17/04/2012	**Cervical Cytology** (Source: Manually filed) . Routine Recall -		4K22.
04/09/2012	**Liver function test** (Source: LAB) .		44D6.
14/01/2013	**Liver function test** (Source: LAB) .		44D6.
14/01/2013	**Urea and electrolytes** (Source: LAB) .		44JB.
14/01/2013	**(Non Coded Event - Amylase)** (Source: LAB) .		
14/01/2013	**Full blood count - FBC** (Source: LAB) .		424..
30/07/2013	**Full blood count - FBC** (Source: LAB) .		424..
30/07/2013	**Serum ferritin** (Source: LAB) .		42R4.
30/07/2013	**Full blood count - FBC** (Source: LAB) .		424..
30/07/2013	**Liver function test** (Source: LAB) .		44D6.
20/08/2013	**Plasma C reactive protein** (Source: LAB) .		44CC.
04/03/2014	**Liver function test** (Source: LAB) .		44D6.
18/03/2014	**Thyroid function test** (Source: LAB) . Euthyroid TFT results|		442J.
18/03/2014	**Liver function test** (Source: LAB) .		44D6.
15/05/2015	**Cervical Cytology** (Source: Manually filed) . Routine Recall -		4K22.
30/09/2015	**(Non Coded Event - Full Blood Count)** (Source: LAB) .		
30/09/2015	**(Non Coded Event - Liver Function Tests)** (Source: LAB) . Alkaline Phosphatase results IFCC aligned from 03/08/15.|		
30/09/2015	**(Non Coded Event - Urea & Electrolytes)** (Source: LAB) .		
30/09/2015	**(Non Coded Event - Bone Profile)** (Source: LAB) . Alkaline Phosphatase results IFCC aligned from 03/08/15.|		
05/12/2016	**(Non Coded Event - Full Blood Count)** (Source: LAB) .		
05/12/2016	**(Non Coded Event - Coagulation Screen)** (Source: LAB) .		
05/12/2016	**(Non Coded Event - D-Dimer (IL DDHS))** (Source: LAB) . The above reference range applies to patients with suspected VTE.|In other populations the reference range is 0-243 ng/mL.|		

05/12/2016	**(Non Coded Event - Coagulation Screen)** (Source: LAB) .	
05/12/2016	**(Non Coded Event - C-reactive Protein)** (Source: LAB) .	
17/07/2018	**Cervical Cytology** (Source: Manually filed) . Routine Recall -	4K22.
20/06/2019	**(Non Coded Event - C.trachomatis/GC PCR)** (Source: LAB) . This is a VULVOLVAGINAL SWAB sample.|	

Values

Date	Last Entry	Normal Range Indicator	Normal Range
23/03/2021	**O/E - weight 83 Kg has gained, wants to stay on mirtaz cs helps her sleepp > try lower dose for sedation wout wt gain**		
23/03/2021	**O/E - height 158 cm**	……|….	10-250
23/03/2021	**Body Mass Index 33.25**	……. |	20-25
16/09/2019			
16/09/2019	**Never smoked tobacco**		
20/06/2019	**Chlamydia trachomatis nucleic acid detection**		
20/06/2019	**Neisseria gonorrhoeae nucleic acid detection**		
17/07/2018	**Cervical smear: negative Routine Recall -**		
17/07/2018	**Blood pressure reading 128/77 mm Hg**		
05/12/2016	**Serum C reactive protein level 8 mg/L**	……..|..	0-10
05/12/2016	**Prothrombin time 12 s**	……..|..	9-13
05/12/2016	**1.1 (Non Coded Event - PT Ratio)**		
05/12/2016	**APTT 28 s**	.|……..	27-38
05/12/2016	**Activated partial thromboplastin time ratio 0.9**	..|…….	0.8-1.2
05/12/2016	**11 s (Non Coded Event - Thrombin time)**	|……..	11-15
05/12/2016	**0.9 (Non Coded Event - TCT ratio)**		
05/12/2016	**DDimer level 459 ng/ml**	……. |	0-230
05/12/2016	**Total white cell count 10.5 x10^9/l**	……..|.	4-11
05/12/2016	**Red blood cell (RBC) count 4.04 x10^12/l**	.|……..	3.8-5.8
05/12/2016	**Haemoglobin estimation 124 g/l**	..|…….	115-165
05/12/2016	**Haematocrit 0.355 l/l**	| …….	0.37-0.47
05/12/2016	**Mean corpuscular volume (MCV) 87.9 fl**	….|……	80-100
05/12/2016	**Mean corpusc. haemoglobin(MCH) 30.7 pg**	……|…	27-32
05/12/2016	**Platelet count 270 x10^9/l**	…..|…..	150-400
05/12/2016	**Neutrophil count 7.7 x10^9/l**	……..|	2-7.5
05/12/2016	**Lymphocyte count 2 x10^9/l**	..|…….	1.5-4
05/12/2016	**Monocyte count 0.7 x10^9/l**	……..|..	0.2-0.8
05/12/2016	**Eosinophil count 0.06 x10^9/l**	..|…….	0-0.4
05/12/2016	**Basophil count 0 x10^9/l**	|……..	0-0.1
05/12/2016	**Nucleated red blood cell count 0 x10^9/l**		
05/12/2016	**O/E - temperature normal**		
05/12/2016	**O/E - pulse rate 91 beats/minute**		
18/05/2016	**PFR - peak flow rate 390 L/min**		
29/04/2016	**Predicted peak flow 435 l/min**		
30/09/2015	**Serum calcium 2.31 mmol/L**	…|…….	2.2-2.6
30/09/2015	**Corrected serum calcium level 2.36 mmol/L**	….|……	2.2-2.6
30/09/2015	**Serum inorganic phosphate 0.78 mmol/L**	|……..	0.8-1.5
30/09/2015	**Serum albumin 36 g/L**	.|……..	35-50
30/09/2015	**Serum alkaline phosphatase 99 U/L**	……|…	30-130
30/09/2015	**Serum sodium 136 mmol/L**	..|…….	133-146
30/09/2015	**Serum potassium 4.4 mmol/L**	…..|…..	3.5-5.3
30/09/2015	**Serum chloride 106 mmol/L**	……..|..	95-108
30/09/2015	**Serum urea level 5.6 mmol/L**	……|….	2.5-7.8
30/09/2015	**Serum creatinine 61 umol/L**	..|…….	40-130
30/09/2015	**GFR calculated abbreviated MDRD > 60**		
30/09/2015	**Serum total bilirubin level 13 umol/L**		
30/09/2015	**ALT/SGPT serum level 25 U/L**	……|….	5-40
30/09/2015	**AST serum level 17 U/L**		
09/07/2015	**Fast alcohol screening test 8 /16**		
09/07/2015	**O/E - BP reading**		
09/07/2015	**Ex smoker 2005**		
18/03/2014	**Serum TSH level 1.9 mu/L**	…|…….	0.35-5
18/03/2014	**Serum free T4 level 13 pmol/L**	…|…….	9-21
18/03/2014	**Hepatitis C antibody test negative**		
09/08/2013	**Total alkaline phosphatase 86 IU/L**		
09/08/2013	**Serum troponin I level 0.04 ng/L**		
30/07/2013	**Total white blood count 9.2 10^9/L**	……|…	4-11
30/07/2013	**Red blood cell distribution width 12.6 %**	….|……	11.5-14.5
30/07/2013	**Serum ferritin 194 ng/ml**	……|…	10-275
01/07/2013	**HAD scale: anxiety score 14 /21**	……|…	0-21
01/07/2013	**HAD scale: depression score 17 /21**	……..|..	0-21
14/01/2013	**Serum amylase level 61 U/L**		
14/01/2013	**Glomerular filtration rate > 60**		

21/09/2012	**U-S abdominal scan - Normal**		
04/09/2012	**Serum gamma-glutamyl transferase level 98 U/L**		
08/08/2012	**Standard chest X-ray - Please make at an appointment to see us for the result of the Chest Xray at your convenience.**		
17/04/2012	**Endocervical chlamydia swab - NORMAL**		
17/04/2012	**Alcohol consumption 3 units/week**	|.....	>0
05/04/2012	**Serum total protein 71 g/L**		
05/04/2012	**Serum globulin 38 g/L**		
23/03/2012	**Transferrin level 3.2 g/l**		
23/03/2012	**Serum iron level 12 ug/dL**		
19/03/2012	**Free T4 level 12 pmol/l**	|.....	13-30
19/03/2012	**Serum folate 3.4 ug/l**	|.....	4-18
19/03/2012	**Serum vitamin B12 206 ng/l**	.|.....	160-925
19/03/2012	**Serum creatine kinase level 69 U/L**	...|.....	24-195
03/03/2012	**Hepatitis B screening test negative**		
31/01/2011	**Ideal weight 57.42 Kg**		
31/01/2011	**Ex-Cigarette Smoker 10 cigs/day (past)**		
04/02/2010	**O/E - BP reading normal B P Screening$$.clm - Repeat after an Interval**		

Attachments		**Authorised By**	**Code**
	None		

Due Diary Entries		**Authorised By**	**Code**
17/07/2021	**Cervical smear due** SCCRS Recall	Ms Reid	685F.

Overdue Diary Entries		**Authorised By**	**Code**
30/01/2021	**Medication review OVERDUE**	Dr McGinley	8B314

Alerts		**Authorised By**	**Code**
	None		

Drug Allergies		**Authorised By**	**Code**
29/04/2016	**Adverse reaction to propranolol** possible wheeze with this	Dr Sheppard	TJC02

Non Drug Allergies		**Authorised By**	**Code**
	None		

Family History		**Authorised By**	**Code**
	None		

Immunisations		**Authorised By**	**Code**
02/11/2016	**Whooping cough vaccination (GMS)**	Ms Gilmartin	655-1
24/10/2016	**Seasonal influenza vaccination (Left arm)** Batch no 33749411A exp 06/17 **(GMS)**	Ms Bannachan	65ED
11/08/1988	**First DTP (triple)+polio vacc.** 1st Primary Immunis.$$.clm - Repeat after an Interval In GP care	Ms Fergusson	65I1
04/01/1989	**Second DTP (triple)+polio vacc** 2nd Primary Immunis.$$.clm - Repeat after an Interval In GP care	Ms Fergusson	65I2
31/05/1989	**Third DTP (triple)+polio vacc.** 3rd Primary Immunis.$$.clm - Repeat after an Interval In GP care	Ms Fergusson	65I3
02/11/2016	**Low dose diphth, tet, acellular pert and inactiv polio vacc** ac39b086b exp 05/2018 left arm **(GMS)**	Ms Gilmartin	65I8
04/06/1992	**Booster DT(double)+polio vacc.** Preschool Immunis.$$.clm - No Action Required In GP care	Ms Fergusson	65K4
28/06/1989	**Measles/mumps/rubella vaccn.** Mmr Immunis.$$.clm - No Action Required In GP care	Ms Fergusson	65M1
24/10/2016	**Consent given for seasonal influenza vaccination**	Ms Bannachan	68NV0
24/10/2016	**Influenza vacc. administratn.**	Ms Bannachan	9OX

Health Status			
17/07/2018		**Cervical smear result Cervical smear: negative** **Notes summary on**	

21/01/2010	**computer**
23/03/2021	**Height** 158 cm
23/03/2021	**Weight** 83 Kg
23/03/2021	**Body Mass Index** 33.25 kg/m2
17/07/2018	**Blood pressure reading** 128/77 mm Hg
09/07/2015	**Blood pressure reading** O/E - BP reading
16/09/2019	**Smoking Status** Never smoked tobacco

Other Observations		Authorised By	Code
21/01/2010	**Light drinker - 1-2u/day** Alcohol Intake$$.clm - Repeat after an Interval	Mrs Rogers	1363
21/01/2010	**Never smoked tobacco** Smoker$$ Status.clm - No Action Required	Mrs Rogers	1371
05/04/2012	**Non-smoker** 3w, worried this and L Ot ext may precip another pneuminia, sats 98%, chest clear pulse 75 apyrexial but agreed to abtics nonetheless. (incl denies inhaled subs misuse)	Dr Sheppard	1371-1
17/04/2012	**Never smoked tobacco**	Ms Fergusson	1371
11/01/2013	**Non-smoker** systemically better but still clear productive cough after RTI 26 12 12, cocnern re risk ards recurrnace. , denies inh subs misuse	Dr Sheppard	1371-1
28/06/2013	**Non-smoker** ,	Dr Sheppard	1371-1
08/08/2013	**Never smoked tobacco** Sore across back. Not breathless. Chest clear. Temperature nomral. PO2 99 Pulse 90 pASIN COMING AND GOING. Has also had diarrhoea today. Has been to toliet 4-5 times. No blood in diarrhoea. No vomiting. cxr	Dr Wilson	1371
29/04/2014	**Never smoked tobacco**	Ms Bannachan	1371
17/07/2018	**Never smoked tobacco**	Mrs King	1371
16/03/2012	**Current non-smoker**	Dr Paton	137L
10/09/2019	**Social worker involved (REVIEW)**	Dr Sheppard	13G4
16/09/2019	**Social worker involved (REVIEW)**	Dr Roberts	13G4
23/10/2020	**Social worker involved (REVIEW)**	Dr Sheppard	13G4
10/12/2020	**Social worker involved (REVIEW)**	Dr Roberts	13G4
22/12/2020	**Social worker involved (REVIEW)**	Dr Roberts	13G4
22/12/2020	**Social worker involved (REVIEW)**	Dr Sheppard	13G4
16/03/2021	**Social worker involved (REVIEW)**	Dr Roberts	13G4
16/03/2021	**Social worker involved (REVIEW)**	Dr Roberts	13G4
16/03/2021	**Social worker involved (REVIEW)**	Dr Roberts	13G4
16/03/2021	**Vulnerable child in family (REVIEW)**	Dr Sheppard	13IQ
16/03/2021	**Vulnerable child in family (REVIEW)**	Dr Roberts	13IQ
23/03/2021	**Vulnerable child in family (REVIEW)**	Dr Sheppard	13IQ
30/03/2021	**Vulnerable child in family (REVIEW)**	Dr Sheppard	13IQ
19/07/2011	**Death of father (REVIEW)**	Dr Sheppard	13M7
30/07/2013	**Death of father (REVIEW)**	Dr Sheppard	13M7
05/01/1990	**At risk of physical abuse** priority=1	Ms Fergusson	13ZT
15/05/2015	**Last menstrual period -1st day** 1 5 15	Dr Sheppard	1513
05/04/2012	**Cough (Mild) (REVIEW)**	Dr Sheppard	171
17/04/2012	**Has a tremor (REVIEW)**	Dr Sheppard	1B22
10/03/2017	**Has a tremor (REVIEW)**	Dr Sheppard	1B22
29/04/2016	**Has a tremor (REVIEW)**	Dr Sheppard	1B22
18/03/2014	**Has a tremor (REVIEW)**	Dr Sheppard	1B22
18/03/2021	**Has a tremor (REVIEW)**	Dr Roberts	1B22
23/03/2021	**Has a tremor (REVIEW)**	Dr Sheppard	1B22
23/10/2020	**Has a tremor (REVIEW)**	Dr Sheppard	1B22
15/05/2015	**O/E-vaginal speculum exam. NAD**	Dr Sheppard	2691
15/05/2015	**O/E - no vaginal discharge**	Dr Sheppard	26A1
05/02/2010	**Plain X-ray sternum** normal priority=2	Ms Reid	5265
28/07/2016	**Patient pregnant**	Mrs Rogers	62
26/10/1994	**Child: clinical psychologist** in care a lot as a child Sexualised behaviour as a child priority=1	Ms Fergusson	64R7
08/02/2002	**BCG vaccination** priority=2	Ms Fergusson	653
06/06/2007	**3rd haemophilus B vaccination** priority=2	Ms Fergusson	657C
23/03/2000	**First Meningitis C Vaccination** Meningitis C Imm.clm - No Action Required In GP care	Ms Fergusson	657E
11/04/2007	**1st hepatitis B vaccination** priority=2	Ms Fergusson	65F1
09/05/2007	**2nd hepatitis B vaccination** priority=2	Ms Fergusson	65F2
20/03/2007	**Low dose diphtheria, tetanus and inactivated polio vaccinati** priority=2	Ms Fergusson	65K5
20/03/2007	**First hepatitis A and typhoid vaccination** priority=2	Ms Fergusson	65ML

28/02/2017	**Rep.presc. monitoring NOS**	Ms Boyle	66RZ
22/09/2014	**Rep.presc. monitoring NOS**	Ms Boyle	66RZ
05/03/2019	**Rep.presc. monitoring NOS**	Mrs Dickson	66RZ
17/04/2012	**Contraception counselling** worried re STi risk vboyfriend, still no cotnraception , asymptomatic but smear, chalmydia and HCG please. +++. barnardoes will support	Dr Sheppard	6777
21/08/2012	**Health ed. - alcohol** long chat re contra options, , thinking of baby in next yr or so, declies alcohol contacts today, will consider	Dr Sheppard	6792
17/07/2018	**Health ed. - alcohol**	Mrs King	6792
17/07/2018	**Health ed. - exercise**	Mrs King	6798
17/04/2012	**Health ed. - exercise**	Ms Fergusson	6798
17/07/2018	**Health ed. - diet**	Mrs King	6799
17/04/2012	**Cervical neoplasia screen (GMS)**	Ms Fergusson	6859
26/08/2011	**Depression screening using questions**	Ms Reid	6896
20/09/2011	**Depression screening using questions**	Ms Bannachan	6896
25/07/2011	**Depression screening using questions**	Ms Bannachan	6896
14/06/2013	**Depression screening using questions**	Mrs Rogers	6896
01/07/2013	**Depression screening using questions**	Ms Hutchison	6896
15/05/2015	**Cervical smear taken**	Dr Sheppard	7E2A2
07/04/2017	**Elective caesarean delivery NOS (REVIEW)**	Dr Sheppard	7F12z
05/02/2010	**Plain x-ray of chest** normal priority=2	Ms Reid	7P042
14/07/2016	**Medication review done**	Dr Wilson	8B3V
11/08/2011	**Repeat prescription** Came to collect Med 3, see below. Med 3 copy kindly issued by Dr Henderson this morning, given to patient. Also requested for cetirizine and propranolol, issued on acute as previously.	Dr Malek	8B4-1
09/02/2021	**Drug over usage checked**	Ms Boyle	8BIm
04/03/2013	**Reassurance given** O/E temp 36.5 , RR 20 mt, SAO2 98 %, CVS, resp nad, neck no Ln prewsent/ Ears and throat nad, / plan; for paracetamol and if worsens pl contact NHS 24, if not improved please contact in 1/52.	Dr Bhuvanagiri	8C9
07/04/2017	**Advice about long acting reversible contraception** happy on POP, cosiderign futher preg, aware caustion on higher dose mirtaz, wants to stay on higher dose even though wt gain. bladder bowe lOK , smear due next may. declines all options	Dr Sheppard	8CAw
23/06/2017	**Advice about long acting reversible contraception** sore nose ? cold sore, warned to stop nsaid if gi problems or wheeze develops , , cosnidering conception next copule of years wants to cont w POP for now	Dr Sheppard	8CAw
16/03/2012	**Advice about long acting reversible contraception**	Dr Paton	8CAw
04/02/2010	**Advice about long acting reversible contraception** priority=2	Dr Wilson	8CAw
21/01/2010	**Patient reg. form sent to HB** priority=1	Mrs Rogers	9123
22/01/2010	**Pat. GP7B/GP8B card from HB** priority=1	UnknownUser	9124
03/02/2010	**Patient MRE received from HB** priority=1	Mrs Rogers	9125
21/01/2010	**Notes summary on computer**	Ms Boyle	9344
21/08/2012	**Scottish - ethnic category 2001 census**	Ms Reid	9i21
24/05/2013	**Alcohol screen - fast alcohol screening test completed**	Ms Boyle	9k16
29/04/2014	**Alcohol screen - fast alcohol screening test completed**	Ms Bannachan	9k16
09/07/2015	**Alcohol screen - fast alcohol screening test completed**	Dr Connolly	9k16
09/07/2015	**Brief intervention for excessive alcohol consumptn completed**	Dr Connolly	9k1A
29/04/2014	**Brief intervention for excessive alcohol consumptn completed**	Ms Bannachan	9k1A
29/04/2014	**Brief intervention for excessive alcohol consumptn completed** discussed LFTs improving but not normal last time, is aiming for wt loss, also advised to try and reduce alcohol, rRPT LFTS NEXT TIME due mirtaz.	Dr Sheppard	9k1A
14/06/2013	**Brief intervention for excessive alcohol consumptn completed**	Dr Sheppard	9k1A
14/06/2013	**Brief intervention for excessive alcohol consumptn completed**	Dr Sheppard	9k1A
21/08/2012	**Brief intervention for excessive alcohol consumptn completed** . arrange review if worse or not getting better	Dr Sheppard	9k1A
08/08/2013	**Telephone encounter** has pain in her back finding it hard to breath 316 2392/ / back pain sicne am, no red flags , full control on the urination and bowels, mild diarrhoea, concerend this may be pneumonia ended up inn the hosptial inn the past, sometimes hard to breath, but no cough or fever, lives with boy friend , offered a HV if she wishes, but tired to convince may not serious problem and by talking to her she has no problems with breathibng. But patient not keen for a HV either by me or Dr. Wilson today and only wants to talk to Dr. ES , thinks she can only knows her conditon, informed Dr. MW.	Dr Bhuvanagiri	9N31
10/10/2014	**SMS text sent to patient** Initial consent-to-message request received		9N3G
23/03/2021	**SMS text sent to patient** We are receiving a huge amount of phone calls regarding repeat prescriptions. Having requested a prescription please wait 48hrs then collect from the nominated pharmacy. Do not call us unless your prescription is not with your pharmacy after 48hrs. Please note Boots in health centre ask for 72hrs before collecting.		9N3G
17/03/2021	**SMS text sent to patient**		9N3G
04/06/2018	**Did not attend - no reason**	Ms Reilly	9N42
20/12/2012	**DNA hospital appointment** - GAMH	Ms Bannachan	9N4H
01/11/2018	**Police domestic incident report received (REVIEW)**	Dr Sheppard	9NDJ
14/08/2011	**Cervical smear defaulter** Exclusion From SCCRS Until 14/11/2013. Reason: Defaulter	Ms Boyle	9O8S
21/01/2010	**White Scottish** : priority=2	Mrs Rogers	9S13
18/08/2020	**Pityriasis versicolor (REVIEW)**	Dr Sheppard	AB10

14/11/2019	**Anxiety with depression (REVIEW)**	Dr Roberts	E2003
10/06/2019	**Anxiety with depression (REVIEW)**	Dr Roberts	E2003
18/02/2019	**Anxiety with depression (REVIEW)**	Dr Receveaux	E2003
01/11/2018	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
17/05/2019	**Anxiety with depression (REVIEW)**	Dr Roberts	E2003
17/07/2018	**Anxiety with depression (REVIEW)**	Dr Morrison	E2003
15/08/2018	**Anxiety with depression (REVIEW)**	Dr Receveaux	E2003
25/09/2018	**Anxiety with depression (REVIEW)**	Dr Fleck	E2003
18/03/2021	**Anxiety with depression (REVIEW)**	Dr Roberts	E2003
23/03/2021	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
16/03/2021	**Anxiety with depression (REVIEW)**	Dr Roberts	E2003
16/03/2021	**Anxiety with depression (REVIEW)**	Dr Roberts	E2003
25/07/2011	**Anxiety with depression**	Ms Boyle	E2003
26/07/2011	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
29/07/2011	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
30/08/2011	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
20/09/2011	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
23/06/2017	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
04/01/2018	**Anxiety with depression (REVIEW)**	Dr Roberts	E2003
10/03/2017	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
28/06/2013	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
14/06/2013	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
01/08/2013	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
29/04/2014	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
18/03/2014	**Anxiety with depression (REVIEW)**	Dr Sheppard	E2003
29/04/2014	**Alcohol problem drinking (REVIEW)**	Dr Sheppard	E23-2
16/03/2021	**Alcohol problem drinking (REVIEW)**	Dr Roberts	E23-2
16/03/2021	**Alcohol problem drinking (REVIEW)**	Dr Roberts	E23-2
02/09/2019	**Alcohol problem drinking (REVIEW)**	Dr Sheppard	E23-2
16/09/2019	**Alcohol problem drinking (REVIEW)**	Dr Roberts	E23-2
12/12/2019	**Alcohol problem drinking (REVIEW)**	Dr Sheppard	E23-2
23/10/2020	**Alcohol problem drinking (REVIEW)**	Dr Sheppard	E23-2
10/12/2020	**Alcohol problem drinking (REVIEW)**	Dr Roberts	E23-2
15/05/2015	**O/E Cervix: transitional zone seen**	Dr Sheppard	EMISHGT62
16/03/2021	**Substance misuse of Cannabis (REVIEW)**	Dr Sheppard	EMISNQND9
16/03/2021	**Substance misuse of Cannabis (REVIEW)**	Dr Roberts	EMISNQND9
23/03/2012	**Benign essential tremor (REVIEW)**	Dr Sheppard	F1310
01/08/2013	**Dyspepsia (REVIEW)**	Dr Sheppard	J16y4
23/03/2012	**Hair loss (REVIEW)**	Dr Sheppard	M2400-2
05/04/2012	**Hair loss (REVIEW)**	Dr Sheppard	M2400-2
08/02/2021	**[D]Seizure NOS (REVIEW)**	Dr Tran	R003z-1
22/12/2020	**[D]Seizure NOS (REVIEW)**	Dr Roberts	R003z-1
05/04/2012	**Overdose of drug (REVIEW)**	Dr Sheppard	SL-5
05/04/2012	**Overdose of drug (REVIEW)**	Dr Sheppard	SL-5
17/04/2012	**Overdose of drug (REVIEW)**	Dr Sheppard	SL-5
22/12/2020	**Assault by bite of human being (REVIEW)**	Dr Sheppard	TLxy0
24/05/2007	**[V]Rabies vaccination** ACWY priority=2	Ms Fergusson	ZV045

Consultations

21/01/2010	Dr Anne McGinley at Easterhouse Health Centre
History	White Scottish : priority=2
	Light drinker - 1-2u/day Alcohol Intake$$.clm - Repeat after an Interval (diary entry deleted) (Not Known)
	Never smoked tobacco Smoker$$ Status.clm - No Action Required
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21/01/2010	Mrs Donna Rogers at Easterhouse Health Centre
History	Automatically generated by transaction priority=2
Problem	**Patient reg. form sent to HB** priority=1
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22/01/2010	UnknownUser at Easterhouse Health Centre
History	Automatically generated by transaction priority=2
Problem	**Pat. GP7B/GP8B card from HB** priority=1
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03/02/2010	Mrs Donna Rogers at Easterhouse Health Centre
History	Automatically generated by transaction priority=2
Problem	**Patient MRE received from HB** priority=1
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04/02/2010	Dr Marie Wilson at Easterhouse Health Centre
	Sore anterior chest wall. RTA 7 months ago. Sore LAST 1-2 weeks. Finds it

History	hard to sleep because of pain. Pain over sternum. Has never had semar. Will make appt with pracitc nures. Requests OCP HAS BEEN TAKING CILEST FROM PROEVIOUS GP. Happy with OCP for contraception. priority=2
	Advice about long acting reversible contraception priority=2
	Systolic blood pressure
	Diastolic blood pressure
	O/E - BP reading normal B P Screening$$.clm - Repeat after an Interval
	(diary entry deleted) (Not Known)

04/02/2010	Ms Marian Fergusson at Easterhouse Health Centre
History	Low dose diphtheria, tetanus and inactivated polio vaccinati priority=2
	First hepatitis A and typhoid vaccination priority=2
	[V]Rabies vaccination ACWY priority=2
	1st hepatitis B vaccination priority=2
	2nd hepatitis B vaccination priority=2
	3rd haemophilus B vaccination priority=2
	BCG vaccination priority=2
Problem	**At risk of physical abuse** priority=1
Problem	**Death of mother** age 29 MI
Problem	**Child: clinical psychologist** in care a lot as a child Sexualised behaviour as a child priority=1
History	First DTP (triple)+polio vacc. 1st Primary Immunis.$$.clm - Repeat after an Interval In GP care
	(diary entry deleted) (Not Known)
	Second DTP (triple)+polio vacc 2nd Primary Immunis.$$.clm - Repeat after an Interval In GP care
	(diary entry deleted) (Not Known)
	Third DTP (triple)+polio vacc. 3rd Primary Immunis.$$.clm - Repeat after an Interval In GP care
	(diary entry deleted) (Not Known)
	Booster DT(double)+polio vacc. Preschool Immunis.$$.clm - No Action Required In GP care
	Measles/mumps/rubella vaccn. Mmr Immunis.$$.clm - No Action Required In GP care
	First Meningitis C Vaccination Meningitis C Imm.clm - No Action Required In GP care

05/02/2010	Ms Suzanne Reid at Easterhouse Health Centre
History	chest & sternum xray - normal priority=2
	Plain x-ray of chest normal priority=2
	Plain X-ray sternum normal priority=2

25/03/2010	Ms Suzanne Reid at Easterhouse Health Centre
History	OOH - EYE INFECTION priority=2

26/03/2010	Dr Emma Sheppard at Easterhouse Health Centre
History	CONJUCTIVITIS:now bilat red eyes, stcuk lids in ams, OTC ? chloramphenical "rubbish" want sstonger abtic, feels she is low risk STI, try fusidic acid then see doc w OTC bottle if no better. LVS too priority=2

21/04/2010	Ms Registrar. at Easterhouse Health Centre
History	glass cut to thumb and index fingure 4 days ago 2stitches to thumb but tight sterisrips to index fingure. thumb ok but index fingure sore ,sore to touch, says throbbing. pus came out on removing steristrips and pain subsided 1.5 cm laceration on pulp of distal phalynx.cleaned ,card for treatment room for dressing, antibiotics.c/o swellingon rt side of face for long time nothing visible to see to make app priority=2

08/07/2010	Dr Marie Wilson at Easterhouse Health Centre
History	? Benign essential tremour. Alcohol helps. Only once weekly. No drugs no loss of consciousness. No adverse effect on life / skills etc. Options discussed. priority=2

13/08/2010	Dr Marie Wilson at Easterhouse Health Centre
History	SCI Electronic Referral priority=2
	Referral for further care Refered To: Glasgow Royal Infirmary, NHS. Referral Type: Out Patient. Speciality Type: Neurology. Referral Nature: Investigate. ,

	Referral Reason: Essential tremour ?
13/08/2010	Dr Marie Wilson at Easterhouse Health Centre
History	Tremour hands. Most days. Sounds like benign essential tremour. Does not stop her daily activities but finds very annoying / embarassing. Propranalol made lirrle difference. Would like to stay on this meanting. Refer Neurology for assessment firs before considering primidone and to consider other alternatives. Smear discussed. priority=2
25/10/2010	Ms Linda Hutchison at Easterhouse Health Centre
Comment	dna'd gri neurology
25/10/2010	Ms Liz Bannachan at Easterhouse Health Centre
History	DNA - Neurology priority=2
31/12/2010	Dr Marie Wilson at Script Request
History	Request for cilest Last BP check Feb - see for next script.
Medication	Cilest Tablets 63 tablet 1 Tab Daily AS DIRECTED
31/01/2011	Dr Joy Rafferty at Easterhouse Health Centre
Problem (FIRST)	**Death of father**
History	dad died last week, was in hospital but unexpected as planning for him to get home. not working as was dads carer. shocked by news. numb. funeral on weds. aunt has been helpign arrange but upset with aunt for saying she is next of kin. lives alone, mum also dead, has brother but he is in jail. has friends she can talk to , going to see one today. wanting sick line for job centre and something to help her sleep. not sleeping, mood low, no thoughts of self harm
Medication	Temazepam Tablets 10 mg 7 TABLET ONE TO BE TAKEN AT NIGHT
Examination	very quiet, not saying much unless asked direct questions, seems shocked
Result	short course sleeping tablets, review 1 week, med 3 - 2 weeks, bereavement. offered cruse, not wanting to talk to anyone she doesn't know. worsening advice given
31/01/2011	Ms Linda Hutchison at Data Entry
Examination	Blood pressure reading 112/83 mm Hg Ex-Cigarette Smoker, 10 cigs/day (past) O/E - height, 158 cm O/E - weight, 57 Kg Body Mass Index, 22.83 Ideal Weight, 57.42 Kg
Result	ht wt bp and smoking done
16/02/2011	Dr Marie Wilson at Script Request
History	propranolol
31/03/2011	Dr Marie Wilson at Easterhouse Health Centre
History	propranolol
13/04/2011	Dr James Curran at Easterhouse Health Centre
Medication	Cilest Tablets 126 tablet 1 Tab Daily
05/05/2011	Dr Marie Wilson at Script Request
History	propranolol
07/06/2011	Dr James Curran at Script Request
Medication	Propranolol Hydrochloride Tablets 40 mg 100 TABS 1 Tab 3 times daily
15/06/2011	Dr Anne McGinley at Telephone Consultation
History	07769733984 fell last night thinks cracked rib no problems breathing. fell climbing over veranda, not high. pain on movement, no analgesia yet, no other resp symptoms. advised re STI, poss fracture. will take analgesia, make appt for tomoro. worsenning advice.
Medication	Co-Codamol 8/500 Tablets 32 tablet ONE OR TWO TO BE TAKEN FOUR TIMES A DAY

16/06/2011	Dr Marie Wilson at Easterhouse Health Centre
History	Fell on Tuesday. Bruised over hip and side. Mobility normal but is sore.
Medication	Diclofenac Sodium E/c tablets 50 mg 28 tablet ONE TO BE TAKEN THREE TIMES A DAY WITH OR AFTER FOOD
	Co-Codamol 30/500 Tablets 60 tablet TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)
History	Hay fever. Mainly nasal symptoms.
Medication	Beclometasone Aqueous nasal spray 50 micrograms/actuation 400 DOSE TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY
28/06/2011	Ms Suzanne Reid at Data Entry
Comment	OOH - LEFT BREAST PAIN
12/07/2011	Dr James Curran at Easterhouse Health Centre
History	low mood 6m mood swings poor sleep since father died. brother in prison no close family PH abuse as child.wondering about trackign down abusers. with neighbour. occ alcohol street valium to help her sleep. occ episodes of getting aggressive. refer cmht Rx see 3-4w MED3 4w 'low mood/anxiety'
Examination	sl flat slow speech
Medication	Citalopram Hydrobromide Tablets 10 mg 28 tablet 1 Tab Daily WEKLY DISPENSE
	Beclometasone Aqueous nasal spray 50 micrograms/actuation 180 dose TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY
	Cetirizine Hydrochloride Tablets 10 mg 30 TABS 1 Tab Daily
	Propranolol Hydrochloride Tablets 40 mg 100 TABS 1 Tab 3 times daily
19/07/2011	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Death of father**
History	feels drowsy and spaced out on tabs.
Examination	flat, weepy, feels unsafe on own w vague suicidal ideas though no formal suicdal plans or PMHx DSH.
Medication	Fluoxetine Hydrochloride Capsules 20 mg 10 capsule ONE TO BE TAKEN EACH DAY
Comment	declines phone nos. info to CMHT : Wendy has felt drowsy on citalopram and wanted to stop this + try fluox. (though co presctription of antihistamine may play a part) . She feels unsafe on her own with suicidal ideas but no plans and no past history. She is socially isolated due to death/imprisonment of key family members but does have 2 neighbours who spend a lot of time with her when she feels unsafe. see 7-10 d + PRN
25/07/2011	Ms Liz Bannachan at Data Entry
Examination	HAD scale: anxiety score, 11 /21
	HAD scale: depression score, 13 /21
Additional	Depression screening using questions
26/07/2011	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Anxiety with depression**
29/07/2011	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Anxiety with depression**
History	still feels spaced out even though off antihist. , suggestive of depersonilisation consistent w marked social stressors so med 3 A&D 4w, see then + PRN. wanting benefit advice and advice re prison visiting (gets to see bro 3 x/mnth) > sighposting to community resources. no formal DSH plans, wants to cont fluox. seems organised in thought, reassured no psychosis apparent
Examination	rash under arms and thighs ? allergic ??? erythrasma, stop shaving, empirical antifungal To arrange review if worse or not getting better
Medication	Miconazole Nitrate Cream 2 % 30 GRAM APPLY TWICE DAILY CONTINUING FOR 10 DAYS AFTER LESIONS HAVE HEALED
	Fluoxetine Hydrochloride Capsules 20 mg 28 capsule ONE TO BE TAKEN EACH DAY DISPENSE FORTNIGHTLY
11/08/2011	Dr Dalila Malek at Easterhouse Health Centre
History	Repeat prescription Came to collect Med 3, see below. Med 3 copy kindly issued by Dr Henderson this morning, given to patient. Also requested for cetirizine and propranolol, issued on acute as previously.
11/08/2011	Dr Gayle Henderson at Data Entry

History	req copy of sick line (lost) dated 9/08/11 for 4 weeks
Comment	MED 3 issued to pt on 29/7/11 for 4 weeks. have reisued a copy of this med 3 (anxiety and depression) from 29/7/11 to 26/8/11.

14/08/2011 00:00	Ms Kay Boyle at General Practice Surgery
Comment	Cervical smear defaulter Exclusion From SCCRS Until 14/11/2013. Reason: Defaulter

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26/08/2011	Dr Emma Sheppard at Data Entry
Problem (FIRST)	**Overdose of drug**
Medication	Fluoxetine Hydrochloride Capsules 20 mg 28 capsule ONE TO BE TAKEN EACH DAY WEEKLY DISPENSE
History	OD of SSRI 4d ago, admitted hosp, self Dx before saw psych liason. no suicidal plans now, with Barnardos Marie Paton support person,sees her weekly. has been offered psycho Tx by barnardos

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26/08/2011	Ms Suzanne Reid at Data Entry
Examination	HAD scale: anxiety score, 15 /21
	HAD scale: depression score, 15 /21
Additional	Depression screening using questions

30/08/2011	Dr Emma Sheppard at Phone Encounter
Problem (REVIEW)	**Anxiety with depression**
History	spoke w David Cross duty CMHT (SW) , she has been allocated to SW but he will make this allocation an urgent one. she will be contacted in a fe w days to make an appt within 7d

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30/08/2011	Ms Kay Boyle at Easterhouse Health Centre (13448)
Additional	Anxiety with depression

31/08/2011	Ms Liz Bannachan at Data Entry
Comment	OOH - Sucidal

01/09/2011	Mrs Donna Rogers at Data Entry
Comment	(as per Dr Shepp request) - David Cross from Auchinlea has tried to call patient x2 no answer he has sent letter to patient with urgent appointment for 6th Sept at 10am

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11/09/2011	Ms Suzanne Reid at Data Entry
Comment	ooh recommed chest wall pain for A&E.

20/09/2011	Ms Liz Bannachan at Data Entry
Examination	HAD scale: anxiety score, 11 /21
	HAD scale: depression score, 13 /21
Additional	Depression screening using questions

20/09/2011	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Anxiety with depression**
History	med3 6w, getting lots of helpful input from crisis team, has been ref carr gom and pscyhology. Is not wanting CSA counselling at the moment but is aware that this is available
Examination	on time, wellpresented, looks better
Comment	can phone for next and tabs if feels input ontinuing to help

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28/09/2011	Dr Gayle Henderson at Data Entry
History	propanolol
Medication	Propranolol Hydrochloride Tablets 40 mg 100 TABS 1 Tab 3 times daily

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01/11/2011	Dr Emma Sheppard at Data Entry
History	mood a little more reactive, not sleeping well but functions OK. I would prefer to avoid sleeping tab. denies ideas of DSH, feels safe w 56 tabs fluox CAN phone for next

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16/11/2011	Dr Gayle Henderson at Easterhouse Health Centre

History	cant hear out of left ear for last 2/52. no pain or discharge. no prev ear probs. No fever - otherwise well.
Examination	Looks well. impacted wax in both ears.
Comment	ADvised to use ear drops and avoid cotton buds. Review in 1/52 ? will require ear syringing.
Medication	Olive Oil Ear drops *10 ML PUT THREE TO FOUR DROPS INTO THE AFFECTED EAR(S) TWO TO THREE TIMES A DAY FOR THREE TO FIVE DAYS*

19/11/2011	Ms Suzanne Reid at Data Entry
Comment	OOH - SEIZURES

20/11/2011	Ms Liz Bannachan at Data Entry
Comment	OOH - seizures

05/01/2012	Dr Emma Sheppard at Script Request
History	propranolol fluoxetine, note recent admisiion w ? pneumonia ??? seizures (in retrospect prob rigors), asked To make an appointment
Medication	Propranolol Hydrochloride Tablets 40 mg *42 tablet ONE TO BE TAKEN THREE TIMES A DAY SEE DOC FOR NEXT*

09/01/2012	Dr Dalila Malek at Easterhouse Health Centre
History	attended re: troublesome tremor requests referral to neurology, was in hospital for 6 weeks initially ITU then stepped down to ward 7 ?pneumonia (letter awaited) required trachyostomy and ?pleural fluid aspiration, stated self discharged on monday as was awaiting neurology review re tremor could not wait ?referred while in hospital. states has not been getting propranolol while in hospital hence tremor worse, started it again only on monday. referred to neuro in 2010, DNA letter said never received appointment.
Examination	O/E - BP reading marked resting tremor. Blood pressure reading 111/89 mm Hg , HR 80 reg. temp 36.7, sats 97%, chest clear nill added heared.
Comment	can refer neurology today, I will await further info from admission first, review again for improvement in one week now that started propranolol. worsening advice given.

10/01/2012	Ms Suzanne Reid at Data Entry
Comment	No discharge letter from 20/11/11 as patient self discharged ward 7/16 Resp. 211-0738. pt reports was in coma for 5 weeks was also in ward 52, 232-0517. I will try and find out some clinical info. Dr ES

11/01/2012	Dr Dalila Malek at Easterhouse Health Centre
History	phoned Ward 7 on 232 0740 for more infor re: recent admission: spoken to Dr E.Johnstone who kindly reviewed Wendy's notes: admitted 20th of novemebr SOB chest discomfort and diarrhoea. treated as CAP, deteriorated and transferred to ITU on the 23rd bilat consolidation, needed haemodialysis, transferred to leister for ECMO. came back to GRI a week afterwards, stepped down to ward 7 on the 20th of December had deranged LFTs USS NAD thought to be due to ECMO. odd tremor noted referred neurology, seen by Dr MIller asked for blood test inclu urinary copper, vasculitis screen done in GRI also recommended investigations for Huntington's. plan was to see her again in one week, self discharged on Monday 02/01/12 prior to that. On discharge was stable from resp point of view, was awaiting neurology review and plans before official discharge. on self-discharge latest bloods CRP 3, WCC7, LFTs improved, antibiotics all completed before discharge. no propranolol on cardex. consultant Dr Chalmers.
Comment	Plan: review as planned, to contact Dr Miller and discuss plans. await written discharge summary.

11/01/2012	Dr Marie Wilson at Easterhouse Health Centre
History	See discharge letter. ARDS - very ill in ITU - admitted end of November for 6 weeks.

16/01/2012	Dr Dalila Malek at Easterhouse Health Centre
History	secretary at SGH, Dr Miller to phone me back this PM.

16/01/2012	Dr Dalila Malek at Easterhouse Health Centre
History	In for review, feels better. tremor slightly better but still there. Could not get hold of Dr Miller, was told she has a clinic at GRI this PM will try phoning again later on, write letter if I don't get through. Also regarding F/U from resp point of view wendy was told by hospital she will have appointment in 4-6 weeks from

	discharge, **chase if not received,** still awaiting discharge summary.
Comment	requesting letter, said asked Money Adviser for home visit as was told by hospital not to go out for at least one to two months, they requested a doctor's letter. will discuss with Dr Wilson first. phone number above correct.

18/01/2012	Dr Dalila Malek at Easterhouse Health Centre
New Referral	(NHS), , , , EMISSPR400: Neurology referral (SCI Gateway Referral)

14/02/2012	Dr Marie Wilson at Easterhouse Health Centre
History	propranolol and fluoxetine
Medication	Fluoxetine Hydrochloride Capsules 20 mg *28 capsule ONE TO BE TAKEN EACH DAY*

27/02/2012	Dr Elizabeth Paton at Script Request
History	propanolol - still not been in for review as requested. awaiting neurology appointment. 1 week supply given in meantime

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03/03/2012	Ms Liz Bannachan at Data Entry
Result	Hepatitis C antibody test negative Hepatitis B screening test negative

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16/03/2012	Mrs Donna Rogers at Data Entry
Comment	U&E,LFT - Appointment with GP,Letter Sent

16/03/2012	Dr Elizabeth Paton at Easterhouse Health Centre
History	requesting various tablets 1. fluoxetine - mood up and down, has no family, some support from friends but most of time at home alone, does have a boyfriend that sometimes stays. has been taking 2x20mg rather than 1 as prescribed. wishes to stay at 2x20mg as felt that 1 previously ineffective. 2. contraceptive pill - happy on current pill, no problems. BP ok in Jan 3. propranolol - dues to see neruologist on monday 19/3/12, can continue until neuro review.
Medication	Fluoxetine Hydrochloride Capsules 20 mg *56 CAPSULE TWO TO BE TAKEN DAILY*
Additional	Advice about long acting reversible contraception

Problem (FIRST)	**Cough (Mild, Occasional)**
History	cough for last 2 days, non-productive, systemically well. associated with occasional pain in ribs after coughing. was told by resp to get coughs checked out early.
Examination	temp 35.1, sats 98% on air, hr 80. looks well. throat slightly red, not infected. chest clear
Social	Current non-smoker
Comment	has resp appointment 26/3/12. reassured at present but advised to come back should symptoms worsen.

Problem (FIRST)	**Abdominal pain**
History	upper abdo pain, seems to be mainly RUQ / epigastric area. constant. no urinary / bowel symptoms. often worse after alcohol.
Examination	abdo soft, non-tender. ?palpable liver edge.
Social	slightly vague about alcohol intake but states only at the weekends.
Test Request	U and E, LFTs, Serum amylase level

Problem (FIRST)	**Hair loss**
History	has noticed large clumps of hair falling out recently particularly on brushing hair / in the shower. ran out of time in consultation to discuss further today but will make further appointment for review.

19/03/2012	Ms Liz Bannachan at Data Entry
Comment	FBC, b12, folate, ck & tfts - Normal

20/03/2012	Dr Emma Sheppard at Data Entry
History	gamma gt raised, To make an appointment . letter sent . note I had seen in passing d/w her 16 3 12 re consent to d/w Barnardoes team if we are concernd, eg DNA neuro for exclusion of Huntingtons. she agred

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23/03/2012	Ms Liz Bannachan at Data Entry
Comment	Normal
Result	Serum iron level 12 ug/dL Transferrin level, 3.2 g/l

23/03/2012	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Benign essential tremor**
History	w Barnardoes support (they will not discharge her just now) came for results blodos, lfts grossly abno at time of pneumonia, now normalising > ressured
Medication	Propranolol Hydrochloride Tablets 40 mg *168 tablet ONE TO BE TAKEN THREE TIMES A DAY*
Problem (REVIEW)	**Hair loss**
History	consistent w telogen affluviium, tfts OK, iron studies done (mcv OK but lives on pasta). see once neuro letter in, she implies that they are thinking tremour exac by deconditioning, have ref physio

05/04/2012	Ms Liz Bannachan at Data Entry
Comment	Lfts - liver test up a bit, please come in to discuss this and how you are

05/04/2012	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Overdose of drug**
History	CMHT have contacted and given crisis cotnacts , she declined assemssent today ? as had sandyford appt. d/w duty officer who will try to cotnact boyfirend

05/04/2012	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Hair loss**
History	sl low transferring index but suidical ideas > iron not given yet.
Medication	Gentamicin Ear/eye drops 0.3 % *10 ML ONE OR TWO DROPS UP TO SIX TIMES A DAY, OR MORE FREQUENTLY IF REQUIRED* Amoxicillin Capsules 500 mg *15 CAPSULE ONE TO BE TAKEN THREE TIMES A DAY*
Problem (REVIEW)	**Overdose of drug**
History	5d ago, see urgent ref CMHT,
Test Request	LFTs
Problem (REVIEW)	**Cough (Mild)**
History	Non-smoker 3w, worried this and L Ot ext may precip another pneuminia, sats 98%, chest clear pulse 75 apyrexial but agreed to abtics nonetheless. (incl denies inhaled subs misuse)

17/04/2012 00:00	Ms Kay Boyle at General Practice Surgery
Result	Cervical Cytology
Follow up	(diary entry deleted) (Not Known)

17/04/2012	Ms Suzanne Reid at Easterhouse Health Centre
Comment	Endocervical chlamydia swab - NORMAL

17/04/2012	Dr Emma Sheppard at Data Entry
History	darrren chapman @ barnardos 16+ wishing to discuss pt 332 8580, reref see letter

17/04/2012	Ms Marian Fergusson at Easterhouse Health Centre
History	1st cx smear cx ectopy states she is on the pill has had a recent rx for this chlamydis test done as was cx smear ectopy pt coped very well Beta HCG NEG BP 112/72 CHLAMYDIA TEST ALSO DONE
Examination	Blood pressure reading 112/72 mm Hg
Social	Alcohol consumption, 3 units/week Never smoked tobacco
Additional	Cervical neoplasia screen **(GMS)** Health ed. - exercise

17/04/2012	Dr Emma Sheppard at Data Entry

Problem (REVIEW)	**Has a tremor**
History	anx re feels she has nervbe damage L leg from IV access groin, had d/w neuro OPA mid march, I will chase letter
- - - - - - - - - - - - - - -	
Problem (NEW)	**Abdominal pain**
History	feels due to abbno LFTs, , alcohol advice re gamma gt still rasied
- - - - - - - - - - - - - - -	
Problem (REVIEW)	**Overdose of drug**
History	w barnadoes supprt. boyfriend NOT supprotive. barnadoes will help her chase CMHT. no futher DSH but does have tabs at home.
- - - - - - - - - - - - - - -	
Problem (FIRST)	**Unprotected intercourse**
History	Contraception counselling worried re STi risk vboyfriend, still no cotnraception , asymptomatic but smear, chalmydia and HCG please. +++. barnardoes will support
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19/04/2012	Dr Emma Sheppard at Data Entry
History	nicola @ achinlea said pt should be seen within 14 days
Comment	Wendy asked me to look @ a copy of her DLA application. In this she states that she needs constant supervision due to her risk of suicide and tremour/risk of falls
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23/04/2012	Dr Elizabeth Paton at Data Entry
History	neurological opinion (Dr Shah) - tremors are secondary to anxiety.
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24/04/2012	Dr Elizabeth Paton at Easterhouse Health Centre
History	left earache for several weeks. no associated symptoms. no improvement with olive oil drops since 17/4/12. would like them syringed.
Examination	both ear canals full of soft wax.
Comment	treatment room card given for ear syringing. to continue with olive oil drops until then and will come back for further look at ears if pain continues.
- - - - - - - - - - - - - - -	
History	appt for auchinlea fri 27/4. wendy not received appt letter yet - copy printed for her.
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11/05/2012	Dr Emma Sheppard at Data Entry
Problem (FIRST)	**Furunculosis of external auditory meatus (Left)**
History	reviewed after TR Stuart, syringe diffiuclt, wasx still dry, seems using drops OD only, pain exacerbated by procedure > aborted. the wx removed reveals an inflammed canal ? furuncluosis, impacted dry wax persists > abtics and resyringed after 2 weeks tds drops
Medication	Cerumol Ear drops *11 ML PUT FIVE DROPS INTO THE AFFECTED EAR(S) TWICE A DAY FOR 2 WEEKS*
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06/06/2012	Dr Anne McGinley at Data Entry
History	Propranolol
Medication	Propranolol Hydrochloride Tablets 40 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY PRN*
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06/06/2012	Dr Emma Sheppard at Data Entry
History	see CMHT assessment which finds street benzodiazepine and alcohol misuse to be her primary problem , declined CAT > ref GAMH
Problem (FIRST)	**Substance misuse of Benzodiazepines**
- - - - - - - - - - - - - - -	
Problem (FIRST)	**Alcohol problem drinking**
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07/06/2012	Dr Marie Wilson at Easterhouse Health Centre
History	fINE RASH ON ARMS AND UPPER LEGS ? Prickly heat.
Medication	Cetirizine Hydrochloride Tablets 10 mg *56 TABLET ONE TO BE TAKEN EACH DAY* Crotamiton Cream 10 % *100 GRAM APPLY THINLY TWO TO THREE TIMES A DAY* Fluoxetine Hydrochloride Capsules 20 mg *56 CAPSULE TWO TO BE TAKEN DAILY* Cerumol Ear drops *11 ML PUT FIVE DROPS INTO THE AFFECTED EAR(S) TWICE A DAY FOR 2 WEEKS*

26/07/2012	Dr Elizabeth Paton at Script Request
History	cilest, fluoxetine, propranolol - 1/12 only of pill, needs BP check etc. ? compliance with fluoxetine. to see doctor
Medication	Cilest Tablets *21 tablet 1 Tab Daily AS DIRECTED*
06/08/2012	Dr Marie Wilson at Easterhouse Health Centre
History	Right sided pain over right lower chest wall. Had a cough that settled. No spit. Had Pneumonia in November. Pain not pleuritic. Chest clear.
Examination	O/E - BP reading
	Blood pressure reading 126/81 mm Hg
	O/E - pulse rate 73 beats/minute
Test Request	CXR
07/08/2012	Dr Emma Sheppard at Phone Encounter
Problem (FIRST)	**Letter encounter to patient**
History	was given xray referral yesterday with other pts name on it looking for new form
Comment	Sorry I was not able to get hold of you on the phone. I enclose a new form and apologise for any inconvenience. I can confirm that it was indeed yourself that Dr Wilson planned to arrange XRAY for. Please let us know if you have any further concerns or questions, please see Dr Wilson or myself for the result
08/08/2012	Ms Suzanne Reid at Data Entry
Result	Standard chest X-ray - Please make at an appointment to see us for the result of the Chest Xray at your convenience.
21/08/2012	Dr Emma Sheppard at Data Entry
Problem (FIRST)	**Advice about long acting reversible contraception**
History	O/E - BP reading
Examination	Blood pressure reading 103/67 mm Hg
Comment	Health ed. - alcohol long chat re contra options, , thinking of baby in next yr or so, declies alcohol contacts today, will consider
	Brief intervention for excessive alcohol consumptn completed . arrange review if worse or not getting better
Problem	chest wall pain
History	xray prob OK, message left for radiographer pls advise. Symps progressing to sound GI no red flags.
Examination	sats 99% chest clear HS normal pylse reg 72, I will let her know if needs further resp Ix
22/08/2012	Dr Emma Sheppard at Phone Encounter
Problem (FIRST)	**Letter sent to patient**
History	The specialist Dr Poon says that your chest XRAY is fine, sorry for any unnecessary concern
30/08/2012	Ms Suzanne Reid at Data Entry
History	SORE EAR 2 DAYS AND SORE SIDE 2 MONTHS SEE TUE AS PLANNED AND CALL TOMORROW TO SEEN IF WORST. ES
30/08/2012	Dr Emma Sheppard at Data Entry
History	jackie robertson @ barnardos looking for emergancy appt for pt 332 8580, message left pls return call
04/09/2012	Ms Suzanne Reid at Data Entry
Comment	LFT - Letter Sent, Repeat after an Interval - Send Letter
04/09/2012	Dr Emma Sheppard at Phone Encounter
History	Jackie Robertson from Barnadoes, advocateing re anx about pneumonia recurrance. R pain localised to RUQ, tender epigast and ruq , lots of reflux she thinks due to SSRI, consdier stopping SSRI if not able to reduce drinking. uusss for gall stones, lfts, see 4w, sooner arrange review if worse or not getting better
Examination	pulse 77 sats 98% , ear OK, mouth partially erupted wisdom, appears a little distant ? sl intoxication but denies canabis etc last few days
Medication	Omeprazole Capsules (Gastro-Resistant) 20 mg *42 capsule ONE TO BE TAKEN EACH DAY*

Comment	occ iedas dsh esp when drinking > weekly pick up and advocate alcohol services ++++ again
Medication	Fluoxetine Hydrochloride Capsules 20 mg *56 CAPSULE TWO TO BE TAKEN EACH DAY WEEKLY DISEPNSE PLEASE*

10/09/2012	Dr Emma Sheppard at Data Entry
Problem (FIRST)	**Upper respiratory tract infection NOS**
History	concernd re high risk LRTI
Examination	well apyrex pulse 72 chest clear
Comment	agree prophylactic abtics, esp as also smoker w ? cocaie rel lung damage
Medication	Amoxicillin Capsules 500 mg *15 CAPSULE ONE TO BE TAKEN THREE TIMES A DAY*

13/09/2012	Dr Emma Sheppard at Script Request
History	propranolol - carried over from last night

21/09/2012	Ms Liz Bannachan at Easterhouse Health Centre
Result	U-S abdominal scan - Normal

24/10/2012	Dr Anne McGinley at Data Entry
History	propranolol
Medication	Propranolol Hydrochloride Tablets 40 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY PRN*

30/11/2012	Dr James Curran at Script Request
History	To make an appointment for BP before next
Medication	Cilest Tablets *126 tablet 1 Tab Daily*
	Propranolol Hydrochloride Tablets 40 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY PRN*

20/12/2012	Ms Liz Bannachan at Data Entry
Comment	DNA hospital appointment - GAMH

04/01/2013	Dr Marie Wilson at Script Request
History	CILEST AND PROPRANOLOL
Medication	Cilest Tablets *63 tablet TO BE TAKEN AS DIRECTED*
	Propranolol Hydrochloride Tablets 40 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY PRN*

11/01/2013	Dr Emma Sheppard at Data Entry
Problem (NEW)	**Upper respiratory tract infection NOS**
History	Non-smoker systemically better but still clear productive cough after RTI 26 12 12, cocnern re risk ards recurrnace. , denies inh subs misuse
Examination	O/E - BP reading well apyrexial, pulse 63 reg , capillary refill OK, sats 96%, chest clear
	Blood pressure reading 118/77 mm Hg
Comment	arrange review if worse or not getting better , Rx amoxi

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Problem (NEW)	**Advice about long acting reversible contraception**
History	may conceive yr after next, not keen on l.a.ar.c.. Prob avoid depo p but coil may be an option, discuseed risks benegfits

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14/01/2013	Ms Suzanne Reid at Data Entry
Comment	u&e,lft - normal

14/01/2013	Ms Suzanne Reid at Data Entry
Comment	fbc - normal

14/01/2013	Dr Kathryn Roberts at Easterhouse Health Centre
History	Upper abdomen feels bloated, 'tight and tingly' constantly since yesterday. No vomiting. No indigestion/heartburn symptoms. E+D ok, not feeling feverish, bowels moving ok and pu ok. Worried about liver as ?told prob with liver when in hosp 2011 with pneumonia - can't see this in notes/letters. Does drink heavily every weekend - vomits with it. Discomfort in upper abdo not related to respiration but can be worse on coughing or on bending over. Started

	antibiotics yesterday for cough/urti. No haemoptysis/sob/chest pain.
Examination	O/E - BP reading
	Blood pressure reading 118/86 mm Hg Temp 36.3 Pulse 60 reg. Sp02 98%on air. Looks well, crt<2secs. HS normal. Chest clear. Abdo soft, mild epigastric ruq tenderness on deep palpation. no masses and no hepatomegaly. Bs normal.
Medication	Omeprazole Capsules (Gastro-Resistant) 20 mg *14 capsule ONE TO BE TAKEN EACH DAY*
Comment	?musculoskeletal pain from coughing ?gastritis from alcohol. No nsaid use. Check fbc, lfts. Start ppi. Continue antibiotics, paracetamol prn. Avoid alcohol and ibuprofen. Review few days, worsening advice given meantime

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14/01/2013	Dr Anne McGinley at Data Entry
History	swollen stomach req advice - 07733979634. since uesterday pain over ? epig/liver. constant, describes as severe, no analgesia. relates to Abiotic. worse on coughing. intake Ok, no vomiting, alcohol excess 3 days ago. see doc.

16/01/2013	Dr Ashok Bhuvanagiri at Easterhouse Health Centre
Comment	FBC normal.

11/02/2013	Dr Marie Wilson at Script Request
History	propranolol

04/03/2013	Dr Ashok Bhuvanagiri at Easterhouse Health Centre
History	c/o PAIN INN THE RT. SIDE OF CEHST SINCE SHE GOT PNEUMONIA/ NO SOB/ NOT PPTED SDFBY EXERSION/EMOTION. NO COUGH/ SOMETINES SPIT. NO THER PROBLEMS.
Examination	Reassurance given O/E temp 36.5 , RR 20 mt, SAO2 98 %, CVS, resp nad, neck no Ln prewsent/ Ears and throat nad, / plan; for paracetamol and if worsens pl contact NHS 24, if not improved please contact in 1/52.
Medication	Paracetamol Tablets 500 mg *32 tablet TWO TABLETS TO BE TAKEN FOUR TIMES DAILY*

18/03/2013	Dr Marie Wilson at Script Request
History	propranolol
Medication	Propranolol Hydrochloride Tablets 40 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY PRN*

23/05/2013	Dr Ashok Bhuvanagiri at Easterhouse Health Centre
History	C/O injury to the left anke 1/52 ago, not happened at work, painsul ankle sinc ethen, but can walk and put on the shoes.
Examination	O/E not inflammed not tender joint, can walk , only pain in the med. malleolus/ plan; piroxicom gel and paracetamol, physio if not improved in 2/52, r/v again if not improved in 4/52.
Medication	Piroxicam Gel 0.5 % *60 gram APPLY 3 TIMES A DAY*

23/05/2013	Ms Suzanne Reid at Data Entry
Comment	patient scored 11 in fasting questionnaire - message sent to dr ashok.

24/05/2013	Ms Kay Boyle at Easterhouse Health Centre
Examination	Fast alcohol screening test, 11 /16
Comment	Please discuss alcohol consumption with pt.
Result	Alcohol screen - fast alcohol screening test completed

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28/05/2013	Dr Emma Sheppard at Data Entry
History	propanolol cilest, needs To make an appointment re FAST etc
Medication	Propranolol Hydrochloride Tablets 40 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY PRN*
	Cilest Tablets *21 tablet ONE A DAY SEE GP BEFORE NEXT PLEASE*

04/06/2013	Dr Emma Sheppard at Data Entry
History	07500386935 carer called to let us no re concerns about pts odd behaviour
Comment	friend and "carer" Louise says not taking antidepressants , is considering restart. Wendy is aware of this phonecall and OK for us to share concerns. now not bothering to get dressed, not caring for herself. Wendy lives alone +/- boyfirend . Louise doesn't believe she is at risk overdose, feels deterioration down to stopping SSRI, suggest appt. L will help facilitate. (note high fast score and prev drug misuse etc, not mentioned to L)

14/06/2013	Mrs Donna Rogers at Data Entry
Examination	HAD scale: anxiety score, 15 /21
	HAD scale: depression score, 13 /21
Additional	Depression screening using questions
14/06/2013	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Anxiety with depression**
History	With louise, feels a little better back on SSRI, denies reg alcohol. no suidical plans. ? suicidal ideas but feels low risk "because my boyfirend takes the tabs". declines reref support servicess, doesn't percieve any xs of subs such as alcohol. see 2w + PRN
Examination	well presented but sl withdrawn
Comment	Brief intervention for excessive alcohol consumptn completed
Medication	Fluoxetine Hydrochloride Capsules 20 mg *14 capsule ONE TO BE TAKEN EACH DAY*
	Beclometasone Aqueous nasal spray 50 micrograms/actuation *200 DOSE TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY*
Comment	Brief intervention for excessive alcohol consumptn completed
28/06/2013	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Anxiety with depression**
History	bit better. feels aclohol imrpioved. feels main prob is unresolved bereavement issues. bro in prison 13yrs and doesn't want her to spread dads ashes til he comes out. didn't get on w GAMH when barnardoes ended, but nisses the support
Comment	info re cruse etc . see 4w. suicidal ideas occ so gives tabs to boyfriend
Medication	Fluoxetine Hydrochloride Capsules 20 mg *30 capsule ONE TO BE TAKEN EACH DAY*
Problem (NEW)	**Advice about long acting reversible contraception**
Examination	O/E - weight 74 Kg
History	Non-smoker ,
	Body Mass Index 29.5 kg/m2
Comment	wt steady, hard to lose as doesn't get out due to low mood/stress. contemplating conception in 1yr, svoid SSRI at that time. prefers COCP meanwhile, aware options
Medication	Cilest Tablets *126 tablet AS DIRECTED*
12/07/2013	Dr Marie Wilson at Easterhouse Health Centre
History	Sore throat, fever for past week. Throat red. Ear soft wax. Chest clear. oPTIONS DISCUSSED.
Medication	Phenoxymethylpenicillin Tablets 250 mg *56 tablet TWO TABLETS FOUR TIMES DAILY*
16/07/2013	Dr Ashok Bhuvanagiri at Easterhouse Health Centre
Medication	Propranolol Hydrochloride Tablets 40 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY PRN*
30/07/2013	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Death of father**
History	will phone cruse
Examination	allergic to "sliimming patches" > contact dermatitis abdo
Medication	Hydrocortisone Cream 1 % *30 GRAM APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE DAILY*
	Peptac Liquid (aniseed) *100 ml 10-20ML TO BE TAKEN AFTER MEALS AND AT BEDTIME*
Problem (FIRST)	**Dyspepsia**
History	?? occ malaema but no other red flags. friends tabs help
Examination	abdo OK but wt gain
Comment	urgent appt made for results, try peptac meanwhile
Test Request	FBC, LFTs, TFTs, Ferritin
01/08/2013	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Dyspepsia**
History	no further black stool. Close questioning exludes classic malaena. Hgb OK. had been taking friends diclofenac. stop this, se after 3w PPI as peptac no help

Medication	Omeprazole Capsules (Gastro-Resistant) 20 mg *21 capsule ONE TO BE TAKEN EACH DAY*
- - - - - - - - - - - - - - -	
Problem (REVIEW)	**Anxiety with depression**
History	anx symps persist despite fluox 8w. propran not working > stop this. see 3w + PRN. must be seen w sample if further malaena
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08/08/2013	Dr Marie Wilson at Easterhouse Health Centre
History	Never smoked tobacco Sore across back. Not breathless. Chest clear. Temperature nomral. PO2 99 Pulse 90 pASIN COMING AND GOING. Has also had diarrhoea today. Has been to toliet 4-5 times. No blood in diarrhoea. No vomiting. cxr
Examination	O/E - BP reading
	Blood pressure reading 116/77 mm Hg Abdomen soft. No guarding or rebound. No tenderness on examination. Likely viral infection?. nO OTHER HOUSEHOLD CONTACTS AFFECTED.
Medication	Paracetamol Tablets 500 mg *32 tablet TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)*
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08/08/2013	Dr Ashok Bhuvanagiri at Easterhouse Health Centre
Comment	Telephone encounter has pain in her back finding it hard to breath 316 2392/ / back pain sicne am, no red flags , full control on the urination and bowels, mild diarrhoea, concerend this may be pneumonia ended up inn the hosptial inn the past, sometimes hard to breath, but no cough or fever, lives with boy friend , offered a HV if she wishes, but tired to convince may not serious problem and by talking to her she has no problems with breathibng. But patient not keen for a HV either by me or Dr. Wilson today and only wants to talk to Dr. ES , thinks she can only knows her conditon, informed Dr. MW.
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08/08/2013	Dr Marie Wilson at Easterhouse Health Centre
History	Has pain in her back finding it hard to breath 316 2392 - Sore back , diarrhoea, feeling more breathless. Offered to see today. Will come down to surgery.
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09/08/2013	Dr James Curran at Easterhouse Health Centre
History	still having diarrhoea more SOB today and pain both sides of ribs and anterior chest also felt SOB when walking some symprtoms similaer to episode of pneumonia she had in 2001 -was on ECMO intubated
Examination	p 90 rr 20 sat 98% t 37.2 chest clear
Comment	prob viral but patient very concerned in view of similarity to previous episode - refer medical receiving
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20/08/2013	Dr Emma Sheppard at Data Entry
History	diah, back pain sob settled on amoxi Rx in A&E for "urine infection". MSU incomclusive > rpt. crp d dimer high > rpt
Examination	pulse 75, sats 98%, well apyrexial, no clincial VTE, arrange review if worse or not getting better . cosndier STI screen if pyuria persists (no symps or known contacts)
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27/09/2013	Dr Emma Sheppard at Script Request
History	cilest, bp o K RECENTLY,COUNSELLED RE long acting alts in June
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27/09/2013	Dr Emma Sheppard at Script Request
History	propranolol and fluoxetine
Medication	Propranolol Hydrochloride Tablets 40 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY CAN BE ISSUED AS HALF 80MG TABLET TRHEE TIMES A DAY*
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24/10/2013	Dr Ashok Bhuvanagiri at Easterhouse Health Centre
Comment	fluoxetine propranolol
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22/11/2013	Dr J Curran at Script Request
Medication	Fluoxetine Hydrochloride Capsules 20 mg *30 capsule ONE TO BE TAKEN EACH DAY*
	Propranolol Hydrochloride Tablets 40 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY CAN BE ISSUED AS HALF 80MG TABLET TRHEE TIMES A DAY*
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03/12/2013	Dr Elizabeth Paton at Easterhouse Health Centre

History	had the cold for 2 weeks. was getting better but back again now. sore throat / head / ears / runny nose / cough. taking paracetamol and cough syrup.
Examination	35.2 sats 96% pulse 78 ears - both waxy, unable to visualise TMS, runny nose, sniffing, chesty cough heard. chest clear on auscultation
Comment	URTI - possibly 2 separate illnesses one after the other. continue current management.

16/12/2013 Dr Elizabeth Paton at Script Request

History fluoxetine propranolol

20/01/2014 Dr Elizabeth Paton at Script Request

History propranolol and fluoxetine

Medication Propranolol Hydrochloride Tablets 40 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY CAN BE ISSUED AS HALF 80MG TABLET TRHEE TIMES A DAY*

Fluoxetine Hydrochloride Capsules 20 mg *30 capsule ONE TO BE TAKEN EACH DAY*

13/02/2014 Dr Marie Wilson at Script Request

History Fluoxetine and Propranolol

25/02/2014 Dr Emma Sheppard at Data Entry

History	2 months of "itching inside" and epigastric pain, veryworried re this and abdo swelling, exac of long standing insomnia. no red flags, not drug seeking. denies subs misuse/xs caffeine now.
Examination	no rash, no massess (abdo fold cosnstnet w wt gain) is teder epigastrium, no jaundice. Mood guarded and worried looking. I was NOT able to identify I.C.E.
Comment	tried to reassure ++. consider switch to mirtaz or tricylc, try empirical PPI 1w and review ?? for bloods
Medication	Omeprazole Capsules (Gastro-Resistant) 20 mg *7 capsule ONE TO BE TAKEN EACH DAY*

25/02/2014 Dr Emma Sheppard at General Practice Surgery

Additional WML document Insomnia (Poor Sleep) Printed

04/03/2014 Ms Linda Hutchison at Easterhouse Health Centre

Comment LFTs raised. (has appt with dr s pre-arranged)

04/03/2014 Dr Emma Sheppard at Data Entry

History symps same, req maalox for abdo (cannot tol peptac). req LFTs, see w result. ALo wanted to switch fluox, see 2w to titrate mirtaz, start in 2d time

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18/03/2014 Ms Liz Bannachan at Data Entry

Result Hepatitis C antibody test negative

18/03/2014 Dr Emma Sheppard at Data Entry

Problem (REVIEW) **Has a tremor**

History a little better on propran, asking for alterntaive, recommend general increase activity

Medication Mirtazapine Tablets 15 mg *56 TABLET ONE TO BE TAKEN AT NIGHT*

Ibuprofen Gel 5 % *30 gram APPLY 3 TIMES A DAY*

Elasticated Tubular Bandage Bp 7.5 cm size D *0.5 m TO BE USED AS DIRECTED*

Propranolol Hydrochloride Tablets 40 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY CAN BE ISSUED AS HALF 80MG TABLET TRHEE TIMES A DAY*

Problem lfts abno

History slightly, consistent w fatty liver? abdo pain a little better on Rx for dyspsp

Comment hep screen as past risk fa though no new ones that W identifies, ferritin

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Problem (REVIEW) **Anxiety with depression**

History sleep a little better w mirtaz, see for next for results

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02/04/2014 Dr Kate Magee at Data Entry

Comment Hepatitis B+C tests negative.

29/04/2014	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Alcohol problem drinking**
History	fast score 7, she does not see this as a problem, in fact mood is good at the moment.
Comment	Brief intervention for excessive alcohol consumptn completed discussed LFTs improving but not normal last time, is aiming for wt loss, also advised to try and reduce alcohol, rRPT LFTS NEXT TIME due mirtaz.
Problem (REVIEW)	**Anxiety with depression**
History	better on mitaz
Examination	O/E - weight 74 Kg
Problem	lfts abnomral
History	hep creen negative
29/04/2014	Ms Liz Bannachan at Data Entry
Comment	message sent to dr sheppard re alcohol fast
29/04/2014	Ms Liz Bannachan at Data Entry
Examination	Fast alcohol screening test, 7 /16
Social	Never smoked tobacco
Result	Alcohol screen - fast alcohol screening test completed Brief intervention for excessive alcohol consumptn completed
26/06/2014	Dr Emma Sheppard at Script Request
History	mirtazapine
02/07/2014	Dr Kate Magee at Script Request
History	mirtazapine
Comment	2 months issued last week.
01/09/2014	Dr Martin Connolly at Easterhouse Health Centre
Comment	mirtazapine, should now be running out. Issued.
05/09/2014	Dr Emma Sheppard at Data Entry
Problem	pre-conception counselling
History	PELVIC PAIN AND NOCturia, urlnalyssis leucs ++
Examination	apyexial pulse 79
Comment	lmp 2w, trying for preg . aware would need to stop propran and consider mirtaz if preg. also tends to alt consipan/diah, blames diet, delcines Rx, arrange review if worse or not getting better . hcg-ve
Medication	Trimethoprim Tablets 200 mg *6 TABLET ONE TO BE TAKEN TWICE A DAY*
History	chest wall pain, not pleuritic no dvt, sats 96%, chest clear, resps normal, capillary refill normal,apyrexial, and sats
Comment	? sl sedated. arrange review if worse or not getting better
22/09/2014	Ms Kay Boyle at Easterhouse Health Centre
Result	Rep.presc. monitoring NOS
14/10/2014	Dr Marie Wilson at Script Request
History	mirtazapine
24/11/2014	Dr Danielle McGurn at Script Request
History	mirtazapine.
Comment	Two weeks early in requesting - monitor ongoing use.
Medication	Mirtazapine Tablets 15 mg *56 TABLET ONE TO BE TAKEN AT NIGHT*
20/01/2015	Dr Martin Connolly at Script Request
Comment	Mirtazapine.

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06/02/2015	Dr Emma Sheppard at Data Entry
History	4 weeks of R chest wall pain and SOBOE, worried re
-	----
26/03/2015	Dr Marie Wilson at Script Request
History	MIRTAZAPINE
-	----
08/04/2015	Dr Martin Connolly at Easterhouse Health Centre
Problem (FIRST)	**Ingrowing great toe nail (Right)**
History	IGTN R great toe. Painful in certain shoes and when touches. Has been for several weeks. Wondering about referral to podiatry.
Examination	Ingrowth entire length of nail on medial side. No infection.
Comment	Likely does require more than simple self care. Self care advice given anyway, will ref podiatry.
-	----
14/05/2015	Dr Marie Wilson at Script Request
History	Mirtazapine
-	----
15/05/2015	Dr Emma Sheppard at Script Request
History	Last menstrual period -1st day 1 5 15
Examination	Cervical smear taken O/E-vaginal speculum exam. NAD O/E - no vaginal discharge
Comment	chaperone offered declined , hard to see os
Additional	O/E Cervix: transitional zone seen
-	----
09/07/2015	Ms Liz Bannachan at Data Entry
Comment	Had score of 8 on alcohol form, seen Dr Connolly 1st before filing in form
-	----
09/07/2015	Dr Martin Connolly at Easterhouse Health Centre
Problem (FIRST)	**Patient pregnant**
History	Prim pregnancy. No problems so far. LMP 22/05/15. EDD 26/02/16. Lives w boyfriend. On mirtazapine and propranolol for tremor.
Examination	O/E - BP reading Blood pressure reading 123/90 mm Hg
Comment	Start folic acid. Refer for ANC. Advised we will likely want to stop mirtaz during pregnancy.
Examination	Fast alcohol screening test, 8 /16
Medication	Folic Acid Tablets 400 micrograms *56 TABLET ONE TO BE TAKEN EACH DAY*
Result	Alcohol screen - fast alcohol screening test completed Brief intervention for excessive alcohol consumptn completed
-	----
09/07/2015	Mr Touchscreen Touchscreen at Touchscreen
History	Ex smoker (Stopped 2005) Note: Patient entered data
-	----
31/07/2015	Dr Emma Sheppard at Script Request
History	mirtazapine, handt taken in advice to reduce and stop, advised to do so with this and stop propranoll. note alcohol risk and no longer supported by barnardoes > she knows I will write to midwives re may need extra support (says partner still supportive)
-	----
11/08/2015	Dr Marie Wilson at Easterhouse Health Centre
History	mirtazapine was to reduce this but none left will take evry 2nd day
Medication	Mirtazapine Tablets 15 mg *7 tablet ONE TO BE TAKEN ALTERNATE DAYS AND THEN STOP*
-	----
12/08/2015	Dr Anne McGinley at Data Entry
History	HAS BEEN REF TO PERINATAL MAT SERVICES FOR MILD/MOD DEPN AND ANXIETY.
-	----
07/09/2015	Mrs Nicole O'Neill at Easterhouse Health Centre
Comment	A&E PVB
-	----

17/09/2015	Dr Kate Magee at Data Entry
Medication	Propranolol Hydrochloride Tablets 40 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY*
	Mirtazapine Tablets 15 mg *14 tablet 1 Tab At night*
Comment	D/W Dr ES - happy to send out short script in the post and see for next.

17/09/2015	Dr Kate Magee at Script Request
History	Mirtazapine, propanolol
Comment	Likely to be requesting to restart afetr misacrriage - tried to contact but no answer. Message left to phone us back.

30/09/2015	Dr Kate Magee at Easterhouse Health Centre
Medication	Co-Codamol 8/500 Tablets *60 tablet ONE OR TWO TO BE TAKEN FOUR TIMES A DAY*
History	Pain under right ribs and round into back for past 4 days. Not eased with paracetamol. Worse on bending forwards. No cough or SOB but worried as has previously had pneumonia and ended up on ITU. Feeling otherwise OK in herself. Difficult to tell whetherRUQ pain or rib pain. Previous deranged LFT's but Abdo USS in 2013 normal.
Examination	Well, apyrexial. HR 70bpm. Chest clear HS1+11+0. ENT Mildly tender RUQ and across lower ribs. Abdo soft. BS present.
Medication	Ibuprofen Gel 5 % *30 gram APPLY 3 TIMES A DAY*
Comment	Unsure if abdo or chest. To try analgesia and will do bloods for LFT's. If develops cough or SOB then needs to see GP for review as maybe LRTI. Will review on Monday with results.
Test Request	Bone Profile - *Completed*, Urea and Electrolytes - *Completed*, Liver Function Tests - *Completed*, Full Blood Count - *Completed*

Medication	Mirtazapine Tablets 30 mg *28 tablet 1 Tab At night*
	Propranolol Hydrochloride Tablets 40 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY*
History	Managing to cope after miscarriage. Boyfriend being very supportive. Feels mood not to bad given the circumstances. Been taking tewo mirtazapine at night for a while so asking for this to be changed. Doesn't think propranolol is helping tremor. Now that no longer pregnant is there something else she can have instead.
Comment	For 30mg mirtazapine nocte. Will look into other meds for tremor and discuss at review appt on Monday.

02/10/2015	Dr Kate Magee at Data Entry
Comment	Discussed with Neuro on call re tremor. Looking back on notes it looks like benign essential tremor was not diagnosed and neurologists thought more likely to be anxiety related. Advice therefore is to increase dose of propranolol rather than using any other meds. Primidone and topirimate other options but not commonly used due to SE's and ?teratogenicity.

05/10/2015	Dr Kate Magee at Easterhouse Health Centre
History	In to discuss tremor as per previous appt. Explained had discussed with neurology specialists who advised higher dose of propranolol. Wendy happy to try this.
Medication	Propranolol Hydrochloride Tablets 80 mg *84 tablet ONE TO BE TAKEN THREE TIMES A DAY*
	Ibuprofen Gel 5 % *30 gram APPLY 3 TIMES A DAY*
Comment	Will come back for review of mood in 4 weeks - sooner if needed.

20/10/2015	Dr Emma Sheppard at Data Entry
Problem	otitis externa?
History	bilat impacted wax has been using a cotton bud R ear and scalp now sore, co-cod not helping, has had GI upset w NSAID in past, not preg at them moment
Examination	no rash, apyrex, mouth OK, arrange review if worse or not getting better
Comment	warned to stop nsaid if gi problems or wheeze develops
Medication	Cerumol Ear drops *11 ML PUT FIVE DROPS INTO THE LEFT EAR(S) TWICE A DAY FOR THREE DAYS*
	Betnesol-N Drops *10 ML APPLY TWO TO THREE DROPS INTO THE RIGHT EAR(S) THREE TO FOUR TIMES DAILY FOR UP TO 14 DAYS*
	Ibuprofen Tablets 400 mg *12 tablet ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD*
	Omeprazole Capsules (Gastro-Resistant) 20 mg *4 capsule ONE TO BE TAKEN EACH DAY*
	Folic Acid Tablets 400 micrograms *56 TABLET ONE TO BE TAKEN EACH DAY*

20/10/2015	Dr Emma Sheppard at Data Entry
History	pain travelling down neck not sure if ear inf 07454750438, phoned, sore to swallow. no ear discharge
Comment	PMHx furunculosis tci

24/11/2015	Dr Carys Morrison at Script Request
History	propranalol & mirtazapine
Comment	last requested 29/9 - short course mirtaz issued, to see GP before next
Medication	Propranolol Hydrochloride Tablets 40 mg *56 Tablet(s) ONE TO BE TAKEN UP TO THREE TIMES A DAY IF NEEDED*
	Mirtazapine Tablets 30 mg *14 tablet ONE TO BE TAKEN AT NIGHT*

02/12/2015	Dr Carys Morrison at Easterhouse Health Centre
History	pain in right lower ribs posteriorly for a couple of months, worse in last few days. cough with yellow sputum. pain can be pleuritic, most aware of it when lying in bed at night. no trauma to ribs
Examination	t36.6 hr 97 sats 99% chest: few scattered creps right base. nil to see externally, but tender right lower ribs. normal expansion
Comment	treat as LRTI, nsaid for rib pain - ?msk, exacerbated by chest.
	discussed mood - still has bad days but overall ok on mirtaz. a little drowsy in monings.
Medication	Amoxicillin Capsules 500 mg *15 CAPSULE ONE TO BE TAKEN THREE TIMES A DAY*
	Ibuprofen Tablets 400 mg *42 TABLET ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD*
	Omeprazole Capsules (Gastro-Resistant) 20 mg *28 capsule ONE TO BE TAKEN EACH DAY*

06/01/2016	Dr Kate Magee at Script Request
History	mirtzapine and propranolol
Medication	Mirtazapine Tablets 30 mg *28 tablet 1 Tab At night*
	Propranolol Hydrochloride Tablets 40 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY*
Comment	Has been seen recently.

01/02/2016	Dr Kate Magee at Script Request
History	mirtazapine & propranolol
Medication	Mirtazapine Tablets 30 mg *28 tablet 1 Tab At night*
	Propranolol Hydrochloride Tablets 40 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY*

18/02/2016	Dr Marie Wilson at Script Request
History	propranolol
Medication	Propranolol Hydrochloride Tablets 40 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY*

15/03/2016	Dr Kate Magee at Easterhouse Health Centre
Medication	Hydrocortisone And Miconazole Cream 1 % + 2 % *30 GRAM APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE DAILY*
History	Red, itchy rash under both armpits for the past 5 days. Started on left but now on right too. Has had before and got cream for it. No fevers or systemic upset.
Examination	Fungal looking red rash under both axillae. Well demarcated area with whitish border. No surrounding erythema.
Comment	Try daktacort and review in 2 weeks if not settled.

Medication	Paracetamol Tablets 500 mg *56 TABLET TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)*
	Ibuprofen Tablets 400 mg *42 TABLET ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD*
History	Right sided headache off an on for past 2 days. Dull ache on side of head. Comes and goes. Not tried any pain relief. No visual disturbance or limb weakness. No obvious trigger. Doesn't feel unwell. No nausea, neck stiffness or rash. No viral like symptoms.
Examination	Not currently in pain. No scalp tenderness. Vision normal. Neurology normal in all four limbs. ENT - NAD.
Comment	?viral ?tension/stress related. No red flags. To try simple analgesia and review if symptoms persist or worsen.

Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
	Struggling with mood and anxiety. Tremor is worsening and propanolol has

History	made no difference. Ix by Neurology who felt related to anxiety rather than benign intentional tremor or significant pathology. Has not engaged with PCMHT in the past but would consider this for anxiety management. Keen to increase mirtazapine.
Comment	Given PCMHT leaflet and enocuraged to contact. Agreed to increase mirtazapine but monitor for weight gain. To stop propranolol if not helping. Review in 4 weeks. Sooner if mood deteriorates.

History	Abnormally low peak flow on PIP medical so was advised to see GP. Has had longstanding issues with SOBOE and cough at night time. Denies wheeze or chest tightness. No family history of atopy but worried she has asthma. Never had trial of inhalers. Very keen to have further tests.
Comment	This was 4th problem in one appt so needs to come back for discussion about peak flow diary and trial of inhalers. Advised to make appt for next week.

01/04/2016	Dr Kate Magee at Script Request
History	mitrazipine propanol
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
	Propranolol Hydrochloride Tablets 40 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY*
Comment	To see GP for review before next - message left with script.

20/04/2016	Dr Kate Magee at Script Request
History	propranalol
Comment	Needs to see GP for this as per previous. Should still have 10 days left.

29/04/2016	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Has a tremor**
History	felt this and panic worse of propran so restarted, comes today to me with a cough and green spit, worried re recurrance of pneumonia
Examination	PFR - peak flow rate 295 L/min no SOBOE, full sentances, chest clear, resps normal, capillary refill normal, apyrexial, no rash or meningism, pulse 82 sats 98%
	Predicted peak flow 435 l/min
Comment	try titrate off propran slowly next week and repeat peak flow in case this is cause of cough. note aiming fpopreg would be better off prorpan for this
Medication	Salbutamol Cfc-free inhaler 100 micrograms/puff *1 INHALER ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY*
	Volumatic Spacer device *1 device TO BE USED AS DIRECTED*
	Propranolol Hydrochloride Tablets 10 mg *21 tablet ONE TO BE TAKEN THREE TIMES A DAY*
	Amoxicillin Capsules 500 mg *15 CAPSULE ONE TO BE TAKEN THREE TIMES A DAY*

Problem (FIRST)	**Adverse reaction to propranolol** possible wheeze with this

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03/05/2016	Dr Kate Magee at Script Request
History	amoxicillin mirtazapine propranalol thrown out by mistake can she have new script
Medication	Amoxicillin Capsules 500 mg *15 CAPSULE ONE TO BE TAKEN THREE TIMES A DAY*
	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
	Propranolol Hydrochloride Tablets 10 mg *21 tablet ONE TO BE TAKEN THREE TIMES A DAY*
Comment	Last issue cancelled and items re-issued.

18/05/2016	Dr Kate Magee at Easterhouse Health Centre
History	Review of breathing. Cough resolved and feeling better after taking antibiotics. Doesn't think salbutamol helped much. Has not had propranolol for a week and is feeling much more anxious. Keen to restart.
Examination	PFR - peak flow rate 390 L/min
Medication	Propranolol Hydrochloride Tablets 10 mg *28 tablet ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED*
Comment	Peak flow improved but difficult to tell whether due to ABx or stopping beta blocker. Explained that propranolol not ideal in pregnancy. Wendy still keen to have. Agree to low dose on PRN basis rather than regularly. Review in 4 weeks. Sooner if needed.

08/06/2016	Dr Kate Magee at Script Request
History	Mirtazapine and propranolol
	Propranolol Hydrochloride Tablets 10 mg *28 tablet ONE TO BE TAKEN*

Medication	*THREE TIMES A DAY IF NEEDED* Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
14/07/2016	Dr Marie Wilson at Easterhouse Health Centre
History	Pregnant. LMP - Thinks end of May. Para 0+1 Miscarriage last September. On Mirtazapine. Limited information on safety in pregnancy. Discussed trying to reduce - not sure - will think about this. Has stopped alcohol. No other drugs. Feeling well. Would like to reduce Mirtazpaine to 30mg initially. Will self refer to PMHT. Lives with partner.
Medication	Folic Acid Tablets 400 micrograms *56 TABLET ONE TO BE TAKEN EACH DAY* Mirtazapine Tablets 30 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *28 tablet ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED*
New Referral	(NHS), , , , EMISSPR510: Ante-natal clinic referral (SCI Gateway Referral)
Additional	Medication review done
14/07/2016	Mr Touchscreen Touchscreen at Touchscreen
History	Never smoked tobacco Note: Patient entered data
19/07/2016	Ms Liz Bannachan at Data Entry
Comment	Psych have referred onto perinatal mental health services.
25/07/2016	Dr Kate Magee at Easterhouse Health Centre
History	Understood from last consultation that would be seen earlier for booking scan due to previous miscarriage. Received appt this morning for 30th August and upset she is having to wait so long. No abdo pains or bleeding. Not clear from last visit exactly what was said. Expect was warned might be seen earlier. Previous miscarriage mentioned in referral so vetting team obviously thought safe to wait until normal 10-12 week scan.
Comment	Wendy incredibly anxious and distressed at thought of having to wait another 4-5 weeks. Tried to reassure but not successful. D/W MW - no need for early scan. Wendy misunderstood advice. Agreed that I would write to ANC to see if we can bring forward scan due to high levels of anxiety but unlikley to be successful.
28/07/2016	Mrs Donna Rogers at Data Entry
Comment	Patient pregnant
15/08/2016	Ms Suzanne Reid at Data Entry
Comment	FYI,see maternity re EDD 1 3 17. d/w MW and review case, no overt qulification for SNIPS but definitely some vulberability and previus subs misuse > d/w HV but NOT ref to snips.
26/08/2016	Dr Kate Magee at Script Request
History	mitazipine and propananol
Medication	Mirtazapine Tablets 30 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *28 tablet ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED*
15/09/2016	Dr Marie Wilson at Easterhouse Health Centre
History	Mirtazapine dose increased to 45 MG daily. Letter from Psychiatrist. Should have 10 days left of 30 mg so issued with 10 15 mg tabs - can then be chanded to 45mg daily.
Medication	Mirtazapine Tablets 15 mg *10 tablet ONE TO BE TAKEN AT NIGHT*
11/10/2016	Dr Pierre Receveaux at Script Request
History	mirtazapine 45mg propranalol
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *28 tablet ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED*
24/10/2016	Ms Liz Bannachan at Data Entry
Comment	In for flu vac, not had before so Dr Receveaux seen and administered
24/10/2016	Ms Liz Bannachan at Data Entry

Comment	Flu vac given by dr Receveaux as not had before
Result	Influenza vacc. administratn.
Additional	Seasonal influenza vaccination (Left arm) Batch no 33749411A exp 06/17 **(GMS)**
	Consent given for seasonal influenza vaccination

02/11/2016	Ms Rhonda Gilmartin at Easterhouse Health Centre
Problem (FIRST)	**Whooping cough vaccination (GMS)**
Comment	22 weeks gest
Additional	Low dose diphth, tet, acellular pert and inactiv polio vacc ac39b086b exp 05/2018 left arm **(GMS)**

15/11/2016	Dr Pierre Receveaux at Script Request
History	propranalol mirtazapine
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*

05/12/2016	Mrs Nicole O'Neill at Easterhouse Health Centre
Result	blood,coagulation,d dimer- raised DDimer, already assessed

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05/12/2016	Dr Pierre Receveaux at Easterhouse Health Centre
History	Note FBC fairly normal (wcc normal, neutrophils 7.7, CRP normal), d dimer slightly raised at 459. D/W med reg, high risk patient for PE, probably can't confidently say she doesn't have one esp considering not particularly infective picture on other bloods. Tried to refer to ARU - asked to refer to obs instead. Referred obs reg - happy to receive princess royal maternity. Wendy being driven up tonight.

05/12/2016	Dr Pierre Receveaux at Easterhouse Health Centre
Problem (NEW)	**Cough**
History	1-2 weeks cough, green sputum, some pain left lower posterior chest on inspiration. 27 weeks pregnant, things going well from this point of view. No haemoptysis, no leg swelling, no recent travel. Previous pneumonia. Not SOB.
Examination	O/E - pulse rate 91 beats/minute
	SPO2 96% on air
	Chest - L coarse basal breathing sounds, some R coarse basal breathing sounds. otherwise clear.
	O/E - temperature normal
Result	d/w dr w - d dimer might be useful to rule out PE, unlikely, worsening advice.
Medication	Amoxicillin Capsules 500 mg *21 capsule ONE TO BE TAKEN THREE TIMES A DAY*
Test Request	CRP - *Completed*, Full Blood Count - *Completed*, D - Dimer - *Completed*

07/12/2016	Mrs Donna Rogers at Data Entry
Comment	admitted with chest infection

22/12/2016	Dr Kate Magee at Script Request
History	Mirtazapine and Propranolol
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
	Propranolol Hydrochloride Tablets 10 mg *28 tablet ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED*

10/01/2017	Dr Anne McGinley at Data Entry
History	support from perinatal mental health team, plan, increased risk of anxiety

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21/02/2017	Dr Anne McGinley at Script Request
History	cherck compliance at next appt

24/02/2017	Ms Liz Bannachan at Data Entry
Comment	I have d/w HV, they planning additional support

26/02/2017	Mrs Nicole O'Neill at Easterhouse Health Centre
Comment	discharged following delivery - propranolol has been reduced and can be titrated back up if needed at review appts (discuss at postnatal check?)

28/02/2017	Ms Kay Boyle at Easterhouse Health Centre

Result	Rep.presc. monitoring NOS
10/03/2017	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Has a tremor**
History	OK on lower dose prorpan, dr catwell suggesting switch this > 10mgs fiven
Problem (REVIEW)	**Anxiety with depression**
History	seems cheerful, has met HV etc,cosniering depo, I cocnern re mood, try POP cosnder implant
10/03/2017	Ms Rhonda Gilmartin at Data Entry
Comment	? undissolved suture on righ side of section wound, open 1/2 cm, no signs of infection, slightly overgranulated, inadine and mepore applied and supplied advised to change if gets wet or 20 p strikethrough, and seek ooh if worse signs of infection. review tues.
10/03/2017	Dr Emma Sheppard at Data Entry
History	looks really well 2 post section but wound leaking
14/03/2017	Ms Rhonda Gilmartin at Easterhouse Health Centre
Problem	wound dressing
Comment	wound dressing, not much change no signs of infection, changed 1 since visit, still slight overgranulated, carry on as before and review friday, discussed checking for signs of infection. spare given to change, no signs of sutures.
17/03/2017	Ms Rhonda Gilmartin at Easterhouse Health Centre
Problem (FIRST)	**Dressing of wound**
Comment	much improved today, less leakage, almost healed, review tues advised to keep dry and change as beore only if needed.
21/03/2017	Ms Rhonda Gilmartin at Easterhouse Health Centre
Problem	wound dressing removal of suture
Comment	small suture tail visible today and clipped wound almost healed .5 cm only dressed as before advised to keep dry
24/03/2017	Ms Rhonda Gilmartin at Easterhouse Health Centre
Test Request	Wound Swab (C&S) #1 - *Completed*
24/03/2017	Ms Rhonda Gilmartin at Easterhouse Health Centre
Problem	dressing
Comment	a little swollen and wet today, no other signs of infection, may have got wet, betadine and mepore only review next week. swabbed incase
30/03/2017	Dr Kathryn Roberts at Easterhouse Health Centre
History	Swab grew staph senstive to fluclox. Phoned 12.35 and advised. Will collect script.
Medication	Flucloxacillin Capsules 500 mg *28 CAPSULE ONE TO BE TAKEN FOUR TIMES A DAY*
31/03/2017	Ms Rhonda Gilmartin at Easterhouse Health Centre
Problem	wound dressing
Comment	almost healed, inadine and mepore no more leaakge advised to keep dry and return in a week.
07/04/2017	Dr Emma Sheppard at Easterhouse Health Centre
Problem (FIRST)	**Postnatal exam. - maternal**
History	Advice about long acting reversible contraception happy on POP, cosiderign futher preg, aware caustion on higher dose mirtaz, wants to stay on higher dose even though wt gain. bladder bowe lOK , smear due next may. declines all options
Examination	well cheerful supported by in laws
Medication	Cerelle Tablets 75 micrograms *84 tablet ONE A DAY EVERY DAY*
Problem (REVIEW)	**Elective caesarean delivery NOS**
History	wpund better she says

30/05/2017	Dr Kathryn Roberts at Easterhouse Health Centre
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY*
01/06/2017	Dr Anne McGinley at Data Entry
History	review tremor at next appt.
05/06/2017	Dr Kathryn Roberts at Easterhouse Health Centre
History	Gets every year, requesting antihistamine and nasal spray, pharmacy wouldn't give her and told her ot see gp?
Problem (FIRST)	**Hay fever - unspecified allergen**
Medication	Cetirizine Hydrochloride Tablets 10 mg *60 tablet ONE TO BE TAKEN EACH DAY* Beclometasone Aqueous nasal spray 50 micrograms/actuation *200 DOSE TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY*
History	Wanting chest checked over as some recent intermittent sharp shooting pains in right lateral chest wall area and thought might be chest inf. No cough, no sputum, no fevers, no vomiting. Pains are sharp and last a few seconds only. None today, once yesterday. No sob or pleuritic type pains
Examination	Looks well. Temp 36.8. P80 reg. Sp02 99%oa RR 12. HS normal. Chest has good ae and sounds clear, resonant. No abnormality of chest wall in area described.
Comment	Likely msk pain, advised see gp if worsening/changes.
History	14 weeks post natal, erratic bleeding. Period type bleeds. Does get breaks in between but no pattern to it. Taking cerelle reg. Likely just needing time to settle postnatally and on POP so will keep diary of pattern and return to us few weeks. No post coital bleeding or dyspareunia. Smear up to date.
23/06/2017	Dr Emma Sheppard at Data Entry
History	Advice about long acting reversible contraception sore nose ? cold sore, warned to stop nsaid if gi problems or wheeze develops , , cosnidering conception next copule of years wants to cont w POP for now
Problem	sore nose
Medication	Naseptin Cream *20 gram APPLY TWICE A DAY* Ibuprofen Tablets 400 mg *24 tablet ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD* Cerelle Tablets 75 micrograms *168 tablet ONE EVERY DAY*
Problem (REVIEW)	**Anxiety with depression**
Examination	looks the happeist ai have ever seen her
27/07/2017	Dr Kathryn Roberts at Easterhouse Health Centre
Medication	Beclometasone Aqueous nasal spray 50 micrograms/actuation *200 DOSE TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY* Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY*
21/09/2017	Dr Kathryn Roberts at Easterhouse Health Centre
History	late request ?compliance, discuss at next review
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY*
21/12/2017	Dr Danielle McGurn at Script Request
History	req mirtazapine asked if could have for today as none left. Last issued Sept. Call to Wendy - stopped taking them for a "few weeks" but has been back on continuously for past 3/52. Have issued that she make an appnt for review in January before Prx runs out.
04/01/2018	Dr Kathryn Roberts at Easterhouse Health Centre
History	Discussed mirtazapine. Says stopped them as had been feeling much better, however decided to restart them for anxiety only as feels helps anxiety. Denies

	any current low mood. Reactive, smiling today.
Problem (REVIEW)	**Anxiety with depression**
History	Just wanting chest checked out as has had intermittent pains posterior chest past 3-4 weeks. Prev ICU admission with pneumonia 6 yrs ago and since then has occasionally had similar pains, sometimes given antibiotics for it, sometimes not. E+D normally, no vomiting or fevers or SOB. Occasionally brings up some sputum but nil reg.
Examination	Alert, looks well. Afebrile. Warm peripheries cRT<2secs. P76 reg. Sp02 99%oa RR 12-14. BP 135/92. HS normal. Chest has good ae bilaterally and sounds clear. moist mucous membranes.
Comment	No indication for antibiotics today but strong worsening/unresolving advice given to return if worsening/new symptoms or not settling like normal

04/01/2018	Mr Touchscreen Touchscreen at Touchscreen
History	Never smoked tobacco Note: Patient entered data

29/01/2018	Dr Kathryn Roberts at Easterhouse Health Centre
Medication	Propranolol Hydrochloride Tablets 10 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY* Cerelle Tablets 75 micrograms *168 tablet ONE EVERY DAY* Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*

12/03/2018	Dr Carys Morrison at Script Request
History	mirtazapine propanalol
Comment	review for next script
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY*

18/04/2018	Dr Anne McGinley at Easterhouse Health Centre
History	posterior chest pains, as before. intermittent since RTI. just wants checked. no cough/SOB/wheeze/fever. generally well
Examination	apyrex PO2 97 resp normal Chest clear AE normal / saome discomfort springing R chest wall, mild
Comment	? muscular, lifting+++
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY*

History	mood improved, anxiety better byt still affects functionning, CT meds, will self ref PCMHT

24/05/2018	Dr Carys Morrison at Script Request
History	mirtazapine and propranolol
Comment	see review in april
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY*

04/06/2018	Ms Ashley Reilly at Easterhouse Health Centre
Comment	Did not attend - no reason

11/07/2018	Dr Carys Morrison at Script Request
History	mirtazapine propranalol cerelle
Comment	need up to date BP. note recent reviews and dna june. also 1m delay in mirtaz ?taking regularly - pleae make review appt
Medication	Cerelle Tablets 75 micrograms *168 tablet ONE EVERY DAY* Propranolol Hydrochloride Tablets 10 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY* Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*

17/07/2018	Ms Ashley Reilly at Easterhouse Health Centre
Comment	SMEAR - Tell Patient Normal

17/07/2018	Dr Carys Morrison at Easterhouse Health Centre
Problem	cherry angioma
History	noticed one on abdo and one on arm - requesting check
Comment	Dx confirmed, reassured

Problem (REVIEW)	**Anxiety with depression**
History	feels mirtaz helps. forgets a few days per month to take it but reasonably consistent otherwise. feels mood is better on it and things are 'stable'. not very forthcoming otherwise
Comment	ok to continue current dose - advised we will review periodically to ensure still ok

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17/07/2018	Mrs Allison King at Easterhouse Health Centre
Problem (FIRST)	**Cervical cytology screen**
Examination	Blood pressure reading 128/77 mm Hg
	Body Mass Index, 29.64
Social	Never smoked tobacco
Comment	cerelle pop smear today amenorrhoea with pop states taking regularly no missed pills no pregnancy risk ..smear due today
Additional	Health ed. - alcohol
	Health ed. - diet
	Health ed. - exercise

15/08/2018	Dr Pierre Receveaux at Easterhouse Health Centre
Problem (REVIEW)	**Anxiety with depression**
History	Mirtzapine and Propranolol
Comment	last mental health r/v 17/7/18
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
	Propranolol Hydrochloride Tablets 10 mg *56 tablet ONE TO BE TAKEN UP TO THREE TIMES A DAY IF REQUIRED FOR ANXIETY SYMPTOMS*

25/09/2018	Dr Anna Fleck at Script Request
Problem (REVIEW)	**Anxiety with depression**
Comment	script request for mirtazepine and propanolol.
Medication	Mirtazapine Tablets 45 mg *28 tablet 1 Tab At night*
	Propranolol Hydrochloride Tablets 10 mg *56 tablet ONE TO BE TAKEN UP TP THREE TIMES A DAY IF NEEDED FOR ANXIETY*

01/10/2018	Dr Pierre Receveaux at Script Request
History	Mirtzapine and Propranolol
Comment	issued 1 month supply last week

11/10/2018	Dr Emma Sheppard at Data Entry
Problem (FIRST)	**Police domestic incident report received**
History	sw and HV sheila quigley also ifnormed, joint visits x 2 , W accepting incident ,? aggression on either side, khara not present, and relationship wanting to be ongoing both parties > social work have withdrawn. W declining supports, case handed back to Lisa, I sugest Barnardoes as previously effective support from them
Examination	S states at times W presentation slow could be suggestive of sedation.

18/10/2018	Dr Anna Fleck at Script Request
Comment	pharmacy req mirtazapine propranalol
Medication	Propranolol Hydrochloride Tablets 10 mg *56 tablet ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY*
	Mirtazapine Tablets 45 mg *28 tablet 1 Tab At night*

01/11/2018	Dr Emma Sheppard at Easterhouse Health Centre
Problem (REVIEW)	**Anxiety with depression**
History	? drug misuse. HV notes mell of cannabis flat affect not forthcoming, tci revew LETTER SENT SEE B4 next pelase

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Problem (REVIEW)	**Police domestic incident report received**
History	partner still living seperately

20/11/2018	Dr Anna Fleck at Script Request
Comment	pharmacy req mirtazapine propranalol

Medication	Mirtazapine Tablets 45 mg *28 tablet 1 Tab At night* Propranolol Hydrochloride Tablets 10 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY*

14/12/2018	Dr Anna Fleck at Easterhouse Health Centre
Comment	request for mirtazepine.
Medication	Mirtazapine Tablets 45 mg *28 tablet 1 Tab At night*

18/12/2018	Dr Anne McGinley at Script Request
History	please see GP as below
Medication	Propranolol Hydrochloride Tablets 10 mg *28 tablet ONE TO BE TAKEN THREE TIMES A DAY PRN*

31/12/2018	Dr James Curran at Script Request
Medication	Cerelle Tablets 75 micrograms *168 tablet ONE EVERY DAY*

21/01/2019	Dr Anne McGinley at Data Entry
History	see Gp for review
Medication	Mirtazapine Tablets 45 mg *14 tablet ONE TO BE TAKEN AT NIGHT*

18/02/2019	Dr Pierre Receveaux at Easterhouse Health Centre
Problem (FIRST)	**Pityriasis versicolor**
History	rash weeks upper back, can be a bitch itchy, some change in pigment
Examination	?pityriasis versicolor, definitely appears fungal type rash. Some erythema/slight scale, no plaque.
Result	see us back if doesn't resolve/worsens
Medication	Ketoconazole Shampoo 2 % *120 ML APPLY ONCE DAILY TO THE AFFECTED AREA FOR 5 DAYS*
Problem (REVIEW)	**Anxiety with depression**
History	feels quite good just now. Wants to continue on mirtazapine. No self-harm suicide thoughts. Reports things are going well at home. Sleep can be a bit disturbed at times but not bad. In with child, seems appropriate. Feels mirtazapine helpful, not wanting to consider stopping just now
Examination	affect reactive, no suggestion intoxication/no smell alcohol or cannabis
Result	c/w mirtazapine, limited repeat, see us if worsening/self harm suicide thoughts/wanting to stop
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*

21/02/2019	Dr Pierre Receveaux at Data Entry
History	Spoke to SW. Visiting regularly - had smelt ?cannabis in house before. Dad on trial, not meant to be in house but ?is Wendy planning on taking him back in. House well kept when HV goes to visit. Next visit could ask ?dad in house ? any drugs - HV suspects not Wendy but dad could be the one taking cannabis but no evidence at present.

19/03/2019	Dr Emma Sheppard at Script Request
History	PROPANALOL

09/04/2019	Dr Emma Sheppard at Data Entry
Problem (NEW)	**Upper respiratory tract infection NOS**
History	1 wee not well 2 days feversymps and cough , note PMHX pneumonia
Examination	no SOBOE, full sentances, chest clear, resps normal, capillary refill normal, apyrexial, , pulse 60 and sats 98.
Comment	can phone for abtics if no better 2d, see if worse

17/05/2019	Dr Kathryn Roberts at Easterhouse Health Centre
History	Late order for meds ?compliance - monitor
Problem (REVIEW)	**Anxiety with depression**
Medication	Propranolol Hydrochloride Tablets 10 mg *56 tablet ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY* Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*

10/06/2019	Dr Kathryn Roberts at Easterhouse Health Centre
History	Past week some suprapubic pain when passing urine only. Also some dysuria. No blood. No vomiting. No fevers. Has also had a cough but feels getting better

	now. Wondering if I can check chest.
Examination	Looks well. Temp 35.9. P80 reg. Sp02 99%oa Chest has good ae and sounds clear, resonant. Urine preg test negative. Urinalysis - leucocytes ++ and trace of blood.
Problem (FIRST)	**Suspected UTI**
Comment	Advised 3 days antibiotics and reg oral fluids, see gp if unresolving.
Medication	Trimethoprim Tablets 200 mg *6 TABLET ONE TO BE TAKEN TWICE A DAY*

History	Says sometimes forgets to take medications but thinks remembers most days. Feels mirtazapine is helping mood and also helps sleep. No recent thoughts of self harm or suicide. In with daughter in pram today, interacting ok with her and giving her smiles.
Problem (REVIEW)	**Anxiety with depression**

13/06/2019	Dr Lachlan Calder at Script Request
Medication	Propranolol Hydrochloride Tablets 10 mg *56 tablet ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY*

20/06/2019	Ms Ashley Reilly at Easterhouse Health Centre
Comment	URINE - Tell Patient Normal

20/06/2019	Dr Kathryn Roberts at Easterhouse Health Centre
History	See consultation 10/06, suprapubic pain resolved but now has some dysuria again. No fevers or vomiting. No vaginal discharge. Found out few days ago that partner of 9 years has slept with someone else, he has now left to mothers house. She is wanting check for STI. Will self swab at home and will consider blood tests for BBV. Advised to phone for results
Medication	Trimethoprim Tablets 200 mg *14 tablet ONE TO BE TAKEN TWICE A DAY*
Test Request	Midstream Urine (C&S) - *Completed*, Chlamydia/Gonorrhoea PCR - Vulvovaginal - *Completed*

24/06/2019	Dr Lachlan Calder at Phone Encounter
History	Wendy asking if she should finish the course of Trimetjoprim as Urine Culture negative - I said she should in order to prevent buiding up an resistance.

25/07/2019	Dr Lachlan Calder at Script Request
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
	Propranolol Hydrochloride Tablets 10 mg *56 tablet ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY*
	Cerelle Tablets 75 micrograms *168 tablet ONE EVERY DAY*

16/08/2019	Ms Ashley Reilly at Easterhouse Health Centre
Comment	A&E - APPEARS INTOXICATED - Admin staff to contact patient Tell patient to make appointment with GP on encounters, HV informed

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23/08/2019	Dr Warren Brownlee at Easterhouse Health Centre
Problem	Med Req
Medication	Propranolol Hydrochloride Tablets 10 mg *56 tablet ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY*

02/09/2019	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Alcohol problem drinking**
History	mirtaz off repeat for now til seen

02/09/2019	Dr Anne McGinley at Data Entry
History	16/8/19 SEE SEE A&E. locked in house with daughter and friend, by partner who took keyes. had to climb out of ground floor window, ambulance assessed, taken to A&E. intoxicated and drowsy, knives and joints in house, unsuitable child care. notification to SWork (already under SWork 21/1/19), sister in law Sharon Ward collected child. HV informed. See GP.

05/09/2019	Dr Anne McGinley at Data Entry
History	hv LISA NOT AVAILABLE. records checked by nursery nurse. swork contaced 3/9. I will phone HV tomorrow

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09/09/2019	Dr Anne McGinley at Data Entry

History	HV contactingf SWork and visiting W on 11/9/19

10/09/2019	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Social worker involved**
History	discussed w HV lisa my cocnern that W may have vulnerabilties relating to orphan/ difficult teenage years. declining support... please cosmider offer again , consider Links ???? AP1 if cont to decline support.

15/09/2019	Ms Suzanne Reid at Data Entry
Comment	OOH - WORSENING PAIN

16/09/2019	Dr Kathryn Roberts at Easterhouse Health Centre
Medication	Co-Amoxiclav 500/125 Tablets *21 tablet ONE TO BE TAKEN THREE TIMES A DAY*
History	Says was out on night out Saturday 07/09/19, when came out of club was trying to break up a fight and someone bit her on finger. Did not seek medical attention but now worried re infection. Not systemically unwell. Wound on finger has been scabbing over but keeps breaking open. Some tenderness and swelling v locally around area of wound, no discharge, no tracking up finger/hand. Good ROM in finger and normal perfusion to tip of finger. Start co-amoxiclav. Also has some angular cheilitis past couple of days.
Problem (FIRST)	**Assault by bite of human being**
Medication	Clotrimazole And Hydrocortisone Cream 1 % + 1 % *15 gram APPLY THINLY TO THE AFFECTED AREA TWICE DAILY*
History	Discussed incident that led to A&E presentation. Says thought partner had locked her in house but in end turned out he had not and she had keys there. Says had been intoxicated as had been out night before and drinking till late, childs aunty had brought child back to her house in morning but as she was still drunk had phoned friend to come and pick her up for the day. Says partner relationship on/off and he is currenlty not living in house with them but they still see him reg and getting on ok at the moment. Declines help from eg womens aid. Appears mildly anxious. Smiling, casually dressed, well kept, make up on. Daughter in room, playing, smiling, waving to me, appears to interact normally with mum.
Problem (REVIEW)	**Social worker involved**
Comment	Says s/w attended house couple of weeks ago and told they would be in touch but never heard anything since. Advised her I will phone them for update.
History	Says drinking on nights out but denies any regular excess. Says feels mood ok at moment. Some stress as in private let and has been given notice to leave so has been to housing dept who are going to sort her out temp accomodation, she hopes in same area so she doesn't lose waiting list place for daughters nursery. Advised we have community links who may be helpful with current issues, she seemed interested but didn't ask for appt.
Problem (REVIEW)	**Alcohol problem drinking**

16/09/2019	Mr Touchscreen Touchscreen at Touchscreen
History	Never smoked tobacco Note: Patient entered data

18/09/2019	Dr Anne McGinley at Data Entry
History	HV phoned, asking if mirtazepine (45mg taken last night) and propanolol taken this am, would cause slurred speech. not new meds and, no noted reactions to these in previous consultations. I hav eadvise not the cause of slurred speech. HV and SW are stil assessing situation.

18/09/2019	Dr Anne McGinley at Data Entry
History	from HV. cancelled visit last week for daughters 30/12 assessment, bacause her partner going in for operation. due to go out pm with SWorker this afternoon. W phoned to cancel todays visit, said partner has operation today at hospital! sounded slurred on phone. HV checking no other conditions that would make her sound slurred on phone-none. HV and SW will do an urgent visit today.

19/09/2019	Dr Kathryn Roberts at Easterhouse Health Centre
History	Spoke with HV Lisa, SW at visit yesterday arranged for Wendy's friend to come and look after children that day because of concerns. SW is aware of recent A&E presentation and HV Lisa also informed SW re finger biting incident. SW will be following up.

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15/10/2019 14:39	Dr Warren Brownlee at Script Request
History	Propranolol, Mirtazapine, Cerelle
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01/11/2019	Mrs Donna Rogers at Data Entry
Comment	A&E - Assaulted
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14/11/2019	Dr Kathryn Roberts at Easterhouse Health Centre
Problem (REVIEW)	**Anxiety with depression**
History	I have left note for HV re ?any update since A&E presentation 01/11?
Medication	Propranolol Hydrochloride Tablets 10 mg *28 tablet ONE TO BE TAKEN UP TO THREE TIMES A DAY AS REQUIRED FOR ANXIETY* Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
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12/12/2019	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Alcohol problem drinking**
History	see kaharas notes, khara w paternal aunt sharon ward , sharon concernd relvelaed to HV to that recurrent CSA, mum alcoholic, ? consider anchor. , letter tci , note wlaos binge drinking wil need thiamine etc
-	----
27/12/2019	Dr Kathryn Roberts at Easterhouse Health Centre
History	sent letter 12/12/19 to make appt to see gp
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
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29/01/2020 14:18	Dr Warren Brownlee at Script Request
History	Note review in November.
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *28 TABLET ONE TO BE TAKEN UP TO THREE TIMES A DAY AS REQUIRED FOR ANXIETY*
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04/02/2020	Dr Kathryn Roberts at Easterhouse Health Centre
History	mirtazapine and propranolol off repeat until review
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21/02/2020 14:15	Dr Warren Brownlee at Easterhouse Health Centre
History	Mirtazapine and Propranolol. Please make appointment for review.
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06/04/2020	Dr Kathryn Roberts at Easterhouse Health Centre
History	Tried phoning - straight to voicemail, message left to call us back. Note stapled to scripts 'please contact surgery to speak to gp before next prescription. Please note shorter supply of medication'. I note request late ?compliance with meds.
Medication	Mirtazapine Tablets 45 mg *14 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *28 tablet ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY* Cerelle Tablets 75 micrograms *84 tablet 1 Tab Daily*
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24/04/2020 11:24	Dr Warren Brownlee at Telephone Consultation
History	Returned patient call. No answer. Message left asking her to call back the practice. I think she is calling to review meds as per 6 April consultation.
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27/04/2020	Dr Kathryn Roberts at Easterhouse Health Centre
History	Patient returned call today re med review. PHoned 12.58 - straight to voicemail, message left to call us back please. Phoned 13.59 - straight to voicemail again
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28/04/2020	Dr Anne McGinley at Telephone Consultation
History	returning call back from yesterday, wrong number for pt now updated. mood 'good' says stable, getting out of the house fro short walks, shopping. says no alcohol. friend staying with her. daughter staying with aunt. uses prn propanolol -small dose.
Examination	appropriate, cheerful on phone, sober.
Comment	CT meds, can phone for next script. worsenning advice.
Medication	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *56 tablet ONE TO BE TAKEN UP TO 3 THREE TIMES A DAY IF NEEDED FOR ANXIETY* Clotrimazole Cream 1 % *40 gram APPLY TWO TIMES DAILY TO BACK FOR 1-2 WEEKS*

History	flare of rash on back as before, pitoriasis versicolor, still has ketoconazole shampoos, asking for cream. advised use shampoo ? benefit of topical
27/05/2020	Dr Anne McGinley at Script Request
Medication	Clotrimazole Cream 1 % *40 gram APPLY TWO TIMES DAILY TO BACK FOR 1-2 WEEKS*
13/07/2020 15:38	Dr Danish Sohail at Easterhouse Health Centre
History	propronolo and mirtazapine,noted telephonic review on 28/04
17/08/2020	Dr Emma Sheppard at Data Entry
History	req clotrim, bbv screen neg 2016 please d/w GP re this
18/08/2020	Dr Emma Sheppard at Phone Encounter
Problem (REVIEW)	**Pityriasis versicolor**
History	out and bout, asks to return call after 13 30 , clotrim works then it reruns, no wt loss, things are more stable, getting wean unsup 11 > 16,00 and hopeful that back from aunts soon
Test Request	Glucose - *Requested*, CRP - *Requested*, Urea and Electrolytes - *Requested*, Gamma GT - *Requested*, Liver Function Tests - *Requested*, Thyroid function tests - *Requested*, Full Blood Count - *Requested*, Chronic Viral Hepatitis Screen - *Requested*, HIV antibody/antigen (Ab/Ag) screen - *Requested*
30/09/2020	Dr Anne McGinley at Script Request
History	mood has been low but better now. managing to get out to nursery etc. appetite good, sleep variable, mirtazipine helps. SW arrange taxi Mon -Frid to paick up daughter from kinship carer in Bellshill, and to drop her off at 4.30. fallout with aunt just now so variable contact at weekend. Panel hearing coming up..... SW arranging house move ? 2 bedroomed ?? return of daughter to Wendy's care. N alcohol during week, rarely at weekend.
Comment	CT meds
Medication	Cerelle Tablets 75 micrograms *168 tablet 1 Tab Daily* Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT* Propranolol Hydrochloride Tablets 10 mg *28 tablet ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED FOR ANXIETY*
01/10/2020	Ms Liz Bannachan at Data Entry
Comment	Cerelle mirtazapine & propranalol printed as per Dr Sheppard
23/10/2020	Dr Emma Sheppard at Phone Encounter
Problem (REVIEW)	**Social worker involved**
History	tried to get erailer on phone to police as daughter had an accident when in kinship care, this has made her v stressed, Kara due home before christmas
Problem (REVIEW)	**Alcohol problem drinking**
History	not drinking now, no subs misue she says
Problem (REVIEW)	**Has a tremor**
History	wants toi incr propran as stress of alochol assess etc, diffcult due to tesne relationship w foster carer, some anx re child coming for overnights... somunds goo today, nice interaction w child heard on phone, not intoxicvated
Medication	Propranolol Hydrochloride Tablets 10 mg *84 TABLET ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED*
Comment	wheeze o higher dose in the past, has been taking 10 x 4 at a time if bad > incr amount not dose and stop if wheeze ADVISED THAT NO OTHER MEDS SUITABLE FOR TREMOUR, primidone too toxic givn fertility etc > encoruage cont w womens aid counselling and stress reduction w sw team
23/10/2020	Dr Emma Sheppard at Data Entry
History	phone call made, answerphone message left to please return call re anxiety is worse. Mob please. (unavailable 11.15-12noon nursery pickup)
10/12/2020	Dr Kathryn Roberts at Easterhouse Health Centre
History	Admitted to hospital with seizure. CT head nil acute. Denied recent alcohol. Has been referred first seizure clinic.
Problem (FIRST)	**[D]Seizure NOS**

Problem (REVIEW)	**Alcohol problem drinking**
History	?Kara still in kinship care. for SW update.
Problem (REVIEW)	**Social worker involved**

22/12/2020	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Social worker involved**
History	arthur reports reassurd that w not intoxicated on the am of assessment ? seizure was shortly after that,I pointed out cannt rule out withdrawa seizure, I hgihglighted we not getting any info asked for copies of correspondnace, he will reply if I will correspond to arthur.jarvis@sw.glasgow.gov.uk . I highighted that to my knwoledge W has no postive adult support in her life other than partner , A does nto disagree, I think W should remain supproted even if Khara retunred to her care
Problem (REVIEW)	**Assault by bite of human being**
History	arthur highlightss that scra decisions made without knoweldge of this 1 11 19 incident because W did not press charges, he remains cocnernd about that

22/12/2020	Dr Kathryn Roberts at Easterhouse Health Centre
History	Phoned social care direct. SW is Arthur Jarvis based in Parkhead office 0141 565 0100 and 565 0140. He is not available when I phoned 11.50am, they have taken message and will ask him to phone back. ?update on Khara - are there any plans to move back to Wendy, note recent hospital admission.
Problem (REVIEW)	**Social worker involved**
Problem (REVIEW)	**[D]Seizure NOS**

08/02/2021	Dr Richard Tran at Telephone Consultation
Problem (REVIEW)	**[D]Seizure NOS**
History	Telephone consultation due to covid pandemic. Patient reports further seizures witnessed by ex partner - one last week and one yesterday evening. Last night's seizure - unsure on exact duration but reports 5-10mins. Description of foaming at mouth, eyes rolling, whole body shaking and being dazed for a while afterwards. Denies fevers. Feels back to normal now. Daughter not present / did not witness event. Recent feeling of anxiety - mainly due to concerns with social work and daughter not living with her full time. Also moving house and friend recently passed away. Denies recent drug use, says only drinks approximatey once per month at present, denies alcohol intake associated with recent events. Note referral to first seizure clinic has been scaled up from routine to urgent by Dr ES. Patient happy with this. D/W Dr AM, no additional action required at present.

08/02/2021	Dr Anne McGinley at Telephone Consultation
History	anxiety bad also had sezuire last night not feeeling since then

16/03/2021	Dr Kathryn Roberts at Easterhouse Health Centre
History	Phoned Wendy 14.21 - she said initially had script in pharmacy but I said not possible as has not had a script printed since 30/12. She admits sometimes forgetting to take, advised this may have negative impact on her mood/anxiety. Discussed measures such as keeping meds somewhere in house she will see them every day and remember to take or setting alarm on her phone to remind her. Discussed planned support from womens aid, the anchor and SW. I don't feel CMHT can add anything currently. Mood is low and tearful, gets angry very quickly, people have said this means she has 'bipolar', I don't think this represents bipolar. Agreed restart meds reg, review few weeks. Denies thoughts of self harm or suicide at all. Says has keys to move house but not moved yet - SAYS MOVING TO 3/2 312 CUMBERNAULD ROAD G31 3LY - PLEASE CHECK NEXT CONTACT IF SHE HAS MOVED - advised will need to register with another gp when moves as G31 not covered by us.
Problem (REVIEW)	**Anxiety with depression**
Problem (REVIEW)	**Social worker involved**
Problem (REVIEW)	**Alcohol problem drinking**
Problem (REVIEW)	**Vulnerable child in family**

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Problem (REVIEW) **Substance misuse of Cannabis**

16/03/2021 Dr Emma Sheppard at Data Entry

Problem (REVIEW) **Vulnerable child in family**

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Problem (REVIEW) **Substance misuse of Cannabis**

History noted

16/03/2021 Dr Kathryn Roberts at Easterhouse Health Centre

History Phoned SW Karine Carlyn 07435 735 240 - lengthy conversation. Multiple events recently leading to change in access for Wendy to Khara. There have been a couple of 'violent incidents' between her and ex-partner James - end of Jan/early feb - police involvement. In January nursery also reported Wendy appeared under the influence and a unannounced SW visit to the house corroborated this. SW says house strongly smelt of cannabis, poss tried to have been covered by huge amounts of air freshener. Karine says Wendy became angry ++ with the other SW present and 'came within an inch of assaulting her' - police were involved. Also Wendy knows ex partner James not allowed to stay overnight in house and Khara told carers/SW that daddy had stayed over and mummy had told her not to tell. Also incident this week of Wendy shouting and aggressive towards kinship carer in front of daughter. A childrens panel has been called, likely to be held couple of weeks. SW Karine under impression Wendy is taking mirtazapine and propranolol reg but has not ordered since December - I will d/w Wendy. I don't think CMHT are best placed for 'anger issues' - this is not a medical diagnosis. Suggest SW support Wendy with accessing The Anchor or Moira Anderson with regards childhood trauma and support, suggested also Tom Allen centre for anger issues. Also been referred to womens aid for support. Advised still awaiting seizure clinic.

Problem (REVIEW) **Social worker involved**

16/03/2021 Dr Kathryn Roberts at Easterhouse Health Centre

History req to be reffered to Auchinlea fast T if possible . 07912347436. Phoned 12.18 Wendy says has been speaking to SW Karine Carlyn 07435 735 240 and told her to speak to GP about CMHT referral for 'anger issues' as Wendy says she got angry and 'chased the SW' out the house when accused of smoking cannabis. Says was prev getting daily unsupervised contact with daughter Khara but has been reduced to twice weekly supervised visits, really upset with this, a bit teary. Also says has recently lost a close friend.. Advised Wendy I would phone SW to discuss and get back to her. Wendy denies any drug use. Says 'hardly drinks' 'rare occasion now'. Last drink last night - 3 G+T's. Says has been falling out with Kharas kinship carer who Wendy says has been limiting video contact with Khlara.

Problem (REVIEW) **Anxiety with depression**

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Problem (REVIEW) **Social worker involved**

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Problem (REVIEW) **Alcohol problem drinking**

16/03/2021 Dr Emma Sheppard at Data Entry

History phone call made x2 , answerphone message left to please return call giff gaff . req to be reffered to Auchinlea fast T if possible . 07912347436

17/03/2021 Dr Anne McGinley at Data Entry

History anxiety and tremors looking for adv. message left on voicemail to call us 10.50h

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18/03/2021 Dr Kathryn Roberts at Easterhouse Health Centre

History rtnd GP call from yest. Please call after 11 as has contact with child. Phoned 13.40 Says her social worker has asked her to call us again as Wendy feels anxiety and tremor really bad a the moment. Says has been takign propranolol but prn. Advised I would suggest TDS at the moment to help tremor and anxiety, needs to be compliant with mirtazapine for it to work at its best - has not had script since December, plans to collect new script from pharmacy today. A little irritable on phone when I suggested there may not be something we can prescribe to help with anxiety and may be that needs other supports such as the ones we discussed and spoke about with her SW too. 'surely theres something better you can prescribe?' Could consider switch from mirtazapine and or inc dose of bblocker but I think needs to come in for f2f review given sudden escalation in symptoms and contact with us.

Problem (REVIEW) **Anxiety with depression**

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Problem (REVIEW)	**Has a tremor**
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23/03/2021 16:00	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Anxiety with depression**
History	approrpitely low, given sress of dispute w inlaws. not suicidal ,
Examination	O/E - weight 83 Kg has gained, wants to stay on mirtaz cs helps her sleepp > try lower dose for sedation wout wt gain
Comment	agrees occ health re treamour. is moving 3-2 312 cumbernauld rd G31 3LY permamanet move > rereg. al the best
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Problem (REVIEW)	**Has a tremor**
History	says struggels to write
Examination	neuo exam reflexes brisk but symoetcial no bulbar nor facial weekness, some intention tremor
Medication	Mirtazapine Tablets 30 mg *56 TABLET ONE TO BE TAKEN AT NIGHT*
Comment	not planning preg bu avoid primidone mnoentehess for se. try occ health/physio approach
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Problem (REVIEW)	**Vulnerable child in family**
History	I told w that as she has no confidant I recommend ongoing support for her, shde doesn't disagree. I sugest avoid alcohol/drugs given Hxseuizrure, she denies current, upset that current carer has been in hosp w what W understands to be widrawal seizre
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30/03/2021	Dr Emma Sheppard at Data Entry
Problem (REVIEW)	**Vulnerable child in family**
History	discussed at safeguarding meeting no dosordered thought nor bipolar NOC re khara
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26/05/2021	Dr Lachlan Calder at Phone Encounter
History	SW Karen (07435735240) trying to get in touch with us. I phoned back - no answer. I have left a message on her answering machine.
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26/05/2021	Mrs Donna Rogers at Easterhouse Health Centre
Comment	Safegauarding - Admin task called pt today @ 9.15. PT confirmed she has moved and is now in G31 3LY. full address is flat 3-2 312 Cumbernauld Road. I advised Pt she is now outwith our area, she is aware of this and will be looking for new GP. Address passed to PM.

Medication

Current

Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
23/10/2020	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED 84 TABLET	13/04/2021P	Dr Emma Sheppard	REPEAT

Past

Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
23/03/2021	**Cerelle Tablets 75 micrograms** 1 Tab Daily 168 tablet	23/03/2021P	Dr Emma Sheppard	ACUTE
23/03/2021	**Mirtazapine Tablets 30 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	23/03/2021P	Dr Emma Sheppard	ACUTE
30/09/2020	**Cerelle Tablets 75 micrograms** 1 Tab Daily 168 tablet	01/10/2020P	Dr Anne McGinley	ACUTE
13/07/2020	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	17/08/2020P	Dr Anne McGinley	ACUTE
13/07/2020	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 28 tablet	17/08/2020P	Dr Anne McGinley	ACUTE
27/05/2020	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	01/06/2020P	Dr Anne McGinley	ACUTE
27/05/2020	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 28 tablet	01/06/2020P	Dr Anne McGinley	ACUTE
28/04/2020	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	28/04/2020P	Dr Anne McGinley	ACUTE
	Propranolol Hydrochloride Tablets 10 mg ONE TO BE			

28/04/2020	TAKEN UP TO 3 THREE TIMES A DAY IF NEEDED FOR ANXIETY 56 tablet	28/04/2020P	Dr Anne McGinley	ACUTE
28/04/2020	**Clotrimazole Cream 1 %** APPLY TWO TIMES DAILY TO BACK FOR 1-2 WEEKS 40 gram	01/06/2020P	Dr Anne McGinley	ACUTE
06/04/2020	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 14 tablet	06/04/2020P	Dr Anne McGinley	ACUTE
06/04/2020	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 28 tablet	06/04/2020P	Dr Anne McGinley	ACUTE
06/04/2020	**Cerelle Tablets 75 micrograms** 1 Tab Daily 84 tablet	06/04/2020P	Dr Anne McGinley	ACUTE
21/02/2020	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	21/02/2020P	Dr Anne McGinley	ACUTE
21/02/2020	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 56 tablet	21/02/2020P	Dr Anne McGinley	ACUTE
15/10/2019	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	15/10/2019P	Dr Anne McGinley	ACUTE
15/10/2019	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 56 tablet	15/10/2019P	Dr Anne McGinley	ACUTE
15/10/2019	**Cerelle Tablets 75 micrograms** ONE EVERY DAY 168 tablet	15/10/2019P	Dr Anne McGinley	ACUTE
16/09/2019	**Co-Amoxiclav 500/125 Tablets** ONE TO BE TAKEN THREE TIMES A DAY 21 tablet	16/09/2019P	Dr Anne McGinley	ACUTE
16/09/2019	**Clotrimazole And Hydrocortisone Cream 1 % + 1 %** APPLY THINLY TO THE AFFECTED AREA TWICE DAILY 15 gram	16/09/2019P	Dr Anne McGinley	ACUTE
25/07/2019	**Cerelle Tablets 75 micrograms** ONE EVERY DAY 168 tablet	25/07/2019P	Dr Anne McGinley	ACUTE
25/07/2019	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 56 tablet	23/08/2019P	Dr Anne McGinley	ACUTE
20/06/2019	**Trimethoprim Tablets 200 mg** ONE TO BE TAKEN TWICE A DAY 14 tablet	20/06/2019P	Dr Anne McGinley	ACUTE
10/06/2019	**Trimethoprim Tablets 200 mg** ONE TO BE TAKEN TWICE A DAY 6 TABLET	10/06/2019P	Dr Anne McGinley	ACUTE
17/05/2019	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 56 tablet	13/06/2019P	Dr Anne McGinley	ACUTE
19/03/2019	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 56 tablet	19/03/2019P	Dr Emma Sheppard	ACUTE
18/02/2019	**Ketoconazole Shampoo 2 %** APPLY ONCE DAILY TO THE AFFECTED AREA FOR 5 DAYS 120 ML	18/02/2019P	Dr Anne McGinley	ACUTE
18/02/2019	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	23/08/2019P	Dr Anne McGinley	ACUTE
21/01/2019	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 14 tablet	21/01/2019P	Dr Anne McGinley	ACUTE
31/12/2018	**Cerelle Tablets 75 micrograms** ONE EVERY DAY 168 tablet	31/12/2018P	Dr Anne McGinley	ACUTE
18/12/2018	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY PRN 28 tablet	18/12/2018P	Dr Anne McGinley	ACUTE
20/11/2018	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY 56 tablet	20/11/2018P	Dr Anne McGinley	ACUTE
18/10/2018	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY FOR ANXIETY 56 tablet	18/10/2018P	Dr Anne McGinley	ACUTE
25/09/2018	**Mirtazapine Tablets 45 mg** 1 Tab At night 28 tablet	14/12/2018P	Dr Anne McGinley	ACUTE
25/09/2018	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TP THREE TIMES A DAY IF NEEDED FOR ANXIETY 56 tablet	25/09/2018P	Dr Anne McGinley	ACUTE
15/08/2018	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	15/08/2018P	Dr Anne McGinley	ACUTE
15/08/2018	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY IF REQUIRED FOR ANXIETY SYMPTOMS 56 tablet	15/08/2018P	Dr Anne McGinley	ACUTE
11/07/2018	**Cerelle Tablets 75 micrograms** ONE EVERY DAY 168 tablet	11/07/2018P	Dr Anne McGinley	ACUTE
11/07/2018	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY 84 TABLET	11/07/2018P	Dr Anne McGinley	ACUTE
11/07/2018	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	11/07/2018P	Dr Anne McGinley	ACUTE
12/03/2018	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	24/05/2018P	Dr Anne McGinley	ACUTE
12/03/2018	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY 84 TABLET	24/05/2018P	Dr Anne McGinley	ACUTE
29/01/2018	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY 84 TABLET	29/01/2018P	Dr Anne McGinley	ACUTE
29/01/2018	**Cerelle Tablets 75 micrograms** ONE EVERY DAY 168 tablet	29/01/2018P	Dr Anne McGinley	ACUTE

21/12/2017	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	29/01/2018P	Dr Anne McGinley	ACUTE
21/09/2017	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	21/09/2017P	Dr Anne McGinley	ACUTE
21/09/2017	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY 84 TABLET	21/09/2017P	Dr Anne McGinley	ACUTE
27/07/2017	**Beclometasone Aqueous nasal spray 50 micrograms/actuation** TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY 200 DOSE	27/07/2017P	Dr Anne McGinley	ACUTE
27/07/2017	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	27/07/2017P	Dr Anne McGinley	ACUTE
27/07/2017	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY 84 TABLET	27/07/2017P	Dr Anne McGinley	ACUTE
23/06/2017	**Naseptin Cream** APPLY TWICE A DAY 20 gram	23/06/2017P	Dr Emma Sheppard	ACUTE
23/06/2017	**Ibuprofen Tablets 400 mg** ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD 24 tablet	23/06/2017P	Dr Emma Sheppard	ACUTE
23/06/2017	**Cerelle Tablets 75 micrograms** ONE EVERY DAY 168 tablet	23/06/2017P	Dr Emma Sheppard	ACUTE
05/06/2017	**Cetirizine Hydrochloride Tablets 10 mg** ONE TO BE TAKEN EACH DAY 60 tablet	05/06/2017P	Dr Anne McGinley	ACUTE
05/06/2017	**Beclometasone Aqueous nasal spray 50 micrograms/actuation** TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY 200 DOSE	05/06/2017P	Dr Anne McGinley	ACUTE
30/05/2017	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	30/05/2017P	Dr Anne McGinley	ACUTE
30/05/2017	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY 84 TABLET	30/05/2017P	Dr Anne McGinley	ACUTE
30/03/2017	**Flucloxacillin Capsules 500 mg** ONE TO BE TAKEN FOUR TIMES A DAY 28 CAPSULE	30/03/2017P	Dr Anne McGinley	ACUTE
10/03/2017	**Cerelle Tablets 75 micrograms** ONE A DAY EVERY DAY 84 tablet	07/04/2017P	Dr Emma Sheppard	ACUTE
10/03/2017	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY 84 TABLET	10/03/2017P	Dr Emma Sheppard	ACUTE
21/02/2017	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	07/04/2017P	Dr Emma Sheppard	ACUTE
21/02/2017	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED 28 tablet	21/02/2017P	Dr Anne McGinley	ACUTE
05/12/2016	**Amoxicillin Capsules 500 mg** ONE TO BE TAKEN THREE TIMES A DAY 21 capsule	05/12/2016P	Dr Anne McGinley	ACUTE
15/11/2016	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	22/12/2016P	Dr Anne McGinley	ACUTE
11/10/2016	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	11/10/2016P	Dr Anne McGinley	ACUTE
11/10/2016	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED 28 tablet	22/12/2016P	Dr Anne McGinley	ACUTE
15/09/2016	**Mirtazapine Tablets 15 mg** ONE TO BE TAKEN AT NIGHT 10 tablet	15/09/2016P	Dr Marie Wilson	ACUTE
26/08/2016	**Mirtazapine Tablets 30 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	26/08/2016P	Dr Anne McGinley	ACUTE
26/08/2016	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED 28 tablet	26/08/2016P	Dr Anne McGinley	ACUTE
14/07/2016	**Mirtazapine Tablets 30 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	14/07/2016P	Dr Marie Wilson	ACUTE
18/05/2016	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED 28 tablet	14/07/2016P	Dr Marie Wilson	ACUTE
18/05/2016	**Beclometasone Aqueous nasal spray 50 micrograms/actuation** TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY 200 DOSE	18/05/2016P	Dr Anne McGinley	ACUTE
18/05/2016	**Cetirizine Hydrochloride Tablets 10 mg** ONE TO BE TAKEN EACH DAY 56 TABLET	18/05/2016P	Dr Anne McGinley	ACUTE
29/04/2016	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY 21 tablet	03/05/2016P	Dr Anne McGinley	ACUTE
29/04/2016	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	08/06/2016P	Dr Anne McGinley	ACUTE
29/04/2016	**Amoxicillin Capsules 500 mg** ONE TO BE TAKEN THREE TIMES A DAY 15 CAPSULE	03/05/2016P	Dr Anne McGinley	ACUTE
29/04/2016	**Salbutamol Cfc-free inhaler 100 micrograms/puff** ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY 1 INHALER	29/04/2016P	Dr Emma Sheppard	ACUTE
29/04/2016	**Volumatic Spacer device** TO BE USED AS DIRECTED 1 device	29/04/2016P	Dr Emma Sheppard	ACUTE
01/04/2016	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY 56 tablet	01/04/2016P	Dr Anne McGinley	ACUTE
15/03/2016	**Hydrocortisone And Miconazole Cream 1 % + 2 %** APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE DAILY 30 GRAM	15/03/2016P	Dr Anne McGinley	ACUTE
15/03/2016	**Paracetamol Tablets 500 mg** TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS) 56 TABLET	15/03/2016P	Dr Anne McGinley	ACUTE

15/03/2016	**Ibuprofen Tablets 400 mg** ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD 42 TABLET	15/03/2016P	Dr Anne McGinley	ACUTE
15/03/2016	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	01/04/2016P	Dr Anne McGinley	ACUTE
06/01/2016	**Mirtazapine Tablets 30 mg** 1 Tab At night 28 tablet	01/02/2016P	Dr Anne McGinley	ACUTE
06/01/2016	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY 56 tablet	18/02/2016P	Dr Marie Wilson	ACUTE
02/12/2015	**Amoxicillin Capsules 500 mg** ONE TO BE TAKEN THREE TIMES A DAY 15 CAPSULE	02/12/2015P	Dr Anne McGinley	ACUTE
02/12/2015	**Ibuprofen Tablets 400 mg** ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD 42 TABLET	02/12/2015P	Dr Anne McGinley	ACUTE
02/12/2015	**Omeprazole Capsules (Gastro-Resistant) 20 mg** ONE TO BE TAKEN EACH DAY 28 capsule	02/12/2015P	Dr Anne McGinley	ACUTE
24/11/2015	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY IF NEEDED 56 Tablet(s)	24/11/2015P	Dr Anne McGinley	ACUTE
24/11/2015	**Mirtazapine Tablets 30 mg** ONE TO BE TAKEN AT NIGHT 14 tablet	24/11/2015P	Dr Anne McGinley	ACUTE
20/10/2015	**Cerumol Ear drops** PUT FIVE DROPS INTO THE LEFT EAR(S) TWICE A DAY FOR THREE DAYS 11 ML	20/10/2015P	Dr Emma Sheppard	ACUTE
20/10/2015	**Betnesol-N Drops** APPLY TWO TO THREE DROPS INTO THE RIGHT EAR(S) THREE TO FOUR TIMES DAILY FOR UP TO 14 DAYS 10 ML	20/10/2015P	Dr Emma Sheppard	ACUTE
20/10/2015	**Ibuprofen Tablets 400 mg** ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD 12 tablet	20/10/2015P	Dr Emma Sheppard	ACUTE
20/10/2015	**Omeprazole Capsules (Gastro-Resistant) 20 mg** ONE TO BE TAKEN EACH DAY 4 capsule	20/10/2015P	Dr Emma Sheppard	ACUTE
05/10/2015	**Propranolol Hydrochloride Tablets 80 mg** ONE TO BE TAKEN THREE TIMES A DAY 84 tablet	05/10/2015P	Dr Anne McGinley	ACUTE
30/09/2015	**Co-Codamol 8/500 Tablets** ONE OR TWO TO BE TAKEN FOUR TIMES A DAY 60 tablet	30/09/2015P	Dr Anne McGinley	ACUTE
30/09/2015	**Ibuprofen Gel 5 %** APPLY 3 TIMES A DAY 30 gram	05/10/2015P	Dr Anne McGinley	ACUTE
30/09/2015	**Mirtazapine Tablets 30 mg** 1 Tab At night 28 tablet	30/09/2015P	Dr Anne McGinley	ACUTE
17/09/2015	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY 56 tablet	30/09/2015P	Dr Anne McGinley	ACUTE
17/09/2015	**Mirtazapine Tablets 15 mg** 1 Tab At night 14 tablet	17/09/2015P	Dr Anne McGinley	ACUTE
11/08/2015	**Mirtazapine Tablets 15 mg** ONE TO BE TAKEN ALTERNATE DAYS AND THEN STOP 7 tablet	11/08/2015P	Dr Marie Wilson	ACUTE
14/05/2015	**Mirtazapine Tablets 15 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	14/05/2015P	Dr Marie Wilson	ACUTE
08/04/2015	**Cetirizine Hydrochloride Tablets 10 mg** ONE TO BE TAKEN EACH DAY 56 TABLET	08/04/2015P	Dr Anne McGinley	ACUTE
08/04/2015	**Beclometasone Aqueous nasal spray 50 micrograms/actuation** TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY 200 DOSE	08/04/2015P	Dr Anne McGinley	ACUTE
26/03/2015	**Mirtazapine Tablets 15 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	26/03/2015P	Dr Marie Wilson	ACUTE
06/02/2015	**Piroxicam Gel 0.5 %** Rub into the affected site three to four times daily 60 GRAM	06/02/2015P	Dr Emma Sheppard	ACUTE
20/01/2015	**Mirtazapine Tablets 15 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	20/01/2015P	Dr Anne McGinley	ACUTE
14/10/2014	**Mirtazapine Tablets 15 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	24/11/2014P	Dr Anne McGinley	ACUTE
05/09/2014	**Trimethoprim Tablets 200 mg** ONE TO BE TAKEN TWICE A DAY 6 TABLET	05/09/2014P	Dr Emma Sheppard	ACUTE
01/09/2014	**Mirtazapine Tablets 15 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	01/09/2014P	Dr Anne McGinley	ACUTE
26/06/2014	**Mirtazapine Tablets 15 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	26/06/2014P	Dr Emma Sheppard	ACUTE
18/03/2014	**Mirtazapine Tablets 15 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	29/04/2014P	Dr Emma Sheppard	ACUTE
18/03/2014	**Ibuprofen Gel 5 %** APPLY 3 TIMES A DAY 30 gram	18/03/2014P	Dr Emma Sheppard	ACUTE
18/03/2014	**Elasticated Tubular Bandage Bp 7.5 cm size D** TO BE USED AS DIRECTED 0.5 m	18/03/2014P	Dr Emma Sheppard	ACUTE
04/03/2014	**Mirtazapine Tablets 15 mg** ONE TO BE TAKEN AT NIGHT 20 tablet	04/03/2014P	Dr Emma Sheppard	ACUTE
04/03/2014	**Hydrocortisone Cream 1 %** APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE DAILY 30 GRAM	04/03/2014P	Dr Emma Sheppard	ACUTE
04/03/2014	**Co-Magaldrox 195/220 Sugar-free suspension** 10-20MLS TO BE TAKEN AFTER FOOD AND AT BEDTIME AS REQUIRED 500 ML	04/03/2014P	Dr Emma Sheppard	ACUTE
25/02/2014	**Omeprazole Capsules (Gastro-Resistant) 20 mg** ONE TO BE TAKEN EACH DAY 7 capsule	25/02/2014P	Dr Emma Sheppard	ACUTE
13/02/2014	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 30 capsule	13/02/2014P	Dr Marie Wilson	ACUTE
16/12/2013	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 30 capsule	20/01/2014P	Dr Anne McGinley	ACUTE

16/12/2013	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY CAN BE ISSUED AS HALF 80MG TABLET TRHEE TIMES A DAY 56 tablet	20/01/2014P	Dr Anne McGinley	ACUTE
24/10/2013	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY CAN BE ISSUED AS HALF 80MG TABLET TRHEE TIMES A DAY 56 tablet	22/11/2013P	Dr Anne McGinley	ACUTE
24/10/2013	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 30 capsule	22/11/2013P	Dr Anne McGinley	ACUTE
27/09/2013	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 30 capsule	27/09/2013P	Dr Emma Sheppard	ACUTE
27/09/2013	**Cilest Tablets** AS DIRECTED 126 tablet	27/09/2013P	Dr Emma Sheppard	ACUTE
20/08/2013	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY CAN BE ISSUED AS HALF 80MG TABLET TRHEE TIMES A DAY 56 tablet	27/09/2013P	Dr Emma Sheppard	ACUTE
08/08/2013	**Paracetamol Tablets 500 mg** TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS) 32 tablet	08/08/2013P	Dr Marie Wilson	ACUTE
01/08/2013	**Omeprazole Capsules (Gastro-Resistant) 20 mg** ONE TO BE TAKEN EACH DAY 21 capsule	01/08/2013P	Dr Emma Sheppard	ACUTE
30/07/2013	**Hydrocortisone Cream 1 %** APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE DAILY 30 GRAM	30/07/2013P	Dr Emma Sheppard	ACUTE
30/07/2013	**Peptac Liquid (aniseed)** 10-20ML TO BE TAKEN AFTER MEALS AND AT BEDTIME 100 ml	30/07/2013P	Dr Emma Sheppard	ACUTE
30/07/2013	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 30 capsule	22/08/2013P	Dr Anne McGinley	ACUTE
19/07/2013	**Cetirizine Hydrochloride Tablets 10 mg** ONE TO BE TAKEN EACH DAY 56 TABLET	19/07/2013P	Dr Anne McGinley	ACUTE
12/07/2013	**Phenoxymethylpenicillin Tablets 250 mg** TWO TABLETS FOUR TIMES DAILY 56 tablet	12/07/2013P	Dr Marie Wilson	ACUTE
28/06/2013	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 30 capsule	28/06/2013P	Dr Emma Sheppard	ACUTE
28/06/2013	**Cilest Tablets** AS DIRECTED 126 tablet	28/06/2013P	Dr Emma Sheppard	ACUTE
19/06/2013	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY PRN 84 TABLET	16/07/2013P	Dr Anne McGinley	ACUTE
14/06/2013	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 14 capsule	14/06/2013P	Dr Emma Sheppard	ACUTE
14/06/2013	**Beclometasone Aqueous nasal spray 50 micrograms/actuation** TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY 200 DOSE	14/06/2013P	Dr Emma Sheppard	ACUTE
04/06/2013	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 10 capsule	04/06/2013P	Dr Emma Sheppard	ACUTE
28/05/2013	**Cilest Tablets** ONE A DAY SEE GP BEFORE NEXT PLEASE 21 tablet	28/05/2013P	Dr Emma Sheppard	ACUTE
23/05/2013	**Paracetamol Tablets 500 mg** TWO TABLETS TO BE TAKEN FOUR TIMES DAILY 32 tablet	23/05/2013P	Dr Anne McGinley	ACUTE
23/05/2013	**Piroxicam Gel 0.5 %** APPLY 3 TIMES A DAY 60 gram	23/05/2013P	Dr Anne McGinley	ACUTE
23/05/2013	**Cetirizine Hydrochloride Tablets 10 mg** ONE TO BE TAKEN EACH DAY 56 TABLET	23/05/2013P	Dr Anne McGinley	ACUTE
18/04/2013	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY PRN 84 TABLET	28/05/2013P	Dr Emma Sheppard	ACUTE
04/03/2013	**Paracetamol Tablets 500 mg** TWO TABLETS TO BE TAKEN FOUR TIMES DAILY 32 tablet	04/03/2013P	Dr Anne McGinley	ACUTE
11/02/2013	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY PRN 84 TABLET	18/03/2013P	Dr Marie Wilson	ACUTE
14/01/2013	**Omeprazole Capsules (Gastro-Resistant) 20 mg** ONE TO BE TAKEN EACH DAY 14 capsule	14/01/2013P	Dr Anne McGinley	ACUTE
11/01/2013	**Amoxicillin Capsules 500 mg** ONE TO BE TAKEN THREE TIMES A DAY 15 CAPSULE	11/01/2013P	Dr Emma Sheppard	ACUTE
04/01/2013	**Cilest Tablets** TO BE TAKEN AS DIRECTED 63 tablet	04/01/2013P	Dr Marie Wilson	ACUTE
30/11/2012	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY PRN 84 TABLET	04/01/2013P	Dr Marie Wilson	ACUTE
30/11/2012	**Cilest Tablets** 1 Tab Daily 126 tablet	30/11/2012P	Dr Anne McGinley	ACUTE
13/09/2012	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY PRN 84 TABLET	24/10/2012P	Dr Anne McGinley	ACUTE
10/09/2012	**Amoxicillin Capsules 500 mg** ONE TO BE TAKEN THREE TIMES A DAY 15 CAPSULE	10/09/2012P	Dr Emma Sheppard	ACUTE
04/09/2012	**Omeprazole Capsules (Gastro-Resistant) 20 mg** ONE TO BE TAKEN EACH DAY 42 capsule	04/09/2012P	Dr Emma Sheppard	ACUTE
04/09/2012	**Fluoxetine Hydrochloride Capsules 20 mg** TWO TO BE TAKEN EACH DAY WEEKLY DISEPNSE PLEASE 56 CAPSULE	04/09/2012P	Dr Emma Sheppard	ACUTE
21/08/2012	**Cilest Tablets** TO BE TAKEN AS DIRECTED 63 tablet	21/08/2012P	Dr Emma Sheppard	ACUTE
21/08/2012	**Peptac Liquid (peppermint)** 10-20ML TO BE TAKEN AFTER MEALS AND AT BEDTIME 500 ML	21/08/2012P	Dr Emma Sheppard	ACUTE
21/08/2012	**Fluoxetine Hydrochloride Capsules 20 mg** ONE OR TWO TO BE TAKEN EACH DAY 56 CAPSULE	21/08/2012P	Dr Emma Sheppard	ACUTE
26/07/2012	**Cilest Tablets** 1 Tab Daily AS DIRECTED 21 tablet	26/07/2012P	Dr Anne McGinley	ACUTE
26/07/2012	**Fluoxetine Hydrochloride Capsules 20 mg** TWO TO BE TAKEN DAILY 56 CAPSULE	26/07/2012P	Dr Anne McGinley	ACUTE

26/07/2012	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY PRN 84 TABLET	26/07/2012P	Dr Anne McGinley	ACUTE
07/06/2012	**Cetirizine Hydrochloride Tablets 10 mg** ONE TO BE TAKEN EACH DAY 56 TABLET	07/06/2012P	Dr Marie Wilson	ACUTE
07/06/2012	**Crotamiton Cream 10 %** APPLY THINLY TWO TO THREE TIMES A DAY 100 GRAM	07/06/2012P	Dr Marie Wilson	ACUTE
06/06/2012	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY PRN 84 TABLET	06/06/2012P	Dr Anne McGinley	ACUTE
22/05/2012	**Betamethasone And Neomycin Drops 0.1 % + 0.5 %** 3 DROPS FOUR TIMES A DAY 5 ml	22/05/2012P	Dr Emma Sheppard	ACUTE
11/05/2012	**Flucloxacillin Capsules 500 mg** ONE TO BE TAKEN FOUR TIMES A DAY 20 capsule	11/05/2012P	Dr Emma Sheppard	ACUTE
11/05/2012	**Fluoxetine Hydrochloride Capsules 20 mg** TWO TO BE TAKEN DAILY 56 CAPSULE	07/06/2012P	Dr Marie Wilson	ACUTE
11/05/2012	**Cerumol Ear drops** PUT FIVE DROPS INTO THE AFFECTED EAR(S) TWICE A DAY FOR 2 WEEKS 11 ML	07/06/2012P	Dr Marie Wilson	ACUTE
17/04/2012	**Olive Oil Ear drops** PUT THREE TO FOUR DROPS INTO THE AFFECTED EAR(S) TWO TO THREE TIMES A DAY FOR THREE TO FIVE DAYS 10 ML	17/04/2012P	Dr Emma Sheppard	ACUTE
05/04/2012	**Gentamicin Ear/eye drops 0.3 %** ONE OR TWO DROPS UP TO SIX TIMES A DAY, OR MORE FREQUENTLY IF REQUIRED 10 ML	05/04/2012P	Dr Emma Sheppard	ACUTE
05/04/2012	**Amoxicillin Capsules 500 mg** ONE TO BE TAKEN THREE TIMES A DAY 15 CAPSULE	05/04/2012P	Dr Emma Sheppard	ACUTE
23/03/2012	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY 168 tablet	23/03/2012P	Dr Emma Sheppard	ACUTE
16/03/2012	**Fluoxetine Hydrochloride Capsules 20 mg** TWO TO BE TAKEN DAILY 56 CAPSULE	16/03/2012P	Dr Anne McGinley	ACUTE
27/02/2012	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY SEE DOC FOR NEXT 21 tablet	16/03/2012P	Dr Anne McGinley	ACUTE
14/02/2012	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 28 capsule	14/02/2012P	Dr Marie Wilson	ACUTE
05/01/2012	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY SEE DOC FOR NEXT 42 tablet	14/02/2012P	Dr Marie Wilson	ACUTE
05/01/2012	**Fluoxetine Hydrochloride Capsules 20 mg** TWO TO BE TAKEN EACH DAY WEEKLY DISPENSE 30 capsule	05/01/2012P	Dr Emma Sheppard	ACUTE
16/11/2011	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	16/11/2011P	Dr Gayle Henderson	ACUTE
16/11/2011	**Olive Oil Ear drops** PUT THREE TO FOUR DROPS INTO THE AFFECTED EAR(S) TWO TO THREE TIMES A DAY FOR THREE TO FIVE DAYS 10 ML	16/11/2011P	Dr Gayle Henderson	ACUTE
01/11/2011	**Fluoxetine Hydrochloride Capsules 20 mg** TWO TO BE TAKEN DAILY 56 CAPSULE	01/11/2011P	Dr Emma Sheppard	ACUTE
28/09/2011	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	28/09/2011P	Dr Gayle Henderson	ACUTE
27/09/2011	**Fluoxetine Hydrochloride Capsules 20 mg** TWO TO BE TAKEN DAILY 56 CAPSULE	27/09/2011P	Dr Dalila Malek	ACUTE
27/09/2011	**Zopiclone Tablets 7.5 mg** 1 Tab At night 14 tablet	27/09/2011P	Dr Dalila Malek	ACUTE
14/09/2011	**Fluoxetine Hydrochloride Capsules 20 mg** TAKE 20 MG THEN 40 MG ALTERNATE DAYS 40 capsule	14/09/2011P	Dr Anne McGinley	ACUTE
26/08/2011	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY WEEKLY DISPENSE 28 capsule	26/08/2011P	Dr Emma Sheppard	ACUTE
11/08/2011	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	11/08/2011P	Dr Dalila Malek	ACUTE
29/07/2011	**Miconazole Nitrate Cream 2 %** APPLY TWICE DAILY CONTINUING FOR 10 DAYS AFTER LESIONS HAVE HEALED 30 GRAM	29/07/2011P	Dr Emma Sheppard	ACUTE
29/07/2011	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY DISPENSE FORTNIGHTLY 28 capsule	29/07/2011P	Dr Emma Sheppard	ACUTE
19/07/2011	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 10 capsule	19/07/2011P	Dr Emma Sheppard	ACUTE
12/07/2011	**Citalopram Hydrobromide Tablets 10 mg** 1 Tab Daily WEKLY DISPENSE 28 tablet	12/07/2011P	Dr Locum Locum	ACUTE
12/07/2011	**Beclometasone Aqueous nasal spray 50 micrograms/actuation** TWO SPRAYS TO BE USED IN EACH NOSTRIL TWICE A DAY 180 dose	12/07/2011P	Dr Locum Locum	ACUTE
12/07/2011	**Cetirizine Hydrochloride Tablets 10 mg** 1 Tab Daily 30 TABS	11/08/2011P	Dr Locum Locum	ACUTE
16/06/2011	**Diclofenac Sodium E/c tablets 50 mg** ONE TO BE TAKEN THREE TIMES A DAY WITH OR AFTER FOOD 28 tablet	16/06/2011P	Dr Marie Wilson	ACUTE
16/06/2011	**Co-Codamol 30/500 Tablets** TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS) 60 tablet	16/06/2011P	Dr Marie Wilson	ACUTE
16/06/2011	**Beclometasone Aqueous nasal spray 50 micrograms/actuation** TWO SPRAYS TO BE USED IN	16/06/2011P	Dr Marie Wilson	ACUTE

	EACH NOSTRIL TWICE A DAY 400 DOSE			
15/06/2011	**Co-Codamol 8/500 Tablets** ONE OR TWO TO BE TAKEN FOUR TIMES A DAY 32 tablet	15/06/2011P	Dr Anne McGinley	ACUTE
07/06/2011	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	12/07/2011P	Dr Locum Locum	ACUTE
13/04/2011	**Cilest Tablets** 1 Tab Daily 126 tablet	13/04/2011P	Dr Locum Locum	ACUTE
13/04/2011	**Cilest Tablets** 1 Tab Daily AS DIRECTED 63 tablet	16/03/2012P	Dr Anne McGinley	ACUTE
31/03/2011	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	05/05/2011P	Dr Marie Wilson	ACUTE
16/02/2011	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	16/02/2011P	Dr Marie Wilson	ACUTE
31/01/2011	**Temazepam Tablets 10 mg** ONE TO BE TAKEN AT NIGHT 7 TABLET	31/01/2011P	Dr Joy Rafferty	ACUTE
31/12/2010	**Cilest Tablets** 1 Tab Daily AS DIRECTED 63 tablet	31/12/2010P	Dr Marie Wilson	ACUTE
01/12/2010	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	29/12/2010P	Dr Anne McGinley	ACUTE
19/10/2010	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	19/10/2010P	Dr Emma Sheppard	ACUTE
17/09/2010	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	17/09/2010P	Dr Emma Sheppard	ACUTE
13/08/2010	**Aciclovir Cream 5 %** 1 CREAM	13/08/2010P	Dr Marie B Wilson	ACUTE
13/08/2010	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	13/08/2010P	Dr Marie B Wilson	ACUTE
13/08/2010	**Cilest Tablets** 126 TABS	13/08/2010P	Dr Marie B Wilson	ACUTE
08/07/2010	**Cetirizine Hydrochloride Tablets 10 mg** 1 Tab Daily 30 TABS	08/07/2010P	Dr Marie B Wilson	ACUTE
08/07/2010	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab 3 times daily 100 TABS	08/07/2010P	Dr Marie B Wilson	ACUTE
21/04/2010	**Flucloxacillin Capsules 250 mg** 1 Cap 4 times daily 20 CAPS	21/04/2010P	Ms Registrar.	ACUTE
26/03/2010	**Fusidic Acid M/R Eye Drops 1 %** 1 Drop Twice daily 5 DROPS	26/03/2010P	Dr Emma Sheppard	ACUTE
04/02/2010	**Cilest Tablets** 126 TABS	04/02/2010P	Dr Marie B Wilson	ACUTE
04/02/2010	**Ibuprofen Tablets 400 mg** 1 Tab 3 times daily 48 TABS	04/02/2010P	Dr Marie B Wilson	ACUTE
23/10/2020	**Propranolol Hydrochloride Tablets 40 mg** 1 Tab Twice daily 56 tablet	01/04/2016P	Dr Emma Sheppard	REPEAT
30/09/2020	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	16/03/2021P	Dr Emma Sheppard	REPEAT
30/09/2020	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED FOR ANXIETY 28 tablet	01/10/2020P	Dr Anne McGinley	REPEAT
14/11/2019	**Propranolol Hydrochloride Tablets 10 mg** ONE TO BE TAKEN UP TO THREE TIMES A DAY AS REQUIRED FOR ANXIETY 28 TABLET	29/01/2020P	Dr Anne McGinley	REPEAT
14/11/2019	**Mirtazapine Tablets 45 mg** ONE TO BE TAKEN AT NIGHT 28 tablet	29/01/2020P	Dr Anne McGinley	REPEAT
05/09/2014	**Folic Acid Tablets 400 micrograms** ONE TO BE TAKEN EACH DAY 56 TABLET	14/07/2016P	Dr Marie Wilson	REPEAT
13/02/2014	**Propranolol Hydrochloride Tablets 40 mg** ONE TO BE TAKEN THREE TIMES A DAY CAN BE ISSUED AS HALF 80MG TABLET TRHEE TIMES A DAY 56 tablet	15/07/2015P	Dr Anne McGinley	REPEAT

McLeish Wendy CHI: 2505876061

Final Discharge Letter

NHS
Greater Glasgow and Clyde

Glasgow Royal Infirmary
Alexandra Parade
Glasgow
G31 2ER
0141 211 4000

Dr. AL McGinley
Lochend Surgery
Easterhouse Health Centre
9 Auchinlea Road
Glasgow
G34 9HQ

Main Switchboard:	0141 211 4000
Department:	General Medicine
Contact Tel:	0141 211 4000
Enquiries to:	Sandra.campbell3@ggc.scot.nhs.uk
Letter Date:	21/12/2020
Reference:	EL/JC
Dictated Date:	17/12/2020
Transcribed Date:	17/12/2020

Dear Dr. AL McGinley,

Wendy McLeish; D.O.B: 25/05/1987; CHI: 2505876061
126 Liberton Street , Easterhouse, Glasgow, Lanarkshire, G33 2HJ

Admission: Specialty - General Medicine; Ward - GRI Ward 50 MR Respiratory
Consultant - Dr Eric Livingston; Date of Admission - 08/12/2020
Date of Discharge - 09/12/2020; Discharged to - Private Residence - no additional detail added

Follow Up: First seizure clinic

Clinical Comments:
Ms Wendy McLeish a 33 year old lady was admitted after she collapsed with ?seizure while shopping. No further seizures were witnessed. Her past medical history is significant of anxiety/ depression. She denied recent alcohol or drug use. There were no acute changes on CT head. Since there were no further seizure episodes and she was clinically well she was discharged with no change to medication. Mariana Kostova CF

Final comments

She has been referred to first seizure clinic

Dr Eric Livingston

Respiratory Consultant

Electronically Signed: Dr Eric Livingston, Consultant

NHS Confidential: Personal data about a patient

McLeish Wendy CHI: 2505876061 DoB: 25-May-1987

Immediate Discharge Letter

NHS Greater Glasgow and Clyde

Highly Sensitive: No
Consent for Sharing Withheld: No

ANNE MCGINLEYLochend Surgery,Easterhouse Health Centre,9 Auchinlea Road, Glasgow, G34 9HQ

Glasgow Royal Infirmary,84 Castle St G4 0SF
Main Switchboard: 0141 2114000
Date of Completion: 09-Dec-2020

Dear ANNE MCGINLEY,

Name	CHI	DoB	Address
Wendy McLeish	**2505876061**	**25-May-1987**	**126 LIBERTON ST, Glasgow, Lanarkshire, G33 2HJ**

Admitted	Type	Discharged	Destination
08-Dec-2020 17:32	IP	09-Dec-2020	Private Residence - living with relatives or friends

Specialty	Consultant	Ward	Telephone
General Medicine	Livingston	GRI Ward 50 MR Respiratory	0141 2114000

Primary Diagnosis
There is no data to display.

Secondary Diagnosis
There is no data to display.

Significant Operations / Procedures:
There is no data to display.

Last Discharge Review: Mariana Kostova (Mariana Kostova - CF) on 09 Dec 2020 12:26

Discharge Medication:

McLeish Wendy CHI: 2505876061 DoB: 25-May-1987

Active Drug Name	Route	Dose	Disp	Reason	Further Details	ECS	Since Admission
Desogestrel 75microgram tablets (Cerelle)	oral	1 Tab Daily,	No	Patient's own supply		Y	
Mirtazapine 45mg tablets	oral	ONE TO BE TAKEN AT NIGHT,	No	Patient's own supply		Y	
Propranolol 10mg tablets	oral	when required ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED,	No	Patient's own supply		Y	

"Added" means this medicine was added to the Clinical Portal record after admission. It does not necessarily mean this medicine was started by the hospital.

Dispensing Comments
There is no data to display.

Withheld Medication:

Date	Withheld Drug Name	Route	Dose	Note	Withheld Reason
There is no data to display.					

Stopped Medication:

Date	Stopped Drug Name	Route	Dose	Note	Stopped Reason
2020-12-09	Co-amoxiclav 500mg/125mg tablets	oral	1 tablet three times daily , Fixed Period 7 Day(s) from 01 Nov 2019		Course Completed

Reason for Admission and Presenting Complaints	Admission Category
No data available	No data available

Clinical Comments:	Dear Dr., Ms Wendy McLeish, 33yo lady admitted to GRI after episode of seizures. Ms McLeish collapsed while waiting in the line. During her admission she was closely monitored and no further seizures were witnessed. Her past medical history is significant of anxiety/depression. She denied any recent alcohol or drug use.

McLeish Wendy CHI: 2505876061 DoB: 25-May-1987

	There were no acute changes on CT head. Since there were no further seizure episode and she felt to be clinically well, we felt suitable to discharge her home. There were no changes to medications. Follow-up: - First seizure clinic referral sent (will be contacted) Thank you for your ongoing care. Kind Regards, Ward 50 Team, FY1
Discharge Comments:	-
Follow Up:	Yes First seizure clinic referral sent (will be contacted)
Results Awaited:	No
Pharmacist Comments:	
Final Discharge Letter to Follow:	Yes

Yours sincerely,

Mariana Kostova

Prescription Review
Checked by: Mariana Kostova (CF)
Discharged by: Roddy Delapena (Staff Nurse)

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC General Referral Protocol (Glasgow, vR15.0)

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Neurology - First Seizure
GGC General Referral

— **Consultant / receiving practitioner** and/or **specialty clinic**

Queen Elizabeth University Hospital
1345 Govan Road
Glasgow
G51 4TF

— **Hospital** and **hospital address**

Hospital location code.
G405H

Email address
-

Urgency of referral Urgent ESCALATED FROM ROUTINE solo mum, welfre concerns re child

Date of referral 03-Feb-2021 **Date sent** 03-Feb-2021

PATIENT DETAILS

Surname	Mcleish
Forename(s)	Wendy
Title	Miss
Sex	Female
Date of birth	25-May-1987
CHI no.	2505876061
Area of Residence	-

Patient's address

126 liberton street
Carntyne
Glasgow
G33 2HJ

Contact number(s)

Voice:07912347436

101022571537H Unique Care Pathway Number: 101022571537H

REGISTERED GP DETAILS

Name	Dr Anne McGinley		
GMC code	3341180	GP code	07307
Practice name	Easterhouse Health Centre (13448)		
Practice code	46471		

Practice address

9 Auchinlea Road
Easterhouse
Glasgow
G34 9HQ

Contact number(s)

Voice:0141 531 8150
Facsimile:0141 531 8158
E-mail:GG-UHB.gp46471clinical@nhs.net

REFERRING GP DETAILS

Name	Dr. Emma Sheppard		
GMC code	3665273	GP code	07111
Practice name	Lochend Surgery (46471)		

Practice address

Easterhouse Health Centre
9 Auchinlea Road
Glasgow
G34 9HQ

Practice code	46471	Contact number(s)	Voice:0141 531 8150 Facsimile:0141 531 8158

CLINICAL INFORMATION

History of presenting complaint

Presenting complaint

Description: seizure and welfare concerns re child

Comment: Wendy was referred in December 2020 from A&E GRI with witnessed tonic clonic seizure. History therein is recorded as occasional alcohol, please note as recent as 2019 significant alcohol and intoxication + other drug use, more recent history uncertain though definitely less . IShe is not yet appointed to clinic. I am hereby escalating in part relating to fact that Wendy's young child is currently not in her care but being considered for return to her care by social work. Social work are under the impression that Wendy was not intoxicated at time of seizure this is not a withdrawal seizure. I have explained that withdrawal seizure is still possible, but would be most grateful for your opinion on whether it was. We would, also be grateful for consideration of more urgent exclusion of and or management of epilepsy, not least as Wendy would be solo parenting and very limited external support

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history

Pre-existing conditions (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Assault by bite of human being	by partner. bite to R ear, blunt head trauma by bottle.	01-Nov-2019	01-Nov-2019
Social worker involved	-	02-Sep-2019	02-Sep-2019
Alcohol problem drinking	-	02-Sep-2019	02-Sep-2019
Pityriasis versicolor	-	18-Feb-2019	18-Feb-2019
Miscarriage	surgical ERPC	03-Sep-2015	03-Sep-2015
Pneumonia due to unspecified organism (Bilateral)	-	30-Dec-2011	30-Dec-2011
Adult respiratory distress syndrome	-	30-Nov-2011	30-Nov-2011
Overdose of drug	fluoxetine	22-Sep-2011	22-Sep-2011
Anxiety with depression	-	19-Jul-2011	19-Jul-2011
Death of father	-	31-Jan-2011	31-Jan-2011
Has a tremor	seen by nuerologist 2012, felt to be benign	01-Apr-2007	01-Apr-2007
Death of mother	age 29 MI	01-Jan-1991	01-Jan-1991

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Elective caesarean delivery NOS	26-Feb-2017	26-Feb-2017

Current medication (Active Repeat medication issued within the last 12 months)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Propranolol Hydrochloride Tablets 10 mg	84	84 TABLET	ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED	-	23-Oct-2020	30-Dec-2020
Mirtazapine Tablets 45 mg	56	56 TABLET	ONE TO BE TAKEN AT NIGHT	-	30-Sep-2020	30-Dec-2020

Recent medication (Any medication issued within last 90 days not shown above)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Cerelle Tablets 75 micrograms	168	168 tablet	1 Tab Daily	-	30-Sep-2020	01-Oct-2020
Propranolol Hydrochloride Tablets 10 mg	28	28 tablet	ONE TO BE TAKEN THREE TIMES A DAY IF NEEDED FOR ANXIETY	-	30-Sep-2020	01-Oct-2020

Blood Pressure

Date Recorded	Systolic	Diastolic
17-Jul-2018	128	77
09-Jul-2015	123	90
08-Aug-2013	116	77
14-Jan-2013	118	86
11-Jan-2013	118	77

Body Measurements

Date Recorded	Height	Weight	BMI
17-Jul-2018	-	-	29.64
29-Apr-2014	-	74	-
28-Jun-2013	158	74	29.5
31-Jan-2011	158	57	22.83

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Never smoked tobacco:		16-Sep-2019
Never smoked tobacco:		17-Jul-2018
Never smoked tobacco:		04-Jan-2018
Never smoked tobacco:		14-Jul-2016
Ex smoker (Stopped 2005):		09-Jul-2015
Alcohol consumption, 3 units/week:		17-Apr-2012
Light drinker - 1-2u/day:	Alcohol Intake$$.clm - Repeat after an Interval	21-Jan-2010

Clinical warnings

Allergies

Description	Comment	Date recorded
Adverse reaction to propranolol	possible wheeze with this	29-Apr-2016

Additional Support Needs

No known ASN requirements

Additional relevant information

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

Patient will accept cancellation or short notice appointment (within 1-6 days):Yes

Referred By:Referring GP

Electronic Attachment Present:Yes

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) **Date**

McLeish Wendy CHI: 2505876061

Final Discharge Letter

NHS
Greater Glasgow and Clyde

Glasgow Royal Infirmary
Alexandra Parade
Glasgow
G31 2ER
0141 211 4000

Dr. AL McGinley
Lochend Surgery
Easterhouse Health Centre
9 Auchinlea Road
Glasgow
G34 9HQ

Main Switchboard: 0141 211 4000
Department: General Medicine
Contact Tel: 0141 211 4000
Enquiries to: Sandra.campbell3@ggc.scot.nhs.uk
Letter Date: 21/12/2020
Reference: EL/JC
Dictated Date: 17/12/2020
Transcribed Date: 17/12/2020

Dear Dr. AL McGinley,

Wendy McLeish; D.O.B: 25/05/1987; CHI: 2505876061
126 Liberton Street , Easterhouse, Glasgow, Lanarkshire, G33 2HJ

Admission: Specialty - General Medicine; Ward - GRI Ward 50 MR Respiratory
Consultant - Dr Eric Livingston; Date of Admission - 08/12/2020
Date of Discharge - 09/12/2020; Discharged to - Private Residence - no additional detail added

Follow Up: First seizure clinic

Clinical Comments:
Ms Wendy McLeish a 33 year old lady was admitted after she collapsed with ?seizure while shopping. No further seizures were witnessed. Her past medical history is significant of anxiety/ depression. She denied recent alcohol or drug use. There were no acute changes on CT head. Since there were no further seizure episodes and she was clinically well she was discharged with no change to medication. Mariana Kostova CF

.....

Final comments

She has been referred to first seizure clinic

Dr Eric Livingston

Respiratory Consultant

Electronically Signed: Dr Eric Livingston, Consultant

cc.

NHS Confidential: Personal data about a patient

LOCHEND SURGERY,
Easterhouse Health Centre
9 Auchinlea Road
Glasgow G34 9HQ
0141531 8

Dr. Anne McGinley MBChB, MRCGP, MSc Sports Med
Dr. Emma Sheppard MBBS.MRCGP,DRCOG,DFFP
Dr. Kathryn Roberts MBChB,MRCGP

12 12 19

Wendy. Mcleish
126 liberton street
Carntyne
Glasgow

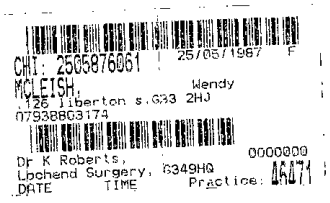
G33 2HJ

Dear Wendy

Please arrage a GP appointment for a general review

Dr E Sheppard

[redacted]



Hi Lisa

Just wondering if any update since further A&E presentation start of November?

Did you see this!

Thanks, Kathryn
(Dr Roberts!)

NHS Confidential: Personal data about a patient

McLeish Wendy CHI: 2505876061 DoB: 25-May-1987

Immediate Discharge Letter

Highly Sensitive: No
Consent for Sharing Withheld: No

ANNE MCGINLEYLochend Surgery,Easterhouse Health Centre,9 Auchinlea Road, Glasgow, G34 9HQ

Glasgow Royal Infirmary,84 Castle St G4 0SF
Main Switchboard: 0141 2114000
Date of Completion: 01-Nov-2019

Dear ANNE MCGINLEY,

Name	CHI	DoB	Address
Wendy McLeish	**2505876061**	**25-May-1987**	**126 LIBERTON ST, Glasgow, Lanarkshire, G33 2HJ**

Admitted	Type	Discharged	Destination
01-Nov-2019 13:30	IP	01-Nov-2019	Private Residence - no additional detail added

Specialty	Consultant	Ward	Telephone
Emergency Medicine	Anderson	GRI Ward 46 Head Injury/General Medicine	0141 2114000

Primary Diagnosis
Injury of head

Secondary Diagnosis
Human bite - wound

Significant Operations / Procedures:
There is no data to display.

Last Discharge Review: Oonagh Murray (Oonagh Murray - FY2) on 01 Nov 2019 17:28

McLeish Wendy CHI: 2505876061 DoB: 25-May-1987

Discharge Medication:

Active Drug Name	Route	Dose	Disp	Reason	Further Details	ECS	Since Admission
Co-amoxiclav 500mg/125mg tablets	oral	1 tablet three times daily , Fixed Period 7 Day(s) from 01 Nov 2019	Yes				Added

"Added" means this medicine was added to the Clinical Portal record after admission. It does not necessarily mean this medicine was started by the hospital.

Dispensing Comments
There is no data to display.

Withheld Medication:

Date	Withheld Drug Name	Route	Dose	Note	Withheld Reason
There is no data to display.					

Stopped Medication:

Date	Stopped Drug Name	Route	Dose	Note	Stopped Reason
There is no data to display.					

Reason for Admission and Presenting Complaints	Admission Category
No data available	No data available

Clinical Comments:	Dear Doctor, This patient was brought in by the police and ambulance after an alleged assault. She had sustained a haematoma to right temple and a human bite to left ear. This was reviewed, cleaned and debrided by plastics. The patient was admitted to Ward 46 for a period of observation. She was given two dose of IV co-amoxiclav and discharged with 7 days of oral co-amoxiclav and topical chloramphenicol BD. The patient was advised to return if redness and pain in ear does not settle. Yours Sincerely, Oonagh Murray FY2
Follow Up:	Yes Dressings Clinic Plastics OPD 08/11/19 11:00
Results Awaited:	No

McLeish Wendy CHI: 2505876061 DoB: 25-May-1987

Pharmacist Comments:	
Final Discharge Letter to Follow:	No

Yours sincerely,

Oonagh Murray

Prescription Review
Checked by: Oonagh Murray (FY2)
Discharged by: Oonagh Murray (FY2)