The Oaks Medical Practice
Barrhead Health & Care Centre
213 Main Street
BARRHEAD
G78 1SW
Tel. 0141 800 7085
Fax 0141 881 6704

Dr David Meighan

Dr. M. Nazar A. Aziz

Your Ref : 100331

Our Ref : 964387

Date : 10/06/2026

Dear Sir / Madam

Re: Craig Palmer
DOB: 27/07/1968

Please find enclosed copies of the medical records we hold for the above-named person as requested.

Yours sincerely

For The Oaks Medical Practice

Encl.

Registration Details - Patient No: 997

Personal details...		Address details...	
Date of birth	27/07/1968	Post Code	G78 1AY
Sex	M	House Name Flat No	
Surname	Palmer	No and Street	104 Crossmill Avenue
Previous Surname		Village	
Forenames	Craig	Town	BARRHEAD
Calling Name	Craig	County	
Title	Mr		
Birth Surname			
Marital Status	Marital status unknown		
Ethnic Origin			
Next of Kin			
Carer			

HA/HB Details...		Contact details...	
Trading partner	Argyll & Clyde	Home Tel No	
Registered GP	Dr David Meighan	Work Tel No	
Usual GP	Dr David Meighan	Mobile Tel No	07415220464 joanne
Residential Inst		E Mail Address	
Branch Surgery			
CHI Number	2707683094		
NHS Number	S564/68/908		

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

Upload Consent		AMS\MCR Details	
SCI-DC Consent	Implied Consent (default)	AMS Consent	Yes
Pharmacy Details			
Item Collected Check	Yes		
MCR Suitability Status	-1		
MCR Registration Status	1		

Medical Record

Problems

Active Problems		Authorised By	Code
16/08/1990	Localised, primary osteoarthritis of the shoulder region (Left) -related to previous dislocations.	Ms Biggart	N0511
07/12/1998	O/E - skin sinus NOS (left axilla) tracking>shoulder	Ms Biggart	2FIZ
29/07/2010	Other infections involving bone, of the shoulder region (joint) -sinus in axilla discharging pus. [Chronic].	Ms Biggart	N30y1

Past Problems		Authorised By	Code
15/11/1983	**Closed fracture metatarsal neck (Right)** 4th	Ms Biggart	S352D
07/11/1985	**Dislocation or subluxation of shoulder (Left)** (x4)	Ms Biggart	S41
28/04/1986	**[SO]Shoulder NEC (Left)** Bankart's procedure.	Ms Biggart	7NB00
02/01/1988	**Minor head injury**	Ms Biggart	S6401-1
15/10/1998	**O/E - lymphadenopathy (Left)**	Ms Biggart	2C3
23/11/1998	**Glandular fever**	Ms Biggart	A75-1
07/12/1998	**Curettage of sinus NEC** -track (left axilla)	Ms Biggart	7G063
07/12/1998	**Excision or biopsy of lymph node** (L) histo-pathology=foreign body gralomatous reaction to implant material.	Ms Biggart	7H62
13/05/1999	**Chest pain** (reccurent)	Ms Biggart	182

14/04/2016	(Non Coded Event - Faecal Calprotectin) (Source: LAB) . Results <200ug/g are rarely associated with significant pathology.|Please see GG&C guidelines for advice and secondary care referral.|www.nhsggc.org.uk/media/238675/ggc_fc_guidelines_dec_2015.doc|	
05/05/2016	(Non Coded Event - Faecal Calprotectin) (Source: LAB) . Within reference range. ?IBS.|Results <200ug/g are rarely associated with significant pathology.|Please see GG&C guidelines for advice and secondary care referral.|www.nhsggc.org.uk/media/238675/ggc_fc_guidelines_dec_2015.doc|	
21/08/2017	(Non Coded Event - Liver Function Tests) (Source: LAB) .	
21/08/2017	(Non Coded Event - Urea & Electrolytes) (Source: LAB) . Please note change to Abbott Enzymatic Creat method from 24/04/17|	
21/08/2017	(Non Coded Event - C-reactive Protein) (Source: LAB) .	
21/08/2017	(Non Coded Event - Full Blood Count) (Source: LAB) .	
17/10/2021	2019-nCoV (novel coronavirus) not detected (Source: LAB) .	^ESCT1299077
17/03/2022	2019-nCoV (novel coronavirus) detected (Source: LAB) .	^ESCT1299074
18/06/2025	(Non Coded Event - ESR) (Source: LAB) .	
18/06/2025	(Non Coded Event - Full Blood Count) (Source: LAB) .	
18/06/2025	(Non Coded Event - Glucose) (Source: LAB) . Fasting sample|	
18/06/2025	(Non Coded Event - Thyroid funct test) (Source: LAB) .	
18/06/2025	(Non Coded Event - Lipid profile) (Source: LAB) . Fasting sample|	
18/06/2025	(Non Coded Event - Liver Function Tests) (Source: LAB) .	
18/06/2025	(Non Coded Event - Urea & Electrolytes) (Source: LAB) .	
18/06/2025	(Non Coded Event - Bone Profile) (Source: LAB) . Please note new calcium adjustment equation from 17/06/2025.|	
18/06/2025	(Non Coded Event - Serum Folate) (Source: LAB) .	
18/06/2025	(Non Coded Event - Serum Ferritin) (Source: LAB) . Males 15-300 (<15 iron deficiency)|Females 15-200 (<15 iron deficiency)|15-50 intermediate result. Consider iron deficiency|in anaemic patients, older patients and those|with inflammatory disease.|	
18/06/2025	(Non Coded Event - Active B12) (Source: LAB) . Result in indeterminate range (25 - 70 pmol/L).|Consider treatment for B12 deficiency in following patient groups:|- Patients with a condition which may deteriorate quickly and|have a severe effect on QoL (neurological, haematological cond'ns)|- Patients who are pregnant or breast feeding.|- Patients with a recognised cause of B12 deficiency (surgery or|autoimmune gastritis).|Otherwise consider other causes of symptoms and if necessary|repeat active B12 level at 3-6 months.|Note change in the B12 assay to an active B12 assay from 14/5/24.|	
18/06/2025	(Non Coded Event - QFIT) (Source: LAB) . Negative qFIT result.|Refer to NHSGGC guidance for further information.|	

Drug Allergies	Authorised By	Code
None		

Non Drug Allergies	Authorised By	Code
None		

Family History	Authorised By	Code
None		

Immunisations	Authorised By	Code
15/04/2021	**Administration of first dose of SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) vaccine (Left Arm) C-19 (By T Watt)** PV46679/ AZ/IM/LUA//C-19 (By T Watt)	^ESCT1348323
12/07/2021	**Administration of second dose of SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) vaccine (Right Arm) C-19 (By F Azam)** PV46688/ AZ/IM/RUA//C-19 (By F Azam)	^ESCT1348325

Consultations

07/03/2000	UnknownUser at The Oaks Medical Practice
History	Migrated Data priority=2
-	-
04/05/2000	UnknownUser at The Oaks Medical Practice
History	[X]Abscess of axilla recurrence left priority=2
-	-
15/10/2002	Dr David Meighan at The Oaks Medical Practice
History	Medication review priority=2 Medication review
-	-
24/02/2004	Dr David Meighan at The Oaks Medical Practice
History	Referred to urologist normal priority=2

History	priority=2
-	---
27/10/2009	Dr Tom Naven at The Oaks Medical Practice
History	just out of hospital can you wrte letter to say he cannot wear seat belt will hand in discharge letter priority=2
-	---
30/10/2009	Dr Tom Naven at The Oaks Medical Practice
History	left shoulder op 4 days ago pain++ despite rx use rx sevred priority=2
-	---
27/07/2010	Dr Tom Naven at The Oaks Medical Practice
History	oozing sinus again in left axilla rerefer. swab joint also painful up analgesia. await sensitivity of swab. priority=2
-	---
29/07/2010	Dr Tom Naven at The Oaks Medical Practice
History	SCI Electronic Referral - Orthopaedics, Victoria priority=2
-	---
08/10/2010	Dr Tom Naven at The Oaks Medical Practice
History	head ache x 2 wks well besides . ?? stress. xs sweating rt axilla refer priority=2
-	---
12/10/2010	Dr Tom Naven at The Oaks Medical Practice
History	SCI Electronic Referral priority=2 Referral for further care Refered To: SCI Hospital, NHS. Referral Type: Out Patient. Speciality Type: Dermatology. Referral Nature: Investigate. , Referral Reason: Actual Hospital: Inverclyde Royal Hospital Excessive Perspiration in Right Axilla
-	---
15/10/2010	reception2 at The Oaks Medical Practice
History	referral approved by tom inverclyde derm 08.10 priority=2
-	---
21/10/2010	Dr Tom Naven at The Oaks Medical Practice
History	asking for tramadol - problems with shoulder - now in severe pain today lloyds frid # priority=2
-	---
25/10/2010	Dr Tom Naven at The Oaks Medical Practice
History	asking for build up drinks lloyds tuea priority=2
-	---
22/12/2010	Dr David Meighan at The Oaks Medical Practice
History	Frontal headache 4/12 approx. Not taken analgesia. Not worse on bending forwadr, no sinus tenderness. Neck rotation reduced to 50%-60% of N. Dx tension headache 2ry to neck problems - ibup...created in GC; 1 of 1 priority=2
-	---
10/01/2011	Dr Tom Naven at The Oaks Medical Practice
History	headache x 4 mths mostly p m. well besides sleep appetite fine. restricted head movement ?? cerv spond rx diclo/paracet. see 1 wk priority=2
-	---
09/05/2011	Dr Tom Naven at The Oaks Medical Practice
History	still no word from orthopod. re left shoulder. letter again. left axilla rash rx priority=2
-	---
11/05/2011	Dr Tom Naven at The Oaks Medical Practice
History	SCI Electronic Referral priority=2
-	---
08/06/2011	Mrs Linda McLeod at Data Entry
Comment	Backdated entry to add correct script issue date
-	---
08/06/2011	Dr David Meighan at The Oaks Medical Practice
Comment	RTA Seen @ A&E - STI Neck and shoulder. Co-cod insufficient - add diclof
Medication	Co-Codamol 30/500 Tablets 100 tablet TWO TO BE TAKEN UPTO FOUR TIMES A DAY Diclofenac Sodium E/c tablets 50 mg 100 tablet ONE TO BE TAKEN THREE

Examination	Dec RoM at neck.
Comment	Currently not sore unless he touches it, so keen to avoid Rx. Adv try simpla analgesia 1st if required, but may benefit form CBZ if it becomes a problem. Also advice on pillows etc.
-	---
08/02/2013	Ms Lauren Hall at Data Entry
Comment	had an appt at western inf for orthopaedics and forgot all about it and got a letter to say he has been removed from the list and would need rereferred, he is asking if you can do this for him as still wants seen
-	---
11/02/2013	Dr Tom Naven at The Oaks Medical Practice
Comment	need to see
-	---
12/02/2013	Mrs Wendy Deehan at The Oaks Medical Practice
Comment	panel line due 16/2 13wks shoulder injury MED3 issued to patient
-	---
01/03/2013	Dr David Meighan at The Oaks Medical Practice
Problem (NEW)	**Epididymitis (Left)**
History	"Lump" L testis, noticed it because of discomfort
Examination	Tender over upper pole of epidydimis
Medication	Ciprofloxacin Tablets 250 mg *10 tablet 1 Tab morning and night*
-	---
29/04/2013	Dr Tom Naven at The Oaks Medical Practice
Examination	Patient very much better with fluoxet cont for 6 mths and rv missed appts with orthopod/surg rerefer
-	---
03/05/2013	Dr Tom Naven at The Oaks Medical Practice
Additional	
-	---
03/05/2013	Mrs Linda McLeod at Data Entry
Comment	sick line from 10/5/13 shoulder injury 13 weeks
-	---
14/06/2013	Dr Tom Naven at The Oaks Medical Practice
Additional	
-	---
14/06/2013	Mrs Wendy Deehan at Data Entry
Comment	co-codamol
-	---
24/10/2013	Dr Tom Naven at The Oaks Medical Practice
Additional	
-	---
24/10/2013	Mrs Wendy Deehan at The Oaks Medical Practice
Comment	looking for disolving pain killers - cocodomol can not take tablets
-	---
30/10/2013	Mrs Wendy Deehan at The Oaks Medical Practice
Comment	can not take tablet form can he have disolving pain killers
-	---
31/10/2013	Dr Tom Naven at The Oaks Medical Practice
Medication	Diclofenac Sodium Dispersible tablets Sugar Free 50 mg *84 tablet 1 TAB 3 TIMES DAILY* script in lloyds 31/10/13
-	---
14/11/2013	Dr Tom Naven at The Oaks Medical Practice
Examination	well mood stable, saw orthopod for stabilisation of shoulder joint soon
-	---
25/04/2014	Dr Tom Naven at The Oaks Medical Practice
Problem (FIRST)	**C/O - low back pain**
Examination	Telephone encounter
Comment	tel hurt back yesterday whilst playing with children lbp no h/o same rx
-	---
25/04/2014	Dr Tom Naven at The Oaks Medical Practice

Test Request	Liver Function Tests - *Completed*, Chol / Triglyceride - *Completed*, PSA - *Completed*, Folate - *Completed*, Thyroid function tests - *Completed*, ESR - *Completed*, Full Blood Count - *Completed*, Helicobacter Serology (Glasgow) - *Completed*, ANA (anti - nuclear and centromere abs) - *Completed*, ANCA (anti - neutrophil cytoplasmic ab) - *Completed*, TTG (IgA) / Coeliac screen - *Completed*
-	---
08/04/2016	Ms Christine McIntosh at The Oaks Medical Practice
Test Request	Full Blood Count - *Completed*, Ferritin - *Completed*
-	---
14/04/2016	Dr David Meighan at The Oaks Medical Practice
Problem (FIRST)	**Weight decreasing**
History	HP +ve, but also ^CRP nd ESR + Mild +ve ANCA
Comment	ref gastro, Also dermatitis rash on legs/trunk ?? ringworm
Medication	Trimovate Cream *30 GRAM APPLY THINLY TO THE AFFECTED AREA ONE OR TWO TIMES DAILY*
Test Request	Faecal Calprotectin - *Completed*
-	---
05/05/2016	Mrs Hilary Smith at The Oaks Medical Practice
Test Request	Faecal Calprotectin - *Completed*
-	---
02/12/2016	Dr Sariya Akbar at The Oaks Medical Practice
History	s/r solpadol has had before - issued
-	---
02/12/2016	Mrs Anne Traguair at Data Entry
Comment	asking for Solpadol
-	---
15/02/2017	Mrs Wendy Deehan at The Oaks Medical Practice
Comment	asking for co-codomol disolving
-	---
16/02/2017	Dr David Meighan at The Oaks Medical Practice
Comment	No medical indication for dissolving tabs
Medication	Co-Codamol 30/500 Tablets *50 TABLET TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)*
-	---
18/04/2017	Dr David Meighan at The Oaks Medical Practice
Problem (FIRST)	**Acute back pain with sciatica**
History	Lumbar pain radiating to R leg
Examination	Spasm/tenderness of lumbar muscles R>L.. Approx 1/3 of N flexion and virtually no lat flex or rot at L spine. SLR N on L 20-30 deg on R with pain on passive mvt but -ve sciatic stretch
Comment	Adv physio.
Medication	Carbamazepine M/R tablets 200 mg *56 tablet 1 Tab At night* Naproxen Tablets 500 mg *56 tablet ONE TO BE TAKEN TWICE A DAY* Omeprazole Capsules (Gastro-Resistant) 20 mg *56 CAPSULE ONE TO BE TAKEN EACH DAY*
New Referral	(NHS). . . . 8H41.: General medical referral (SCI Gateway Referral)
-	
Problem (NEW)	**Weight decreasing**
History	Ongoiung problem, getting worse. Was seen at gastro last year, but worse since then - ref gen physicians
-	---
02/05/2017 15:19	Dr Naz Aziz at The Oaks Medical Practice
Problem (REVIEW)	**Acute back pain with sciatica**
History	In because Carbamazepine andnaproxen not realy helping. Pain to lower back and radiates to right thigh. No Sphincter issue no foot drop no anal anasthaesia. Used co-codamol before wioth no effect., Suggest TRamadol 1 tabs QID and up titrat as tolarated. Pt has appt with Gastro end of the month
Medication	Tramadol Hydrochloride Capsules 50 mg *100 capsule 1 OR 2 CAPS 4 TIMES DAILY*
-	---
17/05/2017	Mrs Linda McLeod at The Oaks Medical Practice
Comment	can you phone with craigs weight for referrel 07515556328 Dr Gunn or let us know and we will phone

Comment	Issued, but make appt for next
-	---
28/02/2018	Mrs Wendy Deehan at The Oaks Medical Practice
Comment	asking for tramadol
-	---
05/06/2018 13:47	Ms Arlene Crawford at Data Entry
Comment	requesting solpadol disolving and tramadol
-	---
05/06/2018 17:09	Dr Naz Aziz at Data Entry
Comment	Cannot have both either salpodol or tramadol
-	---
19/06/2018	Mrs Wendy Deehan at The Oaks Medical Practice
Comment	asking for tramadol - not taking solpadol
-	---
26/06/2018 09:34	Ms Arlene Crawford at The Oaks Medical Practice
Comment	requesting tramadol and mirtazapine
-	---
26/06/2018 12:06	Dr David Meighan at The Oaks Medical Practice
Additional	
-	---
11/07/2018 10:20	Dr Naz Aziz at The Oaks Medical Practice
Problem	Muscular spasm.
History	1/52 pain to mid back. Recalled having a bad dream and jump out off bed. Since then c/o pain. Stiff and tener to palpate. NO Red flags symptoms.
Examination	Antalgic gait. Slow on raising. Posture slightly tilt to left. No mid line bony tendemass. Tender +++to upper right parasinal muscle of lumbar level. Left soft and non tender.
Comment	P- topical NSAIDs and short course muscle relaxant
Medication	Ketoprofen Gel 2.5 % *100 gram APPLY 3 TIMES DAILY*
	Diazepam Tablets 2 mg *15 tablet ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED*
-	---
09/08/2018 14:45	Ms Arlene Crawford at The Oaks Medical Practice
Comment	requesting mirtazapine and tramadol
-	---
10/08/2018 08:53	Dr Naz Aziz at The Oaks Medical Practice
Comment	sr
-	---
26/09/2018	Ms Lynne Ewing at The Oaks Medical Practice
Comment	requesting tramadol and mirtazapine
-	---
26/09/2018 10:23	Dr David Meighan at The Oaks Medical Practice
History	Acute LBP. No sciatica (yet) this time. Sx present 1/52. No red flags now, but at start had one episode of urine leakage and a few episodes of needing to go but not passing urine (both resolved now). Also had dysuria
Examination	Bilat lumbar spasm and severe restriction of lumbar mvt
Comment	Check MSSU and Rx as UTI. Add Celebrex and ^ tramadol from 6/d to 8/d
Medication	Tramadol Hydrochloride Capsules 50 mg *200 capsule 1 OR 2 CAPS 4 TIMES DAILY*
	Celecoxib Capsules 200 mg *60 capsule 1 Cap morning and night*
	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
	Trimethoprim Tablets 200 mg *14 tablet ONE TO BE TAKEN TWICE A DAY*
	Paracetamol Tablets 500 mg *100 tablet TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)*
-	
History	Some respine to mirtaz - try ^ dose
-	---
15/11/2018 16:25	Mrs Wendy Deehan at The Oaks Medical Practice
Comment	asking for mirazapine tramadol and ketoprofen gel
-	---
15/11/2018 17:57	Dr David Meighan at The Oaks Medical Practice
Comment	Almost 8/52 since he got 4/52 of mirtazipine - make appt. Others issued - message on Px

29/10/2019 17:40	Dr David Meighan at The Oaks Medical Practice
Comment	issued, appt for next
30/10/2019 12:23	Mrs Anne Traquair at Data Entry
Comment	message below added to Px
05/11/2019	Ms Arlene Crawford at Data Entry
Comment	requesting co-codomol
06/11/2019 12:12	Dr David Meighan at The Oaks Medical Practice
Comment	Got tramadol 29/10
28/11/2019 13:55	Mrs Wendy Deehan at The Oaks Medical Practice
Comment	Asking for cocodomol and mirtazepine
28/11/2019 14:34	Dr David Meighan at The Oaks Medical Practice
Comment	Supposed to have made appt - see 29/10 - 14/7 mirtaz issued as stop-gap Should not be taking cocod and tramadol
03/01/2020	Ms Lynne Ewing at The Oaks Medical Practice
Comment	request for mirtazapine
03/01/2020 11:37	Dr David Meighan at The Oaks Medical Practice
Comment	Make appt see 29/10 and 28/11
08/01/2020 11:11	Dr Naz Aziz at The Oaks Medical Practice
Problem	Weight loss
History	IN for mirtaz r/v but also informed that he has been losing weight and noted PR bleed. Bolwe habits has not changed. No abdo pain. Didi Bowel screening and -ve.
Examination	O/E - weight 63.2 Kg Not cachactic but does look thn. NOt pale or jaundice
Comment	For qFIT and bloods
Medication	Mirtazapine Tablets 45 mg *56 TABLET ONE TO BE TAKEN AT NIGHT* Zerobase Cream 11 % *500 GRAM(S) APPLY AS DIRECTED* Hydrocortisone Cream 1 % *30 GRAM APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE DAILY*
Test Request	Glucose - *Requested*, Bone Profile - *Requested*, CEA - *Requested*, CRP - *Requested*, Urea and Electrolytes - *Requested*, Ferritin - *Requested*, Liver Function Tests - *Requested*, Lipid profile (inc. HDL) - *Requested*, Thyroid function tests - *Requested*, ESR - *Requested*, Full Blood Count - *Requested*, qFIT - *Completed*
Problem (REVIEW)	**Depressed**
History	Has been on mirtaz n45mg for almost 2 yrs which has helps. Probably will need them for long term.
04/08/2020 16:22	Ms Arlene Crawford at Data Entry
Comment	requesting tramadol - issue limit
05/08/2020 13:06	Dr David Meighan at Telephone Consultation
Comment	Should have been told to make appt for r/v at last issue. Rx x100 issued - appt for r/v
05/08/2020 13:46	Ms Arlene Crawford at Data Entry
Comment	message added to px
19/08/2020 15:17	Mrs Wendy Deehan at The Oaks Medical Practice
Comment	Asking for hydrocortison cream hands broken out again
19/08/2020 15:55	Dr David Meighan at The Oaks Medical Practice
Additional	

19/09/2025	Dr Malihah Abdul Aziz at The Oaks Medical Practice
History	Referral to Respiratory. This gentleman was referred for a CT chest abdomen and pelvis due to weight loss, cough and shortness of breath. Imaging showed severe emphysema with no evidence of malignancy. He has been a heavy smoker for the last forty years, previously on 20 a day and now has cut down to 10 per day. He used to work on the roads with tar involved for ten years. I have started him on spiriva respimat inhaler once daily. I would be grateful for your input. Thank you. Dr M Aziz (Locum GP)

19/09/2025	Dr Malihah Abdul Aziz at The Oaks Medical Practice
History	Weight loss, cough and SOB. CT CAP - Evidence of severe emphysema. No malignancy. Smokes for the last 40 years - from 20/day now cut down to 10/day. Used to work on the roads with tar for 10 years.
Comment	I will refer to Respiratory. Start inhaler for now
Medication	Spiriva Respimat Inhalation Solution Cartridge With Device 2.5 micrograms/dose *60 DOSE TWO PUFFS TO BE USED ONCE A DAY* Salbutamol Dry Powder Inhaler 100 micrograms/actuation *200 DOSE ONE OR TWO DOSES TO BE INHALED WHEN REQUIRED*

19/09/2025 17:23	Mrs. Caitlin Coulter at The Oaks Medical Practice
Comment	**Referral to Respiratory sent**

02/10/2025	Dr Malihah Abdul Aziz at The Oaks Medical Practice
History	Referral to Spirometry & Pulmonary rehab. This gentleman was referred for a CT chest abdomen and pelvis due to weight loss, cough and shortness of breath. Imaging showed severe emphysema with no evidence of malignancy. He has been a heavy smoker for the last forty years, previously on 20 a day and now has cut down to 10 per day. He used to work on the roads with tar involved for ten years. I have started him on spiriva respimat inhaler once daily. I would be grateful for your input. Thank you. Dr M Aziz (Locum GP)

02/10/2025 13:44	Mrs Anne Traquair at Data Entry
Comment	referrls sent to both Spirometry and Pulmonary Rehab as below

12/11/2025 09:55	Ms Racel Kelly at Medicine Management
Comment	Rx request for acepiro following telephone assessement - struggling to expectorate thick phlegm , would benefit from a mucolytic such as acepiro.
Medication	Acepiro Effervescent tablets 600 mg *60 TABLET ONE TO BE TAKEN EACH DAY IN THE MORNING*
Additional	Outpatient clinic letter received NVH Respiratory Medicine 11/11/25 New medication commenced acepiro Site of encounter NOS Actioned in Pharmacotherapy Hub

12/12/2025 15:13	Ms Racel Kelly at Medicine Management
Comment	Rx request for Anoro - optimise COPD treatment.
Medication	Anoro Ellipta Dry Powder Inhaler 55 micrograms + 22 micrograms/dose *60 DOSE ONE DOSE TO BE INHALED ONCE DAILY*
Additional	Outpatient clinic letter received RAH Respiratory Medicine 11/12/25 Drug therapy discontinued Spiriva New medication commenced Anoro. Site of encounter NOS Actioned in Pharmacotherapy Hub

Medication

Current

Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
10/08/2017	**Folic Acid Tablets 5 mg** ONE TO BE TAKEN EACH DAY 56 TABLET	Not Issued	Dr Naz Aziz	ACUTE
10/08/2017	**Cyanocobalamin Tablets 50 micrograms** 1 Tab Daily 1*50 tablet	Not Issued	Dr Naz Aziz	ACUTE
12/12/2025	**Anoro Ellipta Dry Powder Inhaler 55 micrograms + 22 micrograms/dose** ONE DOSE TO BE INHALED ONCE DAILY 60 DOSE	01/04/2026P	Dr David Meighan	REPEAT
12/11/2025	**Acepiro Effervescent tablets 600 mg** ONE TO BE TAKEN EACH DAY IN THE MORNING 60 TABLET	01/04/2026P	Dr David Meighan	REPEAT

02/12/2016	**Co-Codamol 30/500 Effervescent tablets** 1 OR 2 TABS QID PRN FOR PAIN MAX 8IN24HRS 100 tablet	02/12/2016P	Dr David Meighan	ACUTE
14/04/2016	**Trimovate Cream** APPLY THINLY TO THE AFFECTED AREA ONE OR TWO TIMES DAILY 30 GRAM	14/04/2016P	Dr David Meighan	ACUTE
11/04/2016	**Amoxicillin Capsules 500 mg** TWO TO BE TAKEN TWICE A DAY 28 CAPSULE	11/04/2016P	Dr David Meighan	ACUTE
11/04/2016	**Clarithromycin Tablets 500 mg** ONE TO BE TAKEN TWICE A DAY 14 TABLET	11/04/2016P	Dr David Meighan	ACUTE
11/04/2016	**Omeprazole Capsules (Gastro-Resistant) 20 mg** ONE TO BE TAKEN TWICE A DAY 14 CAPSULE	11/04/2016P	Dr David Meighan	ACUTE
04/04/2016	**Amoxicillin Capsules 500 mg** ONE TO BE TAKEN THREE TIMES A DAY 21 capsule	04/04/2016P	Dr Fazila Khattak	ACUTE
01/09/2015	**Fluoxetine Hydrochloride Capsules 20 mg** TWO CAPS DAILY 56 CAPSULE	01/09/2015P	Dr Fazila Khattak	ACUTE
01/09/2015	**Co-Codamol 30/500 Effervescent tablets** 1 OR 2 TABS QID PRN FOR PAIN MAX 8IN24HRS 100 tablet	01/09/2015P	Dr Fazila Khattak	ACUTE
08/08/2014	**Fluocinolone Acetonide Gel 0.025 %** APPLY AS DIRECTED 60 gram	08/08/2014P	Dr Tom Naven	ACUTE
01/05/2014	**Clobetasone Butyrate Ointment 0.05 %** APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE DAILY 30 GRAM	01/05/2014P	Dr David Meighan	ACUTE
29/04/2014	**Co-Codamol 30/500 Caplets** 1 or 2 Tabs 4 times daily 100 tablet	29/04/2014P	Dr Tom Naven	ACUTE
25/04/2014	**Diazepam Tablets 5 mg** 1 or 2 Tabs Daily 14 tablet	25/04/2014P	Dr Tom Naven	ACUTE
25/04/2014	**Tramadol Hydrochloride M/R tablets 100 mg** 2-3 DAILY 50 tablet	25/04/2014P	Dr Tom Naven	ACUTE
25/04/2014	**Diclofenac Sodium E/c tablets 50 mg** ONE TO BE TAKEN THREE TIMES A DAY WITH OR AFTER FOOD 84 TABLET	25/04/2014P	Dr Tom Naven	ACUTE
31/10/2013	**Diclofenac Sodium Dispersible tablets Sugar Free 50 mg** 1 TAB 3 TIMES DAILY 84 tablet	31/10/2013P	Dr Tom Naven	ACUTE
24/10/2013	**Diclofenac Sodium E/c tablets 50 mg** ONE TO BE TAKEN THREE TIMES A DAY 100 tablet	24/10/2013P	Dr Tom Naven	ACUTE
14/06/2013	**Co-Codamol 30/500 Tablets** TWO TO BE TAKEN UPTO FOUR TIMES A DAY 100 tablet	14/06/2013P	Dr Tom Naven	ACUTE
01/03/2013	**Ciprofloxacin Tablets 250 mg** 1 Tab morning and night 10 tablet	01/03/2013P	Dr David Meighan	ACUTE
11/12/2012	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 28 CAPSULE	11/12/2012P	Dr Tom Naven	ACUTE
31/10/2012	**Co-Codamol 30/500 Tablets** TWO TO BE TAKEN UPTO FOUR TIMES A DAY 100 tablet	31/10/2012P	Dr Tom Naven	ACUTE
01/05/2012	**Omeprazole Capsules (Gastro-Resistant) 20 mg** ONE TO BE TAKEN EACH DAY 28 CAPSULE	01/05/2012P	Dr David Meighan	ACUTE
27/10/2011	**Ciprofloxacin Tablets 250 mg** 1 Tab morning and night 28 tablet	27/10/2011P	Dr Tom Naven	ACUTE
09/09/2011	**Co-Codamol 30/500 Tablets** TWO TO BE TAKEN UPTO FOUR TIMES A DAY 100 tablet	09/09/2011P	Dr Tom Naven	ACUTE
09/09/2011	**Diclofenac Sodium E/c tablets 50 mg** ONE TO BE TAKEN THREE TIMES A DAY 100 tablet	09/09/2011P	Dr Tom Naven	ACUTE
08/06/2011	**Co-Codamol 30/500 Tablets** TWO TO BE TAKEN UPTO FOUR TIMES A DAY 100 tablet	08/06/2011H	Dr David Meighan	ACUTE
08/06/2011	**Diclofenac Sodium E/c tablets 50 mg** ONE TO BE TAKEN THREE TIMES A DAY 100 tablet	08/06/2011H	Dr David Meighan	ACUTE
09/05/2011	**Daktacort Cream 2 % + 1 %** Apply morning and night 2 gram	09/05/2011Q	Dr Tom Naven	ACUTE
10/01/2011	**Paracetamol Caplets 500 mg** 1 or 2 Tabs 4 times daily 100 TABS	10/01/2011P	Dr Tom Naven	ACUTE
10/01/2011	**Diclofenac Sodium E/c tablets 50 mg** 1 Tab 3 times daily 84 TABS	10/01/2011P	Dr Tom Naven	ACUTE
22/12/2010	**Ibuprofen Tablets 400 mg** 1 Tab 4 Times daily 100 TABS	22/12/2010P	Dr David Meighan	ACUTE
25/10/2010	**Fortisip Multi Fibre Liquid Feed (Tomato) Carton 200 ml** 20 LIQ	25/10/2010P	Dr Tom Naven	ACUTE
21/10/2010	**Tramadol Hydrochloride Capsules 50 mg** 1 or 2 Caps 4 times daily 100 CAPS	21/10/2010P	Dr Tom Naven	ACUTE
03/08/2010	**Flucloxacillin Capsules 500 mg** 1 Cap 4 times daily 56 CAPS	03/08/2010P	Dr Tom Naven	ACUTE
03/08/2010	**Activheal Film Vapour-Permeable Dressing 10 cm x 12.7 cm** 25 INVAL	03/08/2010P	Dr Tom Naven	ACUTE
27/07/2010	**Lodine Sr M/R tablets 600 mg** 1 Tab At night 60 TABS	27/07/2010P	Dr Tom Naven	ACUTE
30/10/2009	**Morphine Sulfate Tablets 10 mg** 1 Tab prn 56 TABS	30/10/2009P	Dr Tom Naven	ACUTE
21/09/2009	**Diflucortolone Valerate Oily cream 0.3 %** Apply morning and night 30 CREAM	21/09/2009P	Dr Tom Naven	ACUTE
05/05/2009	**Tielle Dressing rectangular, 7 cm x 9 cm** 30 INVAL	05/05/2009P	Dr Tom Naven	ACUTE
05/05/2009	**Niquitin Clear Transdermal patches 21 mg/24 hrs** 14 PATCH	05/05/2009P	Dr Tom Naven	ACUTE
05/05/2009	**Niquitin Transdermal patches 14 mg/24 hrs** 14 PATCH	05/05/2009P	Dr Tom Naven	ACUTE
05/05/2009	**Niquitin Transdermal patches 7 mg/24 hrs** 14 PATCH	05/05/2009P	Dr Tom Naven	ACUTE
20/07/2007	**Flucloxacillin Capsules 500 mg** 1 Cap 4 times daily 56	20/07/2007P	Dr David Meighan	ACUTE

NHS Confidential: Personal data about a patient

TO BE COMPLETED BY MEDICAL OFFICER AFTER SEEING PATIENT

Dear Doctor

Date 15/6/99

This patient attended Accident & Emergency Department today.

Diagnosis: M.I. + laceration

X-RAY Film / ECG shows: —

Treatment given: Wound sutured
5 x 4/0 Ethilon

DRUGS

..... days supply of .....has been given

TT Booster .....HATI .....(please tick)

Tetanus Prophylaxis has / has not been administered.

Patient Details:

A 025576/99
PALMER CRAIG
63 CROSSMILL AVE
BARRHEAD

G78 1AY
27/07/1968 MALE

Would you please arrange:

Sutures removed in 1 week

DISPOSAL (please tick)

G.P.	☑	Admit Ward No.	☐	Died in Dept.	☐
No Follow up	☐	Transfer to Other Hospital	☐	D.O.A.	☐
Return to A & E Clinic	☐	Fracture Clinic	☐	Irregular Discharge	☐
Return to A & E Clinic (if necessary)	☐	Other Clinic	☐	Did not Wait	☐

Medical Officer's Name (in BLOCK CAPITALS) PERRY

Consultant - St. Grade - Registrar (SHO) - Clinical Asst. (please circle)

CODE 152

Signature of Medical Officer

ROYAL ALEXANDRA HOSPITAL NHS TRUST ACCIDENT & EMERGENCY DEPT. Corsebar Road, PAISLEY PA2 9PN Tel. No: 0141 887 9111

NHS Confidential: Personal data about a patient

ROBIOLOGY PORT

ROYAL ALEXANDRA HOSPITAL
Corsebar Rd, Paisley PA2 9PN

CPA

Tel: 0141 887 9111
Enquiries/Results ext.

E NO. APX141261

CONSULTANT / GENERAL PRACTITIONER: Dr. M. W. Khan

ORNAME: PALMER FORENAME: CRAIG

28/07/1933 M

DOB ../../.. SEX .. WARD/ CLINIC ..

HOSPITAL: General Practice

ADDRESS FOR REPORT: 22 Cochrane Street

ext.
Consultant Microbiolog
Dr. C. Williams ext. 407
Dr. A. Eastaway ext. 44

Clinical Details

Antibiotic Therapy Amoxy-Clav

CULTURE AND SENSITIVITY

No Growth

Normal

Lab No.	Specimen	Date Received	Date Reported
006696	Wound Swab	10/07/1996	12/07/199

ROYAL ALEXANDRA HOSPITAL NHS TRUST - RADIOLOGY DEPARTMENT

Surname	: PALMER	Source	: THE OAKS MEDICA	X-Ray No.	: 451844
First Name	: CRAIG	Specialty	: GENERAL PRACT	Hosp Num	:
Sex	: Male	G.P.	: M W KHAN		
D.O.B.	: 27/07/68 Age : 29				

HISTORY: Recurrent dislocation. Bankarto procedure in 1986

LEFT SHOULDER: There is marked deformity of the humeral head and obliteration of the joint space. There is a metal screw in the lower joint.

noted before
? re-rejer to RAH.

please file
* Speak to Doctor

Authorised by: LS

Reported by: L.SEMPLE

Report Date: 18/12/97

Exam: SHOULDER L,

Exam Date : 18/12/97

NHS Confidential: Personal data about a patient

DEPARTMENT OF LABORATORY MEDICINE : BIOCHEMISTRY

CPA ACCREDITED

Royal Alexandra Hospital
Paisley PA2 9PN
Tel. No. 0141 887 9111

Patient ID No. APX36572
Surname PALMER
Forenames CRAIG
Date of Birth 27/07/1968 Sex M

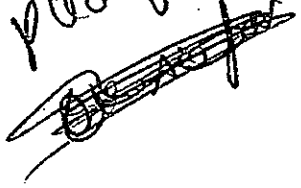
Consultant/GP Dr. M. W. Khan, 1 Paisle
Address General Practice
1 PAISLEY ROAD, BARRHEA

Microbiology 0141 580 445
Biochemistry 0141 580 405
Haematology 0141 580 405

Laboratory Ref. No.
CG074553

Clinical Details

BM Normal
pleural fluid ✓ JS



Date/Time Reported: 25/08/1998 15:27

REPORTED BY	SPEC. TYPE	CALCIUM mmol/l	Ca. ADJ. FOR ALB. 2.25-2.55 mmol/l	PHOSPHATE 0.8-1.4 mmol/l	ALK. PHOS. (see over) iu/l	MAGNESIUM 0.7-1.1 mmol/l	URATE 0.12-0.42 mmol/l	AMYLASE < 200 iu/l
AU	B				209			

TESTS REQUIRED	TOTAL PROTEIN 62-82 g/l	ALBUMIN 37-50 g/l	BILIRUBIN 3-19 µmol/l	AST 13-42 iu/l	ALT 11-55 iu/l	LDH 170-600 iu/l	GGT 10-50 iu/l
LFT, TSH, UEL	74.4	43.7	5.4		15		13

DATE AND TIME OF SPECIMEN	GLUCOSE 2.5-5.2 mmol/l	SODIUM 135-145 mmol/l	POTASSIUM 3.5-5.0 mmol/l	CHLORIDE 97-107 mmol/l	BICARBONATE 23-30 mmol/l	UREA 2.5-7.5 mmol/l	CREATININE 62-124 µmol/l
25/08/1998 u/k		139.4	4.31	103.1	26.3	3.4	113

11/4/98

ALKALINE PHOSPHATASE	AGE	MALE iu/l	FEMALE iu/l
	20-29	100-320	70-260
	30-39	90-320	70-260
	40-49	100-360	80-290
	50-59	110-390	110-380
	60-69	120-450	110-380
	>69	120-460	90-430

NHS Confidential: Personal data about a patient

DEPARTMENT OF LABORATORY MEDICINE : HAEMATOLOGY

CPA ACCREDITED

Paisley PA2 9PN
Tel. No. 0141 887 9111
Microbiology 0141 580 44
Biochemistry 0141 580 40
Haematology 0141 580 40

Patient ID No. APX36572
Surname PALMER
Forenames CRAIG
Date of Birth 27/07/1968 Sex M

Consultant/GP Dr.M.W.Khan,1 Paisle
Address General Practice
1 PAISLEY ROAD, BARRHEA

Laboratory Ref. No.
HR086147

Clinical Details

Monospot negative
Differential White Cell Count Appears Normal.

All Normal
JS

Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.

	Neut x 10⁹/l	Lymph x 10⁹/l	Mono x 10⁹/l	Eos x 10⁹/l	Baso x 10⁹/l	Meta x 10⁹/l	Myelo x 10⁹/l	Blast x 10⁹/l	Others x 10⁹/l	Atypical Lymphs x 10⁹/l	NRBC x 10⁹/l
Date/Time Received 5/08/1998 14:16	2.0 - 7.5	1.5 - 4.0	0.2 - 0.8	0.04 - 0.4	<0.01 - 0.1						
	6.8	2.0	0.8	0.1	0.1						
Date/Time Reported 5/08/1998 19:25	WCC x 10⁹/l	Hb g/dl	RCC x 10¹²/l	Hct l/l	MCV fl	MCH pg	RDW	Retic x 10⁹/l	Plats x 10⁹/l	Infectious Mono Screen	ESR mm/hr
Date of Specimen 25/08/1998	4.0 - 11.0	M 13.0 - 18.0 F 11.5 - 16.5	M 4.5 - 6.5 F 3.8 - 5.8	M 0.40 - 0.54 F 0.37 - 0.47	78 - 99	27.0 - 32.0	11.5 - 14.5	25 - 100	150 - 400		M <10mm F <12mm
HR086147V	9.8	12.6	4.57	0.39	85.7	27.7	13.7		260	NEG	

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DEPARTMENT OF LABORATORY MEDICINE : BIOCHEMISTRY

CPA ACCREDITED

Royal Alexandra Hospital
Paisley PA2 9PN
Tel. No. 0141 887 9111

Microbiology 0141 580 445
Biochemistry 0141 580 405
Haematology 0141 580 405

Patient ID No. APX36572
Surname PALMER
Forenames CRAIG
Date of Birth 27/07/1968 Sex M

Consultant/GP Dr.M.W.Khan,1 Paisle
Address General Practice
1 PAISLEY ROAD, BARRHEA

Laboratory Ref. No.
CG074553

Clinical Details

TSH	1.14	mu/l	(0.4 - 4.0)

EUTHYROID

All Normal
WS

Date/Time Reported: 26/08/1998 12:01

REPORTED BY	SPEC. TYPE	CALCIUM mmol/l	Ca. ADJ. FOR ALB. 2.25-2.55 mmol/l	PHOSPHATE 0.8-1.4 mmol/l	ALK. PHOS. (see over) iu/l	MAGNESIUM 0.7-1.1 mmol/l	URATE 0.12-0.42 mmol/l	AMYLASE < 200 iu/l
EA	B							
TESTS REQUIRED: LFT, TSH, UEL		TOTAL PROTEIN 62-82 g/l	ALBUMIN 37-50 g/l	BILIRUBIN 3-19 µmol/l	AST 13-42 iu/l	ALT 11-55 iu/l	LDH 170-600 iu/l	GGT 10-50 iu/l
DATE AND TIME OF SPECIMEN: 25/08/1998 u/k		GLUCOSE 2.5-5.2 mmol/l	SODIUM 135-145 mmol/l	POTASSIUM 3.5-5.0 mmol/l	CHLORIDE 97-107 mmol/l	BICARBONATE 23-30 mmol/l	UREA 2.5-7.5 mmol/l	CREATININE 62-124 µmol/

1/9/98

ALKALINE PHOSPHATASE	AGE	MALE iu/l	FEMALE iu/l
	20-29	100-320	70-260
	30-39	90-320	70-260
	40-49	100-360	80-290
	50-59	110-390	110-380
	60-69	120-450	110-380
	>69	120-460	90-430

EXANDRA HOSPITAL NHS TRUST - RADIOLOGY DEPARTMENT

PALMER
RAIG
Male
7/07/68 Age : 30

Source : THE OAKS MEDICA
Specialty : GENERAL PRACT
G.P. : M W KHAN

X-Ray No. : 533062
Hosp Num :

Widespread lymphadanopathy. FBC normal. Please check for hilar enlargement.

The heart is not enlarged. There is no evidence of hilar or mediastinal lymphadanopathy. no evidence of active pulmonary disease.

NORMAL
NG

JN

Reported by: J NEGRETTE

Report Date: 14/09/98

Exam Date : 14/09/98

NORTHGATE
DOCUMENTS STAMPED
TO ENSURE DETECTION
BY SCANNER

F 319

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DEPARTMENT OF LABORATORY MEDICINE : HAEMATOLOGY

CPA ACCREDITED

Royal Alexandra Hospital
Paisley PA2 9PN
Tel. No. 0141 887 9111

Microbiology 0141 580 44
Biochemistry 0141 580 40
Haematology 0141 580 40

Patient ID No. 226269
Surname PALMER
Forenames CRAIG
Date of Birth 27/07/1968 Sex M

Consultant/GP Dr.M.W.Khan,1 Paisle
Address General Practice
1 PAISLEY ROAD, BARRHEA

Laboratory Ref. No.
HR226312

Clinical Details

Please fill

Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.

	Neut x 10⁹/l	Lymph x 10⁹/l	Mono x 10⁹/l	Eos x 10⁹/l	Baso x 10⁹/l	Meta x 10⁹/l	Myelo x 10⁹/l	Blast x 10⁹/l	Others x 10⁹/l	Atypical Lymphs x 10⁹/l	NRBC x 10⁹/l
Date/Time Received 09/03/1999 15:46	2.0 - 7.5	1.5 - 4.0	0.2 - 0.8	0.04 - 0.4	<0.01 - 0.1						
Date/Time Reported 09/03/1999 20:05	4.9	1.8	0.5	0.1	0.0						
	WCC x 10⁹/l	**Hb g/dl**	**RCC x 10¹²/l**	**Hct l/l**	**MCV fl**	**MCH pg**	**RDW**	**Retic x 10⁹/l**	**Plats x 10⁹/l**	**Infectious Mono Screen**	**ESR mm/hr**
Date of Specimen 09/03/1999	4.0 - 11.0	M 13.0 - 18.0 F 11.5 - 16.5	M 4.5 - 6.5 F 3.8 - 5.8	M 0.40 - 0.54 F 0.37 - 0.47	78 - 99	27.0 - 32.0	11.5 - 14.5	25 - 100	150 - 400		M <10mm F <12mm
HR226312Z	7.3	13.1	4.40	0.39	89	29.7	13.4		235		6

NORTHGATE
DOCUMENTS STAMPED
TO ENSURE DETECTION
BY SCANNER

AC
Lab

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DEPARTMENT OF LABORATORY MEDICINE : MICROBIOLOGY

CPA ACCREDITED

Royal Alexandra Hospital
Paisley PA2 9PN
Tel. No. 0141 887 9111

Microbiology 0141 580 445
Biochemistry 0141 580 405
Haematology 0141 580 405

Patient ID No.	226269	Consultant/GP	Dr M. W. Khan, 1 Paisle
Surname	PALMER	Address	General Practice
Forenames	CRAIG		1 PAISLEY ROAD, BARRHEA
Date of Birth	27/07/1968 Sex M		

Laboratory Ref. No. MG073725

Clinical Details

Antibiotic Therapy: Not stated

CULTURE AND SENSITIVITY

No Growth

Date/Time Received : 23/03/1999

MICROBIOLOGY

Wound Swab 25/03/199

31.3.94
mt

NHS Confidential: Personal data about a patient

DEPARTMENT OF LABORATORY MEDICINE : BIOCHEMISTRY

CPA ACCREDITED

Royal Alexandra Hospital
Paisley PA2 9PN
Tel. No. 0141 887 9111

Microbiology 0141 580 445
Biochemistry 0141 580 405
Haematology 0141 580 405

Patient ID No 226269
Surname PALMER
Forenames CRAIG
Date of Birth 27/07/1968 Sex M

Consultant/GP Dr. M. W. Khan, 1 Paisle
Address General Practice
1 PAISLEY ROAD, BARRHEA

Laboratory Ref. No.
CG347161

Clinical Details

Ferritin 5 ug/l (24 - 265)

DEPLETED IRON STORES

✓ RS

Speak to DR

Date/Time Reported: 31/08/1999 14:30

REPORTED BY	SPEC. TYPE	CALCIUM mmol/l	Ca. ADJ. FOR ALB. 2.25-2.55 mmol/l	PHOSPHATE 0.8-1.4 mmol/l	ALK. PHOS. (see over) iu/l	MAGNESIUM 0.7-1.1 mmol/l	URATE 0.12-0.42 mmol/l	AMYLASE iu/l
AU	B							

TESTS REQUIRED	TOTAL PROTEIN 62-82 g/l	ALBUMIN 37-50 g/l	BILIRUBIN 3-19 µmol/l	AST 13-42 iu/l	ALT 11-55 iu/l	LDH 170-600 iu/l	GGT 10-50 iu/l
BONE, FERR							

DATE AND TIME OF SPECIMEN	GLUCOSE 2.5-5.2 mmol/l	SODIUM 135-145 mmol/l	POTASSIUM 3.5-5.0 mmol/l	CHLORIDE 97-107 mmol/l	BICARBONATE 23-30 mmol/l	UREA 2.5-7.5 mmol/l	CREATININE 62-12
30/08/1999 u/k							

ALKALINE PHOSPHATASE

AGE	MALE iu/l	FEMALE iu/l
20-29	100-320	70-260
30-39	90-320	70-260
40-49	100-360	80-290
50-59	110-390	110-380
60-69	120-450	110-380
>69	120-460	90-430

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DEPARTMENT OF LABORATORY MEDICINE : HAEMATOLOGY

CPA ACCREDITED

Royal Alexandra Hospital
Paisley PA2 9PN
Tel. No. 0141 887 9111

Microbiology 0141 580 445
Biochemistry 0141 580 405
Haematology 0141 580 405

Patient ID No. 226269
Surname PALMER
Forenames CRAIG
Date of Birth 27/07/1968 Sex M

Consultant/GP Dr.M.W.Khan,1 Paisle
Address General Practice
1 PAISLEY ROAD, BARRHEA

Laboratory Ref. No.
HR342084
22C

Clinical Details

Rbc show hypochromia
Rbc features suggest iron deficiency

Speak to Dr
visit for iron
NS

Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.

Date/Time Received
23/08/1999 16:23

Date/Time Reported
24/08/1999 13:47

Date of Specimen
23/08/1999

HR342084X

	Neut x 10^9/l	Lymph x 10^9/l	Mono x 10^9/l	Eos x 10^9/l	Baso x 10^9/l	Meta x 10^9/l	Myelo x 10^9/l	Blast x 10^9/l	Others x 10^9/l	Atypical Lymphs x 10^9/l	NRBC x 10^9/l
	2.0 - 7.5	1.5 - 4.0	0.2 - 0.8	0.04 - 0.4	<0.01 - 0.1						
	3.7	1.9	0.5	0.1	0.0						

	WCC x 10^9/l	Hb g/dl	RCC x 10^{12}/l	Hct l/l	MCV fl	MCH pg	RDW	Retic x 10^9/l	Plats x 10^9/l	Infectious Mono Screen	ESR mm/hr
	4.0 - 11.0	M 13.0 - 18.0 F 11.5 - 16.5	M 4.5 - 6.5 F 3.8 - 5.8	M 0.40 - 0.54 F 0.37 - 0.47	78 - 99	27.0 - 32.0	11.5 - 14.5	25 - 100	150 - 400		M <10mm F <12mm
	6.2	9.6	4.01	0.30	76.2	23.9	15.4		308		13

8/9

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DEPARTMENT OF LABORATORY MEDICINE : BIOCHEMISTRY

CPA ACCREDITED

Royal Alexandra Hospital
Paisley PA2 9PN
Tel. No. 0141 887 9111

Microbiology 0141 580 445
Biochemistry 0141 580 405
Haematology 0141 580 405

Patient ID No 226269
Surname PALMER
Forenames CRAIG
Date of Birth 27/07/1968 Sex M

Consultant/GP Dr. M. W. Khan, 1 Paisle
Address General Practice
1 PAISLEY ROAD, BARRHEA

Laboratory Ref. No.
CG347161

Clinical Details

-1 SEP 1999

(N) file please
MA NG

Date/Time Reported: 31/08/1999 09:56

REPORTED BY	SPEC. TYPE	CALCIUM mmol/l	Ca. ADJ. FOR ALB. 2.25-2.55 mmol/l	PHOSPHATE 0.8-1.4 mmol/l	ALK. PHOS. (see over) iu/l	MAGNESIUM 0.7-1.1 mmol/l	URATE 0.12-0.42 mmol/l	AMYLASE iu/l
AU	B	2.46	2.41	HAEM	HAEM			

TESTS REQUIRED	TOTAL PROTEIN 62-82 g/l	ALBUMIN 37-50 g/l	BILIRUBIN 3-19 µmol/l	AST 13-42 iu/l	ALT 11-55 iu/l	LDH 170-600 iu/l	GGT 10-50 iu/l
BONE, FERR	78.8	46.6					

DATE AND TIME OF SPECIMEN	GLUCOSE 2.5-5.2 mmol/l	SODIUM 135-145 mmol/l	POTASSIUM 3.5-5.0 mmol/l	CHLORIDE 97-107 mmol/l	BICARBONATE 23-30 mmol/l	UREA 2.5-7.5 mmol/l	CREATININE 62-124 µmol/l
30/08/1999 u/k							

ALKALINE PHOSPHATASE	AGE	MALE iu/l	FEMALE iu/l
	20-29	100-320	70-260
	30-39	90-320	70-260
	40-49	100-360	80-290
	50-59	110-390	110-380
	60-69	120-450	110-380
	>69	120-460	90-430

NHS Confidential: Personal data about a patient

DEPARTMENT OF LABORATORY MEDICINE : HAEMATOLOGY

CPA ACCREDITED

Royal Alexandra Hospital
Paisley PA2 9PN
Tel. No. 0141 887 9111

Microbiology 0141 580 445
Biochemistry 0141 580 405
Haematology 0141 580 405

Patient ID No. 226269
Surname PALMER
Forenames CRAIG
Date of Birth 27/07/1968 Sex M

Consultant/GP Dr.M.W.Khan,1 Paisle
Address General Practice
1 PAISLEY ROAD, BARRHEA

Laboratory Ref. No.
HR380409

Clinical Details
22C

Suggests response to therapy

Much better
See notes for
TPA in 8 weeks

Normal Adult Reference Ranges are for Guidance Only.
They do not take into account age difference.

	Neut x 10⁹/l	Lymph x 10⁹/l	Mono x 10⁹/l	Eos x 10⁹/l	Baso x 10⁹/l	Meta x 10⁹/l	Myelo x 10⁹/l	Blast x 10⁹/l	Others x 10⁹/l	Atypical Lymphs x 10⁹/l	NRBC x 10⁹/l
Date/Time Received	2.0 - 7.5	1.5 - 4.0	0.2 - 0.8	0.04 - 0.4	<0.01 - 0.1						
14/10/1999 16:41	3.5	1.6	0.5	0.1	0.0						
Date/Time Reported	WCC x 10⁹/l	Hb g/dl	RCC x 10¹²/l	Hct l/l	MCV fl	MCH pg	RDW	Retic x 10⁹/l	Plats x 10⁹/l	Infectious Mono Screen	ESR mm/hr
14/10/1999 20:05	4.0 - 11.0	M 13.0 - 18.0 F 11.5 - 16.5	M 4.5 - 6.5 F 3.8 - 5.8	M 0.40 - 0.54 F 0.37 - 0.47	78 - 99	27.0 - 32.0	11.5 - 14.5	25 - 100	150 - 400		M <10mm F <12mm
Date of Specimen 04/10/1999											
HR380409Y	5.7	12.3	4.71	0.37	80.1	26.1	26.0		328		9

15/4/99
MH

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DEPARTMENT OF LABORATORY MEDICINE : BIOCHEMISTRY

CPA ACCREDITED

Royal Alexandra Hospital
Paisley PA2 9PN
Tel. No. 0141 887 9111

Microbiology 0141 580 4453
Biochemistry 0141 580 4058
Haematology 0141 580 4058

Patient ID No. 226269
Surname PALMER
Forenames CRAIG
Date of Birth 27/07/1968 Sex M

Consultant/GP Dr. M. W. Khan - Paisle
Address General Practice
1 PAISLEY ROAD, BARRHEA

Laboratory Ref. No.
CG380409
22C

Clinical Details

Ferritin	76	ug/l	(24 - 265)

Much better.
See Nurse for repeat in 8 weeks

Date/Time Reported: 05/10/1999 14:52

REPORTED BY	SPEC. TYPE	CALCIUM mmol/l	Ca. ADJ. FOR ALB. 2.25-2.55 mmol/l	PHOSPHATE 0.8-1.4 mmol/l	ALK. PHOS. (see over) iu/l	MAGNESIUM 0.7-1.1 mmol/l	URATE 0.12-0.42 mmol/l	AMYLASE iu/l
EA	B							

TESTS REQUIRED	TOTAL PROTEIN 62-82 g/l	ALBUMIN 37-50 g/l	BILIRUBIN 3-19 µmol/l	AST 13-42 iu/l	ALT 11-55 iu/l	LDH 170-600 iu/l	GGT 10-50 iu/l
ERR							

DATE AND TIME OF SPECIMEN	GLUCOSE 2.5-5.2 mmol/l	SODIUM 135-145 mmol/l	POTASSIUM 3.5-5.0 mmol/l	CHLORIDE 97-107 mmol/l	BICARBONATE 23-30 mmol/l	UREA 2.5-7.5 mmol/l	CREATININE 62-124 µmol/l
04/10/1999 u/k							

ALKALINE PHOSPHATASE	AGE	MALE iu/l	FEMALE iu/l
	20-29	100-320	70-260
	30-39	90-320	70-260
	40-49	100-360	80-290
	50-59	110-390	110-380
	60-69	120-450	110-380
	>69	120-460	90-430

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DEPARTMENT OF LABORATORY MEDICINE : HAEMATOLOGY

CPA ACCREDITED

Royal Alexandra Hospital
Paisley PA2 9PN
Tel. No. 0141 887 9111

Microbiology 0141 580 445
Biochemistry 0141 580 405
Haematology 0141 580 405

Patient ID No. 226269
Surname PALMER
Forenames CRAIG
Date of Birth 27/07/1968 Sex M

Consultant/GP Dr.M.W.Khan,1 Paisle
Address General Practice
1 PAISLEY ROAD, BARRHEA

Laboratory Ref. No.
HR426033
22C

Clinical Details

Normal Adult Reference Ranges are for Guidance Only.
They do not take into account age difference.

Date/Time Received	Neut x 10^9/l	Lymph x 10^9/l	Mono x 10^9/l	Eos x 10^9/l	Baso x 10^9/l	Meta x 10^9/l	Myelo x 10^9/l	Blast x 10^9/l	Others x 10^9/l	Atypical Lymphs x 10^9/l	NRBC x 10^9/l
	2.0 - 7.5	1.5 - 4.0	0.2 - 0.8	0.04 - 0.4	<0.01 - 0.1						
06/12/1999 16:16	6.9	1.5	0.7	0.1	0.0						

Date/Time Reported	WCC x 10^9/l	Hb g/dl	RCC x 10^{12}/l	Hct l/l	MCV fl	MCH pg	RDW	Retic x 10^9/l	Plats x 10^9/l	Infectious Mono Screen	ESR mm/hr
06/12/1999 20:05		M 13.0 - 18.0	M 4.5 - 6.5	M 0.40 - 0.54							M <10mm
Date of Specimen	4.0 - 11.0	F 11.5 - 16.5	F 3.8 - 5.8	F 0.37 - 0.47	78 - 99	27.0 - 32.0	11.5 - 14.5	25 - 100	150 - 400		F <12mm
06/12/1999											
HR426033E	9.2	13.3	4.62	0.40	88	28.9	18.9		283		29

NORTHGATE
DOCUMENTS STAMPED
TO ENSURE DETECTION
BY SCANNER

2212

NHS Confidential: Personal data about a patient

DEPARTMENT OF LABORATORY MEDICINE : MICROBIOLOGY

CPA ACCREDITED

Patient ID No.	226269	Consultant / GP	Dr T. Naven	Royal Alexandra Hospital Paisley PA2 9PN Tel. No. 0141 887 9111
Surname.	PALMER	Address	General Practice	
Forename.	CRAIG		1 Paisley Rd, Barrhead	Microbiology 0141 580 4453 Biochemistry 0141 580 4058 Haematology 0141 580 4058
Date of Birth	27/07/1968 Sex M			
Clinical Details		Antibiotic Therapy	No antibiotics	Laboratory Ref. No. MG009932

Specimen Comment

Culture and Sensitivity

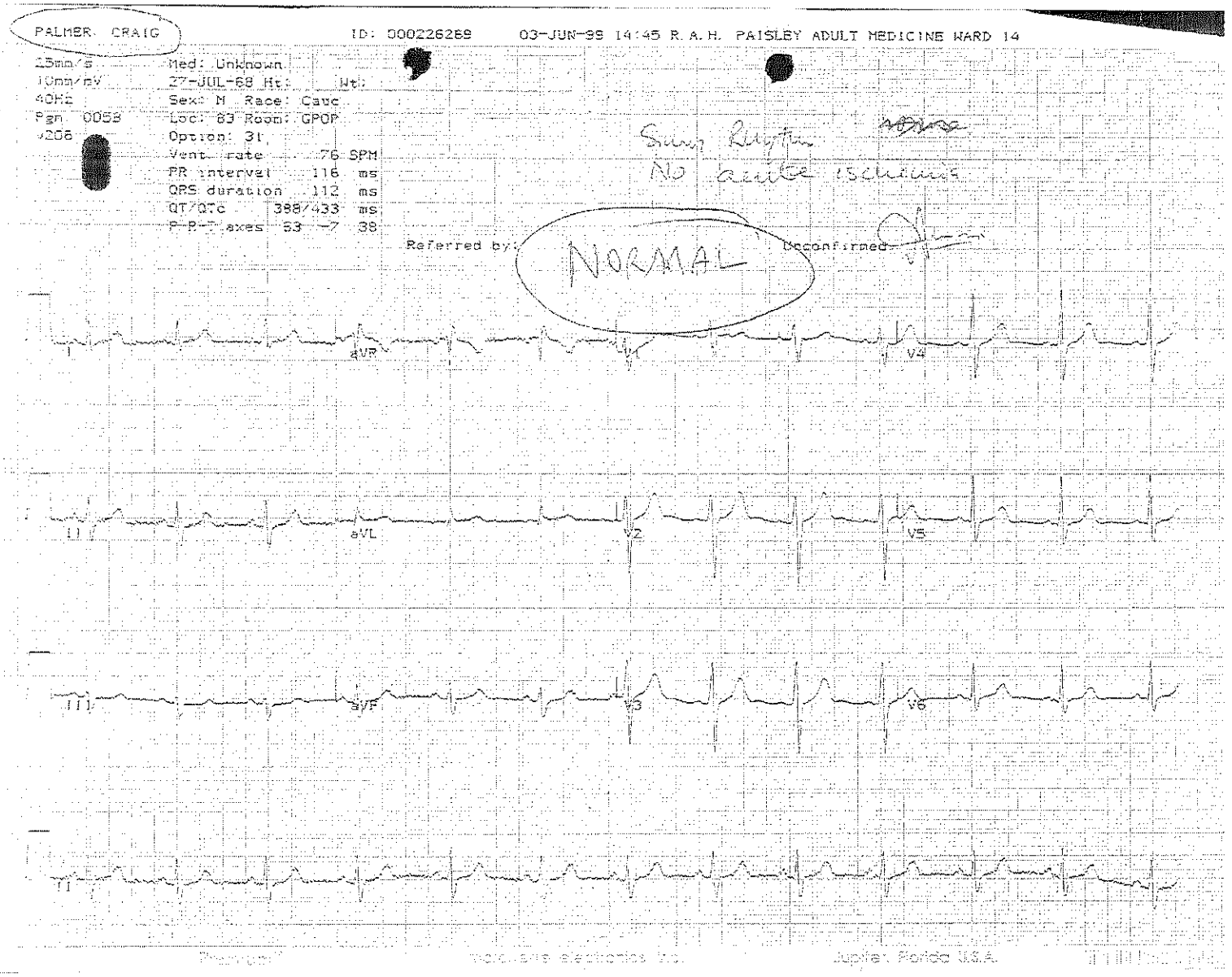
Mixed skin and faecal type flora

M

MICROBIOLOGY

Date Reported : 15/06/2001

MICROBIOLOGY	SWAB SINUS : CULTURE AND SENSITIVITY 14/06/2001



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HPK 2001 V
HPK V

SURNAME (BLOCK LETTERS)				MALE
TITLE	PAYER			OCCUPATION
FORENAMES (BLOCK LETTERS)	CRAIG			PHONE NUMBER 07900 874682
DATE OF BIRTH	SINGLE		N.H.S. NUMBER	
27/7/68	MARRIED (DATE)		368 HH 68 408	
	DIVORCED (DATE)		C.H.I. NUMBER	
	WIDOWED (DATE)			

ALLERGIES ..... SPECIAL HAZARDS .....

ADDRESS	D	M	DOCTOR'S NAME	CIPHER & DATE
1. 104 Crossmill Ave BALLYMENA			Dr. Hughes	
2.				

Form GP 11B (Rev. 355—2091)

G.P.111.

Summary 12/6/18

*968/0036

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DWP Department for Work and Pensions

Disability and Carers Service

Website: www.direct.gov.uk/disability

Doctor Tom Naven
The Oaks Medical Centre
1 Paisley Road
Barrhead
G78 1HG

If you get in touch with us tell us this reference number **NW050085D**

New Claims
Glasgow DBC
Corunna House
29 Cadogan Street
Glasgow
G2 7BN

Our phone number **08457 123456**

If you have a textphone **08457 224433**

07:30 - 18:30 Monday - Friday

Date 03 September 2007

Dear Doctor Naven

Factual Report for Disability Living Allowance

I am writing to you about Mr Craig Palmer

Date of Birth 27/07/1968

Note. If the person has died or recently moved to another area please still complete the report if you can.

Your patient (or person appointed to handle their affairs) has made a claim for Disability Living Allowance. This is a benefit for people with severe disability. Entitlement is based on the amount of personal care or supervision needed or difficulty with getting around as a result of this disability. In order to decide this claim we need further information about their medical condition(s).

We hold your patient's (or a person appointed to handle their affairs) written consent to allow us to approach you for this information.

We would be grateful if you would answer the questions on this factual report based on your knowledge of the patient and their records. A special examination is not required.

It would be very helpful in assessing your patients benefit claim if you could complete and return this form within 10 working days. You can use the envelope we sent you. It does not require a stamp. I enclose a form for you to claim a fee of £33.50 which should accompany this report.

DWP Department for Work and Pensions

Customer Name: Craig Palmer
NINO: NW050085D

The person making the claim may, at any stage, request a copy of this report to be sent to them.

If there is any information you think would be harmful to their health, for example an adverse diagnosis or prognosis unknown to them, please provide details on the appropriate section of the enclosed report, marked **"Harmful Information".**

Please include in your report any relevant information contained in letters or reports from hospitals or consultants. If you think it is essential to send us originals or any copies of any letters from consultants, please obtain the author's consent for the correspondence to be used in connection with your patient's claim.

To ensure compliance with 'Rehabilitation of Offenders Act 1974', your report should not contain any reference to criminal convictions, whether spent or not, unless the information is directly relevant to the customer's condition or disability.

This report is not subject to the Access to Medical Reports Act 1998. The patient does not need to read it before it is returned.

The Disability Living Allowance and Attendance Allowance Helpline is set up to answer enquiries. Please get in touch with them if you want to ask about anything in this letter. To make sure you receive a good standard of service from the Disability Living Allowance and Attendance Allowance Helpline, our Managers may monitor or record telephone calls without warning.

Thank you for your help.

Yours sincerely

Tom Henderson

On behalf of the Department for Work and Pensions

DWP Department for Work and Pensions

Customer Name: Craig Palmer
NINO: NW050085D

Your Report

Date when patient last seen 7/10/07

1. Diagnosis of the disabling conditions (do not include minor transient conditions).

(L) shoulder infection as a Result of Pinning 15 yrs Ago - began of Recurrent dislocation -

2. Please give brief details of history of condition(s) stating whether they are mild, moderate, or severe, in you answer. Include details of any relevant special investigations.

- As Above -
- Continues Smelly discharge from joint despite Antibiotics -

3. Day to day variation in the conditions(s) (if any) including frequency and duration of exacerbations.

Sees Orthopaedic specialist who says there is also arthritis there - and it may have to be fused

DWP Department for Work and Pensions

Customer Name: Craig Palmer
NINO: NW050085D

Customer's Details

Full Name Mr Craig Palmer

Date of Birth 27/07/1968

Address 104 Crossmill Avenue
Barrhead
Glasgow
G78 1AL

Information from your patient's claim shows that they have the following medical condition/disabilities.

1 Shoulder problems	**2 Crohn's Disease**

For the attention of the General Practitioner

In the section headed YOUR REPORT please consider and comment in your response on the following;

We would be grateful if you could respond to questions within the body of your report in relation to the above medical conditions/disabilities.

DWP Department for Work and Pensions

Customer Name: Craig Palmer
NINO: NW050085D

Please add any further details you think would be helpful to the Department when deciding on this claim

Thank you

Now please sign and date your report.

I understand that, in certain circumstances, this report will be released to my patient, their legal representative and any authority deciding an appeal in relation to their entitlement to benefit. I also understand that the only information that can be withheld is medical evidence that would be harmful to the person's health.

Signature [signature] **Date** 1/10/07

Name in capital letters T NAVEN

Surgery Stamp

Tom Naven MB BCh MRCGP C3953
The Oaks Medical Centre
1 Paisley Road
Barrhead G78 1HG
Tel 0141 580 1001/2
Fax 0141 580 1003

DWP Department for Work and Pensions

Customer Name: Craig Palmer
NINO: NW050085D

4. Relevant clinical findings - for example, visual acuities, hearing, auscultatory findings, peak flow, range of joint movement, muscle wasting, SLR, reflexes, extent of breathlessness.

- Intermittently, feels depression because of this chronic problem

5. Treatment - Current treatment including medication and dosage, response to treatment including control of condition and prognosis.

Prodine 600mg BD
Co-codamol 30/500

6. Please give details, IF KNOWN, of the effects of the disabling condition(s) on day to day life;

(a) Self care - for example, washing, dressing, feeding, using the toilet, continence, and ability to rise from the chair.

- Partner helps him to clothe, wash and cook for himself.

(b) Insight and awareness of danger.

—

(c) Ability to get around including pain, gait, balance, breathlessness and visual loss.

DWP Department for Work and Pensions

Customer Name: Craig Palmer
NINO: NW050085D

Harmful Information – do not copy

We may have to send a copy of the report to your patient. Certain information may be withheld if it appears to the Decision Maker or Appeal Tribunal that its disclosure would be **harmful to your patient's health.** An example of what may be harmful information is a diagnosis or prognosis that is **not** known to your patient, such as malignancy, progressive neurological conditions or **major** mental illness.

Please note that we cannot withhold information on any other grounds.
For example, information relating to comments or remarks likely to cause embarrassment to the customer, carer, the author or a professional colleague.

Please only write about harmful information on this page

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DWP Department for Work and Pensions

Disability Living Allowance
Claim for a medical report fee

A About the person with the illness or disability

Surname: Palmer

Other Names: Craig

National Insurance Number: NW050085D

Date of Birth: 27/07/1968

B Declaration

Please complete **all** the boxes on this page to assist payment.

To claim £33.50 for completion of the report, please return the completed form together with the report so that payment can be made. **PLEASE COMPLETE IN BLOCK CAPITALS USING BLACK INK** and return in the envelope provided, it does not need a stamp.

B1 **Is this your first claim?** (Please tick appropriate box) ☐ **Yes** ☐ **No**

If you have ticked **Yes** please also complete **Section C** on page 2 and move directly to Question **B3** below.

B2 Please provide your Payee Reference Number. This can be found on your last Remittance Advice Slip.

B3 Please provide your GMC number. This will help us maintain more accurate records.

B4 ☐ **I am claiming the fee for completing the report** (please tick appropriate box)

☐ **I am not claiming the fee for completing the report**

Are you registered for VAT? ☐ **No** ☐ **Yes** Please provide your VAT No.

B5 Your Name — Title (e.g. Dr, Mr, Mrs) | Initials | Surname

B6 Name and daytime phone number (including STD code) of a person to contact if we have a query with this form.

Name (in full)

Daytime phone number (incl STD code)

Surgery address
If the information shown is incorrect, please complete **Section C** on page 2.

The Oaks Medical Centre
1 Paisley Road
Barrhead
G78 1HG

B7 **Do you want to change your existing payment details?** (Please tick appropriate box)

☐ **Yes** (please complete page 2)

☐ **No**

B8 **Signature**

Taxable Date D D / M M / Y Y Y Y — 21/10/07

DWP Department for Work and Pensions

Customer Name: Craig Palmer
NINO: NW050085D

C Telling us about your details

Complete this section if it is your **first claim** or you wish to **change** existing details.

C1 Notification/Changes to your Remittance Advice address

Please provide the full address of where you wish the Remittance Advice slip to be sent.

Postcode

C2 Notification/Changes to your payment details

Please provide details of the account you want this claim paid into. This will also be the account we will send any future payments to.
(We can only make payment directly into a bank or building society account)

Name of bank/building society

Branch name

Account name

Bank Sort Code number

Account Number

Roll number (Building Society only)

C3 Signature

Date D D / M M / Y Y Y Y

We will write to you with details of when payment will be made. When you receive this information, keep it safe as you need to use your **payee reference number** for future claims.

D FOR OFFICIAL DWP USE ONLY

D1 Authorisation of fees

The claim has been examined. Payment of £33.50 (net) is approved.

D2 Charge to: **BU** 03 **C/C** 118127 **A/C code** 32591

D3 Signature

Date D D / M M / Y Y Y Y

Authorisation Stamp

Office address stamp/"examined" stamp

IMMUNISATIONS AND VACCINATIONS

	Date
Diphtheria	
Pertussis	
Tetanus Toxoid	
Serum	
Poliomyelitis	
Others	

Smallpox	Date	Result

Tuberculin Test Method	Date	Result

B.C.G.	Date	Result

Rh. Factor	Date	Blood Group

MAJOR ALLERGIES AND NOTES OF ANY SERUM ADMINISTRATION

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SURNAME	CHRISTIAN NAMES	OCCUPATION
PALMER	CRAIG	

National Health Service Number	Single / Married / Widowed	Date of Birth				(Note changes and insert year of change)
556L-68-908			24	7	68	19.....

Address (1)	Name of Practitioner	Executive Council Cipher — Date	
81 Wright St Renfrew.	A.M. BROWN	(1) 13/6/74	19.....
Meyrhall House Houston.	(2) W.R. & Ritchison	(2) 17-9-78	19.....
		23 OCT 1978	Died ..... 19.....
KAI MALE 953 605 OAKHOUSE RD	YLEAD F BOYLE	(3) G 2 6 DEC 1983	CAUSE OF DEATH
26 B DIVERNIA WAY BARRHEAD	(4) DR R-H-FREEDMAN	22 APR 1988	1. 2.

Form E.C.5B (Scotland) — MALE

Signature of Practitioner

CORRECTED SURNAME CHRISTIAN NAMES

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04

CALL NO.

PATIENT'S NAME & ADDRESS Craig Palmer
6A Bowerwalls St
Barrhead G.L.

D.O.B. 27.7.68

DATE 8.7.96

TIME RECEIVED 21.14

TELEPHONE INFORMATION RECEIVED
Has pin in shoulder inserted 2 yrs ago
now has painful lump

TIME ARRIVED

TIME COMPLETED

HISTORY & EXAMINATION

Painful + Swollen +
Tender
+ Scar of Lt Shoulder

TEMP.

PULSE

B.P.

DIAGNOSIS (BLOCK CAPITALS)

? Abscess

PATIENT TO CALL IF NECESSARY

TO SURGERY ON

DAY

TREATMENT / DISPOSAL (BLOCK CAPITALS)

Cap Amoxil 250mg
Tab Augmentin 625mg
Adv to see her own GP

PLEASE REVISIT ON

DAY

HOSPITAL ADMISSION ARRANGED

PATIENT'S OWN DOCTOR Dr. Kahn Cochrane St

MEDIC CALL

NHS Confidential: Personal data about a patient

benefits agency

An Executive Agency of the Department of Social Security.

DR M KHAN
THE OAKS MEDICAL CENTRE
1 PAISLEY ROAD
BARRHEAD

Your reference is NW050085D
Please tell us this number if you get in touch with us

Renfrew
2 Lonend
Paisley
Renfrewshire
PA1 1SS

Phone 0141 8474000
TEXTPHONE for the deaf/hard of hearing ONLY 0141 8474061

Date 23/05/2000
FOR MR CRAIG DAVID PALMER

INFORMATION ABOUT A PATIENT

About the patient

Name	MR CRAIG DAVID PALMER
Address	104 CROSSMILL AVENUE BARRHEAD GLASGOW G78 1AX
National Insurance Number	NW050085D
Date of Birth	27/07/1968

Payment of benefit and the award of National Insurance credits due to incapacity for work are subject to an incapacity test. If a customer satisfies the test or is incapable of work, they no longer need to send us medical certificates.

23/05/2000

MR CRAIG DAVID PALMER

REF: NW050085D

The patient shown above has satisfied the incapacity test or is treated as incapable of work so we do not require further NHS medical certificates for this person's present claim for benefit. However, we may need to contact you for further information about your patient in the future.

Proof of incapacity or illness may still be required for other interested groups or organisations such as employers and insurance companies. The provision of this information is not usually an NHS requirement.

If your patient makes another claim for benefit in the future, we will require medical certificates from the date of incapacity.

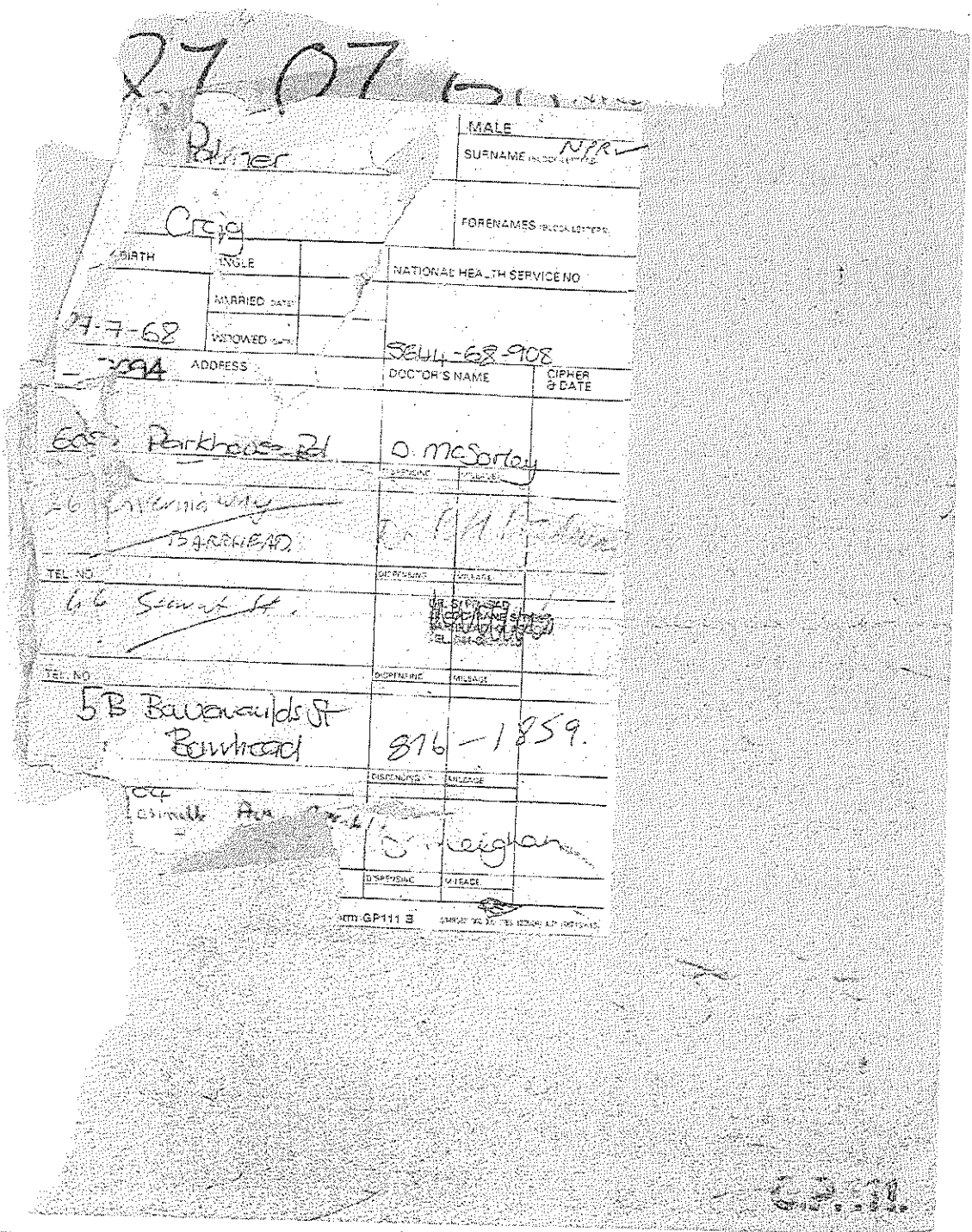
The booklet 'A guide for registered medical practitioners' gives you more information. If you do not already have this booklet, you can get it from your local Family Health Authority or Health Board.

If you want to ask us anything about this letter, please get in touch with us. Our phone number and address are at the top of this letter.

Yours sincerely,

IB74

NHS Confidential: Personal data about a patient



NHS Confidential: Personal data about a patient

IB113 (SS) 01/04

Incapacity for work

Office stamp

OBCENTRE PLUS OFFICE [illegible]

DR NAVEN
THE OAKS MEDICAL CENTRE
1 PAISLEY ROAD
BARRHEAD
G78 1HG

Our phone number is

Code 0141 Number 847 Ext 4177

If you have textphone, you can call on

Code Number

If you get in touch with us, tell us this reference number

NW 05 00 85D

Date

28 / 4 / 2006

About your patient

Surname	PALMER
Other names	CRAIG DAVID
NI number	N W 0 5 0 0 8 5 D
Date of birth	27/07/1968
Address	104 CROSSMILL AVENUE BARRHEAD
Postcode	G78 1AX

Dear Doctor,

Your patient has claimed benefit due to incapacity and we now have to assess their capacity to perform any work, not just their own job, using the Personal Capability Assessment procedures. People with certain severe medical conditions can be accepted as meeting the threshold of incapacity for benefit purposes without undergoing the Personal Capability Assessment or, if the assessment has to be applied, without undergoing a medical examination.

From the information you have provided on a medical statement (for example form Med 3), or information otherwise available to the medical officer, it appears that this may be such a case. In order to advise the decision maker in accordance with the law, the medical officer requires further factual information. We would be obliged if you would answer the medical officer's questions overleaf clearly indicating on a separate sheet, any medical evidence that you think would be harmful to the patient's health. An example of what may be harmful information is a diagnosis that is not known to your patient such as malignancy, progressive neurological conditions or major mental illness.

Your patient has given written consent on their claim form to allow us to approach you for this information.

If you have agreed to treat this patient under the NHS (General Medical Services) Regulations 1992 as amended March 1998 and equivalent regulations in Scotland, and have issued, or refused to issue, a medical certificate to them, you are obliged by your terms of service to supply clinical information to a medical officer. A similar obligation applies to most hospital and community doctors working within the NHS. You are not obliged to do this if you have not agreed to treat the patient under the NHS but any information you are willing to provide will be much appreciated. Unfortunately, we will be unable to pay you for it.

A reply within 7 days will be appreciated and a business reply envelope is enclosed for your use. If you have any queries about this form please contact the medical officer at your local Medical Services Centre, see **IB204** *Guide for Registered Medical Practitioners* [available at www.dwp.gov.uk/medical].

Thank you for your help.

Yours sincerely

On behalf of the Manager
For the Medical Officer

Social Security Office

Part of the Jobcentre Plus network,
Department for Work and Pensions

For official use	
DO	Ref type
1511	IB113SC
First day of incapacity	
14 / 1 / 1999	

About your patient – continued

CRAIG DAVID PALMER NW050085D

Your reply

Please answer the following questions from the information which is currently available to you.

1. Date patient was last seen or examined for the condition(s) causing incapacity

2/-3-06

2. Diagnosis of all relevant conditions and date(s) of onset

(L) shoulder joint damaged

3. Factual details of patient's condition

Where possible, please include brief factual details of

- present medical condition
- medication and other treatments (eg attendance at day care centre/hospital outpatient)
- outlook for your patient and any proposals for future management

- awaits Reconstruction by Salford

- outlook - uncertain.