

Subject Access Request



Patient	Miss Audra Martin
Date of birth	13-Dec-1968 (age 57)
Gender	F
NHS number	1312680024
Patient's address	17 Hillbank Pl Dundee DD3 7BE
Date range selected	Full record
Organisation	MMA LEGAL
Reference	100108

Problems

Active

14-Apr-2026 Miss Holly Walton-Jones
Falls

16-Jun-2023 Dr Nectarios Perdios
Chronic pain

09-Mar-2022 Dr Nectarios Perdios
Acute cor pulmonale

09-Mar-2022 Dr Nectarios Perdios
Acute respiratory failure

17-Apr-2019 Dr Balakrishnan Pillai
Oedema

11-Mar-2019 Dr Calum Paton
Vitamin B12 deficiency

05-July-2017 Mrs Olive Neave
Asthma-chronic obstructive pulmonary disease overlap syndrome

10-July-2015 Dr Calum Paton
Breathlessness

29-Dec-2014 Dr Ruth Stevenson
Spasm of muscle

04-Nov-2014 Miss Amy Quinn
Total nail avulsion

31-July-2014 Dr Ruth Stevenson
Spasms - symptom

08-Mar-2013 Dr Ruth Stevenson
Symptoms of depression

13-Nov-2008 Dr B Hollins
Cervicalgia - pain in neck

10-Nov-2008 Dr Margaretha Badenhorst
Cold coagulation of lesion of cervix

13-July-2004 Dr Staff Unknown Member of Staff
Notes summary on computer

24-Dec-1998 Dr Staff Unknown Member of Staff
Premature membrane rupture NOS

25-Sept-1995 Dr Staff Unknown Member of Staff
Ovarian cysts

14-Apr-1993 Dr Staff Unknown Member of Staff
GP/HPC-health promotion clinic

08-Apr-1989 Dr Staff Unknown Member of Staff
Forceps delivery

13-May-1975 Dr Staff Unknown Member of Staff
Tonsillectomy

Significant Past

This section is empty.

Minor Past

This section is empty.

Consultations

08-July-2026 Ms Alison Coyle Administration

17-Jun-2026 Dr Federated User Clinic

Intervention (P3) Injection given Planned review at injection clinic for 3 monthly B12 injection. last had 3/3/26, Prescription, name and DOB checked, Hydroxocobalamin 1mg/1ml given into right deltoid via IM injection BN H03046 EXP 6/27. Patient aware to contact service to schedule next review in 3 months

Administration Attended extended hours clinic - ESA Dundee - Care and Treatment Service: Seen by Clinician: MURRAY, Elizabeth at 14:08:56 on 17-Jun-2026

05-Jun-2026 Dr David Alexander Surgery consultation

04-Jun-2026 Miss Jill Rowan Administration

Administration Administration special request for gabapentin 400mg (P3) sertraline 100mg tramadol 200mg mr Dr Alexander

03-Jun-2026 Dr Federated User Clinic

Administration Did not attend Pt DNA for B12 injection today and does not appear to be in hospital. (P3)

Administration Attended extended hours clinic - ESA Dundee - Care and Treatment Service: Seen by Clinician: RILEY, Lucy (Ms) at 11:50:51 on 03-Jun-2026

20-May-2026 Mrs Aimee Mclean Clinic

08-May-2026 Dr Rory Price Administration

08-May-2026 Mrs Clare Dow Surgery consultation

14-Apr-2026 Diagnosis (P1) Myelopathy NOS cervical ?

04-May-2026 Dr Deepa Sanu Results recording

27-Apr-2026 Examination Cervical smear - human papillomavirus negative

27-Apr-2026 Mrs Lesley Torano Surgery consultation

Symptom Diet good Picky eater appetite improving

Symptom Exercise status screening As able limited due to slipped discs

Examination O/E - blood pressure reading 118 / 71 mm Hg

Examination Ca cervix screen-no result yet

Examination Cigarette smoker 5 / / cigarettes / cigars / tobacco units per week

Examination Non drinker alcohol

23-Apr-2026 Dr Deepa Sanu Results recording

21-Apr-2026	Examination	Serum creatinine Creatinine (Enzymatic) -	70 umol/L	
21-Apr-2026	Examination	Serum potassium Potassium -	4.3 mmol/L	
21-Apr-2026	Examination	Serum sodium Sodium -	140 mmol/L	
21-Apr-2026	Examination	Biochemical test CREATININE AND ELECTROLYTES		
21-Apr-2026	Examination	eGFR using creatinine (CKD-EPI) per 1.73 square metres eGFR result (EPI) - - Provided acute kidney injury has been excluded -this eGFR is consistent with CKD stage G2 - mildreduction in eGFR compared to young adult	83 mL/min/1.73m*2	
21-Apr-2026	Examination	Serum creatinine Creatinine (Enzymatic) -:	70 umol/L	(Range: 44 - 80)
21-Apr-2026	Examination	Serum potassium Potassium -:	4.3 mmol/L	(Range: 3.5 - 5.3)
21-Apr-2026	Examination	Serum sodium Sodium -:	140 mmol/L	(Range: 133 - 146)
21-Apr-2026	Examination	Biochemical test CREATININE AND ELECTROLYTES:		
21-Apr-2026	Examination	Biochemical test CREATININE AND ELECTROLYTES		(No range available)
21-Apr-2026	Examination	eGFR using creatinine (CKD-EPI) per 1.73 square metres eGFR result (EPI) - - Provided acute kidney injury has been excluded -this eGFR is consistent with CKD stage G2 - mildreduction in eGFR compared to young adult:	83 mL/min/1.73m*2	(No range available)

21-Apr-2026 Mrs June Curran-Mcdonald Clinic

21-Apr-2026 Mrs Karen Stoves Administration

Administration Patient encounter admin. data suture removal from head wound, 5 sutures removed all healed well no concerns
(P3)

17-Apr-2026 Ms Alison Coyle Administration

14-Apr-2026 Intervention Self-referral to accident and emergency department
(P3) ATTENDED A & E NW -- ADMITTED

17-Apr-2026 Mrs June Curran-Mcdonald Clinic

Symptom Telephone in house Called patient booked in for blood test and stich removal
(P3)

16-Apr-2026 Miss Holly Walton-Jones Administration

14-Apr-2026 Symptom Falls recurrent falls
(P1)

14-Apr-2026 Symptom Suspected condition ?cervical myelopathy
(P3)

16-Apr-2026 Ms Leanne Moir Medicine Management

Intervention Post hospital dischrge med reconciliation with medical notes AMU NW 15/4/26Recurrent falls?cervical myelopathy- Sando K 2 tabs tds 3/7 supplied-No changes to regular meds.
(P3)

16-Apr-2026 Dr Deepa Sanu Surgery consultation

14-Apr-2026 Miss Jill Rowan Administration

12-Mar-2026 Miss Holly Walton-Jones Administration

12-Mar-2026 Dr Nectarios Perdios Surgery consultation

Administration Administration sp request for gabapentin 400mg and sertraline declined. pt to make gp appt
(P3)

11-Mar-2026 Miss Holly Walton-Jones Administration

03-Mar-2026 Dr Federated User Surgery consultation

Intervention Injection Attended WCC for 3 monthly vitamin b12 injection. Hydroxocobalamin 1mg/1ml.LOT - F11208Expires - 04/2026Given into L deltoid Next due - 03/03/2026. Patient aware to make own appt
(P3)
Administration Attended extended hours clinic - ESA Dundee - Care and Treatment Service: Seen by Clinician: KELLY, Ellen at 13:26:37 on 03-Mar-2026

12-Feb-2026 Mrs June Curran-Mcdonald Clinic

Administration SMS text message sent to patient Good afternoonUnfortunately you have not completed your full Asthma review please make sure this is completed at next review as this can impact on future prescriptions.HCA June Curran-McDonald
(P9)

10-Feb-2026 Dr David Alexander Surgery consultation

10-Feb-2026 Dr Auto Medlink eConsultation

Intervention (P3) Number of asthma exacerbations in past year
 Intervention (P3) Spacer device in use
 Intervention (P3) Declined to perform inhaler technique
 Examination (P3) Demonstration of inhaler technique
 Symptom (P3) Passive smoker
 Diagnosis (P3) Asthma control test score
 Management Scanned Document
Other Attachment : MedLink Summary - Asthma - 1978848-1
 Management Scanned Document
Other Attachment : Patient message: Asthma Attack Recovery Plan
 Intervention (P3) Smoking cessation advice
 Diagnosis (P3) Never used electronic cigarette
 Diagnosis (P3) Asthma self-management plan review
 Administration (P3) Consent given for communication by email
 audramartin49@gmail.com
 Administration (P3) Opportunistic verification of patient email address
 audramartin49@gmail.com
 Administration (P3) Encounter by computer link Medlink: Seen by Clinician:
 medlink.3rd at 06:00:00 on 10-Feb-2026
 Examination (P3) Alcoholic beverage intake 0 units per week

09-Feb-2026 Miss Jill Rowan Administration**13-Jan-2026 Miss Jill Rowan Administration**

Administration (P9) SMS text message sent to patient Please arrange an appointment to discuss sertraline.No prescription has been issued.

12-Jan-2026 Dr Deepa Sanu Surgery consultation

Administration (P3) Administration declined sertraline, tma to discuss

12-Jan-2026 Mrs Lesley Torano Surgery consultation

Administration (P9) SMS text message sent to patient To complete your asthma review can you give us a height, weight and Peak flow reading. Thanks Lesley

09-Jan-2026 Miss Holly Walton-Jones Administration**05-Jan-2026 Mrs Lesley Torano Surgery consultation****11-Dec-2025 Dr Auto Medlink eConsultation**

Administration (P3) Quality and Outcomes Framework asthma quality indicator-related care invitation (procedure)
 Administration (P3) Encounter by computer link Medlink: Seen by Clinician:
 medlink.3rd at 15:13:00 on 11-Dec-2025

09-Dec-2025 Dr Deepa Sanu Surgery consultation

Administration (P3) Administration request for gabapentin and sertraline again, declined as needs tma for review

08-Dec-2025 Miss Jill Rowan Administration**01-Dec-2025 Dr Auto Medlink eConsultation**

Administration (P3) Quality and Outcomes Framework asthma quality indicator-related care invitation (procedure)
 Administration (P3) Encounter by computer link Medlink: Seen by Clinician:
 medlink.3rd at 09:20:00 on 01-Dec-2025

26-Nov-2025 Dr Federated User Clinic

Intervention (P3) Injection given Attended injection clinic for 3 monthly B12. DOB and prescription checked. Verbal Consent gained. 1mg/1ml Hydroxocobalamin administered in right deltoid with no issues. BN H03042 exp 5/27. Next due 26/2/26. Patient aware to make appointment nearer the time.

Administration Attended extended hours clinic - ESA Dundee - Care and Treatment Service: Seen by Clinician: MURRAY, Elizabeth at 11:37:18 on 26-Nov-2025

06-Nov-2025 Miss Jill Rowan Administration**09-Oct-2025 Dr Nectarios Perdios Surgery consultation**

Administration (P3) Administration decline 400mg gabapentin and sertraline request. tramadol issued. asked to make review

08-Oct-2025 Ms Janice Birse Administration**17-Sept-2025 Dr Deepa Sanu Surgery consultation**

Administration (P3) Administration declined sertraline, noted issued 1/7, compliance ? regimn , also noted plan was to reduce gabapentin further , tma for review

16-Sept-2025 Miss Jill Rowan Administration**04-Aug-2025 Dr Nectarios Perdios Results recording**

01-Aug-2025 Examination	BCSP faecal occult blood test normal	No action required	
01-Aug-2025 Examination	BCSP faecal occult blood test normal	No action required: Negative	
	BCSP faecal occult blood test normal	No action required	(No range available)

31-July-2025 Miss Holly Walton-Jones Administration**16-July-2025 Dr Federated User Clinic**

Intervention (P3) Injection given Attended WCC for 3 monthly B12. DOB and prescription checked. Verbal Consent gained. 1mg/1ml Hydroxocobalamin Lot F09475 Exp11/25 administered in Left deltoid with no issues. Next due 16/10. Patient aware to make appointment nearer the time.

Administration Attended extended hours clinic - ESA Dundee - Care and Treatment Service: Seen by Clinician: WRIGHT, Morag at 12:08:57 on 16-Jul-2025

01-July-2025 Dr Nectarios Perdios Surgery consultation

Administration (P9) SMS text message sent to patient From Tay ***** Surgery. Regarding your recent medication request SERTRALINE 100MG , we require a medication review to ensure that these medications are still suitable for your condition(s). A short course of this medication has been issued but will no further scripts will be issued until a review has been completed. To complete a review, please click on the following link. TayCourt.yourGP.co/Medication

01-July-2025 Dr Nectarios Perdios Surgery consultation

Intervention Medication Requested decline gabapentin.

30-Jun-2025 Miss Jill Rowan Administration**29-May-2025 Dr Deepa Sanu Surgery consultation****29-May-2025 Dr Deepa Sanu Surgery consultation**

Intervention Medication Requested

28-May-2025 Miss Jill Rowan Administration**23-Apr-2025 Miss Jill Rowan Administration**

04-Apr-2025 Dr Nectarios Perdios Results recording

20-Mar-2025 Diagnosis (P3) Breast neoplasm screen normal Routine Recall

26-Mar-2025 Dr Federated User Community Clinic

Diagnosis (P3) Seen by health professional Dundee - Care and Treatment Service: Seen by Clinician: [unknown title] Yvonne Nelson at 11:05:12 on 26-Mar-2025.

Intervention (P3) Intramuscular injection of vitamin B12 Hydroxocobalamin injection 1mg/1ml administered into right deltoid with no issues. FO9475 Exp - 11/25. Last given 27/12/24. Patient aware to self appoint within next 3 months.

21-Mar-2025 Dr Nectarios Perdios Surgery consultation**21-Mar-2025 Dr Nectarios Perdios Surgery consultation**

Intervention Medication Requested

19-Mar-2025 Miss Jill Rowan Administration**18-Feb-2025 Dr Nectarios Perdios Surgery consultation****17-Feb-2025 Miss Jill Rowan Administration****28-Jan-2025 Mrs Lesley Torano Surgery consultation**

Intervention Patient advised re diet Poor appetite poor diet drinks plenty fluids

Symptom Exercise grading minimal activity

Management Asthma annual review Symptoms stable not been using Kelhale happy to stay off this and review in 1 year sooner if any problems

Symptom (P3) Cough Recent urti

Symptom (P3) Sputum - symptom clear approx 1 tsp

Symptom (P3) Nocturnal cough / wheeze Slightly at night at the moment

Symptom (P3) MRC Breathlessness Scale: grade 2

Symptom (P3) No oedema present

Diagnosis (P3) Number of COPD exacerbations in past year 2 x exacerbations

Examination Cigarette smoker 6 // cigarettes / cigars / tobacco

21-Jan-2025 Mrs Lesley Torano Surgery consultation

Administration Telephone encounter F2F appt 28/01/25 12.15pm (P3)

21-Jan-2025 Mr Russell Hale Administration**14-Jan-2025 Mrs Lesley Torano Surgery consultation****14-Jan-2025 Dr David Alexander Surgery consultation**

Intervention Medication Requested Gabapentin dose reduced after discussion with NP in July. If she wishes dose to be increased again then needs to make appt with a GP

13-Jan-2025 Miss Jill Rowan Administration**27-Dec-2024 Dr Federated User Surgery consultation**

Intervention (P3) Injection given Hydroxocobalamin injection 1mg/1ml administered into right deltoid with no issues. FO5633 Exp - 04/25. Last given 27/09/24. Patient aware to self appoint within next 3 months.

Administration Attended extended hours clinic - ESA Dundee - Care and Treatment Service: Seen by Clinician: THORESEN, Susan at 13:33:53 on 27-Dec-2024

10-Dec-2024 Dr Rory Price Administration

09-Dec-2024 Miss Holly Walton-Jones Administration

08-Nov-2024 Dr Nectarios Perdios Surgery consultation

Intervention Medication Requested decline 400mg dose. no further specials to be put through for this please and can refuse at time of request

07-Nov-2024 Miss Jill Rowan Administration

10-Oct-2024 Dr David Alexander Surgery consultation

10-Oct-2024 Miss Jill Rowan Administration

10-Oct-2024 Dr David Alexander Surgery consultation

Intervention Medication Requested issued Furosemide. Gabapentin dose reduced in July. If wishing to increase again should discuss with GP

27-Sept-2024 Dr Federated User Surgery consultation

Intervention (P3) Injection given Visit to WCC Hillbank for B12 injection. Receives 3 monthly. Patient appears well today. Appears to have last had on 25.06.24. Hydroxocobalamin 1mg/ml injection given to left deltoid with no issues. EXP- 04/2025, LOT F05633. Patient aware to contact DCTACS to make appointment for next injection, due 27.12.24

Administration Attended extended hours clinic - ESA Dundee - Care and Treatment Service: Seen by Clinician: DICKSON, Gillian at 13:49:39 on 27-Sep-2024

06-Sept-2024 Dr Nectarios Perdios Surgery consultation

06-Sept-2024 Dr Nectarios Perdios Surgery consultation

Intervention Medication Requested decline 400mg gabapentin as per previous consult. tramadol and sertraline issued

05-Sept-2024 Miss Jill Rowan Administration

14-Aug-2024 Mr Russell Hale Administration

05-Aug-2024 Miss Nabaa Bakir Medicine Management

02-Aug-2024 Miss Holly Walton-Jones Administration

11-July-2024 Dr Nectarios Perdios Surgery consultation

Administration (P3) Consultation review after MRI - gabapentin had been increased to 1g TDS for pain. patient has found more sleepy/sonolent. has been maybe taking more. MRI has shown nil acute and no nerve compression or surgical target. cont with physio. suffers chronic pain discussed and agreed titrate gabapentin back down to 3 tabs tds and then review if can drop further.

Symptom (P3) Chronic pain

25-Jun-2024 Dr Federated User Clinic

Intervention (P3) Injection given Attended WCC for 3 monthly vitamin b12 injection. Hydroxocobalamin 1mg/1ml.LOT - F09475Expires - 11/2025Given into L deltoidNext due 25/09/24 - Patient aware to make own appt

Administration Attended extended hours clinic - ESA Dundee - Care and Treatment Service: Seen by Clinician: KELLY, Ellen at 15:31:28 on 25-Jun-2024

25-Jun-2024 Mrs Patricia Buckingham Administration

Administration (P9) SMS text message sent to patient Pls visit or call the surgery and make a ROUTINE phone appt with Dr Gaj to discuss your MRI scan results. Pls note, there are only on-the-day appts available at present and the surgery opens at 8am every weekday. Tay ***** Surgery (01382 228228)

05-Jun-2024 Dr Tharmagajan Tharmachandirar Surgery consultation

05-Jun-2024 Dr Tharmagajan Tharmachandirar Surgery consultation

Intervention Tasks V3 Write back done

04-Jun-2024 Miss Jill Rowan Administration

10-May-2024 Ms Janice Birse Administration

10-May-2024 Dr Tharmagajan Tharmachandirar Surgery consultation

Administration Administration clarified with pharmacy team that 400mg (P3) capsule is in addition to and not instead of the 300mg existing one

09-May-2024 Mr Russell Hale Administration

Administration Third party encounter Query from Boots - 146 Sm Rd. Pt (P3) has been given script for Gabapentin 400mg in addition to scripts for Gabapentin 300mg. Pharmacist is querying dose to confirm if this is an addition, or a replacement. Query passed to Dr Gaj who issued script for 400mg.

09-May-2024 Miss Holly Walton-Jones Administration

08-May-2024 Miss Jill Rowan Administration

03-May-2024 Miss Jill Rowan Administration

30-Apr-2024 Dr Tharmagajan Tharmachandirar Surgery consultation

29-Apr-2024 Dr Tharmagajan Tharmachandirar Surgery consultation

Administration Consultation known slipped disc with some nerve root (P3) impingement in 2007 after carehome accident she was working innot had surgery but been in pain since then and physio helped for some time but then made things worsehas pain in neck and lower back painfinds gets weak very easily and not copingno red flags of cord compression but slowly getting worse over last few years as falls more frequently nowsome tingling down legs at timesnot keen to see physio despite advisingf thisadvised to also have mri and may need referral to neurosurgery once donehappy and clear on planno further questionswill seek r/v if any new or worsening SX

29-Mar-2024 Dr Deepa Sanu Surgery consultation

29-Mar-2024 Dr Deepa Sanu Surgery consultation

Intervention Tasks V3 Write back tma for review of tramadol

28-Mar-2024 Miss Jill Rowan Administration

26-Mar-2024 Dr Federated User Clinic

Intervention Injection given DCTACS WCC HillbankPatient attending (P3) for 3 monthly Vitamin B12 injectionConfirmed it has been 3 months since last injectionMedication label checkedWith consent 1mg/1ml Hydroxocobalamin injection administered IM into R deltoidLOT 09475 EXP 11/2025 Next due 25.6.24

Administration Attended extended hours clinic - ESA Dundee - Care and Treatment Service: Seen by Clinician: ***** (Miss) at 15:55:39 on 26-Mar-2024

25-Mar-2024 Dr Federated User Surgery consultation

Intervention Injection given *****INJECTION NOT GIVEN***** (P3) Patient attended WCC Wallacetown for b12 injection. Forgot to bring vial to clinic so unable to administer. Rebooked for Tuesday 26.03.24

Administration Attended extended hours clinic - ESA Dundee - Care and Treatment Service: Seen by Clinician: DICKSON, Gillian at 13:28:11 on 25-Mar-2024

04-Mar-2024 Dr Lajeen Rashid Surgery consultation

04-Mar-2024 Dr Lajeen Rashid Surgery consultation

Intervention Tasks V3 Write back script was issued

01-Mar-2024 Miss Jill Rowan Administration

01-Mar-2024 Dr Lajeen Rashid Surgery consultation

Administration Consultation 1- FU from 5/12/2023 gabapentin dose was reduced in Dec currently taking 2 tab of gabapentin 300 mg am and 3 tab afternoon and night time / total no of tab is 8 daily she reported flare up of back and numbness in toes and fingers since dose reduction known central disc bulge L4/5 and also had previous input fro neuro for C5/6 disc bulge when she agreed on conservative treatment as she told me that she is not a candidate for surgical option She is against any further dose reduction and is keen to continue on current dose of 8 tab daily2- has been wheezy in the last few d / ***** house is full of mauled ? trigger known COPD /needing salbutamol inhaler mor frequently productive cough in the last few d / clear sputum previous admission with Respiratory failure Type 2 / pulmonary oedema o/E : looks well speaks in full sentences , no wheeze Temp 36.2, SPO2 97%, PR 85 chest : good AR , ? fine crackles R base no wheeze no pitting oedema /raised JVP agreed treatment for IE COPD and rv again if any worsening symptoms

30-Jan-2024 Mr Russell Hale Administration

29-Jan-2024 Miss Holly Walton-Jones Administration

23-Jan-2024 Mr Russell Hale Administration

22-Dec-2023 Miss Jill Rowan Administration

13-Dec-2023 Dr Federated User Surgery consultation

Diagnosis (P3) B12 injections - at surgery Hydroxocobalamin injection 1mg/1ml administered into left deltoid with no issues.Lot - FO9467Exp -04/25.Last given 20/09/23.Patient aware to self appoint within next 3 months.

Administration Attended extended hours clinic - ESA Dundee - Care and Treatment Service: Seen by Clinician: THORESEN, Susan at 13:43:42 on 13-Dec-2023

07-Dec-2023 Mrs Olive Neave Surgery consultation

Intervention	Patient advised re diet poor appetite - advised re small frequent meals		
Symptom	Exercise grading		
Examination	Inhaler technique observed Good		
Examination	Peak exp. flow rate: PEFR/PFR Previous Best Ever = 400 L/min		
	440.0, Predicted = .		
Symptom (P3)	No cough		
Symptom (P3)	Sputum - symptom occasional - clear		
Symptom (P3)	Wheeze absent		
Symptom (P3)	MRC Breathlessness Scale: grade 2		
Symptom (P3)	Ankle swelling L - unchanged		
Intervention (P3)	Drug compliance poor		
Diagnosis (P3)	COPD self-management plan given		
Diagnosis (P3)	Chronic obstructive pulmonary disease annual review		
	Has been labelled COPD during acute admission Jan 2022 with Pulmonary Oedema/Cor Pulmonale. Audra states she really has very little in the way of respiratory symptoms. She has had no exacerbations and her O2sats are 98% Takes Kelhale once a day and Salbutamol a few times a week.		
Examination	Cigarette smoker	5 / / cigarettes / cigars / tobacco	
Examination	Oxygen saturation at periphery	98 %	
Intervention	Smoking cessation advice		
Examination	O/E - weight	55 Kg	
Examination	Body Mass Index	21.4	
Examination	Peak exp. flow rate: PEFR/PFR Previous Best Ever = 440.0, Predicted = .:		
	Peak exp. flow rate: PEFR/PFR Previous Best Ever = 400 L/min		(No range available)
	440.0, Predicted = .		
Examination	Oxygen saturation at periphery:		
	Oxygen saturation at periphery	98 %	(No range available)

05-Dec-2023 Dr Nectarios Perdios Surgery consultation

Administration (P3)	Consultation review gabapentin. pt has noticed some daytime somnolence last few months. no postural sx discussed and agreed to reduce gabapentin by 1 tablet every 4 weeks until down to 2 tabs tds then review. add in ralvo patch. can use pcm prn as well
Administration	Medication review

29-Nov-2023 Dr Deepa Sanu Surgery consultation**29-Nov-2023 Dr Deepa Sanu Surgery consultation**

Intervention	Tasks V3 Write back
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28-Nov-2023 Miss Holly Walton-Jones Administration**16-Nov-2023 Mrs Olive Neave Administration**

Diagnosis	Asthma control test
Administration (P3)	Administration Although ACt suggest good Asthma control inhaler usage suggests she is either not using preventer or minimal use of preventer. SMS sent asking her to make a review appointment.
Administration (P9)	SMS text message sent to patient Your online Asthma review suggest we could improve on Asthma control. Please make an appointment with myself to discuss. Kind Regards, Olive Neave

09-Nov-2023 Mr Russell Hale Administration**09-Nov-2023 Mr Russell Hale Administration****02-Nov-2023 Mrs Patricia Buckingham Administration**

26-Oct-2023 (P3)	Intervention Self-referral to accident and emergency department Attended A&E NW. Shoulder pain. Discharged with no follow up
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27-Oct-2023 Miss Jill Rowan Administration

26-Oct-2023 Dr Calum Paton Surgery consultation

Administration Telephone encounter complaining of pain in scapula
(P3) since falling out of bed 2 days ago - still sore and daughter reports scapula is sticking out - advised in view of trauma to attend a&e for further assessment

02-Oct-2023 Dr Tharmagajan Tharmachandirar Surgery consultation**29-Sept-2023 Miss Holly Walton-Jones Administration****20-Sept-2023 Dr Federated User Clinic**

Intervention Injection given Pt attended Hillbank wcc for vit b 12
(P3) injection. Last given 16/6/23, prescription checked, name & dob checked. Hydroxocobalamin 1mg/1ml administered into rt deltoid with no issues. BN F)5619, exp 02/25. Next due 13/12/23, pt aware to make own appt nearer time

Administration Attended extended hours clinic - ESA Dundee - Care and Treatment Service: Seen by Clinician: BLUES, ***** at 14:11:21 on 20-Sep-2023

31-Aug-2023 Miss Jill Rowan Administration**17-Aug-2023 Mrs Olive Neave Administration**

16-Aug-2023 Examination Asthma daytime symptoms once or twice a week
16-Aug-2023 Examination Asthma disturbing sleep 2 to 3 nights/week
16-Aug-2023 Examination Asthma not limiting activities sometimes

16-Aug-2023 Mrs Olive Neave Administration

Intervention Asthma management plan given completed and admin to email to patient.

Management Asthma annual review via medlink which suggests control is poor. I have telephoned Audra and encouraged her to resume Kelhale bd. If not gaining control advised to make face to face appointment to see me.

11-Aug-2023 Mr Russell Hale Administration

Administration SMS text message sent to patient From Tay *****
(P9) Surgery. Dear Miss Martin, Your asthma review is due. Please tap on TayCourt.yourGP.co/Asthma to complete a brief online review. Your answers will be reviewed by one of our clinicians and we will be in touch based on your responses should there be a need for further review. Kind regards {Patient Group Asthma Patients Due - For Sms}

11-Aug-2023 Mr Russell Hale Administration

Administration Asthma monitoring invit SMS (short message service) txt
(P9) message 0: via SMS (with MedLink link)

11-Aug-2023 Mr Russell Hale Administration**26-July-2023 Miss Holly Walton-Jones Administration****26-July-2023 Miss Holly Walton-Jones Administration****21-July-2023 Dr Nectarios Perdios Results recording**

19-July-2023 Examination BCSP faecal occult blood test normal No action required
19-July-2023 Examination **BCSP faecal occult blood test normal** No action required: **Negative**
BCSP faecal occult blood test normal No action required (No range available)

27-Jun-2023 Dr Lajeen Rashid Surgery consultation**26-Jun-2023 Miss Jill Rowan Administration****26-Jun-2023 Ms Janice Birse Administration****22-Jun-2023 Mr Russell Hale Administration****20-Jun-2023 Mrs Clare Dow Surgery consultation**

16-Jun-2023 Dr Nectarios Perdios Surgery consultation

Symptom
(P1) Chronic pain

16-Jun-2023 Dr Federated User Surgery consultation

Intervention (P3) Injection given WCC Hillbank for 3 monthly B12 injection. last had 17/02/23 Brought own prescription. Name DOB and prescription checked Verbal consent given , Hydroxocobalamin 1mg/ml injection given to left deltoid EXP- 07/2023 BN- E06341 All well on departure Patient aware to contact CCTS to make appointment for next injection around 8/9/23 and advised new prescription will be required prior to next appointment

Administration Attended extended hours clinic - ESA Dundee - Care and Treatment Service: Seen by Clinician: *****, ***** (Mrs) at 13:34:51 on 16-Jun-2023

16-Jun-2023 Dr Deepa Sanu Results recording

15-Jun-2023	Examination	Eosinophil count x10 ⁹ /L	0.24 10 ⁹ /L	
15-Jun-2023	Examination	Haemoglobin estimation	135 g/L	
15-Jun-2023	Examination	Mean corpusc. haemoglobin(MCH)	29.7 pg	
15-Jun-2023	Examination	Mean corpusc. Hb. conc. (MCHC)	327 g/L	
15-Jun-2023	Examination	Mean corpuscular volume (MCV) fl	90.8 fL	
15-Jun-2023	Examination	Monocyte count x10 ⁹ /L	0.6 10 ⁹ /L	
15-Jun-2023	Examination	Neutrophil count x10 ⁹ /L	4.3 10 ⁹ /L	
15-Jun-2023	Examination	Platelet count x10 ⁹ /L	262 10 ⁹ /L	
15-Jun-2023	Examination	Red blood cell (RBC) count x10 ¹² /L	4.56 10 ¹² /L	
15-Jun-2023	Examination	Total white cell count x10 ⁹ /L	9.4 10 ⁹ /L	
15-Jun-2023	Examination	Lymphocyte count x10 ⁹ /L	4.2 10 ⁹ /L	
15-Jun-2023	Examination	Full blood count - FBC <none>		
15-Jun-2023	Examination	Haematocrit	0.414 ratio	
15-Jun-2023	Examination	Basophil count x10 ⁹ /L	0.1 10 ⁹ /L	
15-Jun-2023	Examination	Eosinophil count x10 ⁹ /L:		
		Eosinophil count x10 ⁹ /L	0.24 10 ⁹ /L	(No range available)
15-Jun-2023	Examination	Haemoglobin estimation:		
		Haemoglobin estimation	135 g/L	(Range: 120 - 160)
15-Jun-2023	Examination	Mean corpusc. haemoglobin(MCH):		
		Mean corpusc. haemoglobin(MCH)	29.7 pg	(Range: 27 - 32)
15-Jun-2023	Examination	Mean corpusc. Hb. conc. (MCHC):		
		Mean corpusc. Hb. conc. (MCHC)	327 g/L	(Range: 320 - 360)
15-Jun-2023	Examination	Mean corpuscular volume (MCV)fl:		
		Mean corpuscular volume (MCV) fl	90.8 fL	(Range: 85 - 105)
15-Jun-2023	Examination	Monocyte count x10 ⁹ /L:		
		Monocyte count x10 ⁹ /L	0.6 10 ⁹ /L	(Range: 0.2 - 0.8)
15-Jun-2023	Examination	Neutrophil count x10 ⁹ /L:		
		Neutrophil count x10 ⁹ /L	4.3 10 ⁹ /L	(Range: 2 - 7.5)
15-Jun-2023	Examination	Platelet count x10 ⁹ /L:		
		Platelet count x10 ⁹ /L	262 10 ⁹ /L	(Range: 150 - 400)
15-Jun-2023	Examination	Red blood cell (RBC) count x10 ¹² /L:		
		Red blood cell (RBC) count x10 ¹² /L	4.56 10 ¹² /L	(Range: 3.8 - 4.8)
15-Jun-2023	Examination	Total white cell count x10 ⁹ /L:		
		Total white cell count x10 ⁹ /L	9.4 10 ⁹ /L	(Range: 4 - 11)
15-Jun-2023	Examination	Lymphocyte count x10 ⁹ /L: Above high reference limit		
		Lymphocyte count x10 ⁹ /L	4.2 10 ⁹ /L	(Range: 1.5 - 4)
15-Jun-2023	Examination	Full blood count - FBC <none>:		
		Full blood count - FBC <none>		(No range available)
15-Jun-2023	Examination	Haematocrit:		
		Haematocrit	0.414 ratio	(Range: 0.37 - 0.47)
15-Jun-2023	Examination	Basophil count x10 ⁹ /L:		
		Basophil count x10 ⁹ /L	0.1 10 ⁹ /L	(No range available)

16-Jun-2023 Dr Deepa Sanu Results recording

15-Jun-2023	Examination	Serum albumin	37 g/L	
15-Jun-2023	Examination	Serum alkaline phosphatase U/L	139 U/L	
15-Jun-2023	Examination	Serum alanine aminotransferase level	Serum ALT level - 21 U/L	
15-Jun-2023	Examination	Serum total bilirubin level	5 umol/L	
15-Jun-2023	Examination	Serum creatinine	54 umol/L	
15-Jun-2023	Examination	Serum potassium	3.8 mmol/L	
15-Jun-2023	Examination	Serum sodium	137 mmol/L	
15-Jun-2023	Examination	Liver function test	<none>	
15-Jun-2023	Examination	Biochemical test	<none>	
15-Jun-2023	Examination	Acute kidney injury warning stage	AKI warning stage - NOT AVAILABLE	
15-Jun-2023	Examination	GFR calculated abbreviated MDRD	GFR calculated 60 mL/min	
		abbreviatd MDRD - - eGFR should not be used to assess renal functionfor any drug dosing in over 75s or extremes of BMland for DOAC dosing in those with an eGFR lessthan 60ml/min.		
15-Jun-2023	Examination	GFR calculated abbreviated MDRD adj for African Americ origin	GFR calctd abbtD MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA	
15-Jun-2023	Examination	Serum albumin:		
		Serum albumin	37 g/L	(Range: 35 - 50)
15-Jun-2023	Examination	Serum alkaline phosphataseU/L: Above high reference limit		
		Serum alkaline phosphatase U/L	139 U/L	(Range: 30 - 130)
15-Jun-2023	Examination	Serum alanine aminotransferase level	Serum ALT level - U/L:	
		Serum alanine aminotransferase level	Serum ALT level - 21 U/L	(Range: 5 - 55)
15-Jun-2023	Examination	Serum total bilirubin level:		
		Serum total bilirubin level	5 umol/L	(No range available)
15-Jun-2023	Examination	Serum creatinine:		
		Serum creatinine	54 umol/L	(Range: 44 - 80)
15-Jun-2023	Examination	Serum potassium:		
		Serum potassium	3.8 mmol/L	(Range: 3.5 - 5.3)
15-Jun-2023	Examination	Serum sodium:		
		Serum sodium	137 mmol/L	(Range: 133 - 146)
15-Jun-2023	Examination	Liver function test<none>:		
		Liver function test <none>		(No range available)
15-Jun-2023	Examination	Biochemical test<none>:		
		Biochemical test <none>		(No range available)
15-Jun-2023	Examination	Acute kidney injury warning stage	AKI warning stage - NOT AVAILABLE:	
		Acute kidney injury warning stage	AKI warning stage - NOT AVAILABLE	(No range available)
15-Jun-2023	Examination	GFR calculated abbreviated MDRD	GFR calculated abbreviatd MDRD - - eGFR should not be used to assess renal functionfor any drug dosing in over 75s or extremes of BMland for DOAC dosing in those with an eGFR lessthan 60ml/min.	
		GFR calculated abbreviated MDRD	GFR calculated 60 mL/min	(No range available)
		abbreviatd MDRD - - eGFR should not be used to assess renal functionfor any drug dosing in over 75s or extremes of BMland for DOAC dosing in those with an eGFR lessthan 60ml/min.		
15-Jun-2023	Examination	GFR calculated abbreviated MDRD adj for African Americ origin	GFR calctd abbtD MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA:	
		GFR calculated abbreviated MDRD adj for African Americ origin	GFR calctd abbtD MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA	(No range available)

15-Jun-2023 Dr Federated User Clinic

Examination	Pulse rate	86 bpm	
Examination	Blood pressure	133 / 78 mm Hg	
Administration	Attended extended hours clinic - ESA Dundee - Care and Treatment Service: Seen by Clinician: MILNE, Elaine at 14:01:44 on 15-Jun-2023		
Examination	Blood sample taken	blood sample taken as per ICE request	
Examination	Blood sample taken	blood sample taken as per ICE request:	
	Blood sample taken	blood sample taken as per ICE request	(No range available)

16-May-2023 Dr Nectarios Perdios Surgery consultation

15-May-2023 Miss Jill Rowan Administration

14-Apr-2023 Miss Jill Rowan Administration

17-Mar-2023 Dr Federated User Surgery consultation

Intervention (P3) Injection given WCC Hillbank for 3 monthly B12 injection. last had 20/12/22 Brought own prescription in box and name on it . Verbal consent given , Hydroxocobalamin 1mg/ml injection given to Right deltoid with no issues EXP- 07/2023 BN- E06341 Patient aware to contact CCTS to make appointment for next injection around 16/06/23

Administration Attended extended hours clinic - ESA Dundee - Care and Treatment Service: Seen by Clinician: NICOLL, ***** at 13:13:59 on 17-Mar-2023

14-Mar-2023 Dr Deepa Sanu Surgery consultation**13-Mar-2023 Mr Russell Hale Administration**

Intervention (P3) Drug not issued OS Sertraline not due, 56d issued 10/02.

15-Feb-2023 Dr Lajeen Rashid Surgery consultation

Administration (P3) Telephone encounter called as was advised that she needs medication rv 1- has been on sertraline for a while /currently on 100 mg od stable mood on current dose not ready to come off the medication or to try a lower dose rv in 1 y or earlier if any concern 2- has been on gabapentin treatment since 2007 as MRI C-spine scan showed C5/6 disc bulge and she preferred conservative treatment on tramadol 200 mg MR bd no SE/drowsiness and is tolerating medications well , pain can be bad /especially winter time and she didn't feel that reducing gabapentin dose is appropriate eGFR>60 will reauthorize further repeat/last script was issued 10/2 /no script was issued today

10-Feb-2023 Dr Nectarios Perdios Surgery consultation**09-Feb-2023 Miss Jill Rowan Administration****09-Jan-2023 Dr Miriam Tiong Medicine Management**

Intervention (P3) Medication requested last mood review 2013.

06-Jan-2023 Miss Jill Rowan Administration**20-Dec-2022 Dr Federated User Clinic**

Intervention (P3) Injection given Attended WCC for 3 monthly B12 injection. last had 16/8/22. Hydroxocobalamin 1mg/ml injection given to left deltoid with no issues EXP- 07/2023 BN- E06341 Patient aware to contact CCTS to make appointment for next injection

Administration Attended extended hours clinic - ESA Dundee - Care and Treatment Service: Seen by Clinician: ***** at 14:02:55 on 20-Dec-2022

16-Dec-2022 Miss Jill Rowan Administration**24-Nov-2022 Miss Jill Rowan Administration****16-Nov-2022 Dr Federated User Clinic**

Intervention (P3) Injection given Patient did not attend appointment at Hillbank for 3 monthly Hydroxocobalamin injection.

Administration Attended extended hours clinic - ESA Dundee - Care and Treatment Service: Seen by Clinician: SNEE, Jody at 15:40:28 on 16-Nov-2022

10-Nov-2022 Mrs Patricia Buckingham Administration**03-Nov-2022 Dr Calum Paton Surgery consultation****03-Nov-2022 Dr Nectarios Perdios Results recording**

25-Oct-2022 (P3) Diagnosis Breast neoplasm screen normal Return to routine recall

02-Nov-2022 Miss Jill Rowan Administration

20-Oct-2022 Mr Russell Hale Administration

Administration Total notes on computer All paper notes now back-scanned and stored in Docman.
(P5)

18-Oct-2022 Dr David Alexander Other

Administration Consultation Quite frustrated re situation with her pain relief, hadn't got her Tramadol as usual. Also states that her Gabapentin was mistakenly reduced whilst an IP in NW in Feb this year. // Suggested scope to gradually titrate Gabapentin up. Reasonable to increase it to 900mg TDS. She would consider weaning down Tramadol in the future.
(P3)

16-Oct-2022 Dr Tharmagajan Tharmachandirar Surgery consultation

Administration Administration put in for tramadol but has review appt to discuss this with Dr Alexander on 18/10. no Rx issued today
(P3)

14-Oct-2022 Ms Janice Birse Administration

13-Oct-2022 Mr Russell Hale Administration

11-Oct-2022 Ms Janice Birse Administration

04-Oct-2022 Dr Nectarios Perdios Results recording

29-Aug-2022 Diagnosis Breast neoplasm screen abnorm Review appointment
(P3) issued

23-Sept-2022 Miss Jill Rowan Administration

Administration Administration pharmacy called to say she has been abusive to staff in the shop therefore no longer welcome.there.advised they need to inform patient of this decision and we would remove well from her preferences.
(P3)

21-Sept-2022 Miss Jill Rowan Administration

21-Sept-2022 Dr Miriam Tiong Medicine Management

Intervention Medication requested hilltown chemist req for review to reissue furosemide 40 and tramadol 200mg MR on repeats if appropriate. no pain review for a long time. will prompt review
(P3)

16-Sept-2022 Miss Jill Rowan Administration

23-Aug-2022 Miss Jill Rowan Administration

16-Aug-2022 Dr Federated User Surgery consultation

Intervention Injection given Visit to WCC Hillbank for B12 injection. Receives 3 monthly. Patient appears well today and aware she is 1 month late for injection . Appears to have last had on 15/04/22 Hydroxocobalamin 1mg/ml injection given to right deltoid with no issues verbal consent EXP-11/2022 BN- 10310. Patient aware to contact CCTS to make appointment for next injection around 16/11/22
(P3)
Administration Attended extended hours clinic - ESA Dundee - Care and Treatment Service: Seen by Clinician: NICOLL, ***** at 10:14:41 on 16-Aug-2022

22-July-2022 Miss Jill Rowan Administration

14-July-2022 Mrs Olive Neave Administration

Symptom Suspected asthma
(P3)

21-Jun-2022 Miss Jill Rowan Administration

13-May-2022 Miss Jill Rowan Administration**15-Apr-2022 Miss Jill Rowan Administration****15-Apr-2022 Dr Federated User Surgery consultation**

Intervention (P3) Injection given Visit to WCC Hillbank for B12 injection. Receives 3 monthly. Patient appears well today. Appears to have last had on 20.01.22. Hydroxocobalamin 1mg/ml injection given to left deltoid with no issues. EXP- 11/2022 BN- 10310. Patient aware to contact CCTS to make appointment for next injection

Administration Attended extended hours clinic - ESA Dundee - Care and Treatment Service: Seen by Clinician: DICKSON, Gillian at 15:54:37 on 15-Apr-2022

23-Mar-2022 Ms Janice Birse Administration**17-Mar-2022 Miss Jill Rowan Administration****09-Mar-2022 Mr Russell Hale Administration**

30-Jan-2022 Diagnosis (P1) Acute cor pulmonale Respiratory - Ninewells

30-Jan-2022 Diagnosis (P1) Acute respiratory failure Compensated Type 2Respiratory - Ninewells

02-Mar-2022 Dr Lajeen Rashid Surgery consultation

Administration Consultation (P3) hx as per 1/3admitted to NWH with SOB this month has FU appointment at pulmonary vascular clinic was dx with core pulmonale and treated with diuretics but self discharged herself before deemed fit for discharge worsening bilateral leg swelling since hospital discharge no SOB/ no orthopnea recent bloods showed eGFR >60 and normal K mildly raised crp/denied any cough/ UTI symptoms also normochromic normocytic anaemia /denied any bowel symptoms but known pile and can have occasional PR bleeding known B12 deficiency and getting b12 inj O/E :looks well speaks in full sentencesTemp 36.8, SPO2 94%,PR 90, BP 115/86lung : generally clear,no wheez bilateral pitting oedema both legs with evidence of cellulitis bth legs IMP : peripheral oedema with no evidence of pulmonary oedema cellulitis which explains raised CRP agreed extra dose of furosemide 20 mg and repeat bloods in 1 wk and rv with results abx to treat cellulitis and rv in 1 wk or earlier if any concern advised to report any worsening symptoms/breathing difficulty very urgently

01-Mar-2022 Dr David Alexander Other

Administration Consultation (P3) Discharged from NW 4 weeks ago - had peripheral and pulmonary oedema secondary to Cor pulmonale. Significant diuresis achieved in hospital - Audra claims 5L. 3 days post DC peripheral oedema started to return. Currently at knees. No worsening SOB, but describing orthopnoea and intermittent cough with ? frothy sputum. No fevers. Was hypokalaemic prior to DC but repeat bloods show normal K. New normocytic anaemia and moderately raised CRP. // Agreed to f2f review. Likely to need diuretics increased

01-Mar-2022 Dr Nectarios Perdios Results recording

28-Feb-2022	Examination	Serum albumin	25 g/L	
28-Feb-2022	Examination	Serum alkaline phosphatase U/L	146 U/L	
28-Feb-2022	Examination	Serum alanine aminotransferase level U/L	Serum ALT level - 9 U/L	
28-Feb-2022	Examination	Serum total bilirubin level	20 umol/L	
28-Feb-2022	Examination	Serum creatinine	47 umol/L	
28-Feb-2022	Examination	Serum potassium	4 mmol/L	
28-Feb-2022	Examination	Serum sodium	135 mmol/L	
28-Feb-2022	Examination	Liver function test <none>		
28-Feb-2022	Examination	Plasma C reactive protein	48 mg/L	
28-Feb-2022	Examination	Biochemical test <none>		
28-Feb-2022	Examination	Acute kidney injury warning stage AKI warning stage - Not detected: May not exclude AKI in all cases		
28-Feb-2022	Examination	GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD - - eGFR should not be used to assess renal function for any drug dosing in over 75s or extremes of BMI and for DOAC dosing in those with an eGFR less than 60ml/min.	60 mL/min	
28-Feb-2022	Examination	GFR calculated abbreviated MDRD adj for African American origin GFR calcd abtd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA	mL/min	
28-Feb-2022	Examination	Serum albumin: Below low reference limit		
28-Feb-2022	Examination	Serum albumin	25 g/L	(Range: 35 - 50)
28-Feb-2022	Examination	Serum alkaline phosphatase U/L: Above high reference limit		
28-Feb-2022	Examination	Serum alkaline phosphatase U/L	146 U/L	(Range: 30 - 130)
28-Feb-2022	Examination	Serum alanine aminotransferase level U/L: Above high reference limit		
28-Feb-2022	Examination	Serum alanine aminotransferase level U/L	Serum ALT level - 9 U/L	(Range: 5 - 55)
28-Feb-2022	Examination	Serum total bilirubin level:		
28-Feb-2022	Examination	Serum total bilirubin level	20 umol/L	(No range available)
28-Feb-2022	Examination	Serum creatinine:		
28-Feb-2022	Examination	Serum creatinine	47 umol/L	(Range: 44 - 80)
28-Feb-2022	Examination	Serum potassium:		
28-Feb-2022	Examination	Serum potassium	4 mmol/L	(Range: 3.5 - 5.3)
28-Feb-2022	Examination	Serum sodium:		
28-Feb-2022	Examination	Serum sodium	135 mmol/L	(Range: 133 - 146)
28-Feb-2022	Examination	Liver function test <none>:		
28-Feb-2022	Examination	Liver function test <none>		(No range available)
28-Feb-2022	Examination	Plasma C reactive protein: Above high reference limit		
28-Feb-2022	Examination	Plasma C reactive protein	48 mg/L	(No range available)
28-Feb-2022	Examination	Biochemical test <none>:		
28-Feb-2022	Examination	Biochemical test <none>		(No range available)
28-Feb-2022	Examination	Acute kidney injury warning stage AKI warning stage - Not detected: May not exclude AKI in all cases:		
28-Feb-2022	Examination	Acute kidney injury warning stage AKI warning stage - Not detected: May not exclude AKI in all cases		(No range available)
28-Feb-2022	Examination	GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD - - eGFR should not be used to assess renal function for any drug dosing in over 75s or extremes of BMI and for DOAC dosing in those with an eGFR less than 60ml/min.:		
28-Feb-2022	Examination	GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD - - eGFR should not be used to assess renal function for any drug dosing in over 75s or extremes of BMI and for DOAC dosing in those with an eGFR less than 60ml/min.	60 mL/min	(No range available)
28-Feb-2022	Examination	GFR calculated abbreviated MDRD adj for African American origin GFR calcd abtd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA:		
28-Feb-2022	Examination	GFR calculated abbreviated MDRD adj for African American origin GFR calcd abtd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA	mL/min	(No range available)

01-Mar-2022 Dr Nectarios Perdios Results recording

28-Feb-2022	Examination	Eosinophil count x10 ⁹ /L	0.19 10 ⁹ /L	
28-Feb-2022	Examination	Haemoglobin estimation	107 g/L	
28-Feb-2022	Examination	Mean corpusc. haemoglobin(MCH)	28.5 pg	
28-Feb-2022	Examination	Mean corpusc. Hb. conc. (MCHC)	309 g/L	
28-Feb-2022	Examination	Mean corpuscular volume (MCV) fl	92.2 fL	
28-Feb-2022	Examination	Monocyte count x10 ⁹ /L	0.5 10 ⁹ /L	
28-Feb-2022	Examination	Neutrophil count x10 ⁹ /L	5.3 10 ⁹ /L	
28-Feb-2022	Examination	Platelet count x10 ⁹ /L	348 10 ⁹ /L	
28-Feb-2022	Examination	Red blood cell (RBC) count x10 ¹² /L	3.76 10 ¹² /L	
28-Feb-2022	Examination	Total white cell count x10 ⁹ /L	8.9 10 ⁹ /L	
28-Feb-2022	Examination	Lymphocyte count x10 ⁹ /L	2.9 10 ⁹ /L	
28-Feb-2022	Examination	Full blood count - FBC <none>		
28-Feb-2022	Examination	Haematocrit	0.347 ratio	
28-Feb-2022	Examination	Basophil count x10 ⁹ /L	0 10 ⁹ /L	
28-Feb-2022	Examination	Eosinophil count x10 ⁹ /L:		
		Eosinophil count x10 ⁹ /L	0.19 10 ⁹ /L	(No range available)
28-Feb-2022	Examination	Haemoglobin estimation: Below low reference limit		
		Haemoglobin estimation	107 g/L	(Range: 120 - 160)
28-Feb-2022	Examination	Mean corpusc. haemoglobin(MCH):		
		Mean corpusc. haemoglobin(MCH)	28.5 pg	(Range: 27 - 32)
28-Feb-2022	Examination	Mean corpusc. Hb. conc. (MCHC): Below low reference limit		
		Mean corpusc. Hb. conc. (MCHC)	309 g/L	(Range: 320 - 360)
28-Feb-2022	Examination	Mean corpuscular volume (MCV)fl:		
		Mean corpuscular volume (MCV) fl	92.2 fL	(Range: 85 - 105)
28-Feb-2022	Examination	Monocyte count x10 ⁹ /L:		
		Monocyte count x10 ⁹ /L	0.5 10 ⁹ /L	(Range: 0.2 - 0.8)
28-Feb-2022	Examination	Neutrophil count x10 ⁹ /L:		
		Neutrophil count x10 ⁹ /L	5.3 10 ⁹ /L	(Range: 2 - 7.5)
28-Feb-2022	Examination	Platelet count x10 ⁹ /L:		
		Platelet count x10 ⁹ /L	348 10 ⁹ /L	(Range: 150 - 400)
28-Feb-2022	Examination	Red blood cell (RBC) count x10 ¹² /L: Below low reference limit		
		Red blood cell (RBC) count x10 ¹² /L	3.76 10 ¹² /L	(Range: 3.8 - 4.8)
28-Feb-2022	Examination	Total white cell count x10 ⁹ /L:		
		Total white cell count x10 ⁹ /L	8.9 10 ⁹ /L	(Range: 4 - 11)
28-Feb-2022	Examination	Lymphocyte count x10 ⁹ /L:		
		Lymphocyte count x10 ⁹ /L	2.9 10 ⁹ /L	(Range: 1.5 - 4)
28-Feb-2022	Examination	Full blood count - FBC<none>:		
		Full blood count - FBC <none>		(No range available)
28-Feb-2022	Examination	Haematocrit: Below low reference limit		
		Haematocrit	0.347 ratio	(Range: 0.37 - 0.47)
28-Feb-2022	Examination	Basophil count x10 ⁹ /L:		
		Basophil count x10 ⁹ /L	0 10 ⁹ /L	(No range available)

28-Feb-2022 Dr Federated User Clinic

Administration Attended extended hours clinic - ESA Dundee - Care and Treatment Service: Seen by Clinician: RIDDLE, ***** at 10:15:03 on 28-Feb-2022

Examination Blood sample taken Bloods taken as per ice request.
Examination **Blood sample taken** Bloods taken as per ice request.:
Blood sample taken Bloods taken as per ice request.

(No range available)

23-Feb-2022 Ms Janice Birse Administration

11-Feb-2022 Mrs Patricia Buckingham Other

11-Feb-2022 Dr Nectarios Perdios Surgery consultation

10-Feb-2022 Ms Louise Kirkcaldy Other

10-Feb-2022 Ms Emma Jones Medicine Management

Intervention Discharged from hospital NW 3 - 03/02/2022
(P3)
Intervention Post hospital dischrge med reconciliation with medical notes IDL - started Furosemide.IDL states - taking gabapentin 300mg 2 capsules TDS not 4 caps TDS - Directions and quantity updated to reflect this
(P3)

02-Feb-2022 Mrs Patricia Buckingham Other

29-Jan-2022 Administration Seen in out of hours centre NHS 24 - at OOH Service -
(P3) referred to Hospital
29-Jan-2022 Diagnosis [D]Oedema NHS Tayside OOH Service
(P3)

31-Jan-2022 Dr Federated User Clinic

Administration Did not attend - no reason Did not attend.
(P3)
Administration Attended extended hours clinic - ESA Dundee - Care
and Treatment Service: Seen by Clinician: RIDDLE, *****
at 15:42:03 on 31-Jan-2022

21-Jan-2022 Dr David Alexander Other

Administration Consultation No answer at 12:42. Advised should call
(P3) back to rearrange alternative tel consult

21-Jan-2022 Dr David Alexander Other

Administration Consultation No answer at 11:37
(P3)

20-Jan-2022 Mr Mark Gourlay Clinic

Intervention Informed consent for procedure Verbal consent for
(P3) Vitamin B12 IM injection.
Intervention Intramuscular injection of vitamin B12 BN: 10310Exp:
(P3) 11/22IM injection right deltoid muscle.
Administration Seen by practice nurse Attended for Vitamin B12
(P3) injection this afternoon. I have directed Audra to the
CCTS for future B12 appointments - she said Hillbank
would be closest to her. I have asked her to call her
nearer the time (I have written the next due date) and she
is aware to bring the B12s with her. Also complaining of
oedema spreading to her stomach and her vulva, making
it difficult to walk. She has bloods outstanding from
October but she has not made an appointment for these
here or at Hillbank. I have booked a telephone
consultation with Dr Alexander tomorrow (21/01/22) to
discuss this.

20-Jan-2022 Ms Janice Birse Administration**16-Dec-2021 Miss Jill Rowan Administration****10-Nov-2021 Miss Jill Rowan Administration****18-Oct-2021 Miss Jill Rowan Administration****08-Oct-2021 Dr Nectarios Perdios Surgery consultation**

Administration Telephone encounter pt reports legs swelling up again.
(P3) tried furosemide and thinks helped somewhat. echo in
2019 was satisfactory. no other signs of heart
failure. furosemide 20mg daily. elevate legs. review in 3/52.
bloods in 2/52. sooner if issues

01-Oct-2021 Dr David Alexander Other

Administration Consultation Tried calling again at 10:14. Still no answer.
(P3) Advised to arrange another time to speak

01-Oct-2021 Dr David Alexander Other

Administration Consultation Tried calling at 09:06. Phone going to
(P3) vmail. Advised will try again later this am

30-Sept-2021 Mr Mark Gourlay Clinic

Intervention Informed consent for procedure Verbal consent for
(P3) Vitamin B12 IM injection.
Intervention Intramuscular injection of vitamin B12 BN: 00546Exp:
(P3) 05/22IM injection left deltoid muscle.
Administration Seen by practice nurse Attended for Vitamin B12 IM
(P3) injection this afternoon. During the consultation, Audra
was wondering if she is due bloods now that she has
finished her course of Furosemide. Had a look back at Dr
Sanu's notes from 27/07/21 and notes bloods would be
required if ongoing diuretics. She is still having issues with
swelling in her legs and feels that her toes have
"ballooned". I have booked a telephone consultation with
Dr Alexander tomorrow morning (01/10/21) to discuss this
further.

10-Sept-2021 Miss Jill Rowan Administration

09-Sept-2021 Miss Jill Rowan Administration

17-Aug-2021 Miss Jill Rowan Administration

29-July-2021 Mr Mark Gourlay Clinic

Intervention (P3) Informed consent for procedure Verbal consent for Vitamin B12 IM injection
 Intervention (P3) Intramuscular injection of vitamin B12 BN: 00209Exp: 08/21IM injection right deltoid muscle.
 Administration (P3) Seen by practice nurse Attended for Vitamin B12 injection this afternoon. During the consultation, Audra was asking about her legs - very swollen with erythema. She has discussed this with a couple of GPs and has been given diuretics - I advised to try these and we can investigate further if no response. She also advised she was getting breathless lately - she said she was told hse had a "touch of asthma" and has been using inhalers. I offered to book her in with Olive next week to discuss but she said she would wait for now and see if it settles with the diuretics. I advised her to contact us again if breathlessness does not settle and we can arrange a telephone consultation with Olive.

27-July-2021 Dr Deepa Sanu Surgery consultation

Administration (P3) Telephone encounter swelling of legs, she feels redness better with abx, but has a lot of swelling in her legs, for small supply of furosemide, will need bloods if needing ongoing diuretics

22-July-2021 Miss Jill Rowan Administration

16-July-2021 Dr Stephen Gardiner Results recording

15-July-2021 Examination BCSP faecal occult blood test normal No action required
 15-July-2021 Examination **BCSP faecal occult blood test normal** No action required: **Negative**
 BCSP faecal occult blood test normal No action required (No range available)

14-July-2021 Miss Jill Rowan Administration

02-July-2021 Dr Jing Liu Surgery consultation

Administration (P3) Consultation There is some mild erythema both shins, and warmth. Audra tells me this is a new change. Not especially cellulitic looking, T 37.3; sats 100%, pulse 88. Rx with abx. Moderate chronic oedema both lower legs, minimally pitting only. I think lymphoedema. Advised elevation. Could refer for ABPI and compression in future. She describes not passing stools for days (?up to 2 weeks!) then passing diarrhoea. Senna helped previously. Sounds like overflow. Use laxido for bowel clearance.

02-July-2021 Dr Jing Liu Surgery consultation

Administration (P3) Telephone triage encounter Initially complained of ankle/leg swelling and redness, then went to complain about several other things including bladder, bowels, ? menopause, B12 injections etc.....I'm not not sure if all related, but TCI for examination of legs.

09-Jun-2021 Miss Jill Rowan Administration

09-Jun-2021 Dr Stephen Gardiner Data Transferred from other system

Intervention (P3) Admin sec dose SARS-CoV-2 vacc C-19 AstraZeneca (By V *****)

10-May-2021 Miss Jill Rowan Administration

29-Apr-2021 Mr Mark Gourlay Clinic

Intervention (P3) Informed consent for procedure Verbal consent for Vitamin B12 IM injection.
 Intervention (P3) Intramuscular injection of vitamin B12 BN: 00209Exp: 08/21IM injection left deltoid muscleMade aware needs to order more, only 1 more vial before the remainder expire.

01-Apr-2021 Miss Jill Rowan Administration

31-Mar-2021 Dr Stephen Gardiner Data Transferred from other system

Intervention Admin first dose SARS-CoV-2 vaccine C-19 AstraZeneca (By S *****)

01-Mar-2021 Miss Jill Rowan Administration**01-Feb-2021 Dr Balakrishnan Pillai Triage**

Administration Telephone triage encounter Called mobile at 09:23 and (P3) no answer-Message left to say that i will try again after some time....(dr.bala pillai-locum)

Administration Telephone triage encounter Called mobile again at (P3) 10:48 and no answer-Message left on the voice mail to call me back....(dr.bala pillai-locum)

29-Jan-2021 Mr Mark Gourlay Clinic

Intervention Informed consent for procedure Verbal consent for (P3) Vitamin B12 IM injection.

Intervention Intramuscular injection of vitamin B12 BN: 00209Exp: (P3) 08/21IM injection right deltoid muscle.

Administration Seen by practice nurse Attended for Vitamin B12 (P3) injection this afternoon. During the consultation, Audra told me that her face is breaking out due to wearing face masks - she had previous treatment for rosacea prescribed by Dr Raza. She is seeking a prescription for this again. I have booked her in for a telephone consultation with Dr Pillai on Monday (01/02/21) to discuss this further.

27-Jan-2021 Miss Jill Rowan Administration**23-Dec-2020 Ms Janice Birse Administration****26-Nov-2020 Miss Jill Rowan Administration****06-Nov-2020 Miss Jill Rowan Administration****06-Nov-2020 Mrs Jane Thomson Clinic**

Intervention Intramuscular injection of vitamin B12 given i.m. left arm (P3) batch no 90149 exp 11/2020

30-Oct-2020 Miss Jill Rowan Administration**19-Oct-2020 Dr Deepa Sanu Results recording**

07-Oct-2020 Examination Cervical smear - human papillomavirus negative

07-Oct-2020 Mrs Jane Thomson Clinic

Examination O/E - blood pressure reading
Administration Seasonal influenza vaccination declined (P3)
Examination Ca cervix - screen done

148 / 74 mm Hg

29-Sept-2020 Dr Deepa Sanu Surgery consultation**28-Sept-2020 Miss Jill Rowan Administration****16-Sept-2020 Mr Russell Hale Administration**

14-Sept-2020 Administration Influenza vaccination invitation SMS text message sent (P9)

25-Aug-2020 Mrs Clare Dow Surgery consultation**20-Aug-2020 Miss Caitlin Stoves Clinic**

Intervention Intramuscular injection of vitamin B12 10/202090119im (P3) left arm injection
Intervention Informed consent for procedure - verbal consent (P3)

19-Aug-2020 Miss Jill Rowan Administration

06-July-2020 Dr Deepa Sanu Surgery consultation

03-July-2020 Miss Jill Rowan Administration

23-Jun-2020 Miss Caitlin Stoves Clinic

Administration SMS text message sent to patient Morning, Just to let
(P9) you know you are overdue on your smear. Please call us
to arrange an appointment. Kind regards, ***** - Practice
Nurse

10-Jun-2020 Miss Jill Rowan Administration

22-May-2020 Mrs Olive Neave Surgery consultation

Intervention Intramuscular injection of vitamin B12 Right deltoidBN
(P3) 90313 exp 08/2020
Intervention Informed consent for procedure B12 inj.
(P3)

06-May-2020 Miss Jill Rowan Administration

23-Apr-2020 Miss Caitlin Stoves Clinic

Administration SMS text message sent to patient Hi Audra, Just to let
(P9) you know we are opening appointments for B12. You are
not due until 22/05/2020 therefore please contact the
surgery closer to the time to arrange this. Kind regards,
***** - Practice Nurse

15-Apr-2020 Dr Mohammed Raza Surgery consultation

Administration Consultation - appearance suggests rosacea with some
(P3) acne changes near the angle of the mouth- she does
admit to constant coffee consumption- death of her ***** is
now causing emotional and stressful periods for her- chat
about skincare for acne and coffee reduction, add
metronidazole for 3-4/12, r/v in 1/12 if sx+ despite gel-
signposted to cruse and nhs inform for bereavement and
rosacea advice

15-Apr-2020 Dr Mohammed Raza Surgery consultation

Administration Telephone triage encounter - pt describes a rash on
(P3) face, both sides, spanning dermatomes by her
description, which has been present for over a month- she
?shingles, but it doesn't sound like it- suggest attend for
r/v, app given for this PM- no sovid sx, no sx in the
household

10-Apr-2020 Miss Jill Rowan Administration

17-Mar-2020 Dr Deepa Sanu Surgery consultation

16-Mar-2020 Miss Jill Rowan Administration

13-Mar-2020 Mr Russell Hale Administration

Administration SMS text message sent to patient To ensure patient
(P9) safety during the Coronavirus outbreak, the way we
normally offer appointments is temporarily changing. All
requests for appointments will now be triaged via
telephone until further notice. For more information refer
to our website www.taycourtsurgery.co.uk or call 01382
228228. - Tay ***** Surgery {Patient Group Sms Text
Consented}

28-Feb-2020 Mrs Olive Neave Surgery consultation

Intervention Intramuscular injection of vitamin B12 BN. 90313 exp
(P3) 08/20Left Deltoid
Intervention Informed consent for procedure B12 inj.
(P3)

20-Feb-2020 Mrs Clare Dow Surgery consultation

18-Feb-2020 Dr Mohammed Raza Surgery consultation

Administration Consultation - chat about recent results of bloods and echo and USS pelvis- no cause for leg swelling found, indeed pt tells me its resolved now- she is also using cbd oil which she thinks is helping, but c/o increased stiffness and pain in her knees- chat about weight loss - signposted to eatwell guide and suggested pt think about a possible regular activity- she does get constipation and c/o sx of piles, agree otc piles rx and senna to aid regular bowel motions - if difficulties persist to attend for qfit and r/v abdomen

14-Feb-2020 Ms Isabel Donaghy Other

Administration Telephone encounter making routine appt as per text received

13-Feb-2020 Miss Jill Rowan Administration**04-Feb-2020 Mrs Patricia Buckingham Other**

Administration SMS text message sent to patient Please make a routine appointment with any GP following your recent hospital appointment - Tay ***** Surgery (01382 228 228)

31-Jan-2020 Dr Calum Paton Surgery consultation

Administration Medication review

20-Jan-2020 Miss Jill Rowan Administration**20-Dec-2019 Mrs Patricia Buckingham Other****12-Dec-2019 Mrs Patricia Buckingham Other**

Administration SMS text message sent to patient Please make a routine appointment with any GP following your recent hospital referral - Tay ***** Surgery (01382 228 228)

06-Dec-2019 Miss Caitlin Stoves Clinic

Intervention Intramuscular injection of vitamin B12 08/202090313im
(P3) right arm injection
Intervention Informed consent for procedure - verbal consent
(P3)

22-Nov-2019 Miss Jill Rowan Administration**16-Oct-2019 Mr Russell Hale Administration**

Administration Influenza vaccination invitation 1st SMS text message sent
(P9)

15-Oct-2019 Dr Calum Paton Surgery consultation**02-Oct-2019 Dr Mohammed Raza Surgery consultation**

Administration Consultation - bilateral leg swelling- normal echo, normal bloods, normal CXRish- describes abdo bloating and after PU complete to stand up and flow continues ? prolapse- abdomen SNT, obese makes assessment in detail limited, finger clubbing noted- no evidence of DVT in legs, skin changes of chronic venous congestion noted distally- imp ?pelvic pathology (normal bloods), ?prolapse ?clot pelvic ?ovarian- will refer for USS pelvis, r/v with results- discussed add paracetamol to analgesic regimen and r/v prn

18-Sept-2019 Dr Mohammed Raza Surgery consultation

Administration Consultation - bilateral oedema up to mid thigh
(P3) worsening and causing knee stiffness and pain- no chest pain, no palpitations, occasional postural sx lightheadedness, no LOC/syncope, breathing unaffected at present- has had echo, a/w results- no fever/chills/sputum- o/e no evidence of DVT, bipedal pitting oedema to knees, knee exam grossly NAD, mild tenderness medially, mild valgus deformity or left knee (pt reports chronic)- agree commence furosemide, a/w echo, r/v in 2/52 or prn, WAG re chest pains LOC to call 999

14-Sept-2019 Dr Calum Paton Results recording

13-Sept-2019 Examination	Serum creatinine	56 umol/L	
13-Sept-2019 Examination	Serum potassium	4.2 mmol/L	
13-Sept-2019 Examination	Serum sodium	141 mmol/L	
13-Sept-2019 Examination	Biochemical test <none>		
13-Sept-2019 Examination	Acute kidney injury warning stage AKI warning stage - Not detected: May not exclude AKI in all cases		
13-Sept-2019 Examination	GFR calculated abbreviated MDRD GFR calculated	60 mL/min	
13-Sept-2019 Examination	abbreviatd MDRD -		
13-Sept-2019 Examination	GFR calculated abbreviated MDRD adj for African Americ origin GFR calctd abttd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA	mL/min	
13-Sept-2019 Examination	Serum creatinine:		
13-Sept-2019 Examination	Serum creatinine	56 umol/L	(Range: 44 - 80)
13-Sept-2019 Examination	Serum potassium:		
13-Sept-2019 Examination	Serum potassium	4.2 mmol/L	(Range: 3.5 - 5.3)
13-Sept-2019 Examination	Serum sodium:		
13-Sept-2019 Examination	Serum sodium	141 mmol/L	(Range: 133 - 146)
13-Sept-2019 Examination	Biochemical test<none>:		
13-Sept-2019 Examination	Biochemical test <none>		(No range available)
13-Sept-2019 Examination	Acute kidney injury warning stage AKI warning stage - Not detected: May not exclude AKI in all cases:		
13-Sept-2019 Examination	Acute kidney injury warning stage AKI warning stage - Not detected: May not exclude AKI in all cases		(No range available)
13-Sept-2019 Examination	GFR calculated abbreviated MDRD GFR calculated abbreviatd MDRD -:		
13-Sept-2019 Examination	GFR calculated abbreviated MDRD GFR calculated	60 mL/min	(No range available)
13-Sept-2019 Examination	abbreviatd MDRD -		
13-Sept-2019 Examination	GFR calculated abbreviated MDRD adj for African Americ origin GFR calctd abttd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA:		
13-Sept-2019 Examination	GFR calculated abbreviated MDRD adj for African Americ origin GFR calctd abttd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA	mL/min	(No range available)

13-Sept-2019 Mrs Clare Dow Surgery consultation

Intervention (P3)	Intramuscular injection of vitamin B12 IM left deltoid BN80453 expiry 12/19 administered by cdow with verbal consent
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06-Sept-2019 Miss Jill Rowan Administration**21-Aug-2019 Miss Jill Rowan Administration****08-Aug-2019 Dr Mohammed Raza Surgery consultation****07-Aug-2019 Miss Jill Rowan Administration****04-July-2019 Dr Calum Paton Surgery consultation****04-July-2019 Dr Calum Paton Surgery consultation**

Administration (P3)	Consultation discussed ecg - ? conduction defect - still has pansystolic murmur - refer to cardiology as still has ankle oedema
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02-July-2019 Mrs Alexis Macrae Results recording

01-July-2019	Examination	Serum creatinine	51 umol/L	
01-July-2019	Examination	Serum potassium	4.2 mmol/L	
01-July-2019	Examination	Serum sodium	140 mmol/L	
01-July-2019	Examination	Biochemical test <none>		
01-July-2019	Examination	Acute kidney injury warning stage AKI warning stage - Not detected: May not exclude AKI in all cases		
01-July-2019	Examination	GFR calculated abbreviated MDRD GFR calculated	60 mL/min	
01-July-2019	Examination	abbreviatd MDRD -		
01-July-2019	Examination	GFR calculated abbreviated MDRD adj for African Americ origin GFR calctd abttd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA	mL/min	
01-July-2019	Examination	Serum creatinine:		
01-July-2019	Examination	Serum creatinine	51 umol/L	(Range: 44 - 80)
01-July-2019	Examination	Serum potassium:		
01-July-2019	Examination	Serum potassium	4.2 mmol/L	(Range: 3.5 - 5.3)
01-July-2019	Examination	Serum sodium:		
01-July-2019	Examination	Serum sodium	140 mmol/L	(Range: 133 - 146)
01-July-2019	Examination	Biochemical test<none>:		
01-July-2019	Examination	Biochemical test <none>		(No range available)
01-July-2019	Examination	Acute kidney injury warning stage AKI warning stage - Not detected: May not exclude AKI in all cases:		
01-July-2019	Examination	Acute kidney injury warning stage AKI warning stage - Not detected: May not exclude AKI in all cases		(No range available)
01-July-2019	Examination	GFR calculated abbreviated MDRD GFR calculated abbreviatd MDRD -:		
01-July-2019	Examination	GFR calculated abbreviated MDRD GFR calculated	60 mL/min	(No range available)
01-July-2019	Examination	abbreviatd MDRD -		
01-July-2019	Examination	GFR calculated abbreviated MDRD adj for African Americ origin GFR calctd abttd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA:		
01-July-2019	Examination	GFR calculated abbreviated MDRD adj for African Americ origin GFR calctd abttd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA	mL/min	(No range available)

01-July-2019 Miss Caitlin Stoves Clinic

Examination	ECG - review with dr paton on thursday	
Examination	ECG- review with dr paton on thursday: Potential Abnormal	
	ECG - review with dr paton on thursday	(No range available)

28-Jun-2019 Dr Lajeen Rashid Other

Intervention (P3)	Had a chat to patient CXR was normal,ECG still pending. Bloods following furosemide treatment was taken earlier that should be taken so difficult to asses renal function. No response to furosemide 20 mgAgreed U+Es check,ECG I have already requested ECHO ? pancystolic murmur . appoint to rv result and ? increase furosemide if bloods are ok , cardio referal if the reviewing Dr listen to pancystolic murmur ,otherwise waite for ECHO to justify referral
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26-Jun-2019 Miss Caitlin Stoves Clinic**14-Jun-2019 Miss Jill Rowan Administration****14-Jun-2019 Mrs Patricia Buckingham Other****11-Jun-2019 Miss Caitlin Stoves Clinic**

Intervention (P3)	Intramuscular injection of vitamin B12 03/2020
Intervention (P3)	80710right im injection
Intervention (P3)	Informed consent for procedure - verbal consent

07-Jun-2019 Mrs Clare Dow Surgery consultation

Administration (P9)	SMS text message sent to patient Hi Audra, can you please attend surgery in 10 days time for a repeat blood test, as blood test was taken too early, thank you, Taycourt Surgery
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04-Jun-2019 Dr Lajeen Rashid Results recording

03-Jun-2019	Examination	Serum creatinine	56 umol/L	
03-Jun-2019	Examination	Serum potassium	3.9 mmol/L	
03-Jun-2019	Examination	Serum sodium	139 mmol/L	
03-Jun-2019	Examination	Biochemical test	<none>	
03-Jun-2019	Examination	Acute kidney injury warning stage	AKI warning stage - Not detected: May not exclude AKI in all cases	
03-Jun-2019	Examination	GFR calculated abbreviated MDRD	GFR calculated	60 mL/min
03-Jun-2019	Examination	abbreviatd MDRD -		
03-Jun-2019	Examination	GFR calculated abbreviated MDRD adj for African Americ	mL/min	
		origin GFR calctd abbtD MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA		
03-Jun-2019	Examination	Serum creatinine:		
		Serum creatinine	56 umol/L	(Range: 44 - 80)
03-Jun-2019	Examination	Serum potassium:		
		Serum potassium	3.9 mmol/L	(Range: 3.5 - 5.3)
03-Jun-2019	Examination	Serum sodium:		
		Serum sodium	139 mmol/L	(Range: 133 - 146)
03-Jun-2019	Examination	Biochemical test<none>:		
		Biochemical test	<none>	(No range available)
03-Jun-2019	Examination	Acute kidney injury warning stage	AKI warning stage - Not detected: May not exclude AKI in all cases:	
		Acute kidney injury warning stage	AKI warning stage - Not detected: May not exclude AKI in all cases	(No range available)
03-Jun-2019	Examination	GFR calculated abbreviated MDRD	GFR calculated abbreviatd MDRD -:	
		GFR calculated abbreviated MDRD	GFR calculated	60 mL/min
03-Jun-2019	Examination	abbreviatd MDRD -		(No range available)
		GFR calculated abbreviated MDRD adj for African Americ	GFR calctd abbtD MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA:	
		GFR calculated abbreviated MDRD adj for African Americ	mL/min	(No range available)
		origin GFR calctd abbtD MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA		

03-Jun-2019 Mr Russell Hale Administration

29-May-2019 Administration Did not attend - no reason (P3)

03-Jun-2019 Mrs Clare Dow Surgery consultation**31-May-2019 Dr Lajeen Rashid Other**

Intervention (P3) Had a chat to patient bilateral ankle swelling, eGFR >60, normal albumine and normal LFTS. can feel SOB on exertion but this is related to her asthma ,occasional palpitation,, no LOC or chest tightness ,smokes 10 cig daily O/E : SPO2 98%CVS : I+II+0 ? pansystolic murmurChest : no bibasal crepagreed furosemide 20 mg , repeat U&Es in 2 wks. CXR ,ECG and will arrange for ECHO. will rv with results and refer to cardio

24-May-2019 Ms Janice Birse Administration

Intervention (P3) Other medication review Robaxin removed from repeats not issued since 04/06/2018

24-May-2019 Dr Balakrishnan Pillai Results recording

23-May-2019	Examination	Serum albumin	35 g/L	
23-May-2019	Examination	Serum alkaline phosphatase U/L	130 U/L	
23-May-2019	Examination	Serum alanine aminotransferase level U/L	Serum ALT level - 22 U/L	
23-May-2019	Examination	Serum total bilirubin level	6 umol/L	
23-May-2019	Examination	Serum calcium	2.16 mmol/L	
23-May-2019	Examination	Corrected serum calcium level	2.21 mmol/L	
23-May-2019	Examination	Serum cholesterol	5.69 mmol/L	
23-May-2019	Examination	Serum creatinine	57 umol/L	
23-May-2019	Examination	Serum HDL cholesterol level	0.96 mmol/L	
23-May-2019	Examination	Serum potassium	4.1 mmol/L	
23-May-2019	Examination	Serum sodium	139 mmol/L	
23-May-2019	Examination	Serum TSH level mU/L	2.1 mU/L	
23-May-2019	Examination	Plasma glucose level	9.1 mmol/L	
23-May-2019	Examination	Bone profile <none>		
23-May-2019	Examination	Liver function test <none>		
23-May-2019	Examination	Plasma C reactive protein	14 mg/L	
23-May-2019	Examination	Biochemical test <none>		
23-May-2019	Examination	Acute kidney injury warning stage AKI warning stage - Not detected: May not exclude AKI in all cases		
23-May-2019	Examination	Total cholesterol:HDL ratio <none>	ratio	
23-May-2019	Examination	Total cholesterol:HDL ratio .	5.9 ratio	
23-May-2019	Examination	GFR calculated abbreviated MDRD GFR calculated abbreviatd MDRD -	60 mL/min	
23-May-2019	Examination	GFR calculated abbreviated MDRD adj for African Americ orign GFR calctd abttd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA	mL/min	
23-May-2019	Examination	Serum albumin:		
23-May-2019	Examination	Serum albumin	35 g/L	(Range: 35 - 50)
23-May-2019	Examination	Serum alkaline phosphatase U/L:		
23-May-2019	Examination	Serum alkaline phosphatase U/L	130 U/L	(Range: 30 - 130)
23-May-2019	Examination	Serum alanine aminotransferase level	Serum ALT level - U/L:	
23-May-2019	Examination	Serum alanine aminotransferase level U/L	Serum ALT level - 22 U/L	(Range: 5 - 55)
23-May-2019	Examination	Serum total bilirubin level:		
23-May-2019	Examination	Serum total bilirubin level	6 umol/L	(No range available)
23-May-2019	Examination	Serum calcium:		
23-May-2019	Examination	Serum calcium	2.16 mmol/L	(Range: 2.1 - 2.55)
23-May-2019	Examination	Corrected serum calcium level:		
23-May-2019	Examination	Corrected serum calcium level	2.21 mmol/L	(Range: 2.1 - 2.55)
23-May-2019	Examination	Serum cholesterol: Above high reference limit		
23-May-2019	Examination	Serum cholesterol	5.69 mmol/L	(No range available)
23-May-2019	Examination	Serum creatinine:		
23-May-2019	Examination	Serum creatinine	57 umol/L	(Range: 44 - 80)
23-May-2019	Examination	Serum HDL cholesterol level:		
23-May-2019	Examination	Serum HDL cholesterol level	0.96 mmol/L	(Range: 0.6 - 2.5)
23-May-2019	Examination	Serum potassium:		
23-May-2019	Examination	Serum potassium	4.1 mmol/L	(Range: 3.5 - 5.3)
23-May-2019	Examination	Serum sodium:		
23-May-2019	Examination	Serum sodium	139 mmol/L	(Range: 133 - 146)
23-May-2019	Examination	Serum TSH level mU/L:		
23-May-2019	Examination	Serum TSH level mU/L	2.1 mU/L	(Range: 0.4 - 4)
23-May-2019	Examination	Plasma glucose level: Above high reference limit		
23-May-2019	Examination	Plasma glucose level	9.1 mmol/L	(Range: 3.3 - 5.8)
23-May-2019	Examination	Bone profile <none>:		
23-May-2019	Examination	Bone profile <none>		(No range available)
23-May-2019	Examination	Liver function test <none>:		
23-May-2019	Examination	Liver function test <none>		(No range available)
23-May-2019	Examination	Plasma C reactive protein: Above high reference limit		
23-May-2019	Examination	Plasma C reactive protein	14 mg/L	(No range available)
23-May-2019	Examination	Biochemical test <none>:		
23-May-2019	Examination	Biochemical test <none>		(No range available)
23-May-2019	Examination	Acute kidney injury warning stage AKI warning stage - Not detected: May not exclude AKI in all cases:		
23-May-2019	Examination	Acute kidney injury warning stage AKI warning stage - Not detected: May not exclude AKI in all cases		(No range available)
23-May-2019	Examination	Total cholesterol:HDL ratio <none>:		
23-May-2019	Examination	Total cholesterol:HDL ratio <none>	ratio	(No range available)
23-May-2019	Examination	Total cholesterol:HDL ratio.:		
23-May-2019	Examination	Total cholesterol:HDL ratio .	5.9 ratio	(No range available)
23-May-2019	Examination	GFR calculated abbreviated MDRD GFR calculated abbreviatd MDRD -:		
23-May-2019	Examination	GFR calculated abbreviated MDRD GFR calculated abbreviatd MDRD -	60 mL/min	(No range available)
23-May-2019	Examination	GFR calculated abbreviated MDRD adj for African Americ orign GFR calctd abttd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA:		
23-May-2019	Examination	GFR calculated abbreviated MDRD adj for African Americ orign GFR calctd abttd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA	mL/min	(No range available)

24-May-2019 Dr Balakrishnan Pillai Results recording

23-May-2019 Examination	Eosinophil count x10 ⁹ /L	0.17 10 ⁹ /L	
23-May-2019 Examination	Haemoglobin estimation	128 g/L	
23-May-2019 Examination	Mean corpusc. haemoglobin(MCH)	29.6 pg	
23-May-2019 Examination	Mean corpusc. Hb. conc. (MCHC)	319 g/L	
23-May-2019 Examination	Mean corpuscular volume (MCV) fl	92.8 fL	
23-May-2019 Examination	Monocyte count x10 ⁹ /L	0.4 10 ⁹ /L	
23-May-2019 Examination	Neutrophil count x10 ⁹ /L	4.8 10 ⁹ /L	
23-May-2019 Examination	Platelet count x10 ⁹ /L	337 10 ⁹ /L	
23-May-2019 Examination	Red blood cell (RBC) count x10 ¹² /L	4.33 10 ¹² /L	
23-May-2019 Examination	Total white cell count x10 ⁹ /L	9.6 10 ⁹ /L	
23-May-2019 Examination	Lymphocyte count x10 ⁹ /L	4.2 10⁹/L	
23-May-2019 Examination	Full blood count - FBC <none>		
23-May-2019 Examination	Plasma viscosity mPa.s.	1.7 mPa.s	
23-May-2019 Examination	Haematocrit	0.402 ratio	
23-May-2019 Examination	Basophil count x10 ⁹ /L	0.1 10 ⁹ /L	
23-May-2019 Examination	Eosinophil countx10⁹/L:		
	Eosinophil count x10 ⁹ /L	0.17 10 ⁹ /L	(No range available)
23-May-2019 Examination	Haemoglobin estimation:		
	Haemoglobin estimation	128 g/L	(Range: 120 - 160)
23-May-2019 Examination	Mean corpusc. haemoglobin(MCH):		
	Mean corpusc. haemoglobin(MCH)	29.6 pg	(Range: 27 - 32)
23-May-2019 Examination	Mean corpusc. Hb. conc. (MCHC): Below low reference limit		
	Mean corpusc. Hb. conc. (MCHC)	319 g/L	(Range: 320 - 360)
23-May-2019 Examination	Mean corpuscular volume (MCV)fl:		
	Mean corpuscular volume (MCV) fl	92.8 fL	(Range: 85 - 105)
23-May-2019 Examination	Monocyte countx10⁹/L:		
	Monocyte count x10 ⁹ /L	0.4 10 ⁹ /L	(Range: 0.2 - 0.8)
23-May-2019 Examination	Neutrophil countx10⁹/L:		
	Neutrophil count x10 ⁹ /L	4.8 10 ⁹ /L	(Range: 2 - 7.5)
23-May-2019 Examination	Platelet countx10⁹/L:		
	Platelet count x10 ⁹ /L	337 10 ⁹ /L	(Range: 150 - 400)
23-May-2019 Examination	Red blood cell (RBC) countx10¹²/L:		
	Red blood cell (RBC) count x10 ¹² /L	4.33 10 ¹² /L	(Range: 3.8 - 4.8)
23-May-2019 Examination	Total white cell countx10⁹/L:		
	Total white cell count x10 ⁹ /L	9.6 10 ⁹ /L	(Range: 4 - 11)
23-May-2019 Examination	Lymphocyte countx10⁹/L: Above high reference limit		
	Lymphocyte count x10 ⁹ /L	4.2 10⁹/L	(Range: 1.5 - 4)
23-May-2019 Examination	Full blood count - FBC<none>:		
	Full blood count - FBC <none>		(No range available)
23-May-2019 Examination	Plasma viscositymPa.s.:		
	Plasma viscosity mPa.s.	1.7 mPa.s	(Range: 1.5 - 1.72)
23-May-2019 Examination	Haematocrit:		
	Haematocrit	0.402 ratio	(Range: 0.37 - 0.47)
23-May-2019 Examination	Basophil countx10⁹/L:		
	Basophil count x10 ⁹ /L	0.1 10 ⁹ /L	(No range available)

23-May-2019 Mrs Clare Dow Surgery consultation**10-May-2019 Miss Jill Rowan Administration****17-Apr-2019 Dr Balakrishnan Pillai Surgery consultation**

Examination	O/E - pulse rate	93 bpm
Examination	O/E - blood pressure reading	135 / 59 mm Hg
Symptom	Oedema	
(P3)		
Administration	Consultation Pt does have B12 def and has fluid retention in the legs and also feeling a bit breathless as well on exertion...She has been on furoisemide in the past which she felt helped...Says sometimes gets a bit of a discomfort on the chest as well...OBS-BP-135/59,P-93,O2 SATS-99% ON AIR,RR-17....CHEST-CLEAR WITH GOOD AE BOTH SIDES...CVS-NAD...HAS PITTING OEDEMA ON BOTH LEGS...Pt also feels her tummy looks more bloated and her clothes have increased in size...I have suggested a follow up blood test before thinking about diuretics and will see her back next week for the results...Worsening advise given...(dr.bala pillai-locum)	
(P3)		

16-Apr-2019 Ms Janice Birse Administration

Intervention	Other medication review Qvar removed from repeats --
(P3)	not issued since 11/04/2018

11-Apr-2019 Miss Jill Rowan Administration**03-Apr-2019 Dr A Locum Administration**

Administration	Well adult monitor.admin.NOS Added by Keep Well
(P3)	Team

20-Mar-2019 Dr Calum Paton Surgery consultation

Administration Medication review

18-Mar-2019 Miss Jill Rowan Administration**13-Mar-2019 Mrs Jane Watson Administration**

Administration Medication changed - As of 1st April 2019 new prescription restrictions for Gabapentin now for 28 days supply only. Prescription amended and note to dispenser.

11-Mar-2019 Mrs Alexis Macrae Surgery consultation**11-Mar-2019 Mrs Clare Dow Surgery consultation**

Intervention Intramuscular injection of vitamin B12 IM deltoid right arm
(P3) BN80453 expiry 12/19 administered by cdow with verbal consent

22-Feb-2019 Dr Lajeen Rashid Other

Intervention Had a chat to patient US and XR hip explained . pain is
(P3) easing. advised weight loss,not keen on PT .

21-Feb-2019 Miss Caitlin Stoves Other

Administration SMS text message sent to patient Hi Audra, please make
(P9) appointment with dr rashid to discuss results. Kind regards,k Taycourt surgery

11-Feb-2019 Miss Jill Rowan Administration**25-Jan-2019 Dr Calum Paton Results recording**

24-Jan-2019	Examination	Eosinophil count x10 ⁹ /L	0.14 10 ⁹ /L	
24-Jan-2019	Examination	Haemoglobin estimation	124 g/L	
24-Jan-2019	Examination	Mean corpusc. haemoglobin(MCH)	31.7 pg	
24-Jan-2019	Examination	Mean corpusc. Hb. conc. (MCHC)	316 g/L	
24-Jan-2019	Examination	Mean corpuscular volume (MCV) fl	100.5 fL	
24-Jan-2019	Examination	Monocyte count x10 ⁹ /L	0.4 10 ⁹ /L	
24-Jan-2019	Examination	Neutrophil count x10 ⁹ /L	5.1 10 ⁹ /L	
24-Jan-2019	Examination	Platelet count x10 ⁹ /L	361 10 ⁹ /L	
24-Jan-2019	Examination	Red blood cell (RBC) count x10 ¹² /L	3.91 10 ¹² /L	
24-Jan-2019	Examination	Total white cell count x10 ⁹ /L	9.6 10 ⁹ /L	
24-Jan-2019	Examination	Lymphocyte count x10 ⁹ /L	3.9 10 ⁹ /L	
24-Jan-2019	Examination	Full blood count - FBC <none>		
24-Jan-2019	Examination	Haematocrit	0.393 ratio	
24-Jan-2019	Examination	Basophil count x10 ⁹ /L	0.1 10 ⁹ /L	
24-Jan-2019	Examination	Eosinophil count x10 ⁹ /L:		
		Eosinophil count x10 ⁹ /L	0.14 10 ⁹ /L	(No range available)
24-Jan-2019	Examination	Haemoglobin estimation:		
		Haemoglobin estimation	124 g/L	(Range: 120 - 160)
24-Jan-2019	Examination	Mean corpusc. haemoglobin(MCH):		
		Mean corpusc. haemoglobin(MCH)	31.7 pg	(Range: 27 - 32)
24-Jan-2019	Examination	Mean corpusc. Hb. conc. (MCHC): Below low reference limit		
		Mean corpusc. Hb. conc. (MCHC)	316 g/L	(Range: 320 - 360)
24-Jan-2019	Examination	Mean corpuscular volume (MCV)fl:		
		Mean corpuscular volume (MCV) fl	100.5 fL	(Range: 85 - 105)
24-Jan-2019	Examination	Monocyte count x10 ⁹ /L:		
		Monocyte count x10 ⁹ /L	0.4 10 ⁹ /L	(Range: 0.2 - 0.8)
24-Jan-2019	Examination	Neutrophil count x10 ⁹ /L:		
		Neutrophil count x10 ⁹ /L	5.1 10 ⁹ /L	(Range: 2 - 7.5)
24-Jan-2019	Examination	Platelet count x10 ⁹ /L:		
		Platelet count x10 ⁹ /L	361 10 ⁹ /L	(Range: 150 - 400)
24-Jan-2019	Examination	Red blood cell (RBC) count x10 ¹² /L:		
		Red blood cell (RBC) count x10 ¹² /L	3.91 10 ¹² /L	(Range: 3.8 - 4.8)
24-Jan-2019	Examination	Total white cell count x10 ⁹ /L:		
		Total white cell count x10 ⁹ /L	9.6 10 ⁹ /L	(Range: 4 - 11)
24-Jan-2019	Examination	Lymphocyte count x10 ⁹ /L:		
		Lymphocyte count x10 ⁹ /L	3.9 10 ⁹ /L	(Range: 1.5 - 4)
24-Jan-2019	Examination	Full blood count - FBC<none>:		
		Full blood count - FBC <none>		(No range available)
24-Jan-2019	Examination	Haematocrit:		
		Haematocrit	0.393 ratio	(Range: 0.37 - 0.47)
24-Jan-2019	Examination	Basophil count x10 ⁹ /L:		
		Basophil count x10 ⁹ /L	0.1 10 ⁹ /L	(No range available)

24-Jan-2019 Miss Caitlin Stoves Other

Administration Consent given for communication by SMS text messaging
(P3)

17-Jan-2019 Mrs Clare Dow Surgery consultation

Administration SMS text message sent to patient Hi Audra, can you
(P9) please attend surgery for repeat blood test in 1 week, any
day between 8 - 10.45am, thanks, Taycourt Surgery

16-Jan-2019 Dr Calum Paton Surgery consultation**11-Jan-2019 Dr Deepa Sanu Surgery consultation****11-Jan-2019 Dr Lajeen Rashid Other**

Intervention Had a chat to patient fell 2 wks ago, landed on R side and
(P3) has been experiencing R hip pain since which can radiate
down the leg. No new pins and needles/leg weakness. Able
to fully WB. on gabapentin and tramadol and has applying
topical gel which helping O/E : no limb shortening/external
rotation FROM R hip? superfascial, hard lump? calcified
haematoma will arrange for Hip XR and US soft tissue. RV
with results

10-Jan-2019 Dr Calum Paton Results recording

09-Jan-2019	Examination	Serum vitamin B12 ng/l	829 ng/L	
09-Jan-2019	Examination	Serum folate ug/l	17.5 ug/L	
09-Jan-2019	Examination	B12/folate level <none>		
09-Jan-2019	Examination	Serum vitamin B12 ng/l:	829 ng/L	(Range: 200 - 940)
09-Jan-2019	Examination	Serum folate ug/l: Above high reference limit	17.5 ug/L	(Range: 3.1 - 17.5)
09-Jan-2019	Examination	B12/folate level <none>:		
09-Jan-2019	Examination	B12/folate level <none>		(No range available)

10-Jan-2019 Dr Calum Paton Results recording

09-Jan-2019	Examination	Eosinophil count x10 ⁹ /L	0.17 10 ⁹ /L	
09-Jan-2019	Examination	Haemoglobin estimation	126 g/L	
09-Jan-2019	Examination	Mean corpusc. haemoglobin(MCH)	32.5 pg	
09-Jan-2019	Examination	Mean corpusc. Hb. conc. (MCHC)	305 g/L	
09-Jan-2019	Examination	Mean corpuscular volume (MCV) fl	106.6 fL	
09-Jan-2019	Examination	Monocyte count x10 ⁹ /L	0.5 10 ⁹ /L	
09-Jan-2019	Examination	Neutrophil count x10 ⁹ /L	4.7 10 ⁹ /L	
09-Jan-2019	Examination	Platelet count x10 ⁹ /L	395 10 ⁹ /L	
09-Jan-2019	Examination	Red blood cell (RBC) count x10 ¹² /L	3.88 10 ¹² /L	
09-Jan-2019	Examination	Total white cell count x10 ⁹ /L	11.2 10⁹/L	
09-Jan-2019	Examination	Lymphocyte count x10 ⁹ /L	5.8 10⁹/L	
09-Jan-2019	Examination	Full blood count - FBC <none>		
09-Jan-2019	Examination	Haematocrit	0.413 ratio	
09-Jan-2019	Examination	Basophil count x10 ⁹ /L	0.1 10 ⁹ /L	
09-Jan-2019	Examination	Eosinophil count x10 ⁹ /L:	0.17 10 ⁹ /L	(No range available)
09-Jan-2019	Examination	Haemoglobin estimation:		
09-Jan-2019	Examination	Haemoglobin estimation	126 g/L	(Range: 120 - 160)
09-Jan-2019	Examination	Mean corpusc. haemoglobin(MCH): Above high reference limit	32.5 pg	(Range: 27 - 32)
09-Jan-2019	Examination	Mean corpusc. Hb. conc. (MCHC): Below low reference limit	305 g/L	(Range: 320 - 360)
09-Jan-2019	Examination	Mean corpuscular volume (MCV) fl: Above high reference limit	106.6 fL	(Range: 85 - 105)
09-Jan-2019	Examination	Monocyte count x10 ⁹ /L:	0.5 10 ⁹ /L	(Range: 0.2 - 0.8)
09-Jan-2019	Examination	Neutrophil count x10 ⁹ /L:	4.7 10 ⁹ /L	(Range: 2 - 7.5)
09-Jan-2019	Examination	Platelet count x10 ⁹ /L:	395 10 ⁹ /L	(Range: 150 - 400)
09-Jan-2019	Examination	Red blood cell (RBC) count x10 ¹² /L:	3.88 10 ¹² /L	(Range: 3.8 - 4.8)
09-Jan-2019	Examination	Total white cell count x10 ⁹ /L: Above high reference limit	11.2 10⁹/L	(Range: 4 - 11)
09-Jan-2019	Examination	Lymphocyte count x10 ⁹ /L: Above high reference limit	5.8 10⁹/L	(Range: 1.5 - 4)
09-Jan-2019	Examination	Full blood count - FBC <none>:		
09-Jan-2019	Examination	Full blood count - FBC <none>		(No range available)
09-Jan-2019	Examination	Haematocrit:		
09-Jan-2019	Examination	Haematocrit	0.413 ratio	(Range: 0.37 - 0.47)
09-Jan-2019	Examination	Basophil count x10 ⁹ /L:	0.1 10 ⁹ /L	(No range available)
09-Jan-2019	Examination	Basophil count x10 ⁹ /L		

09-Jan-2019 Miss Jill Rowan Administration

09-Jan-2019 Miss Caitlin Stoves Other

Administration Seen by practice nurse - fell in bath over christmas.
(P3) Thought assessment from doctor would be better for advice

25-Dec-2018 Dr Stephen Gardiner Results recording

24-Dec-2018	Examination	BCSP faecal occult blood test normal	No action required	
24-Dec-2018	Examination	BCSP faecal occult blood test normal	No action required: Negative	
		BCSP faecal occult blood test normal	No action required	(No range available)

12-Dec-2018 Miss Jill Rowan Administration

10-Dec-2018 Miss Caitlin Stoves Other

Symptom	Full consent for immunisation
Intervention	Intramuscular injection of vitamin B12 12/2019 80431
(P3)	

07-Dec-2018 Dr Calum Paton Surgery consultation

Administration Consultation doing well with furosemide - less ankle
(P3) oedema - continue with this for another 10/7 continue
folic acid and recheck bloods as per plan for Jan 2019
Administration Medication review

07-Dec-2018 Mrs Olive Neave Surgery consultation

Intervention	Intramuscular injection of vitamin B12 BN 80431 exp
(P3)	12/19
Intervention	Informed consent for procedure
(P3)	

05-Dec-2018 Mrs Alexis Macrae Surgery consultation

Intervention	Intramuscular injection of vitamin B12 BN80431 ex 12/19
(P3)	left arm
Intervention	Informed consent for procedure
(P3)	

03-Dec-2018 Mrs Alexis Macrae Surgery consultation

Intervention	Informed consent for procedure
(P3)	
Intervention	Intramuscular injection of vitamin B12 BN 80431 ex 12/19
(P3)	right arm

30-Nov-2018 Mrs Olive Neave Surgery consultation

Intervention	Informed consent for procedure B12 Inj
(P3)	
Intervention	Intramuscular injection of vitamin B12 80431 exp 12/19
(P3)	Left arm (2nd injection)

27-Nov-2018 Mrs Catherine Houston Surgery consultation

Administration	Seen by practice nurse - for loading B12 injections
(P3)	
Intervention	Informed consent for procedure - verbal consent for 1st
(P3)	B12 injection
Intervention	Intramuscular injection of vitamin B12 - B/N 80431 exp
(P3)	12/19

27-Nov-2018 Mrs Clare Dow Surgery consultation

23-Nov-2018 Dr Calum Paton Surgery consultation

Administration Consultation ankle oedema present with pitting - not
(P3) breathless - for furosemide - discussed other blood
results - megalocytic anaemia with low B12 and folate - for
replacement of B12 and folate script issued and for
recheck fbc u&e lft and B12 folate in 4/52

15-Nov-2018 Mrs Clare Dow Surgery consultation

14-Nov-2018 Dr Deepa Sanu Results recording

Examination	Plasma C reactive protein	22 mg/L	
Examination	Plasma C reactive protein: Above high reference limit		
	Plasma C reactive protein	22 mg/L	(No range available)

14-Nov-2018 Dr Deepa Sanu Results recording

Examination	Serum vitamin B12 ng/l	160 ng/L	
Examination	Eosinophil count x10 ⁹ /L	0.06 10 ⁹ /L	
Examination	Serum folate ug/l	1.9 ug/L	
Examination	Haemoglobin estimation	108 g/L	
Examination	Mean corpusc. haemoglobin(MCH)	39.1 pg	
Examination	Mean corpusc. Hb. conc. (MCHC)	323 g/L	
Examination	Mean corpuscular volume (MCV) fl	121.2 fL	
Examination	Monocyte count x10 ⁹ /L	0.2 10 ⁹ /L	
Examination	Neutrophil count x10 ⁹ /L	9 10 ⁹ /L	
Examination	Platelet count x10 ⁹ /L	467 10 ⁹ /L	
Examination	Red blood cell (RBC) count x10 ¹² /L	2.77 10 ¹² /L	
Examination	Total white cell count x10 ⁹ /L	12 10 ⁹ /L	
Examination	Lymphocyte count x10 ⁹ /L	2.6 10 ⁹ /L	
Examination	B12/folate level <none>		
Examination	Full blood count - FBC <none>		
Examination	Haematocrit	0.336 ratio	
Examination	Basophil count x10 ⁹ /L	0 10 ⁹ /L	
Examination	Serum vitamin B12ng/l: Below low reference limit		
	Serum vitamin B12 ng/l	160 ng/L	(Range: 200 - 940)
Examination	Eosinophil countx10⁹/L:		
	Eosinophil count x10 ⁹ /L	0.06 10 ⁹ /L	(No range available)
Examination	Serum folateug/l: Below low reference limit		
	Serum folate ug/l	1.9 ug/L	(Range: 3.1 - 17.5)
Examination	Haemoglobin estimation: Below low reference limit		
	Haemoglobin estimation	108 g/L	(Range: 120 - 160)
Examination	Mean corpusc. haemoglobin(MCH): Above high reference limit		
	Mean corpusc. haemoglobin(MCH)	39.1 pg	(Range: 27 - 32)
Examination	Mean corpusc. Hb. conc. (MCHC):		
	Mean corpusc. Hb. conc. (MCHC)	323 g/L	(Range: 320 - 360)
Examination	Mean corpuscular volume (MCV)fl: Above high reference limit		
	Mean corpuscular volume (MCV) fl	121.2 fL	(Range: 85 - 105)
Examination	Monocyte countx10⁹/L:		
	Monocyte count x10 ⁹ /L	0.2 10 ⁹ /L	(Range: 0.2 - 0.8)
Examination	Neutrophil countx10⁹/L: Above high reference limit		
	Neutrophil count x10 ⁹ /L	9 10 ⁹ /L	(Range: 2 - 7.5)
Examination	Platelet countx10⁹/L: Above high reference limit		
	Platelet count x10 ⁹ /L	467 10 ⁹ /L	(Range: 150 - 400)
Examination	Red blood cell (RBC) countx10¹²/L: Below low reference limit		
	Red blood cell (RBC) count x10 ¹² /L	2.77 10 ¹² /L	(Range: 3.8 - 4.8)
Examination	Total white cell countx10⁹/L: Above high reference limit		
	Total white cell count x10 ⁹ /L	12 10 ⁹ /L	(Range: 4 - 11)
Examination	Lymphocyte countx10⁹/L:		
	Lymphocyte count x10 ⁹ /L	2.6 10 ⁹ /L	(Range: 1.5 - 4)
Examination	B12/folate level<none>:		
	B12/folate level <none>		(No range available)
Examination	Full blood count - FBC<none>:		
	Full blood count - FBC <none>		(No range available)
Examination	Haematocrit: Below low reference limit		
	Haematocrit	0.336 ratio	(Range: 0.37 - 0.47)
Examination	Basophil countx10⁹/L:		
	Basophil count x10 ⁹ /L	0 10 ⁹ /L	(No range available)

14-Nov-2018 Miss Caitlin Stoves Other

Symptom	Diet poor advice on eating - reminded to have a proper breakfast as just drinking coffee
Symptom	Exercise status screening seen physio - struggling with tiredness
Administration (P3)	Consent given for communication by SMS text messaging
Administration (P3)	Seen by practice nurse seen for bloods - patient upset she feels like she is going nowhere, sleeps all day and no energy with poor mobility, advised for doctors appointment as i could not deal with this

09-Nov-2018 Dr Deepa Sanu Surgery consultation

Administration (P3)	Failed encounter called patient to discuss results, message left on answering machine to call me back
Administration (P3)	Telephone encounter discussed with medical oncologist regarding bloods, as clinically well, investigate further and replace in community, malabsorption/alcohol etc, message has been sent to pt to make appointment, await contact

07-Nov-2018 Miss Jill Rowan Administration

03-Nov-2018 Dr Deepa Sanu Results recording

01-Nov-2018	Examination	Serum TSH level mU/L	1.08 mU/L	
01-Nov-2018	Examination	Plasma C reactive protein	22 mg/L	
01-Nov-2018	Examination	Serum TSH levelmU/L:		
		Serum TSH level mU/L	1.08 mU/L	(Range: 0.4 - 4)
01-Nov-2018	Examination	Plasma C reactive protein: Above high reference limit		
		Plasma C reactive protein	22 mg/L	(No range available)

03-Nov-2018 Dr Deepa Sanu Results recording

01-Nov-2018	Examination	Serum vitamin B12 ng/l	140 ng/L	
01-Nov-2018	Examination	Eosinophil count x10 ⁹ /L	0.06 10 ⁹ /L	
01-Nov-2018	Examination	Serum folate ug/l	1.8 ug/L	
01-Nov-2018	Examination	Haemoglobin estimation	105 g/L	
01-Nov-2018	Examination	Mean corpusc. haemoglobin(MCH)	37.9 pg	
01-Nov-2018	Examination	Mean corpusc. Hb. conc. (MCHC)	306 g/L	
01-Nov-2018	Examination	Mean corpuscular volume (MCV) fl	123.9 fL	
01-Nov-2018	Examination	Monocyte count x10 ⁹ /L	0.3 10 ⁹ /L	
01-Nov-2018	Examination	Neutrophil count x10 ⁹ /L	7.1 10 ⁹ /L	
01-Nov-2018	Examination	Platelet count x10 ⁹ /L	569 10 ⁹ /L	
01-Nov-2018	Examination	Red blood cell (RBC) count x10 ¹² /L	2.76 10 ¹² /L	
01-Nov-2018	Examination	Total white cell count x10 ⁹ /L	10.6 10 ⁹ /L	
01-Nov-2018	Examination	Lymphocyte count x10 ⁹ /L	3 10 ⁹ /L	
01-Nov-2018	Examination	B12/folate level <none>		
01-Nov-2018	Examination	Full blood count - FBC <none>		
01-Nov-2018	Examination	Haematocrit	0.342 ratio	
01-Nov-2018	Examination	Basophil count x10 ⁹ /L	0 10 ⁹ /L	
01-Nov-2018	Examination	Serum vitamin B12ng/l: Below low reference limit		
		Serum vitamin B12 ng/l	140 ng/L	(Range: 200 - 940)
01-Nov-2018	Examination	Eosinophil countx10⁹/L:		
		Eosinophil count x10 ⁹ /L	0.06 10 ⁹ /L	(No range available)
01-Nov-2018	Examination	Serum folateug/l: Below low reference limit		
		Serum folate ug/l	1.8 ug/L	(Range: 3.1 - 17.5)
01-Nov-2018	Examination	Haemoglobin estimation: Below low reference limit		
		Haemoglobin estimation	105 g/L	(Range: 120 - 160)
01-Nov-2018	Examination	Mean corpusc. haemoglobin(MCH): Above high reference limit		
		Mean corpusc. haemoglobin(MCH)	37.9 pg	(Range: 27 - 32)
01-Nov-2018	Examination	Mean corpusc. Hb. conc. (MCHC): Below low reference limit		
		Mean corpusc. Hb. conc. (MCHC)	306 g/L	(Range: 320 - 360)
01-Nov-2018	Examination	Mean corpuscular volume (MCV)fl: Above high reference limit		
		Mean corpuscular volume (MCV) fl	123.9 fL	(Range: 85 - 105)
01-Nov-2018	Examination	Monocyte countx10⁹/L:		
		Monocyte count x10 ⁹ /L	0.3 10 ⁹ /L	(Range: 0.2 - 0.8)
01-Nov-2018	Examination	Neutrophil countx10⁹/L:		
		Neutrophil count x10 ⁹ /L	7.1 10 ⁹ /L	(Range: 2 - 7.5)
01-Nov-2018	Examination	Platelet countx10⁹/L: Above high reference limit		
		Platelet count x10 ⁹ /L	569 10 ⁹ /L	(Range: 150 - 400)
01-Nov-2018	Examination	Red blood cell (RBC) countx10¹²/L: Below low reference limit		
		Red blood cell (RBC) count x10 ¹² /L	2.76 10 ¹² /L	(Range: 3.8 - 4.8)
01-Nov-2018	Examination	Total white cell countx10⁹/L:		
		Total white cell count x10 ⁹ /L	10.6 10 ⁹ /L	(Range: 4 - 11)
01-Nov-2018	Examination	Lymphocyte countx10⁹/L:		
		Lymphocyte count x10 ⁹ /L	3 10 ⁹ /L	(Range: 1.5 - 4)
01-Nov-2018	Examination	B12/folate level<none>:		
		B12/folate level <none>		(No range available)
01-Nov-2018	Examination	Full blood count - FBC<none>:		
		Full blood count - FBC <none>		(No range available)
01-Nov-2018	Examination	Haematocrit: Below low reference limit		
		Haematocrit	0.342 ratio	(Range: 0.37 - 0.47)
01-Nov-2018	Examination	Basophil countx10⁹/L:		
		Basophil count x10 ⁹ /L	0 10 ⁹ /L	(No range available)

01-Nov-2018 Dr Deepa Sanu Surgery consultation

Administration Seen in GP's surgery she is looking and feeling much better, bloods done to investigate macrocytosis, xray (P3) reveals ? infection, will repeat xray in 6 weeks time, is all fine will refer resp fro clubbing

27-Oct-2018 Dr Deepa Sanu Results recording

26-Oct-2018	Examination	Blood film microscopy Raised MCV. ?Liver/thyroid function.? Culpable drugs. Mild thrombocytosis ? reactiveAnaemia ? b12/folate	
26-Oct-2018	Examination	Blood film microscopy Raised MCV. ?Liver/thyroid function.? Culpable drugs. Mild thrombocytosis ? reactiveAnaemia ? b12/folate:	
		Blood film microscopy Raised MCV. ?Liver/thyroid function.? Culpable drugs. Mild thrombocytosis ? reactiveAnaemia ? b12/folate	(No range available)

27-Oct-2018 Dr Deepa Sanu Results recording

26-Oct-2018	Examination	Serum albumin	31 g/L	
26-Oct-2018	Examination	Serum alkaline phosphatase U/L	80 U/L	
26-Oct-2018	Examination	Serum alanine aminotransferase level U/L	Serum ALT level - 18 U/L	
26-Oct-2018	Examination	Serum total bilirubin level	14 umol/L	
26-Oct-2018	Examination	Serum calcium	2.12 mmol/L	
26-Oct-2018	Examination	Corrected serum calcium level	2.22 mmol/L	
26-Oct-2018	Examination	Serum creatinine	52 umol/L	
26-Oct-2018	Examination	Serum potassium	4.2 mmol/L	
26-Oct-2018	Examination	Serum sodium	140 mmol/L	
26-Oct-2018	Examination	Bone profile <none>		
26-Oct-2018	Examination	Liver function test <none>		
26-Oct-2018	Examination	Plasma C reactive protein	132 mg/L	
26-Oct-2018	Examination	Biochemical test <none>		
26-Oct-2018	Examination	Acute kidney injury warning stage AKI warning stage - Not detected: but may not exclude AKI in all cases		
26-Oct-2018	Examination	GFR calculated abbreviated MDRD GFR calculated	60 mL/min	
26-Oct-2018	Examination	abbreviatd MDRD - GFR calculated abbreviated MDRD adj for African Americ orign GFR calctd abbtD MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA	mL/min	
26-Oct-2018	Examination	Serum albumin: Below low reference limit		
26-Oct-2018	Examination	Serum albumin	31 g/L	(Range: 35 - 50)
26-Oct-2018	Examination	Serum alkaline phosphatase U/L:		
26-Oct-2018	Examination	Serum alkaline phosphatase U/L	80 U/L	(Range: 30 - 130)
26-Oct-2018	Examination	Serum alanine aminotransferase level Serum ALT level - U/L:		
26-Oct-2018	Examination	Serum alanine aminotransferase level Serum ALT level - 18 U/L		(Range: 5 - 55)
26-Oct-2018	Examination	Serum total bilirubin level:		
26-Oct-2018	Examination	Serum total bilirubin level	14 umol/L	(No range available)
26-Oct-2018	Examination	Serum calcium:		
26-Oct-2018	Examination	Serum calcium	2.12 mmol/L	(Range: 2.1 - 2.55)
26-Oct-2018	Examination	Corrected serum calcium level:		
26-Oct-2018	Examination	Corrected serum calcium level	2.22 mmol/L	(Range: 2.1 - 2.55)
26-Oct-2018	Examination	Serum creatinine:		
26-Oct-2018	Examination	Serum creatinine	52 umol/L	(Range: 44 - 80)
26-Oct-2018	Examination	Serum potassium:		
26-Oct-2018	Examination	Serum potassium	4.2 mmol/L	(Range: 3.5 - 5.3)
26-Oct-2018	Examination	Serum sodium:		
26-Oct-2018	Examination	Serum sodium	140 mmol/L	(Range: 133 - 146)
26-Oct-2018	Examination	Bone profile<none>:		
26-Oct-2018	Examination	Bone profile <none>		(No range available)
26-Oct-2018	Examination	Liver function test<none>:		
26-Oct-2018	Examination	Liver function test <none>		(No range available)
26-Oct-2018	Examination	Plasma C reactive protein: Above high reference limit		
26-Oct-2018	Examination	Plasma C reactive protein	132 mg/L	(No range available)
26-Oct-2018	Examination	Biochemical test<none>:		
26-Oct-2018	Examination	Biochemical test <none>		(No range available)
26-Oct-2018	Examination	Acute kidney injury warning stage AKI warning stage - Not detected: but may not exclude AKI in all cases:		
26-Oct-2018	Examination	Acute kidney injury warning stage AKI warning stage - Not detected: but may not exclude AKI in all cases		(No range available)
26-Oct-2018	Examination	GFR calculated abbreviated MDRD GFR calculated abbreviatd MDRD -:		
26-Oct-2018	Examination	GFR calculated abbreviated MDRD GFR calculated	60 mL/min	(No range available)
26-Oct-2018	Examination	abbreviatd MDRD - GFR calculated abbreviated MDRD adj for African Americ orign GFR calctd abbtD MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA:		
26-Oct-2018	Examination	GFR calculated abbreviated MDRD adj for African Americ orign GFR calctd abbtD MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA	mL/min	(No range available)

27-Oct-2018 Dr Deepa Sanu Results recording

26-Oct-2018	Examination	Eosinophil count x10 ⁹ /L	0.06 10 ⁹ /L	
26-Oct-2018	Examination	Haemoglobin estimation	105 g/L	
26-Oct-2018	Examination	Mean corpusc. haemoglobin(MCH)	38.1 pg	
26-Oct-2018	Examination	Mean corpusc. Hb. conc. (MCHC)	307 g/L	
26-Oct-2018	Examination	Mean corpuscular volume (MCV) fl	124 fL	
26-Oct-2018	Examination	Monocyte count x10 ⁹ /L	0.3 10 ⁹ /L	
26-Oct-2018	Examination	Neutrophil count x10 ⁹ /L	6.7 10 ⁹ /L	
26-Oct-2018	Examination	Platelet count x10 ⁹ /L	464 10⁹/L	
26-Oct-2018	Examination	Red blood cell (RBC) count x10 ¹² /L	2.75 10¹²/L	
26-Oct-2018	Examination	Total white cell count x10 ⁹ /L	10.8 10 ⁹ /L	
26-Oct-2018	Examination	Lymphocyte count x10 ⁹ /L	3.6 10 ⁹ /L	
26-Oct-2018	Examination	Full blood count - FBC <none>		
26-Oct-2018	Examination	Haematocrit	0.341 ratio	
26-Oct-2018	Examination	Basophil count x10 ⁹ /L	0 10 ⁹ /L	
26-Oct-2018	Examination	Eosinophil countx10⁹/L:		
		Eosinophil count x10 ⁹ /L	0.06 10 ⁹ /L	(No range available)
26-Oct-2018	Examination	Haemoglobin estimation: Below low reference limit		
		Haemoglobin estimation	105 g/L	(Range: 120 - 160)
26-Oct-2018	Examination	Mean corpusc. haemoglobin(MCH): Above high reference limit		
		Mean corpusc. haemoglobin(MCH)	38.1 pg	(Range: 27 - 32)
26-Oct-2018	Examination	Mean corpusc. Hb. conc. (MCHC): Below low reference limit		
		Mean corpusc. Hb. conc. (MCHC)	307 g/L	(Range: 320 - 360)
26-Oct-2018	Examination	Mean corpuscular volume (MCV)fl: Above high reference limit		
		Mean corpuscular volume (MCV) fl	124 fL	(Range: 85 - 105)
26-Oct-2018	Examination	Monocyte countx10⁹/L:		
		Monocyte count x10 ⁹ /L	0.3 10 ⁹ /L	(Range: 0.2 - 0.8)
26-Oct-2018	Examination	Neutrophil countx10⁹/L:		
		Neutrophil count x10 ⁹ /L	6.7 10 ⁹ /L	(Range: 2 - 7.5)
26-Oct-2018	Examination	Platelet countx10⁹/L: Above high reference limit		
		Platelet count x10 ⁹ /L	464 10⁹/L	(Range: 150 - 400)
26-Oct-2018	Examination	Red blood cell (RBC) countx10¹²/L: Below low reference limit		
		Red blood cell (RBC) count x10 ¹² /L	2.75 10¹²/L	(Range: 3.8 - 4.8)
26-Oct-2018	Examination	Total white cell countx10⁹/L:		
		Total white cell count x10 ⁹ /L	10.8 10 ⁹ /L	(Range: 4 - 11)
26-Oct-2018	Examination	Lymphocyte countx10⁹/L:		
		Lymphocyte count x10 ⁹ /L	3.6 10 ⁹ /L	(Range: 1.5 - 4)
26-Oct-2018	Examination	Full blood count - FBC<none>:		
		Full blood count - FBC <none>		(No range available)
26-Oct-2018	Examination	Haematocrit: Below low reference limit		
		Haematocrit	0.341 ratio	(Range: 0.37 - 0.47)
26-Oct-2018	Examination	Basophil countx10⁹/L:		
		Basophil count x10 ⁹ /L	0 10 ⁹ /L	(No range available)

26-Oct-2018 Mrs Clare Dow Surgery consultation

Administration Consent given for communication by SMS text messaging (P3)

26-Oct-2018 Ms Janice Birse Administration**25-Oct-2018 Dr Deepa Sanu Surgery consultation**

Administration Seen in GP's surgery cough for the past 2 weeks, minimal phlegm, poorly mobile due to pain in her back, copd/asthma, smoker, o/e HR 120/minsats 90% in air, chest biobasal crepts, both hand fingers severely clubbed, for amoxicillin, will investigate with bloods and Xray, review 1 week (P3)

25-Oct-2018 Dr Kate Macdonald Surgery consultation

Administration Telephone triage encounter Cough for 2 weeks, no coloured sputum - on qvar on rpt (known asthma) but I see she has not ordered for some time. Feels tight chested - for rv today and advice re inh/meds with thanks (P3)

17-Oct-2018 Mr Russell Hale Administration

Administration Influenza vaccination invitation letter sent invited to Main Flu Clinic on 03/11@0800-1300 (P7)

02-Oct-2018 Miss Jill Rowan Administration**03-Sept-2018 Miss Jill Rowan Administration****20-Aug-2018 Miss Jill Rowan Administration****08-Aug-2018 Miss Jill Rowan Administration**

02-Aug-2018 Miss Jill Rowan Administration

05-July-2018 Miss Jill Rowan Administration

04-Jun-2018 Miss Jill Rowan Administration

09-May-2018 Miss Jill Rowan Administration

11-Apr-2018 Miss Jill Rowan Administration

15-Mar-2018 Miss Jill Rowan Administration

15-Feb-2018 Mr Russell Hale Administration

Administration Asthma monitor 1st letter for Interim review
(P7)

15-Feb-2018 Mr Russell Hale Mail to patient

15-Feb-2018 Miss Jill Rowan Administration

15-Feb-2018 Dr Kate Macdonald Surgery consultation

02-Feb-2018 Dr Calum Paton Surgery consultation

Administration Consultation discussed recent letter from Pain clinic -
(P3) start initially with capsaicin cream and review in 2/52 with
possible up titration to capsaicin 0.075% if required

01-Feb-2018 Dr Calum Paton Surgery consultation

Administration Medication review

19-Jan-2018 Miss Jill Rowan Administration

12-Jan-2018 Mrs Karen Cheghall Surgery consultation

Administration Letter encounter to patient to make app Dr P re hosp
(P3) letter.

28-Dec-2017 Miss Jill Rowan Administration

06-Dec-2017 Miss Jill Rowan Administration

10-Nov-2017 Miss Jill Rowan Administration

08-Nov-2017 Mrs Ann Murray Administration

Intervention Referral for further care . Recipient: Ninewells department of Pain Clinic; Referral Type: Out Patient;
Sender: Dr Calum Paton; Reason: Referral for further care; Referral Status: Referred
Administration Scanned Document
SCI Referral Letter :

25-Oct-2017 Dr Calum Paton Surgery consultation

Administration Consultation ongoing low back pain which is not settling
(P3) at present - note on top dose of gabapentin - reassured
recent xrays of spine - no changes - for referral to pain
clinic sore knee anteriorly full movement reassured - for
ibuprofen and review as required

17-Oct-2017 Mrs Edna Martin Surgery consultation

03-Oct-2017 Mr Russell Hale Administration

Administration Influenza vaccination invitation first letter sent sent via
(P7) Docmail. For Main Clinic > 28/10 @0900-1300.

18-Sept-2017 Dr C Locum Administration

Administration Well adult monitor.admin.NOS Added by Keep Well
(P3) Team

18-Sept-2017 Miss Jill Rowan Administration**01-Sept-2017 Mr Russell Hale Administration**

Administration Declined consent for short message service text
(P9) messaging SMS Decline code entered as patient has not
explicitly consented.

23-Aug-2017 Miss Jill Rowan Administration**02-Aug-2017 Dr Calum Paton Surgery consultation**

Administration Consultation discussed recent xray results - advised that
(P3) facet joint degeneration at lumbar spine no changed and
some degeneration at C2/3 level - try ralvo patches to see
if any improvement in pain control

02-Aug-2017 Mrs Catriona Baldie Surgery consultation

Intervention Asthma limits walking up hills or stairs
Management Asthma follow-up Finding addition of qvar beneficial - PF
has improved - hasn't needed SABA since started it
whereas before was using approx bd. Mdi tech a bit hit or
miss - inhaling before depressing cannister - hasn't been
using aerochamber as directed - went over mdi tech alone
- improved but advised if feels not getting it to go back to
using spacer. Will review again in 6/12.
Examination Peak exp. flow rate: PEFR/PFR Previous Best Ever =, 440 L/min
Predicted = .
Diagnosis Asthma causes night time symptoms 1 to 2 times per week
(P3)
Examination Asthma never causes daytime symptoms
Examination O/E - weight 88 Kg
Examination Body Mass Index 34.3
Examination **Peak exp. flow rate: PEFR/PFR** Previous Best Ever =, Predicted = .:
Peak exp. flow rate: PEFR/PFR Previous Best Ever =, 440 L/min (No range available)
Predicted = .

14-July-2017 Mrs Edna Martin Surgery consultation**13-July-2017 Dr Calum Paton Surgery consultation**

Administration Consultation still has continued pain in back with spasms
(P3) - did not tolerate diclofenac - for further c spine and
lumbar spine films and review with results

05-July-2017 Mrs Catriona Baldie Third Party Consultation

Examination Lung function testing done
Examination Forced expired volume in 1 second 2.39 L
Examination Percent predicted FEV1 95 %
Examination FEV1/FVC percent 82 %
Examination Lung vital capacity 2.39 L
Administration Scanned Document
Spirometry : Spirometry Test, 05/07/2017 10:58
Examination FEV1/VC percent 100 %
(P3)
Diagnosis Spirometric lung age 53 years
(P3)
Examination **Lung function testing done:**
Lung function testing done (No range available)
Examination **Forced expired volume in 1 second:**
Forced expired volume in 1 second 2.39 L (No range available)
Examination **Percent predicted FEV1:**
Percent predicted FEV1 95 % (No range available)
Examination **FEV1/FVC percent:**
FEV1/FVC percent 82 % (No range available)
Examination **Lung vital capacity:**
Lung vital capacity 2.39 L (No range available)

05-July-2017 Mrs Catriona Baldie Surgery consultation

Intervention	Health education - chronic obstructive pulmonary disease	
Intervention	Smoking cessation advice	
Examination	Inhaler technique - moderate	
Symptom (P3)	No cough	
Symptom (P3)	Sputum - symptom None.	
Symptom (P3)	Nocturnal cough / wheeze Wheezes through the night.	
Symptom (P3)	MRC Breathlessness Scale: grade 3	
Symptom (P3)	Ankle swelling Slight on the (L) - GP aware.	
Diagnosis (P3)	Nondependent cannabis abuse On + off over the years.	
Examination (P3)	Pack years 30	
Diagnosis (P3)	Number of COPD exacerbations in past year 0	
Diagnosis (P3)	Emergency COPD admission since last appointment 0	
Intervention (P3)	Drug compliance good Using SABA 2 puffs approx bd.	
Diagnosis (P3)	Initial resp. assessment Attended for repeat spirometry - last done in 2015 when was essentially normal with 270mls reversibility. Post B2 spirometry performed - normal. SPFs ranging from 310-410 L/min with one blow at 470 L/min - 310-410 = 24% variability while including the 470 blow would = 35% variability. In view of lung tests, symptoms and history, would confirm diagnosis of asthma. In view of daily SABA usage add in ICS as qvar 100mcg mdi 1 puff bd with aerochamber and R 4/52.	
Diagnosis (P1)	Asthma	
Examination	Cigarette smoker roll-ups.	10 / / cigarettes / cigars / tobacco
Examination	Oxygen saturation at periphery at rest	98 %
Diagnosis	Asthma	
Examination	Oxygen saturation at periphery at rest:	
	Oxygen saturation at periphery at rest	98 % (No range available)

21-Jun-2017 Mrs Catriona Baldie Surgery consultation

Diagnosis (P3)	Initial resp. assessment Very confusing consultation. According to records Audra was assessed in 7/2015. It was thought her spirometry and symptoms were more in keeping with asthma. She was prescribed salamol easi-breathe and asked to record serial PFs and to return with diary to see Dr ***** 2/52 later. She never came back. Since then there have been 29 scripts issued equating to 54 inhalers but Audra was adamant that she was only assessed a couple of months ago and only got inhaler then! Appt. date and date stamp on spirometry all confirm this was done nearly 2 years ago! She says that she has hardly used her salamol but that her ***** Cally uses them. According to Cally's record she has not attended asthma clinic since 2007 and has been getting x2 salamols the same time as ***** which could equate to Cally using x4 SABAs a month. Asked if Audra doesn't need them why does she keep ordering them every month - she says the chemist orders for her. Advised Cally should not be using her inhalers and she should inform the chemist if she doesn't need them otherwise if Cally hadn't been using them she would have ended up with a stockpile.. ***** says reason Cally has never attended is because she works from 2-10pm in chip shop and that is when asthma appt.s are available. However she does not work Mon or Tues so doesn't really wash. I have arranged an appointment for Cally and Audra to come and see me in 2/52 and have asked them both to do PF readings. I have advised that if Cally does not attend then her SABA may be stopped. Audra eventually conceded that it may have been as long as 2yrs ago since she was assessed but admitted her memory is poor.
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21-Jun-2017 Dr Stephen Gardiner Administration

20-Jun-2017 Miss Jill Rowan Administration

19-Jun-2017 Dr Calum Paton Surgery consultation

Administration Consultation ongoing rt paravertebral muscle spasm and
(P3) rt trapezous spasm - reduced range of back movement
reassured - for diazepam and advised caution with
diclofenac - if upsets breathing then to stop - al; stop
robaxin at present

25-May-2017 Mrs Edna Martin Surgery consultation

24-May-2017 Mr Russell Hale Administration

24-May-2017 Miss Jill Rowan Administration

04-May-2017 Mrs Ann Murray Administration

26-Apr-2017 Miss Jill Rowan Administration

11-Apr-2017 Dr Deepa Sanu Results recording

28-Mar-2017 Examination Cervical smear: negative Infection Present : Fungal.
inflammatory

29-Mar-2017 Miss Jill Rowan Administration

28-Mar-2017 Mrs Catherine Houston Surgery consultation

Intervention	Smoking cessation advice , keen to stop but not yet	
Examination	O/E - blood pressure reading	142 / 80 mm Hg
Examination	Ca cervix - screen done , cervix visualised using medium long speculum	
Examination	Cigarette smoker , 10 roll ups per day	// cigarettes / cigars / tobacco units per week
Examination	Teetotaler	
Intervention	Smoking cessation advice	
Intervention	Health education offered	

01-Mar-2017 Miss Jill Rowan Administration

03-Feb-2017 Miss Jill Rowan Administration

12-Jan-2017 Dr Calum Paton Surgery consultation

Administration Medication review

10-Jan-2017 Miss Jill Rowan Administration

05-Jan-2017 Dr Deepa Sanu Surgery consultation

Diagnosis Patient reviewed thinks she has developed herpes zoster
(P3) down below, has had this before, for trial of aciclovir, also
swelling of feet, has had water tablets in the past which
has helped, trial of the same

15-Dec-2016 Miss Jill Rowan Administration

13-Dec-2016 Miss Jill Rowan Administration

18-Nov-2016 Miss Jill Rowan Administration

26-Oct-2016 Miss Jill Rowan Administration

05-Oct-2016 Miss Jill Rowan Administration

30-Sept-2016 Miss Jill Rowan Administration

01-Sept-2016 Ms Janice Birse Administration

31-Aug-2016 Dr Calum Paton Surgery consultation

Diagnosis (P3) Shingles on rt L3 dermatome - for aciclovir also has less swelling at ankles and oedema - for bendroflumazide instead of furosemide

31-Aug-2016 Miss Vanessa Taylor Other

Intervention (P3) Referral to pharmacist Do NOT prescribe as Cerazette, prescribe as generic. Cost savings efficiency.

31-Aug-2016 Mrs Edna Martin Administration

30-Aug-2016 Dr Calum Paton Results recording

29-Aug-2016 Examination	Eosinophil count $\times 10^9/L$	0.14 $10^9/L$	
29-Aug-2016 Examination	Haemoglobin estimation	125 g/L	
29-Aug-2016 Examination	Mean corpusc. haemoglobin(MCH)	35.1 pg	
29-Aug-2016 Examination	Mean corpusc. Hb. conc. (MCHC)	325 g/L	
29-Aug-2016 Examination	Mean corpuscular volume (MCV) fl	108 fL	
29-Aug-2016 Examination	Monocyte count $\times 10^9/L$	0.6 $10^9/L$	
29-Aug-2016 Examination	Neutrophil count $\times 10^9/L$	7.6 $10^9/L$	
29-Aug-2016 Examination	Platelet count $\times 10^9/L$	469 $10^9/L$	
29-Aug-2016 Examination	Red blood cell (RBC) count $\times 10^{12}/L$	3.57 $10^{12}/L$	
29-Aug-2016 Examination	Total white cell count $\times 10^9/L$	12.6 $10^9/L$	
29-Aug-2016 Examination	Lymphocyte count $\times 10^9/L$	4.2 $10^9/L$	
29-Aug-2016 Examination	Full blood count - FBC <none>		
29-Aug-2016 Examination	Haematocrit	0.386 ratio	
29-Aug-2016 Examination	Basophil count $\times 10^9/L$	0.1 $10^9/L$	
29-Aug-2016 Examination	Eosinophil count $\times 10^9/L$:		
	Eosinophil count $\times 10^9/L$	0.14 $10^9/L$	(No range available)
29-Aug-2016 Examination	Haemoglobin estimation:		
	Haemoglobin estimation	125 g/L	(Range: 120 - 160)
29-Aug-2016 Examination	Mean corpusc. haemoglobin(MCH): Above high reference limit		
	Mean corpusc. haemoglobin(MCH)	35.1 pg	(Range: 27 - 32)
29-Aug-2016 Examination	Mean corpusc. Hb. conc. (MCHC):		
	Mean corpusc. Hb. conc. (MCHC)	325 g/L	(Range: 320 - 360)
29-Aug-2016 Examination	Mean corpuscular volume (MCV)fl: Above high reference limit		
	Mean corpuscular volume (MCV) fl	108 fL	(Range: 85 - 105)
29-Aug-2016 Examination	Monocyte count $\times 10^9/L$:		
	Monocyte count $\times 10^9/L$	0.6 $10^9/L$	(Range: 0.2 - 0.8)
29-Aug-2016 Examination	Neutrophil count $\times 10^9/L$: Above high reference limit		
	Neutrophil count $\times 10^9/L$	7.6 $10^9/L$	(Range: 2 - 7.5)
29-Aug-2016 Examination	Platelet count $\times 10^9/L$: Above high reference limit		
	Platelet count $\times 10^9/L$	469 $10^9/L$	(Range: 150 - 400)
29-Aug-2016 Examination	Red blood cell (RBC) count $\times 10^{12}/L$: Below low reference limit		
	Red blood cell (RBC) count $\times 10^{12}/L$	3.57 $10^{12}/L$	(Range: 3.8 - 4.8)
29-Aug-2016 Examination	Total white cell count $\times 10^9/L$: Above high reference limit		
	Total white cell count $\times 10^9/L$	12.6 $10^9/L$	(Range: 4 - 11)
29-Aug-2016 Examination	Lymphocyte count $\times 10^9/L$: Above high reference limit		
	Lymphocyte count $\times 10^9/L$	4.2 $10^9/L$	(Range: 1.5 - 4)
29-Aug-2016 Examination	Full blood count - FBC<none>:		
	Full blood count - FBC <none>		(No range available)
29-Aug-2016 Examination	Haematocrit:		
	Haematocrit	0.386 ratio	(Range: 0.37 - 0.47)
29-Aug-2016 Examination	Basophil count $\times 10^9/L$:		
	Basophil count $\times 10^9/L$	0.1 $10^9/L$	(No range available)

30-Aug-2016 Dr Calum Paton Results recording

29-Aug-2016	Examination	Serum albumin	38 g/L	
29-Aug-2016	Examination	Serum alkaline phosphatase U/L	88 U/L	
29-Aug-2016	Examination	Serum alanine aminotransferase level U/L	Serum ALT level - 36 U/L	
29-Aug-2016	Examination	Serum total bilirubin level	8 umol/L	
29-Aug-2016	Examination	Serum creatinine	62 umol/L	
29-Aug-2016	Examination	Serum FSH level U/L	9.2 U/L	
29-Aug-2016	Examination	Serum LH level U/L	6 U/L	
29-Aug-2016	Examination	Serum potassium	4.1 mmol/L	
29-Aug-2016	Examination	Serum sodium	140 mmol/L	
29-Aug-2016	Examination	Serum TSH level mU/L	1.95 mU/L	
29-Aug-2016	Examination	Plasma glucose level	5.1 mmol/L	
29-Aug-2016	Examination	Liver function test <none>		
29-Aug-2016	Examination	Biochemical test <none>		
29-Aug-2016	Examination	Acute kidney injury warning stage AKI warning stage - Not detected: but may not exclude AKI in all cases		
29-Aug-2016	Examination	GFR calculated abbreviated MDRD GFR calculated	60 mL/min	
29-Aug-2016	Examination	abbreviatd MDRD - GFR calculated abbreviated MDRD adj for African Americ orign GFR calctd abbtdd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA	mL/min	
29-Aug-2016	Examination	Serum albumin:		
29-Aug-2016	Examination	Serum albumin	38 g/L	(Range: 35 - 50)
29-Aug-2016	Examination	Serum alkaline phosphataseU/L:		
29-Aug-2016	Examination	Serum alkaline phosphatase U/L	88 U/L	(Range: 30 - 130)
29-Aug-2016	Examination	Serum alanine aminotransferase level Serum ALT level - U/L:		
29-Aug-2016	Examination	Serum alanine aminotransferase level Serum ALT level - 36 U/L		(Range: 5 - 55)
29-Aug-2016	Examination	Serum total bilirubin level:		
29-Aug-2016	Examination	Serum total bilirubin level	8 umol/L	(No range available)
29-Aug-2016	Examination	Serum creatinine:		
29-Aug-2016	Examination	Serum creatinine	62 umol/L	(Range: 44 - 80)
29-Aug-2016	Examination	Serum FSH levelU/L:		
29-Aug-2016	Examination	Serum FSH level U/L	9.2 U/L	(Range: 1.1 - 9.6)
29-Aug-2016	Examination	Serum LH levelU/L:		
29-Aug-2016	Examination	Serum LH level U/L	6 U/L	(Range: 0.8 - 12)
29-Aug-2016	Examination	Serum potassium:		
29-Aug-2016	Examination	Serum potassium	4.1 mmol/L	(Range: 3.5 - 5.3)
29-Aug-2016	Examination	Serum sodium:		
29-Aug-2016	Examination	Serum sodium	140 mmol/L	(Range: 133 - 146)
29-Aug-2016	Examination	Serum TSH levelmU/L:		
29-Aug-2016	Examination	Serum TSH level mU/L	1.95 mU/L	(Range: 0.4 - 4)
29-Aug-2016	Examination	Plasma glucose level:		
29-Aug-2016	Examination	Plasma glucose level	5.1 mmol/L	(Range: 3.3 - 5.8)
29-Aug-2016	Examination	Liver function test<none>:		
29-Aug-2016	Examination	Liver function test <none>		(No range available)
29-Aug-2016	Examination	Biochemical test<none>:		
29-Aug-2016	Examination	Biochemical test <none>		(No range available)
29-Aug-2016	Examination	Acute kidney injury warning stage AKI warning stage - Not detected: but may not exclude AKI in all cases:		
29-Aug-2016	Examination	Acute kidney injury warning stage AKI warning stage - Not detected: but may not exclude AKI in all cases		(No range available)
29-Aug-2016	Examination	GFR calculated abbreviated MDRD GFR calculated abbreviatd MDRD -:		
29-Aug-2016	Examination	GFR calculated abbreviated MDRD GFR calculated	60 mL/min	(No range available)
29-Aug-2016	Examination	abbreviatd MDRD - GFR calculated abbreviated MDRD adj for African Americ orign GFR calctd abbtdd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA:		
29-Aug-2016	Examination	GFR calculated abbreviated MDRD adj for African Americ orign GFR calctd abbtdd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA	mL/min	(No range available)

29-Aug-2016 Mrs Karen Cheghall Surgery consultation**24-Aug-2016 Dr Calum Paton Surgery consultation**

Administration Consultation ankle oedema with pitting - hasnt had furosemide for a feqw days - ankles swollen but has slight pitting present - for furosemide and bloods and reveiw in 1/52

08-Aug-2016 Ms Janice Birse Administration**03-Aug-2016 Dr Calum Paton Surgery consultation**

Administration Medication review

01-Aug-2016 Miss Jill Rowan Administration**27-July-2016 Dr Stephen Gardiner Administration**

11-July-2016 Miss Jill Rowan Administration**06-July-2016 Dr Michael Hayes Surgery consultation**

Intervention (P3) Had a chat to patient .. pain improved tho a bit shakier with Methocarbamol. Try ease back. taking Furosemide most days for fluid retention. so need U&E check & BP.NB could qwe also do FSH & LH to check for menopause. ? thanks

30-Jun-2016 Miss Vanessa Taylor Other

Administration (P3) Referred by pharmacist Review Tramadol MR please. Pt is already taking Methocarbamol 4 x day so may manage tramadol qds also. easier to adjust dose and consider down titration, cost saving initiative also.

22-Jun-2016 Dr Michael Hayes Surgery consultation

Intervention (P3) Had a chat to patient ..Bloods ok. Ok accept likely some fluid retention. Try Furosemide 20mg if needed. If regular, then repeat U&E.Also change antispasmodic..Try Methocarb.REvNB worried about *****

20-Jun-2016 Miss Jill Rowan Administration**17-Jun-2016 Dr Margaretha Badenhorst Results recording**

16-Jun-2016	Examination	Serum creatinine	55 umol/L	
16-Jun-2016	Examination	Serum potassium	4.7 mmol/L	
16-Jun-2016	Examination	Serum sodium	139 mmol/L	
16-Jun-2016	Examination	Serum urea level	2.9 mmol/L	
16-Jun-2016	Examination	Urea and electrolytes	<none>	
16-Jun-2016	Examination	Acute kidney injury warning stage	AKI warning stage - Not detected: but may not exclude AKI in all cases	
16-Jun-2016	Examination	GFR calculated abbreviated MDRD	GFR calculated 60 mL/min	
16-Jun-2016	Examination	abbreviatd MDRD -		
16-Jun-2016	Examination	GFR calculated abbreviated MDRD adj for African Americ	mL/min	
		origin GFR calctd abbt MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA		
16-Jun-2016	Examination	Serum creatinine:		
		Serum creatinine	55 umol/L	(Range: 44 - 80)
16-Jun-2016	Examination	Serum potassium:		
		Serum potassium	4.7 mmol/L	(Range: 3.5 - 5.3)
16-Jun-2016	Examination	Serum sodium:		
		Serum sodium	139 mmol/L	(Range: 133 - 146)
16-Jun-2016	Examination	Serum urea level:		
		Serum urea level	2.9 mmol/L	(Range: 2.5 - 7.8)
16-Jun-2016	Examination	Urea and electrolytes<none>:		
		Urea and electrolytes <none>		(No range available)
16-Jun-2016	Examination	Acute kidney injury warning stage	AKI warning stage - Not detected: but may not exclude AKI in all cases:	
		Acute kidney injury warning stage	AKI warning stage - Not detected: but may not exclude AKI in all cases	(No range available)
16-Jun-2016	Examination	GFR calculated abbreviated MDRD	GFR calculated abbreviatd MDRD -:	
		GFR calculated abbreviated MDRD	GFR calculated 60 mL/min	(No range available)
16-Jun-2016	Examination	GFR calculated abbreviated MDRD adj for African Americ	GFR calctd abbt MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA:	
		GFR calculated abbreviated MDRD adj for African Americ	mL/min	(No range available)
		origin GFR calctd abbt MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA		

16-Jun-2016 Mrs Karen Cheghall Surgery consultation**01-Jun-2016 Dr Michael Hayes Surgery consultation**

Diagnosis (P3) Fluid retention ..episodic x 6/12. Related to Pre menstrual. Lowgrade UTI.Swelling ankles.For ABx, then U&E. May be renal ??

25-May-2016 Miss Vanessa Taylor Other

Intervention (P3) Medication change to generic

16-May-2016 Miss Jill Rowan Administration**25-Apr-2016 Miss Jill Rowan Administration**

06-Apr-2016 Miss Jill Rowan Administration

14-Mar-2016 Miss Jill Rowan Administration

02-Mar-2016 Mrs Edna Martin Surgery consultation

23-Feb-2016 Miss Jill Rowan Administration

10-Feb-2016 Miss Vanessa Taylor Other

Administration Referred by pharmacist please prescribe Cerazette
(P3) generically as desogestrel.

01-Feb-2016 Mrs Edna Martin Surgery consultation

19-Jan-2016 Mr S System Supervisor Administration

Administration Well adult monitor.admin.NOS Added by Keep Well
(P3) Team

11-Jan-2016 Miss Jill Rowan Administration

03-Dec-2015 Miss Jill Rowan Administration

09-Nov-2015 Miss Jill Rowan Administration

03-Nov-2015 Dr Christine Cormack Surgery consultation

Diagnosis Treatment dose changed Lots of side effects from
(P3) baclofen- drowsy,fatigued dizzy- all listed as SE s and
recently startedAdvised tot ry reducing in first instance
and then stopping if side effects persistAlso not - needs
repeat FBC- asked to attend ***** for this

29-Oct-2015 Mrs Alexis Macrae Surgery consultation

Intervention	Smoking cessation advice	
Examination	O/E - blood pressure reading	105 / 65 mm Hg
Symptom	Urinary symptoms for couple weeks, Dysuria especially	
(P3)	end of nocte, not repsonding to OTCh satchets. Chronic	
	back pain history and high doses of analgesia, been	
	discharged from pain clinic and didnt tolerate physio.	
	Routine appt with GP	
Examination	Cigarette smoker	// cigarettes / cigars /
		tobacco
Examination	Teetotaller	units per week

21-Oct-2015 Mrs Edna Martin Surgery consultation

29-Sept-2015 Mrs Edna Martin Surgery consultation

02-Sept-2015 Miss Jill Rowan Administration

11-Aug-2015 Miss Jill Rowan Administration

10-Aug-2015 Dr Calum Paton Surgery consultation

Administration Medication review

22-July-2015 Miss Amy Quinn Administration

Intervention Long acting reversible contraception leaflet given
(P3)

22-July-2015 Miss Jill Rowan Administration

10-July-2015 Mrs Olive Neave Other

Examination	Inhaler technique observed	Good	
Diagnosis	FH: Asthma	****, ****, ****	
Examination	FEV1 after bronchodilation	96 %	
Examination	FEV1 after bronchodilation	2.47 L	
Administration (P3)	Consultation Attends for Respiratory assessment. Complains of intermittent shortness of breath on exertion and wheeze at night for around 8 months. Symptoms variable. Notices aerosol sprays and temperature change trigger symptoms also. Symptoms resolve with Salbutamol inhaler. Suffers form hay fever. No childhood symptoms. ****, **** and **** all have Asthma. Smoking history of 30 pack years. Spirometry reveals reduced FVC therefore proceeded to reversibility post Salbutamol. Increase in FVC and FEV1 of 270mls therefore significant response to Salbutamol which although not diagnostic would suggest Asthma along wiht other clinical signs and history. She will keep a peak flow and symptom diary for 2 weeks then attend for review wiht Dr. ****. Spirometry screening		
Diagnosis (P3)			
Examination	Cigarette smoker	History of 30 pack years	10 // cigarettes / cigars / tobacco
Examination	Oxygen saturation at periphery		99 %
Intervention	Smoking cessation advice		
Intervention	Health education offered		
Examination	O/E - weight	82 Kg	
Examination	Body Mass Index	32	
Examination	O/E - height	1.6 m	
Examination	FEV1 after bronchodilation:		
	FEV1 after bronchodilation	96 %	(No range available)
Examination	FEV1 after bronchodilation:		
	FEV1 after bronchodilation	2.47 L	(No range available)
Examination	Oxygen saturation at periphery:		
	Oxygen saturation at periphery	99 %	(No range available)

10-July-2015 Mrs Olive Neave Other**02-July-2015 Mr Russell Hale Administration****25-Jun-2015 Miss Jill Rowan Administration****01-Jun-2015 Dr Kate Macdonald Surgery consultation**

Administration (P3) Seen in GP's surgery She has been getting sob on exertion and "wheezy" at night. Sputum but clear. Heavy smoker 20 roll ups per day. Nil on exam. FH of asthma. PF under predicted 417. Today PF 330. I have given her salamol as she has been using her dtrs easibreathe and for resp assessment. See for r/v with results.

29-May-2015 Miss Amy Quinn Administration

Administration (P3) Administration tried to call patient no answer and no facility to leave message. if she calls back can i please speak with her, thanks. Spoke with patient re Baclofen is taking 6 daily so have updated repeat with correct dose and removed wrong one as per dr b

28-May-2015 Dr Kate Macdonald Other

Administration Medication review

27-May-2015 Mrs Edna Martin Surgery consultation**05-May-2015 Miss Jill Rowan Administration****29-Apr-2015 Miss Jill Rowan Administration****01-Apr-2015 Miss Jill Rowan Administration****10-Mar-2015 Miss Jill Rowan Administration**

12-Feb-2015 Dr Margaretha Badenhorst Surgery consultation

Administration Consultation - ongoing back spasms despite huge
(P3) amount of meds - she still hasn't got to the physiotherapist yet - ? due to start next week. She still has scope to increase her baclofen tablets to 20 mg tds. (she doesn't thinks she would benefit from pregabalin)

11-Feb-2015 Miss Jill Rowan Administration**14-Jan-2015 Miss Jill Rowan Administration****29-Dec-2014 Dr Ruth Stevenson Surgery consultation**

Diagnosis Spasm of muscle
(P3)

16-Dec-2014 Miss Jill Rowan Administration**18-Nov-2014 Miss Jill Rowan Administration****04-Nov-2014 Miss Amy Quinn Administration**

28-Oct-2014 Diagnosis Total nail avulsion of both first toes
(P1)

22-Oct-2014 Mrs Edna Martin Surgery consultation**29-Sept-2014 Miss Jill Rowan Administration****24-Sept-2014 Miss Jill Rowan Administration****27-Aug-2014 Miss Jill Rowan Administration****15-Aug-2014 Dr B Locum Administration**

Administration Well adult monitor.admin.NOS Added by the Keep Well
(P3) Team

14-Aug-2014 Mrs Karen Cheghall Surgery consultation

Intervention Informed consent for procedure excision biopsy
(P3)

14-Aug-2014 Dr Ruth Stevenson Surgery consultation

Administration Minor surgery done - excision Sebaceous cyst from R
(P3) elbow. Lidocaine 1% with adrenaline 3mls injected. Cyst removed - burst on removal. 3 sutures placed to be kept in for 7 days and clean and dry. Fully consented and form signed. Advice re wound care.

Symptom Knee pain R side after kneeling last night - examined
(P3) and some minor swelling but painful over medial collateral ligament. Advised re exercises and self refer to physio - number given.

31-July-2014 Dr Ruth Stevenson Surgery consultation

Symptom Spasms - symptom
(P3)

Intervention Medication increased baclofen to 10mg TID - helping
(P3) spasms in muscles but effect wears off quickly - trial increased dose.

Examination O/E - skin cyst On R elbow - apt for removal given.
(P3)

30-July-2014 Mrs Edna Martin Surgery consultation**02-July-2014 Miss Jill Rowan Administration****04-Jun-2014 Miss Jill Rowan Administration**

30-May-2014 Dr Ruth Stevenson Surgery consultation

Intervention (P3) Medication started as per pain clinic recommendation - reduction in amitryptiline and baclofen for spasms. Will go next month for fitting of TENS machine.

17-May-2014 Dr Ruth Stevenson Results recording

16-May-2014	Examination	Serum albumin	36 g/L	
16-May-2014	Examination	Serum alkaline phosphatase U/L	82 U/L	
16-May-2014	Examination	Serum alanine aminotransferase level	Serum ALT level - 21 U/L	
16-May-2014	Examination	U/L		
16-May-2014	Examination	Serum total bilirubin level	6 umol/L	
16-May-2014	Examination	Serum calcium	2.15 mmol/L	
16-May-2014	Examination	Corrected serum calcium level	2.19 mmol/L	
16-May-2014	Examination	Serum cholesterol	5.55 mmol/L	
16-May-2014	Examination	Serum creatinine	55 umol/L	
16-May-2014	Examination	Serum HDL cholesterol level	0.95 mmol/L	
16-May-2014	Examination	Serum potassium	4.8 mmol/L	
16-May-2014	Examination	Serum sodium	141 mmol/L	
16-May-2014	Examination	Serum TSH level mU/L	1.3 mU/L	
16-May-2014	Examination	Serum urea level	3 mmol/L	
16-May-2014	Examination	Plasma glucose level	5.1 mmol/L	
16-May-2014	Examination	Bone profile <none>		
16-May-2014	Examination	Liver function test <none>		
16-May-2014	Examination	Urea and electrolytes <none>		
16-May-2014	Examination	GFR calculated abbreviated MDRD adj for African Americ origin GFR calctd abttd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA		
16-May-2014	Examination	Total cholesterol:HDL ratio <none>	ratio	
16-May-2014	Examination	Total cholesterol:HDL ratio .	5.8 ratio	
16-May-2014	Examination	GFR calculated abbreviated MDRD GFR calculated abbreviatd MDRD -	60 mL/min	
16-May-2014	Examination	Serum albumin:		
		Serum albumin	36 g/L	(Range: 35 - 50)
16-May-2014	Examination	Serum alkaline phosphatase U/L:		
		Serum alkaline phosphatase U/L	82 U/L	(Range: 30 - 130)
16-May-2014	Examination	Serum alanine aminotransferase level:	Serum ALT level - U/L:	
		Serum alanine aminotransferase level	Serum ALT level - 21 U/L	(Range: 5 - 55)
		U/L		
16-May-2014	Examination	Serum total bilirubin level:		
		Serum total bilirubin level	6 umol/L	(No range available)
16-May-2014	Examination	Serum calcium:		
		Serum calcium	2.15 mmol/L	(Range: 2.1 - 2.55)
16-May-2014	Examination	Corrected serum calcium level:		
		Corrected serum calcium level	2.19 mmol/L	(Range: 2.1 - 2.55)
16-May-2014	Examination	Serum cholesterol: Above high reference limit		
		Serum cholesterol	5.55 mmol/L	(No range available)
16-May-2014	Examination	Serum creatinine:		
		Serum creatinine	55 umol/L	(Range: 44 - 80)
16-May-2014	Examination	Serum HDL cholesterol level:		
		Serum HDL cholesterol level	0.95 mmol/L	(Range: 0.6 - 2.5)
16-May-2014	Examination	Serum potassium:		
		Serum potassium	4.8 mmol/L	(Range: 3.5 - 5.3)
16-May-2014	Examination	Serum sodium:		
		Serum sodium	141 mmol/L	(Range: 133 - 146)
16-May-2014	Examination	Serum TSH level mU/L:		
		Serum TSH level mU/L	1.3 mU/L	(Range: 0.4 - 4)
16-May-2014	Examination	Serum urea level:		
		Serum urea level	3 mmol/L	(Range: 2.5 - 7.8)
16-May-2014	Examination	Plasma glucose level:		
		Plasma glucose level	5.1 mmol/L	(Range: 3.3 - 5.8)
16-May-2014	Examination	Bone profile <none>:		
		Bone profile <none>		(No range available)
16-May-2014	Examination	Liver function test <none>:		
		Liver function test <none>		(No range available)
16-May-2014	Examination	Urea and electrolytes <none>:		
		Urea and electrolytes <none>		(No range available)
16-May-2014	Examination	GFR calculated abbreviated MDRD adj for African Americ origin GFR calctd abttd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA:		
		GFR calculated abbreviated MDRD adj for African Americ origin GFR calctd abttd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA		(No range available)
16-May-2014	Examination	Total cholesterol:HDL ratio <none>:		
		Total cholesterol:HDL ratio <none>	ratio	(No range available)
16-May-2014	Examination	Total cholesterol:HDL ratio .		
		Total cholesterol:HDL ratio .	5.8 ratio	(No range available)
16-May-2014	Examination	GFR calculated abbreviated MDRD GFR calculated abbreviatd MDRD -:		
		GFR calculated abbreviated MDRD GFR calculated abbreviatd MDRD -	60 mL/min	(No range available)

17-May-2014 Dr Ruth Stevenson Results recording

16-May-2014	Examination	Eosinophil count x10 ⁹ /L	0.16 10 ⁹ /L	
16-May-2014	Examination	Haemoglobin estimation	124 g/L	
16-May-2014	Examination	Mean corpusc. haemoglobin(MCH)	34.9 pg	
16-May-2014	Examination	Mean corpusc. Hb. conc. (MCHC)	314 g/L	
16-May-2014	Examination	Mean corpuscular volume (MCV) fl	111 fL	
16-May-2014	Examination	Monocyte count x10 ⁹ /L	0.6 10 ⁹ /L	
16-May-2014	Examination	Neutrophil count x10 ⁹ /L	5 10 ⁹ /L	
16-May-2014	Examination	Platelet count x10 ⁹ /L	429 10⁹/L	
16-May-2014	Examination	Red blood cell (RBC) count x10 ¹² /L	3.55 10¹²/L	
16-May-2014	Examination	Total white cell count x10 ⁹ /L	10 10 ⁹ /L	
16-May-2014	Examination	Lymphocyte count x10 ⁹ /L	4.2 10⁹/L	
16-May-2014	Examination	Full blood count - FBC <none>		
16-May-2014	Examination	Blood film microscopy Cells as counted with no significant morphological abnormality. The count may reflect co-morbidity. Please repeat in a few weeks to ensure resolution of changes. Sudhir TAURO. Consultant Haematologist.		
16-May-2014	Examination	Haematocrit	0.394 ratio	
16-May-2014	Examination	Basophil count x10 ⁹ /L	0.1 10 ⁹ /L	
16-May-2014	Examination	Eosinophil count x10 ⁹ /L:		
		Eosinophil count x10 ⁹ /L	0.16 10 ⁹ /L	(No range available)
16-May-2014	Examination	Haemoglobin estimation:		
		Haemoglobin estimation	124 g/L	(Range: 120 - 160)
16-May-2014	Examination	Mean corpusc. haemoglobin(MCH): Above high reference limit		
		Mean corpusc. haemoglobin(MCH)	34.9 pg	(Range: 27 - 32)
16-May-2014	Examination	Mean corpusc. Hb. conc. (MCHC): Below low reference limit		
		Mean corpusc. Hb. conc. (MCHC)	314 g/L	(Range: 320 - 360)
16-May-2014	Examination	Mean corpuscular volume (MCV) fl: Above high reference limit		
		Mean corpuscular volume (MCV) fl	111 fL	(Range: 85 - 105)
16-May-2014	Examination	Monocyte count x10 ⁹ /L:		
		Monocyte count x10 ⁹ /L	0.6 10 ⁹ /L	(Range: 0.2 - 0.8)
16-May-2014	Examination	Neutrophil count x10 ⁹ /L:		
		Neutrophil count x10 ⁹ /L	5 10 ⁹ /L	(Range: 2 - 7.5)
16-May-2014	Examination	Platelet count x10 ⁹ /L: Above high reference limit		
		Platelet count x10 ⁹ /L	429 10⁹/L	(Range: 150 - 400)
16-May-2014	Examination	Red blood cell (RBC) count x10 ¹² /L: Below low reference limit		
		Red blood cell (RBC) count x10 ¹² /L	3.55 10¹²/L	(Range: 3.8 - 4.8)
16-May-2014	Examination	Total white cell count x10 ⁹ /L:		
		Total white cell count x10 ⁹ /L	10 10 ⁹ /L	(Range: 4 - 11)
16-May-2014	Examination	Lymphocyte count x10 ⁹ /L: Above high reference limit		
		Lymphocyte count x10 ⁹ /L	4.2 10⁹/L	(Range: 1.5 - 4)
16-May-2014	Examination	Full blood count - FBC <none>:		
		Full blood count - FBC <none>		(No range available)
16-May-2014	Examination	Blood film microscopy Cells as counted with no significant morphological abnormality. The count may reflect co-morbidity. Please repeat in a few weeks to ensure resolution of changes. Sudhir TAURO. Consultant Haematologist.		
		Blood film microscopy Cells as counted with no significant morphological abnormality. The count may reflect co-morbidity. Please repeat in a few weeks to ensure resolution of changes. Sudhir TAURO. Consultant Haematologist.		(No range available)
16-May-2014	Examination	Haematocrit:		
		Haematocrit	0.394 ratio	(Range: 0.37 - 0.47)
16-May-2014	Examination	Basophil count x10 ⁹ /L:		
		Basophil count x10 ⁹ /L	0.1 10 ⁹ /L	(No range available)

16-May-2014 Mrs Karen Cheghall Surgery consultation**16-May-2014 Dr Ruth Stevenson Surgery consultation**

Examination	O/E - blood pressure reading	136 / 84 mm Hg
Diagnosis (P3)	CLASP ankle swelling score bilaterally. BP good at 136/84. No significant pedal oedema noted today. Has put on weight - discussed this. For bloods. Lowered dose gabapentin worsened pain - has pain clinic apt next month. Increase back to 1200 qid. r/v 2-3/52.	

07-May-2014 Dr B Locum Surgery consultation**17-Apr-2014 Dr Ruth Stevenson Surgery consultation**

Diagnosis (P3)	Neuropathic pain
Intervention (P3)	Medication decreased Gabapentin reduced to 900mg TID as not helping back pain and feels it is causing muscle spasms. Reassured by MRI - await pain clinic review - may try physio - self referral number given.

08-Apr-2014 Miss Jill Rowan Administration**31-Mar-2014 Miss Jill Rowan Administration**

17-Mar-2014 Dr Ruth Stevenson Referral Letter

Administration Scanned Document
SCI Referral Letter :

14-Mar-2014 Miss Amy Quinn Administration**13-Mar-2014 Mrs Ann Murray Administration**

Intervention Referral for further care . *Recipient: Ninewells department of Pain Clinic; Referral Type: Out Patient;*
Sender: Dr Ruth Stevenson; Reason: Referral for further care; Referral Status: Referred
Administration Administration - Letter to Dundee North Law
(P3)

13-Mar-2014 Miss Jill Rowan Administration**05-Mar-2014 Dr Calum Paton Surgery consultation**

Administration Medication review takes 4 tabs 3 times daily gabapentin
- increase quantity to 336

04-Mar-2014 Dr Ruth Stevenson Surgery consultation**03-Mar-2014 Miss Amy Quinn Administration****21-Feb-2014 Mrs Alexis Macrae Surgery consultation**

Administration Seen by practice nurse measured for walking stick,
(P3) 89cm - form completed

20-Feb-2014 Dr Ruth Stevenson Surgery consultation

Intervention Medication increased Gabapentin increased to 1200mg
(P3) TID. Will refer to pain clinic - refer CT back.
Symptom Back pain without radiation NOS discussed XRAY -
(P3) unsure re next step - will refer for CT as suggested and
pain clinic.

18-Feb-2014 Dr Margaretha Badenhorst Surgery consultation

Administration Consultation - she has come to discuss the result of her
(P3) Xray which shows facet joint pathology in the lumbar
spine. She seems really concerned about her benefits
being cut and asked about a letter that Dr RS would write
to explain her situation- no indication that his was
requested in notes. She will make appt with Dr RS.

11-Feb-2014 Miss Jill Rowan Administration**07-Feb-2014 Dr Ruth Stevenson Surgery consultation**

Diagnosis Patient reviewed has to go on job seekers - wants letter
(P3) to say how much worse she is - stiffly walking today.
Wants letter within 2 weeks - have said this is not possible
as I go away on holiday. Will do when I get back.
Increased gabapentin too much - advised strongly re
taking over prescribed dose. Diclofenac added in.

27-Jan-2014 Dr Ruth Stevenson Surgery consultation

Symptom (P3) C/O - upper back ache and aches and pains worse with
bad weather. Normal analgesia not helping - could try
increasing gabapentin up - taking 6 daily - increase to 3
TID. Only short term measure - can reduce later.
Intervention Had a chat to patient Apparently ***** has Aplastic
(P3) anemia and family been told to get checked out - for FBC.
Administration eMED3 (2010) new statement issued, not fit for work Fit
Note (Diagnosis: Stress at home; Duration 27-Jan-2014 -
24-Mar-2014)

14-Jan-2014 Miss Jill Rowan Administration**17-Dec-2013 Miss Jill Rowan Administration**

16-Dec-2013 Dr Kate Macdonald Telephone call to a patient

Administration Telephone triage encounter I have extended line - not
(P3) known to me but she will make appt in New Year for r/v
DrS.
Administration eMED3 (2010) new statement issued, not fit for work Fit
Note (Diagnosis: Stress at home; Duration 16-Dec-2013 -
27-Jan-2014)

26-Nov-2013 Dr Ruth Stevenson Referral Letter

Administration Scanned Document
SCI Referral Letter :

25-Nov-2013 Mrs Ann Murray Administration

Intervention Referral for further care . Recipient: Westgate Health Centre department of Chiropody/Podiatry;
Referral Type: Out Patient; Sender: Dr Ruth Stevenson; Reason: Referral for further care; Referral
Status: Referred

20-Nov-2013 Miss Jill Rowan Administration**04-Nov-2013 Dr Ruth Stevenson Surgery consultation**

Diagnosis Dermatophytosis of nail Big toe and 4 th toe affected.
(P3) Marked ingrowing of nail also - permanent athletes foot.
For terbinafine and referral to podiatry.
Administration eMED3 (2010) new statement issued, not fit for work Fit
Note (Diagnosis: Stress at home; Duration 04-Nov-2013 -
16-Dec-2013)

23-Oct-2013 Miss Jill Rowan Administration**27-Sept-2013 Dr Ruth Stevenson Surgery consultation**

Diagnosis Patient reviewed Was down for telephone encounter but
(P3) attended with her ***** at her apt. Line issued. Feeling
neuropathic pain worsening - advised may increase
gabapentin to 2tabs TID - has just picked up script for
gabapentin so has good supply.
Administration eMED3 (2010) new statement issued, not fit for work Fit
Note (Diagnosis: Depression; Duration 27-Sep-2013 - 08-
Nov-2013)

25-Sept-2013 Miss Jill Rowan Administration

Intervention Medication review done by medicines management
(P3) technician
Intervention Long acting reversible contraception leaflet given
(P3)

28-Aug-2013 Miss Jill Rowan Administration

Intervention Medication review done by medicines management
(P3) technician

27-Aug-2013 Dr Margaretha Badenhorst Results recording

08-Aug-2013 Examination Cervical smear: negative

19-Aug-2013 Dr Ruth Stevenson Surgery consultation

Administration eMED3 (2010) new statement issued, not fit for work Fit
Note (Diagnosis: depression; Duration 19-Aug-2013 - 30-
Sep-2013)

08-Aug-2013 Mrs Pauline Mackenzie Surgery consultation

Intervention Smoking cessation advice
Intervention Advice about long acting reversible contraception Happy
on ocp - had LARC in past.
Examination O/E - blood pressure reading 125 / 76 mm Hg
Examination Ca cervix - screen done
Examination Moderate smoker - 10-19 cigs/d rolls own cigs // cigarettes / cigars /
tobacco

06-Aug-2013 Dr Calum Paton Surgery consultation

Administration Telephone triage encounter feeling better at present -
(P3) continue med 3 and review in 2/52
Administration eMED3 (2010) new statement issued, not fit for work Fit
Note (Diagnosis: Symptoms of depression; Duration 06-
Aug-2013 - 20-Aug-2013)

31-July-2013 Miss Amy Quinn Administration

Intervention Medication review done by medicines management
(P3) technician

23-July-2013 Dr Calum Paton Surgery consultation

Administration Consultation feels better on sertraline 100mg tabs - feels
(P3) mood improved and more calm - for continuation of
sertraline 100mg and review in 1/12

10-July-2013 Dr Calum Paton Surgery consultation

Administration Telephone triage encounter still feels mood about the
(P3) same - for med 3 and review in 3-4/52
Administration eMED3 (2010) new statement issued, not fit for work Fit
Note (Diagnosis: depressive episode; Duration 10-Jul-2013
- 07-Aug-2013)

03-July-2013 Miss Jill Rowan Administration

Intervention Medication review done by medicines management
(P3) technician

13-Jun-2013 Dr Ruth Stevenson Surgery consultation

Intervention Medication increased Sertraline increased to 100mg
(P3)
Diagnosis Patient reviewed Upset as apparently episode of sexual
(P3) inappropriacy happened aged 4 by her ***** boss has
come to light following another women who was also
affected approached her. Has caused stress and upset.
Person is now dead. Not coping. Plan to increase
sertraline to 100mg daily. Referred to WRASAC and
INSIGHT for counselling.
Administration eMED3 (2010) new statement issued, not fit for work Fit
Note (Diagnosis: Depression; Duration 12-Jun-2013 - 10-
Jul-2013)

04-Jun-2013 Miss Jill Rowan Administration

Intervention Medication review done by medicines management
(P3) technician

28-May-2013 Dr Ruth Stevenson Administration

Administration eMED3 (2010) new statement issued, not fit for work Fit
Note (Diagnosis: Depression; Duration 28-May-2013 - 09-
Jul-2013)

08-May-2013 Miss Jill Rowan Administration

Intervention Medication review done by medicines management
(P3) technician

15-Apr-2013 Dr Ruth Stevenson Telephone call to a patient

Administration eMED3 (2010) new statement issued, not fit for work Fit
Note (Diagnosis: Depression; Duration 15-Apr-2013 - 27-
May-2013)

10-Apr-2013 Miss Jill Rowan Administration

Intervention Medication review done by medicines management
(P3) technician

12-Mar-2013 Mr Russell Hale Administration**08-Mar-2013 Dr Ruth Stevenson Surgery consultation**

Symptom (P3) Symptoms of depression
Intervention Medication requested on sertraline - still gets agitated at
(P3) times and quick tempered but mood stable. Thought she
may be bipolar - no Sx to suggest this. Med 3 issued.
Sertraline on repeat so r/v 4/12.
Diagnosis Ganglion of wrist R side - advice - not causing any
(P3) problems.
Administration eMED3 (2010) new statement issued, not fit for work Fit
Note (Diagnosis: Symptoms of depression; Duration 08-
Mar-2013 - 19-Apr-2013)

13-Feb-2013 Miss Jill Rowan Administration

25-Jan-2013 Dr Kate Macdonald Surgery consultation

Administration MED3 - doctor's statement 6 week chronic neck pain (P3)
 Administration Seen in GP's surgery Chronic neck pain - ongoing (P3) issues. C/o salty taste in mouth - has been seeing dentist. They are to refer her to dental hosp. Dry mouth could be caused by many tablets - try artificial saliva.
 Administration Medication review With pt

16-Jan-2013 Miss Jill Rowan Administration**04-Jan-2013 Dr Calum Paton Surgery consultation**

Administration Telephone triage encounter med 3 4/52 neck pain, for (P3) review in 4/52

19-Dec-2012 Miss Jill Rowan Administration**17-Dec-2012 Mrs Ann Murray Administration**

Administration Administration - Letter to Dundee North Law (P3)

30-Nov-2012 Dr Ruth Stevenson Surgery consultation

Intervention Medication increased sertraline to 50mg OD. Agitated as (P3) in more pain. Advised increase gabapentin to 600mg TID. Med 3 30/11/12 - 4/01/13

21-Nov-2012 Miss Jill Rowan Administration**24-Oct-2012 Miss Jill Rowan Administration****26-Sept-2012 Miss Jill Rowan Administration****29-Aug-2012 Miss Jill Rowan Administration****31-July-2012 Mrs Edna Martin Administration****04-July-2012 Miss Jill Rowan Administration****06-Jun-2012 Miss Jill Rowan Administration****08-May-2012 Miss Jill Rowan Administration****11-Apr-2012 Miss Jill Rowan Administration****20-Mar-2012 Dr David Davies Surgery consultation**

Administration Consultation chat re pain management for neck and (P3) cholesterol which is creeping on up. Info re cholesterol given, re-check in 6mth. Neck arthritis becoming worse, seems to be approaching the point where she may actually take up the offer of surgery.

20-Mar-2012 Mrs Catherine Houston Surgery consultation

Administration Well adult monitoring admin. - paper copy of health (P3) information record card given to Audra by dr ***** at appt today. discussed low fat diet and rpt chol 6/12

20-Mar-2012 Mrs Karen Cheghall Administration

Diagnosis Assessing cardiovascular risk using SIGN score
 16-Mar-2012 Intervention Lifestyle counselling

17-Mar-2012 Dr Margaretha Badenhorst Results recording

16-Mar-2012	Examination	Serum cholesterol	6.43 mmol/L	
16-Mar-2012	Examination	Serum HDL cholesterol level	0.96 mmol/L	
16-Mar-2012	Examination	Plasma glucose level	4.5 mmol/L	
16-Mar-2012	Examination	Total cholesterol:HDL ratio <none>	ratio	
16-Mar-2012	Examination	Total cholesterol:HDL ratio .	6.6 ratio	
16-Mar-2012	Examination	Serum cholesterol: Above high reference limit		
		Serum cholesterol	6.43 mmol/L	(No range available)
16-Mar-2012	Examination	Serum HDL cholesterol level:		
		Serum HDL cholesterol level	0.96 mmol/L	(Range: 0.6 - 2.5)
16-Mar-2012	Examination	Plasma glucose level:		
		Plasma glucose level	4.5 mmol/L	(Range: 3.3 - 5.8)
16-Mar-2012	Examination	Total cholesterol:HDL ratio<none>:		
		Total cholesterol:HDL ratio <none>	ratio	(No range available)
16-Mar-2012	Examination	Total cholesterol:HDL ratio.:		
		Total cholesterol:HDL ratio .	6.6 ratio	(No range available)

16-Mar-2012 Mrs Karen Cheghall Administration

Intervention	Smoking cessation advice	
Intervention	Pt advised re wt reducing diet	
Symptom	Enjoys light exercise	
Diagnosis	No FH: Ischaemic heart disease	
Diagnosis	FH: Diabetes mellitus ***** - iddm	
Examination	O/E - blood pressure reading	116 / 73 mm Hg
Administration	Attends well adult monitoring (P3)	
Administration	White Scottish (P3)	
Diagnosis	Screening NOS Literacy (P3)	
Symptom	Unfit for work (P3)	
Symptom	Sickness/invalidity benefit (P3)	
Diagnosis	Depression screening using questions (P3)	no
Examination	Current smoker rolls own - 20 per day	// cigarettes / cigars / tobacco
Examination	Waist circumference	96 cm
Examination	O/E - weight	75 Kg
Examination	Body Mass Index	28.5
Examination	O/E - height	1.62 m

14-Mar-2012 Miss Jill Rowan Administration**09-Mar-2012 Dr Margaretha Badenhorst Results recording**

28-Feb-2012 Examination Cervical smear: negative

28-Feb-2012 Dr David Davies Surgery consultation

Administration Consultation chronic neck pain, known to neurosurgeons (P3) who have been offering surgery (has been declining). Not controlled currently. Seeeking additional analgesia. Try adding NSAID, rv in a couple of weeks.

28-Feb-2012 Mrs Catherine Houston Surgery consultation

Examination	O/E - pulse rate	112 bpm
Examination	O/E - blood pressure reading , rpt at KEEP WELL	151 / 87 mm Hg
Diagnosis	Fast alcohol screening test social	
Administration	Well adult monitor.verbal inv. - will make appt (P3)	
Intervention	Advice about long acting reversible contraception , (P3) happy on ocp	
Examination	Ca cervix - screen done	
Examination	Cigarette smoker	// cigarettes / cigars / tobacco
Examination	Teetotaller	units per week
Intervention	Health ed. - smoking	
Intervention	Health education offered	

15-Feb-2012 Miss Jill Rowan Administration**18-Jan-2012 Miss Jill Rowan Administration****16-Jan-2012 Mrs Edna Martin Administration****21-Dec-2011 Miss Jill Rowan Administration**

23-Nov-2011 Miss Jill Rowan Administration

26-Oct-2011 Miss Jill Rowan Administration

28-Sept-2011 Miss Jill Rowan Administration

30-Aug-2011 Miss Jill Rowan Administration

02-Aug-2011 Mrs Edna Martin Administration

07-July-2011 Mrs Edna Martin Administration

06-July-2011 Intervention Written advice about long acting reversible contraception
(P3)

06-July-2011 Intervention Long acting reversible contraception leaflet given
(P3)

06-July-2011 Miss Jill Rowan Administration

15-Jun-2011 Dr Calum Paton Surgery consultation

Administration Medication review With pt

08-Jun-2011 Miss Jill Rowan Administration

11-May-2011 Miss Jill Rowan Administration

13-Apr-2011 Miss Jill Rowan Administration

06-Apr-2011 Miss Jill Rowan Administration

16-Mar-2011 Miss Jill Rowan Administration

04-Mar-2011 Dr Margaretha Badenhorst Results recording

22-Feb-2011 Examination Cervical smear: negative

02-Mar-2011 Dr Margaretha Badenhorst Surgery consultation

Administration Medication review
Administration Medication review

25-Feb-2011 Mrs Karen Cheghall Administration

Administration Well adult monitor.3rd letter
(P3)

22-Feb-2011 Mrs Catherine Houston Surgery consultation

Diagnosis Fast alcohol screening test social
Intervention Advice about long acting reversible contraception
(P3)
Examination Ca cervix - screen done
Examination Cigarette smoker

// cigarettes / cigars /
tobacco
units per week

Examination Alcohol intake within recommended sensible limits
Intervention Health ed. - smoking
Intervention Health education offered

16-Feb-2011 Mrs Edna Martin Administration

10-Feb-2011 Dr Calum Paton Surgery consultation

Diagnosis Chest infection NOS cough for past few weeks with green
(P3) sputum coarse creps in all zones for amox and review if
not settling,

09-Feb-2011 Dr B Hollins Results recording

08-Feb-2011	Examination	Serum creatinine	59 umol/L	
08-Feb-2011	Examination	Serum potassium POTASSIUM -	4.7 mmol/L	
08-Feb-2011	Examination	Serum sodium	140 mmol/L	
08-Feb-2011	Examination	Serum urea level	2.9 mmol/L	
08-Feb-2011	Examination	GFR calculated abbreviated MDRD adj for African Americ orign GFR calctd abbtD MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA		
08-Feb-2011	Examination	GFR calculated abbreviated MDRD GFR calculated abbreviatD MDRD -	60 mL/min	
08-Feb-2011	Examination	Serum creatinine: Serum creatinine	59 umol/L	(Range: 44 - 80)
08-Feb-2011	Examination	Serum potassium POTASSIUM -: Serum potassium POTASSIUM -	4.7 mmol/L	(Range: 3.5 - 5)
08-Feb-2011	Examination	Serum sodium: Serum sodium	140 mmol/L	(Range: 135 - 147)
08-Feb-2011	Examination	Serum urea level: Below low reference limit Serum urea level	2.9 mmol/L	(Range: 3.3 - 6.6)
08-Feb-2011	Examination	GFR calculated abbreviated MDRD adj for African Americ orign GFR calctd abbtD MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA: GFR calculated abbreviated MDRD adj for African Americ orign GFR calctd abbtD MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA		
08-Feb-2011	Examination	GFR calculated abbreviated MDRD GFR calculated abbreviatD MDRD -: GFR calculated abbreviated MDRD GFR calculated abbreviatD MDRD -	60 mL/min	(No range available)

08-Feb-2011 Mrs Karen Cheghall Administration

Examination	O/E - blood pressure reading	120 / 69 mm Hg
Diagnosis	Fast alcohol screening test social	
Examination	Cigarette smoker rolls own.	// cigarettes / cigars / tobacco

18-Jan-2011 Miss Jill Rowan Administration**18-Jan-2011 Mrs Karen Cheghall Administration**

Administration (P3)	Letter encounter to patient gabapentin - as per *****	Letter sent for u/e's - on
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22-Dec-2010 Miss Jill Rowan Administration

Intervention (P3)	Advice about long acting reversible contraception
Intervention (P3)	Long acting reversible contraception leaflet given

25-Nov-2010 Mrs Edna Martin Administration**23-Nov-2010 Mrs Karen Cheghall Administration**

Administration (P3)	Well adult monitor.2nd letter
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12-Nov-2010 Dr B Hollins Surgery consultation

Administration (P3)	Seen in GP's surgery Neck and back have been more sore recently. More stiff right side of neck. try increasing to 4 gabapentin tabs daily.
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02-Nov-2010 Mrs Amy Morrison Other

Administration (P3)	Patient in local study tramadol m/r
Intervention (P3)	Drug changed to cost effective alternative changed to ordinary release tramadol

28-Oct-2010 Miss Jill Rowan Administration**20-Oct-2010 Dr Calum Paton Surgery consultation**

Administration (P3)	Telephone triage encounter about to run out of sertraline and cerazette, script issued
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29-Sept-2010 Mrs Edna Martin Administration

16-Sept-2010 Mrs Ann Murray Administration

Administration Administration - Letter to ***** Boath
(P3)

02-Sept-2010 Miss Jill Rowan Administration

04-Aug-2010 Miss Jill Rowan Administration

29-July-2010 Dr C Locum Surgery consultation

Examination	O/E - pulse rate	102 bpm
Examination	O/E - blood pressure reading	145 / 81 mm Hg
Intervention (P3)	Medication requested pt has ran out of her sertraline and cerazette tabs,BP-normal,pres given for both these meds today.(dr.bala pillai-locum)	

08-July-2010 Miss Jill Rowan Administration

23-Jun-2010 Mrs Karen Cheghall Administration

Administration Well adult monitor.admin.NOS
(P3)
Administration Well adult monitor.1st letter
(P3)

17-Jun-2010 Mrs Ann Murray Administration

Administration Administration - Medical Report
(P3)

11-Jun-2010 Mrs Marianne Leighton Administration

07-May-2010 Intervention Progestagen only oral contrac. Cerazette given at FPC
N/W

09-Jun-2010 Miss Jill Rowan Administration

13-May-2010 Miss Jill Rowan Administration

14-Apr-2010 Miss Jill Rowan Administration

18-Mar-2010 Miss Jill Rowan Administration

16-Mar-2010 Miss Kerrie Donachie Administration

04-Mar-2010 Dr Calum Paton Surgery consultation

Administration Consultation feels wel taking half tablet of sertraline
(P3) daily, continue with this and review in in 6-8/52

25-Feb-2010 Mrs Catherine Houston Surgery consultation

Examination	O/E - blood pressure reading	132 / 78 mm Hg
Diagnosis	Fast alcohol screening test social	
Intervention (P3)	Advice about long acting reversible contraception , considering her options	
Intervention (P3)	Long acting reversible contraception leaflet given	
Examination	Cervical smear: negative	
Examination	Cigarette smoker	// cigarettes / cigars / tobacco units per week
Examination	Alcohol intake within recommended sensible limits	
Intervention	Health ed. - smoking	
Intervention	Health education offered	

19-Feb-2010 Miss Jill Rowan Administration

17-Feb-2010 Miss Jill Rowan Administration

20-Jan-2010 Miss Jill Rowan Administration

18-Dec-2009 Miss Jill Rowan Administration

26-Nov-2009 Miss Jill Rowan Administration

17-Nov-2009 Mrs Edna Martin Administration

26-Oct-2009 Dr B Locum Surgery consultation

Intervention (P3) Had a chat to patient feels fluoxetine makes her angry , has a lot time on her hands these days and has noticed her mood snapping everytime she has been on the fluoxetine , brief chat about her past , some PTSD + depressive symptoms , not suicidal , discussed sertraline works better in women with PTSD symptoms , suggested trial of that , see back in 2 weeks earlier if concerns , happy with that - RIAZ

20-Oct-2009 Miss Jill Rowan Administration

21-Sept-2009 Miss Jill Rowan Administration

18-Aug-2009 Miss Jill Rowan Administration

22-July-2009 Miss Jill Rowan Administration

18-Jun-2009 Miss Jill Rowan Administration

19-May-2009 Miss Jill Rowan Administration

14-Apr-2009 Examination Cervical smear: negative

18-May-2009 Dr Calum Paton Surgery consultation

Intervention (P3) Had a chat to patient still in some pain from neck discussed, still doesn't want surgery, try increasing gabapentin and tramadol, review in 1/12

17-Apr-2009 Miss Jill Rowan Administration

09-Mar-2009 Miss Jill Rowan Administration

11-Feb-2009 Miss Jill Rowan Administration

12-Jan-2009 Miss Jill Rowan Administration

15-Dec-2008 Dr C Flavahan Surgery consultation

Administration (P3) Seen in GP's surgery Med 3 4/52 Been to neurosurgeon Unsure if wishes op

08-Dec-2008 Miss Jill Rowan Administration

20-Nov-2008 Mrs Lesley Simpson Administration

10-Nov-2008 Intervention (P1) Cold coagulation of lesion of cervix A diagnostic biopsy of the cervix was taken and the result was CIN3

13-Nov-2008 Dr B Hollins Surgery consultation

Diagnosis (P3) Cervicalgia - pain in neck
Administration (P3) Seen in GP's surgery seeing neurosurgeons next month - med 5 4/52 cerv disc prolapse medication placed on repeat

17-Oct-2008 Dr Kate Macdonald Other

Administration (P3) Seen in GP's surgery Struggling with pain on and off. Finding tramadol best help. Try MR preparation. Med 3 1/12 cerv disc prolapse.

18-Sept-2008 Dr B Hollins Surgery consultation

Administration (P3) Seen in GP's surgery scan confirmed cervical disc prolapse and she has been referred to neurosurgery. med 3 4/52 cervical disc prolapse.

25-Aug-2008 Mrs Catherine Houston Surgery consultation

Examination	O/E - blood pressure reading	115 / 74 mm Hg
Examination	Cerv.smear: severe dyskaryosis	

21-Aug-2008 Dr C Flavahan Surgery consultation

Diagnosis	Fast alcohol screening test	
Administration (P3)	Seen in GP's surgery Med3 4/52 Has appt for MRI 04/09 Still constant pain, mostly right side Stiff Poor sleep Agitated at times Feels effects of Citalopram "like Speed" (which she took for several years - stopped 8 years ago) Neuropathic pain not as bad Wt up	
Examination	Current non drinker	units per week

25-July-2008 Dr Kate Macdonald Other**18-July-2008 Dr Kate Macdonald Other**

Administration (P3)	Seen in GP's surgery Ongoing problems with R arm pain and neck pain. Feels she is losing dexterity of R hand. Neuro- slight paraesthesia R arm, otherwise nad. ?physio to refer on, will contact them. Med 3 4/52 pt does not feel she is able to return to work and PT ongoing.
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17-Jun-2008 Dr Margaretha Badenhorst Surgery consultation

Administration (P3)	Consultation - feels she cannot go back to working in NH - I feel there may be other issues at play here. Tolerating citalopram and feeling a little bit better on them. Med 3 4 weeks cervical neuralgia.
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04-Jun-2008 Mr Russell Hale Administration

02-Jun-2008 Examination	Blood glucose result	4.8 mmol/L	
02-Jun-2008 Examination	Blood glucose result: Blood glucose result	4.8 mmol/L	(No range available)

02-Jun-2008 Mrs Karen Cheghall Administration**02-Jun-2008 Dr Margaretha Badenhorst Surgery consultation**

Administration (P3)	Consultation has not really benefitted from gabapentin - says it is making the spasms in her arm worse. Losing weight on paroxetine - drinking a lot but not eating very well. Asking for line to be extended. Cervical neuralgia 2 weeks. Start citalopram 10 mg in place of paroxetine.
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08-May-2008 Dr A Montgomery Surgery consultation

Administration (P3)	MED3 - doctor's statement from 05/05/08. if anything physio has made worse. they want her on gabapentin so trial. encourage ***** perserver e with physio. also explain this may take a few months. note work is being impatient with her.
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24-Apr-2008 Mrs Ann Murray Administration

Administration (P3)	Letter sent to outside agency - Balcarres Residential Home
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08-Apr-2008 Dr A Montgomery Surgery consultation

Administration (P3)	Seen in GP's surgery med3 28/7 necck pain. had been having problems for 6/12 but crisi when lifted patient. been off since then.hasphysio soon. employerswillbe asking for report soon although hasonly been off 6/52. explain too soon to know what outlook is. gavecopy of xray to showphysio.
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24-Mar-2008 Dr C Flavahan Surgery consultation

Administration (P3)	MED3 - doctor's statement 2/52 Cervical spondylitis Neck injury Pain in neck + pain and paraesthesia right arm X-ray and refer physio
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06-Mar-2008 Dr B Hollins Surgery consultation

Administration (P3)	MED3 - doctor's statement 2 weeks neck muscle spasmshe is improving but shoulder still too sore to work. advised continue to rest arm
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25-Feb-2008 Dr Stephen Gardiner Surgery consultation

Diagnosis Cervicalgia - pain in neck c 2/52 (R) sided neck muscle
(P3) spasm.

12-Dec-2007 Dr C Flavahan Surgery consultation

Administration Seen in GP's surgery Needs script - mood varies PMT
(P3)
Administration Medication review

12-Dec-2007 Mrs Alexis Macrae Surgery consultation

Intervention	Smoking cessation advice	
Symptom	Diet good	
Symptom	Enjoys light exercise	
Examination	O/E - blood pressure reading	129 / 77 mm Hg
Examination	Cerv.smear: mild dyskaryosis	
Examination	Cigarette smoker	15 // cigarettes / cigars / tobacco units per week
Examination	Drinks rarely	

18-July-2007 Dr B Hollins Surgery consultation

Administration	Seen in GP's surgery generally doing ok on seroxat. she (P3) varies the dose between 10 to 20mg according to whether she feels agitated.	
Examination	Cigarette smoker	10 // cigarettes / cigars / tobacco
Intervention	Health ed. - smoking	

06-July-2007 Miss Jill Rowan Administration

Administration Cervical smear - 1st recall
(P3)

30-Mar-2007 Dr Calum Paton Surgery consultation

Administration Seen in GP's surgery currently on paroxetine 10 mg
(P3) review in 2-3/12 to reduce further

08-Dec-2006 Dr B Locum Surgery consultation

Administration Seen in GP's surgery Found 10mgs fluoxetine not
(P3) enough so upto 20mgs again. Advised titrate reduction
slowly when able.

06-Oct-2006 Dr Calum Paton Surgery consultation

Administration Seen in GP's surgery chesty cough for 3/52. not
(P3) improving, coarse crpes at both bases

13-Sept-2006 Dr B Hollins Surgery consultation

Administration Seen in GP's surgery seperated from her ***** and feels
(P3) an awful lot better. they had been together for about 18
months and he had been really undermining her self
confidence although she didn't realise it until he was
gone. has cut herself down to a half tab daily

06-July-2006 Dr B Hollins Surgery consultation

Administration Seen in GP's surgery feels much more relaxed on
(P3) treatment although she finds she sleeps much more
heavily and can go to sleep very easily. Continue
paroxetine

01-Jun-2006 Dr Margaretha Badenhorst Surgery consultation

Administration Seen in GP's surgery Feeling better back on paroxetine.
(P3) Will stay on for about 8 months. Also bleeding piles

13-Apr-2006 Dr B Locum Surgery consultation

Administration Seen in GP's surgery missex seroxat for 4days when had
(P3) diarrhoea last week. 2] advised and discussed++ re
nature of neck/arm pain. Reassured++ ??early OA.
Disussed re symptomatic treatment prn

17-Mar-2006 Dr B Hollins Surgery consultation

Administration Seen in GP's surgery since ***** died she has been getting mood swings around periods. Bad tempered at ***** residents. Start seroxat because she did well with it before. Also muscular pain right trapezius and neck extensors due to inappropriate lifting at work. Advised she must stop lifting and use hoists instead

Diagnosis (P3) Medication review

Diagnosis (P3) Medication review

01-Sept-2005 Dr Staff Unknown Member of Staff Surgery consultation

Examination (P3) O/E - blood pressure reading 120 / 60 mm Hg

Administration (P2) GP102 signed New app

Examination (P3) Current smoker 0 / / cigarettes / cigars / tobacco

Examination (P3) O/E - weight 66 Kg

Examination (P3) Body Mass Index 25.1

18-Mar-2005 Mrs Pauline Mackenzie Surgery consultation

Administration Seen in GP's surgery 3rd hep b inj

Intervention (P3) 3rd hepatitis B vaccination

10-Mar-2005 Dr Margaretha Badenhorst Surgery consultation

Intervention (P3) Smoking cessation advice

Examination (P3) Current smoker 0 / / cigarettes / cigars / tobacco

Examination (P3) Teetotaler 0 units per week

13-July-2004 Dr Staff Unknown Member of Staff Surgery consultation

Administration Notes summary on computer

(P1)

01-July-2004 Dr Staff Unknown Member of Staff Surgery consultation

Administration Seen in GP's surgery 2nd hep b inj im r armcervical smear

Examination (P3) Cervical smear: negative ACTION=Repeat after an Interval : RECALL_LETTER_STATUS=Do not send recall letter : RESULT_LETTER_STATUS=Do not send result letter : PROTOCOL=Cervical Screening\$\$

Intervention 2nd hepatitis B vaccination

02-Jun-2004 Mrs Catherine Houston Surgery consultation

Administration Seen in GP's surgery 1st hep b inj im left arm

Intervention (P3) 1st hepatitis B vaccination

28-Jan-2004 Dr Staff Unknown Member of Staff Surgery consultation

Examination Urine culture - E. Coli 0

Examination Urine culture - E. Coli: 0 (No range available)

Urine culture - E. Coli

06-Nov-2003 Dr Margaretha Badenhorst Surgery consultation**27-Aug-2003 Dr Margaretha Badenhorst Surgery consultation****05-Jun-2003 Dr C Flavahan Surgery consultation****28-Feb-2003 Dr Margaretha Badenhorst Surgery consultation****28-Nov-2002 Dr Margaretha Badenhorst Surgery consultation****25-Sept-2002 Dr Margaretha Badenhorst Surgery consultation**

17-July-2002 Dr Margaretha Badenhorst Surgery consultation

25-Apr-2002 Dr Margaretha Badenhorst Surgery consultation

07-Feb-2002 Dr Margaretha Badenhorst Surgery consultation

20-Nov-2001 Dr Margaretha Badenhorst Surgery consultation

05-Oct-2001 Dr C Flavahan Surgery consultation

30-Aug-2001 Dr C Flavahan Surgery consultation

30-July-2001 Dr C Flavahan Surgery consultation

13-July-2001 Dr Staff Unknown Member of Staff Surgery consultation

Administration Out of Hours Visits ddocs - base - 21.50
(P2)

25-Oct-2000 Dr B Hollins Surgery consultation

13-Sept-2000 Dr Staff Unknown Member of Staff Surgery consultation

Management (P3)	New patient health check	
Examination (P3)	O/E - BP reading normal ACTION=Repeat after an Interval : RECALL_LETTER_STATUS=Do not send recall letter : RESULT_LETTER_STATUS=Do not send result letter : PROTOCOL=B P Screening\$\$	0 / 0 mm Hg
Diagnosis (P2)	[V]FH - Asthma	
Examination (P3)	Moderate smoker - 10-19 cigs/d ACTION=No Action Required : RECALL_LETTER_STATUS=Do not send recall letter : RESULT_LETTER_STATUS=Do not send result letter : PROTOCOL=Smoker\$\$ Status	0 / / cigarettes / cigars / tobacco
Examination (P3)	Light drinker - 1-2u/day ACTION=No Action Required : RECALL_LETTER_STATUS=Do not send recall letter : RESULT_LETTER_STATUS=Do not send result letter : PROTOCOL=Alcohol Intake\$\$	0 units per week
Examination (P3)	O/E - weight ACTION=No Action Required : RECALL_LETTER_STATUS=Do not send recall letter : RESULT_LETTER_STATUS=Do not send result letter : PROTOCOL=Weight\$\$	62 Kg
Examination (P3)	Body Mass Index ACTION=No Action Required : RECALL_LETTER_STATUS=Do not send recall letter : RESULT_LETTER_STATUS=Do not send result letter : PROTOCOL=Weight\$\$	23.6
Examination (P3)	O/E - height ACTION=No Action Required : RECALL_LETTER_STATUS=Do not send recall letter : RESULT_LETTER_STATUS=Do not send result letter : PROTOCOL=Height\$\$	1.62 m

17-Aug-2000 Dr Margaretha Badenhorst Surgery consultation

23-May-2000 Dr Staff Unknown Member of Staff Surgery consultation

Intervention (P2)	Referral for further care SPECIALITY=A+E : REFERRAL_TO=NHS. Sender: Dr Staff Unknown Member of Staff; Reason: Referral for further care
Intervention (P2)	Referral for further care SPECIALITY=A+E : REFERRAL_TO=NHS

30-Sept-1999 Dr Staff Unknown Member of Staff Surgery consultation

Administration GP24 paid by HB - checked 64.35
(P2)

01-Sept-1999 Dr Staff Unknown Member of Staff Surgery consultation

Examination (P3)	Cervical smear: negative ACTION=Repeat after an Interval : RECALL_LETTER_STATUS=Send recall when due : PROTOCOL=Cervical Screening\$\$
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03-Aug-1999 Dr Staff Unknown Member of Staff Surgery consultation

Administration GP24 sent to HB
(P2)

16-Apr-1999 Dr Staff Unknown Member of Staff Surgery consultation

Examination	High vaginal swab taken	Light growth of candida	0	
Examination	High vaginal swab taken	Light growth of candida:		
	High vaginal swab taken	Light growth of candida	0	(No range available)

24-Dec-1998 Dr Staff Unknown Member of Staff Surgery consultation

Administration Spontaneous misc 8-28 weeks
(P2)
Diagnosis Premature membrane rupture NOS
(P1)

04-Dec-1998 Dr Staff Unknown Member of Staff Surgery consultation

Examination	Sample serology	no atypical red cell antibodies detected.retest at 28-30 weeks.blood group o rh.[d]	0	
Examination	Sample serology	no atypical red cell antibodies detected.retest at 28-30 weeks.blood group o rh.[d]		
	Sample serology	no atypical red cell antibodies detected.retest at 28-30 weeks.blood group o rh.[d]	0	(No range available)
	positive.			

16-Nov-1998 Dr Staff Unknown Member of Staff Surgery consultation

Administration GP24 signed by patient
(P2)

19-Aug-1997 Dr Staff Unknown Member of Staff Surgery consultation

Examination	High vaginal swab taken	No polymorphsNo trichomonasNo candidaClue cells seen on microscopyWhich may be consistent with gardnerella vaginalis infection	0	
Examination (P3)	Cervical smear: negative	RECALL_LETTER_STATUS=Send recall when due : PROTOCOL=Cervical Screening\$\$		
Examination	High vaginal swab taken	No polymorphsNo trichomonasNo candidaClue cells seen on microscopyWhich may be consistent with gardnerella vaginalis infection:		
	High vaginal swab taken	No polymorphsNo trichomonasNo candidaClue cells seen on microscopyWhich may be consistent with gardnerella vaginalis infection	0	(No range available)

18-Aug-1997 Dr Staff Unknown Member of Staff Surgery consultation

Examination	Urine pregnancy test negative	0	
Examination	Urine pregnancy test negative:		
	Urine pregnancy test negative	0	(No range available)

13-Aug-1997 Dr Staff Unknown Member of Staff Surgery consultation

Examination	Full blood count borderline	h 11.9 - needs iron	0	
Examination	Urine culture - mixed growth		0	
Examination	Full blood count borderline	h 11.9 - needs iron:		
	Full blood count borderline	h 11.9 - needs iron	0	(No range available)
Examination	Urine culture - mixed growth:			
	Urine culture - mixed growth		0	(No range available)

25-Mar-1997 Dr Staff Unknown Member of Staff Surgery consultation

Examination	Urine pregnancy test negative	0	
Examination	Urine pregnancy test negative:		
	Urine pregnancy test negative	0	(No range available)

06-May-1996 Dr Staff Unknown Member of Staff Surgery consultation

Examination	Full blood count normal	hb 13.0	0	
Examination	Full blood count normal	hb 13.0:		
	Full blood count normal	hb 13.0	0	(No range available)

25-Sept-1995 Dr Staff Unknown Member of Staff Surgery consultation

Diagnosis Ovarian cysts small ovarian cyst noted
(P1)

17-May-1995 Dr Staff Unknown Member of Staff Surgery consultation

Intervention	Referral for further care	SPECIALITY=A+E : REFERRAL_TO=NHS. Sender: Dr Staff Unknown Member of Staff; Reason: Referral for further care		
Intervention (P2)	Referral for further care	SPECIALITY=A+E : REFERRAL_TO=NHS		

13-Feb-1995 Dr Staff Unknown Member of Staff Surgery consultation

Examination	Plain X-ray ribs	no fracture or pneumothorax seen.	0	
Examination	Plain X-ray ribs	no fracture or pneumothorax seen.:	0	
	Plain X-ray ribs	no fracture or pneumothorax seen.	0	(No range available)

14-Apr-1993 Dr Staff Unknown Member of Staff Surgery consultation

Examination (P3)	O/E - BP reading normal	ACTION=Repeat after an Interval : RECALL_LETTER_STATUS=Send recall when due : RESULT_LETTER_STATUS=Do not send result letter : PROTOCOL=B P Screening\$\$	120 / 70 mm Hg
Administration (P1)	GP/HPC-health promotion clinic		
Examination (P3)	Moderate smoker - 10-19 cigs/d	ACTION=Repeat after an Interval : RECALL_LETTER_STATUS=Send recall when due : RESULT_LETTER_STATUS=Do not send result letter : PROTOCOL=Smoker\$\$ Status	0 / / cigarettes / cigars / tobacco
Examination (P3)	Teetotaler	ACTION=No Action Required : RECALL_LETTER_STATUS=Send recall when due : RESULT_LETTER_STATUS=Do not send result letter : PROTOCOL=Alcohol Intake\$\$	0 units per week
Examination (P3)	O/E - weight	ACTION=Repeat after an Interval : RECALL_LETTER_STATUS=Send recall when due : RESULT_LETTER_STATUS=Do not send result letter : PROTOCOL=Weight\$\$	60.78 Kg
Examination (P3)	Body Mass Index	ACTION=Repeat after an Interval : RECALL_LETTER_STATUS=Send recall when due : RESULT_LETTER_STATUS=Do not send result letter : PROTOCOL=Weight\$\$	24.6
Examination (P3)	O/E - height	ACTION=Repeat after an Interval : RECALL_LETTER_STATUS=Send recall when due : RESULT_LETTER_STATUS=Do not send result letter : PROTOCOL=Height\$\$	1.57 m

31-Mar-1991 Dr Staff Unknown Member of Staff Surgery consultation

Administration Pat. GP7B/GP8B card from HB
(P2)

08-Apr-1989 Dr Staff Unknown Member of Staff Surgery consultation

Diagnosis (P1)
Forceps delivery

13-May-1975 Dr Staff Unknown Member of Staff Surgery consultation

Intervention (P1)
Tonsillectomy and adenoidectomy

Medications (inc. issues)**Acute****05-Jun-2026 Tramadol 200mg modified-release capsules**

60 capsule - 1 CAPSULE TWICE A DAY

04-Jun-2026 Gabapentin 300mg capsules

270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

04-Jun-2026 Hydroxocobalamin 1mg/1ml solution for injection ampoules

5 ampoule - TO BE ADMINISTERED 3 MONTHLY

04-Jun-2026 Furosemide 40mg tablets

56 tablet - 1 TABLET ONCE A DAY,

11-Mar-2026 Kelhale 100micrograms/dose inhaler (Cipla EU Ltd)

400 dose - 1 PUFF TWICE A DAY

11-Mar-2026 Salbutamol 100micrograms/dose inhaler CFC free

200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

Repeat**05-Jun-2026 Tramadol 200mg modified-release capsules**

60 capsule - 1 CAPSULE TWICE A DAY

10-Feb-2026 Salbutamol 100micrograms/dose inhaler CFC free

200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

10-Feb-2026 Gabapentin 300mg capsules

270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

10-Feb-2026 Kelhale 100micrograms/dose inhaler (Cipla EU Ltd)
400 dose - 1 PUFF TWICE A DAY

12-Jan-2026 Furosemide 40mg tablets
56 tablet - 1 TABLET ONCE A DAY,

12-Jan-2026 Hydroxocobalamin 1mg/1ml solution for injection ampoules
5 ampoule - TO BE ADMINISTERED 3 MONTHLY

Past

14-Apr-2026 Gabapentin 300mg capsules Acute Medication (Past)
270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

14-Apr-2026 Furosemide 40mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY,

14-Apr-2026 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

11-Mar-2026 Gabapentin 300mg capsules Acute Medication (Past)
270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

11-Mar-2026 Furosemide 40mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY,

11-Mar-2026 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

09-Feb-2026 Furosemide 40mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY,

09-Feb-2026 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

09-Feb-2026 Gabapentin 300mg capsules Acute Medication (Past)
270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

09-Feb-2026 Kelhale 100micrograms/dose inhaler (Cipla EU Ltd) Acute Medication (Past)
400 dose - 1 PUFF TWICE A DAY

12-Jan-2026 Furosemide 40mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY,

12-Jan-2026 Salbutamol 100micrograms/dose inhaler CFC free Repeat Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

09-Jan-2026 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

09-Jan-2026 Gabapentin 300mg capsules Acute Medication (Past)
270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

08-Dec-2025 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

08-Dec-2025 Gabapentin 300mg capsules Acute Medication (Past)
270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

08-Dec-2025 Furosemide 40mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY,

06-Nov-2025 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

06-Nov-2025 Gabapentin 300mg capsules Acute Medication (Past)
270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

06-Nov-2025 Furosemide 40mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY,

06-Nov-2025 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

06-Nov-2025 Salbutamol 100micrograms/dose inhaler CFC free Repeat Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

09-Oct-2025 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

09-Oct-2025 Tramadol 200mg modified-release capsules Repeat Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

08-Oct-2025 Gabapentin 300mg capsules Acute Medication (Past)
270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

08-Oct-2025 Furosemide 40mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY,

08-Oct-2025 Hydroxocobalamin 1mg/1ml solution for injection ampoules Acute Medication (Past)
5 ampoule - TO BE ADMINISTERED 3 MONTHLY

17-Sept-2025 Gabapentin 300mg capsules Acute Medication (Past)

270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

17-Sept-2025 Gabapentin 300mg capsules Repeat Medication (Past)

270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

16-Sept-2025 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

16-Sept-2025 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

16-Sept-2025 Salbutamol 100micrograms/dose inhaler CFC free Repeat Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

31-July-2025 Furosemide 40mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY,

31-July-2025 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

31-July-2025 Gabapentin 300mg capsules Acute Medication (Past)

270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

31-July-2025 Kelhale 100micrograms/dose inhaler (Cipla EU Ltd) Acute Medication (Past)

400 dose - 1 PUFF TWICE A DAY

31-July-2025 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

31-July-2025 Salbutamol 100micrograms/dose inhaler CFC free Repeat Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

01-July-2025 Sertraline 100mg tablets Acute Medication (Past)

28 tablet - 1 TABLET ONCE A DAY, PLEASE BOOK AN APPOINTMENT FOR REVIEW OF THIS MEDICATION BEFORE NEXT ISSUE

30-Jun-2025 Furosemide 40mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY,

30-Jun-2025 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

30-Jun-2025 Gabapentin 300mg capsules Acute Medication (Past)

270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

29-May-2025 Sertraline 100mg tablets Acute Medication (Past)

28 tablet - 1 TABLET ONCE A DAY, PLEASE BOOK AN APPOINTMENT FOR REVIEW OF THIS MEDICATION BEFORE NEXT ISSUE

28-May-2025 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

28-May-2025 Gabapentin 300mg capsules Acute Medication (Past)

270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

28-May-2025 Kelhale 100micrograms/dose inhaler (Cipla EU Ltd) Acute Medication (Past)

400 dose - 1 PUFF TWICE A DAY

28-May-2025 Furosemide 40mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY,

28-May-2025 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

28-May-2025 Salbutamol 100micrograms/dose inhaler CFC free Repeat Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

28-May-2025 Furosemide 40mg tablets Repeat Medication (Past)

56 tablet - 1 TABLET ONCE A DAY,

23-Apr-2025 Gabapentin 300mg capsules Acute Medication (Past)

270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

23-Apr-2025 Furosemide 40mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY,

23-Apr-2025 Kelhale 100micrograms/dose inhaler (Cipla EU Ltd) Acute Medication (Past)

400 dose - 1 PUFF TWICE A DAY

23-Apr-2025 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

23-Apr-2025 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

23-Apr-2025 Sertraline 100mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY Notes for patient: for a medication rv in Feb 2024

23-Apr-2025 Salbutamol 100micrograms/dose inhaler CFC free Repeat Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

21-Mar-2025 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

21-Mar-2025 Tramadol 200mg modified-release capsules Repeat Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

19-Mar-2025 Gabapentin 300mg capsules Acute Medication (Past)
270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

19-Mar-2025 Furosemide 40mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY,

19-Mar-2025 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY Notes for patient: for a medication rv in Feb 2024

18-Feb-2025 AeroChamber Plus (Trudell Medical UK Ltd) Acute Medication (Past)
1 device -

18-Feb-2025 Gabapentin 300mg capsules Acute Medication (Past)
270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

18-Feb-2025 Gabapentin 300mg capsules Repeat Medication (Past)
270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

17-Feb-2025 Furosemide 40mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY,

17-Feb-2025 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

17-Feb-2025 Kelhale 100micrograms/dose inhaler (Cipla EU Ltd) Acute Medication (Past)
400 dose - 1 PUFF TWICE A DAY

17-Feb-2025 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

17-Feb-2025 Salbutamol 100micrograms/dose inhaler CFC free Repeat Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

13-Jan-2025 Furosemide 40mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY,

13-Jan-2025 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

13-Jan-2025 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY Notes for patient: for a medication rv in Feb 2024

13-Jan-2025 Gabapentin 300mg capsules Acute Medication (Past)
270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

13-Jan-2025 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

13-Jan-2025 Salbutamol 100micrograms/dose inhaler CFC free Repeat Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

10-Dec-2024 Gabapentin 400mg capsules Acute Medication (Past)
84 capsule - TAKE ONE CAPSULE THREE TIMES A DAY FOR PAIN WHILE WAITING FOR MRI (INA ADDITION TO THE 300MG TABLETS)

09-Dec-2024 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

09-Dec-2024 Furosemide 40mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY,

09-Dec-2024 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

09-Dec-2024 Gabapentin 300mg capsules Acute Medication (Past)
270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

09-Dec-2024 Salbutamol 100micrograms/dose inhaler CFC free Repeat Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

07-Nov-2024 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

07-Nov-2024 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY Notes for patient: for a medication rv in Feb 2024

07-Nov-2024 Gabapentin 300mg capsules Acute Medication (Past)
270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

07-Nov-2024 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

10-Oct-2024 Furosemide 40mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY,

10-Oct-2024 Furosemide 40mg tablets Repeat Medication (Past)
56 tablet - 1 TABLET ONCE A DAY,

10-Oct-2024 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

10-Oct-2024 Sertraline 100mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY Notes for patient: for a medication rv in Feb 2024

10-Oct-2024 Gabapentin 300mg capsules Acute Medication (Past)

270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

06-Sept-2024 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

06-Sept-2024 Sertraline 100mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY Notes for patient: for a medication rv in Feb 2024

06-Sept-2024 Sertraline 100mg tablets Repeat Medication (Past)

56 tablet - 1 TABLET ONCE A DAY Notes for patient: for a medication rv in Feb 2024

06-Sept-2024 Tramadol 200mg modified-release capsules Repeat Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

05-Sept-2024 Gabapentin 300mg capsules Acute Medication (Past)

270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

05-Sept-2024 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

05-Sept-2024 Furosemide 40mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY,

05-Aug-2024 Gabapentin 400mg capsules Acute Medication (Past)

84 capsule - TAKE ONE CAPSULE THREE TIMES A DAY FOR PAIN WHILE WAITING FOR MRI (INA ADDITION TO THE 300MG TABLETS)

05-Aug-2024 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY Notes for dispenser: please book an appointment for review of this medication Notes for patient: please book an appointment for review of this medication

05-Aug-2024 Tramadol 200mg modified-release capsules Repeat Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY Notes for dispenser: please book an appointment for review of this medication Notes for patient: please book an appointment for review of this medication

02-Aug-2024 Hydroxocobalamin 1mg/1ml solution for injection ampoules Acute Medication (Past)

5 ampoule - TO BE ADMINISTERED 3 MONTHLY

02-Aug-2024 Gabapentin 300mg capsules Acute Medication (Past)

270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

02-Aug-2024 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

02-Aug-2024 Furosemide 40mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY,

02-Aug-2024 Sertraline 100mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY Notes for patient: for a medication rv in Feb 2024

02-Aug-2024 Hydroxocobalamin 1mg/1ml solution for injection ampoules Repeat Medication (Past)

5 ampoule - TO BE ADMINISTERED 3 MONTHLY

11-July-2024 Gabapentin 300mg capsules Repeat Medication (Past)

270 capsule - TAKE THREE CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT. Notes for patient: dose reduction as discussed to 3tabs tds

05-Jun-2024 Omeprazole 20mg gastro-resistant capsules Acute Medication (Past)

14 capsule - 1 CAPSULE ONCE A DAY WHILST TAKING PREDNISOLONE

05-Jun-2024 Prednisolone 5mg tablets Acute Medication (Past)

40 tablet - 8 TABLETS DAILY FOR 5 DAYS

05-Jun-2024 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

05-Jun-2024 Salbutamol 100micrograms/dose inhaler CFC free Repeat Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

04-Jun-2024 Gabapentin 400mg capsules Acute Medication (Past)

84 capsule - TAKE ONE CAPSULE THREE TIMES A DAY FOR PAIN WHILE WAITING FOR MRI (INA ADDITION TO THE 300MG TABLETS)

04-Jun-2024 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY Notes for patient: please book an appointment for review of this medication

04-Jun-2024 Gabapentin 300mg capsules Acute Medication (Past)

240 capsule - TAKE TWO CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT.

04-Jun-2024 Sertraline 100mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY Notes for patient: for a medication rv in Feb 2024

10-May-2024 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

10-May-2024 Gabapentin 400mg capsules Acute Medication (Past)

84 capsule - TAKE ONE CAPSULE THREE TIMES A DAY FOR PAIN WHILE WAITING FOR MRI (INA ADDITION TO THE 300MG TABLETS)

10-May-2024 Gabapentin 400mg capsules Repeat Medication (Past)

84 capsule - TAKE ONE CAPSULE THREE TIMES A DAY FOR PAIN WHILE WAITING FOR MRI (INA ADDITION TO THE 300MG TABLETS)

08-May-2024 Gabapentin 400mg capsules Acute Medication (Past)

84 capsule - TAKE ONE CAPSULE THREE TIMES A DAY FOR PAIN WHILE WAITING FOR MRI

08-May-2024 Gabapentin 400mg capsules Repeat Medication (Past)

84 capsule - TAKE ONE CAPSULE THREE TIMES A DAY FOR PAIN WHILE WAITING FOR MRI

03-May-2024 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY Notes for patient: please book an appointment for review of this medication

03-May-2024 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

03-May-2024 Gabapentin 300mg capsules Acute Medication (Past)

240 capsule - TAKE TWO CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT.

03-May-2024 Furosemide 40mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY,

29-Apr-2024 Kelhale 100micrograms/dose inhaler (Cipla EU Ltd) Acute Medication (Past)

400 dose - 1 PUFF TWICE A DAY

29-Apr-2024 Gabapentin 400mg capsules Repeat Medication (Past)

252 capsule - TAKE ONE THREE TIMES A DAY FOR PAIN WHILE WAITING FOR MRI

29-Apr-2024 Kelhale 100micrograms/dose inhaler (Cipla EU Ltd) Repeat Medication (Past)

400 dose - 1 PUFF TWICE A DAY

29-Mar-2024 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY Notes for patient: please book an appointment for review of this medication

29-Mar-2024 Tramadol 200mg modified-release capsules Repeat Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY Notes for patient: please book an appointment for review of this medication

28-Mar-2024 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

28-Mar-2024 Gabapentin 300mg capsules Acute Medication (Past)

240 capsule - TAKE TWO CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT.

28-Mar-2024 Furosemide 40mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY,

04-Mar-2024 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

04-Mar-2024 Salbutamol 100micrograms/dose inhaler CFC free Repeat Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED Notes for patient: please book an appointment with asthma nurse for annual asthma review

01-Mar-2024 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

01-Mar-2024 Hydroxocobalamin 1mg/1ml solution for injection ampoules Acute Medication (Past)

5 ampoule - TO BE ADMINISTERED 3 MONTHLY

01-Mar-2024 Furosemide 40mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY,

01-Mar-2024 Sertraline 100mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY Notes for patient: for a medication rv in Feb 2024

01-Mar-2024 Gabapentin 300mg capsules Acute Medication (Past)

240 capsule - TAKE TWO CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT.

01-Mar-2024 Amoxicillin 500mg capsules Acute Medication (Past)

30 capsule - 2 CAPSULE THREE TIMES A DAY

01-Mar-2024 Prednisolone 5mg tablets Acute Medication (Past)

40 tablet - 8 TABLETS DAILY FOR 5 DAYS

01-Mar-2024 Omeprazole 20mg gastro-resistant capsules Acute Medication (Past)

14 capsule - 1 CAPSULE ONCE A DAY WHILST TAKING PREDNISOLONE

01-Mar-2024 Gabapentin 300mg capsules Repeat Medication (Past)

240 capsule - TAKE TWO CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT.

29-Jan-2024 Gabapentin 300mg capsules Acute Medication (Past)

240 capsule - TAKE TWO CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT.

29-Jan-2024 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

29-Jan-2024 Hydroxocobalamin 1mg/1ml solution for injection ampoules Acute Medication (Past)

5 ampoule - TO BE ADMINISTERED 3 MONTHLY

29-Jan-2024 Furosemide 40mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY,

29-Jan-2024 Sertraline 100mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY Notes for patient: for a medication rv in Feb 2024

29-Jan-2024 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED

22-Dec-2023 Gabapentin 300mg capsules Acute Medication (Past)

240 capsule - TAKE TWO CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT.

22-Dec-2023 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

22-Dec-2023 Sertraline 100mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY Notes for patient: for a medication rv in Feb 2024

05-Dec-2023 **Ralvo 700mg medicated plasters (Grunenthal Ltd)** **Acute Medication (Past)**

30 plaster - APPLY ONCE DAILY FOR UP TO 12 HOURS FOLLOWED BY A 12 HOUR PLASTER FREE PERIOD (SAME ITEM AS LIDOCAINE 5% MEDICATED PLASTER/ VERSATIS)

05-Dec-2023 **Furosemide 40mg tablets** **Repeat Medication (Past)**

56 tablet - 1 TABLET ONCE A DAY,

05-Dec-2023 **Hydroxocobalamin 1mg/1ml solution for injection ampoules** **Repeat Medication (Past)**

5 ampoule - TO BE ADMINISTERED 3 MONTHLY

05-Dec-2023 **Tramadol 200mg modified-release capsules** **Repeat Medication (Past)**

60 capsule - 1 CAPSULE TWICE A DAY

05-Dec-2023 **Gabapentin 300mg capsules** **Repeat Medication (Past)**

240 capsule - TAKE TWO CAPSULES MORNING, THREE CAPSULES AT LUNCH AND THREE CAPSULES AT NIGHT.

29-Nov-2023 **Sertraline 100mg tablets** **Acute Medication (Past)**

56 tablet - 1 TABLET ONCE A DAY Notes for patient: for a medication rv in Feb 2024

29-Nov-2023 **Sertraline 100mg tablets** **Repeat Medication (Past)**

56 tablet - 1 TABLET ONCE A DAY Notes for patient: for a medication rv in Feb 2024

28-Nov-2023 **Gabapentin 300mg capsules** **Acute Medication (Past)**

252 capsule - TAKE THREE CAPSULES UP TO THREE TIMES A DAY

28-Nov-2023 **Salbutamol 100micrograms/dose inhaler CFC free** **Acute Medication (Past)**

200 dose - 2 PUFFS WHEN REQUIRED

28-Nov-2023 **Tramadol 200mg modified-release capsules** **Acute Medication (Past)**

60 capsule - 1 CAPSULE TWICE A DAY

28-Nov-2023 **Furosemide 40mg tablets** **Acute Medication (Past)**

56 tablet - 1 TABLET ONCE A DAY,

27-Oct-2023 **Gabapentin 300mg capsules** **Acute Medication (Past)**

252 capsule - TAKE THREE CAPSULES UP TO THREE TIMES A DAY

27-Oct-2023 **Salbutamol 100micrograms/dose inhaler CFC free** **Acute Medication (Past)**

200 dose - 2 PUFFS WHEN REQUIRED

27-Oct-2023 **Tramadol 200mg modified-release capsules** **Acute Medication (Past)**

60 capsule - 1 CAPSULE TWICE A DAY

27-Oct-2023 **Furosemide 40mg tablets** **Acute Medication (Past)**

56 tablet - 1 TABLET ONCE A DAY,

27-Oct-2023 **Sertraline 100mg tablets** **Acute Medication (Past)**

56 tablet - 1 TABLET ONCE A DAY Notes for patient: for a medication rv in Feb 2024

02-Oct-2023 **Salbutamol 100micrograms/dose inhaler CFC free** **Acute Medication (Past)**

200 dose - 2 PUFFS WHEN REQUIRED

02-Oct-2023 **Gabapentin 300mg capsules** **Acute Medication (Past)**

252 capsule - TAKE THREE CAPSULES UP TO THREE TIMES A DAY

02-Oct-2023 **Tramadol 200mg modified-release capsules** **Acute Medication (Past)**

60 capsule - 1 CAPSULE TWICE A DAY

02-Oct-2023 **Tramadol 200mg modified-release capsules** **Repeat Medication (Past)**

60 capsule - 1 CAPSULE TWICE A DAY

02-Oct-2023 **Gabapentin 300mg capsules** **Repeat Medication (Past)**

252 capsule - TAKE THREE CAPSULES UP TO THREE TIMES A DAY

02-Oct-2023 **Salbutamol 100micrograms/dose inhaler CFC free** **Repeat Medication (Past)**

200 dose - 2 PUFFS WHEN REQUIRED

29-Sept-2023 **Furosemide 40mg tablets** **Acute Medication (Past)**

56 tablet - 1 TABLET ONCE A DAY,

29-Sept-2023 **Hydroxocobalamin 1mg/1ml solution for injection ampoules** **Acute Medication (Past)**

5 ampoule - TO BE ADMINISTERED 3 MONTHLY

29-Sept-2023 **Sertraline 100mg tablets** **Acute Medication (Past)**

56 tablet - 1 TABLET ONCE A DAY Notes for patient: for a medication rv in Feb 2024

31-Aug-2023 **Tramadol 200mg modified-release capsules** **Acute Medication (Past)**

60 capsule - 1 CAPSULE TWICE A DAY

31-Aug-2023 **Gabapentin 300mg capsules** **Acute Medication (Past)**

252 capsule - TAKE THREE CAPSULES UP TO THREE TIMES A DAY

31-Aug-2023 **Furosemide 40mg tablets** **Acute Medication (Past)**

56 tablet - 1 TABLET ONCE A DAY,

16-Aug-2023 **AeroChamber Plus (Trudell Medical UK Ltd)** **Acute Medication (Past)**

1 device -

16-Aug-2023 **Kelhale 100micrograms/dose inhaler (Cipla EU Ltd)** **Acute Medication (Past)**

400 dose - 1 PUFF TWICE A DAY

16-Aug-2023 **Kelhale 100micrograms/dose inhaler (Cipla EU Ltd)** **Repeat Medication (Past)**

400 dose - 1 PUFF TWICE A DAY

26-July-2023 **Tramadol 200mg modified-release capsules** **Acute Medication (Past)**

60 capsule - 1 CAPSULE TWICE A DAY

26-July-2023 **Gabapentin 300mg capsules** **Acute Medication (Past)**

252 capsule - TAKE THREE CAPSULES UP TO THREE TIMES A DAY

26-July-2023 Furosemide 40mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY,

26-July-2023 Hydroxocobalamin 1mg/1ml solution for injection ampoules Acute Medication (Past)
5 ampoule - TO BE ADMINISTERED 3 MONTHLY

26-July-2023 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

26-July-2023 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY Notes for patient: for a medication rv in Feb 2024

27-Jun-2023 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

27-Jun-2023 Gabapentin 300mg capsules Acute Medication (Past)
252 capsule - TAKE THREE CAPSULES UP TO THREE TIMES A DAY

27-Jun-2023 Furosemide 40mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY,

27-Jun-2023 Furosemide 40mg tablets Repeat Medication (Past)
56 tablet - 1 TABLET ONCE A DAY,

27-Jun-2023 Gabapentin 300mg capsules Repeat Medication (Past)
252 capsule - TAKE THREE CAPSULES UP TO THREE TIMES A DAY

27-Jun-2023 Tramadol 200mg modified-release capsules Repeat Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

26-Jun-2023 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

26-Jun-2023 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY Notes for patient: for a medication rv in Feb 2024

16-May-2023 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

16-May-2023 Furosemide 40mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY, PLEASE BOOK APPOINTMENT WITH CCTSON 01382 496717 FOR BLOOD TEST AND BP CHECK Notes for dispenser: please advise need to book for BP check at CCTS or with practice nurse

16-May-2023 Furosemide 40mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY, PLEASE BOOK APPOINTMENT WITH CCTSON 01382 496717 FOR BLOOD TEST AND BP CHECK Notes for dispenser: please advise need to book for BP check at CCTS or with practice nurse

16-May-2023 Tramadol 200mg modified-release capsules Repeat Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

15-May-2023 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

15-May-2023 Gabapentin 300mg capsules Acute Medication (Past)
252 capsule - TAKE THREE CAPSULES UP TO THREE TIMES A DAY

15-May-2023 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY Notes for patient: for a medication rv in Feb 2024

14-Apr-2023 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

14-Apr-2023 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

14-Apr-2023 Gabapentin 300mg capsules Acute Medication (Past)
252 capsule - TAKE THREE CAPSULES UP TO THREE TIMES A DAY

14-Apr-2023 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY Notes for patient: for a medication rv in Feb 2024

14-Apr-2023 Furosemide 40mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY, PLEASE BOOK APPOINTMENT WITH CCTSON 01382 496717 FOR BLOOD TEST AND BP CHECK

14-Apr-2023 Furosemide 40mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY, PLEASE BOOK APPOINTMENT WITH CCTSON 01382 496717 FOR BLOOD TEST AND BP CHECK

14-Apr-2023 Hydroxocobalamin 1mg/1ml solution for injection ampoules Repeat Medication (Past)
5 ampoule - TO BE ADMINISTERED 3 MONTHLY

14-Mar-2023 Furosemide 40mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY, PLEASE BOOK APPOINTMENT WITH CCTSON 01382 496717 FOR BLOOD TEST AND BP CHECK

14-Mar-2023 Furosemide 40mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY, PLEASE BOOK APPOINTMENT WITH CCTSON 01382 496717 FOR BLOOD TEST AND BP CHECK

14-Mar-2023 Tramadol 200mg modified-release capsules Repeat Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

14-Mar-2023 Salbutamol 100micrograms/dose inhaler CFC free Repeat Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

13-Mar-2023 Gabapentin 300mg capsules Acute Medication (Past)
252 capsule - TAKE THREE CAPSULES UP TO THREE TIMES A DAY

13-Mar-2023 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

13-Mar-2023 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

15-Feb-2023 Sertraline 100mg tablets Repeat Medication (Past)

56 tablet - 1 TABLET ONCE A DAY Notes for patient: for a medication rv in Feb 2024

15-Feb-2023 Gabapentin 300mg capsules Repeat Medication (Past)

252 capsule - TAKE THREE CAPSULES UP TO THREE TIMES A DAY

10-Feb-2023 Furosemide 40mg tablets Acute Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

10-Feb-2023 Gabapentin 300mg capsules Acute Medication (Past)

252 capsule - TAKE THREE CAPSULES UP TO THREE TIMES A DAY Notes for patient: PLEASE ARRANGE A ROUTINE GP APPOINTMENT TO REVIEW THIS MEDICATION BEFORE THIS SUPPLY RUNS OUT

10-Feb-2023 Sertraline 100mg tablets Acute Medication (Past)

28 tablet - 1 TABLET ONCE A DAY Notes for patient: PLEASE ARRANGE A ROUTINE GP APPOINTMENT TO REVIEW THIS MEDICATION BEFORE THIS SUPPLY RUNS OUT

10-Feb-2023 Sertraline 100mg tablets Repeat Medication (Past)

28 tablet - 1 TABLET ONCE A DAY Notes for patient: PLEASE ARRANGE A ROUTINE GP APPOINTMENT TO REVIEW THIS MEDICATION BEFORE THIS SUPPLY RUNS OUT

10-Feb-2023 Gabapentin 300mg capsules Repeat Medication (Past)

252 capsule - TAKE THREE CAPSULES UP TO THREE TIMES A DAY Notes for patient: PLEASE ARRANGE A ROUTINE GP APPOINTMENT TO REVIEW THIS MEDICATION BEFORE THIS SUPPLY RUNS OUT

10-Feb-2023 Tramadol 200mg modified-release capsules Repeat Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

10-Feb-2023 Furosemide 40mg tablets Repeat Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

09-Feb-2023 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

09-Feb-2023 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED

09-Jan-2023 Sertraline 100mg tablets Acute Medication (Past)

28 tablet - 1 TABLET ONCE A DAY Notes for patient: PLEASE ARRANGE A ROUTINE GP APPOINTMENT TO REVIEW THIS MEDICATION BEFORE THIS SUPPLY RUNS OUT

09-Jan-2023 Gabapentin 300mg capsules Acute Medication (Past)

252 capsule - TAKE THREE CAPSULES UP TO THREE TIMES A DAY Notes for patient: PLEASE ARRANGE A ROUTINE GP APPOINTMENT TO REVIEW THIS MEDICATION BEFORE THIS SUPPLY RUNS OUT

09-Jan-2023 Gabapentin 300mg capsules Repeat Medication (Past)

252 capsule - TAKE THREE CAPSULES UP TO THREE TIMES A DAY Notes for patient: PLEASE ARRANGE A ROUTINE GP APPOINTMENT TO REVIEW THIS MEDICATION BEFORE THIS SUPPLY RUNS OUT

09-Jan-2023 Sertraline 100mg tablets Repeat Medication (Past)

28 tablet - 1 TABLET ONCE A DAY Notes for patient: PLEASE ARRANGE A ROUTINE GP APPOINTMENT TO REVIEW THIS MEDICATION BEFORE THIS SUPPLY RUNS OUT

06-Jan-2023 Furosemide 40mg tablets Acute Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

06-Jan-2023 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

06-Jan-2023 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED

16-Dec-2022 Sertraline 100mg tablets Acute Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

16-Dec-2022 Furosemide 40mg tablets Acute Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

16-Dec-2022 Gabapentin 300mg capsules Acute Medication (Past)

252 capsule - TAKE THREE CAPSULES UP TO THREE TIMES A DAY

16-Dec-2022 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

24-Nov-2022 Sertraline 100mg tablets Acute Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

24-Nov-2022 Furosemide 40mg tablets Acute Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

24-Nov-2022 Gabapentin 300mg capsules Acute Medication (Past)

252 capsule - TAKE THREE CAPSULES UP TO THREE TIMES A DAY

24-Nov-2022 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

03-Nov-2022 Sertraline 100mg tablets Acute Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

03-Nov-2022 Furosemide 40mg tablets Repeat Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

03-Nov-2022 Sertraline 100mg tablets Repeat Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

02-Nov-2022 Gabapentin 300mg capsules Acute Medication (Past)

252 capsule - TAKE THREE CAPSULES UP TO THREE TIMES A DAY

02-Nov-2022 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

02-Nov-2022 Furosemide 40mg tablets Acute Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

18-Oct-2022 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

18-Oct-2022 Gabapentin 300mg capsules Acute Medication (Past)

84 capsule - TAKE THREE CAPSULES UP TO THREE TIMES A DAY

18-Oct-2022 Tramadol 200mg modified-release capsules Repeat Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

18-Oct-2022 Gabapentin 300mg capsules Repeat Medication (Past)

252 capsule - TAKE THREE CAPSULES UP TO THREE TIMES A DAY

13-Oct-2022 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED

13-Oct-2022 Furosemide 40mg tablets Acute Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

13-Oct-2022 Gabapentin 300mg capsules Acute Medication (Past)

168 capsule - TAKE TWO CAPSULES THREE TIMES DAILY

13-Oct-2022 Sertraline 100mg tablets Acute Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

13-Oct-2022 Hydroxocobalamin 1mg/1ml solution for injection ampoules Acute Medication (Past)

5 ampoule - TO BE ADMINISTERED 3 MONTHLY

13-Oct-2022 Salbutamol 100micrograms/dose inhaler CFC free Repeat Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED

21-Sept-2022 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY Notes for patient: PLEASE ARRANGE A ROUTINE FACE TO FACE GP APPOINTMENT FOR A PAIN REVIEW

21-Sept-2022 Furosemide 40mg tablets Acute Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

21-Sept-2022 Furosemide 40mg tablets Repeat Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

21-Sept-2022 Tramadol 200mg modified-release capsules Repeat Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY Notes for patient: PLEASE ARRANGE A ROUTINE FACE TO FACE GP APPOINTMENT FOR A PAIN REVIEW

16-Sept-2022 Gabapentin 300mg capsules Acute Medication (Past)

168 capsule - TAKE TWO CAPSULES THREE TIMES DAILY

16-Sept-2022 Sertraline 100mg tablets Acute Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

16-Sept-2022 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED

23-Aug-2022 Gabapentin 300mg capsules Acute Medication (Past)

168 capsule - TAKE TWO CAPSULES THREE TIMES DAILY

23-Aug-2022 Sertraline 100mg tablets Acute Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

23-Aug-2022 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED

23-Aug-2022 Furosemide 40mg tablets Acute Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

23-Aug-2022 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

23-Aug-2022 Sertraline 100mg tablets Repeat Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

23-Aug-2022 Gabapentin 300mg capsules Repeat Medication (Past)

168 capsule - TAKE TWO CAPSULES THREE TIMES DAILY

22-July-2022 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED

22-July-2022 Furosemide 40mg tablets Acute Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

22-July-2022 Sertraline 100mg tablets Acute Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

22-July-2022 Gabapentin 300mg capsules Acute Medication (Past)

168 capsule - TAKE TWO CAPSULES THREE TIMES DAILY

22-July-2022 Tramadol 200mg modified-release capsules Acute Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

21-Jun-2022 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)

200 dose - 2 PUFFS WHEN REQUIRED

21-Jun-2022 Furosemide 40mg tablets Acute Medication (Past)

28 tablet - 1 TABLET ONCE A DAY

21-Jun-2022 Gabapentin 300mg capsules Acute Medication (Past)

168 capsule - TAKE TWO CAPSULES THREE TIMES DAILY

21-Jun-2022 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

21-Jun-2022 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

21-Jun-2022 Furosemide 40mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

21-Jun-2022 Salbutamol 100micrograms/dose inhaler CFC free Repeat Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

13-May-2022 Gabapentin 300mg capsules Acute Medication (Past)
168 capsule - TAKE TWO CAPSULES THREE TIMES DAILY

13-May-2022 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

13-May-2022 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

13-May-2022 Furosemide 40mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

13-May-2022 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

13-May-2022 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

13-May-2022 Gabapentin 300mg capsules Repeat Medication (Past)
168 capsule - TAKE TWO CAPSULES THREE TIMES DAILY

13-May-2022 Hydroxocobalamin 1mg/1ml solution for injection ampoules Repeat Medication (Past)
5 ampoule - TO BE ADMINISTERED 3 MONTHLY

15-Apr-2022 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

15-Apr-2022 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

15-Apr-2022 Furosemide 40mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

15-Apr-2022 Gabapentin 300mg capsules Acute Medication (Past)
168 capsule - TAKE TWO CAPSULES THREE TIMES DAILY

15-Apr-2022 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

23-Mar-2022 Furosemide 40mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

17-Mar-2022 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

17-Mar-2022 Gabapentin 300mg capsules Acute Medication (Past)
168 capsule - TAKE TWO CAPSULES THREE TIMES DAILY

17-Mar-2022 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

17-Mar-2022 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

17-Mar-2022 Tramadol 200mg modified-release capsules Repeat Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

02-Mar-2022 Furosemide 20mg tablets Acute Medication (Past)
14 tablet - 1 TABLET ONCE A DAY

02-Mar-2022 Flucloxacillin 500mg capsules Acute Medication (Past)
56 capsule - TAKE TWO CAPSULES FOUR TIMES DAILY

02-Mar-2022 Epimax isomol gel (Aspire Pharma Ltd) Acute Medication (Past)
500 gram - APPLY AS DIRECTED

23-Feb-2022 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

23-Feb-2022 Gabapentin 300mg capsules Acute Medication (Past)
168 capsule - TAKE TWO CAPSULES THREE TIMES DAILY

23-Feb-2022 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

23-Feb-2022 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

10-Feb-2022 Furosemide 40mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

10-Feb-2022 Gabapentin 300mg capsules Repeat Medication (Past)
168 capsule - TAKE TWO CAPSULES THREE TIMES DAILY

20-Jan-2022 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

20-Jan-2022 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

20-Jan-2022 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

20-Jan-2022 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

20-Jan-2022 Salbutamol 100micrograms/dose inhaler CFC free Repeat Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

16-Dec-2021 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

16-Dec-2021 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

16-Dec-2021 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

16-Dec-2021 Hydroxocobalamin 1mg/1ml solution for injection ampoules Acute Medication (Past)
5 ampoule - TO BE ADMINISTERED 3 MONTHLY

16-Dec-2021 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

10-Nov-2021 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

10-Nov-2021 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

10-Nov-2021 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

10-Nov-2021 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

10-Nov-2021 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

18-Oct-2021 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

18-Oct-2021 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

18-Oct-2021 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

08-Oct-2021 Furosemide 20mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

10-Sept-2021 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

10-Sept-2021 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

09-Sept-2021 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

09-Sept-2021 Tramadol 200mg modified-release capsules Repeat Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

17-Aug-2021 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

17-Aug-2021 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

17-Aug-2021 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

17-Aug-2021 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

27-July-2021 Furosemide 20mg tablets Acute Medication (Past)
28 tablet - ONE TABLET IN THE MORNING

27-July-2021 Anusol cream (Church & Dwight UK Ltd) Acute Medication (Past)
23 gram - APPLY AFTER EVERY BOWEL MOVEMENT AND BEFORE BED

22-July-2021 Hydroxocobalamin 1mg/1ml solution for injection ampoules Acute Medication (Past)
5 ampoule - TO BE ADMINISTERED 3 MONTHLY

22-July-2021 Hydroxocobalamin 1mg/1ml solution for injection ampoules Repeat Medication (Past)
5 ampoule - TO BE ADMINISTERED 3 MONTHLY

14-July-2021 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

14-July-2021 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

14-July-2021 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

02-July-2021 Laxido Orange oral powder sachets sugar free (Galen Ltd) Acute Medication (Past)
20 sachet - TAKE 1-2 SACHETS DAILY

02-July-2021 Flucloxacillin 500mg capsules Acute Medication (Past)
28 capsule - TAKE 1 FOUR TIMES A DAY

09-Jun-2021 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

09-Jun-2021 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

09-Jun-2021 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

10-May-2021 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

10-May-2021 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

10-May-2021 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

10-May-2021 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

10-May-2021 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

01-Apr-2021 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

01-Apr-2021 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

01-Apr-2021 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

01-Mar-2021 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

01-Mar-2021 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

01-Mar-2021 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

01-Mar-2021 Desogestrel 75microgram tablets Acute Medication (Past)
168 tablet - 1 TABLET ONCE A DAY Notes for patient: PLEASE MAKE AN APPOINTMENT FOR UPTO DATE SMEAR

27-Jan-2021 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

27-Jan-2021 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

27-Jan-2021 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

27-Jan-2021 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

27-Jan-2021 Qvar 100 inhaler (Teva UK Ltd) Acute Medication (Past)
200 dose - 1 PUFF TWICE A DAY Notes for patient: pls phone to make an appointment with copd nurse if symptoms not under control

27-Jan-2021 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

27-Jan-2021 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

27-Jan-2021 Tramadol 200mg modified-release capsules Repeat Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

23-Dec-2020 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

23-Dec-2020 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

23-Dec-2020 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

26-Nov-2020 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

26-Nov-2020 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

26-Nov-2020 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

26-Nov-2020 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

26-Nov-2020 Qvar 100 inhaler (Teva UK Ltd) Acute Medication (Past)
200 dose - 1 PUFF TWICE A DAY Notes for patient: pls phone to make an appointment with copd nurse if symptoms not under control

06-Nov-2020 Hydroxocobalamin 1mg/1ml solution for injection ampoules Acute Medication (Past)
5 ampoule - TO BE ADMINISTERED 3 MONTHLY

30-Oct-2020 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

30-Oct-2020 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

30-Oct-2020 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

30-Oct-2020 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

30-Oct-2020 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

30-Oct-2020 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

30-Oct-2020 Salbutamol 100micrograms/dose inhaler CFC free Repeat Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

29-Sept-2020 Desogestrel 75microgram tablets Acute Medication (Past)
168 tablet - 1 TABLET ONCE A DAY Notes for patient: PLEASE MAKE AN APPOINTMENT FOR UPTO DATE SMEAR

28-Sept-2020 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

28-Sept-2020 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

28-Sept-2020 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

28-Sept-2020 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

28-Sept-2020 Qvar 100 inhaler (Teva UK Ltd) Acute Medication (Past)
200 dose - 1 PUFF TWICE A DAY Notes for patient: pls phone to make an appointment with copd nurse if symptoms not under control

19-Aug-2020 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

19-Aug-2020 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

19-Aug-2020 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

06-July-2020 Desogestrel 75microgram tablets Acute Medication (Past)
168 tablet - 1 TABLET ONCE A DAY

06-July-2020 Qvar 100 inhaler (Teva UK Ltd) Acute Medication (Past)
200 dose - 1 PUFF TWICE A DAY Notes for patient: pls phone to make an appointment with copd nurse if symptoms not under control

03-July-2020 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

03-July-2020 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

03-July-2020 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

03-July-2020 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

03-July-2020 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

03-July-2020 Tramadol 200mg modified-release capsules Repeat Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

10-Jun-2020 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

10-Jun-2020 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

10-Jun-2020 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

10-Jun-2020 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

06-May-2020 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

06-May-2020 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

06-May-2020 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

15-Apr-2020 Nystatin 100,000units/ml oral suspension Acute Medication (Past)
30 ml - 1ML DROPPED INTO THE MOUTH FOUR TIMES A DAY

15-Apr-2020 Metronidazole 0.75% gel Acute Medication (Past)
90 gram - APPLY TWICE A DAY

10-Apr-2020 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

10-Apr-2020 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

10-Apr-2020 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

10-Apr-2020 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

17-Mar-2020 Desogestrel 75microgram tablets Acute Medication (Past)
168 tablet - 1 TABLET ONCE A DAY

16-Mar-2020 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

16-Mar-2020 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

16-Mar-2020 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

16-Mar-2020 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

18-Feb-2020 Senna 7.5mg tablets Acute Medication (Past)
56 tablet - 2 TABLETS AT NIGHT

18-Feb-2020 Nystatin 100,000units/ml oral suspension Acute Medication (Past)
30 ml - 1ML DROPPED INTO THE MOUTH FOUR TIMES A DAY

13-Feb-2020 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

13-Feb-2020 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

13-Feb-2020 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

20-Jan-2020 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

20-Jan-2020 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

20-Jan-2020 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

20-Jan-2020 Tramadol 200mg modified-release capsules Repeat Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

20-Dec-2019 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

20-Dec-2019 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

20-Dec-2019 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

20-Dec-2019 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

20-Dec-2019 Salbutamol 100micrograms/dose inhaler CFC free Repeat Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

22-Nov-2019 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

22-Nov-2019 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

22-Nov-2019 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

22-Nov-2019 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

15-Oct-2019 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

15-Oct-2019 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

15-Oct-2019 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

15-Oct-2019 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

15-Oct-2019 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

02-Oct-2019 Epimax cream (Dermato Logical Ltd) Acute Medication (Past)
500 gram - TO LEGS EVERY DAY

18-Sept-2019 Furosemide 20mg tablets Acute Medication (Past)
28 tablet - ONE TABLET IN THE MORNING AND ONE IN THE AFTERNOON

06-Sept-2019 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

06-Sept-2019 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

06-Sept-2019 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

21-Aug-2019 Hydroxocobalamin 1mg/1ml solution for injection ampoules Acute Medication (Past)
5 ampoule - TO BE ADMINISTERED 3 MONTHLY

08-Aug-2019 Kelhale 100micrograms/dose inhaler (Cipla EU Ltd) Acute Medication (Past)
200 dose - 1 PUFF TWICE A DAY

07-Aug-2019 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

07-Aug-2019 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

07-Aug-2019 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

04-July-2019 Furosemide 20mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

14-Jun-2019 Desogestrel 75microgram tablets Acute Medication (Past)
168 tablet - 1 TABLET ONCE A DAY

14-Jun-2019 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

14-Jun-2019 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY Notes for dispenser: Please inform patient of the new prescription restrictions for Gabapentin for 28 day supply only.

14-Jun-2019 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

14-Jun-2019 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

14-Jun-2019 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

14-Jun-2019 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

14-Jun-2019 Tramadol 200mg modified-release capsules Repeat Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

31-May-2019 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

31-May-2019 Furosemide 20mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

31-May-2019 Salbutamol 100micrograms/dose inhaler CFC free Repeat Medication (Past)
200 dose - 2 PUFFS WHEN REQUIRED

10-May-2019 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

10-May-2019 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY Notes for dispenser: Please inform patient of the new prescription restrictions for Gabapentin for 28 day supply only.

10-May-2019 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

11-Apr-2019 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

11-Apr-2019 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY Notes for dispenser: Please inform patient of the new prescription restrictions for Gabapentin for 28 day supply only.

11-Apr-2019 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

18-Mar-2019 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

18-Mar-2019 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY Notes for dispenser: Please inform patient of the new prescription restrictions for Gabapentin for 28 day supply only.

18-Mar-2019 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

18-Mar-2019 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - TAKE 2 PUFFS WHEN REQUIRED

18-Mar-2019 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

18-Mar-2019 Robaxin 750 tablets (Almirall Ltd) Repeat Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

18-Mar-2019 Qvar 100 inhaler (Teva UK Ltd) Repeat Medication (Past)
200 dose - 1 PUFF TWICE A DAY

13-Mar-2019 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY Notes for dispenser: Please inform patient of the new prescription restrictions for Gabapentin for 28 day supply only.

11-Mar-2019 Hydroxocobalamin 1mg/1ml solution for injection ampoules Repeat Medication (Past)
5 ampoule - TO BE ADMINISTERED 3 MONTHLY

11-Feb-2019 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

11-Feb-2019 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

11-Feb-2019 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

09-Jan-2019 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

09-Jan-2019 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

09-Jan-2019 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

09-Jan-2019 Desogestrel 75microgram tablets Acute Medication (Past)
168 tablet - 1 TABLET ONCE A DAY

12-Dec-2018 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

12-Dec-2018 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

12-Dec-2018 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

12-Dec-2018 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

12-Dec-2018 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

12-Dec-2018 Tramadol 200mg modified-release capsules Repeat Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

07-Dec-2018 Furosemide 20mg tablets Acute Medication (Past)
10 tablet - 1 TABLET ONCE A DAY FOR FLUID RETENTION

07-Dec-2018 Folic acid 5mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

30-Nov-2018 Hydroxocobalamin 1mg/1ml solution for injection ampoules Acute Medication (Past)
5 ampoule - FOR INJECTION

23-Nov-2018 Furosemide 20mg tablets Acute Medication (Past)
14 tablet - 1 TABLET ONCE A DAY FOR FLUID RETENTION

23-Nov-2018 Hydroxocobalamin 1mg/1ml solution for injection ampoules Acute Medication (Past)
5 ampoule - FOR INJECTION

23-Nov-2018 Folic acid 5mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

07-Nov-2018 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

07-Nov-2018 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

07-Nov-2018 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

01-Nov-2018 Fluconazole 50mg capsules Acute Medication (Past)
7 capsule - ONE DAILY

25-Oct-2018 Amoxicillin 500mg capsules Acute Medication (Past)
15 capsule - ONE CAPSULE THREE TIMES A DAY

02-Oct-2018 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

02-Oct-2018 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

02-Oct-2018 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

03-Sept-2018 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

03-Sept-2018 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

03-Sept-2018 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

03-Sept-2018 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

03-Sept-2018 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

20-Aug-2018 Desogestrel 75microgram tablets Acute Medication (Past)
168 tablet - 1 TABLET ONCE A DAY

02-Aug-2018 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

02-Aug-2018 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

02-Aug-2018 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

05-July-2018 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

05-July-2018 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

05-July-2018 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

04-Jun-2018 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - TAKE 2 PUFFS WHEN REQUIRED

04-Jun-2018 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

04-Jun-2018 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

04-Jun-2018 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

04-Jun-2018 Robaxin 750 tablets (Almirall Ltd) Acute Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

04-Jun-2018 Robaxin 750 tablets (Almirall Ltd) Repeat Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

04-Jun-2018 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

04-Jun-2018 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

04-Jun-2018 Tramadol 200mg modified-release capsules Repeat Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

09-May-2018 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - TAKE 2 PUFFS WHEN REQUIRED

09-May-2018 Robaxin 750 tablets (Almirall Ltd) Acute Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

09-May-2018 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

09-May-2018 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

09-May-2018 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

11-Apr-2018 Robaxin 750 tablets (Almirall Ltd) Acute Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

11-Apr-2018 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

11-Apr-2018 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

11-Apr-2018 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

11-Apr-2018 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - TAKE 2 PUFFS WHEN REQUIRED

11-Apr-2018 Qvar 100 inhaler (Teva UK Ltd) Acute Medication (Past)
200 dose - 1 PUFF TWICE A DAY

11-Apr-2018 Qvar 100 inhaler (Teva UK Ltd) Repeat Medication (Past)
200 dose - 1 PUFF TWICE A DAY

11-Apr-2018 Salbutamol 100micrograms/dose inhaler CFC free Repeat Medication (Past)
200 dose - TAKE 2 PUFFS WHEN REQUIRED

15-Mar-2018 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

15-Mar-2018 Qvar 100 inhaler (Teva UK Ltd) Acute Medication (Past)
200 dose - 1 PUFF TWICE A DAY

15-Mar-2018 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - TAKE 2 PUFFS WHEN REQUIRED

15-Mar-2018 Robaxin 750 tablets (Almirall Ltd) Acute Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

15-Mar-2018 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

15-Mar-2018 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

15-Mar-2018 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

15-Mar-2018 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

15-Mar-2018 Robaxin 750 tablets (Almirall Ltd) Repeat Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

15-Feb-2018 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

15-Feb-2018 Qvar 100 inhaler (Teva UK Ltd) Acute Medication (Past)
200 dose - 1 PUFF TWICE A DAY

15-Feb-2018 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - TAKE 2 PUFFS WHEN REQUIRED

15-Feb-2018 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

15-Feb-2018 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

15-Feb-2018 Robaxin 750 tablets (Almirall Ltd) Acute Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

15-Feb-2018 Desogestrel 75microgram tablets Acute Medication (Past)
168 tablet - 1 TABLET ONCE A DAY

02-Feb-2018 Capsaicin 0.025% cream Acute Medication (Past)
45 gram - APPLY FOUR TIMES A DAY

19-Jan-2018 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

19-Jan-2018 Qvar 100 inhaler (Teva UK Ltd) Acute Medication (Past)
200 dose - 1 PUFF TWICE A DAY

19-Jan-2018 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - TAKE 2 PUFFS WHEN REQUIRED

19-Jan-2018 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

19-Jan-2018 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

19-Jan-2018 Robaxin 750 tablets (Almirall Ltd) Acute Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

28-Dec-2017 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

28-Dec-2017 Qvar 100 inhaler (Teva UK Ltd) Acute Medication (Past)
200 dose - 1 PUFF TWICE A DAY

28-Dec-2017 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - TAKE 2 PUFFS WHEN REQUIRED

28-Dec-2017 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

28-Dec-2017 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

28-Dec-2017 Robaxin 750 tablets (Almirall Ltd) Acute Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

28-Dec-2017 Robaxin 750 tablets (Almirall Ltd) Repeat Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

28-Dec-2017 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

28-Dec-2017 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

28-Dec-2017 Salbutamol 100micrograms/dose inhaler CFC free Repeat Medication (Past)
200 dose - TAKE 2 PUFFS WHEN REQUIRED

28-Dec-2017 Qvar 100 inhaler (Teva UK Ltd) Repeat Medication (Past)
200 dose - 1 PUFF TWICE A DAY

28-Dec-2017 Tramadol 200mg modified-release capsules Repeat Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

06-Dec-2017 Robaxin 750 tablets (Almirall Ltd) Acute Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

06-Dec-2017 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

06-Dec-2017 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

06-Dec-2017 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - TAKE 2 PUFFS WHEN REQUIRED

06-Dec-2017 Qvar 100 inhaler (Teva UK Ltd) Acute Medication (Past)
200 dose - 1 PUFF TWICE A DAY

06-Dec-2017 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

10-Nov-2017 Robaxin 750 tablets (Almirall Ltd) Acute Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

10-Nov-2017 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

10-Nov-2017 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

10-Nov-2017 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - TAKE 2 PUFFS WHEN REQUIRED

10-Nov-2017 Qvar 100 inhaler (Teva UK Ltd) Acute Medication (Past)
200 dose - 1 PUFF TWICE A DAY

10-Nov-2017 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

25-Oct-2017 Ibuprofen 5%gel Acute Medication (Past)
100 gram - APPLY THREE TIMES A DAY TO THE AFFECTED AREA(S)

17-Oct-2017 Robaxin 750 tablets (Almirall Ltd) Acute Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

17-Oct-2017 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

17-Oct-2017 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

17-Oct-2017 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - TAKE 2 PUFFS WHEN REQUIRED

17-Oct-2017 Qvar 100 inhaler (Teva UK Ltd) Acute Medication (Past)
200 dose - 1 PUFF TWICE A DAY

17-Oct-2017 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

17-Oct-2017 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

17-Oct-2017 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

17-Oct-2017 Robaxin 750 tablets (Almirall Ltd) Repeat Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

18-Sept-2017 Salbutamol 100micrograms/dose inhaler CFC free Acute Medication (Past)
200 dose - TAKE 2 PUFFS WHEN REQUIRED

18-Sept-2017 Qvar 100 inhaler (Teva UK Ltd) Acute Medication (Past)
200 dose - 1 PUFF TWICE A DAY

18-Sept-2017 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

18-Sept-2017 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

18-Sept-2017 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

23-Aug-2017 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

23-Aug-2017 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

23-Aug-2017 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

02-Aug-2017 Ralvo 700mg medicated plasters (Grunenthal Ltd) Acute Medication (Past)
15 plaster - APPLY ONCE DAILY FOR UP TO 12 HOURS FOLLOWED BY A 12 HOUR PLASTER FREE PERIOD (SAME ITEM AS LIDOCAINE 5% MEDICATED PLASTER/ VERSATIS)

02-Aug-2017 Qvar 100 inhaler (Teva UK Ltd) Repeat Medication (Past)
200 dose - 1 PUFF TWICE A DAY

02-Aug-2017 Salbutamol 100micrograms/dose inhaler CFC free Repeat Medication (Past)
200 dose - TAKE 2 PUFFS WHEN REQUIRED

14-July-2017 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

14-July-2017 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

14-July-2017 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

14-July-2017 Robaxin 750 tablets (Almirall Ltd) Acute Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

14-July-2017 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

14-July-2017 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

14-July-2017 Tramadol 200mg modified-release capsules Repeat Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

13-July-2017 Desogestrel 75microgram tablets Acute Medication (Past)
168 tablet - 1 TABLET ONCE A DAY

05-July-2017 Qvar 100 inhaler (Teva UK Ltd) Acute Medication (Past)
200 dose - 1 PUFF TWICE A DAY

05-July-2017 AeroChamber Plus (GlaxoSmithKline UK Ltd) Acute Medication (Past)
1 device -

21-Jun-2017 Peak flow meter standard range Acute Medication (Past)
1 device -

21-Jun-2017 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

21-Jun-2017 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Repeat Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

20-Jun-2017 Robaxin 750 tablets (Almirall Ltd) Acute Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

20-Jun-2017 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

20-Jun-2017 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

20-Jun-2017 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

19-Jun-2017 Diclofenac sodium 50mg gastro-resistant tablets Acute Medication (Past)
42 tablet - 1 TABLET THREE TIMES A DAY

19-Jun-2017 Diazepam 2mg tablets Acute Medication (Past)
28 tablet - 1 TABLET 4 TIMES DAILY

25-May-2017 Robaxin 750 tablets (Almirall Ltd) Acute Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

25-May-2017 Robaxin 750 tablets (Almirall Ltd) Repeat Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

24-May-2017 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

24-May-2017 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

24-May-2017 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

24-May-2017 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

04-May-2017 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Repeat Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

26-Apr-2017 Robaxin 750 tablets (Almirall Ltd) Acute Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

26-Apr-2017 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

26-Apr-2017 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

26-Apr-2017 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

26-Apr-2017 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

26-Apr-2017 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

26-Apr-2017 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

29-Mar-2017 Robaxin 750 tablets (Almirall Ltd) Acute Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

29-Mar-2017 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

29-Mar-2017 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

29-Mar-2017 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

29-Mar-2017 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

29-Mar-2017 Desogestrel 75microgram tablets Acute Medication (Past)
84 tablet - 1 TABLET ONCE A DAY

01-Mar-2017 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

01-Mar-2017 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

01-Mar-2017 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

01-Mar-2017 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

01-Mar-2017 Robaxin 750 tablets (Almirall Ltd) Acute Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

01-Mar-2017 Robaxin 750 tablets (Almirall Ltd) Repeat Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

03-Feb-2017 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

03-Feb-2017 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

03-Feb-2017 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

03-Feb-2017 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

03-Feb-2017 Robaxin 750 tablets (Almirall Ltd) Acute Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

03-Feb-2017 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

03-Feb-2017 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

03-Feb-2017 Tramadol 200mg modified-release capsules Repeat Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

03-Feb-2017 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Repeat Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

10-Jan-2017 Robaxin 750 tablets (Almirall Ltd) Acute Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

10-Jan-2017 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

10-Jan-2017 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

10-Jan-2017 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

10-Jan-2017 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

05-Jan-2017 Aciclovir 800mg tablets Acute Medication (Past)
35 tablet - ONE FIVE TIMES DAILY

05-Jan-2017 Bendroflumethiazide 2.5mg tablets Acute Medication (Past)
28 tablet - TAKE ONE IN THE MORNING

15-Dec-2016 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

15-Dec-2016 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

15-Dec-2016 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

15-Dec-2016 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

15-Dec-2016 Robaxin 750 tablets (Almirall Ltd) Acute Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

15-Dec-2016 Methocarbamol 750mg tablets Repeat Medication (Past)
200 tablet - 2 TABLETS FOUR TIMES DAILY

15-Dec-2016 Robaxin 750 tablets (Almirall Ltd) Repeat Medication (Past)
224 tablet - 2 TABLETS FOUR TIMES DAILY

13-Dec-2016 Desogestrel 75microgram tablets Acute Medication (Past)
84 tablet - 1 TABLET ONCE A DAY

18-Nov-2016 Methocarbamol 750mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS FOUR TIMES DAILY

18-Nov-2016 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

18-Nov-2016 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

18-Nov-2016 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

18-Nov-2016 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

18-Nov-2016 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

18-Nov-2016 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

26-Oct-2016 Methocarbamol 750mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS FOUR TIMES DAILY

26-Oct-2016 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

26-Oct-2016 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

26-Oct-2016 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

26-Oct-2016 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

05-Oct-2016 Methocarbamol 750mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS FOUR TIMES DAILY

30-Sept-2016 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

30-Sept-2016 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

30-Sept-2016 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

30-Sept-2016 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

31-Aug-2016 Bendroflumethiazide 2.5mg tablets Acute Medication (Past)
28 tablet - TAKE ONE IN THE MORNING

31-Aug-2016 Aciclovir 800mg tablets Acute Medication (Past)
35 tablet - 1 TABLET 5 TIMES DAILY

31-Aug-2016 Desogestrel 75microgram tablets Acute Medication (Past)
84 tablet - 1 TABLET ONCE A DAY

31-Aug-2016 Methocarbamol 750mg tablets Repeat Medication (Past)
200 tablet - 2 TABLETS FOUR TIMES DAILY

31-Aug-2016 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

31-Aug-2016 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

31-Aug-2016 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

31-Aug-2016 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

31-Aug-2016 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

31-Aug-2016 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

31-Aug-2016 Tramadol 200mg modified-release capsules Repeat Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

24-Aug-2016 Furosemide 20mg tablets Acute Medication (Past)
7 tablet - 1 TABLET ONCE A DAY FOR FLUID RETENTION

24-Aug-2016 Methocarbamol 750mg tablets Acute Medication (Past)
100 tablet - 2 TABLETS FOUR TIMES DAILY FOR SPASM

08-Aug-2016 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

08-Aug-2016 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

08-Aug-2016 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

08-Aug-2016 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Repeat Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

01-Aug-2016 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

27-July-2016 Methocarbamol 750mg tablets Acute Medication (Past)
100 tablet - 2 TABLETS FOUR TIMES DAILY FOR SPASM

27-July-2016 Furosemide 20mg tablets Acute Medication (Past)
14 tablet - 1 TABLET ONCE A DAY FOR FLUID RETENTION

11-July-2016 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

11-July-2016 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

11-July-2016 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

11-July-2016 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

06-July-2016 Furosemide 20mg tablets Acute Medication (Past)
14 tablet - 1 TABLET ONCE A DAY FOR FLUID RETENTION

06-July-2016 Cerazette 75microgram tablets (Merck Sharp & Dohme Ltd) Acute Medication (Past)
84 tablet - TAKE ONE DAILY Notes for patient: t

06-July-2016 Methocarbamol 750mg tablets Acute Medication (Past)
100 tablet - 2 TABLETS FOUR TIMES DAILY FOR SPASM

22-Jun-2016 Furosemide 20mg tablets Acute Medication (Past)
14 tablet - 1 TABLET ONCE A DAY FOR FLUID RETENTION

22-Jun-2016 Methocarbamol 750mg tablets Acute Medication (Past)
100 tablet - 2 TABLETS FOUR TIMES DAILY FOR SPASM

20-Jun-2016 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

20-Jun-2016 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

20-Jun-2016 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

01-Jun-2016 Trimethoprim 200mg tablets Acute Medication (Past)
6 tablet - ONE TABLET(S) TWICE A DAY FOR 3 DAYS

25-May-2016 Cerazette 75microgram tablets (Merck Sharp & Dohme Ltd) Repeat Medication (Past)
84 tablet - PRESCRIBE AS GENERIC FOR COST SAVINGS Notes for patient: t

16-May-2016 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

16-May-2016 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

16-May-2016 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

16-May-2016 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

16-May-2016 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

16-May-2016 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

16-May-2016 Baclofen 10mg tablets Repeat Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

25-Apr-2016 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

25-Apr-2016 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

25-Apr-2016 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

25-Apr-2016 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

25-Apr-2016 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

25-Apr-2016 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

06-Apr-2016 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

06-Apr-2016 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

06-Apr-2016 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

06-Apr-2016 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

06-Apr-2016 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

06-Apr-2016 Tramadol 200mg modified-release capsules Repeat Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

14-Mar-2016 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

14-Mar-2016 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

14-Mar-2016 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

14-Mar-2016 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

14-Mar-2016 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

02-Mar-2016 Cerazette 75microgram tablets (Merck Sharp & Dohme Ltd) Acute Medication (Past)
84 tablet - TAKE ONE DAILY Notes for patient: t

02-Mar-2016 Baclofen 10mg tablets Repeat Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

02-Mar-2016 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

23-Feb-2016 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

23-Feb-2016 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

23-Feb-2016 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

23-Feb-2016 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ...) Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

23-Feb-2016 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

23-Feb-2016 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

23-Feb-2016 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ...) Repeat Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

01-Feb-2016 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

01-Feb-2016 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

01-Feb-2016 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

01-Feb-2016 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

01-Feb-2016 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ...) Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

11-Jan-2016 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

11-Jan-2016 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

11-Jan-2016 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

11-Jan-2016 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

11-Jan-2016 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ...) Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

11-Jan-2016 Sertraline 100mg tablets Repeat Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

11-Jan-2016 Baclofen 10mg tablets Repeat Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

03-Dec-2015 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

03-Dec-2015 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

03-Dec-2015 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ...) Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

03-Dec-2015 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

03-Dec-2015 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

03-Dec-2015 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

03-Dec-2015 Sertraline 100mg tablets Repeat Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

09-Nov-2015 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

09-Nov-2015 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

09-Nov-2015 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

09-Nov-2015 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

09-Nov-2015 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

09-Nov-2015 Tramadol 200mg modified-release capsules Repeat Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

29-Oct-2015 Desogestrel 75microgram tablets Acute Medication (Past)
168 tablet - 1 TABLET ONCE A DAY

29-Oct-2015 Trimethoprim 200mg tablets Acute Medication (Past)
6 tablet - ONE TABLET(S) TWICE A DAY FOR 3 DAYS

21-Oct-2015 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

21-Oct-2015 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

21-Oct-2015 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

21-Oct-2015 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

21-Oct-2015 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

21-Oct-2015 Baclofen 10mg tablets Repeat Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

29-Sept-2015 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

29-Sept-2015 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

29-Sept-2015 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

29-Sept-2015 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

29-Sept-2015 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

02-Sept-2015 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

02-Sept-2015 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

02-Sept-2015 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

02-Sept-2015 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

11-Aug-2015 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

11-Aug-2015 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

11-Aug-2015 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

11-Aug-2015 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

11-Aug-2015 Baclofen 10mg tablets Repeat Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

11-Aug-2015 Sertraline 100mg tablets Repeat Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

22-July-2015 Cerazette 75microgram tablets (Merck Sharp & Dohme Ltd) Acute Medication (Past)
84 tablet - TAKE ONE DAILY Notes for patient: Please attend drop in clinic for a BP check before your next prescription is due. Thank You

22-July-2015 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

22-July-2015 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

22-July-2015 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

22-July-2015 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

22-July-2015 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

10-July-2015 Peak flow meter standard range Acute Medication (Past)
1 device -

10-July-2015 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
200 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

10-July-2015 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Repeat Medication (Past)
400 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

25-Jun-2015 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

25-Jun-2015 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

25-Jun-2015 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

25-Jun-2015 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

25-Jun-2015 Tramadol 200mg modified-release capsules Repeat Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

01-Jun-2015 Salamol 100micrograms/dose Easi-Breathe inhaler (Teva UK ... Acute Medication (Past)
200 dose - 1 TO 2 PUFFS UP TO FOUR TIMES DAILY AS REQUIRED

27-May-2015 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

27-May-2015 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

27-May-2015 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - TAKE 1 1/2 TABLETS THREE TIMES A DAY

27-May-2015 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

27-May-2015 Baclofen 10mg tablets Repeat Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

05-May-2015 Cerazette 75microgram tablets (Merck Sharp & Dohme Ltd) Acute Medication (Past)
84 tablet - TAKE ONE DAILY

29-Apr-2015 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

29-Apr-2015 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

29-Apr-2015 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

29-Apr-2015 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

01-Apr-2015 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

01-Apr-2015 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

01-Apr-2015 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

10-Mar-2015 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

10-Mar-2015 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

10-Mar-2015 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

10-Mar-2015 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

10-Mar-2015 Sertraline 100mg tablets Repeat Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

12-Feb-2015 Baclofen 10mg tablets Repeat Medication (Past)
200 tablet - 2 TABLETS THREE TIMES A DAY

11-Feb-2015 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - TAKE 1 1/2 TABLETS THREE TIMES A DAY

11-Feb-2015 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

11-Feb-2015 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

11-Feb-2015 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

11-Feb-2015 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

14-Jan-2015 Baclofen 10mg tablets Acute Medication (Past)
200 tablet - TAKE 1 1/2 TABLETS THREE TIMES A DAY

14-Jan-2015 Tramadol 200mg modified-release capsules Acute Medication (Past)
60 capsule - 1 CAPSULE TWICE A DAY

14-Jan-2015 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

14-Jan-2015 Sertraline 100mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY

14-Jan-2015 Cerazette 75microgram tablets (Merck Sharp & Dohme Ltd) Acute Medication (Past)

84 tablet - TAKE ONE DAILY

29-Dec-2014 Tramadol 200mg modified-release capsules Repeat Medication (Past)

60 capsule - 1 CAPSULE TWICE A DAY

29-Dec-2014 Baclofen 10mg tablets Repeat Medication (Past)

200 tablet - TAKE 1 1/2 TABLETS THREE TIMES A DAY

16-Dec-2014 Gabapentin 300mg capsules Acute Medication (Past)

336 capsule - 4 CAPSULES THREE TIMES DAILY

16-Dec-2014 Tramadol 50mg capsules Acute Medication (Past)

224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

18-Nov-2014 Baclofen 10mg tablets Acute Medication (Past)

168 tablet - 1 TABLET THREE TIMES A DAY

18-Nov-2014 Tramadol 50mg capsules Acute Medication (Past)

224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

18-Nov-2014 Gabapentin 300mg capsules Acute Medication (Past)

336 capsule - 4 CAPSULES THREE TIMES DAILY

18-Nov-2014 Gabapentin 300mg capsules Repeat Medication (Past)

336 capsule - 4 CAPSULES THREE TIMES DAILY

22-Oct-2014 Cerazette 75microgram tablets (Merck Sharp & Dohme Ltd) Acute Medication (Past)

84 tablet - TAKE ONE DAILY

22-Oct-2014 Baclofen 10mg tablets Acute Medication (Past)

168 tablet - 1 TABLET THREE TIMES A DAY

22-Oct-2014 Sertraline 100mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY

22-Oct-2014 Gabapentin 300mg capsules Acute Medication (Past)

336 capsule - 4 CAPSULES THREE TIMES DAILY

22-Oct-2014 Tramadol 50mg capsules Acute Medication (Past)

224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

29-Sept-2014 Seal-Tight limb protector foot/ankle CV27105 (Autono-Med ... Acute Medication (Past)

2 device - USE TO PROTECT

24-Sept-2014 Baclofen 10mg tablets Acute Medication (Past)

168 tablet - 1 TABLET THREE TIMES A DAY

24-Sept-2014 Gabapentin 300mg capsules Acute Medication (Past)

336 capsule - 4 CAPSULES THREE TIMES DAILY

24-Sept-2014 Tramadol 50mg capsules Acute Medication (Past)

224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

27-Aug-2014 Gabapentin 300mg capsules Acute Medication (Past)

336 capsule - 4 CAPSULES THREE TIMES DAILY

27-Aug-2014 Tramadol 50mg capsules Acute Medication (Past)

224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

31-July-2014 Baclofen 10mg tablets Acute Medication (Past)

168 tablet - TAKE 1/2 TABLET THREE TIMES A DAY AS DIRECTED BY FOR PAIN CLINIC

31-July-2014 Gabapentin 300mg capsules Repeat Medication (Past)

336 capsule - 4 CAPSULES THREE TIMES DAILY

31-July-2014 Sertraline 100mg tablets Repeat Medication (Past)

56 tablet - 1 TABLET ONCE A DAY

31-July-2014 Baclofen 10mg tablets Repeat Medication (Past)

168 tablet - TAKE 1/2 TABLET THREE TIMES A DAY AS DIRECTED BY FOR PAIN CLINIC

31-July-2014 Baclofen 10mg tablets Repeat Medication (Past)

168 tablet - 1 TABLET THREE TIMES A DAY

30-July-2014 Cerazette 75microgram tablets (Merck Sharp & Dohme Ltd) Acute Medication (Past)

84 tablet - TAKE ONE DAILY

30-July-2014 Tramadol 50mg capsules Acute Medication (Past)

224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

30-July-2014 Gabapentin 300mg capsules Acute Medication (Past)

336 capsule - 4 CAPSULES THREE TIMES DAILY

30-July-2014 Sertraline 100mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY

30-July-2014 Tramadol 50mg capsules Repeat Medication (Past)

224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

02-July-2014 Gabapentin 300mg capsules Acute Medication (Past)

336 capsule - 4 CAPSULES THREE TIMES DAILY

02-July-2014 Sertraline 100mg tablets Acute Medication (Past)

56 tablet - 1 TABLET ONCE A DAY

02-July-2014 Tramadol 50mg capsules Acute Medication (Past)

224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

04-Jun-2014 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

04-Jun-2014 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

04-Jun-2014 Cerazette 75microgram tablets (Merck Sharp & Dohme Ltd) Acute Medication (Past)
84 tablet - TAKE ONE DAILY

30-May-2014 Amitriptyline 10mg tablets Acute Medication (Past)
7 tablet - TAKE 1 AT NIGHT FOR 7 DAYS THEN STOP

30-May-2014 Baclofen 10mg tablets Acute Medication (Past)
84 tablet - TAKE 1/2 TABLET THREE TIMES A DAY AS DIRECTED BY FOR PAIN CLINIC

30-May-2014 Gabapentin 300mg capsules Acute Medication (Past)
84 capsule - 4 CAPSULES THREE TIMES DAILY

30-May-2014 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - 4 CAPSULES THREE TIMES DAILY

16-May-2014 Amitriptyline 25mg tablets Repeat Medication (Past)
28 tablet - TAKE ONE AT NIGHT

07-May-2014 Gabapentin 300mg capsules Acute Medication (Past)
252 capsule - 3 CAPSULES THREE TIMES DAILY

07-May-2014 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

07-May-2014 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

07-May-2014 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

17-Apr-2014 Sertraline 100mg tablets Repeat Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

17-Apr-2014 Gabapentin 300mg capsules Repeat Medication (Past)
252 capsule - 3 CAPSULES THREE TIMES DAILY

08-Apr-2014 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

08-Apr-2014 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

08-Apr-2014 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

31-Mar-2014 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - TAKE 4 TABS 3 TIMES DAILY

13-Mar-2014 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

13-Mar-2014 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

13-Mar-2014 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

13-Mar-2014 Cerazette 75microgram tablets (Merck Sharp & Dohme Ltd) Acute Medication (Past)
84 tablet - TAKE ONE DAILY

05-Mar-2014 Gabapentin 300mg capsules Acute Medication (Past)
336 capsule - TAKE 4 TABS 3 TIMES DAILY

05-Mar-2014 Gabapentin 300mg capsules Repeat Medication (Past)
336 capsule - TAKE 4 TABS 3 TIMES DAILY

11-Feb-2014 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

11-Feb-2014 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 TABS DAILY

11-Feb-2014 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

07-Feb-2014 Gabapentin 300mg capsules Acute Medication (Past)
63 capsule - 3 CAPSULE THREE TIMES DAILY

07-Feb-2014 Diclofenac sodium 50mg gastro-resistant tablets Acute Medication (Past)
84 tablet - 1 TABLET THREE TIMES A DAY

07-Feb-2014 Gabapentin 300mg capsules Repeat Medication (Past)
200 capsule - TAKE 4 TABS DAILY

07-Feb-2014 Tramadol 50mg capsules Repeat Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

14-Jan-2014 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

14-Jan-2014 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

14-Jan-2014 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

14-Jan-2014 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 TABS DAILY

14-Jan-2014 Sertraline 100mg tablets Repeat Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

17-Dec-2013 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

17-Dec-2013 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 TABS DAILY

17-Dec-2013 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

17-Dec-2013 Cerazette 75microgram tablets (Merck Sharp & Dohme Ltd) Acute Medication (Past)
84 tablet - TAKE ONE DAILY

17-Dec-2013 Amitriptyline 25mg tablets Repeat Medication (Past)
28 tablet - TAKE ONE AT NIGHT

20-Nov-2013 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

20-Nov-2013 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 TABS DAILY

20-Nov-2013 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

20-Nov-2013 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

04-Nov-2013 Terbinafine 250mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

23-Oct-2013 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

23-Oct-2013 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 TABS DAILY

23-Oct-2013 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

25-Sept-2013 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

25-Sept-2013 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 TABS DAILY

25-Sept-2013 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

25-Sept-2013 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

25-Sept-2013 Cerazette 75microgram tablets (Merck Sharp & Dohme Ltd) Acute Medication (Past)
84 tablet - TAKE ONE DAILY

28-Aug-2013 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

28-Aug-2013 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 TABS DAILY

28-Aug-2013 Sertraline 100mg tablets Acute Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

28-Aug-2013 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

19-Aug-2013 Sertraline 100mg tablets Acute Medication (Past)
14 tablet - 1 TABLET ONCE A DAY

19-Aug-2013 Sertraline 100mg tablets Repeat Medication (Past)
56 tablet - 1 TABLET ONCE A DAY

19-Aug-2013 Gabapentin 300mg capsules Repeat Medication (Past)
200 capsule - TAKE 4 TABS DAILY

19-Aug-2013 Tramadol 50mg capsules Repeat Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

31-July-2013 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

31-July-2013 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 tabs daily

31-July-2013 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

23-July-2013 Sertraline 100mg tablets Acute Medication (Past)
28 tablet - 1 TABLET ONCE A DAY

03-July-2013 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 tabs daily

03-July-2013 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

03-July-2013 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

03-July-2013 Cerazette 75microgram tablets (Merck Sharp & Dohme Ltd) Acute Medication (Past)
84 tablet - TAKE ONE DAILY

03-July-2013 Amitriptyline 25mg tablets Repeat Medication (Past)
28 tablet - TAKE ONE AT NIGHT

04-Jun-2013 Sertraline 50mg tablets Repeat Medication (Past)
56 tablet - ONE TABLET DAILY

04-Jun-2013 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 tabs daily

04-Jun-2013 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

04-Jun-2013 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

04-Jun-2013 Sertraline 50mg tablets Acute Medication (Past)
56 tablet - ONE TABLET DAILY

08-May-2013 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 tabs daily

08-May-2013 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

08-May-2013 Sertraline 50mg tablets Acute Medication (Past)
56 tablet - ONE TABLET DAILY

08-May-2013 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

10-Apr-2013 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 tabs daily

10-Apr-2013 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

10-Apr-2013 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

10-Apr-2013 Cerazette 75microgram tablets (Merck Sharp & Dohme Ltd) Acute Medication (Past)
84 tablet - TAKE ONE DAILY

12-Mar-2013 Tramadol 50mg capsules Repeat Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

12-Mar-2013 Gabapentin 300mg capsules Repeat Medication (Past)
200 capsule - TAKE 4 tabs daily

12-Mar-2013 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 tabs daily

12-Mar-2013 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

12-Mar-2013 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

08-Mar-2013 Sertraline 50mg tablets Repeat Medication (Past)
56 tablet - ONE TABLET DAILY

08-Mar-2013 Sertraline 50mg tablets Acute Medication (Past)
56 tablet - ONE TABLET DAILY

13-Feb-2013 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

13-Feb-2013 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

13-Feb-2013 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 tabs daily

25-Jan-2013 Xerotin spray (SpePharm UK Ltd) Acute Medication (Past)
100 ml - AS REQUIRED

25-Jan-2013 Sertraline 50mg tablets Acute Medication (Past)
28 tablet - HALF TABLET DAILY

16-Jan-2013 Amitriptyline 25mg tablets Repeat Medication (Past)
28 tablet - TAKE ONE AT NIGHT

16-Jan-2013 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

16-Jan-2013 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

16-Jan-2013 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 tabs daily

16-Jan-2013 Cerazette 75microgram tablets (Merck Sharp & Dohme Ltd) Acute Medication (Past)
84 tablet - TAKE ONE DAILY

19-Dec-2012 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

19-Dec-2012 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 tabs daily

19-Dec-2012 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

19-Dec-2012 Sertraline 50mg tablets Acute Medication (Past)
28 tablet - HALF TABLET DAILY

21-Nov-2012 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

21-Nov-2012 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 tabs daily

21-Nov-2012 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

21-Nov-2012 Sertraline 50mg tablets Acute Medication (Past)
28 tablet - HALF TABLET DAILY

24-Oct-2012 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

24-Oct-2012 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 tabs daily

24-Oct-2012 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

24-Oct-2012 Cerazette 75microgram tablets (Merck Sharp & Dohme Ltd) Acute Medication (Past)
84 tablet - TAKE ONE DAILY

26-Sept-2012 Gabapentin 300mg capsules Repeat Medication (Past)
200 capsule - TAKE 4 tabs daily

26-Sept-2012 Tramadol 50mg capsules Repeat Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

26-Sept-2012 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

26-Sept-2012 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 tabs daily

26-Sept-2012 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

26-Sept-2012 Sertraline 50mg tablets Acute Medication (Past)
28 tablet - HALF TABLET DAILY

29-Aug-2012 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

29-Aug-2012 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 tabs daily

29-Aug-2012 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

31-July-2012 Amitriptyline 25mg tablets Repeat Medication (Past)
28 tablet - TAKE ONE AT NIGHT

31-July-2012 Cerazette 75microgram tablets (Merck Sharp & Dohme Ltd) Acute Medication (Past)
84 tablet - TAKE ONE DAILY

31-July-2012 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

31-July-2012 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 tabs daily

31-July-2012 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

04-July-2012 Gabapentin 300mg capsules Acute Medication (Past)
200 capsule - TAKE 4 tabs daily

04-July-2012 Tramadol 50mg capsules Acute Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

04-July-2012 Amitriptyline 25mg tablets Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

06-Jun-2012 TRAMADOL caps 50mg Acute Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

06-Jun-2012 GABAPENTIN caps 300mg Acute Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

06-Jun-2012 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

06-Jun-2012 SERTRALINE tabs 50mg Acute Medication (Past)
28 tablet - HALF TABLET DAILY

08-May-2012 TRAMADOL caps 50mg Acute Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

08-May-2012 GABAPENTIN caps 300mg Acute Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

08-May-2012 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

08-May-2012 CERAZETTE tabs 75micrograms Acute Medication (Past)
84 tablet - TAKE ONE DAILY

08-May-2012 SERTRALINE tabs 50mg Acute Medication (Past)
28 tablet - HALF TABLET DAILY

11-Apr-2012 Gabapentin 300mg capsules Repeat Medication (Past)
200 capsule - TAKE 4 tabs daily

11-Apr-2012 Tramadol 50mg capsules Repeat Medication (Past)
224 capsule - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

11-Apr-2012 TRAMADOL caps 50mg Acute Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

11-Apr-2012 GABAPENTIN caps 300mg Acute Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

11-Apr-2012 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

14-Mar-2012 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

14-Mar-2012 GABAPENTIN caps 300mg Acute Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

14-Mar-2012 TRAMADOL caps 50mg Acute Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

14-Mar-2012 SERTRALINE tabs 50mg Acute Medication (Past)
28 tablet - HALF TABLET DAILY

28-Feb-2012 DICLOFENAC SODIUM ec tab 50mg Acute Medication (Past)
84 tablet - TAKE ONE THREE TIMES DAILY

15-Feb-2012 Amitriptyline 25mg tablets Repeat Medication (Past)
28 tablet - TAKE ONE AT NIGHT

15-Feb-2012 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

15-Feb-2012 GABAPENTIN caps 300mg Acute Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

15-Feb-2012 TRAMADOL caps 50mg Acute Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

15-Feb-2012 CERAZETTE tabs 75micrograms Acute Medication (Past)
84 tablet - TAKE ONE DAILY

18-Jan-2012 GABAPENTIN caps 300mg Acute Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

18-Jan-2012 TRAMADOL caps 50mg Acute Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

18-Jan-2012 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

18-Jan-2012 SERTRALINE tabs 50mg Acute Medication (Past)
28 tablet - HALF TABLET DAILY

21-Dec-2011 GABAPENTIN caps 300mg Acute Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

21-Dec-2011 TRAMADOL caps 50mg Acute Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

21-Dec-2011 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

23-Nov-2011 GABAPENTIN caps 300mg Acute Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

23-Nov-2011 TRAMADOL caps 50mg Acute Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

23-Nov-2011 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

23-Nov-2011 SERTRALINE tabs 50mg Acute Medication (Past)
28 tablet - HALF TABLET DAILY

26-Oct-2011 TRAMADOL caps 50mg Repeat Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

26-Oct-2011 GABAPENTIN caps 300mg Repeat Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

26-Oct-2011 GABAPENTIN caps 300mg Acute Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

26-Oct-2011 TRAMADOL caps 50mg Acute Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

26-Oct-2011 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

26-Oct-2011 CERAZETTE tabs 75micrograms Acute Medication (Past)
84 tablet - TAKE ONE DAILY

28-Sept-2011 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

28-Sept-2011 TRAMADOL caps 50mg Acute Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

28-Sept-2011 GABAPENTIN caps 300mg Acute Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

28-Sept-2011 SERTRALINE tabs 50mg Acute Medication (Past)
28 tablet - HALF TABLET DAILY

30-Aug-2011 AMITRIPTYLINE HCl tabs 25mg Repeat Medication (Past)
28 tablet - TAKE ONE AT NIGHT

30-Aug-2011 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet - TAKE ONE AT NIGHT

30-Aug-2011 TRAMADOL caps 50mg Acute Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

30-Aug-2011 GABAPENTIN caps 300mg Acute Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

02-Aug-2011 SERTRALINE tabs 50mg Acute Medication (Past)
28 tablet - HALF TABLET DAILY

02-Aug-2011 TRAMADOL caps 50mg Acute Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

02-Aug-2011 GABAPENTIN caps 300mg Acute Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

02-Aug-2011 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

06-July-2011 TRAMADOL caps 50mg Acute Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

06-July-2011 GABAPENTIN caps 300mg Acute Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

06-July-2011 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

06-July-2011 CERAZETTE tabs 75micrograms Acute Medication (Past)
84 tablet - TAKE ONE DAILY

08-Jun-2011 TRAMADOL caps 50mg Acute Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

08-Jun-2011 GABAPENTIN caps 300mg Acute Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

08-Jun-2011 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

08-Jun-2011 SERTRALINE tabs 50mg Acute Medication (Past)
28 tablet - HALF TABLET DAILY

11-May-2011 GABAPENTIN caps 300mg Repeat Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

11-May-2011 TRAMADOL caps 50mg Repeat Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

11-May-2011 TRAMADOL caps 50mg Acute Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

11-May-2011 GABAPENTIN caps 300mg Acute Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

11-May-2011 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

13-Apr-2011 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

13-Apr-2011 GABAPENTIN caps 300mg Acute Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

13-Apr-2011 TRAMADOL caps 50mg Acute Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

06-Apr-2011 SERTRALINE tabs 50mg Acute Medication (Past)
28 tablet(s) - HALF TABLET DAILY

06-Apr-2011 CERAZETTE tabs 75micrograms Acute Medication (Past)
84 tablet(s) - TAKE ONE DAILY

16-Mar-2011 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

16-Mar-2011 GABAPENTIN caps 300mg Acute Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

16-Mar-2011 TRAMADOL caps 50mg Acute Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

02-Mar-2011 AMITRIPTYLINE HCl tabs 25mg Repeat Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

16-Feb-2011 SERTRALINE tabs 50mg Acute Medication (Past)
28 tablet(s) - HALF TABLET DAILY

16-Feb-2011 GABAPENTIN caps 300mg Acute Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

16-Feb-2011 TRAMADOL caps 50mg Acute Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

16-Feb-2011 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

10-Feb-2011 AMOXICILLIN caps 500mg Acute Medication (Past)
21 capsule(s) - 1 Cap 3 times daily

18-Jan-2011 GABAPENTIN caps 300mg Acute Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

18-Jan-2011 TRAMADOL caps 50mg Acute Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

18-Jan-2011 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

22-Dec-2010 GABAPENTIN caps 300mg Acute Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

22-Dec-2010 TRAMADOL caps 50mg Acute Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

22-Dec-2010 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

22-Dec-2010 CERAZETTE tabs 75micrograms Acute Medication (Past)
84 tablet(s) - TAKE ONE DAILY

22-Dec-2010 SERTRALINE tabs 50mg Acute Medication (Past)
28 tablet(s) - HALF TABLET DAILY

25-Nov-2010 GABAPENTIN caps 300mg Acute Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

25-Nov-2010 TRAMADOL caps 50mg Acute Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

25-Nov-2010 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

12-Nov-2010 GABAPENTIN caps 300mg Repeat Medication (Past)
200 capsule(s) - TAKE 4 tabs daily

02-Nov-2010 TRAMADOL caps 50mg Repeat Medication (Past)
224 capsule(s) - TAKE 1 OR 2 UP TO FOUR TIMES A DAY

28-Oct-2010 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

28-Oct-2010 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

28-Oct-2010 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

20-Oct-2010 SERTRALINE tabs 50mg Acute Medication (Past)
28 tablet(s) - HALF TABLET DAILY

20-Oct-2010 CERAZETTE tabs 75micrograms Acute Medication (Past)
84 tablet(s) - TAKE ONE DAILY

29-Sept-2010 AMITRIPTYLINE HCl tabs 25mg Repeat Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

29-Sept-2010 GABAPENTIN caps 300mg Repeat Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

29-Sept-2010 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

29-Sept-2010 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

29-Sept-2010 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

02-Sept-2010 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

02-Sept-2010 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

02-Sept-2010 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

04-Aug-2010 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

04-Aug-2010 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

04-Aug-2010 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

29-July-2010 SERTRALINE tabs 50mg Acute Medication (Past)
28 tablet(s) - HALF TABLET DAILY

29-July-2010 CERAZETTE tabs 75micrograms Acute Medication (Past)
84 tablet(s) - TAKE ONE DAILY

08-July-2010 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

08-July-2010 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

08-July-2010 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

09-Jun-2010 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

09-Jun-2010 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

09-Jun-2010 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

13-May-2010 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

13-May-2010 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

13-May-2010 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

13-May-2010 SERTRALINE tabs 50mg Acute Medication (Past)
28 tablet(s) - HALF TABLET DAILY

14-Apr-2010 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

14-Apr-2010 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

14-Apr-2010 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

14-Apr-2010 GABAPENTIN caps 300mg Repeat Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

14-Apr-2010 AMITRIPTYLINE HCl tabs 25mg Repeat Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

14-Apr-2010 TRAMADOL 12hr mr tabs 100mg Repeat Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

18-Mar-2010 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

18-Mar-2010 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

18-Mar-2010 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

04-Mar-2010 SERTRALINE tabs 50mg Acute Medication (Past)
28 tablet(s) - HALF TABLET DAILY

19-Feb-2010 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

19-Feb-2010 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

19-Feb-2010 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

17-Feb-2010 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

17-Feb-2010 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

17-Feb-2010 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

20-Jan-2010 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

20-Jan-2010 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

20-Jan-2010 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

20-Jan-2010 SERTRALINE tabs 50mg Acute Medication (Past)
28 tablet(s) - HALF TABLETS DAILY FOR A WEEK AND THEN ONE EVERY DAY

18-Dec-2009 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

18-Dec-2009 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

18-Dec-2009 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

18-Dec-2009 SERTRALINE tabs 50mg Acute Medication (Past)
28 tablet(s) - HALF TABLETS DAILY FOR A WEEK AND THEN ONE EVERY DAY

26-Nov-2009 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

26-Nov-2009 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

26-Nov-2009 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

26-Nov-2009 AMITRIPTYLINE HCl tabs 25mg Repeat Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

26-Nov-2009 GABAPENTIN caps 300mg Repeat Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

17-Nov-2009 SERTRALINE tabs 50mg Acute Medication (Past)
28 tablet(s) - HALF TABLETS DAILY FOR A WEEK AND THEN ONE EVERY DAY

26-Oct-2009 SERTRALINE tabs 50mg Acute Medication (Past)
28 tablet(s) - HALF TABLETS DAILY FOR A WEEK AND THEN ONE EVERY DAY

20-Oct-2009 FLUOXETINE caps 20mg Acute Medication (Past)
30 capsule(s) - TAKE ONE DAILY

20-Oct-2009 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

20-Oct-2009 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

20-Oct-2009 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

21-Sept-2009 FLUOXETINE caps 20mg Acute Medication (Past)
30 capsule(s) - TAKE ONE DAILY

21-Sept-2009 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

21-Sept-2009 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

21-Sept-2009 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

18-Aug-2009 FLUOXETINE caps 20mg Acute Medication (Past)
30 capsule(s) - TAKE ONE DAILY

18-Aug-2009 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

18-Aug-2009 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

18-Aug-2009 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

22-July-2009 FLUOXETINE caps 20mg Acute Medication (Past)
30 capsule(s) - TAKE ONE DAILY

22-July-2009 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

22-July-2009 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

22-July-2009 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

18-Jun-2009 FLUOXETINE caps 20mg Acute Medication (Past)
30 capsule(s) - TAKE ONE DAILY

18-Jun-2009 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

18-Jun-2009 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

18-Jun-2009 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

18-May-2009 FLUOXETINE caps 20mg Acute Medication (Past)
30 capsule(s) - TAKE ONE DAILY

18-May-2009 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

18-May-2009 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

18-May-2009 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

18-May-2009 GABAPENTIN caps 300mg Repeat Medication (Past)
100 capsule(s) - TAKE ONE three times/DAY

18-May-2009 TRAMADOL 12hr mr tabs 100mg Repeat Medication (Past)
60 tablet(s) - TAKE ONE three times DAILY

18-May-2009 AMITRIPTYLINE HCl tabs 25mg Repeat Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

18-May-2009 FLUOXETINE caps 20mg Repeat Medication (Past)
30 capsule(s) - TAKE ONE DAILY

17-Apr-2009 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

17-Apr-2009 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE twice/DAY

17-Apr-2009 FLUOXETINE caps 20mg Acute Medication (Past)
30 capsule(s) - TAKE ONE DAILY

17-Apr-2009 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE TWICE DAILY

09-Mar-2009 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

09-Mar-2009 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE twice/DAY

09-Mar-2009 FLUOXETINE caps 20mg Acute Medication (Past)
30 capsule(s) - TAKE ONE DAILY

09-Mar-2009 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE TWICE DAILY

11-Feb-2009 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

11-Feb-2009 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE twice/DAY

11-Feb-2009 FLUOXETINE caps 20mg Acute Medication (Past)
30 capsule(s) - TAKE ONE DAILY

11-Feb-2009 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE TWICE DAILY

12-Jan-2009 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

12-Jan-2009 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE twice/DAY

12-Jan-2009 FLUOXETINE caps 20mg Acute Medication (Past)
30 capsule(s) - TAKE ONE DAILY

12-Jan-2009 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE TWICE DAILY

08-Dec-2008 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

08-Dec-2008 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE twice/DAY

08-Dec-2008 FLUOXETINE caps 20mg Acute Medication (Past)
30 capsule(s) - TAKE ONE DAILY

08-Dec-2008 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE TWICE DAILY

13-Nov-2008 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

13-Nov-2008 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE twice/DAY

13-Nov-2008 FLUOXETINE caps 20mg Acute Medication (Past)
30 capsule(s) - TAKE ONE DAILY

13-Nov-2008 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
60 tablet(s) - TAKE ONE TWICE DAILY

13-Nov-2008 TRAMADOL 12hr mr tabs 100mg Repeat Medication (Past)
60 tablet(s) - TAKE ONE TWICE DAILY

13-Nov-2008 FLUOXETINE caps 20mg Repeat Medication (Past)
30 capsule(s) - TAKE ONE DAILY

13-Nov-2008 GABAPENTIN caps 300mg Repeat Medication (Past)
100 capsule(s) - TAKE ONE twice/DAY

13-Nov-2008 AMITRIPTYLINE HCl tabs 25mg Repeat Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

17-Oct-2008 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
28 tablet(s) - TAKE ONE AT NIGHT

17-Oct-2008 GABAPENTIN caps 300mg Acute Medication (Past)
100 capsule(s) - TAKE ONE twice/DAY

17-Oct-2008 FLUOXETINE caps 20mg Acute Medication (Past)
 30 capsule(s) - TAKE ONE DAILY

17-Oct-2008 TRAMADOL 12hr mr tabs 100mg Acute Medication (Past)
 60 tablet(s) - TAKE ONE TWICE DAILY

18-Sept-2008 GABAPENTIN caps 300mg Acute Medication (Past)
 100 capsule(s) - TAKE ONE twice/DAY

18-Sept-2008 TRAMADOL caps 50mg Acute Medication (Past)
 120 capsule(s) - TAKE 1 OR 2 AS DIRECTED

18-Sept-2008 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
 28 tablet(s) - TAKE ONE AT NIGHT

18-Sept-2008 FLUOXETINE caps 20mg Acute Medication (Past)
 30 capsule(s) - TAKE ONE DAILY

21-Aug-2008 FLUOXETINE caps 20mg Acute Medication (Past)
 30 capsule(s) - TAKE ONE DAILY

21-Aug-2008 AMITRIPTYLINE HCl tabs 25mg Acute Medication (Past)
 28 tablet(s) - TAKE ONE AT NIGHT

21-Aug-2008 TRAMADOL caps 50mg Acute Medication (Past)
 120 capsule(s) - TAKE 1 OR 2 AS DIRECTED

21-Aug-2008 GABAPENTIN caps 300mg Acute Medication (Past)
 100 capsule(s) - TAKE ONE twice/DAY

18-July-2008 TRAMADOL caps 50mg Acute Medication (Past)
 120 capsule(s) - TAKE 1 OR 2 AS DIRECTED

18-July-2008 GABAPENTIN caps 300mg Acute Medication (Past)
 100 capsule(s) - TAKE ONE 3 TIMES/DAY

18-July-2008 CITALOPRAM tabs 20mg Acute Medication (Past)
 28 tablet(s) - take one in the morning

17-Jun-2008 CITALOPRAM tabs 20mg Acute Medication (Past)
 28 tablet(s) - take one in the morning

17-Jun-2008 GABAPENTIN caps 300mg Acute Medication (Past)
 100 capsule(s) - TAKE ONE 3 TIMES/DAY

17-Jun-2008 TRAMADOL caps 50mg Acute Medication (Past)
 120 capsule(s) - TAKE 1 OR 2 AS DIRECTED

02-Jun-2008 CITALOPRAM tabs 10mg Acute Medication (Past)
 28 tablet(s) - TAKE ONE IN THE MORNING.

08-May-2008 TRAMADOL caps 50mg Acute Medication (Past)
 200 capsule(s) - TAKE 1 OR 2 AS DIRECTED

08-May-2008 GABAPENTIN caps 300mg Acute Medication (Past)
 100 capsule(s) - TAKE ONE 3 TIMES/DAY

08-Apr-2008 TRAMADOL caps 50mg Acute Medication (Past)
 200 capsule(s) - TAKE 1 OR 2 AS DIRECTED

24-Mar-2008 TRAMADOL caps 50mg Acute Medication (Past)
 60 capsule(s) - TAKE 1 OR 2 AS DIRECTED

24-Mar-2008 PAROXETINE tabs 20mg Acute Medication (Past)
 30 tablet(s) - Half Tab In the morning

25-Feb-2008 CO-CODAMOL caps 30mg + 500mg Acute Medication (Past)
 100 capsule(s) - TAKE 1 OR 2 4 TIMES/DAY

12-Dec-2007 PAROXETINE tabs 20mg Acute Medication (Past)
 60 tablet(s) - Half Tab In the morning

18-July-2007 PAROXETINE tabs 20mg Acute Medication (Past)
 60 tablet(s) - Half Tab In the morning

30-Mar-2007 Paroxetine TABS 20MG Acute Medication (Past)
 60 - Half Tab In the morning

08-Dec-2006 Paroxetine TABS 20MG Acute Medication (Past)
 60 - Half Tab In the morning

08-Dec-2006 Paroxetine TABS 20MG Acute Medication (Past)
 60 - 1 Tab As directed

06-Oct-2006 Amoxicillin CAPS 500MG Acute Medication (Past)
 21 - 1 Cap 3 times daily

13-Sept-2006 Paroxetine TABS 20MG Acute Medication (Past)
 60 - Half Tab In the morning

06-July-2006 Paroxetine TABS 20MG Acute Medication (Past)
 60 - 1 Tab In the morning

01-Jun-2006 Paroxetine TABS 20MG Acute Medication (Past)
 30 - 1 Tab In the morning

01-Jun-2006 Scheriproct SUPPS Acute Medication (Past)
 12 - 1 to be inserted morning and night

13-Apr-2006 Paroxetine TABS 20MG Acute Medication (Past)
 30 - 1 Tab In the morning

17-Mar-2006 Paroxetine TABS 20MG Acute Medication (Past)
30 - 1 Tab In the morning

01-Sept-2005 Trimethoprim TABS 200MG Acute Medication (Past)
14 - 1 Tab Twice daily

10-Mar-2005 Amoxicillin CAPS 500MG Acute Medication (Past)
21 - 1 Cap 3 times daily

10-Mar-2005 Amoxicillin CAPS 500MG Acute Medication (Past)
21 - 1 Cap 3 times daily

28-Jan-2004 Paroxetine TABS 20MG Acute Medication (Past)
60 - 1 Tab In the morning

06-Nov-2003 Paroxetine TABS 20MG Acute Medication (Past)
60 - 1 Tab In the morning

27-Aug-2003 Paroxetine TABS 20MG Acute Medication (Past)
60 - 1 Tab In the morning

05-Jun-2003 Paroxetine TABS 30MG Acute Medication (Past)
30 - 1 Tab In the morning

28-Feb-2003 Paroxetine TABS 20MG Acute Medication (Past)
60 - 1 Tab In the morning

28-Nov-2002 Paroxetine TABS 20MG Acute Medication (Past)
60 - 1 Tab In the morning

25-Sept-2002 Paroxetine TABS 20MG Acute Medication (Past)
60 - 1 Tab In the morning

17-July-2002 Paroxetine TABS 20MG Acute Medication (Past)
60 - 1 Tab In the morning

25-Apr-2002 Paroxetine TABS 20MG Acute Medication (Past)
60 - 1 Tab In the morning

07-Feb-2002 Paroxetine TABS 20MG Acute Medication (Past)
60 - 1 Tab In the morning

07-Feb-2002 Paroxetine TABS 20MG Acute Medication (Past)
60 - 1 Tab In the morning

20-Nov-2001 Paroxetine TABS 20MG Acute Medication (Past)
60 - 1 Tab In the morning

05-Oct-2001 Paroxetine TABS 20MG Acute Medication (Past)
30 - 1 Tab In the morning

30-Aug-2001 Paroxetine TABS 20MG Acute Medication (Past)
30 - 1 Tab In the morning

30-July-2001 Paroxetine TABS 20MG Acute Medication (Past)
30 - 1 Tab In the morning

25-Oct-2000 Citalopram TABS 20MG Acute Medication (Past)
28 - 1 Tab Daily

17-Aug-2000 Citalopram TABS 20MG Acute Medication (Past)
28 - 1 Tab In the morning

Allergies

This section is empty.

Vaccinations

09-Jun-2021 Dr Stephen Gardiner

Admin sec dose SARS-CoV-2 vacc
C-19 AstraZeneca (By V *****)

Intervention
COVOXFORD

31-Mar-2021 Dr Stephen Gardiner

Admin first dose SARS-CoV-2 vac
C-19 AstraZeneca (By S *****)

Intervention
COVOXFORD

18-Mar-2005 Dr Staff Unknown Member of Staff

3rd hepatitis B vaccination

Intervention
HEPATITIS_B

01-July-2004 Dr Staff Unknown Member of Staff

2nd hepatitis B vaccination

Intervention
HEPATITIS_B

02-Jun-2004 Dr Staff Unknown Member of Staff

1st hepatitis B vaccination
Intervention
HEPATITIS_B

Referrals

08-Nov-2017 Dr Calum Paton

Referral for further care

. Recipient: Ninewells department of Pain Clinic; Referral Type: Out Patient; Sender: Dr Calum Paton; Reason: Referral for further care; Referral Status: Referred

13-Mar-2014 Dr Ruth Stevenson

Referral for further care

. Recipient: Ninewells department of Pain Clinic; Referral Type: Out Patient; Sender: Dr Ruth Stevenson; Reason: Referral for further care; Referral Status: Referred

25-Nov-2013 Dr Ruth Stevenson

Referral for further care

. Recipient: Westgate Health Centre department of Chiropody/Podiatry; Referral Type: Out Patient; Sender: Dr Ruth Stevenson; Reason: Referral for further care; Referral Status: Referred

23-May-2000 Dr Staff Unknown Member of Staff

Referral for further care

SPECIALITY=A+E : REFERRAL_TO=NHS. Sender: Dr Staff Unknown Member of Staff; Reason: Referral for further care

17-May-1995 Dr Staff Unknown Member of Staff

Referral for further care

SPECIALITY=A+E : REFERRAL_TO=NHS. Sender: Dr Staff Unknown Member of Staff; Reason: Referral for further care

Test Requests

21-Apr-2026 Mrs June Curran-Mcdonald

Blood sample taken

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

21-Apr-2026 Dr Deepa Sanu

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: check bloods 1 week Priority: non-urgent, Ordered from: WPE Blood Sciences, All samples collected Test: Creatinine And Electrolytes, Status: Complete, Updated: 21/04/2026

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

29-Apr-2024 Dr Tharmagajan Tharmachandirar

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: phone with me once mri done long standing and worsening pain and difficulty with tingling pain and falls down the right side. known to have slipped disc in neck from accident working in care home in 2007 and had mri then. feels that problem is back and also same in lower right side of back. some pain to palpate but no red flags has to use a stick due to the pain and impact on mobility MRI lower back to assess for slipped disc please and may need surgery as physio so far has not helped and making things worse she feels. thanks Priority: non-urgent, Ordered from: Radiology - MRI, All samples collected Test: MRI Spine lumbar & sacral, Status: Complete, Updated: 29/04/2024

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

31-Dec-9999 Dr Deepa Sanu

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: annual review please Priority: non-urgent, Ordered from: Blood Sciences, No samples collected Test: Creatinine and Electrolytes, Status: Requested, Updated: 14/03/2023 Test: Full Blood Count, Status: Requested, Updated: 14/03/2023 Test: Liver Group (LFTs), Status: Requested, Updated: 14/03/2023

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

31-Dec-9999 Dr Lajeen Rashid

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: cor pulmonale, worsening peripheral oedema Priority: non-urgent, Ordered from: Blood Sciences, No samples collected Test: B12/Folate, Status: Requested, Updated: 02/03/2022 Test: Creatinine and Electrolytes, Status: Requested, Updated: 02/03/2022 Test: C-Reactive Protein, Status: Requested, Updated: 02/03/2022 Test: Ferritin, Status: Requested, Updated: 02/03/2022

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

31-Dec-9999 Dr Nectarios Perdios

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: monitor LFTs as per hospital discharge Priority: non-urgent, Ordered from: Blood Sciences, No samples collected Test: Creatinine and Electrolytes, Status: Requested, Updated: 11/02/2022 Test: C-Reactive Protein, Status: Requested, Updated: 11/02/2022 Test: Full Blood Count, Status: Requested, Updated: 11/02/2022 Test: Liver Group (LFTs), Status: Requested, Updated: 11/02/2022

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

31-Dec-9999 Dr Nectarios Perdios

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: check U&Es 2/52 after starting furosemide Priority: non-urgent, Ordered from: Blood Sciences, No samples collected Test: Creatinine and Electrolytes, Status: Requested, Updated: 08/10/2021

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

02-Oct-2019 Dr Mohammed Raza

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: bilateral oedema of legs, cardiac and resp lx NAD, ? pelvic pathology, post micturition dribbling ? prolapse ? ovarian pathology (h/o cyst) Priority: non-urgent, Ordered from: Radiology - Ultrasound, All samples collected Test: US Abdomen, Status: Complete, Updated: 02/10/2019 Test: US Pelvis transabdominal, Status: Complete, Updated: 02/10/2019

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

13-Sept-2019 Mrs Clare Dow

Blood sample taken

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

13-Sept-2019 Dr Calum Paton

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: on furosemide 20mg daily Priority: non-urgent, Ordered from: Blood Sciences, All samples collected Test: Creatinine and Electrolytes, Status: Complete, Updated: 13/09/2019

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

01-July-2019 Miss Caitlin Stoves

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: as requested Priority: non-urgent, Ordered from: Blood Sciences, All samples collected Test: Creatinine and Electrolytes, Status: Complete, Updated: 01/07/2019

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

01-July-2019 Miss Caitlin Stoves

Blood sample taken

As requested review with dr paton on thursday

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

31-May-2019 Dr Lajeen Rashid

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: bilateral leg swelling, pancystolic murmur ? LVF impairment ? valvular dis Priority: non-urgent, Ordered from: Radiology - Plain Film, All samples collected Test: XR Chest, Status: Complete, Updated: 31/05/2019 Ordered from: Cardiac Physiology, All samples collected Test: Transthoracic Echocardiogram, Status: Complete, Updated: 31/05/2019

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

03-Jun-2019 Dr Lajeen Rashid

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: peripheral oedema, started on Furosemide Priority: non-urgent, Ordered from: Blood Sciences, All samples collected Test: Creatinine and Electrolytes, Status: Complete, Updated: 03/06/2019

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

23-May-2019 Dr Balakrishnan Pillai

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: Oedema in both legs and SOB....Pt does have B12 def.... Priority: non-urgent, Ordered from: Blood Sciences, All samples collected Test: Anaemia Screen, Status: Complete, Updated: 23/05/2019 Test: Bone Group, Status: Complete, Updated: 23/05/2019 Test: Creatinine and Electrolytes, Status: Complete, Updated: 23/05/2019 Test: Cholesterol, Status: Complete, Updated: 23/05/2019 Test: C-Reactive Protein, Status: Complete, Updated: 23/05/2019 Test: Glucose, Status: Complete, Updated: 23/05/2019 Test: Liver Group (LFTs), Status: Complete, Updated: 23/05/2019 Test: Plasma Viscosity, Status: Complete, Updated: 23/05/2019 Test: SST Tube, Status: Complete, Updated: 23/05/2019 Test: Thyroid Function, Status: Complete, Updated: 23/05/2019

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

24-Jan-2019 Miss Caitlin Stoves

Blood sample taken

as requested per DOCMAN can contact if needed

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

24-Jan-2019 Dr Calum Paton

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: prev raised wcc Priority: non-urgent, Ordered from: Blood Sciences, All samples collected Test: Full Blood Count, Status: Complete, Updated: 24/01/2019

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

11-Jan-2019 Dr Deepa Sanu

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: fell 2 wks ago, landed on R side and has been experiencing R hip pain since which can radiate down the leg. No new pins and needles/leg weakness. Able to fully WB. on gabapentin and tramadol and has applying topical gel which helping O/E : no limb shortening/external rotation FROM R hip? superficial, hard lump ? calcified haematoma Priority: non-urgent, Ordered from: Radiology - Plain Film, All samples collected Test: XR Hip Rt, Status: Complete, Updated: 11/01/2019 Ordered from: Radiology - Ultrasound, All samples collected Test: US Soft Tissue, Status: Complete, Updated: 11/01/2019

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

09-Jan-2019 Miss Caitlin Stoves

Blood sample taken

b12 check

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

09-Jan-2019 Dr Calum Paton

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: megalocytic anaemia with low B12 and folate - on B12 and folate replacement Priority: non-urgent, Ordered from: Blood Sciences, All samples collected Test: Full Blood Count, Status: Complete, Updated: 09/01/2019

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

09-Jan-2019 Dr Calum Paton

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: on B12 and folate Priority: non-urgent, Ordered from: Blood Sciences, All samples collected Test: B12/Folate, Status: Complete, Updated: 09/01/2019

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

14-Nov-2018 Miss Caitlin Stoves

Blood sample taken

as requested can contact if needed - appointment booked with gp

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

14-Nov-2018 Dr Deepa Sanu

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: macrocytosis Priority: non-urgent, Ordered from: Blood Sciences, All samples collected Test: B12/Folate, Status: Complete, Updated: 14/11/2018 Test: C-Reactive Protein, Status: Complete, Updated: 14/11/2018 Test: Full Blood Count, Status: Complete, Updated: 14/11/2018 Test: Thyroid Function, Status: Complete, Updated: 14/11/2018

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

01-Nov-2018 Dr Deepa Sanu

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: repeat please Priority: non-urgent, Ordered from: Blood Sciences, All samples collected Test: B12/Folate, Status: Complete, Updated: 01/11/2018 Test: C-Reactive Protein, Status: Complete, Updated: 01/11/2018 Test: Full Blood Count, Status: Complete, Updated: 01/11/2018 Test: Thyroid Function, Status: Complete, Updated: 01/11/2018

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

26-Oct-2018 Mrs Clare Dow

Blood sample taken

review with GP 1/52

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

26-Oct-2018 Dr Deepa Sanu

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: cough, clubbed fingers Priority: non-urgent, Ordered from: Radiology - Plain Film, All samples collected Test: XR Chest, Status: Complete, Updated: 26/10/2018 Ordered from: Blood Sciences, All samples collected Test: Bone Group, Status: Complete, Updated: 26/10/2018 Test: Creatinine and Electrolytes, Status: Complete, Updated: 26/10/2018 Test: C-Reactive Protein, Status: Complete, Updated: 26/10/2018 Test: Full Blood Count, Status: Complete, Updated: 26/10/2018 Test: Liver Group (LFTs), Status: Complete, Updated: 26/10/2018

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

13-July-2017 Dr Calum Paton

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: long term back pain for many years - prev history of L4/5 disc protrusion, but also has intermittent paraesthesia in upper limbs, ? due to lumbar and cervical spine degeneration Priority: non-urgent, Ordered from: Radiology - Plain Film, All samples collected Test: XR Cervical spine, Status: Complete, Updated: 13/07/2017 Test: XR Lumbar spine, Status: Complete, Updated: 13/07/2017

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

29-Aug-2016 Mrs Karen Cheghall

Blood sample taken

Bloods - has app for results

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

29-Aug-2016 Dr Calum Paton

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: ankle oedema and pitting - on furosemide Priority: non-urgent, Ordered from: Blood Sciences, All samples collected Test: Creatinine and Electrolytes, Status: Complete, Updated: 29/08/2016 Test: Full Blood Count, Status: Complete, Updated: 29/08/2016 Test: FSH, Status: Complete, Updated: 29/08/2016 Test: Glucose, Status: Complete, Updated: 29/08/2016 Test: Liver Group (LFTs), Status: Complete, Updated: 29/08/2016 Test: LH, Status: Complete, Updated: 29/08/2016 Test: Thyroid Function, Status: Complete, Updated: 29/08/2016

Status

Innoculation Risk False
 Priority Routine
 Has Fasted? False
 Is Pregnant? False

31-Dec-9999 Dr Michael Hayes

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: regular furosemide. Priority: non-urgent, Ordered from: Blood Sciences, No samples collected Test: Creatinine and Electrolytes, Status: Requested, Updated: 06/07/2016 Test: Urea, Status: Requested, Updated: 06/07/2016

Status

Innoculation Risk False
 Priority Routine
 Has Fasted? False
 Is Pregnant? False

16-Jun-2016 Mrs Karen Cheghall

Blood sample taken

Bloods - coming back next week

Status

Innoculation Risk False
 Priority Routine
 Has Fasted? False
 Is Pregnant? False

16-Jun-2016 Dr Michael Hayes

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: ?? fluid retention Priority: non-urgent, Ordered from: Blood Sciences, All samples collected Test: Creatinine and Electrolytes, Status: Complete, Updated: 16/06/2016 Test: Urea, Status: Complete, Updated: 16/06/2016

Status

Innoculation Risk False
 Priority Routine
 Has Fasted? False
 Is Pregnant? False

01-Jun-2015 Dr Kate Macdonald

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: increasing SOB - heavy smoker Priority: non-urgent, Ordered from: Radiology - Plain Film, All samples collected Test: XR Chest, Status: Complete, Updated: 01/06/2015

Status

Innoculation Risk False
 Priority Routine
 Has Fasted? False
 Is Pregnant? False

16-May-2014 Mrs Karen Cheghall

Blood sample taken

Bloods - coming back 2-3 weeks

Status

Innoculation Risk False
 Priority Routine
 Has Fasted? False
 Is Pregnant? False

16-May-2014 Dr Ruth Stevenson

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: Bilateral fluid retention Priority: non-urgent, Ordered from: Blood Sciences, All samples collected Test: Bone Group, Status: Complete, Updated: 16/05/2014 Test: Cholesterol, Status: Complete, Updated: 16/05/2014 Test: Full Blood Count, Status: Complete, Updated: 16/05/2014 Test: Glucose, Status: Complete, Updated: 16/05/2014 Test: Liver Group (LFTs), Status: Complete, Updated: 16/05/2014 Test: TSH, Status: Complete, Updated: 16/05/2014 Test: Urea and Electrolytes, Status: Complete, Updated: 16/05/2014

Status

Innoculation Risk False
 Priority Routine
 Has Fasted? False
 Is Pregnant? False

04-Mar-2014 Dr Ruth Stevenson

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: Patient has had lumbar back pain affecting L4/L5 with R sided sciatica Sx for last 4 months. Mobility affected. Reasonable power R side. On marked analgesic regime with little effect. XRAY lumbar spine has shown severe degenerative hyperostosis of L4/L5 facet joint. Radiologist RCP ***** has recommended CT for further investigation. As she has nerve root Sx and mobility issues I am requesting MRI to assess the nerve root to assess for compression. Priority: non-urgent, Ordered from: Radiology - MRI, All samples collected Test: MRI Spine lumbar & sacral, Status: Complete, Updated: 04/03/2014

Status

Innoculation Risk False
 Priority Routine
 Has Fasted? False
 Is Pregnant? False

07-Feb-2014 Dr Ruth Stevenson

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: Fall 11/2013. Severe pain and ROM and sciatica Sx worse on R side. Some paraesthesia. Assess for vertebral pathology ? fracture Priority: non-urgent, Ordered from: Radiology - Plain Film, All samples collected Test: XR Lumbar spine, Status: Complete, Updated: 07/02/2014

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

16-Mar-2012 Mrs Karen Cheghall

Laboratory test requested

Remote Test request from ICE system: NHS Tayside On Line Requesting Clinical Information: hearty lives Priority: non-urgent, Ordered from: Blood Sciences, All samples collected Test: Cholesterol, Status: Complete, Updated: 16/03/2012 Test: Glucose, Status: Complete, Updated: 16/03/2012

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

08-Feb-2011 Mrs Karen Cheghall

Blood sample taken

Bloods - as per *****

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

02-Jun-2008 Mrs Karen Cheghall

Blood sample taken

bloods - contact if nec

Status

Innoculation Risk False

Priority Routine

Has Fasted? False

Is Pregnant? False

Test Results

21-Apr-2026 Dr Deepa Sanu

Result: Serum creatinine Creatinine (Enzymatic) -
Serum creatinine Creatinine (Enzymatic) -

70 umol/L (Range: 44 - 80)

21-Apr-2026 Dr Deepa Sanu

Result: Serum potassium Potassium -
Serum potassium Potassium -

4.3 mmol/L (Range: 3.5 - 5.3)

21-Apr-2026 Dr Deepa Sanu

Result: Serum sodium Sodium -
Serum sodium Sodium -

140 mmol/L (Range: 133 - 146)

21-Apr-2026 Dr Deepa Sanu

Result: Biochemical test CREATININE AND ELECTROLYTES
Biochemical test CREATININE AND ELECTROLYTES

(No range available)

21-Apr-2026 Dr Deepa Sanu

Result: eGFR using creatinine (CKD-EPI) per 1.73 square metre eGFR result (EPI) - - Provided acute kidney injury has been excluded -this eGFR is consistent with CKD stage G2 - mild reduction in eGFR compared to young adult
eGFR using creatinine (CKD-EPI) per 1.73 square metre eGFR result (EPI) - - 83 mL/min/1.73m²
Provided acute kidney injury has been excluded -this eGFR is consistent with CKD stage G2 - mild reduction in eGFR compared to young adult

(No range available)

01-Aug-2025 Dr Nectarios Perdios

Result: BCSP faecal occult blood test normal No action required
Negative
BCSP faecal occult blood test normal No action required

(No range available)

07-Dec-2023 Mrs Olive Neave

Result: Peak exp. flow rate: PEFR/PFR Previous Best Ever = 440.0, Predicted = .
Peak exp. flow rate: PEFR/PFR Previous Best Ever = 440.0, Predicted = .

400 L/min (No range available)

07-Dec-2023 Mrs Olive Neave

Result: Oxygen saturation at periphery
Oxygen saturation at periphery

98 % (No range available)

19-July-2023 Dr Nectarios Perdios

Result: BCSP faecal occult blood test normal No action required
Negative
BCSP faecal occult blood test normal No action required

(No range available)

15-Jun-2023 Dr Deepa Sanu

Result: Eosinophil count $\times 10^9/L$ Eosinophil count $\times 10^9/L$ 0.24 $10^9/L$

(No range available)

15-Jun-2023 Dr Deepa Sanu

Result: Haemoglobin estimation

Haemoglobin estimation

135 g/L

(Range: 120 - 160)

15-Jun-2023 Dr Deepa Sanu

Result: Mean corpusc. haemoglobin (MCH)

Mean corpusc. haemoglobin (MCH)

29.7 pg

(Range: 27 - 32)

15-Jun-2023 Dr Deepa Sanu

Result: Mean corpusc. Hb. conc. (MCHC)

Mean corpusc. Hb. conc. (MCHC)

327 g/L

(Range: 320 - 360)

15-Jun-2023 Dr Deepa Sanu

Result: Mean corpuscular volume (MCV) fL

Mean corpuscular volume (MCV) fL

90.8 fL

(Range: 85 - 105)

15-Jun-2023 Dr Deepa Sanu

Result: Monocyte count $\times 10^9/L$ Monocyte count $\times 10^9/L$ 0.6 $10^9/L$

(Range: 0.2 - 0.8)

15-Jun-2023 Dr Deepa Sanu

Result: Neutrophil count $\times 10^9/L$ Neutrophil count $\times 10^9/L$ 4.3 $10^9/L$

(Range: 2 - 7.5)

15-Jun-2023 Dr Deepa Sanu

Result: Platelet count $\times 10^9/L$ Platelet count $\times 10^9/L$ 262 $10^9/L$

(Range: 150 - 400)

15-Jun-2023 Dr Deepa Sanu

Result: Red blood cell (RBC) count $\times 10^{12}/L$ Red blood cell (RBC) count $\times 10^{12}/L$ 4.56 $10^{12}/L$

(Range: 3.8 - 4.8)

15-Jun-2023 Dr Deepa Sanu

Result: Total white cell count $\times 10^9/L$ Total white cell count $\times 10^9/L$ 9.4 $10^9/L$

(Range: 4 - 11)

15-Jun-2023 Dr Deepa Sanu

Result: Lymphocyte count $\times 10^9/L$

Above high reference limit

Lymphocyte count $\times 10^9/L$ 4.2 $10^9/L$

(Range: 1.5 - 4)

15-Jun-2023 Dr Deepa Sanu

Result: Full blood count - FBC <none>

Full blood count - FBC <none>

(No range available)

15-Jun-2023 Dr Deepa Sanu

Result: Haematocrit

Haematocrit

0.414 ratio

(Range: 0.37 - 0.47)

15-Jun-2023 Dr Deepa Sanu

Result: Basophil count $\times 10^9/L$ Basophil count $\times 10^9/L$ 0.1 $10^9/L$

(No range available)

15-Jun-2023 Dr Deepa Sanu

Result: Serum albumin

Serum albumin

37 g/L

(Range: 35 - 50)

15-Jun-2023 Dr Deepa Sanu

Result: Serum alkaline phosphatase U/L

Above high reference limit

Serum alkaline phosphatase U/L

139 U/L

(Range: 30 - 130)

15-Jun-2023 Dr Deepa Sanu

Result: Serum alanine aminotransferase level Serum ALT level - U/L

Serum alanine aminotransferase level Serum ALT level - U/L

21 U/L

(Range: 5 - 55)

15-Jun-2023 Dr Deepa Sanu

Result: Serum total bilirubin level

Serum total bilirubin level

5 $\mu\text{mol}/L$

(No range available)

15-Jun-2023 Dr Deepa Sanu

Result: Serum creatinine

Serum creatinine

54 $\mu\text{mol}/L$

(Range: 44 - 80)

15-Jun-2023 Dr Deepa Sanu

Result: Serum potassium

Serum potassium

3.8 mmol/L

(Range: 3.5 - 5.3)

15-Jun-2023 Dr Deepa Sanu

Result: Serum sodium

Serum sodium

137 mmol/L

(Range: 133 - 146)

15-Jun-2023 Dr Deepa Sanu

Result: Liver function test<none>

Liver function test <none>

(No range available)

15-Jun-2023 Dr Deepa Sanu

Result: Biochemical test<none>

Biochemical test <none>

(No range available)

15-Jun-2023 Dr Deepa Sanu

Result: Acute kidney injury warning stage AKI warning stage - NOT AVAILABLE

Acute kidney injury warning stage AKI warning stage - NOT AVAILABLE

(No range available)

15-Jun-2023 Dr Deepa Sanu

Result: GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD - - eGFR should not be used to assess renal function for any drug dosing in over 75s or extremes of BML and for DOAC dosing in those with an eGFR less than 60ml/min.

GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD - - eGFR 60 mL/min

(No range available)

should not be used to assess renal function for any drug dosing in over 75s or extremes of BML and for DOAC dosing in those with an eGFR less than 60ml/min.

15-Jun-2023 Dr Deepa Sanu

Result: GFR calculated abbreviated MDRD adj for African American origin GFR calculated abbreviated MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA

GFR calculated abbreviated MDRD adj for African American origin GFR calculated abbreviated MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR

(No range available)

HAEMATURIA AND PROTEINURIA

15-Jun-2023 Dr Federated User

Result: Blood sample taken blood sample taken as per ICE request

Blood sample taken blood sample taken as per ICE request

(No range available)

28-Feb-2022 Dr Nectarios Perdios

Result: Serum albumin

Below low reference limit

Serum albumin

25 g/L

(Range: 35 - 50)

28-Feb-2022 Dr Nectarios Perdios

Result: Serum alkaline phosphatase U/L

Above high reference limit

Serum alkaline phosphatase U/L

146 U/L

(Range: 30 - 130)

28-Feb-2022 Dr Nectarios Perdios

Result: Serum alanine aminotransferase level Serum ALT level - U/L

Serum alanine aminotransferase level Serum ALT level - U/L

9 U/L

(Range: 5 - 55)

28-Feb-2022 Dr Nectarios Perdios

Result: Serum total bilirubin level

Serum total bilirubin level

20 umol/L

(No range available)

28-Feb-2022 Dr Nectarios Perdios

Result: Serum creatinine

Serum creatinine

47 umol/L

(Range: 44 - 80)

28-Feb-2022 Dr Nectarios Perdios

Result: Serum potassium

Serum potassium

4 mmol/L

(Range: 3.5 - 5.3)

28-Feb-2022 Dr Nectarios Perdios

Result: Serum sodium

Serum sodium

135 mmol/L

(Range: 133 - 146)

28-Feb-2022 Dr Nectarios Perdios

Result: Liver function test<none>

Liver function test <none>

(No range available)

28-Feb-2022 Dr Nectarios Perdios

Result: Plasma C reactive protein

Above high reference limit

Plasma C reactive protein

48 mg/L

(No range available)

28-Feb-2022 Dr Nectarios Perdios

Result: Biochemical test<none>

Biochemical test <none>

(No range available)

28-Feb-2022 Dr Nectarios Perdios

Result: Acute kidney injury warning stage AKI warning stage - Not detected: May not exclude AKI in all cases

Acute kidney injury warning stage AKI warning stage - Not detected: May not exclude AKI in all cases

(No range available)

28-Feb-2022 Dr Nectarios Perdios

Result: GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD - - eGFR should not be used to assess renal function for any drug dosing in over 75s or extremes of BML and for DOAC dosing in those with an eGFR less than 60ml/min.

GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD - - eGFR 60 mL/min

(No range available)

should not be used to assess renal function for any drug dosing in over 75s or extremes of BML and for DOAC dosing in those with an eGFR less than 60ml/min.

28-Feb-2022 Dr Nectarios Perdios

Result: GFR calculated abbreviated MDRD adj for African Americ origin *GFR calctd abbttd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA*

GFR calculated abbreviated MDRD adj for African Americ origin GFR calctd mL/min (No range available)
 abbttd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA

28-Feb-2022 Dr Nectarios Perdios

Result: Eosinophil count $\times 10^9/L$

Eosinophil count $\times 10^9/L$ 0.19 $10^9/L$ (No range available)

28-Feb-2022 Dr Nectarios Perdios

Result: Haemoglobin estimation
 Below low reference limit
 Haemoglobin estimation

107 g/L (Range: 120 - 160)

28-Feb-2022 Dr Nectarios Perdios

Result: Mean corpusc. haemoglobin (MCH)
 Mean corpusc. haemoglobin (MCH)

28.5 pg (Range: 27 - 32)

28-Feb-2022 Dr Nectarios Perdios

Result: Mean corpusc. Hb. conc. (MCHC)
 Below low reference limit
 Mean corpusc. Hb. conc. (MCHC)

309 g/L (Range: 320 - 360)

28-Feb-2022 Dr Nectarios Perdios

Result: Mean corpuscular volume (MCV) fl
 Mean corpuscular volume (MCV) fl

92.2 fL (Range: 85 - 105)

28-Feb-2022 Dr Nectarios Perdios

Result: Monocyte count $\times 10^9/L$
 Monocyte count $\times 10^9/L$

0.5 $10^9/L$ (Range: 0.2 - 0.8)

28-Feb-2022 Dr Nectarios Perdios

Result: Neutrophil count $\times 10^9/L$
 Neutrophil count $\times 10^9/L$

5.3 $10^9/L$ (Range: 2 - 7.5)

28-Feb-2022 Dr Nectarios Perdios

Result: Platelet count $\times 10^9/L$
 Platelet count $\times 10^9/L$

348 $10^9/L$ (Range: 150 - 400)

28-Feb-2022 Dr Nectarios Perdios

Result: Red blood cell (RBC) count $\times 10^{12}/L$
 Below low reference limit
 Red blood cell (RBC) count $\times 10^{12}/L$

3.76 $10^{12}/L$ (Range: 3.8 - 4.8)

28-Feb-2022 Dr Nectarios Perdios

Result: Total white cell count $\times 10^9/L$
 Total white cell count $\times 10^9/L$

8.9 $10^9/L$ (Range: 4 - 11)

28-Feb-2022 Dr Nectarios Perdios

Result: Lymphocyte count $\times 10^9/L$
 Lymphocyte count $\times 10^9/L$

2.9 $10^9/L$ (Range: 1.5 - 4)

28-Feb-2022 Dr Nectarios Perdios

Result: Full blood count - FBC <none>
 Full blood count - FBC <none>

(No range available)

28-Feb-2022 Dr Nectarios Perdios

Result: Haematocrit
 Below low reference limit
 Haematocrit

0.347 ratio (Range: 0.37 - 0.47)

28-Feb-2022 Dr Nectarios Perdios

Result: Basophil count $\times 10^9/L$
 Basophil count $\times 10^9/L$

0 $10^9/L$ (No range available)

28-Feb-2022 Dr Federated User

Result: Blood sample taken *Bloods taken as per ice request.*
 Blood sample taken Bloods taken as per ice request.

(No range available)

15-July-2021 Dr Stephen Gardiner

Result: BCSP faecal occult blood test normal *No action required*
 Negative
 BCSP faecal occult blood test normal No action required

(No range available)

13-Sept-2019 Dr Calum Paton

Result: Serum creatinine
 Serum creatinine

56 $\mu\text{mol}/L$ (Range: 44 - 80)

13-Sept-2019 Dr Calum Paton

Result: Serum potassium
 Serum potassium

4.2 mmol/L (Range: 3.5 - 5.3)

13-Sept-2019 Dr Calum Paton

Result: Serum sodium

Serum sodium

141 mmol/L

(Range: 133 - 146)

13-Sept-2019 Dr Calum Paton

Result: Biochemical test <none>

Biochemical test <none>

(No range available)

13-Sept-2019 Dr Calum Paton

Result: Acute kidney injury warning stage AKI warning stage - Not detected: May not exclude AKI in all cases

Acute kidney injury warning stage AKI warning stage - Not detected: May not exclude AKI in all cases

(No range available)

13-Sept-2019 Dr Calum Paton

Result: GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD -

GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD -

60 mL/min

(No range available)

13-Sept-2019 Dr Calum Paton

Result: GFR calculated abbreviated MDRD adj for African American origin GFR calculated abbreviated MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA

GFR calculated abbreviated MDRD adj for African American origin GFR calculated abbreviated MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA

mL/min

(No range available)

01-July-2019 Mrs Alexis Macrae

Result: Serum creatinine

Serum creatinine

51 umol/L

(Range: 44 - 80)

01-July-2019 Mrs Alexis Macrae

Result: Serum potassium

Serum potassium

4.2 mmol/L

(Range: 3.5 - 5.3)

01-July-2019 Mrs Alexis Macrae

Result: Serum sodium

Serum sodium

140 mmol/L

(Range: 133 - 146)

01-July-2019 Mrs Alexis Macrae

Result: Biochemical test <none>

Biochemical test <none>

(No range available)

01-July-2019 Mrs Alexis Macrae

Result: Acute kidney injury warning stage AKI warning stage - Not detected: May not exclude AKI in all cases

Acute kidney injury warning stage AKI warning stage - Not detected: May not exclude AKI in all cases

(No range available)

01-July-2019 Mrs Alexis Macrae

Result: GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD -

GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD -

60 mL/min

(No range available)

01-July-2019 Mrs Alexis Macrae

Result: GFR calculated abbreviated MDRD adj for African American origin GFR calculated abbreviated MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA

GFR calculated abbreviated MDRD adj for African American origin GFR calculated abbreviated MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA

mL/min

(No range available)

01-July-2019 Miss Caitlin Stoves

Result: ECG - review with dr paton on thursday

Potential Abnormal

ECG - review with dr paton on thursday

(No range available)

03-Jun-2019 Dr Lajeen Rashid

Result: Serum creatinine

Serum creatinine

56 umol/L

(Range: 44 - 80)

03-Jun-2019 Dr Lajeen Rashid

Result: Serum potassium

Serum potassium

3.9 mmol/L

(Range: 3.5 - 5.3)

03-Jun-2019 Dr Lajeen Rashid

Result: Serum sodium

Serum sodium

139 mmol/L

(Range: 133 - 146)

03-Jun-2019 Dr Lajeen Rashid

Result: Biochemical test <none>

Biochemical test <none>

(No range available)

03-Jun-2019 Dr Lajeen Rashid

Result: Acute kidney injury warning stage AKI warning stage - Not detected: May not exclude AKI in all cases

Acute kidney injury warning stage AKI warning stage - Not detected: May not exclude AKI in all cases

(No range available)

03-Jun-2019 Dr Lajeen Rashid

Result: GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD -

GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD -

60 mL/min

(No range available)

03-Jun-2019 Dr Lajeen Rashid

Result: GFR calculated abbreviated MDRD adj for African Americ origin *GFR calctd abbttd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA*

GFR calculated abbreviated MDRD adj for African Americ origin GFR calctd mL/min (No range available)
 abbttd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR
 HAEMATURIA AND PROTEINURIA

23-May-2019 Dr Balakrishnan Pillai

Result: Serum albumin
 Serum albumin 35 g/L (Range: 35 - 50)

23-May-2019 Dr Balakrishnan Pillai

Result: Serum alkaline phosphatase U/L
 Serum alkaline phosphatase U/L 130 U/L (Range: 30 - 130)

23-May-2019 Dr Balakrishnan Pillai

Result: Serum alanine aminotransferase level Serum ALT level - U/L
 Serum alanine aminotransferase level Serum ALT level - U/L 22 U/L (Range: 5 - 55)

23-May-2019 Dr Balakrishnan Pillai

Result: Serum total bilirubin level
 Serum total bilirubin level 6 umol/L (No range available)

23-May-2019 Dr Balakrishnan Pillai

Result: Serum calcium
 Serum calcium 2.16 mmol/L (Range: 2.1 - 2.55)

23-May-2019 Dr Balakrishnan Pillai

Result: Corrected serum calcium level
 Corrected serum calcium level 2.21 mmol/L (Range: 2.1 - 2.55)

23-May-2019 Dr Balakrishnan Pillai

Result: Serum cholesterol
 Above high reference limit
 Serum cholesterol 5.69 mmol/L (No range available)

23-May-2019 Dr Balakrishnan Pillai

Result: Serum creatinine
 Serum creatinine 57 umol/L (Range: 44 - 80)

23-May-2019 Dr Balakrishnan Pillai

Result: Serum HDL cholesterol level
 Serum HDL cholesterol level 0.96 mmol/L (Range: 0.6 - 2.5)

23-May-2019 Dr Balakrishnan Pillai

Result: Serum potassium
 Serum potassium 4.1 mmol/L (Range: 3.5 - 5.3)

23-May-2019 Dr Balakrishnan Pillai

Result: Serum sodium
 Serum sodium 139 mmol/L (Range: 133 - 146)

23-May-2019 Dr Balakrishnan Pillai

Result: Serum TSH level mU/L
 Serum TSH level mU/L 2.1 mU/L (Range: 0.4 - 4)

23-May-2019 Dr Balakrishnan Pillai

Result: Plasma glucose level
 Above high reference limit
 Plasma glucose level 9.1 mmol/L (Range: 3.3 - 5.8)

23-May-2019 Dr Balakrishnan Pillai

Result: Bone profile <none>
 Bone profile <none> (No range available)

23-May-2019 Dr Balakrishnan Pillai

Result: Liver function test <none>
 Liver function test <none> (No range available)

23-May-2019 Dr Balakrishnan Pillai

Result: Plasma C reactive protein
 Above high reference limit
 Plasma C reactive protein 14 mg/L (No range available)

23-May-2019 Dr Balakrishnan Pillai

Result: Biochemical test <none>
 Biochemical test <none> (No range available)

23-May-2019 Dr Balakrishnan Pillai

Result: Acute kidney injury warning stage AKI warning stage - Not detected: May not exclude AKI in all cases
 Acute kidney injury warning stage AKI warning stage - Not detected: May not
 exclude AKI in all cases (No range available)

23-May-2019 Dr Balakrishnan Pillai

Result: Total cholesterol:HDL ratio <none>
 Total cholesterol:HDL ratio <none> ratio (No range available)

23-May-2019 Dr Balakrishnan Pillai Result: Total cholesterol:HDL ratio. Total cholesterol:HDL ratio	5.9 ratio	(No range available)
23-May-2019 Dr Balakrishnan Pillai Result: GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD	60 mL/min	(No range available)
23-May-2019 Dr Balakrishnan Pillai Result: GFR calculated abbreviated MDRD adj for African Americ origin FOR HAEMATURIA AND PROTEINURIA GFR calculated abbreviated MDRD adj for African Americ origin abtd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA	mL/min	(No range available)
23-May-2019 Dr Balakrishnan Pillai Result: Eosinophil count Eosinophil count $\times 10^9/L$	0.17 $10^9/L$	(No range available)
23-May-2019 Dr Balakrishnan Pillai Result: Haemoglobin estimation Haemoglobin estimation	128 g/L	(Range: 120 - 160)
23-May-2019 Dr Balakrishnan Pillai Result: Mean corpusc. haemoglobin(MCH) Mean corpusc. haemoglobin(MCH)	29.6 pg	(Range: 27 - 32)
23-May-2019 Dr Balakrishnan Pillai Result: Mean corpusc. Hb. conc. (MCHC) Below low reference limit Mean corpusc. Hb. conc. (MCHC)	319 g/L	(Range: 320 - 360)
23-May-2019 Dr Balakrishnan Pillai Result: Mean corpuscular volume (MCV) Mean corpuscular volume (MCV) fl	92.8 fl	(Range: 85 - 105)
23-May-2019 Dr Balakrishnan Pillai Result: Monocyte count Monocyte count $\times 10^9/L$	0.4 $10^9/L$	(Range: 0.2 - 0.8)
23-May-2019 Dr Balakrishnan Pillai Result: Neutrophil count Neutrophil count $\times 10^9/L$	4.8 $10^9/L$	(Range: 2 - 7.5)
23-May-2019 Dr Balakrishnan Pillai Result: Platelet count Platelet count $\times 10^9/L$	337 $10^9/L$	(Range: 150 - 400)
23-May-2019 Dr Balakrishnan Pillai Result: Red blood cell (RBC) count Red blood cell (RBC) count $\times 10^{12}/L$	4.33 $10^{12}/L$	(Range: 3.8 - 4.8)
23-May-2019 Dr Balakrishnan Pillai Result: Total white cell count Total white cell count $\times 10^9/L$	9.6 $10^9/L$	(Range: 4 - 11)
23-May-2019 Dr Balakrishnan Pillai Result: Lymphocyte count Above high reference limit Lymphocyte count $\times 10^9/L$	4.2 $10^9/L$	(Range: 1.5 - 4)
23-May-2019 Dr Balakrishnan Pillai Result: Full blood count - FBC Full blood count - FBC <none>		(No range available)
23-May-2019 Dr Balakrishnan Pillai Result: Plasma viscosity Plasma viscosity mPa.s.	1.7 mPa.s	(Range: 1.5 - 1.72)
23-May-2019 Dr Balakrishnan Pillai Result: Haematocrit Haematocrit	0.402 ratio	(Range: 0.37 - 0.47)
23-May-2019 Dr Balakrishnan Pillai Result: Basophil count Basophil count $\times 10^9/L$	0.1 $10^9/L$	(No range available)
24-Jan-2019 Dr Calum Paton Result: Eosinophil count Eosinophil count $\times 10^9/L$	0.14 $10^9/L$	(No range available)
24-Jan-2019 Dr Calum Paton Result: Haemoglobin estimation Haemoglobin estimation	124 g/L	(Range: 120 - 160)

24-Jan-2019 Dr Calum Paton Result: Mean corpusc. haemoglobin(MCH) Mean corpusc. haemoglobin(MCH)	31.7 pg	(Range: 27 - 32)
24-Jan-2019 Dr Calum Paton Result: Mean corpusc. Hb. conc. (MCHC) Below low reference limit Mean corpusc. Hb. conc. (MCHC)	316 g/L	(Range: 320 - 360)
24-Jan-2019 Dr Calum Paton Result: Mean corpuscular volume (MCV)// Mean corpuscular volume (MCV) fl	100.5 fL	(Range: 85 - 105)
24-Jan-2019 Dr Calum Paton Result: Monocyte countx10 ⁹ /L Monocyte count x10 ⁹ /L	0.4 10 ⁹ /L	(Range: 0.2 - 0.8)
24-Jan-2019 Dr Calum Paton Result: Neutrophil countx10 ⁹ /L Neutrophil count x10 ⁹ /L	5.1 10 ⁹ /L	(Range: 2 - 7.5)
24-Jan-2019 Dr Calum Paton Result: Platelet countx10 ⁹ /L Platelet count x10 ⁹ /L	361 10 ⁹ /L	(Range: 150 - 400)
24-Jan-2019 Dr Calum Paton Result: Red blood cell (RBC) countx10 ¹² /L Red blood cell (RBC) count x10 ¹² /L	3.91 10 ¹² /L	(Range: 3.8 - 4.8)
24-Jan-2019 Dr Calum Paton Result: Total white cell countx10 ⁹ /L Total white cell count x10 ⁹ /L	9.6 10 ⁹ /L	(Range: 4 - 11)
24-Jan-2019 Dr Calum Paton Result: Lymphocyte countx10 ⁹ /L Lymphocyte count x10 ⁹ /L	3.9 10 ⁹ /L	(Range: 1.5 - 4)
24-Jan-2019 Dr Calum Paton Result: Full blood count - FBC<none> Full blood count - FBC <none>		(No range available)
24-Jan-2019 Dr Calum Paton Result: Haematocrit Haematocrit	0.393 ratio	(Range: 0.37 - 0.47)
24-Jan-2019 Dr Calum Paton Result: Basophil countx10 ⁹ /L Basophil count x10 ⁹ /L	0.1 10 ⁹ /L	(No range available)
09-Jan-2019 Dr Calum Paton Result: Serum vitamin B12ng/l Serum vitamin B12 ng/l	829 ng/L	(Range: 200 - 940)
09-Jan-2019 Dr Calum Paton Result: Serum folateug/l Above high reference limit Serum folate ug/l	17.5 ug/L	(Range: 3.1 - 17.5)
09-Jan-2019 Dr Calum Paton Result: B12/folate level<none> B12/folate level <none>		(No range available)
09-Jan-2019 Dr Calum Paton Result: Eosinophil countx10 ⁹ /L Eosinophil count x10 ⁹ /L	0.17 10 ⁹ /L	(No range available)
09-Jan-2019 Dr Calum Paton Result: Haemoglobin estimation Haemoglobin estimation	126 g/L	(Range: 120 - 160)
09-Jan-2019 Dr Calum Paton Result: Mean corpusc. haemoglobin(MCH) Above high reference limit Mean corpusc. haemoglobin(MCH)	32.5 pg	(Range: 27 - 32)
09-Jan-2019 Dr Calum Paton Result: Mean corpusc. Hb. conc. (MCHC) Below low reference limit Mean corpusc. Hb. conc. (MCHC)	305 g/L	(Range: 320 - 360)
09-Jan-2019 Dr Calum Paton Result: Mean corpuscular volume (MCV)// Above high reference limit Mean corpuscular volume (MCV) fl	106.6 fL	(Range: 85 - 105)

09-Jan-2019 Dr Calum Paton Result: Monocyte countx10 ⁹ /L Monocyte count x10 ⁹ /L	0.5 10 ⁹ /L	(Range: 0.2 - 0.8)
09-Jan-2019 Dr Calum Paton Result: Neutrophil countx10 ⁹ /L Neutrophil count x10 ⁹ /L	4.7 10 ⁹ /L	(Range: 2 - 7.5)
09-Jan-2019 Dr Calum Paton Result: Platelet countx10 ⁹ /L Platelet count x10 ⁹ /L	395 10 ⁹ /L	(Range: 150 - 400)
09-Jan-2019 Dr Calum Paton Result: Red blood cell (RBC) countx10 ¹² /L Red blood cell (RBC) count x10 ¹² /L	3.88 10 ¹² /L	(Range: 3.8 - 4.8)
09-Jan-2019 Dr Calum Paton Result: Total white cell countx10 ⁹ /L Above high reference limit Total white cell count x10 ⁹ /L	11.2 10 ⁹ /L	(Range: 4 - 11)
09-Jan-2019 Dr Calum Paton Result: Lymphocyte countx10 ⁹ /L Above high reference limit Lymphocyte count x10 ⁹ /L	5.8 10 ⁹ /L	(Range: 1.5 - 4)
09-Jan-2019 Dr Calum Paton Result: Full blood count - FBC<none> Full blood count - FBC <none>		(No range available)
09-Jan-2019 Dr Calum Paton Result: Haematocrit Haematocrit	0.413 ratio	(Range: 0.37 - 0.47)
09-Jan-2019 Dr Calum Paton Result: Basophil countx10 ⁹ /L Basophil count x10 ⁹ /L	0.1 10 ⁹ /L	(No range available)
24-Dec-2018 Dr Stephen Gardiner Result: BCSP faecal occult blood test normalNo action required Negative BCSP faecal occult blood test normal No action required		(No range available)
14-Nov-2018 Dr Deepa Sanu Result: Plasma C reactive protein Above high reference limit Plasma C reactive protein	22 mg/L	(No range available)
14-Nov-2018 Dr Deepa Sanu Result: Serum vitamin B12ng/l Below low reference limit Serum vitamin B12 ng/l	160 ng/L	(Range: 200 - 940)
14-Nov-2018 Dr Deepa Sanu Result: Eosinophil countx10 ⁹ /L Eosinophil count x10 ⁹ /L	0.06 10 ⁹ /L	(No range available)
14-Nov-2018 Dr Deepa Sanu Result: Serum folateug/l Below low reference limit Serum folate ug/l	1.9 ug/L	(Range: 3.1 - 17.5)
14-Nov-2018 Dr Deepa Sanu Result: Haemoglobin estimation Below low reference limit Haemoglobin estimation	108 g/L	(Range: 120 - 160)
14-Nov-2018 Dr Deepa Sanu Result: Mean corpusc. haemoglobin(MCH) Above high reference limit Mean corpusc. haemoglobin(MCH)	39.1 pg	(Range: 27 - 32)
14-Nov-2018 Dr Deepa Sanu Result: Mean corpusc. Hb. conc. (MCHC) Mean corpusc. Hb. conc. (MCHC)	323 g/L	(Range: 320 - 360)
14-Nov-2018 Dr Deepa Sanu Result: Mean corpuscular volume (MCV)fl Above high reference limit Mean corpuscular volume (MCV) fl	121.2 fL	(Range: 85 - 105)
14-Nov-2018 Dr Deepa Sanu Result: Monocyte countx10 ⁹ /L Monocyte count x10 ⁹ /L	0.2 10 ⁹ /L	(Range: 0.2 - 0.8)

14-Nov-2018 Dr Deepa Sanu

Result: Neutrophil count $10^9/L$

Above high reference limit

Neutrophil count $10^9/L$ 9 $10^9/L$

(Range: 2 - 7.5)

14-Nov-2018 Dr Deepa Sanu

Result: Platelet count $10^9/L$

Above high reference limit

Platelet count $10^9/L$ 467 $10^9/L$

(Range: 150 - 400)

14-Nov-2018 Dr Deepa Sanu

Result: Red blood cell (RBC) count $10^{12}/L$

Below low reference limit

Red blood cell (RBC) count $10^{12}/L$ 2.77 $10^{12}/L$

(Range: 3.8 - 4.8)

14-Nov-2018 Dr Deepa Sanu

Result: Total white cell count $10^9/L$

Above high reference limit

Total white cell count $10^9/L$ 12 $10^9/L$

(Range: 4 - 11)

14-Nov-2018 Dr Deepa Sanu

Result: Lymphocyte count $10^9/L$ Lymphocyte count $10^9/L$ 2.6 $10^9/L$

(Range: 1.5 - 4)

14-Nov-2018 Dr Deepa Sanu

Result: B12/folate level <none>

B12/folate level <none>

(No range available)

14-Nov-2018 Dr Deepa Sanu

Result: Full blood count - FBC <none>

Full blood count - FBC <none>

(No range available)

14-Nov-2018 Dr Deepa Sanu

Result: Haematocrit

Below low reference limit

Haematocrit

0.336 ratio

(Range: 0.37 - 0.47)

14-Nov-2018 Dr Deepa Sanu

Result: Basophil count $10^9/L$ Basophil count $10^9/L$ 0 $10^9/L$

(No range available)

01-Nov-2018 Dr Deepa Sanu

Result: Serum TSH level mU/L

Serum TSH level mU/L

1.08 mU/L

(Range: 0.4 - 4)

01-Nov-2018 Dr Deepa Sanu

Result: Plasma C reactive protein

Above high reference limit

Plasma C reactive protein

22 mg/L

(No range available)

01-Nov-2018 Dr Deepa Sanu

Result: Serum vitamin B12 ng/l

Below low reference limit

Serum vitamin B12 ng/l

140 ng/L

(Range: 200 - 940)

01-Nov-2018 Dr Deepa Sanu

Result: Eosinophil count $10^9/L$ Eosinophil count $10^9/L$ 0.06 $10^9/L$

(No range available)

01-Nov-2018 Dr Deepa Sanu

Result: Serum folate ug/l

Below low reference limit

Serum folate ug/l

1.8 ug/L

(Range: 3.1 - 17.5)

01-Nov-2018 Dr Deepa Sanu

Result: Haemoglobin estimation

Below low reference limit

Haemoglobin estimation

105 g/L

(Range: 120 - 160)

01-Nov-2018 Dr Deepa Sanu

Result: Mean corpusc. haemoglobin (MCH)

Above high reference limit

Mean corpusc. haemoglobin (MCH)

37.9 pg

(Range: 27 - 32)

01-Nov-2018 Dr Deepa Sanu

Result: Mean corpusc. Hb. conc. (MCHC)

Below low reference limit

Mean corpusc. Hb. conc. (MCHC)

306 g/L

(Range: 320 - 360)

01-Nov-2018 Dr Deepa Sanu

Result: Mean corpuscular volume (MCV) fl

Above high reference limit

Mean corpuscular volume (MCV) fl

123.9 fL

(Range: 85 - 105)

01-Nov-2018 Dr Deepa Sanu

Result: Monocyte count $\times 10^9/L$ Monocyte count $\times 10^9/L$ 0.3 $10^9/L$

(Range: 0.2 - 0.8)

01-Nov-2018 Dr Deepa Sanu

Result: Neutrophil count $\times 10^9/L$ Neutrophil count $\times 10^9/L$ 7.1 $10^9/L$

(Range: 2 - 7.5)

01-Nov-2018 Dr Deepa Sanu

Result: Platelet count $\times 10^9/L$

Above high reference limit

Platelet count $\times 10^9/L$ 569 $10^9/L$

(Range: 150 - 400)

01-Nov-2018 Dr Deepa Sanu

Result: Red blood cell (RBC) count $\times 10^{12}/L$

Below low reference limit

Red blood cell (RBC) count $\times 10^{12}/L$ 2.76 $10^{12}/L$

(Range: 3.8 - 4.8)

01-Nov-2018 Dr Deepa Sanu

Result: Total white cell count $\times 10^9/L$ Total white cell count $\times 10^9/L$ 10.6 $10^9/L$

(Range: 4 - 11)

01-Nov-2018 Dr Deepa Sanu

Result: Lymphocyte count $\times 10^9/L$ Lymphocyte count $\times 10^9/L$ 3 $10^9/L$

(Range: 1.5 - 4)

01-Nov-2018 Dr Deepa Sanu

Result: B12/folate level <none>

B12/folate level <none>

(No range available)

01-Nov-2018 Dr Deepa Sanu

Result: Full blood count - FBC <none>

Full blood count - FBC <none>

(No range available)

01-Nov-2018 Dr Deepa Sanu

Result: Haematocrit

Below low reference limit

Haematocrit

0.342 ratio

(Range: 0.37 - 0.47)

01-Nov-2018 Dr Deepa Sanu

Result: Basophil count $\times 10^9/L$ Basophil count $\times 10^9/L$ 0 $10^9/L$

(No range available)

26-Oct-2018 Dr Deepa Sanu

Result: Blood film microscopy Raised MCV. ?Liver/thyroid function. ?Culpable drugs. Mild thrombocytosis ? reactive Anaemia ? b12/folate

Blood film microscopy Raised MCV. ?Liver/thyroid function. ?Culpable drugs.

Mild thrombocytosis ? reactive Anaemia ? b12/folate

(No range available)

26-Oct-2018 Dr Deepa Sanu

Result: Serum albumin

Below low reference limit

Serum albumin

31 g/L

(Range: 35 - 50)

26-Oct-2018 Dr Deepa Sanu

Result: Serum alkaline phosphatase U/L

Serum alkaline phosphatase U/L

80 U/L

(Range: 30 - 130)

26-Oct-2018 Dr Deepa Sanu

Result: Serum alanine aminotransferase level Serum ALT level - U/L

Serum alanine aminotransferase level Serum ALT level - U/L

18 U/L

(Range: 5 - 55)

26-Oct-2018 Dr Deepa Sanu

Result: Serum total bilirubin level

Serum total bilirubin level

14 $\mu\text{mol}/L$

(No range available)

26-Oct-2018 Dr Deepa Sanu

Result: Serum calcium

Serum calcium

2.12 mmol/L

(Range: 2.1 - 2.55)

26-Oct-2018 Dr Deepa Sanu

Result: Corrected serum calcium level

Corrected serum calcium level

2.22 mmol/L

(Range: 2.1 - 2.55)

26-Oct-2018 Dr Deepa Sanu

Result: Serum creatinine

Serum creatinine

52 $\mu\text{mol}/L$

(Range: 44 - 80)

26-Oct-2018 Dr Deepa Sanu

Result: Serum potassium

Serum potassium

4.2 mmol/L

(Range: 3.5 - 5.3)

26-Oct-2018 Dr Deepa Sanu

Result: Serum sodium

Serum sodium

140 mmol/L

(Range: 133 - 146)

26-Oct-2018 Dr Deepa Sanu

Result: Bone profile<none>

Bone profile <none>

(No range available)

26-Oct-2018 Dr Deepa Sanu

Result: Liver function test<none>

Liver function test <none>

(No range available)

26-Oct-2018 Dr Deepa Sanu

Result: Plasma C reactive protein

Above high reference limit

Plasma C reactive protein

132 mg/L

(No range available)

26-Oct-2018 Dr Deepa Sanu

Result: Biochemical test<none>

Biochemical test <none>

(No range available)

26-Oct-2018 Dr Deepa Sanu

Result: Acute kidney injury warning stage AKI warning stage - Not detected: but may not exclude AKI in all cases

Acute kidney injury warning stage AKI warning stage - Not detected: but may

not exclude AKI in all cases

(No range available)

26-Oct-2018 Dr Deepa Sanu

Result: GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD -

GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD -

60 mL/min

(No range available)

26-Oct-2018 Dr Deepa Sanu

Result: GFR calculated abbreviated MDRD adj for African American origin GFR calcd abtd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA

GFR calculated abbreviated MDRD adj for African American origin

GFR calcd abtd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR

HAEMATURIA AND PROTEINURIA

mL/min

(No range available)

26-Oct-2018 Dr Deepa Sanu

Result: Eosinophil count $\times 10^9/L$ Eosinophil count $\times 10^9/L$ 0.06 $10^9/L$

(No range available)

26-Oct-2018 Dr Deepa Sanu

Result: Haemoglobin estimation

Below low reference limit

Haemoglobin estimation

105 g/L

(Range: 120 - 160)

26-Oct-2018 Dr Deepa Sanu

Result: Mean corpusc. haemoglobin (MCH)

Above high reference limit

Mean corpusc. haemoglobin (MCH)

38.1 pg

(Range: 27 - 32)

26-Oct-2018 Dr Deepa Sanu

Result: Mean corpusc. Hb. conc. (MCHC)

Below low reference limit

Mean corpusc. Hb. conc. (MCHC)

307 g/L

(Range: 320 - 360)

26-Oct-2018 Dr Deepa Sanu

Result: Mean corpuscular volume (MCV) fL

Above high reference limit

Mean corpuscular volume (MCV) fL

124 fL

(Range: 85 - 105)

26-Oct-2018 Dr Deepa Sanu

Result: Monocyte count $\times 10^9/L$ Monocyte count $\times 10^9/L$ 0.3 $10^9/L$

(Range: 0.2 - 0.8)

26-Oct-2018 Dr Deepa Sanu

Result: Neutrophil count $\times 10^9/L$ Neutrophil count $\times 10^9/L$ 6.7 $10^9/L$

(Range: 2 - 7.5)

26-Oct-2018 Dr Deepa Sanu

Result: Platelet count $\times 10^9/L$

Above high reference limit

Platelet count $\times 10^9/L$ 464 $10^9/L$

(Range: 150 - 400)

26-Oct-2018 Dr Deepa Sanu

Result: Red blood cell (RBC) count $\times 10^{12}/L$

Below low reference limit

Red blood cell (RBC) count $\times 10^{12}/L$ 2.75 $10^{12}/L$

(Range: 3.8 - 4.8)

26-Oct-2018 Dr Deepa Sanu

Result: Total white cell count $\times 10^9/L$ Total white cell count $\times 10^9/L$ 10.8 $10^9/L$

(Range: 4 - 11)

26-Oct-2018 Dr Deepa Sanu

Result: Lymphocyte count $\times 10^9/L$ Lymphocyte count $\times 10^9/L$ 3.6 $10^9/L$

(Range: 1.5 - 4)

26-Oct-2018 Dr Deepa Sanu

Result: Full blood count - FBC<none>

Full blood count - FBC <none>

(No range available)

26-Oct-2018 Dr Deepa Sanu Result: Haematocrit Below low reference limit Haematocrit	0.341 ratio	(Range: 0.37 - 0.47)
26-Oct-2018 Dr Deepa Sanu Result: Basophil count $\times 10^9/L$ Basophil count $\times 10^9/L$	0 $10^9/L$	(No range available)
02-Aug-2017 Mrs Catriona Baldie Result: Peak exp. flow rate: PEFR/PFR <i>Previous Best Ever = , Predicted = .</i> Peak exp. flow rate: PEFR/PFR <i>Previous Best Ever = , Predicted = .</i>	440 L/min	(No range available)
05-July-2017 Mrs Catriona Baldie Result: Lung function testing done Lung function testing done		(No range available)
05-July-2017 Mrs Catriona Baldie Result: Forced expired volume in 1 second Forced expired volume in 1 second	2.39 L	(No range available)
05-July-2017 Mrs Catriona Baldie Result: Percent predicted FEV1 Percent predicted FEV1	95 %	(No range available)
05-July-2017 Mrs Catriona Baldie Result: FEV1/FVC percent FEV1/FVC percent	82 %	(No range available)
05-July-2017 Mrs Catriona Baldie Result: Lung vital capacity Lung vital capacity	2.39 L	(No range available)
05-July-2017 Mrs Catriona Baldie Result: Oxygen saturation at periphery <i>at rest</i> Oxygen saturation at periphery <i>at rest</i>	98 %	(No range available)
29-Aug-2016 Dr Calum Paton Result: Eosinophil count $\times 10^9/L$ Eosinophil count $\times 10^9/L$	0.14 $10^9/L$	(No range available)
29-Aug-2016 Dr Calum Paton Result: Haemoglobin estimation Haemoglobin estimation	125 g/L	(Range: 120 - 160)
29-Aug-2016 Dr Calum Paton Result: Mean corpusc. haemoglobin(MCH) Above high reference limit Mean corpusc. haemoglobin(MCH)	35.1 pg	(Range: 27 - 32)
29-Aug-2016 Dr Calum Paton Result: Mean corpusc. Hb. conc. (MCHC) Mean corpusc. Hb. conc. (MCHC)	325 g/L	(Range: 320 - 360)
29-Aug-2016 Dr Calum Paton Result: Mean corpuscular volume (MCV) <i>fl</i> Above high reference limit Mean corpuscular volume (MCV) <i>fl</i>	108 fL	(Range: 85 - 105)
29-Aug-2016 Dr Calum Paton Result: Monocyte count $\times 10^9/L$ Monocyte count $\times 10^9/L$	0.6 $10^9/L$	(Range: 0.2 - 0.8)
29-Aug-2016 Dr Calum Paton Result: Neutrophil count $\times 10^9/L$ Above high reference limit Neutrophil count $\times 10^9/L$	7.6 $10^9/L$	(Range: 2 - 7.5)
29-Aug-2016 Dr Calum Paton Result: Platelet count $\times 10^9/L$ Above high reference limit Platelet count $\times 10^9/L$	469 $10^9/L$	(Range: 150 - 400)
29-Aug-2016 Dr Calum Paton Result: Red blood cell (RBC) count $\times 10^{12}/L$ Below low reference limit Red blood cell (RBC) count $\times 10^{12}/L$	3.57 $10^{12}/L$	(Range: 3.8 - 4.8)
29-Aug-2016 Dr Calum Paton Result: Total white cell count $\times 10^9/L$ Above high reference limit Total white cell count $\times 10^9/L$	12.6 $10^9/L$	(Range: 4 - 11)

29-Aug-2016 Dr Calum Paton

Result: Lymphocyte count $\times 10^9/L$
 Above high reference limit
 Lymphocyte count $\times 10^9/L$

4.2 $10^9/L$

(Range: 1.5 - 4)

29-Aug-2016 Dr Calum Paton

Result: Full blood count - FBC *<none>*
 Full blood count - FBC *<none>*

(No range available)

29-Aug-2016 Dr Calum Paton

Result: Haematocrit
 Haematocrit

0.386 ratio

(Range: 0.37 - 0.47)

29-Aug-2016 Dr Calum Paton

Result: Basophil count $\times 10^9/L$
 Basophil count $\times 10^9/L$

0.1 $10^9/L$

(No range available)

29-Aug-2016 Dr Calum Paton

Result: Serum albumin
 Serum albumin

38 g/L

(Range: 35 - 50)

29-Aug-2016 Dr Calum Paton

Result: Serum alkaline phosphatase U/L
 Serum alkaline phosphatase U/L

88 U/L

(Range: 30 - 130)

29-Aug-2016 Dr Calum Paton

Result: Serum alanine aminotransferase level Serum ALT level - U/L
 Serum alanine aminotransferase level Serum ALT level - U/L

36 U/L

(Range: 5 - 55)

29-Aug-2016 Dr Calum Paton

Result: Serum total bilirubin level
 Serum total bilirubin level

8 $\mu\text{mol/L}$

(No range available)

29-Aug-2016 Dr Calum Paton

Result: Serum creatinine
 Serum creatinine

62 $\mu\text{mol/L}$

(Range: 44 - 80)

29-Aug-2016 Dr Calum Paton

Result: Serum FSH level U/L
 Serum FSH level U/L

9.2 U/L

(Range: 1.1 - 9.6)

29-Aug-2016 Dr Calum Paton

Result: Serum LH level U/L
 Serum LH level U/L

6 U/L

(Range: 0.8 - 12)

29-Aug-2016 Dr Calum Paton

Result: Serum potassium
 Serum potassium

4.1 mmol/L

(Range: 3.5 - 5.3)

29-Aug-2016 Dr Calum Paton

Result: Serum sodium
 Serum sodium

140 mmol/L

(Range: 133 - 146)

29-Aug-2016 Dr Calum Paton

Result: Serum TSH level mU/L
 Serum TSH level mU/L

1.95 mU/L

(Range: 0.4 - 4)

29-Aug-2016 Dr Calum Paton

Result: Plasma glucose level
 Plasma glucose level

5.1 mmol/L

(Range: 3.3 - 5.8)

29-Aug-2016 Dr Calum Paton

Result: Liver function test *<none>*
 Liver function test *<none>*

(No range available)

29-Aug-2016 Dr Calum Paton

Result: Biochemical test *<none>*
 Biochemical test *<none>*

(No range available)

29-Aug-2016 Dr Calum Paton

Result: Acute kidney injury warning stage AKI warning stage - Not detected: but may not exclude AKI in all cases
 Acute kidney injury warning stage AKI warning stage - Not detected: but may not exclude AKI in all cases

(No range available)

29-Aug-2016 Dr Calum Paton

Result: GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD -
 GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD -

60 mL/min

(No range available)

29-Aug-2016 Dr Calum Paton

Result: GFR calculated abbreviated MDRD adj for African American origin GFR calculated abbreviated MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA
 GFR calculated abbreviated MDRD adj for African American origin GFR calculated abbreviated MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA

mL/min

(No range available)

16-Jun-2016 Dr Margaretha Badenhorst

Result: Serum creatinine

Serum creatinine

55 umol/L

(Range: 44 - 80)

16-Jun-2016 Dr Margaretha Badenhorst

Result: Serum potassium

Serum potassium

4.7 mmol/L

(Range: 3.5 - 5.3)

16-Jun-2016 Dr Margaretha Badenhorst

Result: Serum sodium

Serum sodium

139 mmol/L

(Range: 133 - 146)

16-Jun-2016 Dr Margaretha Badenhorst

Result: Serum urea level

Serum urea level

2.9 mmol/L

(Range: 2.5 - 7.8)

16-Jun-2016 Dr Margaretha Badenhorst

Result: Urea and electrolytes <none>

Urea and electrolytes <none>

(No range available)

16-Jun-2016 Dr Margaretha Badenhorst

Result: Acute kidney injury warning stage AKI warning stage - Not detected: but may not exclude AKI in all cases

Acute kidney injury warning stage AKI warning stage - Not detected: but may not exclude AKI in all cases

(No range available)

16-Jun-2016 Dr Margaretha Badenhorst

Result: GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD -

GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD -

60 mL/min

(No range available)

16-Jun-2016 Dr Margaretha Badenhorst

Result: GFR calculated abbreviated MDRD adj for African American origin GFR calculated abbreviated MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA

GFR calculated abbreviated MDRD adj for African American origin GFR calculated abbreviated MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA

mL/min

(No range available)

10-July-2015 Mrs Olive Neave

Result: FEV1 after bronchodilation

FEV1 after bronchodilation

96 %

(No range available)

10-July-2015 Mrs Olive Neave

Result: FEV1 after bronchodilation

FEV1 after bronchodilation

2.47 L

(No range available)

10-July-2015 Mrs Olive Neave

Result: Oxygen saturation at periphery

Oxygen saturation at periphery

99 %

(No range available)

16-May-2014 Dr Ruth Stevenson

Result: Serum albumin

Serum albumin

36 g/L

(Range: 35 - 50)

16-May-2014 Dr Ruth Stevenson

Result: Serum alkaline phosphatase U/L

Serum alkaline phosphatase U/L

82 U/L

(Range: 30 - 130)

16-May-2014 Dr Ruth Stevenson

Result: Serum alanine aminotransferase level Serum ALT level - U/L

Serum alanine aminotransferase level Serum ALT level - U/L

21 U/L

(Range: 5 - 55)

16-May-2014 Dr Ruth Stevenson

Result: Serum total bilirubin level

Serum total bilirubin level

6 umol/L

(No range available)

16-May-2014 Dr Ruth Stevenson

Result: Serum calcium

Serum calcium

2.15 mmol/L

(Range: 2.1 - 2.55)

16-May-2014 Dr Ruth Stevenson

Result: Corrected serum calcium level

Corrected serum calcium level

2.19 mmol/L

(Range: 2.1 - 2.55)

16-May-2014 Dr Ruth Stevenson

Result: Serum cholesterol

Above high reference limit

Serum cholesterol

5.55 mmol/L

(No range available)

16-May-2014 Dr Ruth Stevenson

Result: Serum creatinine

Serum creatinine

55 umol/L

(Range: 44 - 80)

16-May-2014 Dr Ruth Stevenson

Result: Serum HDL cholesterol level

Serum HDL cholesterol level

0.95 mmol/L

(Range: 0.6 - 2.5)

16-May-2014 Dr Ruth Stevenson

Result: Serum potassium

Serum potassium

4.8 mmol/L

(Range: 3.5 - 5.3)

16-May-2014 Dr Ruth Stevenson

Result: Serum sodium

Serum sodium

141 mmol/L

(Range: 133 - 146)

16-May-2014 Dr Ruth Stevenson

Result: Serum TSH level mU/L

Serum TSH level mU/L

1.3 mU/L

(Range: 0.4 - 4)

16-May-2014 Dr Ruth Stevenson

Result: Serum urea level

Serum urea level

3 mmol/L

(Range: 2.5 - 7.8)

16-May-2014 Dr Ruth Stevenson

Result: Plasma glucose level

Plasma glucose level

5.1 mmol/L

(Range: 3.3 - 5.8)

16-May-2014 Dr Ruth Stevenson

Result: Bone profile <none>

Bone profile <none>

(No range available)

16-May-2014 Dr Ruth Stevenson

Result: Liver function test <none>

Liver function test <none>

(No range available)

16-May-2014 Dr Ruth Stevenson

Result: Urea and electrolytes <none>

Urea and electrolytes <none>

(No range available)

16-May-2014 Dr Ruth Stevenson

Result: GFR calculated abbreviated MDRD adj for African Americ origin GFR calctd abbtdd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA

GFR calculated abbreviated MDRD adj for African Americ origin GFR calctd abbtdd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA

(No range available)

16-May-2014 Dr Ruth Stevenson

Result: Total cholesterol:HDL ratio <none>

Total cholesterol:HDL ratio <none>

ratio

(No range available)

16-May-2014 Dr Ruth Stevenson

Result: Total cholesterol:HDL ratio.

Total cholesterol:HDL ratio .

5.8 ratio

(No range available)

16-May-2014 Dr Ruth Stevenson

Result: GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD -

GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD -

60 mL/min

(No range available)

16-May-2014 Dr Ruth Stevenson

Result: Eosinophil count x10⁹/LEosinophil count x10⁹/L0.16 10⁹/L

(No range available)

16-May-2014 Dr Ruth Stevenson

Result: Haemoglobin estimation

Haemoglobin estimation

124 g/L

(Range: 120 - 160)

16-May-2014 Dr Ruth Stevenson

Result: Mean corpusc. haemoglobin (MCH)

Above high reference limit

Mean corpusc. haemoglobin (MCH)

34.9 pg

(Range: 27 - 32)

16-May-2014 Dr Ruth Stevenson

Result: Mean corpusc. Hb. conc. (MCHC)

Below low reference limit

Mean corpusc. Hb. conc. (MCHC)

314 g/L

(Range: 320 - 360)

16-May-2014 Dr Ruth Stevenson

Result: Mean corpuscular volume (MCV) fl

Above high reference limit

Mean corpuscular volume (MCV) fl

111 fL

(Range: 85 - 105)

16-May-2014 Dr Ruth Stevenson

Result: Monocyte count x10⁹/LMonocyte count x10⁹/L0.6 10⁹/L

(Range: 0.2 - 0.8)

16-May-2014 Dr Ruth Stevenson

Result: Neutrophil count x10⁹/LNeutrophil count x10⁹/L5 10⁹/L

(Range: 2 - 7.5)

16-May-2014 Dr Ruth Stevenson

Result: Platelet count x10⁹/L

Above high reference limit

Platelet count x10⁹/L429 10⁹/L

(Range: 150 - 400)

16-May-2014 Dr Ruth Stevenson

Result: Red blood cell (RBC) count $10^{12}/L$

Below low reference limit

Red blood cell (RBC) count $\times 10^{12}/L$ 3.55 $10^{12}/L$

(Range: 3.8 - 4.8)

16-May-2014 Dr Ruth Stevenson

Result: Total white cell count $10^9/L$ Total white cell count $\times 10^9/L$ 10 $10^9/L$

(Range: 4 - 11)

16-May-2014 Dr Ruth Stevenson

Result: Lymphocyte count $10^9/L$

Above high reference limit

Lymphocyte count $\times 10^9/L$ 4.2 $10^9/L$

(Range: 1.5 - 4)

16-May-2014 Dr Ruth Stevenson

Result: Full blood count - FBC *<none>*Full blood count - FBC *<none>*

(No range available)

16-May-2014 Dr Ruth Stevenson

Result: Blood film microscopy Cells as counted with no significant morphological abnormality. The count may reflect co-morbidity. Please repeat in a few weeks to ensure resolution of changes. Sudhir TAURO. Consultant Haematologist.

Blood film microscopy Cells as counted with no significant

morphological abnormality. The count may reflect co-morbidity. Please repeat in a few weeks to ensure resolution of changes. Sudhir TAURO. Consultant

Haematologist.

(No range available)

16-May-2014 Dr Ruth Stevenson

Result: Haematocrit

Haematocrit

0.394 ratio

(Range: 0.37 - 0.47)

16-May-2014 Dr Ruth Stevenson

Result: Basophil count $10^9/L$ Basophil count $\times 10^9/L$ 0.1 $10^9/L$

(No range available)

16-Mar-2012 Dr Margaretha Badenhorst

Result: Serum cholesterol

Above high reference limit

Serum cholesterol

6.43 mmol/L

(No range available)

16-Mar-2012 Dr Margaretha Badenhorst

Result: Serum HDL cholesterol level

Serum HDL cholesterol level

0.96 mmol/L

(Range: 0.6 - 2.5)

16-Mar-2012 Dr Margaretha Badenhorst

Result: Plasma glucose level

Plasma glucose level

4.5 mmol/L

(Range: 3.3 - 5.8)

16-Mar-2012 Dr Margaretha Badenhorst

Result: Total cholesterol:HDL ratio *<none>*Total cholesterol:HDL ratio *<none>*

ratio

(No range available)

16-Mar-2012 Dr Margaretha Badenhorst

Result: Total cholesterol:HDL ratio

Total cholesterol:HDL ratio

6.6 ratio

(No range available)

08-Feb-2011 Dr B Hollins

Result: Serum creatinine

Serum creatinine

59 $\mu\text{mol}/L$

(Range: 44 - 80)

08-Feb-2011 Dr B Hollins

Result: Serum potassium POTASSIUM -

Serum potassium POTASSIUM -

4.7 mmol/L

(Range: 3.5 - 5)

08-Feb-2011 Dr B Hollins

Result: Serum sodium

Serum sodium

140 mmol/L

(Range: 135 - 147)

08-Feb-2011 Dr B Hollins

Result: Serum urea level

Below low reference limit

Serum urea level

2.9 mmol/L

(Range: 3.3 - 6.6)

08-Feb-2011 Dr B Hollins

Result: GFR calculated abbreviated MDRD adj for African American origin GFR calcd abttd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA

GFR calculated abbreviated MDRD adj for African American origin GFR calcd

abttd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR

HAEMATURIA AND PROTEINURIA

(No range available)

08-Feb-2011 Dr B Hollins

Result: GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD -

GFR calculated abbreviated MDRD GFR calculated abbreviated MDRD -

60 mL/min

(No range available)

02-Jun-2008 Dr Margaretha Badenhorst

Result: Blood glucose result

Blood glucose result

4.8 mmol/L

(No range available)

28-Jan-2004 Dr Staff Unknown Member of Staff**Result:** Urine culture - E. Coli

Urine culture - E. Coli

0

(No range available)

16-Apr-1999 Dr Staff Unknown Member of Staff**Result:** High vaginal swab taken *Light growth of candida*High vaginal swab taken *Light growth of candida*

0

(No range available)

04-Dec-1998 Dr Staff Unknown Member of Staff**Result:** Sample serology *no atypical red cell antibodies detected.retest at 28-30 weeks.blood group o rh.[d] positive.*Sample serology *no atypical red cell antibodies detected.retest at 28-30 weeks.blood group o rh.[d] positive.*

0

(No range available)

19-Aug-1997 Dr Staff Unknown Member of Staff**Result:** High vaginal swab taken *No polymorphsNo trichomonasNo candidaClue cells seen on microscopyWhich may be consistent with gardnenrella vaginalis infection*High vaginal swab taken *No polymorphsNo trichomonasNo candidaClue cells seen on microscopyWhich may be consistent with gardnenrella vaginalis infection*

0

(No range available)

18-Aug-1997 Dr Staff Unknown Member of Staff**Result:** Urine pregnancy test negative

Urine pregnancy test negative

0

(No range available)

13-Aug-1997 Dr Staff Unknown Member of Staff**Result:** Full blood count borderline *h 11.9 - needs iron*Full blood count borderline *h 11.9 - needs iron*

0

(No range available)

13-Aug-1997 Dr Staff Unknown Member of Staff**Result:** Urine culture - mixed growth

Urine culture - mixed growth

0

(No range available)

25-Mar-1997 Dr Staff Unknown Member of Staff**Result:** Urine pregnancy test negative

Urine pregnancy test negative

0

(No range available)

06-May-1996 Dr Staff Unknown Member of Staff**Result:** Full blood count normal *hb 13.0*Full blood count normal *hb 13.0*

0

(No range available)

13-Feb-1995 Dr Staff Unknown Member of Staff**Result:** Plain X-ray ribs *no fracture or pneumothorax seen.*Plain X-ray ribs *no fracture or pneumothorax seen.*

0

(No range available)

Other Items

This section is empty.

Attachments

Scanned Document**08-July-2026 ACOYLE****Additional:** Scanned Document**Filename:** 95.pdf**Extension:** .tif**Pages:**

Hartin SURNAME		Audra CHRISTIAN NAMES			REPLACEMENT (CP) 221188 OCCUPATION		SURNAME
National Health Service Number S282 1968 2 1791		Single Married Widowed	Date of Birth 13 12 68	(Note changes and insert year of change) 0024 19.....			
Address (1) 21 Hopdown Street		Name of Practitioner Dr Gardiner		Health Board Cipher - Date 19.....		19.....	
(2) 1 Campbell's Close 2 Oakview Rd.		(2)		(2)		Died 19.....	
Dundee (3) DD3 6QG 17 Hillbarnie Rd		(3)		1980 1981 1982 1983 1984 1985 1986 1987 1988 1989 1990		CAUSE OF DEATH 1. _____ 2. _____	
(4) Dundee DD3 7BG		(4)					
						Signature of Practitioner	

Form G.P.6B (Scotland) - FEMALE

MAJOR ALLERGIES							
Date Noted							
BLOOD GROUP		RFI	ANTIBODIES				
		Date	Date				
	DIP VAC	Per VAC	TET VAC	POL VAC	SMALLPOX	TAB VAC	MEAS VAC
1							
2							
3							
Boost							
Boost							
Boost							
TUBERCULIN TEST	Result				B.C.G.	Result	
	Date					Date	
OTHER INOCULATIONS	Type						
	Date						
M.M.R. (Date)							
CERVICAL SMEAR (Date)		19/3/87	24/6/87	14/1/91			

SURNAME		CHRISTIAN NAMES			OCCUPATION	
National Health Service Number		Single Married Widowed	Date of Birth			(Note changes and insert year of change)
5 282 - 1968 - 2 - 1791			13	12	68	19.....
Address (1)		Name of Practitioner		Executive Council Cipher — Date		19.....
10 Bonetale St. 15 TANNADIE ST.		R. A. B. RORIE		DEE 31 MAR 1969		19.....
(2)		(2)		(2)		Died
C/o 30 Inverston Jones		Wm. M. Gardiner				19.....
(3)		(3)		(3)		CAUSE OF DEATH
145 Carbery Cr.						1.
(4)		(4)		(4)		2.
Colonel Jones 133 R/Ferry Rd		21 Hepburn Str.				
281 Strathmore ave						

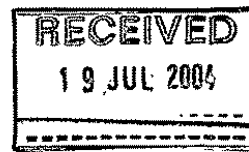
Scanned Document
08-July-2026 ACOYLE
Additional: Scanned Document

Filename: 94.pdf
Extension: .tif
Pages:

USE BALL PEN FIRMLY		GYNAECOLOGICAL CYTOLOGY SERVICE		LAB. REPORT No. 0416162	
Clinician <i>DUNCAN</i>	Source <i>GP</i>	Surname <i>MARTIN</i>	Maiden Name		
Previous Smear - Date, Place & Result <i>1/9/99 @ GP</i>		Forename(s) <i>AUDRA</i>			
Date of Examination <i>1/7/04</i>	Clinic Review: YES / NO <i>YES</i>	Address <i>17 MILLBANK PLACE</i>			
Interval:		Postcode <i>WINDLE 003 7BE</i>			
Clinical Diagnosis <i>CERVICAL SMEAR</i>		G.P. and Address <i>OL BADENHURST</i>			
Signature <i>Duncan</i>		G.P. Ref. No.			
No. of Pregnancies <i>2</i>		Birth Date and C.H.I. No. <i>7 3 1 2 6 8 0 0 2 4</i>			
Pregnant: YES / NO	Cervix: Normal / Erosion / Suspicious / Malignant	Oral Contraception: YES / NO		Single	
Post Natal Weeks	Previous Colposcopy / Hyster. / Cone / Ablation	I.U.C.D. Nil / Past / Current		Married	
Age at Menopause	Smear: Cervix / Vagina / Other (Specify)	Radiation: YES / NO		Widowed	
	L.M.P. <i>2 6 0 0 4</i>	Hormone Treatment: YES / NO		Divorced	
Histological Report: <i>Non-Inf. Hyst @ L</i>		☒ Negative ☐ Inf. / Inflam. ☐ Borderline Sq. Abn. ☐ Mild Sq. Dyskaryosis ☐ Moderate Sq. Dyskaryosis ☐ Severe Sq. Dyskaryosis (? CIN 3) ☐ CIN 3 / Invasive Sq. Carcinoma ☐ Glandular Atypia ☐ Adenocarcinoma ☐ No Report - Unsatisfactory Smear			
T016162/04  Ninewells		Repeat ☒ YES / NO ☐ NO			
Cellularity: Good / Moderate / Poor	Endocervicals: YES / NO	Date: <i>17/04</i>			
THB(MR)118 (Rev.2/90)	Signature: <i>K. Fulton</i>	36 Months			

0/5

FILE	INT.
REPEAT/DATE	VKS
SCRIPT DONE	
APPOINTMENT	
NOTES	
NURSE	



THIRD PARTY COPY

HAEMATOTOLOGY

DMR292

DEPARTMENT OF HAEMATOTOLOGY - NINEMELLS HOSPITAL

NAME: MARTIN Audra Sex: F CHI Number: 1312680024 DoB: 13 Dec 1968
Lab No: H00652719
Tay Court Surgery Clinician: Dr B.J. HOLLINS TCS HOLB1G

Hb	12.9	g/dl	WBC	11.8	H x10 ⁹ /l	PLT	298	x10 ⁹ /l
RBC	4.34	x10 ¹² /l	NE#	7.8	H x10 ⁹ /l	MPV	11.7	fl
HCT	0.394	l/l	LY#	3.1	x10 ⁹ /l			
MCV	90.8	fl	MO#	0.7	x10 ⁹ /l			
MCH	29.7	pg	EO#	0.1	x10 ⁹ /l			
MCC	32.7	g/dl	BA#	0.0	x10 ⁹ /l			

PV 1.57 mPa.s. (1.5-1.72)

RECEIVED

26 OCT 2000

NORMAL
APPOINTMENT
PRESCRIPTION DONE
SPEAK TO DOCTOR
PRACTICE NURSE
NOTES

Received 25 Oct 2000 12:42

Date of FBC Request 25 Oct 2000

Report Issued 25 Oct 2000

REPORT RECEIVED

DOCTOR'S INITIALS

DOCHEMICAL MEDICINE

Form 374

HIREWELLS HOSPITAL AND MEDICAL SCHOOL

Telephone 660111 Ext 32601/2

Name: MARTIN

Audra

Sex: F PID: 1312680024

DoB: 13 Dec 1968

Lab No: C00652719

Tay Court Surgery

Clinician: Dr B.J. HOLLINS

TCS HOLB1G

SODIUM	138	mmol/L	(	135-147	)
POTASSIUM	3.9	mmol/L	(	3.5-5.0	)
UREA	3.3	mmol/L	(	3.3-6.6	)
CREATININE	80	umol/L	(	50-100	)
ALT	19	U/L	(	12-41	)
BILIRUBINS	8	umol/L	(	0-15	)
ALKALINE PHOSPHATASE	57	U/L	(	20-80	)
ALBUMIN	45	g/L	(	36-50	)
CALCIUM	2.35	mmol/L	(	2.10-2.55	)
CALCIUM (CORRECTED)	2.37	mmol/L	(	2.10-2.55	)
YSH	1.62	mU/L	(	0.4-4.0	)
LH	4.8	U/L	(	follic. 0.8-12.0	)
FSH	2.7	U/L	(	follic. 1.1-9.6	)
PROLACTIN	175	mU/L	(	up to 600	)

NOTES	
PRACTICE NURSE	
SPEAK TO DOCTOR	
PRESCRIPTION DONE	
APPOINTMENT	
NORMAL	

RECEIVED

7 6 OCT 2000

Lab Comments:

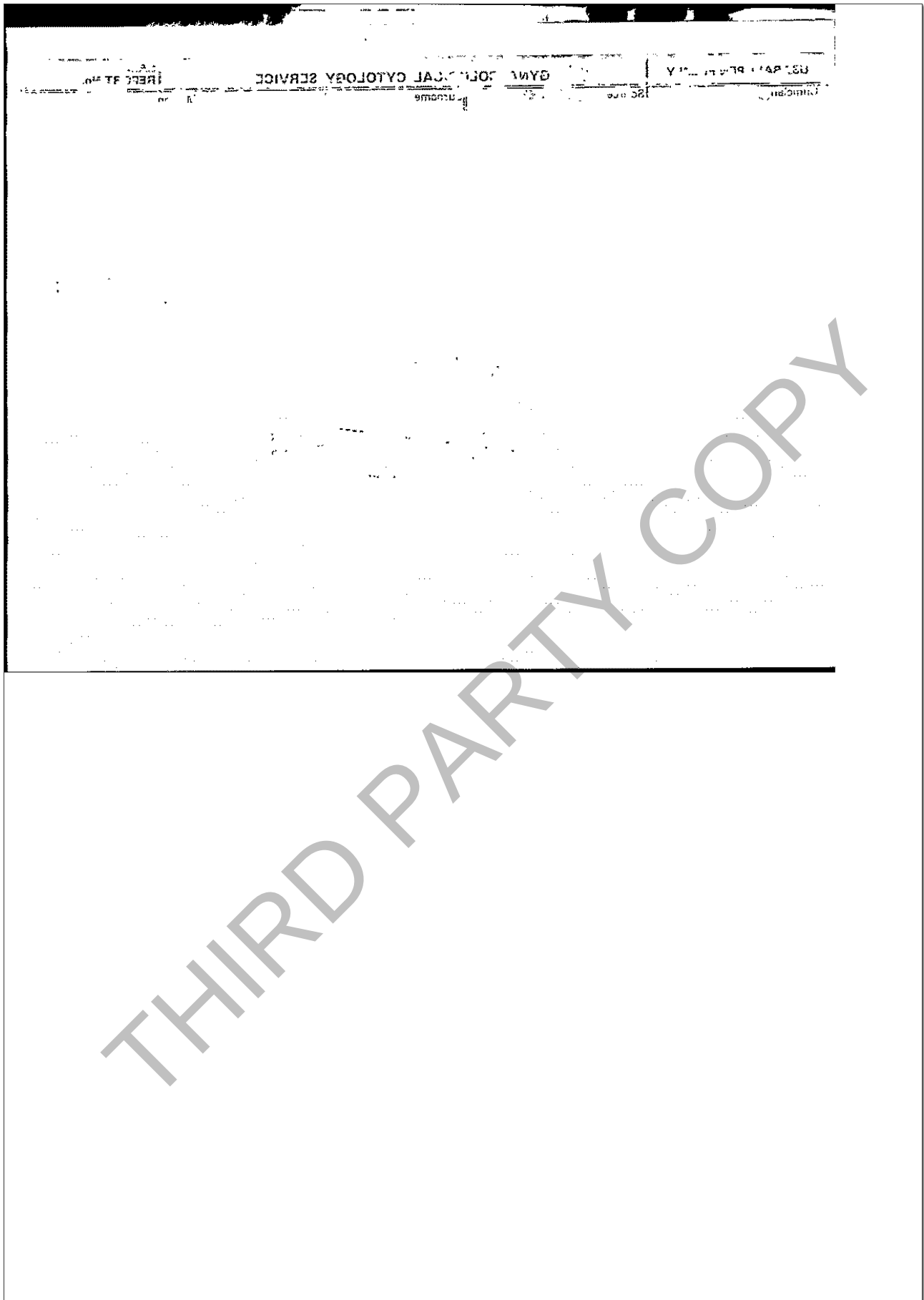
Sample Date/Time
25 Oct 2000

Request Entered: 25 Oct 2000 12:45

Report Printed: 25 Oct 2000

REPORT RECEIVED

DOCTOR'S INITIALS



MINEWELLS HOSPITAL Bacteriology

01382 632559

Name : MARTIN, Audra

CHI No : 1312680024

Clinician: Dr R.M. ANDERSEN

DoB : 13 Dec 1968

Sex: F

Tay Court Surgery

Post Code: DD3 7BE

998042868U Date/Time of Specimen: 16 Apr 1999

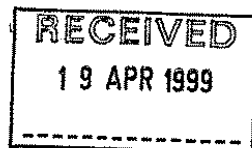
HIGH VAGINAL SWAB

SENSITIVITIES 1 2
Nystatin S

CULTURE

- 1) Light Growth of Candida
- 2) N. gonorrhoeae not isolated

Few Polymorphs
No Trichomonas



File	Enter on
File	Computer
RMA	
OF	
AJM	
SC	
Nurse 1	
Nurse 2	

Date of Report: 19 Apr 1999

AUTH: PHIG

Pre-dose	Post-dose	8 to 10 mg/L (1 hr)	8 to 10 mg/L (1 hr)	8 to 10 mg/L (1 hr)	1 to 2 mg/L	5 to 10 mg/L	N/A	C - reactive protein: normally less than 10 mg/L
Gentamicin	8 to 10 mg/L (1 hr)	8 to 10 mg/L (1 hr)	8 to 10 mg/L (1 hr)	8 to 10 mg/L (1 hr)	1 to 2 mg/L	1 to 2 mg/L	5 to 10 mg/L	5 - Flucytosine
Netilmicin	8 to 10 mg/L (1 hr)	8 to 10 mg/L (1 hr)	8 to 10 mg/L (1 hr)	8 to 10 mg/L (1 hr)	1 to 2 mg/L	1 to 2 mg/L	1 to 2 mg/L	Vancomycin
Tobramycin	8 to 10 mg/L (1 hr)	8 to 10 mg/L (1 hr)	8 to 10 mg/L (1 hr)	8 to 10 mg/L (1 hr)	1 to 2 mg/L	1 to 2 mg/L	1 to 2 mg/L	18 to 26 mg/L (12 hr)
8 to 10 mg/L (1 hr)	8 to 10 mg/L (1 hr)	8 to 10 mg/L (1 hr)	8 to 10 mg/L (1 hr)	8 to 10 mg/L (1 hr)	1 to 2 mg/L	1 to 2 mg/L	1 to 2 mg/L	60 to 80 mg/L

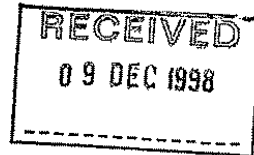
ADULT REFERENCE RANGES FOR ANTIBIOTIC ASSAYS (twice daily dosage) AND CRP

AMOX - amoxycillin	CLIN - clindamycin	CLOX - ticloxacillin	CTAX - cefotaxime	CZID - ceftazidime	ATM - aztreonam	CFL - cephalaxin	CHLO - chloramphenicol	CIP - ciprofloxacin
AUG - augmentin	CLIN - clindamycin	CLOX - ticloxacillin	CTAX - cefotaxime	CZID - ceftazidime	ATM - aztreonam	CFL - cephalaxin	CHLO - chloramphenicol	CIP - ciprofloxacin
ATER - ampicillin	GEN - gentamicin	MAP - mapamycin	MET - metronidazole	NEO - neomycin	NET - netilmicin	NIT - nitrofurantoin	NYS - nystatin	PEN - benzylpenicillin
PIPP - piperacillin	RIF - rifampicin	SPEC - spectinomycin	SXT - cotrimoxazole	TEI - tetracycline	TOB - tobramycin	TRI - trimethoprim	VAN - vancomycin	

ANTIBIOTIC ABBREVIATIONS IN USE ON REPORT

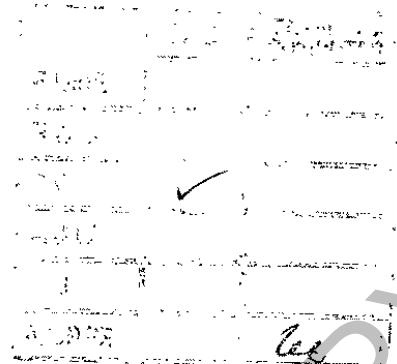
Please affix to Patient's Case Notes		ANTE NATAL / SEROLOGY REPORT		CPA accredited	
DATE OF SAMPLE:		DATE RECEIVED: 04-Dec-98		MARTIN	
BLOOD GROUP		E.D.D. : 25-Jun-99		AUDRA	
O Rh(D) Positive				17 HILLBANK PLACE	
ANTIBODY SCREEN:				DUNDEE DD3 7BE	
NO ATYPICAL RED CELL ANTIBODIES DETECTED				D.O.B./C.H.I. :13-Dec-68 1312680024	
				TAYCOURT H/CENTRE	
				CONS: RM ANDERSEN	
				Additional Copies:	
				DR ID DUNCAN - NINEWELLS HOSPITAL	
RECEIVED 04/12/98 SIGNED: <i>R. Comack</i> DATE: 04/12/1998					
EAST OF SCOTLAND BTS		TEL: 01382 660111		SAMPLE NUMBER 835978	
NINEWELLS HOSPITAL DUNDEE		ext. 32933			

Date	12/09/98	Page No.	136
FMCG		Project	
INRA			
SP	2		
AKI			
SS			
UN/CT			
UN/IS			



THIRD PARTY COPY

USE BALL PEN FIRMLY		GYNAECOLOGICAL CYTOLOGY SERVICE		LAB. REPORT No. 9716862	
Clinician <i>Dr Hawale</i>	Source <i>C-1</i>	Surname <i>MALIN</i>	Maiden Name		
Previous Smear - Date, Place & Result <i>21/4/93. 20.6.8</i>		Forenames(s) <i>AUDRA</i>			
Date of Examination <i>19/8/97 21/8</i>	Clinic Review: YES / NO Interval:	Address <i>17 HILLBANK R DUNDEE</i>			
Clinical Diagnosis <i>Routine</i>		Postcode <i>DUNDEE</i>		G.P. and Address <i>DR FLAVIAN 50 ST THAY ST</i>	
Signature <i>Dr D Hawale</i>		Birth Date and C.H.I. No. <i>1 3 1 2 6 8 0 0 2 4</i>		G.P. Ref. No. <i>5148</i>	
No. of Pregnancies ☐	Cervix: Normal / Erosion / Suspicious / Malignant	Oral Contraception: YES / NO		Single	
Pregnant: YES / NO	Previous Colposcopy / Hyster. / Cone / Ablation	I.U.C.D.: Nil / Past / Current		Married	
Post Natal Weeks	Smear: Cervix / Vagina / Other (Specify)	Radiation: YES / NO		Widowed	
Age at Menopause	L.M.P. <i>0 2 0 7 9 7</i>	Hormone Treatment: YES / NO		Divorced	
Histological Report: <i>9405070 1 (S)</i>		☒ Negative ☐ Inf. / Inflam. ☐ Borderline Sq. Abn. ☐ Mild Sq. Dyskaryosis ☐ Moderate Sq. Dyskaryosis ☐ Severe Sq. Dyskaryosis (? CIN 3) ☐ CIN 3 / Invasive Sq. Carcinoma ☐ Glandular Atypia ☐ Adenocarcinoma ☐ No Report - Unsatisfactory Smear			
Comment on Smear: <i>Scanty negative smear. Rbt</i>					
Cellularity: Good / <u>Moderate</u> / Poor		Endocervicals: YES / NO		Repeat: YES / NO	
THBfMR118 (Rev.2/90) Signature: <i>M. Mather</i> Date: <i>26/3/97</i>				<i>30</i> Months	



THIRD PARTY COPY

NINEWELLS HOSPITAL Bacteriology 01382 660111 ext 2559

(2)

Name : MARTIN Audra Destination: 50ST 50ST
 CHI No. : TAY / 1312680024 Clinician: Dr Catherine FLAVAHAN
 DoB : 13-DEC-1968 Sex: F Location: Tay Court Surgery
 Post Code : DD3 7BE Tay Court Surgery

High vaginal swab

(MB076318J/ /97) Taken : 19-AUG-97
 First

No polymorphs
 No Trichomonas
 No Candida

Clue cells seen on microscopy,
 Which may be consistent with Gardnerella vaginalis infection

①

	FILE	ENTER ON COMPUTER
F McG		
RMA		
CF		✓
AJM		

DATE OF REPORT: 21-AUG-97 (Page 1 of 1)

NURSE FOR T 80 Ext 2559

Further information and advice is available by contacting the laboratory at Ninewells Hospital (01382) 60111, Extension 2559 or 2855 or the duty microbiologist (Bleep 039).

ADULT REFERENCE RANGES FOR ANTIBIOTIC ASSAYS (twice daily dosage) AND CRP		
Pre-dose	Post-dose	
Gentamicin	1 to 2 mg/L	8 to 10 mg/L (1 hr)
Netilmicin	1 to 2 mg/L	8 to 10 mg/L (1 hr)
Tobramycin	1 to 2 mg/L	8 to 10 mg/L (1 hr)
Vancomycin	5 to 10 mg/L	18 to 26 mg/L (2 hr)
5 - Fluorcytosine	N/A	60 to 80 mg/L
C - reactive protein : normally less than 10 mg/L		

AMOX - amoxycillin	CLIN - clindamycin	GEN - gentamicin	PIP - piperacillin
ATRA - amphotericin	CLOX - flucloxacillin	IMP - imipenem	RIF - rifampicin
AUG - augmentin	CTAX - cefotaxime	MET - metronidazole	SPEC - spectinomycin
AZLO - azlocillin	CZID - ceftazidime	NEO - neomycin	SXT - cotrimoxazole
ATM - aztreonam	CXM - cefturoxime	NET - netilmicin	TEI - telicoplanin
CFAL - cephalexin	ERY - erythromycin	NIT - nitrofurantoin	TOB - tobramycin
CHLO - chloramphenicol	5 FC - 5 fluorcytosine	NYS - nystatin	TRI - trimethoprim
CIP - ciprofloxacin	FUS - fusidic acid	PEN - benzylpenicillin	VAN - vancomycin

ANTIBIOTIC ABBREVIATIONS IN USE ON REPORT

NINEWELLS HOSPITAL Bacteriology 01382 660111 ext 2559

Name : MARTIN Audra Destination: 5OST 5OST
 CHI No. : TAY / 1312680024 Clinician: Dr Rosalind M ANDERSEN
 DoB : 13-DEC-1968 Sex: F Location: Tay Court Surgery
 Post Code : DD3 7BE Tay Court Surgery

Dip slide (MB074629M/ /97) Taken : 13-AUG-97
 Final

Mixed growth obtained - Please repeat specimen if indicated

*repeat
of system*

	FILE	ENTER ON COMPUTER
FMCG		
RMA	✓	
CF		
AJM		
SG		
NURSE		

DATE OF REPORT: 14-AUG-97 (Page 1 of 1) for : EB Ext

Further information and advice is available by contacting the laboratory at Ninewells Hospital (01382) 60111, Extension 2559 or 2855 or the duty microbiologist (Bleep 039).

ADULT REFERENCE RANGES FOR ANTIBIOTIC ASSAYS (twice daily dosage) AND CRP			
Gentamicin	Pre-dose	1 to 2 mg/L	8 to 10 mg/L (1 hr)
Netilmicin	Pre-dose	1 to 2 mg/L	8 to 10 mg/L (1 hr)
Tobramycin	Pre-dose	1 to 2 mg/L	8 to 10 mg/L (1 hr)
Vancomycin	Pre-dose	5 to 10 mg/L	18 to 26 mg/L (2 hr)
5 - Fluorysteine	Pre-dose	N/A	80 to 80 mg/L
C - reactive protein : normally less than 10 mg/L			

ANTIBIOTIC ABBREVIATIONS IN USE ON REPORT

AMOX - amoxycillin	CLIN - clindamycin	GEN - gentamicin	PIP - piperacillin
ATER - amphotericin	CLOX - flucloxacillin	IMP - imipenem	RIF - rifampicin
AUG - augmentin	CTAX - cefotaxime	MET - metronidazole	SPEC - spectinomycin
AZLO - azlocillin	CZID - ceftazidime	NEO - neomycin	SXT - cotrimoxazole
ATM - aztreonam	CXM - ceftroxime	NET - netilmicin	TEI - teicoplanin
CFAL - cephalixin	ERY - erythromycin	NIT - nitrofurantoin	TOB - tobramycin
CHLO - chloramphenicol	5 FC - 5 flucytosine	NYS - nystatin	TRI - trimethoprim
CIP - ciprofloxacin	FUS - fusidic acid	PEN - benzylpenicillin	VAN - vancomycin

HAEMATOLOGY

DMR292

MARTIN

Audra

Sex F

CHI number 1312680024

D.o.B. 13-DEC-1968

TCS

Ward/Dept GP

Clinician Francis MCGRORY

Lab No. 97148832

Hb	11.9	g/dl	WBC	8.0	$\times 10^9/L$	PLT	243.0	$\times 10^9/L$
RBC	3.92	$\times 10^{12}/L$	NE#	4.3	$\times 10^9/L$	MPV	11.9	fL
HCT	0.363	l/l	LY#	2.9	$\times 10^9/L$			
MCV	92.6	fL	MO#	0.6	$\times 10^9/L$			
MCH	30.4	pg	EO#	0.1	$\times 10^9/L$			
MCHC	32.8	g/dl	BA#	0.0	$\times 10^9/L$			

	FILE	ENTER ON COMPUTER
F MCG		
RMA		
CF	✓	
AJM		
SG		
NURSE		

Received 13-AUG-97 12:40

Report FINAL

Issued 13-AUG-97 13:30 HMA

Date of FBC Request 13-AUG-97

Page 1

REPORT RECEIVED

DOCTOR'S INITIALS

HAEMATOLOGY

DMR292

MARTIN Audra Sex F CHI number 1312680024 D.o.B. 13-DEC-1968

TCS Ward/Dept GP Clinician Catherine FLAVAHAN Lab No.96075262

Hb	13.0	g/dl	WBC	11.8	$\times 10^9/L$	PLT	312.0	$\times 10^9/L$
RBC	4.27	$\times 10^{12}/L$	NE#	7.8	$\times 10^9/L$	MPV	9.8	fL
HCT	0.378	L/L	LY#	3.1	$\times 10^9/L$			
MCV	88.4	fL	MO#	0.8	$\times 10^9/L$			
MCH	30.5	pg	EO#	0.1	$\times 10^9/L$			
MCHC	34.5	g/dL						

	FILE	ENTER ON COMPUTER
F McG		
RMA		
CF	✓	
AJM		
SG		
NURSE		

Received 26-APR-96 13:19

Report FINAL

Date of FBC Request 26-APR-96

Page 1

Issued 26-APR-96 14:30 HMA

REPORT RECEIVED

DOCTOR'S INITIALS

✓

Dundee Teaching Hospitals N.H.S. Trust - RADIOLOGY REPORT PAGE 1
 PAS No: 131268 0024 Comp No. 272000 Att.No 1 Hospital: DUNDEE ROYAL INFIRMARY
 Name: AUDRA MARTIN Referring Clinician: Dr A J MONTGOMERY
 Address: 17 HILLBANK PL Ward: GP
 DUNDEE GP Practice: TAY COURT SURGERY
 50 SOUTH TAY ST
 DUNDEE, DD1 1PF

REQUEST DATE 08/02/95 DD3 7BE

RIB VIEWS - RIGHT: No fracture or pneumothorax seen.

(C)
m

	FILE	ENTER ON COMPUTER
F McG		
MA		
P		
UIM	10 FEB 1995	
SG		
CHIEF		

This report is only valid when verified

Exam date 08/02/95
 Exam: RIBR CHF

Date reported 08/02/95
 Radiologist: Dr F FLETCHER /BC

Date typed 08/02/95
 VERIFIED

DEPT. MICROBIOLOGY, NINEWELLS HOSPITAL, DUNDEE			
MARTIN	1312580024	SOURCE OF REQUEST	
AUDRA	F 13/12/68	50 5TH TAY ST, DUNDEE	MISC
17 HILLBANK PLACE		MCKENZIE	G.P.
DUNDEE			
CLINICAL DATA		ISSUE	PAGE
		1	1
09/06/94 H.V.S. 13997H A few polymorphs A few candida sensitive to NYSTATIN —X No trichomonas			
THIRD PARTY COPY 13/06/94			

Further information and advice is available by contacting the laboratory at Nineveills Hospital 60111, Extension 2559 or 2855 or the duty microbiologist (Bleep 039).
Virology enquiries, Extension 2543 or 2525.

ADULT REFERENCE RANGES FOR ANTIBIOTIC ASSAYS AND CRP	
Pre-dose	Post-dose
Gentamicin 1 to 2 mg/L 8 to 10 mg/L (1 hr)	Gentamicin 1 to 2 mg/L 8 to 10 mg/L (1 hr)
Netilmicin 1 to 2 mg/L	Netilmicin 1 to 2 mg/L (1 hr)
Tobramycin 1 to 2 mg/L	Tobramycin 1 to 2 mg/L (1 hr)
Vancomycin 5 to 10 mg/L	Vancomycin 5 to 10 mg/L (1 hr)
5 - Fluorouracil N/A	5 - Fluorouracil 18 to 26 mg/L (2 hr)
C - reactive protein : normally less than 10 mg/L	60 to 80 mg/L

FOL - Result to follow

AMIK - amikacin	CHLO - chloramphenicol	5 FC - 5 fluocytosine	NAL - nalidixic acid	SPEC - spectinomycin
AMOX - amoxycillin	CIP - ciprofloxacin	FUS - fusidic acid	NEO - neomycin	SUL - sulphonomamide
ATER - amphotericin	CLIN - clindamycin	GEN - gentamicin	NET - netilmicin	SXT - cotrimoxazole
AUG - augmentin	CLOX - flucloxacillin	IMP - imipenem	NIT - nitrofurantoin	TEI - tetracycline
AZLO - azlocillin	CTAX - cefotaxime	MET - metronidazole	NYS - nystatin	TET - tetracycline
ATM - aztreonam	CZID - ceftazidime	MEZ - mezlocillin	PEN - benzylpenicillin	TOB - tobramycin
CARB - carbenicillin	CXM - cefuroxime	MOX - moxalactam	PIP - piperacillin	TRI - trimethoprim
CFAL - cephalixin	ERY - erythromycin	MUP - mupirocin	RIF - rifampicin	VAN - vancomycin

ANTIBIOTIC ABBREVIATIONS IN USE ON REPORT

USE BALL PEN FIRMLY		GYNAECOLOGICAL CYTOLOGY SERVICE		LAB. REPORT No. 9307135											
Clinician <i>b. b. h. h. h.</i>	Source <i>G.P.</i>	Surname <i>MARTIN</i>	Maiden Name												
Previous Smear - Date, Place & Result <i>14/1/91 C21 FPC JRI.</i>		Forename(s) <i>ANDREA</i>													
Date of Examination <i>21/4/93.</i>	Clinic Review: YES / NO	Address <i>17 HILLBANK PL</i>													
Interval:		Postcode <i>DUNOGE</i>													
Clinical Diagnosis <i>on Depo provera inj.</i>		G.P. and Address <i>DR FLAVAHAN</i>		G.P. Ref. No. <i>71148</i>											
Signature		Birth Date and C.H.I. No.		<table border="1"> <tr> <td>1</td><td>3</td><td>1</td><td>2</td><td>6</td><td>8</td><td>0</td><td>0</td><td>2</td><td>4</td> </tr> </table>		1	3	1	2	6	8	0	0	2	4
1	3	1	2	6	8	0	0	2	4						
No. of Pregnancies <i>1</i>	Cervix: Normal / Erosion / Suspicious / Malignant	Oral Contraception: YES / NO		Single ☒											
Pregnant: YES / NO	Previous Colposcopy / Hyster. / Cone / Ablation	I.U.C.D. Nil / Past / Current		Married ☐											
Post Natal Weeks	Smear / Cervix / Vagina / Other (Specify)	Radiation: YES / NO		Widowed ☐											
Age at Menopause	L.M.P. <i>0193</i>	Hormone Treatment: YES / NO		Divorced ☐											
Histological Report: <i>9100484 ① L</i>		☒ Negative ☐ Inf. / Inflam. ☐ Borderline Sq. Abn. ☐ Mild Sq. Dyskaryosis ☐ Moderate Sq. Dyskaryosis ☐ Severe Sq. Dyskaryosis (? CIN 3) ☐ CIN 3 / Invasive Sq. Carcinoma ☐ Glandular Atypia ☐ Adenocarcinoma ☐ No Report - Unsatisfactory Smear													
Comment on Smear: <i>negative smear</i> <i>Blood</i> <i>Polymorphs</i>		☐ Repeat YES / NO ☐ Months													
Cellularity: Good / Moderate / Poor		Endocervicals: YES / NO													
THB(MR)118 (Rev.2/90) Signature: <i>S Roberts</i>		Date: <i>27/4/93</i>													



CORRESPONDENCE SEEN	
W.M.G.	
F.McG.	
J.A. McK.	
	✓

THIRD PARTY COPY

8 - J.W.T. - 8

Further information and advice is available by contacting the laboratory at Minewells Hospital 60111, Extension 2555 or the duty microbiologist (Bleep 039).
Virology enquiries, Extension 2543 or 2525.

Post-dose	Pre-dose	C - reactive protein : normally less than 10 mg/L
Gentamicin	1 to 2 mg/L	N/A
Netilmicin	1 to 2 mg/L	5 to 10 mg/L
Tobramycin	1 to 2 mg/L	18 to 26 mg/L (2 hr)
Vancomycin	5 to 10 mg/L (1 hr)	60 to 80 mg/L
5 - Flucytosine	5 to 10 mg/L	

ADULT REFERENCE RANGES FOR ANTIBIOTIC ASSAYS AND CRP

FOL - Result to follow

AMIK - amikacin	CHLO - chloramphenicol	5 FC - 5 flucytosine	NAL - nalidixic acid	SPEC - spectinomycin
AMOX - amoxycillin	CIP - ciprofloxacin	FUS - fusidic acid	NEO - neomycin	SUL - sulphonomamide
ATER - amphotericin	CLIN - clindamycin	GEN - gentamicin	NET - netilmicin	SXT - cotrimoxazole
AUG - augmentin	CLOX - flucloxacillin	IMP - imipenem	NIT - nitrofurantoin	TEI - tetracycline
AZLO - azlocillin	CAX - cefotaxime	MET - metronidazole	NYS - nystatin	TEI - telicoplanin
ATM - aztreonam	CZID - ceftazidime	MEZ - mezlocillin	PEN - benzylpenicillin	TOB - tobramycin
CARB - carbenicillin	CXM - cefuroxime	MOX - moxalactam	PIP - piperacillin	TRI - trimethoprim
CFAL - cephalixin	ERY - erythromycin	MUP - mupirocin	RIF - rifampicin	VAN - vancomycin

ANTIBIOTIC ABBREVIATIONS IN USE ON REPORT

DEPT. OF MICROBIOLOGY, NEWELL'S HOSPITAL, DUNDEE			
MARTIN AUDRA 17 HILLBANK PLACE DUNDEE	131268 F	50 8TH TAY ST, DUNDEE FLAVAHAN	SOURCE OF REQUEST MISC G.P.
CUNICAL DATA		ISSUE 1	PAGE 2
21/04/93 H.V.S. 26747J No trichomonas A few candida sensitive to NYSTATIN A few [12] Gp. B. Strep ? Significance Many polymorphs 21/04/93 H.V.S. [12] 26747J PEN S ERY S AUG S CLOX - GEN R			
			26/04/93

Further information and advice is available by contacting the laboratory at Ninewells Hospital 60111, Extension 2559 or 2855 or the duty microbiologist (Bleep 039). Virology enquiries, Extension 2543 or 2525.

ADULT REFERENCE RANGES FOR ANTIBIOTIC ASSAYS AND CRP	
Pre-dose	Pre-dose
1 to 2 mg/L	1 to 2 mg/L
1 to 2 mg/L	1 to 2 mg/L
8 to 10 mg/L (1 hr)	8 to 10 mg/L (1 hr)
8 to 10 mg/L (1 hr)	8 to 10 mg/L (1 hr)
1 to 2 mg/L	1 to 2 mg/L
1 to 2 mg/L	1 to 2 mg/L
5 to 10 mg/L	5 to 10 mg/L
18 to 26 mg/L (2 hr)	18 to 26 mg/L (2 hr)
60 to 80 mg/L	60 to 80 mg/L
C - reactive protein : normally less than 10 mg/L	

POL - Result to follow

AMIK - amikacin	CHLO - chloramphenicol	5 FC - 5 flucytosine	NAL - nalidixic acid	SPEC - spectinomycin
AMOX - amoxycillin	CIP - ciprofloxacin	FUS - fusidic acid	NEO - neomycin	SUL - sulphonomamide
ATER - amphotericin	CLIN - clindamycin	GEN - gentamicin	NET - netilmicin	SXT - cotrimoxazole
AUG - augmentin	CLOX - flucloxacillin	IMP - imipenem	NIT - nitrofurantoin	TEI - tetracycline
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ANTIBIOTIC ABBREVIATIONS IN USE ON REPORT

DEPT. MICROBIOLOGY, NINNEWELLS HOSPITAL, DUNDEE															
MARTIN	131268	SOURCE OF REQUEST													
AUDRA	F	50 5TH TAY ST, DUNDEE	MISC												
17 HILLBANK PL		FLAVAHAN	G.P.												
DUNDEE															
CLINICAL DATA		ISSUE 1	PAGE 2												
04/08/92 Swab PERI Many [12] Gp. B. Strep 1430HRS 18843J NEAL Many candida sensitive to NYSTATIN 04/08/92 Swab [12] 1430HRS 18843J PEN S ERY S AUG S CLOX - GEN R															
		<table border="1"> <thead> <tr> <th colspan="2">CORRESPONDENCE SEEN</th> </tr> </thead> <tbody> <tr> <td>W.M.G.</td> <td></td> </tr> <tr> <td>F.McG.</td> <td>✓</td> </tr> <tr> <td>J.A.McK.</td> <td></td> </tr> <tr> <td>R.M.A.</td> <td></td> </tr> <tr> <td>C.F.</td> <td></td> </tr> </tbody> </table>		CORRESPONDENCE SEEN		W.M.G.		F.McG.	✓	J.A.McK.		R.M.A.		C.F.	
CORRESPONDENCE SEEN															
W.M.G.															
F.McG.	✓														
J.A.McK.															
R.M.A.															
C.F.															
		07/08/92													

KMT-8

Further information and advice is available by contacting the laboratory at Minewells Hospital 60111, Extension 2559 or 2855 or the duty microbiologist (Bleep 039).
Virology enquiries, Extension 2543 or 2525.

Post-dose	Pre-dose	C - reactive protein : normally less than 10 mg/L
Gentamicin	1 to 2 mg/L	5 - Fluocytosine
Netilmicin	1 to 2 mg/L	Vancomycin
Tobramycin	1 to 2 mg/L	5 to 10 mg/L
8 to 10 mg/L (1 hr)		N/A
8 to 10 mg/L (1 hr)		60 to 80 mg/L
8 to 10 mg/L (1 hr)		18 to 26 mg/L (2 hr)

ADULT REFERENCE RANGES FOR ANTIBIOTIC ASSAYS AND CRP

FOL - Result to follow

AMIK - amikacin	CHLO - chloramphenicol	5 FC - 5 fluocytosine	NAL - nalidixic acid	SPEC - spectinomycin
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ANTIBIOTIC ABBREVIATIONS IN USE ON REPORT

CONFIDENTIAL REPORT															
DEPT. MICROBIOLOGY, NINEWELLS HOSPITAL, DUNDEE															
MARTIN AUDRA 17 HILLBANK PL DUNDEE	131268 F	50 STH TAY ST, DUNDEE FLAVAHAN	SOURCE OF REQUEST MISC G.P.												
CLINICAL DATA		ISSUE 1	PAGE 1												
04/08/92 Dip S1 1420HRS 18899H															
No significant bacteriuria															
<table border="1"><thead><tr><th colspan="2">CORRESPONDENCE SEEN</th></tr></thead><tbody><tr><td>W.M.G.</td><td></td></tr><tr><td>F.MoG.</td><td></td></tr><tr><td>J.A.McK.</td><td></td></tr><tr><td>R.M.A.</td><td></td></tr><tr><td>C.F.</td><td>2</td></tr></tbody></table>				CORRESPONDENCE SEEN		W.M.G.		F.MoG.		J.A.McK.		R.M.A.		C.F.	2
CORRESPONDENCE SEEN															
W.M.G.															
F.MoG.															
J.A.McK.															
R.M.A.															
C.F.	2														
			06/08/92												

KMT-8

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Virology enquiries, Extension 2543 or 2525.

ADULT REFERENCE RANGES FOR ANTIMIOTIC ASSAYS AND CRP	
Pre-dose	Pre-dose
8 to 10 mg/L (1 hr)	1 to 2 mg/L
8 to 10 mg/L (1 hr)	1 to 2 mg/L
8 to 10 mg/L (1 hr)	1 to 2 mg/L
5 to 10 mg/L (1 hr)	1 to 2 mg/L
18 to 26 mg/L (2 hr)	5 to 10 mg/L
60 to 80 mg/L	N/A
C - reactive protein : normally less than 10 mg/L	
5 - Flucytosine	
Vancomycin	
Tobramycin	
Netilmicin	
Gentamicin	
FOL - Result to follow	
ANTIBIOTIC ABBREVIATIONS IN USE ON REPORT	
AMIK - amikacin	CHLO - chloramphenicol
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ATM - aztreonam	CZID - ceftazidime
CARB - carbenicillin	CXM - cefturoxime
CFAL - cephalixin	ERY - erythromycin
5 FC - 5 flucytosine	FUS - fusidic acid
GEN - gentamicin	IMP - imipenem
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NEO - neomycin	NET - netilmicin
SUL - sulphonomamide	SXT - cotrimoxazole
SPEC - spectinomycin	TEI - tetracycline
TOB - tobramycin	TRI - trimethoprim
VAN - vancomycin	

RELEVANT SYMPTOMS (if any)				Source of smear If not G.P.			
Contraception <u>Oral</u> <u>Current</u> / Past <u>Duration</u> <u>2 1/2 yrs</u> Pregnant Post-Natal				Surname and first christian name (Block Letters) <u>AUDREY MARTIN</u>			
CLINICAL <u>Normal</u> Purulent Discharge Other				Address <u>2 OGILVIE RD</u>			
OPINION <u>Eroded</u> Trichomonas Vaginitis Senile Other				Full Date of Birth required in all cases Day <u>13</u> Month <u>12</u> Year <u>68</u> MPI No. (4 digits only) <u>010124</u>			
OF ? Malignant				Name and Full Address of G.P. <u>DR FLAVAHAN</u> <u>1 SOUTH TAY ST</u> <u>DUNDEE</u>			
CERVIX Polyp Abnormal Bleeding							
SMEAR TYPE <u>Cervical</u> <u>Vaginal</u> <u>Other</u>		SMEAR TAKEN BY <u>DR FLAVAHAN</u>		If smear findings normal do you wish patient to be notified? YES NO			
RESULT Class		Quality of Smear		Endocervical Cells		Previous Smear YES NO Class Year Place and last Lab. No.	
Unsatisfactory please repeat 0		<u>Good</u> Moderate Poor		<u>Present</u> Absent		<u>NO</u> 1 1987 5793	
Normal findings 1		COMMENT		Date of L.M.P./year of menopause		< 10.6.87 >	
Suspicious Suggest Repeat Atypical 2		<u>Purulent inflammatory</u> <u>Smear.</u>		S M 1 2 2+ W		Age at First Marriage	
Positive Suggest Biopsy Highly Suspicious Conclusive 4				DIV or SEP		Number of Pregnancies	
				Age of youngest child			
Repeat		Signed <u>R. Hamilton</u> Date <u>2.7.87</u>		Maiden Name		Date <u>24.6.87</u>	
Letter to Doctor				PLEASE WRITE FIRMLY WITH A BALL PEN			
Department of Pathology, Royal Infirmary, Dundee. WELL WOMEN CYTOLOGY REPORT				Lab. No. <u>G/12543/87</u>			

RELEVANT SYMPTOMS (if any)		Heavy periods 2 per month + offensive discharge		if not G.P.	
Contraception		Oral IUD	Current / Past	Pregnant	Post-Natal
CLINICAL		Normal	Purulent Discharge	Other	
OPINION		Eroded	Trichomonas		
OF		Unhealthy	Vaginitis	Senile	
		? Malignant		Other	
CERVIX		Polyp	Abnormal Bleeding		
SMEAR TYPE		Cervical	SMEAR TAKEN BY	If smear findings normal do you wish patient to be notified?	
		Vaginal	DR FLAVAHAN	YES NO	
		Other			
RESULT		Class	Quality of Smear	Endocervical Cells	
Unsatisfactory please repeat		0	Good Moderate Poor	Present Absent	
Normal findings		1	COMMENT		
Suspicious		2	Inflammation		
Suggest Repeat		3	30ue smear.		
Positive		4			
Suggest Biopsy		5			
Requ. Repeat			Signed <i>[Signature]</i> Date 1/4/82		
Letter to Doctor		Department of Pathology, Royal Infirmary, Dundee.			
		WELL WOMEN CYTOLOGY REPORT			
Surname and first christian name (Block Letters)		AUDREY MARTIN			
Address		2 OGILVIE RD			
Full Date of Birth required in all cases		Day	Month	Year	MPI No. (4 digits only)
		13	12	68	0101211
Name and Full Address of G.P.		DR FLAVAHAN 1 SOUTH TAY ST DUNDEE 85/1765/11			
Previous Smear		YES NO	Class	Year	Place and last Lab. No.
		NO	1	1985	G/10179/87
Date of L.M.P./year of menopause		1			
(S) M 1 2 2+ W		Age at First Marriage			
DIV or SEP		Number of Pregnancies			
		Age of youngest child			
Maiden Name		Date			
		19/3/82			
PLEASE WRITE FIRMLY WITH A BALL PEN		Lab. No.			
		5793/87			

RELEVANT SYMPTOMS (if any) <i>2.45pm C/o pain & itch vag. in spite of tabs & pessaries (past 2 1/2) Discharge. 02. Slight tenderness over bladder. Normal.</i>				Source of smear If not G.P. <i>DR. W.</i>											
Contraception Oral ☒ Current ☐ Past Duration <i>1 yrs.</i> Pregnant ☐ Post-Natal				Surname and first christian name (Block Letters) <i>MARTIN</i> Address <i>21st Hepburn St - Dundee</i>											
CLINICAL ☒ Normal ☐ Erosion ☐ Unhealthy ☐ ? Malignant				Full Date of Birth required in all cases <table border="1"> <tr> <td>Day</td> <td>Month</td> <td>Year</td> <td>MPI No. (4 digits only)</td> </tr> <tr> <td><i>13</i></td> <td><i>12</i></td> <td><i>68</i></td> <td><i>0101214</i></td> </tr> </table>				Day	Month	Year	MPI No. (4 digits only)	<i>13</i>	<i>12</i>	<i>68</i>	<i>0101214</i>
Day	Month	Year	MPI No. (4 digits only)												
<i>13</i>	<i>12</i>	<i>68</i>	<i>0101214</i>												
OPINION OF ☐ Trichomonas ☐ Senile ☐ Other				Name and Full Postal Address of G.P. <i>Dr. Gardiner 7018 1.5 Tay St Dundee</i>											
CERVIX ☒ Polyp ☐ Abnormal Bleeding				Previous Smear ☒ YES ☐ NO Class <i>1</i> Year <i>1985</i> Place and last Lab. No. <i>10179 G.P.</i>											
SMEAR TYPE ☒ Cervical ☐ Vaginal ☐ Other				Date of L.M.P./year-of-menopause <i>23.7.85</i>											
RESULT Unsatisfactory please repeat ☐ Normal findings ☒ Suspicious Suggest Repeat ☐ Positive Suggest Biopsy ☐				Age at First Marriage <i>—</i> Number of Pregnancies <i>—</i> Age of youngest child <i>—</i>											
Class <i>1</i> Quality of Smear <i>Good</i> Endocervical Cells <i>Present</i>				DIV or SEP <i>W</i>											
COMMENT <i>Bloodstained poorly estrogenised smears with cytotoxic</i>				Maiden Name <i>MARTIN</i> Date <i>15.8.85</i>											
Signed <i>G.M. Gossans</i> Date <i>16.8.85</i>				Lab. No. <i>9/17651/85</i>											
Department of Pathology, Royal Infirmary, Dundee.				PLEASE WRITE FIRMLY WITH A BALL PEN											

RELEVANT SYMPTOMS (if any) <i>Vaginal discharge + dysuria</i>				Source of smear if not G.P.			
Contraception Oral ☒ Current / Past ☐ Duration Pregnant Post-Natal				Surname and first christian name (Block Letters) <i>AUDRA MARTIN</i>			
CLINICAL Normal ☒ Purulent Discharge ☐ Other ☐				Address <i>281, STRATHMORE AVENUE DUNDEE</i>			
OPINION Eroded ☒ Trichomonas ☐ Senile ☐ Other ☐				Full Date of Birth required in all cases <i>13</i> / <i>12</i> / <i>68</i> MPI No. (4 digits only) <i>1 1 1 1</i>			
OF Unhealthy ☐ ? Malignant ☐				Name and Full Address of G.P. <i>DR. C. FLAVAHAN</i> <i>1. SOUTH TAY ST</i> <i>DUNDEE</i>			
CERVIX Polyp ☐ Abnormal Bleeding ☐				Previous Smear YES ☒ Class Year Place and last Lab. No.			
SMEAR TYPE Cervical ☒ Vaginal ☐ Other ☐		SMEAR TAKEN BY <i>B. J. J. J.</i>		If smear findings normal do you wish patient to be notified? YES ☐ NO ☒		Date of L.M.P./year of menopause <i>30.4.85</i>	
RESULT Unsatisfactory please repeat ☐ Class		Quality of Smear Good ☒ Moderate ☐ Poor ☐ Endocervical Cells ☒ Present ☐ Absent		COMMENT <i>Blood stained, pinkish, inflammatory smear.</i>		Age at First Marriage M 1 2 2+ ☐	
Normal findings Suggest Repeat ☐ Atypical ☐ Abnormal ☐		Request Repeat ☐		Number of Pregnancies DIV or SEP		Age of youngest child Date <i>9.5.85</i>	
Letter to Doctor Department of Pathology, Royal Infirmary, Dundee.		WELL WOMEN CYTOLOGY REPORT		PLEASE WRITE FIRMLY WITH A BALL PEN		Lab. No. <i>9/10179/85</i>	

CONFIDENTIAL REPORT			
DEPT. MICROBIOLOGY, NINEWELLS HOSPITAL, DUNDEE			
MARTIN AUDRA 2 OGILVIE ROAD DUNDEE	F 131268	1 STH.TAY ST, DUNDEE ANDERSON	SOURCE OF REQUEST MISC G.P.
CLINICAL DATA		ISSUE 1	PAGE 1
08/03/89 Vsd/S 1045HRS 10963R A few polymorphs No candida isolated No trichomonas No growth of pathogenic bacteria 10/03/89			

DEPT. CLINICAL MICROBIOLOGY, ST. MICHAEL'S HOSPITAL, DUNDEE

131598

4197

Further information and advice is available by contacting the laboratory at Ninewells
Hospital 60111, Extension 2559 or 2855 or the duty microbiologist (Bleep 039).
Virology enquiries, Extension 2543 or 2525. 0118 254 2111. 21. 11. 2016

Pre-dose
Gentamicin 10 to 10 mg/L
Netilmicin 10 to 10 mg/L
Tobramycin 10 to 10 mg/L
Vancomycin 10 to 10 mg/L
5-Fluorocytosine N/A
C-reactive protein: normally less than 10 mg/L
Post-dose
Gentamicin 10 to 10 mg/L
Netilmicin 10 to 10 mg/L
Tobramycin 10 to 10 mg/L
Vancomycin 10 to 10 mg/L
5-Fluorocytosine N/A
C-reactive protein: normally less than 10 mg/L

ADULT REFERENCE RANGES FOR ANTIBIOTIC ASSAYS AND CRP

FOL - Result to follow

AMIK - amikacin	CFOX - cefoxitin	5 FC - 5 fluorocytosine	NIT - nitrofurantoin	TIC - ticarcillin
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AZLO - azlocillin	COL - colistin	MOX - moxalactam	SPEC - spectinomycin	VAN - vancomycin
ATM - aztreonam	CTX - cefotaxime	MUP - mupirocin	SUL - sulphamonomide	
CARB - carbapenem	CZID - ceftazidime	NAL - nalidixic acid	SXT - cotrimoxazole	
CEP - cephaloridine	CXM - cefuroxime	NEO - neomycin	TEI - tetracycline	
CFAL - cephalaxin	ERY - erythromycin	NET - netilmicin		

ANTIBIOTIC ABBREVIATIONS IN USE ON REPORT

CONFIDENTIAL REPORT			
DEPT. MICROBIOLOGY, NINEWELLS HOSPITAL, DUNDEE			
MARTIN AUDREY	13126B F 13/12/68	1 STH. TAY ST, DUNDEE FLAVAHAN	SOURCE OF REQUEST MISC G.P.
CLINICAL DATA		ISSUE 1	PAGE 1
19/03/87 H.V.S. 02728F Many polymorphs No trichomonas No candida isolated No growth of pathogenic bacteria			
			20/03/87

KWT.-8

Fluconazole - 150 mg
is available by contacting the laboratory.
(Sleep 039).

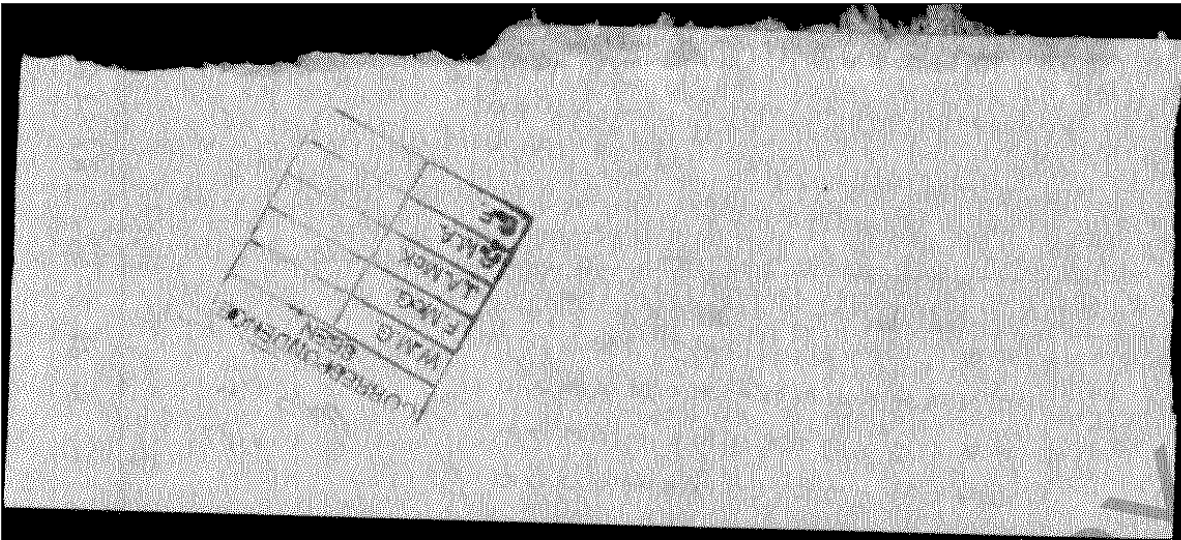
5 - Fluorocytosine	0 to 2 mg/L	0 to 2 mg/L	5 to 10 mg/L
Gentamicin	0 to 2 mg/L	0 to 2 mg/L	5 to 10 mg/L
Netilmicin	0 to 2 mg/L	0 to 2 mg/L	5 to 10 mg/L
Tobramycin	0 to 2 mg/L	0 to 2 mg/L	5 to 10 mg/L
Vancomycin	0 to 5 mg/L	20 to 40 mg/L	60 to 80 mg/L

ADULT REFERENCE RANGES FOR ANTIBIOTIC ASSAYS

AMIK - amikacin	CFAL - cephalixin	CXM - cefturoxime	NEO - neomycin	SXT - cotrimoxazole
AMOX - amoxicillin	CFOX - cefoxitin	ERY - erythromycin	NET - netilmicin	TEI - ticlophanin
AMP - ampicillin	CHLO - chloramphenicol	5 FC - 5 fluorocytosine	NIT - nitrofurantoin	TET - tetracycline
ATER - amphotericin	CIP - 5 - ciprofloxacin	FUS - fusidic acid	NYS - nystatin	TIC - ticarcillin
AUG - augmentin	CLIN - clindamycin	GEN - gentamicin	PEN - benzylpenicillin	TIN - tinidazole
AZLO - azlocillin	CLOX - cloxacillin	MET - metronidazole	PIP - piperacillin	TOB - tobramycin
AZI - aztreonam	COL - colistin	MEZ - mezlocillin	RIF - rifampicin	TRI - trimethoprim
CARB - carbenicillin	CTAX - ceftaxime	MOX - moxalactam	SPEC - spectinomycin	VAN - vancomycin
CEP - cephaloridine	CZID - ceftazidime	NAL - naldixic acid	SUL - sulphonamide	

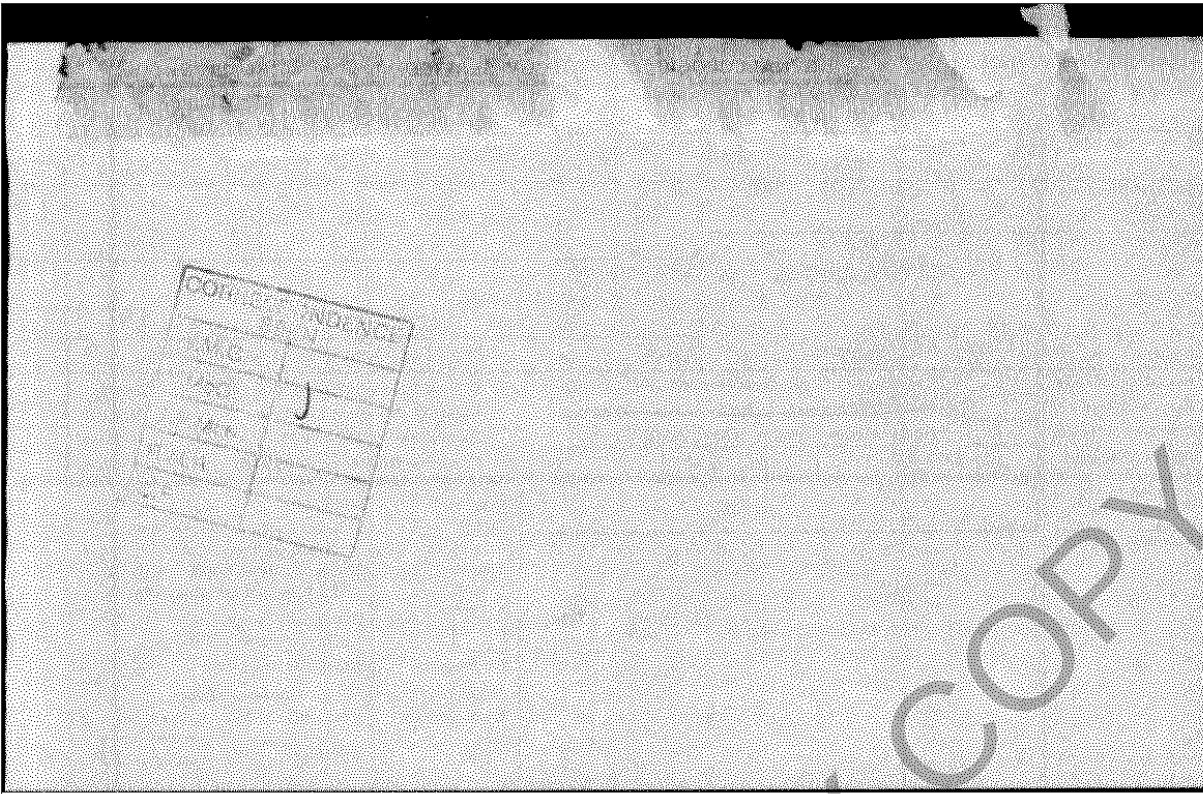
ANTIBIOTIC ABBREVIATIONS IN USE ON REPORT





THIRD PARTY COPY

USE BALL PEN FIRMLY		TAYSIDE HEALTH BOARD GYNAECOLOGICAL CYTOLOGY SERVICE		LAB. REPORT No. 100018	
Clinician <i>Dr. D. M. M. M.</i>	Source <i>From 100018</i>	Surname <i>M. M. M.</i>	Maiden Name		
Previous Smear - Date, Place & Result <i>10/1/01 100018 57/12/01</i>		Forename(s) <i>A. M. M.</i>			
Date of Examination <i>10/1/01</i>	Clinic Review: YES / NO Interval:	Address <i>10 M. M. M. PL. C/A.</i>			
Clinical Diagnosis <i>On 1st Deposition</i>		Postcode <i>30 000 00</i>			
Signature <i>[Signature]</i>		G.P. and Address <i>10 M. M. M. ST.</i>			
Birth Date and C.H.I. No.		G.P. Ref. No.			
No. of Pregnancies <i>1</i>	Cervix: Normal / Erosion / Suspicious / Malignant	Oral Contraception: YES / NO		Single	
Pregnant: YES / NO	Previous Colposcopy / Hyster. / Cone / Ablation	I.U.C.D.: Nil / Past / Current		Married	
Post Natal Weeks <i>1</i>	Smear: Cervix / Vagina / Other (Specify)	Radiation: YES / NO		Widowed	
Age at Menopause <i>1</i>	L.M.P. <i>10/1/01</i>	Hormone Treatment: YES / NO		Divorced	
Histological Report: <i>L</i>		Class 1 Negative			
Comment on Smear: <i>negative smear + fresh 2 cells</i>		Class 2 Mild Sq. Dysk. / Inf. / Inflam.			
		Class 3 Moderate Sq. Dyskaryosis			
		Class 4 Severe Sq. Dyskaryosis (? CIN 3)			
		Class 5 CIN 3 / Invasive Sq. Carcinoma			
		☐ Glandular Atypia			
		☐ Adenocarcinoma			
		☐ Unsatisfactory Smear			
		Cellularity Good / Moderate / Poor			
		Endocervicals YES / NO			
THB(MR)118 (Rev. 2/89) Signature: <i>[Signature]</i> Date: <i>10/1/01</i>		Repeat YES / NO		☐ Months	



FALL EN FIRM		NAEC LOGIC		LAB REPORT NO. 16029	
Clinician: AFG		Signature: [Signature]		Name: MARTIN	
Previous Smear - Date, Place & Result NIK GP NEG 7.1997		Forename(s): AUBRA			
Date of Examination: 1.9.99		Clinic Review: YES / NO		Address: 17 HILLBANK PLACE DUNDEE	
Interval:		Postcode: [Blank]			
Clinical Diagnosis: GENITAL WARTS		G.P. and Address: DR ANDERSON, TAYCOET SURGERY, DUNDEE			
Signature: [Signature]		Birth Date and C.H.I. No.		G.P. Ref. No.	
No. of Pregnancies: 2		Cervix: Normal / Erosion / Suspicious / Malignant		Oral Contraception: YES / NO	
Pregnant: YES (NO)		Previous Colposcopy / Hyster. / Cone / Ablation		I.U.C.D. Nil / Past / Current	
Post Natal Weeks: [Blank]		Smear: Cervix / Vagina / Other (Specify)		Radiation: YES / NO	
Age at Menopause: [Blank]		L.M.P. 08.9.99		Hormone Treatment: YES / NO	
Histological Report: 16862/97 OL		Single: [X] Married: [] Widowed: [] Divorced: []			
Comment on Smear: Negative		☒ Negative ☐ Inf. / Inflam. ☐ Borderline Sq. Abn. ☐ Mild Sq. Dyskaryosis ☐ Moderate Sq. Dyskaryosis ☐ Severe Sq. Dyskaryosis (? CIN 3) ☐ CIN 3 / Invasive Sq. Carcinoma ☐ Glandular Atypia ☐ Adenocarcinoma ☐ No Report - Unsatisfactory Smear			
Cellularity: Good / Moderate / Poor		Endocervicals: YES / NO		Repeat: YES / NO	
THB(MR)118 (Rev.2/90) Signature: [Signature]		Date: 07.09.99		[36] Months	

RECEIVED
13 SEP 1998

THIRD PARTY COPY

HISTOPATHOLOGY TAYSIDE HOSPITALS Ninewells Hospital, Dundee 0382 60111 Ext 2548 Perth Royal Infirmary 0738 23311 Ext 3305		Ward/Clinic/ Hosp.... Surname <u>MARTIN</u> 13/12/68 Unit No. First Name <u>AUDRA</u> Address <u>17 HILSBANK PL</u> Occupation... G.P. & Address (G.P. Requests Only)		...Cons. ...D. of B. ...M. State ...Sex ...MPI No. (last 4 digits) USE BLOCK LETTERS OR HAND IMPRINTER	
Specimens will only be accepted when the Request Form is fully completed and the containers adequately labelled.					
Nature of Specimen(s): (Distinguish clearly when several parts taken) <i>Urine</i>			Date / Time Specimen Taken: <u>9/6/64 AM</u>		
(If helpful, please include diagram) Clinical History, Operation Findings and Presumptive Diagnosis: <i>2 Bages</i>			Previous Pathology Report Number: Risk of Infection: YES/NO If Yes, please state nature of infection:		
Examination Requested / Special Requests: <i>Spawmery Please</i>			Other Relevant Details: L.M.P. - <u>7.6/52 ago.</u> Radiotherapy - Drug Therapy - Request Categories ☒ = YES In-Patient Out-Patient Day Care General Practice ☒ Private Patient Category II Work Other (Specify)		
Description: PREGNANCY TEST NEGATIVE M.G.			PRINTED NAME of Med./Surg. Officer: <u>McKENZIE</u> BLEEP No: Signature of Medical/Surgical Officer: <i>PPA McKenzie</i>		
Pathology Team (initials):			Additional Information / Requests:		
No. of pieces taken:			No. of blocks:		
Date / Time Received and Lab. Access No.: PT 1440 /94					

THR/MP1308

HISTOPATHOLOGY TAYSIDE HOSPITALS Ninewells Hospital, Dundee 01382 660111 Ext 2548 Perth Royal Infirmary 01738 623311 Ext 3305		Ward/Clinic/ Hosp. Cons. D D M M Y Y 13 12 6 8 0 0 2 4 C.H.I. No.	
		Surname <u>MARTIN</u> First Name <u>AUSCA</u> Address M. State Sex G.P. & Address (G.P. Requests only) <u>DR. ANDERSON 50 ST TAY ST</u>	
Specimens will only be accepted when the Request Form is fully completed and the containers adequately labelled.			
Nature of Specimen(s): (Distinguish clearly when several parts taken) <u>Urine</u>		Date / Time Specimen Taken: <u>18.8.97</u>	
(If helpful, please include diagram) Clinical History, Operation Findings and Presumptive Diagnosis: <u>? PREGNANT</u>		Previous Pathology Report Number:	
		Risk of Infection: YES / NO If Yes, please state nature of infection:	
Examination Requested / Special Requests: <u>GRAV INDEX</u>		Other Relevant Details: L.M.P. - Radiotherapy - Drug Therapy -	
		Request Categories ☒ = YES In-Patient Out-Patient Day Care General Practice Private Patient Category II Work Other (Specify)	
Description: <u>N.P.T. May Med.</u> PREGNANCY TEST NEGATIVE <u>FM.</u>		PRINTED NAME of Med./Surg. Officer:	
		BLEEP No: Signature of Medical/Surgical Officer: <u>PP Anderson</u>	
FOR LABORATORY USE ONLY			
Pathology Team (initials):		Additional Information / Requests:	
		No. of pieces taken: No. of blocks:	
Date / Time Recd. Lab. Access No. <u>18/8</u>		PREGNANCY TEST 1847 1997	

DOCUMENT STAMPED
TO ENSURE DETECTION
BY SCANNER.

	FILE	ENTER ON COMPUTER
F McG		
RMA		
CF		
AJM		
SG		
NURSE		

Scanned Document
08-July-2026 ACOYLE
Additional:Scanned Document

Filename: 93.pdf
Extension:.tif
Pages:

Please complete this form and hand it to the doctor

NAME AUDRA MARTIN D.O.B. 13.12.68

Do you smoke? YES

How many cigarettes a day? 20

Are you an ex-smoker?

Are you a non-smoker?

Do you have a history of:

- 1) heart disease NO
2) stroke

What is your height? 5 foot 2 in

What is your weight? 9 stone 8

How many units of alcohol do you have in a week?

- 1) beer/lager (1 pint = 2 units)
2) spirits (1 measure = 1 unit)
3) wine (1 glass = 1 unit)

Is there a family history of:

- 1) heart disease NOT SURE
2) stroke

Thank you for completing this form.

Tayside Regional Council - Social Work Department

CONSENT TO MEDICAL INFORMATION,

I understand that information about my medical history and present medical condition is required by the above named agency. I consent to a medical examination and to any further enquiries deemed to be necessary

Signed *A. Martin*
Address *17 Hillbank Ph. Dundee*
.....
Date *10/8/93*

TAYSIDE HEALTH BOARD—DUNDEE DISTRICT

Telephone - 0382 23125

Your Ref

BR/JPA 13 12 68 0024

Our Ref.

Enquiries to:—

ROYAL INFIRMARY
DUNDEE
DD1 9ND

9th March, 1984

Dr. W. Gardiner,
1 South Tay Street,
Dundee.

Dear Dr. Gardiner,

Audra Martin, Carolina House, Broughty Ferry Road, Dundee

Your patient had apparently been hit about the face and head by a hand 8 times on Monday. Since then she had been complaining of dizziness, constant headache and had apparently fainted twice. On examination we could find no neurological deficit. Skull x-rays and left orbital x-rays showed no fracture. A period of neurological observation was uneventful and she was allowed home the following morning with instructions to rest quietly over the weekend and to get back to normal activities on Monday. There will be no follow up.

Yours sincerely,


B. ROY

Accident and Emergency S.H.O.

TAYSIDE HEALTH BOARD—DUNDEE DISTRICT

DEPARTMENT OF ORTHOPAEDICS

Telephone - 0382 23125

Your Ref

Our Ref. RDM/EAB/ 13 12 68/0024

Enquiries to: Fracture Clinic

ROYAL INFIRMARY

DUNDEE

DD1 9ND

10th October 1983
(dict. 5/10/83)Dr. W. Gardiner,
1 South Tay Street,
DUNDEE.

Dear Dr. Gardiner,

Audra Martin, 133 Broughty Ferry Road, Dundee.

This patient attended Accident and Emergency on 30/8/83. She had fallen and injured her right forearm. There was slight swelling and tenderness over the radius but x-rays showed no definite fracture. A plaster backslab was applied. Her plaster was removed on 21/9/83. She failed to keep her appointment at the Fracture Clinic today.

No further appointment has been sent.

Yours sincerely,

R.D. MUCKART.
Consultant Orthopaedic Surgeon.

NINEWELLS HOSPITAL

Ward

97

25/7/75

Dear Dr. *Gardner*

Your Patient

Andra Martin

of

145 Carbery Cres

was discharged from Hospital on

25.7.75

Diagnosis

*Adenocarcinoma of hypopharynx
tumour*

The undernoted treatment is recommended and a further clinical report will follow.

*Adenorectomy &
Cautery of wif tumours
done on 23.7.75*

Yours sincerely,

pro

McLobb

Consultant

House Officer

TAYSIDE HEALTH BOARD—DUNDEE DISTRICT
Department of Ear, Nose and Throat

Telephone - 0382 60111

Your Ref.

Our Ref. WC/JJR/307153.

Enquiries to:—

Dr. R.M. Andersen,
1 South Tay Street,
DUNDEE.

NINEWELLS HOSPITAL
NINEWELLS
DUNDEE
DD2 1UB
13th May, 1975.

Dear Dr. Andersen,

Audra MARTIN (13.12.68), 145 Garberry Crescent, Dundee.

I saw your little patient Audra Martin at the hospital today. I note she had her tonsils and adenoids removed at D.R.I. in July, 1974, and that she still has nasal speech and snores at night.

On examination the tonsils are out and the beds well healed. Anterior rhinoscopy showed the airways were clear. On posterior rhinoscopy there was recurrent hypertrophy of the adenoids.

Mr./

- 2 -

Mr. Gibb confirmed this and x-ray also showed enlarged adenoids. I have therefore put her name on the waiting list to come in for removal of the adenoids and possible cauterization of the inferior turbinates.

Yours sincerely,

William Cunningham.

W. CUNNINGHAM.

THIRD PARTY COPY

DUNDEE ROYAL INFIRMARY

Ward.....10

.....17/7/1924

Dear Dr.

Your Patient*James Martin*.....of*145 Pentney Cr.*.....was discharged from Hospital on*16/7/24*.....

Diagnosis

The undernoted treatment is recommended and a further clinical report will follow.

*2^o haemorrhage from tonsillitis**to finish course of Penicillin**no O.P.*

Yours sincerely,

pro..... Consultant

John F. G...... House Officer

TAYSIDE HEALTH BOARD—DUNDEE DISTRICT

Department of Ear, Nose and Throat

Telephone - 0382 23125

Your Ref.

Our Ref. WC/ND/307153

Enquiries to:—

Dr W. Gardiner,
1 South Tay Street,
Dundee.

ROYAL INFIRMARY

DUNDEE

DD1 9ND

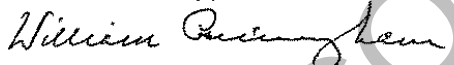
23rd May, 1974

Dear Dr Gardiner,

re: Audrie Martin (5)
145 Carberry Cres., Dundee

Your patient was seen at the clinic and it was felt that she would benefit from removal of her tonsils and adenoids. Her name is therefore being placed on the waiting list.

Yours sincerely,



W. CUNNINGHAM

Contact sheet for Registered Patient @ D.D.O.C

Call Number: 70995 Date: 25/01/2004 Time: 15:38 Passed: 15:39 Received by: jmackay

Patient Details (1312680024)

Name: AUDRA MARTIN
 Address: 17 HILLBANK PL
 Town: DUNDEE
 Postcode: DD3 7BE
 Sex: F
 DOB: 13/12/1968
 Contact: self
 Contact Phone Number: 07977311130

Call Location

Address: 17 HILLBANK PL
 DUNDEE
 DD3 7BE

Registered GP Details

Dr Name: BADENHORST, MARGARETHA
 Practice: TAY COURT SURGERY
 Script No: T70572

Complaint: ? urine infection

Started: 17:00

Status: Visit: ☐ Tel: ☐ Attend: ☒ Canc: ☐ DNA: ☐

History / Examination:

Since Thurs .a.m painful micturition - had ?
 haematuria also. ↑ fluids - appeared then
 to resolve but now painful micturition +
 ? haematuria + pain @ side lower back Am

Ⓟ Low Pain. Pres had 1 specimen but
 not for Pres Syts. no abd pain. No renal
 Son clearly blood + +
 protein

Dysuria

Frustrated
 at home

TO correct Sp for result - will hand in filter
 as to check off 4.

Diagnosis

UTI

Drugs

Name	Form	Strength	No	Category
Trimethoprim 200mg 2 A				
Trimethoprim 200mg 6 Ⓟ				

Outcome

Death: ☐ GP to Certify ☐Refer To: Dept: When: Review by GP: ☐Where:

Call Handled As:

TR: ☐ TR2: ☐ ET: ☐ INT: ☐Patient to contact GP ☐

Signature

Print

Date

Time

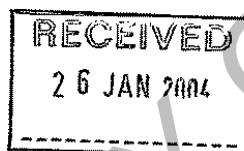
Duty Doctor:

[Signature] *[Signature]*

Call complete: 25/1/04 17:15

25/01/2004

TayCare



FILE	MB
REPEAT DATE	
SCRIPT DONE	
APPOINTMENT	
NOTES	
NURSE	

Tayside University Hospitals

Cytology Department
Level 6
Ninewells Hospital
DUNDEE
DD1 9SY



Tel No 01382 633948/9

Our ref: SN/JSR/Recall Default

Enquiries to Dr Sheila Nicoll

Direct Line 01382 633943

06 June 2003

7057 (L) D 0202

1312680024

AUDRA MARTIN
17 HILLBANK PL
DUNDEE.

DD37DE

010999

Dear Madam

Tayside Cervical Screening Service

According to our local records, your cervical smear is now overdue.

Whilst you may have already been contacted by your General Practitioner to advise you of this, we, as your local laboratory, also wish to remind you of the benefits of regular cervical screening.

The national cervical screening programme covers all women between the ages of 20 and 60. Your non-participation may be through personal choice or because of your current circumstances. However, we will automatically continue to contact you every three years until your 61st birthday unless your General Practitioner informs us otherwise.

We would urge you to contact your General Practitioner to discuss whether you want to have a cervical smear taken, or alternatively, advice can be obtained through your local Well Women Clinic.

If you have had a smear taken within the last few days please ignore this letter.

Always keep your General Practitioner informed of any change of address.

Yours faithfully

Dr Sheila Nicoll
Consultant Cytopathologist

cc Your GP

Contact sheet for Registered Patient @ D.D.O.C

Print this page

Call Number:	203	Date:	13/07/2001	Time:	21:20	Passed:	21.21	Received by:	robertson															
Patient Details (1312680024)						Call Location																		
Name:	AUDRA MARTIN					Address:																		
Address:	17 HILLBANK PL					17 HILLBANK PL																		
Town:	DUNDEE					DUNDEE																		
Postcode:	DD3 7BE					Registered GP Details																		
Sex:	F					Dr Name:																		
DOB:	13/12/1968					BADENHORST, MARGARTEHA																		
Contact:	self					Practice:																		
Contact Phone Number:	07780531147					TAY COURT SURGERY																		
						Script No:																		
						T7057																		
Complaint:		Swollen Eye - ? Stye																						
Started:		21:40		Status:		Visit: ☐		Tel: ☐																
						Attend: ☒		Canc: ☐																
								DNA: ☐																
History / Examination:																								
Pus coming from lump inside eye ? stye, but all of eye swollen de large stye - lanced																								
Diagnosis					Drugs																			
large lower lid stye					<table border="1"> <thead> <tr> <th>Name</th> <th>Form</th> <th>Strength</th> <th>No</th> <th>Category</th> </tr> </thead> <tbody> <tr> <td>chloramphenicol</td> <td>eye</td> <td></td> <td></td> <td></td> </tr> <tr> <td>ant</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					Name	Form	Strength	No	Category	chloramphenicol	eye				ant				
Name	Form	Strength	No	Category																				
chloramphenicol	eye																							
ant																								
Outcome																								
Death ☐ GP to Certify ☐ Refer To: Dept: When: Where: Review by GP: ☐ Patient to contact GP ☐					Call Handled As: TR: ☐ ET: ☐ INT: ☐																			
Signature		Print		Date		Time																		
Duty Doctor:		Lockwood		Call complete:		13.7.01		21.50																

http://www.tayside.scot.../CHI_dsp_contact_sheet.cfm?CA_ID=203&CHINO=131268002 13/07/01

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BY SCANNER

JM	
10/10/94	

NEW REGISTRATION HEALTH CHECK

NAME Audra Martin DOB/CHI 13/2/68
ADDRESS 17 MILLBANK PLACE PHONE Mobile: 07780531147
G.P. Dr. BERENHOES DATE 13/9/20

HEIGHT 1.62m ✓ WEIGHT 62kgs ✓ BMI
DIET Healthy EXERCISE Little
SMOKER Yes CIGS/DAY 10/day ALCOHOL UNITS/WEEK 10/week ✓
B/P 118/70 ✓ SOU
KNOWN ALLERGIES NONE KNOWN
FAMILY HISTORY OF CHRONIC DISEASE? FM of Asthma
LIFESTYLE ADVICE Self breast-aware

LAST SMEAR 1999 LAST TETANUS

BLOOD TESTS

FOLLOW UP

(a)



TAYSIDE AREA CLINICAL PSYCHOLOGY DEPARTMENT

Your Ref:

Royal Dundee Liff Hospital

DUNDEE

Our Ref: LS/LM

DD2 5NF

**Enquiries to: Mrs Lesley Mitchell
(Secretary)**

Tel. (01382) 423119

Date Typed: 27 November 2000

Date Received: 24 November 2000

Dr M Badenhorst
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

Dear Dr Badenhorst

Re: Audra Martin, d.o.b. - 13.12.1968/0024
17 Hillbank Place, Dundee, DD3 7BE

The above patient failed to attend initial assessment appointment on 5th October 2000.

As she has not responded to a letter asking her to contact Tay Court directly if she wished further appointments I will now discharge her.

Should the situation change and she is willing to attend appointments on a regular basis please do not hesitate to re-refer her.

Yours sincerely

Lesley Mitchell

pp. Dr Lucy Sloan
Clinical Psychologist

FORMAL	
APPOINTMENT	☒
PRESCRIPTION DONE	☐
SPEAK TO DOCTOR	☐
PRACTICE NURSE	☐
NOTES	☐

Hospital Use Only	Clinic	Day Date	Time	Hospital No.	GP112									
REQUEST FOR OUT-PATIENT CONSULTATION THE INFORMATION IN THIS SECTION MUST BE COMPLETED					Appointment Category Routine ☐ Soon ☐ Urgent ☐									
Hospital	NINEWELLS	Date	21.08.00	CHI No.	1	3	1	2	6	8	0	0	2	4
Please arrange for this patient to attend the CLINICAL PSYCHOLOGY					clinic of Dr/Mr									
Patient's Surname MARTIN					Maiden Surname									
First Names AUDRA					Single/Married/Widowed/Other									
Address 17 HILLBANK PLACE					Date of Birth 13.12.68									
DUNDEE					Patients Occupation									
Postal Code DD3 7BE					Contact telephone number 870459									
Has the patient attended hospital before YES/NO If yes please state:														
Name of Hospital NINEWELLS A & E					Name, Address and Telephone number of MEDICAL/DENTAL PRACTITIONER									
Year of Attendance 2000					Hospital No.									
If the patient's name and/or address has/have changed since then please give details:														
Can patient attend at short notice? YES/NO														
If YES, minimum notice required														
Please use rubber stamp														

I would be grateful for your opinion and advice on the above named patient. A brief outline of history, symptoms and signs is given below.

Thank you for seeing Audra (31 years), who presented today with reactive depression. There have been a few triggers to account for this – job loss, partner's discharge from the armed forces, a number of deaths in the family and financial problems. Audra also lost a baby through premature birth two years ago and has not quite come to terms with this. She has a background of growing up in a children's home and life has obviously been difficult over the years – family relationships are still strained – she hasn't spoken to her mum for 2½ years.

I would be very grateful if you could spend time with her to put her past into perspective so that she can move on. I have started her on Cipramil 20mg daily.

Many thanks.

Yours sincerely

Dr M Badenhorst

Diagnosis/provisional diagnosis

Present drug treatment and potential special hazards

X-Ray (women of childbearing age) Date of first day of L.M.P.

Relevant X-rays available from

No. (if known)

Signature

Dd8436631 3/03 15M 13161

355-2104

C30-12-98 -

Hospital NinellsTAYSIDE UNIVERSITY HOSPITALS
NHS TRUST

A&E No.

00/17590

CONSULTANT NM (INITIALS)

P A T I E N T	SURNAME <u>MARTIN</u>	MPI No. <u>0024</u>	DATE <u>13-5-00</u>	TIME OF ARRIVAL <u>00:22</u>
	FORENAME <u>ANDRA</u>	SEX <u>F</u> MARITAL STATUS <u>S</u>	DATE OF INCIDENT	TIME OF INCIDENT
	MAIDEN NAME	DOB <u>13/2/68</u>	LOCATION OF INCIDENT	
	ADDRESS <u>17 Hillbank Pt, Dundee</u>	AGE <u>31</u>	COMPLAINT	
T	TEL.	RELIGION <u>/</u>		
	TEMPORARY ADDRESS	OCCUPATION/SCHOOL	GP NAME <u>Andersen</u>	
	TEL.	PREVIOUS ATTENDANCE	ADDRESS	
		Y <u>0</u>		
N O K	NAME <u>John Martin</u>	RTA	Y <u>0</u>	
	ADDRESS <u>94 Balunie St</u>	REFERRED BY	<u>999</u>	
	TEL.	ARRIVAL: AMBULANCE	<u>0</u>	
	NOTIFIED <u>N/Y</u> RELATIONSHIP <u>Father</u>	<u>0</u>	<u>N</u>	

TO BE COMPLETED BY DOCTOR AFTER SEEING PATIENT

Dear Doctor

The above named patient attended Accident & Emergency Department today 23/5/00DIAGNOSIS Spinal Cord - Collateral leg (L) knee jointX RAY / ECG / INVESTIGATIONS SHOW None

TREATMENT GIVEN

Double Endorphin
Analgesia Admin

DRUGS _____ GIVEN BY _____

TETANUS PROPHYLAXIS HAS / HAS NOT BEEN GIVEN TT COURSE _____ TT BOOSTER _____ HATI _____

DISPOSAL

ADMITTED TO _____ OP CLINIC _____

DISCHARGED TO G.P. for further Mx

DOCTORS NAME (print)

CONSULTANT

Wm.

SIGNATURE

TIME OF DISCHARGE

DOCUMENT STAMPED
TO ENSURE DETECTION
BY SCANNER

RECEIVED
25 MAY 2000

NORMAL	
APPOINTMENT	
PRESCRIPTION DONE	
SPEAK TO DOCTOR	
PRACTICE NURSE	
NOTE	

FMCG/AM

15th February 2000

To Whom It May Concern

Dear Sir/Madam

Matthew Thomas

This man is currently in army custody, having gone AWOL. His partner has asked me to let you have a note in possible mitigation.

She had a miscarriage on 24.12.98 and as a result of this started drinking very heavily. She tells me that it is a result of this and his concern for her that caused him to go AWOL. I realise that this is not an excuse, but perhaps it can be given some consideration.

Yours sincerely

Dr F McGrory



**DUNDEE
TEACHING
HOSPITALS**
NATIONAL HEALTH SERVICE TRUST

DIRECTORATE OF OBSTETRICS AND GYNAECOLOGY

Your Ref.

Our Ref.

Enquiries to:-

TF/HKL
Dr T Farrell
Wards 37/38

Ninewells Hospital and Medical School
Dundee DD1 9SY
Telephone 01382 660111

11th March 1999

Dictated: 8/3/99

Dr R Andersen
Tay Court Surgery
50 South Tay Street
DUNDEE

Dear Dr Andersen

RE: AUDRA MARTIN, 17 HILLBANK PLACE, DUNDEE
MPI: 131268 0024

I saw this lady who had had a previous 13 week spontaneous abortion at the Clinic in February. She had very irregular bleeding, hence it was wondered whether she had retained products of conception. An ultrasound scan has showed wall thickening at the fundus which the scan suggested may be retained products of conception. The area is very small and I suggest that if she still has any irregular bleeding then she should be given another course of Flagyl as this settles it down. I would be grateful if you could let me know if there are any problems.

Yours sincerely

Dr T Farrell
Senior Registrar

D I S C O V E R G O O D H E A L T H I N D U N D E E

Chairman: Sir William Stewart, D.Sc., F.R.S. Chief Executive (Acting): Mr H Waldner, M.B.A., F.H.S.M., Dip.H.S.M.

ACCREDITED BY



**KINGS FUND
ORGANISATIONAL
AUDIT**



DIRECTORATE OF OBSTETRICS AND GYNAECOLOGY

Your Ref.

Our Ref.

Enquiries to:-

TM/HKL
Dr T Farrell
Wards 37/38

Ninewells Hospital and Medical School
Dundee DD1 9SY
Telephone 01382 660111

24th February 1999
Clinic: 15/2/99

Dr R Andersen
Tay Court Surgery
50 South Tay Street
DUNDEE

Dear Dr Andersen

RE: AUDRA MARTIN, 17 HILLBANK PLACE, DUNDEE
MPI: 131268 0024

This lady returned following a 13 week spontaneous abortion. Swabs at that time showed an anaerobic infection for which she has been treated. The pathology is essentially normal. She is emotionally fine and is planning on further family. She is however having irregular bleeding, but no other symptoms.

Abdominal examination was normal. I did a speculum and a high vaginal swab. I have organised an out-patient ultrasound scan to be sure that she has a clear midline. Scan and speculum were fine and I have suggested to her that we just wait for her normal cycle to return. She could be commenced on the pill for 2 to 3 months for a later cycle if she wishes.

Yours sincerely


Dr T Farrell
Senior Registrar

Date		Entered on
FMoG		Col. J. J. J.
RMA		
CF		
AJM		
SG		
Nurse 1		
Nurse 2		

DISCOVER GOOD HEALTH IN DUNDEE

Chairman: Sir William Stewart, D.Sc., F.R.S. Chief Executive (Acting): Mr H Waldner, M.B.A., F.H.S.M., Dip.H.S.M.

ACCREDITED BY



KINGS FUND
ORGANISATIONAL
AUDIT



DIRECTORATE OF OBSTETRICS AND GYNAECOLOGY

Your Ref. **AS/SG/7**
 Our Ref.
 Enquiries to:- **Dr A Smith**
Ward 41

Ninewells Hospital and Medical School
 Dundee DD1 9SY
 Telephone 01382 660111

20 January 1999
 Dictated: 18.01.99

Dr R Andersen
 Tay Court Surgery
 50 South Tay Street
 DUNDEE

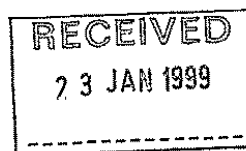
Dear Dr Andersen

RE: AUDRA MARTIN, 17 HILLBANK PLACE, DUNDEE
MPI: 13 12 68 0024

This lady had a spontaneous rupture of the membranes at 13+ weeks gestation on 24 December 1998. There was no FH and she was diagnosed as having had a missed abortion. She had Mifepristone on the day and was supposed to have Cervagem pessaries later however came in on 24 December 1998 after having passed the fetus at home and passed the placenta after admission in the Labour Ward. She was discharged the following day on antibiotics and will be reviewed in Dr Duncan's Out Patient Clinic with the results of the cervical swabs in 6 weeks time.

Yours sincerely

Dr A Smith
 DR A SMITH
 REGISTRAR to Dr Duncan



Date	File	Enter on
		Computer
FMG		
RMA	✓	
CF		
AJM		
SG		
Nurse 1		
Nurse 2		

D I S C O V E R G O O D H E A L T H I N D U N D E E

Chairman: Sir William Stewart, D.Sc., F.R.S. Chief Executive (Acting): Mr H Waldner, M.B.A., F.H.S.M., Dip.H.S.M.

ACCREDITED BY



KINGS FUND
 ORGANISATIONAL
 AUDIT

DUNDEE DOCTORS OUT OF HOURS CO-OPERATIVE

Call Number: 2929

Date: 07-Jan-99

Time: 06:35

Passed: 0635

Patient Details:

Name: AUDREY Martin
Address: 17 Hillbank Place

Town: Dundee
Region: Tayside

Post Code:

Sex: Female
DOB: 13-Dec-78
Tel: 870459

Contact:

Patient is Non Registered ☐

Call Location:

17 Hillbank Place
Dundee
Tayside
870459

Registered GP Details:

Dr Name Andersen
Practice: Taycourt
Script No 7069-6

Home Details:

Home GP

Home Practice:

Complaint:

cramp in back

Consultation Start:

Status: Visit: ☐ Tel: ☒ Base: ☐ Cancelled: ☐ DNA: ☐

History / Examination

Had m/camigo five Amoxycillin/Flagyl
now back pain.
Suggest rest & analgesia & see Dr Anderson if not settled

Diagnosis

Back Pain

Drugs

Form Strength No Category

Outcome

Death: ☐ GP to certify ☐

Refer To:

Dept:

Review by GP ☐

Where:

When:

Patient to contact GP ☐Call Handled as: TR ☐ ET ☐ INT ☐

Duty Doctor:

Signature: D MC

Print:

Call Complete:

Date:

7/1/99

Time:

06.40 am



Directorate of Obstetrics and Gynaecology

Your Ref.

Ninewells Hospital and Medical School
Dundee DD1 9SY
Telephone 01382 660111

Our Ref. **268** Lesley Mays
Amanda Sullivan

Enquiries to

BLEEP 4052
EXTENSION 35621
DIRECT LINE 425621

Date as postmark

MARTIN 13 12 88 0024
AUDRA F
17 HILLBANK PL
DUNDEE
DD3 7BE
DR. R ANDERSEN
TAY CT SURG
DUNDEE

Dear Doctor

DOWN'S SYNDROME SCREENING

The above named patient was seen at the booking clinic on **3.12.98**
An information leaflet was given to her on Down's syndrome screening.

By scan she is **10⁺** weeks pregnant.
(LMP **Sept** Booking scan arranged for)

At booking she indicated her choice as:

Down's syndrome screening ☐
Unsure about Down's syndrome screening ☐
Does not wish Down's syndrome screening ☒

She will attend you week beginning

She will attend Ninewells week beginning

She will attend peripheral clinic week beginning

At this time a blood sample (SST Tube) should be taken if screening is required.

Please ensure that the following information is CLEARLY marked on request form:

Gestation by scan (LMP ONLY if no scan)

Weight

Signature and date.

Thank you.

Yours sincerely

Designation **Letting**

DMR070/Rev Nov 96



D I S C O V E R G O O D H E A L T H I N D U N D E E

CONFIDENTIAL INFORMATION

Dear Doctor,

I would be grateful if an appointment could be made for hospital booking and antenatal care/consultation only, for the undermentioned patient: (delete as necessary)

SURNAME DARTIN (Previous Surname)MAIDEN NAME 11CHRISTIAN NAMES AURORAADDRESS 17 HILLBANK PL24/09/98TEL. NO. 870 459 M.P.I. No.

1	3	1	2	6	8	0	0	2	9
---	---	---	---	---	---	---	---	---	---

D.R.I. UNIT NO. MARYFIELD UNIT NO.

DATE OF BIRTH 13/12/68 NINEWELLS UNIT NO. 0026

PREVIOUS VISITS TO HOSPITAL (Not Maternity) Doctor/Clinic/Ward

YEAR

FOLD HERE

DETAILS:

LAST MENSTRUAL PERIOD 2-3/11 approx 10 weeks

PREVIOUS PREGNANCIES AND DELIVERY

DATE 1989 1592 PLACE at home Special features fract

THERAPY THIS PREGNANCY—dosage: preparation: dates

Sedatives

Anti emetics

Iron

Folic Acid

Other

folic acid 16/11/98

ANY SPECIAL FEATURES (medical, social, history, findings, etc.) (If for consultation, reason for reference)

1st child has never achieved an orgasm

SHARED ANTE NATAL CARE

I wish to undertake Shared Antenatal Care and accept agreed terms and methods Write YES if wished YES

EARLY DISCHARGE (Please tick one box)

I wish this patient to be discharged to my care after 48 hours
(i.e. PLANNED EARLY DISCHARGE) ☐If Necessary, I would accept this patient as discharge 3rd to 5th day
(i.e. SPORADIC EARLY DISCHARGE) ☒This patient is not suitable for early discharge in any circumstance ☐DATE 16/11/98 SIGNATURE M. Andersen

DMR 265

R. M. ANDERSEN
Tayport Surgery
50 South Tay Street
Dundee DD1 1PF
Tel: 01382 228223

DUNDEE DOCTORS OUT OF HOURS CO-OPERATIVE

CALL NUMBER

97/09574

DATE: 13/04/97

CALL RCD: 20:31

CALL PASSED: 20:45

CALL COMPLETE: 20:55

NAME: AUDREY MARTIN

SEX:

Female

ADDRESS: 17 HILLBANK PL.

DUNDEE

DATE OF BIRTH:

13/12/68

POSTCODE:

TELEPHONE No:

870081

LOCATION:

c/o ADDRESS:

CONTACT NAME:

REG. GP/PRACTICE:

Andersen, R.

Tay Court

GP. NUMBER

T 7069-6

EMERGENCY TREATMENT: ☐ TR: ☐ INT: ☐

TR DETAILS:

HOME ADDRESS:

HOME GP:

COMPLAINING OF: PELVIC PAIN

STATUS:

P.H.W.

HISTORY/EXAMINATION:

Attending M/W ~ 1 mth.
 Concerned re miscarriage but opted HCG -ve.
 Seems likely ~~miscarriage~~ dysmenorrhoea
 To try Ibuprofen. Has approx 24h to over
 GP.

DIAGNOSIS:

? dysmenorrhoea

DRUG EMERGENCY TREATMENT PRESCRIBING

DRUG	FORM	STRENGTH	No.

DRUG PRESCRIPTION

DRUG	FORM	STRENGTH	DOSAGE	No.

OUTCOME:

HOSPITAL

SPECIALITY

REFER TO HOSPITAL:

REVIEW BY GP:

WHEN

DEATH:

☐

GP TO CERTIFY

☐

REFERRAL TO:

SPECIFY:

DUTY DOCTOR: G. Summers

THIRD PARTY COPY

	DATE	TIME
FMG		
FMA	✓	
CF		
AJM		
GG		
CURSE		



DIRECTORATE OF OBSTETRICS AND GYNAECOLOGY

Your Ref.

Ninewells Hospital and Medical School
Dundee DD1 9SY
Telephone 01382 660111

Our Ref.

Early Pregnancy Assessment Unit

Enquiries to:-

Date 27/3/97

Dear Dr

MARTIN
AUDRA
17 HILLBANK PL
DUNDEE

13 12 68
0024
F
S

DD37BE

RE: DR. R ANDERSEN
MPI TAY CT SURG
50 S TAY ST DUNDEE

Your patient who was ~~NOT~~ 27/3/97 weeks pregnant had a scan on 27/3/97 which showed evidence of a ~~non continuing pregnancy~~ NORMAL UTERUS.

She did not require admission.

FOLLOW UP ARRANGEMENTS

No follow up required	☒
Follow up appointment	☐

Anti-D was ~~administered~~ / not required.

Yours sincerely

	FILE	ENTER ON COMPUTER
F McG		
RMA	-	
CF		
AJM		
SG		
NURSE		

D I S C O V E R G O O D H E A L T H I N D U N D E E

Chairman: Dr. J. Stuart Fair, M.A., LL.B., W.S., LL.D. Chief Executive: Mr T. E. W. Brett, B.Sc.(Hons.), M.H.S.M., Dip.H.S.M., Grad.I.P.D.

HISTOPATHOLOGY TAYSIDE HOSPITALS Ninewells Hospital, Dundee 01382 660111 Ext 2548 Perth Royal Infirmary 01738 623311 Ext 3305		Ward/Clinic/ Hosp. Cons. D D M M Y Y 13 12 6 8 0 0 2 1 C.H.I. No.
		Surname <u>MARTIN</u> First Name <u>ANDRA</u> M. State Address <u>11 Hillbank Pl</u> Sex G.P. & Address (G.P. Requests only) <u>DR FLAHERTY 60 S. TAY ST</u>
Specimens will only be accepted when the Request Form is fully completed and the containers adequately labelled.		
Nature of Specimen(s): (Distinguish clearly when several parts taken) <u>Urine</u>	Date / Time Specimen Taken: <u>25/3/97</u> <u>AM</u>	
	Previous Pathology Report Number:	
(If helpful, please include diagram)	Risk of Infection: YES / NO If Yes, please state nature of infection:	
	Other Relevant Details: L.M.P. - <u>7</u> Radiotherapy - Drug Therapy -	
Clinical History, Operation Findings and Presumptive Diagnosis: <u>? Pregnancy</u>	Request Categories ☒ = YES In-Patient Out-Patient Day Care General Practice ☒ Private Patient Category II Work Other (Specify)	
	PRINTED NAME of Med./Surg. Officer:	
Examination Requested / Special Requests: <u>Spa index</u>	BLEEP No:	
	Signature of Medical/Surgical Officer: <u>P.D. Flaherty</u>	
FOR LABORATORY USE ONLY		
Description: <u>NPT Negative</u> <u>PREGNANCY TEST</u> <u>NEGATIVE</u> <u>H-1</u>	Pathology Team (initials):	
	Additional Information / Requests: No. of pieces taken: No. of blocks:	
Date / Time Received and Lab. Access No PREGNANCY TEST 0714 1997		

TWP(MR)308

DOCUMENT STAMPED
TO ENSURE DETECTION
BY SCANNER

EMG	FILE	ENTER ON COMPUTER
AWA		
CF		
AJM		
SG		
URSE		



Telephone No: 640125

Family Planning/Well Woman Services
 Ryehill Health Centre
 St Peter Street
 Dundee DD1 4JH

Date: 19/3/97

Name: AUDRA MARTIN DOB/CHI: 13/12/68

Address: 17 HILLBANK PLACE DUNDEE

Dear Dr McBray.

Your patient attended DSI F.P. clinic on 19/3/97 and requested

a Pregnancy Test. Pregnancy Test - negative but
 pt feeling bloated & nauseated. Last pregnancy (con
 pill) not diagnosed till 3/12. o/c uterus enlarged
 8+ week size. I would be grateful if she

We have/have not arranged to see her again

Yours sincerely

could be referred for a
 scan to establish if pregn.
 She was taking the contraceptive
 pill till Feb 16th

Medical Officer
 Family Planning/Well Woman Services

2/3/217



Telephone No: 640125

Family Planning/Well Woman Services
Ryehill Health Centre
St Peter Street
Dundee DD1 4JH

Date: 14th June, 1996

Dear Dr *Gardiner*

Name: AUDRA MARTIN DOB/CHI: 13-12-68

Address: 17 HILLBANK PLACE, DUNDEE

Your patient attended FRI- FAM. PLANNING clinic on 14th JUNE, 1996 and requested contraceptive advice.

The following was prescribed MICROGYNON X1

There does not appear to be any contraindication to this method in the patient's history, but if you consider the method is not advisable, please would you contact the Medical Officer at the above address.

A cervical smear ~~was~~ was not taken.

I shall let you know if the result is abnormal.

She will ~~will not~~ be seen for follow up in 4 WEEKS

Yours sincerely

Healy

Medical Officer
Family Planning/Well Woman Services

	FILE
F McG	
RMA	
CF	
AJM	
SG	✓
DOSE	



DIRECTORATE OF OBSTETRICS AND GYNAECOLOGY

Your Ref.

Ninewells Hospital and Medical School

Our Ref.

GM/SG/32

Dundee DD1 9SY

Telephone 01382 660111

Enquiries to:-

Dr G Muir
Ward 37

25 September 1995

Dictated: 25.09.95

Dr R Andersen
Tay Court Surgery
50 South Tay Street
DUNDEE

Dear Dr Andersen

RE: AUDRA MARTIN, 17 HILLBANK PLACE, DUNDEE
MPI: 13 12 68 0024

This lady was reviewed in the Gynae Clinic on 18 September 1995. Her scan showed a very small left ovarian cyst but was otherwise normal and her swabs came back negative. These results were explained to Audra and she was therefore reassured. She has been discharged from the Clinic but of course we would be happy to see her again if necessary.

Yours sincerely

DR G MUIR
SHO to Team 1

	FILE	SEARCHED
F McG		
RMA		
CP		
AJIS		
SG		
MURP		

D I S C O V E R G O O D H E A L T H I N D U N D E E

Chairman: Dr J. Stuart Fair, M.A., LL.B., W.S., LL.D. Chief Executive: Mr T. E. W. Brett, B.Sc.(Hons), M.H.S.M., Dip.H.S.M., Grad.I.P.D.



DIRECTORATE OF OBSTETRICS AND GYNAECOLOGY

Your Ref.

Ninewells Hospital and Medical School

Our Ref.

AM/SG/99

Dundee DD1 9SY

Telephone 01382 660111

Enquiries to:-

Dr A Mustafa

Ward 37

13 September 1995

Clinic: 11.09.95

Dr R Andersen
Tay Court Surgery
50 South Tay Street
DUNDEE

Dear Dr Andersen

RE: AUDRA MARTIN, 17 HILLBANK PLACE, DUNDEE
MPI: 13 12 68 0024

Thank you for referring your patient to the Gynae Out-Patient Clinic. Examination revealed a normal sized uterus and both adnexae were tender. An endocervical swab was obtained and sent for culture and Chlamydia testing. A scan was organised for 19 September 1995 and we will see her again then.

Kind regards.

Yours sincerely

DR A MUSTAFA
SHO to Team 1

136		
NURSE		

CERVICAL SWAB SHOWED A FEW POLYMORPHS, NO TRICHOMONAS, NO CANDIDA, NO GONOCOCCUS ISOLATED.

D I S C O V E R G O O D H E A L T H I N D U N D E E

Chairman: Dr. J. Stuart Fair, M.A., LL.B. W.S., LL.D. Chief Executive: Mr T. E. W. Brett, B.Sc.(Hons.), M.H.S.M., Dip.H.S.M., Grad.I.P.D.



Telephone No: 640125

Family Planning/Well Woman Services
 Ryehill Health Centre
 St Peter Street
 Dundee DD1 4JH

Date: 21/8/95

Dear Dr

Name: Andrew MARTIN DOB/CHI: 14.12.68Address: 17 Hillbank RoadYour patient attended Dr clinic on 21/8/95 and requested

contraceptive advice.

The following was prescribed 50 µgm Ethinyl oestradiol / 250 µgm levonorgestrel 15 tablets in 3 packs.

There does not appear to be any contraindication to this method in the patient's history, but if you consider the method is not advisable, please would you contact the Medical Officer at the above address.

A cervical smear was/was not taken.

I shall let you know if the result is abnormal.

She will/will not be seen for follow up in 4 weeks

Yours sincerely

Medical Officer
 Family Planning/Well Woman Services

	FILE	ENTER ON COMPUTER
F McG		
BMA		
CF		
AJIA		
	✓	

✓

Hospital Use Only	Clinic	Day Date	Time	Hospital No.	GP112
-------------------	--------	----------	------	--------------	-------

REQUEST FOR OUT-PATIENT CONSULTATION
THE INFORMATION IN THIS SECTION MUST BE COMPLETED

Hospital NINEWELLS	Date 21.08.95	Appointment Category Routine ☐ Soon ☐ Urgent ☐
--------------------	---------------	--

CHI No.	1	3	1	2	6	8	0	0	2	4
---------	---	---	---	---	---	---	---	---	---	---

Please arrange for this patient to attend the GYNAECOLOGY clinic of Dr/Mr

Patient's Surname MARTIN Maiden Surname

First Names AUDRA Single/Married/Widowed/Other

Address 17 HILLBANK PLACE Date of Birth 13.12.68

DUNDEE Patients Occupation

Postal Code DD3 7BE Contact telephone number

Has the patient attended hospital before YES/NO If yes please state:

Name of Hospital DR! (AED)

Year of Attendance 1995 Hospital No. 0024

If the patient's name and/or address has/have changed since then please give details:

Can patient attend at short notice? YES/NO

If YES, minimum notice required

Please use rubber stamp

I would be grateful for your opinion and advice on the above named patient. A brief outline of history, symptoms and signs is given below.

This patient has been attending the GU clinic for some time with thrush. One of her complaints was of lower abdominal pain and I gather that they carried out a scan recently and she was told that she had bilateral ovarian cysts. I have no report about this at all but as she is still complaining of some pain in both iliac fossas I would be grateful for your opinion. She was on Depo Provera but since stopping it about 6 or 7 months ago has not had a period at all. She has one child born in April 1989. Thank you for seeing her.

Yours sincerely

R M Andersen

Diagnosis/provisional diagnosis

Present drug treatment and potential special hazards

X-Ray (women of childbearing age) Date of first day of L.M.P.

Relevant X-rays available from

No. (if known)

Signature

Dd8435831 3/83 15M 13161

355-2104

USE BALL POINT PEN AND BLOCK LETTERS

C 94 DRI DRI

Accident and Emergency No. 95116426

Maiden Name Hospital

Age 26

First Name ... MARTIN ... D. of B. 131268

Address ... 17 HILLBARK PLACE ... S. C. State

Occupation ... SHOP ASSIST ... MPI No. (last 4 digits) 0024

Date and Time of Injury 16/5/95

Place of Injury: Work School Home (Indoor) Road Traffic

Drugs: Penicillin Allergy Insulin Steroids A.T.S.

DIAGNOSIS: Muscle sprain left shoulder

HISTORY / COMPLAINT: B1
Fell off ladder onto front left shoulder while painting last night. Painful shoulder but thought would settle.
O/E - Shoulder tender to palpate anteriorly.
- acromioclavicular joint
- inside upper humerus.
Good ROM shoulder, pain felt upper arm when flexed to 90°, when 2ndly adducted.
Abduction to 90° ok. Extension ok.
Finger sensation/perforation power normal. Good radial pulse.

SITES X-RAYED: X-RAY FINDINGS: left shoulder, left humerus

TREATMENT: Broad arm sling S/T for rot. supraspin. tendons

THB(MR)5A (Rev.3/94)

Doctors' Signature ... Print Name For Legal Reasons ...

Tetanus Vaccination	1st	Covered 2nd	Booster	Name and Address of Family Doctor:	CODE
To: G.P.		Discharged		DR ANDERSON	A P V
OP Clinic				TRA CAT SURG	B Q W
Ward No.				DUNDEE	C R X
Other Hospital					D S Y
					E T Z

THIRD PARTY COPY

	FILE	ENTER ON COMPUTER
F McG		
RMA	✓	
CF		
AJM		
SG		
WDC		

Tayside Health Board Hospital				USE BALL POINT PEN AND BLOCK LETTERS			
Accident and Emergency No. <u>86/31984</u>				Surname <u>MARTIN</u> D. of B. <u>13.12.68</u>			
Maiden Name <u>Horne</u>		Age <u>17</u>		First Name <u>AUDRA</u>		C. State <u>S</u>	
Next of Kin and Relationship <u>Father (Contacted YES / NO)</u>				Address <u>H. CAMERONS CLOSE</u>			
Tel. No. <u>31186</u>				Occupation <u>UNEMP</u>			
Date <u>28.16</u> Times (24hr. clock) <u>Arrival</u> <u>Seen</u> <u>Discharged</u>				Date and Time of Injury <u>28.12.86</u>			
Referred by G.P. <u>YES / NO</u>				Place of Injury: Work <u>School</u> Home (Indoor) <u>Road Traffic</u>			
Transport Ambulance <u>Other</u>				Drugs: Penicillin Allergy <u>Insulin</u> Steroids <u>A.T.S.</u>			
DIAGNOSIS:				MEDICINES PRESCRIBED		DOSE	
Bruised heel						GIVEN BY	
T. P. B.P.							
HISTORY / COMPLAINT: Heel Door closed on @ heel 1 week ago. Swell painful. Swelling / bruising Sl. tender heel Resr. Wear comfortable shoes							
SITES X-RAYED:							
X-RAY FINDINGS:							
TREATMENT:							
THB(MR)5A (Rev. 2/86)				Signature <u>[Signature]</u>			
Tetanus Vaccination		Covered 2nd		Booster		Name and Address of Family Doctor:	
To: G.P.		Discharged				Dr. Gardner 1 S. TAY ST Dundee	
OP Clinic							
Ward No.							
Other Hospital							
						CODE	
						A P V	
						B Q W	
						C R X	
						D S Y	
						E T Z	

Tayside Health Board				Hospital				USE BALL POINT PEN AND BLOCK LETTERS			
Accident and Emergency No. <u>84/29515</u>				Surname <u>MARTIN</u>				D. of B. <u>13.12.68</u> ✓			
Maiden Name				First Name <u>AUORA</u>				S. C. State			
Next of Kin and Relationship				Address <u>133 B. ROUGHITT. PERRICROD. F. DUNDEE</u>				Sex			
Tel. No. <u>R/P</u>				Occupation <u>0024</u>				MPI No. (last 4 digits)			
Date <u>11.9.84</u>				Time of Arrival (24hr. clock) <u>09.10</u>				Referred by G.P. YES/NO <u>YES</u>			
Transport Ambulance Other				Place of Injury: Work School Home (Indoor) Road Traffic				Date and Time of Injury			
Drugs: Penicillin Allergy Insulin Steroids A.T.S.				Other (Specify)				Accident Emergency Casual			
DIAGNOSIS:				MEDICINES PRESCRIBED				DOSE			
T. P. B.P.				GIVEN BY							
HISTORY / COMPLAINT:											
<u>MC</u> Hit by hockey stick in <u>RT</u> hand <u>14 days</u> <u>Rt</u> sup. handage still gets occasional shooting pain in <u>RT</u> hand <u>OH</u> <u>NB</u> the joint <u>NB</u> no tenderness Full R.O.M. <u>NB</u> no swelling <u>patient</u> advised the pain may last 2-3 weeks <u>injury</u> is very recent											
SITES X-RAYED:											
X-RAY FINDINGS:											
TREATMENT:											
THB(MR)5A											
Signature <u>[Signature]</u>											
Tetanus Vaccination				Name and Address of Family Doctor:				CODE			
1st				Covered 2nd				Booster			
To: G.P.				DR. W. GARDINER				A P V			
OP Clinic				1 S. TAY ST.				B Q W			
Ward No.				DUNDEE				C R X			
Other Hospital								D S Y			
								E T Z			

MARTIN 1 3 1 2 6 8
AUDRA 0 0 2 4
2 OGILVIE RD F
DUNDEE S
DD3 6NG

DR W GARDINER
1 S TAY ST DUNDEE

7.4.87 This girl was referred with complaints of prominent heel bumps, the right worse than the left. Intermittently, she gets pain but this is related to shoe wear. Apparently, when she wears sensible shoes there are no symptoms. Since referral she has had little bother with them.

On examination she has got bilateral Haglunds disease, the right worst than the left, with callosities. These are slightly tender.

X-rays show only minimal sized bumps on both os calces. She is not keen on surgery and I have advised her to continue with sensible shoe wear and have discharged her from our care.

A. Ahmed

Tayside Health Board <i>N/H</i> Hospital				USE BALL POINT PEN AND BLOCK LETTERS			
Accident and Emergency No.				Surname <i>MARTIN</i> D. of B.		131268	
Maiden Name		Age		First Name <i>ANDRA</i> S C. State		5	
Next of Kin and Relationship (Contacted YES / NO)				Address <i>FLAT 4, DELVIES RD</i> E Sex		DUNDEE	
Tel. No.				Occupation <i>UNEMP</i> MPI No. (last 4 digits)		0024	
Date		Times (24hr. clock)		Date and Time of Injury		Accident Emergency Casual	
Arrival		Seen		Discharged		Road Traffic	
4/4		131268		131268		131268	
CORRESPONDENCE SEEN		Referred by G.P. YES / NO		Transport Ambulance Other		Place of Injury: Work School Home (Indoor) Road Traffic	
W.M.G.		YES / NO		Other (Specify)		Drugs: Penicillin Allergy Insulin Steroids A.T.S.	
F.McG.						MEDICINES PRESCRIBED DOSE GIVEN BY	
J.A. McK							
T.		B.P.					
HISTORY / COMPLAINT:							
<i>Sharp central lower abd. pain</i> <i>Radiated into inguina</i> <i>Intermittent Present for 2/12</i> <i>EMP 7/3/88 Cycle 5/28</i> <i>No I/m bleed</i> <i>No nausea/vomiting/altered bowel habit/loss of appetite</i> <i>O/G well kept</i> <i>Abd soft</i> <i>Vtg 6/5, A/V Nd in abdomen</i> <i>Δ Non-sharp abd pain</i> <i>Blue X - ve</i> <i>1/12 This patient apparently contacted GP and was told?</i> <i>6/12/88 when seen Peter Illingworth</i> <i>Seenie</i>							
Tetanus Vaccination				Name and Address of Family Doctor:			
1st	Covered	2nd	Booster				
To: G.P.	Discharged	DR W. GARDINER					
OP Clinic		15 TAY ST					
Ward No.		DUNDEE.					
Other Hospital							
				CODE			
				A P V			
				B Q W			
				C R X			
				D S Y			
				E T Z			

307153 USE BALL POINT PEN AND BLOCK LETTERS

Tayside Health Board Hospital

Accident and Emergency No. 88/8100 Surname MARTIN 13.12.68 D. of B.

Maiden Name Age 19 First Name AUDRA S. C. State

Address 4 CAMBELL'S CR DUNDEE RC Sex

Next of Kin and Relationship (Contacted YES / NO) FATHER 164 SUMMERFIELD Gdns Occupation U/E DD36N9 MPI No. 0034 (last 4 digits)

Tel. No. 200 Date and Time of Injury Accident Emergency Casual

Date 13/12/68 Times (24hr. clock) Arrived Seen Discharged Referred by G.P. YES / NO Transport Ambulance Other YES

Place of Injury: Work School Home (Indoor) Road Traffic Other (Specify)

Drugs: Penicillin Allergy Insulin Steroids A.T.S.

DIAGNOSIS: U.T.I.

T. 36.6°C P. B.P.

HISTORY / COMPLAINT: TB Abdo pain. 19y/o F

- vague abdominal pain x 2 yrs
- was on pill - off x 2 1/2.
- last period x 1/2 ago
- no discharge PV

Now: low abd. pain? worse tonight

① features of UTI (dysuria, frequency).

② low abd. tenderness - midline

③ otherwise ✓

SITES X-RAYED: PV - uterus & adnexa - normal - no abd. tenderness.

X-RAY FINDINGS: Urine spec: cloudy pregnancy ⊖. → BACTERIOLOGY.

TREATMENT: Assessment: probable UTI.

Plan ① Reassurance ③ To see G.P. re: follow-up.

② Co-trimoxazole HWP

THB(MR)5A (Rev. 2/86)

Tetanus Vaccination	1st	Covered 2nd	Booster	Name and Address of Family Doctor:	CODE
To: G.P.		Discharged		DR N GARDINER	A P V
OP Clinic				1 S TAY ST	B Q W
Ward No.				DUNDEE	C R X
Other Hospital					D S Y
					E T Z

Tayside Health Board				Hospital				USE BALL POINT PEN AND BLOCK LETTERS			
Accident and Emergency No. <u>24/14/43</u>				Surname <u>MARTIN</u>				D. of B. <u>13.12.68</u>			
Maiden Name				First Name <u>AUDRA</u>				C. State <u>S</u>			
Age <u>18</u>				Address <u>4 CAMPBELLS CLO</u>				Sex <u>F</u>			
Next of Kin and Relationship <u>JOHN FATHER DM</u>				(Contacted YES / NO) <u>YES</u>				Occupation <u>UNDEE AS BONG</u>			
Tel. No. <u>166 SUMMERFORD GNS</u>				Date and Time of Injury <u>217</u>				Accident Emergency Casual <u>0024 R.C</u>			
Date <u>6.5.79</u>				Times (24hr. clock) <u>19.12</u>				Referred by G.P. YES/NO <u>YES</u>			
Arrival				Seen				Discharged			
Transport Ambulance				Other				Place of Injury: Work School Home (Indoor) Road Traffic			
Other (Specify)				Drugs: Penicillin Allergy Insulin Steroids A.T.S.							
DIAGNOSIS: <u>Pain / J am</u>				MEDICINES PRESCRIBED				DOSE			
T. P. B.P.											
HISTORY / COMPLAINT:											
<u>arm - d/s</u> <u>1/2 Pain @ elbow on d/s</u> <u>50% - 100% injury - no swelling - no cap</u> <u>st tenderness</u>											
SITES X-RAYED:											
X-RAY FINDINGS:											
TREATMENT:											
THB(MR)5A (Rev. 2/86)											
Tetanus Vaccination				Signature <u>[Signature]</u>							
1st				Covered 2nd				Booster			
To: G.P.				Name and Address of Family Doctor:				CODE			
OP Clinic				GARDINER				A P V			
Ward No.				1 S. TAY ST.				B Q W			
Other Hospital				UNDEE				C R X			
								D S Y			
								E T Z			

**PROTECTION AGAINST TETANUS
NOTIFICATION TO GENERAL PRACTITIONER**

HOSPITAL

ATE JRI

HOSPITAL UNIT
NUMBER

131268 0024

PATIENT'S
SURNAME

Martin

*MR
MRS
MISS

FIRST
NAMES

Audra

ADDRESS

17 Hillbank PL
Dundee

TO
DR

M'Gory
50, St Tay St
Dundee

* AGED 16 / DATE OF BIRTH
OR OVER / (IF UNDER 16)

TETANUS TOXOID	DATE DUE	DATE GIVEN	GIVEN BY
1st DOSE			
2nd DOSE			
3rd DOSE	BOOSTER	3/4/91	AMEL

A.T.S. * HAS/HAS NOT BEEN GIVEN

* DELETE AS NECESSARY

CHIEF ADMINISTRATIVE MEDICAL OFFICER

HEALTH BOARD

DATE 3/4/91

Dear Doctor,

This patient has begun or completed a course of immunisation at this hospital. If the course has not been completed the patient has been advised to check with you whether he/she has been previously fully immunised. If booster doses are indicated and you do not wish to complete the course yourself please inform the patient accordingly and advise him to contact the Chief Administrative Medical Officer.

Yours faithfully,

COPY 2

FOLD BACK

THIRD PARTY

USE BALL POINT PEN AND BLOCK LETTERS

Tayside Health Board DR1 Hospital

Accident and Emergency No. 91/11469

Maiden Name Age 22

Next of Kin and Relationship (Contacted YES / NO) YES

83 BALUNIEFIELD AVE

Tel. No. 439484

First Name AUDRA Surname MARTIN D. of B. 13.12.68

Address 11 HILLBANK PL C. State S Sex F

Occupation WIS MPI No. (last 4 digits) 0024

Date and Time of Injury 3.4 Accident Home (Indoor) Emergency R.C Casual

Place of Injury: Work School Home (Indoor) Road Traffic

Other (Specify)

Drugs: Penicillin Allergy Insulin Steroids A.T.S.

DIAGNOSIS: 6th index finger

T. P. B.P.

HISTORY / COMPLAINT: cut 1st 5th finger

SITES X-RAYED:

X-RAY FINDINGS:

TREATMENT: Wound washed & dry dressing

THB(MR)5A (Rev. 2/86)

Tetanus Vaccination: 1st Covered 2nd Booster

To: G.P. Discharged

OP Clinic

Ward No.

Other Hospital

Name and Address of Family Doctor: DR. Mc GORRY

50 S. TAY ST

DUNDEE

CODE

A	P	V
B	Q	W
C	R	X
D	S	Y
E	T	Z

THIRD PARTY COPY

YCE	
W.M.G.	
P.M.G.	
J.A.Mck.	
B.M.A.	
O.F.	

rep

Tayside Health Board				Hospital				USE BALL POINT PEN AND BLOCK LETTERS			
Accident and Emergency No. 32/22672				Surname MARTIN				D. of B. 13/12/68			
Maiden Name				First Name AUDRA				C. State			
Age 23				Address 17 HILLSIDE PL				Sex F			
Next of Kin and Relationship (Contacted YES/NO)				Occupation V/E				MPI No. (last 4 digits) 0024			
Tel. No. 739888				Date and Time of Injury 26.6.92				Accident Emergency Casual			
Date 27/6/92				Place of Injury Work School Home (Indoor) Road Traffic							
Times (24hr. clock)				Referred by G.P. YES/NO				Transport Ambulance Other			
Arrival 19.21				Discharged 20.15							
DIAGNOSIS				MEDICINES PRESCRIBED				DOSE			
Banged @ wrist											
T. P. B.P.											
HISTORY / COMPLAINT											
Banged @ wrist against person											
No steady pain - wrist											
swelling @ wrist											
below wrist border											
pain on wrist flexion/extension											
disting noise on wrist extension											
finger movement ok											
SITES X-RAYED (P) wrist											
X-RAY FINDINGS											
NO											
TREATMENT											
Pressure											
Cups Bandage											
Slings											
Analgesia											
Signature											
Name and Address of Family Doctor:											
Dr. M. G. G. G.											
50 STAY ST											
DUNDEE											
Tetanus Vaccination											
1st Covered 2nd Booster											
To G.P. Discharged											
OP Clinic											
Ward No.											
Other Hospital											
CODE											
A P V											
B Q W											
C R X											
D S Y											
E T Z											

USE BALL POINT PEN AND BLOCK LETTERS

Tayside Health Board DR1 Hospital 7.4.89 Surname MARTIN 13.12.68 D. of B.

Accident and Emergency No. 93-22452 First Name AUDRA S. C. State

Maiden Name Age 24 Address 17 HILLBANK PL F. Sex

Next of Kin and Relationship JOHN KATHER (Contacted YES / NO) DUNDEE DD37BE R. C

Tel. No. 94 BALMORAL ST Occupation WE MPI No. 0024 (last 4 digits)

Date 12.09.88 Times (24hr. clock) 12.8 Referred by G.P. Transport Ambulance Place of Injury Work School Home (Indoor) Road Traffic

Arrival 12.8 Seen 12.8 Discharged 12.8 YES / NO Other Other Drugs: Penicillin Allergy Insulin Steroids A.T.S.

DIAGNOSIS Tendonitis MEDICINES PRESCRIBED 1. BU PRO FOR DOSE 600 GIVEN BY ms. [signature]

(R) WRIST

T. P. B.P.

HISTORY / COMPLAINT:

Wrist / Hand.

Pg. Sore (R) wrist. Has been

playing 10-15 hr bowling for over

6 hours today.

Wrist sore - shooting pains on flexing

and extending fingers & wrist.

D/E No swelling / bruising.

Tender over flexor tendons.

SITES X-RAYED: X-RAY FINDINGS: Fracture - Tendonitis

TREATMENT: Rx Rest / Crepe bandage / Braces

THB(MR)5A (Rev. 2/86) Signature [Signature]

Tetanus Vaccination	1st	Covered 2nd	Booster	Name and Address of Family Doctor:	CODE
To: G.P.		Discharged		<u>Dr. McGRORY</u>	A P V
OP Clinic				<u>50 S. TAY ST</u>	B Q W
Ward No.				<u>DUNDEE</u>	C R X
Other Hospital					D S Y
					E T Z

Tayside Health Board				Hospital				USE BALL POINT PEN AND BLOCK LETTERS			
Accident and Emergency No. <u>93-22452</u>				Surname <u>MARTIN</u> <u>13-12-68</u> D. of B.				First Name <u>AUDRA</u> C. State			
Maiden Name				Age <u>24</u>				Address <u>17 HILLBANK PL</u> Sex			
Next of Kin and Relationship				(Contacted YES / NO)				Occupation <u>WLC</u> MPI No. (last 4 digits) <u>0024</u>			
Tel. No. <u>RIP</u>				Date and Time of Injury				Accident Emergency Casual			
Date <u>16/8/93</u> Times (24hr. clock) <u>16.52</u>				Referred by G.P. YES / NO				Transport Ambulance Other			
DIAGNOSIS <u>Tendonitis @ wrist</u>				Place of Injury: Work School Home (Indoor) Road Traffic				Drugs: Penicillin Allergy Insulin Steroids A.T.S.			
				MEDICINES PRESCRIBED				DOSE			
T. P. B.P.											
HISTORY / COMPLAINT:											
Seen on 12/8/93 & same problem. c/o contd discomfort @ wrist w/c No suspicion bony injury. Shd appear to be tendonitis No former support & backstab GP b removed ~10/7 - replaced & eg double lubricip Continue & regular w/h											
SITES X-RAYED:											
X-RAY FINDINGS:											
TREATMENT:											
THB(MR)5A (Rev. 2/86)											
Tetanus Vaccination				Signature <u>PJ Gray</u>							
1st				Covered 2nd				Booster			
To: <u>G.P.</u>				Name and Address of Family Doctor:				CODE			
OP Clinic				Dr. Mc GROY				A P V			
Ward No.				50 S. TAY ST				B Q W			
Other Hospital				DUNDEE				C R X			
								D S Y			
								E T Z			

CORRESPONDENCE SEEN	
W.M.G.	
F. McG.	
J.A. McK.	
R.M.A.	
C.F.	

THIRD PARTY COPY

*Not requested through official
channels. Do nothing until we
receive correspondence from Solicitor*

CC/SG

21 April 1995

Audra Martin
17 Hillbank Place
Dundee

Dear Audra

I would be most grateful if you could either 'phone or call into the surgery on Monday 1st May to have a word with our practice asthma nurse, Cathie Christie. She would like to have a word with you about Cally's medication. A convenient time to come in on Monday is between 10-11.30 am.

Thank you for your co-operation in this matter.

Yours sincerely

Sara Garland
Practice Secretary



Your Ref.

Our Ref.

Enquiries to:-

Ninewells Hospital and Medical School
Dundee DD1 9SY
Telephone 0382 60111

Dr Rosalind Andersen
Tay Court Surgery
50 S. Tay Street
DUNDEE
DD1 1PF

3.11.94

Dear Doctor Andersen.

Audra Martin
17 Hillbank Place
DUNDEE
DD3 7BE

re

Your patient has accepted laser treatment to remove her tattoos. This will require a course of treatment sessions over a period of several months. It will usually produce a good cosmetic result, sometimes an excellent one. Sometimes it is unsuccessful however or has complications. I have compiled a fact sheet to assist you should you need some immediate information. I also enclose a copy of the information which has been given to the patient.

Yours sincerely

Dr Roderick J Scott

F160

RMR

D I S C O V E R G O O D H E A L T H I N D U N D E E

Chairman: Mr J. Stuart Fair, M.A., LL.B., W.S., N.P. Chief Executive: Mr T. E. W. Brett, B.Sc.(Hons), M.H.S.M., Dip.H.S.M., A.I.P.M.

FEE NOTE £25



Lawson, Coull & Duncan

Solicitors and Notaries

Partners

Derek G. Lawson, LL.B., N.P.
George C. Donnelly, LL.B., N.P.
Hugh D. McKay, LL.B., N.P.
James H. Williamson, LL.B..
James Doig, LL.B.

Our ref. GCD/SB

Your ref.

136/138 Nethergate
Dundee DD1 4PA

Tel: (0382) 27555
Fax: (0382) 200978

Box DD10,
Rutland Exchange,
Dundee

Dr. F. McGrory,
50 South Tay Street,
DUNDEE.

10th February, 1994.

Dear Dr. McGrory,

Steven Harris -v- Audra Martin
Cally Ann Martin

You may recollect that you gave evidence for the Defender in the above Proof. I enclose herewith a copy of the Sheriff's Decision in which he confirms that Steven Harris, our client, is Cally's father and that it is in Cally's best interests that he have access to her. Miss Martin will not co-operate but the Sheriff has indicated that if he is to grant access he must be satisfied that Mr Harris has discussed with someone the administration of the child's nebuliser and various medication. As Cally's father we enclose herewith a formal letter from Mr Harris requesting information from you concerning the administration of the drugs and use of the nebuliser and we suggest that what may be more appropriate is if Mr Harris has an appointment with you to discuss matters and to see any practical demonstration that may be required. We would confirm that your fee in this matter would be met by this firm.

We look forward to hearing from you with your comments on these proposals.

Yours faithfully,

Encs.

Authorised to conduct investment business under the Financial Services Act 1986
by The Law Society of Scotland

1A Hindmarsh Avenue,
DUNDEE.

Dr. McGrory,
South Tay Street,
DUNDEE.

Dear Dr. McGrory,

I, STEVEN WILLIAM HARRIS, residing at 1A Hindmarsh Avenue, Dundee, the father of Cally Ann Martin, born on 8th April, 1989, hereby give you permission to release whatever information is required of you from my daughter's medical records to Messrs. Lawson, Coull and Duncan, Solicitors, 136/138 Nethergate, Dundee and also to instruct me in the administration of any drugs that my daughter requires and the use of any nebuliser etc. she requires to use.

Yours faithfully,

10/2/94

S W Harris

TAYSIDE HEALTH BOARD

D.R.I. FAMILY PLANNING CLINIC
Date 21/3/94

Dear Dr. Mc Gony

Patient's Name Audrey Martin D. of B. 13-12-68

Address 17 HILBANK PLACE

Your patient attended the F.P. Clinic today and requested the *I.U.D./O.C. There does not appear to be any contra-indication to this method in the patients history, but if you consider that the method is not advisable would you inform the Medical Officer, Family Planning Clinic, Clinic Area 1, Ninewells Hospital.

* I.U.D. Post coital contraception
* O.C. Oral 90x 60x 60x

As part of the routine examination I have taken a cervical smear. I shall let you know if the result shows any abnormality.

COMMENT:—

CORRESPONDENCE	
NAME	
INITIALS	
DATE	
TIME	
CF	

* Delete inapplicable items.

DMR. 404

Yours sincerely,

Rosemary Dancer
Medical Officer.

File plan

FMCG/SG

24 August 1993

Kim McRae
Social Work Department
Lothian Crescent
Dundee

Dear Miss McRae

AUDRA MARTIN, 17 HILLBANK PL, DUNDEE, DOB, 13.12.63

Thank you for your letter concerning the above named patient.

There is no history of physical or mental illness with this patient and there are no grounds for regarding her as an unsuitable person to have the care of a child.

Yours sincerely

Dr F McGrory

Dr. F. McGrory
Dr. J.A. McKenzie
Dr. Rosalind M. Andersen
Dr. Catherine Flanagan
Dr. A.J. Montgomery



TAY COURT SURGERY
Consultation by Appointment
50 South Tay Street, Dundee, DD1 1PY
Telephone: 0382 287228

16 August 1993

Kim McRae
Social Work Department
Lothian Crescent
Dundee DD4 0HU

Dear Ms McRae,

Ms Audra Martin 17 Hillbank Place Dundee

Thank you for your letter of 11 August in which you ask for a history of any physical or mental illness which Ms Martin may have had.

Before giving any information to you, I require to have a mandate from Ms Martin giving me her permission to release to you any relevant information I hold as to her physical or mental wellbeing.

I will be able to act on your letter as soon as I receive a signed mandate from Ms Martin.

Yours sincerely

Dr F McGrory



TAYSIDE REGIONAL COUNCIL

Social Work Department
Access to Clients Personal Files

The Access to Personal Files Act 1987 obliges the Social Work Department to make information recorded after 1 April 1989 accessible to the subject of the information unless there are good reasons for withholding it. In receiving information, the Department will assume that it can be disclosed without further reference to the source unless the communication providing the information makes a clear indication to the contrary.

KM/MR

11 August 1993

Social Work
Department

Dr F McGrory
50 South Tay Street
DUNDEE DD1 1PF

Lothian Crescent
Dundee
DD4 0HU

Tel 0382 503838
Fax 502937

Dear Dr McGrory

re: Ms Audra Martin 17 Hillbank Place, Dundee

The above named person is the Defender in an action at Dundee Sheriff Court under Section 12 of the Guardianship Act 1973 concerning the access arrangements of her child and she has agreed that, as her General Practitioner you may be consulted.

I shall be grateful if you will inform me whether there is a history of physical or mental illness or whether there are any grounds for regarding the Defender as an unsuitable person to have the care of the child.

Any information you give will be treated as strictly confidential.

Your co-operation is very much appreciated and I enclose a stamped addressed envelope for your reply.

Yours sincerely

Kim McRae
Social Worker

CORRESPONDENCE SEEN	
W.M.G.	
F.McG.	
I.A.McK.	
M.A.	
F.	

Director
Peter James Bates

TAYSIDE HEALTH BOARD

FAMILY PLANNING CLINIC

Date 28/1/92

Dear Dr. HavahawPatient's Name Andrew Martin D. of B. 13.12.68Address 17 Hillbank Place MBP

Your patient attended the F.P. Clinic today and requested the *I.U.D./O.C.
There does not appear to be any contra-indication to this method in the patients
history, but if you consider that the method is not advisable would you inform the
Medical Officer, Family Planning Clinic, Clinic Area 1, Ninewells Hospital.

* I.U.D.

* O.C.

150 mg 1H Depo Provera

As part of the routine examination I have taken a cervical smear. I shall let you
know if the result shows any abnormality.

COMMENT:-

C/O Vaginal discharge.
still persisting after Rx to antifungals
+ Flagyl.
O/E marked vaginitis & persistent
discharge
I have asked her to see
you about further treatment
with many thanks
* Delete inapplicable items.

Yours sincerely,

Medical Officer.

DMR. 404

TAYSIDE HEALTH BOARD

D.R.1.

FAMILY PLANNING CLINIC

Date 14.8.89

Dear Dr. GardinerPatient's Name Andrey MARTIN D. of B. 13.12.68Address 2 Ogilvie Road Dep Provera

Your patient attended the F.P. Clinic today and requested the I.U.D..
 There does not appear to be any contra-indication to this method in the patients history, but if you consider that the method is not advisable would you inform the Medical Officer, Family Planning Clinic, Clinic Area 1, Ninewells Hospital.

* I.U.D.	
* P.C.	<u>150mg IM Dep Provera.</u>

As part of the routine examination I have taken a cervical smear. I shall let you know if the result shows any abnormality.

COMMENT:-

Nausea previously to O.C.

CORRESPONDENCE SEEN	
I.M.G.	☒
McG.	☐
A.McK.	☐
M.A.	☐

* Delete inapplicable items.

DMR. 404

Yours sincerely,

Medical Officer
 Medical Officer.

DIVISION OF OBSTETRICS & GYNAECOLOGY

NINEWELLS HOSPITAL
DUNDEE DD1 9SY
Telephone(0382)632085

Team 1 Office
Wards 37/38
I.D. Duncan

RB/PAN

19 April 1989

Dr. W Gardiner
1 South Tay Street
DUNDEE

Dear Dr. Gardiner

Re: Audra Martin, 2 Ogilvie Road, Dundee
MPI: 13 12 68 0024

Your patient was admitted on 7/4/89 from home in early labour, para 0+0, Blood Group O Rhesus Positive. There were no principal complications of her pregnancy. Antenatal progress was quite satisfactory. Labour lasted for approximately 21 hours. Analgesia was by epidural. Mode of delivery was by assisted Haig Ferguson Forceps for delay in the second stage at 38 weeks gestation on 8/4/89. Puerperium was uneventful. Anti-D and rubella were not necessary.

The baby was female, weighing 3335 g with Apgars of 8/1 and 10/5. They were both discharged home on 17/4/89.

She will attend you for post-natal examination. She does not require a post-natal smear. Contraception will be discussed by yourself.

Yours sincerely

R Butler
R Butler, Registrar to
Dr I D Duncan

FILE. (FL)

CORRESPONDENCE SEEN	
W.M.G.	✓
F.McG.	
J.A.McK.	
R.M.A.	
C.F.	

SECTION 10 - CONSTRUCTION & MAINTENANCE OF HIGHWAYS

SECTION 10 - CONSTRUCTION & MAINTENANCE OF HIGHWAYS
SECTION 10 - CONSTRUCTION & MAINTENANCE OF HIGHWAYS

THIRD PARTY COPY

DIVISION OF OBSTETRICS & GYNAECOLOGY

NINEWELLS HOSPITAL
DUNDEE DD1 9SY
Telephone(0382)632085

Team 1 Office
Wards 37/38
I.D. Duncan

Ref IDD/FHM

4th November 1988
Clinic:3/11/88

Dr. J McKenzie
1 South Tay Street
DUNDEE

Dear Dr. McKenzie,

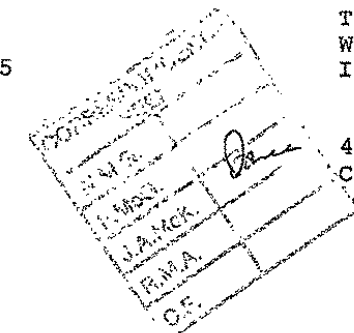
Audra Martin, 2 Ogilvie Road, Dundee.
M.P.I. 13 12 68 0024

Thank you for your letter.

Your patient attended my Ante-Natal Clinic today at 16 weeks by size and date so I have booked her for Ninewells confinement and will be pleased to accept your offer of shared care and a co-operation card is enclosed for your use.

Kind regards

Yours sincerely,



YOUNG & RUBICAM

THIRD PARTY COPY

TAYSIDE HEALTH BOARD -- DUNDEE GENERAL HOSPITALS

Telephone - 0382 23125

DEPARTMENT OF PLASTIC SURGERY

DUNDEE ROYAL INFIRMARY

Your Ref

DUNDEE

Our Ref

NK/LS 13 12 68 0024

DD1 9ND

Enquiries to:—

12th January, 1987
Clinic: 18th December, 1986

Dr J. Ferguson,
Senior Registrar,
Ward 31,
NINEWELLS HOSPITAL.

Dear Dr Ferguson,

Re:- Audra Martin, 2 Ogilvie Road, dundee

Thank you for referring this young girl to the Plastics Out Patient Clinic where I saw her on behalf of Mr Stevenson on 18th December, 1986. She has a tattoo on her right shoulder which has been present for four years and wishes its removal. On examination the tattoo could be excised and the defect closed primarily. I have therefore put her on our waiting list for excision under local anaesthetic as a day case.

Yours sincerely,



 Dr N. Kurdy,
Registrar to Mr J. H. Stevenson.

c.c. Dr W. Gardiner, 1 South Tay Street, Dundee. /

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DATE	*C *F	CLINICAL NOTES	DIAGNOSIS
9/1/85		Mucogynon 30 + 6/12	
27/2/86		Re macrolact 30 + 6/12	
		U/S Behance + 158	
26-3-85		Epigastric & central abdominal pain & nausea, relieved by food, occ. vomiting during night, 9/8 vomit	
		9/8 vomit - maw	
		R. Thaler super x 3001	
22-4-85		Yellow veg. stool, 200g + nausea & dysuria	
		R. Thaler 200g x 91	
		200g x 91	
9-5-85		Pr - vomit, 9/8, 10/8, 11/8	
		200g x 91	
30-5-85		R. EUSC 200g	
14-6-85		200g x 91	
		R. EUSC 200g	
27/6/85		Hb 76g. Febrile 38	
		9/8, 30g	
16-7-85		Pain pain + frequency → dip-slide 0	
		200g x 91	

* In C.F. Column, which is for cases of certified incapacity only, practitioners should enter C for first certificate, and F for final certificate.

Don't have pen & 28.

19-7-85 :- Dip-slide :- clear

FEMALE		SURNAME	CHRISTIAN NAMES
		<i>McArthur</i>	<i>Frederick</i>
ADDRESS		Date of Birth	
<i>1338/1-1/2 Rd</i>		<i>18/12/68</i>	
DATE	*C *F	CLINICAL NOTES	DIAGNOSIS
<i>20/6/84</i>		<i>Tel 20 + 20</i>	<i>Angina</i>
		<i>Tel 10 + 30</i>	<i>Angina</i>
		<i>Tel 10</i>	
<i>12 AUG 1984</i>		<i>02 c-angina x6.</i>	
		<i>11/60.</i>	
		<i>Environ 255.</i>	<i>Dermatitis.</i>
		<i>10 forearm.</i>	
<i>30.9.84</i>		<i>Thrush seen after</i>	<i>Wound injury</i>
		<i>fee in 10 days & missing</i>	<i>See Car. Report</i>
<i>27.9.84</i>		<i>Return on 4/10. to reappe</i>	
		<i>stomach</i>	
		<i>Damaged silver tooth again</i>	
		<i>dent well. No staining</i>	
		<i>missing. Keep same</i>	
		<i>stomach on</i>	
<i>1/10/84</i>		<i>None clear.</i>	
		<i>See Car. Report for a few days</i>	
<i>20/11/84</i>		<i>C/o anorexia & no vomiting</i>	
		<i>after food.</i>	
		<i>Tel 10 + 20</i>	

* In C.F. Column, which is for cases of certified incapacity only, practitioners should enter C for first certificate, and F for final certificate.

MEDICAL RECORD CARD

Form G.P. 8
(Scotland)

P.P.L., 53-ST 4301 11/83

FEMALE		SURNAME	CHRISTIAN NAMES	
		Martin	Audra	
ADDRESS 281 Strathmore Ave.			Date of Birth	
			13/12/68	
DATE	*C *F	CLINICAL NOTES	DIAGNOSIS	
6-8-85		EL 5 cm	M.H. J. J. J. J.	
-3 11-12-85		Loggion 86 GP 100/60		
		Detmar 15g	Contact	
		Watch strap	Dermatitis	
21-5-86		Loggion x 6/12 BP 100/60	GP 100/60	
		Tattoo @ upper arm, under exposed	R/L ✓	
		Prominent @ calcaneum	R/L ✓	
		shoe rubbing	R/L ✓	
6/4/87		10% Loggion can + 1/12		
		Negron can	Ther Vagous	
		neck nausea 5 Loggion		
		16 Neurogynon 70 + 2/12		
9-3-87		Still nausea = Neurogynon		
		R. Nausea x 2/12		
		2 milidyling ant x 100g		
		Hydrocortisone 1% x 15g		
		800mg 500mg x 30		
		Flag 100mg x 30	P.L.D.	

* In C.F. Column, which is for cases of certified incapacity only, practitioners should enter C for first certificate, and F for final certificate.

MEDICAL RECORD CARD Form G.P. 8 (Scotland)

Dd 8847772, 395M 1/85, 7161

DATE	*C *F	CLINICAL NOTES	DIAGNOSIS
19.3.87		Heavy period = date 1/8/87 - now nothing back pain = OC	
27.4.87		c/s - bleeding. Healthy PV discharge = 1st R. bony tend Painful better but BP 90/50 Painful tender R. Dandelion 3/12 CP 102 ✓ Retrovate x 150 Dandelion 200	
21.6.87		① sided pain, esp = ST 1/2 Dysuria Pink discharge 1/57 Dandelion = OC PV - tender ② adnexa C. ended → c/s R. Dandelion 570mg x 9 1/10 Blood 400mg x 21 1/10 Dysuria 1/57 Better R. Dandelion x 6/12	
28/7/87		? UTI ? Pelvic infl. → Dipside	
		14 Cap. Cefem 500 9/11/87 T. F. Flagyl 400 6/11/87	

* In C.F. Column, which is for cases of certified incapacity only, practitioners should enter C for first certificate, and F for final certificate.

4/4/88
4.4.88 Dipside :- clear

DATE	*C *F	CLINICAL NOTES	DIAGNOSIS
19/10/83		Penicillin - co +	200ml
11 NOV 1983		Epiderm 30x	Necklace
		Inguinal fissure	Dermatitis
		Healed -	
22.11.83		U.K. I	Gulacian
		Penicillin 500	Colitis
17.1.84		① Sore throat	
		② Fungal infection	
		at - trichophyton rubrum	
		? microscopical	
		20 Penicillin 250mg 79 ml	
12 MAR 1984		Penicillin 250 & 28	
		Penicillin co	
6.6.84		3x21 Penicillin	EC102
		Med Exam for Soc. Wk.	1 wrapper
		Full Exam	
		Smear? challenge spots	
		At least 2 to multiple	
		drainage	
		At least a little dull -	
		1/2 excessive exudate	
		to have in some one for	
		Drainage & sugar - microscopy for	

* In C.F. Column, which is for cases of certified incapacity only, practitioners should enter C for first certificate, and F for final certificate.

FEMALE 5232-68-211791		SURNAME Martin		CHRISTIAN NAMES Audra	
ADDRESS 145 Canberry Cres. 1630 Crowston Cres.		Date of Birth 13/12/68			
DATE	*C *F	CLINICAL NOTES		DIAGNOSIS	
24.11.73.		Large celluloses & hernias		Parasites	
		Uterine: Prolapsed			
24.4.74		Keep calcium, see cords,			
		manual aspect defect,			
		→ ENT			
		Emmerson - M.S.S.			
		See in 750			
13.5.74		300 ne Timpneye and end			
2/4/75		nasal defect. -			
		refer ENT. Has seen			
		dentist			
29/6/78.		Vomiting - abdo. pain.			
		Hx. Has hernias			
		few years. long.			
		Mazda 2000,			

Dr. Dr. Wm. M. GARDINER

This person has been placed on your list in accordance with your acceptance and this card should be used until her medical record envelope is sent to you. It should then be placed in the envelope.

Date 31 DEC 1973

* In C.F. Column, which is for cases of certified incapacity only, practitioners should enter C for first certificate, and F for final certificate.

MEDICAL RECORD CARD **FORM E.C. 8a**
(Scotland)

(24.9.71) (E10950) Dd. No. 249803 206,000 11/71 I.&G.L.Ld. Gp. 259

DATE	^o / _o	CLINICAL NOTES	DIAGNOSIS
1987		Mass just as cold feeling (4 days at time) - Nil definite etc	
		Indofed 300 ml.	
		Prominent tendons @ heel.	
		Refer if this irritation becomes a problem.	
22/3/83		EW + flvrt	
		infltrn	
		Exfolium 500 x 18	
10 JUN 1987		Erythromycin 500 x 30.	Acne
		Indofed 300 ml.	
		Continued @ wrist.	
		Right 5th met.	
		Continue crpe support	
21/6/87		Go home alone for.	
		2 new courses	
		OPN and to feed... - 200 554	
		A - marking 1st + 1000	
		One 944	
25/8/83		Painful at elbow when	
		arm - over hand	
		get - 2000	
		Has good results	
		Also last week reports	
		→ now less reports	
		Report given 50	

* In C.F. Column, which is for cases of certified incapacity only, practitioners should enter C for first certificate, and F for final certificate.

DATE	°C °F	CLINICAL NOTES	DIAGNOSIS
		new red lesion see for description FPM PM	
7/6/69		PM. Already in AS under LPT - last seen about 1000. PV - under 1.5 mm. definitely with very early stage of 16	
17/7/89		Ch. C. 500 x 29 mm The 16 mm 400 mm + 16	
2/10/90		developmental 700 1600	

* In C.F. Column, which is for cases of certified incapacity only, practitioners should enter C for first certificate, and F for final certificate.

Health Promotion Data Capture - Bands 1,2,3

Health Promotion

Patient Name MUNA NAGIN Date of Birth 13/12/68
 Address _____ CHI _____
 Date 15/6/93

**Band 1
Information**Tick ONE Box
in each section**Screening
Result****Problem
Read Code****Procedure
Read Code****SMOKING**

Never Smoked ☐ 1371*
 Stopped Smoking ☐ 1377
 Trivial ☐ 1372*
 Light ☐ 1373*
 Moderate ☒ 1374*
 Heavy ☐ 1375*
 Very Heavy ☐ 1376*

Offered H.P. ☒ 6791*

**Band 2
Information**Tick ONE Box
in each section**Screening
Result****Problem
Read Code****Procedure
Read Code****BLOOD PRESSURE**BP Reading 120/70

BP Normal ☐ 2464*
 BP Borderline ☐ 2465*
 BP Raised ☐ 2466*
 BP Very High ☐ 2467*

Essential Hypertension ☐ G20..
 Secondary Hypertension ☐ G24..

**Band 2
Information**Tick ONE
in each section**CORONARY HEART DISEASE**

Ischaemic Heart Disease ☐
 History of Angina Pectoris ☐
 History of Myocardial Infarct <60 ☐
 History of Myocardial Infarct >60 ☐

STROKE

Cerebrovasc. Disease ☐
 History of CVA/Stroke ☐
 Puerp. Cerebrasc. Dis ☐

**Band 3
Information**Tick ONE
in each section**WEIGHT**Weight And 8.Height 5' 2"

Overweight ☐
 Obese ☐

Offered H.P. on Exercise ☐
 Offered H.P. on Diet ☐

Health Promotion Data Capture - Bands 1,2,3

Health Promotion Data

Patient Name	<u>ANITA NARIN</u>	Date of Birth	<u>13/12/68</u>
Address	_____		
CHI	<u>0026</u>		
Date:	<u>15/11/93</u>		

Band 3 Information	Tick ONE Box in each section	Screening Result	Problem Read Code	Procedure Read Code
--------------------	------------------------------	------------------	-------------------	---------------------

ALCOHOL

Teetotaler	☒	1361*		
Ex-heavy drinker	☐		136D*	
Ex-very heavy drinker	☐		136E*	
Trivial	☐	1362*		
Light	☐	1363*		
Moderate	☐	1364*		
Heavy	☐	1365*		
Very Heavy	☐	1366*		
Offered H.P. on Alcohol	☐			6792*

Band 3 Information	Tick ONE Box in each section	Screening Result	Problem Read Code	Procedure Read Code
--------------------	------------------------------	------------------	-------------------	---------------------

FAMILY HISTORY

Heart Disease < 60	☐	12C2*
Heart Disease > 60	☐	12C3*
CVA/Stroke	☐	12C4*

CDM Information

Tick ONE in each

ASTHMA

Extrinsic Asthma	☐
Intrinsic Asthma	☐
Asthma (other)	☐
Chronic Asthma Bronchitis	☐
Exercise Induced Asthma	☐
Asthma - Prophylactic Medication	☐
PFR recorded in last 12 months	☐
Date	<u> / / </u>
Asthma Hospital Admission	☐

CDM Information

Tick ONE in each

DIABETES

Diabetic on Oral Treatment	☐
Diabetic on Diet Only	☐
Diabetic on Insulin	☐

Follow-up in last year:

Attends Out-Patients	☐
Follow-Up Diabetic Assessment	☐
Date	<u> / / </u>

CLINICAL NOTES		National Health Service Number	
		Surname (Block Letters)	Forenames (Block Letters)
		Address Date of Birth	
		MARTIN AURORA 13.12.68	

Date	*	Clinical Notes	Diagnosis
11/3/03	NS	Letter to Aurora → report on relationship with daughter	
25/5/03		REPEAT DUE JAN 2002 REMINDER DUE AUG 2003	
2/6/04	N	1st Hep B by IM Darn	
9/6/04		DNA smear	
1/7/04	N	2nd Hep B by Darn	
		Cervical smear	
10/3/05		Chest infection post LRTI for amoxicillin 500mg (x7).	
19/3/05		3rd hep B inj. Bit late - had forgotten for bloods in 2 months	
1/9/05		Smoker - 20/20 weight 66kg UTD symptoms Rx Trimethoprim 100mg BD (PA)	BP 120/80
GPCS New App		Discussed contraception - IUCD might be the best option see family planning clinic.	

* This column has been provided for doctors to enter A, V or C at their discretion

FORM GP111F

PRINTED FOR ASTRON, B26862 7/02 (017302)

355 2095

[illegible]

* This column has been provided for doctors to enter A, V or C at their discretion

5/2000 204722

CLINICAL NOTES		National Health Service Number	
		Surname (Block Letters)	Forenames (Block Letters)
		a/unter	Andra
		Address	Date of Birth
			13.12.68
Date			
18/8/97	wks. NOSTOMIC 20 250 275 30		
19-8-97	Periods irreg. RU - Rnd		
	C. Meds contact Uterus		
	① adnexal pain HUS + c/s		
	R. Doppler 500mg x 21		
	RUyston pain x 28 "irido"		
20/3/98	Aspirin		
	A to Paracetamol 200 + 30 + more for		
	C/S - 10/11/98 + 10/1		
17/4/98	Sme - smear		
	Mtr Paracetamol 200 + 30		
28/5/98	Mtr Paracetamol 200 + 30 + more		
28/6/98	Mtr Paracetamol 200 + 30 + more		
5/8/98	Mtr Paracetamol 200 + 30 + more		
16/11/98	reg test for LAP about 2-3/12/98		
	60017/6/98 H/O RND RND		
	TOLIC ACID 5-7 28 COM		
18/3/99	as no chills. NOSTOMIC 20 250 275 30		
	TV H. Uterus. Frontal		
16/4/99	reg TT more diagnosed LAP confirmed		
	Wden 3 days		
	Wden 30 30 30 30 30 30		
	R. Mtr MVS sent for chd wh.		
	april		
23/7/99	vaginal wks. 2-3 wks (2-3 wks)		
	vulva Periods regular - 36 - just present		
	to wear for ad protection		

*This column has been provided for doctors to enter A, V or C at their discretion

FORM GP111F
355 2095

Date	
23/7/99	Podophyllin
27/9/99	" - to warts
30/7/99	Podophyllin to warts
3/9/99	" - -
9/9/00	Aborn on 24/9/99. Started doing psychotherapy Pam sent Anok from 1 Aug as he was concerned about her. (Matthew Thomas) Coun for 1 Aug
17/8/00	Reactive depression. - Many deaths in family - Lost baby @ 26/12 some time ago - Difficult past - childhood's home etc - 11yr old daughter i asthma Chat For Cipramine 20mg (x28) → Clin psych R/V 8/10.
21.08.00	Under Clinical Psychology
15/9/00	10/11/00
25/10/00	Doing well on citalopram much brighter sleeping better. Concentration.
30-7-01	Worried, irritable, arguing i partner → split up. Says she felt happy during day i citalopram. Says she felt better i citalopram R Paroxetine 20mg x28
30.8.01	Sleeping better. Still relationship dilemma. I am older father died -> grieving i drinking bouts R Paroxetine 20mg x28
11-10-01	Feeling better. Letting go. Rethinking work. Relationship finished

*This column has been provided for doctors to enter A, V or C at their discretion

20/11/01. Feeling v. much better
Paroxetine (x60)
R/V 4/10.

Printed by HMSO Scotland Dd 8456919 B/96 (138130)

MB

Date	
- 8 FEB 1995	8 (N) Rb. ⇒ N. m Rb
15 FEB 1995	SPONTANEOUS W/ T Rb
21.4.95	Letter to patient to come in re: Colly's medication
17/8/95	was told the last women cpts by G.U. - come off depo proven mcs about 6/yr mths - was on it 5 yrs AS-NM cpts mcs mcs was attending with cures mcs.
21.8.95	Ref: Gynaec W
18.4.96	boasting for sex. days ago since its pain (R) ant. (L) ant. R. Pains Painful 4/21 since stopping Depo-Provera FBC
13.6.96	Shin sensitive, R.F. 1.5 area
13.6.96	PCLT. (L) ant. burst
18.9.96	Prod. canal, white granules seen, mcs. Breastless mcs. Smoker 20-20/day R. Gynaec 28 Menstruation Due
11/4/97	HN ant. ant
11/4	man on 11/4 mcs mcs
5/4	2nd tender over lve. mcs mcs
P 88.5	low mcs but is unclear mcs mcs as blood mcs present before see mcs 27/3/97. advised mcs mcs. mcs mcs mcs
1/7/97	Thin, random mcs mcs A Fe 500 + 200 f mcs No ccs f FBC
13/8/97	FBC. SOU ++ blood (mcs) mcs mcs
13.8.97	11. 4/21 Smelly creamy discharge → 1.4.95

* This column has been provided for doctors to enter A, V or C at their discretion

13/8/97 LMP 2/8/97 - 9/8/97. -
mcs mcs
Rb - mcs mcs mcs mcs
AS - mcs mcs mcs mcs mcs mcs mcs mcs mcs mcs
PAIN - mcs mcs mcs mcs mcs mcs mcs mcs mcs mcs

		National Health Service Number	5282 1968 2 1791
SUMMARY OF IMPORTANT ILLNESSES AND INVESTIGATIONS	Surname (Block Letters)	Forenames (Block Letters)	
	MARTIN	AUDRA	
	Address		Date of Birth
	17 HILLBANK PLACE		13.12.68

Date	
13-5-75	Tonsillectomy + adenoidectomy
8-4-89	foetus delivery ♀
25-9-95	small ♂ ovarian cyst
24-12-98	mixed abortion.
	Summarized July 09.

[illegible]

IMMUNISATIONS AND SCREENING INVESTIGATIONS	National Health Service Number	5282 1968 2 1791	
	Surname (Block letters)	MARTIN	
	Forename (Block letters)	ANDRA	
	Address		Date of Birth
	17 HILLBANK PLACE		13.12.68

IMMUNISATIONS (insert Date and Batch Number where appropriate)

	Diphtheria	Tetanus	Pertussis	Polio	Measles	Rubella	MMR	BCG
Date								
Manufacturer & Batch No.								
Date								
Manufacturer & Batch No.								
Date								
Manufacturer & Batch No.								
Date								
Manufacturer & Batch No.								
Date								
Manufacturer & Batch No.								
Date								
Manufacturer & Batch No.								
Date								
Manufacturer & Batch No.								

ALLERGIES & HYPERSENSITIVITIES

	Influenza	Hep.B.	Typhoid	Cholera
Date				
Manufacturer & Batch No.				
Date				
Manufacturer & Batch No.				
Date				
Manufacturer & Batch No.				
Date				
Manufacturer & Batch No.				
Date				
Manufacturer & Batch No.				
Date				
Manufacturer & Batch No.				

IMMUNOLOGICAL STATUS				
	Tuberculin Test	Rubella Antibodies	HIV	Hep.B.
Date				
Result				
Date				
Result				
Date				
Result				

Form GP 111H

[illegible]

Page 269 of 417

		National Health Service Number		S282 1968 2 1791	
LONG TERM DRUG RECORD		Surname (Block Letters)		Forename(s) (Block Letters)	
		MARTIN		ANJRA	
		Address		Date of Birth	
		17 HILL BANK PLACE		13.12.68	
Allergies, Drug Reactions and Problems					
Drug	(1)	(2)	(3)	(4)	(5)
Strength/Form					
Quantity					
Dose and Frequency					
Date					
Review by Date					
Drug	(6)	(7)	(8)	(9)	(10)
Strength/Form					
Quantity					
Dose and Frequency					
Date					
Review by Date					

GP 1110
J1300903.066

Drug	(1)	(2)	(3)	(4)	(5)
Strength					
Quantity					
Dose and Frequency					
Date					
Review by Date					
Drug	(6)	(7)	(8)	(9)	(10)
Strength					
Quantity					
Dose and Frequency					
Date					
Review by Date					
Drug	(11)	(12)	(13)	(14)	(15)
Strength					
Quantity					
Dose and Frequency					
Date					
Review by Date					

GP111-0
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"SPECIAL REQUESTS"

Date of request 26/5/05

Patient's name Audra Marini

Address 17 Hillbank Place

..... Dundee

DOB/CHI 13/12/68 0024

Item(s) requested Paroxetine 20mg

.....

.....

Item prescribed yes/no

If no, is patient to make appointment? yes/no

To be added to repeats yes/no

Prescribing doctor's signature 

Date 26/5

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MICROBIOLOGY

DMR 320

Tayside Clinical Laboratory Services

BACTERIOLOGY

01382 632559

Name : MARTIN, Audra

CHI No : 1312680024

DoB : 13 Dec 1968

Post Code: DD3 7BE

Sex: F

Clinician: - NOT GIVEN

Tay Court Surgery

05B207264 Date/Time of Specimen: 01 Sep 2005
DIPSLIDE-Unspecified

Dipslide full of urine

	INIT
FILE	
REPEAT/DATE	
SCRIPT DONE	
APPOINTMENT	
NOTES	
NURSE	

5 SEP 2005

Date of Report: 02 Sep 2005
TCS NG

AUTH:

REPORT RECEIVED

DOCTOR'S INITIALS

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Filename: 89.pdf
Extension:.tif
Pages:

08/04/0810:14

NHS Tayside, KINGS CROSS HOSPITAL: Radiology Report		Page 1 of 1
MARTIN, AUDRA		DoB : 13/12/1968
17 HILLBANK PL, DUNDEE, DD3 7BE		CRIS No. : 272000
Ref. Locn. :	GENERAL PRACTITIONER	CHI No. : 13 12 68 0024
Referrer :	DR C FLAVAHAN	
VERIFIED Verified By : Dr JAMES D BEGG 03/04/08 Typed By : MARP 03/04/08		
CERVICAL SPINE. 24/03/2008.		
There is some posterior disc space narrowing at the C3/4/5/6 levels, but the vertebral bodies and disc spaces are otherwise preserved. The AP film shows some neurocentral joint lipping at C3/4/5. The findings are those of early degenerative disc changes. There is also some degenerative change in the atlanto-axial joint on the lateral view.		
Event Number : E-2733174		Examination Date : 24/03/08
Copy To : ,		Attendance Number : 1
Examinations : XR Cervical spine		

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Filename: 88.pdf
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Pages:

BIOCHEMICAL MEDICINE

DMR 374

Tayside Clinical Laboratory Services

Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: MARTIN

Audra

Sex: F

PID:

1312680024

DoB: 13 Dec 1968

Lab No: C085007954

Tay Court Surgery

Clinician: Dr M. BADENHORST

TCS

BADM1G

GLUCOSE (preserved tube) 4.8 mmol/L (3.3-5.8)

04/06/0813:06

Lab.Comments:

Sample is blood unless
otherwise statedSample Date/Time
02 Jun 2008

Clin.Details: LOW and thirst

Request Entered: 02 Jun 2008 15:46

Report Printed: 02 Jun 2008 16:54

REPORT RECEIVED

DOCTOR'S INITIALS

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Filename: 87.pdf
Extension: .tif
Pages:



17/11/0810:37

Dr M Badenhorst
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

Acute Services Division
Women's & Child's Health Clinical Group
Ninewells Hospital & Medical School
Ward 37/38
DUNDEE
DD1 9SY
Contact: Lyndsey Neillie
Telephone: 01382 632305
lyndsey.neillie@nhs.net
Reference: LJM / CMcK
10/11/2008

Dear Dr Badenhorst

Patient Details: CHI Number 1312680024
Unit Number 1312680024
Name Audra Martin
Date of Birth 13/12/1968
Address 17 Hillbank Pl, Dundee
DD3 7BE

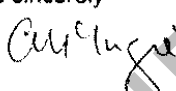
Your patient was seen at the clinic on 16/10/2008 and at this visit, Cold coagulation treatment was performed.

No smear was taken.

A diagnostic biopsy of the cervix was taken and the result was CIN3.

The management plan for your patient is that a follow-up smear needs to be done in 6 months time. Your patient has been asked to return to the clinic for a repeat smear. An appointment has been arranged.

Yours sincerely


Dr C McKenzie
Consultant Obstetrician & Gynaecologist

copy to: Dr Gael Reid
Cytology Department
Ninewells Hospital

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08-July-2026 ACOYLE
Additional: Scanned Document

Filename: 86.pdf
Extension: .tif
Pages:



Specialist Services Group
Department of Surgical Neurology
Acute Services Division
South Block, Level 6
Ninewells Hospital
DUNDEE
DD1 9SY
Telephone Number: 01382 425712
Fax Number: 01382 496202
www.nhstayside.scot.nhs.uk

04/12/0810:18

Mr Freddie Warden
Extended Scope Practitioner
Community Therapy Services
Kings Cross Health & Community Care Centre
Hospital Street
DUNDEE
DD3 8EA

Date
Clinic
Your Ref
Our Ref
Enquiries to

2 December 2008
2 December 2008

MSE/SG 13 12 68 0024
425712 (direct line)

Dear Mr Warden

Audra Martin, 17 Hillbank Place, Dundee DD3 7BE

Thank you indeed for referring this lady who has been complaining of right sided brachialgia since February 2008. This has been getting worse and has not got any better. She clearly has root tension signs and this is disturbing her driving and she is currently not able to work. Her MRI scan demonstrated a C5/6 disc bulge compressing the left C6 nerve root with narrowing of the exit foramen. There is no spinal cord signal.

I have discussed with her the options available for her which are either to continue with conservative treatment or alternatively to consider anterior cervical microdiscectomy and disc replacement. The idea would be to decompress the nerve and reduce the stress factors in the adjacent discs which are already showing some evidence of degeneration. I have explained to her there is an 80% chance that such an operation will help her pain and protect the nerve. There is however a 2% risk of infection, a small risk of bleeding, hoarseness of the voice due to stretching the laryngeal nerve and a small risk of nerve injury leading to weakness in the arms and legs and loss of bladder control.

She is not sure obviously about what she wants to do therefore I have advised her to think about her options and perhaps consult with her General Practitioner and either her General Practitioner or herself can get back to me regarding whether or not she wants to go on the waiting list.

With kind regards.

Yours sincerely

M.S. ELJAMEL, MBBCh., MD., FRCS., IFRCS., (SN)
CONSULTANT NEUROSURGEON

Dictated but not read

c.c. Dr R. Anderson, Tay Court Surgery, 50 South Tay Street, Dundee



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Pages:

18/03/0911:08



Specialist Services Group
Department of Surgical Neurology
Acute Services Division
South Block, Level 6
Ninewells Hospital
DUNDEE
DD1 9SY
Telephone Number: 01382 425712
Fax Number: 01382 496202
www.nhstayside.scot.nhs.uk

Ms Audra Martin
17 Hillbank Place
DUNDEE
DD3 7BE

Date 16 March 2009

Your Ref
Our Ref MSE/SG 13 12 68 0024
Enquiries to 425712 (direct line)

Dear Ms Martin

You may recall that we had discussed the option of surgery back in December 2008 and you were going to telephone my Secretary to let her know your decision whether or not you wanted to go ahead with surgery. I would therefore be very grateful if you could let her know one way or another whether or not you have made a decision so that we can close your file.

With kind regards

Yours sincerely

M.S. ELJAMEL, MBBCh., MD., FRCS., IFRCS., (SN)
CONSULTANT NEUROSURGEON

Dictated but not read

c.c. Dr R Andersen, Tay Court Surgery, 50 South Tay Street, Dundee



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Additional:Scanned Document

Filename: 84.pdf
Extension:.tif
Pages:

26/05/0910:44



Dr M Badenhorst
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

Acute Services Division
Women's & Child's Health Clinical Group
Ninewells Hospital & Medical School
Ward 37/38
DUNDEE
DD1 9SY
Contact: Lyndsey Neillie
Telephone: 01382 632305
lyndsey.neillie@nhs.net
Reference: LJN / CMcK
22/05/2009

Dear Dr Badenhorst

Patient Details: CHI Number 1312680024
Unit Number 1312680024
Name Audra Martin
Date of Birth 13/12/1968
Address 17 Hillbank Pl, Dundee
DD3 7BE

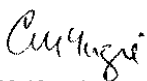
Your patient was seen at the clinic on 20/04/2009 and at this visit, no treatment was undertaken.

A smear was taken and the result was Negative (normal smear).

Your patient has been treated for High Grade CIN and has now been discharged from the colposcopy clinic. I recommend that a follow up smear should be taken in 6 months time.

Your patient has been advised of the results and that she will be invited to attend for her next smear test. Your patient will therefore appear on your Recommended Call List (RCL) on SCCRS in due course.

Yours sincerely


Dr C McKenzie
Consultant Obstetrician & Gynaecologist

copy to:

Scanned Document
08-July-2026 ACOYLE
Additional: Scanned Document

Filename: 83.pdf
Extension: .tif
Pages:

"SPECIAL REQUESTS"

Date of request 26/11/09

Patient's name Anna Martin

Address 17 Hillbank Place
..... Dundee

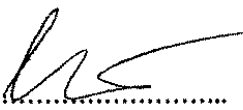
DOB/CHI 13/12/68

Item(s) requested Sertraline 50mg
.....
.....

Item prescribed yes/no

If no, is patient to make appointment? yes/no Script issued for
sertraline on 17/11/09

To be added to repeats yes/no

Prescribing doctor's signature 

Date 26/11/09

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08-July-2026 ACOYLE
Additional:Scanned Document

Filename: 79.pdf
Extension:.tif
Pages:

electronic Notification of Cervical Cytology Results Service	
New Result	
CHI Number	1312680024
Name	MARTIN, AUDRA
Date Of Birth	13/ 12/ 1968
GMC Code of Registered GP	2813460
Practice Code	T11058
Smear Taker	Catherine Duncan
Reporting Location	Tayside Cervical
SCCRS ID	
Laboratory ID	
Smear Taken Date	
Result	
Report Comments	
Recommended Management	
Recall Date	

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08-July-2026 ACOYLE
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Filename: 80.pdf
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Pages:

electronic Notification of Cervical Cytology Results Service

New Result

CHI Number	1312680024
Name	MARTIN, AUDRA
Date Of Birth	13/ 12/ 1968
GMC Code of Registered GP	2813460
Practice Code	T11058

Smear Taker	Catherine Duncan
Reporting Location	Tayside Cervical

SCCRS ID
Laboratory ID
Smear Taken Date
Result
Report Comments
Recommended Management
Recall Date



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08-July-2026 ACOYLE
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Filename: 82.pdf
Extension: .tif
Pages:

Sexual Health Clinic
Tayside Sexual & Reproductive Health
Dundee CHP
South Block, Level 7
Ninewells Hospital & Medical School
DUNDEE, DD1 9SY
Direct Dial (Clinicians Only): 01382 425533/740497
www.nhstayside.scot.nhs.uk



Dr Flavahan
Taycourt Surgery
60 South Tay Street
DUNDEE

Date 19 May 2010
Date of Clinic 07 May 2010

Our Ref:

Enquiries to Val Machir/Marian Walmsley, Secretary
Direct Line 01382 425533/740497
email: val.machir@nhs.net/mwalmsley@nhs.net

Dear Flavahan

AUDRA MARTIN (131268) 17 HILLBANK PLACE DUNDEE

This patient attended the Sexual Health Clinic today to discuss contraception.

Cerazette, progestogen only pill, was issued.

She will attend your surgery for future supplies.

Yours sincerely,

A handwritten signature in black ink, appearing to read "Sheena Winter".

Sheena Winter
Senior Sexual Health Nurse.



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Filename: 78.pdf
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Tayside Clinical Laboratory Services Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: MARTIN Audra Sex: F PID: 1312680024 DoB: 13 Dec 1968
Lab No: C121276460
Tay Court Surgery Clinician: Nurse C. DUNCAN TCS DUNCAN

GLUCOSE (preserved tube) 4.5 mmol/L (3.3-5.8)
TOTAL CHOLESTEROL 6.43 > mmol/L (0.00-5.00)
HDL-CHOLESTEROL 0.96 mmol/L (0.60-2.50)
TOTAL CHOL/HDL-CHOL 6.60 .

Lab.Comments: **Please note changes to many reference ranges and methods, effective 28th Feb. Please interpret serial results with caution.**
Sample is blood unless otherwise stated
Sample Date/Time
16 Mar 2012 12:11

Clin.Details: hearty lives

Request Entered: 16 Mar 2012 15:32 Report Printed: 16 Mar 2012 16:29

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08-July-2026 ACOYLE
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Filename: 77.pdf
Extension: .tif
Pages:

electronic Notification of Cervical Cytology Results Service	
New Result	
CHI Number	1312680024
Name	MARTIN, AUDRA
Date Of Birth	13/ 12/ 1968
GMC Code of Registered GP	2813460
Practice Code	T11058
Smear Taker	Pauline MacKenzie
Reporting Location	Tayside Cervical
SCCRS ID	
Laboratory ID	
Smear Taken Date	
Result	
Report Comments	
Recommended Management	
Recall Date	

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08-July-2026 ACOYLE
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Filename: 81.pdf
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Pages:

BIOCHEMICAL MEDICINE

Tayside Clinical Laboratory Services

Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: MARTIN

Audra

Sex: F PID: 1312680024

DoB: 13 Dec 1968

Tay Court Surgery

Clinician: Dr B.J. HOLLINS

Lab No: C116295210

TCS HOLB1G

SODIUM	140	mmol/L	(	135-147	)
POTASSIUM	4.7	mmol/L	(	3.5-5.0	)
UREA	2.9 <	mmol/L	(	3.3-6.6	)
CREATININE	59	umol/L	(	44-80	)
ESTIMATED GFR	GT60	mL/min			
CKD Stage	IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA				

Lab.Comments:

Sample is blood unless
otherwise stated

Sample Date/Time
08 Feb 2011

Clin.Details: on gabapentin

Request Entered: 08 Feb 2011 15:56

Report Printed: 08 Feb 2011 17:06

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Hospital use only	Clinic	Day Date	Time	Hospital No.
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**Transport
required?**

REFERRAL LETTER

MEDICAL IN CONFIDENCE

REFERRAL TO

Chiropody/PodiatryR1
TAY General Referral

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

West Gate Health Centre
Charleston Drive
Dundee
DD2 4AD

— **Hospital and hospital
address**

Hospital unit no.

T103B

Email address

-

**Date of Referral
(set by referrer)**

25-Nov-2013

Armed Forces

Personnel,

**Immediate Families &
Veterans**

Impairment(s)

**Date referral was
submitted**

26-Nov-2013

On active service

Condition related to
service

Learning

Visual

Urgency of referral

Routine

Immediate family
member

Hearing

Miscellaneous

Requires support of a translator

PATIENT DETAILS

Surname MARTIN

Forename(s) AUDRA

Title MISS

Sex Female

Date of birth 13-Dec-1968

CHI no. 1312680024

Patient's address

17 HILLBANK PL
DUNDEE
DD3 7BE

Contact number(s)

Voice: 07541917144

REGISTERED GP DETAILS		Practice address	
Name	Dr Margaretha Badenhorst	50 SOUTH TAY STREET DUNDEE	
GMC code	2813460 GP code 70572		
Practice name	Taycourt Surgery		
Practice code	11058	Contact number(s)	
		Voice: 01382228228	

REFERRING PRACTITIONER DETAILS		Practice address	
Name	Dr Ruth Stevenson	50 SOUTH TAY STREET DUNDEE	
GMC code	4700579 GP code 71366		
Practice name	Taycourt Surgery		
Practice code	11058	Contact number(s)	
		Voice: 01382228228	

Periods of Future Unavailability	None provided.
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CLINICAL INFORMATION

History of presenting complaint / examination findings / investigation results**Presenting complaint**

Description: Ingrowing toe nail left big toe

Comment: This lady has been aware of a longstanding problem with athlete's foot and pain affecting her right big toe. On examination she has marked ingrowing of both sides of the right big toe nail and the 4th toe was also affected. I have commenced her on Terbinafine to help with her athlete's foot symptoms but I am concerned that the big toe nail may have to be removed altogether and would be grateful for your opinion.

Examinations and Investigations

Moderate smoker - 10-19 cigs/d: Smoking status on date of event: Smoker. 2013-08-08
 NOTES: rolls own cigs.
 Teetotaler: Drinking status on eventdate: Life teetotaler. 2012-02-28
 Enjoys light exercise: 2012-03-16

Most recent height, weight, BMI and Blood Pressure

Height: 1.62 m Recorded Date: None provided
 Weight: 75 Kg Recorded Date: None provided
 BMI: 28.5 Kg/m² Recorded Date: None provided
 Blood Pressure: 125/76 mmHg Recorded Date: None provided

Reason for referral

Care type requested: Out Patient
 Expected outcome: Not Specified

Past medical history**Pre-existing conditions**

Description	Laterality	Modifier	Extension	Date of onset
Premature membrane rupture NOS	-	-	-	24-Dec-1998
Ovarian cysts	-	-	small ovarian cyst noted	25-Sep-1995
Forceps delivery	-	-	-	08-Apr-1989

Past procedures

<u>Description</u>	<u>Laterality</u>	<u>Modifier</u>	<u>Date performed</u>
Cold coagulation of lesion of cervix	-	-	10-Nov-2008
Tonsillectomy	-	-	13-May-1975

Current and recent medication**Current repeat medication**

<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Sertraline 100mg tablets	74051020	tablet	1 TABLET ONCE A DAY	-	19- Aug- 2013	-
Gabapentin 300mg capsules	68253020	capsule	TAKE 4 TABS DAILY	-	13- Nov- 2008	-
Tramadol 50mg capsules	75786020	capsule	TAKE 1 OR 2 UP TO FOUR TIMES A DAY	-	02- Nov- 2010	-
Amitriptyline 25mg tablets	58950020	tablet	TAKE ONE AT NIGHT	-	13- Nov- 2008	-

Recent acute medication (last 30 days)

<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Terbinafine 250mg tablets	74165020	tablet	1 TABLET ONCE A DAY	-	04- Nov- 2013	-

Clinical warnings**Additional relevant information****Administrative information**

Referred By:Resident GP

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

THIRD PARTY COPY

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Pages:

NHS Tayside: Clinical Report - Kings Cross Hospital		Page 1 of 1
MARTIN, AUDRA 17 HILLBANK PL, DUNDEE, DD3 7BE Ref. Locn. : GENERAL PRACTITIONER Referrer : DR RUTH STEVENSON		DoB : 13/12/1968 Hosp. No. : CRIS No. : 272000 CHI No. : 1312680024
VERIFIED Verified By : Dr RCP CAMERON 11/02/14 Typed By : SCOC 11/02/14		
Clinical History : Fall 11/2013. Severe pain and ROM and sciatica Sx worse on R side. Some paraesthesia. Assess for vertebral pathology ? fracture ENTERED BY: Ruth Stevenson (Medical) BLEEP: 01382 880900		
XR Lumbar spine : It is difficult to exclude spondylolysis, but appearances are likely due to severe degenerative hyperostosis of the facet joints at L4/5 level with minor forward listhesis of L4. CT would clarify further if clinically indicated. Vertebral body heights are well-maintained with no compression fracture shown.		
Event Number : E-4336794 Copy To : Examinations : XR Lumbar spine		Examination Date : 10/02/14 Attendance Number : 2

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Hospital use only	Clinic	Day Date	Time	Hospital No.
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Transport
required?

REFERRAL LETTER

MEDICAL IN
CONFIDENCE

REFERRAL TO

Anaesthetics - Pain Clinic C3A
TAY General Referral

Consultant / receiving
practitioner and/or
specialty clinic

Ninewells Hospital
Dundee
DD1 9SY

Hospital and hospital
address

Hospital unit no.

T101H

Email address

Date of Referral
(set by referrer)

13-Mar-2014

Armed Forces

Personnel,
Immediate Families &
Veterans

Impairment(s)

Date referral was
submitted

17-Mar-2014

On active service

Condition related to

Learning

Urgency of referral

Routine

service

Visual

Immediate family

Hearing

member

Miscellaneous

Requires support of a translator

PATIENT DETAILS

Surname MARTIN

Forename(s) AUDRA

Title MISS

Sex Female

Date of birth 13-Dec-1968

CHI no. 1312680024

Patient's address

17 HILLBANK PL
DUNDEE
DD3 7BE

Contact number(s)

Voice: 07541917144

REGISTERED GP DETAILS		Practice address	
Name	Dr Margaretha Badenhorst		50 SOUTH TAY STREET DUNDEE
GMC code	2813460	GP code 70572	
Practice name	Taycourt Surgery		
Practice code	11058		
			Contact number(s)
			Voice: 01382228228

REFERRING PRACTITIONER DETAILS		Practice address	
Name	Dr Ruth Stevenson		50 SOUTH TAY STREET DUNDEE
GMC code	4700579	GP code 71366	
Practice name	Taycourt Surgery		
Practice code	11058		
			Contact number(s)
			Voice: 01382228228

Periods of Future Unavailability	None provided.
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CLINICAL INFORMATION

History of presenting complaint / examination findings / investigation results**Presenting complaint**

Description: L4/5 severe degenerative hyperostosis

Comment: This lady is known to have longstanding brachalgia associated with a C5/6 disc bulge with compression of the nerve. She was reviewed by Neurosurgery a long time ago and was given the option of an anterior cervical microdiscectomy with disc replacement but due to the risk of permanent nerve problems, she did not wish to have the surgical procedure and usually manages her pain symptoms associated with this reasonably well. Unfortunately to complicate things she has had lumbar back pain which has now started to affect her mobility. X-ray shows severe degenerative hyperostosis of the facet joints at L4/5 and I have referred her for CT scan as recommended as she is having right sided sciatica symptoms. As detailed below she is on high doses of painkillers and she says this is not controlling her pain. At present she is appealing against a decision for fitness to work. I am not keen to go down the Morphine route with her but would be grateful for your opinion with respect to her pain and alternative analgesia.

Examinations and Investigations

Moderate smoker - 10-19 cigs/d:	Smoking status on date of event: Smoker.	2013-08-08
	NOTES: rolls own cigs.	
Teetotaler:	Drinking status on eventdate: Life teetotaler.	2012-02-28
Enjoys light exercise:		2012-03-16

Most recent height, weight, BMI and Blood Pressure

Height:	1.62 m	Recorded Date: None provided
Weight:	75 Kg	Recorded Date: None provided
BMI:	28.5 Kg/m ²	Recorded Date: None provided
Blood Pressure:	125/76 mmHg	Recorded Date: None provided

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history**Pre-existing conditions**

<u>Description</u>	<u>Laterality</u>	<u>Modifier</u>	<u>Extension</u>	<u>Date of</u>
--------------------	-------------------	-----------------	------------------	----------------

Premature membrane rupture NOS	-	-	-	<u>onset</u> 24-Dec-1998
Ovarian cysts	-	-	small ovarian cyst noted	25-Sep-1995
Forceps delivery	-	-	-	08-Apr-1989

Past procedures

<u>Description</u>	<u>Laterality</u>	<u>Modifier</u>	<u>Date performed</u>
Cold coagulation of lesion of cervix	-	-	10-Nov-2008
Tonsillectomy	-	-	13-May-1975

Current and recent medication**Current repeat medication**

<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Gabapentin 300mg capsules	68253020	capsule	TAKE 4 TABS 3 TIMES DAILY	-	13-Nov-2008	-
Tramadol 50mg capsules	75786020	capsule	TAKE 1 OR 2 UP TO FOUR TIMES A DAY	-	02-Nov-2010	-
Sertraline 100mg tablets	74051020	tablet	1 TABLET ONCE A DAY	-	19-Aug-2013	-
Amitriptyline 25mg tablets	58950020	tablet	TAKE ONE AT NIGHT	-	13-Nov-2008	-

Recent acute medication (last 30 days)

<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Cerazette 75microgram tablets (Merck Sharp & Dohme Ltd)	81171020	tablet	TAKE ONE DAILY	-	13-Mar-2014	-
Gabapentin	68253020	capsule	TAKE 4	-	13-	-

300mg
capsules

TABS
DAILY

Nov-
2008

Clinical warnings

Additional relevant information
Administrative information

Referred By:Resident GP

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

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08-July-2026 ACOYLE
Additional:Scanned Document

Filename: 73.pdf
Extension:.tif
Pages:

NHS Tayside: Clinical Report - Ninewells Hospital		Page 1 of 2
MARTIN, AUDRA 17 HILLBANK PL, DUNDEE, DD3 7BE Ref. Locn.: GENERAL PRACTITIONER Referrer: DR RUTH STEVENSON		DoB: 13/12/1968 Hosp. No.: CRIS No.: 272000 CHI No.: 1312680024
VERIFIED	Verified By: DR I ZEALLEY 28/03/14 Typed By: NICL 28/03/14	
Clinical History : Patient has had lumbar back pain affecting L4/L5 with R sided sciatica Sx for last 4 months. Mobility affected. Reasonable power R side. On marked analgesic regime with little effect. XRAY lumbar spine has shown severe degenerative hyperostosis of L4/L5 facet joint. Radiologist RCP Cameron has recommended CT for further investigation. As she has nerve root Sx and mobility issues I am requesting MRI to assess the nerve root to assess for compression. ENTERED BY: Ruth Stevenson (Medical) BLEEP: 01382 880900		
Event Number: E-4358868 Copy To Examinations: MRI Spine lumbar & sacral		Examination Date: 25/03/14 Attendance Number: 1

NHS Tayside: Clinical Report - Ninewells Hospital		Page 2 of 2
MARTIN, AUDRA 17 HILLBANK PL, DUNDEE, DD3 7BE Ref. Locn.: GENERAL PRACTITIONER Referrer: DR RUTH STEVENSON		DoB: 13/12/1968 Hosp. No.: CRIS No: 272000 CHI No.: 1312680024
MRI Spine lumbar & sacral : At L4/5 there is a degenerate disc exhibiting a broad-based, predominately central, posterior bulge. There is, however, no obvious MR evidence of nerve root impingement.		
Event Number: E-4358868 Copy To: Examinations: MRI Spine lumbar & sacral		Examination Date: 25/03/14 Attendance Number: 1

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Tayside Clinical Laboratory Services			Telephone 01738 473223 (PRI) 01382 632602 (NW)		
Name: MARTIN	Audra	Sex: F	PID: 1312680024	DoB: 13 Dec 1968	
Tay Court Surgery		Clinician: Dr Ruth STEVENSON		Lab No: C143030121	
				TCS	STERIG
SODIUM	141	mmol/L	(	133-146	)
POTASSIUM	4.8	mmol/L	(	3.5-5.3	)
UREA	3.0	mmol/L	(	2.5-7.8	)
CREATININE	55	umol/L	(	44-80	)
ESTIMATED GFR	GT60	mL/min			
CKD Stage	IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA				
ALT	21	U/L	(	5-55	)
BILIRUBINS	6	umol/L	(	0-21	)
ALKALINE PHOSPHATASE	82	U/L	(	30-130	)
ALBUMIN	36	g/L	(	35-50	)
CALCIUM	2.15	mmol/L	(	2.10-2.55	)
CALCIUM (CORRECTED)	2.19	mmol/L	(	2.10-2.55	)
GLUCOSE (preserved tube)	5.1	mmol/L	(	3.3-5.8	)
TSH	1.30	mU/L	(	0.4-4.0	)
TOTAL CHOLESTEROL	5.55 >	mmol/L	(	0.00-5.00	)
Lab.Comments:			Sample is blood unless otherwise stated		
			Sample Date/Time		
			16 May 2014 11:04		
Clin.Details: Bilateral fluid retention			Page 1 of 2		
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Name: MARTIN Audra Sex: F PID: 1312680024 DoB: 13 Dec 1968
Lab No: C143030121
Tay Court Surgery Clinician: Dr Ruth STEVENSON TCS STERIG

HDL-CHOLESTEROL 0.95 mmol/L (0.60-2.50)
TOTAL CHOL/HDL-CHOL 5.80

Lab.Comments:

Sample is blood unless
otherwise statedSample Date/Time
16 May 2014 11:04-----
Clin.Details: Bilateral fluid retentionPage 2 of 2

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Name: MARTIN Audra Sex: F PID: 1312680024 DoB: 13 Dec 1968
Lab No: H143030121
Tay Court Surgery Clinician: Dr Ruth STEVENSON TCS STERIG

HGB	124	g/L	(120-160)	WBC	10.0	x10 ⁹ /L	(4.0-11.0)
RBC	3.55	L x10 ¹² /L	(3.8-4.8)	NE#	5.0	x10 ⁹ /L	(2.0-7.5)
HCT	0.394		(0.37-0.47)	LY#	4.2	H x10 ⁹ /L	(1.5-4.0)
MCV	111.0	H fl	(85-105)	MO#	0.6	x10 ⁹ /L	(0.2-0.8)
MCH	34.9	H pg	(27-32)	EO#	0.16	x10 ⁹ /L	(0.0-0.4)
MCC	314	L g/L	(320-360)	BA#	0.1	x10 ⁹ /L	(0.0-0.1)
				PLT	429	H x10 ⁹ /L	(150-400)

Film Report: Cells as counted with no significant morphological abnormality. The count may reflect co-morbidity. Please repeat in a few weeks to ensure resolution of changes. Sudhir TAURO, Consultant Haematologist.

Lab.Comments: Sample is blood unless otherwise stated
Sample Date/Time
16 May 2014 11:04

Clin.Details: Bilateral fluid retention

Request Entered: 16 May 2014 15:54 Report Printed: 16 May 2014 20:38

Waiting for rep