

Hospital use only	Clinic	Day Date	Time	Hospital No.
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REFERRAL LETTER
 MEDICAL IN CONFIDENCE
 GGC Lesion

Additional Support Needs:
No known ASN requirements

REFERRAL TO	
Dermatology - Lesion GGC Lesion	— Consultant / receiving practitioner and/or specialty clinic
Queen Elizabeth University Hospital 1345 Govan Road Glasgow G51 4TF	— Hospital and hospital address
	Hospital location code. G405H
	Email address -
Urgency of referral Routine	Date of referral 05-Sep-2025
	Date sent 09-Sep-2025

PATIENT DETAILS		Patient's address	
Surname McGowan		359 Peat Road	
Forename(s) Frances		GLASGOW	
Title Miss		G53 6SE	
Sex Female			Contact number(s)
Date of birth 19-Jan-1969			Voice: 07925908346
CHI no. 1901696308			
Area of Residence -			

101037568849Q Unique Care Pathway Number: 101037568849Q

REGISTERED GP DETAILS		Practice address	
Name Dr Jimmy Khouly		Pollok Health Centre	
GMC code 6128718	GP code 00060	21 Cowglen Road	
Practice name The Silver Burn Medical Practice (18964)		Glasgow	
Practice code 52400		G53 6EQ	
			Contact number(s)
			Voice: 0141 531 6870
			E-mail: ggc.gp52400clinical@nhs.scot

REFERRING GP DETAILS		Practice address	
Name Dr. Jimmy Khouly		Pollok Health Centre	
GMC code 6128718	GP code 00060	21 Cowglen Road	
Practice name The Silver Burn Medical Practice (52400)		Glasgow	
Practice code 52400		G53 6EQ	
			Contact number(s)
			Voice: 0141 531 6870

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CLINICAL INFORMATION**History of presenting complaint****Presenting complaint**

Description: Other

Comment: ? NODULAR AMYLOIDOSIS

Frances is a 56 year old lady with a h/o amyloidosis.

She presented with a several year h/o these multiple small lesions of various sizes all over her body. It is mainly along her arms, legs and shoulders, they seem to be pink or natural skin colour. They itch to the point of scratching and break the skin. She does have mgus and this was diagnosed through Haematology.

I wonder whether these multiple nodular lesions may represent a manifestation for amyloidosis and might be nodular amyloidosis.

Your guidance would be kindly appreciated.

Thank you for your time.

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history**Pre-existing conditions** (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Monoclonal gammopathy of uncertain significance	IgG kappa	19-Mar-2025	19-Mar-2025
Osteoarthritis	mild oa l knee	31-Oct-2023	31-Oct-2023
Phlebitis and thrombophlebitis	-	09-May-2022	09-May-2022
Chest pain	musculoskeletal	24-Feb-2020	24-Feb-2020
Plantar fasciitis	-	09-Mar-2017	09-Mar-2017
Impaired fasting glycaemia	-	15-Jul-2015	15-Jul-2015
Hypothyroidism NOS	-	03-Sep-2007	03-Sep-2007

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Ultrasound guided foam sclerotherapy for varicose vein leg (Left)	07-Nov-2024	07-Nov-2024
Injection of steroid for local action NEC	09-Dec-2016	09-Dec-2016

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Menthol In Aqueous Cream 0.5 %	500	500 GRAM	APPLY TWICE A DAY	-	21-Aug-2025	28-Aug-2025
Diclofenac Diethylammonium Gel 2.32 %	100	100 gram	APPLY 2-3 TIMES DAILY	-	06-Feb-2024	02-Jun-2025
Propranolol Hydrochloride Tablets 40 mg	84	84 TABLET	ONE TO BE TAKEN THREE TIMES A DAY	-	31-Mar-2022	05-Aug-2025
Sertraline Hydrochloride Tablets 50 mg	56	56 TABLET	ONE TO BE TAKEN EACH DAY	-	17-Jan-2022	25-Aug-2025
Kliovance Tablets	84	84 TABLET	ONE TO BE TAKEN EACH DAY	-	12-Aug-2021	25-Aug-2025
Sertraline Hydrochloride Tablets 100 mg	56	56 TABLET	ONE TO BE TAKEN EACH DAY	-	27-Feb-2020	25-Aug-2025
Sumatriptan Succinate Tablets 100 mg	6	6 TABLET	ONE TO BE TAKEN AT ONSET OF MIGRAINE; DOSE MAY BE REPEATED AT LEAST TWO HOURS LATER IF ATTACK RECURS	-	10-Oct-2017	20-Jun-2025

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Levothyroxine Sodium Tablets 100 micrograms	56	56 TABS	1 Tab Daily	-	16-Sep- 2011	05-Aug- 2025
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Recent medication (Any medication issued within last 90 days not shown above)

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Cetirizine Hydrochloride Tablets 10 mg	28	28 tablet	1 Tab At night	-	21-Aug- 2025	21-Aug- 2025
Qv Cream	500	500 gram	APPLY TWICE A DAY	-	13-Aug- 2025	13-Aug- 2025
Fexofenadine Hydrochloride Tablets 120 mg	30	30 tablet	ONE TAB DAILY	-	13-Aug- 2025	21-Aug- 2025
Qv Gentle Wash	500	500 ml	USE AS SOAP SUBSTITUTE	-	13-Aug- 2025	13-Aug- 2025

Blood Pressure

<u>Date Recorded</u>	<u>Systolic</u>	<u>Diastolic</u>
28-Nov-2023	126	85
07-Feb-2023	127	74
15-Jun-2022	110	71
22-Jan-2020	130	80
15-Nov-2019	124	83

Body Measurements

<u>Date Recorded</u>	<u>Height</u>	<u>Weight</u>	<u>BMI</u>
28-Nov-2023	-	73	29.24
11-Jun-2010	158	56	-

Lifestyle Risks and Alerts / Examinations and Investigations

<u>Description/Question</u>	<u>Result/Comment</u>	<u>Date</u>
Non-smoker :	cough 1 wk. fever resolved. no soboe. slilt wheeze whnelying down. green spit. upper back ain when walking around. sore ears and throat resoiving, sounds wheezy. for FTF.	01-Nov- 2022
Non-smoker :	Cough for 3 weeks, feels SOB with it, sore upper back - took diclofenac for it. No fevers. Bringing up green catarrh, no runny nose/sore throat etc.	06-Dec- 2018
Ex smoker:		05-Feb- 2018
Ex smoker:		17-Feb- 2017
Ex smoker:		11-Nov- 2015

Clinical warnings**Additional Support Needs**

No known ASN requirements

Additional relevant information

Has the patient had a Face to Face consultation to assess the lesion?:Yes
 New Lesion?:No
 Site of Lesion?:all over body
 Size of Lesion (in millimeters?):various sizes
 Duration?:years
 Rapid Growth?:No
 Patient Immunocompromised?:No
 History of previous Skin Malignancy:none
 Family history - melanoma affecting more than one family member?:No

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History of significant skin exposure (including Sunbeds?):Yes
Examination findings:see clinical date
Photograph Available?:No
OK to send correspondence to home address?:Yes
Patient will accept any site:Yes
Patient will accept cancellation or short notice appointment (within 1-6 days):Yes
Referred By:Referring GP
Electronic Attachment Present:No

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

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07-May-2026 CAROL_18964
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Filename: iGPRDA_12.pdf
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Pages:

NHS Confidential: Personal data about a patient

McGowan Frances

CHI: 1901696308

Clinic Letter

Dr. J Khouly
The Silver Burn Medical Practice
Pollok Health Centre
21 Cowglen Road
Glasgow
G53 6EQ

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

NHS
Greater Glasgow
and Clyde
New Victoria Hospital
Grange Road
Glasgow
G42 9LF
0141 201 8000
Vascular
0141 451 5946
ashleigh.gibson@xggc.scot.nhs.uk
12/09/2024
KH/RM
13/09/2024
23/09/2024

Dear Dr. J Khouly,

**Frances McGowan; D.O.B: 19 Jan 1969; CHI: 1901696308
359 PEAT ROAD, Glasgow, Lanarkshire, G53 6SE**

Attendance: Specialty - Vascular Surgery; Clinic - VIKHVA7-MR K HUSSEY VASC THUR AM
Date and Time of Appointment - 12/09/2024 10:20

Clinical Comments:

I saw Mrs McGowan today in the vascular clinic. She has presented with superficial thrombophlebitis affecting the left leg. I think it is probable that her superficial venous system has been obliterated by her most recent of phlebitis.

For completion I will arranged for her to have a Duplex scan. I will ask to her come to one of one of lists, so if there are recurrent veins, she can be offered ultrasound guided foam sclerotherapy at the same time.

I will keep you informed.

Kind regards

Keith Hussey

Consultant Vascular and Endovascular Surgeon

Electronically Signed: Mr Keith Hussey, Consultant

cc. Sara Wilson / Bianca

Printed on 26/09/2024 09:22 by Gemma Smyth2

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McGowan Frances

CHI: 1901696308

OPCL 12/09/2024 v1

Vascular Lab
Level 1
Waiting Area G
Queen Elizabeth University Hospital
1345 Govan Road,
Glasgow,
G51 4TF

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McGowan Frances

CHI: 1901696308

Clinic Letter

Dr. J Khouly
The Silver Burn Medical Practice
Pollok Health Centre
21 Cowglen Road
Glasgow
G53 6EQ

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

NHS
Greater Glasgow
and Clyde
New Victoria Hospital
Grange Road
Glasgow
G42 9LF
0141 201 8000
Haematology
0141 347 8164/63
17/07/2024
NJ/SB
18/07/2024
18/07/2024

Dear Dr. J Khouly,

**Frances McGowan; D.O.B: 19 Jan 1969; CHI: 1901696308
359 PEAT ROAD, Glasgow, Lanarkshire, G53 6SE**

Attendance: Specialty - Haematology; Clinic - VINJOHA6-NURSE N JOHNSTON MGUS CLINIC
WED PM
Date and Time of Appointment - 17/07/2024 12:45

Clinical Comments:**Diagnosis:** IgG kappa MGUS**Results:** White cells 6.9, haemoglobin 123, platelets 225, neutrophils 3.9

Creatinine 68, paraprotein 6g/L, adjusted calcium 2.51

Serum free light chains - free kappa 71.4g/L, free lambda 28.6mg/L, K/L ratio 2.5

Follow-up: 22.01.2025 - Haem CNS Nicole Johnston, VACH

It was a pleasure to speak to Frances today. She informs me that she has been keeping well since we last saw her, she does however suffer from an irritated chest. She believes this has been since COVID and she is now receptive to pollen. She did not require antibiotic therapy and it managed to shift on its own. However, she did note that this has been a change over the past few years for her.

Otherwise, she maintains she has a good diet and fluid intake, no new aches or pains and she also has a good sleeping routine and has not suffered from any infections that would be of any concern.

We did discuss however that there is a slight rise her serum free light chains and I would like these

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McGowan Frances

CHI: 1901696308

OPCL 17/07/2024 v1

checked again in six months time, which she is happy to oblige. We will review her again in six months' time.

Yours sincerely,

NICOLE JOHNSTON

CLINICAL NURSE SPECIALIST MYELOMA

Electronically Signed: Nurse Nicole Johnston, Consultant

cc.

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McGowan Frances

CHI: 1901696308

Clinic Letter

Dr. J Khouly
The Silver Burn Medical Practice
Pollok Health Centre
21 Cowglen Road
Glasgow
G53 6EQ

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

NHS
Greater Glasgow
and Clyde
New Victoria Hospital
Grange Road
Glasgow
G42 9LF
0141 201 6000
Haematology
0141 347 8164/63
19/03/2025
NJ/SW
03/04/2025
03/04/2025

Dear Dr. J Khouly,

**Frances McGowan; D.O.B: 19 Jan 1969; CHI: 1901696308
359 PEAT ROAD, Glasgow, Lanarkshire, G53 6SE**

Attendance: Specialty - Haematology; Clinic - VINJOHA6-NURSE N JOHNSTON MGUS CLINIC
WED PM
Date and Time of Appointment - 19/03/2025 12:45

**Clinical Comments:
DIAGNOSIS: IgG kappa MGUS**

RESULTS: Haemoglobin 124, WCC 7.4, platelets 246, neutrophils 4.3

Creatinine 65, paraprotein 6g/L, adjusted calcium 2.43

Serum free light chains - free kappa 64.5g/L, free lambda 28.6mg/L

FOLLOW UP: 25/03/2026

It was a pleasure to speak to Frances today. She reports that she has been keeping well. She is suffering with issues with her knees, but states she has an appointment coming up with Orthopaedics. On further discussion Frances tells me that her only complaint at this point in time is suffering with the menopause. She states that she has treatment from her GP Practice with regards to this and we discussed this further. I advised her on some forums that she may be able to navigate on social media and/or the internet which might provide her some support at this time. I also spoke to her about the fact that GP's are extremely good in this area and can provide her with support. Otherwise she was happy to hear that she has remained stable from our point of view and her next appointment will be in a years time. We did discussion again what MGUS was, the fact that she has

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McGowan Frances

CHI: 1901696308

OPCL 19/03/2025 v1

a protein in her blood and this is something that we will continue to monitor going forward. Otherwise she knows in the interim should anything change she can contact us out with this time.

Yours sincerely

Nicole Johnston

Advanced Clinical Nurse Specialist Myeloma

Electronically Signed: Nurse Nicole Johnston, Consultant

cc.

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McGowan Frances

CHI: 1901696308

Emergency Attendance Letter

Emergency Department
Queen Elizabeth University Hospital
1345 Govan Road
Glasgow
Lanarkshire
G51 4TF

Dept. Contact Details:

Tel:

Fax:

Email:

Date Completed: 13/06/2025

Consultant: Dr Ziad Al-Ari

J Khouly
The Silver Burn Medical Practice
Pollok Health Centre
21 Cowglen Road
Glasgow
Glasgow
G53 6EQ

Dear J Khouly

Re: **McGowan Frances**
359 PEAT ROAD
Glasgow G53 6SE

DOB: 19/01/1969

CHI: 1901696308

Attended on: 12/06/2025 at 19:39 hrs.

Departed on: at hrs.

Discharge Type: 01a - Discharge with no follow up

Destination: Private residence

Previous ED Attendance in last 12 months: 0

Presenting complaint
fingers Inj

Nursing Assessment:

Investigations in ED:
1. XR Finger middle Lt

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McGowan Frances

CHI: 1901696308

Diagnosis:		
Diagnosis	Side	Site
Open Wound of Other Parts of Wrist and Hand		

Procedures: **None**Immunisations: **None**Dispensed Medication: **Please see Clinician Notes**

Clinician Notes:

Attended MIU today with superficial wounds to left index and middle fingers after cutting on hedge trimmer. Cleared and dry dressing applied and discharged with wound advice.

Followup :

Highly sensitive: N

Consent for sharing withheld: N

Yours sincerely,
Karen Tait
Nurse

Copies to:

1. J Khouly (GP)

School Address:

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McGowan Frances

CHI: 1901696308

Clinic Letter

Dr. J Khouly
The Silver Burn Medical Practice
Pollok Health Centre
21 Cowglen Road
Glasgow
G53 6EQ

Main
Switchboard:
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Enquiries to:
Letter Date:
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Date:
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Date:

NHS
Greater Glasgow
and Clyde
West Glasgow ACH - Yorkhill
Dainair Street
Glasgow
G3 8SJ
0141 211 2000

Orthopaedics

09/04/2025
CMD/VK
09/04/2025

30/04/2025

Dear Dr. J Khouly,

**Frances McGowan; D.O.B: 19 Jan 1969; CHI: 1901696308
359 PEAT ROAD, Glasgow, Lanarkshire, G53 6SE**

Attendance: Specialty - Orthopaedics ; Clinic - WICMOR501D-ORTHO ESP C MCDONALD KNEE
WEDNESDAY AM
Date and Time of Appointment - 09/04/2025 10:20

Clinical Comments:

Diagnosis – mild degenerate changes left knee and asymptomatic mobile osteophyte right knee

Outcome – discharged from orthopaedic knee clinic for conservative management.

I saw the above 56 year old lady in an orthopaedics knee clinic. She reports her left knee symptoms have significantly reduced since time of referral, back in January last year. She gives a background history of developing acute severe onset left knee pain to extent that she struggled to walk and subsequent left knee MRI scan, December 2023 noted degenerate changes with small focus marrow oedema and full thickness cartilage loss, affecting the anterolateral aspect of the medial femoral condyle. OA degenerate changes were also noted at patellofemoral joint and a horizontal degenerate and under surface posterior horn tear to medial meniscus.

Frances presents today with a relatively asymptomatic left knee. She is prone to some early OA symptoms of start up stiffness, which eases with walking and movement. There is no history of mechanical locking or knee instability and she does try to remain active with regular walking. She does experience left patellofemoral knee pain when descending stairs and slopes. There is no reported hip or groin pain. More recently she has become aware of a non-tender small mobile lump over the right superolateral patella region, thought to be in keeping with a suspected avulsed osteophyte.

NHS Confidential: Personal data about a patient

McGowan Frances

CHI: 1901696308

OPCL 09/04/2025 v1

This lady is noted to have had previous phlebitis and thrombophlebitis. She is on Sumatriptan for migraines. She also takes Thyroxine, Sertraline, Propranolol and is on HRT Kliovance. This lady does not currently work.

On examination both knees had no significant swelling or effusion. Both knees hyperextend around 5°. Left knee examination was unremarkable with knee range of 5° hyperextension to 120°. There was no bone or joint line tenderness. Collateral ligaments and cruciates were stable and menisci McMurray's test was negative. Crepitus is noted at patellofemoral joint with knee movement. Right knee examination was also unremarkable except for right patellofemoral crepitus and the small non-tender mobile superolateral patella opacity.

Right knee x-rays taken in clinic today do show a small osteophyte avulsion from patella on skyline view which is in keeping with the small palpable structure. This appears to be within the retinaculum and is therefore unlikely to be mobile as a loose body.

I have gone over the results of her left knee MRI scan and explained that these are degenerate changes but not at the extent of requiring any orthopaedic surgical intervention. The degenerate meniscus tear is not suitable for knee arthroscopy, given that she is not experiencing any mechanical symptoms and there are degenerate bony marrow oedema changes over medial compartment. I have also advised that her right knee small opacity does not require any further investigation at this stage, however, should this increase in size or become painful then we would certainly be happy for her to contact the department. Frances has been discharged from the orthopaedic knee clinic today for continued conservative management.

Yours sincerely,

Caroline McDonald

Advanced Physiotherapy Practitioner (Orthopaedics)

Electronically Signed: APP Caroline McDonald1, Physiotherapist

cc.

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McGowan Frances

CHI: 1901696308

Clinic Letter

Dr. J Khouly
 The Silver Burn Medical Practice
 Pollok Health Centre
 21 Cowglen Road
 Glasgow
 G53 6EQ

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

NHS
 Greater Glasgow
 and Clyde
 New Victoria Hospital
 Grange Road
 Glasgow
 G42 9LF
 0141 201 6000
 Haematology
 0141 347 8164/63

25/03/2026
 MR/VA
 27/03/2026
 01/04/2026

Dear Dr. J Khouly,

**Frances McGowan; D.O.B: 19 Jan 1969; CHI: 1901696308
 359 PEAT ROAD, Glasgow, Lanarkshire, G53 6SE**

Attendance: Specialty - Haematology; Clinic - VINJOHA6-NURSE N JOHNSTON MGUS CLINIC
 WED PM
 Date and Time of Appointment - 25/03/2026 12:00

Clinical Comments:

I telephoned Frances McGowan today with her recent blood tests. Nicole Johnston has reviewed these bloods. The paraproteins are 5 and the serum light chains are 68.6. These are stable bloods and we will schedule another appointment for phlebotomy bloods in six months' time.

Kind Regards

Yours sincerely

Mary Reid

Haematology Clinical Support Assistant

Electronically Signed: Nurse Nicole Johnston, Consultant

cc.

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W16 Confidential Personal data about a patient

Department of Trauma & Orthopaedics
Queen Elizabeth University Hospital
1345 Govan Road
Glasgow
G51 4TF

Appointments: 0141 347 8347
Fracture Clinic: 0141 452 2908

Virtual Fracture Clinic

Clinic Date: 23/10/2025
Typed: 23/10/2025

Dr Khouly
The Silver Burn Medical Practice
Pollok Health Centre
21 Cowglen Road
Glasgow
G53 6EQ

Dear Dr Khouly

Miss Frances McGowan ~ DOB: 19/01/1969 ~ CHI:1901696308;
359 Peat Road Glasgow Lanarkshire G53 6SE

Your patient was recently followed up at the Virtual Fracture Clinic at Queen Elizabeth University Hospital. The following details were recorded:

Bodily site:	Right Ankle
Injury Type:	Fracture
Management plan:	Fracture clinic
Patient contacted	Phone
Site:	QEUH
Outcome:	Review and discharge NFA required
Nurses notes:	Nurse present at Virtual Fracture Clinic: 23/10/2025 14:48 Laura Falconer Frances slipped in the garden resulting in a # right ankle, Web B. Notes and x-rays reviewed by Mr Mohammed. To keep walker boot on for 4-6 weeks then removed. No follow up required. I have spoken to Frances about this and given advice on analgesia. She is happy with the plan.

Yours Sincerely,

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NHS

Greater Glasgow
and Clyde

NHS GGC South Sector
Fracture Liaison Service

Consultants

Dr M Talla, Dr P Connelly & Dr C Sainsbury

Osteoporosis Nurse Specialists

Kay Johnstone, Angela Collie,
Margaret French, Mayrine Fraser & Leigh Robertson

CHI: 1901696308

30 Oct 2025

Regarding Frances McGowan, born 19 Jan 1969 (CHI 1901696308)

Dear Dr,

Your patient has been assessed for osteoporosis / fracture risk on **30 Oct 2025** following presentation to hospital with a fracture. This fracture was identified from a radiology report or medical records and this patient has not been seen in person by the Fracture Liaison Service. A report from this assessment is attached.

An appointment for full assessment by the Fracture Liaison Service, including DXA scan, will be now arranged.

Follow up

A DXA scan will be scheduled for your patient

Yours sincerely,

Leigh Robertson - 0141 201 0105
Osteoporosis Nurse Specialist

CHI: 1901696308

M45 Confidential Personal data about a patient

Assessment report

Date:

- 30 Oct 2025

Fracture history:

- Ankle (Right) (aged 56)

Risk factors:

- Previous fragility fracture

Recommended treatment:

- None

Recommended investigations:

- None

**Future DXA Scans:
(to be arranged by GP)**

- To be decided based on outcome of patient's next steps

Recommended lifestyle changes:

- None

Comments:

Retrospective case-finding has identified that your patient sustained a low-trauma fracture age >50 years. Reference is made to a recent radiology report and hospital electronic information systems; this patient has not been seen in person by the Fracture Liaison Service.

Your patient will be held on the waiting list and appointed when it becomes possible to do so. If you feel that a DXA scan is not appropriate please contact us to remove them from the waiting list - 0141 201 0105.

CHI: 1901696308

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NHS Confidential: Personal data about a patient

McGowan Frances

CHI: 1901696308

Emergency Attendance Letter



Emergency Department
Queen Elizabeth University Hospital
1345 Govan Road
Glasgow
Lanarkshire
G51 4TF

Dept. Contact Details:
Tel:
Fax:
Email:

Date Completed: 22/10/2025

Consultant: Dr Stewart McKie

J Khouly
The Silver Burn Medical Practice
Pollok Health Centre
21 Cowglen Road
Glasgow
Glasgow
G53 6EQ

Dear J Khouly

Re: **McGowan Frances**
359 PEAT ROAD
Glasgow G53 6SE

DOB: **19/01/1969**

CHI: **1901696308**

Attended on: **22/10/2025 at 15:17 hrs.**

Departed on: **at hrs.**

Discharge Type: **01c - Discharge with referral**

Destination: **Private residence**

Previous ED Attendance in last 12 months: **1**

Presenting complaint
leg inj

Nursing Assessment:

Investigations in ED:

1. XR Foot Rt

2. XR Ankle Rt

3. XR Ankle Rt

NHS Confidential: Personal data about a patient

McGowan Frances

CHI: 1901696308

Diagnosis:

Diagnosis	Side	Site
Closed Fracture of Lateral Malleolus		

Procedures: **None**

Immunisations: **None**

Dispensed Medication: **Please see Clinician Notes**

Clinician Notes:

pt attended mlu today with inversion injury to right ankle after fall in garden. xray showed webber B fracture. walking boot applied and given crutches. prescribed paracetamol 1g qid and naproxen 500mg twice daily. referral to virtual # clinic

Followup :

Highly sensitive: N

Consent for sharing withheld: N

Yours sincerely,
Jill Gillian Curran
Nurse

Copies to:

1. J Khouly (GP)

School Address:

THIRD PARTY COPY

Scanned Document
07-May-2026 CAROL_18964
Additional:Scanned Document

Filename: iGPRDA_6.pdf
Extension: .tif
Pages:

Hospital use only	Clinic	Day Date	Time	Hospital No.
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REFERRAL LETTER
MEDICAL IN CONFIDENCE
 GGC MSK Physiotherapy Protocol

Additional Support Needs:
No known ASN requirements

REFERRAL TO	
South - Pollok Health Centre GGC MSK Physiotherapy	— Consultant / receiving practitioner and/or specialty clinic
Physiotherapy MSK GG&C SCI Gateway Virtual Location Code NHS GG&C	— Hospital and hospital address
	Hospital location code. G049G
	Email address -
Urgency of referral Routine	Date sent 16-Apr-2026
Date of referral 08-Apr-2026	

PATIENT DETAILS		Patient's address
Surname McGowan		359 Peat Road GLASGOW G53 6SE
Forename(s) Frances		
Title Miss		Contact number(s)
Sex Female		Voice: 07925908346
Date of birth 19-Jan-1969		
CHI no. 1901696308		
Area of Residence -		

1010395870438 Unique Care Pathway Number: 1010395870438

REGISTERED GP DETAILS		Practice address
Name Dr Jimmy Khouly		Pollok Health Centre 21 Cowglen Road Glasgow G53 6EQ
GMC code 6128718	GP code 00060	
Practice name The Silver Burn Medical Practice (18964)		Contact number(s)
Practice code 52400		Voice: 0141 531 6870 E-mail: ggc.gp52400clinical@nhs.scot

REFERRING GP DETAILS		Practice address
Name Dr Alan Petrie		Pollok Health Centre 21 Cowglen Road Glasgow G53 6EQ
GMC code 4098658	GP code -	
Practice name The Silver Burn Medical Practice (52400)		Contact number(s)
Practice code 52400		Voice: 0141 531 6870

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CLINICAL INFORMATION**History of presenting complaint****Presenting complaint**

Description: KNEE PAIN

Comment: Miss McGowan is a 57 year old female with bilateral anterior knee pain with the [R] being more affected. She was seen at the Orthopaedic department due to degenerative changes found on an MRI, however she is once again struggling with the pain. I would be grateful for your review.

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history**Pre-existing conditions** (High & medium priority - all)

Description	Comment	Date of onset	Date recorded
Closed fracture ankle, lateral malleolus (Right)	-	22-Oct-2025	22-Oct-2025
Monoclonal gammopathy of uncertain significance	IgG kappa	19-Mar-2025	19-Mar-2025
Osteoarthritis	mild oa l knee	31-Oct-2023	31-Oct-2023
Phlebitis and thrombophlebitis	-	09-May-2022	09-May-2022
Chest pain	musculoskeletal	24-Feb-2020	24-Feb-2020
Plantar fasciitis	-	09-Mar-2017	09-Mar-2017
Impaired fasting glycaemia	-	15-Jul-2015	15-Jul-2015
Hypothyroidism NOS	-	03-Sep-2007	03-Sep-2007

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Ultrasound guided foam sclerotherapy for varicose vein leg (Left)	07-Nov-2024	07-Nov-2024
Injection of steroid for local action NEC	09-Dec-2016	09-Dec-2016

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Menthol In Aqueous Cream 0.5 %	500	500 GRAM	APPLY TWICE A DAY	-	21-Aug-2025	28-Aug-2025
Diclofenac Diethylammonium Gel 2.32 %	100	100 gram	APPLY 2-3 TIMES DAILY	-	06-Feb-2024	02-Apr-2026
Propranolol Hydrochloride Tablets 40 mg	84	84 TABLET	ONE TO BE TAKEN THREE TIMES A DAY	-	31-Mar-2022	05-Feb-2026
Sertraline Hydrochloride Tablets 50 mg	56	56 TABLET	ONE TO BE TAKEN EACH DAY	-	17-Jan-2022	05-Feb-2026
Kliovance Tablets	84	84 TABLET	ONE TO BE TAKEN EACH DAY	-	12-Aug-2021	05-Feb-2026
Sertraline Hydrochloride Tablets 100 mg	56	56 TABLET	ONE TO BE TAKEN EACH DAY	-	27-Feb-2020	05-Feb-2026
Sumatriptan Succinate Tablets 100 mg	6	6 TABLET	ONE TO BE TAKEN AT ONSET OF MIGRAINE; DOSE MAY BE REPEATED AT LEAST TWO HOURS LATER IF ATTACK RECURS	-	10-Oct-2017	24-Mar-2026
Levothyroxine Sodium Tablets 100 micrograms	56	56 TABS	1 Tab Daily	-	16-Sep-2011	25-Mar-2026

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

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<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Doxycycline Hyclate Capsules 100 mg	6	6 CAPSULE	TWO TO BE TAKEN ON THE FIRST DAY THEN ONE TO BE TAKEN EACH DAY FOR 4 DAYS	-	02-Apr-2026	02-Apr-2026
Prednisolone Tablets 5 mg	40	40 TABLET	TAKE EIGHT TABLETS IN THE MORNING FOR 5 DAYS	-	02-Apr-2026	02-Apr-2026
Amoxicillin Capsules 500 mg	15	15 CAPSULE	ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS	-	24-Mar-2026	24-Mar-2026

Blood Pressure

<u>Date Recorded</u>	<u>Systolic</u>	<u>Diastolic</u>
02-Apr-2026	102	74
28-Nov-2023	126	85
07-Feb-2023	127	74
15-Jun-2022	110	71
22-Jan-2020	130	80

Body Measurements

<u>Date Recorded</u>	<u>Height</u>	<u>Weight</u>	<u>BMI</u>
28-Nov-2023	-	73	29.24
11-Jun-2010	158	56	-

Lifestyle Risks and Alerts / Examinations and Investigations

<u>Description/Question</u>	<u>Result/Comment</u>	<u>Date</u>
Non-smoker :	attends for review. Resp sx ongoing: productive cough, discoloured [yellow] sputum; sx of breathlessness and wheeze. no haemoptysis.	02-Apr-2026
Non-smoker :	cough 1 wk. fever resolved. no soboe. sliht wheeze whnelying down. green spit. upper back ain when walking around. sore ears and throat resolving, sounds wheezy. for FTF.	01-Nov-2022
Non-smoker :	Cough for 3 weeks, feels SOB with it, sore upper back - took diclofenac for it. No fevers. Bringing up green catarrh, no runny nose/sore throat etc.	06-Dec-2018
Ex smoker:		05-Feb-2018
Ex smoker:		17-Feb-2017

Clinical warnings**Additional Support Needs**

No known ASN requirements

Additional relevant information

Has patient attended Physiotherapy for the same problem within the last 12 months?:No

Has patient ever attended Pain Services for the same problem?:No

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

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

Referred By:Locum

Electronic Attachment Present:No

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