Medications

Drug	Dose	Frequency	Duration	Quantity	Supply	Additional Information
Nitrazepam 5mg tablets	5mg	At night				
Sodium valproate 500mg gastro-resistant tablets	1g	Morning and Night				Epilim chrono 500, 2 tab, 1000mg 8am and 10pm
Lamotrigine 100mg tablets	100mg	Morning and Night				
Solifenacin 5mg tablets	5mg	In the morning				
Omeprazole 20mg gastro-resistant capsules	20mg	In the morning				
laxido	1 sachet	Morning and Evening				
Dihydrocodeine 30mg tablets	30mg	3 x a day				8am, 6pm, 10pm
Furosemide 40mg tablets	40mg	8am and 2pm				

Medicines not checked by pharmacist before discharge. For any clinical information contact prescriber.

Medication Comments / Other Information

Prior to admission Stuart was due for assessment for a venelink which had not yet been carried out, he self administered medication from a venelink with no issues during his admission. Prior to admission his brother and a friend were involved in laying out his medication which he reported to take regularly although admitted to sometimes taking more than prescribed. He reported that he felt the dihydrocodiene to be ineffective and wished to come off this. Medication previously ordered from Ramsays in Fintry, brother organised this. Our pharmacist liasing with community regarding venelink and delivery and Boots Lochee had agreed to initiate this on discharge. Furosomide and epilim chrono not in venelink.
At time of DAMA a venelink waS present on the ward with enough medication to last until 8am 29.11.17, but there was not a supply of epilim chrono.

Information Given To Patient and Carers

Social work referral completed for ?alternative housing and assistance with living skills.

Follow Up Details

Follow Up	Date	Date To Be Arranged
ongoing neurology input and social work referal		
I will phone GP to inform regarding medication and furosemide dosing		

Communication To Primary Care

Dear Doctor
Stuart was refered urgently to the crisis team regarding the belief that a man named 'Rab' was dealing drugs in the bushes outside his house. He described hearing a voice and seeing shadows. He also reported low mood and anxiety. He was considered for CRHTT input but after discussion admission for a period of assessment was advised. He had apparently been sitting at home with a knife in order to defend himself against this man.
Stuart was assessed on 15/11/17 for reduced consciousness, this appeared to be opiate toxicity secondary to constipation related to opiates. He recovered well after two doses of naloxone. Loperamide was stopped and laxido initiated with dihydrocodeine dose being reduced.
Later on the day of 15/11/17 Stuart was informed he was due to transfer to ward 1 as he was technically their patient and had been admitted to us as we had a bed. He left the ward without discussion with staff. Police were informed and located Stuart with his brother who returned him to the ward in the late evening. The bed in ward 1 was filled overnight so Stuart remained on this ward.
As of 16/11/17 Stuart reported himself to be feeling 100% better and no longer experiencing any auditory or visual hallucinations.
Stuart attended neurology appointment on 17/11/17 and reported that the consultant found him to be very well.
Stuart was commenced on furosemide on 19/11/17 by the duty doctor for painful swollen lower limbs (present 3 weeks). Dose was increased to 40mg on 21/11/17 and again to 40mg BD on 25/11/17. Renal function was checked on 24/11/17 and entirely normal.He had a CXR completed on 23/11/17 which has not yet been reported but there is some evidence of increased opacity in keeping with fluid. There is no cardiomegaly. He was due an ECHP on 27/11/17 but accidentally turned up to EEG instead where he had a pending appointment and this was (astonishingly) completed on that occasion, but he missed his ECHO. This has been rescheduled for 21/12/17 and an appointment sent to his home address.
Unfortunately on 28/11/17 Stuart was informed that a bed had become available on ward 1. He then told staff he wished to take his own discharge and was unwilling to wait to speak with medical staff. I met him on the path from the ward and attempted to persuade him to talk with me, particularly regarding a supply of his medication. He was unwilling to stop. He had informed the nursing staff that he would see his own GP regarding medication and would expect contact from social work the next week. Discharge planned for soon anyway.
Single dose PRN antipsychotic in whole admission.
Has had flu jab 20/11/17.
Another doctor has largely been involved in Stuart's care so I am basing much of this on the notes. I suspect a reduction from 80mg of furosemide would be appropriate. The last recorded examination of his legs was prior to inititation of furosemide and recorded as 'mildly swollen ankles bilat', pulses were good.
Many thanks

Dr Eilidh ONeil (Position: Doctor. Pager: _____)

Date/Time Signed Off: 28/11/2017 12:02:29

Discharge Consultant: BRIAN ROBERT TIMNEY

Appendix

No items have been appended to this letter.

NHS Tayside Interim Out-Patient Communication

Ward/Clinic	wedderburn house	CHI	1411600134
Hospital	Carseview Centre	Surname	BEATTIE
Clinician	Jonathan Fish	First Name	STUART
Date	08/01/2018	Address	36 WHITFIELD AVE DUNDEE DD4 0BD
		GP/Address	Tay Court Surgery 50 South Tay Street Dundee DD1 1PF

Dear Doctor,

The above patient visited my clinic today; please accept this as the interim communication in respect to this visit.

Provisional/Diagnosis is: Psychotic illness

?

Comment/Recommendations: Commence amisulpiride 400mg in divided dosage 200mg bd

Follow up by clinic required: Yes

Follow up by clinic required: Please arrange to test Prolactin levels following commencement of Amisulpiride

Specific Monitoring Required: No

The following treatment is recommended:

	Medication	Dose	Frequency	Indication	Duration
1.	Amisulpiride	200mg	bd	psychotic illness	trial.

Is any Medication to be discontinued: No

NHS Tayside Interim Out-Patient Communication

Name: BEATTIE STUART CHI: 1411000134 Clinic Date: 08/01/2018

Ward/Clinic: wedderburn house

Further comment/Recommendations:

To be reviewed in CMHT WEST outpatient clinic.

Jonathan Fish | CT1 | Tel 01382 660111
Ninewells Switch Board Tel 01382 660111

Dundee
Health & Social Care
Partnership

Medical Advisory Service
Westgate Health Centre
Charleston Drive
DUNDEE DD2 4AD
Telephone No: 01382 647474
Fax No: 01382 647473

Chief Officer: David W Lynch

If calling, please ask for: Tracy Oram

Email: tracy.oram@nhs.net

Our Ref TSO/AL/18B-09
Your Ref
Date 29 January 2018

ASSESSMENT FOR REHOUSING - DUNDEE

Stuart BEATTIE, 36 Whitfield Avenue, Dundee (14 11 60)

I have examined the available information with regard to the application by the above named for rehousing on health grounds and would advise:

This case to be discussed by Very Sheltered Housing/Housing with Care Panel.

Medical Advisory Service

c.c. Dr MacDonald, 50 STS, J Cavana, 1 ES, J MacMillan

Copy to:	Date	
Dundee City Council	29 January 2018	OC
Angus Housing Association (Dundee)		
Home in Scotland Ltd		
Sanctuary (Scotland) Housing Association (including Beechwood)		

Dundee Health & Social Care Partnership

Medical Advisory Service
Westgate Health Centre
Charleston Drive
DUNDEE DD2 4AD
Telephone No: 01382 647474
Fax No: 01382 647473

Chief Officer: David W Lynch

If calling, please ask for: Tracy Oram
Email: tracy.oram@nhs.net

Our Ref TSO/LMc/18B-09
Your Ref
Date 20 February 2018

ASSESSMENT FOR REHOUSING - DUNDEE

Stuart BEATTIE, 36 Whitfield Avenue, Dundee (14 11 60)

I have examined the available information with regard to the application by the above named for rehousing on health grounds and would advise:

Nil Priority Very Sheltered Housing
High Priority sheltered housing, ground floor, all on one level, with minimum access steps
As per Very Sheltered Housing Panel.

Medical Advisory Service

c.c. Dr MacDonald, 50 STS

Copy to:	Date	
Dundee City Council	20 February 2018	OC
Angus Housing Association (Dundee)		
Home in Scotland Ltd		
Sanctuary (Scotland) Housing Association (including Beechwood)		

NHS Tayside Dundee City Council CHANGING FOR THE FUTURE

Working in partnership with NHS Tayside and Dundee City Council

NHS Tayside Interim Out-Patient Communication

Ward/Clinic	Wedderburn	CHI	1411600134
Hospital	Wedderburn House	Surname	BEATTIE
Clinician	Helen Simonsen	First Name	STUART
Date	21/02/2018	Address	36 WHITFIELD AVE DUNDEE DD4 0BD
		GP/Address	Tay Court Surgery 50 South Tay Street Dundee DD1 1PF

Dear Doctor,

The above patient visited my clinic today; please accept this as the interim communication in respect to this visit.

Provisional/Diagnosis is: ? Psychosis NOS

Comment/Recommendations: Recent CMHN contact- remains supicious and / psychotic, mood low. Please increase amisulpride as below and add sertraline.

Follow up by clinic required: Yes

Follow up by clinic required: As before

Specific Monitoring Required: Yes

Monitoring Recommended: Routine antipsychotic monitoring. Monitor for seizure changes with SSRI

The following treatment is recommended:

	Medication	Dose	Frequency	Indication	Duration
1.	Sertraline	50mg	once in the morning	depression	1 month then 100mg, if tolerated
2.	Amisulpride	250mg	twice daily	psychosis	3 months

Is any Medication to be discontinued: Yes

Medication to be discontinued: Existing amisulpride 200mg BD

Helen Simonsen | Consultant Psychiatrist | Tel 01382 346050
Ninewells Switch Board Tel.01382 660111

Dundee Health & Social Care Partnership

Dundee Health & Social Care Partnership
Community Mental Health Team West
Wedderburn House
1 Edward Street
Dundee
DD1 5NS

Chief Officer: David W Lynch

If calling, please ask for
Community Mental Health Team West
Telephone Number 01382 346050/5
Fax Number 01382 346040

Dr MacDonald
Tay Court Surgery
325 Strathmartine Road
DUNDEE

Date Dictated: 22 March 2018
Date Received: 22 March 2018
Date Typed: 25 April 2018
Our Ref: MF/LJ/CHI
Enquiries to: Team West
Extension: 30251

Dear Dr MacDonald

RE: STUART BEATTIE, DOB 14.11.60/0134
36 WHITFIELD AVENUE, DUNDEE

I am writing to let you know that your patient, Mr Stuart Beattie, did not attend his General Adult Psychiatry Out-patient appointment at Wedderburn House, Dundee on 22nd March 2018. We will send him another appointment for the next available slot.

Kind regards,

Yours sincerely

Dr Matthias Feile
Electronically signed: 27/4/18

Dr Matthias Feile
LAS Psychiatry

NHS Tayside
Dundee CHANGING FOR THE FUTURE
Working in partnership with NHS Tayside and Dundee City Council

Dundee
Health & Social Care
Partnership

Medical Advisory Service
Westgate Health Centre
Charleston Drive
DUNDEE DD2 4AD
Telephone No: 01382 647474
Fax No: 01382 647473

Chief Officer: David W Lynch

If calling, please ask for: Tracy Oram

Email: tracy.oram@nhs.net

Our Ref TSO/LMc/18B-09
Your Ref
Date 27 March 2018

ASSESSMENT FOR REHOUSING - DUNDEE

Stuart BEATTIE, 36 Whitfield Avenue, Dundee (14 11 60)

I have examined the available information with regard to the application by the above named for rehousing on health grounds and would advise:

This case to be Re-discussed by Very Sheltered/Housing with Care Panel

Medical Advisory Service

c.c. Dr MacDonald, 50 STS, J McMillan, DCC D Law, SW

Copy to:	Date	
Dundee City Council	27 March 2018	
Angus Housing Association (Dundee)		
Home in Scotland Ltd		
Sanctuary (Scotland) Housing Association (including Beechwood)		

NHS Tayside
Dundee CHANGING FUTURE
Working in partnership with NHS Tayside and Dundee City Council

NHS Tayside

Department of Neurology
Operational Unit
NHS Tayside
Ninewells Hospital
Dundee
DD1 9SY

Tel: 01382 632134
Fax: 01382 425739
www.nhstayside.scot.nhs.uk

Dr KE MacDonald
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

Date	13/04/2018
Clinic Date	22/03/2018
Your Ref	
Our Ref	PS/WS/ **1411600134**
Enquiries to	Fiona Jamieson
Extension	32134
Direct Line	01382 632134
Email	fionajamieson@nhs.net

Dear Dr MacDonald

Stuart Beattie, 36 Whitfield Ave, Whitfield, Dundee, Angus, DD4 0BD DOB: 14/11/1960

Stuart was appointed to the Nurse Led Epilepsy Clinic on 22 March 2018. Unfortunately, he has failed to attend this appointment. If he would like to be seen again in the Epilepsy service, he should get in contact with the Department of Neurology on the above telephone number within 4 weeks of receipt of this letter. Otherwise, he will be discharged with an open appointment.

Yours sincerely

Authorised on 13/04/2018 14:09:22 by Mrs Pauline Smith.

Mrs Pauline Smith
Epilepsy Specialist Nurse
Non Medical Prescriber
NMC no: 93I0689S

Tay-UHB.epilepsyadvice@nhs.net

(P) Stuart Beattie, 36 Whitfield Ave, Whitfield, Dundee, Angus, DD4 0BD

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NHS Tayside

Department of Neurology
Operational Unit
NHS Tayside
Ninewells Hospital
Dundee
DD1 9SY

www.nhstayside.scot.nhs.uk

Dr KE MacDonald
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

Date	17/05/2018
Clinic Date	01/05/2018
Your Ref	
Our Ref	PS/SR/ **1411600134**
Enquiries to	Neurology Secretaries
Extension	32134
Direct Line	01382 632134
Email	

Dear Dr MacDonald

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE DOB: 14/11/1960

Current anti-epileptic medication:
Sodium valproate 1000mg b.d.
Lamotrigine 100mg b.d.

Stuart attended the Nurse Led Epilepsy Clinic on 1st May 2018. I am delighted to report that since his last review in October he has had no further seizure which means it is likely that he has been seizure free for almost one year.

He does report an event that happened approximately three months ago. He was getting out of bed at his brothers house, felt his whole body tremor it lasted about five to six minutes although he retained awareness throughout. This felt different to any seizures he has had previously and he states that he was feeling nervous and it was like an out of body experience. This does not sound in keeping with a seizure and is more likely to have been a panic attack.

Stuart states that there has been a significant improvement in his mental health and certainly today he was more interactive than I have ever seen him. I appreciate he gets support from the community mental health team.

Stuarts says he currently takes Sodium valproate 1000mg b.d. and Lamotrigine 100mg b.d. Medication compliance has significantly improved with his Venalink system and he reports no significant side effects to his medication. As his epilepsy now appears stable I recommend no changes to his current anti-epileptic drug regime.

Stuart has my contact details. I have given them to him previously. I will review him again in this clinic in approximately eight months time. If he remains seizure free at that stage I am likely to discharge him with an open appointment.

Yours sincerely

Authorised on 18/05/2018 10:51:35 by Mrs Pauline Smith.

Mrs Pauline Smith
Epilepsy Specialist Nurse
Non Medical Prescriber
NMC no: 93I0689S

Tay-UHB.epilepsyadvice@nhs.net

FOR PHARMACY USE

Checked by:

.....

Clinical Pharmacist

Patient Counselled:

.....(Initials)

Medicines Required On Ward

Date.....

Time.....

.....2nd Fold.....

DISCHARGE NOTIFICATION AND PRESCRIPTION FORM

.....Hosp./Inf.

To Dr. MacDONALD, TAY COURT SURGERY
50 SOUTH TAY ST., DUNDEE,
DD1 1PF

HOSPITAL: NW WARD/CLINIC: EDOV

D D M M Y Y
1 4 1 1 6 0 0 1 3 4 C.H.I. No.

Surname: BEATTIE
First Name: STUART M. State
Address: 40 SERVITE HOUSE, 136 ALEXANDER ST, DUNDEE, ANGUS, DD3 7QE

ALWAYS USE BALLPOINT PEN

THIS IS THE *ONLY / *INTERIM DISCHARGE LETTER (to be completed by Discharging Doctor)

Date Placed on Waiting List: ..... (if appropriate) Date of Admission: 4/6/18

** Delete as appropriate* Type of Admission: Elective / Emergency / Urgent / Transfer

DISCHARGE DETAILS	DATE	SPECIALITY	CONSULTANT	DISCHARGED TO	TRANSFERRED TO: HOSPITAL	SPECIALITY	CONSULTANT
	4/6/18	EM	A. PATERSON	HOME			

DIAGNOSIS AND OPERATIONS

PRINCIPAL DIAGNOSIS: unwitnessed collapse, presumed seizure on known epileptic - no significant PH.

PRINCIPAL OPERATION / PROCEDURES:

OTHER CONDITIONS:
1. .....
2. .....
3. .....

OTHER OPERATIONS / PROCEDURES: R (L) ankle - NBI.

When Medicines are to be dispensed **All** copies to be sent to Pharmacy

Days	MEDICINE TREATMENT ON DISCHARGE NAME OF MEDICINE	DOSE	Times of Administration (Mark √) 8 10 12 14 16 18 20 22 24	DURATION OF TREATMENT	DISPENSED BY PHARMACY Number	Brand Names (for information only)
	NO CHANGE					

....1st Fold....

7 days supply will be dispensed unless stated otherwise in box provided

DISCONTINUED MEDICINE	REASON DISCONTINUED
1.	
2.	
3.	
4.	

Discharge Prescriptions should normally be sent to pharmacy at least 24 hours before discharge

INFORMATION / ADVICE TO PATIENT: ☑ YES ☐ NO IF YES, SPECIFY advised to drive w. epilepsy protocols

KNOWN ALLERGIES: NKDA

CARE ARRANGEMENTS ON DISCHARGE (TICK BOX): NONE ☑ DISTRICT NURSE ☐ SOCIAL WORK ☐ HOME HELP/ RELATIVES ☐

FOLLOW-UP APPOINTMENT

DATE	TIME	CLINIC	DELETE AS APPROPRIATE
			GIVEN / TO BE SENT

RESULTS AWAITED: YES ☐ NO ☐ ~~IF YES, SPECIFY:~~

FOR FURTHER INFORMATION CONTACT: RUTHVEN (NAME) FY1 (STATUS) 640526 (TEL NO)

Signature: ..... Status: FY1

A. PATERSON Consultant Date: 4/6/18

Dispensed By: .....
Checked By: .....
Date: .....

Final Distribution:
WHITE - GP
PINK - Pharmacy
YELLOW - Case Records
BLUE - Audit/Coding

THB(MR)26
4 Part Set

NHS Tayside

Emergency Department Ninewells Hospital

Ninewells Hospital
Ninewells Drive
Dundee
DD2 1GZ

KE MacDonald
11058/1,Tay Court Surgery
50 South Tay Street, Dundee
Dundee
DD1 1PF

Dear Doctor

Mr Stuart Beattie
40 SERVITE HOUSE
136 ALEXANDER STREET
Dundee
DD3 7DE

Date of Birth: 14/11/1960
ACHI Number: 1411600134
ED Attendance Number: E0000069658
No. of Previous Attendances: 0
Occupation:
School:
Responsible Consultant:Dr Neil Nichol

The above patient attended the Emergency Department Ninewells Hospital on 04/06/2018 at 05:06 and was admitted on 04/06/2018 at 06:13. The letter was compiled by Ronan McLellan

Diagnosis:		
Description	Body Site	Laterality
ED injury - soft tissue - Ligament strain		

Diagnosis Comments: left ankle injury following seizure. Unable to weight bear. Pain medial malleolus. No focal neurology. XR - NAD. Plan: admit EDOU for observation.

Investigations: XR Knee Lt

Procedures:

Prescriptions:

Discharge Destination: Admission to same NHS healthcare provider / hospital - A&E Ward

Discharge Type: Admitted

Referred To:

Notes for GP:

Yours sincerely
Ronan McLellan

Created on 04/06/2018 06:45 by Ronan McLellan Version 1 Page 1 of 1

NHS Tayside

A&E Department
Emergency Department
Ninewells Hospital
NHS Tayside
Ninewells Hospital
Dundee
DD1 9SY

01382 633993
www.nhstayside.scot.nhs.uk

Dr KE MacDonald
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

Date	08/06/2018
Your Ref	
Our Ref	MJ/LM/ **1411600134**
Enquiries to	Mrs Lisa Maloney : 07/06/2018
Extension	40472
Direct Line	01382 740472
Email	lmaloney@nhs.net

Dear Dr MacDonald

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE DOB: 14/11/1960

Diagnosis: Likely epileptic seizure.

This 57 year old with a known past history of epilepsy has been out at the Perth Races and had consumed some alcohol. He was found in the street outside his flat and was able to tell the Ambulance Service that he had been at a friend's house prior to returning home. He had no recollection of how he had ended up on the floor however, given his past history and how he was presenting a seizure seemed the most likely explanation.

On arrival in the Emergency Department he told us he had awoken on the floor outside his flat having walked home. At this stage he was GCS 15 with no focal neurology but did complain of tenderness around his left ankle. Xray of his ankle revealed no bony injury but in view of his presentation and evidence of a small minor head injury he was admitted to the Emergency Department Observation Unit for the remainder of the night.

On the morning ward round he was bright and alert with a GCS 15 and could provide no further history on how he had ended up on ground. On examination there were no focal neurological findings and no other significant findings. He was discharged with no plan for follow up but we suggested that he make touch with his Epilepsy Specialist Nurse as he describes having seizures once or twice per day although this does not appear to be changing or new pattern.

Yours sincerely

Authorised on 18/06/2018 08:41:45 by Andy Paterson.

Dr Andy Paterson
Consultant in Emergency Medicine

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Pages:

NHS Tayside

Community Mental Health Team West
NHS Tayside
Wedderburn House
1 Edward Street
Dundee
DD1 5NS
Phone No: 01382 346055
Fax: 01382 346040
www.nhstayside.scot.nhs.uk

Dr KE MacDonald
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

Clinic Date:	16/08/2018
Date Dictated	
Date Typed:	28/08/2018
Your Ref:	
Our Ref:	SC/LJ/ **1411600134**
Enquiries to:	CMHT West
Extension:	Extension
Direct Line:	DirectLine
Email:	Email

Dear Dr MacDonald

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE DOB: 14/11/1960

Diagnosis: Unspecified psychosis

Medication: Continue Amisulpiride 250mg twice daily
Sertraline 100mg daily
Please increase Nitrazepam to 10mg nocte

Follow up: review in outpatient clinic in 2-3months time. I will discuss with neurology prior to next appointment to see if any bloods would be beneficial for further investigation regarding formal diagnosis.

Situation:

I reviewed this 57 year old man in Dr Wernicke's General Adult Psychiatry clinic in Wedderburn House on 16th August 2018. This was return routine appointment for review of this gentleman's presentation. Mr Beattie was started on Amisulpiride 200mg BD by the previous psychiatry doctor for an acute psychosis. Mr Beattie had persecutory delusions of a gentleman following him, by the name of Rab who wanted to harm him. Mr Beattie was also very paranoid and requested secure housing with security cameras and warden which he has moved into since occupational therapy/social work involvement following his admission to Carseview summarised below.

Background:

Mr Beattie was admitted to Carseview following referral via the Crisis team in November 2017. He presented having become increasing odd and withdrawn over the preceding year and had recently started to experience visual hallucinations and paranoia. He believed that a Glaswegian man called 'Rab' who was a drug dealer was after him and wanted to harm him but reportedly investigations gave no evidence to suggest there was any truth in this. Around this time, he had admitted to sitting in his flat with a knife in order to protect himself. In 1981 Stuart took a Paracetamol overdose around a time of adjusting to his father death. There was also a mention of an amnesic episode in 2000 but he had been under the influence of alcohol and Dihydrocodeine. His mother has also passed away. There was also a traumatic time when he attended a wedding and it was gate crashed and a friend of his was stabbed and died. He denies any use of illicit substances in his life and reports that he stopped drinking alcohol around 4 years ago. There was 1 assault charge under the influence of alcohol in 2000. During his hospital admission it was felt he had used opiates on pass and required Naloxone. An EEG was undertaken to ascertain if his presentation could be related to his epilepsy. His EEG showed mildly diffuse slowed activity and no epileptiform activity. MRIB brain 17/12/17 showed nothing significant. Mr Beattie discharged himself against medical advice. Reviewing EMIS record on admission it was noted that his compliance with medications was poor. Stuart has a past psychiatric history of self harm 1.5 years ago. He has a past medical history of epilepsy. He takes sodium Valproate and Lamotrigine for this. He has been seen in Neurology clinic on 01/05/18 which reported he had been seizure free for at least 1 year. He is for further review in 8 months from this time.

Assessment:

On mental state examination, Stuart engaged well in conversation, making good eye contact and developing rapport. He was appropriately addressed for the season and time of day and there were no signs of self neglect. His mood was subjectively and objectively euthymic. He denied any further thoughts of self harm or suicide. There was no evidence of psychotic phenomena at consultation but he explained that he often hears muffled voices. He is not able to make out what the voices say and they do not come from within his own head but it often wakes him from sleeping. He denies any visual hallucinations. Cognition appears intact but can be formally assessment at next appointment with MMSE or MOCA. He denied thought echo/insertion/withdrawal/broadcasting. He denied delusions of control/passivity/impossible powers. There was persistent overvalued idea/delusion of persecutory nature of drug dealer who followed him. He says that he has not seen or worried about this for past 5months coinciding with his Amisulpiride. However Stuart attributes this to his new secure accommodation. No evidence of thought disorder nor catatonia. No negative features of schizophrenia. He admits to some low mood at times but attributes this to poor sleep. He is eating and drinking well. He is well supported by a brother who lives nearby.

NHS Tayside

Risk Assessment and Management:

Mr Beattie reports being much more settled and happy in his new accommodation. He denies any ongoing active delusions but still lacks insight into his previous delusions. He has some auditory hallucination hearing muffled voices at times but cannot make them out. It is not overly distressing for him but does keep him awake at night when trying to sleep. His main concern was indeed surrounding his sleeping difficulties. I discussed this case with both Dr McQuitty and Dr Wernicke who advise increasing Nitrazepam for sleep as this would actually increase seizure threshold whereas changing his Amisulpiride would lower the threshold. He feels his intermittent low mood is related to his poor sleep. He denies any self harm or suicidal ideation. He is well supported by his brother. I also see that he is regularly reviewed by Kerry Reid.

Summary & Recommendations:

This 57 year old gentleman initially presented in Crisis in November 2017 with a new psychotic episode or persecutory delusions and some auditory hallucinations. Mr Beattie is no having active delusions after a change of accommodation and introduction of Amisulpiride. He has partial insight into his difficulties.

His EEG queried a mild encephalitis which is part of his differential diagnosis. Inter ictal psychosis was also considered but EEG at time of admission showed no epileptic activity. Paraphrenia is possible but there was no true prodrome and will require further monitoring to make such a diagnosis. There was no negative features of a schizophrenia. Also considered was whether this could be early stages of a lewy body dementia but hallucinations have largely been auditory and no obvious cognitive difficulties but this can be assessed at next appointment. I will be worth a discussion with neurology to consider bloods regarding possible encephalitis.

It was not possible to solidify diagnosis which such minimal contact with this gentleman but we will continue with Amisulpiride which appears to be managing his psychotic symptoms. His Nitrazepam can be increased to help with sleep. If ongoing difficulties with sleep at his next appointment it could be considered to increased Amisulpiride. However, any increases in this need to be done with caution given that he has epilepsy. He can be reviewed in the outpatient clinic in 2-3months time.

Yours sincerely

Authorised on 03/09/2018 18:27:02 by Junior Doc T2.

Dr Stuart Campbell
CT1 Psychiatry Trainee Doctor.

NHS Tayside

Emergency Department Ninewells Hospital

Ninewells Hospital
Ninewells Drive
Dundee
DD2 1GZ

KE MacDonald
11058/1,Tay Court Surgery
50 South Tay Street, Dundee
Dundee
DD1 1PF

Dear Doctor

Mr Stuart Beattie
40 SERVITE HOUSE
136 ALEXANDER STREET
Dundee
DD3 7DE

Date of Birth: 14/11/1960
ACHI Number: 1411600134
ED Attendance Number: E0000098876
No. of Previous Attendances: 1
Occupation:
School:
Responsible Consultant:Dr Michael Johnston

The above patient attended the Emergency Department Ninewells Hospital on 18/10/2018 at 17:59 and was admitted on 18/10/2018 at 20:35. The letter was compiled by Nicola Mackay

Diagnosis:		
Description	Body Site	Laterality
ED injury - head injury -Other Head injury		

Diagnosis Comments: alleged collapse outside pub this eveing ~1800, uncertain cause of collapse, claims hit head, no external signs of ehad injury orr basal skull fracture. claims worsenign of chronic mechanical back pain. clearly intoxicated in departmetn. multiple vomits. given antiematics and painkillers, observed. able to self-mobalsie.

Procedures:

Prescriptions:

Discharge Destination: Admission to same NHS healthcare provider / hospital - A&E Ward

Discharge Type: Admitted

Referred To:

Notes for GP:

Yours sincerely
Nicola Mackay

Created on 18/10/2018 20:36 by Nicola Mackay Version 1 Page 1 of 1

NHS Tayside

Community Mental Health Team West
NHS Tayside
Wedderburn House
1 Edward Street
Dundee
DD1 5NS
Phone No: 01382 346050
Fax: 01382 346040
www.nhstayside.scot.nhs.uk

Stuart Beattie
40 Servite House
136 Alexander Street
Dundee
Angus
DD3 7DE

Clinic Date:	07/01/2019
Date Dictated	
Date Typed:	16/01/2019
Your Ref:	
Our Ref:	KR/amw/ **1411600134**
Enquiries to:	Malcolm Kinnear
Extension:	30031
Direct Line:	01382 346050

Dear Stuart Beattie

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE DOB: 14/11/1960

I am writing to inform you that I am discharging you from my case load. As discussed at our last meeting you are keeping mentally well and no longer require community mental health nurse input. You remain a team west patient under the care of Dr Helen Simonsen.
I wish you well for the future.

Yours sincerely

Authorised on 23/01/2019 15:32:11 by Kerry Reid.

Kerry Reid
Community Mental Health Nurse

(D) Dr S Gardiner, Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF

NHS Tayside

Community Mental Health Team West
NHS Tayside
Wedderburn House
1 Edward Street
Dundee
DD1 5NS
Telephone: 01382 346041
Fax: 01382 346040
www.nhstayside.scot.nhs.uk

Dr S Gardiner
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

Date 09/07/2019
Clinic Date 30/05/2019
Your Ref
Our Ref KC/CW/ **1411600134**
Enquiries to CMHT West
Extension
Direct Line
Email

Dear Dr Gardiner,

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE
DOB: 14/11/1960

Diagnosis: **Unspecified Psychosis**

Medication: **Amisulpiride 300mg twice daily**
Sertraline 100mg daily
Nitrazepam 10mg nocte in addition to the medication he is on for epilepsy and other physical problems

Follow-Up: **Review in Outpatient Clinic in about four months' time**

Mr Beattie attended Outpatient Clinic on 30th May, 2019. He reported that the month of March was quite worrying. There was also quite a bad period when kids were all around and he was getting up at 2.00am and taking one Nitrazepam. He says he does not go outside, with the fear that men outside, mainly drug dealers, want to slit his throat. He said he informed Police but they did not take any action. He lives in sheltered housing. His brother is very helpful and cooks meals which Stuart warms up in the oven. His brother also attends to his shopping. He reported that he had two blackouts about three months ago. He was also discharged from Epilepsy Nurse Follow-up as he did not keep his appointment. He wanted a letter for DHSS but I am not sure at this stage what it is for and will need to enquire again.

Yours sincerely,

Authorised on 02/08/2019 11:34:32 by Locum Consultant.

Dr Chandrasekhar
Locum Consultant Psychiatrist

Seen by Nurse

Tayside Out of Hours Service OOH Call Incident Report

Call number:	**14254**	Receive Date:	**15-Oct-2019 18:56**
Patient's Name:	**Stuart Beattie**		
Date of birth:	**14-Nov-1960 (58 years)**	Gender:	**M**
Address:	**Flat 40** **136 Alexander Street** **Dundee** **DD3 7DE**	Current Address:	**Flat 40** **136 Alexander Street** **Dundee** **DD3 7DE**
Return Contact No:			
Tel No:	**07394 015180**		**07394 015180**
Mobile No:			
Priority:	**NHS24 Advised (Info Only)**	Call Origin:	**NHS24**
Received:	**15-Oct-2019 18:56**	Calltype:	**NHS24 Advised (Info Only)**
Advised:	**19:12**	Arrived PCC:	
Cons start:		Cons End:	
Consulting Doctor:		Own doctor:	**Stephen Gardiner**

Reported Condition:
PRODUCTIVE COUGH 1??WKS

Followups:
None

NHS24 details:
Disposition - **Contact GP Practice within 36 Hours (Next Day appt.)**

Community Mental Health Team West
NHS Tayside
Wedderburn House
1 Edward Street
Dundee
DD1 5NS
Phone No: 01382 346041
Fax: 01382 346040
www.nhstayside.scot.nhs.uk

Dr S Gardiner
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

Clinic Date:	17/11/2020
Date Dictated	07/12/2020
Date Typed:	08/12/2020
Your Ref:	
Our Ref:	YA/JF/CHI / 1411600134
Enquiries to:	CMHT West
Extension:	30251 (Secretary)
Direct Line:	01382 346041
Email:	

Dear Dr Gardiner

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE DOB: 14/11/1960

Mr Beattie did not attend for his outpatient clinic appointment on 17th November 2020. I will rearrange another appointment in six months time.

Yours sincerely

Authorised on 10/12/2020 17:47:44 by Locum Wedderburn.

Dr Y Adusumilli
Locum Consultant Psychiatrist

Seen by Nurse

Tayside Out of Hours Service OOH Call Incident Report

Call number:	**98525**	Receive Date:	**19-May-2021 23:47**
Patient's Name:	**Stuart Beattie**		
Date of birth:	**14-Nov-1960 (61 years)**	Gender:	**M**
Address:	**Flat 40** **136 Alexander Street** **Dundee** **DD3 7DE**	Current Address:	**Flat 40** **136 Alexander Street** **Dundee** **DD3 7DE**
Return Contact No:			
Tel No:	**07394 015180**		**07394 015180**
Mobile No:			
Priority:	**Urgent**	Call Origin:	**NHS24**
Received:	**19-May-2021 23:47**	Calltype:	**Direct Referral ED**
Advised:	**23:53**	Arrived PCC:	**20-May-2021 00:35**
Cons start:		Cons End:	
Consulting Doctor:		Own doctor:	**Stephen Gardiner**

Reported Condition:
CANT GET FORESKIN BACK DOWN 2 DAYS

Followups:
None

NHS24 details:
Disposition - **Accident & Emergency (ASAP)**

Community Mental Health Team West
NHS Tayside
Wedderburn House
1 Edward Street
Dundee
DD1 5NS
Phone No: 01382 346041
Fax: 01382 346040
www.nhstayside.scot.nhs.uk

Dr S Gardiner
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

Clinic Date:	25/08/2020
Date Dictated	04/09/2020
Date Typed:	11/09/2020
Your Ref:	
Our Ref:	YA/JF/CHI / 1411600134
Enquiries to:	CMHT West
Extension:	30251 (Secretary)
Direct Line:	01382 346041
Email:	

Dear Dr Gardiner

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE DOB: 14/11/1960

Mr Beattie did not attend his appointment at Wedderburn on 25th August 2020. I will rearrange another appointment in three months time.

Yours sincerely

Authorised on 15/09/2020 14:06:00 by Locum Wedderburn.

Dr Y Adusumilli
Locum Consultant Psychiatrist

Filename: 80.pdf
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Pages:

Community Mental Health Team West
NHS Tayside
Wedderburn House
1 Edward Street
Dundee
DD1 5NS
Phone No: 01382 346041
Fax: 01382 346040
www.nhstayside.scot.nhs.uk

Stuart Beattie
40 Servite House
136 Alexander Street
Dundee
Angus
DD3 7DE

Date: 16/04/2020
Clinic Date:
Your Ref:
Our Ref: AT/amw/ **1411600134**
Enquiries to: Alba Tost
Extension: 30031
Direct Line: 01382 346050

Dear Stuart Beattie

COVID-19 : What This Means for your Support, Care and Treatment

We would like to take the opportunity to update you on what is happening within the Dundee Community Mental Health & Learning Disability Services in relation to COVID-19. We are mindful that these are worrying times and that you may be anxious about what will happen to your support, care and treatment. The most important message for you is that we will try our very best to continue to offer all service users the help that they require. What will need to change, however, is how we do this.

The health and wellbeing of our clients, staff and communities is our priority. With this is mind and with immediate effect we will:

a) Wherever possible conduct appointments over the telephone rather than having face-to-face appointments. We will arrange appointment times with you in the same way as if you were coming into our clinics to see us or we were seeing you at home but will phone you at the specified time instead. We appreciate that there will still be some people that do need to be seen face-to-face. This will still happen but you should expect to be asked to cleanse your hands with sanitiser when you arrive and before you leave and you will notice staff sitting a little further away from you than they normally would

b) No longer run our Day Hospital in a way that means large numbers of people are collecting together for long periods of time. If you currently attend a Day Hospital your key worker will work with you to determine how else we can support you. It is likely that this will be telephone support

c) No longer run group therapy sessions. If you are currently attending a group treatment, this will be postponed until after the COVID-19 crisis has passed. Someone will be in regular touch with you, however, to offer support whilst the group is not running. It is likely this will be telephone support.

If you currently receive medication by long-acting injecting or are taking Clozapine or Lithium, your services will continue to be provided much as they are at the moment. We will call you the day before your appointment to check whether you or anyone you live with has a new cough or fever or any other symptoms of COVID-19. This is simply to allow us to work out how best to safely deliver your care and protect our staff from infection. We may have to ask you to come on a different day than you are used to.

Our Duty Worker system will be fully operational.

How You Can Help Us

There are a number of things you can do to help keep yourself, other patients and our staff safe and well.

1) Please do not attend any of our centres without an appointment. Where you have a face-to-face appointment arranged, please arrive **at your appointment time**, use the hand sanitiser provided when you arrive and before you leave

2) If you are scheduled to attend a face-to-face appointment and you, or anyone you live with, has a new persistent cough and/or fever and any other symptoms suggestive of COVID-19, please telephone us for advice in advance of attending your appointment, Please do not attend without first telling us that you or your family/carer are unwell

3) Please be patient with all our staff. We are likely to be very busy and expect a number of staff to be off sick or required to stay at home. This may mean we are running late, have to rearrange appointments or offer you support from a staff member that you haven't met before. We will be doing our very best

4) Be prepared that staff may have to wear protective clothing (gloves, aprons and masks) when they see you face-to-face and you are unwell with COVID-19.

The staff that support you will keep you up to date with any further changes that may be required. However, if you have any questions about the above, please contact the Duty Worker in the first instance.

Yours sincerely

Arlene Mitchell (Locality Manager)
Linda Graham (Clinical Lead for Mental Health & Learning Disability Services)

(D) Dr S Gardiner, Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF

NHS Tayside

Emergency Department Ninewells Hospital

Ninewells Hospital
Ninewells Drive
Dundee
DD2 1GZ

S Gardiner
11058/1,Tay Court Surgery
50 South Tay Street, Dundee
Dundee
DD1 1PF

Dear Doctor

Mr Stuart Beattie
40 SERVITE HOUSE
136 ALEXANDER STREET
Dundee
DD3 7DE

Date of Birth: 14/11/1960
ACHI Number: 1411600134
ED Attendance Number: E0000279266
No. of Previous Attendances: 0
Occupation:
School:
Responsible Consultant:Dr Andrew Kinnon

The above patient attended the Emergency Department Ninewells Hospital on 20/05/2021 at 00:29 and was discharged with no follow up on 20/05/2021 at 02:30. The letter has been collated by Dr Justin Garrett.

Diagnosis:

Description	Body Site	Laterality
ED diagnosis - genito-urinary - Foreskin problem anatomical - phimosis / paraphimosis		

Diagnosis Comments:

Procedures:

Prescriptions:

Discharge Destination: Private Residence - Usual place of residence

Discharge Type: Discharged with no follow up

Referred To:

Notes for GP:
NHS24 referral.
Has been having problems with a tight foreskin for last year. 3 days ago in shower the foreskin retracted and has remained so since, patient unable to reduce it himself due to pain and swelling. Still able to pass urine.

O/E - paraphimosis with swelling and redness to foreskin.

NHS Tayside

Instillagel applied and patient applied manual compression for 20 mins, after which I was able to reduce the paraphimosis.

Patient advised to F/U with GP for consideration of referral for circumcision - patient reports he feels he would benefit from this.

Yours sincerely

Emergency Department Ninewells Hospital

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14-July-2026 ACOYLE
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30/11/2021-08:56:02

Tayside Clinical Laboratory Services — Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart — Sex: M — PID: 1411600134 — DoB: 14 Nov 1960
Lab No: C218899828
Tay Court Surgery — Clinician: Dr Balakrishnan PILLAI — TCS PILB1G

SODIUM	127	<<	mmol/L	(133-146)	
POTASSIUM	4.2		mmol/L	(3.5-5.3)	
CREATININE	61	<	umol/L	(62-106)	
ESTIMATED GFR	GT60		mL/min		

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.

CKD Stage	IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA				
ALT	19		U/L	(5-55)	
BILIRUBINS	8		umol/L	(0-21)	
ALKALINE PHOSPHATASE	170	>>	U/L	(30-130)	
ALBUMIN	36		g/L	(35-50)	
CALCIUM	2.37		mmol/L	(2.10-2.55)	
CALCIUM (CORRECTED)	2.41		mmol/L	(2.10-2.55)	
GLUCOSE (preserved tube)	31.7	>>	mmol/L	(3.3-5.8)	

Lab.Comments: Results for GLP phoned to Recep at 16:54 29-Nov-2021.

Sample is blood unless otherwise stated

Sample Date/Time
29 Nov 2021 10:46

Clin.Details: On T47: No
Numbness and tingling sensation on the Rt wrist for 3 months....

Request Entered: 29 Nov 2021 15:47 — Report Printed: 29 Nov 2021 17:56

Tayside Clinical Laboratory Services Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart Sex: M PID: 1411600134 DoB: 14 Nov 1960
Lab No: C218899028
Tay Court Surgery Clinician: Dr Balakrishnan PILLAI TCS PILB1G

TSH	1.68		mU/L	(0.4-4.0)	
URATE	225		umol/L	(200-430)	
C-REACTIVE PROTEIN	27	>	mg/L	(0-10)	
IRON	23		umol/L	(5-32)	
TRANSFERRIN	2.76		g/L	(2.00-4.00)	
% SATN OF TRANSFERRIN	33		%	(22-55)	
FERRITIN	191		ug/L	(30-400)	
TOTAL CHOLESTEROL	6.05	>	mmol/L	(0.00-5.00)	
HDL-CHOLESTEROL	1.00		mmol/L	(0.60-2.50)	
TOTAL CHOL/HDL-CHOL	6.00		.		
AKI	NOT AVAILABLE				

Lab.Comments:

Sample is blood unless otherwise stated

Sample Date/Time
29 Nov 2021 10:46

Clin.Details: On T4?: No
Numbness and tingling sensation on the Rt wrist for 3 months....

Request Entered: 29 Nov 2021 15:47 Report Printed: 29 Nov 2021 17:56

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30/11/2021-08:55:15

Tayside Clinical Laboratory Services — Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart Sex: M PID: 1411600134 DoB: 14 Nov 1960
Lab No: H218899828
Tay Court Surgery Clinician: Dr Balakrishnan PILLAI TCS PILB1G

HGB	160	g/L	(130-180)	WBC	5.8	x10^9/L	(4.0-11.0)
RBC	5.18	x10^12/L	(4.5-6.0)	NE#	3.1	x10^9/L	(2.0-7.5)
HCT	0.474		(0.40-0.52)	LY#	2.1	x10^9/L	(1.5-4.0)
MCV	91.6	fl	(85-105)	MO#	0.4	x10^9/L	(0.2-0.8)
MCH	30.9	pg	(27-32)	EO#	0.10	x10^9/L	(0.0-0.4)
MCC	338	g/L	(320-360)	BA#	0.0	x10^9/L	(0.0-0.1)
				PLT	222	x10^9/L	(150-400)

PV	1.83 H	mPa.s.	(1.5-1.72)	
Serum Folate	9.3	ug/l	(3.1-17.5)	
B12	884	ng/l	(200-940)	

Results may be unreliable if sample older than 48h

Lab.Comments:

Sample is blood unless otherwise stated

Sample Date/Time
29 Nov 2021 10:46

Clin.Details: On T47: No
Numbness and tingling sensation on the Rt wrist for 3 months....

Request Entered: 29 Nov 2021 15:47 Report Printed: 29 Nov 2021 18:05

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Hospital use only	Clinic	Day Date	Time	Hospital No.

Transport required?

REFERRAL LETTER

MEDICAL IN CONFIDENCE

Unique Care Pathway Number

101025005985H

REFERRAL TO

NeurologyAH
TAY General Referral v6.2

— **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) 01-Dec-2021
Date referral was submitted 01-Dec-2021
Urgency of referral Routine

Armed Forces Personnel, Immediate Families & Veterans
On active service
Condition related to service
Immediate family member

Impairment(s)
Learning
Visual
Hearing

Miscellaneous
Interpreter Required:None
Details of "Other" Language:None

PATIENT DETAILS

Surname	BEATTIE
Forename(s)	STUART
Title	MR
Sex	Male
Date of birth	14-Nov-1960

Patient's address

40 SERVITE HOUSE
136 ALEXANDER STREET
DUNDEE
DD3 7DE

Contact number(s)

CHI no.	1411600134	Voice: 07394015180

REGISTERED GP DETAILS

Name	Dr Nectarios Perdios		
GMC code	7495898	GP code	74900
Practice name	Taycourt Surgery		
Practice code	11058		

Practice address

50 SOUTH TAY STREET
DUNDEE

Contact number(s)

Voice: 01382228228

REFERRING PRACTITIONER DETAILS

Name	Dr Deepa Sanu		
GMC code	6037354	GP code	70076
Practice name	Taycourt Surgery		
Practice code	11058		

Practice address

50 SOUTH TAY STREET
DUNDEE

Contact number(s)

Voice: 01382228228

Periods of Future Unavailability	None provided.

CLINICAL INFORMATION

History of presenting complaint / examination findings / investigation results
Presenting complaint

Description: uncontrolled epilepsy

Comment: Many thanks for offering an appointment for this 61 year old patient who has recently been diagnosed a diabetic, He advises me that he has had a recent increase in frequency of seizures, about 3 this year . He continues on Lamotrigine and epilium chrono.

Examinations and Investigations

Cigarette smoker: Smoking status on date of event: Smoker. 2016-01-22

Drinks rarely: Drinking status on eventdate: Current drinker. 2016-01-22

Most recent height, weight, BMI and Blood Pressure

Height:	1.77	m	Recorded Date: None provided
Weight:	116	Kg	Recorded Date: None provided
BMI:	37	Kg/m^2	Recorded Date: None provided
Blood Pressure:	119/83	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
Laceration NOS	-	-	face, left, below left eye	12-Feb-2012
Abrasion, face	-	-	frontal, right. Right forehead	12-Feb-2012
Keratitis	-	-	welder flash/UV keratitis	22-Apr-2011
Eye injury	-	-	Welder's Flash/UV Keratitis	22-Apr-2011
Epilepsy	-	-	-	05-Dec-

				2007
CVD Risk assessment Letter 3	-	-	-	08-Jan-2007
CVD Risk assessment Letter 3	-	-	-	01-Dec-2006
CVD Risk Assessment Letter 2	-	-	-	01-Nov-2006
H/O: fracture	-	-	Stable undisplaced Weber B fracture left lateral malleolus	28-Jun-2006
CVD Risk Assessment Letter 1	-	-	-	29-May-2006
Epilepsy	-	-	START_DATE=08/06/2004	23-Jun-2004
[D]Seizure NOS	-	-	'Probable generalised tonic seizures'	16-Jun-2004
Epilepsy	-	-	-	12-Jan-2004
Closed #-disloc DIPJ	-	-	Left ring finger	08-Mar-2003
[V]Removal of orthopaed.screws	-	-	and excision of distal end of clavicle	07-Jan-1996
Arthralgia - shoulder	-	-	persistant following reconstruction	09-Nov-1994
H/O: dislocated shoulder	-	-	-	04-Apr-1993
Cls traumtc disloctn shoulder	-	-	-	04-Apr-1993
[X]Overdose - deliberate	-	-	-	14-Dec-1981
Overdose of drug	-	-	-	14-Dec-

1981

Past procedures

Description	Laterality	Modifier	Date performed
[SO]Soft tissue	-	-	04-Jun-2018
Self-referral	-	-	12-Feb-2012
Self-referral	-	-	22-Apr-2011
Self-referral to hospital	-	-	27-Jun-2006
Pt on max tol anticonvuls ther	-	-	07-Feb-2005
Nail operations	-	-	11-Dec-2003
Removal FB from eye NEC	-	-	19-Sep-2003
Other reconstruction joint OS	-	-	09-Nov-1996
Other reconstruction of joint	-	-	04-Nov-1994
Referral for further care	-	-	01-Jan-1900

Current and recent medication

Current repeat medication

Drug name	BNF code	Formulation	Dosage	Frequency	Course started	Duratio
Loperamide 2mg capsules	64042020	capsule	1 CAPSULE TWICE A DAY	-	01-Jun-2018	-
Zopiclone 3.75mg tablets	72417020	tablet	TAKE 1 OR 2 TABLETS A NIGHT F[more]	-	24-Nov-2021	-
Omeprazole 20mg gastro-resistant capsules	69782020	capsule	1 CAPSULE ONCE A DAY	-	04-May-2018	-
Furosemide 40mg tablets	59420020	tablet	1 TABLET MORNING AND 1 AT LIN[more]	-	04-May-2018	-
Solifenacin 5mg tablets	88205020	tablet	1 TABLET ONCE A DAY	-	04-May-2018	-
Lamotrigine 100mg tablets	66060020	tablet	1 TWICE DAILY	-	04-May-2018	-
Epilim Chrono 500 tablets (Sanofi)	74925020	tablet	2 TABS TWICE DAILY	-	04-May-2018	-
Amisulpride	85992020	tablet	1 TABLET	-	04-	-

50mg tablets			TWICE DAILY		May-2018	
Amisulpride 200mg tablets	85993020	tablet	1 TABLET TWICE DAILY	-	04-May-2018	-
Dihydrocodeine 30mg tablets	62538020	tablet	2 THREE TIMES DAILY	-	04-May-2018	-
Sertraline 100mg tablets	74051020	tablet	1 TABLET ONCE A DAY	-	04-May-2018	-

Recent acute medication (last 30 days)

Drug name	BNF code	Formulation	Dosage	Frequency	Course started	Duratio
Gliclazide 40mg tablets	98455020	tablet	1 TABLET ONCE A DAY FOR THREE[more]	-	30-Nov-2021	-
Peptac liquid peppermint (Teva UK Ltd)	97760020	ml	TAKE 10ML TO 20ML AFTER MEALS[more]	-	25-Nov-2021	-
Amitriptyline 10mg tablets	58949020	tablet	TAKE 1-2 TABS AT NIGHT TIME	-	25-Nov-2021	-
Nitrazepam 5mg tablets	58928020	tablet	1 TABLET AT BEDTIME FOR 1 WEE[more]	-	24-Nov-2021	-

Clinical warnings

Additional relevant information
Administrative information

Referred By:Registered GP

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

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13/12/2021-10:39:33

Tayside Clinical Laboratory Services — Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart Sex: M PID: 1411600134 DoB: 14 Nov 1960
Lab No: C218925785
Tay Court Surgery Clinician: Dr Deepa V SANU TCS SAND1G

URINARY MICRO ALBUMIN	14	mg/L	(	0-30)
URINE ALBUMIN/CREATININE	2.8	mg/mmol Creat	(	0.0-3.0)

Lab.Comments:

Sample is blood unless otherwise stated

Sample Date/Time
10 Dec 2021 10:46

Clin.Details: new diabetic

Request Entered: 10 Dec 2021 11:44 Report Printed: 10 Dec 2021 12:30

Scanned Document
14-July-2026 ACOYLE
Additional: Scanned Document

Filename: 68.pdf
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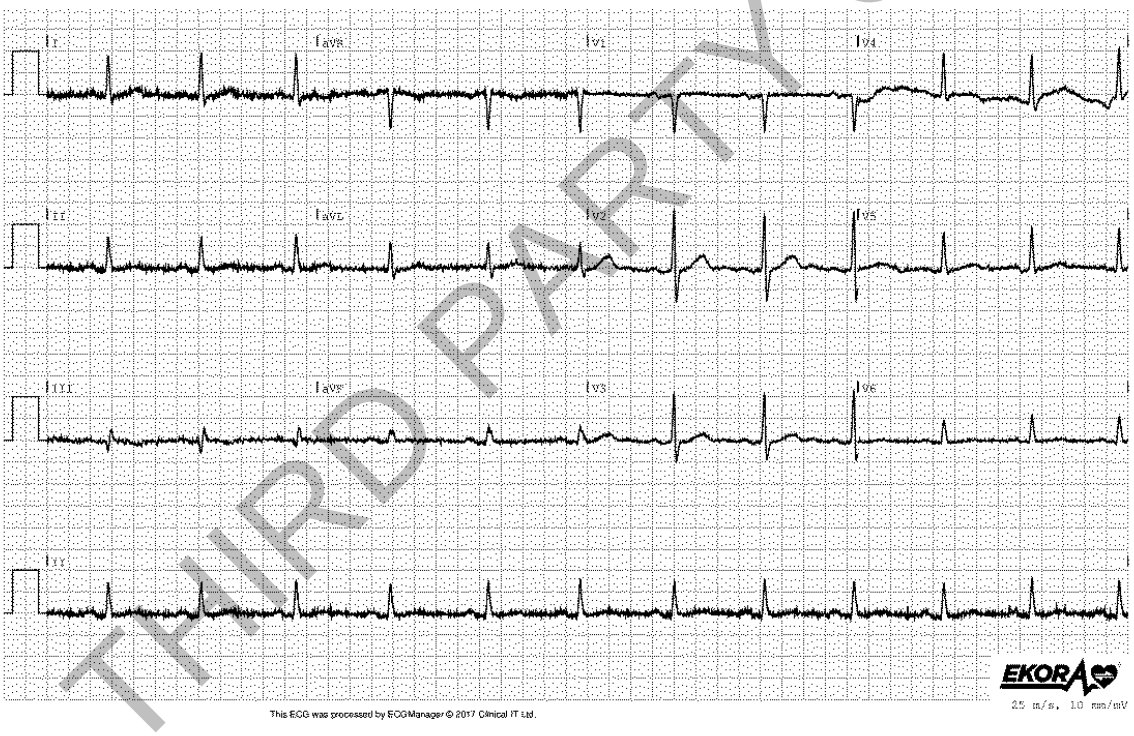
Pages:

*** UNCONFIRMED AUTOMATED ANALYSIS ***

Name : Beattie Stuart
CHI : 1411600134
Date : 08/12/2021
Time : 09:56:29
Site : Tay_Court_Surgery

Heart Rate : 70 bpm
PR int : 190 ms
QRS dur : 96 ms
QT/QTc : 390/410 ms
P-R-T axis : 33 27 10

Summary : ** borderline ECG **
Rhythm : Sinus rhythm
Analysis : -



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13/12/2021-10:41:30

Tayside Clinical Laboratory Services — Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart Sex: M PID: 1411600134 DoB: 14 Nov 1960
Lab No: H218925529
Tay Court Surgery Clinician: Dr Deepa V SANU TCS SAND1G

HGB	142	g/L	(130-180)	WBC	6.3	x10^9/L	(4.0-11.0)
RBC	4.68	x10^12/L	(4.5-6.0)	NE#	3.5	x10^9/L	(2.0-7.5)
HCT	0.422		(0.40-0.52)	LY#	2.0	x10^9/L	(1.5-4.0)
MCV	90.1	fl	(85-105)	MO#	0.7	x10^9/L	(0.2-0.8)
MCH	30.3	pg	(27-32)	EO#	0.08	x10^9/L	(0.0-0.4)
MCC	336	g/L	(320-360)	BA#	0.0	x10^9/L	(0.0-0.1)
				PLT	230	x10^9/L	(150-400)

Lab.Comments:

Sample is blood unless otherwise stated

Sample Date/Time
10 Dec 2021 09:59

Clin.Details: On T47: No
new diabetic review

Request Entered: 10 Dec 2021 11:35 Report Printed: 10 Dec 2021 11:54

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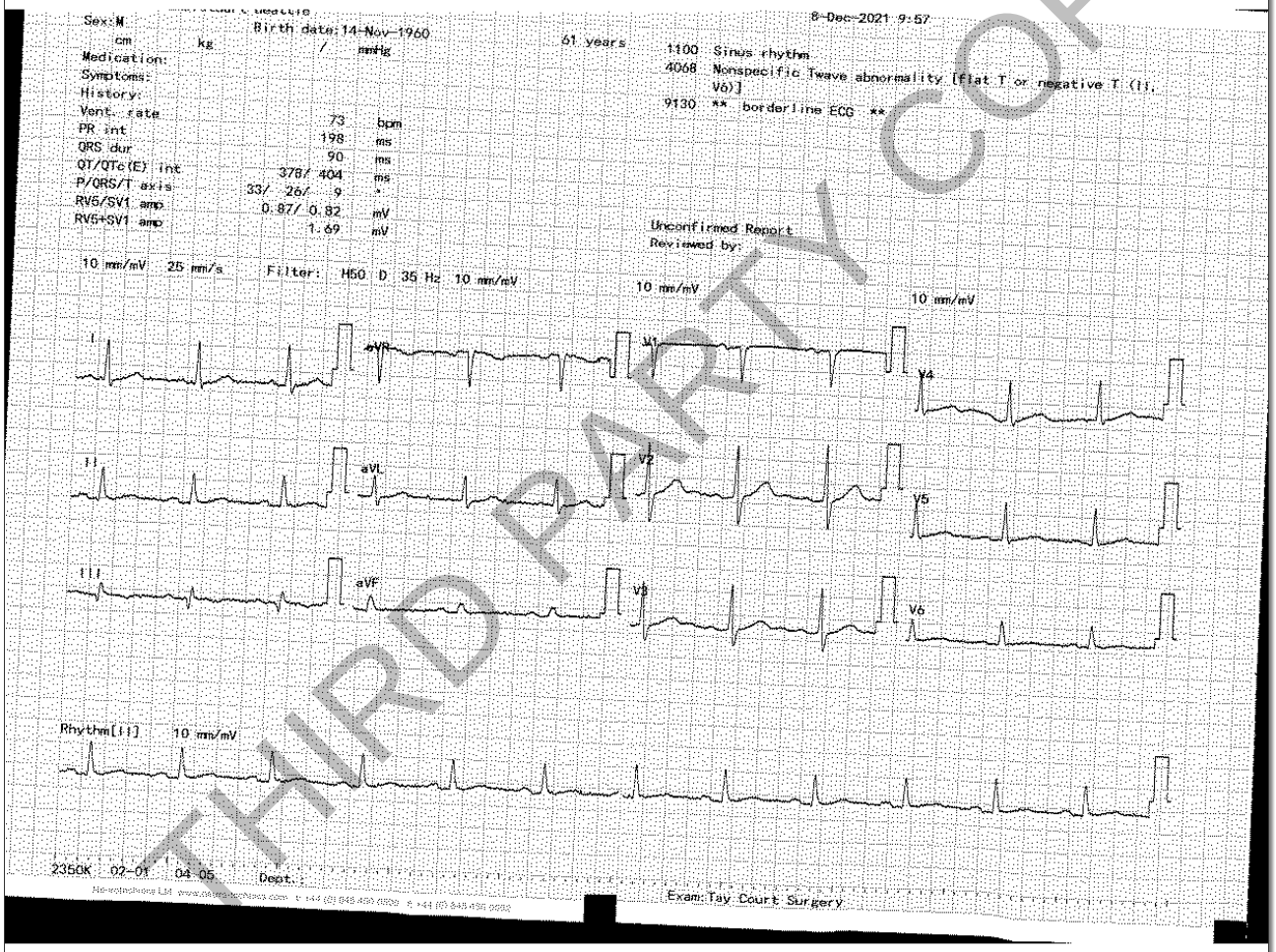

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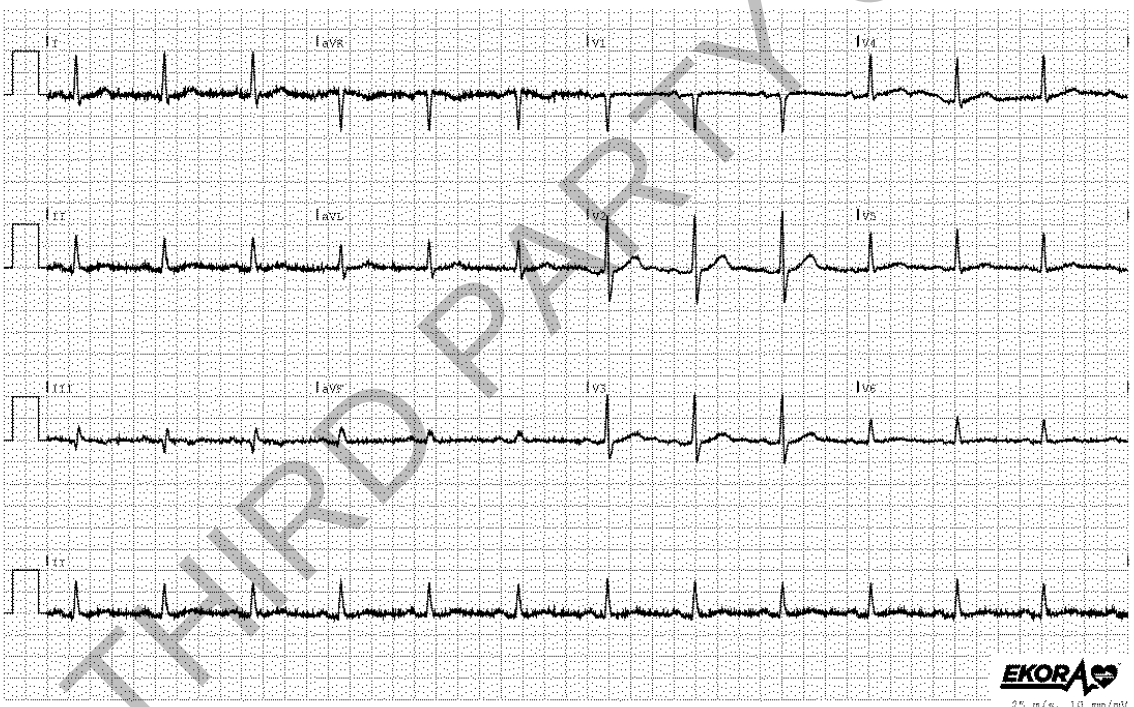
*** UNCONFIRMED AUTOMATED ANALYSIS ***

Name	: Beattie Stuart	**Heart Rate**	: 73 bpm	**Summary**	: ** borderline ECG **
CHI	: 1411600134	**PR int**	: 198 ms	**Rhythm**	: Sinus rhythm
Date	: 08/12/2021	**QRS dur**	: 90 ms	**Analysis**	: -
Time	: 09:57:11	**QT/QTc**	: 378/404 ms		
Site	: Tay_Court_Surgery	**P-R-T axis**	: 33 26 9		



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NHS Tayside

03/12/2021

Dear Colleague

Thank you for your referral. Please see the following outcome from the vetting process.

BACK TO REFERRER - CANCELLED

Patient Name: Stuart Beattie

CHI Number: 1411600134

Referral Date: 02/12/2021

Patient is currently on waiting list for follow up in April 2022.

Yours sincerely

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13/12/2021-10:05:05

Tayside Clinical Laboratory Services — Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart Sex: M PID: 1411600134 DoB: 14 Nov 1960
Lab No: C218925529
Tay Court Surgery Clinician: Dr Deepa V SANU TCS SAND1G

SODIUM	140		mmol/L	(	133-146)
POTASSIUM	4.4		mmol/L	(	3.5-5.3)
CREATININE	62		umol/L	(	62-106)
ESTIMATED GFR	GT60		mL/min		
	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.				
CKD Stage	IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA				
ALT	16		U/L	(	5-55)
BILIRUBINS	3		umol/L	(	0-21)
ALKALINE PHOSPHATASE	149	>	U/L	(	30-130)
ALBUMIN	31	**	g/L	(	35-50)
GGT	27		U/L	(	3-73)
HbAlc IFCC	129	>>	mmol/mol	(	Below 48)
TOTAL CHOLESTEROL	FREQUENCY OF TEST NOT JUSTIFIED.				

Lab.Comments:

Sample is blood unless otherwise stated

Sample Date/Time
10 Dec 2021 09:59

Clin.Details: On T47: No new diabetic review

Page 1 of 2

Request Entered: 10 Dec 2021 11:35 Report Printed: 10 Dec 2021 16:03

Tayside Clinical Laboratory Services Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart Sex: M PID: 1411600134 DoB: 14 Nov 1960
Lab No: C218925529

Tay Court Surgery Clinician: Dr Deepa V SANU TCS SAND1G

TSH	FREQUENCY OF TEST NOT JUSTIFIED.
AKI	Not detected: May not exclude AKI in all cases
iLiFT marginal ALP	http://tinyurl.com/hduvo5t
iLiFT Summary (21)	EXTRACT
	Isolated mild elevation of AP. Repeat AP in 3 months with GGT. Manage in Primary Care. See tiny url above for full details.

Lab.Comments:

Sample is blood unless otherwise stated

Sample Date/Time
10 Dec 2021 09:59

Clin.Details: On T4?: No
new diabetic review

Request Entered: 10 Dec 2021 11:35 Report Printed: 10 Dec 2021 16:03

Hospital use only	Clinic	Day Date	Time	Hospital No.

Transport required?

REFERRAL LETTER

MEDICAL IN CONFIDENCE

Unique Care Pathway Number

1010250065591

REFERRAL TO

Dundee Community Mental Health West TeamG1TW
TAY General Referral v6.2

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

Wedderburn House
1 Edward Street
Dundee
DD1 5NS

Hospitaland **hospital address**

Hospital unit no.: T333C

Email address: -

Date of Referral (set by referrer) 02-Dec-2021

Date referral was submitted 02-Dec-2021

Urgency of referral Routine

Armed Forces Personnel, Immediate Families & Veterans

On active service
Condition related to service
Immediate family member

Impairment(s)

Learning
Visual
Hearing

Miscellaneous

Interpreter Required:None
Details of "Other" Language:None

PATIENT DETAILS

Surname	BEATTIE
Forename(s)	STUART
Title	MR
Sex	Male
Date of birth	14-Nov-1960

Patient's address

40 SERVITE HOUSE
136 ALEXANDER STREET
DUNDEE
DD3 7DE

Contact number(s)

CHI no.	1411600134	Voice: 07394015180

REGISTERED GP DETAILS

Name	Dr Nectarios Perdios	**Practice address**	50 SOUTH TAY STREET DUNDEE
GMC code	7495898 GP code 74900		
Practice name	Taycourt Surgery		
Practice code	11058	Contact number(s)	Voice: 01382228228

REFERRING PRACTITIONER DETAILS

Name	Dr Balakrishnan Pillai	**Practice address**	50 SOUTH TAY STREET DUNDEE
GMC code	5204709 GP code 78557		
Practice name	Taycourt Surgery		
Practice code	11058	Contact number(s)	Voice: 01382228228

Periods of Future Unavailability	None provided.

CLINICAL INFORMATION

History of presenting complaint / examination findings / investigation results
Presenting complaint

Description: See below

Comment: I would be grateful if this man could be added to the waiting list. He missed his last appointment in November 20 and in your letter it was stated he would be sent another appointment for 6 months but he has not received any further appointments. He appears to be struggling with his mental health and called Wedderburn House and was told he required a new referral. I would therefore be grateful if he could be seen.
Many thanks

Examinations and Investigations

Cigarette smoker: Smoking status on date of event: Smoker. 2016-01-22

Drinks rarely: Drinking status on eventdate: Current drinker. 2016-01-22

Most recent height, weight, BMI and Blood Pressure

Height:	1.77	m	Recorded Date: None provided
Weight:	116	Kg	Recorded Date: None provided
BMI:	37	Kg/m^2	Recorded Date: None provided
Blood Pressure:	119/83	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
Laceration NOS	-	-	face, left, below left eye	12-Feb-2012
Abrasion, face	-	-	frontal, right. Right forehead	12-Feb-2012
Keratitis	-	-	welder flash/UV keratitis	22-Apr-2011
Eye injury	-	-	Welder's Flash/UV Keratitis	22-Apr-

				2011
Epilepsy	-	-	-	05-Dec-2007
CVD Risk assessment Letter 3	-	-	-	08-Jan-2007
CVD Risk assessment Letter 3	-	-	-	01-Dec-2006
CVD Risk Assessment Letter 2	-	-	-	01-Nov-2006
H/O: fracture	-	-	Stable undisplaced Weber B fracture left lateral malleolus	28-Jun-2006
CVD Risk Assessment Letter 1	-	-	-	29-May-2006
Epilepsy	-	-	START_DATE=08/06/2004	23-Jun-2004
[D]Seizure NOS	-	-	'Probable generalised tonic seizures'	16-Jun-2004
Epilepsy	-	-	-	12-Jan-2004
Closed #-disloc DIPJ	-	-	Left ring finger	08-Mar-2003
[V]Removal of orthopaed.screws	-	-	and excision of distal end of clavicle	07-Jan-1996
Arthralgia - shoulder	-	-	persistant following reconstruction	09-Nov-1994
H/O: dislocated shoulder	-	-	-	04-Apr-1993
Cls traumtc disloctn shoulder	-	-	-	04-Apr-1993
[X]Overdose - deliberate	-	-	-	14-Dec-

					1981
Overdose of drug	-	-	-		14-Dec-1981

Past procedures

Description	Laterality	Modifier	Date performed
[SO]Soft tissue	-	-	04-Jun-2018
Self-referral	-	-	12-Feb-2012
Self-referral	-	-	22-Apr-2011
Self-referral to hospital	-	-	27-Jun-2006
Pt on max tol anticonvuls ther	-	-	07-Feb-2005
Nail operations	-	-	11-Dec-2003
Removal FB from eye NEC	-	-	19-Sep-2003
Other reconstruction joint OS	-	-	09-Nov-1996
Other reconstruction of joint	-	-	04-Nov-1994
Referral for further care	-	-	01-Jan-1900

Current and recent medication

Current repeat medication

Drug name	BNF code	Formulation	Dosage	Frequency	Course started	Duratio
Loperamide 2mg capsules	64042020	capsule	1 CAPSULE TWICE A DAY	-	01-Jun-2018	-
Zopiclone 3.75mg tablets	72417020	tablet	TAKE 1 OR 2 TABLETS A NIGHT F[more]	-	24-Nov-2021	-
Omeprazole 20mg gastro-resistant capsules	69782020	capsule	1 CAPSULE ONCE A DAY	-	04-May-2018	-
Furosemide 40mg tablets	59420020	tablet	1 TABLET MORNING AND 1 AT LIN[more]	-	04-May-2018	-
Solifenacin 5mg tablets	88205020	tablet	1 TABLET ONCE A DAY	-	04-May-2018	-
Lamotrigine 100mg tablets	66060020	tablet	1 TWICE DAILY	-	04-May-2018	-
Epilim Chrono	74925020	tablet	2 TABS	-	04-	-

500 tablets (Sanofi)			TWICE DAILY		May-2018	
Amisulpride 50mg tablets	85992020	tablet	1 TABLET TWICE DAILY	-	04-May-2018	-
Amisulpride 200mg tablets	85993020	tablet	1 TABLET TWICE DAILY	-	04-May-2018	-
Dihydrocodeine 30mg tablets	62538020	tablet	2 THREE TIMES DAILY	-	04-May-2018	-
Sertraline 100mg tablets	74051020	tablet	1 TABLET ONCE A DAY	-	04-May-2018	-

Recent acute medication (last 30 days)

Drug name	BNF code	Formulation	Dosage	Frequency	Course started	Duratio
Gliclazide 40mg tablets	98455020	tablet	1 TABLET ONCE A DAY FOR THREE[more]	-	30-Nov-2021	-
Peptac liquid peppermint (Teva UK Ltd)	97760020	ml	TAKE 10ML TO 20ML AFTER MEALS[more]	-	25-Nov-2021	-
Amitriptyline 10mg tablets	58949020	tablet	TAKE 1-2 TABS AT NIGHT TIME	-	25-Nov-2021	-
Nitrazepam 5mg tablets	58928020	tablet	1 TABLET AT BEDTIME FOR 1 WEE[more]	-	24-Nov-2021	-

Clinical warnings

Additional relevant information
Administrative information

Referred By:Locum

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

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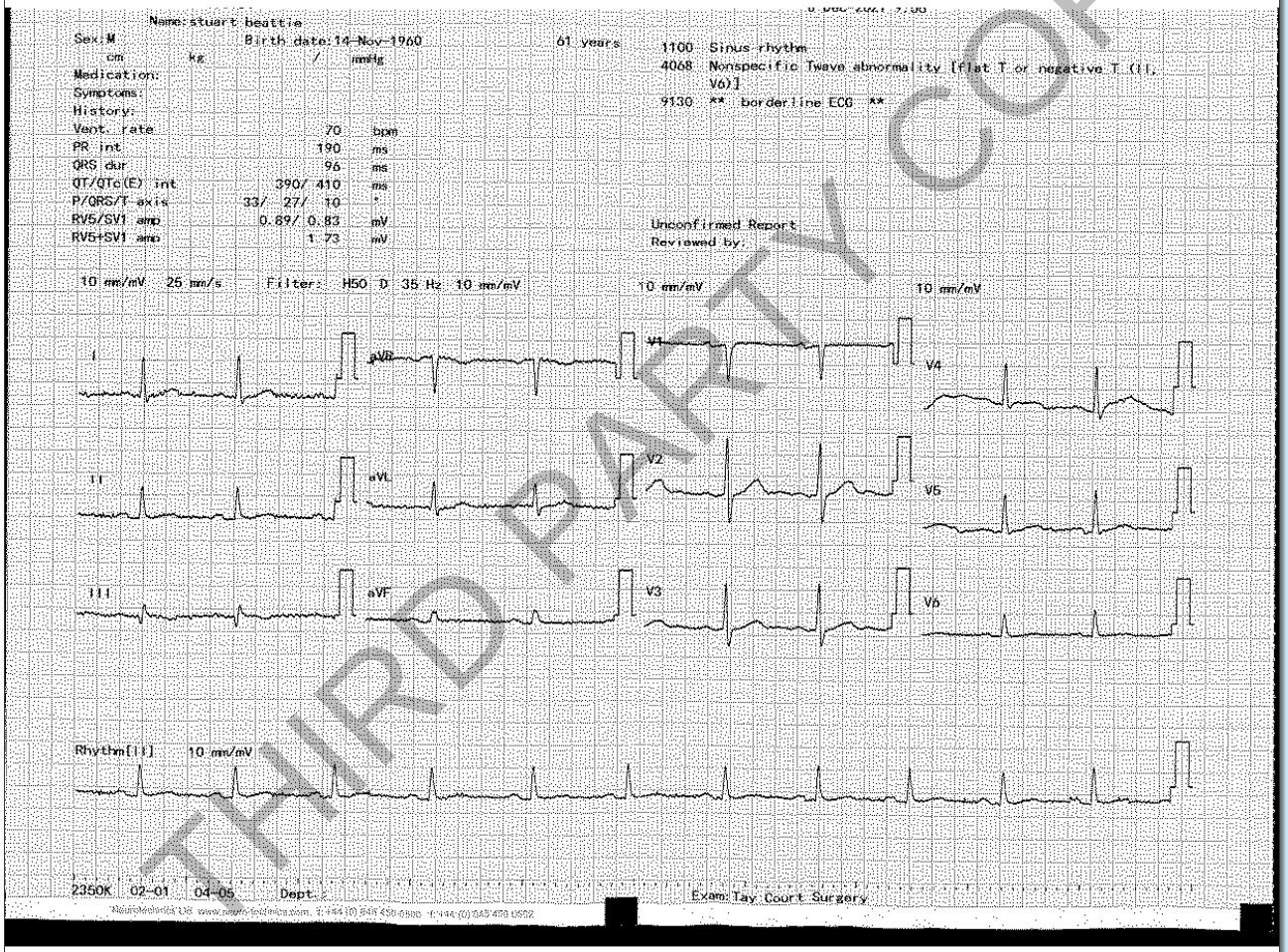

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NHS Tayside: Clinical Report - Kings Cross Hospital

BEATTIE, STUART DoB : **14-Nov-1960**
40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE Hosp. No. :
Ref. Locn. : **GENERAL PRACTITIONER** CRIS No. : **189863**
Ref. Source : **TAY COURT SURGERY, 50 SOUTH TAY STREET, DUNDEE, DD1 1PF** CHI No. : **1411600134**
Referrer : DR BALAKRISHNAN THIRAVIAM PILLAI

VERIFIED Verified By : Dr J TAINSH 12-Jan-2022
Typed By : TAIJ 12-Jan-2022

Clinical History :

Pain and stiffness on the Rt wrist and fingers for 3 months and numbness on the tips of all fingers...
ENTERED BY: Balakrishnan Pillai (medical)

BLEEP: GP - 07968 839 555

Pain and stiffness on the Rt wrist and fingers for 3 months and numbness on the tips of all fingers...
ENTERED BY: Balakrishnan Pillai (medical)

BLEEP: GP - 07968 839 555

VERIFIED Verified By : Dr J TAINSH 12-Jan-2022
Typed By : TAIJ 12-Jan-2022

Event Number : E-6797587 Examination Date : **12-Jan-2022**
Copy To : , Attendance Number : 5
Examinations : **XR Fingers Rt,XR Wrist Rt**

NHS Tayside: Clinical Report - Kings Cross Hospital Page 2 of 2

BEATTIE, STUART DoB : **14-Nov-1960**
40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE Hosp. No. :
Ref. Locn. : **GENERAL PRACTITIONER** CRIS No. : **189863**
Ref. Source : **TAY COURT SURGERY, 50 SOUTH TAY STREET, DUNDEE, DD1 1PF** CHI No. : **1411600134**
Referrer : DR BALAKRISHNAN THIRAVIAM PILLAI

See below

VERIFIED Verified By : Dr J TAINSH 12-Jan-2022
Typed By : TAIJ 12-Jan-2022

Minimal degenerative changes, no convincing evidence of any erosive arthropathy.
JT

Event Number : E-6797587 Examination Date : **12-Jan-2022**
Copy To : , Attendance Number : 5
Examinations : **XR Fingers Rt,XR Wrist Rt**

Department of Neurology
Operational Unit
NHS Tayside
Ninewells Hospital
Dundee
DD1 9SY

01382 632134
01382 425739
www.nhstayside.scot.nhs.uk

Dr D Sanu
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

Date	03/03/2022
Clinic Date	22/02/2022
Your Ref	
Our Ref	PS/FJ/ **1411600134**
Enquiries to	Neurology Secretaries
Extension	32134
Direct Line	01382 632134
Email	fiona.jamieson2@nhs.scot

Dear Dr Sanu

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE DOB: 14/11/1960

Current Anti Epileptic Medication: Sodium Valproate 1 gram bd
Lamotrigine 100 mg bd

Thank you for your recent referral regarding this patient. I spoke to Stuart for a telephone review of his epilepsy in the nurse led epilepsy clinic on the 22nd February 2022.

It was quite difficult to get an accurate seizure record from Stuart. The thinks he has had two blackouts which he has little recollection of, both have been in the toilet. On one occasion he has hit his head off the sink. He thinks one was December 2021 and another more recent than that. He states that he gets not warning then feels dizzy and everything goes fuzzy in his head. That is his last recollection and he falls to the ground. Stuart was incontinent both times but there was no tongue biting. There was no confusion post event but it took 20 minutes for him fully to return to normal. Unfortunately none of the events have been witnessed recently as he lives alone. Prior to these he thinks he has been free from seizures for approximately three years.

We discussed triggers for seizures. He has ongoing poor mental health but I appreciate that he is supported by the community mental health team. He has sleep disturbance which is not a new issue. He only drinks alcohol in moderation and has never taken recreational drugs. He also has a recent diagnosis of type II diabetes.

I discussed Stuart's care with his consultant neurologist Dr Morrison and we should continue to treat these as seizures. Therefore on Dr Morrison's recommendation I would be grateful if you could introduce Lacosamide.

Please prescribe Lacosamide as follows:

Week 1 50mg in the evening
Week 2 50mg in the morning, 50mg in the evening
Week 3 50mg in the morning, 100mg in the evening
Week 4 100mg in the morning, 100mg in the evening

Lacosamide is generally well tolerated but common side effects include dizziness, headache, diplopia and nausea. Mood problems may occur as may poor balance.

Please ensure the same manufacturer/brand is dispensed consistently.

I have already done an ensemble in respect of this via the clinical portal.

No change to Stuart's Sodium Valproate 1 gram bd or Lamotrigine 100 mg bd is recommended.

Stuart has my contact details and knows that he can contact me if he has any concerns otherwise he will be reviewed again in the epilepsy clinic in due course.

Yours sincerely

Authorised on 08/03/2022 12:29:29 by Mrs Pauline Smith.

Mrs Pauline Smith
Epilepsy Specialist Nurse
Non Medical Prescriber
NMC no: 93I0689S

TAY.epilepsyadvice@nhs.scot

(P) Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE

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Tayside Clinical Laboratory Services Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart Sex: M PID: 1411600134 DoB: 14 Nov 1960
Lab No: C2291364B3

Tay Court Surgery Clinician: Dr Nectarios PERDIOS TCS PERN1G

HbAlc IFCC 74 >> mmol/mol (Below 48)

25/03/2022-12:36:55

Lab.Comments:

Sample is blood unless otherwise stated

Sample Date/Time
24 Mar 2022 08:24

Clin.Details: newly diagnosed diabetic

Request Entered: 24 Mar 2022 12:29 Report Printed: 24 Mar 2022 16:30

NHS Tayside Communication to GP

Ward/Clinic	Nurse led epilepsy clinic	CHI	1411600134
Hospital	Ninewells Hospital	Surname	BEATTIE
Clinician	Pauline Smith	First Name	STUART
Specialty	NEUROLOGY	Address	40 SERVITE HOUSE 136 ALEXANDER STREET DD3 7DE
Date	24/02/2022	GP/Address	Tay Court Surgery 50 South Tay Street Dundee DD1 1PF

Dear Doctor,

The above patient was reviewed today; please accept this brief communication.

Provisional/Diagnosis is: Epilepsy - recent events in keeping with generalised tonic clonic seizures

Comment/Recommendations: Please introduce Lacosamide for the treatment of Stuarts seizures - no change to Sodium Valproate or Lamotrigine dose is recommended
Please prescribe Lacosamide as follows:

Week 1 50mg in the evening
Week 2 50mg in the morning, 50mg in the evening
Week 3 50mg in the morning, 100mg in the evening
Week 4 100mg in the morning, 100mg in the evening

Lacosamide is generally well tolerated but common side effects include dizziness, headache, diplopia and nausea. Mood problems may occur as may poor balance.

Please ensure the same manufacturer/brand is dispensed consistently.

Follow up by clinic required: Yes

Follow up by clinic required: ESN clinic 4 months

Specific Monitoring Required: No
The following treatment is recommended:

	Medication	Dose	Frequency	Indication	Duration
1.	Lacosamide	titrate as above	twice dialy	epilepsy	ongoing

Is any Medication to be discontinued: No

Pauline Smith | Specialist Nurse, NMP NMC no 93I0689S | Tel:01382 740237
Ninewells Switch Board Tel:01382 660111

Filename: 59.pdf
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NHS Tayside: Clinical Report - Ninewells Hospital Page 1 of 2

BEATTIE, STUART DoB : **14-Nov-1960**
40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE Hosp. No. :
Ref. Locn. : **GENERAL PRACTITIONER** CRIS No. : **189863**
Ref. Source : **TAY COURT SURGERY, 50 SOUTH TAY STREET, DUNDEE, DD1 1PF** CHI No. : **1411600134**
Referrer : DR D V SANU

VERIFIED Verified By : Prof IRIS GRUNWALD 23-Jun-2022
Typed By : IRISG 23-Jun-2022

Clinical History :

pachground history of epilepse, recent 2 episodes of collapse not in keeping with epilepsy . Weakness in right upperlimb and lower limb , increased conusion ? vascular event ? mass
ENTERED BY: Deepa Sanu (Medical)

BLEEP: 01382 228228

VERIFIED Verified By : Prof IRIS GRUNWALD 23-Jun-2022
Typed By : IRISG 23-Jun-2022

CT Head :
Normal size of the ventricles. Slightly advanced, generalised brain involution without regional predominance regarding the medial temporal lobes or hippocampus. No significant small vessel disease. No intracranial haemorrhage, space occupying lesion or large territory infarct. No Arnold-Chiari

Event Number : E-6810167 Examination Date : **17-Jun-2022**
Copy To : , Attendance Number : 20
Examinations : **CT Head**

NHS Tayside: Clinical Report - Ninewells Hospital Page 2 of 2

BEATTIE, STUART DoB : **14-Nov-1960**
40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE Hosp. No. :
Ref. Locn. : **GENERAL PRACTITIONER** CRIS No. : **189863**
Ref. Source : **TAY COURT SURGERY, 50 SOUTH TAY STREET, DUNDEE, DD1 1PF** CHI No. : **1411600134**
Referrer : DR D V SANU

malformation. Normal size of the pituitary gland. No sinusitis or mastoiditis. No destructive bone lesion.
Conclusion: Slightly advanced, generalised brain involution. However this has not significantly progressed since 2017.

Event Number : E-6810167 Examination Date : **17-Jun-2022**
Copy To : , Attendance Number : 20
Examinations : **CT Head**

20/09/2022-10:17:59

Tayside Clinical Laboratory Services — Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart — Sex: M — PID: 1411600134 — DoB: 14 Nov 1960
Lab No: C229510041
Tay Court Surgery — Clinician: Dr Balakrishnan PILLAI — TCS PILB1G

SODIUM	130	<	mmol/L	(	133-146)
POTASSIUM	3.9		mmol/L	(	3.5-5.3)
CREATININE	66		umol/L	(	62-106)
ESTIMATED GFR	GT60		mL/min		

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.

CKD Stage	IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA				
ALT	29		U/L	(	5-55)
BILIRUBINS	5		umol/L	(	0-21)
ALKALINE PHOSPHATASE	141	>	U/L	(	30-130)
ALBUMIN	39		g/L	(	35-50)
GLUCOSE (preserved tube)	26.8	>>	mmol/L	(	3.3-5.8)
TSH	2.75		mU/L	(	0.4-4.0)
C-REACTIVE PROTEIN	24	>	mg/L	(	0-10)

Lab.Comments: 15/09/22 13:38 Failed Phone-RESULTS NOT PHONED
15/09/22 13:41 Failed Phone-TELEPHONE NOT ANSWERED
Results for GLP phoned to 01382 228228 JANICE at 14:34
15-Sep-2022

Sample is blood unless otherwise stated

Sample Date/Time
15 Sep 2022 10:19

Clin.Details: On T47: No
Raised BP and Poorly controleld diabetic...

Request Entered: 15 Sep 2022 11:42 — Report Printed: 16 Sep 2022 16:31

Tayside Clinical Laboratory Services Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart Sex: M PID: 1411600134 DoB: 14 Nov 1960
Lab No: G229510041
Tay Court Surgery Clinician: Dr Balakrishnan PILLAI TCS PILB1G

HbA1c IFCC	119	>> mmol/mol	(Below 48)	
TOTAL CHOLESTEROL	5.53	> mmol/L	(0.00-5.00)	
HDL-CHOLESTEROL	0.87	mmol/L	(0.60-2.50)	
TOTAL CHOL/HDL-CHOL	6.30	.		
AKI	Not detected: May not exclude AKI in all cases			

Lab.Comments:

Sample is blood unless otherwise stated

Sample Date/Time
15 Sep 2022 10:19

Clin.Details: On T4?: No
Raised BP and Poorly controleld diabetic...

Request Entered: 15 Sep 2022 11:42 Report Printed: 16 Sep 2022 16:31

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14-July-2026 ACOYLE
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16/09/2022-09:47:56

Tayside Clinical Laboratory Services — Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart Sex: M PID: 1411600134 DoB: 14 Nov 1960
Lab No: H229510041
Tay Court Surgery Clinician: Dr Balakrishnan PILLAI TCS PILB1G

HGB	155	g/L	(130-180)	WBC	8.0	x10^9/L	(4.0-11.0)
RBC	5.42	x10^12/L	(4.5-6.0)	NE#	4.6	x10^9/L	(2.0-7.5)
HCT	0.466		(0.40-0.52)	LY#	2.5	x10^9/L	(1.5-4.0)
MCV	86.0	fl	(85-105)	MO#	0.6	x10^9/L	(0.2-0.8)
MCH	28.6	pg	(27-32)	EO#	0.15	x10^9/L	(0.0-0.4)
MCC	333	g/L	(320-360)	BA#	0.1	x10^9/L	(0.0-0.1)
				PLT	251	x10^9/L	(150-400)

PV 1.85 H mPa.s. (1.5-1.72)

Lab.Comments:

Sample is blood unless otherwise stated

Sample Date/Time
15 Sep 2022 10:19

Clin.Details: On T47: No
Raised BP and Poorly controleid diabetic...

Request Entered: 15 Sep 2022 11:42 Report Printed: 15 Sep 2022 13:04

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BHS
British Hypertension Society

NHS
National Institute for Health Research
Collaboration for Leadership in Applied Health Research and Care (CLAHRC) Greater Manchester

Home Blood Pressure Diary

Average BP
(excluding BP readings from the first day where appropriate)
140/85

Name: Stuart Beattie DOB: 14/11/1960

Patient/Hospital number *(if appropriate)*: .....

Target Blood Pressure *(if appropriate)*: lower than ..... / .....

Arm used: Left ☐ Right ☐

Make/Model of monitor used: .....Size of cuff: Small ☐ Medium ☐ Large ☐

Please monitor and record your blood pressure at home for 7 consecutive days (unless you have been advised otherwise). On each day, monitor your blood pressure on two occasions- in the morning (between 6am and 12noon) and again in the evening (between 6pm and midnight). On each occasion take a minimum of two readings, leaving at least a minute between each. If the first two readings are very different, take 2 or 3 further readings.

Use the table below to record all of your blood pressure readings. The numbers you write down should be the same as those that appear on the monitor screen- do not round the numbers up or down. In the comments section, you should also write down anything that could have affected your reading, such as feeling unwell or changes in your medication. You do not need to record your pulse/heart rate. For information about taking your blood pressure, please read the 'Home Blood Pressure Monitoring Explained' leaflet. **Remember to take this diary with you to your next appointment/review.**

Date	Time	Systolic BP (top number)	Diastolic BP (bottom number)	Notes (e.g. medication changes, feeling unwell)
15.9.22	~~AM~~	144	94	
15 9 22	PM.	151	88	
16.9.22	AM	166	85	
16 9 22	PM	164	96	
17.9.22	AM	116	71	
17.9.22	PM	127	73	
18 9 22	AM	126	74	
18 9 22	PM	145	85	
19 9 22	AM	134	81	
19 9 22	PM	145	89	

This resource is a joint production of the NIHR Collaboration for Leadership in Applied Health Research and Care (CLAHRC) Greater Manchester and the British Hypertension Society

BHS
British Hypertension Society

NHS
National Institute for Health Research

Collaboration for Leadership in Applied Health Research and Care (CLAHRC) Greater Manchester

Home Blood Pressure Diary Continued...

Name: ..... DOB: .....

Patient/Hospital number *(if appropriate)*: .....

Date	Time	Systolic BP (top number)	Diastolic BP (bottom number)	Notes (e.g. medication changes, feeling unwell)
20 9 22	AM	125	75	
20 9 22	PM	147	117	
		1526	1028	140/85

Just for Scanning. Lesley

This resource is a joint production of the NIHR Collaboration for Leadership in Applied Health Research and Care (CLAHRC) Greater Manchester and the British Hypertension Society

NHS Tayside: Clinical Report - Kings Cross Hospital Page 1 of 1

BEATTIE, STUART DoB : **14-Nov-1960**
40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE Hosp. No. :
Ref. Locn. : **GENERAL PRACTITIONER** CRIS No. : **189863**
Ref. Source : **TAY COURT SURGERY, 50 SOUTH TAY STREET, DUNDEE, DD1 1PF** CHI No. : **1411600134**
Referrer : DR BALAKRISHNAN THIRAVIAM PILLAI

VERIFIED Verified By : Dr J TAINSH 22-Sep-2022
Typed By : TAIJ 22-Sep-2022

Clinical History :

SOB both at rest and on exertion...Pt is a non smoker...
ENTERED BY: Balakrishnan Pillai (medical)

BLEEP: GP - 07968 839 555

VERIFIED Verified By : Dr J TAINSH 22-Sep-2022
Typed By : TAIJ 22-Sep-2022

The heart size and mediastinal contour are normal and the lungs appear well inflated and clear.
JT

Event Number : E-7076971 Examination Date : **22-Sep-2022**
Copy To : . Attendance Number : 6
Examinations : **XR Chest**

Tayside Adult Weight Management Service
Nutrition & Dietetic Department

NHS Tayside
Kings Cross Hospital
Clepington Road
Dundee
DD3 8EA

www.nhstayside.scot.nhs.uk

Dr NP Perdios
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

Date	04/10/2022
Your Ref	
Our Ref	LL/LL/ **1411600134**
Enquiries to	
Extension	
Direct Line	01382 424195
Email	tay.tawms@nhs.scot

Dear Dr Perdios

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE DOB: 14/11/1960

The above patient has recently self signed up to a digital Diabetes Education Programme, provided remotely by Oviva as part a project to improve access to Type 2 diabetes education. The programme is currently available for patients who have been diagnosed with Type 2 diabetes in the last three years. The information about this programme was promoted by NHS Tayside through social media and is supported by NHST Diabetes MCN & Adult Weight Management Service.

Oviva 'Diabetes Support' is a 12 week, type 2 diabetes structured education and behaviour change programme which requires the patient to opt in and agree to remote support and digital education over the 12 weeks. Below is a link to the programme for your information:

https://ovico.ch/dsetayside

We will write again to update you when they have completed the programme.

Yours sincerely

Authorised on 04/10/2022 11:13:18 by Typist Louise Lyttle, not verified by Consultant.

Louise Lyttle
Weight Management Support Worker

Tayside Adult Weight Management Service
Nutrition & Dietetic Department
NHS Tayside
Kings Cross Hospital
Clepington Road
Dundee
DD3 8EA
www.nhstayside.scot.nhs.uk

Stuart Beattie
40 Servite House
136 Alexander Street
Dundee
DD3 7DE

Date	22/11/2022
Your Ref	
Our Ref	LL/SK/ 1411600134
Enquiries to	TAWMS
Extension	
Direct Line	01382 424195

Dear Stuart Beattie

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, DD3 7DE DOB: 14/11/1960

You recently self-referred to Tayside Adult Weight Management Service because you have recently been diagnosed to have Type 2 Diabetes.

Unfortunately you started the Oviva 12 week diabetes education programme but didn't complete following several attempts from Oviva to contact you and have now been discharged from the programme.

Yours sincerely

Authorised on 22/11/2022 13:51:17 by Typist Susan King, not verified by Consultant.

Louise Lyttle
Weight Management Support Worker

(D) Dr NP Perdios, Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF

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22/02/2024-10:36:28

Tayside Clinical Laboratory Services — Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart Sex: M PID: 1411600134 DoB: 14 Nov 1960
Lab No: C241676456
Tay Court Surgery Clinician: Dr Deepa V SANU TCS SAND1G

URINARY MICRO ALBUMIN	LT3	mg/L	(0-30)	
URINE ALBUMIN/CREATININE	LT0.1	mg/mmol Creat	(0.0-3.0)	

Lab.Comments:

Sample is blood unless otherwise stated

Sample Date/Time
21 Feb 2024 12:05

Clin.Details: diabetic review urine

Request Entered: 21 Feb 2024 15:23 Report Printed: 21 Feb 2024 16:08

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Filename: 52.pdf
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Pages:

21/02/2024-13:29:26

Tayside Clinical Laboratory Services — Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart — Sex: M — PID: 1411600134 — DoB: 14 Nov 1960
Lab No: C241662846

Tay Court Surgery — Clinician: Dr Deepa V SANU — TCS SAND1G

SODIUM	136	mmol/L	(133-146)	
POTASSIUM	4.5	mmol/L	(3.5-5.3)	
CREATININE	63	umol/L	(62-106)	
ESTIMATED GFR	GT60	mL/min		
		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.		
CKD Stage	IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA			
HbAlc IFCC	75 >>	mmol/mol	(Below 48)	
AKI	NOT AVAILABLE			

Lab.Comments:

Sample is blood unless otherwise stated

Sample Date/Time
15 Feb 2024 09:47

Clin.Details: Annual diabetic review bloods

Request Entered: 15 Feb 2024 16:50 — Report Printed: 16 Feb 2024 22:43

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Filename: 51.pdf
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Pages:

21/02/2024-13:17:47

Tayside Clinical Laboratory Services — Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart — Sex: M — PID: 1411600134 — DoB: 14 Nov 1960
Lab No: C241662846

Tay Court Surgery — Clinician: Dr Deepa V SANU — TCS SAND1G

SODIUM	136	mmol/L	(	133-146)
POTASSIUM	4.5	mmol/L	(	3.5-5.3)
CREATININE	63	umol/L	(	62-106)
ESTIMATED GFR	GT60	mL/min		

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.

CKD Stage	IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA			
HbA1c IFCC	75 >>	mmol/mol	(	Below 48)
AKI	NOT AVAILABLE			

Lab.Comments:

Sample is blood unless otherwise stated

Sample Date/Time
15 Feb 2024 09:47

Clin.Details: Annual diabetic review bloods

Request Entered: 15 Feb 2024 16:50 — Report Printed: 16 Feb 2024 13:47

NHS Tayside

Department of Neurology
Operational Unit
NHS Tayside
Ninewells Hospital
Dundee
DD1 9SY

Dr NP Perdios
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

Date	12/02/2024
Clinic Date	06/02/2024
Your Ref	
Our Ref	PS/KL/ **1411600134**
Enquiries to	Neurology Secretary
Extension	32134
Direct Line	01382 632134
Email	

Dear Dr Perdios

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE DOB: 14/11/1960

Stuart was due to have a telephone review in the Nurse Led Epilepsy Clinic on the 6th February 2024. However he got in contact with the Appointments Office before this stating he was unable to attend this appointment. This is the second re-arranged appointment in 2 weeks that Stuart has not been able to attend, therefore, I have discharged him with an open appointment.

If he wishes to be seen again in the epilepsy service he should get in contact with the department of neurology on the above telephone number within 4 weeks of receipt of this letter otherwise he will be discharged with an open appointment.

Yours sincerely

Authorised on 26/02/2024 08:19:01 by Mrs Pauline Smith.

Mrs Pauline Smith
Epilepsy Specialist Nurse
Non Medical Prescriber
NMC no: 93I0689S

(P) Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE

Filename: 48.pdf
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For filing tay.taysidepodiatry@nhs.scot

Box for Barcode

NHS Tayside Podiatry Assessment – Self Referral Form

Please complete ALL sections of this form by filling in the boxes and answering all of the questions. INCOMPLETE REFERRAL FORMS WILL BE RETURNED.

Personal Information

Title MR Forename STUART Surname BEATTIE

Date of Birth 14/11/60 0134

Address 40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE

Postcode DD3 7DE

Tel no (including STD code) — Mobile no 07355136000

Emergency contact or carer contact.

Name ..... Tel no .....

Address .....

Do you have a carer to help with your daily needs? Yes ☐ No ☑

Do you require a translator/interpreter Yes ☐ No ☑

Language .....

	Reason for Referral – complete relevant boxes below	Yes	No
1	A skin complaint?		
2	A nail complaint?		
3	A foot deformity?		
4	Muscle or joint pain in the foot?		
5	Do you wish surgical removal of a toenail?		
6	Is your foot condition discharging or weeping?		
7	Are you currently taking antibiotics for the foot condition that you are contacting the Podiatry Service about? If the answer is YES, for how long? .....weeks.		
8	Does your foot condition affect your ability to walk (i.e. make you limp) or carry out your daily tasks?		

THB(MR)710

	Medical Information and Medication
1	Do you have Diabetes? Yes ☑ No ☐ If YES, please tick the box that represents your foot risk score. Low Risk ☐ Moderate Risk ☑ High Risk ☐ High Risk in remission ☐ Active Foot Disease ☐ If you are unsure of this, your GP surgery will be able to confirm your score.
2	Please list any other medical conditions that you are currently being treated for or have been treated for in the past. EPILEPSY. DEPRESSION
3	Please list all prescribed medication that you are currently taking.(or attach list) OMEPRAZOLE 20mg FUROSEMIDE 40mg BD. SULFENACIN 5mg SERTRALINE 100mg EPILIM CHRONO 500 X2 BD LAMOTRIGINE 100mg BD DIHYDROCODEINE 30mg X2 TID ~~LOCASAMIDE 100mg BD~~ AMISULPRIDE 200mg BD AMISULPRIDE 50mg BD ZOPICLONE 3.75mg 1 or 2 METFORMIN 500mg X2 BD ATORVASTATIN 20mg GLICLAZIDE 80mg EMPAGLIFLOZIN 10mg LOPERAMIDE 2mg
4	Please give a description of your foot problem and/or reason for requesting assistance. **Please note Podiatry is not a personal nail cutting service** FOOT ASSESSMENT AS MODERATE RISK. NO SENSATION IN BOTH FEET. PLEASE NOTE: PREVIOUS AMPUTATION - TIP OF BIG TOE (LEFT).

Applicant signature: Stuart Beattie Date: 21/2/24

Please note that self-referrals will only be accepted if the person requesting assistance has the capacity to self refer, or is being made on behalf of a child. In all other circumstances, a separate referral must be made by a healthcare professional.

WHO IS ELIGIBLE FOR NHS PODIATRY?

People with a foot related problem and who meet any of the following criteria:

- Rheumatology/Connective Tissue Disease
- Severe Peripheral Arterial Disease.
- Diabetes Mellitus with a Moderate/High Risk foot score.
- History of foot ulceration.
- Chronic Degenerative Neurological Disease - for example Multiple Sclerosis. Parkinsonism, Motor Neurone Disease.
- Children (pre- school to secondary).
- Person with a physical handicap - which has a direct adverse effect on their feet.
- Person with learning difficulties – which affects the person's ability to attend to their own footcare.
- Anyone who requires Nail Surgery, for example removal of a toenail.
- Musculo-skeletal problems eg plantar fasciitis.

Podiatry does not provide a Personal Nail Cutting Service

Department of Neurology
Operational Unit
NHS Tayside
Ninewells Hospital
Dundee
DD1 9SY

Dr NP Perdios
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

Date	14/05/2024
Clinic Date	07/05/2024
Your Ref	
Our Ref	PS/AM/ **1411600134**
Enquiries to	Neurology Secretaries
Extension	32134
Direct Line	01382 632134
Email	

Dear Dr Perdios

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE DOB: 14/11/1960

Stuart was due to have a telephone review in the Nurse led epilepsy clinic on 07/05/2024. Unfortunately, I have tried to contact him twice on his telephone number and every time I call it states that it has not been possible to connect and to try later. Therefore yet again Stuart has failed to attend his Nurse led clinic appointment.

I have discharged him with an open appointment. I am more than happy to have a telephone review with Stuart and maybe the best way that he contacts the epilepsy nursing service directly. Our number is 01382 740237.

Yours sincerely

Authorised on 21/05/2024 15:21:01 by Mrs Pauline Smith.

Mrs Pauline Smith
Epilepsy Specialist Nurse
Non Medical Prescriber
NMC no: 93I0689S

(P) Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE

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NHS Tayside Communication to GP

Ward/Clinic	Nurse led epilepsy clinic	CHI	1411600134
Hospital	Ninewells Hospital	Surname	BEATTIE
Clinician	Pauline Smith	First Name	STUART
Specialty	NEUROLOGY	Address	40 SERVITE HOUSE 136 ALEXANDER STREET DD3 7DE
Date	19/08/2024	GP/Address	Tay Court Surgery 50 South Tay Street Dundee DD1 1PF

Dear Doctor,

Provisional/Diagnosis is: Epilepsy - presumed gernealised tonic clonic seizures every 2-3 months

Comment/Recommendations: In response to ongoing seizures please increase dose of Lacosamide from 100mg bd to 150mg bd. This increase should be made by 50mg per week. No change to Lamotrigine or Sodium Valproate dose is recommended

Follow up by clinic required: No

Specific Monitoring Required: No
The following treatment is recommended:

	Medication	Dose	Frequency	Indication	Duration
1.	Lacosamide	150mg	twice daily	epilepsy	ongoing

Is any Medication to be discontinued: No

Pauline Smith | Specialist Nurse, NMP NMC no 93I0689S | Tel:01382 740237
Ninewells Switch Board Tel:01382 660111

NHS Tayside Communication to GP

Name: BEATTIE STUART CHI: 1411600134 Clinic Date: 19/08/2024

Ward/Clinic: Nurse led epilepsy clinic

Further comment/Recommendations:
Clinic letter to follow

Pauline Smith | Specialist Nurse, NMP NMC no 93I0689S | Tel:01382 740237
Ninewells Switch Board Tel:01382 660111

Department of Neurology
Operational Unit
NHS Tayside
Ninewells Hospital
Dundee
DD1 9SY

Dr NP Perdios
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

Date	22/08/2024
Clinic Date	15/08/2024
Your Ref	
Our Ref	PS/AM/ **1411600134**
Enquiries to	Neurology Secretaries
Extension	32134
Direct Line	01382 632134
Email	

Dear Dr Perdios

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE DOB: 14/11/1960

Current anti-epileptic medication:
Sodium Valproate 1g bd
Lamotrigine 100mg bd
Lacosamide 100mg bd

Consultant Neurologist:
Dr Ian Morrison

Recommendation:
Increase Lacosamide dose up to 150mg bd. Outpatient communication form already completed.

Stuart attended the Nurse led epilepsy clinic on 15/08/2024. Unfortunately he was very late for his appointment so I only had a few minutes to spend with him. As you are aware he has a long standing history of epilepsy characterised by presumed generalised tonic clonic seizures. His events are not witnessed but he stated that he is having seizures every 2-3 months.

He stated that he will feel an unusual sensation and lose awareness. When he comes round he is always sore, achy and he has bitten his tongue. There is no incontinence. He did report that one of his carers has seen him have a seizure and said that his eyes were open, he was shaking and staring.

He also reported other events but does not know how often these are occurring but they are completely different to his seizures. There is no warning or funny feeling before, he just drops. He was not able to tell me if he loses consciousness through these events or is fully aware.

We discussed ongoing triggers for his seizures. His sleep pattern is poor which is related to his long standing mental health problems. He denied any alcohol or recreation drugs.

Stuart is currently taking Sodium Valproate 1g bd, Lamotrigine 100mg bd and Lacosamide 100mg bd. Compliance to his medication is much better. His medications are administered via a venolink tray and he has a carer who prompts him to take his medication. He denied any side effects.

In response to presumed generalised tonic clonic seizures I would be grateful if you could increase Stuart's dose of Lacosamide up to 150mg bd. This increase should be made by 50mg per week and I have already done an outpatient communication form via clinical portal in respect to this.

Stuart now has my contact details and knows he can contact me on 01382 740237 if he has any concerns regarding his epilepsy otherwise he will be reviewed in clinic in 6-8 months time.

Yours sincerely

Authorised on 26/08/2024 11:06:48 by Mrs Pauline Smith.

Mrs Pauline Smith
Epilepsy Specialist Nurse
Non Medical Prescriber
NMC no: 93I0689S

(P) Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE

- Help us improve our service by sharing your experiences. We are proud to be participating in My Neuro Survey, the largest patient experience survey in the country. Have your say.

Visit Survey Link:

The survey is completely anonymous and it is not possible to identify participants from their responses. It will take around 20 minutes to complete. Please complete the survey by 15 November 2024.

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Tayside Clinical Laboratory Services — Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart Sex: M PID: 1411600134 DoB: 14 Nov 1960
Lab No: C242150149
Tay Court Surgery Clinician: Dr Nectarios PERDIOS TCS PERN1G

SODIUM	138	mmol/L	(	133-146)
POTASSIUM	4.7	mmol/L	(	3.5-5.3)
[redacted]	[redacted]	[redacted]	(	62-106)
ESTIMATED GFR	GT60	mL/min		

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.

CKD Stage IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA

[redacted]	[redacted]	[redacted]	(	Below 48)

AKI Not detected: May not exclude AKI in all cases

Lab.Comments:

Sample is blood unless otherwise stated

Sample Date/Time
12 Sep 2024 11:24

Clin.Details: 6 monthly diabetic review bloods

Request Entered: 12 Sep 2024 16:09 Report Printed: 13 Sep 2024 11:06

Seen by Nurse

Tayside Out of Hours Service OOH Call Incident Report

Call number:	**38917**	Receive Date:	**28-Sep-2024 13:53**
Patient's Name:	**Stuart Beattie**		
Date of birth:	**14-Nov-1960 (63 years)**	Gender:	**M**
Address:	**40 SERVITE HOUSE 136 ALEXANDER STREET DUNDEE DD3 7DE**	Current Address:	**40 SERVITE HOUSE 136 ALEXANDER STREET DUNDEE DD3 7DE**
Return Contact No:			
Tel No:	**07394 015180**		**07394 015180**
Mobile No:			
Priority:	**Routine**	Call Origin:	**Chemist/Pharmacist**
Received:	**28-Sep-2024 13:53**	Calltype:	**Advice**
Advised:	**:**	Arrived PCC:	
Cons start:	**28-Sep-2024 14:23**	Cons End:	**28-Sep-2024 14:29**
Consulting Doctor:	**Natasha Usher**	Own doctor:	**Deepa Sanu**

Reported Condition:
Symptoms: 40mg Gliclazide in his pack. However surgery gave him a script for 80mg. Does he stop the 40mg. GP callback to chemist to clarify.

Consultation details:
History - **Call from chemist re query re glicazide - unable to help.**
Diagnosis - **No clarity re gliclazide dose - pharmacy will check with GP Monday.**

Followups:
Patient Advised To Contact Own GP

Clinical Codes:
677B. Advice about treatment given

Filename: 42.pdf
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Tayside Clinical Laboratory Services — Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart Sex: M PID: 1411600134 DoB: 14 Nov 1960
Lab No: C242229431
Tay Court Surgery Clinician: Dr Balakrishnan PILLAI TCS PILB1G

SODIUM	136	mmol/L	(	133-146)
POTASSIUM	5.0	mmol/L	(	3.5-5.3)
CREATININE	69	umol/L	(	62-106)
ESTIMATED GFR	GT60	mL/min		

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.

CKD Stage	IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA			
ALT	12	U/L	(	5-55)
BILIRUBINS	8	umol/L	(	0-21)
ALKALINE PHOSPHATASE	102	U/L	(	30-130)
ALBUMIN	36	g/L	(	35-50)
CALCIUM	2.25	mmol/L	(	2.10-2.55)
CALCIUM (CORRECTED)	2.29	mmol/L	(	2.10-2.55)
TSH	1.98	mU/L	(	0.4-4.0)

Lab.Comments:

Sample is blood unless otherwise stated

18/10/2024-11:05:00

Sample Date/Time
17 Oct 2024 11:11

Clin.Details: On T47: No
Poorly controlled diabetic-HBA1C was 75 Sep m2024-Follow up bloods March 2025

Page 1 of 2

Request Entered: 17 Oct 2024 17:11 Report Printed: 17 Oct 2024 17:51

Tayside Clinical Laboratory Services Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart Sex: M PID: 1411600134 DoB: 14 Nov 1960
Lab No: G242229431
Tay Court Surgery Clinician: Dr Balakrishnan PILLAI TCS PILB1G

TOTAL CHOLESTEROL	4.14	mmol/L	(0.00-5.00)	
HDL-CHOLESTEROL	1.01	mmol/L	(0.60-2.50)	
TOTAL CHOL/HDL-CHOL	4.00	.		
AKI	Not detected: May not exclude AKI in all cases			

Lab.Comments:

Sample is blood unless otherwise stated

Sample Date/Time
17 Oct 2024 11:11

Clin.Details: On T4?: No
Poorly controlled diabetic-HBA1C was 75 Sep m2024-Follow up bloods March 2025

Request Entered: 17 Oct 2024 17:11 Report Printed: 17 Oct 2024 17:51

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Filename: 41.pdf
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Pages:

Tayside Clinical Laboratory Services — Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart Sex: M PID: 1411600134 DoB: 14 Nov 1960
Lab No: H242229431
Tay Court Surgery Clinician: Dr Balakrishnan PILLAI TCS PILB1G

HGB	147	g/L	(130-180)	WBC	9.6	x10^9/L	(4.0-11.0)
RBC	5.46	x10^12/L	(4.5-6.0)	NE#	5.8	x10^9/L	(2.0-7.5)
HCT	0.470		(0.40-0.52)	LY#	2.8	x10^9/L	(1.5-4.0)
MCV	86.2	fl	(85-105)	MO#	0.8	x10^9/L	(0.2-0.8)
MCH	27.0	pg	(27-32)	EO#	0.20	x10^9/L	(0.0-0.4)
MCC	313 L	g/L	(320-360)	BA#	0.1	x10^9/L	(0.0-0.1)
				PLT	222	x10^9/L	(150-400)

18/10/2024-11:03:48

Lab.Comments:

Sample is blood unless otherwise stated

Sample Date/Time
17 Oct 2024 11:11

Clin.Details: On T47: No
Poorly controlled diabetic-HBA1C was 75 Sep m2024-Follow up bloods March 2025

Request Entered: 17 Oct 2024 17:11 Report Printed: 17 Oct 2024 17:31

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Pages:

NHS

Initial Discharge Communication

NHS

STUART BEATTIE 40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE *GP Practice: Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF*	CHI: 1411600134 Born: 14/11/1960

This letter updates/amends previous communication received in relation to this episode of care

Discharge Details

Admission	17/10/2024	**Discharge**	17/10/2024
Specialty	Acute Medicine	**Consultant**	Dr David Connell (6102282)
From	Acute Medical Unit Ninewells Hospital	**Destination**	Home

Diagnoses 18/10/2024 11:09:39

Infective exacerbation of likely undiagnosed COPD	

Operations/Procedures

Actions Required for Primary Care

Please organise for outpatient spirometry in due course after his exacerbation has settled. If findings are in keeping with an obstructive picture, we would appreciate if you could start him on regular Anoro Ellipta.

Many thanks.

Communication to Primary Care

Dear Colleague,

Stuart Beattie was admitted to Ninewells Hospital on 17/10/24 with several weeks of increased breathlessness and sputum production.

He has a background of epilepsy and had 3 seizures over the preceding week. This was felt likely due to a combination of an infection and a lack of sleep.
We discussed his case with the neurology team who advised to prescribe 5 days of clobazam and for follow-up by the epilepsy specialist nurses.

We felt he has likely undiagnosed COPD and have prescribed him a course of steroids and antibiotics. We would appreciate if you could arrange for outpatient spirometry for him and start him on inhaled therapy if appropriate.

He was felt fit for discharge on the same day.

Yours sincerely,
Ninewells AMU

Medications

This prescription has not been reviewed by a Pharmacist

Drug & Formulation	Dose	How to take	How long to take	Supply	Dispensary
Amisulpride 200mg tablets		1 TABLET TWICE DAILY Instalments: dispense weekly			
Amisulpride 50mg tablets		1 TABLET TWICE DAILY Instalments: dispense weekly			

NHS | Initial Discharge Communication | NHS

STUART BEATTIE 40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE *GP Practice: Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF*	CHI: 1411600134 Born: 14/11/1960

Atorvastatin 20mg tablets		1 TABLET ONCE A DAY Instalments: weekly dispense Notes for patient: PLEASE ARRANGE A PRACTICE NURSE FACE TO FACE APPOINTMENT FOR A CHRONIC DISEASE ANNUAL REVIEW			
Clobazam 10mg tablets		Take 1 tablet at night for 5 days		Blue script provided	
Contour Plus testing strips (Ascensia Diabetes Care UK Ltd)		TO BE USED WITH CONTOUR PLUS BLUE METER ONLY			
Dihydrocodeine 30mg tablets		2 THREE TIMES DAILY. Instalments: dispense weekly			
Doxycycline 100mg capsules		Take 1 capsule twice a day for 5 days		TTO	
Empagliflozin 10mg tablets		1 TABLET ONCE DAILY Instalments: WEEKLY DISPENSE			
Epilim Chrono 500 tablets (Sanofi)		2 TABS TWICE DAILY Instalments: dispense weekly			
Furosemide 40mg tablets		1 TABLET MORNING AND 1 AT LINCHTIME Instalments: dispense weekly			
Gliclazide 40mg tablets		1 TABLET TWICE A DAY Instalments: weekly dispense			
Gliclazide 80mg tablets		TAKE 1 TABLET(S) IN THE MORNING AND 2 TABS AT NIGHT TIME Instalments: Weekly Dispensing			
Gliclazide 80mg tablets		TAKE 1 TABLET(S) IN THE MORNING AND 2 TABS AT NIGHT TIME Instalments: Weekly Dispensing			
Lacosamide 100mg tablets		TAKE ONE TABLET IN THE MORNING AND EVENING (TOTAL DOSE 150MG TWICE DAILY) Instalments: weekly dispense Notes for dispenser: Dose increase August 2024			
Lacosamide 50mg tablets		TAKE ONE TABLET IN THE MORNING AND EVENING (TOTAL DOSE 150MG TWICE DAILY) Instalments: weekly dispense Notes for dispenser: Dose increase from August 2024			
Lamotrigine 100mg tablets		1 TWICE DAILY Instalments: dispense weekly			
Loperamide 2mg capsules		1 CAPSULE TWICE A DAY. AS PER SPECIALIST Instalments: dispense weekly Notes for patient: loperamide tablets have been changed to capsules as they are more cost effective for the NHS. You should notice no change in effect			

NHS Initial Discharge Communication NHS

STUART BEATTIE 40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE *GP Practice: Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF*	CHI: 1411600134 Born: 14/11/1960

Metformin 500mg modified-release tablets		2 TABLETS TWICE DAILY Instalments: weekly dispense Notes for patient: PLEASE ARRANGE A PRACTICE NURSE FACE TO FACE APPOINTMENT FOR A CHRONIC DISEASE ANNUAL REVIEW			
Microlet lancets 0.5mm/28gauge (Ascensia Diabetes Care UK...		USE TO LANCE			
Omeprazole 20mg gastro-resistant capsules		1 CAPSULE ONCE A DAY Instalments: dispense weekly			
Paracetamol 500mg tablets		2 TABLETS FOUR TIMES A DAY Notes for dispenser: dispense weekly			
Prednisolone 5mg tablets		Take 6 tablets in the morning for 5 days		TTO	
Sertraline 100mg tablets		1 TABLET ONCE A DAY Instalments: dispense weekly			
Solifenacin 5mg tablets		1 TABLET ONCE A DAY Instalments: dispense weekly			
Zopiclone 3.75mg tablets		TAKE 1 TABLET AT NIGHT FOR INSOMNIA. SHOULD BE SHORT TERM USE. TRY TO WEAN OFF THIS MEDICATION OVER TIME Instalments: dispense weekly Notes for patient: PLEASE MAKE GP REVIEW			

Discontinued Medication

Medication Notes

Started on a 5 day course of clobazam, doxycycline and steroids

No changes otherwise to usual medication.

Allergies

Deleted Allergies

Follow Up Arrangements

Final Discharge Comments

Pharmacy

Copy To

Epilepsy specialist nurses

Sign Off

NHS

Initial Discharge Communication

NHS

STUART BEATTIE 40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE *GP Practice: Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF*	CHI: 1411600134 Born: 14/11/1960

	Name	Job Title	Date/Time
Initial Sign Off	Jo Wenner	LAT IMT1	17/10/2024 17:03:21
Pharmacy Sign Off			
Final Sign Off			

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NHS Tayside

Final Discharge Communication

NHS Tayside

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From	Acute Medical Unit Ninewells Hospital	**Destination**	Home

Diagnoses

Infective exacerbation of likely undiagnosed COPD

Operations/Procedures

Actions Required for Primary Care

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Many thanks.

Communication to Primary Care

Dear Colleague,

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He has a background of epilepsy and had 3 seizures over the preceding week. This was felt likely due to a combination of an infection and a lack of sleep.
We discussed his case with the neurology team who advised to prescribe 5 days of clobazam and for follow-up by the epilepsy specialist nurses.

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NHS | Final Discharge Communication | NHS

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NHS Lothian

Final Discharge Communication

NHS Lothian

STUART BEATTIE 40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE *GP Practice: Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF*	CHI: 1411600134 Born: 14/11/1960

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Discontinued Medication

Medication Notes

Started on a 5 day course of clobazam, doxycycline and steroids

No changes otherwise to usual medication.

Allergies

Deleted Allergies

Follow Up Arrangements

Final Discharge Comments

As above, nil to add

Pharmacy

Copy To

Epilepsy specialist nurses

NHS

Final Discharge Communication

NHS

STUART BEATTIE 40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE *GP Practice: Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF*	CHI: 1411600134 Born: 14/11/1960

Sign Off

	Name	Job Title	Date/Time
Initial Sign Off	Jo Wenner	LAT IMT1	17/10/2024 17:03:21
Pharmacy Sign Off			
Final Sign Off	David Connell	Consultant	05/11/2024 14:19:02

NHS Tayside

Department of Neurology
Operational Unit
South Block, Level 6
NHS Tayside
Ninewells Hospital
Dundee
DD1 9SY

www.nhstayside.scot.nhs.uk

Stuart Beattie
40 Servite House
136 Alexander Street
Dundee
Angus
DD3 7DE

Date	07/11/2024
Your Ref	
Our Ref	PS/AM/ **1411600134**
Enquiries to	Neurology Secretaries
Extension	32134
Direct Line	01382 632134
Email	

Dear Stuart

I appreciate you were in hospital recently and may have had some seizures. I would be grateful if you could get in contact with me directly to discuss your epilepsy. I tried to call you but the number we have on the system for you was not available.

Therefore if you would like to get in contact with me directly to discuss your epilepsy you can do so on 01382 740 237.

Yours sincerely

Authorised on 07/11/2024 15:07:20 by Mrs Pauline Smith.

Mrs Pauline Smith
Epilepsy Specialist Nurse
Non Medical Prescriber
NMC no: 93I0689S

(D) Dr NP Perdios, Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF

NHS Tayside Communication to GP

Ward/Clinic	Epilepsy rv	CHI	1411600134
Hospital	Ninewells Hospital	Surname	BEATTIE
Clinician	Charlene Campbell	First Name	STUART
Specialty	NEUROLOGY	Address	40 SERVITE HOUSE 136 ALEXANDER STREET DD3 7DE
Date	25/11/2024	GP/Address	Tay Court Surgery 50 South Tay Street Dundee DD1 1PF

Dear Doctor,

Provisional/Diagnosis is: Had 2 seizures in the last 2 weeks. AED compliance- Witnessed seizure on bus- body jeking AND STIFF

Comment/Recommendations:

In response to seizures please incraease Lacosamide to 200mg bd. This can be increased by 50mg per week until on 200mg bd

Follow up by clinic required: Yes

Follow up by clinic required: waiting list

Specific Monitoring Required: No
The following treatment is recommended:

	Medication	Dose	Frequency	Indication	Duration
1.					

Is any Medication to be discontinued: No

Charlene Campbell | Specialist Epilepsy Nurse. NMP no: 05I2126S | Tel:01382 660111
Ninewells Switch Board Tel:01382 660111

undee ealth & Social Care Partnership

COPD INITIAL ASSESSMENT REFERRAL
PLEASE ENSURE THE PATIENT HAS HAD AN UP TO DATE CXR AND ROUTINE BLOOD SAMPLE OR YOUR REFERRAL WILL BE RETURNED

NHS Tayside

Please complete all boxes to allow prompt processing of referral and return to:
Tay.dundeecopdservice@nhs.scot

REFERRERS DETAILS - PLEASE ENSURE YOU GIVE US THE REFERRERS DIRECT CONTACT DETAILS IN CASE OF ANY QUERIES			
NAME:	Lesley Tavano	CONTACT EMAIL:	lesley.tavano@nhs.scot

PATIENT DETAILS	
DATE OF REFERRAL:	10th December
NAME:	Stuart Beattie
DOB/CHI:	14 11 60 - 0134
ADDRESS:	40 Servite House 136 Alexander St
POSTCODE:	DD3 7DE.
PHONE NUMBER:	07519 521923
GP NAME & PRACTICE:	Dr Perdios Tay Court Surgery Tay St.

THE FOLLOWING INFORMATION WILL ENABLE THE TEAM TO PRIORITISE THIS REFERRAL					
SMOKER:	YES ✓	NO	DETAILS:	Cut down to 10 per day aware of Smoking cessation Pack history 40 years	
DATE OF LAST CHEST X-RAY:	Oct 24.		DATE OF LAST FBC:	17/10/24	
RECENT WEIGHT: ~~Ht~~	1.75m. 110 Kg		BMI:	35.9.	
FINDINGS OF RESPIRATORY ASSESSMENT:	Ongoing ↑ SOB in smoker hosp felt had COPD on admission				
RELEVANT MEDICAL HISTORY:	Seen in Practice commenced Anoro & given SABA + Aerochamber.				
REASON FOR REFERRAL/ BRIEF SUMMARY OF SYMPTOM HISTORY:	↑ SOB - feels getting worse. Smoker - Pack history Daily Cough - months.				
RECENT HOSPITAL ADMISSION/ EXACERBATION RATE IN LAST YEAR:	Admission due to ↑ SOB				
LIST OF CURRENT MEDICATION	Please ensure the patient has a SABA to bring to assessment ✓ commenced Anoro 1 puff daily today				

NHS Tayside

NP Perdios
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

30/04/2025

Dear Colleague

Please see the following outcome from the vetting process.

Patient Name: Stuart Beattie
CHI Number: 1411600134
Referral Date: 29/04/2025

Referral Source: General Practitioner

Referral Priority was: Urgent
Vetted Priority is: Routine

ORTHOTIC CLINIC ROUTINE
Vetted By: Orthotic

Please note: If the vetting outcome is Redirecting Referral then the vetted by specialty will show as the redirected to specialty and not the specialty originally referred to.

Comment (Please add comments below for the referrer as required)

Yours sincerely

Filename: 34.pdf
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NHS Tayside

Emergency Department Ninewells Hospital

Ninewells Hospital
Ninewells Drive
Dundee
DD2 1GZ

NP Perdios
11058/1,Tay Court Surgery
50 South Tay Street, Dundee
Dundee
DD1 1PF

Dear Doctor

Mr Stuart Beattie
40 SERVITE HOUSE
136 ALEXANDER STREET
Dundee
DD3 7DE

Date of Birth: 14/11/1960
ACHI Number: 1411600134
ED Attendance Number: E0000612180
No. of Previous Attendances: 0
Occupation:
School:
Responsible Consultant:Dr Colin Donald

The above patient attended the Emergency Department Ninewells Hospital on 18/04/2025 at 13:45 and was admitted on 18/04/2025 at 18:12. The letter has been collated by Dorinne Barretto.

Diagnosis:		
Description	Body Site	Laterality
ED diagnosis - Neurology - Other nervous system disorder (see free text)		

Diagnosis Comments: ?seizure with long lie

Notes for GP:

Procedures:

Prescriptions:

Discharge Destination: Admission to same NHS healthcare provider / hospital - Medical Ward

Discharge Type: Admitted

Referred To:

ED Clinical Notes:
Clinician Name: Dorinne Barretto
Time: 14:57

Presenting Complaint / Concern: collapse ?long lie

History of Presenting Complaint / Concern:
64M BIBA with reduced mobility, ?long lie since wed

Patient unable to recall events since wednesday, remembers blacking out at home, then coming around this morning lying on the floor, was incontinent of urine, disorientated, was able to call out to neighbour to phone 999
Unable to mobilise with SAS, was assisted to toilet where he had large bowel movement
Reports dull pain in lower back and bilateral legs with reduced power and sensation

Known epilepsy on epilim chrono
Has been previously well, denies coryzal symptoms, denies urinary symptoms

Report from SAS crew - people seen going in and out of house on thurs

Past Medical History: HTN, T2DM, epilepsy, COPD

Drug History: atorvastatin, amisulpride, lamotrigine, loperamide, sertraline, solifenacin, omeprazole, gliclazide, lacosamide, metformin, furosemide, empagliflozin, paracetamol, dihydrocodiene, epilim chrono

Allergies: NKA

Social History: lives alone, usually independent with ADLs, mobilises independently, smokes 10 sticks per day, denies alcohol drinking and illicit drug use

Focused Examination:
NEWS 1 BP 156/76
BM 12.2
Alert, PEARL
Strong steady radial pulses
Chest clear, HS pure
Abdomen soft non tender

Cranial nerves grossly intact
Reduced tone and power bilateral UL 3/5
Loss of power bilateral LL
Reduced sensation bilateral LL

Investigations: ECG - SR, no ischaemic changes

WORKING DIAGNOSIS: ?seizure with possible long lie

Treatment Plan/Senior Clinician Review if Required:
D/w ED cons CM - for U&Es, CK, for AMU for further investigations

16:45
CK 12880 - IVF prescribed
VBG done - lactate 2.58
Awaiting AMU bed

Primary Care follow-up:

Does the patient agree with the plan?

Are there any safety concerns?

NHS Tayside

ED Nurse Notes:
Nursing Assessment/Social History -
- lives in sheltered accomidation
- warden noticed multiple people going in and out of the flat

Initial Interventions -
- observations
- ecg
- blood sugar

NEWS Score – 0
Covid screen required – N
Nameband – Y red
No medication brought with patient
Pt accepts responsibility for belongings/valuables. – Y

Prepared for admission by KTosh @ 1550

Interventions - Observations, ECG

NEWS on admission - 0

Does the patient agree with the plan Yes aware of plan and happy
NOK/relatives aware of plan for admission Yes, telephoned brother (NOK) with consent and fully updated with plan.

Wellbeing form completed - n/a
Adult Support and Protection referral completed - n/a
Falls referral completed – n/a

Patient transferred on trolley/cotsides up

Escort required – Y RN escort

1554- For admission to AMU, bed not currently available. Personal care and refreshments provided. Denies pain or nausea. KTosh (SN)

Yours sincerely

Emergency Department Ninewells Hospital

NHS Tayside

Orthotic Department

Ninewells Hospital
Dundee
DD1 9SY

www.nhstayside.scot.nhs.uk

Chamali Wattoruge Waththegadra
Physiotherapy Department
Ninewells Hospital
Dundee
DD1 9SY

Date	12/05/2025
Your Ref	
Our Ref	LT/SC/ **1411600134**
Enquiries to	Orthotics : 09/05/2025
Extension	36302
Direct Line	01382 496302

Dear Chamali Wattoruge Waththegadra

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE DOB: 14/11/1960

Diagnosis: Fall and long lie
Rhabdomylolysis

Plan: Fitted with bilateral posterior leaf spring ankle foot orthoses.
Temporary felt boots fitted and footwear advice provided.

Follow up: Review as requested

Stuart was originally referred on the 29th April. There had been a few attempts to see Stuart for management of bilateral drop foot. However, he had been off of the ward on a couple of occasions. My colleague had seen him on Wednesday the 7th and fitted him with a pair of Ninewells felt boots due to issues getting his own slim fitting shallow trainers on with the right posterior leaf spring AFO that had already been prescribed and fitted.

The foot plate of the right large AFO had been trimmed to the sulcus of the toes. Despite the minimal trim lines of the AFO Stuart was still unable to get his own footwear on comfortably. Unfortunately there had ben no size large left AFO's and it transpired that our supplier has gone into liquidation. An alternative left large AFO has been sourced from another supplier and today I went over to do a trial fit with this. Unfortunately Stuart was not available in the morning because he was away having nerve conduction studies.

I was able to go back this afternoon and I observed that Stuart was walking around using the gutter frame and was wearing his right PLS AFO and felt boots. He is able to step through nicely on the right. However he is still high stepping on the left due to drop foot. With his permission I fitted the left size large Ottobock version of the posterior leaf spring AFO. This fitted nicely and actually did not require any adjustment to the foot plate of the calf section. Stuart was able to get up immediately and walk with this. He was still walking with a high stepping gait initially as this is what he has been accustomed to. After a couple of lengths up and down the ward he found that he could walk with a fairly symmetrical heel toe gait.

We have gone over how he should correctly don and doff his AFO's. He has an information leaflet for our service and this explains using the AFO's and how to contact us should he have any problems once he is discharged. I have made some suggestions of slightly deeper and wider fitting footwear and I have written these suggestions down on his information leaflet so that he can hopefully get out of the felt boots and into normal shoes. His feet were not particularly swollen and he should not require any specialist footwear. He has been discharged from Orthotics for now but will be reviewed as required.

Yours sincerely
Lynne Taylor (Head of Orthotics)

Authorised on 12/05/2025 14:11:24 by Lynne Taylor.

(D) Dr NP Perdios, Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF

NHS Tayside

NP Perdios
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

12/05/2025

Dear Colleague

Please see the following outcome from the vetting process.

Patient Name: Stuart Beattie
CHI Number: 1411600134
Referral Date: 08/05/2025

Referral Source: General Practitioner

Referral Priority was: Urgent
Vetted Priority is: Routine

ORTHOTIC CLINIC ROUTINE
Vetted By: Orthotic

Please note: If the vetting outcome is Redirecting Referral then the vetted by specialty will show as the redirected to specialty and not the specialty originally referred to.

Comment (Please add comments below for the referrer as required)

Yours sincerely

NHS Tayside

NP Perdios
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

13/05/2025

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CHI Number: 1411600134
Referral Date: 13/05/2025

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Vetted Priority is: Routine

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Vetted By: Orthotic

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This letter updates/amends previous communication received in relation to this episode of care

Discharge Details

Admission	18/04/2025	**Discharge**	21/05/2025
Specialty	General Medicine	**Consultant**	Dr Christopher Schofield (6027818)
From	Ward 4 Ninewells Hospital	**Destination**	Home

Diagnoses

Fall and long lie	
Rhabdomyolysis	

Operations/Procedures

X-ray of lumbar spine	No acute bony onjury	22/04/2025
X-ray of both knees	No acute bony injury	22/04/2025

Actions Required for Primary Care

Please supply repeat prescription of semaglutide.

Communication to Primary Care

Dear Mr Beattie,

You were admitted to Ninewells Hospital on 18/04/2025 following a fall, likely seizure, and long lie in your home.

You had an acute kidney injury for which you were treated with fluids.

XRays did not show any injury to bone.

MRI scan of spine showed some mild disc bulging, but nothing concerning.

Your package of care will be restarted for your discharge.

We wish you all the best.

Kind regards,
Ninewells Ward 4 Medical Team

Medications

Drug & Formulation	Dose	How to take	How long to take	Supply	Dispensary
Amisulpride 200mg tablets	250mg	1 TABLET TWICE DAILY (TOTAL DOSE 250MG BD) Instalments: dispense weekly		Compliance Device	PDDC - new venalink required (14 X 200MG)

NHS | Final Discharge Communication | NHS

STUART BEATTIE 40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE *GP Practice: Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF*	CHI: 1411600134 Born: 14/11/1960

Amisulpride 50mg tablets		1 TABLET TWICE DAILY (TOTAL OSE 250MG BD) Instalments: dispense weekly		Compliance Device	14 X 50MG
Anoro Ellipta 55micrograms/22micrograms Dry Powder Inhaler		ONE PUFF ONCE DAILY		Own at Home	
Atorvastatin 20mg tablets	20mg	1 TABLET ONCE A DAY Instalments: weekly dispense Notes for patient: PLEASE ARRANGE A PRACTICE NURSE FACE TO FACE APPOINTMENT FOR A CHRONIC DISEASE ANNUAL REVIEW		Compliance Device	7 X 20MG
Contour Plus testing strips (Ascensia Diabetes Care UK Ltd)		TO BE USED WITH CONTOUR PLUS BLUE METER ONLY		Own at Home	
Dihydrocodeine 30mg tablets	60mg	TWO TABLETS ONCE AT NIGHT. Instalments: dispense weekly		Compliance Device	14 X 30MG
Empagliflozin 10mg tablets	10mg	1 TABLET ONCE DAILY IN THE MORNING Instalments: WEEKLY DISPENSE		Compliance Device	7 X 10MG
Furosemide 40mg tablets	40mg	1 TABLET MORNING AND 1 AT LUNCHTIME DAILY Instalments: dispense weekly		Compliance Device	14 X 40MG
Gliclazide 40mg tablets	120mg	THREE TABLETS ONCE DAILY IN THE MORNING Instalments: weekly dispense		Compliance Device	21 X 40MG
Gliclazide 80mg tablets		TAKE ONE TABLET DAILY IN EVENING. In addition to AM dose. Instalments: dispense weekly.		Compliance Device	7 X 80MG
Ibuprofen 5% gel		APPLY THREE TIMES DAILY FOR PAIN		Hospital Pharmacy	100G
Lacosamide 200mg tablets	200mg	TAKE ONE TABLET TWICE DAILY Notes for dispenser: dispense weekly		Compliance Device	56 X 50MG
Lamotrigine 100mg tablets	100mg	1 TWICE DAILY Instalments: dispense weekly		Compliance Device	14 X 100MG

NHS | Final Discharge Communication | NHS

STUART BEATTIE 40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE *GP Practice: Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF*	CHI: 1411600134 Born: 14/11/1960

Metformin 500mg modified-release tablets	1000mg	2 TABLETS TWICE DAILY Instalments: weekly dispense Notes for patient: PLEASE ARRANGE A PRACTICE NURSE FACE TO FACE APPOINTMENT FOR A CHRONIC DISEASE ANNUAL REVIEW		Compliance Device	28 X 500MG MR
Microlet lancets 0.5mm/28gauge (Ascensia Diabetes Care UK...		USE TO LANCE		Own at Home	
Omeprazole 20mg gastro-resistant capsules	20mg	1 CAPSULE ONCE A DAY Instalments: dispense weekly		Compliance Device	7 X 20MG
Paracetamol 500mg tablets	1000mg	2 TABLETS FOUR TIMES A DAY Notes for dispenser: dispense weekly		Compliance Device	56 X 500MG
Salbutamol 100micrograms/dose inhaler CFC free		1-2 PUFFS WHEN REQUIRED FOR BREATHLESSNESS		Own at Home	
Semaglutide 0.5mg/0.37ml solution for injection 1.5ml pre-filled disposable device		INJECT ONCE WEEKLY ON TUESDAYS		Hospital Pharmacy	No stock at NW
Sertraline 100mg tablets	100mg	1 TABLET ONCE A DAY Instalments: dispense weekly		Compliance Device	7 X 100MG
Sodium valproate (Epilim Chrono) 500mg modified-release tablets	1000mg	TWO TABLETS TWICE DAILY Instalments: dispense weekly		Compliance Device	28 X 500MG - confirmed with AS to go into venalink
Solifenacin 5mg tablets	5mg	1 TABLET ONCE A DAY Instalments: dispense weekly		Compliance Device	7 X 5MG
Zopiclone 3.75mg tablets		TAKE 1 TABLET AT NIGHT FOR INSOMNIA. SHOULD BE SHORT TERM USE. TRY TO WEAN OFF THIS MEDICATION OVER TIME Instalments: dispense weekly Notes for patient: PLEASE MAKE GP REVIEW		Own at Home	

Discontinued Medication

NHS

Final Discharge Communication

NHS

STUART BEATTIE 40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE *GP Practice: Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF*	CHI: 1411600134 Born: 14/11/1960

STOP	Loperamide 2mg capsules		Contra-indication	Temporary

Medication Notes

New:

Semaglutide 0.5mg once weekly on Tuesdays. District Nurses to administer.

Please issue new venalink.

Allergies

Deleted Allergies

Follow Up Arrangements

Final Discharge Comments

Bilateral foot drop likely as a consequence of neuropraxia. AFO in place to support mobility

Pharmacy

venalink from Boots Pharmacy , Lochee (01382)611144.
Supply updated by LCartney , pharmacy technician.

Pharmacy Check Type: **Professional check**

Pharmacist checked prescription with limited access to information. Please contact prescriber for any queries

Copy To

Sign Off

	Name	**Job Title**	**Date/Time**
Initial Sign Off	Divine Dominic	FY1 2024	21/05/2025 10:24:12
Pharmacy Sign Off	Mrs Arlene Shaw	Lead Clinical Pharmacist - Medicine Division	21/05/2025 12:43:09
Final Sign Off	Dr Christopher Schofield	Consultant	11/06/2025 13:51:36

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NHS | **Initial Discharge Communication** | NHS

STUART BEATTIE 40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE *GP Practice: Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF*	CHI: 1411600134 Born: 14/11/1960

This letter updates/amends previous communication received in relation to this episode of care

Discharge Details

Admission	18/04/2025	**Discharge**	21/05/2025
Specialty	General Medicine	**Consultant**	Dr Christopher Schofield (6027818)
From	Ward 4 Ninewells Hospital	**Destination**	Home

Diagnoses

Fall and long lie
Rhabdomyolysis

Operations/Procedures

X-ray of both knees	No acute bony injury	22/04/2025
X-ray of lumbar spine	No acute bony onjury	22/04/2025

Actions Required for Primary Care

Please supply repeat prescription of semaglutide.

Communication to Primary Care

Dear Mr Beattie,

You were admitted to Ninewells Hospital on 18/04/2025 following a fall, likely seizure, and long lie in your home.

You had an acute kidney injury for which you were treated with fluids.

XRays did not show any injury to bone.

MRI scan of spine showed some mild disc bulging, but nothing concerning.

Your package of care will be restarted for your discharge.

We wish you all the best.

Kind regards,
Ninewells Ward 4 Medical Team

Medications

Drug & Formulation	Dose	How to take	How long to take	Supply	Dispensary
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NHS Initial Discharge Communication NHS

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NHS

Initial Discharge Communication

NHS

STUART BEATTIE 40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE *GP Practice: Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF*	CHI: 1411600134 Born: 14/11/1960

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Discontinued Medication

NHS | Initial Discharge Communication | NHS

STUART BEATTIE 40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE *GP Practice: Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF*	CHI: 1411600134 Born: 14/11/1960

STOP	Loperamide 2mg capsules		Contra-indication	Temporary

Medication Notes

New:

Semaglutide 0.5mg once weekly on Tuesdays. District Nurses to administer.

Please issue new venalink.

Allergies

Deleted Allergies

Follow Up Arrangements

Final Discharge Comments

Pharmacy

venalink from Boots Pharmacy , Lochee (01382)611144.
Supply updated by LCartney , pharmacy technician.

Pharmacy Check Type: **Professional check**

Pharmacist checked prescription with limited access to information. Please contact prescriber for any queries

Copy To

Sign Off

	Name	Job Title	Date/Time
Initial Sign Off	Divine Dominic	FY1 2024	21/05/2025 10:24:12
Pharmacy Sign Off	Mrs Arlene Shaw	Lead Clinical Pharmacist - Medicine Division	21/05/2025 12:43:09
Final Sign Off			

NHS Tayside

NP Perdios
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

21/05/2025

Dear Colleague

Please see the following outcome from the vetting process.

Patient Name: Stuart Beattie
CHI Number: 1411600134
Referral Date: 06/05/2025

Referral Source: General Practitioner

Referral Priority was: Urgent
Vetted Priority is: Routine

ORTHOTIC CLINIC ROUTINE
Vetted By: Orthotic

Please note: If the vetting outcome is Redirecting Referral then the vetted by specialty will show as the redirected to specialty and not the specialty originally referred to.

Comment (Please add comments below for the referrer as required)

Yours sincerely

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NHS Tayside

Emergency Department Ninewells Hospital

Ninewells Hospital
Ninewells Drive
Dundee
DD2 1GZ

NP Perdios
11058/1,Tay Court Surgery
50 South Tay Street, Dundee
Dundee
DD1 1PF

Dear Doctor

Mr Stuart Beattie
40 SERVITE HOUSE
136 ALEXANDER STREET
Dundee
DD3 7DE

Date of Birth: 14/11/1960
ACHI Number: 1411600134
ED Attendance Number: E0000621642
No. of Previous Attendances: 1
Occupation:
School:
Responsible Consultant:Dr Kirsty Tonge

The above patient attended the Emergency Department Ninewells Hospital on 24/05/2025 at 02:59 and was admitted on 24/05/2025 at 06:18. The letter has been collated by Deniz Ustuner.

Diagnosis:		
Description	Body Site	Laterality
ED diagnosis - Psychiatry / toxicology - other - see frreetext		

Diagnosis Comments:

Notes for GP:

Procedures:

Prescriptions:

Discharge Destination: Admission to same NHS healthcare provider / hospital - A&E Ward

Discharge Type: Admitted

Referred To:

ED Clinical Notes:
Seen by DU ST5 EM
64M
PC: Low GCS
HPC:

Created on 24/05/2025 06:19 by Jennifer Lorimer Version 1 Page 1 of 3

Reported by Paramedics to have been found with 2 women in his apartment.
THey had reportedly been feeding him noodles and he had an episode of choking on this.
Has been drowsy at the time.
Found with Pregabalin tablets (about 375mg taken)
Not orientated to Time, place, person
nil evidence of tongue biting, urinary incontinence
In April had an episode of rhabdolmyolsis when he was admitted to the medics
PMH
t2dm, epilepsy
meds: epilim, ozempic, empagliflozin, lamotrigine, amisulpride, metfrmin
lives in sheltered housing

o/e
a patent
b chest clear sats 94% 1L02
c hs 1+2+0
d gcs 14, PEARL 6mm bilaterally
e abdo snt

Imp:
Choking Episode
? Recreational Drug Use

Plan:
1. Vulnerable Adult form
2. Bloods inc Paracetamol
3. CXR
4. EDOU

ED Nurse Notes:
Nursing Assessment/Social History
Patient lives at home alone in retirement housing. Patient has community alarm. Unknown if patient has a care package or is awaiting a care package. Patient has been brought in by SAS following 2 females phoning ambulance for Stuart with reports of him choking on food and ?seizure like activity. Patient found by SAS with empty packets of pregablin in home. SAS reported some concerns regarding the two woman who were present in the house as to thier relationship to Stuart and events that they had reported. They had concerns that Stuart may be a vulnerable adult J.Lorimer
Initial Interventions
Patient assisted into hospital gown,GCS-14. J.Lorimer
NEWS Score –2 due to placed on 02 due to initial saturations of 90% on ari J.Lorimer
Covid screen required – no
Nameband – Yes white
Medication placed in appropriate bag
Pt accepts responsibility for belongings/valuables. – Yes
Belongings listed completed by Jennifer Lorimer/Carrie Hodge

Nursing note-
06.00-Vulnerable adult form completed and datix carried out J.Lorimer

Prepared for admission by Jennifer Lorimer
Interventions
Patient for admission to EDOU for observations. Patient is still drowsy but responds to verbal stimula. J.Lorimer
NEWS on admission=5 due to 02 and AVPU
Does the patient agree with the plan YES
NOK/relatives aware of plan for admission No patient is unable to state whether he wants his NOK (Brother) to be made aware of plan for admission. This will need explored in am J.Lorimer

Wellbeing form completed - n/a
Adult Support and Protection referral completed - n/a
Falls referral completed – n/a
Patient transferred on trolley/cotsides up
Escort required – yes

Yours sincerely

Emergency Department Ninewells Hospital

Community Mental Health Team West
NHS Tayside
Wedderburn House
1 Edward Street
Dundee
DD1 5NS
www.nhstayside.scot.nhs.uk

Dr NP Perdios
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

Clinic Date:	27/05/2025
Date Dictated	
Date Typed:	27/05/2025
Your Ref:	
Our Ref:	BT/MD/ **1411600134**
Enquiries to:	01382 346041
Extension:	Extension
Direct Line:	Direct Line
Email:	Email

Dear Dr Perdios

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE DOB: 14/11/1960

This patient failed to attend a review appointment at Wedderburn House on 27.05.25. I notice that he has failed to attend several appointments over the past 5 years and does not appear to have been seen since 2019. I will therefore send a 7 day opt-in letter and if we do not hear from him within that period will return him to primary care.

Yours sincerely

Authorised on 27/05/2025 15:29:24 by Brian Timney.

Dr Brian Timney
Locum Consultant Psychiatrist

NHS Tayside

NP Perdios
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

05/06/2025

Dear Colleague

Please see the following outcome from the vetting process.

Patient Name: Stuart Beattie
CHI Number: 1411600134
Referral Date: 22/05/2025

Referral Source: Allied Health Professional (AHP)

Referral Priority was: Routine
Vetted Priority is: Back to Referrer

BACK TO REFERRER - CANCELLED
Vetted By: Physiotherapy - Community

Please note: If the vetting outcome is Redirecting Referral then the vetted by specialty will show as the redirected to specialty and not the specialty originally referred to.

Comment (Please add comments below for the referrer as required)

Yours sincerely

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NHS

Final Discharge Communication

NHS

STUART BEATTIE 40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE *GP Practice: Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF*	CHI: 1411600134 Born: 14/11/1960

This letter updates/amends previous communication received in relation to this episode of care

Discharge Details

Admission	24/05/2025	**Discharge**	10/06/2025
Specialty	General Medicine	**Consultant**	Dr Christopher Schofield (6027818)
From	Ward 4 Ninewells Hospital	**Destination**	Home

Diagnoses

Choking episode

Rhabdomyolysis

Operations/Procedures

Actions Required for Primary Care

Communication to Primary Care

Based on EKORA's Notes

Dear Colleagues,

Stuart is a 64 M admitted on 24/05/25 following a choking episode at home. Clinically well. Recently discharged from ward 4 on 21/05 with rhabdomyolysis secondary to seizure/long lie. Note functional decline/reduced mobility, discharged with BD POC that will be restarted today.

Due to events of admission (please see ED d/c letter), concerns about vulnerable adult have been submitted.

Stuart has been reveiwed by medical team and is safe for discahrge home today, with a physiotherapy referral to community physiotherapy team.

Thank you for your ongoing care in the community!

Kind regards
W4 Medical Team
NW

Medications

Drug & Formulation	Dose	How to take	How long to take	Supply	Dispensary
Amisulpride 200mg tablets		1 TABLET TWICE DAILY Instalments: dispense weekly		Own at Home	
Amisulpride 50mg tablets		1 TABLET TWICE DAILY Instalments: dispense weekly		Own at Home	
Atorvastatin 20mg tablets		1 TABLET ONCE A DAY Instalments: weekly dispense Notes for patient: PLEASE ARRANGE A PRACTICE NURSE FACE TO FACE APPOINTMENT FOR A CHRONIC DISEASE ANNUAL REVIEW		Own at Home	

NHS | Final Discharge Communication | NHS

STUART BEATTIE 40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE *GP Practice: Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF*	CHI: 1411600134 Born: 14/11/1960

Dihydrocodeine 30mg tablets		TAKE TWO TABLETS AT NIGHT Instalments: dispense weekly		Own at Home	
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Furosemide 40mg tablets		1 TABLET MORNING AND 1 AT LINCHTIME Instalments: dispense weekly		Own at Home	
Gliclazide 40mg tablets		TAKE ONE TABLET IN THE MORNING [TOTAL DOSE 120MG] Instalments: dispense weekly		Own at Home	
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Discontinued Medication

Medication Notes

NHS | Final Discharge Communication | NHS

STUART BEATTIE 40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE *GP Practice: Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF*	CHI: 1411600134 Born: 14/11/1960

NO CHANGES TO REGULAR MEDICATIONS

VENALINK - No changes

Allergies

Deleted Allergies

Follow Up Arrangements

Final Discharge Comments

Some vulnerability, but capacity to make decisions was maintained. There was no medical illness requiring admission

Pharmacy

Venalink from Boots Lochee (01382) 611144 (venalink supplied from NW on discharge 21/05 then readmitted on 24/05). Supply updated by LCartney, pharmacy technician.

Pharmacy Check Type: **Professional check**

Pharmacist checked prescription with limited access to information. Please contact prescriber for any queries

Copy To

Sign Off

	Name	Job Title	Date/Time
Initial Sign Off	Dr Ibrahim AlHusseini	FY2	10/06/2025 09:33:54
Pharmacy Sign Off	Gayle Duncan	Clinical Pharmacist	11/06/2025 09:14:20
Final Sign Off	Dr Christopher Schofield	Consultant	11/06/2025 13:52:44

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STUART BEATTIE 40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE *GP Practice: Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF*	CHI: 1411600134 Born: 14/11/1960

This letter updates/amends previous communication received in relation to this episode of care

Discharge Details

Admission	24/05/2025	**Discharge**	10/06/2025
Specialty	General Medicine	**Consultant**	Dr Christopher Schofield (6027818)
From	Ward 4 Ninewells Hospital	**Destination**	Home

Diagnoses 11/06/2025 10:41:13

Choking episode	
Rhabdomyolysis	

Operations/Procedures

Actions Required for Primary Care

Communication to Primary Care

Based on EKORA's Notes

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Stuart is a 64 M admitted on 24/05/25 following a choking episode at home. Clinically well. Recently discharged from ward 4 on 21/05 with rhabdomyolysis secondary to seizure/long lie. Note functional decline/reduced mobility, discharged with BD POC that will be restarted today.

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Lacosamide 200mg tablets		TAKE 1 TABLET TWICE DAILY Notes for dispenser: dispense weekly		Own at Home	
Lamotrigine 100mg tablets		1 TWICE DAILY Instalments: dispense weekly		Own at Home	
Metformin 500mg modified-release tablets		2 TABLETS TWICE DAILY Instalments: weekly dispense Notes for patient: PLEASE ARRANGE A PRACTICE NURSE FACE TO FACE APPOINTMENT FOR A CHRONIC DISEASE ANNUAL REVIEW		Own at Home	
Omeprazole 20mg gastro-resistant capsules		1 CAPSULE ONCE A DAY Instalments: dispense weekly		Own at Home	
Ozempic 0.5mg/0.37ml solution for injection 1.5ml pre-fil...		INJECT 0.5MG WEEKLY ON A TUESDAY VIA DNS		Own at Home	
Paracetamol 500mg tablets		2 TABLETS FOUR TIMES A DAY Notes for dispenser: dispense weekly		Own at Home	
Sertraline 100mg tablets		1 TABLET ONCE A DAY Instalments: dispense weekly		Own at Home	
Solifenacin 5mg tablets		1 TABLET ONCE A DAY Instalments: dispense weekly		Own at Home	
Zopiclone 3.75mg tablets		TAKE 1 TABLET AT NIGHT FOR INSOMNIA. SHOULD BE SHORT TERM USE. TRY TO WEAN OFF THIS MEDICATION OVER TIME Instalments: dispense weekly Notes for patient: PLEASE MAKE GP REVIEW		Own at Home	

Discontinued Medication

Medication Notes

NHS Initial Discharge Communication NHS

STUART BEATTIE 40 SERVITE HOUSE, 136 ALEXANDER STREET, DUNDEE, DD3 7DE *GP Practice: Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF*	CHI: 1411600134 Born: 14/11/1960

NO CHANGES TO REGULAR MEDICATIONS

VENALINK - No changes

Allergies

Deleted Allergies

Follow Up Arrangements

Final Discharge Comments

Pharmacy

Venalink from Boots Lochee (01382) 611144 (venalink supplied from NW on discharge 21/05 then readmitted on 24/05). Supply updated by LCartney, pharmacy technician.

Pharmacy Check Type: **Professional check**

Pharmacist checked prescription with limited access to information. Please contact prescriber for any queries

Copy To

Sign Off

	Name	Job Title	Date/Time
Initial Sign Off	Dr Ibrahim AlHusseini	FY2	10/06/2025 09:33:54
Pharmacy Sign Off	Gayle Duncan	Clinical Pharmacist	11/06/2025 09:14:20
Final Sign Off			

Seen by Nurse

Tayside Out of Hours Service OOH Call Incident Report

Call number:	**50629**	Receive Date:	**10-Jun-2025 21:43**
Patient's Name:	**Stuart Beattie**		
Date of birth:	**14-Nov-1960 (64 years)**	Gender:	**M**
Address:	**Flat 40** **136 Alexander Street** **Dundee** **DD3 7DE**	Current Address:	**Flat 40** **136 Alexander Street** **Dundee** **DD3 7DE**
Return Contact No:			
Tel No:	**07584 642677**		**07584 642677**
Mobile No:			
Priority:	**within 2 hours**	Call Origin:	
Received:	**10-Jun-2025 21:43**	Calltype:	**District Nurse**
Advised:	**:**	Arrived PCC:	
Final Cons start:		Final Cons End:	
Consulting Doctor:		Own doctor:	**Deepa Sanu**

CHI Number:
1411600134

Reported Condition:
Symptoms: This case was generated from 50625. Caller Name: Fiona Caller Number: Initial Symptoms: History: RETURN CALLER MEDICATION ENQUIRY - 1 DAY --- Clinical summary created by: Suma Foad (Pharmacist) () [10/06/2025 22:30:42] Reason for call: RETURN CALLER MEDICATION ENQUIRY - 1 DAY 10:06:2025 21:10:08 LAWN.. THIRD PARTY CALL NOT WITH PT, DISCHARGED FROM HOSPITAL WITH MEDICATION, HE HAS BEEN GIVEN MEDICATION IN BOXES AND SOCIAL WORK IS UNABLE TO PROMPT FROM BOXES, NOT BEEN GIVEN TONIGHTS MEDICATION.. 10:06:2025 21:29:45 FOADS.. RETURN CALLER. NO SYMPTOMS OF CONCERN. RECENR DISCHARGE FROM HOSPITAL WITH MEDICATIONS NOT IN A BLISTER PACK AND CARERS AREMN'T ABLE TO ADMISNISTER MEDS... NO DETAILS OF MEDS AVAILABLE OR DISCHARGE LETTER. SPEAK TO CLINICIAN 1 HOUR... Outcome: Speak to clinician within 1 Hr --- Examination: . Diagnosis: . Treatment: Discharged fom NW today. Can DN please attend - carers not willing to administer meds. No EDD on CP but there is a version that has not been formally signed off. I can see that there are no changes to his regular meds so he can just be given his medications from the venalink at home. This was supplied from NW on d/c 21/05 but was readmitted on 24/05. His keysafe is 1941. There is no electricity in the home but this will be sorted tomorrow. Carers advise he has boxes of new meds - can this be double checked - he shouldn't have new meds from from NW Case Summary: --- RETURN CALLER MEDICATION ENQUIRY - 1 DAY --- Clinical summary created by: Suma Foad (Pharmacist) () [10/06/2025 22:30:42] Reason for call: RETURN CALLER MEDICATION ENQUIRY - 1 DAY 10:06:2025 21:10:08 LAWN.. THIRD PARTY CALL NOT WITH PT, DISCHARGED FROM HOSPITAL WITH MEDICATION, HE HAS

Seen by Nurse

BEEN GIVEN MEDICATION IN BOXES AND SOCIAL WORK IS UNABLE TO PROMPT FROM BOXES, NOT BEEN GIVEN TONIGHTS MEDICATION.. 10:06:2025 21:29:45 FOADS.. RETURN CALLER. NO SYMPTOMS OF CONCERN. RECENR DISCHARGE FROM HOSPITAL WITH MEDICATIONS NOT IN A BLISTER PACK AND CARERS AREMN'T ABLE TO ADMISNISTER MEDS... NO DETAILS OF MEDS AVAILABLE OR DISCHARGE LETTER. SPEAK TO CLINICIAN 1 HOUR... Outcome: Speak to clinician within 1 Hr ---

---

Followups:
None

NHS Tayside

NP Perdios
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

12/06/2025

Dear Colleague

Please see the following outcome from the vetting process.

Patient Name: Stuart Beattie
CHI Number: 1411600134
Referral Date: 11/06/2025

Referral Source: Allied Health Professional (AHP)

Referral Priority was: Routine
Vetted Priority is: Routine

PHYSIOTHERAPY DUNDEE DOMICILIARY ROUTINE
Vetted By: Physiotherapy - Community

Please note: If the vetting outcome is Redirecting Referral then the vetted by specialty will show as the redirected to specialty and not the specialty originally referred to.

Comment (Please add comments below for the referrer as required)

Yours sincerely

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Tayside Out of Hours Service OOH Call Incident Report

Call number:	**50839**	Receive Date:	**11-Jun-2025 20:50**
Patient's Name:	**Stuart Beattie**		
Date of birth:	**14-Nov-1960 (64 years)**	Gender:	**M**
Address:	**40 SERVITE HOUSE 136 ALEXANDER STREET DUNDEE DD3 7DE**	Current Address:	**40 SERVITE HOUSE 136 ALEXANDER STREET DUNDEE DD3 7DE**
Return Contact No:			
Tel No:	**07584 642677**		**07584 642677**
Mobile No:			
Priority:	**Routine**	Call Origin:	**Social Services**
Received:	**11-Jun-2025 20:50**	Calltype:	**Advice**
Advised:	**:**	Arrived PCC:	
Final Cons start:	**11-Jun-2025 21:34**	Final Cons End:	**11-Jun-2025 22:16**
Consulting Doctor:	**David Shaw**	Own doctor:	**Deepa Sanu**

CHI Number:
1411600134

Reported Condition:
Symptoms: Social work - discharged from hospital yesterday afternoon; concern re medication - GP call back to discuss Comments: These cases were received and finished within the last 72 hours:District Nurse #50629 at 10-Jun-25 21:43:41, Advice #50625 at 10-Jun-25 21:09:13

Final Consultation details:

Consultation Start - **11-Jun-2025 21:34**

Consultation Finish - **11-Jun-2025 22:16**

Consulting Clinician - **Shaw, David**

History - **SW contacted as carers are unable to administer Stuart's medicines as these aren't in a venalink. SW has contact number for DNs and plans to contact them. Have suggested that DN/practice liaise to ensure that Stuart's meds are either taken over by DNs, or he is moved to a venalink to allow ongoing medicines administration.**

Diagnosis - **medication administration issue**

Treatment - **SW will liaise with DNs**

Clinical Codes - **677B. Advice about treatment given**

Followups:
No Follow Up

Clinical Codes Summary (All Consultations):
677B. Advice about treatment given

Case Questions:
Chaperone Assisted

Chaperone Assisted	**No**

[redacted]

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NHS Tayside

Dundee Health & Social Care Partnership

Dundee Community COPD Service
Community Nursing
Specialist Nursing Services
Administration Office
The Crescent
71 Lothian Crescent
Dundee
DD4 0HU

Stuart Beattie
40 Servite House
136 Alexander Street
Dundee
Angus
DD3 7DE

Date 12/06/2025
Clinic Date 08/08/2025
Our Ref COPD/JM/ **1411600134**
Enquiries to 01382 432068

Dear Stuart Beattie

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE DOB: 14/11/1960

Outpatient Appointment

An appointment has been made for you at the clinic noted below:

Clinic: **COMMUNITY COPD ASSESSMENT CLINIC**

Time: **FRIDAY 8TH AUGUST 2025 at 2 pm**

Please report to: **KINGS CROSS CARE & TREATMENT CENTRE DUNDEE DD3 8EA**

Your appointment at the clinic may take up to an hour as the nurse needs to complete a full assessment and perform a spirometry assessment (See Patient Information Leaflet enclosed). Most people are able to have a spirometry test safely but spirometry may not be safe if you have, or have recently had, unstable angina, a heart attack, uncontrolled high blood pressure, or an operation to your head, chest, stomach or eyes. If you think this may apply to you, please telephone **01382 432068** and leave a message including a contact number, we will arrange for a COPD nurse to call you back.

It is important that you please bring your SALBUTAMOL INHALER (Blue inhaler) and any other inhalers with you to the appointment. You will be asked to take the blue inhaler prior to your spirometry assessment.

Please do not attend if you are unwell, have an active infection or have had a respiratory infection in the last 4-6 weeks or you have had any of the following symptoms in the last 24 hours.

- High unexplained temperature or fever
- New or worsening respiratory symptoms which suggest you may have a respiratory virus.

Please call if you wish to change or cancel your appointment, please telephone 01382 432068.

NHS Tayside

IF YOU DO NOT ATTEND YOUR APPOINTMENT AND FAIL TO REARRANGE YOU WILL BE OFFERED ONE FURTHER APPOINTMENT. IF YOU FAIL TO ATTEND THIS APPOINTMENT YOU WILL BE REMOVED FROM OUR WAITING LIST AND YOUR GP WILL BE INFORMED.

Authorised on 12/06/2025 12:21:46 by Typist Jacklyn Milne, not verified by Consultant.

COPD NURSING TEAM
Chronic Obstructive Pulmonary Disease

(D) Dr NP Perdios, Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF

Department of Neurology
Operational Unit
NHS Tayside
Ninewells Hospital
Dundee
DD1 9SY

Dr NP Perdios
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

Date 01/07/2025
Clinic Date 24/06/2025
Your Ref
Our Ref HW/KL/ **1411600134**
Enquiries to
Extension 32134
Direct Line 01382 632134
Email

Dear Dr Perdios

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE DOB: 14/11/1960

Current anti-seizure medications: Sodium Valproate 1g bd
Lamotrigine 100mg bd
Lacosamide 200mg bd

I undertook a telephone consultation with Stuart on 24th June 2025. As you are aware Stuart had a diagnosis of epilepsy characterised with generalised tonic clonic seizures. Unfortunately Stuart lives alone and the majority of these events have been unwitnessed. However, I appreciate that last year there was a witnessed event on the bus where he was rigid and stiff. The decision was made for his Lacosamide to be increased to 200mg twice a day.

It was very difficult to get an accurate seizure history from Stuart as he was very vague. He feels that his last seizure was approximately 3 weeks ago. He woke up on the floor and I asked if there was any tongue biting or urinary incontinence and he denied this.

I do note that it has been sometime since he has seen his consultant Professor Morrison and as it was difficult to undertake an assessment over the telephone today I have requested that his next appointment with Professor Morrison will be face-to-face to obtain a better assessment of his seizure frequency. He has my contact details if he has any other concerns regarding his epilepsy.

Yours sincerely

Authorised on 01/07/2025 15:08:11 by Hayley Wilson.

Hayley Wilson
Epilepsy Specialist Nurse

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DECAHT Discharge Document

Name	Stuart Beattie	**Referral Date (date)**	07/07/25	
CHI	1411600134	**Discharged from Caseload (date)**	14/07/2025	
G.P Surgery	Taycourt Surgery			
POA		**Activated?**	YES	NO
Reason for Referral	Frailty and falls			
Nurses Identified Problem List **(Have all problems been addressed including the reason for referral)**	Falls Postural hypotension Decline in cognition Polypharmacy review			
ANP Identified Problem List **(Inc any diagnosis and treatment plan)**	Escalated to DECaHT ANP's 14/07/25 – concerns of symptomatic postural hypotension. Plan – stop Furosemide and review L+S BP. Confusion re amount of Dihydrocodeine being taken. Prescribed 2 at night and in Vena link but pt stating taking 6 a day, no evidence of boxes of Dihydrocodeine in the house. Bloods taken. 21/07/25 - DECaHT nurse reviewed L+S BP still postural drop but less dizzy. Case discussion with DECaHT geriatricians and agreed to stop Solifenacin 5mg and L+S BP to be reviewed. Diabetic medication reviewed and HbA1c 49mmols – to stop Gliclazide 120mg. 5/8Cluster pharmacist rv medication no other culprit medications with exception of antipsychotics, not been seen by POA since 2019 – may need re referred.			
Discharge Weight	107.2kg			
Frailty Score	5			
Discharge Baseline Vital Signs	BP 141/81 laying down, BP 84/66 standing 1 minute, BP 98/63 standing 3 minutes, spo2 97, HR 82 reg.			

DECAHT Discharge Document

MMSE (if completed). **(How does this affect ADLs. What is the ask of the G.P from this information ie: referral to PoA).**	
Outstanding Actions for Primary Care	
Escalation Plan if Deterioration	

PHARMACOLOGICAL	**Tick if applicable (✓) + date**
Level 1 polypharmacy review undertaken	X
Referral for higher level polypharmacy review	X
Acute medication issued	
Recommendations to GP for changes to repeat medications	
FUTURE CARE PLANNING	**Tick if applicable (✓) + date**
ReSPECT or ACP undertaken and uploaded to clinical portal	
KIS opened and special note added/amended	
Future Care Planning already clearly documented; no action required	
REFERRALS	**Tick if applicable (✓) + date**
To geriatrician for senior clinical review	
To community rehab services – Physiotherapy	
To community rehab services – Occupational Therapy	
For review/increase of social care services	
Required hospital admission whilst on caseload	
Discharged to mainstream DN service	
Referred for Community Alarm	
Referred to HOPE Project	

DECAHT Discharge Document

Referred to SALT	
Referred to Dietician	
Referred for Key Safe:	
Other:	
DISCHARGING COMMUNITY NURSE: Tracy Reid	**DATE: 14/08/2025**
DISCHARGING ANP:	**DATE:**

NHS Tayside Communication to GP

Ward/Clinic	DECAHT	CHI	1411600134
Hospital	Royal Victoria Hospital	Surname	BEATTIE
Clinician	Tracy Reid	First Name	STUART
Specialty	GERIATRIC MEDICINE	Address	40 SERVITE HOUSE 136 ALEXANDER STREET DD3 7DE
Date	07/07/2025	GP/Address	Tay Court Surgery 50 South Tay Street Dundee DD1 1PF

Dear Doctor,

Provisional/Diagnosis is: This patient is now under Dundee Enhanced Care at Home Team (DECaHT) nursing caseload. Medical responsibility remains with the GP during this time.

If you are a health or social care professional and wish to get in touch with one of the DECaHT team, please do so on 01382 423186 Mon-Fri 08:30am-16:30pm or by emailing tay.decahteast@nhs.scot for clusters 1&2 or tay.decahtwest@nhs.scot for clusters 3&4.

Comment/Recommendations: If the patient, family or carer would like to get in touch with one of the team please ask them to call DECaHT on 01382 432150 Mon-Fri 08:30am-20:00pm and Sat-Sun 08:30am-16:30pm and leave a message with the patients details and a short summary of the reason for the call.

Any documentation will be available on Vision, if assessed by an ANP, or on EMiS while under nursing care.

A further clinical communication with be sent when the patient is discharged from the service along with a discharge summary which will be sent to the practice generic email box.

Follow up by clinic required: No

Specific Monitoring Required: No

Tracy Reid | Community Nurse | Tel:07881 518497
Ninewells Switch Board Tel:01382 660111

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Filename: 13.pdf
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Pages:

Tayside Clinical Laboratory Services — Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart Sex: M PID: 1411600134 DoB: 14 Nov 1960
Lab No: H252859756
Tay Court Surgery Clinician: Dr Nectarios PERDIOS TCS PERN1G

HGB	145	g/L	(130-180)		WBC	6.4	x10^9/L	(4.0-11.0)
RBC	5.25	x10^12/L	(4.5-6.0)		NE#	3.3	x10^9/L	(2.0-7.5)
HCT	0.456		(0.40-0.52)		LY#	2.2	x10^9/L	(1.5-4.0)
MCV	86.8	fl	(85-105)		MO#	0.6	x10^9/L	(0.2-0.8)
MCH	27.7	pg	(27-32)		EO#	0.16	x10^9/L	(0.0-0.4)
MCC	318 L	g/L	(320-360)		BA#	0.0	x10^9/L	(0.0-0.1)
					PLT	222	x10^9/L	(150-400)

10/07/2025-10:31:18

Lab.Comments:

Sample is blood unless otherwise stated

Sample Date/Time
09 Jul 2025 12:24

Clin.Details: falls work up

Request Entered: 09 Jul 2025 14:51 Report Printed: 09 Jul 2025 15:17

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14-July-2026 ACOYLE
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Filename: 14.pdf
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Pages:

NHS Tayside Communication to GP

Ward/Clinic	DECAHT nursing team.	CHI	1411600134
Hospital	Royal Victoria Hospital	Surname	BEATTIE
Clinician	Fiona Stephen	First Name	STUART
Specialty	GERIATRIC MEDICINE	Address	40 SERVITE HOUSE 136 ALEXANDER STREET DD3 7DE
Date	08/07/2025	GP/Address	Tay Court Surgery 50 South Tay Street Dundee DD1 1PF

Dear Doctor,

Provisional/Diagnosis is: Patient was seen today for assessment, on assessing his medication he is telling us he no longer takes some things and its geting a bit messy for him. He is currently saying he is pain free on paracetamol only and zopliclone is doing nothing for him. He also has a postural drop of, 135/78 to 81/56 and after 3 mins 117/71. Slighlty dizzy with this. Falls are continuing also.

Comment/Recommendations: Can he pleae have a review of his meication please to see if we can stop anything contributing to his posturalk drop and falls.

Follow up by clinic required: No

Specific Monitoring Required: No

Fiona Stephen | SCN Community | Tel:01382 346009
Ninewells Switch Board Tel:01382 660111

NHS Tayside Communication to GP

Name: BEATTIE STUART CHI: 1411600134 Clinic Date: 08/07/2025

Ward/Clinic: DECAHT nursing team.

Further comment/Recommendations:
Full bloods and ECG to be obtained 8/7/25.

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Pages:

Tayside Clinical Laboratory Services Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart Sex: M PID: 1411600134 DoB: 14 Nov 1960
Lab No: C252859756
Tay Court Surgery Clinician: Dr Nectarios PERDIOS TCS PERN1G

SODIUM	138		mmol/L	(133-146)	
POTASSIUM	4.2		mmol/L	(3.5-5.3)	
CREATININE	63		umol/L	(62-106)	
ESTIMATED GFR	GT60		mL/min		
	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.				
CKD Stage	IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA				
ALT	LT9		U/L	(5-55)	
BILIRUBINS	8		umol/L	(0-21)	
ALKALINE PHOSPHATASE	73		U/L	(30-130)	
ALBUMIN	36		g/L	(35-50)	
CALCIUM	2.33		mmol/L	(2.10-2.55)	
CALCIUM (CORRECTED)	2.37	*	mmol/L	(2.10-2.55)	
C-REACTIVE PROTEIN	11.2	>	mg/L	(0.0-10.0)	

Lab.Comments:

10/07/2025-10:30:27

Sample is blood unless otherwise stated

Sample Date/Time
09 Jul 2025 12:24

Clin.Details: falls work up

Request Entered: 09 Jul 2025 14:51 Report Printed: 09 Jul 2025 15:41

Tayside Clinical Laboratory Services Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart Sex: M PID: 1411600134 DoB: 14 Nov 1960
Lab No: C252859256
Tay Court Surgery Clinician: Dr Nectarios PERDIOS TCS PERM1G

AKI	Not detected: May not exclude AKI in all cases

Lab.Comments:

Sample is blood unless otherwise stated

Sample Date/Time
09 Jul 2025 12:24

Clin.Details: falls work up

Request Entered: 09 Jul 2025 14:51 Report Printed: 09 Jul 2025 15:41

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14-July-2026 ACOYLE
Additional: Scanned Document

Filename: 11.pdf
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Pages:

Tayside Clinical Laboratory Services — Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart Sex: M PID: 1411600134 DoB: 14 Nov 1960
Lab No: H252870494
Tay Court Surgery Clinician: . G P LOCUM TCS LOC

HGB	149	g/L	(130-180)	WBC	7.4	x10^9/L	(4.0-11.0)
RBC	5.13	x10^12/L	(4.5-6.0)	NE#	3.9	x10^9/L	(2.0-7.5)
HCT	0.451		(0.40-0.52)	LY#	2.8	x10^9/L	(1.5-4.0)
MCV	88.0	fl	(85-105)	MO#	0.5	x10^9/L	(0.2-0.8)
MCH	29.1	pg	(27-32)	EO#	0.11	x10^9/L	(0.0-0.4)
MCC	330	g/L	(320-360)	BA#	0.0	x10^9/L	(0.0-0.1)
				PLT	239	x10^9/L	(150-400)

15/07/2025-11:02:03

Lab.Comments:

Sample is blood unless otherwise stated

Sample Date/Time
14 Jul 2025 14:25

Clin.Details: ANP Z.Hail, DECaHT rquest. Falls, dizziness and postural hypotension. Known T2DM. Will review results between 9-4pm Mon-Fri.

Request Entered: 14 Jul 2025 17:49 Report Printed: 14 Jul 2025 18:03

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14-July-2026 ACOYLE
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Tayside Clinical Laboratory Services Telephone 01738 473223 (PRI) 01382 632602 (NW)

Name: BEATTIE Stuart Sex: M PID: 1411600134 DoB: 14 Nov 1960
Lab No: C252870494

Tay Court Surgery Clinician: . G P LOCUM TCS LOC

SODIUM	137		mmol/L	(	133-146)
POTASSIUM	3.6	*	mmol/L	(	3.5-5.3)
CREATININE	71		umol/L	(	62-106)
ESTIMATED GFR	GT60		mL/min		

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.

CKD Stage IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA

[redacted]

AKI Not detected. May not exclude AKI in all cases

Lab.Comments:

16/07/2025-10:54:39

Sample is blood unless otherwise stated

Sample Date/Time
14 Jul 2025 14:25

Clin.Details: ANP Z.Hail, DECaHT rquest. Falls, dizziness and postural hypotension. Known T2DM. Will review results between 9-4pm Mon-Fri.

Request Entered: 14 Jul 2025 17:49 Report Printed: 15 Jul 2025 16:16

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14-July-2026 ACOYLE
Additional: Scanned Document

Filename: 9.pdf
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Pages:

NHS Tayside Communication to GP

Ward/Clinic	DECaHT	CHI	1411600134
Hospital	Royal Victoria Hospital	Surname	BEATTIE
Clinician	Hazel Littlechild	First Name	STUART
Specialty	GERIATRIC MEDICINE	Address	40 SERVITE HOUSE 136 ALEXANDER STREET DD3 7DE
Date	21/07/2025	GP/Address	Tay Court Surgery 50 South Tay Street Dundee DD1 1PF

Dear Doctor,

Provisional/Diagnosis is: Polypharmacy/ Postural hypotension

Comment/Recommendations: Under review by DECaHT ANP/ nursing teams. Noted to have postural hypotension with symptomatic drop. Some improvement since furosemide held last week. Asked opinion re polypharmacy and attempting to optimise. Previous suboptimal diabetes control and started GLP1 agonist during recent hospital admission. Subsequently better control - BMs 8-10. Reasonable to try off gliclazide. Also stop solifenacin. No other changes suggested at present.

Follow up by clinic required: No

Specific Monitoring Required: No
The following treatment is recommended:

	Medication	Dose	Frequency	Indication	Duration
1.					

Is any Medication to be discontinued: Yes

Medication to be discontinued: Furosemide, gliclazide, solifenacin

Hazel Littlechild | Geriatrics Registrar | Tel:01382 660111
Ninewells Switch Board Tel:01382 660111

NHS Tayside Communication to GP

Name: BEATTIE STUART CHI: 1411600134 Clinic Date: 21/07/2025

Ward/Clinic: DECaHT

Further comment/Recommendations:
Remains under DECaHT ANP/ nursing review - further communication will follow from their team

Hazel Littlechild | Geriatrics Registrar | Tel:01382 660111
Ninewells Switch Board Tel:01382 660111

NHS Tayside Communication to GP

Ward/Clinic	DECAHT	CHI	1411600134
Hospital	Royal Victoria Hospital	Surname	BEATTIE
Clinician	Tracy Reid	First Name	STUART
Specialty	GERIATRIC MEDICINE	Address	40 SERVITE HOUSE 136 ALEXANDER STREET DD3 7DE
Date	14/08/2025	GP/Address	Tay Court Surgery 50 South Tay Street Dundee DD1 1PF

Dear Doctor,

Provisional/Diagnosis is: This patient has now been discharged from Dundee Enhanced Care at Home Team (DECaHT) caseload and the discharge summary has been sent to the practice generic email box for your records.

Comment/Recommendations: If you have any questions or queries please do not hesitate to get in touch via email tay.decahteast@nhs.scot for clusters 1&2 or tay.decahtwest@nhs.scot for clusters 3&4 or if your query is urgent please call (01382) 423186 between 08:30-16:30 Mon-Fri

Follow up by clinic required: No

Specific Monitoring Required: No

Tracy Reid | Community Nurse | Tel:07681 516497
Ninewells Switch Board Tel:01382 660111

NHS Tayside

Dundee Community COPD Service
Kings Cross Health and Community Care Centre
Clepington Road
Dundee
DD3 8EA
Tel: 01382 835151

Stuart Beattie
40 Servite House
136 Alexander Street
Dundee
Angus
DD3 7DE

Date	30/10/2025
Your Ref	**1411600134**
Our Ref	COPD/AW
Enquiries to	Secretary
Extension	71259
Direct Line	01382 835151

Dear Stuart Beattie

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE DOB: 14/11/1960

COMMUNITY COPD CLINICAL NURSE SPECIALIST SERVICE

You have been referred to this service for a COPD assessment.

The Community COPD Clinical Nurse Specialist (CNS) Clinics are based in Lochee Health Centre, The Crescent and Kings Cross Community care centre Dundee.

We would like to offer you an initial appointment with a COPD Clinical Nurse Specialist. If you would like to attend for an assessment, please contact us to arrange a face to face appointment at one of our community venues.

Our contact details are **01382 835151 Monday to Friday 09:30-13:30**.

Out with these times we would appreciate if you could please leave a message on our answer machine and we will return your call with an appointment date and time.

We would appreciate if you could contact us within the next two (2) weeks.

We look forward to hearing from you.

Thank you

Community COPD CNS Team

(D) Dr NP Perdios, Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF

NHS Tayside

Dundee Community COPD Service
Kings Cross Health and Community Care Centre
Clepington Road
Dundee
DD3 8EA
Tel: 01382 835151

Stuart Beattie
40 Servite House
136 Alexander Street
Dundee
Angus
DD3 7DE

Date	13/11/2025
Your Ref	**1411600134**
Our Ref	COPD/AW
Enquiries to	Secretary
Extension	71259
Direct Line	01382 835151

Dear Stuart Beattie

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE DOB: 14/11/1960

COMMUNITY COPD CLINICAL NURSE SPECIALIST SERVICE

Should you fail to respond to this SECOND LETTER request in the next 2 weeks, we must return your referral to your GP, who can re refer you if it is assessed necessary.

The Community COPD Clinical Nurse Specialist (CNS) Clinics are based in Community Venues across Dundee.

We would like to offer you an initial appointment with a COPD Clinical Nurse Specialist. If you would like to attend for an assessment, please contact us to arrange a face-to-face appointment at one of our community venues.

Our contact details are **01382 835151 Monday to Friday 09:30-13:30**.

Out with these times we would appreciate if you could please leave a message on our answer machine and we will return your call with an appointment date and time.

We look forward to hearing from you.

Thank you

Community COPD CNS Team

(D) Dr NP Perdios, Tay Court Surgery, 50 South Tay Street, Dundee, DD1 1PF

NHS Tayside Communication to GP

Ward/Clinic		CHI	1411600134
Hospital	Kings Cross Hospital.	Surname	BEATTIE
Clinician	Pamela Falconer	First Name	STUART
Specialty	RESPIRATORY MEDICINE	Address	40 SERVITE HOUSE 136 ALEXANDER STREET DD3 7DE
Date	25/11/2025	GP/Address	Tay Court Surgery 50 South Tay Street Dundee DD1 1PF

Dear Doctor,

Provisional/Diagnosis is: Stuart has been refered to community COPD clinic for spirometry. He contacted the service to advice that he would be unable to attend. He is housebound and has not left his home since April. Today describes daily productive cough, assoicated with wheeze and smoking history. Disucssed proable diagnosis of COPD. I note admission and exacerbation in 2024.

Comment/Recommendations:

Happy for trial of LAMA/LABA. Previous trial of Anoro Ellipta. Happy to recommence and I shall review response. .

Follow up by clinic required: No

Specific Monitoring Required: No
The following treatment is recommended:

	Medication	Dose	Frequency	Indication	Duration
1.	Anoro Ellipta 55/22 inhaler	55/22 mcg	one inhalation once daily.	COPD	60 doses
2.	Salbutamol 100 mcg CFC free	100 mcg	2 puffs up to 4 times daily if required	COPD	200 doses
3.	areochamber and mask adult	1	as required with inhaler	COPD	one only.

Is any Medication to be discontinued: No

Department of Neurology
Operational Unit
NHS Tayside
Ninewells Hospital
Dundee
DD1 9SY

Dr NP Perdios
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

Date	15/01/2026
Clinic Date	13/01/2026
Your Ref	
Our Ref	PS/LM/ **1411600134**
Enquiries to	Neurology Secretaries
Extension	
Direct Line	01382 632134
Email	

Dear Dr Perdios

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE DOB: 14/11/1960

Stuart was due to have a telephone review in the nurse led epilepsy clinic on 13th January 2026. Unfortunately I have tried Stuart twice on his telephone during his appointment time and it is going straight to voicemail, therefore I will reappoint Stuart in approximately 3 months time, however if he has concerns about his epilepsy before then, he can contact me directly on 01382 740237.

Yours sincerely

Authorised on 27/01/2026 08:30:45 by Mrs Pauline Smith.

Mrs Pauline Smith
Epilepsy Specialist Nurse
Non Medical Prescriber
NMC no: 93I0689S

(P) Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE

NHS Tayside

Respiratory Medicine
Medicine Directorate
NHS Tayside
Kings Cross Health & Community Care Centre
Hospital Street Entrance
Dundee
DD3 8EA
sPrefPhoneNo
sPrefFax

Dr NP Perdios
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

Date	05/02/2026
Clinic Date	
Your Ref	
Our Ref	COMMUNITY copd/ **1411600134**
Enquiries to	pamela Falconer
Extension	Extension
Direct Line	DirectLine
Email	Email

Dear Dr Perdios

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE DOB: 14/11/1960

Planned support visit to review post commencing Anoro :

No answer when calling to review. Joint visit with Sandra Reid. As per safety plan

Entry into building by warden. Warden unsure if anyone was in with Stuart.

On our arrival Stuart answered the door and consented to us reviewing him today. Friend Darius was present.
We noted that there was clothing lying in a pile and a bag of rubbish beside the sofa. Stuart states that the clothing belonged to his friends. Window was wide open. On questioning why the window was open. Stuart reported that his home was very warm.

Stuart sat down on the sofa; he stated that his carers were running late and that he was awaiting them to apply his splints. We observed that his toe nail on his right big toe was very long and Stuart confirmed that it has been troubling him. Stuart is seen by podiatry. I explained that I would call and enquire when he was next due his review. Podiatry are due to visit in next few weeks. I have highlighted that this shall require to be a joint visit.
Half way through the consultation today, the front door buzzer rang. Stuart asked Darius to answer the call buzzer. During which time we had an opportunity to ask Stuart how things had been. He explained that the police and positive step were helping him and that he had no ongoing concerns. On returning to the sitting room, we enquired who had buzzed and Darius responded that he did not check and had just buzzed the person in.

A young female enter Stuarts home, she came into the sitting room. Stuart seemed pleased to see her and was asking what she had on her head. The young female did not respond and promptly went to the bedroom. We were both aware of a strong odour coming form the bedroom. I asked Stuart who the female was and again he responded my friend. On leaving we observed that the bedroom door was open and that the young female was sitting on the bed.

We spoke with the warden on leaving and I highlighted that there was a young female had just entered the flat, and that we could smell a strong odour coming from the bedroom that was wafting through to the sitting room. I explained that I planned to contact SW to highlight this given the ongoing concerns that have been raised. Warden confirmed that Stuart would not allow positive steps to enter him home earlier in the week.
Called social worker Stacey Rutherford, who was unfortunately unavailable. I therefore left a message with duty SW and spoke and raised my concerns.

Today on examination

Resp 16
BP 142/79
pulse 83 regular
spo2 95 %
breath sounds heard throughout, no added sounds.

Stuart demonstrated a good technique using his Anoro inhaler, Stuart reports minimal improvement in symptoms.
Stuart continues to smoke 10-15 daily and continues to use a vape. We have strongly advised Stuart that unfortunately his symptoms shall not improve until he stops smoking.
Stuart describes a small amount of phlegm daily; he tends to swallow the sputum. We have encouraged Stuart importance of monitoring his sputum for any changes.
Today we spent time going over his SMP and highlighted importance of early intervention and seeking support.
Stuart disclosed that he had a fall last week, stating that he tripped over his bed. He showed us grazed knees which appeared to be healing well with no signs of infection. We highlighted the importance of ensuring his floor is clutter free to prevent such falls.
I have called and left a message with falls service, Stuart has previously been reviewed by them. I am unsure if there is anything else that can be added to prevent falls. Stuart already has a community alarm in place. Warden confirms that he Stuart frequently leaves the building without his walking aids, although Stuart informed us that he never leaves his home.

Impression and plan.

Respiratory wise Stuart symptoms appear to be fairly well controlled despite his ongoing smoking.
Encouraged importance of smoking cessation.
Happy to continue Anoro and SABA : Request for this to be added to repeat. Form completed.
I have also highlighted that I have observed that Stuart is not talking his ozempic and setraline.
Unknown female present today ; Highlighted this to duty SW.
Toe nail long on right big toe : Podiatry shall follow up.
I have called and left a message with falls service : ? suitability re referral.
Time spent today with Stuart going over SMP.
Not unduly troubled by respiratory symptoms and in agreement to 6 monthly reviews at home.

Stuart was bright and engaging today, his friend Darius did not communicate with us and sat quietly on the sofa.

Yours sincerely

Authorised on 05/02/2026 15:01:05 by Pamela Falconer.

Pamela Falconer

NHS Tayside Communication to GP

Ward/Clinic		CHI	1411600134
Hospital	Kings Cross Hospital	Surname	BEATTIE
Clinician	Pamela Falconer	First Name	STUART
Specialty	RESPIRATORY MEDICINE	Address	40 SERVITE HOUSE 136 ALEXANDER STREET DD3 7DE
Date	05/02/2026	GP/Address	Tay Court Surgery 50 South Tay Street Dundee DD1 1PF

Dear Doctor,

Provisional/Diagnosis is: ? COPD : Has had a trial of Anoro and SABA. Please see clinical portal for full review.

Comment/Recommendations: Please can Anoro Ellipta and Salbutamol be added to repeat medications. Please can also highlight that Stuart last ordered his ozempic on the 25/07/25 and his Sertraline 100 mgs 31/12/25.

Follow up by clinic required: No

Specific Monitoring Required: No
The following treatment is recommended:

	Medication	Dose	Frequency	Indication	Duration
1.					

Is any Medication to be discontinued: No

Pamela Falconer | community COPD nurse | Tel:07887 546027
Ninewells Switch Board Tel:01382 660111

NHS Tayside

Department of Neurology
Operational Unit
NHS Tayside
Ninewells Hospital
Dundee
DD1 9SY

Dr M Majumdar
Tay Court Surgery
50 South Tay Street
Dundee
DD1 1PF

Date	17/04/2026
Clinic Date	14/04/2026
Your Ref	
Our Ref	PS/AG/ **1411600134**
Enquiries to	Neurology Secretaries
Extension	32501
Direct Line	01382 632501
Email	

Dear Dr Majumdar

Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE DOB: 14/11/1960

Stuart was meant to have a telephone review in the Nurse Led Epilepsy Clinic. Unfortunately his phone went straight to voicemail stating that it was not possible to connect my call. This means Stuart has not attended his telephone review in the Nurse Led Epilepsy Clinic.

It Stuart would like to get in contact with me directly with a phone number he can do so on 01382 740237.

Yours sincerely

Authorised on 23/04/2026 12:17:57 by Mrs Pauline Smith.

Mrs Pauline Smith
Epilepsy Specialist Nurse
Non Medical Prescriber
NMC no: 93I0689S

(P) Stuart Beattie, 40 Servite House, 136 Alexander Street, Dundee, Angus, DD3 7DE

Filename: 0008P00T.html
Extension:.tif
Pages:

Hospital use only	Clinic	Day / Date	Time	Hospital No.

Transport required?

REFERRAL LETTER
MEDICAL IN CONFIDENCE

Unique Care Pathway Number
101025006559J

REFERRAL TO

Dundee Community Mental Health West TeamG1TW
TAY General Referral v6.2

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

Wedderburn House
1 Edward Street
Dundee
DD1 5NS

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

Hospital unit no.: T333C

Email address: -

Date of Referral (set by referrer) 02-Dec-2021
Date referral was submitted 02-Dec-2021
Urgency of referral Routine
?

Armed Forces Personnel, Immediate Families & Veterans
- ☐ On active service
- ☐ Condition related to service
- ☐ Immediate family member

Impairment(s)
- ☐ Learning
- ☐ Visual
- ☐ Hearing

Miscellaneous
Interpreter Required:None
Details of "Other" Language:None

PATIENT DETAILS

Surname	BEATTIE
Forename(s)	STUART
Title	MR
Sex	Male
Date of birth	14-Nov-1960
CHI no.	1411600134

Patient's address
40 SERVITE HOUSE
136 ALEXANDER STREET
DUNDEE
DD3 7DE

Contact number(s)
Voice: 07394015180

REGISTERED GP DETAILS

Name	Dr Nectarios Perdios		
GMC code	7495898	GP code	74900
Practice name	Taycourt Surgery		
Practice code	11058		

Practice address
50 SOUTH TAY STREET
DUNDEE

Contact number(s)
Voice: 01382228228

REFERRING PRACTITIONER DETAILS

Name	Dr Balakrishnan Pillai		
GMC code	5204709	GP code	78557
Practice name	Taycourt Surgery		
Practice code	11058		

Practice address
50 SOUTH TAY STREET
DUNDEE

Contact number(s)
Voice: 01382228228

Periods of Future Unavailability None provided.

CLINICAL INFORMATION

History of presenting complaint / examination findings / investigation results

Presenting complaint

Description: See below

Comment: I would be grateful if this man could be added to the waiting list. He missed his last appointment in November 20 and in your letter it was stated he would be sent another appointment for 6 months but he has not received any further appointments. He appears to be struggling with his mental health and called Wedderburn House and was told he required a new referral. I would therefore be grateful if he could be seen.
Many thanks

Examinations and Investigations

Cigarette smoker: Smoking status on date of event: Smoker. 2016-01-22

Drinks rarely: Drinking status on eventdate: Current drinker. 2016-01-22

Most recent height, weight, BMI and Blood Pressure

Height:	1.77	m	Recorded Date:	None provided
Weight:	116	Kg	Recorded Date:	None provided
BMI:	37	Kg/m^2	Recorded Date:	None provided
Blood Pressure:	119/83	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
Laceration NOS	?? -	?? -	?? face, left, below left eye	?? 12-Feb-2012
Abrasion, face	?? -	?? -	?? frontal, right. Right forehead	?? 12-Feb-2012
Keratitis	?? -	?? -	?? welder flash/UV keratitis	?? 22-Apr-2011
Eye injury	?? -	?? -	?? Welder's Flash/UV Keratitis	?? 22-Apr-2011
Epilepsy	?? -	?? -	?? -	?? 05-Dec-2007
CVD Risk assessment Letter 3	?? -	?? -	?? -	?? 08-Jan-2007
CVD Risk assessment Letter 3	?? -	?? -	?? -	?? 01-Dec-2006
CVD Risk Assessment Letter 2	?? -	?? -	?? -	?? 01-Nov-2006
H/O: fracture	?? -	?? -	?? Stable undisplaced Weber B fracture left lateral malleolus	?? 28-Jun-2006
CVD Risk Assessment Letter 1	?? -	?? -	?? -	?? 29-May-2006
Epilepsy	?? -	?? -	?? START_DATE=08/06/2004	?? 23-Jun-2004
[D]Seizure NOS	?? -	?? -	?? 'Probable generalised tonic seizures'	?? 16-Jun-2004
Epilepsy	?? -	?? -	?? -	?? 12-Jan-2004
Closed #-disloc DIPJ	?? -	?? -	?? Left ring finger	?? 08-Mar-2003
[V]Removal of orthopaed.screws	?? -	?? -	?? and excision of distal end of clavicle	?? 07-Jan-1996
Arthralgia - shoulder	?? -	?? -	?? persistant following reconstruction	?? 09-Nov-1994
H/O: dislocated shoulder	?? -	?? -	?? -	?? 04-Apr-1993
Cls traumtc dislocth shoulder	?? -	?? -	?? -	?? 04-Apr-1993
[X]Overdose - deliberate	?? -	?? -	?? -	?? 14-Dec-1981
Overdose of drug	?? -	?? -	?? -	?? 14-Dec-1981

Past procedures

Description	?? Laterality	?? Modifier	?? Date performed
[SO]Soft tissue	?? -	?? -	?? 04-Jun-2018
Self-referral	?? -	?? -	?? 12-Feb-2012
Self-referral	?? -	?? -	?? 22-Apr-2011
Self-referral to hospital	?? -	?? -	?? 27-Jun-2006
Pt on max tol anticonvuls ther	?? -	?? -	?? 07-Feb-2005
Nail operations	?? -	?? -	?? 11-Dec-2003
Removal FB from eye NEC	?? -	?? -	?? 19-Sep-2003
Other reconstruction joint OS	?? -	?? -	?? 09-Nov-1996
Other reconstruction of joint	?? -	?? -	?? 04-Nov-1994
Referral for further care	?? -	?? -	?? 01-Jan-1900

Current and recent medication

Current repeat medication

Drug name	?? BNF code	?? Formulation	?? Dosage	?? Frequency	?? Course started	?? Duration
Loperamide 2mg capsules	?? 64042020	?? capsule	?? 1 CAPSULE TWICE A DAY	?? -	?? 01-Jun-2018	?? -
Zopiclone 3.75mg tablets	?? 72417020	?? tablet	?? TAKE 1 OR 2 TABLETS A NIGHT F[more]	?? -	?? 24-Nov-2021	?? -
Omeprazole 20mg gastro-resistant capsules	?? 69782020	?? capsule	?? 1 CAPSULE ONCE A DAY	?? -	?? 04-May-2018	?? -
Furosemide 40mg tablets	?? 59420020	?? tablet	?? 1 TABLET MORNING AND 1 AT LIN[more]	?? -	?? 04-May-2018	?? -
Solifenacin 5mg tablets	?? 88205020	?? tablet	?? 1 TABLET ONCE A DAY	?? -	?? 04-May-2018	?? -
Lamotrigine 100mg tablets	?? 66060020	?? tablet	?? 1 TWICE DAILY	?? -	?? 04-May-2018	?? -
Eplim Chrono 500 tablets (Sanofi)	?? 74925020	?? tablet	?? 2 TABS TWICE DAILY	?? -	?? 04-May-2018	?? -
Amisulpride 50mg tablets	?? 85992020	?? tablet	?? 1 TABLET TWICE DAILY	?? -	?? 04-May-2018	?? -
Amisulpride 200mg tablets	?? 85993020	?? tablet	?? 1 TABLET TWICE DAILY	?? -	?? 04-May-2018	?? -
Dihydrocodeine 30mg tablets	?? 62538020	?? tablet	?? 2 THREE TIMES DAILY	?? -	?? 04-May-2018	?? -
Sertraline 100mg tablets	?? 74051020	?? tablet	?? 1 TABLET ONCE A DAY	?? -	?? 04-May-2018	?? -

Recent acute medication (last 30 days)

Drug name	?? BNF code	?? Formulation	?? Dosage	?? Frequency	?? Course started	?? Duration
Gliclazide 40mg tablets	?? 98455020	?? tablet	?? 1 TABLET ONCE A DAY FOR THREE[more]	?? -	?? 30-Nov-2021	?? -
Peptac liquid peppermint (Teva UK Ltd)	?? 97760020	?? ml	?? TAKE 10ML TO 20ML AFTER MEALS[more]	?? -	?? 25-Nov-2021	?? -
Amitriptyline 10mg tablets	?? 58949020	?? tablet	?? TAKE 1-2 TABS AT NIGHT TIME	?? -	?? 25-Nov-2021	?? -
Nitrazepam 5mg tablets	?? 58928020	?? tablet	?? 1 TABLET AT BEDTIME FOR 1 WEE[more]	?? -	?? 24-Nov-2021	?? -

Clinical warnings

Additional relevant information
Administrative information

Referred By:Locum
?

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

]]>

Scanned Document
01-Dec-2021 Dr Deepa Sanu
Additional: Scanned Document
SCI Referral Letter :
Filename: 0008P00S.html
Extension:.tif
Pages:

Hospital use only	Clinic	Day Date	Time	Hospital No.

Transport required?

REFERRAL LETTER
MEDICAL IN CONFIDENCE

Unique Care Pathway Number
101025005985H

REFERRAL TO

NeurologyAH
TAY General Referral v6.2

?—— **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) 01-Dec-2021
Date referral was submitted 01-Dec-2021
Urgency of referral Routine
?

Armed Forces Personnel, Immediate Families & Veterans
- ☐ On active service
- ☐ Condition related to service
- ☐ Immediate family member

Impairment(s)
- ☐ Learning
- ☐ Visual
- ☐ Hearing

Miscellaneous
Interpreter Required:None
Details of "Other" Language:None

PATIENT DETAILS

Surname	BEATTIE
Forename(s)	STUART
Title	MR
Sex	Male
Date of birth	14-Nov-1960
CHI no.	1411600134

Patient's address
40 SERVITE HOUSE
136 ALEXANDER STREET
DUNDEE
DD3 7DE

Contact number(s)
Voice: 07394015180

REGISTERED GP DETAILS

Name	Dr Nectarios Perdios		
GMC code	7495898	GP code	74900
Practice name	Taycourt Surgery		
Practice code	11058		

Practice address
50 SOUTH TAY STREET
DUNDEE

Contact number(s)
Voice: 01382228228

REFERRING PRACTITIONER DETAILS

Name	Dr Deepa Sanu		
GMC code	6037354	GP code	70076
Practice name	Taycourt Surgery		
Practice code	11058		

Practice address
50 SOUTH TAY STREET
DUNDEE

Contact number(s)
Voice: 01382228228

Periods of Future Unavailability None provided.

CLINICAL INFORMATION

History of presenting complaint / examination findings / investigation results

Presenting complaint

Description: uncontrolled epilepsy

Comment: Many thanks for offering an appointment for this 61 year old patient who has recently been diagnosed a diabetic, He advises me that he has had a recent increase in frequency of seizures, about 3 this year . He continues on Lamotrigine and epillum chrono.

Examinations and Investigations

Cigarette smoker: Smoking status on date of event: Smoker. 2016-01-22

Drinks rarely: Drinking status on eventdate: Current drinker. 2016-01-22

Most recent height, weight, BMI and Blood Pressure

Height:	1.77	m	Recorded Date:	None provided
Weight:	116	Kg	Recorded Date:	None provided
BMI:	37	Kg/m^2	Recorded Date:	None provided
Blood Pressure:	119/83	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
Laceration NOS	?? -	?? -	?? face, left, below left eye	?? 12-Feb-2012
Abrasion, face	?? -	?? -	?? frontal, right. Right forehead	?? 12-Feb-2012
Keratitis	?? -	?? -	?? welder flash/UV keratitis	?? 22-Apr-2011
Eye injury	?? -	?? -	?? Welder's Flash/UV Keratitis	?? 22-Apr-2011
Epilepsy	?? -	?? -	?? -	?? 05-Dec-2007
CVD Risk assessment Letter 3	?? -	?? -	?? -	?? 08-Jan-2007
CVD Risk assessment Letter 3	?? -	?? -	?? -	?? 01-Dec-2006
CVD Risk Assessment Letter 2	?? -	?? -	?? -	?? 01-Nov-2006
H/O: fracture	?? -	?? -	?? Stable undisplaced Weber B fracture left lateral malleolus	?? 28-Jun-2006
CVD Risk Assessment Letter 1	?? -	?? -	?? -	?? 29-May-2006
Epilepsy	?? -	?? -	?? START_DATE=08/06/2004	?? 23-Jun-2004
[D]Seizure NOS	?? -	?? -	?? 'Probable generalised tonic seizures'	?? 16-Jun-2004
Epilepsy	?? -	?? -	?? -	?? 12-Jan-2004
Closed #-disloc DIPJ	?? -	?? -	?? Left ring finger	?? 08-Mar-2003
[V]Removal of orthopaed.screws	?? -	?? -	?? and excision of distal end of clavicle	?? 07-Jan-1996
Arthralgia - shoulder	?? -	?? -	?? persistant following reconstruction	?? 09-Nov-1994
H/O: dislocated shoulder	?? -	?? -	?? -	?? 04-Apr-1993
Cls traumtc disloctn shoulder	?? -	?? -	?? -	?? 04-Apr-1993
[X]Overdose - deliberate	?? -	?? -	?? -	?? 14-Dec-1981
Overdose of drug	?? -	?? -	?? -	?? 14-Dec-1981

Past procedures

Description	?? Laterality	?? Modifier	?? Date performed
[SO]Soft tissue	?? -	?? -	?? 04-Jun-2018
Self-referral	?? -	?? -	?? 12-Feb-2012
Self-referral	?? -	?? -	?? 22-Apr-2011
Self-referral to hospital	?? -	?? -	?? 27-Jun-2006
Pt on max tol anticonvuls ther	?? -	?? -	?? 07-Feb-2005
Nail operations	?? -	?? -	?? 11-Dec-2003
Removal FB from eye NEC	?? -	?? -	?? 19-Sep-2003
Other reconstruction joint OS	?? -	?? -	?? 09-Nov-1996
Other reconstruction of joint	?? -	?? -	?? 04-Nov-1994
Referral for further care	?? -	?? -	?? 01-Jan-1900

Current and recent medication

Current repeat medication

Drug name	?? BNF code	?? Formulation	?? Dosage	?? Frequency	?? Course started	?? Duration
Loperamide 2mg capsules	?? 64042020	?? capsule	?? 1 CAPSULE TWICE A DAY	?? -	?? 01-Jun-2018	?? -
Zopiclone 3.75mg tablets	?? 72417020	?? tablet	?? TAKE 1 OR 2 TABLETS A NIGHT F[more]	?? -	?? 24-Nov-2021	?? -
Omeprazole 20mg gastro-resistant capsules	?? 69782020	?? capsule	?? 1 CAPSULE ONCE A DAY	?? -	?? 04-May-2018	?? -
Furosemide 40mg tablets	?? 59420020	?? tablet	?? 1 TABLET MORNING AND 1 AT LIN[more]	?? -	?? 04-May-2018	?? -
Solifenacin 5mg tablets	?? 88205020	?? tablet	?? 1 TABLET ONCE A DAY	?? -	?? 04-May-2018	?? -
Lamotrigine 100mg tablets	?? 66060020	?? tablet	?? 1 TWICE DAILY	?? -	?? 04-May-2018	?? -
Eplim Chrono 500 tablets (Sanofi)	?? 74925020	?? tablet	?? 2 TABS TWICE DAILY	?? -	?? 04-May-2018	?? -
Amisulpride 50mg tablets	?? 85992020	?? tablet	?? 1 TABLET TWICE DAILY	?? -	?? 04-May-2018	?? -
Amisulpride 200mg tablets	?? 85993020	?? tablet	?? 1 TABLET TWICE DAILY	?? -	?? 04-May-2018	?? -
Dihydrocodeine 30mg tablets	?? 62538020	?? tablet	?? 2 THREE TIMES DAILY	?? -	?? 04-May-2018	?? -
Sertraline 100mg tablets	?? 74051020	?? tablet	?? 1 TABLET ONCE A DAY	?? -	?? 04-May-2018	?? -

Recent acute medication (last 30 days)

Drug name	?? BNF code	?? Formulation	?? Dosage	?? Frequency	?? Course started	?? Duration
Gliclazide 40mg tablets	?? 98455020	?? tablet	?? 1 TABLET ONCE A DAY FOR THREE[more]	?? -	?? 30-Nov-2021	?? -
Peptac liquid peppermint (Teva UK Ltd)	?? 97760020	?? ml	?? TAKE 10ML TO 20ML AFTER MEALS[more]	?? -	?? 25-Nov-2021	?? -
Amitriptyline 10mg tablets	?? 58949020	?? tablet	?? TAKE 1-2 TABS AT NIGHT TIME	?? -	?? 25-Nov-2021	?? -
Nitrazepam 5mg tablets	?? 58928020	?? tablet	?? 1 TABLET AT BEDTIME FOR 1 WEE[more]	?? -	?? 24-Nov-2021	?? -

Clinical warnings

Additional relevant information
Administrative information

Referred By:Registered GP
?

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

]]>

Scanned Document
08-Oct-2021 Mr Russell Hale
Additional: Scanned Document
Other Attachment : iGPR Consent Form
Filename: 0008P00R.pdf
Extension:.tif
Pages:

ACCESS TO MEDICAL REPORTS ACT (AMRA) - MEDICAL CONSENT FORM

Plan / Policy / Application reference number	59797816
Name of Life Assured	Mr Stuart Beattie
Date of Birth	14/11/1960

This consent form authorises Scottish Widows to request a medical report from your doctor under The Access to Medical Reports Act 1988, or the Access to Personal files and Medical Reports (Northern Ireland) Order 1991, whichever is appropriate.

You have certain rights under the above Act/Order and have the right to withhold your consent. You can see any report from your doctor before it is sent or during the 6 months after that. You can ask the doctor to amend any part you consider misleading or incorrect and add comments if they don't agree to make the changes. The doctor does not have to show you any part of the report they feel might cause you harm. Without your consent Scottish Widows cannot apply for a medical report.

- You agree that a copy of this consent can be used to obtain medical information from your doctor.
- You agree to Scottish Widows asking any doctor about your physical or mental health to provide medical information so Scottish Widows may assess your application.
- You authorise people whom Scottish Widows ask to provide medical information to do so. You agree that Scottish Widows may gather medical records within six months of the start of the policy or to verify any claim made on the policy.

CUSTOMER DECLARATION

I agree that Scottish Widows may obtain medical information from any doctor I have consulted.

Doctor's name	Not applicable
Surgery address	Tay Court Surgery
	50 South Tay Street, Dundee
Postcode	DD1 1PF
Telephone number	01382 228 228

Do you want to see any medical report on yourself before it is sent to Scottish Widows?

Yes ☐ No ☑

Signature of Life Assured: Mr Stuart Beattie

Date of signature (DD MM YYYY): 1 4 0 9 2 0 2 1

Please email this to our servicing team at **Protect@scottishwidows.co.uk**

Alternatively you can post a copy to us at the following address: Scottish Widows Protect Servicing Team, 15 Dalkeith Road, Edinburgh EH16 5BU

54878 07/17

SCOTTISH WIDOWS

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Audit Trail

Document Details

Title	Scottish Widows Medical Consent Form
File Name	Scottish Widows MCF 2021(1).pdf
Document ID	e9dbeabdd7424a60ad04a610621baf65
Fingerprint	75721d86051a124d63bf9aaf9fa8413d
Status	Completed

Document History

Document Created	Document Created by Melvin Coleman (melvin.coleman@libertaswills.co.uk) Fingerprint: 75721d86051a124d63bf9aaf9fa8413d	Sep 14 2021 11:38AM UTC
Document Sent	Document Sent to Mr Stuart Beattie (beattiestuart1411@gmail.com)	Sep 14 2021 11:38AM UTC
Document Viewed	Document Viewed by Mr Stuart Beattie (beattiestuart1411@gmail.com) IP: 92.26.5.228	Sep 15 2021 10:08AM UTC
Document Viewed	Document Viewed by Mr Stuart Beattie (beattiestuart1411@gmail.com) IP: 92.26.5.228	Sep 15 2021 10:09AM UTC
Document Signed	Document Signed by Mr Stuart Beattie (beattiestuart1411@gmail.com) IP: 92.26.5.228	Sep 15 2021 10:09AM UTC
Document Completed	This document has been completed. Fingerprint: 6aa5ba9d1734e09cb3536313c337a012	Sep 15 2021 10:09AM UTC

Processed by eversign

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08-Oct-2021 Mr Russell Hale
Additional: Scanned Document
Other Attachment : iGPR Consent Form
Filename: 0008P00Q.pdf
Extension: .tif
Pages:

ACCESS TO MEDICAL REPORTS ACT (AMRA) - MEDICAL CONSENT FORM

Plan / Policy / Application reference number	59797816
Name of Life Assured	Mr Stuart Beattie
Date of Birth	14/11/1960

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- You authorise people whom Scottish Widows ask to provide medical information to do so. You agree that Scottish Widows may gather medical records within six months of the start of the policy or to verify any claim made on the policy.

CUSTOMER DECLARATION

I agree that Scottish Widows may obtain medical information from any doctor I have consulted.

Doctor's name	Not applicable
Surgery address	Tay Court Surgery
	50 South Tay Street, Dundee
Postcode	DD1 1PF
Telephone number	01382 228 228

Do you want to see any medical report on yourself before it is sent to Scottish Widows?

Yes ☐ No ☑

Signature of Life Assured: Mr Stuart Beattie

Date of signature (DD MM YYYY): 14 09 2021

Please email this to our servicing team at **Protect@scottishwidows.co.uk**

Alternatively you can post a copy to us at the following address: Scottish Widows Protect Servicing Team, 15 Dalkeith Road, Edinburgh EH16 5BU

54878 07/17

SCOTTISH WIDOWS

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Audit Trail

Document Details

Title	Scottish Widows Medical Consent Form
File Name	Scottish Widows MCF 2021(1).pdf
Document ID	e9dbeabdd7424a60ad04a610621baf65
Fingerprint	75721d86051a124d63bf9aaf9fa8413d
Status	Completed

Document History

Document Created	Document Created by Melvin Coleman (melvin.coleman@libertaswills.co.uk) Fingerprint: 75721d86051a124d63bf9aaf9fa8413d	Sep 14 2021 11:38AM UTC
Document Sent	Document Sent to Mr Stuart Beattie (beattiestuart1411@gmail.com)	Sep 14 2021 11:38AM UTC
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Document Signed	Document Signed by Mr Stuart Beattie (beattiestuart1411@gmail.com) IP: 92.26.5.228	Sep 15 2021 10:09AM UTC
Document Completed	This document has been completed. Fingerprint: 6aa5ba9d1734e09cb3536313c337a012	Sep 15 2021 10:09AM UTC

Processed by eversign

ACCESS TO MEDICAL REPORTS ACT (AMRA) - MEDICAL CONSENT FORM

Plan / Policy / Application reference number

Name of Life Assured

Date of Birth (DD MM YYYY)

This consent form authorises Scottish Widows to request a medical report from your doctor under The Access to Medical Reports Act 1988, or the Access to Personal files and Medical Reports (Northern Ireland) Order 1991, whichever is appropriate.

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CUSTOMER DECLARATION

I agree that Scottish Widows may obtain medical information from any doctor I have consulted.

Doctor's name

Surgery address

Postcode

Telephone number

Do you want to see any medical report on yourself before it is sent to Scottish Widows?

Yes ☐ No ☐

Signature of Life Assured

Date of signature (DD MM YYYY)

Please email this to our servicing team at **Protect@scottishwidows.co.uk**

Alternatively you can post a copy to us at the following address: Scottish Widows Protect Servicing Team, PO Box 24171, 69 Morrison Street, Edinburgh EH3 1HL

54878 07/21

SCOTTISH WIDOWS

Scanned Document
02-Jun-2021 Mr Russell Hale
Additional: Scanned Document
Other Attachment : iGPR Consent Form
Filename: 0008P00O.pdf
Extension:.tif
Pages:

Your patient has given us their consent for you to send us a medical report in line with the details shown below. The time and date that consent was provided is shown at the bottom of this form. A copy of the consent has also been sent to the customer. This consent was obtained via the ticking of an electronic opt in box which is compliant with General Data Protections Regulation (GDPR). Electronic consent is also an acceptable format in line with agreement between the British Medical Association and Association of British Insurers.

Further information can be found on the ICO website (ico.org.uk).

LEGAL & GENERAL - MEDICAL CONSENT FORM

CONSENT FOR LEGAL & GENERAL TO REQUEST A MEDICAL REPORT UNDER THE ACCESS TO MEDICAL REPORTS ACT 1988, THE ACCESS TO PERSONAL FILES AND MEDICAL REPORTS (NORTHERN IRELAND) ORDER 1991, AND THE ISLE OF MAN ACCESS TO HEALTH RECORDS AND REPORTS ACT 1993.

Legal & General Reference No AN10820847

Full Name Stuart Beattie	**GP Name (if known)** For The Attention Of The GP
Current Address Flat 40 136 Alexander Street DUNDEE DD3 7DE	**GP Address** Tay Court Surgery 50 South Tay Street Dundee Angus DD1 1PF
Date of Birth 14 November 1960	**Surgery Name** Tay Court Surgery

We would like to ask you for your consent to request a medical report under the relevant Medical Act mentioned above. This will help us assess your application.

Things you need to know before giving consent

- The medical report that your doctor sends to Legal & General could include details of consultations with any doctor or healthcare professional, but Legal & General will only ask for information about your current or past health that's relevant to your application.
- If you would like to see it *before* it is sent to Legal & General you can. You will have 21 days from when the report is requested by Legal & General, or from the date you notify your doctor you would like to see a copy, to make arrangements with your doctor to see it.
- You can ask your doctor to amend any part of the report you consider misleading or incorrect. If your doctor is unwilling to make the changes you can attach a personal statement to the report before its sent to Legal & General. Once you have seen the report, if you still want it, (and any personal statement), to be passed to Legal & General, you must give your doctor consent to do so. You do not have to, but if you do not your application will not be considered.
- Your doctor may decide not to show you the report or any part of it if he or she feels that it would cause physical or mental harm to you or others, or if it identifies or provides information about others, or which sets out your doctor's future intentions. If this is the case your doctor will let you know.
- Legal & General will not ask your doctor to reveal any information about:
  - Negative tests for HIV, hepatitis B or C.
  - Any sexually transmitted infections, unless there could be long-term effects on your health.
  - Predictive genetic test results, unless there is a favourable test result which shows that you have not inherited a condition your family suffers from.
- You can request to see a copy of the report yourself, any time within 6 months from the date your doctor sends it to us.

YOUR DECLARATION OF CONSENT

I consent to Legal & General, in line with their privacy policy, asking any doctor I have consulted about my physical or mental health to provide a medical report so that they may assess my application. I authorise those asked to provide a medical report when they receive a copy of this consent form. This consent is valid for six months from today's date.

Yes

If Legal & General need to ask for a report from your doctor do you want to see the report before it is sent?

Yes

Name of Applicant	Stuart Beattie
Date and Time Consent Given	21/05/2021 12:28:49

Your patient has given us their consent for you to send us a medical report in line with the details shown below. The time and date that consent was provided is shown at the bottom of this form. A copy of the consent has also been sent to the customer. This consent was obtained via the ticking of an electronic opt in box which is compliant with General Data Protections Regulation (GDPR). Electronic consent is also an acceptable format in line with agreement between the British Medical Association and Association of British Insurers.

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Legal & General Reference No AN10820847

Full Name Stuart Beattie	**GP Name (if known)** For The Attention Of The GP
Current Address Flat 40 136 Alexander Street DUNDEE DD3 7DE	**GP Address** Tay Court Surgery 50 South Tay Street Dundee Angus DD1 1PF
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  - Any sexually transmitted infections, unless there could be long-term effects on your health.
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YOUR DECLARATION OF CONSENT

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Yes

If Legal & General need to ask for a report from your doctor do you want to see the report before it is sent?

Yes

Name of Applicant	Stuart Beattie
Date and Time Consent Given	21/05/2021 12:28:49

Scanned Document
30-Jun-2020 Mr Russell Hale
Additional: Scanned Document
Other Attachment : iGPR Consent Form
Filename: 0008P00J.pdf
Extension:.tif
Pages:

Your patient has given us their consent for you to send us a medical report in line with the details shown below. The time and date that consent was provided is shown at the bottom of this form. A copy of the consent has also been sent to the customer.

LEGAL & GENERAL - MEDICAL CONSENT FORM

CONSENT FOR LEGAL & GENERAL TO REQUEST A MEDICAL REPORT UNDER THE ACCESS TO MEDICAL REPORTS ACT 1988, THE ACCESS TO PERSONAL FILES AND MEDICAL REPORTS (NORTHERN IRELAND) ORDER 1991, AND THE ISLE OF MAN ACCESS TO HEALTH RECORDS AND REPORTS ACT 1993.

Legal & General Reference No AN09688708

Full Name Stuart Beattie	**GP Name (if known)** For The Attention Of The GP
Current Address Flat 40 136 Alexander Street DUNDEE DD3 7DE	**GP Address** Tay Court Surgery 50 South Tay Street Dundee Angus DD1 1PF
Date of Birth 14 November 1960	**Surgery Name** Tay Court Surgery

We would like to ask you for your consent to request a medical report under the relevant Medical Act mentioned above. This will help us assess your application.

Things you need to know before giving consent

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  - Negative tests for HIV, hepatitis B or C.
  - Any sexually transmitted infections, unless there could be long-term effects on your health.
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Yes

If Legal & General need to ask for a report from your doctor do you want to see the report before it is sent?

Yes

Name of Applicant	Stuart Beattie
Date and Time Consent Given	24/06/2020 10:37:35

Scanned Document
06-Nov-2017 Mrs Ann Murray
Additional: Scanned Document
SCI Referral Letter :

Filename: 0008P00I.html
Extension:.tif
Pages:

Hospital use only	Clinic	Day / Date	Time	Hospital No.

Transport required?

REFERRAL LETTER
MEDICAL IN CONFIDENCE

Unique Care Pathway Number
101014831067Q

REFERRAL TO

Dundee Community Mental Health West TeamG1TW
TAY General Referral

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

Wedderburn House
1 Edward Street
Dundee
DD1 5NS

? **Hospital** and **hospital address**

Hospital unit no.: T333C

Email address: -

Date of Referral (set by referrer) 06-Nov-2017
Date referral was submitted 06-Nov-2017
Urgency of referral **Urgent**
?

Armed Forces Personnel, Immediate Families & Veterans
☐ On active service
☐ Condition related to service
☐ Immediate family member

Impairment(s)
☐ Learning
☐ Visual
☐ Hearing

Miscellaneous
Interpreter Required: No
Details of "Other" Language: None

PATIENT DETAILS

Surname	BEATTIE
Forename(s)	STUART
Title	MR
Sex	Male
Date of birth	14-Nov-1960
CHI no.	1411600134

Patient's address
36 WHITFIELD AVENUE
WHITFIELD
DUNDEE
DD4 0BD

Contact number(s)
Voice: 07526836962

REGISTERED GP DETAILS

Name	Dr Kate Macdonald		
GMC code	4641726	GP code	70491
Practice name	Taycourt Surgery		
Practice code	11058		

Practice address
50 SOUTH TAY STREET
DUNDEE

Contact number(s)
Voice: 01382228228

REFERRING PRACTITIONER DETAILS

Name	Dr Christine Cormack		
GMC code	4310093	GP code	70343
Practice name	Taycourt Surgery		
Practice code	11058		

Practice address
50 SOUTH TAY STREET
DUNDEE

Contact number(s)
Voice: 01382228228

Periods of Future Unavailability None provided.

CLINICAL INFORMATION

History of presenting complaint / examination findings / investigation results

Presenting complaint

Description: Depression

Comment: I would be grateful for your urgent assessment of this socially isolated man with depression. He has a long standing history of epilepsy and when he was at neurology last week they identified his depression . He describes low mood,poor sleep, poor concentration and lack of enjoyment. He lives alone in a house where drug dealers live next door- he is aware of drug dealing going on around him. Because of this he cannot leave his flat for fear of being burgled but he also describes paranoid thoughts with visual and auditory hallucinations
He regularly thinks about suicide and I have given him the phone number for Samaritans and nhs 24. I do not feel he is at risk of this today but he is high risk for this
Unfortunately all SSRIs come up as interacting with his epilepsy medication by lowering seizure threshold so I have not started him on anything
I feel he needs urgent mental health review within the next few days
Many thanks

Examinations and Investigations

Cigarette smoker: Smoking status on date of event: Smoker. 2016-01-22

Drinks rarely: Drinking status on eventdate: Current drinker. 2016-01-22

Most recent height, weight, BMI and Blood Pressure

Height:	1.77	m	Recorded Date:	None provided
Weight:	116	Kg	Recorded Date:	None provided
BMI:	37	Kg/m^2	Recorded Date:	None provided
Blood Pressure:	119/83	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
Laceration NOS	?? -	?? -	?? face, left, below left eye	?? 12-Feb-2012
Abrasion, face	?? -	?? -	?? frontal, right. Right forehead	?? 12-Feb-2012
Keratitis	?? -	?? -	?? welder flash/UV keratitis	?? 22-Apr-2011
Eye injury	?? -	?? -	?? Welder's Flash/UV Keratitis	?? 22-Apr-2011
Epilepsy	?? -	?? -	?? -	?? 05-Dec-2007
CVD Risk assessment Letter 3	?? -	?? -	?? -	?? 08-Jan-2007
CVD Risk assessment Letter 3	?? -	?? -	?? -	?? 01-Dec-2006
CVD Risk Assessment Letter 2	?? -	?? -	?? -	?? 01-Nov-2006
H/O: fracture	?? -	?? -	?? Stable undisplaced Weber B fracture left lateral malleolus	?? 28-Jun-2006
CVD Risk Assessment Letter 1	?? -	?? -	?? -	?? 29-May-2006
Epilepsy	?? -	?? -	?? START_DATE=08/06/2004	?? 23-Jun-2004
[D]Seizure NOS	?? -	?? -	?? 'Probable generalised tonic seizures'	?? 16-Jun-2004
Epilepsy	?? -	?? -	?? -	?? 12-Jan-2004
[V]Removal of orthopaed.screws	?? -	?? -	?? and excision of distal end of clavicle	?? 07-Jan-1996
Arthralgia - shoulder	?? -	?? -	?? persistant following reconstruction	?? 09-Nov-1994
H/O: dislocated shoulder	?? -	?? -	?? -	?? 04-Apr-1993
Cls traumtc disloctn shoulder	?? -	?? -	?? -	?? 04-Apr-1993
[X]Overdose - deliberate	?? -	?? -	?? -	?? 14-Dec-1981
Overdose of drug	?? -	?? -	?? -	?? 14-Dec-1981

Past procedures

Description	?? Laterality	?? Modifier	?? Date performed
Self-referral	?? -	?? -	?? 12-Feb-2012
Self-referral	?? -	?? -	?? 22-Apr-2011
Self-referral to hospital	?? -	?? -	?? 27-Jun-2006
Pt on max tol anticonvuls ther	?? -	?? -	?? 07-Feb-2005
Nail operations	?? -	?? -	?? 11-Dec-2003
Removal FB from eye NEC	?? -	?? -	?? 19-Sep-2003
Other reconstruction joint OS	?? -	?? -	?? 09-Nov-1996
Other reconstruction of joint	?? -	?? -	?? 04-Nov-1994
Referral for further care	?? -	?? -	?? 01-Jan-1900

Current and recent medication

Current repeat medication

Drug name	?? BNF code	?? Formulation	?? Dosage	?? Frequency	?? Course started	?? Duration
Solifenacin 5mg tablets	?? 88205020	?? tablet	?? 1 TABLET ONCE A DAY	?? -	?? 29-Jan-2016	?? -
Lamotrigine 100mg tablets	?? 66060020	?? tablet	?? 1 TABLET TWICE DAILY	?? -	?? 28-Sep-2016	?? -
Omeprazole 20mg gastro-resistant capsules	?? 69782020	?? capsule	?? 1 CAPSULE ONCE A DAY	?? -	?? 24-Apr-2015	?? -
Epilim Chrono 500 tablets (Sanofi)	?? 74925020	?? tablet	?? TAKE TWO TWICE A DAY	?? -	?? 04-Jul-2011	?? -
Nitrazepam 5mg tablets	?? 58928020	?? tablet	?? 1 TABLET AT BEDTIME	?? -	?? 15-Apr-2013	?? -
Dihydrocodeine 30mg tablets	?? 62538020	?? tablet	?? TAKE 1 OR 2 3 TIMES/DAY	?? -	?? 25-Jan-2008	?? -
Loperamide 2mg tablets	?? 64043020	?? tablet	?? 1 TABLET TWICE A DAY	?? -	?? 22-Feb-2017	?? -

Recent acute medication (last 30 days)

No recent acute medications recorded

Clinical warnings

Additional relevant information
Administrative information

Referred By:Resident GP
?

]]>

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

Scanned Document
22-Sept-2017 Mrs Marianne Leighton
Additional: Scanned Document
SCI Referral Letter :
Filename: 0008P00H.html
Extension:.tif
Pages:

Hospital use only	Clinic	Day Date	Time	Hospital No.

Transport required?

REFERRAL LETTER
MEDICAL IN CONFIDENCE

Unique Care Pathway Number
101014537855C

REFERRAL TO

DermatologyA7
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) 22-Sep-2017
Date referral was submitted 22-Sep-2017
Urgency of referral **Urgent - suspected cancer**
?
as above

Armed Forces Personnel, Immediate Families & Veterans
- ☐ On active service
- ☐ Condition related to service
- ☐ Immediate family member

Impairment(s)
- ☐ Learning
- ☐ Visual
- ☐ Hearing

Miscellaneous
Interpreter Required: No
Details of "Other" Language: None

PATIENT DETAILS

Surname	BEATTIE
Forename(s)	STUART
Title	MR
Sex	Male
Date of birth	14-Nov-1960
CHI no.	1411600134

Patient's address
36 WHITFIELD AVENUE
WHITFIELD
DUNDEE
DD4 0BD

Contact number(s)
Voice: 07526836962

REGISTERED GP DETAILS

Name	Dr Kate Macdonald		
GMC code	4641726	GP code	70491
Practice name	Taycourt Surgery		
Practice code	11058		

Practice address
50 SOUTH TAY STREET
DUNDEE

Contact number(s)
Voice: 01382228228

REFERRING PRACTITIONER DETAILS

Name	Dr Catriona Cross		
GMC code	6134540	GP code	70343
Practice name	Taycourt Surgery		
Practice code	11058		

Practice address
50 SOUTH TAY STREET
DUNDEE

Contact number(s)
Voice: 01382228228

Periods of Future Unavailability None provided.

CLINICAL INFORMATION

History of presenting complaint / examination findings / investigation results

Presenting complaint

Description: ? Malignant melanoma

Comment: I would be grateful if you could see this 56 year old gentleman who presents with a new mole on his left lower leg. It has been present for about 4 months but in the last month has been getting bigger and more raised. A "scab" keeps coming off it but then, thereafter, it becomes more raised again. He tells me that both his mum and dad died of skin cancer ?melanoma. He, himself, has no past history of skin cancer but is quite fair skinned and admits to never wearing sun cream. On examination there is a 4x4mm raised brown lesion on the left lower shin the bottom of which looks slightly darker in colour. It is slightly tender to touch. I have taken a picture of the lesion for your further information and would be most grateful for your further assessment. Many thanks.

Examinations and Investigations

Cigarette smoker: Smoking status on date of event: Smoker. 2016-01-22

Drinks rarely: Drinking status on eventdate: Current drinker. 2016-01-22

Most recent height, weight, BMI and Blood Pressure

Height:	1.77	m	Recorded Date:	None provided
Weight:	116	Kg	Recorded Date:	None provided
BMI:	37	Kg/m^2	Recorded Date:	None provided
Blood Pressure:	119/83	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
Laceration NOS	?? -	?? -	?? face, left, below left eye	?? 12-Feb-2012
Abrasion, face	?? -	?? -	?? frontal, right. Right forehead	?? 12-Feb-2012
Keratitis	?? -	?? -	?? welder flash/UV keratitis	?? 22-Apr-2011
Eye injury	?? -	?? -	?? Welder's Flash/UV Keratitis	?? 22-Apr-2011
Epilepsy	?? -	?? -	?? -	?? 05-Dec-2007
CVD Risk assessment Letter 3	?? -	?? -	?? -	?? 08-Jan-2007
CVD Risk assessment Letter 3	?? -	?? -	?? -	?? 01-Dec-2006
CVD Risk Assessment Letter 2	?? -	?? -	?? -	?? 01-Nov-2006
H/O: fracture	?? -	?? -	?? Stable undisplaced Weber B fracture left lateral malleolus	?? 28-Jun-2006
CVD Risk Assessment Letter 1	?? -	?? -	?? -	?? 29-May-2006
Epilepsy	?? -	?? -	?? START_DATE=08/06/2004	?? 23-Jun-2004
[D]Seizure NOS	?? -	?? -	?? 'Probable generalised tonic seizures'	?? 16-Jun-2004
Epilepsy	?? -	?? -	?? -	?? 12-Jan-2004
[V]Removal of orthopaed. screws	?? -	?? -	?? and excision of distal end of clavicle	?? 07-Jan-1996
Arthralgia - shoulder	?? -	?? -	?? persistant following reconstruction	?? 09-Nov-1994
H/O: dislocated shoulder	?? -	?? -	?? -	?? 04-Apr-1993
Cls traumtc disloctn shoulder	?? -	?? -	?? -	?? 04-Apr-1993
[X]Overdose - deliberate	?? -	?? -	?? -	?? 14-Dec-1981
Overdose of drug	?? -	?? -	?? -	?? 14-Dec-1981

Past procedures

Description	?? Laterality	?? Modifier	?? Date performed
Self-referral	?? -	?? -	?? 12-Feb-2012
Self-referral	?? -	?? -	?? 22-Apr-2011
Self-referral to hospital	?? -	?? -	?? 27-Jun-2006
Pt on max tol anticonvuls ther	?? -	?? -	?? 07-Feb-2005
Nail operations	?? -	?? -	?? 11-Dec-2003
Removal FB from eye NEC	?? -	?? -	?? 19-Sep-2003
Other reconstruction joint OS	?? -	?? -	?? 09-Nov-1996
Other reconstruction of joint	?? -	?? -	?? 04-Nov-1994
Referral for further care	?? -	?? -	?? 01-Jan-1900

Current and recent medication

Current repeat medication

Drug name	?? BNF code	?? Formulation	?? Dosage	?? Frequency	?? Course started	?? Duration
Lamotrigine 100mg tablets	?? 66060020	?? tablet	?? 1 TABLET TWICE DAILY	?? -	?? 28-Sep-2016	?? -
Omeprazole 20mg gastro-resistant capsules	?? 69782020	?? capsule	?? 1 CAPSULE ONCE A DAY	?? -	?? 24-Apr-2015	?? -
Epilim Chrono 500 tablets (Sanofi)	?? 74925020	?? tablet	?? TAKE TWO TWICE A DAY	?? -	?? 04-Jul-2011	?? -
Nitrazepam 5mg tablets	?? 58928020	?? tablet	?? 1 TABLET AT BEDTIME	?? -	?? 15-Apr-2013	?? -
Solifenacin 5mg tablets	?? 88205020	?? tablet	?? 1 TABLET ONCE A DAY	?? -	?? 29-Jan-2016	?? -
Dihydrocodeine 30mg tablets	?? 62538020	?? tablet	?? TAKE 1 OR 2 3 TIMES/DAY	?? -	?? 25-Jan-2008	?? -
Loperamide 2mg tablets	?? 64043020	?? tablet	?? 1 TABLET TWICE A DAY	?? -	?? 22-Feb-2017	?? -

Recent acute medication (last 30 days)

Drug name	?? BNF code	?? Formulation	?? Dosage	?? Frequency	?? Course started	?? Duration
Lamotrigine 100mg tablets	?? 66060020	?? tablet	?? 1 TABLET TWICE DAILY	?? -	?? 28-Sep-2016	?? -

Clinical warnings

Additional relevant information
Administrative information

Referred By:Resident GP
?

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