

Clyde SAR Team
Level E
Inverclyde Royal Hospital
Larkfield Road
Greenock
PA16 0XN

PRIVATE

MMA Legal Limited
43-59 Princess Street
Stockport
SK1 1RY

Date: 13.05.2026

Your Ref: 100021

Our Ref: LAT/JM/AK/0712673318

Enquiries to: Aileen Kane

Direct Line: 01475 504761

E-mail: aileen.kane2@nhs.scot

Dear Sir/Madam

Subject Access Request under the General Data Protection Regulation

Patient: ENZO SERAPIGLIA

DOB: 07.12.1967

Thank you for your request received on 22ND April 2026 in which you seek a copy of your client's personal information.

Your request has been dealt in line with our requirements under Article 15 of the General Data Protection Regulation and I now attach the following: -

ROYAL ALEXANDRA + INVERCLYDE ROYAL HOSPITAL MEDICAL RECORDS

Please be aware that these health records have been reviewed by a clinician and any information identifying or provided by a third party has been removed.

We process personal information to enable us to provide healthcare services for patients; support and manage our employees; to carry out research and clinical trials; maintain our accounts and records and to carry out data matching under the national fraud initiative. We also use CCTV systems for crime prevention.

This personal information can be both clinical and non-clinical in nature, and can include: -

- patient health records, photographs or Radiology images.
- video/telephone recordings, including CCTV images.
- Witness Statements.

- Incident reports
- Complaints files
- Emails

The source of our data includes patients, General Practitioners, healthcare, social and welfare organisations, legal representatives and police forces.

We sometimes need to share the personal information we process with the individual themselves and with other organizations as listed above. Where this is necessary, we are required to comply with all aspects of the General Data Protection Regulation.

Where these organisations are based outside Europe, we take all appropriate safeguards to protect your information.

Health records are kept for a limited time and this is noted below for your information:

- Adult general hospital records – six years after the date of the last entry.
- Maternity records – 25 years after the birth of the last child.
- Children's and young people's records – until the child or young person's 25th birthday.
- Mental health records – 20 years after the date of the last contact.

If you have any queries, please do not hesitate to contact me.

If you are unhappy with how your request has been dealt with, please contact the NHSGGC Data Protection officer. Their contact details are noted below:

Data Protection officer
Information Governance Department
NHS GG&C – 2nd Floor
1 Smithhills Street
Paisley
PA1 1EB
Email: data.protection@ggc.scot.nhs.uk

Yours sincerely



Legal Aspects Team

ELECTRONIC PATIENT RECORDS

ALL HOSPITAL RECORDS HELD NHSGGC

☐

ACS

☐

BEATSON HOSPITAL

☐

CANNIESBURN HOSPITAL

☐

DENTAL HOSPITAL

☐

GARTNAVEL GENERAL HOSPITAL

☐

GLASGOW ROYAL INFIRMARY

☐

INVERCLYDE ROYAL HOSPITAL

☐

MATERNITY

☐

NEW VICTORIA ACH

☐

PRINCESS ROYAL MATERNITY

☐

QUEEN ELIZABETH UNIVERSITY HOSPITAL

☐

MATERNITY

☐

ROYAL ALEXANDRA HOSPITAL

☒

MATERNITY

☐

ROYAL HOSPITAL FOR CHILDREN

☐

STOBHILL HOSPITAL

☐

VALE OF LEVEN

☐

MATERNITY

☐

WEST CARE AMBULATORY HOSPITAL

☐

WESTERN INFIRMARY RECORDS

☐

Including:

BADGERNET

☐

CAREVUE

☐

MEDICAL ILLUSTRATION

☐

METAVISION

☐

PHYSIOTHERAPY

☐

RADIOLOGY

☐

WEST MARC

☐

LABS

☐

Affix Label



CHI: 0712673318

Royal Alexandra Hospital

Total Att: 2

12 Mth Att: 0

Title: MR

SERAPIGLIA

Enzo Paul

DOB 07/12/1967

Age: 55y

Sex: Male

70 JOHN NEILSON AVENUE

Next of kin: PUDDINU, Silvana

Relationship: Sister

07711586394

Paisley
Renfrewshire

PA1 2SX

GP: MJ McGovern

07562088722

0141 889 4373

Attendance Date: 20/05/2023

Arrival Time: 12:21

Registration Time: 12:21

Date of Incident: 20/05/2023

Major Incident Desc:

Reason for Attendance: dog bite on leg/arm

Affix Label

Nursing Assessment

Alerts: Not Recorded

Allergies: Not Recorded

Pain Score:

Triage Category: 0

Tetanus up to date/fully immunised:

Presenting Complaint:

Observation Date: 20/05/2023 12:24

Nurse name: Nurse Irene Brown2

Temp		C
HR		bpm
BP	/	mmHg
MAP		mmHg
RR		bpm
SpO2		%
Oxygen		%

BM		mmol/L
PF		1/min
Expected PF		1/min
Weight		kg
Height		cm
Visual Acuity		
Left		
Right		
Corrected?		

GCS	
Eyes	
Motor	
Verbal	
Total	

Pupils-Right		Pupils-Left	
Size (mm)		Size (mm)	
Reaction		Reaction	

Nursing Notes:

Child Assessment Questionnaire

	YES	NO
Previous attendance (consider any relevant trauma from previous presentations)		
History variable between accounts		
Examination not compatible with history/presentation		
Delay in presentation		
Fracture/head injury or significant bruising in baby or non-mobile toddler		

Discuss with Senior Medical Staff / Nurse on duty any factors identified

X-Ray and Other Reports to be filed on this side (if the patient is not being admitted)

**DO NOT WRITE
HERE PLEASE**

EVAXIS®



V36351V

ONCE ONLY PRESCRIPTIONS (including Tetanus Prophylaxis)

Date Given	DRUG (BLOCK CAPITALS)	Dose	Method of Administration	Time of Administration	Signature	Given By
20/5/23	REVAXIS	X1	ORAL	13:40	DC	DC

Date	20/5/23 CLINICAL NOTES	
	Seen by (Dr) D CAMPBELL	Time seen 12.50
PC	55 year old male dog bite	
HPC	Dog latched on to (L) inner calf and (R) forearm. Not normal for his dog. Thinks he caught his hair when brushing. First aid to wounds. PMH: Depression, Herpes, Heartburn MEDS: Sertraline, Naproxen, omeprazole ALLERGIES: Penicillin OBS: Temp 36.1 HR 68 SpO2 96% 149/92 Resp 18	
	Social on sickleave at present due to mental health. 100% (R) forearm. (L) thigh. Bruising Two small teeth marks 1cm each area. Broken skin. can see wound ending in both. Bruising noted. No sign of infection. No bleeding, NO FB. Full ROM. No heat. NVI (N) sensation. (L) inner thigh. Area approx 2cm small area of skin loss. Unable to close. No FB, No bleeding. Small amount of bruising. see wound ending. No heat. NVI (N) sensation. (R) forearm. Bruising. Bite approx 1cm.	

Date	20/5/23	CLINICAL NOTES
FEEL	mild tenderness around area	
MOVE	FULL ROM	
TX	superficial dog bites	
PLAN	clean wounds. dry dressing applied. iodine then dry dressing to secure. oral doxycycline given ✓ 5/7. Revaxis ✓ Not sewing advice given. wound care advice o/c home.	
D. Campbell (MD)		

Discharge Codes (Please CIRCLE)								Discharge date	
1. Admission	2. Discharge	3. Refer to GP	4. Transfer to other (see below)					Discharge time	
5. Died	6. Refer to OP Clinic (see below)		7. Irregular Discharge		8. D.O.A.				
Ward number (if admitted):			Transfer to hospital:				Consultant (if admitted):		
Follow up	Arranged			Not arranged			To be arranged		
Clinic referred to	A&E	Hand injury	Fracture	Pop Check	Medical	Surgical	ENT	Others (specify):	
Discharge Prescription Packs									
Date Given	DRUG (BLOCK CAPITALS)	Dose	Method of Administration	Frequency	Signature	Given By			
20/5/23	DOXYCYCLINE	100mg	o/r 1	BD	DC	DC (MD)			

CLINICAL NOTES - MEDICAL
NURSINGPlease tick ☒ appropriate directorate

0712673318

SERAPIGLIA

Enzo

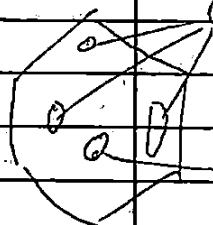
73 METHUEN ROAD

Paisley, Renfrewshire

07/12/1967

PA3 4JU

Date & Time		Signature, Print Name & Designation
27/10/16	Miss Gray Thursday PM Clinic.	
16 ⁰⁰	(40) → Referred: 3 umbilical hernia	
	PMH: - Previous (R) inguinal hernia repair.	
	- Depression.	
	PS: multiple hernias.	
	HPC: First notice (L) sided abdo hernia 2 years	
	ago at gym → then shortly after	
	(R) sided abdo.	
	- late 6/12 noticed umbilical hernia.	
	- (L) abdo. hernia → causing more pain	
	when protrude, as well as (R) abdo.	
	- umbilical hernia is not too bad in terms of pain.	
	- nauseous at times, abdo bloating	
	- no change in bowel habit /	
	MR bleeding / weight loss / ↓ appetite.	
	- 'lump' more prominent when	
	bending forward, lifting, etc.	
	Drugs: Paracetamol	
	FHX: Father: pancreatic cancer.	
	SHX: ice-cream seller	
	• Smokes 20/day	
	• Denies alcohol intake	
	• Lives alone.	
	O/E: • umbilical hernia seen	
	• Abdo soft, non tender	
	• Positive cough impulse	
	on (L) + (R) + epigastric area.	
	abdomen.	



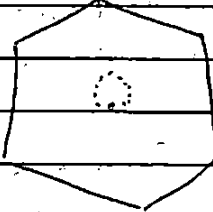
Free cough impulse

umbilical
hernia

→ continue

[illegible]

CLINICAL NOTES - MEDICAL
NURSING
☐
☐
0712673318
SERAPIGLIA
EnzoM
07/12/1967Please tick ☒ appropriate directorate

Date & Time		Signature, Print Name & Designation
15/8/19	A. Breakey CST 1.	
	PC: Periumbilical repair.	
	HPC: Has had the periumbilical hernia for several years.	
	Was seen by Miss Gray in 2017 & listed for repair but personal circumstances meant he could not attend.	
	Has been a victim of child abuse & this continues to cause him a lot of stress & distress.	
	Gets dyspepsia & vomiting when he thinks about the abuse.	
	- Relieved by rest & antacids.	
	PMHx: Depression.	
	DHx: Sertraline; Propanolol; Omeprazole.	
	D/E:  Periumbilical hernia ~ 8cm. Tender. Reducible.	
	Plan: Add to list for periumbilical hernia repair.	ABG

[illegible]

CLINICAL NOTES - MEDICAL NURSING

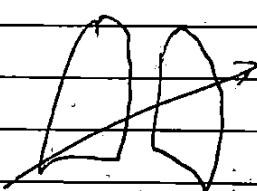
2

Please tick ☒ appropriate directorate



0712673318 M
Enzo, P 07/12/1967
17 Park Moor
Erskine, Renfrewshire

PA8 7HL

Date & Time	Pre - Assessment	Signature, Print Name & Designation
29/10	Procedure: Umbilical hernia repair Consultant:	
	<u>PMHx</u> - Major depressive disorder - OCD - Acid reflux	<u>Surgical Hx</u> - inguinal hernia repair - No reaction to GA
	<u>SE</u> - nil	<u>Drx</u> - Sertraline - Propanolol - Omeprazole
	<u>Social Hx</u> - Smokes 20/day for 35y - Rarely alcohol	
	<u>O/E</u>  HS 1+ 11 + 0	
		<i>[Signature]</i> FN

NHS GG&C Adult Risk Assessment for Venous Thromboembolism (VTE)

[excluding orthopaedics, obstetrics & ENT who have specialty-specific policies]

NHS
Greater Glasgow
and Clyde

- Risk Assessment must be completed for all patients within 24 hours of admission to hospital
- Patients must be reassessed every 48-72 hours or sooner if condition changes
- Reassessment must be documented in Kardex
- Please complete risk assessment and then sign and date Risk Assessment Result box at bottom of page.

0712673318	
SERAPIGLIA	M
Enzo, P	07/12/1967
17 Park Moor	
Erskine, Renfrewshire	
PA8 7HL	

Operative patients

Non-operative patients

Is the patient bed-bound or expected to have reduced mobility relative to normal state for ≥ 2 days?

Yes ☒

No ☐

Does the patient have any risk factors for thrombosis? (tick ☒ all that apply)	
Age >60 ☐	Use of oestrogen-containing contraceptive therapy ☐
Active cancer or cancer treatment ☐	Use of hormone replacement therapy or tamoxifen ☐
Dehydration ☐	Pregnancy or <6 weeks post partum ☐
Known thrombophilias ☐	Critical care admission eg HDU/ITU ☐
Obesity (BMI >30) ☐	Surgical procedure with total anaesthetic/surgical time >90 min, or >60 min if surgery on lower limb or pelvis ☒
Current significant medical condition e.g. Serious infection, Heart failure, Respiratory disease or Inflammatory disease ☐	Acute surgical admission with inflammatory or intra-abdominal condition including Pelvic Inflammatory Disease ☐
Personal history or first degree relative with a history of VTE ☐	Hip fracture ☐
Varicose veins with phlebitis ☐	All gynaecological surgery except uncomplicated gynaecological diagnostic day case procedures ☐

- No thromboprophylaxis required.
- Continue to reassess every 48-72 hours or sooner if condition changes.
- Document all reassessments in drug kardex.
- Complete Risk Assessment Result Box.

Yes, 1 or more risk factors identified ☐

No risk factors identified ☐

Indicators of high risk bleeding (tick ☒ all that apply)	
Active bleeding ☐	Lumbar puncture, epidural/spinal anaesthesia
Acquired bleeding disorders (e.g. liver failure) ☐	• Expected within the next 12 hours
Concurrent use of other anticoagulants (e.g. warfarin, rivaroxaban, apixaban, edoxaban) is a contra-indication to additional pharmacological thromboprophylaxis ☐	• Within the previous 4 hours ☐
Acute stroke (within 14 days) ☐	Other procedure with high bleeding risk – discuss with senior if unsure ☐
Persistent uncontrolled hypertension (BP $>230/120$ mmHg) ☐	Acute bacterial endocarditis ☐
Thrombocytopenia ($<75 \times 10^9/l$) ☐	Surgery expected within the next 12 hours ☐
Untreated inherited bleeding disorders (e.g. haemophilia or von Willebrands) ☐	Trauma with high bleeding risk e.g. Head Injury ☐
High risk of peri- or post-procedural bleeding, e.g. neurosurgery, spinal, posterior eye surgery and thyroid surgery ☐	eGFR <30 ml/minute/1.73m ² : Dose reduction required ☐
	Heparin induced Thrombocytopenia ☐

- Discuss with senior clinical staff before deciding to prescribe pharmacological prophylaxis
- Consider mechanical prophylaxis e.g. AES unless contra-indicated.
- Reassess patient every 48-72 hours or sooner if condition changes.

No contraindications to pharmacological prophylaxis identified ☐

Contraindications to pharmacological prophylaxis identified ☐

Operative patients – Enoxaparin 40mg + AES ☒
 *prior to application of AES, please check contraindications to AES
Non-operative patients – Enoxaparin 40mg ☐
 Prescribe Enoxaparin at 6pm
 [on day of surgery, at the later of either 4h post-op or 6pm]
 Reduce Enoxaparin to 20mg if <50 kg or eGFR <30 ml/minute/1.73m² ☐
 If weight >120 kg, consider Enoxaparin 40mg bd (see StaffNet Guideline).
 Discontinue at discharge or when returned to pre-morbid mobility

Contraindications to anti-embolism stockings (AES) Y ☐ N ☐
 Peripheral neuropathy ☐
 Peripheral arterial disease ☐
 Cellulitis or Gross oedema ☐
 Leg deformity or Fragile skin ☐
 Leg / foot ulcers ☐
 Allergy ☐
 Unusual leg size/shape ☐

Risk assessment result – please tick ☒ all that apply

VTE risk factors: YES ☐ NO ☐ Indicators of high risk bleeding: YES ☐ NO ☐ Prescribed: LMWH ☐ AES ☐ NONE ☐

Patient informed of VTE risks and benefits of thromboprophylaxis YES ☐ NO ☐ N/A ☐ Information leaflet provided YES ☐ NO ☐

Print Assessor's Name: Alex Innes

Signature: [Signature]

Date: 04/10/14

SERAPIGLIA, Enzo P

BORN 07-Dec-1967 (58y) GENDER Male
CHI 0712673318

Pre Op Assessment Form

Last updated by Jane YOUNG (Jane Young1) 7 years ago (v. 4) Show History

Consent Withheld No

The information in this form **can** be shared with all health and care providers

Sensitivity

Sensitive

The information in this form **will** be viewable by health and care providers across all specialties

Emergency Contact Details

Name CAROLE SMYTH
Address 56 DALRY ROAD
SALTCOATS
Landline —
Mobile 07713165195
Relationship Partner

Assessment

Assessment Nurse JANE BROWN Grade CHARGE NURSE
Consultant FROHLICH Assessment Date 29-Oct-2019

Hospital Royal Alexandra Hospital
Specialty General Surgery

Is the patient over 65years? No

Admission

Procedure UMBILICAL HERNIA REPAIR

Availability

Are you available at short notice? No

Period of unavailability

Unavailable from —

To —

Reasons for unavailability Social

Further details PATIENT CURRENTLY GOING THROUGH AN ENQUIRY DUE TO CHILDHOOD EXPERIENCES AT BOARDING SCHOOL

Admission Date —

Admission Time —

HOSPITAL SERAPIGLIA, Enzo P

BORN 07 Dec 1967 (58y) GENDER Male
Patient Information
Leaflet 0712673318[Information Please click here for the POA Guidelines](#)**Anaesthetic**

Previous GA	Yes	Previous GA Details	DIFFICULTIES WAKING PATIENT UP
Dentition Risk	No		
Reduced Neck Movement	No		
Family History	No		
Other Risk	No		
Heartburn	Yes	Heartburn Details	STRESS RELATED HEARTBURN
Sickle Cell Disease	No	Are there risk factors for sickle cell disease?	—

[Information Please click here for the POA Guidelines](#)**Surgical**

Affects Suitability For DSU Or SDA	No	Please Specify	—
Any Serious Surgical Or Anaesthetic Complication	No		

[Information Please click here for the POA Guidelines](#)**Cardiovascular**

Hypertension	No
Arrhythmias	No
Palpitations / Blackouts	No

Angina

Angina	No
--------	----

Heart Attack?	No
Murmur	No
Heart Failure	No

Information Please click here for the POA Guidelines

SERAPIGLIA, Enzo P

BORN 07-Dec-1967 (58y) GENDER Male
Respiratory

Do you have Asthma? No

Do you have COPD/Emphysema? No

URTI No

Information Please click here for the POA Guidelines

Neurological

Stroke No

Epilepsy No

Neurological Disease No

Physical Disability No

Haematological

Bleeding Disorder No

Previous DVT No

Anaemia No

Blood Products - If you ever need a blood transfusion or other blood products, would you refuse to receive them? No

Information Please click here for the POA Guidelines

Others

Kidney Disease No

Liver Disease /Jaundice Yes

Liver Disease/Jaundice Details JAUNDICE WHEN HE WAS 17 ? HEPITITIS

Diabetes No

Rheumatoid Arthritis No

Has The Patient Ever Been Notified That They Are At Risk Of CJD or vCJD For Public Health Purposes No

Any Serious Illness Not Already Mentioned? No

Information Please click here for the POA Guidelines

SERAPIGLIA, Enzo P

BORN 07-Dec-1967 (58y) GENDER Male

Exercise Tolerance

Level of fitness

Climb stairs
without stopping

Additional information

—

Information Please click here for the POA Guidelines

Social

Alcohol

Alcohol > 30U No

Units / Wk —

Duration —

Smoking

Smokes Yes

Cigs/Day 20 - 30

Ex Smoker —

Drugs

IV or Recreational Drug Abuser No

Ex User No

Methadone Req No

Self-Admin No

Pregnancy

Pregnant —

Information Please click here for the POA Guidelines

Drug History: Full Generic Name & Dose

SETRILINE 200MG NOCTE

OMEPRAZOLE 20MG

IBUPROFEN GEL

PROPRANOLOL 40MG

Allergies

Allergies Yes

Drug Yes

Non Drug —

Drug Allergy

Description	Category	Duration	Reactions	Notes
SERAPIGLIA, Enzo P CONTRAST DYE FOR CT CHI 0712673318	Male	—	Nausea Vomiting	—

Information Please click here for the POA Guidelines

Prosthesis/Implants

Pacemaker No

Prosthesis/Others No

Information Please click here for the POA Guidelines

Examination

Weight not taken No

BMI

Date Taken 29-Oct-2019
Height 1.69 m Actual
Weight 97.7 kg Actual
BMI 34.21 Calculated
Comments RANITIDINE GIVEN FOR PRE-OP

Ranitidine 150MG X 2 tabs Dispensed As Per
PGD 2018/1621

No

Vital Signs

Pulse 69 bpm
Temperature —
Systolic BP 154 mmHg
Diastolic BP 103 mmHg
Resp rate 17 bpm
SaO2 98 %
Comments —

Risk Of Sleep Apnoea

Do You Suffer From Daytime Sleepiness, Restless
Sleep Or Witnessed Breath Holding During Sleep?

Information Please click here for the POA Investigation Guidelines

Investigations & Date Ordered

FERRERAPIGLIA, Enzo P

BORN 07 Dec-1967 (58y) GENDER Male

CHI 0712673318

Glucose No

HbA1c No

Cross Match No

Group & Save No

Coag Screen No

U&Es Yes

LFTs Yes

TFT No

Bone No

ECG Yes

MRSA Screen No

Echo No

Other —

FBC Date 29-Oct-2019

Ferr/Fol/B12 Date —

Glucose Date —

HbA1c Date —

Cross Match Date —

Group & Save Date —

Coag Screen Date —

U&Es Date 29-Oct-2019

LFTs Date 29-Oct-2019

TFT Date —

Bone Date —

ECG Date 29-Oct-2019

MRSA Screen Date —

Echo Date —

MRSA Screening Clinical Risk Assessment (CRA)

A: Does the Patient require A Clinical Risk Assessment (For Patients > 23 Hours)

No

DVT Risk Factors

VTE Risk

Is The Patient At Risk Of DVT? —

Do They Require Prophylaxis? —

Comments —

Day Surgery / Admission Criteria

Is this procedure suitable for day surgery? Yes

Essential criteria for day surgery admission

Q 1

On discharge you will require an escort home as you cannot travel alone even in a taxi. You can't drive, operate machinery or ride a bike for 24 hours following an anaesthetic. Do you have a responsible adult who can escort you home from the hospital the day of your surgery?

Yes

Q 2

Can that person, or another responsible adult, be
SERAFINIA, Enzo P
of the 24 hours
following your anaesthetic?
BORN 07 DEC 1967 (69y) GENDER Male
CHI 0712673318 Yes

Q 3

Do you have immediate access to a telephone?
Yes

Q 4

Do you have suitable access to toilet facilities?
Yes

Q 5

If you live more than 90 minutes drive away, could
you stay with a responsible adult who would be with
you for 24 hours following anaesthetic within 90
minutes drive? (this could include a hotel, B&B etc)

Q 6

If the answer to number 5 is no then do you live
within 90 minutes of another hospital?
(POA Nurse to check if hospital has suitable
provisions)

Admission Criteria

Appropriate
admission based
on nursing
assessment

Additional
information

Advice and Actions

Q 1

Advise to take usual anti-reflux medication
Yes

Q 2

Dispensed Ranitidine as per PGD directive
No

Q 3

Refer to smoking cessation clinic
No

Q 4	Aspirin, Clopidogrel, or recreational drug (s) during the 24 hours before surgery (related to Social - Drugs)	No
Q 5	Anticoagulant advice	No
Q 6	Clopidogrel advice	No
Q 7	Aspirin advice	No
Q 8	OCP advice	No
Q 9	Provide Herbal Medicine Advice	No
Q 10	Arrange for dialysis the day before surgery	No
Q 11	Ensure facilities for dispensing methadone are available, if the patient is taking methadone	No
Q 12	Fasting Information Discussed	Yes
Q 13	Dentition Risk Discussed	No

Pre-operative Assessment Summary

Assessor

JANE BROWN

Grade

CHARGE NURSE

PATIENT EXTREMELY ANXIOUS AS CURRENTLY GOING THROUGH AN INQUIRY FOR CHILD SEX ABUSE WHICH HE ENDURED DURING HIS CHILDHOOD.

UNCLEAR IF HE WANTS TO PROCEED WITH PROCEDURE AS HE FEELS HE IS NOT MENTALLY READY CURRENTLY.

EXPLAINED PRE-ASSESSMENT IS VALID FOR 3 MONTHS AND THEREFORE WE WOULD CONTINUE WITH HIS PRE-ASSESSMENT JUST NOW AND HE WOULD CONTINUE SEEING HIS PSYCHIATRIST.

FASTING INSTRUCTIONS GIVEN.
ECG OBTAINED
BLOODS OBTAINED.

Anaesthetic Assessment**SERARIGLIA, Enzo P**

Grade —

BORN 07-Dec-1967 (58y) GENDER Male

CHI 0712673318

Recommended Admission Pathway

Review By

Anaesthetist —

Other —

DSU/23hr Criteria Met —

SDA Criteria Met —

Referrals

Smoking Cessation —

Other —

[Amend](#)[Print](#)

EMERGENCY DEPARTMENT
ROYAL ALEXANDRA HOSPITAL
CORSEBAR ROAD
PAISLEY
PA2 9PN



Dr DAVID BRYDIE
4 SAUCEL CRESCENT
PAISLEY
PA1 1UB

Date: 21 Mar 2010

Dear Dr DAVID BRYDIE,

Re: LORENZO SERAPIGLIA, FLAT 1-1, 28 PAISLEY RD, RENFREW, PA4 8JJ
Date of Birth: 07/12/1967 CHI number: 0712673318

Your patient attended Royal Alexandra Hospital on the 20 Mar 2010.

The presenting complaint was:

GROIN PAIN

Triage information:

MODERATE PAIN? SEE NURSING SHEET

The following investigations were carried out:

None

The A&E diagnosis was:

GASTRO-INTESTINAL A5 - INGUINAL HERNIA-UNCOMPLICATED

The following treatment was given:

None

At the conclusion of treatment the patient was:

Not specified

Follow-up:

Not recorded

Additional information:

None

Yours sincerely,

**RYAN CONNELLY
DOCTOR**

HOSPITAL INFORMATION MISSING



Dr JUDITH ANDERSON
RENFREW HEALTH & SOCIAL WORK C
CLYDEVIEW MEDICAL PRACTICE 10 FERRY ROAD RENFREW

PA4 8RU

Date : 22 Oct 2011

Dear Dr JUDITH ANDERSON,

Re: LORENZO SERAPIGLIA, FLAT 1/1, 28 PAISLEY ROAD, RENFREW, PA4 8JJ
Date of Birth: 07/12/1967 CHI number: 0712673318

HOSPITAL INFORMATION MISSING Patient attended on the 22 Oct 2011.

The presenting complaint was: **ABDO PAIN**

Triage information: **MODERATE PAIN?**

The following investigations **None**
were carried out:

The A&E diagnosis was: **GASTRO-INTESTINAL A5 - CONSTIPATION**

The following treatment was **None**
given:

At the conclusion of **DISCHARGED - NO FOLLOW UP REQUIRED**
treatment the patient was:

Follow-up: **NO FOLLOW UP ARRANGED**

Additional information: **None**

Yours sincerely,

IAN TUCK

EMERG MED DOCTOR

Emergency Attendance Letter



Emergency Department
Royal Alexandra Hospital
Corsebar Road
Paisley
Renfrewshire
PA2 9PN

Dept. Contact Details:

Tel: 0141 314 6195

Fax: 0141 887 1386

Email:

Date Completed: 21/05/2023

Consultant: Dr Kirsty Ray

MJ McGovern
The Charleston Surgery
5 South Campbell St
Paisley
Paisley
PA2 6LR

Dear MJ McGovern

Re: **Serapiglia Enzo Paul**
70 JOHN NEILSON AVENUE
Paisley PA1 2SX

DOB: 07/12/1967

CHI: 0712673318

Attended on: **20/05/2023 at 12:21 hrs.**

Departed on: **20/05/2023 at 13:26 hrs.**

Discharge Type: **01b - Discharge with follow up by
primary care team**

Destination: **Private residence**

Previous ED Attendance in last 12 months: **0**

Presenting complaint
dog bite on leg/arm

Nursing Assessment:

Investigations in ED: **None**

Diagnosis:

Diagnosis	Side	Site
Open Wound of Other Parts of Forearm		
Open Wound of Thigh		

Procedures: **None**Immunisations: **None**Dispensed Medication: **Any medication dispensed or changed is recorded in this letter in the free text below**

Clinician Notes:

Brushing dog and dog latched on to R forearm and L inner thigh. Small amount of skin loss nil to close on any wounds. Bruising noted cleaned and inadine and dry dressing applied to both. Given antibiotic cover oral doxycycline 100mg bd 5/7 and revaxis im. Given advice on red flags regarding infection and wound care.

Followup :

Highly sensitive: N

Consent for sharing withheld: N

Yours sincerely,
Deborah Stewart
Nurse Practitioner

Copies to:

1. MJ McGovern (GP)

School Address:

Clinical letter - Others: Clinical Letter



Greater Glasgow
and Clyde

Royal Alexandra Hospital
Corsebar Road
Paisley
PA2 9PN
0141-887-9111

Dr David Davidson,
87502/1,
The Consulting Rooms,
21 Neilston Rd.,
Paisley, Paisley, PA2 6LW.

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

General Surgery, RAH

28/10/2016

28/10/2016

Dear Doctor,

Enzo Serapiglia; D.O.B: 07/12/1967; CHI: 0712673318
73 METHUEN ROAD, Paisley, Renfrewshire, PA3 4JU.

Thanks for referring this 48 year old gentleman to Miss Gray's clinic. Further from the clinic letter on 27/10/2016, I have discussed with the Radiologist today who has advised an outpatient CT scans to further investigate the multiple intermittent 'lumps' the patient described. An appointment letter will be sent out to patient by the Radiology Department.

Many thanks,
Dr Ye Ru Chin
FY2 to Miss Joanna Gray

Electronically Signed: ,

cc.

General Surgery
Royal Alexandra Hospital
Corsebar Road
Paisley
PA2 9PN

25/07/2023

Dr MJ McGovern
The Charleston Surgery
5 South Campbell St
Paisley
PA2 6LR

Dear Dr MJ McGovern
CHI Number: 0712673318
Patient Name: EnzoPaulSerapiglia
Referral Date: 25/07/2023

Advice Response to recent Referral:

He was removed from the waiting list in early 2020 pre pandemic as he did not make himself available for theatre dates and was supposed to contact when he was available.
I've added him to the lists again now- but it may be a long wait

Yours Sincerely

Miss Vivienne Gough

User ID: Vivienne Gough

OP Advice Letter

Clinic Letter



Royal Alexandra Hospital
Corsebar Road
Paisley
PA2 9PN
0141-887-9111

Dr. DC Davidson
The Consulting Rooms
21 Neilston Rd
Paisley
PA2 6LW

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

0141 314 6979
lorraine.crum2@ggc.scot.nhs.uk
04/08/2016
JG/LC
04/08/2016
05/08/2016

Dear Dr. DC Davidson,

Enzo Serapiglia; D.O.B: 07 Dec 1967; CHI: 0712673318
73 METHUEN ROAD, Paisley, Renfrewshire, PA3 4JU

Attendance: Specialty - General Surgery; Clinic - RAJGGS8-MISS GRAY GEN SURG THURS PM
Date and Time of Appointment - 04/08/2016 13:35

Clinical Comments:

The above patient failed to attend my clinic today. This was for an opinion regarding an umbilical hernia. I have sent one further appointment.

Yours sincerely

JOANNA GRAY

CONSULTANT UPPER GI AND GENERAL SURGEON

Electronically Signed: Dr Joanna Gray, Consultant

cc.

Clinic Letter

Royal Alexandra Hospital
Corsebar Road
Paisley
PA2 9PN
0141-887-9111

Dr. DC Davidson
The Consulting Rooms
21 Neilston Rd
Paisley
PA2 6LW

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

0141 314 6979
lorraine.crum2@ggc.scot.nhs.uk
27/10/2016
YC/LC
28/10/2016
28/10/2016

Dear Dr. DC Davidson,

Enzo Serapiglia; D.O.B: 07 Dec 1967; CHI: 0712673318
73 METHUEN ROAD, Paisley, Renfrewshire, PA3 4JU

Attendance: Specialty - General Surgery; Clinic - RAJGGS8-MISS GRAY GEN SURG THURS PM
Date and Time of Appointment - 27/10/2016 15:20

Clinical Comments:

Thank you for referring this forty-eight year old gentleman, whom I reviewed with Miss Gray in her Thursday afternoon clinic today. He was initially referred to us in view of an umbilical hernia, which he first noted about 6 months ago. He also described an intermittent left and right sided abdominal 'lumps' that started about two years ago, as well as another one around epigatric area. Both of these lumps have been causing a lot of pain and are more prominent when he bends forward, does heavy lifting, stress and coughing and they are also associated with nausea and abdominal bloating. He denies any change in his bowel habit and has had no pr bleeding, weight loss or change in his appetite. In terms of his past medical history, he has had a previous right inguinal hernia repair and he also has a history of depression. He is currently on Sertraline for his depression. His father recently died of pancreatic cancer. He works as an ice-scream seller, he smokes twenty cigarettes per day and denies any alcohol intake. He lives alone.

On examination today there is an umbilical hernia seen and this is not reducible. There is no other obvious lump otherwise. His abdomen was soft and non-tender. There was a positive cough impulse on his left sided abdomen and probably on the right sided abdomen and epigatric area.

He was reviewed by Miss Gray who has suggested to do a scan in the first instance to investigate these multiple 'lumps'. Miss Gray could only palpat and umbilical hernia. We will discuss with Radiologist tomorrow whether a CT or MRI should be done in this case and will write to patient once the appropriate investigation has been requested. Miss Gray will then decide what would be the next appropriate step after the scan.

Note CT requested.

Yours sincerely

DR YE RU CHIN

SURGICAL FY2

Electronically Signed: Dr Joanna Gray, Consultant

cc.

Clinic LetterGreater Glasgow
and ClydeRoyal Alexandra Hospital
Corsebar Road
Paisley
PA2 9PN
0141-887-9111Dr. DC Davidson
The Consulting Rooms
21 Neilston Rd
Paisley
PA2 6LWMain
Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
Dictated
Date:
Transcribed
Date:0141 314 6979
lorraine.crum2@ggc.scot.nhs.uk
08/06/2017
JG/LC
08/06/2017
08/06/2017

Dear Dr. DC Davidson,

Enzo Serapiglia; D.O.B: 07 Dec 1967; CHI: 0712673318
73 METHUEN ROAD, Paisley, Renfrewshire, PA3 4JUAttendance: Specialty - General Surgery; Clinic - RAJGGS8-MISS GRAY GEN SURG THURS PM
Date and Time of Appointment - 08/06/2017 14:15**Clinical Comments:**

I reviewed the above forty-nine year old gentleman at my clinic today. He has been diagnosed with a fat containing peri-umbilical hernia and a small right inguinal hernia, which is asymptomatic. He is keen to get the peri-umbilical hernia fixed and I have explained an open repair of this today. He will require a general anaesthetic and we will do this as day surgery at my Vale of Leven day case list and he is happy to go there. I have explained the risks and complications such as wound infection, mesh infection and recurrence and he needs about a one month notice for his work point of view. He was rushing off today as he was due in Kilmarnock. He is undergoing a lot of stress at the moment as he was abused as a child between the ages of five and eleven while at a catholic school. I think he was then abused by his older brother. There is obviously a lot going on with him at the moment but he is keen to go ahead and have the hernia fixed. He has no other significant past medical history. He has lost some weight recently through diet and exercise and his work is selling ice cream in an ice cream van and he is aware that he will not be able to drive for two weeks and no heavy lifting for six weeks after his surgery.

We will arrange to get him pre-assessed nearer the time of his surgery and I suspect we can perhaps try and get him pre-assessed at IRH as that would be nearer his home. I have put him on the waiting list and he will get a date in due course.

Yours sincerely

JOANNA GRAY

CONSULTANT UPPER GI AND GENERAL SURGEON

Electronically Signed: Miss Joanna Gray, Consultant

cc.

Clinic Letter

Royal Alexandra Hospital
Corsebar Road
Paisley
PA2 9PN
0141-887-9111

Dr. GE Collin
The Consulting Rooms
21 Neilston Rd
Paisley
PA2 6LW

Main
Switchboard:
Department:
Contact Tel:
Enquiries to: joanne.forbes@ggc.scot.nhs.uk
Letter Date: 15/08/2019
Reference: AB/SJ
Dictated 15/08/2019
Date:
Transcribed 20/08/2019
Date:

Dear Dr. GE Collin,

Enzo Serapiglia; D.O.B: 07 Dec 1967; CHI: 0712673318
73 METHUEN ROAD, Paisley, Renfrewshire, PA3 4JU

Attendance: Specialty - General Surgery; Clinic - RAFFGS8-MR FROHLICH GEN SURG THURS PM
Date and Time of Appointment - 15/08/2019 14:50

Follow Up: waiting list for peri-umbilical repair.

Clinical Comments:

Diagnosis: peri-umbilical hernia.

Follow up: added to waiting list for peri-umbilical repair.

Mr Serapiglia is a 51 year old gentleman who has had a peri-umbilical hernia for several years. He was previously seen by Miss Gray's Team and listed for a repair but due to personal circumstances he could not attend for this. He was open about the fact that he is a victim in a historical child abuse case which continues to cause him much distress and has contributed to his depression. He has an upcoming trial during which he will be witness from the 3rd to 17th October and this is causing him additional stress. He says that for 3 or 4 years now he is having severe heartburn and vomiting especially when he thinks about the abuse although this has not bothered him for the past month.

These symptoms are generally relieved by enforced relaxation and antacids. He denies any worsening of the symptoms, any unexplained weight loss or dysphagia and so I do not think that there is any indication for an OGD at this time. He does take Omeprazole which he says helps.

Enzo takes Sertraline, Propanolol and Omeprazole 20mgs. On examination today his abdomen was soft and non tender but there was an obvious peri-umbilical hernia about 8cms in diameter which was tender but non reducible. He told me that he has previously had bilateral hernia repair although there

is no record of this and he says the repair went well so I did not examine him today as I could tell that he even found an abdominal examination distressing.

I explained to Mr Serapiglia that a peri-umbilical repair could be done as a day case and he is happy to proceed with this so I have added him to our waiting list. Furthermore please could you increase his Omeprazole dose to 40mgs to try and relieve his dyspepsia symptoms more.

Yours sincerely

Miss Anna Bleakley

CT2 in General Surgery

Electronically Signed: Dr Anna Bleakley, Doctor

cc.

Letter to Patient: Clinical Letter



Royal Alexandra Hospital
Corsebar Road
Paisley
PA2 9PN
0141-887-9111

Enzo Serapiglia
73 METHUEN ROAD
Paisley
Renfrewshire
PA3 4JU

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

General Surgery

28/10/2016

28/10/2016

Dear Mr Serapiglia,

I've met you yesterday along with Miss Gray, Consultant Surgeon at her outpatient clinic. Further from the conversation we had yesterday, I have discussed with the Radiologist today who has advised an outpatient CT scan to further investigate the multiple 'lumps' you described to us yesterday. An appointment letter will be sent out to you by the Radiology Department in due course.

Many thanks,
Dr Ye Ru Chin
FY2 to Miss Joanna Gray

Electronically Signed: ,

cc.

Letter to Patient:



Royal Alexandra Hospital
Corsebar Road
Paisley
PA2 9PN
0141-887-9111

Enzo Serapiglia
73 METHUEN ROAD
Paisley
Renfrewshire
PA3 4JU

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

GENERAL SURGERY
0141-314-6979
LORRAINE CRUM
16/01/2017
JG/JF
13/01/2017
13/01/2017

Dear Mr Serapiglia ,

Your CT abdomen and pelvis from the 23.11.16 shows a fat containing periumbilical hernia and a small right inguinal hernia. I will arrange for you to be reviewed in the clinic.

Kind regards
Your sincerely

Miss Joanna Gray
Consultant Upper GI and General Surgeon

Electronically Signed: Dr Joanna Gray, Consultant

cc. DR DAVIDSON
THE CONSULTING ROOMS
21 NEILSTON ROAD
PAISLEY

Hospital use only	Clinic	Day Date	Time	Hospital No.
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	REFERRAL LETTER MEDICAL IN CONFIDENCE	Attachments
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Additional Support Needs:
No known ASN requirements

REFERRAL TO	
General Surgery AC General Referral	Consultant / receiving practitioner and/or specialty clinic
Royal Alexandra Hospital Corsebar Road Paisley PA2 9PN	Hospital and hospital address Hospital location code: C418H Email address
Urgency of referral: ROUTINE	Date sent: 31-Mar-2010
Date of referral: 30-Mar-2010	

PATIENT DETAILS	Patient's address
Surname: Serapiglia	Flat 1-1
Forename(s): Lorenzo Enzo	28 Paisley Rd
Title: Mr	RENFREW
Sex: Male	PA4 8JJ
Date of birth: 07-Dec-1967	Contact number(s)
CHI no.: 0712673318	Voice: 07919907226
Area of Residence:	

101000347532Z	Unique Care Pathway Number: 101000347532Z
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REGISTERED GP DETAILS	Practice address
Name: Dr Brydie	4 Saucel Cres
GMC code: 3541595 GP code: C35653	PAISLEY
Practice name: Anchor Mill Medical Practice	PA1 1UB
Practice code: 87471	Contact number(s)
	Voice: 0141 889 8809
	Facsimile: 0141 840 8251

REFERRING GP DETAILS	Practice address
Name: Dr. David Brydie	PAISLEY
GMC code: 3541595 GP code: 35653	Contact number(s)
Practice name: 4 Saucel Crescent (87471)	Voice: 0141 889 8809
Practice code: 87471	Facsimile: 0141 840 8251

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

Description: Please see additional information

Comment: I would be grateful if you could see this 42 year old gentleman who has developed a painful redicible left inguinal hernia over the last month or so. He is keen for this to be repaired.

I would be grateful for your assessment.

Yours sincerely

DR. DAVID BRYDIE

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

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

<u>Description</u>	<u>Comment</u>	<u>Date of onset</u>
[V]Issue of incapacity certificate	Issued By DWP "On Incapacity"	19-Nov-2007
[X]Depression NOS	-	01-Jan-2005
Agitated depression	with obsessional & dependant personality traits	01-Jan-1996
Anxiety states	-	01-Jan-1989
Anxiety with depression	-	01-Jan-1987
Viral (Infectious) hepatitis A	-	01-Jan-1984

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

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Trazodone Hydrochloride	84	CAPS 100MG	3 Caps	At night	02-Apr-2007	-
Bupirone Hydrochloride	84	TABS 10MG	1 Tab	3 times daily	09-Jul-2008	-
Propranolol Hydrochloride	84	TABS 40MG	1 Tab	3 times daily pm	15-Jun-2007	-

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

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Co-Codamol	100	30mg/500mg TABS	1 or 2 Tabs	4 times daily	26-Mar-2010	-
Fucidin H	60	CREAM	Apply thinly	once or twice daily	01-Mar-2010	-
Fucidin H	60	CREAM	Apply thinly	once or twice daily	05-Jan-2010	-

Blood Pressure

No Blood Pressures Recorded

Body Measurements

No Body Measurements Recorded

Lifestyle Risks and Alerts / Examinations and InvestigationsDescription/Question Result/Comment Date

Current smoker: 26-Mar-2010
 Current smoker: 19-Aug-2008
 Current smoker: 31-Mar-2006

Clinical warnings**Additional Support Needs**

No known ASN requirements

Additional relevant information**Administrative information**

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

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

Patient has disability or requires wheelchair access:No

Referred By:Referring GP

Electronic Attachment Present:No

Signature of referring doctor (or other professional) Date

Hospital use only	Clinic	Day Date	Time	Hospital No.
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	REFERRAL LETTER MEDICAL IN CONFIDENCE	Attachments
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Additional Support Needs:
No known ASN requirements

REFERRAL TO	
General Surgery GGC General Referral	Consultant / receiving practitioner and/or specialty clinic
Royal Alexandra Hospital Corsebar Road Paisley PA2 9PN	Hospital and hospital address Hospital location code: C418H Email address:
Urgency of referral: Routine Date of referral: 01-Jun-2016 Date sent: 01-Jun-2016	

PATIENT DETAILS	Patient's address
Surname: Serapiglia Forename(s): Enzo Title: Mr Sex: Male Date of birth: 07-Dec-1967 CHI no.: 0712673318 Area of Residence:	73 Methuen Road Paisley PA3 4JU Contact number(s): Voice: 07473660934 Voice: 07473660934

1010115041555	Unique Care Pathway Number: 1010115041555
-----------------	---

REGISTERED GP DETAILS	Practice address
Name: Dr D C Davidson GMC code: 2818812 GP code: 39080 Practice name: The Consulting Rooms Practice code: 87502	The Consulting Rooms 21 Neilston Road Paisley PA2 6LW Contact number(s): Voice: 0141 889 5277 Facsimile: 0141 848 5500

REFERRING GP DETAILS	Practice address
Name: DR AILIE LOCHHEAD GMC code: 7013315 GP code: - Practice name: The Consulting Rooms (87502) Practice code: 87502	21 Neilston Rd Paisley PA2 6LW Contact number(s): Voice: 0141 889 5277

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

Description: Increasing umbilical hernia

Comment: I would be grateful for your review of this forty-eight year old gentleman who has a longstanding history of abdominal hernias. He has noticed recently that the hernia around his umbilicus is getting more painful and will often stick out for longer periods than it previously did. His bowels are moving normally at present. He has also noticed other hernias around this abdomen which I was unable to located today.

On examination abdomen was soft and he was slightly tender over the umbilical hernia but it was not firm. There was no rebound or guarding.

Due to the increasing discomfort I would be grateful if Mr Serapiglia could be seen at your Clinic.

Kind regards

AILIE LOCHHEAD
GP Locum

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

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

Description	Date of onset	Date recorded
Chest infection	23-May-2016	23-May-2016
Umbilical hernia	23-May-2016	23-May-2016

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
New patient screen	18-May-2016	18-May-2016

Family conditions (All priorities)

Description	Date of Onset
FH: Diabetes mellitus	18-May-2016
FH: Ischaemic heart dis. >60	18-May-2016

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

No current medications recorded

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Amoxicillin Capsules 500 mg	15	15 CAPSULE	ONE TO BE TAKEN THREE TIMES A DAY	-	23-May-2016	23-May-2016
Dermol 200 Shower Emollient	200	200 ML	TO BE USED AS DIRECTED	-	23-May-2016	23-May-2016

Blood Pressure

Date Recorded	Systolic	Diastolic
23-May-2016	118	78
18-May-2016	131	86

Body Measurements

Date Recorded	Height	Weight	BMI
18-May-2016	168	95.5	-

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Cigarette smoker, 20 Cigarettes/day:		18-May-2016

Cigarette smoker, 20 Cigarettes/day:	18-May-2016
Alcohol consumption, 0 units/week:	18-May-2016
Aerobic exercise 2 times/week:	18-May-2016

Clinical warnings**Additional Support Needs**

No known ASN requirements

Additional relevant information**Administrative information**

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

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

Referred By:Referring GP

Electronic Attachment Present:No

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) Date

Hospital use only	Clinic	Day Date	Time	Hospital No.
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	REFERRAL LETTER MEDICAL IN CONFIDENCE	Attachments
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Additional Support Needs:
No known ASN requirements

REFERRAL TO			
General Surgery GGC General Referral			Consultant / receiving practitioner and/or specialty clinic
Royal Alexandra Hospital Corsebar Road Paisley PA2 9PN			Hospital and hospital address Hospital location code: C418H Email address: -
Urgency of referral Date of referral	Routine 11-Mar-2019	Date sent	11-Mar-2019

PATIENT DETAILS		Patient's address
Surname	Serapiglia	73 Methuen Road Paisley PA3 4JU Contact number(s) Voice: 07473660934 Voice: 07473660934
Forename(s)	Enzo	
Title	Mr	
Sex	Male	
Date of birth	07-Dec-1967	
CHI no.	0712673318	
Area of Residence	-	

101018215812N	Unique Care Pathway Number: 101018215812N
-----------------	---

REGISTERED GP DETAILS		Practice address
Name	Dr Gillian Collin	
GMC code	6128723	GP code 35050
Practice name	The Consulting Rooms	
Practice code	87502	
		Contact number(s) Voice: 0141 889 5277 Facsimile: 0141 848 5500

REFERRING GP DETAILS		Practice address
Name	Dr. Guy Perrett	
GMC code	4704504	GP code 36056
Practice name	The Consulting Rooms (87502)	
Practice code	87502	
		Contact number(s) Voice: 0141 889 5277

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

Description: Periumbilical hernia.

Comment: I would be most grateful if I could refer back Mr Serapiglia who is a 51 year old gentleman, who has a Periumbilical hernia and was reviewed by Miss Gray in 2017 and at that time the plan was for him to go forward for repair. He has been experiencing significant stress, due to being a victim in a historical child abuse case, and he subsequently postponed going forward, however, he has reattended requesting to have it repaired as he is having some discomfort from the area.

Many thanks for seeing him.

Yours sincerely,

Dr Guy Perrett.

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

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

<u>Description</u>	<u>Comment</u>	<u>Date of onset</u>	<u>Date recorded</u>
History of sexual abuse	-	13-Feb-2017	13-Feb-2017
Umbilical hernia	-	28-Oct-2016	28-Oct-2016
Anxiety states	very long H/O anxiety/depression	12-May-2016	12-May-2016
History of sexual abuse	claim vic of childhood sexual abuse by family friend	05-Aug-2015	05-Aug-2015
Anxiety with depression	-	01-Jan-2005	01-Jan-2005
H/O cannabis misuse	-	27-Oct-2004	27-Oct-2004
[X]Mixed anxiety and depressive disorder	-	01-Jan-1987	01-Jan-1987

Past procedures (High and medium priority - all)

<u>Description</u>	<u>Date performed</u>	<u>Date recorded</u>
Primary repair of inguinal hernia	20-Jan-2014	20-Jan-2014
Tonsillectomy and adenoidectomy	23-Jan-1972	23-Jan-1972

Family conditions (All priorities)

<u>Description</u>	<u>Date of Onset</u>
FH: Diabetes mellitus	18-May-2016
FH: Ischaemic heart dis. >60	18-May-2016

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

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Omeprazole Capsules (Gastro-Resistant) 20 mg	56	56 CAPSULE	ONE TO BE TAKEN EACH DAY	-	11-Jun-2018	07-Mar-2019
Sertraline Hydrochloride Tablets 100 mg	56	56 TABLET	TWO TABLETS AT NIGHT	-	22-Jan-2018	07-Mar-2019

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

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Amoxicillin Capsules 500 mg	21	21 capsule	ONE TO BE TAKEN THREE TIMES A DAY	-	07-Mar-2019	07-Mar-2019
Ciprofloxacin Eye drops 0.3 %	5	5 ml	1 DROP TWICE A DAY	-	07-Mar-2019	07-Mar-2019
	56	56 tablet	TAKE ONE TWICE DAILY	-	07-Mar-2019	07-Mar-2019

Propranolol Hydrochloride Tablets 40 mg						
*Co-Codamol 8/500 Tablets	60	60 tablet	TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)	09-Jan-2019	09-Jan-2019	
Ibuprofen Gel 5 %	100	100 gram	APPLY TO THE AFFECTED AREA UP TO THREE TIMES A DAY	09-Jan-2019	09-Jan-2019	
Otomize Spray	1	1 SPRAY	ONE SPRAY INTO AFFECTED EAR THREE TIMES A DAY	09-Jan-2019	09-Jan-2019	
Otomize Spray	1	1 spray	1 SPRAY TDS	03-Dec-2018	03-Dec-2018	
Ciprofloxacin Eye drops 0.3 %	5	5 ml	1 DROP TWICE A DAY	28-Sep-2018	28-Sep-2018	
Amoxicillin Capsules 500 mg	21	21 capsule	ONE TO BE TAKEN THREE TIMES A DAY	28-Sep-2018	28-Sep-2018	

Blood Pressure

Date Recorded	Systolic	Diastolic
23-May-2016	118	78
18-May-2016	131	86

Body Measurements

Date Recorded	Height	Weight	BMI
18-May-2016	168	95.5	-

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Cigarette smoker, 20 Cigarettes/day:		06-Mar-2017
Cigarette smoker, 20 Cigarettes/day:		18-May-2016
Cigarette smoker, 20 Cigarettes/day:		18-May-2016
Alcohol consumption, 0 units/week:		18-May-2016
Aerobic exercise 2 times/week:		18-May-2016

Clinical warnings

Additional Support Needs

No known ASN requirements

Additional relevant information

Administrative information

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

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

Referred By:Referring GP

Electronic Attachment Present:No

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) Date

Hospital use only	Clinic	Day Date	Time	Hospital No.
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	REFERRAL LETTER MEDICAL IN CONFIDENCE	Attachments
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Additional Support Needs:
No known ASN requirements

REFERRAL TO		
Renfrewshire - CMHT Adult GGC Mental Health		Consultant / receiving practitioner and/or specialty clinic
Community Mental Health Team - Adult SCI Gateway Virtual Location code		Hospital and hospital address Hospital location code: G002G Email address:
Urgency of referral	Urgent - within 5 working days	
Date of referral	09-Oct-2019	Date sent 09-Oct-2019

PATIENT DETAILS	Patient's address																	
<table border="1"> <tr><td>Surname</td><td>Serapiglia</td></tr> <tr><td>Forename(s)</td><td>Enzo</td></tr> <tr><td>Title</td><td>Mr</td></tr> <tr><td>Sex</td><td>Male</td></tr> <tr><td>Date of birth</td><td>07-Dec-1967</td></tr> <tr><td>CHI no.</td><td>0712673318</td></tr> <tr><td>Area of Residence</td><td></td></tr> </table>	Surname	Serapiglia	Forename(s)	Enzo	Title	Mr	Sex	Male	Date of birth	07-Dec-1967	CHI no.	0712673318	Area of Residence		<table border="1"> <tr><td>17 Park Moor ERSKINE ERSKINE PA8 7HL</td></tr> <tr><td>Contact number(s)</td></tr> <tr><td>Voice: 07473660934</td></tr> </table>	17 Park Moor ERSKINE ERSKINE PA8 7HL	Contact number(s)	Voice: 07473660934
Surname	Serapiglia																	
Forename(s)	Enzo																	
Title	Mr																	
Sex	Male																	
Date of birth	07-Dec-1967																	
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Voice: 07473660934																		

101019771529Z	Unique Care Pathway Number: 101019771529Z
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REGISTERED GP DETAILS	Practice address																			
<table border="1"> <tr><td>Name</td><td colspan="3">Dr Murray MacPherson</td></tr> <tr><td>GMC code</td><td>4018652</td><td>GP code</td><td>35505</td></tr> <tr><td>Practice name</td><td colspan="3">Mains Medical Centre (16583)</td></tr> <tr><td>Practice code</td><td colspan="3">87184</td></tr> </table>	Name	Dr Murray MacPherson			GMC code	4018652	GP code	35505	Practice name	Mains Medical Centre (16583)			Practice code	87184			<table border="1"> <tr><td>300 Mains Drive Erskine PA8 7JQ</td></tr> <tr><td>Contact number(s)</td></tr> <tr><td>Voice: 0141 812 3230 Facsimile: 0141 812 5226</td></tr> </table>	300 Mains Drive Erskine PA8 7JQ	Contact number(s)	Voice: 0141 812 3230 Facsimile: 0141 812 5226
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Practice code	87184																			
Mains Medical Centre 300 Mains Drive Erskine PA8 7JQ																				
Contact number(s)																				
Voice: 0141 812 3230																				

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

Description: Past history of sexual abuse

Comment: Dear Colleague,

I have would be most grateful if you could consider arranging an urgent assessment for Mr Serapiglia. He is a 51 year old gentleman who has a past history of sexual abuse whilst a pupil at a Residential School run by the Catholic Church down in Largs. He has only recently joined our Practice and I do not have full details of his previous mental health involvement, but he tells me that he has support through charities involved in helping victims of sexual abuse, as well as having previously paid privately for psychotherapy. He is suffering from significant anxiety which appears to be worse at the moment due to an imminent appearance in Court to give evidence in the enquiry into Child Sexual Abuse.

He is struggling with deciding whether he is able to stand up in Court to give evidence and has approached me to try to find some further help for him, in particular he mentioned psychotherapy, but given the current stresses I am not sure if this would be the most appropriate time for such treatment. He does, however, appear to need ongoing support with regards to his anxiety. He continues on Sertraline 200mg daily which has been of some help in the past.

Many thanks for your assistance in seeing him for an assessment and discussing with him possible future treatment options to help.

Yours sincerely

Dr M Macpherson

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history**Family conditions** (All priorities)

Description	Date of Onset
FH: * - gastrointestinal tract	13-Sep-2019
FH: Ischaemic heart dis. >60	13-Sep-2019

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

No current medications recorded

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Sertraline Hydrochloride Tablets 100 mg	56	56 TABLET	2 TABS DAILY	-	18-Sep-2019	18-Sep-2019
Gentamicin And Hydrocortisone Acetate Ear drops 0.3 % + 1 %	10	10 ML	ONE OR TWO DROPS TO BE INSTILLED INTO AFFECTED EAR(S) THREE TO FOUR TIMES DAILY AND AT NIGHT	-	13-Sep-2019	13-Sep-2019

Blood Pressure

Date Recorded	Systolic	Diastolic
13-Sep-2019	140	90

Body Measurements

Date Recorded	Height	Weight	BMI
13-Sep-2019	170	97	33.56

Lifestyle Risks and Alerts / Examinations and Investigations

<u>Description/Question</u>	<u>Result/Comment</u>	<u>Date</u>
Cigarette smoker, 20 Cigarettes/day:		13-Sep-2019
Teetotaler:		13-Sep-2019

Clinical warnings**Additional Support Needs**

No known ASN requirements

Additional relevant information**Administrative information**

Risk of Suicide:Don't Know

Past history of suicide attempt:Don't Know

Risk of deliberate self harm:Don't Know

Is patient responsible for children?:No

Risk to others including children/dependents/clinicians/other:No

Risk from others:No

Risk of Self Neglect:Don't Know

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

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

Referred By:Registered GP

Electronic Attachment Present:No

Signature of referring doctor (or other professional) Date

Hospital use only	Clinic	Day Date	Time	Hospital No.
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	REFERRAL LETTER MEDICAL IN CONFIDENCE	Attachments
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Additional Support Needs:
No known ASN requirements

REFERRAL TO	
General Surgery GGC General Referral	Consultant / receiving practitioner and/or specialty clinic
Royal Alexandra Hospital Corsebar Road Paisley PA2 9PN	Hospital and hospital address Hospital location code: C418H Email address:
Urgency of referral Date of referral	Routine 24-Jul-2023 Date sent 24-Jul-2023

PATIENT DETAILS	Patient's address
Surname: SERAPIGLIA	70 JOHN NEILSON AVENUE
Forename(s): ENZO	PAISLEY
Title: MR	PA1 2SX
Sex: Male	Contact number(s):
Date of birth: 07-Dec-1967	Voice: 07562088722
CHI no.: 0712673318	E-mail: enzoserapiglia67@gmail.com
Area of Residence:	

101030251916N	Unique Care Pathway Number: 101030251916N
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REGISTERED GP DETAILS	Practice address
Name: Dr Michael McGovern	5 SOUTH CAMPBELL STREET
GMC code: 7485698 GP code: 37516	RENFREWSHIRE
Practice name: The Charleston Surgery	PA2 6LR
Practice code: 87466	Contact number(s):
	Voice: 01418894373

REFERRING GP DETAILS	Practice address
Name: Dr. Michael McGovern	5 South Campbell St
GMC code: 7485698 GP code: 37516	Paisley
Practice name: The Charleston Surgery (87466)	PA2 6LR
Practice code: 87466	Contact number(s):
	Voice: 0141 889 4373

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

Description: Periumbilical hernia

Comment: Dear Doctor,

This 55 year old man was previously seen in General Surgical Clinic in August of 2019 with regards to a periumbilical hernia. At the time he had an obvious umbilical hernia which was around 8cm in diameter which was tender but non reducible. At the time he was listed for a hernia repair, however unfortunately he explains this never happened he suspects due to the covid pandemic. He continues to suffer with pain associated to this hernia.

On examination his abdomen is soft and non tender and the hernia appears to be a similar size around 8cm in diameter and is soft and reducible.

I wonder if it would be possible for him to be added again to the waiting list for this procedure.

Kind regards

Dr Mike McGovern

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history**Current medication** (Active Repeat medication issued within the last 12 months)

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Propranolol 40mg tablets	84	tablet	ONE TABLET THREE TIMES A DAY	-	03-Jul-2023	03-Jul-2023
Omeprazole 20mg gastro-resistant capsules	56	capsule	ONE DAILY (FOR DYSPEPSIA / REFLUX)	-	02-Jun-2023	02-Jun-2023

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

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Sertraline 100mg tablets	112	tablet	TWO TABLETS DAILY (FOR DEPRESSION)	-	21-Jul-2023	21-Jul-2023
Omeprazole 20mg gastro-resistant capsules	56	capsule	ONE TABLET TWICE DAILY (FOR [more]	-	21-Jul-2023	21-Jul-2023
Laxido Orange oral powder sachets sugar free (Galen Ltd)	20	sachet	FOR CONSTIPATION	-	21-Jul-2023	21-Jul-2023
Ibuprofen 5% gel	50	gram	APPLY THREE TIMES DAILY TO TH[more]	-	02-Jun-2023	02-Jun-2023
Propranolol 40mg tablets	56	tablet	1 TABLET TWICE A DAY AS REQUI[more]	-	02-Jun-2023	02-Jun-2023
Sertraline 100mg tablets	112	tablet	TWO TABLETS DAILY (FOR DEPRESSION)	-	02-Jun-2023	02-Jun-2023

Blood Pressure

No Blood Pressures Recorded

Body Measurements

No Body Measurements Recorded

Lifestyle Risks and Alerts / Examinations and Investigations

<u>Description/Question</u>	<u>Result/Comment</u>	<u>Date</u>
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Cigarette smoker: Smoking status on date of event: Smoker. 16-May-2023

Clinical warnings

Additional Support Needs

No known ASN requirements

Additional relevant information**Administrative information**

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

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

Referred By:Referring GP

Electronic Attachment Present:No

Signature of referring doctor (or other professional) Date

Hospital use only	Clinic	Day Date	Time	Hospital No.
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	REFERRAL LETTER MEDICAL IN CONFIDENCE	Attachments
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Additional Support Needs:
No known ASN requirements

REFERRAL TO	
Gastroenterology - Dysphagia GGC Dysphagia	Consultant / receiving practitioner and/or specialty clinic
Royal Alexandra Hospital Corsebar Road Paisley PA2 9PN	Hospital and hospital address Hospital location code: C418H Email address:
Urgency of referral Urgent Date of referral 14-Aug-2023	Date sent 14-Aug-2023

PATIENT DETAILS	Patient's address																	
<table border="1"> <tr><td>Surname</td><td>SERAPIGLIA</td></tr> <tr><td>Forename(s)</td><td>ENZO</td></tr> <tr><td>Title</td><td>MR</td></tr> <tr><td>Sex</td><td>Male</td></tr> <tr><td>Date of birth</td><td>07-Dec-1967</td></tr> <tr><td>CHI no.</td><td>0712673318</td></tr> <tr><td>Area of Residence</td><td></td></tr> </table>	Surname	SERAPIGLIA	Forename(s)	ENZO	Title	MR	Sex	Male	Date of birth	07-Dec-1967	CHI no.	0712673318	Area of Residence		<table border="1"> <tr><td>70 JOHN NEILSON AVENUE PAISLEY PA1 2SX</td></tr> <tr><td>Contact number(s)</td></tr> <tr><td>Voice: 07562088722 E-mail: enzoserapiglia67@gmail.com</td></tr> </table>	70 JOHN NEILSON AVENUE PAISLEY PA1 2SX	Contact number(s)	Voice: 07562088722 E-mail: enzoserapiglia67@gmail.com
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Voice: 07562088722 E-mail: enzoserapiglia67@gmail.com																		

101030446383T	Unique Care Pathway Number: 101030446383T
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REGISTERED GP DETAILS	Practice address													
<table border="1"> <tr><td>Name</td><td>Dr Michael McGovern</td></tr> <tr><td>GMC code</td><td>7485698</td><td>GP code</td><td>37516</td></tr> <tr><td>Practice name</td><td>The Charleston Surgery</td></tr> <tr><td>Practice code</td><td>87466</td></tr> </table>	Name	Dr Michael McGovern	GMC code	7485698	GP code	37516	Practice name	The Charleston Surgery	Practice code	87466	<table border="1"> <tr><td>5 SOUTH CAMPBELL STREET RENFREWSHIRE PA2 6LR</td></tr> <tr><td>Contact number(s)</td></tr> <tr><td>Voice: 01418894373</td></tr> </table>	5 SOUTH CAMPBELL STREET RENFREWSHIRE PA2 6LR	Contact number(s)	Voice: 01418894373
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Practice name	The Charleston Surgery (87466)													
Practice code	87466													
5 South Campbell St Paisley PA2 6LR														
Contact number(s)														
Voice: 0141 889 4373														

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

Description: Dysphagia

Comment: Dear Doctor,

Your further investigation of this 55 year old gentleman would be very much appreciated. He has a 3 week history of feeling food sticking when he is swallowing and a feeling of something being stuck in his oesophagus around the level of the adam's apple. He denies any pain or discomfort associated with this and hasn't had any vomiting or indeed any regurgitation of food. He does not have any neck swelling. He is a non smoker and doesn't drink alcohol regularly. He has a history of gastro-oesophageal reflux disease and takes Omeprazole regularly for this. He denies any history of any weight changes and hasn't had any change to his bowel habit. He admits to being very stressed at present as he has a previous history of being abused as a child and is currently due to be giving evidence in the courts with regards to this.

On examination his abdomen is soft and non tender with an umbilical hernia which is easily reducible. Bowel sounds are normal. He has had bloods which have shown a normal full blood count, U&Es, LFTs and CRP. I have increased his dose of Omeprazole to 20mg twice daily. In doing this he does feel that his symptoms have improved, however still continues to suffer with intermittent dysphagia which he describes as occurring 2 to 3 times per week. He is under the impression that this is most likely anxiety related as he has been very anxious with regards to the upcoming court case and has noticed that this tends to be worse at times of anxiety. I suspect that this may well be the case, however given the fact that he has ongoing dysphagia, I wonder whether he would require further investigation with an upper gi endoscopy.

Kind regards

Dr Mike McGovern

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

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

<u>Description</u>	<u>Comment</u>	<u>Date of onset</u>	<u>Date recorded</u>
Open wound of lower limb		22-May-2023	22-May-2023
Open wound of upper limb	Attended A&E. Dog bite. Dog latched on to right forearm and left inner thigh. Wound cleaned and dressed. Antibiotic. Red flags advise on infections given.	22-May-2023	22-May-2023

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

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Propranolol 40mg tablets	84	tablet	ONE TABLET THREE TIMES A DAY	-	03-Jul-2023	03-Jul-2023
Omeprazole 20mg gastro-resistant capsules	56	capsule	ONE DAILY (FOR DYSPEPSIA / REFLUX)	-	02-Jun-2023	02-Jun-2023

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

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Sertraline 100mg tablets	112	tablet	TWO TABLETS DAILY (FOR DEPRESSION)	-	21-Jul-2023	21-Jul-2023
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Ibuprofen 5% gel	50	gram	APPLY THREE TIMES DAILY TO TH[more]	-	02-Jun-2023	02-Jun-2023

Propranolol 40mg tablets	56	tablet	1 TABLET TWICE A DAY AS REQUI[more]	02-Jun-2023	02-Jun-2023
Sertraline 100mg tablets	112	tablet	TWO TABLETS DAILY (FOR DEPRESSION)	02-Jun-2023	02-Jun-2023

Blood Pressure
No Blood Pressures Recorded

Body Measurements
No Body Measurements Recorded

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Cigarette smoker:	Smoking status on date of event: Smoker.	16-May-2023

Clinical warnings

Additional Support Needs
No known ASN requirements

Additional relevant information
Administrative information

Age:50-59 (+5 points)
Sex at birth:Male (0 points)
Current Acid Reflux?:No (0 points)
Dysphagia Localises To Neck?:Yes (-2 points)
Weight loss >3kg?:No (0 points)
Duration of Symptoms >6 months?:No (0 points)
OK to send correspondence to home address?:Yes
Patient will accept any site:Yes
Patient will accept cancellation or short notice appointment (within 1-6 days):Yes
Referred By:Referring GP
Electronic Attachment Present:No

Signature of referring doctor (or other professional) Date

Serapiglia, Enzo

ID:0712673318

29-OCT-2019 13:40:49

GREATER GLASGOW SITE-RAPRAD ROUTINE RECORD

07-DEC-1967 (51 yr)
Male Caucasian

Vent. rate 69 BPM
PR interval 174 ms
QRS duration 98 ms
QT/QTc 362/387 ms
P-R-T axes 44 -22 17

Normal sinus rhythm

Room: PREAD
Loc: 891 Option: 14

Technician: 814
Test ind:

Referred by: FROHLICH

Unconfirmed



25mm/s 10mm/mV 40Hz 9.04 12SL 241 CID: 65535

SID: 1612705 EID: EDT: ORDER:

Page 1 of 1

CT Abdomen and pelvis with contrast

Performed	23-Nov-2016 09:33	Received	23-Nov-2016 10:10
Reported	23-Nov-2016 10:08	Order Number	C418H31990804
Status	Final	Source System	MiSys

CT Abdomen and pelvis with contrast

Final

Enzo Serapiglia

Clinical History :

referred by for umbilical hernia. when seen at OPC, he also described left sided abdomen and right sided abdomen lump, which comes and goes intermittently and can cause pain. lumps self reduced. also described abdominal bloating and nausea at times. o/e positive cough impulse on left sided abdomen but unsure about right side/epigastric area. seen by miss Gray and discussed with Radiologist - advise to CT to further investigate ?spigelian hernia ?epigastric hernia

CT Abdomen and pelvis with contrast :

Fat containing periumbilical hernia, hernial orifice measures 1.9 cm. Hernial sac is 5.2 cm.
Small fat containing right inguinal hernia.
No other significant findings.

Reported by: Dr Glen McKenzie

Verified by: Dr Glen McKenzie