

NHS Confidential: Personal data about a patient

South Glasgow
University Hospitals
NHS Trust
Southern General Hospital

1345 Govan Road
Glasgow G51 4TF
Telephone 0141-201-1100
Fax 0141-201-2999
www.nhsscotland.co.uk

NHS
Greater
Glasgow

CONSULTANTS

Dr Matt J Carty
Dr Valerie D Hood
Dr Robert JS Hawthorn
Dr Ian N Ramsay
Dr Stewart Pringle
(Dr Pringle's Secretary – June) - ☎ Direct Dial: 0141-201-2237
SP/JR/442792
20th January 2004

Dr John Tierney
Dr Andrew Kraszewski
Dr Neil McDougall
Dr Marco Gaudoin
Dr Hassan – Staff Grade

● Dr Siddiqui
Pollok Health Centre,
21 Cowglen Road,
Glasgow. G53 6EQ

Dear Dr Siddiqui

RE: FRANCES MCGOWAN, 56 PINMORE STREET, GLASGOW G53 7PU
DOB: 19.01.69

Thank you for referring the above lady to my ante-natal clinic. She was seen for booking on Friday 16th January 2004. She is 13 weeks into this pregnancy and all appears to be well so far.

Booking bloods have been taken and the relevant results are listed below. We are grateful to you for sharing her antenatal care.

● She will return to the clinic in 26 weeks.

As my antenatal clinic is every Friday morning I would be happy to see her any time you or she wishes.

Yours sincerely,

sh
STEWART PRINGLE,
CONSULTANT OBSTETRICIAN AND GYNAECOLOGIST

Expected date of delivery: 18th July 2004
Blood Pressure: 96/60
Haemoglobin: 106
Blood Group B Rh Pos
AFP arranged with GP

FILE ✓ (initials)

[initials]

Southern General Hospital • Victoria Infirmary • Mansionhouse Unit • Mearnskirch House

SCH402 Cat. No. 0368233

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14-JAN-2004 WED 22:48

G. E. M. S.

FAX NO. 01416166201

P. 01/01

Call No:	1092069	Date:	14 Jan 2004	NHS 24 No:	631417
Patients Name:	Frances McGowan	D.O.B. Age	19/01/1969 34 Y	Callers Name	Francis
Address Today:	0/2 56 Pinmore Street Nitshill Glasgow	Home Address if different	0/2 56 Pinmore Street Nitshill Glasgow		
Post Code:	G53 7PU	Post Code:	G53 7PU		
Phone Number	(0141) 881 9315	Call Type	No action required-Self		
Name of GP:	Siddiqui KMW	Time Call Received at NHS 24:	20:08		
Surgery	418 Pollok Health Centre	Time Details Received at GEMS:	20:25		
Practice Number	418	Time Patient Arrived:			
Fax Number	0141 531 6883	Consultation Start time:			
Speed Dial	013V	Consultation End time:			
Dispatched To	ADVISED CALLS				
Clinical Information					
<p>Clinical summary created: 20-Apr-2001 3-4 MONTHS PREGNANT. HEADACHES INTERMITTANTLY OVER PAST FEW DAYS AND WANTED TO TAKE COCODAMOL. ADVISED TO STICK WITH PARACETAMOL ONLY AND MENTION HER HEADACHES AT HER ANTE NATAL CHECK ON FRIDAY. SATISFIED WITH INFORMATION</p>					
BP	/	Pulse	Temp:	°c	Allergies
Clinicians Notes					
Referral:	Seen by Dr:	Rota No:	Nurse:		

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REQUEST FOR A PREGNANCY TEST Date 24/11/13

Patient's Name Frances Mignola
 Address 56 Pinner Rd ST

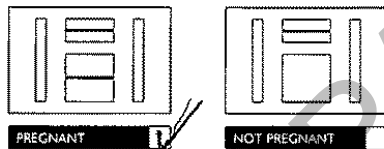
 Number of days your period is overdue 2 Day?

Distributors: Top Copy: Patient 2nd Copy: Pharmacist

Name of Doctor Dr Sadique
 Address PHC

PREGNANCY TEST REPORT

The urine specimen provided was tested for hCG using Clearview HCG II.
 (Batch No: _____)
 The specimen was found to contain levels of hCG which would indicate that the patient is:



For technical enquiries phone 0990 134952.
 To reorder phone FREE on 0800 267 000 or call your local rep.
 Clearview is a trademark of Unipath Limited. Bedford MK44 3 76

TO THE DOCTOR

Clearview HCG II can detect levels of 25mIU hCG and above in urine and is suitable for use from the first day of the missed period. Clearview HCG II has been shown to be 99% accurate in laboratory tests.

TO THE PATIENT

If the result of your test is positive, it is recommended that you consult your doctor to begin ante-natal care. If the result is negative and your period is still overdue, we recommend retesting in a few days time. If the result is still negative, it is advisable to see your doctor to investigate the reason.

Pharmacy Stamp & Signature

AL

PARKINSON
 (Paisley) 77
 24 04
 403 Mid ... Hume
 asgo... 53 7BN
 0141 81 2103

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Southern General Hospital
1345 Govan Rd
Glasgow G51 4TF
Accident & Emergency Dept
Phone (0141) 201 1456

DR KHAJA KMW SIDDIQUI
FOLLOK HEALTH CENTRE
GLASGOW
G53 6EQ
Tel : 0141 880 8899

Dear Dr KHAJA KMW SIDDIQUI

Your Patient Name : FRANCES MCGOWAN
DOB : 19/01/69
Address : 56 PINMORE ST

GLASGOW
G53 7PU

Consultant : MR MALCOLM W G GORDON

Account # : AE0013232/03 Unit # : SG00442792 CHI # : 1901696308

Attended at : 1940 on 21/04/03
Left A&E at : 2105 on 21/04/03

Reason for Visit : LEFT ARM PAIN AND NUMBNESS

Diagnosis : : LEFT : Forearm,

Investigations :

Treatment :

Prescribed Drugs : DRUG DIRECTIONS
Ibuprofen 600mg (8Hrly) 7 Days

Tetanus Given:

Additional Notes:
PROB TRAPPED L ULNAR NERVE LAST NIGHT WITH RESIDUAL MYALGIA TODAY.
ANXIOUS BUT REASSURED BY NORMAL EXAM, OBS, EM AND ECG
Follow Up : HOME

Yours Sincerely,
LESLEY LAUGHTON

If you require any further information please quote this attendance number: AE0013232/03

NOTES

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Glasgow Emergency Medical Services (Centre Name)		
Call No: 891054	Date: 09/03/2003 03:09:46	Time of Call: 34 X
Patient's Name: McGowan Frances		D.O.B. Age: 19/01/1969 34
Address Today: 0/2 56 Pinmore Street Nitshill Glasgow G53 7PU		Home Address if different: Nitshill Glasgow G53 7PU
Post Code: [REDACTED]		Post Code: [REDACTED]
Phone Number Today: [REDACTED]		Home Phone if different: 164498
Callers Name:		Relationship to patient:
Name of GP: KMW Siddiqui	Practice No: 418	
Surgery: 418 Pollok Health Centre	Cipher No: G0274 7	
Address:	Fax No: 0141 531 6883	
	Speed Dial: 013V	
Call Type: 3PCT	Time Passed:	
Receptionist's Name: IIF	Time Arrived: 03.40	Time complete: 04.00
Patient's Complaint:		
Comments: PCEC+TRANSPORT. 34YR OLD LADY WITH SUDDEN ONSET RIB PAIN RADIATING ROUND TO BACK. PAIN CATCHES BREATH ON INSPIRATION. NOT CLEAR EXACTLY WHERE PAIN IS LOCATED. NO URINARY SYMPTOMS, TEMP OR FEVER. NIL MEDS. PMH THRUSH, ANAEMIA. NIL ALLERGIES...		
BP: /	PR: per min	Temp:
Clinical Notes		
<p>ovt work A/R rancor 2 Batches</p> <p>● Post case has No Asthma</p> <p>No A/R Smoked No COPD</p> <p>Rx No Int Jury</p> <p>No Diabetes</p> <p>Low on potassium</p>		
Treatment: Downside pain		
<p>Blister going for (30) (12)</p> <p>Common for (32)</p>		
Diagnosis Code:		
Referral:		
Seen by Dr: McLEAN	Rota No: 331	Nurse:

med @ . P. 01 FAX NO. 09-MAR-03 SUN 04:14

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14-JAN-2003 TUE 02:01

FAX NO.

P. 01/01

Glasgow Emergency Medical Services (Centre Name)

Call No: 858894	Date: 14/01/2003 00:58:01	Time of Call: 33 Y
Patient's Name: McGowan Frances		D.O.B. Age: 19/01/1969 33 Y
Address Today: 0/2 56 Pinmore Street Nitshill Glasgow G53 7PU		Home Address if different: Nitshill Glasgow G53 7PU
Post Code: G53 7PU	Post Code:	
Phone Number Today: 44 0141 876 0257 113726	Home Phone If different:	
Callers Name:		Relationship to patient:
Name of GP: RMW Siddiqui	Practice No: 418	
Surgery: 418 Pollok Health Centre	Cipher No: G0274 7	
Address:	Fax No: 0141 531 6808	
	Speed Dial: 013V	
Call Type: OHRA	Time Passed:	
Receptionist's Name: IIF	Time Arrived:	Time complete:
Patient's Complaint: Comments: SUGGEST SPEAK TO DOCTOR WITHIN ONE HOUR. CALLED TO-NIGHT. VERY ANXIOUS AND TEARFUL AT TIMES. RIGHT SIDED LUMBAR AND ABDOMINAL PAIN THIS AM. ATTENDED GP. URINE TESTED NEGATIVE FOR UTI. AWAITING GYN REVIEW FOR RECURRENT THRUSH AND ANAEMIA. FEELING RUN DOWN AND TIRED WITH THIS. EXPERIENCING ANX-		
BP: /	PR: per min	Temp:
Clinical Notes Pain in side groin since this morning. GP tested urine (diagnosed -ve), sent to hospital - blood all fine urine normal. Home sent home reassured, but she thought it was a blood clot. Pain went all away in hospital, fell asleep tonight woke up a fighter in feet + leg. going to go to Mrs tonight. Reassured.		
Treatment:		
Diagnosis Code:		
Referral:		
Seen by Dr: FLACNELL	Rota No: 329	Nurse:

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THE RICHMOND FELLOWSHIP SCOTLAND

Pollok Primary Care Mental Health Project, Room 8, Pollok Health Centre,
21 Cowglen Road, Glasgow G53 6EW Tel: 0141 531 6854

Date 04.07.07

Dear Dr Siddequi,

With reference to your referral.

Name Frances Mc Gowan

Address 56 Primrose St, G53

D.O.B 19.1.69

We wish to inform you that the above named attended this service for 3 appointments and has not responded to any further. Therefore we must assume he/she does not wish to use the service at this time. However, we have suggested that he/she can contact us at any time should this be necessary.

Yours sincerely, *[Signature]*

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Headquarters and Registered Office: 26 Park Circus, Glasgow, G3 6AP Tel: 0141 353 4050

P13
9/99



INVESTOR IN PEOPLE

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26-FEB-2002 TUE 19:27

FAX NO.

P. 01

Glasgow Emergency Medical Services (Centre Name)

Call No: 637930	Date: 26/02/2002 18:12:02	Time of Call:
Patient's Name: MCGOWAN FRANCES	D.O.B Age: 19/01/1969	33 Y
Address Today: 56 Pinmore Street 0/2 Glasgow Glasgow G53 7PU	Home Address if different:	
Post Code:	Post Code:	
Phone Number Today:	Home Phone if different:	
Special Directions to Today's address:		
Callers Name:		Relationship to patient:
Name of GP: KMW Siddiqui	Practice No: 418	
Surgery: 418 Pollok Health Centre	Cipher No: G0274 7	
Address:	Fax No: 0141 531 6808	
	Speed Dial: 013V	
Call Type: OT	Time Passed:	
Receptionist's Name: MAYN	Time Arrived: 19.01	Time complete: 19.11
Patient's Complaint: ? Tonsillitis.		
BP: /	PR: per min	Temp: 36.8
Clinical Notes as above states throat swollen and painful ++ ears also painful - anxious as has driving test mane states feels she needs an antibiotic vague re analgesia taken <i>PH</i> <i>cough bottle</i> <i>Allergy</i> <i>#SCEPTIN</i> <i>Tonsillitis</i> <i>seen</i> Treatment: continue paracetamol + pen V 500g B.N x 20 Diagnosis Code: Referral: Seen by Dr: <i>Plumley</i> Rota No: 125 Nurse: <i>A. McCreary</i>		

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SOUTH GLASGOW UNIVERSITY HOSPITALS NHS TRUST
DIRECTORATE OF OBSTETRICS, GYNAECOLOGY & PAEDIATRICS
COLPOSCOPY CLINIC

Dr Robert J S Hawthorn (Consultant)
Dr Pyone Myint
Dr A Hassan
Dr Catherine Leven

1345 Govan Road
 Glasgow
 G51 4TF
 ☎ 0141 201 2323
 Fax 0141 201 2994
 (Colposcopy secretary – Margaret)

PM/MG/442792

25/01/01

Dr Siddiqui
 Pollok Health Centre
 21 Cowglen Road
 GLASGOW
 G53 6EW

Dear Dr Siddiqui

Frances McGowan – DoB 19.1.69.
56 Pinmore Street, Glasgow G53 7PY

Many thanks for referring the above patient with 3 unsatisfactory smears for colposcopy. She did not offer any gynaecological symptoms.

Colposcopy was satisfactory. An ectopy was noted with some contact bleeding. A repeat cytology was reported as negative.

No further appointment has been arranged. Please follow her up accordingly.

With Good Wishes

Yours sincerely


 Pyone Myint
 Clinical Assistant
 For Dr R J S Hawthorn



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Hospital use only	Clinic	Day Data	Time	Hospital No.	GP112
REQUEST FOR OUT-PATIENT CONSULTATION THE INFORMATION IN THIS SECTION MUST BE COMPLETED					Appointment Category Routine <input type="checkbox"/> Soon <input type="checkbox"/> Urgent <input type="checkbox"/>
Hospital	Southern General		Date	20.11.00	
Please arrange for the patient to attend the			Colposcopy		
Patients Name	McGowan		clinic of Dr / Mr		
First Name	Frances		Maiden Surname		
Address	56 Pinmore Street		Single / Married / Widowed /		
	Glasgow		Date of Birth 19.1.69		
Postal	G53 7PU		Patients Occupation		
Contact telephons					
Has the patient attended hospital before	Yes		If "yes" please		
Name of Hospital	SGH		Hospital No. 00442792		
Year of	1999		If the patients name and/or address has/have changed since then please give details:		
Can the patient attend at short notice?			Name, Address and Telephone number of MEDICAL / DENTAL PRACTITIONER		
If YES, minimum notice required			DR K.M.W. SIDDIQUI (52171) POLLOK HEALTH CENTRE 21 COWGLEN ROAD GLASGOW G53 6EQ TEL: 0141-531 6880 FAX: 0141-531 6808 Please use rubber stamp		

I would be grateful for your opinion and advice on the above named patient. A brief outline history, symptoms and signs is given below:

This lady's recent cervical cytology was unsatisfactory -- a copy of the lab report is enclosed for your information.

I would be grateful if you could see her.

Yours sincerely

Diagnosis / provisional diagnosis:

Present drug treatment and potential special hazards:

X-ray (women of childbearing age). Date of first day of L.M.P.

Relevant X-rays available from:

No. (if known)

Signature

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YORKHILL NHS TRUST

West of Scotland Regional
Genetics Service

Duncan Guthrie Institute of Medical Genetics
Yorkhill
Glasgow G3 8SJ

Telephone: 0141 201 0365
Fax: 0141 357 4277

Professor JM Connor
Dr H Rosemarie Davidson
Dr John Tolmie (Consultant in Administrative Charge)
Dr Margo L Whiteford
Dr Douglas E Wilcox

Please quote reference in all correspondence

CL/CRS/18493

20 June 2000

Dr Siddiqui
Pollock Health Centre
21 Cowglen Road
Glasgow
G53 6EQ



Dear Dr Siddiqui

Re: Frances McGowan (dob 19.1.69) Our Ref: 18493
56 Pinnmore Street, Glasgow.

I reviewed this lady recently at the genetic clinic to discuss her family history of amyloidosis, which affects her father and several of his relatives. The condition is autosomal dominant, and she is therefore at 50% risk of having inherited it.

We have recently identified a mutation in the fibrinogen alpha chain (Glu526Val) in the family and Frances attended to discuss being tested for the mutation. There are four families in the literature with this mutation and more recently the National Amyloid Unit have identified the mutation in 6 of 46 patients with atypical renal AL amyloid, suggesting it is more common than previously thought.

Patients tend to present with nephrotic syndrome or hypertension in their 40s to 60s, and the mean time from presentation to end stage renal failure is approximately 5 years. There is also splenic deposition of amyloid but functional hyposplenism, is not described. There are at least 2 individuals in the literature with hepatic involvement, with liver failure, but none of the affected individuals in this family are known to have liver involvement. The penetrance is incomplete, with the oldest asymptomatic mutation carrier being 99 years old, but there is insufficient data to estimate the level of penetrance.

Some of the family have attended the National Amyloid Unit, based at the Royal Free Hospital in London. If a mutation was identified they would be keen to meet Frances and arrange SAP scanning. They would currently recommend 3 monthly renal screening from age 40 for at risk family members, taking the form of a blood pressure measurement, urinalysis for protein and measurement of serum creatinine. My understanding is that they recommend 3 monthly checks because, once amyloid deposition begins, it increases exponentially.

We discussed the advantages and disadvantages of mutation testing as outlined in the enclosed letter. Frances told me that she tends to worry about her health and was uncertain how she would cope with a positive result. She would like to discuss the issues with you and I have suggested she make an appointment to do so. If she would like to proceed with mutation testing I would be happy to see her again and obtain a blood sample, or alternatively if you were able to forward me 5mls blood in EDTA, I could arrange mutation analysis.

If you have any questions please do not hesitate to contact me. Many thanks for your help.

Louise Irvine - Macmillan Cancer Genetics Nurse
Diana Oles - Neurofibromatosis Family Support Officer
Brian Smith - Genetic Associate

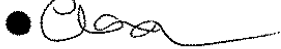
Margaretha Van Mourik - Senior Genetics Nurse
Veronica Walters - Muscular Dystrophy Group
Family Care Officer

YH002 HALCYON

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Best wishes.

Yours sincerely



Dr Cheryl Longman
Specialist Registrar in Medical Genetics

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West Glasgow Hospitals

Western Infirmary
Dumbarton Road
Glasgow G11 6NT

Our ref: KMCD/BK/1206783

Direct Line: 0141 211 2178
Fax No: 0141 211 1711

Please reply to: THE RENAL UNIT

Dictated: 29/03/00
Typed: 29/03/00

Dr Siddiqui
Pollock Health Centre
21 Cowglen Road
GLASGOW
G53 6EQ

Dear Dr Siddiqui

RE: FRANCES MCGOWAN, DOB 19/01/69
56 PINMORE STREET, GLASGOW

Diagnosis: Family History of Hereditary Renal Amyloidosis

This lady was seen recently as a new patient at the Renal Clinic at the Western Infirmary. It had become clear recently that there was a family history of amyloidosis causing renal failure and as a consequence she was offered screening. Her father has renal failure due to this and has been on dialysis for a number of years. In addition there are other family members in her fathers generation with evidence of the condition. This form of amyloidosis is very rare and has been described in only a handful of families worldwide. The mode of inheritance is autosomal dominant with variable penetrance and onset of renal failure is generally in middle age.

Her blood pressure at Clinic was 94/62 and urinalysis was completely normal. She has a history of irritable bowel syndrome, tonsillitis and viral meningitis at the age of 21. At present she is on no medication. She has 2 daughters aged 7 and 3.

Her renal function is normal with creatinine 75 and other biochemistry is also normal. An incidental finding was of anaemia with haemoglobin 9.3. MCV and MCH were both reduced and this would be in keeping with iron deficiency. I assume that the most likely cause is menstrual although she offered no symptoms. I will write and ask her to attend your Surgery to discuss this further and would be grateful if you could initiate a course of iron therapy.

We have recently identified the genetic mutation in the family as a substitution for valine at codon 526 of the fibrinogen α -alpha gene. Although she has no clinical features of renal failure it is not possible on this basis to say whether she has inherited the gene. However she is keen for definitive genetic testing and I will refer her to the genetics department at the Duncan Guthrie Institute for counselling and testing.

Cont...

WS

Incorporating the Western Infirmary, Gartnavel General Hospital,
The Glasgow Homoeopathic Hospital, Drumchapel Hospital and Blawarthill Hospital



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West Glasgow Hospitals

Frances McGowan 1206783

I have not arranged further follow up at this Clinic at the moment and if genetic testing is negative she need not return. However if she has in fact inherited the gene we would plan to review her at yearly intervals.

Yours sincerely

K. McDonald
Kenneth McDonald
Research Fellow

CC Dr A G Jardine, Consultant Physician, Renal Unit, Western Infirmary
Dr C Longman, Specialist Registrar, Duncan Guthrie Institute, Yorkhill

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The Glasgow Homoeopathic Hospital, Drumchapel Hospital and Blawarthill Hospital



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Department of General Surgery



**Southern General Hospital
NHS Trust**

1345 Govan Road Glasgow G51 4TF
Tel 0141-201 1100 Fax 0141-201 2999

Consultants : Mr JR Anderson
Mr JC Ferguson
Mr GC MacBain
Mr GT Sunderland

GS/SB

DR K M W SIDDIQUI
Pollok Health Centre
21 Cowglen Road
Glasgow
G53 6eq

26 Mar 1999

Dear Dr K M W Siddiqui

Re: Frances McGowan, dob: 19/01/69 UN: 00442792
56 Pinmore Street , Glasgow

Admitted: 26/02/99 Discharged: 26/02/99

Diagnosis:

Varicose Veins # Tgx454.90 #

Operation:

High Ligation # Ogxl85.10 #
Stripping Of Long Saphenous Vein # Ogxl87.10 #
Stab Avulsions # Ogxl87.40 #

Consultant in Charge: Mr G Sunderland

The above patient was admitted to the Bon Secours as part
of our waiting list initiative. No routine follow-up has been
arranged.

Yours sincerely


Mr G Sunderland
Consultant Surgeon

SGH 384
0368583

(Incorporating Cowglen Hospital and the West of Scotland Mobility and Rehabilitation Centre)
Continuing the Tradition of Developing NHS Services for the Community

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BON SECOURS
HOSPITAL • GLASGOW

BON SECOURS HOSPITAL 36 MANSIONHOUSE ROAD GLASGOW G41 3DW TEL 0141 632 9231 FAX 0141 626 5066

Dr Siddiqui
Pollok Health Centre
21 Cowglen Road
Glasgow

Date: 4.3.99

Dear Dr Siddiqui

Miss Frances McGowan, 56 Pinmore Street, Nitshill, Glasgow, G53 7PU.

I am writing to inform you that your patient was admitted to Bon Secours by Mr Sunderland for the following procedure:

Bitarant high ligation & stripping a Stabi

On discharge Miss McGowan was prescribed the following medication:

- 1.
- 2.
- 3.
- 4.

Mr Sunderland will be writing to you in more detail later.

Yours sincerely

[Signature]
Resident Medical Officer

Bon Secours Health System is a Charitable Company Limited Guarantee
Registered in England No. 2781516 Registered Office: 166 Westbourne Grove London W11 2RW Registered Charity Number 1015898

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ACCIDENT & EMERGENCY DEPT.
SOUTHERN GENERAL HOSPITAL NHS TRUST
GLASGOW G51 4TF
TEL. DIRECT: 0141 201 1456/8
SWITCHBOARD: 0141 201 1100
FAX: 0141 201 2997

AE No. 99/4813

SURNAME McGOWAN FORENAMES FRANCES

ADDRESS 56 PINMORE ST.

POST CODE G53 7AL TELEPHONE No. 876-0257 DATE OF BIRTH 19/1/69 SEX F MARITAL STATUS 5 RELIGION

NEXT OF KIN NAME [REDACTED] RELATIONSHIP [REDACTED] FAMILY DOCTOR SURNAME SIDDONS INITIALS

ADDRESS 56 PINMORE ST. ADDRESS 56 PINMORE ST.

POST CODE G53 TELEPHONE No. [REDACTED] POST CODE TELEPHONE No.

ACCIDENT/EMERGENCY DATE OF ATTENDANCE 13/2/99 PREVIOUS ATTENDANCE AT THIS HOSPITAL YES/NO NO IN/OUT PATIENT BOH YEAR

TIME OF ATTENDANCE 2.00 pm MODE OF TRANSPORT
AMBULANCE _____ PUBLIC _____ OWN _____ NONE _____

DATE OF INJURY OR ILLNESS 13/2/99 TIME OF INJURY 12.45 pm TYPE (CODE) SOURCE OF REFERRAL
GP A&E _____ GP SPEC. 999
SELF _____ POLICE _____ OTHER (CODE) _____

ROAD TRAFFIC ACCIDENT PLACE DETAILS
FSP _____ DRIVER _____ M/C DRIVER _____ OTHER _____
BSP _____ PED. _____ M/C PASSENGER _____

REASON FOR ATTENDANCE (B) FOOT INJURY

TO BE COMPLETED BY MEDICAL OFFICER AFTER SEEING PATIENT	TIME
Dear Doctor, The above-named patient attended the Accident & Emergency Department today.	TRIAGE <u>1407.</u>
Diagnosis <u>SEVERE BRUISING (R) FOOT</u>	DOCTOR <u>1505</u>
	NURSE
	LEFT DEPT. <u>1550</u>

X-Ray film/ ECG shows NO OBVIOUS X.

Treatment given ELEVATE/EXERCISE
GRADUALLY MOBILISE
TUBICRIP

Drugs 5 days supply of IBUPROFEN 600mg has been given.

Tetanus Prophylaxis has/has not been administered. TT Course _____ TT Booster _____ HATI _____ (Please Tick)

Would you please arrange

DISCHARGE CODES: Please Circle									
1. Admission	3. Refer to G.P.	5. Died	7. Irregular Discharge						
2. Discharge	4. Transfer to other hospital (see below)	6. Refer to O.P. Clinic (see below)	8. D.O.A.						
Ward No. (if admitted)	Transfer to Hospital	Consultant (if admitted)							
Follow Up	Not arranged	Arranged			To be arranged				
Clinic Referred to	AE	Head Injury	Fracture	Pop Check	Ortho	Medical	Surgical	ENT	Others Specify
Medical Officers Name (in Block Letters)	Signature of Medical Officer								
Cons <u>SR</u> <u>DR PHIL MUNRO</u>	Reg	SHO	JHO	Clin Asst	Staff Grade (please circle)				

SGH 459 043155

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Department of General Surgery



**Southern General Hospital
NHS Trust**

1345 Govan Road Glasgow G51 4TF
Tel 0141-201 1100 Fax 0141-201 2999

GW/SB/442792

Long Range Page: 01893 929060
Direct Line: 0141 201 1737

**GLASGOW SOUTH VASCULAR SURGERY
MR G WELCH**

Dict: 2 November 1998
Type: 2 November 1998

Dr Siddiqui
Pollok Health Centre
21 Cowglen Road
GLASGOW
G53 6EW

Dear Dr Siddiqui

RE: FRANCES MCGOWAN, 56 PINMORE STREET, GLASGOW, DOB 19.1.69

Thank you for your letter regarding this lady who has bilateral varicose veins arising from the long saphenous vein in the thighs. I have put her name on the waiting list to have bilateral high ligation thigh stripping and multiple stab avulsions.

Kind regards

**G H WELCH MD FRCS
CONSULTANT VASCULAR SURGEON**

SGH 384
0368593

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TEL. DIRECT: 0141 201 1456/8
SWITCHBOARD: 0141 201 1100
FAX: 0141 201 2987

AE No. 984811

13 -

SURNAME MC CONAN		FORENAMES FRANCIS	
ADDRESS 56 PINMORE ST			
POST CODE G53	TELEPHONE No.	DATE OF BIRTH 19.1.69	SEX F
		MARITAL STATUS S	RELIGION RC
NEXT OF KIN NAME [REDACTED]		RELATIONSHIP (S)	FAMILY DOCTOR SURNAME SIDDQUI
ADDRESS S/A		ADDRESS P. HC	
POST CODE	TELEPHONE No. DAD 881 9315	POST CODE	TELEPHONE No.
ACCIDENT/EMERGENCY DATE OF ATTENDANCE 14.2.98	PREVIOUS ATTENDANCE AT THIS HOSPITAL YES/NO YES	IN/OUT PATIENT	YEAR
TIME OF ATTENDANCE 9.05	MODE OF TRANSPORT AMBULANCE _____ PUBLIC _____ OWN _____ NONE _____		
DATE OF INJURY OR ILLNESS	TIME OF INJURY	TYPE (CODE)	SOURCE OF REFERRAL GP A&E _____ GP SPEC _____ 999 _____ SELF _____ POLICE _____ OTHER (CODE) _____
ROAD TRAFFIC ACCIDENT PLACE		DETAILS BSP _____ DRIVER _____ M/C DRIVER _____ OTHER _____ BSP _____ PED. _____ M/C PASSENGER _____	
REASON FOR ATTENDANCE GENERALLY UNWELL			TIME
TO BE COMPLETED BY MEDICAL OFFICER AFTER SEEING PATIENT			TRIAGE 2105
Dear Doctor, The above-named patient attended the Accident & Emergency Department today.			DOCTOR 2115
Diagnosis TONSILLITIS			NURSE 2140
			LEFT DEPT. 2145
X-Ray film / ECG shows _____			
Treatment given AMOXICILLIN			
Drugs _____ days supply of _____ (tw) has been given.			
Tetanus Prophylaxis has/had not been administered. TT Course _____ TT Booster _____ HATI _____ (Please Tick)			
Would you please arrange			
DISCHARGE CODES: Please Circle 1. Admission 3. Refer to G.P. 5. Died 7. Irregular Discharge 2. Discharge 4. Transfer to other hospital (see below) 6. Refer to D.P. Clinic (see below) 8. D.O.A.			
Ward No. (if admitted)		Transfer to Hospital	
		Consultant (if admitted)	
Follow Up		To be arranged	
Not arranged _____		Arranged _____	
Clinic Referred to	AE	Hand Injury	Fracture
			Pop Check
			Ortho
			Medical
			Surgical
			ENT
			Others Specify
Medical Officers Name (in Block Letters) M. Dour...			Signature of Medical Officer [Signature]
SR	Reg	(SNO)	JHO Clin Assat Staff Grade (please circle)

NHS Confidential: Personal data about a patient

13-FEB-98 FRI 23:41

CARDONALD CLINIC GPEC

FAX NO. 01412116687

P.01

G.P. EMERGENCY MEDICAL SERVICE (GLASGOW)

418

CENTRE: <u>Cardonald Clinic</u>		902747	
NAME OF GP	<u>DR SLODOWI</u>		
GP ADDRESS	<u>P. H. C</u>		FAX NO. <u>20</u>
PATIENT NAME	<u>Frances M-Gowan</u>	DOB <u>19/01/69</u>	
ADDRESS TODAY	<u>56 Pinnore St</u>		POSTCODE
<u>Outshill</u>			
HOME ADDRESS (IF DIFFERENT)			
SPECIAL DIRECTIONS	<u>M10 0/2</u>		
CALLER'S NAME		RELATIONSHIP	<u>Mother-in-law</u>
TEL. NO.	<u>880-6869</u>		
COMPLAINS OF	<u>Vomiting / sore head</u> <u>body sore</u> <u>No panic attacks</u>		
ACTION	<input type="checkbox"/> URGENT VISIT <input type="checkbox"/> NON-URGENT VISIT <input type="checkbox"/> ATTEND: OWN TRANSPORT <input type="checkbox"/> ATTEND: PTS TRANSPORT <input checked="" type="checkbox"/> AMBULANCE <input type="checkbox"/> ADVICE <input type="checkbox"/>		
DATE	<u>13/02/1998</u>	RECEPTIONIST NAME	<u>Ramona</u>
TIME PHONED	<u>22-10</u>	TIME PASSED (FOR VISIT/PTS)	
TIME AT CENTRE	<u>23-10</u>	TIME SEEN	
CLINICAL NOTES	<u>23:20</u> <u>Temp - 37°</u> <u>Pulse - 100</u> <u>OLE Anxious + functional settling</u> <u>Chest - emphysema</u> <u>Abdom - hyper iral stress</u> <u>Throat -</u> <u>Stomach sy 710</u> <u>for nausea x 10</u>		
TREATMENT			
REFERRAL			
CATEGORY CODE			
SEEN BY DR	<u>Amma</u>	ROTA NO.	<u>127</u>
		NURSE	<u>S. Sanyal</u>

NV
MS

N.B. PLEASE ENSURE THAT ALL AREAS OF THIS FORM ARE COMPLETED, INCLUDING NEW SECTION FOR RECEPTIONIST NAME AND ALL TIMES (BASED ON THE 24 HOUR CLOCK).

13-FEB-98 FRI 23:44

01412116687

P.01

m.w.g.

NHS Confidential: Personal data about a patient

06-OCT-97 MON 22:55

CARDONALD CLINIC GPEC

FAX NO. 01412116687

P.01

G.P. EMERGENCY MEDICAL SERVICE (GLASGOW)

CENTRE: Cardonald Clinic

NAME OF GP: Dr Siddique 608 11-7
 GP ADDRESS: Pollok H.C. FAX NO. 70

PATIENT NAME: Frances McEwan, DOB: 1/1/1969
 ADDRESS TODAY: 25 Root Place, Pollok, POSTCODE: G55

HOME ADDRESS (IF DIFFERENT): 56 Purvosa Street

SPECIAL DIRECTIONS: n/a.

CALLER'S NAME: [REDACTED] RELATIONSHIP: mother

TEL. NO. [REDACTED]

COMPLAINS OF: Severe Headaches, nausea and vision blurred.

ACTION: URGENT VISIT NON-URGENT VISIT ATTEND: OWN TRANSPORT
 ATTEND: P.T.S TRANSPORT AMBULANCE ADVICE

DATE: 6/10/1997 RECEPTIONIST NAME: Ramona

TIME PHONED: 20:30pm TIME PASSED (FOR VISIT/PTS):
 TIME AT CENTRE: TIME SEEN:

CLINICAL NOTES: D.N.A.

TREATMENT:
 REFERRAL:
 CATEGORY CODE:
 SEEN BY DR: ROTA NO. NURSE:

N.B. PLEASE ENSURE THAT ALL AREAS OF THIS FORM ARE COMPLETED, INCLUDING NEW SECTION FOR RECEPTIONIST NAME AND ALL TIMES (BASED ON THE 24 HOUR CLOCK).

6-OCT-97 MON 22:58

01412116687

P.01

mmG

NHS Confidential: Personal data about a patient

29-SEP-97 MON 03:54

VICTORIA G. E. H. S.

FAX NO. 01412016507

P. 01

G.P. EMERGENCY MEDICAL SERVICE (GLASGOW)

CENTRE: Victoria Infirmary 418

NAME OF GP	DR SIDDIQUI		G0244 M.
GP ADDRESS	Pollok H.C.		
	FAX NO.	013	
PATIENT NAME	FRANCES M ^{rs} GOWAN	DOB	9/1/69
ADDRESS TODAY	262 GLADSMIRE RD HILWINGTON		
HOME ADDRESS (IF DIFFERENT)	54 PINMORE ST NITSHILL		
SPECIAL DIRECTIONS			
CALLER'S NAME		RELATIONSHIP	
TEL. NO.			
COMPLAINS OF	HOT SWATS - PANIC ATTACK? A		
ACTION	URGENT VISIT <input type="checkbox"/>	NON-URGENT VISIT <input type="checkbox"/>	ATTEND: OWN TRANSPORT <input type="checkbox"/>
	ATTEND: PTS TRANSPORT <input type="checkbox"/>	AMBULANCE <input type="checkbox"/>	ADVICE <input checked="" type="checkbox"/>
DATE	29/9/1997	RECEPTIONIST NAME	MARG
TIME PHONED	8:38'	TIME PASSED (FOR VISIT/PTS)	
TIME AT CENTRE		TIME SEEN	
CLINICAL NOTES	<p>panic attack. husband in hosp, she nauses for 4 hr Discharge! + reassured</p>		
TREATMENT			
REFERRAL			
CATEGORY CODE			
SEEN BY DR	(A)	ROTA NO.	2
		NURSE	

PLEASE ENSURE THAT ALL AREAS OF THIS FORM ARE COMPLETED, INCLUDING

NHS Confidential: Personal data about a patient

Department of Obstetrics & Gynaecology

*Consultants:**Dr Wm C M K Naismith**Dr Matt J Carty**Dr Valerie D Hood**Dr Robert J S Hawthorn**Dr Ian N Ramsay*

**Southern General Hospital
NHS Trust**

1345 Govan Road Glasgow G51 4TF
Tel 0141-201 1100 Fax 0141-201 2994

SPIAL/442792

14 October 1996

Dr K M W Siddiqui
Pollok Health Centre
21 Cowglen Road
GLASGOW G53

Dear Dr Siddiqui

**FRANCES MCGOWAN - DATE OF BIRTH 19 01 69
56 PINMORE STREET, GLASGOW G53 7PU**

This lady had a normal delivery of a 4.44Kg girl on the 7th of October 1996. The pregnancy had been essentially uncomplicated but glycosuria was noticed on two occasions and the baby was felt to be above average size clinically but not ultrasonically. She went into labour at term and progressed quickly to a normal delivery, the baby being born in good condition and there were no special problems in the puerperium. She is due to have a smear at her post natal visit and if she has any further pregnancies it would probably be worthwhile screening her for gestational diabetes at about 28 weeks.

Yours sincerely

DR STEWART PRINGLE
REGISTRAR TO DR Wm NAISMITH

SGH 393
0366386

(Incorporating Cowglen Hospital and the West of Scotland Mobility and Rehabilitation Centre)

Continuing the Tradition of Developing NHS Services for the Community

NHS Confidential: Personal data about a patient

Department of Obstetrics & Gynaecology**Consultants:****Dr Wm C M K Naismith****Dr Matt J Carty****Dr Valerie D Hood****Dr Robert J S Hawthorn****Dr Ian N Ramsay**

Southern General Hospital
NHS Trust

1345 Govan Road Glasgow G51 4TF
Tel 0141-201 1100 Fax 0141-201 2994

WCMKN/AL/442792

4 March 1996

Dr K M W Siddiqui
Pollok Health Centre
21 Cowglen Road
GLASGOW G53

Dear Dr Siddiqui

FRANCES MCGOWAN - DATE OF BIRTH 19 01 69
56 PINMORE STREET, GLASGOW G53 7PU

Thank you for referring this 27 year old para 1+1 who appeared to be well when seen here for her first visit on the 1st of March 1996 at 9+ weeks gestation from ultrasound examination (LMP unclear).

We will be pleased to share the antenatal care.

Yours sincerely

WILLIAM C M K NAISMITH
CONSULTANT OBSTETRICIAN AND GYNAECOLOGIST

EDD	30 September 1996
Blood Pressure	115/80
Haemoglobin	105gms/l
Blood Group	B Rhesus Positive

PS She will attend you for her Serum AFP in due course.

SGH 393
0368386

(Incorporating Cowglen Hospital and the West of Scotland Mobility and Rehabilitation Centre)
Continuing the Tradition of Developing NHS Services for the Community

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Request for a Pregnancy Test

Distribution: 1st Copy: Patient
2nd Copy: Pharmacist
3rd Copy: Patient's Doctor



Patient's Name E. M. Gowan
 Address 56 Pimlico St.
 Signature Frances McGowan
 Number of days your period is overdue _____

Name of Doctor Siddique
 Address P.H.C.

Please complete this section if you wish a copy of the result for presentation to your Doctor

Pregnancy Test Report

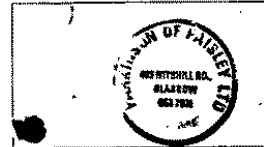
The specimen provided was tested for β HCG in the urine with the Clearview HCG pregnancy test system. The specimen was found to be:

Positive  Negative 

Clearview HCG can detect a level of 50 mIU/ml HCG (or greater) in urine, and can be used from the first day of the missed period. Clearview HCG has been shown to be 99% accurate in laboratory tests. If the results of your test are positive, it is recommended that you consult your doctor to begin ante-natal care. If the result is negative and your period is still overdue, it may be advisable to see your doctor to investigate the reason.

Pharmacist's Signature M.C. Mc...

PHARMACY STAMP



For further information, telephone Unipath Customer Services: (01234) 321656

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SOUTHERN GENERAL HOSPITAL
DIVISION OF OBSTETRICS AND GYNAECOLOGY

Consultants:
Dr T Edgar Torbet
Dr James A McGarry
Dr Wm C M K Naismith
Dr Matt J Carty
Dr Valerie D Hood

1345 Govan Road
Glasgow G51 4TF
Tel: 041-445 2466

Fax No: 425 1741

IAY/AL/442792

21 August 1992

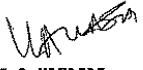
Doctor C B Freer
The Surgery
74 Kyleakin Road
GLASGOW G46

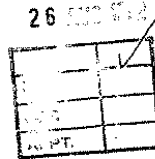
Dear Doctor Freer

FRANCES MCGOWAN - DOB 19.01.69
62 DARVEL STREET, GLASGOW

This patient was admitted from home in spontaneous labour which led to the delivery of a live female infant weighing 4.02Kgs. Unfortunately her third stage was complicated by a retained placenta which was manually removed. Serial ultrasound scan was satisfactory. Because her haemoglobin was low (9.1g/dL) she was discharged on oral iron therapy. She will be reviewed for her post natal examination in 6 weeks time.

Yours sincerely


I A YAKASAI
REGISTRAR



K. M. SIDDIQUI

NHS Confidential: Personal data about a patient

DUTY DOCTOR <u>37</u>		CALL NO.
PATIENT'S NAME & ADDRESS <u>FANCES McLEWAN</u>		AGE <u>24</u>
<u>62 DANVOC ST</u>		DATE <u>10.8.92</u>
<u>NTSKILL GLE</u>		TIME RECEIVED C/R <u>0115</u>
TELEPHONE INFORMATION RECEIVED <u>LWK POST NATOL</u>		TIME PASSED <u>0122</u>
<u>MISSING BLOOD P.V, CLOTS</u>		TIME ARRIVED
HISTORY & EXAMINATION <u>6 days PN: lochia as heavy as period + mucus, passed small piece membrane + blood clot tonight. Reg^d MRPlac o/e Apyrexial</u>		TEMP. <u>36.2</u>
<u>Abdo: fundus indented + anted</u>		PULSE <u>90</u>
DIAGNOSIS <u>Retained membrane (kept by pt)</u>		B.P.
TREATMENT/DISPOSAL <u>D/W SGH obs</u>		PATIENT TO CALL IF NECESSARY
<u>they will review more</u>		TO SURGERY ON
		DAY
		PLEASE REVISIT ON
		DAY
PATIENT'S OWN DOCTOR <u>SIDDIGVI 0274</u>	GENERIC DRUG BATCH/LOT NO.	HOSPITAL ADMISSION ARRANGED

Suprax
cefixime

Healthcall Services Limited, 401 South Row, Central Milton Keynes MK9 2PH

NHS Confidential: Personal data about a patient

GREATER GLASGOW HEALTH BOARD

DR SIDDHANT

SOUTHERN GENERAL HOSPITAL
1345 GOVAN ROAD
GLASGOW G51 4TF
Telephone: 041-445 2466

Dear Dr. 

Your patient: 0442792
MCGOWAN FRANCES
Address: 25 PEAT PL
GLASGOW
with a diag: G53 6SJ G.P. Prac.

Age: Unit No.

19/01/1969 NK was discharged from Ward 40 on 10/5/92

A discharge letter will follow. The patient was discharged on the drug treatment detailed below.
Further duration of treatment from date of discharge is shown in "Continuation of Treatment" column.
A five days supply has/has not been dispensed by the hospital.

→ Passage of membrane 6 days post delivery → some clots in lower pole of uterus on sonar → For antihypertensives & repeat scan 5/2

- Note to the hospital prescriber:
- (a) In the "Continuation of Treatment" column it is important to state the number of days for which treatment should be continued from the date of discharge.
 - (b) If treatment is to be for an indefinite period, mark "INDEFINITE".
 - (c) If treatment is to be intermittent or irregular, give FULL DETAILS in the COMMENTS space below.
 - (d) Mark X in box if child resistant containers are not suitable.
 - (e) Delete N.P. if name of medicine is not required on label.

NP

To the Hospital Pharmacist, please supply the following

Medicine	Form of Preparation e.g. tablets	Dose	Times of Administration			Continuation of Treatment from Date of Discharge (Days)	Quantity, Name & Strength Supplied by Pharmacy
			0800	1400	2200		
Augmentin	1 tab	375mg	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	7 days	

Drug/Medicine Sensitivity _____ Pharmacist _____ Date Dispensed _____

OTHER TREATMENT and COMMENTS (including details of appliances, etc.)

THIS FORM MUST BE COMPLETED FULLY BEFORE IT WILL BE DISPENSED

MM Denny (SNO)
MEDICAL OFFICER 0190

NHS Confidential: Personal data about a patient

Sleep porter
SOUTHERN GENERAL HOSPITAL
1345 GOVAN ROAD
GLASGOW G51 4TF
Telephone: 041-445 2466

GREATER GLASGOW HEALTH BOARD

Dear Dr. S. DOLOUI.

Your patient: Frances MCGAWAN. Age. 23 Unit No. 492792

Address: 62 Darvel Street

under the care of DR NAISMITH. was discharged from Ward 47 on _____

with a diagnosis of Post natal anaemia.

A discharge letter will follow. The patient was discharged on the drug treatment detailed below.
Further duration of treatment from date of discharge is shown in "Continuation of Treatment" column.
A five days supply has/has not been dispensed by the hospital.

Note to the hospital prescriber: (a) In the "Continuation of Treatment" column it is important to state the number of days for which treatment should be continued from the date of discharge.
(b) If treatment is to be for an indefinite period, mark 'INDEFINITE'.
(c) If treatment is to be intermittent or irregular, give FULL DETAILS in the COMMENTS space below.
(d) Mark X in box if child resistant containers are not suitable.
(e) Delete N.P. if name of medicine is not required on label.

To the Hospital Pharmacist, please supply the following NP

Medicine	Form of Preparation e.g. tablets	Dose	Times of Administration			Continuation of Treatment from Date of Discharge (Days)	Quantity, Name & Strength Supplied by Pharmacy
			0800	1400	2000		
<u>Ferrus Sulphate</u>	<u>TABS</u>	<u>200mg</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<u>5</u>	<u>500 20052</u>

Drug/Medicine Sensitivity _____ Pharmacist [Signature] Date Dispensed 6/8/92

OTHER TREATMENT and COMMENTS (including details of appliances, etc.)
Anaemic Post delivers - Hb 9.2
For oral Iron,

THIS FORM MUST BE COMPLETED FULLY BEFORE IT WILL BE DISPENSED

[Signature] (SHO)
MEDICAL OFFICER 0190

NHS Confidential: Personal data about a patient

GREATER GLASGOW HEALTH BOARD

South-Western District
Community Services
21 Hillington Gardens
Glasgow G52
041-882 1764

Date 25.11.83

Dr. Rutt
57 Kylespines Rd.
Howlebank

Dear Doctor,

B.C.G. VACCINATION AGAINST TUBERCULOSIS

By agreement with parent or guardian, the child named below received B.C.G. vaccine at school on 11.11.83 under the scheme for protecting school children aged 13 years and over.

Name Frances McEwan (19.1.69)
Address 25 Park Place, G53

Yours sincerely,

G.D. FORWELL
Chief Administrative Medical Officer

NHS Confidential: Personal data about a patient

GREATER GLASGOW HEALTH BOARD

South-Western District
Community Services
21 Hillington Gardens
Glasgow G52
041 882 1764

Date 12.3.81

Dr S. OUTH
67 Kyleaker Rd
Arden G16

Dear Doctor,

Vaccination Against Rubella

By agreement with parent or guardian, the girl named below has today received vaccination against Rubella under the scheme for protecting girls aged 12 and 13 years.

Name Frances McGowan 19.1.69
Address 25 Reat Road
Glasgow G53

Yours sincerely

G.D. FORWELL
Chief Administrative Medical Officer

NHS Confidential: Personal data about a patient

Telephone: 041-332-9144

Greater Glasgow Health Board,
Domiciliary Family Planning Service,
2 Claremont Terrace,
Glasgow. G3 7XR

Date: 12.11.86

13 NOV 1986

Reference No: Dom/363/86

Dear Dr.

D.H.T.

Francis McGowan (19.1.69)25 Peal PlaceG53

We have been asked to visit this patient as she would like to discuss contraception and cannot manage to visit a clinic.

I would be grateful if you could let me know whether there is any medical contra-indication to her using oral contraception or an intra-uterine device.

I enclose a form with a stamped addressed envelope for your reply, but if I have not heard from you within a week I will assume that you know of no medical reason which would preclude her using either of these methods.

I will, of course, inform you as soon as we have decided which method will suit her best.

Yours sincerely,

A Miller

for Dr. June MacDonald

S.C.M.O.
DOMICILIARY SERVICE

NHS Confidential: Personal data about a patient

SOUTHERN GENERAL HOSPITAL 25.10.88.

GYNAE OUT-PATIENT / NAISMITH

MCGOWAN
FRANCIS
C/O EILEEN MCINNES
394 HOUSILMUIR ROAD
NITSHILLG55

19.1.69.

CF/SMACD

DEAR DR NAISMITH

THIS YOUNG WOMAN HAD A POSITIVE PREGNANCY TEST AND HAS REQUESTED TERMINATION BECAUSE THERE IS NO WAY THAT SHE FEELS SHE COULD CARE ABOUT A BABY AT THIS STAGE IN HER LIFE. SHE AND HER BOYFRIEND WERE NOT USING CONTRACEPTION BUT HE TOLD HER HE WAS PROBABLY STERILE FROM USING BODY BUILDING STEROIDS IN HIS PAST. SHE HAS HAD NO PERIODS FOR THE LAST YEAR AND THE TEST WAS POSITIVE ON THE 15TH OCTOBER WHEN SHE COMPLAINED OF SORE BREASTS FOR 1 WEEK EXAMINATION SUGGESTS A 7 - 8 WEEK PREGNANCY.

THANK YOU FOR SEEING HER.

YOURS SINCERELY

DR C FREEER

NHS Confidential: Personal data about a patient

DIVISION OF OBSTETRICS AND GYNAECOLOGY

Consultants:

Dr. T. EDGAR TORRET
 Dr. JAMES A. MCGARRY
 Dr. Wm. C. M. K. NAISMITH
 Dr. MATT J. CARY
 Dr. VALERIE D. HOOD

23 DEC 1988

FILE	✓
Rx	
FOR	
APPT.	

SOUTHERN GENERAL HOSPITAL
 GLASGOW G51 4TF
 Telephone 041-445 2486
 Ext:-

WCMKN/KMcE/442792

20 December 1988

Dr Freer
 The Surgery
 57 Kyleakin Road
 GLASGOW G46

Dear Dr Freer

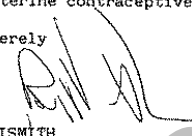
FRANCIS MCGOWAN DOB 19 1 69
 C/O McINNES, 394 HOUSEHILLMUIR ROAD, GLASGOW G53

This patient was seen on 14 November 1988 requesting termination for circumstances applicable to clause 2.

Following priming with cervical prostaglandin, the 11 week gestation pregnancy was terminated by suction aspiration on 22 November 1988.

She remained well post operatively and returned home the following day. We have arranged to see her for review in a few weeks time as she may wish to have an intra-uterine contraceptive device fitted.

Yours sincerely


 W C M K NAISMITH
 CONSULTANT OBSTETRICIAN AND GYNAECOLOGIST

NHS Confidential: Personal data about a patient

GREATER GLASGOW HEALTH BOARD



VICTORIA INFIRMARY/SOUTHERN GENERAL HOSPITAL UNIT

Our ref:
Your ref:
If phoning ask for -

Southern General Hospital
1345 Govan Road
Glasgow G51 4TF
Telephone: 041-445 2456

MRT/CC/442792

27 November 1989

Dr Freer
The Arden Surgery
57 Kyleakin Road
Arden
GLASGOW
G46

29 NOV 1989



Dear Dr Freer

re FRANCES MCGOWAN - D O B 19 1 69 -
25 Peat Place G53 6SJ

I saw this young lass at the ENT Out-Patient Clinic last week having sustained a punch on the nose the previous week during a fight with her brother with resultant epistaxis and swelling of the nasal bridge which has now settled. Her only complaint is of some congestion of the nasal airway but clinical appearance shows there to be a reasonably clear airway present with minimal displacement of nasal complex to the right with no depression.

She does not wish any action to be taken and I will therefore see her on request.

Yours sincerely

M R Thomas
M R THOMAS
SENIOR ENT REGISTRAR

Victoria Infirmary, Southern General Hospital, Cowglen Hospital, Darnley Hospital,
David Elder Infirmary, Elder Cottage Hospital, Meamskirk Hospital, Philipahill Hospital,
Royal Samaritan Hospital, Victoria Geriatric Unit, School of Chiropody, School of Occupational Therapy

NHS Confidential: Personal data about a patient

Telephone No.
041-445 2466

SGH 271

SOUTHERN GENERAL HOSPITAL

GLASGOW G51 4TF

Admitted:.....8.8.90.....

Discharged:.....13.8.90.....

Consultant:.....Dr. Pitkeathly.....

Dictated 20.8.90
Typed 22.8.90

EC/MS/442792

Dr Greer,
57 Kyleakin Road,
Glasgow,

Re: Frances McGowan DOB 19.1.69
25 Peat Place Glasgow G53

Your 21 year old patient was admitted as an emergency to Dr Pitkeathly's ward on 8 August 1990. On the morning of admission she woke up and developed severe generalised headache associated with a photophobia and vomiting.

On examination she looked flushed and was pyrexial at 38°C. Her vital signs were stable. There was a slight tachycardia of 100 beats per minute with a blood pressure of 110/60. Auscultation revealed a soft systolic flow murmur. On examination of the CNS she was photophobic with mild neck stiffness. Kernig's enzyme was negative. A lumbar puncture was undertaken and CSF findings excluded a bacterial meningitis. Her haemoglobin was also checked on admission and was found to be at 9.7g/dl. Her blood film is consistent with an iron deficiency anaemia and this was confirmed by binding iron capacities and a low serum ferritin. On further enquiry it became clear that the cause of the iron deficiency anaemia was probably dietary in origin. She was given some dietary instructions by our dietician and the medical staff and was commenced on Ferrous sulphate. Viral titres were undertaken and they were negative. Blood cultures were negative. Nasal swabs grew a heavy growth of staph aureus, but this was not treated. Her headaches slowly resolved and she was allowed home on 13 August. She will be reviewed once at the medical outpatients where her haemoglobin will be checked.

Yours sincerely

E Chua
E Chua
Senior House Officer

Diagnosis (and Operations): Headache bacterial meningitis excluded
Iron deficiency anaemia probably dietary in origin

Follow-up Appointment: Dr Pitkeathly's outpatient clinic 6 weeks

Copies to:

Drugs on Discharge: Ferrous sulphate 200 mgs tid
PS Her folate and B12 were normal.

Adverse Reactions:

NHS Confidential: Personal data about a patient



GREATER GLASGOW HEALTH BOARD
SOUTHERN GENERAL HOSPITAL

Our ref: EC/JR/442792
Your ref:
If phoning ask for -

1345 Govan Road
Glasgow G51 4TF
Telephone: 041-445 2466
FAX No: 041-445 3670

RECEIVED
2

FILE	<input checked="" type="checkbox"/>
RX	<input type="checkbox"/>
FOR	<input type="checkbox"/>
APPT.	<input type="checkbox"/>

15 October 1990

Dr Greer
57 Kyleakin Road
GLASGOW

Dear Dr Greer

Frances McGowan DOB 19 01 69
25 Peat Place GLASGOW G53

I saw this young girl at the medical out patient on the 10 October. On the whole she keeps quite well but since discharge she has been complaining of back pain. As you may remember she had a lumbar puncture performed which excluded bacterial meningitis. There was nothing of note to find on clinical examination. She was also noted to be iron deficient which was thought to be dietary in origin. On further enquiry she tells me that her periods had been very infrequent on average they occur once every 2 to 3 months. However, when they do occur, they are quite heavy.

Today I merely checked her full blood count with serum ferritin. I have asked her to continue with the iron therapy meantime in the form of Ferrograd. She tells me that she has a coil fitted at the present moment and I wonder if the back pain could be related to the coil rather than her previous lumbar puncture. I did mention to her that she should see yourself for possible referral to a gynaecologist if her periods remain infrequent.

I have not given her a return appointment but will forward the results of the blood test when they become available.

Yours sincerely


Dr E Chua
Senior House Officer

VICTORIA INFIRMARY/SOUTHERN GENERAL HOSPITAL UNIT

THIRD PARTY COPY

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GREATER GLASGOW HEALTH BOARD
SOUTHERN GENERAL HOSPITAL

Our ref:
Your ref:
If phoning ask for -

1345 Govan Road
Glasgow G51 4TF
Telephone: 041-445 2466
FAX No: 041-445 3670

EC/GPC/442792

Dictated: 19th October, 1990.
Typed: 29th October, 1990.

Dr. Greer,
57 Kyleakin Road,
Arden,
GLASGOW, G46.

Dear Dr. Greer,

Frances McGowan (d.o.b. 19.1.69),
25 Peat Place, GLASGOW, G53.

I now have some results on this patient. Haemoglobin is 12.4, with an M.C.V. of 89.
Serum Ferritin is still low at 13 and she should be on her iron therapy.

Yours sincerely,

E. Chua,
Senior House Officer.

FILE	<input checked="" type="checkbox"/>
Rx	<input type="checkbox"/>
FOR	<input type="checkbox"/>
APPT	<input type="checkbox"/>

19 OCT 1990

THIRD PARTY COPY

VICTORIA INFIRMARY/SOUTHERN GENERAL HOSPITAL UNIT

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No. D1/0



GREATER GLASGOW HEALTH BOARD

Our Ref ESBW/PG/12.2.86

Your Ref
 Tel. No.
 Fax No.

24 MAY 1991
 Health Clinic
 Leatherplace Road
 Glasgow, S.W.3
 Tel. 041-883 4764

FILE	<input checked="" type="checkbox"/>
Rx	<input type="checkbox"/>
FOR	<input type="checkbox"/>
APPT.	<input type="checkbox"/>

Date: 22.5.91

Case No:

Dear Doctor FREER

Your patient FRANCES MCGOWAN

62. DARVEL ST

953

Date of birth 19.1.69

visited the family planning clinic this week and expressed a desire to use oral contraceptives. I could find no contra-
 dications on history, and routine examination, and have supplied her with

_____ tablets to

start in her next cycle.

Yours sincerely

MEDICAL OFFICER

NHS Confidential: Personal data about a patient

TO WHOM IT MAY CONCERN

RE: FRANCES MCGOWAN 62 DARVEL STREET G41 DOB 19.1.69.

This is a note to confirm that Frances McGowan is pregnant.

Dr I Delargy

30 January 1992

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SOUTHERN GENERAL 31/1/92

ANTE NATAL NAISMITH

MCGOWAN
FRANCES
62 DARVEL STREET
GLASGOW G41

19/1/69

SOUTHERN GENERAL
OCTOBER 1990 44279225 PEATE PLACE
GLASGOW G53

ID/CW

DEAR DR. NAISMITH

THIS 32 year old girl is pregnant for the second time. She is unsure of her L.M.P. but was not using any family planning in the recent past. She had a termination performed by yourself in December 1988.

Apart from one admission to the Southern General with severe headaches (no cause found) she has been well.

On examination today her B.P. was 100/60. Fundus was approximately 12-14 weeks gestation. Otherwise examination was normal.

I would be grateful if you would see her for combined ante-natal care.

Yours sincerely

DR. I. DELARGY

NHS Confidential: Personal data about a patient

SOUTHERN GENERAL HOSPITAL
DIVISION OF OBSTETRICS AND GYNAECOLOGY

Consultants:
Dr T Edgar Torbet
Dr James A McGarry
Dr Wm C M K Naismith
Dr Matt J Carty
Dr Valerie D Hood

1345 Govan Road
Glasgow G51 4TF
Tel: 041-445 2466

Fax No: 425 1741

WCMKN/AL/442792

9 March 1992

Doctor I Delargy
The Surgery
57 Kyleakin Road
GLASGOW G46

13 MAR 1992	
FILE	<input checked="" type="checkbox"/>
Rx	<input type="checkbox"/>
FOR	<input type="checkbox"/>
APPR	<input type="checkbox"/>

Dear Doctor Delargy

Frances McGowan - DOB 19.01.69
62 Darvel Street, GLASGOW

Thank you for referring this 23 year old virtual prima gravida who was seen here for her first ante natal visit on the 28th of February 1992 at which time the findings suggested a maturity of some 18 to 19 weeks gestation.

We will be pleased to share the ante natal care.

Yours sincerely

B.M.K.
Wm C M K Naismith
Consultant Obstetrician and Gynaecologist

EDD : end of July 1992
Blood Pressure : 110/60
Haemoglobin : 12.2g/dL
Blood Group : B Rhesus Positive

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Pages:

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FEMALE		D/B 19.1.69.	
SURNAME McGOWAN.		CHRISTIAN NAMES FRANCIS DORAN	
ADDRESS 145 STANLEY ST ST.			
DATE	*C *F	CLINICAL NOTES	DIAGNOSIS
23.10.69		New Registration	
3.11		Imm. Imm.	
9.12			
17/11		1st Truss & Polio	EC73
14/6		2nd	
26/8/		Imm V exp.	offic. certificate
15/1		outsp	
16/12		Murder	
27.1.72		Imm. Imm.	
18/1/74		Murder	
21.2		MCEU →	
14.1.82		Ceporex Syrup 250mg 5ml Qid in 90ml	

* In C.F. Column, which is for cases of certified incapacity only, practitioners should enter C for first certificate, and F for final certificate.

MEDICAL RECORD CARD

FORM E.C. 8
(Scotland)

((17.10.68) (E3968) Dd. No. 239178 200,000 10/68 J.&G.Ltd. Gp. 259

4095 Confidential - Personal data about a patient

01/01

FORM CPUS(S) NATIONAL HEALTH SERVICE SCOTLAND
Registration No. 200163

Address: 02 56 ANNMOLE ST
City: GLASGOW
Postcode: G53 7 00

Date: 5 DEC 2009

418 Milner Rd
Glasgow G53 7BN
Tel: 011 881 833

No. of Days Treatment: Yes No

Priority Status: Urgent Routine

1. Levothyroxine
100mg Tablets
x 28 f od

2. Levothyroxine
2.5mg Tablets
x 28 f od

05/12/2009 11:46

06032224

05/12/2009 11:46

7008034363 04010401

1647 87469 902747

1647 87469 902747

05122009

THIRD PARTY COPY

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DUTY DOCTOR		82	CALL NO.
PATIENT'S NAME & ADDRESS		FRANCES M'GOWAN	AGE
62 DARVEL ST			22
NITSHILL GF			DATE
			28/5
TELEPHONE INFORMATION RECEIVED		SEV STOMACH & ABD PAIN	TIME RECEIVED C/R
SUDDEN ONSET WEAK			1751
HISTORY & EXAMINATION			TIME PASSED
<p>26 colon -</p> <p>Abdo. soft</p> <p>slight tenderness</p> <p>Ⓜ normalcy</p> <p>& lymphaden</p> <p>plus - refer</p>			1800.
			TIME ARRIVED
DIAGNOSIS		2 U.T.I.	TEMP.
			↑
			PULSE
			96/min
			B.P.
			1
TREATMENT/DISPOSAL		Paracetamol	PATIENT TO CALL IF NECESSARY
Septroin			TO SURGERY ON
			DAY
			PLEASE REVISIT ON
			DAY
			HOSPITAL ADMISSION ARRANGED
PATIENT'S OWN DOCTOR		FRANK 157	GENERIC DRUG BATCH/LOT NO.



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DUTY DOCTOR		39	CALL NO.	
PATIENT'S NAME & ADDRESS		Francis M Gordon	AGE	22 yrs
		62 Dawick St	DATE	7 6 91
		Nirshini 1/2	TIME RECEIVED C/R	2056
TELEPHONE INFORMATION RECEIVED		seen twice	TIME PASSED	2110
		See head + spine	TIME ARRIVED	
		Nausea		
HISTORY & EXAMINATION				
Has aridull and on Proposed to had Top meningitis last year. TEMP 37.6 Also had been suff. PULSE from migraine no heat. B.P. in the house. See 5/10/91 Dr. J. J. J.				
DIAGNOSIS		Septic but changed	TO SURGERY ON	
		in hospital 1/82	DAY	
TREATMENT/DISPOSAL		1) Amoxicillin 250	PLEASE REVISIT ON	
		2) Co-trimoxazole 200	DAY	
		and	HOSPITAL ADMISSION ARRANGED	
PATIENT'S OWN DOCTOR		157 Frear	HEALTHCALL SERVICES LIMITED Printed on Recycled Paper	
GENERIC DRUG BATCH/LOT NO.		60		

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DUTY DOCTOR <p style="text-align: center;">57</p>		CALL NO.
PATIENT'S NAME & ADDRESS Frances McGowan 25 Peat PL m 10 Pallah % Sloan		AGE 22
		DATE 2.6.91
		TIME RECEIVED C/R 0206
TELEPHONE INFORMATION RECEIVED Pt % discharge PV WFD		TIME PASSED 0258
		TIME ARRIVED
HISTORY & EXAMINATION		
<p>PV discharge of jelly like material ? possibly has had miscarriage? unfortunately she did not keep what came out - past history of an abortion. irritated & anxious - says she has never seen right since she had menses last year. No pain at moment. Cost out 2/52 ago</p>		<p>U at moment U has apparently been right</p> <p>TEMP. _____ PULSE _____ B.P. _____</p>
<p>DIAGNOSIS Dysmenorrhoea - possibly miscarriage - ? other problem.</p>		<p>PATIENT TO CALL IF NECESSARY <input checked="" type="checkbox"/></p> <p>TO SURGERY ON _____ DAY</p>
<p>TREATMENT/DISPOSAL ↓ Pain - reassured tonight to go to G.P. next week (with woman clinic) to get ahead.</p>		<p>PLEASE REVISIT ON _____ DAY</p> <p>HOSPITAL ADMISSION ARRANGED</p>
<p>PATIENT'S OWN DOCTOR Freet 157</p>		<p>GENERIC DRUG BATCH/LOT NO.</p> <p>  HEALTHCALL SERVICES LIMITED Printed on Recycled Paper</p>

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TO WHOM IT MAY CONCERN

RE: FRANCES MCGOWAN 62 DARVEL STREET G41
DOB 19.1.69.

This is to confirm that Frances McGowan is
undergoing treatment for present for headaches.

Dr I Delargy

27 March 1991

Date

THIRD PARTY COPY

NHS Confidential: Personal data about a patient

National Health Service Number	
Surname (Block Letters)	Forenames (Block Letters)
McLellan	Females
Address	
Date of Birth	

CLINICAL NOTES

Date	Clinical Notes	Diagnosis
13/7/09	Seen in hospital maximal hypoxia to 125 mmHg Tub. Gastric still nausea and vombs	
	C1 Hypoxemia	
22/7/09	tiredness, heel ache pregnant supplis from hypothyroidism	
	C2 Hypoxemia do tiredness	
3/8/09	Not feeling well Anxious, nervous, tired not sleeping, tiredness 24/52 pregnant	
	C4 Hypoxemia tiredness Anxiety	
10/9/09	well.	
11/0/09	FBC US+ES TET	
5/11/09	do. Hiccups in abdomen and pressure in pelvis all chest clear, Hs 120 no leg oedema very reluctant about H1N1 vaccine	
12/1/09	A/H1N1 Vaccination	
1/12/09	Texas programme transferred to xyloprot and	
24/12/09	stopped breast pump Painful, tender and engorged breast	

* This column has been provided for doctors to enter A, V or C at their discretion
 also in H1N1 right nipple ? fungal infection
 Tub. Fungus like boy X3
 Carotid artery

FORM GP111F

PRINTED FOR ASTRON, B51051 3/07 (017302)

355 2095

NHS Confidential: Personal data about a patient

		National Health Service Number	
NURSES AND HEALTH VISITORS RECORDS	Surname (Block Letters)	Forenames (Block Letters)	
	M. Lynn		Frances.
Address		Date of Birth	

Date	
15/8/8	Telephone encounter - looking for more symptom, (miscarriage) for years, feels they help. Issued a supply. Advised to see Dr if worse. (Brom)
9/9/8	Persistent th over right nipple, persisted beyond period for 3 weeks. No known FN of breast Ca. O/E: (mgt. as above) - no pain or swelling Imp - unknown cause. Plan - try antibiotics refer breast clinic. (Dr)
	See referral made ✓
21.10.08	Tub. smears 100x x 6
21.10.08	Tub. " "
7/11/8	Feeling very itchy all over, very dry skin. (On hypothyroidism) Plan - emollient - checks TFTs - subcutaneous - see dr if doesn't improve. (Dr)
5/12/8	Phoscell - has touch + thinks she may be pregnant Advised not to take glucocorticoids, script left for doxycycline. To see nurse for swabs if doesn't improve. Advised to do a Preg. test. (Dr)

FORM GP111M 355-2101

NHS Confidential: Personal data about a patient

Date	
15/1/09	Cough, sore throat + sore ears for 2 days. No other symptoms. PE: Lungs well, Not SOB. ENT / Chest clear. Viral illness - for symptomatic dx. - see dr if doesn't improve. <i>Dr</i>
18/3/09	Cervical smear, LMP 25/1/09. No abnormal smear discharge, no post coital bleeds. Cervix intact. <i>SM</i>
9/4/09	Vaginal itch and discharge H.V.S. Imp. vaginal smear Rx Fluconazole 50g
30/4/09	LMP: Early Feb. pregnancy test positive. No Nausea, no vomiting. <i>w= 60kg</i> Tiredness, and headaches. O/E General condition is good. Skin is, normal, chest clear <i>HR 120</i> <i>BP 110/70</i> → A/N S.G.H.
7.5.09	Nausea and vomiting not disturbing well No frontal headaches. O/E Appx normal ENT: normal chest clear <i>HR 110</i> <i>BP 70</i>
15/6/09	15/5/09 pregnant. Feel sick and vomiting and and all O/E H.S. ENT: normal chest clear <i>HR 120</i> <i>BP 70</i>
25/6/09	Still nervous and headache. Feels cannot attend work. Meds → 25/6/09 6/7/09 - hypertension To review to Dr Juddrey as to hear by this continues. <i>Dr Juddrey</i>
4/7/09	CI hypertension. <i>Dr Juddrey</i>

Printed for Astron B42672 8/05 (017302)

NHS Confidential: Personal data about a patient

CLINICAL NOTES		National Health Service Number	
		Surname (Block Letters)	Forenames (Block Letters)
		M'GOWAN	FRANCES
		Address	Date of Birth
		56 PINMORE ST.	19.1.69

Date	*	Clinical Notes	Diagnosis
24.1.07		Cough, sputum production and wheezing O/E Pyrexial Inflamed throat. Ears are normal Chest, rhonchi in lower sect HS BP 120/80 Cap. Anaxypul - 5007 TB	
29.1.07		Anxious, nervous, not coping CH Anxiety from 19.1.07 Chest clear	
17.4.07		Anxious, nervous, heard her Ex-partner died recently	yes Hest
13.7.07		CH Fractured right ulna. C/O tenderness O/E Anxious FBC MS&ES LET, J&T TFT	
3/9/7		Bloods FT ₄ 9.2 TSH 7.57 Biodiversity recommended week 3 months CH however she is symptomatic, tired wt gain. +ve Family history Hypothyroidism Ttg 25mcg Thyroxine	
13.9.07		C/O sore throat, cough, sputum production headaches and dizziness O/E Red throat, Temp 36.5°C Ears - normal Chest few rhonchi HS Tub. Ca-anaxypul	

* This column has been provided for doctors to enter A, V or C at their discretion
Tub, Kupalee

FORM GP111F

PRINTED FOR ASTRON, B43522 9/05 (017302)

355 2095

NHS Confidential: Personal data about a patient

Date	Clinical Notes	Diagnosis
10-9-07	CU # Rt ulna	
11-10-07	TFT Tub. Levodopa 25mg	
12-10-07	CU # Mr. Haco, 07	
14-11-07	CU # Rt. ulna 7 stopped Myosin advised to continue	
19-11-07	Subacute dermatitis face hydrogel topical	
11-2-08	DM	
12-2-08	DM	
14-2-08	Abnormal motion c/o tenderness FB 5-2 US+Es, LET, TFT	
15-4-08	US+Es TFT FBC	
18/4/8	TSH 8.86 T ₄ 10.2 Feet Tired ↑ Thyroxine to 50 mcg	
9-6-08	H/O migrainous headaches c/o severe headache April 2008 and Numbness c/o severe pain, very distressed. BP 110 A-D Shunt 25 mg 14 Tub. sumatriptan 600g x 6 pain in arm and shoulder Tub. duloxetine 50-7 T ₄ Tub. paracetamol	
4/7/08		
13/8/08	FBC US+Es, LET, TFT Blood sugar	

* This column has been provided for doctors to enter A, V or C at their discretion

5/2000 204722

NHS Confidential: Personal data about a patient

CLINICAL NOTES		National Health Service Number	
		Surname (Block Letters) MCLOWAN	Forenames (Block Letters) FRANCES
		Address	Date of Birth 19.1.69

Date	Clinical Notes	Diagnosis
21.10.04	dry skin had rashes in arms and chest very itchy antibiotics taken as per dermatology cream 30g	
9/11/04	Neck itchy rashes all over in back also dermatitis on fingers and palms Bleocin cream Tab. Cefixime 100 x 30	
6.11.04	same neck not healing well old red throat scars - normal cap. Amoxycillin = 250 x 7 antibiotics taken as per dermatology cream	
10.5.04	Rashes in top	Reassured
28.5.04	well. BP 130/70	
11.8.04	well has had blood transfusion - before delivery has had forceps delivery discharge Hb 58 on Ferrans chest clear Hs Fundus palpable below umbilicus BP 120/70	
19.8.04	well	
4.10.04	Itchy rashes around the nipples Hydrocortisone 1% cream	
11.11.04	General condition is good skin is normal BP 120/70 Tab. Microgynon 30 6/12/70	
19.11.04	110 maldes and scar in occipital area old red throat and laryngeal scars chest clear Hs BP 130/70	

* This column has been provided for doctors to enter A, V or C at their discretion
CNS: N/A

FORM GP111F

PRINTED FOR ASTRON, 82682 7/02 (017302)

355 2095

NHS Confidential: Personal data about a patient

Date	Clinical Notes	Diagnosis
23/11/04	Much better	
6/1/04	clo sore throat	
10.1.05	noisy infection	
12.5.05	Tonsillitis, ears - normal	
10.6.05	throat clean, Tonsillitis, ears - normal	
22.6.05	Well BP 120/70, AP. Depo-Provera 150714	
29.6.05	covered smear	
6.10.05	vaginal thrust as contact VC	
20.10.05	dry skin and itching all over the body	
	E-15 cream	
	Tamoxifen 1mg	
24.10.05	vaginal thrust	
	N.V.S. VC Contact VC 10.10.05 x 2	
25.10.05	AP. Depo-Provera 150714	
9.5.06	discharge	
	much better and made completely recovery	
21.8.06	vaginal thrust as E. coli 1507	
22.12.06	Med 3 until 08.01.07 "ST-05"	
	- alleged bullying by boss at work	
	- anxiety & upset	
	- arguments at home & family	
	→ 5 people in 3 apt house	
	→ advised to seek resolution over job to ease pressure	
	advised to get Sick leave if not	
	The answer	
4.1.07	Rashes in neck - very itchy	
	Reaction to chlamydia	
	Hydrocortisone 2% to cream	

* This column has been provided for doctors to enter A, V or C at their discretion

5/2000 204722

NHS Confidential: Personal data about a patient

CLINICAL NOTES		National Health Service Number	
		Surname (Block Letters) MCCOWAN	Forenames (Block Letters) FRANLES
		Address	Date of Birth 19-1-69

Date	*	Clinical Notes	Diagnosis
4.6.02		Recurrent vaginal thrush also complaint of dm vaginal Re. Gyne-removal (ambipax)	
27.6.02		Recurrent vaginal infection FBC ✓ U&Es ✓ HFT Blood sugar - HCD insertion - IVD checked	SC102
3.7.02		Recurrent vaginal thrush HVS ✓ Pregnancy test -	
22-7-02		Recurrent thrush - Tab Fluconazole 150mg	
16.8.02		Vulval itch Rx Canesten HC cream 30g	
9.9.02		Vulva vaginal thrush Tab Fluconazole 50mg x 1 Canesten HC cream	
13.9.02		Recurrent vaginal thrush Rx sup. Metronidazole	20715 th X100
6.11.02		Cough and sputum production -also sore throat a/c Red blood chest exam cap. Amoxycillin - 250g KX had 1xOP B45 cream 125g	
11/12/02		Vaginal itch and discharge HVS - Canesten pessaries	3 x 200g
10.12.02		Vaginal discharge IVCD removed HVS for chlamydia	SC102

* This column has been provided for doctors to enter A, V or C at their discretion

FORM GP111F
355 2095

Printed by Taclica Solutions, 11/00, B16745, E9331, R.F. (53791)

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Date	*	Clinical Notes	Diagnosis
16-12-07		Tonsillitis with exudate chest clear R. sup faint	
27/12/07		Tonsillitis - ears normal Tub. parotid. gland Amygdala - 20/27/15	
30/12/07		left blepharitis Rx Chloramphenicol eye ant	
9.1.03		recurrent Vaginal thrush FBC - L Serum Ferritin	
12/1/03		Take Ferritin supplements pain in right lower abdomen VTE Appraisal, tender right lower Anemia: Hb.c → surgeon seen	
16-4-03		r/o pain, tingling and numbness in his legs o/e NAD peripheral pulses - none EAS - NAD, reassured	
26-6-03		Mutual itchy itchy eyes and sore throat o/e red throat Canesten cream to 50y Take chlorpheniramine 4x20	
24/9/03		Herpes simplex lower lip also fresh ocular blurring PR small haemorrhoid anal small fissure R: Aciclovir cream xylocain ant	BP 110 70
25-11-03		LMP - 17-10-03 pregnancy test + nausea and vomiting skin is normal chest clear / ps	BP 120 70
15-12-03		Vaginal thrush (antifungal pessary)	
30/12/03		r/o Haematuria o/e pale chest clear Hb.c Dx & mchls: left lower leg	3x2007 120 70
12/10/04		Well BP 120 70	

* This column has been provided for doctors to enter A, V or C at their discretion
Urinalysis = NAD

5/2006 204722

NHS Confidential: Personal data about a patient

		National Health Service Number	
CLINICAL NOTES	Surname (Block Letters)		Forenames (Block Letters)
	McLOWAN		FRANCES
	Address		Date of Birth
		19-1-69	

Date	
8/2/98	
22.6.98	ClO sore throat - and sore ear. O/E unexplained throat cyst clear. Tab pen V.
13.8.98	Tonsillitis. Tab pen V.
21.8.98	oral thrush. Nystatin oral susp.
28.8.98	Tonsillitis - immediate
17.9.98	ClO pain in both legs and leg cramps O/E varicose veins in both legs (L & R) V referred to SHH - Surgical clinic
30/9/98	Herpes simplex labialis. Zovirax cream
19.11.98	cough, greenish sputum. O/E chest. Rhincha cap. Amoxycilin
22.12.98	Vaginal thrush Rx GyNO peronyl candida. Tab. Diflucan 50 mg
18.1.98	Vaginal discharge. Returned condom removed.
21/3/99	has been operated for varicose veins.
16.4.99	NOVA T. Quitted EC103
26.5.99	NAT
23/8/99	Tonsillitis. Tab pen V.
15.9.99	Secondary amenorrhoea pregnancy test V - neg.
17.11.99	Tan. Pyroclonem set - s.p.
14.2.00	Itchy and painful eyes. Rx Betnesol drop Tab. Mebexin 135 mg TD
5.5.00	4th and 5th day urine for smear 16100
16/6/00	cough - sputum. Productive - greenish sputum also sore throat O/E Red throat, chest clear. Cap. Amoxycilin

*This column has been provided for doctors to enter A, V or C at their discretion

HVS.
Cervical smear

DRM GP111F
55 2095

NHS Confidential: Personal data about a patient

Date	
21-8-00	1st invite for repeat smear 14/9/00
13.9.00	Well Asymptomatic skin is normal, chest clear H ₂ 110 abdomen NAD
26-10-00	2nd invite for repeat smear 22-11-00
14.11.00	clo save smear o/e Red smear H ₂ 110 cervical smear 75 H.V.S ✓
15/11/00	Amoxicillin commenced for throat
20/1/00	Referred to Colposcopy - 2nd
16/1/01	Amoxicillin, numerous dysplastic changes Tbx. Pap smears 10-13-00
14/2/01	Contra. on and off o/e Asymptomatic ENT - normal chest clear, no wheezing sup. Suddelid. 200
28/6/01	Visular rash in lower back mp Herpes zoster Rx Tab. Aciclovir 800mg x 35
8-8-01	small fluid in left external canal Cap. Fluconazole 2007 2007
26-9-01	Tonsillitis exam - normal, chest clear Rx Tab. Pen V
4-2-02	Referred to Richmond Fellowship MHA
7-3-02	Vaginal thrush consistent V.C.
9-4-02	Vaginal discharge and itching o/e Whitish discharge and vaginitis Rx Tab. Metronidazole
15/4/02	casertin exam E. apparatus 4007 19
21/5/02	10/1 Sup
15/6/02	clo nausea and vomiting loose abdomen o/e

*This column has been provided for doctors to enter A, V or C at their discretion

o/e tender lower abdomen

pv: mild manual inlets

Tbx. Fluconazole 1507

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National Health Service Number

Surname (Block Letters) **Mc GOWAN** Forenames (Block Letters) **FRANCES**

Address _____ Date of Birth **19-1-69**

CLINICAL NOTES

Date	Notes
6.3.92	Well asymptomatic 20150 pregnant p11+ Viral meningitis Drops - Nil. O/E G.C. - skin normal. Chest clear H.S. 110 Audi NAD Fundus in 70 umbilical area FM ✓ WT 7 Stone 2 Lbs
19.3.92	Well BP 120/80
16.4.92	Well BP 120/80 Amp. Depo-provera EC102
20.10.92	Anxious, 20 depressed, fearful. stopped taking hysterol H.V.S. - Cervical smear
11.1.93	Cough. Greenish sputum production O/E - normal, chest clear no blood E.W.T. - normal, cap Anxiet
23.6.93	Well BP 120/80 Tub. Muzuppa 30 3/4
29.6.93	Film symptoms
18.8.93	Mediastinal mtd. Pethypropa
9.9.93	Tub. Muzuppa 30 6/12 EC102
13.1.94	complan cough. anorexia and weight loss. O/E - skin Chest clear, H.V.
25.4.95	Mic Transilutis c. emelate
4.2.96	h.p.p. 2 Nov pregnancy hist + And such microbiology Hb = nil - 9 hrs 12'

*This column has been provided for doctors to enter A, V or C at their discretion
→ #1N 54H

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Date	
28.2.96	cto dizziness and headaches a115 BP $\frac{120}{70}$
10.6.96	well
20.11.96	well. BP $\frac{120}{70}$ cervical smear ✓ cervical smears
10.1.97	Invited for smear - 12/1/97 - 1st letter
3.4.97	Invited for smear - 30/1/97 - 2nd letter
16.5.97	Invited for smear - 11/6/97 - 3rd letter
26.6.97	surveillance and vaginal smear
24.7.97	vaginal smear
5.9.97	penal itals also done - Re Anusud H.C. exam
3.10.97	cto dizziness on and off a115 abdominal soft, no tenderness PR - NAD
12.11.97	pain on left shoulder and left wrist
14.11.97	cto pain in back, shoulder and chest. a115 very anxious chest clear. BP $\frac{120}{70}$
10.12.97	very anxious distressed cto headaches pain in wrist tongling and numbness wept, medication physical examination - normal
12.1.98	Anxious nervous headaches pain in back a115 cc skin is normal chest clear, 125 abdom. NAD FU for investigation
21.1.98	cto
8.5.98	pain in neck, tongue and numbness in hands and arms no press found neurological x-ray cervical spine very anxious, difficult to pressure her.

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04 K27706 (54004 11/91 E0205246)

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		National Health Service Number	
CLINICAL NOTES	Surname (Block Letters)	Forenames (Block Letters)	
	Address		Date of Birth
	62 DARVA STREET 25 PEAR PLACE		12-1-69

Date	
22/3/91	Still vague wch + discharge - off needs to see the Gynae. Partner x 3 op.
26/3/91	CT Drops used for headache.
2/4/91	Progesterone 20mg bid 5d S: Vaginal help 'vaginal' but has bet jst in H. 1st term: frequent absences. Woman about very long: o: MBO (Reman) to Farnham (20) for F&C 1/2. (near date + progesterone therapy periods).
10/6/91	S: LFKH Discharge - 1st had ODS x 3 5/80p 2 weeks. Claim something "from auto parts" passage 2/6 - thinks it was "miscarriage" but normal period 2/6 3 weeks ago.
12/6/91	P: Vidkanite Com. Plectin n (wch mng for pelvis + HVS. Plectin 2 for white discharge 10: 10 months 10VS - Comester Com 200 (2) + Crestin Com (Bogford to see after). Paracetamol (6) for continuing headache (also - Progesterone).
30/6/91	Para: O+1 (Top 1988) Lump: Vulture: No final plan Med. Hx: Nil bp 110/50 Mobs. - June = 14/40 Twin- C: 10+

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		National Health Service Number	
CLINICAL NOTES	Sumname (Block Letters)	Forenames (Block Letters)	
	M. GOWAN		FRANCIS.
	Address	Date of Birth	
62 DARVEL STREET 953		19.1.69	

Date	
21/1/85	App. examination
4/9/85	28.3.85 95
1/11/85	Paracetamol 15
14/2/86	valium 20mg / 1000 (100)
29/4/86	Paracetamol Cream
4.11.86	SURAX 300g
28.1.87	Paracetamol 30ti 910
13.5.87	Bactroban 30g
30.3.87	Antepan 28 with 2 wry for 7 day
18/6/87	Amoxicillin Bactrim (20) 100
22/11/87	Aspirin 200 (20) 7 910
26/11/87	Penicillin IM (100)
24.1.88	Injected Rt middle finger Magnesium 1000 x 4 days (20) to see Mon HA
1.2.88	Polyax shampoo x 150mls to see 1/2 HA
21.3.88	Penicillin F. Tab. AD AC X 30. Hydrocortisone Cream 0.5% to apply on Jule TDS X 20g to see 1/2 HA
31.3.88	Paracetamol 15 (30)
14/10/88	CRP for 1 year. Prior to that had been taking 3/2 injection now o/a to that pain x few days intermittent. Bowels No constipation usual x 1 year. SE. Had Agt. 16. at N. Siga Adrenaline x 20. Urine -

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