

in a plaster as the airline company would not allow him to travel due to the plaster creating a tourniquet effect during the flight.

Yours sincerely

Authorised on 14/10/2021 13:36:16 by Miss Gibson's Assistant.

Mr Andrew Clarke
Clinical Teaching Fellow
GMC: 7041800

NHS Confidential: Personal data about a patient

<p>Crosshouse Hospital Emergency Department Tel: 01563 827762 / 827751 (ED Secretaries Mon- Fri 9am-5pm Tel: 01563 827757 (Out of Hours queries</p>	<p>Emergency Department Discharge Letter</p>
---	---

To: **BW.MCMASTER**

Re: **Gary Dorricott**
27A KNOCKCUSHAN STREET,GIRVAN...
KA26 9AG
DOB: 08/07/1989
ED Attendance No: XH-21-041892-1
CHI No.: 0807890030

Attendance Details

Date of Attendance: 12/09/2021

Time of Attendance: 18:19:00

Presenting Complaint: probs knee brace

Duty Consultant: Dr Euan McKenzie

Additional Information: No Attendances in Last 12 months:3 Total Number of Attendances:6

Diagnosis See diagnosis below,,

Treatment Advice

Investigations

Discharge Information: Discharge, Usual place of residence no follow up

Additional Information Thinks splint fits poorly, as he had travelled far i got the ortho reg to see him and we advised he contacts fracture clinic tomorrow

Discharged by: Lesley Brown,ED Consultant

NHS Confidential: Personal data about a patient

Ayr Hospital
Emergency Department
Tel: 01292 614578

**Emergency
Department
Discharge Letter**

To: **BW.MCMASTER**

Re: **Gary Dorricott**
27A KNOCKCUSHAN STREET,GIRVAN...
KA26 9AG
DOB: 08/07/1989
ED Attendance No: AYR-21-020009-2
CHI No.: 0807890030

Attendance Details

Date of Attendance: 30/08/2021

Time of Attendance: 11:28:00

Presenting Complaint: RTA

Duty Consultant: Dr Alan Krichell

Additional Information: No Attendances in Last 12 months:2 Total Number of Attendances:5

Diagnosis Minor soft tissue injury,Abdomen,Left

Treatment Take home drugs

Investigations X-Ray,
X-Ray,

Discharge Information: Discharge, Usual place of residence no follow up

Additional Information Soft Tissue Injury

Discharged by: Adedapo Adesokan,Locum

Mr Gilmour attempted to reason with the patient, he wasn't prepared to listen to advice and for this reason we don't think the patient is a candidate for ligamentous reconstruction of his right knee. The patient has a splint on his right knee and a below knee cast on his left knee. He must take weight through his right knee due to the injuries on the left.

I plan to review this patient in my fracture clinic on the 9th of September when he will require his cast to be removed, sutures to be removed and a check X-ray of his left tibia to be taken. The patient has been given this appointment and we hope that he attends.

Yours sincerely

Authorised on 10/09/2021 11:21:26 by Suzy Gibson.

**Suzy Gibson FRCS (Glas) (Tr & Orth), PG Cert Med Ed
Consultant Orthopaedic Surgeon & Honorary Clinical Senior Lecturer GMC: 4087997**

NHS Confidential: Personal data about a patient

Ayr Hospital
Emergency Department
Tel: 01292 614578

Emergency Department Discharge Letter

To: **BW.MCMASTER**

Re: **Gary Dorricott**
27A KNOCKCUSHAN STREET,GIRVAN...
KA26 9AG
DOB: 08/07/1989
ED Attendance No: AYR-21-020009-1
CHI No.: 0807890030

Attendance Details

Date of Attendance: 23/08/2021

Time of Attendance: 20:21:00

Presenting Complaint: RTA

Duty Consultant: Dr E Ofei

Additional Information: No Attendances in Last 12 months:1 Total Number of Attendances:4

Diagnosis Open #,Tibia,Left

Treatment other plaster

Investigations X-Ray,
X-Ray,
X-Ray,

Discharge Information: Admitted, Station 10

Additional Information motorcycle accident open fracture left tibia. above knee backslab applied and admitted st 10

Discharged by: Claire Christie,Specialty Doctor

Campbell, Mary

From: aa.GP Returns
Sent: 25 August 2021 06:06
To: aa.Clinical_Practice_GirvanDrMcMaster&Ptnrs_80274
Subject: Lab Test ID: 0021M574920
Attachments: SCI_SCI001_Distribution.pdf

Please find attached a COVID-19 test result.

If this result has not already been received (e.g via lab imports), can you please ensure that this result is recorded (following the guidance previously provided), and filed in the patient record.

No further actions will be required, as all results are communicated to patients by the results hub, who provide information on self-isolation, and who to contact if symptoms worsen.

If you have received this result in error, can you please forward this email (including the attachment) to -
gpreturns@aapct.scot.nhs.uk

NHS Confidential: Personal data about a patient



Microbiology Report

Lab Report ID:	0021M574920
----------------	-------------

Patient Name:	Gary Dorricott	DOB:	08/07/1989
CHI Number:	0807890030	Sex:	M
Practice Details:	Drs McMaster, Moore & Brooksbank (80274)		

Specimen:	Throat and Nose Swab
-----------	----------------------

Investigation:	Test:	Result:
COVID-19	Covid-19	NOT Detected by PCR

Sample Collected:	24/08/2021 10:12
Received by Lab:	24/08/2021 10:13

Requestor:	Clinician, Unknown
Requestor Organisation:	(AYACC) Ayr Hosp A&E Dept

UK Covid-19 Test Report

Result

SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) detection result **negative**

Patient Details

Surname	Dorricott
Forename	Gary
CHI	0807890030
Date of birth	1989-07-08
Sex	Male
Address	27A KNOCKCUSHAN STREET GIRVAN AYRSHIRE KA269AG

Specimen Details

Specimen Processed Date	13-08-2021 10:31
Test Start Date	12-08-2021 10:00
Test End Date	12-08-2021 10:17
GP Practice	80274
Specimen Number	SEQ42717682
Administration Method	

End of Report

NHS Confidential: Personal data about a patient

NHS Ayrshire & Arran

Area Laboratory Haematology

DORRICOTT, GARY
27A KNOCKCUSHAN STREET

CHI No. 0807890030
Unit No.
DOB 08/07/1989
Sex M

Clinician: Dr K Brooksbank
Request Location: GP, Girvan: Dr McMaster et al

GIRVAN
KA26 9AG

This report to : Dr K Brooksbank, GP, Girvan: Dr McMaster et al

02 FEB 2021

	Result	Units	Normal Range
RA Test	0.8 IU/ml	NEGATIVE	

Ⓜ
M

Lab No 21B807216
Printed 29/01/21 15:13

Date Collected 27/01/21 09:35
Sample Type Blood

Authorised By Julie Logan
Page 1 of 1

If you have received this report in error, please return to the Haematology Laboratory

STAS717

NHS Confidential: Personal data about a patient

NHS Ayrshire & Arran

Area Laboratory Haematology

DORRICOTT, GARY
27A KNOCKCUSHAN STREET

CHI No. 0807890030
Unit No.
DOB 08/07/1989
Sex M

Clinician: Dr K Brooksbank
Request Location: GP, Girvan: Dr McMaster et al

GIRVAN
KA26 9AG

This report to: Dr K Brooksbank, GP, Girvan: Dr McMaster et al

02 FEB 2021

Result

ANA Anti nuclear antibodies
ANA Comment :

Negative
Low titre antinuclear antibodies (1/80 and below)
are unlikely to be clinically significant or to
require further action
Minimum recommended re-test interval for ANA is 6
months, other than in the specific instance of
lupus patients on active treatment (RCPATH
National Consensus Recommendations 2015)

Ⓟ
M

Lab No 21B807216
Printed 29/01/21 12:55

Date Collected 27/01/21 09:35
Sample Type Blood

Authorised By Julie Logan
Page 1 of 1

If you have received this report in error, please return to the Haematology Laboratory

STA5717

NHS Confidential: Personal data about a patient

NHS Ayrshire & Arran

Area Laboratory Clinical Biochemistry

DORRICOTT, GARY
27A KNOCKCUSHAN STREET

CHI No. 0807890030
Unit No.
DOB 08/07/1989
Sex M

Clinician: Dr K Brooksbank
Request Location: GP, Girvan: Dr McMaster et al

GIRVAN
KA26 9AG

29 JAN 2021

This report to :- Dr K Brooksbank, GP, Girvan: Dr McMaster et al

	Result	Units	Normal Range
CRP	<5	mg/L	2.0 - 10

(P)
M

Lab No 21B807216

Date Collected 27/01/21 09:35

Authorised By BHI W7AUQPRO Service Account

Printed 27/01/21 16:23

Sample Type Blood

Page 1 of 1

If you have received this report in error, please return to the Clinical Biochemistry Laboratory

NHS Confidential: Personal data about a patient

NHS Ayrshire & Arran

Area Laboratory Haematology

DORRICOTT, GARY
27A KNOCKCUSHAN STREET

GIRVAN
KA26 9AG

CHI No. 0807890030
Unit No.
DOB 08/07/1989
Sex M

Clinician: Dr K Brooksbank
Request Location: GP, Girvan: Dr McMaster et al

29 JAN 2021

This report to: Dr K Brooksbank - GP - Girvan: Dr McMaster et al

	Result	Units	Normal Range
Haemoglobin	170	g/L	133 - 176
White Cell Count	8.4	10 ⁹ /L	3.7 - 9.5
Platelets	277	10 ⁹ /L	150 - 400
RBC	5.46	10 ¹² /L	4.32 - 5.66
Haematocrit	0.48	%	0.39 - 0.50
MCV	88	fL	82 - 98
MCH	31.1	pg	27.3 - 32.6
MCHC	High 353	g/L	316 - 349
Neutrophils	3.5	10 ⁹ /L	1.5 - 6.5
Lymphocytes	3.6	10 ⁹ /L	1.1 - 5.0
Monocytes	0.9	10 ⁹ /L	0.2 - 0.9
Eosinophils	0.3	10 ⁹ /L	0.1 - 0.7
Basophils	0.1	10 ⁹ /L	0.0 - 0.1
ESR	2	mm/hour	0 - 10

②
M

Lab No 21B807216

Date Collected 27/01/21 09:35

Authorised By

BHI W7AUQPRO Service
Account

Printed 28/01/21 04:32

Sample Type Blood

Page 1 of 1

If you have received this report in error, please return to the Haematology Laboratory.

STAS717

NHS Confidential: Personal data about a patient

NHS Ayrshire & Arran

Area Laboratory Haematology

DORRICOTT, GARY
27A KNOCKCUSHAN STREET

CHI No. 0807890030
Unit No.
DOB 08/07/1989
Sex M

Clinician: Dr K Brooksbank
Request Location: GP, Girvan: Dr McMaster et al

GIRVAN
KA26 9AG

17 AUG 2020

This report to : Dr K Brooksbank, GP, Girvan: Dr McMaster et al

Result

Anti nuclear antibodies
ANA Comment :

Negative
Low titre antinuclear antibodies (1/80 and below)
are unlikely to be clinically significant or to
require further action
Minimum recommended re-test interval for ANA is 6
months, other than in the specific instance of
lupus patients on active treatment (RCPATH
National Consensus Recommendations 2015)

Heac
R

Lab No 20B861994
Printed 13/08/20 13:15

Date Collected 10/08/20 09:50
Sample Type Blood

Authorised By Erin Middleton
Page 1 of 1

If you have received this report in error, please return to the Haematology Laboratory

STAS717

NHS Confidential: Personal data about a patient

NHS Ayrshire & Arran

Area Laboratory Haematology

DORRICOTT, GARY
27A KNOCKCUSHAN STREET

CHI No. 0807890030
Unit No.
DOB 08/07/1989
Sex M

Clinician: Dr K Brooksbank
Request Location: GP, Girvan: Dr McMaster et al

GIRVAN
KA26 9AG

17 AUG 2020

This report to : Dr K Brooksbank, GP, Girvan: Dr McMaster et al

	Result	Units	Normal Range
RA Test	1.0 IU/ml	NEGATIVE	

Medic

Lab No 20B861994
Printed 14/08/20 04:37

Date Collected 10/08/20 09:50
Sample Type Blood

Authorised By Julie Logan
Page 1 of 1

If you have received this report in error, please return to the Haematology Laboratory

STAS717

NHS Confidential: Personal data about a patient

NHS Ayrshire & Arran

Area Laboratory Clinical Biochemistry

DORRICOTT, GARY
27A KNOCKCUSHAN STREET

CHI No. 0807890030
Unit No.
DOB 08/07/1989
Sex M

Clinician: Dr K Brooksbank
Request Location: GP, Girvan: Dr McMaster et al

GIRVAN
KA26 9AG

12 AUG 2020

This report to : Dr K Brooksbank , GP, Girvan: Dr McMaster et al

	Result	Units	Normal Range
Free T4	21.1	pmol/L	10.0 - 22.0
TSH	1.17	mU/L	0.27 - 4.20



Lab No 20B861994

Date Collected 10/08/20 09:50

Authorised By BHI W7AUQPRO Service Account

Printed 11/08/20 04:42

Sample Type Blood

Page 1 of 1

If you have received this report in error, please return to the Clinical Biochemistry Laboratory

NHS Confidential: Personal data about a patient

NHS Ayrshire & Arran

Area Laboratory Clinical Biochemistry

DORRICOTT, GARY
27A KNOCKCUSHAN STREET

CHI No. 0807890030
Unit No.
DOB 08/07/1989
Sex M

Clinician: Dr K Brooksbank
Request Location: GP, Girvan: Dr McMaster et al

GIRVAN
KA26 9AG

12 AUG 2020

This report to : Dr K Brooksbank, GP, Girvan: Dr McMaster et al

	Result	Units	Normal Range
Urea	5.6	mmol/L	2.5 - 7.8
Creatinine	78	µmol/L	50 - 120
Sodium	142	mmol/L	133 - 146
Potassium	4.2	mmol/L	3.5 - 5.3
Chloride	103	mmol/L	95 - 108
eGFR result/1.73m2	>60	mL/min	>60
Bilirubin	5	µmol/L	3.0 - 21
ALP	40	U/L	30 - 130
AST	18	U/L	10.0 - 45
ALT	25	U/L	5.0 - 55
Calcium	2.42	mmol/L	2.2 - 2.6
Adjusted Calcium	2.26	mmol/L	2.2-2.6
Phosphate	0.97	mmol/L	0.8 - 1.5
Total Protein	75	g/L	60 - 80
Albumin	48	g/L	35- 50
Globulin	27	g/L	21 - 35
Uric Acid	H 464	µmol/L	200 - 430
CRP	<5	mg/L	2.0 - 10
Cholesterol	5.1	mmol/L	
Triglyceride	1.29	mmol/L	
LDL Cholesterol	3.19	mmol/L	
HDL Cholesterol	1.32	mmol/L	
Cholesterol:HDL-Ratio	3.86		

Lab No 20B861994

Date Collected 10/08/20 09:50

Authorised By BHI W7AUQPRO Service Account

Printed 11/08/20 04:42

Sample Type Blood

Page 1 of 1

If you have received this report in error, please return to the Clinical Biochemistry Laboratory

NHS Confidential: Personal data about a patient

NHS Ayrshire & Arran

Area Laboratory Haematology

DORRICOTT, GARY
27A KNOCKCUSHAN STREET

CHI No. 0807890030
Unit No.
DOB 08/07/1989
Sex M

Clinician: Dr K Brooksbank
Request Location: GP, Girvan: Dr McMaster et al

GIRVAN
KA26 9AG

This report to : Dr K Brooksbank , GP, Girvan: Dr McMaster et al

12 AUG 2020

	Result	Units	Normal Range
Haemoglobin	168	g/L	133 - 176
White Cell Count	9.0	10 ⁹ /L	3.7 - 9.5
Platelets	262	10 ⁹ /L	150 - 400
RBC	5.45	10 ¹² /L	4.32 - 5.66
Haematocrit	0.49	%	0.39 - 0.50
MCV	89	fL	82 - 98
MCH	30.8	pg	27.3 - 32.6
MCHC	346	g/L	316 - 349
Neutrophils	4.6	10 ⁹ /L	1.5 - 6.5
Lymphocytes	3.1	10 ⁹ /L	1.1 - 5.0
Monocytes	0.9	10 ⁹ /L	0.2 - 0.9
Eosinophils	0.3	10 ⁹ /L	0.1 - 0.7
Basophils	0.1	10 ⁹ /L	0.0 - 0.1
ESR	2	mm/hour	0 - 10

Lab No 20B861994

Date Collected 10/08/20 09:50

Authorised By BHI W7AUQPRO Service Account

Printed 11/08/20 04:42

Sample Type Blood

Page 1 of 1

If you have received this report in error, please return to the Haematology Laboratory

STAS717

NHS Ayrshire & Arran

Area Laboratory Clinical Biochemistry

DORRICOTT, GARY
27A KNOCKCUSHAN STREET

CHI No. 0807890030
Unit No.
DOB 08/07/1989
Sex M

Clinician: Dr K Brooksbank
Request Location: GP, Girvan: Dr McMaster et al

GIRVAN
KA26 9AG

12 AUG 2020

This report to: Dr K Brooksbank, GP, Girvan: Dr McMaster et al

	Result	Units	Normal Range
Vitamin B12	423	ng/L	197 - 771
Folate	L 1.9	ug/L	3.9 - 26.8
Ferritin	.238	ug/L	30 - 400
Haemoglobin A1c	5.7	%	4.8 - 6.0
Haemoglobin A1c (IFCC)	39	mmol/mol	29 - 42



Lab No 20B861994

Date Collected 10/08/20 09:50

Authorised By BHI W7AUQPRO Service Account

Printed 11/08/20 10:06

Sample Type Blood

Page 1 of 1

If you have received this report in error, please return to the Clinical Biochemistry Laboratory

NHS Confidential: Personal data about a patient

Ayr Hospital
Emergency Department
Tel: 01292 614578

Emergency Department Discharge Letter

To: **BW.MCMASTER**

Re: **Gary Dorricott**
27A KNOCKCUSHAN STREET,GIRVAN...
KA26 9AG
DOB: 08/07/1989
ED Attendance No: AYR-20-015659-1
CHI No.: 0807890030

Attendance Details

Date of Attendance: 13/07/2020

Time of Attendance: 11:29:00

Presenting Complaint: rt shoulder pain

Duty Consultant: Dr TERESA HAND

Additional Information: No Attendances in Last 12 months:1 Total Number of Attendances:3

Diagnosis Limb pain,Shoulder,Right

Treatment Analgesia
Advice
Poly sling

Investigations X-Ray,

Discharge Information:

Additional Information States painful shoulder for over 1 month. No hx injury. Over last week pain has increased ++ States was unable to obtain a GP appointment. No bruising swelling erythema or asymmetry. Global shoulder girdle tenderness. NVI. Decreased ROM. XR : no calcific deposit or acute bony injury. Plan: polysling, advice, analgesia, physio referral. GP FU

Discharged by: Wendy Logan,ENP

NHS Confidential: Personal data about a patient

**Ayr Hospital
Emergency Department
Tel: 01292 614578**

**Emergency
Department
Discharge Letter**

To: **BW.MCMASTER**

Re: **Gary Dorricott**
27A KNOCKCUSHAN STREET,GIRVAN...
KA26 9AG
DOB: 08/07/1989
ED Attendance No: AYR-20-015659-1
CHI No.: 0807890030

**Discharged
by:**

Wendy Logan,ENP

If you have any queries about this patient, please contact one of the staff at the above number

Dr Bruce W McMaster, Dr C Dawn Moore & Dr Kenneth L Brooksbank

**Health Centre
Girvan Community Hospital
GIRVAN
KA26 9HQ**

**Tel. (01465) 713343
Fax. (01465) 716424**

KLB/AF

Date Dictated: 29 January 2020
Date Typed: 30 January 2020

To Whom It May Concern

**RE: Mr Gary Dorricott 27a Knockcushan Street, GIRVAN, KA26 9AG
08/07/1989**

I would be grateful for your assessment of this gentleman to have appropriate level of benefits.

Gary has a number of health problems. He was diagnosed as having ADHD in 1999 and epilepsy in 1993, though he has not had a seizure for some time.

Gary's main issues at the moment are back pain with sciatica. He has ongoing pain in his lower back with some left sided sciatic symptoms. More recently he has increasing severe arm pain with localised tendonitis at his forearm.

Additionally he has long standing mental health problems with persisting low mood and past psychological traumas, which still cause him difficulties today. I had previously referred him to the Mental Health Team and he has had input from them in the past.

At the moment Gary is on lansoprazole, etoricoxib, tramadol, paracetamol and nortriptyline.

As he is still having ongoing symptoms I am grateful for your support.

Yours sincerely

Dr K L Brooksbank

Dr K L Brooksbank



MENTAL HEALTH SERVICES

South Ayrshire Primary Care
Mental Health Team
Ailsa Hospital
Dalmellington Road
AYR
KA6 6AB

PERSONAL & IN CONFIDENCE

Dr Brooksbank
Girvan Community Hospital
Bridgemill
Girvan
KA26 9HQ

Date 13/11/19
Our Ref LD/LP
Enquiries to Admin
Telephone 01292 559710

Dear Dr Brooksbank

GARY DORRICOTT, 27A KNOCHCUSHAN STREET, GIRVAN, KA26 9AG
CHI: 0807890030

Further to referral of the above named, they were offered the opportunity to contact us to make an appointment.

However, as the client has not made contact with the department, we can only assume that he does not wish to pursue treatment at this time. We have, therefore, no option but to discharge him from our service.

Yours sincerely

Lorraine Dodds

Lorraine Dodds
Acting Team Leader (Primary Care Mental Health Team)

www.nhsaaa.net

[9Nj]

A handwritten signature in black ink, appearing to be 'LD' or similar initials.

A small, handwritten mark or signature at the bottom right of the page.



MENTAL HEALTH SERVICES

South Ayrshire Primary Care
Mental Health Team
Ailsa Hospital
Dalmellington Road
AYR
KA6 6AB

PERSONAL & IN CONFIDENCE

Dr Brooksbank
Girvan Community Hospital
Bridgemill
Girvan
KA26 9HQ

Date 13/11/19
Our Ref LD/LP
Enquiries to Admin
Telephone 01292 559710

Dear Dr Brooksbank

**GARY DORRICOTT, 27A KNOCHCUSHAN STREET, GIRVAN, KA26 9AG
CHI: 0807890030**

Further to referral of the above named, they were offered the opportunity to contact us to make an appointment.

However, as the client has not made contact with the department, we can only assume that he does not wish to pursue treatment at this time. We have, therefore, no option but to discharge him from our service.

Yours sincerely

Lorraine Dodds

**Lorraine Dodds
Acting Team Leader (Primary Care Mental Health Team)**

www.nhsaaa.net



MSK DISCHARGE REPORT



Patient Name:	Gary Dorricott
Address:	27A Knockcushan Street, Girvan, Ayrshire, KA26 9AG
CHI:	0807890030
GP:	Dr K Brooksbank
Consultant:	
Referrer Source:	Dr Ravindra Sondhi
Referral Date:	08/08/2019
Start Date:	19/08/2019
Discharge Date:	12/09/2019
No. of treatments:	0
Discharge Reason:	Patient did not attend
Treatment Outcome:	
Therapist:	Cliona Purcell
Location:	GIRVAN PHYSIOTHERAPY

Dear Dr Sondhi,

Diagnosis: low back pain

Patient failed to attend first appointment and has not contacted the service to reschedule. Now discharged.

Yours sincerely,
Authorised on 12/09/2019 09:53:00 by Cliona Purcell.
Cliona Purcell
12/09/2019

Dr KL Brooksbank
Drs McMaster, Moore & Brooksbank
Girvan Community Hospital
Bridgemill
Girvan
KA26 9HQ

NHS Confidential: Personal data about a patient



Rec 21/2/19 Dr BMM

Dr McMinn
GIRVAN COMMUNITY HOSPITAL
GIRVAN
KA26 9HQ

30800/4 40540

Our phone number is: 0141 314 5496

If you have a textphone,
you can call on: 18001 0141 314 5496

If you get in touch with us, tell us this
reference number: JH456412A

Date: 18th February 2019

About your patient

Address

Full Name Mr Gary Dorricott

27a, Knockcushan Street, Girvan, KA26
9AG

NINo JH456412A

Date of birth 8th July 1989

Dear Doctor,

Your patient is being assessed for Universal Credit and we need to find out whether they are able to do any work. By completing this form and providing factual information you will help our Healthcare Professional staff decide whether your patient needs a face-to-face work capability assessment and if so support that assessment.

Please note

- NHS doctors have a **contractual obligation** to provide the information requested without charge.
- The form should be completed from your medical records. A separate examination is not necessary.
- It is acceptable for you to delegate completion of the form to your practice nurse but you must confirm your authorisation by signing at the end.
- Your patient has given consent to allow us to approach you for this information, in accordance with GMC guidelines.
- An online version of this report which can be completed electronically and printed is available at <https://www.gov.uk/government/publications/esa113-interactive-for-use-by-healthcare-practitioners>
- **A fully completed form may help inform the face to face work capability assessment or may mean that your patient will not need a further assessment. It will also help us to make a more informed decision on benefit entitlement.**

COMPUTER PRINTOUTS

You can send us a computer printout of the appropriate part of the patient record if you wish, but you will still have to complete any sections of the form where the answer is not clear from the printout. We are only able to accept information directly relevant to our enquiries. If a printout is available, please make sure it includes the following:

- Active problems;
- Current medication with last prescribed date;
- Details of the last three consultations. Please remove any third party data.

If you have any queries about this form please phone the number above. If you would like to discuss anything with our Healthcare Professional staff, please phone the number above and ask for a member of the Healthcare Professional staff on the customer service desk. If there is any medical evidence that you think would be harmful to your patient's health, please give us this information on a separate sheet of paper so that it can be withheld.

Please reply within 5 working days. A business reply envelope is enclosed for your use.

Thank you for your help.

Yours sincerely,

Mrs Lisa Hanson

PI.04.11957/000850/1/2

NHS Confidential: Personal data about a patient

UC113

About your patient - continued NINo: JH456412A

3 Current conditions not affecting ability to work
Please list any other relevant conditions that do not affect the ability to work.

4 If known from your knowledge of the patient, please tick the boxes that apply and provide a brief explanation if your patient has difficulties with any of the following activities

Walking or moving	<input type="checkbox"/>	<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
Transferring between seats	<input type="checkbox"/>	
Reaching	<input type="checkbox"/>	
Picking up objects	<input type="checkbox"/>	
Manual dexterity	<input type="checkbox"/>	
Communicating with others	<input type="checkbox"/>	
Continence	<input type="checkbox"/>	
Learning simple tasks	<input type="checkbox"/>	
Awareness of hazards	<input type="checkbox"/>	
Initiating and completing personal actions	<input type="checkbox"/>	
Coping with changes or social engagement	<input type="checkbox"/>	
Appropriateness of behaviour	<input type="checkbox"/>	
Eating or drinking	<input type="checkbox"/>	

5 Does the patient have a history of threatening or violent behaviour? No Yes

Tell us about their behaviour within the last 5 years, and whether they have been identified by the Zero Tolerance (Violent Behaviour) Initiative. Use the space below at Part 7

6 Could your patient travel to an examination centre by public transport or taxi? No Yes

Please tell us why at Part 7

7 Additional information
Please continue on a separate sheet if necessary.

*past behaviour - making family doctor aware re court
allegation as witness*

.....

.....

.....

The information you have given us may be copied to the patient, their legal representative or the Tribunal Service.

Your Signature

Signature *[Signature]*

Name IN CAPITALS Dr MCMMASTER

Date 29/10/11

Practice stamp Dr Bruce W McMaster
Health Centre
Girvan Community Hospital
Girvan
KA26 9HQ
Tel: 01465 713343
Fax: 01465 715424

Dr Bruce W McMaster, Dr C Dawn Moore & Dr Kenneth L Brooksbank

**Health Centre
Girvan Community Hospital
GIRVAN
KA26 9HQ**

**Tel. (01465) 713343
Fax. (01465) 716424**

RS/MC

Date Dictated: 29 March 2019
Date Typed: 2 April 2019

To Whom It May Concern

**RE: Mr Gary Dorricott 27a Knockcushan Street, GIRVAN, KA26 9AG
08/07/1989**

I understand that this gentleman is being assessed for work capability and has requested a letter from the practice to support his current inability to carry out any form of gainful employment.

He is currently suffering with stress, anxiety and depression and this relates to a complex previous social family history of having suffered abuse and having been taken into care since early childhood. He is currently struggling due to the fact that his brothers and the rest of his siblings were also abused. However more recently some members of his family are seeking action in the courts against their abuser and he is being asked to provide evidence as a supporting witness. He is finding this incredibly difficulty to cope with as it is now causing flash backs and he is having to relive his childhood which he was hoping to leave behind. This has caused him further anxiety and he is currently not coping, he is unable to sleep. He has very poor social interaction, he is quite volatile with his friends and he is struggling to cope with his emotions. I do not feel that he is going to be fit for any gainful employment for some time. He is currently being signed off. His last certificate was issued until 30 April 2019. I hope you will consider his severe mental anguish and his depression when considering his capacity for work.

Kind Regards.

Yours sincerely

Dr C D Moore

Dr Ravindra Sondhi
Locum GP

Drs McMaster, Moore & Brooksbank's Practice – CHANGE OF PATIENT'S NAME AND/OR ADDRESS DETAILS

Scotland

Deed Poll does not exist under Scots law. Scots law requires only that no one can change his or her name with the intent to defraud. To change the surname of a person under age 16, the permission of all those with parental responsibility is required.

While merely informing others of the new name is enough for it to take legal effect, those whose births are registered in Scotland or have been legally adopted there can optionally apply to the Registrar General for Scotland to have their birth certificate amended to show the new name and have the respective register updated.

PREVIOUS DETAILS	Surname	D O R R I C O T T	Title	M R
	Forename	G A R Y	Middle Name	
	Previous Surname		Date of Birth	0 8 0 7 1 9 8 9
	Address	2 T H E A V E N U E G I R V A N		
		Postcode	K A 2 6 9 0 5	

NEW DETAILS	NEW Surname	D O R R I C O T T	Title	M R
	NEW Forename		Date of Birth	0 8 0 7 1 9 8 9
	NEW Address	2 7 A K N O C K C U S H A N S T R E E T G I R V A N		
		Postcode	K A 2 6 9 A S	
	Telephone Number:	0 7 4 5 4 6 3 6 4 7 5		

Signature		Date	2 7 0 3 2 0 1 9
------------------	---	-------------	-----------------

Print Name	G A R Y D O R R I C O T T
-------------------	---------------------------

If Child Under 16 Please State Relationship to Patient:	
--	--

Name Changed By Deed Poll	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Name Changed With the Registrar General for Scotland	YES <input type="checkbox"/>	NO <input type="checkbox"/>

MENTAL HEALTH SERVICES

06 FEB 2019



Adult Community Mental Health Team
Ailsa Hospital
Dalmellington Road
Ayr,
KA6 6AB
www.nhs-ayrshire.org

CLINICAL IN CONFIDENCE

Dr McMaster
Girvan Community Hospital
Bridgemill
Girvan
KA26 9HQ

Date Typed: 5 February 2019
Your Ref: N/A
Our Ref: JK/AM
CHI: 0807890030
Enquiries to: John Kennedy
Direct Line: 01292 559777

Dear Dr McMaster

RE: GARY DORRICOTT 2 THE AVENUE, GIRVAN, KA26 9DS
CHI: 0807890030

(0144)

The above-named client failed to attend a recent appointment with John Kennedy, Community Mental Health Nurse, and failed to reply to a 14 day letter. He has therefore been discharged from the team at this time.

Should you wish to re-refer in the future, please do not hesitate to contact our service.

Yours sincerely

A Mitchell

Secretary

South Ayrshire Adult Community Mental Health Team



MENTAL HEALTH SERVICES

Adult Community Mental Health Team
Main Building
Ailsa Hospital
Dalmellington Road
Ayr
KA6 6AB



23 JAN 2019

PERSONAL IN CONFIDENCE

Mr Gary Dorricot
2 The Avenue
Girvan
KA26 9DS

Date Typed: 16th January 2019
Your Ref: N/A
Our Ref: JK/AM
CHI No.: 0807890030
Enquiries to: John Kennedy
Direct Line: 01292 559777

Dear Mr Dorricot

You have been referred to the Community Mental Health Team by your GP.

It would be helpful in progressing your referral if you would telephone 01292 559777 between the hours of 9.30 am – 4.30 pm to confirm that you would like an appointment.

If we do not hear from you by **30th January 2019** (14 days) you will be discharged from the Community Mental Health Team back to your referrer.

We look forward to hearing from you.

Yours sincerely,

A handwritten signature in black ink that reads 'JKennedy'.

John Kennedy
Community Mental Health Nurse

Cc Dr Ravinda Sondhi, Girvan Community Hospital, Bridgemill, Girvan KA26 9HQ



MENTAL HEALTH SERVICES

23 JAN 2019

Adult Community Mental Health Team
Main Building
Ailsa Hospital
Dalmellington Road
Ayr
KA6 6AB



PERSONAL IN CONFIDENCE

Mr Gary Dorricot
2 The Avenue
Girvan
KA26 9DS

Date Typed: 16th January 2019
Your Ref: N/A
Our Ref: JK/AM
CHI No.: 0807890030
Enquiries to: John Kennedy
Direct Line: 01292 559777

Dear Mr Dorricot

You have been referred to the Community Mental Health Team by your GP.

It would be helpful in progressing your referral if you would telephone 01292 559777 between the hours of 9.30 am – 4.30 pm to confirm that you would like an appointment.

If we do not hear from you by **30th January 2019** (14 days) you will be discharged from the Community Mental Health Team back to your referrer.

We look forward to hearing from you.

Yours sincerely,

A handwritten signature in black ink that reads 'Kennedy'.

John Kennedy
Community Mental Health Nurse

Cc Dr Ravinda Sondhi, Girvan Community Hospital, Bridgemill, Girvan KA26 9HQ



16⁴⁰

05 JUL 2017

finger inj

GIRVAN COMMUNITY HOSPITAL

DATE: 04.07.17	ARRIVAL TIME (24 HR CLOCK): 11.35	SEEN BY NURSE: 1150	TYPE OF REFERRAL: <input type="checkbox"/> GP <input type="checkbox"/> Parent <input type="checkbox"/> 999 <input type="checkbox"/> RTA <input type="checkbox"/> Self <input type="checkbox"/> Police <input type="checkbox"/> Other (Specify) _____
A&E NUMBER:		SEEN BY DOCTOR:	
SURNAME: Dorriccott	FIRST NAME: Garry	PATIENT ADDRESS: 2 The Avenue, Girvan KA26 9DS TELEPHONE NO: 01463 710985	D.O.B.: 8.7.89. SEX: Male/Female MARITAL STATUS: Married/Single/Widowed.
NEXT OF KIN: ADDRESS: POSTCODE: TELEPHONE NO:	High Kee McAllan (P) as above	GP NAME: GP ADDRESS: SIGNED: CMCordle	Dr. McMaster
TRIAGE NOTES: Temp = 36.1 Pulse = 70 Resp = 12. B/P = 135/81 SPO2 = 97% On = div			
MEDICAL HISTORY:	Diabetes <input type="checkbox"/>	Epilepsy <input type="checkbox"/>	MI <input type="checkbox"/> Asthma <input type="checkbox"/>
ALLERGIES: None known.			
TETANUS PROPHYLAXIS:	Up to Date <input type="checkbox"/> 2003	Need Toxoid <input type="checkbox"/>	Needs Tet Immunoglobulin <input type="checkbox"/>
NOTES: Loc tip of index finger @ hand caught on metal at work yesterday (mechanic) of E superficial lacer extending longitudinal approx 2cm from tip of finger. Wound macerated due to own plastic dressing. Cleansed, no loss of sensation Full ROM Steri-strip x 4 applied & dressed with iodine & tubefast. Advised re infection & to attend Practice Nurse. Fludox 500mg prescribed via phone by Dr. Brooksban & given. Pt states feeling faint following incident. H/c appt given for 16 ⁴⁰ . Tetanus vacc given no			
MEDICINES PRESCRIBED: adverse effect			
CURRENT: None. Pt attended for wound redressing despite being given dressings home. Wound [6544]			
DISCHARGE: redressed & again advised to see practice nurse if any further dressing required			
DOCTOR ATTENDING: SIGNATURE:	Patient had gone back to work despite advice to contrary	REVIEW IN: _____ DAYS AT: <input type="checkbox"/> A&E <input type="checkbox"/> GP SURGERY <input type="checkbox"/> HOME <input type="checkbox"/>	
REASON FOR TRANSFER:			
DATE OF DISCHARGE: 4.7.17 TIME: 1230			

Only Contact Patient where:

Acute Medical Discharge (All Ages) or Patient Over 75 – All Specialities

Medication Reconciliation Patient Details

DORRICOFF, Gary
 0807890030
 2 The Avenue
 GIRVAN
 KA26 9DS Dr B W McMaster
 Health Centre, Girvan, KA269HQ.
 DATE

Date Received:	11/4/16
Date Given To GP:	11/4/16
Date Reviewed by GP:	5/4/16
Date Medication Reconciled:	5/4/16
Date Scanned into DOCMAN:	7/4/16
Tel. No.	Date Patient Contacted: N/A

Medications To Be Added/Changed:

Drug Name	Indication	Strength	Dose

Medications To Be Stopped?

Drug Name
? CO-DYDRAMOL 10/500 TABS (ACUTE)
HAS THE ABOVE TO BE INACTIVATED? YES ✓
11/4/16

Coding Required

Comments

MRI result [62a]	
---------------------	--

GP Signature:
Date:

[Signature]
11/4/16

Reconciler's Signature:
Date:

[Signature]
7/4/16

Dalmellington Road, Ayr,
KA6 6DX
Phone: 01292 610 555

**&
Prescription**

01 APR 2016



Date: 31/03/2016 @ 13:50:41

Page 1 of 1

To: Brooksbank, Dr. KL,
GIRVAN COMMUNITY HOSPITAL,
BRIDGEMILL,
GIRVAN,
KA26 9HQ

Re: GARY DORRICOOTT,
2 THE AVENUE, GIRVAN, Ayrshire, KA26 9DS

DOB: 08/07/1989
Hosp. No.: 0807890030
CHI No.: 0807890030

Date of Admission: 31/03/2016

Ward: STATION 10-AYR

Mode of Admission: Planned Admission

Consultant: MISS SUZY GIBSON (Orthopaedics)

Admission Reason:

Discharge Date: 31/03/2016

Follow-up:

Primary Diagnosis:

Clinical Progress: 26 year old man presenting with an episode of urinary incontinence assoc with back pain radiating down right leg
Referred ?cauda equina
Tender L4-L5, No focal neurology on examination
Admitted for MRI spine following discussion with Neurosurgery
MRI spine showed only minor disc bulges in L3-L5, d/w Neurosurgery - no cauda equina, no further follow-up required
No change to routine medications *last updated 31/03/2016; 1:50 pm by DR NICHOLAS SIMPSON*

Further patient/drug notes:

Allergy/Intolerance	Reaction
Drug Allergy Status Undetermined	

Allergy records are as recorded at time and date of printing.

Drug	Dose	Route	Frequency	Days Supply	GP to continue
*** No TIA medications have been prescribed ***					

Additional Medicines Information:

Medicines discontinued during admission (medicines that patient was recorded as admitted on only)			
Drug	Date	Discontinued by	Discontinue reason
*** Warning - accuracy of information in this section is dependent on details entered by users of the HEPMA system. *** **** Information here may be incomplete and is for guidance only. ****			

Discharged by: DR NICHOLAS SIMPSON

Dispensed by:

Checked by:

Grade: Foundation Year 2.

Date:

Originally Printed: 31/03/2016 @ 13:50

Revised: @

v. 22042016.2.DLP

Page 1 of 1

Registration Details - Patient No: 5675

Personal details...		Address details...	
Date of birth	08/07/1989	Post Code	KA26 9DS
Sex	M	House Name Flat No	
Surname	Dorriscott	No and Street	2 The Avenue
Previous Surname		Village	
Forenames	Gary	Town	GIRVAN
Calling Name	Gary	County	
Title	Mr		
Birth Surname			
Marital Status	Single		
Ethnic Origin	(White) Scottish		
Mothers Name			
Next of Kin			

HA/HB Details...		Contact details...	
Trading partner	Ayrshire & Arran	Home Tel No	710085
Registered GP	Dr Kenneth L Brooksbank	Work Tel No	
Usual GP	Dr Kenneth L Brooksbank	Mobile Tel No	07454636473
Residential Inst		E Mail Address	
Branch Surgery		Reg type notes	
CHI Number	0807890030		
NHS Number	432/89/641		

Practice Information...		Distances	
Dispensing	N	Rural Mileage	
Hospital Number		Blocked Special	
Records At		Walking Quarters	

Further Information		Upload Consent	
Long/Short stay or Dead		SCI-DC Consent	Implied Consent (default)
Date of registration	15/02/2016		

ECS (GP Summary) Consent		AMS/CMS Details	
Patient Consent	Implied Consent (default)	AMS Consent	Yes
Pharmacy Details			
Item Collected Check	No		
CMS Suitability Status	-1		
CMS Registration Status	1		

Medication

Current				
Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
03/03/2016	Co-Dydramol 10/500 Tablets 2 TABS 4-6 HOURLY PRN 56 tablet	03/03/2016P	Dr Kenneth L Brooksbank	ACUTE

Past				
Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
03/03/2016	Lactulose Solution 3.1-3.7 g/5 ml THREE 5ML SPOONFULS TO BE TAKEN TWICE A DAY 300 ML	03/03/2016P	Dr Kenneth L Brooksbank	ACUTE
19/02/2016	Tramadol Hydrochloride Capsules 50 mg ONE OR TWO TO BE TAKEN FOUR TIMES A DAY WHEN REQUIRED 50 CAPSULE	19/02/2016P	Dr Kenneth L Brooksbank	ACUTE
15/02/2016	Salicylic Acid Gel 26 % APPLY DAILY 5 gram	15/02/2016P	Dr Kenneth L Brooksbank	ACUTE
01/02/2016	Tramadol Hydrochloride Capsules 50 mg ONE OR TWO TO BE TAKEN FOUR TIMES A DAY WHEN REQUIRED 100 capsule	01/02/2016P	Dr Kenneth L Brooksbank	ACUTE

19/01/2016	Co-Codamol 30/500 Tablets TWO TO BE TAKEN FOUR TIMES A DAY WHEN REQUIRED 100 TABLET	19/01/2016P	Dr Kenneth L Brooksbank	ACUTE
19/01/2016	Diclofenac Sodium E/c tablets 50 mg ONE TO BE TAKEN THREE TIMES A DAY WITH OR AFTER FOOD 84 tablet	15/02/2016P	Dr Kenneth L Brooksbank	ACUTE
13/02/2015	Amoxicillin Capsules 500 mg ONE TO BE TAKEN THREE TIMES A DAY 15 CAPSULE	13/02/2015P	Dr Bruce W McMaster	ACUTE
05/12/2014	Mirtazapine Tablets 45 mg ONE TO BE TAKEN AT NIGHT 56 TABLET	05/12/2014P	Dr Bruce W McMaster	ACUTE
04/11/2014	Mirtazapine Tablets 45 mg ONE TO BE TAKEN AT NIGHT 28 TABLET	04/11/2014P	Dr C D Moore	ACUTE
02/09/2014	Mirtazapine Tablets 30 mg ONE TO BE TAKEN AT NIGHT 28 TABLET	02/10/2014P	Dr Calum Dobbie	ACUTE
21/07/2014	Mirtazapine Tablets 30 mg ONE TO BE TAKEN AT NIGHT 28 TABLET	21/07/2014P	Dr Calum Dobbie	ACUTE
21/07/2014	Diclofenac Sodium E/c tablets 50 mg ONE TO BE TAKEN THREE TIMES A DAY WITH OR AFTER FOOD 42 tablet	21/07/2014P	Dr Calum Dobbie	ACUTE
09/05/2014	Mirtazapine Tablets 30 mg ONE TO BE TAKEN AT NIGHT 28 TABLET	09/05/2014P	Dr Bruce W McMaster	ACUTE
11/04/2014	Mirtazapine Tablets 30 mg ONE TO BE TAKEN AT NIGHT 28 TABLET	11/04/2014P	Dr Bruce W McMaster	ACUTE
14/03/2014	Fluoxetine Hydrochloride Capsules 20 mg ONE TO BE TAKEN EACH DAY 42 capsule	14/03/2014P	Dr Bruce W McMaster	ACUTE
14/03/2014	Diclofenac Sodium E/c tablets 50 mg ONE TO BE TAKEN THREE TIMES A DAY WITH OR AFTER FOOD 42 tablet	14/03/2014P	Dr Bruce W McMaster	ACUTE
27/01/2014	Fluoxetine Hydrochloride Capsules 20 mg ONE TO BE TAKEN EACH DAY 42 capsule	27/01/2014P	Dr Kenneth L Brooksbank	ACUTE
03/12/2013	Fluoxetine Hydrochloride Capsules 20 mg ONE TO BE TAKEN EACH DAY 42 capsule	03/12/2013P	Dr Kenneth L Brooksbank	ACUTE
11/11/2013	Diclofenac Sodium E/c tablets 50 mg ONE TO BE TAKEN THREE TIMES A DAY WITH OR AFTER FOOD 84 tablet	11/11/2013P	Dr Kenneth L Brooksbank	ACUTE
11/11/2013	Co-Codamol 30/500 Tablets TWO TO BE TAKEN FOUR TIMES A DAY WHEN REQUIRED 60 tablet	11/11/2013P	Dr Kenneth L Brooksbank	ACUTE
11/11/2013	Amitriptyline Hydrochloride Tablets 10 mg ONE OR TWO TABLETS TO BE TAKEN AT NIGHT 56 tablet	11/11/2013P	Dr Kenneth L Brooksbank	ACUTE
13/06/2013	Amoxicillin Capsules 500 mg ONE TO BE TAKEN THREE TIMES A DAY 21 capsule	13/06/2013P	Dr Kenneth L Brooksbank	ACUTE
25/09/2012	Ibuprofen Tablets 400 mg ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD 42 tablet	25/09/2012P	Dr C D Moore	ACUTE
15/01/2010	Beclometasone Aqueous nasal spray 50 micrograms/actuation 2 Puffs bd 1*1 spray	15/01/2010P	Dr Kenneth L Brooksbank	ACUTE
29/12/2008	Permethrin Dermal cream 5 % Apply As directed 30 x 2 CREAM	29/12/2008P	Dr Bruce W McMaster	ACUTE
18/04/2006	Diclofenac Sodium E/c tablets 50 mg 1 Tab 3 times daily 84 TABS	18/04/2006P	Dr Kenneth L Brooksbank	ACUTE
18/04/2006	Trimovate Cream Apply sparingly Twice daily 30 CREAM	18/04/2006P	Dr Kenneth L Brooksbank	ACUTE
04/11/2005	Flucloxacillin Capsules 500 mg 1 Cap 4 times daily 28 CAPS	04/11/2005P	Dr Kenneth L Brooksbank	ACUTE
04/11/2005	Fucidin H Cream Apply Twice daily 30 CREAM	04/11/2005P	Dr Kenneth L Brooksbank	ACUTE

Drs McMaster, Moore & Brooksbank's Practice – CHANGE OF PATIENT'S NAME AND/OR ADDRESS DETAILS

Scotland

Deed Poll does not exist under Scots law. Scots law requires only that no one can change his or her name with the intent to defraud. To legally change the surname of a person under age 16, the permission of all those with parental responsibility is required.

While merely informing others of the new name is enough for it to take legal effect, those whose births are registered in Scotland or have been legally adopted there can optionally apply to the Registrar General for Scotland to have their birth certificate amended to show the new name and have the respective register updated.

CURRENT DETAILS	Surname	D O R N I C O T T	Title	M R
	Forename	G A R Y	Middle Name	
	Previous Surname		Date of Birth	0 8 0 7 1 9 8 9
	Address	1 0 C L Y D E V I E W G I R V A N		
		Postcode	K A 2 6 9 0 5	

DETAILS TO BE CHANGED	NEW Surname	D O R K I C O T T	Title	M R
	NEW Forename	G A R Y	Date of Birth	0 8 0 7 1 9 8 9
	NEW Address	2 T H E A V E N U E G I R V A N S O U T H A Y R S H I R E		
		Postcode	K A 2 6 9 0 5	
	Telephone Number:	0 1 4 6 5 7 1 0 0 8 5		

Signature		Date	1 5 0 2 1 6
Print Name	G D O R N I C O T T		

If Child Under 16 Please State Relationship to Patient:

--	--	--	--	--	--	--	--	--	--

Name Changed By Deed Poll YES NO

Name Changed With the Registrar General for Scotland YES NO

17 OCT 2014

Dr AT Hand Dr E Ofei Dr A Stevenson Dr A Krichell Dr S Learmonth Dr F Gibson

Dr. JJ LEDGER
DR MCCULLOCH & PARTNERS
GIRVAN COMMUNITY HOSPITAL
BRIDGEMILL
GIRVAN
KA26 9HQ

Accident and Emergency

Ayr Hospital
Dalmellington Road, Ayr, KA6 6DX

Phone: 01292 614615
Fax: 01292 288105

Duty Consultant Dr Alan Krichell

Gary Dorricott

10 CLYDE VIEW
GIRVAN, KA26 9DJ

DOB: 08/07/1989
A/E No: AYR-14-035878
CHI No: 0807890030

Date and Time of Attendance: 12 Oct 2014 11:43
Total A&E Attendances = 0 , attendances in last year = 0

Diagnosis Laceration , Hand , Right

Treatment Wound toilet, Wound glue, Advice, Wound dressing

Drugs:

Investigations

Follow up: Discharge, no follow up

Usual place of residence

Additional Information: laceration palm rt hand from edge of copper. superficial wound- no neuro vasc deficit.cleaned,glued,dry dressing and supplies

Wendy Thomas
ENP

If you have any queries about this patient, please contact one of the staff at the above number.

Mental Health Services

19 FEB 2014

South Ayrshire Primary Care
Mental Health Team
"Glenapp"
Ailsa Hospital
Dalmellington Road
AYR KA6 6AB

Tel: 01292-559710



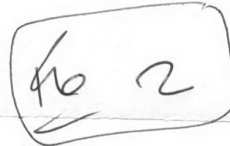
CLINICAL IN CONFIDENCE

Dr Brooksbank
The Health Centre
Girvan Community Hospital
Bridgemill
GIRVAN
KA26 9HQ

Date: 14th February, 2014
Our Ref: JL/GG
Enquiries to: Admin
Direct Line: 01292-559710

Dear Dr Brooksbank

Re: **Gary Dorricott, 10 Clyde View, Girvan, KA26 9DJ**
CHI : 0807890030



You recently referred the above named for assistance with anger management. As there was no concurrent mental health difficulty identified within the referral, we have sent some self help information to your patient on "Managing Anger".

Unfortunately, there does not seem to be a specific service that provides only anger management in our area and we have highlighted this gap in service through Clinical Governance Reporting mechanisms.

Yours sincerely,

John Leighton

JOHN LEIGHTON
Primary Care Mental Health
Team Leader

www.nhsayrshireandarran.com



GIRVAN COMMUNITY HOSPITAL

Advice
Rog'd
Car Battery.

DATE: 27/9/12	ARRIVAL TIME (24 HR CLOCK): 10.35	SEEN BY NURSE: 10.35	TYPE OF REFERRAL: <input type="checkbox"/> GP <input type="checkbox"/> Parent <input type="checkbox"/> 999 <input type="checkbox"/> RTA <input type="checkbox"/> Self <input type="checkbox"/> Police <input type="checkbox"/> Other (Specify)
A&E NUMBER:	10.35	SEEN BY DOCTOR:	
SURNAME: JORRICO	FIRST NAME: GARY	PATIENT ADDRESS: 2 THE AVENUE GIRVAN	D.O.B.: 8/7/89
NEXT OF KIN: MARIE SPURRIE	GP NAME: DR M. MALIS	POSTCODE:	GP ADDRESS: G.C.H.
ADDRESS: 10 CLYDE VIEW	GP ADDRESS:	TELEPHONE NO.:	
POSTCODE:	TELEPHONE NO.:		
TRIAGE NOTES: Temp = _____ Pulse = _____ Resp = _____ B/P = _____ SPO2 = _____ On = _____		Signed: _____	
MEDICAL HISTORY: Diabetes <input checked="" type="checkbox"/> Epilepsy <input type="checkbox"/> MI <input type="checkbox"/> Asthma <input type="checkbox"/>			
ALLERGIES: none known			
TETANUS PROPHYLAXIS: Up to Date <input type="checkbox"/> Need Toxoid <input type="checkbox"/> Needs Tet Immunoglobulin <input type="checkbox"/>			
NOTES: Car battery exploded splashing arms & face with acid. Immediately showered & removed clothing. Now here to seek advice. O/E nil to see over arms or face. No eye injury (wearing glasses) No mucosal contact. worried re latent burns/blisters. Advised re observing for same & to be aware of onset of burning pain & advised to return for treatment/assessment of burns			
MEDICINES PRESCRIBED: CURRENT: Brufen			
DISCHARGE:			
DOCTOR ATTENDING:	REVIEW IN: _____ DAYS	AT: A&E <input type="checkbox"/> GP SURGERY <input type="checkbox"/> HOME <input type="checkbox"/>	
SIGNATURE:	OR TRANSFER TO:	REASON FOR TRANSFER:	
DATE OF DISCHARGE: 27.9.12	TIME: 10.50		

Department of Radiology

The Davidson Hospital
The X-ray Department
The Avenue
Girvan



RADIOLOGY REPORT

CHI NUMBER: 0807890030 **Examination Number:** 30351549 **Examination Date:** 30/04/2009

Name: Dorricott, Gary **DOB:** 08/07/1989

Address: 10 CLYDE VIEW, GIRVAN, , KA26 9DJ – CC: -

Referring Department / Location: MCMASTER BRUCE

GIRVAN HEALTH CENTRE

109A HENRIETTA STREET

GIRVAN

KA26 9AN

Referring Consultant: GP Requestor

Date Dictated: 30/04/2009 **Typed by:** None

Examination: US Testes

Clinical Indication:

Report:

Examination performed and reported by Sonographer.

Both testes and epididymides were examined.

No abnormality was demonstrated.

Dictating Radiologist / Clinical Specialist Penny McRoberts (Sonographer)

Verified by: Penny McRoberts (Sonographer)

NHS Confidential: Personal data about a patient

NHS Ayrshire & Arran General Hospital Division **Area Laboratory** **Clinical Biochemistry**

DORRICOTT, GARY
10 CLYDE VIEW
GIRVAN
KA269DJ

CHI No. 0807890030
Unit No.
DOB 08/07/1989
Sex M

Clinician: Dr B W McMaster
Request Location: GP, Girvan: Dr McMaster et al

This report to : Dr B W McMaster, GP, Girvan: Dr McMaster et al

	Result	Units	Normal Range
Free T4	15.8	pmol/L	9.0 - 24
TSH	1.04	miu/L	0.3 - 6.0

Lab No 09B820031
Printed 09/04/09 13:14

Date Collected 08/04/09 09:40
Sample Type Blood

Authorised By John Williamson
Page 1 of 1

If you have received this report in error, please return to the Clinical Biochemistry Laboratory

Ayrshire & Arran Acute Hospitals NHS Trust

DORRICOTT,GARY

10 CLYDE VIEW

GIRVAN

KA269DJ

CHI No. **0807890030**

Unit No.

DOB **08/07/1989**

Sex **M**

Area Laboratory

Haematology

Clinician: **Dr B W McMaster**

Request Location: **GP, Girvan: Dr McMaster et al**

This report to : Dr B W McMaster , GP, Girvan: Dr McMaster et al

	Result	Units	Normal Range
Haemoglobin	16.5	g/dL	13.5 - 19.6
White Cell Count	5.9	10 ⁹ /L	4.0 - 11.5
Platelets	256	10 ⁹ /L	150 - 450
RBC	5.77	10 ¹² /L	4.2 - 6.5
Haematocrit	0.48	%	0.4 - 0.6
MCV	83	fl	79 - 100
MCH	28.6	pg	25 - 32
MCHC	34.6	g/dL	30 - 36
Neutrophils	3.0	10 ⁹ /L	1.5 - 7.5
Lymphocytes	2.3	10 ⁹ /L	1.5 - 4.5
Monocytes	0.5	10 ⁹ /L	0.2 - 1.0
Eosinophils	0.1	10 ⁹ /L	0.04 - 0.5
Basophils	0.0	10 ⁹ /L	0 - 0.1

JB 50005

Lab No 09H820031
Printed 08/04/09 16:12

Date Collected 08/04/09 09:40
Sample Type Blood

Authorised By Karen Willis
Page 1 of 1 Interim report

If you have received this report in error, please return to the Haematology Laboratory

NHS Ayrshire & Arran General Hospital Division

Area Laboratory Clinical Biochemistry

DORRICOFF, GARY
10 CLYDE VIEW
GIRVAN

CHI No. 0807890030
Unit No.
DOB 08/07/1989
Sex M

Clinician: Dr B W McMaster
Request Location: GP, Girvan: Dr McMaster et al

KA269DJ

This report to : Dr B W McMaster , GP, Girvan: Dr McMaster et al

	Result	Units	Normal Range
Urea	5.0	mmol/L	2.5 - 7.5
Creatinine	66	µmol/L	50 - 125
Sodium	143	mmol/L	135 - 145
Potassium	4.0	mmol/L	3.5 - 5.0
Chloride	105	mmol/L	95 - 108
Bicarbonate	25	mmol/L	22 - 28
Total Bilirubin	7	µmol/L	3.0 - 15
ALP	L 57	iu/L	62 - 234
AST	23	iu/L	10.0 - 40
ALT	26	iu/L	10.0 - 50
Total Protein	80	g/L	63 - 83
Albumin	50	g/L	39 - 51
Globulin	30	g/L	21 - 35
CRP	<5	mg/L	2.0 - 10

Lab No 09B820031
Printed 09/04/09 06:45

Date Collected 08/04/09 09:40
Sample Type Blood

Authorised By Dr David Boag
Page 1 of 1

If you have received this report in error, please return to the Clinical Biochemistry Laboratory

Ayrshire & Arran Acute Hospitals NHS Trust

DORRICOTT, GARY
10 CLYDE VIEW
GIRVAN

CHI No. 0807890030
Unit No.
DOB 08/07/1989
Sex M

KA269DJ

Area Laboratory

Haematology

Clinician: Dr B W McMaster
Request Location: GP, Girvan: Dr McMaster et al

This report to : Dr B W McMaster , GP, Girvan: Dr McMaster et al

	Result	Units	Normal Range
Haemoglobin	16.5	g/dL	13.5 - 19.6
White Cell Count	5.9	10 ⁹ /L	4.0 - 11.5
Platelets	256	10 ⁹ /L	150 - 450
RBC	5.77	10 ¹² /L	4.2 - 6.5
Haematocrit	0.48	%	0.4 - 0.6
MCV	83	fl	79 - 100
MCH	28.6	pg	25 - 32
MCHC	34.6	g/dL	30 - 36
Neutrophils	3.0	10 ⁹ /L	1.5 - 7.5
Lymphocytes	2.3	10 ⁹ /L	1.5 - 4.5
Monocytes	0.5	10 ⁹ /L	0.2 - 1.0
Eosinophils	0.1	10 ⁹ /L	0.04 - 0.5
Basophils	0.0	10 ⁹ /L	0 - 0.1
ESR	4	mm/hour	1.0 - 12

JB:53006

Lab No 09H820031
Printed 09/04/09 06:45

Date Collected 08/04/09 09:40
Sample Type Blood

Authorised By Vincent Kowalski
Page 1 of 1

If you have received this report in error, please return to the Haematology Laboratory

Dorriccott, Gary
DoB: 08/07/1989

Report Valid On 29/08/05 17:03

Love Street Medical Centre
 Page number 1

Registration

Mr Gary Dorricott
 Kibble School
 1 Goudie St
 PAISLEY
 PA3 2LG

Telephone: 889 0044

Contact: ?

Contact/Relship: ?

Email: ?

CHI Number: 0807890030

NHS Number: 432/89/641

Patient ID:

Occupation:

Registered GP: Dr Parag Patel

Repeat Consultation: ?

Registered: 24/09/2002

Confirmed: 24/09/2002

BMI: 24.6

Height: 1.6 m

Weight: 63 kg

Parity: 0

Gravida: 0

Service Code: Permanent

DoB: 08/07/1989

Age: 16

Dispensing: No

Road: 0 Water: 0 FootPath: 0

Marital Status: Single

Seen By GP: Dr Parag Patel

Acute Consultation: 07/09/2004

Records Received: 23/10/2002

BP: 0/0

Priority Clinical / User Marker

Repeat Medication

Drug/Preparation	Quantity/Dose/Frequency	Start	Last	Interval	
				Pres.	Review

Adverse Reactions

Read Code Description

Clinical / User Marker

- 23/10/2002 Medium Patient MRE received from HB
- 03/10/2002 Medium Pat. GP7B/GP8B card from HB
- 24/09/2002 Medium Patient reg. form sent to HB
- 23/09/2002 Low Ex smoker
- 23/09/2002 Low Ex-light drinker - (1-2u/day)
- 23/09/2002 Low No relevant family history

Screening

07/09/2004	Smoker\$\$ Status	Never smoked tobacco	
	No Action Required	Do not send recall letter	Do not send result letter
23/09/2002	Height\$\$	O/E - height	
	No Action Required	Do not send recall letter	Do not send result letter
23/09/2002	Weight\$\$	O/E - weight	
	Repeat after an Interval - 36 Months	Do not send recall letter	Do not send result letter

Referrals

Date Rec.	Priority	Provider	Speciality	Nature	Type
Ref. Appt.		Reason For Referral	Referred By	Attendance Type	

Acute Prescriptions

Dorrcott, Gary
DoB: 08/07/1989

Report Valid On 29/08/05 17:03

Love Street Medical Centre
Page number 2

Drug/Preparation	Quantity/Dose/Frequency	Date
Brompheniramine Maleate ELIX 2MG/5ML	200 5 ml 3 times daily	07/09/2004
Salatac GEL	1 Apply At night	04/12/2002
Salicylic Acid SOL 26%	10 Apply At night	29/10/2002

Inactive Repeat Drugs

Drug/Preparation	Quantity/Dose/Frequency	Start	Last	Intervals	
				Pres.	Review

Last Encounter

Dr Jacqueline McKeon Date: Sep 7 2004 11:20AM
cough for 2 weeks chest clear pfr 550l/min

Screening:

Smoker\$\$ Status - Never smoked tobacco - No Action Required

Clinical / User Markers:

Referrals:

Acute Prescriptions:

Brompheniramine Maleate - ELIX 2MG/5ML 5 ml - 3 times daily 200

Repeat Prescriptions:

Disease Protocol Sessions:

=====

Dr Guy Haworth Date: Dec 4 2002 2:59PM

Screening:

Clinical / User Markers:

Referrals:

Acute Prescriptions:

Salatac - GEL Apply - At night 1

Repeat Prescriptions:

Disease Protocol Sessions:

Dorrcott, Gary
DoB: 08/07/1989

Report Valid On 29/08/05 17:03

Love Street Medical Centre
Page number 3

=====
Dr Daniel Brandon
warts fingers both hands not keen on In2

Date: Oct 29 2002 1:30PM

Screening:

Clinical / User Markers:

Referrals:

Acute Prescriptions:

Salicylic Acid - SOL 26%

Apply - At night

10

Repeat Prescriptions:

Disease Protocol Sessions:

=====
Automatically generated by transaction

Screening:

Clinical / User Markers:

Patient MRE received from HB - -

Referrals:

Acute Prescriptions:

Repeat Prescriptions:

Disease Protocol Sessions:

=====
Automatically generated by transaction

Screening:

Clinical / User Markers:

Pat. GP7B/GP8B card from HB - -

Referrals:

Dorrcott, Gary
DoB: 08/07/1989

Report Valid On 29/08/05 17:03

Love Street Medical Centre
Page number 4

Acute Prescriptions:

Repeat Prescriptions:

Disease Protocol Sessions:

=====

Screening:

Height\$\$ - O/E - height - No Action Required
Weight\$\$ - O/E - weight - Repeat after an Interval - (Review 36M)

Clinical / User Markers:

No relevant family history - -
Ex-light drinker - (1-2u/day) - -
Ex smoker - -

Referrals:

Acute Prescriptions:

Repeat Prescriptions:

Disease Protocol Sessions:

=====

Automatically generated by transaction

Screening:

Clinical / User Markers:

Patient reg. form sent to HB - -

Referrals:

Acute Prescriptions:

Repeat Prescriptions:

Disease Protocol Sessions:

Dorriccott, Gary
DoB: 08/07/1989

Report Valid On 29/08/05 17:03

Love Street Medical Centre
Page number 5

=====
=====

Appointments List

Dr Jacqueline McKeon	Sep 7 2004 11 chesty cough being sick
Dr Daniel Brandon	Oct 29 2002 1:30PM
Dr Guy Haworth	Oct 9 2002 5:15PM
Dr Daniel Brandon	Jan 27 2004 9:55AM

GREATER RENFREWSHIRE DIVISION
MEDICAL DIRECTORATE
CONSULTANT: DR A J DORWARD

Royal Alexandra Hospital
Corsebar Road
PAISLEY
PA2 9PN



Dr J McKeown
40 Love Street
PAISLEY

Date 12 May 2005
Our Ref CM/SCS/479473

DIRECT 0141 314 6823
FAX 0141 889 5844

jm16/05/2005

Dear Dr McKeown

Gary DORRICUTT 8.7.89
1 Goudie Street Paisley

I reviewed this young man at Dr Dorward's clinic. He was admitted in March this year initially under the surgeons with what was thought to be right abdominal pain. However throughout the course of his stay it became obvious that he had a right sided chest infection and grew pneumococcus in his blood cultures. I see that at this point chest x-ray also raised the possibility of some lymphadenopathy and possible lymphoma.

Since discharge he remains well and is getting back to his old self. He denies any cough, sputum or haemoptysis. He is minimally short of breath when playing football but this is improving. However he does continue to have problems with sweating.

On examination he looked well, heart rate 70 beats a minute, chest had slightly decreased air entry at the right base, abdomen was soft and non tender. There was no spleen palpable or evidence of any inguinal, cervical or axillary lymphadenopathy. Repeat chest x-ray demonstrated slightly elevated right hemi diaphragm but nil else. Unfortunately we did not have his previous films for comparison purposes.

I discussed the case with Dr Dorward who thinks this was merely a chest infection and there is no evidence of lymphoma. We have therefore reassured him and not arranged routine review.

Yours sincerely

A handwritten signature in black ink, appearing to be 'C Marshall', written over a horizontal line.

C MARSHALL
SENIOR HOUSE OFFICER

IMMEDIATE DISCHARGE LETTER AND PRESCRIPTION FORM

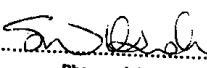


HOSPITAL VAH
 Ward 24
 Consultant _____
 Date of Discharge 4/4/05
 G.P. _____
 G.P. Tel. No. _____

PATIENT IDENTIFICATION DATA - IF LABEL USED AFFIX TO ALL CC. JES
 Patient's Name LARY DORRIGOTT
 Home Address _____
 Age 15 YRS 8/4/1989
 Unit No. HY9443

Medicine (inc. form of preparation e.g. tablets)	Dose	Times of Administration				Quantity supplied by Pharmacy	* Continuation of Treatment from date of discharge (see below)
<u>CEFRALOR</u>							
<u>CEFRALOR</u>	<u>375mg</u>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<u>10</u>	<u>5 MORE DAYS</u>
<u>CLORITINDOLMINE</u>	<u>50mg</u>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<u>10</u>	<u>5 MORE DAYS</u>
<u>* PARACETAMOL 30/500</u>	<u>2 TABS</u>	<u>AS REQ'D</u>	<u>AS REQ'D</u>	<u>AS REQ'D</u>		<u>30</u>	<u>5 MORE DAYS</u>
							<u>EMOGEN</u>

Drug Sensitivity
NIKDA.
 JC07/04/2005

A 7 days supply has been dispensed

 Pharmacist
4.4.05
 Date Dispensed


MEDICINES DISCONTINUED (with reasons)

* CONTINUATION OF TREATMENT
 It is important to state in this column
 (a) The number of days for which treatment should be continued from DATE OF DISCHARGE.
 (b) If treatment is to be for indefinite period mark "indefinite."
 (c) If treatment is to be intermittent or irregular, mark "SEE COMMENTS BELOW." and give full details in the Comments space.

DIAGNOSIS (if appropriate)
→ PRESUMED PNEU @ hypochondrium + @ chest.
? appendicitis? pylorospasm?
SHOWN BY SPECIALIST ISSUES → PNEUMONIA.

OTHER TREATMENT and COMMENTS (Including details of dressings etc.)
* SN contacted co-codamol 30/500mg PRN

FOLLOW UP
 Clinic: _____ Date _____ / Appointment to follow
 G.P.: _____ If needed / _____ weeks _____ months


 PRESCRIBER'S SIGNATURE
Wagon
 PRESCRIBER'S NAME (IN B)

A FULL LETTER WILL FOLLOW

SURGICAL DIRECTORATE



MR KENNETH G MITCHELL
Consultant General Surgeon
Royal Alexandra Hospital
Corsebar Road
PAISLEY PA2 PN

Telephone Enquiries - Lorraine - Direct Line 0141 314 6979
Fax: 0141-314-7046
E-mail: lorraine.clark@rah.scot.nhs.uk

KGM/LC/479473

Dr McKeown
Love Street Medical Centre
40 Love Street
PAISLEY
PA3 2 DY

JC13/04/2005

Dear Dr McKeown

GARY DORRICUT DOB 08.07.89
1 GOUDIE STREET, PAISLEY

ADMITTED	30.03.05
DISCHARGED	04.04.05
DIAGNOSIS	CHEST INFECTION
MANAGEMENT	IV ANTIBIOTICS

Gary was admitted with upper abdominal pain, which turned out to be pleuritic chest pain. He was reviewed by the physicians and was allowed home when he responded. He had a very large number of streptococci in his blood culture for such a young person and of note is that his spleen was slightly enlarged on ultrasound.

He is going to be seen back at Dr Dorward's clinic in two weeks time.

Yours sincerely


PAUL GLEN
SURGICAL SPR

Gallacher, Paula

From: gm.s.ac-hb.acpces@nhs.net
Sent: 30 March 2005 01:00
To: ooh-c87560@renver-pct.scot.nhs.uk
Subject: Call #51727 29-Mar-2005

PP04/04/2005

Call No.: 51727 NHS ARGVLL AND CLYDE Date:
29-Mar-2005 23:08

Call Category: PCC Priority: Within 2
Hours

Age: 08-Jul-1989 (Age: 15 years) Patients Name: Gary
Dorricott
Current Location: The Kibble School (North UnHome Address: The Kibble
School (North Unit)
Goudie Street Goudie Street
Paisley Paisley
PA3 2LG PA3 2LG
Tel. No.: 0141 889 0044 Tel.No.: 0141 889 0044

Caller Origin: Other Caller Name: Alison Williams Tel. No.:
0141 889 0044

Gender: Male Community Health Index: 0807890030

Temporary Resident: Surgery: Love Street Medical CentrGP: Patel,
P

Reported Condition:

SICKNESS/LEFT > RIGHT PAIN
\
|

NHS24 Ref.No.: 1817802 NHS24 Date/Time: 29-Mar-2005
22:55

NHS24 Consultation Start: 29-Mar-2005 23:04 NHS24 Consultation Complete:
29-Mar-2005 23:06

NHS24 Outcome: Attend PCEC within 2 Hrs

NHS24 Clinical Summary:

Clinical summary created: 29-Mar-2005

WORSENING ABDOMINAL PAIN,VOMITING AND FEVER.ABDOMEN APPEARS
SWOLLEN.DISTRESSED ++ WITH
PAIN.ADVISED TO ATTEND PAISLEY PCEC AT 23.40 HRS.

Past Medical History:

NIL

Medications:

PARACETAMOL

Allergies:

NIL

TIMES:- Arrival time: 23:51 Cons. begin: 23:51

Consulting Doctor: Al-Janabi, S

Clinical Notes:

acute abdomen,.....

? appendicitis,...rupture appendix....?

abd pain 2 days,bowel urine ok,

vomiting, sever abd pain,...rebound tendernes, T 38.8

grunting breathing pain in lower R chest on deep breathing,

Prescribed Medication:

Follow-Ups:

follow up message (Admitted To Hospital)

admission to RAH...A*E surgeon on call,

51727 Gary Dorricott

This e-mail is confidential and privileged. If you are not the intended recipient please accept our apologies; please do not disclose, copy or distribute information in this e-mail or take any action in reliance on its contents: to do so is strictly prohibited and may be unlawful. Please inform us that this message has gone astray before deleting it. Thank you

for your co-operation.

GREATER RENFREWSHIRE DIVISION

ORTHOPAEDIC DEPARTMENT

Consultant Mr N Hussain
Secretary Mrs Margaret Williamson

Our Ref: KP/IF/475245

Date: 06 December 2004
Clinic: f.c. 30.11.04..

Royal Alexandra Hospital
Corsebar Road
PAISLEY
PA2 9PN
Tel: 0141-887 9111
Fax: 0141-887 4387



Direct Line: 0141-314-6946
Fax: 0141-314-7275

Dr Brandon
Love Street Medical Centre
40 Love Street
PAISLEY

Dear Dr Brandon

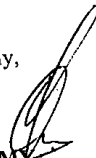
DB10/12/04

DORRICOOK, Gary – d.o.b. 8.7.89
1 Goudie Street Paisley

This young man was reviewed at the clinic. Fracture has healed clinically. He has a mild extensor lag which is expected with this type of fracture.

I have reassured him and discharged him from the clinic.

Yours sincerely,


K PERIASAMY
Specialist Registrar in Orthopaedics

19 NOV 2004

GREATER RENFREWSHIRE DIVISION

ORTHOPAEDIC DEPARTMENT

Consultant Mr N Hussain

Secretary Mrs Margaret Williamson

Date: 17.11.04
Clinic: 16.11.04
Our Ref: NH/AA/053322/04

Royal Alexandra Hospital
Corsebar Road
PAISLEY
PA2 9PN
Tel: 0141-887 9111
Fax: 0141-887 4387



Direct Line: 0141-580 4450
Fax: 0141-580 4898

Dr Brandon
Love Street Medical Centre
40 Love Street
PAISLEY

Dear Dr Brandon

GARY DORRICOOK, DOB 08.07.89
1 GOUDIE STREET, PAISLEY

Diagnosis: Fracture neck of 5th metacarpal.
Treatment: Buddy strapping and wool and crepe bandage.
Outcome: Review two weeks.

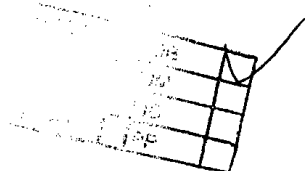
This young man punched a wall and sustained the above fracture. He has no rotational deformity and I have placed him in buddy strapping and wool and crepe bandage.

We will review in two weeks time to remove the strapping.

Yours sincerely

A handwritten signature in black ink, appearing to be 'N Hussain', written over a horizontal line.

Mr N Hussain
Consultant Orthopaedic Surgeon



ARGYLL & CLYDE ACUTE HOSPITALS NHS TRUST
ACCIDENT/EMERGENCY FORM

Limb

G.P. COPY

AE No. C/

ACCIDENT & EMERGENCY DEPT.
ROYAL ALEXANDRA HOSPITAL
CORSEBAR ROAD
PAISLEY PA2 9PN
TEL: 0141-887 9111

88

Surname DORRICOOK		Forename GARY		Age	Date of Birth 15 08/07/1989	Arr Date 15/11/04	Time 13:37	AE Number 053322/04
Address 1 GOUDIE STREET PAISLEY			Sex MALE	Religion	Date of Inc 15/11/04	Time		
PC PA3 2LG		Tel 0141 889 004		Marital Status SINGLE	Occupation/School CHILD	Type of Inc OTHER	Mode of Arrival WALKING/OTHER	
Name BRANDON				Address LOVE STREET MEDICAL CENTRE 40 LOVE STREET PAISLEY		Referred by SELF REFERRAL		
Name SUSAN HAY		Address		Complaint INJURY		L/ARM		
Relat. MOTHER		Tel. No. 07952216161						

ROAD TRAFFIC ACCIDENT PLACE

DETAILS

HOME ACCIDENT PROBABLE CAUSE

TO BE COMPLETED BY MEDICAL OFFICER AFTER SEEING PATIENT

Dear Doctor.

The above-named patient attended Accident & Emergency Department today.

Diagnosis: *L hand injury*

X-Ray film/ECG shows: *Xray L hand = # 5mmc*

Treatment given: *1 Buddy shoe
2 analgesia
3 # clinic tomorrow*

Drugs _____ days supply of _____ 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. Discharge Home 2. Refer to G.P. 3. Irregular Discharge			4. Did not Wait 5. Ret A/E as advised 6. Ret A/E as necessary			7. <input checked="" type="radio"/> Fracture Clinic 8. Refer to O.P. Clinic (see below) 9. Social Worker			10. Admit Ward (see below) 11. Trans. other Hospital (see below) 12. Died in dept. 13. Dead on Arrival		
Ward No. (if admitted)				Transfer to Hospital				Consultant (if admitted)			
Follow up		Not arranged		Arranged		To be arranged		Others Specify			
Clinic Referred to	AE	Hand	Fracture	Ortho	Medical	Surgical	Skin	ENT	Gyn.		
Medical Officers Name (in Block Letters) <i>W. J. G. G. G.</i>					CODE 134	Signature of Medical Officer <i>W. J. G. G. G.</i>					
Cons	SR	Reg	SHO/HD	Clin Assist							

R0005/40

Special Needs System (Children)

Accommodated Children

Summary of Assessment

30 SEP 2004

LETTER	DB	
PHONE	JM	
SCRIPT	JC	
APPT	SP	

Dr Julie Canning
General Practitioner
Love Street Surgery
40 Love Street
Paisley

Date: 16/09/04

Dear Dr Canning

Re.: Gary Dorricott DOB: 08/07/89 CHI Number: 0807890030
North Unit
Kibble School
1 Goudie St
Paisley
PA3 2LG

Gary had a Special Needs review on Tuesday the 31st of August, 2004 and the findings were as follows:

- Conduct Disorder
- Viral Warts
- Refractory Error (Lt) Eye
- Missed Immunisation - B.C.G. & Booster D.T. & Polio
- Mild Acne

STRICTLY CONFIDENTIAL

Gary attended the Foxbar LAC Clinic for his Annual Review Medical Examination. He was accompanied by keyworker care officer Michael McLaughlin.

His general health has been good. His warts have cleared up and he has been discharged from the Dermatology Clinic at RAH.

All his health needs have been met.

He has been prescribed glasses by the optician but still refuses to wear them.

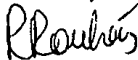
He will be leaving school next summer and wishes to pursue a career in the army.

He is at present seeking advice from Career's Office and is being supported by the school and his social worker.

Attached is a copy of his medical examination.

Assessments have been scheduled for August, 2005.

Yours sincerely



Assessor
Dr R Routray
Clinical Medical Officer
Foxbar Clinic
Lac Clinic
Morar Drive
Foxbar
Paisley

Responsible Clinician
Dr E Gillespie
Clinical Medical Officer
Barrhead Health Centre
201 Main Street
Barrhead
G78 1SA
Tel. 0141 880 6161

Child's Height and Weight History						
Assessment Date	Child's Height		Child's Weight		Child's Age (Years)	
	(cms)	Centile	(kgs)	Centile		
31/08/04	180	91	82	98	15.08	
26/08/03	172	75	75	98	14.08	
26/09/02	164.5	N/A	64.5	N/A	13.17	

SERVICES

Fully Available and Taken Up

- General Practitioner [Dr Julie Canning, General Practitioner, Love Street Surgery]
- Social Work [Theresa Mulholland, Social Worker, Social Work Department]
- Special School (Residential) [Mick McLaughlin, Support Worker, Kibble School]

Fully Available and Referred/Requested but not yet Taken Up

- Dermatologist

INVOLVED PROFESSIONALS

Service Provider

Dr Julie Canning
General Practitioner
Love Street Surgery
40 Love Street
Paisley
Tel. 0141 889 3355

Responsible Clinician

Dr E Gillespie
Clinical Medical Officer
Barrhead Health Centre
201 Main Street
Barrhead
G78 1SA
Tel. 0141 880 6161

Dr Howarth
General Practitioner
Love Street Surgery
40 Love Street
Paisley
Tel. 0141 889 3355

Service Provider

Mick McLaughlin
Support Worker
Kibble School
Sky Unit
1, Goudie Street
Paisley

Service Provider

Theresa Mulholland
Social Worker
Social Work Department
34 Viewfield Terrace
Dunfermline
Fife

Referrer

Eric Queen
Support Worker
Kibble School
North Unit
1, Goudie Street
Paisley

Current / Future Assessor (Aug. - 2005 Approx.)

Assessor

Dr R Routray
Clinical Medical Officer
Foxbar Clinic
Lac Clinic
Morar Drive
Foxbar
Paisley

DISABILITY CODING

No change to disabilities

Assessed On: 31/08/04

Previously Assessed on 26/08/03

STATUS

- 1 = Appropriate for age
- 2 = Mild
- 3 = Moderate
- 4 = Severe
- 5 = Profound
- 6 = Not Assessable
- 7 = Not Assessed

OUTLOOK

- 1 = Normal/Good
- 2 = Likely to Improve
- 3 = Unlikely to Improve
- 4 = May Deteriorate
- 5 = Likely to Deteriorate
- 6 = Uncertain Prognosis
- 7 = Not Assessable
- 8 = Not Assessed

If Status and/or Outlook is fluctuating then indicated by Y

Default: Status (1 Appropriate for age) & Outlook (1 Normal/Good)

	1	2	3	4	5	6	7	1	2	3	4	5	6	7	8	Y		
1. Locomotion																		
1. Head Control	X							X										
2. Sitting	X							X										
3. Standing	X							X										
4. Walking	X							X										
5. Managing Stairs	X							X										
6. Picking Self Up	X							X										
7. Running	X							X										
8. Balance & Co-Ordination	X							X										
2. Fine Motor		1	2	3	4	5	6	7		1	2	3	4	5	6	7	8	Y
1. Grasping	X								X									
2. Accurate Reaching & Retrieval	X								X									
3. Fine Manipulation	X								X									
4. Pencil Skills	X								X									
5. Bimanual Function	X								X									
3. Personal Care		1	2	3	4	5	6	7		1	2	3	4	5	6	7	8	Y
1. Feeding	X								X									
2. Toileting	X								X									
3. Washing	X								X									
4. Dressing	X								X									
5. Ability To Go Out Alone	X								X									
6. Personal Safety	X								X									
4. Hearing		1	2	3	4	5	6	7		1	2	3	4	5	6	7	8	Y
1. Hearing	X								X									
5. Vision		1	2	3	4	5	6	7		1	2	3	4	5	6	7	8	Y
1. Vision	X								X									
6. Communication And Learning		1	2	3	4	5	6	7		1	2	3	4	5	6	7	8	Y
1. Speech	X								X									
2. Expressive Language	X								X									
3. Comprehension	X								X									
4. Conversation	X								X									
5. Specific Learning Difficulties	X								X									
6. Global Learning Difficulties	X								X									
7. Behaviour & Social Integration		1	2	3	4	5	6	7		1	2	3	4	5	6	7	8	Y
1. With Peers	X								X									
2. With Parents	X								X									
3. With Other Adults	X								X									
4. Attention Span	X								X									
5. Motivation	X								X									
6. Awareness	X								X									
8. Situational		Y	N															
1. Dependent On An Adult		N																
2. Dependent On Internal Devices		N																
3. Dependent On Organ Transplant		N																
4. Depend. On Artificial Orifices		N																
5. Dependent On A Special Diet		N																
6. Dependent On Ventilator		N																

RENFREWSHIRE AND INVERCLYDE PRIMARY NHS TRUST
Accommodated Children - Medical Examination

Name... GARY DORRIGAN DOB 8.7.89 Age 15 yrs Date 31.8.04

Height 180 cms Weight 82 Kgs OFC 59 cms BMI
 Centile 91st Centile > 95th Centile > 75th Centile

	PASS	FAIL	REMARKS
Cardiovascular	✓		
BP	✓		
Respiratory	✓		
Peak Flow			N/A
Abdominal	✓		
Genitalia	✓		
Joints	✓		
Feet	✓		
Skin	✓		Mild Acne Chin
Hair	✓		
Ears	✓		
Throat	✓		
Teeth	✓		
Cranial Nerves	✓		
Tone	✓		
Power	✓		
Reflexes	✓		
Visual Acuity	L <u>6/9</u>	✓	Has Spectacles but refuses to wear them.
	R <u>6/6</u>		
Colour Vision	✓		
Hearing	L ✓		
	R ✓		
Gross Motor	✓		
Fine Motor	✓		
Speech/Language	✓		
Comprehension	✓		
Learning Difficulty	✓		
Social/Behaviour	✓		
Immunisation	Uptodate B.C.G 8/12/03		
School Year	DT + P.D. 3/11/03		
Ref - Follow up	1. OPTICIAN REVIEW Yearly		
	2.		
	3.		
	4.		

Medical Examiner R. Routray DR. R. ROUTRAY CMO

SBCG1

RENFREWSHIRE & INVERCLYDE PRIMARY CARE NHS TRUST
School Health Service
Immunisation against Tuberculosis (BCG) FEB 2004

Please complete in ball point pen, sign and return this consent form to the school for your child.

Full name of pupil Gary Donald
 Address c/o Kibble School DOB 8/7/89 Sex M
 Contact Tel No. _____
 Name and Address of GP Love St parish School Kibble School
 Class _____

(Please tick appropriate box)

- | | YES | NO | UNSURE |
|---|--------------------------|-------------------------------------|--------------------------|
| 1. Has your child ever had BCG immunisation? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Has your child had contact with someone who has active tuberculosis? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

	YES	NO
Do you consent to your child having a Tuberculosis Skin Test and BCG if indicated and further investigations if needed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Signature (Parent/Guardian) <u>L. Stuart</u> (Consent given by Social Worker) Date <u>17/11/03</u>		

PLEASE STATE ANY MEDICAL CONDITION OR CURRENT MEDICATION RELATING TO YOUR CHILD

None known

N.B. IF YOUR CHILD HAS EVER HAD A SEVERE REACTION TO ANY IMMUNISATION, PLEASE GIVE DETAILS:

No

FOR OFFICIAL USE ONLY

Scar	Size	Heaf Test <u>16-4 11</u>	Grade <u>0 (8/12/03)</u>	Signature of Immuniser
Yes/No Signature <u>[Signature]</u>	Date <u>1/11-3</u> Signature <u>[Signature]</u>	Vaccine <u>B.C.G</u>	Batch No. <u>103010A</u>	Comments <u>[Signature]</u>

Contra-indications checklist discussed with pupil Doctor/Nurse Signature [Signature]

Multipart: File/White; GP/Yellow; HB/Blue

R0005/40

Special Needs System (Children)

Accommodated Children

Summary of Assessment

Dr Howarth
General Practitioner
Love Street Surgery
40 Love Street
Paisley

Date: 07/11/03

10 NOV 2003

Dear Dr Howarth

Re.: Gary Dorricott DOB: 08/07/89 CHI Number: 0807890030
North Unit
Kibble School
1 Goudie St
Paisley
PA3 2LG

LETTER	DB	
PHONE	JM	
SCRIPT	JC	
APPT	EV	

Gary had a Special Needs review on Tuesday the 26th of August, 2003 and the findings were as follows:

- Conduct Disorder
- Viral Warts
- Refractory Error (Lt) Eye
- Missed Immunisation - B.C.G. & Booster D.T. & Polio

STRICTLY CONFIDENTIAL :

Gary attended Foxbar LAC Clinic for review.

He has attended the dermatology clinic at RAH for treatment of his warts which have cleared.

He has agreed to have B.C.G., DT & Polio at school.

He will be reviewed by the optician, although he is not keen to wear glasses.

Assessments have been scheduled for August, 2004.

Yours sincerely

E. Gillespie
Assessor & Responsible Clinician
Dr E Gillespie
Clinical Medical Officer
Foxbar Clinic
Lac Clinic
Morar Drive
Foxbar
Paisley

Child's Height and Weight History					
Assessment Date	Child's Height		Child's Weight		Child's Age (Years)
	(cms)	Centile	(kgs)	Centile	
26/08/03	172	75	75	98	14.08
26/09/02	164.5	N/A	64.5	N/A	13.17

SERVICES

Fully Available and Taken Up

- General Practitioner [Dr Howarth, General Practitioner, Love Street Surgery]
- Social Work [Theresa Mulholland, Social Worker, Social Work Department]
- Special School (Residential) [Eric Queen, Support Worker, Kibble School]

Fully Available and Referred/Requested but not yet Taken Up

- Dermatologist

INVOLVED PROFESSIONALS

[Current / Future Assessor (Aug. - 2004 Approx.)]

Responsible Clinician, Assessor

Dr E Gillespie
Clinical Medical Officer
Foxbar Clinic
Lac Clinic
Morar Drive
Foxbar
Paisley

Service Provider

Dr Howarth
General Practitioner
Love Street Surgery
40 Love Street
Paisley
Tel. 0141 889 3355

Service Provider

Theresa Mulholland
Social Worker
Social Work Department
34 Viewfield Terrace
Dunfermline
Fife

Referrer, Service Provider

Eric Queen
Support Worker
Kibble School
North Unit
1, Goudie Street
Paisley

DISABILITY CODING No change to disabilities

Assessed On: 26/08/03

STATUS

- 1 = Appropriate for age
- 2 = Mild
- 3 = Moderate
- 4 = Severe
- 5 = Profound
- 6 = Not Assessible
- 7 = Not Assessed

OUTLOOK

- 1 = Normal/Good
- 2 = Likely to Improve
- 3 = Unlikely to Improve
- 4 = May Deteriorate
- 5 = Likely to Deteriorate
- 6 = Uncertain Prognosis
- 7 = Not Assessible
- 8 = Not Assessed

Previously Assessed on 26/09/02
 No change
 Changed to
 Changed from

If Status and/or Outlook is fluctuating then indicated by Y

Default: Status (1 Appropriate for age) & Outlook (1 Normal/Good)

1. Locomotion		1	2	3	4	5	6	7	1	2	3	4	5	6	7	8	Y
1. Head Control		X							X								
2. Sitting		X							X								
3. Standing		X							X								
4. Walking		X							X								
5. Managing Stairs		X							X								
6. Picking Self Up		X							X								
7. Running		X							X								
8. Balance & Co-Ordination		X							X								
Fine Motor		1	2	3	4	5	6	7	1	2	3	4	5	6	7	8	Y
1. Grasping		X							X								
2. Accurate Reaching & Retrieval		X							X								
3. Fine Manipulation		X							X								
4. Pencil Skills		X							X								
5. Bimanual Function		X							X								
3. Personal Care		1	2	3	4	5	6	7	1	2	3	4	5	6	7	8	Y
1. Feeding		X							X								
2. Toileting		X							X								
3. Washing		X							X								
4. Dressing		X							X								
5. Ability To Go Out Alone		X							X								
6. Personal Safety		X							X								
4. Hearing		1	2	3	4	5	6	7	1	2	3	4	5	6	7	8	Y
1. Hearing		X							X								
5. Vision		1	2	3	4	5	6	7	1	2	3	4	5	6	7	8	Y
1. Vision			X							X							
Communication And Learning		1	2	3	4	5	6	7	1	2	3	4	5	6	7	8	Y
1. Speech		X							X								
2. Expressive Language		X							X								
3. Comprehension		X							X								
4. Conversation		X							X								
5. Specific Learning Difficulties		X							X								
6. Global Learning Difficulties		X							X								
7. Behaviour & Social Integration		1	2	3	4	5	6	7	1	2	3	4	5	6	7	8	Y
1. With Peers			X							X							
2. With Parents			X							X							
3. With Other Adults			X							X							
4. Attention Span			X							X							
5. Motivation			X							X							
6. Awareness			X							X							
8. Situational		Y	N			Y	N			Y	N			Y	N		
1. Dependent On An Adult			N													N	
2. Dependent On Internal Devices																N	
3. Dependent On Organ Transplant			N													N	
4. Depend. On Artificial Orifices																N	
5. Dependent On A Special Diet			N													N	
6. Dependent On Ventilator																N	

SDTP1

RENFREWSHIRE & INVERCLYDE PRIMARY CARE NHS TRUST

School Health Service 25 FEB 2004
Immunisation against Diphtheria/Tetanus/Polio for Secondary Pupils

Please complete in ball point pen, sign and return this consent form to the school for your child.

Full name of pupil GARY DORRIGATT
 Address 16 KIBBLE EDUCATION & CARE CENTRE, 1 BRIDIE ST. PAISLEY DOB 8/7/89 Sex M
 Contact Tel No. 0111 889 0011
 Name and Address of GP LOVE ST. MEDICAL CENTRE School KIBBLE CENTRE Class

HAS YOUR CHILD HAD ANY OF THE FOLLOWING IMMUNISATIONS IN THE PAST **FIVE YEARS**?

(Please tick appropriate box)

	YES	NO	UNSURE	If YES, approximate year
1. TETANUS	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
2. DIPHTHERIA	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
3. POLIO	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
4. ANY OTHER INJECTION e.g. HEPATITIS, TYPHOID				

IF REQUIRED, DO YOU WISH YOUR CHILD TO HAVE A BOOSTER DOSE OF:		
	YES	NO
1. TETANUS	<input type="checkbox"/>	<input type="checkbox"/>
2. DIPHTHERIA	<input type="checkbox"/>	<input type="checkbox"/>
3. POLIO	<input type="checkbox"/>	<input type="checkbox"/>

PLEASE STATE ANY MEDICAL CONDITION OR CURRENT MEDICATION RELATING TO YOUR CHILD

N/A

N.B. IF YOUR CHILD HAS EVER HAD A SEVERE REACTION TO ANY IMMUNISATION, PLEASE GIVE DETAILS:

unknown

SIGNATURE (Parent/Guardian) B. Steinhilber Date 3/11/03
 consent given by Theresa Muthalan social worker

FOR OFFICIAL USE ONLY

Date of Immunisation	Batch Number	Signature of Immuniser
<u>3/11/03</u>	<u>00526-2 DipTet S127DG Polio</u>	<u>[Signature]</u>

Contra-indications checklist discussed with pupil Doctor/Nurse Signature [Signature]

Fife Acute Hospitals NHS Trust
Victoria Hospital

Hayfield Road
Kirkcaldy
Fife KY2 5AH
Telephone 01592 643355
www.show.scot.nhs.uk/faht



28 JUL 2003

Dr Steer's ADHD Clinic
4th July 2003

Date dictated: 4th July 2003

Date typed: 24th July 2003

Our ref: CRS/SM/V.359428

Enquiries to: Paediatric Department
Secretary, Ms Susan Miller

Extension: 8635

Fax: 01592 648045

E.mail: susan.miller@faht.scot.nhs.uk

Dr M Scott
Netherdown Surgery
Elizot Street
DUNFERMLINE

Dear Dr Scott

Gary Dorricot – Date of birth: 8.7.89 (CHI No: 0030)
c/o Kibble Education & Care Centre, 1 Goudie Street, Paisley, PA3 2LG
Home address: 73 Bute Crescent, Dunfermline

I saw Gary for review. We haven't seen him for many months, and at his last consultation we noted that he had discontinued neurostimulant treatment and was moving school, and has now entered in a placement at Kibble Education Care Centre in Paisley. He attended with his Key Worker, Eric McQueen from school. Eric told me that Gary has regular medical checks from Dr Kumar, based at Love Street Medical Centre in Paisley. He also commented that Gary can show problems with concentration and attention and impulsivity, but is perhaps these days less hyperactive than we knew him in the past. He has been eating well, sleeping well and as noted above is not medicated. At times he can be "over-excited". Gary was cheerful and well looking though in conversation, with good eye contact and a sense of humour and seems to benefit from the current placement. He goes home for weekends to the maternal home in Dunfermline at 73 Bute Crescent.

Weight 72.1 kg, pulses 57 per minute, height 171.5 cm, BP 127/53.

Gary seems to be enjoying his life, and in particular gets a lot of self-esteem from playing sport. From my perspective there wasn't any indication to subject him to regular hospital clinic visits although we would be pleased to see him again should his progress cause concern, for example if there is any question at looking at a repeat trial of neurostimulants.

Yours sincerely

Dr C.R. Steer
CONSULTANT PAEDIATRICIAN

Copy to: ✓ Dr Kumar, Love Street Medical Centre, Love Street, Paisley.
(With compliments, for information).

LETTER	DB	
PHONE	JM	
SCRIPT	JC	
APPT	EV	✓

Headquarters
Hayfield House Hayfield Road Kirkcaldy Fife KY2 5AH

Chairman David Stewart
Acting Chief Executive John Wilson

R0005/40

Special Needs System (Children)
ACCOMMODATED CHILDREN
SUMMARY OF ASSESSMENT

Date: 04/11/02

Dr Howarth
General Practitioner
Love Street Surgery
40 Love Street
Paisley

Dear Dr Howarth

Re.: Gary Dorricott DOB: 08/07/89 CHI Number: 0807890030
Kibble School
1 Goudie St
Paisley
PA3 2LG

Gary had an initial Special Needs medical on Thursday the 26th of September, 2002 and the findings were as follows:

- Conduct Disorder
- Viral Warts
- Refractory Error (Lt) Eye
- Missed Immunisation - B.C.G. & Booster D.T. & Polio

STRICTLY CONFIDENTIAL

13 year old teenager, currently accommodated in Kibble Education and Care Centre by Fife Social Services Department. This is his 4th placement in care. He has been in care since he was 6 years old due to family problems. he has settled well in Kibble School but misses his foster carers in Rossyth.

At present there are no concerns as he is enjoying all aspects of the Kibble School curriculum.

Medical Report is attached.

PLAN :

- 1) To have missed Immunisations i.e. B.C.G. Booster D.T. and Polio as part of school health vaccination programme.
- 2) Referred to Dermatology Clinic R.A.H.
- 3) To attend optician.

TPN	DB	
TMA	JM	✓
DWD	GH	
PL	EV	
PA	YW	

06 NOV 2002

RENFREWSHIRE AND INVERCLYDE PRIMARY NHS TRUST

Accommodated Children – Medical Examination

Name GARRY DORRICOIT Dob 8/7/89
 Date of Examination _____

Height 164.5 Weight 64.5kg OFC 59cms
75th centile > 91st centile

	PASS	FAIL	REMARKS
Cardiovascular	✓		
<u>118/52</u> BP	✓		
Respiratory	✓		
Abdominal	✓		
Genitalia	✓		
Joints	✓		
Skin and Hair		✓	Multiple VIRAL WARTS both hands
Ears	✓		
Throat	✓		
Teeth		✓	Dental Cavities
Cranial Nerves			
Tone	✓		
Power	✓		
Reflexes	✓		
Visual Acuity	L	✓	6/9. To attend optician
	R	✓	
Colour Vision	✓		
Hearing	L	✓	
	R	✓	
Gross Motor	✓		
Fine Motor	✓		
Speech/Language	✓		
Social/Behaviour	✓		
Life Style			Healthy Teenager. Moderately obese. Non Smoker. No Alcohol or drug abuse.

Medical Examiner Dr. R. ROUTHAY
 Grade Clinical Medical Officer

To be filed in medical notes.

TPN	DB
TMA	JM
QWD	GH
PL	EV
PA	YW

06 NOV 2002

DISABILITY CODING No change to disabilities

Assessed On: 26/09/02

STATUS

OUTLOOK

The above assessment was the First Assessment

- 1 = Appropriate for age
- 2 = Mild
- 3 = Moderate
- 4 = Severe
- 5 = Profound
- 6 = Not Assessible
- 7 = Not Assessed

- 1 = Normal/Good
- 2 = Likely to Improve
- 3 = Unlikely to Improve
- 4 = May Deteriorate
- 5 = Likely to Deteriorate
- 6 = Uncertain Prognosis
- 7 = Not Assessible
- 8 = Not Assessed

If Status and/or Outlook is fluctuating then indicated by Y

Default: Status (1 Appropriate for age) & Outlook (1 Normal/Good)

		1	2	3	4	5	6	7	1	2	3	4	5	6	7	8	Y
1. Locomotion																	
1. Head Control		X							X								
2. Sitting		X							X								
3. Standing		X							X								
4. Walking		X							X								
5. Managing Stairs		X							X								
6. Picking Self Up		X							X								
7. Running		X							X								
8. Balance & Co-Ordination		X							X								
2. Fine Motor																	
1. Grasping		X							X								
2. Accurate Reaching & Retrieval		X							X								
3. Fine Manipulation		X							X								
4. Pencil Skills		X							X								
5. Bimanual Function		X							X								
3. Personal Care																	
1. Feeding		X							X								
2. Toileting		X							X								
3. Washing		X							X								
4. Dressing		X							X								
5. Ability To Go Out Alone		X							X								
6. Personal Safety		X							X								
4. Hearing																	
1. Hearing		X							X								
5. Vision																	
1. Vision			X							X							
6. Communication And Learning																	
1. Speech		X							X								
2. Expressive Language		X							X								
3. Comprehension		X							X								
4. Conversation		X							X								
5. Specific Learning Difficulties		X							X								
6. Global Learning Difficulties		X							X								
7. Behaviour & Social Integration																	
1. With Peers			X							X							
2. With Parents			X							X							
3. With Other Adults			X							X							
4. Attention Span			X							X							
5. Motivation			X							X							
6. Awareness			X							X							
8. Situational		Y	N														
1. Dependent On An Adult			N														N
2. Dependent On Internal Devices																	N
3. Dependent On Organ Transplant			N														N
4. Depend. On Artificial Orifices																	N
5. Dependent On A Special Diet			N														N
6. Dependent On Ventilator																	N

PATIENT SUMMARY

EMIS no. : 6594
Name : Mr Gary Dorricott
Age : 13 years
D.O.B. : 08.07.1989 NHS No. :
Chi. No. : 0807890030

Address : Woodlands School Corsbie Road Newton Stewart
Post Code : DG8 6JB
Tel No : 402480

ACTIVE PROBLEMS

21.12.2001 Psychiatric referral : Psychiatry, Crichton Royal
Hospital,

SIGNIFICANT (NOT ACTIVE) PROBLEMS

None Recorded

ALLERGIES

None Recorded

HEALTH STATUS

Weight	: - - -
Systolic BP	: - - -
Target Bp	: - - -
Smoking	: - - -
Alcohol	: - - -
Dietary history	: - - -
FH: IHD<60	: - - -
FH: IHD>60	: - - -
FH: CVA/stroke	: - - -
FH: Diabetes	: - - -
Urine Protein	: - - -
Urine Glucose	: - - -

PRESENT MEDICATION

There are no Prescriptions for Mr Gary Dorricott

Last Consultation

9.5.2002
G.P. Surgery
Dr Elizabeth Johnstone
E: attention defecit disorder

LOVE STREET MEDICAL CENTRE

NEW PATIENT MEDICAL

NAME
 ADDRESS
 POSTCODE
 Occupation

Date
 DOB
 TEL
 M STATUS

ALLERGIES

HISTORY

	PATIENT		FAMILY		DETAILS
	YES	NO	YES	NO	
1 Asthma	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NO IDEA
2 Diabetes	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3 Epilepsy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4 Hypertension	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5 MI	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6 Angina	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7 Stroke	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8 Cancer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9 Hyperlipidaemia	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10 Vasc Disease	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11 Thyroid Disease	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12 Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

MEDICATION

TOBACCO

Ex Smoker
 < 1 per day
 1-9 per day
 10-19 per day
 20-39 per day
 40+ per day

Date Stopped

Advice Given Y / N

ALCOHOL

Ex Drinker
 < 1 per day
 1-2 per day
 3-6 per day
 7-9 per day
 >9 per day

Date Stopped

Advice Given Y / N

MEASUREMENTS

Height cm Weight kg
 BP / Urinalysis

TETANUS

Date Last Done
 Blood Group (if known)

Number of Pregnancies
 Number of Children Contraception Discussed Y / N
 Date of Last Smear Result
 Hysterectomy Yes No Date

Anything else of Note

Dumfries & Galloway



PRIMARY CARE NHS TRUST

CHILD HEALTH DIRECTORATE

Child and Adolescent Mental Health, Ladyfield, Glencaple Road, Dumfries, DG1 4TE
Telephone : (01387) 244000 Ext. 4331 Direct Dial (01387) 244331 Fax : (01387) 244337

04 March 2002

Strictly Confidential – Patient Information

Dr E M Johnstone
Cairnsmore Medical Practice
Creebridge
NEWTON STEWART
DG8 6NR

Dear Dr Johnstone

Gary Dorricott – DOB: 08.07.89
C/o Woodlands School, Corsbie Road, Newton Stewart, DG8 6JD

I was due to see Gary today for an appointment. He did not wish to attend and staff at the school phoned and left a message to this effect.

I note that his medication was first prescribed by the Kirkcaldy Paediatric Department, and that he was noted to be unhappy about taking it. The issue of informed consent is important in a lad of this age and I wonder if you could clarify whether he is in agreement about his prescription when you see him next. If he will not attend my clinic, I will have to leave it in your hands to monitor the medication or indeed refer back to Fife.

Please let me know if I can help in any other way.

Yours sincerely

pm
DR ANNE MCFADYEN
Consultant in Child and Family Psychiatry

*affair in message sent at school
40 2480*

CONFIDENTIAL. TO ADDRESSEE ONLY.
NOT TO BE SHOWN TO OTHER PERSONS
WITHOUT REFERENCE TO THE WRITER

CONFIDENTIAL. TO ADDRESSEE ONLY.
NOT TO BE SHOWN TO OTHER PERSONS
WITHOUT REFERENCE TO THE WRITER



Dumfries & Galloway



PRIMARY CARE NHS TRUST

CHILD HEALTH DIRECTORATE

Child and Adolescent Mental Health, Ladyfield, Glencaple Road, Dumfries, DG1 4TE
Telephone : (01387) 244000 Ext. 4331 Direct Dial (01387) 244331 Fax : (01387) 244337

12 February 2002

Carer/Guardian of
Gary Dorricott
C/o Woodlands School
Corsbie Road
NEWTON STEWART
DG8 6JD

Dear Sir/Madam

Re: Gary Dorricott – DOB: 08.07.89

We were sorry that you did not attend your last appointment on the 24th of January with Dr Anne McFadyen. We have rescheduled another appointment to attend her clinic at the Masonfield Centre, Newton Stewart Health Centre Annexe, Creebridge, Newton Stewart on **Thursday, 28th February 2002 at 1.30pm.**

Please contact me **on receipt of this letter** to confirm whether you can attend this appointment or otherwise. We look forward to hearing from you as soon as possible.

Yours sincerely

LYNNE MCCULLOCH
Secretary

~~c.c. - Dr E.M. Johnstone - GP~~

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
to	OK	Comp.	Pending
Comment			

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NOT TO BE SHOWN TO OTHER PERSONS
WITHOUT REFERENCE TO THE WRITER*

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Dumfries & Galloway



PRIMARY CARE NHS TRUST

CHILD HEALTH DIRECTORATE

Child and Adolescent Mental Health, Ladyfield, Glencaple Road, Dumfries, DG1 4TE
Telephone : (01387) 244000 Ext. 4331 Direct Dial (01387) 244331 Fax : (01387) 244337

10 January 2002

Carer/Guardian of
Gary Dorricott
C/o Woodlands School
Corsbie Road
NEWTON STEWART
DG8 6JD

Dear Sir/Madam

Re: Gary Dorricott – DOB: 08.07.89

Following a recent referral from Dr Johnstone at the Creebridge Practice, would it be possible for Gary to attend Dr Anne McFadyen's who is Consultant Psychiatrist with the Child and Adolescent Mental Health Team, clinic in Newton Stewart. This will take place at the Masonfield Centre, Newton Stewart Health Centre Annexe, Creebridge, Newton Stewart on **Thursday, 24th January 2002 at 12.30pm.**

Please contact me if this appointment is in any way inconvenient to you, otherwise we look forward to seeing you then.

Yours sincerely

LYNNE MCCULLOCH
Secretary

c.c. Dr E M Johnstone, GP

for info

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Dumfries & Galloway



PRIMARY CARE NHS TRUST

CHILD HEALTH DIRECTORATE

Child and Adolescent Mental Health, Ladyfield, Glencaple Road, Dumfries, DG1 4TE
Telephone : (01387) 244000 Ext. 4331 Direct Dial (01387) 244331 Fax : (01387) 244337

25 January 2002

Strictly Confidential – Patient Information

Dr E M Johnstone
Cairnsmore Medical Practice
Creebridge
NEWTON STEWART
DG8 6NR

Dear Dr Johnstone

Gary Dorricott – DOB: 08.07.89
C/o Woodlands School, Corsbie Road, Newton Stewart

This boy failed to attend for an appointment. He will need to be reviewed in relation to his medication and I will send him a further appointment.

Yours sincerely

DR ANNE MCFADYEN
Consultant in Child and Family Psychiatry

c.c. Woodlands School

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NOT TO BE SHOWN TO OTHER PERSONS
WITHOUT REFERENCE TO THE WRITER



Dr. T.A. Jones
Dr. L.M. Jones
Dr. C.P. McClintock
Dr. L.H. Littler
Dr. D.R. Hannay
Dr. E.M. Johnstone (Retainee)
Dr. K. Bevan-Mogg (Registrar)

Cairnsmore Medical Practice,
Creebridge,
NEWTON STEWART.
DG8 6NR

Telephone: (01671) 402198

Fax: (01671) 404008

EMJ/LCM

21 December 2001

CAMHS
Ladyfield
Glencaple Road
DUMFRIES

Re: Gary Dorricott dob 08.07.89
c/o Woodlands School, Corsbie Road, Newton Stewart

Many thanks for assessing this young man who has recently registered with this practice. He is currently resident in Woodlands School. He takes Ritalin 10 mgs which was started in 1998. His primary carer at Woodlands describes him as "chalk and cheese" without, although Gary himself feels embarrassed that he has to take Ritalin as this makes him different from his peers. He would like very much to come off the medication.

Enclosed are the most pertinent records from our clinical notes.

Your assessment is much appreciated.

Yours sincerely

Dr E M Johnstone

L H LITTLE N.O. Conf.
6/10 31/10/01



**PAEDIATRIC DEPARTMENT
CONSULTANTS:**

Dr C R Steer (Lead Clinician)
Dr T M Scott
Dr S Ainsworth
Dr L Stewart
Dr A H Alsager (Locum)

**Victoria
Hospital**

• Telephone •
01592-643355
• Facsimile •
01592 648045

MT/KP/V359428

29th October 2001

Dr Scott
Nethertown Surgery
Elliot Street
DUNFERMLINE

Dear Dr Scott

GARY DORRICOTT (08.07.89)
C/O 92 ADMIRALTY ROAD, ROSYTH

Gary failed to attend his Paediatric follow-up appointment made with Dr Linnemann on the 25th of October. I will ask for one more appointment to be arranged for him to come and see Dr Linnemann.

Yours sincerely

Dr Manal Thanoon
STAFF GRADE PAEDIATRICIAN

LOG	
SUMMARY	
SECRETARY	
	MBS
- 7 NOV 2001	

OK	Comm	Pending
Comment LHL ✓		

•Victoria Hospital•

•Hayfield Road •Kirkcaldy •Fife •KY2 5AH

Your Ref:
Our Ref: CB/tlh
Enquiries to: Tracey Holden

D.S.

Fife Primary Care

NHS TRUST
CARNEGIE CLINIC
INGLIS STREET
DUNFERMLINE
FIFE KY12 7AX

TELEPHONE: 01383 741031
FAX: 01383 624202

CHILD MENTAL HEALTH SERVICE

26 September 2001

PRIVATE AND CONFIDENTIAL

Dr Alexander
Nethertown Surgery
Elliot Street
DUNFERMLINE

Dear Dr Alexander,

**RE: Gary Dorricott, (b.08/07/89)
c/o 92 Admiralty Road, Rosyth**

Gary and his family failed to attend their appointment on 26 September 2001. They have been sent a letter asking them to contact the department if they require a further appointment.

If they do not contact the department within three weeks then I will assume that they no longer wish any contact with the department and I will therefore remove him from my caseload.

Yours sincerely

pp Tracey Holden (secretary)

**CATHERINE BURT
COMMUNITY NURSE THERAPIST**

c.c. Nicola Bruce, Social Work, East Fergus Place, Kirkcaldy

232

Fife Primary Care

NHS TRUST

Your Ref:
Our Ref: CB/tlh
Enquiries to: Tracey Holden

CARNEGIE CLINIC
INGLIS STREET
DUNFERMLINE
FIFE KY12 7AX

TELEPHONE: 01383 741031
FAX: 01383 624202

CHILD MENTAL HEALTH SERVICE

5 September 2001

PRIVATE AND CONFIDENTIAL

Ms Nicola Bruce
Social Worker
Children & Families Team
Fife Council Social Work Service
East Fergus Place
KIRKCALDY KY1 1XT

LOG	
SUMMARY	
SECRETARY	
	01
10 SEP 2001	

Dear Nicola,

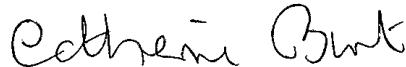
RE: Gary Dorricott, (b. 08/07/89), c/o 92 Admiralty Road, Rosyth

Thank you for the referral of this young lad whom I was pleased to meet together with his foster carer Linda Bell on 31 August 2001.

As you know, Gary has had a problematic and difficult early life and currently is in foster care. The issues that Gary wants to talk about are relating to his brother Christopher, currently in a secure unit, and his feelings of guilt regarding the abuse that his brother suffered at the hands of Gary's biological father. Gary has a great deal of confused feelings about his father, with whom there has been no contact for several years. There was also some evidence of low self esteem and general unhappiness at his situation, although he likes Mr & Mrs Bell a great deal.

Gary has agreed to meet with me on a regular basis to look at the confused feelings that he has with regard to his birth family and I will keep you updated as to his progress. Should you require any further information please do not hesitate to contact me.

Yours sincerely



**CATHERINE BURT
COMMUNITY NURSE THERAPIST**

c.c. ^D Dr Alexander, Nethertown Surgery, Elliot Street, Dunfermline

5

PAEDIATRIC DEPARTMENT

Dr C R Steer, Lead Clinician
Dr M G MacMillan
Dr T M Scott (Community)
Locum Consultant

Enquiries to: Mrs Susan Miller x8635

Clinic on 16th August 2001

Dictated on: 16.8.01

Typed on: 22.8.01

AL/SM
V.359428



**Victoria
Hospital**

• Telephone •
01592-643355

• Facsimile •

LOG	
SUMMARY	
SECRETARY	
	MRS
- 4 OCT 2001	

Dr Grant
Millhill Surgery
87 Woodmill Street
DUNFERMLINE

Dr M Scott
Nethertown Surgery
Dunfermline

Dear Dr Grant

Gary Dorricott, c/o 92 Admiralty Road, Rosyth

Date of Birth: 8.7.89

I reviewed Gary in Dr Steer's Paediatric ADHD Clinic. Gary has tried various doses of Ritalin and over the holidays has actually stopped the medication entirely. He is now better at stopping to think, and on the whole copes well without it. On 2 or 3 occasions his foster mum has given this "prophylactically" when she feels Gary might be very stressed, and this has helped. Gary is very anxious to start Inverkeithing High School without any medication as he was teased in Primary School because of this. Gary has seen his brother, Christopher, recently. He is in a Special Department, Woodlands, in the Borders. Gary feels guilty because when he was a young child and bad his father used to abuse his brother. Gary has been referred to a counsellor for this and we had a wee chat today also. Gary has obviously a very strong relationship with his foster mum and the wider family. She is a very sensible lady and we have left it that Gary will start school on no medication, but if the situation merits it this should be recommenced as a routine.

We will review Gary in October to monitor the situation. At the moment Gary's weight and height are both on the 75th centile, his blood pressure is 100/68. Unfortunately there was no reply from the school as to his behaviour.

Yours sincerely

Alison Linnemann

Dr Alison Linnemann
CLINICAL ASSISTANT

NORMAL
TELL
- 5 SEP 2001
COMPUTER
NOTES
FILE <i>gl</i>

NOP

•Victoria Hospital•

•Hayfield Road •Kirkcaldy •Fife •KY2 5AH