

Subject Access Request



Patient	Miss Kay Thomson
Date of birth	12-July-1984 (age 42)
Gender	F
NHS number	426/84/056
Patient's address	39-7 Mitchell Street Edinburgh EH6 7AR
Date range selected	Full record
Organisation	MMA Legal
Reference	100875 [Ref: DSAR-20260707-BB5E17]

Problems

Active

04-Dec-2024 Mrs Debbie Mushet (DM)
Personality disorders
pt has BPD info taken from new registration form

28-Sept-2018 Mrs Sinead Burgess (SMB)
[X]Emotionally unstable personality disorder

Significant Past

15-July-2026 Miss Victoria Thomson (VAT)
Termination of pregnancy NEC
at home

01-Jun-2025 Mrs Sinead Burgess (SMB)
Emergency caesarean section

04-Dec-2024 Mrs Debbie Mushet (DM)
Patient pregnant

28-July-2023 Mrs Sinead Burgess (SMB)
Intoxication - alcohol

28-July-2023 Mrs Sinead Burgess (SMB)
H/O: deliberate self harm
street valium and injected household bleachIV

13-Jan-2020 Mrs Sinead Burgess (SMB)
Spontaneous vertex delivery
female

30-May-2019 Mrs Sinead Burgess (SMB)
Subject of multi-agency risk assessment conference

14-Mar-2019 Mrs Sinead Burgess (SMB)
H/O: recreational drug use

14-Mar-2019 Mrs Sinead Burgess (SMB)
Intoxication - alcohol

01-Jun-2018 Mrs Sinead Burgess (SMB)
Overdose of drug
paracetamol

25-Apr-2018 Mrs Sinead Burgess (SMB)
H/O: deliberate self harm

11-Oct-2017 Mrs Sinead Burgess (SMB)
Overdose of drug
acute intoxication due to multiple drug use and use of psychoactive substances

23-Aug-2012 Mrs Sinead Burgess (SMB)
Depressive disorder NEC

12-Oct-1999 Mrs Sinead Burgess (SMB)
H/O: behaviour problem

12-Oct-1999 Mrs Sinead Burgess (SMB)
Drug dependence

05-Mar-1998 Mrs Sinead Burgess (SMB)
Overdose of drug

Minor Past

This section is empty.

Consultations

15-July-2026 Any Doc1 Doc1 (DOC1) Docman

13-July-2026 Dr Hannah Crowley (HRC) Telephone Consultation

History	History Positive pregnancy test yesterday, not wanting to continue with the pregnancy. Says partner on WL for vasectomy. LMP 1/6/26.
Comment	Comment Given number to call to self refer to chalmers, any problems with this to let us know.

02-July-2026 Any Doc1 Doc1 (DOC1) Docman

02-July-2026 The A Z - Admin (ADM) Patient Not Seen - Information Only

07-July-2026 Medication	Medication Mirtazapine Tablets 30 mg 4 tablet ONE TO BE TAKEN AT NIGHT
Comment	Comment Emergency Prescription issued by pharmacy : Edinburgh Pharmacy

29-Jun-2026 Any Doc1 Doc1 (DOC1) Docman

28-May-2026 Any Doc1 Doc1 (DOC1) Docman

26-May-2026 Any Doc1 Doc1 (DOC1) Docman

30-Apr-2026 Any Doc1 Doc1 (DOC1) Docman

17-Feb-2026 Miss Sandra Fraser (SAF) Leith Mount SurgeryMain Surgery

Comment	Comment looking brighter, reports feels mood improved. Sleeping better. reports big appetite- explained this can be SE from quetiapine, discussion around this. Feels thoughts have slowed down, not as itrritable as she has been plan she will book further appointment as required. Worsening advice given
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05-Feb-2026 Any Doc1 Doc1 (DOC1) Docman

02-Feb-2026 Miss Sandra Fraser (SAF) Leith Mount SurgeryMain Surgery

Comment	Comment Reports charges against her were dropped and she is back at home with partner. Finding quetiapine helpful. Still feels stressed but thinks the after effects of events. Suggest f/u in a couple of weeks to keep an eye-happy with this. No SI or TOSH plan f/u in 2/52. Worsening advice given
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20-Jan-2026 Any Doc1 Doc1 (DOC1) Docman

19-Jan-2026 Miss Sandra Fraser (SAF) Leith Mount SurgeryMain Surgery

Comment **Comment** reports has been on fluoxetine 40mg and mirtazipine 30mg for a long time. Has EUPD and reports been well since moved to Edinburgh. Reports got into altercation with partner at weekend and she was arrested-reports accidentally stbbed him and she is due in court soon and anxious re this. Does not feel this combination of meds is helping any more. Reports was on quetiapine previously and felt this helped her more. Reports not sleeping well. Advised could reduce mirtazipine to 15mg as this is more helpful for sleep-happy with this. Advised can ask if she can get quetiapine PRN-happy with this plan prescription request to reduce mirtazipine to 15mg and prn quetiapine, f/u in 2/52

15-Jan-2026 Dr Keith Burns (KAB) Telephone Consultation

History **History** Duty Doctor: H: Reports recent alcohol consumption with partner, which is unusual. This led to a hospital visit and subsequent arrest. Reports feeling overwhelmed, with poor sleep and a racing mind. Has a history of suicidal ideation but denies current intent. Has a hearing next weekend and is feeling anxious about it. Currently taking meds as prescribed.

Assessment: Anxiety - Propranolol prescribed to help with symptoms. Advised can book in with practice MHN, Sandra, for review if needed.

Medication **Medication** Propranolol Hydrochloride Tablets 10 mg 14 tablet ONE OR TWO UP TO THREE TIMES A DAY TO BE TAKEN WHEN NECESSARY

18-Sept-2025 Dr Lara Sethi (LAS) Leith Mount SurgeryMain Surgery

History **History** Asking fro TXA - having ongoing bleeding since start POP. 16 weeks post partum. Had lochia for few weeks which stopped then period started. On and off with amount but at times can be changing products 3-4 times daily. Not keen to chnage contraception at present. well in self - no pain/fevers.

Comment **Comment** Trial of TXA but dicussed coil might be good for her. She will come back if ongoing issues

Medication **Medication** Tranexamic Acid Tablets 500 mg 24 TABLET TWO TO BE TAKEN THREE TIMES A DAY FOR UP TO 4 DAYS

12-Aug-2025 Dr Vivienne Whyte (VCW) Leith Mount SurgeryMain Surgery

History **History** 6 week post natal check. Had LSCS due to polyhydramnios. 4th baby. Doing well. Baby wouldn't latch, was expressing for 5 weeks now formula. Wound well healed, no issues with bladder/bowels. Had depo provera when in hosp but doesn't want to continue that. Partner on waiting list for vasectomy. Mood good, mental health stable, feels well supported.

Comment **Comment** Suggest POP until vasectomy, doesn't want IUCD. Advised how to take, bleeding pattern etc.

Medication **Medication** Desogestrel Tablets 75 micrograms 84 tablet ONE TO BE TAKEN EACH DAY

09-July-2025 Dr Stuart Merson (SJM) Leith Mount SurgeryMain Surgery

History *History* In with daughter and babay. Seems well.On good form. Has developed a widespread itchy rash on her legs, arms and torso. Rest of family are fine. It looks to me like an allergic type rash, blanching, looks itchy, no burrows. She thinks it started last week after she took some OTC 'tanning drops' which were marketed to help her tan. Has stopped these since the rash came, but discuss I think this seems probably the most likely trigger. no red flags. Treat with lotriderm in case fungal, and for steroid and anti-histamine. Come back if worse/no better. Not breastfeeding

Medication *Medication* Betamethasone Dipropionate And Clotrimazole Cream 0.064 % + 1 % 30 gram APPLY SPARINGLY TWICE DAILY

Medication *Medication* Cetirizine Hydrochloride Tablets 10 mg 30 tablet ONE TO BE TAKEN EACH DAY

23-Jun-2025 Any Doc1 Doc1 (DOC1) Docman**05-Jun-2025 Dr Keith Burns (KAB) Telephone Consultation**

History *History* Duty Doctor: Was taking oramorph 10mg every 4 hours before discharge 2 days ago and then it was changed to 6 hourly. Needing more analgesia. Advised can go back to every 4 hours but to continue with regular paracetamol and to watch for constipation. Advised as pain settles needs to reduce dose. Midwife visiting.

Medication *Medication* Morphine Sulfate Oral solution 10 mg/5 ml 100 ML 2.5ML TO 5ML TO BE TAKEN WHEN REQUIRED FOR BREAKTHROUGH PAIN - MAX 4 HOURLY

05-Jun-2025 The A Z - Admin (ADM) Patient Not Seen- For Information Only

Comment *Comment* INPATIENT DISCHARGE REPORT
Obstetrics
Dates of admission &
discharge 01/06/25
Reason for admission
Emergency Caesarean Section
Any change
to medication N
(consider dosette/new script
required)
Primary care follow up agreed and
understood - appt 6 week check
KIS
N
Comments

02-Jun-2025 Any Doc1 Doc1 (DOC1) Docman**02-Jun-2025 Any Doc1 Doc1 (DOC1) Docman****02-Jun-2025 Any Doc1 Doc1 (DOC1) Docman****02-Jun-2025 Any Doc1 Doc1 (DOC1) Docman****01-Jun-2025 Any Doc1 Doc1 (DOC1) Docman****02-May-2025 Dr Catriona Gillespie (CEG) Patient Not Seen - Information Only**

Comment *Comment* As per MW
Medication *Medication* Omeprazole Capsules (Gastro-Resistant) 20 mg 28 capsule ONE TO BE TAKEN EACH DAY

01-May-2025 Dr Lara Sethi (LAS) Patient Not Seen - Information Only

History History As per MW request, MSU has been sent
 Medication Medication Cefalexin Tablets 500 mg 14 tablet ONE
 TO BE TAKEN TWICE A DAY FOR 7DAYS

01-May-2025 Any Doc1 Doc1 (DOC1) Docman**15-Feb-2025 Any Doc1 Doc1 (DOC1) Docman****15-Feb-2025 The AZ - Admin (ADM) Patient Not Seen - Information Only**

17-Feb-2025 Medication Medication Mirtazapine Tablets 30 mg 7 tablet ONE
 TO BE TAKEN AT NIGHT
 Comment Comment <font
 color="#FF0000">Emergency
 Prescription issued by pharmacy : Edinburgh
 Pharmacy

21-Jan-2025 Dr Stuart Merson (SJM) Leith Mount SurgeryMain Surgery

History History In to review hand pain. In the PIP of 1st and
 2nd finger right hand only. Can be worse at night. No
 swelling, no stiffness. o/e well, normal hand exam (no
 swelling/tenderensss/deformity/stiffness, normal power
 and sensation). Agreed nothing to suggest serious
 cause and she is happy to watch and wait. Has
 obstetrician in 2 weeks, remaining abstinent and
 feeling well. Supportive talk. Discussed risks of
 medications again vs risk if mental health not good an
 agreed to continue on current meds.

23-Dec-2024 Dr Stuart Merson (SJM) Leith Mount SurgeryMain Surgery

History History Telephone consultation. New patient, just
 moved from Fife. Note addictions history but she
 says doing very well in last few months. She is
 pregnant and says scans have been reassuring.
 She says has not used any alcohol or substances
 for several months. She is on fluoxetine and
 mirtazapine. She has read up on their use in
 pregnancy. Discussed balance of risks - not no risk,
 there is a small risk for example of cardaic effects in
 the foetus. She says when she has stopped
 medications previuusly she has quickly spiralled into
 relapse and she is desperate not to allow that to
 happen again. Discussed on balanxce seems the
 less risky option is to continue medications as
 currently prescribed accepting there is a small risk
 attached. She sounds well. Good rapport. Also
 mentions that she is having pains in the joints of one
 hand. Discussed will need to see her to examine herr
 hands and she will book for an appt.

Medication Medication Fluoxetine Hydrochloride Capsules 20
 mg 60 capsule TWO TO BE TAKEN DAILY

Medication Medication Mirtazapine Tablets 30 mg 28 tablet 1
 NOCTE

23-Dec-2024 Dr Stuart Merson (SJM) Leith Mount SurgeryMain Surgery

History History Telephone consultation. Tried to call as per
 SMO but no answer, streight to VM, message left to
 call us back.

20-Dec-2024 Dr Sebastien Moine (SMO) Patient Not Seen - Information Only

Problem	Problem I had to ask the reception to contact the patient to postpone her appt - because I've lost my voice...
History	History It seems she would like to have her usual meds; she's supposed to be on mirtazapine and fluoxetine (as per previous GP summary and last consultation with previous GP on 18/11/24).
She's pregnant, but I can't see any discussion with her previous GP about taking this medications during pregnancy, therefore if she hasn't discussed this, I would recommend that she books an appt with a GP to do so.

10-Dec-2024 Dr Sita Steed (SZS) Patient Not Seen - Information Only

History	History see email request from midwives - for aspirin, due to maternal age
Medication	Medication Aspirin Dispersible tablets 75 mg 112 tablet TWO TO BE TAKEN DAILY AT NIGHT (DURING PREGNANCY UNTIL DELIVERY)

09-Dec-2024 Any Doc1 Doc1 (DOC1) Docman**04-Dec-2024 Any Doc1 Doc1 (DOC1) Docman**

Medications (inc. issues)

Acute

29-Jun-2026 Quetiapine Fumarate Tablets 25 mg
28 tablet - 1PRN FOR AGGITATION. NO MORE THAN ONE PER 24HRS

26-May-2026 Quetiapine Fumarate Tablets 25 mg
28 tablet - 1PRN FOR AGGITATION. NO MORE THAN ONE PER 24HRS

30-Apr-2026 Quetiapine Fumarate Tablets 25 mg
28 tablet - 1PRN FOR AGGITATION. NO MORE THAN ONE PER 24HRS

30-Mar-2026 Quetiapine Fumarate Tablets 25 mg
28 tablet - 1PRN FOR AGGITATION. NO MORE THAN ONE PER 24HRS

02-Mar-2026 Quetiapine Fumarate Tablets 25 mg
28 tablet - 1PRN FOR AGGITATION. NO MORE THAN ONE PER 24HRS

05-Feb-2026 Quetiapine Fumarate Tablets 25 mg
28 tablet - 1PRN FOR AGGITATION. NO MORE THAN ONE PER 24HRS

20-Jan-2026 Quetiapine Fumarate Tablets 25 mg
28 tablet - 1PRN FOR AGGITATION. NO MORE THAN ONE PER 24HRS

20-Jan-2026 Quetiapine Fumarate Tablets 25 mg
28 tablet - 1PRN FOR AGGITATION. NO MORE THAN ONE PER 24HRS

23-Dec-2024 Fluoxetine Hydrochloride Capsules 20 mg
60 capsule - TWO TO BE TAKEN DAILY

Repeat

02-July-2026 Mirtazapine Tablets 30 mg
56 tablet - 1 NOCTE

29-Jun-2026 Fluoxetine Hydrochloride Capsules 20 mg
60 capsule - TWO TO BE TAKEN DAILY

29-May-2026 Mirtazapine Tablets 30 mg
56 tablet - 1 NOCTE

29-May-2026 Mirtazapine Tablets 30 mg
56 tablet - 1 NOCTE

26-May-2026 Fluoxetine Hydrochloride Capsules 20 mg
60 capsule - TWO TO BE TAKEN DAILY

30-Apr-2026 Fluoxetine Hydrochloride Capsules 20 mg
60 capsule - TWO TO BE TAKEN DAILY

30-Mar-2026 Fluoxetine Hydrochloride Capsules 20 mg
60 capsule - TWO TO BE TAKEN DAILY

02-Mar-2026 Fluoxetine Hydrochloride Capsules 20 mg
60 capsule - TWO TO BE TAKEN DAILY

05-Feb-2026 Fluoxetine Hydrochloride Capsules 20 mg
60 capsule - TWO TO BE TAKEN DAILY

12-Jan-2026 Fluoxetine Hydrochloride Capsules 20 mg
60 capsule - TWO TO BE TAKEN DAILY

24-Nov-2025 Fluoxetine Hydrochloride Capsules 20 mg
60 capsule - TWO TO BE TAKEN DAILY

23-Oct-2025 Fluoxetine Hydrochloride Capsules 20 mg
60 capsule - TWO TO BE TAKEN DAILY

01-Sept-2025 Fluoxetine Hydrochloride Capsules 20 mg
60 capsule - TWO TO BE TAKEN DAILY

21-July-2025 Fluoxetine Hydrochloride Capsules 20 mg
60 capsule - TWO TO BE TAKEN DAILY

23-Jun-2025 Fluoxetine Hydrochloride Capsules 20 mg
60 capsule - TWO TO BE TAKEN DAILY

20-May-2025 Fluoxetine Hydrochloride Capsules 20 mg
60 capsule - TWO TO BE TAKEN DAILY

08-Apr-2025 Fluoxetine Hydrochloride Capsules 20 mg
60 capsule - TWO TO BE TAKEN DAILY

13-Mar-2025 Fluoxetine Hydrochloride Capsules 20 mg
60 capsule - TWO TO BE TAKEN DAILY

14-Feb-2025 Fluoxetine Hydrochloride Capsules 20 mg
60 capsule - TWO TO BE TAKEN DAILY

21-Jan-2025 Fluoxetine Hydrochloride Capsules 20 mg
60 capsule - TWO TO BE TAKEN DAILY

23-Dec-2024 Fluoxetine Hydrochloride Capsules 20 mg
60 capsule - TWO TO BE TAKEN DAILY

Past

02-July-2026 Mirtazapine Tablets 30 mg Acute Medication (Past)
4 tablet - ONE TO BE TAKEN AT NIGHT

02-July-2026 Mirtazapine Tablets 30 mg Acute Medication (Past)
4 tablet - ONE TO BE TAKEN AT NIGHT

26-May-2026 Mirtazapine Tablets 15 mg Repeat Medication (Past)
56 tablet - 1N

30-Apr-2026 Mirtazapine Tablets 15 mg Repeat Medication (Past)
56 tablet - 1N

30-Mar-2026 Mirtazapine Tablets 15 mg Repeat Medication (Past)
56 tablet - 1N

02-Mar-2026 Mirtazapine Tablets 15 mg Repeat Medication (Past)
56 tablet - 1N

20-Jan-2026 Mirtazapine Tablets 15 mg Repeat Medication (Past)
56 tablet - 1N

20-Jan-2026 Mirtazapine Tablets 15 mg Repeat Medication (Past)
56 tablet - 1N

15-Jan-2026 Propranolol Hydrochloride Tablets 10 mg Acute Medication (Past)
14 tablet - ONE OR TWO UP TO THREE TIMES A DAY TO BE TAKEN WHEN NECESSARY

15-Jan-2026 Propranolol Hydrochloride Tablets 10 mg Acute Medication (Past)
14 tablet - ONE OR TWO UP TO THREE TIMES A DAY TO BE TAKEN WHEN NECESSARY

12-Jan-2026 Mirtazapine Tablets 30 mg Repeat Medication (Past)
28 tablet - 1 NOCTE

24-Nov-2025 Mirtazapine Tablets 30 mg Repeat Medication (Past)
28 tablet - 1 NOCTE

23-Oct-2025 Mirtazapine Tablets 30 mg Repeat Medication (Past)
28 tablet - 1 NOCTE

18-Sept-2025 Tranexamic Acid Tablets 500 mg Acute Medication (Past)
24 TABLET - TWO TO BE TAKEN THREE TIMES A DAY FOR UP TO 4 DAYS

18-Sept-2025 Tranexamic Acid Tablets 500 mg Acute Medication (Past)
24 TABLET - TWO TO BE TAKEN THREE TIMES A DAY FOR UP TO 4 DAYS

01-Sept-2025 Mirtazapine Tablets 30 mg Repeat Medication (Past)
28 tablet - 1 NOCTE

12-Aug-2025 Desogestrel Tablets 75 micrograms Acute Medication (Past)
84 tablet - ONE TO BE TAKEN EACH DAY

12-Aug-2025 Desogestrel Tablets 75 micrograms Acute Medication (Past)
84 tablet - ONE TO BE TAKEN EACH DAY

21-July-2025 Mirtazapine Tablets 30 mg Repeat Medication (Past)
28 tablet - 1 NOCTE

09-July-2025 Betamethasone Dipropionate And Clotrimazole Cream 0.064 % + 1 % Acute Medication (Past)
30 gram - APPLY SPARINGLY TWICE DAILY

09-July-2025 Cetirizine Hydrochloride Tablets 10 mg Acute Medication (Past)
30 tablet - ONE TO BE TAKEN EACH DAY

09-July-2025 Cetirizine Hydrochloride Tablets 10 mg Acute Medication (Past)
30 tablet - ONE TO BE TAKEN EACH DAY

09-July-2025 Betamethasone Dipropionate And Clotrimazole Cream 0.064 % + 1 % Acute Medication (Past)
30 gram - APPLY SPARINGLY TWICE DAILY

23-Jun-2025 Mirtazapine Tablets 30 mg Repeat Medication (Past)
28 tablet - 1 NOCTE

05-Jun-2025 Morphine Sulfate Oral solution 10 mg/5 ml Acute Medication (Past)
100 ML - 2.5ML TO 5ML TO BE TAKEN WHEN REQUIRED FOR BREAKTHROUGH PAIN - MAX 4 HOURLY

05-Jun-2025 Ibuprofen Tablets 400 mg Acute Medication (Past)
84 TABLET - ONE TO BE TAKEN THREE TIMES A DAY. STOP THIS MEDICINE WHEN UNWELL WITH EITHER VOMITING DIARRHOEA FEVERS SWEATS OR SHAKING. RESTART IT WHEN WELL AGAIN

05-Jun-2025 Paracetamol Tablets 500 mg Acute Medication (Past)
100 TABLET - ONE OR TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)

05-Jun-2025 Ibuprofen Tablets 400 mg Acute Medication (Past)
84 TABLET - ONE TO BE TAKEN THREE TIMES A DAY. STOP THIS MEDICINE WHEN UNWELL WITH EITHER VOMITING DIARRHOEA FEVERS SWEATS OR SHAKING. RESTART IT WHEN WELL AGAIN

05-Jun-2025 Morphine Sulfate Oral solution 10 mg/5 ml Acute Medication (Past)
100 ML - 2.5ML TO 5ML TO BE TAKEN WHEN REQUIRED FOR BREAKTHROUGH PAIN - MAX 4 HOURLY

05-Jun-2025 Paracetamol Tablets 500 mg Acute Medication (Past)
100 TABLET - ONE OR TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)

20-May-2025 Aspirin Dispersible tablets 75 mg Repeat Medication (Past)
112 tablet - TWO TO BE TAKEN DAILY AT NIGHT (DURING PREGNANCY UNTIL DELIVERY)

20-May-2025 Mirtazapine Tablets 30 mg Repeat Medication (Past)
28 tablet - 1 NOCTE

02-May-2025 Omeprazole Capsules (Gastro-Resistant) 20 mg Acute Medication (Past)
28 capsule - ONE TO BE TAKEN EACH DAY

02-May-2025 Omeprazole Capsules (Gastro-Resistant) 20 mg Acute Medication (Past)
28 capsule - ONE TO BE TAKEN EACH DAY

01-May-2025 Cefalexin Tablets 500 mg Acute Medication (Past)
14 tablet - ONE TO BE TAKEN TWICE A DAY FOR 7DAYS

01-May-2025 Cefalexin Tablets 500 mg Acute Medication (Past)
14 tablet - ONE TO BE TAKEN TWICE A DAY FOR 7DAYS

08-Apr-2025 Mirtazapine Tablets 30 mg Repeat Medication (Past)
28 tablet - 1 NOCTE

08-Apr-2025 Aspirin Dispersible tablets 75 mg Repeat Medication (Past)
112 tablet - TWO TO BE TAKEN DAILY AT NIGHT (DURING PREGNANCY UNTIL DELIVERY)

13-Mar-2025 Mirtazapine Tablets 30 mg Repeat Medication (Past)
28 tablet - 1 NOCTE

13-Mar-2025 Aspirin Dispersible tablets 75 mg Repeat Medication (Past)
112 tablet - TWO TO BE TAKEN DAILY AT NIGHT (DURING PREGNANCY UNTIL DELIVERY)

15-Feb-2025 Mirtazapine Tablets 30 mg Acute Medication (Past)
7 tablet - ONE TO BE TAKEN AT NIGHT

15-Feb-2025 Mirtazapine Tablets 30 mg Acute Medication (Past)
7 tablet - ONE TO BE TAKEN AT NIGHT

14-Feb-2025 Aspirin Dispersible tablets 75 mg Repeat Medication (Past)
112 tablet - TWO TO BE TAKEN DAILY AT NIGHT (DURING PREGNANCY UNTIL DELIVERY)

14-Feb-2025 Mirtazapine Tablets 30 mg Repeat Medication (Past)
28 tablet - 1 NOCTE

21-Jan-2025 Mirtazapine Tablets 30 mg Repeat Medication (Past)
28 tablet - 1 NOCTE

21-Jan-2025 Mirtazapine Tablets 30 mg Repeat Medication (Past)
28 tablet - 1 NOCTE

23-Dec-2024 Mirtazapine Tablets 30 mg Acute Medication (Past)
28 tablet - 1 NOCTE

23-Dec-2024 Mirtazapine Tablets 30 mg Acute Medication (Past)
28 tablet - 1 NOCTE

10-Dec-2024 Aspirin Dispersible tablets 75 mg Repeat Medication (Past)
112 tablet - TWO TO BE TAKEN DAILY AT NIGHT (DURING PREGNANCY UNTIL DELIVERY)

10-Dec-2024 Aspirin Dispersible tablets 75 mg Repeat Medication (Past)
112 tablet - TWO TO BE TAKEN DAILY AT NIGHT (DURING PREGNANCY UNTIL DELIVERY)

Allergies

04-Dec-2024 Mrs Debbie Mushet (DM)

No known allergies

Unknown

Episodicity - None

Vaccinations

This section is empty.

Referrals

This section is empty.

Test Requests

This section is empty.

Test Results

This section is empty.

Other Items

12-July-2049	Recall	Seasonal influenza vaccination
23-Sept-2026	Recall	Medication review
15-July-2026	Read Code	Termination of pregnancy NEC at home
15-Oct-2025	Read Code	Cervical smear defaulter Exclusion From SCCRS Until 15/01/2030. Reason: Defaulter
23-Jun-2025	Read Code	Medication review
01-Jun-2025	Read Code	Emergency caesarean section
04-Feb-2025	Read Code	Notes summary on computer No paper notes.Docman only. (Summary sheet) Backscanned notes checked
04-Feb-2025	Read Code	Total notes on computer

04-Dec-2024	Read Code	No relevant family history
04-Dec-2024	Read Code	User of electronic cigarette
04-Dec-2024	Read Code	User of electronic cigarette
04-Dec-2024	Read Code	White Scottish
04-Dec-2024	Read Code	Ideal Weight 61.73 Kg
04-Dec-2024	Read Code	Body Mass Index 26.01
04-Dec-2024	Read Code	O/E - height 163.83 cm
04-Dec-2024	Read Code	O/E - weight 69.8 Kg
04-Dec-2024	Read Code	Patient pregnant
04-Dec-2024	Read Code	Personality disorders pt has BPD info taken from new registration form
30-May-2024	Read Code	Subject of multi-agency risk assessment conference
28-July-2023	Read Code	Intoxication - alcohol
28-July-2023	Read Code	H/O: deliberate self harm street valium and injected household bleachIV
16-May-2021	Recall	Cervical smear due <i>Defaulter</i>
13-Jan-2020	Read Code	Spontaneous vertex delivery female
30-May-2019	Read Code	Subject of multi-agency risk assessment conference
14-Mar-2019	Read Code	H/O: recreational drug use
14-Mar-2019	Read Code	Intoxication - alcohol
28-Sept-2018	Read Code	[X]Emotionally unstable personality disorder
01-Jun-2018	Read Code	Overdose of drug paracetamol
25-Apr-2018	Read Code	H/O: deliberate self harm
11-Oct-2017	Read Code	[D]Seizure NOS
11-Oct-2017	Read Code	Overdose of drug acute intoxication due to multiple drug use and use of psychoactive substances
29-Nov-2014	Read Code	Termination of pregnancy
23-Aug-2012	Read Code	Depressive disorder NEC
18-Jan-2012	Read Code	Termination of pregnancy
21-Aug-2010	Read Code	Spontaneous vertex delivery male
22-July-2003	Read Code	Spontaneous vertex delivery female
12-Oct-1999	Read Code	H/O: behaviour problem
12-Oct-1999	Read Code	Drug dependence
05-Mar-1998	Read Code	Overdose of drug

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Pages:

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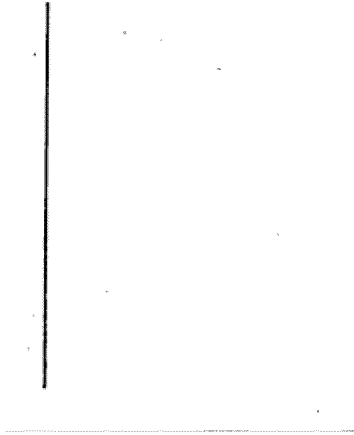
NHS Confidential: Personal data about a patient

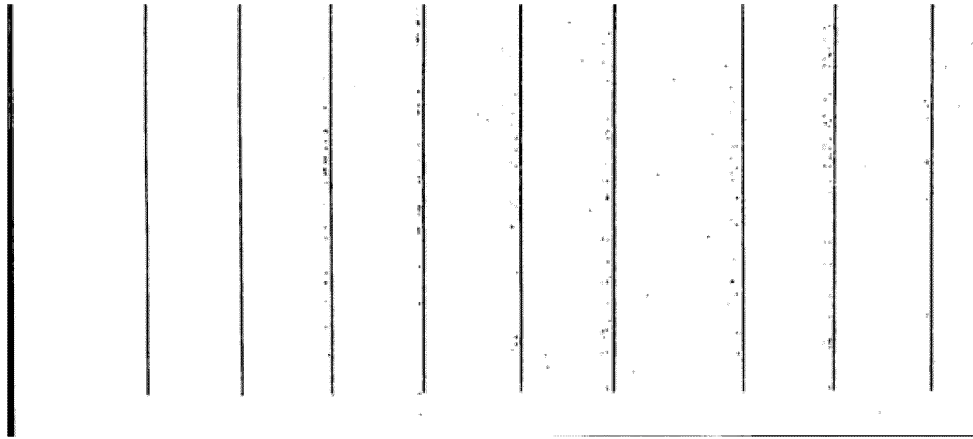
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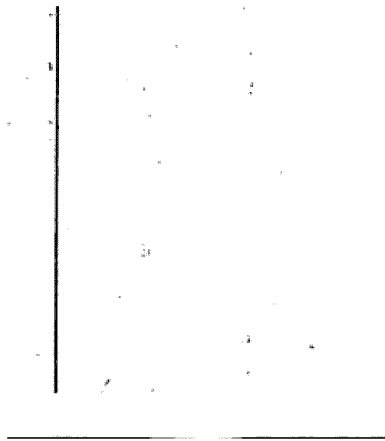
NHS Confidential: Personal data about a patient

HEALTH PROMOTION RECORD						SURNAME			
CLINIC.....						ADDRESS.....			
28/4/91						THOMSON			
13/4/91						Y6 GARRY FA			
27/12/00						GENERAL			
Date	Wt	B.P.	PEF FEV	Sug. Alb.	Blood Test	Smoke	Drink	Ne Ap	
28/4/91	357.20	90/60		NIC					
13/4/91				00					
27/12/00	951	110/70		Breathe 2 Lap 2		15/day			

	FORENAME KAY
DATE OF BIRTH 12.7.84	
SEX female	
xt pt	Medications Advice
General	
oral contraception advised & explained	







s (Block Letters)

ay

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et

Date of Birth

12.7.84

Form GP111G SG2096

Printed for APS Group DPPAS11247 (07/19)

NHS Confidential: Personal data about a patient

		National Health Service Number	
SUMMARY OF IMPORTANT ILLNESSES AND INVESTIGATIONS		Surname (Block Letters)	Forename
		Thomson	KC
		Address	
		96 Main St Lochcull	
Date			
15.11.88	diurnal + nocturnal paediatric review		
20.3.97	renal ultrasound - slight of the renal pelvis		
5.3.98	Abuse overdose.		
12.10.99	Behavioural problem, at + fighting.		
22.7.03	SVD - female.		
21.8.10	SVD - male.		
18.1.12	TOP.		
1.4.12	hosp admission ba		

s (Block Letters)

my

✓ y	Date of Birth 12.7.84
--------	--------------------------

enuresis

dilatation
an (2)

ns abuse

ck pain

3.4.12.	diagnostic ultra sou.
	non - confirmatory
6.4.12.	CT scan 4cm ma
	probable focal pyel
	mass.
20.6.12	test resolved (L) kidn
	small residual scar
23.8.12.	Repressive disorder.

Form GP111G 355-2096

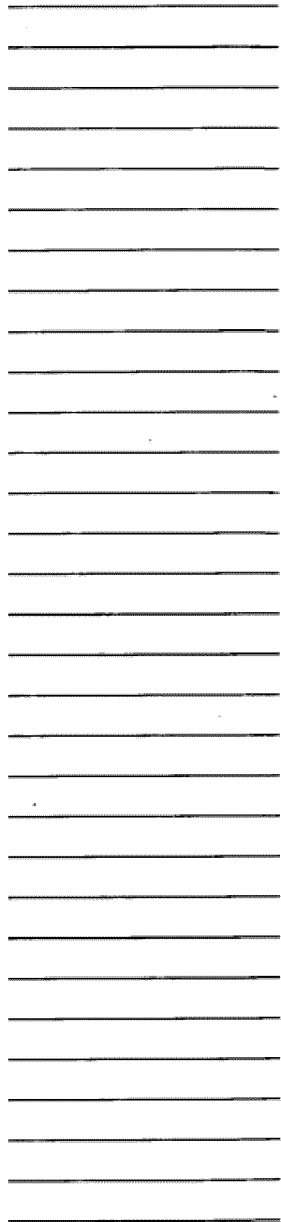
Printe

ad -

ss (2) kidney
nephritis

ly.
red area.

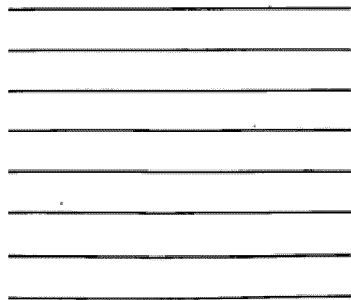
d for APS Scotland Group DPPAS11247 (01/12)



NHS Confidential: Personal data about a patient

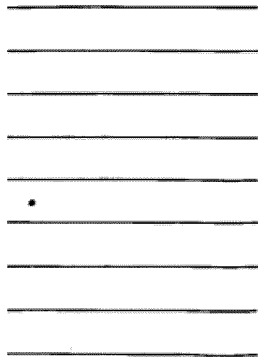
NHS Confidential: Personal data about a patient

Form GP111G



Id 8050345 200M 1/80 Barr Printers





NHS Confidential: Personal data about a patient

13 Park St X Hill

29. Mon Rose Cres
80 Lochleven Rd
Lochore

IMMUNISATIONS AND
SCREENING INVESTIGATIONS
29. Mon Rose Cres
Lochore
16.10.84 Cover UCC

National Health
Service Number

Surname (Block Letters) **THOMSON**

Forename

Address **109 MAUDE PARK
76 GARRY PARK
GLASCOW, RAU**

IMMUNISATIONS (Insert date where appropriate)

	Diphtheria	Pertussis	Tetanus	Polio	Measles	Rubel
1	16.10.84	16.10.84	16.10.84	16.10.84	29.10.85	
2	4.12.84	4.12.84	4.12.84	4.12.84		
3	18.6.85	18.6.85	18.6.85	18.6.85		
Boost	1.11.89	X	1.11.89	1.11.89		
Boost						
Boost						

Tuberculin Test BC

Result	Date	Date	Date

Other Inoculations

Type	Date				
MMR	2.2.88				

SCREENING INVESTIGATIONS

Chest X-Ray (Date)	Cervical Smear (Date)	Blood Pressure		Urine			Date
		Date		Date	Albumen	Sugar	
		4/91	90/60	4/91	1	1	4/91

ies (Block Letters)		
SA4		
		Date of Birth
SINGLY		12.7.84
la	TAB	Smallpox
:G.		
Miscellaneous		
e	Weight	Other (Specify)
	36 7/8	

SCREENING INVESTIGATIONS CONTINUED OVERLEAF

FORM GP111H

(7003) 613794 200M 3/19 HN-M 278

[illegible][illegible][illegible]

Page 53 of 661

nes (Block Letters)

KM

Date of Birth

12784

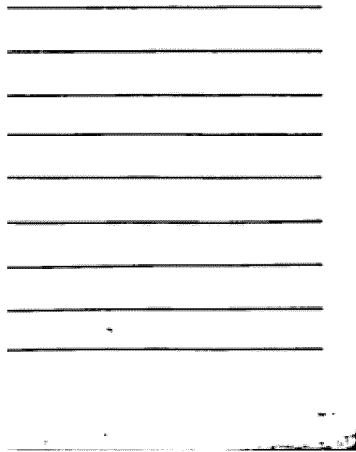
08/02

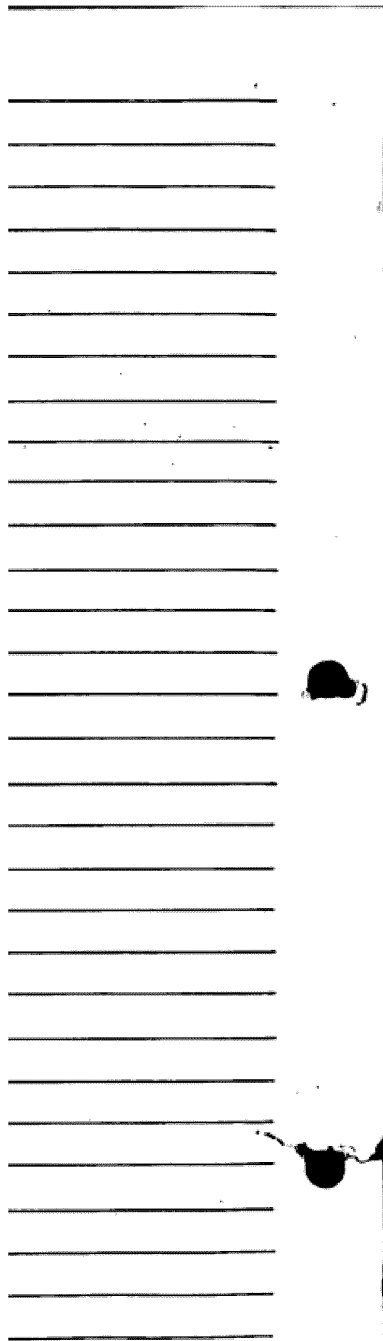
newborn

N10570

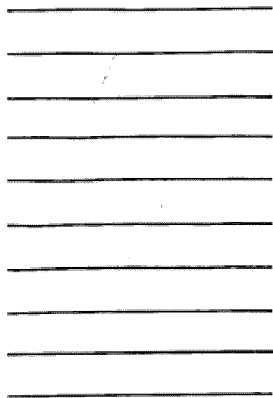
ADULT

FORM GP111M





1. 0.000



AL 53-2621 7/77



NHS Confidential: Personal data about a patient

		National Health Service Number	4
CLINICAL NOTES		Surname (Block Letters)	Forename
		THOMSON	
		Address 27 76 GARRY PARK GLONGRAIG	

Date	
6/8/84	Happy Rael. Cameron C. 209.
16.10.84	1st dose of TRIVAX A.S. 730
	Pol. vac. (oral) SKIF 5708A
14.12.84	2nd dose TRIVAX A.S.
	Pol. vac. (oral) SKIF 5708A
11.12.84	Tam. 11 Chl. - 15
	Amoxil 12.5g 3 in 1
7/1/85	Paracetamol 1000mg 3 in 1
22 APR 1985	Kooperate x 1000mg x 5mls QID
24.4.85	Culpol x 2000mg x 5mls BID/PRN
	Amoxil 12.5g 3 in 1
24.4.85	Paracetamol 1000mg 3 in 1
	Chl. - 15
	Tam. 11
18 MAY 1985	Paracetamol 1000mg 3 in 1
15.6.85	Culpol x 2000mg x 5mls BID/PRN
	Amoxil 12.5g 3 in 1
24 JUL 1985	Paracetamol 1000mg 3 in 1
24.9.85	Culpol x 2000mg x 5mls BID/PRN
	Amoxil 12.5g 3 in 1
24.10.85	Paracetamol 1000mg 3 in 1

26/84/056.

Names (Block Letters)

KAY

Date of Birth

12.7.84

42 0.54 2 gr
+ 3 drops / gr
7342 0.54
1-1 3 drops
sample 15 →
in
20 to 100%

Temp unknown

W 1524

1 20 22 L /
RN
34 0.8
042/6 sample day

u 32 L /
75134 0.81

26/11/85	Henry Cold	Amoxicillin
9 DEC 1985	Codeword: inches paid - 100.25	
12/5/87	Bezzoni a thin white	
	booster C when in	
14.5.87	Hydrocortisone was 0.37	
26.5.87	canal seal. Ten 7	
*This column has been provided for doctors to enter A, V or C at their discretion		
17	Amox 1250	3.5
	21/12/87	51 3h

FORM GP111F

125 g/L (1.70)
S-2520...

LAP
37.5 - Th. Comp. ha
1.19
1.19

Page 65 of 661

~ 54 40

54 30 40

18

2

by 50 kg

20
1500

for
with

1 night
uppt.

1. 1411

20 1000

25) 1000

22 MAR 1989	1 Wroat 14 Heller. (D)
12 9 89	Mixed appointment for bel every.
	Upp - new 2 for
	Amex 1 1257 3h by
	C 1 22 57 3 1 by
1 11 89	Syn Boster D. 1/14

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

Oral: 14 10 A D T F 132/11

Advised
colon in

10/82 (B2048) Dd. 8691304

Page 69 of 661

16/84/052

s (Block Letters)

CA7

YON TROJ CED	Date of Birth
12.7.84	

r. were cdy
Hm MMR

WRT
and

chul
del 2005

7. but. beam
to cloudy
10y

Temp 37.8°C
The center
12. 4. 2005

school
ble
216

12

		Adrian Green	
		Subs for Gregory & Lee	
		ME - as Justice plan	
13	JAN 1992	Wales / Tumbler	
		Employment of 20 up to 100	
		Calder	

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

FORM GP111F

< mth.
V.H.K.

2

NHS Confidential: Personal data about a patient

Date	
1 MAY 1992	Pippen 710P + 1sachet start a 1 after
10.12.92	Plante work a left foot.
10.10.1993	To see Dr Khan d M. exp.
	Chicken Pox.
	Calpol 100mg 4x4 20
8 APR 1993	Molluscum Pkt-Knee 1 d 10
	analgesia done. removed 2
12.10.93	upper resp. infection
	Paracetamol Elix 10ml 8x4
	Amox 200mg 3x 100
8.4.94	upper resp. infection
	Amoxycillin 500mg 3x 32
	Paracetamol Elix 10ml 3x
	Pozible in bed wetting 3
	night in a bed. Gen. a
	Adm. v. infection Peds
	to sell to Dr Khan d
	13 TO (25mg) x 14
	sup (25mg) at night only
	see 21/9
27 MAY 1994	Minor spots on the face
	of no clinical significance
	adv. endo con.
11.8.95	Plante work 61m
	Salute work 100ml x 14
12/9/95	Plante work 70ml
	Salute work 100ml
10/3/95	acute 7ml
	Temp 100
	100ml 200mg/5ml, 50

16 days.

only
new
excav.

all x14
by
to 4.
- uldy
x 24
(buzzer.

ea,

57.2°C

1/391 (2015)

		- Rancebun 268up 153
		Rm (170 ad)
15/07/95		stage 1.5 - 1st lid
		- floxup 280up 1Ad (21)
		- Chlormy 1h. Eye drop 1.7. 2.0
		Lot - Eye fix. (100)

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

mt. St. Elizabeth

3 5 days

8176457MD 750M 4/89 27219

NHS Confidential: Personal data about a patient

		National Health Service Number	42
CLINICAL NOTES		Surname (Block Letters)	Thomson
		Forenames	
		Address 107 NAVITIE PARK 29, Dumfries	
Date	28/8/95 DOP taken been to A&E w/ 3 ppts. inflamed effusion. too scared to R. Floxapen 250mg / 5ml. 5ml - Paracetamol elixir 250mg / 5ml - Dis Tilet. 200mg Osmip 28/12/95 Dme. Wt. wisden took w/ 1/2 bag through Buc. it L R. Paracetamol 250mg / 1 - Sol. Paracetamol 1 g in water (1g) also for Dexam. 15/2/96 Tonsillitis Tub. Penicillin V 200mg 4x Throat Swabs. 16/2/96 Swabs ++ Strep. infla No Throat Swabs. 5/3/96 Swabs commenced at C/O Sore Throat in an w/ Tilet + Tilet not in. Rags etc. At I w also Hot saline gargle 28/6/96 Pan in well. Lairs.		

Kam

YONTRUSE CEIT OCHORE	Date of Birth 12.7.84
----------------------------	--------------------------

List
over.
gill (Pul)
Sally gill (LW)
at breakfast room.
- inner -
brown trails -
impaction.
red (28)
The disband

by 2 vowels

thrust -
glance
up & down

44~

		CW	Sore throat	Afebrile
		The	complicated	radiation
		M	Tab Penicillin	200mg Q6
19/7/96			Done throat	See can be
			has been	not agree
			Time to	intensity

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

FORM GP111F

At the (high level)
 Ap-Prin-Tab 1/2 tab 200mg
 - paracetamol 200mg
 1 Dent. x 1 day
 See me 4/5/2000 Pres for

1 wdy
 rise from
 ash -
 in fland.

1912 (40)
 w/ 5 mch
 26 mch
 from lndy.

NHS Confidential: Personal data about a patient

Date	
29/10/96	- ulcer in mouth: recurrent the small ulcer at lateral of lower lip gets confused with bed sores. worried kidneys. one well but for 100% HbA1c 7.0mmol/mol no other. - Penicillin 250 1x2 for - 1/2 for cream ulcer and care
15/11/96	St-11 problem. i.e. pain in both feet. combs. for both with night pain. Day day 1 very upset. Crying. Tender. - both feet and legs - not great Polymorph + St + 7 to see a urologist in St-11 further investigation St-11 problem. i.e. pain in feet and legs. Has been re to urologist and to in sp. m. h. advised to give her para. 15/5/97 Define size of lower e. + some throat of both The cancelled visit Cap Amoxycillin 200g St-11 Chloramphenicol eye gel x12

eastly,
~~uh~~
~~under~~

1. 2190°

(100)
 fairer

el
 u

1°

oh
 from
 1.1.2018

of end
 u d d

lety 706

		For local use only
24/6/97	ANA.	
25-7-97	Acute pharyngitis.	
	Rx - Amoxycillin 250mg bdy QD.	
10/12/97	One throat swab taken for culture.	
	Off - by - Re Throat swab	

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

has been provided for doctors to enter A, V or C at their discretion.
 Penicillin C NOT any.

4th day

Clee

1 infant

6.

1 (28)

Dd 8435606 1980M 12/92 Ed(206505)

NHS Confidential: Personal data about a patient

		National Health Service Number	62
80 LOCHLEVEN RD LOCHORE		Surname (Block Letters)	THOMSON
CLINICAL NOTES		Forenames (Block Letters)	
16 BURGESS COURT HONEY		KATY	
		Address	
		29 MONROSE CRESCENT LOCHORE	
Date			
12/5/98	In A&E Sept 5/3/98 over No op without ring or		
23/6/98	Hurt Rt hand against ch school 3rd apr Old bruise on forearm - Marked on finger & fall. Suffer tooth 14 by Voltarol emulgel x11 for pain in the 4th Review 26/8 (CMT = 6/52 (?) Prox Test.		
6/8/98	WR		
26/10/98	4 TD MFL 19 Sep Amoxicillin 2024 7 day Lip - 2nd apr 28/10/98 Men & Cole op (immediate) - 200mg		

6/84/0Sp

(Block Letters)

1

Date of Birth
12/7/84

Done.

well

1 rh have

rt have

ing

day

~~for our word~~

ng make (Evin Thanks u)

To advised Munn

.

in day

6/84/0Sp

(20)

3299	Supp men 4/12	Some think of	Feb 2011
	Medic		
	Rx	Tel Penicillin V	250
	2 Feb (SD my)	Ghrly	
1399	Later add	par	can
	No barrel	or	urinary
	LMP	3 wks	op. via

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

FORM GP111F

W/M
Also
Super
Slipped
Nitin

R/N Sub NAD
advised not to up for
Rx Tel Augmentin

TL Caroten

2

7 dep.

V ge

probs

penven

- MGR.

pen

2004 to July

7-01

NHS Confidential: Personal data about a patient

Date	
1/3/99	FAILED TO ATTEND
11/5/99	QUT
31/8/99	Symptoms of UTI - my $\frac{1}{2}$ Tidy Trimethoprim 200mg qid involved in a fight 4th last 8 was hit over the head with a base ball bat chest knocked out, sore to was not seen, Puigut it unable to open mouth up facial scratches. (not ST) Police not yet involved. Imp Swelling + Tenderness + temporary & on point partially able to open mouth. Paracetamol 2 x id - Ref A+E done at.
11/10/99	Done related probe. Social involved in men providing in children done. At Agon has been report to child the 1 year age for child abuse.
21/10/99	about Tardis. - Tardis appeared. appeared in the car. appeared in car 5/10/2 re kept in 1 MP - End of Sept

		Presg	let - n	on 29/11
		anti	preg let	
12/11/99		LMD	7/11/99	GP cont
		any Depo provera	150 mg for 28	
		not 12/12		
16/11/99		DNA		
5/1/00		advice given by PCGC	see notes	
27/1/00		letter sent for Depo Provera	at T/Room	

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

at 99

RECEPTION
2/11/00

~ 4/2/00

NHS Confidential: Personal data about a patient

		National Health Service Number	426
CLINICAL NOTES 52 MARTIN CRES BAUNTRY		Surname (Block Letters)	THOMSON
		Forenames	K.
		Address	50 LOCHILFORD 24 MARSHALL CRES LOCHILFORD 13 ARK ST ARK
Date			
17/12/02	Lamp 3 to 4 mmHg. Gave Tring for pain. I see Mrs Khan on Fri		
19/12/02	Pain 1st 1W on ph admitted to come to result		
5 PM	Came in result to ph on 1st. Frk. p. note true. Pregnant.		
20/12/02	on 19.12.02. Ank STOP Clinic (on Tuesday 31.12.02) w/ will. full bloodwork explained.		
10/1/03	EOD - was with July, 03 w/ 15.11.03 (w) 43 mm. no more opinion.		
18/4/03	27 wks BP - 130/80 w/ 27 wks FHT 160 NO pain at 4mm. EOD - 26.7.03.		
28/8/03	AN - 31 wk. BP w/ 160 Sng 0 w/		

-84-056

(Block Letters)

47

543	Date of Birth
	12.07.84

§. NA
reparing Tent.

u
Diverse the

17th to TUP,
Part of TUP.
my let the

Colpuscopy (the)
1.45 p.m.

NA PA

1. wt. 65 kg?
46 AW

110/70
67 kg.

9603	at w/ 31 cm	FH 4
	AW - 32 wks	
	B-D - 11/170	w/ 6
	w/ 34 cm	FH - FM -
	Clue - 2/182	

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

FORM GP111F
355 2095

NHS Confidential: Personal data about a patient

Date	
10-7-03	37+ wks 36cm BP 110/60 no urine sample Advised re: diet as not taking iron advised to see GP re: ap liquid
14/7/03	Karyo - 20x60 (given by GP) Baby due next week
17/7/03	Very many contractions up very fast and we advised to go to IV for 1h
28/7/03	1st PM visit - Green on S.V. delivery on 22/7/03.
29/7/03	2nd PM - Baby no problem. Mum had soft Breast - Bowel no urinary tract Hb 10.5 (Post-natal) The temperature 20°C
30/7/03	3rd PM Baby and throat of Nystan and grey XLP dising 4h daily only Mother says to see her to-day - Baby was very not right being purple at 7. wind - Midwife advice weighty after normal - each green and feebly - and to
31/7/03	4th PM visit - Baby ok Mum feeling better baby hard good night - Breast - Hot -
1/8/03	5th PM visit Mum ok

- Paul
 K. Blakely
 in the street
 (see for back pass)

- Shaw
 Paul
 &
 ♀ baby..

1 yr.

2D XSB

5 more
 little of
 yard
 & baby
 use
 help to avoid

Bay
 1 yr

Shaw

	14513	Brother	high-	Bobby
		Discussed about	J.P.	
		going for all	J.P.	
		Family Depressed	Crying	E.P. v. 8
		Health visitor - seen		
		By the Cipriani	104	day

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

Review 11/2

no problems
fay
chick
15-25
x2.

NHS Confidential: Personal data about a patient

		National Health Service Number	4261
CLINICAL NOTES 80 LOCKHART RD LOCKHART 16 BURGESS COURT CLACKMANNAN		Surname (Block Letters)	THOMSON
		Forenames	K
		Address	29 MONTROSE C LOCKHART
Date	.	29 MONTROSE CRE	
13/4/00		Rt 1 GTN 1mg crd No flex clocku d'cer 200mg By Clinician dnt ✓ done	
19/4/00		Appt sent for Depo Provera for 28	
28/4/00		D.N.A DEPO-PROVERA	
4.5.00		By Depoprovera 150mg In given	
14/7/00		advice given by KEC see notes →	
5/7/00		Appt sent for Depo Provera for 27/7	
27/7/00		D.N.A	
24.8.00		Depoprovera are done 3 times & preg test - before Depoprovera	
5.9.00		Preg test -ve C19. By Depoprovera 150mg In	
19/10/00		D.N.A	
1/11/00		Appt sent for Depo Provera for 28/11/00	
27.12.00		L.M.D 23.12.00. Delay for and contraception w/ w for recovery.	
15.6.01		By Microgynon 30 x 3 Simp missed pill. X 3 L.M.D. 51 days ago. Sc upm & preg test	
19/6/01		Preg Test neg. 1st rank Dep	

'84/056

(Block Letters)

AY

257.

Date of Birth

12/7/84

Lecture

28

13/4/50

14/00 @ 2.45pm

100 = 4/π

Wk 3

Gray

at 4 pm

new:

42

very light

D prova

C. E.

20/6/09	F	Hypertension	150mg	as
		Next 11.9.0		
		Headache for 1/2	1/2	1/2
		See GP	1/2	1/2
		100/15	1/2	1/2
		100/15	1/2	1/2

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

FORM GP111F
355 2095

Do see GP
re Cough and 10/100 2nd R
Headache

sp 1m, 1m
1' 0" Red 814
7' 0" Photophoton
5' 0" Ocean A 02
6' 0"
L (16)

NHS Confidential: Personal data about a patient

Date	
30/7/01	Suprapubic pain generally well timed - mild swelling depression anxiety - Abdominal soft and on Depo-Provera for contraception MSU -
7/8/01	Blood for Screening DNA Blood Test
29/8/01	Appt sent for Depo-Provera for 11/9/01
18/9/01	Low back pain for 6 weeks No work - Pain 10/10. No or Pain 10/10. No work No sciatic pain. Neurologist Tender both SI joint Abdominal soft No - Nitroglycerin - 100mg - Co-dydramol 10/500 2 tablets - men.
16/10/01	LMP - 3 weeks Stiff and calcareous Micrograms 30 x 300 Painful & Back pain Tel Co-dydramol x 60 Sg of work 2 days C2152 & Back pain warned about STD Cervical smear issued and explained (Cervical Cancer)
19/10/01	LMP - 4 weeks ago Say Say had full period

was/

h

at 4.00pm

80

170 (ing)
6000 }

2.8 kg

int (G)

the (LW)

not 200

plans

ed rock and nl.

~~the~~

achieved
error

mid line
in Aug.

		name to pray - (Fyt)	
22	3.02	Scabin (Caird)	
		Lyndon (Caird)	30G.
23	4.02	2 MP - 16.4.02	Sh d Q
		2mg Depo-provera 150mg In	
		m1 12/02	

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

6602

worried about STD
 OUM card given
 action to make appt at GU
 to assessment.

Printer

NHS Confidential: Personal data about a patient

		National Health Service Number	426
		Surname (Block Letters)	Forename:
		THOMSON	K
CLINICAL NOTES		Address	
52 W. in CAES Bromley 13 FACE STREET KT11		29 MONTMORE OR LOCHMAR 3 BMD COV	
Date		Clinical Notes	
25/8/03		UPSI 2 days ago. Rx lewonelle 2 Is going to FP for up	
1-9-03		L up - sub to about area first emergency R.V. period explained So gay to get in Cauterize F.P.N. - BR - 10/170	
30-11-03		Blood tube L up - in Implant steel vent in arm is 2 scars ly Lyschea cream x306 for wound up only as for one treatment only	
12-1-04		GU exes severely with No rash - explained	
9/4/04		DNA	
11/4/04		Donor area corium H10	

- 84 - 056

s (Block Letters)

AY

is	Date of Birth
Li	12.07.84

4	Diagnosis
---	-----------

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---	--

--	--

Thom	
------	--

July	
------	--

x 1/3 body	
------------	--

25.8.03	
---------	--

dy 12V	
--------	--

--	--

--	--

Centrosclerosis	
-----------------	--

my 1. Tru	
-----------	--

--	--

eider	
-------	--

compil	
--------	--

my	
----	--

1200 nakes	
------------	--

20		diagnosis scan of
		implant for conversion
		of TL C: pram. 20mg d/s
		Review 4/52
21/7/03		Letter sent re c/s due
20/10/04		Letter sent re c/s due

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

FORM GP111F

PRINTED F

355 2095

	3.9.07
✓	
✓	X28

heir discretion

OR ASTRON. B30160 3/03 (017302)

Page 113 of 661

14 Feb	120/60 P77
	(N) Suckled headlamps
	over 500ms
	Amat. Kell
	Cavendish 1 hour MAD

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

discretion

5/2000 204722

NHS Confidential: Personal data about a patient

		National Health Service Number	426
		Surname (Block Letters)	Thomson
		Forename	K
CLINICAL NOTES 32 canal ligament <u>dent</u>		Address 3 Bmcs COJ 12 MARLYN CREE BRUNNABY Loca	
Date	.	Clinical Notes	
7.11.07	249	120/100 MAP Unprotected 36hr GD Tennelle 2/1500 x1 K	
2/3/07		DMA	
30/7/07	77	Painful (R) Injuries	
	77	Occupational Sporo	
		Aa ① Double Tubing GAS	
		② Vortical Emulsion	
		me 7-0-5 x 11	
		1 1 1 All	

27.4	✓	Insulin / HbA1c
		Amoxicillin
		Norco ✓
		✓

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

FORM GP111F

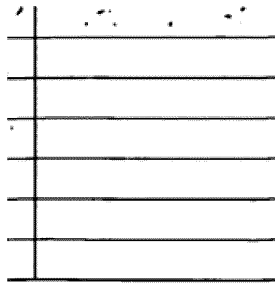
PRINTED

355 2095

heir discretion

FOR ASTRON, B43522 9/05 (017302)

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



in discretion

5/2000 204722

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Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

ASSIGNMENT FORM**PATIENT ASSIGNMENT TO A NHS GENERAL MEDICAL PRACTICE**

- Please use **BLOCK CAPITALS** to complete the form and tick all relevant boxes.
- Failure to complete this form fully may delay locating any medical records promptly.
- All assignments are issued to practices on a strictly rotational basis.
- Patients are expected to remain with the practice for a **minimum of three months**.
- Eligibility to use the NHS services depends mainly on residence in the UK, and on other qualifying provisions set out in the Regulations.
- The patient, or their representative, **must** sign the declaration overleaf.

NHS
National
Services
Scotland

08 SEP 2020

PERSONAL DETAILS (ALL FIELDS MARKED * ARE MANDATORY AND MUST BE COMPLETED AS FULLY AS POSSIBLE)

WILL YOU BE IN THE AREA FOR MORE THAN THREE MONTHS? *

YES ☒ NO ☐

IS THIS YOUR FIRST REGISTRATION WITH A GP PRACTICE IN THE UK? *

YES ☐ NO ☒

SURNAME *

THOMSON

TITLE (Not held on CHI)

MISS

MALE *

☐

FEMALE *

☒

FORENAME *

KAM

MIDDLE NAME *

PREVIOUS SURNAME *

DATE OF BIRTH *

12/07/1984

CURRENT ADDRESS *

14 CRAIGIE, GARDENS BALLINGRY
POSTCODE KY5 8NG

TOWN OF BIRTH *

COUNTRY OF BIRTH *

KIRKCALDY/FIFE

MOTHER'S MAIDEN NAME *

OHARE

CONTACT TELEPHONE NUMBER (Not held on CHI)

07980

PREVIOUS ADDRESS IN THE UK *

36 KIRKTOON PARK BALLINGRY
POSTCODE KY5 8PB

NAME AND ADDRESS OF PREVIOUS REGISTERED GP PRACTICE IN THE UK *

LOCHGELLY MEDICAL PRACTICE
POSTCODE

COMMUNITY HEALTH INDEX NUMBER

1007840183

NATIONAL HEALTH SERVICE NUMBER

426/84/086

Page 126 of 661

NHS Confidential: Personal data about a patient

Dr Robert A. L. Low
Consultant Gynaecologist
 S.B.St.J., T.D., M.B., F.R.C.S (G), F.R.C.O.G.

Consulting Rooms

Nuffield Hospital
 25 Beaconsfield Road
 Glasgow
 G12 0PJ
 Tel 0141 334 9441
 Fax 0141 339 1352

Ross Hall Hospital
 221 Crookston Road
 Glasgow
 G52 3NQ
 Tel 0141 810 3151
 Fax 0141 882 7439

Residence

9 Chapelton Gardens
 Bearsden
 Glasgow
 G61 2DH
 Tel 0141 942 9103
 Fax 0141 942 1658

Email: rail98.freeserve.co.uk

01/06/2007

Private & Confidential
 Dr Kenneth Thomson
 Lochgelly Health Centre
 Main Street
 Lochgelly
 Fife

RECEIVED

- 4 JUN 2007

FILE	
TELL PT NORMAL	
SEC / NURSE	
MAKE APPT.	
FOR RX	
PLEASE PLEASE	
TEL PT C RESULT	
PUT ON COMPUTER	

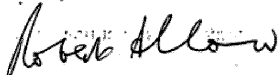
Dear Dr Thomson,

Ms Kay Thomson DOB **12/07/1984**
 3 Baird Court Lochgelly Fife KY5 9NB

Your patient was seen by me at the Glasgow Nuffield Hospital on the 31st May, together with her cousins with a view to her becoming an egg donor for Mr & Mrs Gill. The Gills are very keen to achieve a pregnancy but have been declined treatment at the Royal Infirmary of Edinburgh on the grounds of Mrs Gill's age and high FSH levels. Kay has offered to donate eggs in their case and I have counselled her thoroughly regarding the procedure and am happy if she were deemed suitable to help the Gills to proceed in their case. I understand that Kay has previously been on injectable methods of contraception and I have suggested that when the current one runs out she might like to resume the combined oral contraceptive pill for a couple of months, until we can include her in our ACS programme in Glasgow.

I have referred the parties involved to my ACS counselling team for further assessment and will keep you informed as to progress. I trust that this is satisfactory.

Yours sincerely



Robert A L Low
 Consultant Gynaecologist

Copy to: ACS Unit, Glasgow Nuffield Hospital

NHS Confidential: Personal data about a patient

CO17 (2)

*Dr K Thompson
The Health Centre
David Street
Lochgelly
Fife
KY5 9QZ*

Tel: 01592 780358

05/03/2007

Miss Kay Thomson,
3 Baird Court,
LOCHGELLY,
KY5 9NB.

Dear Miss Thomson,

I note you did not attend an appointment at the doctor's surgery on Friday 2nd March 2007 at 3.50 p.m.

This is just a note to let you know that the practice policy is that if you do not attend three appointments I am afraid you will be removed from the list and at the moment you have missed two.

Yours sincerely,

Dr K Thompson.

NHS Confidential: Personal data about a patient

Contraception & Sexual Health Service – NHS Fife

Date: 3-1-07

Contraception Clinic
Carnegie Clinic
Inglis Street
Dunfermline, Fife
KY12 7AX
Tel: 01383 722911

Dear Doctor Thomson,

Re: KAY THOMSON

Address: 32 BANGU LYNCH BOUAT

DUNFERMLINE KY12 8AU

D.O.B 12/7/54 CHI Number:

Your patient has attended at this contraception clinic for advice. After assessment and discussion of the risks and benefits in her case she has been:

☒ Prescribed: Depo provera. Aven 3/1/07

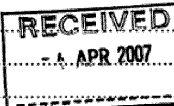
☐ Fitted with: ~~h~~

Removal due by:

Patient aware of her responsibility to arrange appropriate follow-up for this!

☐ Referred for termination of pregnancy (TOP) at approximately weeks.
Her appointment is on / will be arranged *.

☒ Other: Implanon removed



FILE
TELL PT NURSE
SECT NURSE
MAKE APPT
FOR RX
NOTES PLEASE
TELEPHONE
FOR COMPLAINT

If there is any relevant factor of which we may not be aware of her past history or present treatment - especially if this might indicate the use of a different contraceptive method - please kindly notify the department as soon as possible.

Yours sincerely,

J. Jan (J. JAN)

Doctor / Nurse* (Signature / NAME)

* delete as appropriate

NHS Confidential: Personal data about a patient

COPY (1)

*Dr K Thompson
The Health Centre
David Street
Lochgelly
Fife
KY5 9QZ*

Tel: 01592 780358

26/01/2006

Miss Kay Thomson,
52 Martin Crescent,
BALLINGRY,
KY5 8QD.

Dear Miss Thomson,

I note you did not attend an appointment at the doctor's surgery on Thursday 26th January, 2006 at 4.00 p.m. This is just a note to let you know that the practice policy is that if you do not attend three appointments I am afraid you will be removed from the list.

Yours sincerely,

Dr K Thompson.

NHS Confidential: Personal data about a patient

Dr. M.A.R. Khan M.B.B.S
Dr. F. Khan M.B.B.S., (D(Obst) R.C.O.G

**HEALTH CENTRE
DAVID STREET
LOCHGELLY
FIFE
KY5 9 QZ**

Tel: 01592 780358

20TH October, 2004

**Miss Kay Thomson,
13 Park Street,
CROSSHILL.**

Dear Kay,

Your name has come up on our list showing that your Cervical Smear is now due.

It is important that you have this done and I would be grateful if you would make an appointment to have this carried out.

Please bring a specimen of urine with you for testing.

Yours sincerely,

Receptionist

NHS Confidential: Personal data about a patient

Dr. M.A.R. Khan M.B.B.S
Dr. F. Khan M.B.B.S., (D(Obst) R.C.O.G

HEALTH CENTRE
DAVID STREET
LOCHGELLY
FIFE
KY5 9 QZ

Tel: 01592 780358

21 July 2004

Miss Kay Thomson,
13 Park Street,
CROSSHILL.

Dear Kay,

Your name has come up on our list showing that your Cervical Smear is now due.

It is important that you have this done and I would be grateful if you would make an appointment to have this carried out.

Please bring a specimen of urine with you for testing.

Yours sincerely,

Dr. FARIDA KHAN

NHS Confidential: Personal data about a patient

Dr. F. KHAN M.B.B.S., D.(Obst) R.C.O.G.
Dr. M.A.R. KHAN M.B.B.S.

THE HEALTH CENTRE
DAVID STREET
LOCHGELLY
FIFE KY5 9QZ
☎(01592) 780358

23 October 2003

Miss Kay Thomson,
13 Park Street,
CROSSHILL
KY5 8AW.

Dear Kay,

As you have not attended for your post natal examination, I would be grateful if you would contact the surgery to arrange a suitable time to have this done.

Thank you.

Yours sincerely,

Dr. F. Khan

NHS Confidential: Personal data about a patient

Fife Primary Care NHS Trust



Family Planning and Well Woman Clinic
Carnegie Clinic
Ingis Street
DUNFERMLINE
FIFE KY11 7AX
Telephone (01383) 722911
Fax: (01383) 620180

Date: 19/09/03
Your Ref:
Our ref:
Enquiries to:
Extension:
Email: audreybrown@fife-pct.scot.nhs.uk

Dear Doctor, *Khan*

RE *Kay Thomson*
13 PARK ST.
CROSSHILL

The above patient attended this Family Planning Clinic and Implanon was inserted.

This will be due for removal *Sept 2006*

Yours sincerely,

[Signature]
Medical Officer

Comments:-

MS
RECEIVED 22 SEP 2003



Awarded for excellence
to Nutrition and Dietetics Department

MS460

NHS Confidential: Personal data about a patient

General Practitioner Communication Letter

Fife Primary Care
NHS TRUST

Date 3-9-03

To Dr Khan

Dear Dr

The undernoted client has completed the Edinburgh Postnatal Depression Scale and has given her permission to inform you of the following results:

Name: KAY THOMPSON

Address: 13 Park St
Carnegie Hill

DOB: 12-7-84

EPDS Score: 9

Date Completed: 3-9-03

Age of Baby: 6 weeks

RECEIVED 20 SEP 2003

Comments

Kay still needs considerable support from her family but is gradually becoming more involved in handling the baby.

Yours sincerely

Margo Hutton

HEALTH VISITOR

NHS Confidential: Personal data about a patient

*Dr M.A.R. KHAN M.B.B.S.
Dr F. KHAN M.B.B.S., D(Obst) R.C.O.G.*

**HEALTH CENTRE
DAVID STREET
LOCHGELLY
FIFE KY5 9QZ
☎ 01592 780358**

29 July 2003

*Miss Kay Thomson,
13 Park Street,
CROSSHILL.*

Dear Kay,

I would be grateful if you would attend for your post natal examination on Friday, 5th September, 2003 before 10.30 a.m.

If this appointment is unsuitable please contact the surgery and an alternative appointment will be arranged.

Please bring a specimen of urine with you for testing. Thank you,

Yours sincerely,

Dr Farida Khan.

**IT IS IMPORTANT YOU INFORM US IF YOU ARE
UNABLE TO ATTEND**

NHS Confidential: Personal data about a patient

Fife Acute Hospitals NHS Trust
Forth Park Hospital

POST NATAL DISCHARGE SUMMARY FOR MATERNITY SERVICES

NAME		FP103363H		NO.		WARD ONE	
ADDRESS:		THOMSON KAY 29 MONTROSE CRESCENT LOCHORE KY5 8EA		LARGE ADDRESS: (if different)			
TELEPHONE		DR KHAN		TELEPHONE NUMBER:		01592 869165	
GENERAL PRACTITIONER:		DR KHAN		CONSULTANT:		Dr Wrale	
Parity: 0+0	Date of Admission:	22/7/03		Date of Discharge:	23/7/03		Blood Group: O neg
ANTENATAL	Complications	Amniocentesis		Detailed Scan	Antenatal Hb	Double Test	
Comments:		10.4641 27/6/03					
Signed:		CHEAP		Date:		22/7/03	
BOUR	Date of Delivery:	22/7/03		Time of Delivery:		13.31	
Spontaneous	Induced	Accelerated		Blood loss	150ml	Epidural	
Delivery	SVD	Assisted Breech		HFFD	Ventouse	CS	WFD
Third Stage	Placenta Complete	Incomplete		MROP	Membranes Complete	Incomplete	
Perineum	Intact	Episiotomy		Laceration	labial tear - not sutured		
Comments:							
Signed:		CHEAP		Date:		22/7/03	
PUERPERIUM	Perineum satisfactory	Yes	No	Contraception advice given	Yes	No	
Anti D required	Yes	No	Ante D given date:	23/7/03	3rd day Hb required	Yes	No
Emotional state on discharge good	Yes	No	Post natal appointment:	GP	Hospital		
Wound:	Prolene/Staples removed	Yes	No				
Drug therapy on discharge							
Comments:		ANTI D GIVEN 23/7/03					
Signed:		P.P. Nan Fraser		Date:		23.07.03	
Y	Male	Female	Surname:	Forename:	Gestation:	Apgar:	
OFC Birth	33cm	OFC 3rd day	Length:	52cm	Birth Weight:	Discharge Weight:	
Feeding	Breast	Artificial	Guthrie test done	Date: 24/7/03			
Jaundice	Yes	No	SBR	Date last done	Hips Normal	Yes	No
BMR within limits	Result:	Follow up?	Yes	No	Drug therapy on discharge	Yes	No
Comments:		PASSING URINE AND STOOLS, BREASTFEEDING WELL ON DEMAND.					
Signed:		Steele		Date:		23/7/03	
COMMUNITY MIDWIFE COMMENTS:		10th DAY:					
Date of transfer to Health Visitor:		Signature:					

MS1936

NHS Confidential: Personal data about a patient

FORTH PARK HOSPITALG.P. NAME DR KHANCONSULTANT Dr. Wrede

SHARED CARE/HOSPITAL CARE

ADMITTED: 17.7.03DISCHARGED: 17.7.03**ANTENATAL DISCHARGE SUMMARY**

Surname: Unit No.:
 C THOMSON KAY FP103363H
 C 29 MONTROSE CRESCENT
 LOCHORE KY5 8EA
 DR KHAN 12.07.1984

DISCHARGE ADDRESS
(if different) SLAAGE
18PARITY
000BLOOD GROUP
O NEG**DIAGNOSIS AND TREATMENT**

sent referral at 38th weeks ? in labour
 Has had backache and pain intermittently
 for 3 weeks
 maternal observation satisfactory
 refused cardiotocograph (CTG) monitoring
 Fetal heart heard with sonicaid
 satisfactory
 vaginal examination done with consent
 cervix posterior
 medium consistency
 os admit a finger tip
 uneffaced
 vertex 2cm above spine
 membranes in tact
 no change from UE done 14.7.03
 Advice given to contact Forth park if further
 concerns.

RUBELLA
 (Immune/Not Immune)
 CERVICAL
 CYTOLOGY

Done/Not Done

Ref. No.:

Result:

ANTI-D

Given/Not Given

RUBELLA VACCINE

Given/Not Given

FOLLOW UP

TO ATTEND G.P.

TO ATTEND ANTENATAL CLINIC ON at 41 weeks as arranged

TO ATTEND POSTNATAL CLINIC ON

SIGNATURE M. Chahine M. ChahineDATE 17.7.03

MS1311

NHS Confidential: Personal data about a patient

FORTH PARK HOSPITAL

G.P. NAME

CONSULTANT

SHARED CARE/HOSPITAL CARE

ADMITTED: 14/7/03

DISCHARGED: 14/7/03

ANTENATAL DISCHARGE SUMMARY

FP103363H

THOMSON KAY
29 MONTROSE CRESCENT

LOCHORE

C DR KHAN

KY5 8EA

12.07.1984

Ward/Department: MW

DISCHARGE ADDRESS
(if different)

AGE

PARITY

BLOOD GROUP

0 to

O neg

DIAGNOSIS AND TREATMENT

Admitted at 38+2/52 with backache.
No signs of labour - cardiotocograph
satisfactory. On vaginal examination, cervix
dilated.
Allowed home

RUBELLA
Immune/Not ImmuneCERVICAL
CYTOLOGY

Done/Not Done

Ref. No.:

Result:

ANTI-D

Given/Not Given

RUBELLA VACCINE

Given/Not Given

FOLLOW UP

TO ATTEND G.P.

Friday 18/7/03

TO ATTEND ANTENATAL CLINIC ON

TO ATTEND POSTNATAL CLINIC ON

SIGNATURE

J. McArthur S.M.

DATE 14/7/03

MS1311

NHS Confidential: Personal data about a patient

FORTH PARK HOSPITAL		ANTENATAL DISCHARGE SUMMARY		
G.P. NAME <u>Dr Khan</u>	THOMSON KAY 29 MONTROSE CRESCENT LOCHORE DR KHAN	FP103363H KY5 8EA 12.07.1984	Ward/Department: <u>MLU</u>	
CONSULTANT <u>Dr. Wrede</u>	DISCHARGE ADDRESS (if different) <u>SLA</u>			
SHARED CARE HOSPITAL CARE		BLOOD GROUP		
ADMITTED: <u>8.7.03</u>	AGE <u>18</u>		PARITY <u>0+2</u>	<u>O Neg.</u>
DISCHARGED: <u>8.7.03</u>	RUBELLA ☒ Immune / ☐ Not Immune CERVICAL CYTOLOGY ☒ Done / ☐ Not Done Ref. No.: Result:			
DIAGNOSIS AND TREATMENT Self referral at 37 ⁺ wks gestation with history of ? early labour. CTG satisfactory VE: Os closed / posterior / long. for home to phone A&T if any further concerns. Given Kefate 30/500 prior to discharge.				
FOLLOW UP TO ATTEND G.P. TO ATTEND ANTENATAL CLINIC ON <u>David St, L'Gelly 4/10</u> TO ATTEND POSTNATAL CLINIC ON				
SIGNATURE <u>P. Cooney</u>				DATE <u>8.7.03</u>

MS1311

NHS Confidential: Personal data about a patient

Fife Acute Hospitals NHS Trust
Victoria Hospital

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



Dictated: 04 February 2003
Typed: 25 February 2003
Our Ref: WC/mt/V306915B
Enquiries: Mrs M Thomson, Secretary
Extension: 8642
Department: Gynaecology

Dr Khan
Health Centre
LOCHGELLY

Dear Dr Khan

KAY THOMSON (12.07.84)
29 MONTROSE CRESCENT, LOCHORE

I saw this patient in Ward 3, Forth Park Hospital on 23 December 2002. She is an 18 year old para 0+0 with a history of three months amenorrhoea. She was unsure of her LMP. She gave a history of right lower abdominal pain for two days. There was no history of pv bleeding. Bowels and micturition were normal.

Abdominal examination was unremarkable and there was no tenderness or guarding. Speculum examination was normal and vaginal examination revealed a bulky uterus. Adnexae were clear with no fullness or tenderness and no cervical excitation.

As there were minimal symptoms, I sent her home on the same day with an appointment for the Early Pregnancy Clinic for ultrasound.

Yours sincerely


Yeswanthini Subbiah
SHO in Gynaecology

RECEIVED - 6 MAR 2003

Headquarters
Hayfield House Hayfield Road Kirkcaldy Fife KY2 5AH
Chairman David Stewart
Acting Chief Executive John Wilson

M5765

NHS Confidential: Personal data about a patient



FORTH PARK HOSPITAL

DIRECTORATE OF WOMEN AND CHILDREN'S HEALTH

THOMSON KAY
29 MONTROSE CRESCENT
LOCHORE
DR KHAN

FP103363H

KY5 8EA

12.07.1984

Dear Doctor

The above patient attended the antenatal clinic on 20/1/03 and was booked for delivery at Forth Park under the care of Dr Pinion/Wrede/Archer/Mahmood/Tyden. The following investigations were carried out:

Group and type

NEGATIVE

Hb

11.2

Hepatitis B antigen

NEGATIVE

WR

NEGATIVE

MSU

POSITIVE

Rubella

Endocervical swab/HVS

Cervical cytology

Ultrasound scan (EDD)

26/7/03

Previous obstetric Hx

P0+0

(Special features)

Smoker

Investigations Planned During Present Pregnancy:

AFP/HCG/Neither

Anomaly screening scan

3 booked

Other

Special Features: Shared antenatal care/early PN discharge/DOMINO/home confinement/midwife led unit.

Yours sincerely

RECEIVED

Consultant Obstetrician

EE/BOOKINGLETTER/20.11.01

NHS Confidential: Personal data about a patient

Hospital use Only	Clinic	Day Date	Time	Hospital No.
REQUEST FOR CONSULTATION				
Hospital	FORTH PARK HOSPITAL		Date	10.01.03
Please arrange an appointment for the		BOOKING	Clinic of Dr/Mr Consultant Obstetrician	
Surname	THOMSON	Maiden Surname		
First Names	KAY	Single/Married/Other SINGLE		
Address	29 MONTROSE CRESCENT LOCHORE	D.O.B.	12.07.84	Religion
		Patient's Occupation		
Post Code	KY5 8EA	Tel. No.	01592 869165	Husband's Occupation
Date of last pregnancy in this hospital		Name, Address & Telephone No. of Medical Practitioner		
If the patient's name and/or address has/have changed since then, please give details		DR FARIDA KHAN		
		HEALTH CENTRE		
		LOCHGELLY		
		01592 - 780358		
Please use Rubber Stamp				
Reason for Referral: 1) Booking for Hospital Delivery ☐ with shared Ante Natal care				
2) Other ☐				
Date of First Day of L.M.P.		OCTOBER, 2002		
Dates of any pregnancy tests with results		POSITIVE - 19.12.02		
HISTORY: PRIMA GRAVIDA				
Drugs:-				
Signature				

NHS Confidential: Personal data about a patient

Fife Acute Hospitals NHS Trust
Forth Park Hospital

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



EARLY PREGNANCY CLINIC

FM/JC/FP103363H

24TH December, 2002.

Dr. Khan
Health Centre
LOCHGELLY

Dear Dr. Khan,

Kay Thomson (12.7.84)
29 Montrose Crescent, Lochore

The above lady attended the early pregnancy clinic today with a complaint of 8 to 10 weeks of amenorrhoea and some lower abdominal pain.

On ultrasound scan a viable intra-uterine pregnancy of approximately 9 weeks gestation was seen with a positive fetal heart.

This lady is still uncertain as to whether she wishes to continue with this pregnancy and in fact has an appointment for the TOP clinic on 31st December. She has been advised to consider her options and cancel her TOP appointment if this is appropriate.

We are discharging her from the early pregnancy clinic at present and no booking appointment has been arranged as yet due to her uncertainty.

Many thanks,

Yours sincerely,

Fiona McNamee,
Gynaecological SHO

RECEIVED 30 DEC 2002

Headquarters
Hayfield House Hayfield Road Kirkcaldy Fife KY2 5AH

Chairman David J. Stobie
Acting Chief Executive John Wilson

MS762

NHS Confidential: Personal data about a patient

CLINICAL NOTES		FIFE ACUTE HOSPITALS NHS TRUST		VICTORIA HOSPITAL, KIRKCALDY	
TIME 19.30. ♀ 18 y.o., attended A&E for (a) groin pain since Saturday. Has been with one - still feel sick. Pregnant (? 6 weeks). No IV discharge. ? 6-8 weeks pregnant ♀: looks all right - RIF tenderness no guarding no constipation BS P/V examination - Ht = 30/102 regular. Hb = 11.1 + 0 any PV - tender A>L adnexae? Apendicitis. ? ectopic -> forth pain DISPOSAL Admitted to ... DOCTORS NAME ... COPIES: White: G.P. Pink: Notes White: Casualty Card		V. No. ... DATE OF ARRIVAL 25/12/14 DATE OF INCIDENT ... PLACE OF INJURY: WORK ☐ HOME ☐ SCHOOL ☐ RTA ☐ OTHER ☐ ARRIVAL: AMBULANCE Y ☐ N ☐ REFERRED BY: ... TEMPORARY ADDRESS ... POSTCODE ... TEL ... GP Dr Kuan ADDRESS Locmure RECEIVED 27 DEC 2014		FORENAME KAY SURNAME THOMSON ADDRESS 29 MURROSE CRES LOCURE POSTCODE K15 8EA TEL 01592 869165 D.O.B. 12.7.84 AGE 18 SEX M MARITAL STATUS S MR MRS MS MISS MASTER OCCUPATION/SCHOOL RELIGION PREVIOUS ATTENDANCE N.O.K./RELATIONSHIP NAME PARENTS ADDRESS 51A TEL NO NOTIFIED TIME TRIAGE T 369 P 91 BP 110/70 R O2 SATS 99 BM CAT 1 ☐ 2 ☐ 3 ☒ 4 ☐ 5 ☐ COMPLAINT PAIN (a) GROIN	

NHS Confidential: Personal data about a patient

Hospital use Only	Clinic	Day Date	Time	Hospital No.	GP112B
Ambulance Transport Required		REQUEST FOR OUT-PATIENT CONSULTATION		Appointment Category	
No				Routine ☐ Soon ☐ Urgent ☒	
Hospital	FORTH PARK	Date	20.12.02	CHI No.	0 4 8 3
Please arrange for this patient to attend: the Patient's Surname THOMSON		STOP		Clinic of Dr/Mr	
First Names KAY		Maiden Surname		Single/Married/Widowed/Other SINGLE	
Address 29 MONTROSE CRESCENT LOCHORE		Date of Birth 12.07.84		Patient's Occupation	
Post Code KY5 8EA		Contact telephone number			
Has the patient attended hospital before?		YES		IF "YES" PLEASE STATE	
Name of Hospital VICTORIA		Year of attendance 1998 Hospital No. V308915		Name, Address & Telephone number of MEDICAL/DENTAL PRACTITIONER	
If the patient's name and/or address has/have changed since then, please give details				DR FARIDA KHAN	
Can patient attend at short notice ?		YES		HEALTH CENTRE	
IF YES, minimum notice required		days		LOCHGELLY	
				01592 - 780358	
				Please use Rubber Stamp	
				2 1 3 7 0	

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

Dear Doctor,

Thank you for seeing Kay. She is asking for termination of pregnancy. Her last period was ? 3 months ago. Pregnancy test was positive on 19.12.02. She was on Depo Provera injection but she did not come for the injection when it was due.

The abortion form is signed and attached.

Thank you,

Yours sincerely,

Dr Farida Khan.

Present drug treatment and potential special hazards:

X-ray (women of childbearing age). Date of first day of LMP

Relevant X-rays available from: No. (If known)

Signature

NHS Confidential: Personal data about a patient

Dr. F. KHAN M.B.B.S., D.(Obst) R.C.O.G.
Dr. M.A.R. KHAN M.B.B.S.

THE HEALTH CENTRE
LOCHGELLY
FIFE KY5 9QZ
☎ (01592) 780358

22 November 2002

Ms. Kay Thomson,
80 Lochleven Road,
Lochore,
Fife.

Dear Kay,

Please note your annual breast and blood pressure check is now due. I would be grateful if you would call in to the surgery any morning Monday to Friday 8.30 a.m. to 10.30 a.m.

If these times are unsuitable, please contact the surgery and an alternative appointment will be arranged.

Please bring a specimen of urine with you for testing.

Thank you.

Yours sincerely,

Dr. F. Khan.

IT IS IMPORTANT YOU INFORM US IF YOU ARE UNABLE TO ATTEND

NHS Confidential: Personal data about a patient

Dr. F. KHAN M.B.B.S., D.(Obst) R.C.O.G.
Dr. M.A.R. KHAN M.B.B.S.

THE HEALTH CENTRE
LOCHGELLY
FIFE KY5 9QZ
☎ (01592) 780358

19 September 2001

Miss K. Thomson,
29 Montrose Crescent,
Lochore,
Fife

Dear Kay,

Please note your annual breast and blood pressure check is now due. I would be grateful if you would call in to the surgery any morning Monday to Friday 8.30 a.m. to 10.30 a.m.

If these times are unsuitable, please contact the surgery and an alternative appointment will be arranged.

Please bring a specimen of urine with you for testing.

Thank you.

Yours sincerely,

Dr. F. Khan.

IT IS IMPORTANT YOU INFORM US IF YOU ARE UNABLE TO ATTEND

NHS Confidential: Personal data about a patient

Copy

Dr F. KHAN M.B.B.S., D.(Obst) R.C.O.G.
Dr M.A.R. KHAN M.B.B.S.

THE HEALTH CENTRE
LOCHGELLY
FIFE KY5 9QZ
☎ 01592 780358

16th November 2000

Kay Thomson
29 Montrose Crescent
Lochore
Fife KY5 8EA

Dear Kay,

Please note your annual breast and blood pressure check is now due. I would be grateful if you would call into the surgery any morning Monday to Friday 8.30 a.m. to 10.30 a.m.

If these times are unsuitable please contact the surgery and an alternative appointment will be arranged.

Please bring a sample of urine with you for testing.

Thank you.

Yours sincerely,

Dr F. Khan.

IT IS IMPORTANT TO INFORM US IF YOU CANNOT ATTEND

Copy

NHS Confidential: Personal data about a patient

To: 9,01592784139		From: Adastra		04/07/00 07:47 Pg 02/03	
Call Number: 49996	Time Call Received		20:35		
Date: 03-Jul-2000	Time Passed		20:35		
Urgency: Routine	Initially advised at		20:39		
Type: Advice	Patient Seen at		---		
KAY Thomson 29 Montrose Crescent Lochore		Own GP:	Khan, F Lochgelly (Drs Khan & Khan)		
		Passed to:	Alcock, James		
Female					
12-Jul-1984 (Age: 15 years) Tel: 01592 869165		Origin:	Same Address		
		Tel:	-		
Reported Condition with any special notes lodged by the patient's GP: FLU-LIKE SYMPTOMS.					

Consultation Notes:

UP OVERNIGHT - HEADACHE, SORE BODY/THROAT ETC. NO RASH HOT FEELS SICK ETC.
FEVER CARE - INITIAL BATH COOLING, THEN FLUIDS, ASPIRIN GARGLE, AND
PARACETAMOL, RV IF REQ.

all outcome was: Advice

Follow-up Action:

follow up message (No Further Action)

Name: Dr Alcock, James

NHS Confidential: Personal data about a patient

FIFE HEALTH BOARD

Chiropody Service

Office Use Only	Date Received	19/4	Chiroprapist	Thomson	Clinic	C/1300
	Assessment Date		GP No	(PAEOS)	Domiciliary	
	Treatment Date				Ineligible	

(Please complete in BLOCK CAPITALS using a separate sheet for each patient)

REQUEST FOR CHIROPODY TREATMENT	
Applicant's Name	KAY THOMSON
Address	29 MONTROSE CRESCENT LOCHORE
Post Code	KY5 8EA
Date of Birth	12.07.84 Male ☐ Female ☒
CHI No	0483
Hospital Index No	
Name, Address & Telephone Number of MEDICAL PRACTITIONER	
DR. M. A. R. KHAN MBBS THE HEALTH CENTRE LOCHCELLY FIFE KY5 9QZ Telephone: (0392) 760058	
Please use rubber stamp	

APPOINTMENT	
Is patient totally housebound?	
No ☒	Yes ☐
Clinic ☒	Domiciliary ☐
If patient is not totally housebound (ie can attend doctor, hairdresser or go to shops) then a CLINIC appointment will normally be given unless a specific reason is detailed below:	

DAY CENTRE
If patient attends a day centre, state when & where

MEDICAL HISTORY
Please outline below the patient's medical history or attach computer printout (Specifically: Diabetes, Cardiovascular, CNS, Musculo Skeletal, Respiratory & Dermatological)
19 TN (RE) infected
Diabetic date of onset:

MEDICATION
Please give a list of current medication:
Flucloxacillin 250g x 10/10

RECEIVED 16 JUN 2000

Dear Doctor,
The above patient has/has not been accepted for treatment. Reason:
Signature: M. A. R. Khan
Date: 13/4/00

NHS Confidential: Personal data about a patient

Dr. F. KHAN M.B.B.S., D.(Obst) R.C.O.G.
Dr. M.A.R. KHAN M.B.B.S.

THE HEALTH CENTRE
LOCHGELLY
FIFE KY5 9QZ
☎ (01592) 780358

13 June 2000

Grant Fergusson,
Social Worker,
Social Work Department,
Crossgates House,
32-34 Main Street,
CROSSGATES,
KY4 8AJ.

Dear Mr. Fergusson,

Re: Kay Thomson - D.O.B. 12.07.84

I refer to your letter of the 12th June, 2000.

Products are over the counter available and a patient does not require GP permission to use them. We do not have any objection whatsoever.

Yours sincerely,

Dr. M.A.R. Khan.

NHS Confidential: Personal data about a patient

Fife Primary Care
NHS TRUST

Your Ref:
Our Ref: RS/mis
Enquiries to: Norma Scriven

FAIR ISLE CLINIC
FAIR ISLE ROAD
KIRKCALDY
FIFE
KY2 6EE
TELEPHONE: 01592 641239
FAX: 01592 641239
CHILD MENTAL HEALTH SERVICE

24 April 2000

PRIVATE AND CONFIDENTIAL

Ms Tricia Cunningham
Social Work Offices
173: Starhouse Street
COWDENBEATH
Fife

RECEIVED 26 APR 2000

Dear Ms Cunningham

RE: KAY THOMSON, 29 MONTROSE CRESCENT, LOCHORE KY5 8EA (DOB: 12/07/84)

As six months have now elapsed and we have not had any word of a need for us to be in contact with Kay Thomson, I am closing her file.

Yours sincerely

Norma Sime

Dr Rhona Sime
Consultant Psychiatrist
CHILD & ADOLESCENT PSYCHIATRY

c:c
Dr Khan
The Health Centre
David Street
LOCHGELLY
KY5 9XZ

MS460

POSITIVE ABOUT
DISABLED PEOPLE

Awarded for excellence
to Nutrition and Dietetic Department

NHS Confidential: Personal data about a patient

9,01592784139		From: Adastra		05/01/00 08:18 Pg 03/05	
Call Number:	42485	Time Call Received	17:09		
Date:	04-Jan-2000	Time Passed	17:09		
Urgency:	Routine	Initially advised at	17:09		
Type:	Advice	Patient Seen at	—:—		
Kay Thomson 29 Montrose Crescent Lochore		Own GP:	Khan, F Lochgelly (Drs Khan & Khan)		
		Passed to:	Prentice, Lesley Ann		
Female					
12-Jul-1984 (Age: 15 years)		Origin:	Same Address		
Tel: 01383 515286		L Tel:	-		
Reported Condition with any special notes lodged by the patient's GP: At Crossgates House need permission to give her paracetamol					

Consultation Notes:

At house in Crossgates Needs permission to give paracetamol
Flu symptoms Needs GP permission to give paracetamol - Given

Call outcome was: Advice

Follow-up Action:

follow up message (No Further Action)

Name: Dr Prentice, Lesley Ann

NHS Confidential: Personal data about a patient

Fife Primary Care

NHS TRUST

Your Ref:
Our Ref: RS/mis
Enquiries to: Morna Scriven

FAIR ISLE CLINIC
FAIR ISLE ROAD
KIRKCALDY
FIFE
KY2 6EE

TELEPHONE: 01592 641239
FAX: 01592 641239

CHILD MENTAL HEALTH SERVICE

8 November 1999

PRIVATE AND CONFIDENTIAL

Dr Khan
The Health Centre
David Street
LOCHGELLY
Fife
KY5 9XZ

Dear Dr Khan

RE: KAY THOMSON, 29 MONTROSE CRESCENT, LOCHORE KY5 8EA (DOB: 12/07/84)

Thank you for referring Kay to our service. An appointment was made for her at Fair Isle Clinic today at 9.30 am, but she failed to attend. Her social worker contacted the Clinic mid morning to say Mrs Thomson had been in touch with her to tell her that Kay ran away on Friday and has not returned home yet.

We will keep her file open and will be happy to make another appointment when she eventually returns home.

Yours sincerely



Dr Rhona Sime
Consultant Psychiatrist
CHILD & ADOLESCENT PSYCHIATRY




MS460



Awarded for excellence
to Nutrition and Dietetic Department

NHS Confidential: Personal data about a patient

Fife Primary Care

NHS TRUST

Your Ref:
Our Ref: RS/mls
Enquiries to: Morna Scriven

FAIR ISLE CLINIC
FAIR ISLE ROAD
KIRKCALDY
FIFE
KY2 6EE

TELEPHONE: 01592 641239
FAX: 01592 641239

CHILD MENTAL HEALTH SERVICE

18 October 1999

PRIVATE AND CONFIDENTIAL

Mrs Thomson and Miss Kay Thomson
29 Montrose-Crescent
LOCHORE
Fife
KY5 8EA

Dear Mrs Thomson and Kay

You have been referred to our department by Dr Khan. I write to offer you and all other members of your family an appointment at my out-patient clinic here in Fair Isle Clinic, Kirkcaldy on Monday 8 November 1999 at 9.30 a.m. which I hope will be convenient for you. I enclose a map to help you locate the clinic and also point out that Bus 34 passes by the clinic - the best stop would be opposite Fair Isle Primary School.

Should you be unable to attend this appointment, I would be grateful if you could telephone my secretary on Kirkcaldy 641239 to let me know. Otherwise I look forward to seeing you on 8 November.

Yours sincerely

Morna Sime

Dr Rhona Sime
Consultant Psychiatrist
CHILD & ADOLESCENT PSYCHIATRY

c/c
Dr M A R Khan
The Health Centre
David Street
LOCHGELLY
Fife

2 -
RECEIVED 20 OCT 1999



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to Nutrition and Dietetic Department

NHS Confidential: Personal data about a patient

Hospital use Only	Clinic	Day Date	Time	Hospital No.	GP112B
Ambulance Transport Required No		REQUEST FOR OUT-PATIENT CONSULTATION		Appointment Category Routine ☐ Soon ☐ Urgent ☐ ****	
Hospital	CARNEGIE CLINIC	Date	12-10-99	CHI No.	0 4 8 3
Please arrange for this patient to attend the Patient's Surname THOMSON		ADOLESCENT PSYCHOLOG Clinic of Dr/Mr TAYLOR			
First Names KAY		Maiden Surname			
Address 29 MONTROSE CRESCENT LOCHORE, FIFE		Single/Married/Widowed/Other SINGLE			
Post Code		Date of Birth 12-7-84			
		Patient's Occupation			
		Contact telephone number			
Has the patient attended hospital before?		YES IF "YES" PLEASE STATE			
Name of Hospital VICTORIA		Name, Address & Telephone number of MEDICAL/DENTAL PRACTITIONER			
Year of attendance 1998 Hospital No. V306915		DR M.A.R. KHAN			
If the patient's name and/or address has/have changed since then, please give details		HEALTH CENTRE			
		LOCHGELLY			
Can patient attend at short notice ?		YES NO			
IF YES, minimum notice required		days			
		Please use Rubber Stamp			
		2 1 3 7 0			
I would be grateful for your opinion and advice on the above name patient A brief outline of history, symptoms and signs is given below:					
I would be grateful if you would see this fifteen year old girl and advise.					
Mum came to see me because of her behavioural problem, drug abuse and being involved in a fight. She had history of overdose in March last year. Social workers have been involved. Mum was wondering if something could be done.					
I have had a word with Kay about the problem and she seems quite happy to see a <i>psychiatrist</i> She is not on any medication.					
Yours sincerely,					
Dr. M.A.R. Khan					
Present drug treatment and potential special hazards:					
X-ray (women of childbearing age). Date of first day of LMP					
Relevant X-rays available from:					
No. (If known)					
Signature					

NHS Confidential: Personal data about a patient

Queen Margaret Hospital		ACCIDENT AND EMERGENCY DEPARTMENT Whitefield Road, Dunfermline KY12 0SU	
GP's NAME AND ADDRESS KHAN, Farida LOCHGELLY HEALTH CENTRE DAVID STREET LOCHGELLY KY5 9QZ		PATIENT DATA D.O.B. 12-JUL-84 Unit No. D569709V Surname THOMSON Forename(s) KAY Address 29 MONTROSE CRESCENT LOCHORE Occupation KY5 8EA Religion Phone No. 01592 869165 Consultant Next of Kin MARIA THOMSON 29 MONTROSE CRESCENT LOCHORE Home Phone Work Phone 01592 869165	
Date and Time of Attendance 31/08/99 16:08	Date and Time of Accident 30/08/99 13:00		
TYPE OF INCIDENT RTA: Work: Home: Sport: Other (Specify) ASSAULT / FIGHT			
LOCATION	SOURCE OF REFERRAL GENERAL PRACTIT		
ALLERGIES - Penicillin OTHER (Specify)	ALERT	T P R B.P.	
CURRENT THERAPY - Insulin Betablockers Steroids ATS OTHER (Specify)		INVESTIGATIONS - (Please tick) Bact. Cl. Chem. Haem. Hist. Urin. E.C.G. X-ray	
PROVISIONAL DIAGNOSIS G.P. Ref		TREATMENT - (Please tick) Dressing Bandage/Splint P.O.P. Suture Minor Procedure - Analgesia Antibiotics ATS	
TIME FIRST SEEN BY DOCTOR 16.10 WILSON		Prescription Issued:	
HISTORY/CLINICAL DETAILS This teenager was involved in a fight yesterday and was hit over the left temple with a baseball bat. Since then she has had considerable pain and was having difficulty opening her mouth. There was no evidence that she had lost consciousness and she was not complaining of feeling sick nor dizzy nor any problems with her vision. On examination she had extensive scratch marks to the right side of her chin. There was no great swelling over the left temporal region but she was certainly very tender to palpation. She was able to open her mouth but not fully and this also caused her some discomfort. Facial x-rays were requested and these revealed no fracture. She was discharged with advice re regular analgesia. She had already been prescribed soluble Paracetamol by her G.P. Soft diet. TCA if no improvement by the end of the week. DR. S. WILSON CASUALTY SHO SW/EMCD - 1/9/99 RECEIVED - 3 SEP 1999 Signature <i>SW</i>			
A & E I. MS 137 PLEASE USE BALLPOINT PEN			

NHS Confidential: Personal data about a patient

This teenager was involved in a fight yesterday and was hit over the left temple with a baseball bat. Since then she has had considerable pain and was having difficulty opening her mouth. There was no evidence that she had lost consciousness and she was not complaining of feeling sick nor dizzy nor any problems with her vision.

On examination she had extensive scratch marks to the right side of her chin. There was no great swelling over the left temporal region but she was certainly very tender to palpation. She was able to open her mouth but not fully and this also caused her some discomfort. Facial x-rays were requested and these revealed no fracture. She was discharged with advice to regular analgesia. She had already been prescribed soluble Paracetamol by her G.P. Soft diet. TGA if no improvement by the end of the week.

DR. S. WILSON
CASUALTY SHO
SWEMED - 1/2/99

02 SEP 1999

NHS Confidential: Personal data about a patient



Queen Margaret Hospital
NHS Trust

Whisperfield Road, Dunfermline, Fife, KY12 0SU Tel: 01383 623623

DEPARTMENT OF UROLOGY
MR C A B JOHNSTON - CONSULTANT UROLOGIST & GENERAL SURGEON
MR J MACFARLANE - CONSULTANT UROLOGIST
MR D LYTH - CONSULTANT UROLOGIST Direct Dial:

Dictated: 22.2.1999
Typed: 4.3.1999

Our Ref: D569709V/CABJ/SH

Dr Khan
Health Centre
David Street
Lochgelly

Dear Doctor Khan

Kay Thomson, 29 Montrose Crescent, Lochore
DOB 12.7.1984

This patient failed to come for three outpatient appointments. I think it is probably not worth our following her up any more.

Yours sincerely

C. Johnston

C A B Johnston
Consultant Surgeon

RECEIVED 10 MAR 1999



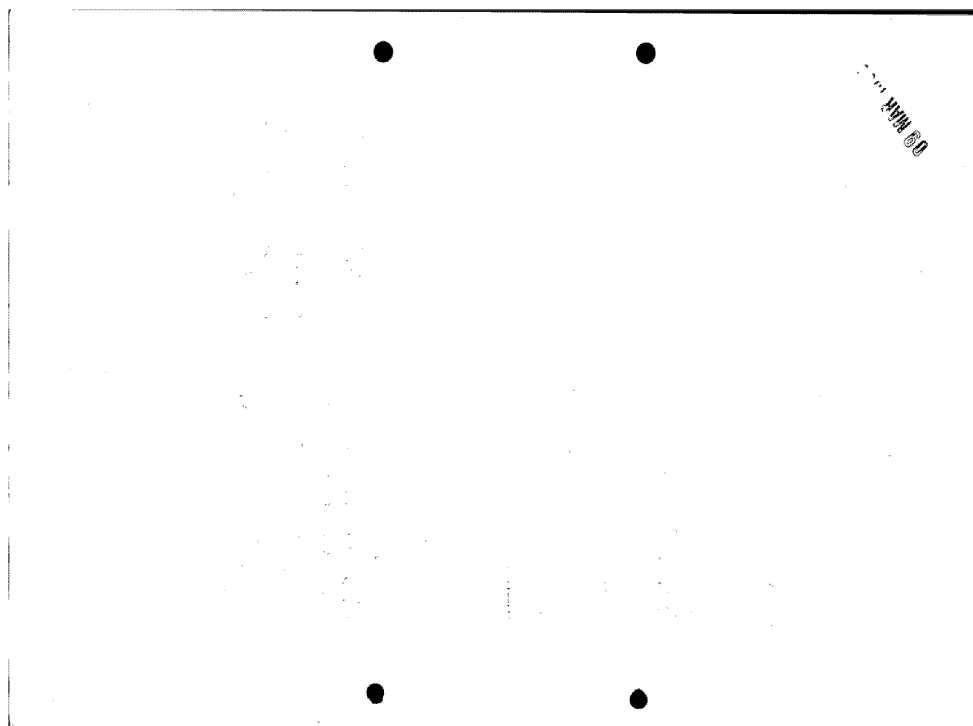
MS1200

Accredited by the King's Fund Organisational Audit



Awarded for excellence

NHS Confidential: Personal data about a patient



NHS Confidential: Personal data about a patient

PAEDIATRIC DEPARTMENT

Dr A.W Blair
 Dr M.G MacMillan
 Dr C.R Steer
 Dr T.M Scott

Dictated: 18.03.98
 Typed: 23.03.98

MS/KP/V.306915

Dr Khan
 The Health Centre
 David Street
 LOCHGELLY

NAME: Kay Thomson D.O.B: 12.07.84

ADDRESS: 29 Montrose Crescent, Lochore

CONSULTANT: Dr AW Blair

ADMITTED: 05.03.98

DISCHARGED: 06.03.98

DIAGNOSIS: Intentional ingestion of Paracetamol and Salicylates
 MEDICATION ON DISCHARGE: None. Appointment given for Psychiatrist.

HISTORY OF PRESENTING COMPLAINT: Kay who was completely well was caught in the bus for smoking and she was afraid that she may be suspended from school for smoking. For fear of this she took Panadol 7-8 tablets and Aspirin as well. Mum and dad were not at home that night she was staying with the granny and brought to hospital for excess intake of Panadol and Aspirin.

PAST MEDICAL HISTORY: Kay is in High School second year and doing fine. Her dad is 41 years who is unemployed and a non smoker. Mother is 39 years old who is working and is a smoker. Kay has a sister 16 years old and one brother and another sister 8 years old who are okay. They live in a house with 4 bedrooms. They have a cat and hamster.

a
 RECEIVED 27 MAR 1998

ve
 Committed to Quality Care

VICTORIA HOSPITAL Hayfield Road, Kirkcaldy, Fife. KY2 5AH

K45MS766



KIRKCALDY
 ACUTE
 HOSPITALS
 NHS TRUST

Tel 01592 643355

Fax 01592 647090

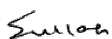


NHS Confidential: Personal data about a patient

ON EXAMINATION: She was looking alert, conscious, temperature, respiratory rate and blood pressure all were stable. Her systemic examination, respiratory, cardiovascular and abdomen were all normal. Abdomen was soft showing some tenderness in the epigastric area and right iliac fossa. Neurological systems were normal.

PROGRESS AND MANAGEMENT: Investigations done showed:- White cell count 7.7, haemoglobin 13.5, platelet 273 and sodium 141, potassium 3.5, bicarbonate 22, urea 2, creatinine 66. Paracetamol level was 459 at 4 hours normal range with less than 1500. Salicylate level was 1.26. The next day she was found stable and was discharged home with consultation with psychiatrist appointment.

Yours sincerely


Dr M Sanullah
PAEDIATRIC SHO

NHS Confidential: Personal data about a patient

Our Ref: PR/SMcK
Enquiries: Dr P Reid
Ext: 250
Fax No.: 01334 657691

fife healthcare
NHS TRUST

STRATHEDEN HOSPITAL
CUPAR
FIFE KY15 5RR

TELEPHONE: 01334 652611
FAX: 01334 656560

06 March 1998

PRIVATE & CONFIDENTIAL

Dr A W Blair
Consultant Paediatrician
Kirkcaldy Acute Hospitals NHS Trust
Victoria Hospital
KIRKCALDY
KY2 5AH

Dear Dr Blair

RE: KAY THOMSON, 29 MONTROSE CRESCENT, LOCHORE KY5 8EA
DATE OF BIRTH: 12.07.84

Thank you for referring this 13 year old girl. I saw Kay and her parents on Friday, 6th March 1998 after Kay was admitted to the Victoria Hospital after taking an overdose of paracetamol.

Identification

This 13 year old lives with her parents and is the second eldest of four. She has an elder sister age 15 and a younger brother 11 and also a younger sister 8. She attends St Columba's High School in Dunfermline and is in her 2nd year.

History of Presenting Complaint

In the last few weeks Kay had been misbehaving at school. She had been caught smoking on the bus and had received a letter home. The following week Kay had been truanting from school with one of her friends, Pauline. She had been caught and received another letter home.

RECEIVED 16 MAR 1998

In/

MS318

FIFE HEALTHCARE IS AN NHS TRUST PROVIDING COMMUNITY AND PRIORITY CARE SERVICES THROUGHOUT FIFE AND ACUTE SERVICES IN NORTH EAST FIFE

NHS Confidential: Personal data about a patient

Dr Blair
RE: KAY THOMSON

- 2 -

06 March 1998

In order to avoid confrontation with the teaching staff at her school, Kay decided to take some tablets which she felt would make her feel sick and she would be able to return home. At no stage did she feel suicidal. She denied a depressed mood, problems with her sleep or appetite. She also denied any family difficulties or difficulties with her school work. This was backed up by her parents. She felt that she had let her parents down and was generally embarrassed by her actions in requiring hospitalisation. She did state, however, that she felt some pressure from teachers at school. This had come about after an incident with a razor whereby she had cut the palm of her hand. One of the teachers had caught her doing this in the toilet block. Kay herself denied any intention to self harm.

Personal History

The parents report a normal birth, normal milestones and a generally happy child. Kay has numerous friends, is above average academically and enjoys basketball. She has been drunk once but denies any illicit drug use. Medically she is well and is on no medication and has no allergies. Mental state examination was largely unremarkable.

Kay was a casually dressed 13 year old girl with good eye contact and co-operative. Her speech was normal, her mood reactive and appropriate. She had no formal thought disorder, delusions, hallucinations and she denied any suicidal ideation. Her insight and rapport were fair. My impression is that this 13 year old girl has taken an impulsive overdose as a response to stresses at school. She is currently pushing the boundaries of school authority and learning from its consequence. She does not have a major depression or psychosis. There does not appear to be any obvious stress at home to account for her behaviour.

Recommendations

Kay should be discharged when medically fit and return to school as soon as possible. At this stage neither Kay or her parents felt that psychiatric follow up would be useful. However they were told that a follow up appointment could be arranged with myself at the Carnegie Clinic.

Yours sincerely



Dr Philip Reid
S.H.O.
CHILD & FAMILY PSYCHIATRY

c:c

NHS Confidential: Personal data about a patient

Dr Blair
RE: KAY THOMSON

- 3 -

06 March 1998

c:c
Dr Khan
The Health Centre
David Street
LOCHGELLY
KY5 9QZ

NHS Confidential: Personal data about a patient

Queen Margaret Hospital NHS Trust		ACCIDENT AND EMERGENCY DEPARTMENT Whitefield Road, Dunfermline KY12 0SU	
GP's NAME AND ADDRESS KHAN, Farida LOCHGELLY HEALTH CENTRE DAVID STREET LOCHGELLY KY5 9QZ		PATIENT DATA D.O.B. 12-JUL-84 Unit No. D569709V Surname THOMSON Forename(s) KAY Address 29 MONTROSE CRESCENT LOCHORE KY5 8EA	
Date and Time of Attendance 05/03/98 15:10	Date and Time of Accident 05/03/98 11:15	Occupation Phone No. 01592 869165	Religion St. Columbus
TYPE OF INCIDENT R.T.A.: Work: Home: Sport: Other (Specify) SELF POISONING		Consultant Next of Kin	MARIA THOMSON 29 MONTROSE CRESCENT LOCHORE
LOCATION	SOURCE OF REFERRAL SCHOOL	Home Phone Work Phone	01592 869165 01592 861829
ALLERGIES - Penicillin OTHER - (Specify)	ALERT	T. P. 93 R. B.P. 145/87	
CURRENT THERAPY - Insulin Betablockers Steroids ATS	OTHER - (Specify)	INVESTIGATIONS - (Please tick) Bact. Cl. Chem. Haem. Hist. Urin. E.C.G. X-ray	
PROVISIONAL DIAGNOSIS taken 7-8 Paracetamol 12 Anadin Extra TIME FIRST SEEN BY DOCTOR		TREATMENT - (Please tick) Dressing Bandage/Splint P.O.P. Suture Minor Procedure - Analgesia Antibiotics ATS Prescription Issued:	
HISTORY/CLINICAL DETAILS Hx - Took 7-8 Paracetamol at approx 11pm this morning followed by 12 Anadin Extra at noon. Did not mean to kill herself. Doesn't know why she took them. P.Hx - nil of note. No previous O/D. Hx - nil regularly NKA O/E - Fully alert, unwell, PERL. - Does not appear low in mood. P90bpm, reg. BP - 145/90, HS - I+II+O. Chest - vesicular bs. nil crackles. Abd - soft, tender, bs - No - Abnormal Charcoal Stg Admit Wed 5.			
A & E I		Signature <i>F. Khan</i> RECEIVED 11 MAR 1998 - Paracetamol - Schlegel Levels taken at 15:00 POC - UTE - SOU -	

MS 137

PLEASE USE BALLPOINT PEN

NHS Confidential: Personal data about a patient



Queen Margaret Hospital NHS Trust

Whitefield Road, Dunfermline, Fife, KY12 0SU Tel: 01383 623623

Our ref: CABJ/KP/D569709 Fax:
Enquiries to: Mrs. S. Stewart
Ext: 3543 Direct Dial:

UROLOGICAL DEPARTMENT CONSULTANTS:

Mr. John MacFarlane
Mr. D. Lyth
Mr. Chris Johnston - General Surgeon/Urologist

15th December 1997

Dr. M.A.R. Khan
Health Centre
David Street
LOCHGELLY

Dear Dr. Khan

KAY THOMSON 29 MONTROSE CRESCENT LOCHORE
D.O.B. 12.07.84

Miss. Thomson came to the clinic today and I think she is gradually improving. I just reminded them that the isotope scan showed a normal function in both kidneys with no obstruction or reflux, so she hasn't got the problem that Lauren has. She still complains of pain in her back or right loin which seems to come with sore throats and goes when the sore throat goes and I suspect it may also be related to stress of some kind or even a sporting injury.

I suggested she carries on in moderation with what she is doing and we will simply review her in another year.

Yours sincerely

C.A.B. Johnston
Consultant in General Surgery/Urology

RECEIVED 18 DEC 1997



MS1200

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Awarded for excellence

NHS Confidential: Personal data about a patient



Queen Margaret Hospital NHS Trust

Whitefield Road, Dunfermline, Fife, KY12 0SU Tel: 01383 623623

UROLOGICAL DEPARTMENT

Fax:

CONSULTANTS:

Direct Dial:

Mr John Macfarlane
Mr Chris Johnston - General Surgeon/Urologist
Mr David Lyth

CABJ/SGS/569709
Enquiries - Ext: 3543

Dictated 28.6.97
Typed 30.6.97

Dr F. Khan,
Health Centre,
David Street,
LOCHGELLY.

Dear Dr Khan,

KAY THOMSON, 12.7.84
29 MONTROSE CRESCENT, LOCHORE.

This patient has now had a renal isotope scan. It shows symmetrical good function in both kidneys with free drainage. There is no evidence of any cortical loss of her kidneys and there was no reflux noted on voiding. I think that suggests that she is rather better than her sister her and you can reassure her. We shall review her in the clinic after an interval.

Yours sincerely,

C. A. B. JOHNSTON,
CONSULTANT SURGEON.

RECEIVED - 4 JUL 1997



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MS1200

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03 JUL 1987

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Queen Margaret Hospital NHS Trust

Whitefield Road, Dunfermline, Fife, KY12 0SU Tel: 01383 623623

UROLOGICAL DEPARTMENT

Fax:

CONSULTANTS:

Direct Dial:

Mr John Macfarlane
Mr Chris Johnston - General Surgeon/Urologist
Mr David Lyth

CABJ/SGS/569709
Enquiries - Ext: 3543

Dictated 14.4.97
Typed 21.4.97

Dr F. Khan,
Health Centre,
David Street,
LOCHGELLY.

Dear Dr Khan,

KAY THOMSON, 12.7.84
29 MONTROSE CRESCENT, LOCHORE.

Kay came to the clinic today with her mother and elder sister. I get the impression from the point of view of her micturition she is probably rather better. She has only had two episodes of enuresis since we saw her. The ultrasound scan showed basically normal kidneys and nothing abnormal on the KUB film but there was possibly a little dilatation of the renal pelvis. I am going to arrange for her to have a renal isotope scan and also to look for reflux. We shall get that result and then I shall see it and possibly send her another appointment but I may arrange an IVU to be done here first.

Yours sincerely,

C. A. B. JOHNSTON,
CONSULTANT SURGEON.

RECEIVED 25 APR 1997

NO



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THE SECRETARY OF THE ARMY
WASHINGTON, D.C.

SUBJECT: [Illegible]

[Illegible text follows]

DATE: APR 24 1987

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Queen Margaret Hospital NHS Trust

Whitefield Road, Dunfermline, Fife, KY12 0SU Tel: 01383 623623

UROLOGICAL DEPARTMENT

Fax:

CONSULTANTS:

Direct Dial:

Mr John Macfarlane
Mr Chris Johnston - General Surgeon/Urologist
Mr David Lyth

CABJ/SGS/569709
Enquiries - Ext: 3543

Dictated 20.3.97
Typed 26.3.97

Dr F. Khan,
Health Centre,
David Street,
LOCHGELLY.

Dear Dr Khan,

KAY THOMSON, 12.7.84
29 MONTROSE CRESCENT, LOCHORE.

Kay Thomson's renal ultrasound showed normal right kidney but they suggested that there was very slight dilatation of the renal pelvis on the left although it was otherwise normal. The bladder seemed to empty well and had a normal outline. There were no radio opaque calculi seen in the renal tract.

Dr MacMillan has told me that she saw this patient up until 1989 and then lost her to follow up but her younger sister has evidently got reflux on the right side. I think we ought to arrange an isotope scan when we see her in the clinic.

Yours sincerely,

C. A. B. JOHNSTON,
CONSULTANT SURGEON.

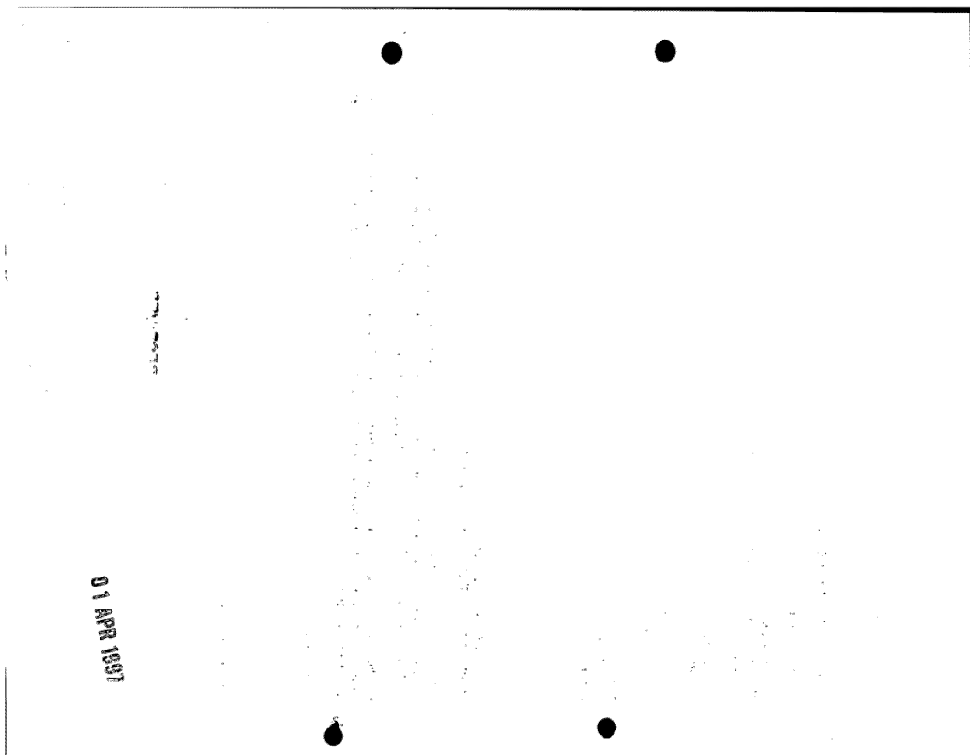
RECEIVED - 2 APR 1997.



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NHS Confidential: Personal data about a patient

**Queen Margaret Hospital
NHS Trust**

Whitefield Road, Dunfermline, Fife, KY12 0SU Tel: 01383 623623

UROLOGICAL DEPARTMENT

Fax: .

CONSULTANTS:

Direct Dial:

Mr John Macfarlane
Mr Chris Johnston - General Surgeon/Urologist
Mr David Lyth

CABJ/SGS/569709
Enquiries - Ext: 3543

Dictated 27.1.97
Typed 4.2.97

Dr F. Khan,
Health Centre,
LOCHGELLY.

RECEIVED - 7 FEB 1997

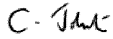
Dear Dr Khan,

**KAY THOMSON, 12.7.84
29 MONTROSE CRESCENT, LOCHORE.**

Thank you for your letter about this patient. She came with her mother and her mother was clearly much more worried about her problem she was not very easy to communicate with and has evidently fought with this problem all her life.

Her mother told me that she had a period of two years when she was trained and was probably dry nearly every night but then she has been enuretic nearly all the time since then and probably is enuretic about three times a week at the moment. You have tried the alarm with her, it wakes the rest of the family but not her. The patient wouldn't tell me anything about her back pain today but eventually pointed to both renal angles while I was examining her. On the other hand examining her abdomen was quite normal. There was no tenderness in either loin and no palpable bladder. She doesn't seem to be having symptoms suggestive of recurrent urinary tract infections but it isn't easy to assess and I didn't think she would tolerate a blood test today or an IVU so I have arranged for her to have an MSU sent and an ultrasound of her renal tract and we shall review her after that. Maybe we will be able to get her confidence up and see if we can investigate her further.

Yours sincerely,


C. A. B. JOHNSTON,
CONSULTANT SURGEON.

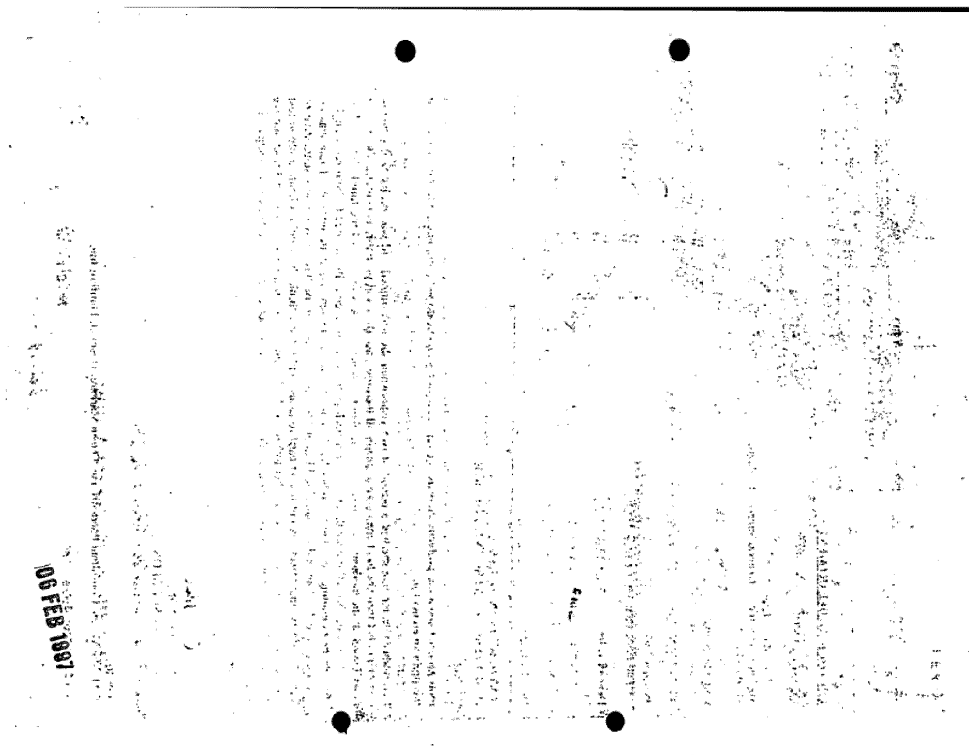
Copy to:
Dr M. MacMillan, Consultant Paediatrician, Queen Margaret Hospital, Dunfermline.



Awarded for excellence

MS1200

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NHS Confidential: Personal data about a patient

Hospital use Only	Clinic	Day Date	Time	Hospital No.	GP112B
Ambulance Transport Required		REQUEST FOR OUT-PATIENT CONSULTATION		Appointment Category	
No				Routine ☒ Soon ☐ Urgent ☐	
Hospital	QUEEN MARGARET	Date	19.11.96	CHI No.	0 4 8 3
Please arrange for this patient to attend the Patient's Surname THOMSON		UROLOGY O.P.D.		Clinic of Dr/Mr	
First Names KAY		Maiden Surname		Single/Married/Widowed/Other CHILD	
Address 29 MONTROSE CRESCENT, LOCHORE.		Date of Birth 12.07.84		Patient's Occupation	
Post Code		Contact telephone number			
Has the patient attended hospital before?		YES IF "YES" PLEASE STATE			
Name of Hospital VICTORIA					
Year of attendance	1989	Hospital No.	V306915	Name, Address & Telephone number of MEDICAL/DENTAL PRACTITIONER	
If the patient's name and/or address has/have changed since then, please give details				DR FARIDA KHAN	
				HEALTH CENTRE	
				LOCHGELLY	
Can patient attend at short notice ? YES				01592 - 780358	
IF YES, minimum notice required		days		Please use Rubber Stamp	
				2 1 3 7 0	
I would be grateful for your opinion and advice on the above name patient					
A brief outline of history, symptoms and signs is given below:					
Dear Doctor,					
I would be most grateful if you would see this young girl. She is 12 years old. She is having problem with bed wetting for a long time. She was issued with an alarm in 1994 without any success. She is constantly having problem of bed wetting at night plus wetting herself during the day time. She is also complaining of back pain and she is tender on both renal angles. Her recent MSU showed no growth. Polymorphs +, Squames ++ only. She is very upset and emotional about the problem. I think she needs urological investigations before any psychological counselling.					
Thank you very much.					
Yours sincerely,					
Dr. F. Khan.					
Present drug treatment and potential special hazards:					
X-ray (women of childbearing age). Date of first day of LMP					
Relevant X-rays available from:		No. (If known)			
Signature					

NHS Confidential: Personal data about a patient



With Compliments From:

Dr. F. Khan.

NHS Confidential: Personal data about a patient

VICTORIA HOSPITAL		PLEASE USE BALL POINT PEN AND BLOCK LETTERS			
Surname <u>THOMSON</u> D. of B. <u>12-7-84</u>		Next of Kin/Relationship: <u>Parents S/A</u>			
First Name <u>KAY</u> Age <u>11</u>		Maiden/Previous Name: _____ Tel. No. <u>861829</u>			
Address <u>107 NAUTIE PARK</u> <u>BALLINGRY KY5 8NL</u>		Date <u>20/8/95</u>	Time of Arrival (24hr clock) <u>20:30</u>	Referred by GP <u>YES/NO</u>	Transport <u>Ambulance</u>
Religion <u>R/C</u> M/F <u>F</u>		Data and Time of Injury: <u>20-8-95</u>			
Occupation <u>FLO JOINER</u> M.S.W. <u>S</u>		Accident ☒ Emergency ☐ Casual ☐			
Have you attended this Hospital before <u>YES/NO</u>		Place of Injury: <u>Work</u> School Home (Indoor) Road Traffic			
DIAGNOSIS:		Other (Specify): _____			
<u>DOG BITE (L) KNEE</u>		Drugs: Penicillin Allergy Insulin Steroids A.T.S.			
T. _____ P. _____ B.P. _____		Head Injury Instructions: _____			
P.O.P. Instructions: _____					
HISTORY/CLINICAL DETAILS:					
FURTHER CORRESPONDENCE IF ANY RE ABOVE TO CONS IN CHARGE A&E DEPT. This 11 year old attended casualty complaining of a dog bite to the left knee. Her tetanus toxoid status was up to date. On examination there were three small puncture wounds around the left knee. There was no neurovascular deficit and a full range of movement. The impression was of a dog bite to the left knee. It was dressed and she was allowed home. Dr P Goodfellow Casualty SHO 22.8.95/ID					
SITE X-RAYED:					
X-RAY FINDINGS:					
TREATMENT:					
<u>Antib</u> <u>Dress</u>					
Signature <u>M</u>					
Name and Address of Family Doctor:					
<u>DR KHAW</u> <u>H/C</u> <u>L/GERRY</u>					
Tetanus Vaccination					
1st		Covered 2nd		Booster	
To: G.P.		Discharged			
OP Clinic					
Ward No.					
Other Hospital					
PROPERTY (P.N.) JAN 96					

RECEIVED 25 AUG 1995

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Nocturnal Enuresis Alarm Service

Dear Dr Khan

Re: Kay Thomson.

DOB: 12.7.84

School: St Kenneth's

Your patient was seen by me for review at the Enuresis Clinic on

He / she has been successful / unsuccessful.

will review
in 6/12,

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Brewin'.

Dr
Clinical Medical Officer (Child Health)

10 FEB 2005

cc School Doctor

cc Co-Ordinator, Nocturnal Enuresis Alarm Service

FIFE HEALTHCARE IS AN NHS TRUST PROVIDING COMMUNITY AND PRIORITY CARE SERVICES
THROUGHOUT FIFE AND ACUTE SERVICES IN NORTH EAST FIFE

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fife healthcare

COWDENBEATH HEALTH CENTRE
BROAD STREET COWDENBEATH
TELEPHONE 511111Nocturnal Enuresis Service
Clinic Address

24.6.94

Dear Dr

Khan
Re: Kay Thomson
Dob: 12.7.84
School:

Your patient was seen by me at the Enuresis Clinic.

He/she was issued with an alarm and is due to be seen
again for review on 22.7.94.

Yours sincerely

R.ewain

Dr
Clinical Medical Officer (Child Health)

JUL 1994

cc School Doctor
cc Clinical Manager

AN

FIFE HEALTHCARE IS A DIRECTLY MANAGED UNIT OF THE FIFE HEALTH BOARD PROVIDING COMMUNITY AND PRIORITY CARE
SERVICES THROUGHOUT FIFE AND ACUTE SERVICES IN NORTH EAST FIFE

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FIFE HEALTH BOARD

Victoria Hospital

HAYFIELD ROAD
KIRKCALDY, FIFE
KY2 5AH

Telephone: Kirkcaldy 261155

PAEDIATRIC DEPARTMENT

SA/HM/V.306915

12 May 1989

Dr Khan
Melgund Place Clinic
LOCHGELLY

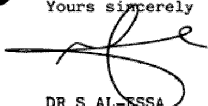
Dear Dr Khan

Re - Kay Thomson, 76 Garry Park, Glencraig. D.O.B. 12.07.84

This child with night wetting was reviewed in the clinic on 9.5.89. She is still wetting herself at night although recently she has been dry for three consecutive nights. She was toilet trained at the age of two years and she was dry but her condition started when her sister started school. The star chart was not successful and we have tried different kinds of regimes including lifting her at night without any success. Mother is convinced that it is psychological and she is coping well with the bed wetting.

I have arranged for her to be reviewed again in three months time to assess the situation again.

Yours sincerely


DR S AL-ESSA
Registrar

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xx xxxxxxxxxxxx VICTORIA 23/3/89 NO xxx
 Paediatric OPD

 THOMSON
 KAY
 76 Garry Park
 Glencraig, Fife 12/7/84

 Victoria
 1988 V306915

Dear Doctor,

Mum was unable to keep follow-up appointment with Kay due to unavoidable circumstances.

I would be grateful if you would send her another appointment.

Yours sincerely,

Dr. M.A.R. Khan.

NHS Confidential: Personal data about a patient

FIFE HEALTH BOARD

Victoria Hospital

HAYFIELD ROAD
KIRKCALDY, FIFE
KY2 5AH

Telephone: Kirkcaldy 261155

PAEDIATRIC DEPARTMENT

PDM/HM/V.306915

15 November 1988

Dr Khan
Melgund Place Clinic
LOCHGELLY

Dear Dr Khan

Re - Kay Thomson, 76 Garry Park, Glencraig. D.O.B. 12.07.84

Thank you for referring Kay whom I examined at Dr MacMillan's Clinic on 15.11.88. She has been suffering from diurnal and nocturnal enuresis for the past year. She was toilet trained at the age of two and she came off night nappies just over the age of two. She was dry for a period of six months following which she started to wet the bed. This was in September 1987 and about the same time she also started to wet herself during the day time. The only thing that happened around that time was that her elder sister started attending school. Kay was quite close to her sister. Since that time there has been periods of dryness lasting for two weeks at the most. Mother has to change her pants at least 2-3 times per day. She is soaking wet at night time. She gets lifted at 10.00 to pass urine. She is usually dry at that time. Her bowels have been regular and there is no evidence of soiling. She has a good appetite.

Past medical history shows nothing significant. She was born by spontaneous vertex delivery at term at Forth Park Hospital. Birth weight was 7lb 30z. There were no neonatal problems. Her early developmental milestones were normal. She is at nursery and gets along fine at school. She has no known allergies and is not on any medications at the moment. She is one of three children to her parents. Her six year old older sister is an asthmatic. She has a one year nine month younger brother who is healthy. They have a dog at home. The family stays in a two bedroomed semi-detached house with coal fire.

On/

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On examination her height and weight were on the 50th centile. Blood pressure was 105/60. I thought I could hear a faint cardiac murmur. Lungs and abdomen did not show any abnormality. Knee and ankle joints were normally elicited. Plantars were downgoing. Spine was normal.

I have arranged for a urine culture to be done and also for an ultrasound scan of the abdomen. I have asked her mother to keep a star chart and also interest on regular toilettings.

She will be reviewed here in three months.

Yours sincerely


DR P D MOSES
Paediatric Registrar

Urine culture: No sig. growth

NHS Confidential: Personal data about a patient

xxx xxxxxxxxxx Victoria 20/10/88 NO xxx
Paediatric
Thomson
Kay xxxxxxxxxxxxxxxx
76 Garry Park 12/7/84
Glencraig
xxx

Dear Doctor,

Kay has been wetting her pants during the day and bed wetting through the night since she came off nappies. She opens her bowels regularly. Her general health is good.

I would be grateful if you would see her and give your advice please.

Yours sincerely,

Dr M.A.R. Khan.

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FIFE HEALTH BOARD		Chiropody Service	
Office Use Only	Date Received <u>19/4</u>	Chiropodist <u>THOMSON (PAGOS)</u>	Clinic <u>C/Boat</u>
	Assessment Date	GP No	Domiciliary
	Treatment Date		Ineligible

(Please complete in BLOCK CAPITALS using a separate sheet for each patient)

REQUEST FOR CHIROPODY TREATMENT	
Applicant's Name <u>KAY THOMSON</u>	Name, Address & Telephone Number of MEDICAL PRACTITIONER
Address <u>29 MONTRIE CRICHT</u>	
<u>LOCHORE</u>	
Post Code <u>KY10 9EA</u>	
Date of Birth <u>12.07.84</u> Male ☐ Female ☒	DR. M. A. R. KHAN MBBS THE HEALTH CENTRE LOCHCELLY FIFE KY6 9QZ Tel: (0332) 760050
CHI No <u>10483</u>	Please use rubber stamp
Hospital Index No	

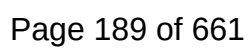
APPOINTMENT	
Is patient totally housebound?	
No ☒	Yes ☐
Clinic ☒	Domiciliary ☐
If patient is not totally housebound (ie can attend doctor, hairdresser or go to shops) then a CLINIC appointment will normally be given unless a specific reason is detailed below:	

DAY CENTRE
If patient attends a day centre, state when & where

MEDICAL HISTORY
Please outline below the patient's medical history or attach computer printout (Specifically: Diabetes, Cardiovascular, CNS, Musculo Skeletal, Respiratory & Dermatological)
<u>1974 (RA) infected</u>
Diabetic date of onset:

MEDICATION
Please give a list of current medication:
<u>Flucloxacillin 250g + 1000</u>

Dear Doctor,
The above patient has/has not been accepted for treatment. Reason: <u>DM</u>
Signature: <u>[Signature]</u> Date: <u>15/4/05</u>



RECEIVED 12 JUL 1968

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16-July-2026 SJJS
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Pages:

LOCHGELLY MEDICAL PRACTICE

Susan Cattanach, M.B. Ch., Mauricio Martins Da Silva M.B. Ch.B., Kenneth Thompson, M.B. Ch.B.

**HEALTH CENTRE
DAVID STREET
LOCHGELLY
FIFE KY5 9QZ**

**Phone (01592) 780277
Fax (01592) 784044**

15/07/2009

Miss Kay Thomson
3 Baird Court
LOCHGELLY
Fife
KY59NB

Dear Miss Thomson

I would be grateful if you could make a routine appointment with the Practice Nurse for the middle of August to have a further Hep B vaccination. Please call at the surgery and collect the prescription for this. This is in response to your attendance at Accident and Emergency on the 12th July.

Please telephone 01592 780277 to make a routine appointment.

Yours sincerely

Lochgelly Medical Practice

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16-July-2026 SJJS
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28-MAY-2008 16:38 FROM: DR R A L LOW

1419429183

TD: 01592784044

P.1

Dr Robert A. L. Low SBS(J), TD, FRCS (G), FRCOG

Consultant Gynaecologist

Consulting Rooms

The Glasgow Nuffield Hospital
25 Beaconsfield Road
Glasgow
G12 0PJ
Tel: 0141 334 9441
Fax: 0141 330 1352

Residence

9 Chapelton Gardens
Beaconsden
Glasgow
G81 2DH
Tel & Fax: 0141 942 8103
Email: robertandelleenlow@talktalk.net

28/05/2008

PRIVATE & CONFIDENTIAL

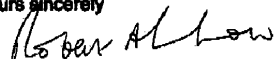
Dr Kenneth Thomson
Lochgelly Health Centre
Main Street
Lochgelly
Fife

Dear Dr Thomson,

Ms Kay Thomson DOB 12/07/1984
3 Baird Court Lochgelly Fife KY5 9NB

Your patient attended for assisted conception therapy at the Glasgow Nuffield Hospital as arranged on 26/05/2008. I was able to aspirate 24 oocytes of which 20 were suitable for ICSI and eleven fertilised and it is expected that two will be replaced on 28th and any suitable remaining ones frozen for future use if necessary. I will keep you informed as to her progress and trust that this is in order.

Yours sincerely

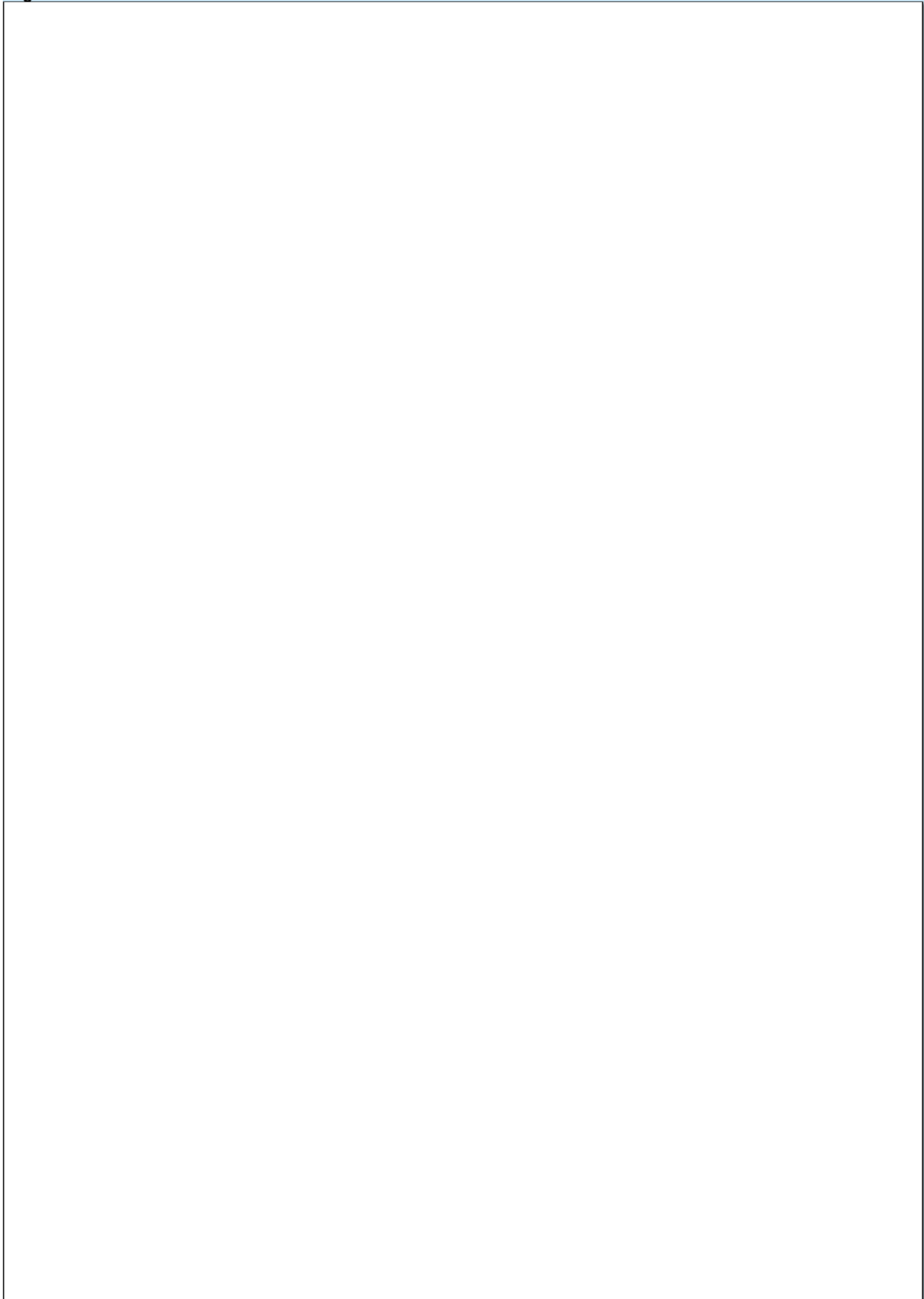


Robert A L Low
Consultant Gynaecologist
GMC No 0466787

Copy to: Assisted Conception Unit, Glasgow Nuffield Hospital

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16-July-2026 SJJS
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Pages:

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Dept of MEDICAL MICROBIOLOGY and INFECTION CONTROL

FIFE AREA LABORATORY KIRKCALDY - SEROLOGY - Direct Tel: 01592 648090

Surname : THOMSON D.o.B. :12 Jul 1984 Sex : F
Forename : Kay Case No :1207840483 CHI No :1207840483
Address : 3 BAIRD COURT LOCHGELLY
Post Code : KY5 9NB

Report to : Dr K THOMPSON Origin:Lochgelly Health Centre
: Lochgelly Health Centre
: David Street

Clin. Det.: EGG DONATION

:

Lab Number: S1264659B Specimen:Venous blood Date taken: 26 Mar 2008
Time taken:

Rubella IgG antibodies.....: POSITIVE

Received : 26 Mar 2008 Reported : 29 Mar 2008 Auth :

Extension: .tif

Pages:

FIELD AREA LABORATORY, HAMEL ROAD KIRKCALDY KY2 9AG TEL 26755				MICROBIOLOGY Request only		Laboratory use only	
Surname: THOMSON		Forename: KAY		D.O.B.: 12/7/84		Sex: F	
Hospital: _____		Ward: _____		Consultant/U.G.P.: KHAN			
Patient's Address: 16 GARRY PARK CUNNINGHAM							
Doctor's Address: MURDOCH PINE CUNNINGHAM Tel. No. 780358							
Date: 28/8/87		Time: 9.30 am		(a) New Case		Delete	
				(b) Follow-up		(a) or (b)	
PLEASE USE A BALL POINT PEN							
CULTURE ✓=Result FILM				FILM URINE			
No growth				Pus cells.....			
No significant growth				Red cells.....			
Copious mixed organisms.....				Casts			
Commensal organisms.....							
No pathogens.....							
Mixed flora.....							
Bacteriologist: UN M.O.'s. Signature M. ADY							
RELEVANT CLINICAL DETAILS (inc. recent chemotherapy) MSU							
Nature of Specimen: MSU				Examinations Requested: C & S PLANT			
Abbreviations Overleaf							

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KEY TO TERMS USED IN SENSITIVITY REPORTS

AL=Azlocillin
AM=Ampicillin
AUG=Augmentin
AX=Amoxycillin
C=Chloramphenicol
CD=Cephadrine
CF=Carfecillin
CFS=Cefsulodin
CM=Clindamycin
CP=Cephalexidine
CT=Cefotaxime
CX=Cephalexin
CKM=Cefuroxime
CXT=Cefoxitin
CY=Cycloserine

Antibiotic Abbreviations

E=Erythromycin
FC=Flucloxacillin
FU=Fusidic acid
G=Gentamicin
M=Methicillin
MC=Mecillinam
ML=Meclozillin
MZ=Metronidazole
N=Novobiocin
NA=Nalidixic acid
NE=Neomycin
NF=Nitrofurantoin
NT=Netilmicin

P=Penicillin
PRL=Piperacillin
PY=Polymyxin
RF=Rifampicin
S=Streptomycin
SU=Sulphonamide
T=Tetracycline
TM=Trimethoprim
TO=Tobramycin
UT=Ulicillin
Syn=Synergism
Prefix U=Urinary Concentrations
Prefix Top=Topical Concentrations

Sensitivity Abbreviations

S=Sensitive
RR=Relatively Resistant
R=Resistant
RV=Resistant Variants

NORMAL VALUES - A.S.O. titres 5m.-5yr = 150 units ; 6-59=250, 60 or over, 200 ; Paul Bunnell <1/28 ;
Ra Latex <1/80 ; Rose Waaler <32

Urine Pus Cells-

++ or +++ = Significant inflammation
+ = doubtful significance

PHAGE-TYPE REPORTS -

R.T.D.-Routine test dilution ; w=weak reaction ; vw=very weak ;
+ = additional minor reactions

OTHER ABBREVIATIONS-

A.A.F.B.-Acid-alcohol-fast bacilli ;
R.P.C.F.T.-Reiter protein complement-fixation test ;
V.D.R.L.-Venereal Disease Research Laboratory ;
F.T.A.-Fluorescent treponemal antibody.
T.P.H.A.-Treponema pallidum haemagglutination.
W.R.-Wassermann reaction.



Page 199 of 661

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x 8

NHS Confidential: Personal data about a patient

KEY TO ABBREVIATIONS USED IN REPORTS

Antibiotic Abbreviations

AL= Azlocillin	CX=Cephalexin	NF=Nitrofurantoin
AM=Ampicillin	CXM=Cefuroxime	NT=Netilmicin
AUG=Augmentin	E=Erythromycin	P=Penicillin
AX=Amoxycillin	FC=Flucloxacillin	PRL=Piperacillin
C=Chloramphenicol	FU=Fusidic Acid	PY=Polymyxin
CF=Carfencillin	G=Gentamicin	RF=Rifampicin
CFS=Cefsulodin	MZ=Metronidazole	SU=Sulphonamide
CM=Clindamycin	NA=Nalidixic Acid	T=Tetracycline
CT=Cefotaxime	NE=Neomycin	TM=Trimethoprim
		VA=Vancomycin

Sensitivity Abbreviations

S=Sensitive
R=Resistant

NORMAL VALUES

ASO titres 5m-5yr = 150 units; 6-59 = 250, 60 or over, 200
RA Latex <60; Rose Waaler <32

URINE PUS CELLS

++ or +++ = Significant inflammation
+ = doubtful significance

OTHER ABBREVIATIONS

AFB = Acid-fast bacilli
VDRL = Venereal Disease Research Laboratory
FTA = Fluorescent treponemal antibody
TPHA = Treponema pallidum haemagglutination

NHS Confidential: Personal data about a patient

FIFE AREA LABORATORY		
Patient Name: THOMSON	KAY	D.o.B. :12/07/1984 Sex:
Home Address: 76 GARRY PL		Case No.CG012177
Consultant/GP : Dr. M.A.R. Khan		
Address :Lochgelly Health Centre.		
----- CULTURE -----		
: No growth		
		
MICROBIOLOGY	* Specimen :- Mid Stream Urine	Lab. No.:- 3016
REPORT	* Collected : 09/10/90 Received : 09/10/90	Issued : 10/10/

██████████

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90

NHS Confidential: Personal data about a patient

FIFE AREA LABORATORY		MICROBIOLOGY REPORT	
Name: THOMSON	KAY	D.o.B 12/07/84	Sex I
Address	107 NAVITIE PK BALLINGRY	Case No CG05930	
Sender : Dr. M.A.R. Khan	Lochore Surgery		
Report to: The Surgery, Lochore			
Clinical details PEN V			
Commensal organisms			
RECEIVED 21 FEB 1996			
Copy to:			
Lab No 07813G	Specimen Throat Swab	Authorised by	
Collected 16/02/96	Received 16/02/96	Issued 20/02/96 12:11	

NHS Confidential: Personal data about a patient

SURNAME THOMSON		D.O.B. 12 07 1986	
FORENAME RAY	MAIDEN NAME	HOSP No.	
ADDRESS 3 Camerhynch Court Dunfermline W54 KY2 8AU P8026		CLINICAL DETAILS (Incl. Previous Reports) 1st Smear. no cond. seen	
SENDER CARNEGIE CLINIC Inglis Street, Dunfermline		SMEAR: CERVIX / VAGINA	
G.P. Dr. [Signature]		CLINICAL OPINION	
SIGNATURE [Signature]		SOURCE CODE 4048	
		☒ INTACT ☐ ECTOPY ☐ INFECTED	
		☐ POLYP ☐ SUSPICIOUS ☐ MALIGNANT	
☒ UNSATISFACTORY ☒ NEGATIVE ☐ BORDERLINE CHANGES ☐ MILD DYSKARYOSIS SUGGESTIVE OF CIN 1 ☐ MODERATE DYSKARYOSIS SUGGESTIVE OF CIN 2 ☐ SEVERE DYSKARYOSIS SUGGESTIVE OF CIN 3 ☐ SEVERE DYSKARYOSIS / INVASIVE ☐ GLANDULAR ABNORMALITY ☐ ADENOCARCINOMA ☐ OTHER ABNORMALITY (See Report)		☐ INFLAMMATORY ☐ TRICHOMONADS ☐ MONILIA ☐ HPV ☐ HERPES VIRUS ☐ OTHERS (See Report)	
		CELLULARITY ☒ GOOD ☐ MODERATE ☐ POOR T Z CELLS ☒ PRESENT ☐ ABSENT	
		☐ RD ☒ RE ☐ RE ☐ CC ☐ GY ☐ OT ☐ NC	
		CYTOLOGY REPORT RECEIVED 4 OCT 2006 SIGNATURE [Signature]	

LAB. NO. 022013	
CHI. 0433	DATE SMEAR TAKEN 25 07 13
LMP 17 07 13	
CYCLE 28	
PARITY 0	
RADIOTHERAPY ☐	
CHEMOTHERAPY ☐	
PILL / COIL / HRT (SPECIFY) Mirena	
DATE RECEIVED	
US OF NCY	

UTINE RECALL

PEAT IN 36 (MONTHS)

PEAT AT FOLLOW UP

ILPOSCOPY

NAECOLOGY

HER (See Report)

) FURTHER RECALL

DATE

26/9/06

MS1418

NHS Confidential: Personal data about a patient

Fife Area Laboratory

Tel: 01592 643355

MICROBIOLOGY

General Bacteriology

Enq

Surname : THOMSON

D.o.B. : 12 Jul 1984 Sex

Forename : Kay

Case No : V306915B

Address : 107 NAVITIE PK

BALLINGRY

Post code :

Sender : Dr M.A.R. KHAN

Hosp/Surg : Lochgelly Health Centre

Clin. det.:

:

:

Lab Number: M029212X

Specimen: Mid stream urine

Date take:

Urine Culture

1) No significant growth

Polymorphs.....: +
R.B.C's.....: None seen
Bacteria.....: None seen
Squames.....: ++
Casts-----: None seen

n
RECI

M

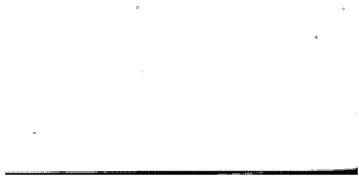
quiries: Ext 3141

: F

n: 30 Oct 1996

REIVED - 1 NOV 1996

Received : 30 Oct 1996 Reported : 31 Oct 1996 Auth :



NHS Confidential: Personal data about a patient

Fife Area Laboratory**HAEMATOLOGY**

Surname : THOMSON D.o.B : 12 Jul 19
Forename : Kay Case No :
Address : 29 MONTROSE CRESCENT
: LOCHORE Post

Sender : Dr F. KHAN
Hosp/Surg : Lochgelly Health Centre

Clin. det.: MISSED PILL ? Pregnant
: ? Pregnant
:

Pregnancy Test Negative

02
RECEIVED 19 JUN 20

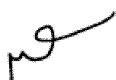
18 Jun 2001

984 Sex : F

st code : KY5 8EA

cive

01



Lab no:H400930S Date of Report:18 Jun 2001
Date and time of analysis:18 Jun 2001 16:09

Validated by:GL

NHS Confidential: Personal data about a patient

Fife Area Laboratory**HAEMATOLOGY**

Surname : THOMSON D.o.B : 12 Jul 19
Forename : Kay Case No :
Address : 29 MONTROSE CRESCENT
: LOCHORE Pos

Sender : Dr M.A.R. KHAN
Hosp/Surg : Lochgelly Health Centre

Clin. det.: LMP JULY 2000
:
:

Pregnancy Test Negat

RECEIVED - 1 SEP 2000

31 Aug 2000

84 Sex : F

st code : KY5 8EA

ive

no

Lab no:H0999671 . Date of Report:31 Aug 2000 V
Date and time of analysis:31 Aug 2000 15:19

Validated by:GW3

NHS Confidential: Personal data about a patient

Fife Area Laboratory**HAEMATOLOGY**

Surname : THOMSON D.o.B : 12 Jul 19
Forename : Kay Case No :
Address : 29 MONTROSE CRESCENT
 : LOCHORE Pos

Sender : Dr M.A.R. KHAN
Hosp/Surg : Lochgelly Health Centre

Clin. det.: Amenorrhoea
:
:

Pregnancy Test Negat

28 Oct 1999

984 Sex : F

st code : KY5 8EA

ive

RECEIVED

Lab no: **H0861029** Date of Report: 28 Oct 1999 ✓
Date and time of analysis: 28 Oct 1999 15:36

ED 29 OCT 1999

Validated by:KHH

NHS Confidential: Personal data about a patient

Dept of MEDICAL MICROBIOLOGY and INFECTION C

FIFE AREA LABORATORY, HAYFIELD RD, KIRKCALDY Direct Tel:01592

Surname : THOMSON D.o.B. :12 Jul 1984 Sex
Forename : Kay Case No:V306915B
Address : 16 BURGH COURT LOCHGELLY
Post Code :

Report to : Dr F. KHAN Origin:Lochgelly Hea
: Lochgelly Health Centre
: David Street

Clin. det.: BACK PAIN
:
:

Lab Number: M633651W Specimen:Mid stream urine Date take

Urine Culture
No growth.

RECEIVED 21 OCT 2001

CONTROL

648090

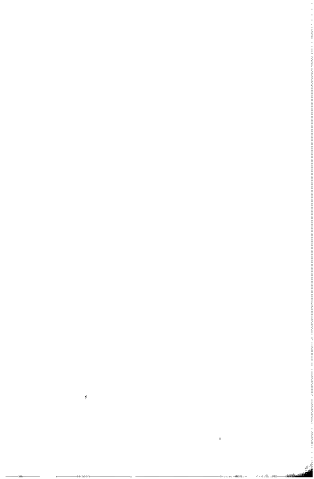
: F

1th Centre

n: 16 Oct 2001

Copy to :

Received : 16 Oct 2001 Reported : 17 Oct 2001 Auth :



NHS Confidential: Personal data about a patient

Fife Area Laboratory**MICROBIOLOGY**

Tel: 01592 643355

General Bacteriology

Enq

Surname : THOMSON

D.O.B. : 12 Jul 1984 Sex

Forename : Kay

Case No : V306915B

Address : 29 MONTROSE CRESCENT

LOCHORE

Post code : KY5 8EA

Report to : Dr M.A.R. KHAN

Origin: Lochgelly Hea

: Lochgelly Health Centre

:

Clin. det.: UTI RX AMOX

:

Lab Number: M320192G

Specimen: Mid stream urine

Date taken

Urine Culture

1) >100,000 cfu/ml of Coliform

Urine Sens

Amox/Ampic

Co-amoxycl

Cefuroxime

Ciproflox

Nitrofurant

Trimethopr

m

4.

Rept taken 1/12

RECEIVED

airies: Ext 3141

: F

lth Centre

n: 26 Oct 1998

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illlin R
av S
S
cin S
toin S
im S

VED 28 OCT 1998

Received : 26 Oct 1998 Reported : 27 Oct 1998 Auth : ASW



NHS Confidential: Personal data about a patient

Fife Area Laboratory**MICROBIOLOGY**

Tel: 01592 643355

General Bacteriology

Enq

Surname : THOMSON

D.o.B. : 12 Jul 1984

Sex

Forename : Kay

Case No : V306915B

Address : 29 MONTROSE CRESCENT

LOCHORE

Post code : KY5 8EA

Sender : Dr M.A.R. KHAN

Hosp/Surg : Lochgelly Health Centre

Clin. det.: RX PENICILLIN

Lab Number: M153153N

Specimen: Throat swab

Date taken

Culture.

1) Commensal organisms

RECEIVED 15 DEC 1997

quiries: Ext 3141

: F

n: 10 Dec 1997

Received : 10 Dec 1997 Reported : 12 Dec 1997 Auth :

W-

NHS Confidential: Personal data about a patient

Fife Area Laboratory**MICROBIOLOGY**

Tel: 01592 643355

General Bacteriology

Enq

Surname : THOMSON

D.o.B. : 12 Jul 1984 Sex

Forename : Kay

Case No : D569709V

Address : 29 MONTROSE CRESCENT

LOCHORE

Post code : KY5 8EA

Sender : Dr M.A.R. KHAN

Hosp/Surg : Lochgelly Health Centre

Clin. det.: ENURESIS

Lab Number: M044382P

Specimen: Mid stream urine

Date take:

Urine Culture

1) No significant growth

RECEIVED 29 JAN 1997

quiries: Ext 3141

: F

n: 27 Jan 1997

Received : 27 Jan 1997 Reported : 28 Jan 1997 Auth :



NHS Confidential: Personal data about a patient

Fife Area Laboratory**MICROBIOLOGY**

Tel: 01592 643355

General Bacteriology

Enq

Surname : THOMSON

D.O.B. : 12 Jul 1984 Sex

Forename : Kay

Case No : V306915B

Address : 107 NAVITIE PK

BALLINGRY

Post code :

Sender : Dr M.A.R. KHAN

Hosp/Surg : Lochgelly Health Centre

Clin. det.:

Lab Number: M036987N

Specimen: Mid stream urine

Date take:

Urine Culture

1) No significant growth

~
RECEIVED 16 DEC 1996
w

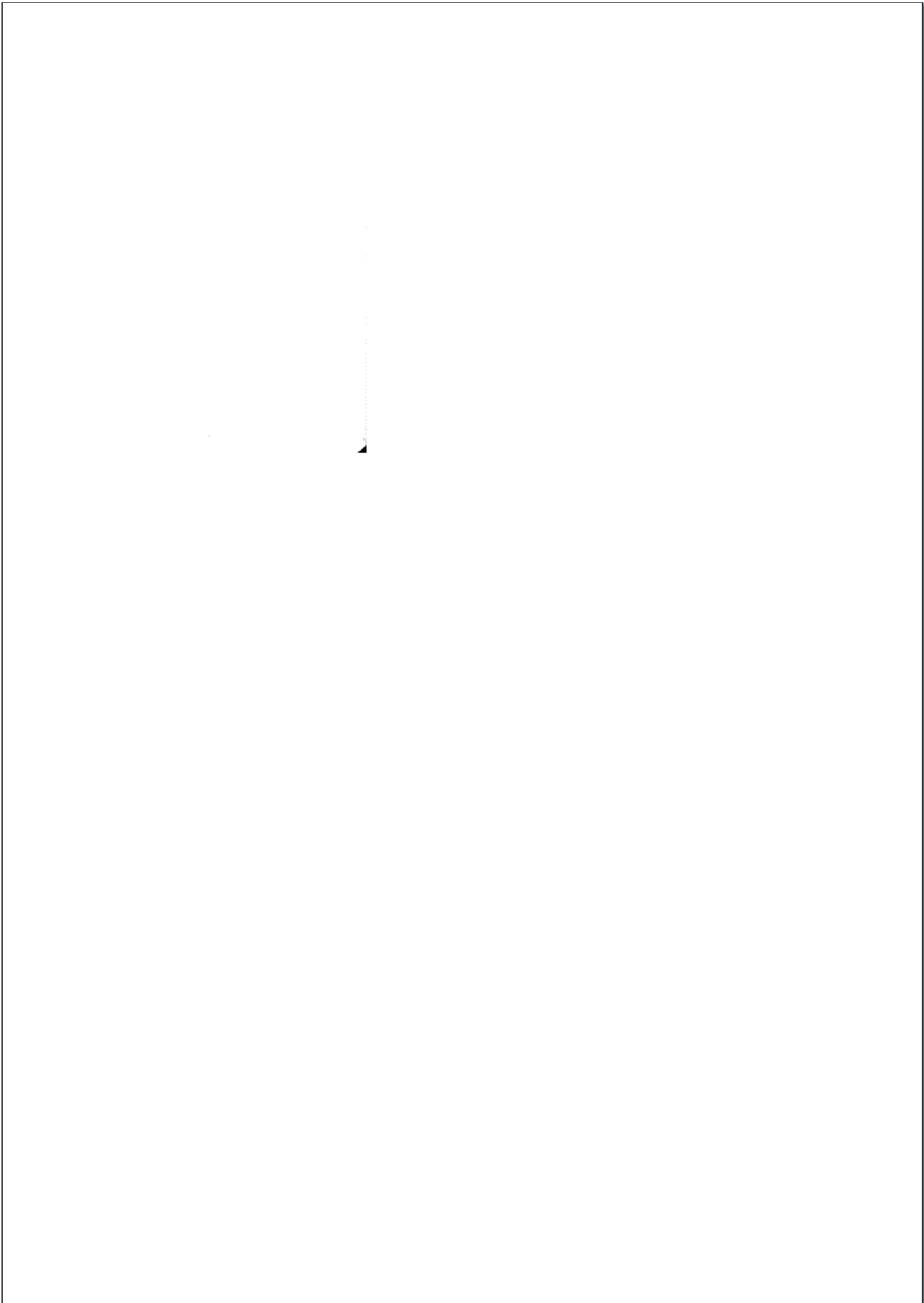
quiries: Ext 3141

: F

n: 12 Dec 1996

2

Received : 12 Dec 1996 Reported : 13 Dec 1996 Auth :



NHS Confidential: Personal data about a patient

Fife Area Laboratory**HAEMATOLOGY**

Surname : THOMSON D.o.B : 12 Jul 19
Forename : Kay Case No :
Address : 16 BURGH COURT
 : LOCHGELLY Pos

Sender : Dr F. KHAN
Hosp/Surg : Lochgelly Health Centre

Clin. det.: LMP SEPT 01
:
:

Pregnancy Test Negat

and Neg.
[Signature]
DECEMBER

02 Nov 2001

984 Sex : F

st code :

ive

Alvin K. H.

V //

RECEIVED

R

Lab no:H534862T Date of Report:02 Nov 2001 1
Date and time of analysis:02 Nov 2001 15:48

E11

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Validated by:PM

NHS Confidential: Personal data about a patient

Fife Area Laboratory**HAEMATOLOGY**

Surname	: THOMSON	D.O.B	: 12 Jul 19
Forename	: Kay	Case No	:
Address	: 16 BURGH COURT		
	: LOCHGELLY		Pos

Sender	: Dr F. KHAN
Hosp/Surg	: Lochgelly Health Centre

Clin. det.:	LMP 5/52 AGO
-------------	--------------

Pregnancy Test Negat

Ask new
for rot 163

19 Oct 2001

184 Sex : F

st code :

ive

50/10


REC

Lab no: **H520901R** Date of Report: 19 Oct 2001
Date and time of analysis: 19 Oct 2001 15:21

/alidated by:GW3

NHS Confidential: Personal data about a patient

Fife Area Laboratory**HAEMATOTOLOGY**

Surname : THOMSON D.O.B : 12 Jul 19
 Forename : Kay Case No :
 Address : 80 LOCHLEVEN ROAD X 29 Montrose crs' Pos
 : LOCHORE Lochore
 Sender : Dr F. KHAN KYS 854
 Hosp/Surg : Lochgelly Health Centre
 Clin. det.: LMP 3 MONTHS AGO Plea note 77
 :
 :

20.12.02 Just
 STOP clinic
 (Tues day)
 31.12.02 with Full Blood
 Colours 1.45

Pregnancy Test Posit

19.12.02
 on phone
 Refer to
 Gyn to mums
 a'm
 Mrs Kha

18 Dec 2002

984 Sex : F

st code :

add. v. 103

12 Clm
F. 102.

pu
de

ive

2)

FW TOP.

REC

Lab no: H245114J Date of Report: 19 Dec 2002
Date and time of analysis: 18 Dec 2002 16:45

FILED 1 8 DEC 2002

Validated by:HEEB

NHS Confidential: Personal data about a patient

Fife Area Laboratory**HAEMATOLOGY**

Surname : THOMSON D.o.B : 12 Jul 19
 Forename : Kay Case No : 120784046
 Address : 13 PARK STREET
 : LOCHORE Pos

Sender : Dr F. KHAN
 Hosp/Surg : Lochgelly Health Centre
 : David Street

Clin. det.: Post natal
 :

Labno.	H1211246H	H1105983T	H1076712W	H272386D	H03
Date	30/10/03	25/07/03	27/06/03	20/01/03	05/
WBC	4.7	9.9	9.6	7.2	
RBC	4.01	3.67L	3.32L	3.65L	
HGB	12.1	10.5L	10.4L	11.2L	
Hct	35.4L	32.5L	29.9L	33.9L	
MCV	88.3	88.4	90.2	93.0	
MCH	30.3	28.6	31.2	30.7	
MCHC	34.3	32.4	34.6	33.0	
PLT	242	321	317	217	
RDW	13.1	12.4	11.5	11.2	
Neut	2.12	7.27	5.86	4.81	
Lymp	1.83	1.54	2.17	1.35	
Mono	0.53	0.80	1.21H	0.78	
Eos	0.21	0.32	0.28	0.23	
Baso	0.01	0.03	0.03	0.01	
H272386D	20/01/03	Note hb			

30 Oct 2003

984 Sex : F
33 CHI :1207840483
st code : KY5 8EA

91304
/03/98
7.7
4.46
13.5
36.6
82.1
30.3
36.9
273
12.4
5.13
1.96
0.52
0.06
0.01



Date of Report:30 Oct 2003
Date and time of analysis:30 Oct 2003 15:23



Validated by:HEMR1

NHS Confidential: Personal data about a patient

TCYDEFCALLPR FIFE O.C.C.U.R.S. - DEFAULT LIST FOR :-

DRS. KHAN&KHAN

SURNAME	FORENAME	CHI NO.	ADDRESS
CERCHIARI	MICHELLE	0207840202	22 PLANTATION STREET LOCHGELLY
THOMSON	KAY	1207840483	13 PARK STREET CROSSHILL

FIFE LABORATORY - DATED 15/03/05 PAGE 40

LIST OF WOMEN SENT DEFAULT LETTER

	PRACTICE	GP	CALL DATE
FIFE	2137	9313	12/07/04
LOCHGELLY	FIFE	2137 9313	12/07/04

RECEIVED

NHS Confidential: Personal data about a patient

Fife Area Laboratory**HAEMATOLOGY**

Surname	: THOMSON	D.o.B	: 12 Jul 19
Forename	: Kay	Case No	: V306915B
Address	: 52 MARTIN CRESCENT	CHI No	: 120784041
	: BALLINGRY		Pos

Sender	: Dr K THOMPSON
Hosp/Surg	: Lochgelly Health Centre

Clin. det.:	LMP 7 WEEKS AGO
-------------	-----------------

:
:

Pregnancy Test ~~Negat~~

PLEASE NOTE

Fife Area Laboratory now reports Pregnancy tests using a Kit with a sensitivity level of 25 iu HCG.

This is a sensitivity level comparable with most "Over the counter" commercially available test systems.

FILE
TELL PT NORM
SEC / NUMBER

16 Jan 2006

984 Sex : F

33
st code : KY5 8QD

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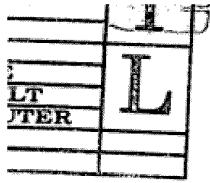
er

LAL 777

	MAKE APPT
	FOR RX
	NOTES PLEASE
	TEL PT C RESU
	PUT ON COMPI

RECEIVED 1.

Lab no:H2191260X Date of Report:17 Jan 2006 1
Date and time of analysis:16 Jan 2006 14:37



8 JAN 2005

Validated by:HEGF

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16-July-2026 SJJS
Additional:Scanned Document

Filename: iGPRDA_170.tif
Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

Fife Acute Hospitals
Queen Margaret Hospital

Whitefield Road
Dunfermline
Fife KY12 0SU
Telephone 01383 623623
www.show.scot.nhs.uk/faith



ACCIDENT & EMERGENCY DEPARTMENT

Dr. Thompson	Date: 12 July 2009
The Health Centre	CHI: 1207840483
David Street	CRN: D569709V
Lochgelly	
Fife	Enquiries to: 01383 623623
KY5 9QZ	Extension: 3027
	Direct Line: 01383 627027
	Fax No

Dear Dr Thompson

Miss Kay Thomson - DOB: 12/07/1984
6 Hawthorn Crescent
Hill Of Beath
Cowdenbeath
Fife
KY4 8EF

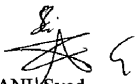
The above patient attended the A&E Department on 12/07/2009 at 17.19. I outline below for your information some information regarding this attendance.

Presenting Complaint: human bite to nose/hand
Diagnosis: HUMAN BITE
Body Site: NOSE
Investigations: X-ray
Treatment(s): ENGERIX B
VERBAL ADVICE
CO-AMOXICLAV (250/125) 375 MG TDS
Discharge Type: DISCHARGED - WITH FOLLOW UP BY PRIMARY TEAM
Referred To: General Practitioner
Discharge Destination: PRIVATE RESIDENCE - USUAL PLACE OF RESIDENCE

Additional notes (for GP)

c/o human bite to nose left index finger, counsel about Hep B, Hep C and HIV, blood taken for Storage, will need accelerated course of Hep B

Yours sincerely


GILANI, Syed
A&E DEPARTMENT

Additional: Scanned Document

Filename: iGPRDA_180.tif

Extension: .tif

Pages:

LOCHGELLY MEDICAL PRACTICE

Susan Cattanach, M.B. Ch.B, Mauricio Martins Da Silva M.B. Ch.B. Kenneth Thompson, M.B. Ch.B

**HEALTH CENTRE
DAVID STREET
LOCHGELLY**

Nurse Practitioner: Joanna McDonald

Practice Nurse: Marion Robertson

FIFE KY5 9QZ

Phone (01592) 780277

Fax (01592) 784044

KT/ED

3rd December 2007

Dr Robert A L Low,
Consultant Gynaecologist,
Consulting Rooms,
Nuffield Hospital,
25 Beaconsfield Road,
GLASGOW.
G12 0PJ.

Dear Dr Low,

Re: Kay Thomson, 3 Baird Court, Lochgelly, Fife, KY5 9NB – 12.07.84

Kay did indeed go on Depo Provera on the 3rd April, 2007. In January, 2007 she had Implanon removed and subsequently got Depo Provera in April. She has had to all extents and purposes amenorrhea ever since, the occasional little bleed once or twice. I have put her on Microgynon 30 today as per your letter of June, 2007.

I hope this meets with your approval.

Yours sincerely,

Dr Kenneth Thompson

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16-July-2026 SJJS
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Filename: iGPRDA_177.tif
Extension: .tif
Pages:

NHS Confidential: Personal data about a patient

(8)

ACCIDENT AND EMERGENCY DEPARTMENT
Queen Margaret Hospital, Whitefield Road, Dunfermline KY12 0SU

GP NAME AND ADDRESS Dr K Thompson The Health Centre David Street Lochgelly Fife KY5 9QZ 01592 780277		PATIENT DATA DOB Unit No D569709V 12/07/1984 CHI No 1207840483 Surname Thomson Forename(s) Kay Address 6 Hawthorn Crescent Hill Of Beath Cowdenbeath Fife KY4 8EF	
Date & Time of Attendance 02/06/2008 12.00	Date and Time of Accident 02/06/2008 04.00	Phone No 01383 512028 School	Occupation
TYPE OF INCIDENT (R.T.A: Work: Home: Sport: Other (Specify) OTHER		Religion	Next Of Kin Address Maria Thomson 32 Canon Lynch Court Dunfermline KY12 8AU Relationship Mother
LOCATION HOME	SOURCE OF REFERRAL SELF REFERRAL	Home Phone 01383 720701	
CRIS Number		Name of doctor <i>Howe</i> Time seen 12 : 05 hours	
Presenting Complaint: ABDO PAIN/ CHEST TIGHTNESS		T. 37.6°C P. 104 R. 20 B.P. 123/77 BM O2 Sats 99% on Air	
Investigation(s): <i>ABG - normal</i> <i>ECC - normal</i> <i>CXR - normal</i>			
Diagnosis: <i>7 days post - op. SOB 2° to discomfort, abdo swelling</i>			
Treatment: <i>Paracetamol. analgesia if required.</i>			
Follow-up: <i>return if symptoms worsening</i>			

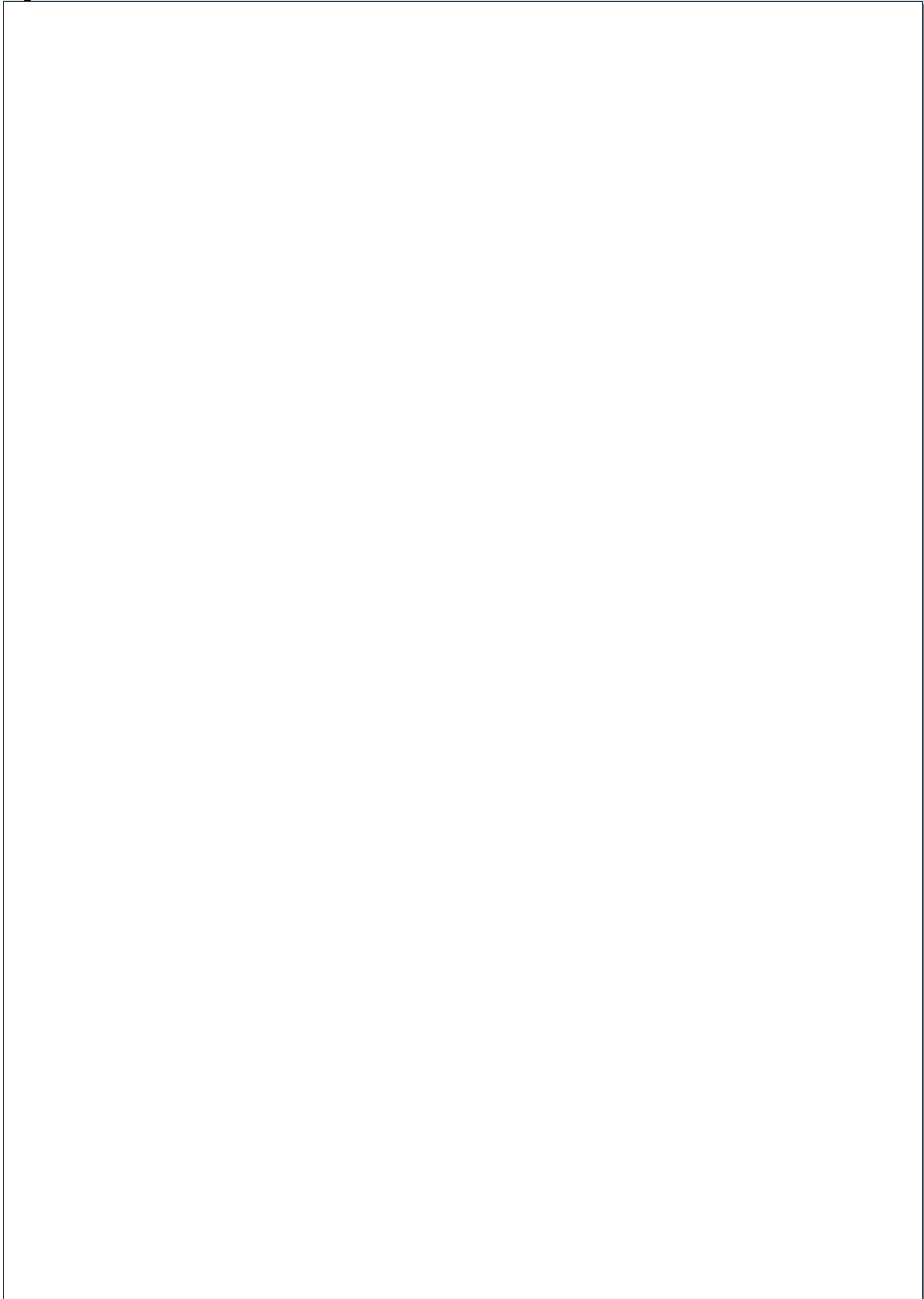
Tick once copy has been sent to GP/School/Health Visitor

Reason For Reattendance	Date Of Reattendance	Time Of Reattendance
A&E clinic		
A&E clinic		
A&E clinic		

D569709V
 D569709V
 12/07/84
 1207840483
 THOMSON
 KAY
 6 Hawthorn Crescent
 Hill Of Beath
 COWDENBEATH
 KY4 8EF

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16-July-2026 SJJS
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Filename: iGPRDA_172.tif
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Pages:



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16-July-2026 SJJS
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Filename: iGPRDA_176.tif
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Pages:

CERVICAL SMEAR (Date)													
M.M.R. (Date)													
OTHER INOCULATIONS		Date											
		Type											
TUBERCULIN TEST		Date											
		Result											
		B.C.G.											
		Date											
		Result											
Boost													
Boost													
Boost													
3													
2													
1													
DIP VAC		Per VAC		TET VAC		POL VAC		SMALLPOX		TAB VAC		MEAS VAC	
BLOOD GROUP		Date		Date		Date		Date		Date		Date	
RH		ANTIBODIES											
Date Noted													
MAJOR ALLERGIES													

THOMSON		KAY				SURNAME
SURNAME		CHRISTIAN NAMES		OCCUPATION		
National Health Service Number		Single Married Widowed	Date of Birth			(Note changes and insert year of change)
426-84-056			12 07 84			19
Address (1)		Name of Practitioner		Health Board		19
76 Garry PK		F. Khan		Cipher—Date		19
Glencraig				F 28/9/84		
Lochgelly						
KYS BAG						
(2)		(2)		(2)		Died
(3)		(3)		(3)		 19
(4)		(4)		(4)		CAUSE OF DEATH
						1.
						2.
Form G.P.6B (Scotland) — FEMALE						Signature of Practitioner

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16-July-2026 SJJS
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Filename: iGPRDA_175.tif
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NHS Confidential: Personal data about a patient

**SMOKING CESSATION CLINIC
REQUEST**

Date of Referral

8/9/08



1207840483

Name:

THOMSON

KAY

Address:

12/07/1984

F

3 Baird Court
LOCHGELLY
Fife

D.O.B:

KY5 9NB

M Martins Da Silva
LgellyHC KY5 9QZ

Telephone:

G.P.

Suitable candidate for NRT?

☒ YES/NO

Relevant Additional Information

.....

.....

.....

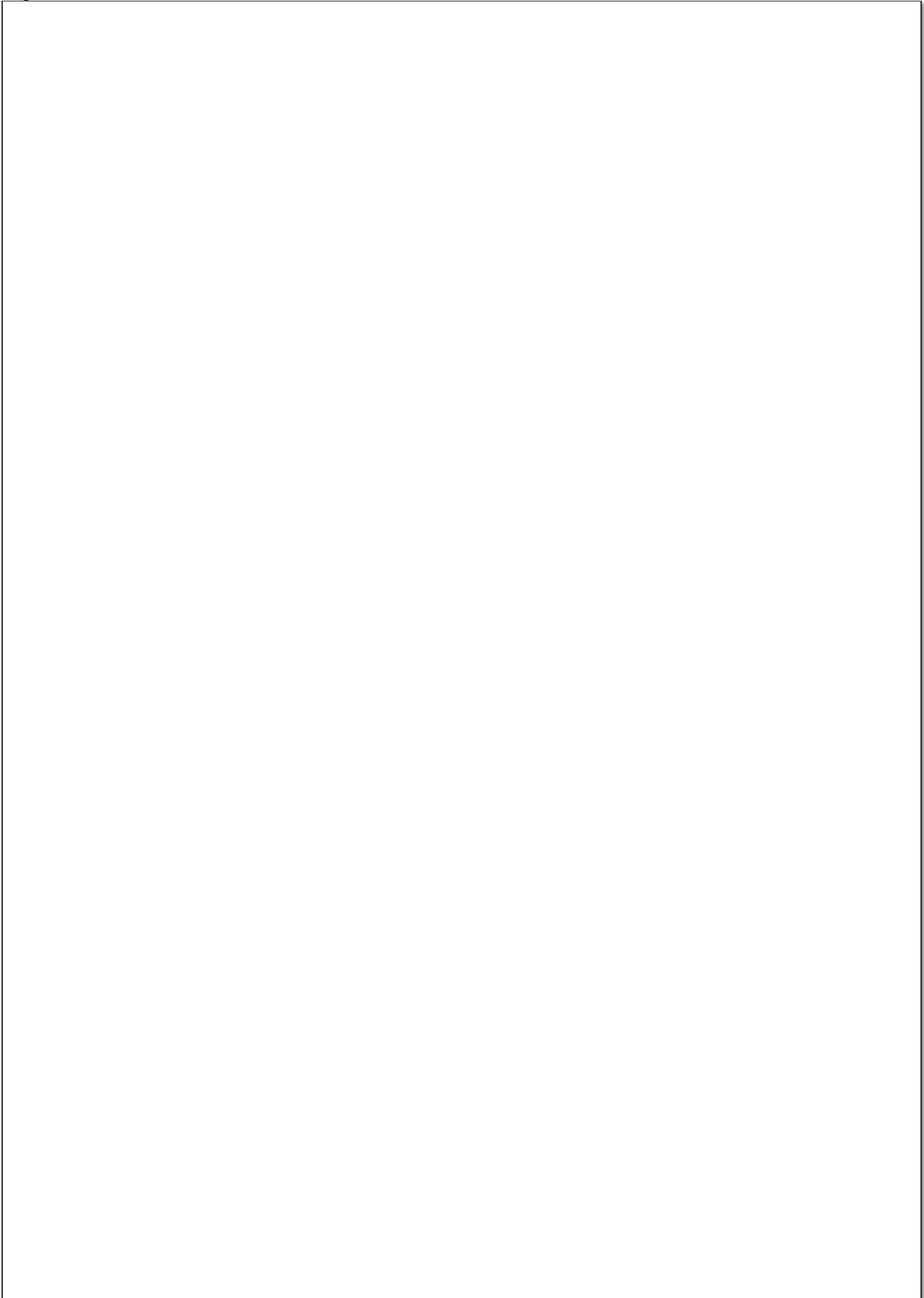
GP/Nurse Practitioner Signature:

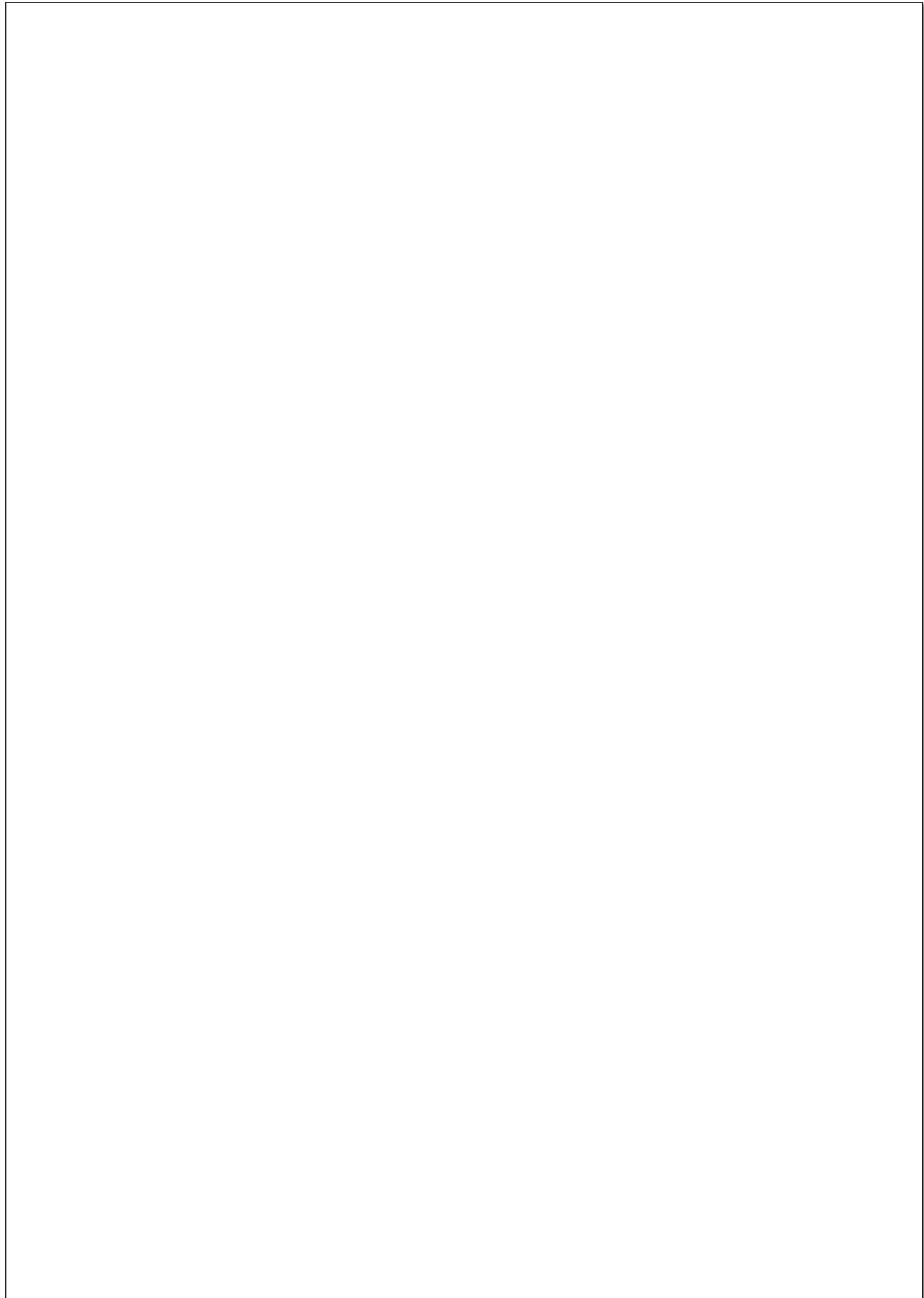
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16-July-2026 SJJS
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Filename: iGPRDA_174.tif
Extension:.tif
Pages:

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Adastra Call #: 52824 Received NHS24: 09-Jan-2009 00:22

Full cover

Patient's Name :Kay Thomson

Community Health Index:

Date of birth: 12-Jul-1984 (Age: 24 years)Sex: Female | Received PCES: __:__

Home Address: 3 Baird Court Lochgelly | Passed : __:__

 KY5 9NB () | Advised : __:__

Current Address:

 ()

Tel No: 07544 329639 Origin: Walk-In | Arrived : 00:46

Urgency: Within 2 Hours Type: Nurse Treatment | Departed : 01:03

Consulted by: Urquhart, H Own Doctor: Thompson, K

Message received:

Symptoms: severe toothache - wishing pain relief.

NHS24 Ref. no.: 0

NHS24 Triage Begin __:__ NHS24 Triage End __:__

NHS24 Triaged by :

NHS24 Clinical Summary:

NHS24 Outcome:

Advised : __:__ Advised by :

Time of Visit/Base 00:46 Consulting Doctor Urquhart, H

Clinical notes:

Triage - HISTORY

Triage - Examination

Triage - Diagnosis

Triage - Treatment

Outcome - HISTORY

Walk-in. Presented with toothache. Been taking 3 Anadin Ultra at a time with minimal relief. Has not contacted a dentist, nor called dental helpline. Depo contraceptive inj was due Dec 5th, but still not had. Has had UPSI since 5th Dec.

Outcome - Examination

No facial swelling. Patient aware of caries in upper left molar, and was due to have wisdom tooth extraction, but still not had as scared of dentists.

Preg test NEG.

Outcome - Diagnosis
Dental pain

Outcome - Treatment
issued with Co-codamol 30/500 eff tabs x30. Dissolve 2 in water QID. Continue
2 Anadin Ultra TID. Advised to contact dentist mane.

Prescription

Followups:

Call Back If Required:

=====

#52824 - DOB:12-Jul-1984 (Age: 24 years) - Kay Thomson

=====

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Transport required?
No

REFERRAL LETTER
MEDICAL IN CONFIDENCE

REFERRAL TO	
ObstetricsF3 Fife General Referral	— Consultant / receiving practitioner and/or specialty clinic
Forth Park Hospital Bennoch Road Kirkcaldy KY2 5RA	— Hospital and hospital address
	Hospital unit no. F705H
	Email address -
Urgency of referral	Routine

PATIENT DETAILS		Patient's address
Surname	Thomson	6 Hawthorn Crescent HILL OF BEATH Fife KY4 8EF
Forename(s)	Kay	
Title	Miss	
Sex	Female	
Date of birth	12-Jul-1984	
CHI no.	1207840483	Contact number(s) Voice: 10383 512028

REFERRING PRACTITIONER DETAILS		Practice address
Name	Dr. Kenneth Thompson	DAVID STREET LOCHGELLY FIFE
GMC code	3284243	
GP code	91294	
Practice name	The Health Centre (21346)	
Practice code	21346	Contact number(s) Voice: 01592 780277

Date submitted by practice: 31-Dec-2009

CLINICAL INFORMATION**History of presenting complaint / examination findings / investigation results****Presenting complaint**

Description: ANTENATAL BOOKING/SHARED CARE

Comment: Dear Doctor

I would be grateful for your further help in shared care with this 25 year old who finds herself pregnant for the second time. She already has a daughter aged six. Kay was involved in donating eggs in June 2008 at a clinic in Glasgow and had actually worried that she was failing to fall pregnant as her periods had become a bit irregular. However I am pleased to report that she had done five pregnancy tests and they have all come up positive. Her LMP was 17th November approx making her due around 24th August 2010. She is taking Folic Acid. Unfortunately Kay does like a cigarette and I wondered if you might be able to offer her some help when you see her at the clinic. She doesn't drink any alcohol.

Thank you for seeing her.

DR K THOMPSON
KT/MS

Examinations and Investigations

Blood Pressure (systolic): 112 -
Blood Pressure (diastolic): 76 -
Height (m): 1.61 -
Weight (kg): 61 -
Body Mass Index: 23.53 -
Current smoker: 19-Aug-2009

Reason for referral

Care type requested: Out Patient

Expected outcome: Investigate

Past Medical History**Pre-existing conditions** (High and Medium Priority)

Description	Modifier	Comment	Date Recorded
Influenza	-	Rx Tamiflu	19-Aug-2009
[X]Deliberate drug overdose / other poisoning	-	Impulsive overdose due to stress (NSAID and para)	05-Mar-1998
Chickenpox - varicella	-	-	02-Jan-1993

Past Procedures (High and Medium priority)

Description	Modifier	Comment	Date Recorded
Oocyte recovery	-	-	01-Jun-2007
Urine pregnancy test	-	negative	16-Jan-2006
Postnatal depression counselling	-	discharged on date shown	03-Sep-2003
Normal birth	-	-	22-Jul-2003

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

No medications recorded

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

Drug name	BNF code	Formulation	Dosage	Frequency	Course started	Duration
Folic Acid	09.01.02.0	TABS 400MICROGRAMS	1 Tab	Daily	23-Dec-2009	-
Mirtazapine	04.03.04.0	Orodispersible TABS 30MG	1 Tab	At night	24-Nov-2009	-
Fluoxetine	04.03.03.0	CAPS 20MG	1 Cap	In the morning	10-Nov-2009	-

Clinical Warnings**Lifestyle risks**

Exercise status: Not Known

Smoking status

Not Known

Alcohol consumption

Units per day
? (not known)**Additional relevant information****Administrative Information**

Patient can accept a short notice appointment:yes

Interpreter Required:no

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Transport required?
No

REFERRAL LETTER
MEDICAL IN CONFIDENCE

REFERRAL TO

GynaecologyF2
Fife General Referral

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

Forth Park Hospital
Bennoch Road
Kirkcaldy
KY2 5RA

— **Hospital and hospital address**

Hospital unit no.

F705H

Email address

-

Urgency of referral

Routine

PATIENT DETAILS

Surname Thomson

Forename(s) Kay

Title Miss

Sex Female

Date of birth 12-Jul-1984

CHI no. 1207840483

Patient's address

6 Hawthorn Crescent
HILL OF BEATH
Fife
KY4 8EF

Contact number(s)

Voice: 10383 512028

REFERRING PRACTITIONER DETAILS

Name Dr. Kenneth Thompson

GMC code 3284243 **GP code** 91294

Practice name The Health Centre (21346)

Practice code 21346

Practice address

DAVID STREET
LOCHGELLY
FIFE

Contact number(s)

Voice: 01592 780277

Date submitted by practice: 27-Nov-2009

CLINICAL INFORMATION**History of presenting complaint / examination findings / investigation results****Presenting complaint**

Description: Difficulty Conceiving

Comment: INFERTILITY CLINIC

Dear Doctor

Kay has been in a steady relationship for over a year now. Her cycle is roughly 4/14. She has not been using contraception for a year. She has regular intercourse. Unfortunately she is not becoming pregnant. Kay took part in helping a relative become pregnant by donating her eggs approximately a year ago at a centre in Glasgow. She is recently anxious that she has not fallen pregnant. She already has a child aged 6. This was by a previous relationship. Her partner has never fathered a child. Might it be possible to see her in the clinic and discuss things.

Yours sincerely

Dr Kenneth Thompson
GP
KT/LW

Examinations and Investigations

Blood Pressure (systolic): 112 -
Blood Pressure (diastolic): 76 -
Height (m): 1.61 -
Weight (kg): 61 -
Body Mass Index: 23.53 -
See below: -
Current smoker: 19-Aug-2009
Unknown: -
Unknown: -
Unknown: -
Unknown: -

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past Medical History**Pre-existing conditions** (High and Medium Priority)

<u>Description</u>	<u>Modifier</u>	<u>Comment</u>	<u>Date Recorded</u>
Influenza	-	Rx Tamiflu	19-Aug-2009
[X]Deliberate drug overdose / other poisoning	-	Impulsive overdose due to stress (NSAID and para)	05-Mar-1998
Chickenpox - varicella	-	-	02-Jan-1993

Past Procedures (High and Medium priority)

<u>Description</u>	<u>Modifier</u>	<u>Comment</u>	<u>Date Recorded</u>
Oocyte recovery	-	-	01-Jun-2007
Urine pregnancy test	-	negative	16-Jan-2006
Postnatal depression counselling	-	discharged on date shown	03-Sep-2003
Normal birth	-	-	22-Jul-2003

Family Conditions (High and Medium priority)

<u>Description</u>	<u>Modifier</u>	<u>Comment</u>
Unknown	-	-

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

<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Unknown	-	-	-	-	-	-

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

<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Mirtazapine	04.03.04.0	Orodispersible TABS 30MG	1 Tab	At night	24-Nov-2009	-
Fluoxetine	04.03.03.0	CAPS 20MG	1 Cap	In the morning	10-Nov-2009	-

Clinical Warnings**Lifestyle risks**

Exercise status: Not Known

Smoking status

Not Known

Alcohol consumption

Units per day
? (not known)**Additional relevant information****Administrative Information**Patient can accept a short notice appointment:yes
Interpreter Required:no

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NHS Confidential: Personal data about a patient

PREFERENTIAL ADMINISTRATION SERVICES
6th Floor, Central House, Clifftown Road, Southend-on-Sea, Essex, SS1 1AB

Claim Ref: N801988

MEDICAL CERTIFICATE

This Certificate is to be completed by the USUAL MEDICAL PRACTITIONER of the person whose illness/injury has given rise to the claim.
No fee. Any charge made for the completion of this certificate is the responsibility of the insured and is not refundable under the Insurance Policy.
Please answer all questions. Ticks, dashes, N/A etc will not be acceptable.
This information will be treated as Private and Confidential.
A Certificate not containing the specific information requested will not normally suffice.

1. Full Name of Patient/Person whose condition has given rise to the claim. K Thompson
2. Date of Birth. 12/17/84
3. Are you the regular medical attendant? Yes (a) If yes, for how long. August 2007
(b) If no, what is your involvement with this matter.
4. State precise nature of:
Medical condition/illness/injury cause of death, that gives rise to the claim. Suffering from unexpected severe pain due to travel.
If injury, state how this was caused. N/A
5. Has the patient suffered from same or similar condition in the past? No
6. (a) State exact date of onset as in 4. 3 days before 19/8/09 (b) Date first consulted. 19/8/09 (c) Date of any serious deterioration, if applicable. N/A

At the time the insurance was issued * 12.8.09 and/or the holiday was booked * 24/8/09 31/8/09 please confirm:

	Issued	Booked
7. What ongoing medical conditions (or any medical complication directly attributable to that condition) investigated by a registered medical practitioner had the person above suffered?	<u>None</u>	<u>None</u>
8. For what medical conditions of the person above has there been prescribed medication or treatment for other than a minor ailment by a registered medical practitioner during 2 years immediately preceding the dates? Please give consultation dates.	<u>Nil - only minor ailments.</u>	<u>Nil - minor ailments only.</u>
9. Was the person awaiting test/investigations or the results of these for a pre-existing condition?	<u>No</u>	<u>No</u>
10. Was the person above receiving or on a waiting list for, or recovering from out/day-in-patient treatment in a hospital or nursing home or on a waiting list to see a specialist/consultant?	<u>No</u>	<u>No</u>

11. Has the person named in 1 above received a terminal prognosis? No If yes, what date was this given to:
(a) the person named in 1 above. (b) the claimant, if not the same person.

12. Please state (a) whether the patient consulted you prior to their journey as to the advisability of undertaking the holiday or journey. If so, on what date. 19/8/09

(b) whether, in your opinion the patient was fit to travel. Not fit, suffering from unexpected severe pain.

13. If claim is a result of pregnancy, please advise:

(a) Date pregnancy confirmed. N/A (b) LMP (c) ECD
14. If cancellation state exact reason for the cancellation Suffering from unexpected severe pain.

15. Please advise the date when it first became apparent that the holiday should be cancelled. 19/8/09

16. Please state the exact date you advised the need to cancel. 19/8/09

17. Are you prepared to certify that, solely due to the condition described in 4 above, the claimants are compelled to cancel the holiday arrangements? Yes.

To be completed by the Usual Medical Practitioner
I have examined the patient and/or referred to his/her medical records and I declare that the information given is correct and that no details relevant to the case have been omitted.

Name (Please print) DR DAVID CATTENACH Qualifications MBChB

Address LOCHGELLY MEDICAL PRACTICE, DAVID STREET, LOCHGELLY, KY15 9QZ.

Signature David Cattenach Date 4/12/09 Surgeon's Stamp

Lochgelly Medical Practice
David St., Lochgelly, KY15 9QZ
Tel: 01592 780277
Fax: 01592 784044

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SCCRS Exclusion

Page 1 of 1

Demographic

Forename Kay
Surname Thomson
Date Of Birth 12/07/1984
CHI Number 1207840483
GP GMC Number 3284243
Registered GP Practice Code F21346

Exclusion

Reason Pregnant
Read Code -
Date 17/06/2010
End Date 17/12/2010
Extended No
Closed No
Next Recall Date 01/09/2009

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NHS Confidential: Personal data about a patient

THOMSON
KAY
6 Hawthorn Crescent
Hill of Beath
COWDENBEATH
KY4 8EF
FP103363H
12/07/1984
1207840483

DIRECTORATE OF WOMEN AND CHILDREN'S HEALTH

Dear Doctor THOMSON

The above patient attended the antenatal clinic on 8/2/10 and was booked for antenatal care under the care of

....., Named Midwife. The following investigations were carried out.

E.D.D. 21/8/10
Group and Type O NEGATIVE
Haemoglobin 12.5
Rubella POSITIVE
Syphilis EIA NEGATIVE
Hepatitis B Antigen NEGATIVE
HIV NEGATIVE
Chlamydia
MSSU
Gp. B. Strep
Previous Obstetric History

Investigations Planned During Present Pregnancy

- DOUBLE TEST	☒	- Anomaly scan	☒
- Anti-D Prophylaxis 28 weeks	☒	- Rubella vaccine required	☐
- BTS Antibody Screen 28 weeks	☒	- Random Blood Glucose 28 weeks	☒
- Haemoglobin 28 weeks	☒	- Haemoglobin 34 weeks	☐

BIRTH CARE PLAN - Home birth /Midwife Led Unit /Obstetric Unit

Yours sincerely,

Lynn Combe

Named Midwife

Sadmin/forms/ancinvestigations

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NHS Confidential: Personal data about a patient

Operational Division
Victoria Hospital

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



GYNAECOLOGY DEPARTMENT – CONSULTANT: DR MARY
INFERTILITY CLINIC

Date of Clinic: 18th January 2010
Date Dictated: 18th January 2010
Date Typed: 26th January 2010
Our Ref: AH/KK/V306915B
CHI No: 1207840483
Enquires to: Mrs Kirsteen Kopal, Secretary
Extension: 1773
E-mail: k.kopal@nhs.net
Fax: 01592 648117

Dr Thompson
The Health Centre
David Street
LOCHGELLY
KY5 9QZ

Dear Dr Thompson

Kay Thomson, 6 Hawthorn Crescent, Hill of Beath, Cowdenbeath, KY4 8EF
Date of Birth – 12/07/84

Kay did not attend her appointment at the infertility clinic. We will not offer her another appointment. If she still requires to see us then I would be pleased if you could re-refer her.

Yours sincerely


Dr A Hasan
Hospital Specialist in Gynaecology

Chief Executive Mr John Wilson
Victoria Hospital is part of The Operational Division
of NHS Fife

MS765

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SCCRS Exclusion

Page 1 of 1

Demographic

Forename	Kay
Surname	Thomson
Date Of Birth	12/07/1984
CHI Number	1207840483
GP GMC Number	3284243
Registered GP Practice Code	F21346

Exclusion

Reason	Defaulter
Read Code	908S.
Date	08/06/2010
End Date	08/09/2012
Extended	No
Closed	No
Next Recall Date	01/09/2009

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NHS Confidential: Personal data about a patient

PREFERENTIAL ADMINISTRATION SERVICES
6th Floor, Central House, Clifftown Road, Southend-on-Sea, Essex, SS1 1AB

Claim Ref: N801988

MEDICAL CERTIFICATE

This Certificate is to be completed by the USUAL MEDICAL PRACTITIONER of the person whose illness/injury has given rise to the claim.
No fee. Any charge made for the completion of this certificate is the responsibility of the insured and is not refundable under the Insurance Policy.
Please answer all questions. Ticks, dashes, N/A etc will not be acceptable.
This information will be treated as Private and Confidential.
A Certificate not containing the specific information requested will not normally suffice.

1. Full Name of Patient/Person whose condition has given rise to the claim. K Thompson
2. Date of Birth. 12/17/84
3. Are you the regular medical attendant? Yes (a) If yes, for how long. August 2007
(b) If no, what is your involvement with this matter.
4. State precise nature of- Suffering from unexpected severe
Medical condition/illness/injury cause of death, that gives rise to the claim. fits been due to travel.
If injury, state how this was caused. N/A
5. Has the patient suffered from same or similar condition in the past? No
6. (a) State exact date of onset as in 4. 3 days before 19/8/09 (b) Date first consulted. 19/8/09 (c) Date of any serious deterioration, if applicable. N/A

At the time the insurance was issued * 12.8.09 and/or the holiday was booked * 24/8/09 31/8/09 please confirm:

	Issued	Booked
7. What ongoing medical conditions (or any medical complication directly attributable to that condition) investigated by a registered medical practitioner had the person above suffered?	<u>None</u>	<u>None</u>
8. For what medical conditions of the person above has there been prescribed medication or treatment for other than a minor ailment by a registered medical practitioner during 2 years immediately preceding the dates? Please give consultation dates.	<u>Nil - only minor ailments</u>	<u>Nil - minor ailments only</u>
9. Was the person awaiting test/investigations or the results of these for a pre-existing condition?	<u>No</u>	<u>No</u>
10. Was the person above receiving or on a waiting list for, or recovering from out/day-in-patient treatment in a hospital or nursing home or on a waiting list to see a specialist/consultant?	<u>No</u>	<u>No</u>

11. Has the person named in 1 above received a terminal prognosis? No If yes, what date was this given to:
(a) the person named in 1 above. (b) the claimant, if not the same person.

12. Please state (a) whether the patient consulted you prior to their journey as to the advisability of undertaking the holiday or journey. If so, on what date. 19/8/09

(b) whether, in your opinion the patient was fit to travel. Not fit, suffering from unexpected severe fits.

13. If claim is a result of pregnancy, please advise-

(a) Date pregnancy confirmed. N/A (b) LMP (c) ECD
14. If cancellation state exact reason for the cancellation Suffering from unexpected severe fits.

15. Please advise the date when it first became apparent that the holiday should be cancelled. 19/8/09

16. Please state the exact date you advised the need to cancel. 19/8/09

17. Are you prepared to certify that, solely due to the condition described in 4 above, the claimants are compelled to cancel the holiday arrangements? Yes

To be completed by the Usual Medical Practitioner
I have examined the patient and/or referred to his/her medical records and I declare that the information given is correct and that no details relevant to the case have been omitted.

Name (Please print) DR DAVID CATTENACH Qualifications MBChB
Address LOCHGELY MEDICAL PRACTICE, DAVID STREET, LOCHGELY, KY15 9QZ
Signature David Cattenach Date 4/12/09 Surgeon's Stamp
Lochgelly Medical Practice
David St., Lochgelly, KY15 9QZ
Tel: 01592 780277
Fax: 01592 784044

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Operational Division
Forth Park Hospital

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



THOMSON KAY 6 Hawthorn Crescent Hill of Beath COWDENBEATH KY4 8EF	FP103363H 12/07/1984 1207840483
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15/2/10.

Dear Dr. Thomson (Lachgelly)

I am writing to let you know that the urine sample sent on 8/2/10 shows that you have a urinary tract infection with The infection is sensitive to the following antibiotics

* PLEASE VIEW ATTACHED SHEET
FOR YOUR INFORMATION.

You should drink plenty fluids to flush the infection out and get a prescription for antibiotics from your doctor. Please 'phone the surgery. If you would like to discuss this further do not hesitate to contact your midwife or antenatal clinic.

Yours sincerely

P. D. Martin / Clinical Officer

Community Midwife/Doctor Lona Eldridge

cc GR ✓

Chief Executive Mr. John Wilson
Forth Park Hospital is part of The Operational Division
of NHS Fife

MS762

NHS Confidential: Personal data about a patient

Dept of MEDICAL MICROBIOLOGY and INFECTION CONTROL

PIFE AREA LABORATORY, HAYFIELD RD, KIRKCALDY Direct Tel:01592 648090

Surname : THOMSON D.o.B. : 12 Jul 1984 Sex : F
Forename : Kay Case No: FP103363H CHI No : 1207840483
Address : 6 HAWTHORN CRESCENT HILL OF BEATH
Post Code : KY4 8EF

Report to : - UNKNOWN Origin: Ante-natal Clinic Forth Park
: Ante-natal Clinic
: Forth Park Hospital

Clin. det.: Pregnant - Booking

Lab Number: M6008372D Specimen: Mid stream urine Date taken: 08 Feb 2010
Time taken:

Urine Culture
1) >100,000 cfu/ml of Streptococcus agalactiae

Urine Sens 1
Amox/Ampicillin S
Trimethoprim S
Nitrofurantoin S

Streptococcus agalactiae is also known as Group B
streptococcus

Copy to :

Received : 08 Feb 2010 Reported : 11 Feb 2010 Auth : SUSAN SMITH CONS

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1010030042068

Unique Care Pathway Number: 1010030042068

Transport required? No

REFERRAL LETTER

MEDICAL IN CONFIDENCE

OBSTETRICS

OBSTETRICS

REFERRAL TO	
Obstetrics F3 Fife General Referral	— Consultant / receiving practitioner and/or specialty clinic
Forth Park Hospital Bennoch Road Kirkcaldy KY2 5RA	— Hospital and hospital address Hospital Location Code F705H Email address -
Urgency of referral	Urgent
TOP request. Patient will bring letter with her, appt 10th January 2.30pm.	

PATIENT DETAILS		Patient's address
Surname	Thomson	6 Hillview Main Street HILL OF BEATH COWDENBEATH KY4 8DP
Forename(s)	Kay	
Title	Miss	
Sex	Female	
Date of birth	12-Jul-1984	
CHI no.	1207840483	Contact number(s) Voice: 242460

REFERRING PRACTITIONER DETAILS		Practice address
Name	Dr. Mohammed Yousaf	94 MAIN STREET CROSSGATES FIFE
GMC code	2774374	
GP code	93122	
Practice name	CROSSGATES MEDICAL PRACTICE (20358)	
Practice code	20358	Contact number(s) Voice: 01383 511398

Date submitted by practice: 06-Jan-2012
Reason for referral
Care type requested: Out Patient
Expected outcome: Investigate

Administrative Information
Patient can accept a short notice appointment:yes
Interpreter Required:no

Stylesheet version: 13.0.1.1 7-Oct 2010 Comments to: fife-uhb.fifecc@nhs.net

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CLINICAL INFORMATION**History of presenting complaint / examination findings / investigation results****Presenting complaint**

Description: TOP request. Appt 10th January at 2.30pm.

Comment: Patient will bring this letter to clinic, sent via SCI Gateway also.

Many thanks for agreeing to see this 27 year old para 2 + 0 lady who is requesting termination of pregnancy. She has 2 children aged 3 years and 18 months and unfortunately was not using any contraception at the time and now feels that she cannot cope with another pregnancy at this stage. Her LMP was in the first week of November and on abdominal examination today there are no palpable masses.

I have discussed the pros and cons and regarding contraception for the future and have enclosed duly completed Form A.

Appointment has been secured for Miss Thomson for Tuesday 10th January at 2.30pm.

Kind regards.

Examinations and Investigations

Current smoker: priority=2 01-Jun-2011

Past Medical History

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

No medications recorded

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

No recent medications recorded

Lifestyle risks

Exercise status: Not Known

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Fife Acute Hospitals
Forth Park Hospital



F THOMSON		FP103363H: SUMMARY FOR MATERNITY SERVICES	
NAME: KAY		UNIT NO.	WARD
ADDR: 6 Hawthorn Crescent Hill of Beath COWDENBEATH KY4 8EF		DISCHARGE ADDRESS: (if different) SJA	
TELEP		TELEPHONE NUMBER: 01383 512028	
GENERAL PRACTITIONER: Dr Thomson		CONSULTANT: Dr Monaghan	
Parity: 1+0	Date of Admission: 21/8/10	Date of Discharge: 22-8-10	Blood Group: O NEG
ANTENATAL	Complications ☐ NONE	Amniocentesis ☐ NO	Detailed Scan ☒ YES
		Antenatal Hb ☒ 12.5g/dL	Double Test ☒ Low risk
Comments: Kept well antenatally - no admissions.			
Signed: J Bran		Date: 22/8/10	
LABOUR	Date of Delivery: 22/8/10	Time of Delivery: 0458	
Spontaneous ☐	Induced ☐	Accelerated ☒	Blood loss: 250mls
Delivery	SVD ☒	Assisted Breech ☐	HFFD ☐
		Ventouse ☐	CS ☐
Third Stage	Placenta Complete ☒	Incomplete ☐	MROP ☐
		Membranes Complete ☒	Incomplete ☐
Perineum	Intact ☐	Episiotomy ☐	Laceration ☒ labial
			laceration Not Sutured
Comments: Augmentation of labour for meconium stained liquor.			
Signed: J Bran		Date: 22/8/10	
PUERPERIUM	Perineum satisfactory: Yes ☒ No ☐	Contraceptive advice given: Yes ☒ No ☐	
Anti D required: Yes ☐ No ☒	Ante D given date:	3rd day Hb required: Yes ☐ No ☒	Result:
Emotional state on discharge good: Yes ☒ No ☐	Post natal appointment: GP ☒ 6 weeks Hospital ☐		
Wound:	Prolene/Staples removed	Yes ☐ No ☒	N/A
Drug therapy on discharge: ☐ NO			
Comments:			
Signed: H Henderson		Date: 22/8/10	
BABY	Male ☒ Female ☐	Surname: THOMSON	Forename: RULEY
Gestation: 40+1	Apgar: 9/1, 9/5		
OFC Birth: 35.5cm	OFC 3rd day	Length: 50cm	Birth Weight: 3350g
Discharge Weight:			
Feeding: Breast ☒	Artificial ☐	Guthrie test done ☐	Date:
Jaundice: Yes ☐ No ☒	SBR ☐ Date last done	Hips Normal: Yes ☒ No ☐	
Baby admitted to SCN: Yes ☐ No ☒	Follow up? Yes ☐ No ☒	Drug therapy on discharge: Yes ☐ No ☒	
Comments: Hearing Screened 22/08/10 2 Pass 1 Pass N/A S/NR			
Signed: H Henderson		Date: 22.8.10	
COMMUNITY MIDWIFE COMMENTS:		10th DAY:	
Date of transfer to Health Visitor:		Signature:	

Scanned Document
16-July-2026 SJJS

Additional:Scanned Document

Filename: iGPRDA_157.tif

Extension:.tif

Pages:

NHS Confidential: Personal data about a patient

GPR

NHS IN SCOTLAND

APPLICATION TO REGISTER PERMANENTLY WITH A GENERAL MEDICAL PRACTICEPlease use **BLOCK CAPITALS** to complete the form and tick all relevant boxes**PERSONAL DETAILS (ALL FIELDS MARKED * ARE MANDATORY AND MUST BE COMPLETED AS FULLY AS POSSIBLE)**

Eligibility to use the NHS services depends mainly on residence in the UK, and on other qualifying provisions set out in the Regulations. By completing this section fully, you will assist us in processing your application and locating any existing medical records promptly.

WILL YOU BE IN THE AREA FOR MORE THAN THREE MONTHS?*

YES ☒ NO ☐

IS THIS YOUR FIRST REGISTRATION WITH A GP PRACTICE?*

YES ☐ NO ☒

SURNAME *

THOMSON

TITLE #

MISS

MALE *

☐

FEMALE *

☒

FORENAME *

KAY

MIDDLE NAME *

PREVIOUS SURNAME *

DATE OF BIRTH *

62071984

ADDRESS *

6 HILLVIEW MAIN STREET
HILL OF DEATH

POSTCODE * KY20DP

TOWN & COUNTRY OF BIRTH *

KIRKCALDY

FIFE

MOTHER'S MAIDEN NAME *

OHARE

TELEPHONE NUMBER #

01383 242460

EMAIL ADDRESS #

PREVIOUS ADDRESS IN UK *

POSTCODE

NAME AND ADDRESS OF PREVIOUS REGISTERED GP PRACTICE IN UK *

LOCHGELLY DOCK THOMSON

POSTCODE *

COMMUNITY HEALTH INDEX NUMBER

NHS NUMBER

NATIONAL INSURANCE NUMBER

JJ628431D

the data supplied in these fields will not be input to, or updated in, the Community Health index (CHI), but will be held on the GP Practice's system.

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ARE YOU RETURNING / HAVE YOU ARRIVED FROM ABROAD OR HM FORCES? *

YES ☐ NO ☒DATE OF DEPARTURE
FROM UK

D D M M Y Y

DATE OF ENTRY/RETURN
TO UK

D D M M Y Y

IF RETURNING FROM H M FORCES
DATE ENLISTED

D D M M Y Y

SERVICE/PERSONNEL NO.

COUNTER FRAUD DECLARATION

I declare that the information I have given on this form is correct and complete. I understand that, if it is not, appropriate action may be taken. To enable the Common Services Agency to confirm my eligibility to lawfully register with a GP and for the purposes of prevention, detection, and investigation of crime, I consent to the disclosure of relevant information from this form including to and by the NHS Business Services Authority, the Common Services Agency, UK Border Agency, Identity and Passport Service, the Department for Work & Pensions, HM Revenue and Customs, the General Register Office and Local Authorities.

PATIENT OR REPRESENTATIVE SIGNATURE

K Thomas

DATE: 30 05 14

IF SIGNING AS A REPRESENTATIVE, PLEASE STATE:

YOUR NAME

YOUR RELATIONSHIP TO THE
PATIENT**VOLUNTARY CONSENT TO ORGAN DONATION**

I authorise the donation of (Please tick the boxes that apply)

A. any of my organs and tissue ☐ or my

B. kidneys ☐ heart ☐ liver ☐ small bowel ☐
 eyes ☐ lungs ☐ pancreas ☐ tissue ☐

for transplantation after my death

D D M M Y Y

PATIENT SIGNATURE

DATE

PRACTICE ACCEPTANCE AGREEMENT – for GP Practice use onlyPRACTICE
CODE

20358

GP NAME

DR DOWD

IDENTIFICATION SEEN

GP REFERENCE NUMBER

A1821

MEDICAL CARD ☐BIRTH CERTIFICATE ☐PASSPORT ☒

OTHER - SPECIFY

I accept this patient onto the practice list and declare that, to the best of my knowledge the information I have given on this form is correct and complete and I understand that if it is not, action may be taken against me. I acknowledge that the details may be authenticated from appropriate records, and that payments generated from this patient registration will be made to my Practice, which will be subject to Payment Verification. Where Common Services Agency is unable to obtain authentication, I acknowledge that the onus is on my Practice to provide documentary evidence to support this application.

GP SIGNATURE

Dr. M. G. Taseef

DATE:

30 05 14

OFFICIAL USE ONLY

Input By:

Date:

Checked By:

APS Group Scotland
DPPAS10348 (07/10)

NHS Confidential: Personal data about a patient

IF YOU HAVE BEEN REGISTERED HERE BEFORE
PLEASE TICK BOX ☐

CROSSGATES MEDICAL PRACTICE**Dr. M. Tahir Yousaf BSc.MB.ChB.****Dr. Frank D. H. Downie MB.ChB.**

94 MAIN STREET,
 CROSSGATES,
 FIFE. KY4 8DF
 Telephone : 01383 511398
 Fax : 01383 611586

Date :

Dear Patient,

Welcome to our practice. We request that you make an appointment for a new patient health check. This gives us an opportunity to meet you and find out about your past and present health. Please arrange to make an appointment with the nurse. (This is only necessary for patients over 5yrs old). Your acceptance at this surgery is dependant on you having this completed.

To help us with this please answer the following questions. Bring this form with you when you attend. Thank You.

Surname: <u>THOMSON</u>	Date of Birth: <u>12-7-84</u>
Forename: <u>KAY</u>	
Address: <u>6 HILLVIEW, MAINSTREET, Hill of BEATH.</u>	
<u>KY4 8DF.</u>	
Tel No: <u>01585 242460</u>	Occupation: <u>Employed.</u>
Marital Status: ☒ M ☐ W ☐ D	E-mail:

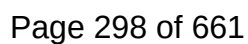
Please tick the boxes that apply to you

Smoking Status:	Do you / have you suffered from:	Date of Diagnosis
☐ I have never smoked	☐ Angina	
☐ I smoke a pipe	☐ Stroke	
☐ I smoke 1 - 9 cigs / day	☐ Heart Attack	
☐ I smoke 10 - 19 cigs / day	☒ Any heart surgery	
☐ I smoke 20 - 39 cigs / day	☐ Depression or Anxiety	
☐ I smoke >40 cigs / day	☐ Epilepsy or Fits	
☐ I have stopped smoking	☐ Asthma	
☐ Date when stopped -	☐ Cancer	
☐ Amount previously smoked / day	☐ High Blood Pressure	

Do you have any allergies? (Y/N) <u>N</u>	Do you have Diabetes? (Y/N) <u>N</u>
Details:	If yes do you take:
	A special diet:
Do you care for a relative, friend or Neighbour? (Y/N) <u>N</u> If yes please give their details.	Tablets:
Name:	Insulin injections:
Address:	Date diagnosed:
Do you have or need help? -	

Do you take medication for a Thyroid disorder? <u>No</u>	Do you take exercise:
Name of tablet:	Never ☐ Occasionally ☒
Date of last Tetanus and Polio Boosters:	Regularly ☐ Frequently ☐
Alcohol Intake: 1 unit = 1/2 pint beer, 1 glass wine, 1 measure spirits	
<u>4 units week.</u>	
Please note that your registration at this practice is only complete AFTER a health check with the nurse.	

Ethnicity - White Scottish* Mandabry.



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Thomson, Kay
DoB: 12/07/1984

Report Valid On 08/06/11 09:05

The Health Centre
 Page number 1

Registration

Miss Kay Thomson
 6 Hill View
 HILL OF BEATH
 Fife

KY4 8DP

Telephone:

Contact: ?

Email: ?

CHI Number: 1207840483

NHS Number: 426/84/056

Patient ID:

Occupation:

Registered GP: Dr K Thompson

Repeat Consultation: ?

Registered: 28/09/1984

Confirmed: 28/09/1984

BMI: 23.5

Height: 1.61 m

Weight: 61 kg

Parity: 0

Gravida: 0

SCI-DC Consent Given: Yes

Service Code: Permanent

DoB: 12/07/1984

Age: 26

Dispensing: No

Road: 0 Water: 0 FootPath: 0

Marital Status: Single

Seen By GP: Dr K Thompson

Acute Consultation: 21/06/2010

Records Received: ?

BP: 120/60

Priority Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier
30/05/2008	None	High	Notes summary on computer	

Fretext: YD

Repeat Medication

Drug/Preparation	Quantity/Dose/Frequency	Start	Last	Pres.	Review	CMS Int.
------------------	-------------------------	-------	------	-------	--------	----------

Adverse Reactions

Read Code	Description
-----------	-------------

Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier
19/08/2009	None	Medium	Influenza	
Fretext:	Rx Tamiflu			
01/06/2007	None	Medium	Oocyte recovery	
16/01/2006	None	Medium	Urine pregnancy test	
Fretext:	negative			
03/09/2003	None	Medium	Postnatal depression counselling	
Fretext:	discharged on date shown			
22/07/2003	None	Medium	Normal birth	
05/03/1998	None	Medium	[X]Deliberate drug overdose / other poisoning	
Fretext:	Impulsive overdose due to stress (NSAID and para)			
02/01/1993	None	Medium	Chickenpox - varicella	
28/09/1984	None	Medium	Pat. GP7B/GP8B card from HB	
18/01/2010	18/01/2010	Low	Did not attend	
Fretext:	infertility clinic			

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Thomson, Kay**DoB: 12/07/1984****Report Valid On 08/06/11 09:05**

The Health Centre

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29/12/2009	None	Low	Obstetric referral
29/12/2009	None	Low	Referred By Dr K Thompson
25/11/2009	25/11/2009	Low	Gynaecological referral
Freetext:	INFERTILITY CLINIC		
25/11/2009	25/11/2009	Low	Referred By Dr K Thompson
19/08/2009	None	Low	Current smoker
19/08/2009	None	Low	Influenza
Freetext:	Rx Tamiflu		
19/08/2009	None	Low	Smoking cessation advice
08/09/2008	None	Low	Depo-provera injection given
18/06/2008	None	Low	Oral contraceptive
Freetext:	Microgynon		
29/11/2007	None	Low	Oral contraceptive
Freetext:	Microgynon		
30/07/2007	None	Low	Patient added from joiner practice.
31/01/2007	None	Low	Depo-provera injection given
16/01/2006	None	Low	Current smoker
16/01/2006	None	Low	Smoking cessation advice
25/08/2003	None	Low	Emergency contraception
Freetext:	Levonelle 2		

Screening

08/06/2010	Cervical Screening\$\$	Cervical smear defaulter
Repeat after an Interval - 27 Months		Do not send recall letter Do not send result letter
02/09/2009	Cervical Screening\$\$	Letter invite to screening
Call for screening		First recall letter sent Do not send result letter
25/09/2006	Cervical Screening\$\$	Cervical smear: negative
Repeat after an Interval - 36 Months		Send recall when due Do not send result letter
01/11/1989	Preschool Immunis.\$\$	Booster DT(double)+polio vacc.
No Action Required		Do not send recall letter Do not send result letter
02/02/1988	Mmr Immunis.\$\$	Measles/mumps/rubella vaccin.
No Action Required		Do not send recall letter Do not send result letter
29/10/1985	Mmr Immunis.\$\$	Measles vaccination
No Action Required		Do not send recall letter Do not send result letter
18/06/1985	3rd Primary Immunis.\$\$	Third DTP (triple)+polio vacc.
Repeat after an Interval - 12 Weeks		Do not send recall letter Do not send result letter
04/12/1984	2nd Primary Immunis.\$\$	Second DTP (triple)+polio vacc

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Repeat after an Interval - 12 Weeks

Do not send recall letter

Do not send result letter

16/10/1984 1st Primary Immunis.\$\$

First DTP (triple)+polio vacc.

Repeat after an Interval - 6 Weeks

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

Drug/Preparation	Quantity/Dose/Frequency	Date
Co-Codamol 8mg/500mg CAPS	100 2 Caps Take as required	21/06/2010
Clotrimazole Thrush And Vaginal CREAM	1 Apply 3 times daily	01/06/2010
Amoxicillin CAPS 500MG	21 1 Cap 3 times daily	17/02/2010
Folic Acid TABS 400MICROGRAMS	90 1 Tab Daily	23/12/2009
Mirtazapine Orodispersible TABS 30MG	30 1 Tab At night	24/11/2009
Fluoxetine CAPS 20MG	30 1 Cap In the morning	10/11/2009
Oseltamivir Sis CAPS 75MG	10 1 Cap morning and night	19/08/2009
Champix TABS Titration Pack	1	20/01/2009
Depo-Provera Contraceptive Prefilled Syringe 1ml INJ 150MG/ML	1	13/01/2009
	last 08.09.08	
Depo-Provera Contraceptive Prefilled Syringe 1ml INJ 150MG/ML	1	08/09/2008
Fusidic Acid CREAM 2%	15 Apply Twice daily	11/08/2008
Flucloxacillin CAPS 250MG	28 1 Cap 4 times daily	11/08/2008
Microgynon 30 TABS	126 1 Tab Daily	18/06/2008
Fusidic Acid CREAM 2%	30 Apply Twice daily	21/05/2008
Zolpidem TABS 10MG	14 1 Tab At night	07/05/2008
Microgynon 30 Ed TABS	84 1 Tab Daily	29/11/2007
Mometasone Furoate 140 Dose Aqueous Nasal SPRAY 50MCG/DOSE	1 1 Puff Daily	27/04/2007
Amoxicillin CAPS 250MG	21 1 Cap 3 times daily	27/04/2007
Aluminium Chloride Hexahydrate APPL 20%	1 Apply At night	27/04/2007
Levonelle 1500 TABS 1.5MG	1 1 Tab Daily	07/11/2006
Amoxicillin CAPS 250MG	21 1 Cap 3 times daily	14/07/2006
Co-Codamol 30mg/500mg CAPS	100 2 Caps As directed	14/07/2006
Aluminium Chloride Hexahydrate APPL 20%	1 Apply sparingly Daily	16/01/2006

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Niquitin 21mg/24 Hours Step One
Clear PATCH

14 Apply Daily

16/01/2006

Aluminium Chloride Hexahydrate
APPL 20%

1 Apply At night

23/07/2004

Levonelle 2 Levonorgestrel
750mcg TABS

2 1 Tab Twice daily

25/08/2003

Inactive Repeat Drugs**Intervals**

Drug/Preparation	Quantity/Dose/Frequency	Start	Last	Pres.	Review	CMS Int.
------------------	-------------------------	-------	------	-------	--------	----------

Last Encounter

attended midwife - 38+ = 38cm. no sample 120/60 FMF FH - 3/52 f/park (dw)

Disease Protocol Sessions:

Chronic - SPICE Basic Health Values

12/08/2010

Recall Period - Inactive

=====

33 weeks well a/n check satis ANC 4 weeks m.s.

=====

Acute Prescriptions:

Co-Codamol - 8mg/500mg CAPS

2 Caps - Take as required

100

=====

Dr K Thompson

Date: 21/06/2010

neck and leg cramps , 38 weeks pregnant, FROm in neck 101/65 analgesia , line 3 weeks from 15 th june neck / leg cramps

=====

SCCRS Exclusion received: 10/06/2010 07:41:37; Exclusion Code: 908S. ; Exclusion Reason: Defaulter ; Exclusion End Date: 08/09/2012 00:00:00 ; Exclusion Closed: 0 ; Exclusion Extended: 0

Screening:

Cervical Screening\$\$ - Cervical smear defaulter - Repeat after an Interval - (Review 27M)

=====

Pt called for appt with GP - pains in les and knees, cramps during the night. Advised to call FPH and speak to midwife - lw

=====

MSU to lab (dw)

=====

Dr M Martins Da Silva

Date: 01/06/2010

works at supermarket. lifting newspapers yesterday. last night onset low back pain. FMF 28/40. no urinary sx. urinalysis. + leucs only. MSU. self cert. see pm

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Thomson, Kay
DoB: 12/07/1984**Report Valid On 08/06/11 09:05**The Health Centre
Page number 5**Acute Prescriptions:**

Clotrimazole - Thrush And Vaginal CREAM Apply - 3 times daily 1

=====

attended midwife BP100/60 FHH FMF Mat B1 urine no spec, FPH for anti D (dw)

Disease Protocol Sessions:

Chronic - SPICE Basic Health Values 15/04/2010 Recall Period - Inactive

=====

=====

Clinical / User Markers:

Did not attend - - infertility clinic

=====

UTI on booking Ix.

Acute Prescriptions:

Amoxicillin - CAPS 500MG 1 Cap - 3 times daily 21

=====

Clinical / User Markers:

Obstetric referral - -

Referred By Dr K Thompson

=====

=====

Dr K Thompson Date: 23/12/2009

Acute Prescriptions:

Folic Acid - TABS 400MICROGRAMS 1 Tab - Daily 90

=====

Dr S J Cattanaach Date: 04/12/2009

=====

Clinical / User Markers:

Gynaecological referral - - INFERTILITY CLINIC

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Thomson, Kay**DoB: 12/07/1984****Report Valid On 08/06/11 09:05**

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Referred By Dr K Thompson

=====

Dr K Thompson

Date: 24/11/2009

=====

Dr S J Cattanaach

Date: 10/11/2009

Several months of low mood,tearful,lack of motivation,wants to stay in bed,sleep disturbance. Occasional thoughts she would be better off not here. Young daughter at home. Single Mum.Supportive family. Imp clinical depression. Try fluoxetine. Med 3 2weeks

"depression" Rev 4weeks.

Acute Prescriptions:

Fluoxetine - CAPS 20MG	1 Cap - In the morning	30
Mirtazapine - Orodispersible TABS 30MG	1 Tab - At night	30

=====

Clinical / User Markers:

Influenza - - Rx Tamiflu

=====

Clinical / User Markers:

Influenza - - Rx Tamiflu

=====

Screening:

Cervical Screening\$\$ - Letter invite to screening - Call for screening

=====

Informed patient she needs to ask Travel Company for Holiday Cancellation Form - SC/CA

=====

Pt called re swine flu - supposed to be going to New Zealand today. had to cancel flight - could she have letter to say that she could not fly as she has swine flu so she can get money back? - lw

=====

Dr S J Cattanaach

Date: 19/08/2009

3/7 headache,sore throat,myalgia,fever,sweats,nausea,no appetite,occas stabbing abdo pain but no diarrhoea or vomiting. dry cough. No underlying health problems. Good story for swine flu,discussed possibility of other viruses causing same sx. Rx tamiflu.D

iscussed care of 6yo daughter-advised better for family member to care for her or her Dad until she is better.

Clinical / User Markers:

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Current smoker - -

Smoking cessation advice - -

Acute Prescriptions:

Oseltamivir - Sls CAPS 75MG	1 Cap - morning and night	10
-----------------------------	---------------------------	----

Disease Protocol Sessions:

Acute - 1st SPICE Index	19/08/2009	Recall Period - N/A
-------------------------	------------	---------------------

Acute - SPICE Basic Health Values	19/08/2009	Recall Period - N/A
-----------------------------------	------------	---------------------

=====

=====

Clinical / User Markers:

Oral contraceptive - - Microgynon

=====

Clinical / User Markers:

Depo-provera injection given - -

=====

Clinical / User Markers:

Emergency contraception - - Levonelle 2

=====

dna dr wilson

=====

Letter sent to collect script & TMA with Practice Nurse for Hep B vac re Acc/Emerg. attendance 12th July - CA

=====

Marion Robertson	Date: 15/07/2009
------------------	------------------

NOT SEEN. See A&E letter 12/7/09. Is going to require accelerated course Hep B. Had 1st dose 12/7/09, needs one mid Aug 09, then mid Sept 09 & booster July 10

Acute Prescriptions:

Hepatitis B - Vial 0.5ml VACC 20MCG/ML	to be injected -	3
--	------------------	---

=====

Reminder letter sent to pt requesting permission to copy all medical records for Basten Sneddon Solicitors HB

Summary Sheet: Patient Transfer

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Thomson, Kay**DoB: 12/07/1984****Report Valid On 08/06/11 09:05**

The Health Centre

Page number 8

=====

Letter asking if agreeable to ALL medical records being copied for Basten Sneddon - CA

=====

DNA SCC mg

=====

Smoking Cessation - patches causing skin problem. Wants to try Champix. Smokes 20 per day. Side effects of Champix discussed.
Request starter pack (prescription done) ED

=====

Acute Prescriptions:

Champix - TABS Titration Pack

-

1

=====

=====

=====

=====

Marion Robertson

Date: 14/01/2009

In for depo provera, not keen to have it as has put on one stone since restarting it. Given family planning leaflet, thinking about having
coil inserted. Also referred to smoking cessation clinic.

=====

Acute Prescriptions:Depo-Provera - Contraceptive Prefilled Syringe 1ml INJ
150MG/ML

-

1

=====

NHS 24 contact filed mg

=====

attended t/room nurse - asked to give depo-provera 150mg/ml right buttock, due 1-12-08 (dw)

=====

Dr M Martins Da Silva

Date: 08/09/2008

In for depo. wants to use this as forgetting to take the pill. period started yesterday. to be given in TR by LD. refer SCC

Acute Prescriptions:Depo-Provera - Contraceptive Prefilled Syringe 1ml INJ
150MG/ML

-

1

=====

Dr M Martins Da Silva

Date: 11/08/2008

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Thomson, Kay**DoB: 12/07/1984****Report Valid On 08/06/11 09:05**

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Impetigo on L nostril. rx. worsening statement

Acute Prescriptions:

Fusidic Acid - CREAM 2%	Apply - Twice daily	15
Flucloxacillin - CAPS 250MG	1 Cap - 4 times daily	28

=====

Marion Robertson Date: 22/07/2008

In for depo provera, not had it for years.No script. Period finished at weekend. Advised she needs to see GP to restart this.

=====

Dr K Thompson Date: 18/06/2008

req contacetion . 125/ 80 . micro 30

Acute Prescriptions:

Microgynon 30 - TABS	1 Tab - Daily	126
----------------------	---------------	-----

=====

Ann Lawson Date: 18/06/2008

Needs contraception, been part of egg donation, also looking for smoking cessation.

=====

=====

=====

Screening:

Cervical Screening\$\$ - Cervical smear: negative - Repeat after an Interval - (Review 36M)

Clinical / User Markers:

[X]Deliberate drug overdose / other poisoning - - Impulsive overdose due to stress (NSAID and para)

Chickenpox - varicella - -

Normal birth - -

Notes summary on computer - - YD

Oocyte recovery - -

Postnatal depression counselling - - discharged on date shown

=====

Screening:

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1st Primary Immunis.\$ - First DTP (triple)+polio vacc. - Repeat after an Interval - (Review 6W)

2nd Primary Immunis.\$ - Second DTP (triple)+polio vacc - Repeat after an Interval - (Review 12W)

3rd Primary Immunis.\$ - Third DTP (triple)+polio vacc. - Repeat after an Interval - (Review 12W)

Mmr Immunis.\$ - Measles vaccination - No Action Required

Mmr Immunis.\$ - Measles/mumps/tubella vaccn. - No Action Required

Preschool Immunis.\$ - Booster DT(double)+polio vacc. - No Action Required

=====

Dr K Thompson

Date: 21/05/2008

undergoing injections and nose spray for pre retrieval of eggs TATT . stress line 2 weeks .

Acute Prescriptions:

Fusidic Acid - CREAM 2%

Apply - Twice daily

30

=====

Dr K Thompson

Date: 07/05/2008

not sleeping . very stressed . mood low . forgetting things . zolpidem 10 mg . line 2 weeks stress

Acute Prescriptions:

Zolpidem - TABS 10MG

1 Tab - At night

14

=====

PHLEBOTOMIST - RUBELLA CHECK - CA

=====

Ann Lawson

Date: 19/03/2008

Egg donation being done in glasgow, rubella check missed from bloods. Advised make appt with phlebotomist.

=====

Ann Lawson

Date: 19/02/2008

No reply left message.

=====

Dr K Thompson

Date: 29/11/2007

start OCP as per clinic in Glasgow . donating eggs to cousins. had depo provera in april . no period since !

=====

Dr K Thompson

Date: 29/11/2007

Acute Prescriptions:

Microgynon 30 Ed - TABS

1 Tab - Daily

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Summary Sheet: Patient Transfer

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Thomson, Kay**DoB: 12/07/1984****Report Valid On 08/06/11 09:05**

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Page number 11

Disease Protocol Sessions:

Acute - 1st SPICE Index 29/11/2007 Recall Period - N/A

Acute - SPICE Basic Health Values 29/11/2007 Recall Period - N/A

=====

Ann Lawson Date: 21/11/2007

LMP June, Wants to discuss meds to reintroduce periods.

=====

Automatically Generated by Join

Clinical / User Markers:

Patient added from joiner practice.

=====

Dr K Thompson Date: 27/04/2007

Acute Prescriptions:

Mometasone Furoate - 140 Dose Aqueous Nasal SPRAY 50MCG/DOSE 1 Puff - Daily 1

Amoxicillin - CAPS 250MG 1 Cap - 3 times daily 21

Aluminium Chloride Hexahydrate - APPL 20% Apply - At night 1

=====

Clinical / User Markers:

Depo-provera injection given - -

=====

Acute Prescriptions:

Depo-Provera - Contraceptive Prefilled Syringe 1ml INJ 150MG/ML - 1

=====

Dr K Thompson Date: 07/11/2006

Acute Prescriptions:

Levonelle 1500 - TABS 1.5MG 1 Tab - Daily 1

=====

=====

Summary Sheet: Patient Transfer

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Thomson, Kay
DoB: 12/07/1984**Report Valid On 08/06/11 09:05**The Health Centre
Page number 12

Dr K Thompson Date: 14/07/2006

Acute Prescriptions:

Amoxicillin - CAPS 250MG	1 Cap - 3 times daily	21
Co-Codamol - 30mg/500mg CAPS	2 Caps - As directed	100

=====

Dr K Thompson Date: 26/01/2006

=====

Clinical / User Markers:

Urine pregnancy test - - negative

=====

Dr K Thompson Date: 16/01/2006

=====

Dr K Thompson Date: 16/01/2006

Acute Prescriptions:

Niquitin - 21mg/24 Hours Step One Clear PATCH	Apply - Daily	14
---	---------------	----

Disease Protocol Sessions:

Acute - 1st SPICE Index	16/01/2006	Recall Period - N/A
-------------------------	------------	---------------------

Acute - SPICE Basic Health Values	16/01/2006	Recall Period - N/A
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=====

=====

Clinical / User Markers:

Current smoker - -

Smoking cessation advice - -

Acute Prescriptions:

Aluminium Chloride Hexahydrate - APPL 20%	Apply - At night	1
Aluminium Chloride Hexahydrate - APPL 20%	Apply sparingly - Daily	1

Disease Protocol Sessions:

Acute - 1st SPICE Index	16/01/2006	Recall Period - N/A
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Summary Sheet: Patient Transfer

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Thomson, Kay
DoB: 12/07/1984

Report Valid On 08/06/11 09:05

The Health Centre
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Acute - SPICE Basic Health Values 16/01/2006 Recall Period - N/A

=====

Dr Farida Khan Date: 25/08/2003

Acute Prescriptions:

Levonelle 2 - Levonorgestrel 750mcg TABS 1 Tab - Twice daily 2

=====

Migrated Data

Clinical / User Markers:

Pat. GP7B/GP8B card from HB - -

=====

=====

Appointments List:

Joanna McDonald	Mar 25 2011 11:15AM	ethnicity needed
Dr S J Cattanaach	Oct 13 2010 2:20PM	
Dr K Thompson	Jun 21 2010 10:20AM	
Dr M Martins Da Silva	Jun 1 2010 3:30PM	
Dr K Thompson	Dec 23 2009 3:10PM	
Dr K Thompson	Dec 22 2009 9:20AM	
Dr K Thompson	Nov 24 2009 3:40PM	
Dr S J Cattanaach	Nov 10 2009 3:40PM	bus was late
Dr Sandra Wilson	Nov 4 2009 10:40AM	
Dr S J Cattanaach	Aug 19 2009 3:30PM	? swine flu - sore throat, sore head, vomiting and shivery. 01383 512028 HB
Dr Sandra Wilson	Jul 20 2009 2:40PM	
Dr K Thompson	Jul 1 2009 3:30PM	
Marion Robertson	Jan 14 2009 2:00PM	depo injection
Dr M Martins Da Silva	Sep 8 2008 4:10PM	
Dr M Martins Da Silva	Aug 11 2008 4:40PM	
Marion Robertson	Jul 22 2008 4:45PM	depo inj
Dr K Thompson	Jun 18 2008 11:10AM	
Ann Lawson	Jun 18 2008 9:05AM	07544329639 wants to stop smoking can you help
Dr K Thompson	May 21 2008 10:10AM	mg next on list her daughter

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Dr K Thompson	May 7 2008 9:50AM	
Ann Lawson	Mar 19 2008 8:30AM	07891685759 want rubella blood test? mg
Ann Lawson	Feb 19 2008 8:30AM	07891 685 759 Morning After Pill
Dr K Thompson	Nov 29 2007 10:20AM	was in forgot to report in
Dr K Thompson	Nov 23 2007 3:00PM	
Ann Lawson	Nov 21 2007 8:50AM	07891 685 759 Going to be egg doner in January needs it sorted out this week
Dr S J Cattanach	Nov 20 2007 10:20AM	

Last 4 Clinical Notes

Date	Clinical Notes
12/08/2010	attended midwife - 38+ = 38cm. no sample 120/60 FMF FH - 3/52 f/park (dw)
08/07/2010	33 weeks well a/n check satis ANC 4 weeks m.s.
21/06/2010	neck and leg cramps , 38 weeks pregnant, FROM in neck 101/65 analgesia , line 3 weeks from 15 th june neck / leg cramps
15/06/2010	SCCRS Exclusion received: 10/06/2010 07:41:37; Exclusion Code: 908S. ; Exclusion Reason: Defaulter ; Exclusion End Date: 08/09/2012 00:00:00 ; Exclusion Closed: 0 ; Exclusion Extended: 0

Palliative Care

Associates

Title	Forename	Surname	Relationship	Relationship Type
-------	----------	---------	--------------	-------------------

Associate Of

Title	Forename	Surname	Relationship	Relationship Type
-------	----------	---------	--------------	-------------------

Clinical Values

Date	Value Type	Value
12/08/2010	Diastolic	60
12/08/2010	Systolic	120
15/04/2010	Diastolic	60
15/04/2010	Systolic	100
29/11/2007	Diastolic	76
29/11/2007	Diastolic	76
29/11/2007	Systolic	112

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The Health Centre

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16/01/2006	Height	1.61
16/01/2006	Weight	61
16/01/2006	Diastolic	54
16/01/2006	Systolic	119

F3 Clinical Notes

Date	F3 Clinical Notes
12/08/2010	attended midwife - 38+ = 38cm. no sample 120/60 FMF FH - 3/52 f/park (dw)
08/07/2010	33 weeks well a/n check satis ANC 4 weeks m.s.
21/06/2010	neck and leg cramps , 38 weeks pregnant, FROm in neck 101/65 analgesia , line 3 weeks from 15 th june neck / leg cramps
15/06/2010	SCCRS Exclusion received: 10/06/2010 07:41:37; Exclusion Code: 908S. ; Exclusion Reason: Defaulter ; Exclusion End Date: 08/09/2012 00:00:00 ; Exclusion Closed: 0 ; Exclusion Extended: 0
09/06/2010	Pt called for appt with GP - pains in les and knees, cramps during the night. Advised to call FPH and speak to midwife - lw
02/06/2010	MSU to lab (dw)
01/06/2010	works at supermarket. lifting newspapers yesterday. last night onset low back pain. FMF 28/40. no urinary sx. urinalysis. + leuc only. MSU. self cert. see pm
15/04/2010	attended midwife BP100/60 FHH FMF Mat B1 urine no spec, FPH for anti D (dw)
17/02/2010	UTI on booking lx.
10/11/2009	Several months of low mood,tearful,lack of motivation,wants to stay in bed,sleep disturbance. Occasional thoughts she would be better off not here. Young daughter at home. Single Mum.Supportive family. Imp clinical depression. Try fluoxetine. Med 3 2weeks "depression" Rev 4weeks.
24/08/2009	Informed patient she needs to ask Travel Company for Holiday Cancellation Form - SC/CA
21/08/2009	Pt called re swine flu - supposed to be going to New Zealand today, had to cancel flight - could she have letter to say that she could not fly as she has swine flu so she can get money back? - lw
19/08/2009	3/7 headache,sore throat,myalgia,fever,sweats,nausea,no appetite,occas stabbing abdo pain but no diarrhoea or vomiting. dry cough. No underlying health problems. Good story for swine flu,discussed possibility of other viruses causing same sx. Rx tamiflu.Discussed care of 6yo daughter-advised better for family member to care for her or her Dad until she is better.
20/07/2009	dna dr wilson
15/07/2009	Letter sent to collect script & TMA with Practice Nurse for Hep B vac re Acc/Emerg. attendance 12th July - CA
15/07/2009	NOT SEEN. See A&E letter 12/7/09. Is going to require accelerated course Hep B. Had 1st dose 12/7/09, needs one mid Aug 09, then mid Sept 09 & booster July 10
10/06/2009	Reminder letter sent to pt requesting permission to copy all medical records for Basten Sneddon Solicitors HB
01/05/2009	Letter asking if agreeable to ALL medical records being copied for Basten Sneddon - CA
10/02/2009	DNA SCC mg

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Thomson, Kay**DoB: 12/07/1984****Report Valid On 08/06/11 09:05**

The Health Centre

Page number 16

20/01/2009	Smoking Cessation - patches causing skin problem. Wants to try Champix. Smokes 20 per day. Side effects of Champix discussed. Request starter pack (prescription done) ED
14/01/2009	In for depo provera, not keen to have it as has put on one stone since restarting it. Given family planning leaflet, thinking about having coil inserted. Also referred to smoking cessation clinic.
09/01/2009	NHS 24 contact filed mg
08/09/2008	attended t/room nurse - asked to give depo-provera 150mg/ml right buttock, due 1-12-08 (dw)
08/09/2008	In for depo, wants to use this as forgetting to take the pill, period started yesterday. to be given in TR by LD. refer SCC
11/08/2008	impetigo on L nostril. rx. worsening statement
22/07/2008	In for depo provera, not had it for years.No script. Period finished at weekend. Advised she needs to see GP to restart this.
18/06/2008	req contactation . 125/ 80 . micro 30
18/06/2008	Needs contraception, been part of egg donation, also looking for smoking cessation.
21/05/2008	undergoing injections and nose spray for pre retrieval of eggs TATT . stress line 2 weeks .
07/05/2008	not sleeping . very stressed . mood low . forgetting things . zolpidem 10 mg . line 2 weeks stress
26/03/2008	PHLEBOTOMIST - RUBELLA CHECK - CA
19/03/2008	Egg donation being done in glasgow, rubella check missed from bloods. Advised make appt with phlebotomist.
19/02/2008	No reply left message.
29/11/2007	start OCP as per clinic in Glasgow . donating eggs to cousins. had depo provera in april . no period since !
21/11/2007	LMP June, Wants to discuss meds to reintroduce periods.
30/07/2007	Automatically Generated by Join
08/08/2000	Migrated Data

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Operational Division
Victoria Hospital

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



COMMUNITY GYNAECOLOGY CLINIC

Consultant: Dr D R Urquhart

THOMSON KAY 6 Hillview Main Street, Hill of Beath COWDENBEATH KY4 8DP	V306915B 12/07/1984 1207840483
---	--

Dear Dr Yusuf, Crossgates

Your patient attended the termination clinic 10 / 1 / 12 with a request for pregnancy termination. Gestation has been estimated at 12.4 weeks. She has been counselled and arrangements have been made to terminate the pregnancy.

The procedure will be carried out by:

- ☐ Suction termination on / /
- ☒ RU486 and Prostaglandin on 18 / 1 / 12 & 19 / 1 / 12

She has been fully counselled in respect of contraception and has chosen:

Method	Follow-up Required	Method Chosen
COC	3/12	()
POP	3/12	()
Depo-Provera	10/52	()
Nexplanon	6/52	()
IUD	6/52	()
Mirena IUS	6/52	()
Sterilisation	Refer to GP	()

90 reversed

She has been advised to attend the Sexual Health clinic or GP for follow-up care.

Yours sincerely

Quinn Tawell

Community Gynae Clinic

Chief Executive Mr John Wilson
Victoria Hospital is part of The Operational
Division of NHS Fife

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**Operational Division
Victoria Hospital**

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



THOMSON V306915B
KAY
6 Hillview
Main Street, Hill of
Beath 12/07/1984
COWDENBEATH 1207840483
KY4 8DP

Dear Dr *Young, C. Coates*

The above patient was admitted to ward 32 on *11/12* under the care of
Dr D R Urquhart and underwent medical termination of pregnancy.

- ☒ The products of conception were passed
☐ The products were not seen / incomplete and she has been given an appointment
for EPC follow-up on She is aware of the importance of this
follow-up.
☐ Evacuation of uterus was performed under GA

Chlamydia Result

- ☒ Negative
☐ Positive, antibiotics were administered prior to discharge and we have
recommended that she attend GUM for follow-up.
☐ Equivocal - action taken
☐ Declined

Blood Group *O Neg* Anti D Given ☒ YES / NO

Chosen Method of Contraception: *IUD - Appt to be made*

Immediate Supply: Subsequent provision:

Hospital / FPC ☒ GP FPC / GP / Other

Yours sincerely

Name (Block Capitals) *DRU*

Designation *Cons Cst*

Chief Executive Mr John Wilson
Victoria Hospital is part of The Operational Division

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=====

Adastra Call #: 64402 Received NHS24: 30-Mar-2012 23:11

Full cover

Patient's Name :Kay Thomson

Community Health Index:1207840483

Date of birth: 12-Jul-1984 (Age: 27 years)Sex: Female | Received PCES: 23:28

Home Address: 6 Hillview Main Street, Hill Of Beath | Passed : 23:29

 Cowdenbeath KY4 8DP (NT:150 900) | Advised : __:__

Current Address: ()

Tel No: 01383 242460 Origin: Other | Arrived : 01:21

Urgency: Within 60 Mins (Ur Type: Nurse Treatmen | Departed : 01:42

Consulted by: Matheson, A Own Doctor: Downie, Frank D H

Message received:

HAD KIDNEY PAIN FOR 1 WEEK, SEEN GP TODAY AND WAS TOLD HAD KIDNEY INFECTION.
PT STILL IN PAIN. NO RELIEF FROM PAIN KILLERS, BEEN VOMITING,SWEATING, HIGH
TEMP. PAIN DOWN LEFT SIDE AND BACK, SORE WHEN BREATHE. ((Non-Clinical User)
(Cardonald))

KIDNEY PAIN ALL DAY SEE A/V

Clinical summary created by: (Nurse Advisor) (Western Isles) [30/03/2012
23:27:09]

KIDNEY INFECTION FOR TODAY AND SAW GP TODAY COMMENCED ON ANTIBIOTIC FOR
PROBABLE INFECTION IN LEFT KIDNEY. PAIN SEVERE, UNABLE TO KEEP ANALGESICS D

NHS24 Ref. no.: 11439573

NHS24 Triage Begin 30-Mar-2012 23:16 NHS24 Triage End 30-Mar-2012 23:27

NHS24 Triaged by : Carragher, Pat

NHS24 Clinical Summary:

Clinical summary created: 30-Mar-2012

Advisor) (Western Isles) [30/03/2012 23:27:09]

KIDNEY INFECTION FOR TODAY AND SAW GP TODAY COMMENCED ON ANTIBIOTIC FOR
PROBABLE INFECTION IN LEFT KIDNEY. PAIN SEVERE, UNABLE TO KEEP ANALGESICS
DOWN. OUTCOME SPEAK TO DOCTOR 1 HOUR

NHS24 Outcome: Dr to phone patient within 1 Hr

Advised : 23:40 Advised by : Carragher, Pat

Time of Visit/Base 01:21 Clinician Name: Matheson, A

Clinical notes:

Triage - HISTORY

Tel consult - Renal angle pain over the last few days - worse in last 18
hours. S/B GP today - "UTI" - commence co-amoxiclav 625mg tid. Agrees to
further review tonight - and will attend PCEC at QMH

Triage - Examination

Triage - Diagnosis

Triage - Treatment

Outcome - HISTORY

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Page 2 of 2

Tel consult - Renal angle pain over the last few days - worse in last 18 hours. S/B GP today - "UTI" - commence co-amoxiclav 625mg tid. Agrees to further review tonight - and will attend PCEC at QMH
Consultation: As above, started vomiting approx 16.00hrs x 3 episodes since, last approx 22.00hrs & feels vomiting making Lt sided back pain worse, constant 8-9/10 on pain scale. NKDA.

Outcome - Examination

T 37.8C, P 105bpm, BP 112/66, SP02 98% on air. Chest - good bil AE all zones, no crackles or wheeze heard. Abdomen soft, tender LLQ & Lt flank area, no rebound or guarding, BS active. Urinalysis - Leucocytes +++, Protein ++, Blood ++. HCG - negative.

Outcome - Diagnosis

Lt Pyelonephritis.
Lt Pyelonephritis.

Outcome - Treatment

- (1) MSU to lab.
- (2) Stemetil 12.5mgs/1ml given IM Rt Gluteal (A1046, exp 06/16) + Voltarol 75mgs/3ml given IM Lt Gluteal (S1981, exp 10/13) at 00.45hrs, observed in waiting area.
- (3) Good effect from analgesia, pain score reduced to 4/10 & feeling more settled. T 37.2C Lt ear, Rt ear 36.8C, P 92bpm.
- (4) Drinking in centre & no further vomiting so keen to go home with partner & observe meantime but advised low thresh hold for return as may require admission if symptoms change or worsen as discussed. Advised re fluids & to continue with prescribed ABX's.
- (5) To contact own GP if not resolving & for result of MSU.

Prescription

Followups:

Call Back If Required:

Patient To Contact Surgery:

=====

#64402 - DOB:12-Jul-1984 (Age: 27 years) - Kay Thomson

=====

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Page 1 of 2

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=====
Adastra Call #: 64901                      Received NHS24: 31-Mar-2012 22:48
Full cover

Patient's Name           :Kay Thomson
Community Health Index:1207840483
Date of birth:          12-Jul-1984 (Age: 27 years)Sex: Female | Received PCES: 23:06
Home Address:           6 Hillview Main Street, Hill Of Beath | Passed           : 23:12
                        Cowdenbeath KY4 8DP (NT:150 900)      | Advised            : __:__
Current Address:
                        ()
Tel No:                  01383 242460      Origin: Other      | Arrived           : 01:09
Urgency:                  Within 4 Hours    Type: Nurse Treatmen | Departed          : 01:26
Consulted by:             Matheson, A      Own Doctor: Downie, Frank D H
=====
Message received:
PT STARTED ANTIBIOTICS YESTERDAY FOR KIDNEY INFECTIONS - PT CALLED LAST NIGHT
SEEN AT HOSPITAL - GIVEN INJECTION FOR PAIN AND INJECTION FOR VOMITING.
ADVISED TO CALL BACK IF NO IMPROVMENT. ( (Non-Clinical User) (Cardonald) )

---
LEFT SIDED PAIN - 24 HOURS SEE AV
---
Clinical summary created by: (Nurse Advisor) (Glasgow) [31/03/2012 23:06:26]
LEFT SIDED FLANK PAIN FOR WORSE 1 DAY AND STARTED SEVERAL DAYS AGO SAW OWN
GP FRIDAY AND C/O CO AMOXICLAV FOR KIDNEY INFECTION SEEN AGAIN AT OOH LAST
NIGHT RE PAIN
=====
NHS24 Ref. no.: 11446479
=====
NHS24 Triage Begin 31-Mar-2012 22:51      NHS24 Triage End 31-Mar-2012 23:06
NHS24 Triaged by : Triage Nurse (Nurse Advisor) (Glasgow)
=====
NHS24 Clinical Summary:
Clinical summary created: 31-Mar-2012
(Nurse Advisor) (Glasgow) [31/03/2012 23:06:26]
LEFT SIDED FLANK PAIN FOR WORSE 1 DAY AND STARTED SEVERAL DAYS AGO SAW OWN
GP FRIDAY AND C/O CO AMOXICLAV FOR KIDNEY INFECTION SEEN AGAIN AT OOH LAST
NIGHT RE PAIN AND VOMITING IM INJECTIONS GIVEN NO FURTHER VOMITING OR
NAUSEA BUT WORSENING PAIN HAS TAKEN PARACETAMOL AND KAPAKE STATES PASSED A
BLACK STOOL TODAY PCEC 4HR HUB TO ARRANGE

NHS24 Outcome: PCEC within 4 Hrs
=====
Advised : 22:51                      Advised by : Triage Nurse (Nurse Advisor)
=====
Time of Visit/Base 01:09      Clinician Name: Matheson, A
=====

Clinical notes:

Triage - HISTORY

Triage - Examination

Triage - Diagnosis

Triage - Treatment

Outcome - HISTORY
Hx & triage noted.
See previous consultation number 64402. Back pain settled after Stemetil

```

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Page 2 of 2

12.5mgs + Voltarol 75mgs/3mls at 00.45hrs, slept till 6am & no further vomiting but pain persists despite Nurofen 400mgs at 10.30am + Co-codamol 30/500mgs x 2 tablets at 16.50. No dysuria but "pain at bladder area when needs to pass urine". Passed "black stool earlier". NKDA.

Outcome - Examination

T 38.1C, P 115bpm, BP 122/66, SP02 100% on air. Abdomen soft, tender LLQ & Lt flank area, no rebound or guarding, BS heard.

Outcome - Diagnosis

Ongoing Pyelonephritis

Ongoing Pyelonephritis

Outcome - Treatment

D/W Coordinator, will kindly see Admissions Unit 1 VHk.

Many thanks for seeing Kay.

Prescription

Followups:

Sent To Hospital:

=====

#64901 - DOB:12-Jul-1984 (Age: 27 years) - Kay Thomson

=====

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Dept of MEDICAL MICROBIOLOGY and INFECTION CONTROL

FIFE AREA LABORATORY, HAYFIELD RD, KIRKCALDY Direct Tel:01592 643355 Ext 8497

Surname : THOMSON D.o.B. :12 Jul 1984 Sex : F
Forename : Kay Case No:1207840483 CHI No :1207840483
Address : 6 HILLVIEW MAIN STREET
Post Code : KY4 8DP

Report to : Dr F.D.H. DOWNIE Origin:Crossgates Surgery
: Crossgates Medical Practice
: 94 Main Street

Clin. det.: C/O LT FLANK + LLQ PAIN, VOMITING NOW
: U/A: LEUC++, PROT++, BLD++
: CO-AMOXICLAV

Lab Number: M6122944G Specimen:Mid stream urine Date taken: 03 Apr 2012
Time taken:01:00

Urine Culture
No growth.

Copy to :

Received : 03 Apr 2012 Reported : 04 Apr 2012 Auth :

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Victoria Hospital
Hayfield Road
Kirkcaldy
Fife
KY2 5AH

Department of Gynaecology
Tel: 01592 643355 ext 28643
<http://www.nhsfife.scot.nhs.uk>



Kay Thomson
6 Hillview
Main Street, Hill Of Beath
Cowdenbeath
Fife
KY4 8DP

ADMINISTRATIVE LETTER



CHI: 1207840483
Hospital ID: V306915B

Letter ID: 204201

Date: 23/05/2012

Dear Kay Thomson

Kay Thomson, 6 Hillview, Main Street, Hill Of Beath, Cowdenbeath, Fife, KY4 8DP

Date of Birth: 12/07/1984

I am pleased to advise you that your recent cervical smear was negative.

You should have your next smear in 3 years time.

Yours sincerely

Dr Jane L Macnab
Consultant Gynaecologist

This document has NOT been verified.

✓ Cc (P) Dr MT Yousaf, Crossgates Medical Practice, 94 Main Street, Crossgates, Fife, KY4 8DF

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Extension: .tif
Pages:

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Mother, Maria Thomson
01592 861513

CROSSGATES MEDICAL PRACTICE
DOCTOR REQUESTS + ACTION FORM

DATE: 22/8/12	TIME CALL RECEIVED: 8.25
TIME CALL PASSED TO DOCTOR:	
CALL PASSED TO DR. D	
PASSED BY L	
PATIENT'S NAME: Kay Thomson	DOB: 12/7/84
ADDRESS: 7 Main St	TEL NO: 242 460
HOB 07588310033	
DETAILS OF REQUEST: Cant cope, panic panic attack, ? breakdown (Mother phoned @ daughters request)	
DETAILS OF OUTCOME:	RECEPTIONIST: PLEASE INITIAL BEFORE FORM IS FILED AND AFTER ALL ACTION HAS BEEN DEALT WITH

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Pages:

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JB

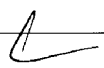
Date of meeting 4th April 2012

FIFE UROLOGY/ONCOLOGY
MULTIDISCIPLINARY MEETING



Referral date	
Urgency	
Target date	

GP: Dr Yousaf
Health Centre
CROSSGATES

Patients ID Label Kay Thomson 6 Hillview Main Street, Hill of Beath COWDENBEATH, KY4 8DP V306915B 12/07/1984 CHI: 1207840483		Consultant L McLoman	Organ Involved:	Grade:
Significant investigations / procedures		Staging Investigations		
		MRI		Extra Capsular Extension Y / N / Susp Seminal Vesicle Involvement Y / N / Susp Nodal Involvement Y / N / Susp
		Bone scan		
		CT	3/4	
		USS	2/4	
		IVU		
Clinical Staging (consultant to complete)		Significant Serum Results (PSA,HCG,AFP etc)		
T	N	M		
Pathology				
Type:				
Grade	pT	pN	pM	Other relevant information
	Left	Prostate	Right	Current in-patient V54
Management				
Other Investigations: ? Focal pyelonephritis				
Treatment Decision:				
Interval scan in 3 months with contrast.				
Follow Up:				
Advice to GP:				
Signature: 				
A = Path, Imaging + management		C = management only		X = Non cancer
B = Path or Imaging + management		Note only = for audit purposes		

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DATE OF ADMISSION:

1 / 14 / 12

DATE OF DISCHARGE:

1 / 1

IMMEDIATE DISCHARGE & PRESCRIPTION FORM

Hospital Site: VHLK

Page 1 of 1

(Please use BLOCK CAPS when completing this form)

Re: Mr/Mrs/Miss/Ms	DOB:	TO: GP Forename:
Fore: HOMSON	V306915B	GP Surname: Downie.
Addr: KAY		GP Address: Crossgates MP
5 Hillview		
Main Street, Hill of	12/07/1984	
Beath	1207840483	
COWDENBEATH		
Post: KY4 8DP		GP Postcode:
CHI:		Community Pharmacy:
This patient was admitted to hospital under the care of:		
Consultants Name: Chalmers		Specialty: A medicine
Discharged from Ward: VSL4	Reason for Admission/presenting complaint: Left sided abdominal pain	
Mode of Admission: Elective ☐ Emergency ☒ Transfer ☐		Source of admission: GP ☐ Self ☐ Out of Hours ☐ Other: ☐
Principal Diagnosis: Left kidney infection		Legal Status:

Other Conditions:

1
2
3
4
5

Significant Operations/Procedures: Yes ☐ No ☒	
1. Date:	
2. Date:	
Relevant Investigations: Yes ☒ No ☐	Comments: Bloods, Abdominal USS.
Complications: Yes ☐ No ☒	Comments:

Patient Information discharge summary given to patient and/or carer or relative: Yes ☐ No ☐**Follow-up Arrangements**

8/12 OP CT ABDU
12/12 OPC Mx.

Sickness Certificate Issued: Yes ☐ No ☒	Duration of sickness certification:
Results awaited: Yes ☒ No ☐	If Yes, please specify:
Letters to follow: Yes ☒ No ☐	Comment:
Hospital Review: Yes ☐ No ☐	If Yes, please specify:

MS2385(1)

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Forename: <u>Kay</u>	Address:	DOB:
Surname: <u>Thomson</u>	Ward: <u>AMAU 54</u>	CHI No / Hospital No: <u>1207840483</u>

Medicines on Discharge

Medicine Form & Strength	Dose	Directions for Administration	Continuous/ Course Length	Quantity Supplied
PARACETAMOL	1g	QDS QDS	LT	100
CODEINE	60mg	QDS	LT	28
DICLOFENAC	50mg	TDS	LT	28
CIPROFLOXACIN	500mg	BD	5 days	10

Medicine Continuation Sheet attached: Yes ☐ No ☐Medication currently prescribed by Day Hospital: Yes ☐ No ☐Dispense in Compliance Aid Yes ☐ No ☐

Type of compliance aid before admission:

Significant Changes to Medication from the Point of Admission

Medicine Form & Strength	Stopped/Started/ Changed	Details of Change and Reasons

Additional information attached: Warfarin sheet Yes ☐ No ☒ Other: Yes ☐ No ☒ Please specify:Adverse Reactions/Allergies: Yes ☐ No ☒ Detail:

Comments:

Signature: [Signature] Date: 6/5/12

Name (in CAPS): L-HAW

Contact No. for enquiries: 20014

Designation: Consultant/Registrar ☐ SHO ☐ JHO ☒ Other ☐

Pharmacy Assessment

By Pharmacist: [Signature]

Dispensed By: [Signature]

Check: [Signature]

Date: 5/6/12

Received On

Ward By:

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Victoria Hospital
Hayfield Road
Kirkcaldy
Fife
KY2 5AH

Department of Urology
Tel: 01592 643355 Ext: 21754
<http://www.nhsfife.scot.nhs.uk>



Dr MT Yousaf
Crossgates Medical Practice
94 Main Street
Crossgates
Fife
KY4 8DF

DISCHARGE LETTER



CHI: 1207840483
Hospital ID: V306915B
Our Ref: CC/AMK

Letter ID: 184305

Date: 16/04/2012

Dear Dr Yousaf

Kay Thomson, 6 Hillview, Main Street, Hill Of Beath, Cowdenbeath, Fife, KY4 8DP

Date of Birth: 12/07/1984

Date of Admission: 01/04/2012

Date of Discharge: 06/04/2012

This lady was admitted under the physicians on 1 April with lower backache. This lady was taken over to the Urology side on 3 April. She had an ultrasound scan which was not confirmatory at all but she had a subsequent CT which showed a 4 cm mass in the left kidney, which could be either a renal cell tumour or a TCC or an abscess. This lady was discussed in the MDT meeting and the consensus was that this was some sort of focal pyelonephritis and she needs an interval scan in 3 months' time with contrast. She was discharged home once she got a lot better on antibiotics and her pain was also very well controlled. She was sent home with a CT scan to be done in 2 months' time and to be seen in the clinic in 3 months.

Yours sincerely

Chinnaswamy Chezhan
Locum Consultant Urological Surgeon
(on behalf of Ms Liza McLornan)

Authorised on 19/04/2012 09:32:48 by Chinnaswamy Chezhan.

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Department of Urology
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<http://www.nhsfife.scot.nhs.uk>



Dr MT Yousaf
Crossgates Medical Practice
94 Main Street
Crossgates
Fife
KY4 8DF

CLINIC LETTER



CHI: 1207840483
Hospital ID: V306915B
Our Ref: CC/AMK

Letter ID: 266318

Dear Dr Yousaf

Clinic Date: 05/07/2012

Date: 05/07/2012

Kay Thomson, 6 Hillview, Main Street, Hill Of Beath, Cowdenbeath, Fife, KY4 8DP

Date of Birth: 12/07/1984

I reviewed this pleasant young lady. As you know, this lady was admitted with sepsis and she was found to have a 4 cm mass in the left kidney with the suspicion of either a tumour or possible focal pyelonephritis. She underwent a repeat CT scan with contrast on 20 June 2012. I am pleased to inform you there was considerable improvement in the appearance of the upper pole of the left kidney so the appearance is in keeping with a resolving focal pyelonephritis with a small residual scarred area.

I told her the good news today and I shall re-discuss the CT at our MDT meeting. She has had no UTIs before or after the attack and I would be grateful if you could start her on Ciprofloxacin if she develops any of these symptoms again.

Yours sincerely

Chinnaswamy Chezhan
Locum Consultant Urological Surgeon
(on behalf of Ms Liza McLoman)

Authorised on 06/07/2012 10:11:57 by Chinnaswamy Chezhan.

(P) Mrs Julie Whyte, MDT Co-ordinator, Queen Margaret Hospital, DUNFERMLINE, KY12 0SU

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Victoria Hospital
Hayfield Road
Kirkcaldy
Fife
KY2 5AH

Department of Urology
Tel: 01592 643355 Ext: 21754
<http://www.nhsfife.scot.nhs.uk>



Kay Thomson
6 Hillview
Main Street, Hill Of Beath
Cowdenbeath
Fife
KY4 8DP

ADMINISTRATIVE LETTER



CHI: 1207840483
Hospital ID: V306915B
Our Ref: CC/AMK

Letter ID: 276636

Date: 18/07/2012

Dear Kay Thomson

Kay Thomson, 6 Hillview, Main Street, Hill Of Beath, Cowdenbeath, Fife, KY4 8DP

Date of Birth: 12/07/1984

Further to your clinic appointment, I have discussed your case at the MDT meeting and your infections seem to have improved and they don't want anything else to be done for it. As previously discussed, I would be grateful if you could collect antibiotics from your GP in case you develop urinary infections again. Thank you.

Yours sincerely

Chinnaswamy Chezian
Locum Consultant Urological Surgeon
(on behalf of Ms Liza McLornan)

Authorised on 19/07/2012 11:51:38 by Chinnaswamy Chezian.

✓ (P) Dr MT Yousaf, Crossgates Medical Practice, 94 Main Street, Crossgates, Fife, KY4 8DF

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JB		Date of meeting 11 th July 2012		FIFE UROLOGY/ONCOLOGY MULTIDISCIPLINARY MEETING			
Referral date		Urgency		Target date		GP: Dr Yousaf Health Centre CROSSGATES	
Patients ID Label Kay Thomson 6 Hillview, Main Street Hill of Beath COWDENBEATH, KY4 8DP V306915B 12/07/1984 CHI: 1207840483		Consultant Ms. L McLoman		Organ Involved: Kidney		Grade: X	
Significant investigations / procedures Clinical Staging (consultant to complete)  T N M Pathology Type: Grade pT pN pM Left Prostate Right		MRI		Staging Investigations Extra Capsular Extension Y / N / Susp Seminal Vesicle Involvement Y / N / Susp Nodal Involvement Y / N / Susp			
		Bone scan					
		CT		18/6			
		USS					
		IVU					
				Significant Serum Results (PSA,HCG,AFP etc) Other relevant information Follow Up TBA			
Management Other Investigations: Focal pyelonephritis – improved							
Treatment Decision:							
Follow Up:							
Advice to GP:							
Signature: 							
A = Path, Imaging + management		C = management only		X = Non cancer			
B = Path or Imaging + management		Note only = for audit purposes					

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CROSSGATES MEDICAL PRACTICE

Dr. M. Tahir Yousaf BSc.MB.ChB.
Dr. Frank D. H. Downie MB.ChB.

94 MAIN STREET,
CROSSGATES,
FIFE, KY4 8DF
Tel: 01383 511398
Fax: 01383 611586

Miss Kay Thomson
6 Hillview Main Street
HILL OF BEATH
COWDENBEATH, FIFE
KY4 8DP

6 Hillview

Dear Miss Thomson,

I would like you to come for a review appointment with me. An appointment has been made for you on 27/09/2012 at 10.10am.

Please could you fill in the attached form and bring it with you to your appointment.

If you have any problems with this date or time, please do not change it with the reception staff, but ask to speak to Crystal who will try to arrange another suitable appointment for you.

Yours Sincerely,

Dr Downie

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PATIENT HEALTH QUESTIONNAIRE (PHQ-9)

NAME: Kay Thomson

DATE: 23.08.2012

Over the last 2 weeks, how often have you been bothered by any of the following problems?
(use "✓" to indicate your answer)

	Not at all	Somewhat	More than half the days	Nearly every day
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed, or hopeless	0	1	2	3
3. Trouble falling or staying asleep, or sleeping too much	0	1	2	3
4. Feeling tired or having little energy	0	1	2	3
5. Poor appetite or overeating	0	1	2	3
6. Feeling bad about yourself—or that you are a failure or have let yourself or your family down	0	1	2	3
7. Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8. Moving or speaking so slowly that other people could have noticed. Or the opposite—being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
9. Thoughts that you would be better off dead, or of hurting yourself in some way	0	1	2	3

add columns: 1 + 4 + 15

(Healthcare professional: For interpretation of TOTAL, please refer to accompanying scoring card.) TOTAL: 20

10. If you checked off any problems, how difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?

Not difficult at all _____
Somewhat difficult _____
Very difficult ☒ _____
Extremely difficult _____

PHQ-9 is adapted from PRIME MD TODAY, developed by Drs Robert L. Spitzer, Janet B.W. Williams, Kurt Kroenke, and colleagues, with an educational grant from Pfizer Inc. For research information, contact Dr Spitzer at rls8@columbia.edu. Use of the PHQ-9 may only be made in accordance with the Terms of Use available at <http://www.pfizer.com>. Copyright ©1999 Pfizer Inc. All rights reserved. PRIME MD TODAY is a trademark of Pfizer Inc.

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Registration Details - Patient No: 7368

Personal details...		Address details...	
Sex	F	Post Code	KY4 8DP
Surname	Thomson	House Name Flat No	6 Hillview
Previous Surname		No and Street	Main Street
Forenames	Kay	Village	HILL OF BEATH
Calling Name	Kay	Town	COWDENBEATH
Date of birth	12/07/1984	County	FIFE
Title	Miss		
Birth Surname			
Marital Status	Single		
Ethnic Origin	(White) Scottish		

HA/HB Details...		Contact details...	
Trading partner	Fife	Home Tel No	242460
Registered GP	Dr F D H Downie	Work Tel No	
Usual GP	Dr F D H Downie	Mobile Tel No	
Residential Inst		E Mail Address	
Branch Surgery			
CHI Number	1207840483		

Practice Information...		Distances	
Dispensing	N	Rural Mileage	
Hospital Number		Blocked Special	
Records At	Crossgates Medical Practice	Walking Quarters	
NHS Number	426/84/056		

Further Information		Upload Consent	
Long/Short stay or Dead		SCI-DC Consent	Implied Consent (default)
Date of registration	16/06/2011		
Next of Kin			

AMS/CMS Details		ECS (GP Summary) Consent	
AMS Consent	Yes	Patient Consent	Implied Consent (default)
CMS Status	Not Registered		
Pharmacy Details			
Compliance Check	No		

Medical Record

Problems

Active Problems		Authorised By	Code
16/04/2012	Multidisciplinary review FOCAL PYELONEPHRITIS - FOR REPEAT SCANS.	Mrs Yousaf	6AE

Past Problems		Authorised By	Code
23/08/2012	Depressive disorder NEC	Dr Downie	E2B
20/06/2012	Computerised tomograph scan resolving focal pyelonephritis with small residual scarred area	Miss Beveridge	567-3
04/04/2012	Computerised tomograph scan 4cm mass in left kidney - MDT meeting - probable focal pyelonephritis	Mrs Yousaf	567-3
03/04/2012	Other diagnostic ultrasound NON CONFIRATORY	Mrs Yousaf	585
01/04/2012	Emergency hospital admission lower back pain	Mrs Yousaf	8H2
18/01/2012	Termination of pregnancy NEC	Mrs Yousaf	7E086
21/08/2010	Spontaneous vaginal delivery Male	Miss Beveridge	L20-1
22/07/2003	Spontaneous vaginal delivery Female	Miss Beveridge	L20-1
05/03/1998	Overdose of drug Paracetamol	Miss Beveridge	SL-5
25/08/1995	Dog bite	Miss Beveridge	TE60
15/11/1988	Enuresis	Miss Beveridge	1A22

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Health Admin Problems		Authorised By	Code
Investigations		Authorised By	Code
03/04/2012	Urine culture (Source: LAB) .		46U..
03/04/2012	Cervical Cytology (Source: Manually filed) . Routine Recall -		4K22.
Values			
Date	Last Entry	Normal Range Indicator	Normal Range
18/03/2014	Blood pressure reading 108/64 mm Hg		
18/03/2014	Cigarette smoker 10 Cigarettes/day		>1
18/03/2014	O/E - weight 61 Kg		
18/03/2014	O/E - BP reading P84.		
23/08/2012	Patient health questionnaire (PHQ-9) score 23 /27		0-27
20/06/2012	Computerised tomograph scan resolving focal pyelonephritis with small residual scarred area		
03/04/2012	Urine culture		
03/04/2012	Cervical smear: negative Routine Recall -		
03/04/2012	Other diagnostic ultrasound NON CONFIRATORY		
Attachments		Authorised By	Code
None			
Alerts		Authorised By	Code
None			
Drug Allergies		Authorised By	Code
None			
Non Drug Allergies		Authorised By	Code
None			
Family History		Authorised By	Code
None			
Referrals		Authorised By	Code
01/04/2012	Emergency hospital admission lower back pain	Mrs Yousaf	8H2
06/01/2012	8HHV.: Referral for termination of pregnancy (SCI Gateway Referral)	Dr Yousaf	8HHV
Immunisations		Authorised By	Code
27/02/2012	Third DTP (triple)+polio vacc.	Miss Beveridge	65I3
01/11/1989	Booster DT(double)+polio vacc.	Miss Beveridge	65K4
02/02/1988	Measles/mumps/rubella vaccn.	Miss Beveridge	65M1
29/10/1985	[V]Measles vaccination	Miss Beveridge	ZV042
18/06/1985	Third DTP (triple)+polio vacc.	Miss Beveridge	65I3
04/12/1984	Second DTP (triple)+polio vacc	Miss Beveridge	65I2
16/10/1984	First DTP (triple)+polio vacc.	Miss Beveridge	65I1
Health Status			
03/04/2012	Cervical smear result Cervical smear: negative		
18/03/2014	Weight 61 Kg		
18/03/2014	Blood pressure reading O/E - BP reading		
18/03/2014	Blood pressure reading 108/64 mm Hg		
18/03/2014	Smoking Status Current smoker		
Other		Authorised By	Code

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Observations			
18/03/2014	Verbal advice about long acting reversible contraception	Dr Downie	8CAw1
18/03/2014	Advice about long acting reversible contraception	Dr Downie	8CAw
18/03/2014	Combined oral contraceptive	Dr Downie	6147
18/03/2014	Smoking cessation advice	Dr Downie	8CAL
18/03/2014	Current smoker	Dr Downie	137R
21/03/2013	Smoking cessation advice	Mrs Whyte	8CAL
21/03/2013	Current smoker	Mrs Whyte	137R
07/02/2013	Depression resolved	Miss Beveridge	212S
23/08/2012	Depression screening using questions	Miss Beveridge	6896
23/08/2012	On depression register	Dr Downie	9HA0
16/06/2011	Patient MRE received from HB priority=1	Mrs Hutchison	9125
10/06/2011	Did not attend priority=2	Mrs Bacon	9Ni
02/06/2011	Pat. GP7B/GP8B card from HB priority=1	UnknownUser	9124
01/06/2011	Current smoker priority=2	Mrs Hutchison	137R
01/06/2011	White Scottish priority=2	Mrs Hutchison	9S13
01/06/2011	Patient reg. form sent to HB priority=1	Mrs Hutchison	9123
21/08/2010	Notes summary on computer	Miss Beveridge	9344
20/10/1988	PMH - past medical history	Miss Beveridge	14-1
Not Known	Marital Status: Single	UnknownUser	1331

Consultations			
18/03/2014	<u>Dr F D H Downie at Crossgates Medical Practice</u>		
History	Would like to start on pill. Has had depo-provera last year but made her bleed for prolonged periods. Also bothered with PMT and feels this is a bit worse. LMP 2.5 weeks ago. Periods regular. No IMB. No PMH liver problems, DVT or lung clots. No FH of similar.		
Examination	O/E - BP reading P84. O/E - weight 61 Kg Blood pressure reading 108/64 mm Hg		
Social	Cigarette smoker 10 Cigarettes/day Current smoker		
Comment	Rx for COC with counselling. Considering IUCD. Discussed making appt at CASH.		
Medication	Rigevidon Tablets 63 tablet ONE TO BE TAKEN EACH DAY AS DIRECTED		
Additional	Smoking cessation advice Combined oral contraceptive Advice about long acting reversible contraception Verbal advice about long acting reversible contraception		
-	----		
23/08/2012	<u>Dr F D H Downie at Crossgates Medical Practice</u>		
Problem (FIRST)	Depressive disorder NEC		
History	Attended with partner. Mood been up and down for as long as she can remember. Goes for 2 days feeling good then another couple of days feeling low. Suicidal thoughts for a long time, but admits she wouldn't do anything because of her 2 kids. Has a drink on average once a week (at weekend). Had an argument with boyfriend after last drink and this is what has prompted her to contact GP.		
Examination	Appropriately dressed with good eye contact. Not morose. Speech normal in content and volume.		
Comment	?Depression/?underlying personality. Discussed again Fife Mood Cafe, Talk Matters, Breathing Space. Trial of anti-depressants and review 3/52.		
Medication	Fluoxetine Hydrochloride Capsules 20 mg 30 capsule ONE TO BE TAKEN EACH DAY		
Follow up	(diary entry deleted) (Not Known)		
Additional	On depression register		
-	----		
22/08/2012	<u>Dr F D H Downie at Telephone Consultation</u>		
History	Long history of mood going up and down. Took od aged 14. Diagnosed with post-natal depression. Has intermittently self-harmed. Says mood never been stable. Separated from partner 2 weeks ago. Feels like she has "hit a brick wall". Still having suicidal thoughts, but no plans. has 2 kids (aged 9 years and 2 years).		
Comment	Discussed Fife Mood Cafe, Talk Matters, Penumbra and Breathing Space. Appt to see me tomorrow.		
-	----		
30/03/2012	<u>Dr F D H Downie at Crossgates Medical Practice</u>		
History	Increased frequency and left-sided back pain since last week. No vomiting. BO regularly. LMP 2 weeks ago.		
Examination	O/E - BP reading T38.6C. P110. . Abdo soft. SI tender left renal area. No masses. No guarding/rebound. Blood pressure reading 121/78 mm Hg		
Comment	Ascending UTI. Rx with advice re fluids/analgesia. TCB if problems.		

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Medication	Co-Amoxiclav 500/125 Tablets 21 tablet ONE TO BE TAKEN THREE TIMES A DAY
-	----
09/01/2012	<u>Dr MT Yousaf at Crossgates Medical Practice</u>
History	Given appt and Form A fully completed to go to VHK Mat Unit at 2.30pm tomorrow.
-	----
05/01/2012	<u>Dr MT Yousaf at Crossgates Medical Practice</u>
History	Appt arranged for Tuesday 10th Jan at 2.30pm, Glen Main Maternity Unit VHK and head for USS Scan Dept, full bladder, best to ask at Main reception in Maternity Unit.
-	----
05/01/2012	<u>Dr MT Yousaf at Crossgates Medical Practice</u>
History	+ve home pregnancy test LMP about beginning Nov'11, would like TOP Para 2+0 (8yrs and 18 mmonths). No contraception used. Feels cannot continue with pregnancy.
Examination	Abdo-nad.
Comment	Refer TOP Clininc at FPH UTGENT, needs Form A and patient will come back on monday 9th at 1440 hrs to get copy letter+Form A.
-	----
16/06/2011	<u>Mrs Sandra Hutchison at Crossgates Medical Practice</u>
History	Automatically generated by transaction priority=2
Problem	Patient MRE received from HB priority=1
-	----
10/06/2011	<u>Mrs Annette Bacon at Crossgates Medical Practice</u>
History	DNA New patient check priority=2
	Did not attend priority=2
-	----
02/06/2011	<u>UnknownUser at Crossgates Medical Practice</u>
History	Automatically generated by transaction priority=2
Problem	Pat. GP7B/GP8B card from HB priority=1
-	----
01/06/2011	<u>Mrs Sandra Hutchison at Crossgates Medical Practice</u>
History	White Scottish priority=2
	Current smoker priority=2
-	----
01/06/2011	<u>Mrs Sandra Hutchison at Crossgates Medical Practice</u>
History	Automatically generated by transaction priority=2
Problem	Patient reg. form sent to HB priority=1

Medication

Current				
Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
None				
Past				
Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
18/03/2014	Rigevidon Tablets ONE TO BE TAKEN EACH DAY AS DIRECTED 63 tablet	18/03/2014P	Dr F D H Downie	ACUTE
23/08/2012	Fluoxetine Hydrochloride Capsules 20 mg ONE TO BE TAKEN EACH DAY 30 capsule	23/08/2012P	Dr F D H Downie	ACUTE
30/03/2012	Co-Amoxiclav 500/125 Tablets ONE TO BE TAKEN THREE TIMES A DAY 21 tablet	30/03/2012P	Dr F D H Downie	ACUTE

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Operational Division
Victoria Hospital

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



Date 22/10/14

~~Elizabeth Farmer, Community Midwife MK~~

Dear Dr McKean, Health Centre, Lochgelly,

THOMSON V306915B
KAY
96 Main Street
LOCHGELLY 12/07/1984
KY5 9AA 1207840483

Your patient was due to attend for a surgical termination on 21/10/14 unfortunately she failed to attend for this procedure; we will not be contacting the patient to arrange another appointment. If she requires a further appointment to be seen, please re refer her in.

Yours faithfully

PP Fiona Horsburgh (Gynae Secy)

On behalf of the

Community Gynaecology Clinic. Ext 29086 / 21576

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PCES - Fife

1 Patient Contacts for Crossgates Medical Practice

Page 1 of 2

NHS Confidential: Personal data about a patient

Adastra Call #:37377

Received NHS24:07/12/2013 09:34

Patient's Name: Kay Thomson

Community Health Index:1207840483

Date of birth: 12/07/1984 (29 years)

Sex:Female

Received PCES:07/12/2013 11:10

Home Address

(if different):

Advised:

Current Address:6 Hillview Main Street, Hill Of Beath

Arrived:

Departed: 07/12/2013 11:09

Cowdenbeath KY4 8DP

Tel No: 01383 242460

Origin: Other

Urgency: Within 4 Hours

Type: NHS24 Advice

Consulted by:

Own Doctor: Downie, Frank D H

Reported Condition

NHS24 Ref. No.:13899879

NHS24 Triage Begin:07/12/2013 09:37

NHS24 Triage End: 07/12/2013 11:09

NHS24 Triaged by: (Non-Clinical User) (Glasgow)

NHS24 Clinical Summary:

SWOLLEN FACE TODAY SEE AV

SIDE OF PT'S FACE IS SWOLLEN AND TENDER. PT ADVISED SHE CANNOT MOVE NECK UP OR DOWN. PT ADVISED THAT SHE HAS A LUMP UNDER HER CHIN. LUMP CAME ON 2 WEEKS AGO HOWEVER IT WAS NOT BOTHERING PT. PT COULD NOT GET GP APP. PT HAS BEEN FEELING RUN DOWN. ((Non-Clinical User) (Edinburgh))

OPENED FOR RAPID TRIAGE AS SUPPORTED BY NP J.BROWN. ((Non-Clinical User) (Glasgow))

Clinical summary created by: (Non-Clinical User) (Glasgow) [07/12/2013 11:09:32]

PAIN & SWELLING UNDER CHIN FOR 2 WEEKS AND LUMP UNDER CHIN APPROX SIZE OF 10P FOR 2 WEEKS - FEELS INCREASING IN SIZE. HAS A GENERALISED HEADACHE AND PAIN IN NECK WHEN MOVING HEAD UP & DOWN. JAWLINE IS TENDER & SWOLLEN LOOKING. HAS BEEN FEELING RUN DOWN OVER PAST 2 WEEKS - ANALGESIA ADVICE GIVEN & ADVISED ROUTINE APPT WITH OWN GP.

NHS24 Outcome:PRCP Pt advised to contact practice - For Information Only

Adastra Consult by

Consult Start

Start Type

End Type

Consult End

History

Examination

Diagnosis

Treatment

Clinical Code(s)

Prescriptions

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Page 2 of 2

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Adastra Call#:37377

Informational Outcome(s)

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Operational Division
Victoria Hospital

Hayfield Road
Kirkcaldy
Fife KY2 5AH
Telephone 01592 643355



COMMUNITY GYNAECOLOGY CLINIC
Consultant: Dr D R Urquhart

THOMSON V306915B
KAY
96 Main Street
LOCHGELLY 12/07/1984
KY5 9AA 1207840483

Dear Dr Elizabeth Farmer, Community Menopausal Unit
S. McKean, Health Centre, Lochgelly

Your patient attended the Community Gynae clinic on 14 / 10 / 14 requesting a termination of pregnancy. Gestation has been estimated at 11 + 3 weeks. She has been counselled and arrangements have been made to terminate the pregnancy.

The procedure will be carried out by:

- ☒ Suction termination on 21 / 10 / 14
☐ RU486 and Prostaglandin on / / & / /

She has been fully counselled in respect of contraception and has chosen:

Method	Follow-up Required	Method Chosen
COC	3/12	()
POP	3/12	()
Depo-Provera	10/52	()
Nexplanon	6/52	()
IUD	6/52	()
Mirena IUS	6/52	()
Sterilisation	Refer to GP	()

She has been advised to attend the Sexual Health clinic or GP for follow-up care.

Yours sincerely

Julia Turner

Community Gynae Clinic

Chief Executive Mr John Wilson
Victoria Hospital is part of The Operational
Division of NHS Fife

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ASSIGNMENT FORM**PATIENT ASSIGNMENT TO A NHS GENERAL MEDICAL PRACTICE**

- Please use **BLOCK CAPITALS** to complete the form and tick all relevant boxes.
- Failure to complete this form fully may delay locating any medical records promptly.
- All assignments are issued to practices on a strictly rotational basis.
- Patients are expected to remain with the practice for a minimum of three months.
- Eligibility to use the NHS services depends mainly on residence in the UK, and on other qualifying provisions set out in the Regulations.
- The patient, or their representative, must sign the declaration overleaf.

NHS
National
Services
Scotland

RECEIVED

3 OCT 2014

PSD - MEDICAL

PERSONAL DETAILS (ALL FIELDS MARKED * ARE MANDATORY AND MUST BE COMPLETED FULLY AS POSSIBLE)

WILL YOU BE IN THE AREA FOR MORE THAN THREE MONTHS? *

YES ☒ NO ☐

IS THIS YOUR FIRST REGISTRATION WITH A GP PRACTICE IN THE UK? *

YES ☐ NO ☒

SURNAME *

THOMSON

TITLE (Not held on CHI)

MISS

MALE *

☐

FEMALE *

☒

FORENAME *

KAY

MIDDLE NAME *

PREVIOUS SURNAME *

DATE OF BIRTH *

12 07 1984

CURRENT ADDRESS *

96 MAIN STREET LOCHGELLY

POSTCODE * KY5 9AA

TOWN OF BIRTH *

KIRKCALDY

COUNTRY OF BIRTH *

FIFE

MOTHER'S MAIDEN NAME *

OHARE

CONTACT TELEPHONE NUMBER (Not held on CHI)

01592 301482

PREVIOUS ADDRESS IN THE UK *

6 HILLVIEW MAIN STREET

HILL OF BERTH

POSTCODE * KY4 8DP

NAME AND ADDRESS OF PREVIOUS REGISTERED GP PRACTICE IN THE UK *

CROSSGATES

POSTCODE *

COMMUNITY HEALTH INDEX NUMBER

1207840483

NATIONAL HEALTH SERVICE NUMBER

42684056

Assignment Form/AS/Doc12 rev3

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IF YOU ARE FROM ABROAD:
DATE YOU FIRST CAME TO LIVE IN
THE UK?

D D M M Y Y

IF PREVIOUSLY RESIDENT IN
THE UK, DATE OF LEAVING.

D D M M Y Y

YOUR MOST RECENT COUNTRY OF
RESIDENCE

IF YOU HAVE SERVED IN THE BRITISH ARMED FORCES:

SERVICE / PERSONNEL NUMBER

ARE YOU A RESERVIST IN ANY OF THE BRITISH ARMED FORCES?

YES ☐NO ☐

DATE OF YOUR ENLISTMENT

D D M M Y Y

DATE OF YOUR LEAVING

D D M M Y Y

IS THIS YOUR FIRST REGISTRATION WITH A GP SINCE LEAVING THE ARMED FORCES?

YES ☐NO ☐

VOLUNTARY CONSENT TO ORGAN DONATION

I authorise the donation of (Please tick the boxes that apply)

any of my organs and tissue ☐ or my

Kidneys ☐ Eyes ☐ Heart ☐ Lungs ☐ Liver ☐ Pancreas ☐ Small bowel ☐ Tissue ☐

for transplantation after my death.

PATIENT SIGNATURE

DATE

D D M M Y Y

HOW WE USE YOUR INFORMATION

THE INFORMATION YOU HAVE PROVIDED WILL BE USED BY THE GP PRACTICE TO CARRY OUT ITS VARIOUS FUNCTIONS AND SERVICES INCLUDING SCHEDULING APPOINTMENTS, ORDERING TESTS, HOSPITAL REFERRALS AND SENDING CORRESPONDENCE.

YOUR INFORMATION, INCLUDING YOUR NAME, GENDER, DATE OF BIRTH AND ADDRESS, WILL BE PASSED TO NHS NATIONAL SERVICES SCOTLAND WHERE IT WILL BE HELD ON THE COMMUNITY HEALTH INDEX (CHI). THIS INFORMATION IS USED TO REGISTER YOU WITH A GP PRACTICE, TRANSFER YOUR MEDICAL RECORDS BETWEEN GP PRACTICES IN THE UK, MAKE PAYMENTS TO GP PRACTICES FOR MEDICAL SERVICES PROVIDED, AND TO PROCESS AND ISSUE MEDICAL CARDS, MEDICAL EXEMPTION CERTIFICATES AND ENTITLEMENT CARDS.

NHS NATIONAL SERVICES SCOTLAND SHARES INFORMATION ABOUT YOU WITHIN NHS SCOTLAND TO ASSIST IN THE PROVISION AND IMPROVEMENT OF NHS SERVICES AND THE HEALTH OF THE PUBLIC. WHEN WE DO THIS, WE MAKE SURE THAT THE INFORMATION WHICH COULD IDENTIFY YOU AS A PERSON AND YOUR HEALTH INFORMATION ARE SEPARATED OR ANONYMISED. HEALTH CONDITION AND TREATMENT INFORMATION WHICH COULD IDENTIFY YOU WILL NOT BE USED FOR RESEARCH PURPOSES BY THE NHS UNLESS YOU HAVE CONSENTED TO THIS.

FOR MORE INFORMATION ON HOW NHS NATIONAL SERVICES SCOTLAND USES YOUR PERSONAL INFORMATION, VISIT OUR WEBSITE AT WWW.NHS.NHS.ORG IF YOU HAVE ANY QUERIES OR CONCERNS ABOUT HOW YOUR PERSONAL INFORMATION IS USED BY THE NHS PLEASE ASK FOR THE LEAFLET 'CONFIDENTIALITY - IT'S YOUR RIGHT', VISIT THE HEALTH RIGHTS INFORMATION SCOTLAND WEBSITE AT WWW.HRIS.ORG.UK OR ASK YOUR GP SURGERY.

PATIENT DECLARATION

I DECLARE THAT THE INFORMATION I HAVE GIVEN ON THIS FORM IS CORRECT AND COMPLETE AND I UNDERSTAND THAT IF IT IS NOT, APPROPRIATE ACTION MAY BE TAKEN.

TO ENABLE NHS NATIONAL SERVICES SCOTLAND TO CONFIRM MY ELIGIBILITY TO LAWFULLY REGISTER WITH A GP AND FOR THE PURPOSES OF PREVENTION, DETECTION, AND INVESTIGATION OF CRIME, RELEVANT INFORMATION FROM THIS FORM WILL BE DISCLOSED TO THE NHS BUSINESS SERVICES AUTHORITY, NHS NATIONAL SERVICES SCOTLAND, THE HOME OFFICE, IDENTITY AND PASSPORTS SERVICES, HM REVENUE AND CUSTOMS, THE GENERAL REGISTER OFFICE AND LOCAL AUTHORITIES.

PATIENT / REPRESENTATIVE SIGNATURE *

K. Thomas

SIGN HERE

REPRESENTATIVE'S NAME (IF APPLICABLE)

RELATIONSHIP TO PATIENT (IF APPLICABLE)

DATE

D D M M Y Y

FOR PSD ** / PRACTICE USE ONLY

PRACTICE CODE ** F 2 1 4 3

GP SIGNATURE

Identification: seen - Do not take or retain photocopies

GP REFERENCE NUMBER

BIRTH
CERT. ☐

STUDENT
ID CARD ☐

DRIVING
LICENCE ☐

PASSPORT
or HC2 Cert ☐

HOME OFFICE
APP REG CARD ☐

OTHER
specify ☐

INPUT BY:

DATE:

CHECKED BY:

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Full Report

Ms Kay Thomson 12/07/1984 Female Temporary Resident
< 16 days

Address

6 Hillview Main Street Hill-Of-Beath Fife KY4 8DP
address for Temporary Residents
96 Main Street Lochgelly Fife KY5 9AA

Address Type: Permanent registered

Address Type: Main address

Communication numbers

Problems

Currently Relevant

Started: 01/10/2014 Ended:

Medical History

21/10/2014 DNA hospital appointment FOR SURGICAL TERMINATION
03/10/2014 Seen by community midwife LMP ? 14.8.14 requesting TOP. Appt given for 14.10.14 at STOP assessment
clinic VHK - E Farmer Dr S Lim
01/10/2014 Administration REQUIRES TO BE SEEN BY MIDWIFE. MOVED INTO AREA. NO GP YET. GM
01/10/2014 Temporary resident registrat. HOME: 6 HILLVIEW, MAIN ST, HILL OF BEATHGP: DR DOWNIE,
CROSSGATES M.P. Dr S Lim

Dr J R McKean

Dr S Lim

Repeat Masters

Acute and Repeat Issue Therapy

Recall

Consultation

28/10/2014 Administration
03/10/2014 Administration
01/10/2014 Administration
01/10/2014 Administration

Mrs Jennifer Lyle
Mrs Jennifer Lyle
Mrs Fiona Baxter
Mrs Gillian McLeod

Referrals

Immunisations

Total patients for report 1

Dr McKean & Partners, David Street, Lochgelly, Fife, KY5 9QZ

Tel: 01592 782783

Page 1/1

Printed by: GILLIAN MCLEOD on 14/11/14 16:06:38

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Tue 25/11/14 @ 2.15 hrs

Directorate of Woman & Children's Health

Referral Form for Social Termination of Pregnancy

FAO: Fiona Horsburgh, Gynae Secretary, EXT 21576 Level 11 VHK

Appointment for STOP Assessment clinic at Victoria Hospital

Date: 20/11/14 GP - DR DA SILVA
Time: tel 01592 301482
Re: KAY THOMSON
Name: DOB: 12/7/84
Address: 96 MAIN STREET
LOCHGELLY
KY5 9AA

Thank you for seeing the above patient who requests a termination of pregnancy

She is approximately 12⁺ weeks pregnant. LMP: August 2014

Additional comments: 2nd appointment
at STOP clinic

Thank you.

Midwife: (print name)

Telephone:

W. Edridge
LORNA EDRIDGE
01592 643355 Ext 22075

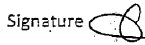
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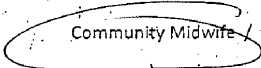
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Early appt please New patient, still to register. Life

GP PRACTICE Dr McKenna Cattanach Health Centre Lochgelly		Urgent Referral? - SEE OVERLEAF	
First Name THOMSON		Midwife booking appt / Consultant booking appt	
Second Name KAY		Interpreter needed - Y/N	
CHI 120784		If Y: language?	
LMP 21/8/14		Ethnic Origin White Scottish	
Address: 96, MAIN STREET LOCHGELLY KY5 9AA.		SWHMR started Y/N	
Phone 01592 301482			
Past Obstetric History		Parity 2+1 (TPP)	
Details / Complications 22/08/10 - SUB (Male) 22/07/03 - SUB (female)			
Height 165	Weight 68	BMI 25	
Personal or Family History - Tick box / expand overleaf if needed			
Diabetes or HYPER thyroid		NO	
HYPO thyroid		NO	
Fetal Abnormalities or Genetic history		NO	
Depression or Mental Illness		YES	
Cardiac or Renal Problems		YES	
Prosthetic valves = IMMEDIATE referral		YES	
Thrombosis		NO	
Previous VTE in pregnancy = URGENT referral		NO	
Epilepsy		YES	
Essential Hypertension		NO	
Other medical conditions		NO	
Medication:		NO	
Drug or Alcohol misuse		NO	
Social Issues / Social Work Involvement		NO	
Smoking		(Y)N- No / day = 10	

Name ELIZABETH FARMER Signature 

Date 13/11/14
cc GP  Community Midwife / GP

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Operational Division
Victoria Hospital

Hayfield Road
Kirkcaldy
Fife KY2 5AH
Telephone 01592 643355
Ext No - 29086 / 21251



COMMUNITY GYNAECOLOGY CLINIC
Consultant: Dr D R Urquhart

THOMSON V306915B
KAY
96 Main Street
LOCHGELLY
KY5 9AA
12/07/1984
1207840483

J McKean, Health Centre, Lochgelly
Dear Dr Lorna Eldridge, Community Midwives VHR.

Your patient attended the Community Gynae clinic on 25 / 11 / 14 requesting a termination of pregnancy. Gestation has been estimated at 13 + 3 weeks. She has been counselled and arrangements have been made to terminate the pregnancy.

The procedure will be carried out by:

- ☐ Suction termination on / /
- ☒ RU486 and Prostaglandin on 28 / 11 / 14 & 29 / 11 / 14

She has been fully counselled in respect of contraception and has chosen:

Method	Follow-up Required	Method Chosen
COC	3/12	()
POP	3/12	()
Depo-Provera	10/52	()
Nexplanon	6/52	()
IUD	6/52	()
Mirena IUS	6/52	()
Sterilisation	Refer to GP	()

She has been advised to attend the Sexual Health clinic or GP for follow-up care.

Yours sincerely

Olivia Turrell

Community Gynae Clinic

Chief Executive Mr John Wilson
Victoria Hospital is part of The Operational
Division of NHS Fife

NHS Confidential: Personal data about a patient

Operational Division
Victoria HospitalHayfield Road
Kirkcaldy
Fife KY2 5AH
Telephone 01392 643355
www.show.scot.nhs.uk/faht**NHS**
FifeTHOMSON V306915B
KAY FP103363H
96 Main Street
LOCHGELLY 12/07/1984
KY5 9AA 1207840483

3/12/14

Dear Dr ~~Lorna George Community Medicine NHS~~
~~J McKean Health Centre, Markinch~~The above patient was admitted to the Consultant Led Unit on 29/11/14
under the care of Dr D R Urquhart and underwent a late medical termination of
pregnancy.

- ☒ The products of conception were passed
- ☐ Evacuation of uterus was performed under GA

Chlamydia Result

- ☒ Negative
- ☐ Positive, antibiotics were administered prior to discharge and we have recommended that she attend SHS for follow-up.
- ☐ Declined

Blood Group O Neg Anti D Given (YES) / NOChosen Method of Contraception: MirenaImmediate Supply: Hospital / SHS (GP) Review

Yours sincerely

Name (Block Capitals) DRUDesignation DRU**DR D R URQUHART
MB, ChB, MD, FRCOG
VICTORIA HOSPITAL
KIRKCALDY
KY2 5AH**Chief Executive Mr John Wilson
Victoria Hospital is part of The Operational Division

NHS Confidential: Personal data about a patient

Type of abortion: Therapeutic abortion	
Date Recorded	10/12/2014
CHI Number	1207840483
Department Id	FP103363H
Pat Name,1	KAY
Pat Name Family	THOMSON
Date Of Birth	12/07/1984
Get Patient Address	96 Main Street LOCHGELLY Fife KY5 9AA

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LOCHGELLY MEDICAL PRACTICE

Susan Cattnach, M.B. Ch.B, Mauricio Martins Da Silva M.B. Ch.B.

Nurse Practitioner: Joanna McDonald

Practice Nurse: Lindsay Dailly

Phone (01592) 780277

Fax (01592) 784044

04/12/2014

Miss Kay Thomson
96 Main Street
Lochgelly
Fife
KY5 9AA

Dear Miss Thomson

We have received a letter from the Antenatal Clinic at Victoria Hospital who have advised you are interested in having the mirena coil fitted. Unfortunately the surgery do not fit the mirena coil. Please find enclosed the family planning clinic leaflet which gives you telephone numbers of the clinics who are able to carry this out for you.

Yours sincerely

Lochgelly Medical Practice

HEALTH CENTRE
DAVID STREET
LOCHGELLY

FIFE KY5 9QZ

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VICTORIA HOSPITALG.P. NAME Dr. ThomsonCONSULTANT Dr. Tydeman

SHARED CARE/HOSPITAL CARE

ADMITTED: 29/11/14 0900DISCHARGED: 29/11/14**ANTENATAL DISCHARGE SUMMARY**

Surname: ... THOMSON V306915B
Other Name: KAY
96 Main Street
Consultant: LOCHGELLY 12/07/1984
KY5 9AA 1207840483
Ward/Depart:

DISCHARGE ADDRESS
(if different)AGE
30PARITY
2+0BLOOD GROUP
O NEGRUBELLA
Immune/Not ImmuneCERVICAL
CYTOLOGY

Done/Not Done

Ref. No.:

Result:

ANTI-D

Given / Not Given

RUBELLA VACCINE

Given / Not Given

DIAGNOSIS AND TREATMENT

Admitted for social TOP at 14 weeks.
Procedure complete without
complication.
For marena coil at GP practice.

FOLLOW-UP

TO ATTEND G.P.

TO ATTEND ANTENATAL CLINIC ON

TO ATTEND POSTNATAL CLINIC ON

SIGNATURE

MS1311

DATE

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Operational Division
Victoria Hospital

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

THOMSON
KAY
96 Main Street
LOCHGELLY
KY5 9AA

V306915B

FP103363H

12/07/1984
1207840483

Not Markinch
NHS
Fife

3/12/14

Dear Dr ~~John Gidrie Community Midwives VHK~~
~~St Mark's Health Centre, Markinch~~

The above patient was admitted to the Consultant Led Unit on 29/1/14
under the care of Dr D R Urquhart and underwent a late medical termination of
pregnancy.

- ☒ The products of conception were passed
☐ Evacuation of uterus was performed under GA

Chlamydia Result

- ☒ Negative
☐ Positive, antibiotics were administered prior to discharge and we have
recommended that she attend SHS for follow-up.
☐ Declined

Blood Group O Neg Anti D Given YES / NO

Chosen Method of Contraception: Mirena

Immediate Supply: Hospital / SHS GP Review

Yours sincerely,

[Signature]

Name (Block Capitals) DR D R URQUHART

Designation MB, ChB, MD, FRCOG

DR D R URQUHART
MB, ChB, MD, FRCOG
VICTORIA HOSPITAL
KIRKCALDY
KY2 5AH

Chief Executive Mr John Wilson
Victoria Hospital is part of The Operational Division

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Page 1 of 3

Hospital use only	Clinic	Day Date	Time	Hospital No.
-------------------------	--------	-------------	------	-----------------

101008705107Q

Unique Care Pathway Number: 101008705107Q

Transport required?
No

REFERRAL LETTER
MEDICAL IN CONFIDENCE

FEMALE-STERILISATION***FEMALE-STERILISATION***

REFERRAL TO	
Female Sterilisation F2F1 Fife General Referral	—— Consultant / receiving practitioner and/or specialty clinic
Sexual Health Services Whyteman's Brae Hospital Kirkcaldy	—— Hospital and hospital address Hospital Location Code F021G Email address -
Urgency of referral Routine	

PATIENT DETAILS		Patient's address
Surname	Thomson	96 Main Street LOCHGELLY Fife KY5 9AA
Forename(s)	Kay	
Title	Miss	
Sex	Female	
Date of birth	12-Jul-1984	
CHI no.	1207840483	Contact number(s) Voice: 01592 301482

REFERRING PRACTITIONER DETAILS		Practice address
Name	Dr. Susan Cattnach	The Health Centre David Street Lochgelly Fife
GMC code	3262010	
GP code	91782	
Practice name	Lochgelly Medical Group (21435)	
Practice code	21435	
		Contact number(s) Voice: 01592 780277

Date submitted by practice: 12-Feb-2015**Reason for referral**

Care type requested: Out Patient
Expected outcome: Advise

Administrative Information

Patient can accept a short notice appointment: yes
Interpreter Required: no

Stylesheet version: 16.0.1.3 25-Mar 2013 Comments to: fife-uhb.fifecc@nhs.net

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CLINICAL INFORMATION**History of presenting complaint / examination findings / investigation results****Presenting complaint**

Description: Sterilisation

Comment: Dear Colleague

Thank you for seeing this 30 year old lady whom came into see me today with a request to be referred for sterilisation. The lady is a para 2+2 who's youngest child is 4 and a half but since her birth she has had 2 TOPs and she has no desire to have any further family.

The lady has used numerous forms of contraception but appears to respond badly to anything hormonal. She has had the Implanon in which she has bled continuously, the Depo Injection she had similar bleeding issues, combined pill exacerbates her migraines and the mini pill, similar problems with bleeding. As a result of all these issues, at various times she has stopped her contraception and hence why she has had unwanted pregnancies.

She came to see me today as she is very keen to be considered for sterilisation although she fully appreciates this is not reversible. She has discussed this with her present partner, whom she had her youngest child with. He is not keen to be referred for vasectomy hence why she came to request the sterilisation.

I would be grateful if you could see this lady for a candidate for sterilisation. Thank you very much for your help.

Yours sincerely

Dr Sandra Wilson
GP
SW/LW

Examinations and Investigations

Blood Pressure (systolic):	106	-
Blood Pressure (diastolic):	60	-
Height (m):	162	-
Weight (kg):	65	-
Body Mass Index:	24.77	-
See below:		-
Cigarette smoker, 10 Cigarettes/day:	24-Nov-2014	
See below:		-
Alcohol consumption, 9.8 units/week:	24-Nov-2014	
See below:		-
Aerobic exercise 3+ times/week:	24-Nov-2014	

Past Medical History**Pre-existing conditions** (High and Medium Priority)

<u>Description</u>	<u>Modifier</u>	<u>Comment</u>	<u>Date Recorded</u>
Termination of pregnancy	-	-	29-Nov-2014
Depressive disorder NEC	-	-	23-Aug-2012
Patient's condition resolved	-	left kidney	20-Jun-2012
Back pain, unspecified	-	-	01-Apr-2012
Termination of pregnancy	-	-	18-Jan-2012
Spontaneous vaginal delivery	-	male	21-Aug-2010
Spontaneous vaginal delivery	-	female	22-Jul-2003
H/O: behaviour problem	-	-	12-Oct-1999
Drug dependence	-	drug abuse	12-Oct-1999
Overdose of drug	-	-	05-Mar-1998
Enuresis	-	diurnal and nocturnal	15-Jan-1988

Past Procedures (High and Medium priority)

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<u>Description</u>	<u>Laterality</u>	<u>Modifier</u>	<u>Comment</u>	<u>Date Recorded</u>
Computerised tomograph scan	-	-	4cm mass left kidney probable focal pyelonephritis	04-Apr-2012
Other diagnostic ultrasound	-	-	-	03-Apr-2012
Cervical smear: negative (GMS (Another Practice))	GMS (Another Practice)	-	-	03-Apr-2012
Other hospital admission NOS	-	-	-	01-Apr-2012
Renal ultrasound	-	-	-	20-Mar-1997
[SO]Renal pelvis NEC	-	-	slight dilation renal pelvis left	20-Mar-1997

Family Conditions (High and Medium priority)

<u>Description</u>	<u>Modifier</u>	<u>Comment</u>
Unknown	-	-

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

<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Unknown	-	-	-	-	-	-

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

<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Norethisterone Tablets 5 mg	0604012P0AAAAAA	30 tablet	ONE TO BE TAKEN THREE TIMES A DAY	-	09-Feb-2015	10 Days

Lifestyle risks

Exercise status: Not Known

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Kirkcaldy & Levenmouth
Community Health Partnership

Sexual Health Fife
Whytemans Brae Hospital
Whytemans Brae
Kirkcaldy
Fife
KY1 2ND
Appointments: 01592 647979
Advice Line: 01592 729270
Fax: 01592 648052



04 December 2014
Ref: AN07632231
CHI: 1207840483

Dr Martins Da Silva
Lochgelly Medical Group
The Health Centre
David Street
Lochgelly, Fife
KY5 9QZ

Dear Dr Martins Da Silva

Re: Kay Thomson (12/07/1984), 96 Main Street, LOCHGELLY, KY5 9AA

Your patient has attended the Sexual Health Clinic at **Queen Margaret Hospital, Dunfermline** for advice.
Benefits and risks of her chosen method of contraception were discussed.

She was prescribed Cerelle (3 months).

If there is any relevant factor of which we may not be aware, in her past history or present treatment - especially if this might indicate the use of a different contraceptive method - please kindly notify the department as soon as possible.

Yours sincerely

A handwritten signature in black ink, appearing to read 'J. Khatoon'.

Dr Jamila Khatoon
Specialist Dr in Sexual Health



Chair: Alastair Robertson, K & L CHP
General Manager: Mary Porter, K & L CHP

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16-July-2026 SJJS

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**Kirkcaldy & Levenmouth
Community Health Partnership**

Private & Confidential

Ms Kay Thomson
96 Main Street
Lochgelly
Fife
KY5 9AA

Sexual Health Fife
Whytemans Brae Hospital
Whytemans Brae
Kirkcaldy
KY1 2ND
Appointments Tel: 01592 647979 (08.30-13.30hrs)
Office Tel: 01592 729273 (9.15-14.15hrs)
Fax: 01592 648052
Email: tracy.aitchison@nhs.net



Date Typed: 26 February 2015
Your Ref: AN07632231
Our Ref: KP/TA/PtSterLetter1
CHI: 1207840483

Dear Ms Thomson

I understand that you would like to be sterilised. Your doctor has referred you to our clinic to discuss this further.

Please note that many women are now considering a very long acting reversible method of contraception (VLARC). These methods include intrauterine contraception (Mirena IUS or copper-IUD), and the subdermal implant (Nexplanon). Another long-acting reversible method is the contraceptive injection 'Depo-Provera'.

There are numerous advantages of choosing long-acting or very long-acting reversible contraceptive methods:

- They are essentially as effective as sterilisation (many women do not realise that it is still possible to become pregnant after being sterilised!). The life time failure rate of female sterilisation is 1 in 200 and as already said this is not better than with long acting reversible methods!
- They are easily reversible, whereas a reversal of sterilisation may not be available on the NHS, is expensive when done privately, and there is no guarantee of success.
- They are long acting. The *Mirena IUS* can stay in for 5 years, and if inserted after the age of 45 years it may stay in until the menopause without needing to be changed. The *copper-IUD* can stay in for up to 10 years, and if inserted after the age of 40 years it may stay in until the menopause without needing to be changed. The *contraceptive implant Nexplanon* gives contraception for up to 3 years. The *contraceptive injection Depo-Provera* needs to be given every 12 weeks.
- They are much easier to be performed than a sterilisation.
- The risks of surgery and complications after surgery are avoided. Serious surgical complications may occur in up to 1 in 500 sterilisation procedures, while up to 10% of women may experience complications afterwards! Surgical risks are also increased if you are overweight or have medical problems.
- Faster recovery after procedure with no need to take time off work.
- There may be additional beneficial effects on periods, in particular if the Mirena IUS is chosen. However the Depo-Provera injection or contraceptive implant may also have a beneficial effect on periods.

Sterilisation Pt. Letter 1 – KP 21.2.2012



Chair: Mr Simon Little
General Manager: Mrs Mary Porter



You and your partner should also consider whether he should opt for male sterilisation (vasectomy). This is a safer procedure, usually done under local anaesthesia and is also much more effective than female sterilisation (life time failure rate of male sterilisation is only 1 in 2000).

Finally, there is also the option to simply continue with your current contraceptive method such as the contraceptive pill, provided there are no contraindications. Contraceptive pills (both the combined pill and progestogen-only pill) are safe and effective contraceptive methods. Your doctor can advise you whether it is safe for you to start or continue taking the pill.

The following FPA (Family Planning Association) leaflets are enclosed for your information, or may have already been provided by you if you were originally referred from a Sexual Health Clinic. It is very important to read them carefully.

- Your guide to long-acting reversible contraceptives (LARCs)
- Your guide to contraception
- Male and female sterilisation

Before sending you an appointment for an initial consultation please complete the enclosed 'Female Sterilisation Referral Outcome' questionnaire and return it to us so that we know how to best help you. If you have not received an appointment within 4 weeks of returning your questionnaire please contact Tracy Aitchison on 01592 729273 between 9.15-2.15pm Monday-Friday.

If you would like to consider a LARC method, please check whether this may actually be provided through your General Practitioner (GP). Alternatively contact the Sexual Health Service directly for an appointment for further discussion (Tel 01592 647979). It may also be possible to have a telephone counselling appointment for a detailed discussion about a copper-IUD, Mirena IUS or the contraceptive implant at the Sexual Health Service. I would be grateful if you could indicate this on the enclosed questionnaire and return it to us for our records. If you fail to return the questionnaire within six weeks you will then be removed from the waiting list.

Kind Regards

ppp T. Aitchison

Dr Karin Piegsa
Consultant in Reproductive Health

c.c. Dr S Cattanach, Lochgelly Medical Group ✓

Encs

- Sexual Health Service: Female Sterilisation Referral Outcome Questionnaire
- fpa leaflet: Your guide to long-acting reversible contraceptives (LARCs)
- fpa leaflet: Your guide to contraception
- fpa leaflet: Male and female sterilisation

Sterilisation Pt. Letter 1 – KP 21.2.2012



Chair: Mr Simon Little
General Manager: Mrs Mary Porter

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LOCHGELLY MEDICAL PRACTICE

Susan Cattanach, M.B. Ch.B, J Sandra Wilson M.B. Ch.B.

HEALTH CENTRE
DAVID STREET
LOCHGELLY
FIFE KY5 9QZ

Practice Nurse: Lindsay Dailly

Phone (01592) 780277
Fax (01592) 784044

24/04/2015

Miss Kay Thomson
96 Main Street
LOCHGELLY
Fife

KY5 9AA

Dear Miss Thomson

We would appreciate if you could contact the surgery regarding a letter we have received from Whyteman's Brae Hospital.

Yours sincerely

Lochgelly Medical Practice

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**Kirkcaldy & Levenmouth
Community Health Partnership**Sexual Health Fife
Whytemans Brae Hospital
Whytemans Brae
Kirkcaldy
KY1 2NDAppointments Tel: 01592 647979 (08.30-13.30hrs)
Office Tel: 01592 729273 or Ext 29273 (9.15-14.15hrs)
Fax: 01592 648052
Email: tracy.aitchison@nhs.net**Private & Confidential**Ms Kay Thomson
96 Main Street
Lochgelly
Fife
KY5 9AADate sent: 16 April 2015
Your Ref: AN07632231
CHI: 1207840483

Dear Ms Thomson

Please complete this brief questionnaire and return it to the above address in the "FREEPOST" envelope provided.

If you have not responded within 3 weeks of the above date we will assume that you are no longer interested in being sterilised and will remove you from our waiting list.

Tel Home:	Work:	Mobile:
-----------	-------	---------

I have decided to stay on my current method of contraception and will return to my GP for further supplies	
I am interested in a long-acting or very long-acting reversible method of contraception (LARC / VLARC) and will discuss this further with my GP.	
I am interested in a long-acting or very long-acting reversible method of contraception (LARC / VLARC) and will contact the Sexual Health Service (Tel. 01592 647979) for an appointment to discuss this further.	
My partner is interested in a vasectomy and will see his GP to discuss this further and be referred for this.	
I would like to be considered for a sterilisation procedure and like to receive an appointment to discuss this further.	
Signed:	Date:

Enc

Letter 5a to Pt / GP: Failed To Respond Once – KP 04.06.2013

Chair: Mr Simon Little
General Manager: Mrs Mary Porter

NHS Confidential: Personal data about a patient

**Kirkcaldy & Levenmouth
Community Health Partnership**

Private & Confidential

Ms Kay Thomson
96 Main Street
Lochgelly
Fife
KY5 9AA

Sexual Health Fife
Whytemans Brae Hospital
Whytemans Brae
Kirkcaldy
KY1 2ND
Appointments Tel: 01592 647979 (08.30-13.30hrs)
Office Tel: 01592 729273 (9.15-14.15hrs)
Fax: 01592 648052
Email: tracy.aitchison@nhs.net



Date Typed: 16 April 2015
Your Ref: AN07632231
Our Ref: KP/TA/Ltr5a/PtGP/FTR1
CHI: 1207840483

Dear Ms Thomson

I note that you did not return the questionnaire sent to you on 26th February 2015 inviting you to request an appointment to further discuss female sterilisation. I have attached another '**Female Sterilisation Referral Outcome**' questionnaire for you to complete and return it to us so that we know how to best help you.

If you fail to return the questionnaire for a second time then I will therefore assume that you are no longer interested and you will be removed from our waiting list.

Kind Regards

pp *T. Aitchison*

Dr Karin Piegsa
Consultant in Reproductive Health

c.c.
Dr S Cattnach, Lochgelly Medical Group ✓

Enc

Letter 5a to Pt / GP: Failed To Respond Once – KP 04.06.2013



Chair: Mr Simon Little
General Manager: Mrs Mary Porter

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Hospital use only	Clinic	Day Date	Time	Hospital No.
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101012632334Y

Unique Care Pathway Number: 101012632334Y

Transport required?	REFERRAL LETTER MEDICAL IN CONFIDENCE	Suspected Cancer Site: NOT A CANCER REFERRAL
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GENERAL-PSYCHIATRY-MENTAL-ILLNESS

GENERAL-PSYCHIATRY-MENTAL-ILLNESS

REFERRAL TO	
General Psychiatry (Mental Illness) G1 Fife General Referral	— Consultant / receiving practitioner and/or specialty clinic
Queen Margaret Hospital - Mental Health Whitefield Road Dunfermline KY12 0SU	— Hospital and hospital address Hospital Location Code F001G Email address -
Urgency of referral	Routine

PATIENT DETAILS		Patient's address
Surname	Thomson	98 Main Street Crosshill KY5 8AN
Forename(s)	Kay	
Title	Miss	
Sex	Female	
Date of birth	12-Jul-1984	
CHI no.	1207840483	Contact number(s) Voice: 01592 305865

REFERRING PRACTITIONER DETAILS		Practice address		
Name	Dr. J Sandra Wilson	The Health Centre David Street Lochgelly Fife KY5 9QZ		
GMC code	3109737		GP code	92983
Practice name	Lochgelly Medical Group (21435)			
Practice code	21435			
Contact number(s) Voice: 01592 780277				

Date submitted by practice: 06-Dec-2016**Reason for referral**

Care type requested: Out Patient - New

Expected outcome: Not Specified

Administrative Information

Suspected Cancer Site: NOT A CANCER REFERRAL

Patient Contact: N/A Not a cancer referral

Does the patient need to be seen in clinic following any investigations: N/A Not a cancer referral

Patient can accept a short notice appointment: yes

Interpreter Required: no

Stylesheet version: 16.0.1.3 25-Mar 2013 Comments to: fife-uhb.fifeecci@nhs.net

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CLINICAL INFORMATION**History of presenting complaint / examination findings / investigation results****Presenting complaint**

Description: Labile mood. ? undiagnosed bipolar illness.

Comment:

Dear Colleague

I would be grateful for your opinion on this 32 year old lady who presented at the surgery this week with a very long history of labile mood, possibility of depression, but the history on presentation today did cause me some concern that this lady might have an undiagnosed bipolar illness. She is a young woman who is not at the surgery that frequently, was seen earlier in the year with a gynaecological problem and previous to that was seen by myself requesting sterilization but in the last 2 years she has been registered at this surgery there is very little in her records.

The lady admitted there has been a long history of quite significant mood swings over many years where she has episodes where her mood is low, she gets very angry with people, she has quite negative thoughts and this has caused quite a lot of tension between her present partner and previous partners and she openly admits has caused separations. She describes herself as a young woman who has a very short attention span and when she goes into what she describes as "one of her wobbles", which can be for quite a few days, she will do quite rash things, eg. she got bored with her dog and decided as it was casting its hair she had to get rid of it and got into the car and drove the dog to a friend and gave the dog to them and never got it back. Four or five weeks ago she had another one of her "wobbles", she cut all her hair off which has started to grow in but her hairdresser has really struggled to make it look presentable which was obvious from today. She feels she can never plan anything in her life as she is never able to sit down and complete anything as a result of her poor concentration and her major swings in her mood. When her mood is quite low she can go to bed for 2 to 3 days and won't speak to anybody and she gave an example that she was on a weekend away with friends and her mood switched like a light bulb going out and she spent 2 days of the weekend away in bed not speaking to anybody.

I tried to work out why she has now presented as this appears to have been a problem that has gone on for some time and as mentioned it has caused a strain with previous partners. Her oldest daughter is 13 and her father has actually encouraged the daughter to stay with him because he feels her mum's mood is so volatile and this is now the case, the daughter lives with him. She finds this causes tension between herself and her daughter. She also has a son of 6 who appears to have some problems with poor concentration at school but she thinks this might be partly related to her mood as well.

There does appear to be an incident in the last few weeks where a neighbour has caused the Police because the music was so loud which she admits she had had a few drinks but not drunk but her son was with a friend and she was just enjoying herself. But I think the Police have noted a cause for concern and hence the Social Worker has been involved and this might have initiated a presentation at the surgery.

When questioning she drinks alcohol once a week and she takes no medication.

Her employment is as a carer for a friend who is disabled but in her words she has lost several jobs over the years due to her fluctuating moods. She has been with her present partner for 7 years and she thinks he is quite tolerant to her major mood problems and describes at times she wants to kill him and other times she has negative thoughts about herself. Most of the time she has a reasonable good sleep pattern and her appetite is not particularly bad.

Family history - her sister has quite a significant depressive illness according to Kay and has been on medication for some time but she is not aware that her mother or father or any other family members have any psychiatric illnesses. Her dad appears to have been partly responsible for her seeking advice today as he suggested she really needs to speak to somebody regarding her problems.

On examination she looked well, good eye contact, she was slightly on edge sitting on her seat but she was in for quite a long consultation and tolerated being in the surgery for that period of time. As mentioned, there was evidence she had had a self haircut.

Having not known the lady particularly well it was difficult to assess but from the history, as mentioned, I was not convinced this is a straightforward possible depressive illness and there did not appear to be any external factors which had triggered it at this moment apart from her own behaviour and I wondered if it is possible this is bipolar illness and would be grateful for your opinion. I have prescribed her a small dose of Citalopram and will review her in surgery in a few weeks while we await your further assessment.

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Many thanks for your help.

Yours sincerely

Dr Sandra Wilson
GP

Our Ref: SW/KA

Examinations and Investigations

Blood Pressure (systolic):	120	-
Blood Pressure (diastolic):	75	-
Height (m):	162	-
Weight (kg):	65	-
Body Mass Index:	24.77	-
As below :	-	-
Cigarette smoker, 10 Cigarettes/day:	25-Jan-2016	-
As below :	-	-
Alcohol consumption, 9.8 units/week:	24-Nov-2014	-
As below :	-	-
Aerobic exercise 3+ times/week:	25-Jan-2016	-

Past Medical History

Pre-existing conditions (High and Medium Priority)

Description	Modifier	Comment	Date Recorded
Termination of pregnancy	-	-	29-Nov-2014
Depressive disorder NEC	-	-	23-Aug-2012
Patient's condition resolved	-	left kidney	20-Jun-2012
Back pain, unspecified	-	-	01-Apr-2012
Termination of pregnancy	-	-	18-Jan-2012
Spontaneous vaginal delivery	-	male	21-Aug-2010
Spontaneous vaginal delivery	-	female	22-Jul-2003
H/O: behaviour problem	-	-	12-Oct-1999
Drug dependence	-	drug abuse	12-Oct-1999
Overdose of drug	-	-	05-Mar-1998
Enuresis	-	diurnal and nocturnal	15-Jan-1988

Past Procedures (High and Medium priority)

Description	Laterality	Modifier	Comment	Date Recorded
Computerised tomograph scan	-	-	4cm mass left kidney probable focal pyelonephritis	04-Apr-2012
Other diagnostic ultrasound	-	-	-	03-Apr-2012
Cervical smear: negative (GMS (Another Practice))	GMS (Another Practice)	-	-	03-Apr-2012
Other hospital admission NOS	-	-	-	01-Apr-2012
Renal ultrasound	-	-	-	20-Mar-1997
[SO]Renal pelvis NEC	-	-	slight dilation renal pelvis left	20-Mar-1997

Family Conditions (High and Medium priority)

<u>Description</u>	<u>Modifier</u>	<u>Comment</u>
Not known	-	-

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

<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Nil	-	-	-	-	-	-

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

<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Citalopram Hydrobromide Tablets 10 mg	0403030D0AAABAB	28 TABLET	ONE TO BE TAKEN EACH DAY	-	30-Nov- 2016	28 Days

Lifestyle risks

Exercise status: Not Known

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Kirkcaldy & Levenmouth
Community Health Partnership

Sexual Health Fife
Whytemans Brae Hospital
Whytemans Brae
Kirkcaldy
KY1 2ND
Appointments Tel: 01592 647979 (08.30-13.30hrs)
Office Tel: 01592 729273 (9.15-14.15hrs)
Fax: 01592 648052
Email: tracy.aitchison@nhs.net



Private & Confidential

Ms Kay Thomson
96 Main Street
Lochgelly
Fife
KY5 9AA

Date Typed: 07 May 2015
Your Ref: AN07632231
Our Ref: KP/TA/Ltr5b/PtGP/FTR2
CHI: 1207840483

Dear Ms Thomson

I note that you did not return the questionnaire sent to you on 26th February 2015 and also 16th April 2015 inviting you to request an appointment to further discuss female sterilisation. This was the second time that you did not respond and I therefore assume that you are no longer interested and have therefore removed you from our waiting list.

If your circumstances change and you wish to be seen please see your doctor so that you can be referred back to the clinic.

Kind Regards

pp *T Aitchison*

Dr Karin Piegsa
Consultant in Reproductive Health

c.c.
Dr S Cattanach, Lochgelly Medical Group ✓

Letter 5b to Pt / GP: Failed To Respond Twice – KP 04.06.2013



Divisional General Manager: Mrs Mary Porter

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NHS Confidential: Personal data about a patient

Change of Address or Name

Name	DOB	SEX	New Name	Actioned By
Kay Thomson	12/7/84	F		✓ CO.

Current Address

New Address

House No:	96 A	98
Street:	Main Street	Main Street
Town:	Lochgelly	Crosbie
Post Code:	KY5 9AA	KY5 8AN
Tel No:	01592 302482	01592 305865
Mobile No:	07415052511	

Other members of family registered with this practice moving to new address:

Name	DOB	Previous Address If Different from Above	Actioned By
Kerrice Thomson	22/7/03		✓ CO.
Ryley Smith	22/8/2010		✓ CO.

Signature:

K Thomson

Date:

16/11/15

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NHS Confidential: Personal data about a patient

**NHS Fife Community Services
Sexual Health Fife**

Out Patients 4, Level 2
Whytemans Brae Hospital
Whytemans Brae
Kirkcaldy
Fife
KY1 2ND
Appointments: 01592 647979 (8.30am - 1.30pm)
Fax: 01592 648052



24 September 2015
Ref: AN07632231
CHI: 1207840483

Dr Martins Da Silva
Lochgelly Medical Group
The Health Centre
David Street
Lochgelly, Fife
KY5 9QZ

Dear Dr Martins Da Silva

Re: Kay Thomson (12/07/1984), 96 Main Street, Lochgelly, KY5 9AA

Your patient has attended the Sexual Health Clinic at **Queen Margaret Hospital, Dunfermline** for advice.
Benefits and risks of her chosen method of contraception were discussed.

She was prescribed Depo-provera 150mg/ml

If there is any relevant factor of which we may not be aware, in her past history or present treatment - especially if this might indicate the use of a different contraceptive method - please kindly notify the department as soon as possible.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Dr Jamila Khatoun'.

Dr Jamila Khatoun



General Manager: Mrs Mary Porter

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NHS Confidential: Personal data about a patient

APPLICATION TO REGISTER PERMANENTLY WITH A GENERAL MEDICAL PRACTICE



1. PERSONAL DETAILS (ALL FIELDS MARKED * ARE MANDATORY AND MUST BE COMPLETED AS FULLY AS POSSIBLE)

Male* ☐ Female* ☒ Is this your first registration with a GP Practice in the UK?* Yes ☐ No ☒ Will you be in the area for more than 3 months?* Yes ☒ No ☐
(If 'No', please ask for form GMSTRF001)

Date of Birth* 12-07-1984 Address* 96 Mainstreet
Title* Miss Lochgelly
Surname* THOMSON fife
Forenames* KAY Postcode* KY5 9AA
Previous Surname* Telephone # 01592 301482
email address # Kayshutup@gmail.com Mobile #

The following information can be found on your current medical card:

Community Health Index (CHI) Number* 120784 0483 NHS Number* 426.84.056

The following information can be found on your birth certificate:

Town of Birth* Kirkcaldy Country of Birth* fife
Registered district of birth (Scotland only) Mother's maiden name OHare

the data supplied in these fields will not be input to, or updated in, the Community Health Index (CHI), but will be held on the GP Practice's system

2. HELP US TO TRACE YOUR PREVIOUS GP HEALTH RECORDS BY PROVIDING THE FOLLOWING INFORMATION

Address in UK when you were last registered with a GP*

Name and address of previous GP Practice in UK*

Crossgates Medical Practice
fife

Postcode*

Postcode*

If you are from abroad:

Date you first came to live in the UK* DD - - YYYY If previously resident in the UK, date of leaving* DD - - YYYY

Your most recent country of residence

If you have served in the British Armed Forces:

Enlistment date* DD - - YYYY

Are you a Reservist?* ☐ Yes ☐ No

Leaving date* DD - - YYYY

Is this your first registration with a GP since leaving the Armed Forces?* ☐ Yes ☐ No

Service Number

If yes, please provide your address before enlisting*

Postcode*

3. VOLUNTARY CONSENT TO ORGAN DONATION

I would like to join the NHS Organ Donor Register as someone whose organs may be used for transplantation after my death. Please tick the boxes that apply. Your consent to organ donation will be shared with NHS Blood and Transplant together with the information you have provided in Section 1 including your name, gender, date of birth address and CHI number. For more information on being an organ donor or privacy, please ask for the leaflet on joining the NHS Organ Donor Register or visit www.organdonation.nhs.uk.

Any of my organs and tissue ☒ Or my

Kidneys ☐ Eyes ☐ Heart ☐ Lungs ☐ Liver ☐ Pancreas ☐ Small bowel ☐ Tissue ☐

Patient signature K. Thomson

Date 29-11-14

MS2769

GMSGPR001 v1 (05-2013)

NHS Confidential: Personal data about a patient

4. HOW WE USE YOUR INFORMATION

The information you have provided will be used by the GP Practice to carry out its various functions and services including scheduling appointments, ordering tests, hospital referrals and sending correspondence.

Your information, including your name, gender, date of birth and address, will be passed to NHS National Services Scotland where it will be held on the Community Health Index (CHI). This information is used to register you with the GP Practice, transfer your medical records between GP practices in the UK, make payments to GP Practices for medical services provided, and to process and issue medical cards, medical exemption certificates and entitlement cards.

NHS National Services Scotland shares information about you within NHS Scotland to assist in the provision and improvement of NHS services and the health of the public. When we do this, we make sure that the information which identifies you as a person and your health information are separated or anonymised. Health condition and treatment information which could identify you will not be used for research purposes by the NHS unless you have consented to this.

For more information on how NHS National Services Scotland uses your personal information visit www.nhs.uk. If you have any queries or concerns about how your personal information is used by the NHS please ask for the leaflet 'Confidentiality - it's your right', visit the Health Rights Information Scotland website at www.hris.org.uk or ask your GP surgery.

NHS National Services Scotland is the common name of the Common Services Agency for the Scottish Health Service.

5. PATIENT DECLARATION

I declare that the information I have given on this form is correct and complete. I understand that, if it is not, appropriate action may be taken.

To enable NHS National Services Scotland to confirm my eligibility to lawfully register with a GP and for the purposes of prevention, detection, and investigation of crime, relevant information from this form will be disclosed to the NHS Business Services Authority, NHS National Services Scotland, the Home Office, Identity and Passport Service, HM Revenue and Customs, the General Register Office and Local Authorities.

Patient/Patient's representative signature

K. Thompson

Date 9 11 14

Representative's name (if applicable)

Relationship to patient (if applicable)

6. FOR PRACTICE USE

GP reference number

F9178 2

GP name

SUSAN CATTANACH

Practice code

P2143 5

Mileage (No.)

Road

Water

Footpath

Identification seen - do not take or retain photocopies

Please initial each relevant box (it is recommended that at least one form of identification is seen to positively identify the applicant)

Birth
Cert. ☐Student
ID Card ☐Driving
Licence ☐Passport or
HC2 Cert. ☐Home-Office
App Reg Card ☐Other/None
- specify*letter*Receptionist
initials*UR*

I accept this patient onto the practice list and declare that, to the best of my knowledge, this information is correct. I acknowledge that the details may be authenticated from appropriate records, and that payments generated from this patient registration will be subject to Payment Verification.

Authorised Practice
signature*[Signature]*

Date 24 11 2014

7. OFFICIAL USE ONLY

Input by

Checked by

Date

11 11 14

Practice Stamp

Lochgelly Medical Practice
The Health Centre
David St., Lochgelly, KY5 9QZ
Tel: 01592 780277
Fax: 01592 784044

GMSGPR001 v1 (05-2013)

NHS Confidential: Personal data about a patient

LOCHGELLY MEDICAL PRACTICE

Dr. Sam Chaitanach, M.B. Ch.B., Mauricio Martins Da Silva M.B. Ch.B.

HEALTH CENTRE
DAVID STREET
LOCHGELLY
FIFE
KY5 9QZ

Practice Medication: Joanna McDonald

Practice Phone: (01592) 780277

Practice Fax: (01592) 784044

NEW PATIENT REGISTRATION

Dear Patient

The Practice has a policy of trying to meet all new patients on a registration with the Practice. To assist you it would be extremely helpful if you could complete the following details. This information will be held in the strictest confidence.

NAME: KAY THOMSON DATE OF BIRTH: 12/7/84SURNAME: THOMSONADDRESS: 96 MainstreetLochgellyPOSTCODE: KY5 9AAPHONE: 01592 301482FAX: 01592 301482E-MAIL: —E-MAIL ADDRESS: —MARITAL STATUS: Married / Single / Widowed / Divorced / OtherOCCUPATION: Current UnemployedPrevious —NAME OF KIN: Name Maria ThomsonRelationship MotherAddress —Contact Tel No. 01592 861513

Lochgelly Medical Practice

1.11.11

NHS Confidential: Personal data about a patient

MEDICAL HISTORY

Do you have or have you suffered any of the following:-

Asthma: ☒ Yes/☐ NoHeart Disease: ☒ Yes/☐ NoBreathing/Chest Problems: ☒ Yes/☐ NoDiabetes: ☒ Yes/☐ NoHigh Blood Pressure (Hypertension): ☒ Yes/☐ NoEpilepsy: ☒ Yes/☐ NoStroke: ☒ Yes/☐ NoThyroid: ☒ Yes/☐ NoSMOKINGDo you smoke: Yes/☒ No If yes, how many per day10.....

If you were a smoker, how long is it since you stopped?

ALCOHOLDo you drink alcohol? Yes/☒ No If yes, how much per week1 bottle Rosie
WEEK.EXERCISEDo you exercise? Yes/☒ No

If yes can you select one of the following:-

Light exercise

☒ Moderate exercise

Heavy exercise

Lochgelly Medical Practice

1.11.17

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PAST HISTORY

Please list any illnesses, operations or accidents, and the year they occurred.

.....

.....

.....

PRESCRIPTION/TABLETS

Name & Strength

DoseHow Long Taken?

.....		
.....		
.....		
.....		
.....		
.....		

ALLERGIES

Are you known to be allergic or had any upset to any medications?

~~Yes~~ No

Please state the name of the medicine(s):

.....

VACCINATIONS

Approximate date of last Tetanus: ?

Approximate date of last Polio:

Women only -- Approximate date of last Rubella (German Measles)

Medical Practice

1.11.11

NHS Confidential: Personal data about a patient

CARER

Are you a Carer/Do you have a carer? - please delete as appropriate

No

FAMILY HISTORY

Is there a history in your family of the following and state relationship to family member (i.e. mother, grandmother etc)

		<u>Relationship</u>
Asthma:	Yes/ No	Sister
Heart Disease:	Yes /No	
Breathing/Chest Problems:	Yes /No	
Diabetes:	Yes/ No	
High Blood Pressure (Hypertension):	Yes/ No	
Epilepsy:	Yes/ No	Sister
Stroke:	Yes /No	
Thyroid:	Yes/ No	

WOMAN'S SECTION

Are you on the oral contraceptive pill? ~~Yes~~/NO

If so, which one? How long?

Have you any children? YES/~~No~~ How many? 2

Have you had a cervical smear test? YES/~~No~~

Date of last smear test (approx) 5 years or more

Last smear done by: GP/Well Woman or Family Planning Clinic/Hospital

Lochgelly Medical Practice

1.11.11

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We have been directed by the Scottish Office (as agreed by the Commission for Racial Equality) to record the Ethnicity of all patients joining the Practice as from 1st April 2006.

Please tick whichever ethnic group below applies:

9S13	White Scottish	☒	9S9..	Chinese	
9S14	Other white British ethnic group		9SH..	Other Asian ethnic group	
9S11	White Irish		9S2	Black Caribbean	
9S12	Other white ethnic group		9S3	Black African	
9S8	Other ethnic, mixed origin		9SG	Other black ethnic group	
9S6	Indian		9SJ	Other ethnic group	
9S7	Pakistani		9SE	Ethnic group not recorded	
9S8	Bangladeshi		9SD	Ethnic group – patient refused	

PHYSICIAN INFORMATION

Urinanalysis

BP:

106/60

HEIGHT:

162

WEIGHT:

65

PULSE:

91

1.11.11

1.11.11

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Acute Services Division



V Emergency Department

JS Wilson
21435/1
Lochgelly Medical Group
The Health Centre
David Street
Lochgelly fife
Lochgelly
KY5 9QZ

Victoria Hospital
Hayfield Road
Kirkcaldy
KY2 5AH

Dear Doctor

Miss Kay Thomson
98 Main Street
Crosshill
Lochgelly
KY5 8AN

CHI: 1207840483
ED Consultant: Carew, Dr Melvin

The above patient attended the V Emergency Department on 30/05/2017 at 09:41. I outline below some information regarding this attendance.

Present Complaint: fall off quad, vaginal injury

Diagnosis:			
Description	Body Site	Laterality	Comments
Other specified abnormal uterine and vaginal bleeding			

Investigation(s)/Treatment(s):

Medication(s):

Additional Notes (for GP):

your patient was seen in ED and admitted to ward 32, a formal discharge letter will follow

Senior Review:

Senior Review Comments:

Yours sincerely

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Version 1

Page 1 of 2

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Acute Services Division



CATRIONA BUCHAN

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Queen Margaret Hospital
Whitefield Road
Dunfermline
Fife
KY12 0SU

Tel: 01383 623623 <24754>
<http://www.nhsfife.scot.nhs.uk>

**Fife Health
& Social Care
Partnership**



Dr JS Wilson
Lochgelly Medical Group
The Health Centre
David Street
Lochgelly, Fife
KY5 9QZ

ADMINISTRATIVE LETTER



CHI: 1207840483
Hospital ID: SF5533595A

Letter ID: 2327547

Dear Dr Wilson

Date: 25/01/2017

Kay Thomson, 98 Main Street, Crosshill, Lochgelly, Fife, KY5 8AN

Date of Birth: 12/07/1984

Many thanks for referring Ms Thomson with complaints of Mood Swings. We sent her an assessment appointment for today the 24th of January 2017 at 3.30pm at Queen Margaret Hospital. Unfortunately she has not attended and has made no contact. Because of the huge pressure on appointments I am afraid I will not be able to send her any further appointments. However, if in the future her presentation changes please do not hesitate to refer her back to Mental Health Services.

Yours sincerely

Dr Maher Awad
Locum Specialty Doctor - Psychiatry

Authorised on 25/01/2017 15:19:27 by Maher Awad.

Fife Council and NHS Fife are supporting the people of Fife
together through the Fife Health & Social Care Partnership.
www.fifehealthandsocialcare.org



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Victoria Hospital
IMMEDIATE DISCHARGE DOCUMENT

Version: 1

Surname	Thomson	Address	98 Main Street
Forename	Kay		Crosshill
CHI No.	1207840483		Lochgelly
Date of birth	12/07/1984	Postcode	KY5 8AN

GP Copy

Page 1 of 2

Admission Date	30 May 2017	GP	Dr.JS Wilson
Admission Type	Emergency Non-Injury (e.g. Stroke, MI, Ruptured Appendix)	GP Address	Lochgelly Medical Group The Health Centre David Street Lochgelly fife KY5 9QZ
Reason for Admission / Transfer	Acute Admission for treatment - Where the patient is expected to be treated for a diagnosed condition not otherwise specified	GP Practice Code	21435
Discharge Date	30-May-17	Patient's Weight	0 kg
Discharge Ward	V Ward 32	Compliance Aid	No
Discharge To	home		
Discharging Consultant	Lim,Dr Chu Chin		
Specialty	Gynaecology		
Community Pharmacy			
A further transfer/discharge communication will follow this document			

Presenting Complaint

Labia swelling and pain - likely infection

Principal Diagnosis

Labia swelling and pain - likely infection

Clinical Summary

Noticed an ingrown hair - left labia last week. Went quadbiking on Sunday, brakes hit against her labia. Noticed increasing pain and swelling. No bleeding. No difficulties passing urine or opening bowels. No fever/rigors.

Obs stable, apyrexial.

O/E - Left labia majora swelling and erythema. Tender to touch

Imp infection ?abscess ?haematoma

Plan - oral antibiotics for 7 days

To return to ward 32 on Friday for review again

If any worsening symptoms to return to ward 32 - direct number for the ward given

Drug / Type of Preparation	Form	Route of Admission	Dose	Frequency	Course Length	Quantity Supplied
CO-AMOXICLAV 500/125 TABLETS	TABLET	Oral	1 TABLET	Three times a day	7DAYS	At least 7 days
CO-CODAMOL 30/500 TABLETS	TABLET	Oral	2 tablets	Four times a day	st	At least 7 days

Action	Drug Type of Preparation	Reason
Started	CO-AMOXICLAV 500/125 TABLETS	infection
Started	CO-CODAMOL 30/500 TABLETS	pain

Unless otherwise stated, a minimum of 7 days supply has been given for each of the prescribed medicines

Pharmacist's Comments

Pharmacist Assessment	Sign	Print	Date
Dispensed By			
Checked By			
Allergies	nkda		

Prescriber's name	Sadaf Ali	Prescriber Tel No.	Prescriber's Signature
Prescriber's grade		29750	

Please remember to bring your own medications into hospital if you are admitted

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Page 1 of 2

NHS Confidential: Personal data about a patient



**Victoria Hospital
IMMEDIATE DISCHARGE DOCUMENT**

Version: 1

Surname	Thomson	Address	98 Main Street
Forename	Kay		Crosshill
CHI No.	1207840483		Lochgelly
Date of birth	12/07/1984	Postcode	KYS 8AN

GP Copy

Page 2 of 2

Other Diagnoses		
Principal Operation	Date	Consultant
Other Operations		
Clinical Progress and Results Awaited / Investigations Pending		
Patient Information Transfer/Discharge Summary not given to patient and/or carer or relative		
Explanation Given to patient		
Follow Up Arrangements		
Medication not currently prescribed by day hospital		
Fitness note not issued	Duration of Fitness Note	

Prescriber's name	Sadaf Ali	Prescriber Tel No.	Prescriber's Signature
Prescriber's grade		29750	

Please remember to bring your own medications into hospital if you are admitted

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CHI 120784

Date IDD Received 31/5/17

Date Workflowed To GP 31/5/17

Date Medications Dealt With

Date IDD Med Rec Completed

Date Letter to Patient Re Med Changes

Complete
No changes

NHS Confidential: Personal data about a patient

Page 1 of 1

Registration Details - Patient No: 11071

Personal details...		Address details...	
Sex	F	Post Code	KY5 8AN
Surname	Thomson	House Name Flat No	
Previous Surname		No and Street	98 Main Street
Forenames	Kay	Village	
Calling Name	Kay	Town	Crosshill
Date of birth	12/07/1984	County	Fife
Title	Miss		
Birth Surname			
Marital Status	Marital status unknown		
Ethnic Origin	Not Stated		

HA/HB Details...		Contact details...	
Trading partner	Fife	Home Tel No	01592 305865
Registered GP	Dr Susan Cattanach	Work Tel No	
Usual GP	Dr Susan Cattanach	Mobile Tel No	
Residential Inst		E Mail Address	
Branch Surgery			
CHI Number	1207840483		
NHS Number			

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	16/11/2015		

AMS/CMS Details		Imported user defined fields	
AMS Consent	Yes	GPASS Patient ID	
Pharmacy Details		Contact	
Item Collected Check	Yes	Contact Relationship	
CMS Suitability Status	-1		
CMS Registration Status	1		

Medication

Current	Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
None					

7 medications on discharge
for course only.

Oh
no change

Thanks Lynsey.

Medical Record Printout - Patient No: 11071

31/05/2017

NHS Confidential: Personal data about a patient



Fife

Victoria Hospital
IMMEDIATE DISCHARGE DOCUMENT

Version: 1

Surname	Thomson	Address	98 Main Street
Forename	Key		Crosshill
CHI No.	1207840483		Lochgelly
Date of birth	12/07/1984	Postcode	KY5 8AN

GP Copy

Page 1 of 2

Admission Date	30 May 2017	GP	Dr JS Wilson
Admission Type	Emergency Non-Injury (e.g. Stroke, MI, Ruptured Appendix)	GP Address	Lochgelly Medical Group The Health Centre David Street Lochgelly fife KY5 9QZ
Reason for Admission / Transfer	Acute Admission for treatment - Where the patient is expected to be treated for a diagnosed condition not otherwise specified	GP Practice Code	21435
Discharge Date	30-May-17	Patient's Weight	0 kg
Discharge Ward	V Ward 32	Compliance Aid	No
Discharge To	home		
Discharging Consultant	Llm, Dr Chu Chin		
Specialty	Gynaecology		
Community Pharmacy			

A further transfer/discharge communication will follow this document

Presenting Complaint

Labia swelling and pain - likely infection

Principal Diagnosis

Labia swelling and pain - likely infection

Clinical Summary

Noticed an ingrown hair - left labia last week. Went quadbiking on Sunday, brakes hit against her labia. Noticed increasing pain and swelling. No bleeding. No difficulties passing urine or opening bowels. No fever/rigors.

Obs stable, afebrile.

O/E - Left labia majora swelling and erythema. Tender to touch

Imp infection ?abscess ?haematoma

Plan - oral antibiotics for 7 days

To return to ward 32 on Friday for review again

If any worsening symptoms to return to ward 32 - direct number for the ward given

Drug / Type of Preparation	Form	Route of Admission	Dose	Frequency	Course Length	Quantity Supplied
CO-AMOXICLAV 500/125 TABLETS	TABLET	Oral	1 TABLET	Three times a day	7DAYS	At least 7 days
CO-CODAMOL 30/500 TABLETS	TABLET	Oral	2 tablets	Four times a day	st	At least 7 days

Action	Drug Type of Preparation	Reason
Started	CO-AMOXICLAV 500/125 TABLETS	Infection
Started	CO-CODAMOL 30/500 TABLETS	pain

Unless otherwise stated, a minimum of 7 days supply has been given for each of the prescribed medicines

Pharmacist's Comments

	Sign	Print	Date
Pharmacist Assessment			
Dispensed By			
Checked By			
Allergies	nkda		

Prescriber's name	Sadeef Ali	Prescriber Tel No.	28750	Prescriber's Signature
Prescriber's grade				

Please remember to bring your own medications into hospital if you are admitted

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NHS Confidential: Personal data about a patient



Fife

Victoria Hospital
IMMEDIATE DISCHARGE DOCUMENT

Version: 1

Surname	Thomson	Address	98 Main Street
Forename	Kay		Crosshill
CHI No.	1207840483		Lochgelly
Date of birth	12/07/1984	Postcode	KY5 8AN

GP Copy

Page 2 of 2

Other Diagnoses		
Principal Operation	Date	Consultant
Other Operations		
Clinical Progress and Results Awaited / Investigations Pending		
Patient Information Transfer/Discharge Summary not given to patient and/or carer or relative		
Explanation Given to patient		
Follow Up Arrangements		
Medication not currently prescribed by day hospital		
Fitness note not issued	Duration of Fitness Note	

Prescriber's name	Sadeq Ali	Prescriber Tel No.	Prescriber's Signature
Prescriber's grade		20750	

Please remember to bring your own medications into hospital if you are admitted

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<u>Immediate Discharge Document (IDD) Data Collection Form</u>		
Patient Name:	Kay Thomson (45)	
Patient DOB:	12.07.84	
Date of Admission:	30.05.17	
Date of Discharge:	30.05.17	
Hospital Site:	VHK	
Date received by Practice:	31.05.17	
Date passed/workflowed to GP: (must be on the day of receipt by Practice)	31.05.17	
Date medicines reconciliation carried out: (must be within 2 days of receipt by the Practice)	02.06.17	
Were there any changes made to patient's medication: e.g. any started, stopped, altered	NO	
Date patient's record updated with any medication changes:	NO	
Are the reasons for any medication changes detailed in the IDD?	NO	
Is it recorded in the IDD that any significant changes to medications have been discussed with the patient/their carer whilst in Secondary Care?	NO	
Did Secondary Care need to be contacted by a member of staff from the Practice for clarification of any medication changes?	NO	
Additional information: e.g. missing info	NO	
Date any changes to medications have been discussed with the patient or their representative by the Practice: (must be within 7 days of receipt of IDD by the Practice)	N/A	

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Hospital use only	Clinic	Day Date	Time	Hospital No.
-------------------------	--------	-------------	------	-----------------

101014077270T

Unique Care Pathway Number: 101014077270T

Transport required?	REFERRAL LETTER MEDICAL IN CONFIDENCE	Suspected Cancer Site: NOT A CANCER REFERRAL
----------------------------	---	--

GENERAL-PSYCHIATRY-MENTAL-ILLNESS***GENERAL-PSYCHIATRY-MENTAL-ILLNESS***

REFERRAL TO	
General Psychiatry (Mental Illness) G1 Fife General Referral	—— Consultant / receiving practitioner and/or specialty clinic
Queen Margaret Hospital - Mental Health Whitefield Road Dunfermline KY12 0SU	—— Hospital and hospital address Hospital Location Code F001G Email address -
Urgency of referral	Routine

PATIENT DETAILS		Patient's address
Surname	Thomson	98 Main Street Crosshill KY5 8AN
Forename(s)	Kay	
Title	Miss	
Sex	Female	
Date of birth	12-Jul-1984	
CHI no.	1207840483	Contact number(s) Voice: 01592 305865

REFERRING PRACTITIONER DETAILS		Practice address		
Name	Dr. J Sandra Wilson	The Health Centre David Street Lochgelly Fife KY5 9QZ		
GMC code	3109737		GP code	92983
Practice name	Lochgelly Medical Group (21435)			
Practice code	21435			
Contact number(s) Voice: 01592 780277				

Date submitted by practice: 18-Jul-2017
Reason for referral

Care type requested: Out Patient - New
 Expected outcome: Not Specified

Administrative Information

Suspected Cancer Site: NOT A CANCER REFERRAL
 Patient Contact: N/A Not a cancer referral
 Does the patient need to be seen in clinic following
 any investigations: N/A Not a cancer referral
 Patient can accept a short notice appointment: yes
 Interpreter Required: no

Stylesheet version: 16.0.1.3 25-Mar 2013 Comments to: fife-uhb.fife@nhs.net

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CLINICAL INFORMATION**History of presenting complaint / examination findings / investigation results****Presenting complaint**

Description: Labile mood. ? undiagnosed bipolar illness.

Comment: Dear Colleague

I would be grateful if the above 33 year old lady, who I referred last year with a long history of labile mood, possible episodes of depression and who had been concerned that she possibly might have an undiagnosed bipolar illness, could be seen. As mentioned in the original referral she is someone who doesn't present very frequently at the surgery but she gave this history of episodes where her mood is so down that she gets angry with people and has negative thoughts where she won't go out the house and there is a lot of tension between her and at that time her partner, who I don't think she is with at present and has a new relationship. She described herself at that time as somebody with a very short attention span, easily gets, what she describes as "wobblies" and she would have this for days on end and for example, if she has perhaps organised to go on holiday she just won't go, and does quite rash things and what I recall from seeing her previously is that she decided she didn't want to have her dog and suddenly got rid of it and gave it to a friend. On occasions when she's been really down she has been known to cut all hair off and recently when she has presented, ie. when she has been stressed, she has actually started to self harm and has a few superficial lacerations to her forearms, a couple were infected.

After a long consultation and discussion last year I thought perhaps there was an element of depression but it didn't appear to be a straight forward depressive illness and certainly was describing a very chaotic life depending on what her emotions have been and thought perhaps she might have a bipolar illness and hence why the referral to the Psychiatric Services. I gave her a small dose of Citalopram and she was due to come back for review but unfortunately she didn't and unfortunately also did not attend the psychiatric appointment which was arranged in January. She gives the reason that at that time her brother had a few domestic issues and came to live with her, she became distracted and hence forgot to go for her appointment. She was also able to hold down a job for a short period of time but unfortunately this no longer is the case and came back to see me today in an emotional state similar to what she was last year.

I have attached the original referral along with this referral, there is little to add other than as mentioned she has self harmed in recent months. When questioned on what she felt like when on Citalopram she felt it made her mood worse after a short period of time so she discontinued this. Following discussion, as sleep is an issue as well as these major mood swings, we have given her a small supply of Mirtazapine, signed her off for a short period of time but I would be grateful for a review at the Psychiatric Clinic as I still feel there is a possibility this lady does have a bipolar illness and would be grateful for a further opinion.

Many thanks for your help.

Yours sincerely

Dr Sandra Wilson
GP

Our Ref: SW/KA

Examinations and Investigations

Blood Pressure (systolic):	120	-
Blood Pressure (diastolic):	75	-
Height (m):	162	-
Weight (kg):	65	-
Body Mass Index:	24.77	-
As below:		-
Cigarette smoker, 10 Cigarettes/day:	25-Jan-2016	
As below:		-
Alcohol consumption, 9.8 units/week:	24-Nov-2014	
As below :		-
Aerobic exercise 3+ times/week:	25-Jan-2016	

Past Medical History

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Pre-existing conditions (High and Medium Priority)

<u>Description</u>	<u>Modifier</u>	<u>Comment</u>	<u>Date Recorded</u>
Termination of pregnancy	-	-	29-Nov-2014
Depressive disorder NEC	-	-	23-Aug-2012
Patient's condition resolved	-	left kidney	20-Jun-2012
Back pain, unspecified	-	-	01-Apr-2012
Termination of pregnancy	-	-	18-Jan-2012
Spontaneous vaginal delivery	-	male	21-Aug-2010
Spontaneous vaginal delivery	-	female	22-Jul-2003
H/O: behaviour problem	-	-	12-Oct-1999
Drug dependence	-	drug abuse	12-Oct-1999
Overdose of drug	-	-	05-Mar-1998
Enuresis	-	diurnal and nocturnal	15-Jan-1988

Past Procedures (High and Medium priority)

<u>Description</u>	<u>Laterality</u>	<u>Modifier</u>	<u>Comment</u>	<u>Date Recorded</u>
Computerised tomograph scan	-	-	4cm mass left kidney probable focal pyelonephritis	04-Apr-2012
Other diagnostic ultrasound	-	-	-	03-Apr-2012
Cervical smear: negative (GMS (Another Practice))	GMS (Another Practice)	-	-	03-Apr-2012
Other hospital admission NOS	-	-	-	01-Apr-2012
Renal ultrasound	-	-	-	20-Mar-1997
[SO]Renal pelvis NEC	-	-	slight dilation renal pelvis left	20-Mar-1997

Family Conditions (High and Medium priority)

<u>Description</u>	<u>Modifier</u>	<u>Comment</u>
Not known	-	-

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

<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Nil	-	-	-	-	-	-

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

<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Mirtazapine Tablets 15 mg	-	28 TABLET	ONE TO BE TAKEN AT NIGHT	-	14-Jul-2017	28 Days
Flucloxacillin Capsules 500 mg	0501012G0AAABAB	28 CAPSULE	ONE TO BE TAKEN FOUR TIMES A DAY	-	14-Jul-2017	7 Days

Lifestyle risks

Exercise status: Not Known

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Acute Services Division



Q Minor Injuries Unit

JS Wilson
21435/1
Lochgelly Medical Group
The Health Centre
David Street
Lochgelly fife
Lochgelly
KY5 9QZ

Queen Margaret Hospital
Whitefield Road
Dunfermline
KY12 0SU

Dear Doctor

Miss Kay Thomson
98 Main Street
Crosshill
Lochgelly
KY5 8AN

CHI: 1207840483
ED Consultant: Practitioner MIU

The above patient attended the Q Minor Injuries Unit on 12/06/2017 at 03:58. I outline below some information regarding this attendance.

Present Complaint: PAIN BACK OF NECK

Diagnosis:			
Description	Body Site	Laterality	Comments
Cellulitis of other sites	Neck	Back	

Investigation(s)/Treatment(s): 1. Verbal Advice

Medication(s): 1. Flucloxacillin 500mg Capsule 1 QDS

Additional Notes (for GP):

Painful area at back of neck since yesterday. Felt what she thought was a pimple. Area now very painful and tender. 9cm raised, inflamed area on back of neck. Non tender cervical lymph nodes. Baseline observations within normal limits. Feels well otherwise. Given antibiotics and advised to see her GP if worsening symptoms.

Senior Review:

Senior Review Comments:

NHS Confidential: Personal data about a patient

Acute Services Division



Yours sincerely
CHRISTINE HARLEY

Created on 13/06/2017 12:04 by CHRISTINE HARLEY

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Queen Margaret Hospital
Whitfield Road
Dunfermline
Fife
KY12 0SU

NHS Fife Community Service
Mental Health Service
Tel: 01383 627041
<http://www.nhsfife.scot.nhs.uk>

**Fife Health
& Social Care
Partnership**



Dr JS Wilson
Lochgelly Medical Group
The Health Centre
David Street
Lochgelly, Fife
KY5 9QZ



CHI: 1207840483

Letter ID: 2633899

Dear Dr Wilson

Clinic Date: 05/09/2017

Date: 17/10/2017

Kay Thomson, 98 Main Street, Crosshill, Lochgelly, Fife, KY5 8AN**Date of Birth: 12/07/1984**

I saw Ms Thomson in my new patient clinic on 5 September 2017. She was referred by her GP for assessment of labile mood and impulsive behaviour.

Presenting complaint

Kay tells me she only presented to her GP recently because she had had a falling out with her parents over a recent outburst of anger and her father wouldn't speak to her until she saw a doctor. Kay complains of mood swings and impulsive behaviour for many years, stemming back to when she was 10 years old, although says she has had more angry outbursts over the last 3 months, which was precipitated by her ex-partner being violent towards her and then being released on bail.

History of presenting complaint

Kay feels that her biggest problem is her impulsive behaviour and what she calls "wobblies". These are often impulsive and violent. She often ends up with friends and family falling out with her in the wake of one of these "wobblies". They only last for between 2 to 6 hours and she can describe a trigger for most of her major "wobblies", although it seems like sometimes the trigger may be very small. Her "wobbly" can consist of arguing and shouting, up to punching and kicking and, most recently, she slashed her wrist in a rage. They can crop up whether she is in a good mood or a bad mood.

I asked Kay about times when she felt high or happy. She thinks this is mostly her baseline, where she feels like she can do almost anything and take on the world. She describes having very little fear of anyone or anything and this usually lasts for 3 or 4 weeks at a time. She spent 2 weeks redecorating her house, but didn't quite manage to finish the job because she lost interest and got bored and then she paid for a decorator to come and finish the job. Kay admits that she spends quite a lot of money on her clothes, hair and nails and other beauty products, but says she does this because she is constantly trying to change herself as she hates what she sees in the mirror. When she is on one of these 3-4 week periods, she often goes on Tinder, but says this is more a need for attention and that she doesn't want to be alone, rather than a particularly high sex drive. Throughout these periods, she says that she can struggle to get to sleep but then will sleep OK once she falls asleep.

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I also asked Kay about any times when she has felt low. She describes a poor self image, as I mentioned and this is fairly constant regardless of what her mood is. Kay says that her mood varies "depending on who I wake up next to". She is typically sad when she is alone. Kay has taken many impulsive overdoses in the past and was fairly ambivalent whether they or not they could have killed her. In fact she took all 30 of her first prescription of Mirtazapine in one go along with a glass of wine. Kay can struggle to get to sleep at times but then sleeps well through the night.

Current medication

Mirtazapine 30mg. She has been taking this for 6 weeks now and says it has made no difference.

Personal history

Kay was born in Kirkcaldy. She has two sisters and one brother. Kay says that, up until the age of 10 years old, she had loads of friends but then, in her final year of primary school, she got expelled for getting in lots of fights. She tells me that she was the first person to ever be expelled from the primary school. Kay went on to take her first drug overdose at the age of 12. I believe this was Paracetamol. In high school, Kay describes herself as a rebel without a cause and said that she gets a buzz from being the centre of attention and again got expelled for fighting with other pupils. Kay tells me that she was put in a care home at the age of 14, as her parents could no longer cope with her and she was constantly fighting in her local neighbourhood. She describes her early childhood as a happy one and denies any abuse. She tells me that her mum and dad split up when she was about 20 years old and her mum has now come out as a lesbian.

Social history

Kay lives in a private let house in Crosshill. She lives with her son, Reilly, who is 7 and there is Social Work involvement. She also has a 14 year old daughter called Kenzie, who stays with her dad. Kay's first job was in hairdressing, which she did for about one year, but then she fell pregnant at the age of 18, after which she went back to work as a customer services agent in Asda and kept this job for 5 years, until she fell pregnant again. At present, she is in receipt of ESA.

Kay has a forensic history and has been charged with drink driving and was also charged for assault on ambulance staff. Kay tells me that she first used Ecstasy at the age of 14 and has used this regularly, up until her last child was born. She said that she left her baby only a few days old with her parents and was drunk and took drugs basically for 6 months constantly at that time.

Mental state examination

Appearance and behaviour: Kay was well presented in clean and casual clothes. She was wearing make-up and her hair was well kempt. She sat calmly throughout the interview and engaged appropriately.

Speech: I felt Kay was slightly over-talkative. However, this was not pressured and there was no flight of ideas. There was a normal volume, tone, rate and sequence to her speech.

Mood: Kay describes her mood as 10 out of 10 at present. When I asked her why she felt so happy, she said this was because she managed to attend the appointment. Objectively, she did not appear elated.

Thoughts: Kay currently has no thoughts of suicide or self harm, although she feels guilty and embarrassed about her behaviour in the past.

Insight: Kay realises that her behaviour over her adolescent and adult life is not normal and is open to potentially having a mental illness.

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Perceptions: She has no perceptual abnormalities.

Cognition: She is orientated to time, place and person.

Summary

Kay is a 33 year old, unemployed Scottish lady, who gives a long history from 10 years old of up and down mood and impulsive behaviour. She displays several unhelpful personality traits. At present, it is unclear if Kay has Emotionally Unstable Personality Disorder, Attention Deficit Hyperactivity Disorder, Bipolar Affective Disorder or a combination of these.

Treatment plan

1. I have given Kay a screening tool for ADHD, which she will complete and ask her family to complete about her.
2. I have also given Kay information on Emotionally Unstable Personality Disorder and asked her to read through this.
3. I have asked Kay to complete another mood diary, which unfortunately she did not do before this appointment.
4. I will review Kay again in clinic in a couple of months.

Yours sincerely

Dr Richard McClelland
GPST2 to Dr Pujit Gandhi
Consultant in General Adult Psychiatry

Authorised on 17/10/2017 14:02:05 by Richard McClelland (Junior Doctor).

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DR Wilson

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Copy-Pat Bourhill

given concert. to all professions
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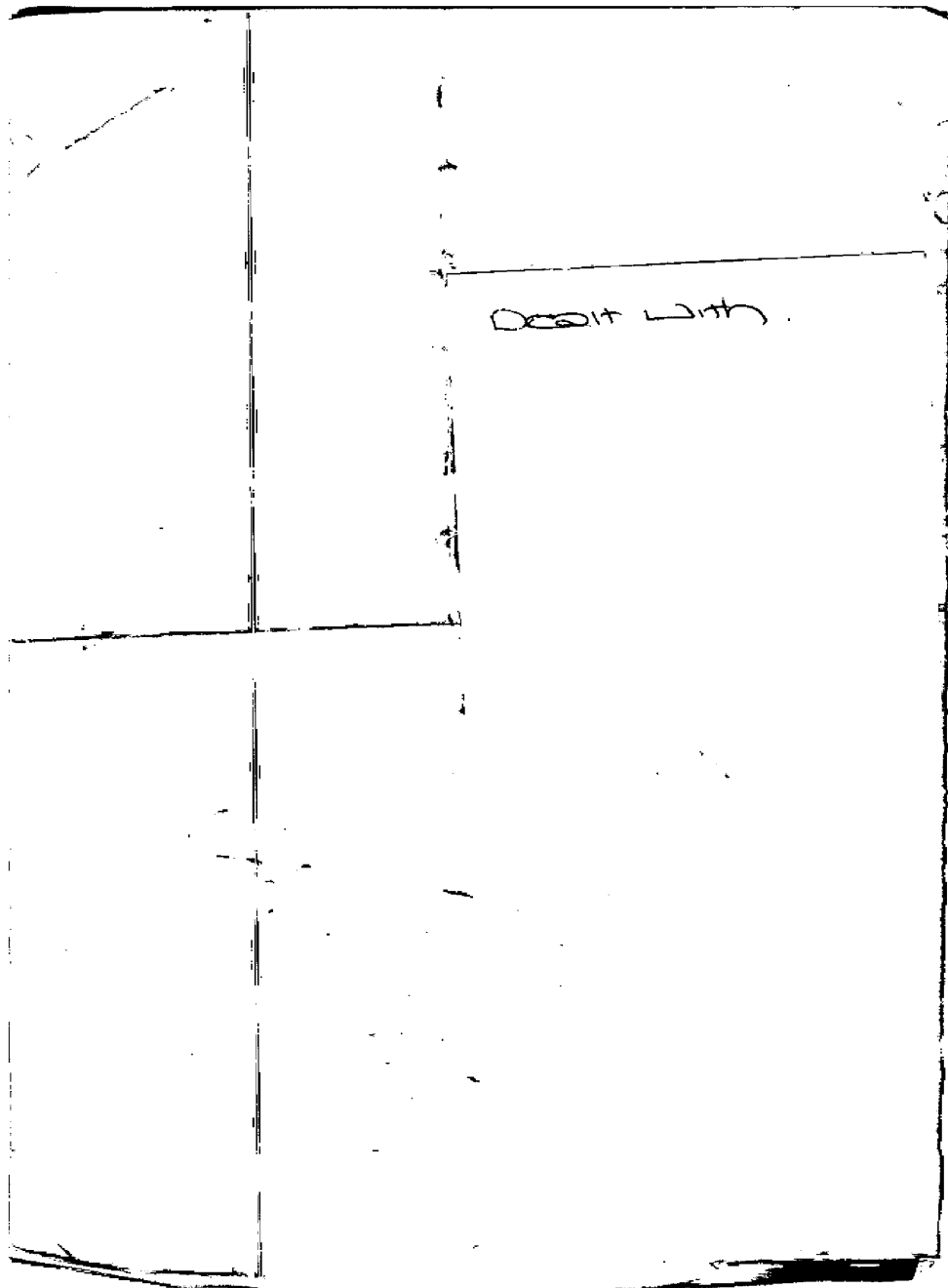
~~Pat~~
all correspondences
Pat. Bourhill@fife.gov.uk
paediatrician ★

Medication
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Any
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PAGE 3 OF 3

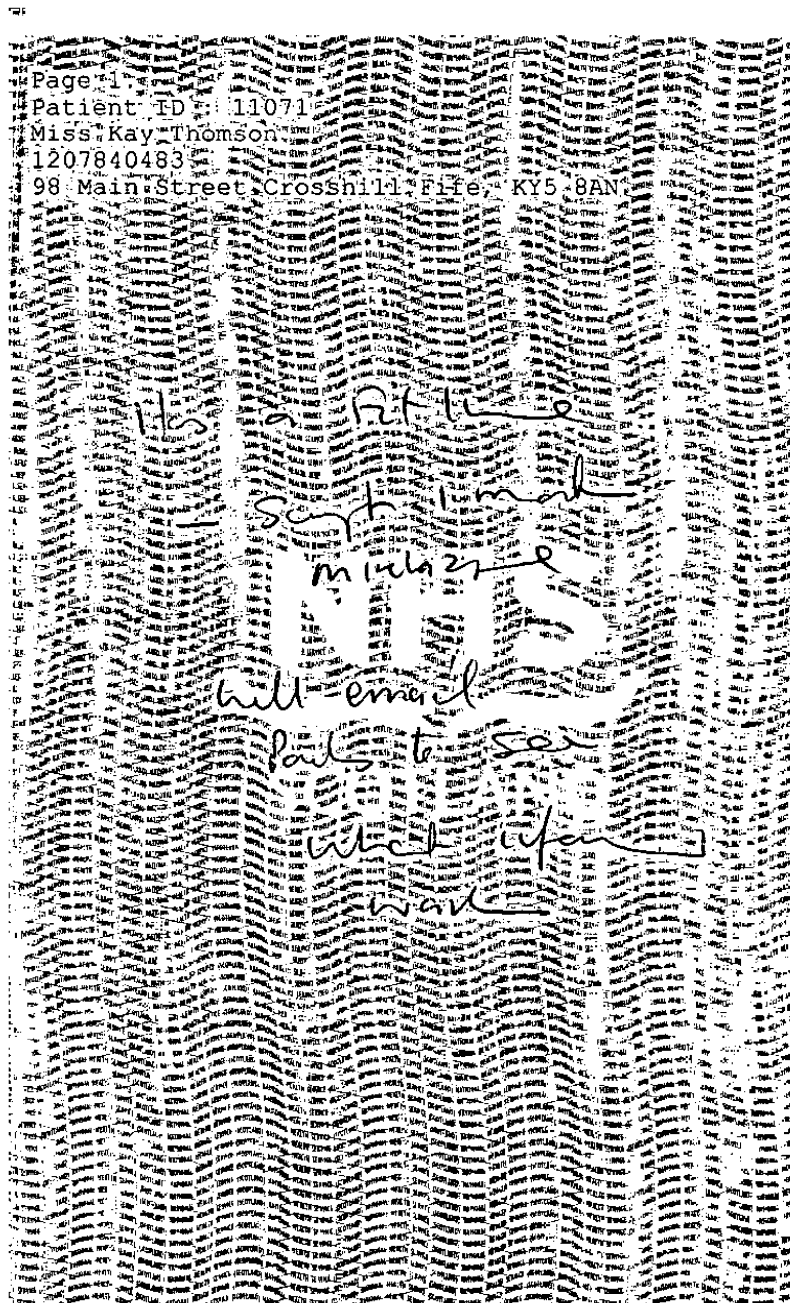
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RE: Clarification for medical informa... - F21435LochgellyCattanach (NHS FIFE)

Page 1 of 3

RE: Clarification for medical information.

Pat Bourhill <Pat.Bourhill@fife.gcsx.gov.uk>

Tue 26/09/2017 13:33

To: F21435LochgellyCattanach (NHS FIFE) <Fife-UHB.F21435LochgellyCattanach@nhs.net>;

Good Afternoon

I am currently the allocated social worker for her son Ryley Smith with whom we have had to place with his grandmother due to his mother's possible mental health issues.

Ms Thomson's behaviours can be quite erratic and bizarre at times as a consequence Ryley informed he did not want to return home to his mother's care after a visit with his grandparents.

Ms Thomson informs she does have mental health problems but she is receiving treatment for this, when asked if she had a diagnosis and was receiving treatment or support for it she informed no.

Ms Thomson has also informed she does not have an issue with alcohol or drugs, this is something which needs to be explored more as social work has received information which contradicts this.

Social work attended a meeting at Ms Thomson's home in order to discuss concerns raised and to look at how the situation could be moved forward, he behaviour during the visit was bizarre at one point she left and went and put a body belt on and started to lift weights, despite a meeting taking place to discuss Ryley.

Is it possible to call and discuss the concerns which have been raised about Ms Thomson can you also confirm if she is currently being seen by Dr Ghandi.

From: F21435LochgellyCattanach (NHS FIFE) [mailto:Fife-UHB.F21435LochgellyCattanach@nhs.net]

Sent: 26 September 2017 13:08

To: Pat Bourhill <Pat.Bourhill@fife.gov.uk>

Subject: Clarification for medical information.

Dear Sir/Madam,

I have been asked to contact yourself with regarding one of our patients, a Kay Thomson, with the intention of providing a short medical report about the lady. She has given me a hand written note saying that she has given consent for this information to be disclosed but the note is quite disjointed and I would like some clarification that you have been involved with the lady and if you are looking for some medical information regarding her.

Yours sincerely

<https://email.nhs.net/owa/Fife-UHB.F21435LochgellyCattanach@nhs.net/>

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RE: Clarification for medical informa... - F21435LochgellyCattanach (NHS FIFE)

Page 2 of 3

Dr J Sandra Wilson
 GP
 Lochgelly Medical Practice (F21435 Dr Susan Cattanach and Dr Sandra J Wilson)
 The Health Centre
 David Street
 Lochgelly
 Fife
 KY5 9QZ

Telephone number - 01592 780277

Fax number - 01592 784044

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Clarification for medical information. - F21435LochgellyCattanach (NHS FIFE)

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Clarification for medical information.

F21435LochgellyCattanach (NHS FIFE)

Tue 26/09/2017 13:07

To: pat.bourhill@fife.gov.uk <pat.bourhill@fife.gov.uk>

Dear Sir/Madam,

I have been asked to contact yourself with regarding one of our patients, a Kay Thomson, with the intention of providing a short medical report about the lady. She has given me a hand written note saying that she has given consent for this information to be disclosed but the note is quite disjointed and I would like some clarification that you have been involved with the lady and if you are looking for some medical information regarding her.

Yours sincerely

Dr J Sandra Wilson
GP*Lochgelly Medical Practice (F21435 Dr Susan Cattanach and Dr Sandra J Wilson)**The Health Centre**David Street**Lochgelly**Fife**KY5 9QZ**Telephone number - 01592 780277**Fax number - 01592 784044*

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Acute Services Division



V Emergency Department

JS Wilson
21435/1
Lochgelly Medical Group
The Health Centre
David Street
Lochgelly fife
Lochgelly
KY5 9QZ

Victoria Hospital
Hayfield Road
Kirkcaldy
KY2 5AH

Dear Doctor

Miss Kay Thomson
98 Main Street
Crosshill
Lochgelly
KY5 8AN

CHI: 1207840483
ED Consultant: Dr Maggie Currer

The above patient attended the V Emergency Department on 11/10/2017 at 05:53. I outline below some information regarding this attendance.

Present Complaint: O.D

Diagnosis:			
Description	Body Site	Laterality	Comments
Acute Intox Due To Multiple Drug Use And Use Of Psychoactive Substances			
ED diagnosis - Neurology - Pseudoseizure			

Investigation(s)/Treatment(s):

Medication(s):

Additional Notes (for GP):
Admitted ED Observation Ward

Your patient has been admitted to hospital for further investigations/treatment. A final discharge letter will be issued from the admitting speciality team.

Created on 11/10/2017 09:06 by Mohammed Naveed

Version 1

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Acute Services Division



Senior Review:
Senior Review Comments:

Yours sincerely
Mohammed Naveed

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Pat Bourhill <Pat.Bourhill@fife.gcsx.gov.uk>

Mark as unread

Wed 25/10/2017 15:30

To: F21435LochgellyCattanach (NHS FIFE);

Good afternoon

I would like to take this opportunity to say thank you for your support with Ms Thomson, I have managed to make contact with Dr McClelland at OMH and he has agreed to keep me updated. Based on the information provided Ms Thomson son will remain in the care of his grandparents. I am seeking your support with another family [REDACTED] education have raised concerns about Mum's mental health and her ability to care for her daughter [REDACTED]

On meeting with mum she advised that she has had an issue with her hear she informs she has had an issue with blood clots and has been unwell, when asked who has been supporting her health wise she refused to discuss, when asked about her mental health she refused to discuss. Not only has education had concerns about mum's mental health but her family having being reporting their concerns. Elise has now been placed with her aunt as her school attendance and engagement in education has fallen below 40%.

Education reports that they have major concerns about Elise and the home environment, on gaining entry the home was found to be well below standard, there were considerable pets running around the house. On trying to assess both education and social work found it extremely difficult.

A meeting was convened today at school, however while mum attended when she was informed of who was attending and why she took off at speed in her car.

What I am looking for is information as to whether there are health care concerns and if so who are the professionals involved. This information is required as we are looking towards applying statutory measures in order to ensure the health, well-being and safety.

Regards Pat

From: F21435LochgellyCattanach (NHS FIFE) [mailto:Fife-UHB.F21435LochgellyCattanach@nhs.net]
Sent: 26 September 2017 13:08
To: Pat Bourhill <Pat.Bourhill@fife.gov.uk>
Subject: Clarification for medical information.

Dear Sir/Madam,

I have been asked to contact yourself with regarding one of our patients, a Kay Thomson, with the intention of providing a short medical report about the lady. She has given me a hand written note saying that she has given consent for this information to be disclosed but the note is quite disjointed and I would like some clarification that you have been

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Queen Margaret Hospital
Whitfield Road
Dunfermline
Fife
KY12 0SU

NHS Fife Community Service
Mental Health Service
Tel: 01383 627041
<http://www.nhsfife.scot.nhs.uk>

**Fife Health
& Social Care
Partnership**



Dr JS Wilson
Lochgelly Medical Group
The Health Centre
David Street
Lochgelly, Fife
KY5 9QZ



CHI: 1207840483

Letter ID: 2717453

Dear Dr Wilson

Clinic Date: 07/11/2017

Date: 22/11/2017

Kay Thomson, 98 Main Street, Crosshill, Lochgelly, Fife, KY5 8AN**Date of Birth: 12/07/1984**

I reviewed Kay in outpatient clinic on 7 November 2017. Kay attended this appointment alone.

Since our last meeting, Kay's son, Riley, has been taken into care. This was following Kay's presentation to the Accident and Emergency Department, having seizures which were felt to be related to a recreational Pregabalin overdose. Kay had also been taking Valium, which she bought on the street and thinks that it was a bad batch, as some of her friends were also unwell. She denies any suicidal intent at the time.

I reviewed Kay's history again today and can find no prolonged periods of elated mood or excess energy. Kay describes her highs basically as any time that she is not feeling depressed. When she is "high", she says that she doesn't stop and think things through and, although realises there will be consequences to her actions, does not care about these. She says that her misbehaviour in the past has been to get a buzz. She also described an incident where she had been feeling relatively normal, but then saw someone who she disliked and felt like she wanted to burn down their house. Instead of doing this, she went and got some petrol and put it in her sink, before setting fire to it "to see how quickly it burns".

Kay has told me that, sometimes whenever she is feeling low she won't want to leave the house, this can last for up to one week. She will mostly stay in bed and lack motivation to get dressed. However, even through these periods, she tells me that she is able to get herself up and dressed and care for her son. I asked Kay to keep a mood diary, which again she has not managed to do. She also did not manage to complete the ADHD screening tool and said, although she tried, her mum laughed when she asked her to do it.

Today, I went through the Zanarini Rating Scale for Borderline Personality Disorder with Kay. A score of 8 or more is indicative of a diagnosis of Borderline Personality Disorder and Kay scored 10 out of 10. Kay agreed that most of her closest relationships have been troubled by lots of arguments and repeated break-ups. She finds that she can be extremely moody, angry and impulsive a lot of the time. Today, Kay admitted that she has felt empty for as long as she can remember and has no clear idea of who she

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is. Kay often feels lonely, even when she is with people and worries about being abandoned by them. She also admits to multiple previous attempts at self harm. I explained to Kay that she has Emotionally Unstable Personality Disorder and again given her information about this.

Mental state examination today

Appearance and behaviour: Kay was well kempt, wearing make-up and clean clothes. She sat calmly throughout our appointment.

Speech: Kay spoke in a normal rate, rhythm and tone with normal volume and in a logical sequence.

Mood: Although Kay describes her mood again as "great 10/10", she is sad about her son and was appropriately tearful when talking about him.

Affect: Affect was reactive.

Thoughts: No suicidal ideation. No thoughts of self harm and is motivated to get her son back.

Plan

1. I will refer Kay to Hillview Day Hospital's Emotional Resources Group, which she is happy to attend.
2. I will review her again in the middle of December.
3. **Kay has been on Mirtazapine for a couple of months and feels like it hasn't helped at all, so she wishes to stop this, which I have agreed with.**
4. Kay also admits that she has been drinking approximately 250ml of wine per night and more at the weekend, as well as taking regular street Valium and Pregabalin. I might consider a low dose of Quetiapine for her, if she is able to remain abstinent from illicit drugs.

Yours sincerely

Dr Richard McClelland
GPST2 to Dr Derek Marshall
Locum Consultant Psychiatrist

Authorised on 08/12/2017 10:33:30 by Richard McClelland (Junior Doctor).

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RE: Clarification for medical information.

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Pat Bourhill <Pat.Bourhill@fife.gcsx.gov.uk>

Tue 31/10/2017 07:40

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To: F21435LochgellyCattanach (NHS FIFE);

Good Morning Dr Watson

Can you advise me if you have heard anything further from either Dr Ghandi or Dr McClelland about Ms Kay Thomson. On speaking with Dr McClelland he informed that an appointment was pending with Ms Thomson and he would be sending out the details, I requested to be cc into the letter, but to date I have not heard anything back.

We are holding another Care and Well-being meeting for Ryley on the 14th November at St Kenneth's as Ms Thomson wants to have contact with Ryley in her own home unsupervised.

Social work want to ensure Ms Thomson is in the right farm of mind for this, as we cannot allow Ryley to be the subject of further trauma as a consequence of his mother's actions.

Can you feedback to me once you hear from health, as I think the information from health will be vital in respect of what treatment if any is provided for Ms Thomson, thus enabling us to plan for Ryley's future.

Thank-you

From: F21435LochgellyCattanach (NHS FIFE) [mailto:Fife-UHB.F21435LochgellyCattanach@nhs.net]

Sent: 26 September 2017 13:08

To: Pat Bourhill <Pat.Bourhill@fife.gov.uk>

Subject: Clarification for medical information.

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Yours sincerely

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Dept of MEDICAL MICROBIOLOGY and INFECTION CONTROL

North Laboratory, Victoria Hospital, Kirkcaldy- Telephone 01592 643355 EXT 28820

Surname : THOMSON D.O.B. :12 Jul 1984 Sex : F
Forename : Kay Case No:V306915B CHI No :1207840483
Address : 96 MAIN STREET LOCHGELLY
Post Code : KY5 9AA

Report to : Dr S. CATTANACH Origin:Lochgelly Health Centre
: Lochgelly Health Centre
: David Street

Clin. det.: Clinical Details: ? infection

Lab Number: S7888360 Specimen:First void urine Date taken: 16 Nov 2017
Time taken:12:19

Chlamydia trachomatis.... NOT detected
Neisseria gonorrhoea..... NOT detected

In Fife, Chlamydia infection is most prevalent in females under 25 and males under 30 years. Testing should be restricted to patients in these age groups unless there are risk factors for STI. When managing non-pregnant females with vaginal discharge, please see the NHS Fife algorithm "High Vaginal Swabs and the Management of Vaginal Discharge".
[<http://fife-lmc.org.uk/Supporting%20Papers/high%20vaginal%20swabs.pdf>]

Note, only COBAS collection kits are suitable for chlamydia testing. See NHS Fife intranet for more information.

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Miss K Thomson - F21435LochgellyCattanach (NHS FIFE)

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Miss K Thomson

F21435LochgellyCattanach (NHS FIFE)

Thu 09/11/2017 11:03

To:pat.bourhill@fife.gov.uk <pat.bourhill@fife.gov.uk>;

Dear Mrs Bourhill,

I have received several e-mails from you on my return from my weeks holiday regarding our patient, Miss Thomson. Since I spoke to you with regarding this lady I haven't actually seen her but she has been to the surgery on 2 occasions. One occasion on the 17th October when she saw Dr Hendrickx and again on the 27th October when she was reviewed by Dr Hendrickx .

On the last consultation on the 27th October it was noted she was doing a lot better. She was bright, alert, smiling and chatty. She was encouraged to continue to stay of any alcohol or medication and she is due to be reviewed by myself on the 17th November.

A further e-mail was received asking whether the lady has seen Dr Gandhi or Dr McLelland. I have no documentation received that she has been seen by either of them and certain Dr Gandhi has moved to another area and it will be a different Consultant. The waiting time to be seen by Psychiatry Services is sometimes often 6-8 weeks.

I am due to review the lady, as mentioned above, and I think I would be in a better position then to give you further details regarding Miss Thomson at that time.

Yours sincerely

Dr J Sandra Wilson
GP

Our Ref: SW/CD
Lochgelly Medical Practice (F21435 Dr Susan Cattanach and Dr Sandra J Wilson)
The Health Centre
David Street
Lochgelly
Fife
KY5 9QZ

Telephone number - 01592 780277<https://email.nhs.net/owa/Fife-UHB.F21435LochgellyCattanach@nhs.net/>

09 11 2017

Fax number - 01592 784044

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<https://email.nhs.net/owa/Fife-UHB.F21435LochgellyCattanach@nhs.net/>

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Hospital use only	Clinic	Day Date	Time	Hospital No.
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101015125714Q

Unique Care Pathway Number: 101015125714Q

Transport required?

REFERRAL LETTER

MEDICAL IN CONFIDENCE

Suspected Cancer Site:
NOT A CANCER REFERRAL

NEUROLOGY

NEUROLOGY

REFERRAL TO	
Neurology AH Fife General Referral	— Consultant / receiving practitioner and/or specialty clinic
Victoria Hospital Hayfield Road Kirkcaldy KY2 5AH	— Hospital and hospital address Hospital Location Code F704H Email address -
Urgency of referral Routine	

PATIENT DETAILS		Patient's address
Surname	Thomson	98 Main Street Crosshill KY5 8AN
Forename(s)	Kay	
Title	Miss	
Sex	Female	
Date of birth	12-Jul-1984	
CHI no.	1207840483	Contact number(s) Voice: 01592 305865

REFERRING PRACTITIONER DETAILS		Practice address		
Name	Dr. J Sandra Wilson	The Health Centre David Street Lochgelly Fife KY5 9QZ		
GMC code	3109737		GP code	92983
Practice name	Lochgelly Medical Group (21435)			
Practice code	21435			
Contact number(s) Voice: 01592 780277				

Date submitted by practice: 19-Dec-2017

Reason for referral

Care type requested: Out Patient - New

Expected outcome: Not Specified

Administrative Information

Suspected Cancer Site: NOT A CANCER REFERRAL

Patient Contact: N/A Not a cancer referral

Does the patient need to be seen in clinic following any investigations: N/A Not a cancer referral

Patient can accept a short notice appointment: yes

Interpreter Required: no

Stylesheet version: 16.0.1.3 25-Mar 2013 Comments to: fife-uhb.fifecc@nhs.net

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CLINICAL INFORMATION**History of presenting complaint / examination findings / investigation results****Presenting complaint**

Description: Changes in behaviour, concentration and memory problems.

Comment: Dear Colleague

I would be grateful if you could see and advise regarding this 33 year old lady who has been seen in the surgery over the last 6/9 months with quite erratic behavior which was thought in part to be related to intermittent use of recreational Pregabalin, sometimes some Valium and some other street drugs, although this is only on occasions and not on a regular basis. Prior to the use of these drugs Kay has always described that she has had problems with periods of elated moods and bountiful amounts energy and then major dips and episodes of depression. More recently these mood swings seem to be more intense and she has presented at the surgery on occasions with quite bizarre behavior, which she says has only been in the last few months and in her words "after she had what she describes as a fit". On looking through her records there has been no episodes of epilepsy but she was seen in A&E in an acute intoxicated state after multiple drug use and I think this is the episode that she has describing.

In recent weeks she has been complaining that her memory is poor, she is lethargic, concentration is not good and she feels in general there has been a change which has been more acute as mentioned in the last few months. She doesn't complain of headaches as such, there has been no vomiting and no visual disturbance.

On examination her observations were normal, pulse 94, blood pressure 115/87, pupils equal and reactive to light and accommodation, fundoscopy was normal and there were no gross neurological abnormalities noted.

She recently had all her routine bloods checked, the results not available as yet. I explained to Kay I think the intermittent use of sometimes alcohol and drugs, as mentioned above, are much more likely to be causing these changes in behaviour and concentration and memory problems. But she is insistent she feels there is something different that has happened and I wonder if we shouldn't just assume it is related to her lifestyle and whether she needs a CT scan and further assessment.

Many thanks for your help.

Yours sincerely

Dr Sandra Wilson
GP

Our Ref: SW/KA

Examinations and Investigations

Blood Pressure (systolic):	120	-
Blood Pressure (diastolic):	75	-
Height (m):	162	-
Weight (kg):	65	-
Body Mass Index:	24.77	-
As below:		-
Not interested in stopping smoking:	16-Nov-2017	
As below :		-
Alcohol consumption, 9.8 units/week:	24-Nov-2014	
As below :		-
Aerobic exercise 3+ times/week:	25-Jan-2016	

Past Medical History**Pre-existing conditions** (High and Medium Priority)

<u>Description</u>	<u>Modifier</u>	<u>Comment</u>	<u>Date Recorded</u>
[D]Seizure NOS	-	Due to social Pregabalin use	11-Oct-2017
		- acute intoxication due to multiple drug use and use	11-Oct-

Overdose of drug	-	of psychoactive substances.	2017
Termination of pregnancy	-	-	29-Nov-2014
Depressive disorder NEC	-	-	23-Aug-2012
Patient's condition resolved	-	left kidney	20-Jun-2012
Back pain, unspecified	-	-	01-Apr-2012
Termination of pregnancy	-	-	18-Jan-2012
Spontaneous vaginal delivery	-	male	21-Aug-2010
Spontaneous vaginal delivery	-	female	22-Jul-2003
H/O: behaviour problem	-	-	12-Oct-1999
Drug dependence	-	drug abuse	12-Oct-1999
Overdose of drug	-	-	05-Mar-1998
Enuresis	-	diurnal and nocturnal	15-Jan-1988

Past Procedures (High and Medium priority)

<u>Description</u>	<u>Laterality</u>	<u>Modifier</u>	<u>Comment</u>	<u>Date Recorded</u>
Computerised tomograph scan	-	-	4cm mass left kidney probable focal pyelonephritis	04-Apr-2012
Other diagnostic ultrasound	-	-	-	03-Apr-2012
Cervical smear: negative (GMS (Another Practice))	GMS (Another Practice)	-	-	03-Apr-2012
Other hospital admission NOS	-	-	-	01-Apr-2012
Renal ultrasound	-	-	-	20-Mar-1997
[SO]Renal pelvis NEC	-	-	slight dilation renal pelvis left	20-Mar-1997

Family Conditions (High and Medium priority)

<u>Description</u>	<u>Modifier</u>	<u>Comment</u>
Not known	-	-

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

<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Nil	-	-	-	-	-	-

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

<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Phenergan Tablets 25 mg	0304010W0BBABAL	28 tablet	ONE TO BE TAKEN AT NIGHT	-	15-Dec-2017	28 Days
Flucloxacillin Capsules 500 mg	0501012G0AAABAB	28 CAPSULE	ONE TO BE TAKEN FOUR TIMES A DAY	-	15-Dec-2017	7 Days
Flucloxacillin		28	ONE TO BE		17-Nov-	

Capsules 500 mg	0501012G0AAABAB	CAPSULE	TAKEN FOUR TIMES A DAY	-	2017	7 Days
Zopiclone Tablets 3.75 mg	0401010Z0AAACAC	7 TABLET	ONE TO BE TAKEN AT NIGHT	-	27-Oct-2017	42 Days
Zopiclone Tablets 3.75 mg	0401010Z0AAACAC	7 TABLET	ONE TO BE TAKEN AT NIGHT	-	17-Oct-2017	7 Days
Mirtazapine Tablets 30 mg	0403010AAAAAAA	28 TABLET	ONE TO BE TAKEN AT NIGHT	-	22-Sep-2017	28 Days

Lifestyle risks

Exercise status: Not Known

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Acute Services Division



Q Minor Injuries Unit

JS Wilson
21435/1
Lochgelly Medical Group
The Health Centre
David Street
Lochgelly fife
Lochgelly
KY5 9QZ

Queen Margaret Hospital
Whitefield Road
Dunfermline
KY12 0SU

Dear Doctor

Miss Kay Thomson
98 Main Street
Crosshill
Lochgelly
KY5 8AN

CHI: 1207840483
ED Consultant:MIU Practitioner

The above patient attended the Q Minor Injuries Unit on 17/11/2017 at 23:46. I outline below some information regarding this attendance.

Present Complaint: swelling r middle finger

Diagnosis:			
Description	Body Site	Laterality	Comments
ED diagnosis - Diagnosis not known - Redirection - ED Nurse led policy			

Investigation(s)/Treatment(s):

Medication(s):

Additional Notes (for GP):

I did not see this patient

There has been a processing fault which has been flagged as a Governance issue which is been addressed.

If you have a clinical concern re the delay of the EDL please contact andrew.kinnon@nhs.net -
Emergency Department Consultant

Senior Review:

NHS Confidential: Personal data about a patient

Acute Services Division



Senior Review Comments:

Yours sincerely
CHRISTINE HARLEY

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Queen Margaret Hospital
Whitefield Road
Dunfermline
Fife
KY12 0SU

NHS Fife Community Service
Mental Health Service
Tel: 01383 627041
<http://www.nhsfife.scot.nhs.uk>

**Fife Health
& Social Care
Partnership**



Hillview Day Hospital
Phase I
Queen Margaret Hospital
Whitefield Road
Dunfermline
KY12 0SU



CHI: 1207840483

Letter ID: 100177353

Dear Colleagues

Referral Date: 08/12/2017

Date: 13/12/2017

Kay Thomson, 98 Main Street, Crosshill, Lochgelly, Fife, KY5 8AN

Date of Birth: 12/07/1984

I would be grateful if you could assess Kay for her suitability for either the Relaxation Group or the Emotional Resources Group – whichever you find most suitable.

I enclose a copy of my clinical letters for your information.

Yours faithfully

Dr Richard McClelland
GPST2 to Dr Derek Marshall
Locum Consultant Psychiatrist

Authorised on 14/12/2017 13:00:21 by Richard McClelland (Junior Doctor).

(D) Dr JS Wilson, Lochgelly Medical Group, The Health Centre, David Street, Lochgelly, Fife, KY5 9QZ

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www.fifehealthandsocialcare.org



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Queen Margaret Hospital
Whitfield Road
Dunfermline
Fife
KY12 0SU

NHS Fife Community Service
Mental Health Service
Tel: 01383 627041
<http://www.nhsfife.scot.nhs.uk>

**Fife Health
& Social Care
Partnership**



Dr JS Wilson
Lochgelly Medical Group
The Health Centre
David Street
Lochgelly, Fife
KY5 9QZ



CHI: 1207840483

Letter ID: 2751707

Dear Dr Wilson

Clinic Date: 08/12/2017

Date: 13/12/2017

Kay Thomson, 98 Main Street, Crosshill, Lochgelly, Fife, KY5 8AN**Date of Birth: 12/07/1984**

I reviewed Kay in outpatient clinic on 8 December 2017. Kay attended this appointment alone.

Over the last 3 weeks, Kay has been spending more time with her son, Reilly, again. She enjoys spending time with him and is very motivated to regain custody of him. Kay has been abstaining from any illicit drugs; however, has been drinking approximately 2 glasses of wine most nights. She has had several more agitated and irritable episodes over the past couple of weeks, which have all coincided with her alcohol use. We discussed almost all of the examples of Kay's bad behaviour over the past few years being related to alcohol use and she accepts that this is a regular contributing factor. She does not feel that she needs any help to cut down her drinking and tells me that she will do her best to make a change. We also discussed distraction techniques for whenever she was feeling angry or irritable, such as listening to music, colouring in and exercise. Kay tells me that she already does this and then reverts to alcohol when it doesn't work.

Mental state examination

Kay was well dressed in appropriate clothes for the season, with her hair and make-up done carefully. She maintained good eye contact and engaged well throughout the appointment. Her speech was of normal rate, rhythm, tone and volume and in a logical sequence. Her mood has been a bit up and down, but is generally OK and her affect was reactive. Kay has got no thoughts of self harm or thoughts of suicide. She has good insight into her current difficulties and how they have caused negative effect on her behaviour.

I have not arranged to see Kay again; however, she is very motivated to attend Hillview Day Hospital for either Relaxation therapy or Emotional Resource management strategies. I will ensure a referral has been sent to the Hillview Day Hospital team.

Yours sincerely

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www.fifehealthandsocialcare.org



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Dr Richard McClelland
GPST2 to Dr Derek Marshall
Locum Consultant Psychiatrist

Authorised on 18/12/2017 14:07:28 by Richard McClelland (Junior Doctor).

(P) Hillview Day Hospital, Phase I, Queen Margaret Hospital, Whitefield Road, Dunfermline, KY12
0SU

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jobcentreplus

Website: www.jobcentreplus.gov.uk

02546
Dr Wilson
LOCHGELLY MEDICAL CENTRE
1 DAVID STREET
LOCHGELLY
FIFE
KY5 9QZ

Your reference is JJ628431D
Please tell us this number
if you get in touch with us

ESA Bathgate
Mail Handling Site A
Wolverhampton
WV98 2AW

Phone 0345 6088545
TEXTPHONE for the deaf/hard of
hearing ONLY 0845 6088551

Date 13 December 2017

Dear Dr Wilson,

Work Capability Assessment Outcome Notification

**RE: Miss. Kay Thomson, DOB 12 July 1984, 98 Main St, Crosshill, Lochgelly Fife
KY5 8AN**

~~This patient has been claiming Employment and Support Allowance. We recently assessed
their ability to work using the Work Capability Assessment.~~

WCA Effective Date 6 October 2017

Customers with potential capability for work enter the Work-Related Activity group, whilst
those who have limited or no capability for work related activity enter the support group

This patient meets, or is treated as meeting the eligibility criteria for Employment and
Support Allowance [Work related activity group/Support group].

You no longer need to issue an NHS medical certificates for this person's claim to benefit.
However we may need to contact you for further information about this person's illness or
disability in the future.

Proof of illness or disability may still be required for other interest groups or organisations
such as employers or insurance companies. The provision of this information is not usually a
NHS requirement.

If your patient makes another claim for benefit in the future, we will require medical
certificates from the date of illness or disability.

If you want to ask us anything about this letter please get in touch with us. Our phone
number and address are at the top of the letter.

Yours sincerely

Sharon Collins

Manager

7734/0038

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Fife Area Laboratory

HAEMATOLOGY

Surname : THOMSON D.O.B : 12 Jul 1984 Sex : F
Forename : Kay Case No : V306915B CHI :1207840483
Address : 96 MAIN STREET Post code : KY5 9AA
: LOCHGELLY

Sender : Dr Sandra WILSON
Hosp/Surg : Lochgelly Health Centre
: David Street

Clin. det.: Clinical Details: altered behaviour , ? fit , low
: mood , poor memory

Labno.	7956521\5	7806507\5	7525152\5
Date	15/12/17	11/10/17	30/05/17
WBC	8.0	8.9	11.1H
RBC	3.87	4.09	4.06
HGB	125.0	131.0	128.0
Hct	36.7	37.9	36.7
MCV	94.8	92.7	90.4
MCH	32.3H	32.0	31.5
MCHC	341.0	346.0H	349.0H
PLT	266	270	236
RDW	12.8	12.0	12.0
Neut	4.65	4.41	7.28H
Lymph	2.37	2.63	2.34
Mono	0.77	0.82	0.78
Eos	0.13	0.96H	0.67H
Baso	0.03	0.06	0.06

Date and time of collection: 15 Dec 2017 22:21
Date and time of report: 16 Dec 2017 03:10
Specimen type: Venous Blood

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**Fife NHS Board
Acute Services Division**

Telephone 01592 643355
www.nhsfife.org



Vetting Outcome - Back to Referrer GP Letter

19/12/2017

DR JS Wilson
Lochgelly Medical Group
The Health Centre
David Street
Lochgelly fife
KY5 9QZ

Dear Dr JS Wilson

Patient Name: Miss Kay Thomson
CHI Number: 1207840483
Referral Date: 19/12/2017

Thank you for your referral. On this occasion I am unable to offer a consultation to your patient.

Please see the following reasons:

The history mentioned wouldn't make primary neurological assessment helpful; I think Miss Thomson would benefit more from assessment in Psychiatry.

If required I am sure Psychiatry could request a brain scan for Ms Thomson, but for the purpose of your reassurance you could simply write a letter to the Radiologist on call and you can mention my support for your request; typically the Radiologist will be happy with such requests.

I am happy to discuss this with you over the phone; I am on call this and next week.

Yours sincerely

Dr Uwe Spelmeyer

VT204GP



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Fife Area Laboratory CLINICAL BIOCHEMISTRY

Surname: THOMSON Forename: Kay D.o.B.: 12 Jul 1984 Sex: F Case No: V306915B
Address: 96 MAIN STREET LOCHGELLY Post code: KY5 9AA CHI: 1207840483
Cons/GP: Dr Sandra WILSON Source: Lochgelly Health Centre
David Street

Current clin. details: Clinical Details: altered behaviour, ? fit, low mood, poor memory

	Date	15/12/17	11/10/17
	Time	22:21	06:31
	Labno.	7956521\5	7806507\5
Sodium		141	144
(133-146 mmol/L)			
Potassium		4.1	3.9
(3.5-5.3 mmol/L)			
Bicarbonate			23
(22-29 mmol/L)			
Urea			2.1L
(2.5-7.8 mmol/L)			
Creatinine		66	67
(50-100 umol/L)			
eGFR		> 60	> 60
(mL/min)			
AKI		ND	ND
Glucose		4.7	5.2
(3.3-6.1 mmol/L)			
Calcium			2.23
(2.2-2.6 mmol/L)			
Corrected calcium			2.26
(2.2-2.6 mmol/L)			
Albumin		47	43
(35-50 g/L)			
Alkaline phosphatase		56	57
(30-130 U/L)			
Alanine transaminase		22	17
(5-55 U/L)			
Bilirubin (Total)		3	3
(0-21 umol/L)			
C-reactive protein		<0.3	
(0-5 mg/L)			
TSH		1.02	
(0.27-4.2 mU/L)			
ND = Not detected			

ALL RESULTS APPLY TO SERUM/PLASMA UNLESS OTHERWISE INDICATED

Current Items Reported: CRP GL LF TS EL AKI

Current Items Requested: CRP GL LF TS EL AKI

Current Spec. Rec'd: 02:57 16 Dec 2017 Printed: 16 Dec 2017 Authorised by:

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Victoria Hospital
Hayfield Road
Kirkcaldy
Fife
KY2 5AH

Department of Neurology
Tel: 01592 643355 29796
<http://www.nhsfife.scot.nhs.uk>



Dr JS Wilson
Lochgelly Medical Group
The Health Centre
David Street
Lochgelly, Fife
KY5 9QZ



CHI: 1207840483

ADMINISTRATIVE
LETTER

Letter ID: 100178259

Dictated 19/12/2017
Date: 20/12/2017

Dear Dr Wilson

Kay Thomson, 98 Main Street, Crosshill, Lochgelly, Fife, KY5 8AN

Date of Birth: 12/07/1984

Thank you for your referral. On this occasion I am unable to offer a consultation to your patient.

Please see the following reasons:

The history mentioned wouldn't make a primary neurological assessment helpful; I think Miss Thomson would benefit more from assessment in Psychiatry. If required I am sure Psychiatry could request a brain scan for Ms Thomson, but for the purpose of your reassurance you could simply write a letter to the Radiologist on call and you can mention my support for your request; typically the Radiologist will be happy with such requests.

I am happy to discuss this with you over the phone; I am on call this and next week.

Yours sincerely

Dr Uwe Spelmeyer
Consultant Neurologist

Authorised on 20/12/2017 09:18:49 by Dr Uwe Spelmeyer.

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LOCHGELLY MEDICAL PRACTICE

Susan Cattanach, M.B. Ch.B, Sandra J Wilson, M.B. Ch.B.

HEALTH CENTRE
DAVID STREET
LOCHGELLY
FIFE
KY5 9QZ

Practice Nurse: Lindsay Dailly

Phone (01592) 780277

Fax (01592) 784044

22nd December 2017

Our Ref: SW/KA

Dr Derek Marshall
Consultant Psychiatrist
Mental Health Service
Queen Margaret Hospital
Whitefield Road
Dunfermline
Fife
KY12 0SU

Dear Dr Marshall

Re: Kay Thomson, 98 Main Street, Crosshill, Fife, KY5 8AN**DOB: 12/07/1984 CHI: 1207840483**

The above lady has been seen by your GPST2, Dr Richard McClelland, regarding some erratic mood changes, probably related to illicit drug use and alcohol and other social factors. Initially he considered starting Kay on some anti-psychotic medication but it was felt that probably a relaxation group or an emotional resources group would be the most suitable line of action for managing Kay's problems. Recently Kay was into see me and one of her complaints was that as well as the change in her behaviour, poor concentration and memory this has been associated with occasional headaches.

....cont'd/

Re: Kay Thomson, 98 Main Street, Crosshill, Fife, KY5 8AN
DOB: 12/07/1984 **CHI:** 1207840483

I enclose the original referral letter I sent to Neurology regarding my concerns about both her behaviour and her physical ailments as I wondered if perhaps we should be excluding physical cause for her symptoms. I have checked all her bloods which were normal, referred her to Neurology enquiring if a CT scan would be of help but I have received a letter from Dr Uwe Spelmeyer stating he was unable to offer this lady an appointment and felt that she needed to see a Psychiatrist, which I am not sure if he realises she is already under your care. He has advised that if you felt a scan was indicated this could be arranged by yourself. His other suggestion was to simply write to the Radiologist and ask for a scan but as she is already under your care, as she has previously been seen by your services, I would be grateful for your opinion on the matter.

Many thanks.

Yours sincerely

Dr Sandra Wilson
GP

Encl. Copy Referral to Neurology
Copy Letter from Dr Spelmeyer

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LOCHGELLY MEDICAL PRACTICE

Susan Cattanach, M.B. Ch.B, J Sandra Wilson M.B. Ch.B.

HEALTH CENTRE
DAVID STREET
LOCHGELLY
FIFE
KY5 9QZ

Practice Nurse: Lindsay Dailly

Phone	(01592) 780277
Fax	(01592) 784044

19th January 2018

Our Ref: SW/HB

Miss Kay Thomson
98 Main Street
Crosshill
Fife
KY5 8AN

Dear Miss Thomson

I wrote to the Neurologist with regarding your concern about the episodes where you lost consciousness when you were at A&E a few months ago. The Neurologist wrote back and felt if any scan needs to be arranged it should be organised by the Psychiatrist who I wrote to and subsequently the Psychiatrist Dr Neilson who I don't think you have seen has suggested that we arrange the scan which is not normally the case but I would like you to make an appointment to come and discuss this to see if you have ongoing problems before I speak to the x-ray department to see if a scan could be organised.

Thank you very much.

Yours sincerely

Dr Sandra J Wilson
GP

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LOCHGELLY MEDICAL PRACTICE

Susan Cattanach, M.B. Ch.B, J Sandra Wilson M.B. Ch.B.

HEALTH CENTRE
DAVID STREET
LOCHGELLY
FIFE
KY5 9QZ

Nurse Lindsay Dailly -

Phone (01592) 780277
Fax (01592) 784044

Our Ref: SW/KA

19/01/2018

Miss Kay Thomson
98 Main Street
Crosshill
Fife
KY5 8AN

Dear Miss Thomson

We write in respect of a letter we have received from Dr Neilson, Psychiatry, and would appreciate if you could arrange an appointment with Dr Wilson to discuss this. When calling to make this appointment please advise the Receptionist you are to be fitted in within the next two weeks.

Yours sincerely

Lochgelly Medical Practice
Dr Susan Cattanach and Dr Sandra J Wilson

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Emergency Department Ninewells Hospital

SJ Cattanach
21435/1,Lochgelly Medical Group
The Health Centre, David Street, Lochgelly
fife
Lochgelly
KY5 9QZ

Ninewells Hospital
Ninewells Drive
Dundee
DD2 1GZ

Dear Doctor

Miss Kay Thomson
98 MAIN STREET
CROSSHILL
Lochgelly
KY5 8AN

Date of Birth: 12/07/1984
ACHI Number: 1207840483
ED Attendance Number: E000043795
No. of Previous Attendances: 0
Occupation:
School:
Responsible Consultant:Dr Russell Duncan

The above patient attended the Emergency Department Ninewells Hospital on 29/01/2018 at 04:25 and was discharged with no follow up on 29/01/2018 at 05:45. The letter was compiled by Woo, Nicholas

Diagnosis:		
Description	Body Site	Laterality
ED diagnosis - Left before clinical assessment		

Diagnosis Comments: Brought in by ambulance after witness reports of patient being dragged by hair and kicked in face outside pub. Patient reports unable to recall incident - can only recall being in pub and police arriving at home. Complaining of left facial swelling. Neurological assessment unremarkable. Mandible and OPG xrays unremarkable. Advised admission to EDOU for observation overnight. Patient discharged herself against medical advice.

Procedures:

Prescriptions:

Discharge Destination: Not Known

Discharge Type: Discharged with no follow up

Referred To:

Notes for GP:

Yours sincerely
Woo, Nicholas

Created on 29/01/2018 06:06 by Woo, Nicholas

Version 1

Page 1 of 1

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Queen Margaret Hospital
Whitefield Road
Dunfermline
Fife
KY12 0SU

NHS Fife Community Service
Mental Health Service
Tel: 01383 623623 <24754>
<http://www.nhsfife.scot.nhs.uk>

**Fife Health
& Social Care
Partnership**



Dr JS Wilson
Lochgelly Medical Group
The Health Centre
David Street
Lochgelly, Fife
KY5 9QZ



CHI: 1207840483

Letter ID: 2778909

Dear Dr Wilson

Date: 10/01/2018

Kay Thomson, 98 Main Street, Crosshill, Lochgelly, Fife, KY5 8AN

Date of Birth: 12/07/1984

Thank you for your letter regarding Kay which we discussed in our CMHT meeting today. I note that Kay was assessed by Dr McClelland at the end of last year and diagnosed with Emotionally Unstable Personality Disorder and that she was using street Valium and Pregabalin. She was also drinking daily. He had advised her to abstain from substance misuse and has referred her to Hillview Day Hospital for their input.

In your letter, you were wondering about requesting a CT scan for investigation of possible seizures, though you mention that she has been assessed in A&E and these were felt to be due to intoxication. There is nothing from Dr McClelland's assessment which indicates that a CT scan would be beneficial in terms of diagnosing her mental health problems and I see that she has been referred to Neurology, who felt that she didn't require a neurological assessment but that if you have ongoing concerns about this, then you could request a CT scan.

Thank you

Yours sincerely

Dr Martha Neilson
Specialty Doctor

Authorised on 18/01/2018 11:25:38 by Dr Martha Neilson.

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www.fifehealthandsocialcare.org



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Date: 15/01/2018/Thomson/Case Number: 1646



MARAC NOTIFICATION for meeting to be held on: 15/01/2018

Victim: Kay Thomson

MARAC case number: 1646

Repeat: No Previous MARAC Case Number(s): 0

Source of Referral: Police

Legal authority to share this information:

Relevant Protocol Completed	YES	If yes, please detail	SASPI – Scottish Accord on the Sharing of Personal Information
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OR

Legal grounds (If yes, please tick one or more grounds below)			Y / N
1.	Prevention / detection or crime and/or apprehension or prosecution of offenders (DPA), Section 9 Information Sharing Protocol(ISP)	Section 29 Data Protection Act	
2.	To protect vital interests of the data subject; serious harm or matter of life or death	Schedule 2&3 DPA. Section 9 ISP	
3.	For the administration of justice (usually bringing perpetrators to justice)	Schedule 2 & 3 DPA. Section 9 ISP	
4.	For the exercise of functions conferred on any person by or under any enactment Schedule 2 & 3 DPA. Section 9 ISP	(Police / Social Work Services)	
5.	In accordance with a court order		
6.	Overriding public interest (common law)		
7.	Child protection – disclosure to social services or police for the exercise of functions under the Children (Scotland) Act, where the public interest in safeguarding the child's welfare overrides the need to keep the information confidential. Schedule 2 & 3 DPA. Section 9 ISP		
8.	Right to life (Human Rights Act, Articles 2 & 3)		
9.	Right to be free from torture, of inhuman or degrading treatment (Human Rights Act, Articles 2 & 3)		

High Risk Domestic Abuse Cases are discussed at MARAC (Multi-Agency Risk Assessment Conference)

Information is gathered and shared in order to establish a comprehensive understanding of risks and agree a risk management plan (RMP) for the adult victim and any children.

Information pertaining to the victim, perpetrator or any children, should be returned to your agency representative in the days prior to the MARAC meeting. It should summarise;

- Last time you had contact,
- Nature of your relationship / frequency of contact,
- Any domestic abuse you are aware of,
- Concerns / risks you identify,
- Protective factors in place,
- Any particular supports that are in place from your own service or otherwise,
- Any additional support you propose to offer.

Notifying Person: Claire McCulloch, MARAC Coordinator. Contact Number: 03451 55 55 55 Ext 441965

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Personal Details for case number: 1646

	Victim	Alleged Perpetrator
Surname	Thomson	Johnston
Forenames	Kay	Darren
Date of Birth	12/07/1984	31/10/1988
Gender	Female	Male
Address	98 Main Street, Crosshill, KY5 8AN	98 Main Street, Crosshill, KY5 8AN.
Ethnic Origin	White	White
Status of relationship	Partner	Partner

Children's Details

	Child 1	Child 2	Child 3	Child 4	Child 5	Child 6
Surname	Johnston	Johnston	Johnston	Johnston	Smith	Thomson
Forenames	Darren	Aliyah	Logan	Cori/Kori	Riley/Ryley	Kenzie
Date of Birth	03/09/2008	21/09/2009	29/06/2011	22/07/2007	22/08/2010	22/07/2003
Parent Victim Perpetrator Both	Perp	Perp	Perp	Perp	Victim	Victim
Gender	Male	Female	Male	Male	Male	Female
Address	59 Boyle Place, Rosyth, KY11 2DU (SWIFT) Or 53 Lamberton Place St Andrew's KY16 8YF (Education)	59 Boyle Place, Rosyth, KY11 2DU (SWIFT) Or 53 Lamberton Place St Andrew's KY16 8YF (Education)	59 Boyle Place, Rosyth, KY11 2DU (SWIFT) Or 53 Lamberton Place St Andrew's KY16 8YF (Education)	10 Terrace Place/10 Terris Street, Cowdenbeath, KY4 8NJ	98 Main Street, Crosshill, KY5 8AN	98 Main Street, Crosshill, KY5 8AN Or 1 Dalbeath Gardens, Cowdenbeath, KY4 8DT
School/Nursery	Canongate PS	Canongate PS	Canongate PS	St Bride's PS	St Kenneth's PS	Beath HS

Notifying Person: Claire McCulloch, MARAC Coordinator. Contact Number: 03451 55 55 55 Ext 441965

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MARAC INFORMATION REQUEST FORM

Please return by email by Wednesday 14th February 2018

MARAC is a high level, inter-agency, information sharing process dealing with only the most serious cases of domestic abuse. The purpose of MARAC is to prevent further violence or homicide through the development of a safety plan, designed to address the key identified risk factors.

Please can you provide, on the form below**, relevant information you hold regarding this family/individual. Brief notes only, this is **not** a request for a full report.

E.G.:

- Named nurse/practitioner email and telephone contact details
- Most recent contact
- Are there any current adult health or welfare concerns?
- Are there any current child health or welfare concerns?
- Are you aware of domestic abuse in the household?
- Are you aware of any other health professionals or agencies working with this family/ or referrals
- Can you identify any risk factors re: domestic abuse
- Can you identify any protective factors re: domestic abuse
- Current support provided/available
- Next planned contact

Dear Colleagues,

I have been requested to do a MARAC report on the above lady who is registered at our surgery and the most contact has been with myself.

Her last contact with the Health Services was actually on the 29th of January when she was seen in A&E at Ninewell's Hospital with a left facial injury. She was seen by Nicholas Woo and the report was as follows; "Brought in by ambulance after witness reports of patient being dragged by hair and kicked in face outside pub. Patient reports unable to recall incident – can only recall being in pub and police arriving at home. Complaining of left facial swelling. Neurological assessment unremarkable. Mandible and OPG x-rays unremarkable. Advised admission to EDOU for observation overnight. Patient discharged herself against medical advice".

Notifying Person: Claire McCulloch, MARAC Coordinator. Contact Number: 03451 55 55 55 Ext 441965

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The last contact the patient had with myself was the 15th of December when we reviewed her low mood. At that time she was complaining of not sleeping, her mood was slightly better than it had previously been but found her concentration poor. She had been seeing the Psychiatrist over the previous few weeks having initially been referred by myself in the summer. The reason we referred her was because of her labile mood and impulsive behaviour. The lady had described outbursts of anger, not speaking to her parents, complaining of mood swings within the day rather than even just within days and felt that this had been something that had been a problem intermittently for some years. She had been particularly bad a few months prior to her referral.

Her first assessment was on the 5th of September. She was assessed by Dr Richard McLelland, Psychiatrist, who initial assessment was unsure whether Kay had an emotional unstable personality disorder, attention deficit hyperactivity disorder or even possible bipolar effective disorder. He gave her information on emotional and stable personality disorder and asked her to read it. He gave her a screen tool for ADHD. She was to keep a mood diary and to go back for review which she did. He referred her to either the relaxation group or emotional resources group which I am not sure if she ever received an appointment. He reviewed her on a few occasions and when last seen on the 8th of December by the Psychiatrist at that time Kay was spending more time with her son, Ryley. She was enjoying the time with him. She hadn't been using any illicit drugs and although had previously stopped drinking she had a few glasses of wine on a few nights of the week. It had been noted that when she was not drinking she hadn't be irritable and agitated and it was discussed by the Psychiatrist that a lot of her behaviour is alcohol related and was encouraged to cut down which she thought she could do on her own. She presented well to the Psychiatrist, no thoughts of self harm, good insight into her current difficulties and was motivated to go to the Hillview Day Hospital, which as I say I am not sure she has ever received an appointment. Dr McLelland discharged her from further follow-up.

I recently wrote back to the Psychiatrist because at the presentation on the 15th of December she complained of poor memory and related this to all when she landed up in A&E a few months back and I wondered if she needed a CT scan. The Psychiatrist wrote back and said it was their remit so I wrote to Neurology who didn't think there is clinical indication for a scan and I wrote to Kay and asked her to make an appointment to come and discuss this but as yet I haven't seen her. At the end of the consultation on the 15th of December she was prescribed some Phenergan to see if can help her sleep as that was also an issue but other than that there is no cause for concern. I checked some routine bloods and physical examination, all of which were normal.

In September/October of last year we have also had contact from a Mrs. Bourhill, Social Worker, who was involved with Kay as she had cause for concern with regarding her care of her son, Ryley, whom when we last discussed on the 15th December she was getting contact with but I was unsure whether he had returned to his home address.

Obviously from the above there has been concerns with regarding Kay's behaviour and this is reflected in concerns with regarding the health and welfare of her son, Ryley, but when last seen the situation had appeared to have improved although this was over 6 weeks ago. At the last consultation I was aware that there was a possible new partner but have no information on him and therefore was not aware there was any risk of domestic abuse. As mentioned Social Work have been involved and also contact from the school with regarding her son. She was under the care of the Psychiatrist who has discharged her, as mentioned above.

At present I am unaware if Kay has made any appointment to come back to review her ongoing issues which I have written to her asking her to do so and from what I can see from the records she has not been seen by anybody other than the contact at A&E on the 29th of January as described above.

Notifying Person: Claire McCulloch, MARAC Coordinator. Contact Number: 03451 55 55 55 Ext 441965

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Yours sincerely

Dr J Sandra Wilson
GP

Our Ref: SW/CD

Please return this form via email to: Fife-uhb.marac@nhs.net

THANK YOU

Notifying Person: Claire McCulloch, MARAC Coordinator. Contact Number: 03451 55 55 55 Ext 441965

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LOCHGELLY MEDICAL PRACTICE

Susan Cattanach, M.B. Ch.B, J Sandra Wilson M.B. Ch.B.

HEALTH CENTRE
DAVID STREET
LOCHGELLY
FIFE
KY5 9QZ

Practice Nurse: Lindsay Dailly

Phone	(01592) 780277
Fax	(01592) 784044

13th March 2018

Our Ref: SW/HB

Miss Kay Thomson
98 Main Street
Crosshill
Fife
KY5 8AN

Dear Kay

I note that you had an appointment at the surgery yesterday on 8th March which you did not attend and looking back through your notes it was noted by staff that is 3 times you have not attended appointments at the surgery. The Practice has quite a strict policy if you miss more than 3 appointments over a period of time then we will normally take you off our list and you will need to re-register at another surgery. I do appreciate in recent times you have had a few worries and upset and hence why I have written to you myself to say that we are happy to keep you on the list at present if you do make further appointments and not attend we would be obliged to remove you from the list.

Yours sincerely

Dr Sandra J Wilson (GP)

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MARAC CASE NO. 1646 THOMSON: RISK MAN... - F21435LochgellyCattanach (... Page 1 of 2

MARAC CASE NO. 1646 THOMSON: RISK MANAGEMENT
PLAN

marac (NHS FIFE) ?

Tue 20/02/2018 16:21

To:F21435LochgellyCattanach (NHS FIFE) <Fife-UHB.F21435LochgellyCattanach@nhs.net>;

Importance: High

2 attachments

RMP 1646 Thomson x.docx; RMP 1646 Thomson x.pdf

For the attention of the GP for: Kay Thomson (12.07.1984)

Following an incident of domestic abuse, this case was referred to MARAC (multi-agency risk assessment conferencing). MARAC is a high level, inter-agency information sharing process dealing with only the most serious cases of domestic abuse. The purpose of MARAC is to prevent further violence or homicide through the development of a safety plan, designed to address the key identified risk factors.

I am attaching for your information the risk management plan agreed at MARAC and would ask you to note its contents and action any assigned health task. Please ensure that the information is recorded within the health record.

This RMP is only shared to enhance the immediate safety and wellbeing of the victim (s). Its contents are highly confidential and include sensitive information about multiple individuals. The Data Protection Act 1998 demands that careful consideration should be applied and justification evidenced, when deciding to share the contents both within your own organisation and other professional forums.

Should you have further concerns about the safety of the family please do not hesitate to contact DS Alison Rose, Fife Constabulary 01592 418460 or myself.

Thank you and Kind Regards,

Fiona Duncan

Gender Based Violence Nurse Advisor

01592 729289

Mob: 07789273572

(please note I now work, Wednesday, Thursday and alternate Tuesdays only)

Cheryl Bayne:Support Nurse

cheryl.bayne@nhs.net

07966884062

MARAC Practitioners Guidance - information about the MARAC Process, Risk Assessment, Safety Planning and Making a Referral can be found at:

<https://email.nhs.net/owa/Fife-UHB.F21435LochgellyCattanach@nhs.net/>

20/02/2018

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MARAC CASE NO. 1646 THOMSON: RISK MAN... - F21435LochgellyCattanach (... Page 2 of 2

<http://intranet.fife.scot.nhs.uk/subjects/index.cfm?fuseaction=page.display&pageid=C3023F9C-9AD3-5616-2A529B9F9D20562D&subjectid=5AC0DA91-914B-47DB-A964-32D811AA3B91>

<https://email.nhs.net/owa/Fife-UHB.F21435LochgellyCattanach@nhs.net/>

20/02/2018

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**MARAC Risk Management Plan (RMP)**

Date: 15/02/2018. MARAC Case Number: 1646

	Victim	Alleged Perpetrator
Surname	Thomson	Johnston
Forenames	Kay	Darren
Date of Birth	12/07/1984	31/10/1988
Gender	Female	Male
Address	98 Main Street, Crosshill, KY5 8AN	HMP
Ethnic Origin	White	White
Status of relationship	Partner	Partner

Children's Details

	Child 1	Child 2	Child 3	Child 4	Child 5	Child 6
Surname	Johnston	Johnston	Johnston	Johnston	Smith	Thomson
Forenames	Darren	Aliyah	Logan	Cori/Kori	Riley/Ryley	Kenzie
Date of Birth	03/09/2008	21/09/2009	29/06/2011	22/07/2007	22/08/2010	22/07/2003
Parent – Victim Perpetrator Both	Perp	Perp	Perp	Perp	Victim	Victim
Gender	Male	Female	Male	Male	Male	Female
Address	53 Lamberton Place St Andrew's KY16 8YF	53 Lamberton Place St Andrew's KY16 8YF	53 Lamberton Place St Andrew's KY16 8YF	10 Terrace Place/10 Terris Street, Cowdenbe ath, KY4 8NJ	67 Martin Crescent Ballingry.	Dad's address
School/Nursery	Canongate PS	Canongate PS	Canongate PS	St Bride's PS	St Kenneth's PS	Beath HS

Ethical Information Sharing

An Information Sharing Protocol has been agreed by your organisations, details can be obtained from your MARAC Agency Representative or the MARAC Coordinator

Information is shared to:

- increase the safety, health and well-being of victims adults and their children;
- determine the risk posed by the perpetrator to any particular individual or to the general community;
- agree and implement a risk management plan that provides professional support to all those at risk;
- improve accountability and
- improve support for staff involved in high-risk domestic abuse cases.

This RMP should only be shared to enhance the immediate safety and wellbeing of the victim(s). Its contents are highly confidential and include sensitive information about multiple individuals. The Data Protection Act 1998 demands that careful

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consideration should be applied and justification evidenced, when deciding to share the contents both within your own organisation and other professional forums.

Additional background information from the MARAC meeting has been sent to your MARAC representative. If you require additional information to enable you to enhance the safety of this victim, their child(ren), or any other vulnerable adult then please contact your MARAC Representative or the MARAC Coordinator in the first instance.

Repeat Referrals to MARAC

If any agency is aware of a victim experiencing ongoing abusive incidents (does not require Police involvement) within 12 months of the last MARAC case discussion, they have a responsibility to make another referral to MARAC regardless if it meets MARAC referral criteria

Present

NAME	DESIGNATION	ORGANISATION
Pamela Seath	Domestic Abuse Liaison Officer	Police Scotland
Claire McCulloch	MARAC Co-ordinator	Fife Violence Against Women P'ship
Margot O'Reilly	MARAC Advocate	Independent Advocacy Service
Christine Mitchell	MARAC Advocate	Independent Advocacy Service
Cheryl Bayne	GBV Support Nurse	NHS Fife
Angela Simpson	Team Manager (Chair)	Social Work Criminal Justice Services
Stuart MacArthur	Team Manager	Social Work Criminal Justice Services
Tom Bochenek	Independent Chair - Perm & Fostering Panel	Social Work Children & Families
Anastasia McArthur	Housing Professional	Housing and Communities
Sharon Brown	Women's Support Worker	Fife Women's Aid
Jane Paterson	Integration Manager	Education Service
April Adam	Manager	3 rd Sector Drug and Alcohol Agencies

SUMMARY OF CIRCUMSTANCES, SAFETY MEASURES AND AGENCIES INVOLVED**Police****Summary**

Darren and Kay have been in a relationship for approximately 5 months. The couple resided at Kay's address. Darren has 3 pending cases for violence including attempted murder (domestic). He has 16 convictions. There are 13 domestic incidents recorded between Darren and two previous partners. There are two domestic incidents recorded between Darren and Kay; January 2018 – Kay sold Darren's dog without his permission and gambled the money.

Recent Incident

On 28/01/18, Darren and Kay went out drinking in Anstruther. They may also have consumed drugs. About 2330hrs, Kay was asked to leave a bar. The couple left the pub and argued in the street. Darren entered Kay's car and drove the wrong way down the street. The couple continued to argue. Darren reversed the car at speed at Kay whilst she was lying on the ground. Darren picked up a beer keg and smashed the windows of the vehicle before grabbing Kay in a headlock and dragging her down the street. Darren also kicked Kay in the face repeatedly.

Outcome - Darren was apprehended for attempted murder, vandalism and Section 4 RTA. Since his first appearance at court there is no further date set. He is currently fully committed.

DAQ Score 2 (High). Kay was hostile witness a refused to engage with Police.

DAU Staff attempted to contact Kay with a negative result. Marker added to the Kay's address.

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**MARAC Advocates**

Margot spoke to Kay on a couple of occasions. Kay still has no memory of the night of the incident and has had no information about Darren. Kay read online that he has been charged with attempted murder and has been remanded until the trial. She is devastated; she still loves Darren and wants him back. Kay is hiding herself away, can't face going out and is crying all the time. She has previously been diagnosed as bipolar but had recently stopped taking her medication, believing herself to be better. She now realises she needs her medication. Kay has a good relationship with her GP and will make an appointment.

Kay doesn't appear to be talking to anyone about how she feels; she said "people don't understand". She doesn't think Darren deliberately hurt her and she is not looking for support. Kay just wonders what she must have done to make Darren so angry. She knows that Darren offended before.

Social Work Children & Families

Darren, Aliyah and Logan Johnston are open to CF Cupar Team. Involvement is in a duty basis to assess the contact Darren has with his children. Cheryl Walker is supporting Nicole Johnston (children's mother) as she is facing eviction from the home she shared with Darren and is struggling to manage Darren Jnr's behaviour. There are no contact arrangements currently due to Darren Snr being in prison. Darren is still married, in a relationship and living with Nicole who knew nothing of his charges.

Cori is currently open to Louisa Harrower, CF Cowdenbeath 2 due to the domestic incidences between his mother Lisa Clark and step-father. The frequency in which Cori stays with his father (Darren) at the weekend has recently decreased. Cori has never reported any domestic incidences at his father's home. He takes a mobile phone so that he can make contact with his mother if required. Cori is aware of the current concern in relation to his father. There are currently no plans for Cori to visit his father, however they have always maintained a relationship and so it is possible that in time Cori will wish to pursue contact with his father. Cori has good attendance at school and he accesses local activities within the community that allow him to associate with his peers out with school.

Ryley's case is open to Pat Bourhill, CF Cowdenbeath 1. Ryley resides with his grandparents and any contact with his mum is managed by them. This arrangement has formally been in place since September 2017, at which time it was agreed by all parties that due to Kay's mental health issues it would not be in the best interest of Ryley to remain in her care. She has to have no overnight contact with Ryley.

Kenzie is unallocated.

Education

Darren has a close bond with his siblings in school, often 'standing up for them' when he feels he needs to. He is also close to his mum and appears to respect her when she speaks to him if she is called to help de-escalate a situation. Since coming back after the Christmas holidays, Darren has made great improvements in his behaviour choices, going from almost daily outbursts and arguments with staff/peers. School were unaware of any domestic issues. School believed mum and dad were still together, but Darren recently advised that that his dad hasn't been in the house for about 2 months.

School have a positive relationship with **Aliyah**. They were unaware of any domestic issues. She also has a close bond with her siblings in school. She is also close to her mum and appears to respect her when she speaks. Aliyah is making progress in all curricular areas.

Logan: Not aware of any domestic issues. Mum is supportive of Logan and has attended parent's evenings. There are no issues with Logan in school.

NHS Fife

Kay attended A & E in January 2018 with a left facial injury. Most recent GP contact 15/12/17 for review of low mood. In Sept 2017 Kay has a Psychiatric assessment. No further psychiatric follow up; referred to Hillview Day Hospital for Relaxation Therapy or Emotional Resource Management

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Strategies. Kay did not opt in therefore closed.
Darren attended A & E in Dec 2017 following a road traffic accident. GP reports previous steroid misuse. Recent treatment for anxiety and low mood.

Housing

Kay resides in a private let property.
Darren is the sole tenant of 53 Lamberton Place, St Andrews, KY16 8YF. Darren's wife and three children are currently staying there. There are Rent arrears and no Housing Benefit claim.

OVERALL AGREEMENT

Through multi-agency discussion specific actions have been identified by the MARAC group.

In addition to these identified actions:

- All agencies will **share appropriate** information with relevant person(s) within their organisations;
- Highlight concerns where appropriate with a view to protecting the victim, any identified children, staff members or any other person who may be at risk of harm.
- If there is an on-going Criminal Prosecution for the perpetrator, notification will be sent to the Procurator Fiscal.

These actions will be carried out for all MARAC cases

It should be noted that responsibility for carrying out the actions identified lies with the agency representatives.

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Action Number	Risk Identified	Agreed Action	Agency/ Representative
1646/Thomson/01	Kay was hostile witness a refused to engage with Police. Domestic Abuse Unit staff attempted to contact Kay with a negative result.	Domestic Abuse Liaison Officer to contact Kay to offer support.	Police Scotland
1646/Thomson/02	Darren has 3 pending cases for violence including attempted murder (domestic). He has 16 convictions. There are 13 domestic incidents recorded between Darren and two previous partners. There are two domestic incidents recorded between Darren and Kay.	Refer Darren to MATAC for consideration, if not previously done so.	Police Scotland
1646/Thomson/03	Kay has attended her GP with low mood and has had a previous Psychiatric assessment. Darren's GP reports previous steroid misuse. Recent treatment for anxiety and low mood.	Share Risk Management Plan with Kay and Darren's GPs.	NHS Fife
1646/Thomson/04		Feedback to victim following meeting.	MARAC Advocate

Notifying Person: Claire McCulloch, MARAC Coordinator, Contact Number: 03451 55 55 55 Ext 441965

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Hospital use only	Clinic	Day Date	Time	Hospital No.
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101015845522M

Unique Care Pathway Number: 101015845522M

Transport required?

PSYCHOLOGY REFERRAL LETTER

MEDICAL IN CONFIDENCE

REFERRAL TO	
Clinical psychology R2 Fife General Referral	— Consultant / receiving practitioner and/or specialty clinic
Lynebank Hospital Halbeath Road Dunfermline KY11 8JH	— Hospital and hospital address Hospital Location Code F810H Email address -
Urgency of referral Routine	

PATIENT DETAILS		Patient's address
Surname	Thomson	98 Main Street Crosshill KY5 8AN
Forename(s)	Kay	
Title	Miss	
Sex	Female	
Date of birth	12-Jul-1984	
CHI no.	1207840483	Contact number(s) Voice: 01592 305865 Voice: 07757108513

REFERRING PRACTITIONER DETAILS		Practice address
Name	Dr. Susan Cattnach	The Health Centre David Street Lochgelly Fife KY5 9QZ
GMC code	3262010	
GP code	91782	
Practice name	Lochgelly Medical Group (21435)	
Practice code	21435	
		Contact number(s) Voice: 01592 780277

Date submitted by practice: 09-Apr-2018**Reason for referral**

Care type requested: Out Patient - New

Expected outcome: Not Specified

Administrative Information

Suspected Cancer Site: NOT A CANCER REFERRAL

Patient Contact: N/A Not a cancer referral

Does the patient need to be seen in clinic following any investigations: N/A Not a cancer referral

Patient can accept a short notice appointment: yes

Interpreter Required: no

Stylesheet version: 16.0.1.0 02-April 2013 Comments to: fife-uhb.fifecc@nhs.net

file:///N:/PCTI/DOCMAN7/DATA S1/Document/DMEDOC01/00134100/01568735.... 16 07 2026

CLINICAL INFORMATION**History of presenting complaint / examination findings / investigation results****Presenting complaint**

Description: Counselling.

Comment: Patient's current address - Women's Aid 18 Walker Street Cowdenbeath Fife KY4 9JU.

Dear Colleague,

I referred this lady to the Psychiatry Services and have enclosed a letter from Dr West with the reply. As you will see I wondered if Miss Thomson might have a possible diagnosis of ADHD but it was felt a well established diagnosis of EUPD, made by Dr McClelland when she was seen by psychiatry last year, was more the case. As recognised in my referral letter Kay has a lot of psychosocial problems which increased her anxiety and resulted in increasing stress in situations. She previously has been offered an appointment at Hillview Day Hospital which she didn't accept but I wonder if a one to one counselling via the Psychology Service would be of help and would be grateful if you could see.

I have enclosed my original referral as well as the response from Dr West, as mentioned.

Thank you very much for your help.

Yours sincerely

Dr J Sandra Wilson
Locum GP

Our Ref: SW/CD

Examinations and Investigations

Blood Pressure (systolic):	120	-
Blood Pressure (diastolic):	75	-
Height (m):	162	-
Weight (kg):	65	-
Body Mass Index:	24.77	-
as below:		-
Not interested in stopping smoking:	16-Nov-2017	
as below:		-
Alcohol consumption, 9.8 units/week:	24-Nov-2014	
as below:		-
Aerobic exercise 3+ times/week:	25-Jan-2016	

Past Medical History**Pre-existing conditions** (High and Medium Priority)

<u>Description</u>	<u>Modifier</u>	<u>Comment</u>	<u>Date Recorded</u>
[D]Seizure NOS	-	Due to social Pregabalin use	11-Oct-2017
Overdose of drug	-	- acute intoxication due to multiple drug use and use of psychoactive substances.	11-Oct-2017
Termination of pregnancy	-	-	29-Nov-2014
Depressive disorder NEC	-	-	23-Aug-2012
Patient's condition resolved	-	left kidney	20-Jun-2012
Back pain, unspecified	-	-	01-Apr-2012
Termination of pregnancy	-	-	18-Jan-2012

Spontaneous vaginal delivery	-	male		21-Aug-2010		
Spontaneous vaginal delivery	-	female		22-Jul-2003		
H/O: behaviour problem	-	-		12-Oct-1999		
Drug dependence	-	drug abuse		12-Oct-1999		
Overdose of drug	-	-		05-Mar-1998		
Enuresis	-	diurnal and nocturnal		15-Jan-1988		
Past Procedures (High and Medium priority)						
<u>Description</u>	<u>Laterality</u>	<u>Modifier</u>	<u>Comment</u>	<u>Date Recorded</u>		
Computerised tomograph scan	-	-	4cm mass left kidney probable focal pyelonephritis	04-Apr-2012		
Other diagnostic ultrasound	-	-	-	03-Apr-2012		
Cervical smear: negative (GMS (Another Practice))	GMS (Another Practice)	-	-	03-Apr-2012		
Other hospital admission NOS	-	-	-	01-Apr-2012		
Renal ultrasound	-	-	-	20-Mar-1997		
[SO]Renal pelvis NEC	-	-	slight dilation renal pelvis left	20-Mar-1997		
Family Conditions (High and Medium priority)						
<u>Description</u>	<u>Modifier</u>	<u>Comment</u>				
not known	-	-				
Current Medication (Active Repeat medication issued within the last 12 months)						
<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
not known	-	-	-	-	-	-
Recent Medication (Any medication issued within last 90 days not shown above)						
<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Clarithromycin Tablets 500 mg	0501050B0AAADAD	14 tablet	ONE TO BE TAKEN TWICE A DAY	-	20-Mar-2018	7 Days
Lifestyle risks						
Exercise status: Not Known						

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Hospital use only	Clinic	Day Date	Time	Hospital No.
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1010160156260

Unique Care Pathway Number: 1010160156260

Transport required?

REFERRAL LETTER

MEDICAL IN CONFIDENCE

Suspected Cancer Site:
NOT A CANCER REFERRAL

GYNAECOLOGY

GYNAECOLOGY

REFERRAL TO	
Gynaecology F2 Fife General Referral	Consultant / receiving practitioner and/or specialty clinic
Victoria Hospital Hayfield Road Kirkcaldy KY2 5AH	Hospital and hospital address Hospital Location Code F704H Email address -
Urgency of referral Urgent	

PATIENT DETAILS		Patient's address
Surname	Thomson	98 Main Street Crosshill KY5 8AN
Forename(s)	Kay	
Title	Miss	
Sex	Female	
Date of birth	12-Jul-1984	
CHI no.	1207840483	Contact number(s) Voice: 01592 305865 Voice: 07757108513

REFERRING PRACTITIONER DETAILS		Practice address
Name	Dr. Susan Cattnach	The Health Centre David Street Lochgelly Fife KY5 9QZ
GMC code	3262010 GP code 91782	
Practice name	Lochgelly Medical Group (21435)	
Practice code	21435	
		Contact number(s) Voice: 01592 780277

Date submitted by practice: 01-May-2018

Reason for referral

Care type requested: Out Patient - New
Expected outcome: Not Specified

Administrative Information

Suspected Cancer Site: NOT A CANCER REFERRAL
Patient Contact: N/A Not a cancer referral
Does the patient need to be seen in clinic following any investigations: N/A Not a cancer referral
Patient can accept a short notice appointment: yes
Interpreter Required: no

Stylesheet version: 16.0.1.3 25-Mar 2013 Comments to: fife-uhb.fife@nhs.net

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CLINICAL INFORMATION**History of presenting complaint / examination findings / investigation results****Presenting complaint**

Description: Vulval abscess.

Comment: Dear Doctor,

Thank you for seeing this lady, who has a 2-3cm, oval, vulval abscess at the L mons pubis area, which has been present for >6/52, but which has failed to respond to oral antibiotics.

She is currently taking Clarithromycin 500mg BD.

Kay is systemically well.

I suspect that this abscess may now require surgical treatment.

Thank you for your opinion.

Yours sincerely

Dr Jennifer M Barclay
Locum GP

Our Ref: JB/CD

Examinations and Investigations

Blood Pressure (systolic):	120	-
Blood Pressure (diastolic):	75	-
Height (m):	162	-
Weight (kg):	65	-
Body Mass Index:	24.77	-
as below:	-	-
Not interested in stopping smoking:	16-Nov-2017	-
as below:	-	-
Alcohol consumption, 9.8 units/week:	24-Nov-2014	-
as below:	-	-
Aerobic exercise 3+ times/week:	25-Jan-2016	-

Past Medical History**Pre-existing conditions** (High and Medium Priority)

<u>Description</u>	<u>Modifier</u>	<u>Comment</u>	<u>Date Recorded</u>
Furuncle - boil	-	-	01-May-2018
[D]Seizure NOS	-	Due to social Pregabalin use	11-Oct-2017
Overdose of drug	-	- acute intoxication due to multiple drug use and use of psychoactive substances.	11-Oct-2017
Termination of pregnancy	-	-	29-Nov-2014
Depressive disorder NEC	-	-	23-Aug-2012
Patient's condition resolved	-	left kidney	20-Jun-2012
Back pain, unspecified	-	-	01-Apr-2012
Termination of pregnancy	-	-	18-Jan-2012

Spontaneous vaginal delivery	-	male		21-Aug-2010		
Spontaneous vaginal delivery	-	female		22-Jul-2003		
H/O: behaviour problem	-	-		12-Oct-1999		
Drug dependence	-	drug abuse		12-Oct-1999		
Overdose of drug	-	-		05-Mar-1998		
Enuresis	-	diurnal and nocturnal		15-Jan-1988		
Past Procedures (High and Medium priority)						
<u>Description</u>	<u>Laterality</u>	<u>Modifier</u>	<u>Comment</u>	<u>Date Recorded</u>		
Computerised tomograph scan	-	-	4cm mass left kidney probable focal pyelonephritis	04-Apr-2012		
Other diagnostic ultrasound	-	-	-	03-Apr-2012		
Cervical smear: negative (GMS (Another Practice))	GMS (Another Practice)	-	-	03-Apr-2012		
Other hospital admission NOS	-	-	-	01-Apr-2012		
Renal ultrasound	-	-	-	20-Mar-1997		
[SO]Renal pelvis NEC	-	-	slight dilation renal pelvis left	20-Mar-1997		
Family Conditions (High and Medium priority)						
<u>Description</u>	<u>Modifier</u>	<u>Comment</u>				
not known	-	-				
Current Medication (Active Repeat medication issued within the last 12 months)						
<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
not known	-	-	-	-	-	-
Recent Medication (Any medication issued within last 90 days not shown above)						
<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Clarithromycin Tablets 500 mg	0501050B0AAADAD	28 tablet	ONE TO BE TAKEN TWICE A DAY	-	01-May-2018	14 Days
Clarithromycin Tablets 500 mg	0501050B0AAADAD	14 tablet	ONE TO BE TAKEN TWICE A DAY	-	20-Mar-2018	7 Days
Lifestyle risks						
Exercise status: Not Known						

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NHS Confidential: Personal data about a patient

Queen Margaret Hospital
Whitefield Road
Dunfermline
Fife
KY12 0SU

Department of Gynaecology
Consultant: Dr C McKinley
Enquiries to: Mrs W Chapman
Tel: 01383 623623 Ext 23142
<http://www.nhsfife.scot.nhs.uk>



Dr SJ Cattanach
Lochgelly Medical Group
The Health Centre
David Street
Lochgelly, Fife
KY5 9QZ



CHI: 1207840483
Our Ref: CAM/LC

Letter ID: 2989968

Dear Dr Cattanach

Clinic Date: 20/06/2018

Date: 05/07/2018

Kay Thomson, 18 Walker Street, Cowdenbeath, Fife, KY4 9JU

Date of Birth: 12/07/1984

This patient did not attend for an urgent appointment this morning. I assume, therefore, that her abscess has settled and I have not arranged a further appointment.

Yours sincerely

Carolyn McKinley
Consultant Obstetrician & Gynaecologist

Authorised on 09/07/2018 10:00:30 by Carolyn McKinley.

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NHS Confidential: Personal data about a patient

Victoria Hospital
Hayfield Road
Kirkcaldy
Fife
KY2 5AH

Emergency Department
Tel: 01592 643355 Ext 29796
<http://www.nhsfife.scot.nhs.uk>



Dr SJ Cattanach
Lochgelly Medical Group
The Health Centre
David Street
Lochgelly, Fife
KY5 9QZ



CHI: 1207840483

Letter ID: 2968288

Date: 05/06/2018

Dear Dr Cattanach

Kay Thomson, 18 Walker Street, Cowdenbeath, Fife, KY4 9JU

Date of Birth: 12/07/1984

Date of Admission: 01/06/2018

Date of Discharge: 02/06/2018

This patient presented after taking an overdose of Paracetamol. This required NAC antidote therapy. Her ALT and INR were initially elevated, but this reduced on repeat sampling after treatment. She did not require to be seen by UCAT as she regretted her actions immediately. No plans for any A&E follow-up. Please note I did not see this patient and I am dictating this letter from the inpatient clinical notes.

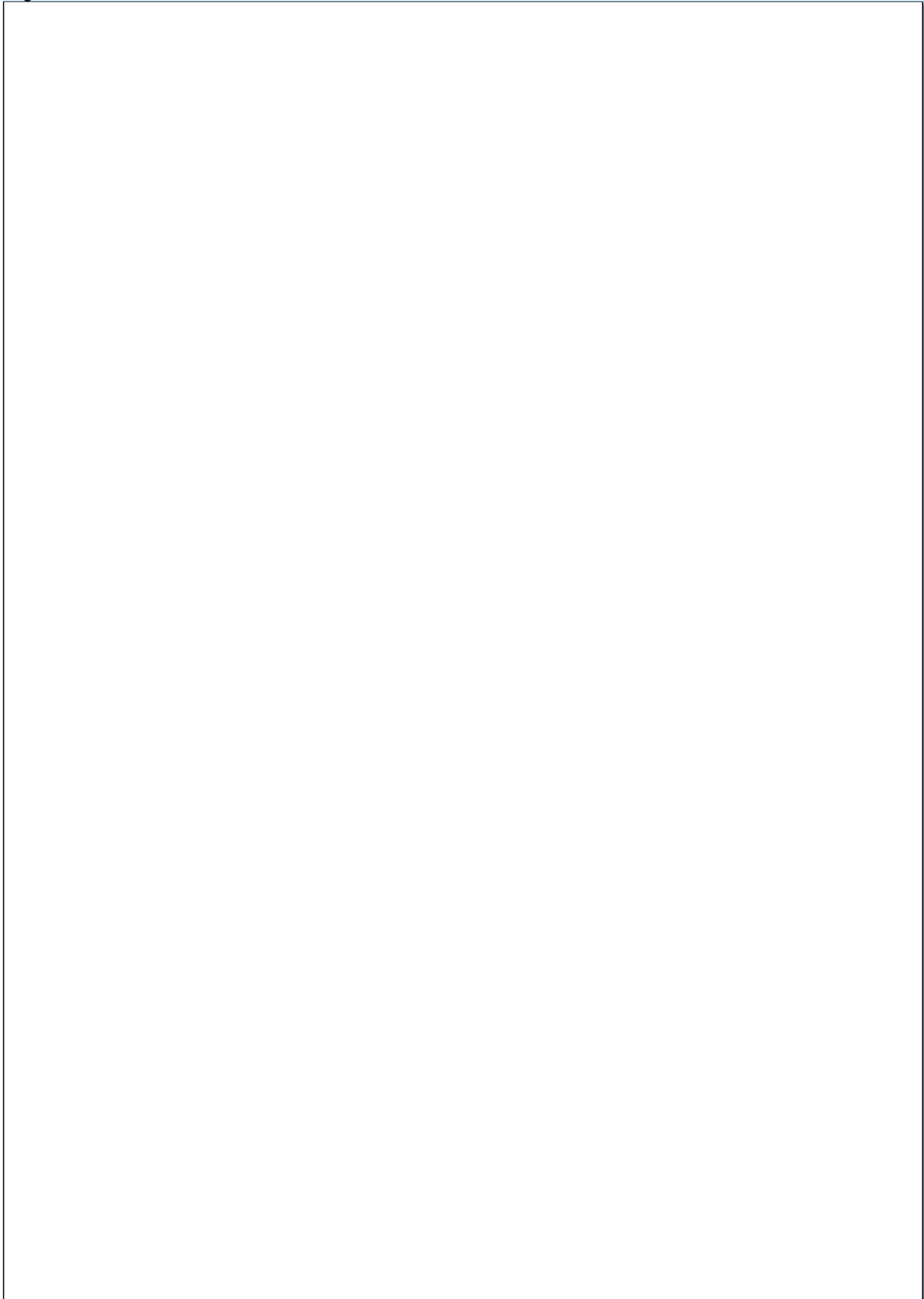
Yours sincerely

Dr A Kinnon MBChB MRCSEd(A&E) FRCEM
Consultant & Clinical Lead in Emergency Medicine

Authorised on 6/5/2018 4:37:04 PM by Kate Searle.

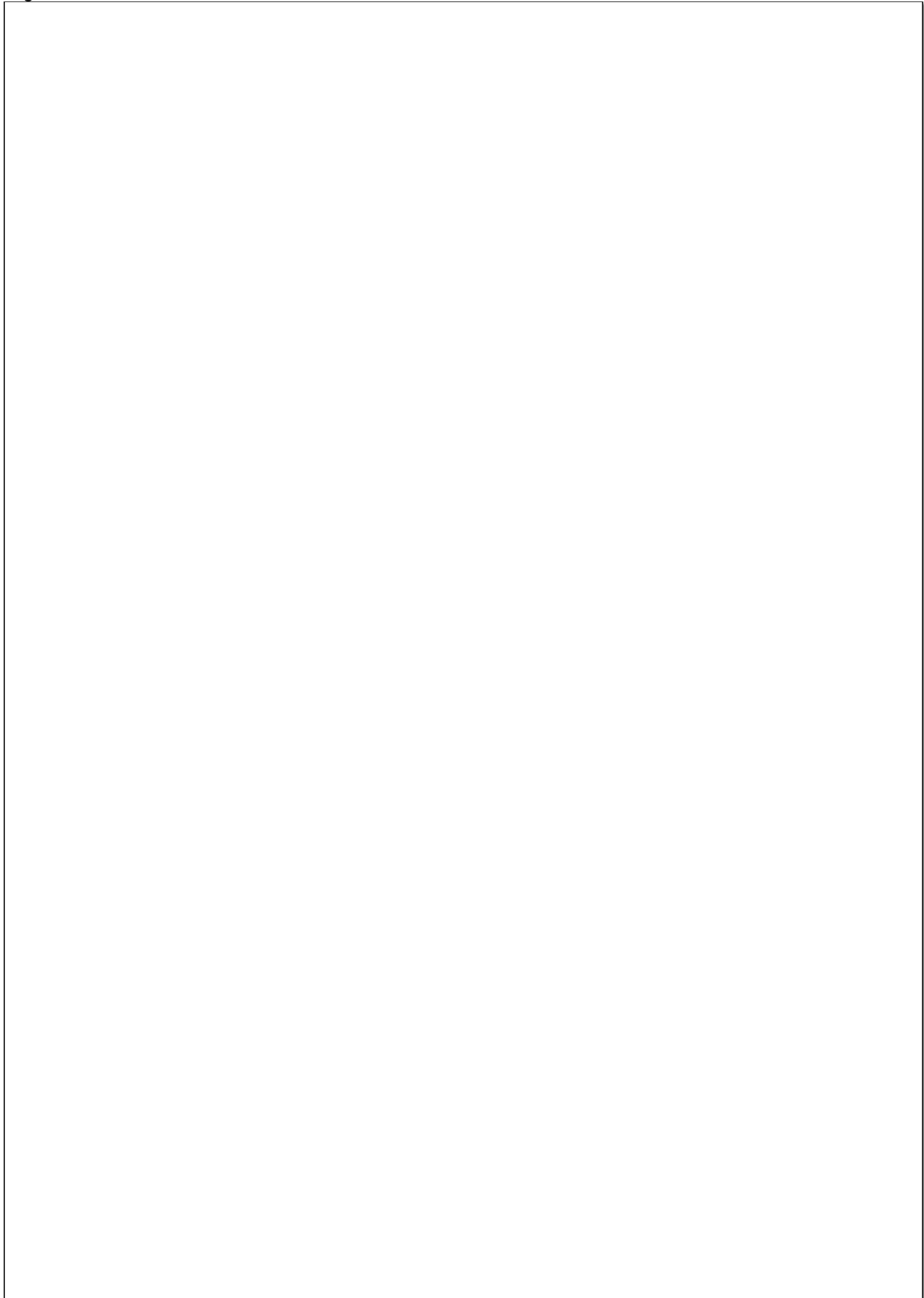
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LOCHGELLY MEDICAL PRACTICE

Susan Cattanach, M.B. Ch.B, J Sandra Wilson M.B. Ch.B.

HEALTH CENTRE
DAVID STREET
LOCHGELLY
FIFE
KY5 9QZ

Practice Nurse: Lindsay Dailly

Phone (01592) 780277

Fax (01592) 784044

21st March 2018

Our Ref: SW/CD

Dr Derek Marshall
Consultant Psychiatrist
Mental Health Service
Queen Margaret Hospital
Whitefield Road
Dunfermline
Fife
KY12 0SU

Dear Dr Marshall,

Re: Kay Thomson**Current Address: Women's Aid 18 Walker Street Cowdenbeath Fife KY4 9JU****DOB: 12.07.1984 CHI: 1207840483 Contact number: 07757108513**

The above young lady was seen by your ST2, Dr Richard McClelland, back in December for a review appointment when she had been referred regarding fluctuating moods and quite erratic behaviour. As you will see from her notes there have been issues with Kay using illicit drugs and drinking at times to excess. On some occasions she hasn't used any drugs and only minimal alcohol but there has been a continual thread of quite chaotic behaviour that, we have never been able to manage well. This has resulted in her having minimal contact with her children, who are not living with her, getting involved in very unsuitable relationships and most recent one she was badly assaulted and according to Kay the gentleman is up for attempted murder.

I was asked to see Kay today and an appointment had been arranged by someone from Women's Aid, where she is now living. The history I got from Kay today was her mood is still fluctuating up and down just as much as when she was using drugs or alcohol. She always describes her thoughts as always been mixed up, she is disorientated, struggles at times to get motivated, sleep pattern could be up and down though generally she has got a good appetite. During this quite abusive relationship, in the last 3-4 months, she started to harm herself and has occasions which she can't even recall doing. She has taken a knife to her upper arms, wrists and to her anterior chest area, and certainly has evidence of quite bad scarring and keloid starting to develop on her anterior chest area.

Re: Kay Thomson

Current Address: Women's Aid 18 Walker Street Cowdenbeath Fife KY4 9JU

DOB: 12.07.1984

CHI: 1207840483

Contact number: 07757108513

She continues to be supported by her mum who comes across from East Lothian on a regular basis but unfortunately she is only seeing her son on 2-3 occasions in the last 3-4 weeks as he is now living with his gran. She did have quite a bit of contact with the Social Worker who was looking after but has not heard from her in recent weeks. Her older daughter, who lives with her dad, does text from time to time.

As mentioned she is now in the homeless unit in Cowdenbeath. Apparently she has lost her tenancy and all her household goods were put out in the street, for some reason which I wasn't able to completely establish during the consultation, and generally she feels her mood is starting to dip again.

In surgery today she was really well presented and noted the scars as mentioned. She wasn't voicing any thoughts of self harm at this moment in time.

I note that previously we have tried various anti-depressants with minimal benefit. I also see that a diagnosis of Emotional Unstable Personality problem was mentioned last year and she was referred to Hillview Day Hospital and also other recommendations with regarding managing anxiety but unfortunately she didn't engage with any of these. You will also note I did refer her back with regarding the possibility of a CT scan as the lady keeps describing her head as being mixed up and has had numerous injuries to her head as a result of these various abusive relationships but I was advised this should be arranged through Neurology but Neurology declined to see her.

Today on looking through her records she has had behavioural issues from a young teenager and I wonder if Kay would fall into the category of an adult with ADHD as her life at times, as mentioned, is chaotic. I except Kay has used street drugs and alcohol but looking back to teenage years she was like this before the use of these substances. She has had little response to anti-depressants or slight response for a short time. I would be grateful for your opinion on this and I certainly would be very grateful if a further assessment by yourself could be arranged.

Thank you very much for your help.

Yours sincerely

Dr J Sandra Wilson
GP

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Queen Margaret Hospital
Whitefield Road
Dunfermline
Fife
KY12 0SU

NHS Fife Community Service
Mental Health Service
Tel: 01383 623623 24093
<http://www.nhsfife.scot.nhs.uk>

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& Social Care
Partnership**



Dr JS Wilson
Lochgelly Medical Group
The Health Centre
David Street
Lochgelly, Fife
KY5 9QZ

Letter ID: 2886614

Dear Dr Wilson

Kay Thomson, 98 Main Street, Crosshill, Lochgelly, Fife, KY5 8AN
Date of Birth: 12/07/1984



CHI: 1207840483

ADMINISTRATIVE
LETTER

Date: 04/04/2018

Thank you for the referral of this lady which was discussed at the CMHT Meeting on Tuesday 3rd April.

It is clear from your letter and from looking through Dr McClelland's correspondence that Ms Thomson has a well established diagnosis of EUPD and although the possibility of ADHD was raised at his initial assessment he did not consider that to be pertinent and Ms Thomson did not complete the screening tools which he used.

It was also considered that there were a lot of psychosocial problems at the present time which are increasing her anxieties and hopefully with the support of Women's Aid she will be able to cope with the resultant stress this situation is having on her.

In view of the certainty of the diagnosis and that she has failed to engage with services which were offered previously we do not feel at the present time there is much value in offering her a further appointment at Hillview Day Hospital. Other services that would be available to her if she was able to engage would be Psychology.

Please contact Dr Marshall if you wish this referral to be reconsidered.

Many thanks,
Yours sincerely

Dr Alison West
Locum Consultant Psychiatrist

Authorised on 04/04/2018 10:46:06 by Alison West.

(P) Dr Derek Marshall, Locum Consultant Psychiatrist, Phase I, Queen Margaret Hospital, DUNFERMLINE

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LOCHGELLY MEDICAL PRACTICE
Susan Cattnach, M.B. Ch.B

HEALTH CENTRE
DAVID STREET
LOCHGELLY
FIFE
KY5 9QZ

Nurse Lindsay Dailly -

Phone (01592) 780277
Fax (01592) 784044

18/09/2018

Our Ref: SC/HB

Miss Kay Thomson
98 Main Street
Crosshill
KY5 8AN

Dear Miss Thomson

We write in respect of a letter we have received from Queen Margaret Hospital and write to advise a prescription has been issued for Quetiapine at their request. This prescription is available for collection from reception.

Unfortunately the telephone numbers we have on your medical records are incorrect and we would therefore appreciate if you could update your contact numbers.

Yours sincerely

Lochgelly Medical Practice
Dr Susan Cattnach

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NHS Confidential: Personal data about a patient

Lynebank Hospital
Halbeath Road
Dunfermline
Fife
KY11 4UW

Psychology Department
Adult Team
01383 565403
<http://www.nhsfife.scot.nhs.uk>

**Fife Health
& Social Care
Partnership**



Dr SJ Cattanach
Lochgelly Medical Group
The Health Centre
David Street
Lochgelly, Fife
KY5 9QZ



CHI: 1207840483
File Number S72078

Letter ID: 3055032

Dear Dr Cattanach

Clinic Date: 10/07/2018

Date: 26/10/2018

Kay Thomson, 18 Walker Street, Cowdenbeath, Fife, KY4 9JU

Date of Birth: 12/07/1984

Thank you for referring Ms Thomson to the Psychology Service. I met with her for an assessment and triage appointment on 10.07.18 at Cardenden Health Centre. The assessment and triage process involves all new referrals being offered a one off appointment as soon as possible following referral. The aim of this is to give us an opportunity to determine whether our service is suitable for the person referred and, if appropriate, offer some psychological advice and also literature on self-help. This letter outlines the outcome of my assessment.

Presenting Problems

It was quite difficult to obtain a clear picture from Ms Thomson who presented in a way that was incongruent to much of what she was saying. She came across as very talkative and it was hard for her to focus and maintain her train of thought. She describes feeling as though things are getting on top of her and is struggling with her mood swings. She describes one minute feeling like she's the life and soul of the party and the next minute feeling really down and not wanting to get out of her bed. I arranged a second assessment appointment on 07/08/18 which she failed to attend but asked for a rescheduled appointment and I met with her again on 04/09/18. She described feeling very low at this appointment stating that she had not been getting up / dressed / eating or doing anything over the past 4 weeks and had been avoiding seeing people, however, objectively her affect did not appear flat. I had asked her to complete a mood diary however, she did not do this. She described self-critical thoughts and regret over her past behaviour and feelings of irritability with others. She tells me that she got a dog 6 weeks ago but is now feeling 'intimidated by its demands'. She described experiencing high periods which can last for several weeks at a time where she feels 'on top of the world' is impulsive, takes risks and engages in a number of unhelpful behaviours such as gambling, drinking alcohol and meeting new people. She reports that recently she is struggling to stick to things and plan things.

She reports that she saw Dr McClelland in the past and was prescribed medication but did not want to take them because she was worried about the side effects. However she now states that she feels she would like to try medication although she is worried about a numbing effect. I discussed Ms Thomson at the CMHT and Dr Zara Morris agreed to write to yourself with advice regarding medication.

She reports that last year she was taking street valium and was engaging in self harm behaviour, making significant cuts to herself. She tells me that 4 weeks ago she took an overdose of Paracetamol as she "*felt really bad*". She reports that when she is down she spends her time in bed and struggles to get up, get dressed, won't answer the phone and has no motivation or energy. Conversely when she is feeling better she describes feeling like

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'superwoman', gets really excited and people tell her that she's hyperactive. She reports that she gets snappy at people because she feels that they laugh at her for being "unhappy". She reports that down periods can last for several weeks at a time when she withdraws into herself and reports that nobody sees her when she is down. She reports that she is struggling to see an end to the variability in her mood and describes that she is constantly waiting for her mood to dip. She reports that she does not want to die but at times when she is feeling low she does not care. She reports that she used to go to the gym but feels that she was letting her friends down by not turning up and she stopped going to nights out as well because she does not want to let them down again.

She reports that she used to be able to cope with her mood swings, however, describes finding it difficult not knowing what's coming and feeling that she can't control it. She describes feeling embarrassed by it and feels that she was less aware of it earlier in her life. She reports that she finds it hard to trust people and from what I can gather has been in a number of unhealthy and at times abusive relationships on both sides. She reports that her partner is currently in jail having been charged with endangering life which she tells me was because she attacked him in their home and then went outside and was lying in the middle of the road. She reports that her partner was trying to persuade her to get in the car when she tripped which a witness to this reported it looked like he was trying to run her over. Both of her children, Kenzie aged 15 and Riley aged 8 are staying with their fathers. She reports that the reason being is that she has moved and Kenzie attends school in Cowdenbeath however with regards to Riley she reports that this is a temporary arrangement with social work because she "lost the plot".

Relevant Background Information

I did not have time to complete a full history with Ms Thomson however she reports always having felt that 'there is something wrong with me'. She reports that she was 'kicked out of primary school for fighting' and skived a lot of secondary school resulting in her being excluded. She reports experiencing difficulties with her mood since her teenage years. She reports that she took an overdose at the age of 13/14 although was not sure why this was. She reports that she got in with a crowd of older friends when she was at school and began stealing money and was physically abusive towards her mother, resulting in a supervision order and her placement in foster care at the age of 15. She reports that she moved back to her parent's house when she was 16. She describes a history of alcohol and drug abuse.

Summary & Recommendations

It was very hard to obtain a clear picture from Ms Thomson and to build a coherent formulation and the variations in her mood would require further assessment. Ms Thomson clearly exhibits difficulties regulating her emotions and in her interpersonal relationships and many of these difficulties appear to date back to her early childhood. She describes feeling that she does not like what she does in terms of her self-harm and some of her behaviours and does not feel confident saying that she would never do that as she feels she is not in complete control of her actions. She reports that she is trying to think more about the consequences of her actions however, she lacks effective alternative strategies to self-regulate. Ms Thomson expressed a desire to be able to stabilise her mood better and to be able to plan things and stop making 'crazy decisions'. I am not sure how well Ms Thomson will engage in psychological therapy and feel that initially a focus on building her emotion regulation and interpersonal skills would be important first step. I have therefore referred her to the resources group and placed her on our waiting list for some focused work around emotion regulation and improving her interpersonal functioning.

Please do not hesitate to contact me should you wish to discuss any of the above.

Yours sincerely

Dr Rowena McElhinney
Clinical Psychologist

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Authorised on 15/11/2018 08:56:57 by Rowena McElhinney.

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Queen Margaret Hospital
Whitefield Road
Dunfermline
Fife
KY12 0SU

NHS Fife Community Service
Mental Health Service
Tel: 01383 627041
<http://www.nhsfife.scot.nhs.uk>

**Fife Health
& Social Care
Partnership**



Dr SJ Cattnach
Lochgelly Medical Group
The Health Centre
David Street
Lochgelly, Fife
KY5 9QZ



CHI: 1207840483

Letter ID: 3096824

Dear Dr Cattnach

Date: 13/09/2018

Kay Thomson, 18 Walker Street, Cowdenbeath, Fife, KY4 9JU

Date of Birth: 12/07/1984

Ms Thomson's care was discussed at our CMHT meeting on 11 September 2018 by her psychologist, Dr McElhinney.

I would be grateful to you for commencing a Quetiapine script for Kay. I recommend in the first instance that it is 25mg p.r.n. up to twice a day to see if this can help her while she's undergoing psychological therapy. I am very grateful to you for doing this.

Yours sincerely

Dr Zara Morris
Locum Consultant Psychiatrist

Authorised on 14/09/2018 10:34:11 by Zara Morris.

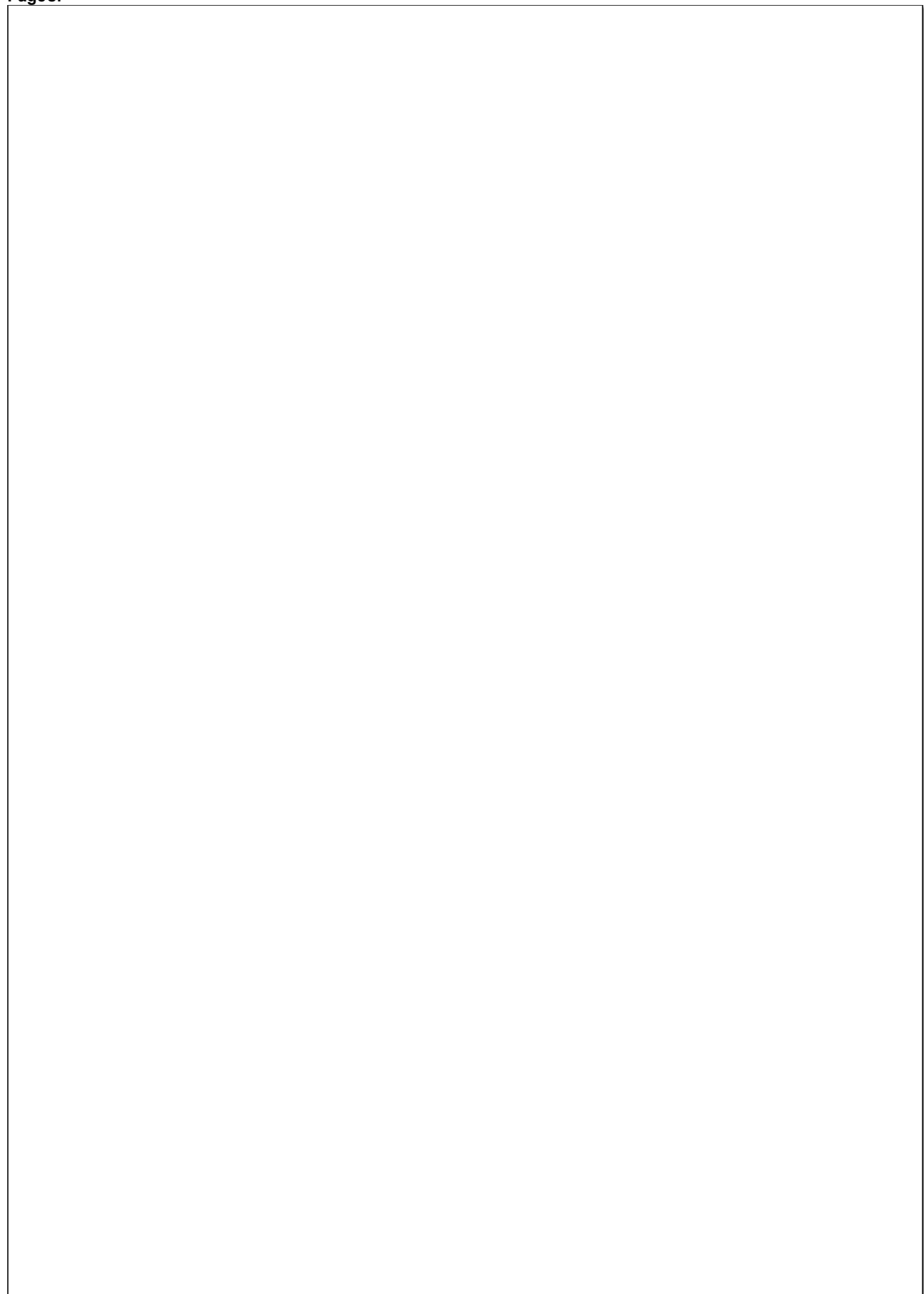
(P) Dr Rowena McElhinney, Consultant Psychologist, Lynebank Hospital, Dunfermline

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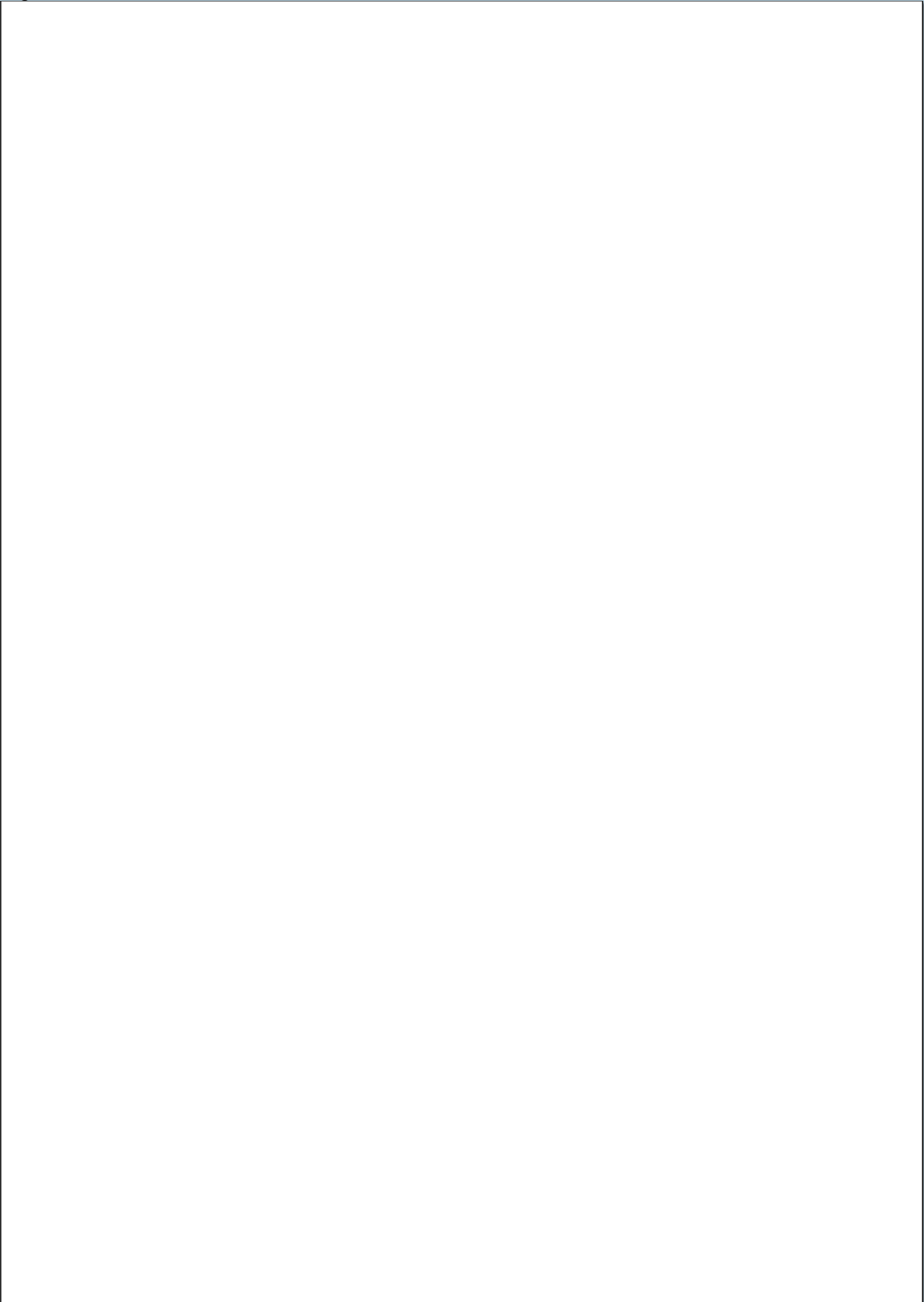
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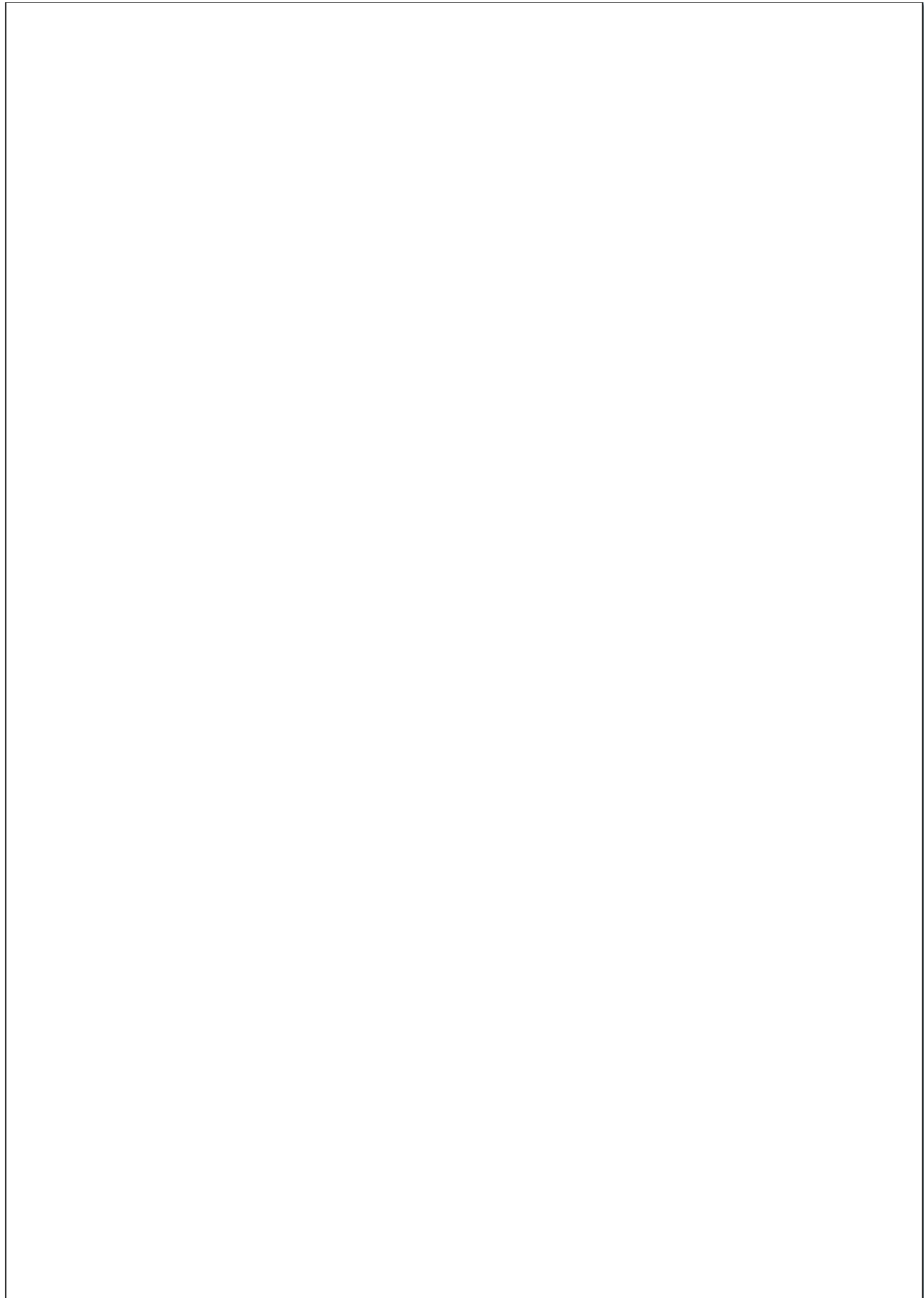
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Acute Services Division



V Emergency Department

SJ Cattanach
21435/1
Lochgelly Medical Group
The Health Centre
David Street
Lochgelly fife
Lochgelly
KY5 9QZ

Victoria Hospital
Hayfield Road
Kirkcaldy
KY2 5AH

Dear Doctor

Miss Kay Thomson
23 Carnethy Crescent
Kirkcaldy
KY2 6BG

CHI: 1207840483
ED Consultant: Dr Maggie Currer

The above patient attended the V Emergency Department on 25/04/2019 at 03:50. I outline below some information regarding this attendance.

Present Complaint: LAC TO NECK AND ARMS

Diagnosis:			
Description	Body Site	Laterality	Comments
ED injury - Wound - Incision			

Investigation(s)/Treatment(s):

Medication(s):

Additional Notes (for GP):

Kay was brought to ED by police for review.

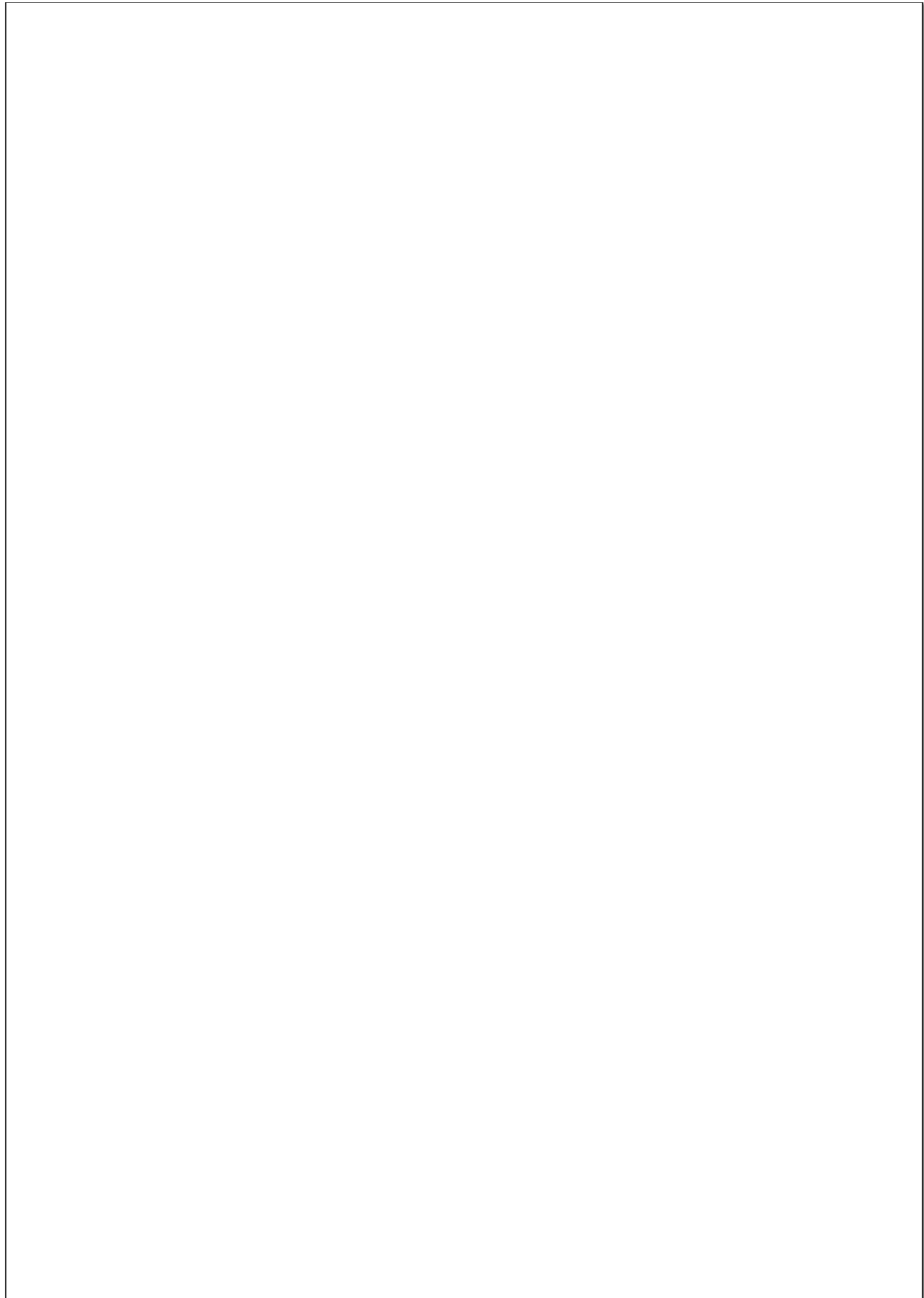
Had cut herself with a tin as a way of hurting herself rather than suicide. Everything had come to a head as not been sleeping or doing well and had been drinking alcohol earlier in the day. Was seen by OOH GP who steri stripped wounds and informed Kay that he would contact her own GP who she is keen to see today. Would like to restart quetiapine as thinks she is worse without it. Would prefer to seek mental health review via own GP and no ongoing plans of self harm.

Also was c/o knee and back pain but unsure re: injury. Mobilising normally. R knee slightly bruised with no swelling or bony tenderness. Nil abnormal on spinal exam. Given single dose paracetamol/ ibuprofen and D/C with MSK injury advice.

Created on 25/04/2019 08:59 by Dr Catriona Williamson STR

Version 1

Page 1 of 2



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ESA113

jobcentreplus

25 OCT 2018

Employment and Support Allowance

Our phone number is: 0121 335 0702

Dr Wilson
FIFE HEALTHCARE NHS TRUST
LOCHGELLY HEALTH CENTRE
DAVID STREET
LOCHGELLY
KY5 9QZ

31600/12

40550

If you have a textphone,
you can call on: 18001 0121 335 0702

If you get in touch with us, tell us this
reference number: JJ628431D

Date: 23rd October 2018

About your patient**Address**

18, Walker Street, Cowdenbeath, KY4 9JU

Full Name Miss Kay Thomson

NINo JJ628431D

Date of birth 12th July 1984

Dear Doctor,

Your patient is being assessed for Employment and Support Allowance 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 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 medical staff, please phone the number above and ask for a member of the medical 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 this 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 Lindsey Bowmaker



Centre for Health and Disability Assessments on behalf of the DWP
RESTRICTED - MEDICAL

Version 10/17

ESA113

Miss Kay Thomson

JJ628431D

12.07.1984

Please answer the following questions from the information which is currently available to you.

If you need more space for any of your answers, please
continue at Part 7.

1 When did your patient last see a GP?

11/10/2018

2 Current conditions affecting ability to work:
Please give us details of those conditions which may have significant effect on the person's capacity to work. Include:

- Relevant symptoms and signs, including side effects of medication, with dates. For mental health conditions, please provide brief mental state examination findings, if available.
- Past, present and planned investigations and management, including medication, **where relevant**.

If you are sending a computerised printout of current medication you do not need to list this here.

Please complete **both sides** of this form,
and return the completed form in the supplied envelope - with the above address showing in the window

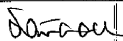
Condition and date of diagnosis	Symptoms and signs	Investigations, management & medication
Depressive disorder (2012)		Med Quetiapine 250g bd.
Drug overdoses (2017 / 2018)		
dx Emotionally unstable personality disorder Sep. 2018.		



Centre for Health and Disability Assessments on behalf of the DWP
RESTRICTED - MEDICAL

Version 10/17

NHS Confidential: Personal data about a patient

ESA113	About your patient - continued		NINo: JJ628431D																											
	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 <table border="1" style="width: 100%;"> <tr><td>Walking or moving</td><td>☐</td><td rowspan="13" style="vertical-align: top; padding: 5px;"> </td></tr> <tr><td>Transferring between seats</td><td>☐</td></tr> <tr><td>Reaching</td><td>☐</td></tr> <tr><td>Picking up objects</td><td>☐</td></tr> <tr><td>Manual dexterity</td><td>☐</td></tr> <tr><td>Communicating with others</td><td>☐</td></tr> <tr><td>Continence</td><td>☐</td></tr> <tr><td>Learning simple tasks</td><td>☐</td></tr> <tr><td>Awareness of hazards</td><td>☐</td></tr> <tr><td>Initiating and completing personal actions</td><td>☐</td></tr> <tr><td>Coping with changes or social engagement</td><td>☐</td></tr> <tr><td>Appropriateness of behaviour</td><td>☐</td></tr> <tr><td>Eating or drinking</td><td>☐</td></tr> </table>				Walking or moving	☐		Transferring between seats	☐	Reaching	☐	Picking up objects	☐	Manual dexterity	☐	Communicating with others	☐	Continence	☐	Learning simple tasks	☐	Awareness of hazards	☐	Initiating and completing personal actions	☐	Coping with changes or social engagement	☐	Appropriateness of behaviour	☐	Eating or drinking	☐
Walking or moving	☐																													
Transferring between seats	☐																													
Reaching	☐																													
Picking up objects	☐																													
Manual dexterity	☐																													
Communicating with others	☐																													
Continence	☐																													
Learning simple tasks	☐																													
Awareness of hazards	☐																													
Initiating and completing personal actions	☐																													
Coping with changes or social engagement	☐																													
Appropriateness of behaviour	☐																													
Eating or drinking	☐																													
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. I do not know how patient very well.																														
The information you have given us may be copied to the patient, their legal representative or the Tribunal Service.																														
Your Signature Signature 		Practice stamp Dr Susan Cattaneach Lochgelly Medical Practice David St. Lochgelly, KY5 9QZ Tel: 01592 780277 Fax: 01592 784044																												
Name IN CAPITALS Dr Susan CATTANEACH																														
Date 2 / 11 / 2018																														
Centre for Health and Disability Assessments on behalf of the DWP RESTRICTED - MEDICAL																														

Version 10/17

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LOCHGELLY MEDICAL PRACTICE

Susan Cattanach, M.B. Ch.B.

HEALTH CENTRE
DAVID STREET
LOCHGELLY
FIFE
KY5 9QZ

Practice Nurse: Lindsay Dailly

Phone (01592) 780277
Fax (01592) 784044

CHANGE OF PERSONAL/ADDRESS DETAILS

Please complete only the section which you are changing:

Name	Kay Thomson	DOB	12-7-84
Current Address	19 Nalkor Street (Womans Aid) 98 mainstreet Crosshill Previous.		
New Address	36 Kirkton Park. Ballingry KY5 8PB.		
New Name	Daughter Kaye Thomson		
Telephone Number	07713329205.		
Mobile Number			
Email Address	KayThomson322@gmail.com.		

A separate form should be used for each person.

Children or adults aged 16 years or over will be required to complete and sign their own form.

Parents / Guardians of children under the age of 16 years may sign on behalf of their children.

Signed: K Thomson
Print name: KAY THOMSON
Relationship to Patient (if not patient):
Date: 28/1/19.

V recorded
28/1

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Victoria Hospital
Hayfield Road
Kirkcaldy
Fife
KY2 5AH

Emergency Department
Tel: 01592 643355 Ext 29796
<http://www.nhsfife.scot.nhs.uk>



Dr SJ Cattanach
Lochgelly Medical Group
The Health Centre
David Street
Lochgelly, Fife
KY5 9QZ



CHI: 1207840483

Letter ID: 3337415

Date: 15/03/2019

Dear Dr Cattanach

Kay Thomson, 18 Walker Street, Cowdenbeath, Fife, KY4 9JU

Date of Birth: 12/07/1984

Date of Admission: 14/03/2019

Date of Discharge: 15/03/2019

**Diagnosis: (1) Alcohol intoxication
(2) Recreational drug use**

Miss Thomson was brought to the Emergency Department after being found by her partner alcohol intoxicated and possible ingestion of spice (psychotropic agent). When I assessed her this morning on the ward round she seemed a bit more awake and alert, orientated to time, place and person. She denies any recollection of previous night's events and states that she otherwise lives at home and her 2 children are under the care of their biological dads. Miss Thomson does not appear to have sustained any physical injury.

On closer questioning she tells me that she has never used recreational drugs, however, she does consume alcohol and on a bad week can consume approximately 14 bottles of wine. Miss Thomson does not feel this is problematic drinking, but it was unclear if she would be willing to take up an appointment with an Alcohol Liaison Service. We had invited the Alcohol Liaison Nurse to discuss strategies aimed at harm reduction, however she repeatedly ignored his efforts to discuss her drinking issues. The patient was keen to go home and organised for her own taxi to take her back home. She has been discharged from the department with no further follow-up planned. We were informed that she does not have any contact with her children therefore no Wellbeing Form has been completed.

Yours sincerely

Dr Nilesh Champaneria MBBS MRCS Ed FRCEM
Consultant in Emergency Medicine

Authorised on 15/03/2019 18:07:02 by Nilesh Champaneria.

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Fife Health & Social Care Partnership



Supporting the people of Fife together

Enquiries to: Psychology Secretary

Tel: 01383 565425

BSL users text: 07805 800 005

Fife-UHB.PsychologyServices@nhs.net

Our Ref: AK/BW

CHI: 1207840483

Date: 30 April 2019

Ms Kay Thomson
18 Walker Street
Cowdenbeath
KY4 9JU

Dear Ms Thomson

You have been referred to the Emotional Resources Group. The Emotional Resources Group is a weekly, six session emotion regulation course, designed to help people better manage their emotions. Hopefully you and your referrer have discussed this referral and you were expecting this letter.

It is important to know that the Emotional Resources Group is a **skills-based course**. This means that the focus is on learning new techniques and strategies, so there will be limited opportunities for in-depth discussions. This makes it more similar to a classroom learning environment. You will also be asked to complete paperwork and exercises in the sessions, and between them as homework. If you have any questions about this, please ask when you call.

Please note there are limited spaces for each course. The Emotional Resources Group is a closed group. This means that only those who attend the first session can complete the course.

What to do next:

- Look at the course dates on the enclosed sheet
- Call us on **01383 565425** by **10th May 2019** to confirm if you can or cannot attend
- If when you call there are no spaces left, we will prioritise you for the next course

What happens during and after your call:

- We will arrange a time for a clinician to call you to discuss whether the course is suitable for you
- If you are suitable, we will arrange for some paperwork to be sent to you

Psychology Department

Lynbank Hospital, Halbeath Road, Dunfermline, KY11 4UW

Fife Health and Social Care Partnership
A partnership between Fife Council and NHS Fife
www.fifehealthandsocialcare.org



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What happens if you do NOT call:

- You will be unable to attend the course and we will re-allocate your place to someone else.
- You **WILL** be discharged from the Emotional Resources Group

Please note if you have also been referred for individual therapy or any other support from the Psychology Service you **MUST** contact us. If you do not contact us you will be discharged from the Psychology Service.

We look forward to hearing from you.

Yours sincerely

Ben Wiffen

Diane Walsh

Dr Ben Wiffen
Clinical Psychologist

Diane Walsh
Staff Nurse

cc: Dr Rowena McElhinney, Clinical Psychologist, Psychology Department, Lynebank Hospital, Dunfermline

cc: Dr Cattnach, Lochgelly Medical Practice, David Street, Lochgelly

Enc: Client leaflet
Time and dates of course

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LOCHGELLY MEDICAL PRACTICE
Susan Cattnach, M.B. Ch.B

HEALTH CENTRE
DAVID STREET
LOCHGELLY
FIFE
KY5 9QZ

Advanced Nurse Practitioner Corinne Cairns

Phone	(01592) 780277
Fax	(01592) 784044

10/05/2019

Our Ref: SC/HB

Miss Kay Thomson
36 Kirkton Park
Ballingry
Fife
KY5 8PB

Dear Miss Thomson

Can you please telephone the surgery (01592 780277) and arrange a 5 minute telephone appointment with the doctor to discuss a letter from Dr Morris, Consultant Psychiatrist.

Yours Sincerely

Lochgelly Medical Practice
Dr Susan Cattnach

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Queen Margaret Hospital
Whitefield Road
Dunfermline
Fife
KY12 0SU

NHS Fife Community Service
Mental Health Service
Tel: 01383 627041
<http://www.nhsfife.scot.nhs.uk>

**Fife Health
& Social Care
Partnership**



Dr Fiona Seaman
Locum to Dr SJ Cattanaich
Lochgelly Medical Group
The Health Centre
David Street
Lochgelly, Fife
KY5 9QZ



CHI: 1207840483

Letter ID: 3403675

Dear Dr Seaman

Date: 09/05/2019

Kay Thomson, 36 Kirkcoun Park, Ballingry, Lochgelly, Fife, KY5 8PB

Date of Birth: 12/07/1984

Many thanks for referring Kay to psychiatric secondary care. Your referral was discussed at our CMHT meeting. As you are aware, she is a lady with a well established diagnosis of Emotionally Unstable Personality Disorder. It does appear that she is not taking the Quetiapine as prescribed and certainly I would share your concern about the risk of overdose.

It is unfortunate that she does not wish to attend the Emotional Resources group as certainly this would be the most helpful thing for her.

She really does need to engage with psychological work in order to regulate and manage her emotions.

Perhaps I would suggest that she book in to a group through the Access Therapies website as she would be a good candidate for some of the groups that they run. There is no other medication I would recommend and I feel that she does need to engage with a psychological approach to her illness. I am, therefore, declining this referral.

Yours sincerely

Dr Zara Morris
Locum Consultant Psychiatrist

Authorised on 09/05/2019 10:58:16 by Zara Morris.

Fife Council and NHS Fife are supporting the people of Fife together through the Fife Health & Social Care Partnership.
www.fifehealthandsocialcare.org



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MARAC CASE NO. 1646 : THOMSON : REQUEST FOR... - Lochgellycattanach (NHS ... Page 1 of 2



MARAC CASE NO. 1646 : THOMSON : REQUEST FOR INFORMATION

marac (NHS FIFE)

Mon 13/05/2019 12:18

To:Lochgellycattanach (NHS FIFE) <Fife-UHB.F21435LochgellyCattanach@nhs.net>;

Importance: High

📎 2 attachments

NOTIFICATION 1646 KT.docx; NOTIFICATION 1646 Thomson x.pdf;

For the attention of the GP for: Kay Thomson (12.07.1984)

Following an incident of domestic abuse, this case has been referred to MARAC (multi-agency risk assessment conferencing). Please can you share any relevant information you have regarding the patient.

MARAC is a high level, inter-agency information sharing process dealing with only the most serious cases of domestic abuse. The purpose of MARAC is to prevent further violence or homicide through the development of a safety plan, designed to address the key identified risk factors.

Please can you fill in the attached form using brief notes (this is not a request for a full report) and return it via email to Fife-UHB.marac@nhs.net by Tuesday 21ST May 2019. Please save the form before adding any information on to it.

Typed versions only.

Thanks and kind regards,

Jo Carstairs

Admin Assistant (Gender Based Violence)

01592 729258 Ext: 29258

j.carstairs@nhs.net

(Tuesdays and Wednesdays 08.30-16.30)

Cheryl Bayne: Gender Based Violence Nurse

01592 72929 Ext: 29289

07966884062

cheryl.bayne@nhs.net

(Tuesdays 09.30-15.30, Wednesdays and Thursdays 09.30-16.30)

<https://email.nhs.net/owa/Fife-UHB.F21435LochgellyCattanach@nhs.net/>

13/05/2019

NHS Confidential: Personal data about a patient

MARAC CASE NO. 1646 : THOMSON : REQUEST FOR... - Lochgellycattanach (NHS ... Page 2 of 2

MARAC Practitioners Guidance - information about the MARAC Process, Risk Assessment, Safety Planning and Making a Referral can be found at:
<http://intranet.fife.scot.nhs.uk/subjects/index.cfm?fuseaction=page.display&pageid=C3023F9C-9AD3-5616-2A529B9F9D20562D&subjectid=5AC0DA91-914B-47DB-A964-32D811AA3B91>

<https://email.nhs.net/owa/Fife-UHB.F21435LochgellyCattanach@nhs.net/>

13/05/2019

NHS Confidential: Personal data about a patient

Date: 23/05/2019

Case Number: 1646



protecting victims of domestic abuse

Victim: Kay Thomson

Repeat: Yes

Previous MARAC Case Number(s): 1646, 15/02/2018

Source of Referral: Police

Legal authority to share this information:

Relevant Protocol Completed	YES	If yes, please detail	SASPI – Scottish Accord on the Sharing of Personal Information
OR			
Legal grounds (If yes, please tick one or more grounds below)			Y / N
1. Prevention / detection or crime and/or apprehension or prosecution of offenders (DPA), Section 9 Information Sharing Protocol (ISP)			Section 29 Data Protection Act
2. To protect vital interests of the data subject; serious harm or matter of life or death			Schedule 2&3 DPA. Section 9 ISP
3. For the administration of justice (usually bringing perpetrators to justice)			Schedule 2 & 3 DPA. Section 9 ISP
4. For the exercise of functions conferred on any person by or under any enactment (Police / Social Work Services)			Schedule 2 & 3 DPA. Section 9 ISP
5. In accordance with a court order			
6. Overriding public interest (common law)			
7. Child protection – disclosure to social services or police for the exercise of functions under the Children (Scotland) Act, where the public interest in safeguarding the child's welfare overrides the need to keep the information confidential, Schedule 2 & 3 DPA. Section 9 ISP			
8. Right to life (Human Rights Act, Articles 2 & 3)			
9. Right to be free from torture, of inhuman or degrading treatment (Human Rights Act, Articles 2 & 3)			

High Risk Domestic Abuse Cases are discussed at MARAC (Multi-Agency Risk Assessment Conference)

Information is gathered and shared in order to establish a comprehensive understanding of risks and agree a risk management plan (RMP) for the adult victim and any children.

Information pertaining to the victim, perpetrator or any children, should be returned to your agency representative in the days prior to the MARAC meeting. It should summarise:

- Last time you had contact,
- Nature of your relationship / frequency of contact,
- Any domestic abuse you are aware of,
- Concerns / risks you identify,
- Protective factors in place,
- Any particular supports that are in place from your own service or otherwise,
- Any additional support you propose to offer.

If you have any queries regarding this notification please contact your **MARAC Representative** in the first instance or the MARAC Coordinator: Claire McCulloch, MARAC Coordinator, Contact Number: 03451 55 55 55 Ext 441965.

NHS Confidential: Personal data about a patient

Personal Details for case number: 1646

	Victim	Alleged Perpetrator
Surname	Thomson	Johnstone
Forenames	Kay	Darren
Date of Birth	12/07/1984	31/10/1988
Gender	Female	Male
Address	23 Carnethy Crescent, Kirkcaldy, KY2 6BG OR 98 Main Street, Crosshill, KY5 8AN	2 Drylie Court, Cowdenbeath, KY4 9AG or HMP Perth
Status of relationship	Partner	

Children's Details

	Child 1	Child 2	Child 3	Child 4
Surname	Johnstone	Johnstone	Johnstone	Jonstone
Forenames	Darren	Aliyah	Logan	Cori/Kori
Date of Birth	03/09/2008	21/09/2009	29/06/2011	22/07/2007
Parent – Victim Perpetrator Both	Perp	Perp	Perp	Perp
Gender	Male	Female	Male	Male
Address	53 Lamberton Place, St Andrews	53 Lamberton Place, St Andrews	53 Lamberton Place, St Andrews	10 Terrace Place, Cowdenbeath or 10 Terris Street, Cowdenbeath
School/Nursery	Cannongate Primary	Cannongate Primary	Cannongate Primary	St Brides Primary

	Child 5	Child 6
Surname	Thomson	Smith
Forenames	Kenzie	Ryley
Date of Birth	22/07/2003	22/08/2010
Parent – Victim Perpetrator Both	Victim	Victim
Gender	Female	Male
Address	98 Main Street, Crosshill or 1 Dalbeath Gardens, Cowdenbeath	67 Martin Crescent, Ballingry
School/Nursery	Beath High	St Kenneth's Primary

NHS Confidential: Personal data about a patient

**MARAC INFORMATION REQUEST FORM****Please return by email by Tuesday 21st May 12 noon**

Name: Kay Thomson

MARAC number: 1646

The above named patient of yours is being discussed at a Multi-Agency Risk Assessment Conference (MARAC) because high risk domestic abuse has been identified.

Brief notes only, this is **not** a request for a full report. (Typed Only)

When was the patient last seen and by whom?

On 8th May 2019 by Dr Garry Mearns, Locum GP.

Has the patient disclosed any recent incidents of domestic abuse (within the last 12 months)?

Yes, "assaulted on 2nd May 2019" – "kicked, bitten on back and kicked around her ears".

Has the patient presented with any problems or conditions that may be associated with domestic abuse? Does the victim have any disabilities, mental health needs, problematic substance use issues, pregnancy (within the last 12 months) or other safeguarding needs that may increase the risk of violence and abuse?

Diagnosed – emotionally unstable personality disorder. Alcohol abuse. Referred on 26th April 2019 to Community Mental Health Team.

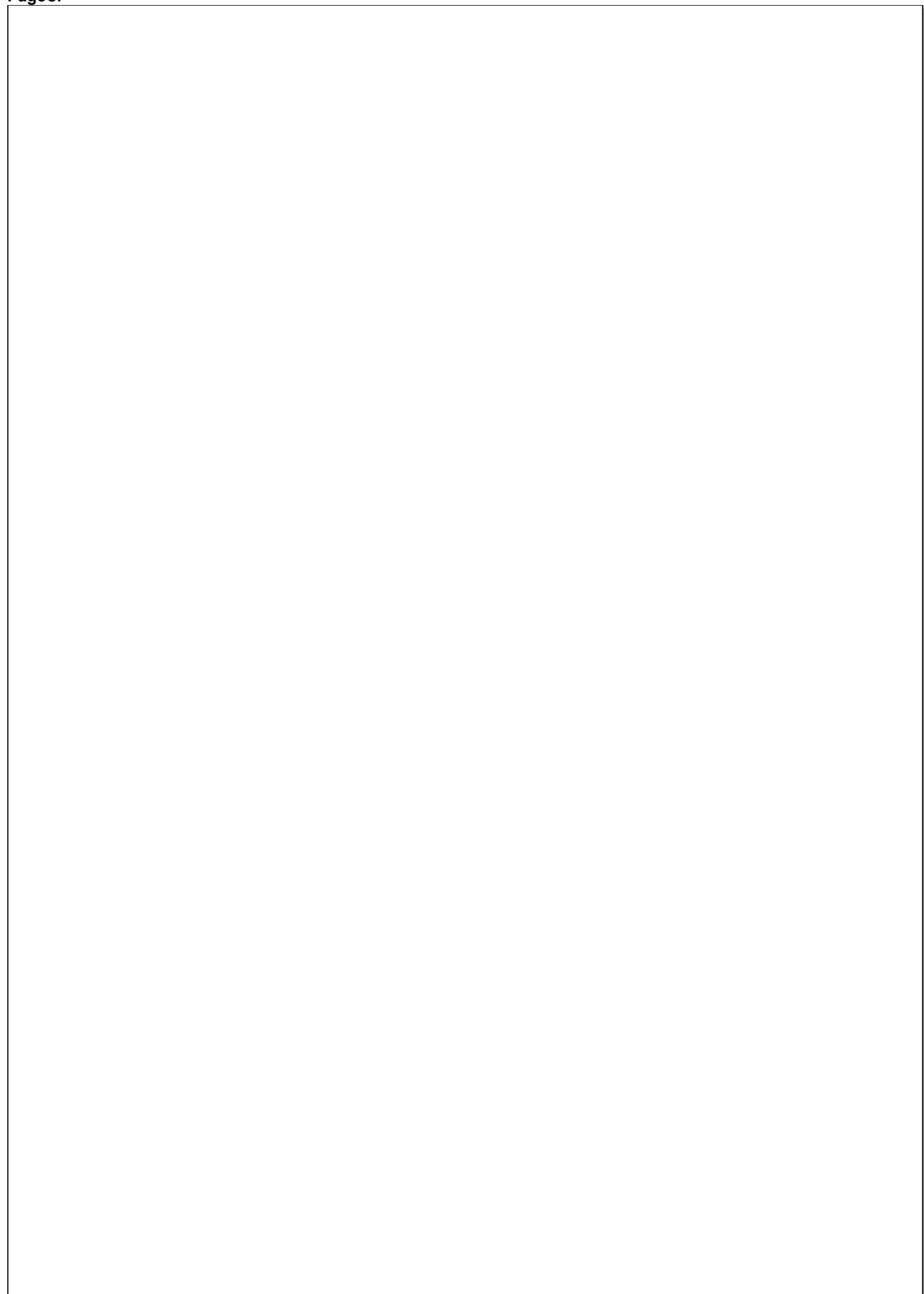
Form completed by: DR SUSAN CATTANACH Date: 16TH MAY 2019

Please return this form via email to: Fife-uhb.marac@nhs.net

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MARAC CASE 1646/THOMSON RISK MANAGEMENT PLAN - Lochgellycattanach (... Page 1 of 2

MARAC CASE 1646/THOMSON RISK MANAGEMENT PLAN

marac (NHS FIFE)

Thu 30/05/2019 13:20

To:Lochgellycattanach (NHS FIFE) <Fife-UHB.F21435LochgellyCattanach@nhs.net>;

Importance: High

1 attachment

RMP 1646 Thomson x.pdf;

For the attention of the GP for: Kay Thomson 12/07/84

Following an incident of domestic abuse, this case was referred to MARAC (multi-agency risk assessment conferencing). MARAC is a high level, inter-agency information sharing process dealing with only the most serious cases of domestic abuse. The purpose of MARAC is to prevent further violence or homicide through the development of a safety plan, designed to address the key identified risk factors.

I am attaching for your information the risk management plan agreed at MARAC and would ask you to note its contents and action any assigned health task. Please ensure that the information is recorded within the health record.

This RMP is only shared to enhance the immediate safety and wellbeing of the victim (s). Its contents are highly confidential and include sensitive information about multiple individuals. The Data Protection Act 1998 demands that careful consideration should be applied and justification evidenced, when deciding to share the contents both within your own organisation and other professional forums.

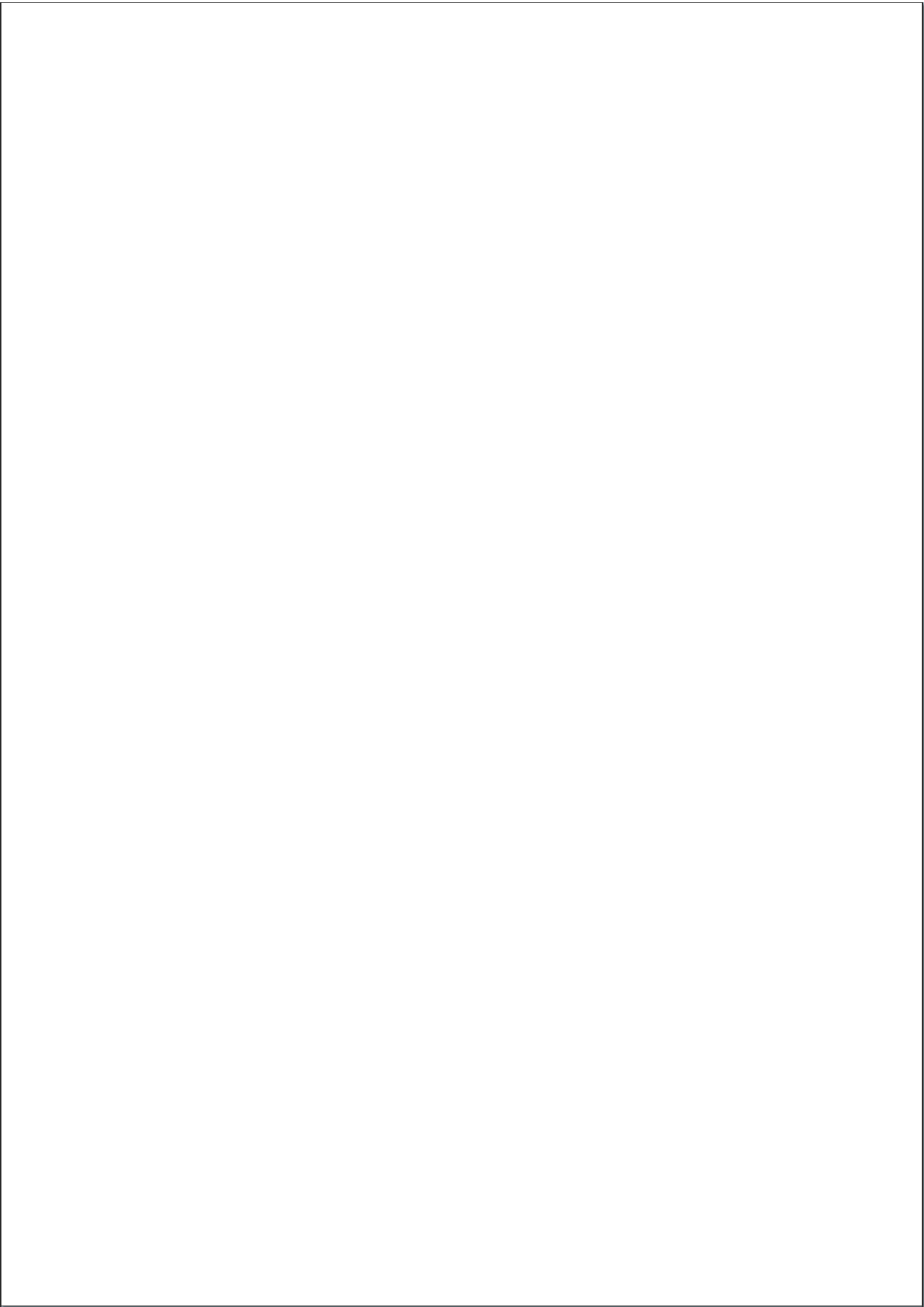
Should you have further concerns about the safety of the family please do not hesitate to contact DS Alison Rose, Fife Constabulary 01592 418460 or Gender Based Violence team.

Jo Carstairs
Admin Assistant (Gender Based Violence)
01592 729258 Ext: 29258
j.carstairs@nhs.net
(Tuesdays and Wednesdays 08.30-16.30)

Cheryl Bayne: Gender Based Violence Nurse
01592 72929 Ext: 29289
07966884062
cheryl.bayne@nhs.net
(Tuesdays 09.30-15.30, Wednesdays and Thursdays 09.30-16.30)

<https://email.nhs.net/owa/Fife-UHB.F21435LochgellyCattanach@nhs.net/>

30/05/2019



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Fife Health & Social Care Partnership



Supporting the people of Fife together

Private & Confidential

Ms Kay Thomson
18 Walker Street
Cowdenbeath
KY4 9JU

Enquiries to: Psychology Secretary
Tel: 01383 565425
BSL users text: 07805 800 005

Fife-UHB.PsychologyServices@nhs.net

Our Ref: AK/BW
CHI: 1207840483

Date: 13 June 2019

Dear Ms Thomson

You were recently invited to attend the Emotional Resources Group and asked to contact us to confirm your interest in attending.

We have not heard from you and therefore your referral to the Emotional Resources Group has now been cancelled.

You remain on the waiting list for individual therapy.

If you require any further information or advice, please do not hesitate to contact us on the number above.

Yours sincerely

Ben Wiffen

Diane Walsh

Dr Ben Wiffen
Clinical Psychologist

Diane Walsh
Staff Nurse

Cc: Dr Rowena McElhinney, Clinical Psychologist, Psychology Department, Lynebank Hospital, Dunfermline

Cc: Dr Cattanach, Lochgelly Medical Practice, David Street, Lochgelly

Psychology Department
Lynebank Hospital, Halbeath Road, Dunfermline, KY11 4UW

Fife Health and Social Care Partnership
A partnership between Fife Council and NHS Fife
www.fifehealthandsocialcare.org



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Unborn CWM - Lochgellycattanach (NHS FIFE)

Page 1 of 2

Unborn CWM

MaternityChildProtection (NHS FIFE)

Thu 19/09/2019 18:23

To:sw.contactctr@fife.gov.uk <sw.contactctr@fife.gov.uk>; MidwiferyCommunityOfficeForthPark (NHS Fife) <Fife-UHB.MidwiferyCommunityOfficeForthPark@nhs.net>; Lochgellycattanach (NHS FIFE) <Fife-UHB.F21435LochgellyCattanach@nhs.net>; NEIGHBOURHOOD2HVS (NHS FIFE) <Fife-UHB.Neighbourhood2HVs@nhs.net>;

3 attachments

NOCC Unborn Thomson.doc; CWM invite to professionals.docx; Wellbeing assessmentSHANARI.docx;

Hi all,

Please find attached invitation to the UCWM for Unborn Thomson EDD 23/01/2020, baby of Kay Thomson 12/07/1984 of 36 Kirkcoun Park, Ballingry. Attached also is the NOCC which provides details of the reason the meeting is being held. Please let me know if you will be able to attend. If there is anything you would wish to discuss with me in advance of the meeting, please contact me on the number provided.

Kind regards

Charlene Lawson

Family Health Team
The Podium
Phase 2
Victoria Hospital
Kirkcaldy
KY2 5AH
01592 643355 ext 22081

Pauline McQueen 07769163165
Charlene Lawson 07810637743
Louise Quinn 07810637710
Rebecca Saunders 07970922285

<https://email.nhs.net/owa/Fife-UHB.F21435LochgellyCattanach@nhs.net/>

20/09/2019

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Unborn CWM - Lochgellycattanach (NHS FIFE)

Page 2 of 2

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20/09/2019

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OFFICIAL SENSITIVE
FIFE CHILD CONCERN NOTIFICATION FORM (MULTI-AGENCY)

This form can be completed by anyone concerned about a child and should be used to follow up a telephone notification (See guidance for details)

Do you consider the child(ren) to be in IMMEDIATE danger Yes ☐ No ☒

(If no complete form and send to sw.contactctr@fife.gov.uk)

If Yes, DO NOT wait, call Police Scotland at 999

If Yes, please provide the name & office of Police Officer spoken to:

Time: Date: Name: Address:

SECTION 1 - CORE DETAILS (Please complete what you can)

NOTIFIED BY:

Name and job title:	Charlene Lawson Family Health Midwife		
Agency/Dept:	NHS Fife		
Contact Details:	Family Health Office The Podium Phase 2 VHK KY2 5AH Tel. No. 01592 643355 X 22081 or 07810 637 743 E-mail address Charlene.lawson@nhs.net		
Contact person for feedback or further enquiry (if different from above):	Address Tel. No. E-mail address		
Line Manager / CP Lead (if appropriate)	Pauline McQueen, Senior Midwife Child Protection Tel. No.: 01592 643355 ext 22081		

Full Name(s) of the child(ren) you are concerned about	Address & Tel. No.	DOB	Gender (M/F)	Ethnicity	School (If known)
Unborn Thomson	36 Kirkcoun Park, Ballingry	EDD: 23/1/19			

Full name(s) of other child(ren) in the household (enter "unknown" if information not available)	DOB	Gender (M/F)	Ethnicity	Relationship to the child	School (If known)

Full names of ALL adults in the household (include all known names i.e. maiden names, aliases, etc.)	DOB	Gender (M/F)	Ethnicity	Relationship to the child	Has Parental Rights & Responsibilities Y/N/not known
Kay Thomson	12/07/1984	F	UK	Mother	Y

Name of any PARENT who does not reside with the child (include all known names)	Address & telephone number	DOB	Gender (M/F)	Ethnicity	Has Parental Rights & Responsibilities Y/N/not known

Child Concern Notification Form *Child protection is everyone's job....it's our job*

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Others:	Name	Contact Details		Name	Contact Details		
Midwife	Charlene Lawson		School				
Health Visitor/PHN			GP	Lochgelly Medical Practice			
Nursery/Childcare			Other Professionals	Charlene Lawson Family Health Midwife	07810637743		
Is this child:							
Looked after?	Yes ☐	No ☒	Unknown ☐	on the Child Protection Register?	Yes ☐	No ☒	Unknown ☐

SECTION 2 - CONCERNS

Describe the issues which give you cause for concern, and why (you may wish to consider the SHANARRI indicators - Safe, Healthy, Achieving, Nurtured, Active, Respected and Responsible, Included). Include parental behaviour that is a concern (e.g. substance misuse, domestic abuse, mental ill health etc)

Include how many occasions or how long this has been happening, and the possible impact on the child and/or any other children in the same family/household.

If you think anyone poses a specific risk to children, please include their name(s) below:

Date of concern: 19/09/2019 Time of concern:

Nature of concern: Kay is pregnant with her third child. Daughter Kenzie 22/07/2003 resides with her father, Ryley Smith 22/08/2010 resides with paternal grandparents. This is a longstanding arrangement and Kay sees her children very regularly on an unsupervised basis. Kay has borderline personality disorder and was medicated for this prior to pregnancy but has stopped medication as she only took it sporadically. She admits to quite a chaotic time in the months before becoming pregnant, misusing alcohol and street valium, but she has been abstinent since finding out she was pregnant. She is currently registered as homeless, and has a live housing application, and resides with her sister and her 4 children on a temporary basis, and is hoping for a house in the Ballingry area. She gave up tenancy of a property in Kirkcaldy in May 2019 as she felt isolated from her supports in Ballingry.

From research, it has come to light that Kay's case was discussed at MARAC in May 2019. This was when her partner at the time Darren Johnstone 31/10/1988 assaulted her. He is currently in HMP Perth, Kay states she is unsure when he will be released. It has also come to light that their case was discussed at MARAC in Jan 2018 following an incident when he reversed towards her in a car and assaulted her. He was charged with attempted murder for this and served a term in prison. Kay is insistent he is not the father of her unborn baby however she does love him and want to be with him. She told the MARAC advocate in May that he was the father of her baby and she was terrified of him - she completely denies this. She states that things are not how they seem - that when they drink and take drugs they clash and are violent towards one another. She is abstinent of drugs and alcohol in pregnancy so does not think that this will be an issue when he is released. During my initial visit she was not honest about these events or Darren Johnstone - she says this was because she was confused about the timeline of events because her life was so chaotic at the time.

In view of this information an Unborn Child Wellbeing Meeting has been arranged, invitation attached to email

Does it involve any of the following (tick all that apply)

Parental Substance Misuse ☐ Domestic Abuse ☒ Mental Health Issues ☒ Child Sexual Exploitation (CSE) ☐ Extremism and Radicalisation ☐

Describe any discussions and/or actions that have already taken place regarding this concern.

Child Concern Notification Form *Child protection is everyone's job....it's our job*

November 2017

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Are there any additional support needs for the family, e.g. interpreter?

Information Sharing.

Have you made the parent/carer aware that information may be shared? Yes ☒ No ☐Have you made the child/young person aware that information may be shared? Yes ☐ No ☐**FOR RECEIVING AGENCY PURPOSES ONLY:** Please ensure that other professionals working with the child are aware of this concern and any outcome following notification.

Notification received by:

Outcome fed back to notifier:

Date:

By Whom:

Child Concern Notification Form *Child protection is everyone's job....it's our job*

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3

November 2017

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Unborn Child Wellbeing Meeting

Invitation to Professional

To: Community Midwife, Meadows Team
Health Visitor, Rosewell Clinic
Duty Worker, Children and Families Social Work, Cowdenbeath
GP, Lochgelley Health Centre

From: Charlene Lawson

Contact Number: 07810637743

Date: 19/09/2019

Unborn Thomson EDD 23/01/2020
Mother: Kay Thomson 12/07/1984
36 Kirkcoun Park, Ballingry KY 5 8PB

To whom it may concern

You are invited to attend a **Unborn Child Wellbeing Meeting** in relation to the above child.

The meeting will be held on:

Date: WEDNESDAY 2ND OCTOBER 2019
Venue: BABY CLINIC, ROSEWELL CLINIC, BALLINGRY ROAD, LOCHORE KY5 8ET
Time: 10.00AM

The reason for the meeting is to further consider the factors surrounding the child and agree whether multi-agency planning is required.

The discussion will be informed by a shared Wellbeing Assessment; therefore you are requested to complete the attached **Wellbeing Assessment Form** and bring it to the meeting with your single agency chronology.

All information within your Wellbeing Assessment should be discussed and agreed with the parent or carer (and the child where relevant) prior to the meeting.

If you are unable to attend the meeting, please send a copy of the completed Wellbeing Assessment Form to me and the family in advance of the meeting.

Please note that the child and their family have been invited to this meeting.



Community Planning Strengthening Fife's Future

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Yours sincerely

Charlene Lawson
Family Health Midwife



Community Planning Strengthening Life's Future

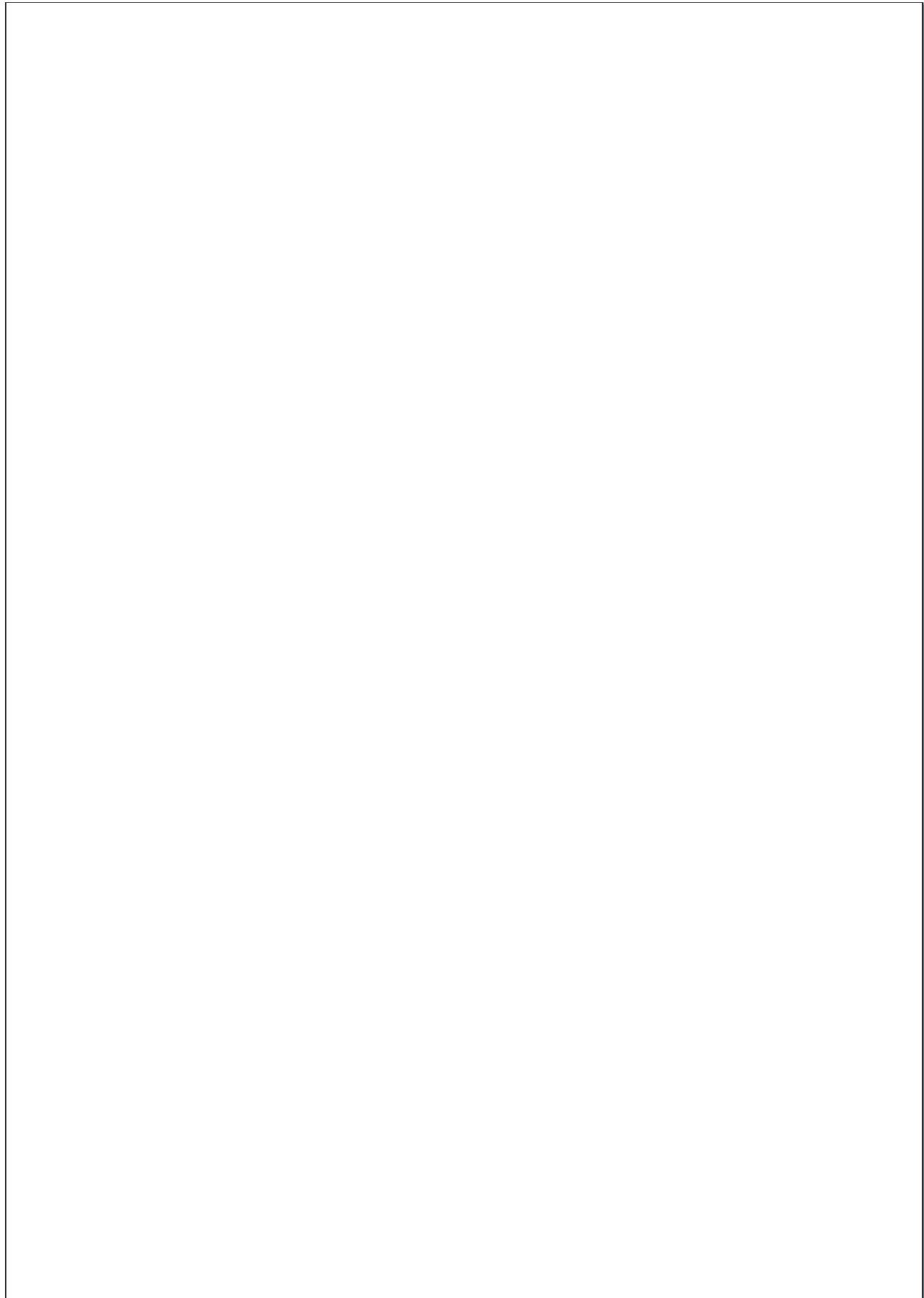
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Wellbeing Assessment Form (complete and bring to Child Wellbeing Meeting)

Consent to share information agreed	
Parent/Carer	Y / N
Young Person (12+)	Y / N

NAME OF CHILD:	DOB:	Name:
MOTHER'S NAME (Unborn only):	EDD:	Designation:
	CHI:	Date completed:

INDICATORS:	Identified Needs, Risks and Protective Factors:	Analysis: (consider the potential impacts on child/young person)
SAFE		
HEALTHY		
ACHIEVING		



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Victoria Hospital Maternity

Dr Cottanach
Locally med Group

Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH. Tel: 01592 643355.

Assessment Unit Visit: 06 Nov 19 at 09:45

THOMSON, KAY (CHI: 1207840483 | PMS Number: 1207840483)

12 Jul 84 (Current Age: 35) | 36 KIRKTOUN PARK, BALLINGRY, FIFE, KY5 8PB | 07874885313 (mobile)
 G4 P2+1 | LMP: 15 Mar 19 | Booked: 06 Jun 19 | EDD (Final): 23 Jan 20 | Current Gest: 28+6 | Babies on scan: 1 | Booking BMI:
 22.14 | Current BMI: 22.14 | Blood Group: O- | Hb at 28+6: 9.4g/dL

Visit Details

Date and time arrived:	06 Nov 19 at 09:45	Main reason for attendance:	Reduced Fetal Movements
Date and time attendance ended:	06 Nov 19 at 13:35	Other reason for attendance:	Pre term SROM, PV Bleeding
Length of stay:	3 hours 49 minutes		

Additional notes on arrival:

28+6
 Came in via ambulance
 RFM not felt baby move in 2 days
 ? SROM ? PV Bleed
 Discharge management: Continue with CMW

Additional notes on discharge:

Plans to see Charlene Lawson tomorrow
 Worsen advice given
 Attending midwife/ seen by: Nicola Cunningham

Seen by doctor: Rekha Pai

Pregnancy Details

Gravida and parity: G2 P0+1*
 EDD: 23 Jan 2020
 Current Gestation: Gestation 28weeks, 6days

Medical History / Risk Assessment

Booking BMI:	22.1367397300044	Current medication (Prescribed):	
Current Pregnancy Other:	has taken street diazepam in this pregnancy unsure of amounts	Current medication (Non-prescribed):	
Medical:	Blood Group Rhesus Negative	Allergies:	None Known
Mental Health:	Previous depression, Selfharm, Other: Kay states she has been diagnosed with personality disorder	Additional medical notes:	

Patient: KAY THOMSON, CHI: 1207840483
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Requested by Cunningham, Nicola at 06/11/19 13:53

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dger/mec

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Victoria Hospital Maternity



Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH. Tel: 01592 643355.

BP Profile

Date/Time	Location	Systolic BP	Diastolic BP	Left/Right	MAP
06 Nov 19 at 10:00	Triage	106	64	(Not Recorded)	78

Blood Tests, Results and Actions

06 Nov 19 at 11:42

Offered and Explained:	CRP, FBC, Liver Function Test, Urea and Electrolytes	Billirubin:	5.00
Accepted and Requested:	CRP, FBC, Liver Function Test, Urea and Electrolytes	Alk Phos:	70
Bloods Taken:	Yes	Sodium:	139
CRP:	3.5	Potassium:	3.40
Hb:	9.4	Urea:	2.60
Haemacue Hb:		Serum Creatinine:	56
WCC:	5.60	Bloods Taken Date/Time	06 Nov 19 at 10:20
Platelets:	205.00	Bloods Taken by:	Midwife
Albumin:	34		

Abdominal Palpation

Consent obtained:	Yes	Fetal movements felt	No
Number of fetuses	1	Fetal movements	Loss of Fetal Movements
Height of fundus	29	Notes	Abdo soft non tender on palpation

Fetus - Findings

Presentation	Cephalic	Fetal heart activity check	CTG-transducer
Lie	Longitudinal	Fetal heart rate	146
Engagement	Not Engaged		

CTG

Date and Time	06 Nov 19 at 09:55	Reason	Reduced fetal movements, ?SROM
Status	Commenced	Number of fetuses	1
Monitored by	Nicola Cunningham	Additional Notes	28+6 P 2 +1

Patient: KAY THOMSON, CHI: 1207840483
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Requested by Cunningham, Nicola at 06/11/19 13:53

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NHS Confidential: Personal data about a patient

Victoria Hospital Maternity



Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH. Tel: 01592 643355.

Speculum Examination

Date and time: 06 Nov 19 at 11:15
 Consent obtained: Yes
 Location: Triage

Reason for examination: To exclude rupture of the membranes
 Result: Negative

Clinical Notes

06 Nov 19 at 11:43

Completed by: Nicola Cunningham
 Type of user: Midwifery

Notes: Kay seen by a member of admin staff leaving the hospital building. Told staff that she was going to the shop for some chocolate. Will try and contact Kay if she doesn't return by 12.00

06 Nov 19 at 11:55

Completed by: Nicola Cunningham
 Type of user: Midwifery

Notes: Written in retrospect

Kay came in via ambulance this AM with RFM.
 Came in with her partner
 States that she has not felt baby move since Monday
 DNA CMW appt yesterday because she was tired
 Discussed the importance of movements and reporting when they are out of the normal. Advised to keep all CMW appointments and contact CMW if unable to attend and other arrangements can be made.
 Observations satisfactory
 Urine NAD
 CTG commenced with consent
 28/40 check done
 Bloods taken with consent
 Due Anti D.
 Kay states that during the night she woke up and the bed was wet and it appeared to be pink ? SRM ?
 PV bleed
 Placenta is low lying 17mm from os
 Scan and Spec needed to exclude SROM

06 Nov 19 at 12:26

Completed by: Nicola Cunningham
 Type of user: Midwifery

Notes: Phoned blood bank. Anti D still not ready.

06 Nov 19 at 13:34

Completed by: Nicola Cunningham
 Type of user: Midwifery

Notes: Kay fit for discharge
 Swabs taken and results will be followed up
 Worsening advice given

Patient: KAY THOMSON, CHK: 1207840483
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Requested by Cunningham, Nicola at 06/11/19 13:53
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Victoria Hospital Maternity

Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH, Tel: 01592 643355.



Staff Details

Staff Name (Printed): Nicola Cunningham
Staff signature:

Designation: Midwife
Date: 06 Nov 2019

Specialist Reviews

06 Nov 19 at 11:32: Obstetric - Clinic
Seen in Triage

35yrs.P2(2 SVDs), 28+6wks
H/O ?SRM earlier this morning with pinkish fluid staining her bedsheets
Has mental health issues and under the care of a VIP midwife
Placenta low lying at 22wk scan

CTG-reassuring

USS done: Breech presentation, FH seen, Placenta anterior with lower edge 29mm from internal os of cervix

Plan: Speculum examn , swabs

Patient: KAY THOMSON, CHI: 1207640483

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Requested by Cunningham, Nicola at 06/11/19 13:53

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Child Protection Message - Unborn Thomson - 2 - Lochgellycattanach (NHS FIFE)

Page 1 of 1

Child Protection Message - Unborn Thomson - 2

CPMFife (NHS FIFE)

Thu 14/11/2019 15:33

To: Lochgellycattanach (NHS FIFE) <Fife-UHB.F21435LochgellyCattanach@nhs.net>; MATERNITYCHILDPROTECTION (NHS FIFE)
<Fife-UHB.MaternityChildProtection@nhs.net>;

 1 attachment

CPM Confirmation - Unborn Thomson - 2 - 14.11.19.docx

Dear Colleague,

Please find the attached Child Protection Message in relation to **unborn Thomson**, for your information.

Kind regards

Kathryn

Kathryn Bell
Admin Team
NHS Fife Child Protection Team
Flat 4, Cedar House
Willow Drive
Whyteman's Brae
Kirkcaldy
KY1 2LF

Tel: 01592 648114<https://email.nhs.net/owa/Fife-UHB.F21435LochgellyCattanach@nhs.net/>

15/11/2019

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**CHILD PROTECTION NURSE ADVISOR
CHILD PROTECTION MESSAGE CONFIRMATION**
Strictly Confidential



Date/Time of Message: 14.11.19 15.20

Social Work Reference/PIN No: 433637

Social Worker/Telephone: Angela Binnie
03451 55 55 55 Ext 493505

Details transcribed by: Kathryn Bell

Childs details: N/A

Mothers name/details: Kay Thomson / 12.07.84 - 0483

EDD (if available): 23.01.20

Allocated Practitioner(s) and Base:
MW: Charlene Lawson
GP: Dr Susan J Cattnach, Lochgelly Medical Practice – F21435

Action Email confirmation of receipt of CPM sent to named SW.
Practitioner informed and confirmation forwarded.

Date/Time:	
	CPM message reads:
14.11.19 15.20	Child Protection registration
	CHILDS NAME WILL BE PLACED ON THE CHILD PROTECTION REGISTER AT BIRTH
	Nurse asked to contact named social worker for further information if has knowledge/is working with this child
	<i>As key public health practitioner I would be grateful if you would share this information with other practitioners involved with the family, to whom this information may be meaningful (i.e. psychological services, addiction services)</i>
	Form completed by Admin: Kathryn Bell
	Date: 14.11.19 ☒

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Dr CATANACH
Leckelly Medical Group

Victoria Hospital Maternity
Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH. Tel: 01592 643355.

NHS
File

Assessment Unit Visit: 02 Jan 20 at 11:00

THOMSON, KAY (CHI: 1207840483 | PMS Number: 1207840483)
12 Jul 84 (Current Age: 35) | 31 hilton view, lumphinans, KY5 8PB | 07591712245 (mobile)
G4 P2+1 | LMP: 15 Mar 19 | Booked: 06 Jun 19 at 00:00 | EDD (Final): 23 Jan 20 | Current Gest: 37+5 | Babies on scan: 1 |
Booking BMI: 22.14 | Current BMI: 22.14 | Blood Group: O- | Hb at 28+6: 9.4g/dL

Visit Details

Date and time arrived: 02 Jan 20 at 11:00
Date and time attendance ended: 02 Jan 20 at 15:45
Length of stay: 4 hours 44 minutes

Main reason for attendance: ECV
Other reason for attendance:

Additional notes on arrival:
Breech presentation for ECV.

Discharge management: ANC Follow Up

Additional notes on discharge:
Successful ECV today, Anti-D 500IU given post ECV, returning to ANC in 2 weeks to see Dr Bhaskar to re-check presentation and sweep

Attending midwife/ seen by: Rhona Falconer
Seen by doctor: Dr Swetha Bhaskar

Pregnancy Details

Gravida and parity: G2 P0+1*
EDD: 23 Jan 2020

Current Gestation: Gestation 37weeks, 5days

Medical History / Risk Assessment

Booking BMI: 22.1367397300044
Current Pregnancy Other: has taken street diazepam in this pregnancy unsure of amounts
Medical Blood Group Rhesus Negative
Mental Health Previous depression, Selfharm, Other: Kay states she has been diagnosed with personality disorder

Current medication (Prescribed):
Current medication (Non-prescribed):
Allergies: None Known
Additional medical notes:

BP Profile

Date/Time	Location	Systolic BP	Diastolic BP	Left/Right	MAP
02 Jan 20 at 11:05	Antenatal Day Unit	120	81	Left	94

Patient: KAY THOMSON, CHI: 1207840483
NHS Confidential: Personal Data about a patient

Requested by Falconer, Rhona at 07/01/20 11:42
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dgprinet

NHS Confidential: Personal data about a patient

Victoria Hospital Maternity

Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH. Tel: 01592 643355.



Blood Tests, Results and Actions

02 Jan 20 at 12:30

Offered and Explained: Group and Save, Kleihauer
 Accepted and Requested: Group and Save, Kleihauer
 Bloods Taken: Yes

Blood Group and Rhesus Factor: O-
 Bloods Taken Date/Time: 02 Jan 20 at 12:30
 Bloods Taken by:

Abdominal Palpation

Consent obtained: Yes

Number of fetuses: 1

Fetus - Findings

Presentation: Breech
 Lie: Longitudinal
 Position: RSA

Engagement: Not Engaged
 Fetal heart activity check: CTG-transducer
 Fetal heart rate: 157

CTG

Date and Time: 02 Jan 20 at 13:06
 Status: Completed
 Monitored by: Rhona Falconer
 Reason: ECV
 Number of fetuses: 1

Baseline: 151 - 160
 Accelerations: Present
 Decelerations: None
 Variability: 5 - 25 bpm
 Additional Notes: active baby

Clinical Notes

02 Jan 20 at 11:10

Completed by: Rhona Falconer
 Type of user: Senior Midwife

Notes: ECV procedure discussed with Kay, PIL given,

PMH:- States none
 Medication:- Nil
 NKDA

37 weeks gestation

2+1 (SVD 2003 SVD 2010)

Happy to proceed with ECV

Kay advised that due to Rhesus negative will
 require Anti-D post ECV

Patient: KAY THOMSON, CHI: 1207840483

NHS Confidential: Personal Data about a patient

Requested by Falconer, Rhona at 07/01/20 11:42
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dgp/met

NHS Confidential: Personal data about a patient

Victoria Hospital Maternity

Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH. Tel: 01592 643355.



02 Jan 20 at 13:10

Completed by: Rhona Falconer

Type of user: Senior Midwife

Notes: Awaiting Anti-D from blood bank, Kay going to go to Costa and I will contact her when Anti-D is available.

Kay aware to contact maternity assessment with any concerns:-

PV bleeding
reduced fetal movements
abdominal pain

Given date/time for return appointment

Staff Details

Staff Name (Printed): Rhona Falconer

Staff signature:

Designation: Midwife

Date: 07 Jan 2020

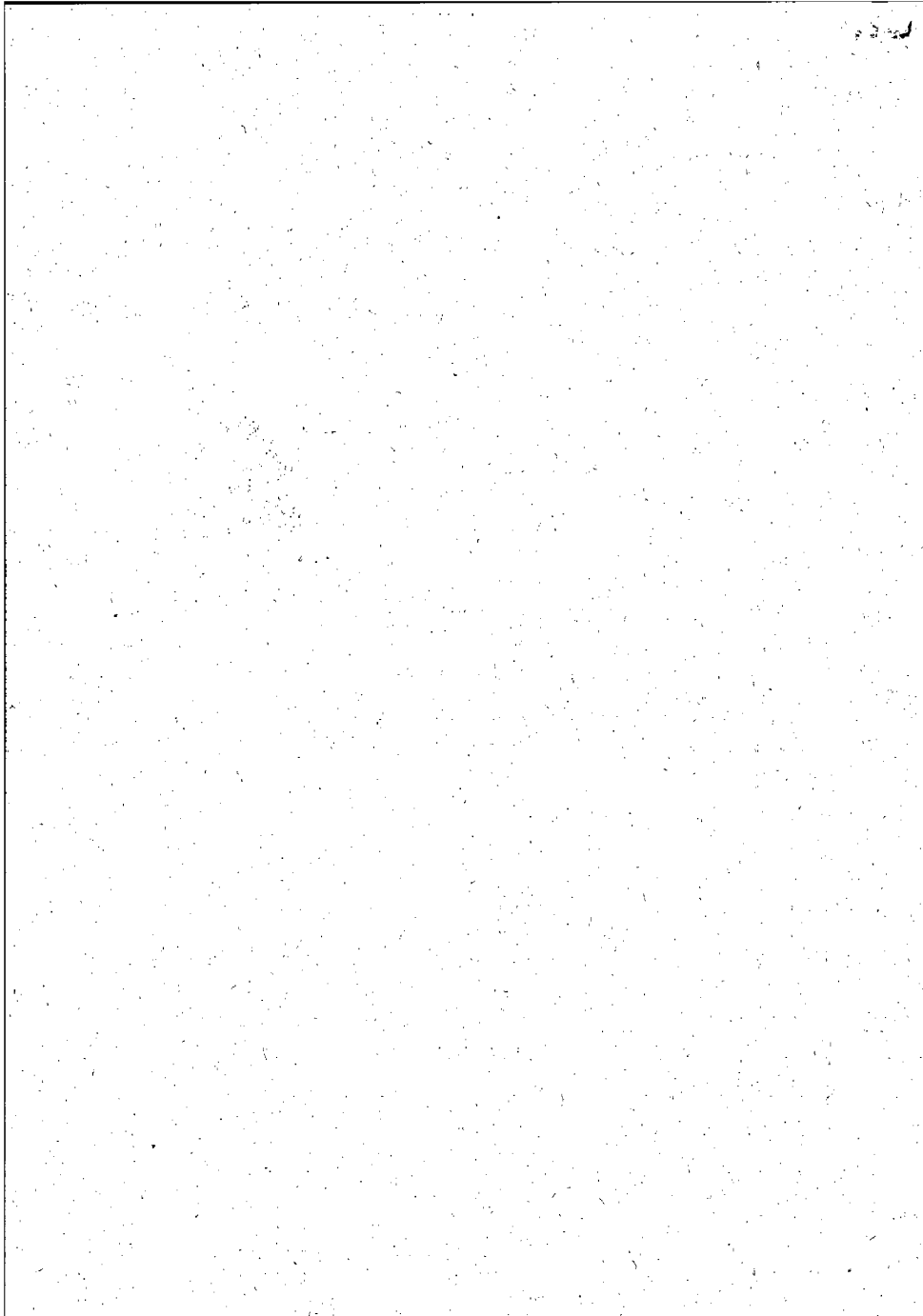
Patient: KAY THOMSON. CHI: 1207840483

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Requested by Falconer, Rhona at 07/01/20 11:42
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Victoria Hospital Maternity



Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH, Tel: 01592 643355.

Transferred to Postnatal Community Care - PATIENT COPY

THOMSON, KAY (CHI: 1207840483 | PMS Number: 1207840483)

12 Jul 84 (Age at Birth: 35) | 31 Hilton View, Lumphinnans, COWDENBEATH, Fife, KY5 8PB | 07591712245 (mobile)
 G2 P1+1* | DOB: 13 Jan 20 at 22:01 (38+4/40) | No. of Babies: 1 | Booking BMI: 22.14 | Current BMI: 22.14 | Blood Group: O- |
 Hb at 28+6: 9.4g/dL | PN 70hrs | Current Care: Hospital

Date of transfer 16 Jan 20 at 20:38

Outcome

Baby 1: Livebirth

Baby 1 Sex: Female

Baby 1 Birthweight: 3260 grams

Circle of Care

Name of GP: CATTANACH, SUSAN
 GP Practice Name: Lochgelly Medical Group
 GP Address: The Health Centre,
 David Street,
 Lochgelly, Fife,
 KY5 9QZ
 Named Midwife: Charlene Lawson

Named Midwife's telephone (not recorded)
 Team: Family Health Team
 Named consultant: Jenny Boyd

Key Details

Rubella Status: (not recorded)

Hb: 9.4 (06 Nov 19 at 11:42)

Hb: 13.2 (14 Jun 19 at 09:50)

Vaccinations: Whooping cough (Diphtheria,
 Tetanus, Pertussis and Poliomylitis)

Anti D Given: 02 Jan 20 at 15:35

TWEAK/ABI Taken Place: Yes

Additional Notes:

Uneventful postnatal recovery following SVD. Reports no drugs in last 4 weeks. Urine tox sent 15/1, results not back yet.
 CPO served. Baby staying with sister until grandmothers house in Edinburgh assessed for kinship. Kay has contact appt
 between 3-5 tomorrow so please arrange morning visit. Has Panel meeting on monday to review situation. Has breast pump
 and her mother will collect milk for baby.

Discharge details

Discharge from: Postnatal Ward
 Discharge telephone number: (not recorded)

Discharge mobile number: 07591712245

Contraception

Chosen method of contraception

Undecided

Contraception Administered

No

Patient: KAY THOMSON, CHI: 1207840483
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Requested by Hain, Nicola at 16/01/20 20:49
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Victoria Hospital Maternity



Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH. Tel: 01592 643355.

Medical History

Allergies	None Known	Prescription Meds. (prev. 12 mths)	Other: quetiapine 25mgs twice daily- has not taken for approx 8 weeks -advised to see gp
Blood Transfusions	Never	Smoker Ever	Gave up in last 6 weeks
Infections	Chickenpox	Date Quit	29 Apr 19
Any Medical Problems?	No	Smoker (in 12 mths pre-conception)	Yes
Mental Health Problems	Depression - in past, Selfharm, Other: diagnosed with personality disorder approx 18 months ago	Any Partner or Family Health Issues	Yes
Previous Mental Health Referral	Out-patient GP, Out-patient Psychiatric Unit		

Surgical History

Previous Operations: None

Labour and Birth Details

Number of Babies Born:	1	Membranes Complete	Appears Complete
Date and Time of Birth:	13 Jan 20 at 22:01	Episiotomy	No
Gestation at Birth:	38+4/40	Tear	No
Onset of Labour:	Spontaneous	Estimated Blood Loss (mls):	200
Final Type of Birth:	Vaginal Birth	Analgesia/Anaesthetic:	Morphine
Mode of Birth:	Normal, spontaneous vertex vaginal birth, occipito-anterior	RoM Duration	0 Hours + 16 Mins
Place of Birth	NHS hospital - Shared (Consultant/GP/Midwife)	Duration of first stage:	1 hrs 5 mins
Locations of Birth	Victoria Hospital Maternity (Kirkcaldy)	Duration of second stage:	0 hrs 11 mins
Placental Birth Method	Controlled Cord Traction	Duration of third stage:	0 hrs 5 mins
Placenta Complete	Apparently Complete		

Latest Postnatal Observations

Date/Time:	16 Jan 20 at 18:45	Lochia amount:	(not recorded)
Blood pressure:	128/79	Lochia description:	(not recorded)
Pulse:	90	Uterus:	(not recorded)
Temperature:	(not recorded)		

Medication TTOs

Patient: KAY THOMSON, CHI: 1207840483
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Requested by Hain, Nicola at 16/01/20 20:49
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NHS
File

Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH. Tel: 01592 643355.

Postnatal Management Plan: (not recorded)

No follow up appointments recorded

Additional Notes on Leaving: (not recorded)

Name: Nicola Hain

Signature:

Patient: KAY THOMSON. CHI: 1207840483
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Victoria Hospital Maternity

Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH. Tel: 01592 643355.

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Transferred to Postnatal Community Care - PATIENT COPY

THOMSON, KAY (CHI: 1207840483 | PMS Number: 1207840483)

12 Jul 84 (Age at Birth: 35) | 31 Hilton View, Lumphinnans, COWDENBEATH, Fife, KY5 8PB | 07591712245 (mobile)
 G2 P1+1* | DOB: 13 Jan 20 at 22:01 (38+4/40) | No. of Babies: 1 | Booking BMI: 22.14 | Current BMI: 22.14 | Blood Group: O- |
 Hb at 28+6: 9.4g/dL | PN 70hrs | Current Care: Hospital

Date of transfer 16 Jan 20 at 20:38

Outcome

Baby 1: Livebirth
 Baby 1 Birthweight: 3260 grams

Baby 1 Sex: Female

Circle of Care

Name of GP: CATTANACH, SUSAN
 GP Practice Name: Lochgelly Medical Group
 GP Address: The Health Centre,
 David Street,
 Lochgelly, Fife,
 KY5 9QZ
 Named Midwife: Charlene Lawson

Named Midwife's telephone (not recorded)
 Team: Family Health Team
 Named consultant: Jenny Boyd

Key Details

Rubella Status: (not recorded)
 Hb: 9.4 (06 Nov 19 at 11:42)
 Hb: 13.2 (14 Jun 19 at 09:50)

Vaccinations: Whooping cough (Diphtheria, Tetanus, Pertussis and Poliomyelitis)
 Anti D Given: 02 Jan 20 at 15:35
 TWEAK/ABI Taken Place: Yes

Additional Notes:

Uneventful postnatal recovery following SVD. Reports no drugs in last 4 weeks. Urine tox sent 15/1, results not back yet. CPO served. Baby staying with sister until grandmothers house in Edinburgh assessed for kinship. Kay has contact appt between 3-5 tomorrow so please arrange morning visit. Has Panel meeting on monday to review situation. Has breast pump and her mother will collect milk for baby.

Discharge details

Discharge from: Postnatal Ward
 Discharge telephone number: (not recorded)

Discharge mobile number: 07591712245

Contraception

Chosen method of contraception: Undecided

Contraception Administered: No

Patient: KAY THOMSON, CHI: 1207840483
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Requested by Hain, Nicola at 16/01/20 20:49
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Victoria Hospital Maternity

Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH. Tel: 01592 643355.



Medical History

Allergies	None Known	Prescription Meds. (prev. 12 mths)	Other: quetiapine 25mgs twice daily- has not taken for approx 8 weeks -advised to see gp
Blood Transfusions	Never	Smoker Ever	Gave up in last 6 weeks
Infections	Chickenpox	Date Quit	29 Apr 19
Any Medical Problems?	No	Smoker (in 12 mths pre-conception)	Yes
Mental Health Problems	Depression - in past, Selfharm, Other: diagnosed with personality disorder approx 18 months ago	Any Partner or Family Health Issues	Yes
Previous Mental Health Referral	Out-patient GP, Out-patient Psychiatric Unit		

Surgical History

Previous Operations: None

Labour and Birth Details

Number of Babies Born:	1	Membranes Complete	Appears Complete
Date and Time of Birth:	13 Jan 20 at 22:01	Episiotomy	No
Gestation at Birth:	38+4/40	Tear	No
Onset of Labour:	Spontaneous	Estimated Blood Loss (mls):	200
Final Type of Birth:	Vaginal Birth	Analgesia/Anaesthetic:	Morphine
Mode of Birth:	Normal, spontaneous vertex vaginal birth, occipito-anterior	RoM Duration	0 Hours + 16 Mins
Place of Birth	NHS hospital - Shared (Consultant/GP/Midwife)	Duration of first stage:	1 hrs 5 mins
Locations of Birth	Victoria Hospital Maternity (Kirkcaldy)	Duration of second stage:	0 hrs 11 mins
Placental Birth Method	Controlled Cord Traction	Duration of third stage:	0 hrs 5 mins
Placenta Complete	Apparently Complete		

Latest Postnatal Observations

Date/Time:	16 Jan 20 at 18:45	Lochia amount:	(not recorded)
Blood pressure:	128/79	Lochia description:	(not recorded)
Pulse:	90	Uterus:	(not recorded)
Temperature:	(not recorded)		

Medication TTOs

Patient: KAY THOMSON, CHI: 1207840483
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Requested by Hain, Nicola at 16/01/20 20:49
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 Victoria Hospital Maternity

Victoria Hospital, Hayfield Road, Kirkcaldy., KY2 5AH, Tel: 01592 643355.



Postnatal Care

Postnatal Management (not recorded)
Plan:

Follow Up Appointments

No follow up appointments
recorded

Additional Instructions

Additional Notes on (not recorded)
Leaving:

Discharged By

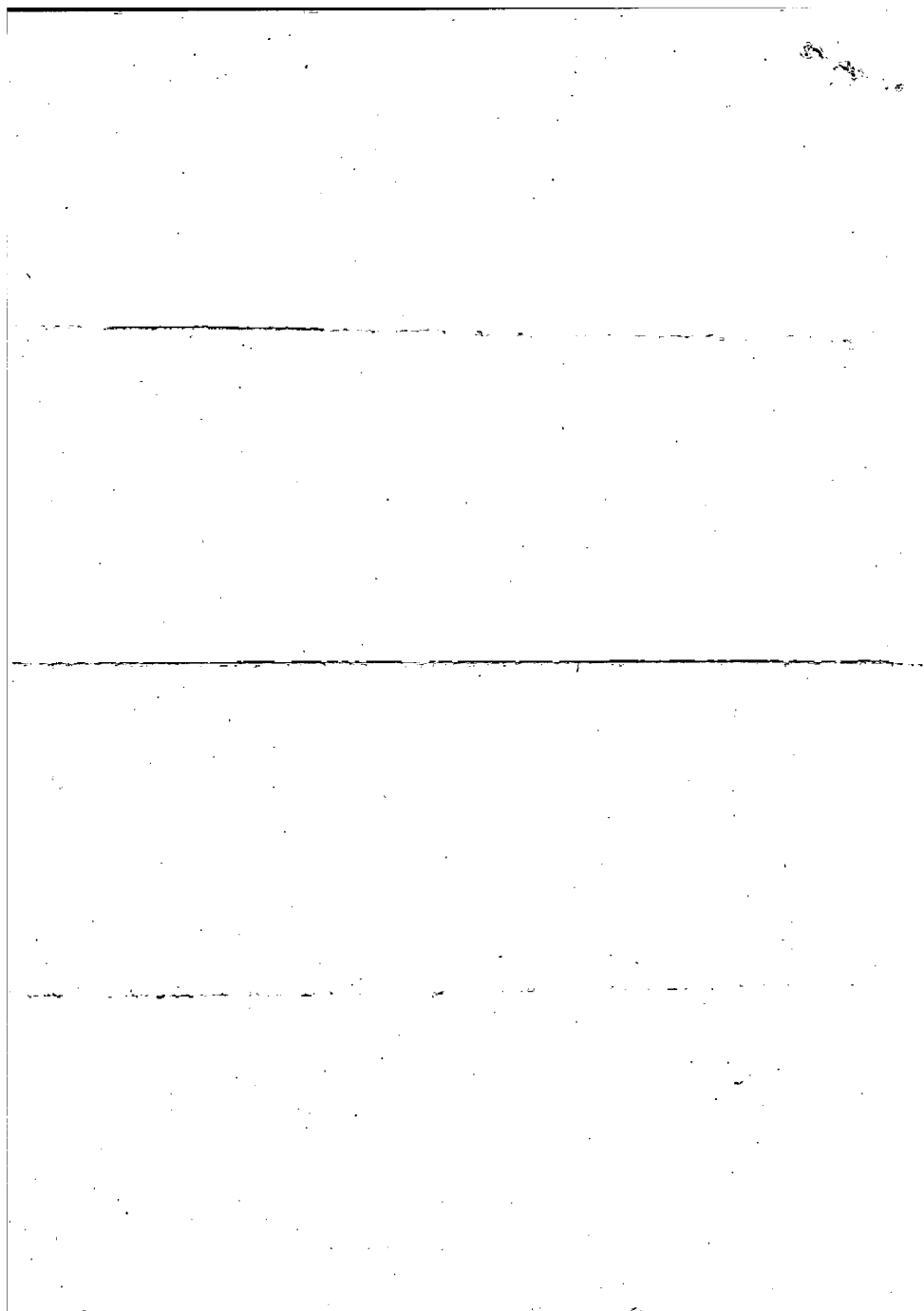
Name: Nicola Hain

Signature:

Patient: KAY THOMSON, CHI: 1207840483
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02/20/2020

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Victoria Hospital Maternity



Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH, Tel: 01592 643355.

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THOMSON, KAY (CHI: 1207840483 | PMS Number: 1207840483)

12 Jul 84 (Age at Birth: 35) | 31 Hilton View, Lumphinnans, COWDENBEATH, Fife, KY5 8PB | 07591712245 (mobile)
 G2 P1+1* | DOB: 13 Jan 20 at 22:01 (38+4/40) | No. of Babies: 1 | Booking BMI: 22.14 | Current BMI: 22.14 | Blood Group: O- |
 Hb at 28+6: 9.4g/dL | PN 70hrs | Current Care: Hospital

Date of transfer: 16 Jan 20 at 20:38

Outcome

Baby 1: Livebirth

Baby 1 Sex: Female

Baby 1 Birthweight: 3260 grams

Circle of Care

Name of GP: CATTANACH, SUSAN

GP Practice Name: Lochgelly Medical Group

GP Address: The Health Centre,
 David Street,
 Lochgelly, Fife,
 KY5 9QZ

Named Midwife: Charlene Lawson

Named Midwife's telephone: (not recorded)

Team: Family Health Team

Named consultant: Jenny Boyd

Key Details

Rubella Status: (not recorded)

Hb: 9.4 (06 Nov 19 at 11:42)

Hb: 13.2 (14 Jun 19 at 09:50)

Vaccinations: Whooping cough (Diphtheria,
 Tetanus, Pertussis and Poliomyelitis)

Anti D Given: 02 Jan 20 at 15:35

TWEAK/ABI Taken Place: Yes

Additional Notes:

Uneventful postnatal recovery following SVD. Reports no drugs in last 4 weeks. Urine tox sent 15/1, results not back yet.
 CPO served. Baby staying with sister until grandmothers house in Edinburgh assessed for kinship. Kay has contact appt
 between 3-5 tomorrow so please arrange morning visit. Has Panel meeting on monday to review situation. Has breast pump
 and her mother will collect milk for baby.

Discharge details

Discharge from: Postnatal Ward

Discharge telephone number: (not recorded)

Discharge mobile number: 07591712245

Contraception

Chosen method of contraception: Undecided

Contraception Administered: No

Patient: KAY THOMSON, CHI: 1207840483
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Victoria Hospital Maternity

Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH. Tel: 01592 843355.



Medical History

Allergies	None Known	Prescription Meds. (prev. 12 mths)	Other: quetiapine 25mgs twice daily- has not taken for approx 8 weeks -advised to see gp
Blood Transfusions	Never	Smoker Ever	Gave up in last 6 weeks
Infections	Chickenpox	Date Quit	29 Apr 19
Any Medical Problems?	No	Smoker (in 12 mths pre-conception)	Yes
Mental Health Problems	Depression - in past, Selfharm, Other: diagnosed with personality disorder approx 18 months ago	Any Partner or Family Health Issues	Yes
Previous Mental Health Referral	Out-patient GP, Out-patient Psychiatric Unit		

Surgical History

Previous Operations: None

Labour and Birth Details

Number of Babies Born:	1	Membranes Complete	Appears Complete
Date and Time of Birth:	13 Jan 20 at 22:01	Episiotomy	No
Gestation at Birth:	38+4/40	Tear	No
Onset of Labour:	Spontaneous	Estimated Blood Loss (mls):	200
Final Type of Birth:	Vaginal Birth	Analgesia/Anaesthetic:	Morphine
Mode of Birth:	Normal, spontaneous vertex vaginal birth, occipito-anterior	RoM Duration	0 Hours + 16 Mins
Place of Birth	NHS hospital - Shared (Consultant/GP/Midwife)	Duration of first stage:	1 hrs 5 mins
Locations of Birth	Victoria Hospital Maternity (Kirkcaldy)	Duration of second stage:	0 hrs 11 mins
Placental Birth Method	Controlled Cord Traction	Duration of third stage:	0 hrs 5 mins
Placenta Complete	Apparently Complete		

Latest Postnatal Observations

Date/Time:	16 Jan 20 at 18:45	Lochia amount:	(not recorded)
Blood pressure:	128/79	Lochia description:	(not recorded)
Pulse:	90	Uterus:	(not recorded)
Temperature:	(not recorded)		

Medication TTOs

Patient: KAY THOMSON, CHI: 1207849483
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Victoria Hospital Maternity

Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH. Tel: 01592 643355.

Postnatal Care

Postnatal Management Plan: (not recorded)

Follow Up Appointments

No follow up appointments recorded

Additional Instructions

Additional Notes on Leaving: (not recorded)

Discharged By

Name: Nicola Hain

Signature:

Patient: KAY THOMSON. CHI: 1207840483
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03/01/2020

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Victoria Hospital Maternity

Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH. Tel: 01592 643355.



Transferred to Postnatal Community Care

THOMSON, Baby (CHI: 1301208302 | PMS Number: TF00014221)
DOB: 13 Jan 20 at 22:01 | F | Baby 1 of 1 | 31 Hilton View, Lumphinnans, COWDENBEATH, Fife, KY5 8PB | 07591712245
Type of Birth: Spontaneous Cephalic | Gestation at Birth: 38+4 | Birthweight: 3260 | Apgar: 1min: 9 5mins: 9
DISCHARGE ADDRESS DIFFERENT TO HOME ADDRESS

Date of transfer	16 Jan 20 at 18:11	lochgelly
Discharge Destination	Foster parents	Fife
Discharge Address	36 Kirkcoun Park	Postcode KY5 8PB
	Ballingry	

Circle of Care

Name of GP:	CATTANACH, SUSAN	Named Midwife's telephone	(Not Recorded)
GP Address:	The Health Centre, David Street, Lochgelly, Fife, KY5 9QZ	Team:	Family Health Team
		Named consultant:	Jenny Boyd
Named Midwife:	Charlene Lawson		

Labour and Birth Details

Labour Onset	Spontaneous	Duration of Membrane Rupture	0 Hours 16 Mins
Fetal Problems in Labour	(Not Recorded)	Shoulder Dystocia	No
Type of Birth	Spontaneous Cephalic	Cord Vessels	3
Mode of Birth	Normal, spontaneous vertex vaginal birth, occipito-anterior		

Birth Details

Outcome	Livebirth	Venous Cord pH	(Not Recorded)
Sex	Female	Venous Base Excess	(Not Recorded)
Arterial Cord pH	(Not Recorded)	Birthweight	3.26 Kg
Arterial Base Excess	(Not Recorded)		

First Examination

Head Circumference: 33.0

Detailed Examination

Head Circumference: Not documented

Date of examination: 14 Jan 20 at 11:41

Hipá: Normal

Vitamin K

Given 0.1ml / 1 mg IM (13 Jan 20 at 23:00)

 Patient: Baby THOMSON
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Victoria Hospital Maternity

Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH, Tel: 01592 443355.



Blood Tests and Vaccinations Section

Vitamin K: 13 Jan 20 at 23:00

Blood Spot Screening Due: 18 Jan 20 22:01

No baby vaccination records were found

Vitamin K Doses

0.1ml / 1 mg IM given on 13 Jan 20 at 23:00

Hearing Screening

Hearing Screening: Yes
 Hearing Screening - Left Ear: Clear responses

Hearing Screening - Right Ear: Clear responses

Postnatal Care

Baby Management Plan: Hip US - both Graf I but movement on dynamic testing. For follow up at Baby Hip clinic. Appointment to be sent to parent.

Discharge Details

Discharged	16 Jan 20 at 18:11	Reason Not Discharged with Mother	Foster Care
Discharged By	Melissa Davidson	Discharge Address	36 Kirkcoun Park, Ballingry, lochgelly, Fife
Neonatal Unit Admission	Not admitted	Discharge Postcode	KY5 8PB
Reason for Neonatal Admission	(Not Recorded)	Telephone Number	(Not Recorded)
Destination	Foster parents	Mobile Number	(Not Recorded)
Baby Discharged with mother	No		

Feeding

First Feed

First Feed Type: Breast Only

First Feed Method: (Not Recorded)

Feeding at Discharge

Feeding Type on discharge: Breast Only
 Feeding Method: Breast

Feeding Problems: None
 Management Plan: (Not Recorded)

Patient: Baby THOMSON
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Requested by Hain, Nicola at 16/01/20 22:26
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05/01/20

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Victoria Hospital Maternity



Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH. Tel: 01592 643355.

Additional feeding notes

Additional Notes Feeding Update 14 Jan 20 at 04:30:
Breastfeeding for 1 hour.

Additional Notes Feeding Update 14 Jan 20 at 10:00: No
assistance needed, Baby attached well to the
L-Breast, Baby sucking/ appears to be
feeding well.

Additional Notes Feeding Update 14 Jan 20 at 12:20: No
assistance needed, Baby attached and
sucking/ feeding well.

Additional Notes Feeding Update 14 Jan 20 at 14:00: No
assistance needed, Fed well.

Additional Notes Feeding Update 14 Jan 20 at 15:45: No
assistance needed, Baby attached well to the
L-Breast, Baby sucking/ appears to be
feeding well.

Additional Notes Feeding Update 14 Jan 20 at 17:15: Feeding
well.

Additional Notes Feeding Update 14 Jan 20 at 20:30: Breast
feeding frequently

Additional Notes Feeding Update 14 Jan 20 at 22:00: Feeding
well right breast

Additional Notes Feeding Update 15 Jan 20 at 00:45:
Maternal request for formula

Baby been on breast frequently and mum
wishes formula feed at present to allow rest
but will put baby back to breast at next feed.

Meconium ++ changed
Some urates noted in nappy.

Additional Notes Feeding Update 15 Jan 20 at 08:20: Baby
very unsettled after cluster feeding all night,
mum has asked for a bottle.

Additional Notes Feeding Update 15 Jan 20 at 12:45: Mum
very upset +++, asked if staff could give
baby a bottle feed. Same done, baby had wet
and dirty nappy at this time.

Additional Notes 3rd Day Assessment 16 Jan 20 at 08:00:
Mum states baby fed for 10 minutes on each
side.

Additional Notes 3rd Day Assessment 16 Jan 20 at 09:00: 5
minutes feed

Additional Notes 3rd Day Assessment 16 Jan 20 at 13:00: 10
minutes each side

Additional Notes Transfer to Postnatal Community Care 16
Jan 20 at 18:14: Baby has been breast
feeding with formula top ups, home to
kinship care of Kays mum, Kay planning
express however planning to also give
formula if required.

Feeding plan

No feeding plan recorded

Patient: BabyTHOMSON
NHS Confidential: Personal Data about a patient

Requested by Hain, Nicola at 16/01/20 22:26
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06/01/20

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Victoria Hospital Maternity

Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH. Tel: 01592 443355.



Baby Assessment

Jaundice	No	Confirmed Abnormalities	(Not Recorded) (13 Jan 20 at 22:55)
Neonatal Admission	Not admitted	Suspected Abnormalities	None (14 Jan 20 at 11:41)
Baby Under Observation	Yes	Confirmed Abnormalities	(Not Recorded) (14 Jan 20 at 11:41)
Baby Under Observation Reason	Other: Maternal Substance Misuse	Additional Notes	Maternal history reviewed on BadgerNet high level of maternal substance misuse and SW involvement. Mum states to me last recreational drug use was in December.
Suspected Abnormalities	(Not Recorded) (13 Jan 20 at 22:55)		Finnegan's score minimal at this check. No obvious signs of withdrawal at this time. Recheck at 1600
			Baby pink, alert and well perfused throughout examination. eyes x 2 clean and clear mouth moist, clean and intact chest sounds are clear with no obvious murmurs audible at this time I+II+0 abdomen soft and non tender with no palpable masses. H/C on and secure hips appear stable with referral to physio due to ECV appears normal female infant with, NAD of genitalia noted at this time
			Establishing mixed feeds at this time and BO and PU. All findings shared with mum. No concerns at this time with baby - should be observed for Finnegan's and drug withdrawal. Await DPM with MDT (14 Jan 20 at 11:41)

Additional Baby Weights

Date of reweigh: 16 Jan 20 at 12:00 , New weight 3.48 Kg

Patient: Baby THOMSON
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Victoria Hospital Maternity



Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH. Tel: 01592 643355.

Baby Risk Assessment

Maternal Risks	Breech Presentation on or after 36/40	Current Abnormalities (Not Recorded)
Labour and Birth Risks (Not Recorded)		Sensitive Risks Mother Social services involvement
Post-birth Risks (Not Recorded)		Risk (Not Recorded)
Current Risks (Not Recorded)		Additional Notes (Not Recorded)

Medication at discharge

Medication at discharge (Not Recorded)

Latest Specialist Review

Recorded	15 Jan 20 at 10:58	Review	(Not Recorded)
Type of User	Other: APP		

Follow Up

Follow Up Care None

Additional Notes:

Baby taken in to kin ship care of Kays mum and CPO has been served. Baby has been under observation for Finnigans however scoring low and no concerns on discharge. Kays toxocology results have been negative and Margaret Lawson is happy that baby is unlikely to withdraw in light of this. Baby has been BF with formula top ups, Kay plans to express however Kay is happy for formula to be given if EBM not available. Community midwives contacted and informed of discharge address and community visit tomorrow requested. Kay is not to have unsupervised contact with baby and Kay has appointments arranged to visit baby at Brunton House tomorrow at 15:00 - 17:00 and again on monday. Panel meeting will be monday to review CPO awaiting time confirmation. Baby appears well on discharge.

Completed by

Completed by Melissa Davidson

Patient: BabyTHOMSON
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Message

GP: Bucky

Patient Name: Kay Thomson

DOB: 12/07/84

Address: 36 Kirkton Park

Date: 04.03.20

Time: 15.44

Message:

Kim Powell (Mental Health Nurse) has been reviewing her appointment for the upcoming weeks.

You seen the above patient on 03.03.20, she states was advised to book an appointment with Kim and appointed 06.04.20. Unfortunately the above patient is not appropriate for the service Kim offers. Kim's appointments is for assessment purposes and patient has already been diagnosed with a condition and seen by Psychiatry according to docman.

Appt will need to be cancelled ? if you want any alternative treatment for patient ? maybe letter to Psychiatry or r/v with GP.

Patient to be advised

Thanks lynsey

Action:

Actioned By:

Signature:

Date:

not recognised

Send letter advising

appt cancelled and to contact surgery

* Comment on record
Kim unable to see pt

due to her already

Letter sent ✓

been diagnosed with
MH condition.

Kim is for triage only.

Multiple documents 09/10/2015

Room 3

All Cils

TO: All Locum GP's attending Lochgelly Medical Practice

Further to the summary regarding the role of the mental health nurse provided previously, I would like to offer a gentle reminder of the following:

- I am a mental health triage nurse. I am not a CPN. The roles are very different.
- I will see patients for assessment and follow up if required. I am here to see patients on behalf of GP's. I am not here to see patients alongside GP's. If a patient is being referred to me for mental health assessment/input, then they don't require to be followed up by a GP for the same reason.
- My highest DNA numbers come from patients who have already received an intervention from the GP. I would ask that if a patient is referred to me, please refrain from commencing treatment.
- If you have any questions, please feel free to give me a shout. I am in Lochgelly medical practice every Monday.

Thanks for your support.

Kim Powell

Mental Health Triage Nurse

Multiple Documents 09/14/2019

MENTAL HEALTH TRIAGE NURSE IN PRIMARY CARE

Summary of Role

The primary role and responsibility of the mental health nurse is assessment. Should you have a concern about a patient's mental health, you can recommend that they make an appointment with the mental health nurse. Your recommendation rather than action promotes patient independence. The patient can attend the reception desk and arrange an appointment at a time that suits them. Please note, patients can make an appointment with the mental health nurse without seeing another health care professional first and there are posters in the reception area advertising this new service.

Appointments

Initial assessment appointment time is 40 minutes.

Review appointment time as standard is 20 minutes. However, if this needs to be longer the mental health nurse will discuss this directly with the patient and advise them to request a review appointment of 40 minutes.

PLEASE NOTE: In surgeries where GPs operate a telephone triage list, the mental health nurse is not responsible for reviewing or responding to the patients on the triage list. If a GP contacts a patient though and believes the problem is regarding the patient's mental health, the patient can be assigned to an on the day triage appointment.

Treatment

If you think the patient would benefit from medication, it would be helpful if you document this in the patient records as a recommendation rather than commencing the treatment before signposting the patient to the mental health nurse. This will allow for the mental health nurse to carry out a thorough baseline assessment that is not impacted by any new treatment. It will also hopefully reduce the number of Do Not Attend appointments.

It is becoming increasingly apparent that when a patient has been seen by a GP and commenced on treatment before they are signposted and allocated an appointment with the mental health nurse, a significant number of patients then DO NOT ATTEND their appointment with the mental health nurse because they have already been offered treatment and have a review appointment with the GP arranged.

Any medication commenced by the mental health nurse will subsequently be reviewed by the mental health nurse so there is not a requirement to issue standard review appointments with the GP. If there is a medical issue that requires GP input, the mental health nurse will signpost the patient back to the GP. The mental health nurse will occasionally approach GP colleagues to discuss treatment options and your advice and input is greatly valued.

WHAT THIS SERVICE DOES NOT PROVIDE

- The mental health nurse does not offer a counselling service.
- The mental health nurse does not offer an informal listening service.
- The mental health nurse can offer advice and relevant signposting to patients with substance misuse issues however the mental health nurse cannot fully assess these patients.
- The mental health nurse does not issue FIT notes for patients however we may recommend a fit note for a patient if it is appropriate.

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LOCHGELLY MEDICAL PRACTICE

NHS FIFE

HEALTH CENTRE
DAVID STREET
LOCHGELLY
FIFE
KY5 9QZ

Advanced Nurse Practitioner: Corinne Cairns MSc.B.N.

Tel: 01592 780277

CHANGE OF PERSONAL DETAILS

Please complete only the sections which are changing

Name	KAY THOMSON
New Name (if applicable)	
Date of Birth	
Previous Address (if applicable)	36 KIRKTON PARK BALLINGRY
New Address (if applicable)	14 CRAIGIE GARDENS BALLINGRY KY5 8NG
Telephone Number – landline and mobile	07591-712245
Email Address	

A separate form should be used for each person.

Children or adults aged 16 year or over will be required to complete and sign their own form.

Parents / Guardians of children under the age of 16 years may sign on behalf of their children.

Signed: _____

Print Name: _____

Relationship to
Patient (if not patient) _____

Date: 13/7/20

Recorded
13/7/20

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LOCHGELLY MEDICAL PRACTICE

NHS FIFE

HEALTH CENTRE
DAVID STREET
LOCHGELLY
FIFE
KY5 9QZ

Advanced Nurse Practitioner: Corinne Cairns

Tel: 01592 780277

11/03/2020

Our Ref: --/LF

Miss Kay Thomson
36 Kirkcoun Park
Ballingry
KY5 8PB

Dear Miss Thomson

We write in respect of your appointment with Kim Powell, Mental Health Nurse on Monday 6th April 2020. Unfortunately we have had to cancel your appointment, please can you contact the surgery regarding this.

We have been unable to contact you by telephone, we would appreciate if you could provide us with an up to date number.

Yours sincerely

Lochgelly Medical Practice
NHS FIFE

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Pages:

Page 1 of 2
Requested by Farmer, Elizabeth at 06/06/19 11:32
NHS Confidential: Personal Data about a patient
Patient: KAY THOMSON (A376UC)

Risk

Date/Time Completed: 06 Jun 19 at 11:21
Period Completed: Booking
Medical Risk Factors: None
Mental Health Risk Factors: Previous depression, Selfharm, disorder
Gynaecological Risk Factors: None
Previous Obstetric Risk Factors: None
Previous Baby Risk Factors: None
Additional Notes: Antenatal PBR INTERMEDIATE (Not recorded)
Social Risk Factors: None
Overall Risk Level: High
Family History Risk Factors: None
Sensitive Risk Factors: Substance Abuse
Current Pregnancy Risk Factors: Other: has taken street diazepam in this pregnancy unsure of amounts
Factors: Other: has taken street diazepam in this pregnancy unsure of amounts

Obstetric Referral - 06 Jun 19 at 11:30

THOMSON, KAY (CHI: 1207840483 | PMS Number: 1207840483)
12 Jul 84 (Current Age: 34) | 36 KIRKTON PARK, BALLINGRY, FIFE, KY5 8PB | 07743774314 (mobile)
G3 P2+0 | LMP: 15 Mar 19 | Booked: 06 Jun 19 | EDD (Dates): 20 Dec 19 | Current Gest: 11+6 | Babies on scan: 2 | Booking
BMI: 22.14 | Current BMI: 22.14 | Blood Group: ?

Urgent referral required Yes
Appointments required USS-NT (Not recorded)
Preferred or previous consultant GP name CATTANACH, SUSAN
Named Midwife Elizabeth Farmer
Scans accepted (Not recorded)
Antenatal care type Consultant Obstetrician Only
Intended location of birth Victoria Hospital Maternity (Kirkcaldy)
Named Midwife's telephone 01592643355 ext 22075
Hospital CMW attached to Victoria Hospital Maternity (Kirkcaldy)



Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH. Tel: 01592 643355.

Victoria Hospital Maternity

Obstetric Referral 1	
1st preference tel.	07743774314 (mobile)
2nd preference tel.	
3rd preference tel.	
Date	06 Jun 19 at 11:30
Gestation at Referral	Gestation 11 weeks, 6 days
Referred by	Elizabeth Farmer
Role of Referrer	Midwife
Contact Number of Referrer	01592643355 ext 22075
Referral Accepted by Patient	Yes
Primary language:	English
Review required by	(Not recorded)
Diagnosis	(Not recorded)
Reason for Referral	High
Current Risk	06 Jun 19 at 11:21
Date Risk Recorded	(Not recorded)
Lead Professional	No
Advocate needed	Yes
Has patient previously visited this hospital	IA, Scottish
Ethnicity	None
Special Needs	(Not recorded)
Referral needed to	(Not recorded)
Notes	

Kay states she had been taking street diazepam and is unsure of the amounts she took-has not taken since positive pregnancy test approx 4 weeks ago

Summary of previous medical/obstetric history



Victoria Hospital, Hayfield Road, Kirkcaldy, KY2 5AH. Tel: 01592 643355.

Victoria Hospital maternity

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ASSIGNMENT FORM**PATIENT ASSIGNMENT TO A NHS GENERAL MEDICAL PRACTICE**

- Please use **BLOCK CAPITALS** to complete the form and tick all relevant boxes.
- Failure to complete this form fully may delay locating any medical records promptly.
- All assignments are issued to practices on a strictly rotational basis.
- Patients are expected to remain with the practice for a **minimum of three months**.
- Eligibility to use the NHS services depends mainly on residence in the UK, and on other qualifying provisions set out in the Regulations.
- The patient, or their representative, **must** sign the declaration overleaf.

NHS
National
Services
Scotland

08 SEP 2020

PERSONAL DETAILS (ALL FIELDS MARKED * ARE MANDATORY AND MUST BE COMPLETED AS FULLY AS POSSIBLE)

WILL YOU BE IN THE AREA FOR MORE THAN THREE MONTHS? *

YES ☒ NO ☐

IS THIS YOUR FIRST REGISTRATION WITH A GP PRACTICE IN THE UK? *

YES ☐ NO ☒

SURNAME *

THOMSON

TITLE (Not held on CHI)

MISS

MALE *

☐

FEMALE *

☒

FORENAME *

KIM

MIDDLE NAME *

PREVIOUS SURNAME *

DATE OF BIRTH *

012 M 07 Y 1984

CURRENT ADDRESS *

14 CRAIGIE GARDENS BALLINGRY
POSTCODE KY5 8NG

TOWN OF BIRTH *

COUNTRY OF BIRTH *

KIRKCALDY FIFE

MOTHER'S MAIDEN NAME *

O'HARE

CONTACT TELEPHONE NUMBER (Not held on CHI)

07980

PREVIOUS ADDRESS IN THE UK *

36 KIRKTOON PARK BALLINGRY
POSTCODE KY5 8PS

NAME AND ADDRESS OF PREVIOUS REGISTERED GP PRACTICE IN THE UK *

LOCHGELLY MEDICAL PRACTICE
POSTCODE

COMMUNITY HEALTH INDEX NUMBER

1207840483

NATIONAL HEALTH SERVICE NUMBER

426784056

Page 527 of 661

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LOCHGELLY MEDICAL PRACTICE

NHS FIFE

HEALTH CENTRE
DAVID STREET
LOCHGELLY
FIFE
KY5 9QZ

Advanced Nurse Practitioner: Corinne Cairns

Tel: 01592 780277

Phone (01592) 780277
Fax (01592) 784044

Our Ref: --/HB

13/01/2021

Miss Kay Thomson
14 Craigie Gardens
Ballingry
KY5 8NG

Dear Miss Thomson

We refer to your recent attendance to A&E and would be grateful if you could have your blood test repeated.

Please contact the Clinic on telephone number 780200 to arrange your blood test appointment.

Yours sincerely

Lochgelly Medical Practice
NHS FIFE

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NHS Confidential: Personal data about a patient

Acute Services Division



V Emergency Department

KJ Thompson
21440/1
Dr K Thompson
The Health Centre
David Street
Lochgelly fife
Lochgelly
KY5 9QZ

Victoria Hospital
Hayfield Road
Kirkcaldy
KY2 5AH

Dear Doctor

Miss Kay Thomson
14 Craigie Gardens
Ballingry
Lochgelly
KY5 8NG

CHI: 1207840483
ED Consultant: Dr Nilesh Champaneria

The above patient attended the V Emergency Department on 12/01/2021 at 01:31. I outline below some information regarding this attendance.

Present Complaint: P.R. BLEED

Diagnosis:			
Description	Body Site	Laterality	Comments
ED diagnosis - nothing abnormal detected			

Investigation(s)/Treatment(s):

Medication(s):

Additional Notes (for GP):

Kay Thomson presented to VHK A&E with fresh PR bleed following recreational foreign body insertion. The bleeding had ceased prior to assessment, with no further episodes in the department. She remained clinically well with a soft and non-tender abdomen and no adverse features. Blood tests were unremarkable, with a mild anaemia improved from previous levels (Hb 109). She is fit for discharge with worsening advice, and has been asked to make an appointment for repeat FBCs with her GP to ensure improvement in her anaemia.

Kind regards,

Created on 12/01/2021 05:19 by Dr Alexander Von Maydell Clinical Fellow Version 1

Page 1 of 2

NHS Confidential: Personal data about a patient

Acute Services Division



Dr Alexander von Maydell
A&E Clinical Fellow

Senior Review:
Senior Review Comments:

Yours sincerely
Dr Alexander Von Maydell Clinical Fellow

Created on 12/01/2021 05:19 by Dr Alexander Von Maydell Clinical
Fellow

Version 1

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Patient Group Direction for the provision of desogestrel progestogen-only pill (POP) for the purposes of Bridging Contraception to patients aged over 18 years and under 55 years from Community Pharmacy

Notification of supply from community pharmacy

CONFIDENTIAL WHEN COMPLETED

Data protection confidentiality note: this message is intended only for the use of the individual or entity to whom it is addressed and may contain information that is privileged, confidential and exempt from disclosure under law. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited.

GP name	FILSELL	Pharmacy Stamp
GP practice address	BANKMAY	
The following patient has attended this pharmacy for assessment and potential supply of desogestrel POP:		 Pharmacist name GPhC number Date
Patient name	Miss Kay Thomson	
Date of birth/CHI	14 Craigie Gardens KY5 8NG Date of Birth: 12/07/1984	
Patient address		
Postcode	DEARS 4/5 Bankmay Square, Bellingry, KY5 8NR Tel: 01592 885555 Opening Times: Mon - Fri 9am - 6pm, Sat 9am - 1pm www.dearspharmacy.co.uk	

Following assessment (Tick as appropriate)

Your patient has been given a 3 month supply of desogestrel (initial supply)	☒
Your patient has been given a second 3 month supply of desogestrel	☐
Your patient has been given appropriate guidance on use of this medication e.g. side effects, missed pill information	☐
Your patient is unsuitable for treatment via PGD for the following reasons and has been referred:	☐

Your patient has been advised to contact the practice for subsequent supplies of contraception.

You may wish to include this information in your patient records.

Patient consent: I can confirm that the information is a true reflection of my individual circumstances and I give my consent to allow a pharmacist working under the terms of Public Health Service to provide the most appropriate advice and/or treatment for me. I also give my permission to allow the pharmacist to pass, to my own GP, details of this consultation and any advice given or treatment provided. I have been advised that some of the information may be used to assess the uptake of the service but this will be totally anonymous and not be attributable to me.

Patient signature	Date

This form should now be sent to the patient's GP and a copy retained in the pharmacy

Community Pharmacy Public Health Service
Desogestrel PGD 326 v1.0 November 2021

(Due for review November 2023)

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PCES - Fife OOH Call Incident Report

Call number:	77380	Receive Date:	3-Jan-2023 16:23
Patient's Name:	Kay Thomson		
Date of birth:	12-Jul-1984 (38 years)	Gender:	F
Address:	14 Craigie Gardens Ballingry Lochgelly KY5 8NG	Current Address:	122 Navitie Park Ballingry Lochgelly KY5 8NJ
Return Contact No:			
Tel No:	07751 957437		07751 957437
Mobile No:			
Priority:	within 4 hours	Call Origin:	NHS24
Received:	3-Jan-2023 16:23	Calltype:	MIU Telephone / Remote Consultation
Advised:	16:37	Arrived PCC:	
Cons start:		Cons End:	
Consulting Doctor:		Own doctor:	Susan Filsell

CHI Number:
1207840483

Reported Condition:
DISCHARGE FROM WOUND 2 DAYS

Followups:
MIU

NHSD details:
 Disposition - **Accident & Emergency / MIU within 4 Hours**

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NHS Confidential: Personal data about a patient

Acute Services Division



Remote Consultation MIU QMH

KJ Thompson
21440/1
Dr K Thompson
The Health Centre
David Street
Lochgelly fife
Lochgelly
KY5 9QZ

Queen Margaret Hospital
Whitefeld Road
Dunfermline
KY12 0SU

Dear Doctor

Miss Kay Thomson
14 Craigie Gardens
Ballingry
Lochgelly
KY5 8NG

CHI: 1207840483
ED Consultant:Dr Daniel Day

The above patient attended the Remote Consultation MIU QMH on 03/01/2023 at 17:15. I outline below some information regarding this attendance.

Present Complaint: 17.15

Diagnosis:			
Description	Body Site	Laterality	Comments
ED injury - Wound - Laceration			

Investigation(s)/Treatment(s):

Medication(s):

Additional Notes (for GP):
FNH triage

DSH wound 2 days ago
she has been self treating but concerned it looks infected
would prefer to attend the VHK
advised of waiting time
she has own transpirt and could attend around 2100 hrs

feels well in herself

Created on 03/01/2023 20:04 by James Bonellie ENP

Version 1

Page 1 of 2

NHS Confidential: Personal data about a patient

Acute Services Division



vhk

Senior Review:

Senior Review Comments:

Yours sincerely

James Bonellie ENP

Created on 03/01/2023 20:04 by James Bonellie ENP

Version 1

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75998 000731 0009 E 31600 R2

Dr Malham
BENARTY MEDICAL PRACTICE
54-58
LOCHLEVEN ROAD
LOCHORE
LOCHGELLY
KY5 8DA

31600/9

46300

Our phone number is: 0121 335 0702

If you have a textphone,
you can call on: 18001 0121 335 0702

If you get in touch with us, tell us this
reference number: JJ628431D

Date: 20th March 2023

About your patient**Address**

Full Name Miss Kay Thomson

122, Navitie Park, Ballingry, Lochgelly, KY5 8NJ

NINo JJ628431D

Date of birth 12th July 1984

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,

Miss Esther Mortley

ON BEHALF OF THE DEPARTMENT FOR WORK AND PENSIONS
RESTRICTED - MEDICAL

Version 10/17

P30347192/000731/1/2

UC113

Client Name:

Miss Kay Thomson

Client NINo:
JJ628431D

Client Date of Birth:
12.07.1984

Your reply

Please answer the following questions from the information which is currently available to you.

If you need more space for any of your answers, please
continue at Part 7.

1 When did your patient last see a GP?

/ /

2 Current conditions affecting ability to work:

Please give us details of those conditions which may have significant effect on the person's capacity to work. Include:

- Relevant symptoms and signs, including side effects of medication, with dates. For mental health conditions, please provide brief mental state examination findings, if available.
- Past, present and planned investigations and management, including medication, where relevant.

If you are sending a computerised printout of current medication you do not need to list this here.

Please complete **both sides** of this form,
and return the completed form in the supplied envelope - with the above address showing in the window

[illegible]

30367792/000731/2/2

ON BEHALF OF THE DEPARTMENT FOR WORK AND PENSIONS
RESTRICTED - MEDICAL

Version 10/17

NHS Confidential: Personal data about a patient

UC113	About your patient - continued		NINo: JJ628431D																																							
	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 <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 35%;">Walking or moving</td> <td style="width: 5%; text-align: center;">☐</td> <td style="width: 60%;"></td> </tr> <tr> <td>Transferring between seats</td> <td style="text-align: center;">☐</td> <td></td> </tr> <tr> <td>Reaching</td> <td style="text-align: center;">☐</td> <td></td> </tr> <tr> <td>Picking up objects</td> <td style="text-align: center;">☐</td> <td></td> </tr> <tr> <td>Manual dexterity</td> <td style="text-align: center;">☐</td> <td></td> </tr> <tr> <td>Communicating with others</td> <td style="text-align: center;">☐</td> <td></td> </tr> <tr> <td>Continence</td> <td style="text-align: center;">☐</td> <td></td> </tr> <tr> <td>Learning simple tasks</td> <td style="text-align: center;">☐</td> <td></td> </tr> <tr> <td>Awareness of hazards</td> <td style="text-align: center;">☐</td> <td></td> </tr> <tr> <td>Initiating and completing personal actions</td> <td style="text-align: center;">☐</td> <td></td> </tr> <tr> <td>Coping with changes or social engagement</td> <td style="text-align: center;">☐</td> <td></td> </tr> <tr> <td>Appropriateness of behaviour</td> <td style="text-align: center;">☐</td> <td></td> </tr> <tr> <td>Eating or drinking</td> <td style="text-align: center;">☐</td> <td></td> </tr> </table>				Walking or moving	☐		Transferring between seats	☐		Reaching	☐		Picking up objects	☐		Manual dexterity	☐		Communicating with others	☐		Continence	☐		Learning simple tasks	☐		Awareness of hazards	☐		Initiating and completing personal actions	☐		Coping with changes or social engagement	☐		Appropriateness of behaviour	☐		Eating or drinking	☐	
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Transferring between seats	☐																																									
Reaching	☐																																									
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Coping with changes or social engagement	☐																																									
Appropriateness of behaviour	☐																																									
Eating or drinking	☐																																									
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.																																										
The information you have given us may be copied to the patient, their legal representative or the Tribunal Service.																																										
Your Signature <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Signature</td> <td style="width: 30%; border: 1px solid black; height: 20px;"></td> <td rowspan="3" style="width: 40%; border: 1px solid black; padding: 5px;"> Practice stamp Benarty Medical Practice 54/56 Lochleven Road Lochore KY5 8DA 01592 860463 </td> </tr> <tr> <td>Name IN CAPITALS</td> <td style="border: 1px solid black; padding: 2px;">Dr <i>McIlincrim</i></td> </tr> <tr> <td>Date</td> <td style="border: 1px solid black; padding: 2px;"><i>27 10 23</i></td> </tr> </table>				Signature		Practice stamp Benarty Medical Practice 54/56 Lochleven Road Lochore KY5 8DA 01592 860463	Name IN CAPITALS	Dr <i>McIlincrim</i>	Date	<i>27 10 23</i>																																
Signature		Practice stamp Benarty Medical Practice 54/56 Lochleven Road Lochore KY5 8DA 01592 860463																																								
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Date	<i>27 10 23</i>																																									
ON BEHALF OF THE DEPARTMENT FOR WORK AND PENSIONS RESTRICTED - MEDICAL																																										
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Victoria Hospital
IMMEDIATE DISCHARGE DOCUMENT

Version: 1

This letter was printed out with pharmacy hours, the prescription has not been verified by pharmacy

Surname	Thomson	Address	122 Navitie Park
Forename	Kay		Ballingry
CHI No.	1207840483		Lochgelly
Date of birth	12/07/1984	Postcode	KY5 8NJ

GP Copy

Page 1 of 2

Admission Date	28 Jul 2023	GP	Dr.T Malham
Admission Type	Emergency Non-Injury (e.g. Stroke, MI, Ruptured Appendix)	GP Address	Benarty Medical Practice 54-58 Lochleven Road Lochore Fife KY5 8DA
Reason for Admission / Transfer	Acute Admission for treatment - Where the patient is expected to be treated for a diagnosed condition not otherwise specified	GP Practice Code	21421
Discharge Date	29-Jul-23	Patient's Weight	0 kg
Discharge Ward	V Medical High Dependency Unit	Compliance Aid	No
Discharge To	Home		
Discharging Consultant	Dr Lauren Davies		
Specialty	General Medicine		
Community Pharmacy			

A further transfer/discharge communication will follow this document

Presenting Complaint

Self harm

Principal Diagnosis

Alcohol intoxication and self-harm

Clinical Summary

Ms Thomson was admitted to VHK after an episode of alcohol intoxication during which she also took street vallium and injected household bleach IV with the intention to end her life. She was observed in MHDU and managed with IV fluids, pabrinex and chlordiazepoxide and recovered well. She has been reviewed by the UCAT team who will send a separate letter and will refer the patient to ADAPT for addictions. During admission, an HCG was checked and was positive - this was discussed with gynaecology who advised that this was usual following a recent TOP.

No medication prescribed**Pharmacist's Comments****Allergies** None known**Other Diagnoses****Principal Operation****Date****Consultant****Other Operations****Clinical Progress and Results Awaited / Investigations Pending****Patient Information Transfer/Discharge Summary not given to patient and/or carer or relative****Explanation Given to patient****Prescriber's name** Elinor Johnson**Prescriber Tel No.** **Prescriber's Signature****Prescriber's grade** CT

20845

Please remember to bring your own medications into hospital if you are admitted

Document Created 29/07/2023 18:58:40

Page 1 of 2

NHS Confidential: Personal data about a patient

**Victoria Hospital**
IMMEDIATE DISCHARGE DOCUMENT

Version: 1

This letter was printed out with pharmacy hours, the prescription has not been verified by pharmacy

Surname	Thomson	Address	122 Navitie Park
Forename	Kay		Ballingry
CHI No.	1207840483		Lochgelly
Date of birth	12/07/1984	Postcode	KY5 8NJ

GP Copy

Page 2 of 2

Follow Up Arrangements

ADAPT for addictions

Medication not currently prescribed by day hospital**Fitness note not issued****Duration of Fitness Note**

Prescriber's name	Elinor Johnson	Prescriber Tel No.	Prescriber's Signature
Prescriber's grade	CT	20845	

Please remember to bring your own medications into hospital if you are admitted

Document Created 29/07/2023 18:58:40

Page 2 of 2

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Acute Services Division



V Emergency Department

T Malham
21421/1
Benarty Medical Practice
54-58 Lochleven Road
Lochore
Fife
Lochgelly
KY5 8DA

Victoria Hospital
Hayfield Road
Kirkcaldy
KY2 5AH

Dear Doctor

Miss Kay Thomson
122 NAVITIE PARK
BALLINGRY
Lochgelly
KY5 8NJ

CHI: 1207840483
ED Consultant: Catriona Fullarton

The above patient attended the V Emergency Department on 28/07/2023 at 04:44. I outline below some information regarding this attendance.

Present Complaint: OD

Diagnosis:			
Description	Body Site	Laterality	Comments
ED diagnosis - Psychiatry/Toxicology - Poisoning (not plant / venom / gas / vapour) enter in free text			

Investigation(s)/Treatment(s):

Medication(s):

Additional Notes (for GP):

Your patient has been admitted to hospital for further investigations/treatment. A final discharge letter will be issued from the admitting speciality team.

Senior Review:

Created on 28/07/2023 08:42 by Sharon Bell SN

Version 1

Page 1 of 2

NHS Confidential: Personal data about a patient

Acute Services Division



Senior Review Comments:

Yours sincerely
Sharon Bell SN

Created on 28/07/2023 08:42 by Sharon Bell SN

Version 1

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NHS Confidential: Personal data about a patient

**Fife UCAT
Mental Health Assessment Form****Fife Health
& Social Care
Partnership**
Supporting the people of Fife together

Patient Name THOMSON, Kay
CHI Number 1207840483
DOB 12/07/1984

PATIENTS DETAILS

Surname THOMSON

First Name KAY

CHI 1207840483 D.O.B 12/07/1984

Address
122 Navitie Park
Ballingry
Lochgelly
KY5 8NJ

Type of Assessment: Telephone ☐ Face to Face ☒

Date of Assessment: 29/07/2023 Referral Time of Assessment: 17:49

Sector: West Fife

Sector Consultant: None assigned

Presenting Complaint:
Admitted after injecting household bleach

Current Medication:
Quetiapine
Rigevidon
Propranolol

NHS Confidential: Personal data about a patient

Patient Name	THOMSON, Kay
CHI Number	1207840483
DOB	12/07/1984

Background Information:

BPD
 ?PTSD
 Previous abusive relationship
 Partner of 1 year who is supportive
 Supportive parents
 No current CMHT or social work input
 No current forensic issues

Assessment:

Seen with Charge Nurse Van Beck

Trying to self-detox

- has investigated private options but very expensive

Trying to come off street valium and alcohol
 Admitted to hospital yesterday morning
 Drinking 4-5 bottles of wine for past week
 Hasn't been taking quetiapine
 Several hundred street valium in recent weeks

Recent termination of pregnancy (1.5 weeks ago)

- partner didn't want termination to happen but due to poor communication between them she thought he wanted her to have one so she did
- regretted it soon after, struggled with regret

Has now discussed termination and circumstances with partner
 Low mood since termination which has caused worsening of substance issues
 - children aged 20, 13, 3 are away at the moment (youngest 2 with grandma at festival, oldest out a lot)
 - feeling lonely (partner doesn't live with her)
 - isolation has contributed

Aware when drinking and taking valium not thinking clearly

- injected bleach with needle from weight loss injection syringe
- painful - this caused her to snap out of headspace and phone ambulance
- not sure why she injected bleach
- adamant she would not have done this if she had been sober

Has struggled with valium withdrawal in the past
 - not had seizures before, mainly nauseous and fatigued
 Advised on importance of gradual withdrawal

Feels mortified about events

Denies current suicidal ideation
 Keen to engage with addictions and stop drinking
 - doesn't like self when she drinks
 Relates recent decline to recent traumatic event

NHS Confidential: Personal data about a patient

Patient Name THOMSON, Kay
CHI Number 1207840483
DOB 12/07/1984

Recommendations:

Impulsive overdose

- compounded by alcohol excess and street valium intoxication, on background of period of worsening mood and isolation since termination

Regretful

Motivated to engage with addiction services

Refer to DAPL for addictions input

Patient to arrange appointment with GP practice mental health nurse

Given advice re reducing alcohol and benzo use to counteract dangers of withdrawal, specifically warned re seizures

Patient assured us partner will be present at home to support her

Advised can contact NHS 24 in mental health crisis

Name Elisabeth Upton

Designation Doctor

Date 29/07/2023

Signed



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**Fife UCAT
Referral And Outcome Form****Fife Health
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Patient Name: THOMSON, Kay
CHI Number: 1207840483
DOB: 12/07/1984

NHS Fife Community Service, Mental Health Service
Unscheduled Care Assessment Team, Whyteman's Brae Hospital
Tel: 01592 643355 Ext 23999

DATE: 29/07/2023

Referral Source: MH DU

Telephone Contact:

Referral Date & Time: 29/07/2023 10:12:00

PATIENTS DETAILS

Surname: THOMSON
First Name: KAY
CHI: 1207840483
D.O.B: 12/07/1984

Address:
122 Navitie Park
Ballingry
Lochgelly
KY5 8NJ

GP Practice:
Benarty Medical Practice
54-58 Lochleven Road
Lochore
Fife
KY5 8DA

Reason for Referral & Significant History:-

NHS Confidential: Personal data about a patient

Patient Name: THOMSON, Kay
 CHI Number: 1207840483
 DOB: 12/07/1984

Referred by MHDU as now medically fit, had injected bleach into her arm alongside taking alcohol.
 Now medically fit for assessment.

Completed by:

Outcome of Assessment:

Seen today with Dr Upton.

I have met Kay before and know her background History.

She has recently had a number of stressors and has been struggling with increased alcohol (5 Bottles of Wine) and Illicit Street Valium misuse (150+ tablets in the last week). Whilst intoxicated yesterday She injected Bleach and states she instantly regretted this, calling an ambulance herself.

Kay is not actively suicidal and regretted her actions.

She feels She requires help with substance misuse.

I have contacted ADAPT today and passed over her details with Kay's permission. Kay is keen to engage again with DAPL and be referred to Addiction Services.

I have made Kay and her partner aware that She cannot suddenly stop drinking as this could potentially be fatal due to increased risk of Bzo/alcohol withdrawals.

Discharged home with her partner.

On completion, this form should be emailed to:

1) GP

2) Then filed in case notes; please note that a typed letter will follow Yes ☒ No ☐

Name: Stacey Vanbeck

Designation: Senior Addictions Nurse

Date: 29/07/2023

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Lynebank Hospital
Halbeath Road
Dunfermline
Fife
KY11 4UW

NHS Fife Community Services
NHS Fife Addiction Services
Tel: 01592 716446
<http://www.nhsfife.scot.nhs.uk>

**Fife Health
& Social Care
Partnership**



Dr T Malham
Benarty Medical Practice
54-58 Lochleven Road
Lochore
Fife
KY5 8DA

GP UPDATE LETTER



CHI: 1207840483

Letter ID: 5244716

Dear Dr Malham

Clinic Date: 22/09/2023

Date: 10/10/2023

Kay Thomson, 122 Navitie Park, Ballingry, Lochgelly, Fife, KY5 8NJ

Date of Birth: 12/07/1984

Reason for appointment

1. Discuss plan to achieve abstinence from alcohol and illicit benzodiazepines

Impression

1. **Alcohol dependence syndrome**
2. **Benzodiazepine dependence syndrome**

Kay would benefit from a detox and a likely diazepam prescription due to clear harmful use and clear evidence of severe withdrawal symptoms. Kay would need an inpatient detox in Kindhaven due to benzodiazepine dependence and young children in her home environment. On top of this a social work cause for concern is indicated as she has a 3 year old child, presented intoxicated to her nursing appointment and is using illicit substances.

Plan

1. Would benefit from detox – inpatient Kindhaven required
2. Needs SADQ and AUDIT and prep work with named nurse
3. Likely candidate for diazepam prescription – needs work with named nurse with drug and alcohol diary.
4. Continue engaging with DAPL
5. Referral for FASS
6. Named nurse review next week
7. Social work cause for concern to be completed

The above plan and impression was formulated and discussed with Senior Dr Dagar.

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NHS Confidential: Personal data about a patient**Consultation**

Kay came to Lynebank Campsie Addictions clinic on the 22nd September 2023. Kay reports that she is currently consuming 55cl of vodka per day and that she has been drinking every single day since she was a teenager, but the amount that she is drinking has changed. Today she has had a couple of cans of mojito that was pre mixed this morning. She states that when she was first let out of hospital after a back injury she was drinking 4-5 bottles of wine per day but she has now cut down herself in the community. On top of her alcohol consumption she is taking street valium (blue roche tablets), around 4-6 per day. She said she has been taking these tablets for the last 3-4 weeks but has been taking benzodiazepine for quite a long period of time.

Kay states that she noticed alcohol was an issue when she was in her teens, people would say she wouldn't stop once she started drinking. She would often be called a problem drinker and often drink - for days at a time without stopping. Kay stated she started taking street valium 7-8 years ago after a friend gave them to her to help her sleep better. She states she liked the way they feel and from this moment on she took them.

Kay states she has significant withdrawal symptoms when she tries to withdraw from diazepam. She has tried to come off them in the past and states it has taken her up to a month before feeling normal. She states that when she tries to come off diazepam she feels paranoid, she does not sleep, she has tremors, she would not answer the door if it was to ring and she hears things. She reports she gets auditory hallucinations where she hears the words "I can't get no sleep" in her mother's voice repeatedly as she lays awake. She also reports that she has thought the door bell has gone multiple times when it hadn't.

Kay states that she is motivated to stop drinking and also stop taking any illicit benzodiazepines. Kay was apologetic and acknowledged that she was abusive and angry in her prior appointment that she had with her addictions nurse.

Other than her illicit benzodiazepine Kay reported no other illicit drug use recently. Her urine was only positive for benzodiazepine.

Kay states that she was previously prescribed Quetiapine by her GP but did not like how they made her feel so she has not been taking them.

Kay is known to have diagnosis of emotional unstable personality disorder.

Social History

Kay states that her mother, father, brother and sisters are very supportive of her. She states her mum comes over from Edinburgh and supports her and she has a good relationship with her family. Kay states that she has 3 children, 2 daughters and a son. Her daughters are 20 and 3 years of age and both live with her. Her 13 year old son lives with his father but she has contact with him. Kay states she is currently receiving universal credit and managing her finances well with this. Kay states her accommodation is in a council house in Ballingry and reported no issues. Kay stated she had a previous social work input due to her drinking and valium use while she was pregnant. She states she went through 12 weeks of handing in samples and her daughter was taken off her at birth but then she was given back to her at about 10 weeks old.

Kay states she had a great childhood until about 13 years old when she became a "rebel without a cause". Kay stated that she went to St Columbus high school and was expelled for fighting so went to Lochgelly high school. She states she skived school most of the time and was put into care due to her behaviour. Kay has worked in Asda in the past but other than this has not been in employment for a while. In terms of trauma in Kay's life she states that lots of traumatic things have happened to her but

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she didn't want to talk about them at the time. She states that she has got a referral to DAPL and she will consider talking about these things with them.

Family History of Addictions

Kay reports no family history of addictions.

Forensic History

Kay states she has been convicted of assault for spitting on someone and drinking driving.

Past Medical History

Kay states she is fit and well and does not have any notable medical conditions.

Mental State Examination

Kay appeared well kempt and appropriately dressed at the appointment. She did not appear intoxicated and her speech was entirely normal. Kay stated that her mood was up and down and she says this is because of her emotionally unstable personality disorder. Objectively she presented euthymic at the consultation. She was slightly anxious at times, fiddling and itching herself. Kay described her sleep as poor. Kay displayed no evidence of a formal thought disorder and no evidence of perceptual disturbance was evident at the consultation. Cognitively she was not formally assessed but appeared orientated to time, place and person. Kay states she has no ongoing suicidal ideations which she has previously been in hospital for jumping out of a window. She states this was not with suicidal intent as she does not really know what happened at the time and said she panicked and jumped out the window. Kay states she has self harmed periodically throughout her life and states this is something she does once a year.

I discussed relapse prevention for future reference with Kay when she has an alcohol detox. Ultimately Kay is a candidate for Disulfiram, Acamprosate and Naltrexone. It would be down to patient preference at the time for what she would like. However Kay stated that she thinks Disulfiram would be the best option for her to avoid episodes of impulsive drinking.

Discussion about driving and social work

Towards the end of the consultation I discussed with Kay that she cannot drive and needs to inform the DVLA that she is seeking treatment from the addictions team. Kay was accepting of this and said she would not drive right now anyway despite having a licence and she agreed that she would contact the DVLA.

I also discussed with Kay that because of her recent alcohol use, her taking illicit benzodiazepines, recent admission to hospital due to overdose and ingesting bleach on top of attending appointments abusive and intoxicated that we would need to put a case for concern with social work so that we can make sure we are looking after both her from an addictions stand point and making sure her family are safe.

At this point in the consultation Kay became upset and stood up saying she would never come back to the addictions clinic and that she would go cold turkey on her valium. I advised that this is not a good idea due to withdrawal and seizure risk and working with us is the best thing to ensure safety and reduce our concerns because we can see she is stable that way. Despite my best efforts Kay chose to leave the appointment at this point.

Yours sincerely

Dr Kieran Owens

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Middle Grade Locum Junior Doctor
Addiction Services

Authorised on 24/10/2023 10:41:20 by Kieran Owens.

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Victoria Hospital
Hayfield Road
Kirkcaldy
Fife
KY2 5AH

Emergency Department
Tel: 01592 643355 x29796
<http://www.nhsfife.scot.nhs.uk>



Dr T Malham
Benarty Medical Practice
54-58 Lochleven Road
Lochore
Fife
KY5 8DA



CHI: 1207840483

Letter ID: 5247414

Date: 04/10/2023

Dear Dr Malham

Kay Thomson, 122 Navitie Park, Ballingry, Lochgelly, Fife, KY5 8NJ

Date of Birth: 12/07/1984

Date of Admission: 01/10/2023

Date of Discharge: 01/10/2023

Ms Thomson presented to the Emergency Department with suicidal ideation and self harm. She was admitted to the Observation Unit to await Unscheduled Care review and on review the following morning she had ongoing suicidal ideation due to life stressors. On review by the Unscheduled Care team she did not wish not engage in a psychiatric assessment and explained she had an appointment on Friday with her doctor. She also explained to them that she planned to follow up with her addictions team.

Yours sincerely

Dr Melvin Carew
Consultant in Emergency Medicine

Authorised on 05/10/2023 14:57:12 by Surinder Panpher.

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Patient Name: THOMSON, Kay
CHI Number: 1207840483
DOB: 12/07/1984

NHS Fife Community Service, Mental Health Service
Unscheduled Care Assessment Team, Whyteman's Brae Hospital
Tel: 01592 643355 Ext 23999

DATE: 01/10/2023

Referral Source: EMOU VHK

Telephone Contact:

Referral Date & Time: 01/10/2023 10:37:00

PATIENTS DETAILS

Surname: THOMSON

First Name: KAY

CHI: 1207840483

D.O.B: 12/07/1984

Address:
122 Navitie Park
Ballingry
Lochgelly
KY5 8NJ

GP Practice:
Benarty Medical Practice
54-58 Lochleven Road
Lochore
Fife
KY5 8DA

Reason for Referral & Significant History:-

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Patient Name: THOMSON, Kay
CHI Number: 1207840483
DOB: 12/07/1984

Has deliberately self harmed whilst intoxicated, still suicidal now medically fit. History of addictions and similar presentations recently.

Completed by: James Graham

Outcome of Assessment:

We attended to review Kay in the Observation ward and she did not wish to engage in a psychiatric assessment. She admits to harmful use of alcohol and illicit Valium and informed us she has an appointment scheduled for Friday 6th October with addiction services and the plan is to start her on a diazepam reducing regime. Kay also advised she plans to discuss the possibility of being commenced on Quetiapine at this appointment. She adamantly denied having any thoughts to harm herself. She was discharged back to the care of the observation ward with no input from UCAT at this time.

On completion, this form should be emailed to:

1) GP

2) Then filed in case notes; please note that a typed letter will follow

Yes ☐ No ☒

Name: Kerrine Scally

Designation: Charge Nurse

Date: 01/10/2023

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S33

Sharon Hynd <Sharon.Hynd@fife.gov.uk>

Thu 05/10/2023 03:27 PM

To: Benarty Medical Practice (Benarty Medical Practice (21421)) <Fife.f21421benarty@nhs.scot>

Cc: Fife.addictionservicesadmin <Fife.addictionservicesadmin@nhs.scot>

Dear Doctor

Kay Thomson - 12.7.84

Concerns for Ms Thomson by the Scottish Ambulance Service following an episode where she had self-harmed. The concerns reads;

"Description of concern

My colleague and I attended to this patient in the early hours of this morning - we were initially called to reports that she had inflicted a self harm wound to her arm, which had apparently been bleeding quite heavily prior to the making of the initial call.

On our arrival, we were met by Kay, and she invited us in to allow for assessment. Initially, we noted some concern that her main kitchen door (which is an external door) did not have any glass in the window (it had been smashed) - she later explained that she had done this in an attempt to gain access after losing her key.

Kay expresses a range of suicidal thoughts, and had inflicted a cut to her left forearm, just on the inside of the elbow stating that she was cutting that area because "I know where the artery is" - this is very concerning to me, and represents a real (and possibly fatal) suicide risk if she were to inflict a deep wound and cause catastrophic haemorrhage.

She reports that she has been drinking heavily each day, as well as using street valium - she was given a diagnosis of Borderline Personality Disorder from her mental health team and prescribed Quetiapine but is refusing to take this.

I am concerned that she has a young child (4 years old) - who is currently staying with Kay's Mum in Edinburgh (Kay states that her Mum took the child as she felt this was safer) - Kay reports that the child is well and being looked after. There was no child at the property when we were in attendance.

My concern lies in a few areas:

1. her mental health is deteriorating, and that there is a real risk of suicide if this continues to go un-managed / un-supported;
2. she is drinking excessively and taking street valium, which places her own health at risk / she may be unable to safeguard herself if she becomes incapacitated from the drugs/alcohol;
3. she is responsible for looking after her child, and the above behaviours are concerning in that respect

I consider that she meets the definition in terms of Section 3 of the Adult Support & Protection (Scotland) Act 2007.

I am not able to make a drugs and alcohol referral because explicit consent is required for that - however, I know from our conversation that she is already well engaged with these services and has an addictions support worker.

Kay advised that she doesn't like engaging with services as it inevitably leads to 'social work'. However, I acknowledge I have a duty to report this to ensure her safety, and the safety of her young child.

Thank you for your support in processing this referral.

Concern type

Physical neglect"

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I am sharing this information with you, using S33 of the MHCTA to request appropriate support for Ms Thomson. There is no identified role at this time for SWCC however, should a role be identified ongoing please do not hesitate to refer back to the SWCC.

Regards
Sharon

Sharon Hynd
Social Worker
Health & Social Care
Bankhead
Glenrothes

Tel: 03451 555 555 ext: 493740

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Dunfermline
Fife
KY11 4UW

NHS Fife Community Services
NHS Fife Addiction Services
Tel: 01592 716446
<http://www.nhsfife.scot.nhs.uk>

**Fife Health
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Partnership**



Dr T Malham
Benarty Medical Practice
54-58 Lochleven Road
Lochore
Fife
KY5 8DA

GP UPDATE LETTER



CHI: 1207840483

Letter ID: 5275249

Dear Dr Malham

Clinic Date: 10/11/2023

Date: 10/11/2023

Kay Thomson, 122 Navitie Park, Ballingry, Lochgelly, Fife, KY5 8NJ

Date of Birth: 12/07/1984

Reason for Appointment

- Follow up from starting diazepam

Impression

1. Benzodiazepine dependence syndrome
2. Alcohol use disorder – now abstinent

Kay seems to be doing very well. She is remaining abstinent from illicit substances and alcohol. She states her mood is much better and she is keen to engage with services to remain abstinent. I think she would benefit from clinical psychology and Kay agrees with this.

Plan

1. 666mg of Acamprosate tds starting today
2. Review again in 4-6 weeks for mental health
3. Named nurse to follow up next week and check how Acamprosate start is going
4. Declined FASS as she is already working with DAPL at present and is finding it useful
5. Clinical psychology referral

Kay attended Lynebank Campsie clinic on the 27th October 2023. Since Kay was last seen she is feeling a lot better. She has been started on diazepam 30mg once a day and she has not drunk alcohol in over 3 weeks. She feels that her mind is quite hyperactive since this but she has been functioning much better. Kay states that she has been struggling a little bit with sleep. She is waking up early in the morning at around 5am and unable to sleep. She states she has tried Quetiapine and Mirtazapine in the past and she does not want these again.

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Kay states that she is feeling much more stable and she has got her daughter back and is living with her. She states this is going well.

Kay states that she has completely stopped all illicit substances, she is not taking any street valium. She reports that she is coping well with this. She has had passing thoughts of alcohol consumption but she states these are not quite cravings more just passing thoughts. She states she is very keen not to start drinking alcohol again. I discussed with her that we could offer her Acamprosate today with this and see if this reduces the amount that she is thinking about drinking. I also reinforced with her that we advised people not to drink again at all once they have been diagnosed as alcohol dependant. I warned her about the dangers about having just one drink and how this can often lead to a full relapse. Kay states she has no intention of doing so.

Kay asked about the possibility of relaxed dispensing of her diazepam and I stated there has not been long enough for her to be able to have this done yet but if she is to continue presenting the way she has today then I think she has a good chance of this happening in the future.

Kay is also seeking to understand some of the behaviour pattern over her lifetime. She said she is never able to keep a good partner or relationship. She feels that there is something wrong with her and she is unable to control her emotions. I have stated we can have another appointment in 4-6 weeks time when we discuss her mental health in more detail.

I have also had a discussion with her about her diazepam prescription not being indefinite and we will look to taper this over a period of time. She was accepting of this. I have not yet started her taper as I feel like she has not had a long enough period of stability but this is something that will be on the cards in the future.

Kay's urine drug screening was only positive to benzodiazepines and she blew 0 on breathalyzer.

Mental State Examination

Kay attended the appointment appearing well kempt, appropriately dressed with make up on. Good rapport was able to be built quickly. She was making good eye contact, smiling and energetic. Her speech was entirely normal. Her mood was stated to be massively improved and much better. Objectively she presented euthymic. Her affect was normal and mood congruous. She had no evidence of a formal thought disorder and no perceptual disturbance. She has good insight to both her mental health and substance use.

Yours sincerely

Dr Kieran Owens
Middle Grade Junior Doctor

Authorised on 24/11/2023 16:55:06 by Kieran Owens.

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Acute Services Division



V Emergency Department

T Malham
21421/1
Benarty Medical Practice
54-58 Lochleven Road
Lochore
Fife
Lochgelly
KY5 8DA

Victoria Hospital
Hayfield Road
Kirkcaldy
KY2 5AH

Dear Doctor

Miss Kay Thomson
122 NAVITIE PARK
BALLINGRY
Lochgelly
KY5 8NJ

CHI: 1207840483
ED Consultant: Dr Kate Searle

The above patient attended the V Emergency Department on 31/03/2024 at 22:01. I outline below some information regarding this attendance.

Present Complaint: (L) ARTERY INJURY

Diagnosis:			
Description	Body Site	Laterality	Comments
ED injury - Wound - Incision			

Investigation(s)/Treatment(s):

Medication(s):

Additional Notes (for GP):

Your patient has been admitted to hospital for further investigations/treatment. A final discharge letter will be issued from the admitting speciality team.

Senior Review:

Senior Review Comments:

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Acute Services Division



Yours sincerely
Dr John Hayes Snr Clinical Fellow

Created on 01/04/2024 05:59 by Dr John Hayes Snr Clinical Fellow

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Victoria Hospital
IMMEDIATE DISCHARGE DOCUMENT

Version: 1

Surname	Thomson	Address	122 Navitie Park
Forename	Kay		Ballingry
CHI No.	1207840483		Lochgelly
Date of birth	12/07/1984	Postcode	KY5 8NJ

GP Copy

Page 1 of 2

Admission Date	01 Apr 2024	GP	Dr.T Maiham
Admission Type	Emergency Home Incident (including Assault or Accidental Poisoning in the home)	GP Address	Benarty Medical Practice 54-58 Lochleven Road Lochore Fife KY5 8DA
Reason for Admission / Transfer	Acute Accidental Injury - Injury caused by an accident	GP Practice Code	21421
Discharge Date	01-Apr-24	Patient's Weight	0 kg
Discharge Ward	V Ward 33	Compliance Aid	No
Discharge To	Home		
Discharging Consultant	Mr Haroon Rehman		
Specialty	Orthopaedic Surgery		
Community Pharmacy			
A further transfer/discharge communication will follow this document			

Presenting Complaint

Left arm wound

Principal Diagnosis

Left antecubital fossa laceration and haemorrhage

Clinical Summary

Dear Doctor,

Please be aware of the recent admission of Ms Kay Thomson.

Ms Thomson presented to A&E with a left antecubital fossa wound and haemorrhage. She had some clinical signs of hypovolaemic shock on arrival and received fluid resuscitation and 2 units of RBC.

Ms Thomson reports she fell upstairs whilst carrying a champagne flute - the flute broke and stabbed into her arm - she pulled the glass out. Nil preceding symptoms. Denies loss of consciousness. Her neighbour found her outside and brought her to A&E.

She underwent CT angiogram to investigate her wound further. She was found to have a deep 30mm penetrating wound entering her left brachioradialis muscle with no active blood extravasation. Her upper limb vascular tree was patent and intact.

She was admitted overnight for observation. She received suturing to the laceration. Due to her past history of deliberate self harm, a referral to liaison psychiatry was made.

She was discharged home with 7 days of oral flucloxacillin.

Many thanks for your ongoing care of this patient.

Yours Sincerely,

Trauma & Orthopaedics
VHK

Drug / Type of Preparation	Form	Route of Admission	Dose	Frequency	Course Length	Quantity Supplied
ACAMPROSATE 333mg E/C TABLETS	TABLET	Oral	666mg	Three times daily	Continuous	Own Supply
DIAZEPAM 10mg TABLETS	TABLET	Oral	AS PER ADDICTIONS	AS PER ADDICTIONS	Continuous	Own Supply
FLUCLOXACILLIN 500mg CAPSULES	CAPSULE	Oral	1g	Four times daily 0800, 1200, 1800, 2200	7 days	At least 7 days

Prescriber's name	Jennifer Lusby	Prescriber Tel No.	Prescriber's Signature
Prescriber's grade	FY1	21159	

Please remember to bring your own medications into hospital if you are admitted

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NHS Confidential: Personal data about a patient



Victoria Hospital
IMMEDIATE DISCHARGE DOCUMENT

Version: 1

Surname	Thomson	Address	122 Navitie Park
Forename	Kay		Ballingry
CHI No.	1207840483		Lochgelly
Date of birth	12/07/1984	Postcode	KYS 8NJ

GP Copy

Page 2 of 2

Action	Drug	Type of Preparation	Reason
Continue	ACAMPROSATE	333mg E/C TABLETS	
Continue	DIAZEPAM	10mg TABLETS	
Started	FLUCLOXACILLIN	500mg CAPSULES	Infection prophylaxis

Unless otherwise stated, a minimum of 7 days supply has been given for each of the prescribed medicines

Pharmacist's Comments

Sign	Print	Date
------	-------	------

Pharmacist Assessment

Dispensed By

Checked By

Allergies NKDA

Other Diagnoses

Principal Operation	Date	Consultant
---------------------	------	------------

Other Operations

Clinical Progress and Results Awaited / Investigations Pending

Patient Information Transfer/Discharge Summary not given to patient and/or carer or relative

Explanation Given to patient

Follow Up Arrangements

Medication not currently prescribed by day hospital

Fitness note not issued

Duration of Fitness Note

Prescriber's name	Jennifer Lusby	Prescriber Tel No.	Prescriber's Signature
Prescriber's grade	FY1	21159	

Please remember to bring your own medications into hospital if you are admitted

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Fife
KY11 4UW

NHS Fife Community Services
NHS Fife Addiction Services
Tel: 01383 716446
<http://www.nhsfife.scot.nhs.uk>

**Fife Health
& Social Care
Partnership**



Dr T Malham
Benarty Medical Practice
54-58 Lochleven Road
Lochore
Fife
KY5 8DA

CLINIC LETTER

CHI: 1207840483

Letter ID: 5518720

Dear Dr Malham

Clinic Date: 15/05/2024

Date: 28/05/2024

Kay Thomson, 122 Navitie Park, Ballingry, Lochgelly, Fife, KY5 8NJ**Date of Birth: 12/07/1984**

Further to my recent email to give details of the consultation I had with the above lady on the 15th May 2024. We were accompanied by Leanne from the Retention Team and medical student Joana. A drug test taken on the day of Kay's appointment was positive solely for benzodiazepines. The service has been prescribing Kay diazepam 30mg daily and acamprosate 666mg three times a day from October. I note your prescription of fluoxetine 20mg daily which Kay had been on for a month.

Kay stated that she had stabilised her drug misuse, but continues to use alcohol. She had not taken alcohol on the day of our appointment, but gave a history of drinking in spates of around 5 day periods a ½ to a whole bottle of vodka. She highlighted on Saturday night she drank 2 x 70cl bottles of vodka. Since the beginning of the year Kay has reduced her alcohol use, she identified that alcohol had been a problem for a long time and spoke of it always being a part of her life. She first drank aged 16 and had her daughter when 18. She stopped drinking through both of her pregnancies. She highlighted periods of daily drinking starting in 2010. Kay spoke of the alcohol slowing her head down, stopping her thinking and denied previous planned detoxifications.

Looking at Kay's mental state she described traumatic re-experiencing, low mood and self esteem. She denied any thoughts of ending her life. She gave a clear history of emotional instability and I am aware of her difficulties leaving the house and engaging with tasks of daily living. Kay told me that she had a previous diagnosis of Borderline Personality Disorder and has not previously had psychology input. She has been previously prescribed quetiapine 25mg tid but described it making her sluggish.

Social history

Kay lives with her younger daughter Skylar, and her elder daughter who is currently studying mental health nursing is due to return for the summer. She currently has voluntary social work regarding her younger daughters care.

We discussed the following plan:

Fife Council and NHS Fife are supporting the people of Fife together through the Fife Health & Social Care Partnership.
www.fifehealthandsocialcare.org



NHS Confidential: Personal data about a patient

1. Kay fulfils criteria for alcohol and diazepam Dependence and I think Complex PTSD. Discussions around her childhood made me wonder if she has a Neurodevelopment Disorder such as ADHD or Autism, we will explore this further at our next meeting.
2. Kay has a prescription for diazepam, we have not changed the dose currently. She is keen to have her Saturday dose away and I will sort this when I see her next.
3. I stopped acamprosate on our systems, please amend your record to show that Kay is no longer prescribed this.
4. I have asked that Kay is referred to psychology.
5. I have emailed your surgery to restart fluoxetine and increase to 40mg daily.
6. I have arranged to see Kay again the 1st week in June, she has requested to start disulfiram however I would like her to be fully appraised of all the risks and benefits for her particular case given her diagnosis and impulsivity.

Yours sincerely

Claire McIntosh
Consultant Psychiatrist

Authorised on 03/06/2024 11:12:40 by Claire McIntosh.

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Acute Services Division



V Emergency Department

T Malham
21421/1
Benarty Medical Practice
54-58 Lochleven Road
Lochore
Fife
Lochgelly
KY5 8DA

Victoria Hospital
Hayfield Road
Kirkcaldy
KY2 5AH

Dear Doctor

Miss Kay Thomson
122 NAVITIE PARK
BALLINGRY
Lochgelly
KY5 8NJ

CHI: 1207840483
ED Consultant: Catriona Fullarton

The above patient attended the V Emergency Department on 15/05/2024 at 17:47. I outline below some information regarding this attendance.

Present Complaint: (L) ARM POST PROCEDURE WOUND / INFECTION ?

Diagnosis:			
Description	Body Site	Laterality	Comments
ED injury - Wound - Laceration	Forearm	Left	

Investigation(s)/Treatment(s):

Medication(s):

Additional Notes (for GP):

This patient presented to ED due to greenish discharge from her wound on left cubital fossa. Patient sustained a laceration injury one month ago at the same site which was sutured and had healed well. Last weekend patient used a knife to make another laceration at the same site. Ambulance was called but patient refused to come to hospital. Today patient came to hospital as she noticed green discharge from the wound. On examination no active bleeding or pus. Some redness around the wound. Obs stable. Advised to take a course of co-amoxiclav and discharged home with worsening advise.

Senior Review:

Created on 15/05/2024 21:32 by Dr Sarthak Atri GPST2

Version 1

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Acute Services Division



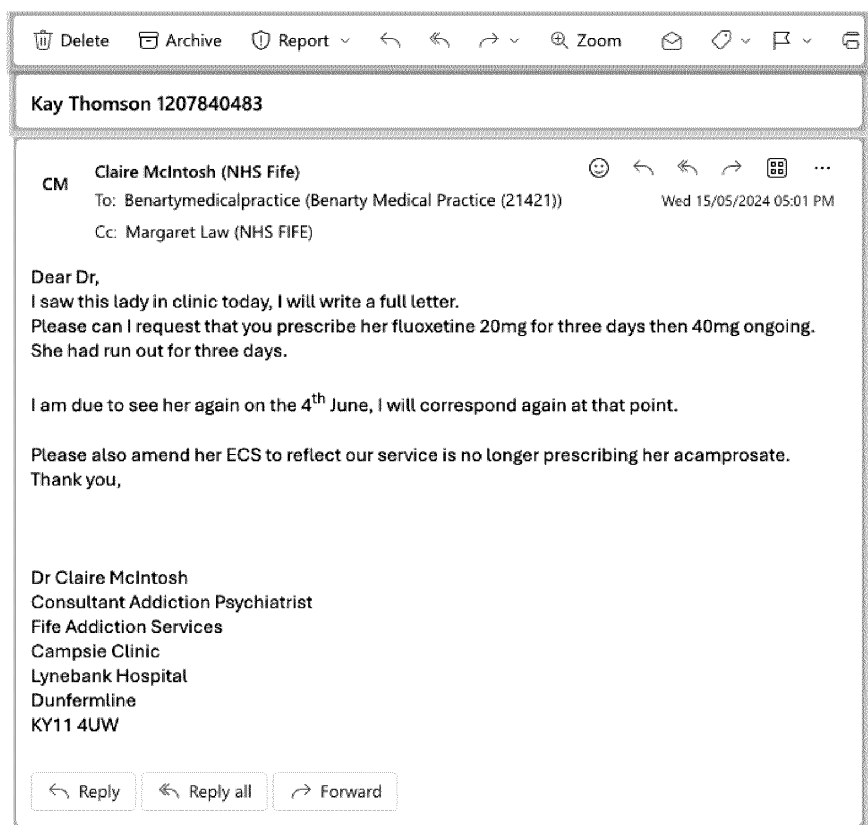
Senior Review Comments:

Yours sincerely
Dr Sarthak Atri GPST2

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CONFIDENTIAL
MARAC Notification Form**Date:** 30/05/2024**Case Number:** 1646**Victim:** Kay Thomson**Repeat:** No**Previous MARAC Case Number(s):** 1646: 23/05/2019

If a case has previously been heard at MARAC please provide any information you have since that date. You do not need to resubmit information provided previously and that can be found on the risk management plan from the above meeting.

Source of Referral: Police

Legal authority to share this information is in line with MARAC Fife SASPI (Scottish Accord on the Sharing of Personal Information) This is available from your organisation's MARAC rep.

High Risk Domestic Abuse Cases are discussed at MARAC (Multi-Agency Risk Assessment Conference)

Information is gathered and shared in order to establish a comprehensive understanding of risks and agree a risk management plan (RMP) for the adult victim and any children.

Information pertaining to the victim, perpetrator or any children, should be returned to your agency representative in the days prior to the MARAC meeting. It should summarise:

- Last time you had contact,
- Nature of your relationship / frequency of contact,
- Any domestic abuse you are aware of,
- Concerns / risks you identify,
- Protective factors in place,
- Any particular supports that are in place from your own service or otherwise,
- Any additional support you propose to offer.

If you have any queries regarding this notification please contact your **MARAC Representative** in the first instance or the MARAC Coordinator. Contact Number: 03451 55 55 55 Ext 441965.

CONFIDENTIAL
MARAC Notification Form

**Personal Details:**

MARAC case number:	1646
Marac Date:	30/05/2024
Previous MARAC	1646: 23/05/2019

Victim Details

Name	Kay Thomson	DOB (s)	12/07/1984
Address (state if safe to send mail)	122 Navitie Park, Ballingry	Gender	Female
Postcode	KY5 8NJ		

Perpetrator details

Name (include any known alias)	Darren Johnstone	DOB (s)	31/10/1988
Address	53 Lamberton Place, St. Andrews or HMP Perth LAS/LCS	Gender	Male
Postcode	KY16 8YF		

Children's details:

Name/s	DOB	R'ship to victim	R'ship to perp	Address	School or Nursery
Skylar Thomson	13/01/2020	Daughter	Daughter	122 Navitie Park, Ballingry or 14 Craigie Gardens, Ballingry LAS	Dunmore NS
Logan Johnstone.	29/06/2011	None	Son	8 Eden Grove, Guardbridge, St Andrews	Madras College
Aliyah Johnstone.	21/09/2009	None	Daughter	8 Eden Grove, Guardbridge, St Andrews	Madras College
Darren Johnstone.	03/09/2008	None	Son	8 Eden Grove, Guardbridge, St Andrews or 53 Lamberton Place, St Andrews LAS	Madras College

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MARAC INFORMATION REQUEST FORM

Please return via email by Tuesday 28th May 2024 by 12 noon

Name: Kay Thomson

MARAC number: 1646

The above named patient of yours is being discussed at a Multi-Agency Risk Assessment Conference (MARAC) because high risk domestic abuse has been identified.

Brief notes only, this is **not** a request for a full report. (Typed Only)

When was the patient last seen and by whom?

09/04/24 Dr Paisley – Locum GP

Has the patient disclosed any recent incidents of domestic abuse (within the last 12 months)?

No

Has the patient presented with any problems or conditions that may be associated with domestic abuse? Does the victim have any disabilities, mental health needs, problematic substance use issues, pregnancy (within the last 12 months) or other safeguarding needs that may increase the risk of violence and abuse?

History of alcohol misuse
History of deliberate self harm
Benzodiazepine dependence. Attends Addiction Services

Form completed by: Dr T A Malham

Date: 21/05/2024

Please return this form via email to: Fife.marac@nhs.scot

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Registration Details - Patient No: 11071

Personal details...		Address details...	
Sex	F	Post Code	KY5 8NG
Surname	Thomson	House Name Flat No	
Previous Surname		No and Street	14 Craigie Gardens
Forenames	Kay	Village	
Calling Name	Kay	Town	Ballingry
Date of birth	12/07/1984	County	Fife
Title	Miss		
Birth Surname			
Marital Status	Marital status unknown		
Ethnic Origin	Not Stated		

HA/HB Details...		Contact details...	
Trading partner	Fife	Home Tel No	07591-712245
Registered GP	Dr G Locum	Work Tel No	
Usual GP	Dr G Locum	Mobile Tel No	
Residential Inst		E Mail Address	kaythomson322@gmail.com
Branch Surgery			
CHI Number	1207840483		
NHS Number			

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-DG Consent	Implied Consent (default)
Date of registration	13/07/2020		

AMS/CMS Details		Imported user defined fields	
AMS Consent	Yes	GPASS Patient ID	
Pharmacy Details		Contact	
Item Collected Check	Yes	Contact Relationship	
CMS Suitability Status	-1		
CMS Registration Status	1		

Medical Record

Problems

Active Problems		Authorised By	Code
17/10/2014	Notes summary on computer X-KA	Ms Brown	9344
11/10/2017	[D]Seizure NOS Due to social Pregabalin use	Ms Fleming	R003z-1
01/06/2018	Overdose of drug Paracetamol	Ms Davidson	SL-5
28/09/2018	[X]Emotionally unstable personality disorder	Dr Seaman	Eu603
05/09/2019	Whooping cough vaccination - AC39B130AI. Left arm.	Mrs Archibald	655-1
14/11/2019	Unborn child on protection register EDD: 23.01.20	Ms Fleming	EMISNQUN8
15/11/2019	Computer summary updated X-LF	Ms Fleming	9348

Past Problems		Authorised By	Code
15/01/1988	Enuresis diurnal and nocturnal	Ms Brown	1A22
15/11/1988	Seen in paediatric clinic	Ms Brown	9N1V
20/03/1997	[SO]Renal pelvis NEC slight dilation renal pelvis left	Ms Brown	7N503
20/03/1997	Renal ultrasound	Ms Brown	585B-1
05/03/1998	Overdose of drug	Ms Brown	SL-5
12/10/1999	Drug dependence drug abuse	Ms Brown	E24
12/10/1999	H/O: behaviour problem	Ms Brown	1469

Medical Record Printout - Patient No: 11071

06 04 2021

22/07/2003	Spontaneous vaginal delivery female	Ms Brown	L20-1
21/08/2010	Spontaneous vaginal delivery male	Ms Brown	L20-1
18/01/2012	Termination of pregnancy	Ms Brown	L05-2
01/04/2012	Other hospital admission NOS	Ms Brown	8H3Z
01/04/2012	Back pain, unspecified	Ms Brown	N145-2
03/04/2012	Cervical smear: negative (GMS (Another Practice))	Ms Brown	4K22
03/04/2012	Other diagnostic ultrasound	Ms Brown	585
04/04/2012	Computerised tomograph scan 4cm mass left kidney probable focal pyelonephritis	Ms Brown	567-3
20/06/2012	Patient's condition resolved left kidney	Ms Brown	2126-3
23/08/2012	Depressive disorder NEC	Ms Brown	E2B
29/11/2014	Termination of pregnancy	Ms Brown	L05-2
11/10/2017	Overdose of drug - acute intoxication due to multiple drug use and use of psychoactive substances.	Mrs Archibald	SL-5
01/05/2018	Furuncle - boil	Dr Barclay	M01
12/04/2019	Did not attend - no reason	Dr Seaman	9N42
06/06/2019	Patient pregnant	Ms Brown	62
09/09/2019	Computer summary updated X-LF	Mrs Archibald	9348

Health Admin Problems	Authorised By	Code
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Investigations	Authorised By	Code
25/01/2016	Cervical Cytology (Source: Manually filed) . Routine Recall -	4K22.
16/11/2017	Cervical Cytology (Source: Manually filed) . Routine Recall -	4K22.
16/11/2017	(Non Coded Event - Neisseria gonorrhoea PCR) (Source: LAB) . Note, only COBAS collection kits are suitable for chlamydia testing. See NHS Fife intranet for more information.-----	
16/11/2017	(Non Coded Event - Chlamydia trachomatis PCR) (Source: LAB) . In Fife, Chlamydia infection is most prevalent in females under 25 and males under 30 years. Testing should be restricted to patients in these age groups unless there are risk factors for STI. When managing non-pregnant females with vaginal discharge, please see the NHS Fife algorithm "High Vaginal Swabs and the Management of Vaginal Discharge". [http://fife-lmc.org.uk/Supporting%20Papers/high%20vaginal%20swabs.pdf]-----	
15/12/2017	Full blood count - FBC (Source: LAB) .	424..
15/12/2017	Blood glucose level (Source: LAB) .	44TJ.
15/12/2017	Serum C reactive protein level (Source: LAB) .	44CS.
15/12/2017	(Non Coded Event - AKI) (Source: LAB) .	
15/12/2017	Urea and electrolytes (Source: LAB) .	44JB.
15/12/2017	Serum TSH level (Source: LAB) .	442W.
15/12/2017	Liver function test (Source: LAB) .	44D6.

Date	Last Entry	Normal Range Indicator	Normal Range
03/03/2020	Blood pressure reading 104/69 mm Hg		
03/03/2020	O/E - BP reading bright and reactive. Abdo snt, uetus not palpable above pelvic brim.		
15/12/2017	Serum albumin 47 g/L		35-50
15/12/2017	Serum alkaline phosphatase 56 U/L		30-130
15/12/2017	ALT/SGPT serum level 22 U/L		5-55
15/12/2017	Serum total bilirubin level 3 umol/L		0-21
15/12/2017	Serum TSH level 1.02 mU/L		0.27-4.2
15/12/2017	Serum sodium 141 mmol/L		133-146
15/12/2017	Serum potassium 4.1 mmol/L		3.5-5.3
15/12/2017	Serum creatinine 66 umol/L		50-100
15/12/2017	GFR calculated abbreviated MDRD > 60		
15/12/2017	Acute kidney injury warning stage Not detected		
15/12/2017	Serum C reactive protein level < 0.3		
15/12/2017	Plasma glucose level 4.7 mmol/L		3.3-6.1
15/12/2017	Total white cell count 8 x10-9/l		4-10
15/12/2017	Red blood cell (RBC) count 3.87 x10-12/l		3.8-4.8
15/12/2017	Haemoglobin estimation 125 g/l		120-150
15/12/2017	Haematocrit - PCV 36.7 %		36-46
15/12/2017	Mean corpuscular volume (MCV) 94.8 fl		83-101
15/12/2017	Mean corpusc. haemoglobin (MCH) 32.3 pg		27-32
15/12/2017	Mean corpusc. Hb. conc. (MCHC) 341 g/l		315-345
15/12/2017	Platelet count 266 x10-9/l		150-410
15/12/2017	Red blood cell distribution width 12.8		11.6-14
15/12/2017	Neutrophil count 4.65 x10-9/l		2-7
15/12/2017	Lymphocyte count 2.37 x10-9/l		1-3
15/12/2017	Monocyte count 0.77 x10-9/l		0.2-1
15/12/2017	Eosinophil count 0.13 x10-9/l		0.02-0.5
15/12/2017	Basophil count 0.03 x10-9/l		0.02-0.1
16/11/2017	(Non Coded Event - Chlamydia trachomatis.....:) NOT detected		
16/11/2017	(Non Coded Event - Neisseria gonorrhoea.....:) NOT detected		
16/11/2017	Cervical smear: negative Routine Recall -		
25/01/2016	Cigarette smoker 10 Cigarettes/day		

24/11/2014	Alcohol consumption 9.8 units/week		
24/11/2014	Body Mass Index 24.77		20-25
24/11/2014	O/E - weight 65 Kg		
24/11/2014	O/E - height 162 cm		10-250
04/04/2012	Computerised tomograph scan 4cm mass left kidney probable focal pyelonephritis		
03/04/2012	Other diagnostic ultrasound		
20/03/1997	Renal ultrasound		

Attachments			Authorised By	Code
09/10/2014	New patient screen admin. New Patient Appointment Letter	New Patient Appointment Letter.doc	Ms Brown	90W
17/11/2014	New patient screen admin. New Patient Appointment	New Patient Appointment.doc	Ms Brown	90W
12/01/2016	Cervical smear result Cervical Screening - Overdue with Disclaimer	Cervical Screening - Overdue with Disclaimer.doc	Ms Davidson	4K2
14/10/2016	DNA surgery appointment - 1st letter dna	dna.doc	Ms Fleming	EMISNQDN7
14/12/2016	Did not attend - no reason DNA 2nd Letter	DNA 2nd Letter.doc	Mrs Archibald	9N42
09/06/2017	DNA surgery appointment - 3rd letter DNA 3rd Letter	DNA 3rd Letter.doc	Ms Brown	EMISNQDN9
14/07/2017	eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: low mood ; Duration: 14/07/2017 - 11/08/2017)	FitNote_5e5b8066-11e3-416d-abb0-0298ed3fbf6a.pdf	Dr Wilson	9D15
14/07/2017	eMED3 (2010) duplicate issued, not fit for work FitNote.pdf, (Diagnosis: low mood ; Duration: 14/07/2017 - 11/08/2017)	FitNote_5e5b8066-11e3-416d-abb0-0298ed3fbf6a.pdf	Dr Wilson	9D17
11/08/2017	eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: low mood; Duration: 11/08/2017 - 01/09/2017)	FitNote_987a2137-c79a-4800-a8b2-6205a689d821.pdf	Dr Wilson	9D15
11/08/2017	eMED3 (2010) new statement issued, not fit for work (Diagnosis: low mood; Duration: 11/08/2017 - 01/09/2017)	FitNote_714fae7c-0bc7-4eae-9512-959378a030d6.pdf	Dr Wilson	9D15
01/09/2017	eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: low mood; Duration: 01/09/2017 - 29/09/2017)	FitNote_ead96021-303e-44da-a7d8-ef7cfadad280.pdf	Dr Wilson	9D15
21/09/2017	DNA surgery appointment - 1st letter DNA Warning	DNA Warning.doc	Ms Fleming	EMISNQDN7
22/09/2017	eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: low mood; Duration: 22/09/2017 - 27/10/2017)	FitNote_25c3a368-da50-4f7e-9bbf-08510a048f2b.pdf	Dr Wilson	9D15
27/10/2017	eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: low mood; Duration: 27/10/2017 - 24/11/2017)	FitNote_ec87c449-e823-4b08-91a3-aae1a1e6817f.pdf	Dr Hendrickx	9D15
17/11/2017	eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: fluctuating mood under psychiatrist; Duration: 17/11/2017 - 05/01/2018)	FitNote_09b853ea-5873-4a13-853a-8ce1debde940.pdf	Dr Wilson	9D15
09/03/2018	Letter encounter Removal from List - Patient	Removal from List - Patient.doc	Mrs Davidson	9N33-1
09/03/2018	Letter encounter Removal from List - PSD	Removal from List - PSD.doc	Mrs Davidson	9N33-1
26/04/2019	MED3 (2010) issued by hand, not fit for work FitNote.pdf, (Diagnosis: emotionally unstable personality disorder; Duration: 02/04/2019 - 28/05/2019)	FitNote_46c053af-c116-49d7-9d9b-8169331fab7a.pdf	Dr Seaman	9D19

Due Diary Entries		Authorised By	Code
12/07/2049	Influenza vaccination	Dr Cattnach	65E..

Overdue Diary Entries		Authorised By	Code
11/04/2019	Medication review OVERDUE	Dr Cattnach	8B314
16/11/2020	Cervical smear due OVERDUE SCCRS Recall	Ms Davidson	685F.

Alerts		Authorised By	Code
28/09/2018	Alert PT CURRENTLY IN WOMANS AID SEE ADDRESS ON PSYCHIATRY LETTER 13.09.18 NOT BE GIVEN OUT TO ANYONE 28.09.18	Ms Brown	EMISALERT

Drug Allergies		Authorised By	Code
None			

Non Drug Allergies		Authorised By	Code
None			

Family History		Authorised By	Code
24/11/2014	FH: Asthma	Ms Dailly	12D2

Referrals		Authorised By	Code
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01/04/2012	Other hospital admission NOS	Ms Brown	8H3Z
12/02/2015	8H...: Referral for further care (SCI Gateway Referral)	Dr Cattnach	8H
05/12/2016	8H...: Referral for further care (SCI Gateway Referral)	Dr Wilson	8H
18/07/2017	8H...: Referral for further care (SCI Gateway Referral)	Dr Wilson	8H
19/12/2017	8H...: Referral for further care (SCI Gateway Referral)	Dr Wilson	8H
09/04/2018	8H7T.: Refer to psychologist (SCI Gateway Referral)	Dr Cattnach	8H7T
01/05/2018	8H58.: Gynaecological referral (SCI Gateway Referral)	Dr Cattnach	8H58
30/04/2019	8H49.: Psychiatric referral (SCI Gateway Referral)	Dr Cattnach	8H49
06/06/2019	EMISSPR810: Radiology referral (SCI Gateway Referral)	Dr Cattnach	EMISSPR810

Immunisations	Authorised By	Code
05/09/2019 Whooping cough vaccination - AC39B130AI. Left arm.	Mrs Archibald	655-1

Health Status

16/11/2017	Cervical smear result Cervical smear: negative
24/11/2014	Height 162 cm
24/11/2014	Weight 65 Kg
24/11/2014	Body Mass Index 24.77 kg/m2
03/03/2020	Blood pressure reading O/E - BP reading
03/03/2020	Blood pressure reading 104/69 mm Hg
16/11/2017	Smoking Status Current smoker
25/01/2016	Exercise grading Aerobic exercise 3+ times/week

Other Observations	Authorised By	Code
09/10/2014 Ethnic group not recorded	Ms Brown	9SE
24/11/2014 Aerobic exercise 3+ times/week	Ms Dailly	138B
24/11/2014 Refuses stop smoking monitor	Ms Dailly	9OO2
24/11/2014 Health ed. - smoking	Ms Dailly	6791
24/11/2014 Health ed. - smoking	Ms Dailly	6791
24/11/2014 Scottish - ethnic category 2001 census	Ms Dailly	9I21
24/11/2014 Smok cessation advice declined	Ms Dailly	8IAj
24/11/2014 Smoking cessation advice	Ms Dailly	8CAL
24/11/2014 Current smoker	Ms Dailly	137R
06/10/2015 Failed encounter	Ms Dailly	9N4
23/11/2015 Failed encounter	Ms Dailly	9N4
08/01/2016 Cervical smear defaulter Exclusion From SCCRS Until 08/04/2018. Reason: Defaulter	Ms Davidson	9O8S
12/01/2016 Cervical smear refused	Ms Davidson	685L
25/01/2016 Aerobic exercise 3+ times/week	Ms Dailly	138B
25/01/2016 Cervical smear taken	Ms Dailly	7E2A2
25/01/2016 Chaperone offered	Ms Dailly	9NP0
25/01/2016 Chaperone refused	Ms Dailly	9NP2
25/01/2016 Advice about long acting reversible contraception	Ms Dailly	8CAw
25/01/2016 Verbal advice about long acting reversible contraception	Ms Dailly	8CAw1
25/01/2016 Smoking cessation advice	Ms Dailly	8CAL
25/01/2016 Smoking cessation advice declined	Ms Dailly	8IAj
25/01/2016 Stop smoking service opportunity signposted	Ms Dailly	8CdB
16/11/2017 Not interested in stopping smoking	Ms Dailly	137d
16/11/2017 Current smoker	Ms Dailly	137R
16/11/2017 Cervical smear taken	Ms Dailly	7E2A2
16/11/2017 Chaperone offered	Ms Dailly	9NP0
16/11/2017 Liquid based cervical cytology screening	Ms Dailly	685R
16/11/2017 Smoking cessation advice	Ms Dailly	8CAL
16/11/2017 Smoking cessation advice declined	Ms Dailly	8IAj
16/11/2017 Stop smoking service opportunity signposted	Ms Dailly	8CdB
26/04/2019 [X]Emotionally unstable personality disorder (REVIEW)	Dr Seaman	Eu603

Consultations

09/10/2014	<u>Ms Helen Brown at Externally Entered</u>
Additional	New patient screen admin. New Patient Appointment Letter
13/11/2014	<u>Ms Lynsey Fleming at Data Entry</u>
Comment	Midwife: LMP? 15/08/14 referral letter to VHK for booking.

<u>17/11/2014</u> Additional	<u>Ms Helen Brown at Externally Entered</u> New patient screen admin. New Patient Appointment
<u>20/11/2014</u> Comment	<u>Ms Lynsey Fleming at Data Entry</u> Midwife: Does not wish to continue with pregnancy TOP clinic 25.11.14 e 2115 arranged
<u>24/11/2014</u> Additional	<u>Ms Lindsay Dailly at Lochgelly Medical Practice</u> Smok cessation advice declined Smoking cessation advice Current smoker
<u>24/11/2014</u> Examination	<u>Ms Lindsay Dailly at Lochgelly Medical Practice</u> Blood pressure reading 106/60 mm Hg O/E - height, 162 cm O/E - weight, 65 Kg Body Mass Index, 24.77
Family History	FH: Asthma
Social	Cigarette smoker, 10 Cigarettes/day Alcohol consumption, 9.8 units/week Aerobic exercise 3+ times/week
Comment	Attended new pt appt moved from Crossgates with children .family history asthma and past medical history para 2 and depression in 2012 .
Additional	Refuses stop smoking monitor Health ed. - smoking Health ed. - smoking Scottish - ethnic category 2001 census
<u>04/12/2014</u> Comment	<u>Ms Lauren Williamson at Data Entry</u> Letter sent to pt with FPC leaflet re mirena coil to be fitted - see antenatal discharge letter dated 29/11/14
<u>09/02/2015</u> Problem	<u>Dr J Sandra Wilson at Lochgelly Medical Practice</u> sterilisation request
History	been on all forms of contraception except iucd has had implanon , depo all bleeding issues , used pills but exacerbated migraines , had top as result of stopping everything, para 2 +2. partner no keen to have sterilisation, because bleeding relationship strained , absolutely no way wants further family. stopped pill 9/7 ago still bleeding, has bled from termination in november , no discharge .. migraines ? since been back on pill
Comment	discussed contraceptive options, will refer to sexual health clinic to be considered for sterilisation. try week norethisterone to stop bleeding
Medication	Norethisterone Tablets 5 mg 30 <i>tablet ONE TO BE TAKEN THREE TIMES A DAY.</i>
Comment	has small discoloured area under skin of right calf, slight firm to touch, present for years o/e ?? tiny fibrous area of soft tissue , reassured monitor if further concern r/v
<u>24/04/2015</u> Comment	<u>Ms Courtney Davidson at Data Entry</u> Letter sent to patient. See workflow. (Letter dated 22.04).
<u>06/10/2015</u> Comment	<u>Ms Lindsay Dailly at Lochgelly Medical Practice</u> Failed encounter
<u>23/11/2015</u> Comment	<u>Ms Lindsay Dailly at Lochgelly Medical Practice</u> Failed encounter
<u>12/01/2016</u> Comment	<u>Ms Courtney Davidson at Data Entry</u> Excluded from Cervical Screening due to default - as per imprt labs.
<u>12/01/2016</u> Additional	<u>Ms Courtney Davidson at Lochgelly Medical Practice</u> Cervical smear refused
<u>12/01/2016</u> Additional	<u>Ms Courtney Davidson at Externally Entered</u> Cervical smear result Cervical Screening - Overdue with Disclaimer
<u>25/01/2016</u> Examination	<u>Ms Lindsay Dailly at Lochgelly Medical Practice</u> Blood pressure reading 120/75 mm Hg Cigarette smoker, 10 Cigarettes/day Aerobic exercise 3+ times/week
Social	attended for cx smear. pt is very much aware that she has declined smear on many occasions before.pt has been on depo provera but brown irr bleeding for months bp 120/75 p76. minimal brown discharge today.pt feels she will stay of contraction meantime but does get very bad PMS and will await result then seek gp appt.
Comment	
Additional	Cervical smear taken Chaperone offered Chaperone refused Advice about long acting reversible contraception Verbal advice about long acting reversible contraception Smoking cessation advice

	Smoking cessation advice declined Stop smoking service opportunity signposted
<u>09/05/2016</u>	<u>Dr Nicole Hendrickx at Lochgelly Medical Practice</u>
History	very long heavy bleeding, very freq, every 2 wks, has had pap smear test done in januari. pregnancy unlikely, split up with boyfriend. has had depoprovera jag in Oct 2015 and after that sympt started. has had norethisteron before and had reset everything in 2015, no s/a of this, no c-i
Comment	probably irreg bleeding because of depoprovera jag.
Result	perform STD test and pregnancy test, if neg: start noretherone again to reset, return if not settling.
<u>10/05/2016</u>	<u>Dr Nicole Hendrickx at Lochgelly Medical Practice</u>
History	since last night 8 pm pain in lower back, up all night with the pain, severe pain, no appetite, pcm not helping. 4 yrs ago had kidney infection ended up in hospital, pt sais recognises pain again from earlier. T up and dow. No pain with peeing. freq peing. Admits wants to move for the pain, but not classic colic pain.
Examination	T 38.4, urine: L2+, nitrite-, blood 2+ (no period), 1 prot, lower back tender, not a very sore impression, wants to move on her chair indeed.
Comment	Pyelonefritis or kidney stone?
Result	start cipro, and co-codamol, T should come down within the next 2 days, if worse, T up/more sore call hospital, hand in new urine sample next week.
Medication	Ciprofloxacin Tablets 500 mg <i>14 tablet ONE TO BE TAKEN TWICE A DAY</i> Co-Codamol 15/500 Capsules <i>100 Capsule(s) ONE OR TWO TO BE TAKEN FOUR TIMES A DAY WHEN REQUIRED</i>
<u>12/05/2016</u>	<u>Ms Lynsey Fleming at Data Entry</u>
Comment	Called patient to advise to hand in MSU, partner advised currently in Magaluf. I asked if he could get her to call me back and he advised me that patient has told him she is going to hand in an MSU when she gets back.
<u>14/10/2016</u>	<u>Ms Lynsey Fleming at Externally Entered</u>
Additional	DNA surgery appointment - 1st letter dna
<u>30/11/2016</u>	<u>Dr J Sandra Wilson at Lochgelly Medical Practice</u>
Problem	long hx of labile mood, ?? depression
History	has had a long hx of mood swings low mood, gets angry, negative thoughts over the years this has caused tension with partners, present partner included but feels it comes from her ... gets bored easily short attention span ... for eg has got rid of her dog this year ... just decided did not want to have a dog and gave it away to a friend !. Has 2 kids 13 year old daughter staying with dad ... been some issue with daughter again due to her moods, son 6 .. school concerned that has poor concentration.. has appointment this afternoon sister long hx of depression..... watched sister for years ... not on same scale ..she is always sad family and friends concern about her mood ... ' always called her mad and know she can have major swings in her mood police have been to house on one occasion recently as was playng loud music and thinks someone reported her as drinking and had her son but he was not at home alcohol once week at most 5 weeks ago during 'wobbles' has cut hair off cannot plan anything as never finishes anything sleep, appetite okay when low not eaten has mucked up 3 jobs this year has episodes where has had thoughts what to do to self but pass when had bad day has tried to kill partner
Examination	well presented, good eye contact slightly on edge but sat for long consultaion.
Comment	from hx ??? possible bipolar illness... certainly elements of depression, will refer to psychiatry for 2nd opinion but will try small dose ssri r/v in few weeks
Medication	Citalopram Hydrobromide Tablets 10 mg 28 <i>TABLET ONE TO BE TAKEN EACH DAY.</i>
<u>14/12/2016</u>	<u>Dr J Sandra Wilson at Lochgelly Medical Practice</u>
Problem	dna
<u>14/12/2016</u>	<u>Mrs Karen Archibald at Externally Entered</u>
Additional	Did not attend - no reason DNA 2nd Letter
<u>07/02/2017</u>	<u>Dr Nicole Hendrickx at Lochgelly Medical Practice</u>
History	Has a wart under her R foot, has this since about 6 months, has treated it with bezucca, filed, picked it and went worse.
Examination	Now under her foot, under her heel big verruca, about 1 cm in size black dots, callus forming around. not inflamed. not warm not red,
Comment	foot wart.
Result	go to podiatrist for further help. self referral form.
<u>05/06/2017</u>	<u>Ms Lynsey Fleming at Data Entry</u>
Comment	Discharge from VHK 30.05.17, no changes made to medication. NH/LF
<u>06/06/2017</u>	<u>Dr Nicole Hendrickx at Lochgelly Medical Practice</u>
History	Pt is here 8min too late at her appointment, then at the toilet, when I ask her to come in. Explained I have limited time left, then patient start a story about

Result	depression, sleeping problems, bipolar, asking for sleeping tablets. Advised pt to make new appointment with me or SW for proper consultation.
<u>09/06/2017</u> Comment	<u>Ms Helen Brown at Data Entry</u> pts apt moved from 5.50 9/6 NH to SC - pt did not attend
<u>09/06/2017</u> Additional	<u>Ms Helen Brown at Externally Entered</u> DNA surgery appointment - 3rd letter DNA 3rd Letter
<u>14/07/2017</u> Problem	<u>Dr J Sandra Wilson at Lochgelly Medical Practice</u> low mood I referred Kay to psychiatry as had increase pressure as brother split from partner and came to stay with her was distracted and also had a cleaning job which was enjoy but landed up not going and lost job and has to sign back on but feels not fit for work used the citalopram for a week but felt it made her worse , had an episode of 5 hours when uncontrollable and did not take any more medication mood up/down not sleeping has been self harming and cut self at the w/e ... has a slightly weepy laceration appetite not good biggest problem is her aggression new relationship and going okay needs fit line and and re referral alcohol minimal , smoker takes occasional street dizeapm not suicidal
History	lacerations (L) wrist superficial but slightly red and a small amount pus , well presented good eye contact , speech normal , not voicing suicidal thoughts will try small smal supply of mirtazipine ? helpi both sleep and mood , will refer back to psychiatry , antibiotics and dressing for arm. If wound not healing make an appointment with t/r nurse monday r/v few weeks re mood
Medication	Mirtazapine Tablets 15 mg 28 TABLET ONE TO BE TAKEN AT NIGHT..
Additional	eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: low mood ; Duration: 14/07/2017 - 11/08/2017)
Medication	Flucloxacillin Capsules 500 mg 28 CAPSULE ONE TO BE TAKEN FOUR TIMES A DAY..
Additional	eMED3 (2010) duplicate issued, not fit for work FitNote.pdf, (Diagnosis: low mood ; Duration: 14/07/2017 - 11/08/2017)
<u>18/07/2017</u> Comment	<u>Dr J Sandra Wilson at Lochgelly Medical Practice</u> has lost fit line from alst week asking for duplicate line
<u>11/08/2017</u> Problem	<u>Dr J Sandra Wilson at Lochgelly Medical Practice</u> review of mood since last seen ? much improvement in mood , daughter not been visiting much , son spends more time with nana, not been going out much , sister and brother have been trying to support her . not in a relatuionsip at moment mirtazipine sometimes helps with sleep other times it doesnt still has crazy moment s does some exercise in the house still feels looking for direction some days can wake up and feel okay would go out eg walk the dog been getting benefit so no worry fianicaily still occasional tablets off the street more likley to nytol to help her sleep arms cleared up no word from psychiatry no s/e from mirtazipine
History	good eye contact, reasonably well presented mood swings ?? worth trying mood stabliser but needs to see psychiatrist will try and chase up appointmnt suggest increase mirtazipine ? help with sleep , continue fit line review in 3 weeks
Medication	Mirtazapine Tablets 30 mg 28 TABLET ONE TO BE TAKEN AT NIGHT.
Additional	eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: low mood; Duration: 11/08/2017 - 01/09/2017)
<u>01/09/2017</u> Problem	<u>Dr J Sandra Wilson at Lochgelly Medical Practice</u> review of low mood since last seen not much improvement with sleep , seeing every few hours , waken exhausted , mood little change , still major mood swings .. had crazy thoughts but not acted on them 3 weeks ago the new partner assaulted her , smashed up house , charge bail condition not to approach house son Riley has been seeing DR hendrickx as ? aspergers , ? adhd . needs further wrist wound from self harm itchy needs fit line
History	well presented today , slightly agitated as had short wait but more relaxed than before will try short course of sedative as not sleeping an issue but has an appointment with dr ghandi next wednesday will r/v follow ing week as although does not feel mirtazipine not working will wait for psychiatrist assessment. needs fit line
Examination	Mirtazapine Tablets 30 mg 28 TABLET ONE TO BE TAKEN AT NIGHT.
Comment	
Medication	

Additional	Zopiclone Tablets 7.5 mg 7 TABLET ONE TO BE TAKEN AT NIGHT . eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: low mood; Duration: 01/09/2017 - 29/09/2017)
21/09/2017 Problem	<u>Dr J Sandra Wilson at Lochgelly Medical Practice</u> dna
21/09/2017 Additional	<u>Ms Lynsey Fleming at Externally Entered</u> DNA surgery appointment - 1st letter DNA Warning
22/09/2017 Comment	<u>Dr J Sandra Wilson at Data Entry</u> had a request for a fit line but then note left from patient which said she gave permission for me to send a note of her medical problems ' personality disorder + bipolar @ all correspondance to Pat.bourhill@fife.gov.uk who is a paediatrician, . in note ' medication not any difference . will email to find out if looking for report . re meds 1/12 mirtazapine left
Medication	Mirtazapine Tablets 30 mg 28 TABLET ONE TO BE TAKEN AT NIGHT
22/09/2017 Comment	<u>Dr J Sandra Wilson at Lochgelly Medical Practice</u> missed appointment as had a social work meeting yesterday
Additional	eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: low mood; Duration: 22/09/2017 - 27/10/2017)
22/09/2017 Comment	<u>Ms Courtney Davidson at Data Entry</u> Patient missed appt 21.09.17 - ? Asking for continuation line please. Also note on front desk for attention. thanks
26/09/2017 Comment	<u>Ms Courtney Davidson at Data Entry</u> E-mail sent to pat.bourhill@fife.gov.uk as per dictation. Copy of e-mail scanned into patients records for info. SW/CD
17/10/2017 History	<u>Dr Nicole Hendrickx at Lochgelly Medical Practice</u> Coming in here with mother, last week overdosage of drugs take, taken 30-40 tablets of diazepam 10mg. Does not know why she is doing it, explained she wanted to relax. Seeing the psychiatrist at 7/11. Knows dr SW well. Since discharge not been taken diazepam anymore, was buying it from the street. Last night took a bottle of wine herself, further no alcohol rest of the week, no other drugs taken apart from mirtazapine. Cant sleep, cant concentrate. Asking today something to help her sleep. Has had zopiclone in the past, worked well.
Examination	Allert and bright, but not chatty, mum telling me the history mainly.
Result	Long discussion re alcohol and diazepam use, explained diazepam (in above amount can kill her) advised to cut down and wean off and next week ADAPT drop in clinic. Zopiclone for now 1 wk, no alcohol with this, review SW next week.
Medication	Zopiclone Tablets 3.75 mg 7 TABLET ONE TO BE TAKEN AT NIGHT
27/10/2017 History	<u>Dr Nicole Hendrickx at Lochgelly Medical Practice</u> Doing a lot better! Off the alcohol and drugs now completely, also stopped mirtazapine. Did not think they were helpful for her sleeping. Asking for more zopiclone now.
Examination	Looking much much better then last time seen, bright and allert, smiling, chatty!
Result	Encourages to stay off the alcohol and drugs. zopiclone and nhs sleeping advices. review SW 3 wks.
Additional	eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: low mood; Duration: 27/10/2017 - 24/11/2017)
16/11/2017 Social	<u>Ms Lindsay Dailly at Lochgelly Medical Practice</u> Not interested in stopping smoking Current smoker
Comment	attended for cx smear .para 2+2 smoker .last period 6 weeks ago . now approx two weeks over due . bp 108/40 pt has been trying for baby negative pregnancy test in clinic today .Anxious ++ re this and is due to start new mental health medication. Will discuss with gp at her next visit next week.
Test Request	Chlamydia trachomatis DNA - <i>Sampled</i>
Additional	Cervical smear taken Chaperone offered Liquid based cervical cytology screening Smoking cessation advice Smoking cessation advice declined Stop smoking service opportunity signposted
17/11/2017 Problem	<u>Dr J Sandra Wilson at Lochgelly Medical Practice</u> review
History	mood up and down, , but better than a few weeks ago . seen by pscychiatrist last week who is considering starting her on quitapine asto be off mirtazipine which has getting froma friend . as well in the week of madness took mixture gabapentin , diazeapm , mirtazipine , drinking ++.. had seizure and was admitted to hospital. since then apart from the zopiclone from surgery had not had any medication . on no tablets at the moment. iusing herbal rx to help with sleep mood been fluctant .. has been angry at times .. punched a switch , punched brother , crash car son staying with gran at the moment.. had a school meeting on tuesday,, was

Examination	agreed that to extend contact... could see him any time but had to be a gran, now can come to house and at christmas hopefully over night
Comment	well presented , good eye contact , more relaxed than have seen in the past will extend line . , will wait till see the psychiatrist before starting the quetiapine suggest review on the 8th after appointment. encouraged to continue to avoid any alternative drugs/alcohol
Additional	eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: fluctuating mood under psychiatrist; Duration: 17/11/2017 - 05/01/2018)
Problem	right middle finger infection
History	punch a car window and right middle finger has small inflamed area which also swollen and cannot get ring off , ? needs antibiotics
Examination	right middle finger at base of proximal phalanx swollen and slight red crusted skin, FROM at finger
Comment	small area of skin infection rx Ab , suggest if not able to remove ring ? need to attend a+e /minor injuries
Medication	Flucloxacillin Capsules 500 mg 28 CAPSULE ONE TO BE TAKEN FOUR TIMES A DAY.
08/12/2017	<u>Dr J Sandra Wilson at Lochgelly Medical Practice</u>
Problem	dna
11/12/2017	<u>Ms Helen Brown at Data Entry</u>
Comment	Mental Health letter QMH 22.11.17 discontinue Mirtazepine - acute prescribing, last issued September 2017 SW/HB
15/12/2017	<u>Dr J Sandra Wilson at Lochgelly Medical Practice</u>
Comment	when in at consultaion has mentioned still some ' infection ' at right middle finger , had intended to give script for flucloxacillin, script left to pick up
Medication	Flucloxacillin Capsules 500 mg 28 CAPSULE ONE TO BE TAKEN FOUR TIMES A DAY.
15/12/2017	<u>Dr J Sandra Wilson at Lochgelly Medical Practice</u>
Problem	review of mood
History	not been sleeping , mood slightly more up and down , finds concentration poor , went to the psychiatrist and when came out forgot appointment at the surgery .. history more disjointed today but appears the psychiatrist has suggested that use of quetiapine not an option but has referred to relaxation or emotional resources . feels she did not concentrate well at the consultation and did not express how she is feeling. not sleeping major problem. also since had ' fit ' she does not feel her memory is as should and ' head not right ' no wt loss but wt gain , no tremor
Examination	sats 99 % pulse 94 bp 115/87 , temp 37 , perla , fundi nad , power , tone , coordination normal
Comment	suggest check bloods to exclude physical cause of symptoms , will arrange referral to neurology. re sleep not keen on giving sedatives but can try phenergan
Medication	Phenergan Tablets 25 mg 28 tablet ONE TO BE TAKEN AT NIGHT.
Test Request	CRP (C-reactive protein) - <i>Sampled</i> , Full Blood Count - <i>Sampled</i> , Glucose - <i>Sampled</i> , LFT (Liver function) - <i>Sampled</i> , Thyroid function test - <i>Sampled</i> , Urea & Electrolytes - <i>Sampled</i>
05/01/2018	<u>Dr J Sandra Wilson at Lochgelly Medical Practice</u>
Problem	dna
17/01/2018	<u>Mrs Karen Archibald at Data Entry</u>
Comment	Script for Flucloxacillin 500mg dated 15/12/17 destroyed as not collected by patient.
19/01/2018	<u>Mrs Karen Archibald at Data Entry</u>
Comment	Clinic letter from Dr Neilson, 10/01/18. Letter sent to patient to make appt with Dr Wilson within the next two weeks for review. Patient to be fitted in.
08/03/2018	<u>Dr J Sandra Wilson at Lochgelly Medical Practice</u>
Problem	dna
09/03/2018	<u>Mrs Charlene Davidson at Data Entry</u>
Comment	Request to PSD to remove patient from list - DNA several appointments despite reminder/warning letters - patient informed
09/03/2018	<u>Mrs Charlene Davidson at Externally Entered</u>
Additional	Letter encounter Removal from List - Patient
09/03/2018	<u>Mrs Charlene Davidson at Externally Entered</u>
Additional	Letter encounter Removal from List - PSD
12/03/2018	<u>Dr Fiona Seaman at Lochgelly Medical Practice</u>
History	Requests quetiapine. Says no drugs for weeks. Psychiatrist had said may consider if not taking drugs in letter 7/11/17. Currently in Women's aid Cowdenbeath. Giving up 98 Main st, Crosshill in 2 wks. Not coping with emotions. Says abusive partner didn't want her to take quetiapine in past. DNA appt HVDH as been in Women's Aid.
Examination	Neatly dressed, good eye contact.
Comment	Advised I would refer psychiatry but would need mailing address or phone no. Mobile has run out of battery. Will call in with number. May make appt with Dr Wilson as thought she had said would prescribe quetiapine.

<u>20/03/2018</u>	<u>Dr J Sandra Wilson at Lochgelly Medical Practice</u>
Problem	emotional upset
History	Since seen by the psychiatrist last year ... did not engage will hillview day hospital or any of the recommendations distracted by the person living with at the time ..was in a relationship with him from October last year ... assaulted her on numerous occasions and is in jail on the charge of attempted murder . House was deemed not safe and now living in womans Aid At present on her own , on homeless list and hopefully the council will get a house .It was a lady from womans aid who called for an appointment All household goods been put out in street not seen her youngest son for 2 weeks ... only been seen x3 since christmas .. was bruised from various assaults and did not want him to see her like this son living with nan... Has not heard anything from social worker re any meetings texts her daughter on/off mum supporting her at the moment. this appointment was made by woman aid as felt she has not been motivated , disorientated , not sleeping , appetite okay not drinking much occasionally had a drink but not drank this week , not using street drugs in last month
Examination	well presented today but several recent scars with some keloid change anterior chest , at times consultation disjointed , not voicing thoughts of self harm at the moment
Comment	see previous assessment last year as emotionally unstable personality problem ... life goes from one crisis to another , antidepressants little help , looking through notes behavioural problems from teenager ... ?? adult ADHD , will write back to psychiatry but reluctant to use any rx at the moment
Problem	(L) suprapubic area infection
History	(L) side of suprapubic area inflamed ? infected ingrown hair
Comment	rx ab as per ' chest infection'
Problem	chesty
History	coughing , green sputum , catarrh , smoker
Examination	sats 97 % , , temp 36.3 , bp 122/94,slightly hoarse , fruity cough , chest clear
Comment	? ore urti but rx clarithromycin re chest and skin infection
Medication	Clarithromycin Tablets 500 mg <i>14 tablet ONE TO BE TAKEN TWICE A DAY.</i>
<u>20/03/2018</u>	<u>Ms Courtney Davidson at Data Entry</u>
Comment	PLEASE CAN WE GET AN UP TO DATE CONTACT NUMBER FOR PATIENT. (Need contact number in order to send Psychiatry referral as per Dr Seaman).
<u>01/05/2018</u>	<u>Dr Jennifer Barclay at Lochgelly Medical Practice</u>
Problem (FIRST)	Furuncle - boil
History	L mons pubis, was settling with Clarithromycin then stopped, not pointing, systemically well, approx 3 cm oval, not tense, CT antibiotics, refer Gynae as may need I&D.Dr J Barclay, Locum GP .
<u>01/05/2018</u>	<u>Dr Jennifer Barclay at Lochgelly Medical Practice</u>
Medication	Clarithromycin Tablets 500 mg <i>28 tablet ONE TO BE TAKEN TWICE A DAY</i>
<u>11/09/2018</u>	<u>Dr Susan Cattanach at Telephone Consultation</u>
History	Spoke with Dr Rowenna McIlhinney about Kay. Diagnosis has been made for Kay - Emotionally Unstable Personality Disorder. There was a recommendation from psychiatry in past to prescribe quetiapine. Wondering if I would be willing to do this now or if I would be happier for psychiatry input again. As this letter was from clinic in early November last year and also no dose of quetiapine was actually recommended, I would be happier to await psychiatry direction at this stage. Dr McIlhinney will take this to joint meeting and get back to me about advice.
<u>18/09/2018</u>	<u>Ms Helen Brown at Data Entry</u>
Comment	QMH letter 13.9.18 prescription issued Quetiapine unable to contact pt on phone - letter sent advising scripts done and to update telephone number
<u>28/09/2018</u>	<u>Dr Fiona Seaman at Lochgelly Medical Practice</u>
Problem (FIRST)	[X]Emotionally unstable personality disorder
History	CURRENT ADDRESS 18 WALKER ST, COWDENBEATH. Women's aid scatter flat. Not supposed to give out address. Awaiting own place. Letter to pt re quetiapine sent to old address so didn't get it. Appt today was to see how getting on with quetiapine. Advised re SEs, 25mg up to bd if required. Rv 2 wks re further Rx. New phone no. obtained from pt.
<u>11/10/2018</u>	<u>Dr Susan Cattanach at Lochgelly Medical Practice</u>
History	In for 2week review.taking quetiapine, not experiencing any problems. Not had any more psychology input since getting these. says doesn't really understand what tabs are for. Explained why she was prescribed these - as mood support while having psychological therapy. Happy to continue these as required.
Medication	Quetiapine Fumarate Tablets 25 mg <i>60 tablet ONE TO BE TAKEN TWICE A DAY IF REQUIRED</i>
<u>12/04/2019</u>	<u>Dr Fiona Seaman at Lochgelly Medical Practice</u>
Problem (FIRST)	Did not attend - no reason

25/04/2019	<u>Ms Courtney Davidson at Data Entry</u>
Comment	Patient called at 10.55am requesting emergency appt in regards to OOH contact 25/4/19. Spoke to Dr Mearns and offered patient appt at 4pm. Patient returned call at 11.20am advising unable to make appt and requested GP visit. Patient in Kirkcaldy (same address as OOH contact) therefore advised out with our area and advised she would need to contact GP Practice in KDY if felt needed seen as emergency. Provided couple of GP surgery numbers for patient to try.
25/04/2019	<u>Mrs Karen Archibald at Data Entry</u>
Comment	See OOH Contact - 25/04/19
26/04/2019	<u>Dr Fiona Seaman at Lochgelly Medical Practice</u>
Problem (REVIEW)	[X]Emotionally unstable personality disorder
History	Mum present at start of consultation but left before the end. Says quetiapine helped sleep when first started them but was taking 4 at night and still not sleeping. Mood up and down. Suicidal thoughts at times or "manic". Loses track of days. Not dealing with mail. Denies drinking much alcohol but I advised records show attended hospital last month and this month intoxicated. Phone stolen yesterday. Going to contact housing for house nearer family for support. "I need someone to look after me". Been lifted by police due to behaviour. Requesting analgesia for lacerations and bruises. Not taken anything yet. Says sick with paracetamol. Advised ibuprofen. Was unhappy about this. I advised risk of overdose with stronger analgesia.
Examination	Bruise and laceration right temple, laceration left side forehead, lacerations left antecubital fossa. swearing frequently.
Social	Staying with sister whilst doing up house in Kirkcaldy so can hand it back. Refer community mental health team. advised not to drink alcohol. I declined request for sleeping tablets due to risk overdose and also for quetiapine as says would take 5 or 6 at night. Did not want 2/day dispensed daily. Does not wish to attend resources group advised by psychologist. I advised medication has limited role in treatment of personality disorder. Pt declined to see nurse for dressings. Says will attend to these herself. Advised housing support would be helpful.
Comment	MED3 (2010) issued by hand, not fit for work FitNote.pdf. (Diagnosis: emotionally unstable personality disorder; Duration: 02/04/2019 - 28/05/2019)
Additional	
08/05/2019	<u>Dr Garry Meams at Lochgelly Medical Practice</u>
History	Has been assaulted omn the 2nd May Kicked bitten on back and kicked around her ears
Examination	Ears both TM intact No evidence of cleeding Abrasions over L hip and L shoulder Bite marks on L shoulder
10/05/2019	<u>Ms Helen Brown at Data Entry</u>
Comment	letter Dr Morris, Psychiatrist 9.5.19 letter sent to pt TMA 5 min telephone consultation to discuss SC/HB
31/05/2019	<u>Dr Susan Cattanach at Telephone Consultation</u>
History	Discussed Dr Morris' letter and recommendations. Happy to restart quetiapine as prescribed and says will have look at Access Therapies site.
06/06/2019	<u>Ms Helen Brown at Lochgelly Medical Practice</u>
Problem (FIRST)	Patient pregnant
06/06/2019	<u>Ms Helen Brown at Data Entry</u>
Comment	referral xray foot sent SCI gateway in error - not this patient unable to contact radiology to advise.
03/03/2020	<u>Dr Olubukola Ogunleye at Lochgelly Medical Practice</u>
History	Delivery 7weeks ago. No abdo pains or PV discharge. Feels well. LMP 1.3.2020. No contraception use. Baby in care of grandmother because Kay relapsed into drug abuse when she was 7months pregnant.Kay is now keen to get back on track. Says no drug use since she had her baby.
Examination	O/E - BP reading bright and reactive. Abdo snt, uetrus not palpable above pelvic brim.
Comment	Blood pressure reading 104/69 mm Hg Signposted accesstherapiesfife online resources. Declines contraception.
11/03/2020	<u>Ms Lynsey Fleming at Data Entry</u>
Comment	See message log in docman 04.03.20 - as a result from GP appt 03.03.20 advised trna with MHN, Kim has reviewed her appointments and unfortunately unable to offer appointment/help for this patient due to her already having been diagnosed with a mental health condition. Please advise patient that if needs to speak with someone re other options TMA with GP. Letter sent to patient.
13/01/2021	<u>Ms Helen Brown at Data Entry</u>
Comment	A&E letter 12.1.21 letter sent to pt TMA bloods
Test Request	Full Blood Count - <i>Requested</i>

Medication

Current				
Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
11/10/2018	Quetiapine Fumarate Tablets 25 mg ONE TO BE TAKEN TWICE A DAY DISPENSE WEEKLY 56 TABLET	31/05/2019P	Dr Susan Cattnach	REPEAT

Past				
Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
17/09/2018	Quetiapine Fumarate Tablets 25 mg ONE TABLET WHEN REQUIRED UP TO TWICE DAILY 28 tablet	17/09/2018P	Dr Susan Cattnach	ACUTE
01/05/2018	Clarithromycin Tablets 500 mg ONE TO BE TAKEN TWICE A DAY 28 tablet	01/05/2018P	Dr Susan Cattnach	ACUTE
20/03/2018	Clarithromycin Tablets 500 mg ONE TO BE TAKEN TWICE A DAY 14 tablet	20/03/2018P	Dr J Sandra Wilson	ACUTE
15/12/2017	Phenergan Tablets 25 mg ONE TO BE TAKEN AT NIGHT 28 tablet	15/12/2017P	Dr J Sandra Wilson	ACUTE
15/12/2017	Flucloxacillin Capsules 500 mg ONE TO BE TAKEN FOUR TIMES A DAY 28 CAPSULE	15/12/2017P	Dr J Sandra Wilson	ACUTE
17/11/2017	Flucloxacillin Capsules 500 mg ONE TO BE TAKEN FOUR TIMES A DAY 28 CAPSULE	17/11/2017P	Dr J Sandra Wilson	ACUTE
27/10/2017	Zopiclone Tablets 3.75 mg ONE TO BE TAKEN AT NIGHT 7 TABLET	27/10/2017P	Dr Susan Cattnach	ACUTE
17/10/2017	Zopiclone Tablets 3.75 mg ONE TO BE TAKEN AT NIGHT 7 TABLET	17/10/2017P	Dr Susan Cattnach	ACUTE
22/09/2017	Mirtazapine Tablets 30 mg ONE TO BE TAKEN AT NIGHT 28 TABLET	22/09/2017P	Dr J Sandra Wilson	ACUTE
01/09/2017	Mirtazapine Tablets 30 mg ONE TO BE TAKEN AT NIGHT 28 TABLET	01/09/2017P	Dr J Sandra Wilson	ACUTE
01/09/2017	Zopiclone Tablets 7.5 mg ONE TO BE TAKEN AT NIGHT 7 TABLET	01/09/2017P	Dr J Sandra Wilson	ACUTE
11/08/2017	Mirtazapine Tablets 30 mg ONE TO BE TAKEN AT NIGHT 28 TABLET	11/08/2017P	Dr J Sandra Wilson	ACUTE
14/07/2017	Mirtazapine Tablets 15 mg ONE TO BE TAKEN AT NIGHT 28 TABLET	14/07/2017P	Dr J Sandra Wilson	ACUTE
14/07/2017	Flucloxacillin Capsules 500 mg ONE TO BE TAKEN FOUR TIMES A DAY 28 CAPSULE	14/07/2017P	Dr J Sandra Wilson	ACUTE
30/11/2016	Citalopram Hydrobromide Tablets 10 mg ONE TO BE TAKEN EACH DAY 28 TABLET	30/11/2016P	Dr J Sandra Wilson	ACUTE
10/05/2016	Ciprofloxacin Tablets 500 mg ONE TO BE TAKEN TWICE A DAY 14 tablet	10/05/2016P	Dr Susan Cattnach	ACUTE
10/05/2016	Co-Codamol 15/500 Capsules ONE OR TWO TO BE TAKEN FOUR TIMES A DAY WHEN REQUIRED 100 Capsule(s)	10/05/2016P	Dr Susan Cattnach	ACUTE
09/05/2016	Norethisterone Tablets 5 mg ONE TO BE TAKEN THREE TIMES A DAY 30 tablet	09/05/2016P	Dr Susan Cattnach	ACUTE
09/02/2015	Norethisterone Tablets 5 mg ONE TO BE TAKEN THREE TIMES A DAY 30 tablet	09/02/2015P	Dr J Sandra Wilson	ACUTE

File Status	Filed.	Tasks	No Tasks.
Assigned User	Dr Susan Cattanach	Filed By User	Ms Courtney Davidson
Patient Matched	Yes.	SCCRS Message Type	Exclusion

electronic Notification of Cervical Cytology Results Service

Exclusion Information

CHI Number	1207840483
Name	THOMSON, KAY
Date Of Birth	12/ 07/ 1984
GMC Code of Registered GP	3262010
Practice Code	F21435

Exclusion Reason	Defaulter
Exclusion Date	08/ 01/ 2016
Exclusion End Date	08/ 04/ 2018
Extended	No
Closed	No
Next Recall Date	03/ 04/ 2015

File Status	Filed.	Tasks	No Tasks.
Assigned User	Dr Susan Cattanach	Filed By User	Ms Courtney Davidson
Patient Matched	Yes.	SCCRS Message Type	Result

electronic Notification of Cervical Cytology Results Service

New Result

CHI Number	1207840483
Name	THOMSON, KAY
Date Of Birth	12/ 07/ 1984
GMC Code of Registered GP	3262010
Practice Code	F21435

Smear Taker	Lindsay Dailly
Reporting Location	VHK Cytology Fife

SCCRS ID	1369833286
Laboratory ID	16F1001619
Smear Taken Date	25/ 01/ 2016 00:00:00
Result	Negative (4K22.)
Report Comments	
Recommended Management	Routine Recall - 3 years
Recall Date	25/ 01/ 2019

Lab Report ID : S7888360\4 **Coding Status** : Not Coded
Filed By User : Ms Courtney Davidson **File Status** : Filed
Assigned to : **Task Status** : No Tasks

Patient Details : (11071) Kay Thomson DOB : 12/07/1984 CHI : 1207840483 SEX : F

ADR : 14 Craigie Gardens Ballingry

Report Text :

-Clinical Details: ? infection

SPECIMEN : First void urine

	Abn	Value	Units	Range	Status
--	-----	-------	-------	-------	--------

R Chlamydia trachomatis PCR

-In Fife, Chlamydia infection is most prevalent in
 -females under 25 and males under 30 years. Testing
 -should be restricted to patients in these age groups
 -unless there are risk factors for STI. When managing
 -non-pregnant females with vaginal discharge, please see
 -the NHS Fife algorithm "High Vaginal Swabs and the
 -Management of Vaginal Discharge".
 -[http://fife-lmc.org.uk/Supporting%20Papers/high%20vagi
 -nal%20swabs.pdf]

R	Chlamydia trachomatis....			NOT	NK
	...:	detected			

R Neisseria gonorrhoea PCR

-Note, only COBAS collection kits are suitable for
 -chlamydia testing. See NHS Fife intranet for more
 -information.

R	Neisseria gonorrhoea....			NOT	NK
	...:	detected			

Sample Collected Date : 16/11/2017 12:19:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 17/11/2017 12:21:00
Received Date : 20/11/2017 19:00:40
Requestor :
Requestor GMC Code :

File Status	Filed.	Tasks	No Tasks.
Assigned User	Dr Susan Cattanach	Filed By User	Ms Courtney Davidson
Patient Matched	Yes.	SCCRS Message Type	Result

electronic Notification of Cervical Cytology Results Service

New Result

CHI Number	1207840483
Name	THOMSON, KAY
Date Of Birth	12/ 07/ 1984
GMC Code of Registered GP	3262010
Practice Code	F21435

Smear Taker	Lindsay Dailly
Reporting Location	VHK Cytology Fife

SCCRS ID	1447135314
Laboratory ID	17F1021525
Smear Taken Date	16/ 11/ 2017 00:00:00
Result	Negative (4K22.)
Report Comments	
Recommended Management	Routine Recall - 3 years
Recall Date	16/ 11/ 2020

Lab Report ID : H7956521\5 **Coding Status :** Coded
Filed By User : Ms Courtney Davidson **File Status :** Filed
Assigned to : **Task Status :** No Tasks

Patient Details : (11071) Kay Thomson DOB : 12/07/1984 CHI : 1207840483 SEX : F

ADR : 14 Craigie Gardens Ballingry

**** ABNORMAL ****

Report Text :

-Clinical Details: altered behaviour , ? fit , low
 -mood , poor memory

SPECIMEN : Venous Blood

	Abn	Value	Units	Range	Status
R	Full blood count - FBC	Y			
	WBC	8.0	x10-9/l	(4-10 U)	NK
	RBC	3.87	x10-12/l	(3.8-4.8 U)	NK
	HGB	125.0	g/l	(120-150 U)	NK
	Hct	36.7	%	(36-46 U)	NK
	MCV	94.8	fl	(83-101 U)	NK
	MCH	32.3	pg	(27-32 U)	NK
	MCHC	341.0	g/l	(315-345 U)	NK
	PLT	266	x10-9/l	(150-410 U)	NK
	RDW	12.8		(11.6-14.0 U)	NK
	Neut	4.65	x10-9/l	(2.0-7.0 U)	NK
	Lymph	2.37	x10-9/l	(1.0-3.0 U)	NK
	Mono	0.77	x10-9/l	(0.2-1.0 U)	NK
	Eos	0.13	x10-9/l	(0.02-0.5 U)	NK
	Baso	0.03	x10-9/l	(0.02-0.1 U)	NK

Sample Collected Date : 15/12/2017 22:21:00

Collection Start Date :

Collection End Date :

Received by Lab Date : 16/12/2017 02:57:00

Received Date : 16/12/2017 11:00:10

Requestor :

Requestor GMC Code :

Lab Report ID : C7956521\5 **Coding Status :** Part Read Coded
Filed By User : Ms Courtney Davidson **File Status :** Filed
Assigned to : **Task Status :** No Tasks

Patient Details : (11071) Kay Thomson DOB : 12/07/1984 CHI : 1207840483 SEX : F

ADR : 14 Craigie Gardens Ballingry

Report Text :

-Clinical Details: altered behaviour , ? fit , low
-mood , poor memory

SPECIMEN : Serum

	Abn	Value	Units	Range	Status
R	Liver function test				
	Albumin	47	g/L	(35-50 U)	NK
	Alkaline phosphatase	56	U/L	(30-130 U)	NK
	Alanine transaminase	22	U/L	(5-55 U)	NK
	Bilirubin (Total)	3	umol/L	(0-21 U)	NK
R	Serum TSH level				
	TSH	1.02	mU/L	(0.27-4.2 U)	NK
R	Urea and electrolytes				
	Sodium	141	mmol/L	(133-146 U)	NK
	Potassium	4.1	mmol/L	(3.5-5.3 U)	NK
	Creatinine	66	umol/L	(50-100 U)	NK
	eGFR	> 60			NK
R	AKI				
	AKI	Not detected			NK
R	Serum C reactive protein level				
	C-reactive protein	< 0.3	mg/L	(0-5 U)	NK

Sample Collected Date : 15/12/2017 22:21:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 16/12/2017 02:57:00
Received Date : 16/12/2017 11:00:11
Requestor :
Requestor GMC Code :

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R	Blood glucose level				
	Glucose	4.7	mmol/L	(3.3-6.1 U)	NK

Sample Collected Date : 15/12/2017 22:21:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 16/12/2017 02:57:00
Received Date : 16/12/2017 11:00:11
Requestor :
Requestor GMC Code :

Medical Record Printout - Patient No: 11071

06 04 2021

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Pages:

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MARAC case number:	1646
Marac Date:	30/05/2024
Previous MARAC	1646: 23/05/2019
CAADA DASH Score	8

Victim Details

Name	Kay Thomson	DOB (s)	12/07/1984
Address (state if safe to send mail)	122 Navitie Park, Ballingry		
Postcode	KY5 8NJ		
Contact telephone numbers (mobile or landline)	07534010663	Safe to call?	Yes/No
Ethnicity	White		

Perpetrator details

Name (include any known alias)	Darren Johnstone	DOB (s)	31/10/1988
Address	53 Lamberton Place, St. Andrews or HMP Perth LAS/LCS	Relationship to victim	Ex partner
Postcode	KY16 8YF		
Ethnicity	White		
Bail Conditions (or other legal orders) in place:			

Children's Details:

Name/s	DOB	R'ship to victim	R'ship to perp	Address	School or Nursery
Skylar Thomson	13/01/2020	Daughter	Daughter	LAS Living with maternal grandmother in Edinburgh	Dunmore NS
Logan Johnstone.	29/06/2011	None	Son	8 Eden Grove, Guardbridge, St Andrews	Madras College
Aliyah Johnstone.	21/09/2009	None	Daughter	8 Eden Grove, Guardbridge, St Andrews	Madras College
Darren Johnstone.	03/09/2008	None	Son	8 Eden Grove, Guardbridge, St Andrews or 53 Lamberton Place, St Andrews LAS	Madras College

Ethical Information Sharing

An Information Sharing Protocol has been agreed by your organisations, details can be obtained from your MARAC Agency Representative or the MARAC Coordinator

Information is shared to:

- increase the safety, health and well-being of victim adults and their children;
- determine the risk posed by the perpetrator to any particular individual or to the general community;
- agree and implement a risk management plan that provides professional support to all those at risk;
- improve accountability and
- improve support for staff involved in high-risk domestic abuse cases.

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	week so no one would see their injuries. Kay later reported this incident to the Police. Kay advised Officers that her daughter, Skylar, was not present during this incident and was residing with her grandmother at the time. V: Injuries – 2 black eyes, cut to the back of her head, cut to her cheek and bruising to her chest (all as a result of this incident, however, Kay was unsure as to at what point he caused her to have 2 black eyes and she believes that the cut to the back of her head was when he pushed her either into the door or when she was sitting on the bed and he pushed her). Not frightened or afraid. Recent separation. Feels the abuse is getting worse due to him taking drugs. He is controlling / jealous – puts her down, jealous of what she does, he will sit with her phone and reply to her friend's text messages. Used a sword on this occasion. P: He has issues with drugs. He has a criminal history and has been in prison.
Concern Hub and DALO updates	Concern Hub Darren has a pending case for prison offence. He has a previous conviction for domestic S39 and assault to injury (prison). There have been 4 domestic incidents reported between Darren and a previous partner. There have been 2 domestic incidents reported between Kay and a previous partner. There have been 3 domestic incidents reported between Kay and Darren. DALO updates 06/05/24 - Karen telephoned Kay and discussed the recent incident with her. Kay stated that the relationship is now over and she wants nothing further to do with Darren. She stated that she has good support from her parents and they have encouraged her to report the incident and to end the relationship. Kay stated that Darren had attended her house on Friday and she told him to leave or she would call the Police and he left. Kay confirmed that Darren doesn't have a key for her house and she stated that her house is secure. She declined a HSR. Kay is not looking for any further advice, support or safety measures. Kay now has regrets in reporting to the Police as she fears the repercussions from Darren and being called a "grass". Discussed this with Kay and advice given. SOM on address.

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Fife Women's Aid/KASP	Suzie spoke to Kay on 21 May 2024 via telephone. Kay was made aware of the MARAC meeting scheduled for 30 May. Kay advises that she is aware of what that entails and is not looking for any support. She advises that she has home security measures in progress and that her ex-partner is out of the picture. She states she has good support from family and friends and is not looking for anything additional. She declined the offer to meet with Suzie, however, did accept the support line number should there be any change in circumstances.
SW – Child and Families	Skylar is currently open to Cowdenbeath Team 1 for assessment however recommendation is for a further period of involvement from Social Work. The initial referral was received from police, and it later emerged that Kay had self-harmed significantly on 31/3/24. Historically, there has been significant social work involvement due to concerns regarding domestic abuse and substance use as well as poor mental health. Kay and Darren have a significant history of domestic abuse within their relationship. Social Work have been involved historically and legal orders have been in place regarding Skylar living with extended family due to concerns. Skylar is currently staying with her maternal grandmother in Edinburgh by way of a family arrangement. Skylar has contact with Kay however this is monitored by the maternal grandmother. There is now no contact with Darren however he was until recently staying in the home. Kay has older children however they do not live with her. Risks: • Kay and Darren have an on/off relationship so there is potential for reconciliation • It is unclear what Skylar has been exposed to so far however she has spoken about hiding behind the sofa and feeling scared • Kay's poor mental health • Should Darren request contact with Skylar in the future, this could be a route into the relationship resuming Protective factors: • Skylar is currently safe in the care of the maternal grandmother • Kay has support from ADAPT regarding her alcohol use and is open to accessing further support for her mental health Other vulnerable children or adults in contact with the family: Kay's sister Erin and her 3 children

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	Kay's son Ryley has contact with Kay however lives with his paternal grandparents. Recent SWCC assessment for Darren's children and known no contact – any suggestion otherwise within MARAC would warrant further assessment.
Education	Skylar Thomson, Dunmore NS (perp and victim's child) Protective Factor • Named person aware of Domestic Abuse in the home • Both mum and Gran engage well with nursery • Gran is a protective factor. • Gran will increase care at times when it is required. • Skylar has a good relationship with her mum, there is a strong bond between them and mum is proactive in her care for Skylar. • Gran is nurturing towards Skylar • Previous Safety planning has happened Risks • Skylar has been present when Domestic Abuse has been occurring. • Mum's mental health can be poor and her relationships with her family and partners can be strained. • Skylar used to be with Gran full time, this has dropped to two days a week Logan Johnstone. Madras College Protective Factor • Named person aware of domestic abuse in the home • Mum supportive and in frequent contact with the school • Logan has a good relationship with his guidance teacher • Logan has a good relationship with his mum. is fiercely protective off her • Current safety planning exists, regular check min with staff, red list for period-by-period attendance, only to be picked up by mum Risks • Logan's attendance is 67% - peer issues and Logan has lashed out • Logan is fiercely protective of his mum • He has fall out with peers that spill into school Aliyah Johnstone. Madras College Protective Factor • Named person aware of domestic abuse in the home • Mum supportive and in frequent contact with the school • Aliyah is bright. • Aliyah has strong relationships with her support and pastoral staff • Aliyah has a good relationship with her mum and talks very highly of her

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	- Aliyah has regular check ins with support / pastoral staff, supportive strategies in the classroom, access to support in school - Current safety planning exists, regular check min with staff, red list for period-by-period attendance, only to be picked up by mum Risks - Aliyah has struggled to attend classes this year due to peer relations - Doesn't talk about her dad, she has struggled since finding out that he has had younger child with another woman Darren Johnstone. Madras College Protective Factor - Named person aware of domestic abuse in the home Mum supportive and in frequent contact with the school - Darren has a strong relationship with his guidance teacher - Darren has a good relationship with his mum ... is fiercely protective off her - Darren has strong relationships with her support and pastoral staff - Darren is very close with his Grandad and Uncle Thomas, often stays with Grandad - Current support in place – regular check ins with support staff, proactive management plan due to his behaviour, alternative curriculum, supportive strategies in classroom, access to nurture base in school - Current safety planning exists, regular check min with staff, red list for period-by-period attendance, only to be picked up by mum Risks - Darren's attendance is usually good but he has been known to truant. - Logan is fiercely protective of his mum - He has fall out with peers that spill into school - He did idolise his dad, but seldom speaks about him and has struggled since finding out that he has a younger child with another woman
NHS Fife	Kay Thomson: - Kay was last seen at her GP Surgery on 09.04.24 by Dr Paisley, Locum GP - GP states that Kay has a history of alcohol misuse, history of deliberate self harm and Benzodiazepine dependence. - Numerous A&E attendances over the past year relating to intoxication, self harm and suicidal ideation. Attended on March 31st following puncturing artery in her wrist – brought in by neighbour, states this was an accident with a wineglass. Required transfusion and re-presented in may 6 weeks later having intentionally cut the same area with a knife. - Diagnosed with bipolar disorder, depression and alcohol excess. Main support appears to be addictions. Their notes

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	from May 23rd show concerns that Kay had not been attending pharmacy and had not been answering calls from various services. They were able to reach her via SMS and also speak with her mum – states she is still taking some of her prescribed medications but not others. Recent relapse to alcohol use following detox noted. Darren Johnstone: - Darren was last seen at his GP Surgery on 20.04.23 by Kirsteen Anderson, ANP The Health Visitor for Skylar Thomson is Sarah Greenhalgh Telephone review took place on 08.04.24. Kay declined a face to face appointment and preferred a telephone review. Skylar was last seen at home in 2023, but seen recently at Dunmore nursery. - Skylar is on the core Health Visiting pathway due to things being stable at home previously. Gran Maria is a good source of support and ensures Skylar is kept safe. - Skylar is not due any further HV contacts as she is starting school in August. - Kay had consented for me to see Skylar at the nursery to gain a height and weight. Task/s: RMP to GPs for Kay & Darren. RMP to HV for Skylar
NHS Addictions	Kay Thomson Prescription details : (including Pharmacy and dispensing arrangement). Diazepam 30mg, dispensed daily Monday to Friday Keyworker: Maggie Law – new key worker as of May 2024. Seen 9/5/24 by key worker. Seen 15/5/24 by Consultant Psychiatrist Next appointment with key worker 30/5/24 Risk Factors - Alcohol and Diazepam dependence - Complex PTSD - Continues to drink alcohol in excess at times. - Young daughter lives at home. Kay's mum will often look after. - Often misses days at pharmacy, Kay has currently not been taking Diazepam for over a week and difficult to contact. Retention team have made contact. - Can be periods of time without contact Protective Factors - Social work input - Retention Team - Support from mum - Lives with young daughter and eldest daughter
Housing	Kay Thomson. 122 Navitie Park, Ballingry - Fife Council tenant wef 26/09/2022 3 bed house - HH members: Skylar Thomson DOB 13/01/2020 & Ryley Smith DOB 22/08/2010 (Stays with maternal grandmother, has contact with Kay but there are no concerns from CFSW)

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	• No significant arrears/repairs • No Homeless/Housing Applications Feedback from Area - Mobile and e-mail address given at sign up are both not active. Several home visits made to carry out Follow Up but no response to cards left. Got tenant at door on one occasion but refused to discuss as wasn't feeling well and would call to re-arrange when well enough. Never received any contact back from tenant. Darren Johnstone. Address Unknown • 53 Lamberton Place, St Andrews – Previous FC tenancy 19/09/2017 – 25/03/2018 • No other trace on our system
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OVERALL AGREEMENT

Through multi-agency discussion specific actions have been identified by the MARAC group. In addition to these identified actions overleaf. All agencies will;

- Share appropriate information with relevant person(s) within their organisations
- Highlight concerns where appropriate with a view to protecting the victim, any identified children, staff members or any other person who may be at risk of harm
- Continue with those actions considered to be 'standard business' not requiring formal tasking e.g. flag file on systems as a MARAC case for workers' safety and awareness
- Consult the agreed standard business tasks contained at the end of this document, to ensure 'normal business' is also ongoing around any additional tasking

It should be noted that responsibility for carrying out the actions identified lies with the agency representatives.

The following Representatives have reviewed this case and request that the noted actions are undertaken by partners:

Name	DESIGNATION	ORGANISATION
Claire Chrystal	Detective Sergeant	Police Scotland
Fiona Johnston	DALO	Police Scotland
Nicola Brown	DALO	Police Scotland
Diana Paterson	Team Manager	SW Criminal Justice Services
Sean McIntosh	Team Manager	SW Children and Families
Sharon Easton	Senior Practitioner	SW Adults
Kirsty Campbell	MARAC Co-ordinator	Fife Violence Against Women P'ship
Rebecca Sinclair	Social Work Assistant	Fife Violence Against Women P'ship
Annmarie Pocock	MARAC Worker/Advocate	Fife Women's Aid
Ana MacArthur (online)	Housing Professional	Housing and Communities

Observing – Karen Hathaway (GBV Nurse Professional, NHS);
Sandra Bendall (IDAA – FearFree), Andrew Russell (IDAA – FearFree)

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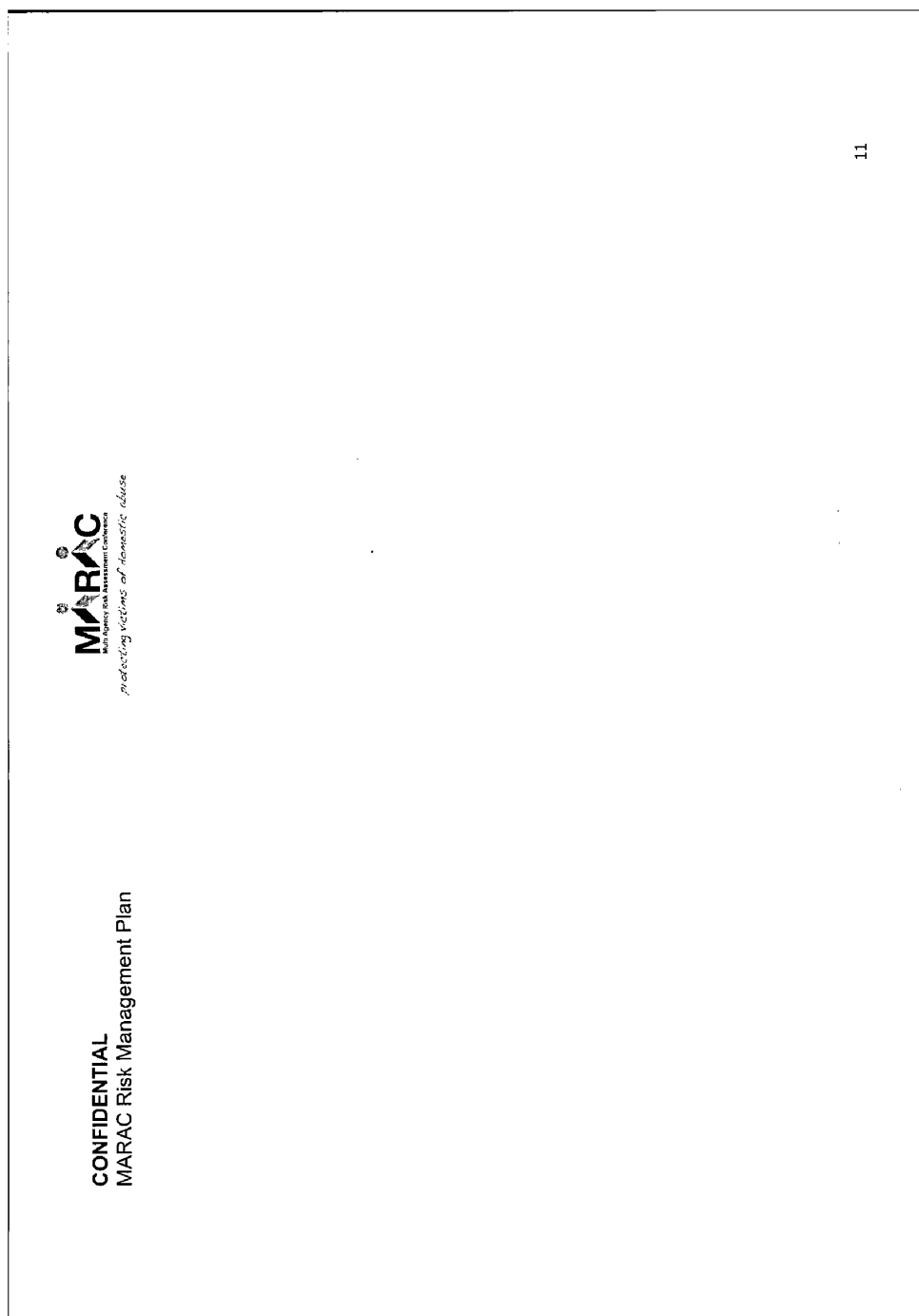
ACTION NO	RISK	TASK	AGENCY / REP	DATE FOR COMPLETION
SUMMARY	Perpetrator/victim perpetrator is Darren Johnstone, victim is Kay Thomson Residence They do not reside together Children They have a daughter together who resides with the victim, the perpetrator has 3 children to a previous relationship, who do not reside with him. Safety planning already conducted: SOM on address: Kay advises she has home security measures in progress	All agencies to review risk management plan and identify any tasks for their agency to reduce risk to victim, after meeting There is the possibility of reconciliation.	ALL	
1646/Thomson/01	Darren is suspected to be continuing a relationship with his (ex)wife. He is not registered on any tenancies and the victim reports he has been living between her and the (ex)wife's properties and maintaining a relationship with them both. Darren used a sword to assault his partner and is a high-risk domestic abuser.	DSDAS for perpetrator's (ex) wife, identity to be checked in Police/partner systems.	Police Scotland	13/06/24
1646/Thomson/02	Darren used a sword to assault his partner and is a high-risk domestic abuser.	VRMG entry for Darren and previous use of weapons (sword).	MARAC Coordinator	13/06/24
1646/Thomson/03	Skyilar, Logan and Darren (jnr) are Darren's children to a previous relationship. The level of contact is unknown and they are unlikely to be unaware of recent domestic abuse. Kay (victim) recently found out that Darren (perp) was still married to his ex-wife and was staying with her when he wasn't with Kay.	Review whether safety planning is required and communicate to MARAC/Education if required. If required following CFSW review: Madras College carry out safety planning with Logan Johnstone (29/06/11), Alayan Johnstone (21/09/09) and Darren Johnstone (03/09/2008).	CFSW	13/06/24
		Feedback to victim following meeting.	Fife WA	

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As agreed, routine tasks for each agency are as follows: Fife Women's Aid Attempt contact with all female victims discussed at MARAC (face to face where possible). Immediate support offered to female victims discussed at MARAC. Carry out SafeLives DASH risk assessment. Offer an individual support plan and safety planning. Police Domestic Abuse Liaison Officer will attempt to contact the victim and carry out safety planning. If no contact made with victim Safe and Well check will be carried out Referrals to relevant support agencies offered. STORM markers added. Home Security Review offered. Bail Review and Welfare Visits Assessment for victim re suitability for TecSOS alarm/ PPU mobile phone/ attack alarm Perpetrator Plan created (to monitor where perp residing, bail conditions, regular visits) In cases involving stalking or DASH legislation, request for a Non-Harassment Order will be sent in memo to Procurator Fiscal Consideration to Disclosure Scheme Domestic Abuse Scotland Where perpetrator has domestic incidents with more than two previous partners a referral for consideration at MATAC will be made Proactive investigation where historical incidents of abuse disclosed Checking re notification of MARAC cases to PF. Social Work Children & Families, Criminal Justice Services, Adults and Older People Victim, perpetrator and children's SWIFT files tagged to reflect discussed at MARAC Consideration of DANREs or DSDAS applications where appropriate RMP shared with allocated worker(s). Education Care and Welfare records updated to flag child discussed at MARAC	KASP Offer phone advocacy to all male victims referred to MARAC Safety planning NHS Fife Departments notified that case being discussed at MARAC (victim and perpetrator) Risk Management Plans shared with victim and perpetrator's GPs, Psychology, Psychiatry Risk Management Plans shared with Health Visitors and Midwifery Services If there is an unborn baby involved in MARAC discussion, health professionals will be identified, and they will be alerted that meeting taking place. Health Visitors will carry out assessment for any family with children below 5 years old, who are referred to MARAC. If victim or perpetrator have a chronic condition, assessment will be made whether there is a need for parts of RMP to be shared. NHS Addictions Risk Management Plan shared with allocated nurse. Victim RMP added to notes, not added to Perpetrator's. Paper notes tagged with MARAC marker. Third Sector Drug and Alcohol Services Risk Management Plan shared with organisation working with victim, perpetrator, or any children. Housing Sharing appropriate content of Risk Management Plan with Fife Council local area teams Adding alerts to housing application, homeless application and rent account of both victim and perpetrator Updating MARAC of any changes to addresses. Routine tasks are considered as part of the 'standard business' of each agency and therefore not formally tasked on the page prior. They are to be considered in every individual MARAC case.
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MARAC Risk Management Plan

MARAC
Multi-Agency Risk Assessment Centre
Protecting Victims of Domestic Abuse

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MARAC Risk Management Plan



This RMP should only be shared to enhance the immediate safety and wellbeing of the victim(s). Its contents are highly confidential and include sensitive information about multiple individuals. The Data Protection Act 1998 demands that careful consideration should be applied and justification evidenced, when deciding to share the contents both within your own organisation and other professional forums.

If you are unsure of where and to whom the information can be shared be with, consult your agency representative or the MARAC Coordinator.

If you require additional information to enable you to enhance the safety of this victim, their child(ren), or any other vulnerable adult then please contact your MARAC Representative or the MARAC Coordinator in the first instance.

Repeat Referrals to MARAC

If any agency is aware of a victim experiencing ongoing abusive incidents (does not require Police involvement) within 12 months of the last MARAC case discussion, they have a responsibility to make another referral to MARAC regardless if it meets MARAC referral criteria

Referring agency and reason for referral	Police, professional judgement
Police	Kay and Darren have been in an on/off relationship since 2017. They reside at separate address and have 1 child together, Skylar Johnstone. In November 2023 Darren got back in touch with Kay after two years of not speaking. Kay has recently found out that Darren is still married to his ex-wife and was staying with her when he wasn't with Kay. Due to this, Kay has ended the relationship. About 0500 hours on 20/04/24 Kay was asleep on the couch in her house when she was awoken by Darren, shouting and swearing at her asking why she was sleeping there. They began to argue and Kay has picked her dogs up and left, locking Darren in without realising. Kay went to her sister's house and on returning home later in the morning Darren accused her of being with other men. He pulled her trousers down and checked her underwear. Kay tried to stop Darren and he punched her in the chest causing her to go into the back door. She tried to get away from him and threw a child's seat at him. At the time Kay was unaware that Darren was keeping a sword in the kitchen on top of one of the cabinets. Kay went to her bedroom and Darren followed her and put the sword on the edge of the bed. He then Placed the sword against Kay's left cheek and she could feel blood running down her face. Kay stated to Darren if he was going to do it, to just do it. Darren then assisted in helping Kay up and cleaning her. Darren cut some of Kay's hair out as it was badly matted with blood. Darren then punched himself in the face multiple times. Darren and Kay then agreed that they would not leave the house for a

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Halbeath Road
Dunfermline
Fife
KY11 4UW

NHS Fife Community Services
NHS Fife Addiction Services
Tel: 01592 716446
<http://www.nhsfife.scot.nhs.uk>

**Fife Health
& Social Care
Partnership**



Dr T Malham
Benarty Medical Practice
54-58 Lochleven Road
Lochore
Fife
KY5 8DA

CLINIC LETTER

CHI: 1207840483

Letter ID: 5542081

Dear Dr Malham

Clinic Date: 04/06/2024

Date: 10/06/2024

Kay Thomson, 122 Navitie Park, Ballingry, Lochgelly, Fife, KY5 8NJ**Date of Birth: 12/07/1984**

I write to let you know that I reviewed the above lady in clinic on 4th June 2024. I saw her with Leanne from the Retention team and her named nurse Maggie. Kay was visibly intoxicated at her appointment mainly through alcohol with a "Breath Alcohol" of 1.22 and drug testing showing benzodiazepines and cocaine. Kay told us she had 1/2 of bottle prior to the appointment and had drunk 3 bottles of vodka the day before; 2 days prior to that on Saturday night she drank copious amounts of alcohol and had taken cocaine. She was vague around the other aspects of her substance use; I think due to her intoxication more than intent to mislead.

Kay said that she had made a terrible mistake, and after our last appointment due to concerns about social work she stopped her diazepam appointment, she had felt very unwell through this. She tells me that she has been compliant with her fluoxetine.

We discussed the following plan:

1. It was difficult to fully care plan today due to Kay's intoxication and emotional instability. She was initially resistant to doing any form of testing fearing it would be shared with social work (which it will) but was reassured that it was in fact required to determine the correct treatment plan for her. She was frequently volatile through the assessment and presented a very concerning picture.
2. After some discussion I have restarted Kay at a lower dose of diazepam 20mg daily dispensed. Looking back through her case it could be stated that she was more stable when on this prescription.
3. I recommend continuation of fluoxetine at a dose of 40mg daily. Underpinning much of Kay's substance use is trauma and anxiety symptoms which are undertreated.
4. I have suggested to Kay she consider residential rehabilitation, Maggie will liaise with FIRST and complete a referral.
5. Maggie also plans to liaise with Kay's social worker Rochelle Hunter, we need to share details of how she presented today and concerns around her presentation.
6. I hope to see Kay again soon; she will be reviewed frequently by the nursing team.

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www.fifehealthandsocialcare.org



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Yours sincerely

Claire McIntosh
Consultant Psychiatrist

Authorised on 25/06/2024 10:45:31 by Claire McIntosh.

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Acute Services Division



V Emergency Department

T Malham
21421/1
Benarty Medical Practice
54-58 Lochleven Road
Lochore
Fife
Lochgelly
KY5 8DA

Victoria Hospital
Hayfield Road
Kirkcaldy
KY2 5AH

Dear Doctor

Miss Kay Thomson
122 NAVITIE PARK
BALLINGRY
Lochgelly
KY5 8NJ

CHI: 1207840483
ED Consultant: Dr Claire Moggach

The above patient attended the V Emergency Department on 22/07/2024 at 21:39. I outline below some information regarding this attendance.

Present Complaint: ASSAULTED - HEAD/FACIAL INJ NEWS 0 CALL 3200

Diagnosis:			
Description	Body Site	Laterality	Comments
ED injury - Wound - Laceration	Head		

Investigation(s)/Treatment(s):

Medication(s):

Additional Notes (for GP):
GP action required: None

PC - assaulted, head injury

Pt reports a friend came round to her house who was distressed and agitated. He has MH issues. He broke through her door. She tried to calm him down but he started to attack her. Has punched her multiple times to face and dragged her by her head around the flat
No LOC, no vomiting, no amnesia
Has a cut to lip and multiple bruises to head.

Created on 23/07/2024 05:29 by Dr Christina Evans ST5

Version 1

Page 1 of 2

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Acute Services Division



Feels bruised to arms but nothing else broken
The police were called and have removed him
She will be going back home with her Dad

PMH - alcohol XS - not drunk recently, low mood
Social - lives alone

o/e
GCS 15
CN intact
PEARL
Moving neck pain free
Moving all 4 limbs pain free
0.5cm laceration to back of head on the right - cleaned and closed with glue
A couple of bruises to scalp. no boggy swelling
laceration to upper lip approx 1.5cm. just through vermillion border and splits in to v shape in lip

Imp - head injury with no indication for CT head
small lac to head closed with glue
lip lac cleaned and closed with 4 dissolvable sutures
d/c home with wound care advice and head injury advice

Senior Review:
Senior Review Comments:

Yours sincerely
Dr Christina Evans ST5

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Kay Thomson 1207840483

Claire McIntosh (NHS Fife) <claire.mcintosh7@nhs.scot>

Tue 06/08/2024 07:15 AM

To:Benartymedicalpractice (Beharty Medical Practice (21421)) <Fife.f21421benarty@nhs.scot>

Cc:Margaret Law (NHS FIFE) <Margaret.Law2@nhs.scot>

Dear Dr,

I reviewed the above lady in clinic yesterday, I will send a full letter.

She states she has been abstinent from alcohol for 17 days, she denied any drug use but had benzodiazepines in her testing.

She has significant low mood and sleep problems. After some discussion with Kay, can I please request that you prescribe her mirtazapine 15mg nocte. She requests to collect the prescription from Dears in Lochore, I would recommend weekly dispensing.

Thank you,

Dr Claire McIntosh
Consultant Addiction Psychiatrist
Fife Addiction Services
Campsie Clinic
Lynebank Hospital
Dunfermline
KY11 4UW

Working days for NHS Fife: Monday to Wednesday

Secretary: Rachel Stephens - extension 35618.

NHS Fife Addiction Services - 01592 716446 ext 2 for Lynebank Hospital

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NHS Fife Addiction Services
Tel: 01592 716446
<http://www.nhsfife.scot.nhs.uk>

**Fife Health
& Social Care
Partnership**



Dr T Malham
Benarty Medical Practice
54-58 Lochleven Road
Lochore
Fife
KY5 8DA

CLINIC LETTER

CHI: 1207840483

Letter ID: 5616185

Dear Dr Malham

Clinic Date: 05/08/2024

Date: 08/08/2024

Kay Thomson, 122 Navitie Park, Ballingry, Lochgelly, Fife, KY5 8NJ**Date of Birth: 12/07/1984**

I write further to my recent email that I saw the above lady in clinic on 5th August 2024. I was accompanied by her named nurse, Maggie and Gayle from the Retention Team. Kay breathalysed at zero but was positive for benzodiazepines and opiates on drug testing. When I saw Kay she was not on any prescribed medication and had not taken fluoxetine for a couple of weeks. She initially denied any substance use and continued to maintain she had not used benzodiazepines but laterally admitted using co-codamol to try and help her sleep. She denied alcohol for 17 days and stated that she stayed in the house to avoid substances and was very cross to find benzodiazepines in her testing.

Kay has marked mental state disturbance with poor sleep and recurrent thoughts and low mood. She described ongoing dissociated episodes and denied suicidality at our meeting but did have previous thoughts of this. She spoke emotively of an incident where a man broke into her house and assaulted her. She was sober when this happened and she spoke of how her brain was processing this trauma differently. She described her anxiety being through the roof and it being hard to go out but spoke of supportive family input.

Kay discussed that her daughter is now going to be based in Edinburgh. Re-establishing contact with her daughter is a major motivating fact for her addressing her substance use. Kay described her goals of staying sober and learning how to deal with emotions sober which sounded very apt.

We discussed the following plan:

1. The Retention Team plan to up visits to get Kay out and about and we looked at wider psychological interventions such as the relapse prevention group Fast Forward.
2. Maggie will refer Kay to FIRST for residential rehabilitation.
3. We looked at pharmacological ways to maintain Kay's abstinence. She has clear untreated mental disorder and after some discussion we have opted for a trial of mirtazapine 15 mg nocte to try and help her sleep and mood. I plan to review her again soon to look at perhaps the

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addition of an SSRI to try and help her anxiety and traumatic re-experiencing. As indicated in my email she has asked if we can pick her prescription up from Dears in Lochore.

4. There was no indication for further diazepam prescription in Kay's case.
5. Kay is interested in disulfiram. I have cautions around use of this medication due to Kay's impulsivity and non-compliance with medication.
6. As above I will review Kay in 6 weeks. She will have an increase in frequency of nursing appointments in the interim.

Yours sincerely

Claire McIntosh
Consultant Psychiatrist

Authorised on 11/08/2024 21:42:56 by Claire McIntosh.

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**Fife Health
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Dr T Malham
Benarty Medical Practice
54-58 Lochleven Road
Lochore
Fife
KY5 8DA



CHI: 1207840483

Letter ID: 5658296

Date: 16/09/2024

Dear Dr Malham

Kay Thomson, 122 Navitie Park, Ballingry, Lochgelly, Fife, KY5 8NJ

Date of Birth: 12/07/1984

I write to let you know that the above lady did not attend an appointment with me today the 9th September 2024. Kay has in fact missed a number of appointments with both myself and her named nurse Maggie. This is despite the attempts of the Retention team. We have been advised that Kay is alive and well and actively using substances.

We therefore considered discharge from our services. Kay has however shown better engagement with the retention team – we will offer her further assessment from the service.

Yours sincerely

Claire McIntosh
Consultant Psychiatrist

Authorised on 02/10/2024 16:55:27 by Claire McIntosh.

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Whyte, Kayleigh

From: Wood, Emily
Sent: 09 December 2024 16:55
To: Clinical GP Leith Mount Surgery
Subject: Prescription Request- K T 12/07/84

Hello,

Thomson	Kay	EDD 24/06/2025	40 Yrs	Current Gestation: 11w 6d	Parity 3 + 0	Care Provider	Dr C 1
---------	-----	----------------	-----------	------------------------------	--------------	------------------	-----------

Please can you provide an **Aspirin 150mg nocte** prescription for the above patient **from 10/12/24 for the duration of her pregnancy** due to **maternal age of 40 years** at booking appointment today.

Many thanks,

Best wishes,

Emily Wood
(She/Her *What are pronouns?*)

Team Leader
North East (Leith) Community Midwifery Team
Leith Community Treatment Centre
12 Junction Place
EH6 5JQ

0131 5366453 / 07765233184



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APPLICATION TO REGISTER PERMANENTLY WITH A GENERAL MEDICAL PRACTICE

ALL FIELDS MARKED * ARE MANDATORY AND MUST BE COMPLETED AS FULLY AS POSSIBLE

1. PERSONAL DETAILS

Is this your first registration with a GP Practice in the UK?

Yes ☐ No ☒

Will you be in the area for more than 3 months?

Yes ☒ No ☐

(If 'No', please complete a temporary resident form)

Male ☐ Female ☒

Date of birth *

12/7/1984

Title *

Miss

Surname *

THOMSON

Forenames *

KAY

Previous surname *

Address *

39 Mitchell Street
flat 7.
Leith

Postcode *

Eh6 7ar.

Telephone #

07534 010 663

Mobile #

Email address # Kthomson087@gmail.com

the data supplied in these fields will not be input to, or updated in, the Community Health Index (CHI), but will be held on the GP Practice's system.

The following information can be found on your current medical card:

Community Health Index (CHI) number *

NHS number *

The following information can be found on your birth certificate:

Town of birth *

Kirkcaldy

Country of birth *

Fife

Registered district of birth
(Scotland only)

Scotland.

Mother's maiden name

O'Hare.

2. HELP US TO TRACE YOUR PREVIOUS GP HEALTH RECORDS BY PROVIDING THE FOLLOWING INFORMATION

Address in UK when you were last registered with a GP *

122 Navitie Park
Ballingry

Postcode *

KY5 8NJ.

Name and address of previous GP Practice in UK *

Lochore Medical Practice
54-58 Lochleven Rd. Lochore

Postcode *

KY5 8DA.

If you are from abroad: ☒

Date you first came to live in the UK *

If previously resident in the UK, date of leaving *

Your most recent country of residence

If you have served in the British Armed Forces:

Service Number

Enlistment date *

Are you a Reservist?

Yes ☐ No ☒

If yes provide your address before enlisting *

Leaving date *

Postcode *

Is this your first registration with a GP since leaving the armed forces?

Yes ☐ No ☒

GMS00001 V27.1 2021

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3. VOLUNTARY AUTHORISATION FOR ORGAN OR TISSUE DONATION

You have a choice about organ or tissue donation after your death. To find out more about why it is important that you take the time to make your donation decision and record it, go to www.organdonationscotland.org

4. HOW WE USE INFORMATION

The information you have provided will be used by NHS Scotland to carry out its various functions and services including scheduling appointments, ordering tests, hospital referrals and sending correspondence.

Your information, including your name, gender, date of birth and address, will be passed to NHS National Services Scotland where it will be held on the Community Health Index (CHI). This information is used to register you with the GP Practice, transfer your medical records between GP practices in the UK, make payments to GP Practices for medical services provided, and to process and issue medical exemption certificates and entitlement cards.

NHS National Services Scotland shares information about you within NHS Scotland to assist in the provision and improvement of NHS services and the health of the public. When we do this, we do it as described by NHS Scotland in the NHS Inform website under the "How the NHS handles your personal health information" section.

NHS Scotland is made up of various organisations such as NHS Health Boards, GP practices, the Scottish Ambulance Service or NHS National Services Scotland (the common name of the Common Services Agency for the Scottish Health Service). These organisations are individually responsible for your personal health information. In terms of data protection and privacy laws, they are known as 'data controllers'.

Find out more about NHS Scotland in the link provided above.

5. PATIENT DECLARATION

I declare that the information I have given on this form is correct and complete. I understand that, if it is not, appropriate action may be taken. To enable NHS National Services Scotland to confirm my eligibility to lawfully register with a GP and for the purposes of prevention, detection, and investigation of crime, the minimum necessary information from this form could be disclosed to relevant authorities.

I understand that more comprehensive information about how NHS Scotland handles my data is available from NHS Inform.

This information can be provided in other languages and formats on request. The NHS Inform helpline provides an interpreting service.

Patient / Patient's representative signature

K. Thomas

Date *

4/12/2024

Representative's name (if applicable)

Relationship to patient (if applicable)

6. FOR PRACTICE USE

GP reference number

GP name

Practice code

Identification seen – do not take or retain photocopies

Please initial each relevant box (it is recommended that at least one form of the identification is seen to positively identify the applicant although it is not mandatory to provide identification to register)

Birth cert ☐ Student ID card ☐ Driving licence ☐ Passport or HC2 cert ☒ Home Office app reg card ☐ Other / None ☐

Temporary agreement

I accept this patient onto the practice list and declare that, to the best of my knowledge, this information is correct. I acknowledge that the details may be authenticated from appropriate records, and that payments generated from this patient registration will be subject to Payment Verification.

Authorised Practice signature

Date *

7. FOR OFFICIAL USE ONLY

Input by

Checked by

Date

Practice stamp

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Leith Mount Surgery

Confidential Form

QUESTIONNAIRE FOR NEW PATIENTS

(Please note: it is important to be as accurate as possible when filling out this questionnaire)

Title: MISS Date of Birth: 12/7/84
 Name: Kay Thomson Gender: female
 Address: (inc. flat number) 39/7 Mitchell Street Telephone: 07534 010 663
Leith Relationship Status: With Partner
 Postcode: EH6 7ar. Occupation: —

Have you been registered here before? Yes (No)If you were previously registered with the Practice and have changed your surname, please tell us your previous surname (your details will be already stored on our system).

Next of kin
 Name: Reece Paterson Telephone No. 07930 916 788
 Address: Maria Thomson Relationship to you: Partner
31 Eastfield Toppa Mother
EH15 2PN.

Appointment Text Reminder Service:

Do you wish to receive text reminders for appointments and clinics at the surgery? (YES) / NO

Please indicate your ethnic group and country of birth:

- | | |
|--|--|
| ☒ White Scottish | ☐ Asian - Indian |
| ☐ White British | ☐ Asian - Pakistani |
| ☐ White Irish | ☐ Asian - Bangladeshi |
| Other white background (please state) | ☐ Chinese |
| | Other Asian background (please state) |
| ☐ Black Caribbean | |
| ☐ Black African | ☐ Mixed race |
| Other Black background (please state) | Any other ethnic group (please state) |

We can arrange an interpreter if you need one.

Please state the language you require: NA

Do you have problems reading and writing in English: YES / NO

Do you require a sign language interpreter: YES / NO

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Medical InformationCurrent Medical Problems/Illnesses/Mental health issues (please supply dates)~~SAH~~ BPD

Pregnant. ☺

Serious Illnesses in the Past

Serious Illnesses	Date
N/A	

Any Operations (if not mentioned above)?

Operations	Date
NA	

Do You Have Any Allergies?(Please include **drug allergies** and **non drug allergies** e.g. penicillin, peanuts, eggs, bee sting, pollen etc)

Have you had a reaction to a vaccination?

No

Please check if you are eligible for the Flu Vac. It could save your life.**FAMILY HEALTH:**

Are you aware of any hereditary diseases in your family?

N/A

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P

CARERS:

Please indicate if you are an unpaid carer (i.e. you voluntarily provide continuing care for someone who could not manage without your help) (Please Circle) Y / N

What is the age of the person you care for? ____ What is their relationship to you? _____

What is their disability? _____

Regular Medication: Please give details of medication that you have been taking on a regular basis, so that we can put this on our computer for your repeat prescriptions. **PLEASE ATTACH THE PRESCRIPTIONS LIST FROM YOUR PREVIOUS DOCTOR**

Name of Drug	Dosage (if known)	Date Started
Mirtazapine 30mg	Daily	
Paroxetine 40mg		

Drug use Never ____ Previously [but not now] ____
 Yes ____ What do you take _____

Are you on a prescription for methadone, dihydrocodeine, or diazepam for addiction problems?

If Yes please state which drug(s): _____

(Please circle or tick your answers)

DO YOU SMOKE? ☒ NEVER Vape
☐ YES PIPE / CIGARS / CIGARETTES
 How many per day? _____
☐ STOPPED When? _____

DO YOU DRINK ALCOHOL? ☒ YES How much alcohol do you drink weekly?
☐ NO _____ PINTS _____ GLASSES WINE/SHERRY
 _____ SHORTS (Gin, Vodka, etc.)

HEIGHT 5ft 4 1/2 WEIGHT 11 stone

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Child Health & Wellbeing

In order to help us identify children who may benefit from extra support:

Is your child on the child protection register?	
Has your child previously been on the child protection register?	
Does anyone living in your household use non prescribed drugs?	
Does anyone living in your household have a regular prescription for methadone or diazepam?	
Does anyone living in your household drink alcohol to excess?	

Females Only

Number of Children: _____

Are you pregnant at the moment: Y/N No of weeks? 11.3 days Expected date of delivery: 24/6/25
Please Circle

Please give details of any miscarriage, termination or still birth: _____

Have you had a Hysterectomy: Y/N Date of Operation _____
Please CircleDate of Last Smear: 4 yr ^{plus} (Month & Year) Country where taken: _____Smear Result: Normal Abnormal When is your next smear due? _____
Please Circle**ALL PATIENTS**

Please sign and date below:

Signed K Thompson Date 4/12/24

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Registration Details

Personal details...		Address details...	
Date of birth	12/07/1984	Post Code	KY5 8NJ
Sex	F	House Name Flat No	
Surname	Thomson	No and Street	122 Navitie Park
Previous Surname		Village	Ballingry
Forenames	Kay	Town	Lochgelly
Calling Name	Kay	County	Fife
Title	Miss		
Birth Surname			
Marital Status	Single		
Ethnic Origin			

HA/HB Details...		Contact details...	
Trading partner	Fife	Home Tel No	07534010663
Registered GP	Dr Susan Filsell	Work Tel No	
Usual GP	Dr Susan Filsell	Mobile Tel No	
Residential Inst		E Mail Address	
Branch Surgery	Benarty Medical Practice	Next of Kin	
CHI Number	1207840483		
NHS Number	426/84/056		

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	20/06/2024		

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

Medical Record Summary Printout - CHI Number: 1207840483

10/12/2024

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Problems

Active Problems		Authorised By	Code
30/05/2024	Subject of multi-agency risk assessment conference	Mrs Simon	13Hm
28/09/2018	[X]Emotionally unstable personality disorder	Mrs Simon	Eu803

Past Problems		Authorised By	Code
12/04/2024	Did not attend - no reason	Mr Palomba	9N42
28/07/2023	H/O: deliberate self harm street valium and injected household bleach IV	Mrs Simon	146B
28/07/2023	Intoxication - alcohol	Mrs Simon	E250-4
13/01/2020	Spontaneous vertex delivery female	Mrs Simon	Ly0
30/05/2019	Subject of multi-agency risk assessment conference	Mrs Simon	13Hm
25/04/2019	H/O: deliberate self harm cut to neck	Mrs Simon	146B
14/03/2019	Intoxication - alcohol	Mrs Simon	E250-4
14/03/2019	H/O: recreational drug use	Mrs Simon	146E
01/06/2018	Overdose of drug paracetamol	Mrs Simon	SL-5
11/10/2017	Overdose of drug acute intoxication due to multiple drug use and use of psychoactive substances	Mrs Simon	SL-5
11/10/2017	[D]Seizure NOS	Mrs Simon	R003z-1
29/11/2014	Termination of pregnancy	Mrs Simon	L05-2
23/08/2012	Depressive disorder NEC	Mrs Simon	E2B
18/01/2012	Termination of pregnancy	Mrs Simon	L05-2
21/08/2010	Spontaneous vertex delivery male	Mrs Simon	Ly0
22/07/2003	Spontaneous vertex delivery female	Mrs Simon	Ly0
12/10/1999	Drug dependence	Mrs Simon	E24
12/10/1999	H/O: behaviour problem	Mrs Simon	1469
05/03/1998	Overdose of drug	Mrs Simon	SL-5

Health Admin Problems		Authorised By	Code
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Page 3

Values

Values			
Date	Last Entry	Normal Range Indicator	Normal Range
06/03/2023	Body Mass Index 26.79		20-25
06/03/2023	O/E - weight 69 Kg		
06/03/2023	O/E - height 160.5 cm		10-250
06/03/2023	Blood pressure reading 136/86 mm Hg		
16/11/2017	Cervical smear: negative		

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Page 4

Attachments

Attachments		Authorised By	Code
19/01/2023	eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: mental health problems, Duration: 06/01/2023 - 03/03/2023) FitNote_09fb0827-51d8-41e3-ae19-026583acc6026.pdf	Dr Malham	8D15
06/01/2023	eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: mental health problems, Duration: 06/01/2023 - 03/03/2023) FitNote_2ee75e83-03a0-4c28-ae64-8c89387dbfc1.pdf	Dr Malham	8D15
02/10/2020	Attachment NPM Letter NPM Letter.doc	Mrs Simon	EMISATTACHMENT

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Due Diary Entries

Due Diary Entries		Authorised By	Code
12/07/2049	Influenza vaccination	Dr Filsell	85E..
07/02/2025	Medication review	Pham Rose	8B314

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Overdue Diary Entries

Overdue Diary Entries	Authorised By	Code
16/05/2021 Cervical smear due OVERDUE SCORS Recall	INTERNAL INTERNAL USER	685F.

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Alerts

Alerts	Authorised By	Code
None		

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Drug Allergies

Drug Allergies	Authorised By	Code
None		

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Non-Drug Allergies

Non Drug Allergies	Authorised By	Code
None		

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Family History

Family History	Authorised By	Code
None		

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Referrals

Referrals		Authorised By	Code
03/04/2024	Discharged from hospital	Pham Whyte	8HE
31/07/2023	Discharged from hospital	Mrs Thomson	8HE
01/02/2022	Other follow-up if required	User 02	8HB
01/02/2022	Referral for further care	User 02	8H

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Immunisations

Immunisations	Authorised By	Code
05/08/2019 Booster diphth, tetanus, acellular pert, inactive polio vacc	Mrs Simon	6518

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Health Status

Health Status	
16/11/2017	Cervical smear result Cervical smear: negative
01/06/2021	Notes summary on computer
06/03/2023	Height 160.5 cm
06/03/2023	Weight 69 Kg
06/03/2023	Body Mass Index 26.79 kg/m2
06/03/2023	Blood pressure reading 136/86 mm Hg

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Miscellaneous

Other Observations	Authorised By	Code
11/11/2024 Telephone encounter	Mrs Thomson	9N31
11/11/2024 Pharmacists	Mrs Thomson	03G
06/08/2024 Medication review	Dr Filsell	8B314
06/08/2024 Failed encounter	Pharm Rose	9N4
06/08/2024 Pharmacists	Pharm Rose	03G
06/08/2024 Medication started mirtazapine	Pharm Rose	8B313-1
06/08/2024 Other medication management switched fluoxetine to weekly dips with mirtazapine	Pharm Rose	8BM
06/08/2024 Outpatient clinic letter received Date: 06/08/24 Lynebank hospital, Addiction services Specialist: Dr Claire McIntosh	Pharm Rose	9N3D2
16/05/2024 Outpatient clinic letter received	User Allan	9N3D2
16/05/2024 Pharmacy technician	User Allan	03K9
12/04/2024 Failed encounter DNA CTAC Appointment	Mr Palomba	9N4
03/04/2024 Previous treatment continue unchanged no changes to long term medication	Pharm Whyte	8B4
31/07/2023 Pharmacists	Mrs Thomson	03G
31/07/2023 Previous treatment continue unchanged no changes to long term medication	Mrs Thomson	8B4
25/07/2023 Failed encounter DNA CTAC Appointment	Ms Adamson	9N4
08/02/2022 Cervical smear defaulter	Miss Ewens	9O8S
08/02/2022 Cervical smear refused	Miss Ewens	8B5L
08/02/2022 Cervical smear defaulter Exclusion From SCCRS Until 09/05/2026. Reason: Defaulter	Miss Ewens	9O8S
01/02/2022 New appointment	User 02	9NY0
01/02/2022 No thoughts of self harm Kay noting no thoughts of self harm or suicidal ideation	User 02	EMISHGT231
01/02/2022 Telephone encounter	User 02	9N31
01/02/2022 No apparent risk of suicide	User 02	1S8
01/02/2022 History / symptoms emotionally unstable personality disorder	User 02	1
01/02/2022 [X]Emotionally unstable personality disorder (REVIEW)	User 02	Eu603
01/02/2022 Follow-up encounter	User 02	9NV
01/02/2022 Failed encounter	User 02	9N4
01/02/2022 Telephone encounter	User 02	9N31
11/01/2022 New appointment	Miss Still	9NY0
11/01/2022 Telephone encounter	Miss Still	9N31
01/06/2021 Notes summary on computer	Mrs Simon	9344
23/03/2021 Appt cancelled by patient for bloods today	Mrs Simon	9N47
16/09/2020 White Scottish	Mrs Simon	9S13

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Consultations

Consultations	
18/11/2024	<u>Dr T Malham at Benarty Medical Practice</u>
Medication	Mirtazapine Tablets 30 mg 28 <i>TABLET ONE TO BE TAKEN AT NIGHT</i> moving to leaith to be near mum im 2/52-council house swap. has been d/c by add services last week, off alcohol, methadone, diazepam. feeling really well. on fluoxetine and mirtazapine, they are working overall but no longer sleeping, and packing/move is quite stressful. discussed. would like to try incr mirtazapine. on weekly disp pick up Friday, unsure how much left to run of current Rx. last issued 25/10. 1/12 issued annotated to start this Fri 22/11, and cancel any remaining weekly Rx.
Comment	
11/11/2024 14:10	<u>Mrs Loma Thomson at Benarty Medical Practice</u>
Comment	Pharmacists Telephone encounter Patient advises she missed her collection on Friday and last week she was in Aberdeen but has been to Dears this morning to collect her medication. Now back on track with weekly collections. Patient reports to be doing well.
11/11/2024	<u>Miss Zoe Ewens at Data Entry</u>
Comment	msg from ballingry pharm - hasn't picked up the last 2 weekly scripts
04/09/2024	<u>Dr Susan Filsell at Special Request</u>
Comment	quetiapine requested-not had for a while and is under addictions psych- would be ebst if she discussed with them
03/09/2024	<u>Mrs Gillian Simon at Data Entry</u>
Comment	pharmacy informed of below
02/09/2024	<u>Dr T Malham at Data Entry</u>
Comment	see below. can collect the next one due (not the ones she has missed)
02/09/2024	<u>Miss Zoe Ewens at Data Entry</u>
Comment	u/c from pharmacy hasn't collect weekly scripts for 2 weeks - asking to do so now ? ok
06/08/2024 11:56	<u>Pham Jane Rose at Benarty Medical Practice</u>
History	Outpatient clinic letter received Date: 06/08/24 Lynebank hospital, Addiction services Specialist: Dr Claire McIntosh Request for mirtazapine to be prescribed weekly - Patient is already on fluoxetine therefore changed this to weekly in order to aid compliance. Patient requested dears lochore for collection. Failed call - VM left to contact surgery to advise that dears lochore now has Rx for medication as requested from clinic Other medication management switched fluoxetine to weekly dips with mirtazapine Medication started mirtazapine Pharmacists Failed encounter
Medication	Mirtazapine Tablets 15 mg 28 <i>TABLET ONE TO BE TAKEN AT NIGHT</i> Fluoxetine Hydrochloride Capsules 20 mg 56 <i>CAPSULE TWO CAPS DAILY</i>
20/06/2024	<u>Dr T Malham at Data Entry</u>
Medication	Fluoxetine Hydrochloride Capsules 20 mg 2*30 <i>capsule TWO CAPS DAILY</i>
Comment	under psych r/v
16/05/2024 10:01	<u>User Pauline Allan at Benarty Medical Practice</u>
Comment	Pharmacy technician
Additional	Outpatient clinic letter received E-Mail addiction Service 15.5.24 - Accamprosate no longer prescribed
15/05/2024	<u>Dr Susan Filsell at Benarty Medical Practice</u>
Comment	see email
Medication	Fluoxetine Hydrochloride Capsules 20 mg 2*30 <i>capsule ONE TO BE TAKEN EACH DAY FOR THREE DAYS THEN TWO TABLETS DAILY</i>
12/04/2024	<u>Mr Rosario Palomba at Benarty Medical Practice</u>
Problem (FIRST)	Did not attend - no reason
Additional	Failed encounter DNA CTAC Appointment

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09/04/2024 10:28	<u>Dr Jonathan Paisley at Benarty Medical Practice</u>
History	See recent episode of significant self-harm. Requesting 'mood stabilising' drugs. Remains abstinent. Attends addiction services for prescribed medication but missed last appointment. Previous medications noted.
Comment	Suggest trial of SSRI - fluoxetine. Reassured her that it is not addictive or likely to cause tolerance. r/v in 4 wks.
Medication	Fluoxetine Hydrochloride Capsules 20 mg 28 CAPSULE ONE TO BE TAKEN EACH DAY
03/04/2024 10:19	<u>Pham Samantha Whyte at Benarty Medical Practice</u>
Comment	Previous treatment continue unchanged no changes to long term medication. Patient discharged from hospital with Flucloxacillin to complete course. Medication added as outside prescriptions as supplied by Addiction services. Completed by PRPT under supervision.
Additional	Discharged from hospital VHK Ward 33 1/4/24 Left arm wound
01/03/2024	<u>Miss Leanne Page at Benarty Medical Practice</u>
Comment	Req rcvd from pt for Valium but as per Dr Filisell this would be addiction services that would prescribe this not the GP
05/10/2023	<u>Dr T Malham at Data Entry</u>
Comment	see email from SW. I note that she has been assessed by psychiatry this week and also has an appt with addiction services tomorrow
07/08/2023	<u>Dr T Malham at Benarty Medical Practice</u>
Comment	see recent events, has realised that main problem is alcohol. is cutting down on drinking and has already contacted adapt and is waiting to hear back from them. wondering if I can prescribe medication to stop her drinking-reduce cravings-advised not, this would be in conjunction with alcohol support, if appropriate. wishes to stay off antidepressants or similar. feels able to wait for support from addiction services
31/07/2023 15:44	<u>Mrs Loma Thomson at Benarty Medical Practice</u>
Problem	Immediate Discharge Document VHK 29/07/23
History	Alcohol intoxication and self-harm
Comment	Previous treatment continue unchanged no changes to long term medication Pharmacists
Additional	Referred to ADAPT for addictions support. Discharged from hospital
25/07/2023	<u>Ms Elaine Adamson at Benarty Medical Practice</u>
Comment	DNA Bloods Appointment
Additional	Failed encounter DNA CTAC Appointment
24/07/2023	<u>Mrs Brenda McDonald at Data Entry</u>
Comment	further message left;?? which bloods, should discuss with TM
20/07/2023	<u>Dr T Malham at Data Entry</u>
Comment	has booked appt for bloods. I can't remember discussing this with her when I saw her. Phoned to discuss, message left to call back
18/07/2023	<u>Dr T Malham at Benarty Medical Practice</u>
Medication	Propranolol Hydrochloride Tablets 40 mg 84 tablet ONE TO BE TAKEN THREE TIMES A DAY
Comment	1. spending most of time in house, only takes daughter to/from nursery, and takes daughter with her if has to go out anywhere. doesn't want to be in crowds. panicky symptoms. would like medication for this, stopped quetiapine again, no help. would like more help with managing her emotions, wants to see someone, has looked on moodcafe and help available via access therapies, says no use. will consider booking with mhn. try propranolol for anxiety symptoms. 2. medical Top 4/7 ago, had cramps on day one but no bleeding yet, was told could take up to 5 days if nothing by end of day 5 then advised phone clinic number given with her tabs info. 3. pain PIPJs fingers and knees, no swelling, no restriction in movement. this problem was mentioned in amng the other issues and did not manage to get back to it at end of consultation.
06/03/2023	<u>Dr T Malham at Benarty Medical Practice</u>
Examination	Blood pressure reading 136/86 mm Hg O/E - height, 160.5 cm O/E - weight, 89 Kg

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Medication	Body Mass Index: 26.79 Rigevidon Tablets 63 tablet ONE TO BE TAKEN EACH DAY AS DIRECTED Quetiapine Fumarate Tablets 25 mg 28 tablet ONE TO BE TAKEN AT NIGHT at pharmacy for pill was told BP too high 130/92, advised see GP, on ?cerelle- takes every day, gets BTB would like to go on combined pill, ex smoker, counselled re COCP, 2. EUPD, was on quetiapine, stopped due to wt gain, wonders if should restart. last psych referral declined was advised access therapies life, discussed, will restart quetiapine cautiously, once daily to start wqith . looks at access therapies
Comment	
19/01/2023	<u>Dr T Malham at Data Entry</u>
Comment	needs previous med3 to be issued with new address
Additional	eMED3 (2010) new statement issued, not fit for work FitNote .pdf, (Diagnosis: mental health problems; Duration: 06/01/2023 - 03/03/2023)
06/01/2023	<u>Dr T Malham at Benarty Medical Practice</u>
Medication	Amitriptyline Hydrochloride Tablets 10 mg 28 tablet ONE TO BE TAKEN AT NIGHT with mum. EUPD, brought paramedic report. cut L arm 31/12, deep cut lots bleeding, was selfstripped, now come open. no sgn infection. No TR this pm but Maggie's has space could see for dressing-pt declined, cut was for stress relief, no suicidal thoughts, mood up and down, finds it hard to keep on a level, tried quetiapine more than once mood stabiliser, stopped it again earlier last yr as overrated and wt gain, not sleeping well, wishes something for sleep, does not wish any other meds, note last psych letter 2019 thwy do not recommend any alternative to quetiapine, does not wish to consider psychological help, note benzo misuse and alcohol, try low dose amitrip for sleep, needs line as not fit to look for work and has been advised needs to work as daughter nearly 3. n/v as needed
Comment	
Additional	eMED3 (2010) new statement issued, not fit for work FitNote .pdf, (Diagnosis: mental health problems; Duration: 06/01/2023 - 03/03/2023)
26/05/2022	<u>Dr T Malham at Data Entry</u>
Comment	booked for phone appt to review quetiapine. no reply, message left to phone back 11.19am
23/05/2022	<u>Miss Zoe Ewens at Data Entry</u>
Comment	phonecall from Erin sister 07538097848 - initially was trying to find out if Kay was registered here advised I couldn't give out that information - (she did confirm her D.O.B & address) stated Kay needed help as been on drink & drugs all weekend and was quite unresponsive, says their dad was on his way to see to her, Erin was trying to find out who her GP was in case she needed GP assistance or should they take her to A&E , advised due to what she has told she would be best to go to hospital.
14/04/2022	<u>Mrs Gillian Simon at Benarty Medical Practice</u>
Comment	note added to rx to make appt for telephone review
Follow up	(diary entry deleted) (Not Known)
14/04/2022	<u>Dr Susan Filsell at Special Request</u>
Comment	quetiapine- needs rev appt Rx added
23/02/2022	<u>Dr Susan Filsell at Telephone Call due to COVID-19 Pandemic</u>
History	has been asked by SW and police to make contact, has been trying melatonin and other meds to try and help her sleep, ?bought nitrazepam online; spoke about mood variation, sometimes good couple of weeks , then mood drops has diagnosis of EUPD, when mood changes, self harming by cutting, can't stand herself, 'blacks out' when mood changes, swearing/ bad language, covers 2 yr olds ears when she is swearing , lives with her 2 yr old daughter, and her mum visits to support her, daughter at nursery 1-5pm, difficulty sleeping, affects her, domestic violence in the past from daughters dad, ?PTSD, not wanting to go out without her mum, friend does her shopping, says does make sure her daughter is ok, and she is 'her world', not on any medication just now, stopped quetiapine when she was pregnant, no drugs taken now, no alcohol, has support from her mum, has a SW Rachel, try quetiapine again as mood stabiliser, rev 3-4 wks
Comment	Rx x 1 ballingry today pls
08/02/2022	<u>Miss Zoe Ewens at Data Entry</u>
Additional	Cervical smear refused Cervical smear defaulter
08/02/2022 00:00	<u>Miss Zoe Ewens at General Practice Surgery</u>

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Comment	Cervical smear defaulter Exclusion From SCORS Until 09/05/2026. Reason: Defaulter
01/02/2022	<u>User Nurse 02 at Benarty Medical Practice</u>
Problem (REVIEW)	X Emotionally unstable personality disorder
History	History / symptoms emotionally unstable personality disorder No apparent risk of suicide
Examination	Kay noting she is aware she has a diagnosis of emotionally unstable personality disorder, and notes had previously been prescribed citalopram mood stabiliser for such, finding this medication beneficial in aiding regulation of mood and gaining sleep. Kay noting she feels sleep is a huge trigger to her mental health and noting she currently has a broken sleep pattern and feels this is impacting her mental health well being. Kay noting she is aware of previous impulsivity and says her main focus is daughter. Kay noting no use of alcohol or substances. Kay noting no thoughts of self harm or suicidal ideation.
Family History	Kay lives with her daughter aged 2. Kay has family support locally. Kay noting social work were involved last year however she is working hard to improve her own well being for both hers and daughters sake, noting had been using alcohol and drugs as a coping strategy however had support from DAPL for such.
Social	Kay noting she would like to be re prescribed citalopram mood stabiliser as feels the benefits to her mental health well being were positive, Kay noting is trying to improve her own life and well being and recognises the role of medication. We discussed referral to cmht and Kay agreeable to such.
Additional	Telephone encounter Referral for further care Other follow-up if required No thoughts of self harm Kay noting no thoughts of self harm or suicidal ideation New appointment
01/02/2022	<u>User Nurse 02 at Benarty Medical Practice</u>
Comment	02 messaging service activated and message left to inform I had called.
Additional	Telephone encounter Failed encounter Follow-up encounter
18/01/2022	<u>Miss Hannah Stewart at Data Entry</u>
Comment	tried to contact pt to cancel MH appt; no answer - message left to call back surgery
11/01/2022	<u>Miss Verity Still at Benarty Medical Practice</u>
Comment	Kay noting had forgotten about appointment today and was just leaving the house with daughter to go out when I called, we have rearranged appointment to telephone consultation next week
Additional	Telephone encounter New appointment
05/01/2022	<u>Dr T Malham at Benarty Medical Practice</u>
Medication	Flucloxacillin Capsules 500 mg 56 CAPSULE TWO TO BE TAKEN FOUR TIMES A DAY
Comment	2cm abscess I groin, thinks started from ingrown hair. recurrent? underlying seb cyst. systemically well
24/12/2021	<u>Mrs Brenda McDonald at Data Entry</u>
Comment	pt informed MH appt getting cancelled then re arranged
23/12/2021	<u>Miss Hannah Stewart at Data Entry</u>
Comment	tried to contact pt to cancel MH appt 10th jan, no answer, message left
29/11/2021	<u>DR Ruth Morris at Benarty Medical Practice</u>
Problem	Tel enc
History	tried 4 times in past 6 months coming off street valium -not sleeping, hallucinations friend getting prescribed 5mg adv re contacting addiction services Struggling with mental health adv appt initially with mental health nurse
29/04/2021	<u>Mrs Danielle Macrae at Data Entry</u>
Comment	PATIENT DUE SMEAR AS PER SCORS
23/03/2021	<u>Mrs Gillian Simon at Benarty Medical Practice</u>
Comment	Appt cancelled by patient for bloods today

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<u>19/03/2021</u>	<u>Dr Susan Filsell at Telephone Call due to COVID-19 Pandemic</u>
History	feels really run down over last month, had infection (dental)- had antibiotics, lump down below in pubic hair area - abscess- managed to express pus from it, had one a few yrs ago, and got antibiotics for it, now healing, has daughter aged 14/12, lived, not feeling down, has been in good spirits- had best yr of her life, not drinking/ not drugs, noticed a white hair in pubic hair area- was anxious about it, has been using moodcafe, has diagnosis of BPD, using headspace, sometimes sleep probs, daily struggle, but more aware of behaviour/ emotions, had SW involvement re daughter- back with her now, not on any meds, was on quetiapine before but stopped, has been to DAPL- worked on programmes,
Comment	to make appt for fasting bloods
Test Request	Full Blood Count - <i>Requested</i> , Glucose - <i>Requested</i> , LFT (Liver function) - <i>Requested</i> , Serum Femtin - <i>Requested</i> , Thyroid function test - <i>Requested</i> , Urea & Electrolytes - <i>Requested</i> , Vitamin B12 and Folate - <i>Requested</i>
<u>02/10/2020</u>	<u>Mrs Gillian Simon at Externally Entered</u>
Additional	EMIS attachment reference code NPM Letter

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Current Medication

Current				
Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
18/11/2024	Mirtazapine Tablets 30 mg ONE TO BE TAKEN AT NIGHT 28 TABLET	18/11/2024P	Dr T Malham	REPEAT
08/08/2024	Fluoxetine Hydrochloride Capsules 20 mg TWO CAPS DAILY 56 CAPSULE	18/11/2024P	Dr T Malham	REPEAT

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Past Medication

Past				
Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
20/06/2024	Fluoxetine Hydrochloride Capsules 20 mg TWO CAPS DAILY 2*30 capsule	20/06/2024P	Dr T Malham	ACUTE
15/05/2024	Fluoxetine Hydrochloride Capsules 20 mg ONE TO BE TAKEN EACH DAY FOR THREE DAYS THEN TWO TABLETS DAILY 2*30 capsule	15/05/2024P	Dr Susan Filsell	ACUTE
09/04/2024	Fluoxetine Hydrochloride Capsules 20 mg ONE TO BE TAKEN EACH DAY 28 CAPSULE	09/04/2024P	Dr Susan Filsell	ACUTE
03/04/2024	Diazepam Tablets 10 mg AS PER ADDICTION SERVICES 0.01 tablet	03/04/2024O	Dr Susan Filsell	ACUTE
18/07/2023	Propranolol Hydrochloride Tablets 40 mg ONE TO BE TAKEN THREE TIMES A DAY 84 tablet	18/07/2023P	Dr T Malham	ACUTE
08/03/2023	Rigevidon Tablets ONE TO BE TAKEN EACH DAY AS DIRECTED 83 tablet	08/03/2023P	Dr T Malham	ACUTE
06/03/2023	Quetiapine Fumarate Tablets 25 mg ONE TO BE TAKEN AT NIGHT 28 tablet	06/03/2023P	Dr T Malham	ACUTE
08/01/2023	Amitriptyline Hydrochloride Tablets 10 mg ONE TO BE TAKEN AT NIGHT 28 tablet	08/01/2023P	Dr T Malham	ACUTE
07/11/2022	Desogestrel Tablets 75 micrograms ONE TABLET DAILY 84 tablet	07/11/2022O	Dr Susan Filsell	ACUTE
14/04/2022	Quetiapine Fumarate Tablets 25 mg ONE TO BE TAKEN TWICE A DAY 56 tablet	14/04/2022P	Dr Susan Filsell	ACUTE
23/02/2022	Quetiapine Fumarate Tablets 25 mg ONE TO BE TAKEN TWICE A DAY 56 tablet	16/03/2022P	Dr Susan Filsell	ACUTE
05/01/2022	Flucloxacillin Capsules 500 mg TWO TO BE TAKEN FOUR TIMES A DAY 56 CAPSULE	05/01/2022P	Dr T Malham	ACUTE
06/08/2024	Mirtazapine Tablets 15 mg ONE TO BE TAKEN AT NIGHT 28 TABLET	25/10/2024P	Dr T Malham	REPEAT

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File Status	Filed.	Tasks	No Tasks.
Assigned User	Dr Susan Filsell	Filed By User	Miss Zoe Ewens
Patient Matched	Yes.	SCCRS Message Type	Exclusion

electronic Notification of Cervical Cytology Results Service

Exclusion Information

CHI Number	1207840483
Name	THOMSON, KAY
Date Of Birth	12/ 07/ 1984
GMC Code of Registered GP	4737917
Practice Code	F21421

Exclusion Reason

Exclusion Date

Exclusion End Date

Extended

Closed

Next Recall Date

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End of Document. Total Pages (including this one): 23

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16-July-2026 SJJS
Additional:Scanned Document

Filename: iGPRDA_15.tif
Extension:.tif
Pages:

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Santos, Soraia

From: McCarthy, Niamh
Sent: 01 May 2025 16:22
To: Clinical GP Leith Mount Surgery
Subject: urinalysis

Hi,

Kay Thomson
CHI 1207840483
gest 32+5
urinalysis showed nitrates
May she get antibiotics prescribed please
I have sent off MSU.

She has been suffering with acid reflux, she has taken peptac, which hasn't helped.
May she be prescribed omeprazole please.

She would like to pick up prescription from Edinburgh pharmacy at the Kirkgate

Kind Regards,

Niamh McCarthy
Leith Community Midwives
Office: 0131 563 6452
Mobile: 07903969560



LEITH
Community Midwives

Additional:Scanned Document

Filename: iGPRDA_14.tif

Extension:.tif

Pages:

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NHS Lothian

Royal Infirmary of Edinburgh
51 Little France Crescent
Old Dalkeith Road
Edinburgh EH16 4SA

Obstetrics

Dr Smith
Leith Mount Surgery
2 Lindsay Street
Edinburgh
EH6 4EG

Date: 03/06/2025

Inpatient Discharge Summary

Patient	Kay Thomson FLAT 7 39 MITCHELL STREET Edinburgh EH6 7AR	CHI	1207840483
		Date of Birth /	12/07/1984 (40 years)
		Age	
		UHPI	701664472L
Ward	Ward 119 RIE	Admission Date	01/06/2025
Consultant	Dr Camille A Thyne	Discharge Date	

Dear Dr Smith

Allergen (Group to which Allergen belongs)	Reaction
***No Known Drug Allergies	

Discharge Drugs:

Dalteparin sodium 5,000units/0.2ml injection PFS			
Dose	Route	Frequency	To Continue
5000 unit	Subcutaneous	Every 24 hours	Yes
Notes:			
Ibuprofen 400mg tablets			
Dose	Route	Frequency	To Continue
400 mg	Oral	Three times daily at 0700, 1400 & 2200	No
Notes:			

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Lactulose 3.1-3.7g/5ml oral solution			
Dose	Route	Frequency	To Continue
15 mL	Oral	Twice daily at 0700 & 1800	No
Notes:			
Medroxyprogesterone 150mg/1ml suspension for injection PFS			
Dose	Route	Frequency	To Continue
150 mg	Intramuscular	Every 12 weeks	Yes
Notes:			
Morphine sulfate 10mg/5ml oral solution			
Dose	Route	Frequency	To Continue
10 mg	Oral	PRN 4-6 hourly max QDS	No
Notes:			
Paracetamol 500mg caplets			
Dose	Route	Frequency	To Continue
1000 mg	Oral	Four times daily at 0700, 1200, 1800 & 2200	No
Notes:			

PROCEDURE: Emergency Caesarean Section - Indication: unstable lie with polyhydramnios, contractions (planned for cat 3 CS, escalated to cat 2 CS as contracting)

DATE: 03/06/25

GESTATION:

ANAESTHETIC: spinal anaesthetic

BLOOD LOSS: 310 ml

Postnatal Hb: 103

COMPLICATIONS: nil intra-operative

ANTENATAL COURSE: Polyhydramnios 40 cm

Baby was admitted to NNU to exclude OA and trachea-oesophageal fistula

CONTRACEPTION: depo provera (12 weekly injection)

THROMBOPROPHYLAXIS: 6 weeks Dalteparin (VTE Score 4)

Hospital follow-up arranged? No

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GP follow-up required Yes - 6 week check

Baby details can be obtained from baby summary sheet.

This is an immediate discharge summary and a further letter may follow. Should you require any further information please contact:

Ward 119/211, Simpsons Centre for Reproductive Health, RIE

Information in this letter has been discussed with the patient.

Yours sincerely,

Staff name and grade: P Srikanth ST1

Updated by:

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Simpson Centre for Reproductive Health
51 Little France Crescent, Edinburgh, Scotland, EH16 4SA. Tel: 0131 536 1000. **NHS**
Lothian

Admission Summary

THOMSON, ACE (CHI No: 0106252410)

Baby boy, singleton, born 01 Jun 25 at 22:05 at 37+1 weeks weighing 3800 grams.
Admitted 01 Jun 25 at 22:35 (Local ID: 701695113X) from Theatre.
Now in unit - day 1 of stay.
Corrected gestation 37+2

Mother and Father/Partner

Mother's name	Miss Kay Thomson	Father/Partner	
DOB	12 Jul 84 (40 at delivery)	DOB	27 Jun 95 (28 at delivery)
Address	FLAT 7 39 MITCHELL STREET Edinburgh EH6 7AR	Address	
		Occupation	Utility arborist
National ID	1207840483		
Hospital ID	701664472L		
Occupation	Housewife		
Marital status	(not recorded)		
Blood group (mother)	O-		
Blood group (baby)	(not recorded)		
DAT	(not recorded)		
Medical history	Diseases: Description: Varicella without complication Comment: Varicella without complications		

Circle of Care

Named midwife	(Not Recorded)	Midwife phone no	(Not Recorded)
GP name	Dr VC Smith	GP address	Leith Mount Surgery, 2 Lindsay Street, Edinburgh,
Lead consultant	Dr Ewen Johnston	HV address	

Admitted to neonatal unit

Admitted	01 Jun 25 at 22:35	Weight	3800 grams
From	Simpson Centre for Reproductive Health	Head circumference	(not recorded)
Principal reason	Exclusively for a specific investigation	Temperature	37.6°C

Initial management at birth

Resuscitation	None	Cord Gases:	
Staff present	Dr. Ewen Johnston Dr. Eleanor Watkins Dr. Aghogho Onitiri Dr. Benjamin		
Timings	First gasp at < 1 mins. Spontaneous resp at < 1 mins.		
Surfactant	No		
Notes	Cried at birth. HR> 100bpm He did not require any help to transition Oxygen saturations at 4mins 90%. He was kept warm under radiant warmer T at time of leaving resus room 37.3 Transferred via mum to Neonatal HDU. Mum keen to breastfeed but is happy for baby to get top ups with Aptamil if required Both parents have consented to baby getting Vit K		

Admission Notes

S: 30mins old male neonate delivered via CAT 2 section for Polyhydramnios with low likelihood of Tracheo-oesophageal fistula/ Oesophageal atresia
Neonatal plan for attendance at birth by a Tier 2, admission to NNU for further investigation.

He had full neonatal team including Consultant, tier 2 and tier 1 doctor and neonatal nurse in attendance at delivery.
He cried immediately after birth and had 1min of DCC
He required no resuscitation to transition.

Please see resus notes.

He was transferred via mum to NNU for care as per Neonatal plan

On arrival in the ward he was found to have oxygen saturation at 88% and required Low flow oxygen to maintain saturations at above 93%.

B:

Patient: ACE THOMSON CHI Number: 0106252410

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Page 1 of 2

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Simpson Centre for Reproductive Health
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Lothian

Born at 37+ 1 weeks via EMCS
Mother O RH Negative
Antenatal scans revealed no anomaly

A:
Examined by Dr. Watkins
Settled and appropriate on handling
WWP, CRT<2 HS I+II+0 good volume femorals
Good air entry bilaterally, mild tachypnoea with possible very subtle SC recession. Not excessively frothy/mucousy at mouth
Abdo SNT, male genitalia, testes descended, anus patent
AF normotensive, good grasp/strong suck reflex, good tone, flexed posture

Impression
Suspected Sepsis
R:
Pass NG tube
Chest X-ray:
NG tube in stomach
Partial septic screen.
Commence benzylpenicillin and gentamicin.
IVF fluids at 60mls/kg /day
LF nasal cannula oxygen at 0.1 L . Wean as able.

Completed By Onitiri, Aghogho Designation Other: LAT 3

Checked by attending consultant:

Signed: _____ Name: _____

Patient: ACE THOMSON CHI Number: 0106252410

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Simpson Centre for Reproductive Health
 51 Little France Crescent, Edinburgh, Scotland, EH16 4SA. Tel: 0131 536 1000. **NHS**
 Lothian

Admission Summary

THOMSON, ACE (CHI No: 0106252410)

Baby boy, singleton, born 01 Jun 25 at 22:05 at 37+1 weeks weighing 3800 grams.
 Admitted 01 Jun 25 at 22:35 (Local ID: 701695113X) from Theatre.
 Now in unit - day 1 of stay.
 Corrected gestation 37+2

Mother and Father/Partner

Mother's name	Miss Kay Thomson	Father/Partner	
DOB	12 Jul 84 (40 at delivery)	DOB	27 Jun 95 (28 at delivery)
Address	FLAT 7 39 MITCHELL STREET Edinburgh EH6 7AR	Address	
		Occupation	Utility arborist
National ID	1207840483		
Hospital ID	701664472L		
Occupation	Housewife		
Marital status	(not recorded)		
Blood group (mother)	O-		
Blood group (baby)	(not recorded)		
DAT	(not recorded)		
Medical history	Diseases: Description: Varicella without complication Comment: Varicella without complications		

Circle of Care

Named midwife	(Not Recorded)	Midwife phone no	(Not Recorded)
GP name	Dr VC Smith	GP address	Leith Mount Surgery,2 Lindsay Street,Edinburgh,
Lead consultant	Dr Ewen Johnston	HV address	

Admitted to neonatal unit

Admitted	01 Jun 25 at 22:35	Weight	3800 grams
From	Simpson Centre for Reproductive Health	Head circumference	(not recorded)
Principal reason	Exclusively for a specific investigation	Temperature	37.6°C

Initial management at birth

Resuscitation	None	Cord Gases:	
Staff present	Dr. Ewen Johnston Dr. Eleanor Watkins Dr. Aghogho Onitiri Dr. Benjamin		
Timings	First gasp at < 1 mins. Spontaneous resp at < 1 mins.		
Surfactant	No		
Notes	Cried at birth. HR> 100bpm He did not require any help to transition Oxygen saturations at 4mins 90%. He was kept warm under radiant warmer T at time of leaving resus room 37.3 Transferred via mum to Neonatal HDU. Mum keen to breastfeed but is happy for baby to get top ups with Aptamil if required Both parents have consented to baby getting Vit K		

Admission Notes

S: 30mins old male neonate delivered via CAT 2 section for Polyhydramnios with low likelihood of Tracheo-oesophageal fistula/ Oesophageal atresia
 Neonatal plan for attendance at birth by a Tier 2, admission to NNU for further investigation.

He had full neonatal team including Consultant, tier 2 and tier 1 doctor and neonatal nurse in attendance at delivery.
 He cried immediately after birth and had 1min of DCC
 He required no resuscitation to transition.
 Please see resus notes.

He was transferred via mum to NNU for care as per Neonatal plan
 On arrival in the ward he was found to have oxygen saturation at 88% and required Low flow oxygen to maintain saturations at above 93%.

B:

Patient: ACE THOMSON CHI Number: 0106252410

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Simpson Centre for Reproductive Health
51 Little France Crescent, Edinburgh, Scotland, EH16 4SA. Tel: 0131 536 1000. **NHS**
Lothian

Born at 37+ 1weeks via EMCS
Mother O RH Negative
Antenatal scans revealed no anomaly

A:
Examined by Dr. Watkins
Settled and appropriate on handling
WWP, CRT<2 HS I+II+0 good volume femorals
Good air entry bilaterally, mild tachypnoea with possible very subtle SC recession. Not excessively frothy/mucousy at mouth
Abdo SNT, male genitalia, testes descended, anus patent
AF normotensive, good grasp/strong suck reflex, good tone, flexed posture

Impression
Suspected Sepsis
R:
Pass NG tube
Chest X-ray:
NG tube in stomach
Partial septic screen.
Commence benzylpenicillin and gentamicin.
IVF fluids at 60mls/kg /day
LF nasal cannula oxygen at 0.1 L . Wean as able.

Completed By Onitiri, Aghogho Designation Other: LAT 3

Checked by attending consultant:

Signed: _____ Name: _____

Patient: ACE THOMSON CHI Number: 0106252410

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Simpson Centre for Reproductive Health **NHS**
 51 Little France Crescent, Edinburgh, Scotland, EH16 4SA. Tel: 0131 536 1000.
 Lothian

THOMSON, ACE (CHI No: 0106252410)
 Baby boy, singleton, born 01 Jun 25 at 22:05 at 37+1 weeks weighing 3800 grams.
 Admitted 01 Jun 25 at 22:35 (Local ID: 701695113X) from Theatre.
 Discharged to Postnatal ward 02 Jun 25 at 16:00
 Corrected gestation at discharge 37+2

Dr VC Smith
 Leith Mount Surgery, 2 Lindsay Street, Edinburgh,
 EH6 4EG
 Tel: 0131 561 1900

Consultant: Dr Ewen Johnston
 02 Jun 2025

Neonatal Discharge Summary

Principal problems / diagnosis during stay

• Sepsis Suspected

Mother and Father/Partner

Mother's name	Miss Kay Thomson	Father/Partner	
DOB	12 Jul 84 (40 at delivery)	DOB	27 Jun 95 (29 at delivery)
Address	FLAT 7 39 MITCHELL STREET Edinburgh EH6 7AR	Address	
		Occupation	Utility arborist
National ID	1207840483		
Hospital ID	701664472L		
Occupation	Housewife		
Marital status	(not recorded)		
Blood group (mother)	O-		
Blood group (baby)	(not recorded)		
DAT	(not recorded)		
Medical history	Diseases: Description: Varicella without complication Comment: Varicella without complications		

Initial management at birth

Resuscitation	None	Cord Gases:	
Staff present	Dr. Ewen Johnston Dr. Eleanor Watkins Dr. Aghogho Onitiri Dr. Benjamin		
Timings	First gasp at < 1 mins. Spontaneous resp at < 1 mins.		
Surfactant	No		
Notes	Cried at birth. HR> 100bpm He did not require any help to transition Oxygen saturations at 4mins 90%. He was kept warm under radiant warmer T at time of leaving resus room 37.3 Transferred via mum to Neonatal HDU. Mum keen to breastfeed but is happy for baby to get top ups with Aptamil if required Both parents have consented to baby getting Vit K		

Admitted to neonatal unit

Admitted	01 Jun 25 at 22:35	Weight	3800 grams
From	Simpson Centre for Reproductive Health	Head circumference	(not recorded)
Principal reason	Exclusively for a specific investigation	Temperature	37.6°C

Discharged to Postnatal ward 02 Jun 25 at 16:00

Weight	3800 grams.	Feeding	(not recorded)
Head circ.	(not recorded)	NIPE exam.	(not recorded)
Length	(not recorded)	Immunisations	(not recorded)
Drugs	Gentamicin. Dose _____. Frequency _____. Strength _____. Benzylpenicillin. Dose _____. Frequency _____. Strength _____. Discharge address FLAT 7, 39 MITCHELL STREET, Edinburgh. EH6 7AR		

Patient: ACE THOMSON CHI Number: 0106252410

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NHS Confidential: Personal data about a patient

Simpson Centre for Reproductive Health
51 Little France Crescent, Edinburgh, Scotland, EH16 4SA. Tel: 0131 536 1000. **NHS**
Lothian

Summary

Dear colleagues,

Ace was admitted to the Neonatal Unit on 01.05.2025 directly from Obstetric Theatres due to antenatal concerns of a possible tracheo-oesophageal fistula / oesophageal atresia.

Background

Ace was born at 37+1 by emergency caesarean section with an antenatal diagnosis of polyhydramnios and an AC >99th centile. He required no resuscitation at delivery and was transferred to the Neonatal Unit via his parents. No maternal risk factors for infection identified at birth.

Progress

On admission Ace was found to have low oxygen saturations and required a brief period of oxygen supplementation with nasal prongs but this quickly resolved and he has remained in air since. An NG tube was passed at admission and a CXR carried out which showed no evidence of a tracheo-oesophageal fistula and clear lungs shown.

Due to the oxygen requirement at admission, Ace was started on empirical antibiotics (Benpen and Gentamicin) and a blood culture sent. Whilst receiving oxygen therapy Ace was switched to intravenous fluids but these have since been weaned off and he is establishing breastfeeding well.

Ace has completed more than 12 hours stable monitoring whilst breathing unsupported in air and two subsequent blood gases were within normal range including normoglycaemia. Ace has demonstrated the ability to suck feed safely and is continuing to establishing breastfeeding.

Prior to discharge home Ace needs a CRP due at 1am on 03/06/2025. Antibiotics should be discontinued if CRP is low. Please continue the NEWS Chart until antibiotics can be stopped. Blood Cultures are still outstanding and should be reported negative prior to discharge home (due back 01:45 on 04/06/2025).

Ace is now ready for discharge back to the Postnatal Ward with his parents.
Do not hesitate to contact the Neonatal Unit should you have any further concerns.
If any further changes occur on the Postnatal Ward we will update you by a separate letter.

Yours sincerely,
Dr L Chacko ST1

Completed By	Chacko, Lisa	Designation	Other: ST1
--------------	--------------	-------------	------------

Signed: _____ Name: _____

Patient: ACE THOMSON CHI Number: 0106252410

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Repeat Prescription Request form

Name Kay Thomson Age 41 Emis No. 75008
Dr [Signature] Receptionist RSB Date 5/2/26

Circle if Acute and/or Past	Acute / Past	Acute / Past	Acute / Past	Acute / Past
Drug	<u>Quetta p.c. 25mg</u>			
Last issued	<u>20/1/26</u>			
Issue	☒			
Change to Repeat	☒			
Show to usual GP	☒			

Reason for refusal _____

Frailty (receptionist to complete) Mild / Mod / Severe Not coded

GP to re-enter Rockwood Score if entered prior to 1/4/25

Review overdue- (receptionist to circle)

Asthma
COPD
BP
IHD
CVD
Diabetes
Medication review

Appt with (GP to circle)

Phlebotomist
BP check/home monitor
Nurse : diabetes clinic
asthma clinic
IHD/CVD review
Pharmacist – phone
Polypharmacy review
GP – face to face/ phone
E-consult – asthma review
Econsult – COCP review

Medication Overuse	Date last issued
Morphine	
Oxycodone	
Tramadol	
Dihydrocodeine	
Co-codamol	
Diazepam	
Temazepam	
Gabapentin/pregabalin	

Medication reviewed – Repeat for 15/12
coded by GP

Medication reviewed – Repeat for 15/12
to be coded by staff

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NHS Confidential: Personal data about a patient

Repeat Prescription Request form

Name Kay Thomson Age 41 Emis No. 75008
Dr HL Receptionist KSB Date 30/4/26

Circle if Acute and/or Past	Acute / Past	Acute / Past	Acute / Past	Acute / Past
Drug	<u>Quetiapine 25mg</u>			
Last issued	<u>30/3/26</u>			
Issue				
Change to Repeat				
Show to usual GP				

Reason for refusal _____

Frailty (receptionist to complete) Mild / Mod / Severe / Not coded -

GP to re-enter Rockwood Score if entered prior to 1/4/25

Review overdue- (receptionist to circle)

Asthma
COPD
BP
IHD
CVD
Diabetes
Medication review

Appt with (GP to circle)

Phlebotomist
BP check/home monitor
Nurse : diabetes clinic
asthma clinic
IHD/CVD review
Pharmacist – phone
Polypharmacy review
GP – face to face/ phone
E-consult – asthma review
Econsult – COCP review

Medication Overuse	Date last issued
Morphine	
Oxycodone	
Tramadol	
Dihydrocodeine	
Co-codamol	
Diazepam	
Temazepam	
Gabapentin/pregabalin	

Medication reviewed – Repeat for 15/12
coded by GP

Medication reviewed – Repeat for 15/12
to be coded by staff

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NHS Confidential: Personal data about a patient

Mental Health Nurse prescription request

Date 19/01/25

Patient details (sticker):

THOMSON Kay %chnumber%	
39-7 Mitchell Street	
EH6 7AR Tel: 07838735570	12/07/1984

Medication (including dose, and quantity required):

Reports increased anxiety, poor sleep & increase in agitation
Currently on mirtazapine 30mg suggest reducing to 15mg to see
if this improves sleep. Also asking for prn quetiapine for agitation

Pharmacy Leith pharmacy / Collect from reception (please select)

V S — M.

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NHS Confidential: Personal data about a patient

Repeat Prescription Request form

Name Kay Thomson Age 41 Emis No. 75008

Dr 8 Receptionist 8 Date 29/6/26

Circle if Acute and/or Past	Acute / Past	Acute / Past	Acute / Past	Acute / Past
Drug	<u>Quetiapine 25</u>			
Last issued	<u>26/5/26</u>			
Issue	<u>✓</u>			
Change to Repeat	<u>No</u>			
Show to usual GP				

Reason for refusal _____

Frailty (receptionist to complete) Mild / Mod / Severe / Not coded -

GP to re-enter Rockwood Score if entered prior to 1/4/25

Review overdue- (receptionist to circle)

Asthma
COPD
BP
IHD
CVD
Diabetes
Medication review

Appt with (GP to circle)

Phlebotomist
BP check/home monitor
Nurse : diabetes clinic
asthma clinic
IHD/CVD review
Pharmacist – phone
Polypharmacy review
GP – face to face/ phone
E-consult – asthma review
Econsult – COCP review

Medication Overuse	Date last issued
Morphine	
Oxycodone	
Tramadol	
Dihydrocodeine	
Co-codamol	
Diazepam	
Temazepam	
Gabapentin/pregabalin	

Medication reviewed – Repeat for 15/12
coded by GP

Medication reviewed – Repeat for 15/12
to be coded by staff

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NHS Confidential: Personal data about a patient

Repeat Prescription Request form

Name Kay Thomson Age 41 Emis No. 75008
Dr R Receptionist LU Date 26/05/26

Circle if Acute and/or Past	Acute / Past	Acute / Past	Acute / Past	Acute / Past
Drug	<u>Quetiapine 150mg</u>			
Last issued	<u>30/04/2026</u>			
Issue	<u>7</u>			
Change to Repeat				
Show to usual GP				

Reason for refusal _____

Frailty (receptionist to complete) Mild / Mod / Severe Not coded

GP to re-enter Rockwood Score if entered prior to 1/4/25

Review overdue- (receptionist to circle)

Asthma
COPD
BP
IHD
CVD
Diabetes
Medication review

Appt with (GP to circle)

Phlebotomist
BP check/home monitor
Nurse : diabetes clinic
asthma clinic
IHD/CVD review
Pharmacist – phone
Polypharmacy review
GP – face to face/ phone
E-consult – asthma review
Econsult – COCP review

Medication Overuse	Date last issued
Morphine	
Oxycodone	
Tramadol	
Dihydrocodeine	
Co-codamol	
Diazepam	
Temazepam	
Gabapentin/pregabalin	

Medication reviewed – Repeat for 15/12 coded by GP

Medication reviewed – Repeat for 15/12 to be coded by staff

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NHS Confidential: Personal data about a patient

Repeat Prescription Request form

Name Katy Thomson Age 41 Emis No. 75008
Dr KAB Receptionist CG Date 28/5/26

Circle if Acute and/or Past	Acute / Past	Acute / Past	Acute / Past	Acute / Past
Drug	<u>MORPHINE - 30MG</u>			
Last issued	<u>15/2/25</u>			
Issue	<u>Y</u>			
Change to Repeat	<u>Y</u>			
Show to usual GP		<u>request to change dose back</u>		

Reason for refusal _____

Frailty (receptionist to complete) Mild / Mod / Severe / Not coded

GP to re-enter Rockwood Score if entered prior to 1/4/25

Review overdue- (receptionist to circle)

Asthma
COPD
BP
IHD
CVD
Diabetes
Medication review

Appt with (GP to circle)

Phlebotomist
BP check/home monitor
Nurse : diabetes clinic
asthma clinic
IHD/CVD review
Pharmacist – phone
Polypharmacy review
GP – face to face/ phone
E-consult – asthma review
Econsult – COCP review

Medication Overuse	Date last issued
Morphine	
Oxycodone	
Tramadol	
Dihydrocodeine	
Co-codamol	
Diazepam	
Temazepam	
Gabapentin/pregabalin	

Medication reviewed – Repeat for 15/12
coded by GP

Medication reviewed – Repeat for 15/12
to be coded by staff

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Additional:Scanned Document

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Repeat Prescription Request form

Name Kay Thomson Age 40 Emis No. 75008
Dr SS Receptionist SS Date 23/6/15

Circle if Acute and/or Past	Acute / Past	Acute / Past	Acute / Past	Acute / Past
Drug				
Last issued				
Issue				
Change to Repeat				
Show to usual GP				

Reason for refusal _____

Frailty (receptionist to complete) Mild / Mod / Severe / Not coded -

GP to re-enter Rockwood Score if entered prior to 1/4/25

Review overdue- (receptionist to circle)

Asthma

COPD

BP

IHD

CVD

Diabetes

Medication review 10/6/15

Appt with (GP to circle)

Phlebotomist

BP check/home monitor

Nurse : diabetes clinic

asthma clinic

IHD/CVD review

Pharmacist – phone

Polypharmacy review

GP – face to face/ phone

E-consult – asthma review

Econsult – COCP review

Medication Overuse	Date last issued
Morphine	
Oxycodone	
Tramadol	
Dihydrocodeine	
Co-codamol	
Diazepam	
Temazepam	
Gabapentin/pregabalin	

Medication reviewed – Repeat for 15/12
coded by GP

Medication reviewed – Repeat for 15/12
to be coded by staff

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Simpson Centre for Reproductive Health **NHS**
 51 Little France Crescent, Edinburgh, Scotland, EH16 4SA. Tel: 0131 536 1000.
 Lothian

THOMSON, ACE (CHI No: 0106252410)

Baby boy, singleton, born 01 Jun 25 at 22:05 at 37+1 weeks weighing 3800 grams.
 Admitted 01 Jun 25 at 22:35 (Local ID: 701695113X) from Theatre.
 Discharged to Postnatal ward 02 Jun 25 at 16:00
 Corrected gestation at discharge 37+2

Dr. VC Smith
 Leith Mount Surgery, 2 Lindsay Street, Edinburgh,
 EH6 4EG
 Tel: 0131 561 1900

Consultant: Dr Ewen Johnston
 02 Jun 2025

Neonatal Discharge Summary**Principal problems / diagnosis during stay**

• Sepsis Suspected

Mother and Father/Partner

Mother's name	Miss Kay Thomson	Father/Partner	
DOB	12 Jul 84 (40 at delivery)	DOB	27 Jun 95 (29 at delivery)
Address	FLAT 7 39 MITCHELL STREET Edinburgh EH6 7AR	Address	
National ID	1207840483	Occupation	Utility arborist
Hospital ID	701664472L		
Occupation	Housewife		
Marital status	(not recorded)		
Blood group (mother)	O-		
Blood group (baby)	(not recorded)		
DAT	(not recorded)		
Medical history	Diseases: Description: Varicella without complication Comment: Varicella without complications		

Initial management at birth

Resuscitation	None	Cord Gases:	
Staff present	Dr. Ewen Johnston Dr. Eleanor Watkins Dr. Aghoghho Onitiri Dr. Benjamin		
Timings	First gasp at < 1 mins. Spontaneous resp at < 1 mins.		
Surfactant	No		
Notes	Cried at birth. HR> 100bpm He did not require any help to transition Oxygen saturations at 4mins 90%. He was kept warm under radiant warmer T at time of leaving resus room 37.3 Transferred via mum to Neonatal HDU. Mum keen to breastfeed but is happy for baby to get top ups with Aptamil if required Both parents have consented to baby getting Vit K		

Admitted to neonatal unit

Admitted	01 Jun 25 at 22:35	Weight	3800 grams
From	Simpson Centre for Reproductive Health	Head circumference	(not recorded)
Principal reason	Exclusively for a specific investigation	Temperature	37.6°C

Discharged to Postnatal ward 02 Jun 25 at 16:00

Weight	3800 grams.	Feeding	(not recorded)
Head circ.	(not recorded)	NIPE exam.	(not recorded)
Length	(not recorded)	Immunisations	(not recorded)
Drugs	Gentamicin. Dose ___. Frequency ____. Strength ___. Benzylpenicillin. Dose ____. Frequency ____ Strength ____.		
Discharge address	FLAT 7, 39 MITCHELL STREET, Edinburgh. EH6 7AR		

Patient: ACE THOMSON CHI Number: 0106252410

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Generated by Gesiani, Elena at 02 Jun 25 at 16:43

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NHS Confidential: Personal data about a patient

Simpson Centre for Reproductive Health
51 Little France Crescent, Edinburgh, Scotland, EH16 4SA. Tel: 0131 536 1000. **NHS**
Lothian

Summary

Dear colleagues,

Ace was admitted to the Neonatal Unit on 01.05.2025 directly from Obstetric Theatres due to antenatal concerns of a possible tracheo-oesophageal fistula / oesophageal atresia.

Background

Ace was born at 37+1 by emergency caesarean section with an antenatal diagnosis of polyhydramnios and an AC >99th centile. He required no resuscitation at delivery and was transferred to the Neonatal Unit via his parents. No maternal risk factors for infection identified at birth.

Progress

On admission Ace was found to have low oxygen saturations and required a brief period of oxygen supplementation with nasal prongs but this quickly resolved and he has remained in air since. An NG tube was passed at admission and a CXR carried out which showed no evidence of a tracheo-oesophageal fistula and clear lungs shown.

Due to the oxygen requirement at admission, Ace was started on empirical antibiotics (Benpen and Gentamicin) and a blood culture sent. Whilst receiving oxygen therapy Ace was switched to intravenous fluids but these have since been weaned off and he is establishing breastfeeding well.

Ace has completed more than 12 hours stable monitoring whilst breathing unsupported in air and two subsequent blood gases were within normal range including normoglycaemia. Ace has demonstrated the ability to suck feed safely and is continuing to establishing breastfeeding.

Prior to discharge home Ace needs a CRP due at 1am on 03/06/2025. Antibiotics should be discontinued if CRP is low. Please continue the NEWS Chart until antibiotics can be stopped. Blood Cultures are still outstanding and should be reported negative prior to discharge home (due back 01:45 on 04/06/2025).

Ace is now ready for discharge back to the Postnatal Ward with his parents.
Do not hesitate to contact the Neonatal Unit should you have any further concerns.
If any further changes occur on the Postnatal Ward we will update you by a separate letter.

Yours sincerely,
Dr L Chacko ST1

Completed By Chacko, Lisa

Designation

Other: ST1

Signed: _____

Name: _____

Patient: ACE THOMSON CHI Number: 0106252410

NHS Confidential: Personal Data about a patient

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NHS Lothian**Chalmers Sexual Health Centre**
2A Chalmers Street
Edinburgh
EH3 9ES**Sexual & Reproductive Health**Dr Smith
Leith Mount Surgery
2 Lindsay Street
Edinburgh
EH6 4EG**Date:** 15/07/2026**Outpatient Clinic Letter**

Patient	Kay Thomson Flat 7 39 Mitchell Street Edinburgh EH6 7AR	CHI	1207840483
		Date of Birth /	12/07/1984 (42 years)
		Age	
		UHPI	701664472L
Attendance Date	15/07/2026		
Consultant	Choices Assessment Clinic		

Dear Dr Smith

This patient had a consultation with Chalmers Sexual Health Centre today and had the following procedure arranged: Medical Termination of Pregnancy at Home

She plans to take Mifepristone 200 mg and plans to self-administer Misoprostol 800 mcg at home

Contraception supplied: Details for arranging IUD fitting

For further information contact:

Chalmers Senior Nurse Mobile: 07765395887 between 8.30 am -4 pm Mon to Friday

Ward 210 Gynaecology RIE: 0131 242 2101 all other times.

St Johns Hospital Gynaecology ward 01506524112 or mobile 07966629971

FOLLOW-UP PLAN: Self-performed low sensitivity urine pregnancy test in 2 weeks

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Yours sincerely
CHOICES TEAM

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FORM CP4(SS)(5)

Kay Thomson
39-7 Mitchell Street
Edinburgh

Edinburgh Pharmacy
3-5 Duke Street
Leith
Edinburgh

EH6 7AR

02/07/2026

1207840483



JC25 9000 0290 9PA5

[illegible]

Unscheduled Care - Pharmacy Supply

02.07.2026

2590

208656568

Send to GP

07710771