Subject Access Request

Patient	Miss Georgina Smith
Date of birth	04-Dec-1991 (age 34)
Gender	F
NHS number	0412913127
Patient's address	11 Abercromby Place East Kilbride Glasgow G74 3DF
Date range selected	Full record
Organisation	MMA Legal
Reference	100928

Problems

Active

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Significant Past

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Minor Past

This section is empty.

Consultations

11-Jun-2026 Mrs Julie Mcquillan Surgery consultation

Intervention (P3)	Medication requested	pt req pizotifen, fexofenadine, sumatriptan, metoclopramide
Intervention (P3)	Previous treatment continue	pizotifen / fexofenadine issued as per GP2GP - I cannot see sumatriptan / metoclopramide issued historically.

11-Jun-2026 Ms Shannon Mooney Administration

08-Jun-2026 Ms Shannon Mooney Administration

Administration (P3)	Administration NOS	Data Subject Access Request from MMA Legal passed to reports folder 08/06 SJM

01-Jun-2026 Dr Gillian Malcolm Surgery consultation

01-Jun-2026 Ms Claire Weaver Administration

22-May-2026 Ms Shannon Mooney Administration

Administration (P3)	SMS text message sent to patient	Kittoch - Unfortunately, your appointment on 27/05 has had to be cancelled. If still required, please contact the surgery to rearrange. Thank you.

12-May-2026 Ms Shannon Mooney Third Party Consultation

07-May-2026	Administration (P3)	Letter received	Letter to Doctor Kittoch Medical Practice L63250 Kittoch Medical Practice

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12-May-2026 Dr Gillian Malcolm Surgery consultation

Intervention (P3)	Had a chat to patient has a letter from advocacy worker, medication issues- d/w repeat prescritpions and pregabalin controlled drug only 1 month given at a time, can request monthly. She had a *****/mental health input last year when she cam eout of prison, no clinical letters regarding this input in her notes. She says she feels anxious, had to be a witness in a trial yesterday and felt anxious in that environment. She is also reading socila work files just now regarding ***** ***** abuse which is distessing, wondering is she could have support /specialist counselling available for this. Still has a ***** from a charty but now off licence she does not have Sw input. Takes pregabalin for anxiety. Keen for anxiety management techniqures- given appt with mental health liaison in first instance.		

05-May-2026 Dr Simon Murphy Surgery consultation

14-Apr-2026 Sister Christine Jump Surgery consultation

Examination	O/E - pulse rate	62 bpm	
Examination	O/E - temperature level	36.8 degC	
Administration (P3)	Consultation C/o urinary frequency and an urgency to pass urine. Some dysuria. Passing smaller volumes of urine. Was given 3 day supply of trimethoprim from pharmacy - these finished 3 days agoNo back or abdominal painNo nausea or feverDid not bring urine sample. Treat as UTI. WSGC/o sore throat. Eating and drinking normally. Reduced tasteThroat red but no sign or infection. Treat as viral illness. WSG		
Examination	Baseline SpO2 (oxygen saturation at periphery)	99 %	
Examination	**O/E - temperature level**:		
	O/E - temperature level	36.8 degC	(No range available)
Examination	**Baseline SpO2 (oxygen saturation at periphery)**:		
	Baseline SpO2 (oxygen saturation at periphery)	99 %	(No range available)

09-Apr-2026 Dr Gillian Malcolm Surgery consultation

09-Apr-2026 Ms Sara Carmichael Other

20-Mar-2026 Ms Nicola May Administration

Administration (P3)	Patient registration

16-Mar-2026 Mrs Julie Mcquillan Surgery consultation

Intervention (P3)	Medication requested Pt requesting Famotidine 40mg tablets, Peppermint oil capsules, Pizotifen 1.5mg, Lodine 60mcg, Bisacodyl 5mg and Luforbec mcg
Intervention (P3)	Drug not issued OS pizotifen - pt now on AMT and was given acute migraine Tx at last consult

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13-Mar-2026 Dr Marisa Jackson Surgery consultation

Examination	O/E - blood pressure reading	130 / 90 mm Hg
Administration (P3)	Consultation headaches ongoing for last couple of months note new patient to practice, discussed that when was in beith only approx 1 month ago was admitte to hospital with headaches ?bleed. Had CT scan which was reassuring and was discharged. Have no notes through about this yet. Reports increase in headaches a few times a week sinceLocalises to only right side of head around eye , comes on intensely and when occurs sensitive to sound and light has to lie in dark room associated hazy vision when occurs but no visual changes out-with this. feels nauseus when occurs, has not been sick. discussed triggers - drinks 20 + cups of coffee per day!also lots of stress, recently out of prison after being incarcerated for 12 years for homicidehas a female *****, ***** her, changed area from where crime happened and making a new life for self- has *****, lots of stress with all recent adjustments to life outside prison. O/E well today, alert, orientated, CN intact, no focal neuroimp: strongly suggestive of migrainenote already on Amitriptyline 50 mg nocte which can be used as migraine preventionneed to address caffeine intake/ stress /sleep / healthy daily habits can trial triptan and anti-emetic for when headache occursmake appt for eye check - explained how to do so as was unsurekeep headache diary and can attend for r/v after this / WSG.also mentioned psoriasis - few patches on fingers and extensor below. tried hydrocortisone from pharmacy but did not helpalso wanted to discuss an gyn issue regarding extra labial tissue that thought was being referred to see gyn was in prison, again no notes, advised needs further appt for this but sounds more cosmetic to me...	

12-Mar-2026 Ms Claire Weaver Administration

12-Mar-2026 Mrs Julie Mcquillan Surgery consultation

12-Feb-2026 Mrs Julie Mcquillan Surgery consultation

Intervention (P3)	Medication requested pregabalin, AMT - as per new pt appt. See page 6 of 7of docman pt record	

22-Jan-2026 Mrs Liz Kinnaird Third Party Consultation

Administration (P3)	Letter received Admin Kittoch Medical Practice L63250 Kittoch Medical Practice	

20-Jan-2026 Dr Gillian Malcolm Surgery consultation

Intervention (P3)	Had a chat to patient new patient to area, came from Ayr, no longer on licence but has a ***** from *****'s trust, out of prison 2 years ago for homicide. Had a traumatic past, no alcohol and no drugs now, no self ***** for 9 years, seen ***** last summer. Moved here alone, has friends, not in contact with family. Says had bene abused as a ***** and mental health difficulties from this. has a summary of her meds on phone, will get her to give this to reception.	

16-Jan-2026 Ms Shannon Mooney Administration

Administration (P3)	SMS text message sent to patient Please contact the Kittoch Practice between 10am-4pm as we have a message for you. Inform reception that the message is in the admin column 16/01. Thank you	

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16-Jan-2026 Sister Christine Jump Surgery consultation

Management	New patient consultation - written in retrospect as patient not on computer system at time of appointment on 13/1/26PMH - arthritis, post concussion syndrome, psoriasis, coeliac disease, lactose intolerant, asthmaMEDS - inhers ?fostair or clenil, salbutamol, amitriptyline ALLERGIES - glutenFH - T1D, throat/mouth cancer, *****; breast cancer, ***** auntWas in prison for 12 years. Recently released. requesting amitriptyline. Not on computer system so not issued.	
Examination	O/E - blood pressure reading	132 / 82 mm Hg
Administration (P3)	Administration NOS Requesting amitriptyline Not issued as previous notes not available	
Examination	Ex smoker - VAPES	/ / cigarettes / cigars / tobacco
Examination	O/E - weight	82.5 Kg
Examination	Body Mass Index	29.2
Examination	O/E - height	1.68 m

16-Jan-2026 Ms Shannon Mooney Administration

Administration (P3)	Patient's ***** ***** Black 07557422503	
Symptom (P3)	User of electronic cigarette	
Administration (P3)	Consent given for communication by SMS text messaging	
Examination	Ex smoker	/ / cigarettes / cigars / tobacco
Examination	Stopped drinking alcohol	units per week
Administration	White: Scottish - Scotland ethnic category 2011 census	

16-Jan-2026 Ms Shannon Mooney Administration

16-Jan-2026 Ms Shannon Mooney Administration

24-Aug-2010 Dr Staff Unknown Member of Staff Other

Administration (P2)	GP22-practice changed-moved

03-Jun-2010 Ms A Midwife Other

Administration (P3)	Seen in GP's surgery ?14wks,bp110/58?lmp26.02.10 ,scan arranged for tuesday08/06/10,bookin appointment for 09/06/10.

28-May-2010 Dr Karen Macrae Other

Administration (P3)	Seen in GP's surgery phone call from gender based violence officer at rhsc re this patient had phonecall from aikenhead ***** station re this girl who claimed to be 14/52 ***** with ***** background of concern re violence with regard to her ***** v little info re this girl currently in homeless accommodation in Glasgow apparently says had a ***** 8 years ago no note of this in old notes

15-Sept-2009 Dr Staff Unknown Member of Staff Other

Administration (P3)	Patient encounter data NOS SW - PLEASE ASK PATIENT TO CONFIRM ADDRESS

10-Aug-2009 Dr Staff Unknown Member of Staff Other

Administration (P3)	Patient encounter data NOS dental abscess - attened A/E there --> name on form is georgina mcmillan and different address - will ask staff to check

25-Jun-2009 Dr Colin Wilson Other

Administration (P3)	Patient encounter data NOS 3-4/12 ***** abd pain cramps vomiting, several times - no loose bowels - 24/hours , no pv bleeding boe=els ok hot and cold - advice fluids wsg - to contact if bleeding or inc abd pain

16-Jun-2009 Dr Staff Unknown Member of Staff Other

Administration (P3)	Notes summary on computer

15-Jun-2009 Dr Staff Unknown Member of Staff Other

Administration (P2)	Patient MRE received from HB

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03-Jun-2009 Dr Staff Unknown Member of Staff Other

Administration (P2)	Pat. GP7B/GP8B card from HB	

02-Jun-2009 Dr Colin Wilson Other

Intervention (P3)	Smoking cessation advice	
Examination (P3)	O/E - blood pressure reading	112 / 80 mm Hg
Administration (P3)	Seen in GP's surgery pdt +ve LMP, APPOX 3/04/09,new *****,not ***** of *****,not working, ***** *****,***** homes during teenage years,phone contact with *****,no contact with *****, has had some lower abd pain, some vomiting ,tired-- bp 112/80,start folic acid 4 00mg smoker 5 cigs day, pdt test, return for referal	
Examination (P3)	Current smoker	0 / / cigarettes / cigars / tobacco

01-Jun-2009 Dr Staff Unknown Member of Staff Other

Administration (P2)	Patient reg. form sent to HB	
Administration (P3)	White British	
Examination (P3)	Current smoker	0 / / cigarettes / cigars / tobacco
Examination (P3)	Teetotaller	0 units per week

06-Apr-2009 Dr Staff Unknown Member of Staff Other

Diagnosis (P2)	Overdose of drug Metronidazole tabs	

01-Dec-2008 Dr Staff Unknown Member of Staff Other

Intervention (P2)	Ultrasound of abdomen	
Intervention (P2)	Ultrasound of pelvis	
Diagnosis (P2)	GB calcul.- no cholecystitis	

16-July-2008 Dr Staff Unknown Member of Staff Other

Diagnosis (P2)	Female pelvic inflam.dis.NOS	

30-May-2003 Dr Staff Unknown Member of Staff Other

Symptom (P2)	Nocturnal enuresis Secondary	

05-Sept-1998 Dr Staff Unknown Member of Staff Other

Diagnosis (P2)	Stomatitis - herpetic	

24-Oct-1994 Dr Staff Unknown Member of Staff Other

Examination (P2)	Soft systolic murmur innocent	

08-Apr-1993 Dr Staff Unknown Member of Staff Other

Diagnosis (P2)	Infectious gastroenteritis	

02-May-1992 Dr Staff Unknown Member of Staff Other

Diagnosis (P2)	Whooping cough	

Medications (inc. issues)

Acute

11-Jun-2026 Pizotifen 1.5mg tablets
56 tablet - ONE AT NIGHT

11-Jun-2026 Etodolac 600mg modified-release tablets
30 tablet - TAKE 1 TABLET ONCE A DAY

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11-Jun-2026 Famotidine 20mg tablets
56 tablet - TWO ONCE DAILY

11-Jun-2026 Peppermint oil 0.2ml gastro-resistant capsules
84 capsule - ONE THREE TIMES A DAY

16-Mar-2026 Bisacodyl 5mg gastro-resistant tablets
56 tablet - TAKE 1 TO 2 TABLETS ONCE A DAY

16-Mar-2026 Luforbec 100micrograms/dose / 6micrograms/dose inhaler (L...
120 dose - ONE PUFF TWICE A DAY. ONE PUFF WHEN REQUIRED FOR RELIEF OF SYMPTOMS. MAX OF 8 PUFFS DAILY

Repeat

16-Mar-2026 Luforbec 100micrograms/dose / 6micrograms/dose inhaler (L...
120 dose - ONE PUFF TWICE A DAY. ONE PUFF WHEN REQUIRED FOR RELIEF OF SYMPTOMS. MAX OF 8 PUFFS DAILY

16-Mar-2026 Peppermint oil 0.2ml gastro-resistant capsules
84 capsule - ONE THREE TIMES A DAY

16-Mar-2026 Famotidine 20mg tablets
56 tablet - TWO ONCE DAILY

16-Mar-2026 Bisacodyl 5mg gastro-resistant tablets
56 tablet - TAKE 1 TO 2 TABLETS ONCE A DAY

16-Mar-2026 Etodolac 600mg modified-release tablets
30 tablet - TAKE 1 TABLET ONCE A DAY

Past

11-Jun-2026 Fexofenadine 120mg tablets Acute Medication (Past)
60 tablet - TAKE 1 TABLET ONCE A DAY

01-Jun-2026 Pregabalin 25mg capsules Acute Medication (Past)
56 capsule - ONE CAPSULE TWICE A DAY - TOTAL DOSE 175MG TWICE A DAY

01-Jun-2026 Pregabalin 150mg capsules Acute Medication (Past)
56 capsule - ONE CAPSULE TWICE A DAY

01-Jun-2026 Amitriptyline 50mg tablets Acute Medication (Past)
28 tablet - 1 TABLET(S) AT NIGHT

05-May-2026 Amitriptyline 50mg tablets Acute Medication (Past)
28 tablet - 1 TABLET(S) AT NIGHT

05-May-2026 Pregabalin 25mg capsules Acute Medication (Past)
56 capsule - ONE CAPSULE TWICE A DAY - TOTAL DOSE 175MG TWICE A DAY

05-May-2026 Pregabalin 150mg capsules Acute Medication (Past)
56 capsule - ONE CAPSULE TWICE A DAY

14-Apr-2026 Nitrofurantoin 100mg modified-release capsules Acute Medication (Past)
6 capsule - TAKE 1 CAPSULE TWICE A DAY

09-Apr-2026 Amitriptyline 50mg tablets Acute Medication (Past)
28 tablet - 1 TABLET(S) AT NIGHT

09-Apr-2026 Pregabalin 25mg capsules Acute Medication (Past)
56 capsule - ONE CAPSULE TWICE A DAY - TOTAL DOSE 175MG TWICE A DAY

09-Apr-2026 Pregabalin 150mg capsules Acute Medication (Past)
56 capsule - ONE CAPSULE TWICE A DAY

07-Apr-2026 Trimethoprim 200mg tablets Acute Medication (Past)
6 tablet - TAKE ONE TABLET(S) TWICE DAILY Notes for dispenser: OOH Rowlands the Village. SUPPLIED ELSEWHERE - NOT TO BE PRESCRIBED BY GP OR DISPENSED BY COMMUNITY PHARMACY

16-Mar-2026 Etodolac 600mg modified-release tablets Acute Medication (Past)
30 tablet - TAKE 1 TABLET ONCE A DAY

16-Mar-2026 Famotidine 20mg tablets Acute Medication (Past)
56 tablet - TWO ONCE DAILY

16-Mar-2026 Peppermint oil 0.2ml gastro-resistant capsules Acute Medication (Past)
84 capsule - ONE THREE TIMES A DAY

13-Mar-2026 Sumatriptan 50mg tablets Acute Medication (Past)
6 tablet - TAKE 1 TABLET AT ONSET OF MIGRAINE. CAN REPEAT DOSE AFTER TWO HOURS IF MIGRAINE RECURS

13-Mar-2026 Metoclopramide 10mg tablets Acute Medication (Past)
28 tablet - TAKE 1 TABLET THREE TIMES A DAY AS REQUIRED

13-Mar-2026 Betamethasone valerate 0.025%cream Acute Medication (Past)
100 gram - 1 APP ONCE A DAY

13-Mar-2026 ExoCream (Penlan Healthcare Ltd) Acute Medication (Past)
500 gram - 1 APP AS REQUIRED

12-Mar-2026 Amitriptyline 50mg tablets Acute Medication (Past)
28 tablet - 1 TABLET(S) AT NIGHT

12-Mar-2026 Pregabalin 25mg capsules Acute Medication (Past)
56 capsule - ONE CAPSULE TWICE A DAY - TOTAL DOSE 175MG TWICE A DAY

12-Mar-2026 Pregabalin 150mg capsules Acute Medication (Past)
56 capsule - ONE CAPSULE TWICE A DAY

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12-Feb-2026 Amitriptyline 50mg tablets Acute Medication (Past)
28 tablet - 1 TABLET(S) AT NIGHT

12-Feb-2026 Pregabalin 25mg capsules Acute Medication (Past)
56 capsule - ONE CAPSULE TWICE A DAY - TOTAL DOSE 175MG TWICE A DAY

12-Feb-2026 Pregabalin 150mg capsules Acute Medication (Past)
56 capsule - ONE CAPSULE TWICE A DAY

20-Jan-2026 Amitriptyline 50mg tablets Acute Medication (Past)
28 tablet - 1 TABLET(S) AT NIGHT

02-Jun-2009 Folic Acid TABS 400MICROGRAMS Acute Medication (Past)
90 - 1 Tab Daily

Allergies

This section is empty.

Vaccinations

This section is empty.

Referrals

This section is empty.

Test Requests

This section is empty.

Test Results

14-Apr-2026 Sister Christine Jump

Result: O/E - temperature level		
O/E - temperature level	36.8 degC	(No range available)

14-Apr-2026 Sister Christine Jump

Result: Baseline SpO2 (oxygen saturation at periphery)		
Baseline SpO2 (oxygen saturation at periphery)	99 %	(No range available)

Other Items

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Attachments

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NHS Confidential: Personal data about a patient

McMillan, Georgina Dr McCallum and [redacted]
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20** Page number 1

Registration

Ms Georgina McMillan
49[redacted] Avenue
STEVENSTON
KA20 4BN
Telephone: 471960
Contact: 0800 019 7079 (Thro' care worker [redacted]
Email: ?
CHI Number: 0412913127 NHS Number: 662/91/440
Patient ID:
Occupation:
Registered GP: Dr H G McCallum
Repeat Consultation: ?
Registered: 16/12/2008 Confirmed: 16/12/2008
BMI: 24.2 Height: 1.65 m Weight: 66 kg
Parity: 0 Gravida: 0

Service Code: Permanent
DoB: 04/12/1991
Age: 17

Dispensing: No
Road: 0 Water: 0 FootPath: 0
Marital Status: Single
Seen By GP: Dr H G McCallum
Acute Consultation: 26/02/2009
Records Received: 16/01/2009
BP: 100/60

Priority Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier

Repeat Medication

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

Adverse Reactions

[redacted]Code	Description

Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier
16/01/2009	None	Medium	Patient MRE received from HB	
15/01/2009	None	Medium	Patient MRE received from HB	
18/12/2008	None	Medium	Pat. GP7B/GP8B card from HB	
16/12/2008	None	Medium	Patient reg. form sent to HB	
03/11/2008	None	Medium	Pat. GP7B/GP8B card from HB	
03/11/2008	None	Medium	GP22-practice changed-moved	
30/10/2008	None	Medium	Patient reg. form sent to HB	
06/04/2009	None	Low	Discharge letter sent to general practitioner	
Freetext:	self poisoning			
26/02/2009	None	Low	Abdominal pain type	Recurrence
12/02/2009	None	Low	Notes summary on computer	
02/02/2009	02/02/2009	Low	Feeling stressed	1st
15/01/2009	15/01/2009	Low	Eczema NOS	1st
Freetext:	SCALP			
15/01/2009	15/01/2009	Low	Gallstones	1st
09/12/2008	09/12/2008	Low	Feeling stressed	1st

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NHS Confidential: Personal data about a patient

McMillan, Georgina Dr McCallum and [redacted]
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20** Page number 2

03/12/2008	None	Low	Gallstones	
01/12/2008	None	Low	Gallstones	
03/11/2008	03/11/2008	Low	Abdominal distension symptom	1st
30/10/2008	None	Low	Body mass [redacted] index 25-29 - overweight	
30/10/2008	None	Low	Never smoked tobacco	
30/10/2008	None	Low	No family history diabetes	
30/10/2008	None	Low	No FH: ischaemic heart disease	
[redacted]	None	Low	Teetotaller	
30/10/2008	None	Low	White Scottish	
27/10/2008	None	Low	New patient health check	Start
18/02/2005	None	Low	Acne keloid	
29/05/2003	None	Low	Nocturnal enuresis	
05/09/1998	None	Low	Stomatitis - herpetic	
24/10/1994	None	Low	Soft systolic [redacted]	
08/04/1993	None	Low	Gastroenteritis	

Screening

07/08/1997	**3rd Primary Immunis.$$**	Third DTP/HIB + Polio	
Repeat after an Interval - 40 Weeks		Do not send recall letter	Do not send result letter
05/03/1996	**Preschool Immunis.$$**	Booster DT(double)+polio vacc.	
No Action Required		Do not send recall letter	Do not send result letter
08/09/1993	**Hib Imm(over 13 Mth)$$**	Single Hib vaccination	
No Action Required		Do not send recall letter	Do not send result letter
07/09/1993	**Mmr Immunis.$$**	Measles/mumps/rubella vaccn.	
No Action Required		Do not send recall letter	Do not send result letter
08/07/1992	**2nd Primary Immunis.$$**	Second DTP/HIB + Polio	
Repeat after an Interval - 4 Weeks		Do not send recall letter	Do not send result letter
28/05/1992	**1st Primary Immunis.$$**	First DTP/HIB + Polio	
Repeat after an Interval - 4 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**	
18/02/2009	Low	Crosshouse Hospital Dr C[redacted]	General Surgery	Not Specified 1st Visit	Out Patient

Acute Prescriptions

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NHS Confidential: Personal data about a patient

McMillan, Georgina Dr McCallum and [redacted]
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20** Page number 3

Drug/Preparation	Quantity/Dose/Frequency	Date
Tramadol Hydrochloride CAPS 50MG	30 1 Cap qid prn	26/02/2009
Buscopan TABS 10MG	56 1 or 2 Tabs 4 times daily	26/02/2009
Amoxicillin CAPS 250MG	21 1 Cap 3 times daily	26/02/2009
Metronidazole TABS 400MG	21 1 Tab 3 times daily	26/02/2009
Lyclear Dermal CREAM 5%	30g Apply [redacted]	26/02/2009
Ketoconazole Shampoo 2%	120 Apply twice weekly	15/01/2009
Capasal Shampoo	250 Apply Daily	15/01/2009

Inactive Repeat Drugs

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

Last Encounter

adcarolholden Date: 23/04/2009

Clinical / User Markers:

Discharge letter sent to general practitioner - - self poisoning

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Dr H O McCallum Date: 26/02/2009

abdo pain 3 right hypochondrial pain and tenderness

Clinical / User Markers:

Abdominal pain type - Recurrence -

Acute Prescriptions:

Tramadol Hydrochloride - CAPS 50MG	1 Cap - qid prn	30
Buscopan - TABS 10MG	1 or 2 Tabs - 4 times daily	56
Amoxicillin - CAPS 250MG	1 Cap - 3 times [redacted]	21
Metronidazole - TABS 400MG	1 Tab - 3 times daily	21
Lyclear - Dermal CREAM 5%	Apply - Daily	30g

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Dr C Martin Date: 12/02/2009

notes checked. cm

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Clinical / User Markers:

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McMillan, Georgina Dr McCallum and Partners
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20** Page number 4

Gallstones - -

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adcarolholden Date: 12/02/2009

Screening:

1st Primary Immunis.$$ - First DTP/HIB + Polio - Repeat after an Interval - (Review 4W)

2nd Primary [redacted].$$ - Second DTP/HIB + Polio - Repeat after an Interval - (Review 4W)

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

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

3rd Primary Immunis.$$ - Third DTP/HIB + Polio - Repeat after an Interval - (Review 40W)

Hib Imm(over 13 Mth)$$ - Single Hib vaccination - No Action Required

Hib Imm(over 13 Mth)$$ - Single Hib vaccination - No Action Required

3rd Primary Immunis.$$ - Third DTP/HIB + Polio - Repeat after an Interval - (Review 40W)

2nd Primary Immunis.$$ - Second DTP/HIB + Polio - Repeat after an Interval - (Review 4W)

1st Primary Immunis.$$ - First DTP/HIB + Polio - Repeat after an Interval - (Review 4W)

Clinical / User Markers:

Acne keloid - -

Gastroenteritis - -

Nocturnal enuresis - -

Notes summary on computer - -

Soft systolic [redacted] - -

Stomatitis - herpetic - -

==========

Dr C Martin Date: 10/02/2009

SCI Electronic Referral

Referrals:

Crosshouse Hospital(NHS) General Surgery Out Patient

==========

==========

Dr C Martin Date: 02/02/2009

stressed 1 moving house this week. c/o stress due to move into new flat in wallace ave. doesn't feel fit to work this week. advised re self certificate

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McMillan, Georgina
DoB: 04/12/1991

Report Valid On 10/06/09 10:20

Dr McCallum and Partners
Page number 5

Clinical / User Markers:

Feeling stressed - 1st -

==========

Triage Date: 29/01/2009

JB. PV & PR bleeding. States is pregnant. No idea of LMP. Implanon removed last yr sometime- note of insertion but not removal. Not seen midwife. Home test- sure positive. Given number of EPAS. Will follow-up with HV.

==========

Automatically generated by transaction

Clinical / User Markers:

Patient MRE received from HB - -

==========

Dr C Martin Date: 15/01/2009

gall stone 1 scalp [redacted] symptoms of bloating / esp after meals. ref sopd. also scalp eczema

Clinical / User Markers:

Eczema NOS - 1st - SCALP

Gallstones - 1st -

Acute Prescriptions:

Ketoconazole - Shampoo 2%	Apply - twice weekly	120
Capasal - Shampoo	Apply - Daily	250

==========

Automatically generated by transaction

Clinical / User Markers:

Patient MRE received from HB - -

==========

Automatically generated by transaction

Clinical / User Markers:

Pat. GP7B/GP8B card from HB - -

==========

Clinical / User Markers:

Summary Sheet: Data Protection

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Gallstones - -

==========

Automatically generated by transaction

Clinical / User Markers:

Patient reg. form sent to HB - -

==========

Automatically generated by transaction

Clinical / User Markers:

GP22-practice changed-moved - -

==========

Dr Convery Date: 09/12/2008

stress 1 attacked few weeks ago, says been XH but no report. frightened to go out alone, works cafe- lacks control re who comes in. says repeatedly raped in past. had counselling. agree to cf 8-22/12 on condition she accept shormal to feel like this,

keeps going out albeit with company, and also takes exercise etc.

Clinical / User Markers:

Feeling stressed - 1st -

==========

Triage Date: 27/11/2008

JB. Looking for s/line. "Jumped" last w/end. States attended A&E- no letter given. Ribs bruised & painful. Advised re self cert x 1st 7 days. If [redacted] too unwell thereafter will need GP appt.

==========

Automatically generated by transaction

Clinical / User Markers:

Pat. GP7B/GP8B card from HB - -

==========

Dr Convery Date: 03/11/2008

abdo distension 1. fullness suprapubic/umbilical region. u/s

Clinical / User Markers:

Abdominal distension symptom - 1st -

==========

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McMillan, Georgina
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20**

Clinical / User Markers:

Body mass index index 25-29 - overweight - -

Never smoked tobacco - -

No family history diabetes - -

No FH: Ischaemic heart disease - -

Teetotaller - -

White Scottish - -

Disease Protocol Sessions:

Acute - 1st SPICE Index	30/10/2008	Recall Period - N/A
Acute - SPICE Basic Health Values	30/10/2008	Recall Period - N/A

==========

Automatically generated by transaction

Clinical / User Markers:

Patient reg. [redacted] sent to HB - -

==========

Practice Nurse [redacted] Date: 27/10/2008

n/p med 2 thinks may be [redacted] implanon removed 4/52 ago to give sample for preg test declined condoms

Clinical / User Markers:

New patient health check - Start -

==========

==========

Appointments List:

Dr H G McCallum	Feb 26 2009 4:40PM	
Dr [redacted]	Feb 2 2009 9:40AM	
Triage	[redacted] 29 2009 9:35AM	471968[redacted] ? weeks bleeding us
Dr C Martin	Jan 16 2009 11:10AM	ref sopd
Dr C Martin	Jan 15 2009 2:20PM	
Dr Convery	Dec 9 2008 3:30PM	
Triage	Nov 27 2008 9:00AM	07546076065 wanting to discuss doctor's line
Dr Convery	Nov 3 2008 5:00PM	

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NHS Confidential: Personal data about a patient

McMillan, Georgina
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20**

Dr McCallum and [redacted]
Page number 8

Practice Nurse [redacted] Oct 27 2008 2:40PM

Last 4 Clinical Notes

Date	Clinical Notes
26/02/2009	abdo pain 3 right hypochondrial pain and tenderness
12/02/2009	notes checked. cm
10/02/2009	SCI Electronic Referral
02/02/2009	stressed 1 moving house this week. c/o stress due to move into new flat in [redacted] ave. doesn't feel fit to work this week. advised re self certificate

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McMillan, Georgina Dr McCallum and [redacted]
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20** Page number 1

Registration

Ms Georgina McMillan
49[redacted] Avenue
STEVENSTON
KA20 4BN
Telephone: 471960
Contact: 0800 019 7079 (Thro' care worker [redacted]
Email ?
CHI Number: 0412913127 NHS Number: 662/91/440
Patient ID:
Occupation:
Registered GP: Dr H G McCallum
Repeat Consultation: ?
Registered: 16/12/2008 Confirmed: 16/12/2008
BMI: 24.2 Height: 1.65 m Weight: 66 kg
Parity: 0 Gravida: 0

Service Code: Permanent
DoB: 04/12/1991
Age: 17
Dispensing: No
Road: 0 Water: 0 FootPath: 0
Marital Status: Single
Seen By GP: Dr H G McCallum
Acute Consultation: 26/02/2009
Records Received: 16/01/2009
BP: 100/60

Priority Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier

Repeat Medication

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

Adverse Reactions

[redacted]Code	Description

Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier
16/01/2009	None	Medium	Patient MRE received from HB	
15/01/2009	None	Medium	Patient MRE received from HB	
18/12/2008	None	Medium	Pat. GP7B/GP8B card from HB	
16/12/2008	None	Medium	Patient reg. form sent to HB	
03/11/2008	None	Medium	Pat. GP7B/GP8B card from HB	
03/11/2008	None	Medium	GP22-practice changed-moved	
30/10/2008	None	Medium	Patient reg. form sent to HB	
06/04/2009	None	Low	Discharge letter sent to general practitioner	
Freetext:	self poisoning			
26/02/2009	None	Low	Abdominal pain type	Recurrence
12/02/2009	None	Low	Notes summary on computer	
02/02/2009	02/02/2009	Low	Feeling stressed	1st
15/01/2009	15/01/2009	Low	Eczema NOS	1st
Freetext:	SCALP			
15/01/2009	15/01/2009	Low	Gallstones	1st
09/12/2008	09/12/2008	Low	Feeling stressed	1st

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McMillan, Georgina Dr McCallum and [redacted]
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20** Page number 2

03/12/2008	None	Low	Gallstones	
01/12/2008	None	Low	Gallstones	
03/11/2008	03/11/2008	Low	Abdominal distension symptom	1st
30/10/2008	None	Low	Body mass [redacted] index 25-29 - overweight	
30/10/2008	None	Low	Never smoked tobacco	
30/10/2008	None	Low	No family history diabetes	
30/10/2008	None	Low	No FH: ischaemic heart disease	
[redacted]	None	Low	Teetotaller	
30/10/2008	None	Low	White Scottish	
27/10/2008	None	Low	New patient health check	Start
18/02/2005	None	Low	Acne keloid	
29/05/2003	None	Low	Nocturnal enuresis	
05/09/1998	None	Low	Stomatitis - herpetic	
24/10/1994	None	Low	Soft systolic [redacted]	
08/04/1993	None	Low	Gastroenteritis	

Screening

07/08/1997	**3rd Primary Immunis.$$**	Third DTP/HIB + Polio	
Repeat after an Interval - 40 Weeks		Do not send recall letter	Do not send result letter
05/03/1996	**Preschool Immunis.$$**	Booster DT(double)+polio vacc.	
No Action Required		Do not send recall letter	Do not send result letter
08/09/1993	**Hib Imm(over 13 Mth)$$**	Single Hib vaccination	
No Action Required		Do not send recall letter	Do not send result letter
07/09/1993	**Mmr Immunis.$$**	Measles/mumps/rubella vaccn.	
No Action Required		Do not send recall letter	Do not send result letter
08/07/1992	**2nd Primary Immunis.$$**	Second DTP/HIB + Polio	
Repeat after an Interval - 4 Weeks		Do not send recall letter	Do not send result letter
28/05/1992	**1st Primary Immunis.$$**	First DTP/HIB + Polio	
Repeat after an Interval - 4 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**	
18/02/2009	Low	Crosshouse Hospital	General Surgery	Not Specified	Out Patient
		Dr C[redacted]		1st Visit	

Acute Prescriptions

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McMillan, Georgina Dr McCallum and [redacted]
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20** Page number 3

Drug/Preparation	Quantity/Dose/Frequency	Date
Tramadol Hydrochloride CAPS 50MG	30 1 Cap qid prn	26/02/2009
Buscopan TABS 10MG	56 1 or 2 Tabs 4 times daily	26/02/2009
Amoxicillin CAPS 250MG	21 1 Cap 3 times daily	26/02/2009
Metronidazole TABS 400MG	21 1 Tab 3 times daily	26/02/2009
Lyclear Dermal CREAM 5%	30g Apply [redacted]	26/02/2009
Ketoconazole Shampoo 2%	120 Apply twice weekly	15/01/2009
Capasal Shampoo	250 Apply Daily	15/01/2009

Inactive Repeat Drugs

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

Last Encounter

adcarolholden Date: 23/04/2009

Clinical / User Markers:

Discharge letter sent to general practitioner - - self poisoning

==========

Dr H O McCallum Date: 26/02/2009

abdo pain 3 right hypochondrial pain and tenderness

Clinical / User Markers:

Abdominal pain type - Recurrence -

Acute Prescriptions:

Tramadol Hydrochloride - CAPS 50MG	1 Cap - qid prn	30
Buscopan - TABS 10MG	1 or 2 Tabs - 4 times daily	56
Amoxicillin - CAPS 250MG	1 Cap - 3 times [redacted]	21
Metronidazole - TABS 400MG	1 Tab - 3 times daily	21
Lyclear - Dermal CREAM 5%	Apply - Daily	30g

==========

Dr C Martin Date: 12/02/2009

notes checked. cm

==========

Clinical / User Markers:

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McMillan, Georgina Dr McCallum and Partners
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20** Page number 4

Gallstones - -

==========

==========

adcarolholden Date: 12/02/2009

Screening:

1st Primary Immunis.$$ - First DTP/HIB + Polio - Repeat after an Interval - (Review 4W)

2nd Primary [redacted] $$ - Second DTP/HIB + Polio - Repeat after an Interval - (Review 4W)

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

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

3rd Primary Immunis.$$ - Third DTP/HIB + Polio - Repeat after an Interval - (Review 40W)

Hib Imm(over 13 Mth)$$ - Single Hib vaccination - No Action Required

Hib Imm(over 13 Mth)$$ - Single Hib vaccination - No Action Required

3rd Primary Immunis.$$ - Third DTP/HIB + Polio - Repeat after an Interval - (Review 40W)

2nd Primary Immunis.$$ - Second DTP/HIB + Polio - Repeat after an Interval - (Review 4W)

1st Primary Immunis.$$ - First DTP/HIB + Polio - Repeat after an Interval - (Review 4W)

Clinical / User Markers:

Acne keloid - -

Gastroenteritis - -

Nocturnal enuresis - -

Notes summary on computer - -

Soft systolic [redacted] - -

Stomatitis - herpetic - -

==========

Dr C Martin Date: 10/02/2009

SCI Electronic Referral

Referrals:

Crosshouse Hospital(NHS) General Surgery Out Patient

==========

==========

Dr C Martin Date: 02/02/2009

stressed 1 moving house this week. c/o stress due to move into new flat in wallace ave. doesn't feel fit to work this week. advised re self certificate

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McMillan, Georgina
DoB: 04/12/1991

Report Valid On 10/06/09 10:20

Dr McCallum and Partners
Page number 5

Clinical / User Markers:

Feeling stressed - 1st -

==========

Triage Date: 29/01/2009

JB. PV & PR bleeding. States is pregnant. No idea of LMP. Implanon removed last yr sometime- note of insertion but not removal. Not seen midwife. Home test- sure positive. Given number of EPAS. Will follow-up with HV.

==========

Automatically generated by transaction

Clinical / User Markers:

Patient MRE received from HB - -

==========

Dr C Martin Date: 15/01/2009

gall stone 1 scalp [redacted] symptoms of bloating / esp after meals. ref sopd. also scalp eczema

Clinical / User Markers:

Eczema NOS - 1st - SCALP

Gallstones - 1st -

Acute Prescriptions:

Ketoconazole - Shampoo 2%	Apply - twice weekly	120
Capasal - Shampoo	Apply - Daily	250

==========

Automatically generated by transaction

Clinical / User Markers:

Patient MRE received from HB - -

==========

Automatically generated by transaction

Clinical / User Markers:

Pat. GP7B/GP8B card from HB - -

==========

Clinical / User Markers:

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McMillan, Georgina Dr McCallum and Partners
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20** Page number 6

Gallstones - -

==========

Automatically generated by transaction

Clinical / User Markers:

Patient reg. form sent to HB - -

==========

Automatically generated by transaction

Clinical / User Markers:

GP22-practice changed-moved - -

==========

Dr Convery Date: 09/12/2008

stress 1 attacked few weeks ago, says been XH but no report. frightened to go out alone, works cafe- lacks control re who comes in. says repeatedly raped in past. had counselling. agree to cf 8-22/12 on condition she accept shormal to feel like this,

keeps going out albeit with company, and also takes exercise etc.

Clinical / User Markers:

Feeling stressed - 1st -

==========

Triage Date: 27/11/2008

JB. Looking for s/line. "Jumped" last w/end. States attended A&E- no letter given. Ribs bruised & painful. Advised re self cert x 1st 7 days. If [redacted] too unwell thereafter will need GP appt.

==========

Automatically generated by transaction

Clinical / User Markers:

Pat. GP7B/GP8B card from HB - -

==========

Dr Convery Date: 03/11/2008

abdo distension 1. fullness suprapubic/umbilical region. u/s

Clinical / User Markers:

Abdominal distension symptom - 1st -

==========

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McMillan, Georgina
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20**

Dr McCallum and Partners
Page number 7

Clinical / User Markers:

Body mass index index 25-29 - overweight - -

Never smoked tobacco - -

No family history diabetes - -

No FH: ischaemic heart disease - -

Teetotaller - -

White Scottish - -

Disease Protocol Sessions:

Acute - 1st SPICE Index 30/10/2008 Recall Period - N/A

Acute - SPICE Basic Health Values 30/10/2008 Recall Period - N/A

==========

Automatically generated by transaction

Clinical / User Markers:

Patient reg. [redacted] sent to HB - -

==========

Practice Nurse [redacted] Date: 27/10/2008

n/p med 2 thinks may be [redacted] implanon removed 4/52 ago to give sample for preg test declined condoms

Clinical / User Markers:

New patient health check - Start -

==========

==========

Appointments List:

Dr H G McCallum	Feb 26 2009 4:40PM	
Dr [redacted]	Feb 2 2009 9:40AM	
Triage	[redacted] 29 2009 9:35AM	471968[redacted] ? weeks bleeding us
Dr C Martin	Jan 16 2009 11:10AM	ref sopd
Dr C Martin	Jan 15 2009 2:20PM	
Dr Convery	Dec 9 2008 3:30PM	
Triage	Nov 27 2008 9:00AM	07546076065 wanting to discuss doctor's line
Dr Convery	Nov 3 2008 5:00PM	

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McMillan, Georgina
DoB: 04/12/1991

Report Valid On 10/06/09 10:20

Dr McCallum and [redacted]
Page number 8

Practice Nurse [redacted]

Oct 27 2008 2:40PM

Last 4 Clinical Notes

Date	Clinical Notes
26/02/2009	abdo pain 3 right hypochondrial pain and tenderness
12/02/2009	notes checked. cm
10/02/2009	SCI Electronic Referral
02/02/2009	stressed 1 moving house this week. c/o stress due to move into new flat in [redacted] ave. doesn't feel fit to work this week. advised re self certificate

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New Patient Health Information

Please could you provide the following information?

Name: Georgina Smith

DOB: 4/12/91

Address: 73 Westermains bank Ave.
Airdrie

Marital status :

Tel number Home
Mobile

Height ---------- Weight ----------

Do you smoke? (yes)/no amount per week ---10---

Do you drink alcohol? yes/(no) amount per week ----------

Do you exercise regularly ? yes/no hours per week ----------

Do you suffer from any of the following conditions:

If so please circle appropriately

Cancer	Asthma/COPD
Stroke/TIA	Severe Mental Illness
Diabetes	Depression
Memory Problems	Chronic Kidney Disease
Angina/Heart Disease	Epilepsy
High Blood Pressure	Hypothyroidism
Atrial fibrillation	

Do you attend any Specialist Hospital Clinic:

.....

Date: .....

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NHS Confidential: Personal data about a patient

ANNEX D

WELLWYND PRACTICE : PATIENT QUESTIONNAIRE

This short questionnaire will give surgery staff some basic information about your communication support needs and ethnicity to support your health care. More information about it is on the back of this form but please ask a member of staff if you need more explanation.
We should be grateful if you could complete one for each family member within/joining the practice.

Name GEORGINA SMITH **DOB** 04/12/91

Do you need an interpreter or sign language support? ☐ Yes ☑ No

If you do need an interpreter what language do you speak?

Please state .....

What is your ethnic group?
Choose **ONE** section from A to E then tick **ONE** box which **best describes** your ethnic group or background

A White
- ☑ Scottish
- ☐ English
- ☐ Welsh
- ☐ Northern Irish
- ☐ British
- ☐ Irish
- ☐ Gypsy/Traveller
- ☐ Polish
- ☐ Any other white ethnic group, please write in .....

B Mixed or multiple ethnic groups
- ☐ Any mixed or multiple ethnic groups

C Asian, Asian Scottish or Asian British
- ☐ Pakistani, Pakistani Scottish or Pakistani British
- ☐ Indian, Indian Scottish or Indian British
- ☐ Bangladeshi, Bangladeshi Scottish or Bangladeshi British
- ☐ Chinese, Chinese Scottish or Chinese British
- ☐ Other, please write in.....

D African, Caribbean or Black
- ☐ African, African Scottish or African British
- ☐ Caribbean, Caribbean Scottish or Caribbean British
- ☐ Black, Black Scottish or Black British
- ☐ Other, please write in.....

E Other ethnic group
- ☐ Arab
- ☐ Other, please write in.....

If you do not wish to give this information, please tick here ☐

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NHS Confidential: Personal data about a patient

McMillan, Georgina Dr McCallum and [redacted]
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20** Page number 1

Registration

Ms Georgina McMillan
49 [redacted] Avenue
STEVENSTON
KA20 4BN
Telephone: 471960
Contact: 0800 019 7079 (Thro' care worker [redacted])
Email: ?
CHI Number: 0412913127 NHS Number: 662/91/440
Patient ID:
Occupation:
Registered GP: Dr H G McCallum
Repeat Consultation: ?
Registered: 16/12/2008 Confirmed: 16/12/2008
BMI: 24.2 Height: 1.65 m Weight: 66 kg
Parity: 0 Gravida: 0

Service Code: Permanent
DoB: 04/12/1991
Age: 17

Dispensing: No
Road: 0 Water: 0 FootPath: 0
Marital Status: Single
Seen By GP: Dr H G McCallum
Acute Consultation: 26/02/2009
Records Received: 16/01/2009
BP: 100/60

Priority Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier

Repeat Medication

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

Adverse Reactions

[redacted]Code	Description

Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier
16/01/2009	None	Medium	Patient MRE received from HB	
15/01/2009	None	Medium	Patient MRE received from HB	
18/12/2008	None	Medium	Pat. GP7B/GP8B card from HB	
16/12/2008	None	Medium	Patient reg. form sent to HB	
03/11/2008	None	Medium	Pat. GP7B/GP8B card from HB	
03/11/2008	None	Medium	GP22-practice changed-moved	
30/10/2008	None	Medium	Patient reg. form sent to HB	
06/04/2009	None	Low	Discharge letter sent to general practitioner	
Freetext:	self poisoning			
26/02/2009	None	Low	Abdominal pain type	Recurrence
12/02/2009	None	Low	Notes summary on computer	
02/02/2009	02/02/2009	Low	Feeling stressed	1st
15/01/2009	15/01/2009	Low	Eczema NOS	1st
Freetext:	SCALP			
15/01/2009	15/01/2009	Low	Gallstones	1st
09/12/2008	09/12/2008	Low	Feeling stressed	1st

Summary Sheet: Data Protection Printed at 10/06/2009 10:20:45

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NHS Confidential: Personal data about a patient

McMillan, Georgina
DoB: 04/12/1991

Report Valid On 10/06/09 10:20

Dr McCallum and [redacted]
Page number 2

03/12/2008	None	Low	Gallstones
01/12/2008	None	Low	Gallstones
03/11/2008	03/11/2008	Low	Abdominal distension symptom 1st
30/10/2008	None	Low	Body mass [redacted] index 25-29 - overweight
30/10/2008	None	Low	Never smoked tobacco
30/10/2008	None	Low	No family history diabetes
30/10/2008	None	Low	No FH: ischaemic heart disease
[redacted]	None	Low	Teetotaller
30/10/2008	None	Low	White Scottish
27/10/2008	None	Low	New patient health check Start
18/02/2005	None	Low	Acne keloid
29/05/2003	None	Low	Nocturnal enuresis
05/09/1998	None	Low	Stomatitis - herpetic
24/10/1994	None	Low	Soft systolic [redacted]
08/04/1993	None	Low	Gastroenteritis

Screening

07/08/1997	**3rd Primary Immunis.$$**	Third DTP/HIB + Polio
Repeat after an Interval - 40 Weeks	Do not send recall letter	Do not send result letter
05/03/1996	**Preschool Immunis.$$**	Booster DT(double)+polio vacc.
No Action Required	Do not send recall letter	Do not send result letter
08/09/1993	**Hib Imm(over 13 Mth)$$**	Single Hib vaccination
No Action Required	Do not send recall letter	Do not send result letter
07/09/1993	**Mmr Immunis.$$**	Measles/mumps/rubella vaccn.
No Action Required	Do not send recall letter	Do not send result letter
08/07/1992	**2nd Primary Immunis.$$**	Second DTP/HIB + Polio
Repeat after an Interval - 4 Weeks	Do not send recall letter	Do not send result letter
26/05/1992	**1st Primary Immunis.$$**	First DTP/HIB + Polio
Repeat after an Interval - 4 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**	
18/02/2009	Low	Crosshouse Hospital Dr C[redacted]	General Surgery	Not Specified 1st Visit	Out Patient

Acute Prescriptions

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McMillan, Georgina Dr McCallum and [redacted]
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20** Page number 3

Drug/Preparation	Quantity/Dose/Frequency	Date
Tramadol Hydrochloride CAPS 50MG	30 1 Cap qid prn	26/02/2009
Buscopan TABS 10MG	56 1 or 2 Tabs 4 times daily	26/02/2009
Amoxicillin CAPS 250MG	21 1 Cap 3 times daily	26/02/2009
Metronidazole TABS 400MG	21 1 Tab 3 times daily	26/02/2009
Lyclear Dermal CREAM 5%	30g Apply [redacted]	26/02/2009
Ketoconazole Shampoo 2%	120 Apply twice weekly	15/01/2009
Capasal Shampoo	250 Apply Daily	15/01/2009

Inactive Repeat Drugs

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

Last Encounter

adcarolholden Date: 23/04/2009

Clinical / User Markers:

Discharge letter sent to general practitioner - - self poisoning

==========

Dr H O McCallum Date: 26/02/2009

abdo pain 3 right hypochondrial pain and tenderness

Clinical / User Markers:

Abdominal pain type - Recurrence -

Acute Prescriptions:

Tramadol Hydrochloride - CAPS 50MG	1 Cap - qid prn	30
Buscopan - TABS 10MG	1 or 2 Tabs - 4 times daily	56
Amoxicillin - CAPS 250MG	1 Cap - 3 times [redacted]	21
Metronidazole - TABS 400MG	1 Tab - 3 times daily	21
Lyclear - Dermal CREAM 5%	Apply - Daily	30g

==========

Dr C Martin Date: 12/02/2009

notes checked. cm

==========

Clinical / User Markers:

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Gallstones - -

==========

==========

adcarolholden Date: 12/02/2009

Screening:

1st Primary Immunis.$$ - First DTP/HIB + Polio - Repeat after an Interval - (Review 4W)

2nd Primary [redacted] $$ - Second DTP/HIB + Polio - Repeat after an Interval - (Review 4W)

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

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

3rd Primary Immunis.$$ - Third DTP/HIB + Polio - Repeat after an Interval - (Review 40W)

Hib Imm(over 13 Mth)$$ - Single Hib vaccination - No Action Required

Hib Imm(over 13 Mth)$$ - Single Hib vaccination - No Action Required

3rd Primary Immunis.$$ - Third DTP/HIB + Polio - Repeat after an Interval - (Review 40W)

2nd Primary Immunis.$$ - Second DTP/HIB + Polio - Repeat after an Interval - (Review 4W)

1st Primary Immunis.$$ - First DTP/HIB + Polio - Repeat after an Interval - (Review 4W)

Clinical / User Markers:

Acne keloid - -

Gastroenteritis - -

Nocturnal enuresis - -

Notes summary on computer - -

Soft systolic [redacted] - -

Stomatitis - herpetic - -

==========

Dr C Martin Date: 19/02/2009

SCI Electronic Referral

Referrals:

Crosshouse Hospital(NHS) General Surgery Out Patient

==========

==========

Dr C Martin Date: 02/02/2009

stressed 1 moving house this week. c/o stress due to move into new flat in wallace ave. doesn't feel fit to work this week. advised re self certificate

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McMillan, Georgina
DoB: 04/12/1991

Report Valid On 10/06/09 10:20

Dr McCallum and Partners
Page number 5

Clinical / User Markers:

Feeling stressed - 1st -

==========

Triage Date: 29/01/2009

JB. PV & PR bleeding. States is pregnant. No idea of LMP. Implanon removed last yr sometime- note of insertion but not removal. Not seen midwife. Home test- sure positive. Given number of EPAS. Will follow-up with HV.

==========

Automatically generated by transaction

Clinical / User Markers:

Patient MRE received from HB - -

==========

Dr C Martin Date: 15/01/2009

gall stone 1 scalp [redacted] symptoms of bloating / esp after meals. ref sopd. also scalp eczema

Clinical / User Markers:

Eczema NOS - 1st - SCALP

Gallstones - 1st -

Acute Prescriptions:

Ketoconazole - Shampoo 2%	Apply - twice weekly	120
Capasal - Shampoo	Apply - Daily	250

==========

Automatically generated by transaction

Clinical / User Markers:

Patient MRE received from HB - -

==========

Automatically generated by transaction

Clinical / User Markers:

Pat. GP7B/GP8B card from HB - -

==========

Clinical / User Markers:

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Gallstones - -

==========

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Clinical / User Markers:

Patient reg. form sent to HB - -

==========

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Clinical / User Markers:

GP22-practice changed-moved - -

==========

Dr Convery Date: 09/12/2008

stress 1 attacked few weeks ago, says been XH but no report. frightened to go out alone, works cafe- lacks control re who comes in. says repeatedly raped in past. had counselling. agree to cf 8-22/12 on condition she accept shormal to feel like this,

keeps going out albeit with company, and also takes exercise etc.

Clinical / User Markers:

Feeling stressed - 1st -

==========

Triage Date: 27/11/2008

JB. Looking for s/line. "Jumped" last w/end. States attended A&E- no letter given. Ribs bruised & painful. Advised re self cert x 1st 7 days. If [redacted] too unwell thereafter will need GP appt.

==========

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Clinical / User Markers:

Pat. GP7B/GP8B card from HB - -

==========

Dr Convery Date: 03/11/2008

abdo distension 1. fullness suprapubic/umbilical region. u/s

Clinical / User Markers:

Abdominal distension symptom - 1st -

==========

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McMillan, Georgina
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20**

Clinical / User Markers:

Body mass index index 25-29 - overweight - -

Never smoked tobacco - -

No family history diabetes - -

No FH: ischaemic heart disease - -

Teetotaller - -

White Scottish - -

Disease Protocol Sessions:

Acute - 1st SPICE Index 30/10/2008 Recall Period - N/A

Acute - SPICE Basic Health Values 30/10/2008 Recall Period - N/A

==========

Automatically generated by transaction

Clinical / User Markers:

Patient reg. [redacted] sent to HB - -

==========

Practice Nurse [redacted] Date: 27/10/2008

n/p med 2 thinks may be [redacted] implanon removed 4/52 ago to give sample for preg test declined condoms

Clinical / User Markers:

New patient health check - Start -

==========

==========

Appointments List:

Dr H G McCallum	Feb 26 2009 4:40PM	
Dr [redacted]	Feb 2 2009 9:40AM	
Triage	[redacted] 29 2009 9:35AM	471968[redacted] ? weeks bleeding us
Dr C Martin	Jan 16 2009 11:10AM	ref sopd
Dr C Martin	Jan 15 2009 2:20PM	
Dr Convery	Dec 9 2008 3:30PM	
Triage	Nov 27 2008 9:00AM	07546076065 wanting to discuss doctor's line
Dr Convery	Nov 3 2008 5:00PM	

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McMillan, Georgina
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20**

Dr McCallum and [redacted]
Page number 8

Practice Nurse [redacted] Oct 27 2008 2:40PM

Last 4 Clinical Notes

Date	Clinical Notes
26/02/2009	abdo pain 3 right hypochondrial pain and tenderness
12/02/2009	notes checked. cm
10/02/2009	SCI Electronic Referral
02/02/2009	stressed 1 moving house this week. c/o stress due to move into new flat in [redacted] ave. doesn't feel fit to work this week. advised re self certificate

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New Patient Health Information

Please could you provide the following information?

Name: Georgina Smith

DOB: 4/12/91

Address: 73 Westermains bank Ave.
Airdrie

Marital status :

Tel number Home
Mobile

Height ---------- Weight ----------

Do you smoke? (yes)/no amount per week ---10---

Do you drink alcohol? yes/(no) amount per week ----------

Do you exercise regularly ? yes/no hours per week ----------

Do you suffer from any of the following conditions:

If so please circle appropriately

Cancer	Asthma/COPD
Stroke/TIA	Severe Mental Illness
Diabetes	Depression
Memory Problems	Chronic Kidney Disease
Angina/Heart Disease	Epilepsy
High Blood Pressure	Hypothyroidism
Atrial fibrillation	

Do you attend any Specialist Hospital Clinic:

.....

Date: .....

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ANNEX D

WELLWYND PRACTICE : PATIENT QUESTIONNAIRE

This short questionnaire will give surgery staff some basic information about your communication support needs and ethnicity to support your health care. More information about it is on the back of this form but please ask a member of staff if you need more explanation.
We should be grateful if you could complete one for each family member within/joining the practice.

Name GEORGINA Smith **DOB** 04/12/91

Do you need an interpreter or sign language support? ☐ Yes ☑ No

If you do need an interpreter what language do you speak?

Please state .....

What is your ethnic group?
Choose **ONE** section from A to E then tick **ONE** box which **best describes** your ethnic group or background

A White
- ☑ Scottish
- ☐ English
- ☐ Welsh
- ☐ Northern Irish
- ☐ British
- ☐ Irish
- ☐ Gypsy/Traveller
- ☐ Polish
- ☐ Any other white ethnic group, please write in .....

B Mixed or multiple ethnic groups
- ☐ Any mixed or multiple ethnic groups

C Asian, Asian Scottish or Asian British
- ☐ Pakistani, Pakistani Scottish or Pakistani British
- ☐ Indian, Indian Scottish or Indian British
- ☐ Bangladeshi, Bangladeshi Scottish or Bangladeshi British
- ☐ Chinese, Chinese Scottish or Chinese British
- ☐ Other, please write in.....

D African, Caribbean or Black
- ☐ African, African Scottish or African British
- ☐ Caribbean, Caribbean Scottish or Caribbean British
- ☐ Black, Black Scottish or Black British
- ☐ Other, please write in.....

E Other ethnic group
- ☐ Arab
- ☐ Other, please write in.....

If you do not wish to give this information, please tick here ☐

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ANNEX D

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This short questionnaire will give surgery staff some basic information about your communication support needs and ethnicity to support your health care. More information about it is on the back of this form but please ask a member of staff if you need more explanation.
We should be grateful if you could complete one for each family member within/joining the practice.

Name GEORGINA Smith **DOB** 04/12/91

Do you need an interpreter or sign language support? ☐ Yes ☑ No

If you do need an interpreter what language do you speak?

Please state .....

What is your ethnic group?
Choose **ONE** section from A to E then tick **ONE** box which **best describes** your ethnic group or background

A White
- ☑ Scottish
- ☐ English
- ☐ Welsh
- ☐ Northern Irish
- ☐ British
- ☐ Irish
- ☐ Gypsy/Traveller
- ☐ Polish
- ☐ Any other white ethnic group, please write in .....

B Mixed or multiple ethnic groups
- ☐ Any mixed or multiple ethnic groups

C Asian, Asian Scottish or Asian British
- ☐ Pakistani, Pakistani Scottish or Pakistani British
- ☐ Indian, Indian Scottish or Indian British
- ☐ Bangladeshi, Bangladeshi Scottish or Bangladeshi British
- ☐ Chinese, Chinese Scottish or Chinese British
- ☐ Other, please write in.....

D African, Caribbean or Black
- ☐ African, African Scottish or African British
- ☐ Caribbean, Caribbean Scottish or Caribbean British
- ☐ Black, Black Scottish or Black British
- ☐ Other, please write in.....

E Other ethnic group
- ☐ Arab
- ☐ Other, please write in.....

If you do not wish to give this information, please tick here ☐

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New Patient Health Information

Please could you provide the following information?

Name: Georgina Smith

DOB: 4/12/91

Address: 73 Westermains bank Ave.
AIRDRIE

Marital status :

Tel number Home
Mobile

Height ---------- Weight ----------

Do you smoke? (yes)/no amount per week ---10---

Do you drink alcohol? yes/(no) amount per week ----------

Do you exercise regularly ? yes/no hours per week ----------

Do you suffer from any of the following conditions:

If so please circle appropriately

Cancer	Asthma/COPD
Stroke/TIA	Severe Mental Illness
Diabetes	Depression
Memory Problems	Chronic Kidney Disease
Angina/Heart Disease	Epilepsy
High Blood Pressure	Hypothyroidism
Atrial fibrillation	

Do you attend any Specialist Hospital Clinic:

.....

Date: .....

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New Patient Health Information

Please could you provide the following information?

Name: Georgina Smith

DOB: 4/12/91

Address: 73 Westermains bank Ave.
AIRDRIE

Marital status :

Tel number Home
Mobile

Height ---------- Weight ----------

Do you smoke? (yes)/no amount per week ---10---

Do you drink alcohol? yes/(no) amount per week ----------

Do you exercise regularly ? yes/no hours per week ----------

Do you suffer from any of the following conditions:

If so please circle appropriately

Cancer	Asthma/COPD
Stroke/TIA	Severe Mental Illness
Diabetes	Depression
Memory Problems	Chronic Kidney Disease
Angina/Heart Disease	Epilepsy
High Blood Pressure	Hypothyroidism
Atrial fibrillation	

Do you attend any Specialist Hospital Clinic:

.....

Date: .....

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ANNEX D

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This short questionnaire will give surgery staff some basic information about your communication support needs and ethnicity to support your health care. More information about it is on the back of this form but please ask a member of staff if you need more explanation.
We should be grateful if you could complete one for each family member within/joining the practice.

Name GEORGINA Smith **DOB** 04/12/91

Do you need an interpreter or sign language support? ☐ Yes ☑ No

If you do need an interpreter what language do you speak?

Please state .....

What is your ethnic group?
Choose **ONE** section from A to E then tick **ONE** box which **best describes** your ethnic group or background

A White
- ☑ Scottish
- ☐ English
- ☐ Welsh
- ☐ Northern Irish
- ☐ British
- ☐ Irish
- ☐ Gypsy/Traveller
- ☐ Polish
- ☐ Any other white ethnic group, please write in .....

B Mixed or multiple ethnic groups
- ☐ Any mixed or multiple ethnic groups

C Asian, Asian Scottish or Asian British
- ☐ Pakistani, Pakistani Scottish or Pakistani British
- ☐ Indian, Indian Scottish or Indian British
- ☐ Bangladeshi, Bangladeshi Scottish or Bangladeshi British
- ☐ Chinese, Chinese Scottish or Chinese British
- ☐ Other, please write in.....

D African, Caribbean or Black
- ☐ African, African Scottish or African British
- ☐ Caribbean, Caribbean Scottish or Caribbean British
- ☐ Black, Black Scottish or Black British
- ☐ Other, please write in.....

E Other ethnic group
- ☐ Arab
- ☐ Other, please write in.....

If you do not wish to give this information, please tick here ☐

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McMillan, Georgina Dr McCallum and [redacted]
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20** Page number 1

Registration

Ms Georgina McMillan
49[redacted] Avenue
STEVENSTON
KA20 4BN
Telephone: 471960
Contact: 0800 019 7079 (Thro' care worker [redacted])
Email: ?
CHI Number: 0412913127 NHS Number: 662/91/440
Patient ID:
Occupation:
Registered GP: Dr H G McCallum
Repeat Consultation: ?
Registered: 16/12/2008 Confirmed: 16/12/2008
BMI: 24.2 Height: 1.65 m Weight: 66 kg
Parity: 0 Gravida: 0

Service Code: Permanent
DoB: 04/12/1991
Age: 17

Dispensing: No
Road: 0 Water: 0 FootPath: 0
Marital Status: Single
Seen By GP: Dr H G McCallum
Acute Consultation: 26/02/2009
Records Received: 16/01/2009
BP: 100/60

Priority Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier

Repeat Medication

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

Adverse Reactions

[redacted]Code	Description

Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier
16/01/2009	None	Medium	Patient MRE received from HB	
15/01/2009	None	Medium	Patient MRE received from HB	
16/12/2008	None	Medium	Pat. GP7B/GP8B card from HB	
16/12/2008	None	Medium	Patient reg. form sent to HB	
03/11/2008	None	Medium	Pat. GP7B/GP8B card from HB	
03/11/2008	None	Medium	GP22-practice changed-moved	
30/10/2008	None	Medium	Patient reg. form sent to HB	
06/04/2009	None	Low	Discharge letter sent to general practitioner	
Freetext:	self poisoning			
26/02/2009	None	Low	Abdominal pain type	Recurrence
12/02/2009	None	Low	Notes summary on computer	
02/02/2009	02/02/2009	Low	Feeling stressed	1st
15/01/2009	15/01/2009	Low	Eczema NOS	1st
Freetext:	SCALP			
15/01/2009	15/01/2009	Low	Gallstones	1st
09/12/2008	09/12/2008	Low	Feeling stressed	1st

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McMillan, Georgina
DoB: 04/12/1991

Report Valid On 10/06/09 10:20

Dr McCallum and [redacted]
Page number 2

03/12/2008	None	Low	Gallstones
01/12/2008	None	Low	Gallstones
03/11/2008	03/11/2008	Low	Abdominal distension symptom 1st
30/10/2008	None	Low	Body mass [redacted] index 25-29 - overweight
30/10/2008	None	Low	Never smoked tobacco
30/10/2008	None	Low	No family history diabetes
30/10/2008	None	Low	No FH: ischaemic heart disease
[redacted]	None	Low	Teetotaller
30/10/2008	None	Low	White Scottish
27/10/2008	None	Low	New patient health check Start
18/02/2005	None	Low	Acne keloid
29/05/2003	None	Low	Nocturnal enuresis
05/09/1998	None	Low	Stomatitis - herpetic
24/10/1994	None	Low	Soft systolic [redacted]
08/04/1993	None	Low	Gastroenteritis

Screening

07/08/1997	**3rd Primary Immunis.$$**	Third DTP/HIB + Polio
Repeat after an Interval - 40 Weeks	Do not send recall letter	Do not send result letter
05/03/1996	**Preschool Immunis.$$**	Booster DT(double)+polio vacc.
No Action Required	Do not send recall letter	Do not send result letter
08/09/1993	**Hib Imm(over 13 Mth)$$**	Single Hib vaccination
No Action Required	Do not send recall letter	Do not send result letter
07/09/1993	**Mmr Immunis.$$**	Measles/mumps/rubella vaccn.
No Action Required	Do not send recall letter	Do not send result letter
08/07/1992	**2nd Primary Immunis.$$**	Second DTP/HIB + Polio
Repeat after an Interval - 4 Weeks	Do not send recall letter	Do not send result letter
28/05/1992	**1st Primary Immunis.$$**	First DTP/HIB + Polio
Repeat after an Interval - 4 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**	
18/02/2009	Low	Crosshouse Hospital Dr C [redacted]	General Surgery	Not Specified 1st Visit	Out Patient

Acute Prescriptions

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NHS Confidential: Personal data about a patient

McMillan, Georgina Dr McCallum and [redacted]
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20** Page number 3

Drug/Preparation	Quantity/Dose/Frequency	Date
Tramadol Hydrochloride CAPS 50MG	30 1 Cap qid prn	26/02/2009
Buscopan TABS 10MG	56 1 or 2 Tabs 4 times daily	26/02/2009
Amoxicillin CAPS 250MG	21 1 Cap 3 times daily	26/02/2009
Metronidazole TABS 400MG	21 1 Tab 3 times daily	26/02/2009
Lyclear Dermal CREAM 5%	30g Apply [redacted]	26/02/2009
Ketoconazole Shampoo 2%	120 Apply twice weekly	15/01/2009
Capasal Shampoo	250 Apply Daily	15/01/2009

Inactive Repeat Drugs

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

Last Encounter

adcarolholden Date: 23/04/2009

Clinical / User Markers:

Discharge letter sent to general practitioner - - self poisoning

==========

Dr H O McCallum Date: 26/02/2009

abdo pain 3 right hypochondrial pain and tenderness

Clinical / User Markers:

Abdominal pain type - Recurrence -

Acute Prescriptions:

Tramadol Hydrochloride - CAPS 50MG	1 Cap - qid prn	30
Buscopan - TABS 10MG	1 or 2 Tabs - 4 times daily	56
Amoxicillin - CAPS 250MG	1 Cap - 3 times [redacted]	21
Metronidazole - TABS 400MG	1 Tab - 3 times daily	21
Lyclear - Dermal CREAM 5%	Apply - Daily	30g

==========

Dr C Martin Date: 12/02/2009

notes checked. cm

==========

Clinical / User Markers:

Summary Sheet: Data Protection Printed at 10/06/2009 10:20:45

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NHS Confidential: Personal data about a patient

McMillan, Georgina Dr McCallum and Partners
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20** Page number 4

Gallstones - -

==========

==========

adcarolholden Date: 12/02/2009

Screening:

1st Primary Immunis.$$ - First DTP/HIB + Polio - Repeat after an Interval - (Review 4W)

2nd Primary [redacted].$$ - Second DTP/HIB + Polio - Repeat after an Interval - (Review 4W)

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

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

3rd Primary Immunis.$$ - Third DTP/HIB + Polio - Repeat after an Interval - (Review 40W)

Hib Imm(over 13 Mth)$$ - Single Hib vaccination - No Action Required

Hib Imm(over 13 Mth)$$ - Single Hib vaccination - No Action Required

3rd Primary Immunis.$$ - Third DTP/HIB + Polio - Repeat after an Interval - (Review 40W)

2nd Primary Immunis.$$ - Second DTP/HIB + Polio - Repeat after an Interval - (Review 4W)

1st Primary Immunis.$$ - First DTP/HIB + Polio - Repeat after an Interval - (Review 4W)

Clinical / User Markers:

Acne keloid - -

Gastroenteritis - -

Nocturnal enuresis - -

Notes summary on computer - -

Soft systolic [redacted] - -

Stomatitis - herpetic - -

==========

Dr C Martin Date: 19/02/2009

SCI Electronic Referral

Referrals:

Crosshouse Hospital(NHS) General Surgery Out Patient

==========

==========

Dr C Martin Date: 02/02/2009

stressed 1 moving house this week. c/o stress due to move into new flat in wallace ave. doesn't feel fit to work this week. advised re self certificate

Summary Sheet: Data Protection Printed at 10/06/2009 10:20:45

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McMillan, Georgina Dr McCallum and Partners
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20** Page number 5

Clinical / User Markers:

Feeling stressed - 1st -

==========

Triage Date: 29/01/2009

JB. PV & PR bleeding. States is pregnant. No idea of LMP. Implanon removed last yr sometime- note of insertion but not removal. Not seen midwife. Home test- sure positive. Given number of EPAS. Will follow-up with HV.

==========

Automatically generated by transaction

Clinical / User Markers:

Patient MRE received from HB - -

==========

Dr C Martin Date: 15/01/2009

gall stone 1 scalp [redacted] symptoms of bloating / esp after meals. ref sopd. also scalp eczema

Clinical / User Markers:

Eczema NOS - 1st - SCALP

Gallstones - 1st -

Acute Prescriptions:

Ketoconazole - Shampoo 2%	Apply - twice weekly	120
Capasal - Shampoo	Apply - Daily	250

==========

Automatically generated by transaction

Clinical / User Markers:

Patient MRE received from HB - -

==========

Automatically generated by transaction

Clinical / User Markers:

Pat. GP7B/GP8B card from HB - -

==========

Clinical / User Markers:

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Gallstones - -

==========

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Clinical / User Markers:

Patient reg. form sent to HB - -

==========

Automatically generated by transaction

Clinical / User Markers:

GP22-practice changed-moved - -

==========

Dr Convery Date: 09/12/2008

stress 1 attacked few weeks ago, says been XH but no report. frightened to go out alone, works cafe- lacks control re who comes in. says repeatedly raped in past. had counselling. agree to cf 8-22/12 on condition she accept shormal to feel like this,

keeps going out albeit with company, and also takes exercise etc.

Clinical / User Markers:

Feeling stressed - 1st -

==========

Triage Date: 27/11/2008

JB. Looking for s/line. "Jumped" last w/end. States attended A&E- no letter given. Ribs bruised & painful. Advised re self cert x 1st 7 days. If [redacted] too unwell thereafter will need GP appt.

==========

Automatically generated by transaction

Clinical / User Markers:

Pat. GP7B/GP8B card from HB - -

==========

Dr Convery Date: 03/11/2008

abdo distension 1. fullness suprapubic/umbilical region. u/s

Clinical / User Markers:

Abdominal distension symptom - 1st -

==========

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NHS Confidential: Personal data about a patient

McMillan, Georgina
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20**

Clinical / User Markers:

Body mass index index 25-29 - overweight - -

Never smoked tobacco - -

No family history diabetes - -

No FH: Ischaemic heart disease - -

Teetotaller - -

White Scottish - -

Disease Protocol Sessions:

Acute - 1st SPICE Index	30/10/2008	Recall Period - N/A
Acute - SPICE Basic Health Values	30/10/2008	Recall Period - N/A

==========

Automatically generated by transaction

Clinical / User Markers:

Patient reg. [redacted] sent to HB - -

==========

Practice Nurse [redacted] Date: 27/10/2008

n/p med 2 thinks may be [redacted] implanon removed 4/52 ago to give sample for preg test declined condoms

Clinical / User Markers:

New patient health check - Start -

==========

==========

Appointments List:

Dr H G McCallum	Feb 26 2009 4:40PM	
Dr [redacted]	Feb 2 2009 9:40AM	
Triage	[redacted] 29 2009 9:35AM	471968[redacted] ? weeks bleeding us
Dr C Martin	Jan 16 2009 11:10AM	ref sopd
Dr C Martin	Jan 15 2009 2:20PM	
Dr Convery	Dec 9 2008 3:30PM	
Triage	Nov 27 2008 9:00AM	07546076065 wanting to discuss doctor's line
Dr Convery	Nov 3 2008 5:00PM	

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NHS Confidential: Personal data about a patient

McMillan, Georgina
DoB: 04/12/1991 **Report Valid On 10/06/09 10:20**

Dr McCallum and [redacted]
Page number 8

Practice Nurse [redacted] Oct 27 2008 2:40PM

Last 4 Clinical Notes

Date	Clinical Notes
26/02/2009	abdo pain 3 right hypochondrial pain and tenderness
12/02/2009	notes checked. cm
10/02/2009	SCI Electronic Referral
02/02/2009	stressed 1 moving house this week. c/o stress due to move into new flat in [redacted] ave. doesn't feel fit to work this week. advised re self certificate

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Summary Sheet: Data Protection Printed at 10/06/2009 10:20:45

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Pages:

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18-Jun-2026 SARA
Additional: Scanned Document

Filename: igprda202606181533430.pdf
Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

McMillan, Georgina BLUE SUITE
DoB: 04/12/1991 **Report Valid On 03/09/10 15:24** Page number 1

Registration

Ms Georgina McMillan
3 Bosfield Road
EAST KILBRIDE
GLASGOW
G74 4BE
Telephone: 07767 054 718
Contact: ? ContactReiship: ?
Email: ?
CHI Number: 0412913127 NHS Number: 662/91/440
Patient ID:
Occupation:
Registered GP: DR A FINNEGAN
Repeat Consultation: ?
Registered: 01/06/2009 Confirmed: 03/06/2009
BMI: 0.0 Height: 0 m Weight: 0 kg
Parity: 0 Gravida: 0
SCI-DC Consent Given: Yes

Service Code: Permanent
DoB: 04/12/1991
Age: 18

Dispensing: No
Road: 0 Water: 0 FootPath: 0
Marital Status: Unknown
Seen By GP: DR A FINNEGAN
Acute Consultation: 03/06/2010
Records Received: 15/06/2009
BP: 112/80

Priority Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier

Repeat Medication

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

Adverse Reactions

[redacted] Code	Description

Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier
15/06/2009	None	Medium	Patient MRE received from HB	
03/06/2009	None	Medium	Pat. GP7B/GP8B card from HB	
01/06/2009	None	Medium	Patient reg. form sent to HB	
06/04/2009	06/04/2009	Medium	Overdose of drug	
Freetext:	Metronidazole tabs			
01/12/2008	01/12/2008	Medium	Gallbladder calculus without mention of cholecystitis	
01/12/2008	01/12/2008	Medium	Ultrasound of abdomen	
01/12/2008	01/12/2008	Medium	Ultrasound of pelvis	
16/07/2008	16/07/2008	Medium	Female pelvic inflammatory disease NOS	
30/05/2003	30/05/2003	Medium	Nocturnal enuresis	Secondary
05/09/1998	05/09/1998	Medium	Stomatitis - herpetic	
24/10/1994	24/10/1994	Medium	Soft systolic [redacted]	
Freetext:	innocent			
08/04/1993	08/04/1993	Medium	Infectious gastroenteritis	

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NHS Confidential: Personal data about a patient

McMillan, Georgina BLUE SUITE
DoB: 04/12/1991 **Report Valid On 03/09/10 15:24** Page number 2

02/05/1992	02/05/1992	Medium	Whooping cough
16/06/2009	16/06/2009	Low	Notes summary on computer
02/06/2009	None	Low	Current smoker
02/06/2009	None	Low	Smoking cessation advice
01/06/2009	None	Low	Current smoker
01/06/2009	None	Low	Teetotaller
01/06/2009	None	Low	White British

Screening

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
Folic Acid TABS 400MICROGRAMS	90 1 Tab [redacted]	02/06/2009

Inactive Repeat Drugs

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

Last Encounter

==========

MIDWIFE Date: 03/06/2010

?14wks,bp110/587lmp26.02.10 ,scan arranged for tuesday08/06/10,bookin appointment for 09/06/10.

==========

DR K MACRAE Date: 28/05/2010

phone call from gender based violence officer at rhsc re this patient had phonecall from aikenhead police station re this girl who claimed to be 14/52 [redacted] with [redacted] background of concern re violence with regard to her [redacted] v little info re this

girl currently in homeless accommodation in Glasgow apparently says had a [redacted] 8 years ago no note of this in old notes

==========

SW - PLEASE ASK PATIENT TO CONFIRM ADDRESS

==========

==========

Clinical / User Markers:

Female pelvic inflammatory disease NOS - -

Gallbladder calculus without mention of cholecystitis - -

Summary Sheet: Patient Transfer Printed at 03/09/2010 15:24:26

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NHS Confidential: Personal data about a patient

McMillan, Georgina BLUE SUITE
DoB: 04/12/1991 **Report Valid On 03/09/10 15:24** Page number 3

Infectious gastroenteritis - -

Nocturnal enuresis - Secondary -

Notes summary on computer - -

Overdose of drug - - Metronidazole tabs

Soft systolic murmur - - innocent

Stomatitis - herpetic - -

Ultrasound of abdomen - -

Ultrasound of pelvis - -

Whooping cough - -

==========

dental abscess - attened A/E there --> name on form is georgina mcmillan and different address - will ask staff to check

==========

DR C A WILSON Date: 25/06/2009

3-4/12 [redacted] abd pain cramps vomiting, several times - no loose bowels -24/hours , no pv bleeding boe=sls ok hot and cold - advice fluids wsg - to contact if bleeding or inc abd pain

==========

==========

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Clinical / User Markers:

Patient MRE received from HB - -

==========

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Clinical / User Markers:

Pat. GP7B/GP8B card from HB - -

==========

DR C A WILSON Date: 02/06/2009

pdt +ve LMP , APPOX 3/04/09,new [redacted] ,not [redacted] of child,not working, living with [redacted] ,lived in homes during teenage years,phone contact with [redacted] contact with [redacted] has had some tower abd pain, some vomiting ,tired-- bp 112/80,start folic acid 4 00mg smoker 5 cigs day, pdt test, return for referal

Clinical / User Markers:

Current smoker - -

Smoking cessation advice - -

Summary Sheet: Patient Transfer Printed at 03/09/2010 15:24:28

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NHS Confidential: Personal data about a patient

McMillan, Georgina BLUE SUITE
DoB: 04/12/1991 **Report Valid On 03/09/10 15:24** Page number 4

Acute Prescriptions:

Folic Acid - TABS 400MICROGRAMS	1 Tab - Daily	90

Disease Protocol Sessions:

Acute - 1st SPICE Index	02/06/2009	Recall Period - N/A
Acute - SPICE Basic Health Values	02/06/2009	Recall Period - N/A

==========

Clinical / User Markers:

Current smoker - -

Teetotaller - -

White British - -

Disease Protocol Sessions:

Acute - SPICE Basic Health Values	01/06/2009	Recall Period - N/A

==========

Automatically generated by transaction

Clinical / User Markers:

Patient reg. form sent to HB - -

==========

==========

Appointments List:

MIDWIFE	Aug 5 2010 1:15PM	
MIDWIFE	Jun 3 2010 2:30PM	
DR K MACRAE	May 28 2010 12:15PM	julie mcorkill,gender based violence resource unit at yorkhill,wanting to pass on some info re this pt.tel:0141 201 9295
DR K MACRAE	Feb 2 2010 11:10AM	
DR K MACRAE	Jan 20 2010 3:20PM	
DR C A WILSON	Jun 2 2009 4:00PM	

Last 4 Clinical Notes

Date	Clinical Notes
03/06/2010	?14wks,bp110/58?hmp26.02.10 ,scan arranged for tuesday08/06/10,bookin appointment for 09/06/10.

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McMillan, Georgina BLUE SUITE
DoB: 04/12/1991 **Report Valid On 03/09/10 15:24** Page number 5

28/05/2010 [redacted] call from gender based violence officer at rhsc re this patient had phonecall from aikenhead police station re this girl who claimed to be 14/52 [redacted] with twins background of concern re violence with regard to her [redacted] v little info re this
girl currently in homeless accommodation in Glasgow apparently says had a baby 8 years ago no note of this in old notes

15/09/2009 SW - PLEASE ASK PATIENT TO CONFIRM ADDRESS

10/08/2009 dental abscess - attened A/E there --> name on form is georgina mcmillan and different address - will ask staff to check

Palliative Care

Associates

Title	Forename	Surname	Relationship	Relationship Type

Associate Of

Title	Forename	Surname	Relationship	Relationship Type

Clinical Values

Date	Value Type	Value

F3 Clinical Notes

Date	F3 Clinical Notes
03/06/2010	21 4wks,bp110/58?mp26 02 10 ,scan arranged for tuesday08/06/10,booking appointment for 09/06/10
28/05/2010	phone call from gender based violence officer at rhsc re this patient had phonecall from aikenhead [redacted] station re this girl who claimed to be 14/52 [redacted] with [redacted] background of concern re violence with regard to her [redacted] v little info re this girl currently in homeless accommodation in Glasgow apparently says had a baby 8 years ago no note of this in old notes
15/09/2009	SW - PLEASE ASK PATIENT TO CONFIRM ADDRESS
10/08/2009	dental abscess - attened A/E there --> name on form is georgina mcmillan and different address - will ask staff to check
25/06/2009	3-4/12 pregnant abd pain cramps vomiting, several times - no loose bowels -24/hours , no pv bleeding boe=els ok hot and cold - advice fluids wsg - to contact if bleeding or inc abd pain
18/06/2009	Automatically generated by transaction
03/06/2009	Automatically generated by transaction
02/06/2009	pdt +ve LMP, APPOX 3/04/09,new partner,not father of child,not working, living with [redacted],lived in homes during teenage years,phone contact with [redacted],no contact with dad, has had some lower abd pain, some vomiting ,tired-- bp 112/80,start folic acid 400mg smoker 5 cigs day, pdt test, return for referal
01/06/2009	Automatically generated by transaction

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Pages:

NHS Confidential: Personal data about a patient

McMillan, Georgina BLUE SUITE
DoB: 04/12/1991 **Report Valid On 03/09/10 15:24** Page number 1

Registration

Ms Georgina McMillan
3 Bosfield Road
EAST KILBRIDE
GLASGOW
G74 4BE
Telephone: 07767 054 718
Contact: ? ContactRelship: ?
Email: ?
CHI Number: 0412913127 NHS Number: 662/91/440
Patient ID:
Occupation:
Registered GP: DR A FINNEGAN
Repeat Consultation: ?
Registered: 01/06/2009 Confirmed: 03/06/2009
BMI: 0.0 Height: 0 m Weight: 0 kg
Parity: 0 Gravida: 0
SCI-DC Consent Given: Yes

Service Code: Permanent
DoB: 04/12/1991
Age: 18
Dispensing: No
Road: 0 Water: 0 FootPath: 0
Marital Status: Unknown
Seen By GP: DR A FINNEGAN
Acute Consultation: 03/06/2010
Records Received: 15/06/2009
BP: 112/80

Priority Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier

Repeat Medication

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

Adverse Reactions

[redacted] Code	Description

Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier
15/06/2009	None	Medium	Patient MRE received from HB	
03/06/2009	None	Medium	Pat. GP7B/GP8B card from HB	
01/06/2009	None	Medium	Patient reg. form sent to HB	
06/04/2009	06/04/2009	Medium	Overdose of drug	
Freetext:	Metronidazole tabs			
01/12/2008	01/12/2008	Medium	Gallbladder calculus without mention of cholecystitis	
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05/09/1998	05/09/1998	Medium	Stomatitis - herpetic	
24/10/1994	24/10/1994	Medium	Soft systolic [redacted]	
Freetext:	innocent			
08/04/1993	08/04/1993	Medium	Infectious gastroenteritis	

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McMillan, Georgina BLUE SUITE
DoB: 04/12/1991 **Report Valid On 03/09/10 15:24** Page number 2

02/05/1992	02/05/1992	Medium	Whooping cough
16/06/2009	16/06/2009	Low	Notes summary on computer
02/06/2009	None	Low	Current smoker
02/06/2009	None	Low	Smoking cessation advice
01/06/2009	None	Low	Current smoker
01/06/2009	None	Low	Teetotaller
01/06/2009	None	Low	White British

Screening

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
Folic Acid TABS 400MICROGRAMS	90 1 Tab [redacted]	02/06/2009

Inactive Repeat Drugs

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

Last Encounter

==========

MIDWIFE Date: 03/06/2010

?14wks,bp110/587lmp26.02.10 ,scan arranged for tuesday08/06/10,bookin appointment for 09/06/10.

==========

DR K MACRAE Date: 28/05/2010

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girl currently in homeless accommodation in Glasgow apparently says had a [redacted] 8 years ago no note of this in old notes

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SW - PLEASE ASK PATIENT TO CONFIRM ADDRESS

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Clinical / User Markers:

Female pelvic inflammatory disease NOS - -

Gallbladder calculus without mention of cholecystitis - -

Summary Sheet: Patient Transfer Printed at 03/09/2010 15:24:26

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Infectious gastroenteritis - -

Nocturnal enuresis - Secondary -

Notes summary on computer - -

Overdose of drug - - Metronidazole tabs

Soft systolic murmur - - innocent

Stomatitis - herpetic - -

Ultrasound of abdomen - -

Ultrasound of pelvis - -

Whooping cough - -

==========

dental abscess - attened A/E there --> name on form is georgina mcmillan and different address - will ask staff to check

==========

DR C A WILSON Date: 25/06/2009

3-4/12 [redacted] abd pain cramps vomiting, several times - no loose bowels -24/hours , no pv bleeding boe=sls ok hot and cold - advice fluids wsg - to contact if bleeding or inc abd pain

==========

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Clinical / User Markers:

Patient MRE received from HB - -

==========

Automatically generated by transaction

Clinical / User Markers:

Pat. GP7B/GP8B card from HB - -

==========

DR C A WILSON Date: 02/06/2009

pdt +ve LMP , APPOX 3/04/09,new [redacted] ,not [redacted] of child,not working, living with [redacted] ,lived in homes during teenage years,phone contact with [redacted] contact with [redacted] has had some tower abd pain, some vomiting ,tired-- bp 112/80,start folic acid 4 00mg smoker 5 cigs day, pdt test, return for referal

Clinical / User Markers:

Current smoker - -

Smoking cessation advice - -

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NHS Confidential: Personal data about a patient

McMillan, Georgina BLUE SUITE
DoB: 04/12/1991 **Report Valid On 03/09/10 15:24** Page number 4

Acute Prescriptions:

Folic Acid - TABS 400MICROGRAMS	1 Tab - Daily	90

Disease Protocol Sessions:

Acute - 1st SPICE Index	02/06/2009	Recall Period - N/A
Acute - SPICE Basic Health Values	02/06/2009	Recall Period - N/A

==========

Clinical / User Markers:

Current smoker - -

Teetotaller - -

White British - -

Disease Protocol Sessions:

Acute - SPICE Basic Health Values	01/06/2009	Recall Period - N/A

==========

Automatically generated by transaction

Clinical / User Markers:

Patient reg. form sent to HB - -

==========

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Appointments List:

MIDWIFE	Aug 5 2010 1:15PM	
MIDWIFE	Jun 3 2010 2:30PM	
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DR K MACRAE	Feb 2 2010 11:10AM	
DR K MACRAE	Jan 20 2010 3:20PM	
DR C A WILSON	Jun 2 2009 4:00PM	

Last 4 Clinical Notes

Date	Clinical Notes
03/06/2010	214wks,bp110/58?lmp26.02.10 ,scan arranged for tuesday08/06/10,bookin appointment for 09/06/10.

Summary Sheet: Patient Transfer Printed at 03/09/2010 15:24:28

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NHS Confidential: Personal data about a patient

McMillan, Georgina BLUE SUITE
DoB: 04/12/1991 **Report Valid On 03/09/10 15:24** Page number 5

28/05/2010	[redacted] call from gender based violence officer at rhsc re this patient had phonecall from aikenhead police station re this girl who claimed to be 14/52 [redacted] with twins background of concern re violence with regard to her [redacted] v little info re this girl currently in homeless accommodation in Glasgow apparently says had a baby 8 years ago no note of this in old notes
15/09/2009	SW - PLEASE ASK PATIENT TO CONFIRM ADDRESS
10/08/2009	dental abscess - attened A/E there --> name on form is georgina mcmillan and different address - will ask staff to check

Palliative Care

Associates

Title	Forename	Surname	Relationship	Relationship Type

Associate Of

Title	Forename	Surname	Relationship	Relationship Type

Clinical Values

Date	Value Type	Value

F3 Clinical Notes

Date	F3 Clinical Notes
03/06/2010	214wks,bp110/82?mp26 02 10 ,scan arranged for tuesday08/06/10,booking appointment for 09/06/10
28/05/2010	phone call from gender based violence officer at rhsc re this patient had phonecall from aikenhead [redacted] station re this girl who claimed to be 14/52 [redacted] with [redacted] background of concern re violence with regard to her [redacted] v little info re this girl currently in homeless accommodation in Glasgow apparently says had a baby 8 years ago no note of this in old notes
15/09/2009	SW - PLEASE ASK PATIENT TO CONFIRM ADDRESS
10/08/2009	dental abscess - attened A/E there --> name on form is georgina mcmillan and different address - will ask staff to check
25/06/2009	3-4/12 pregnant abd pain cramps vomiting, several times - no loose bowels -24/hours , no pv bleeding boe=els ok hot and cold - advice fluids wsg - to contact if bleeding or inc abd pain
18/06/2009	Automatically generated by transaction
03/06/2009	Automatically generated by transaction
02/06/2009	pdt +ve LMP, APPOX 3/04/09,new partner,not father of child,not working, living with [redacted],lived in homes during teenage years,phone contact with [redacted],no contact with dad, has had some lower abd pain, some vomiting ,tired-- bp 112/80,start folic acid 400mg smoker 5 cigs day, pdt test, return for referal
01/06/2009	Automatically generated by transaction

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NHS Confidential: Personal data about a patient

McMillan, Georgina BLUE SUITE
DoB: 04/12/1991 **Report Valid On 03/09/10 15:24** Page number 1

Registration

Ms Georgina McMillan
3 Bosfield Road
EAST KILBRIDE
GLASGOW
G74 4BE
Telephone: 07767 054 718
Contact: ? ContactRelship: ?
Email: ?
CHI Number: 0412913127 NHS Number: 662/91/440
Patient ID:
Occupation:
Registered GP: DR A FINNEGAN
Repeat Consultation: ?
Registered: 01/06/2009 Confirmed: 03/06/2009
BMI: 0.0 Height: 0 m Weight: 0 kg
Parity: 0 Gravida: 0
SCI-DC Consent Given: Yes

Service Code: Permanent
DoB: 04/12/1991
Age: 18
Dispensing: No
Road: 0 Water: 0 FootPath: 0
Marital Status: Unknown
Seen By GP: DR A FINNEGAN
Acute Consultation: 03/06/2010
Records Received: 15/06/2009
BP: 112/80

Priority Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier

Repeat Medication

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

Adverse Reactions

[redacted] Code	Description

Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier
15/06/2009	None	Medium	Patient MRE received from HB	
03/06/2009	None	Medium	Pat. GP7B/GP8B card from HB	
01/06/2009	None	Medium	Patient reg. form sent to HB	
06/04/2009	06/04/2009	Medium	Overdose of drug	
Freetext:	Metronidazole tabs			
01/12/2008	01/12/2008	Medium	Gallbladder calculus without mention of cholecystitis	
01/12/2008	01/12/2008	Medium	Ultrasound of abdomen	
01/12/2008	01/12/2008	Medium	Ultrasound of pelvis	
16/07/2008	16/07/2008	Medium	Female pelvic inflammatory disease NOS	
30/05/2003	30/05/2003	Medium	Nocturnal enuresis	Secondary
05/09/1998	05/09/1998	Medium	Stomatitis - herpetic	
24/10/1994	24/10/1994	Medium	Soft systolic [redacted]	
Freetext:	innocent			
08/04/1993	08/04/1993	Medium	Infectious gastroenteritis	

Summary Sheet: Patient Transfer Printed at 03/09/2010 15:24:28

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NHS Confidential: Personal data about a patient

McMillan, Georgina BLUE SUITE
DoB: 04/12/1991 **Report Valid On 03/09/10 15:24** Page number 2

02/05/1992	02/05/1992	Medium	Whooping cough
16/06/2009	16/06/2009	Low	Notes summary on computer
02/06/2009	None	Low	Current smoker
02/06/2009	None	Low	Smoking cessation advice
01/06/2009	None	Low	Current smoker
01/06/2009	None	Low	Teetotaller
01/06/2009	None	Low	White British

Screening

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
Folic Acid TABS 400MICROGRAMS	90 1 Tab [redacted]	02/06/2009

Inactive Repeat Drugs

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

Last Encounter

==========

MIDWIFE Date: 03/06/2010

?14wks,bp110/587lmp26.02.10 ,scan arranged for tuesday08/06/10,bookin appointment for 09/06/10.

==========

DR K MACRAE Date: 28/05/2010

phone call from gender based violence officer at rhsc re this patient had phonecall from aikenhead police station re this girl who claimed to be 14/52 [redacted] with [redacted] background of concern re violence with regard to her [redacted] v little info re this

girl currently in homeless accommodation in Glasgow apparently says had a [redacted] 8 years ago no note of this in old notes

==========

SW - PLEASE ASK PATIENT TO CONFIRM ADDRESS

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Clinical / User Markers:

Female pelvic inflammatory disease NOS - -

Gallbladder calculus without mention of cholecystitis - -

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McMillan, Georgina BLUE SUITE
DoB: 04/12/1991 **Report Valid On 03/09/10 15:24** Page number 3

Infectious gastroenteritis - -

Nocturnal enuresis - Secondary -

Notes summary on computer - -

Overdose of drug - - Metronidazole tabs

Soft systolic murmur - - innocent

Stomatitis - herpetic - -

Ultrasound of abdomen - -

Ultrasound of pelvis - -

Whooping cough - -

==========

dental abscess - attened A/E there --> name on form is georgina mcmillan and different address - will ask staff to check

==========

DR C A WILSON Date: 25/06/2009

3-4/12 [redacted] abd pain cramps vomiting, several times - no loose bowels -24/hours , no pv bleeding boe=ols ok hot and cold - advice fluids wsg - to contact if bleeding or inc abd pain

==========

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Clinical / User Markers:

Patient MRE received from HB - -

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Automatically generated by transaction

Clinical / User Markers:

Pat. GP7B/GP8B card from HB - -

==========

DR C A WILSON Date: 02/06/2009

pdt +ve LMP , APPOX 3/04/09,new [redacted] ,not [redacted] of child,not working, living with [redacted] ,lived in homes during teenage years,phone contact with [redacted] contact with [redacted] has had some tower abd pain, some vomiting ,tired-- bp 112/80,start folic acid 4 00mg smoker 5 cigs day, pdt test, return for referal

Clinical / User Markers:

Current smoker - -

Smoking cessation advice - -

Summary Sheet: Patient Transfer Printed at 03/09/2010 15:24:28

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NHS Confidential: Personal data about a patient

McMillan, Georgina BLUE SUITE
DoB: 04/12/1991 **Report Valid On 03/09/10 15:24** Page number 4

Acute Prescriptions:

Folic Acid - TABS 400MICROGRAMS	1 Tab - Daily	90

Disease Protocol Sessions:

Acute - 1st SPICE Index	02/06/2009	Recall Period - N/A
Acute - SPICE Basic Health Values	02/06/2009	Recall Period - N/A

==========

Clinical / User Markers:

Current smoker - -

Teetotaller - -

White British - -

Disease Protocol Sessions:

Acute - SPICE Basic Health Values	01/06/2009	Recall Period - N/A

==========

Automatically generated by transaction

Clinical / User Markers:

Patient reg. form sent to HB - -

==========

==========

Appointments List:

MIDWIFE	Aug 5 2010 1:15PM	
MIDWIFE	Jun 3 2010 2:30PM	
DR K MACRAE	May 28 2010 12:15PM	julie mcorkill,gender based violence resource unit at yorkhill,wanting to pass on some info re this pt.tel:0141 201 9295
DR K MACRAE	Feb 2 2010 11:10AM	
DR K MACRAE	Jan 20 2010 3:20PM	
DR C A WILSON	Jun 2 2009 4:00PM	

Last 4 Clinical Notes

Date	Clinical Notes
03/06/2010	214wks,bp110/58?lmp26.02.10 ,scan arranged for tuesday08/06/10,bookin appointment for 09/06/10.

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NHS Confidential: Personal data about a patient

McMillan, Georgina BLUE SUITE
DoB: 04/12/1991 **Report Valid On 03/09/10 15:24** Page number 5

28/05/2010	[redacted] call from gender based violence officer at rhsc re this patient had phonecall from aikenhead police station re this girl who claimed to be 14/52 [redacted] with twins background of concern re violence with regard to her [redacted] v little info re this girl currently in homeless accommodation in Glasgow apparently says had a baby 8 years ago no note of this in old notes
15/09/2009	SW - PLEASE ASK PATIENT TO CONFIRM ADDRESS
10/08/2009	dental abscess - attened A/E there --> name on form is georgina mcmillan and different address - will ask staff to check

Palliative Care

Associates

Title	Forename	Surname	Relationship	Relationship Type

Associate Of

Title	Forename	Surname	Relationship	Relationship Type

Clinical Values

Date	Value Type	Value

F3 Clinical Notes

Date	F3 Clinical Notes
03/06/2010	21+wks,bp110/58?mp26.02.10 ,scan arranged for tuesday08/06/10,booking appointment for 09/06/10
28/05/2010	phone call from gender based violence officer at rhsc re this patient had phonecall from aikenhead [redacted] station re this girl who claimed to be 14/52 [redacted] with [redacted] background of concern re violence with regard to her [redacted] v little info re this girl currently in homeless accommodation in Glasgow apparently says had a baby 8 years ago no note of this in old notes
15/09/2009	SW - PLEASE ASK PATIENT TO CONFIRM ADDRESS
10/08/2009	dental abscess - attened A/E there --> name on form is georgina mcmillan and different address - will ask staff to check
25/06/2009	3-4/12 pregnant abd pain cramps vomiting, several times - no loose bowels -24/hours , no pv bleeding boe=els ok hot and cold - advice fluids wsg - to contact if bleeding or inc abd pain
18/06/2009	Automatically generated by transaction
03/06/2009	Automatically generated by transaction
02/06/2009	pdt +ve LMP, APPOX 3/04/09,new partner,not father of child,not working, living with [redacted],lived in homes during teenage years,phone contact with [redacted],no contact with dad, has had some lower abd pain, some vomiting ,tired-- bp 112/80,start folic acid 400mg smoker 5 cigs day, pdt test, return for referal
01/06/2009	Automatically generated by transaction

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NHS Confidential: Personal data about a patient

McMillan, Georgina BLUE SUITE
DoB: 04/12/1991 **Report Valid On 03/09/10 15:24** Page number 1

Registration

Ms Georgina McMillan
3 Bosfield Road
EAST KILBRIDE
GLASGOW
G74 4BE
Telephone: 07767 054 718
Contact: ? ContactRelship: ?
Email: ?
CHI Number: 0412913127 NHS Number: 662/91/440
Patient ID:
Occupation:
Registered GP: DR A FINNEGAN
Repeat Consultation: ?
Registered: 01/06/2009 Confirmed: 03/06/2009
BMI: 0.0 Height: 0 m Weight: 0 kg
Parity: 0 Gravida: 0
SCI-DC Consent Given: Yes

Service Code: Permanent
DoB: 04/12/1991
Age: 18
Dispensing: No
Road: 0 Water: 0 FootPath: 0
Marital Status: Unknown
Seen By GP: DR A FINNEGAN
Acute Consultation: 03/06/2010
Records Received: 15/06/2009
BP: 112/80

Priority Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier

Repeat Medication

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

Adverse Reactions

[redacted] Code	Description

Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier
15/06/2009	None	Medium	Patient MRE received from HB	
03/06/2009	None	Medium	Pat. GP7B/GP8B card from HB	
01/06/2009	None	Medium	Patient reg. form sent to HB	
06/04/2009	06/04/2009	Medium	Overdose of drug	
Freetext:	Metronidazole tabs			
01/12/2008	01/12/2008	Medium	Gallbladder calculus without mention of cholecystitis	
01/12/2008	01/12/2008	Medium	Ultrasound of abdomen	
01/12/2008	01/12/2008	Medium	Ultrasound of pelvis	
16/07/2008	16/07/2008	Medium	Female pelvic inflammatory disease NOS	
30/05/2003	30/05/2003	Medium	Nocturnal enuresis	Secondary
05/09/1998	05/09/1998	Medium	Stomatitis - herpetic	
24/10/1994	24/10/1994	Medium	Soft systolic [redacted]	
Freetext:	innocent			
08/04/1993	08/04/1993	Medium	Infectious gastroenteritis	

Summary Sheet: Patient Transfer Printed at 03/09/2010 15:24:28

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McMillan, Georgina BLUE SUITE
DoB: 04/12/1991 **Report Valid On 03/09/10 15:24** Page number 2

02/05/1992	02/05/1992	Medium	Whooping cough
16/06/2009	16/06/2009	Low	Notes summary on computer
02/06/2009	None	Low	Current smoker
02/06/2009	None	Low	Smoking cessation advice
01/06/2009	None	Low	Current smoker
01/06/2009	None	Low	Teetotaller
01/06/2009	None	Low	White British

Screening

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
Folic Acid TABS 400MICROGRAMS	90 1 Tab [redacted]	02/06/2009

Inactive Repeat Drugs

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

Last Encounter

==========

MIDWIFE Date: 03/06/2010

?14wks,bp110/587lmp26.02.10 ,scan arranged for tuesday08/06/10,bookin appointment for 09/06/10.

==========

DR K MACRAE Date: 28/05/2010

phone call from gender based violence officer at rhsc re this patient had phonecall from aikenhead police station re this girl who claimed to be 14/52 [redacted] with [redacted] background of concern re violence with regard to her [redacted] v little info re this

girl currently in homeless accommodation in Glasgow apparently says had a [redacted] 8 years ago no note of this in old notes

==========

SW - PLEASE ASK PATIENT TO CONFIRM ADDRESS

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Clinical / User Markers:

Female pelvic inflammatory disease NOS - -

Gallbladder calculus without mention of cholecystitis - -

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Infectious gastroenteritis - -

Nocturnal enuresis - Secondary -

Notes summary on computer - -

Overdose of drug - - Metronidazole tabs

Soft systolic murmur - - innocent

Stomatitis - herpetic - -

Ultrasound of abdomen - -

Ultrasound of pelvis - -

Whooping cough - -

==========

dental abscess - attened A/E there --> name on form is georgina mcmillan and different address - will ask staff to check

==========

DR C A WILSON Date: 25/06/2009

3-4/12 [redacted] abd pain cramps vomiting, several times - no loose bowels -24/hours , no pv bleeding boe=sls ok hot and cold - advice fluids wsg - to contact if bleeding or inc abd pain

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Clinical / User Markers:

Patient MRE received from HB - -

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Automatically generated by transaction

Clinical / User Markers:

Pat. GP7B/GP8B card from HB - -

==========

DR C A WILSON Date: 02/06/2009

pdt +ve LMP , APPOX 3/04/09,new [redacted] ,not [redacted] of child,not working, living with [redacted] ,lived in homes during teenage years,phone contact with [redacted] contact with [redacted] has had some tower abd pain, some vomiting ,tired-- bp 112/80,start folic acid 4 00mg smoker 5 cigs day, pdt test, return for referal

Clinical / User Markers:

Current smoker - -

Smoking cessation advice - -

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NHS Confidential: Personal data about a patient

McMillan, Georgina BLUE SUITE
DoB: 04/12/1991 **Report Valid On 03/09/10 15:24** Page number 4

Acute Prescriptions:

Folic Acid - TABS 400MICROGRAMS	1 Tab - Daily	90

Disease Protocol Sessions:

Acute - 1st SPICE Index	02/06/2009	Recall Period - N/A
Acute - SPICE Basic Health Values	02/06/2009	Recall Period - N/A

==========

Clinical / User Markers:

Current smoker - -

Teetotaller - -

White British - -

Disease Protocol Sessions:

Acute - SPICE Basic Health Values	01/06/2009	Recall Period - N/A

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Automatically generated by transaction

Clinical / User Markers:

Patient reg. form sent to HB - -

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Appointments List:

MIDWIFE	Aug 5 2010 1:15PM	
MIDWIFE	Jun 3 2010 2:30PM	
DR K MACRAE	May 28 2010 12:15PM	julie mcorkill,gender based violence resource unit at yorkhill,wanting to pass on some info re this pt.tel:0141 201 9295
DR K MACRAE	Feb 2 2010 11:10AM	
DR K MACRAE	Jan 20 2010 3:20PM	
DR C A WILSON	Jun 2 2009 4:00PM	

Last 4 Clinical Notes

Date	Clinical Notes
03/06/2010	?14wks,bp110/58?hmp26.02.10 ,scan arranged for tuesday08/06/10,bookin appointment for 09/06/10.

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McMillan, Georgina BLUE SUITE
DoB: 04/12/1991 **Report Valid On 03/09/10 15:24** Page number 5

28/05/2010	[redacted] call from gender based violence officer at rhsc re this patient had phonecall from aikenhead police station re this girl who claimed to be 14/52 [redacted] with twins background of concern re violence with regard to her [redacted] v little info re this girl currently in homeless accommodation in Glasgow apparently says had a baby 8 years ago no note of this in old notes
15/09/2009	SW - PLEASE ASK PATIENT TO CONFIRM ADDRESS
10/08/2009	dental abscess - attened A/E there --> name on form is georgina mcmillan and different address - will ask staff to check

Palliative Care

Associates

Title	Forename	Surname	Relationship	Relationship Type

Associate Of

Title	Forename	Surname	Relationship	Relationship Type

Clinical Values

Date	Value Type	Value

F3 Clinical Notes

Date	F3 Clinical Notes
03/06/2010	214wks,bp110/82mp26 02 10 ,scan arranged for tuesday08/06/10,booking appointment for 09/06/10
28/05/2010	phone call from gender based violence officer at rhsc re this patient had phonecall from aikenhead [redacted] station re this girl who claimed to be 14/52 [redacted] with [redacted] background of concern re violence with regard to her [redacted] v little info re this girl currently in homeless accommodation in Glasgow apparently says had a baby 8 years ago no note of this in old notes
15/09/2009	SW - PLEASE ASK PATIENT TO CONFIRM ADDRESS
10/08/2009	dental abscess - attened A/E there --> name on form is georgina mcmillan and different address - will ask staff to check
25/06/2009	3-4/12 pregnant abd pain cramps vomiting, several times - no loose bowels -24/hours , no pv bleeding boe=els ok hot and cold - advice fluids wsg - to contact if bleeding or inc abd pain
18/06/2009	Automatically generated by transaction
03/06/2009	Automatically generated by transaction
02/06/2009	pdt +ve LMP, APPOX 3/04/09,new partner,not father of child,not working, living with [redacted],lived in homes during teenage years,phone contact with [redacted],no contact with dad, has had some lower abd pain, some vomiting ,tired-- bp 112/80,start folic acid 400mg smoker 5 cigs day, pdt test, return for referal
01/06/2009	Automatically generated by transaction

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NHS Confidential: Personal data about a patient

15/10/2010 15:03 0141-201-9225 [redacted] PROTECTION PAGE 01/03

NHS Greater Glasgow and Clyde

GENDER BASED VIOLENCE RESOURCE UNIT
Women and [redacted] Directorate

2nd Floor Medical Records Building,
Yorkhill Hospital,
Dalnair St,
Glasgow
G3 8SJ

Tel. 0141 201 9206
Radio-page. 07699 646 824
Monday-Friday 9am-5pm

email:gbvunit@ggc.acot.nhs.uk

Fax

To: Jane McPherson
Fax: 0141 201 9225 (CPU)
From: JULIE McCORKELL.
Date:
Job Title: **GBV ADVISOR**
Pages:
Re: **[redacted] NOTIFICATIONS**

Please find a resume of the info we hold on Georgina Smith.
Regards
Julie

☑ urgent
☐ for information
☐ please comment

Any difficulties in reading this please contact the GBVRU on 0141 201 9206

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GBV Resource Unit
C/o [redacted] Protection Unit
2nd Floor
Medical Records Building
Royal Hospital for Sick [redacted]
Dalnair Street
G3 8SJ

NHS
Greater Glasgow and Clyde

15/10/2010

Hi [redacted]
Here is a resume of the information we hold about:

Georgina Smith/White/McMillan D.O.B. 04/12/91

28/05/10: Initial contact made by [redacted] Domestic Abuse Unit at Aitkenhead Road The incident involved a breach of bail by [redacted] (Georgina's [redacted] The [redacted] reported there had been four previous incidents of domestic abuse perpetrated by [redacted] against Georgina in the Strathclyde area (plus other incidents in Central Region) and as a result [redacted] had bail conditions not to approach or to contact Georgina. The [redacted] when carrying out a routine bail check, found them together.

Georgina reported herself 14 weeks pregnant with [redacted]

Georgina not known to abuse alcohol or drugs

Georgina reported to the [redacted] that she had a 7 year old [redacted] stated she didn't know his date of birth nor where he now lived. Given that she's only 18 now this would have made her 11 years old at the time of the birth.

[redacted] known to misuse alcohol. Martin known to keep "undesirable company," which was giving the [redacted] cause for concern around [redacted] protection issues.

Due to Georgina's vulnerability and [redacted] around [redacted] protection they made a referral to social work.

I made a telephone call to Dr. McCrae at [redacted] Health Centre (the practice Georgina was allocated to according to Chi). He shared information around A&E admissions where Georgina had self harmed. Dr. McCrae also shared there was a possible history of [redacted] abuse but no further details given.

Dr. McCrae was unable to find any details in her G.P. notes about any pregnancy when she was 11 years old.

We then attempted to find Georgina in the NHSGG&C maternity systems but were unable to do so. We also contacted Wishaw maternity services to request they kept a watch for her.

09/06/10: Phone call received from Midwife [redacted] (East Kilbride). She reported that Georgina had presented at Blue Suite surgery on the 3rd June but failed to attend for an

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15/10/2010 15:03 0141-201-9225 [redacted] PROTECTION PAGE 03/03

ultrasound scan even though she stated she was [redacted]. A further appointment was made for her on the 9th June but she failed to attend for that also.

[redacted] also shared that Georgina had previously resided in Ayrshire and had reported she fled there due to a violent partner; no further details known.

There was also information recorded in her notes regarding allegations (on more than one occasion) of rape, one recorded when she was 16 years of age.

11/06/10 Telephone call from Sandra [redacted] (midwife), to share that Georgina was [redacted] 174, Glenhove Road in Cumbernauld and that she had an appointment booked at the [redacted] Health Centre on 16/06/10 and an ultrasound scan booked for 17/06/10.

This is all we have, I hope it helps to clarify the picture.

Regards

Julie McConnell

JULIE McCONNELL
GBV Advisor
Women & Children's Directorate
NHS GG&C

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Extension:.tif
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18-Jun-2026 SARA
Additional: Scanned Document

Filename: igprda202606181532020.pdf
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NHS Confidential: Personal data about a patient

ST BRYCEDALE SURGERY - CHANGE OF PERSONAL DETAILS

FULL PATIENT NAME Georgina Smith	DATE OF BIRTH 4-12-91
NHS NUMBER (If known)	Effective date of change
CURRENTLY REGISTERED ADDRESS 11ba links st Kirkby.	

Please complete only the sections which are changing

Name	
New Address	21 Melrose Ave, Kirkby L32 5GN
Telephone Number	
Mobile Number	

A separate form should be used for each person.

Children or adults [redacted] 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

PRINT NAME

Relationship to Patient (if not patient)

Date 16/9/11

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18-Jun-2026 SARA
Additional: Scanned Document

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18-Jun-2026 SARA
Additional: Scanned Document

Filename: igprda202606181532010.pdf
Extension:.tif
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NHS Confidential: Personal data about a patient

ST BRYCEDALE SURGERY - CHANGE OF PERSONAL DETAILS

FULL PATIENT NAME Georgina Smith	DATE OF BIRTH 4-12-91
NHS NUMBER (If known)	Effective date of change
CURRENTLY REGISTERED ADDRESS 11ba links st Kirkby.	

Please complete only the sections which are changing

Name	
New Address	21 Melrose Ave, Kirkcaldy KY2 5BN
Telephone Number	
Mobile Number	

A separate form should be used for each person.

Children or adults [redacted] 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

PRINT NAME

Relationship to Patient (if not patient)

Date 16/9/11

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NHS Confidential: Personal data about a patient

15/10/2010 15:03 0141-201-9225 [redacted] PROTECTION PAGE 01/03

NHS
Greater Glasgow and Clyde

GENDER BASED VIOLENCE RESOURCE UNIT
Women and [redacted] Directorate

2nd Floor Medical Records Building,
Yorkhill Hospital,
Dalnair St,
Glasgow
G3 8SJ

Tel. 0141 201 9206
Radio-page. 07699 646 824
Monday-Friday 9am-5pm

email:gbvunit@ggc.acot.nhs.uk

Fax

To: Jane McPherson
Fax: 0141 201 9225 (CPU)
From: JULIE McCORKELL.
Date:
Job Title: **GBV ADVISOR**
Pages:
Re: **[redacted] NOTIFICATIONS**

Please find a resume of the info we hold on Georgina Smith.
Regards
Julie

☑ urgent
☐ for information
☐ please comment

Any difficulties in reading this please contact the GBVRU on 0141 201 9206

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NHS Confidential: Personal data about a patient

15/10/2010 15:03 0141-201-9225 [redacted] PROTECTION PAGE 02/03

GBV Resource Unit
C/o [redacted] Protection Unit
2nd Floor
Medical Records Building
Royal Hospital for Sick [redacted]
Dalnair Street
G3 8SJ

NHS
Greater Glasgow and Clyde

15/10/2010

Hi [redacted]
Here is a resume of the information we hold about:

Georgina Smith/White/McMillan D.O.B. 04/12/91

28/05/10: Initial contact made by [redacted] Domestic Abuse Unit at Aitkenhead Road The incident involved a breach of bail by [redacted] (Georgina's [redacted] The [redacted] reported there had been four previous incidents of domestic abuse perpetrated by [redacted] against Georgina in the Strathclyde area (plus other incidents in Central Region) and as a result [redacted] had bail conditions not to approach or to contact Georgina. The [redacted] when carrying out a routine bail check, found them together.

Georgina reported herself 14 weeks pregnant with [redacted]

Georgina not known to abuse alcohol or drugs

Georgina reported to the [redacted] that she had a 7 year old [redacted] stated she didn't know his date of birth nor where he now lived. Given that she's only 18 now this would have made her 11 years old at the time of the birth.

[redacted] known to misuse alcohol. Martin known to keep "undesirable company," which was giving the [redacted] cause for concern around [redacted] protection issues.

Due to Georgina's vulnerability and [redacted] around [redacted] protection they made a referral to social work.

I made a telephone call to Dr. McCrae at [redacted] Health Centre (the practice Georgina was allocated to according to Chi). He shared information around A&E admissions where Georgina had self harmed. Dr. McCrae also shared there was a possible history of [redacted] abuse but no further details given.

Dr. McCrae was unable to find any details in her G.P. notes about any pregnancy when she was 11 years old.

We then attempted to find Georgina in the NHSGG&C maternity systems but were unable to do so. We also contacted Wishaw maternity services to request they kept a watch for her.

09/06/10: Phone call received from Midwife [redacted] (East Kilbride). She reported that Georgina had presented at Blue Suite surgery on the 3rd June but failed to attend for an

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NHS Confidential: Personal data about a patient

15/10/2010 15:03 0141-201-9225 [redacted] PROTECTION PAGE 03/03

ultrasound scan even though she stated she was [redacted]. A further appointment was made for her on the 9th June but she failed to attend for that also.

[redacted] also shared that Georgina had previously resided in Ayrshire and had reported she fled there due to a violent partner; no further details known.

There was also information recorded in her notes regarding allegations (on more than one occasion) of rape, one recorded when she was 16 years of age.

11/06/10 Telephone call from Sandra [redacted] (midwife), to share that Georgina was [redacted] 174, Glenhove Road in Cumbernauld and that she had an appointment booked at the [redacted] Health Centre on 16/06/10 and an ultrasound scan booked for 17/06/10.

This is all we have, I hope it helps to clarify the picture.

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Julie McConnell

JULIE McCONNELL
GSV Advisor
Women & Children's Directorate
NHS GG&C

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NHS Confidential: Personal data about a patient

[redacted]

Date: 10 August 2011
Our Ref: DL/GB

Ms Georgina Smith
116a Links Street
Kirkcaldy
KY1 1QL

Dear Ms Smith,

I note that you did not come to the midwife clinic on Monday 8th August. [redacted] writing to stress that it is extremely important for you to link in with the midwife services and I would like to ask you to make an appointment to either the midwife or myself as soon as possible.

Yours sincerely

Dr [redacted] Lindsay

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NHS Confidential: [redacted] data about a patient

Smith, Georgina Wellwynd Practice
DoB: 04/12/1991 **Report Valid On 27/09/11 10:16** Page number 1

Registration

Miss Georgina Smith
73 Wester Mavisbank Avenue
AIRDRIE
ML6 0HE
Telephone:
Contact: ?
Email: ?
CHI Number: 0412913127
Patient ID:
Occupation:
Registered GP: Dr J Feeney
Repeat Consultation: ?
Registered: 24/08/2010
BMI: 0.0
Parity: 0
SCI-DC Consent Given: Yes

ContactRelship: ?
NHS Number: 662/91/440
Confirmed: 30/08/2010
Height: 0 m
Weight: 0 kg
Gravida: 0

Service Code: Permanent
DoB: 04/12/1991
Age: 19
Dispensing: No
Road: 0 Water: 0 FootPath: 0
Marital Status: Single
Seen By GP: Dr J Feeney
Acute Consultation: 02/03/2011
Records Received: 08/10/2010
BP: 0/0

Priority Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier

Repeat Medication

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

Adverse Reactions

[redacted] Code	Description

Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier
14/07/2011	None	Medium	GP22-moved out of area	
08/10/2010	None	Medium	Patient MRE received from HB	
30/08/2010	None	Medium	Pat. GP7B/GP8B card from HB	
27/08/2010	None	Medium	Patient reg. form sent to HB	
13/06/2011	13/06/2011	Low	Patient given telephone advice out of hours	
28/02/2011	28/02/2011	Low	Informed consent for procedure	
28/02/2011	28/02/2011	Low	Presence of chaperone	
Freetext: [redacted]				
28/02/2011	28/02/2011	Low	Presence of chaperone	
Freetext: liz				
06/01/2011	10/03/2011	Low	Spontaneous vaginal delivery	
20/10/2010	20/10/2010	Low	Notes summary on computer	
15/10/2010	None	Low	Patient [redacted]	
27/08/2010	None	Low	Current non drinker	
27/08/2010	None	Low	Current smoker	

Summary Sheet: Patient Transfer Printed at 27/09/2011 10:17:23

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NHS Confidential: [redacted] data about a patient

Smith, Georgina Wellwynd Practice
DoB: 04/12/1991 **Report Valid On 27/09/11 10:16** Page number 2

27/08/2010	None	Low	White Scottish
15/01/2009	15/01/2009	Low	Gallstones
15/01/2009	15/01/2009	Low	H/O: eczema
18/02/2005	18/02/2005	Low	Acne keloid
29/05/2003	29/05/2003	Low	Nocturnal enuresis
05/09/1998	05/09/1998	Low	Stomatitis - herpetic
24/10/1994	24/10/1994	Low	Soft systolic murmur

Screening

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-Amoxiclav 250mg/125mg TABS	15 1 Tab tds	12/01/2011
Metronidazole TABS 400MG	14 1 Tab morning and night	12/01/2011

Inactive Repeat Drugs

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

Last Encounter

Automatically generated by transaction

Clinical / User Markers:

GP22-moved out of area - -

==========

AW

Clinical / User Markers:

Patient given telephone advice out of hours - -

==========

Clinical / User Markers:

Spontaneous vaginal delivery - -

==========

2Jane Macpherson Date: 02/03/2011

==========

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NHS Confidential: [redacted] data about a patient

Smith, Georgina Wellwynd Practice
DoB: 04/12/1991 **Report Valid On 27/09/11 10:16** Page number 3

[redacted] Macpherson Date: 02/03/2011

==========

Dr MacGill Date: 28/02/2011

very low - self harming - multiple superficial cuts to arms - suicidal ideation - referred to crisis team - however I feel this is more manipulative behaviour than true depression

Clinical / User Markers:

Presence of chaperone - - liz

==========

[redacted] Date: 28/02/2011

in house pregnancy test - negative - Dr MacGill aware of same

Clinical / User Markers:

Informed consent for procedure - -

Presence of chaperone - - Gail

==========

2Jane Macpherson Date: 28/02/2011

upsi - had [redacted] 8th January - for preg test please - also self harming - NB NOTE COMMENTS RE CONSULTING ALONE WITH THIS PATIENT

==========

2Jane Macpherson Date: 12/01/2011

from [redacted] mw via Gillian ? post natal infection no allergies

Acute Prescriptions:

Co-Amoxiclav - 250mg/125mg TABS	1 Tab - tds	15
Metronidazole - TABS 400MG	1 Tab - morning and night	14

==========

Dr J Feeney Date: 29/12/2010

thinks in early labour--advised go to wishaw maternity.

==========

[redacted] Lesley Dickson Date: 20/12/2010

Clinical / User Markers:

Acne keloid - -

Gallstones - -

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NHS Confidential: [redacted] data about a patient

Smith, Georgina Wellwynd Practice
DoB: 04/12/1991 **Report Valid On 27/09/11 10:16** Page number 4

H/O: eczema - -

Nocturnal enuresis - -

Notes summary on computer - -

Soft systolic murmur - -

Stomatitis - herpetic - -

==========

2Jane Macpherson Date: 15/10/2010

==========

2Jane Macpherson Date: 15/10/2010

alleged [redacted] by sw staff and others Julie McCorkill 0141 201 9206 - [redacted] her [redacted] gives [redacted] serious [redacted] protection concerns * undesirable friends alcohol abuse and reported domestic abuse - bail condition not to approach or attempt to contact

her - no update re court activity or if this is still in place [redacted] will prepare a resume and fax to me today

==========

2Jane Macpherson Date: 15/10/2010

spoke to sw - social [redacted] saltcoats have advised re two [redacted] policy - also a man presented in reception stating he was in a relationship with georgina - but sw think he is in a relationship with georgina's [redacted] and that they are trying to find her -

allegations of abuse from [redacted] and partner. patient [redacted] is Martin McDonald

==========

2Jane Macpherson Date: 15/10/2010

from midwife [redacted] - TWO [redacted] POLICY FOR THIS PATIENT - ALLEGES [redacted] ABUSE BY PROFESSIONALS SPEAK TO SW [redacted] PROTECTION ISSUES

==========

Clinical / User Markers:

Patient [redacted] - -

==========

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Clinical / User Markers:

Patient MRE received from HB - -

==========

Automatically generated by transaction

Clinical / User Markers:

Pat. GP7B/GP8B card from HB - -

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NHS Confidential: [redacted] data about a patient

Smith, Georgina Wellwynd Practice
DoB: 04/12/1991 **Report Valid On 27/09/11 10:16** Page number 5

==========

Clinical / User Markers:

Current non drinker - -

Current smoker - -

White Scottish - -

==========

Automatically generated by transaction

Clinical / User Markers:

Patient reg. form sent to HB - -

==========

==========

Appointments List:

2Jane Macpherson	Mar 2 2011 1:55PM	
[redacted]	Feb 28 2011 3:55PM	
[redacted]	Feb 28 2011 3:50PM	
[redacted]	Feb 28 2011 3:45PM	
[redacted]	Feb 28 2011 3:40PM	
Dr MacGill	Feb 28 2011 3:40PM	NB MANDATORY CHAPERONE REQUIRED
[redacted] Macpherson	Feb 28 2011 1:22PM	
2Jane Macpherson	Jan 12 2011 3:00PM	
Dr J Feeney	Dec 29 2010 4:04PM	
2Jane Macpherson	Oct 15 2010 9:14PM	
2Jane Macpherson	Oct 15 2010 4:08PM	
[redacted] Macpherson	Oct 15 2010 4:01PM	
2Jane Macpherson	Oct 15 2010 3:14PM	
Dr [redacted] McPhee	Sep 21 2010 4:10PM	

Last 4 Clinical Notes

Date	Clinical Notes
14/07/2011	Automatically generated by transaction
21/06/2011	AW
28/02/2011	very low - self harming - multiple superficial cuts to arms - [redacted] ideation - referred to crisis team - however I feel this is more manipulative behaviour than true depression

Summary Sheet: Patient Transfer Printed at 27/09/2011 10:17:23

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28/02/2011 in house pregnancy test - negative - Dr MacGill aware of same

Palliative Care

Associates

Title	Forename	Surname	Relationship	Relationship Type

Associate Of

Title	Forename	Surname	Relationship	Relationship Type

Clinical Values

Date	Value Type	Value

F3 Clinical Notes

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12/01/2011	from [redacted] mw via Gillian ? post natal infection no allergies
29/12/2010	thinks in early labour--advised go to wishaw maternity.
15/10/2010	alleged [redacted] by sw staff and others [redacted] McCorkill 0141 201 9206 - Martin her [redacted] gives [redacted] serious child protection concerns ' undesirable friends alcohol abuse and reported domestic abuse - bail condition not to approach or attempt to contact her - no update re [redacted] activity or if this is still in place Julie will prepare a resume and fax to me today
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[redacted] known to misuse alcohol. Martin known to keep "undesirable company," which was giving the [redacted] cause for concern around [redacted] protection issues.

Due to Georgina's vulnerability and [redacted] around [redacted] protection they made a referral to social work.

I made a telephone call to Dr. McCrae at [redacted] Health Centre (the practice Georgina was allocated to according to Chi). He shared information around A&E admissions where Georgina had self harmed. Dr. McCrae also shared there was a possible history of [redacted] abuse but no further details given.

Dr. McCrae was unable to find any details in her G.P. notes about any pregnancy when she was 11 years old.

We then attempted to find Georgina in the NHSGG&C maternity systems but were unable to do so. We also contacted Wishaw maternity services to request they kept a watch for her.

09/06/10: Phone call received from Midwife [redacted] (East Kilbride). She reported that Georgina had presented at Blue Suite surgery on the 3rd June but failed to attend for an

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NHS Confidential: Personal data about a patient

15/10/2010 15:03 0141-201-9225 [redacted] PROTECTION PAGE 03/03

ultrasound scan even though she stated she was [redacted]. A further appointment was made for her on the 9th June but she failed to attend for that also.

[redacted] also shared that Georgina had previously resided in Ayrshire and had reported she fled there due to a violent partner; no further details known.

There was also information recorded in her notes regarding allegations (on more than one occasion) of rape, one recorded when she was 16 years of age.

11/06/10 Telephone call from Sandra [redacted] (midwife), to share that Georgina was [redacted] 174, Glenhove Road in Cumbernauld and that she had an appointment booked at the [redacted] Health Centre on 16/06/10 and an ultrasound scan booked for 17/06/10.

This is all we have, I hope it helps to clarify the picture.

Regards

Julie McConnell

JULIE McCONNELL
GBV Advisor
Women & Children's Directorate
NHS GG&C

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NHS Confidential: Personal data about a patient

C L 6118

Ayrshire Maternity Unit
Crosshouse Hospital

NHS 23 Ayrshire

Miss Georgina McMillan Hospital Number **0412913127** Date of Birth **4/12/1991**

Address 1 Finlay Avenue, Dalry, Ayrshire, KA24 4EA
Telephone
Age 19 years
CHI Number 0412913127
Consultant
Midwife
Midwife Tel
GP DR MARTIN THREE TOWNS MEDICAL 20 MAIN ST STEVENSTON
GP Tel

[redacted] Discharge Summary (printed 07 January 2011)

Reason for admission or transfer [redacted] Protection Plan

Labour and delivery

Membranes ruptured	6/1/2011,14:30	Liquor appearance	Clear
Time in labour	9h 29min		
Anaesthesia	Epidural		

Third Stage

Management of Third Stage	Active		
Placenta	Complete	Membranes	Complete
Early PPH	No	Blood loss	300 mls
Delivery medication	Syntocinon 10iu		
Episiotomy	No	Vaginal/cervical damage	
Perineal tearing	None	Suture material	

Postnatal care

Blood Pressure	110/62		
Perineal symptoms	Feels comfortable	Perineal exam	Declined examination
Breasts	Soft	Breast examination	
Blood group		Anti-D	
Postnatal health issue(s)	Child Protection Plan		

Discharge

Discharge or transfer from	Delivery Suite Obstetric Unit AMU	Discharged with [redacted]	No
Date of discharge / transfer	7/1/2011 10:40	Discharge or transfer to	1 finlay ave,dalry
Feeding method	Not applicable	Smoking	
Postnatal Days	0 days		

Other comments: Very weepy this morning, awaiting [redacted] ,states she is not returning to her address in [redacted] but going to Airdrie will find out more when social worker arrives.10.30 Social workers [redacted] and Jean Cullen now in attendance- Georgina informed that she does not require Anti-D, but that she should haveRubella Vaccine- has refused this does not wish any further dicussion about it but I have informed her of risks if she became pregnant again, she is returning to address in dalry i will inform community staff

Completed by: [redacted] Shearin (Midwife)

Signed Date & time

cc: Consultant
Midwife
Notes

Mothers Discharge Summary Miss Georgina McMillan Page: 1

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NHS Confidential: Personal data about a patient

C L 6118

Ayrshire Maternity Unit
Crosshouse Hospital

NHS Ayrshire [redacted] 23

Miss Georgina McMillan Hospital Number **0412913127** Date of Birth **4/12/1991**

Address 1 Finlay Avenue
Dalry, Ayrshire
KA24 4EA
Telephone

Age 19 years
CHI Number 0412913127
Consultant
Midwife
Midwife Tel

GP DR MARTIN
THREE TOWNS MEDICAL
20 MAIN ST
STEVENSTON
GP Tel

[redacted] Discharge Summary (printed 07 January 2011)

Reason for admission or transfer [redacted] Protection Plan

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Blood Pressure	110/62		
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Completed by: [redacted] Shearin (Midwife)

Signed Date & time

cc: Consultant
Midwife
Notes

Mothers Discharge Summary Miss Georgina McMillan Page: 1

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WELLWYND
Modern healthcare ◆ Traditional values

FAO PRAVIN

28/2/11

CHI No: 0412913127
Smith, Georgina
24/12/1991 F
73 Wester Mavisbank Avenue
AIRDRIE ML6 8HE
3067893 Dr A MacGill
184_AirdrieHC

Dear Colleague

This lady has a history of depression, but DNA Professor Pelosi's clinic in 2009. She had a baby at the beginning of January, but the baby has been taken into care, and the patient's mood is very low. She is self harming with multiple superficial cuts to her arms, and is expressing suicidal thoughts.

NB This patient has made multiple allegations of sexual harassment by professionals and should never be seen unaccompanied. Thank you

Partners - Dr John Atkinson, Dr Neil Darroch, Dr James Feeney, Dr Alexander MacGill, Ms Jane Macpherson

WELLWYND PRACTICE ◆ AIRDRIE HEALTH CENTRE ◆ MONKSCOURT AVENUE ◆ AIRDRIE ML6 0JU
TELEPHONE 01236 769 333 ◆ FACSIMILE 01236 748 570

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NHS Confidential: Personal data about a patient

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WELLWYND
Modern healthcare ◆ Traditional values

FAO PRAVIN

28/2/11

CHI No: 0412913127
Smith, Georgina
24/12/1991 F
73 Wester Mavisbank Avenue
AIRDRIE ML6 8HE
3067693 Dr A MacGill
184_AirdrieHC

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TELEPHONE 01236 769 333 ◆ FACSIMILE 01236 748 570

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NHS Confidential: Personal data about a patient

Faxed to Adam Avenue Community Mental health

WELLWYND
Modern healthcare ◆ Traditional values

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28/2/11

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24/12/1991 F
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TELEPHONE 01236 769 333 ◆ FACSIMILE 01236 748 570

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NHS Confidential: Personal data about a patient

C L 6118

Ayrshire Maternity Unit
Crosshouse Hospital

NHS 23
Ayrshire

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Age 19 years
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THREE TOWNS MEDICAL
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Delivery medication	Syntocinon 10iu		
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Perineal tearing	None	Suture material	

Postnatal care

Blood Pressure	110/62		
Perineal symptoms	Feels comfortable	Perineal exam	Declined examination
Breasts	Soft	Breast examination	
Blood group		Anti-D	
Postnatal health issue(s)	Child Protection Plan		

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Completed by: [redacted] Shearin (Midwife)

Signed Date & time

cc: Consultant
Midwife
Notes

Mothers Discharge Summary Miss Georgina McMillan Page: 1

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Faxed to Adam Avenue Community Mental health

WELLWYND
Modern healthcare ◆ Traditional values

FAO PRAVIN

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Crosshouse Hospital

NHS Ayrshire [redacted] 23

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GP DR MARTIN
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Completed by: [redacted] Shearin (Midwife)

Signed Date & time

cc: Consultant
Midwife
Notes

Mothers Discharge Summary Miss Georgina McMillan Page: 1

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NHS Confidential: [redacted] data about a patient

Smith, Georgina Wellwynd Practice
DoB: 04/12/1991 **Report Valid On 27/09/11 10:16** Page number 1

Registration

Miss Georgina Smith
73 Wester Mavisbank Avenue
AIRDRIE
ML6 0HE
Telephone:
Contact: ?
Email: ?
CHI Number: 0412913127
Patient ID:
Occupation:
Registered GP: Dr J Feeney
Repeat Consultation: ?
Registered: 24/08/2010
BMI: 0.0
Parity: 0
SCI-DC Consent Given: Yes

ContactRelship: ?
NHS Number: 662/91/440
Confirmed: 30/08/2010
Height: 0 m
Weight: 0 kg
Gravida: 0

Service Code: Permanent
DoB: 04/12/1991
Age: 19
Dispensing: No
Road: 0 Water: 0 FootPath: 0
Marital Status: Single
Seen By GP: Dr J Feeney
Acute Consultation: 02/03/2011
Records Received: 08/10/2010
BP: 0/0

Priority Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier

Repeat Medication

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

Adverse Reactions

[redacted] Code	Description

Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier
14/07/2011	None	Medium	GP22-moved out of area	
08/10/2010	None	Medium	Patient MRE received from HB	
30/08/2010	None	Medium	Pat. GP7B/GP8B card from HB	
27/08/2010	None	Medium	Patient reg. form sent to HB	
13/06/2011	13/06/2011	Low	Patient given telephone advice out of hours	
28/02/2011	28/02/2011	Low	Informed consent for procedure	
28/02/2011	28/02/2011	Low	Presence of chaperone	
Freetext: [redacted]				
28/02/2011	28/02/2011	Low	Presence of chaperone	
Freetext: liz				
06/01/2011	10/03/2011	Low	Spontaneous vaginal delivery	
20/10/2010	20/10/2010	Low	Notes summary on computer	
15/10/2010	None	Low	Patient [redacted]	
27/08/2010	None	Low	Current non drinker	
27/08/2010	None	Low	Current smoker	

Summary Sheet: Patient Transfer Printed at 27/09/2011 10:17:23

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NHS Confidential: [redacted] data about a patient

27/08/2010	None	Low	White Scottish
15/01/2009	15/01/2009	Low	Gallstones
15/01/2009	15/01/2009	Low	H/O: eczema
18/02/2005	18/02/2005	Low	Acne keloid
29/05/2003	29/05/2003	Low	Nocturnal enuresis
05/09/1998	05/09/1998	Low	Stomatitis - herpetic
24/10/1994	24/10/1994	Low	Soft systolic murmur

Screening

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-Amoxiclav 250mg/125mg TABS	15 1 Tab tds	12/01/2011
Metronidazole TABS 400MG	14 1 Tab morning and night	12/01/2011

Inactive Repeat Drugs

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

Last Encounter

Automatically generated by transaction

Clinical / User Markers:

GP22-moved out of area - -

==========

AW

Clinical / User Markers:

Patient given telephone advice out of hours - -

==========

Clinical / User Markers:

Spontaneous vaginal delivery - -

==========

2Jane Macpherson Date: 02/03/2011

==========

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NHS Confidential: [redacted] data about a patient

Smith, Georgina Wellwynd Practice
DoB: 04/12/1991 **Report Valid On 27/09/11 10:16** Page number 3

[redacted] Macpherson Date: 02/03/2011

==========

Dr MacGill Date: 28/02/2011

very low - self harming - multiple superficial cuts to arms - suicidal ideation - referred to crisis team - however I feel this is more manipulative behaviour than true depression

Clinical / User Markers:

Presence of chaperone - - liz

==========

[redacted] Date: 28/02/2011

in house pregnancy test - negative - Dr MacGill aware of same

Clinical / User Markers:

Informed consent for procedure - -

Presence of chaperone - - Gail

==========

2Jane Macpherson Date: 28/02/2011

upsi - had [redacted] 8th January - for preg test please - also self harming - NB NOTE COMMENTS RE CONSULTING ALONE WITH THIS PATIENT

==========

2Jane Macpherson Date: 12/01/2011

from [redacted] mw via Gillian ? post natal infection no allergies

Acute Prescriptions:

Co-Amoxiclav - 250mg/125mg TABS	1 Tab - tds	15
Metronidazole - TABS 400MG	1 Tab - morning and night	14

==========

Dr J Feeney Date: 29/12/2010

thinks in early labour--advised go to wishaw maternity.

==========

[redacted] Lesley Dickson Date: 20/12/2010

Clinical / User Markers:

Acne keloid - -

Gallstones - -

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NHS Confidential: [redacted] data about a patient

Smith, Georgina Wellwynd Practice
DoB: 04/12/1991 **Report Valid On 27/09/11 10:16** Page number 4

H/O: eczema - -

Nocturnal enuresis - -

Notes summary on computer - -

Soft systolic murmur - -

Stomatitis - herpetic - -

==========

2Jane Macpherson Date: 15/10/2010

==========

2Jane Macpherson Date: 15/10/2010

alleged [redacted] by sw staff and others Julie McCorkill 0141 201 9206 - [redacted] her [redacted] gives [redacted] serious [redacted] protection concerns * undesirable friends alcohol abuse and reported domestic abuse - bail condition not to approach or attempt to contact

her - no update re court activity or if this is still in place [redacted] will prepare a resume and fax to me today

==========

2Jane Macpherson Date: 15/10/2010

spoke to sw - social [redacted] saltcoats have advised re two [redacted] policy - also a man presented in reception stating he was in a relationship with georgina - but sw think he is in a relationship with georgina's [redacted] and that they are trying to find her -

allegations of abuse from [redacted] and partner. patient [redacted] is Martin McDonald

==========

2Jane Macpherson Date: 15/10/2010

from midwife [redacted] - TWO [redacted] POLICY FOR THIS PATIENT - ALLEGES [redacted] ABUSE BY PROFESSIONALS SPEAK TO SW [redacted] PROTECTION ISSUES

==========

Clinical / User Markers:

Patient [redacted] - -

==========

Automatically generated by transaction

Clinical / User Markers:

Patient MRE received from HB - -

==========

Automatically generated by transaction

Clinical / User Markers:

Pat. GP7B/GP8B card from HB - -

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NHS Confidential: [redacted] data about a patient

Smith, Georgina Wellwynd Practice
DoB: 04/12/1991 **Report Valid On 27/09/11 10:16** Page number 5

==========

Clinical / User Markers:

Current non drinker - -

Current smoker - -

White Scottish - -

==========

Automatically generated by transaction

Clinical / User Markers:

Patient reg. form sent to HB - -

==========

==========

Appointments List:

2Jane Macpherson	Mar 2 2011 1:55PM	
[redacted]	Feb 28 2011 3:55PM	
[redacted]	Feb 28 2011 3:50PM	
[redacted]	Feb 28 2011 3:45PM	
[redacted]	Feb 28 2011 3:40PM	
Dr MacGill	Feb 28 2011 3:40PM	NB MANDATORY CHAPERONE REQUIRED
[redacted] Macpherson	Feb 28 2011 1:22PM	
2Jane Macpherson	Jan 12 2011 3:00PM	
Dr J Feeney	Dec 29 2010 4:04PM	
2Jane Macpherson	Oct 15 2010 9:14PM	
2Jane Macpherson	Oct 15 2010 4:08PM	
[redacted] Macpherson	Oct 15 2010 4:01PM	
2Jane Macpherson	Oct 15 2010 3:14PM	
Dr [redacted] McPhee	Sep 21 2010 4:10PM	

Last 4 Clinical Notes

Date	Clinical Notes
14/07/2011	Automatically generated by transaction
21/06/2011	AW
28/02/2011	very low - self harming - multiple superficial cuts to arms - [redacted] ideation - referred to crisis team - however I feel this is more manipulative behaviour than true depression

Summary Sheet: Patient Transfer Printed at 27/09/2011 10:17:23

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NHS Confidential: [redacted] data about a patient

Smith, Georgina Wellwynd Practice
DoB: 04/12/1991 **Report Valid On 27/09/11 10:16** Page number 8

28/02/2011 in house pregnancy test - negative - Dr MacGill aware of same

Palliative Care

Associates

Title	Forename	Surname	Relationship	Relationship Type

Associate Of

Title	Forename	Surname	Relationship	Relationship Type

Clinical Values

Date	Value Type	Value

F3 Clinical Notes

Date	F3 Clinical Notes
14/07/2011	Automatically generated by transaction
21/06/2011	AW
28/02/2011	in house pregnancy test - negative - Dr MacGill aware of same
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12/01/2011	from [redacted] mw via Gillian ? post natal infection no allergies
29/12/2010	thinks in early labour--advised go to wishaw maternity.
15/10/2010	alleged [redacted] by sw staff and others [redacted] McCorkill 0141 201 9206 - Martin her [redacted] gives [redacted] serious child protection concerns ' undesirable friends alcohol abuse and reported domestic abuse - bail condition not to approach or attempt to contact her - no update re [redacted] activity or if this is still in place Julie will prepare a resume and fax to me today
15/10/2010	spoke to sw - social work in saltcoats have advised re two [redacted] policy - also a [redacted] presented in reception stating he was in a relationship with georgina - but sw think he is in a relationship with georgina's [redacted] and that they are trying to find her - allegations of abuse from mother and partner. patient [redacted] McDonald
15/10/2010	from midwife [redacted] - TWO [redacted] POLICY FOR THIS PATIENT - ALLEGES [redacted] ABUSE BY PROFESSIONALS SPEAK TO SW [redacted] PROTECTION ISSUES
08/10/2010	Automatically generated by transaction
30/08/2010	Automatically generated by transaction
27/08/2010	Automatically generated by transaction

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Filename: igprda202606181531480.pdf
Extension:.tif
Pages:

NHS Confidential: [redacted] data about a patient

Smith, Georgina Wellwynd Practice
DoB: 04/12/1991 **Report Valid On 27/09/11 10:16** Page number 1

Registration

Miss Georgina Smith
73 Wester Mavisbank Avenue
AIRDRIE
ML6 0HE
Telephone:
Contact: ? ContactRelship: ?
Email: ?
CHI Number: 0412913127 NHS Number: 662/91/440
Patient ID:
Occupation:
Registered GP: Dr J Feeney
Repeat Consultation: ?
Registered: 24/08/2010 Confirmed: 30/08/2010
BMI: 0.0 Height: 0 m Weight: 0 kg
Parity: 0 Gravida: 0
SCI-DC Consent Given: Yes

Service Code: Permanent
DoB: 04/12/1991
Age: 19
Dispensing: No
Road: 0 Water: 0 FootPath: 0
Marital Status: Single
Seen By GP: Dr J Feeney
Acute Consultation: 02/03/2011
Records Received: 08/10/2010
BP: 0/0

Priority Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier

Repeat Medication

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

Adverse Reactions

[redacted] Code	Description

Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier
14/07/2011	None	Medium	GP22-moved out of area	
08/10/2010	None	Medium	Patient MRE received from HB	
30/08/2010	None	Medium	Pat. GP7B/GP8B card from HB	
27/08/2010	None	Medium	Patient reg. form sent to HB	
13/06/2011	13/06/2011	Low	Patient given telephone advice out of hours	
28/02/2011	28/02/2011	Low	Informed consent for procedure	
28/02/2011	28/02/2011	Low	Presence of chaperone	
Freetext: [redacted]				
28/02/2011	28/02/2011	Low	Presence of chaperone	
Freetext: liz				
06/01/2011	10/03/2011	Low	Spontaneous vaginal delivery	
20/10/2010	20/10/2010	Low	Notes summary on computer	
15/10/2010	None	Low	Patient [redacted]	
27/08/2010	None	Low	Current non drinker	
27/08/2010	None	Low	Current smoker	

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NHS Confidential: [redacted] data about a patient

Smith, Georgina Wellwynd Practice
DoB: 04/12/1991 **Report Valid On 27/09/11 10:16** Page number 2

27/08/2010	None	Low	White Scottish
15/01/2009	15/01/2009	Low	Gallstones
15/01/2009	15/01/2009	Low	H/O: eczema
18/02/2005	18/02/2005	Low	Acne keloid
29/05/2003	29/05/2003	Low	Nocturnal enuresis
05/09/1998	05/09/1998	Low	Stomatitis - herpetic
24/10/1994	24/10/1994	Low	Soft systolic murmur

Screening

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-Amoxiclav 250mg/125mg TABS	15 1 Tab tds	12/01/2011
Metronidazole TABS 400MG	14 1 Tab morning and night	12/01/2011

Inactive Repeat Drugs

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

Last Encounter

Automatically generated by transaction

Clinical / User Markers:

GP22-moved out of area - -

==========

AW

Clinical / User Markers:

Patient given telephone advice out of hours - -

==========

Clinical / User Markers:

Spontaneous vaginal delivery - -

==========

2Jane Macpherson Date: 02/03/2011

==========

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NHS Confidential: [redacted] data about a patient

Smith, Georgina Wellwynd Practice
DoB: 04/12/1991 **Report Valid On 27/09/11 10:16** Page number 3

[redacted] Macpherson Date: 02/03/2011

==========

Dr MacGill Date: 28/02/2011

very low - self harming - multiple superficial cuts to arms - suicidal ideation - referred to crisis team - however I feel this is more manipulative behaviour than true depression

Clinical / User Markers:

Presence of chaperone - - liz

==========

[redacted] Date: 28/02/2011

in house pregnancy test - negative - Dr MacGill aware of same

Clinical / User Markers:

Informed consent for procedure - -

Presence of chaperone - - Gail

==========

2Jane Macpherson Date: 28/02/2011

upsi - had [redacted] 8th January - for preg test please - also self harming - NB NOTE COMMENTS RE CONSULTING ALONE WITH THIS PATIENT

==========

2Jane Macpherson Date: 12/01/2011

from [redacted] mw via Gillian ? post natal infection no allergies

Acute Prescriptions:

Co-Amoxiclav - 250mg/125mg TABS	1 Tab - tds	15
Metronidazole - TABS 400MG	1 Tab - morning and night	14

==========

Dr J Feeney Date: 29/12/2010

thinks in early labour--advised go to wishaw maternity.

==========

[redacted] Lesley Dickson Date: 20/12/2010

Clinical / User Markers:

Acne keloid - -

Gallstones - -

Summary Sheet: Patient Transfer Printed at 27/09/2011 10:17:23

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NHS Confidential: [redacted] data about a patient

Smith, Georgina Wellwynd Practice
DoB: 04/12/1991 **Report Valid On 27/09/11 10:16** Page number 4

H/O: eczema - -

Nocturnal enuresis - -

Notes summary on computer - -

Soft systolic murmur - -

Stomatitis - herpetic - -

==========

2Jane Macpherson Date: 15/10/2010

==========

2Jane Macpherson Date: 15/10/2010

alleged [redacted] by sw staff and others Julie McCorkill 0141 201 9206 " [redacted] her [redacted] gives [redacted] serious [redacted] protection concerns * undesirable friends alcohol abuse and reported domestic abuse - bail condition not to approach or attempt to contact

her - no update re court activity or if this is still in place [redacted] will prepare a resume and fax to me today

==========

2Jane Macpherson Date: 15/10/2010

spoke to sw - social [redacted] saltcoats have advised re two [redacted] policy - also a man presented in reception stating he was in a relationship with georgina - but sw think he is in a relationship with georgina's [redacted] and that they are trying to find her -

allegations of abuse from [redacted] and partner. patient [redacted] is Martin McDonald

==========

2Jane Macpherson Date: 15/10/2010

from midwife [redacted] - TWO [redacted] POLICY FOR THIS PATIENT - ALLEGES [redacted] ABUSE BY PROFESSIONALS SPEAK TO SW [redacted] PROTECTION ISSUES

==========

Clinical / User Markers:

Patient [redacted] - -

==========

Automatically generated by transaction

Clinical / User Markers:

Patient MRE received from HB - -

==========

Automatically generated by transaction

Clinical / User Markers:

Pat. GP7B/GP8B card from HB - -

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NHS Confidential: [redacted] data about a patient

Smith, Georgina Wellwynd Practice
DoB: 04/12/1991 **Report Valid On 27/09/11 10:16** Page number 5

==========

Clinical / User Markers:

Current non drinker - -

Current smoker - -

White Scottish - -

==========

Automatically generated by transaction

Clinical / User Markers:

Patient reg. form sent to HB - -

==========

==========

Appointments List:

2Jane Macpherson	Mar 2 2011 1:55PM	
[redacted]	Feb 28 2011 3:55PM	
[redacted]	Feb 28 2011 3:50PM	
[redacted]	Feb 28 2011 3:45PM	
[redacted]	Feb 28 2011 3:40PM	
Dr MacGill	Feb 28 2011 3:40PM	NB MANDATORY CHAPERONE REQUIRED
[redacted] Macpherson	Feb 28 2011 1:22PM	
2Jane Macpherson	Jan 12 2011 3:00PM	
Dr J Feeney	Dec 29 2010 4:04PM	
2Jane Macpherson	Oct 15 2010 9:14PM	
2Jane Macpherson	Oct 15 2010 4:08PM	
[redacted] Macpherson	Oct 15 2010 4:01PM	
2Jane Macpherson	Oct 15 2010 3:14PM	
Dr [redacted] McPhee	Sep 21 2010 4:10PM	

Last 4 Clinical Notes

Date	Clinical Notes
14/07/2011	Automatically generated by transaction
21/06/2011	AW
28/02/2011	very low - self harming - multiple superficial cuts to arms - [redacted] ideation - referred to crisis team - however I feel this is more manipulative behaviour than true depression

Summary Sheet: Patient Transfer Printed at 27/09/2011 10:17:23

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NHS Confidential: [redacted] data about a patient

Smith, Georgina Wellwynd Practice
DoB: 04/12/1991 **Report Valid On 27/09/11 10:16** Page number 8

28/02/2011 in house pregnancy test - negative - Dr MacGill aware of same

Palliative Care

Associates

Title	Forename	Surname	Relationship	Relationship Type

Associate Of

Title	Forename	Surname	Relationship	Relationship Type

Clinical Values

Date	Value Type	Value

F3 Clinical Notes

Date	F3 Clinical Notes
14/07/2011	Automatically generated by transaction
21/06/2011	AW
28/02/2011	in house pregnancy test - negative - Dr MacGill aware of same
28/02/2011	very low - self harming - multiple superficial cuts to arms - [redacted] ideation - referred to crisis team - however I feel this is more manipulative behaviour than true depression
28/02/2011	upsi - had [redacted] 6th January - for preg test please - also self harming - NB NOTE COMMENTS RE CONSULTING ALONE WITH THIS PATIENT
12/01/2011	from [redacted] mw via Gillian ? post natal infection no allergies
29/12/2010	thinks in early labour--advised go to wishaw maternity.
15/10/2010	alleged [redacted] by sw staff and others [redacted] McCorkill 0141 201 9206 - Martin her [redacted] gives [redacted] serious child protection concerns ' undesirable friends alcohol abuse and reported domestic abuse - bail condition not to approach or attempt to contact her - no update re [redacted] activity or if this is still in place Julie will prepare a resume and fax to me today
15/10/2010	spoke to sw - social work in saltcoats have advised re two [redacted] policy - also a [redacted] presented in reception stating he was in a relationship with georgina - but sw think he is in a relationship with georgina's [redacted] and that they are trying to find her - allegations of abuse from mother and partner. patient [redacted] McDonald
15/10/2010	from midwife [redacted] - TWO [redacted] POLICY FOR THIS PATIENT - ALLEGES [redacted] ABUSE BY PROFESSIONALS SPEAK TO SW [redacted] PROTECTION ISSUES
08/10/2010	Automatically generated by transaction
30/08/2010	Automatically generated by transaction
27/08/2010	Automatically generated by transaction

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NHS Confidential: [redacted] data about a patient

Smith, Georgina Wellwynd Practice
DoB: 04/12/1991 **Report Valid On 27/09/11 10:16** Page number 1

Registration

Miss Georgina Smith
73 Wester Mavisbank Avenue
AIRDRIE
ML6 0HE
Telephone:
Contact: ? ContactRelship: ?
Email: ?
CHI Number: 0412913127 NHS Number: 662/91/440
Patient ID:
Occupation:
Registered GP: Dr J Feeney
Repeat Consultation: ?
Registered: 24/08/2010 Confirmed: 30/08/2010
BMI: 0.0 Height: 0 m Weight: 0 kg
Parity: 0 Gravida: 0
SCI-DC Consent Given: Yes

Service Code: Permanent
DoB: 04/12/1991
Age: 19
Dispensing: No
Road: 0 Water: 0 FootPath: 0
Marital Status: Single
Seen By GP: Dr J Feeney
Acute Consultation: 02/03/2011
Records Received: 08/10/2010
BP: 0/0

Priority Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier

Repeat Medication

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

Adverse Reactions

[redacted] Code	Description

Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier
14/07/2011	None	Medium	GP22-moved out of area	
08/10/2010	None	Medium	Patient MRE received from HB	
30/08/2010	None	Medium	Pat. GP7B/GP8B card from HB	
27/08/2010	None	Medium	Patient reg. form sent to HB	
13/06/2011	13/06/2011	Low	Patient given telephone advice out of hours	
28/02/2011	28/02/2011	Low	Informed consent for procedure	
28/02/2011	28/02/2011	Low	Presence of chaperone	
Freetext: [redacted]				
28/02/2011	28/02/2011	Low	Presence of chaperone	
Freetext: liz				
06/01/2011	10/03/2011	Low	Spontaneous vaginal delivery	
20/10/2010	20/10/2010	Low	Notes summary on computer	
15/10/2010	None	Low	Patient [redacted]	
27/08/2010	None	Low	Current non drinker	
27/08/2010	None	Low	Current smoker	

Summary Sheet: Patient Transfer Printed at 27/09/2011 10:17:23

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NHS Confidential: [redacted] data about a patient

Smith, Georgina Wellwynd Practice
DoB: 04/12/1991 **Report Valid On 27/09/11 10:16** Page number 2

27/08/2010	None	Low	White Scottish
15/01/2009	15/01/2009	Low	Gallstones
15/01/2009	15/01/2009	Low	H/O: eczema
18/02/2005	18/02/2005	Low	Acne keloid
29/05/2003	29/05/2003	Low	Nocturnal enuresis
05/09/1998	05/09/1998	Low	Stomatitis - herpetic
24/10/1994	24/10/1994	Low	Soft systolic murmur

Screening

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-Amoxiclav 250mg/125mg TABS	15 1 Tab tds	12/01/2011
Metronidazole TABS 400MG	14 1 Tab morning and night	12/01/2011

Inactive Repeat Drugs

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

Last Encounter

Automatically generated by transaction

Clinical / User Markers:

GP22-moved out of area - -

==========

AW

Clinical / User Markers:

Patient given telephone advice out of hours - -

==========

Clinical / User Markers:

Spontaneous vaginal delivery - -

==========

2Jane Macpherson Date: 02/03/2011

==========

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NHS Confidential: [redacted] data about a patient

Smith, Georgina Wellwynd Practice
DoB: 04/12/1991 **Report Valid On 27/09/11 10:16** Page number 3

[redacted] Macpherson Date: 02/03/2011

==========

Dr MacGill Date: 28/02/2011

very low - self harming - multiple superficial cuts to arms - suicidal ideation - referred to crisis team - however I feel this is more manipulative behaviour than true depression

Clinical / User Markers:

Presence of chaperone - - liz

==========

[redacted] Date: 28/02/2011

in house pregnancy test - negative - Dr MacGill aware of same

Clinical / User Markers:

Informed consent for procedure - -

Presence of chaperone - - Gail

==========

2Jane Macpherson Date: 28/02/2011

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==========

2Jane Macpherson Date: 12/01/2011

from [redacted] mw via Gillian ? post natal infection no allergies

Acute Prescriptions:

Co-Amoxiclav - 250mg/125mg TABS	1 Tab - tds	15
Metronidazole - TABS 400MG	1 Tab - morning and night	14

==========

Dr J Feeney Date: 29/12/2010

thinks in early labour--advised go to wishaw maternity.

==========

[redacted] Lesley Dickson Date: 20/12/2010

Clinical / User Markers:

Acne keloid - -

Gallstones - -

Summary Sheet: Patient Transfer Printed at 27/09/2011 10:17:23

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NHS Confidential: [redacted] data about a patient

Smith, Georgina Wellwynd Practice
DoB: 04/12/1991 **Report Valid On 27/09/11 10:16** Page number 4

H/O: eczema - -

Nocturnal enuresis - -

Notes summary on computer - -

Soft systolic murmur - -

Stomatitis - herpetic - -

==========

2Jane Macpherson Date: 15/10/2010

==========

2Jane Macpherson Date: 15/10/2010

alleged [redacted] by sw staff and others Julie McCorkill 0141 201 9206 - [redacted] her [redacted] gives [redacted] serious [redacted] protection concerns * undesirable friends alcohol abuse and reported domestic abuse - bail condition not to approach or attempt to contact

her - no update re court activity or if this is still in place [redacted] will prepare a resume and fax to me today

==========

2Jane Macpherson Date: 15/10/2010

spoke to sw - social [redacted] saltcoats have advised re two [redacted] policy - also a man presented in reception stating he was in a relationship with georgina - but sw think he is in a relationship with georgina's [redacted] and that they are trying to find her -

allegations of abuse from [redacted] and partner. patient [redacted] is Martin McDonald

==========

2Jane Macpherson Date: 15/10/2010

from midwife [redacted] - TWO [redacted] POLICY FOR THIS PATIENT - ALLEGES [redacted] ABUSE BY PROFESSIONALS SPEAK TO SW [redacted] PROTECTION ISSUES

==========

Clinical / User Markers:

Patient [redacted] - -

==========

Automatically generated by transaction

Clinical / User Markers:

Patient MRE received from HB - -

==========

Automatically generated by transaction

Clinical / User Markers:

Pat. GP7B/GP8B card from HB - -

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NHS Confidential: [redacted] data about a patient

Smith, Georgina Wellwynd Practice
DoB: 04/12/1991 **Report Valid On 27/09/11 10:16** Page number 5

==========

Clinical / User Markers:

Current non drinker - -

Current smoker - -

White Scottish - -

==========

Automatically generated by transaction

Clinical / User Markers:

Patient reg. form sent to HB - -

==========

==========

Appointments List:

2Jane Macpherson	Mar 2 2011 1:55PM	
[redacted]	Feb 28 2011 3:55PM	
[redacted]	Feb 28 2011 3:50PM	
[redacted]	Feb 28 2011 3:45PM	
[redacted]	Feb 28 2011 3:40PM	
Dr MacGill	Feb 28 2011 3:40PM	NB MANDATORY CHAPERONE REQUIRED
[redacted] Macpherson	Feb 28 2011 1:22PM	
2Jane Macpherson	Jan 12 2011 3:00PM	
Dr J Feeney	Dec 29 2010 4:04PM	
2Jane Macpherson	Oct 15 2010 9:14PM	
2Jane Macpherson	Oct 15 2010 4:08PM	
[redacted] Macpherson	Oct 15 2010 4:01PM	
2Jane Macpherson	Oct 15 2010 3:14PM	
Dr [redacted] McPhee	Sep 21 2010 4:10PM	

Last 4 Clinical Notes

Date	Clinical Notes
14/07/2011	Automatically generated by transaction
21/06/2011	AW
28/02/2011	very low - self harming - multiple superficial cuts to arms - [redacted] ideation - referred to crisis team - however I feel this is more manipulative behaviour than true depression

Summary Sheet: Patient Transfer Printed at 27/09/2011 10:17:23

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NHS Confidential: [redacted] data about a patient

28/02/2011 in house pregnancy test - negative - Dr MacGill aware of same

Palliative Care

Associates

Title	Forename	Surname	Relationship	Relationship Type

Associate Of

Title	Forename	Surname	Relationship	Relationship Type

Clinical Values

Date	Value Type	Value

F3 Clinical Notes

Date	F3 Clinical Notes
14/07/2011	Automatically generated by transaction
21/06/2011	AW
28/02/2011	in house pregnancy test - negative - Dr MacGill aware of same
28/02/2011	very low - self harming - multiple superficial cuts to arms - [redacted] ideation - referred to crisis team - however I feel this is more manipulative behaviour than true depression
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12/01/2011	from [redacted] mw via Gillian ? post natal infection no allergies
29/12/2010	thinks in early labour--advised go to wishaw maternity.
15/10/2010	alleged [redacted] by sw staff and others [redacted] McCorkill 0141 201 9206 - Martin her [redacted] gives [redacted] serious child protection concerns ' undesirable friends alcohol abuse and reported domestic abuse - bail condition not to approach or attempt to contact her - no update re [redacted] activity or if this is still in place Julie will prepare a resume and fax to me today
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15/10/2010	from midwife [redacted] - TWO [redacted] POLICY FOR THIS PATIENT - ALLEGES [redacted] ABUSE BY PROFESSIONALS SPEAK TO SW [redacted] PROTECTION ISSUES
08/10/2010	Automatically generated by transaction
30/08/2010	Automatically generated by transaction
27/08/2010	Automatically generated by transaction

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NHS Confidential: Personal data about a patient

FIFE PHARMACY

NHS Fife

Voucher for Nicotine Replacement Therapy (NRT)

Please take to a Pharmacy in Fife for dispensing

Client Name: GEORGINA SMITH CHI No.: 041291 3127

Address: 21 melrose Cres GP Practice: DR Duncan

Kirkcaldy St. Brycedale

The above client is attending week 8 of a programme of Stop Smoking support.

I have assessed this client as suitable for NRT. Please provide 4 weeks' supply of the following:

Name of preparation (state brand if applicable)	Formulation e.g. patch	Strength	Directions for use e.g. apply daily	State total quantity e.g. 4x7	Dispensing instructions e.g. weekly
~~NICORETTE~~	MOUTHSPRAY	1mg	1-2 SPRAYS PER HOUR	4 x NON PACK	WEEKLY

Comments:

Signed: Date: 7/10/11

Name of Practitioner: PAMELA GALLOWAY Tel No: 07765897165

To be completed by the pharmacy:

Contractor Code:

Does the client pay prescription charges? Yes/No fee paid: £

Has the client a pre-payment certificate? Yes/No expires on: / /

Evidence produced for exemption? Yes/No

NRT Supplied				
Supply date	Brand	Form	Strength Supplied	Quantity
02.07.10 Example	NICORETTE Example	PATCH Example	10mg Example	1 x 7 Example

Pharmacy Stamp:

Pharmacist signature: Date:

Once completed, send to CHP Smoking Cessation Administrators within your CHP

Top copy - Client
Pink copy - GP
Yellow copy - Practitioner

D&WF, House 2, Lynebank Hospital, Dunfermline KY11 4UW
G&NEF, Ladybank Clinic, Commercial Road, Ladybank KY15 7JS
K&L, [redacted] House, [redacted] Hospital, Windygates KY8 5RG

0955

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NHS Confidential: Personal data about a patient

FIFE PHARMACY

NHS Fife

Voucher for Nicotine Replacement Therapy (NRT)

Please take to a Pharmacy in Fife for dispensing

Client Name: Georgina Smith CHI No.: 041291 3127

Address: 21 Melrose Cres GP Practice: D.R Duncan

Kirkcaldy St. Brycedale

The above client is attending week 8 of a programme of Stop Smoking support.

I have assessed this client as suitable for NRT. Please provide 4 weeks' supply of the following:

Name of preparation (state brand if applicable)	Formulation e.g. patch	Strength	Directions for use e.g. apply daily	State total quantity e.g. 4x7	Dispensing instructions e.g. weekly
~~NICORETTE~~	MOUTHSPRAY	1mg	1-2 SPRAYS PER HOUR	4 x NON PACK	WEEKLY

Comments:

Signed: Date: 7/10/11

Name of Practitioner: Pamela Galloway Tel No: 07765897165

To be completed by the pharmacy:

Contractor Code:

Does the client pay prescription charges? Yes/No fee paid: £

Has the client a pre-payment certificate? Yes/No expires on: / /

Evidence produced for exemption? Yes/No

NRT Supplied				
Supply date	Brand	Form	Strength Supplied	Quantity
02.07.10 Example	NICORETTE Example	PATCH Example	10mg Example	1 x 7 Example

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Pharmacist signature: Date:

Once completed, send to CHP Smoking Cessation Administrators within your CHP

Top copy - Client
Pink copy - GP
Yellow copy - Practitioner

D&WF, House 2, Lynebank Hospital, Dunfermline KY11 4UW
G&NEF, Ladybank Clinic, Commercial Road, Ladybank KY15 7JS
K&L, [redacted] House, [redacted] Hospital, Windygates KY8 5RG

0955

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18-Jun-2026 SARA
Additional: Scanned Document

Filename: igprda202606181531300.pdf
Extension:.tif
Pages:

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Scanned Document
18-Jun-2026 SARA
Additional: Scanned Document

Filename: igprda202606181531330.pdf
Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

11.10.11 - patient present unable to attend. 3127. Vdap

ST BRYCEDALE SURGERY - CHANGE OF PERSONAL DETAILS

FULL PATIENT NAME Grainne Smith	DATE OF BIRTH 4/12/91
NHS NUMBER (If known)	Effective date of change 25/8/11
CURRENTLY REGISTERED ADDRESS 3 Pitfour Pl Ellon	

Please complete only the sections which are changing

Name	
New Address	Valley Accomodation Valley Gardens Kirkcaldy KY1 2GBC
Telephone Number	
Mobile Number	

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 / [redacted] of [redacted] under the age of 16 years may sign on behalf of their children.

Signed

PRINT NAME

Relationship to Patient (if not patient)

Date

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11.10.11 - patient present unable to attend. 3127. Vdap

ST BRYCEDALE SURGERY - CHANGE OF PERSONAL DETAILS

FULL PATIENT NAME Grainne Smith	DATE OF BIRTH 4/12/91
NHS NUMBER (If known)	Effective date of change 25/8/11
CURRENTLY REGISTERED ADDRESS 3 Pitfour Pl Ky4	

Please complete only the sections which are changing

Name	
New Address	Valley Accomodation Valley Gardens Kirkcaldy Ky2 6RC
Telephone Number	
Mobile Number	

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 / [redacted] of [redacted] under the age of 16 years may sign on behalf of their children.

Signed

PRINT NAME

Relationship to Patient (if not patient)

Date

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Pages:

NHS Confidential: [redacted] data about a patient

Full Report

Ms Georgina Smith **04/12/1991** **Female** **662/91/440** **Transferred Out**

Address
Valley Accomodation Valley Gardens Kirkcaldy KY2 6BC Address Type: Main address

Communication numbers
Telephone - home 07774733501

Problems
Currently Relevant Started: 14/07/2011 Ended:

Medical History
15/11/2011 Patient de-reg. MRE to HB Mrs [redacted] Fleming
01/11/2011 Administration NOS letter regarding professionals meeting - see docman. They have address of 17 Carfrae Drive GLENROTHES Miss [redacted]
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27/09/2011 Patient MRE received from HB docman imported. Mrs [redacted]
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Acute and Repeat Issue Therapy

19/10/2011	issued	CLOTRIMAZOLE pessary & crm 500mg + 2%	Supply: (1) pack	INSERT ONCE PESSARY AT NIGHT AND USE CREAM ON VULVA FOR 7 DAYS
23/09/2011	issued	FERROUS SULPHATE tabs 200mg	Supply: (252) tablet	TAKE ONE THREE TIMES DAILY
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Recall
05/09/2011 Recall on 04/12/2011 for Cervical smear due with Dr H [redacted] Status:Outstanding Initial
14/07/2011 Recall on 11/08/2011 for New patient screen 2nd letter with Mrs Gillian Brown Status:Complete

Consultation

St Brycedale Surgery, St Brycedale Road, Kirkcaldy, Fife, KY1 1ER
Tel: 01592 640800
Page 1/2 Printed by [redacted] on 15/11/11 09:27.14

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Full Report

Ms Georgina Smith **04/12/1991** **Female** **662/91/440** **Transferred Out**

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21/09/2011	Results recording	Dr H Duffy
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20/09/2011	Surgery consultation	Ms [redacted] Mcintyre
16/09/2011	Administration	Mrs [redacted] Brown
06/09/2011	Administration	Dr F J Mcgowan
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14/07/2011	Administration	Mrs Gillian Brown

Eosinophil count

20/09/2011	Eosinophil count	= 0.28 10*9/L		Eos - x10-9/l

Haemoglobin

20/09/2011	Haemoglobin estimation	= 13 g/dL		HGB - g/dl

Mean corpuscular haemoglobin

20/09/2011	Mean corpusc. haemoglobin(MCH)	= 28.9 pg/mL		MCH - pg

MCH Hb Concentration

20/09/2011	Mean corpusc. Hb. conc. (MCHC)	= 33.2 g/dL		MCHC - g/dl

Mean corpuscular volume

20/09/2011	Mean corpuscular volume (MCV)	= 86.9 fL		MCV - fl

Monocyte count

20/09/2011	Monocyte count	= 0.76 10*9/L		Mono - x10-9/l

Neutrophil count

20/09/2011	Neutrophil count	= 11.34 10*9/L	Above high reference limit	Neut - x10-9/l

Platelets

20/09/2011	Platelet count	= 283 10*9/L		PLT - x10-9/l

Red blood cell count

20/09/2011	Red blood cell (RBC) count	= 4.5 10*-2		RBC - x10-12/l

White blood count

20/09/2011	Total white cell count	= 14.2 10*9/L	Above high reference limit	WBC - x10-9/l

Lymphocyte count

20/09/2011	Lymphocyte count	= 1.74 10*9/L		Lymp - x10-9/l

Full blood count

20/09/2011	Full blood count - FBC			FBC

Packed Cell Volume

20/09/2011	Haematocrit - PCV	= 39.1 %		Hct -

Basophil count

20/09/2011	Basophil count	= 0.04 10*9/L		Baso - x10-9/l

RBC red blood cell size

20/09/2011	Red blood cell distribution width	= 14.1		RDW

Total patients for report 1

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Total patients for report 1

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GPR

NHS IN SCOTLAND

1/11/14

NHS SCOTLAND

APPLICATION TO REGISTER PERMANENTLY WITH A GENERAL MEDICAL PRACTICE

Please 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 * Stevens

TITLE # Miss

MALE * ☐ FEMALE * ☑

FORENAME * GEORGINA

MIDDLE NAME *

PREVIOUS SURNAME * SMITH

DATE OF BIRTH * 04/02/1996

ADDRESS * 17 CARFRAE DRIVE

POSTCODE * KY6 1LX

TOWN & COUNTRY OF BIRTH * ARDROSSAN

[redacted] MAIDEN NAME * SMITH

TELEPHONE NUMBER # 07774733501

EMAIL ADDRESS #

PREVIOUS ADDRESS IN UK * 116 LINKS STREET KIRKCALDY

POSTCODE

NAME AND ADDRESS OF PREVIOUS REGISTERED GP PRACTICE IN UK * St. Bryscedale

POSTCODE *

COMMUNITY HEALTH INDEX NUMBER

NHS NUMBER

NATIONAL INSURANCE NUMBER JM716260A

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

L. Stevens

DATE 05 M M Y Y

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 only

PRACTICE CODE F 2 0 6 0 6

GP NAME DR NSN NAIR

GP REFERENCE NUMBER 9 1 9 1 0

IDENTIFICATION SEEN

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

DATE 0 9 1 1 1 1

OFFICIAL USE ONLY		
Input By:	Date:	Checked By:

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Restricted Medical (when complete)

New Patient Registration Form

Lomond Practice

Glenwood Health Centre, Glenrothes, Fife. KY6 1HL
Please send all postal correspondence to the practice.
Main appointments line: 01592 611000.

Thank you for your interest in joining our practice. We hope that the following information will help you to decide whether we are the right practice for you. We are a large practice with over 7800 patients with 4 [redacted] Between us we have expertise in Asthma, Diabetes, Family Planning, Surgery, [redacted] Health as well as Family medicine.

We have routine appointments, which can be booked in advance, and we also see emergencies on the same day. We expect unwanted appointments to be cancelled at your earliest convenience as there are always other patients waiting to take the appointment.

We are happy to visit patients at home when they are unable, due to their health, to attend the surgery. These include the elderly, the very sick, and people who are terminally ill. Please remember that we can see four or five patients in the surgery in the same time that one home visit takes.

Except in exceptional circumstances we will always ask for small [redacted] to be brought to the surgery, where we believe we can offer the best care.

Please note, in line with the new general medical services contract this Practice does not provide the specialized services for drug misusers. If this were something that applies to you, you would be advised to register with another Practice.

Please complete the proforma for each family member you wish to register.
The Practice reserves the right to accept new patients to the list at its discretion.

New patient information:

Surname Stevens

First names GEORGINA

Date of Birth 04/12/1991 Sex: ☒ F

Full address 17 Carfrae Drive,

Postcode KY6 1LX

Telephone no 07774733501

Marital status Single

Occupation

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Have you had any serious illnesses or operations in the past ?

1. Stones in kidneys. 2.

3. 4.

5. 6.

Are you taking any medication regularly? NO
(Please state the full name of the drug and the dose)

1. 2.

2. 4.

5. 6.

Do you have any allergies? NO

1. 2.

3. 4.

Lifestyle Factors

Height..... Weight..... BP..... (please ask at reception to arrange this today)

Do you smoke?
Never Smoked ☐
Ex-Smoker ☐
Smoker ☑

Alcohol Intake? **Per week**
Nil ☑
less than14 units ☐
14-21 units ☐
More than 21 units ☐
(1 unit = half pint beer, 1 glass wine, 1 measure of spirits)

Would you like advice on stopping smoking ☐
(ask at reception for more information on stopping smoking)

Drugs
Yes ☐
No ☑

(if yes, what do you take)

1. 3.

2. 4.

Please note, in line with the new general medical services contract **this Practice does not provide the specialized services for drug misusers**. If this were something that applies to you, you would be advised to register with another Practice.

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NHS Confidential: Personal data about a patient

Family History:

Have either of your [redacted] or a [redacted] or [redacted] had:-

	Yes	No
1. Heart Disease (heart attack, angina, heart surgery)	☐	☑
2. A Stroke	☐	☑
3. Diabetes	☐	☑
4. Hypertension (high blood pressure)	☐	☑
5. Epilepsy	☐	☐
6. Asthma	☑	☐

If yes please give details: (e.g. [redacted] – stroke at age 60)

1. my brother and sister has asthma.
2.
3.
4.
5.
6.

The Practice offers all new patients a routine health check.

Please tick as appropriate:

Yes I would like a health check ☑ (don't forget to make an appointment at reception)

No I do not wish to have a health check ☐

Please sign and date below.

Many thanks.

G. Stevens
Signature

08/11/11
Date

Restricted Medical (when complete)

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NHS Confidential: Personal data about a patient

Please complete this Ethnic origin form with your new registration documents:

- [x] White Scottish
- [ ] Other white British ethnic group
- [x] White Irish
- [ ] Other white ethnic group
- [ ] Other ethnic, mixed origin
- [ ] Indian
- [ ] Pakistani
- [ ] Bangladeshi
- [ ] Chinese
- [ ] Other Asian ethnic group
- [ ] Black Caribbean
- [ ] Black African
- [ ] Other black ethnic group
- [ ] Other ethnic group
- [ ] Ethnic group not recorded
- [ ] Ethnic group - patient refused

Thank you

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New Patient Registration Form

Lomond Practice

Glenwood Health Centre, Glenrothes, Fife. KY6 1HL
Please send all postal correspondence to the practice.
Main appointments line: 01592 611000.

Thank you for your interest in joining our practice. We hope that the following information will help you to decide whether we are the right practice for you. We are a large practice with over 7800 patients with 4 [redacted] Between us we have expertise in Asthma, Diabetes, Family Planning, Surgery, [redacted] Health as well as Family medicine.

We have routine appointments, which can be booked in advance, and we also see emergencies on the same day. We expect unwanted appointments to be cancelled at your earliest convenience as there are always other patients waiting to take the appointment.

We are happy to visit patients at home when they are unable, due to their health, to attend the surgery. These include the elderly, the very sick, and people who are terminally ill. Please remember that we can see four or five patients in the surgery in the same time that one home visit takes.

Except in exceptional circumstances we will always ask for small [redacted] to be brought to the surgery, where we believe we can offer the best care.

Please note, in line with the new general medical services contract this Practice does not provide the specialized services for drug misusers. If this were something that applies to you, you would be advised to register with another Practice.

Please complete the proforma for each family member you wish to register.
The Practice reserves the right to accept new patients to the list at its discretion.

New patient information:

Surname Stevens

First names GEORGINA

Date of Birth 04/12/1991 Sex: ☒ F

Full address 17 Carfrae Drive,

Postcode Ky6 1LX

Telephone no 07774733501

Marital status Single

Occupation

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Have you had any serious illnesses or operations in the past ?

1. Stones in kidneys. 2.

3. 4.

5. 6.

Are you taking any medication regularly? NO
(Please state the full name of the drug and the dose)

1. 2.

2. 4.

5. 6.

Do you have any allergies? NO

1. 2.

3. 4.

Lifestyle Factors

Height..... Weight..... BP..... (please ask at reception to arrange this today)

Do you smoke?
Never Smoked ☐
Ex-Smoker ☐
Smoker ☑

Alcohol Intake? **Per week**
Nil ☑
less than14 units ☐
14-21 units ☐
More than 21 units ☐
(1 unit = half pint beer, 1 glass wine, 1 measure of spirits)

Would you like advice on stopping smoking ☐
(ask at reception for more information on stopping smoking)

Drugs
Yes ☐
No ☑

(if yes, what do you take)

1. 3.

2. 4.

Please note, in line with the new general medical services contract **this Practice does not provide the specialized services for drug misusers**. If this were something that applies to you, you would be advised to register with another Practice.

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Family History:

Have either of your [redacted] or a [redacted] or [redacted] had:-

	Yes	No
1. Heart Disease (heart attack, angina, heart surgery)	☐	☑
2. A Stroke	☐	☑
3. Diabetes	☐	☑
4. Hypertension (high blood pressure)	☐	☑
5. Epilepsy	☐	☐
6. Asthma	☑	☐

If yes please give details: (e.g. [redacted] – stroke at age 60)

1. my brother and sister has asthma.
2.
3.
4.
5.
6.

The Practice offers all new patients a routine health check.

Please tick as appropriate:

Yes I would like a health check ☑ (don't forget to make an appointment at reception)

No I do not wish to have a health check ☐

Please sign and date below.

Many thanks.

G. Stevens
Signature

08/11/11
Date

Restricted Medical (when complete)

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Please complete this Ethnic origin form with your new registration documents:

- [x] White Scottish
- [ ] Other white British ethnic group
- [x] White Irish
- [ ] Other white ethnic group
- [ ] Other ethnic, mixed origin
- [ ] Indian
- [ ] Pakistani
- [ ] Bangladeshi
- [ ] Chinese
- [ ] Other Asian ethnic group
- [ ] Black Caribbean
- [ ] Black African
- [ ] Other black ethnic group
- [ ] Other ethnic group
- [ ] Ethnic group not recorded
- [ ] Ethnic group - patient refused

Thank you

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NHS Confidential: Personal data about a patient

Dr D Chung Dr G [redacted] Dr N Weatherup Dr J Mardon Mr J [redacted] Dr C McGuffie Dr A Lannigan

Accident and Emergency
Crosshouse Hospital
Kilmarnock KA2 0BE
Phone: 01563 577757/8
Fax: 01563 572009

12 JUN 2012

Dr. [redacted] DS HALES
SALTCOATS GROUP PRACTICE
SALTCOATS HEALTH CENTRE
17/19 RAISE STREET
SALTCOATS
KA21 5LX

Georgina Smith
1B STANLEY ROAD
SALTCOATS, KA21 5BB

DOB: 04/12/1991
A/E No: XH-12-032777
CHI No: 0412913127

Date and Time of Attendance: 06 Jun 2012 14:14
Total A&E Attendances = 9 , attendances in last year = 1

Diagnosis Sprain , Neck , Left

Treatment Advice

Drugs:

Investigations

Follow up: Discharge, no follow up

Usual place of residence

Additional Information: Front restrained passenger in head on RTC 30-40mph last night, ongoing left sided neck pain. Muscular strain. Advise gentle exercise, and regular paracetamol/NSAID.

[redacted]
A&E SpR

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

Nov SGP.

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Dr D Chung Dr G [redacted] Dr N Weatherup Dr J Mardon Mr J [redacted] Dr C McGuffie Dr A Lannigan

Accident and Emergency
Crosshouse Hospital
Kilmarnock KA2 0BE
Phone: 01563 577757/8
Fax: 01563 572009

12 JUN 2012

Dr. [redacted] DS HALES
SALTCOATS GROUP PRACTICE
SALTCOATS HEALTH CENTRE
17/19 RAISE STREET
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KA21 5LX

Georgina Smith
1B STANLEY ROAD
SALTCOATS, KA21 5BB

DOB: 04/12/1991
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[redacted]
A&E SpR

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

Nov SGP.

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NHS Confidential: Personal data about a patient

DM_radB62B7

Adastra Call #: 63180
Full cover

Received NHS24: 25-Mar-2012 07:09

Patient's Name :Georgina [redacted]
Community Health Index:0412913127
Date of birth: 04-Dec-1991 (Age: 20 years)Sex: Female
Home Address: 17 Carfrae Drive Glenrothes
Fife KY6 1LX (NO:257 013)
Current Address: Flat 1, 1 [redacted] Road
Saltcoats KA21 5BB (NS:242 419)
Tel No: 07732 603729
Urgency: Within 4 Hours
Consulted by:
Origin: Other
Type: NHS24 Advice
Own Doctor: Asamoah,S

Received PCES: 07:27
Passed : __:__
Advised : __:__
Arrived : __:__
Departed : __:__

Message received:
PAIN BELOW RIBS AND TO BACK 2 DAYS

NHS24 Ref. no.: 11419034

NHS24 Triage Begin 25-Mar-2012 07:17 NHS24 Triage End 25-Mar-2012 07:27

NHS24 Triaged by : Triage Nurse (Nurse Advisor) (Glasgow)

NHS24 Clinical Summary:
Clinical summary created: 25-Mar-2012
dvisor) (Glasgow) [25/03/2012 07:26:27]
INTERMITTANT CHEST WALL PAIN FOR 3/52 AND 3/53 POST PARTUM. SYMPTOMS NOW
TOTALLY RESOLVED. REFUSED TRIAGE.

NHS24 Outcome: For information only

Advised : 07:17 Advised by : Triage Nurse (Nurse Advisor)

Time of Visit/Base 07:17 Clinician Name:

Clinical notes:

Triage - HISTORY

Triage - Examination

Triage - Diagnosis

Triage - Treatment

Outcome - HISTORY

Outcome - Examination

Outcome - Diagnosis

Outcome - Treatment

Prescription

Followups:

#63180 - DOB:04-Dec-1991 (Age: 20 years) - Georgina Stevens

Page 1

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NHS Confidential: Personal data about a patient

DR K [redacted] DR J PENNYCOOK DR V GOVINDAPPA
HEALTH CENTRE MAIN STREET
STEVENSTON
TEL: 01294 464413

Welcome to this Medical Practice. We will be pleased to register you on the list of one of our Doctors. Please help us by completing Part A of this form and bring it with you, together with your medical card, for your new patient consultation with the Practice Nurse. The information given will be used only to facilitate your care, as there is usually some delay before your records reach us.

PART A.

TODAY'S DATE 12/07/12 OCCUPATION UNEMPLOYED

NAME GEORGINA SMITH DATE OF BIRTH 4/12/91.

ADDRESS 22D MOORPARK RD MR/MRS/MISS

WEST, STEVENSTON TELEPHONE 07774733501

MEDICAL HISTORY:
Current State of Health ? PREGNANT 6 WEEKS. ABDOMINAL PAIN AT PRESENT / BACK PAIN.
? CONSTIPATION. ONGOING SINCE FEB 12

Previous Illnesses KIDNEY STONES. ? BLOOD TYPE -VE.
ASTHMA STOMACH PAINS IN PAST

Operations —

Allergies NONE KNOWN

Relevant family history MOTHER - CA UTERINE/CERVICAL ANGINA - FATHER
GRANDMOTHER - HYPERTENSION

Previous immunisations AT SCHOOL ANTI-D ? BLOOD INCOMPATIBILITY DURING PREGNANCY.

Current Medication TAKING LAXATIVES
VENTOLIN INHALER AS REQD

—

Alcohol Consumption ..... units per week Exercise WALKING, HOUSEWORK FOOTBALL

Smoking 20 per day Eating Habits VARIED, FAIRLY GOOD

PART B.

HEIGHT 168 WEIGHT 63kg BP 90/60 mmHg URINALYSIS —

Females (16-60) Date of last smear DUE AT PRESENT

Date of last breast check .....

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NHS Confidential: [redacted] about a patient

GPR

NHS IN SCOTLAND

19/14

NHS SCOTLAND

APPLICATION TO REGISTER PERMANENTLY WITH A GENERAL MEDICAL PRACTICE

Please 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 * Stevens

TITLE # Miss

MALE * ☐ FEMALE * ☑

FORENAME * GEORGINA

MIDDLE NAME *

PREVIOUS SURNAME * SMITH

DATE OF BIRTH * 04/12/1996

ADDRESS * 17 CARFRAE DRIVE

POSTCODE * KY6 1LX

TOWN & COUNTRY OF BIRTH * ARDROSSAN

[redacted] MAIDEN NAME * SMITH

TELEPHONE NUMBER # 07774733501

EMAIL ADDRESS #

PREVIOUS ADDRESS IN UK * 16 LINKS STREET KIRKCALDY

POSTCODE

NAME AND ADDRESS OF PREVIOUS REGISTERED GP PRACTICE IN UK * St Brycedale

POSTCODE *

COMMUNITY HEALTH INDEX NUMBER

NHS NUMBER

NATIONAL INSURANCE NUMBER JM716260A

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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NHS Confidential: Personal data about a patient

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

L. Stevens

DATE 05 M M Y Y

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 only

PRACTICE CODE F 2 0 6 0 6

GP NAME DR RSN MOHH

GP REFERENCE NUMBER 9 1 9 1 0

IDENTIFICATION SEEN

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 _____ DATE 0 9 1 1 1 1

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NHS Confidential: Personal data about a patient

[redacted]

DM_radB62B7

Adastra Call #: 63180
Full cover

Received NHS24: 25-Mar-2012 07:09

Patient's Name :Georgina [redacted]
Community Health Index:0412913127
Date of birth: 04-Dec-1991 (Age: 20 years)Sex: Female
Home Address: 17 Carfrae Drive Glenrothes
Fife KY6 1LX (NO:257 013)
Current Address: Flat 1, 1 [redacted] Road
Saltcoats KA21 5BB (NS:242 419)
Tel No: 07732 603729
Urgency: Within 4 Hours
Consulted by:
Origin: Other
Type: NHS24 Advice
Own Doctor: Asamoah,S

Received PCES: 07:27
Passed : __:__
Advised : __:__
Arrived : __:__
Departed : __:__

Message received:
PAIN BELOW RIBS AND TO BACK 2 DAYS

NHS24 Ref. no.: 11419034

NHS24 Triage Begin 25-Mar-2012 07:17 NHS24 Triage End 25-Mar-2012 07:27

NHS24 Triaged by : Triage Nurse (Nurse Advisor) (Glasgow)

NHS24 Clinical Summary:
Clinical summary created: 25-Mar-2012
dvisor) (Glasgow) [25/03/2012 07:26:27]
INTERMITTANT CHEST WALL PAIN FOR 3/52 AND 3/53 POST PARTUM. SYMPTOMS NOW
TOTALLY RESOLVED. REFUSED TRIAGE.

NHS24 Outcome: For information only

Advised : 07:17 Advised by : Triage Nurse (Nurse Advisor)

Time of Visit/Base 07:17 Clinician Name:

Clinical notes:

Triage - HISTORY

Triage - Examination

Triage - Diagnosis

Triage - Treatment

Outcome - HISTORY

Outcome - Examination

Outcome - Diagnosis

Outcome - Treatment

Prescription

Followups:

#63180 - DOB:04-Dec-1991 (Age: 20 years) - Georgina Stevens

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NHS IN SCOTLAND

NHS SCOTLAND

APPLICATION TO REGISTER PERMANENTLY WITH A GENERAL MEDICAL PRACTICE

Please 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 * SMITH

TITLE # MISS

MALE * [ ] FEMALE * [✓]

FORENAME * GEORGINA

MIDDLE NAME *

PREVIOUS SURNAME * MCMILLAN

DATE OF BIRTH * 04/12/1991

ADDRESS * 220 MOORPARK ROAD WEST
STEVENSTON

POSTCODE * KA20 3HU

TOWN & COUNTRY OF BIRTH * ARDROSSAN

MOTHER'S MAIDEN NAME * SMITH

TELEPHONE NUMBER # 07774735501

EMAIL ADDRESS #

PREVIOUS ADDRESS IN UK * 17 CARRAE DRIVE
GLENROTHES
FIFE

POSTCODE

NAME AND ADDRESS OF PREVIOUS REGISTERED GP PRACTICE IN UK *

POSTCODE *

COMMUNITY HEALTH INDEX NUMBER

NHS NUMBER

NATIONAL INSURANCE NUMBER JM716260A

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NHS Confidential: [redacted]

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

DATE D D M M Y Y

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 only

PRACTICE CODE

GP NAME

GP REFERENCE NUMBER

IDENTIFICATION SEEN

MEDICAL CARD ☐ BIRTH CERTIFICATE ☐ PASSPORT ☐ OTHER - SPECIFY

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GP SIGNATURE DATE D D M M Y Y

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NHS IN SCOTLAND

NHS SCOTLAND

APPLICATION TO REGISTER PERMANENTLY WITH A GENERAL MEDICAL PRACTICE

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SURNAME * SMITH

TITLE # MISS

MALE * [ ] FEMALE * [✓]

FORENAME * GEORGINA

MIDDLE NAME *

PREVIOUS SURNAME * MCMILLAN

DATE OF BIRTH * 04/12/1991

ADDRESS * 220 MOORPARK ROAD WEST
STEVENSTON

POSTCODE * KA20 3HU

TOWN & COUNTRY OF BIRTH * ARDROSSAN

MOTHER'S MAIDEN NAME * SMITH

TELEPHONE NUMBER # 07747385011

EMAIL ADDRESS #

PREVIOUS ADDRESS IN UK * 17 CARFRAE DRIVE
GLENROTHES
FIFE

POSTCODE

NAME AND ADDRESS OF PREVIOUS REGISTERED GP PRACTICE IN UK *

POSTCODE *

COMMUNITY HEALTH INDEX NUMBER

NHS NUMBER

NATIONAL INSURANCE NUMBER JM711626OA

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DATE OF DEPARTURE FROM UK D D M M Y Y

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PATIENT OR REPRESENTATIVE SIGNATURE

DATE D D M M Y Y

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YOUR NAME

YOUR RELATIONSHIP TO THE PATIENT

VOLUNTARY CONSENT TO ORGAN DONATION

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B. kidneys ☐ heart ☐ liver ☐ small bowel ☐

eyes ☐ lungs ☐ pancreas ☐ tissue ☐

for transplantation after my death

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PRACTICE CODE

GP NAME

GP REFERENCE NUMBER

IDENTIFICATION SEEN

MEDICAL CARD ☐ BIRTH CERTIFICATE ☐ PASSPORT ☐ OTHER - SPECIFY

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NHS Confidential: Personal data about a patient

DR K [redacted] DR J PENNYCOOK DR V GOVINDAPPA
HEALTH CENTRE MAIN STREET
STEVENSTON
TEL: 01294 464413

Welcome to this Medical Practice. We will be pleased to register you on the list of one of our Doctors. Please help us by completing Part A of this form and bring it with you, together with your medical card, for your new patient consultation with the Practice Nurse. The information given will be used only to facilitate your care, as there is usually some delay before your records reach us.

PART A.

TODAY'S DATE 12/07/12 OCCUPATION UNEMPLOYED

NAME GEORGINA SMITH DATE OF BIRTH 4/12/91.

ADDRESS 22D MOORPARK RD MR/MRS/MISS

WEST, STEVENSTON TELEPHONE 07774733501

MEDICAL HISTORY:
Current State of Health ? PREGNANT 6 WEEKS. ABDOMINAL PAIN AT PRESENT / BACK PAIN.
? CONSTIPATION. ONGOING SINCE FEB 12

Previous Illnesses KIDNEY STONES. ? BLOOD TYPE -VE.
ASTHMA STOMACH PAINS IN PAST

Operations —

Allergies NONE KNOWN

Relevant family history MOTHER - CA UTERINE/CERVICAL ANGINA - FATHER
GRANDMOTHER - HYPERTENSION

Previous immunisations AT SCHOOL ANTI-D ? BLOOD INCOMPATIBILITY DURING PREGNANCY

Current Medication TAKING LAXATIVES
VENTOLIN INHALER AS REQD

—

Alcohol Consumption ..... units per week Exercise WALKING, HOUSEWORK FOOTBALL

Smoking 20 per day Eating Habits VARIED, FAIRLY GOOD

PART B.

HEIGHT 168 WEIGHT 63kg BP 90/60 mmHg URINALYSIS —

Females (16-60) Date of last smear DUE AT PRESENT

Date of last breast check .....

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Ayrshire Doctors On Call

adastra

3 Patient [redacted] or Stevenston H/C (Practice 45)

Page 1 of 5

Patient : Georgina Smith
(Gender: Female) (DOB: 04/12/1991) (Age: 20 years) (CHI: 0412913127)

Case No 94013 **Case Date** 04/08/2012 07:49
Own Dr Pennycook, [redacted]
Emergency Care Summary viewed on case

Current Address
22D Moorpark Road West

Stevenston
KA20 3HU
Current Phone 07774 733501

Home Address (If Different)
Home Phone (If Different) 01294 468360

Case Type Home Visit
Priority On Reception Within 1 Hour

NHS 24 Advice by (Nurse Advisor) (Glasgow) **Triage Start** 07:51 **Triage End** 08:07
Clinical summary created by: (Nurse Advisor) (Glasgow) (04/08/2012 08:07:25)
ABDOMINAL PAIN FOR ONGOING WORSE TODAY AND UPPER ABDOMINAL PAIN NAUSEA CHEST TIGHTNESS AND SHORTNESS OF BREATH WHEN PAIN BAD/ STOMACH SWOLLEN/ NO URINARY PROBLEMS AND BOWELS OPEN/ FEELS FEVERISH/ EATING AND DRINKING OKAY/ LMP 2 YEARS AGO PREGNANCY TEST COUPLE WEEKS AGO NEGATIVE/ TAKING IBUPROFEN AND OMEPRAZOLE NOT HELPING/ STATES TOLD BY GP NOT TO TAKE PARACETAMOL/ ASKED TO BRING SPECIMEN OF URINE/ HUB TO CALL PCEC 1 HOUR

Case Questions

Pocked Aremote Consult by: **Consult Start**
Start Type **End Type** **Consult End**

Adastra Consult by McHattie, A G **Consult Start** 08:14
Start Type Doctor Advice **End Type** Home Visit **Consult End** 08:17

History
No transport - cannot come to centre.

Examination

Diagnosis

Treatment

Clinical Code(s)
R090. [D]Abdominal pain

Prescriptions

Adastra Consult by Balfour, [redacted] **Consult Start** 09:03
Start Type Home Visit **End Type** Home Visit **Consult End** 09:21

Report Statistics: Report produced by Adastra Version 3 - 05/08/2012 04:01:41

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Patient : Georgina Smith

(Gender: Female) (DOB: 04/12/1991) (Age: 20 years) (CHI: 0412913127)

History

since february pain in tummy , epigastric mostly,, worse this am, did travel to back bowels working well on bd lactulose, family hx of gastric ulcers at early age , denesi haematemesis, pr bleeding , malena, dysphagia, nausea, no vomiting, taking ibuprofen , suggetsed stop ,

Examination

temp 37.2oc, hr 68 bp 120/70 sats 98% ra , hs pure rr 12 chet clear , abdo epigastic and ruq pain , no rebound or guarding olkks

Diagnosis

likely gastritis

Treatment

swap omeprazole lansoprazole 30mg bd for a week then reduce to 30mg mane ,
domepridone 10mg tds 100 tabs
red flag advice call back if worsening

Clinical Code(s)

R090. [D]Abdominal pain

Prescriptions

Informational Outcome(s)

Patient Told To Contact GP -

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Ayrshire Doctors On Call

adastra

3 Patient [redacted] or Stevenston H/C (Practice 45)

Patient : Georgina Smith

(Gender: Female) (DOB: 04/12/1991) (Age: 20 years) (CHI: 0412913127)

Case No 94013 **Case Date** 04/08/2012 07:49

Own Dr Pennycook, [redacted]

Emergency Care Summary viewed on case

Current Address
22D Moorpark Road West

Stevenston
KA20 3HU

Home Address (If Different)

Current Phone 07774 733501 **Home Phone (If Different)** 01294 468360

Case Type Home Visit
Priority On Reception Within 1 Hour

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Case Questions

Pocked Aremote Consult by: **Consult Start**
Start Type **End Type** **Consult End**

Adastra Consult by McHattie, A G **Consult Start** 08:14
Start Type Doctor Advice **End Type** Home Visit **Consult End** 08:17

History
No transport - cannot come to centre.

Examination

Diagnosis

Treatment

Clinical Code(s)
R090. [D]Abdominal pain

Prescriptions

Adastra Consult by Balfour, [redacted] **Consult Start** 09:03
Start Type Home Visit **End Type** Home Visit **Consult End** 09:21

Report Statistics: Report produced by Adastra Version 3 - 05/08/2012 04:01:41

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Patient : Georgina Smith

(Gender: Female) (DOB: 04/12/1991) (Age: 20 years) (CHI: 0412913127)

History

since february pain in tummy , epigastric mostly,, worse this am, did travel to back bowels working well on bd lactulose, family hx of gastric ulcers at early age , denesi haematemesis, pr bleeding , malena, dysphagia, nausea, no vomiting, taking ibuprofen , suggetsed stop ,

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swap omeprazole lansoprazole 30mg bd for a week then reduce to 30mg mane , cc
domepridone 10mg tds 100 tabs
red flag advice call back if worsening

Clinical Code(s)

R090. [D]Abdominal pain

Prescriptions

Informational Outcome(s)

Patient Told To Contact GP -

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For office use only	Please circle as appropriate	ARR XH	ACH GIR	AYR EA	BIG HF	**RADIOLOGY REQUEST**
Ref. con	Ward/ Dept		Surname	SMITH, Georgina		
Referring G.P. (Name, Address, Tel.) Dr. K. Ghosh Stroke Unit	Previous x-ray/U/S: Yes / No / Year		D of B	0412913127		
			Address	22d Moorpark Road West STEVENSTON KA20 3HU Dr K Ghosh Main St, Stevenston		
			Occupation		Tel. No.	

IRMER – REQUESTS WILL BE RETURNED TO REFERRER IF CLINICAL INFORMATION IS INSUFFICIENT TO ALLOW JUSTIFICATION

Relevant History and Findings

RUQ pain, ? abdominal pain, ? gallstone.

For Contrast Exams

Any History of: Yes / No

- Diabetes: ☐ ☐
- On Metformin: ☐ ☐
- Asthma: ☐ ☐
- Allergy (specify): ☐ ☐
- Previous Contrast Reaction: ☐ ☐

Radiologist Use

Requirements	Page No.	Ambulance Required Yes / No	Pregnancy
USS ? Abdominal pain,			Not Pregnant ☐
Name Dr. K. Ghosh	Grade	Walking / Chair	
Signature	Date 6/6/26	Trolley / Portable	Pregnant ☐

JM0R90628 STA 0208

GOM

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Dr D Chung Dr J [redacted] Dr M Draegebo Dr J Mulligan Dr J Mardon Mr J [redacted] Dr C McGuffie Dr A Lannigan

Accident and Emergency

Dr. [redacted] JA PENNYCOOK
STEVENSTON GROUP PRACTICE
STEVENSTON HEALTH CENTRE
MAIN STREET
STEVENSTON
KA20 3AB

Crosshouse Hospital
Kilmarnock KA2 0BE
Phone: 01563 577757/8
Fax: 01563 572009

Georgina Memillan Smith
22D MOORPARK ROAD WEST
STEVENSTON, KA20 3HU

DOB: 04/12/1991
A/E No: XH-12-044987
CHI No: 0412913127

Date and Time of Attendance: 06 Aug 2012 05:54
Total A&E Attendances = 11 , attendances in last year = 3

Diagnosis Abdominal pain

Treatment Analgesia

Drugs:

Investigations

Follow up: Discharge, Primary Care follow up

Usual place of residence

Additional Information: 5/12 abdo pain. Tender RUQ. Some streaks of blood apparently in vomit. Looks well, obs stable. U+E/LFT/CRP/Amylase all normal, slightly low Hb (11.5), negative bHCG and urinalysis. No acute issue. Discharged. For GP FU re chronic abdo pains.

Andrea Bloomfield

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

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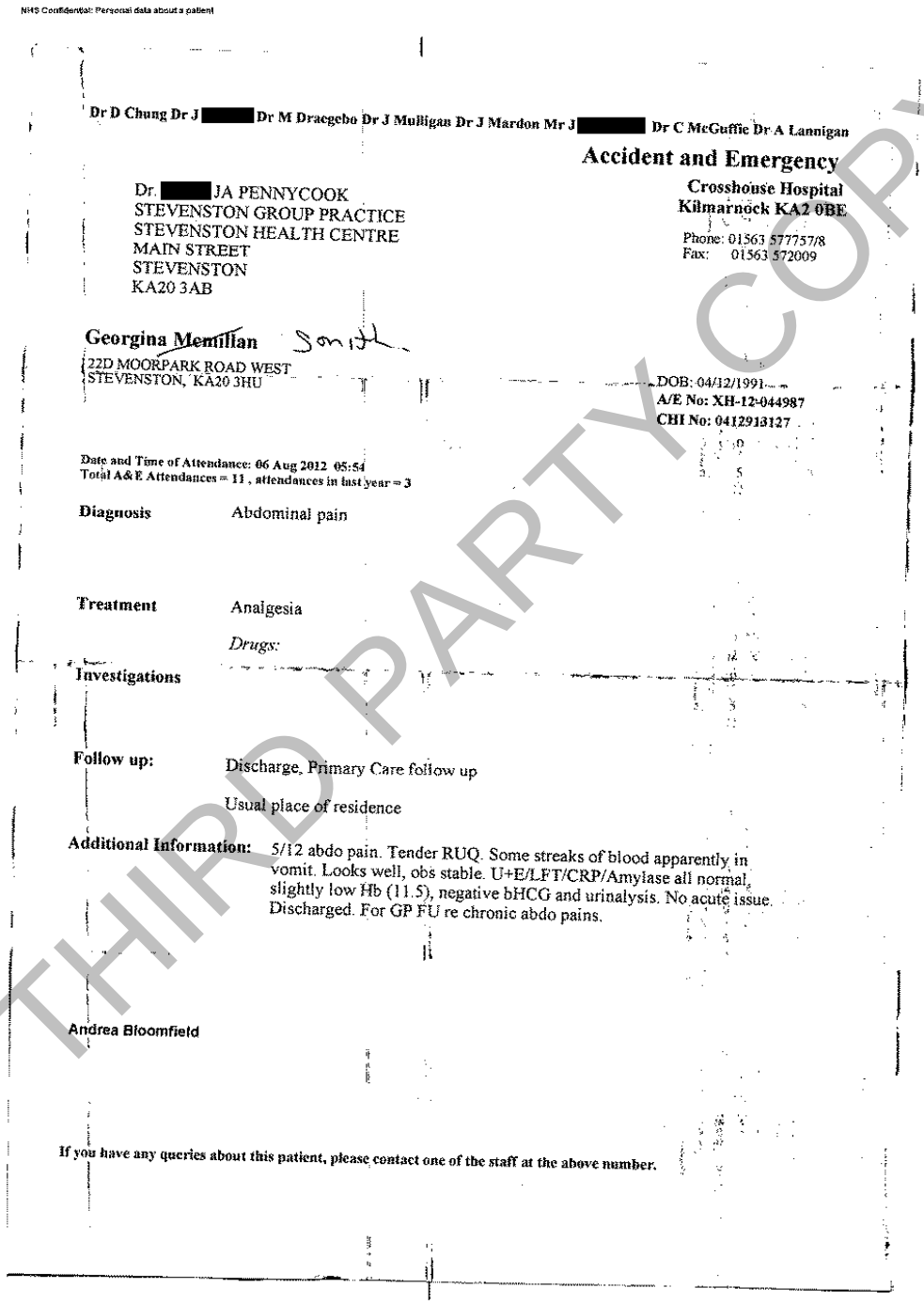

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Dr D Chung Dr J [redacted] Dr M Draegebo Dr J Mulligan Dr J Mardon Mr J [redacted] Dr C McGuffie Dr A Lannigan

Accident and Emergency

Crosshouse Hospital
Kilmarnock KA2 0BE
Phone: 01563 577757/8
Fax: 01563 572009

Dr. [redacted] JA PENNYCOOK
STEVENSTON GROUP PRACTICE
STEVENSTON HEALTH CENTRE
MAIN STREET
STEVENSTON
KA20 3AB

Georgina Memillan Smith
22D MOORPARK ROAD WEST
STEVENSTON, KA20 3HU

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CHI No: 0412913127

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Drugs:

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Andrea Bloomfield

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For office use only	Please circle as appropriate	ARR XH	ACH GIR	AYR EA	BIG HF	**RADIOLOGY REQUEST**	
Ref. con	Ward/ Dept		Surname	SMITH, Georgina			
Referring G.P. (Name, Address, Tel.) Dr. K. Ghosh Stroke House	Previous x-ray/U/S		D of B	0412913127			
	Yes	No	Year	Address	22d Moorpark Road West STEVENSTON KA20 3HU Dr K Ghosh Main St, Stevenston		
				Occupation		Tel. No.	

IRMER – REQUESTS WILL BE RETURNED TO REFERRER IF CLINICAL INFORMATION IS INSUFFICIENT TO ALLOW JUSTIFICATION

Relevant History and Findings: RUQ pain, ? abdominal pain, ? gallstone.

For Contrast Exams

Any History of: Yes / No
- Diabetes: ☐ ☐
- On Metformin: ☐ ☐
- Asthma: ☐ ☐
- Allergy (specify): ☐ ☐
- Previous Contrast Reaction: ☐ ☐

Radiologist Use

Requirements: USS ? Abdo + pelvis	Page No.	Ambulance Required Yes / No		Pregnancy	
Name: Dr K. Ghosh	Grade	Walking	Chair	Not Pregnant ☐	
Signature: [signature]	Date: 6/6/26	Trolley	Portable	Pregnant ☐	

JMoR/60628 STA 0208

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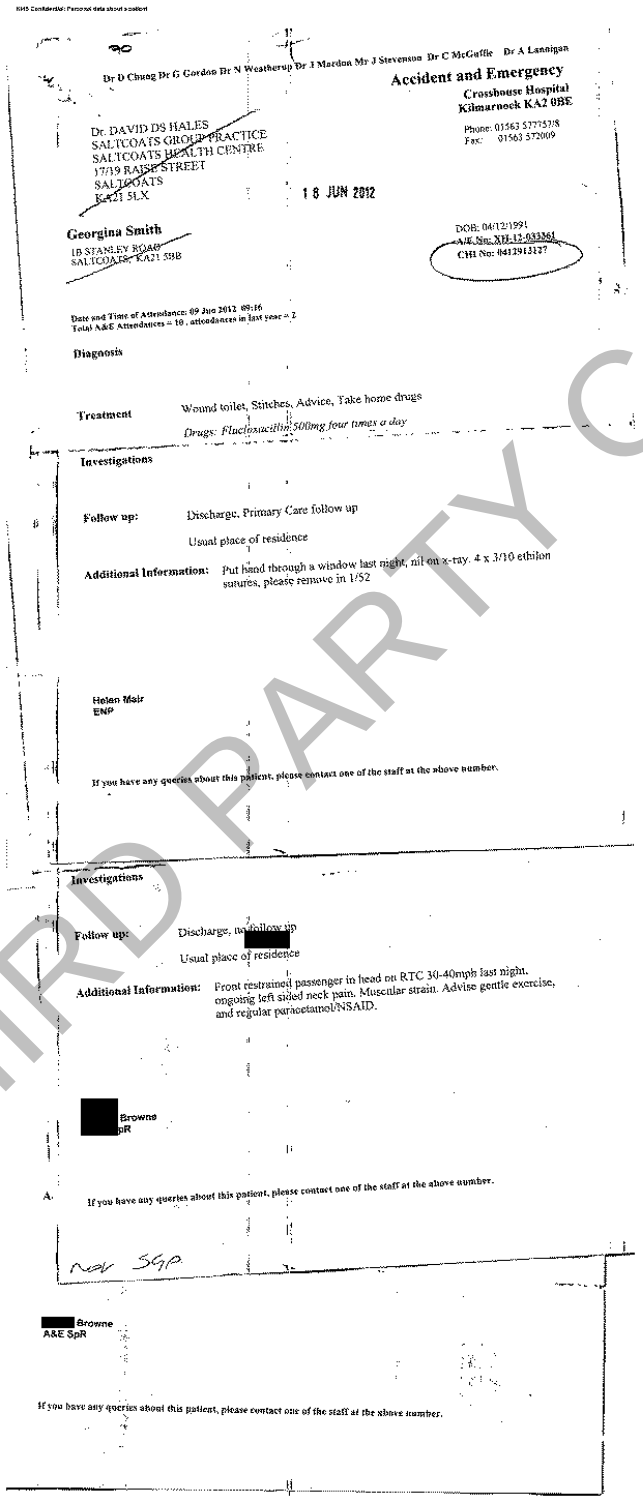

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Dr D Chung Dr G Gordon Dr N Weatherup Dr J Mardon Mr J Stevenson Dr C McGuffie Dr A Lannigan

Accident and Emergency
Crosshouse Hospital
Kilmarnock KA2 0BE
Phone: 01563 577573/8
Fax: 01563 572009

Dr. DAVID DS HALES
SALTCOATS GROUP PRACTICE
SALTCOATS HEALTH CENTRE
17/19 RAISE STREET
SALTCOATS
KA21 5LX

18 JUN 2012

Georgina Smith
18 STANLEY ROAD
SALTCOATS, KA21 5BB

DOB: 04/12/1991
A/E No: XH-13-033361
CH No: 0413913127

Date and Time of Attendance: 09 Jun 2012 09:16
Total A&E Attendances = 10 , attendances in last year = 2

Diagnosis

Treatment Wound toilet, Stitches, Advice, Take home drugs
Drugs: Flucloxacillin 500mg four times a day

Investigations

Follow up: Discharge, Primary Care follow up
Usual place of residence

Additional Information: Put hand through a window last night, nil on x-ray. 4 x 3/10 ethilon sutures, please remove in 1/52

Helen Mair
ENP

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

Investigations

Follow up: Discharge, to follow up
Usual place of residence

Additional Information: Front restrained passenger in head on RTC 30-40mph last night, ongoing left sided neck pain. Muscular strain. Advise gentle exercise, and regular paracetamol/NSAID.

Browne
SpR

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

Browne
A&E SpR

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

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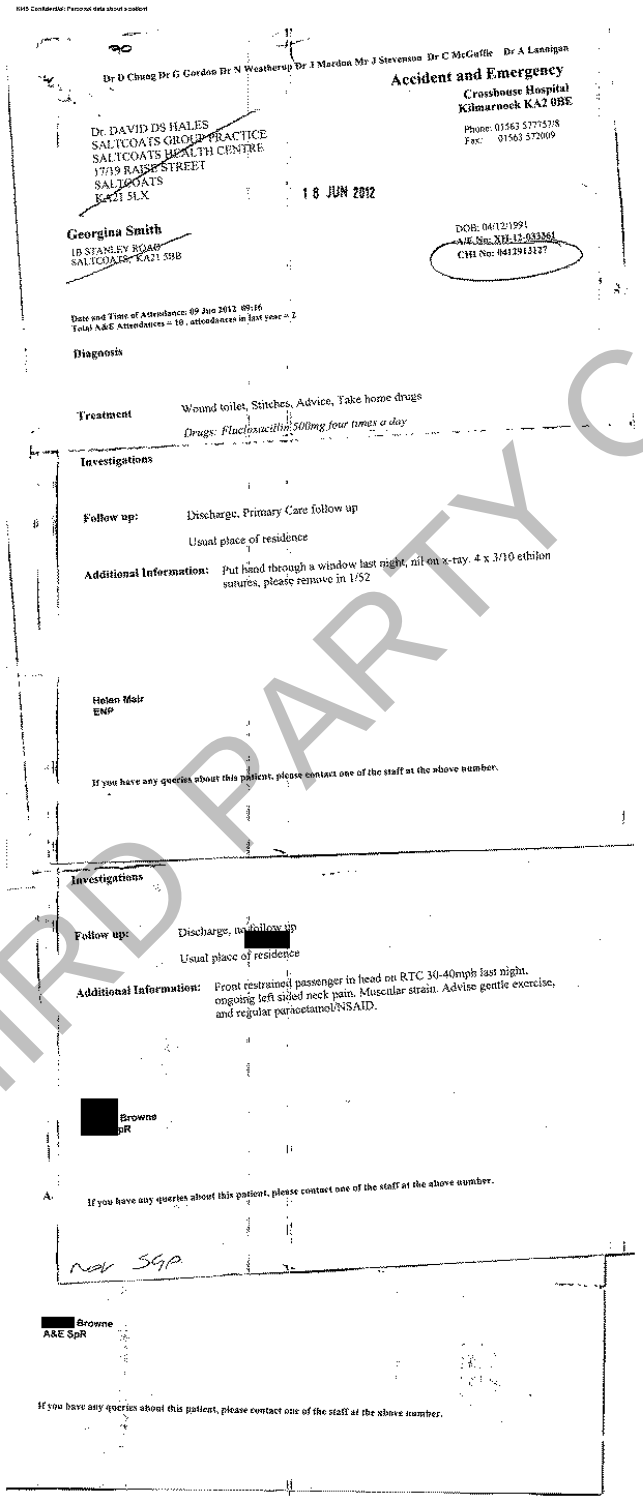

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Dr D Chung Dr G Gordon Dr N Weatherup Dr J Mardon Mr J Stevenson Dr C McGuffie Dr A Lannigan

Accident and Emergency
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SALTCOATS HEALTH CENTRE
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SALTCOATS
KA21 5LX

18 JUN 2012

Georgina Smith
18 STANLEY ROAD
SALTCOATS, KA21 5BB

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CH No: 0412912127

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Investigations

Follow up: Discharge, Primary Care follow up
Usual place of residence

Additional Information: Put hand through a window last night, nil on x-ray. 4 x 3/10 ethilon sutures, please remove in 1/52

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Follow up: Discharge, to follow up
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Browne
A&E SpR

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

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NHS Confidential: [redacted] data about a patient

Registration Details - Patient No: 19114

Personal details...		Address details...	
Date of birth	04/12/1981	Post Code	KY6 1LX
Sex	F	House Name Flat No	
Surname	[redacted]	No and Street	17 Carfrae Drive
Previous Surname		Village	
Forenames	Georgina	Town	Glenrothes
Calling Name	Georgina	County	FIFE
Title	Miss		
Birth Surname			
Marital Status			
Ethnic Origin	(Other) Any Other		

HA/HB Details...		Contact details...	
Trading [redacted]	Fife	Home Tel No	
Registered GP	Dr S Asamoah	Work Tel No	
Usual GP	Dr S Asamoah	Mobile Tel No	07774733501
Residential Inst		E Mail Address	
Branch Surgery		[redacted]	
CHI Number	0412813127		
NHS Number			

Practice Information...		Further Information	
Dispensing	N	Long/Short stay or Dead	
Hospital Number		Date of registration	23/11/2011
Records At			

Upload Consent		AMS\CMS Details	
SCI-DC Consent	Implied Consent (default)	AMS Consent	Yes
CMS Status	Not Registered		
Pharmacy Details			
Compliance Check	Yes		

Medical Record

Problems

Active Problems		Authorised By	Code
15/01/2009	Eczema NOS Scalp	Mrs Galloway	M12z1

Past Problems		Authorised By	Code
24/10/1994	Soft systolic murmur	Mrs Galloway	24D-8
05/09/1998	Stomatitis - herpetic	Mrs Galloway	A642-2
29/05/2003	Nocturnal enuresis	Mrs Galloway	1A220
03/11/2008	Abdominal distension symptom	Mrs Galloway	19A
01/12/2008	Gallstones	Mrs Galloway	J64-5
15/01/2009	Gallstones	Mrs Galloway	J64-5
02/02/2009	Feeling stressed	Mrs Galloway	1B1T

Health Admin Problems		Authorised By	Code
18/02/2005	Acne keloid	Mrs Galloway	M25y6

Values			
Date	Last Entry	Normal Range Indicator	Normal Range

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01/02/2012	**Blood pressure reading 100/60 mm Hg**
01/02/2012	**O/E - BP reading 37wks=37cm, no urine spec, slight oedema in ankles, urine neg fbc taken appt 2wks not sleeping well lighted headedat times**
19/01/2012	**O/E - temperature normal**

Attachments		Authorised By	Code
	None		

Due [redacted] Entries		Authorised By	Code
03/12/2056	**Influenza vaccination**	Dr Asamoah	65E..

Overdue Diary Entries		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
23/11/2011	**FH: Asthma**	Mrs Carstairs	12D2

Referrals		Authorised By	Code
28/02/2012	**Emergency hospital admission**	Ms Fury	8H2

Immunisations		Authorised By	Code
	None		

Health Status	
01/02/2012	**Blood pressure reading O/E - BP reading**
01/02/2012	**Blood pressure reading 100/60 mm Hg**
29/01/2012	**Smoking Status Light smoker - 1-9 cigs/day**

Other Observations		Authorised By	Code
23/11/2011	**Other - ethnic category 2001 census**	Mrs Carstairs	9iF
23/11/2011	**Teetotaller**	Mrs Carstairs	136J
23/11/2011	**Current smoker**	Mrs Carstairs	137R
23/11/2011	**Health ed. - smoking**	Mrs Carstairs	6791
21/12/2011	**Notes summary on computer**	Mrs Galloway	9344
29/01/2012	**Light smoker - 1-9 cigs/day**	Dr Asamoah	137J
29/01/2012	**Lifestyle advice regarding smoking** Advice given.	Dr Asamoah	67H1
01/02/2012	**Smoking cessation advice**	Mr Skinner	8CAL

Consultations

08/11/2011 — Dr AR McFarlane at LOMOND PRACTICE

Problem	deltoid pain rt side movements full no briusing or evidance of tear
Comment	fell on staircase
Medication	Ibuprofen Gel 10 % 30 gram APPLY UP TO THREE TIMES [redacted]

10/01/2012 — Mrs Heather [redacted] at LOMOND PRACTICE

History	Approx 35 weeks [redacted] and having heartburn. Poor diet high in fat etc. Also has swelling in back passage, bleeding and itchy at times.

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Comment	try below meantime if not settling call back.
Medication	Gaviscon Advance Oral suspension (peppermint) *500 ml 10ML TO BE TAKEN PRN*
	Anusol Plus Hc Ointment *15 gram APPLY TWICE A DAY*
History	General coryza symptoms past few weeks. runny nose, cough and sore throat.
Examination	O/E - temperature normal
	O/E - BP reading
	Blood pressure reading 123/66 mm Hg spo2 99%, P94, chest clear bilateral air entry nil crackle sor wheeze, ent exam nad.
Comment	Advised re paracetamol and fluids meantime.
18/01/2012	Mrs [redacted] Wave at LOMOND PRACTICE
Problem	infected boil L thigh present for last couple of weeks
Examination	T 36.1 o/e boil L thigh, surrounding skin red,inflamed,no tracking, no fever
Result	d/w Dr Asamoah, adv early rev if worsening/becomes unwell with fever/no improvement
Medication	Flucloxacillin Capsules 250 mg *28 CAPSULE ONE TO BE TAKEN FOUR TIMES A DAY*
18/01/2012	Midwife Community Midwife at LOMOND PRACTICE
Examination	O/E - BP reading 35wks=34cm, no urine fth,fmf, 148 no notes with her seeing family health midwives next week appt 2wks
	Blood pressure reading 100/70 mm Hg
20/01/2012	Dr S Asamoah at LOMOND PRACTICE
History	Hx of asthma - [redacted] smoking - feels needs inhalers again.
Social	Light smoker - 1-9 cigs/day
Comment	Lifestyle advice regarding smoking Advice given.
Medication	Salbutamol Cfc-free inhaler 100 micrograms/puff *1 INHALER ONE OR TWO PUFFS TO BE INHALED UP TO FOUR TIMES A DAY*
01/02/2012	Mr Bob Skinner at LOMOND PRACTICE
Comment	Smoking cessation advice
01/02/2012	Midwife Community Midwife at LOMOND PRACTICE
Examination	O/E - BP reading 37wks=37cm, no urine spec, slight oedema in ankles, urine neg fbc taken appt 2wks not sleeping well lighted headedat times
	Blood pressure reading 100/60 mm Hg
15/02/2012	Midwife Community Midwife at LOMOND PRACTICE
Examination	39wks38cms fh148reg fm++ seen at vhk last week fell down stairs no bleeding fm++ [redacted] stay at fp as advised appt 2wks
29/03/2012	Mrs [redacted] Radcliffe at LOMOND PRACTICE
Comment	Attended review CPCC yesterday. [redacted] removed at birth by CPO and in [redacted] care at an undisclosed address in Ayrshire. [redacted] reported by SW to be [redacted] Saltcoats. No longer at this Glenrothes address. Advised to register with GP there.

Medication

Current

Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
None				

Past

Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
20/01/2012	**Salbutamol Cfc-free inhaler 100 micrograms/puff** ONE OR TWO PUFFS TO BE INHALED UP TO FOUR TIMES A DAY 1 INHALER	20/01/2012P	Dr S Asamoah	ACUTE
18/01/2012	**Flucloxacillin Capsules 250 mg** ONE TO BE TAKEN FOUR TIMES A DAY 28 CAPSULE	18/01/2012P	Dr S Asamoah	ACUTE

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NHS Confidential: [redacted] data about a patient

10/01/2012	**Gaviscon Advance Oral suspension (peppermint)** 10ML TO BE TAKEN PRN 500 ml	10/01/2012P	Mrs Heather [redacted]	ACUTE
10/01/2012	**Anusol Plus Hc Ointment** APPLY TWICE A DAY 15 gram	10/01/2012P	Mrs Heather [redacted]	ACUTE
08/11/2011	**Ibuprofen Gel 10 %** APPLY UP TO THREE TIMES DAILY 30 gram	08/11/2011P	Dr AR McFarlane	ACUTE

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NHS Confidential: [redacted] data about a patient

Registration Details - Patient No: 19114

Personal details...		Address details...	
Date of birth	04/12/1991	Post Code	KY6 1LX
Sex	F	House Name Flat No	
Surname	[redacted]	No and Street	17 Carfrae Drive
Previous Surname		Village	
Forenames	Georgina	Town	Glenrothes
Calling Name	Georgina	County	FIFE
Title	Miss		
Birth Surname			
Marital Status			
Ethnic Origin	(Other) Any Other		

HA/HB Details...		Contact details...	
Trading [redacted]	Fife	Home Tel No	
Registered GP	Dr S Asamoah	Work Tel No	
Usual GP	Dr S Asamoah	Mobile Tel No	07774733501
Residential Inst		E Mail Address	
Branch Surgery		[redacted]	
CHI Number	0412913127		
NHS Number			

Practice Information...		Further Information	
Dispensing	N	Long/Short stay or Dead	
Hospital Number		Date of registration	23/11/2011
Records At			

Upload Consent		AMS\CMS Details	
SCI-DC Consent	Implied Consent (default)	AMS Consent	Yes
CMS Status	Not Registered		
Pharmacy Details			
Compliance Check	Yes		

Medical Record

Problems

Active Problems		Authorised By	Code
15/01/2009	Eczema NOS Scalp	Mrs Galloway	M12z1

Past Problems		Authorised By	Code
24/10/1994	Soft systolic murmur	Mrs Galloway	24D-8
05/09/1998	Stomatitis - herpetic	Mrs Galloway	A642-2
29/05/2003	Nocturnal enuresis	Mrs Galloway	1A220
03/11/2008	Abdominal distension symptom	Mrs Galloway	19A
01/12/2008	Gallstones	Mrs Galloway	J64-5
15/01/2009	Gallstones	Mrs Galloway	J64-5
02/02/2009	Feeling stressed	Mrs Galloway	1B1T

Health Admin Problems		Authorised By	Code
18/02/2005	Acne keloid	Mrs Galloway	M25y6

Values			
Date	Last Entry	Normal Range Indicator	Normal Range

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NHS Confidential: [redacted] data about a patient

01/02/2012	**Blood pressure reading 100/60 mm Hg**
01/02/2012	**O/E - BP reading 37wks=37cm, no urine spec, slight oedema in ankles, urine neg fbc taken appt 2wks not sleeping well lighted headedat times**
19/01/2012	**O/E - temperature normal**

Attachments		Authorised By	Code
	None		

Due [redacted] Entries		Authorised By	Code
03/12/2056	**Influenza vaccination**	Dr Asamoah	65E..

Overdue Diary Entries		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
23/11/2011	**FH: Asthma**	Mrs Carstairs	12D2

Referrals		Authorised By	Code
28/02/2012	**Emergency hospital admission**	Ms Fury	8H2

Immunisations		Authorised By	Code
	None		

Health Status	
01/02/2012	**Blood pressure reading O/E - BP reading**
01/02/2012	**Blood pressure reading 100/60 mm Hg**
29/01/2012	**Smoking Status Light smoker - 1-9 cigs/day**

Other Observations		Authorised By	Code
23/11/2011	**Other - ethnic category 2001 census**	Mrs Carstairs	9F
23/11/2011	**Teetotaller**	Mrs Carstairs	136J
23/11/2011	**Current smoker**	Mrs Carstairs	137R
23/11/2011	**Health ed. - smoking**	Mrs Carstairs	6791
21/12/2011	**Notes summary on computer**	Mrs Galloway	9344
29/01/2012	**Light smoker - 1-9 cigs/day**	Dr Asamoah	137J
29/01/2012	**Lifestyle advice regarding smoking** Advice given.	Dr Asamoah	67H1
01/02/2012	**Smoking cessation advice**	Mr Skinner	8CAL

Consultations

08/11/2011 Dr AR McFarlane at LOMOND PRACTICE
Problem: deltoid pain rt side movements full no briusing or evidance of tear
Comment: fell on staircase
Medication: Ibuprofen Gel 10 % 30 gram APPLY UP TO THREE TIMES [redacted]

10/01/2012 Mrs Heather [redacted] at LOMOND PRACTICE
History: Approx 35 weeks [redacted] and having heartburn. Poor diet high in fat etc. Also has swelling in back passage, bleeding and itchy at times.

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Comment	try below meantime if not settling call back.
Medication	Gaviscon Advance Oral suspension (peppermint) *500 ml 10ML TO BE TAKEN PRN*
	Anusol Plus Hc Ointment *15 gram APPLY TWICE A DAY*
History	General coryza symptoms past few weeks. runny nose, cough and sore throat.
Examination	O/E - temperature normal
	O/E - BP reading
	Blood pressure reading 123/66 mm Hg spo2 99%, P94, chest clear bilateral air entry nil crackle sor wheeze, ent exam nad.
Comment	Advised re paracetamol and fluids meantime.

18/01/2012	Mrs [redacted] Wave at LOMOND PRACTICE
Problem	infected boil L thigh present for last couple of weeks
Examination	T 36.1 o/e boil L thigh, surrounding skin red,inflamed,no tracking, no fever
Result	d/w Dr Asamoah, adv early rev if worsening/becomes unwell with fever/no improvement
Medication	Flucloxacillin Capsules 250 mg *28 CAPSULE ONE TO BE TAKEN FOUR TIMES A DAY*

18/01/2012	Midwife Community Midwife at LOMOND PRACTICE
Examination	O/E - BP reading 35wks=34cm, no urine fth,fmf, 148 no notes with her seeing family health midwives next week appt 2wks
	Blood pressure reading 100/70 mm Hg

20/01/2012	Dr S Asamoah at LOMOND PRACTICE
History	Hx of asthma - [redacted] smoking - feels needs inhalers again.
Social	Light smoker - 1-9 cigs/day
Comment	Lifestyle advice regarding smoking Advice given.
Medication	Salbutamol Cfc-free inhaler 100 micrograms/puff *1 INHALER ONE OR TWO PUFFS TO BE INHALED UP TO FOUR TIMES A DAY*

01/02/2012	Mr Bob Skinner at LOMOND PRACTICE
Comment	Smoking cessation advice

01/02/2012	Midwife Community Midwife at LOMOND PRACTICE
Examination	O/E - BP reading 37wks=37cm, no urine spec, slight oedema in ankles, urine neg fbc taken appt 2wks not sleeping well lighted headedat times
	Blood pressure reading 100/60 mm Hg

15/02/2012	Midwife Community Midwife at LOMOND PRACTICE
Examination	39wks38cms fh148reg fm++ seen at vhk last week fell down stairs no bleeding fm++ [redacted] stay at fp as advised appt 2wks

29/03/2012	Mrs [redacted] Radcliffe at LOMOND PRACTICE
Comment	Attended review CPCC yesterday. [redacted] removed at birth by CPO and in [redacted] care at an undisclosed address in Ayrshire. [redacted] reported by SW to be [redacted] Saltcoats. No longer at this Glenrothes address. Advised to register with GP there.

Medication

Current

Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
None				

Past

Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
20/01/2012	**Salbutamol Cfc-free inhaler 100 micrograms/puff** ONE OR TWO PUFFS TO BE INHALED UP TO FOUR TIMES A DAY 1 INHALER	20/01/2012P	Dr S Asamoah	ACUTE
18/01/2012	**Flucloxacillin Capsules 250 mg** ONE TO BE TAKEN FOUR TIMES A DAY 28 CAPSULE	18/01/2012P	Dr S Asamoah	ACUTE

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NHS Confidential: [redacted] data about a patient

10/01/2012	**Gaviscon Advance Oral suspension (peppermint)** 10ML TO BE TAKEN PRN 500 ml	10/01/2012P	Mrs Heather [redacted]	ACUTE
10/01/2012	**Anusol Plus Hc Ointment** APPLY TWICE A DAY 15 gram	10/01/2012P	Mrs Heather [redacted]	ACUTE
08/11/2011	**Ibuprofen Gel 10 %** APPLY UP TO THREE TIMES DAILY 30 gram	08/11/2011P	Dr AR McFarlane	ACUTE

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SMITH

Patient : Georgina ~~Mcmillan~~
(Gender: Female) (DOB: 04/12/1991) (Age: 20 years) (CHI:)

Case No 11240 **Case Date** 03/09/2012 00:15
Own Dr Pennycook, [redacted]

Emergency Care Summary viewed on case

Current Address
22D Moorpark Road West

Stevenston
KA20 3HU
Current Phone 07774 733501

Home Address (If Different)

Home Phone (If Different)

Case Type Home Visit
Priority On Reception Within 4 Hours

NHS 24 Advice by (Nurse Advisor) (Glasgow)
Triage Start 00:20
Triage End 00:34

Clinical summary created by: (Nurse Advisor) (Glasgow) [03/09/2012 00:33:42]
NECK SWELLING FOR 3 HRS AND PAINFUL SWELLING R SIDE OF NECK. SORE THROAT. PAINFUL TO SWALLOW. DIFFICULTY TAKING INHALERS DUE TO PAIN. TEMP ELEVATED. EXCESSIVE SALIVA. 2ND CALL TO SERVICE. ADVISED GP HOME VISIT 4 HRS

Case Questions

Pocked Aremote Consult by:
Start Type **End Type**
Consult Start
Consult End

Adastra Consult by Hay, [redacted] (Supplementary)
Start Type Home Visit **End Type** Home Visit
Consult Start 01:43
Consult End 01:55

History
SORE THROAT
RECURRENT TONSILLITIS

Examination
CERVICAL LYMPHADENOPATHY
INFLAMED TONSILS WITH EXUDATE

Diagnosis
TONSILLITIS

Treatment
PENICILLIN
DICLOFENAC

Clinical Code(s)
H03.. Acute Tonsillitis

Prescriptions

Informational Outcome(s)
No Follow-Up Required -

Report Statistics: Report produced by Adastra Version 3 - 03/09/2012 04:02:15

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NHS Confidential: Personal data about a patient

SMITH

Patient : Georgina ~~Mcmillan~~
(Gender: Female) (DOB: 04/12/1991) (Age: 20 years) (CHI:)

Case No 11240 **Case Date** 03/09/2012 00:15
Own Dr Pennycook, [redacted]

Emergency Care Summary viewed on case

Current Address
22D Moorpark Road West

Stevenston
KA20 3HU
Current Phone 07774 733501

Home Address (If Different)

Home Phone (If Different)

Case Type Home Visit
Priority On Reception Within 4 Hours

NHS 24 Advice by (Nurse Advisor) (Glasgow) **Triage Start** 00:20 **Triage End** 00:34

Clinical summary created by: (Nurse Advisor) (Glasgow) [03/09/2012 00:33:42]
NECK SWELLING FOR 3 HRS AND PAINFUL SWELLING R SIDE OF NECK. SORE THROAT. PAINFUL TO SWALLOW. DIFFICULTY TAKING INHALERS DUE TO PAIN. TEMP ELEVATED. EXCESSIVE SALIVA. 2ND CALL TO SERVICE. ADVISED GP HOME VISIT 4 HRS

Case Questions

Pocked Aremote Consult by:
Start Type **End Type** **Consult Start** **Consult End**

Adastra Consult by Hay, [redacted] (Supplementary) **Consult Start** 01:43
Start Type Home Visit **End Type** Home Visit **Consult End** 01:55

History
SORE THROAT
RECURRENT TONSILLITIS

Examination
CERVICAL LYMPHADENOPATHY
INFLAMED TONSILS WITH EXUDATE

Diagnosis
TONSILLITIS

Treatment
PENICILLIN
DICLOFENAC

Clinical Code(s)
H03.. Acute Tonsillitis

Prescriptions

Informational Outcome(s)
No Follow-Up Required -

Report Statistics: Report produced by Adastra Version 3 - 03/09/2012 04:02:15

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Department of Radiology

Crosshouse Hospital
Kilmarnock Road
Crosshouse
Kilmarnock
KA2 0BE

NHS Ayrshire & [redacted]

RADIOLOGY REPORT

CHI NUMBER: 0412913127 **Examination Number:** 31783979 **Examination Date:** 05/09/2012
Name: Smith, Georgina DOB: 04/12/1991
Address: 22D MOORPARK ROAD WEST, STEVENSTON, , KA20 3HU **- CC: -**
Referring Department / Location: [redacted] KIRON
STEVENSTON HEALTH CENTRE
MAIN STREET
STEVENSTON
AYRSHIRE
KA20 3BB
Referring Consultant: GP Requestor
Date Dictated: 05/09/2012 **Typed by:** None
Examination: US Abdomen and Pelvis

Clinical Indication

Right upper quadrant pain ? gallstones

Report:

The liver is normal in size with no focal or parenchymal abnormalities.
There is a 12 mm calculi lodged within the neck of the gallbladder. and the gallbladder wall surrounding this appears slightly thickened. There is also a collection of echogenic material seen within the gallbladder. This may represent internal debris.
No evidence of duct stones or duct dilatation. No intrahepatic dilatation.
Normal appearances of the kidneys, pancreatic head, spleen and aorta. The pancreatic tail was obscured by bowel gas.

Dictating Radiologist / Clinical Specialist [redacted] **(Sonographer)**

Verified by: [redacted] **(Sonographer)**

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Examination Number: 31783979 **Examination Date:** 05/09/2012
Name: Smith, Georgina DOB: 04/12/1991
Dose :-

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Pages:

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Department of Radiology

Crosshouse Hospital
Kilmarnock Road
Crosshouse
Kilmarnock
KA2 0BE

NHS Ayrshire & [redacted]

RADIOLOGY REPORT

CHI NUMBER: 0412913127 **Examination Number:** 31783979 **Examination Date:** 05/09/2012
Name: Smith, Georgina DOB: 04/12/1991
Address: 22D MOORPARK ROAD WEST, STEVENSTON, , KA20 3HU **- CC: -**
Referring Department / Location: [redacted] KIRON
STEVENSTON HEALTH CENTRE
MAIN STREET
STEVENSTON
AYRSHIRE
KA20 3BB
Referring Consultant: GP Requestor
Date Dictated: 05/09/2012 **Typed by:** None
Examination: US Abdomen and Pelvis

Clinical Indication

Right upper quadrant pain ? gallstones

Report:

The liver is normal in size with no focal or parenchymal abnormalities.
There is a 12 mm calculi lodged within the neck of the gallbladder. and the gallbladder wall surrounding this appears slightly thickened. There is also a collection of echogenic material seen within the gallbladder. This may represent internal debris.
No evidence of duct stones or duct dilatation. No intrahepatic dilatation.
Normal appearances of the kidneys, pancreatic head, spleen and aorta. The pancreatic tail was obscured by bowel gas.

Dictating Radiologist / Clinical Specialist [redacted] **(Sonographer)**

Verified by: [redacted] **(Sonographer)**

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Examination Number: 31783979 **Examination Date:** 05/09/2012
Name: Smith, Georgina DOB: 04/12/1991
Dose :-

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Ayrshire Doctors On Call

adastra

[redacted] 2 Patient Contacts for Stevenston H/C [redacted]

Patient : Georgina Smith

(Gender: Female) (DOB: 04/12/1991) (Age: 20 years) (CHI: 0412913127)

Case No 14756 **Case Date** 18/09/2012 00:39
Own Dr Pennycook, [redacted]

Emergency Care Summary viewed on case

Current Address
22D Moorpark Road West

Stevenston
KA20 3HU
Current Phone 07774 733501

Home Address (If Different)

Home Phone (If Different)

Case Type Home Visit
Priority On Reception Within 2 Hours

NHS 24 Advice by (Nurse Advisor) (Aberdeen) **Triage Start** 23:33
Triage End 23:48

Clinical summary created by: (Nurse Advisor) (Aberdeen) [17/09/2012 23:48:32]
STABBING PAIN RIGHT LOWER ABDO FOR 4 -5 MINS AND PAIN NOW GONE...1ST EPISODE...FEELS HOT...VOMITED X 10 - YELLOW VOMITUS - STATES ONGOING H/O VOMITTING...URINE DARK...ADMITS TO UNPROTECTED INTERCOURSE - PERIOD 1 WEEK LAST - H/O IRREGULER PERIODS - HCG - -VE THIS AM....S/B GP TODAY - ADVISED REQUIRES GALLBLADDER REMOVAL...UNABLE TO TAKEN ANALGESIA...WORSENING ADVICE GIVEN...OUTCOME - SPEAK TO DR- 2HRS

Case Questions

Pocked Aremote Consult by: **Consult Start**
Start Type **End Type** **Consult End**

Adastra Consult by Tufail, [redacted] N (Supplementary) **Consult Start** 00:37
Start Type Doctor Advice **End Type** Home Visit **Consult End** 00:39

History
spoke to pat ,told spoke to own gp told possible [redacted]bladder , now pain worsen come and goes, vomiting , denied urinary problem no sob chest pain, needs assesment, agreed 4 hr visit
if condition worsen before visit call us back
worsening st given

Examination

Diagnosis
advice call
abd pain

Treatment

Clinical Code(s)
R090. [D]Abdominal pain

Prescriptions

Report Statistics: Report produced by Adastra Version 3 - 18/09/2012 04:01:48

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Patient : Georgina Smith

(Gender: Female) (DOB: 04/12/1991) (Age: 20 years) (CHI: 0412913127)

Adastra Consult by Tufail, Muhammad N (Supplementary) **Consult Start** 02:14
Start Type Home Visit **End Type** Home Visit **Consult End** 02:19

History
abd pain vomiting non billious non projectile no fever , dip stick ,preg test negative ,lecocytes++++ , no sob chest pain palpitation no bowel problem, c/o urinary symptoms

Examination
comfortable not in any pain , bp 118/77 p 76/min reg t 36.3 sat 98 chest clear a/e good bilat s1s20 perl abd soft mild tender lower abd no guarding rigidity no rebound , bs audible
after discussion voltral 7mg left deltoid exp 7/14 and cyclizine 50mg rt deltoid after consent exp 2/14,
trimethoprim to cover possible ub
if no improvement call back tonight
discussed worrying signs in detail, own gp f/up morning advised

Diagnosis
abd pain

Treatment

Clinical Code(s)
R090. [D]Abdominal pain

Prescriptions

Informational Outcome(s)
Patient Told To Contact GP -

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Ayrshire Doctors On Call

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[redacted] 2 Patient Contacts for Stevenston H/C [redacted]

Patient : Georgina Smith

(Gender: Female) (DOB: 04/12/1991) (Age: 20 years) (CHI: 0412913127)

Case No 14756 **Case Date** 18/09/2012 00:39
Own Dr Pennycook, [redacted]

Emergency Care Summary viewed on case

Current Address
22D Moorpark Road West

Stevenston
KA20 3HU
Current Phone 07774 733501

Home Address (If Different)

Home Phone (If Different)

Case Type Home Visit
Priority On Reception Within 2 Hours

NHS 24 Advice by (Nurse Advisor) (Aberdeen) **Triage Start** 23:33 **Triage End** 23:48

Clinical summary created by: (Nurse Advisor) (Aberdeen) [17/09/2012 23:48:32]
STABBING PAIN RIGHT LOWER ABDO FOR 4 -5 MINS AND PAIN NOW GONE...1ST EPISODE...FEELS HOT...VOMITED X 10 - YELLOW VOMITUS - STATES ONGOING H/O VOMITTING...URINE DARK...ADMITS TO UNPROTECTED INTERCOURSE - PERIOD 1 WEEK LAST - H/O IRREGULER PERIODS - HCG - -VE THIS AM....S/B GP TODAY - ADVISED REQUIRES GALLBLADDER REMOVAL...UNABLE TO TAKEN ANALGESIA...WORSENING ADVICE GIVEN...OUTCOME - SPEAK TO DR- 2HRS

Case Questions

Pocked Aremote Consult by:
Start Type **End Type** **Consult Start** **Consult End**

Adastra Consult by Tufail, [redacted] N (Supplementary) **Consult Start** 00:37
Start Type Doctor Advice **End Type** Home Visit **Consult End** 00:39

History
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if condition worsen before visit call us back
worsening st given

Examination

Diagnosis
advice call
abd pain

Treatment

Clinical Code(s)
R090. [D]Abdominal pain

Prescriptions

Report Statistics: Report produced by Adastra Version 3 - 18/09/2012 04:01:48

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Patient : Georgina Smith

(Gender: Female) (DOB: 04/12/1991) (Age: 20 years) (CHI: 0412913127)

Adastra Consult by Tufail, Muhammad N (Supplementary) **Consult Start** 02:14
Start Type Home Visit **End Type** Home Visit **Consult End** 02:19

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Examination
comfortable not in any pain , bp 118/77 p 76/min reg t 36.3 sat 98 chest clear a/e good bilat s1s20 perl abd soft mild tender lower abd no guarding rigidity no rebound , bs audible
after discussion voltral 7mg left deltoid exp 7/14 and cyclizine 50mg rt deltoid after consent exp 2/14,
trimethoprim to cover possible ub
if no improvement call back tonight
discussed worrying signs in detail, own gp f/up morning advised

Diagnosis
abd pain

Treatment

Clinical Code(s)
R090. [D]Abdominal pain

Prescriptions

Informational Outcome(s)
Patient Told To Contact GP -

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Community Forensic Mental Health Services
Upper Rec [redacted]
Ailsa Hospital
Dalmellington Road
Ayr
KA6 6AB

NHS Ayrshire & Arran

PRIVATE AND CONFIDENTIAL
Dr Pennycook
Stevenston Health Centre,
Main Street,
Stevenston,
KA20 3BB

Date 8th October 2012
Your Ref
Our Ref DO/HL/

Enquiries to [redacted] Legget
Extension 13731
Direct line 01292 513731
Fax 01292 513239
E-mail [redacted] legget@aapct.scot.nhs.

Dear Dr Pennycook

RE: GEORGINA [redacted] C/O 16 [redacted] PLACE, SALTCOATS
D.O.B 04/12/1991 CHI: 0412913127

For your information please find enclosed a copy of my assessment for the above named person who was referred to the Community Forensic Mental Health Team's [redacted] aison service by Procurators Fiscal. This was following arrest on 5th October 2012. Assessment was carried out at Kilmarnock Sheriff [redacted]

Should you require any further information or clarification on any of the above points raised, please do not hesitate to contact me on the above telephone number.

Yours sincerely

[redacted] Darryl [redacted]
CT2 Psychiatry

www.nhsayrshireandarran.com

INVESTING IN VOLUNTEERS

ETA 5000

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Mental Health Unscheduled Care ICP Assessm

Confidential

Personal details

Name:	Georgina [redacted]
Date of birth:	04/12/1991
CHI number:	0412913127
Address:	C/o 16 [redacted] Place Saltcoats KA21 5TE

GP details

GP Name:	Dr Pennycook
Practice/surgery name:	Stevenston Health Centre
Practice/surgery address:	Main Street Stevenston KA20 3BB
Practice/surgery tel.:	01294 464413

Assessment details

Location of Assessment:	Kilmarnock Court
Date of Assessment:	05/10/2012

Assessment type	Initial	Repeat	Discharge	Follow-up

Care co-ordinator:	
Completed by:	Darryl [redacted]
Profession:	Senior House Officer

Name of person referring

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Service user name: Georgina [redacted] | CHI number: 0412913127

Presentation

0 = No problem, X = Not Known, Y = Not Applicable, Z = Not Assessed (tick if key problem)

Source of current referral

[redacted]

Reason for referral

Threatened self [redacted] following arrest for breech of domestic bail.

Assessment type

New

[redacted] perspective of current problems and interventions

[redacted]

Current medication

Nil

Risk

0 = No problem, X = Not Known, Y = Not Applicable, Z = Not Assessed (tick if key problem)

Risk to others — Level 1

1 = Low apparent risk — No current indication of risk, but person's history and/or warning signs indicate possible risk. Required precautions covered by standard care plan i.e. no special risk prevention measures or plan required.

Personal and social history

0 = No problem, X = Not Known, Y = Not Applicable, Z = Not Assessed (tick if key problem)

Was routine gender based violence enquiry carried out?

No

Why was gender based violence enquiry not possible?

Not relevant as already carried out

Psychological well-being

0 = No problem, X = Not Known, Y = Not Applicable, Z = Not Assessed (tick if key problem)

Alcohol or substance misuse — Level 1

1 = Mild problem — Over-indulgence beyond social norm not causing concern to self or others. Recreational use of minor illegal drugs.

Eating problems — Level 1

1 = Mild problem — Some raising or lowering of usual intake. Difficulty eating reasonable portions of food/excessive concern about caloric intake.

Depressed mood and ideation — Level 1

1 = Mild problem — Non-persistent low mood but maintains most aspects of daily activity. Low estimation of self.

Anxiety, phobias and panics — Level 1

1 = Mild problem — Transient bouts of worrying, feelings of tension or fear. At most occasional avoidance but no consistent behavioural consequences.

Sleep disturbance — Level 1

1 = Mild problem — Occasional difficulties with falling asleep, staying asleep, and/or sleeping too much. Minimal impact on social or occupational functioning.

Physical

0 = No problem, X = Not Known, Y = Not Applicable, Z = Not Assessed (tick if key problem)

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Service user name: Georgina [redacted] | CHI number: 0412913127

Physical (Continued...)

0 = No problem, X = Not Known, Y = Not Applicable, Z = Not Assessed (tick if key problem)

Physical health condition | **Level** 1

1 = Mild problem — Transient, self-limiting health problems, unlikely to have long-term effect or require significant adjustment of lifestyle.

Family, friends and [redacted]

0 = No problem, X = Not Known, Y = Not Applicable, Z = Not Assessed (tick if key problem)

Relationships with others close by | **Level** 2

2 = Moderate problem — Cool or avoiding relationship. Limited interaction but no overt hostility.

Involvement in recovery

0 = No problem, X = Not Known, Y = Not Applicable, Z = Not Assessed (tick if key problem)

Crisis arrangements

N/A

Summary

0 = No problem, X = Not Known, Y = Not Applicable, Z = Not Assessed (tick if key problem)

Summary of Assessment

Assessed in Kilmarnock [redacted] on Tuesday 2nd Oct 2012: Referral from PF as patient threatened self [redacted] following arrest for breech of domestic bail. Patient describes ongoing difficulties with [redacted] and this appears to have been reason for arrest. Patient states she did tell staff that she would "take pills" following arrest but states this was when emotionally charged and threat was not sincere. Denies any intent to self [redacted] and denies any [redacted] ideation. States she does have intermittant chronic thoughts of self [redacted] but has not engaged in any acts "for a long time".
States mood is variable and can be low. Sleep sometimes disturbed and appetite "isn't great", unsure of any weight loss. Energy/motivation/concentration unchanged recently. Describes several socail stressors. Had miscarraige recently and feels "stressed" with relationship with [redacted] new partner currently.
Describes seeing CAMHS in past and being diagnosed with depression. Was on an antidepressant, unsure of name. Denies using alcohol or illicit substances recently. Discussed potential sources of support but patient feels she does not require or want psychiatry input, "don't like talking about things, its no use".
On examination: Thin [redacted] woman, auburn hair and piercing below lip. Good self care, no evidence neglect or self harm. Appears relaxed, no agitation or aggression. Good rapport and eye contact. Speech normal. Mood "up and down", obj, euthymic and reactive. Chronic intermittant self [redacted] ideation when stressed but no active intent. No [redacted] ideation. No FTD. No delusional ideation. Describes seeing "dead people with blood in their eyes", aware these images are own thoughts and appear to be pseudohallucinations. Cognitively intact. Good insight into social stressors and effect on mood.
Impression: Multiple social stressors, potentially lowering mood but gross evidence of depression. No self [redacted] intent. No [redacted] ideation.

Immediate plan of care

No acute evidence of mental illness but has some periods of low mood and intermittant self [redacted] ideation. No recent self [redacted]. Patient does not feel she wants or requires psychiatry input. Therefore advised to see GP in future if feeling mood is a problem or self harm ideation worsens.

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NHS Confidential: Personal data about a patient

NHS Ayrshire & [redacted]

SMITH(STEVENS), [redacted]
22d Moorpark Road [redacted]
Stevenston
Ayrshire
KA20 3HU

CHI No 0412913127
Unit No
DOB 04/12/1991
Sex F

Area Laboratory — Haematology

Clinician: Dr K Ghosh
Request Location: GP, Stevenston: Dr Scollay et al

This report to : Dr K Ghosh , GP, Stevenston: Dr Scollay et al

		Result	Units	Normal Range
Haemoglobin		12.5	g/dL	12.2 - 16.5
White Cell Count		5.7	10*9/L	3.9 - 10.0
Platelets		264	10*9/L	150 - 400
RBC		4.75	10*12/L	3.88 - 4.99
Haematocrit		0.37	%	0.36 - 0.48
MCV	Low	78	fl	82 - 98
MCH	Low	26.3	pg	27.3 - 32.6
MCHC		33.6	g/dL	31.6 - 34.9
Neutrophils		2.3	10*9/L	1.8 - 7.4
Lymphocytes		2.6	10*9/L	1.1 - 5.0
Monocytes		0.4	10*9/L	0.2 - 0.9
Eosinophils		0.2	10*9/L	0.1 - 0.7
Basophils		0.1	10*9/L	0.0 - 0.1

IB5305

Lab No 12B440810
Printed : 12/10/12 07:18

Date Collected 11/10/12 09:15
Sample Type Blood

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Community Forensic Mental Health Services
Upper Rec [redacted]
Ailsa Hospital
Dalmellington Road
Ayr
KA6 6AB

NHS Ayrshire & Arran

PRIVATE AND CONFIDENTIAL
Dr Pennycook
Stevenston Health Centre,
Main Street,
Stevenston,
KA20 3BB

Date 8th October 2012
Your Ref
Our Ref DO/HL/

Enquiries to [redacted] Legget
Extension 13731
Direct line 01292 513731
Fax 01292 513239
E-mail [redacted]legget@aapct.scot.nhs.

Dear Dr Pennycook

RE: GEORGINA [redacted] C/O 16 [redacted] PLACE, SALTCOATS
D.O.B 04/12/1991 CHI: 0412913127

For your information please find enclosed a copy of my assessment for the above named person who was referred to the Community Forensic Mental Health Team's [redacted]aison service by Procurators Fiscal. This was following arrest on 5th October 2012. Assessment was carried out at Kilmarnock Sheriff [redacted]

Should you require any further information or clarification on any of the above points raised, please do not hesitate to contact me on the above telephone number.

Yours sincerely

[redacted] Darryl [redacted]
CT2 Psychiatry

www.nhsayrshireandarran.com

INVESTING IN VOLUNTEERS

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Mental Health Unscheduled Care ICP Assessm

Confidential

Personal details

Name:	Georgina [redacted]
Date of birth:	04/12/1991
CHI number:	0412913127
Address:	C/o 16 [redacted] Place Saltcoats KA21 5TE

GP details

GP Name:	Dr Pennycook
Practice/surgery name:	Stevenston Health Centre
Practice/surgery address:	Main Street Stevenston KA20 3BB
Practice/surgery tel.:	01294 464413

Assessment details

Location of Assessment:	Kilmarnock Court
Date of Assessment:	05/10/2012

Assessment type	Initial	Repeat	Discharge	Follow-up

Care co-ordinator:	
Completed by:	Darryl [redacted]
Profession:	Senior House Officer

Name of person referring

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Service user name: Georgina [redacted] | CHI number: 0412913127

Presentation

0 = No problem, X = Not Known, Y = Not Applicable, Z = Not Assessed (tick if key problem)

Source of current referral

[redacted]

Reason for referral

Threatened self [redacted] following arrest for breech of domestic bail.

Assessment type

New

[redacted] perspective of current problems and interventions

[redacted]

Current medication

Nil

Risk

0 = No problem, X = Not Known, Y = Not Applicable, Z = Not Assessed (tick if key problem)

Risk to others — Level 1

1 = Low apparent risk — No current indication of risk, but person's history and/or warning signs indicate possible risk. Required precautions covered by standard care plan i.e. no special risk prevention measures or plan required.

Personal and social history

0 = No problem, X = Not Known, Y = Not Applicable, Z = Not Assessed (tick if key problem)

Was routine gender based violence enquiry carried out?

No

Why was gender based violence enquiry not possible?

Not relevant as already carried out

Psychological well-being

0 = No problem, X = Not Known, Y = Not Applicable, Z = Not Assessed (tick if key problem)

Alcohol or substance misuse — Level 1

1 = Mild problem — Over-indulgence beyond social norm not causing concern to self or others. Recreational use of minor illegal drugs.

Eating problems — Level 1

1 = Mild problem — Some raising or lowering of usual intake. Difficulty eating reasonable portions of food/excessive concern about caloric intake.

Depressed mood and ideation — Level 1

1 = Mild problem — Non-persistent low mood but maintains most aspects of daily activity. Low estimation of self.

Anxiety, phobias and panics — Level 1

1 = Mild problem — Transient bouts of worrying, feelings of tension or fear. At most occasional avoidance but no consistent behavioural consequences.

Sleep disturbance — Level 1

1 = Mild problem — Occasional difficulties with falling asleep, staying asleep, and/or sleeping too much. Minimal impact on social or occupational functioning.

Physical

0 = No problem, X = Not Known, Y = Not Applicable, Z = Not Assessed (tick if key problem)

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NHS Confidential: Personal data about a patient

Service user name: Georgina [redacted] | CHI number: 0412913127

Physical (Continued...)

0 = No problem, X = Not Known, Y = Not Applicable, Z = Not Assessed (tick if key problem)

Physical health condition — **Level** 1

1 = Mild problem — Transient, self-limiting health problems, unlikely to have long-term effect or require significant adjustment of lifestyle.

Family, friends and [redacted]

0 = No problem, X = Not Known, Y = Not Applicable, Z = Not Assessed (tick if key problem)

Relationships with others close by — **Level** 2

2 = Moderate problem — Cool or avoiding relationship. Limited interaction but no overt hostility.

Involvement in recovery

0 = No problem, X = Not Known, Y = Not Applicable, Z = Not Assessed (tick if key problem)

Crisis arrangements

N/A

Summary

0 = No problem, X = Not Known, Y = Not Applicable, Z = Not Assessed (tick if key problem)

Summary of Assessment

Assessed in Kilmarnock [redacted] on Tuesday 2nd Oct 2012: Referral from PF as patient threatened self [redacted] following arrest for breech of domestic bail. Patient describes ongoing difficulties with [redacted] and this appears to have been reason for arrest. Patient states she did tell staff that she would "take pills" following arrest but states this was when emotionally charged and threat was not sincere. Denies any intent to self [redacted] and denies any [redacted] ideation. States she does have intermittant chronic thoughts of self [redacted] but has not engaged in any acts "for a long time".
States mood is variable and can be low. Sleep sometimes disturbed and appetite "isn't great", unsure of any weight loss. Energy/motivation/concentration unchanged recently. Describes several socail stressors. Had miscarraige recently and feels "stressed" with relationship with [redacted] new partner currently.
Describes seeing CAMHS in past and being diagnosed with depression. Was on an antidepressant, unsure of name. Denies using alcohol or illicit substances recently. Discussed potential sources of support but patient feels she does not require or want psychiatry input, "don't like talking about things, its no use".
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NHS Ayrshire & [redacted]

SMITH(STEVENS), [redacted]
22d Moorpark Road [redacted]
Stevenston
Ayrshire
KA20 3HU

CHI No 0412913127
Unit No
DOB 04/12/1991
Sex F

Area Laboratory — Haematology

Clinician: Dr K Ghosh
Request Location: GP, Stevenston: Dr Scollay et al

This report to : Dr K Ghosh , GP, Stevenston: Dr Scollay et al

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IB5305

Lab No 12B440810
Printed 12/10/12 07:18

Date Collected 11/10/12 09:15
Sample Type Blood

Authorised By SYSTEM
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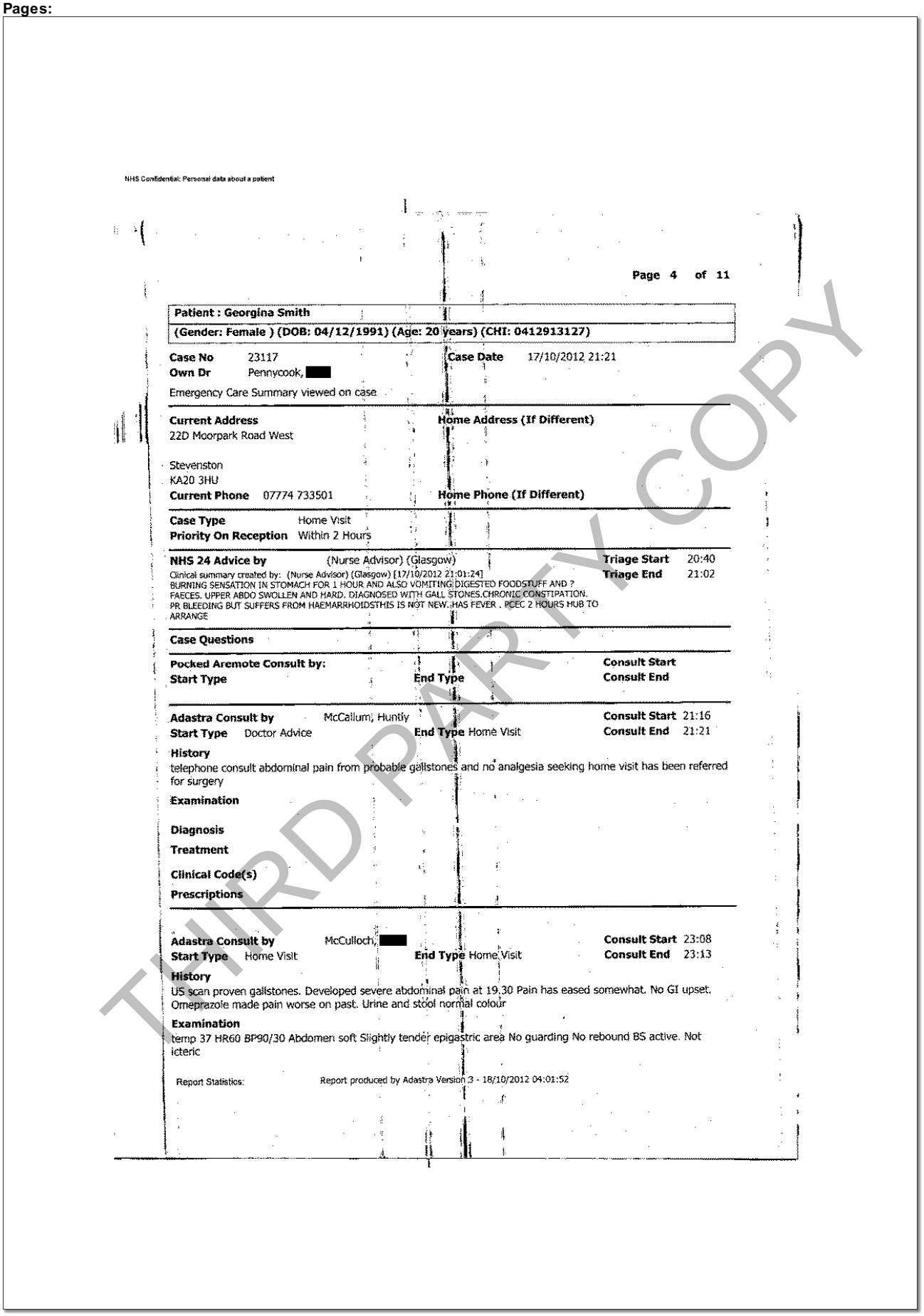

NHS Confidential: Personal data about a patient

Patient : Georgina Smith
(Gender: Female) (DOB: 04/12/1991) (Age: 20 years) (CHI: 0412913127)

Case No 23117 **Case Date** 17/10/2012 21:21
Own Dr Pennycook, [redacted]

Emergency Care Summary viewed on case

Current Address
22D Moorpark Road West

Stevenston
KA20 3HU
Current Phone 07774 733501

Home Address (If Different)

Home Phone (If Different)

Case Type Home Visit
Priority On Reception Within 2 Hours

NHS 24 Advice by (Nurse Advisor) (Glasgow) **Triage Start** 20:40
Clinical summary created by: (Nurse Advisor) (Glasgow) [17/10/2012 21:01:24] **Triage End** 21:02
BURNING SENSATION IN STOMACH FOR 1 HOUR AND ALSO VOMITING DIGESTED FOODSTUFF AND ? FAECES. UPPER ABDO SWOLLEN AND HARD. DIAGNOSED WITH GALL STONES.CHRONIC CONSTIPATION. PR BLEEDING BUT SUFFERS FROM HAEMARRHOIDSTHIS IS NOT NEW. HAS FEVER . PCEC 2 HOURS HUB TO ARRANGE

Case Questions

Pocked Aremote Consult by: **Consult Start**
Start Type **End Type** **Consult End**

Adastra Consult by McCallum, Huntly **Consult Start** 21:16
Start Type Doctor Advice **End Type** Home Visit **Consult End** 21:21

History
telephone consult abdominal pain from probable gallstones and no analgesia seeking home visit has been referred for surgery

Examination

Diagnosis

Treatment

Clinical Code(s)

Prescriptions

Adastra Consult by McCulloch, [redacted] **Consult Start** 23:08
Start Type Home Visit **End Type** Home Visit **Consult End** 23:13

History
US scan proven gallstones. Developed severe abdominal pain at 19.30 Pain has eased somewhat. No GI upset. Omeprazole made pain worse on past. Urine and stool normal colour

Examination
temp 37 HR60 BP90/30 Abdomen soft Slightly tender epigastric area No guarding No rebound BS active. Not icteric

Report Statistics: Report produced by Adastra Version 3 - 18/10/2012 04:01:52

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Patient : Georgina Smith

(Gender: Female) (DOB: 04/12/1991) (Age: 20 years) (CHI: 0412913127)

Diagnosis

Sounds more like gastritis but patient convinced pain is from gallbladder

Treatment

Given supply of tramadol

Clinical Code(s)

R090. [D]Abdominal pain

Prescriptions

Informational Outcome(s)

No Follow-Up Required -

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Patient : Georgina Smith
(Gender: Female) (DOB: 04/12/1991) (Age: 20 years) (CHI: 0412913127)

Case No 23117 **Case Date** 17/10/2012 21:21
Own Dr Pennycook, [redacted]

Emergency Care Summary viewed on case

Current Address
22D Moorpark Road West

Stevenston
KA20 3HU
Current Phone 07774 733501

Home Address (If Different)

Home Phone (If Different)

Case Type Home Visit
Priority On Reception Within 2 Hours

NHS 24 Advice by (Nurse Advisor) (Glasgow) **Triage Start** 20:40
Triage End 21:02

Clinical summary created by: (Nurse Advisor) (Glasgow) [17/10/2012 21:01:24]
BURNING SENSATION IN STOMACH FOR 1 HOUR AND ALSO VOMITING DIGESTED FOODSTUFF AND ? FAECES. UPPER ABDO SWOLLEN AND HARD. DIAGNOSED WITH GALL STONES.CHRONIC CONSTIPATION. PR BLEEDING BUT SUFFERS FROM HAEMARRHOIDSTHIS IS NOT NEW. HAS FEVER . PCEC 2 HOURS HUB TO ARRANGE

Case Questions

Pocked Aremote Consult by: **Consult Start**
Start Type **End Type** **Consult End**

Adastra Consult by McCallum, Huntly **Consult Start** 21:16
Start Type Doctor Advice **End Type** Home Visit **Consult End** 21:21

History
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Examination

Diagnosis

Treatment

Clinical Code(s)

Prescriptions

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Report Statistics: Report produced by Adastra Version 3 - 18/10/2012 04:01:52

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Patient : Georgina Smith

(Gender: Female) (DOB: 04/12/1991) (Age: 20 years) (CHI: 0412913127)

Diagnosis

Sounds more like gastritis but patient convinced pain is from gallbladder

Treatment

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Clinical Code(s)

R090. [D]Abdominal pain

Prescriptions

Informational Outcome(s)

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Dr D Chung Dr J [redacted] Dr M Draegebo Dr J Mulligan Dr J Mardon Mr J [redacted] Dr C McGuffie Dr A Lannigan

Accident and Emergency

Crosshouse Hospital
Kilmarnock KA2 0BE

Phone: 01563 577757/8
Fax: 01563 572009

Dr. [redacted] JA PENNYCOOK
STEVENSTON GROUP PRACTICE
STEVENSTON HEALTH CENTRE
MAIN STREET
STEVENSTON
KA20 3AB

Georgina Smith
22D MOORPARK ROAD WEST
STEVENSTON, KA20 3HU

DOB: 04/12/1991
A/E No: XH-12-061628
CHI No: 0412913127

Date and Time of Attendance: 26 Oct 2012 23:10
Total A&E Attendances = 12 , attendances in last year = 4

Diagnosis See diagnosis below

Treatment Other treatment

Drugs:

Investigations

Follow up: Admitted

4a

Additional Information: admitted with abdominal pain

[redacted] Marcu

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

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Dr D Chung Dr J [redacted] Dr M Draegebo Dr J Mulligan Dr J Mardon Mr J [redacted] Dr C McGuffie Dr A Lannigan

Accident and Emergency
Crosshouse Hospital
Kilmarnock KA2 0BE
Phone: 01563 577757/8
Fax: 01563 572009

Dr. [redacted] JA PENNYCOOK
STEVENSTON GROUP PRACTICE
STEVENSTON HEALTH CENTRE
MAIN STREET
STEVENSTON
KA20 3AB

Georgina Smith
22D MOORPARK ROAD WEST
STEVENSTON, KA20 3HU

DOB: 04/12/1991
A/E No: XH-12-061628
CHI No: 0412913127

Date and Time of Attendance: 26 Oct 2012 23:10
Total A&E Attendances = 12 , attendances in last year = 4

Diagnosis See diagnosis below

Treatment Other treatment

Drugs:

Investigations

Follow up: Admitted

4a

Additional Information: admitted with abdominal pain

[redacted] **Marcu**

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

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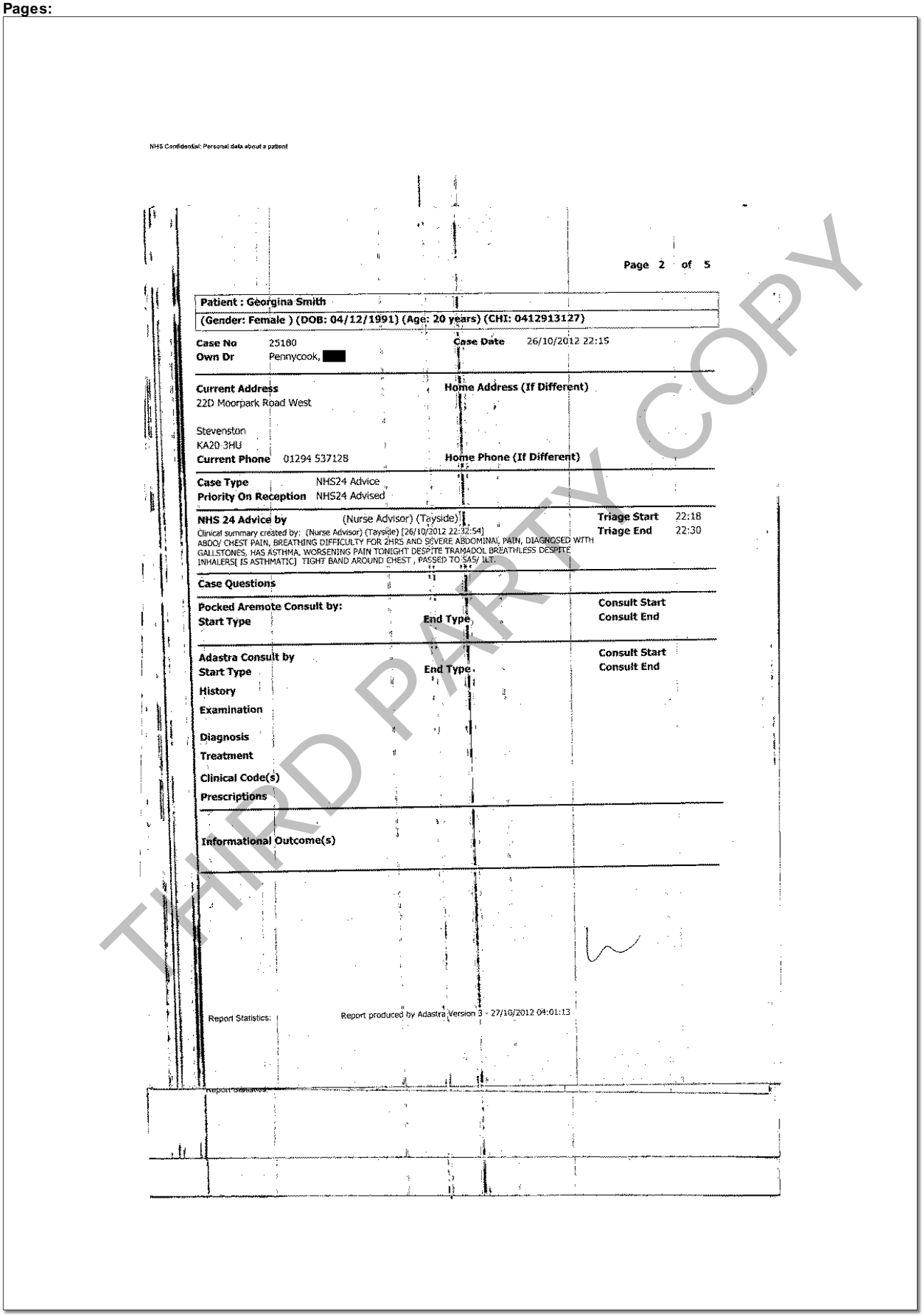

NHS Confidential: Personal data about a patient

Patient : Georgina Smith
(Gender: Female) (DOB: 04/12/1991) (Age: 20 years) (CHI: 0412913127)

Case No 25180
Own Dr Pennycook, [redacted]

Case Date 26/10/2012 22:15

Current Address
22D Moorpark Road West

Stevenston
KA20 3HU
Current Phone 01294 537128

Home Address (If Different)

Home Phone (If Different)

Case Type NHS24 Advice
Priority On Reception NHS24 Advised

NHS 24 Advice by (Nurse Advisor) (Tayside)
Triage Start 22:18
Triage End 22:30

Clinical summary created by: (Nurse Advisor) (Tayside) [26/10/2012 22:32:54]
ABDO/ CHEST PAIN, BREATHING DIFFICULTY FOR 2HRS AND SEVERE ABDOMINAL PAIN, DIAGNOSED WITH GALLSTONES, HAS ASTHMA, WORSENING PAIN TONIGHT DESPITE TRAMADOL BREATHLESS DESPITE INHALERS[IS ASTHMATIC] TIGHT BAND AROUND CHEST , PASSED TO SAS/ ILT.

Case Questions

Pocked Aremote Consult by:
Start Type **End Type**
Consult Start
Consult End

Adastra Consult by
Start Type **End Type**
Consult Start
Consult End

History

Examination

Diagnosis

Treatment

Clinical Code(s)

Prescriptions

Informational Outcome(s)

Report Statistics:

Report produced by Adastra Version 3 - 27/10/2012 04:01:13

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NHS Confidential: Personal data about a [redacted]

Dr D Chung Dr J [redacted] Dr M Draegebo Dr J Mulligan Dr J Mardon Mr J [redacted] Dr C McGuffie Dr A Lannigan

Accident and Emergency
Crosshouse Hospital
Kilmarnock KA2 0BE
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Dr. [redacted] JA PENNYCOOK
STEVENSTON GROUP PRACTICE
STEVENSTON HEALTH CENTRE
MAIN STREET
STEVENSTON
KA20 3AB

Georgina Smith
22D MOORPARK ROAD WEST
STEVENSTON, KA20 3HU

DOB: 04/12/1991
A/E No: XH-12-061628
CHI No: 0412913127

Date and Time of Attendance: 26 Oct 2012 23:10
Total A&E Attendances = 12 , attendances in last year = 4

Diagnosis See diagnosis below

Treatment Other treatment

Drugs:

Investigations

Follow up: Admitted

4a

Additional Information: admitted with abdominal pain

[redacted] **Marcu**

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

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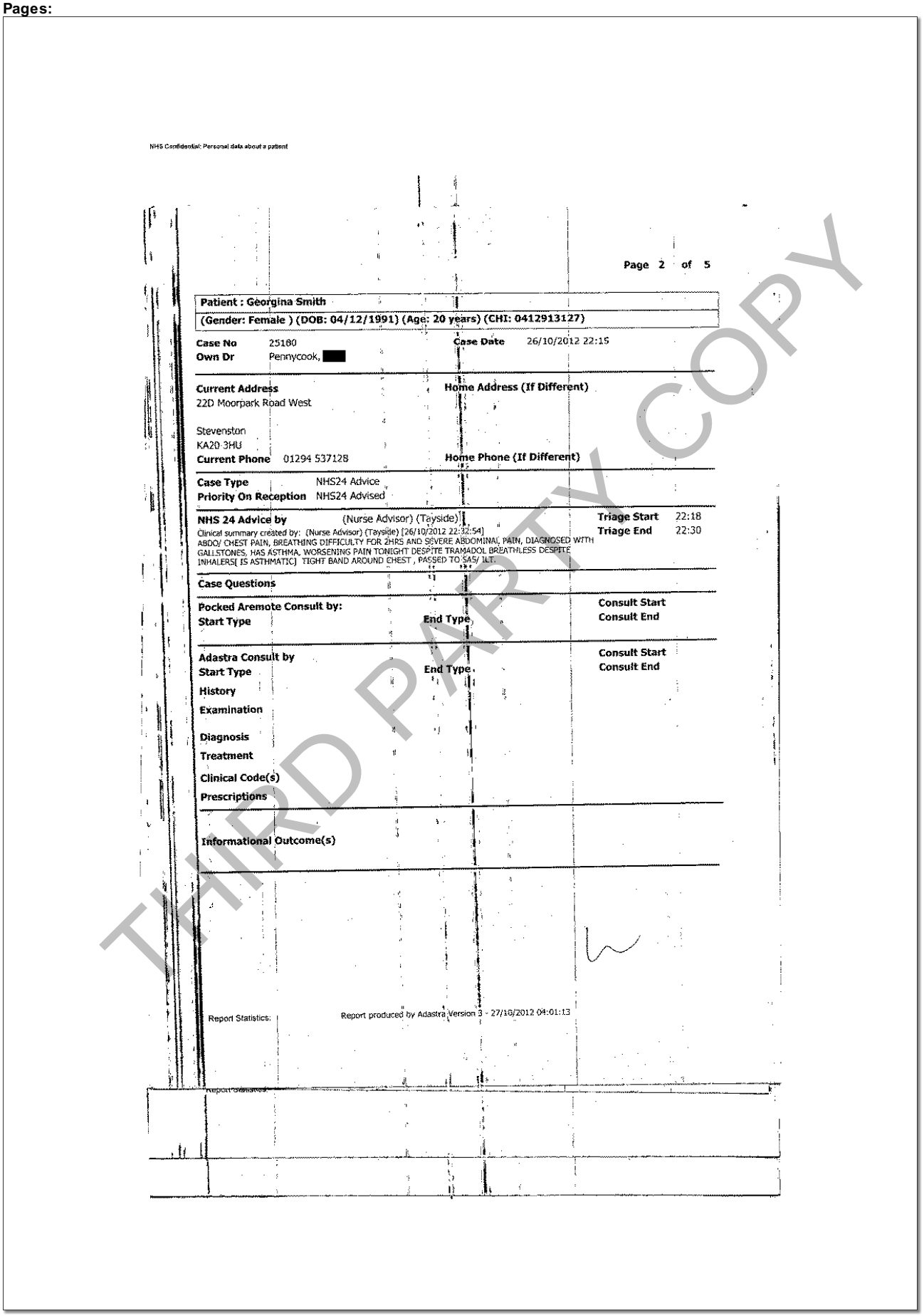

NHS Confidential: Personal data about a patient

Patient : Georgina Smith
(Gender: Female) (DOB: 04/12/1991) (Age: 20 years) (CHI: 0412913127)

Case No 25180
Own Dr Pennycook, [redacted]

Case Date 26/10/2012 22:15

Current Address
22D Moorpark Road West

Stevenston
KA20 3HU
Current Phone 01294 537128

Home Address (If Different)

Home Phone (If Different)

Case Type NHS24 Advice
Priority On Reception NHS24 Advised

NHS 24 Advice by (Nurse Advisor) (Tayside)
Triage Start 22:18
Triage End 22:30

Clinical summary created by: (Nurse Advisor) (Tayside) [26/10/2012 22:32:54]
ABDO/ CHEST PAIN, BREATHING DIFFICULTY FOR 2HRS AND SEVERE ABDOMINAL PAIN, DIAGNOSED WITH GALLSTONES, HAS ASTHMA, WORSENING PAIN TONIGHT DESPITE TRAMADOL BREATHLESS DESPITE INHALERS[IS ASTHMATIC] TIGHT BAND AROUND CHEST , PASSED TO SAS/ ILT.

Case Questions

Pocked Aremote Consult by:
Start Type **End Type**
Consult Start
Consult End

Adastra Consult by
Start Type **End Type**
Consult Start
Consult End

History

Examination

Diagnosis

Treatment

Clinical Code(s)

Prescriptions

Informational Outcome(s)

Report Statistics:

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A/E No: XH-12-061628
CHI No: 0412913127

Date and Time of Attendance: 26 Oct 2012 23:10
Total A&E Attendances = 12 , attendances in last year = 4

Diagnosis See diagnosis below

Treatment Other treatment

Drugs:

Investigations

Follow up: Admitted

4a

Additional Information: admitted with abdominal pain

[redacted] **Marcu**

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

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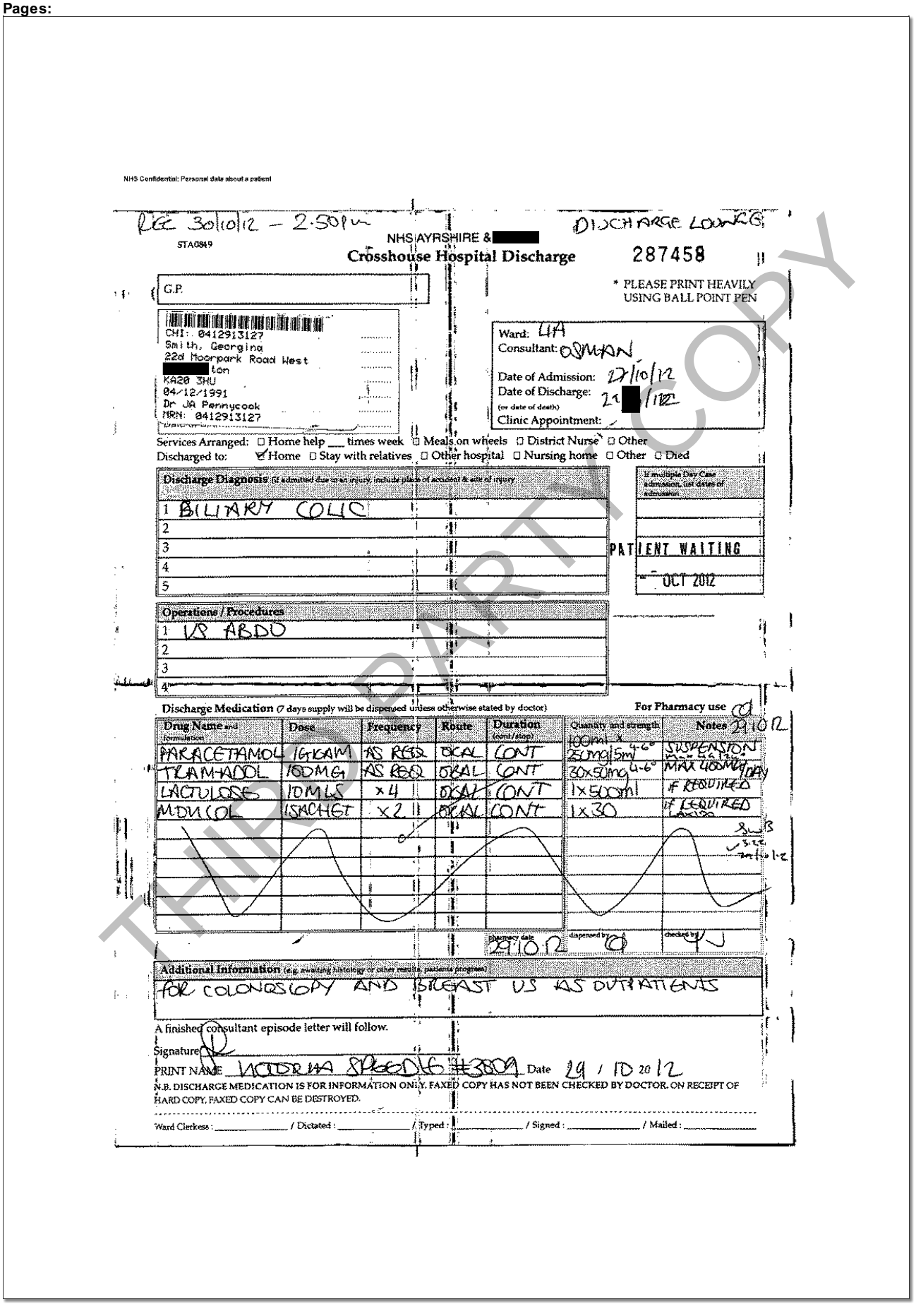

NHS Confidential: Personal data about a patient

RGC 30/10/12 – 2.50pm

DISCHARGE LOUNGE

STA0849

NHS AYRSHIRE & [redacted]

Crosshouse Hospital Discharge 287458

* PLEASE PRINT HEAVILY USING BALL POINT PEN

G.P.

CHI: 0412913127
Smith, Georgina
22d Moorpark Road West
[redacted]ton
KA20 3HU
04/12/1991
Dr JA Pennycook
MRN: 0412913127

Ward: 4A
Consultant: OSMAN
Date of Admission: 27/10/12
Date of Discharge: 2[redacted]/10/12
(or date of death)
Clinic Appointment:

Services Arranged: ☐ Home help ___ times week ☐ Meals on wheels ☐ District Nurse ☐ Other
Discharged to: ☑ Home ☐ Stay with relatives ☐ Other hospital ☐ Nursing home ☐ Other ☐ Died

Discharge Diagnosis (if admitted due to an injury, include place of accident & site of injury)	If multiple Day Case admission, list dates of admission
1 BILIARY COLIC	
2	
3	PATIENT WAITING
4	OCT 2012
5	

Operations / Procedures
1 US ABDO
2
3
4

Discharge Medication (7 days supply will be dispensed unless otherwise stated by doctor) — For Pharmacy use

Drug Name and formulation	Dose	Frequency	Route	Duration (start/stop)	Quantity and strength	Notes
PARACETAMOL	1GRAM	AS REQ	ORAL	CONT	100ml x 4-6° 250mg/5ml	SUSPENSION
TRAMADOL	100MG	AS REQ	ORAL	CONT	30x50mg 4-6°	MAX 400MG/DAY
LACTULOSE	10ML'S	x4	ORAL	CONT	1x500ml	IF REQUIRED
MOVICOL	1SACHET	x2	ORAL	CONT	1x30	IF REQUIRED

Pharmacy date 29.10.12 — dispensed by [redacted] — checked by [redacted]

Additional Information (e.g. awaiting histology or other results, patient's progress)
FOR COLONOSCOPY AND BREAST US AS OUTPATIENTS

A finished consultant episode letter will follow.

Signature [redacted]

PRINT NAME VICTORIA SPEED [redacted]3809 Date 29 / 10 2012

N.B. DISCHARGE MEDICATION IS FOR INFORMATION ONLY. FAXED COPY HAS NOT BEEN CHECKED BY DOCTOR. ON RECEIPT OF HARD COPY, FAXED COPY CAN BE DESTROYED.

Ward Clerkess: _____ / Dictated: _____ / Typed: _____ / Signed: _____ / Mailed: _____

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NHS Ayrshire & [redacted]

Area Laboratory — Haematology

[redacted]
22d Moorpark Road West
Stevenston
Ayrshire
KA20 3HU

CHI No. 0412913127
Unit No. [redacted]
DOB 04/12/1991
Sex F

Clinician: Dr K Ghosh
Request Location: GP, Stevenston: Dr Scollay et al

This report to : Dr K [redacted] , GP, Stevenston: Dr Scollay et al

		Result	Units	Normal Range
Haemoglobin		13.2	g/dL	12.2 - 16.5
White Cell Count		6.5	10*9/L	3.9 - 10.0
Platelets		266	10*9/L	150 - 400
RBC		4.95	10*12/L	3.88 - 4.99
Haematocrit		0.40	%	0.36 - 0.48
MCV	Low	81	fl	82 - 98
MCH	Low	26.7	pg	27.3 - 32.6
MCHC		33.1	g/dL	31.6 - 34.9
Neutrophils		3.8	10*9/L	1.8 - 7.4
Lymphocytes		2.0	10*9/L	1.1 - 5.0
Monocytes		0.3	10*9/L	0.2 - 0.9
Eosinophils		0.3	10*9/L	0.1 - 0.7
Basophils		0.0	10*9/L	0.0 - 0.1

Lab No 12B471564
Printed 31/10/12 10:11

[redacted] Collected 30/10/12
Sample Type Blood

Authorised By SYSTEM
Page 1 of 1

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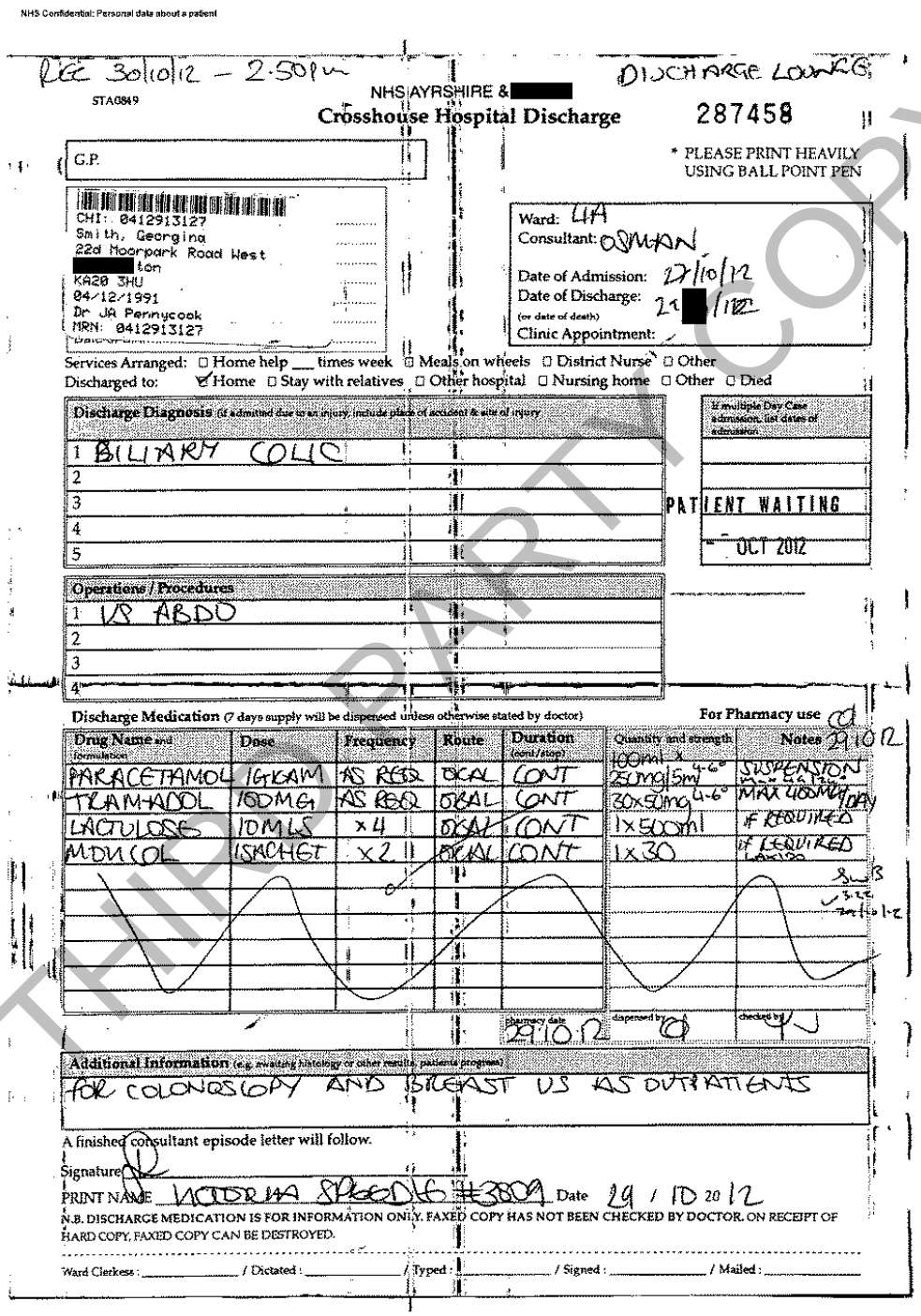

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REC 30/10/12 – 2.50pm

DISCHARGE LOUNGE

STA0849

NHS AYRSHIRE & [redacted]

Crosshouse Hospital Discharge 287458

* PLEASE PRINT HEAVILY USING BALL POINT PEN

G.P.

CHI: 0412913127
Smith, Georgina
22d Moorpark Road West
[redacted]ton
KA20 3HU
04/12/1991
Dr JA Pennycook
MRN: 0412913127

Ward: UA
Consultant: OSMAN
Date of Admission: 27/10/12
Date of Discharge: 29/[redacted]/12
(or date of death)
Clinic Appointment:

Services Arranged: ☐ Home help ___ times week ☐ Meals on wheels ☐ District Nurse ☐ Other
Discharged to: ☑ Home ☐ Stay with relatives ☐ Other hospital ☐ Nursing home ☐ Other ☐ Died

Discharge Diagnosis (if admitted due to an injury, include place of accident & site of injury)

1	BILIARY COLIC
2	
3	
4	
5	

If multiple Day Case admission, list dates of admission

PATIENT WAITING
OCT 2012

Operations / Procedures

1	US ABDO
2	
3	
4	

Discharge Medication (7 days supply will be dispensed unless otherwise stated by doctor)

For Pharmacy use

Drug Name and formulation	Dose	Frequency	Route	Duration (start/stop)	Quantity and strength	Notes
PARACETAMOL	1GRAM	AS REQ	ORAL	CONT	100ml x 4-6° 250mg/5ml	SUSPENSION
TRAMADOL	100MG	AS REQ	ORAL	CONT	30x50mg 4-6°	MAX 400MG/DAY
LACTULOSE	10ML'S	x4	ORAL	CONT	1x500ml	IF REQUIRED
MOVICOL	1SACHET	x2	ORAL	CONT	1x30	IF REQUIRED

Pharmacy date 29.10.12 dispensed by CD checked by [illegible]

Additional Information (e.g. awaiting histology or other results, patient's progress)

FOR COLONOSCOPY AND BREAST US AS OUTPATIENTS

A finished consultant episode letter will follow.

Signature [illegible]

PRINT NAME VICTORIA SPEED GP #3809 Date 29 / 10 2012

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NHS Confidential: Personal data about a patient

Patient : Georgina Smith
(Gender: Female) (DOB: 04/12/1991) (Age: 20 years) (CHI: 0412913127)

Case No 30907 **Case Date** 17/11/2012 17:34
Own Dr Pennycook, [redacted]

Current Address
22D Moorpark Road West

Stevenston
KA20 3HU
Current Phone 01294 537128

Home Address (If Different)

Home Phone (If Different)

Case Type NHS24 Advice
Priority On Reception NHS24 Advised

NHS 24 Advice by (Nurse Advisor) (Aberdeen)
Clinical summary created by: (Nurse Advisor) (Aberdeen) [17/11/2012 17:52:52]
HEAD INJURY FOR 17HRS AND ASSAULTED KICKED IN HEAD, [redacted] ATTENDED , CURRENTLY C/O DIZZINESS, HEADACHE, NAUSEA, DOUBLE VISION, CONFUSED EARLIER, SWELLINGS TO HEAD- A & E VIA 2HR SAS TRANSFER

Triage Start 17:36
Triage End 17:53

Case Questions

Pocked Aremote Consult by:
Start Type **End Type**

Consult Start
Consult End

Adastra Consult by
Start Type **End Type**

Consult Start
Consult End

History

Examination

Diagnosis

Treatment

Clinical Code(s)

Prescriptions

Informational Outcome(s)

Report Statistics: Report produced by Adastra Version 3 - 18/11/2012 04:04:16

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NHS Confidential: [redacted] data about a patient

Dr D Chung Dr J [redacted] Dr M Draegebo Dr J Mulligan Dr J Mardon Mr J [redacted] Dr C McGuffie Dr A Lannigan

Accident and Emergency

Crosshouse Hospital
Kilmarnock KA2 0BE

Phone: 01563 577757/8
Fax: 01563 572009

Dr. [redacted] JA PENNYCOOK
STEVENSTON GROUP PRACTICE
STEVENSTON HEALTH CENTRE
MAIN STREET
STEVENSTON
KA20 3AB

Georgina Smith

22D MOORPARK ROAD WEST
STEVENSTON, KA20 3HU

DOB: 04/12/1991
A/E No: XH-12-065989
CHI No: 0412913127

Date and Time of Attendance: 17 Nov 2012 18:37
Total A&E Attendances = 13 , attendances in last year = 5

Diagnosis Minor head injury

Treatment Advice

Drugs:

Investigations

Follow up: Discharge, no follow up

Usual place of residence

Additional Information: Attends 18 hours post assault with nausea and dizziness. Likely post concussion syndrome, D/C with advice.

Dr Locum 2
A&E SHO

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

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Filename: igprda202606181529470.pdf
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Pages:

NHS Confidential: [redacted] data about a patient

NHS Ayrshire & [redacted]

Area Laboratory — Haematology

[redacted]
22d Moorpark Road West
Stevenston
Ayrshire
KA20 3HU

CHI No. 0412913127
Unit No. [redacted]
DOB 04/12/1991
Sex F

Clinician: Dr K Ghosh
Request Location: GP, Stevenston: Dr Scollay et al

This report to : Dr K [redacted] , GP, Stevenston: Dr Scollay et al

		Result	Units	Normal Range
Haemoglobin		13.2	g/dL	12.2 - 16.5
White Cell Count		6.5	10*9/L	3.9 - 10.0
Platelets		266	10*9/L	150 - 400
RBC		4.95	10*12/L	3.88 - 4.99
Haematocrit		0.40	%	0.36 - 0.48
MCV	Low	81	fl	82 - 98
MCH	Low	26.7	pg	27.3 - 32.6
MCHC		33.1	g/dL	31.6 - 34.9
Neutrophils		3.8	10*9/L	1.8 - 7.4
Lymphocytes		2.0	10*9/L	1.1 - 5.0
Monocytes		0.3	10*9/L	0.2 - 0.9
Eosinophils		0.3	10*9/L	0.1 - 0.7
Basophils		0.0	10*9/L	0.0 - 0.1

Lab No 12B471564
Printed 31/10/12 10:11

[redacted] Collected 30/10/12
Sample Type Blood

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NHS Confidential: [redacted] data about a patient

Dr D Chung Dr J [redacted] Dr M Draegebo Dr J Mulligan Dr J Mardon Mr J [redacted] Dr C McGuffie Dr A Lannigan

Accident and Emergency

Crosshouse Hospital
Kilmarnock KA2 0BE

Phone: 01563 577757/8
Fax: 01563 572009

Dr. [redacted] JA PENNYCOOK
STEVENSTON GROUP PRACTICE
STEVENSTON HEALTH CENTRE
MAIN STREET
STEVENSTON
KA20 3AB

Georgina Smith

22D MOORPARK ROAD WEST
STEVENSTON, KA20 3HU

DOB: 04/12/1991
A/E No: XH-12-065989
CHI No: 0412913127

Date and Time of Attendance: 17 Nov 2012 18:37
Total A&E Attendances = 13 , attendances in last year = 5

Diagnosis Minor head injury

Treatment Advice

Drugs:

Investigations

Follow up: Discharge, no follow up

Usual place of residence

Additional Information: Attends 18 hours post assault with nausea and dizziness. Likely post concussion syndrome, D/C with advice.

Dr Locum 2
A&E SHO

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

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NHS Confidential: Personal data about a patient

Patient : Georgina Smith
(Gender: Female) (DOB: 04/12/1991) (Age: 20 years) (CHI: 0412913127)

Case No 30907 **Case Date** 17/11/2012 17:34
Own Dr Pennycook, [redacted]

Current Address
22D Moorpark Road West

Stevenston
KA20 3HU
Current Phone 01294 537128

Home Address (If Different)

Home Phone (If Different)

Case Type NHS24 Advice
Priority On Reception NHS24 Advised

NHS 24 Advice by (Nurse Advisor) (Aberdeen)
Clinical summary created by: (Nurse Advisor) (Aberdeen) [17/11/2012 17:52:52]
HEAD INJURY FOR 17HRS AND ASSAULTED KICKED IN HEAD, [redacted] ATTENDED , CURRENTLY C/O DIZZINESS, HEADACHE, NAUSEA, DOUBLE VISION, CONFUSED EARLIER, SWELLINGS TO HEAD- A & E VIA 2HR SAS TRANSFER

Triage Start 17:36
Triage End 17:53

Case Questions

Pocked Aremote Consult by:
Start Type **End Type**

Consult Start
Consult End

Adastra Consult by
Start Type **End Type**

Consult Start
Consult End

History

Examination

Diagnosis

Treatment

Clinical Code(s)

Prescriptions

Informational Outcome(s)

Report Statistics: Report produced by Adastra Version 3 - 18/11/2012 04:04:16

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NHS Confidential: Personal data about a patient

NHS
Ayrshire
&[redacted]

Crosshouse Hospital
Kilmarnock
KA2 0BE
Tel: 01563 521133
Fax: 01563 577979

Dr J A Pennycook
Stevenston Group Practice
20 Main Street
STEVENSTON
Ayrshire
KA20 3BB

22.11.2012

Dear Dr Pennycook,

Re. **Ms Georgina Smith** 04/12/91 0412913127
22d Moorpark Road West
STEVENSTON
KA20 3HU

Your patient was admitted under the care of Mr [redacted] on 26/10/12 and discharged home on 29/10/12.

The principal diagnosis was:
Biliary stones - Symptomatic gallstones

The patient received no operative treatment.

Drugs on discharge: As listed in the immediate discharge letter.

A full explanation of the diagnosis was given to the patient.

A follow-up appointment has been made for O/P colonoscopy and ultrasound.

This 20 year old lady was admitted with a history of back and abdominal pain. There were no other associated symptoms. She was also complaining of a lump in the right breast. On examination she was afebrile with a normal pulse. Examinatio of the right breast revealed no discrete lesion of the right breast. Abdomen was soft and lax but tender in the upper part. Ultrasound confirmed the previous findings of gallstones with no evidence of cholecystitis. She was treated conservatively and her symptoms settled. As she was also complaining of alteration in bowel habit an outpatient colonoscopy will be arranged. An ultrasound of her breast has also been requested. She will be reviewed back at clinic following these.

Yours sincerely,

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MO/AMC

Mr M Osman
Consultant

NHS
Ayrshire
&[redacted]

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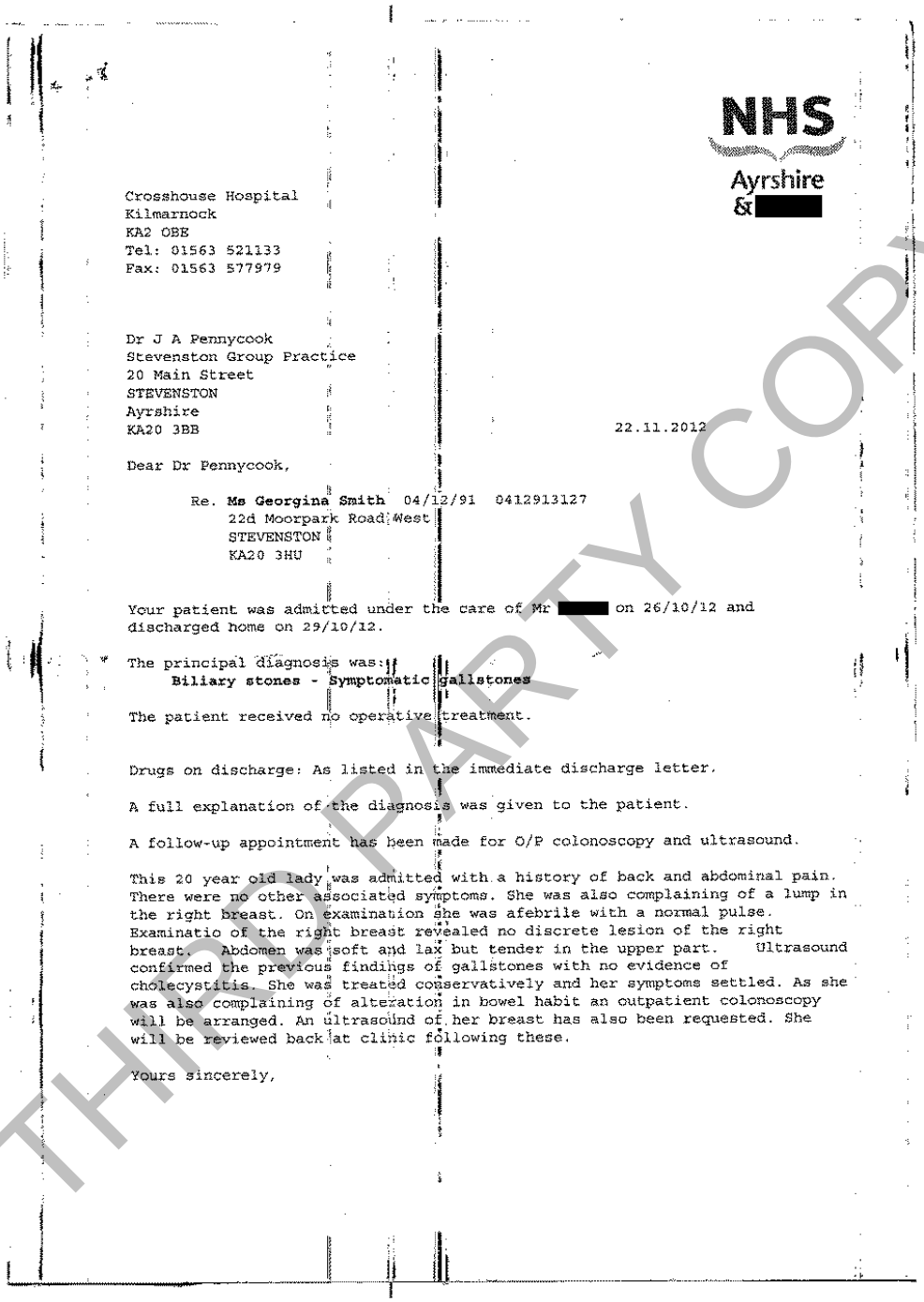

NHS
Ayrshire
&[redacted]

Crosshouse Hospital
Kilmarnock
KA2 0BE
Tel: 01563 521133
Fax: 01563 577979

Dr J A Pennycook
Stevenston Group Practice
20 Main Street
STEVENSTON
Ayrshire
KA20 3BB

22.11.2012

Dear Dr Pennycook,

Re. **Ms Georgina Smith** 04/12/91 0412913127
22d Moorpark Road West
STEVENSTON
KA20 3HU

Your patient was admitted under the care of Mr [redacted] on 26/10/12 and discharged home on 29/10/12.

The principal diagnosis was:
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Drugs on discharge: As listed in the immediate discharge letter.

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Yours sincerely,

THIRD PARTY COPY

NHS Confidential: Personal data about a patient

NHS
Ayrshire
&[redacted]

MO/AMC

Mr M Osman
Consultant

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NHS Confidential: Personal data about a patient

Patient : Georgina Smith
(Gender: Female) (DOB: 04/12/1991) (Age: 21 years) (CHI: 0412913127)

Case No 36142 **Case Date** 06/12/2012 20:17
Own Dr Pennycook, [redacted]

Emergency Care Summary viewed on case

Current Address
22D Moorpark Road West

Stevenston
KA20 3HU
Current Phone 07774 733501

Home Address (If Different)
Home Phone (If Different) 01294 537128

Case Type Home Visit
Priority On Reception Within 2 Hours

NHS 24 Advice by (Nurse Advisor) (Ayrshire (& [redacted]
Triage Start 20:20
Triage End 20:40

Clinical summary created by: (Nurse Advisor) (Ayrshire (& Arran)) [06/12/2012 20:40:15]
ABDO PAIN FOR TODAY AND WORSENING UPPER ABDO PAIN ON RIGHT SIDE, KNOWN TO HAVE GALLSTONES.HAS TAKEN TRAMADOL 50MG X3, PARACETAMOL AND LAXATIVE. NO EFFECT.BNO 2 DAYS.CHEST FEELS A BIT TIGHT THROUGH TO BACK BUT NO PAIN.ASTHMATIC AND ANXIOUS. NAUSEATED,NOT VOMITING.OFF FOOD DRINKING LESS,PU LESS.CHALK WHITE AND HOT. ALSO HAS 3 BREAST LUMPS AWAITING APT WITH MR [redacted] ANXIOUS ABOUT NO APT. ADVISED TO CALL BREAST CARE NURSES TOMORROW. UNABLE TO ATTEND CENTRE.GP HOME VISIT 2 HRS.

Case Questions

Pocked Aremote Consult by:
Start Type **End Type** [redacted]
Consult Start
Consult End

Adastra Consult by Khaliq, Kessar
Start Type Home Visit **End Type** Home Visit
Consult Start 22:04
Consult End 22:13

History
c/o pain R lower chest - does not think it is gallstones - pain has eased considerably with analgesia, no vomiting. Was assaulted 2 weeks ago in pub - does no recall all injuries - states was KOd for a while.

Examination
Looks well, pain free, moving around freely, undistressed.
HR 80, T 37, abdo soft, non tender, Murphys _ve, BS+, no rebound etc.
Tender R lower rib cage, no bruise, tender on springing. No signs on auscultation.

Diagnosis
Rib cage pain

Treatment
Advice, reassurance, has analgesia, suggest GP if recurrent or persists - has endy and USS appts.

Clinical Code(s)
R065. [D]Chest pain

Prescriptions

Informational Outcome(s)
No Follow-Up Required -

Report Statistics: Report produced by Adastra Version 3 - 07/12/2012 04:01:36

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Pages:

NHS Confidential: Personal data about a patient

Patient : Georgina Smith
(Gender: Female) (DOB: 04/12/1991) (Age: 21 years) (CHI: 0412913127)

Case No 36142 **Case Date** 06/12/2012 20:17
Own Dr Pennycook, [redacted]

Emergency Care Summary viewed on case

Current Address
22D Moorpark Road West

Stevenston
KA20 3HU
Current Phone 07774 733501

Home Address (If Different)
Home Phone (If Different) 01294 537128

Case Type Home Visit
Priority On Reception Within 2 Hours

NHS 24 Advice by (Nurse Advisor) (Ayrshire (& [redacted]
Triage Start 20:20
Triage End 20:40

Clinical summary created by: (Nurse Advisor) (Ayrshire (& Arran)) [06/12/2012 20:40:15]
ABDO PAIN FOR TODAY AND WORSENING UPPER ABDO PAIN ON RIGHT SIDE, KNOWN TO HAVE GALLSTONES.HAS TAKEN TRAMADOL 50MG X3, PARACETAMOL AND LAXATIVE. NO EFFECT.BNO 2 DAYS.CHEST FEELS A BIT TIGHT THROUGH TO BACK BUT NO PAIN-ASTHMATIC AND ANXIOUS. NAUSEATED,NOT VOMITING.OFF FOOD DRINKING LESS,PU LESS.CHALK WHITE AND HOT. ALSO HAS 3 BREAST LUMPS AWAITING APT WITH MR [redacted] ANXIOUS ABOUT NO APT. ADVISED TO CALL BREAST CARE NURSES TOMORROW. UNABLE TO ATTEND CENTRE.GP HOME VISIT 2 HRS.

Case Questions

Pocked Aremote Consult by:
Start Type **End Type** [redacted]
Consult Start
Consult End

Adastra Consult by Khaliq, Kessar
Start Type Home Visit **End Type** Home Visit
Consult Start 22:04
Consult End 22:13

History
c/o pain R lower chest - does not think it is gallstones - pain has eased considerably with analgesia, no vomiting. Was assaulted 2 weeks ago in pub - does no recall all injuries - states was KOd for a while.

Examination
Looks well, pain free, moving around freely, undistressed.
HR 80, T 37, abdo soft, non tender, Murphys -ve, BS+, no rebound etc.
Tender R lower rib cage, no bruise, tender on springing. No signs on auscultation.

Diagnosis
Rib cage pain

Treatment
Advice, reassurance, has analgesia, suggest GP if recurrent or persists - has endy and USS appts.

Clinical Code(s)
R065. [D]Chest pain

Prescriptions

Informational Outcome(s)
No Follow-Up Required -

Report Statistics: Report produced by Adastra Version 3 - 07/12/2012 04:01:36

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Pages:

NHS Confidential: [redacted] data about a patient

NHS Ayrshire & [redacted] General Hospitals Division
Endoscopy Unit, Crosshouse Hospital
COLONOSCOPY REPORT

Name: **Georgina SMITH, 04/12/1991 (F)**
CHI No: **0412913127**
Case note no.: **0412913127**

Address: 22d Moorpark Road West
Stevenston
Ayrshire
KA20 3HU

GP: Dr JA Pennycook
Stevenston Group Practice
Stevenston Health Centre
Main Street
Stevenston
KA20 3AB

Procedure date
20th December 2012

Priority: Routine
Status: Outpatient/NHS
Hospital: Crosshouse Hospital

Referring Cons: Mr M [redacted]
(Consultant Surgeon, Crosshous

Indications
Altered bowel habit.

Report
Bowel preparation with two sachets of Picolax was good.
A digital rectal examination was performed.
The colonoscope was inserted via the anus to the caecum, which was identified positively by the ileocecal valve, transillumination, the tri-radiate caecal fold and digital pressure.
The examination to the limit of insertion was normal.

Follow up
Awaiting pathology results. Review will be in the Mr [redacted] clinic.

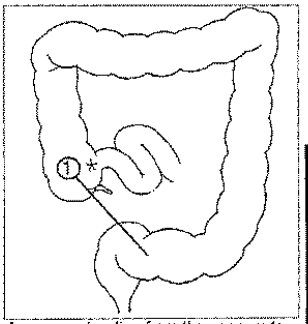
Advice/comments
Spastic colon through-out. Random colonic bX. taken. Awaiting Bx. results.

[redacted]er K Linton
[redacted]. Nurse Practitioner

Consultant/Endoscopist
List consultant: Mr L J Fon
Endoscopist No1: [redacted] K Linton
Endoscopist No2: Dr Muazzen
Nurses: S/N L Stirling
S/N E Templeton

Instrument
51 XH Q260DL 2111470

Premedication
Midazolam (IV) 3 mg
Pethidine (IV)-50 mg



1: *An area extending from the caecum to the distal sigmoid*

Specimens taken
Biopsy (random x4)

DRS 6005

[redacted] ENDOSCOPY SUITE

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NHS Confidential: [redacted] data about a patient

NHS Ayrshire & [redacted] General Hospitals Division
Endoscopy Unit, Crosshouse Hospital
COLONOSCOPY REPORT

Name: **Georgina SMITH, 04/12/1991 (F)**
CHI No: **0412913127**
Case note no.: **0412913127**

Address: 22d Moorpark Road West
Stevenston
Ayrshire
KA20 3HU

GP: Dr JA Pennycook
Stevenston Group Practice
Stevenston Health Centre
Main Street
Stevenston
KA20 3AB

Procedure date
20th December 2012

Priority: Routine
Status: Outpatient/NHS
Hospital: Crosshouse Hospital

Referring Cons: Mr M [redacted]
(Consultant Surgeon, Crosshous

Indications
Altered bowel habit.

Report
Bowel preparation with two sachets of Picolax was good.
A digital rectal examination was performed.
The colonoscope was inserted via the anus to the caecum, which was identified positively by the ileocecal valve, transillumination, the tri-radiate caecal fold and digital pressure.
The examination to the limit of insertion was normal.

Follow up
Awaiting pathology results. Review will be in the Mr [redacted] clinic.

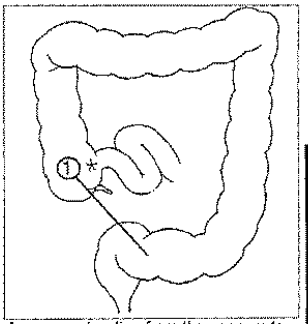
Advice/comments
Spastic colon through-out. Randum colonic bX. taken. Awaiting Bx. results.

[redacted]er K Linton
C. Nurse Practitioner

Consultant/Endoscopist
List consultant: Mr L J Fon
Endoscopist No1: [redacted] K Linton
Endoscopist No2: Dr Muazzen
Nurses: S/N L Stirling
S/N E Templeton

Instrument
51 XH Q260DL 2111470

Premedication
Midazolam (IV) 3 mg
Pethidine (IV)-50 mg



1: *An area extending from the caecum to the distal sigmoid*

Specimens taken
Biopsy (random x4)

DRS 6005

[redacted] ENDOSCOPY SUITE

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NHS Confidential: Personal data about a patient

A8070 J.A. Pennycook

NHS Lanarkshire Primary Care Operating Division OOH Call Incident Report

Call number:	**29516**	Receive Date:	**24-Dec-2012 18:56**
Patient's Name:	**Georgina Smith**		
Date of birth:	**4-Dec-1991 (21 years)**	Gender:	**F**
Address:	**22D Moorpark Road West**	Current Address:	**20 Gourlay East Kilbride**
	Stevenston KA20 3HU		**Glasgow G74 3PJ**
Return Contact No:			
Tel No:			
Mobile No:			
Priority:	**Within 2 Hours**	Call Origin:	**NHS24**
Received:	**24-Dec-2012 18:56**	Calltype:	**Patient Transport**
Advised:	**20:10**	Arrived PCC:	**24-Dec-2012 22:12**
Cons start:	**24-Dec-2012 22:26**	Cons End:	**24-Dec-2012 22:52**
Consulting Doctor:	**Graeme MacLeod**	Own doctor:	**[redacted] Feeney**

Reported Condition:
ABDO PAIN/GALLSTONES 2HRS SEE AV

Consultation details:

History - **RUQ pain for past 4 hrs. Pain similar to gallstone pain. Pain normally relieved by 50mg tramadol. Says has been to hospital x5 since Dx in February. Stays in Ayrshire and attending Crosshouse. In EK for xams. Also has diclofenac at home- not taken these. Takes 3x50mg Tramadol a day. c/o dysuria and vaginal d/c. Hx of asthma but no asthma symptoms. Had pain last night, abdomen swollen- normally happens when has pain. Cannot remember when had last had LMP, unsure if could be [redacted] also takes laxativ sachetsx3/day- not working.**

Examination - **Looks well BP 125/70 HR 81 T 36.4 abdo soft, tender RUQ and epigastrium BS OK. Urine- +++leucocytes BHCG negative,**

Diagnosis - **Cholecystitis/ UTI**

Treatment - **Advised needs to discuss ongoing flare ups and analgesia with own GP after xmas. Analgesia advice- increase Tramadol max 400mg/ day and take with NSAID. Advised to contact again if worsens or not resolving .**

Prescriptions:
diclofenac sodium gastro-resistant tablets 50mg take one tablet three times a day with or after food 28.00 trimethoprim tablets 200mg take one tablet every twelve hours 14.00

Followups:
Patient To Contact Surgery

Clinical Codes:
K15.. Cystitis

NHSD details:

Triage NHSD - **This call should be directed via triage telephony route.**
WORSENING: Whilst waiting for a return call, if symptoms change, or any new symptoms develop, call us back immediately.
TO BE CALLED BACK: Your call will be placed on a queue and will be prioritised and monitored. We will aim to call back within two hours.

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NHS Confidential: Personal data about a patient

NHSD Comments - **SUFFER GALLSTONES,TAKEN NORMAL TRAMADOL AND PARACETOMAL BUT NOT HELPED PAIN.ASTHMATIC.SWOLLEN ABOD.TEMP AND TIGHTNESS CHEST LAST 2HRS ((Non-Clinical User) (Glasgow))**

PATIENT RECORD OPENED TO VIEW FOR CHSL. OK FOR CS2. ((Other Clinical User) (Glasgow))

NO ANSWER. MESSAGE LEFT ON ANSWERING MACHINE TO CALLBACK IF REQ. NR1 DUE TO TIGHT CHEST IN ADD VIEW. ((Nurse Advisor) (Lanarkshire))

AGREED WITH NURSE THAT THIS CALL SHOULD HAVE AN NR1 STATUS RE THE PATIENT'S SYMPTOMS H[redacted] CLINICAL SUPPORT ((Other Clinical User) (Tayside))

NO REPLY - PT ANSWERED - STILL REQUIRES TO SPEAK TO NP - ADVISED TO KEEP LINE FREE - WORSENING GIVEN ((Non-Clinical User) (Aberdeen))

Questions -

Algorithm: ILT Assessment

Is the patient conscious and breathing (or is this an expected death call)?
--YES

Algorithm: Safety Questions Protocol - Adult

Does the patient have pain in their chest, either front or back, and is one of the following (Select one):
[X] Younger than 35 years
[ ] Age 35 years or older
[ ] No chest pain

Algorithm: Chest Pain

Select the additional marker that defines the callers complaint: (Select one)
[ ] Over 35 years
[ ] 25-35 years
[X] Under 25 years

Select the descriptor of the keyword that defines the callers complaint: (Select One)
[ ] Short of breath and with pain
[ ] Cold, clammy with pain
[X] Chest pain none of above
[ ] Cough with pain
[ ] Rib pain or pain on movement

Disposition - **Disposition CS - Priority Two**
Contact GP Practice within 4 Hours (as soon as possible)

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Page 1 of 2

NOT 4 NEW NO PATIENT Chasteau 01563 54 5511
Sean Fox + emma

NHS Lanarkshire Primary Care Operating Division OOH Call Incident Report

Call number:	29516	Receive Date:	24-Dec-2012 18:56
Patient's Name:	Georgina Smith	Gender:	F
Date of birth:	4-Dec-1991 (21 years)	Current Address:	20 Gourlay
Address:	22D Moorpark Road West		East Kilbride
			Glasgow G74 3PJ
	Stevenston KA20 3HU		
Return Contact No:			
Tel No:			
Mobile No:			
Priority:	Within 2 Hours	Call Origin:	NHS24
Received:	24-Dec-2012 18:56	Calltype:	Patient Transport
Advised:	20:10	Arrived PCC:	24-Dec-2012 22:12
Cons start:	24-Dec-2012 22:26	Cons End:	24-Dec-2012 22:52
Consulting Doctor:	Graeme MacLeod	Own doctor:	[redacted] Feeney

Reported Condition:
ABDO PAIN/GALLSTONES 2HRS SEE AV

Consultation details:

History - RUQ pain for past 4 hrs. Pain similar to gallstone pain. Pain normally relieved by 50mg tramadol. Says has been to hospital x5 since Dx in February. Stays in Ayrshire and attending Crosshouse. In EK for xams. Also has diclofenac at home- not taken these. Takes 3x50mg Tramadol a day. c/o dysuria and vaginal d/c. Hx of asthma but no asthma symptoms. Had pain last night, abdomen swollen- normally happens when has pain. Cannot remember when had last had LMP, unsure if could be pregnant. also takes laxativ sachetsx3/day- not working.

Examination - Looks well BP 125/70 HR 81 T 36.4 abdo soft, tender RUQ and epigastrium BS OK. Urine- +++leucocytes BHCG negative,

Diagnosis - Cholecystitis/ UTI

Treatment - Advised needs to discuss ongoing flare ups and analgesia with own GP after xmas. Analgesia advice- increase Tramadol max 400mg/ day and take with NSAID. Advised to contact again if worsens or not resolving .

Prescriptions:
diclofenac sodium gastro-resistant tablets 50mg take one tablet three times a day with or after food 28.00 trimethoprim tablets 200mg take one tablet every twelve hours 14.00

Followups:
Patient To Contact Surgery

Clinical Codes:
K15.. Cystitis

NHSD details:

Triage NHSD - **This call should be directed via triage telephony route.**
WORSENING: Whilst waiting for a return call, if symptoms change, or any new symptoms develop, call us back immediately.
TO BE CALLED BACK: Your call will be placed on a queue and will be prioritised and monitored. We will aim to call back within two hours.

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NHSD Comments - SUFFER GALLSTONES,TAKEN NORMAL TRAMADOL AND PARACETOMAL BUT NOT HELPED
PAIN.ASTHMATIC.SWOLLEN ABOD.TEMP AND TIGHTNESS CHEST LAST 2HRS ((Non-Clinical User) (Glasgow))

PATIENT RECORD OPENED TO VIEW FOR CHSL. OK FOR CS2. ((Other Clinical User) (Glasgow))

NO ANSWER. MESSAGE LEFT ON ANSWERING MACHINE TO CALLBACK IF REQ. NR1 DUE TO TIGHT CHEST IN ADD VIEW. ((Nurse Advisor) (Lanarkshire))

AGREED WITH NURSE THAT THIS CALL SHOULD HAVE AN NR1 STATUS RE THE PATIENT'S SYMPTOMS H[redacted] CLINICAL SUPPORT ((Other Clinical User) (Tayside))

NO REPLY - PT ANSWERED - STILL REQUIRES TO SPEAK TO NP - ADVISED TO KEEP LINE FREE - WORSENING GIVEN ((Non-Clinical User) (Aberdeen))

Questions -

Algorithm: ILT Assessment

Is the patient conscious and breathing (or is this an expected death call)?
--YES

Algorithm: Safety Questions Protocol - Adult

Does the patient have pain in their chest, either front or back, and is one of the following (Select one):
[X] Younger than 35 years
[ ] Age 35 years or older
[ ] No chest pain

Algorithm: Chest Pain

Select the additional marker that defines the callers complaint: (Select one)
[ ] Over 35 years
[ ] 25-35 years
[X] Under 25 years

Select the descriptor of the keyword that defines the callers complaint: (Select One)
[ ] Short of breath and with pain
[ ] Cold, clammy with pain
[X] Chest pain none of above
[ ] Cough with pain
[ ] Rib pain or pain on movement

Disposition - Disposition CS - Priority Two
Contact GP Practice within 4 Hours (as soon as possible)

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Page 1 of 2

NOT 4 NEW NO PATIENT Chaplaw 01563 54 5511

NHS Lanarkshire Primary Care Operating Division OOH Call Incident Report

Call number:	29516	Receive Date:	24-Dec-2012 18:56
Patient's Name:	Georgina Smith		
Date of birth:	4-Dec-1991 (21 years)	Gender:	F
Address:	22D Moorpark Road West	Current Address:	20 Gourlay East Kilbride Glasgow G74 3PJ
	Stevenston KA20 3HU		
Return Contact No:			
Tel No:			
Mobile No:			
Priority:	Within 2 Hours	Call Origin:	NHS24
Received:	24-Dec-2012 18:56	Calltype:	Patient Transport
Advised:	20:10	Arrived PCC:	24-Dec-2012 22:12
Cons start:	24-Dec-2012 22:26	Cons End:	24-Dec-2012 22:52
Consulting Doctor:	Graeme MacLeod	Own doctor:	[redacted] Feeney

Reported Condition:
ABDO PAIN/GALLSTONES 2HRS SEE AV

Consultation details:

History - RUQ pain for past 4 hrs. Pain similar to gallstone pain. Pain normally relieved by 50mg tramadol. Says has been to hospital x5 since Dx in February. Stays in Ayrshire and attending Crosshouse. In EK for xams. Also has diclofenac at home- not taken these. Takes 3x50mg Tramadol a day. c/o dysuria and vaginal d/c. Hx of asthma but no asthma symptoms. Had pain last night, abdomen swollen- normally happens when has pain. Cannot remember when had last had LMP, unsure if could be pregnant. also takes laxativ sachetsx3/day- not working.

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Diagnosis - Cholecystitis/ UTI

Treatment - Advised needs to discuss ongoing flare ups and analgesia with own GP after xmas. Analgesia advice- increase Tramadol max 400mg/ day and take with NSAID. Advised to contact again if worsens or not resolving .

Prescriptions:
diclofenac sodium gastro-resistant tablets 50mg take one tablet three times a day with or after food 28.00 trimethoprim tablets 200mg take one tablet every twelve hours 14.00

Followups:
Patient To Contact Surgery

Clinical Codes:
K15.. Cystitis

NHSD details:

Triage NHSD - **This call should be directed via triage telephony route.**
WORSENING: Whilst waiting for a return call, if symptoms change, or any new symptoms develop, call us back immediately.
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NHSD Comments - SUFFER GALLSTONES,TAKEN NORMAL TRAMADOL AND PARACETOMAL BUT NOT HELPED
PAIN.ASTHMATIC.SWOLLEN ABOD.TEMP AND TIGHTNESS CHEST LAST 2HRS ((Non-Clinical User) (Glasgow))

PATIENT RECORD OPENED TO VIEW FOR CHSL. OK FOR CS2. ((Other Clinical User) (Glasgow))

NO ANSWER. MESSAGE LEFT ON ANSWERING MACHINE TO CALLBACK IF REQ. NR1 DUE TO TIGHT CHEST IN ADD VIEW. ((Nurse Advisor) (Lanarkshire))

AGREED WITH NURSE THAT THIS CALL SHOULD HAVE AN NR1 STATUS RE THE PATIENT'S SYMPTOMS H[redacted] CLINICAL SUPPORT ((Other Clinical User) (Tayside))

NO REPLY - PT ANSWERED - STILL REQUIRES TO SPEAK TO NP - ADVISED TO KEEP LINE FREE - WORSENING GIVEN ((Non-Clinical User) (Aberdeen))

Questions -

Algorithm: ILT Assessment

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[X] Under 25 years

Select the descriptor of the keyword that defines the callers complaint: (Select One)
[ ] Short of breath and with pain
[ ] Cold, clammy with pain
[X] Chest pain none of above
[ ] Cough with pain
[ ] Rib pain or pain on movement

Disposition - Disposition CS - Priority Two
Contact GP Practice within 4 Hours (as soon as possible)

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NHS
Ayrshire
& [redacted]

MR [redacted]
SURGICAL DEPARTMENT
CROSSHOUSE HOSPITAL
KILMARNOCK
KA2 0BE

Mrs Georgina Smith
22D Moorpark Road West
STEVENSTON
KA20 3HU

Date	03.01.13
Our Ref	MO/LG/
CHI	0412913127
Enquiries to	Angela McConnell
Extension	27985
Direct line	01563 827985
Fax	01563 827979
E-mail	Angela.mcconnell@aaaht.scot.nhs.uk

Dear Mrs Smith

Further to your attendance at the x-ray department, I now have the results of your ultrasound. I am pleased to report that this was satisfactory.

No further follow up is required.

Many thanks

Yours sincerely

pp L Gracie (Sec)

MR M [redacted]
CONSULTANT SURGEON

c.c. Dr [redacted] Main Street, Stevenston, KA20 3AB

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www.nhsayrshireandarran.com

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NHS
Ayrshire
& [redacted]

MR [redacted]
SURGICAL DEPARTMENT
CROSSHOUSE HOSPITAL
KILMARNOCK
KA2 0BE

Mrs Georgina Smith
22D Moorpark Road West
STEVENSTON
KA20 3HU

Date	03.01.13
Our Ref	MO/LG/
CHI	0412913127
Enquiries to	Angela McConnell
Extension	27985
Direct line	01563 827985
Fax	01563 827979
E-mail	Angela.mcconnell@aaaht.scot.nhs.uk

Dear Mrs Smith

Further to your attendance at the x-ray department, I now have the results of your ultrasound. I am pleased to report that this was satisfactory.

No further follow up is required.

Many thanks

Yours sincerely

pp L Gracie (Sec)

MR M [redacted]
CONSULTANT SURGEON

c.c. Dr [redacted] Main Street, Stevenston, KA20 3AB

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A8070 J.A. Pennycook

NHS Lanarkshire Primary Care Operating Division OOH Call Incident Report

Call number:	**29516**	Receive Date:	**24-Dec-2012 18:56**
Patient's Name:	**Georgina Smith**		
Date of birth:	**4-Dec-1991 (21 years)**	Gender:	**F**
Address:	**22D Moorpark Road West**	Current Address:	**20 Gourlay East Kilbride**
	Stevenston KA20 3HU		**Glasgow G74 3PJ**
Return Contact No:			
Tel No:			
Mobile No:			
Priority:	**Within 2 Hours**	Call Origin:	**NHS24**
Received:	**24-Dec-2012 18:56**	Calltype:	**Patient Transport**
Advised:	**20:10**	Arrived PCC:	**24-Dec-2012 22:12**
Cons start:	**24-Dec-2012 22:26**	Cons End:	**24-Dec-2012 22:52**
Consulting Doctor:	**Graeme MacLeod**	Own doctor:	**[redacted] Feeney**

(85)

Reported Condition:
ABDO PAIN/GALLSTONES 2HRS SEE AV

Consultation details:

History - **RUQ pain for past 4 hrs. Pain similar to gallstone pain. Pain normally relieved by 50mg tramadol. Says has been to hospital x5 since Dx in February. Stays in Ayrshire and attending Crosshouse. In EK for xams. Also has diclofenac at home- not taken these. Takes 3x50mg Tramadol a day. c/o dysuria and vaginal d/c. Hx of asthma but no asthma symptoms. Had pain last night, abdomen swollen- normally happens when has pain. Cannot remember when had last had LMP, unsure if could be [redacted] also takes laxativ sachetsx3/day- not working.**

Examination - **Looks well BP 125/70 HR 81 T 36.4 abdo soft, tender RUQ and epigastrium BS OK. Urine- +++leucocytes BHCG negative,**

Diagnosis - **Cholecystitis/ UTI**

Treatment - **Advised needs to discuss ongoing flare ups and analgesia with own GP after xmas. Analgesia advice- increase Tramadol max 400mg/ day and take with NSAID. Advised to contact again if worsens or not resolving .**

Prescriptions:
diclofenac sodium gastro-resistant tablets 50mg take one tablet three times a day with or after food 28.00 trimethoprim tablets 200mg take one tablet every twelve hours 14.00

Followups:
Patient To Contact Surgery

Clinical Codes:
K15.. Cystitis

NHSD details:

Triage NHSD - **This call should be directed via triage telephony route.**
WORSENING: Whilst waiting for a return call, if symptoms change, or any new symptoms develop, call us back immediately.
TO BE CALLED BACK: Your call will be placed on a queue and will be prioritised and monitored. We will aim to call back within two hours.

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NHSD Comments - **SUFFER GALLSTONES,TAKEN NORMAL TRAMADOL AND PARACETOMAL BUT NOT HELPED PAIN.ASTHMATIC.SWOLLEN ABOD.TEMP AND TIGHTNESS CHEST LAST 2HRS ((Non-Clinical User) (Glasgow))**

PATIENT RECORD OPENED TO VIEW FOR CHSL. OK FOR CS2. ((Other Clinical User) (Glasgow))

NO ANSWER. MESSAGE LEFT ON ANSWERING MACHINE TO CALLBACK IF REQ. NR1 DUE TO TIGHT CHEST IN ADD VIEW. ((Nurse Advisor) (Lanarkshire))

AGREED WITH NURSE THAT THIS CALL SHOULD HAVE AN NR1 STATUS RE THE PATIENT'S SYMPTOMS H[redacted] CLINICAL SUPPORT ((Other Clinical User) (Tayside))

NO REPLY - PT ANSWERED - STILL REQUIRES TO SPEAK TO NP - ADVISED TO KEEP LINE FREE - WORSENING GIVEN ((Non-Clinical User) (Aberdeen))

Questions -

Algorithm: ILT Assessment

Is the patient conscious and breathing (or is this an expected death call)?
--YES

Algorithm: Safety Questions Protocol - Adult

Does the patient have pain in their chest, either front or back, and is one of the following (Select one):
[X] Younger than 35 years
[ ] Age 35 years or older
[ ] No chest pain

Algorithm: Chest Pain

Select the additional marker that defines the callers complaint: (Select one)
[ ] Over 35 years
[ ] 25-35 years
[X] Under 25 years

Select the descriptor of the keyword that defines the callers complaint: (Select One)
[ ] Short of breath and with pain
[ ] Cold, clammy with pain
[X] Chest pain none of above
[ ] Cough with pain
[ ] Rib pain or pain on movement

Disposition CS - Priority Two

Disposition - **Contact GP Practice within 4 Hours (as soon as possible)**

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NHS Confidential: [redacted]

Patient : Georgina Smith
(Gender: Female) (DOB: 04/12/1991) (Age: 21 years) (CHI: 0412913127)

Case No 48561 **Case Date** 06/01/2013 19:00
Own Dr Pennycook, [redacted]

Emergency Care Summary viewed on case

Current Address
22D Moorpark Road West

Stevenston
KA20 3HU
Current Phone 07774 733501

Home Address (If Different)

Home Phone (If Different) 01294 537128

Case Type Doctor Advice
Priority On Reception Within 2 Hours

NHS 24 Advice by (Nurse Advisor) (Tayside) **Triage Start** 19:02
Triage End 19:33

Clinical summary created by: (Nurse Advisor) (Tayside) [06/01/2013 19:33:00]
ABDO PAIN FOR 2 HRS AND LOWER, RIGHT, INTERMITTENT PAIN, TENDER AND SWELLING, FEVER, GREEN BOWEL MOVEMENT, NO ANALGESIA, AWAITING ON HOSPITAL APPOINTMENT FOR GALLSTONE REMOVAL, ADVISED ATTEND PCEC, NO TRANSPORT, NO MONEY AND NO FAMILY OR FRIENDS WHO CAN TAKE, PCEC HAS NO TRANSPORT AVAILABLE, SPEAK TO DR 2 RHS (DISPUTED OUTCOME)

Case Questions

Pocked Aremote Consult by: **Consult Start**
Start Type **End Type** **Consult End**

Adastra Consult by Greenfield, Maureen **Consult Start** 20:05
Start Type Doctor Advice [redacted] **Type** Doctor Advice **Consult End** 20:14

History
passing green stool has haemorrhoids feeling nauseated no vomiting shooting pains right side under ribs colic going on 3 hours now has tramadol at present 50mg tid has gallstones at present awaiting surgery

Examination

Diagnosis
possible exac gallstones

Treatment
advice small sips water no [redacted] food paracetamol now and 2 hrs can take another tramadol if vomits or pain returns worse call back

Clinical Code(s)
R090. [D]Abdominal pain

Prescriptions

Informational Outcome(s)
No Follow-Up Required

Report Statistics: Report produced by Adastra Version 3 - 07/01/2013 04:03:43

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Filename: igprda202606181529160.pdf
Extension:.tif
Pages:

NHS Confidential: [redacted]

Patient : Georgina Smith
(Gender: Female) (DOB: 04/12/1991) (Age: 21 years) (CHI: 0412913127)

Case No 48561 **Case Date** 06/01/2013 19:00
Own Dr Pennycook, [redacted]

Emergency Care Summary viewed on case

Current Address
22D Moorpark Road West

Stevenston
KA20 3HU
Current Phone 07774 733501

Home Address (If Different)

Home Phone (If Different) 01294 537128

Case Type Doctor Advice
Priority On Reception Within 2 Hours

NHS 24 Advice by (Nurse Advisor) (Tayside) **Triage Start** 19:02
Triage End 19:33

Clinical summary created by: (Nurse Advisor) (Tayside) [06/01/2013 19:33:00]
ABDO PAIN FOR 2 HRS AND LOWER, RIGHT, INTERMITTENT PAIN, TENDER AND SWELLING, FEVER, GREEN BOWEL MOVEMENT, NO ANALGESIA, AWAITING ON HOSPITAL APPOINTMENT FOR GALLSTONE REMOVAL, ADVISED ATTEND PCEC, NO TRANSPORT, NO MONEY AND NO FAMILY OR FRIENDS WHO CAN TAKE, PCEC HAS NO TRANSPORT AVAILABLE, SPEAK TO DR 2 RHS (DISPUTED OUTCOME)

Case Questions

Pocked Aremote Consult by: **Consult Start**
Start Type **End Type** **Consult End**

Adastra Consult by Greenfield, Maureen **Consult Start** 20:05
Start Type Doctor Advice [redacted] **Type** Doctor Advice **Consult End** 20:14

History
passing green stool has haemorrhoids feeling nauseated no vomiting shooting pains right side under ribs colic going on 3 hours now has tramadol at present 50mg tid has gallstones at present awaiting surgery

Examination

Diagnosis
possible exac gallstones

Treatment
advice small sips water no [redacted] food paracetamol now and 2 hrs can take another tramadol if vomits or pain returns worse call back

Clinical Code(s)
R090. [D]Abdominal pain

Prescriptions

Informational Outcome(s)
No Follow-Up Required

Report Statistics: Report produced by Adastra Version 3 - 07/01/2013 04:03:43

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Filename: igprda202606181529150.pdf
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Patient : Georgina Smith
(Gender: Female) (DOB: 04/12/1991) (Age: 21 years) (CHI: 0412913127)

Case No 50968 **Case Date** 17/01/2013 20:19
Own Dr Pennycook, [redacted]

Current Address
22D Moorpark Road West

Stevenston
KA20 3HU
Current Phone 07774 733501

Home Address (If Different)

Home Phone (If Different) 01294 537128

Case Type NHS24 Advice
Priority On Reception NHS24 Advised

NHS 24 Advice by (Nurse Advisor) (Edinburgh)
Clinical summary created by: (Nurse Advisor) (Edinburgh) [17/01/2013 20:42:13]
CHEST PAIN FOR 5 MIN AND SHOOTING PAIN TO RIGHT SIDE OF CHEST ACCOMAPNIED WITH RIGHT SHOULDER PAIN. ALSO PAIN IN LOWER BACK. FEVER, LIGHTHEADINESS, VOMITED CLEAR FLUID TWICE EARLIER TODAY. 999 AMBULANCE

Triage Start 20:20
Triage End 20:42

Case Questions

Pocked Aremote Consult by:
Start Type **End Type**
Consult Start
Consult End

Adastra Consult by
Start Type **End Type**
Consult Start
Consult End

History

Examination

Diagnosis

Treatment

Clinical Code(s)

Prescriptions

Informational Outcome(s)

Report Statistics: Report produced by Adastra Version 3 - 18/01/2013 04:02:16

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Dr D Chung Dr J [redacted] Dr M Dracgebo Dr J Mulligan
Dr J Mardon Mr J [redacted] Dr C McGuffie Dr A Lannigan Dr Y Moulds

Accident and Emergency

Crosshouse Hospital
Kilmarnock KA2 0BE

Phone: 01563 577757/8
Fax: 01563 572009

Dr. [redacted] JA PENNYCOOK
STEVENSTON GROUP PRACTICE
STEVENSTON HEALTH CENTRE
MAIN STREET
STEVENSTON
KA20 3AB

Georgina Smith
22D MOORPARK ROAD WEST
STEVENSTON, KA20 3HU

DOB: 04/12/1991
A/E No: XH-13-003222
CHI No: 0412913127

Date and Time of Attendance: 17 Jan 2013 21:28
Total A&E Attendances = 14 , attendances in last year = 6

Diagnosis Gall stone pain

Treatment Assessed and referred, Analgesia, Fluid resuscitation

Drugs:

Investigations

Follow up: Admitted

4a

Additional Information: RIght upper quadrant pain, nausea and right shoulder pain, known gallstones. Tender RUQ, referred to surgeons, ?gallstone pain.

[redacted] Mccusker
A&E SHO

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

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NHS Confidential: Personal data about a patient

Patient : Georgina Smith
(Gender: Female) (DOB: 04/12/1991) (Age: 21 years) (CHI: 0412913127)

Case No 50968 **Case Date** 17/01/2013 20:19
Own Dr Pennycook, [redacted]

Current Address
22D Moorpark Road West

Stevenston
KA20 3HU
Current Phone 07774 733501

Home Address (If Different)

Home Phone (If Different) 01294 537128

Case Type NHS24 Advice
Priority On Reception NHS24 Advised

NHS 24 Advice by (Nurse Advisor) (Edinburgh)
Clinical summary created by: (Nurse Advisor) (Edinburgh) [17/01/2013 20:42:13]
CHEST PAIN FOR 5 MIN AND SHOOTING PAIN TO RIGHT SIDE OF CHEST ACCOMAPNIED WITH RIGHT SHOULDER PAIN. ALSO PAIN IN LOWER BACK. FEVER, LIGHTHEADINESS, VOMITED CLEAR FLUID TWICE EARLIER TODAY. 999 AMBULANCE

Triage Start 20:20
Triage End 20:42

Case Questions

Pocked Aremote Consult by:
Start Type **End Type**
Consult Start
Consult End

Adastra Consult by
Start Type **End Type**
Consult Start
Consult End

History

Examination

Diagnosis

Treatment

Clinical Code(s)

Prescriptions

Informational Outcome(s)

Report Statistics: Report produced by Adastra Version 3 - 18/01/2013 04:02:16

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Dr D Chung Dr J [redacted] Dr M Dracgebo Dr J Mulligan
Dr J Mardon Mr J [redacted] Dr C McGuffie Dr A Lannigan Dr Y Moulds

Accident and Emergency

Crosshouse Hospital
Kilmarnock KA2 0BE

Phone: 01563 577757/8
Fax: 01563 572009

Dr. [redacted] JA PENNYCOOK
STEVENSTON GROUP PRACTICE
STEVENSTON HEALTH CENTRE
MAIN STREET
STEVENSTON
KA20 3AB

Georgina Smith
22D MOORPARK ROAD WEST
STEVENSTON, KA20 3HU

DOB: 04/12/1991
A/E No: XH-13-003222
CHI No: 0412913127

Date and Time of Attendance: 17 Jan 2013 21:28
Total A&E Attendances = 14 , attendances in last year = 6

Diagnosis Gall stone pain

Treatment Assessed and referred, Analgesia, Fluid resuscitation

Drugs:

Investigations

Follow up: Admitted

4a

Additional Information: RIght upper quadrant pain, nausea and right shoulder pain, known gallstones. Tender RUQ, referred to surgeons, ?gallstone pain.

[redacted] Mccusker
A&E SHO

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

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NHS
Ayrshire
&[redacted]

MR [redacted] – SURGICAL CLINIC
SURGICAL DEPARTMENT
CROSSHOUSE HOSPITAL
KILMARNOCK
KA2 0BE

Dr [redacted]
Health Centre
Main Street
STEVENSTON
KA20 3AB

Date dictated	23.01.13
Date typed	02.03.13
Our Ref	MO/LG/
CHI	0412913127
Enquiries to	Angela McConnell
Extension	27985
Direct line	01563 827985
Fax	01563 827979
E-mail	Angela.mcconnell@aaaht.scot.nhs.uk

Dear Dr [redacted]

GEORGINA SMITH 22D MOORPARK ROAD WEST STEVENSTON DOB 04.12.91

I reviewed this [redacted] lady at the clinic today. She said she had been bothered with recurrent episodes of upper abdominal pain and she was admitted under my colleague Miss Sharp recently with a diagnosis of biliary colic. She was discharged home.

I am not entirely sure if her symptoms are all [redacted] to her gallbladder. We had a lengthy discussion today and I agreed to put her name on my waiting list for laparoscopic cholecystectomy. I have clearly stated to her that is not going to solve all her symptoms but the pain she is getting from her gallbladder will hopefully resolve after the cholecystectomy but there is no guarantee. She is happy to accept that and I have sent her for pre-op assessment and I have put her name on my waiting list for laparoscopic cholecystectomy.

Many thanks

Yours sincerely

MR M [redacted]
CONSULTANT SURGEON

INVESTING IN VOLUNTEERS

www.nhsayrshireandarran.com

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NHS Confidential: Personal data about a patient

NHS
Ayrshire
&[redacted]

MR [redacted] – SURGICAL CLINIC
SURGICAL DEPARTMENT
CROSSHOUSE HOSPITAL
KILMARNOCK
KA2 0BE

Dr [redacted]
Health Centre
Main Street
STEVENSTON
KA20 3AB

Date dictated	23.01.13
Date typed	02.03.13
Our Ref	MO/LG/
CHI	0412913127
Enquiries to	Angela McConnell
Extension	27985
Direct line	01563 827985
Fax	01563 827979
E-mail	Angela.mcconnell@aaaht.scot.nhs.uk

Dear Dr [redacted]

GEORGINA SMITH 22D MOORPARK ROAD WEST STEVENSTON DOB 04.12.91

I reviewed this [redacted] lady at the clinic today. She said she had been bothered with recurrent episodes of upper abdominal pain and she was admitted under my colleague Miss Sharp recently with a diagnosis of biliary colic. She was discharged home.

I am not entirely sure if her symptoms are all [redacted] to her gallbladder. We had a lengthy discussion today and I agreed to put her name on my waiting list for laparoscopic cholecystectomy. I have clearly stated to her that is not going to solve all her symptoms but the pain she is getting from her gallbladder will hopefully resolve after the cholecystectomy but there is no guarantee. She is happy to accept that and I have sent her for pre-op assessment and I have put her name on my waiting list for laparoscopic cholecystectomy.

Many thanks

Yours sincerely

MR M [redacted]
CONSULTANT SURGEON

INVESTING IN VOLUNTEERS

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PATIENT SERVICES
Department of General Surgery
Miss C Sharp, Consultant Surgeon
Direct Line: ☎ **01563 825211**
Fax No: 🖷 **01563 827979**
Secretary: Miss A Neilson
Email: [redacted]neilson@aaaht.scot.nhs.uk

University Hospital Crosshouse
Crosshouse
Kilmarnock KA2 0BE
Telephone: 01563 521133

www.show.scot.nhs.uk/aaaht

Our ref: CS/AN/XH- 0412913127

Dictated: 31/01/2013
Typed: 12/01/2013

Discharge Letter

Dr [redacted]
Stevenston Group Practice
The Health Centre
20 Main Street
STEVENSTON
KA20 3AA

Dear Dr [redacted]

GEORGINA SMITH, 22D MOORPARK ROAD WEST, STEVENSTON, KA20 3HU.
DOB: 04/12/1991

Admitted: 17/01/2013
Discharged: 22/01/2013

Diagnosis: Biliary colic
Pelvic pain

Procedure: Ultrasound scan of pelvis

Follow-up: As per Mr [redacted]

This lady, who attends Mr [redacted] clinic and who has had various investigations by him, was admitted with right upper quadrant pain. She is known to have gallstones and Mr [redacted] is considering removing her gallbladder. She was due to attend his clinic the day before admission but was unable to do so as her cat was having kittens. Throughout her stay he appeared well and her bloods were within normal limits. She also complained of some perineal and pelvic pain and was reviewed by the Gynaecologist who thought she may have a candida infection, swans have been taken and the results are awaited. Bloods were also taking by them as she had complained of amenorrhea and again these results will be followed up by them as necessary. Ultrasound scan of her pelvis showed nothing untoward. She was discharged home and I believe has been in contact with Mr [redacted] Secretary with regard to follow-up.

Yours sincerely

Miss [redacted] Sharp MB ChB, MSc, FRCS
CONSULTANT SURGEON
UPPER GI, BARIATRIC & GENERAL SURGERY
GMC: 4302672

Cc: Mr [redacted] Consultant Surgeon, Level 3 West, XHH.

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PATIENT SERVICES
Department of General Surgery
Miss C Sharp, Consultant Surgeon
Direct Line: ☎ **01563 825211**
Fax No: 🖷 **01563 827979**
Secretary: Miss A Neilson
Email: [redacted]neilson@aaaht.scot.nhs.uk

University Hospital Crosshouse
Crosshouse
Kilmarnock KA2 0BE
Telephone: 01563 521133

www.show.scot.nhs.uk/aaaht

Our ref: CS/AN/XH- 0412913127

Dictated: 31/01/2013
Typed: 12/01/2013

Discharge Letter

Dr [redacted]
Stevenston Group Practice
The Health Centre
20 Main Street
STEVENSTON
KA20 3AA

Dear Dr [redacted]

GEORGINA SMITH, 22D MOORPARK ROAD WEST, STEVENSTON, KA20 3HU.
DOB: 04/12/1991

Admitted: 17/01/2013
Discharged: 22/01/2013

Diagnosis: Biliary colic
Pelvic pain

Procedure: Ultrasound scan of pelvis

Follow-up: As per Mr [redacted]

This lady, who attends Mr [redacted] clinic and who has had various investigations by him, was admitted with right upper quadrant pain. She is known to have gallstones and Mr [redacted] is considering removing her gallbladder. She was due to attend his clinic the day before admission but was unable to do so as her cat was having kittens. Throughout her stay he appeared well and her bloods were within normal limits. She also complained of some perineal and pelvic pain and was reviewed by the Gynaecologist who thought she may have a candida infection, swans have been taken and the results are awaited. Bloods were also taking by them as she had complained of amenorrhea and again these results will be followed up by them as necessary. Ultrasound scan of her pelvis showed nothing untoward. She was discharged home and I believe has been in contact with Mr [redacted] Secretary with regard to follow-up.

Yours sincerely

Miss [redacted] Sharp MB ChB, MSc, FRCS
CONSULTANT SURGEON
UPPER GI, BARIATRIC & GENERAL SURGERY
GMC: 4302672

Cc: Mr [redacted] Consultant Surgeon, Level 3 West, XHH.

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NHS Confidential: Personal data about a patient

Patient : Georgina Smith
(Gender: Female) (DOB: 04/ 12/ 1991) (Age: 21 years) (CHI : 0412913127)

Case No 62883
Own Dr Pennycook, [redacted]
Case Date 01/03/2013 20:11

Emergency Care Summary viewed on case

Current Address
20 Wheatley Road

Saltcoats
KA21 6ET
Current Phone 07774 733501

Home Address (If Different)
22D Moorpark Road West

Stevenston
KA20 3HU
Home Phone (If Different) 01294 537128

Case Type Doctor Advice
Priority On Reception Within 1 Hour

NHS 24 Advice by (Nurse Advisor) (Glasgow)
Triage Start 20:26
Triage End 20:33

Clinical summary created by: (Nurse Advisor) (Glasgow) [01/03/2013 20:30:55]
UPPER R QUADRANT PAIN FOR 1/7 AND PAIN RADIATING THROUGH TO BACK. HAS EASED OVER LAST 30 MINS. STILL PAINFUL WHEN WALKING. TRAMADOL TAKEN 1 HR AGO, 8TH TODAY WITH OTHER PRESCRIBED ANALGESIA. C/O INCREASED ITCH FROM WIDESPREAD SCABIES , BREAKING SKIN WITH SCRATCHING. CREAM PRESCRIBED BY GP YEST- WORSE SINCE APPLICATION. ADVISED TO ATTEND PCEC. NO TRANSPORT. SPEAK TO DR WITHIN 1 HR PLEASE.
NO TRANSPORT

Case Questions

Pocked Aremote Consult by:
Start Type
End Type
Consult Start
Consult End

Adastra Consult by Freestone, [redacted] (Mauchline)
Start Type Doctor Advice
End Type Doctor Advice
Consult Start 21:01
Consult End 21:05

History
Known gallstones - awaiting lap chol. Pain is easing with 8th tramadol of today. Has three attacks daily. Takes tramadol for this. Itchy due to scabies - had one treatment - sounds like she needs another treatment.

Examination

Diagnosis

Treatment

Clinical Code(s)
J6z.. Liver/biliary/pancreas+ GIT NOS

Prescriptions

Informational Outcome(s)
Patient Told To Contact GP -

Report Statistics: Report produced by Adastra Version 3 - 02/03/2013 04:01:38

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NHS Confidential: Personal data about a patient

Patient : Georgina Smith
(Gender: Female) (DOB: 04/ 12/ 1991) (Age: 21 years) (CHI : 0412913127)

Case No 62883
Own Dr Pennycook, [redacted]
Case Date 01/03/2013 20:11

Emergency Care Summary viewed on case

Current Address
20 Wheatley Road

Saltcoats
KA21 6ET
Current Phone 07774 733501

Home Address (If Different)
22D Moorpark Road West

Stevenston
KA20 3HU
Home Phone (If Different) 01294 537128

Case Type Doctor Advice
Priority On Reception Within 1 Hour

NHS 24 Advice by (Nurse Advisor) (Glasgow)
Triage Start 20:26
Triage End 20:33

Clinical summary created by: (Nurse Advisor) (Glasgow) [01/03/2013 20:30:55]
UPPER R QUADRANT PAIN FOR 1/7 AND PAIN RADIATING THROUGH TO BACK. HAS EASED OVER LAST 30 MINS. STILL PAINFUL WHEN WALKING. TRAMADOL TAKEN 1 HR AGO, 8TH TODAY WITH OTHER PRESCRIBED ANALGESIA. C/O INCREASED ITCH FROM WIDESPREAD SCABIES , BREAKING SKIN WITH SCRATCHING. CREAM PRESCRIBED BY GP YEST- WORSE SINCE APPLICATION. ADVISED TO ATTEND PCEC. NO TRANSPORT. SPEAK TO DR WITHIN 1 HR PLEASE.
NO TRANSPORT

Case Questions

Pocked Aremote Consult by:
Start Type
End Type
Consult Start
Consult End

Adastra Consult by Freestone, [redacted] (Mauchline)
Start Type Doctor Advice
End Type Doctor Advice
Consult Start 21:01
Consult End 21:05

History
Known gallstones - awaiting lap chol. Pain is easing with 8th tramadol of today. Has three attacks daily. Takes tramadol for this. Itchy due to scabies - had one treatment - sounds like she needs another treatment.

Examination

Diagnosis

Treatment

Clinical Code(s)
J6z.. Liver/biliary/pancreas+ GIT NOS

Prescriptions

Informational Outcome(s)
Patient Told To Contact GP -

Report Statistics: Report produced by Adastra Version 3 - 02/03/2013 04:01:38

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Pages:

NHS Confidential: Personal data about a patient

Patient : Georgina Smith
(Gender: Female) (DOB: 04/12/1991) (Age: 21 years) (CHI: 0412913127)

Case No 63518 **Case Date** 02/03/2013 00:14
Own Dr Pennycook, [redacted]
Emergency Care Summary viewed on case

Current Address
54 Wheatley Road

Saltcoats
KA21 6ET
Current Phone 07774 733501

Home Address (If Different)
22D Moorpark Road West

Stevenston
KA20 3HU
Home Phone (If Different) 01294 537128

Case Type Home Visit
Priority On Reception Within 2 Hours

NHS 24 Advice by (Nurse Advisor) (Glasgow) **Triage Start** 19:27
Triage End 23:35
Clinical summary created by: (Nurse Advisor) (Glasgow) [02/03/2013 23:35:22]
ABDO PAIN FOR FEW HRS AND TAKEN MAX ANALGESIA. HAS GALLSTONES, REDUCED ORAL INTAKE THOUGH PASSING URINE. NOW RAN OUT TRAMADOL, PARACETAMOL, ONLY 2 DF118 LEFT. PAINFUL LUMP ON LEG. ADVISED TO DRAW AROUND LUMP TO MONITOR SIZE.NO FEVER. WORRIED ABOUT MEDICATION, SPEAK TO DR

Case Questions

Pocked Aremote Consult by: **Consult Start**
Start Type **End Type** **Consult End**

Adastra Consult by Hay, [redacted] (Supplementary) **Consult Start** 00:12
Start Type Doctor Advice **End Type** Home Visit **Consult End** 00:13
History
biliary colic over last few days

known gallstones
Examination
phonecall

Diagnosis
biliary colic not responding to present analgesia
Treatment
needs hospital admission
Clinical Code(s)
J6422 Biliary Colic
Prescriptions

Adastra Consult by Hay, [redacted] (Supplementary) **Consult Start** 01:30
Start Type Home Visit **End Type** Home Visit **Consult End** 01:37
History
epigastric pain

Report Statistics: Report produced by Adastra Version 3 - 03/03/2013 04:02:57

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Patient : Georgina Smith

(Gender: Female) (DOB: 04/12/1991) (Age: 21 years) (CHI: 0412913127)

colic in nature
nausea has not eaten 2 days
known gall stones
awaiting removal
400mg tramadol not alleviating pain

Examination
temp 37.2
sat98
pulse 100
guarding right upper qaudrant

Diagnosis
cholecystitis/pancreatitis

Treatment
refer crosshouse

Clinical Code(s)
J6422 Biliary Colic

Prescriptions

Informational Outcome(s)
Refer To Hospital -

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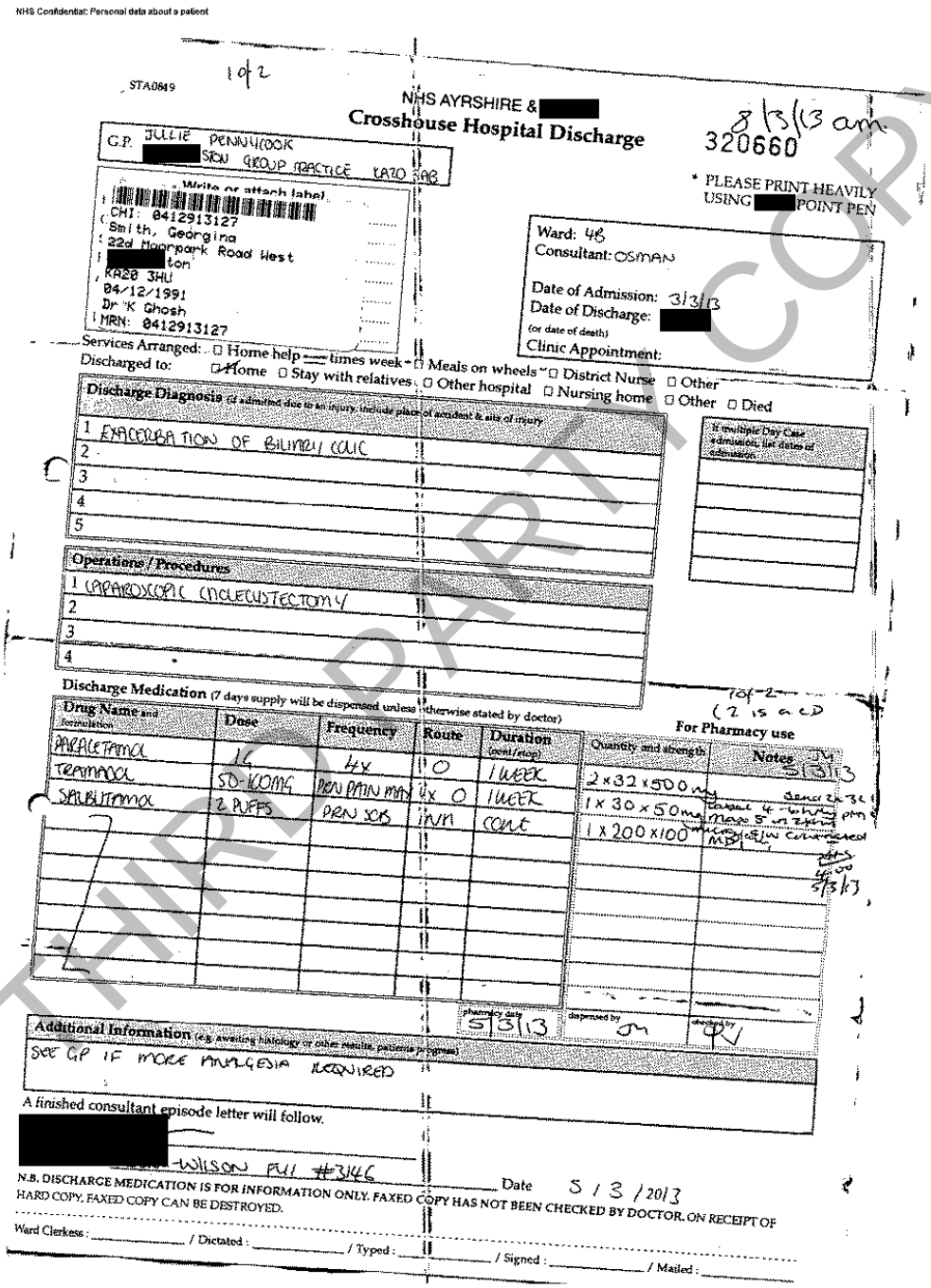

NHS Confidential: Personal data about a patient

1 of 2

STA0849

NHS AYRSHIRE & [redacted]

Crosshouse Hospital Discharge

8/3/13 am.

320660

G.P. JULIE PENNYCOOK [redacted] SOW GROUP PRACTICE KA20 3AB

* PLEASE PRINT HEAVILY USING [redacted] POINT PEN

Write or attach label

CHI: 0412913127
Smith, Georgina
22d Moorpark Road West
[redacted]ton
KA28 3HU
04/12/1991
Dr K Ghosh
MRN: 0412913127

Ward: 48
Consultant: OSMAN

Date of Admission: 3/3/13
Date of Discharge: [redacted]
(or date of death)
Clinic Appointment:

Services Arranged: ☐ Home help — times week ☐ Meals on wheels ☐ District Nurse ☐ Other

Discharged to: ☐ Home ☐ Stay with relatives ☐ Other hospital ☐ Nursing home ☐ Other ☐ Died

Discharge Diagnosis (if admitted due to an injury, include place of accident & site of injury)

1 EXACERBATION OF BILIARY COLIC
2
3
4
5

If multiple Day Case admission, list dates of admission

Operations / Procedures

1 LAPAROSCOPIC CHOLECYSTECTOMY
2
3
4

Discharge Medication (7 days supply will be dispensed unless otherwise stated by doctor)

1 of 2
(2 is a CD)

For Pharmacy use

Drug Name and formulation	Dose	Frequency	Route	Duration (cont/stop)	Quantity and strength	Notes
PARACETAMOL	1G	4X	O	1/WEEK	2 x 32 x 500 mg	5/3/13
TRAMADOL	50-100MG	PRN PAIN MAX 4X	O	1/WEEK	1 x 30 x 50mg	Issue 4 weeks prn Max 5 in 24hrs
SALBUTAMOL	2 PUFFS	PRN SOB	INH	CONT	1 x 200 x 100	MBJ 5/3/13

pharmacy date 5/3/13 dispensed by JM checked by KV

Additional Information (e.g. awaiting histology or other results, patients pregnant)

SEE GP IF MORE ANALGESIA REQUIRED

A finished consultant episode letter will follow.

[redacted] WILSON FY1 #3146 Date 5/3/2013

N.B. DISCHARGE MEDICATION IS FOR INFORMATION ONLY. FAXED COPY HAS NOT BEEN CHECKED BY DOCTOR. ON RECEIPT OF HARD COPY, FAXED COPY CAN BE DESTROYED.

Ward Clerkess: _____ / Dictated: _____ / Typed: _____ / Signed: _____ / Mailed: _____

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Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

Patient : Georgina Smith
(Gender: Female) (DOB: 04/12/1991) (Age: 21 years) (CHI: 0412913127)

Case No 63518 **Case Date** 02/03/2013 00:14
Own Dr Pennycook, [redacted]
Emergency Care Summary viewed on case

Current Address
54 Wheatley Road

Saltcoats
KA21 6ET
Current Phone 07774 733501

Home Address (If Different)
22D Moorpark Road West

Stevenston
KA20 3HU
Home Phone (If Different) 01294 537128

Case Type Home Visit
Priority On Reception Within 2 Hours

NHS 24 Advice by (Nurse Advisor) (Glasgow) **Triage Start** 19:27
Clinical summary created by: (Nurse Advisor) (Glasgow) [02/03/2013 23:35:22] **Triage End** 23:35
ABDO PAIN FOR FEW HRS AND TAKEN MAX ANALGESIA. HAS GALLSTONES, REDUCED ORAL INTAKE THOUGH PASSING URINE. NOW RAN OUT TRAMADOL, PARACETAMOL, ONLY 2 DF118 LEFT. PAINFUL LUMP ON LEG. ADVISED TO DRAW AROUND LUMP TO MONITOR SIZE.NO FEVER. WORRIED ABOUT MEDICATION, SPEAK TO DR

Case Questions

Pocked Aremote Consult by: **Consult Start**
Start Type **End Type** **Consult End**

Adastra Consult by Hay, [redacted] (Supplementary) **Consult Start** 00:12
Start Type Doctor Advice **End Type** Home Visit **Consult End** 00:13
History
biliary colic over last few days

known gallstones
Examination
phonecall

Diagnosis
biliary colic not responding to present analgesia
Treatment
needs hospital admission

Clinical Code(s)
J6422 Biliary Colic
Prescriptions

Adastra Consult by Hay, [redacted] (Supplementary) **Consult Start** 01:30
Start Type Home Visit **End Type** Home Visit **Consult End** 01:37
History
epigastric pain

Report Statistics: Report produced by Adastra Version 3 - 03/03/2013 04:02:57

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Patient : Georgina Smith

(Gender: Female) (DOB: 04/12/1991) (Age: 21 years) (CHI: 0412913127)

colic in nature
nausea has not eaten 2 days
known gall stones
awaiting removal
400mg tramadol not alleviating pain

Examination
temp 37.2
sat98
pulse 100
guarding right upper qaudrant

Diagnosis
cholecystitis/pancreatitis

Treatment
refer crosshouse

Clinical Code(s)
J6422 Biliary Colic

Prescriptions

Informational Outcome(s)
Refer To Hospital -

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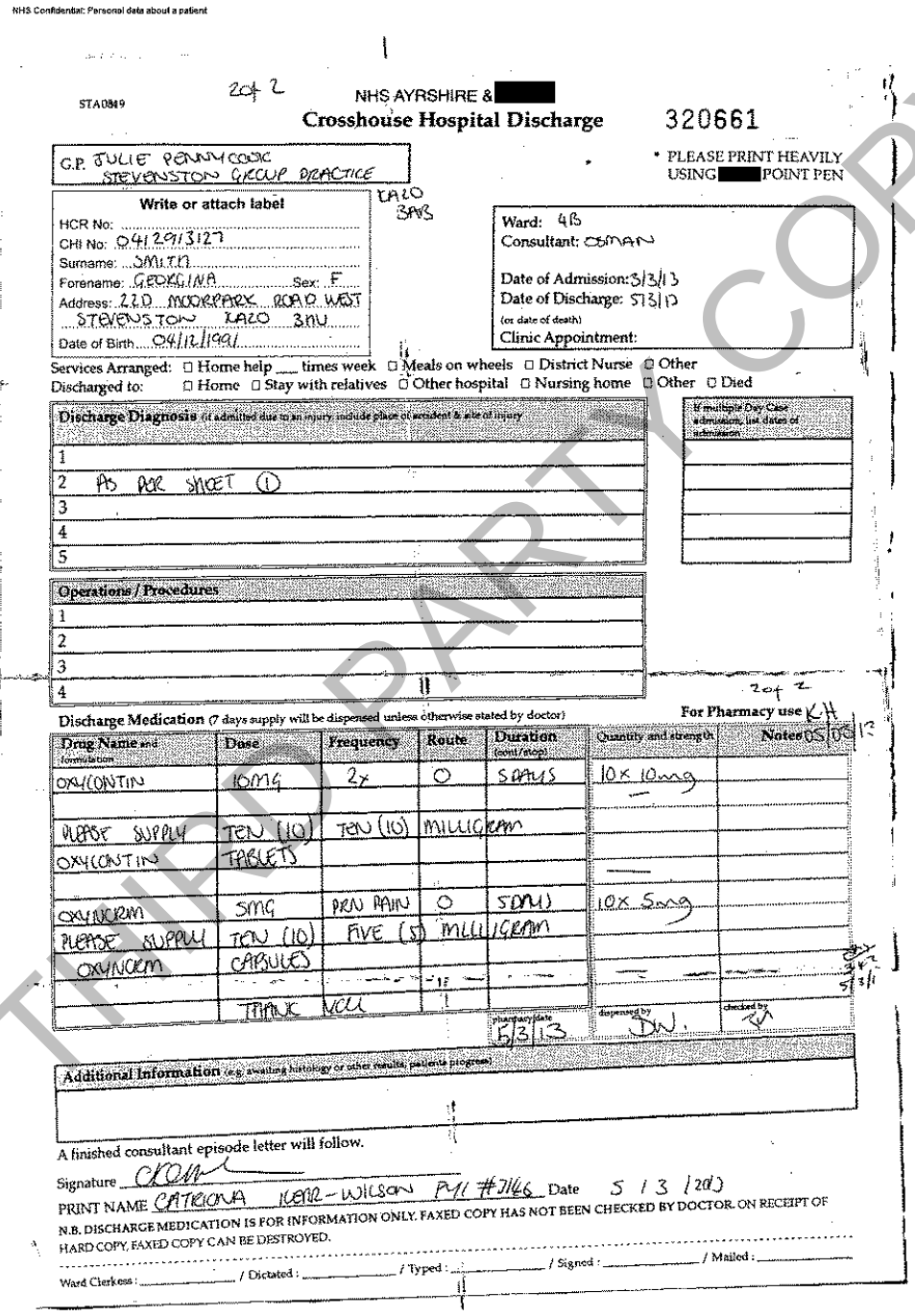

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STA0849 2 of 2

NHS AYRSHIRE & [redacted]

Crosshouse Hospital Discharge 320661

G.P. JULIE PENNY CODIC
STEVENSTON GROUP PRACTICE

* PLEASE PRINT HEAVILY USING [redacted] POINT PEN

Write or attach label

HCR No:
CHI No: 0412913127
Surname: SMITH
Forename: GEORGINA Sex: F
Address: 22D MOORPARK ROAD WEST
STEVENSTON KA20 3HU
Date of Birth: 04/12/1991

KA20 3AB

Ward: 4B
Consultant: OSMAN

Date of Admission: 3/3/13
Date of Discharge: 5/3/13
(or date of death)
Clinic Appointment:

Services Arranged: ☐ Home help ___ times week ☐ Meals on wheels ☐ District Nurse ☒ Other
Discharged to: ☐ Home ☐ Stay with relatives ☐ Other hospital ☐ Nursing home ☐ Other ☐ Died

Discharge Diagnosis (if admitted due to an injury, include place of accident & site of injury)	If multiple Day Case admissions, list dates of attendance
1	
2 AS PER SHEET (1)	
3	
4	
5	

Operations / Procedures
1
2
3
4

2 of 2

Discharge Medication (7 days supply will be dispensed unless otherwise stated by doctor)

For Pharmacy use KH

Drug Name and formulation	Dose	Frequency	Route	Duration (cont./stop)	Quantity and strength	Notes 05/06/13
OXYCONTIN	10MG	2x	O	5 DAYS	10 x 10mg	
PLEASE SUPPLY OXYCONTIN TABLETS	TEN (10)	TEN (10)	MILLIGRAM			
OXYNORM	5MG	PRN PAIN	O	5 DAYS	10 x 5mg	
PLEASE SUPPLY OXYNORM CAPSULES	TEN (10)	FIVE (5)	MILLIGRAM			
	THANK YOU					

Pharmacy date 5/3/13 dispensed by [illegible] checked by [illegible]

Additional Information (e.g. awaiting histology or other results, patient's progress)

A finished consultant episode letter will follow.

Signature [illegible] Date 5/3/2013

PRINT NAME CATRIONA KERR-WILSON PVI #7146

N.B. DISCHARGE MEDICATION IS FOR INFORMATION ONLY. FAXED COPY HAS NOT BEEN CHECKED BY DOCTOR. ON RECEIPT OF HARD COPY, FAXED COPY CAN BE DESTROYED.

Ward Clerkess: _____ / Dictated: _____ / Typed: _____ / Signed: _____ / Mailed: _____

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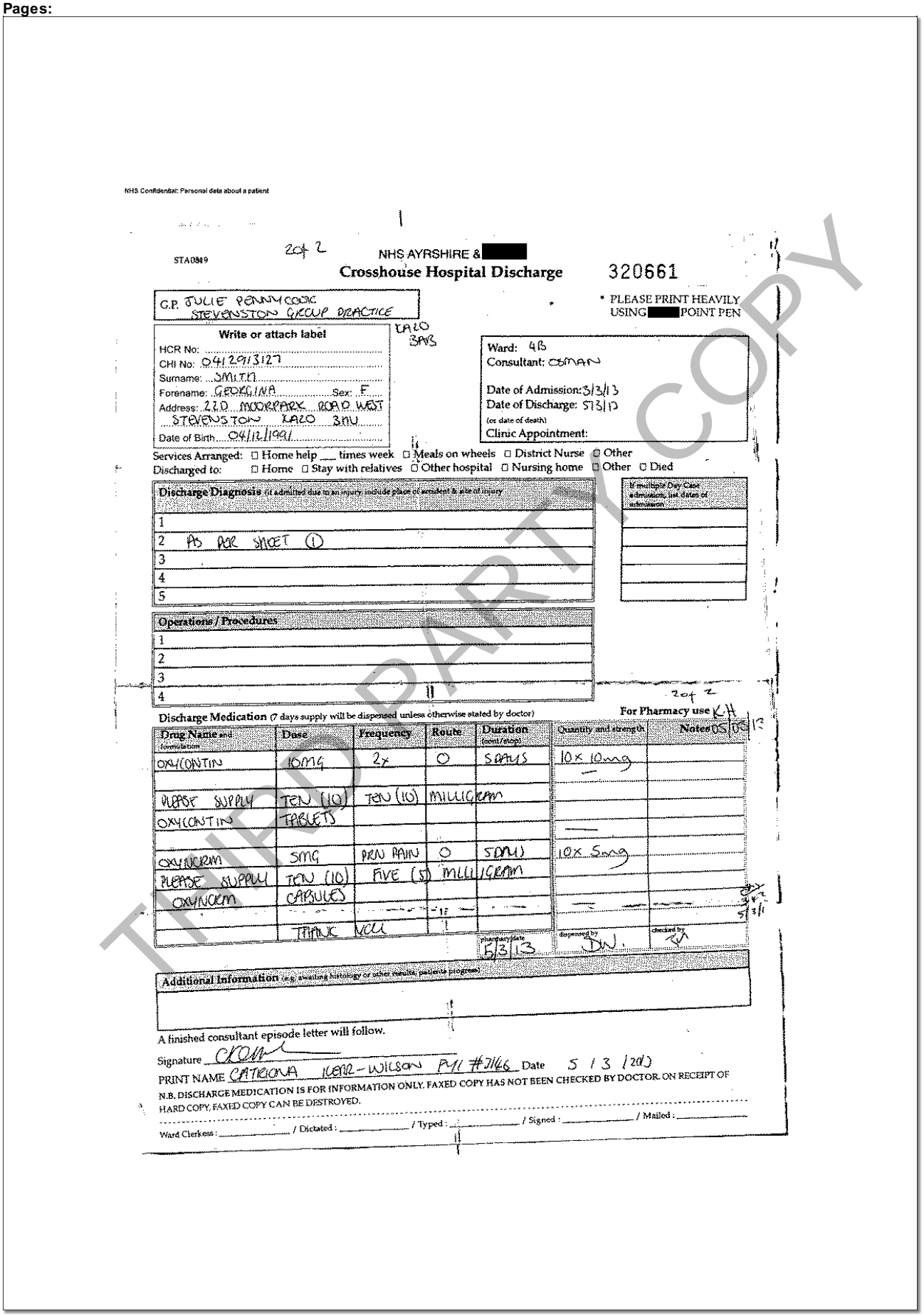

NHS Confidential: Personal data about a patient

STA0849

2 of 2

NHS AYRSHIRE & [redacted]

Crosshouse Hospital Discharge 320661

G.P. JULIE PENNYCOOK
STEVENSTON GROUP PRACTICE

* PLEASE PRINT HEAVILY USING [redacted] POINT PEN

Write or attach label

HCR No:
CHI No: 0412913127
Surname: SMITH
Forename: GEORGINA Sex: F
Address: 22D MOORPARK ROAD WEST
STEVENSTON KA20 3HU
Date of Birth: 04/12/1991

KA20 3HR

Ward: 4B
Consultant: OSMAN

Date of Admission: 3/3/13
Date of Discharge: 5/3/13
(or date of death)
Clinic Appointment:

Services Arranged: ☐ Home help ___ times week ☐ Meals on wheels ☐ District Nurse ☒ Other
Discharged to: ☐ Home ☐ Stay with relatives ☐ Other hospital ☐ Nursing home ☐ Other ☐ Died

Discharge Diagnosis (if admitted due to an injury, include place of accident & site of injury)	If multiple Day Case admissions, list dates of attendance
1	
2 AS PER SHEET (1)	
3	
4	
5	

Operations / Procedures
1
2
3
4

2 of 2

Discharge Medication (7 days supply will be dispensed unless otherwise stated by doctor)

For Pharmacy use KH

Drug Name and formulation	Dose	Frequency	Route	Duration (cont/stop)	Quantity and strength	Notes 05/06/13
OXYCONTIN	10MG	2x	O	5 DAYS	10 x 10mg	
PLEASE SUPPLY OXYCONTIN	TEN (10) TABLETS	TEN (10)	MILLIGRAM			
OXYNORM	5MG	PRN PAIN	O	5 DAYS	10 x 5mg	
PLEASE SUPPLY OXYNORM	TEN (10) CAPSULES	FIVE (5)	MILLIGRAM			
	THANK YOU					

Pharmacy date 5/3/13 dispensed by SDW. checked by

Additional Information (e.g. awaiting histology or other results, patients progress)

A finished consultant episode letter will follow.

Signature [redacted] Date 5/3/2013

PRINT NAME CATRIONA KERR-WILSON PVI #7146

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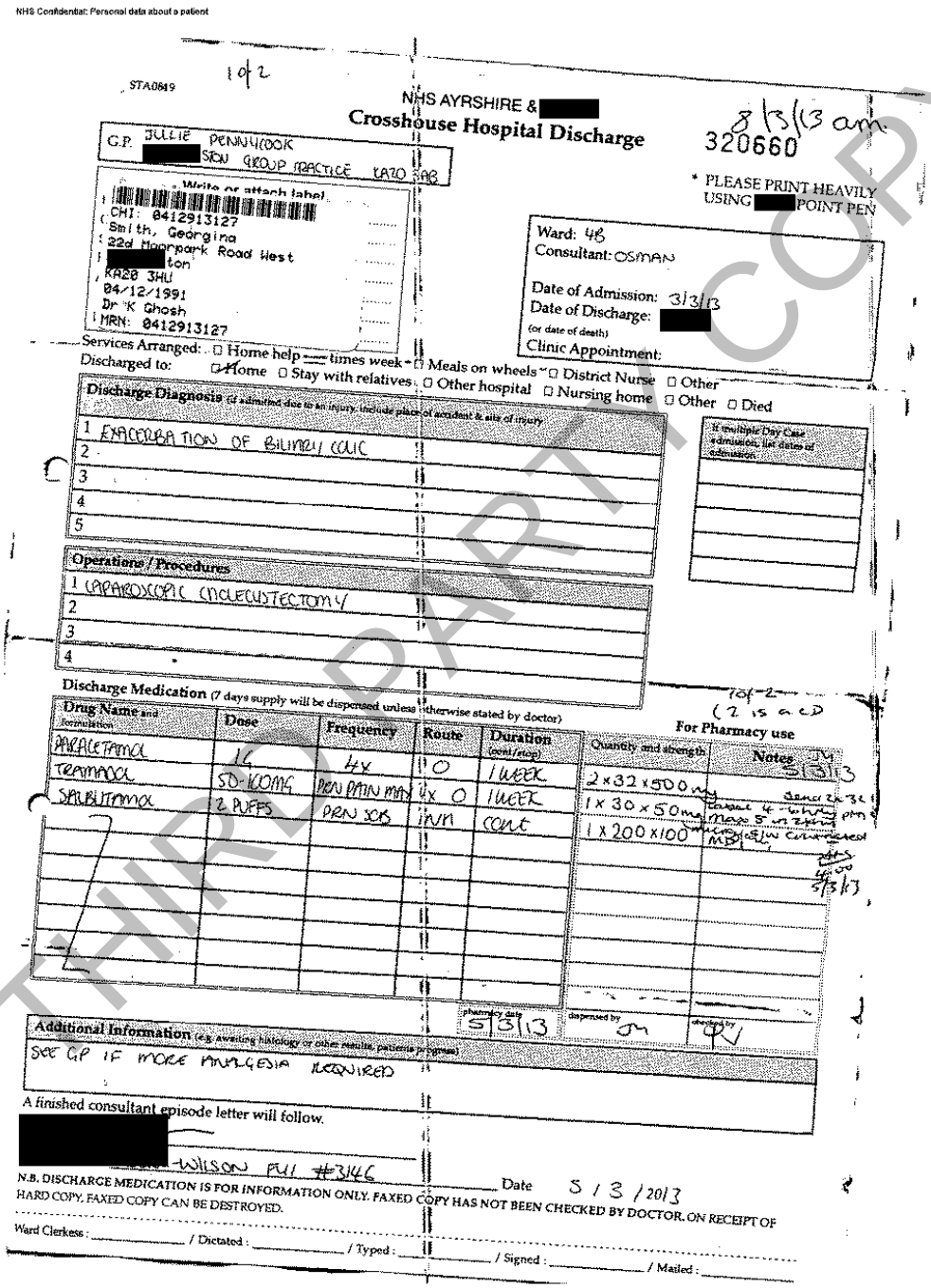

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1 of 2

STA0849

NHS AYRSHIRE & [redacted]

Crosshouse Hospital Discharge

8/3/13 am.

320660

G.P. JULIE PENNYCOOK [redacted] SOW GROUP PRACTICE KA20 3AB

* PLEASE PRINT HEAVILY USING [redacted] POINT PEN

Write or attach label

CHI: 0412913127
Smith, Georgina
22d Moorpark Road West
[redacted]ton
KA28 3HU
04/12/1991
Dr K Ghosh
MRN: 0412913127

Ward: 48
Consultant: OSMAN

Date of Admission: 3/3/13
Date of Discharge: [redacted]
(or date of death)
Clinic Appointment:

Services Arranged: ☐ Home help — times week ☐ Meals on wheels ☐ District Nurse ☐ Other
Discharged to: ☐ Home ☐ Stay with relatives ☐ Other hospital ☐ Nursing home ☐ Other ☐ Died

Discharge Diagnosis (if admitted due to an injury, include place of accident & site of injury)

1 EXACERBATION OF BILIARY COLIC
2
3
4
5

If multiple Day Case admission, list dates of admission

Operations / Procedures

1 LAPAROSCOPIC CHOLECYSTECTOMY
2
3
4

Discharge Medication (7 days supply will be dispensed unless otherwise stated by doctor)

1 of 2
(2 is a CD)

For Pharmacy use

Drug Name and formulation	Dose	Frequency	Route	Duration (cont/stop)	Quantity and strength	Notes
PARACETAMOL	1G	4X	O	1 WEEK	2 x 32 x 500 mg	JM 5/3/13
TRAMADOL	50-100MG	PRN PAIN MAX 4X	O	1 WEEK	1 x 30 x 50mg	Issue 2x 32 Max 5 in 24hrs
SALBUTAMOL	2 PUFFS	PRN SOB	INH	CONT	1 x 200 x 100	MB 5/3/13

pharmacy date 5/3/13 dispensed by JM checked by [redacted]

Additional Information (e.g. awaiting histology or other results, patients progress)

SEE GP IF MORE ANALGESIA REQUIRED

A finished consultant episode letter will follow.

[redacted] WILSON FY1 #3146 Date 5/3/2013

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Crosshouse Hospital
Kilmarnock
KA2 0BE
Tel: 01563 521133
Fax: 01563 577979

Dr K [redacted]
Stevenston Health Centre
20 Main Street
STEVENSTON
Ayrshire
KA20 3AB

12.3.2013

Dear Dr [redacted]

Re. **Ms Georgina Smith** 04/12/91 0412913127
54 Wheatley Road
SALTCOATS

Your patient was admitted under the care of Mr [redacted] on 03/03/13 and discharged home on 05/03/13.

The principal diagnosis was:
Biliary stones - Biliary colic

The main operation/treatment was:
Biliary stones - Laparoscopic Cholecystectomy on 04/03/13
There was no other treatment.

There were no complications.

Drugs on discharge: As listed in the immediate discharge letter.

A full explanation of the diagnosis was given to the patient.

No outpatient follow-up has been arranged.

This 21 year old lady who is known to have gallstones and was on the waiting list for laparoscopic cholecystectomy was admitted with a further episode of pain which was consistent with biliary colic. Her abdomen was soft and tender. Her FBC, Us&Es, LFTs were normal. She was initially treated conservatively. The next day I took her to theatre and beforehand I clearly explained to her that although I am happy to take her gallbladder out that I cannot guarantee her symptoms will settle completely after cholecystectomy. She was adamant to go ahead with surgery and she had an uneventful laparoscopic cholecystectomy and she was discharged home 24 hours after her cholecystectomy with no follow up arranged.

Yours sincerely,

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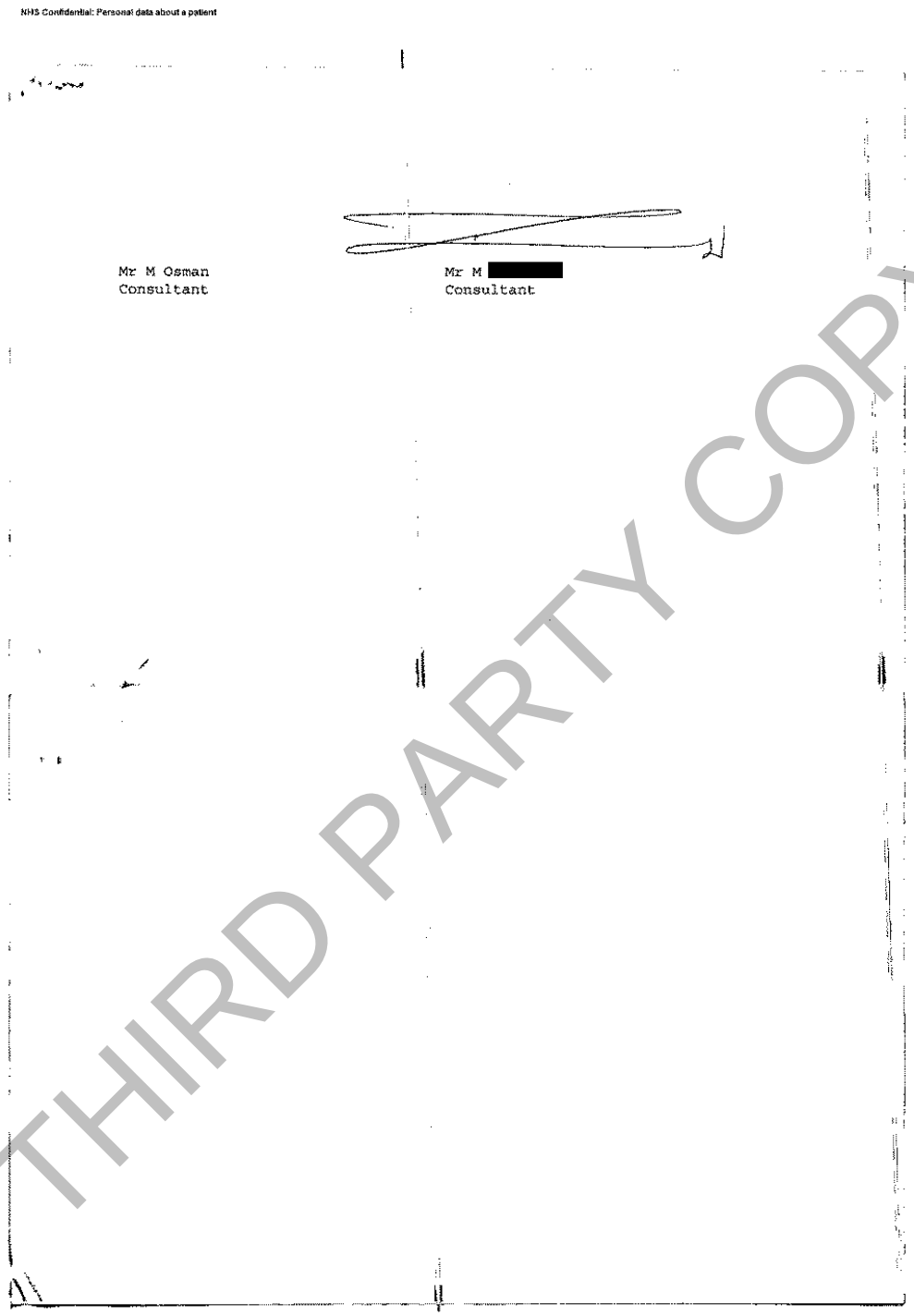

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NHS Confidential: Personal data about a patient

Crosshouse Hospital
Kilmarnock
KA2 0BE
Tel: 01563 521133
Fax: 01563 577979

Dr K [redacted]
Stevenston Health Centre
20 Main Street
STEVENSTON
Ayrshire
KA20 3AB

12.3.2013

Dear Dr [redacted]

Re. **Ms Georgina Smith** 04/12/91 0412913127
54 Wheatley Road
SALTCOATS

Your patient was admitted under the care of Mr [redacted] on 03/03/13 and discharged home on 05/03/13.

The principal diagnosis was:
Biliary stones - Biliary colic

The main operation/treatment was:
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There were no complications.

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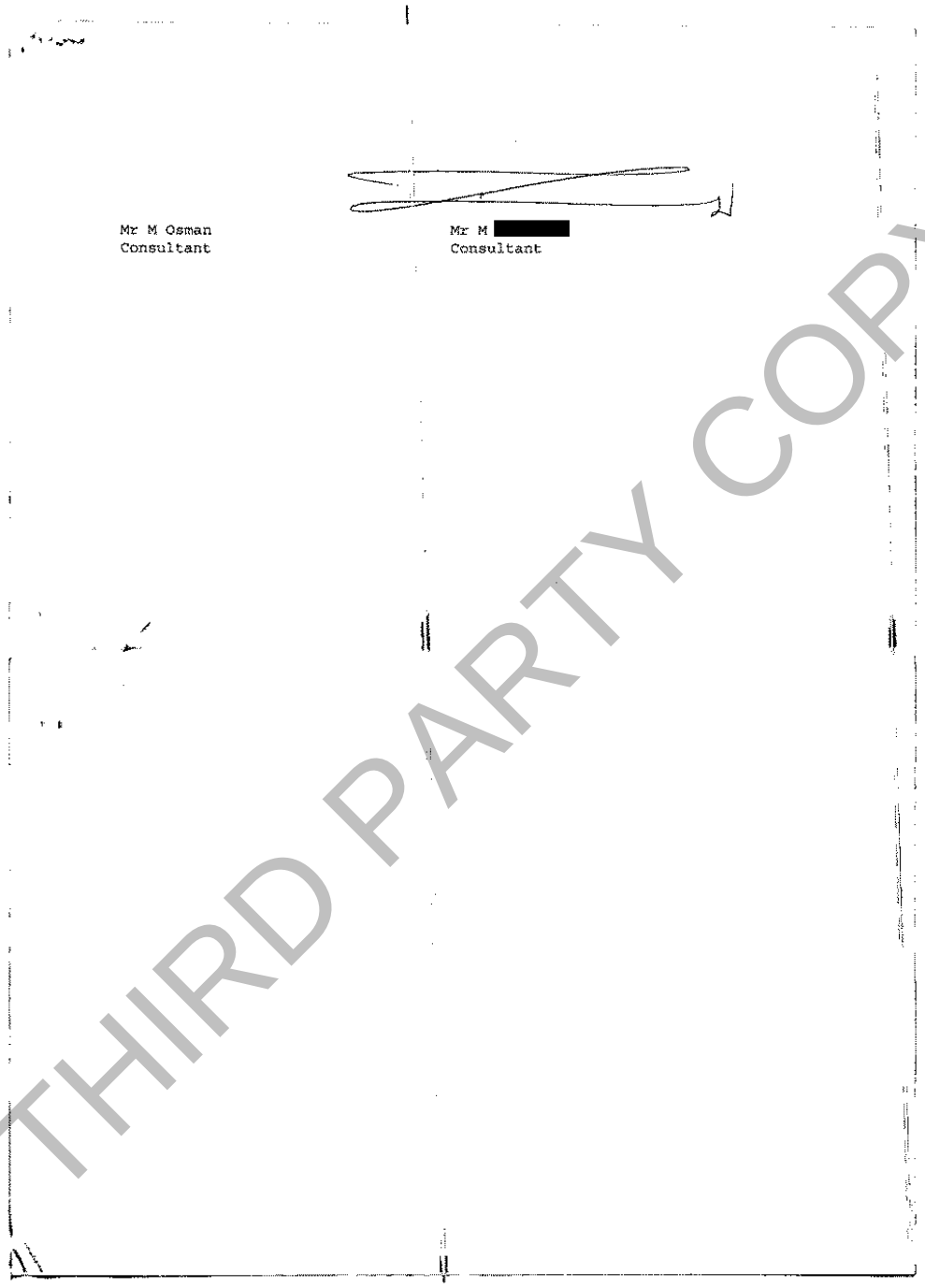
Yours sincerely,

THIRD PARTY COPY

NHS Confidential: Personal data about a patient



Mr M Osman
Consultant

Mr M [redacted]
Consultant

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Dr D Chung Dr J [redacted] Dr M Draegebo Dr J Mulligan
Dr J Mardon Mr J [redacted] Dr C McGuffie Dr A Lannigan Dr Y Moulds

Accident and Emergency

Crosshouse Hospital
Kilmarnock KA2 0BE

Phone: 01563 57757/8
Fax: 01563 572009

Dr. JULIE JA PENNYCOOK
STEVENSTON GROUP PRACTICE
STEVENSTON HEALTH CENTRE
MAIN STREET
STEVENSTON
KA20 3AB

Georgina Smith
54 WHEATLEY ROAD
SALTCOATS, KA21 6ET

DOB: 04/12/1991
A/E No: XH-13-015032
CHI No: 0412913127

Date and Time of Attendance: 18 Mar 2013 21:43
Total A&E Attendances = 16 , attendances in last year = 8

Diagnosis Urinary tract infection

Treatment Take home drugs

Drugs:

Investigations

Follow up: Discharge, no follow up

Usual place of residence

Additional Information: urinary tract infection. d/c with trimethoprim

[redacted] **Mukuma**
A&E SHO

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

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NHS Confidential: Personal data [redacted] a patient

Dr D Chung Dr J [redacted] Dr M Draegebo Dr J Mulligan
Dr J Mardon Mr J [redacted] Dr C McGuffie Dr A Lannigan Dr Y Moulds

Accident and Emergency

Crosshouse Hospital
Kilmarnock KA2 0BE

Phone: 01563 57757/8
Fax: 01563 572009

Dr. JULIE JA PENNYCOOK
STEVENSTON GROUP PRACTICE
STEVENSTON HEALTH CENTRE
MAIN STREET
STEVENSTON
KA20 3AB

Georgina Smith
54 WHEATLEY ROAD
SALTCOATS, KA21 6ET

DOB: 04/12/1991
A/E No: XH-13-015032
CHI No: 0412913127

Date and Time of Attendance: 18 Mar 2013 21:43
Total A&E Attendances = 16 , attendances in last year = 8

Diagnosis Urinary tract infection

Treatment Take home drugs

Drugs:

Investigations

Follow up: Discharge, no follow up

Usual place of residence

Additional Information: urinary tract infection. d/c with trimethoprim

[redacted] **Mukuma**
A&E SHO

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

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NHS Ayrshire & [redacted] General Hospital Division **Area Laboratory** **Clinical Biochemistry** [redacted]

SMITH,GEORGINA
110 ARDOCH CRESCENT

CHI No. 0412913127
Unit No. [redacted]
DOB 04/12/1991
Sex F

Clinician: Dr K [redacted]
Request Location: GP, Stevenston: Dr [redacted] et al

KA20 3PG

This report to : Dr K [redacted], GP, Stevenston: Dr [redacted] et al

	Result	Units	Normal Range
Urine pregnancy test	Negative		

Lab No 13B291422 Date Collected 18/06/13 Authorised By BHI W7AUQPRO Service Account
Printed 19/06/13 13:30 Sample Type Urine Page 1 of 1

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

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NHS Ayrshire & [redacted] General Hospital Division **Area Laboratory** **Clinical Biochemistry** [redacted]

SMITH,GEORGINA
110 ARDOCH CRESCENT

KA20 3PG

CHI No. 0412913127
Unit No. [redacted]
DOB 04/12/1991
Sex F

Clinician: Dr K [redacted]
Request Location: GP, Stevenston: Dr [redacted] et al

This report to : Dr K [redacted], GP, Stevenston: Dr [redacted] et al

	Result	Units	Normal Range
Urine pregnancy test	Negative		

Lab No 13B291422 Date Collected 18/06/13 Authorised By BHI W7AUQPRO Service Account
Printed 19/06/13 13:30 Sample Type Urine Page 1 of 1

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$ There is a bit of paper stapeled on to this letter as i never had any room Left on this bit of paper!

Prisoner healthcare feedback, comments, [redacted] and complaints

Name Georgina Smith D.O.B 04/12/1991

Location ..... SPIN .....

Do you have any feedback, comments, [redacted] or complaints about your healthcare treatment?

Please tick Feedback, comments or [redacted] ☐ Complaint ☑

Please provide details I am making a complaint as the nurse has saw me twice now! The First time it was my mucal and Ribs was bruised. Second time it was My Ribs is cracked and my [redacted] is bruse. The doctor has not said [redacted] I have asmea and a heart murmer I am not getting my inhalers or my tablets for my heart murmer. I need to know whats really wrong with me as ive started bleeding From my back end and they are no lumps. I know there is more than that wrong as am the size of a pregnant lassie about 5 months, I need to know asap

What would resolve this matter? Them taking me to hospital for a scan and more tests to see what happing inside my body. And to get a letter for profe for my court case.

Thank!

Signature G.Smith Date .....

We will treat the details you provide in confidence unless safety issues require us to disclose information.

The process and timescales for a response are shown overleaf.

St [redacted] House, Regent Road, Edinburgh EH1 3DG
www.scotland.gov.uk

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as [redacted] a letter for my lawyer for evendince at [redacted] court date. I am scared they is something else wrong as my Temputure is high, my heart beat is a bit [redacted] and my blood presure is low and they [redacted] even taking me to hospital to see whats up. I am sleeping all the time and sweating alot. so if you can please deal with this asap.

Thanks!

WPQ0272S 4/04

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*There is a bit of paper stapeled on to this letter as i never had any room left on this bit of paper!

Prisoner healthcare feedback, comments, [redacted] and complaints

Name Georgina Smith D.O.B 04/12/1991

Location ..... SPIN .....

Do you have any feedback, comments, [redacted] or complaints about your healthcare treatment?

Please tick Feedback, comments or [redacted] ☐ Complaint ☑

Please provide details I am making a complaint as the nurse has saw me twice now! The first time it was my mucil and Ribs was bruised. Second time it was my Ribs is cracked and my [redacted] is bruse. The doctor has not saw [redacted] I have asmea and a heart murmer I am not getting my inhalers or my tablets for my heart murmer. I need to know whats really wrong with me as ive started bleeding from my back end and they are no lumps. I know there is more than that wrong as am the size of a pregnant lassie about 5 months, I need to know asap →

What would resolve this matter? Them taking me to hospital for a scan and more tests to see what happing inside my body. And to get a letter for profe for my court case.

Thank!

Signature G. Smith Date .....

We will treat the details you provide in confidence unless safety issues require us to disclose information.

The process and timescales for a response are shown overleaf.

St [redacted] House, Regent Road, Edinburgh EH1 3DG
www.scotland.gov.uk

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as [redacted] a letter for my lawyer for evendince at [redacted] court date. I am scared they is something else wrong as my temputure is high, my heart beat is a bit [redacted] and my blood presure is low and they [redacted] even taking me to hospital to see whats up. I am sleeping all the time and sweating alot. so if you can please deal with this asap.

Thanks!

WPQ0272S 4/04

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McCORMACK LTD

Criminal [redacted] Solicitors
2nd Floor, 1 Merry Street, Motherwell, ML1 1JJ
Tel. 01698 26 00 33 • Fax. 01698 25 01 01
(At Motherwell [redacted])
Also at
78 [redacted] Street, Glasgow, G5 9ER
Tel. 0141 429 0010 • Fax. 0141 429 8222
(Beside Glasgow Sheriff [redacted])
E-mail, brucemccormackltd@hotmail.co.uk

Our Ref: DB/NMC 13/499
Your Ref:
Date: 19th August 2013
Reply to Motherwell: ☑
Reply to Glasgow: ☐

The Governor
H.M. Prison Cornton Vale
Cornton Road
STIRLING
FK9 5NU

URGENT

Faxed and Posted – 01786 833597

Dear Sirs,

Our Client: Georgina Smith
Date of Birth: 4th December 1991

We refer to the above named and understand our client was remanded to H.M. Prison Cornton Vale from the 12th July 2013 till recently. We should be obliged if you would provide us with a copy of all her medical records for this period. We enclose herewith the relevant mandate duly signed by our client.

Thank you for your assistance.

Yours faithfully,

RECEIVED
22 AUG 2013

[redacted] 07917 113 785
[redacted] Garrett 07970 960 151

Solicitors
Diarmid [redacted] (Director)
24 Hour Direct
07780 616 444
Throughout Scotland
Registered in Scotland No. 311766

Gerard Devaney 07769 340 969
Ian [redacted] 07740 583 892

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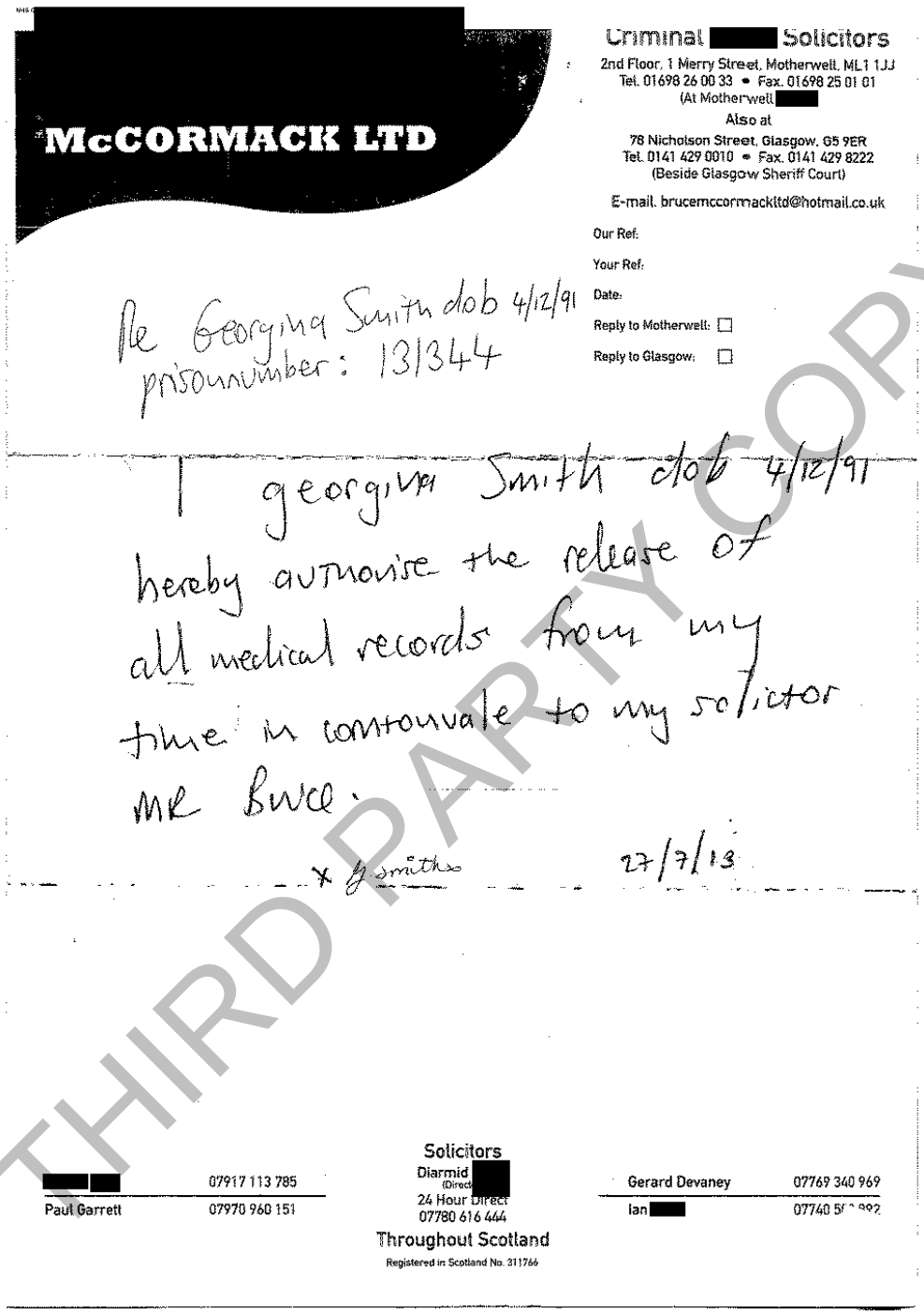

McCORMACK LTD

Criminal [redacted] Solicitors
2nd Floor, 1 Merry Street, Motherwell, ML1 1JJ
Tel. 01698 26 00 33 • Fax. 01698 25 01 01
(At Motherwell [redacted])
Also at
78 Nicholson Street, Glasgow, G5 9ER
Tel. 0141 429 0010 • Fax. 0141 429 8222
(Beside Glasgow Sheriff Court)
E-mail. brucemccormackltd@hotmail.co.uk

Our Ref:
Your Ref:
Date:
Reply to Motherwell: ☐
Reply to Glasgow: ☐

Re Georgina Smith dob 4/12/91
prisonnumber: 13/344

I georgina Smith dob 4/12/91
hereby authorise the release of
all medical records from my
time in contonvale to my solicitor
MR Bruce.

x g smiths 27/7/13

Solicitors
Diarmid [redacted] (Direct)
24 Hour Direct
07780 616 444
Throughout Scotland
Registered in Scotland No. 311766

[redacted] 07917 113 785
Paul Garrett 07970 960 151
Gerard Devaney 07769 340 969
Ian [redacted] 07740 5[redacted]992

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McCORMACK LTD

Criminal [redacted] Solicitors
2nd Floor, 1 Merry Street, Motherwell, ML1 1JJ
Tel. 01698 26 00 33 • Fax. 01698 25 01 01
(At Motherwell [redacted])
Also at
78 [redacted] Street, Glasgow, G5 9ER
Tel. 0141 429 0010 • Fax. 0141 429 8222
(Beside Glasgow Sheriff [redacted])
E-mail. brucemccormackltd@hotmail.co.uk

Our Ref: DB/NMC 13/499
Your Ref:
Date: 19th August 2013
Reply to Motherwell: ☑
Reply to Glasgow: ☐

The Governor
H.M. Prison Cornton Vale
Cornton Road
STIRLING
FK9 5NU

URGENT

Faxed and Posted – 01786 833597

Dear Sirs,

Our Client: Georgina Smith
Date of Birth: 4th December 1991

We refer to the above named and understand our client was remanded to H.M. Prison Cornton Vale from the 12th July 2013 till recently. We should be obliged if you would provide us with a copy of all her medical records for this period. We enclose herewith the relevant mandate duly signed by our client.

Thank you for your assistance.

Yours faithfully,

RECEIVED
22 AUG 2013

[redacted] 07917 113 785
[redacted] Garrett 07970 960 151

Solicitors
Diarmid [redacted] (Director)
24 Hour Direct
07780 616 444
Throughout Scotland
Registered in Scotland No. 311766

Gerard Devaney 07769 340 969
Ian [redacted] 07740 583 892

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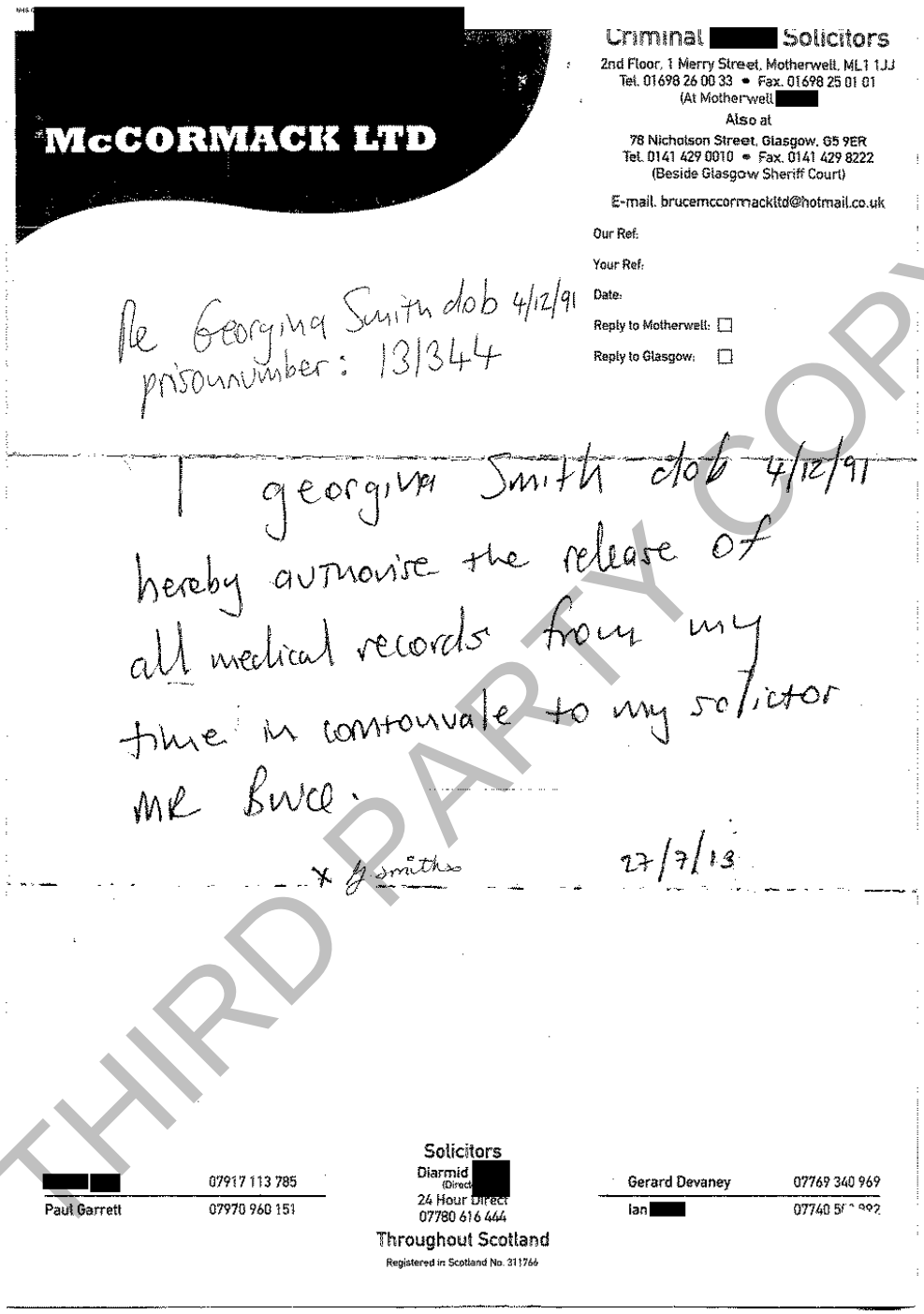

McCORMACK LTD

Criminal [redacted] Solicitors
2nd Floor, 1 Merry Street, Motherwell, ML1 1JJ
Tel. 01698 26 00 33 • Fax. 01698 25 01 01
(At Motherwell [redacted])
Also at
78 Nicholson Street, Glasgow, G5 9ER
Tel. 0141 429 0010 • Fax. 0141 429 8222
(Beside Glasgow Sheriff Court)
E-mail. brucemccormackltd@hotmail.co.uk

Our Ref:
Your Ref:
Date:
Reply to Motherwell: ☐
Reply to Glasgow: ☐

Re Georgina Smith dob 4/12/91
prisonnumber: 13/344

I georgina Smith dob 4/12/91
hereby authorise the release of
all medical records from my
time in contonvale to my solicitor
MR Bruce.

x g smith 27/7/13

Solicitors
Diarmid [redacted] (Direct)
24 Hour Direct
07780 616 444
Throughout Scotland
Registered in Scotland No. 311766

[redacted] 07917 113 785
Paul Garrett 07970 960 151
Gerard Devaney 07769 340 969
Ian [redacted] 07740 5[redacted]992

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NHS Confidential: Personal data about a patient

Dear Doctor or Nurse,

I am greffing for Scott blackwood I can still feel him I still smell him, I still see and speak to him. I can sit in my room and [redacted] a convo with him. It fells like he is still here and around me. I have still no clicked that he is gawn. I am mixed emoshion about how im felling about stuff thats happen resistly and the pass I think I need help to over come this. I [redacted] tryed Speaking to someone and writing everything down it just dosn't help me. I would even to talce the offer of

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NHS Confidential: Personal data about a patient

booking myself into hospital if I was aloud to get that kind of help. I know yous are limited to your help you can give prisoners but I cant get rid of the voice in my head I could be speaking to someone and I can still here it. It scares me sometimes of what that voice inside my head is asking of telling me what to do. Please can you help me before its too late.

Thanks

Georgina Smith

BM: 2/35 13/3/24

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NHS Confidential: Personal data about a patient

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Thanks

Georgina Smith

BM: 2/35 13 13 '24

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NHS Confidential: Personal data about a patient

ALL -VE

Forth Valley Blood Borne Virus Outreach Service

REGISTRATION FORM

This form to be completed for each new client registered on the programme.

CLIENT DETAILS								
First name	GEORGINA	Address:-	110 ARBOUR CRESC STEVENSON AYRSHIRE					
Surname	SMITH							
gp DR GOSH	GP Address STEVENSON AYRSHIRE	Post Code Tel No:						
Date of Birth	4/12/91	Sex	M		F	✓		
Are you currently injecting?	Y (N)	Did previously inject?	Y (N)					
Patient agreeable to GP being informed of result		Yes	✓	No				

Pre test Discussion -

Risk factor's present either current or in the past	✓
Transmission routes including:-	✓
Previously [redacted] area of increased prevalence	✓
History of drug misuse	✓
Tattoo's / body piercings'	✓
Foreign travel	✓
Discuss reducing risk of transmission to themselves or others	✓
Education about BBV's	✓
Give written information	✓
Implication of test	✓
Inform of the test procedure	✓
Discuss confidentiality	✓
Discuss likely outcomes of both positive and reactive result including window period	✓
Arrange follow up appointment for result	Appt – / GP letter -

LOCATION	DRUG TREATMENT

Was the client offered testing for HCV, HBV or HIV	HCV	HBV	HIV
Did the client accept	✓	✓	✓
What was the result			
Results given			

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NHS Confidential Personal data about a patient

Further action required. (eg referral, retesting, further [redacted] interventions).	

FVAH

BBV TEST CONSENT FORM

I, _____ (NAME) 4/12/91 (DATE OF BIRTH)

understand that: (Tick Box)

- My details will be placed on a database to allow audit of service ☑
- I agree to being contacted by phone with a reminder of appointment ☑
- I agree to my GP being informed of my result if I fail to attend the next appointment for my result ☑

Signed _____

Date _____

I have explained the notes on this consent form to the above-named individual

Print Name SMILLAN

Signed SMILLAN

Date 18/09/13.

If client wishes to be tested completely anonymous refer to GU service.
Given contact details ☐

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ALL -VE

Forth Valley Blood Borne Virus Outreach Service

REGISTRATION FORM

This form to be completed for each new client registered on the programme.

CLIENT DETAILS								
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Surname	SMITH							
gp DR GOSH	GP Address STEVENSON AYRSHIRE	Post Code Tel No:						
Date of Birth	4/12/91	Sex	M		F	✓		
Are you currently injecting?	Y (N)	Did previously inject?	Y (N)					
Patient agreeable to GP being informed of result		Yes	✓	No				

Pre test Discussion -

Risk factor's present either current or in the past	✓
Transmission routes including:-	✓
Previously [redacted] area of increased prevalence	✓
History of drug misuse	✓
Tattoo's / body piercings'	✓
Foreign travel	✓
Discuss reducing risk of transmission to themselves or others	✓
Education about BBV's	✓
Give written information	✓
Implication of test	✓
Inform of the test procedure	✓
Discuss confidentiality	✓
Discuss likely outcomes of both positive and reactive result including window period	✓
Arrange follow up appointment for result	Appt – / GP letter -

LOCATION	DRUG TREATMENT

Was the client offered testing for HCV, HBV or HIV	HCV	HBV	HIV
Did the client accept	✓	✓	✓
What was the result			
Results given			

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NHS Confidential Personal data about a patient

Further action required. (eg referral, retesting, further [redacted] interventions).	

FVAH

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I, _____ (NAME) 4/12/91 (DATE OF BIRTH)

understand that: (Tick Box)

- My details will be placed on a database to allow audit of service ☑
- I agree to being contacted by phone with a reminder of appointment ☑
- I agree to my GP being informed of my result if I fail to attend the next appointment for my result ☑

Signed _____

Date _____

I have explained the notes on this consent form to the above-named individual

Print Name SMILLAN

Signed SMILLAN

Date 18/09/13.

If client wishes to be tested completely anonymous refer to GU service.
Given contact details ☐

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NHS Forth Valley
Microbiology

SURNAME: SMITH Young Offenders PO BOX 27144 131344 B2/35	FORENAME: GEORGINA	UNIT No.: STI1106554 DATE OF BIRTH: 04/12/1991 SEX: F
CONSULTANT: Unknown	WARD: [redacted] Offenders Ins. Polmont YOIP G.P.: HM Y.O. Institution Polmont	
CLINICAL DATA: SCREENING		

Hepatitis B surface antigen	Negative ✓
Hepatitis C antibody screen	Negative ✓
HIV antigen / antibody test	Negative ✓

ON VISION RECEIVED 25 SEP 2013 lettered ll

EXAMINATION: Hepatitis Serology	LAB No.: MS012041T	AUTHORISED: A.Gibson	
NATURE OF SPECIMEN: Venous blood	DATE COLLECTED: 18/09/2013	DATE RECEIVED: 19/09/2013	DATE REPORTED: 20/09/2013

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NHS Confidential: Personal data about a patient

NHS
Forth Valley
Microbiology

SURNAME	FORENAME	UNIT No.
SMITH	GEORGINA	STI1106554
Young Offenders PO BOX 27144 131344 B2/35		DATE OF BIRTH 04/12/1991 / SEX F

CONSULTANT: Unknown

WARD: [redacted] Offenders Ins. Polmont YOIP

G.P.: HM Y.O. Institution Polmont

CLINICAL DATA: SCREENING

Hepatitis B surface antigen	Negative ✓
Hepatitis C antibody screen	Negative ✓
HIV antigen / antibody test	Negative ✓

ON VISION RECEIVED 25 SEP 2013 lettered

EXAMINATION	LAB No.	AUTHORISED	
Hepatitis Serology	MS012041T	A.Gibson	
NATURE OF SPECIMEN	DATE COLLECTED	DATE RECEIVED	DATE REPORTED
Venous blood	18/09/2013	19/09/2013	20/09/2013

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA | UNIT NUMBER: STI1106554
PATIENT'S ADDRESS: HMP POLMONT, BRIGHTONS
CONSULTANT: Dr [redacted] Sayers | DOB: 04/12/1991 | SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: [redacted] Offenders Ins. Polmont, HM Y.O. Institution Polmon | SAMPLE TYPE OF LATEST SPECIMEN: Fluoride Oxalate
CLINICAL DETAILS REFERRING TO LATEST REQUEST: BULIMIC TIREDNESS | COPY DETAILS:

DATE OF COLLECTION	LABORATORY NUMBER	TIME OF COLLECTION	PLASMA GLUCOSE fasting 3.3-5.5 mmol/l	BLOOD GAS Specimen type	(H+) 36-43 nmol/l	pCO_2 4.6-6.0 kPa	CALCULATED BICARBONATE 20-28 mmol/l	[redacted] pO_2 kPa	INSPIRED OXYGEN %
24/09/13	825463S	NS	4.5						

DATE OF COLLECTION	LABORATORY NUMBER	Total CO_2 23-30 mmol/l	OSMOLALITY 275-295 mosm/kg H2O	SODIUM 133-146 mmol/l	POTASSIUM 3.0-5.0 mmol/l	CHLORIDE 97-107 mmol/l	UREA 2.5-8.0 mmol/l	CREATININE 60-130 µmol/l	eGFR ml/min/1.73m2 <60 = CKD stage 3,4 or 5

DATE OF COLLECTION	LABORATORY NUMBER	AMYLASE up to 90 IU/l 37°C	AST 12-31 IU/l 37°C	ALT 11-37 IU/l 37°C	BILIRUBIN up to 17 µmol/l	TOTAL PROTEIN 62-80 g/l	ALBUMIN 36-52 g/l	ALKALINE PHOSPHATASE 30-130 IU/l 37°C	γGT 7-22 (female) IU/l 37°C

DATE OF COLLECTION	LABORATORY NUMBER	IRON 11-29 µmol/l	TIBC 45-72 µmol/l	CALCIUM 2.15-2.60 mmol/l	CORRECTED CALCIUM 2.15-2.60 mmol/l	PHOSPHATE 0.87-1.45 mmol/l (12-60 years)	MAGNESIUM 0.7-1.0 mmol/l	URATE 0.12-0.42 [mmol/l	CK(Total) 23-142 (female) IU/l 37°C

DATE OF COLLECTION	LABORATORY NUMBER	T.S.H. 0.35-5.5 mU/l from 20.1.07	FREE T4 9-24 pmol/l	TOTAL T3 0.9-2.8 nmol/l from 20.1.07	PSA ca 0 µg/L	TRIGLYCERIDE fasting <2.0 mmol/l	CHOLESTEROL mmol/l target levels are risk dependent	H.D.L >0.9 mmol/l	L.D.L. mmol/l target levels are risk dependent

24/09/13	825463S	Glu Sample Time Not Stated

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NHS Confidential. Personal data about a patient

NHS Forth Valley Haematology

NHS Forth Valley

Patient		Patient Ref. Number	
SMITH, GEORGINA HMP POLMONT BRIGHTONS		STI1106554	
		Date Of Birth 04/12/1991	Sex F
Doctor/Location	Consultant/GP	Date/Time Specimen Received	
HM Y.O. Institution Polmont [redacted] Offenders Ins. Polmont	Dr [redacted] Sayers	24/09/2013 15:23	
Clinical Data: BULIMIC TIREDNESS		Sample Type: Blood	

DIFFERENTIAL W.B.C. COUNT ALL x 10^9/l

Neutrophils	Lymphocytes	Monocytes	Eosinophils	Basophils	Metas	Myelocytes	Blasts	N.R.B.C.
2.90	2.20	0.40	0.40	0.00				

R.B.C. x10^{12}/L	P.C.V.	M.C.V.fl	M.C.H. pg	M.C.H.C. g/dl	E.S.R. mm/1hr	Retics. x10^9/L	Report Date/Time
4.76	0.402	84.5	28.4	33.6			24/09/2013 16:15

Hb g/L	W.B.C. x 10^9/L	Plt. x 10^9/L	Investigation	Lab. Number	Collection Date/Time
135	6.1	263	Full Blood Count	092798	24/09/2013 u/k

Full Blood Count Reference Ranges:

ADULTS	MALE	FEMALE
White Cell Count (x10^9/l)	3.9 - 10.6	3.5 - 11.0
Red Cell Count (x10^9/l)	4.4 - 5.9	3.8 - 5.2
Haemoglobin (g/l)	133 - 177	117 - 157
Packed Cell Volume	0.40 - 0.52	0.35 - 0.47
Mean Cell Volume (fl)	81 - 100	81 - 100
Mean Cell Haemoglobin (pg)	26.6 - 33.8	26.4 - 34.0
MCH Concentration (g/dl)	31.5 - 35.3	31.4 - 35.8
Platelet Count (x10^9/l)	150 - 440	150 - 440

CHILDREN	BIRTH	1 YEAR	6	10
WBC (x10^9/l)	9.0 - 30.0	6.0 - 17.5	5.0 - 14.5	4.3 - 13.5
Hb (g/l)	146 - 234	90 - 146	106 - 155	107 - 155

Differential White Cell Count: (as absolute counts, x 10^9/l)

	1 YEAR	6	10	ADULT
Neutrophils	1.5 - 8.5	1.5 - 8.0	1.5 - 8.0	1.8 - 7.7
Lymphocytes	4.0 - 10.5	1.5 - 7.0	1.5 - 6.5	1.0 - 4.8
Monocytes	0.05 - 1.1	0 - 0.65	0 - 0.6	0 - 0.8
Eosinophils	0 - 0.65	0 - 0.65	0 - 0.60	0 - 0.45
Basophils	0 - 0.20	0 - 0.20	0 - 0.20	0 - 0.20

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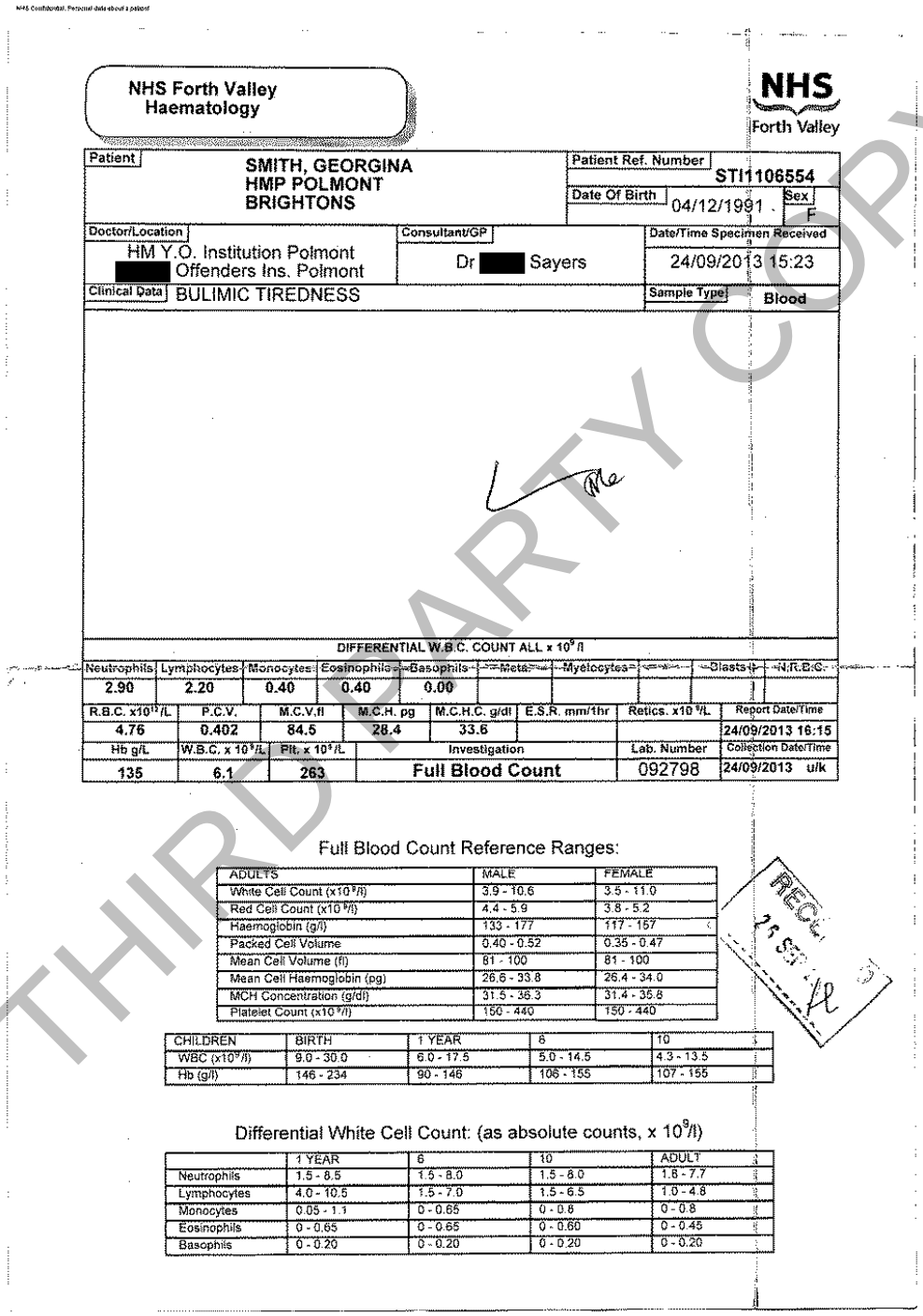

NHS Confidential. Personal data about a patient

NHS Forth Valley Haematology

NHS Forth Valley

Patient	SMITH, GEORGINA HMP POLMONT BRIGHTONS	Patient Ref. Number	STI1106554
		Date Of Birth	04/12/1991
		Sex	F
Doctor/Location	HM Y.O. Institution Polmont [redacted] Offenders Ins. Polmont	Consultant/GP	Dr [redacted] Sayers
		Date/Time Specimen Received	24/09/2013 15:23
Clinical Data	BULIMIC TIREDNESS	Sample Type	Blood

DIFFERENTIAL W.B.C. COUNT ALL x 10^9/l

Neutrophils	Lymphocytes	Monocytes	Eosinophils	Basophils	Metas	Myelocytes	Blasts	N.R.B.C.
2.90	2.20	0.40	0.40	0.00				

R.B.C. x10^{12}/L	P.C.V.	M.C.V.fl	M.C.H. pg	M.C.H.C. g/dl	E.S.R. mm/1hr	Retics. x10^9/L	Report Date/Time
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Lymphocytes	4.0 - 10.5	1.5 - 7.0	1.5 - 6.5	1.0 - 4.8
Monocytes	0.05 - 1.1	0 - 0.65	0 - 0.6	0 - 0.8
Eosinophils	0 - 0.65	0 - 0.65	0 - 0.60	0 - 0.45
Basophils	0 - 0.20	0 - 0.20	0 - 0.20	0 - 0.20

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

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PATIENT'S ADDRESS: HMP POLMONT, BRIGHTONS
CONSULTANT: Dr [redacted] Sayers | DOB: 04/12/1991 | SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: [redacted] Offenders Ins. Polmont, HM Y.O. Institution Polmon | SAMPLE TYPE OF LATEST SPECIMEN: Fluoride Oxalate
CLINICAL DETAILS REFERRING TO LATEST REQUEST: BULIMIC TIREDNESS | COPY DETAILS:

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24/09/13	825463S	NS	4.5						

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[redacted]									

DATE OF COLLECTION	LABORATORY NUMBER	IRON 11-29 µmol/l	TIBC 45-72 µmol/l	CALCIUM 2.15-2.60 mmol/l	CORRECTED CALCIUM 2.15-2.60 mmol/l	PHOSPHATE 0.87-1.45 mmol/l (12-60 years)	MAGNESIUM 0.7-1.0 mmol/l	URATE 0.12-0.42 [mmol/l	CK(Total) 23-142 (female) iu/l 37°C

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24/09/13	825463S	Glu Sample Time Not Stated	RECEIVED 25 SEP

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NHS Forth Valley

CLIENT: Georgina Smith	NUMBER: 131344
CASEWORKER: Suzanne Riddoch	DATE: 02.11.13

Assessment Summary:

Client presented well at time of assessment and engaged fully throughout.

Client is a 22 year old female who has a short history of offending behaviour which is linked to her alcohol use.

Confidentiality explained to her and professional boundaries discussed and she appeared to understand this.

Background / Recent Events:

Client stated that she was born and raised in Saltcoats with her [redacted] and [redacted] Client stated that she was taken into care when she was 13 years old for not going to [redacted] and remained there until she was 16 years old. Following leaving the care system ended up in a hostel.

Client described her upbringing as troubled and difficult referring to different forms of abuse.

Client stated that she has 2 [redacted] both of which are in permanent care [redacted] in 2012 and has no contact.

Drug / Alcohol History:

Alcohol – client stated that she had her first taste of alcohol when she was only 10 years old which became problematic when she was 16 years old
Cannabis – client stated that she uses cannabis in varying amounts at present but doesn't see this as a problem.

Recent Use:

Client stated that until recently she was drinking 10 x 2 litres of cider daily, client stated that she would drink from a Thursday through to a Monday. Client stated that she has recently stopped smoking with the use of NRT pathches and sees someone from the asthma clinic.

Health Risk Behaviour:

[redacted] reduction discussed today, information given on tolerance, overdose, poly drug use and blood borne viruses. Advised client that should she have any [redacted] regarding her health to submit a referral to the health centre. Client stated that she understands the reasons behind why people overdose. Client stated that she has put herself at risk in the past with the choices she has made.

Health:

Client stated that her general health at present is ok, Client is aware of how to refer to the health centre should she ever need to.

Enhanced Addictions Casework Service
01786 835338

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[redacted]

Why Client Referred:

Client has referred herself as she wishes to address her addiction issues with 1-1 support and using AA.
Client will be listed for AA.

Motivation To Change:

Client appears motivated at this time to address her alcohol issues.

Risk of Lapse / Relapse:

Client is high risk of relapse in the community due to unresolved issues from her past.

Plan of Action:

Interventions completed during assessment

☒ Smoking Cessation Brief Advice ☐ Harm Reduction Paraphernalia Care Plan

Tick boxes checked for referrals made:

☒ 1-1 Contact Frequency: monthly Type: MI

Programmes

☐ Drug Action for Change
☐ Alcohol Awareness
☐ Substance Misuse
☐ Parenting
☐ Connections
☐ Sleep and Anxiety
☐ Constructs
☐ Female Offending Behaviour
☐ Anger Management

If no Programme referrals, reason: Not Suitable at this time.

Other

☐ Housing
☐ Social Work
☐ Chaplain
☐ ROOP
☐ FCDO
☐ Cruise
☐ Social Work Referral (As per ICM page 2 guidelines)
☐ Confidential Issues Referrals - x

Other Phoenix Futures Interventions

☐ Smoking Cessation Brief Advice
☐ Smoking Cessation Group
☐ 2 Hour Alcohol Group
☐ Care Plan Reviews only

Throughcare

☐ TAS Area:
☐ Voluntary Throughcare

If no Throughcare why: In due course

Any Other Referrals:

Enhanced Addictions Casework Service
01786 835338

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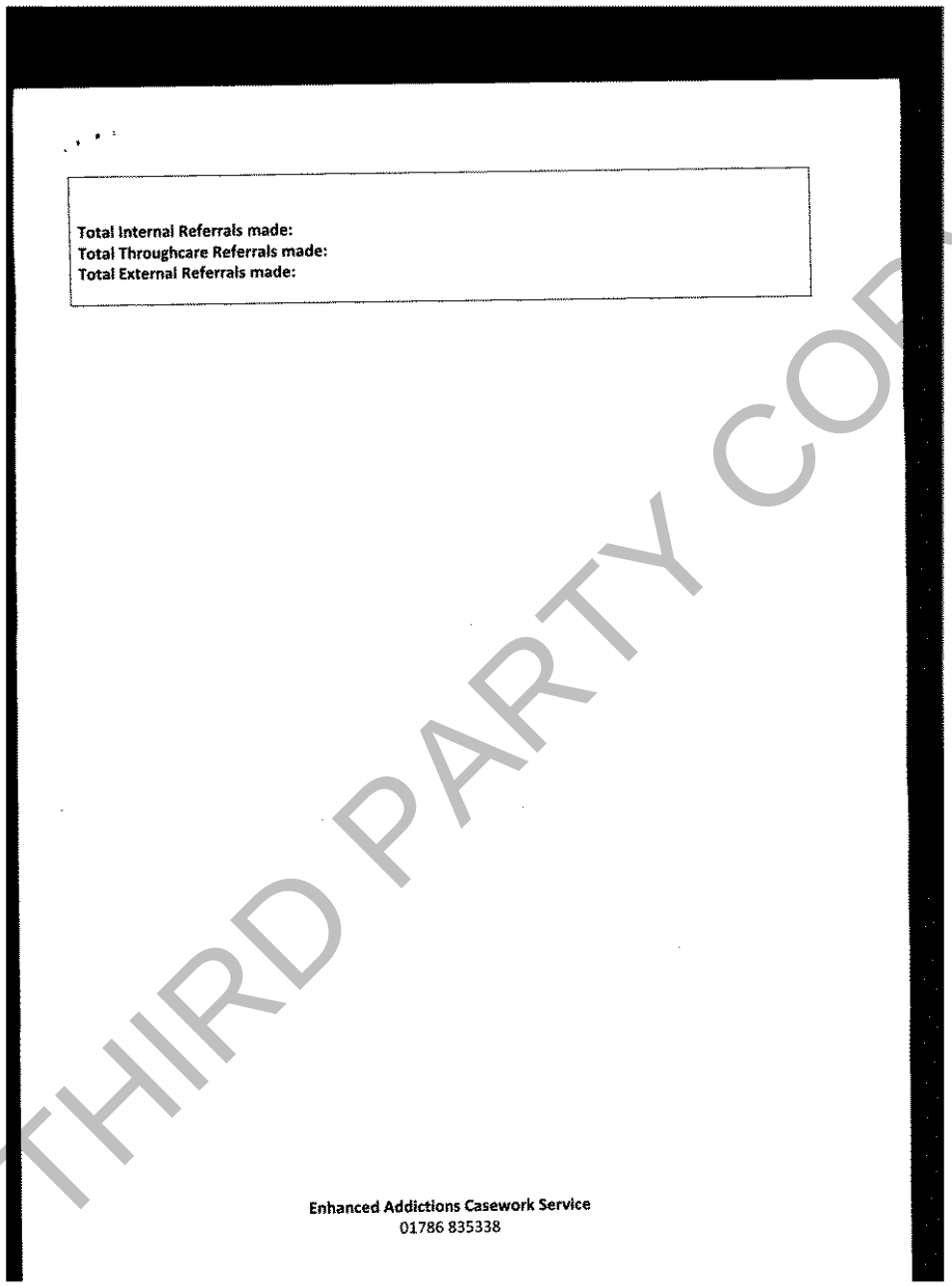


Total Internal Referrals made:
Total Throughcare Referrals made:
Total External Referrals made:

Enhanced Addictions Casework Service
01786 835338

THIRD PARTY COPY

NHS Confidential - Personal data about a patient

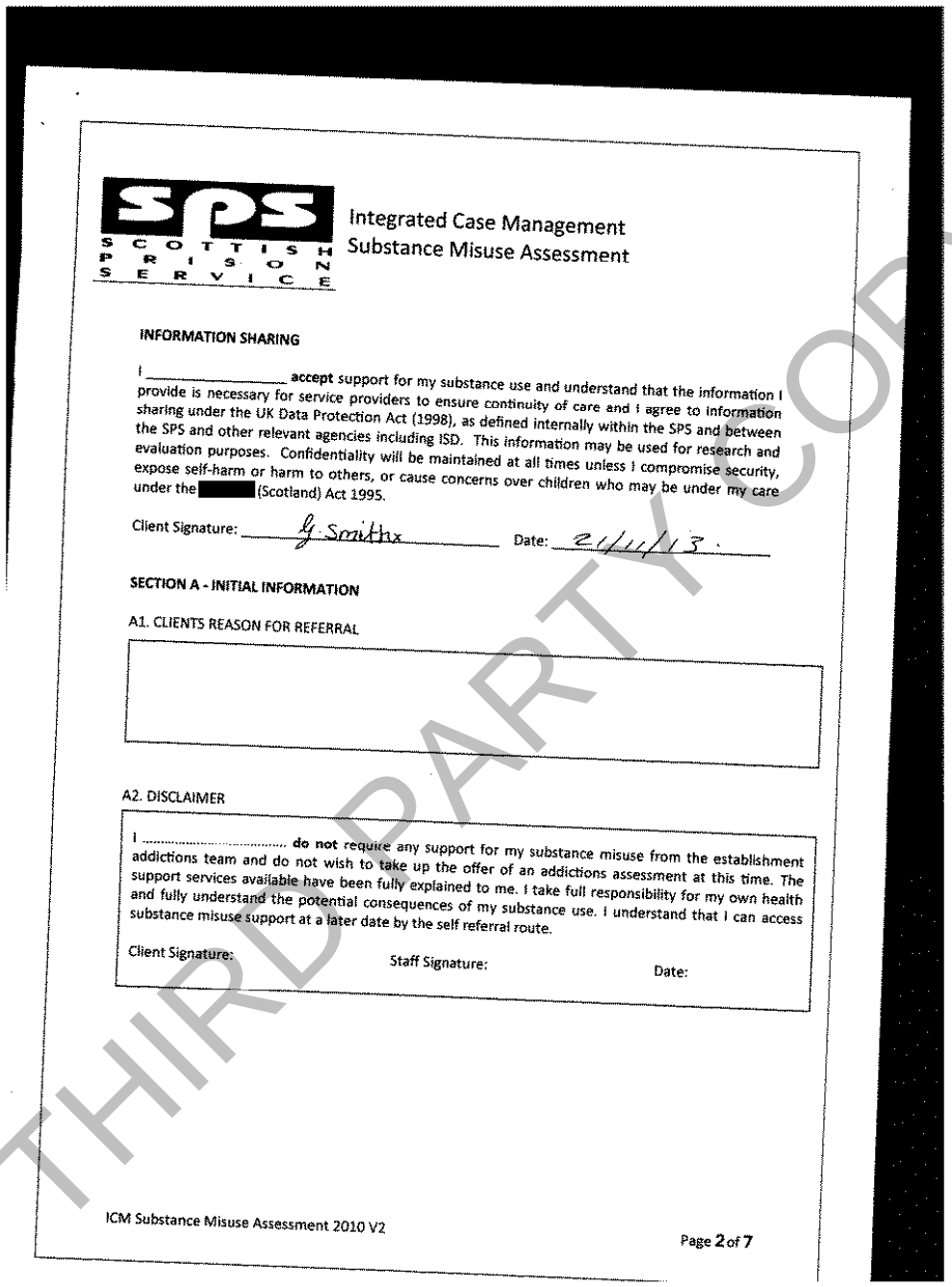
Surname: Smith		Establishment: Cookham Wood	
Forename(s): Georgina		Prison Number: 131346	Gender: F
Date of Birth: 4/12/91	Admission Date: 12/7/13	Sentence: OCL	
EDL:		Tribunal Date:	
PQD:		HDC Qualifying Date:	

Integrated Case Management
Substance Misuse Assessment

Care Plan Agreed & Copy Received by Prisoner			
Prisoner (Print Name): G Smith	Signature: G Smith	Date: 21/11/13	
Caseworker (Print Name): S Liddach	Signature: S Liddach	Date: 21/11/13	

SMR25 Assessment Report has also been completed as part of this Assessment (please tick) ☐

THIRD PARTY COPY



SCOTTISH PRISON SERVICE

Integrated Case Management
Substance Misuse Assessment

INFORMATION SHARING

I _____ **accept** support for my substance use and understand that the information I provide is necessary for service providers to ensure continuity of care and I agree to information sharing under the UK Data Protection Act (1998), as defined internally within the SPS and between the SPS and other relevant agencies including ISD. This information may be used for research and evaluation purposes. Confidentiality will be maintained at all times unless I compromise security, expose self-harm or harm to others, or cause concerns over children who may be under my care under the [redacted] (Scotland) Act 1995.

Client Signature: G Smith Date: 21/11/13.

SECTION A - INITIAL INFORMATION

A1. CLIENTS REASON FOR REFERRAL

A2. DISCLAIMER

I ..... **do not** require any support for my substance misuse from the establishment addictions team and do not wish to take up the offer of an addictions assessment at this time. The support services available have been fully explained to me. I take full responsibility for my own health and fully understand the potential consequences of my substance use. I understand that I can access substance misuse support at a later date by the self referral route.

Client Signature: Staff Signature: Date:

ICM Substance Misuse Assessment 2010 V2 Page 2 of 7

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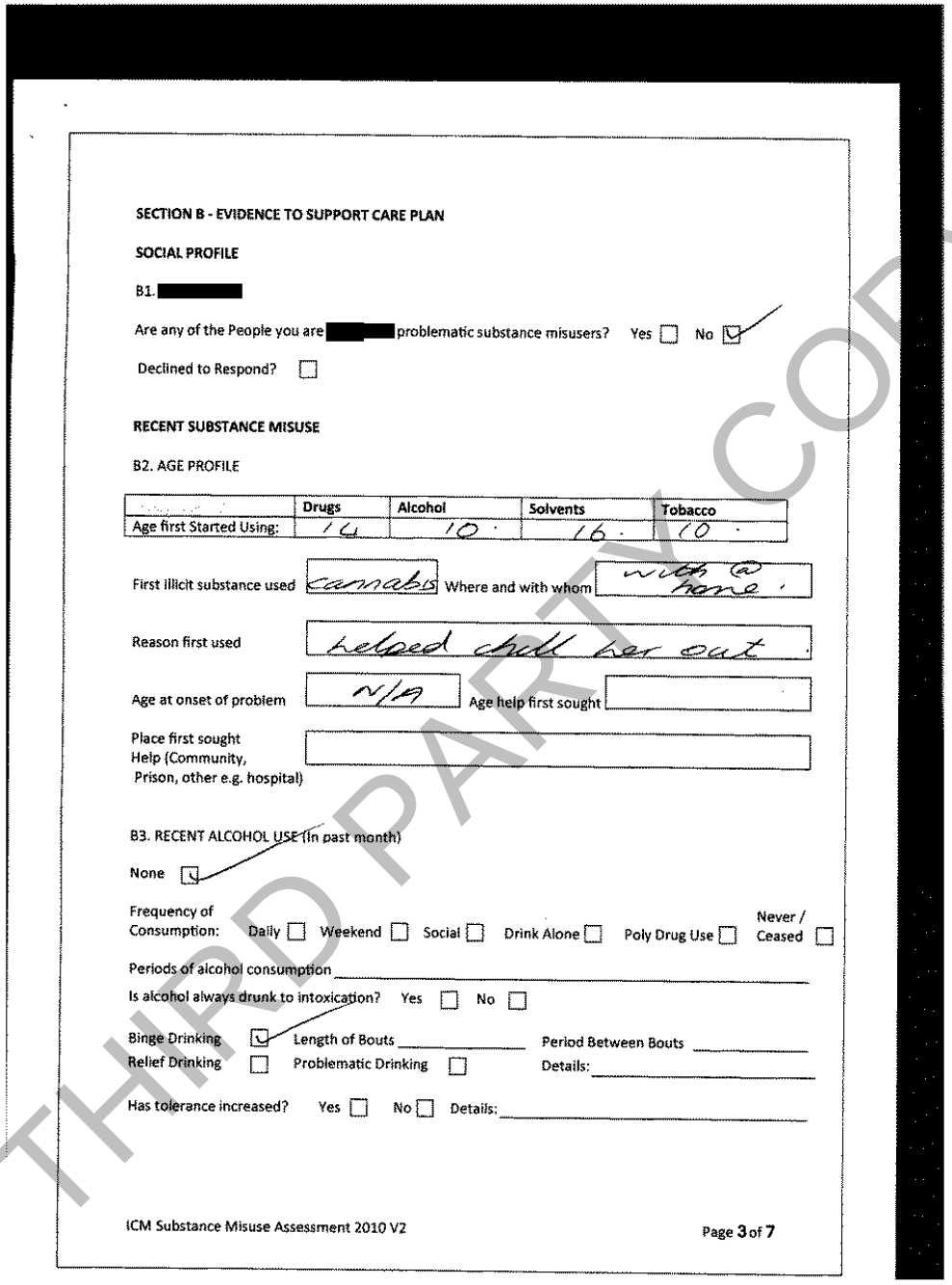

SECTION B - EVIDENCE TO SUPPORT CARE PLAN

SOCIAL PROFILE

B1. [redacted]

Are any of the People you are [redacted] problematic substance misusers? Yes ☐ No ☑

Declined to Respond? ☐

RECENT SUBSTANCE MISUSE

B2. AGE PROFILE

	Drugs	Alcohol	Solvents	Tobacco
Age first Started Using:	14	10.	16.	10.

First illicit substance used: cannabis Where and with whom: with @ home.

Reason first used: helped chill her out.

Age at onset of problem: N/A Age help first sought:

Place first sought Help (Community, Prison, other e.g. hospital):

B3. RECENT ALCOHOL USE (in past month)

None ☑

Frequency of Consumption: Daily ☐ Weekend ☐ Social ☐ Drink Alone ☐ Poly Drug Use ☐ Never / Ceased ☐

Periods of alcohol consumption _____

Is alcohol always drunk to intoxication? Yes ☐ No ☐

Binge Drinking ☑ Length of Bouts _____ Period Between Bouts _____

Relief Drinking ☐ Problematic Drinking ☐ Details: _____

Has tolerance increased? Yes ☐ No ☐ Details: _____

ICM Substance Misuse Assessment 2010 V2 Page 3 of 7

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[redacted]

	Type or Brand	Mixes Drinks (Y or N)	Units		Cost	
			Per Day	Per Wk	Per Day (£)	Per Wk (£)
Alcopops						
Beer	Tennants	Y				
Cider	White Stupl	Y				
Fortified Wine						
Spirits	Vodka	Y				
Wine						
Other						

How is Alcohol Use Funded? _____

B4. RECENT SOLVENT USE (In Past month)

Frequency of Use: Daily ☐ Weekly ☐ Weekend ☐ Never ☐ Stopped ☐

	Amount Used		Cost	
	Per Day	Per Wk	Per Day (£)	Per Wk (£)
Gas Lighter, Refill, Bottled or cylinder gas				
Aerosol Deodorant, Hairspray, Cleaning Fluids etc				
Glue Contact adhesives, Model glue etc.				
Other Products Solvents, Thinners, Dry cleaning Fluids etc				

How is Solvent Use Funded?

B5. SMOKING

Do you smoke? Yes ☑ No ☐ (If "no" proceed to next section)

Would you like to stop? Yes ☑ No ☐ (If "yes" and meets criteria refer for specialist Groupwork)

Have you tried to stop smoking before? Yes ☐ No ☐

What help do you think you need to stop smoking?

currently on patches
seeing someone from Asthma UK

What do you see as the benefits of stopping?

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B6. SEVERITY OF DEPENDANCE (in the last 30 days)

Key: Never/Almost Never = 0, Sometimes = 1, Often = 2, Always/Nearly Always = 3
Or for Question 5 – Not difficult = 0, Quite difficult = 1, Very Difficult =2, Impossible = 3

	Alcohol	Solvents	Cigarettes	Stimulants	Depressants	
1.Do you think your use of (named drug) was out of control	1					
2. Does the prospect of missing a fix/dose make you anxious or worried?	1					
3. Do you worry about your use of (named drug)?	3					
4. Do you wish you could stop?	3					
5. How difficult do you find it to stop or go without (named drug)?	2					
Total SDS Score						
Level of Dependency Indicated						

Scoring:

The SDS is a five-item measure of dependence; altered to suit the type of substance used (Gossop et al. 1995). Each item is scored on a four – point scale from 0-3, giving a range of possible scores form 0-15.

A Total Score of 0- 3 = Low Dependency, 4-6 = Medium Dependency, 7+= High Dependency

B7. [redacted]

None ☐ amanda [redacted] audrie SW

[redacted] Name	DOB	[redacted] Details	Other Name known by	Name of Main [redacted]	Relationship to [redacted]	Main [redacted] Tel. No
[redacted]	26/2/12	adopted 2012				
Oscar Smith	6/1/11	adopted				

Referral to Social work if [redacted] concern

Date Passed and Signature:

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PREVIOUS CONTACT WITH SERVICES

Date of last Contact with Community Specialist Service | DAY | MONTH | YEAR | Agency name

Contact Name | Tel No

Address

Treatment Outcome

If in contact with more than one service please complete below.

Date of last Contact with Community Specialist Service | DAY | MONTH | YEAR | Agency name

Contact Name | Tel No

Address

Treatment Outcome

Date of last Contact with Community Specialist Service | DAY | MONTH | YEAR | Agency name

Contact Name | Tel No

Address

Treatment Outcome

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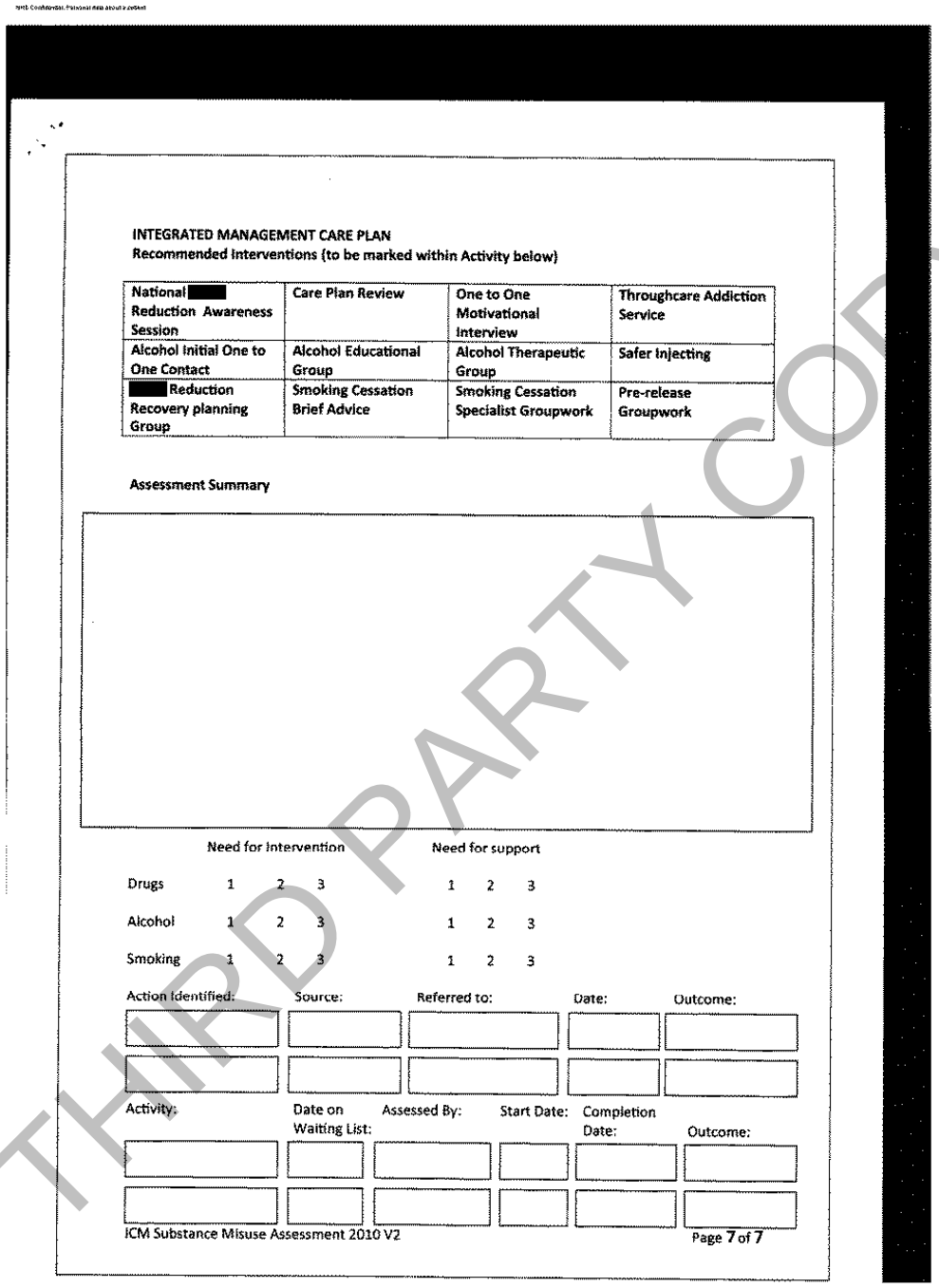

INTEGRATED MANAGEMENT CARE PLAN
Recommended Interventions (to be marked within Activity below)

National [redacted] Reduction Awareness Session	Care Plan Review	One to One Motivational Interview	Throughcare Addiction Service
Alcohol Initial One to One Contact	Alcohol Educational Group	Alcohol Therapeutic Group	Safer Injecting
[redacted] Reduction Recovery planning Group	Smoking Cessation Brief Advice	Smoking Cessation Specialist Groupwork	Pre-release Groupwork

Assessment Summary

	Need for intervention			Need for support		
Drugs	1	2	3	1	2	3
Alcohol	1	2	3	1	2	3
Smoking	1	2	3	1	2	3

Action Identified:	Source:	Referred to:	Date:	Outcome:

Activity:	Date on Waiting List:	Assessed By:	Start Date:	Completion Date:	Outcome:

ICM Substance Misuse Assessment 2010 V2 Page 7 of 7

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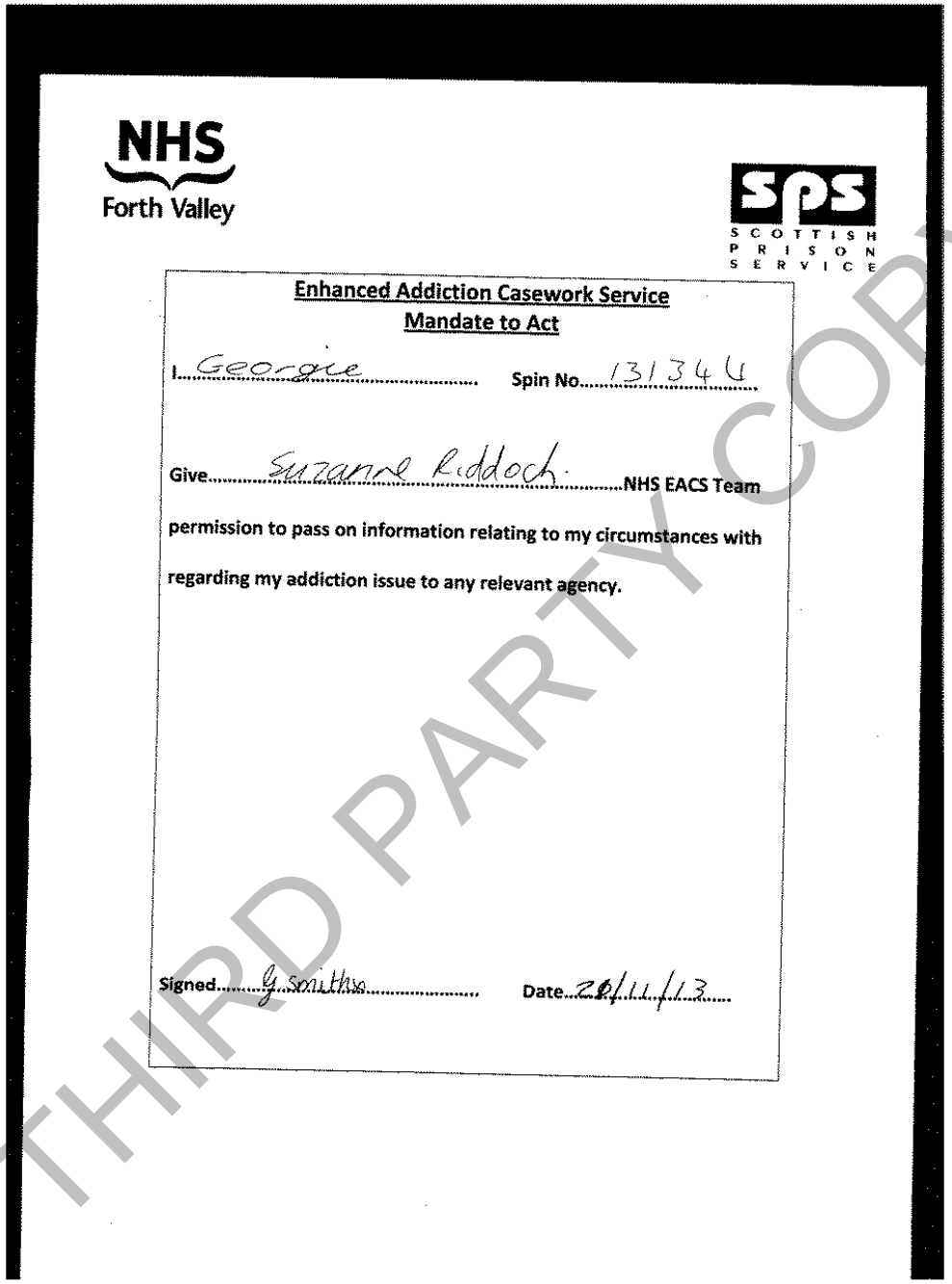

NHS Forth Valley

SPS SCOTTISH PRISON SERVICE

Enhanced Addiction Casework Service
Mandate to Act

I...George..... Spin No...131346...

Give...Suzanne Riddoch.....NHS EACS Team

permission to pass on information relating to my circumstances with

regarding my addiction issue to any relevant agency.

Signed...G.Smith.... Date...20/11/13...

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Extension:.tif
Pages:

NHS Forth Valley

CLIENT: Georgina Smith	NUMBER: 131344
CASEWORKER: Suzanne Riddoch	DATE: 02.11.13

Assessment Summary:

Client presented well at time of assessment and engaged fully throughout.

Client is a 22 year old female who has a short history of offending behaviour which is linked to her alcohol use.

Confidentiality explained to her and professional boundaries discussed and she appeared to understand this.

Background / Recent Events:

Client stated that she was born and raised in Saltcoats with her [redacted] and [redacted] Client stated that she was taken into care when she was 13 years old for not going to [redacted] and remained there until she was 16 years old. Following leaving the care system ended up in a hostel.

Client described her upbringing as troubled and difficult referring to different forms of abuse.

Client stated that she has 2 [redacted] both of which are in permanent care [redacted] in 2012 and has no contact.

Drug / Alcohol History:

Alcohol – client stated that she had her first taste of alcohol when she was only 10 years old which became problematic when she was 16 years old
Cannabis – client stated that she uses cannabis in varying amounts at present but doesn't see this as a problem.

Recent Use:

Client stated that until recently she was drinking 10 x 2 litres of cider daily, client stated that she would drink from a Thursday through to a Monday. Client stated that she has recently stopped smoking with the use of NRT pathches and sees someone from the asthma clinic.

Health Risk Behaviour:

[redacted] reduction discussed today, information given on tolerance, overdose, poly drug use and blood borne viruses. Advised client that should she have any [redacted] regarding her health to submit a referral to the health centre. Client stated that she understands the reasons behind why people overdose. Client stated that she has put herself at risk in the past with the choices she has made.

Health:

Client stated that her general health at present is ok, Client is aware of how to refer to the health centre should she ever need to.

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[redacted]

Why Client Referred:

Client has referred herself as she wishes to address her addiction issues with 1-1 support and using AA.
Client will be listed for AA.

Motivation To Change:

Client appears motivated at this time to address her alcohol issues.

Risk of Lapse / Relapse:

Client is high risk of relapse in the community due to unresolved issues from her past.

Plan of Action:

Interventions completed during assessment

☒ Smoking Cessation Brief Advice ☐ Harm Reduction Paraphernalia Care Plan

Tick boxes checked for referrals made:

☒ 1-1 Contact Frequency: monthly Type: MI

Programmes

☐ Drug Action for Change
☐ Alcohol Awareness
☐ Substance Misuse
☐ Parenting
☐ Connections
☐ Sleep and Anxiety
☐ Constructs
☐ Female Offending Behaviour
☐ Anger Management

If no Programme referrals, reason: Not Suitable at this time.

Other

☐ Housing
☐ Social Work
☐ Chaplain
☐ ROOP
☐ FCDO
☐ Cruise
☐ Social Work Referral (As per ICM page 2 guidelines)
☐ Confidential Issues Referrals - x

Other Phoenix Futures Interventions

☐ Smoking Cessation Brief Advice
☐ Smoking Cessation Group
☐ 2 Hour Alcohol Group
☐ Care Plan Reviews only

Throughcare

☐ TAS Area:
☐ Voluntary Throughcare

If no Throughcare why: In due course

Any Other Referrals:

Enhanced Addictions Casework Service
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[redacted]

Total Internal Referrals made:
Total Throughcare Referrals made:
Total External Referrals made:

[redacted]

Enhanced Addictions Casework Service
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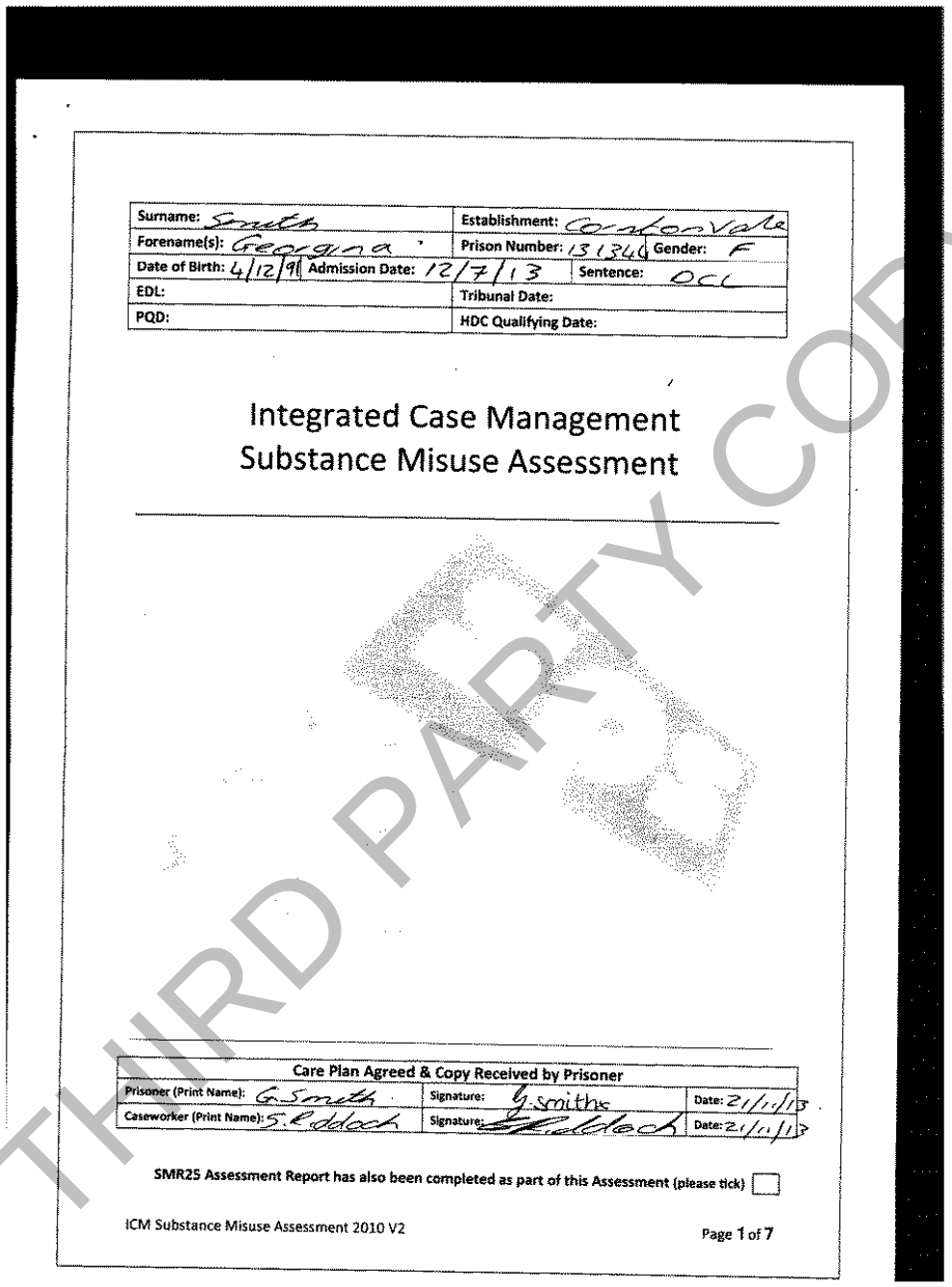


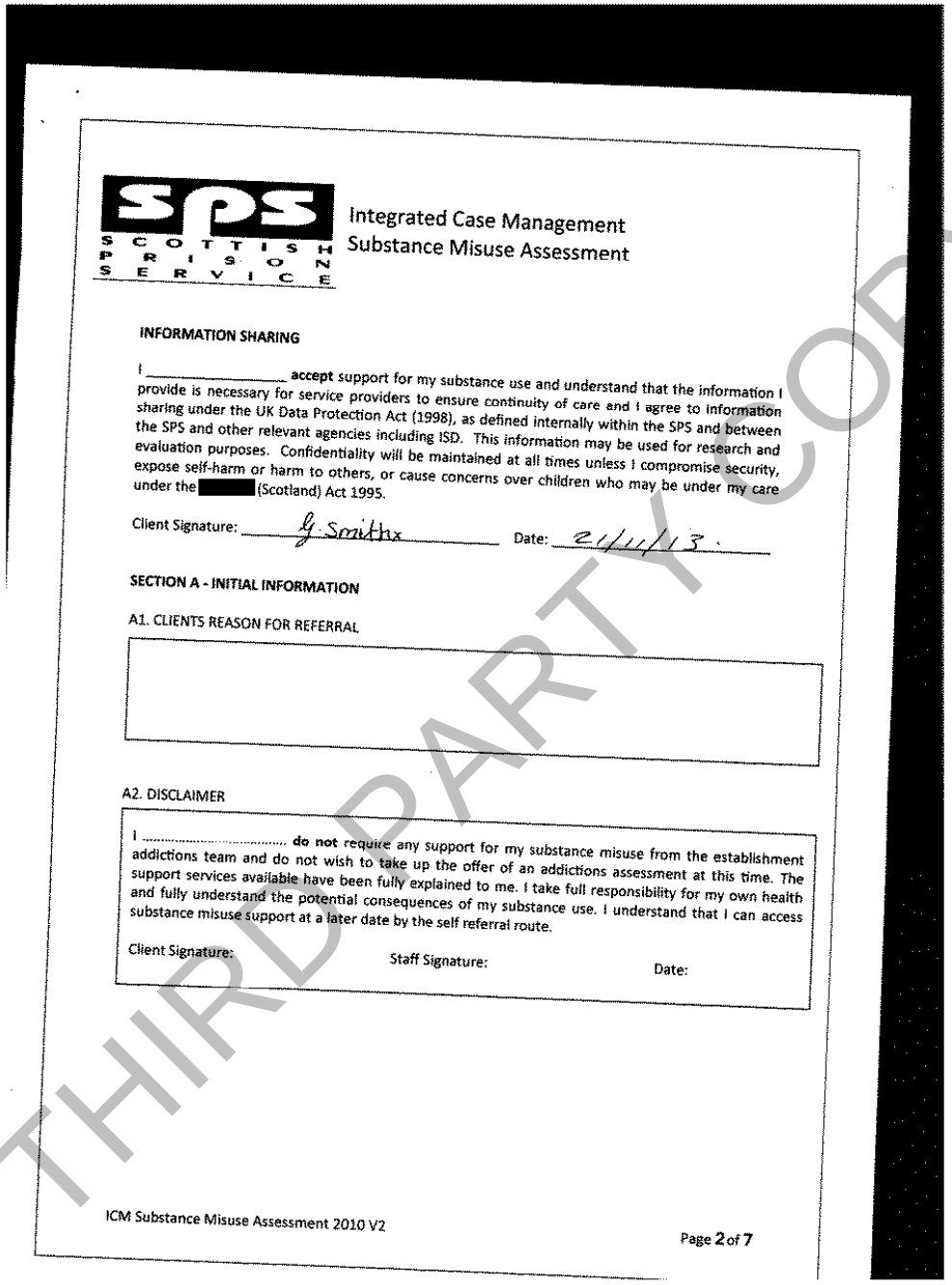
Surname: Smith	Establishment: Cookham Wood
Forename(s): Georgina	Prison Number: 131346 Gender: F
Date of Birth: 4/12/91 Admission Date: 12/7/13	Sentence: OCL
EDL:	Tribunal Date:
PQD:	HDC Qualifying Date:

Integrated Case Management
Substance Misuse Assessment

Care Plan Agreed & Copy Received by Prisoner		
Prisoner (Print Name): G Smith	Signature: G Smith	Date: 21/11/13
Caseworker (Print Name): S Liddell	Signature: S Liddell	Date: 21/11/13

SMR25 Assessment Report has also been completed as part of this Assessment (please tick) ☐

THIRD PARTY COPY



SCOTTISH PRISON SERVICE

Integrated Case Management
Substance Misuse Assessment

INFORMATION SHARING

I _____ **accept** support for my substance use and understand that the information I provide is necessary for service providers to ensure continuity of care and I agree to information sharing under the UK Data Protection Act (1998), as defined internally within the SPS and between the SPS and other relevant agencies including ISD. This information may be used for research and evaluation purposes. Confidentiality will be maintained at all times unless I compromise security, expose self-harm or harm to others, or cause concerns over children who may be under my care under the [redacted] (Scotland) Act 1995.

Client Signature: G Smith Date: 24/11/13.

SECTION A - INITIAL INFORMATION

A1. CLIENTS REASON FOR REFERRAL

A2. DISCLAIMER

I ..... **do not** require any support for my substance misuse from the establishment addictions team and do not wish to take up the offer of an addictions assessment at this time. The support services available have been fully explained to me. I take full responsibility for my own health and fully understand the potential consequences of my substance use. I understand that I can access substance misuse support at a later date by the self referral route.

Client Signature: Staff Signature: Date:

ICM Substance Misuse Assessment 2010 V2 Page 2 of 7

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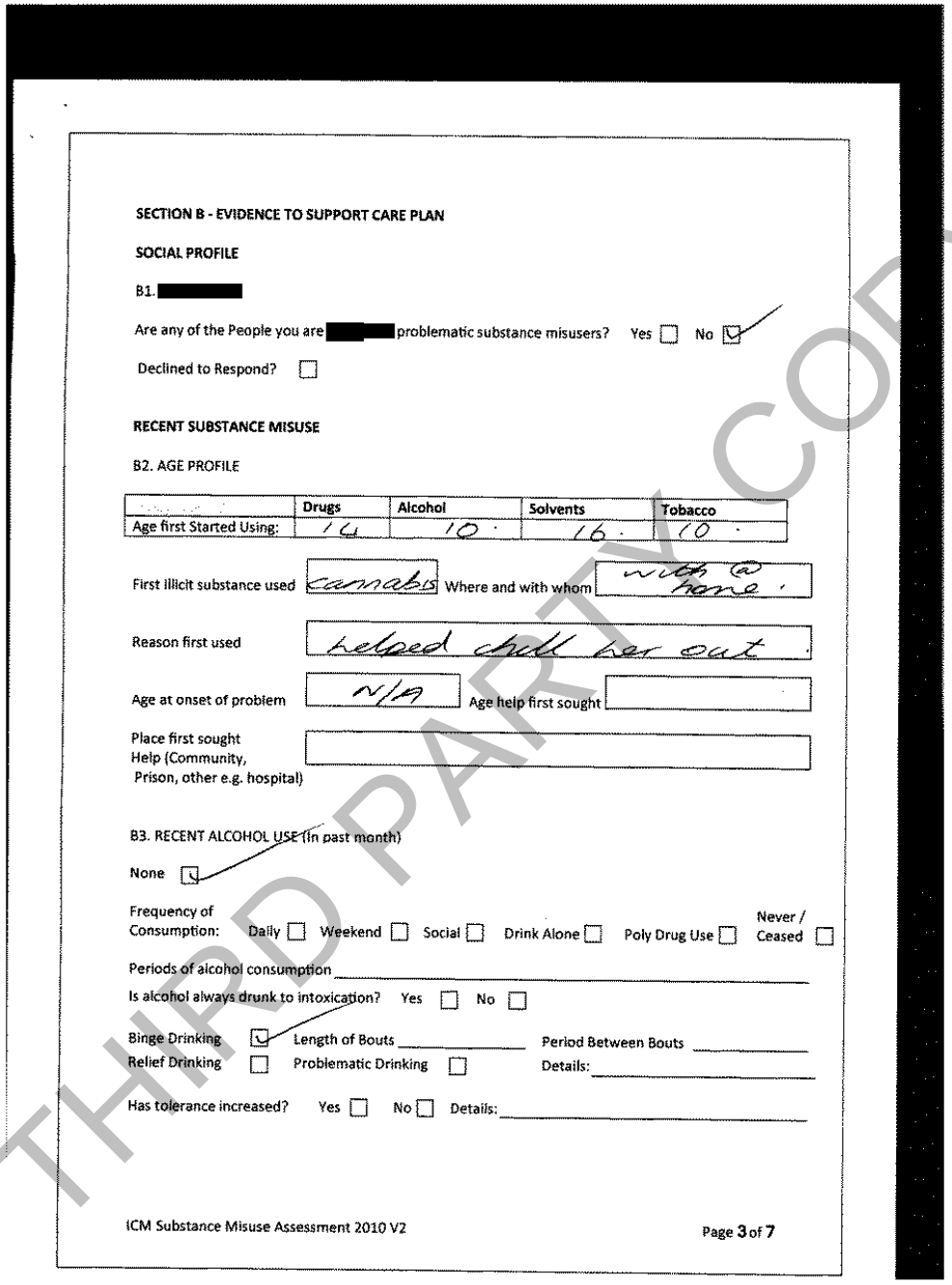

SECTION B - EVIDENCE TO SUPPORT CARE PLAN

SOCIAL PROFILE

B1. [redacted]

Are any of the People you are [redacted] problematic substance misusers? Yes ☐ No ☑

Declined to Respond? ☐

RECENT SUBSTANCE MISUSE

B2. AGE PROFILE

	Drugs	Alcohol	Solvents	Tobacco
Age first Started Using:	14	10.	16.	10.

First illicit substance used: cannabis Where and with whom: with @ home.

Reason first used: helped chill her out.

Age at onset of problem: N/A Age help first sought:

Place first sought Help (Community, Prison, other e.g. hospital):

B3. RECENT ALCOHOL USE (in past month)

None ☑

Frequency of Consumption: Daily ☐ Weekend ☐ Social ☐ Drink Alone ☐ Poly Drug Use ☐ Never / Ceased ☐

Periods of alcohol consumption _____

Is alcohol always drunk to intoxication? Yes ☐ No ☐

Binge Drinking ☑ Length of Bouts _____ Period Between Bouts _____

Relief Drinking ☐ Problematic Drinking ☐ Details: _____

Has tolerance increased? Yes ☐ No ☐ Details: _____

ICM Substance Misuse Assessment 2010 V2 Page 3 of 7

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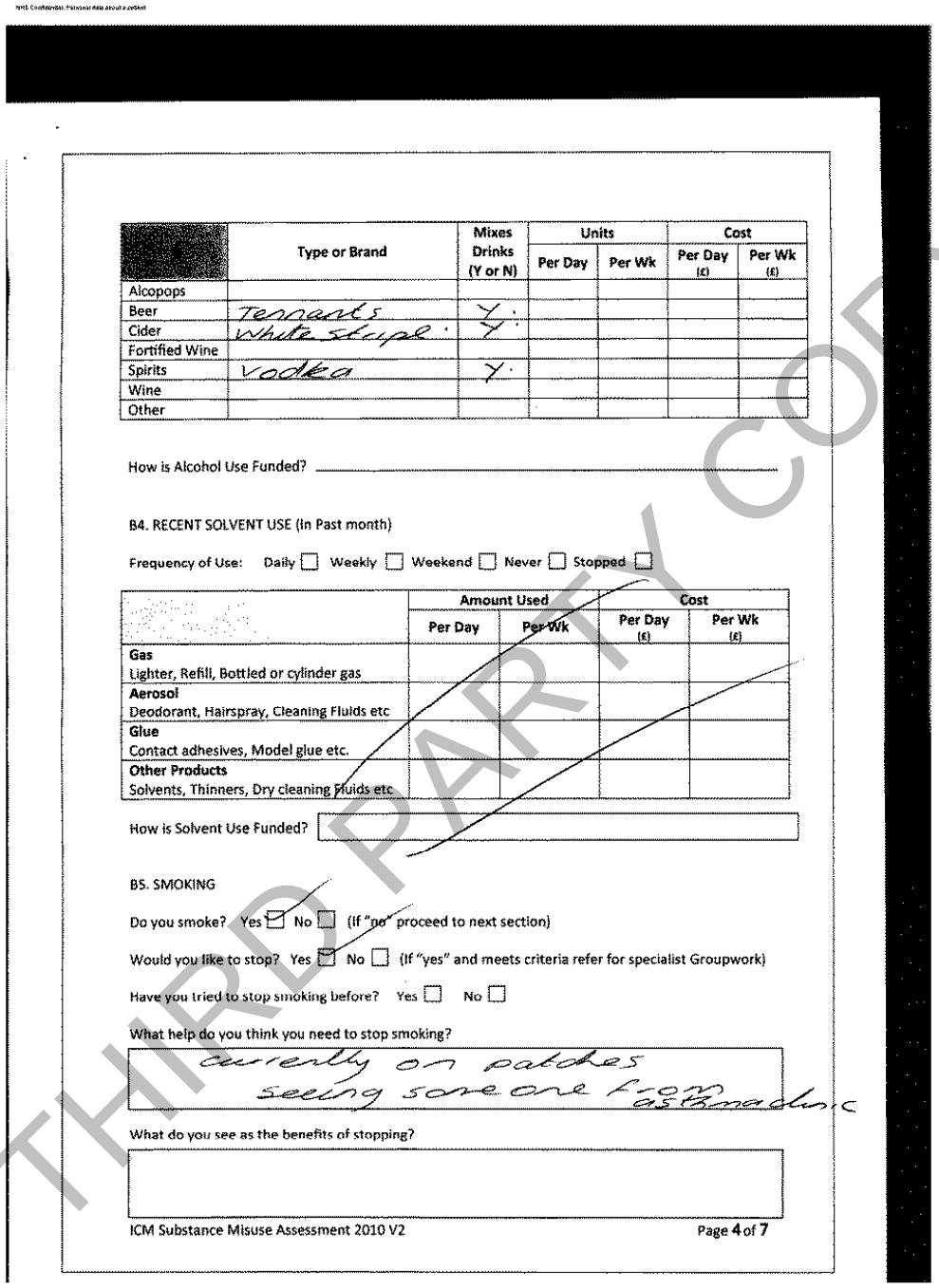

	Type or Brand	Mixes Drinks (Y or N)	Units		Cost	
			Per Day	Per Wk	Per Day (£)	Per Wk (£)
Alcopops						
Beer	Tennants	Y				
Cider	White Stripe	Y				
Fortified Wine						
Spirits	Vodka	Y				
Wine						
Other						

How is Alcohol Use Funded? _____

B4. RECENT SOLVENT USE (In Past month)

Frequency of Use: Daily ☐ Weekly ☐ Weekend ☐ Never ☐ Stopped ☐

	Amount Used		Cost	
	Per Day	Per Wk	Per Day (£)	Per Wk (£)
Gas Lighter, Refill, Bottled or cylinder gas				
Aerosol Deodorant, Hairspray, Cleaning Fluids etc				
Glue Contact adhesives, Model glue etc.				
Other Products Solvents, Thinners, Dry cleaning Fluids etc				

How is Solvent Use Funded?

B5. SMOKING

Do you smoke? Yes ☑ No ☐ (If "no" proceed to next section)

Would you like to stop? Yes ☑ No ☐ (If "yes" and meets criteria refer for specialist Groupwork)

Have you tried to stop smoking before? Yes ☐ No ☐

What help do you think you need to stop smoking?

currently on patches
seeing someone from Asthma UK

What do you see as the benefits of stopping?

ICM Substance Misuse Assessment 2010 V2 Page 4 of 7

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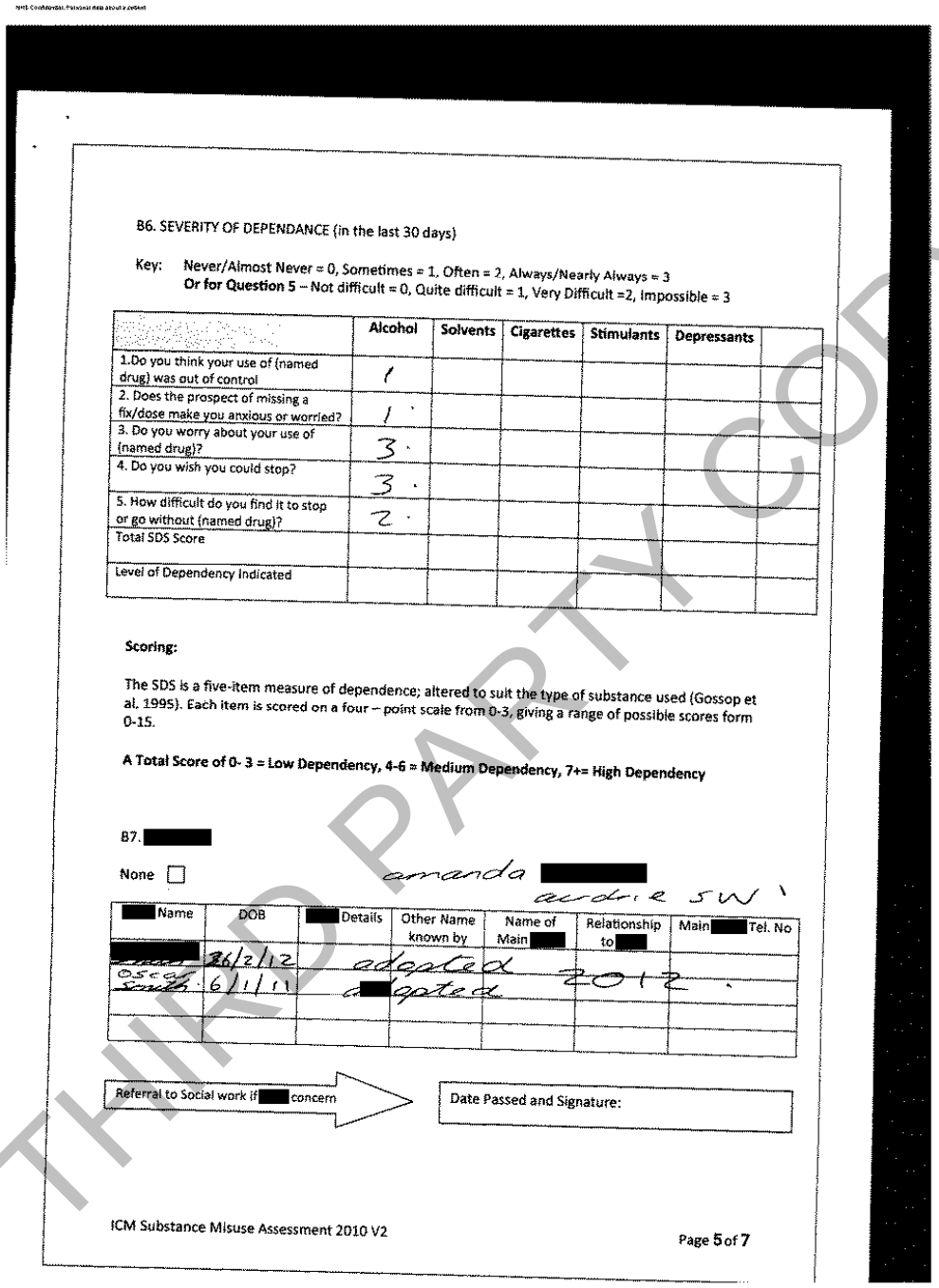

B6. SEVERITY OF DEPENDANCE (in the last 30 days)

Key: Never/Almost Never = 0, Sometimes = 1, Often = 2, Always/Nearly Always = 3
Or for Question 5 – Not difficult = 0, Quite difficult = 1, Very Difficult =2, Impossible = 3

	Alcohol	Solvents	Cigarettes	Stimulants	Depressants	
1.Do you think your use of (named drug) was out of control	1					
2. Does the prospect of missing a fix/dose make you anxious or worried?	1					
3. Do you worry about your use of (named drug)?	3					
4. Do you wish you could stop?	3					
5. How difficult do you find it to stop or go without (named drug)?	2					
Total SDS Score						
Level of Dependency Indicated						

Scoring:

The SDS is a five-item measure of dependence; altered to suit the type of substance used (Gossop et al. 1995). Each item is scored on a four – point scale from 0-3, giving a range of possible scores form 0-15.

A Total Score of 0- 3 = Low Dependency, 4-6 = Medium Dependency, 7+= High Dependency

B7. [redacted]

None ☐ amanda [redacted] audrie SW

[redacted] Name	DOB	[redacted] Details	Other Name known by	Name of Main [redacted]	Relationship to [redacted]	Main [redacted] Tel. No
[redacted]	26/2/12	adopted 2012				
Oscar Smith	6/1/11	adopted				

Referral to Social work if [redacted] concern

Date Passed and Signature:

ICM Substance Misuse Assessment 2010 V2

Page 5 of 7

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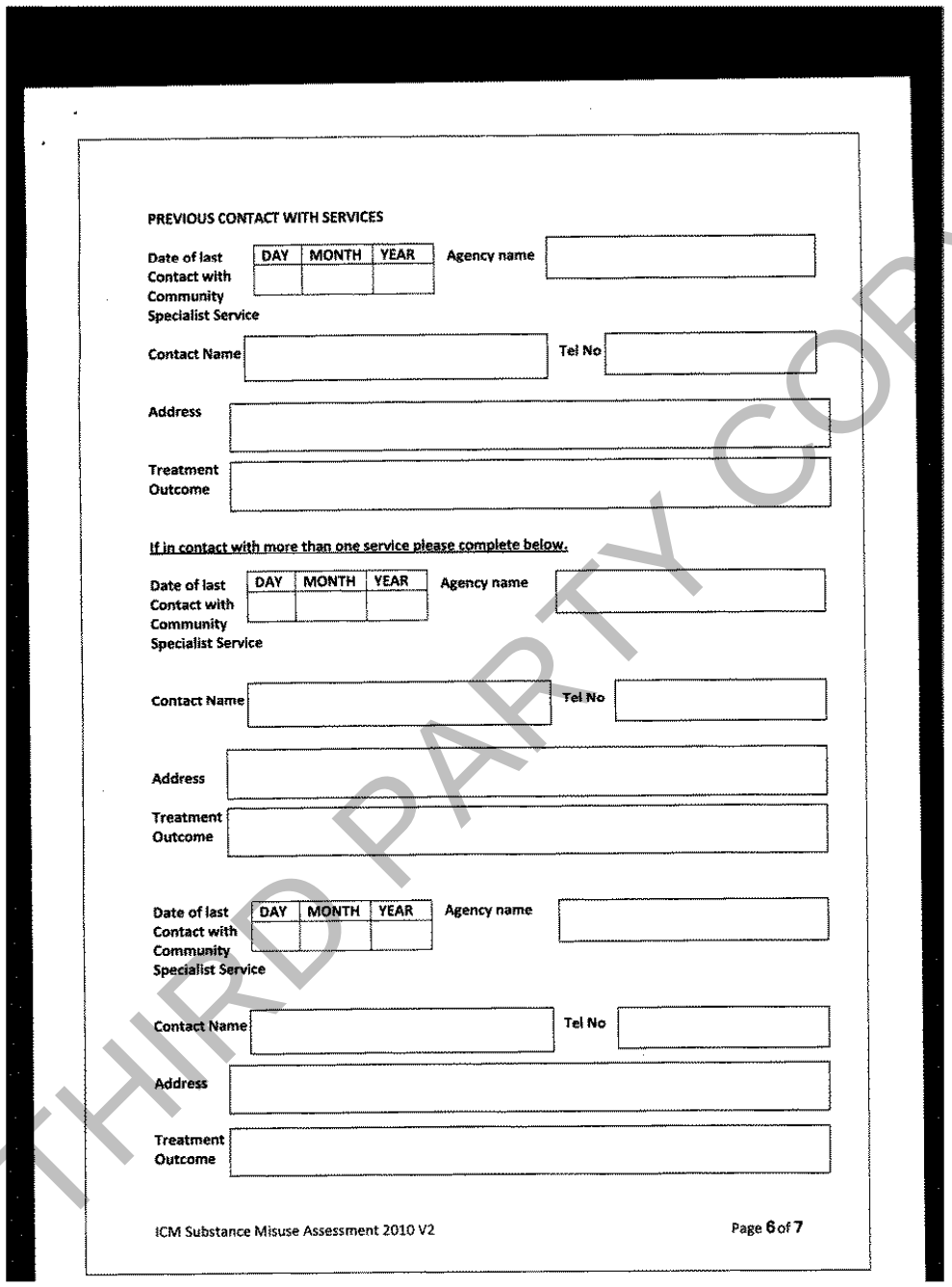

PREVIOUS CONTACT WITH SERVICES

Date of last Contact with Community Specialist Service | DAY | MONTH | YEAR | Agency name

Contact Name | Tel No

Address

Treatment Outcome

If in contact with more than one service please complete below.

Date of last Contact with Community Specialist Service | DAY | MONTH | YEAR | Agency name

Contact Name | Tel No

Address

Treatment Outcome

Date of last Contact with Community Specialist Service | DAY | MONTH | YEAR | Agency name

Contact Name | Tel No

Address

Treatment Outcome

ICM Substance Misuse Assessment 2010 V2 Page 6 of 7

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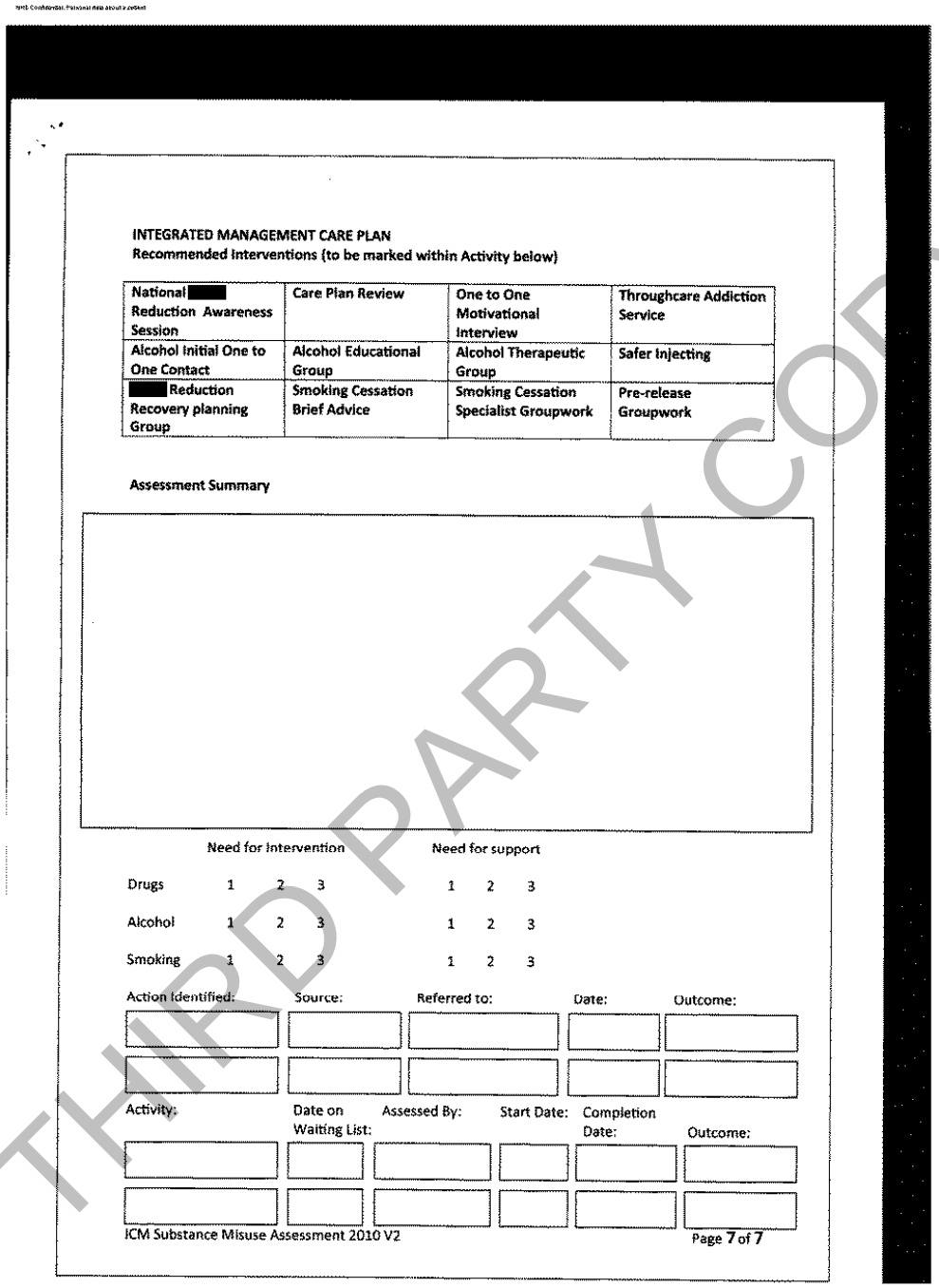

INTEGRATED MANAGEMENT CARE PLAN
Recommended Interventions (to be marked within Activity below)

National [redacted] Reduction Awareness Session	Care Plan Review	One to One Motivational Interview	Throughcare Addiction Service
Alcohol Initial One to One Contact	Alcohol Educational Group	Alcohol Therapeutic Group	Safer Injecting
[redacted] Reduction Recovery planning Group	Smoking Cessation Brief Advice	Smoking Cessation Specialist Groupwork	Pre-release Groupwork

Assessment Summary

	Need for intervention			Need for support		
Drugs	1	2	3	1	2	3
Alcohol	1	2	3	1	2	3
Smoking	1	2	3	1	2	3

Action Identified:	Source:	Referred to:	Date:	Outcome:

Activity:	Date on Waiting List:	Assessed By:	Start Date:	Completion Date:	Outcome:

ICM Substance Misuse Assessment 2010 V2 Page 7 of 7

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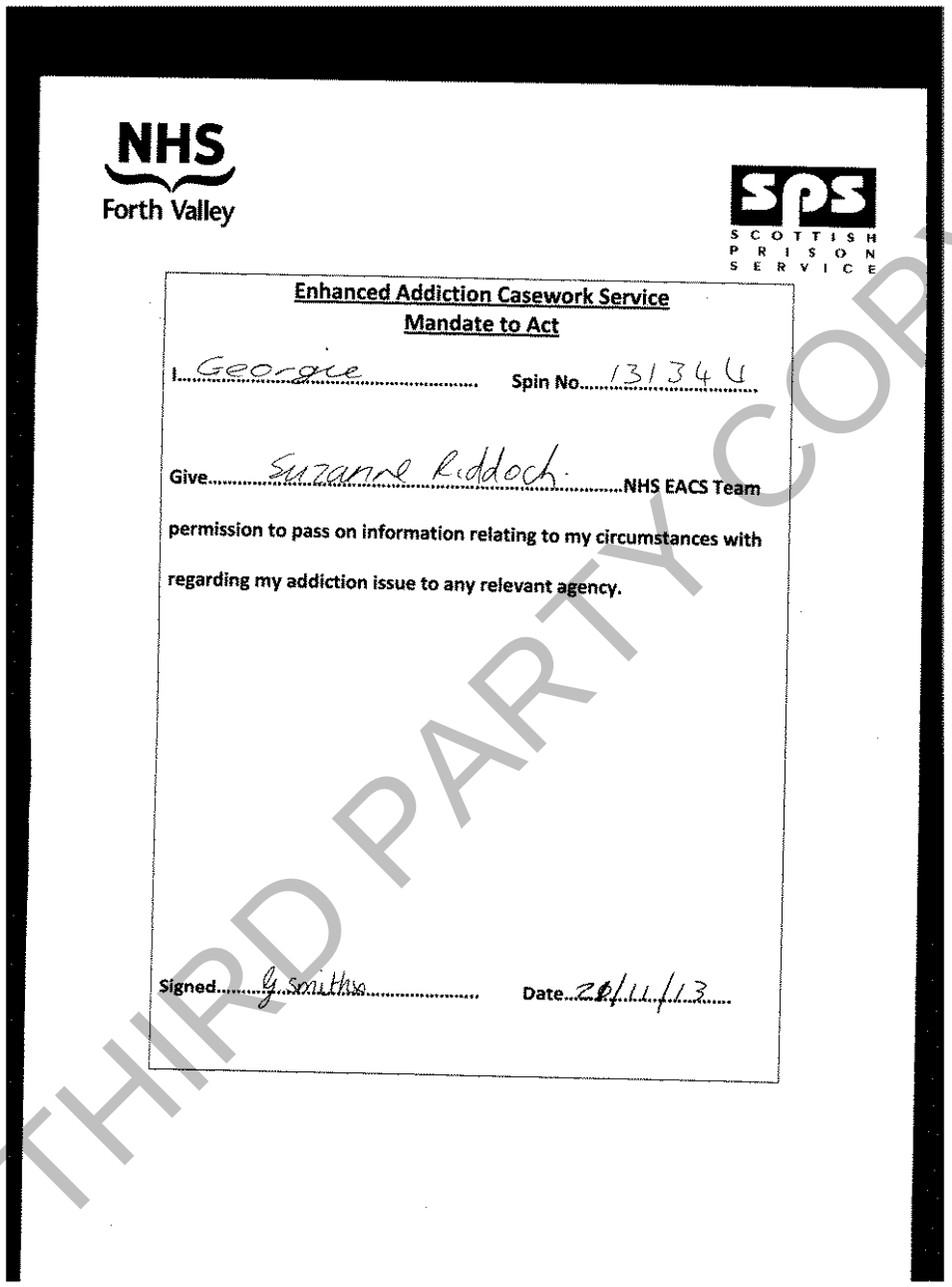

NHS Forth Valley

SPS SCOTTISH PRISON SERVICE

Enhanced Addiction Casework Service
Mandate to Act

I...Georgie..... Spin No...131346...

Give...Suzanne Riddoch.....NHS EACS Team

permission to pass on information relating to my circumstances with

regarding my addiction issue to any relevant agency.

Signed...G Smith.... Date...28/11/13...

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Pages:

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MICROLAB 3500 UK v6.00 FULL REPORT

Patient Name: Georgina Smith 131344

ID: Date: 01/11/13 Time: 16:23
Sex: Female Age: 21 Race: CAUCASIAN
Height: 64 in

All Spirometry Results

	BASE			POST		
TEST	1	2	3	4	5	6
FEV1	2.36	2.69	2.58	2.52	3.08	2.94
FVC	2.91	3.13	2.61	3.07	3.09	3.14
PEF	157	208	241	169	313	254
VAR	-12	0	-4	-18	0	-5

Best Spirometry Result: Base = 2 Post = 5

	Base	%Pred	PostBD	%Pred	%Chg	Normal Min	Normal Pred	Normal Max	
FEV1	2.69	84	3.08	96	+14	2.59	3.21	3.83	L
FVC	3.13	85	3.09	84	-1	2.97	3.68	4.39	L
PEF	208	49	313	74	+50	337	426	514	L/M
FEV1%	86	102	100	119	+16	74	84	95	%
F50	2.88	64	4.21	93	+46	2.71	4.52	6.33	L/S
F25	1.81	83	2.35	107	+30	1.06	2.19	3.32	L/S
MEF	2.77	68	3.86	94	+39	2.70	4.10	5.50	L/S
I50									L/S
R50									%
PIF									L/S
MVV	101		115		+15				L
FET	2.82		2.03		-28				S

[redacted] Age = 43 Years.

Interpretation: Normal Spirometry.

Normal Values: ECCS (adult);
Zapletal,Solymar,Cogswell [redacted]

Results at BTPS

Technician: _____

Physician: _____

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Filename: igprda202606181527380.pdf
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NHS Confidential: Personal data about a patient

MICROLAB 3500 UK v6.00 FULL REPORT

Patient Name: Georgina Smith 131344

ID: Date: 01/11/13 Time: 16:23
Sex: Female Age: 21 Race: CAUCASIAN
Height: 64 in

All Spirometry Results

	BASE			POST		
TEST	1	2	3	4	5	6
FEV1	2.36	2.69	2.58	2.52	3.08	2.94
FVC	2.91	3.13	2.61	3.07	3.09	3.14
PEF	157	208	241	169	313	254
VAR	-12	0	-4	-18	0	-5

Best Spirometry Result: Base = 2 Post = 5

	Base	%Pred	PostBD	%Pred	%Chg	Normal Min	Normal Pred	Normal Max	
FEV1	2.69	84	3.08	96	+14	2.59	3.21	3.83	L
FVC	3.13	85	3.09	84	-1	2.97	3.68	4.39	L
PEF	208	49	313	74	+50	337	426	514	L/M
FEV1%	86	102	100	119	+16	74	84	95	%
F50	2.88	64	4.21	93	+46	2.71	4.52	6.33	L/S
F25	1.81	83	2.35	107	+30	1.06	2.19	3.32	L/S
MEF	2.77	68	3.86	94	+39	2.70	4.10	5.50	L/S
I50									L/S
R50									%
PIF									L/S
MVV	101		115		+15				L
FET	2.82		2.03		-28				S

[redacted] Age = 43 Years.

Interpretation: Normal Spirometry.

Normal Values: ECCS (adult);
Zapletal,Solymar,Cogswell [redacted]

Results at BTPS

Technician: _____

Physician: _____

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NHS
Forth Valley

Medical & Confidential

[redacted] McCormack Solicitors
2nd Floor
1[redacted] Street
Motherwell
ML1 1GG

Health Centre
HM Prison Cornton Vale
Cornton Road
STIRLING
FK9 5NU

Tel No: 01786 835335
Fax No: 01786 835337

Our Ref: CS/SE
Your Ref:
Date: 04th December 13

Dear Sirs,
Re: Georgina Smith (DOB: 04/12/1991)

I write further to your correspondence of the 28th November 2013 in relation to your client above. I note in your opening paragraph you refer to numerous requests for her to see medical staff within the Establishment but I can confirm that this letter is the only correspondence received from yourself requesting specific medical review. You also refer to "serious medical problems" although you fail to refer to any objective medical assessment that has resulted in the diagnoses of any serious medical condition.

I can confirm that your client has seen medical and nursing staff, including our visiting forensic [redacted] on minimum of 35 occasions following her admission in July 2013 which I am sure you will agree does not represent limited access to medical service provision. Despite your comments I am clinically satisfied that your client is not suffering from any serious medical condition which is supported by hematological and biochemical results all being returned within the normal range together with repeated clinical examination findings being normal including her current weight / body mass index. You state that your client is unable to eat without being sick and I can advise during consultation with our health care team your client has confirmed that this is as a consequence of self induced vomiting but as documented above she continues to maintain a normal body mass index indicating adequate dietary intake.

Yours faithfully

DR CRAIG SAYERS
Medical Officer

Chairman [redacted] Linkston CBE
Chief Executive [redacted] MA(Hons) MBA CIHM DipHSM

Forth Valley NHS Board is the common name for Forth Valley Health Board
Registered Office: Carseview House, Castle Business Park, Stirling, FK9 4SW

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Forth Valley

Medical & Confidential

[redacted] McCormack Solicitors
2nd Floor
1 [redacted] Street
Motherwell
ML1 1GG

Health Centre
HM Prison Cornton Vale
Cornton Road
STIRLING
FK9 5NU

Tel No: 01786 835335
Fax No: 01786 835337

Our Ref: CS/SE
Your Ref:
Date: 04th December 13

Dear Sirs,
Re: Georgina Smith (DOB: 04/12/1991)

I write further to your correspondence of the 28th November 2013 in relation to your client above. I note in your opening paragraph you refer to numerous requests for her to see medical staff within the Establishment but I can confirm that this letter is the only correspondence received from yourself requesting specific medical review. You also refer to "serious medical problems" although you fail to refer to any objective medical assessment that has resulted in the diagnoses of any serious medical condition.

I can confirm that your client has seen medical and nursing staff including our visiting forensic [redacted] on minimum of 35 occasions following her admission in July 2013 which I am sure you will agree does not represent limited access to medical service provision. Despite your comments I am clinically satisfied that your client is not suffering from any serious medical condition which is supported by hematological and biochemical results all being returned within the normal range together with repeated clinical examination findings being normal including her current weight / body mass index. You state that your client is unable to eat without being sick and I can advise during consultation with our health care team your client has confirmed that this is as a consequence of self induced vomiting but as documented above she continues to maintain a normal body mass index indicating adequate dietary intake.

Yours faithfully

DR CRAIG SAYERS
Medical Officer

Chairman [redacted] Linkston CBE
Chief Executive [redacted] MA(Hons) MBA CIHM DipHSM

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NHS
Forth Valley
Microbiology

SURNAME: SMITH P.O Box 21616 Stirling	FORENAME: GEORGINA	UNIT No.: STI1106554	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr Craig Sayers	WARD: Prison Medical Officer CORN G.P.: Cornton Vale H.M. Institution		
CLINICAL DATA: sti screen			

Chlamydia trachomatis PCR — Negative
N.gonorrhoeae PCR — Negative

* Chlamydia / Gonorrhoea testing should only be done if there is a clinical indication OR if there is a concern following [redacted] risk.
* All diagnosed with Chlamydia should have [redacted] notification and be retested at 3-12 months.
* For advice / help contact Central [redacted] Health Helpline 01324 613944 (Mon-Fri 9-12).

RECEIVED
29 JAN 2014

EXAMINATION: Chlamydia trachomatis PCR	LAB No.: MS040660X	AUTHORISED	
NATURE OF SPECIMEN: Low Vaginal swab	DATE COLLECTED: 22/01/2014	DATE RECEIVED: 22/01/2014	DATE REPORTED: 24/01/2014

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NHS Forth Valley
Microbiology

SURNAME: SMITH	FORENAME: GEORGINA
P.O Box 21616 Stirling	[redacted] STI1106554
	DATE OF BIRTH: 04/12/1991 SEX: F
CONSULTANT: Dr [redacted] Sayers	WARD: Prison Medical Officer CORN
	G.P.: Cornton Vale H.M. Institution
CLINICAL DATA: sti screen	

Pyogenic Culture
Microscopy.
White Blood Cells nil
Yeasts nil
Trichomonas vaginalis nil
Culture.
No pathogens isolated

RECEIVED
29 JAN 2014

EXAMINATION: Pyogenic Culture	LAB No. MG058968J	AUTHORISED	
NATURE OF SPECIMEN: Low Vaginal swab	DATE COLLECTED 22/01/2014	DATE RECEIVED 22/01/2014	DATE REPORTED 24/01/2014

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NHS
Forth Valley
Microbiology

SURNAME	FORENAME	UNIT No.
SMITH P.O Box 21616 Stirling	GEORGINA	STI1106554
	DATE OF BIRTH: 04/12/1991	SEX: F

CONSULTANT: Unknown

WARD: Prison Medical Officer CORN

G.P.: Cornton Vale H.M. Institution

CLINICAL DATA: PRODUCTIVE COUGH ?CHEST INFECTION

Pyogenic Culture
Microscopy.
A.A.F.B. nil
Culture.
No Lower Respiratory Tract pathogens isolated

EXAMINATION	LAB No.	AUTHORISED	
Pyogenic Culture	MG047262B		
NATURE OF SPECIMEN	DATE COLLECTED	DATE RECEIVED	DATE REPORTED
Sputum	13/02/2014	14/02/2014	18/02/2014

[redacted]

File

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NHS
Forth Valley
Microbiology

SURNAME: SMITH P.O Box 21616 Stirling	FORENAME: GEORGINA	UNIT No.: STI1106554	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr Craig Sayers	WARD: Prison Medical Officer CORN G.P.: Cornton Vale H.M. Institution		
CLINICAL DATA: sti screen			

Chlamydia trachomatis PCR — Negative
N.gonorrhoeae PCR — Negative

* Chlamydia / Gonorrhoea testing should only be done if there is a clinical indication OR if there is a concern following [redacted] risk.
* All diagnosed with Chlamydia should have [redacted] notification and be retested at 3-12 months.
* For advice / help contact Central [redacted] Health Helpline 01324 613944 (Mon-Fri 9-12).

RECEIVED
29 JAN 2014

EXAMINATION: Chlamydia trachomatis PCR	LAB No.: MS040660X	AUTHORISED	
NATURE OF SPECIMEN: Low Vaginal swab	DATE COLLECTED: 22/01/2014	DATE RECEIVED: 22/01/2014	DATE REPORTED: 24/01/2014

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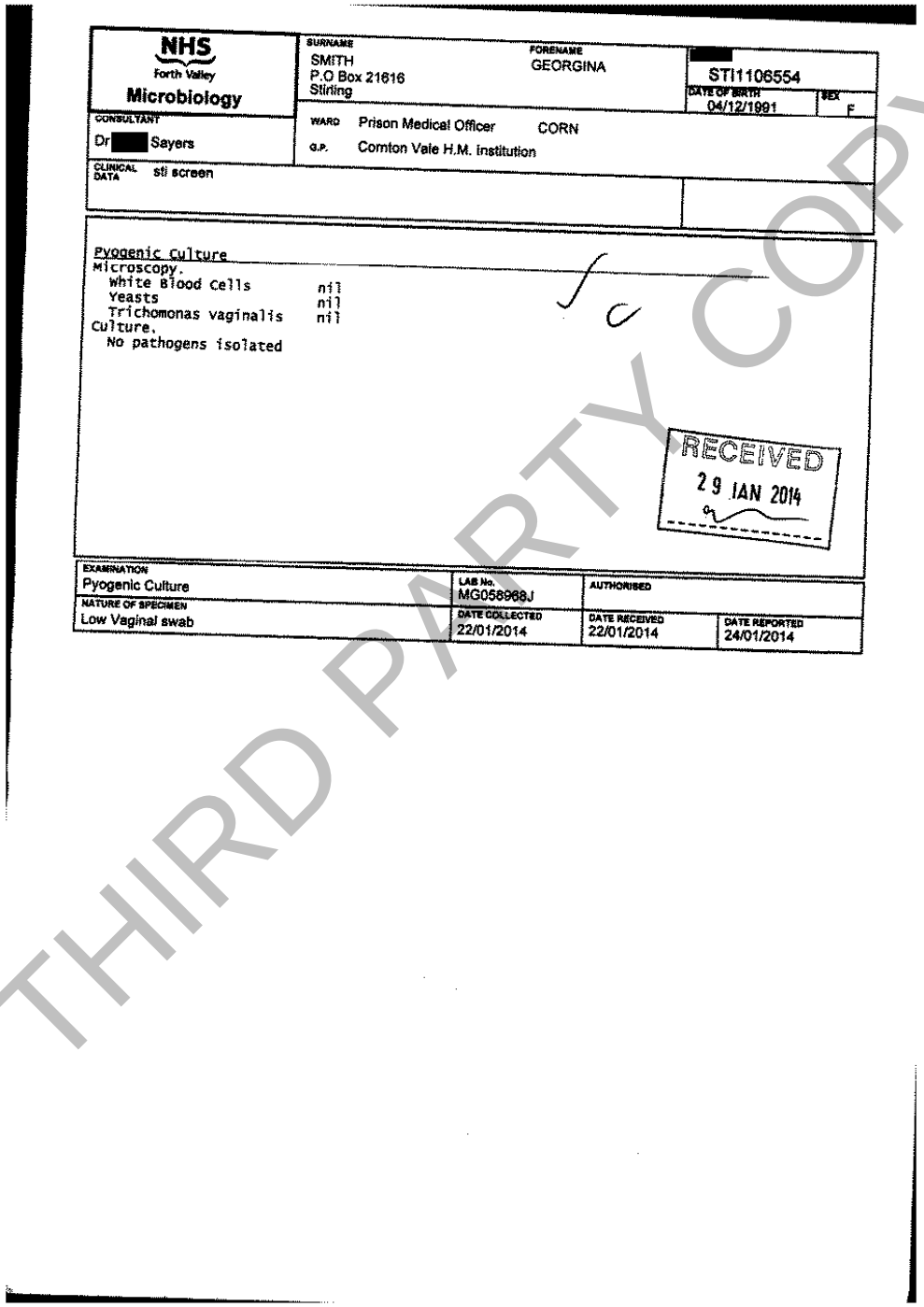

NHS Forth Valley
Microbiology

SURNAME: SMITH
FORENAME: GEORGINA
P.O Box 21616
Stirling
[redacted] STI1106554
DATE OF BIRTH: 04/12/1991
SEX: F

CONSULTANT: Dr [redacted] Sayers
WARD: Prison Medical Officer CORN
G.P.: Cornton Vale H.M. Institution

CLINICAL DATA: sti screen

Pyogenic Culture
Microscopy.
White Blood Cells nil
Yeasts nil
Trichomonas vaginalis nil
Culture.
No pathogens isolated

RECEIVED
29 JAN 2014

EXAMINATION	LAB No.	AUTHORISED	
Pyogenic Culture	MG058968J		
NATURE OF SPECIMEN	DATE COLLECTED	DATE RECEIVED	DATE REPORTED
Low Vaginal swab	22/01/2014	22/01/2014	24/01/2014

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NHS
Forth Valley
Microbiology

SURNAME	FORENAME	UNIT No.
SMITH P.O Box 21616 Stirling	GEORGINA	STI1106554
	DATE OF BIRTH: 04/12/1991	SEX: F

CONSULTANT: Unknown

WARD: Prison Medical Officer CORN
G.P.: Cornton Vale H.M. Institution

CLINICAL DATA: PRODUCTIVE COUGH ?CHEST INFECTION

Pyogenic Culture
Microscopy.
A.A.F.B. nil
Culture.
No Lower Respiratory Tract pathogens isolated

EXAMINATION	LAB No.	AUTHORISED	
Pyogenic Culture	MG047262B		
NATURE OF SPECIMEN	DATE COLLECTED	DATE RECEIVED	DATE REPORTED
Sputum	13/02/2014	14/02/2014	18/02/2014

[redacted]

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Neg 12/2/14
c.

Female

NHS Forth Valley

[redacted] & Reproductive Health & Blood Borne Virus Assessment

Name:	Georgine Smith	Spin Number:	131344
Date of Birth:	4/12/91	Hall:	Younger
Seen By:	CMeeklson	Date:	22/1/14
Reason for referral:	all tests / vaccines.		
Medical History:	haemorrhoids		
Medication:	bowel stimulants		
Drug Allergies:	NKOA		

Family History:	CV	[redacted]	Cancer	DVT	Diabetes	MI
	✓	✓	Mum Uterine.	✓	✓	✓

Lifetime Sexual History	Gender of previous partners	• Male • Female • (Both)	Sex with overseas national [redacted]	Origin:
Previous Sexually Transmitted Infections: No.	Payment for sex	• Yes • (No)	Sex without consent	• (Yes) • No

Recent Sexual History

Contact Number	Last Contact	Gender	Regular/ casual	Duration	[redacted] age	Type of sex	Condom use	Location / origin
1	8/12	M	C	–	20	vag	N	
2								
3								

BBV Issues	Yes	No	Not known	Details		
Ever injected recreational drugs?		✓		<3M	3-6M	>6M
[redacted] shared needles / works?		✓		<3M	3-6M	>6M
Ever shared straws / snorter or bank notes?	✓			<3M	3-6M	>6M
Any sexual [redacted] injected drugs?	✓			<3M	3-6M	>6M
Any non professional tattoo or piercings?	✓	✓		Date:		
Ever donated blood?		✓		Date:		
Previous Blood Transfusion?		✓		Date:		
Hepatitis B vaccination completed? strt ea		–	-	Antibody level:		
Previous HIV test?		✓		Date:		

Reproductive Health			
Pre / peri / menopausal:	–	LMP:	1/12 ago.
Cycle:	monthly	Live births:	2
Miscarriages:	1	Terminations:	0
Ectopics:	0	Cervical Smear: [redacted] SCCRS	not due.
Current contraception:	Nil	Used satisfactory / problems:	
Previous contraception:		Used satisfactory / problems:	

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Female

NHS Forth Valley

Examination			
BP:	94/61 P74	Height:	
Weight:	✓	BMI:	✓
Named Chaperone:	✓		

Comments: exam not req [redacted].

Tests			
Chlamydia vulvovaginal NAAT:	✓	Gonorrhoea vulvovaginal NAAT:	✓
Chlamydia [redacted] NAAT:		Gonorrhoea cervix NAAT:	
Chlamydia pharynx NAAT:		Gonorrhoea pharynx NAAT:	
Chlamydia rectum NAAT:		Gonorrhoea rectum NAAT:	
HSV PCR:		Syphilis PCR:	
Syphilis:		HIV:	✓
Hepatitis B cab:	✓	Hepatitis B sab titre:	✓
Hepatitis C antibody:	✓	Cervical Smear:	Up to date.
Others:			

Test result procedure Preferred	Letter	e-me	Follow Up Clinic
Discussed Window & BBV transmission	Yes ✓		No
GP Name: Address:	Consent of BBV testing	Yes ✓	No ☐

Further action required: (e.g. referral, retesting and further harm-reduction interventions)

✓

I, Georgina Smith agree and understand the above information, to information being shared with GP or other Sexual Health departments and also being used for audit purposes.

Patient signature: G. Smith Date: 22/1/14

I have explained the notes on the consent form to the above patient

Sexual Health Practitioner: C Meek [redacted] Date: 22/1/14.

Signed: C Meek

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(4)

VACCINATION PROGRAMME/PRESCRIPTION

H.M.I. & Y.O.I. CORNTON VALE

Patient's Name Georgina Smith

Spin No 131344 Date of Birth 4/12/91

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
Hepatitis B # 1				
Hepatitis B # 2				
Hepatitis B # 3				
Hepatitis B # 4				
Hepatitis Booster				
Hepatitis Booster				
Hepatitis B Titres 3/12 after last inj.				

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
TWINRIX # 1	22/1/14	[redacted]	C Dc	C Dc
TWINRIX # 2	29/1/14	[redacted]	C Dc	C Dc
TWINRIX # 3	18/2/14	[redacted]	C Dc	C Dc
TWINRIX # 4	[redacted]	[redacted]		

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
Hepatitis A # 1				
Hepatitis A # 2				
MMR2				
Men C Vaccine				

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(4)

VACCINATION PROGRAMME/PRESCRIPTION

H.M.I. & Y.O.I. CORNTON VALE

Patient's Name Georgina Smith

Spin No 131344 Date of Birth 4/12/91

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
Hepatitis B # 1				
Hepatitis B # 2				
Hepatitis B # 3				
Hepatitis B # 4				
Hepatitis Booster				
Hepatitis Booster				
Hepatitis B Titres 3/12 after last inj.				

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
TWINRIX # 1	22/1/14	[redacted]	C Dc	C Dc
TWINRIX # 2	29/1/14	[redacted]	C Dc	C Dc
TWINRIX # 3	15/2/14	[redacted]	C Dc	C Dc
TWINRIX # 4	[redacted]	[redacted]		

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
Hepatitis A # 1				
Hepatitis A # 2				
MMR2				
Men C Vaccine				

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Female

NHS Forth Valley

Examination			
BP:	94/61 P74	Height:	
Weight:	✓	BMI:	✓
Named Chaperone:	✓		

Comments: exam not req [redacted].

Tests			
Chlamydia vulvovaginal NAAT:	✓	Gonorrhoea vulvovaginal NAAT:	✓
Chlamydia [redacted] NAAT:		Gonorrhoea cervix NAAT:	
Chlamydia pharynx NAAT:		Gonorrhoea pharynx NAAT:	
Chlamydia rectum NAAT:		Gonorrhoea rectum NAAT:	
HSV PCR:		Syphilis PCR:	
Syphilis:		HIV:	✓
Hepatitis B cab:	✓	Hepatitis B sab titre:	✓
Hepatitis C antibody:	✓	Cervical Smear:	Up to date.
Others:			

Test result procedure Preferred	Letter	e-me	Follow Up Clinic
Discussed Window & BBV transmission	Yes ✓	No	
GP Name: Address:	Consent of BBV testing	Yes ☑	No ☐

Further action required: (e.g. referral, retesting and further harm-reduction interventions)

✓

I, Georgina Smith agree and understand the above information, to information being shared with GP or other Sexual Health departments and also being used for audit purposes.

Patient signature: G. Smith Date: 22/1/14

I have explained the notes on the consent form to the above patient

Sexual Health Practitioner: C Meek [redacted] Date: 22/1/14.

Signed: C Meek

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NHS Confidential: Personal data about a patient

Neg 12/2/14
c.

Female

NHS Forth Valley

[redacted] & Reproductive Health & Blood Borne Virus Assessment

Name:	Georgine Smith	Spin Number:	131344
Date of Birth:	4/12/91	Hall:	Younger
Seen By:	CMeeklson	Date:	22/1/14
Reason for referral:	all tests / vaccines.		
Medical History:	haemorrhoids		
Medication:	bowel stimulants		
Drug Allergies:	NKOA		

Family History:	CV	[redacted]	Cancer	DVT	Diabetes	MI
	✓	✓	Mum Uterine.	✓	✓	✓

Lifetime Sexual History	Gender of previous partners	• Male • Female • (Both)	Sex with overseas national [redacted]	Origin:
Previous Sexually Transmitted Infections: No.	Payment for sex	• Yes • (No)	Sex without consent	• (Yes) • No

Recent Sexual History

Contact Number	Last Contact	Gender	Regular/ casual	Duration	[redacted] age	Type of sex	Condom use	Location / origin
1	8/12	M	C	–	20	vag	N	
2								
3								

BBV Issues	Yes	No	Not known	Details		
Ever injected recreational drugs?		✓		<3M	3-6M	>6M
[redacted] shared needles / works?		✓		<3M	3-6M	>6M
Ever shared straws / snorter or bank notes?	✓			<3M	3-6M	>6M
Any sexual [redacted] injected drugs?	✓			<3M	3-6M	>6M
Any non professional tattoo or piercings?	✓	✓		Date:		
Ever donated blood?		✓		Date:		
Previous Blood Transfusion?		✓		Date:		
Hepatitis B vaccination completed? started		–		Antibody level:		
Previous HIV test?		✓		Date:		

Reproductive Health			
Pre / peri / menopausal:	–	LMP:	1/12 ago.
Cycle:	monthly	Live births:	2
Miscarriages:	1	Terminations:	0
Ectopics:	0	Cervical Smear: [redacted]	not due.
Current contraception:	Nil	Used satisfactory / problems:	
Previous contraception:		Used satisfactory / problems:	

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NHS
Forth Valley
Microbiology

SURNAME	FORENAME	UNIT No.
SMITH P.O Box 21616 Stirling	GEORGINA	STI1106554
	DATE OF BIRTH: 04/12/1991	SEX: F

CONSULTANT: Dr [redacted] Sayers
WARD: Prison Medical Officer CORN
G.P.: Cornton Vale H.M. Institution

CLINICAL DATA: BBV screen

Referred dry blood spot

HIV antibody screen	: negative
Hepatitis C antibody	: negative
Hepatitis B surface antigen	: negative
Hepatitis B core antibody	: negative

No evidence of previous exposure to HBV.

Report received from :-
Regional Virus Laboratory
Glasgow Royal Hospital

EXAMINATION	LAB No.	AUTHORISED	
Referred dry blood spot	MS056219P	[redacted] Longstaff	
NATURE OF SPECIMEN	DATE COLLECTED	DATE RECEIVED	DATE REPORTED
Dry Blood Spot	22/01/2014	23/01/2014	05/02/2014

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10 FEB 2014

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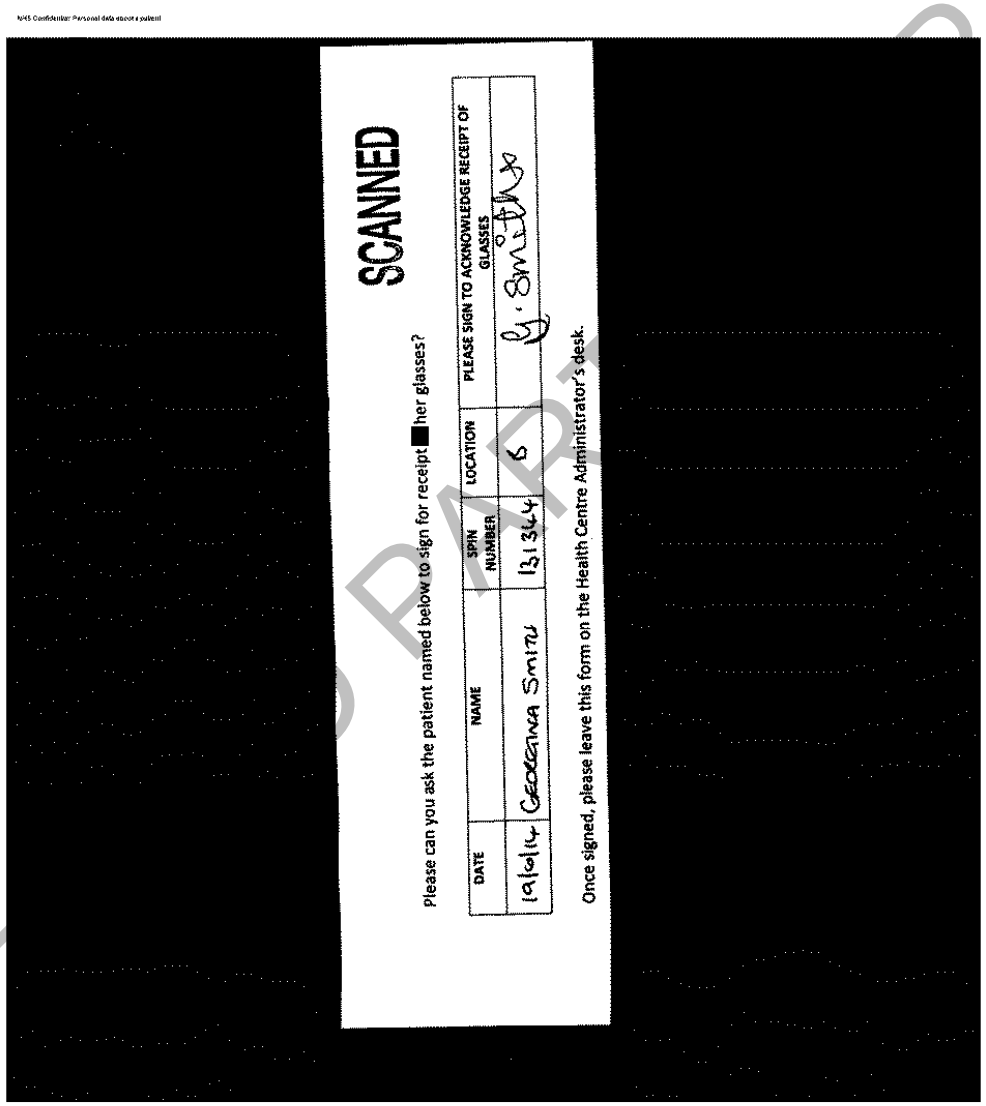

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SCANNED

Please can you ask the patient named below to sign for receipt of her glasses?

DATE	NAME	SPIN NUMBER	LOCATION	PLEASE SIGN TO ACKNOWLEDGE RECEIPT OF GLASSES
19/6/14	Georgina Smith	131344	5	G. Smith

Once signed, please leave this form on the Health Centre Administrator's desk.

NOT FOR PRIVACY

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NHS
Forth Valley
Microbiology

SURNAME	FORENAME	UNIT No.
SMITH P.O Box 21616 Stirling	GEORGINA	STI1106554
	DATE OF BIRTH: 04/12/1991	SEX: F

CONSULTANT: Dr [redacted] Sayers
WARD: Prison Medical Officer CORN
G.P.: Cornton Vale H.M. Institution

CLINICAL DATA: BBV screen

Referred dry blood spot

HIV antibody screen	: negative
Hepatitis C antibody	: negative
Hepatitis B surface antigen	: negative
Hepatitis B core antibody	: negative

No evidence of previous exposure to HBV.

Report received from :-
Regional Virus Laboratory
Glasgow Royal Hospital

EXAMINATION	LAB No.	AUTHORISED	
Referred dry blood spot	MS056219P	[redacted] Longstaff	
NATURE OF SPECIMEN	DATE COLLECTED	DATE RECEIVED	DATE REPORTED
Dry Blood Spot	22/01/2014	23/01/2014	05/02/2014

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10 FEB 2014

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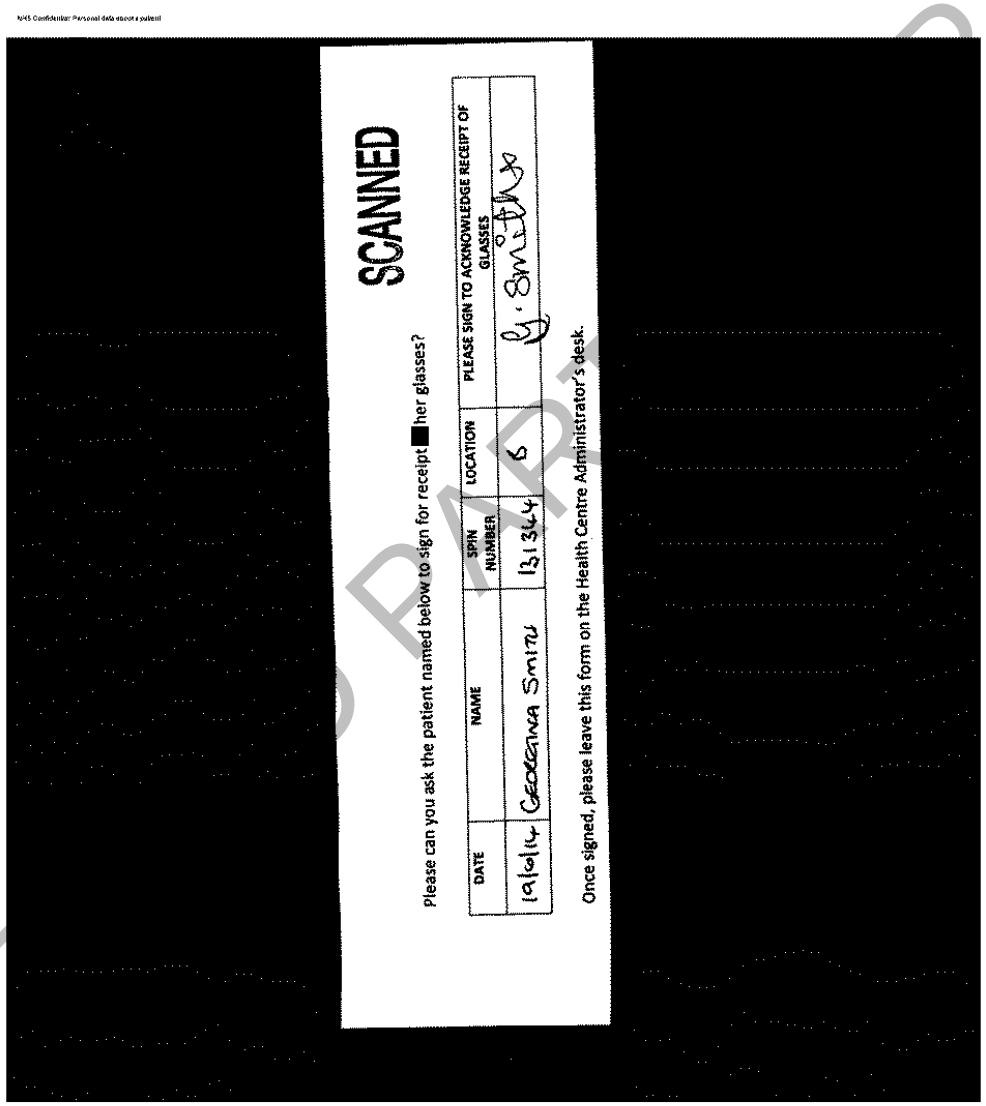

NHS Confidential: Personal data about a patient

SCANNED

Please can you ask the patient named below to sign for receipt ■ her glasses?

DATE	NAME	SPIN NUMBER	LOCATION	PLEASE SIGN TO ACKNOWLEDGE RECEIPT OF GLASSES
19/6/14	GEORGINA SMITH	131344	5	G. Smith

Once signed, please leave this form on the Health Centre Administrator's desk.

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NHS Confidential: [redacted] data about a patient

Registration Details - Patient No: 9407

Personal details...		Address details...	
Date of birth	04/12/1991	Post Code	KA20 3PG
Sex	F	House Name Flat No	
Surname	[redacted]	No and Street	110 Ardoch Crescent
Previous Surname		Village	STEVENSTON
Forenames	Georgina	Town	Ayrshire
Calling Name	Georgina	County	
Title	Miss		
Birth Surname			
Marital Status			
Ethnic Origin			

HA/HB Details...		Contact details...	
Trading [redacted]	Ayrshire & Arran	Next of Kin Details	
Registered GP	Dr Julie Pennycook		
Usual GP	Dr Julie Pennycook	Home Tel No	
Residential Inst		Work Tel No	
Branch Surgery		Mobile Tel No	07774733501
CHI Number	0412913127	E Mail Address	
NHS Number			

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

Further Information		Upload Consent	
Long/Short stay or [redacted]		SCI-DC Consent	Implied Consent (default)
Date of registration	17/05/2013		

AMS\CMS Details		ECS (GP Summary) Consent	
AMS Consent	Yes	Patient Consent	Implied Consent (default)
CMS Status	Not Registered		
Pharmacy Details			
Compliance Check	Yes		

Medical Record

Problems

Active Problems		Authorised By	Code
18/02/2005	Acne keloid	Miss McCormick	M25y6
15/01/2009	Eczema NOS	Miss McCormick	M12z1
17/05/2012	Gallstones	Dr [redacted]	J84-5
05/09/2005	Stomatitis - herpetic	Miss McCormick	A542-2
04/03/2013	Laparoscopic cholecystectomy	Miss Munn	78105-1
24/10/1994	Soft systolic murmur	Miss McCormick	24D-8
29/05/2003	Nocturnal enuresis	Miss McCormick	1A229

Past Problems		Authorised By	Code
31/07/2012	Dyspepsia	Dr Jaiswal	J16y4
18/09/2012	Iron deficiency anaemias	Dr [redacted]	D00
09/10/2012	Constipation	Dr [redacted]	19C

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16/07/2012	Upper abdominal pain	Dr Ghosh	197B
18/10/2012	Biliary colic symptom	Dr [redacted]	1965-1
30/10/2012	Biliary colic	Dr	1965
22/01/2013	H/O: depression	Dr [redacted]X	1466

Health Admin Problems		Authorised By	Code

Investigations		Authorised By	Code
26/07/2012	**Cervical Cytology** (Source: Manually filed) . Routine Recall -		4K22.
11/10/2012	**Differential white cell count** (Source: LAB) .		421..
[redacted]	**Full blood count - FBC** (Source: LAB) .		424..
	Differential white cell count (Source: LAB) .		421..
	Full blood count - FBC (Source: LAB) .		424..
18/06/2013	**Urine pregnancy test** (Source: LAB) .		465..

Values [redacted]	Last Entry	Normal Range Indicator	Normal Range
18/06/2013	**Urine pregnancy test** [redacted]		
18/06/2013	**Blood pressure reading 90/62 mm Hg**		
18/06/2013	**O/E - BP reading well, alert,hr-74, pa-sligly distended? bs +**		
30/10/2012	**Haemoglobin estimation 13.2 g/dL**	..|.....	12.2-16.5
30/10/2012	**Total white cell count 6.5 10*9/L**	....|.....	3.9-11.1
30/10/2012	**Red blood cell (RBC) count 4.95 10*12/L**	.....|	3.85-4.99
30/10/2012	**Haematocrit 0.4 %**	...|.....	0.36-0.46
30/10/2012	**Mean corpuscular volume (MCV) 81 fl**	|.....	82-98
30/10/2012	**Mean corpusc. haemoglobin(MCH) 26.7 pg**	|.....	27.3-32.6
30/10/2012	**Mean corpusc. Hb. conc. (MCHC) 33.1 g/dL**	....|....	31.6-34.9
30/10/2012	**Platelet count 266 10*9/L**	....|....	150-400
30/10/2012	**Neutrophil count 3.8 10*9/L**	....|....	1.8-7.4
30/10/2012	**Lymphocyte [redacted] 2 10*9/L**	..|.....	1.1-5
30/10/2012	**Monocyte count 0.3 10*9/L**	.|.....	0.2-0.9
30/10/2012	**Eosinophil [redacted] 0.3 10*9/L**	...|.....	0.1-0.7
30/10/2012	**Basophil [redacted] 0 10*9/L**	|.....	0-0.1
26/07/2012	**Cervical smear: negative Routine Recall -**		
12/07/2012	**Alcohol consumption 0 units/week**		
12/07/2012	**Body Mass Index 22.32**	....|....	20-25
12/07/2012	**O/E - weight 63 Kg**		
12/07/2012	**O/E - height 168 cm**	.....|..	10-250

Attachments		Authorised By	Code
01/03/2013	**Attachment** DNA LETTER TO PATIENT DNA LETTER TO PATIENT .doc	Miss Munn	EMISATTACHMENT

Due Diary Entries		Authorised By	Code
26/07/2015	**Cervical smear due** SCCRS Recall	Mrs Wallace	685F.
03/12/2056	**Influenza vaccination**	Dr Pennycook	65E..

Overdue Diary Entries		Authorised By	Code
22/11/2013	**Medication review OVERDUE**	Dr Ghosh	8B314

Alerts		Authorised By	Code
	None		

Drug Allergies		Authorised By	Code
	None		

Non Drug Allergies		Authorised By	Code
	None		

[redacted] History		Authorised By	Code
12/07/2012	**FH: Asthma**	Mrs Hair	12D2
12/07/2012	**FH: Ischaemic heart dis. >60**	Mrs Hair	12C3

Immunisations		Authorised By	Code

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NHS Confidential: [redacted] data about a patient

None

Health Status	
10/10/2012	**Notes summary on computer**
26/07/2012	**Cervical smear result Cervical smear: negative**
12/07/2012	**Height 168 cm**
12/07/2012	**Weight 63 Kg**
12/07/2012	**Body Mass Index 22.32 kg/m2**
18/06/2013	**Blood pressure reading O/E - BP reading**
18/06/2013	**Blood pressure reading 90/62 mm Hg**
08/01/2013	**Smoking Status Current smoker**
12/07/2012	**Exercise grading FITT activity [redacted]vel 2; 5-11 occas of mod/vig activt in 4 wks**
12/07/2012	**FH: Ischaemic heart dis. >60**

Other Observations		Authorised By	Code
14/02/2013	**Gallstones (REVIEW)**	Dr [redacted]	J64-5
12/07/2012	**White Scottish**	Mrs McCormick	9S13
13/03/2013	**Computer summary updated**	Miss Munn	9348
10/10/2012	**Notes summary on computer**	Miss McCormick	9344
08/01/2013	**Smoking cessation advice**	Mrs Smith	8CAL
22/11/2012	**Medication review done**	Dr Ghosh	8B3V
06/08/2012	**Upper abdominal pain (REVIEW)**	Dr [redacted]	197B
12/07/2012	**FITT activity level 2; 5-11 occas of mod/vig activt in 4 wks**	Mrs Hair	138K
08/01/2013	**Current smoker**	Mrs Smith	137R
12/07/2012	**Heavy smoker - 20-39 cigs/day**	Mrs Hair	1375

Consultations	
18/06/2013	Dr Vikas Shetty-X at Stevenston Health Centre
History	c/o morning sickness, thinks tummy swollen, nipples sore-took a preg test and was negative-says ammenorroeha since 4 years-says no cause found-delivered in feb last year
Examination	O/E - BP reading well, alert,hr-74, pa-sligly distended? bs +
	Blood pressure reading 90/62 mm Hg
Comment	plan-send urine to labs-preg test
-	-----
05/06/2013	Dr K[redacted] at Stevenston Health Centre
Comment	md 3 given to join work from 6/6/2013.
-	---
05/04/2013	Dr Julie Pennycook at Stevenston Health Centre
History	med3 4weeks post op - this sick line shredded as prev isued on 3/4/13 by Dr Shetty
-	---
03/04/2013	Dr Vikas Shetty-X at Data Entry
History	med 3-4 wks-gall bladder op
-	---
08/03/2013	Dr [redacted]e Pennycook at Stevenston Health Centre
History	med3 4 weeks post op
-	---
25/02/2013	Dr Julie Pennycook at Stevenston Health Centre
History	med3 4weeks from 07/02 gallstones

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14/02/2013	Dr K Ghosh at Stevenston Health Centre
Comment	history of biliary [redacted] recurred again, vomited twice o/e abdomen soft, tender over biliary point, no rigidity, bowel sound active - no vomiting in the last 2 hours, not clinically jaundiced, awaiting surgery - given analgesia and antiemetic with advice.
Problem (REVIEW)	**Gallstones**
Medication	Domperidone Tablets 10 mg *30 TABLET ONE TABLET 3 OR 4 TIMES DAILY BEFORE FOOD* Hyoscine Butylbromide Tablets 10 mg *56 TABLET TWO TO BE TAKEN FOUR TIMES A DAY WHEN REQUIRED* Dihydrocodeine Tablets 30 mg *30 TABLET ONE TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED*

14/02/2013	Ms [redacted]n Sommerville at Stevenston Health Centre
Comment	[redacted] asthma appt.

01/02/2013	Dr [redacted] Pennycook at Stevenston Health Centre
History	med3 4 weeks gall stones

22/01/2013	Dr Vikas Shetty-X at [redacted] Health Centre
History	says asthma worse-has increased inhalers but not helped.
Examination	apyrex, sell. rs-minimal sob, few scattered wheeze
Comment	prednisolone short course-worsening statement
Medication	Prednisolone Tablets 5 mg *40 TABLET 8 TABS DAILY* Salbutamol Cfc-free inhaler 100 micrograms/puff *1 INHALER TWO PUFFS TO BE INHALED UP TO FOUR TIMES A DAY WHEN REQUIRED*

Problem (FIRST)	**H/O; depression**
History	c/o long h/o depression, also self harm in the past-now low moods, tearful all the time-arguments with [redacted] any suicidal ideation now, also c/o insominia-keen on anti depressants
Examination	tearful, good eye contact and insight, nil signs of psychosis
Comment	start fluoxetine-adv seek help if worse, sucidal,also regular exersises
Medication	Fluoxetine Hydrochloride Capsules 20 mg *30 CAPSULE ONE TO BE TAKEN EACH DAY*

07/01/2013	Mrs [redacted] Smith at Stevenston Health Centre
Comment	see adoc

04/01/2013	Dr Anne [redacted] at Telephone Consultation
Comment	pt. now has date for cholecystectomy = 18 feb, needs continuing med3 from 4 jan x 4 weeks - gallstones.

30/10/2012	Mrs Moira Lappin at Stevenston Health Centre
Examination	fbc taken

30/10/2012	Dr K Ghosh at Stevenston Health Centre
Examination	discharged from hospital today with biliary colic - given tramadol, paracetamol and laxative- advised to take medication during colic and to take laxatives - states that she is awaiting colonoscopy and US examination of breast, as they have found a lump on the breast.
Problem (FIRST)	**Biliary colic**

18/10/2012	Dr K G[redacted] at Stevenston Health Centre
Comment	ran out of pain killer, seen by ADOC and given tramadol - no vomiting today, looking for sick line. med 3 given for 4 weeks abdominal pain - awaiting cholecystectomy .
Problem (FIRST)	**Biliary colic symptom**
Medication	Tramadol Hydrochloride Capsules 50 mg *30 capsule ONE THREE TIMES DAY* Metoclopramide Hydrochloride Tablets 10 mg *15 tablet TAKE ONE THREE TIMES A DAY FOR NAUSEA AND VOMITING*

18/10/2012	Miss Carolanne Munn at Stevenston Health Centre
Comment	Seen by ADOC - given prescription - see fax dated 17/10/2012 cm

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11/10/2012	Miss Carolanne Munn at Stevenston Health Centre
Comment	REFERRAL TO SURGICAL, XH KG/CM
11/10/2012	Dr [redacted] at [redacted] Health Centre
Comment	epigastric discomfort since yesterday. vomited yesterday, no vomiting today, pain radiating to back, moved bowel today. o/e pulse 80/min, abdomen soft, tender over biliary point, no rigidity, bowel sound active ? biliary colic ? gastritis - dietary advice given, to take paracetamol, omeprazole and buscopan, review.
Medication	Hyoscine Butylbromide Tablets 10 mg *30 tablet ONE OR TWO TABLETS THREE TIMES A DAY* Omeprazole Capsules (Gastro-Resistant) 20 mg *28 CAPSULE ONE TO BE TAKEN EACH DAY*
Comment	This 20 yr old is known to have intermittent biliary colic, and USS of abdomen has confirmed this with possible chronic cholecystitis - I would appreciate if you [redacted] see her with a view to cholecystectomy.
09/10/2012	Mrs Gillian McCormick at Stevenston Health Centre
Comment	Feels that Doctor is not helping her, says that doctor is trying various laxatives however patient feel that she needs referred to hospital ? re haemorrhoids and stomach problems. Spoke to Doc - advised patient to have Blood taken as requested by Doctor and then return to see Doctor for ? referral if Doctor feels that this is appropriate then. Phoned patient to discuss afore mentioned.
09/10/2012	Dr [redacted] at Stevenston Health Centre
Comment	constipated , since child [redacted] states that her abdomen goes into cramp when moving bowel - also has [redacted] - advised re diet, stop senna, given fybogel - abdomen soft, no rigidity, no mass, bowel sound active.- review in 2 weeks.
Problem (FIRST)	**Constipation**
Medication	Ispaghula Husk Sugar and Gluten Free Effervescent granules 3.5 grams/sachet *30 sachet 1 sachet Twice daily*
18/09/2012	Dr K [redacted] at Stevenston Health Centre
Comment	looks pale, had blood test done at AE- iron deficiency anaemia. also history of constipation and piles. - dietary advice given, given movicol-advised to attend in 4 weeks for FBC- explained that [redacted] stones - silent as gall bladder is not inflammed - recurrent abd pain is due to constipation
Problem (FIRST)	**Iron deficiency anaemias**
Medication	Ferrous Fumarate Tablets 210 mg *100 tablet ONE TO BE TAKEN THREE TIMES A DAY* Macrogol Compound Oral Powder (sachets) NPF Sugar Free *30 sachet 1 sachet Twice daily*
Test Request	FBC
17/09/2012	Dr K [redacted] at Stevenston Health Centre
Comment	USS result given.
Problem (FIRST)	**Gallstones**
03/09/2012	Miss Carolanne Munn at Stevenston Health Centre
Comment	Seen by ADOC - given prescription - see fax cm
06/08/2012	Dr K [redacted] at Stevenston Health Centre
Comment	attended AE this morning with upper abdominal pain and vomiting - checked by doctor, blood taken nil of note, abdomen soft, no mass ,no tenderness , prone to constipation - taking lactulose not working add senns USS organised- dietary advice
Problem (REVIEW)	**Upper abdominal pain**
Medication	Senna Tablets 7.5 mg *30 TABLET(S) TWO TABLETS AT NIGHT* Hyoscine Butylbromide Tablets 10 mg *30 tablet TWO TO BE TAKEN FOUR TIMES A DAY WHEN REQUIRED*
06/08/2012	Mrs Gillian McCormick at [redacted] Health Centre
Comment	Seen at ADOC - given prescription - see fax cm
31/07/2012	Dr Nikita Jaiswal at Stevenston Health Centre
Problem (FIRST)	**Dyspepsia**
History	new pt from fife. has had long standing problems with the upper stomach- pains on eating chips/sugar. omeprazole helped initially but not now. lactulose not helping bowel movts.

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Comment	try rx as below. disc diet and PIL websites given.
Medication	Lactulose Solution 3.1-3.7 g/5 ml *300 ML 10 MLS Twice daily* Omeprazole Capsules (Gastro-Resistant) 20 mg *28 CAPSULE ONE TWICE A DAY* Senna Tablets 7.5 mg *30 TABLET(S) TAKE TWO TO FOUR TABLETS AT NIGHT*
-	---
26/07/2012 00:00	Mrs Mary [redacted] at General Practice Surgery
Result	Cervical Cytology
Follow up	Cervical smear due (26/07/2015) SCCRS Recall
-	---
25/07/2012	Mrs [redacted] Dodds at Stevenston Health Centre
Comment	fta for 45 min booking appointment m [redacted] cmw
-	---
16/07/2012	Dr K [redacted] at Stevenston Health Centre
Comment	epigastric pain , radiating to back, occasional vomiting, also constipated, denies haematemesis, currently 6 weeks [redacted] abdomen soft, no tenderness, no rigidity, bowel sound active - advised stop smoking, dietary advice given, ? dyspepsia or GORD- try PPI , review, to make booking appointment with midwife.
Problem (FIRST)	**Upper abdominal pain**
Medication	Omeprazole Capsules (Gastro-Resistant) 40 mg *28 CAPSULE ONE TO BE TAKEN EACH DAY* Lactulose Solution 3.1-3.7 g/5 ml *300 ML THREE 5ML SPOONFULS TO BE TAKEN TWICE A DAY*
-	---
12/07/2012	Mrs Anne Hair at Stevenston Health Centre
Examination	Blood pressure reading 90/60 mm Hg O/E - height, 168 cm O/E - weight, 63 Kg Body Mass Index, 22.32
Comment	npm completed .Patient experiencing abdominal pain/ back pain since feb which is unresolved. ? previously diagnosed with constipation .Unsure of the name of laxative she is currently taking. History of asthma and kidney stones in the past [redacted] hasUterine /cervical cancer .Recently at ach for scan .Pregnancy at present ? approx 6 weeks.
Family History	FH: Ischaemic heart dis. >60 FH: Asthma
Social	Heavy smoker - 20-39 cigs/day Alcohol consumption, 0 units/week FITT activity level 2; 5-11 occas of mod/vig activt in 4 wks

Medication

Current

Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
05/02/2013	**Diclofenac Sodium E/c tablets 50 mg** ONE TO BE TAKEN THREE TIMES A DAY WITH OR AFTER FOOD 84 tablet	Not Issued	Dr Julie Pennycook	ACUTE
01/11/2012	**Paracetamol Sugar free suspension 250 mg/5 ml** 20 MLS QDS PRN 500 ml	07/12/2012P	Dr Julie Pennycook	REPEAT

Past

Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
04/06/2013	**Prednisolone Tablets 5 mg** 8 TABS DAILY 40 TABLET	22/01/2013P	Dr Julie Pennycook	ACUTE
04/06/2013	**Tramadol Hydrochloride Capsules 50 mg** ONE THREE TIMES DAY 30 capsule	04/06/2013P	Dr Julie Pennycook	ACUTE
04/06/2013	**Salbutamol Cfc-free inhaler 100 micrograms/puff** TWO PUFFS TO BE INHALED UP TO FOUR TIMES A DAY WHEN REQUIRED 1 INHALER	04/06/2013P	Dr Julie Pennycook	ACUTE
14/02/2013	**Domperidone Tablets 10 mg** ONE TABLET 3 OR 4 TIMES DAILY BEFORE FOOD 30 TABLET	14/02/2013P	Dr K [redacted]	ACUTE
14/02/2013	**Hyoscine Butylbromide Tablets 10 mg** TWO TO BE TAKEN FOUR TIMES A DAY WHEN REQUIRED 56 TABLET	14/02/2013P	Dr K [redacted]	ACUTE
14/02/2013	**Dihydrocodeine Tablets 30 mg** ONE TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED 30 TABLET	14/02/2013P	Dr K Ghosh	ACUTE

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NHS Confidential: [redacted] data about a patient

29/01/2013	**Tramadol Hydrochloride Capsules 50 mg** ONE THREE TIMES DAY 30 capsule	21/02/2013P	Dr K [redacted]	ACUTE
29/01/2013	**Hyoscine Butylbromide Tablets 10 mg** ONE OR TWO TABLETS THREE TIMES A DAY 30 tablet	29/01/2013P	Dr K [redacted]	ACUTE
22/01/2013	**Prednisolone Tablets 5 mg** 8 TABS DAILY 40 TABLET	22/01/2013P	Dr Julie Pennycook	ACUTE
22/01/2013	**Salbutamol Cfc-free inhaler 100 micrograms/puff** TWO PUFFS TO BE INHALED UP TO FOUR TIMES A DAY WHEN REQUIRED 1 INHALER	22/01/2013P	Dr Julie Pennycook	ACUTE
22/01/2013	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 30 CAPSULE	22/01/2013P	Dr Julie Pennycook	ACUTE
07/12/2012	**Tramadol Hydrochloride Capsules 50 mg** ONE THREE TIMES DAY 30 capsule	04/01/2013P	Dr Julie Pennycook	ACUTE
31/10/2012	**Lactulose Solution 3.1-3.7 g/5 ml** 10 MLS Twice [redacted] 300 ML	15/11/2012P	Dr Julie Pennycook	ACUTE
31/10/2012	**Macrogol Compound Oral Powder (sachets) NPF Sugar Free** 1 sachet Twice [redacted] 30 sachet	15/11/2012P	Dr Julie Pennycook	ACUTE
18/10/2012	**Tramadol Hydrochloride Capsules 50 mg** ONE THREE TIMES DAY 30 capsule	15/11/2012P	Dr Julie Pennycook	ACUTE
18/10/2012	**Metoclopramide Hydrochloride Tablets 10 mg** TAKE ONE THREE TIMES A DAY FOR NAUSEA AND VOMITING 15 tablet	18/10/2012P	Dr K [redacted]	ACUTE
11/10/2012	**Hyoscine Butylbromide Tablets 10 mg** ONE OR TWO TABLETS THREE TIMES A DAY 30 tablet	11/10/2012P	Dr K Ghosh	ACUTE
11/10/2012	**Omeprazole Capsules (Gastro-Resistant) 20 mg** ONE TO BE TAKEN EACH DAY 28 CAPSULE	11/10/2012P	Dr K Ghosh	ACUTE
09/10/2012	**Ispaghula Husk Sugar and Gluten Free Effervescent granules 3.5 grams/sachet** 1 sachet Twice daily 30 sachet	09/10/2012P	Dr K [redacted]	ACUTE
18/09/2012	**Ferrous Fumarate Tablets 210 mg** ONE TO BE TAKEN THREE TIMES A DAY 100 tablet	18/09/2012P	Dr K [redacted]	ACUTE
18/09/2012	**Macrogol Compound Oral Powder (sachets) NPF Sugar Free** 1 sachet Twice daily 30 sachet	15/10/2012P	Dr K [redacted]	ACUTE
06/08/2012	**Senna Tablets 7.5 mg** TWO TABLETS AT NIGHT 30 TABLET(S)	06/08/2012P	Dr K [redacted]	ACUTE
06/08/2012	**Hyoscine Butylbromide Tablets 10 mg** TWO TO BE TAKEN FOUR TIMES A DAY WHEN REQUIRED 30 tablet	06/08/2012P	Dr K [redacted]	ACUTE
31/07/2012	**Lactulose Solution 3.1-3.7 g/5 ml** 10 MLS Twice daily 300 ML	31/07/2012P	Dr Julie Pennycook	ACUTE
31/07/2012	**Omeprazole Capsules (Gastro-Resistant) 20 mg** ONE TWICE A DAY 28 CAPSULE	31/07/2012P	Dr Julie Pennycook	ACUTE
31/07/2012	**Senna Tablets 7.5 mg** TAKE TWO TO FOUR TABLETS AT NIGHT 30 TABLET(S)	31/07/2012P	Dr Julie Pennycook	ACUTE
16/07/2012	**Omeprazole Capsules (Gastro-Resistant) 40 mg** ONE TO BE TAKEN EACH DAY 28 CAPSULE	16/07/2012P	Dr K [redacted]	ACUTE
16/07/2012	**Lactulose Solution 3.1-3.7 g/5 ml** THREE 5ML SPOONFULS TO BE TAKEN TWICE A DAY 300 ML	16/07/2012P	Dr K Ghosh	ACUTE

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18-Jun-2026 SARA
Additional: Scanned Document

Filename: igprda202606181527020.pdf
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Pages:

NHS Confidential: [redacted] data about a patient

Registration Details - Patient No: 9407

Personal details...		Address details...	
Date of birth	04/12/1991	Post Code	KA20 3PG
Sex	F	House Name Flat No	
Surname	[redacted]	No and Street	110 Ardoch Crescent
Previous Surname		Village	STEVENSTON
Forenames	[redacted]	Town	Ayrshire
Calling Name	Georgina	County	
Title	Miss		
Birth Surname			
Marital Status			
Ethnic Origin			

HA/HB Details...		Contact details...	
Trading [redacted]	Ayrshire & Arran	Next of Kin Details	
Registered GP	Dr Julie Pennycook		
Usual GP	Dr Julie Pennycook	Home Tel No	
Residential Inst		Work Tel No	
Branch Surgery		Mobile Tel No	07774733501
CHI Number	0412913127	E Mail Address	
NHS Number			

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

Further Information		Upload Consent	
Long/Short stay or [redacted]		SCI-DC Consent	Implied Consent (default)
Date of registration	17/05/2013		

AMS\CMS Details		ECS (GP Summary) Consent	
AMS Consent	Yes	Patient Consent	Implied Consent (default)
CMS Status	Not Registered		
Pharmacy Details			
Compliance Check	Yes		

Medical Record

Problems

Active Problems		Authorised By	Code
18/02/2005	Acne keloid	Miss McCormick	M25y6
15/01/2009	Eczema NOS	Miss McCormick	M12z1
17/09/2012	Gallstones	Dr [redacted]	J84-5
05/09/2005	Stomatitis - herpetic	Miss McCormick	A542-2
04/03/2013	Laparoscopic cholecystectomy	Miss Munn	78105-1
24/10/1994	Soft systolic murmur	Miss McCormick	24D-8
29/05/2003	Nocturnal enuresis	Miss McCormick	1A229

Past Problems		Authorised By	Code
31/07/2012	Dyspepsia	Dr Jaiswal	J16y4
18/09/2012	Iron deficiency anaemias	Dr [redacted]	D00
09/10/2012	Constipation	Dr [redacted]	19C

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NHS Confidential: [redacted] data about a patient

16/07/2012	Upper abdominal pain	Dr Ghosh	197B
18/10/2012	Biliary colic symptom	Dr [redacted]	1965-1
30/10/2012	Biliary colic	Dr	1965
22/01/2013	H/O: depression	Dr [redacted]X	1466

Health Admin Problems		Authorised By	Code

Investigations		Authorised By	Code
26/07/2012	**Cervical Cytology** (Source: Manually filed) . Routine Recall -		4K22.
11/10/2012	**Differential white cell count** (Source: LAB) .		421..
[redacted]	**Full blood count - FBC** (Source: LAB) .		424..
	Differential white cell count (Source: LAB) .		421..
	Full blood count - FBC (Source: LAB) .		424..
18/06/2013	**Urine pregnancy test** (Source: LAB) .		465..

Values [redacted]	Last Entry	Normal Range Indicator	Normal Range
18/06/2013	**Urine pregnancy test** [redacted]		
18/06/2013	**Blood pressure reading 90/62 mm Hg**		
18/06/2013	**O/E - BP reading well, alert,hr-74, pa-sligly distended? bs +**		
30/10/2012	**Haemoglobin estimation 13.2 g/dL**	..|.....	12.2-16.5
30/10/2012	**Total white cell count 6.5 10*9/L**	....|.....	3.9-11.1
30/10/2012	**Red blood cell (RBC) count 4.95 10*12/L**	.....|	3.85-4.99
30/10/2012	**Haematocrit 0.4 %**	...|.....	0.36-0.46
30/10/2012	**Mean corpuscular volume (MCV) 81 fl**	|.....	82-98
30/10/2012	**Mean corpusc. haemoglobin(MCH) 26.7 pg**	|.....	27.3-32.6
30/10/2012	**Mean corpusc. Hb. conc. (MCHC) 33.1 g/dL**	....|....	31.6-34.9
30/10/2012	**Platelet count 266 10*9/L**	....|....	150-400
30/10/2012	**Neutrophil count 3.8 10*9/L**	....|....	1.8-7.4
30/10/2012	**Lymphocyte [redacted] 2 10*9/L**	..|.....	1.1-5
30/10/2012	**Monocyte count 0.3 10*9/L**	.|.....	0.2-0.9
30/10/2012	**Eosinophil [redacted] 0.3 10*9/L**	...|.....	0.1-0.7
30/10/2012	**Basophil [redacted] 0 10*9/L**	|.....	0-0.1
26/07/2012	**Cervical smear: negative Routine Recall -**		
12/07/2012	**Alcohol consumption 0 units/week**		
12/07/2012	**Body Mass Index 22.32**	....|....	20-25
12/07/2012	**O/E - weight 63 Kg**		
12/07/2012	**O/E - height 168 cm**	.....|..	10-250

Attachments		Authorised By	Code
01/03/2013	**Attachment** DNA LETTER TO PATIENT DNA LETTER TO PATIENT .doc	Miss Munn	EMISATTACHMENT

Due Diary Entries		Authorised By	Code
26/07/2015	**Cervical smear due SCCRS Recall**	Mrs Wallace	685F.
03/12/2056	**Influenza vaccination**	Dr Pennycook	65E..

Overdue Diary Entries		Authorised By	Code
22/11/2013	**Medication review OVERDUE**	Dr Ghosh	8B314

Alerts		Authorised By	Code
	None		

Drug Allergies		Authorised By	Code
	None		

Non Drug Allergies		Authorised By	Code
	None		

[redacted] History		Authorised By	Code
12/07/2012	**FH: Asthma**	Mrs Hair	12D2
12/07/2012	**FH: Ischaemic heart dis. >60**	Mrs Hair	12C3

Immunisations		Authorised By	Code

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None

Health Status	
10/10/2012	Notes summary on computer
26/07/2012	Cervical smear result Cervical smear: negative
12/07/2012	Height 168 cm
12/07/2012	Weight 63 Kg
12/07/2012	Body Mass Index 22.32 kg/m2
18/06/2013	Blood pressure reading O/E - BP reading
18/06/2013	Blood pressure reading 90/62 mm Hg
08/01/2013	Smoking Status Current smoker
12/07/2012	Exercise grading FITT activity [redacted]vel 2; 5-11 occas of mod/vig activt in 4 wks
12/07/2012	FH: Ischaemic heart dis. >60

Other Observations		Authorised By	Code
14/02/2013	**Gallstones (REVIEW)**	Dr [redacted]	J64-5
12/07/2012	**White Scottish**	Mrs McCormick	9S13
13/03/2013	**Computer summary updated**	Miss Munn	9348
10/10/2012	**Notes summary on computer**	Miss McCormick	9344
08/01/2013	**Smoking cessation advice**	Mrs Smith	8CAL
22/11/2012	**Medication review done**	Dr Ghosh	8B3V
06/08/2012	**Upper abdominal pain (REVIEW)**	Dr [redacted]	197B
12/07/2012	**FITT activity level 2; 5-11 occas of mod/vig activt in 4 wks**	Mrs Hair	138K
08/01/2013	**Current smoker**	Mrs Smith	137R
12/07/2012	**Heavy smoker - 20-39 cigs/day**	Mrs Hair	1375

Consultations	
18/06/2013	Dr Vikas Shetty-X at Stevenston Health Centre
History	c/o morning sickness, thinks tummy swollen, nipples sore-took a preg test and was negative-says ammenorroeha since 4 years-says no cause found-delivered in feb last year
Examination	O/E - BP reading well, alert,hr-74, pa-sligly distended? bs +
	Blood pressure reading 90/62 mm Hg
Comment	plan-send urine to labs-preg test
-	-----
05/06/2013	Dr K[redacted] at Stevenston Health Centre
Comment	md 3 given to join work from 6/6/2013.
-	---
05/04/2013	Dr Julie Pennycook at Stevenston Health Centre
History	med3 4weeks post op - this sick line shredded as prev isued on 3/4/13 by Dr Shetty
-	---
03/04/2013	Dr Vikas Shetty-X at Data Entry
History	med 3-4 wks-gall bladder op
-	---
08/03/2013	Dr [redacted]e Pennycook at Stevenston Health Centre
History	med3 4 weeks post op
-	---
25/02/2013	Dr Julie Pennycook at Stevenston Health Centre
History	med3 4weeks from 07/02 gallstones

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14/02/2013	Dr K Ghosh at Stevenston Health Centre
Comment	history of biliary [redacted] recurred again, vomited twice o/e abdomen soft, tender over biliary point, no rigidity, bowel sound active - no vomiting in the last 2 hours, not clinically jaundiced, awaiting surgery - given analgesia and antiemetic with advice.
Problem (REVIEW)	**Gallstones**
Medication	Domperidone Tablets 10 mg *30 TABLET ONE TABLET 3 OR 4 TIMES DAILY BEFORE FOOD* Hyoscine Butylbromide Tablets 10 mg *56 TABLET TWO TO BE TAKEN FOUR TIMES A DAY WHEN REQUIRED* Dihydrocodeine Tablets 30 mg *30 TABLET ONE TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED*

14/02/2013	Ms [redacted]n Sommerville at Stevenston Health Centre
Comment	[redacted] asthma appt.

01/02/2013	Dr [redacted] Pennycook at Stevenston Health Centre
History	med3 4 weeks gall stones

22/01/2013	Dr Vikas Shetty-X at [redacted] Health Centre
History	says asthma worse-has increased inhalers but not helped.
Examination	apyrex, sell. rs-minimal sob, few scattered wheeze
Comment	prednisolone short course-worsening statement
Medication	Prednisolone Tablets 5 mg *40 TABLET 8 TABS DAILY* Salbutamol Cfc-free inhaler 100 micrograms/puff *1 INHALER TWO PUFFS TO BE INHALED UP TO FOUR TIMES A DAY WHEN REQUIRED*

Problem (FIRST)	**H/O; depression**
History	c/o long h/o depression, also self harm in the past-now low moods, tearful all the time-arguments with [redacted] any suicidal ideation now, also c/o insominia-keen on anti depressants
Examination	tearful, good eye contact and insight, nil signs of psychosis
Comment	start fluoxetine-adv seek help if worse, sucidal,also regular exersises
Medication	Fluoxetine Hydrochloride Capsules 20 mg *30 CAPSULE ONE TO BE TAKEN EACH DAY*

07/01/2013	Mrs [redacted] Smith at Stevenston Health Centre
Comment	see adoc

04/01/2013	Dr Anne [redacted] at Telephone Consultation
Comment	pt. now has date for cholecystectomy = 18 feb, needs continuing med3 from 4 jan x 4 weeks - gallstones.

30/10/2012	Mrs Moira Lappin at Stevenston Health Centre
Examination	fbc taken

30/10/2012	Dr K Ghosh at Stevenston Health Centre
Examination	discharged from hospital today with biliary colic - given tramadol, paracetamol and laxative- advised to take medication during colic and to take laxatives - states that she is awaiting colonoscopy and US examination of breast, as they have found a lump on the breast.
Problem (FIRST)	**Biliary colic**

18/10/2012	Dr K G[redacted] at Stevenston Health Centre
Comment	ran out of pain killer, seen by ADOC and given tramadol - no vomiting today, looking for sick line. med 3 given for 4 weeks abdominal pain - awaiting cholecystectomy .
Problem (FIRST)	**Biliary colic symptom**
Medication	Tramadol Hydrochloride Capsules 50 mg *30 capsule ONE THREE TIMES DAY* Metoclopramide Hydrochloride Tablets 10 mg *15 tablet TAKE ONE THREE TIMES A DAY FOR NAUSEA AND VOMITING*

18/10/2012	Miss Carolanne Munn at Stevenston Health Centre
Comment	Seen by ADOC - given prescription - see fax dated 17/10/2012 cm

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11/10/2012	Miss Carolanne Munn at Stevenston Health Centre
Comment	REFERRAL TO SURGICAL, XH KG/CM
11/10/2012	Dr [redacted] at [redacted] Health Centre
Comment	epigastric discomfort since yesterday. vomited yesterday, no vomiting today, pain radiating to back, moved bowel today. o/e pulse 80/min, abdomen soft, tender over biliary point, no rigidity, bowel sound active ? biliary colic ? gastritis - dietary advice given, to take paracetamol, omeprazole and buscopan, review.
Medication	Hyoscine Butylbromide Tablets 10 mg *30 tablet ONE OR TWO TABLETS THREE TIMES A DAY* Omeprazole Capsules (Gastro-Resistant) 20 mg *28 CAPSULE ONE TO BE TAKEN EACH DAY*
Comment	This 20 yr old is known to have intermittent biliary colic, and USS of abdomen has confirmed this with possible chronic cholecystitis - I would appreciate if you [redacted] see her with a view to cholecystectomy.
09/10/2012	Mrs Gillian McCormick at Stevenston Health Centre
Comment	Feels that Doctor is not helping her, says that doctor is trying various laxatives however patient feel that she needs referred to hospital ? re haemorrhoids and stomach problems. Spoke to Doc - advised patient to have Blood taken as requested by Doctor and then return to see Doctor for ? referral if Doctor feels that this is appropriate then. Phoned patient to discuss afore mentioned.
09/10/2012	Dr [redacted] at Stevenston Health Centre
Comment	constipated , since child [redacted] states that her abdomen goes into cramp when moving bowel - also has [redacted] - advised re diet, stop senna, given fybogel - abdomen soft, no rigidity, no mass, bowel sound active.- review in 2 weeks.
Problem (FIRST)	**Constipation**
Medication	Ispaghula Husk Sugar and Gluten Free Effervescent granules 3.5 grams/sachet *30 sachet 1 sachet Twice daily*
18/09/2012	Dr K [redacted] at Stevenston Health Centre
Comment	looks pale, had blood test done at AE- iron deficiency anaemia. also history of constipation and piles. - dietary advice given, given movicol-advised to attend in 4 weeks for FBC- explained that [redacted] stones - silent as gall bladder is not inflammed - recurrent abd pain is due to constipation
Problem (FIRST)	**Iron deficiency anaemias**
Medication	Ferrous Fumarate Tablets 210 mg *100 tablet ONE TO BE TAKEN THREE TIMES A DAY* Macrogol Compound Oral Powder (sachets) NPF Sugar Free *30 sachet 1 sachet Twice daily*
Test Request	FBC
17/09/2012	Dr K [redacted] at Stevenston Health Centre
Comment	USS result given.
Problem (FIRST)	**Gallstones**
03/09/2012	Miss Carolanne Munn at Stevenston Health Centre
Comment	Seen by ADOC - given prescription - see fax cm
06/08/2012	Dr K [redacted] at Stevenston Health Centre
Comment	attended AE this morning with upper abdominal pain and vomiting - checked by doctor, blood taken nil of note, abdomen soft, no mass ,no tenderness , prone to constipation - taking lactulose not working add senns USS organised- dietary advice
Problem (REVIEW)	**Upper abdominal pain**
Medication	Senna Tablets 7.5 mg *30 TABLET(S) TWO TABLETS AT NIGHT* Hyoscine Butylbromide Tablets 10 mg *30 tablet TWO TO BE TAKEN FOUR TIMES A DAY WHEN REQUIRED*
06/08/2012	Mrs Gillian McCormick at [redacted] Health Centre
Comment	Seen at ADOC - given prescription - see fax cm
31/07/2012	Dr Nikita Jaiswal at Stevenston Health Centre
Problem (FIRST)	**Dyspepsia**
History	new pt from fife. has had long standing problems with the upper stomach- pains on eating chips/sugar. omeprazole helped initially but not now. lactulose not helping bowel movts.

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NHS Confidential: [redacted] data about a patient

Comment	try rx as below. disc diet and PIL websites given.
Medication	Lactulose Solution 3.1-3.7 g/5 ml *300 ML 10 MLS Twice daily*
	Omeprazole Capsules (Gastro-Resistant) 20 mg *28 CAPSULE ONE TWICE A DAY*
	Senna Tablets 7.5 mg *30 TABLET(S) TAKE TWO TO FOUR TABLETS AT NIGHT*
-	---
26/07/2012 00:00	Mrs Mary [redacted] at General Practice Surgery
Result	Cervical Cytology
Follow up	Cervical smear due (26/07/2015) SCCRS Recall
-	---
25/07/2012	Mrs [redacted] Dodds at Stevenston Health Centre
Comment	fta for 45 min booking appointment m [redacted] cmw
-	---
16/07/2012	Dr K [redacted] at Stevenston Health Centre
Comment	epigastric pain , radiating to back, occasional vomiting, also constipated, denies haematemesis, currently 6 weeks [redacted] abdomen soft, no tenderness, no rigidity, bowel sound active - advised stop smoking, dietary advice given, ? dyspepsia or GORD- try PPI , review, to make booking appointment with midwife.
Problem (FIRST)	**Upper abdominal pain**
Medication	Omeprazole Capsules (Gastro-Resistant) 40 mg *28 CAPSULE ONE TO BE TAKEN EACH DAY*
	Lactulose Solution 3.1-3.7 g/5 ml *300 ML THREE 5ML SPOONFULS TO BE TAKEN TWICE A DAY*
-	—
12/07/2012	Mrs Anne Hair at Stevenston Health Centre
Examination	Blood pressure reading 90/60 mm Hg
	O/E - height, 168 cm
	O/E - weight, 63 Kg
	Body Mass Index, 22.32
Comment	npm completed .Patient experiencing abdominal pain/ back pain since feb which is unresolved. ? previously diagnosed with constipation .Unsure of the name of laxative she is currently taking. History of asthma and kidney stones in the past [redacted] hasUterine /cervical cancer .Recently at ach for scan .Pregnancy at present ? approx 6 weeks.
Family History	FH: Ischaemic heart dis. >60
	FH: Asthma
Social	Heavy smoker - 20-39 cigs/day
	Alcohol consumption, 0 units/week
	FITT activity level 2; 5-11 occas of mod/vig activt in 4 wks

Medication

Current

Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
05/02/2013	**Diclofenac Sodium E/c tablets 50 mg** ONE TO BE TAKEN THREE TIMES A DAY WITH OR AFTER FOOD 84 tablet	Not Issued	Dr Julie Pennycook	ACUTE
01/11/2012	**Paracetamol Sugar free suspension 250 mg/5 ml** 20 MLS QDS PRN 500 ml	07/12/2012P	Dr Julie Pennycook	REPEAT

Past

Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
04/06/2013	**Prednisolone Tablets 5 mg** 8 TABS DAILY 40 TABLET	22/01/2013P	Dr Julie Pennycook	ACUTE
04/06/2013	**Tramadol Hydrochloride Capsules 50 mg** ONE THREE TIMES DAY 30 capsule	04/06/2013P	Dr Julie Pennycook	ACUTE
04/06/2013	**Salbutamol Cfc-free inhaler 100 micrograms/puff** TWO PUFFS TO BE INHALED UP TO FOUR TIMES A DAY WHEN REQUIRED 1 INHALER	04/06/2013P	Dr Julie Pennycook	ACUTE
14/02/2013	**Domperidone Tablets 10 mg** ONE TABLET 3 OR 4 TIMES DAILY BEFORE FOOD 30 TABLET	14/02/2013P	Dr K [redacted]	ACUTE
14/02/2013	**Hyoscine Butylbromide Tablets 10 mg** TWO TO BE TAKEN FOUR TIMES A DAY WHEN REQUIRED 56 TABLET	14/02/2013P	Dr K [redacted]	ACUTE
14/02/2013	**Dihydrocodeine Tablets 30 mg** ONE TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED 30 TABLET	14/02/2013P	Dr K Ghosh	ACUTE

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NHS Confidential: [redacted] data about a patient

29/01/2013	**Tramadol Hydrochloride Capsules 50 mg** ONE THREE TIMES DAY 30 capsule	21/02/2013P	Dr K [redacted]	ACUTE
29/01/2013	**Hyoscine Butylbromide Tablets 10 mg** ONE OR TWO TABLETS THREE TIMES A DAY 30 tablet	29/01/2013P	Dr K [redacted]	ACUTE
22/01/2013	**Prednisolone Tablets 5 mg** 8 TABS DAILY 40 TABLET	22/01/2013P	Dr Julie Pennycook	ACUTE
22/01/2013	**Salbutamol Cfc-free inhaler 100 micrograms/puff** TWO PUFFS TO BE INHALED UP TO FOUR TIMES A DAY WHEN REQUIRED 1 INHALER	22/01/2013P	Dr Julie Pennycook	ACUTE
22/01/2013	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 30 CAPSULE	22/01/2013P	Dr Julie Pennycook	ACUTE
07/12/2012	**Tramadol Hydrochloride Capsules 50 mg** ONE THREE TIMES DAY 30 capsule	04/01/2013P	Dr Julie Pennycook	ACUTE
31/10/2012	**Lactulose Solution 3.1-3.7 g/5 ml** 10 MLS Twice [redacted] 300 ML	15/11/2012P	Dr Julie Pennycook	ACUTE
31/10/2012	**Macrogol Compound Oral Powder (sachets) NPF Sugar Free** 1 sachet Twice [redacted] 30 sachet	15/11/2012P	Dr Julie Pennycook	ACUTE
18/10/2012	**Tramadol Hydrochloride Capsules 50 mg** ONE THREE TIMES DAY 30 capsule	15/11/2012P	Dr Julie Pennycook	ACUTE
18/10/2012	**Metoclopramide Hydrochloride Tablets 10 mg** TAKE ONE THREE TIMES A DAY FOR NAUSEA AND VOMITING 15 tablet	18/10/2012P	Dr K [redacted]	ACUTE
11/10/2012	**Hyoscine Butylbromide Tablets 10 mg** ONE OR TWO TABLETS THREE TIMES A DAY 30 tablet	11/10/2012P	Dr K Ghosh	ACUTE
11/10/2012	**Omeprazole Capsules (Gastro-Resistant) 20 mg** ONE TO BE TAKEN EACH DAY 28 CAPSULE	11/10/2012P	Dr K Ghosh	ACUTE
09/10/2012	**Ispaghula Husk Sugar and Gluten Free Effervescent granules 3.5 grams/sachet** 1 sachet Twice daily 30 sachet	09/10/2012P	Dr K [redacted]	ACUTE
18/09/2012	**Ferrous Fumarate Tablets 210 mg** ONE TO BE TAKEN THREE TIMES A DAY 100 tablet	18/09/2012P	Dr K [redacted]	ACUTE
18/09/2012	**Macrogol Compound Oral Powder (sachets) NPF Sugar Free** 1 sachet Twice daily 30 sachet	15/10/2012P	Dr K [redacted]	ACUTE
06/08/2012	**Senna Tablets 7.5 mg** TWO TABLETS AT NIGHT 30 TABLET(S)	06/08/2012P	Dr K [redacted]	ACUTE
06/08/2012	**Hyoscine Butylbromide Tablets 10 mg** TWO TO BE TAKEN FOUR TIMES A DAY WHEN REQUIRED 30 tablet	06/08/2012P	Dr K [redacted]	ACUTE
31/07/2012	**Lactulose Solution 3.1-3.7 g/5 ml** 10 MLS Twice daily 300 ML	31/07/2012P	Dr Julie Pennycook	ACUTE
31/07/2012	**Omeprazole Capsules (Gastro-Resistant) 20 mg** ONE TWICE A DAY 28 CAPSULE	31/07/2012P	Dr Julie Pennycook	ACUTE
31/07/2012	**Senna Tablets 7.5 mg** TAKE TWO TO FOUR TABLETS AT NIGHT 30 TABLET(S)	31/07/2012P	Dr Julie Pennycook	ACUTE
16/07/2012	**Omeprazole Capsules (Gastro-Resistant) 40 mg** ONE TO BE TAKEN EACH DAY 28 CAPSULE	16/07/2012P	Dr K [redacted]	ACUTE
16/07/2012	**Lactulose Solution 3.1-3.7 g/5 ml** THREE 5ML SPOONFULS TO BE TAKEN TWICE A DAY 300 ML	16/07/2012P	Dr K Ghosh	ACUTE

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NHS
Forth Valley
Microbiology

SURNAME: SMITH P.O Box 21616 Stirling	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Unknown	WARD: Prison Medical Officer CORN G.P.: Cornton Vale H.M. Institution		
CLINICAL DATA: ALTERED VAG DISCHARGE			

Pyogenic Culture

Microscopy.

White Blood Cells	nil
Yeasts	nil
Trichomonas vaginalis	nil

Culture.
No pathogens isolated

EXAMINATION: Pyogenic Culture	LAB No.: MG069153Z	AUTHORISED	
NATURE OF SPECIMEN: Low Vaginal swab	[redacted] COLLECTED: 04/02/2015	DATE RECEIVED: 04/02/2015	[redacted] REPORTED: 06/02/2015

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NHS Confidential. Personal data about a patient

NHS
Forth Valley
Microbiology

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Pyogenic Culture

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White Blood Cells	nil
Yeasts	nil
Trichomonas vaginalis	nil

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No pathogens isolated

EXAMINATION: Pyogenic Culture	LAB No.: MG069153Z	AUTHORISED	
NATURE OF SPECIMEN: Low Vaginal swab	[redacted] COLLECTED: 04/02/2015	DATE RECEIVED: 04/02/2015	[redacted] REPORTED: 06/02/2015

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NHS Confidential: Personal data about a patient

Department of General Surgery
Associate Specialist: Mr Subodh [redacted]
Tel: 01324 566942
Fax:

Forth Valley Royal Hospital
Stirling Road
Larbert
FK5 4WR

NHS Forth Valley

Ref: SS/JH/S681824
CHI: 0412913127

Clinic Date: 03 March 2015
Date: 04 March 2015

RECEIVED 11 MAR 2015

Dr Sayers
H M Prison
Cornton Vale
Stirlfing
FK9 5NU

Dear Dr Sayers

Georgina Smith 04/12/1991
H M Prison, Cornton Vale, STIRLING FK9 5NU

Thanks a lot for referring Georgina to the breast clinic. Georgina who is 23 years old is aware of a lump in her left breast for the last 2 years and in her right breast for the last 2 months, both of them are painful but no cyclical pattern to this pain. There are no other breast symptoms. She is complaining of some lumps in her abdomen as well. She smokes 20 cigarettes a day. Her [redacted] had breast cancer in her 60's and an [redacted] has also had breast cancer. Her [redacted] has got womb cancer. Georgina has two [redacted]

Today on examination no masses are palpable in the right breast or axilla. On the left side there was a benign lumpy area palpable in the upper outer quadrant. The left axilla was normal. On the abdomen there was some fatty tissue palpable where she was complaining of the lump. Ultrasound of both the breasts showed no focal abnormality and just fibroglandular tissue.

Georgina has been reassured. She has been given a leaflet on breast pain. She can be prescribed Evening [redacted] oil 2gms a day. She said she is already on Brufen gel for local application. She can be re-referred to the breast clinic in case there are any further [redacted]

Thank you.

Yours sincerely

Mr S [redacted]
Associate Specialist in General Surgery

Needs to buy her own

File

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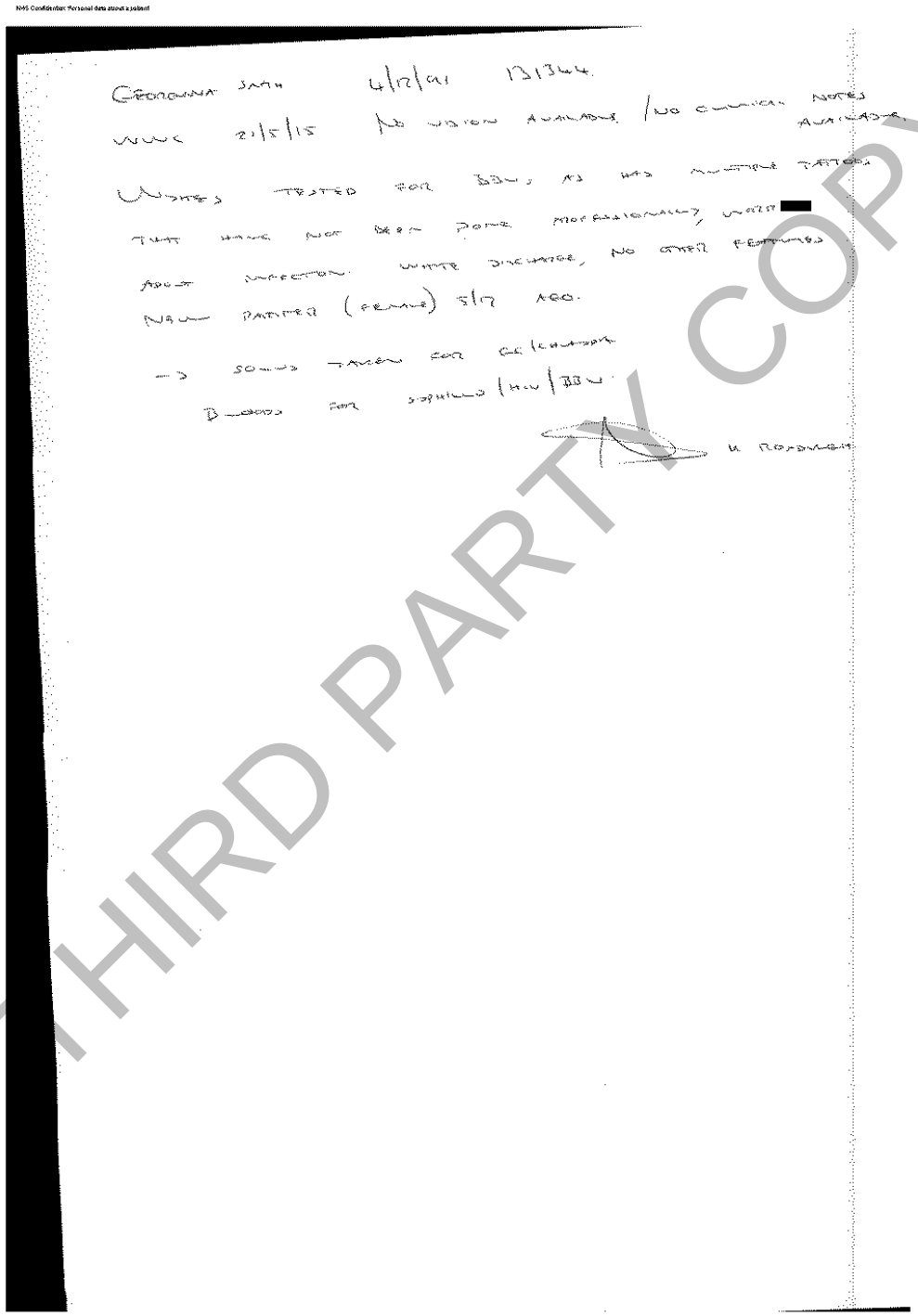

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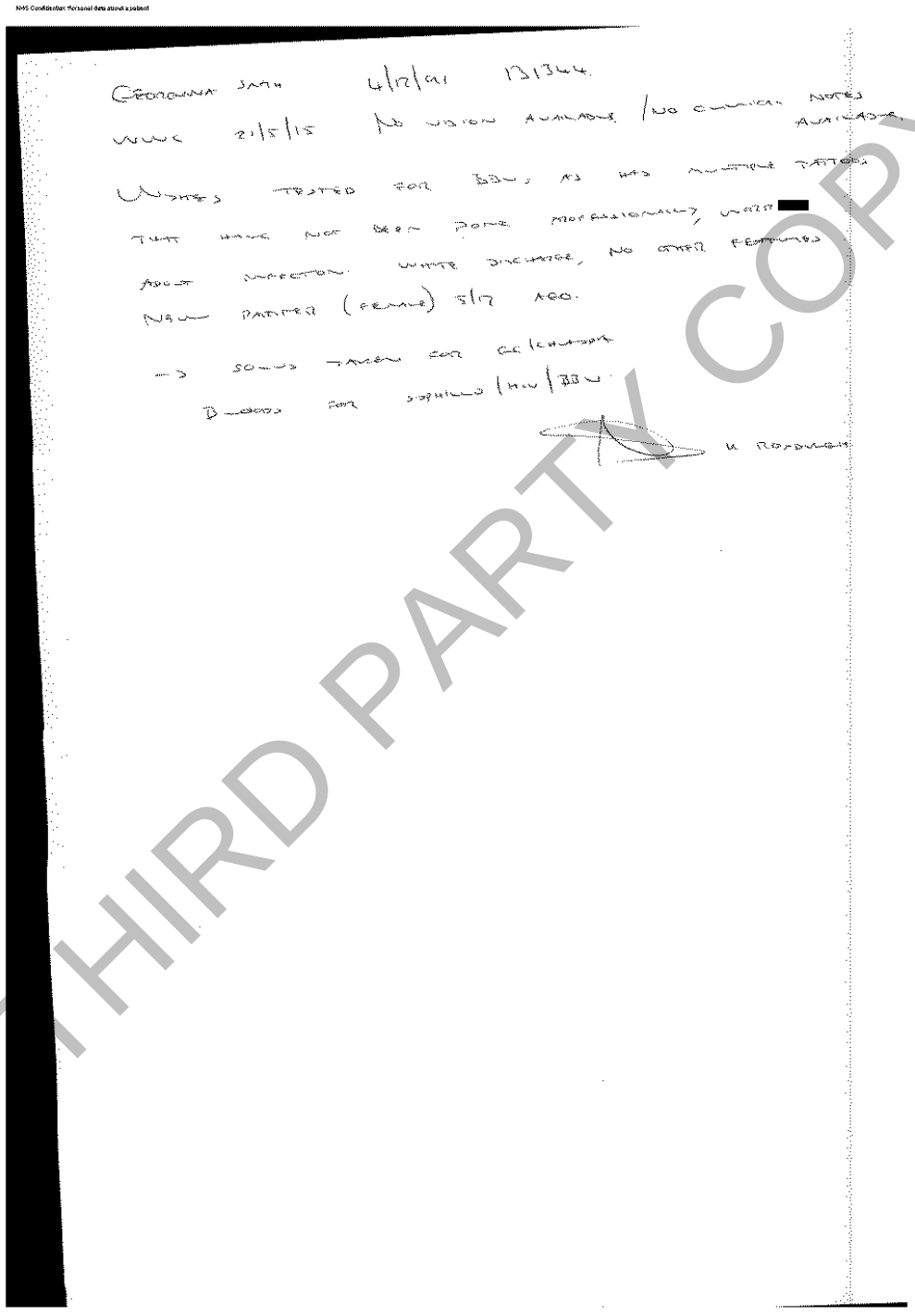

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NHS Confidential: Personal data about a patient

NHS
Forth Valley
Microbiology

SURNAME: SMITH P.O Box 21616 Stirling	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Roxburgh	WARD: Prison Medical Officer CORN G.P.: Cornton Vale H.M. Institution		
CLINICAL DATA: BBV SCREEN			

Syphilis Screening Test	Negative
Hepatitis B surface antigen	Negative
Hepatitis C antibody screen	Negative
HIV antigen / antibody test	Negative

[redacted]
Syphilis Serology

NATURE OF SPECIMEN: Venous blood	LAB No.: MS048515W	AUTHORISED: [redacted]	
	DATE COLLECTED: 21/05/2015	DATE RECEIVED: 22/05/2015	DATE REPORTED: 22/05/2015

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NHS Confidential: Personal data about a patient

Department of General Surgery
Associate Specialist: Mr Subodh [redacted]
Tel: 01324 566942
Fax:

Forth Valley Royal Hospital
Stirling Road
Larbert
FK5 4WR

NHS Forth Valley

Ref: SS/JH/S681824
CHI: 0412913127

Clinic Date: 03 March 2015
Date: 04 March 2015

RECEIVED 11 MAR 2015

Dr Sayers
H M Prison
Cornton Vale
Stirlfing
FK9 5NU

Dear Dr Sayers

Georgina Smith 04/12/1991
H M Prison, Cornton Vale, STIRLING FK9 5NU

Thanks a lot for referring Georgina to the breast clinic. Georgina who is 23 years old is aware of a lump in her left breast for the last 2 years and in her right breast for the last 2 months, both of them are painful but no cyclical pattern to this pain. There are no other breast symptoms. She is complaining of some lumps in her abdomen as well. She smokes 20 cigarettes a day. Her [redacted] had breast cancer in her 60's and an [redacted] has also had breast cancer. Her [redacted] has got womb cancer. Georgina has two [redacted]

Today on examination no masses are palpable in the right breast or axilla. On the left side there was a benign lumpy area palpable in the upper outer quadrant. The left axilla was normal. On the abdomen there was some fatty tissue palpable where she was complaining of the lump. Ultrasound of both the breasts showed no focal abnormality and just fibroglandular tissue.

Georgina has been reassured. She has been given a leaflet on breast pain. She can be prescribed Evening [redacted] oil 2gms a day. She said she is already on Brufen gel for local application. She can be re-referred to the breast clinic in case there are any further [redacted]

Thank you.

Yours sincerely

Mr S [redacted]
Associate Specialist in General Surgery

Needs to buy her own

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NHS
Forth Valley
Microbiology

SURNAME: SMITH P.O Box 21616 Stirling	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Roxburgh	WARD: Prison Medical Officer CORN G.P.: Cornton Vale H.M. Institution		
CLINICAL DATA: BBV SCREEN			

Syphilis Screening Test	Negative
Hepatitis B surface antigen	Negative
Hepatitis C antibody screen	Negative
HIV antigen / antibody test	Negative

[redacted]
Syphilis Serology

NATURE OF SPECIMEN: Venous blood	LAB No.: MS048515W	AUTHORISED: [redacted]	
	DATE COLLECTED: 21/05/2015	DATE RECEIVED: 22/05/2015	DATE REPORTED: 22/05/2015

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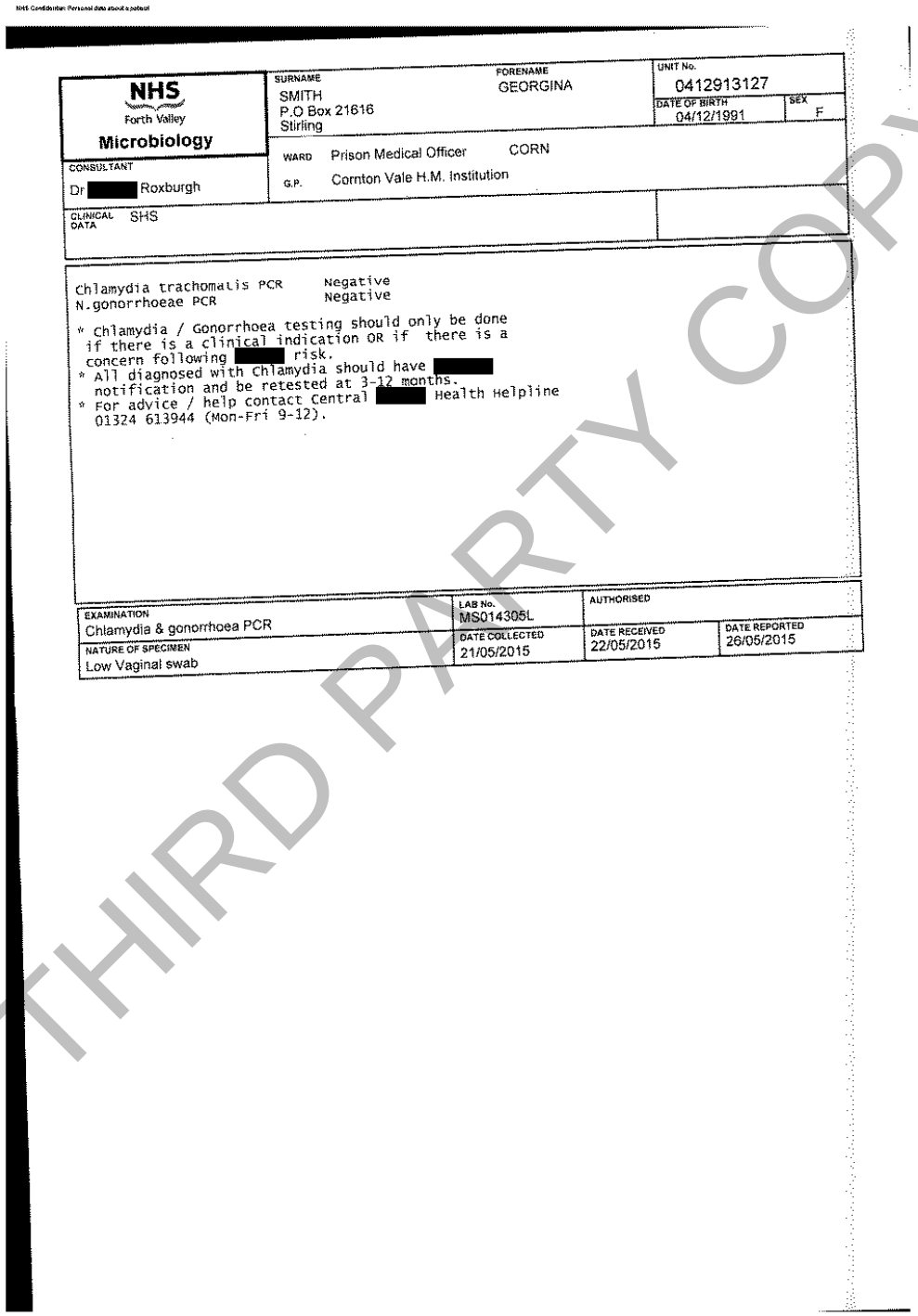

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[redacted]

NHS
Forth Valley
Microbiology

SURNAME: SMITH P.O Box 21616 Stirling	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Roxburgh	WARD: Prison Medical Officer CORN G.P.: Cornton Vale H.M. Institution		
CLINICAL DATA: SHS			

Chlamydia trachomatis PCR — Negative
N.gonorrhoeae PCR — Negative

* Chlamydia / Gonorrhoea testing should only be done if there is a clinical indication OR if there is a concern following [redacted] risk.
* All diagnosed with Chlamydia should have [redacted] notification and be retested at 3-12 months.
* For advice / help contact Central [redacted] Health Helpline 01324 613944 (Mon-Fri 9-12).

EXAMINATION: Chlamydia & gonorrhoea PCR	LAB No.: MS014305L	AUTHORISED:	
NATURE OF SPECIMEN: Low Vaginal swab	DATE COLLECTED: 21/05/2015	DATE RECEIVED: 22/05/2015	DATE REPORTED: 26/05/2015

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[redacted]

NHS
Forth Valley
Microbiology

SURNAME: SMITH P.O Box 21616 Stirling	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
WARD: Prison Medical Officer CORN G.P.: Cornton Vale H.M. Institution			
CONSULTANT: Dr [redacted] Roxburgh			
CLINICAL DATA: SHS			

Chlamydia trachomatis PCR — Negative
N.gonorrhoeae PCR — Negative

* Chlamydia / Gonorrhoea testing should only be done if there is a clinical indication OR if there is a concern following [redacted] risk.
* All diagnosed with Chlamydia should have [redacted] notification and be retested at 3-12 months.
* For advice / help contact Central [redacted] Health Helpline 01324 613944 (Mon-Fri 9-12).

EXAMINATION: Chlamydia & gonorrhoea PCR	LAB No.: MS014305L	AUTHORISED:	
NATURE OF SPECIMEN: Low Vaginal swab	DATE COLLECTED: 21/05/2015	DATE RECEIVED: 22/05/2015	DATE REPORTED: 26/05/2015

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Emergency Department
Forth Valley Royal Hospital
Stirling Road
Larbert FK5 4WR

Dr C Sayers

8 July 2015

Dear Dr Sayers

Re: Georgina Smith, H M Prison,, Cornton Vale,, STIRLING, FK9 5NU
Date of Birth: 04.12.91 Hospital Number: 0412913127 CHI Number: 0412913127

Your patient attended Forth Valley Royal Hospital on the 8 JUL 2015 at 17:54 pm.

The presenting complaint was: **Lower Abdo Pain**

Triage Information: **Acute Onset 9am Today - Lower Abdo Pain And Pv Bleeding. Bright And Chatty At Triage. Ews 0**

The following investigations were carried out: **Nil**

The A&E diagnosis was: **Obs And Gyn - Female Pelvic Inflammatory Disease**

The following treatment was given: **Nil**

At the conclusion of treatment the patient was: ***7 No Alcohol-Left By Own Means**

Follow-up: **1 General Practitioner**

Additional Information: **Lower abdo pain, abnormal PV bleeding. No significant discharge. HcG negative. Urinalysis- blood. imp PID, no swabs taken in department. empirical tx with abxs- metronidazole 1 tab twice daily and ofloxacin 1 tab twice daily for 14 days. Advised to see medical centre to ensure resolving +/- swabs.**

Yours sincerely,

Dr L LANKSTON.

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VACCINATION PROGRAMME/PRESCRIPTION

H.M.I. & Y.O.I. CORNTON VALE

Patient's Name Georgine Smith

Spin No 131344 Date of Birth 4/12/91

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
Hepatitis B # 1				
Hepatitis B # 2				
Hepatitis B # 3				
Hepatitis B # 4				
Hepatitis Booster				
Hepatitis Booster				
Hepatitis B Titres 3/12 after last inj.				

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
TWINRIX # 1				
TWINRIX # 2				
TWINRIX # 3				
TWINRIX # 4	21/7/15	AHAB8316AP	C Sc	C Sc

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
Hepatitis A # 1				
Hepatitis A # 2				
MMR2				
Men C Vaccine				

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Pages:

Emergency Department
Forth Valley Royal Hospital
Stirling Road
Larbert FK5 4WR

Dr C Sayers

8 July 2015

Dear Dr Sayers

Re: Georgina Smith, H M Prison,, Cornton Vale,, STIRLING, FK9 5NU
Date of Birth: 04.12.91 Hospital Number: 0412913127 CHI Number: 0412913127

Your patient attended Forth Valley Royal Hospital on the 8 JUL 2015 at 17:54 pm.

The presenting complaint was: **Lower Abdo Pain**

Triage Information: **Acute Onset 9am Today - Lower Abdo Pain And Pv Bleeding. Bright And Chatty At Triage. Ews 0**

The following investigations were carried out: **Nil**

The A&E diagnosis was: **Obs And Gyn - Female Pelvic Inflammatory Disease**

The following treatment was given: **Nil**

At the conclusion of treatment the patient was: ***7 No Alcohol-Left By Own Means**

Follow-up: **1 General Practitioner**

Additional Information: **Lower abdo pain, abnormal PV bleeding. No significant discharge. HcG negative. Urinalysis- blood. imp PID, no swabs taken in department, empirical tx with abxs- metronidazole 1 tab twice daily and ofloxacin 1 tab twice daily for 14 days. Advised to see medical centre to ensure resolving +/- swabs.**

Yours sincerely,

Dr L LANKSTON.

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VACCINATION PROGRAMME/PRESCRIPTION

H.M.I. & Y.O.I. CORNTON VALE

Patient's Name Georgine Smith

Spin No 131344 Date of Birth 4/12/91

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
Hepatitis B # 1				
Hepatitis B # 2				
Hepatitis B # 3				
Hepatitis B # 4				
Hepatitis Booster				
Hepatitis Booster				
Hepatitis B Titres 3/12 after last inj.				

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
TWINRIX # 1				
TWINRIX # 2				
TWINRIX # 3				
TWINRIX # 4	21/7/15	AHAB8316AP	C Sc	C Sc

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
Hepatitis A # 1				
Hepatitis A # 2				
MMR2				
Men C Vaccine				

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NHS Forth Valley
Microbiology

SURNAME: SMITH P.O Box 21616 Stirling	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Roxburgh	WARD: Prison Medical Officer CORN G.P.: Cornton Vale H.M. Institution		
CLINICAL DATA: FSHS			

Pyogenic Culture

Microscopy.

White Blood Cells	present in small numbers.
Yeasts	nil
Trichomonas vaginalis	nil

Culture.
No pathogens isolated

EXAMINATION: Pyogenic Culture	LAB No.: MG0650049G	AUTHORISED	
NATURE OF SPECIMEN: Cervical swab	DATE COLLECTED: 21/07/2015	DATE RECEIVED: 21/07/2015	DATE REPORTED: 23/07/2015

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NHS Forth Valley
Microbiology

SURNAME: SMITH P.O Box 21616 Stirling	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Roxburgh	WARD: Prison Medical Officer CORN G.P.: Cornton Vale H.M. Institution		
CLINICAL DATA: FSHS			

Pyogenic Culture

Microscopy.

White Blood Cells	present in small numbers.
Yeasts	nil
Trichomonas vaginalis	nil

Culture.
No pathogens isolated

EXAMINATION: Pyogenic Culture	LAB No.: MG0650049G	AUTHORISED	
NATURE OF SPECIMEN: Cervical swab	DATE COLLECTED: 21/07/2015	DATE RECEIVED: 21/07/2015	DATE REPORTED: 23/07/2015

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NHS
Forth Valley
Microbiology

SURNAME: SMITH P.O Box 21616 Stirling	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Sayers	WARD: Prison Medical Officer CORN G.P.: Cornton Vale H.M. Institution		
CLINICAL DATA: FSHS			

Hepatitis B surface antigen	Negative	
Hepatitis B surface antibody	70	IU/L
Hepatitis C antibody screen	Negative	
HIV antigen / antibody test	Negative	

Interpretation of Antibody titres for Immunocompetent persons

Titre	
<10	Non responder - give 2 additional doses (0 and 1 month) then check titres in a further 2 - 3 months. If still <10 consider to be non-responder.
10-99	Responder - give one additional dose and check titre in 2 - 3 months. If still >10 consider to be a responder. No further booster doses or antibody checks required.
>100	Responder - No further booster doses or antibody checks required.

These comments apply to antibody checks after full course of primary immunisation. N.B. Please ensure full vaccination his is given to allow appropriate testing.

EXAMINATION: Hepatitis Serology	LAB No.: MS031921V	AUTHORISED: Elaine Callaghan	
NATURE OF SPECIMEN: Venous blood	DATE COLLECTED: 21/07/2015	DATE RECEIVED: 22/07/2015	DATE REPORTED: 22/07/2015

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NHS
Forth Valley
Microbiology

SURNAME: SMITH P.O Box 21616 Stirling	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Sayers	WARD: Prison Medical Officer CORN G.P.: Cornton Vale H.M. Institution		
CLINICAL DATA: FSHS			

Hepatitis B surface antigen	Negative	
Hepatitis B surface antibody	70	IU/L
Hepatitis C antibody screen	Negative	
HIV antigen / antibody test	Negative	

Interpretation of Antibody titres for Immunocompetent persons

Titre	
<10	Non responder - give 2 additional doses (0 and 1 month) then check titres in a further 2 - 3 months. If still <10 consider to be non-responder.
10-99	Responder - give one additional dose and check titre in 2 - 3 months. If still >10 consider to be a responder. No further booster doses or antibody checks required.
>100	Responder - No further booster doses or antibody checks required.

These comments apply to antibody checks after full course of primary immunisation. N.B. Please ensure full vaccination his is given to allow appropriate testing.

EXAMINATION: Hepatitis Serology	LAB No.: MS031921V	AUTHORISED: Elaine Callaghan	
NATURE OF SPECIMEN: Venous blood	DATE COLLECTED: 21/07/2015	DATE RECEIVED: 22/07/2015	DATE REPORTED: 22/07/2015

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HbSAb - (70)

VACCINATION PROGRAMME/PRESCRIPTION

H.M.I. & Y.O.I. CORNTON VALE

Patient's Name Georgina Smith

Spin No 131344 Date of Birth [redacted]

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
Hepatitis B # 1				
Hepatitis B # 2				
Hepatitis B # 3				
Hepatitis B # 4				
Hepatitis Booster				
Hepatitis Booster				
Hepatitis B Titres 3/12 after last inj.				

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
TWINRIX # 1				
TWINRIX # 2				
TWINRIX # 3				
TWINRIX # 4	24/7/15	Twinrix ADULT Lot AHABS314AE Exp 11.2016	C Dc.	C Dc

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
Hepatitis A # 1				
Hepatitis A # 2				
MMR2				
Men C Vaccine				

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NHS Confidential: Personal data about a patient

NHS
Forth Valley
Microbiology

SURNAME: [redacted] Box 21616 ng	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Roxburgh	WARD: Prison Medical Officer	CORN	
	G.P.: Cornton Vale H.M. Institution		
CLINICAL DATA: FSHS			

Chlamydia trachomatis PCR Negative
N.gonorrhoeae PCR Negative

* Chlamydia / Gonorrhoea testing should only be done if there is a clinical indication OR if there is a concern following [redacted] risk.
* All diagnosed with Chlamydia should have [redacted] notification and be retested at 3-12 months.
* For advice / help contact Central [redacted] Health Helpline 01324 613944 (Mon-Fri 9-12).

EXAMINATION	LAB No.	AUTHORISED	
Chlamydia & gonorrhoea PCR	MS015935H		
NATURE OF SPECIMEN	DATE COLLECTED	[redacted] RECEIVED	DATE REPORTED
Cervical swab	21/07/2015	22/07/2015	23/07/2015

24/9/15
Ben

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NHS
Forth Valley
Microbiology

SURNAME	FORENAME	UNIT No.
SMITH	GEORGINA	0412913127
[redacted] Box 21616		DATE OF BIRTH 04/12/1991 / SEX F
[redacted]ng		

CONSULTANT: Dr [redacted] Roxburgh
WARD: Prison Medical Officer CORN
G.P.: Cornton Vale H.M. Institution
CLINICAL DATA: FSHS

Chlamydia trachomatis PCR Negative
N.gonorrhoeae PCR Negative

* Chlamydia / Gonorrhoea testing should only be done if there is a clinical indication OR if there is a concern following [redacted] risk.
* All diagnosed with Chlamydia should have [redacted] notification and be retested at 3-12 months.
* For advice / help contact Central [redacted] Health Helpline 01324 613944 (Mon-Fri 9-12).

EXAMINATION	LAB No.	AUTHORISED	
Chlamydia & gonorrhoea PCR	MS015935H		
NATURE OF SPECIMEN	DATE COLLECTED	[redacted]RECEIVED	DATE REPORTED
Cervical swab	21/07/2015	22/07/2015	23/07/2015

24/8/15
Ben

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HbSAb - (70)

VACCINATION PROGRAMME/PRESCRIPTION

H.M.I. & Y.O.I. CORNTON VALE

Patient's Name Georgina Smith

Spin No 131344 Date of Birth [redacted]

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
Hepatitis B # 1				
Hepatitis B # 2				
Hepatitis B # 3				
Hepatitis B # 4				
Hepatitis Booster				
Hepatitis Booster				
Hepatitis B Titres 3/12 after last inj.				

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
TWINRIX # 1				
TWINRIX # 2				
TWINRIX # 3				
TWINRIX # 4	24/7/15	Twinrix ADULT Lot AHABB314AE EXP 11.2016	C Dc.	C Dc

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
Hepatitis A # 1				
Hepatitis A # 2				
MMR2				
Men C Vaccine				

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NHS Forth Valley
Microbiology

SURNAME	FORENAME	UNIT No.
SMITH P.O Box 21616 Stirling	GEORGINA	0412913127
	DATE OF BIRTH: 04/12/1991	SEX: F

CONSULTANT: Unknown

WARD: Prison Medical Officer CORN
G.P.: Cornton Vale H.M. Institution

CLINICAL DATA: UTI

Urine Culture
No growth

Normal Ranges
Red Blood Cells 0 - 40 /ul
White Blood Cells >400/ul and negative culture is considered sterile pyuria.
White Blood Cells >40 and <400/ul with a negative culture, consider further investigation if clinically indicated.

EXAMINATION	LAB No.	AUTHORISED	
Urine exam	MU046390H	W.Ennis	
NATURE OF SPECIMEN	DATE COLLECTED	DATE RECEIVED	DATE REPORTED
Midstream specimen of Urine	12/08/2015	12/08/2015	13/08/2015

MC.
14.8.15.

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NHS Forth Valley
Microbiology

SURNAME: SMITH P.O Box 21616 Stirling	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Unknown	WARD: Prison Medical Officer CORN G.P.: Cornton Vale H.M. Institution		
CLINICAL DATA: UTI			

Urine Culture
No growth

Normal Ranges
Red Blood Cells 0 - 40 /ul
White Blood Cells >400/ul and negative culture is considered sterile pyuria.
White Blood Cells >40 and <400/ul with a negative culture, consider further investigation if clinically indicated.

EXAMINATION: Urine exam	LAB No.: MU046390H	AUTHORISED: W.Ennis	
NATURE OF SPECIMEN: Midstream specimen of Urine	DATE COLLECTED: 12/08/2015	DATE RECEIVED: 12/08/2015	DATE REPORTED: 13/08/2015

MC.
14.8.15.

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VACCINATION PROGRAMME/PRESCRIPTION

H.M.I. & Y.O.I. CORNTON VALE

Patient's Name Georgina [redacted] ith.

Spin No 131344 Date of Birth 4/12/91

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
Hepatitis B # 1				
Hepatitis B # 2				
Hepatitis B # 3				
Hepatitis B # 4				
Hepatitis Booster				
Hepatitis Booster				
Hepatitis B Titres 3/12 after last inj.				

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
TWINRIX # 1				
TWINRIX # 2				
TWINRIX # 3				
TWINRIX # 4	17/8/15	Twinrix ADULT Lot: AHA883218J EXP: 01-2017	[signature]	[signature]

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
Hepatitis A # 1				
Hepatitis A # 2				
MMR2				
Men C Vaccine				

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VACCINATION PROGRAMME/PRESCRIPTION

H.M.I. & Y.O.I. CORNTON VALE

Patient's Name Georgina [redacted] ith.

Spin No 131344 Date of Birth 4/12/91

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
Hepatitis B # 1				
Hepatitis B # 2				
Hepatitis B # 3				
Hepatitis B # 4				
Hepatitis Booster				
Hepatitis Booster				
Hepatitis B Titres 3/12 after last inj.				

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
TWINRIX # 1				
TWINRIX # 2				
TWINRIX # 3				
TWINRIX # 4	17/8/15	Twinrix ADULT Lot: AHA883218J EXP: 01-2017	[signature]	[signature]

Type of Vaccine	Date	Vaccine No Or Sticker	Doctors' Signature	Nurses' Signature
Hepatitis A # 1				
Hepatitis A # 2				
MMR2				
Men C Vaccine				

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NHS Confidential: Personal data about a patient

NHS Forth Valley

RADIOLOGY REPORT- Stirling Community Hospital

CHI NUMBER: 0412913127 **Examination Number:** 32001001

Name: Smith, Georgina DOB: 04/12/1991

Address: H M Prison,, Cornton Vale,, STIRLING, -- **CC:** -

Examination: US Abdomen and Pelvis, US Pelvis (Transvaginal)

Examination Date: 28/08/2015 **Examination Time:** 13:30

Dictating Radiologist: [redacted] BAIN SONG/R HCPC - RA25071

Typed by: None

Referring Consultant: PHYSICIAN OUTSIDE FORTH VALLEY

Referring Department / Location: CORNTON VALE PRISON

CLINICAL HISTORY : 1 month of abdominal swelling and bloating, pain and occasional light spotting. Abdomen appears swollen. Weight gain.? Large ovarian cyst.

ABDOMINAL AND PELVIC ULTRASOUND :
The liver is normal in size and appearance with no focal or diffuse abnormality evident and no intrahepatic duct dilatation visible. Hepatopetal flow demonstrated within the portal vein.
The gallbladder was not identified. The patient states that she has been fasted for more than 12 hours prior to this examination. As a result the possibility of a gallbladder full of gallstones cannot be excluded.
The CBD is normal in calibre measuring 2.5 mm.
The pancreas was obscured by overlying bowel gas and the abdominal aorta intermittently obscured.
Both kidneys are grossly normal in appearance.
No splenic abnormality evident.

The bladder was incompletely filled on examination, the retroverted uterus being suboptimally imaged as a result.
Consent was obtained for transvaginal imaging.

The retroverted uterus measures approximately 77 mm in length with no fibroids evident and no endometrial pathology present.
The right ovary is normal in size and appearance containing small follicles.
The left ovary is enlarged by the presence of a few small follicles and a 19.5 x 23.8 mm simple cyst. The cyst demonstrates no internal flow on colour Doppler examination, the size being in keeping with that of a normal physiological cyst.
No adnexal masses evident.
A 22 mm depth of fluid is noted below the uterine fundus.

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NHS Confidential: Personal data about a patient

NHS
Forth Valley

RADIOLOGY REPORT- Stirling Community Hospital

CHI NUMBER: 0412913127 **Examination Number:** 32001001

Name: Smith, Georgina DOB: 04/12/1991

Address: H M Prison,, Cornton Vale,, STIRLING, -- **CC:** -

Examination: US Abdomen and Pelvis, US Pelvis (Transvaginal)

Examination Date: 28/08/2015 **Examination Time:** 13:30

Dictating Radiologist: [redacted] BAIN SONG/R HCPC - RA25071

Typed by: None

Referring Consultant: PHYSICIAN OUTSIDE FORTH VALLEY

Referring Department / Location: CORNTON VALE PRISON

Chaperone : [redacted] Tortolano.

Examination Date: 28/08/2015
Examination: US Abdomen and Pelvis, US Pelvis (Transvaginal)
Date Reported: 28/08/2015
Dictating Radiologist / Clinical Specialist [redacted] **BAIN SONG/R HCPC - RA25071**

Verified by: [redacted] **BAIN SONG/R HCPC - RA25071 on 28/08/2015**

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NHS Confidential: Personal data about a patient

NHS Forth Valley

RADIOLOGY REPORT- Stirling Community Hospital

CHI NUMBER: 0412913127 **Examination Number:** 32001001

Name: Smith, Georgina DOB: 04/12/1991

Address: H M Prison,, Cornton Vale,, STIRLING, -- **CC:** -

Examination: US Abdomen and Pelvis, US Pelvis (Transvaginal)

Examination Date: 28/08/2015 **Examination Time:** 13:30

Dictating Radiologist: [redacted] BAIN SONG/R HCPC - RA25071

Typed by: None

Referring Consultant: PHYSICIAN OUTSIDE FORTH VALLEY

Referring Department / Location: CORNTON VALE PRISON

CLINICAL HISTORY : 1 month of abdominal swelling and bloating, pain and occasional light spotting. Abdomen appears swollen. Weight gain.? Large ovarian cyst.

ABDOMINAL AND PELVIC ULTRASOUND :
The liver is normal in size and appearance with no focal or diffuse abnormality evident and no intrahepatic duct dilatation visible. Hepatopetal flow demonstrated within the portal vein.
The gallbladder was not identified. The patient states that she has been fasted for more than 12 hours prior to this examination. As a result the possibility of a gallbladder full of gallstones cannot be excluded.
The CBD is normal in calibre measuring 2.5 mm.
The pancreas was obscured by overlying bowel gas and the abdominal aorta intermittently obscured.
Both kidneys are grossly normal in appearance.
No splenic abnormality evident.

The bladder was incompletely filled on examination, the retroverted uterus being suboptimally imaged as a result.
Consent was obtained for transvaginal imaging.

The retroverted uterus measures approximately 77 mm in length with no fibroids evident and no endometrial pathology present.
The right ovary is normal in size and appearance containing small follicles.
The left ovary is enlarged by the presence of a few small follicles and a 19.5 x 23.8 mm simple cyst. The cyst demonstrates no internal flow on colour Doppler examination, the size being in keeping with that of a normal physiological cyst.
No adnexal masses evident.
A 22 mm depth of fluid is noted below the uterine fundus.

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RADIOLOGY REPORT- Stirling Community Hospital

CHI NUMBER: 0412913127 **Examination Number:** 32001001

Name: Smith, Georgina DOB: 04/12/1991

Address: H M Prison,, Cornton Vale,, STIRLING, -- **CC:** -

Examination: US Abdomen and Pelvis, US Pelvis (Transvaginal)

Examination Date: 28/08/2015 **Examination Time:** 13:30

Dictating Radiologist: [redacted] BAIN SONG/R HCPC - RA25071

Typed by: None

Referring Consultant: PHYSICIAN OUTSIDE FORTH VALLEY

Referring Department / Location: CORNTON VALE PRISON

Chaperone : [redacted] Tortolano.

Examination Date: 28/08/2015
Examination: US Abdomen and Pelvis, US Pelvis (Transvaginal)
Date Reported: 28/08/2015
Dictating Radiologist / Clinical Specialist [redacted] **BAIN SONG/R HCPC - RA25071**

Verified by: [redacted] **BAIN SONG/R HCPC - RA25071 on 28/08/2015**

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MICROLAB 3500 GR V6.00 FULL REPORT

Patient Name: Georgina Smith 1313[redacted]

ID: Date: 08/09/15 Time: 13:01
Sex: Female Age: 23 Race: CAUCASIAN
Height: 165 cm

All Spirometry Results

	BASE			POST		
TEST	1	2	3	4	5	6
FEV1	2.77	2.78	2.76	2.62	2.91	2.97
FVC	2.77	2.99	2.85	3.28	3.45	3.27
PEF	294	216	267	186	226	276
VAR	-4	0	-3	-7	0	-2

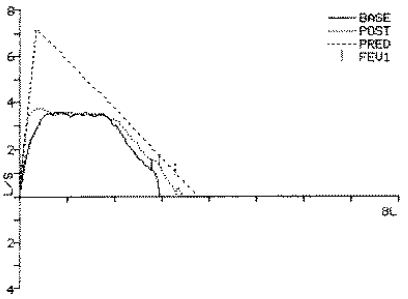
Best Spirometry Result: Base = 2 Post = 5

	Base	%Pred	PostBD	%Pred	%Chg	Normal Min	Normal Pred	Normal Max	
FEV1	2.78	84	2.91	88	+5	2.67	3.29	3.91	L
FVC	2.99	88	3.45	92	+15	3.05	3.76	4.47	L
PEF	216	50	226	52	+5	343	432	521	L/M
FEV1%	93	110	84	100	-10	74	84	95	%
F50	3.32	73	3.31	72	-0	2.76	4.57	6.38	L/S
F25	2.10	95	1.77	80	-16	1.08	2.21	3.34	L/S
MEF	3.09	75	2.91	70	-6	2.73	4.13	5.53	L/S
I50									L/S
R50									%
PIF			0.01						L/S
MVV	104		109		+5				L
FET	2.22		2.71		+22				S

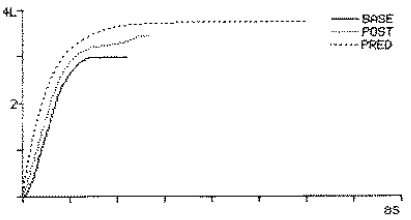
Lung Age = 42 Years.

Interpretation: Mild Restriction.

Flow/Volume



Volume/Time



Normal Values: ECCS (adult):
Zapletal,Solymar,Cogswell [redacted]

Results at BTPS

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MICROLAB 3500 UK V6.00 FULL REPORT

Patient Name: GEORGINA SMITH 1313[redacted]

ID: Date: 08/09/15 Time: 13:01
Sex: Female Age: 23 Race: CAUCASIAN
Height: 165 cm

All Spirometry Results

	BASE			POST		
TEST	1	2	3	4	5	6
FEV1	2.77	2.78	2.76	2.62	2.91	2.97
FVC	2.77	2.99	2.85	3.28	3.45	3.27
PEF	294	216	267	186	226	276
VAR	-4	0	-3	-7	0	-2

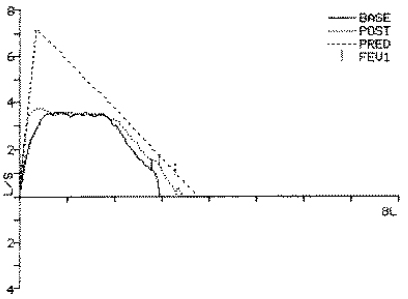
Best Spirometry Result: Base = 2 Post = 5

	Base	%Pred	PostBD	%Pred	%Chg	Normal Min	Normal Pred	Normal Max	
FEV1	2.78	84	2.91	88	+5	2.67	3.29	3.91	L
FVC	2.99	88	3.45	92	+15	3.05	3.76	4.47	L
PEF	216	50	226	52	+5	343	432	521	L/M
FEV1%	93	110	84	100	-10	74	84	95	%
F50	3.32	73	3.31	72	-0	2.76	4.57	6.38	L/S
F25	2.10	95	1.77	80	-16	1.08	2.21	3.34	L/S
MEF	3.09	75	2.91	70	-6	2.73	4.13	5.53	L/S
I50									L/S
R50									%
PIF			0.81						L/S
MVV	104		109		+5				L
FET	2.22		2.71		+22				S

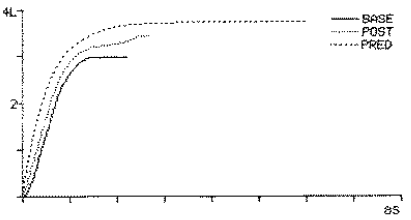
Lung Age = 42 Years.

Interpretation: Mild Restriction.

Flow/Volume



Volume/Time



Normal Values: ECCS (adult):
Zapletal,Solymar,Cogswell [redacted]

Results at BTPS

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- my medical record may be transferred from my doctor (or community healthcare provider) to the prison health centre;
- my information may be shared as detailed in the box below.

Your information

- We need this information to make sure we give you the best level of health care we can.
- We may need to share relevant information with other NHS staff involved in your care. This makes caring for you safer, easier and faster.
- We may need to share information about your health and medication with people outside the NHS, such as other prison staff, community healthcare providers or community health agencies. This will only be done when they need it to be able to give you care and treatment.

I confirm that, as far as I know, the information I have given on this form is correct.

Signed L Smith Date 07/09/15

PRACTICE ACCEPTANCE AGREEMENT (NOMS Practice use only)

PRACTICE CODE

GP NAME

GP REFERENCE NUMBER

OFFICIAL USE ONLY

Input By: Date:

Patient set up on GP IT System as: (please tick **one** box only)

TR ☐ PR ☐

If status has changed from TR to PR please tick ☐

Please store this form in the prison "blue file" health record

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Pages:

- my medical record may be transferred from my doctor (or community healthcare provider) to the prison health centre;
- my information may be shared as detailed in the box below.

Your information
- We need this information to make sure we give you the best level of health care we can.
- We may need to share relevant information with other NHS staff involved in your care. This makes caring for you safer, easier and faster.
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I confirm that, as far as I know, the information I have given on this form is correct.

Signed J Smith Date 07/09/15

PRACTICE ACCEPTANCE AGREEMENT (for GP Practice use only)

PRACTICE CODE

GP NAME

GP REFERENCE NUMBER

OFFICIAL USE ONLY

Input By: Date:

Patient set up on GP IT System as: (please tick **one** box only)

TR ☐ PR ☐

If status has changed from TR to PR please tick ☐

Please store this form in the prison "blue file" health record

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Patient Registration

SCANNED NHS SCOTLAND

While you are in prison your healthcare will be provided by the Health Board for the prison you are in.

Please use **BLOCK CAPITALS** to complete the form and tick all boxes that apply to you.

Please complete this form as best you can. It will help us to get your medical records quickly.

This form will not go into your community health record.

Is this the first time you have registered with a GP (doctor)? yes ☐ no ☑

1. What is your first name? Georgina — middle name(s)

2. What is your surname? Smith — Title (Mr / Mrs / Miss / other) Miss

3. Are you male ☐ female ☑ (please tick)

4. What is your last or other surname? McMillan — What is your date of birth? 04/12/1991

5. Address
WALLACE HOUSE 3-2
HMP CORNTON VALE, CORNTON ROAD
STIRLING
Postcode FK9 5NU

6. What is your town of birth, ARDROSSAN — and country of birth? SCOTLAND

7. What is your [redacted] maiden name? SMITH

8. What was your last address in the United Kingdom?
LIOARDOCK CRESCENT
STEVENSTON
AYRSHIRE
Postcode KA20

9. If you have a doctor, what is their name and address?
STEVENSTON THREE TOWNS
PRACTICE
AYRS [redacted]
Postcode KA20

10. Do you know your:
Community Health Index(CHI) number
NHS number

I understand that:

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Patient Registration

SCANNED NHS SCOTLAND

While you are in prison your healthcare will be provided by the Health Board for the prison you are in.

Please use **BLOCK CAPITALS** to complete the form and tick all boxes that apply to you.

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This form will not go into your community health record.

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1. What is your first name? Georgina — middle name(s)

2. What is your surname? Smith — Title (Mr / Mrs / Miss / other) Miss

3. Are you male ☐ female ☑ (please tick)

4. What is your last or other surname? McMillan — What is your date of birth? 04/12/1991

5. Address
WALLACE HOUSE 3-2
HMP CORNTON VALE, CORNTON ROAD
STIRLING
Postcode FK9 5NU

6. What is your town of birth, ARDROSSAN — and country of birth? SCOTLAND

7. What is your [redacted] maiden name? SMITH

8. What was your last address in the United Kingdom?
LIOARDOCK CRESCENT
STEVENSTON
AYRSHIRE
Postcode KA20

9. If you have a doctor, what is their name and address?
STEVENSTON THREE TOWNS
PRACTICE
AYRS [redacted]
Postcode KA20

10. Do you know your:
Community Health Index(CHI) number
NHS number

I understand that:

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NHS Confidential: Personal data about a patient

NHS Forth Valley
Microbiology

SURNAME	FORENAME	UNIT No.
SMITH P.O Box 21616 Stirling	GEORGINA	0412913127
	DATE OF BIRTH: 04/12/1991	SEX: F

CONSULTANT: Unknown

WARD: Prison Medical Officer CORN
G.P.: HMP & YOI Cornton Vale

CLINICAL DATA: TWINRIX VACCINE COURSE COMPLETE, PLEASE CHECK TITR

Hepatitis B surface antibody 621 IU/L

Interpretation of Antibody titres for Immunocompetent persons

Titre	
<10	Non responder - give 2 additional doses (0 and 1 month) then check titres in a further 2 - 3 months. If still <10 consider to be non-responder.
10-99	Responder - give one additional dose and check titre in 2 - 3 months. If still >10 consider to be a responder. No further booster doses or antibody checks required.
>100	Responder - No further booster doses or antibody checks required.

These comments apply to antibody checks after full course of primary immunisation. N.B. Please ensure full vaccination his is given to allow appropriate testing.

EXAMINATION	LAB No.	AUTHORISED	
Hepatitis B surface antibody	MS024290K		
NATURE OF SPECIMEN	DATE COLLECTED	DATE RECEIVED	DATE REPORTED
Venous blood	08/10/2015	09/10/2015	09/10/2015

13/10/15
JD

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NHS
Forth Valley
Microbiology

SURNAME: SMITH P.O Box 21616 Stirling	FORENAME: GEORGINA	UNIT No.: 0412913127 DATE OF BIRTH: 04/12/1991 SEX: F
CONSULTANT: Unknown	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale	
CLINICAL DATA: TWINRIX VACCINE COURSE COMPLETE, PLEASE CHECK TITR		

Hepatitis B surface antibody 621 IU/L

Interpretation of Antibody titres for Immunocompetent persons

Titre	
<10	Non responder - give 2 additional doses (0 and 1 month) then check titres in a further 2 - 3 months. If still <10 consider to be non-responder.
10-99	Responder - give one additional dose and check titre in 2 - 3 months. If still >10 consider to be a responder. No further booster doses or antibody checks required.
>100	Responder - No further booster doses or antibody checks required.

These comments apply to antibody checks after full course of primary immunisation. N.B. Please ensure full vaccination his is given to allow appropriate testing.

EXAMINATION	LAB No.	AUTHORISED	
Hepatitis B surface antibody	MS024290K		
NATURE OF SPECIMEN: Venous blood	DATE COLLECTED: 08/10/2015	DATE RECEIVED: 09/10/2015	DATE REPORTED: 09/10/2015

13/10/15
CD

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA
UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: P.O Box 21616, Stirling
CONSULTANT: Dr [redacted] Sayers
DOB: 04/12/1991
SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: Prison Medical Officer, HMP & YOI Cornton Vale
SAMPLE TYPE OF LATEST SPECIMEN: Serum
CLINICAL DETAILS REFERRING TO LATEST REQUEST: RIF PAIN
COPY DETAILS:

DATE OF COLLECTION	LABORATORY NUMBER	TIME OF COLLECTION	PLASMA GLUCOSE fasting 3.3-5.5 mmol/l	BLOOD GAS Specimen type	[H+] 36-43 nmol/l	pCO2 4.6-6.0 kPa	CALCULATED BICARBONATE 20-28 mmol/l	pO2 10.5-13.5 kPa	INSPIRED OXYGEN %
24/09/13	825463S	NS	4.5						

DATE OF COLLECTION	LABORATORY NUMBER	Total CO2 23-30 mmol/l	OSMOLALITY 275-295 mosmol/kg H2O	SODIUM 135-145 mmol/l	POTASSIUM 3.5-5.0 mmol/l	CHLORIDE 97-107 mmol/l	UREA 2.5-8.0 mmol/l	CREATININE 60-130 µmol/l	eGFR ml/min/1.73m2 <60 = CKD stage 3,4 or 5
24/09/13	825464G			139	4.7	103	3.4	69	>59
26/11/13	195651C			140	4.6	103	2.1	68	>59
18/11/15	183986G			138	4.2	103	2.9	75	>59

DATE OF COLLECTION	LABORATORY NUMBER	AMYLASE up to 90 iu/l 37°C	AST 12-31 iu/l 37°C	ALT 11-37 iu/l 37°C	BILIRUBIN up to 17 µmol/l	TOTAL PROTEIN 62-80 g/l	ALBUMIN 36-52 g/l	ALKALINE PHOSPHATASE 0 - 130 iu/l 37°C	γGT 7-22 (female) iu/l 37°C
24/09/13	825464G		17	19	11	69	44	86	
26/11/13	195651C		12	14	6	65	41	77	
18/11/15	183986G		18	17	8	70	43	98	

DATE OF COLLECTION	LABORATORY NUMBER	IRON 11-29 µmol/l	TIBC 45-72 µmol/l	[redacted] mmol/l	CORRECTED CALCIUM [redacted]	PHOSPHATE 0.87-1.45 [redacted]	MAGNESIUM 0.7-1.0 mmol/l	URATE 0.12-0.42 mmol/l	CK(Total) 23-142 (female) iu/l 37°C

DATE OF COLLECTION	LABORATORY NUMBER	T.S.H 0.35-5.5 mu/l from 20.1.07	FREE T4 9-24 pmol/l	TOTAL T3 0.9-2.8 nmol/l from 20.1.07	PSA <4.0 µg/L	TRIGLYCERIDE fasting <2.0 mmol/l	CHOLESTEROL mmol/l target levels are risk dependant	H.D.L. >0.9 mmol/l	L.D.L. mmol/l target levels are risk dependant
24/09/13	825464G	0.83	14.9						

18/11/15	183986G	C-Reactive Prot. **<5** mg/l
18/11/15	183986G	Alk. Phosphatase Note method change from 09.00 on 27.02.2012. Values 42% on average of those from previous method. ALP Ref. Limit for patients <30 days old is 0-380 iu/L. ALP Ref. Limit for patients <17 years old is 0-425 iu/L. ALP Ref. Limit for adults (>17 years) is 0-130 iu/L.

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Date of Report 18/11/2015 17:18

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NHS Forth Valley Haematology

NHS Forth Valley

Patient	SMITH, GEORGINA	Patient Ref. Number	0412913127
		Date Of Birth	04/12/1991
		Sex	F
Doctor/Location	HMP & YOI Cornton Vale Prison Medical Officer	Consultant/GP	Dr Craig Sayers
		Date/Time Specimen Received	18/11/2015 16:30
Clinical Data	RIF PAIN	Sample Type	Blood

DIFFERENTIAL W.B.C. COUNT ALL x 10^9/L

Neutrophils	Lymphocytes	Monocytes	Eosinophils	Basophils	Meta.	Myelocytes	*	Blasts	N.R.B.C.
6.10	2.40	0.70	0.50	0.00					

R.B.C. x10^{12}/L	P.C.V.	M.C.V.fl	M.C.H. pg	M.C.H.C. g/L	E.S.R. mm/1hr	Retics. x10^9/L	Report Date/Time
4.77	0.406	85.1	29.6	347			18/11/2015 17:02

Hb g/L	W.B.C. x10^9/L	Plt. x10^9/L	Investigation	Lab. Number	Collection Date/Time
141	9.7	248	Full Blood Count	377130	18/11/2015 13:50

Full Blood Count Reference Ranges:

ADULTS	MALE	FEMALE
White Cell Count (x10^9/L)	3.9 - 10.6	3.5 - 11.3
Red Cell Count (x10^9/L)	4.4 - 5.9	3.8 - 5.2
Haemoglobin (g/L)	133 - 177	117 - 153
Packed Cell Volume	[redacted]	0.35 - 0.47
Mean Cell Volume (fl)	81 - 100	81 - 100
Mean Cell Haemoglobin (pg)	26.6 - 33.8	26.4 - 34.0
MCH Concentration (g/L)	314 - 363	314 - 356
Platelet Count (x10^9/L)	150 - 440	150 - 440

CHILDREN	BIRTH	1 YEAR	6	10
WBC (x10^9/L)	9.0 - 30.0	6.0 - 17.5	5.0 - 14.5	4.3 - 13.5
Hb (g/L)	146 - 234	90 - 146	106 - 155	107 - 155

Differential White Cell Count: (as absolute counts, x 10^9/L)

	1 YEAR	6	10	ADULT
Neutrophils	1.5 - 8.5	1.5 - 8.0	1.5 - 8.0	1.8 - 7.7
Lymphocytes	4.0 - 10.5	1.5 - 7.0	1.5 - 6.5	1.0 - 4.8
Monocytes	0.05 - 1.1	0 - 0.65	0 - 0.8	0 - 0.8
Eosinophils	0 - 0.65	0 - 0.65	0 - 0.60	0 - 0.45
Basophils	0 - 0.20	0 - 0.20	0 - 0.20	0 - 0.20

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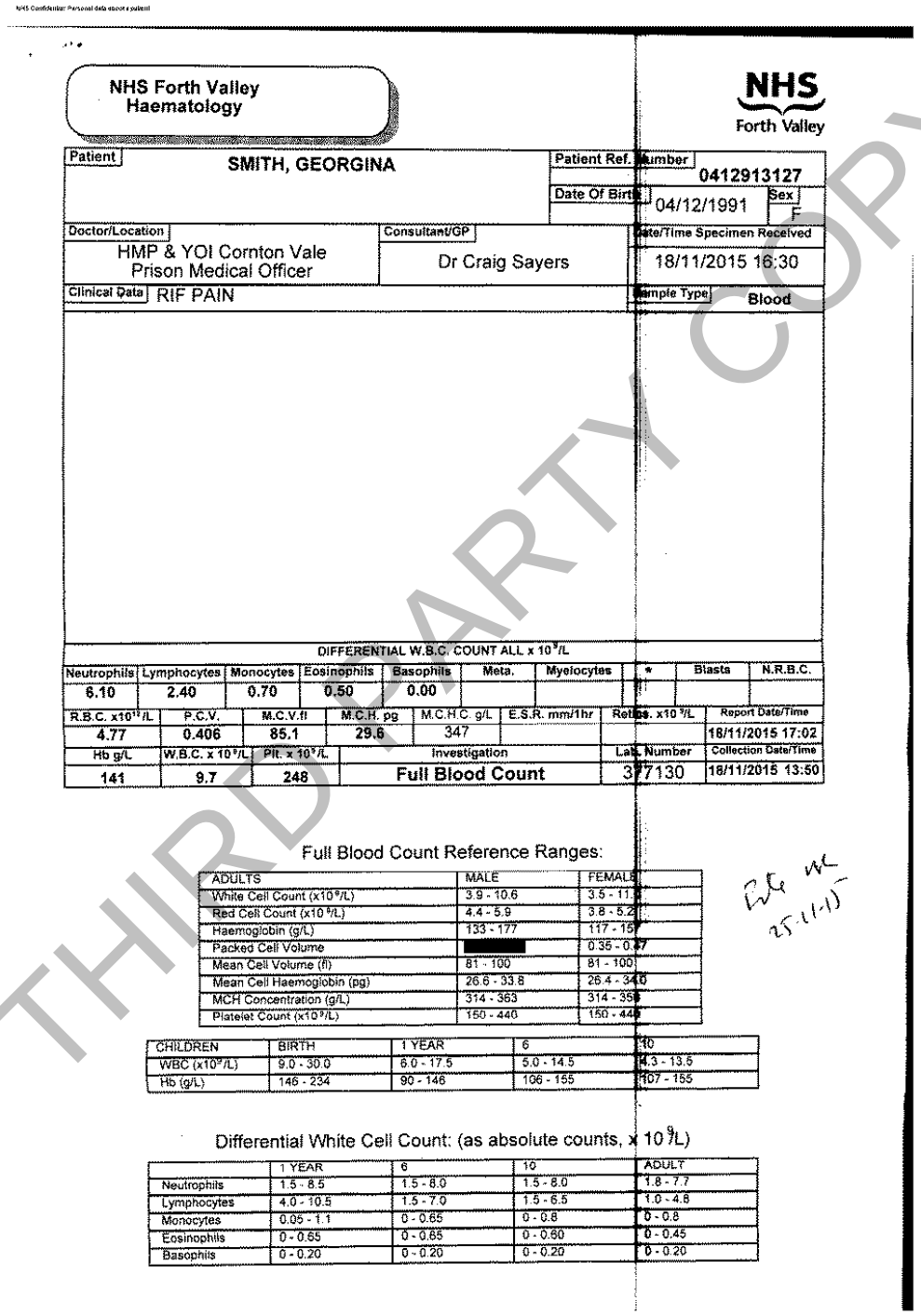

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NHS Forth Valley Haematology

NHS Forth Valley

Patient	SMITH, GEORGINA	Patient Ref. Number	0412913127
		Date Of Birth	04/12/1991
		Sex	F
Doctor/Location	HMP & YOI Cornton Vale Prison Medical Officer	Consultant/GP	Dr Craig Sayers
		Date/Time Specimen Received	18/11/2015 16:30
Clinical Data	RIF PAIN	Sample Type	Blood

DIFFERENTIAL W.B.C. COUNT ALL x 10^9/L

Neutrophils	Lymphocytes	Monocytes	Eosinophils	Basophils	Meta.	Myelocytes	*	Blasts	N.R.B.C.
6.10	2.40	0.70	0.50	0.00					

R.B.C. x10^{12}/L	P.C.V.	M.C.V.fl	M.C.H. pg	M.C.H.C. g/L	E.S.R. mm/1hr	Retics. x10^9/L	Report Date/Time
4.77	0.406	85.1	29.6	347			18/11/2015 17:02

Hb g/L	W.B.C. x10^9/L	Plt. x10^9/L	Investigation	Lab. Number	Collection Date/Time
141	9.7	248	Full Blood Count	377130	18/11/2015 13:50

Full Blood Count Reference Ranges:

ADULTS	MALE	FEMALE
White Cell Count (x10^9/L)	3.9 - 10.6	3.5 - 11.3
Red Cell Count (x10^9/L)	4.4 - 5.9	3.8 - 5.2
Haemoglobin (g/L)	133 - 177	117 - 153
Packed Cell Volume	[redacted]	0.35 - 0.47
Mean Cell Volume (fl)	81 - 100	81 - 100
Mean Cell Haemoglobin (pg)	26.6 - 33.8	26.4 - 34.0
MCH Concentration (g/L)	314 - 363	314 - 356
Platelet Count (x10^9/L)	150 - 440	150 - 440

CHILDREN	BIRTH	1 YEAR	6	10
WBC (x10^9/L)	9.0 - 30.0	6.0 - 17.5	5.0 - 14.5	4.3 - 13.5
Hb (g/L)	146 - 234	90 - 146	106 - 155	107 - 155

Differential White Cell Count: (as absolute counts, x 10^9/L)

	1 YEAR	6	10	ADULT
Neutrophils	1.5 - 8.5	1.5 - 8.0	1.5 - 8.0	1.8 - 7.7
Lymphocytes	4.0 - 10.5	1.5 - 7.0	1.5 - 6.5	1.0 - 4.8
Monocytes	0.05 - 1.1	0 - 0.65	0 - 0.8	0 - 0.8
Eosinophils	0 - 0.65	0 - 0.65	0 - 0.60	0 - 0.45
Basophils	0 - 0.20	0 - 0.20	0 - 0.20	0 - 0.20

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Please can you ask the patient named below to sign for receipt of her glasses?

DATE	NAME	SPIN NUMBER	LOCATION	PLEASE SIGN TO ACKNOWLEDGE RECEIPT OF GLASSES
2.2.16	[redacted] Smith	13134[redacted]	[redacted]ance	G. Smith

Once signed, please leave this form on the Health Centre Administrator's desk.

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA
UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: P.O Box 21616, Stirling
CONSULTANT: Dr [redacted] Sayers
DOB: 04/12/1991
SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: Prison Medical Officer, HMP & YOI Cornton Vale
SAMPLE TYPE OF LATEST SPECIMEN: Serum
CLINICAL DETAILS REFERRING TO LATEST REQUEST: RIF PAIN
COPY DETAILS:

DATE OF COLLECTION	LABORATORY NUMBER	TIME OF COLLECTION	PLASMA GLUCOSE fasting 3.3-5.5 mmol/l	BLOOD GAS Specimen type	[H+] 36-43 nmol/l	pCO2 4.6-6.0 kPa	CALCULATED BICARBONATE 20-29 mmol/l	pO2 10.5-13.5 kPa	INSPIRED OXYGEN %
24/09/13	825463S	NS	4.5						

DATE OF COLLECTION	LABORATORY NUMBER	Total CO2 23-30 mmol/l	OSMOLALITY 275-295 mosmol/kg H2O	SODIUM 135-145 mmol/l	POTASSIUM 3.5-5.0 mmol/l	CHLORIDE 97-107 mmol/l	UREA 2.5-8.0 mmol/l	CREATININE 60-130 µmol/l	eGFR ml/min/1.73m2 >60 = GKD stage 3,4 or 5
24/09/13	825464G			139	4.7	[redacted]	3.4	69	>59
26/11/13	195651C			140	4.6	[redacted]	2.1	68	>59
18/11/15	183986G			138	4.2	[redacted]	2.9	75	>59

DATE OF COLLECTION	LABORATORY NUMBER	AMYLASE up to 90 iu/l 37°C	AST 12-31 iu/l 37°C	ALT 11-37 iu/l 37°C	BILIRUBIN up to 17 µmol/l	TOTAL PROTEIN 62-80 g/l	ALBUMIN 36-52 g/l	ALKALINE PHOSPHATASE 0 - 130 iu/l 37°C	γGT 7-22 (female) iu/l 37°C
24/09/13	825464G		17	19	11	[redacted]	44	86	
26/11/13	195651C		12	14	6	[redacted]	41	77	
18/11/15	183986G		18	17	8	[redacted]	43	98	

DATE OF COLLECTION	LABORATORY NUMBER	IRON 11-29 µmol/l	TIBC 45-72 µmol/l	[redacted] mmol/l	CORRECTED CALCIUM [redacted]	PHOSPHATE 0.87-1.45 [redacted]	MAGNESIUM 0.7-1.0 mmol/l	URATE 0.12-0.42 mmol/l	CK(Total) 23-142 (female) iu/l 37°C

DATE OF COLLECTION	LABORATORY NUMBER	T.S.H 0.35-5.5 mu/l from 20.1.07	FREE T4 9-24 pmol/l	TOTAL T3 0.9-2.8 nmol/l from 20.1.07	PSA <4.0 µg/L	TRIGLYCERIDE fasting <2.0 mmol/l	CHOLESTEROL mmol/l target levels are risk dependant	H.D.L. >0.9 mmol/l	L.D.L. mmol/l target levels are risk dependant
24/09/13	825464G	0.83	14.9						

18/11/15	183986G	C-Reactive Prot. **<5** mg/l
18/11/15	**183986G**	Alk. Phosphatase Note method change from 09.00 on 27.02.2012. Values 42% on average of those from previous method. ALP Ref. Limit for patients <30 days old is 0-380 iu/L ALP Ref. Limit for patients <17 years old is 0-425 iu/L ALP Ref. Limit for adults (>17 years) is 0-130 iu/L

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Date of Report 18/11/2015 17:18

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NHS
Forth Valley
Microbiology

SURNAME: SMITH H M Prison Cornton Vale	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr. D. Roxburgh	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: recurrent vaginal discharge / thrush			

Pyogenic Culture
Microscopy.
White Blood Cells present in small numbers.
Yeasts nil
Trichomonas vaginalis nil
Culture.
Heavy growth of Candida species
.
High vaginal swabs are no longer being examined for Neisseria gonorrhoeae.
If this infection is suspected, please send a cervical swab.
Culture of HVS for GC is only recommended in post hysterectomy patients

EXAMINATION: Pyogenic Culture	LAB No.: MG067910R	AUTHORISED	
NATURE OF SPECIMEN: High Vaginal swab	DATE: 14/01/2016	DATE RECEIVED: 14/01/2016	REPORTED: 18/01/2016

19 JAN 2016

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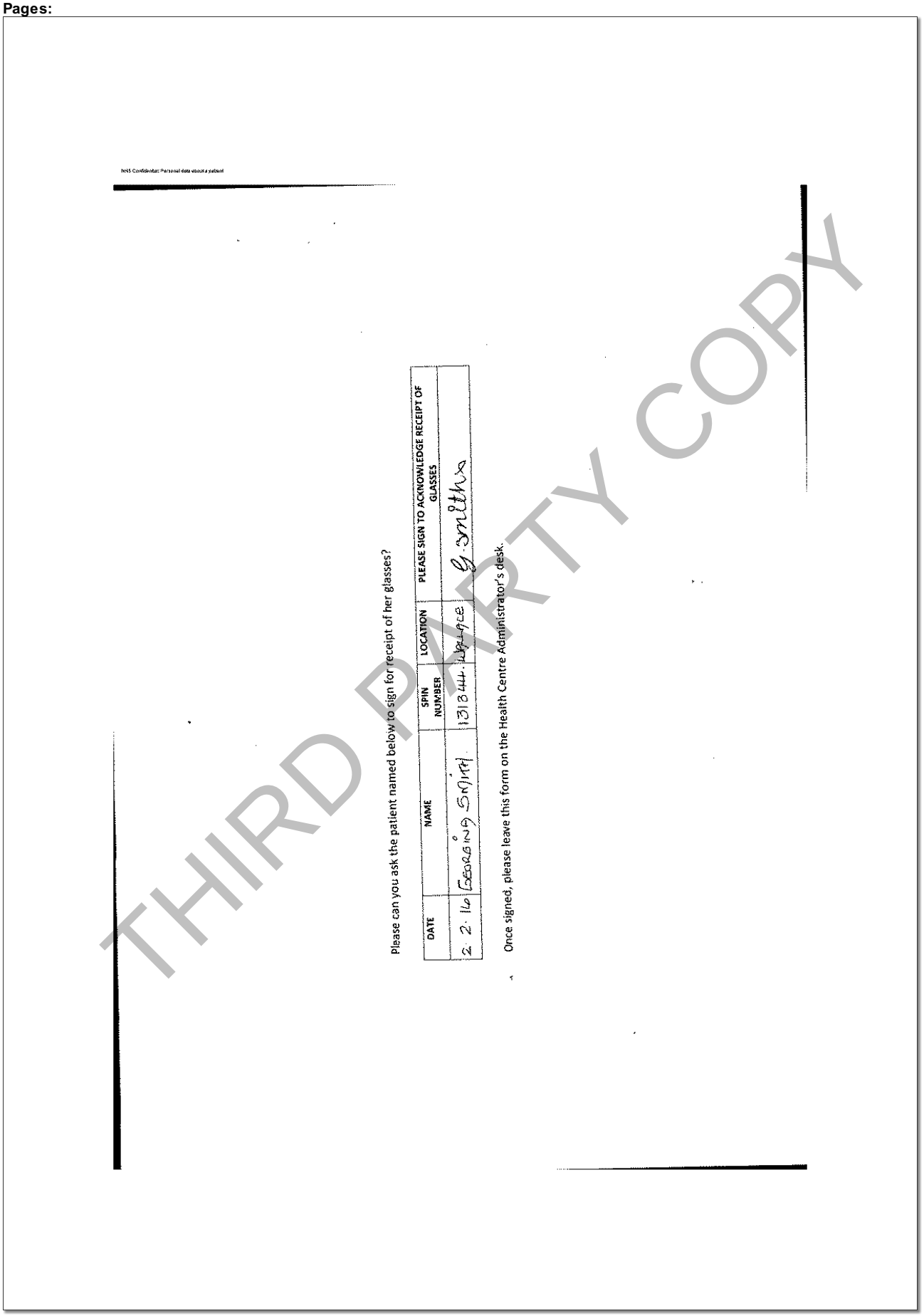

NHS Confidential: Personal data about a patient

Please can you ask the patient named below to sign for receipt of her glasses?

DATE	NAME	SPIN NUMBER	LOCATION	PLEASE SIGN TO ACKNOWLEDGE RECEIPT OF GLASSES
2.2.16	Georgina Smith	1318444	Harrogate	G. Smith

Once signed, please leave this form on the Health Centre Administrator's desk.

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NHS
Forth Valley
Microbiology

SURNAME: SMITH H M Prison Cornton Vale	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr. D. Roxburgh	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: recurrent vaginal discharge / thrush			

Pyogenic Culture
Microscopy.
White Blood Cells present in small numbers.
Yeasts nil
Trichomonas vaginalis nil
Culture.
Heavy growth of Candida species
.
High vaginal swabs are no longer being examined for Neisseria gonorrhoeae.
If this infection is suspected, please send a cervical swab.
Culture of HVS for GC is only recommended in post hysterectomy patients

EXAMINATION: Pyogenic Culture	LAB No.: MG067910R	AUTHORISED	
NATURE OF SPECIMEN: High Vaginal swab	DATE: 14/01/2016	DATE RECEIVED: 14/01/2016	REPORTED: 18/01/2016

19 JAN 2016

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NHS
Forth Valley
Microbiology

SURNAME: SMITH H M Prison Cornton Vale	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr. D. Roxburgh	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: thrush ?			

Pyogenic Culture

Microscopy.
White Blood Cells nil
Yeasts nil
Trichomonas vaginalis nil

Culture.
No pathogens isolated

.
High vaginal swabs are no longer being examined for Neisseria gonorrhoeae.
If this infection is suspected, please send a cervical swab.
Culture of HVS for GC is only recommended in post hysterectomy patients

EXAMINATION: Pyogenic Culture	LAB No.: MG068997D	AUTHORISED	
NATURE OF SPECIMEN: High Vaginal swab	DATE COLLECTED: 31/03/2016	[redacted] RECEIVED: 31/03/2016	DATE REPORTED: 04/04/2016

6/4/16

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NHS
Forth Valley
Microbiology

SURNAME: SMITH H M Prison Cornton Vale	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr. D. Roxburgh	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: thrush ?			

Pyogenic Culture
Microscopy.
White Blood Cells nil
Yeasts nil
Trichomonas vaginalis nil
Culture.
No pathogens isolated

High vaginal swabs are no longer being examined for Neisseria gonorrhoeae.
If this infection is suspected, please send a cervical swab.
Culture of HVS for GC is only recommended in post hysterectomy patients

EXAMINATION	LAB No.	AUTHORISED	
Pyogenic Culture	MG068997D		
NATURE OF SPECIMEN	DATE COLLECTED	RECEIVED	DATE REPORTED
High Vaginal swab	31/03/2016	31/03/2016	04/04/2016

6/4/16

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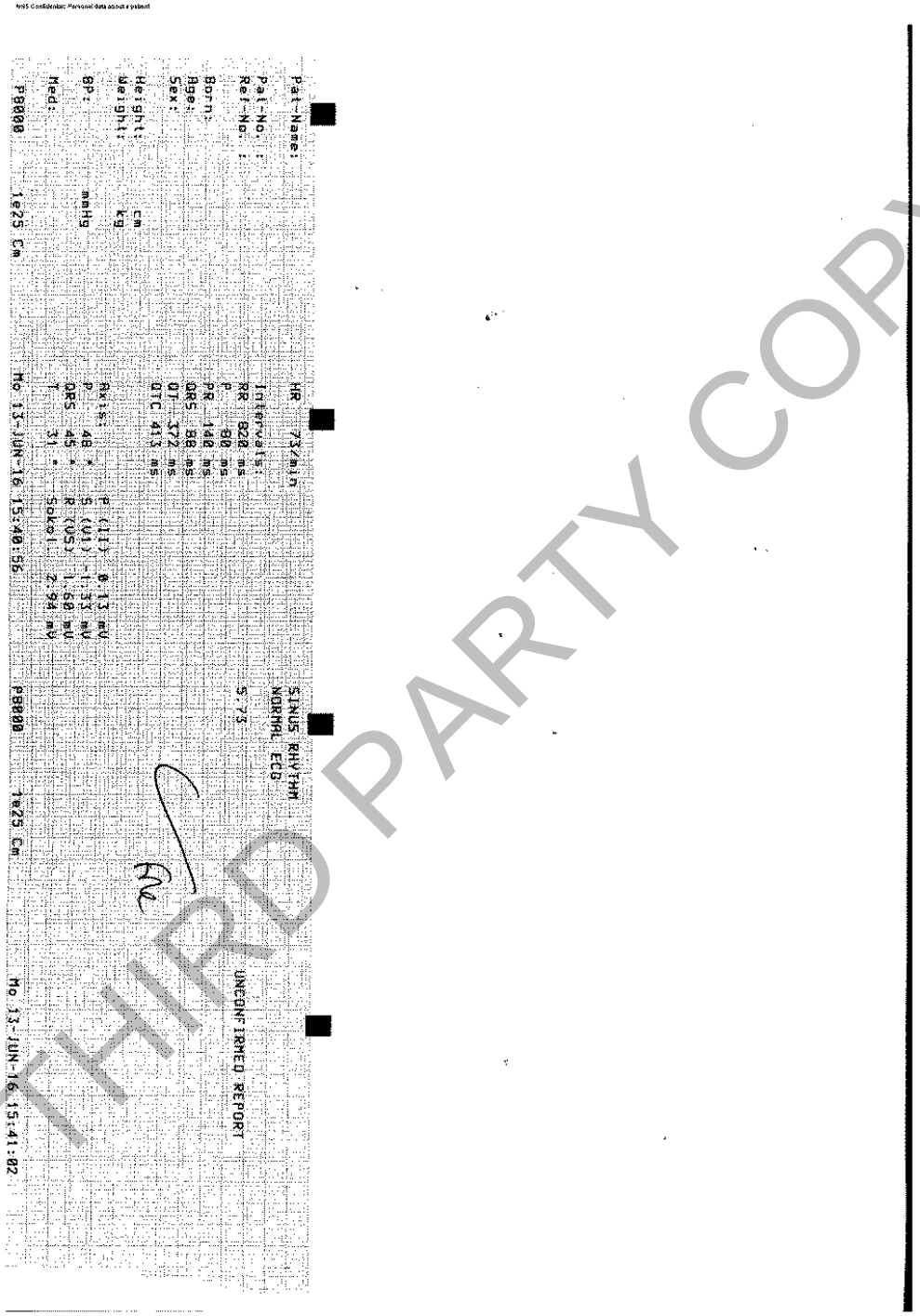

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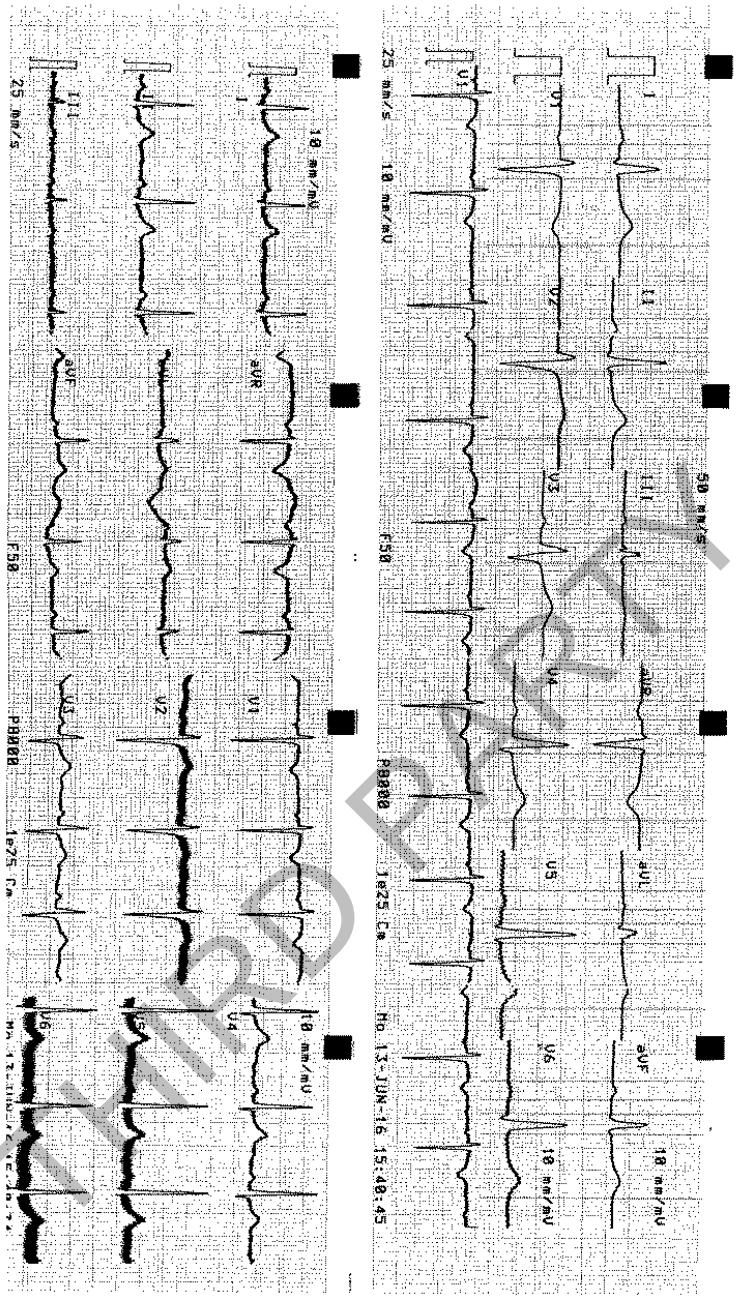

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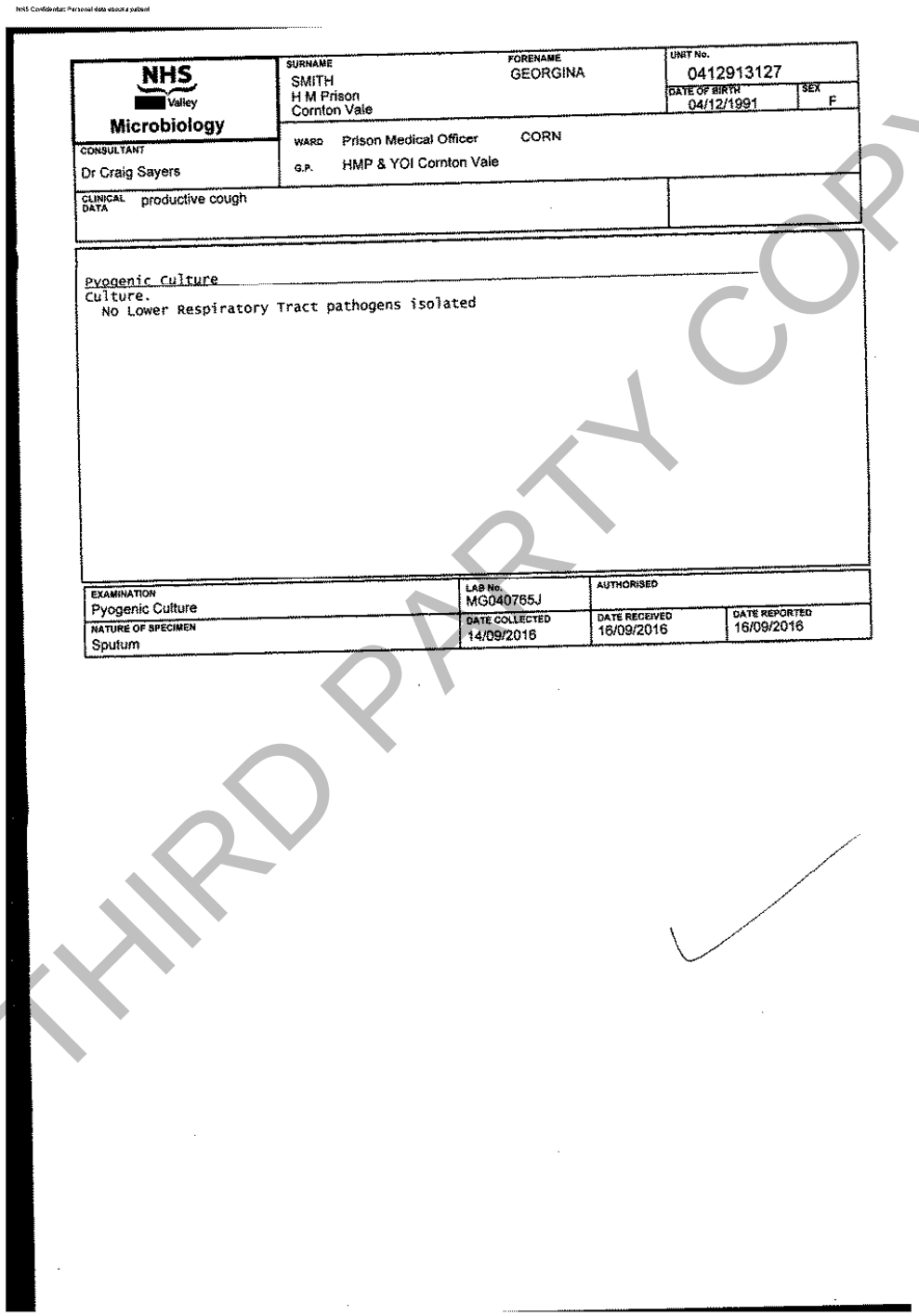

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NHS Valley
Microbiology

SURNAME: SMITH H M Prison Cornton Vale	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr Craig Sayers	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: productive cough			

Pyogenic Culture
Culture.
No Lower Respiratory Tract pathogens isolated

EXAMINATION: Pyogenic Culture	LAB No.: MG040765J	AUTHORISED	
NATURE OF SPECIMEN: Sputum	DATE COLLECTED: 14/09/2016	DATE RECEIVED: 16/09/2016	DATE REPORTED: 16/09/2016

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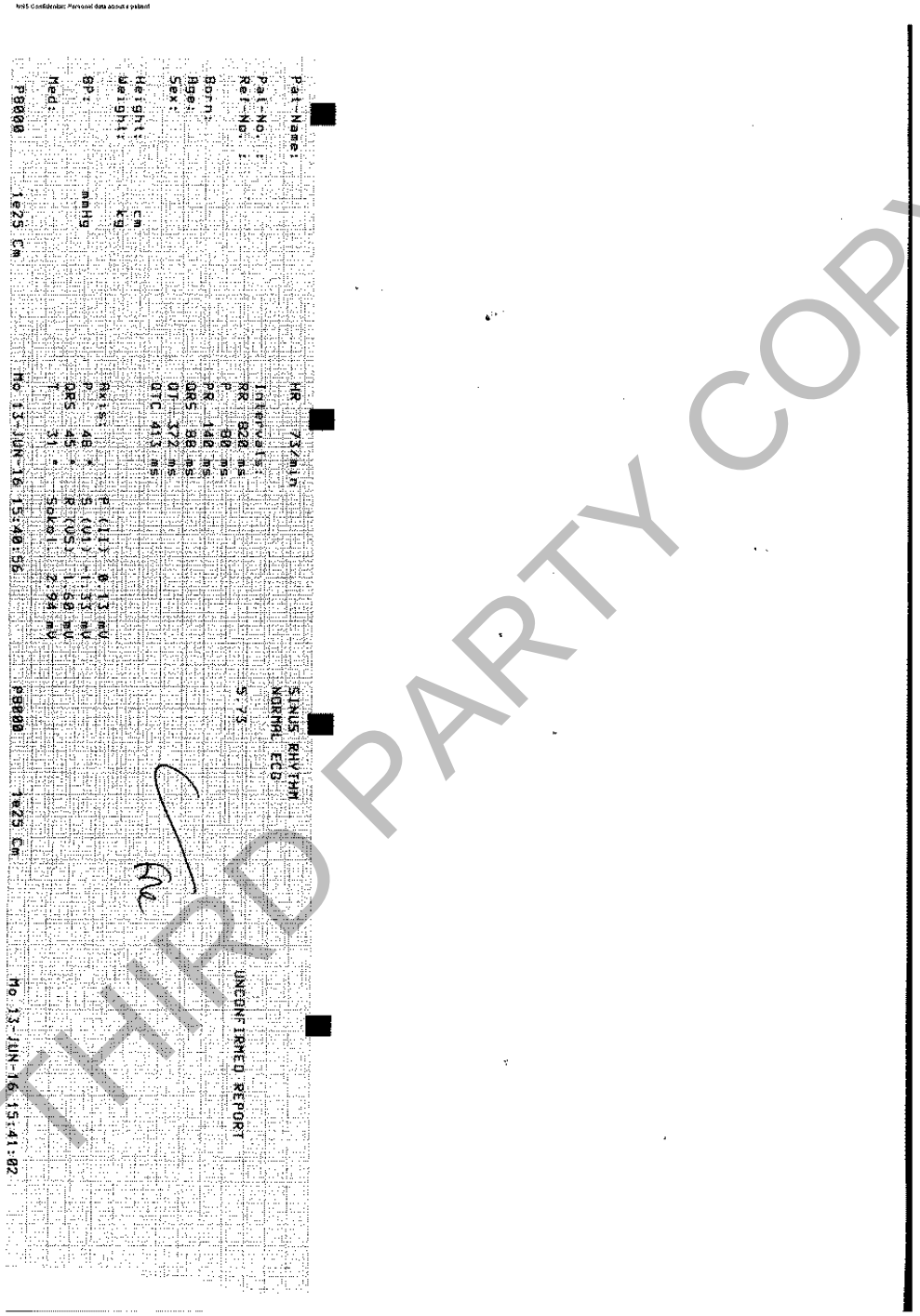

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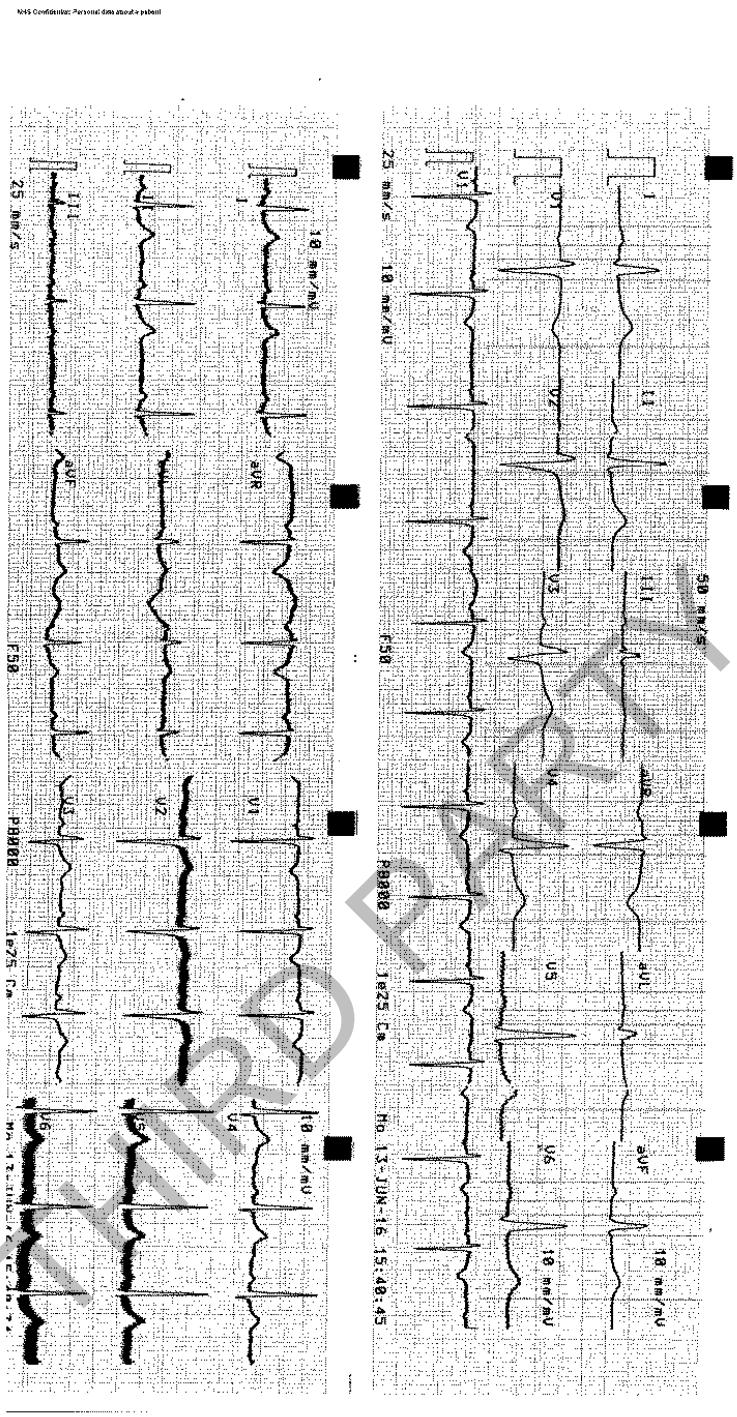

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NHS Valley
Microbiology

SURNAME: SMITH H M Prison Cornton Vale	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr Craig Sayers	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: productive cough			

Pyogenic Culture
Culture.
No Lower Respiratory Tract pathogens isolated

EXAMINATION: Pyogenic Culture	LAB No.: MG040765J	AUTHORISED	
NATURE OF SPECIMEN: Sputum	DATE COLLECTED: 14/09/2016	DATE RECEIVED: 16/09/2016	DATE REPORTED: 16/09/2016

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Mental Health Services
Forensic Directorate

Leverndale Hospital
510 Crookston Road
Glasgow G53 7TU
Tel: 0141 211 6400

Mental Health Team
HMP Cornton Vale
Cornton Road
STIRLING
FK9 5NU

Date 16 September 2016
Your Ref
Our Ref CM/FMcG
Direct Line 0141 211 1375
Mobile
Fax
E-mail

Dear Colleague

GEORGINA SMITH – SPIN 131344 – DOB 4/12/91 – CHI 041 291 3127
Date of Review : 13 September 2016

Diagnosis

Generalised anxiety with associated panic; some post traumatic stress disorder (PTSD) aspects

Current Psychotropic Medication

Pregabalin 25-mgs bd

Changes from this Review

I have agreed to reinstate the dose of her pregabalin at 50-mgs bd. I think this is reasonable over what is going to be a fairly difficult for period for Ms Smith. I have made no other changes and will review her in two months' time to see how she is progressing. She understands that the medication is not going to be instigated on a long-term basis and that there will be an expectation in the new year that she continues to work on her coping skills and anxiety with the aim of being titrated off this.

Details of Contact

I met with Ms Smith at the psychiatric clinic in HMP Cornton Vale on the above date. She is a woman who is previously known to the clinic of Dr Swinson and was initiated on Pregabalin for what is described as generalised anxiety. The prescription was on a short-term basis and it has been gradually tapered down. She has now reported at repeated mental health reviews that she has been struggling. I understand some concern has come from staff in her Wing about her presentation. In interview on 13/9/16 she was somewhat quiet but cooperative. She has a clear history of traumatic upbringing and difficulties with self-harming associated with a restrictive-type pattern of eating disorder from a [redacted] age. She recently had to go through a [redacted] case [redacted] to an incident in which she was sexually assaulted. She is currently engaging in [redacted] work and to some extent this requires a re-living of previous traumas. She is engaged with this work and continues to do it well. In general, the theme from her notes is that she engages with the prison staff despite her understandable anxieties about some of the tasks required of her.

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In terms of her anxiety generally, she gave a fairly classical description of anxiety symptoms with occasional associated panic episodes. It was a generalised picture with a sense of being "on edge" and not coping particularly within new situations. She has some associated additional stressors in terms of a new cell mate who she feels bullies her. There was some described associated low mood but nothing that was pervasive or would indicate a specific affective disorder. She does occasionally have thoughts of cutting herself as a coping mechanism but is not acting out on these at present and has no current intent. She denied any thoughts of suicide.

Objectively I found her to be quiet with good eye contact and reasonable rapport. She was slightly anxious during the review. There was no indication of the presence of any psychotic symptoms or abnormal thought content. Her speech was normal in rate and volume. The content was appropriate to her conversation. Her mood appeared slightly low but was normally reactive. The overall impression was of a girl with a generalised form of anxiety and occasional panic. There are possibly some underlying personality issues [redacted] to her upbringing. There would appear to be additional PTSD aspects in relation to prior traumatic experiences; particularly of being sexually assaulted.

I noted from the system it is clear that while being in possession, there are no particular [redacted] in any way that she has been misusing the medication prescribed and she has never been short. In the circumstances, given that she has engaged well with prison staff and has done remarkably well in attempting to engage with the work that is required of her, I think it reasonable that she continues on Pregabalin until her situation settles. I have been clear that it will be discontinued before she leaves the prison next year but that to assist her in engaging with the work that is going to be required of her I think it continues to be of benefit. I have therefore returned the dose to 50-mgs bd of Pregabalin. I will review her again in two months' time to see how she is progressing.

Yours sincerely

DR [redacted] MORROW
Consultant Forensic [redacted]

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Consent Form for Influenza vaccine immunisation

NAME: GEORGINA SMITH

SPIN: 131344

DATE OF BIRTH: 04/2/91

Checklist of Health Assessment

Are you well today	(Yes)/No
Have you had this vaccine recently (if yes, do not Re-vaccinate)	Yes/(No)
Do you have any allergies? (see exclusion criteria on protocol)	Yes/(No) If yes, what?.....
Have you had previous reactions to Vaccines?	Yes/(No)
Has information about risks of disease, benefits of vaccine, possible side effects and health advice been given	(Yes)/No
Has the patient given consent	(Yes)/No

Signature of patient: G Smith Date: 6/12/16

Details of Vaccine Given

Name:.....

Batch Number:..... Batch: 164001A EXP: 04/2017

Dose: 0.5ml

Expiry Date: 4/17

Site of administration: (L) arm

Signature Nurse/Doctor: [signature] Date: 6/12/16

PRESCRIPTION SHEET – INFLUENZA VACCINE

DRUG	DATE	GP SIGNATURE	BATCH NO EXPIRY DATE	SITE/ LOCATION	ADMINISTERED BY
Agrippal influenza vaccine 0.5ML.S to be given IM.	6/12/16	[redacted]	164001A 4/17	L arm	CY

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Consent Form for Influenza vaccine immunisation

NAME: GEORGINA SMITH

SPIN: 131344

DATE OF BIRTH: 04/12/91

Checklist of Health Assessment

Are you well today	(Yes)/No
Have you had this vaccine recently (if yes, do not Re-vaccinate)	Yes/(No)
Do you have any allergies? (see exclusion criteria on protocol)	Yes/(No) If yes, what?.....
Have you had previous reactions to Vaccines?	Yes/(No)
Has information about risks of disease, benefits of vaccine, possible side effects and health advice been given	(Yes)/No
Has the patient given consent	(Yes)/No

Signature of patient: G Smith Date: 6/12/16

Details of Vaccine Given

Name:.....

Batch Number:..... Batch: 164001A EXP: 04/2017

Dose:..... 0.5ml

Expiry Date:..... 4/17

Site of administration:..... (L) arm

Signature Nurse/Doctor:..... Date:..... 6/12/16

PRESCRIPTION SHEET – INFLUENZA VACCINE

DRUG	DATE	GP SIGNATURE	BATCH NO EXPIRY DATE	SITE/ LOCATION	ADMINISTERED BY
Agrippal influenza vaccine 0.5ML.S to be given IM.	6/12/16	[redacted]	164001A 4/17	L arm	CY

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Mental Health Services
Forensic Directorate

Leverndale Hospital
510 Crookston Road
Glasgow G53 7TU
Tel: 0141 211 6400

Mental Health Team
HMP Cornton Vale
Cornton Road
STIRLING
FK9 5NU

Date 16 September 2016
Your Ref
Our Ref CM/FMcG
Direct Line 0141 211 1375
Mobile
Fax
E-mail

Dear Colleague

GEORGINA SMITH – SPIN 131344 – DOB 4/12/91 – CHI 041 291 3127
Date of Review : 13 September 2016

Diagnosis

Generalised anxiety with associated panic; some post traumatic stress disorder (PTSD) aspects

Current Psychotropic Medication

Pregabalin 25-mgs bd

Changes from this Review

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Details of Contact

I met with Ms Smith at the psychiatric clinic in HMP Cornton Vale on the above date. She is a woman who is previously known to the clinic of Dr Swinson and was initiated on Pregabalin for what is described as generalised anxiety. The prescription was on a short-term basis and it has been gradually tapered down. She has now reported at repeated mental health reviews that she has been struggling. I understand some concern has come from staff in her Wing about her presentation. In interview on 13/9/16 she was somewhat quiet but cooperative. She has a clear history of traumatic upbringing and difficulties with self-harming associated with a restrictive-type pattern of eating disorder from a [redacted] age. She recently had to go through a [redacted] case [redacted] to an incident in which she was sexually assaulted. She is currently engaging in [redacted] work and to some extent this requires a re-living of previous traumas. She is engaged with this work and continues to do it well. In general, the theme from her notes is that she engages with the prison staff despite her understandable anxieties about some of the tasks required of her.

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In terms of her anxiety generally, she gave a fairly classical description of anxiety symptoms with occasional associated panic episodes. It was a generalised picture with a sense of being "on edge" and not coping particularly within new situations. She has some associated additional stressors in terms of a new cell mate who she feels bullies her. There was some described associated low mood but nothing that was pervasive or would indicate a specific affective disorder. She does occasionally have thoughts of cutting herself as a coping mechanism but is not acting out on these at present and has no current intent. She denied any thoughts of suicide.

Objectively I found her to be quiet with good eye contact and reasonable rapport. She was slightly anxious during the review. There was no indication of the presence of any psychotic symptoms or abnormal thought content. Her speech was normal in rate and volume. The content was appropriate to her conversation. Her mood appeared slightly low but was normally reactive. The overall impression was of a girl with a generalised form of anxiety and occasional panic. There are possibly some underlying personality issues [redacted] to her upbringing. There would appear to be additional PTSD aspects in relation to prior traumatic experiences; particularly of being sexually assaulted.

I noted from the system it is clear that while being in possession, there are no particular [redacted] in any way that she has been misusing the medication prescribed and she has never been short. In the circumstances, given that she has engaged well with prison staff and has done remarkably well in attempting to engage with the work that is required of her, I think it reasonable that she continues on Pregabalin until her situation settles. I have been clear that it will be discontinued before she leaves the prison next year but that to assist her in engaging with the work that is going to be required of her I think it continues to be of benefit. I have therefore returned the dose to 50-mgs bd of Pregabalin. I will review her again in two months' time to see how she is progressing.

Yours sincerely

DR [redacted] MORROW
Consultant Forensic [redacted]

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Health Centre
HMP & YOI Cornton Vale
Cornton Road
Stirling FK9 5NU

Tel: 01786 835335
Fax: 01786 835337

NHS
Forth Valley

Original Appointment made by Email/Telephone

Name	Geirgina Smith
Spin	131344
Block	Peebles
D.O.B. or CHI	04/12/1991
Appointment Date & Time	Thursday 02 February 2017 @ 10:30am
Venue	Stirling Community Hospital - Physiotherapy
Phone or Email Contact	Bob – Tel Call – 12/01/2017
Comments	

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Health Centre
HMP & YOI Cornton Vale
Cornton Road
Stirling FK9 5NU

Tel: 01786 835335
Fax: 01786 835337

NHS
Forth Valley

Original Appointment made by Email/Telephone

Name	Geirgina Smith
Spin	131344
Block	Peebles
D.O.B. or CHI	04/12/1991
Appointment Date & Time	Thursday 02 February 2017 @ 10:30am
Venue	Stirling Community Hospital - Physiotherapy
Phone or Email Contact	Bob – Tel Call – 12/01/2017
Comments	

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Immediate Discharge Letter

NHS Forth Valley

Hospital: Forth Valley Royal Hospital, Larbert
Consultant: [redacted] Mr [redacted]
Specialty: General Surgery
Tel: 01324 566000
Discharging Ward: FVRH - Capacity Area 3

GP Details		Patient Details		Admission Details	
Practice Code:	31391	Patient CHI No:	0412913127	Admission Date:	03/05/2017
		Patient Hospital No:	S681824		
GP Name:	4043816	Surname:	Smith	Admission Type:	Emergency - Non-Injury (e.g. Stroke, MI, Ruptured Appendix)
Address: 1		Forename:	Georgina	Presenting Complaint:	Abdominal Pain
		Date of Birth:	04/12/1991		
		Address:	H M Prison,, Cornton Vale,, Stirling, FK9 5NU	Discharge Date:	03/05/2017
				Discharge To:	Other - Other

Diagnosis/Problem List

X3062 - Chronic nonspecific abdominal pain

Additional comment (Progress, Investigations, Procedures, Complications etc)

Dear Dr,

Ms Georgina Smith was seen in FVRH on 2/5/17 with a 5 day history of RUQ pain. She was woken from sleep with this pain. Associated with vomiting. There was also some suprapubic pain.

Background
Cholecystectomy

RECEIVED
05 MAY 2017

Investigations
CRP <5

USS - There is no evidence of uterine, endometrial or ovarian pathology. The urinary bladder was unremarkable. Appendicitis is not excluded by this method but no free fluid or adnexal mass seen.

Management
Ms Smith has been discharged, she was feeling well. She was reassured with with the results.
No further review.

Many thanks,
[redacted] Headden
FY1 SAU

Results Outstanding (Y/N) If yes, give details:	No
Information to patient/carer (Y/N):	**Patient:** Yes **Carer (if applicable):**

Follow up arrangements

There are no Reviews planned

GP Practice

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Authorisor's name:	Dr D Headden	**Authorisor's Signature:**	
Authorisor's grade:	FHO1		
[redacted] **by:**			
Date:	03/05/2017		
Discharge Ward Nurse:	Adamson, Cheryl		

Validation/Contact Name: [redacted] Mr [redacted]

THIS IS THE FINAL DOCUMENT

Name: Ms Georgina Smith

CHI: 0412913127

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GP Practice

NHS Confidential: Personal data about a patient

Forth Valley Acute Hospitals Acute Division
Medications Discharge Summary

Name:	Ms Georgina Smith	**Patient's Tel No:**	
Address:	H M Prison,, Cornton Vale,, Stirling, FK9 5NU	**Patient's Tel**	01786 835335
Admission Date:	03/05/2017	**Discharge Date:**	03/05/2017

PATIENT ALERTS

Alert Group	Alert	Alert Comment	When Added	Added By

PATIENT DRUG REACTIONS

CURRENT PRESCRIPTION [redacted] **medicines currently prescribed)** **e.g. clinical indication for prescription monitoring*

MEDICINES DISCONTINUED

Nurse check on discharge:

Signature 1: Signature 2:

Name: Ms Georgina Smith CHI: 0412913127

GP Practice

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Immediate Discharge Letter

NHS Forth Valley

Hospital: Forth Valley Royal Hospital, Larbert
Consultant: [redacted] Mr [redacted]
Specialty: General Surgery

Tel: 01324 566000
Discharging Ward: FVRH - Capacity Area 3

GP Details		Patient Details		Admission Details	
Practice Code:	31391	Patient CHI No:	0412913127	Admission Date:	03/05/2017
		Patient Hospital No:	S681824		
GP Name:	4043816	Surname:	Smith	Admission Type:	Emergency - Non-Injury (e.g. Stroke, MI, Ruptured Appendix)
Address: 1		Forename:	Georgina	Presenting Complaint:	Abdominal Pain
		Date of Birth:	04/12/1991		
		Address:	H M Prison,, Cornton Vale,, Stirling, FK9 5NU	Discharge Date:	03/05/2017
				Discharge To:	Other - Other

Diagnosis/Problem List

X3062 - Chronic nonspecific abdominal pain

Additional comment (Progress, Investigations, Procedures, Complications etc)

Dear Dr,

Ms Georgina Smith was seen in FVRH on 2/5/17 with a 5 day history of RUQ pain. She was woken from sleep with this pain. Associated with vomiting. There was also some suprapubic pain.

Background
Cholecystectomy

RECEIVED
05 MAY 2017

Investigations
CRP <5

USS - There is no evidence of uterine, endometrial or ovarian pathology. The urinary bladder was unremarkable. Appendicitis is not excluded by this method but no free fluid or adnexal mass seen.

Management
Ms Smith has been discharged, she was feeling well. She was reassured with with the results.
No further review.

Many thanks,
[redacted] Headden
FY1 SAU

Results Outstanding (Y/N) If yes, give details:	No
Information to patient/carer (Y/N):	**Patient:** Yes **Carer (if applicable):**

Follow up arrangements

There are no Reviews planned

GP Practice

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NHS Confidential: Personal data about a patient

Authorisor's name:	Dr D Headden	**Authorisor's Signature:**
Authorisor's grade:	FHO1	
[redacted] **by:**		
Date:	03/05/2017	

Discharge Ward Nurse:	Adamson, Cheryl

Validation/Contact Name: [redacted] Mr [redacted]

Name: Ms Georgina Smith

THIS IS THE FINAL DOCUMENT
CHI: 0412913127

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GP Practice

NHS Confidential: Personal data about a patient

Forth Valley Acute Hospitals Acute Division
Medications Discharge Summary

Name:	Ms Georgina Smith	**Patient's Tel No:**	
Address:	H M Prison,, Cornton Vale,, Stirling, FK9 5NU	**Patient's Tel**	01786 835335
Admission Date:	03/05/2017	**Discharge Date:**	03/05/2017

PATIENT ALERTS

Alert Group	Alert	Alert Comment	When Added	Added By

PATIENT DRUG REACTIONS

CURRENT PRESCRIPTION [redacted] **medicines currently prescribed)** **e.g. clinical indication for prescription monitoring*

MEDICINES DISCONTINUED

Nurse check on discharge:

Signature 1: Signature 2:

Name: Ms Georgina Smith CHI: 0412913127

GP Practice

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NHS Forth Valley
Microbiology

SURNAME	FORENAME	UNIT No.
SMITH H M PRISON, CORNTON VALE,	GEORGINA	0412913127
	DATE OF BIRTH: 04/12/1991	SEX: F

CONSULTANT: Dr [redacted] Sayers
WARD: Prison Medical Officer CORN
G.P.: HMP & YOI Cornton Vale
CLINICAL DATA: fshs

Chlamydia trachomatis PCR Negative
N.gonorrhoeae PCR Negative

* Chlamydia / Gonorrhoea testing should only be done if there is a clinical indication OR if there is a concern following [redacted] risk.
* All diagnosed with Chlamydia should have [redacted] notification and be retested at 3-12 months.
* For advice / help contact Central [redacted] Health Helpline 01324 673563 (Mon-Fri 2-5pm).

EXAMINATION	LAB No.	AUTHORISED	
Chlamydia & gonorrhoea PCR	MS013737F		
NATURE OF SPECIMEN	DATE COLLECTED	DATE RECEIVED	DATE REPORTED
Throat swab	07/12/2017	11/12/2017	14/12/2017

QK
14-12-17
letter Sent

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NHS Forth Valley
Microbiology

SURNAME	FORENAME	UNIT No.
SMITH H M PRISON, CORNTON VALE,	GEORGINA	0412913127
	DATE OF BIRTH: 04/12/1991	SEX: F

CONSULTANT: Dr [redacted] Sayers
WARD: Prison Medical Officer CORN
G.P.: HMP & YOI Cornton Vale
CLINICAL DATA: FSHS

Chlamydia trachomatis PCR Negative
N.gonorrhoeae PCR Negative

* Chlamydia / Gonorrhoea testing should only be done if there is a clinical indication OR if there is a concern following [redacted] risk.
* All diagnosed with Chlamydia should have [redacted] notification and be retested at 3-12 months.
* For advice / help contact Central [redacted] Health Helpline 01324 673563 (Mon-Fri 2-5pm).

EXAMINATION	LAB No.	AUTHORISED	
Chlamydia & gonorrhoea PCR	MS013736A		
NATURE OF SPECIMEN	DATE COLLECTED	DATE RECEIVED	DATE REPORTED
Low Vaginal swab	07/12/2017	11/12/2017	14/12/2017

QK
14-12-17

letter sent

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NHS
Forth Valley
Microbiology

SURNAME: SMITH H M PRISON, CORNTON VALE,	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Sayers	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: BBV screen			

Syphilis Screening Test	Negative
Hepatitis B surface antigen	Negative
Hepatitis C antibody screen	Negative
HIV antigen / antibody test	Negative

EXAMINATION: Syphilis Serology	LAB No.: MS014269G	AUTHORISED: [redacted] Longstaff	
NATURE OF SPECIMEN: Venous blood	DATE COLLECTED: 07/12/2017	DATE RECEIVED: 11/12/2017	DATE REPORTED: 11/12/2017

Vision

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14/12/17

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NHS Forth Valley
Microbiology

SURNAME	FORENAME	UNIT No.
SMITH H M PRISON, CORNTON VALE,	GEORGINA	0412913127
	DATE OF BIRTH: 04/12/1991	SEX: F

CONSULTANT: Dr [redacted] Sayers
WARD: Prison Medical Officer CORN
G.P.: HMP & YOI Cornton Vale

CLINICAL DATA: FSHS

Chlamydia trachomatis PCR Negative
N.gonorrhoeae PCR Negative

* Chlamydia / Gonorrhoea testing should only be done if there is a clinical indication OR if there is a concern following [redacted] risk.
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* For advice / help contact Central [redacted] Health Helpline 01324 673563 (Mon-Fri 2-5pm).

EXAMINATION	LAB No.	AUTHORISED	
Chlamydia & gonorrhoea PCR	MS013736A		
NATURE OF SPECIMEN	DATE COLLECTED	DATE RECEIVED	DATE REPORTED
Low Vaginal swab	07/12/2017	11/12/2017	14/12/2017

QK
14-12-17

letter sent

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NHS
Forth Valley
Microbiology

SURNAME	FORENAME	UNIT No.
SMITH H M PRISON, CORNTON VALE,	GEORGINA	0412913127
	DATE OF BIRTH: 04/12/1991	SEX: F

CONSULTANT: Dr [redacted] Sayers
WARD: Prison Medical Officer CORN
G.P.: HMP & YOI Cornton Vale

CLINICAL DATA: BBV screen

Syphilis Screening Test	Negative
Hepatitis B surface antigen	Negative
Hepatitis C antibody screen	Negative
HIV antigen / antibody test	Negative

EXAMINATION	LAB No.	AUTHORISED	
Syphilis Serology	MS014269G	[redacted] Longstaff	
NATURE OF SPECIMEN	DATE COLLECTED	DATE RECEIVED	DATE REPORTED
Venous blood	07/12/2017	11/12/2017	11/12/2017

Vision

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14/12/17

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Extension:.tif
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NHS Forth Valley
Microbiology

SURNAME	FORENAME	UNIT No.
SMITH H M PRISON, CORNTON VALE,	GEORGINA	0412913127
	DATE OF BIRTH: 04/12/1991	SEX: F

CONSULTANT: Dr [redacted] Sayers
WARD: Prison Medical Officer CORN
G.P.: HMP & YOI Cornton Vale
CLINICAL DATA: fshs

Chlamydia trachomatis PCR Negative
N.gonorrhoeae PCR Negative

* Chlamydia / Gonorrhoea testing should only be done if there is a clinical indication OR if there is a concern following [redacted] risk.
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* For advice / help contact Central [redacted] Health Helpline 01324 673563 (Mon-Fri 2-5pm).

EXAMINATION	LAB No.	AUTHORISED	
Chlamydia & gonorrhoea PCR	MS013737F		
NATURE OF SPECIMEN	DATE COLLECTED	DATE RECEIVED	DATE REPORTED
Throat swab	07/12/2017	11/12/2017	14/12/2017

QK
14-12-17
letter Sent

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Pages:

NHS Confidential: Personal data about a patient

HMP & YOI CORNTON VALE
Consent for Influenza Immunisation
2017/2018

Name: GEORGINA SMITH

Date of Birth: 4/12/91 **SPIN No:** 131344

Check list of Health Assessment

Have you had the flu vaccination this year? Yes / (No)

Are you suffering from a cold or other infection? Yes / (No)

Have you had any allergies?
Including medication and eggs Yes / (No)

Are you aware of benefits
And possible side effects? (Yes) / No

Do you think you may be [redacted] Yes / (No)

Do you give your consent? (Yes) / No

Signature of patient X G. Smithe

Details of vaccine given
Brand: INFLUVAC
Batch: N22N
Expiry: 06/18

Signature of clinician
Administering CHORNK Date:

Vaccine no or sticker no/expiry date	Site / Location	Doctor's Signature
2017/2018 season Exp 06/2018 Lot N22N	R) upper arm	PHD Clydesdale

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Pages:

NHS Confidential: Personal data about a patient

HMP & YOI CORNTON VALE
Consent for Influenza Immunisation
2017/2018

Name: GEORGINA SMITH

Date of Birth: 4/12/91 **SPIN No:** 131344

Check list of Health Assessment

Have you had the flu vaccination this year? Yes / (No)

Are you suffering from a cold or other infection? Yes / (No)

Have you had any allergies?
Including medication and eggs Yes / (No)

Are you aware of benefits
And possible side effects? (Yes) / No

Do you think you may be [redacted] Yes / (No)

Do you give your consent? (Yes) / No

Signature of patient X G. Smithe

Details of vaccine given
Brand: INFLUVAC
Batch: N22N
Expiry: 06/18

Signature of clinician
Administering CHRIS Date:

Vaccine no or sticker no/expiry date	Site / Location	Doctor's Signature
Exp 06/2018 Lot N22N	R) upper arm	PHD Clinic

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NHS Forth Valley

Prescription Sheet No. 4 **HM** Clyde

Start Date: 16/6/17

Side B

"AS REQUIRED" PRESCRIPTIONS

	Commence Date	Review Date	Stop Date/ Length	DRUGS (including formulation)	Dose	Route	Frequency of Administration	Issue	Prescribers Signature	Discontinued Date	Discontinued Initials	Pharmacist Initials	Pharmacist Date
1	16/6/17	30/5/18		PARACETAMOL	4G								
2	16/6/17	30/5/18		CODEINE	60MG		TDS	W		17/8/17			
3	16/6/17	30/5/18		MORPHINE	30MG	O	BD	M					
4	16/6/17	30/5/18		SENNA	2TABS	O	NOCTE	M					
5	16/6/17	30/5/18		LACTULOSE	15ML	O	TDS	M					
6	16/6/17	30/5/18		RISPERIDONE	1MG	O	NOCTE	M		17/8/17			
7	11/7/17	30/8/18		OLANZAPINE	10MG	O	NOCTE	M					
8	15/8/17	30/7/18		MIDAZOLAM	135MG	O	TDS	M		22/8/17			
	15/8/17	30/7/18		HALOPERIDOL	10MG	O	TDS	W					

Once Only Prescriptions

	Admin Date	Administration Time	DRUGS (including formulation)	Dose	Route	Prescribers Signature	Given By	Time Given	Pharmacist Initials	Pharmacist Date
10	15/8/17	AS REQD	DIAZEPAM	10MG	PO					
11	30 to 17		DEPO-PROVERA	150MG	IM					
12	22.01.18		DEPO-PROVERA	150MG	IM		TMay	10	SMITH	
13										
14										
15										
16										
17										
18										

Name: GEORGINA SMITH Spin: 133344 DoB: 4/12/91 Location: P Allergies: NKA

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

SS014

SMITH

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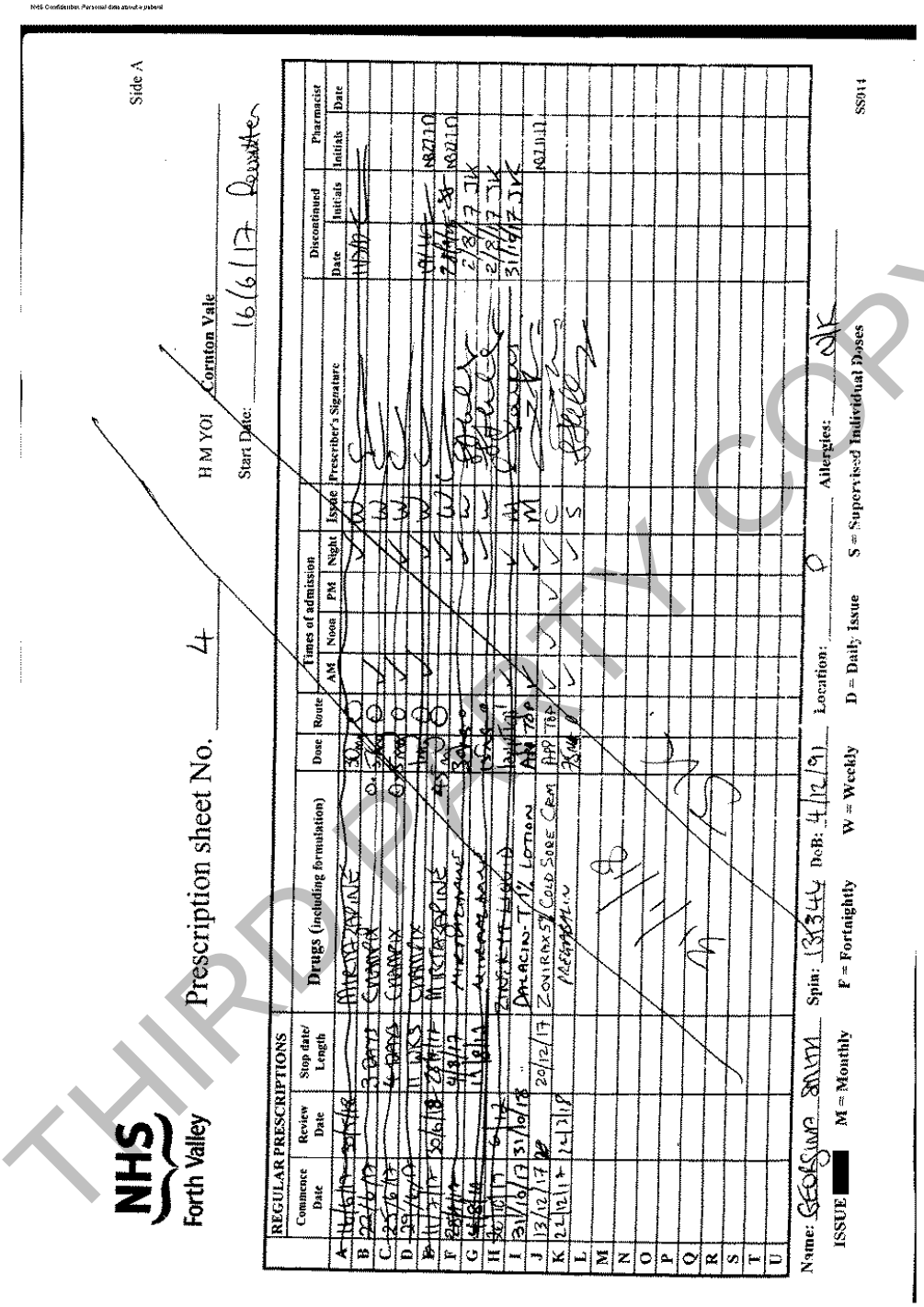


NHS Forth Valley

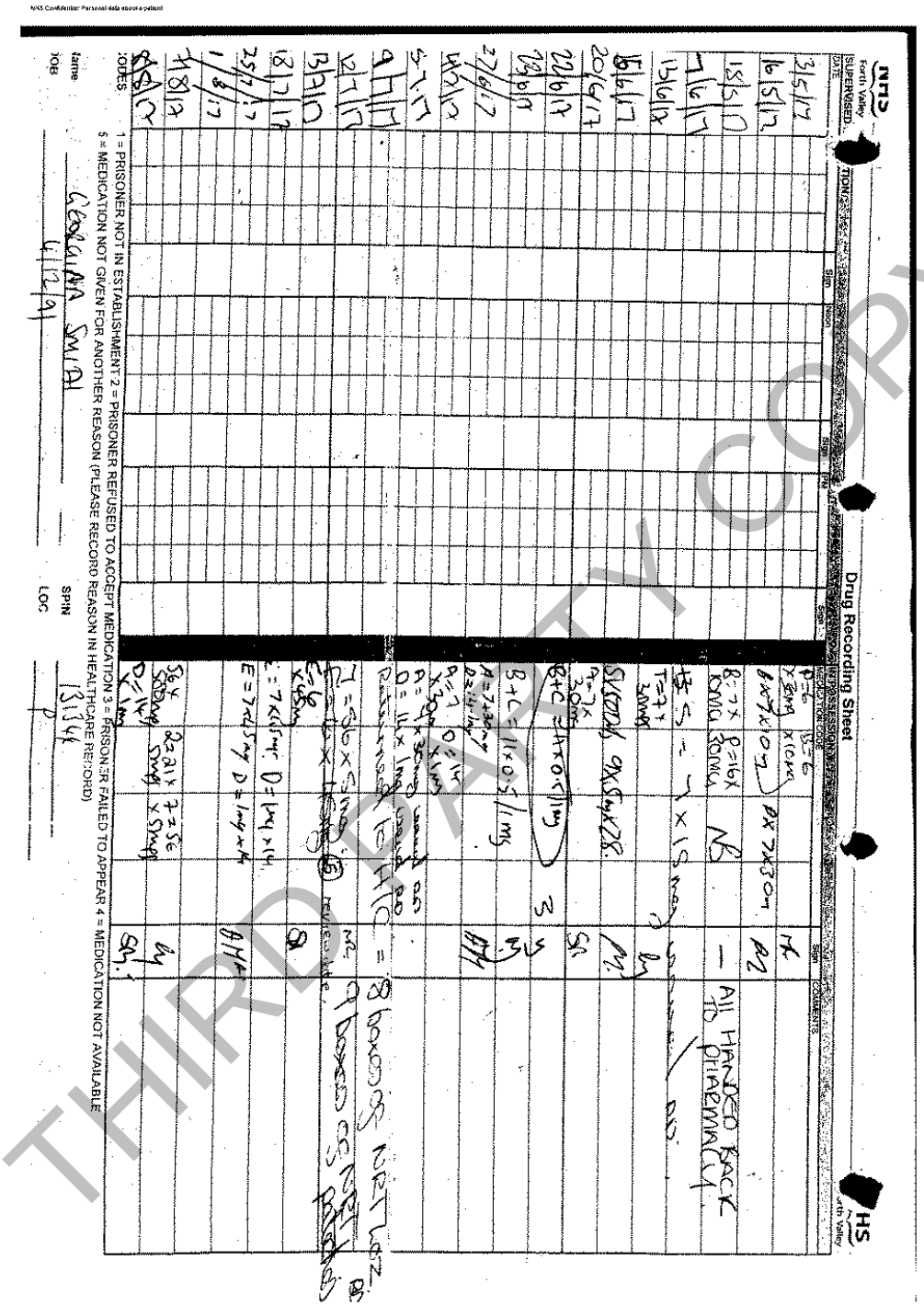
Prescription sheet No. 4

Side A

H M YOI Cornton Vale

Start Date: 16/6/17

| REGULAR PRESCRIPTIONS | | |



Drug Recording Sheet

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NTU
North Valley

HS
North Valley

SUPERSEDED

DATE

SIGNATURE

Sign

INITIALS

PRESCRIPTION CODE

DOSE

SIGNATURE

COMMENTS

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD)

CODES

Name

CLOSAURA SMITH

DOB

4/12/91

SPIN

LOG

13134

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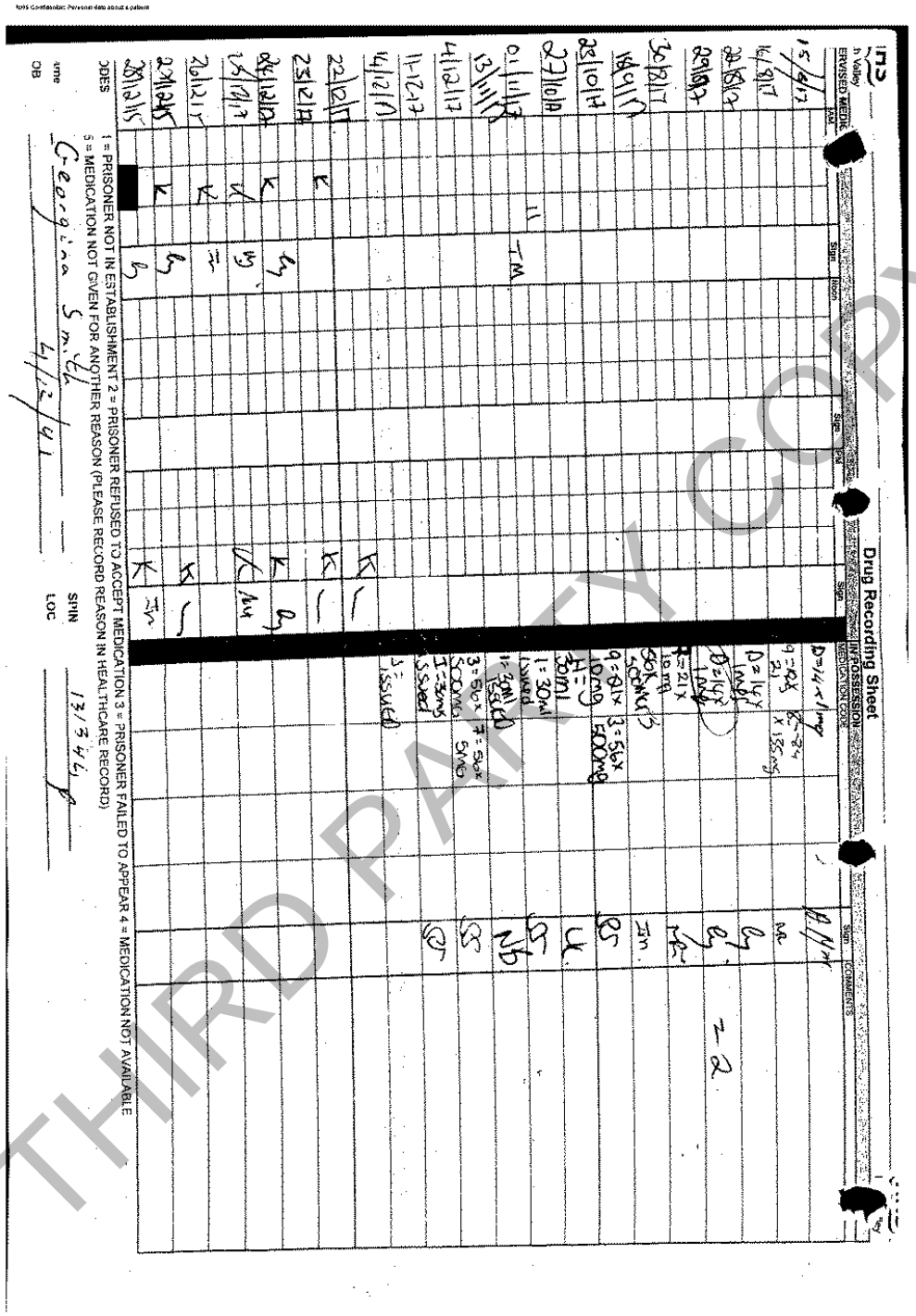

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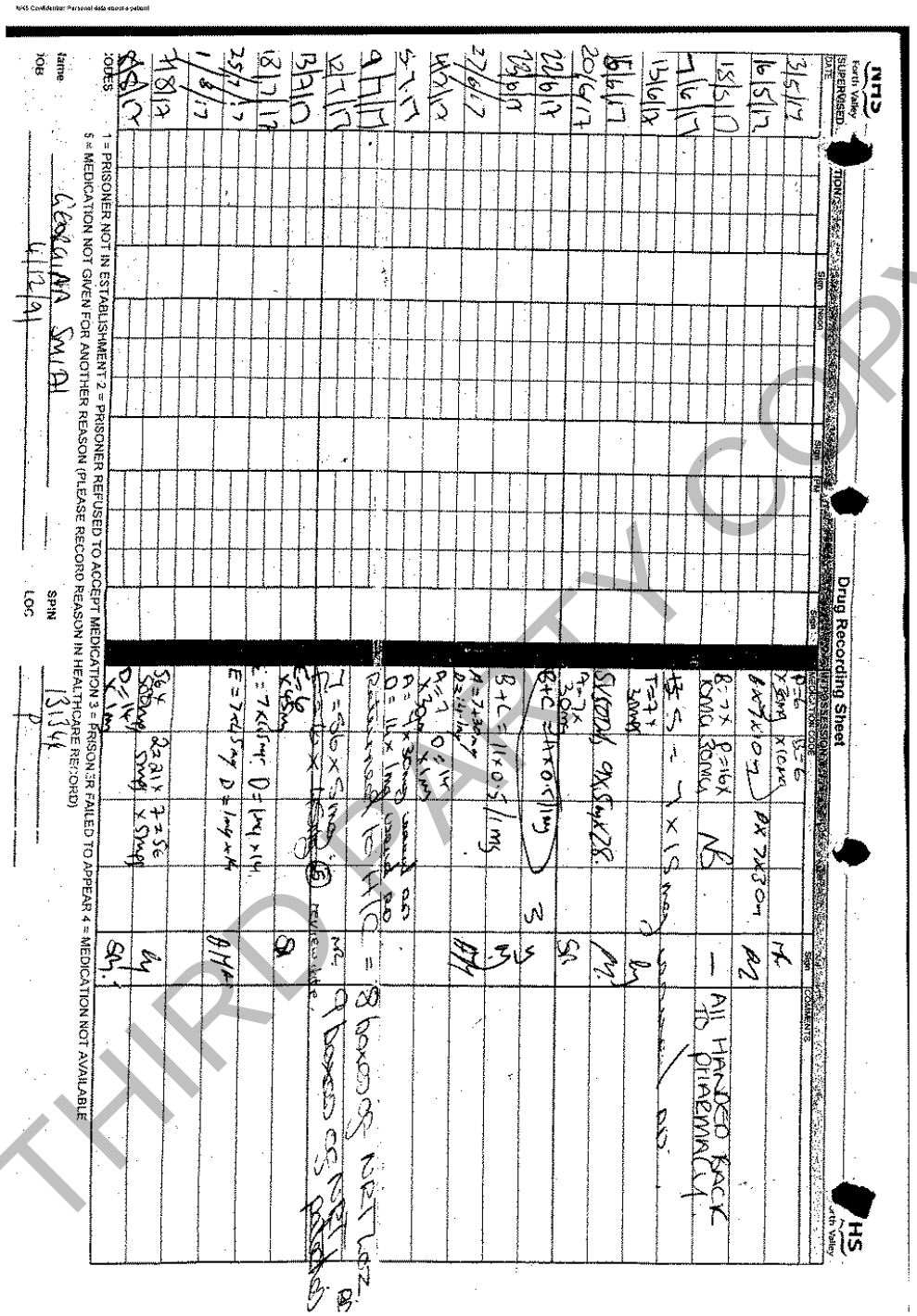

Drug Recording Sheet

NHS Confidential: Personal data about a patient

NTU — North Tees and Hartlepool NHS Foundation Trust — HS

SUPERSEDED

DATE | TIME | SIGN | INITIAL | PRESCRIPTION CODE | SIGN | COMMENTS

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD)

CODES:

Name: CLOSKUNA SMITH

DOB: 4/12/91

SPIN:

LOG:

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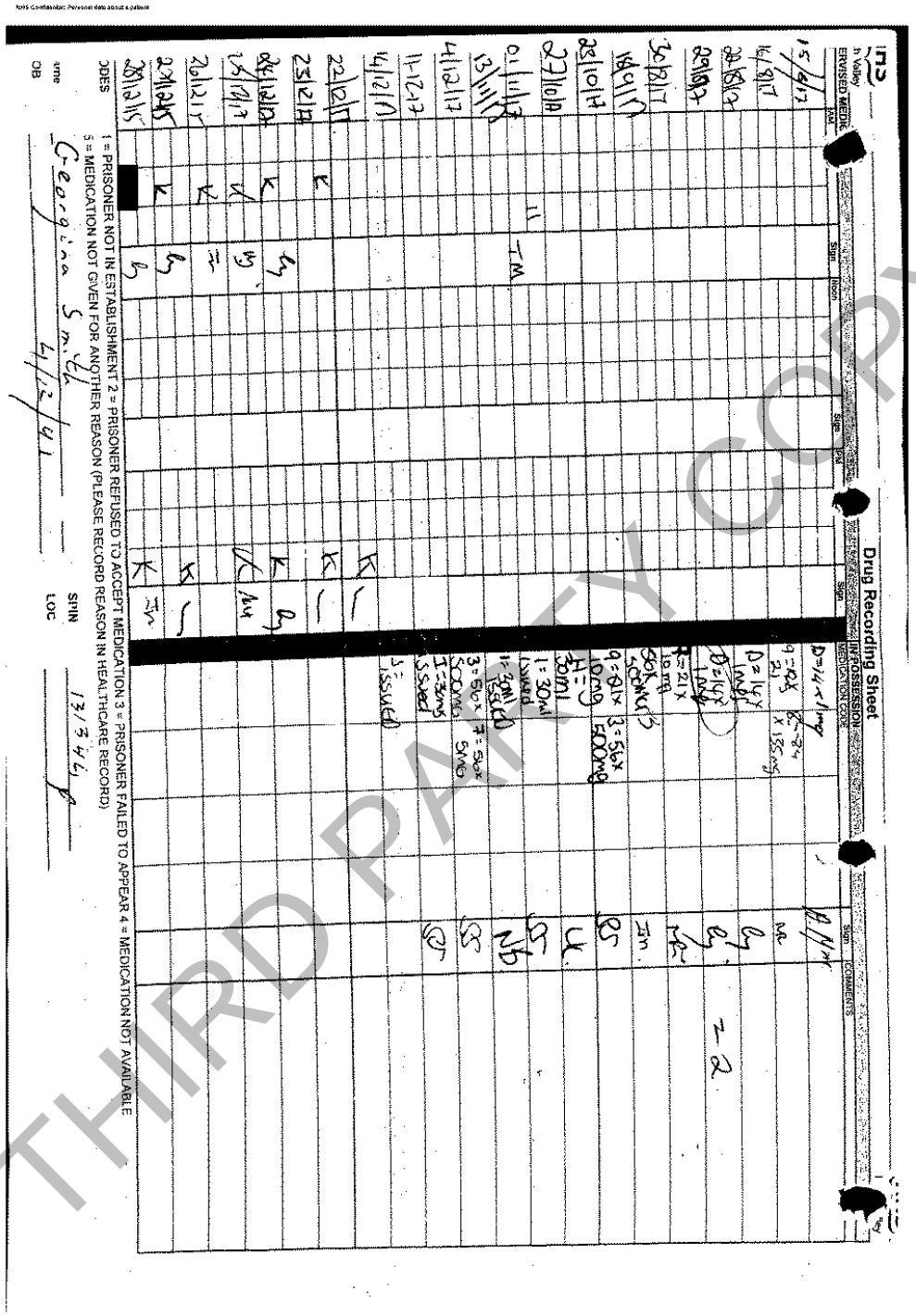

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NHS Confidential: Personal data about a patient

NHS Forth Valley

Prescription Sheet No. 4 HM CLYDE

Start Date: 16/6/17

Side B

"AS REQUIRED" PRESCRIPTIONS

	Commence Date	Review Date	Stop Date/ Length	DRUGS (including formulation)	Dose	Route	Frequency of Administration	Issue	Prescribers Signature	Discontinued Date	Discontinued Initials	Pharmacist Date
1	16/6/17	30/5/18		PARACETAMOL	1G	PO	ONE 4HRLY	PRN				
2	16/6/17	30/5/18		CODEINE	30MG	PO	TDS	PRN				
3	16/6/17	30/5/18		NAPROXEN	500MG	PO	BD	PRN				
4	16/6/17	30/5/18		SENNA	2TABS	PO	NOCTE	PRN				
5	16/6/17	30/5/18		LACTULOSE	10ML	PO	TDS	PRN				
6	16/6/17	30/5/18		BISACODYL	5MG	PO	NOCTE	PRN				
7	16/6/17	30/8/18		BISACODYL	10MG	PO	NOCTE	PRN				
8	15/8/17	30/7/18		METOCLOPRAMIDE	10MG	PO	TDS	PRN				
9	15/8/17	30/7/18		BUSCOPAN	10MG	PO	TDS	PRN				

Once Only Prescriptions

	Admin Date	Administration Time	DRUGS (including formulation)	Dose	Route	Prescribers Signature	Given By	Time Given	Initials	Pharmacist Date
10	15/8/17	AS REQD	DEPO MEDROL	120MG	IM					
11	30 TO 17		DEPO-PROVERA	150MG	IM					
12	22.01.18		DEPO-PROVERA	150MG	IM			10		
13										
14										
15										
16										
17										
18										

Name: GEORGINA SMITH Spin: 133144 DoB: 4/12/91 Location: P Allergies: NKA

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

SS014

SMITH

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THIRD PARTY COPY

NHS Forth Valley

Side A

Prescription sheet No. 4

H M YOI Cornton Vale

Start Date: 16/6/17

REGULAR PRESCRIPTIONS

	Commence Date	Review Date	Stop date/ Length	Drugs (including formulation)	Dose	Route	Times of admission: AM	Noon	PM	Night	Issue	Prescriber's Signature	Discontinued: Date	Initials	Pharmacist: Initials	Date
A	16/6/17	30/6/18		AMITRIPTYLINE	30mg	O				✓	W					
B	22/6/17		3 DAYS	CHLOMIX	0.5g	O	✓			✓	W					
C	25/6/17		4 DAYS	CHLOMIX	0.5g	O	✓			✓	W					
D	29/6/17		11 WKS	CHLOMIX	1mg	O	✓			✓	W					
E	11/7/17	30/6/18	20/9/17	AMITRIPTYLINE	45mg	O				✓	W		19/9/17		NBZ110	
F	20/9/17		4/8/17	MIRTAZAPINE	30mg	O				✓	W		2/8/17	JK	NBZ110	
G	4/8/17		11/8/17	MIRTAZAPINE	15mg	O				✓	W		2/8/17	JK		
H	20/10/17	6/12		ZINC KIT LOGO'D	1 kit	O				✓	W		31/10/17	JK		
I	31/10/17	31/10/18		DALACIN-T 1% LOTION	APP	TOP	✓			✓	M				NZ1011	
J	13/12/17		20/12/17	ZOVIRAX 5% COLD SORE CREM	APP	TOP	✓	✓	✓	✓	C					
K	22/12/17	22/2/18		PREDSALIN	25mg	O	✓			✓	S					
L																
M																
N																
O																
P																
Q																
R																
S																
T																
U																

Name: GEORGINA SMITH Spin: 13K346 DoB: 4/12/91 Location: D Allergies: NKA

ISSUE ■ M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

SS014

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iGPR Report

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Health Centre
HMP/YOI Cornton Vale
Cornton Road
Stirling
FK9 5NU

Tel: 01786 835335

NHS
Forth Valley

The Breast Clinic
Forth Valley Royal Hospital
Stirling Road
Larbert
FK5 4WR

Our Ref : KR/RMN02/02

22 February 2018

Dear Doctor,

Ref : Georgina Smith (04/12/1991)

I would be very grateful for your assessment and advice regarding this 26 year old woman who has had a cyst on her left upper breast for over a year that keeps flaring up and becoming quite tender and then settling back down again. She is worried as she has a family history of early breast cancer, her [redacted] (i.e. [redacted] died of breast cancer in her early thirties . Georgina would be keen to discuss this and explore the option of genetic assessment if it were felt to be appropriate. The main issue in the short term though is the cyst that keeps becoming symptomatic. On examination today she has a very subtle swelling in the axilary tail of her left breast. I wouldn't describe it as a discreet lump. There are no skin changes or nipple changes and there is no axilary or supraclaviclar lymphadenopathy . I suspect that she is experiencing either a painful cyst or tender breast tissue.

I would be very grateful if she could be seen for assessment, perhaps an ultrasound scan to establish if there is a cyst in the breast that is causing her problems and whether aspiration would be appropriate etc. I would also be grateful for your discussion regarding her family history.

Georgina is currently on Depo-Provera for management of menorrhagia. She is due to be with us in the establishment here until 2021

Yours sincerely

Dr [redacted] Roxburgh
GP Well Woman Clinic

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Health Centre
HMP/YOI Cornton Vale
Cornton Road
Stirling
FK9 5NU

Tel: 01786 835335

NHS Forth Valley

The Breast Clinic
Forth Valley Royal Hospital
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Our Ref : KR/RMN02/02

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GP Well Woman Clinic

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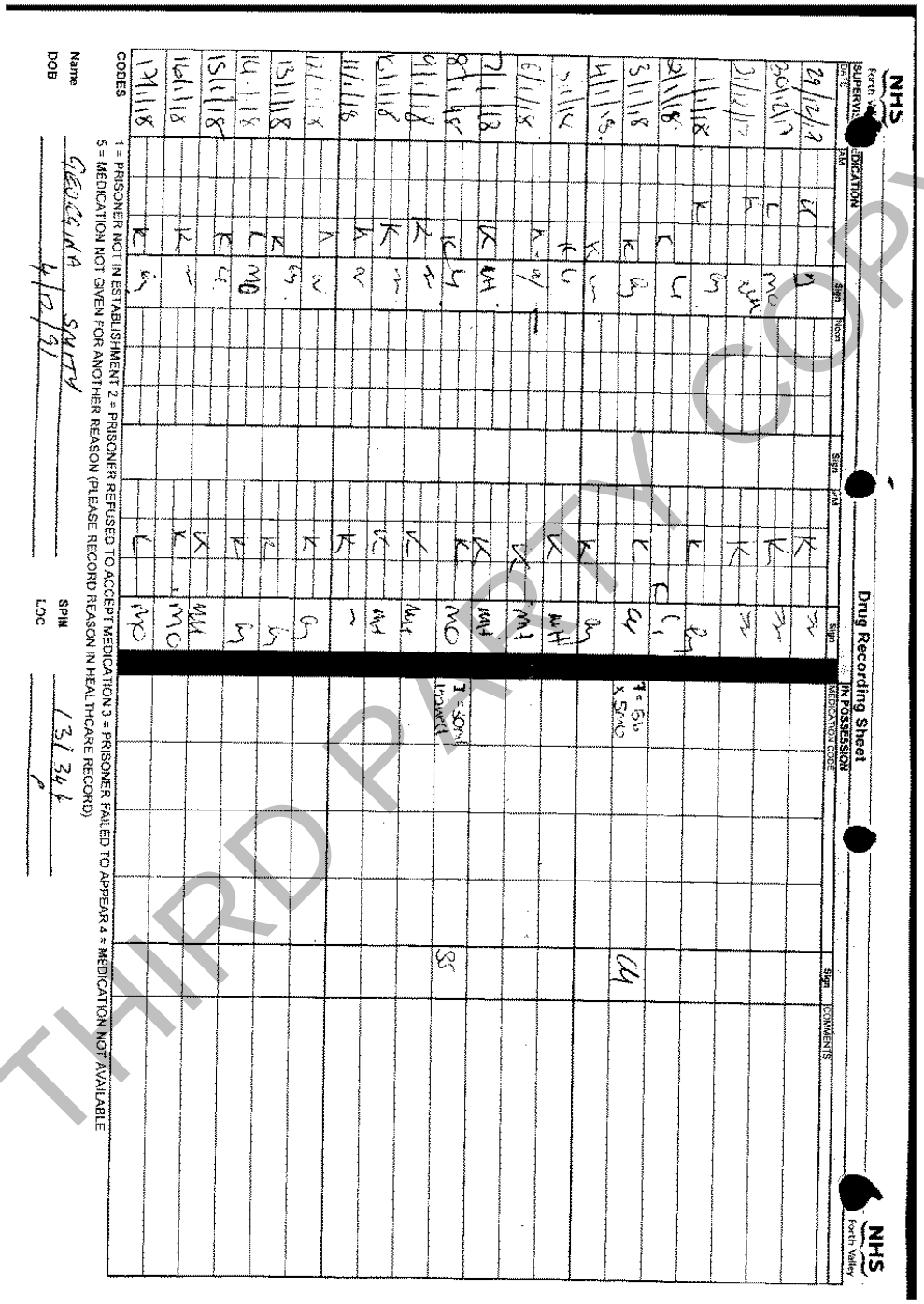

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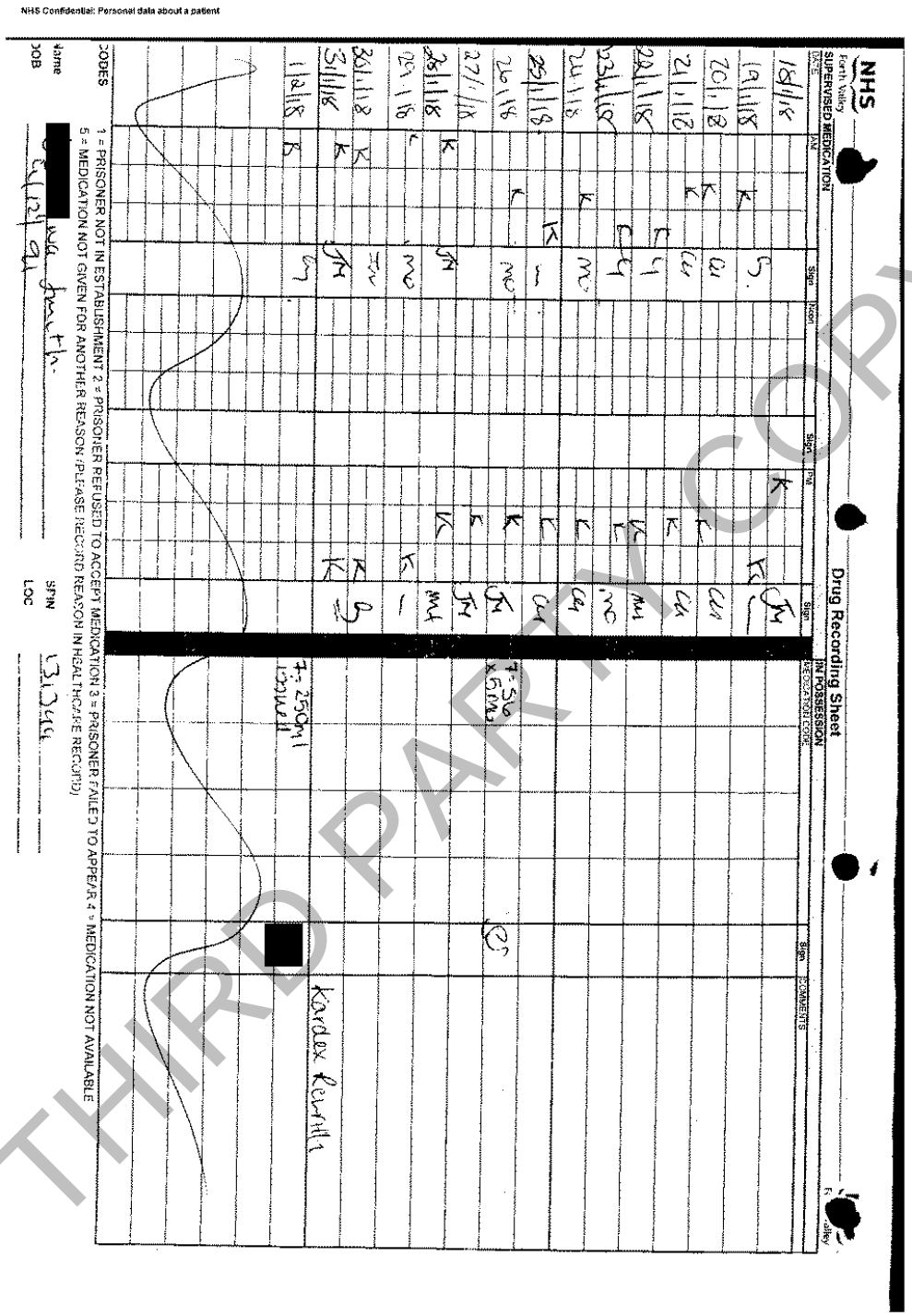

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NHS Forth Valley

Drug Recording Sheet

SUPERVISION

EDUCATION

IN POSSESSION

DATE	AM Sign	PM Sign	MEDICATION CODE	Sign	COMMENTS
29/12/17	KC	KC	7 = 56 x 5MG	CH	
30/12/17	LC	KC			
31/12/17	LC	KC			
1/1/18	LC	KC			
2/1/18	LC	KC			
3/1/18	KC	KC			
4/1/18	KC	KC			
5/1/18	KC	KC			
6/1/18	KC	KC			
7/1/18	KC	KC			
8/1/18	KC	KC	7 = 30ml Lorazepam		35
9/1/18	KC	KC			
10/1/18	KC	KC			
11/1/18	KC	KC			
12/1/18	KC	KC			
13/1/18	KC	KC			
14/1/18	KC	KC			
15/1/18	KC	KC			
16/1/18	KC	KC			
17/1/18	KC	KC			

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD)

Name [redacted]

DOB [redacted]

SPIN [redacted]

LOC [redacted]

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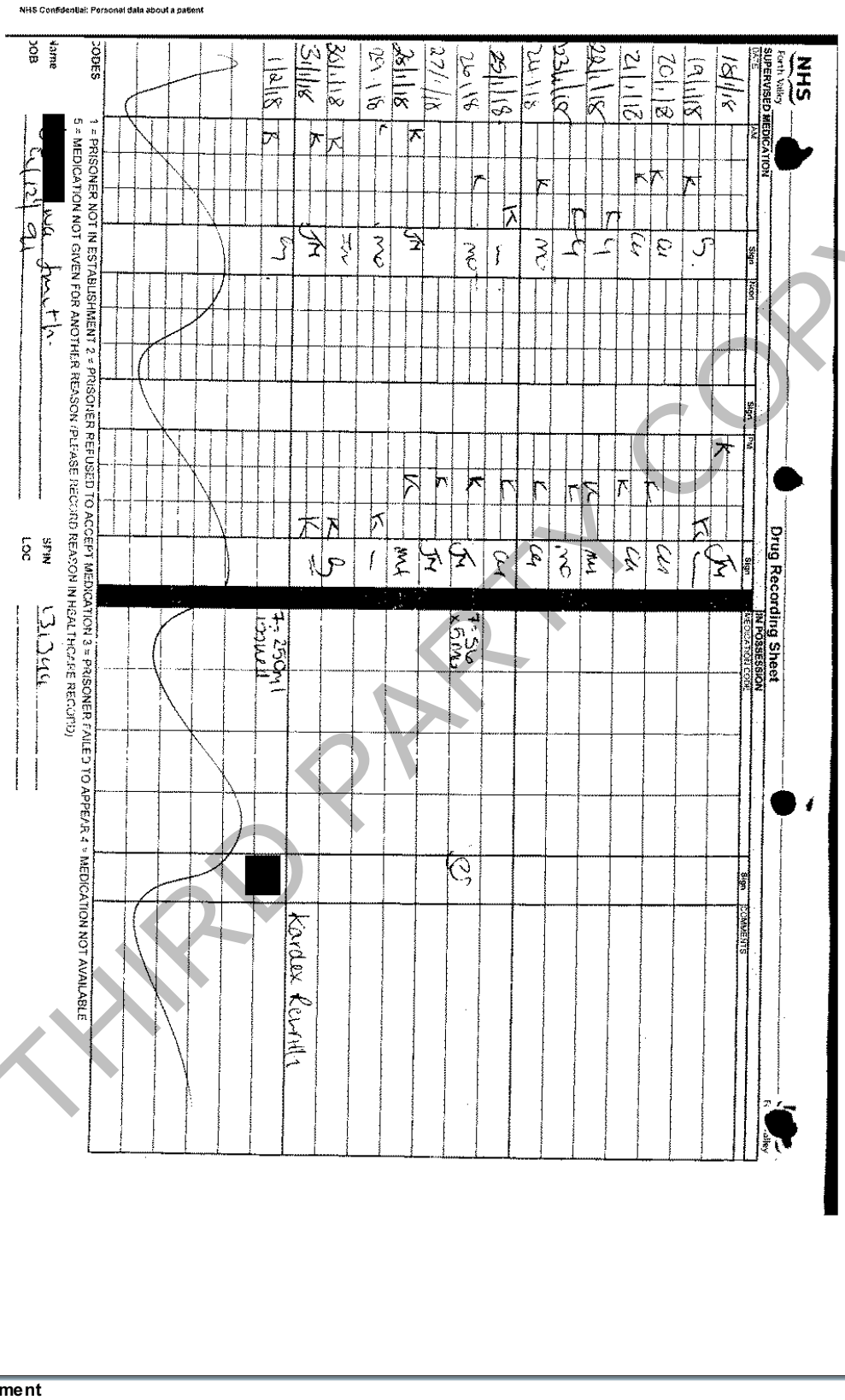

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NHS Forth Valley

Drug Recording Sheet

NHS Forth Valley

SUPERVISED MEDICATION | IN POSSESSION

DATE	AM Sign	Noon Sign	PM Sign	Sign	MEDICATION CODE	Sign	COMMENTS
22/2/18				MO			
23/2/18				JM			
24/2/18				JM			
25/2/18				JM			
26/2/18				CW			
27/2/18				JM			
28/2/18				MO			
1/3/18				~			
2/3/18				MH			
3/3/18				MO			
4/3/18				MO			
5/3/18				JM	A=30		
6/3/18				JM			
7/3/18				JM			
8/3/18				MH			
9/3/18				~			
10/3/18				~			
11/3/18				~			
12/3/18				MO			
13/3/18				MH			

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Name GEORGINA SMITH SPIN 131344
DOB 4/12/91 LOC P

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NHS Forth Valley

Drug Recording Sheet (S)

SUPERVISED MEDICATION DATE	Sign	Noon	Sign	IN POSSESSION MEDICATION/DOSE	Sign	COMMENTS
1.2.18			SM			
2/2/18			BM	C given 6x5mg	mo	C=ordered
3/2/18			B	A: 1 bottle returned		
5/2/18				E: 14 returned	SS	
6/2/18			D			C: changed to supervised
7/2/18			D			
8/2/18				B: 60g issued	SS	
9/2/18			D			
10/2/18						
11/2/18			D			
12/2/18			D			
13/2/18			D			
14/2/18			D			
15/2/18			D			
16/2/18			D			
17.2.18			D			
18.2.18			D			
19.2.18			D			
20/2/18			D			
21/2/18			D			

CODES

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Name: Christopher Smith
DOB: 4.12.91
SPIN:
LOC: HMP Low Moss

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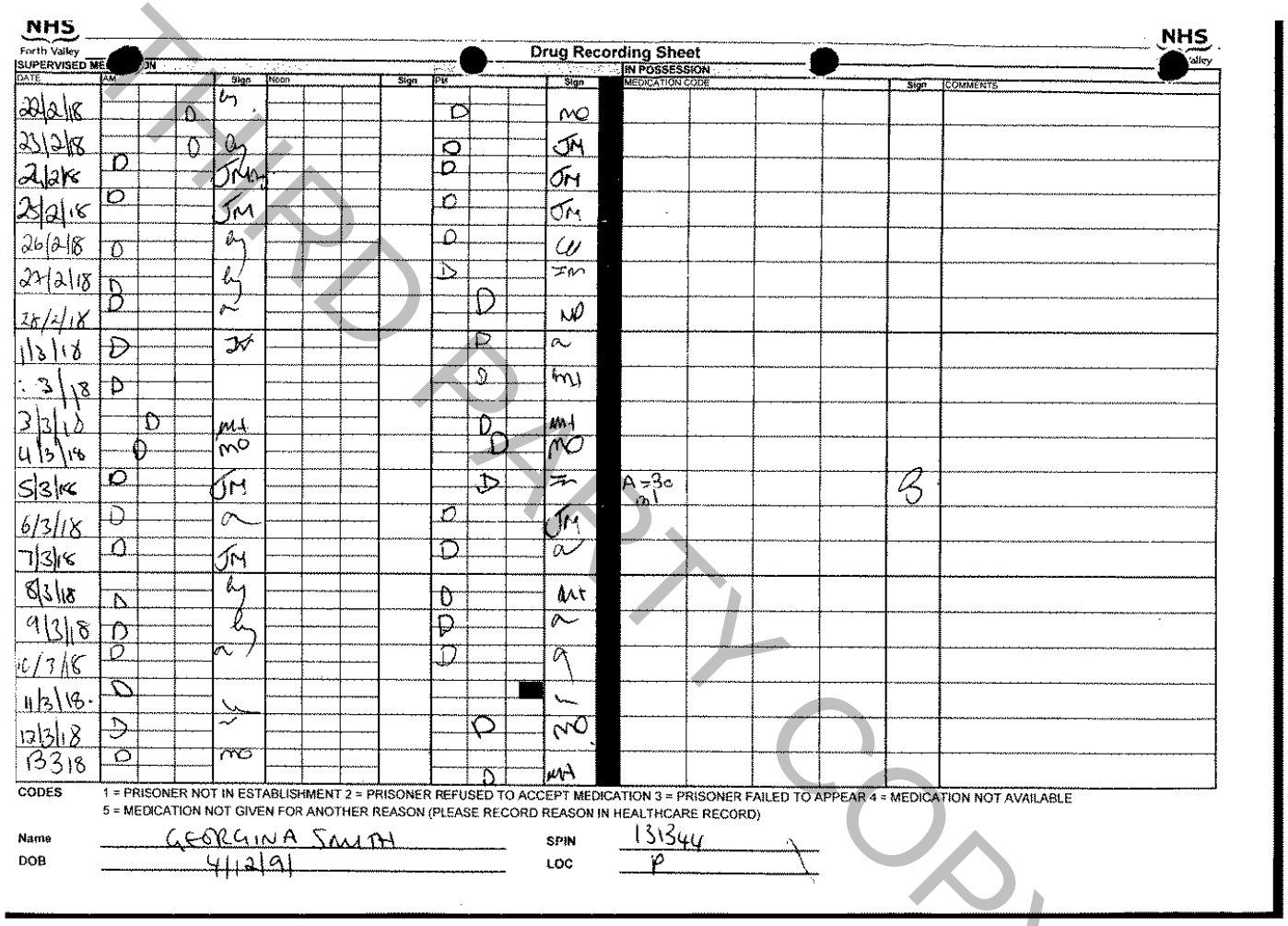

NHS Forth Valley

Drug Recording Sheet

NHS Forth Valley

SUPERVISED MEDICATION | IN POSSESSION

DATE	AM	Sign	Noon	Sign	PM	Sign	MEDICATION CODE	Sign	COMMENTS
22/2/18	D	[illegible]			D	MO			
23/2/18	D	[illegible]			D	JM			
24/2/18	D	JM			D	JM			
25/2/18	D	JM			D	JM			
26/2/18	D	[illegible]			D	[illegible]			
27/2/18	D	[illegible]			D	[illegible]			
28/2/18	D	[illegible]			D	MO			
1/3/18	D	[illegible]			D	[illegible]			
2/3/18	D				D	[illegible]			
3/3/18	D	MH			D	MH			
4/3/18	D	MO			D	MO			
5/3/18	D	JM			D	[illegible]	A=30	B	
6/3/18	D	[illegible]			D	JM			
7/3/18	D	JM			D	[illegible]			
8/3/18	D	[illegible]			D	MH			
9/3/18	D	[illegible]			D	[illegible]			
10/3/18	D	[illegible]			D	[illegible]			
11/3/18	D	[illegible]			[illegible]	[illegible]			
12/3/18	D	[illegible]			D	MO			
13/3/18	D	MO			D	MH			

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
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Name GEORGINA SMITH SPIN 131344

DOB 4/12/91 LOC P

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iGPR Report

NHS Forth Valley

Drug Recording Sheet (S)

NHS Forth Valley

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SUPERVISION DATE	MEDICATION Sign	Noon	Sign	Sign	IN POSSESSION MEDICATION/DOSE	Sign	COMMENTS
1.2.18				SM			
2/2/18	D		B	BM	C given 6x5mg	mo	C=ordered
3/2/18	B		B		A: 1 bottle returned		
5/2/18					C: 1+1 given	SS	
6/2/18			D	JM			C: changed to supervised
7/2/18	D		D	D			
8/2/18	D		D	D	8:50 issued	SS	
9/2/18	D		D	JM			
10/2/18	D		D	D			
11/2/18	D		D	D			
12/2/18	D		D	D			
13/2/18	D		D	D			
14/2/18	D		D	JM			
15/2/18	D		D	D			
16/2/18	D		D	D			
17.2.18	D		D	D			
18.2.18	D		D	D			
19.2.18	D		D	D			
20/2/18	D		D	D			
21/2/18	D		D	D			

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Name: Lucas Smith SPIN: 131464

DOB: 4.12.91 LOC: HMP 4.12.91

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NHS Forth Valley
Microbiology

SURNAME: SMITH H M PRISON, CORNTON VALE,	FORENAME: GEORGINA	UNIT No.: 0412913127	DATE OF BIRTH: 04/12/1991 / SEX: F
CONSULTANT: Dr [redacted] Sayers	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: Positive proteins pH 6.5			

Red Blood Cells (ul) :9
White Blood Cells (ul) :1
Epithelial Cells (ul) :3

Urine Culture
Flow cytometry indicates no culture required.
It is important that method of sample collection
is recorded on the request e.g. MSU, CSU, etc.

Normal Ranges
Red Blood Cells 0 - 40 /ul
White Blood Cells >400/ul and negative culture is considered sterile pyuria.
White Blood Cells >40 and <400/ul with a negative culture, consider further investigation if clinically indicated.

-ve 20/4/18 M

EXAMINATION: Urine exam	LAB No.: MU025101E	AUTHORISED: G[redacted]	
NATURE OF SPECIMEN: Urine	DATE COLLECTED: 17/04/2018	DATE RECEIVED: 17/04/2018	DATE REPORTED: 17/04/2018

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NHS Forth Valley
Microbiology

SURNAME: SMITH H M PRISON, CORNTON VALE,	FORENAME: GEORGINA	UNIT No.: 0412913127	DATE OF BIRTH: 04/12/1991 SEX: F
CONSULTANT: Dr [redacted] Sayers	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: Positive proteins pH 6.5			

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-ve 20/4/18 m

EXAMINATION: Urine exam	LAB No.: MU025101E	AUTHORISED: G[redacted]	
NATURE OF SPECIMEN: Urine	DATE COLLECTED: 17/04/2018	DATE RECEIVED: 17/04/2018	DATE REPORTED: 17/04/2018

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RECEIVED
15 MAY 2018

MICROLAB 3500 UK v6.00 FULL REPORT

Patient Name: GEORGINA SMITH

ID: Date: 15/05/18 Time: 09:47
Sex: Female Age: 26 Race: CAUCASIAN
Height: 156 cm

All Spirometry Results

	BASE	
TEST	1	2
FEV1	2.68	2.87
FVC	2.79	2.91
PEF	293	299
VAR	-5	0

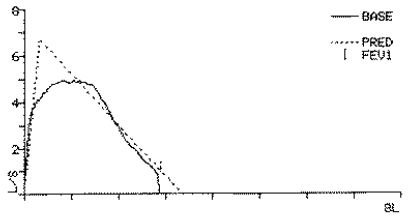
Best Spirometry Result: Base = 2

	Base	%Pred	Post BD	%Pred	%Chg	Normal Min	Pred	Max	
VC	0.89								L
FEV1	2.87	99				2.29	2.91	3.53	L
FVC	2.91	87				2.63	3.34	4.05	L
PEF	299	75				312	401	490	L/M
FEV1%	99	117				73	84	95	%
F50	4.55	105				2.52	4.33	6.14	L/S
F25	2.14	102				0.96	2.09	3.22	L/S
MEF	3.73	94				2.58	3.98	5.38	L/S
I50									L/S
R50									%
PIF									L/S
MVV	108								L
FET	1.82								S

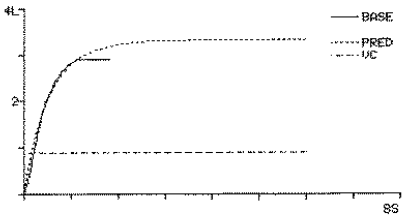
Lung Age = 26 Years.

Interpretation: Normal Spirometry.

Flow/Volume



Volume/Time



Normal Values: ECCS (adult):
Zapletal,Solymar,Cogswell [redacted]

Results at BTPS

Technician: .....

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RECEIVED
15 MAY 2018

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Sex: Female Age: 26 Race: CAUCASIAN
Height: 156 cm

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FVC	2.79	2.91
PEF	293	299
VAR	-5	0

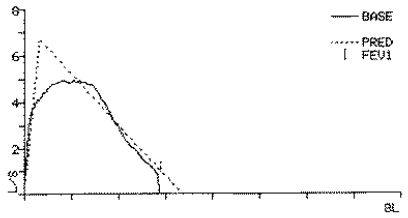
Best Spirometry Result: Base = 2

	Base	%Pred	Post BD	%Pred	%Chg	Normal Min	Pred	Max	
VC	0.89								L
FEV1	2.87	99				2.29	2.91	3.53	L
FVC	2.91	87				2.63	3.34	4.05	L
PEF	299	75				312	401	490	L/M
FEV1%	99	117				73	84	95	%
F50	4.55	105				2.52	4.33	6.14	L/S
F25	2.14	102				0.96	2.09	3.22	L/S
MEF	3.73	94				2.58	3.98	5.38	L/S
I50									L/S
R50									%
PIF									L/S
MVV	108								L
FET	1.82								S

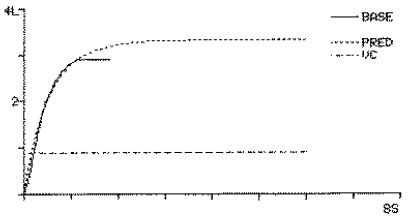
Lung Age = 26 Years.

Interpretation: Normal Spirometry.

Flow/Volume



Volume/Time



Normal Values: ECCS (adult):
Zapletal,Solymar,Cogswell [redacted]

Results at BTPS

Technician: .....

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NHS
Forth Valley

CLINICAL [redacted] & NHS PSYCHOLOGICAL THERAPIES

REFERRAL FORM

HMP & YOI Polmont, HMP Glenochil and HMP & YOI Cornton Vale

Prisoner Details

NAME	Georgina Smith		
SPIN	131344	EDL	
[redacted]	Peebles NTE	CELL	
DOB	4/12/91		
INDEX OFFENCE	Culpable homicide		

Reason for referral, please give a brief description of current difficulties, impact on current functioning etc.

Diagnosed Emotionally unstable personality disorder and anxiety disorder. Sentenced to 12 years in 2014, remanded since 2013. Has recently completed SPS programmes with Forensic [redacted] Mahoney. [redacted] has had difficulty with these sessions and at times has viewed them negatively and punitively. [redacted] has been victim of [redacted] abuse and [redacted] assaults. Has previously attended [redacted] as a witness for same and struggles to deal with these. No current thoughts of suicide/self [redacted] gardens party and ICP in the prison receiving positive reports. Is under the care of [redacted] and is currently prescribed pregabalin.

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	YES	NO
Have they consented to the referral?	yes	
Has a MH assessment been completed?	yes	
Do they have ongoing contact with the MH Team?	yes	
Are they currently engaging in psychological interventions with anyone else? If so, who? (including programmes to address criminogenic needs)	no	
Any current Risks e.g Talk 2 Me, ongoing substance misuse, violence?	no	

Referrer Details

Name:	Sylvia Barclay
Designation:	Mental Health Nurse
Date:	26/5/18

(For Completion by Clinical [redacted] Team)

☑ Highly Specialist assessment & formulation
☐ Assessment of suitability for [redacted] psychological intervention
☐ Case Consultation
☐ Neuropsychological Assessment
☐ Referral not appropriate
☐ Signposting to other services

Processed by:	Date:	Database Updated?
[redacted]	25/5/18	✓

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NHS
Forth Valley

CLINICAL [redacted] & NHS PSYCHOLOGICAL THERAPIES

REFERRAL FORM

HMP & YOI Polmont, HMP Glenochil and HMP & YOI Cortonvale

Prisoner Details

NAME	Georgina Smith		
SPIN	131344	EDL	
[redacted]	Peebles NTE	CELL	
DOB	4/12/91		
INDEX OFFENCE	Culpable homicide		

Reason for referral, please give a brief description of current difficulties, impact on current functioning etc.	Diagnosed Emotionally unstable personality disorder and anxiety disorder. Sentenced to 12 years in 2014, remanded since 2013. Has recently completed SPS programmes with Forensic [redacted] Mahoney. [redacted] has had difficulty with these sessions and at times has viewed them negatively and punitively. [redacted] has been victim of [redacted] abuse and [redacted] assaults. Has previously attended [redacted] as a witness for same and struggles to deal with these. No current thoughts of suicide/self [redacted] gardens party and ICP in the prison receiving positive reports. Is under the care of [redacted] and is currently prescribed pregabalin.

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	YES	NO
Have they consented to the referral?	yes	
Has a MH assessment been completed?	yes	
Do they have ongoing contact with the MH Team?	yes	
Are they currently engaging in psychological interventions with anyone else? If so, who? (including programmes to address criminogenic needs)	no	
Any current Risks e.g Talk 2 Me, ongoing substance misuse, violence?	no	

Referrer Details

Name:	Sylvia Barclay
Designation:	Mental Health Nurse
Date:	26/5/18

(For Completion by Clinical [redacted] Team)

☑ Highly Specialist assessment & formulation
☐ Assessment of suitability for [redacted] psychological intervention
☐ Case Consultation
☐ Neuropsychological Assessment
☐ Referral not appropriate
☐ Signposting to other services

Processed by:	Date:	Database Updated?
[redacted]	25/5/18	✓

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[redacted]

RADIOLOGY DEPARTMENT REFERRAL FORM
FORTH VALLEY ACUTE HOSPITAL

NHS Forth Valley

ALL YELLOW PARTS OF THIS FORM MUST BE COMPLETED BY THE REFERRER
ONLY a registered health professional who has been entitled by FVHB MUST complete the yellow boxes of this request card

PATIENT DETAILS

CHI: C [redacted] 0412913127
NAME: SMITH, GEORGINA
ADDRESS: 04/12/1991 F, P.O. Box 21616, Stirling, FK7 1DW
Dr Craig Sayers, HMP Cornton Vale, 4043816
POST CODE:
PHONE NUMBER: 01786 835335

For Contrast Exams ONLY

Serum Creatinine		
eGFR		
Diabetic	Yes	No
Asthma	Yes	No

Allergies (give details)

Transport (Please tick)

Amb		Bed	
Walk		Oxygen	
Chair		Drip	
Trolley		Mobile	

Previous reaction to contrast: Yes / No

FEMALES 12 - 55 ONLY

Is patient [redacted] YES / NO (NO) — Breast Feeding: Yes / No (No)

INFECTION RISKS

MRSA		c.diff		Other	
Yes	No	Yes	No	Yes	No

CLINICAL DETAILS — What questions should this examination answer?

R IF PA[redacted] FOR COURSE OF MONTHS
PAST DUODENAL CYSTS. USS TO ASSESS
PLEASE - ? DUODENAL CYST OR PELVIC
PATHOLOGY. TEXPT (2) AT [redacted] ON EXAMINATION

EXAMINATION REQUESTED

When requesting an MRI exam the questionnaire overleaf MUST also be completed

PELVIC ULTRASOUND SCAN.

REFERRER'S PRIORITY: URGENT / ROUTINE (✓)

Patient Location: CORNTON UNIT.

Cons or GP Name: DR K ROXBURGH

NAME OF REFERRER (BLOCK PRINT): DR K ROXBURGH

REFERRER'S SIGNATURE

PAGER No.

DATE 21/6/18

PLEASE CIRCLE STATUS: CONS REG SHO Fy2 Fy1 GP ENP AHP

AREA BELOW THIS LINE IS FOR THE USE OF THE RADIOLOGY DEPARTMENT ONLY

Prep required

SCANNED + enquiry 22 JUN 2018

Appointment date
1st rebook
2nd rebook
Date rec'd SRI
Date rec'd FDRI

Patient informed of prep	Yes / No	Signature	Date
Ward informed of prep	Yes / No		

Justified by Entitled Practitioner — OR — Authorised by Entitled Operator
Patient's ID checked prior to exposure
Practitioner's signature | Operator's signature | Signature of operator & method of ID used**

**To be completed by the person(s) who initiates the exposure

[redacted] Yes / No — Breast feeding Yes / No — Pregnancy / breast feeding status noted
Patient's signature — Date — Operator's signature**

[redacted] of LMP
Observe pregnancy 10-Day rule (For high dose procedure only) Yes / No — Date

DAP/Exposure factors or activity	Room Number SRI	Room Number FDRI	Prescription record				Other information
			Drug		Route		
			Person Injecting		Contrast type		
	Screening Time						
	CTDI		Designation		Batch no.		
					Use by		
	DLP		Isotope type		Time given		
					Date given		

GP Open Access Times - FDRI (Mon, Wed, Thurs & Fri) 8.30am until 4.30pm
- SRI (Monday to Friday) - 9.00am until 12.30pm & 2.00pm until 4.30pm

INC1461 VER1 11/09

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RADIOLOGY DEPARTMENT REFERRAL FORM
FORTH VALLEY ACUTE HOSPITAL

NHS Forth Valley

ALL YELLOW PARTS OF THIS FORM MUST BE COMPLETED BY THE REFERRER
ONLY a registered health professional who has been entitled by FVHB MUST complete the yellow boxes of this request card

PATIENT DETAILS

CHI: C [redacted] 0412913127
NAME: SMITH, GEORGINA
ADDRESS: 04/12/1991 F, P.O. Box 21616, Stirling, FK7 1DW
Dr Craig Sayers, HMP Cornton Vale, 4043816
POST CODE:
PHONE NUMBER: 01786 835335

For Contrast Exams ONLY
Serum Creatinine
eGFR
Diabetic: Yes / No
Asthma: Yes / No

Allergies (give details)

Transport (Please tick)

Amb		Bed	
Walk		Oxygen	
Chair		Drip	
Trolley		Mobile	

Previous reaction to contrast: Yes / No

FEMALES 12 - 55 ONLY

Is patient [redacted] YES / NO (NO) — Breast Feeding: Yes / No (No)

INFECTION RISKS

MRSA		c.diff		Other	
Yes	No	Yes	No	Yes	No

CLINICAL DETAILS — What questions should this examination answer?

R IF P[redacted] FOR COURSE OF MONTHS
PAST OUTRUN COSTS. USS TO ASSESS
PLEASE - ? OUTRUN COST OF PELVIC
PATHOLOGY. TERM (12) AT [redacted] ON EXAMINATION

EXAMINATION REQUESTED

When requesting an MRI exam the questionnaire overleaf MUST also be completed

PELVIC ULTRASOUND SCAN.

REFERRER'S PRIORITY
URGENT
ROUTINE ✓

Patient Location: CORNTON UNIT.

Cons or GP Name: DR K ROXBURGH

NAME OF REFERRER
BLOCK PRINT: DR K ROXBURGH

REFERRER'S SIGNATURE

PAGER No.

DATE 21/6/18

PLEASE CIRCLE STATUS: CONS REG SHO Fy2 Fy1 GP ENP AHP

AREA BELOW THIS LINE IS FOR THE USE OF THE RADIOLOGY DEPARTMENT ONLY

Prep required

SCANNED + enquiry 22 JUN 2018

Appointment date
1st rebook
2nd rebook
Date rec'd SRI
Date rec'd FDRI

Patient informed of prep: Yes / No — Signature — Date
Ward informed of prep: Yes / No
Justified by Entitled Practitioner — OR — Authorised by Entitled Operator
Practitioner's signature — Operator's signature
Patient's ID checked prior to exposure
Signature of operator & method of ID used**

**To be completed by the person(s) who initiates the exposure

[redacted] Yes / No — Breast feeding Yes / No — Pregnancy / breast feeding status noted
Patient's signature — Date — Operator's signature**

[redacted] of LMP
Observe pregnancy 10-Day rule (For high dose procedure only): Yes / No — Date

DAP/Exposure factors or activity	Room Number SRI	Room Number FDRI	Prescription record				Other information
			Drug		Route		
			Person Injecting		Contrast type		
	Screening Time				Batch no.		
	CTDI		Designation		Use by		
	DLP		Isotope type		Time given		
					Date given		

GP Open Access Times - FDRI (Mon, Wed, Thurs & Fri) 8.30am until 4.30pm
- SRI (Monday to Friday) - 9.00am until 12.30pm & 2.00pm until 4.30pm

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G. Smith. Session 1 25/6/18.

core

CORE - 10

Site ID | letters only | numbers only | **Client ID** | Therapist ID | numbers only (1) | numbers only (2) | **Sub codes** | **Date form given** D D / M M / Y Y Y Y

Age | **Male** | **Female**

Stage Completed
S Screening
R Referral
A Assessment
F First Therapy Session
P Pre-therapy (unspecified)
D During Therapy
L Last Therapy Session
X Follow up 1
Y Follow up 2

Stage | Episode

IMPORTANT – PLEASE [redacted] THIS FIRST
This form has 10 statements about how you have been OVER THE LAST WEEK.
Please [redacted] each statement and think how often you felt that way last week.
Then tick the box which is closest to this.
Please use a dark pen (not pencil) and tick clearly within the boxes.

Over the last week

		Not at all	Only Occasionally	Sometimes	Often	Most or all the time
1	I have felt tense, anxious or nervous	0	1	2	✓ 3	4
2	I have felt I have someone to turn to for support when needed	4	✓ 3	2	1	0
3	I have felt able to cope when things go wrong	4	✓ 3	2	1	0
4	Talking to people has felt too much for me	0	1	✓ 2	3	4
5	I have felt panic or terror	0	✓ 1	2	3	4
6	I made plans to end my life	✓ 0	1	2	3	4
7	I have had difficulty getting to sleep or staying asleep	0	1	2	3	✓ 4
8	I have felt despairing or hopeless	0	1	✓ 2	3	4
9	I have felt unhappy	0	1	✓ 2	3	4
10	Unwanted images or memories have been distressing me	0	1	2	3	✓ 4

Total (Clinical Score*) 24

* **Procedure**: Add together the item scores, then divide by the number of questions completed to get the mean score, then multiply by 10 to get the Clinical Score.

Quick method for the CORE-10 (if all items completed): Add together the item scores to get the Clinical Score.

THANK YOU FOR YOUR TIME IN COMPLETING THIS QUESTIONNAIRE

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Georgia Smith
25/06/18
Session 1

PSYCHOLOGICAL THERAPIES SERVICE

MINIMUM DATA SET OPTIONS

Global Rating Scales

Clinical Global Impression – Severity (CGI-S)

The CGI was developed in the mid-1970s as a simple measure for rating severity of illness and also improvement (National Institute of Mental Health, 1976). The CGI is made up of a severity rating (CGI-Severity) and an improvement rating (CGI-Improvement). Both are rated on a 1-7 scale, with similar wording.

The rater is asked: "*Considering **your total clinical experience** with this particular population, how mentally ill is the patient at this time?*"

The items are shown below:
0=Not assessed
1=Normal, not at all ill
②=Borderline mentally ill
3=Mildly ill
4=Moderately ill
5=Markedly ill
6=Severely ill
7=Among the most extremely ill patients

N.B. If patient does not have a mental health diagnosis, consider the presenting problem according to the intensity/severity ratings given according to your clinical experience of that patient group.

Clinical Global Impression – Improvement (CGI-I)

The items are shown below:
0=Not assessed
1=Very much improved
2=Much improved
3=Minimally improved
4=No change
5=Minimally worse
6=Much worse
7=Very much worse

Patient Global Impression – Improvement (PGI-I)

Description
The PGI-I is the same as the CGI-I but is asked to the patient rather than being clinician rated.

The items are shown below:
0=Not assessed
1=Very much improved
2=Much improved
3=Minimally improved
④=No change
5=Minimally worse
6=Much worse
7=Very much worse

Collated by: Dr S [redacted] & [redacted] de Moor Date: April 2017

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Forth Valley Prison
Clinical [redacted] Service

NHS Forth Valley

Consent to Sharing Information

Name: Georgina Smith
DoB: 4.12.91
SPIN: 131344

You have been referred to the NHS Prison Healthcare [redacted] Service. In order to carry out consultation, assessment and treatment, information about you may need to be collected from and shared with a variety of sources. These may include:

- **Medical Files (including community & Prison files; GP, addictions services, psychiatric case notes; [redacted] files).**
- **Social Work Records [redacted] and Family Services; Community Care; Criminal Justice Social Work).**
- **Prison Records (where applicable).**
- **Education Records (Including Residential [redacted]**
- **Community Support Services Records.**
- **Discussion with staff who have been involved in your case.**
- **Armed Forces Records.**
- **Other information (Specify):**
  1.

Important to note

- Information that you give us may be shared within the mental health team and with other agencies, such as SPS, directly involved with your care. This will differ from person to person and our aim is to discuss this with you in advance, wherever possible. Information will be given out on a need to know basis only.
- As well as a duty to you, our patient, the NHS has a wider duty of protection to the general public. We are required to pass on information if there are serious [redacted] about risk to yourself or others.
- If you are subject to MAPPA conditions then information is automatically shared between agencies.

I have read/had this explained to me and give my consent to the above (please tick) ☑

Name...Georgina Smith.....
Signed...G. Smith.....
Witness Name...Jessa Bratton.....
Signed...[signature].....
Designation...Forensic Clinical Psychologist
Date.....25/6/18.....

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NHS Confidential: Personal data about a patient

Forth Valley Prison
Clinical [redacted] Service

NHS Forth Valley

Consent to Sharing Information

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DoB: 4.12.91
SPIN: 131344

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- If you are subject to MAPPA conditions then information is automatically shared between agencies.

I have read/had this explained to me and give my consent to the above (please tick) ☑

Name...Georgina Smith.
Signed...G. Smith.....

Witness Name...Jessa Bratton...
Signed...J Bratton.....

Designation...Forensic Clinical Psychologist
Date.....25/6/18.....

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Georgia Smith
25/06/18
Session 1

PSYCHOLOGICAL THERAPIES SERVICE

MINIMUM DATA SET OPTIONS

Global Rating Scales

Clinical Global Impression – Severity (CGI-S)

The CGI was developed in the mid-1970s as a simple measure for rating severity of illness and also improvement (National Institute of Mental Health, 1976). The CGI is made up of a severity rating (CGI-Severity) and an improvement rating (CGI-Improvement). Both are rated on a 1-7 scale, with similar wording.

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6=Much worse
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Patient Global Impression – Improvement (PGI-I)

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The PGI-I is the same as the CGI-I but is asked to the patient rather than being clinician rated.

The items are shown below:
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1=Very much improved
2=Much improved
3=Minimally improved
(4)=No change
5=Minimally worse
6=Much worse
7=Very much worse

Collated by: Dr S [redacted] & [redacted] de Moor Date: April 2017

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G. Smith. Session 1 25/6/18.

core

CORE - 10

Site ID

letters only | numbers only

Client ID

Therapist ID | numbers only (1) | numbers only (2)

Sub codes

Date form given D D / M M / Y Y Y Y

Age

Male

Female

Stage Completed
S Screening
R Referral
A Assessment
F First Therapy Session
P Pre-therapy (unspecified)
D During Therapy
L Last Therapy Session
X Follow up 1
Y Follow up 2

Stage

Episode

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Please [redacted] each statement and think how often you felt that way last week.
Then tick the box which is closest to this.
Please use a dark pen (not pencil) and tick clearly within the boxes.

Over the last week

		Not at all	Only Occasionally	Sometimes	Often	Most or all the time
1	I have felt tense, anxious or nervous	0	1	2	☑ 3	4
2	I have felt I have someone to turn to for support when needed	4	☑ 3	2	1	0
3	I have felt able to cope when things go wrong	4	☑ 3	2	1	0
4	Talking to people has felt too much for me	0	1	☑ 2	3	4
5	I have felt panic or terror	0	☑ 1	2	3	4
6	I made plans to end my life	☑ 0	1	2	3	4
7	I have had difficulty getting to sleep or staying asleep	0	1	2	3	☑ 4
8	I have felt despairing or hopeless	0	1	☑ 2	3	4
9	I have felt unhappy	0	1	☑ 2	3	4
10	Unwanted images or memories have been distressing me	0	1	2	3	☑ 4

Total (Clinical Score*) 24

* **Procedure**: Add together the item scores, then divide by the number of questions completed to get the mean score, then multiply by 10 to get the Clinical Score.

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THANK YOU FOR YOUR TIME IN COMPLETING THIS QUESTIONNAIRE

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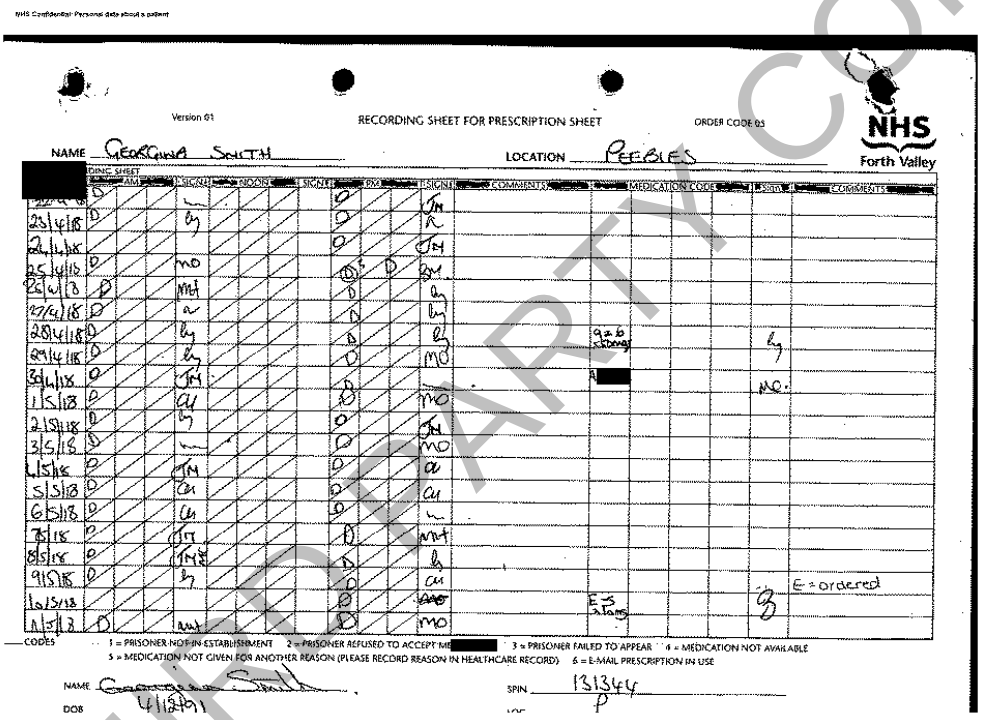

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Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME GEORGINA SMITH

LOCATION PEEBLES

DOSING SHEET

	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	SIGN	COMMENTS
22/4/18	D				O	JM				
23/4/18	D	by			O	JM				
24/4/18					O	JM				
25/4/18	D	mo			D D	JM				
26/4/18	D	MH			D	by				
27/4/18	D	a			D	by				
28/4/18	D	by			D	by		9a b strong		
29/4/18	D	by			D	MO			by	
30/4/18	D	JM			D	JM		A [redacted]	MO.	
1/5/18	D	au			O	MO				
2/5/18	D	by			O	JM				
3/5/18	D				O	MO				
4/5/18	D	JM			O	a				
5/5/18	D	au			O	au				
6/5/18	D	by			O	by				
7/5/18	D	JM			D	MH				
8/5/18	D	JM MH			D	by				
9/5/18	D	by			O	au				E = ordered
10/5/18					D	MO		E 5 strong	3	
11/5/18	D	MH			D	MO				

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT ME [redacted] 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME [redacted]

DOB 6/12/91

SPIN 131344

LOC P

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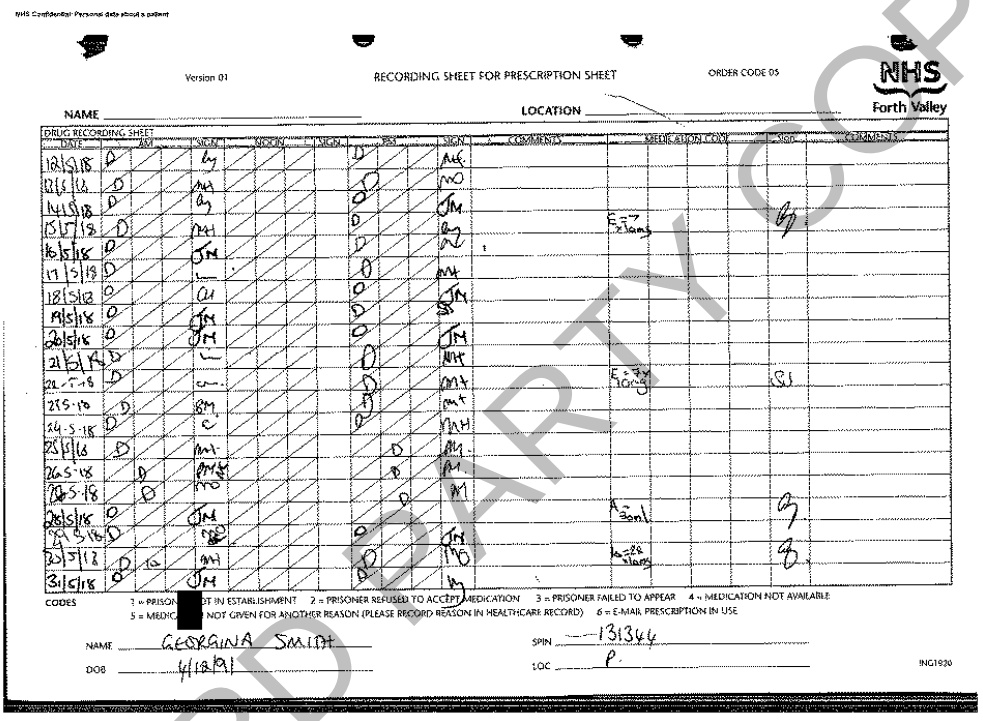

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Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME

LOCATION

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	SIGN	COMMENTS
18/5/18	D	GS			D	AHC				
12/5/18	D	MH			D	MO				
14/5/18	D	GS			D	JM				
15/5/18	D	MH			D	GS		E=7 Xlams	GS	
16/5/18	D	JM			D	MH				
17/5/18	D	[illegible]			D	MH				
18/5/18	D	CH			D	JM				
19/5/18	D	JM			D	SS				
20/5/18	D	JM			D	JM				
21/5/18	D	[illegible]			D	MH				
22/5/18	D	[illegible]			D	MH		E=7x 10mg	RSI	
23/5/18	D	BM			D	mt				
24/5/18	D	C			D	MH				
25/5/18	D	MH			D	MH				
26/5/18	D	MH			D	MH				
27/5/18	D	MO			D	MH				
28/5/18	D	JM			D	JM		A 30ml	GS	
29/5/18	D	[illegible]			D	JM				
30/5/18	D	MH			D	JM TMO		h=20 Xlams	GS	
31/5/18	D	JM			D	GS				

CODES 1 = PRISON[illegible]ET IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDIC[illegible] NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME GEORGINA SMITH

DOB 4/12/91

CHI [illegible]

SPIN 131366

LOC P.

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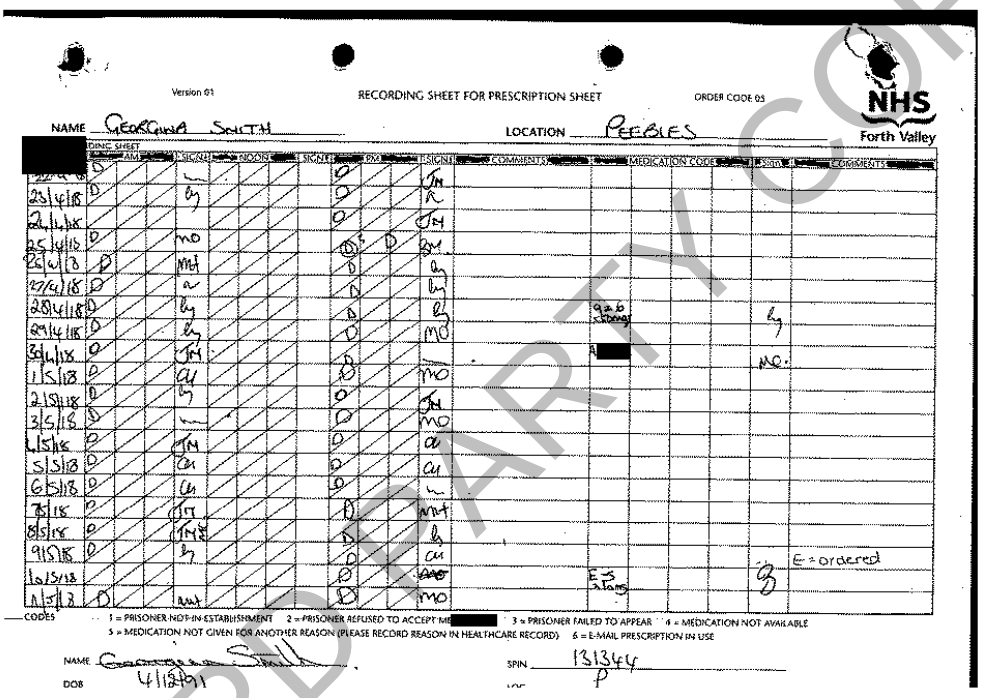

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME GEORGINA SMITH

LOCATION PEEBLES

DOSING SHEET

	SIGN AM	SIGN NOON	SIGN PM	SIGN	COMMENTS	MEDICATION CODE	INITIALS	COMMENTS
22/4/18	D	by	O	JM				
23/4/18	D	by	O	JM				
24/4/18	D		O	JM				
25/4/18	D	mo	D D	JM				
26/4/18	D	MM	D	by				
27/4/18	D	a	D	by				
28/4/18	D	by	D	by		9a6 strong		
29/4/18	D	by	D	MO			by	
30/4/18	D	JM	D	MO		[redacted]	MO.	
1/5/18	D	au	D	MO				
2/5/18	D	by	O	JM				
3/5/18	D		O	MO				
4/5/18	D	JM	O	au				
5/5/18	D	au	O	au				
6/5/18	D	by	O					
7/5/18	D	JM	D	MM				
8/5/18	D	JM	D	by				
9/5/18	D	by	D	au				E = ordered
10/5/18			D	~~MO~~		E3 10mg	8	
11/5/18	D	MM	D	MO				

CODES 1 = PRISONER NOT-IN-ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT ME[redacted] 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME [redacted]

DOB 4/12/91

SPIN 131344

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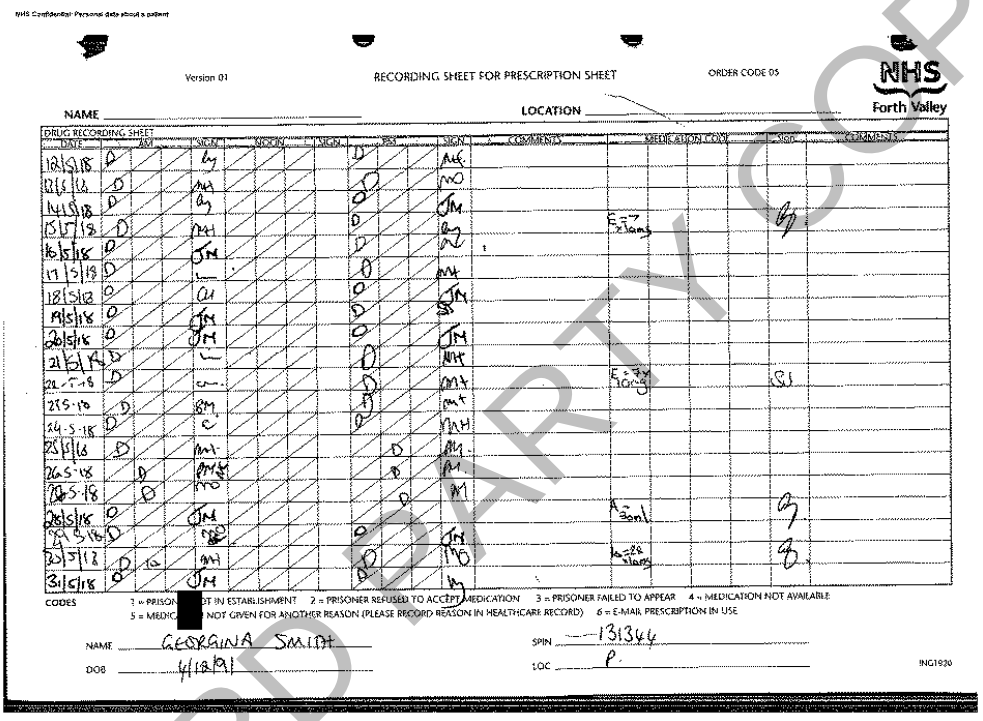

NHS Confidential Personal data about a patient

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME

LOCATION

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CONT.	SIGN	COMMENTS
12/5/18	D	GS			D	AHC				
13/5/18	D	MH			D	MO				
14/5/18	D	GS			D	JM				
15/5/18	D	MH			D	GS		E=7 Xlams	GS	
16/5/18	D	JM			D	MH				
17/5/18	D	—			D	MH				
18/5/18	D	CH			D	JM				
19/5/18	D	JM			D	SS				
20/5/18	D	JM			D	JM				
21/5/18	D	—			D	MH				
22/5/18	D	—			D	MH		E=7X 10mg	RSI	
23/5/18	D	SM C			D	MH				
24/5/18	D	MH			D	MH				
25/5/18	D	MH			D	MH				
26/5/18	D	MH			D	MH				
27/5/18	D	MO			D	MH				
28/5/18	D	JM			D	MH		A 30ml	GS	
29/5/18	D	GS			D	JM TMO				
30/5/18	D	MH			D	MH		h=20 Xlams	GS	
31/5/18	D	JM			D	GS				

CODES 1 = PRISON[redacted]ET IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDIC[redacted] NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME GEORGINA SMITH

DOB 4/12/91

CHI 1313446

LOC P.

ING1930

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NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

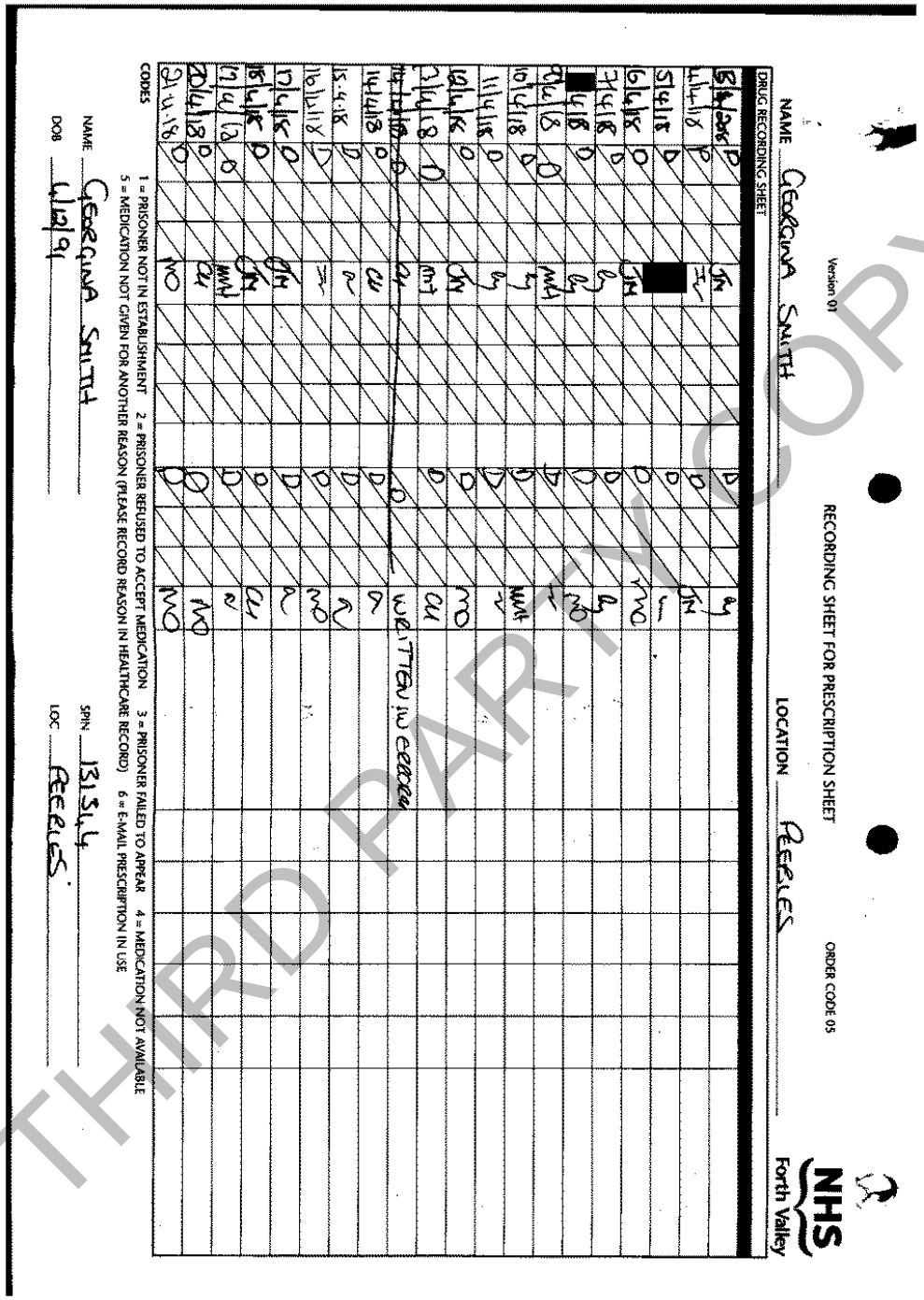
Version 01

ORDER CODE 05

NAME _____ LOCATION _____

DRUG RECORDING SHEET

| | | |



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Version 01

NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

NAME Georgina Smith LOCATION Reebles ORDER CODE 05

DRUG RECORDING SHEET

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith SPIN 131314

DOB 1/01/91 LOC Reebles

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NHS Forth Valley

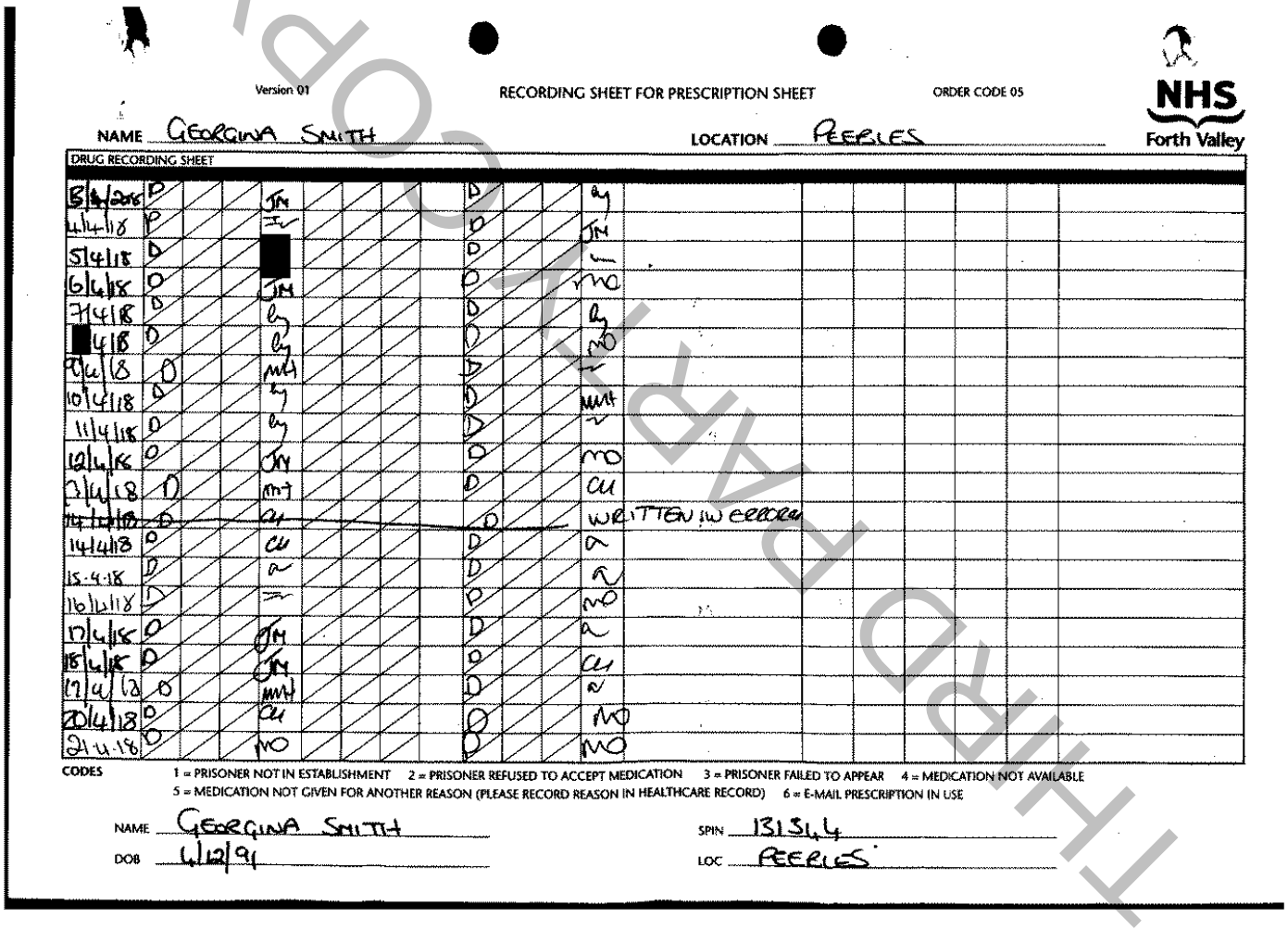
RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

NAME _____ LOCATION _____ ORDER CODE 05

DRUG RECORDING SHEET

| | | |



Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME GEORGINA SMITH

LOCATION FEERLES

DRUG RECORDING SHEET

| | | |

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA | UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: H M PRISON,, CORNTON VALE,
CONSULTANT: Dr Craig Sayers | DOB: 04/12/1991 | SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: Prison Medical Officer, HMP & YOI Cornton Vale | SAMPLE TYPE OF LATEST SPECIMEN: Serum
CLINICAL DETAILS REFERRING TO LATEST REQUEST: ? CA DEFICIENCY | COPY DETAILS:

DATE OF COLLECTION	LABORATORY NUMBER	TIME OF COLLECTION	PLASMA GLUCOSE fasting 3.6 mmol/l	BLOOD GAS Specimen type	[H+] 36-43 nmol/l	pCO_2 4.6-6.0 kPa	CALCULATED BICARBONATE 20-28 mmol/l	pO_2 10.5-13.5 kPa	INSPIRED OXYGEN %
24/09/13	825463S	NS	4.5						
02/05/17	852398R	13.40	5.8						

DATE OF COLLECTION	LABORATORY NUMBER	Total CO_2 22-29 mmol/l	OSMOLALITY 275-295 mosm/kg H_2O	SODIUM 133-146 mmol/l	POTASSIUM 3.5-5.3 mmol/l	CHLORIDE 95-108 mmol/l	UREA 2.5-7.8 mmol/l	CREATININE 40-130 µmol/l	eGFR ml/min/1.73m2 <60 = CKD stage 3,4 or 5
24/09/13	825464G			139	4.7	108	3.4	69	>59
26/11/13	195651C			140	4.6	108	2.1	68	>59
18/11/15	183986G			138	4.2	105	2.9	75	>59
01/06/16	282141N			133	HAEM	105	2.8	56	>59
02/05/17	852399R			139	4.1	108	2.5	67	>59
11/07/18	246913F			139	4.8	109	3.0	59	>59

DATE OF COLLECTION	LABORATORY NUMBER	AMYLASE up to 100 iu/l 37°C	AST 0-45 iu/l 37°C	ALT 0-55 iu/l 37°C	BILIRUBIN up to 21 µmol/l	TOTAL PROTEIN 60-80 g/l	ALBUMIN 35-50 g/l	ALKALINE PHOSPHATASE 30 - 130) iu/l 37°C	γGT 0-40 (female) iu/l 37°C
24/09/13	825464G		17	19	11	69	44	86	
26/11/13	195651C		12	14	6	65	41	77	
18/11/15	183986G		18	17	8	70	43	98	
02/05/17	852399R		27	27	6	68	42	89	
11/07/18	246913F		19	19	8	69	43	86	

DATE OF COLLECTION	LABORATORY NUMBER	IRON 10-30 µmol/l	TIBC 45-72 µmol/l	CALCIUM 2.2-2.60 mmol/l	CORRECTED CALCIUM 2.2-2.60 mmol/l	PHOSPHATE 0.8-1.50 mmol/l (12-60 years)	MAGNESIUM 0.7-1.0 mmol/l	URATE 140-360 (female) µmol/l	CK(Total) 25-200 (female) iu/l 37°C
11/07/18	246913F			2.30	2.34	1.32			

DATE OF COLLECTION	LABORATORY NUMBER	T S H 0.35-5.00 mu/l	FREE T4 9.0-21.0 pmol/l	FREE T3 3.0-6.0 pmol/l	PSA <4.0 µg/L	TRIGLYCERIDE fasting <2.0 mmol/l	CHOLESTEROL mmol/l (target levels are risk dependent	H.D.L. >1.2 (female) mmol/l	L.D.L. mmol/l (target levels are risk dependent
24/09/13	825464G	0.83	14.9						

18/11/15	183986G	C-Reactive Prot. **<5** mg/l
02/05/17	852399R	C-Reactive Prot. **<5** mg/l
11/07/18	**246913F**	Alk. Phosphatase ALP Ref. Limit for patients <30 days old is 0-380 iu/L ALP Ref. Limit for patients <17 years old is 0-425 iu/L ALP Ref. Limit for adults (>17 years) is 0-130 iu/L.

NORMAL
17.7.18

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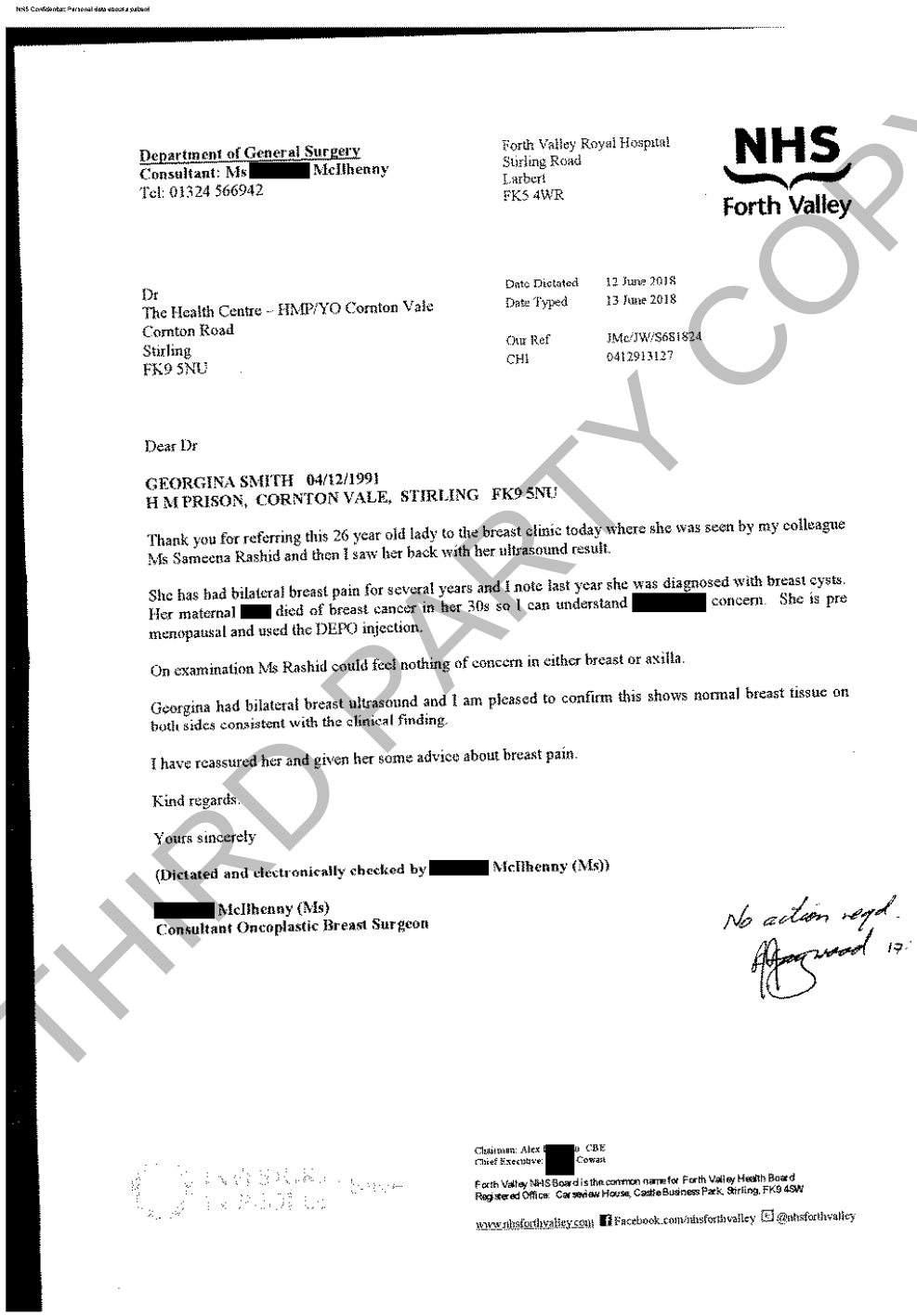

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Department of General Surgery
Consultant: Ms [redacted] McIlhenny
Tel: 01324 566942

Forth Valley Royal Hospital
Stirling Road
Larbert
FK5 4WR

NHS Forth Valley

Dr
The Health Centre – HMP/YO Cornton Vale
Cornton Road
Stirling
FK9 5NU

Date Dictated 12 June 2018
Date Typed 13 June 2018

Our Ref JMc/JW/S681824
CHI 0412913127

Dear Dr

GEORGINA SMITH 04/12/1991
H M PRISON, CORNTON VALE, STIRLING FK9 5NU

Thank you for referring this 26 year old lady to the breast clinic today where she was seen by my colleague Ms Sameena Rashid and then I saw her back with her ultrasound result.

She has had bilateral breast pain for several years and I note last year she was diagnosed with breast cysts. Her maternal [redacted] died of breast cancer in her 30s so I can understand [redacted] concern. She is pre menopausal and used the DEPO injection.

On examination Ms Rashid could feel nothing of concern in either breast or axilla.

Georgina had bilateral breast ultrasound and I am pleased to confirm this shows normal breast tissue on both sides consistent with the clinical finding.

I have reassured her and given her some advice about breast pain.

Kind regards.

Yours sincerely

(Dictated and electronically checked by [redacted] McIlhenny (Ms))

[redacted] McIlhenny (Ms)
Consultant Oncoplastic Breast Surgeon

No action reqd.
[redacted] 17.

Chairman: Alex [redacted] CBE
Chief Executive: [redacted] Cowan

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Department of General Surgery
Consultant: Ms [redacted] McIlhenny
Tel: 01324 566942

Forth Valley Royal Hospital
Stirling Road
Larbert
FK5 4WR

NHS Forth Valley

Dr
The Health Centre – HMP/YO Cornton Vale
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Consultant Oncoplastic Breast Surgeon

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[redacted] 17.

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA | UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: H M PRISON,, CORNTON VALE,
CONSULTANT: Dr Craig Sayers | DOB: 04/12/1991 | SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: Prison Medical Officer, HMP & YOI Cornton Vale | SAMPLE TYPE OF LATEST SPECIMEN: Serum
CLINICAL DETAILS REFERRING TO LATEST REQUEST: ? CA DEFICIENCY | COPY DETAILS:

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02/05/17	852399R		27	27	6	68	42	89	
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11/07/18	**246913F**	Alk. Phosphatase ALP Ref. Limit for patients <30 days old is 0-380 iu/L ALP Ref. Limit for patients <17 years old is 0-425 iu/L ALP Ref. Limit for adults (>17 years) is 0-130 iu/L.

NORMAL
17.7.18

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X-RAY DEPARTMENT REFERRAL FORM
FORTH VALLEY HOSPITALS

NHS Forth Valley

ALL YELLOW SECTIONS OF THIS FORM MUST BE COMPLETED BY THE REFERRER. INCOMPLETE FORMS WILL BE RETURNED TO THE REFERRER.
ONLY a Registered Health Professional who has been entitled by NHS Forth Valley MUST complete the yellow boxes on this Request Form

PATIENT DETAILS

CHI/DOB: 0412913127
Name: SMITH, [redacted]
Address: 04/12/1991 F
P.O. Box 21616
Stirling
FK7 1DW
Dr Craig Sayers 4043816
HMP Glenochil
Post Code
Phone Number

~~Consultant~~/GP: DR SAYERS
Ward/Dept: HMP CORNTON VALE
Priority: Routine ✓ / Urgent
Copy to:

For contrast examinations:
Creatinine
Egfr & Date:
Asthma Yes / No
Diabetes Yes / No
Chair / Oxygen
Trolley / Drip
Is the patient fit for Picolax? Yes / No

EXAMINATION REQUESTED:
X-RAY RIGHT HIP PLEASE.

Allergies or Previous Contrast reaction (Give Details)

CLINICAL DETAILS: What questions should this examination answer?
SEVERAL [redacted] Hx OF ↑ PAIN (R) HIP WITH REDUCED ROM AND CREPITUS +++. 26 YR OLD LADY WITH NO RECENT TRAUMA BUT PHYSICAL TRAUMA THROUGHOUT CHILDHOOD. ALSO BEING CHECKED FOR RA (BLOODS) AS SHE POSSIBLY HAS RHEUMATOID NODULES.

Name	Signature	Designation & Pager No.	Date:
J. KHAN	[signature]	GP	13/7/18.

AREA BELOW THIS LINE IS FOR USE BY THE RADIOLOGY DEPARTMENT ONLY

Prep required	Appointment date
	1st rebook
	2nd rebook
Patient informed of prep: Yes / No — Signature — Date	Date rec'd SRI
Ward informed of prep: Yes / No	Date rec'd FDRI
Justified by Entitled Practitioner: OR — Authorised by Entitled Operator	Patient's ID checked prior to exposure
Practitioner's signature — Operator's signature	Signature of operator & method of ID used**

**To be completed by the person(s) who [redacted] the exposure

Pregnant Yes / No — Breast feeding Yes / No	Pregnancy / breast feeding status noted
Patient's signature — Date	Operator's signature**
Date of LMP — Observe pregnancy 10-Day [redacted] (For high dose procedure only) Yes / No	Date

DAP/Exposure factors or activity	Room Number SRI	Room Number FDRI	Prescription record				Other Information
			Drug		Route		
	Screening Time		Person injecting		Contrast type		
	CTDI		Designation		Batch no.		
	DLP		Isotope type		Use by		
					Time given		
					Date given		

GP Open Access Times - FVRH (Mon to Fri) 8.30am until 4.30pm
Please note that the X-Ray Dept is approx. a 5 minute walk from the Main Entrance at FVRH
SCH (Mon to Fri) - 9.15am until 12.30pm & 2.00pm until 4.30pm

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X-RAY DEPARTMENT REFERRAL FORM
FORTH VALLEY HOSPITALS

NHS Forth Valley

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ONLY a Registered Health Professional who has been entitled by NHS Forth Valley MUST complete the yellow boxes on this Request Form

PATIENT DETAILS

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Name: SMITH, [redacted]
Address: 04/12/1991 F
P.O. Box 21616
Stirling
FK7 1DW
Dr Craig Sayers 4043816
HMP Glenochil
Post Code
Phone Number

~~Consultant~~/GP: DR SAYERS
Ward/Dept: HMP CORNTON VALE
Priority: Routine ✓ / Urgent
Copy to:

For contrast examinations:
Creatinine
Egfr & Date:
Asthma Yes / No
Diabetes Yes / No
Chair / Oxygen
Trolley / Drip
Is the patient fit for Picolax? Yes / No

EXAMINATION REQUESTED:
X-RAY RIGHT HIP PLEASE.

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SEVERAL [redacted] Hx OF ↑ PAIN (R) HIP WITH REDUCED ROM AND CREPITUS +++. 26 YR OLD LADY WITH NO RECENT TRAUMA BUT PHYSICAL TRAUMA THROUGHOUT CHILDHOOD. ALSO BEING CHECKED FOR RA (BLOODS) AS SHE POSSIBLY HAS RHEUMATOID NODULES.

Name	Signature	Designation & Pager No.	Date:
J. KHAN	[signature]	GP	13/7/18.

AREA BELOW THIS LINE IS FOR USE BY THE RADIOLOGY DEPARTMENT ONLY

Prep required	Appointment date
	1st rebook
	2nd rebook
Patient informed of prep: Yes / No — Signature — Date	Date rec'd SRI
Ward informed of prep: Yes / No	Date rec'd FDRI
Justified by Entitled Practitioner — OR — Authorised by Entitled Operator	Patient's ID checked prior to exposure
Practitioner's signature — Operator's signature	Signature of operator & method of ID used**

**To be completed by the person(s) who [redacted] the exposure

Pregnant Yes / No — Breast feeding Yes / No	Pregnancy / breast feeding status noted
Patient's signature — Date	Operator's signature**
Date of LMP — Observe pregnancy 10-Day [redacted] (For high dose procedure only) Yes / No	Date

DAP/Exposure factors or activity	Room Number: SRI / FDRI	Prescription record	Other Information
		Drug — Route	
	Screening Time	Person injecting — Contrast type	
	CTDI	Designation — Batch no.	
			Use by
	DLP	Isotope type	Time given
			Date given

GP Open Access Times - FVRH (Mon to Fri) 8.30am until 4.30pm
Please note that the X-Ray Dept is approx. a 5 minute walk from the Main Entrance at FVRH
SCH (Mon to Fri) - 9.15am until 12.30pm & 2.00pm until 4.30pm

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NHS Forth Valley Haematology

NHS Forth Valley

Patient		Patient Ref. Number	
SMITH, GEORGINA H M PRISON, CORNTON VALE,		0412913127	
		Date Of Birth 04/12/1991	Sex F
Doctor/Location	Consultant/GP	Date/Time Specimen Received	
HMP & YOI Cornton Vale Prison Medical Officer	Dr [redacted] Sayers	13/07/2018 15:56	

Clinical Data: No Clinical Details Given

Haemoglobin A1c %	Rheumatoid Factor	Rheumaton Titre	Monospot	
	Undetect			
Vitamin B12 ng/L	**Serum Folate ug/L**	**Red Cell Folate ug/L**	**Serum Ferritin ug/L**	**Intrinsic Factor Antibody**

Investigation	Laboratory Number	Collection Date	Collection Time	Report Date/Time
Immunology	002401	13/07/2018	10:25	**16/07/2018 15:28**

No action reqd
GP Locum

Reference Ranges For Vit[redacted]n B12, Serum Folate, Red Cell Folate and Ferritin

		MALE	FEMALE
Vitamin B12 (ng /L)		180 - 900	180 - 900
Serum Folate (ug/L)		2.1 - 14.0	2.1 - 14.0
Red Cell Folate (ug/L)		160 - 640	160 - 640
Serum Ferritin (ug/L)	Age 0-45 years	36 - 225	10 - 65
Serum Ferritin (ug/L)	Age >45 years	42 - 262	24 - 155

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NHS Forth Valley Haematology

NHS Forth Valley

Patient		Patient Ref. Number	
SMITH, GEORGINA H M PRISON, CORNTON VALE,		0412913127	
		Date Of Birth 04/12/1991	Sex F
Doctor/Location	Consultant/GP	Date/Time Specimen Received	
HMP & YOI Cornton Vale Prison Medical Officer	Dr [redacted] Sayers	13/07/2018 15:56	
Clinical Data: No Clinical Details Given			

Haemoglobin A1c %	Rheumatoid Factor	Rheumaton Titre	Monospot	
	Undetect			
Vitamin B12 ng/L	**Serum Folate ug/L**	**Red Cell Folate ug/L**	**Serum Ferritin ug/L**	**Intrinsic Factor Antibody**

Investigation	Laboratory Number	Collection Date	Collection Time	Report Date/Time
Immunology	002401	13/07/2018	10:25	**16/07/2018 15:28**

No action req
GP Locum

Reference Ranges For Vit[redacted]n B12, Serum Folate, Red Cell Folate and Ferritin

		MALE	FEMALE
Vitamin B12 (ng /L)		180 - 900	180 - 900
Serum Folate (ug/L)		2.1 - 14.0	2.1 - 14.0
Red Cell Folate (ug/L)		160 - 640	160 - 640
Serum Ferritin (ug/L)	Age 0-45 years	36 - 225	10 - 65
Serum Ferritin (ug/L)	Age >45 years	42 - 262	24 - 155

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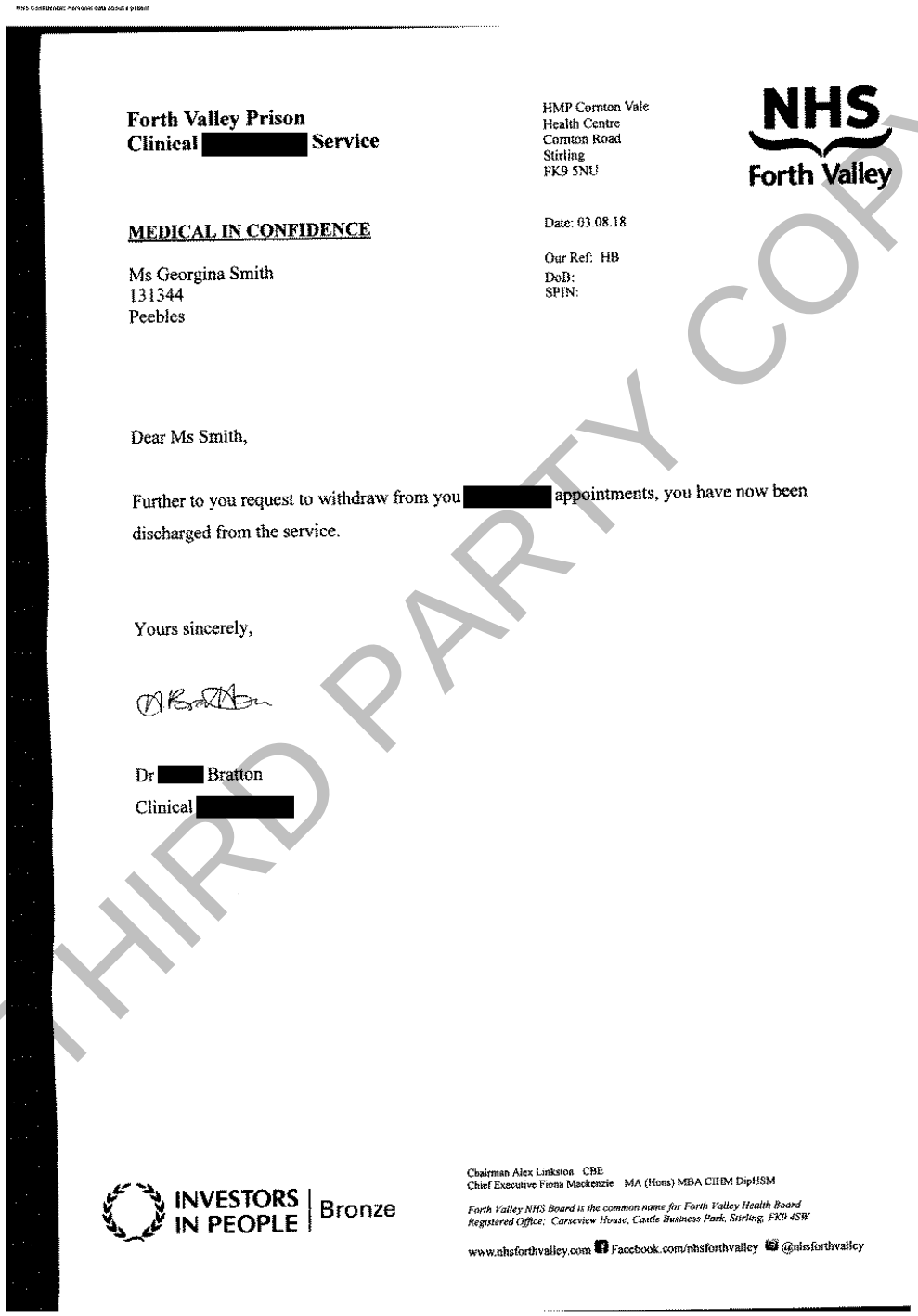

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Forth Valley Prison
Clinical [redacted] Service

HMP Cornton Vale
Health Centre
Cornton Road
Stirling
FK9 5NU

NHS Forth Valley

MEDICAL IN CONFIDENCE

Date: 03.08.18

Our Ref: HB
DoB:
SPIN:

Ms Georgina Smith
131344
Peebles

Dear Ms Smith,

Further to you request to withdraw from you [redacted] appointments, you have now been discharged from the service.

Yours sincerely,

Dr [redacted] Bratton
Clinical [redacted]

INVESTORS IN PEOPLE | Bronze

Chairman Alex Linkston CBE
Chief Executive Fiona Mackenzie MA (Hons) MBA CIHM DipHSM

Forth Valley NHS Board is the common name for Forth Valley Health Board
Registered Office: Carseview House, Castle Business Park, Stirling, FK9 4SW

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Forth Valley Prison
Clinical [redacted] Service

HMP Cornton Vale
Health Centre
Cornton Road
Stirling
FK9 5NU

NHS Forth Valley

MEDICAL IN CONFIDENCE

Date: 03.08.18

Our Ref: HB
DoB:
SPIN:

Ms Georgina Smith
131344
Peebles

Dear Ms Smith,

Further to you request to withdraw from you [redacted] appointments, you have now been discharged from the service.

Yours sincerely,

Dr [redacted] Bratton
Clinical [redacted]

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INVESTORS IN PEOPLE | Bronze

Chairman Alex Linkston CBE
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NHS Forth Valley

RADIOLOGY REPORT- Stirling Community Hospital

CHI NUMBER: 0412913127 **Examination Number:** 33764069

Name: SMITH, GEORGINA DOB: 04/12/1991

Address: H M Prison, Cornton Vale, Stirling, -- **CC:** -

Examination: US Pelvis (Transabdominal), US Pelvis (Transvaginal)

Examination Date: 30/07/2018 **Examination Time:** 14:30

Dictating Radiologist: KAROLYN MCPHERSON S/GRPHR HCPC ID RA27556

Typed by: None

Referring Consultant: ROXBURGH DR K [redacted] HEALTH

Referring Department / Location: CORNTON VALE PRISON

RIF pain? Ovarian.

Transabdominal and transvaginal scans performed after obtaining witnessed verbal consent chaperoned by [redacted] Dodds.

No periods for over a year.

Retroverted uterus which appears within normal limits. Ovaries appear within normal limits.

Conclusion:
No adnexal masses or cysts.

Scanned by DrSidikki

Examination Date: 30/07/2018
Examination: US Pelvis (Transabdominal), US Pelvis (Transvaginal)
Date Reported: 30/07/2018
Dictating Radiologist / Clinical Specialist By KAROLYN MCPHERSON S/GRPHR HCPC ID RA27556

Verified by: KAROLYN MCPHERSON S/GRPHR HCPC ID RA27556 on 30/07/2018

Page 1 of 1

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NHS Forth Valley

RADIOLOGY REPORT- Stirling Community Hospital

CHI NUMBER: 0412913127 **Examination Number:** 33764069

Name: SMITH, GEORGINA DOB: 04/12/1991

Address: H M Prison, Cornton Vale, Stirling, -- **CC:** -

Examination: US Pelvis (Transabdominal), US Pelvis (Transvaginal)

Examination Date: 30/07/2018 **Examination Time:** 14:30

Dictating Radiologist: KAROLYN MCPHERSON S/GRPHR HCPC ID RA27556

Typed by: None

Referring Consultant: ROXBURGH DR K [redacted] HEALTH

Referring Department / Location: CORNTON VALE PRISON

RIF pain? Ovarian.

Transabdominal and transvaginal scans performed after obtaining witnessed verbal consent chaperoned by [redacted] Dodds.

No periods for over a year.

Retroverted uterus which appears within normal limits. Ovaries appear within normal limits.

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Scanned by DrSidikki

Examination Date: 30/07/2018
Examination: US Pelvis (Transabdominal), US Pelvis (Transvaginal)
Date Reported: 30/07/2018
Dictating Radiologist / Clinical Specialist By KAROLYN MCPHERSON S/GRPHR HCPC ID RA27556

Verified by: KAROLYN MCPHERSON S/GRPHR HCPC ID RA27556 on 30/07/2018

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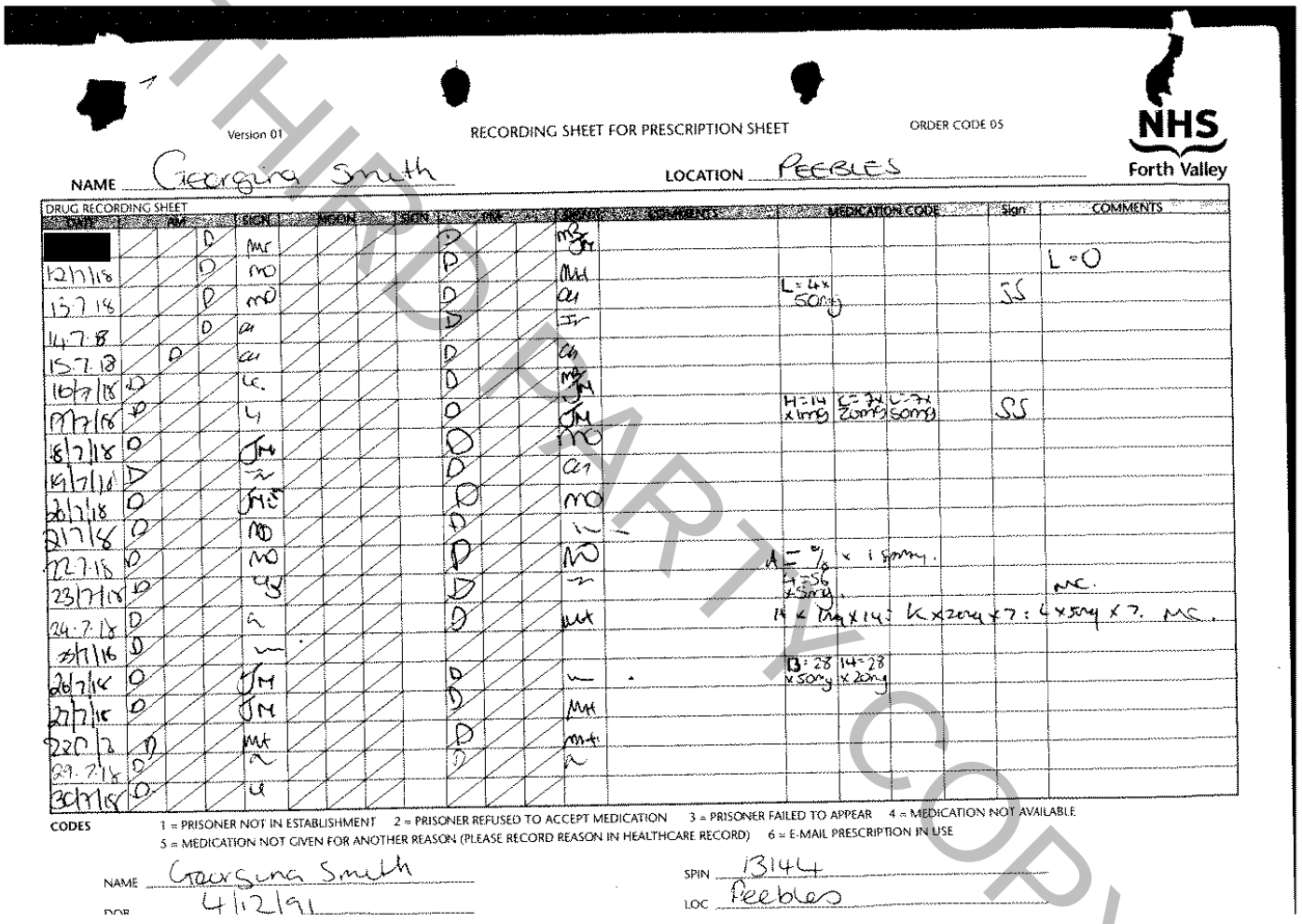

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME Georgina Smith

LOCATION Peebles

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	PAYMENTS	MEDICATION CODE	Sign	COMMENTS
[redacted]		D								
12/7/18		D								L=0
13.7.18		D						L=4x 50mg	JS	
14.7.18		D								
15.7.18	D									
16/7/18	D									
17/7/18	D							H=14 x1mg L=7x 20mg L=7x 50mg	SS	
18/7/18	D									
19/7/18	D									
20/7/18	D									
21/7/18	D									
22.7.18	D							H=½ x 1spray. H=56 +5mg.		
23/7/18	D									MC.
24.7.18	D							14 x 1mg x 14; 6 x 20mg x 7; 6 x 50mg x 7. MC.		
25/7/18	D									
26/7/18	D							D: 28 x 50mg 14-28 x 20mg		
27/7/18	D									
28.7.18	D									
29.7.18	D									
30/7/18	D									

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith

DOB 4/12/91

SPIN 13144

LOC Peebles

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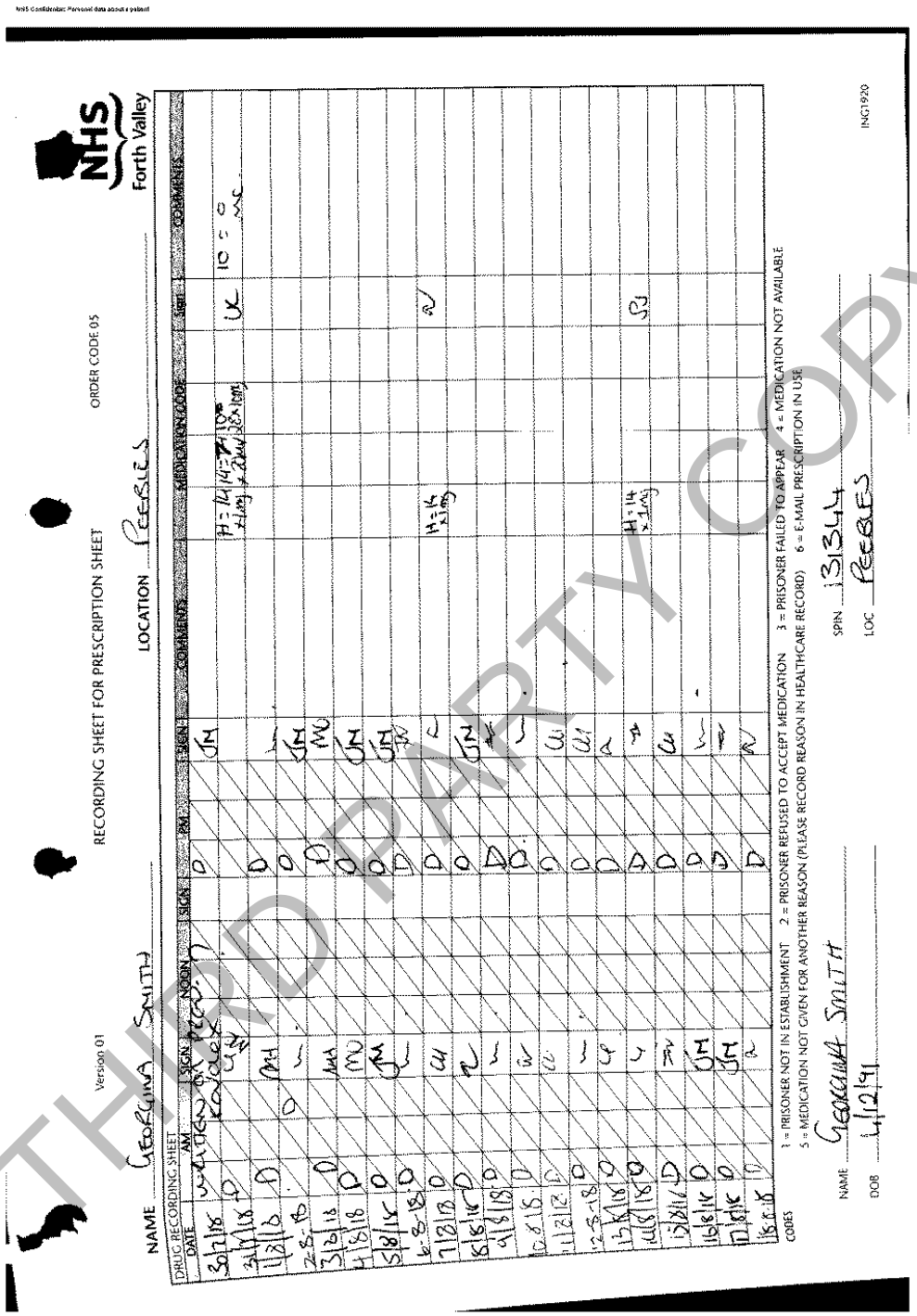

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

ORDER CODE 05

NAME Georgina Smith

LOCATION Peebles

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	SIGN	COMMENTS
30/7/18	Warfarin 5mg Codeine 30mg	GS				JN				
31/7/18								H: 14/14/7/18 1 tony + 2 bd x 28 tabs	LK	10 o MC
1/8/18										
2/8/18										
3/8/18										
4/8/18										
5/8/18										
6/8/18										
7/8/18								H: 14 x 1mg	JN	
8/8/18										
9/8/18										
10/8/18										
11/8/18										
12/8/18										
13/8/18										
14/8/18								H: 14 x 1mg	SJ	
15/8/18										
16/8/18										
17/8/18										
18/8/18										

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE

5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith

DOB 4/12/91

SPIN 13344

LOC Peebles

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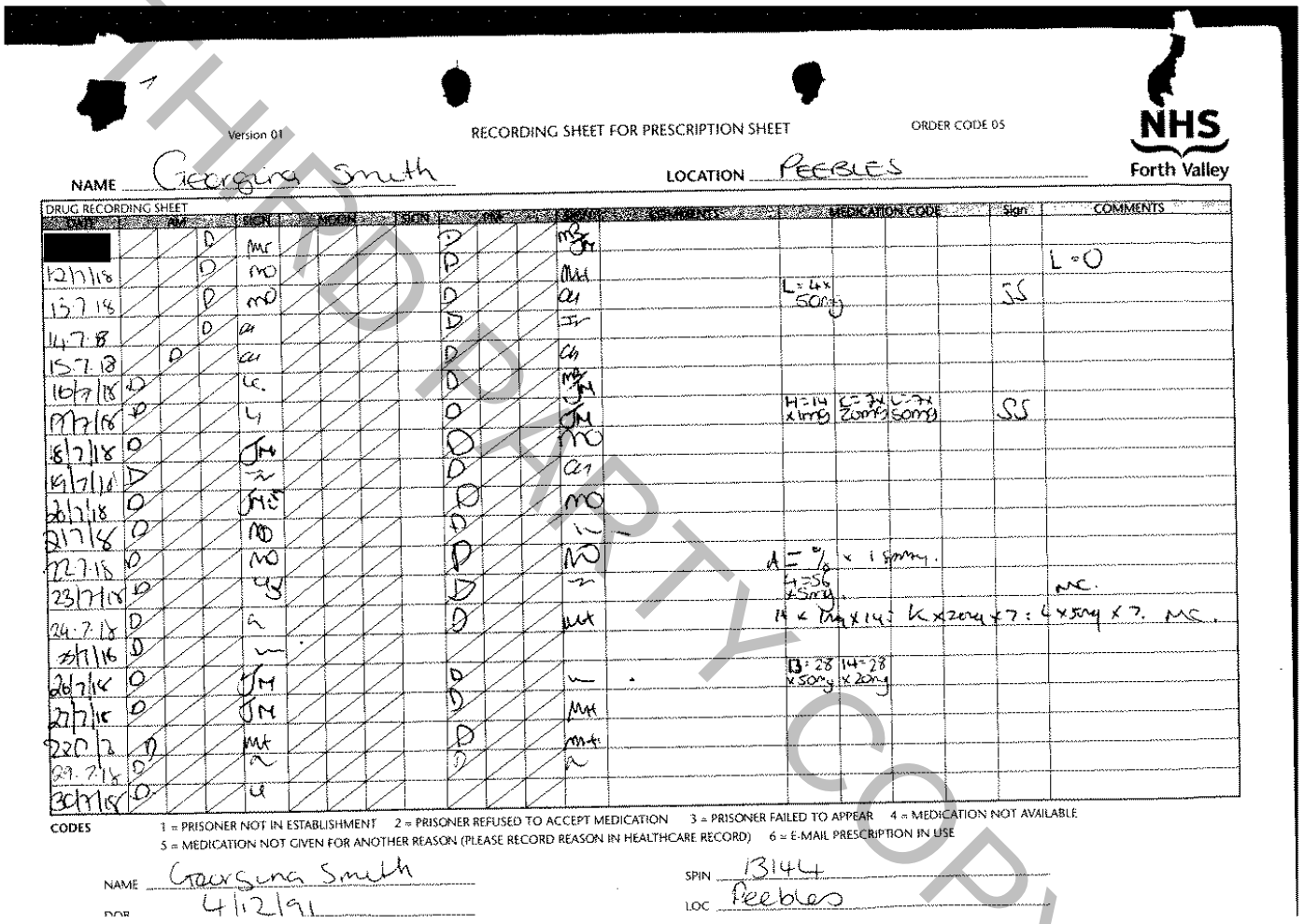

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

ORDER CODE 05

NHS Forth Valley

NHS Confidential - Personal data when printed

NAME Georgina Smith

LOCATION Peebles

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	PRN	MEDICATION CODE	Sign	COMMENTS
[redacted]	D	mr	D	D	D	mr				
12/7/18	D	mo	D	Mk	D	Mk				L=0
13.7.18	D	mo	D	D	D	a1		L=4x 50mg	JS	
14.7.18	D	a	D	D	D	Jr				
15.7.18	D	a1	D	D	D	ch				
16/7/18	D	Lc	D	D	D	MK JM				
17/7/18	D	L	D	D	D	JM		H=14 x1mg L=7x 20mg L=7x 50mg	SS	
18/7/18	D	JM	D	D	D	mo				
19/7/18	D	~	D	D	D	a1				
20/7/18	D	JM	D	D	D	mo				
21/7/18	D	mo	D	D	D	~				
22.7.18	D	mo	D	D	D	mo		A=½ x 1 5mg. H=56 x5mg.		
23/7/18	D	~	D	D	D	~				mc.
24.7.18	D	a	D	D	D	Mk		14 x 1mg x 14: 4 x 20mg x 7: 4 x 50mg x 7.		mc.
25/7/18	D	~	D	D	D	~				
26/7/18	D	JM	D	D	D	~		D: 28 x 50mg 14-28 x 20mg		
27/7/18	D	JM	D	D	D	Mk				
28.7.18	D	Mk	D	D	D	Mk				
29.7.18	D	~	D	D	D	~				
30/7/18	D	a								

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith

DOB 4/12/91

SPIN 13144

LOC Peebles

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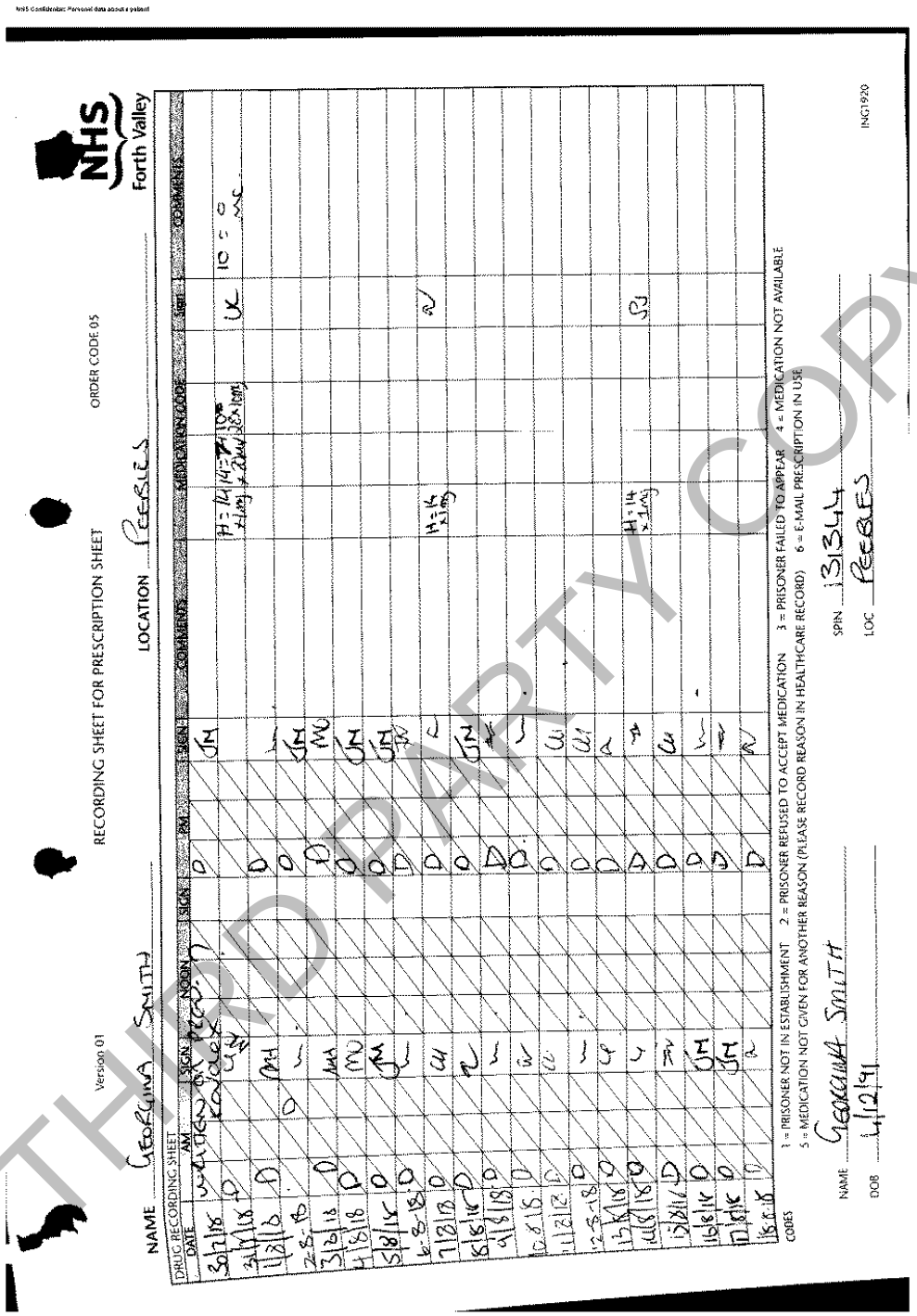

NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

ORDER CODE 05

NAME Georgina Smith

LOCATION Peebles

DRUG RECORDING SHEET

DATE	AM SIGN	NOON SIGN	PM	INIT	COMMENTS	MEDICATION CODE	INIT	COMMENTS
30/7/18	GS			JN				
31/7/18						H: 14/7/18 1mg + 20ml 28% Hyp	LK	10 = 0 mc
1/8/18								
2/8/18								
3/8/18								
4/8/18								
5/8/18								
6/8/18								
7/8/18						H: 14 x1mg		
8/8/18								
9/8/18								
10/8/18								
11/8/18								
12/8/18								
13/8/18								
14/8/18						H: 14 x1mg	SJ	
15/8/18								
16/8/18								
17/8/18								
18/8/18								

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
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NAME Georgina Smith SPIN 13344

DOB 4/2/91 LOC Peebles

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WS

NHS Forth Valley

Version 01

ORDER CODE 06

Side B

Start Date: ___/___/___

Kardex Re-

Prescription Sheet No: 1 of 1 (5) written Date: 31/1/18

CORNTON VALE

"AS REQUIRED" PRESCRIPTION — HMP

	Start Date	Review Date	Stop Date	Drugs (including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initials	Date	Initials
1	31/1/18	31/1/19		PARACETAMOL	500mg	O	BD PRN	AA					
2	31/1/18	31/1/19		SENNA 7.5	2	TAB	O	[redacted] PRN	M				
3	31/1/18	31/1/19		LACTULOSE	10-15ml	O	~~BD~~ PRN TDS	M					
4	31/1/18	31/1/19		BISACODYL	10mg	O	NOCTE PRN	M					
5	31/1/18	31/1/19		MEBEVERINE	135mg	O	TDS PRN	M					
6	31/1/18	31/1/19		PROPRANOLOL L.A.	80mg	O	ONCE DAILY PRN	M					
7	31/1/18	31/1/19		CAPASAL SHAMPOO	APP	TOP	3 X WEEKLY	M					
8	31/1/18	31/1/19		IBUPROFEN 5%	APP	TOP	TDS PRN DOES NOT	M					
9	~~25/5/18~~	~~25/5/19~~		~~DICLOFENAC~~	~~50mg~~	~~O~~	~~TDS AS REQ~~	~~AA~~		13/6/18	JK		
10	25/5/18		30/10/18	CETIRIZINE	10mg	O	NOCTE	M					
11	~~13/6/18~~		~~7 DAYS~~	PARACETAMOL	1g	O	TDS PRN	E		13/6/18	JK		
12	13/6/18		14 DAYS	METOCLOPRAMIDE	10mg	O	TDS PRN	M					
13	25/7/18	25/11/18		INDOMETACIN	50mg	O	ONCE DAILY AS REQ	M					
14	25/7/18	25/11/18		OMEPRAZOLE	20mg	O	ONCE DAILY AS REQ	M					

Once Only Prescriptions

	Admin Data	Admin Time	DRUGS (including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initials
1	10 Be 18	11:00	DEPO-PROVERA	150mg	IM		[redacted]	11:00		
2										
3										

NAME: GEORGINA SMITH SPIN: 131344 DOB: 4/12/91 LOCATION: P ALLERGIES: NKDA

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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NHS Forth Valley

Supplementary Kardex

Version 01

METHADONE	Y	N
SUBOXONE	Y	N

ORDER CODE 04

Side A

Prescription Sheet No: 1 of 1 (S)

Start Date: ___/___/___

Kardex Re-written Date: 31/1/18

HMP CORNTON VALE

REGULAR PRESCRIPTIONS

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Initials	Discontinued Date/Initials	MEDICATION FORM	Dose	Route	Times of Administration: AM 12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Initials
A	31/1/18	~~31/1/18~~ 30/1/19				DALACIN-T 1% Lotion	APP	TOP	✓	PM	✓	M		
B	~~31/1/18~~ 31/5/18					PREDNISOLONE	75mg		✓		✓	W		
C	26/1/18 26/1/18					Pregabalin	2x150		✓		✓	W		
D	6/2/18 30/1/19					(REGARDLIN)								
E	~~31/5/18~~ 9/11/18					~~25mg~~ CETIRIZINE	10mg	O	✓		✓	W		
F	31/5/18			3 DAYS		CHANDIX	0.5mg	O	✓		✓	W		
G	3/6/18			4 DAYS		CHANDIX	0.5mg	O	✓		✓	W		
H	7/6/18			11 DAYS		CHANDIX	1mg	O	✓		✓	W		
I	13/6/18			2 WEEKS		MEFENAMIC ACID	500mg	O	✓		✓	W (WITH FOOD)		
J	13/6/18			27/6/18		OMEPRAZOLE	20mg	O	✓		✓	W		
K	~~28/6/18~~ 23/7/18			25/7/18		OMEPRAZOLE	20mg	O	✓		✓	W		
L	~~1/7/18~~ 12/7/18			30/7/18		INDOMETHACIN	50mg	O	✓		✓	W		
M														
N														
O														
P														

NAME: GEORGINA SMITH SPIN: L31344 DOB: 4/12/91 LOCATION: P ALLERGIES: NKDA

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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WS

NHS Forth Valley

Version 01

ORDER CODE 06

Side B

Start Date: ..../..../....

Kardex Re-

Prescription Sheet No: 1 of 1 (5) written Date: 31/1/18

CORNTON VALE

"AS REQUIRED" PRESCRIPTION — HMP

	Start Date	Review Date	Stop Date	Drugs (including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Date	Initls
1	31/1/18	31/1/19		PARACETAMOL	500mg	O	BD PRN	MA					
2	31/1/18	31/1/19		SENNA 7.5	2	TAB	O [redacted] PRN	M					
3	31/1/18	31/1/19		LACTULOSE	10-15ml	O	~~BD~~ PRN TDS 5/7	M					
4	31/1/18	31/1/19		BISACODYL	10mg	O	NOCTE PRN	M					
5	31/1/18	31/1/19		MEBEVERINE	135mg	O	TDS PRN	M					
6	31/1/18	31/1/19		PROPRANOLOL L.A.	80mg	O	ONCE DAILY PRN	M					
7	31/1/18	31/1/19		CAPASAL SHAMPOO	APP	TOP	3 X WEEKLY	M					
8	31/1/18	31/1/19		IBUPROFEN 5% ~~gel~~	APP	TOP	TDS PRN DOES NOT NEED	M					
9	~~25/5/18~~	~~25/5/19~~		~~DICLOFENAC~~	~~50mg~~	~~O~~	~~TDS AS REQ~~	~~AA~~		13/6/18 JK			
10	25/5/18		30/10/18	CETIRIZINE	10mg	O	NOCTE	M					
11	~~13/6/18~~		~~7 DAYS~~	PARACETAMOL	~~1g~~	O	TDS PRN	~~E~~		13/6/18 JK			
12	13/6/18		14 DAYS	METOCLOPRAMIDE	10mg	O	TDS PRN	W					
13	25/5/18	25/11/18		INDOMETACIN	50mg	O	ONCE DAILY AS REQ	M					
14	25/5/18	25/11/18		OMEPRAZOLE	20mg	O	ONCE DAILY AS REQ	M					

Once Only Prescriptions

	Admin Data	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1	10 Bx 14	11:00	DEPO-PROVERA	150mg	IM		[illegible]	11:00		
2										
3										

NAME: GEORGINA SMITH SPIN: 131344 DOB: 4/12/91 LOCATION: P ALLERGIES: NKDA

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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NHS Forth Valley

supplementary kardex

Version 01

METHADONE Y N
SUBOXONE Y N

Prescription Sheet No: 1 of 1 (5)

Start Date: ___/___/___

Kardex Re-written Date: 31/1/18

ORDER CODE 04

Side A

HMP CORNTON VALE

REGULAR PRESCRIPTIONS

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Initials	Discontinued Date/Initials	MEDICATION FORM	Dose	Route	Times of Administration: AM 12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Initials
A	31/1/18	~~31/1/18~~ 30/1/19				DALACIN-T 1% Lotion	APP	TOP	✓	PRN	✓	M		
B	~~31/1/18~~ 31/5/18					PREGABALIN	75mg	O	✓		✓	W		
C	26/1/18 26/1/19					Pregabalin	75mg	O	✓		✓	W		
D	6/2/18 30/1/19					(REGARDLIN)	75mg	O	✓		✓	S		
E	9/5/18 9/11/18				25/7/18	CETIRIZINE	10mg	O	✓		✓	W		
F	31/5/18			3 DAYS		CHANDIX	0.5mg	O	✓		✓	W		
G	3/6/18			4 DAYS		CHANDIX	0.5mg	O	✓		✓	W		
H	7/6/18			11 DAYS		CHANDIX	1mg	O	✓		✓	W		
I	13/6/18			2 WEEKS		MEFENAMIC ACID	250mg	O	✓		✓	W		
J	13/6/18			27/6/18		OMEPRAZOLE	20mg	O	✓		✓	W		
K	28/6/18	25/7/18				OMEPRAZOLE	20mg	O	✓		✓	W		
L	4/7/18	12/7/18				INDOMETHACIN	50mg	O	✓		✓	W		
M														
N														
O														
P														

NAME: GEORGINA SMITH SPIN: L31344 DOB: 4/12/91 LOCATION: P ALLERGIES: NKDA

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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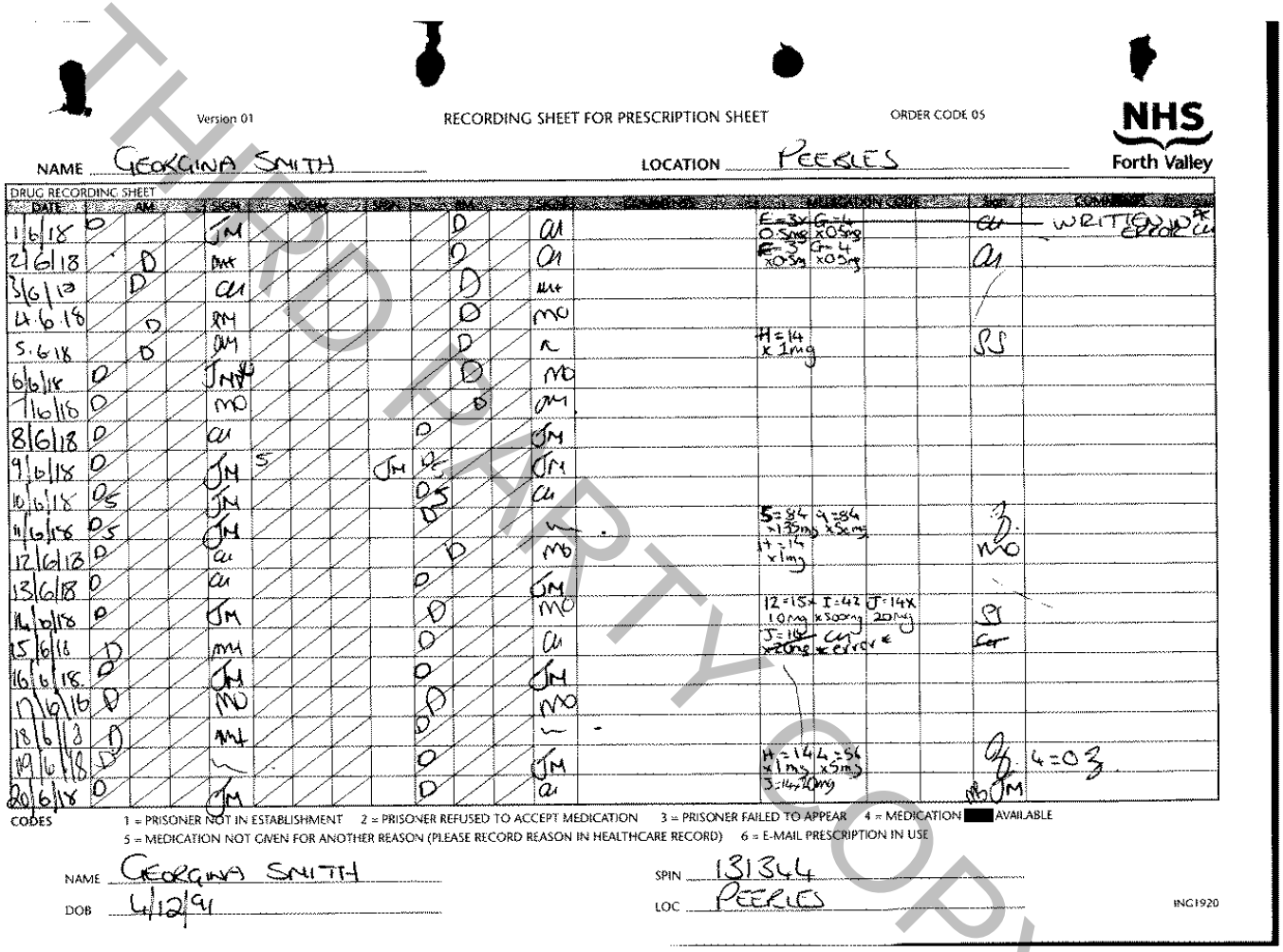

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME GEORGINA SMITH

LOCATION PEEBLES

DRUG RECORDING SHEET

DATE	AM	SIGN	NOCTE	SIGN	PM	SIGN	COMMENTS
1/6/18	D	JM			D	AU	E=3x G=4 0.5mg x0.5mg — WRITTEN IN ERROR AU
2/6/18	D	MK			D	AU	E=3 G=4 x0.5mg x0.5mg — AU
3/6/18	D	AU			D	MK	
4/6/18	D	RM			D	MO	
5/6/18	D	JM			D	R	H=14 x1mg — SS
6/6/18	D	JM			D	MO	
7/6/18	D	MO			D	AM	
8/6/18	D	AU			D	JM	
9/6/18	D	JM	S	JM	4	JM	
10/6/18	D5	JM			D5	AU	
11/6/18	D5	JM					S=84 g=84 x12.5mg x5mg — 3.
12/6/18	D	AU			D	MO	H=14 x1mg — MO
13/6/18	D	AU			D	JM	
14/6/18	D	JM			D	MO	12=15x I=42 J=14x 10mg x500mg 20mg — SS
15/6/18	D	RM			D	AU	J=18 x20mg AU error — Cor
16/6/18	D	JM			D	JM	
17/6/18	D	MO			D	MO	
18/6/18	D	RM			D		
19/6/18	D				D	JM	H=14 4=56 x1mg x5mg J=14 x20mg — 4=03
20/6/18	D	JM			D	AU	MO JM

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION AVAILABLE

5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME GEORGINA SMITH

DOB 4/12/91

SPIN 131364

LOC PEEBLES

ING1920

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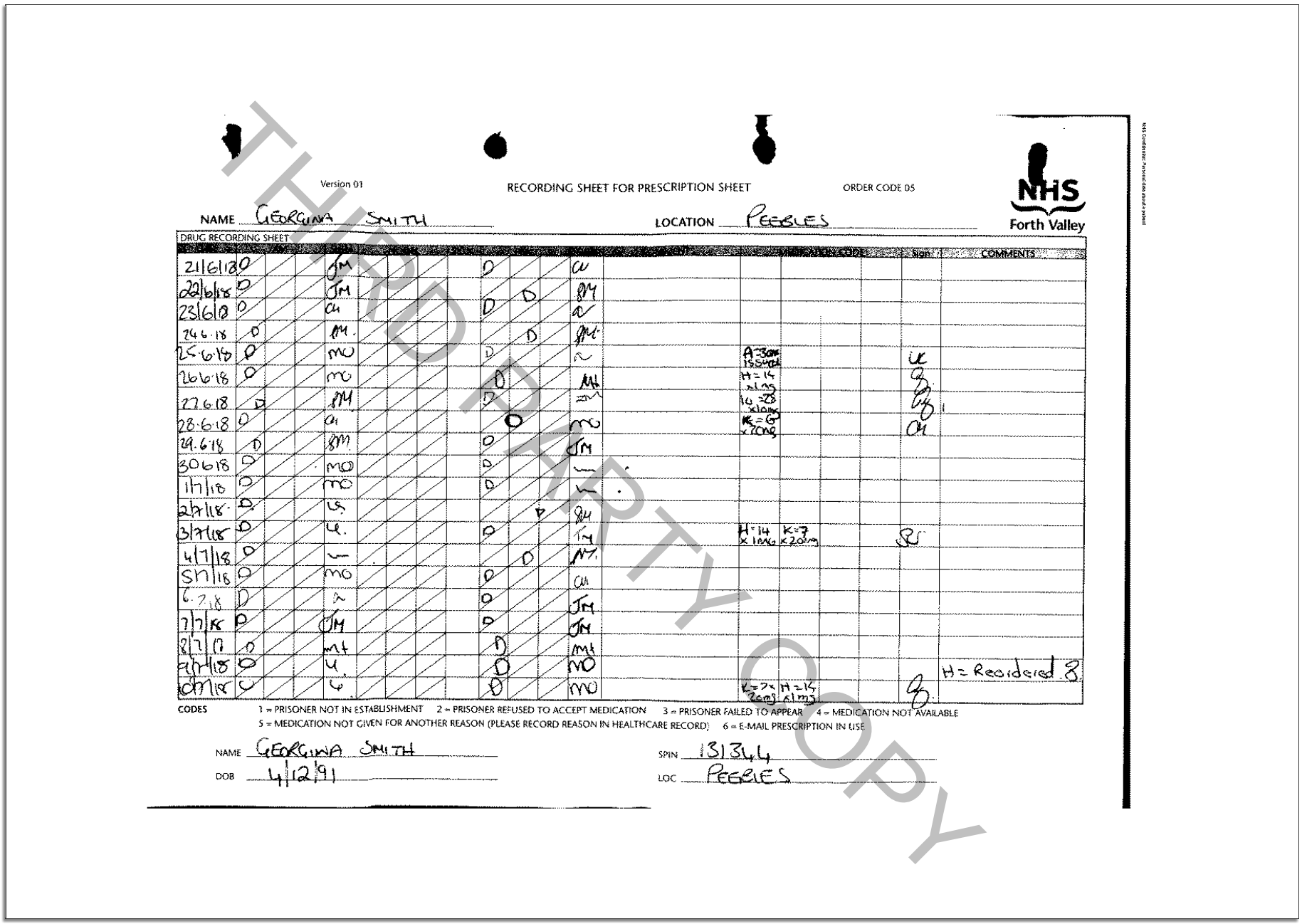

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

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NAME GEORGINA SMITH

LOCATION PEEBLES

DRUG RECORDING SHEET

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NHS
Forth Valley
Microbiology

SURNAME	FORENAME	UNIT No.
SMITH H M PRISON, CORNTON VALE,	GEORGINA	0412913127
	DATE OF BIRTH: 04/12/1991	SEX: F

CONSULTANT: Dr [redacted] Sayers

WARD: Prison Medical Officer CORN

G.P.: HMP & YOI Cornton Vale

CLINICAL DATA:

Pyogenic Culture
Microscopy.
Trichomonas species not seen
Culture.
No pathogens isolated
.
High vaginal swabs are no longer being examined for Neisseria gonorrhoeae.
If this infection is suspected, please send a cervical swab.
Culture of HVS for GC is only recommended in post hysterectomy patients

EXAMINATION	LAB No.	AUTHORISED	
Pyogenic Culture	MG027239Y		
NATURE OF SPECIMEN	DATE COLLECTED	DATE RECEIVED	DATE REPORTED
High Vaginal swab	14/08/2018	15/08/2018	17/08/2018

23/08/18

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NHS
Forth Valley
Microbiology

SURNAME	FORENAME	UNIT No.
SMITH H M PRISON, CORNTON VALE,	GEORGINA	0412913127
	DATE OF BIRTH: 04/12/1991	SEX: F

CONSULTANT: Dr [redacted] Sayers
WARD: Prison Medical Officer CORN
G.P.: HMP & YOI Cornton Vale

CLINICAL DATA:

Pyogenic Culture
Microscopy.
Trichomonas species not seen
Culture.
No pathogens isolated
.
High vaginal swabs are no longer being examined for Neisseria gonorrhoeae.
If this infection is suspected, please send a cervical swab.
Culture of HVS for GC is only recommended in post hysterectomy patients

EXAMINATION	LAB No.	AUTHORISED	
Pyogenic Culture	MG027239Y		
NATURE OF SPECIMEN	DATE COLLECTED	DATE RECEIVED	DATE REPORTED
High Vaginal swab	14/08/2018	15/08/2018	17/08/2018

23/08/18

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Health Centre
HMYOI Cornton Vale
Cornton Road
Stirling
FK9 5NU

Tel: 01786 835335

NHS
Forth Valley

Georgina Smith
Spin : 131344
Peebles 6/7

Thursday 4 October 2018-10-04

Dear Georgina,

Jan Green (Speech & Language Therapist) has arranged for you to meet with two Occupational Therapists, [redacted] & [redacted] in Room 8 within the Health Centre on Wednesday 10th October 2018 at 09:30.

Health Centre Admin

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NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

ORDER CODE 05

NAME Georgina Smith

LOCATION Peebles

DRUG RECORDING SHEET

CODES
1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION ■ AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith
DOB 4/12/94

SPIN 181354
LOC Peebles

ING1920

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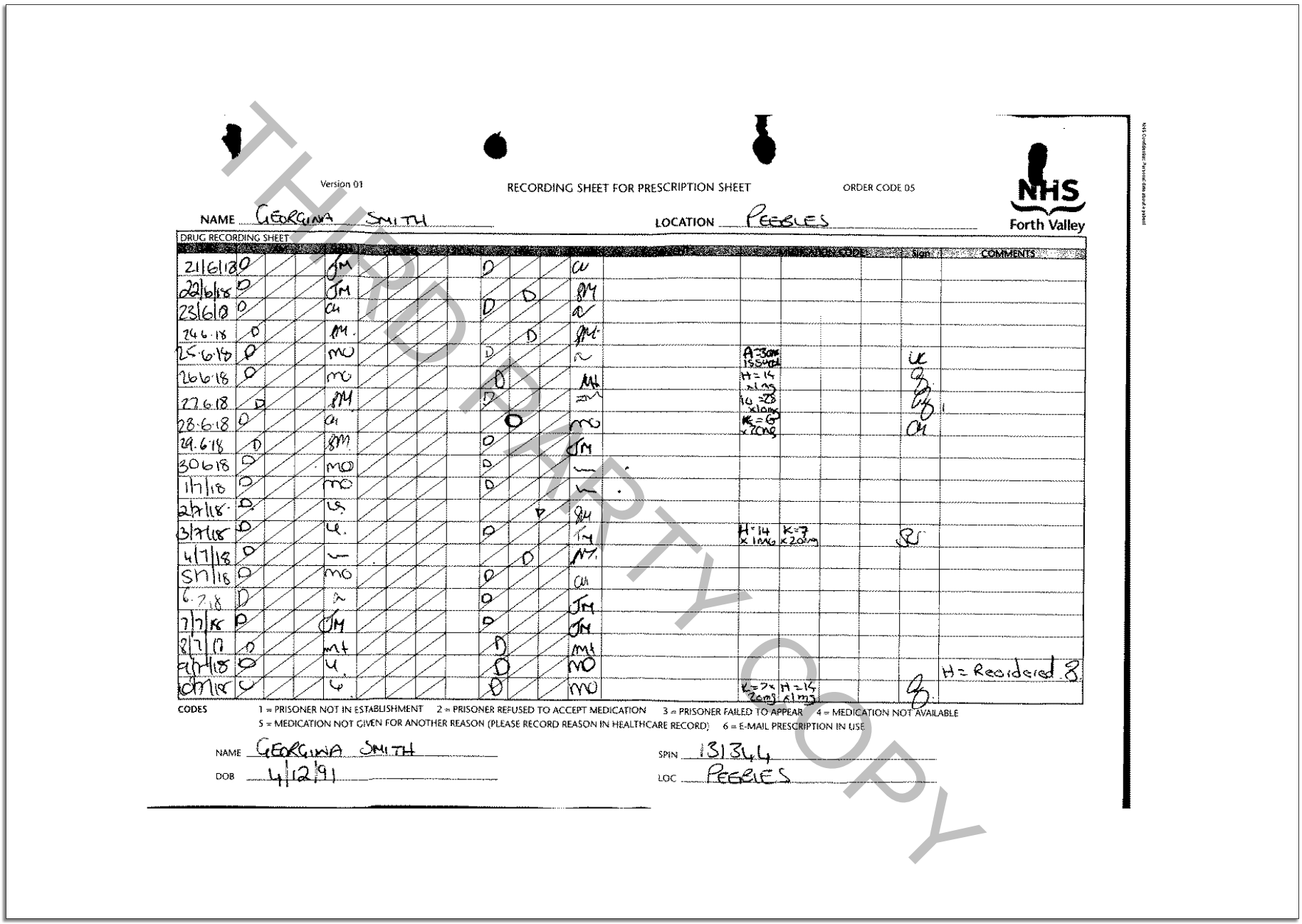

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NHS Confidential - Personal data about a patient

NAME GEORGINA SMITH

LOCATION PEEBLES

DRUG RECORDING SHEET

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NHS Forth Valley
Microbiology

SURNAME: SMITH H M PRISON, CORNTON VALE.	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Sayers	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: No Clinical Details Given			

H.pylori stool antigen
H.pylori stool antigen : negative
Antibiotics, proton pump inhibitors and bismuth preparations are known to suppress the growth of H.pylori.
Stool sampling must not be performed earlier than 2 weeks after termination of ingestion proton pump inhibitors and bismuth preparations, and 4 weeks after termination of antibiotic therapy, respectively.

-ve
12/10/18
LM

EXAMINATION: Cryptosporidium microscopy	LAB No.: MF0023278	AUTHORISED: G. [redacted]	
NATURE OF SPECIMEN: Faeces	DATE COLLECTED: 08/10/2018	DATE RECEIVED: 08/10/2018	DATE REPORTED: 11/10/2018

letter sent LM

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NHS Confidential: Personal data about a patient

Health Centre
HMYOI Cornton Vale
Cornton Road
Stirling
FK9 5NU

Tel: 01786 835335

NHS
Forth Valley

Georgina Smith
Spin : 131344
Peebles 6/7

Thursday 4 October 2018-10-04

Dear Georgina,

Jan Green (Speech & Language Therapist) has arranged for you to meet with two Occupational Therapists, [redacted] & [redacted] in Room 8 within the Health Centre on Wednesday 10th October 2018 at 09:30.

Health Centre Admin

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NHS Forth Valley
Microbiology

SURNAME: SMITH H M PRISON, CORNTON VALE.	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Sayers	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: No Clinical Details Given			

H.pylori stool antigen
H.pylori stool antigen : negative
Antibiotics, proton pump inhibitors and bismuth preparations are known to suppress the growth of H.pylori.
Stool sampling must not be performed earlier than 2 weeks after termination of ingestion proton pump inhibitors and bismuth preparations, and 4 weeks after termination of antibiotic therapy, respectively.

-ve
12/10/18
LM

EXAMINATION: Cryptosporidium microscopy	LAB No.: MF0023278	AUTHORISED: G. [redacted]	
NATURE OF SPECIMEN: Faeces	DATE COLLECTED: 08/10/2018	DATE RECEIVED: 08/10/2018	DATE REPORTED: 11/10/2018

letter sent LM

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NHS
Forth Valley
Microbiology

SURNAME: SMITH H M PRISON, CORNTON VALE,	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Sayers	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: No Clinical Details Given			

C. difficile toxin
Non diarrhoeal stool - unsuitable for C.difficile testing
Cryptosporidium microscopy
Not tested
Faeces culture
Formed Stool - unsuitable for culture.
Sample held in lab for 7 days.
Please contact the Lab for advice if necessary.

File
Correct test 15/10/2018
reordered JM

EXAMINATION	LAB No.	AUTHORISED	
Cryptosporidium microscopy	MF002327B		
NATURE OF SPECIMEN: Faeces	DATE COLLECTED: 08/10/2018	DATE RECEIVED: 08/10/2018	DATE REPORTED: 09/10/2018

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NHS
Forth Valley
Microbiology

SURNAME	FORENAME	UNIT No.
SMITH H M PRISON, CORNTON VALE,	GEORGINA	0412913127
	DATE OF BIRTH: 04/12/1991	SEX: F

CONSULTANT: Dr [redacted] Sayers
WARD: Prison Medical Officer CORN
G.P.: HMP & YOI Cornton Vale

CLINICAL DATA: No Clinical Details Given

C. difficile toxin
Non diarrhoeal stool - unsuitable for C.difficile testing
Cryptosporidium microscopy
Not tested
Faeces culture
Formed Stool - unsuitable for culture.
Sample held in lab for 7 days.
Please contact the Lab for advice if necessary.

File
Correct test 15/10/2018
re ordered JM

EXAMINATION	LAB No.	AUTHORISED	
Cryptosporidium microscopy	MF002327B		
NATURE OF SPECIMEN	DATE COLLECTED	DATE RECEIVED	DATE REPORTED
Faeces	08/10/2018	08/10/2018	09/10/2018

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NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

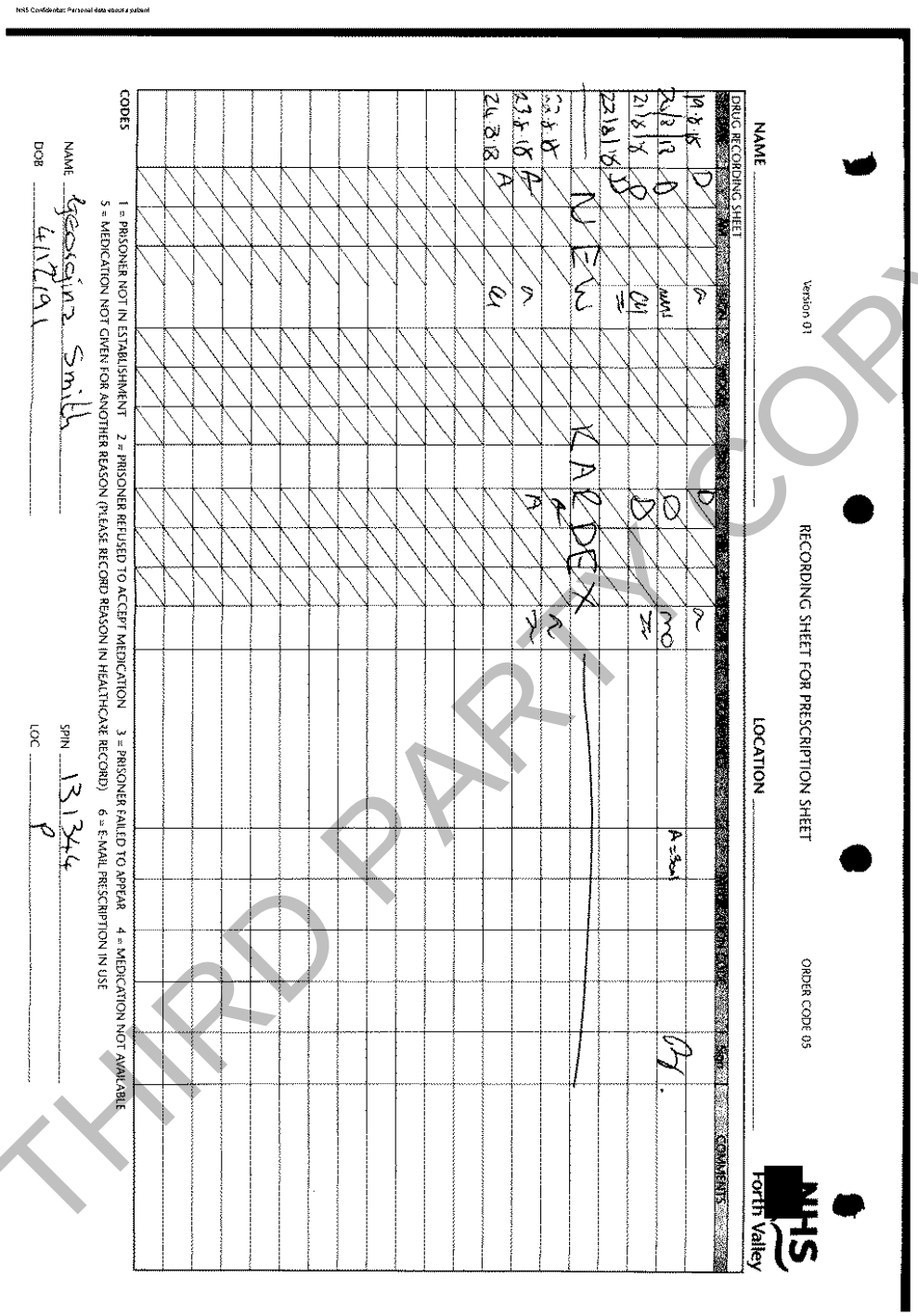
NAME Georgina Smith

LOCATION Peebles

ORDER CODE DS

DRUG RECORDING SHEET

| DATE | TIME | SIGN | | |



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NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

NAME _____ LOCATION _____ ORDER CODE 05

DRUG RECORDING SHEET

| DRUG | | |

iGPR Report

Page 585 of 1734

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Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME GEORGINA SMITH

LOCATION PEEBLES

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN														
24.8.18					A													
25/8/18	A	MH			A													
26/8/18	A	MH																
27/8/18	A	M			A													
28/8/18	A	M			A													
29.8.18	A	A			A													
30/8/18	A	JM			A													
31.8.18	A	MO			A													
1/9/18	A	CL			A													
2/9/18	A	CL			A													
3/9/18	A	M			A													
4/9/18	A	MO			A													
5/9/18	A	JM MO			A													
6/9/18	A	CL			A													
7/9/18	A	CL			A													
8/9/18	A	JM			A													
9/9/18	A	JM			A													
10/9/18	A	M			A													
11/9/18	A	JM			A													
12/9/18	A	M			A													

7=28 x10ml 8=36 x5ml

7=28 x10ml 8=56 x5ml

MO

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME GEORGINA SMITH

DOB 4/12/91

SPIN 131364

LOC PEEBLES

ING1920

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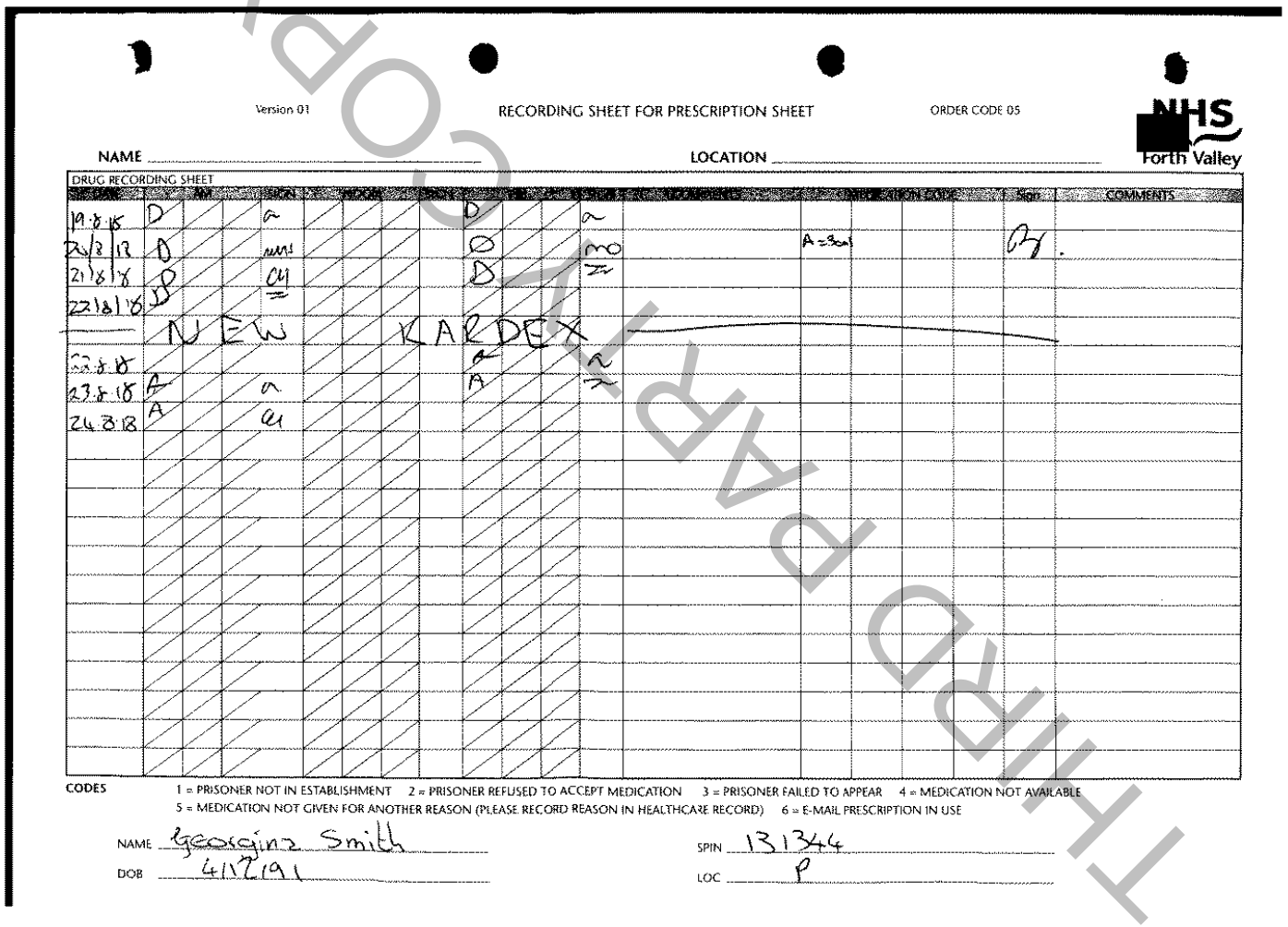

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME _____ LOCATION _____

DRUG RECORDING SHEET

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[redacted]

HMP & YOI CORNTON VALE
Consent for Influenza Immunisation
2018/2019

Name: GEORGINA SMITH

Date of Birth: 4/12/91 **SPIN No:** 131344

Check list of Health Assessment

Have you had the flu vaccination this year? Yes / (No)

Are you suffering from a cold or other infection? Yes / (No)

Have you had any allergies?
Including medication and eggs Yes / (No)

Are you aware of benefits
And possible side effects? (Yes) / No

Do you think you may be [redacted] Yes / (No)

Do you give your consent? (Yes) / No

Signature of patient x G. Smith

Details of vaccine given
Brand: SANOFI PASTEUR EUROPE
Batch: R3J501V
Expiry: 07/19

Signature of clinician
Administering [redacted] Date: 19/11/18

Vaccine no or sticker no/expiry date	Site / Location	Doctor's Signature
R3J501V	(R) upper arm	PAD Lyoung

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NHS
Forth Valley

The Health Centre
HMP & YOI Cornton Vale

Name : GEORGINA SMITH

Spin : 134344

Location: ILW7 Clinic : NURSE

Dear GEORGINA,

You have been listed for an appointment in **The Health Centre** on :

Date : Wednesday 23rd January 2019 – 9.15am

This appointment is subject to change and depends on the clinic running times on the date shown above. If this has to be re-arranged, you will be seen in the next available Clinic

Health Centre Administrator
HMP Cornton Vale
Date :

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NHS
Forth Valley

The Health Centre
HMP & YOI Cornton Vale

Name : GEORGINA SMITH

Spin : 134344

Location: IL07 Clinic : NURSE

Dear GEORGINA,

You have been listed for an appointment in **The Health Centre** on :

Date : Wednesday 23rd January 2019 – 9.15am

This appointment is subject to change and depends on the clinic running times on the date shown above. If this has to be re-arranged, you will be seen in the next available Clinic

Health Centre Administrator
HMP Cornton Vale
Date :

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Pages:

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[redacted]

HMP & YOI CORNTON VALE
Consent for Influenza Immunisation
2018/2019

Name: GEORGINA SMITH

Date of Birth: 4/12/91 **SPIN No:** 131344

Check list of Health Assessment

Have you had the flu vaccination this year? Yes / (No)

Are you suffering from a cold or other infection? Yes / (No)

Have you had any allergies?
Including medication and eggs Yes / (No)

Are you aware of benefits
And possible side effects? (Yes) / No

Do you think you may be [redacted] Yes / (No)

Do you give your consent? (Yes) / No

Signature of patient G. Smith

Details of vaccine given
Brand: SANOFI PASTEUR EUROPE
Batch: R3J501V
Expiry: 07/19

Signature of clinician
Administering [redacted] Date: 19/11/18

Vaccine no or sticker no/expiry date	Site / Location	Doctor's Signature
R3J501V	(R) upper arm	PAD Lyoung

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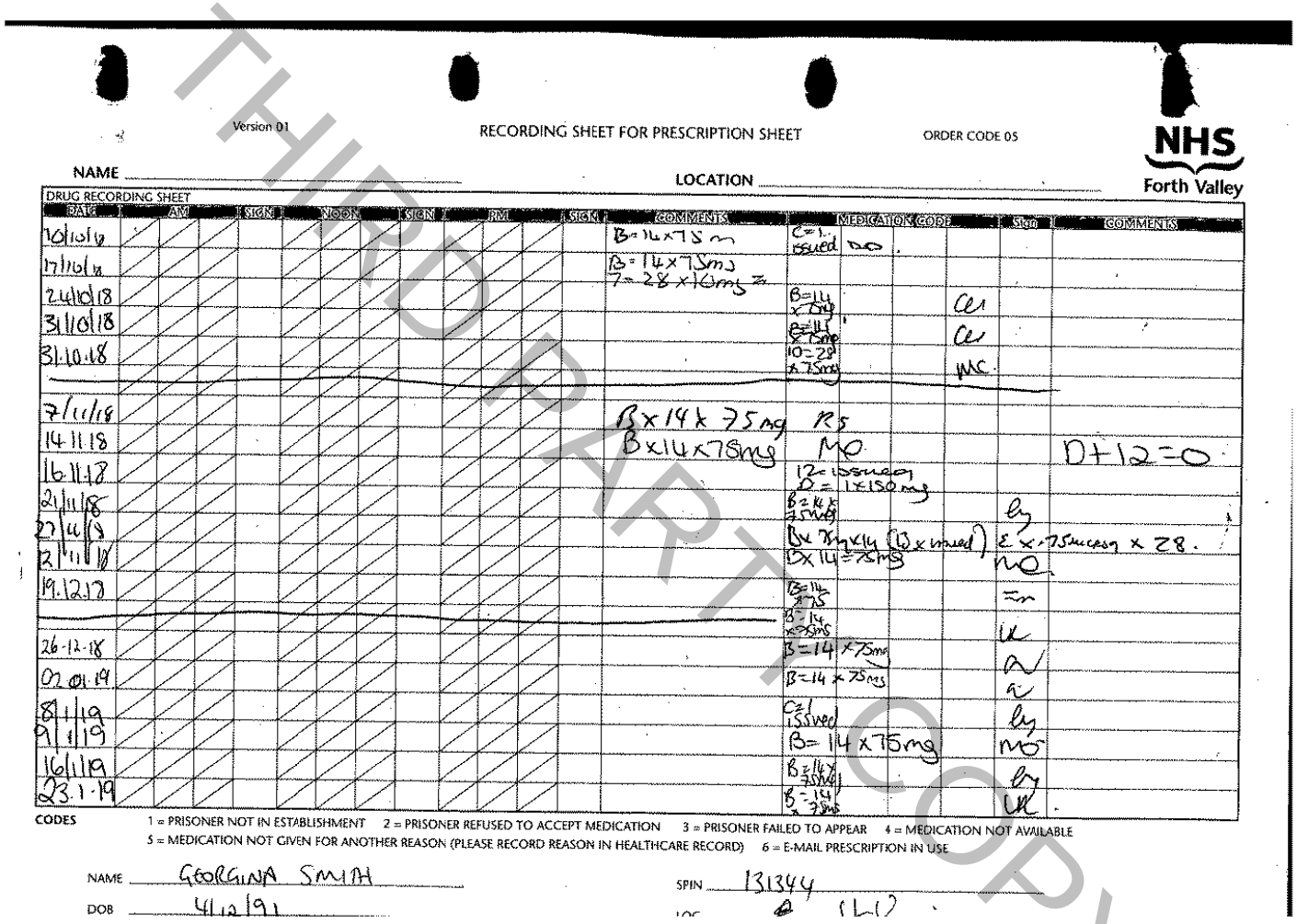

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME [redacted] LOCATION [redacted]

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENTS
10/10/18							B=14x75 m	C=1 issued DO		
17/10/18							B=14x75mg 7=28x10mg x			
24/10/18								B=14 x75mg	CA	
31/10/18								B=14 x75mg 10=28 x75mg	CA	
31.10.18									MC	
7/11/18							B x 14 x 75mg	RS		
14.11.18							B x 14 x 75mg	MO		D+12=0
16.11.18								12= 1 issued D= 1x150mg		
21/11/18								B=14 x 75mg	by	
27/11/18								Bx 75mg x14 (B x issued)	E x 75mg x 28.	
28/11/18								1 x 14 = 75mg	MO	
19.12.18								B=14 x75	m	
								B=14 x75mg	M	
26-12-18								B=14 x75mg	AV	
02.01.19								B=14 x 75mg	A	
8/1/19								C=1 issued	by	
9/1/19								B=14 x75mg	MO	
16/1/19								B=14 x 75mg	by	
23.1.19								B=14 x 75mg	M	

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME GEORGINA SMITH SPIN 131344

DOB 4/12/91 HC # (LL)

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iGPR Report

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME GEORGINA SMITH

LOCATION PEEBLES

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENTS
13/9/18	A	MK			A	[illegible]				
14/9/18	A	JM			A	JM				
15/9/18	A	[illegible]			A	[illegible]				
16/9/18	A	MO			A	MO				
17/9/18	A	LS			A	JM				
18/9/18	A	[illegible]			A	CH				
19/9/18	A	[illegible]			A	[illegible]				
20/9/18		[illegible]			A	JM				
21/9/18	A	[illegible]			A	RS				
22/9/18	A	JM			A	JM				
23/9/18	A	MK			A	RS				
24/9/18	A	[illegible]			A	JM				
25/9/18	A	[illegible]			A	JM		1=56 x75mg 2= 30oml 3=56 x5mg		
26/9/18	A	MK			A	MO				
27/9/18	A	MO			A	JM				
28/9/18	A	JM			A	MO				
29/9/18	A	CH			B	AM				
30/9/18	A	AM			B	AM				
1/10/18	A	CH								
3/10/18								8x 14x 75mg		RS

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME GEORGINA SMITH

DOB 4/12/91

[redacted] 131344

LOC P

ING1920

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NHS
Forth Valley
Microbiology

SURNAME: SMITH H M PRISON, CORNTON VALE,	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Sayers	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: bbv screen			

Syphilis Screening Test	Negative
Hepatitis C antibody screen	Negative
HIV antigen / antibody test	Negative

EXAMINATION: Syphilis Serology	LAB No.: MS0177587Z	AUTHORISED: Auto authorised	
NATURE OF SPECIMEN: Venous blood	[redacted] COLLECTED: 02/04/2019	DATE RECEIVED: 03/04/2019	DATE REPORTED: 04/04/2019

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Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME _____ LOCATION _____

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENTS
10/10/18							B=14x75 m	C=1 issued DO		
17/10/18							B=14x75mg 7=28x10mg =			
24/10/18								B=14 x75mg	CA	
31/10/18								B=14 x75mg 10=28 x75mg	CA	
31.10.18									MC	
7/11/18							B x 14 x 75mg	RS		
14.11.18							B x 14 x 75mg	MO		D+12=0
16.11.18								12= issued DO = 1x150mg		
21/11/18								B=14 x 75mg	by	
27/11/18								B x 14 x 75mg (B x issued)	E x 75mg x 28.	
2/11/18								1 x 14 = 75mg	MO	
19.12.18								B=14 x75	=n	
								B=14 x75mg	ik	
26-12-18								B=14 x 75mg	AV	
02.01.19								B=14 x 75mg	ai	
8/1/19								C=1 issued	by	
9/1/19								B=14 x 75mg	MO	
16/1/19								B=14 x 75mg	by	
23.1.19								B=14 x 75mg	ik	

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME GEORGINA SMITH

DOB 4/12/91

SPIN 131344

iGPR Report

NHS Confidential: Personal data about a patient

NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

ORDER CODE 65

NAME Georgina Smith

LOCATION Perth

DRUG RECORDING SHEET														
DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION/GOD	Stock	GOMMENTS
13/9/18	A	MK		A										
14/9/18	A	GH		A										
15/9/18	A	MK		A										
16/9/18	A	MO		A										
17/9/18	A	LS		A										
18/9/18	A	LS		A										
19/9/18	A	LS		A										
20/9/18	A	LS		A										
21/9/18	A	LS		A										
22/9/18	A	LS		A										
23/9/18	A	MK		A										
24/9/18	A	LS		A										
25/9/18	A	MK		A										
26/9/18	A	MO		A										
27/9/18	A	GH		A										
28/9/18	A	GH		A										
29/9/18	A	LS		A										
30/9/18	A	LS		A										
1/10/18	A	LS		A										
2/10/18														

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE

5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith

DOB 4/12/91

CHI 131344

LOC P

ING1920

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Filename: igprda202606181522490.pdf
Extension:.tif
Pages:

NHS Forth Valley
Microbiology

SURNAME: SMITH H M PRISON, CORNTON VALE,	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Sayers	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: fshs			

Chlamydia trachomatis PCR Negative
N.gonorrhoeae PCR Negative

* Chlamydia / Gonorrhoea testing should only be done if there is a clinical indication OR if there is a concern following [redacted] risk.
* All diagnosed with Chlamydia should have [redacted] notification and be retested at 3-12 months.
* For advice / help contact Central [redacted] Health Helpline 01324 673563 (Mon-Fri 2-5pm).

-ve 11/4/19 LM

EXAMINATION	LAB No.	AUTHORISED	
Chlamydia & gonorrhoea PCR	MS010213R		
NATURE OF SPECIMEN	DATE COLLECTED	[redacted] RECEIVED	DATE REPORTED
Throat swab	02/04/2019	05/04/2019	09/04/2019

letter sent LM

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Filename: igprda202606181522500.pdf
Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

NHS
Forth Valley
Microbiology

SURNAME: SMITH H M PRISON, CORNTON VALE,	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Sayers	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: bbv screen			

Syphilis Screening Test	Negative
Hepatitis C antibody screen	Negative
HIV antigen / antibody test	Negative

EXAMINATION: Syphilis Serology	LAB No.: MS0177587Z	AUTHORISED: Auto authorised	
NATURE OF SPECIMEN: Venous blood	[redacted] COLLECTED: 02/04/2019	DATE RECEIVED: 03/04/2019	DATE REPORTED: 04/04/2019

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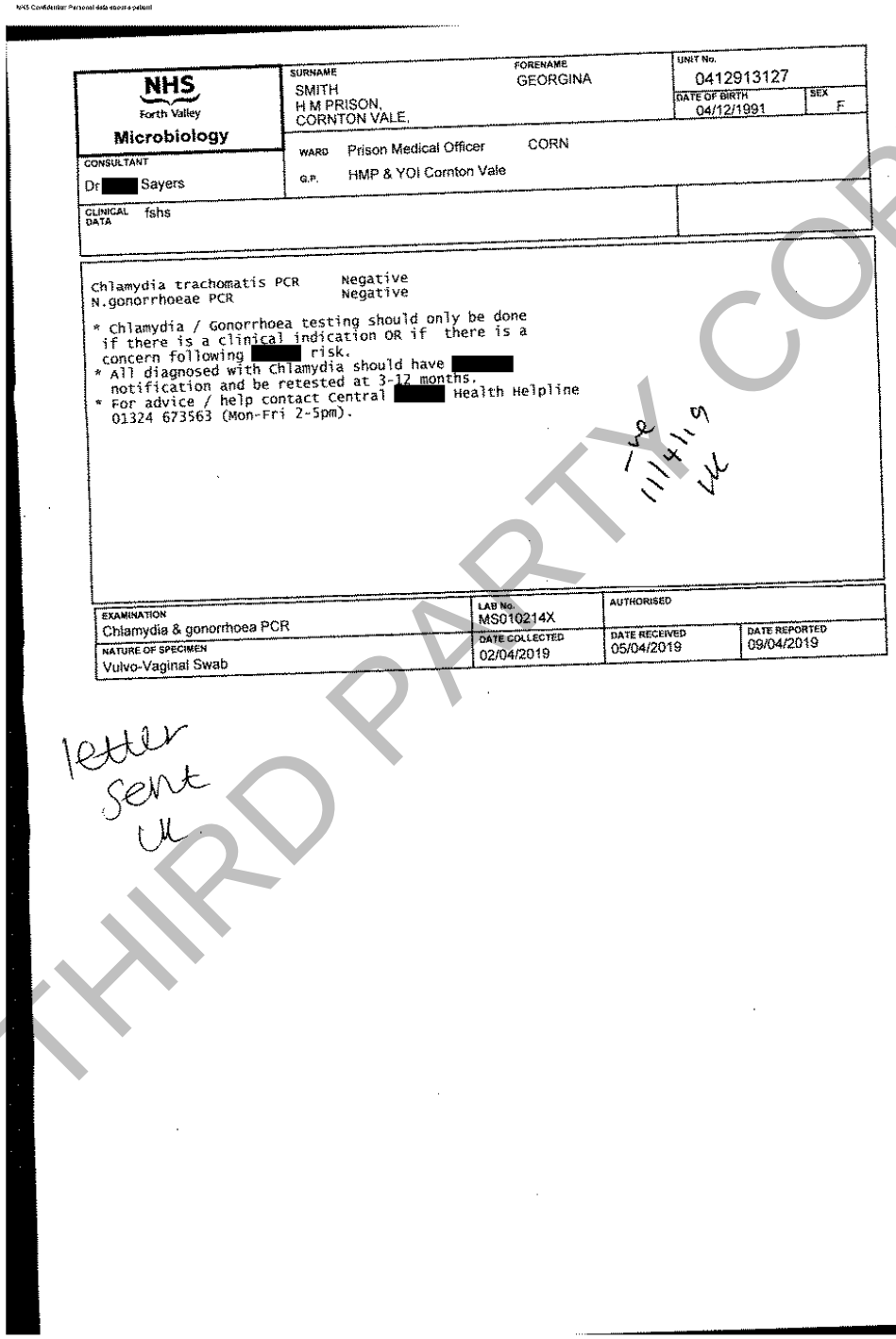

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NHS Forth Valley
Microbiology

SURNAME: SMITH H M PRISON, CORNTON VALE.	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Sayers	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: fshs			

Chlamydia trachomatis PCR — Negative
N.gonorrhoeae PCR — Negative

* Chlamydia / Gonorrhoea testing should only be done if there is a clinical indication OR if there is a concern following [redacted] risk.
* All diagnosed with Chlamydia should have [redacted] notification and be retested at 3-12 months.
* For advice / help contact Central [redacted] Health Helpline 01324 673563 (Mon-Fri 2-5pm).

-ve 11/4/19 MK

EXAMINATION	LAB No.	AUTHORISED	
Chlamydia & gonorrhoea PCR	MS010214X		
NATURE OF SPECIMEN: Vulvo-Vaginal Swab	DATE COLLECTED: 02/04/2019	DATE RECEIVED: 05/04/2019	DATE REPORTED: 09/04/2019

letter sent MK

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Extension:.tif
Pages:

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NHS Forth Valley
Microbiology

SURNAME: SMITH, H M PRISON, CORNTON VALE.	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Sayers	WARD: Prison Medical Officer CORN		
	G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: fshs			

Chlamydia trachomatis PCR — Negative
N.gonorrhoeae PCR — Negative

* Chlamydia / Gonorrhoea testing should only be done if there is a clinical indication OR if there is a concern following [redacted] risk.
* All diagnosed with Chlamydia should have [redacted] notification and be retested at 3-12 months.
* For advice / help contact Central [redacted] Health Helpline 01324 673563 (Mon-Fri 2-5pm).

-ve 11/4/19 LL

EXAMINATION: Chlamydia & gonorrhoea PCR	LAB No.: MS010214X	AUTHORISED	
NATURE OF SPECIMEN: Vulvo-Vaginal Swab	DATE COLLECTED: 02/04/2019	DATE RECEIVED: 05/04/2019	DATE REPORTED: 09/04/2019

letter sent LL

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Pages:

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NHS
Forth Valley
Microbiology

SURNAME: SMITH H M PRISON, CORNTON VALE,	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Sayers	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: fshs			

Chlamydia trachomatis PCR Negative
N.gonorrhoeae PCR Negative

* Chlamydia / Gonorrhoea testing should only be done if there is a clinical indication OR if there is a concern following [redacted] risk.
* All diagnosed with Chlamydia should have [redacted] notification and be retested at 3-12 months.
* For advice / help contact Central [redacted] Health Helpline 01324 673563 (Mon-Fri 2-5pm).

-ve
11/4/19

EXAMINATION: Chlamydia & gonorrhoea PCR	LAB No.: MS010213R	AUTHORISED	
NATURE OF SPECIMEN: Throat swab	DATE COLLECTED: 02/04/2019	[redacted] RECEIVED: 05/04/2019	DATE REPORTED: 09/04/2019

letter sent

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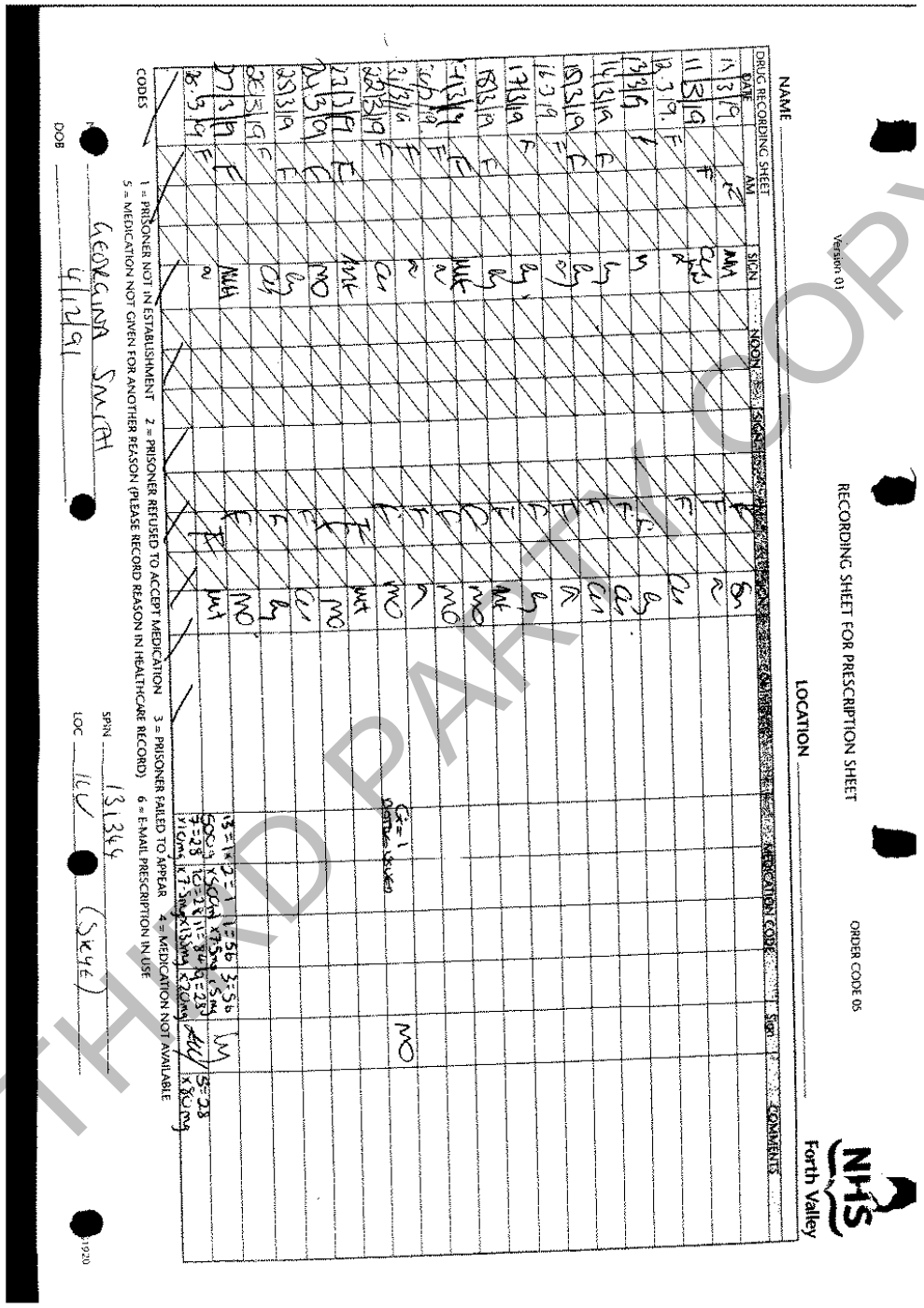

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NHS Confidential: Personal data about a patient

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

Forth Valley

NAME _____ LOCATION _____

DRUG RECORDING SHEET DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENTS
30.4.19								B=14 x 75mg E=28 x 75mg	UL	
4.1.19									MO	
6.2.19	D						MD			
7.2.19								B=14 x 75mg	N	
13.2.19								B=14 x 75mg	LH	
2.2.19								B=14 x 75mg	N	
24.2.19					D		N	B=5x 5mg returned	CM	
25.2.19					F		MB			
26.2.19					F		N			
27.2.19					F		D			
28.2.19					F		D			
1.3.19					F		MO	28x10mg = T	MO	
2.3.19					F		MT			
3.3.19					F		MO	E=28	MO	
4.3.19					F		LH			
5.3.19					F		CM			
6.3.19					F		MO			
7.3.19					F		CM			
8.3.19					F		LH			
9.3.19					F		LH			

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith SPIN 1313 44

DOB 4.12.91 LOC HB @ ICU

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NAME [redacted]

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

LOCATION

ORDER CODE 05

NHS Forth Valley

DRUG RECORDING SHEET

AM

DATE	SIGN	NOON	SIGN	MEDICATION CODE	SIGN	COMMENTS
11/3/19	AM					
12/3/19						
13/3/19						
14/3/19						
15/3/19						
16/3/19						
17/3/19						
18/3/19						
19/3/19						
20/3/19						
21/3/19						
22/3/19						
23/3/19						
24/3/19						
25/3/19	MH					
26/3/19						

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE

5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

[redacted]

DOB [redacted]

SPIN 131344

LOC ILU (SKYE)

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Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

Forth Valley

NAME _____ LOCATION _____

DRUG RECORDING SHEET DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENTS
30.4.19								B=14 x 75mg E=28 x 75mg	UL	
4.1.19									MO	
6.2.19	D				D	MO				
7.2.19	D							B=14 x 75mg	N	
13.8.19								B = 14 x 75mg	by	
2/2/19								B=14 x 75mg	N	
24.2.19					D	N		B=5x 5mg returned	CN	
25.2.19	D	F				NB				
26.2.19	F				F	N				
27.2.19	F	UN			F	D				
28.8.19	F	MH			F	D				
1.3.19	F	D			F	MO		25x10mg = T	MO	
2.3.19	F	D			F	UH				
3.3.19	F	[redacted]			F	MO		E=28 yrs	D	
4.3.19	F	pmt			F	by				
5.3.19	F	D			F	CN				
6.3.19	F	N			F	MO				
7.3.19	F	by			F	CN				
8.3.19	F	CN			F	by				
9.3.19	F	by			F	by				

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith SPIN 1313 44

DOB 4.12.91 LOC LCU

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NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

NAME Georgina Smith

LOCATION Skye

ORDER CODE 05

DRUG RECORDING SHEET

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE

5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith

DOB 4.12.91

SPIN 1313544

LOC Skye

ING1920

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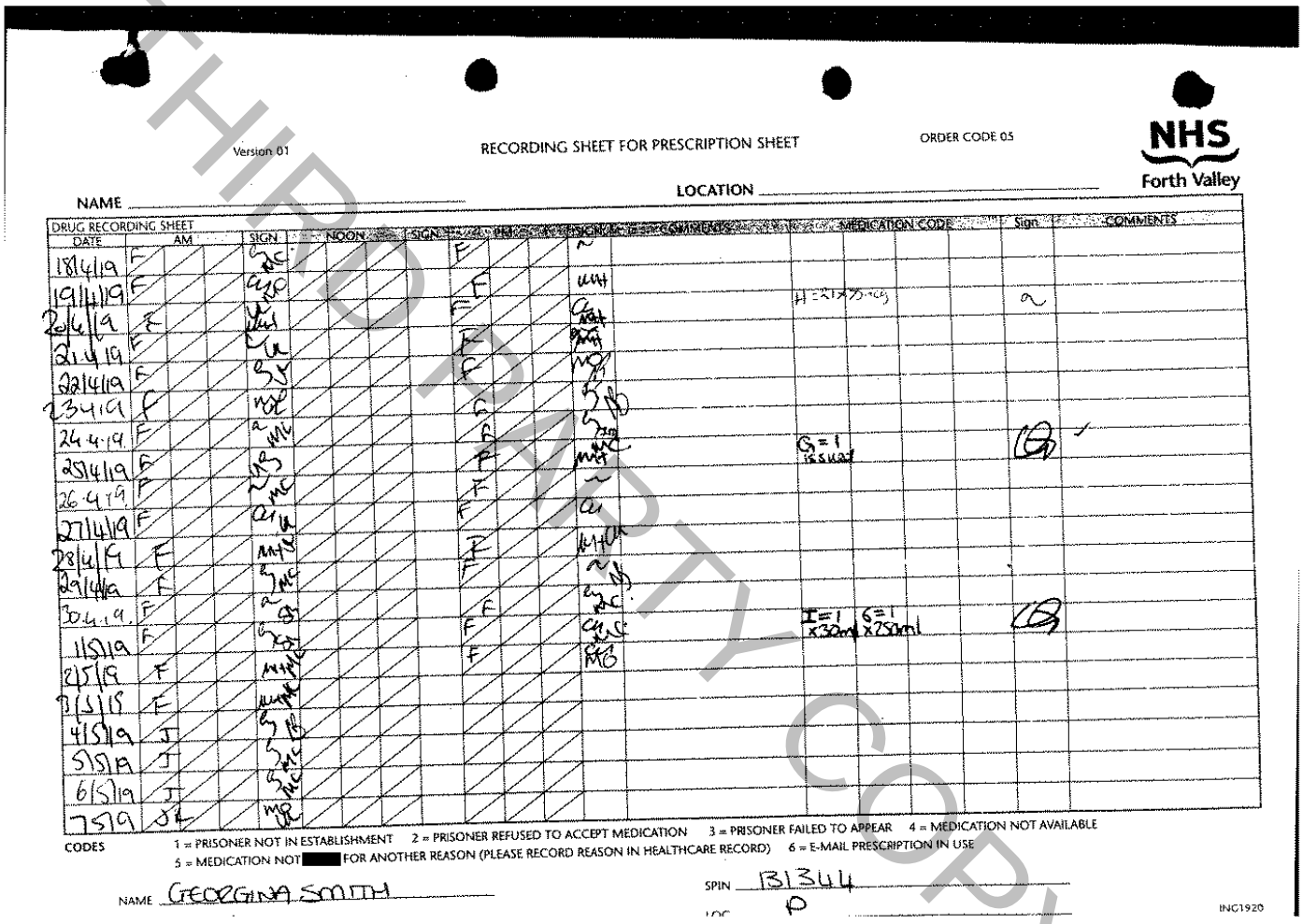

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME

LOCATION

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENTS
18/4/19	F				F					
19/4/19	F				F					
20/4/19	F				F					
21/4/19	F				F					
22/4/19	F				F					
23/4/19	F				F					
24/4/19	F				F			G=1 issued		
25/4/19	F				F					
26/4/19	F				F					
27/4/19	F				F					
28/4/19	F				F					
29/4/19	F				F					
30/4/19	F				F			I=1 x30ml G=1 x250ml		
1/5/19	F				F					
2/5/19	F				F					
3/5/19	F									
4/5/19	J									
5/5/19	J									
6/5/19	J									
7/5/19	JK									

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT [redacted] FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME GEORGINA SMITH

SPIN 131344

LOC D

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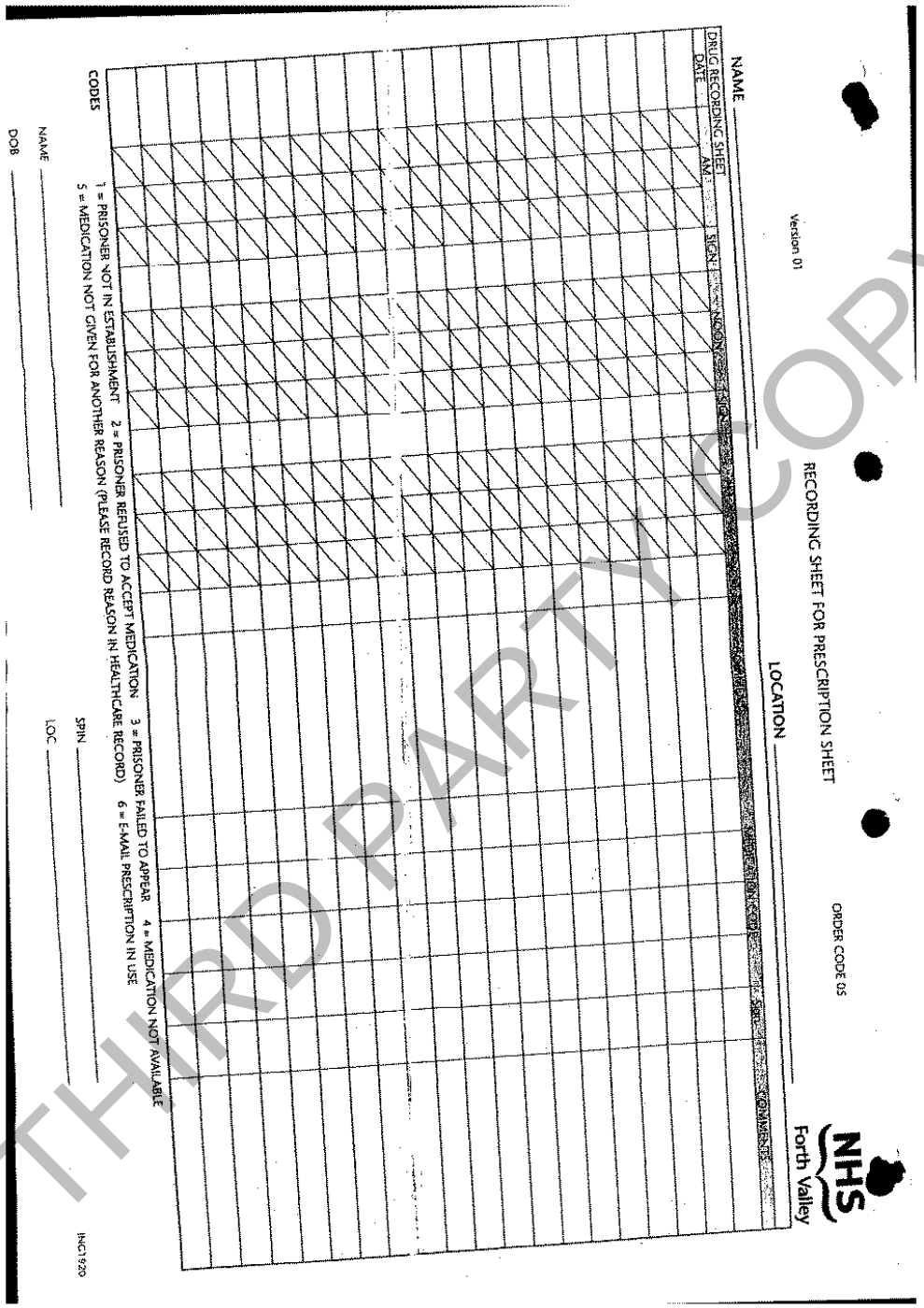

NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

ORDER CODE 05

NAME _____

LOCATION _____

DRUG RECORDING SHEET

DATE	SIGN	AM/NOON/PM	DOSE	QUANTITY	SIGN

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
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SPIN _____

LOC _____

NAME _____

DOB _____

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NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 03

ORDER CODE 05

NAME _____ LOCATION _____

DRUG RECORDING SHEET

DATE	AM SIGN	NOON SIGN	PM SIGN	BED TIME SIGN	CODE	STAFF INITIALS	COMMENTS
8/5/19	AM						
9/5/19	FE						
10/5/19	FE						
11/5/19	AMM						
12/5/19	FE						
13/5/19		NO					
14/5/19		NO					
15/5/19							
16/5/19							
17/5/19							
18/5/19		NO					
19/5/19							

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME _____ SPIN _____

LOC _____

ING1920

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NHS Forth Valley

Version 01

ORDER CODE 06

Side B

Start Date: 31/1/18

Kardex Re-

Prescription Sheet No: 1 of 1

written Date: 22/8/18

common vole.

"AS REQUIRED" PRESCRIPTION — HMP

	Start Date	Review Date	Stop Date	Drugs (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Date	Initls
1	22/8/18	22/8/19		SENNA	15mg	O	PRN [redacted]	M	Eliane			NB23/10/18	
2	22/8/18	22/8/19		LACTULOSE	10-15ml	O	PRN BD	M	Eliane			NB23/10/18	
3	22/8/18	22/8/19		BISACODYL	10mg	O	PRN NOCTE	M	Eliane			NB23/10/18	
4	~~22/8/18~~	~~22/8/19~~		~~MEBEVERINE~~	~~135mg~~	~~O~~	~~TDS PRN~~	~~M~~	~~Eliane~~				
5	22/8/18	22/8/19		PROPRANOLOL LA	80mg	O	ONCE DAILY	M	Eliane			NB23/10/18	
6	22/8/18	22/8/19		CAPASAL SHAMPOO	1APP	TOP	3x WEEKLY	M	Eliane			NB23/10/18	
7	22/8/18	22/12/18	22/8/19	CETIRIZINE	10mg	O	OD.	M	Eliane			NB23/10/18	
8	~~22/8/18~~	~~22/12/18~~	~~22/8/18~~	~~INDOMETACIN~~	~~50mg~~	~~O~~	~~BD~~	~~M~~	~~Eliane~~				
9	22/8/18	22/8/19		OMEPRAZOLE	20mg	O	OD.	M	Eliane			NB23/10/18	
10	30/10/18	30/10/19		MELOXICAM	7.5mg	O	ONCE DAILY	M	C			NB15.1.19	
11	30/10/18	30/9/19		MEBEVERINE	135mg	O	TDS PRN	M	C			NB15.1.19	
12	14/11/18		1/12	BONJELA	1APP	TOP	PRN GUMS	C	Eliane				
13	26/11/18	26/11/19		ZEROBASE CREAM	1APP	TOP	PRN	M	Eliane			NB15/1/19	
14													

Once Only Prescriptions

	Admin Data	[redacted]	DRUGS (Including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1										
2										
3										

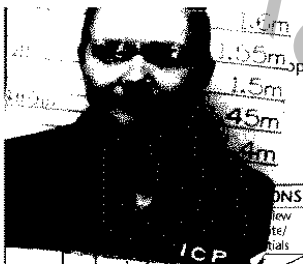
NAME: Georgina Smith SPIN: 131344 DOB: 4/12/91 LOCATION: Skye ward ALLERGIES: NKDA

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

ING1919

iGPR Report

iGPR Report



plementary kardex

METHADONE	Y	N
SUBOXONE	Y	N

Version 01

ORDER CODE 04

Side A

Start Date: 31 / 1 / 18.

Prescription Sheet No: 1 of 1

Kardex Re-written Date: 22 / 8 / 18

HMP Cantonvale

	Start Date	Review Date/ Initials	Stop Date/ Inits	Discontinued Date/Inits	MEDICATION FORM	Dose	Route	Times of Administration AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Inits
A	22/8/18 22/8/19			28/8/19	PREGABALIN	75mg	O	✓			✓	S	Maine	
B	~~20/9/18~~ 30/8/19		23/2/19 KR		~~PREGABALIN~~	~~75mg~~	~~O~~	~~✓~~			~~✓~~	~~W~~	~~C~~	30/8/18
C	9/10/18		9/1/19		BENZOYL PEROXIDE	1APP	TOP	✓				M	Maine	23/10/18
D	19/11/18		10 DOSE		FLUCONAZOLE	150mg	O	ONE	OFF	DOSE		C	Maine	
E	20.11.18	20/12/19	22/12/19	24/1/19	DESOGESTREL	75micrograms	O	✓				M		15.1.19
F	24/12/19	24/12/19	3.5.2019 KR		PREGABALIN	75mg	O	✓			✓	S	Maine	12.3.19
G	20/3/19	20/12/19			SODIUM CROMOGLICATE 4% DROPS	1DROP	EYE	✓	✓	✓	✓	M	Maine	
H	18/4/19	18/4/19 TZ			DESOGESTREL	75micrograms	O	✓				M		
I	30/4/19	30/7/19			ZINERYT	1APP	TOP	✓			✓	M	Maine	
J	4.5.19		10.5.19 KR		PREGBALIN	75mg	O	✓				S		
K	4.5.19	10.5.19 KR	30.11.19 KR		SERTRALINE	25mg	O	✓				S		
L	11.5.19	11.5.19 KR	17.5.19 KR		SERTRALINE	50mg	O	✓				S		
M	18.5.19	18.5.19 KR			SERTRALINE	50mg	O	✓				W		
N														
O														
P														

NAME: Georgina Smith SPIN: 131344 DOB: 4/12/91 LOCATION: Skye ALLERGIES: NKDA

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

NHS Confidential: Personal data should be locked

[redacted]

PRISON COPY DRAFT

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Filename: igprda202606181522240.pdf
Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

HMP & YOI Polmont

NHS
Forth Valley

Name: Georgina Smith
Spin: 131344
Location: [redacted] 3/38

Dob: 04/12/1991
Admission Date: 24.05.19

✓ I wish to further discuss Sexual Health and Blood Borne Virus Testing

✓ I wish to be considered for the Hepatitis Vaccination programme

✓ [redacted] due/overdue a smear test and would like an appointment (females only)

○ I do not wish to further discuss [redacted] Health, Blood Borne Virus Testing/vaccination programme I understand that I can self refer at any point if I change my mind.

Please tick the appropriate box with your choice and place the letter in the Healthcare letter box located within your [redacted]

Once your request has been submitted an appointment (if required) will be generated for you to attend.

Patient's signature: G. Smith

Date: 26.5.19

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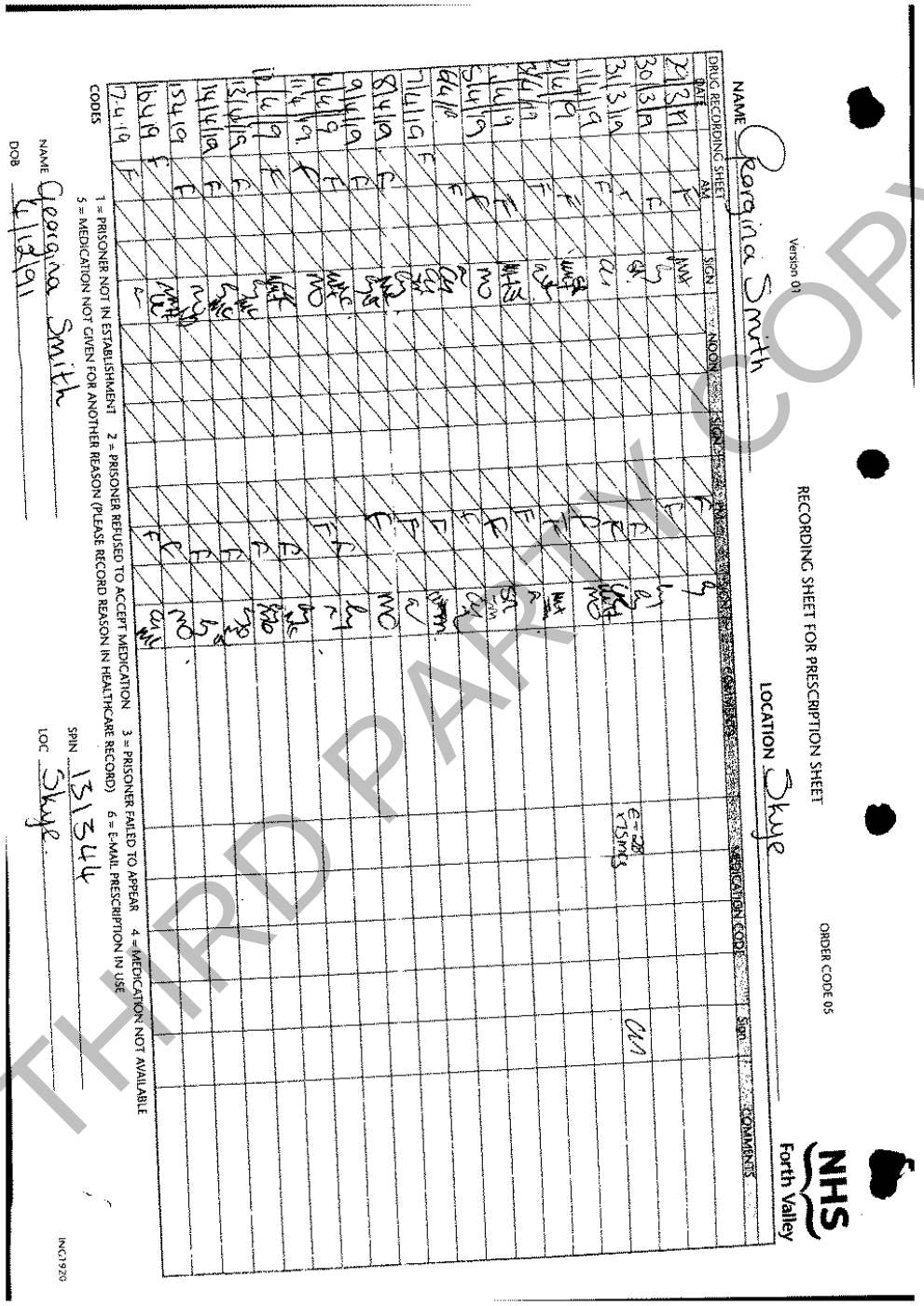
Extension:.tif
Pages:



NHS Confidential: Personal data about a patient

NAME Georgina Smith

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

LOCATION Skye

ORDER CODE 05

NHS Forth Valley

DRUG RECORDING SHEET

DATE	AM SIGN	NOON SIGN	PM SIGN	MEDICATION CODE	Sign	COMMENTS
27.3.19	F	F	F	4		
30.3.19	F	F	F	4		
31.3.19	F	F	F	4		
1.4.19	F	F	F	4		
2.4.19	F	F	F	4		
3.4.19	F	F	F	4		
4.4.19	F	F	F	4		
5.4.19	F	F	F	4		
6.4.19	F	F	F	4		
7.4.19	F	F	F	4		
8.4.19	F	F	F	4		
9.4.19	F	F	F	4		
10.4.19	F	F	F	4		
11.4.19	F	F	F	4		
12.4.19	F	F	F	4		
13.4.19	F	F	F	4		
14.4.19	F	F	F	4		
15.4.19	F	F	F	4		
16.4.19	F	F	F	4		
17.4.19	F	F	F	4		

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith

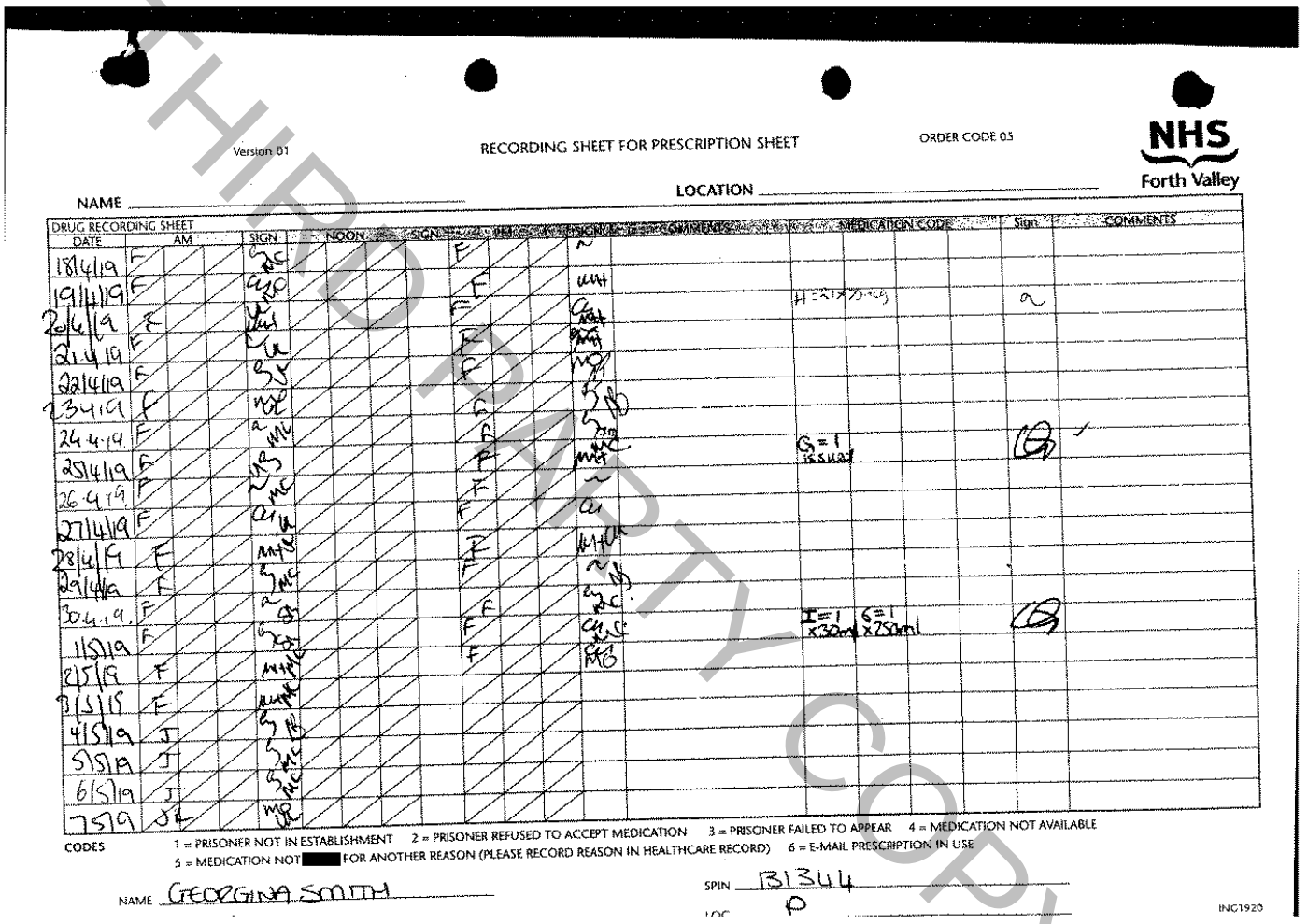
DOB 4.12.91

SPIN 1313544

LOC Skye

ING1920

THIRD PARTY COPY



Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME

LOCATION

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENTS
18/4/19	F				F					
19/4/19	F				F					
20/4/19	F				F					
21/4/19	F				F					
22/4/19	F				F					
23/4/19	F				F					
24/4/19	F				F			G=1 issued		
25/4/19	F				F					
26/4/19	F				F					
27/4/19	F				F					
28/4/19	F				F					
29/4/19	F				F					
30/4/19	F				F			I=1 x30ml G=1 x250ml		
1/5/19	F				F					
2/5/19	F				F					
3/5/19	F									
4/5/19	J									
5/5/19	J									
6/5/19	J									
7/5/19	JK									

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT [redacted] FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME GEORGINA SMITH

SPIN 131344

LOC D

ING1920

THIRD PARTY COPY

iGPR Report

NHS Confidential. Personal data about a patient

NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

ORDER CODE 05

NAME _____

LOCATION _____

DRUG RECORDING SHEET

DATE	SIGN	AM/NOON/PM	DRUG	STRENGTH	QUANTITY

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

SPIN _____

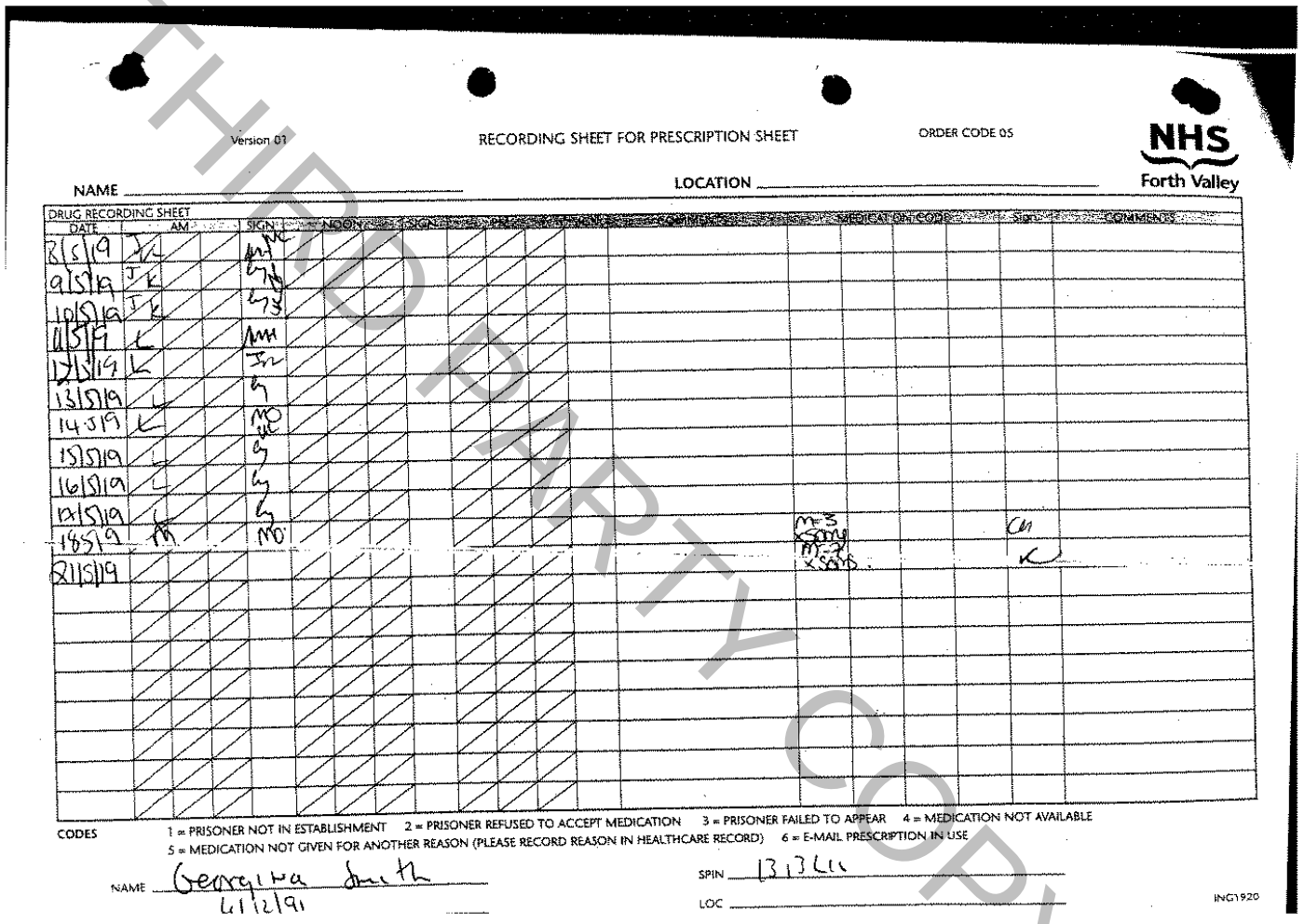
LOC _____

NAME _____

DOB _____

IHG1920

THIRD PARTY COPY



Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME

LOCATION

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE				SIGN	COMMENTS
8/5/19	JK	MK											
9/5/19	JK	JK											
10/5/19	JK	JK											
11/5/19	L	MM											
12/5/19	K	JK											
13/5/19	L	L											
14/5/19	L	NO											
15/5/19	L	L											
16/5/19	L	L											
17/5/19	L	L											
18/5/19	M	NO						M=3				CM	
21/5/19												K	

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith
6/12/91

SPIN 131611

LOC

ING1920

THIRD PARTY COPY

iGPR Report

THIRD PARTY COPY

NHS Forth Valley

Version 01

ORDER CODE 06

Side B

Start Date: 31/1/18

Kardex Re-

Prescription Sheet No: 1 of 1

written Date: 22/8/18

HMP

common vole.

"AS REQUIRED" PRESCRIPTION

	Start Date	Review Date	Stop Date	Drugs (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Date	Initls
1	22/8/18	22/8/19		SENNA	15mg	O	PRN [redacted]	m	Eliane			N823108	
2	22/8/18	22/8/19		LACTULOSE	10-15ml	O	PRN BD	m	Eliane			N823108	
3	22/8/18	22/8/19		BISACODYL	10mg	O	PRN NOCTE	m	Eliane			N823108	
4	~~22/8/18~~	~~22/8/19~~		~~MEBEVERINE~~	~~135mg~~	~~O~~	~~TDS PRN~~	~~m~~	~~Eliane~~				
5	22/8/18	22/8/19		PROPRANOLOL LA	80mg	O	ONCE DAILY	m	Eliane			N823108	
6	22/8/18	22/8/19		CAPASAL SHAMPOO	1APP	TOP	3x WEEKLY	m	Eliane			N823108	
7	22/8/18	22/12/18	22/8/19	CETIRIZINE	10mg	O	OD.	m	Eliane			N823108	
8	~~22/8/18~~	~~22/12/19~~	~~22/8/18~~	~~INDOMETACIN~~	~~50mg~~	~~O~~	~~BD~~	~~m~~	~~Eliane~~				
9	22/8/18	22/8/19		OMEPRAZOLE	20mg	O	OD.	m	Eliane			N823108	
10	30/10/18	30/10/19		MELOXICAM	7.5mg	O	ONCE DAILY	m	C			N815119	
11	30/10/18	30/9/19		MEBEVERINE	135mg	O	TDS PRN	m	C			N815119	
12	14/11/18		1/12	BONJELA	1APP	TOP	PRN GUMS	c	Eliane				
13	26/11/18	26/11/19		ZEROBASE CREAM	1APP	TOP	PRN	m	Eliane			N815119	
14													

Once Only Prescriptions

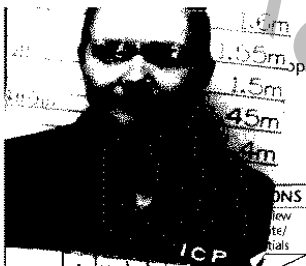
	Admin Data	[redacted]	DRUGS (Including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1										
2										
3										

NAME: Georgina Smith SPIN: 131344 DOB: 4/12/91 LOCATION: Skye ward ALLERGIES: NKDA

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

ING1919

iGPR Report



plementary kardex

Version 01

METHADONE	Y	N
SUBOXONE	Y	N

ORDER CODE 04

Side A

Start Date: 31 / 1 / 18.

Kardex Re-written Date: 22 / 8 / 18

Prescription Sheet No: 1 of 1

HMP Cantonvale

	Review Date/ Initials	Stop Date/ Inits	Discontinued Date/Inits	MEDICATION FORM	Dose	Route	Times of Administration: AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Inits
A	22/8/18 22/8/19		28/4/19	PREGABALIN	75mg	O	✓			✓	S	Maine	
B	~~20/9/18~~ 30/8/19	23/2/19 KR		~~PREGABALIN~~	~~75mg~~	~~O~~	~~✓~~			~~✓~~	~~W~~	~~C~~	30/8/18
C	9/10/18	9/1/19		BENZOYL PEROXIDE	1APP	TOP	✓				M	Maine	23/10/18
D	19/11/18	10 DOSE		FLUCONAZOLE	150mg	O	ONE	OFF	DOSE		C	Maine	
E	~~20.11.18~~	20/12/19 22/12/19	24/4/19 KR	~~DESOGESTREL~~	~~75micrograms~~	~~O~~	~~✓~~				~~M~~	~~S~~	15.4.19
F	24/2/19	24/2/19	3.5.2019 KR	PREGABALIN	75mg	O	✓			✓	S	Maine	12.3.19
G	20/3/19	20/2/19		SODIUM CROMOGLICATE EYE DROPS	1DROP	EYE	✓	✓	✓	✓	M	Maine	
H	18/4/19	18/4/19 12		DESOGESTREL	75mcg	O	✓				M	Maine	
I	30/4/19	30/7/19		ZINERYT	1APP	TOP	✓			✓	M	Maine	
J	4.5.19		10.5.19 KR	PREGBALIN	75mg	O	✓				S	[illegible]	
K	4.5.19	10.5.19 KR	10.5.19 KR	SERTRALINE	25mg	O	✓				S	[illegible]	
L	11.5.19	11.5.19 KR	17.5.19 KR	SERTRALINE	50mg	O	✓				S	[illegible]	
M	18.5.19	18.5.19 KR		SERTRALINE	50mg	O	✓				W	[illegible]	
N													
O													
P													

NAME: Georgina Smith SPIN: 131344 DOB: 4/12/91 LOCATION: Skye ALLERGIES: NKDA

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

NHS Confidential: Personal data should be locked

PRISON COPY NOT FOR CIRCULATION

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18-Jun-2026 SARA
Additional: Scanned Document

Filename: igprda202606181522190.pdf
Extension:.tif
Pages:

THIRD PARTY COPY

Scanned Document
18-Jun-2026 SARA
Additional: Scanned Document

Filename: igprda202606181522210.pdf
Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

[redacted]

REFUSAL TO ATTEND APPOINTMENT

[redacted] HOUSE LEVEL 3

NHS
Forth Valley

You have been generated a health care appointment which you are now refusing to attend.

Please note you will **NOT** automatically receive another appointment.

Reason for refusal, please tick relevant box			
Work Party		Education	
Gym		Programs	
Visit		[redacted]	
Other (please describe) IN BED			

Patient Name GEORGINA SMITH Spin: 1J1J44

Date of birth: 14/12/91
(DOB - must be filled in)

Patient Signature: _____

Officer Witnessing Signature: _____

Date of **missed** appointment: 5/8/19 AM/PM AM

Clinic refused NCA

Please complete and return to health centre

[redacted]

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Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

NHS
Forth Valley

Forth Valley
Recovery Community

Polmont Recovery Walk – Friday 20th September 2019

Come and join us in the biggest celebration of RECOVERY from addictions & mental health.

Lets walk together celebrating and acknowledging the many achievements of all those involved in RECOVERY and show that RECOVERY is a reality for many people.

If you are intrested in attending please return the below slip to the Health centre by using the box located in your [redacted] no later than Thursday 12th September.

RECOVERY WALK

I, Georgina Smith spin: 131344 would like to attend recovery walk.

FAO: PHAS Admin
Health Centre

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18-Jun-2026 SARA
Additional: Scanned Document

Filename: igprda202606181522140.pdf
Extension:.tif
Pages:

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NHS
Forth Valley

Forth Valley
Recovery Community

Polmont Recovery Walk – Friday 20th September 2019

Come and join us in the biggest celebration of RECOVERY from addictions & mental health.

Lets walk together celebrating and acknowledging the many achievements of all those involved in RECOVERY and show that RECOVERY is a reality for many people.

If you are intrested in attending please return the below slip to the Health centre by using the box located in your [redacted] no later than Thursday 12th September.

RECOVERY WALK

I, Georgina Smith spin: 131344 would like to attend recovery walk.

FAO: PHAS Admin
Health Centre

THIRD PARTY COPY

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18-Jun-2026 SARA
Additional: Scanned Document

Filename: igprda202606181522230.pdf
Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

HMP & YOI Polmont

NHS
Forth Valley

Name: Georgina Smith
Spin: 131344
Location: [redacted] 3/38

Dob: 04/12/1991
Admission Date: 24.05.19

✓ I wish to further discuss Sexual Health and Blood Borne Virus Testing

✓ I wish to be considered for the Hepatitis Vaccination programme

✓ [redacted] due/overdue a smear test and would like an appointment (females only)

○ I do not wish to further discuss [redacted] Health, Blood Borne Virus Testing/vaccination programme I understand that I can self refer at any point if I change my mind.

Please tick the appropriate box with your choice and place the letter in the Healthcare letter box located within your [redacted]

Once your request has been submitted an appointment (if required) will be generated for you to attend.

Patient's signature: G. Smith

Date: 26.5.19

THIRD PARTY COPY

Scanned Document
18-Jun-2026 SARA
Additional: Scanned Document

Filename: igprda202606181522110.pdf
Extension:.tif
Pages:

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to scan

NHS
Forth Valley

HMP & YOI POLMONT
MEDICAL REQUISITION

This form should only be completed if there is a clear clinical justification for requisition.

Name:	Georgina Smith	**DOB:**	04/12/1991
Spin:	131344	**Location:**	[redacted]

Medical request:

Due to medical history this lady will require lacto-free milk and fat-free diet, thank you.

Date Completed:	16/10/2019	**Review Date:**	16/10/2020
Print Name:	Aileen [redacted]	**Sign:**	AA

Notes

- Scan original copy to patient's Docman.
- Book a review appointment on vision if necessary.
- When complete photocopy and send a copy to the patient's [redacted] and a copy to the relevant department.
- Document on patient's vision record.

Last reviewed - Sept 2016

THIRD PARTY COPY

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Filename: igprda202606181522200.pdf
Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

[redacted]

REFUSAL TO ATTEND APPOINTMENT

[redacted] HOUSE LEVEL 3

NHS
Forth Valley

You have been generated a health care appointment which you are now refusing to attend.

Please note you will **NOT** automatically receive another appointment.

Reason for refusal, please tick relevant box			
Work Party		Education	
Gym		Programs	
Visit		[redacted]	
Other (please describe) IN BED			

Patient Name GEORGINA SMITH Spin: 1J1J44

Date of birth: 14/12/91
(DOB - must be filled in)

Patient Signature: _____

Officer Witnessing Signature: _____

Date of **missed** appointment: 5/8/19 AM/PM AM

Clinic refused NCA

Please complete and return to health centre

[redacted]

THIRD PARTY COPY

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18-Jun-2026 SARA
Additional: Scanned Document

Filename: igprda202606181522120.pdf
Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

to scan

NHS
Forth Valley

HMP & YOI POLMONT
MEDICAL REQUISITION

This form should only be completed if there is a clear clinical justification for requisition.

Name:	Georgina Smith	**DOB:**	04/12/1991
Spin:	131344	**Location:**	[redacted]

Medical request:

Due to medical history this lady will require lacto-free milk and fat-free diet, thank you.

Date Completed:	16/10/2019	**Review Date:**	16/10/2020
Print Name:	Aileen [redacted]	**Sign:**	AA

Notes

- Scan original copy to patient's Docman.
- Book a review appointment on vision if necessary.
- When complete photocopy and send a copy to the patient's [redacted] and a copy to the relevant department.
- Document on patient's vision record.

Last reviewed - Sept 2016

THIRD PARTY COPY

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18-Jun-2026 SARA
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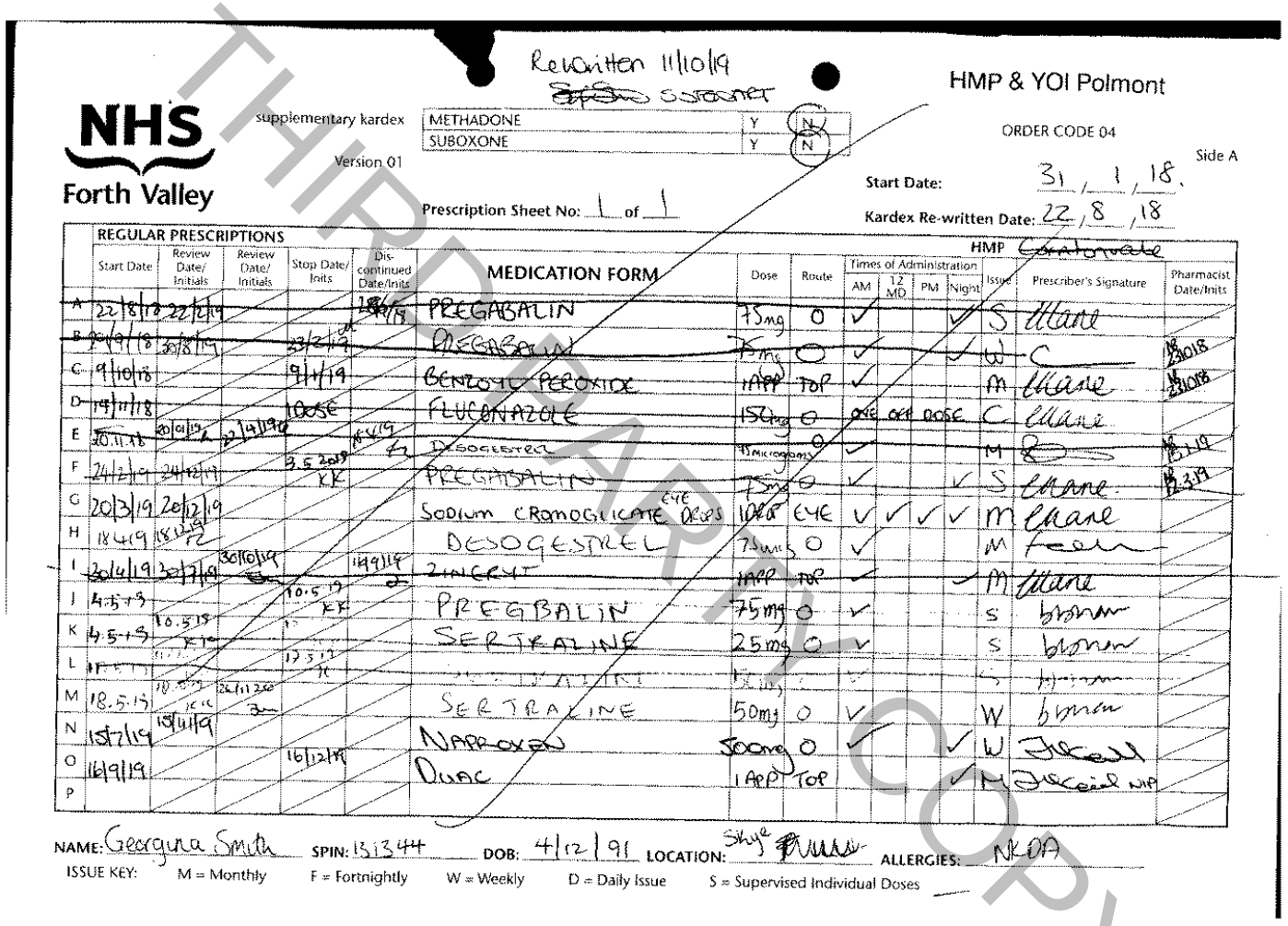

NHS Forth Valley

supplementary kardex

Version 01

Rewritten 11/10/19

HMP & YOI Polmont

ORDER CODE 04

Side A

METHADONE	Y / N
SUBOXONE	Y / N

Start Date: 31/1/18

Prescription Sheet No: 1 of 1

Kardex Re-written Date: 22/8/18

HMP Cardonald

NHS Confidential: Personal data about a patient

REGULAR PRESCRIPTIONS

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Inits	Dis-continued Date/Inits	MEDICATION FORM	Dose	Route	Times of Administration: AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Inits
A	22/8/18	22/2/19			18/9/18	PREGABALIN	75mg	O	✓			✓	S	Ellane	
B	22/9/18	30/8/19		23/2/19		PREGABALIN	75mg	O	✓			✓	W	C	18/10/18
C	9/10/18			9/1/19		BENZOYL PEROXIDE	1APP	TOP	✓				M	Ellane	23/10/18
D	19/11/18			LOOSE		FLUCONAZOLE	150mg	O	ONE	OR DOSE			C	Ellane	
E	30.11.18	30/1/19	22/4/19		6/4/19		15 MICROGRAMS	O	✓				M		15.2.19
F	24/12/19	24/12/19		3.5.2019 KK		PREGABALIN	75mg	O	✓			✓	S	Ellane	15.3.19
G	20/3/19	20/12/19				Sodium CROMOGLICATE EYE DROPS	10MG	EYE	✓	✓	✓	✓	M	Ellane	
H	18/4/19	18/12/19 PZ				DESOGESTREL	75mg	O	✓				M	Fearn	
I	30/4/19	30/7/19		30/10/19	14/9/19	ZINCRYT	1APP	TOP	✓			✓	M	Ellane	
J	4.5.19			10.5.19 KK		PREGBALIN	75mg	O	✓				S	brown	
K	4.5.19	10.5.19				SERTRALINE	25mg	O	✓				S	brown	
L	[illegible]			12.5.19 JC		[illegible]	[illegible]	[illegible]	[illegible]				S	[illegible]	
M	18.5.19	18.11.19 JC	22/11/19 JC			SERTRALINE	50mg	O	✓				W	brown	
N	15/7/19	15/1/19				NAPROXEN	500mg	O	✓			✓	W	Jkeall	
O	16/9/19			16/12/19		DIVAC	1APPT	TOP				✓	M	Jkeall WP	
P															

NAME: Georgina Smith SPIN: 131344 DOB: 4/12/91 LOCATION: Skye ALLERGIES: NKDA

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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iGPR Report

NHS Confidential: Personal data about a patient

NHS
Forth Valley

Version 01

HMP & YOI Polmont

ORDER CODE 06

Side B

Kardex Re-

Start Date: 31/1/18

written Date: 22/8/18

Prescription Sheet No: 1 of 1

HMP

"AS REQUIRED" PRESCRIPTION

	Start Date	Review Date	Stop Date	Drug: (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Date	Discontinued Pharmacist Sig's	Date	Init's
1	22/8/18	22/8/19		SENNA	15mg	PO	PRN	M					
2	22/8/18	22/8/19		LACTULOSE	10ml	PO	BD	M					
3	22/8/18	22/8/19	22/8/20	BISACODYL	10mg	PR	PRN	M					
4	22/8/18	22/8/19		Methocarbamol	1000mg	PO	TDS PRN	M					
5	22/8/18	22/8/19		PARACETAMOL/CODEINE	500mg	PO	QID PRN	M					
6	22/8/18	22/8/19		CANNABIS SUBLINGUAL	1MP	TOP	3X WEEKLY	M					
7	22/8/18	22/8/19		CETIRIZINE	10mg	PO	OD	M					
8	22/8/18	22/8/19		TRAMADOL	50mg	PO	BD	M					
9	22/8/18	22/8/19		OMEPRAZOLE	20mg	PO	OD	M					
10	22/8/18	22/8/19		AMLODIPINE	5mg	PO	DAILY	M					
11	22/8/18	22/8/19		ATORVASTATIN	40mg	PO	NOCTE	M					
12	24/11/18	1/1/2		DOXYCYCLINE	100mg	PO	BD	M					
13	24/11/18	24/11/19		CHLORHEXIDINE	1MP	TOP	PRN	M					
14	8/11/19	8/11/19		DESMOPRESSIN	1MP	TOP	PRN	M					

Once Only Prescriptions

	Admin Date	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Init's
1										
2										
3										

NAME: Georgina Smith SPIN: 133444 DOB: 4/12/91 LOCATION: Skye ALLERGIES: NKDA

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = ■ Issue S = Supervised Individual Doses

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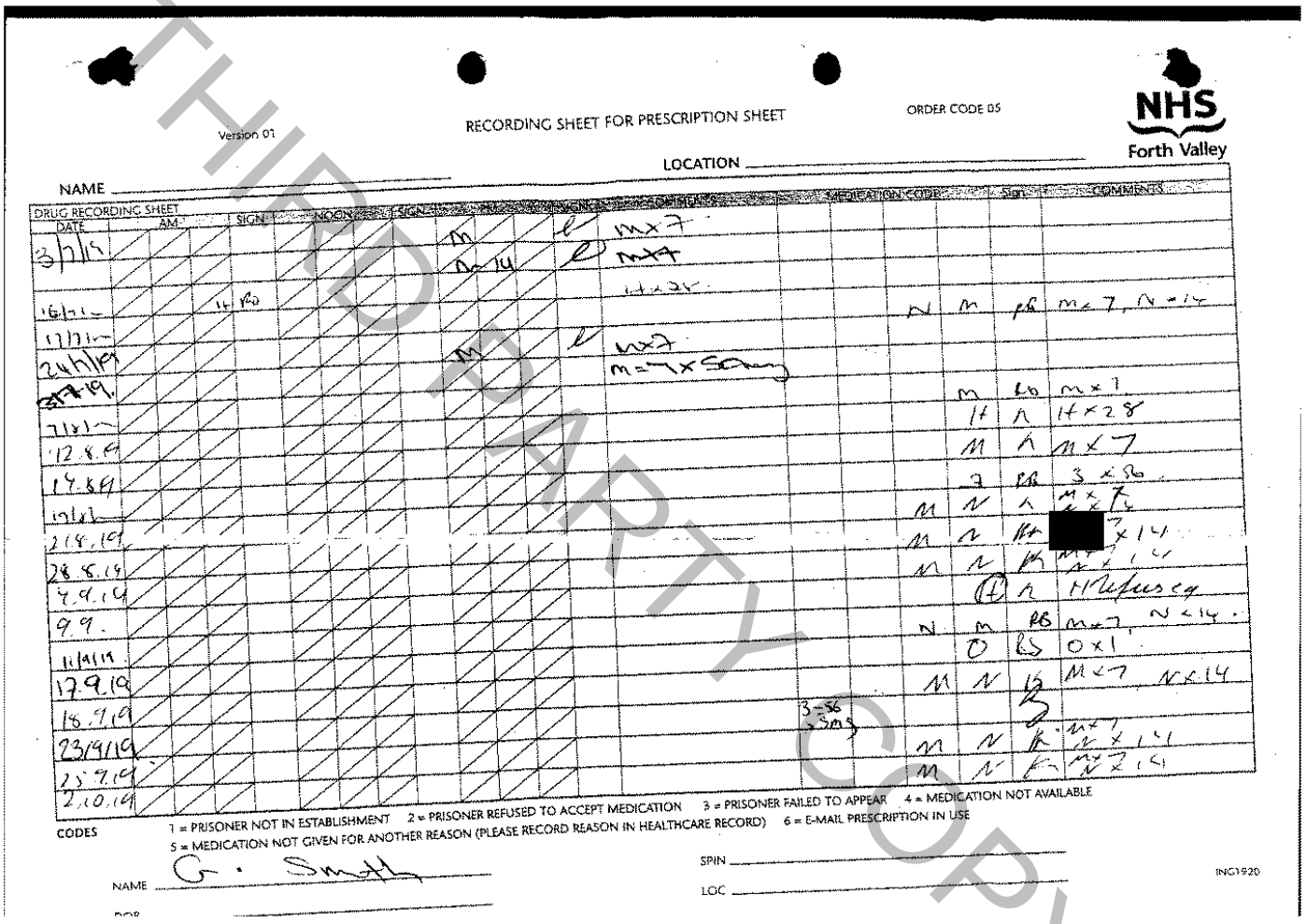

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

ORDER CODE 05

NHS Forth Valley

NAME

LOCATION

DRUG RECORDING SHEET

DATE | AM SIGN | NOON SIGN | PM SIGN | COMMENTS | MEDICATION CODE | SIGN | COMMENTS

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME G. Smith

SPIN

LOC

DOB

ING1920

THIRD PARTY COPY

NHS Confidential: Pe[redacted] data about a patient

iGPR Report

NHS Confidential: Personal data about a patient

NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

ORDER CODE 05

LOCATION

NAME

DRUG RECORDING SHEET

DATE | AM SIGN | NOON SIGN | PM SIGN | MEDICATION CODE | SIGN | COMMENTS

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME

DOB

SPIN

LOC

INCT1920

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NHS
Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

Version 01

LOCATION

NAME

DRUG RECORDING SHEET DATE	AM SIGN	NOON SIGN	PM SIGN	MEDICATION CODE	COMMENTS
18/4/19	F		F		
19/4/19	F		F		
20/4/19	F		F		
21/4/19	F		F		
22/4/19	F		F		
23/4/19	F		F		
24/4/19	F		F		
25/4/19	F		F		
26/4/19	F		F		
27/4/19	F		F		
28/4/19	F		F		
29/4/19	F		F		
30/4/19	F		F		
1/5/19	F		F		
2/5/19	F		F		
3/5/19	F		F		
4/5/19	F		F		
5/5/19	F		F		
6/5/19	F		F		
7/5/19	F		F		

CODES
1 = PRISONER ■ IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
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NAME Gregorina Smith

SPIN 131344

LOC P

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NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

NAME Regina Smith

LOCATION Skye

ORDER CODE 05

DRUG RECORDING SHEET

DATE	ASU	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENTS
4.3.19	F	RW								
3.3.19	F									
2.3.19	F									
1.3.19	F									
28.2.19	F									
27.2.19	F									
26.2.19	F									
25.2.19	F									
24.2.19	F									
23.2.19	F									
22.2.19	F									
21.2.19	F									
20.2.19	F									
19.2.19	F									
18.2.19	F									
17.2.19	F									
16.2.19	F									
15.2.19	F									
14.2.19	F									
13.2.19	F									
12.2.19	F									
11.2.19	F									
10.2.19	F									
9.2.19	F									
8.2.19	F									
7.2.19	F									
6.2.19	F									
5.2.19	F									
4.2.19	F									
3.2.19	F									
2.2.19	F									
1.2.19	F									
31.1.19	F									
30.1.19	F									
29.1.19	F									
28.1.19	F									
27.1.19	F									
26.1.19	F									
25.1.19	F									
24.1.19	F									
23.1.19	F									
22.1.19	F									
21.1.19	F									
20.1.19	F									
19.1.19	F									
18.1.19	F									
17.1.19	F									

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NAME Regina Smith

DOB 4.12.91

SPIN 131344

LOC Skye

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Flu Vaccination Consent Form

Name Georgina Smith **Spin** 131344

- I agree to be given a flu vaccination by a trained nurse.
- I confirm I have not already received a flu vaccination for this flu season.
- I declare that the information I have given on this form is correct and complete.

Any allergies:	
Medical allergies Food allergies (chicken or egg)	No
Eligible patient group	~~No~~ Yes
Are you feeling well today (please circle)	(Yes) No

Signed G. Smith **Date** 6.11.19

[redacted]

Vaccination lot number	Lot P190120851
Vaccination expiry date	
Injection site	R deltoid
Route of injection	im
Administered by [redacted]	Signed [redacted] Date 06/11/19

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Extension:.tif
Pages:

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Flu Vaccination Consent Form

Name Georgina Smith **Spin** 131344

- I agree to be given a flu vaccination by a trained nurse.
- I confirm I have not already received a flu vaccination for this flu season.
- I declare that the information I have given on this form is correct and complete.

Any allergies:	
Medical allergies Food allergies (chicken or egg)	No
Eligible patient group	~~No~~ Yes
Are you feeling well today (please circle)	(Yes) No

Signed G. Smith **Date** 6.11.19

[redacted]

Vaccination lot number	Fluenz Tetra 2019/2020 season 0.5 ml Lot: P190120851
Vaccination expiry date	
Injection site	R deltoid
Route of injection	IM
Administered by [redacted]	Signed [redacted] Date 06/11/19

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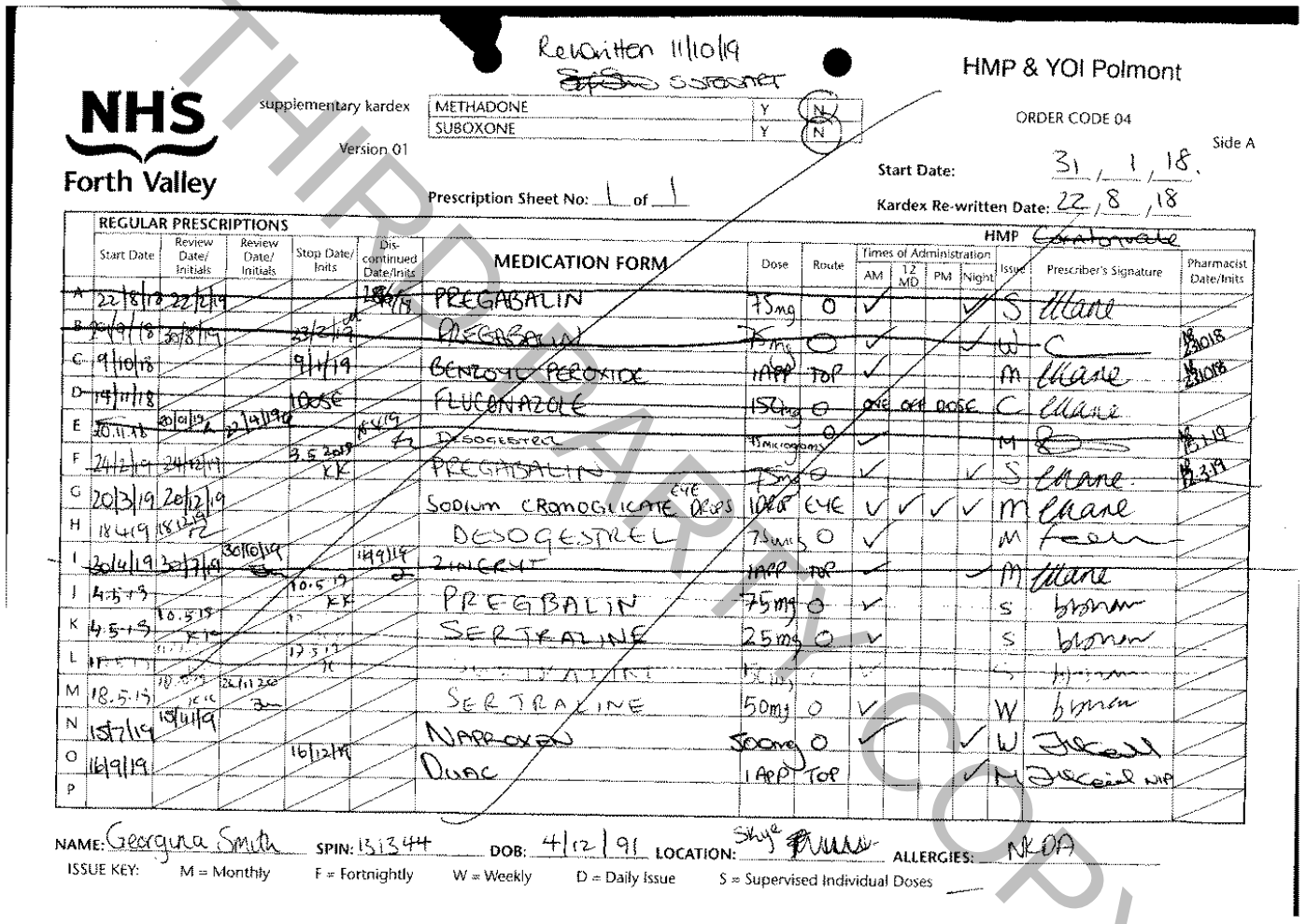

NHS Forth Valley

supplementary kardex

Version 01

Rewritten 11/10/19

HMP & YOI Polmont

ORDER CODE 04

Side A

METHADONE	Y / N
SUBOXONE	Y / N

Start Date: 31/1/18

Kardex Re-written Date: 22/8/18

Prescription Sheet No: 1 of 1

HMP Cardonald

NHS Confidential: Personal data about a patient

REGULAR PRESCRIPTIONS

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Inits	Dis-continued Date/Inits	MEDICATION FORM	Dose	Route	Times of Administration: AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Inits
A	22/8/18	22/2/19			18/9/18	PREGABALIN	75mg	O	✓			✓	S	Ellane	
B	22/9/18	30/8/19		23/2/19		PREGABALIN	75mg	O	✓			✓	W	C	18/10/18
C	9/10/18			9/1/19		BENZOYL PEROXIDE	1APP	TOP	✓				M	Ellane	23/10/18
D	19/11/18			DOSE		FLUCONAZOLE	150mg	O	one	OFF DOSE			C	Ellane	
E	30.11.18	30/1/19	22/4/19		4/4/19										
F	24/12/19	24/12/19		3.5.2019 KK		DESOGESTREL	150 Micrograms	O	✓				M		18.2.19
						PREGABALIN	75mg	O	✓			✓	S	Ellane	18.3.19
G	20/3/19	20/12/19				Sodium CROMOGLICATE	10MG	EYE DROPS	✓	✓	✓	✓	M	Ellane	
H	18/4/19	18/12/19				DESOGESTREL	75mg	O	✓				M	Fearn	
I	30/4/19	30/7/19	30/10/19		14/9/19	2 INCRY	1APP	TOP	✓			✓	M	Ellane	
J	4.5.19			10.5.19 KK		PREGBALIN	75mg	O	✓				S	brown	
K	4.5.19	10.5.19				SERTRALINE	25mg	O	✓				S	brown	
L	[illegible]			12.5.19 JC		[illegible]	[illegible]						S	[illegible]	
M	18.5.19	18.11.19	22/11/19			SERTRALINE	50mg	O	✓				W	brown	
N	15/7/19	15/1/19				NAPROXEN	500mg	O	✓			✓	W	Jkeall	
O	16/9/19			16/12/19		DIAZ	1APPT	TOP				✓	M	Jkeall WP	
P															

NAME: Georgina Smith SPIN: 131344 DOB: 4/12/91 LOCATION: Skye ALLERGIES: NKDA

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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iGPR Report

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NHS
Forth Valley

Version 01

HMP & YOI Polmont

ORDER CODE 06

Side B

Kardex Re-

Prescription Sheet No: 1 of 1

Start Date: 31/1/18

written Date: 22/8/18

HMP

"AS REQUIRED" PRESCRIPTION

	Start Date	Review Date	Stop Date	Drug: (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Date	Discontinued Pharmacist Sig's	Date	Initls
1	22/8/18	22/8/19		SENNA	15mg	O	PRN	M					
2	22/8/18	22/8/19		LACTULOSE	10ml	O	BD	M					
3	22/8/18	22/8/19	22/8/20	BISACODYL	10mg	O	PRN	M					
4	22/8/18	22/8/19		Methocarbamol	1000mg	O	TDS PRN	M					
5	22/8/18	22/8/19		PARACETAMOL LA	665mg	O	ONCE DAILY	M					
6	22/8/18	22/8/19		CANNASOL SUBLINGUAL	1MP	TDS	3X WEEKLY	M					
7	22/8/18	22/8/19		CETIRIZINE	10mg	O	OD	M					
8	22/8/18	22/8/19		TRAMADOL	50mg	O	BD	M					
9	22/8/18	22/8/19		OMEPRAZOLE	20mg	O	OD	M					
10	22/8/18	22/8/19		AMLODIPINE	5mg	O	ONCE DAILY	M					
11	22/8/18	22/8/19		ATORVASTATIN	40mg	O	ONCE DAILY	M					
12	24/8/18	1/1/2		BUDESONIDE	200mcg	INH	BD	M					
13	24/8/18	24/8/19		FLUTICASONE	125mcg	INH	BD	M					
14	24/8/18	24/8/19		OSTEOCARE SDS	1MP	TDS	PRN	M					

Once Only Prescriptions

	Admin Data	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1										
2										
3										

NAME: Georgina Smith SPIN: 131344 DOB: 4/12/91 LOCATION: Skye ALLERGIES: NKDA

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = ■ Issue S = Supervised Individual Doses

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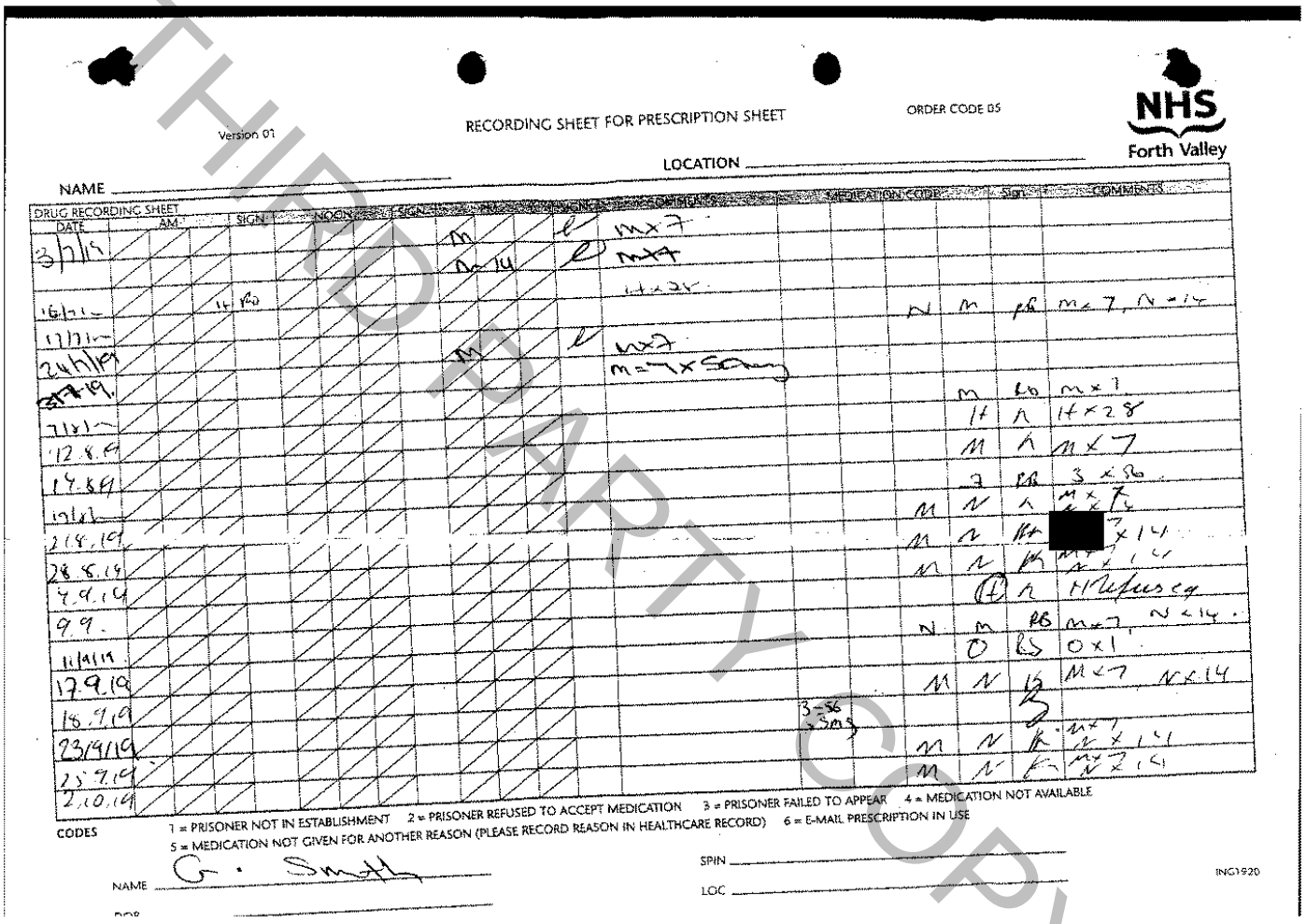

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

ORDER CODE 05

NHS Forth Valley

NAME

LOCATION

DRUG RECORDING SHEET

DATE	AM SIGN	NOON SIGN	PM SIGN	COMMENTS	MEDICATION CODE	SIGN	COMMENTS
3/7/19		M	L	mx7			
		M-14	L	mx7			
16/7/19	14 RD			14x2y	N	M	PR m=7, N=14
17/7/19							
24/7/19		M	L	mx7			
31/7/19				m=7x5days			
7/8/19						M	Lo mx1
12.8.19						14	N 14x28
14.8.19						M	N mx7
19/8/19						3	PR 3x30
21.8.19					M	N	N mx7
28.8.19					M	N	PR [redacted] x14
4.9.19					M	N	PR
9.9.						(D)	N Mefusc q
11/9/19					N	M	PR m=7, N=14.
17.9.19						O	LS 0x1
18.9.19					M	N	LS M=7 Nx14
23/9/19				3-56 5mg	M	N	PR mx7 Nx14
25.9.19					M	N	PR mx7 Nx14
2.10.19							

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NAME G. Smith

DOB

SPIN

LOC

ING1920

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NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

ORDER CODE 05

NAME

LOCATION

DRUG RECORDING SHEET

DATE	AM SIGN	NOON SIGN	PM SIGN	MEDICATION CODE	SIGN	COMMENTS
21/5/19	MM					
21/5/19	MM					
19/5/19	MM					
19/5/19	MM					
17/5/19	MM					
13/5/19	MM					
14/5/19	MM					
15/5/19	MM					
16/5/19	MM					
18/5/19	MM					
19/5/19	MM					
21/5/19	MM					
22/5/19	MM					
29/5/19	MM					
12.6.19	MM					
12/6/19	MM					
9/6/19	MM					
24/6/19	MM					

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NAME

DOB

SPIN

LOC

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NHS
Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

Version 01

NAME

LOCATION

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	MEDICATION CODE	Sign	COMMENTS
18/4/19									
19/4/19									
20/4/19									
21/4/19									
22/4/19									
23/4/19									
24/4/19									
25/4/19									
26/4/19									
27/4/19									
28/4/19									
29/4/19									
30/4/19									
1/5/19									
2/5/19									
3/5/19									
4/5/19									
5/5/19									
6/5/19									
7/5/19									

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NAME Gregorina Smith

SPIN 131344

LOC P

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NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

NAME Regina Smith

LOCATION Skye

ORDER CODE 05

DRUG RECORDING SHEET

DATE	INIT	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENTS
4.3.19	RW									
3.3.19										
2.3.19										
1.3.19										
28.2.19										
27.2.19										
26.2.19										
25.2.19										
24.2.19										
23.2.19										
22.2.19										
21.2.19										
20.2.19										
19.2.19										
18.2.19										
17.2.19										
16.2.19										
15.2.19										
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13.2.19										
12.2.19										
11.2.19										
10.2.19										
9.2.19										
8.2.19										
7.2.19										

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NAME Regina Smith

DOB 4.12.91

SPIN 131344

LOC Skye

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Appendix 1: In-Possession Medication Patient Agreement Form

I understand that during my period in custody I may have medication issued to me to keep in my possession either within the prison and/ or during a [redacted] visit. I understand the following conditions will apply:

1. I will take or use the medication as instructed by the doctor or nurse.
2. I will take the medication at the times prescribed.
3. I will take full responsibility for the safe keeping of the medication in my cell safe and will not share my pin number or key with anyone else.
4. I understand that lost or stolen medication will be reported by me to a member of staff immediately and will not normally be replaced.
5. I will not accept medication from other offenders for my own use or to trade.
6. Any unused medication will be returned immediately by me to healthcare staff.
7. Empty containers will be returned to healthcare staff.
8. I will not give my medication to any other person.
9. I will not attempt to store up or otherwise accumulate medication.
10. I understand that checks will be made of my In-possession medication and I may be required to produce urine samples for analysis.
11. Medication will be kept ONLY in the container in which it is issued and I will not tamper with it in any way.
12. If I do not follow this agreement and these conditions, I will be reported to healthcare staff immediately who will withdraw in possession medication. My medication will be reviewed which may result in that the medication is stopped.

Declaration of Understanding
I have [redacted] and/or had explained to me all of the above conditions. I agree to abide by these and understand that any failure to do so may result in my in-possession medication being withdrawn.

Name of prisoner: Georgina Smith
DOB: 13/3/44
Number: 04/12/91
Signature: G. Smith
Date: 30.10.19
Witness Name: K. Romano
Witness Signature:

Discontinuation

In-possession agreement form discontinued by (insert name) : .....
On __/__/__ for the following reason: .....
.....

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Extension:.tif
Pages:

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Appendix 1: In-Possession Medication Patient Agreement Form

I understand that during my period in custody I may have medication issued to me to keep in my possession either within the prison and/ or during a [redacted] visit. I understand the following conditions will apply:

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2. I will take the medication at the times prescribed.
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5. I will not accept medication from other offenders for my own use or to trade.
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7. Empty containers will be returned to healthcare staff.
8. I will not give my medication to any other person.
9. I will not attempt to store up or otherwise accumulate medication.
10. I understand that checks will be made of my In-possession medication and I may be required to produce urine samples for analysis.
11. Medication will be kept ONLY in the container in which it is issued and I will not tamper with it in any way.
12. If I do not follow this agreement and these conditions, I will be reported to healthcare staff immediately who will withdraw in possession medication. My medication will be reviewed which may result in that the medication is stopped.

Declaration of Understanding
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Name of prisoner: Georgina Smith
DOB: 13/3/44
Number: 04/12/91
Signature: G. Smith
Date: 30.10.19
Witness Name: K. Romano
Witness Signature:

Discontinuation

In-possession agreement form discontinued by (insert name) : .....
On __/__/__ for the following reason: .....
.....

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[redacted]

HMP YOI Polmont
Health Centre
Brightons
FK2 0AB

NHS Forth Valley

Date: 25.03.20

Our Ref: MR
SPIN: 131344

MEDICAL IN CONFIDENCE

Georgina Smith
131344
[redacted]3

Dear Georgina

I just wanted to write to you to let you know that I have unfortunately had to cancel all upcoming appointments for the foreseeable future. As you will be aware, the recent health pandemic COVID-19 has brought about restrictions in the way that we can operate. Unfortunately all routine clinics have had to be cancelled which means that I won't be able to see you in person for some time.

Please also make sure that you let staff know [redacted] staff or NHS) if you feel you are struggling Look after yourself and others and I hope to speak to you soon.

Yours sincerely,

Morag [redacted]
CGL

INVESTORS IN PEOPLE | Bronze

Chairman Alex Linkston CBE
Chief Executive Fiona Mackenzie MA (Hons) MBA CHIM DipHSM
Forth Valley NHS Board is the common name for Forth [redacted] Health Board
Registered Office: Carseview House, Castle Business Park, Stirling, FK9 4SW
www.nhsforthvalley.com Facebook.com/nhsforthvalley @nhsforthvalley

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IN POSSESSION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
S Smith	26/3/26	131344	B3	4/12/1999

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Sertraline	100mg	25/3/26	14	✓				28	26	+1

Time of check	

PRISONERS RESPONSE TO ANY DISCREPANCY: No discrepancy

Nurse Signature: _____ **Patient Signature:** _____

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** 26/3/26

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RESTRICTED – PERSONAL DATA

Healthcare Report for Parole Board/ Scottish Ministers

First Name:	Georgina	**Surname:**	Smith
Prison No	131344	**Date of Birth**	04-12-1991
Report covers period up to:			

Part 1- to be completed by prisoner

In order to consider your circumstances properly the Parole Board/ Scottish Minsters require information on your medical circumstances but only where this is relevant to their consideration of your case ie your suitability for release or the conditions that are to be attached to your release licence.

Please indicate (by deleting the appropriate statement) below whether you are willing to consent to the inclusion of a report on your state of health in the dossier. You should be aware that there may be information which medical staff consider that it is necessary to share in order to prevent the commission of a serious crime.

7

(A) I **give** my consent to the inclusion of a report on the state of my health in the dossier

~~B~~. I **refuse** my consent to the inclusion of a report on the state of my health in the dossier.

Signature G. Smith Date 27/07/2020

RESTRICTED – PERSONAL DATA
Page 1 of 1

1. CONSENT

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NHS Confidential: Personal data about a patient

IN POSSESSION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
S Smith	26/3/26	131344	B3	4/12/1999

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Sertraline	100mg	25/3/26	14	✓				28	26	+1

Time of check	

PRISONERS RESPONSE TO ANY DISCREPANCY: No discrepancy

Nurse Signature: [signature] **Patient Signature:**

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** 26/3/26

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Additional: Scanned Document

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Extension:.tif
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RESTRICTED – PERSONAL DATA

Healthcare Report for Parole Board/ Scottish Ministers

First Name:	Georgina	**Surname:**	Smith
Prison No	131344	**Date of Birth**	04-12-1991
Report covers period up to:			

Part 1- to be completed by prisoner

In order to consider your circumstances properly the Parole Board/ Scottish Minsters require information on your medical circumstances but only where this is relevant to their consideration of your case ie your suitability for release or the conditions that are to be attached to your release licence.

Please indicate (by deleting the appropriate statement) below whether you are willing to consent to the inclusion of a report on your state of health in the dossier. You should be aware that there may be information which medical staff consider that it is necessary to share in order to prevent the commission of a serious crime.

7.

(A) I **give** my consent to the inclusion of a report on the state of my health in the dossier

~~B~~. I **refuse** my consent to the inclusion of a report on the state of my health in the dossier.

Signature G. Smith Date 27/07/2020

RESTRICTED – PERSONAL DATA
Page 1 of 1

1. CONSENT

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IN POSSESSION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
G. Smith	15/4/20	131344	B3/38	4/12/91

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Nyka	23/3/20	28								
Sertraline	100mg	23/3/20	28	✓			✓	5	79	+ 74
								3	10	+ 7

Time of check 11.45

PRISONERS RESPONSE TO ANY DISCREPANCY:

Nyka → does not take anymore, wants discontinued - removed all
Sertraline → forgot to take some mornings

Nurse Signature: _____ **Patient Signature:** _____

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** 15/4/20

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NHS
Forth Valley

HMP & YOI POLMONT
MEDICAL REQUISITION

This form should only be completed if there is a clear clinical justification for requisition.

Name:	Georgina Smith	**DOB:**	04/12/1991
Spin:	131344	**Location:**	[redacted] 3/38

Medical request: Lactose free diet and lighter non spicy food. Post gall bladder removal.

Date Completed:	09/02/2020	**Review Date:**	09/12/2020
Print Name:	DCarruthers	**Sign:**	DC.

Notes

- Scan original copy to patient's Docman.
- Book a review appointment on vision if necessary.
- When complete photocopy and send a copy to the patient's [redacted] and a copy to the relevant department.
- Document on patient's vision record.

Last reviewed - Sept 2016

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IN POSSESSION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
G. Smith	15/4/20	131344	B3/38	4/12/91

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Nyko1	2.5	23/3/20	28				✓	5	7	+ 7
Sertraline	100mg	23/3/20	28	✓				3	10	+ 7

Time of check 11.45

PRISONERS RESPONSE TO ANY DISCREPANCY:

Nyko1 → does not take anymore, meds discontinued - removed all
Sertraline → forgot to take some mornings

Nurse Signature: _____ **Patient Signature:** _____

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** 15/4/20

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Forth Valley

HMP & YOI POLMONT
MEDICAL REQUISITION

This form should only be completed if there is a clear clinical justification for requisition.

Name:	Georgina Smith	**DOB:**	04/12/1991
Spin:	131344	**Location:**	[redacted] 3/38

Medical request: Lactose free diet and lighter non spicy food. Post gall bladder removal.

Date Completed:	09/02/2020	**Review Date:**	09/12/2020
Print Name:	DCarruthers	**Sign:**	DC.

Notes

- Scan original copy to patient's Docman.
- Book a review appointment on vision if necessary.
- When complete photocopy and send a copy to the patient's [redacted] and a copy to the relevant department.
- Document on patient's vision record.

Last reviewed - Sept 2016

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IN POSSESSION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
G. Smith	23/4/20	131344	B31 3B	04/12/91

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM NOON PM NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Sertraline	100	20/4/20	28	✓	25	25	

Time of check	

PRISONERS RESPONSE TO ANY DISCREPANCY:

No discrepancy with medication. Is asking for a review of medication

Nurse Signature: N. Hudda Patient Signature: G. Smithe

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: ... Continue .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature ..... **Date** 23.4.20

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Georgina Smith 4.12.91

13134.

CUMMING, [redacted] (NHS FORTH VALLEY)

Wed 13/05/2020 15:37

BROADFOOT, Holly (NHS FORTH VALLEY) [redacted]broadfoot@nhs.net>;

Citalopram 20mg please

+ Stop Sertaline 100mg . dismphy as per mtt.

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IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
G. Smith	12/5/20	131344	B3/38	4/12/91

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Sertraline	100mg	2014	28	✓				6	16	+10

Time of check | 14.45

PRISONERS RESPONSE TO ANY DISCREPANCY:

Doesn't [redacted] it

Nurse Signature: _____ **Patient Signature:** _____

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....

And decided to: .....

O Continue your medication on this occasion; however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** 12/05/20

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Pages:

Georgina Smith 4.12.91

13134.

CUMMING, [redacted] (NHS FORTH VALLEY)

Wed 13/05/2020 15:37

BROADFOOT, Holly (NHS FORTH VALLEY) [redacted]broadfoot@nhs.net>;

Citalopram 20mg please

+ Stop Sertaline 100mg . dismphy as per mtt.

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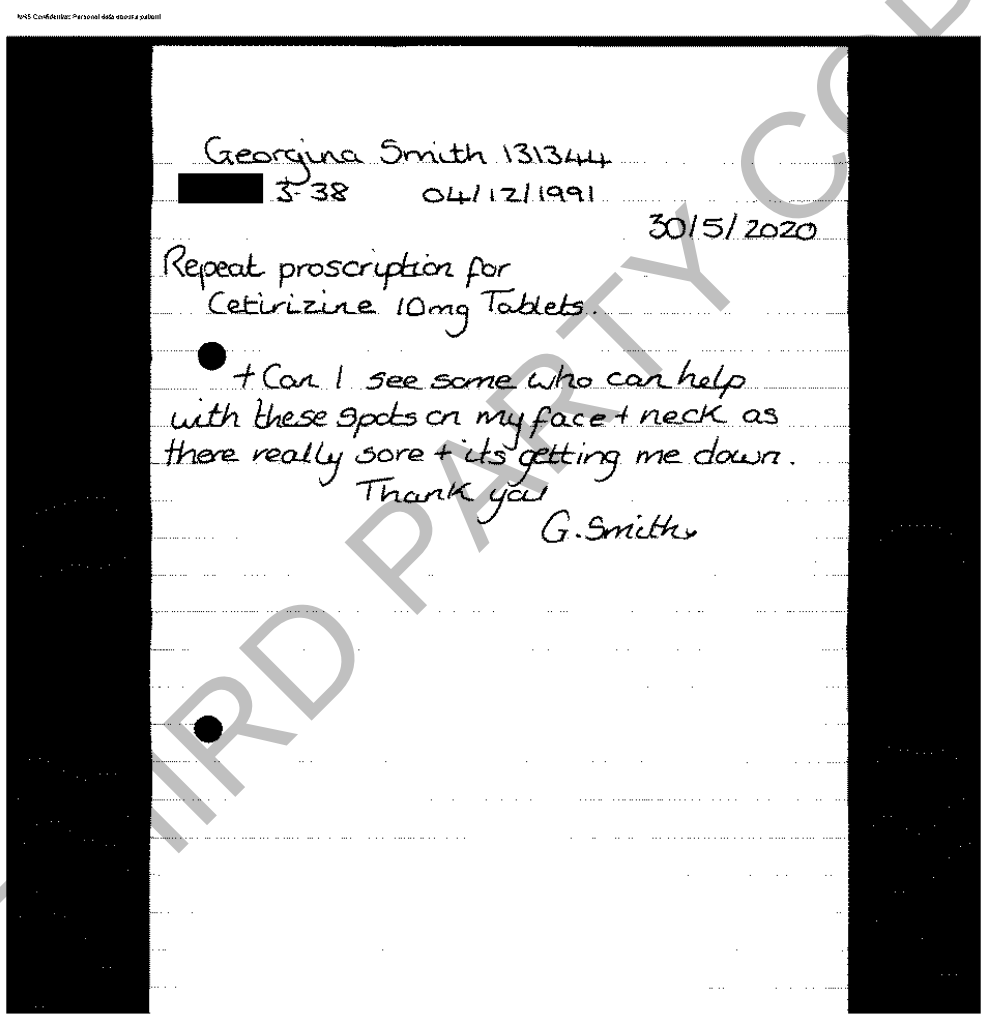

Georgina Smith 1313444
[redacted] 3-38 04/12/1991

30/5/2020

Repeat proscription for
Cetirizine 10mg Tablets.

+ Can I see some who can help with these spots on my face + neck as there really sore + its getting me down.

Thank you

G. Smith

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IN POSSESSION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
G. Smith	23/4/20	131344	B3138	04/12/91

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM NOON PM NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Sertraline	100	20/4/20	28	✓	25	25	

Time of check

PRISONERS RESPONSE TO ANY DISCREPANCY:

No discrepancy with medication. Is asking for a review of medication

Nurse Signature: N. Hudda Patient Signature: G. Smithe

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: ... Continue .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature ..... Date 23.4.20

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IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
G. Smith	12/5/20	131344	B3/38	4/12/91

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Sertraline	100mg	2014	28	✓				6	16	+10

Time of check | 14.45

PRISONERS RESPONSE TO ANY DISCREPANCY:

Doesn't [redacted] it

Nurse Signature: _____ **Patient Signature:** _____

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....

And decided to: .....

O Continue your medication on this occasion; however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** 12/05/20

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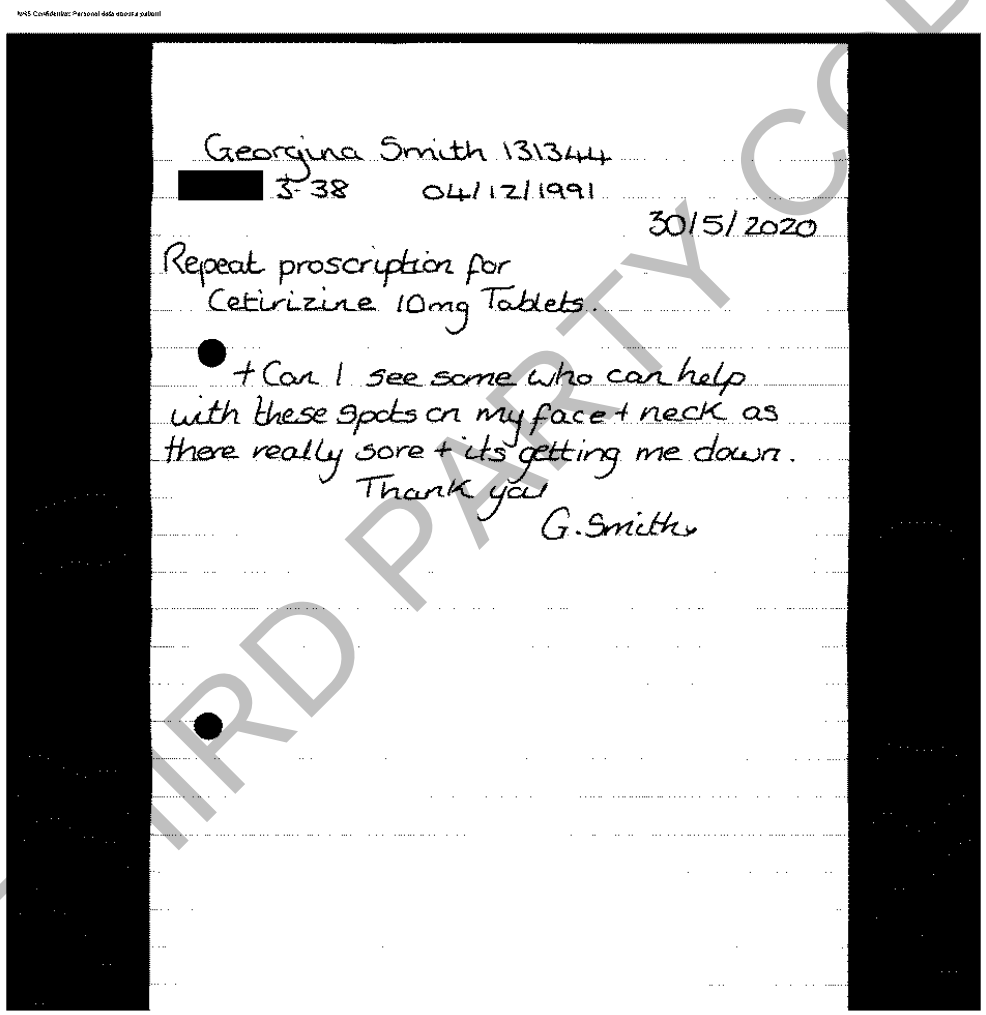

Georgina Smith 1313444
[redacted] 3-38 04/12/1991

30/5/2020

Repeat proscription for
Cetirizine 10mg Tablets.

+ Can I see some who can help with these spots on my face + neck as there really sore + its getting me down.

Thank you

G. Smith.

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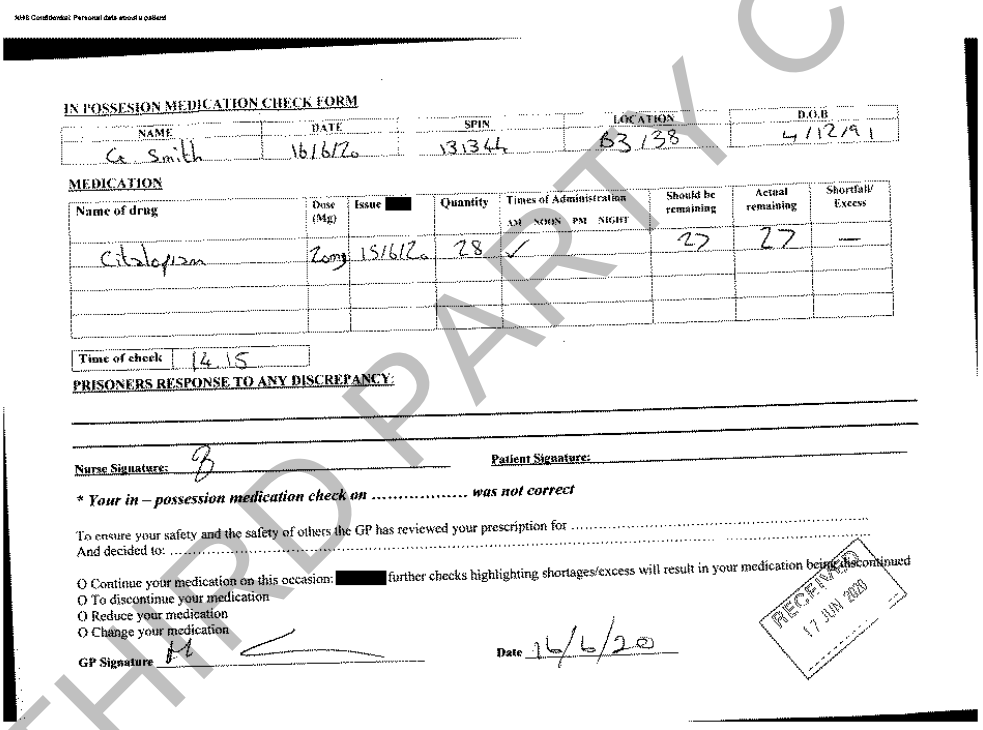

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IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
G. Smith	16/6/20	131344	B3/38	4/12/91

MEDICATION

Name of drug	Dose (Mg)	Issue [redacted]	Quantity	Times of Administration AM NOON PM NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Citalopram	20mg	13/6/20	28 ✓		27	27	—

Time of check 12.15

PRISONERS RESPONSE TO ANY DISCREPANCY:

Nurse Signature: B **Patient Signature:**

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion: [redacted] further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature [signature] **Date** 16/6/20

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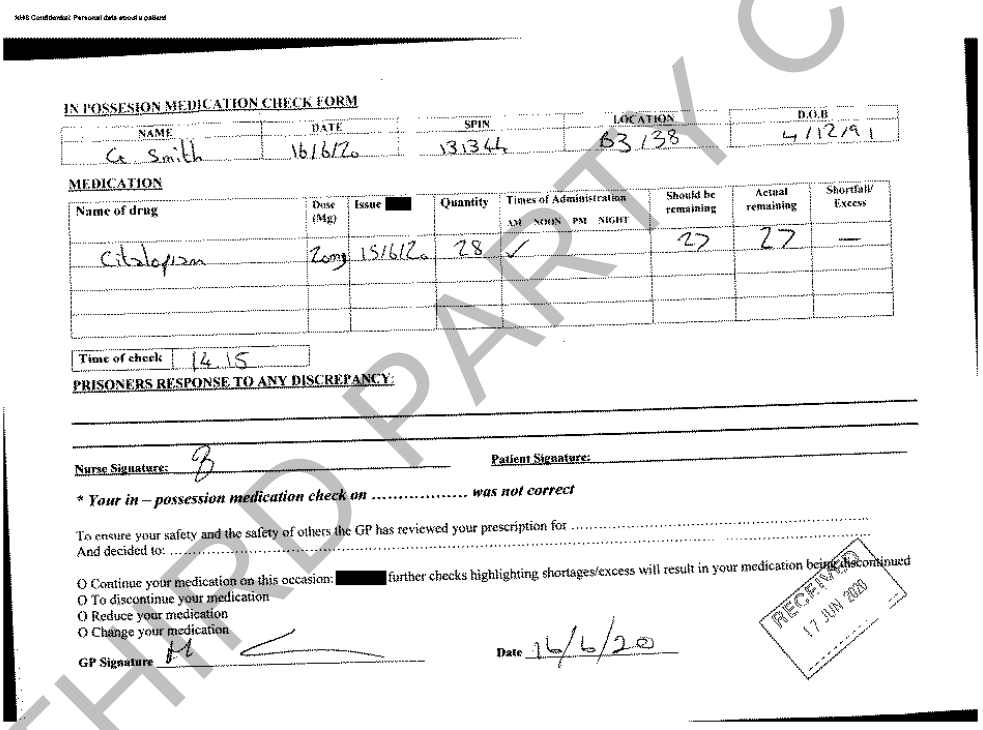

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IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
G Smith	16/6/20	131344	B3/38	4/12/91

MEDICATION

Name of drug	Dose (Mg)	Issue [redacted]	Quantity	Times of Administration AM NOON PM NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Citalopram	20mg	13/6/20	28 ✓		27	27	—

Time of check 12.15

PRISONERS RESPONSE TO ANY DISCREPANCY:

Nurse Signature: B **Patient Signature:**

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion: [redacted] further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature [signature] **Date** 16/6/20

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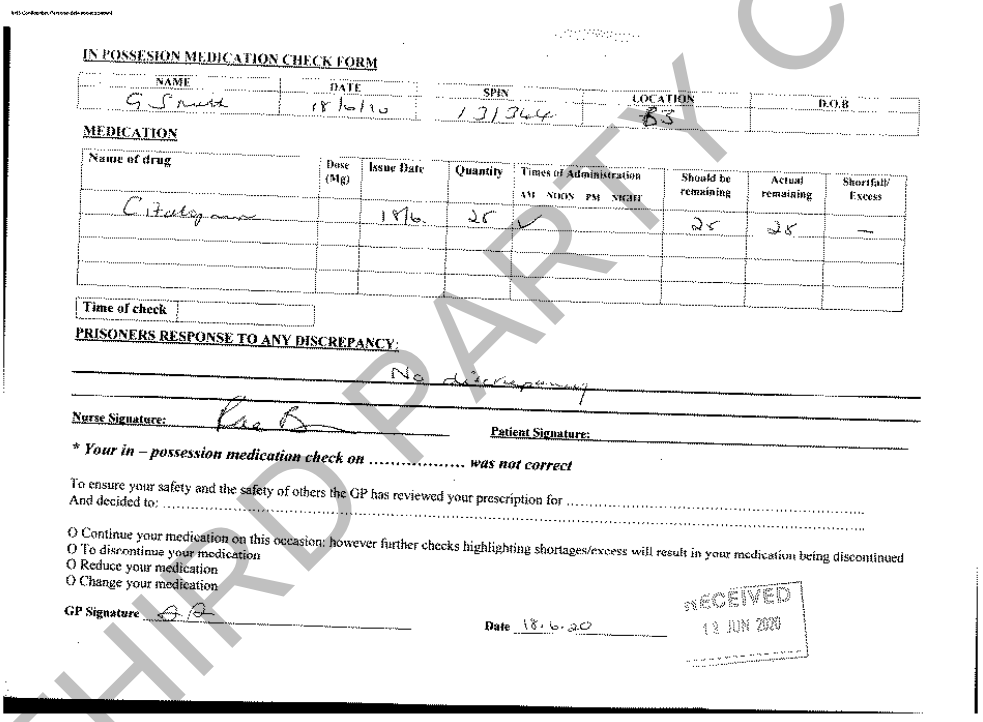

IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
G Smith	18/6/26	1/1/64	B3	

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM NOON PM NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Citalopram		18/6	28	✓	28	28	—

Time of check

PRISONERS RESPONSE TO ANY DISCREPANCY:

No discrepancy

Nurse Signature: [signature] **Patient Signature:**

Your in – possession medication check on ..... was not correct

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion; however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature [signature] **Date** 18.6.26

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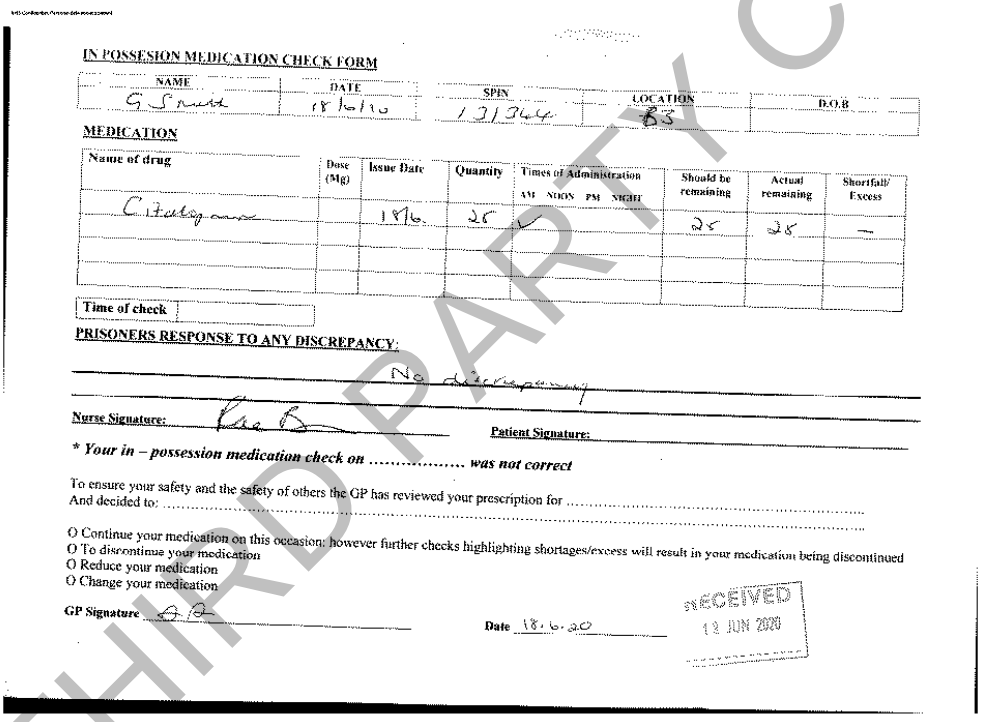

IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
G Smith	18/6/26	1/1/64	B3	

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM NOON PM NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Citalopram		18/6	28	✓	28	28	—

Time of check

PRISONERS RESPONSE TO ANY DISCREPANCY:

No discrepancy

Nurse Signature: [signature] **Patient Signature:**

Your in – possession medication check on ..... was not correct

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion; however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature [signature] **Date** 18.6.26

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NHS Forth Valley

supplementary kardex

Version 01

	Y	N
METHADONE		
SUBOXONE		

ORDER CODE 04

Side A

Start Date: ___/___/___

Prescription Sheet No: 1 of 1

Kardex Re-written Date: 5/3/20

HMP

	Start Date	Review Date/ Initials	Stop Date/ Initials	Discontinued Date/Initials	MEDICATION FORM	Dose	Route	Times of Administration: AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Initials
REGULAR PRESCRIPTIONS														
A	5/3/20	7/5/20												
B	3/3/20	5/5/20												
C	5/3/20	5/5/20												
D	11/3/20	2/4/21												
E	3/3/20	2/1/21												
F	20/3/20	20/5/20												
G														
H														
I														
J														
K														
L														
M														
N														
O														
P														

NAME: [redacted] CHI: [redacted]

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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Version 01

ORDER CODE 06

Side B

Start Date: ../../..

Kardex Re-

Prescription Sheet No: ■

written Date: 5/3/20

"AS REQUIRED" PRESCRIPTION HMP Cloose Polmont

	Start Date	Review Date	Stop Date	Drugs (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Date	Initls
1	5/3/20	5/9/20		NAPROXEN	500mg	O	BD PRN	M					
2	5/3/20	5/9/20		MORPHINE	15mg	O	TDS PRN	M					
3	5/3/20	5/9/20		DERMOL 500	1 APP	TOP	PRN	M					
4	5/3/20	5/3/21	9.4.20	? CHLORINE	1 APP	TOP	PRN	M					
5	5/3/20	5/3/21		CETIRIZINE	10mg	O	ONCE DAILY	M					
6	5/3/20	5/3/21		CHLORAL SHAMPOO	1 APP	TOP	TWICE 3 X WEEKLY	M					
7	5/3/20	5/3/21		PARACETAMOL 1g	1g	O	ONCE DAILY	M					
8	5/3/20	5/3/21		BISACODYL	10mg	O	NOCTE PRN	M					
9	5/3/20	5/3/21		LACTULOSE	10-15ml	O	BD PRN	M					
10	1/3/20	30/6/20		1% CREAM	1 APP	TOP	1-2 x DAILY	M					
11	9.4.20	9.4.21		CETRABEN CREAM 500g	1 APP	TOP	2-3 TIMES DAILY	M					
12													
13													
14													

Once Only Prescriptions

	Admin Data	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1	16.00	1604	CETRIZINE	10mg	O	ONCE DAILY	RM 16-04			
2										
3										

NAME: Chelsea Smith SPIN: 131344 DOB: 4/12/91 LOCATION: B ALLERGIES: NKDA

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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NAME

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

LOCATION

ORDER CODE 05

NHS Forth Valley

DRUG RECORDING SHEET

DATE	AM SIGN	NOON	PM SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENTS
12.3.20					10		20 x 6 10 x 1
18/3/20							
23/3/20				E=28 x 100ml	D 8 x 6 E=28		[redacted]
31/3/20				a=Seconal 8 x 56			
6.4.20					10		10 x 15g
11/4/20				S=28 10days	18 3		
13/4/20			11= gwen BD	S = 28 x 10DAYS			
20.4.20					B C	AL	6 x 28, 8 x 168
21.4.20							
24/4/20					5 2	5 x 5 C	
16/5/20					1	1 x14	
21/5/20				2 x 500mg 5 days		2 BE=reduce=18	
22.5.20					F		F x28
24.5.20				1= myself			
26.5.20							
29.6.20				1 x 14 (leuing)			
11/6/20					9 5mm	5	5 x 7 8
15/6/20					8=56 x 5mg		
23/6/20	F	SR			F	BB	F x 35

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME [redacted] Smith

DOB 4/12/91

SPIN 1313 51

LOC

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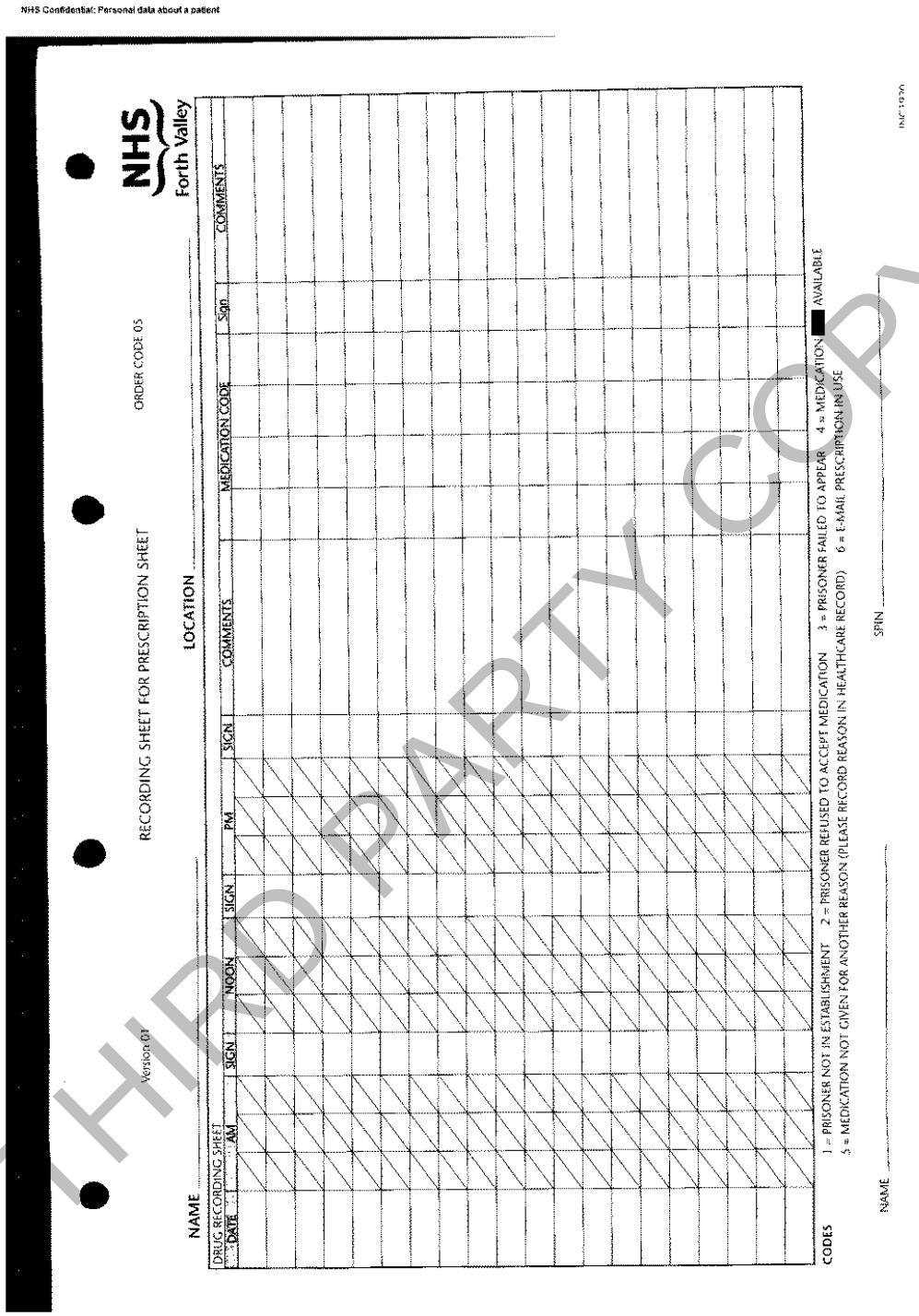

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iGPR Report

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NHS Forth Valley

supplementary kardex

Version 01

METHADONE	Y	N
SUBOXONE	Y	N

ORDER CODE 04

Side A

Start Date: ___/___/___

Prescription Sheet No: 1 of 1

Kardex Re-written Date: 5/3/20

HMP Peterhead

REGULAR PRESCRIPTIONS

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Inits	Dis-continued Date/Inits	MEDICATION FORM	Dose	Route	Times of Administration: AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Inits
A	5/3/20	7/5/20			11/3/20	SERTRALINE	50mg	O	✓				W		
B	5/3/20	5/11/20				PEPPERMINT OIL CAPS 0.2ml	1 Cap	O	✓	✓		✓	M		
C	5/3/20	5/11/20		20/4/20		HEROIN MORTAL CAPS	1 Tab	O				✓	M		
D	11/3/20	3/1/21			20/3/20	SERTRALINE	100mg	O	✓				W		
E	23/3/20	23/1/21		20/5/20		SERTRALINE	150mg	O	✓				M		
F	20/5/20	20/5/20				CITALOPRAM	20mg	O	✓				M		
G															
H															
I															
J															
K															
L															
M															
N															
O															
P															

Please give supervised AM 23.06. AL

NAME: Georgina Smith SPIN: 131344 DOB: [redacted] LOCATION: B ALLERGIES: NKDA

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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Version 01

ORDER CODE 06

Side B

Start Date: ___/___/___

Kardex Re-

Prescription Sheet No: ■

written Date: 5/3/20

"AS REQUIRED" PRESCRIPTION HMP Glade Polmont

	Start Date	Review Date	Stop Date	Drugs (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Date	Initls
1	5/3/20	5/9/20		NAPROXEN	500mg	O	BD PRN	M					
2	5/3/20	5/9/20		MORPHINE	15ml	O	TDS PRN	M					
3	5/3/20	5/9/20		DERMOL 500	1 APP	TOP	PRN	M					
4	~~5/3/20~~	~~5/3/21~~	9.4.20	~~CREAMOL~~	~~APP~~	~~TOP~~	~~PRN~~	~~M~~					
5	5/3/20	5/3/21		CETIRIZINE	10mg	O	ONCE DAILY	M					
6	5/3/20	5/3/21		CREAMOL SHAVING	1 APP	TOP	TWICE 3 X WEEKLY	M					
7	5/3/20	5/3/21		PARACETAMOL 1g	2	O	ONCE DAILY	M					
8	5/3/20	5/3/21		BISACODYL	10mg	O	NOCTE PRN	M					
9	5/3/20	5/3/21		LACTULOSE	10-15ml	O	BD PRN	M					
10	1/3/20	30/6/20		1% CREAM	1 APP	TOP	1-2 x DAILY	M	S				
11	9.4.20	9.4.21		CETRABEN CREAM 500g	1 APP	TOP	2-3 TIMES DAILY	M	[illegible]				
12													
13													
14													

Once Only Prescriptions

	Admin Data	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1	16.00	1604	CETRIZINE	10mg	O	ONCE DAILY [illegible]	BM	16-04		
2										
3										

NAME: Caitlin A Smith SPIN: 131344 DOB: 4/12/91 LOCATION: B ALLERGIES: NKDA

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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NAME

LOCATION

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

DRUG RECORDING SHEET DATE	AM SIGN	NOON	PM SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENTS
12.3.20					10		20 x 6 10 x 1
18/3/20							
23/3/20				E=28 x 10ms a=5ml x 56 doses	D x 28 c=28		[redacted]
31/3/20							
6.4.20					10		10 x 15g
11/4/20			11= gwen SN	S=28 tabs	18 3		
13/4/20				S=28 x 10ml			
20.4.20					B C	AL	E = 28, A x 168
24.4.20							
24/4/20					S N S C		
16/5/20					1		1 x 14
21/5/20							1 x BE = reduce = 18
15.5.20							~ F x 28
24.5.20				1= myself	F		
26.5.20							
9.6.20				1 x 14 (leaving)			
11/6/20							
15/6/20					8=56 x 5ml		
23/6/20	SR						

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE

5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME [redacted] Smith

DOB 4/12/91

SPN 131[redacted]

LOC

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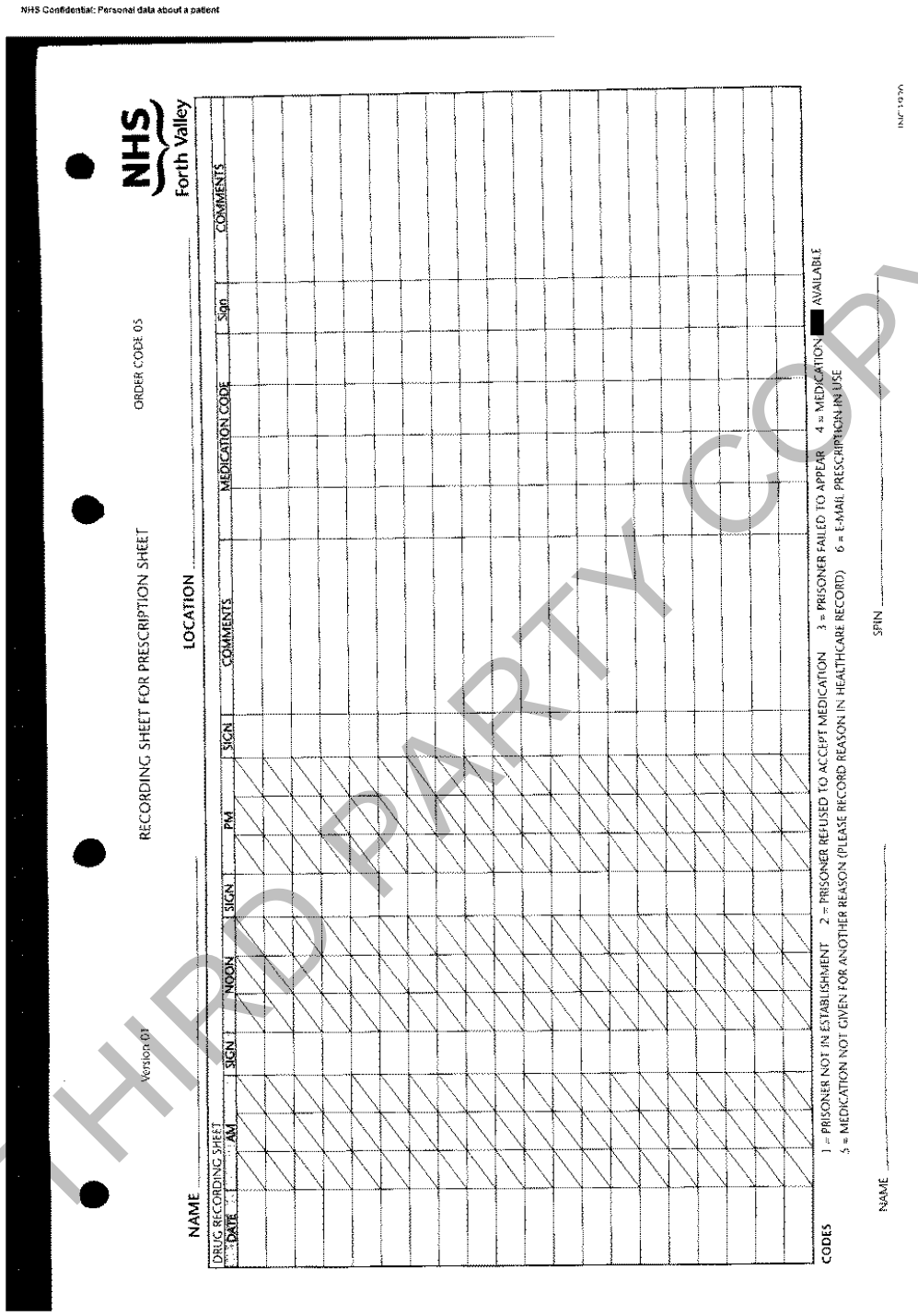

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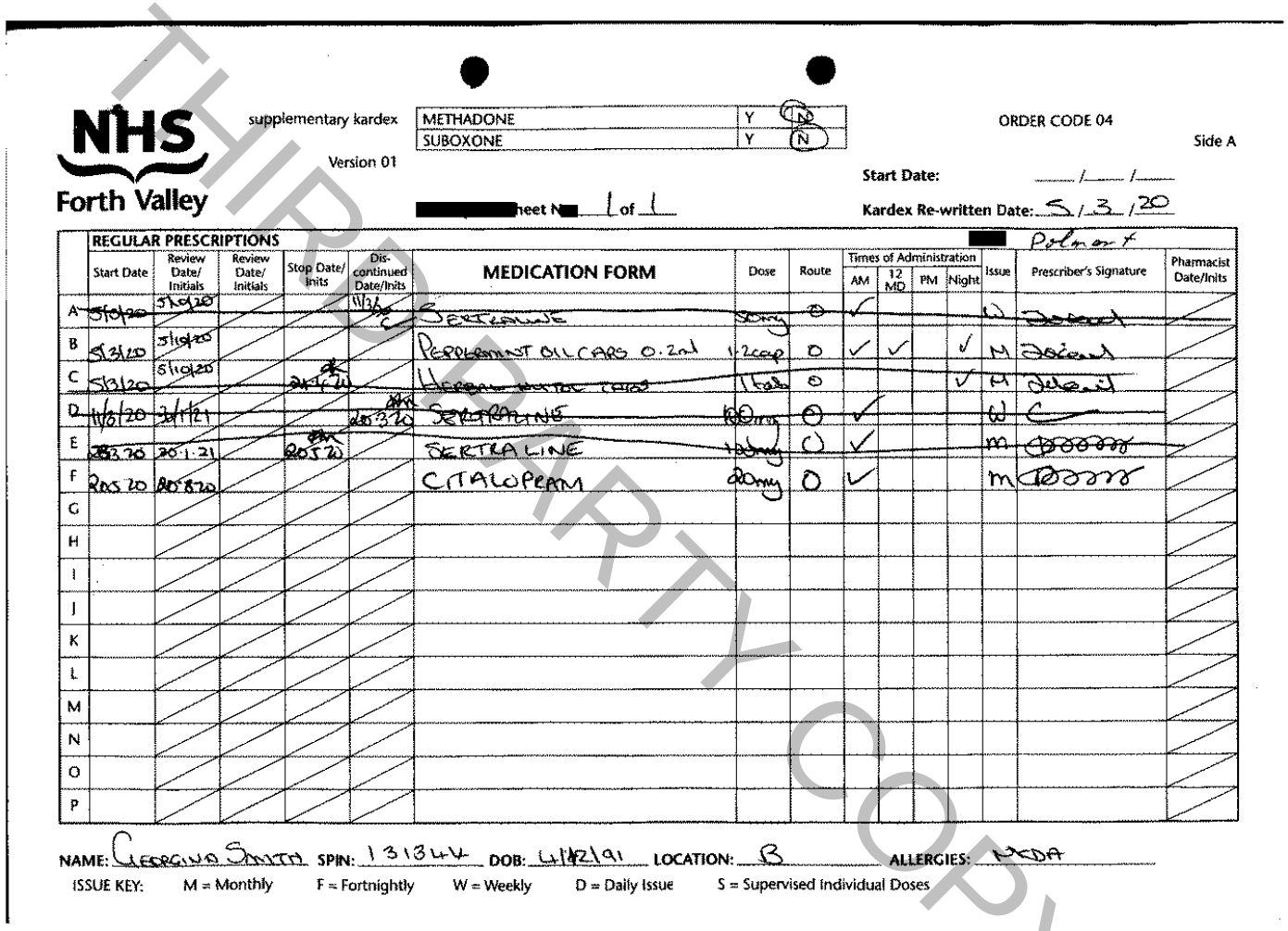

NHS Forth Valley

supplementary kardex

Version 01

METHADONE	Y	N
SUBOXONE	Y	N

ORDER CODE 04

Side A

Start Date: __/__/__

[redacted] sheet No 1 of 1

Kardex Re-written Date: 5/3/20

[redacted] Parkinson's

REGULAR PRESCRIPTIONS

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Inits	Dis-continued Date/Inits	MEDICATION FORM	Dose	Route	Times of Administration AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Inits
A	~~5/10/20~~	~~5/10/20~~			11/3/20 C	~~SERTRALINE~~	~~50mg~~	~~O~~	✓				W	~~Doland~~	
B	5/3/20	5/10/20				PERINDOPRIL ARG CARD 0.2ml	1-2cap	O	✓	✓		✓	M	Doland	
C	5/3/20	5/10/20		2/4/20		~~[illegible]~~	1 tab	O				✓	M	Doland	
D	~~11/6/20~~	~~3/11/21~~			4/5/3/20	~~SERTRALINE~~	~~100mg~~	~~O~~	✓				W	C	
E	~~2/3/20~~	~~20/1/21~~		20/5/20		~~SERTRALINE~~	~~100mg~~	~~O~~	✓				m	~~[illegible]~~	
F	20/5/20	20/8/20				CITALOPRAM	20mg	O	✓				m	[illegible]	
G															
H															
I															
J															
K															
L															
M															
N															
O															
P															

NAME: GEORGINA SMITH SPIN: 131344 DOB: 4/12/91 LOCATION: B ALLERGIES: ASPIRIN

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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iGPR Report

iGPR Report

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NHS Forth Valley

Version 01

ORDER CODE 06

Side B

Start Date: ___/___/___

Kardex Re-

Prescription Sheet No: ___ of ___

written Date: 5/3/20

"AS REQUIRED" PRESCRIPTION HMP Cluaine Polmont

	Start Date	Review Date	Stop Date	Drugs (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Date	Initls
1	5/3/20	5/9/20		NAPROXEN	500mg	O	BD PRN	W					
2	5/3/20	5/9/20		MAGNESIUM	135mg	O	TDS PRN	W					
3	5/3/20	5/9/20		DERMOL 500	1 APP	TOP	PRN	W					
4	5/3/20	5/3/21	9/4/20	[illegible]	1 APP	TOP	PRN	W					
5	5/3/20	5/3/21		CETIRIZINE	10mg	O	ONCE DAILY	W					
6	5/3/20	5[redacted]		EMOVATE CREAM	1 APP	TOP	TDS 3 X WEEKLY	W					
7	5/3/20	5/3/21		PARACETAMOL 1g	1g	O	ONCE DAILY	W					
8	5/3/20	5/3/21		DIAZEPAM	10mg	O	NOCTE PRN	W					
9	5/3/20	5/3/21		LACTULOSE	10-15ml	O	BD PRN	W					
10	11/3/20	30/5/20		HC 1% CREAM	1 APP	TOP	1-2 x DAILY	W					
11	9/4/20	9/4/21		CETRAZEN CREAM 500mg	1 APP	TOP	2-3 TIMES DAILY	W					
12													
13													
14													

Once Only Prescriptions

	Admin Data	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1	16-09	1604	CETRIZINE	10mg	O	ONCE DAILY [redacted]	DM	16-09		
2										
3										

NAME: [redacted] SPIN: 131 3[redacted] DOB: [redacted] LOCATION: B ALLERGIES: NKDA

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME _____ LOCATION _____

DRUG RECORDING SHEET

12.3.20																10	D	A	10x6, 10x1
18/3/20																D		S	0x7.
23/3/20														E=26 x100mg		B=8mg C=28 x2		B	
31/3/20														9=Seconal 8=56 x5mg				B	
6.4.20																	10	A	10 x 15g
														S=28 x5mg	18	3		B.	
11/4/20									11= gm&w										
13/4/20														S=28 x100mg				AL	
20.4.20															B	E		A	Ex 28, Bx168
27.4.20																	8	A	8 x 56
24/4/20																	1	A	1 x14.
18/5/20														9=500mg	8=56 x5mg			A	15 BE=reduce 18.
21/5/20															F			A	Fx28
1/6/20								1		1= myund									
24/6/20	1							1											
26.8.20								1		1x14(leaving									
9.6.20																	5	A	5x28
11/6/20														9=Seconal		8=56 x5mg		B.	
15/6/20																	F	A	Fx28
23/6/20	F			SR															

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgia Smith SPIN 131346 C1

DOB 4/12/91 LOC _____

iGPR Report

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NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 0.1

ORDER CODE 05

NAME _____ LOCATION _____

DRUG RECORDING SHEET

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME _____ SPIN _____

DOB _____ LOC _____

ING1920

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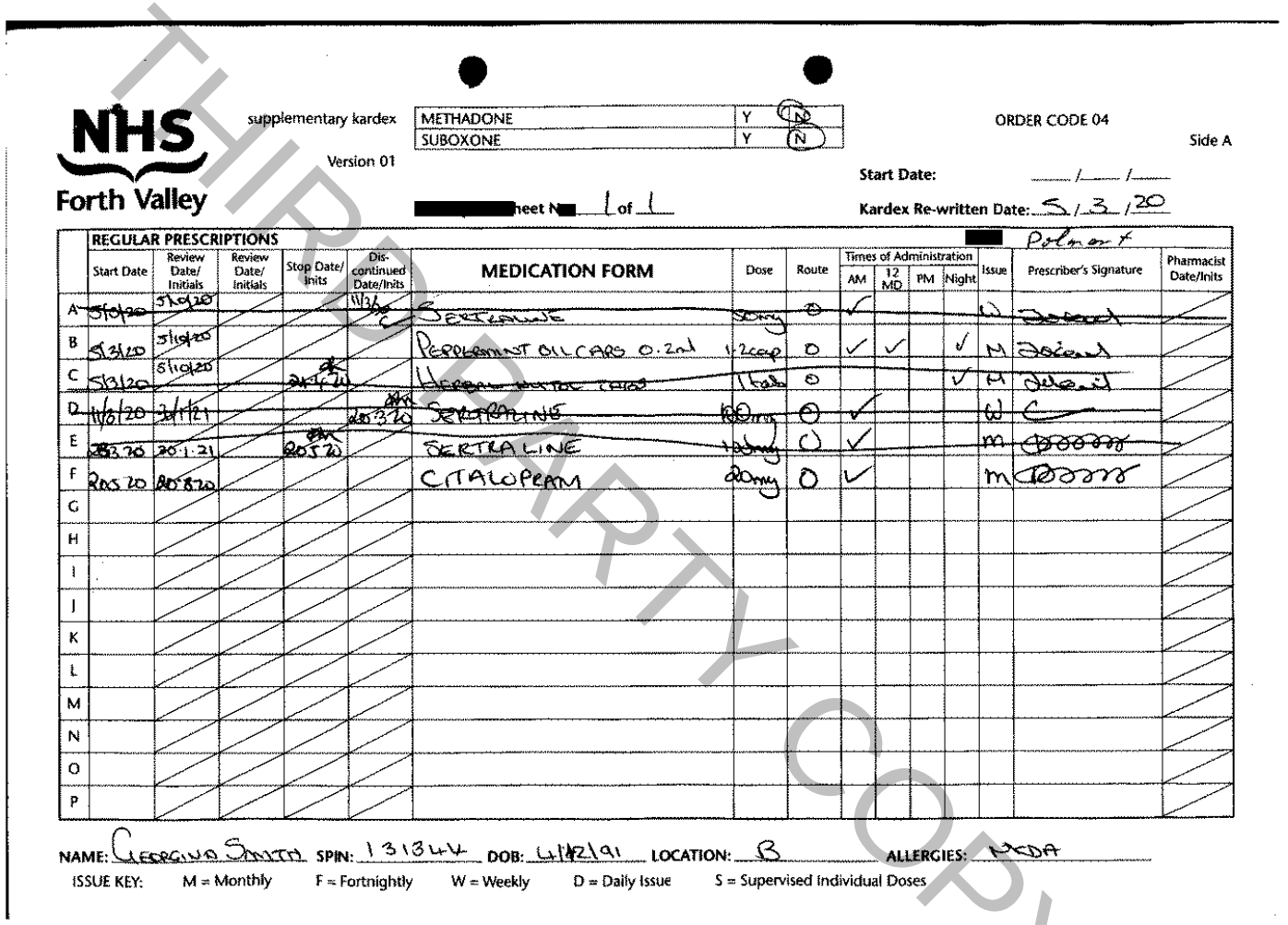

NHS Forth Valley

supplementary kardex

Version 01

METHADONE	Y	N
SUBOXONE	Y	N

ORDER CODE 04

Side A

Start Date: __/__/__

[redacted] sheet No 1 of 1

Kardex Re-written Date: 5/3/20

[redacted] Patient

REGULAR PRESCRIPTIONS

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Inits	Dis-continued Date/Inits	MEDICATION FORM	Dose	Route	Times of Administration AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Inits
A	~~5/5/20~~	~~5/5/20~~			~~5/3/20~~	~~SERTRALINE~~	~~50mg~~	~~O~~	✓				W	~~Patient~~	
B	5/3/20	5/5/20				PERINDOPRIL ARGININE 2.5mg	1-2 tab	O	✓	✓		✓	M	Patient	
C	5/3/20	5/5/20		2/4/20		[illegible]	1 tab	O				✓	M	Patient	
D	11/6/20	3/11/21			5/3/20	SERTRALINE	100mg	O	✓				W	C	
E	5/3/20	20/1/21		20/5/20		SERTRALINE	100mg	O	✓				M	[illegible]	
F	20/5/20	20/8/20				CITALOPRAM	20mg	O	✓				M	[illegible]	
G															
H															
I															
J															
K															
L															
M															
N															
O															
P															

NAME: GEORGINA SMITH SPIN: 131344 DOB: 4/12/91 LOCATION: B ALLERGIES: ASPIRIN

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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iGPR Report

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Version 01

ORDER CODE 06

Side B

Start Date: __/__/__

Kardex Re-

Prescription Sheet No: __ of __

written Date: 5/3/20

"AS REQUIRED" PRESCRIPTION HMP Clyde Polment

	Start Date	Review Date	Stop Date	Drugs (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Date	Initls
1	5/3/20	5/9/20		NAPROXEN	500mg	O	BD PRN	W					
2	5/3/20	5/9/20		MACROGOL	13.7g	O	1D9 PRN	W					
3	5/3/20	5/9/20		DERMOL 500	1 APP	TOP	PRN	W					
4	5/3/20	5/9/21	9/4/20	[illegible]	1 APP	TOP	PRN	W					
5	5/3/20	5/3/21		CETIRIZINE	10mg	O	ONCE DAILY	W					
6	5/3/20	5[redacted]		EMOLLIENT CREAM	1 APP	TOP	TDS 3 X WEEKLY	W					
7	5/3/20	5/3/21		PARACETAMOL 1g	2	O	ONCE DAILY	W					
8	5/3/20	5/3/21		DIAZEPAM	10mg	O	NOCTE PRN	W					
9	5/3/20	5/3/21		LACTULOSE	10-15ml	O	BD PRN	W					
10	11/3/20	30/5/20		HC 1% CREAM	1 APP	TOP	1-2 x DAILY	W					
11	9/4/20	9/4/21		CETRAFEN CREAM 500g	1 APP	TOP	2-3 TIMES DAILY	W					
12													
13													
14													

Once Only Prescriptions

	Admin Data	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1	16-04	1604	CETRIZINE	10mg	O	ONCE DAILY [redacted]	DM	16-04		
2										
3										

NAME: [redacted] SPIN: 131[redacted] DOB: [redacted] LOCATION: B ALLERGIES: NKDA

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME _____ LOCATION _____

DRUG RECORDING SHEET

| | | |

NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 0.1

ORDER CODE 05

NAME _____ LOCATION _____

DRUG RECORDING SHEET

| DRUG | | |

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Re: pcos - SMITH, [redacted] (NHS FORTH VALLEY) Page 1 of 1

131344

Re: pcos

ROXBURGH, [redacted] (DUNBLANE MEDICAL PRACTICE (25243))

Tue 02/06/2020 09:09

To:SMITH, [redacted] (NHS FORTH VALLEY) [redacted]smith46@nhs.net>;

Hello
I shouldn't be really giving clinical advice in this situation as I am not currently in the regular employment of the prison service, and am not contracted to provide clinical advice remotely so don't know how it would work from a medico-legal point of view. However, the first priority would be to ensure the cyst isn't enlarging if she is increasingly symptomatic, so she would need a rpt pelvic USS (unless she has had one recently). Theoretically any COC would be helpful to prevent ovulation/cyst formation and help her skin, and doesn't carry with it the increased risk of VTE that co-cyprindiol does. That depends on whether she has any other contraindications to the COC though, which I cant tell from your email. BP, BMI, DVT risk factors etc
Probably first place to start is with rpt USS if her symptoms are worsening? If she can safely have the COC then one of the skin friendly ones such as gedarel would be best
hope that helps
[redacted] R

From: SMITH, [redacted] (NHS FORTH VALLEY)
Sent: 27 May 2020 15:21
To: ROXBURGH, [redacted] (DUNBLANE MEDICAL PRACTICE (25243))
Subject: pcos

Hi [redacted]
I am looking for some advice regarding a patient Georgina Smith 04/12/1991, she has pcos diagnosed in her teens, you have seen her a few times as she also has a larger benign cyst on her right ovary. She is complaining of pain, not severe, abdomen is not tender on palpation, she may have slight swelling, she is currently taking Naproxen for this but would like something stronger, She advises she is distressed about some other symptoms such as mild acne over her chin and hirsutism over her chest, we discussed the possibility of her trying co-cyprindol to manage her symptoms and stop new cysts from forming, she was happy to try this, we have no ANP in Polmont at the moment but we have nurse prescribers, would you recommend this line of treatment? thank you in advance.
[redacted] *Smith*

Practitioner Nurse
HMP and YOI Polmont
01324 722233

For Dr Stamps
14/6/20.
→ Now in HMP

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Extension:.tif
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[redacted]

Corona Virus Checklist

Patient Name....Georgina.....Smith..... Temp

SPIN...131364.....**DOB**....04.11.91..

1. **Have you any of the following symptoms:** Yes/No
   - **Fever** Yes/No
   - **Flu like symptoms** Yes/No
   - **Chest infection**
   - **Cough, sore throat limb /joint pain or headache**
2. **Have you lived or visited any of the risk areas within the last 14 days?** Yes/No
3. **Have you been in contact with any confirmed cases of Corona Virus** Yes/No

Nurses signature .....

Date...14.7.20.....

[redacted]

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NHS Grampian

MENTAL HEALTH HISTORY FORM

Forename: Georgina	**Surname:** Smyth
SPIN: 131344	**DOB:** 14/12/91

1. Do you suffer from any Mental Health issues? Yes ☑ No ☐
2. Have you ever been seen by a [redacted] Yes ☐ No ☑
3. Name of [redacted] _____
4. Are you currently under the care of a CPN? Yes ☐ No ☑
5. Name of CPN: _____
6. Area/Practice: _____
7. Do you have a diagnosis? Yes ☐ No ☑
8. Further diagnosis information (Please tick relevant box):
   Depression ☑ Personality Disorder ☐ Schizophrenia ☐ Bipolar ☐
   Other: _____
9. Have you had any admissions to Psychiatric Hospital? Yes ☐ No ☑
10. Have you ever self harmed? Yes ☑ No ☐
11. Do you have any [redacted] ideation? Yes ☐ No ☑
12. Which establishment are you transferring from? HMP Edinburgh

Completed by: (Nurse's Name – Please Print) H Gillie
Date: 14/7/20

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NHS Grampian

MENTAL HEALTH HISTORY FORM

Forename: Georgina	**Surname:** Smyth
SPIN: 131344	**DOB:** 14/12/91

1. Do you suffer from any Mental Health issues? Yes ☑ No ☐
2. Have you ever been seen by a [redacted] Yes ☐ No ☑
3. Name of [redacted] _____
4. Are you currently under the care of a CPN? Yes ☐ No ☑
5. Name of CPN: _____
6. Area/Practice: _____
7. Do you have a diagnosis? Yes ☐ No ☑
8. Further diagnosis information (Please tick relevant box):
   Depression ☑ Personality Disorder ☐ Schizophrenia ☐ Bipolar ☐
   Other: _____
9. Have you had any admissions to Psychiatric Hospital? Yes ☐ No ☑
10. Have you ever self harmed? Yes ☑ No ☐
11. Do you have any [redacted] ideation? Yes ☐ No ☑
12. Which establishment are you transferring from? HMP Edinburgh

Completed by: (Nurse's Name – Please Print) H Gillie
Date: 14/7/20

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[redacted]

Corona Virus Checklist

Patient Name....Georgina.....Smith..... Temp

SPIN...13134.....**DOB**....04.11.91..

1. **Have you any of the following symptoms:** Yes/No
   - **Fever** Yes/No
   - **Flu like symptoms** Yes/No
   - **Chest infection**
   - **Cough, sore throat limb /joint pain or headache**
2. **Have you lived or visited any of the risk areas within the last 14 days?** Yes/No
3. **Have you been in contact with any confirmed cases of Corona Virus** Yes/No

Nurses signature .....

Date...14.7.20.....

[redacted]

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Additional: Scanned Document

Filename: igprda202606181520430.pdf
Extension:.tif
Pages:

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Scanned Document
18-Jun-2026 SARA
Additional: Scanned Document

Filename: igprda202606181520530.pdf
Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

Re: pcos - SMITH, [redacted] (NHS FORTH VALLEY) Page 1 of 1

131344

Re: pcos

ROXBURGH, [redacted] (DUNBLANE MEDICAL PRACTICE (25243))

Tue 02/06/2020 09:09

To:SMITH, [redacted] (NHS FORTH VALLEY) [redacted]smith46@nhs.net>;

Hello
I shouldn't be really giving clinical advice in this situation as I am not currently in the regular employment of the prison service, and am not contracted to provide clinical advice remotely so don't know how it would work from a medico-legal point of view. However, the first priority would be to ensure the cyst isn't enlarging if she is increasingly symptomatic, so she would need a rpt pelvic USS (unless she has had one recently). Theoretically any COC would be helpful to prevent ovulation/cyst formation and help her skin, and doesn't carry with it the increased risk of VTE that co-cyprindiol does. That depends on whether she has any other contraindications to the COC though, which I cant tell from your email. BP, BMI, DVT risk factors etc
Probably first place to start is with rpt USS if her symptoms are worsening? If she can safely have the COC then one of the skin friendly ones such as gedarel would be best
hope that helps
[redacted] R

From: SMITH, [redacted] (NHS FORTH VALLEY)
Sent: 27 May 2020 15:21
To: ROXBURGH, [redacted] (DUNBLANE MEDICAL PRACTICE (25243))
Subject: pcos

Hi [redacted]
I am looking for some advice regarding a patient Georgina Smith 04/12/1991, she has pcos diagnosed in her teens, you have seen her a few times as she also has a larger benign cyst on her right ovary. She is complaining of pain, not severe, abdomen is not tender on palpation, she may have slight swelling, she is currently taking Naproxen for this but would like something stronger, She advises she is distressed about some other symptoms such as mild acne over her chin and hirsutism over her chest, we discussed the possibility of her trying co-cyprindol to manage her symptoms and stop new cysts from forming, she was happy to try this, we have no ANP in Polmont at the moment but we have nurse prescribers, would you recommend this line of treatment? thank you in advance.
[redacted] *Smith*

Practitioner Nurse
HMP and YOI Polmont
01324 722233

For Dr Stanyer
14/6/20.
→ Now in HMP

https://email.nhs.net/owa/ 19/06/2020

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HMP & YOI Grampian

Prescription Recording Sheet (Version 02)

NHS Grampian

Date	AM	Noon	PM	Night	Comment	Date	AM	Noon	PM	Night	Comment
[redacted]											
16/12/20	A			D=14	1=PCM 4=DS 5=3cm.dr	28/12/20	A				
						29/12/20					
6.12.20					3=520mls 5=250mls 4=30	30/12/20					
17/12/20						31/12/20					
18/12/20				D=4		1/1/21					
19/12/20						2/1/21					
19/12/20						3/1/21					
20/12/20						4/1/21					
21/12/20				D=4		5/1/21					
22/12/20						6/1/21					
23/12/20						7/1/21					
24/12/20						8/1/21					
25/12/20						9/1/21					
26/12/20						10/1/21					

Numbers to be written after medication letter A, B, C etc., when medication **not** given as prescribed.
(Code) **1** = Prisoner not in establishment **2** = Prisoner refused to accept medication **3** = Prisoner failed to appear **4** = Medication not available **5** = Medication not given for other reason and record reason in Vision.

Name: [redacted]

SPIN No: [redacted]

LOC:

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Date	AM	Noon	PM	Night	Comment
11/9/20	A B C D E		B D E F	C = 4	
12/9/20	A B C		B D E F		
13/9/20	A B C D		B D E F	4 = 30	
14/9/20	A B C D		B D E F	1 = 8 4	
15/9/20	A B C D		B D E F	2 = 4	
16/9/20	A B C D		B D E F		
17/9/20	A B		B D E F	C = 4	
18/9/20	A B C D		B D E F	D = 4	
19/9/20	A B C D		B D E F	E = 4 F = 28 G = 5 H = 24	
20/9/20	A B C D		B D E F	2 = 5 3 0 mg	
21/9/20	E G A	H		4 = 30 1 = 84	
22/9/20	F	H	B	F = 5 G = 5 H = 5	
23/9/20	F G	H	M	F = 5 G = 5 H = 5	

Date	AM	Noon	PM	Night	Comment
24/9/20	F				
25/9/20	F	H	M		H = 30 c c
26/9/20	F	H	M		
27/9/20	F	H	M	F = 30 G = 5 H = 5	F = Stock G = Stock
28/9/20	F	H	M	F = 7 H = 14 G = 14	
29/9/20	F	H	M	F = 7 G = 14	
30/9/20	F	H	M	F = 7 G = 14	
1/10/20	F	H	M	F = 7 G = 14	
2/10/20	F	H	M	F = 7 G = 14	
3/10/20	F	H	M	F = 7 G = 14	

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SPS
SCOTTISH
PRISON SERVICE

REQUEST FOR SPECIAL DIET FOR HEALTH CONDITION

Health care staff should complete the form and return to the catering department. The Catering Manager and a member of health care staff should meet to discuss the dietary requirements of the offender.

Catering Managers will refer to the Special Diets Manual to determine the required adjustments to the individual's diet. If the individual requires any adjustments out with those recommended in the Special Diets Manual, health care must provide a clinical reason for the request.

Offender's Name: Georgina Smith SPIN: 1313LH

Location: Banff Date: 15/01/2020

The above named offender has a diagnosed health condition which requires amendments to their diet.

Please indicate which diet is required

Dietary Requirement		Dietary Requirement	
Diabetic diet		Gluten free diet	
Low salt diet		Anaemia	
Low potassium diet		High Protein diet	
Lipid lowering diet		High fibre diet	
Pregnancy		Modified texture diet	
Nursing [redacted]		Weight Management diet	
Other (please give details)	Lactose Intolerant		

Allergies/ intolerance

The above named offender has a diagnosed allergy to Lactose and requires amendments to their diet

Please detail any additional amendments/supplements

Following discussion with a member of health care the catering department will provide the above diet

Catering Manager's signature: [signature] Date: [illegible]

Health Care Staff signature: [signature] Date: 15.7.20

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Georgina Smith - 4/8/1991 (Mam

P100251946.

66120

HMP/YOI GRAMPIAN MEDICAL PRACTICE
INFLUENZA VACCINATION 2020/2021

To ensure that you are fit and well to receive this vaccination today we would appreciate if you would complete the following questions:

1. Do you feel unwell, have a temperature, or infection? YES/NO
2. Are you allergic to eggs or chicken? YES/NO
3. Have you had a reaction to a previous flu jab? YES/NO
4. Are you [redacted] YES/NO

Egg Allergy	**QIVc**	
6 months – 64 including [redacted] women	**QIVc**	✓
Age 65+	**aTIV or QIVc**	

If under 65, what is your reason for receiving influenza vaccine?

.....

I consent to Influenza vaccine

Signed: G. Smith Date: .....

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NHS Confidential: Personal data about a patient

HMP & YOI Grampian

Prescription Recording Sheet (Version 02)

NHS Grampian

Name: GEORGINA SMITH

SPIN No: [redacted]

LOC: BMFC

Date	AM	Noon	PM	Night	Comment	Date	AM	Noon	PM	Night	Comment
[redacted]											
16/12/20	A BC		BD VM	D=14	1=BD 4=OD 3=3xD.ac	28/12/20	A BC		D8		
17/12/20	C		BD VM		2=5ml 5=25ml 6=12ml	29/12/20	A C	BD			
18/12/20	C		BD VM			30/12/20	ABC		BD		
19/12/20	A B C		BD RC	D=4		31/12/20	A B C		BD VM	D=36 C=5ml E=4 E=28	
19/12/20	AB C		BD	D=14		1/1/21	AB C		D RC	E=4 E=28	
20/12/20	A B C		BD VM	D=4		2/1/21	ABC		BD		
21/12/20	A B C		BD	D=4		3/1/21	A B C		BD		
22/12/20	A B C		BD VM			4/1/21	B C		BD		
23/12/20	A B C		BD VM			5/1/21	A B C		BD		
24/12/20	A B C		BD VM			6/1/21	A B C D		BD		
25/12/20	A					7/1/21	A B C		BD		
26/12/20	A		BD			8/1/21	A B C		BD		
27/12/20	A B C		BD			9/1/21	A B C		BD		
28/12/20	A B C		BD			10/1/21	A B C		BD		

Numbers to be written after medication letter A, B, C etc., when medication **not** given as prescribed.
(Code) **1** = Prisoner not in establishment **2** = Prisoner refused to accept medication **3** = Prisoner failed to appear **4** = Medication not available **5** = Medication not given for other reason and record reason in Vision.

THIRD PARTY COPY

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Date	AM	Noon	PM	Night	Comment
11/9/20	A B C D E		B D E	C = 4	
12/9/20	A B C		B D E		
13/9/20	A B C D		B D E		
14/9/20	A B C D		B D E	4 = 30 5 = 84 C = 4	
15/9/20	A B C D		B D E		
16/9/20	A B C D		B D E		
17/9/20	A B		B D	C = 4	
18/9/20	A B C D		B D E	D = 4 E = 4 F = 28 G = 5544 2 = Seroxat	
19/9/20	A B C D		B D E	4 = 30 5 = 84 C = 4	
20/9/20	A B C D		B D E		
21/9/20	E G A	H	H	F = Stolic H = Stolic	
22/9/20	F G	H	H	F = Stolic	
23/9/20	F G	M	M	F = Stolic H = Stolic	

Date	AM	Noon	PM	Night	Comment
24.9.20	F		H		A = Stolic
25/9/20		H	H		
26/9/20					
27/9/20	P			F = Stolic G = Stolic	
28/9/20	C A	H	H	F = 7 G = 14	
29/9/20	F H G	H	H	F = 7 H = 14 G = 14	
30/9/20		H	H	7 = 30	
1				H = 14 G = 7	
2.9.20	F	S	H	H = 14 G = 7	

Numbers to be written after medication letter A, B, C etc., when medication **not** given as prescribed.
(Code) **1** = Prisoner not in establishment **2** = Prisoner refused to accept medication **3** = Prisoner failed to appear **4** = Medication not available **5** = Medication not given for other reason and record reason in Vision.

Name:

SPIN No:

DOB:

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SPS
SCOTTISH
PRISON SERVICE

REQUEST FOR SPECIAL DIET FOR HEALTH CONDITION

Health care staff should complete the form and return to the catering department. The Catering Manager and a member of health care staff should meet to discuss the dietary requirements of the offender.

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Offender's Name: Georgina Smith SPIN: 1313LH

Location: Banff Date: 15/01/2020

The above named offender has a diagnosed health condition which requires amendments to their diet.

Please indicate which diet is required

Dietary Requirement		Dietary Requirement	
Diabetic diet		Gluten free diet	
Low salt diet		Anaemia	
Low potassium diet		High Protein diet	
Lipid lowering diet		High fibre diet	
Pregnancy		Modified texture diet	
Nursing [redacted]		Weight Management diet	
Other (please give details)	Lactose Intolerant		

Allergies/ intolerance

The above named offender has a diagnosed allergy to Lactose and requires amendments to their diet

Please detail any additional amendments/supplements

Following discussion with a member of health care the catering department will provide the above diet

Catering Manager's signature: [signature] Date: [illegible]

Health Care Staff signature: [signature] Date: 15.7.20

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Georgina Smith - 4/8/1991 (Nam

P100251946.

HMP/YOI GRAMPIAN MEDICAL PRACTICE
INFLUENZA VACCINATION 2020/2021

6/7/20 To ensure that you are fit and well to receive this vaccination today we would appreciate if you would complete the following questions:

1. Do you feel unwell, have a temperature, or infection? YES/NO
2. Are you allergic to eggs or chicken? YES/NO
3. Have you had a reaction to a previous flu jab? YES/NO
4. Are you [redacted] YES/NO

Egg Allergy	QIVc	
6 months – 64 including [redacted] women	QIVc	✓
Age 65+	aTIV or QIVc	

If under 65, what is your reason for receiving influenza vaccine?

.....

I consent to Influenza vaccine

Signed: G. Smith Date: .....

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HMP & YOI Grampian

Prescription Recording Sheet (Version 02)

Date	AM	Noon	PM	Night	Comment	Date	AM	Noon	PM	Night
26.9.20						2/11/21				
					H = 14					
					G = 7	8/11/21				
2.10.20					F = 7					
						15/11/21				
21.10.20					T=56					
					G=7 H=14	22/11/21				
21.10.20					F=7					
						29/11/21				
15/11/20					K = 1					
					E = 7	5/12/21				
16/11/20					H = 14					
					F = 7	11/12/21				
23/11/20					G = 7 H = 14					
					F = 7	19.12.21				
26/11/20					H = 14					
					G = 7	19.21				
30/11/20					H = 14					
					F = 7	4/2/22				
1/12/20					H=14 G=7 F=7					
					H=28 G=7 F=7	26/2/21				
4/12/20					H=14 F=7					
					H=28 G=7 F=7					
11/12/20					G=7					
					H=14					
25/12/20					G=7 H=14					
					F=7					

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Name: [redacted] 131 3461 LOC:

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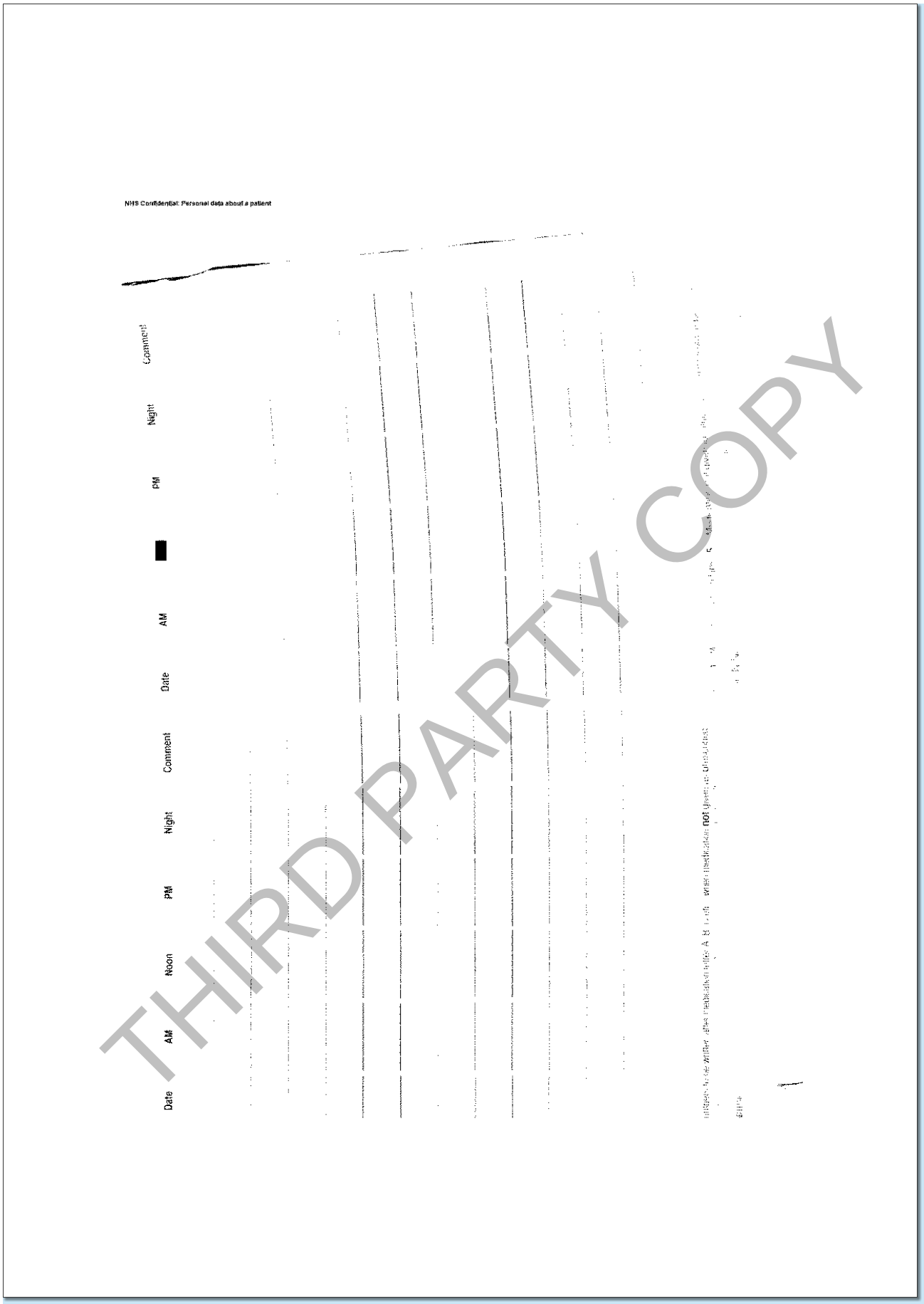

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AS RECORDED prescriptions sheet and recording sheet

NHS Grampian

NHS Confidential: Personal data about a patient

'AS REQUIRED' PRESCRIPTIONS

	Commence date	Review date & initials	Review date & initials	Review date & initials	Stop date & length	Drugs (including formulation)	Dose	Route	Frequency of administration	Issue	Prescriber's signature	Discontinued Date	Discontinued Initials	Pharmacist Date	Pharmacist Initials
1	15/7/20	15/7/21				MEBEVERINE	135mg	O	TDS	M					
2	15/7/20	15/7/21				DERMOL 500	1ml	[redacted]	BD	M					
3	15/7/20	15/7/21				CAPASAL	1ml.	Top	3 x WEEKLY	M					
4	15/7/20	15/7/21				CETRIZINE	10mg	O	OD	M					
5	15/7/20	15/7/21				LACTULOSE	15mL	O	BD	M					
6	15/7/20	15/7/21				CETRABEN Cream	1ml	Top	BD	M					
7	~~20/7/20~~	~~20/12/20~~				DIVAC gel 3.4mg/1..	1	TOP	ON	M		25/09	CS		
8	19/6/20	19/6/21				BONJELA gel apply	PN	prn TP	when [illegible]	prn					
9	19/6/20	19/6/21				ANUSOL o.. apply	PR	BD prn		prn		19/6			
10	19/6/20	19/6/21				ANUSOL H/C oint apply	PR	BD		prn					

'ONCE ONLY' PRESCRIPTIONS

Administration date	Administration time	Drugs (Including Formulation)	Dose	Route	Prescriber's signature	Given by	Time given	Pharmacist Date	Pharmacist Initials

ISSUE KEY: **M** - Monthly **F** - Fortnightly **W** - Weekly **D** - Daily **C** - Course **S** - Supervised Individual Doses

Name: Georgina Smith	Date:	Sheet no:	Spin no: 131344	Date of birth: 4-12-91
Location: Bennett	Allergies: NKDA			

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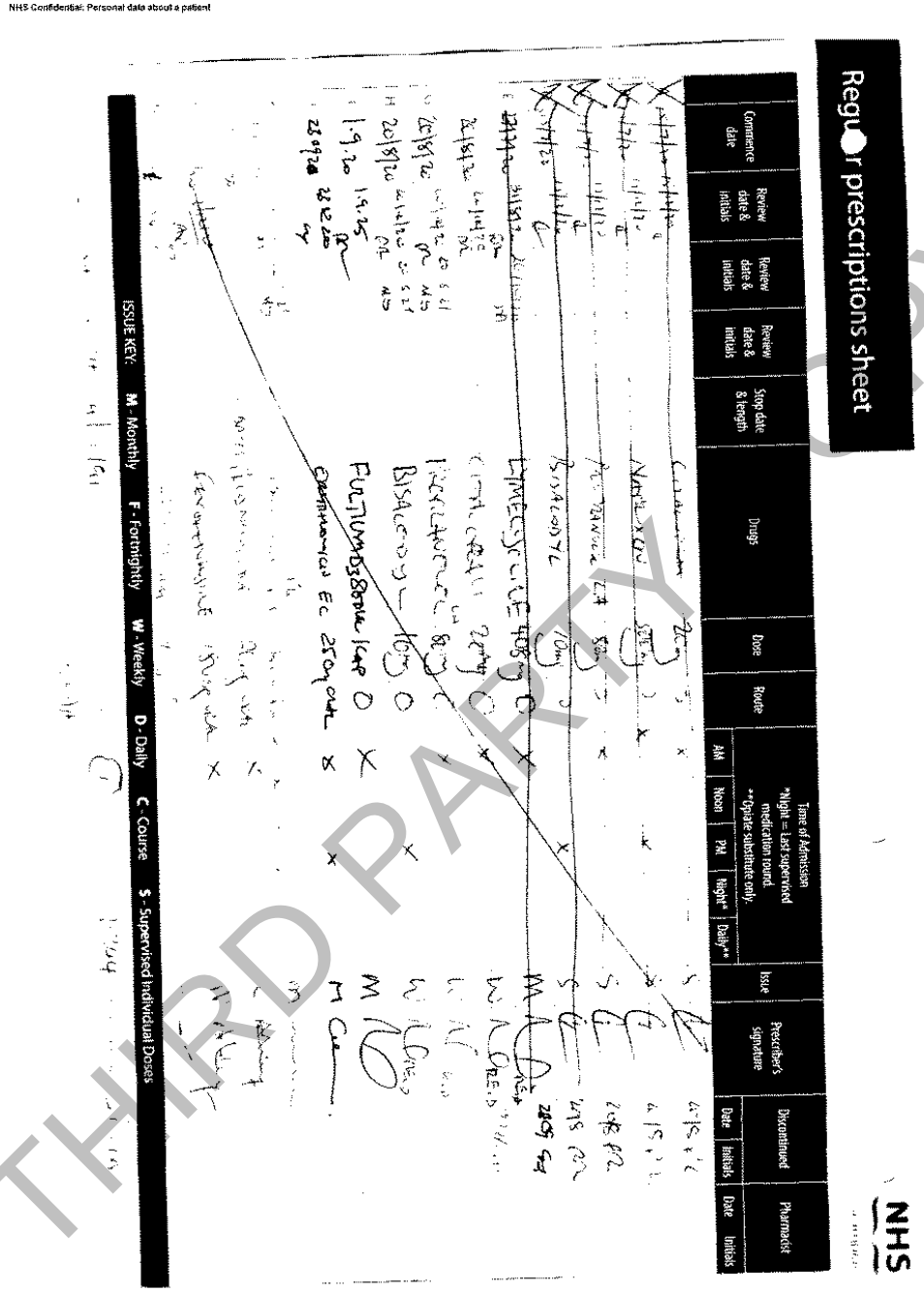

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HMP & YOI Grampian

Prescription Recording Sheet (Version 02)

NHS Grampian

Date	AM	Noon	PM	Night	Comment
26/1/20					
2/10/20					
21/10/20					
21/10/20					
21/10/20					
15/11/20					
23/11/20					
23/11/20					
23/11/20					
23/11/20					
23/11/20					
23/11/20					
4/12/20					
11/12/20					
23/12/20					

Date	AM	Noon	PM	Night	Comment
2/11/21					
8/11/21					
15/11/21					
22/11/21					
29/11/21					
5/12/21					
11/12/21					
12.12.21					
19/12/21					
22/12/21					
26/12/21					

Numbers to be written after medication letter A, B, C etc. when medication **not** given as prescribed.
(Code) 1 = Prisoner not in establishment **2** = Prisoner refused to accept medication **3** = Prisoner failed to appear **4** = Medication not available **5** = Medication not given for other reason and record reason in Vision.

Name: [redacted] 131 3464 LOC:

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THIRD PARTY COPY

AS RECORDED prescriptions sheet and recording sheet

NHS Grampian

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'AS REQUIRED' PRESCRIPTIONS

	Commence date	Review date & initials	Review date & initials	Review date & initials	Stop date & length	Drugs (Including formulation)	Dose	Route	Frequency of administration	Issue	Prescriber's signature	Discontinued Date	Discontinued Initials	Pharmacist Date	Pharmacist Initials
1	15/7/20	15/7/21				MEBEVERINE	135mg	O	TDS	M					
2	15/7/20	15/7/21				DERMOL 500	1	[redacted]	BD	M					
3	15/7/20	15/7/21				CAPASAL	1	TOP	3 x WEEKLY	M					
4	15/7/20	15/7/21				CETRIZINE	10mg	O	OD	M					
5	15/7/20	15/7/21				LACTULOSE	15mL	O	BD	M					
6	15/7/20	15/7/21				CETRABEN Cream	1	Top	BD	M					
7	~~20/7/20~~	~~20/12/20~~				DIVAC gel 3.4mg/1.5g	1	TOP	ON	M		25/09	CS		
8	19/6/20	19/6/21				BONJELA gel apply	PN	PRN	PRN where [illegible]	PN					
9	~~19/6/20~~	~~19/6/21~~				ANUSOL oint apply	PR	BD	PRN	PN		19/6			
10	19/6/20	19/6/21				ANUSOL H/C oint apply	1/2	BD		PN					

'ONCE ONLY' PRESCRIPTIONS

Administration date	Administration time	Drugs (Including Formulation)	Dose	Route	Prescriber's signature	Given by	Time given	Pharmacist Date	Pharmacist Initials

ISSUE KEY: **M** - Monthly **F** - Fortnightly **W** - Weekly **D** - Daily **C** - Course **S** - Supervised Individual Doses

Name: Georgina Smith	Date:	Sheet no:	Spin no: 131344	Date of birth: 4-12-91
Location: Bennett	Allergies: NKDA			

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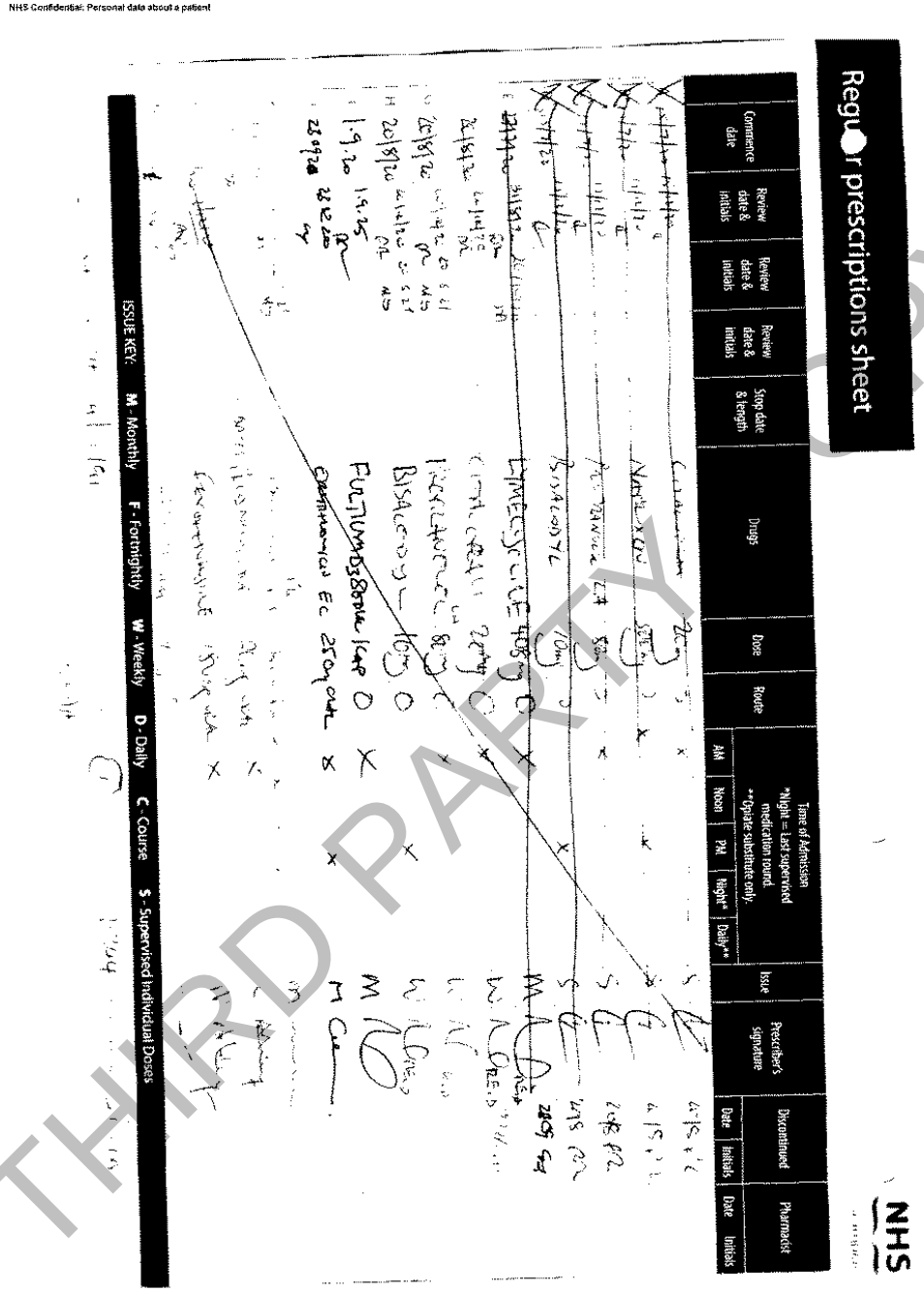

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Regular prescriptions sheet

NHS Grampian

	Commence date	Review date & initials	Review date & initials	Review date & initials	Stop date & length	Drugs	Dose	Route	Time of Admission ~Night = Last supervised medication round. ~~Opiate substitute only AM	Noon	PM	Night~	Daily~~	Issue	Prescriber's signature	Discontinued Date	Discontinued Initials	Pharmacist Date	Pharmacist Initials
A	~~20/2/21~~				~~2/3/21~~ C	~~CITALOPRAM~~	~~20mg~~	~~O~~	~~X~~					~~W~~	~~[signature]~~	26.2.21	MJ		
B	20/2/21	20/4/21 C				PAROXETINE	20mg	O	X					W	[signature]				
C	20/2/21	26/3/21 JM				DUAC gel	1gm	PRN				X		m	[signature]				
D	20.2.21	20.8.21				PROPRANOLOL LA	80mg	O						M	[signature]				
E	20.2.21	20.8.21				BISOPROLOL	10mg	O			✓			M	[signature]				
F	20.2.21	20.8.21				FULTIUM D3 800u	1 TOD	O	✓					M	[signature]				
G	20.2.21	20.8.21				IBUPROFEN 5% gel	1 TOP	TOP	✓	✓		✓		M	[signature]				
H	~~20.2.21~~	~~20.8.21~~				~~CITALOPRAM~~	~~40mg~~	~~O~~	~~✓~~					~~M~~	[signature]	25.2.21	MS.		
I	26.2.21				10 DAYS C	CITALOPRAM	20mg	O	✓					W	[signature]				
J																			
K																			
L																			
M																			
N																			

ISSUE KEY: **M** - Monthly **F** - Fortnightly **W** - Weekly **D** - Daily **C** - Course **S** - Supervised Individual Doses

Name: GEORGINA SMITH	Date: 20/2/21	Sheet no: (2)	Spin no: 131344 Date of birth: 4/12/91
Location:	Allergies: NKDA		

CGD 180834

NHS Confidential: Personal data about a patient

NOT FOR PRINTING DRAFT

AS REQUIRED prescriptions sheet and recording sheet

NHS Grampian

NHS Confidential: Personal data about a patient

	Commence date	Review date & initials	Review date & initials	Review date & initials	Stop date & length	Drugs (including formulation)	Dose	Route	Frequency of administration	Issue	Prescriber's signature	Discontinued Date	Discontinued Initials	Pharmacist Date	Pharmacist Initials
1	15.7.20	15.7.21				MEBEVERINE	135mg	O	TDS	M					
2	15.7.20	15.7.21				DERMOL 500	↑	Top	BD	M					
3	15.7.20	15.7.21				CAPASAL	↑	Top	3x weekly	M					
4	15.7.20	15.7.21				CITIRIZINE	10mg	oral	OD	M					
5	15.7.20	15.7.21				LACTULOSE	15ml	oral	BD	M					
6	15.7.20	15.7.21				CETRABEN [redacted]			BD	M					
7	15.7.20	15.7.21				BONJELA Gel	↑	Top	PRN	M					
8	15.7.20	15.7.21				ANUSOL HC 0.5%	↑	Top	PRN	M					
9	26.2.21	25.4.21				NASEPTIN Cream	↑	Top	PRN	M					
10	26.2.21	25.4.21				ASPIRIN Sol.	900mg	O	PRN up to TDS	M					

Administration date	Administration time	Drugs (including Formulation)	Dose	Route	Prescriber's signature	Given by	Time given	Pharmacist Date	Pharmacist Initials

ISSUE KEY: **M** - Monthly **F** - Fortnightly **W** - Weekly **D** - Daily **C** - Course **S** - Supervised Individual Doses

Name:	Date:	Sheet no:	Spin no:	Date of birth:
Location:	Allergies:			

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iGPR Report

NHS Confidential: Personal data about a patient

HMP & YOI Grampian

Prescription Recording Sheet (Version 02)

NHS Grampian

Date	AM	Noon	PM	Night	Comment
5/8/11					
6/3/27					
8/8/27					
9/3/27					
10					

Date	AM	Noon	PM	Night	Comment

Numbers to be written after medication letter A, B, C etc., when medication **not** given as prescribed.
(Code) **1** = Prisoner not in establishment **2** = Prisoner refused to accept medication **3** = Prisoner failed to appear **4** = Medication not available **5** = Medication not given for other reason and record reason in Vision.

Name: Georgina Small

SPIN No: 1313 44

LOC:

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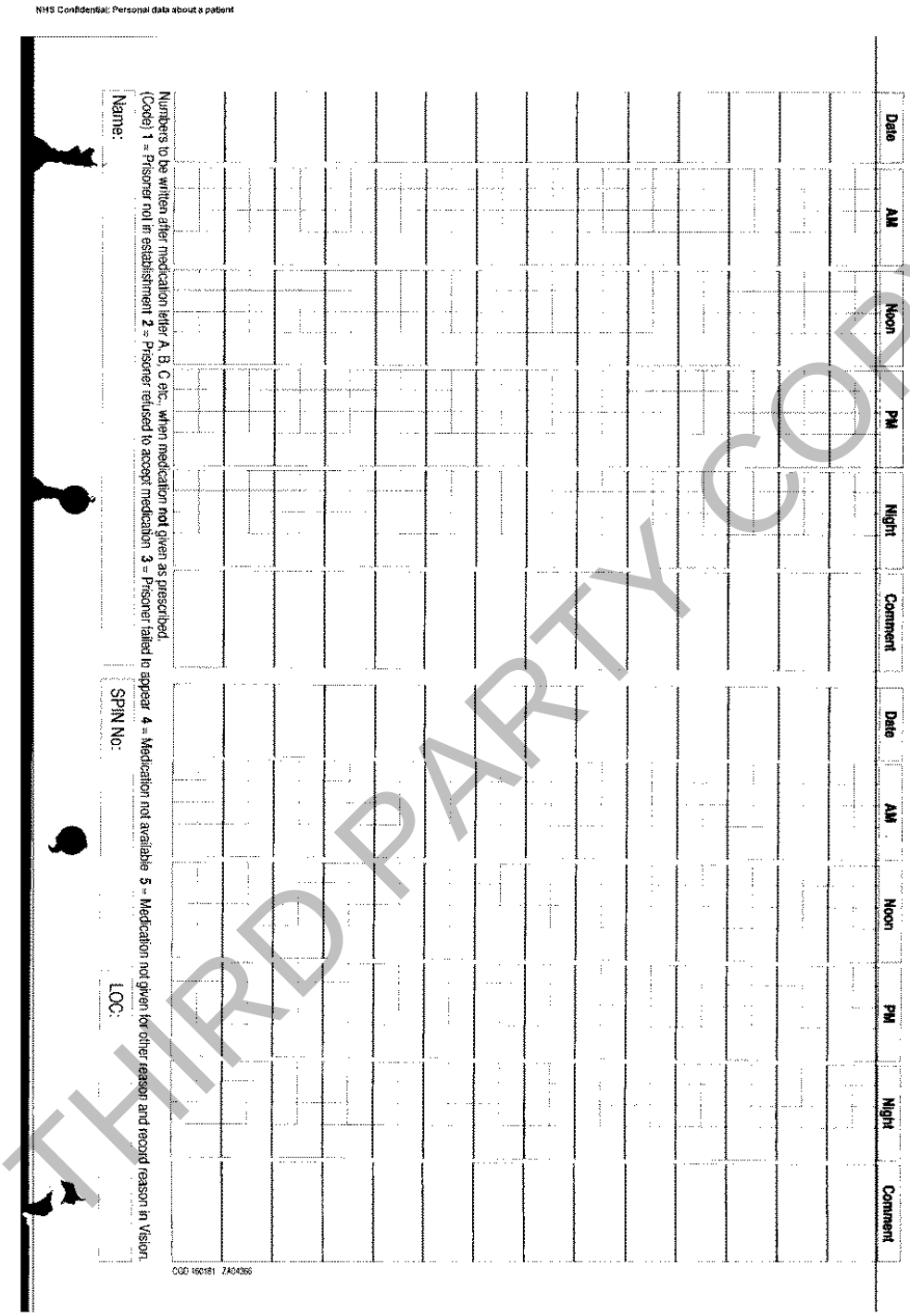

NHS Confidential: Personal data about a patient

Name:

SPIN No:

LOC:

Numbers to be written after medication letter A, B, C etc., when medication **not** given as prescribed.
(Code) **1** = Prisoner not in establishment **2** = Prisoner refused to accept medication **3** = Prisoner failed to appear **4** = Medication not available **5** = Medication not given for other reason and record reason in Vision.

Date	AM	Noon	PM	Night	Comment

Date	AM	Noon	PM	Night	Comment

CQD 160181 ZA04366

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Regular prescriptions sheet

NHS Grampian

	Commence date	Review date & initials	Review date & initials	Review date & initials	Stop date & length	Drugs	Dose	Route	Time of Admission *Night = Last supervised medication round. **Opiate substitute only AM	Noon	PM	Night*	Daily**	Issue	Prescriber's signature	Discontinued Date	Discontinued Initials	Pharmacist Date	Pharmacist Initials
A	20/2/21				26/2/21 C	CITALOPRAM	20mg	O	X					W		26.2.21	MJ		
B	20/2/21	20/4/21 C				PAROXETINE	20mg	O	X					W					
C	20/2/21	26/2/21 JM				DUAC gel	1gm	PRN				X		M					
D	20.2.21	20.8.21				PROPRANOLOL LA	80mg	O						M					
E	20.2.21	20.8.21				BISOPROLOL	10mg	O			✓			M					
F	20.2.21	20.8.21				FULTIUM D3 800u	1	O	✓					M					
G	20.2.21	20.8.21				IBUPROFEN 5% gel	1	TOP	✓	✓		✓		M					
H	20.2.21	20.8.21				CITALOPRAM	10mg	O	✓					M		25.2.21	MS		
I	26.2.21				10 DAYS C	CITALOPRAM	20mg	O	✓					W					
J																			
K																			
L																			
M																			
N																			

ISSUE KEY: **M** - Monthly **F** - Fortnightly **W** - Weekly **D** - Daily **C** - Course **S** - Supervised Individual Doses

Name: GEORGINA SMITH	Date: 20/2/21	Sheet no: 2	Spin no: 131344	Date of birth: 4/12/91
Location:	Allergies: NKDA			

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CGD 180834

DRAFT

NHS Confidential: Personal data about a patient

AS REQUIRED prescriptions sheet and recording sheet

NHS Grampian

	Commence date	Review date & initials	Review date & initials	Stop date & length	Drugs (including formulation)	Dose	Route	Frequency of administration	Issue	Prescriber's signature	Discontinued: Date	Discontinued: Initials	Pharmacist: Date	Pharmacist: Initials
1	15.7.20	15.7.21			MEBEVERINE	135mg	O	TDS	M					
2	15.7.20	15.7.21			DERMOL 500	1	Top	BD	M					
3	15.7.20	15.7.21			CAPASAL	1	top	3x weekly	M					
4	15.7.20	15.7.21			CYTRIZINE	10mg	oral	OD	M					
5	15.7.20	15.7.21			LACTULOSE	15mls	oral	BD	M					
6	15.7.20	15.7.21			CETRABEN [redacted]			BD	M					
7	15.7.20	15.7.21			BONSELA GEL	1	Top	PRN	M					
8	15.7.20	15.7.21			ANUSOL HC OINT	1	Top	PRN	M					
9	24.2.21	24.3.21			NASEPTIN CREAM	1	Top	PRN	M					
10	26.2.21	26.4.21			ASPIRIN SOL.	900mg	O	PRN up to TDS	M					

Administration date	Administration time	Drugs (including Formulation)	Dose	Route	Prescriber's signature	Given by	Time given	Pharmacist: Date	Pharmacist: Initials

ISSUE KEY: **M** - Monthly **F** - Fortnightly **W** - Weekly **D** - Daily **C** - Course **S** - Supervised Individual Doses

Name: Date: Sheet no: Spin no: Date of birth:

Location: Allergies:

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HMP & YOI Grampian

Prescription Recording Sheet (Version 02)

NHS Grampian

Date	AM	Noon	PM	Night	Comment
5/8/11					
6.3.27					
8/8/27					
9.3.27					
10					

Date	AM	Noon	PM	Night	Comment

Numbers to be written after medication letter A, B, C etc., when medication **not** given as prescribed.
(Code) **1** = Prisoner not in establishment **2** = Prisoner refused to accept medication **3** = Prisoner failed to appear **4** = Medication not available **5** = Medication not given for other reason and record reason in Vision.

Name: Georgina Small

SPIN No: 1313 44

LOC:

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Date	AM	Noon	PM	Night	Comment	Date	AM	Noon	PM	Night	Comment

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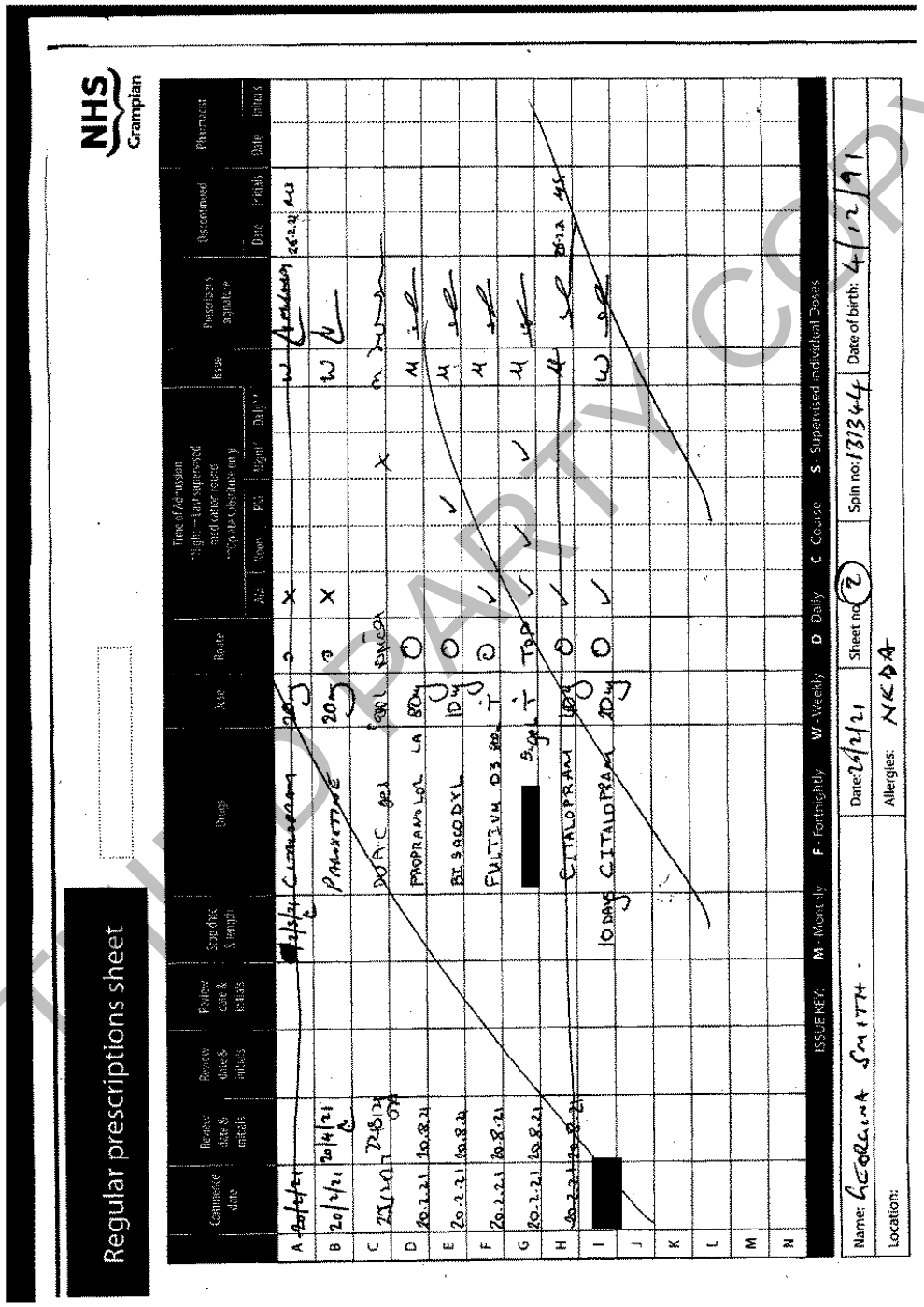

NHS Grampian

Regular prescriptions sheet

	Commence date	Review date & initials	Review care & initials	Stop date & initials	Drugs	Dose	Route	Time of Administration "Sight – last supervised med other times "Code substitute key" AM	Noon	PM	Night	Daily	Issue	Prescriber's signature	Discontinued Date	Discontinued Initials	Pharmacist Date	Pharmacist Initials
A	20/4/21				Clonazepam	2mg	PO	X					W	Anderson	20.2.21	MS		
B	20/2/21	20/4/21			Paroxetine	20mg	PO	X					W					
C	23.1.21	28/3/21			DOXYCYCLINE	100mg	PO			X			W					
D	20.2.21	10.8.21			PROPRANOLOL LA	80mg	PO			✓			M					
E	20.2.21	20.8.21			BISOPROLOL	10mg	PO			✓			M					
F	20.2.21	20.8.21			FLUTICASONE	125mcg	INH	✓					M					
G	20.2.21	20.8.21			CITALOPRAM	5mg	PO			✓			M					
H	20.2.21	20.8.21			CITALOPRAM	10mg	PO	✓					M		20.2.21	MS		
I					CITALOPRAM	10mg	PO	✓					W					
J																		
K																		
L																		
M																		
N																		

ISSUE KEY: M - Monthly F - Fortnightly W - Weekly D - Daily C - Course S - Supervised individual doses

Name: [illegible] Smith Date: 20/2/21 Sheet no: 2 Spin no: 1313447 Date of birth: 4/12/91

Location: Allergies: NKDA

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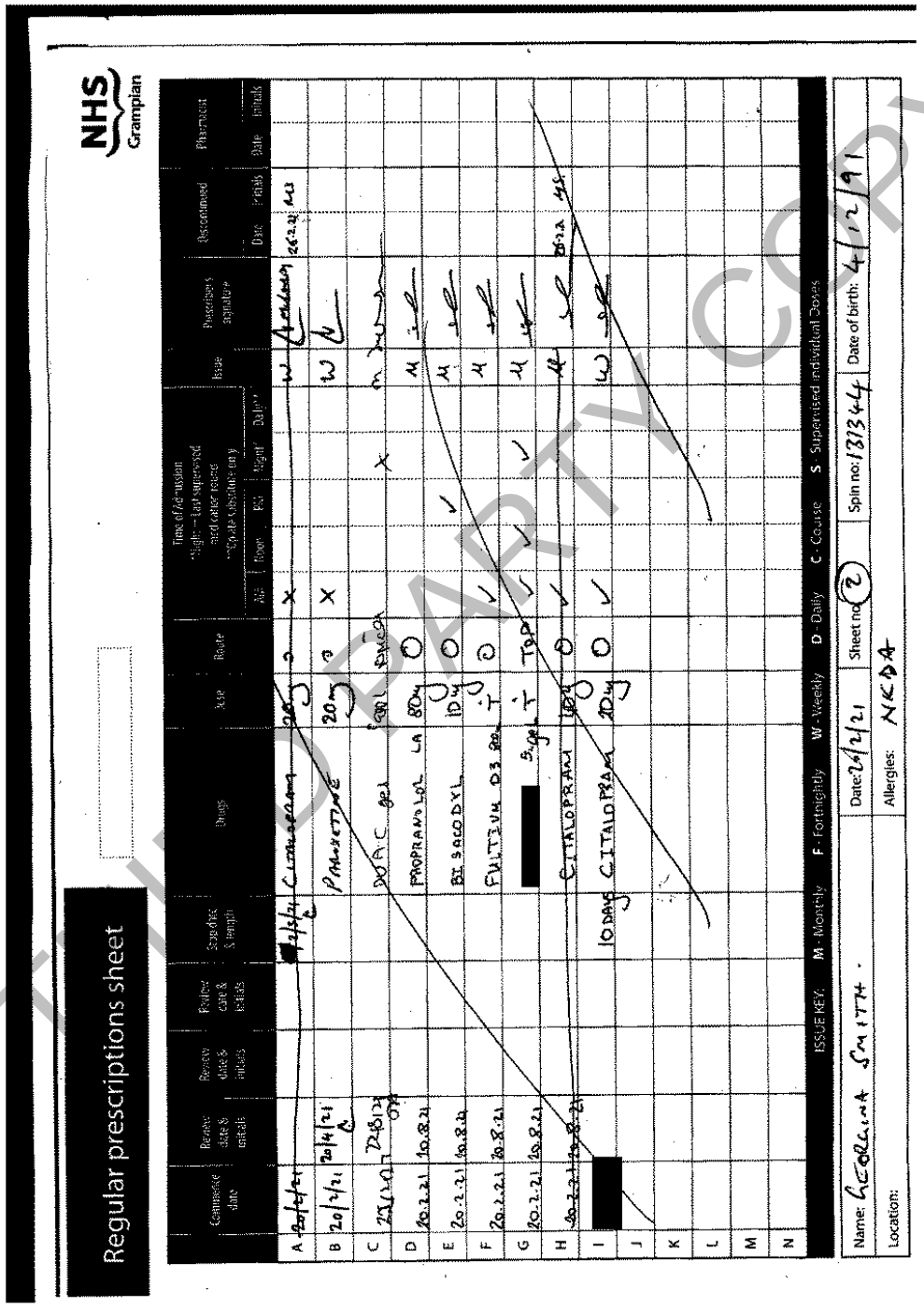

NHS Grampian

Regular prescriptions sheet

	Commence date	Review date & initials	Review date & notes	Review care & initials	Stop date & initials	Drugs	Dose	Route	Time of Administration "Sight – last supervised and other times" "Code substitute only"				Issue	Prescriber's signature	Discontinued		Pharmacist	
									AM	Noon	PM	Night	Daily		Date	Initials	Date	Initials
A	20/12/21				24/12/21	CLONAZEPAM	2mg	O	X				W	Anderson	24.12.21	MS		
B	20/12/21	20/12/21				PAROXETINE	20mg	O	X				W					
C	23.12.21	28/12				DOXYCYCLINE	100mg	PEG				X	M					
D	20.12.21	10.8.21				PROPRANOLOL	40mg	O					M					
E	20.12.21	20.8.21				BISOPROLOL	10mg	O			✓		M					
F	20.12.21	20.8.21				FLUTICASONE	50mcg	I	✓				M					
G	20.12.21	20.8.21				CITALOPRAM	5mg	I	T	T&P	✓		M					
H	20.12.21	20.8.21				CITALOPRAM	10mg	O	✓				M		20.12.21	MS		
I						10 DAYS CITALOPRAM	10mg	O	✓				W					
J																		
K																		
L																		
M																		
N																		

ISSUE KEY: M - Monthly F - Fortnightly W - Weekly D - Daily C - Course S - Supervised individual doses

Name: [illegible] Smith Date: 24/12/21 Sheet no 2 Spin no: 1313447 Date of birth: 4/12/91

Location: Allergies: NKDA

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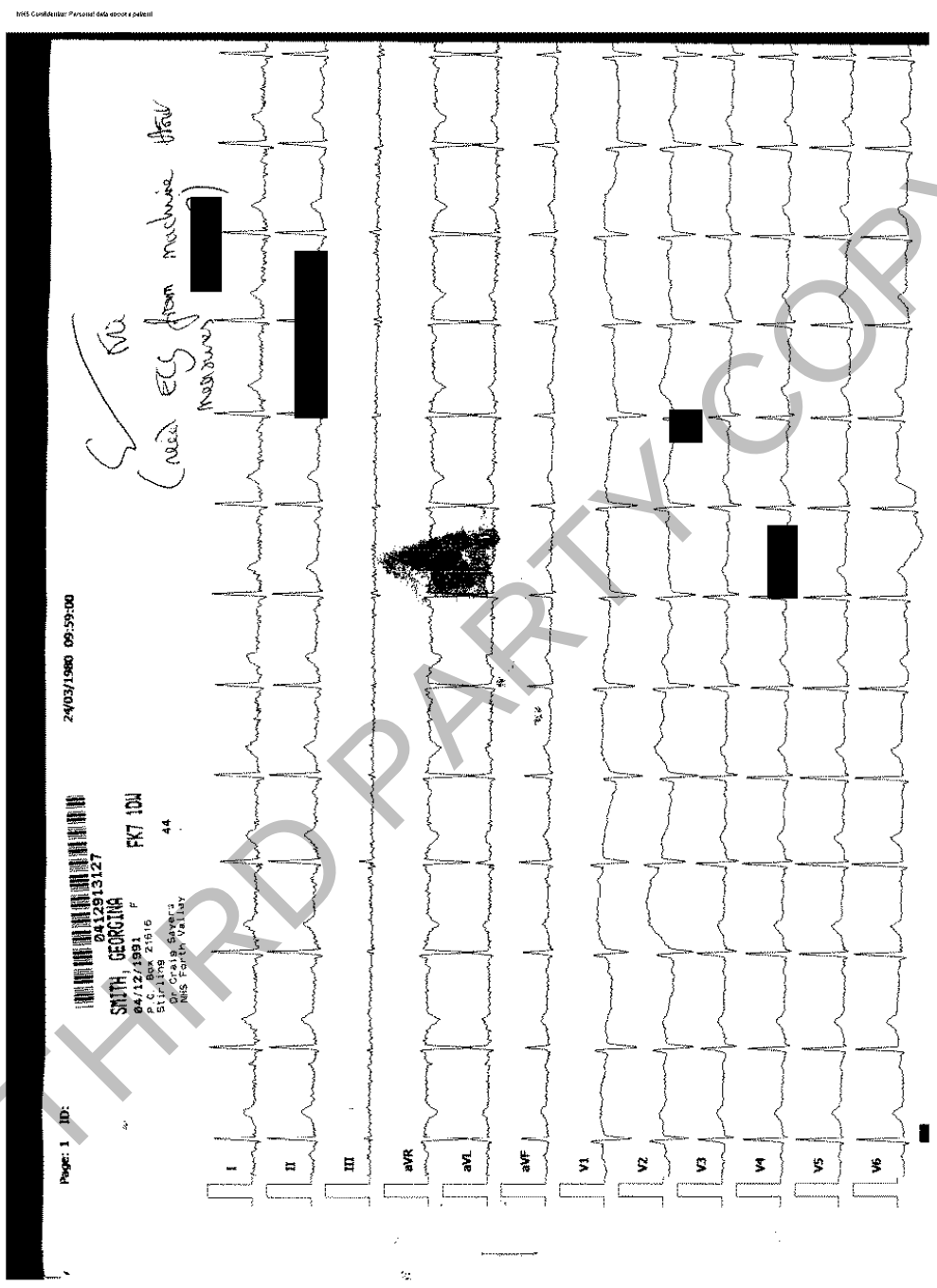

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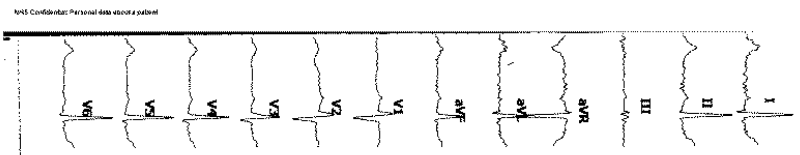

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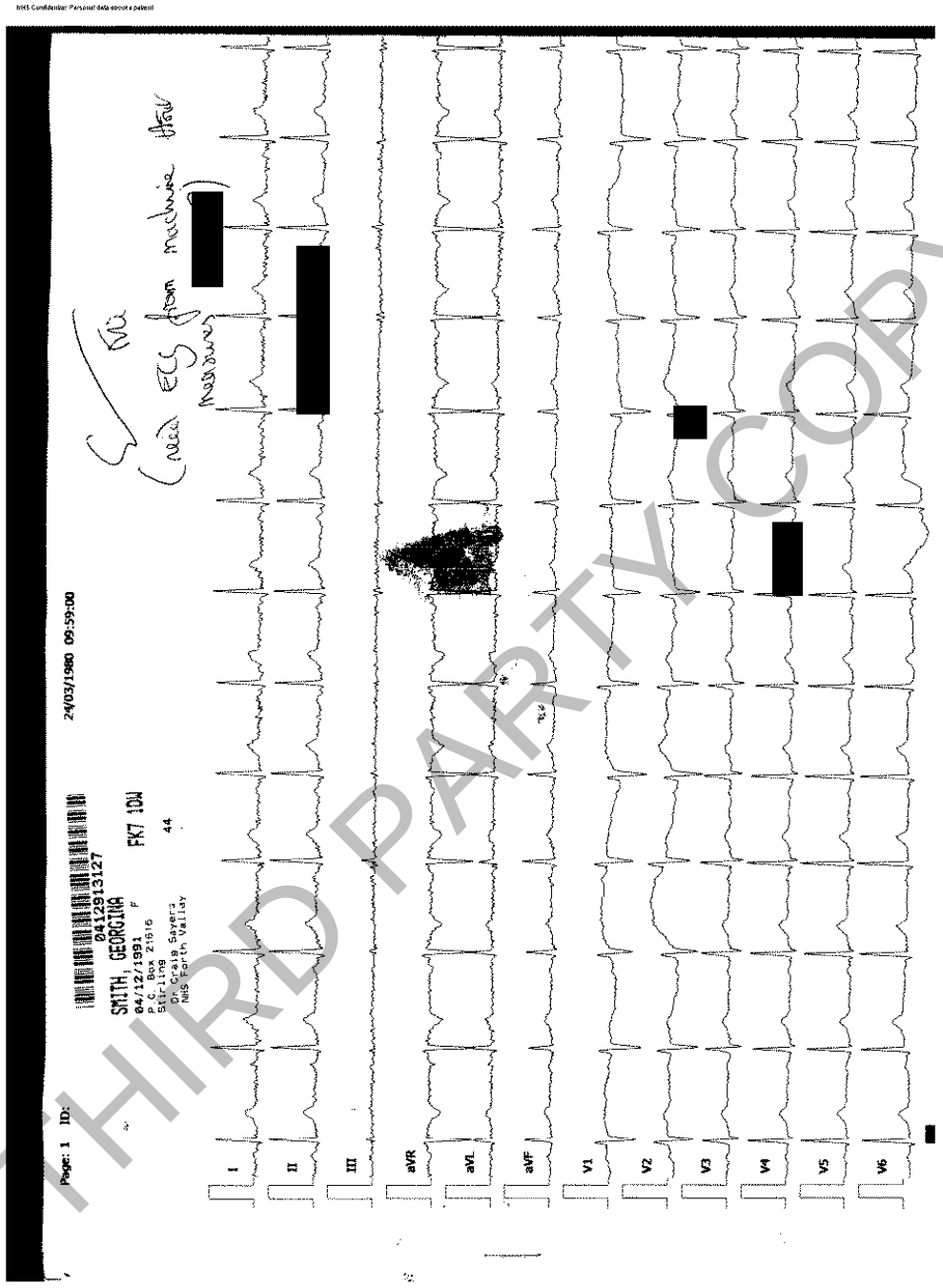

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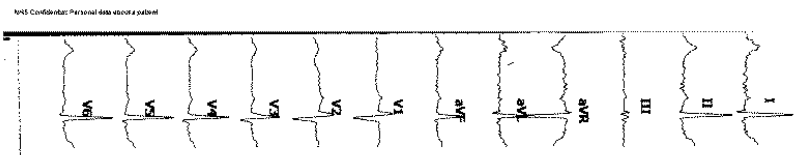

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IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
Georgina Smith	~~4/12/91~~ 29/3/21	139344	P	4/12/91

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM NOON PM NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Paroxetine	20g	23/3/21	7	✓	1	1	
Pregabalin	50g	23/3/21	7	✓	1	1	
Quetiapine				✓	1	1	

Time of check

PRISONERS RESPONSE TO ANY DISCREPANCY:

n/a

Nurse Signature: _____ Patient Signature: G. Smith

Your in – possession medication check on ..... was not correct

To ensure your safety and the safety [redacted] others the GP has reviewed [redacted] prescription for .....
And decided to: .....

O Continue your medication on this occasion: [redacted] further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

iGPR Report

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SCOTTISH PRISON SERVICE

NHS Forth Valley

'IN-POSSESSION' MEDICATION – RESPONSIBILITIES OF THE PATIENT

Medicines prescribed for you may be administered to you by a nurse or given to you to take as instructed on the label. It has been agreed that you can be responsible for keeping medicines in your possession and taking them correctly. Failing to look after or take your medicines properly may result in them being removed from your possession, and could be a breach of discipline in terms of the Prison Rules. In particular:

- You must follow the instructions on the label of any medication you are prescribed;
- You must not give or sell any medication to other [redacted] offenders;
- You must return any unused medication to the Health Centre;
- You must not have in your possession any medication or medication containers that have been issued to another [redacted] offender;
- You must keep any medication issued to you in the original labelled container;
- You must not tamper with any medication or container in your possession; and,
- If you lose any medication in your possession, or are unable to comply with this policy, you must report this to a member of staff immediately.

Declaration of Understanding

I have [redacted] (or had [redacted] to me) the above instructing and understand that failure to comply with them will result in me not being allowed to be responsible for keeping and taking my own medication. Failure to comply with these instructions may also be in breach of Prison Rules and result in disciplinary action being taken against me.

Signed: G Smith Date: 29/3/21

Name: [redacted] Spin: 131344

Witnessed by: [redacted] Name: C Graham

'In-possession' agreement discontinued by: .....

Name: ..... Date: .....

Reason: .....

.....

SJM 005

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SCOTTISH PRISON SERVICE

NHS Forth Valley

'IN-POSSESSION' MEDICATION – RESPONSIBILITIES OF THE PATIENT

Medicines prescribed for you may be administered to you by a nurse or given to you to take as instructed on the label. It has been agreed that you can be responsible for keeping medicines in your possession and taking them correctly. Failing to look after or take your medicines properly may result in them being removed from your possession, and could be a breach of discipline in terms of the Prison Rules. In particular:

- You must follow the instructions on the label of any medication you are prescribed;
- You must not give or sell any medication to other [redacted] offenders;
- You must return any unused medication to the Health Centre;
- You must not have in your possession any medication or medication containers that have been issued to another [redacted] offender;
- You must keep any medication issued to you in the original labelled container;
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Signed: G Smith Date: 29/3/21

Name: [redacted] Spin: 131344

Witnessed by: [redacted] Name: C Graham

'In-possession' agreement discontinued by: .....

Name: ..... Date: .....

Reason: .....

.....

SJM 005

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IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
Georgina Smith	~~4/12/91~~ 29/3/21	139344	P	4/12/91

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM NOON PM NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Paroxetine	20g	23/3/21	7	✓	1	1	
Pregabalin	50g	23/3/21	7	✓	1	1	
Quetiapine				✓	1	1	

Time of check

PRISONERS RESPONSE TO ANY DISCREPANCY:

n/a.

Nurse Signature: _____ Patient Signature: G. Smith

Your in – possession medication check on ..... was not correct

To ensure your safety and the safety [redacted] others the GP has reviewed [redacted] prescription for .....
And decided to: .....

O Continue your medication on this occasion: [redacted] further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

iGPR Report

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NHS
Forth Valley
Microbiology

SURNAME: SMITH H M PRISON, CORNTON VALE,	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Sayers	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: Abnormal vaginal discharge			

Pyogenic Culture
Microscopy.
Trichomonas species not seen
Microscopy Does NOT indicate Bacterial Vaginosis
Culture.
No pathogens isolated

EXAMINATION: Pyogenic Culture	LAB No.: MG066644T	AUTHORISED: [redacted] Smith	
NATURE OF SPECIMEN: High Vaginal swab	DATE COLLECTED: 06/04/2021	DATE RECEIVED: 06/04/2021	DATE REPORTED: 08/04/2021

letter sent to nurse re duplicate

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HMP & YOI GRAMPIAN

MEDICATION RE-ORDER FORM

NHS Grampian

NAME: Georgina Smith NO: 131344

LOCATION: Banff 3C 04 DATE: 27/1/21

MEDICATION REQUIRED

Catraben

Ordered ✓
LM

PLEASE NOTE: NO ORDERS ON SATURDAY & SUNDAYS

For Health Centre use only

Date Ordered:.....

Date Received:.....

RH14

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NHS Forth Valley
Microbiology

SURNAME: SMITH H M PRISON, CORNTON VALE,	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Sayers	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: Abnormal vaginal discharge			

Pyogenic Culture
Microscopy.
Trichomonas species not seen
Microscopy Does NOT indicate Bacterial Vaginosis
Culture.
No pathogens isolated

EXAMINATION: Pyogenic Culture	LAB No.: MG066644T	AUTHORISED: [redacted] Smith	
NATURE OF SPECIMEN: High Vaginal swab	DATE COLLECTED: 06/04/2021	DATE RECEIVED: 06/04/2021	DATE REPORTED: 08/04/2021

letter sent to make appointment

FLC

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HMP & YOI GRAMPIAN

MEDICATION RE-ORDER FORM

NHS Grampian

NAME: Georgina Smith NO: 131344

LOCATION: Banff 3C 04 DATE: 27/1/21

MEDICATION REQUIRED

Catraben

Ordered ✓
LM

PLEASE NOTE: NO ORDERS ON SATURDAY & SUNDAYS

For Health Centre use only

Date Ordered:.....

Date Received:.....

RH14

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NHS Confidential: Personal data about a patient

G Smith

Health Centre
HMP&YOI Cornton Vale
Cornton Road
STIRLING
FK9 5NU
Tel: 01786 835335

NHS
Forth Valley

Date 02/04/2021

To Georgina,

I am writing to inform you that I have spoken with the ANP regarding the excess skin you are concerned about on your stomach. She advised as the area is not causing any pain or discomfort at this time there is no referral options available. If your circumstances change then please get back in touch with the health centre via the Nurse Referral Form.
The ANP also advised they do not prescribed Bio-Oil or alternatives therefore we can look into adding this to the sundry sheet when they are recommenced.

Kind regards,

Eilish (Primary Care Nurse)

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G Smith

Health Centre
HMP&YOI Cornton Vale
Cornton Road
STIRLING
FK9 5NU
Tel: 01786 835335

NHS
Forth Valley

Date 02/04/2021

To Georgina,

I am writing to inform you that I have spoken with the ANP regarding the excess skin you are concerned about on your stomach. She advised as the area is not causing any pain or discomfort at this time there is no referral options available. If your circumstances change then please get back in touch with the health centre via the Nurse Referral Form.
The ANP also advised they do not prescribed Bio-Oil or alternatives therefore we can look into adding this to the sundry sheet when they are recommenced.

Kind regards,

Eilish (Primary Care Nurse)

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(No subject)

[redacted] Swinson (NHS Forth Valley) <nicola.swinson@nhs.scot>
Tue 13/04/2021 13:59
To: [redacted] (NHS Forth Valley) [redacted] Denise [redacted] (NHS Forth Valley)
[redacted]

HI both

From the clinic this morning, could you please prescribe an increase in quetiapine from 50mg bd to 50mg and 75mg for Georgina Smith?

Thanks very much

Kind regards

[redacted]

Dr [redacted] Swinson
Consultant Forensic [redacted] NHS Forth Valley
01324 572615 / 2600

Visiting Professor, [redacted] of Psychological Sciences and Health, University of Strathclyde

Please note my email address has changed to [redacted]

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(No subject)

[redacted] Swinson (NHS Forth Valley) <nicola.swinson@nhs.scot>
Tue 13/04/2021 13:59
To: [redacted] (NHS Forth Valley) [redacted] Denise [redacted] (NHS Forth Valley)
[redacted]

Hi both

From the clinic this morning, could you please prescribe an increase in quetiapine from 50mg bd to 50mg and 75mg for Georgina Smith?

Thanks very much

Kind regards

[redacted]

Dr [redacted] Swinson
Consultant Forensic [redacted] NHS Forth Valley
01324 572615 / 2600

Visiting Professor, [redacted] of Psychological Sciences and Health, University of Strathclyde

Please note my email address has changed to [redacted]

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[redacted]

NHS Forth Valley

Women, [redacted]
CAMHS and [redacted]
Health Directorate

Consultant:	Dr [redacted] Abu-Rajab
Specialty Doctor:	Dr [redacted]
Address:	Suite D Falkirk Community Hospital Major's Loan Falkirk
Telephone:	01324 673554 (08:30 – 12:30)
Website:	www.centralsexualhealth.org
Clinical Generic Email:	FV-UHB.sexualhealth@nhs.net
Date dictated/typed:	20 April 2021 / 21 April 2021
[redacted] number	AN07671539
CHI number	**0412913127**
Ref	JM/CD
Enquiries to	[redacted] Admin Lead / Secretary
Extension	3555
Contact	01324 624000

NHS Forth Valley

Confidential

Department of Gynaecology
Forth Valley Royal Hospital
Larbert

Dear Colleague

Georgina SMITH H M Prison Cornton Vale STIRLING

I was wondering if it was possible to get an appointment for this pleasant 29 year old para 2, who is currently [redacted] H M P Cornton Vale. Georgina has noticed her inner labia becoming increasingly more prominent and this is causing her significant discomfort, as her inner labia area rubbing on her clothes.

On examination, the inner labia are enlarged and it looked like they had been rubbing on her clothing.

Georgina is well aware that there is a long waiting list at Gynaecology and labiaplasty may not be an option for her, however, she would appreciate being seen by the Gynaecology Team.

Yours sincerely

DR I [redacted]
Speciality Doctor in [redacted] and Reproductive Health

Copy to : Cliodhna Lane Specialty Nurse H M Prison Cornton Vale STIRLING

INVESTORS IN PEOPLE | Gold

Chairman: [redacted] McCusker
Chief Executive: [redacted] Cowan

Forth Valley NHS Board is t[redacted] name for Forth Valley Health Board
Registered Office: Carseview House, Castle Business Park, Stirling, FK9 4SW

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[redacted]

NHS Forth Valley

Women, [redacted]
CAMHS and [redacted]
Health Directorate

Consultant:	Dr [redacted] Abu-Rajab
Specialty Doctor:	Dr [redacted]
Address:	Suite D Falkirk Community Hospital Major's Loan Falkirk
Telephone:	01324 673554 (08:30 – 12:30)
Website:	www.centralsexualhealth.org
Clinical Generic Email:	FV-UHB.sexualhealth@nhs.net
Date dictated/typed:	20 April 2021 / 21 April 2021
[redacted] number	AN07671539
CHI number	**0412913127**
Ref	JM/CD
Enquiries to	[redacted] Admin Lead / Secretary
Extension	3555
Contact	01324 624000

NHS Forth Valley

Confidential

Department of Gynaecology
Forth Valley Royal Hospital
Larbert

Dear Colleague

Georgina SMITH H M Prison Cornton Vale STIRLING

I was wondering if it was possible to get an appointment for this pleasant 29 year old para 2, who is currently [redacted] H M P Cornton Vale. Georgina has noticed her inner labia becoming increasingly more prominent and this is causing her significant discomfort, as her inner labia area rubbing on her clothes.

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Georgina is well aware that there is a long waiting list at Gynaecology and labiaplasty may not be an option for her, however, she would appreciate being seen by the Gynaecology Team.

Yours sincerely

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Speciality Doctor in [redacted] and Reproductive Health

Copy to : Cliodhna Lane Specialty Nurse H M Prison Cornton Vale STIRLING

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IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
GEORGINA SMITH	22/5/21	1313446	P	4/12/91

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM NOON PM NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
QUETIAPINE	25MG	18/5/21	35	✓ ✓	15	15	

Time of check

PRISONERS RESPONSE TO ANY DISCREPANCY:

Nurse Signature: Patient Signature:

** Your in – possession medication check on ..... was not correct*

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to:

- ☐ Continue your medication on this occasion: however further checks highlighting shortages/excess will result in [redacted] medication being discontinued
- ☐ To discontinue your medication
- ☐ To withdraw your medication
- ☐ Change your medication

GP Signature: Date

iGPR Report

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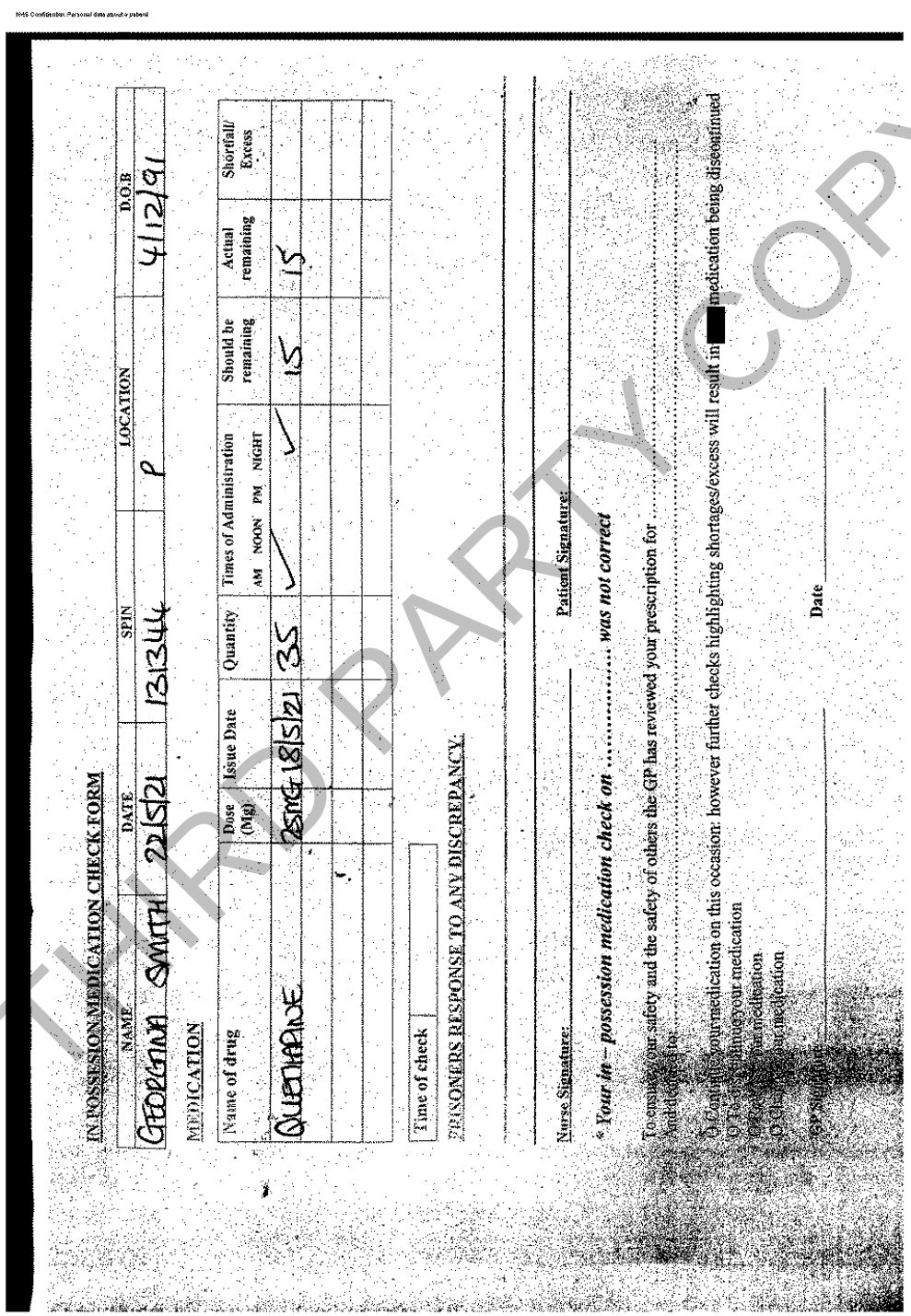

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IN POSSESSION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
GEORGINA SMITH	22/5/21	1313444	P	4/12/91

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
QUETIAPINE	25MG	18/5/21	35	✓			✓	15	15	

Time of check

PRISONERS RESPONSE TO ANY DISCREPANCY

Nurse Signature: Patient Signature:

* *Your in – possession medication check on ..... was not correct*

To ensure your safety and the safety of others the GP has reviewed your prescription for .....

And decided to:

- ☐ Confirm your medication on this occasion: however further checks highlighting shortages/excess will result in [redacted] medication being discontinued
- ☐ Change your medication
- ☐ Discontinue medication
- ☐ Change dose of medication
- ☐ Prescribe new medication

Signature: Date

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28/5/21 Georgina [redacted] 13134H4 04/12/1991
Peebles. E.H

I would like to have an emergincey appointment with mentle health and whom else you's think I need to see!

I have been a victum of bullying since I have come back from Hmp Grampian but its only in my workparty the kitchens. Thursday I lost my cool and drawn anger toward 2 bullys I lost my control of my own anger. Friday morning I felt like I was lossing my control of anger & temper. Staff is aware of whats going on. I took a panic attack. I have not experice such a sever one since mi mentle breakdown in Edinburgh. Thoughts are going through my head, I feel upset and angry. I also feel staff aint doing much until I fully snap and attack!!. Im out in 6weeks but its now the hardest 6weeks of my lyfe.

I hope you's can help me.

Thanks

From G. Smith

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NHS Confidential. Personal data attached or placed

28/5/21 Georgina [redacted] 13134H4 04/12/1991
Peebles. E.H

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I hope you's can help me.

Thanks

From G. Smith

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Individual Report

Below is a summary of tasks undertaken and the information gathered in Do-IT Profiler. Where tasks have been completed an evaluation has been provided. Implications and recommendations are provided on the following pages. Please remember, the information in the report is based on the responses you have given.

Key

- 1 Significant challenges reported
- Many challenges reported
- 3 Reasonable skills - no action required
- 4 Good skills - no action required
- Completed
- Not completed

Summary

Personal Details	Module completed
KASS Great difficulties with this task.	1 [redacted]
The Way I Learn	
Literacy related skills Significant challenges reported	1 [redacted]
Attention and concentration skills Significant challenges reported	1 [redacted]
Social and communication skills Significant challenges reported	1 [redacted]
Coordination and Organisational skills Significant challenges reported	1 [redacted]

Personal Details [redacted]

Gender:	Female
Year of Birth:	1991
Current Marital Status:	Never Married
Living Arrangements Prior to Prison:	Other
Other:	[redacted] home

Personal Information

Looked after [redacted]	Yes
Left education:	13 to 14 years
Received additional support at [redacted]	Yes

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Type of support given:	One to one help With your learning such as with reading/writing/maths With your behaviour With your mental wellbeing such as counselling
Bullied at [redacted]	● Yes
Ever excluded from [redacted]	● Yes
If yes, how many times:	3 or more times
General attendance at [redacted]	● Hardly attended [redacted] at all (more than 75% of the time)
Qualifications:	● No formal qualifications
Employment Status (prior to prison):	○ Unemployed and have never had a paid job
First language:	English
Ethnic origin:	traveller
Status:	Convicted
Sentence type and length:	10 years and over (not life)
Age at first conviction:	13 - 15 years
Index offence:	Murder/Homicide
Substance misuse problems:	○ Yes
If yes, please specify:	Cannabis
A history of self harming:	○ Yes
If yes, when:	3 - 6 months
A history of attempted suicide:	○ Yes
If yes, when:	More than 12 months
Significant injury to your head or face:	○ Yes

Injury to head or face details

If yes, were you hospitalised:	○ Yes
If yes, were you knocked unconscious:	Yes
If yes, has there been a change in your behaviour:	○ Yes
If yes, having difficulty concentrating, organizing thoughts, remembering	○ Yes

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things:

Diagnosis:	Mental Health e.g. Anxiety, Schizophrenia, Depression,OCD
	Hearing and / or Speech, Language or Communication Condition
	Conditions restricting mobility / dexterity e.g. Arthritis affecting back, joints, limbs
	Other disabilities and health conditions
	Autism Spectrum Disorder e.g. Autism, Asperger's Syndrome
	Learning Difficulty e.g. ADHD / ADD, Dyslexia, Dyspraxia / DCD
Specific condition/s:	Asperger's Syndrome
	Autism Spectrum Disorder (ASD)
Specific condition/s:	Dyslexia
	Dyspraxia/ Developmental Coordination Disorder (DCD)
	Other learning difficulty
Specific condition/s:	Anxiety Disorder
	Depression
	Eating Disorder
	Panic Disorder (panic attacks)
	Personality Disorder
	Phobia
	Schizophrenia
	Other mental health condition
Specific condition/s:	Language / speech disorder
	Other hearing / speech problem
Specific condition/s:	Arthritis
	Back / neck condition / injury

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	Other mobility / dexterity condition
Other disability/condition:	Post concision syndrome (brain damage) body dismopher
Currently taking medication:	● Yes
If yes, please specify:	Anti depressants, [redacted] back and neck pain, qutiapian anti-psy, pain killers,
Previous contact with Learning Disabilities Services:	○ Yes
Registered as disabled:	Don't know
Think you have difficulties with learning:	● Yes
Moving around, climbing stairs:	No
Being understood by others:	● Yes
Able to use public transport:	Yes
Understanding what others have asked you to do:	● Yes
Manage your own money/ finances:	Yes
Reading and understanding English:	● Yes
[redacted] a book, newspaper, magazine, comic for pleasure:	● No
Writing in English:	● Yes
If you are going to a new place, do you need someone to show you how to get there:	● Yes

Resources

Based on the responses given there are 9 resources that may be useful:

To access your resources please view your report online

Avoiding Debt

Tips to help with your Professional Development

Tips on job searching

Managing Stress

Interview - day before

Interview - on the day

Transferable skills

How to positively disclose your conviction

Tips if you are feeling blue

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The table below shows where errors were made. You may also like to think about what other factors may have impacted on your performance in this task e.g. hearing, visual impairment, current substance misuse, English second language (please see responses to personal details).

Responses given

#	Question	Answer given	Duration	Score
1	Click on the one that contains flour:		10.31	✔
2	Click on the one that grows on trees:		10.75	✖
3	Click on the one that would create a beam:		34.55	✔
4	Click on the one used in just a winter sport:		9.17	✖
5	What time is the clock showing:	4:00	6.22	✔
6	Click on the shape that completes the larger square:		5.41	✔
7	What time is the clock showing:	9.30	5.31	✔
8	Click on the shape that completes the larger square:		3.59	✖
9	Which coin is worth the least:	[redacted]	4.94	✔
10	Which coin is worth the most:		3.97	✔
11	Which word would come first:	Bus	14.26	✖
12	Which word would come first:	Goat	15.69	✔
13	Click on the word which is the most opposite in meaning to the word:	afar	8.37	✖
14	Click on the word which is the most opposite in meaning to the word:	current	12.65	✖
15	Click on the word that is most similar in meaning to:	boiling	8.19	✔
16	Click on the word or phrase that makes the sentence true:	tables	21.67	✖
17	Who should you contact:	[redacted]	11.18	✖
18	Click on the one that the Computer House wouldn't accept:	Computer speakers	11.1	✖
19	Click on the box which shows the Vegetarian Dinner option on Tuesday:	Pasta bake	15.13	✔
20	Click on the box which [redacted] the Halal Lunch option on Monday:	Beef casserole	14.03	✖
21	What time does the last bus depart from City Centre:	21:14	21.97	✖
22	What time bus would you have to get on at South Shore:	13:00	21.37	✔
23	How many tickets does she have altogether:	16	10.32	✖
24	How many seats were empty:	16	3.5	✔
25	What time does it finish:	1:30	1.07	✖
26	How much money will each get:	20p	3.25	✖

The Way I Learn

This questionnaire gathers information about reading, writing, attention, concentration, social, communication, planning and coordination skills. This is screening for specific learning difficulties and how they may overlap.

Literacy related skills

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Your responses indicate that you have significant challenges with literacy related skills.

Tips to help:

- Keep a note book and write down any words you have difficulties reading, spelling or understanding the meaning of.
- Ask staff or a peer mentor if there are a list of keywords you need to know to be able to understand information given to you and ask if they can be written down for you.
- If you cannot spell a word - try and break it into parts (syllables) and sound it out. Try thinking of an easier word you can use in that instant.
- If you find it hard to remember instructions given to you ask for them to be written down for you.
- If spelling is difficult, ask to be shown how to use a spellchecker on the computer so you can check your spellings.
- If you are uncertain what someone has said to you- repeat back the instructions to check you have understood it or ask them to repeat it to you.
- To gain confidence in reading, practice reading out aloud.
- Building up your vocabulary is one of the key things to improve your general reading comprehension and understanding. The more you [redacted] the better you get at understanding the context in which the words are used.
- Try and gain access to books, magazines or newspapers on topics you are interested in – so you can enjoy reading.
- [redacted] as much as you can and topics you are interested in. Look up any words that you don't know. Write down your ideas as well. This will allow your vocabulary to expand and to use the words you are learning in context.

Attention and concentration skills

Your responses indicate that you have significant challenges with attention and concentration skills.

Tips to help:

- If you find listening to others in a classroom or in a group setting difficult to do, try to lean forward, and where appropriate ask questions to remain focused on what is being said. Sit close to the front of class/training session so you have less distraction from others around you.
- Use a diary or note book to keep a note of tasks you need to do so you don't forget. Put things back in the same place, where possible, so you know where they are rather than spending ages looking for them and wasting your time.
- If sleeping is difficult for you as it is hard to wind down, try listening to some music before sleeping or [redacted] a book till you become drowsy.
- You may be more impulsive and say or do something without thinking of the consequences of your actions. Talk through examples of this with a tutor or staff member so you can see how this has happened in the past. Try counting to ten as a way of stopping before acting.
- If you are very fidgety watching TV or sitting with others in a class/work shop setting, you may find doodling helps you to concentrate and listen.

Social and communication skills

Your responses indicate that you have significant challenges with social and communication skills.

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Tips to help:

- When starting a conversation it can be useful to say 'hello' or 'hi' or use the person's name if you know it. 'Excuse me' is another way of starting a conversation, especially with someone you don't know.
- In prison it is unavoidable to be in groups at times. Different groups will have different ways of operating and topics being talked about. Listen to the conversation and look for breaks or a pause in the conversation for you to take your turn.
- If the person you would like to talk to is already talking to someone else, especially if it is someone you do not know, it may be better to speak to them later when they are free. If the person isn't already talking to someone else, or is talking to someone you know, approach the person. Stop when you are about an arm's length away and face them.
- There are some 'safe' topics that usually won't offend most people. These can be about weather or what's on TV. Avoid talking about religion, money, or make personal comments about the person's appearance.
- Avoid personal questions if you are uncertain the person is a friend of yours. If someone appears happy or sad you could ask them how they feel. Try to be supportive e.g. " I am sorry you are feeling like that" if they are saying they are sad.
- Look out for signs when the person you are talking wants to end their conversation with you. They may move or turn away from you, stop responding to questions or looking at you.
- If someone says they are your friend they should be there to listen to you and be pleasant to you. If the person asks you to do anything that you are frightened about or makes you feel uncomfortable then this may a sign that they could be using you and are not a friend (even if they say so).
- Watch others and see how they behave in different settings and see how this may vary, e.g. in class/skills sessions; at mealtimes; when meeting someone new.

Coordination and Organisational skills

Your responses indicate that you have significant challenges with coordination and organisation.

Tips to help:

- If your handwriting is slow and untidy and difficult for you to [redacted] you could ask others to write down important information for you.
- If you find it difficult to handwrite [redacted] try to learn to type. Start slowly, then speed up once you are familiar with where the letters are on the keyboard.
- Some people may find ball/team sports harder to do. If so try and find a form of exercise such as going to the gym instead to keep you fit. Gaining fitness will also help give you more energy and help to sleep at night.
- Learning new skills may be harder for you. Ask someone to show you how to do the task if you are not certain as well as telling you what to do, where possible.
- You may need more practice learning a new skill. Be prepared to practice more - but it doesn't mean you can't learn to do it.

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Individual Report

Below is a summary of tasks undertaken and the information gathered in Do-IT Profiler. Where tasks have been completed an evaluation has been provided. Implications and recommendations are provided on the following pages. Please remember, the information in the report is based on the responses you have given.

Key

- 1 Significant challenges reported
- Many challenges reported
- 3 Reasonable skills - no action required
- 4 Good skills - no action required
- Completed
- Not completed

Summary

Personal Details	Module completed
KASS Great difficulties with this task.	1 [redacted]
The Way I Learn	
Literacy related skills Significant challenges reported	1 [redacted]
Attention and concentration skills Significant challenges reported	1 [redacted]
Social and communication skills Significant challenges reported	1 [redacted]
Coordination and Organisational skills Significant challenges reported	1 [redacted]

Personal Details

Gender:	Female
Year of Birth:	1991
Current Marital Status:	Never Married
Living Arrangements Prior to Prison:	Other
Other:	[redacted] home

Personal Information

Looked after [redacted]	Yes
Left education:	13 to 14 years
Received additional support at [redacted]	Yes

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Type of support given:	One to one help With your learning such as with reading/writing/maths With your behaviour With your mental wellbeing such as counselling
Bullied at [redacted]	● Yes
Ever excluded from [redacted]	● Yes
If yes, how many times:	3 or more times
General attendance at [redacted]	● Hardly attended [redacted] at all (more than 75% of the time)
Qualifications:	● No formal qualifications
Employment Status (prior to prison):	○ Unemployed and have never had a paid job
First language:	English
Ethnic origin:	traveller
Status:	Convicted
Sentence type and length:	10 years and over (not life)
Age at first conviction:	13 - 15 years
Index offence:	Murder/Homicide
Substance misuse problems:	○ Yes
If yes, please specify:	Cannabis
A history of self harming:	○ Yes
If yes, when:	3 - 6 months
A history of attempted suicide:	○ Yes
If yes, when:	More than 12 months
Significant injury to your head or face:	○ Yes

Injury to head or face details

If yes, were you hospitalised:	○ Yes
If yes, were you knocked unconscious:	Yes
If yes, has there been a change in your behaviour:	○ Yes
If yes, having difficulty concentrating, organizing thoughts, remembering	○ Yes

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things:

Diagnosis:	Mental Health e.g. Anxiety, Schizophrenia, Depression,OCD
	Hearing and / or Speech, Language or Communication Condition
	Conditions restricting mobility / dexterity e.g. Arthritis affecting back, joints, limbs
	Other disabilities and health conditions
	Autism Spectrum Disorder e.g. Autism, Asperger's Syndrome
	Learning Difficulty e.g. ADHD / ADD, Dyslexia, Dyspraxia / DCD
Specific condition/s:	Asperger's Syndrome
	Autism Spectrum Disorder (ASD)
Specific condition/s:	Dyslexia
	Dyspraxia/ Developmental Coordination Disorder (DCD)
	Other learning difficulty
Specific condition/s:	Anxiety Disorder
	Depression
	Eating Disorder
	Panic Disorder (panic attacks)
	Personality Disorder
	Phobia
	Schizophrenia
	Other mental health condition
Specific condition/s:	Language / speech disorder
	Other hearing / speech problem
Specific condition/s:	Arthritis
	Back / neck condition / injury

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	Other mobility / dexterity condition
Other disability/condition:	Post concision syndrome (brain damage) body dismopher
Currently taking medication:	● Yes
If yes, please specify:	Anti depressants, [redacted] back and neck pain, qutiapian anti-psy, pain killers,
Previous contact with Learning Disabilities Services:	○ Yes
Registered as disabled:	Don't know
Think you have difficulties with learning:	● Yes
Moving around, climbing stairs:	No
Being understood by others:	● Yes
Able to use public transport:	Yes
Understanding what others have asked you to do:	● Yes
Manage your own money/ finances:	Yes
Reading and understanding English:	● Yes
[redacted] a book, newspaper, magazine, comic for pleasure:	● No
Writing in English:	● Yes
If you are going to a new place, do you need someone to show you how to get there:	● Yes

Resources

Based on the responses given there are 9 resources that may be useful:

To access your resources please view your report online

Avoiding Debt

Tips to help with your Professional Development

Tips on job searching

Managing Stress

Interview - day before

Interview - on the day

Transferable skills

How to positively disclose your conviction

Tips if you are feeling blue

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The table below shows where errors were made. You may also like to think about what other factors may have impacted on your performance in this task e.g. hearing, visual impairment, current substance misuse, English second language (please see responses to personal details).

Responses given

#	Question	Answer given	Duration	Score
1	Click on the one that contains flour:		10.31	✔
2	Click on the one that grows on trees:		10.75	✖
3	Click on the one that would create a beam:		34.55	✔
4	Click on the one used in just a winter sport:		9.17	✖
5	What time is the clock showing:	4:00	6.22	✔
6	Click on the shape that completes the larger square:		5.41	✔
7	What time is the clock showing:	9.30	5.31	✔
8	Click on the shape that completes the larger square:		3.59	✖
9	Which coin is worth the least:	[redacted]	4.94	✔
10	Which coin is worth the most:		3.97	✔
11	Which word would come first:	Bus	14.26	✖
12	Which word would come first:	Goat	15.69	✔
13	Click on the word which is the most opposite in meaning to the word:	afar	8.37	✖
14	Click on the word which is the most opposite in meaning to the word:	current	12.65	✖
15	Click on the word that is most similar in meaning to:	boiling	8.19	✔
16	Click on the word or phrase that makes the sentence true:	tables	21.67	✖
17	Who should you contact:	[redacted]	11.18	✖
18	Click on the one that the Computer House wouldn't accept:	Computer speakers	11.1	✖
19	Click on the box which shows the Vegetarian Dinner option on Tuesday:	Pasta bake	15.13	✔
20	Click on the box which [redacted] the Halal Lunch option on Monday:	Beef casserole	14.03	✖
21	What time does the last bus depart from City Centre:	21:14	21.97	✖
22	What time bus would you have to get on at South Shore:	13:00	21.37	✔
23	How many tickets does she have altogether:	16	10.32	✖
24	How many seats were empty:	16	3.5	✔
25	What time does it finish:	1:30	1.07	✖
26	How much money will each get:	20p	3.25	✖

The Way I Learn

This questionnaire gathers information about reading, writing, attention, concentration, social, communication, planning and coordination skills. This is screening for specific learning difficulties and how they may overlap.

Literacy related skills

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Your responses indicate that you have significant challenges with literacy related skills.

Tips to help:

- Keep a note book and write down any words you have difficulties reading, spelling or understanding the meaning of.
- Ask staff or a peer mentor if there are a list of keywords you need to know to be able to understand information given to you and ask if they can be written down for you.
- If you cannot spell a word - try and break it into parts (syllables) and sound it out. Try thinking of an easier word you can use in that instant.
- If you find it hard to remember instructions given to you ask for them to be written down for you.
- If spelling is difficult, ask to be shown how to use a spellchecker on the computer so you can check your spellings.
- If you are uncertain what someone has said to you- repeat back the instructions to check you have understood it or ask them to repeat it to you.
- To gain confidence in reading, practice reading out aloud.
- Building up your vocabulary is one of the key things to improve your general reading comprehension and understanding. The more you [redacted] the better you get at understanding the context in which the words are used.
- Try and gain access to books, magazines or newspapers on topics you are interested in – so you can enjoy reading.
- [redacted] as much as you can and topics you are interested in. Look up any words that you don't know. Write down your ideas as well. This will allow your vocabulary to expand and to use the words you are learning in context.

Attention and concentration skills

Your responses indicate that you have significant challenges with attention and concentration skills.

Tips to help:

- If you find listening to others in a classroom or in a group setting difficult to do, try to lean forward, and where appropriate ask questions to remain focused on what is being said. Sit close to the front of class/training session so you have less distraction from others around you.
- Use a diary or note book to keep a note of tasks you need to do so you don't forget. Put things back in the same place, where possible, so you know where they are rather than spending ages looking for them and wasting your time.
- If sleeping is difficult for you as it is hard to wind down, try listening to some music before sleeping or [redacted] a book till you become drowsy.
- You may be more impulsive and say or do something without thinking of the consequences of your actions. Talk through examples of this with a tutor or staff member so you can see how this has happened in the past. Try counting to ten as a way of stopping before acting.
- If you are very fidgety watching TV or sitting with others in a class/work shop setting, you may find doodling helps you to concentrate and listen.

Social and communication skills

Your responses indicate that you have significant challenges with social and communication skills.

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Tips to help:

- When starting a conversation it can be useful to say 'hello' or 'hi' or use the person's name if you know it. 'Excuse me' is another way of starting a conversation, especially with someone you don't know.
- In prison it is unavoidable to be in groups at times. Different groups will have different ways of operating and topics being talked about. Listen to the conversation and look for breaks or a pause in the conversation for you to take your turn.
- If the person you would like to talk to is already talking to someone else, especially if it is someone you do not know, it may be better to speak to them later when they are free. If the person isn't already talking to someone else, or is talking to someone you know, approach the person. Stop when you are about an arm's length away and face them.
- There are some 'safe' topics that usually won't offend most people. These can be about weather or what's on TV. Avoid talking about religion, money, or make personal comments about the person's appearance.
- Avoid personal questions if you are uncertain the person is a friend of yours. If someone appears happy or sad you could ask them how they feel. Try to be supportive e.g. " I am sorry you are feeling like that" if they are saying they are sad.
- Look out for signs when the person you are talking wants to end their conversation with you. They may move or turn away from you, stop responding to questions or looking at you.
- If someone says they are your friend they should be there to listen to you and be pleasant to you. If the person asks you to do anything that you are frightened about or makes you feel uncomfortable then this may a sign that they could be using you and are not a friend (even if they say so).
- Watch others and see how they behave in different settings and see how this may vary, e.g. in class/skills sessions; at mealtimes; when meeting someone new.

Coordination and Organisational skills

Your responses indicate that you have significant challenges with coordination and organisation.

Tips to help:

- If your handwriting is slow and untidy and difficult for you to [redacted] you could ask others to write down important information for you.
- If you find it difficult to handwrite [redacted] try to learn to type. Start slowly, then speed up once you are familiar with where the letters are on the keyboard.
- Some people may find ball/team sports harder to do. If so try and find a form of exercise such as going to the gym instead to keep you fit. Gaining fitness will also help give you more energy and help to sleep at night.
- Learning new skills may be harder for you. Ask someone to show you how to do the task if you are not certain as well as telling you what to do, where possible.
- You may need more practice learning a new skill. Be prepared to practice more - but it doesn't mean you can't learn to do it.

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Individual Report

Below is a summary of tasks undertaken and the information gathered in Do-IT Profiler. Where tasks have been completed an evaluation has been provided. Implications and recommendations are provided on the following pages. Please remember, the information in the report is based on the responses you have given.

Key

- 1 Significant challenges reported
- Many challenges reported
- 3 Reasonable skills - no action required
- 4 Good skills - no action required
- Completed
- Not completed

Summary

Personal Details	Module completed
KASS Great difficulties with this task.	1 [redacted]
The Way I Learn	
Literacy related skills Significant challenges reported	1 [redacted]
Attention and concentration skills Significant challenges reported	1 [redacted]
Social and communication skills Significant challenges reported	1 [redacted]
Coordination and Organisational skills Significant challenges reported	1 [redacted]

Personal Details

Gender:	Female
Year of Birth:	1991
Current Marital Status:	Never Married
Living Arrangements Prior to Prison:	Other
Other:	[redacted] home

Personal Information

Looked after [redacted]	Yes
Left education:	13 to 14 years
Received additional support at [redacted]	Yes

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Type of support given:	One to one help With your learning such as with reading/writing/maths With your behaviour With your mental wellbeing such as counselling
Bullied at [redacted]	● Yes
Ever excluded from [redacted]	● Yes
If yes, how many times:	3 or more times
General attendance at [redacted]	● Hardly attended [redacted] at all (more than 75% of the time)
Qualifications:	● No formal qualifications
Employment Status (prior to prison):	○ Unemployed and have never had a paid job
First language:	English
Ethnic origin:	traveller
Status:	Convicted
Sentence type and length:	10 years and over (not life)
Age at first conviction:	13 - 15 years
Index offence:	Murder/Homicide
Substance misuse problems:	○ Yes
If yes, please specify:	Cannabis
A history of self harming:	○ Yes
If yes, when:	3 - 6 months
A history of attempted suicide:	○ Yes
If yes, when:	More than 12 months
Significant injury to your head or face:	○ Yes

Injury to head or face details

If yes, were you hospitalised:	○ Yes
If yes, were you knocked unconscious:	Yes
If yes, has there been a change in your behaviour:	○ Yes
If yes, having difficulty concentrating, organizing thoughts, remembering	○ Yes

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things:

Diagnosis:	Mental Health e.g. Anxiety, Schizophrenia, Depression,OCD
	Hearing and / or Speech, Language or Communication Condition
	Conditions restricting mobility / dexterity e.g. Arthritis affecting back, joints, limbs
	Other disabilities and health conditions
	Autism Spectrum Disorder e.g. Autism, Asperger's Syndrome
	Learning Difficulty e.g. ADHD / ADD, Dyslexia, Dyspraxia / DCD
Specific condition/s:	Asperger's Syndrome
	Autism Spectrum Disorder (ASD)
Specific condition/s:	Dyslexia
	Dyspraxia/ Developmental Coordination Disorder (DCD)
	Other learning difficulty
Specific condition/s:	Anxiety Disorder
	Depression
	Eating Disorder
	Panic Disorder (panic attacks)
	Personality Disorder
	Phobia
	Schizophrenia
	Other mental health condition
Specific condition/s:	Language / speech disorder
	Other hearing / speech problem
Specific condition/s:	Arthritis
	Back / neck condition / injury

[redacted] Smith - 11/06/2021 10:38:51

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	Other mobility / dexterity condition
Other disability/condition:	Post concision syndrome (brain damage) body dismopher
Currently taking medication:	● Yes
If yes, please specify:	Anti depressants, [redacted] back and neck pain, qutiapian anti-psy, pain killers,
Previous contact with Learning Disabilities Services:	○ Yes
Registered as disabled:	Don't know
Think you have difficulties with learning:	● Yes
Moving around, climbing stairs:	No
Being understood by others:	● Yes
Able to use public transport:	Yes
Understanding what others have asked you to do:	● Yes
Manage your own money/ finances:	Yes
Reading and understanding English:	● Yes
[redacted] a book, newspaper, magazine, comic for pleasure:	● No
Writing in English:	● Yes
If you are going to a new place, do you need someone to show you how to get there:	● Yes

Resources

Based on the responses given there are 9 resources that may be useful:

To access your resources please view your report online

Avoiding Debt

Tips to help with your Professional Development

Tips on job searching

Managing Stress

Interview - day before

Interview - on the day

Transferable skills

How to positively disclose your conviction

Tips if you are feeling blue

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The table below shows where errors were made. You may also like to think about what other factors may have impacted on your performance in this task e.g. hearing, visual impairment, current substance misuse, English second language (please see responses to personal details).

Responses given

#	Question	Answer given	Duration	Score
1	Click on the one that contains flour:		10.31	✔
2	Click on the one that grows on trees:		10.75	✖
3	Click on the one that would create a beam:		34.55	✔
4	Click on the one used in just a winter sport:		9.17	✖
5	What time is the clock showing:	4:00	6.22	✔
6	Click on the shape that completes the larger square:		5.41	✔
7	What time is the clock showing:	9.30	5.31	✔
8	Click on the shape that completes the larger square:		3.59	✖
9	Which coin is worth the least:	[redacted]	4.94	✔
10	Which coin is worth the most:		3.97	✔
11	Which word would come first:	Bus	14.26	✖
12	Which word would come first:	Goat	15.69	✔
13	Click on the word which is the most opposite in meaning to the word:	afar	8.37	✖
14	Click on the word which is the most opposite in meaning to the word:	current	12.65	✖
15	Click on the word that is most similar in meaning to:	boiling	8.19	✔
16	Click on the word or phrase that makes the sentence true:	tables	21.67	✖
17	Who should you contact:	[redacted]	11.18	✖
18	Click on the one that the Computer House wouldn't accept:	Computer speakers	11.1	✖
19	Click on the box which shows the Vegetarian Dinner option on Tuesday:	Pasta bake	15.13	✔
20	Click on the box which [redacted] the Halal Lunch option on Monday:	Beef casserole	14.03	✖
21	What time does the last bus depart from City Centre:	21:14	21.97	✖
22	What time bus would you have to get on at South Shore:	13:00	21.37	✔
23	How many tickets does she have altogether:	16	10.32	✖
24	How many seats were empty:	16	3.5	✔
25	What time does it finish:	1:30	1.07	✖
26	How much money will each get:	20p	3.25	✖

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Tips to help:

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- To gain confidence in reading, practice reading out aloud.
- Building up your vocabulary is one of the key things to improve your general reading comprehension and understanding. The more you [redacted] the better you get at understanding the context in which the words are used.
- Try and gain access to books, magazines or newspapers on topics you are interested in – so you can enjoy reading.
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- Use a diary or note book to keep a note of tasks you need to do so you don't forget. Put things back in the same place, where possible, so you know where they are rather than spending ages looking for them and wasting your time.
- If sleeping is difficult for you as it is hard to wind down, try listening to some music before sleeping or [redacted] a book till you become drowsy.
- You may be more impulsive and say or do something without thinking of the consequences of your actions. Talk through examples of this with a tutor or staff member so you can see how this has happened in the past. Try counting to ten as a way of stopping before acting.
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- If the person you would like to talk to is already talking to someone else, especially if it is someone you do not know, it may be better to speak to them later when they are free. If the person isn't already talking to someone else, or is talking to someone you know, approach the person. Stop when you are about an arm's length away and face them.
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- Look out for signs when the person you are talking wants to end their conversation with you. They may move or turn away from you, stop responding to questions or looking at you.
- If someone says they are your friend they should be there to listen to you and be pleasant to you. If the person asks you to do anything that you are frightened about or makes you feel uncomfortable then this may a sign that they could be using you and are not a friend (even if they say so).
- Watch others and see how they behave in different settings and see how this may vary, e.g. in class/skills sessions; at mealtimes; when meeting someone new.

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- Some people may find ball/team sports harder to do. If so try and find a form of exercise such as going to the gym instead to keep you fit. Gaining fitness will also help give you more energy and help to sleep at night.
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Individual Report

Below is a summary of tasks undertaken and the information gathered in Do-IT Profiler. Where tasks have been completed an evaluation has been provided. Implications and recommendations are provided on the following pages. Please remember, the information in the report is based on the responses you have given.

Key

- 1 Significant challenges reported
- Many challenges reported
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Summary

Personal Details	Module completed
KASS Great difficulties with this task.	1 [redacted]
The Way I Learn	
Literacy related skills Significant challenges reported	1 [redacted]
Attention and concentration skills Significant challenges reported	1 [redacted]
Social and communication skills Significant challenges reported	1 [redacted]
Coordination and Organisational skills Significant challenges reported	1 [redacted]

Personal Details

Gender:	Female
Year of Birth:	1991
Current Marital Status:	Never Married
Living Arrangements Prior to Prison:	Other
Other:	[redacted] home

Personal Information

Looked after [redacted]	Yes
Left education:	13 to 14 years
Received additional support at [redacted]	Yes

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Type of support given:	One to one help With your learning such as with reading/writing/maths With your behaviour With your mental wellbeing such as counselling
Bullied at [redacted]	● Yes
Ever excluded from [redacted]	● Yes
If yes, how many times:	3 or more times
General attendance at [redacted]	● Hardly attended [redacted] at all (more than 75% of the time)
Qualifications:	● No formal qualifications
Employment Status (prior to prison):	○ Unemployed and have never had a paid job
First language:	English
Ethnic origin:	traveller
Status:	Convicted
Sentence type and length:	10 years and over (not life)
Age at first conviction:	13 - 15 years
Index offence:	Murder/Homicide
Substance misuse problems:	○ Yes
If yes, please specify:	Cannabis
A history of self harming:	○ Yes
If yes, when:	3 - 6 months
A history of attempted suicide:	○ Yes
If yes, when:	More than 12 months
Significant injury to your head or face:	○ Yes

Injury to head or face details

If yes, were you hospitalised:	○ Yes
If yes, were you knocked unconscious:	Yes
If yes, has there been a change in your behaviour:	○ Yes
If yes, having difficulty concentrating, organizing thoughts, remembering	○ Yes

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things:

Diagnosis:	Mental Health e.g. Anxiety, Schizophrenia, Depression,OCD
	Hearing and / or Speech, Language or Communication Condition
	Conditions restricting mobility / dexterity e.g. Arthritis affecting back, joints, limbs
	Other disabilities and health conditions
	Autism Spectrum Disorder e.g. Autism, Asperger's Syndrome
	Learning Difficulty e.g. ADHD / ADD, Dyslexia, Dyspraxia / DCD
Specific condition/s:	Asperger's Syndrome
	Autism Spectrum Disorder (ASD)
Specific condition/s:	Dyslexia
	Dyspraxia/ Developmental Coordination Disorder (DCD)
	Other learning difficulty
Specific condition/s:	Anxiety Disorder
	Depression
	Eating Disorder
	Panic Disorder (panic attacks)
	Personality Disorder
	Phobia
	Schizophrenia
	Other mental health condition
Specific condition/s:	Language / speech disorder
	Other hearing / speech problem
Specific condition/s:	Arthritis
	Back / neck condition / injury

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	Other mobility / dexterity condition
Other disability/condition:	Post concision syndrome (brain damage) body dismopher
Currently taking medication:	● Yes
If yes, please specify:	Anti depressants, [redacted] back and neck pain, qutiapian anti-psy, pain killers,
Previous contact with Learning Disabilities Services:	○ Yes
Registered as disabled:	Don't know
Think you have difficulties with learning:	● Yes
Moving around, climbing stairs:	No
Being understood by others:	● Yes
Able to use public transport:	Yes
Understanding what others have asked you to do:	● Yes
Manage your own money/ finances:	Yes
Reading and understanding English:	● Yes
[redacted] a book, newspaper, magazine, comic for pleasure:	● No
Writing in English:	● Yes
If you are going to a new place, do you need someone to show you how to get there:	● Yes

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- When starting a conversation it can be useful to say 'hello' or 'hi' or use the person's name if you know it. 'Excuse me' is another way of starting a conversation, especially with someone you don't know.
- In prison it is unavoidable to be in groups at times. Different groups will have different ways of operating and topics being talked about. Listen to the conversation and look for breaks or a pause in the conversation for you to take your turn.
- If the person you would like to talk to is already talking to someone else, especially if it is someone you do not know, it may be better to speak to them later when they are free. If the person isn't already talking to someone else, or is talking to someone you know, approach the person. Stop when you are about an arm's length away and face them.
- There are some 'safe' topics that usually won't offend most people. These can be about weather or what's on TV. Avoid talking about religion, money, or make personal comments about the person's appearance.
- Avoid personal questions if you are uncertain the person is a friend of yours. If someone appears happy or sad you could ask them how they feel. Try to be supportive e.g. " I am sorry you are feeling like that" if they are saying they are sad.
- Look out for signs when the person you are talking wants to end their conversation with you. They may move or turn away from you, stop responding to questions or looking at you.
- If someone says they are your friend they should be there to listen to you and be pleasant to you. If the person asks you to do anything that you are frightened about or makes you feel uncomfortable then this may a sign that they could be using you and are not a friend (even if they say so).
- Watch others and see how they behave in different settings and see how this may vary, e.g. in class/skills sessions; at mealtimes; when meeting someone new.

Coordination and Organisational skills

Your responses indicate that you have significant challenges with coordination and organisation.

Tips to help:

- If your handwriting is slow and untidy and difficult for you to [redacted] you could ask others to write down important information for you.
- If you find it difficult to handwrite [redacted] try to learn to type. Start slowly, then speed up once you are familiar with where the letters are on the keyboard.
- Some people may find ball/team sports harder to do. If so try and find a form of exercise such as going to the gym instead to keep you fit. Gaining fitness will also help give you more energy and help to sleep at night.
- Learning new skills may be harder for you. Ask someone to show you how to do the task if you are not certain as well as telling you what to do, where possible.
- You may need more practice learning a new skill. Be prepared to practice more - but it doesn't mean you can't learn to do it.

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NHS Forth Valley

Women, [redacted],
CAMHS and [redacted]
Health Directorate

Consultant: Dr [redacted] Abu-Rajab
Specialty Doctor: Dr [redacted]
Address: Suite D
Falkirk Community Hospital
Major's Loan
Falkirk

Telephone: 01324 673554 (08:30 – 12:30)
Website: www.centralsexualhealth.org
Clinical Generic Email: FV-UHB.sexualhealth@nhs.net

NHS Forth Valley

Date dictated/typed: 14 June 2021 / 15 June 2021
[redacted] number AN07671539
CHI number **0412913127**
Ref IM/CD
Enquiries to [redacted] Admin Lead / Secretary
Extension 3555
Contact 01324 624000

Confidential

Ms Georgina Smith
H M Prison Cornton Vale
Stirling
FK9 5NU

Dear Georgina

As discussed, I am enclosing a copy of the letter received from Dr Maheshwari, Consultant Gynaecologist. This letter confirms that they will not see you for labiaplasty at this time.

As we discussed last week, should you be having ongoing problems following liberation, I suggest you see your GP.

Yours sincerely

DR I [redacted]
Speciality Doctor in Sexual and Reproductive Health

Copy to : Cliodhna Lane [redacted] Health/ Staff Nurse Health Centre H M Prison Cornton Vale Stirling

Inc. Letter from Dr Maheshwari Consultant Gynaecologist FVRH Larbert

INVESTORS IN PEOPLE | Gold

Chairman: Janie McCusker
Chief Executive: Cathie Cowan

Forth Valley NHS Board is the [redacted] name for Forth Valley Health [redacted]
Registered Office: Carseview House, Castle Business Park, Stirling, FK9 4SW

www.nhsforthvalley.com Facebook.com/nhsforthvalley @nhsforthvalley

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NHS Confidential: Personal data about a patient

Gynaecology Department
Consultant: Dr Sapna Maheshwari
Tel: 01324 567153

Forth Valley Royal Hospital
Stirling Road
Larbert
FK5 4WR

NHS Forth Valley

GYNAECOLOGY

Imogen [redacted]
Falkirk Community Hospital
FALKIRK

Date Dictated 05 May 2021
Date Typed 05 May 2021

Our Ref SM/cl
CHI 0412913127

Dear [redacted]

0412913127

Georgina Smith 04/12/1991
The Health Centre, PO Box 21616, Stirling FK7 1DW

Thank you for sending this referral letter for this lady. As we discussed we don't see patients referred for labiaplasty, so I am sending her referral back to yourself.

Kind regards.

Yours sincerely

(Dictated and electronically checked by Dr Sapna Maheshwari)

Dr Sapna Maheshwari
Consultant Gynaecologist

cc The Health Centre - Hmp, Po Box 18698, Peterhead, AB42 9AR

INVESTORS IN PEOPLE | Gold

Chair: Janet McClunkie
Chief Executive: Calliaghan Cowan

Forth Valley NHS Board is the common na[redacted]ealth Board
Registered Office: Carseview House, Cast[redacted]ling, FK9 4SW

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NHS Forth Valley

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Pre Liberation National Harm Reduction Session

Drug Worker Name: Jemma Beveridge

Date Seen: 17/6/21

10.15.

I understand that my tolerance to alcohol ■ drugs/NPS will be lower upon release and by choosing to use these substances, I may be putting myself at risk ■ overdose.

Prisoner	SPIN No.	CON ✓	REM ✓	Prisoner Signature	Hall	EDL	Refer to PHAS (Y/N)	Refer to Smoking Cessation (Y/N)	Vol T/Care Referral (Y/N)	Vol T/Care form comp. (Y/N)	Naloxone (Y/N)	PR2/ Vision U/Dated
Georgina Smith	131344	✓		X.G. Smith	Peebles	09.07.21	N	N	N	N	N	✓
TAS Referral	Accepted (Y/N)			Reason Declined	Area of Referral	Postcode						
As Above												

Pre Liberation National Harm Reduction Session Disclaimer

I do not require to participate in the Pre Liberation National Harm Reduction Session offered by the Prison Healthcare Addicitons Service ■ the following reason:

Prisoner	SPIN No.	CON	REM ■	Prisoner Signature	Hall	EDL	Comments/Reason	PR2/ Vision U/Dated

The session available has been fully explained to me and I take full responsibility for my own health and fully understand the potential consequences ■ my substance use. I understand that I can access this session later if I decide to do so by self referral.

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Georgina Smith	131344	✓		X.G. Smith	Peebles	09.07.21	N	N	N	N	N	✓
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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA
UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: H M PRISON,, CORNTON VALE,
[redacted]
Dr Craig Sayers
DOB: 04/12/1991
SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: Prison Medical Officer, HMP & YOI Cornton Vale
SAMPLE TYPE OF LATEST SPECIMEN: Serum
CLINICAL DETAILS REFERRING TO LATEST REQUEST: excess hair growth
COPY DETAILS:

DATE OF COLLECTION	LABORATORY NUMBER	TIME OF COLLECTION	PLASMA GLUCOSE fasting 3.6 mmol/l						
02/05/17	852398B	13.40	5.8						
21/04/21	294271X	10.10	4.7						
21/04/21	294272L	10.10							

DATE OF COLLECTION	LABORATORY NUMBER	Total CO_2 22-29 mmol/l	OSMOLALITY 275-295 mosm/kg H_2O	SODIUM 133-146 mmol/l	POTASSIUM 3.5-5.3 mmol/l	CHLORIDE 95-108 mmol/l	UREA 2.5-7.8 mmol/l	CREATININE 40-130 µmol/l	eGFR ml/min/1.73m2 <60 = CKD stage 3,4 or 5
18/11/15	183986G			138	4.2	105	2.9	75	>59
01/06/16	282141N			133	**HAEM**	105	2.8	56	>59
02/05/17	852399R			139	4.1	108	2.5	67	>59
11/07/18	246913F			139	4.8	**109**	3.0	59	>59
21/04/21	294272L			140	5.0	**111**	4.0	63	>59

DATE OF COLLECTION	LABORATORY NUMBER	AMYLASE up to 100 iu/l 37°C	AST 0-45 iu/l 37°C	ALT 0-55 iu/l 37°C	BILIRUBIN up to 21 µmol/l	TOTAL PROTEIN 60-80 g/l	ALBUMIN 35-50 g/l	ALKALINE PHOSPHATASE 30 - 130) iu/l 37°C	γGT 0-40 (female) iu/l 37°C
18/11/15	183986G		18	17	8	70	43	98	
02/05/17	852399R		27	27	6	68	42	89	
11/07/18	246913F		19	19	8	69	43	86	
21/04/21	294272L		16	14	8	67	40	75	

DATE OF COLLECTION	LABORATORY NUMBER	IRON 10-30 µmol/l	TIBC 45-72 µmol/l	CALCIUM 2.2-2.60 mmol/l	CORRECTED CALCIUM 2.2-2.60 mmol/l	PHOSPHATE 0.8-1.50 mmol/l (12-60 years)	MAGNESIUM 0.7-1.0 mmol/l	URATE 140-360 (female) µmol/l	CK(Total) 25-200 (female) iu/l 37°C
11/07/18	246913F			2.30	2.34	1.32			

DATE OF COLLECTION	LABORATORY NUMBER	T.S.H. 0.35-5.00 mu/l	FREE T4 9.0-21.0 pmol/l	FREE T3 3.0-6.0 pmol/l	PSA <4.0 µg/L	TRIGLYCERIDE fasting <2.0 mmol/l	CHOLESTEROL mmol/l target levels are risk dependent	H.D.L. >1.2 (female) mmol/l	L.D.L mmol/l target levels are risk dependent
21/04/21	294272L								
22/06/21	273421Q	0.92				1.3	5.0	1.3	3.1

18/11/15	183986G	C-Reactive Prot.	**<5**	mg/l
02/05/17	852399R	C-Reactive Prot.	**<5**	mg/l

to St clinic
24/6/21

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA
UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: H M PRISON,, CORNTON VALE,
[redacted]
Dr Craig Sayers
DOB: 04/12/1991
SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: Prison Medical Officer, HMP & YOI Cornton Vale
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to St clinic
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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA
UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: H M PRISON,, CORNTON VALE,
CONSULTANT: Dr [redacted] Sayers
DOB: 04/12/1991
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DATE OF COLLECTION	LABORATORY NUMBER	Urine OSMOLALITY mosm/KgH2O	Urine SODIUM mmol/24h	Urine POTASSIUM mmol/24h	Urine UREA 160-500 mmol/24h	Urine CALCIUM 2.5-7.5 mmol/24h	Urine PHOSPHATE 15-50 mmol/24h	Urine URATE 1.5-4.5 mmol/24h	

22/06/21	BB273421Q	FSH	6.1	U/L	
22/06/21	BB273421Q	LH	8.4	U/L	
22/06/21	BB273421Q	Oestradiol	80	pmol/L	(100 - 2000)

22/06/21 BB273421Q FSH Post-pubertal female follicular FSH 3-8 U/L LH 2-13 U/L

fo SH done
24/6/21

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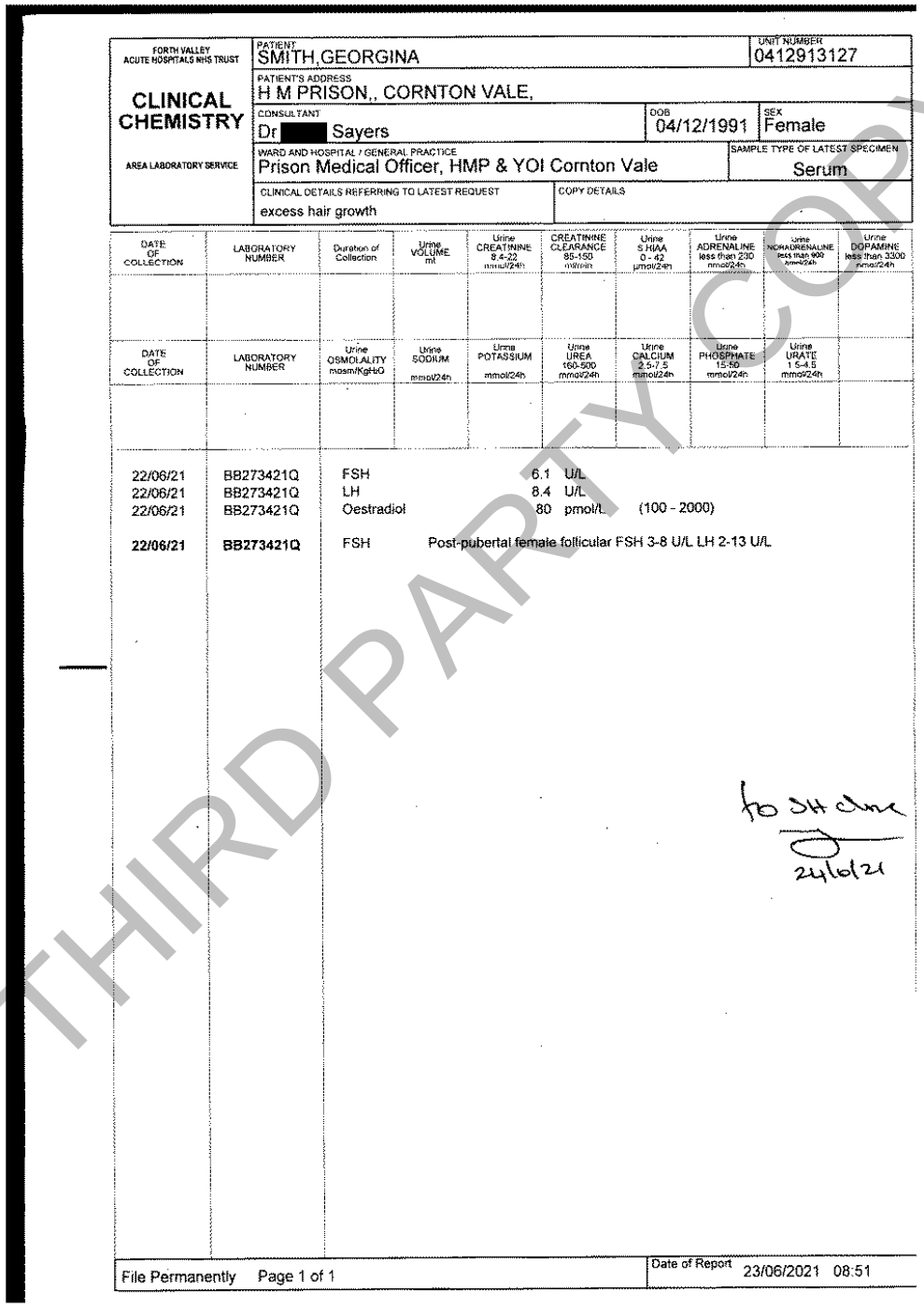

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24/6/21

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NHS Forth Valley

National Naloxone Training Programme HMP & YOI Cornton Vale

Delivered by: Jemma Beveridge Date Client Attended: 25/6/21

Prisoners Name	Spin Number	D.O.B	Prisoner Signature	A/YO	Hall	Liberation Date	Attended (Y / N)	Postcode	Nyoxoid/ Naloxone Injection	Initial Supply (Y/N)	VIS UPD.
Georgina Smith	131344	04/12/91	X G.Smithe	A	Peebles	09.07.21	Y	KA20 3PG	Nyoxoid	N	

** Caseworkers – please note ALL sections MUST be completed**

ELC 01308415 Date 9/23

iGPR Report

NHS Confidential: Personal data about a patient

INFORMATION SHARING CONSENT FORM

I X Georgina Smith accept supply of naloxone for use in the event of opiate overdose emergency situations and I agree to information sharing under the UK Data Protection Act (1998), as defined internally within the SPS and between the SPS and NHS Boards and NSS Information Statistics Division (NSS ISD). I understand that information shared with NSS ISD may be used for research and evaluation purposes but will be anonymous. Confidentiality will be maintained at all times unless I compromise security, expose [redacted] or [redacted] to others, or cause [redacted] over [redacted] who may be under my care under the [redacted] (Scotland) Act 1995.

Client signature: X G. Smith Date: 23/6/21

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NHS Forth Valley

National Naloxone Training Programme HMP & YOI Cornton Vale

Delivered by: Jemma Beveridge Date Client Attended: 25/6/21

Prisoners Name	Spin Number	D.O.B	Prisoner Signature	A/YO	Hall	Liberation Date	Attended (Y / N)	Postcode	Nyoxoid/ Naloxone Injection	Initial Supply (Y/N)	VIS UPD.
Georgina Smith	131344	04/12/91	X G.Smithe	A	Peebles	09.07.21	Y	KA20 3PG	Naloxone	N	

** Caseworkers – please note ALL sections MUST be completed**

ELC 01308413 Date 9/23

iGPR Report

NHS Confidential: Personal data about a patient

INFORMATION SHARING CONSENT FORM

I X Georgina Smith accept supply of naloxone for use in the event of opiate overdose emergency situations and I agree to information sharing under the UK Data Protection Act (1998), as defined internally within the SPS and between the SPS and NHS Boards and NSS Information Statistics Division (NSS ISD). I understand that information shared with NSS ISD may be used for research and evaluation purposes but will be anonymous. Confidentiality will be maintained at all times unless I compromise security, expose [redacted] or [redacted] to others, or cause [redacted] over [redacted] who may be under my care under the [redacted] (Scotland) Act 1995.

Client signature: X G. Smith Date: 23/6/21

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AN07671539

Gynaecology Department
Consultant: Dr Sapna Maheshwari
Tel: 01324 567153

Forth Valley Royal Hospital
Stirling Road
Larbert
FK5 4WR

NHS Forth Valley

GYNAECOLOGY

Imogen [redacted]
Falkirk Community Hospital
FALKIRK

Date Dictated 05 May 2021
Date Typed 05 May 2021

Our Ref SM/el
CHI 0412913127

0412913127

Dear [redacted]

Georgina Smith 04/12/1991
The Health Centre, PO Box 21616, Stirling FK7 1DW

Thank you for sending this referral letter for this lady. As we discussed we don't see patients referred for labiaplasty, so I am sending her referral back to yourself.

Kind regards.

Yours sincerely

(Dictated and electronically checked by Dr Sapna Maheshwari)

Dr Sapna Maheshwari
Consultant Gynaecologist

cc: The Health Centre - Hmp, Po Box 18698, Peterhead, AB42 9AR

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INVESTORS IN PEOPLE | Gold Until 2021

Chair: Janie McCusker
Chief Executive: Cathie Cowan

Forth Valley NHS Board is the common name for Forth Valley Health Board
Registered Office: Carseview House, Castle Business Park, Stirling, FK9 4SW

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NHS Confidential: Personal data about a patient

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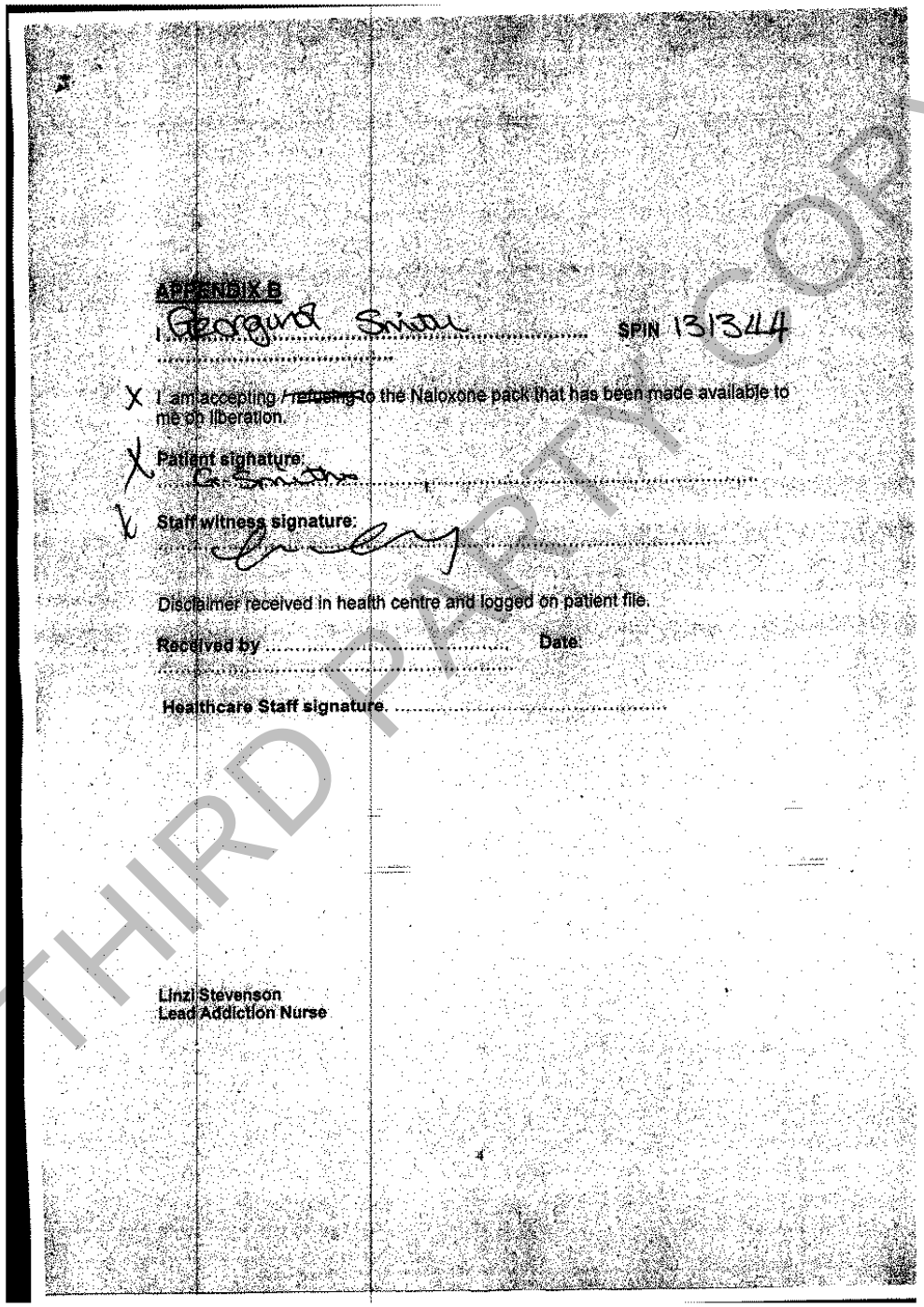

APPENDIX B

I, Georgina Swan SPIN 131344

X I am accepting / ~~refusing~~ to the Naloxone pack that has been made available to me on liberation.

X **Patient signature:** .....

X **Staff witness signature:** .....

Disclaimer received in health centre and logged on patient file.

Received by ..... **Date:** .....

Healthcare Staff signature .....

Linzi Stevenson
Lead Addiction Nurse

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NHS Forth Valley

supplementary kardex

Version 01

METHADONE	Y	N
SUBOXONE	Y	N

IP contract: 29/3/21

ORDER CODE 04

SIDE A

Prescription Sheet No: ____ of ____

Start Date: / /

Kardex Re-written Date: 12/3/21

HMP CLYDE

REGULAR PRESCRIPTIONS

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Inits	Discontinued Date/Inits	MEDICATION/FORM	Dose	Route	Times of Administration AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Inits
A	12/3/21	30/1/22				PAROXETINE	20mg	O	✓				W		
[redacted]						PROPRANOLOL LA	80mg	O	✓				W		
C	12/3/21	30/1/22			22/4/21 SM	ERYTHROMYCIN	250mg	O	✓			✓	W		
D	29/3/21	24/4/21				QUETIAPINE	25mg	O				✓	W		
E	30/3/21	30/1/21			[redacted]	AMITRIPTYLINE	25mg	O				✓	W		
F	30/3/21	30/10/21			13.4.21	QUETIAPINE	50mg	O	✓			✓	W		
G	13/[illegible]/21	13/[illegible]/21		26/5/21		QUETIAPINE	50mg	O	✓				W		
H	13/4/21	13/10/21		26/5/21		QUETIAPINE	75mg	O				✓	W		
I	22/4/21	22/10/21				AMITRIPTYLINE	50mg	O				✓	W		
J	22/4/21	[illegible]	30/11/21			LUMECYCLINE	408mg	O	✓				M		
K	22/4/21	[illegible]	30/11/21			BENZOYL PEROXIDE	1APP	TOP	✓			✓	M		
L	26/5/21	26/2/22				QUETIAPINE	75mg	O	✓				W		
M	26/5/21	26/2/22				QUETIAPINE	100mg	O				✓	W		
N															
O															
P															

NAME: GEORGINA SMITH SPIN: 131344 DOB: 4/12/91 LOCATION: P ALLERGIES: N/K

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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iGPR Report

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-WILLIAMS

NHS Forth Valley

Version 01

ORDER CODE 06

Side B

Prescription Sheet No: ____ of ____

Start Date: / /

Kardex Re-written Date: 12/3/21

"AS REQUIRED" PRESCR — HMP C/MALE

	Start Date	Review Date	Stop Date	DRUGS (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Date	Initls
1	12/3/21	30/11/22		BISACODYL	10mg	O	NOCTE	M					
~~2~~	~~12/3/21~~	~~30/11/22~~		~~PARACETAMOL CAPL 500~~	~~1APP~~	~~TOP~~	~~PRN~~	~~M~~					
~~3~~	~~12/3/21~~	~~30/11/22~~	21/4/21 BRS	~~UNIT GEL~~	~~1APP~~	~~TOP~~	~~PR DIRECTED~~	~~M~~					
4	12/3/21	30/11/22		FERROUS FUMARATE	120mg	O	ONCE DAILY	M					
5	30/3/21	30/11/21		DEEP HEAT	1APP	TOP	PRN	M					
6	30/3/21	30/11/21		CELECOXIB	100mg	O	BD	M					
7	7/4/21	7/4/22		CETRABEN OINT	1APP	TOP	PRN	M	Eliane				
8	22/4/21	22/10/21		MOVELAT GEL	1APP	TOP	AS DIRECTED	M					
9	22/4/21	22/10/21		DERMOL WASH	1APP	TOP	PRN	M					
10	22/4/21	22/10/21		CHEMIST SHAMPOO	1APP	TOP	TDS	M					
11	13/05/21	13/05/21		DESOGESTREL	X1	ORAL	one daily	M					
12	[redacted]5/21	19/5/22		YELLOW SOFT PARAFIN	1APP	TOP	PRN	M	Eliane				
13													
14													

Once Only Prescriptions

	Admin Data	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescribers Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1	30/3/21	As RQD	LIDOCAINE 2% (FOR IMPLANTION)		S/C			11 mg		
2	30/3/21	AM	IMPLANON	x1	S/C			11		
3										

NAME: GEORGINA SMITH SPIN: 131344 DOB: 4/12/91 LOCATION: [redacted] P ALLERGIES: N/K

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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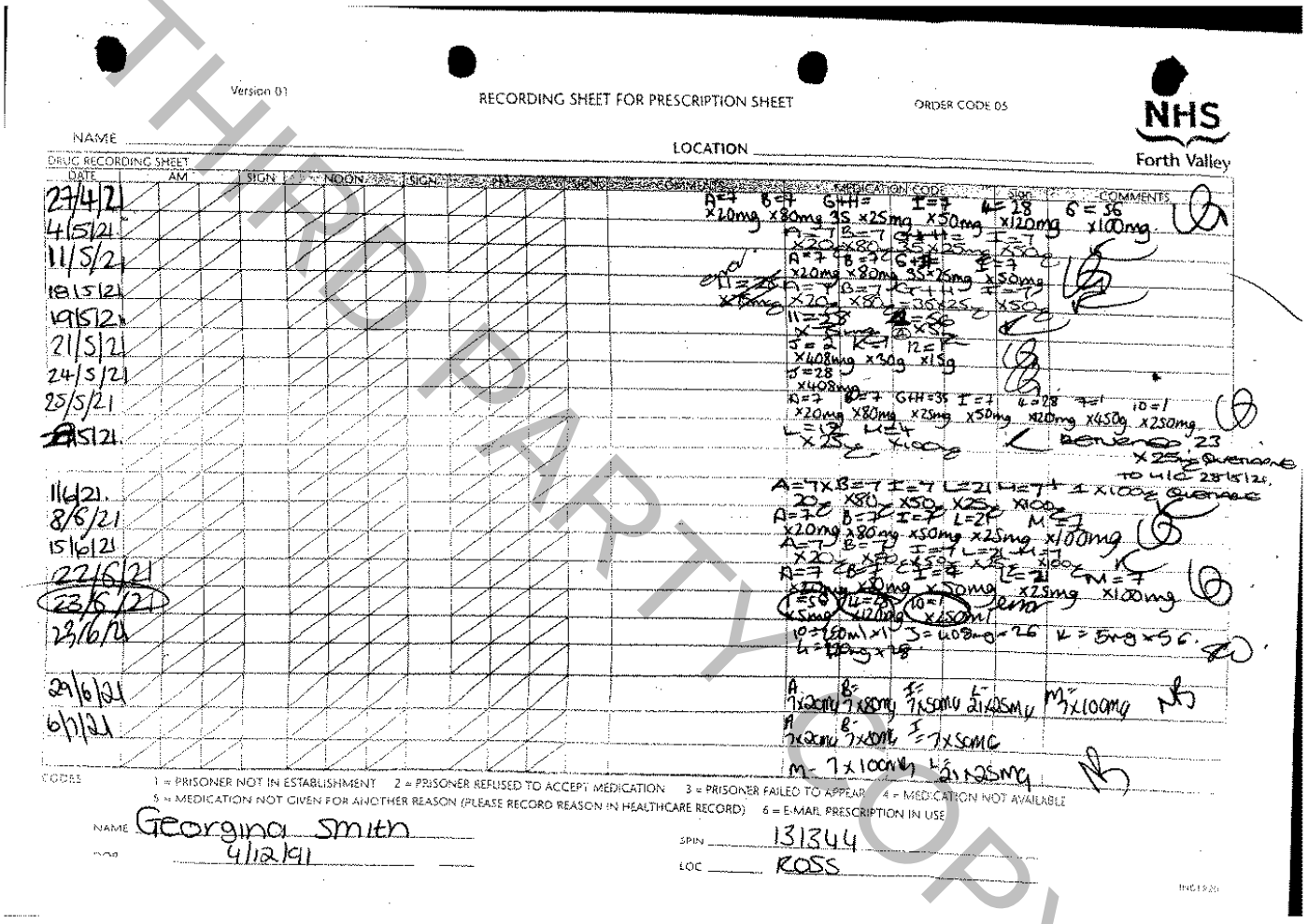

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME

LOCATION

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS
23/4/21							
4/5/21							
11/5/21							
18/5/21							
19/5/21							
21/5/21							
24/5/21							
25/5/21							
28/5/21							
11/6/21							
8/6/21							
15/6/21							
22/6/21							
23/6/21							
23/6/21							
29/6/21							
6/7/21							

MEDICATION CODE | Sign | COMMENTS

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith

DOB 4/12/91

SPIN 131344

LOC ROSS

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NHS Confidential - Personal data about a patient

NAME

RECORDING SHEET FOR PRESCRIPTION SHEET

LOCATION

Version 03

ORDER CODE 05

NHS Forth Valley

DRUG RECORDING SHEET

DATE | AM SIGN | NOON SIGN | PM SIGN | MEDICATION CODE | INIT | COMMENTS

16/2/21 — Rowan PRO given

19/3/21

22/3/21

23/3/21

29/3/21

30/3/21

6/4/21

8/4/21

13/4/21

19/4/21

20/4/21

23/4/21

23/4/21

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE

5 = MEDIC ATTEND NEXT DAY/EN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith

SPEN 131344

LOC P

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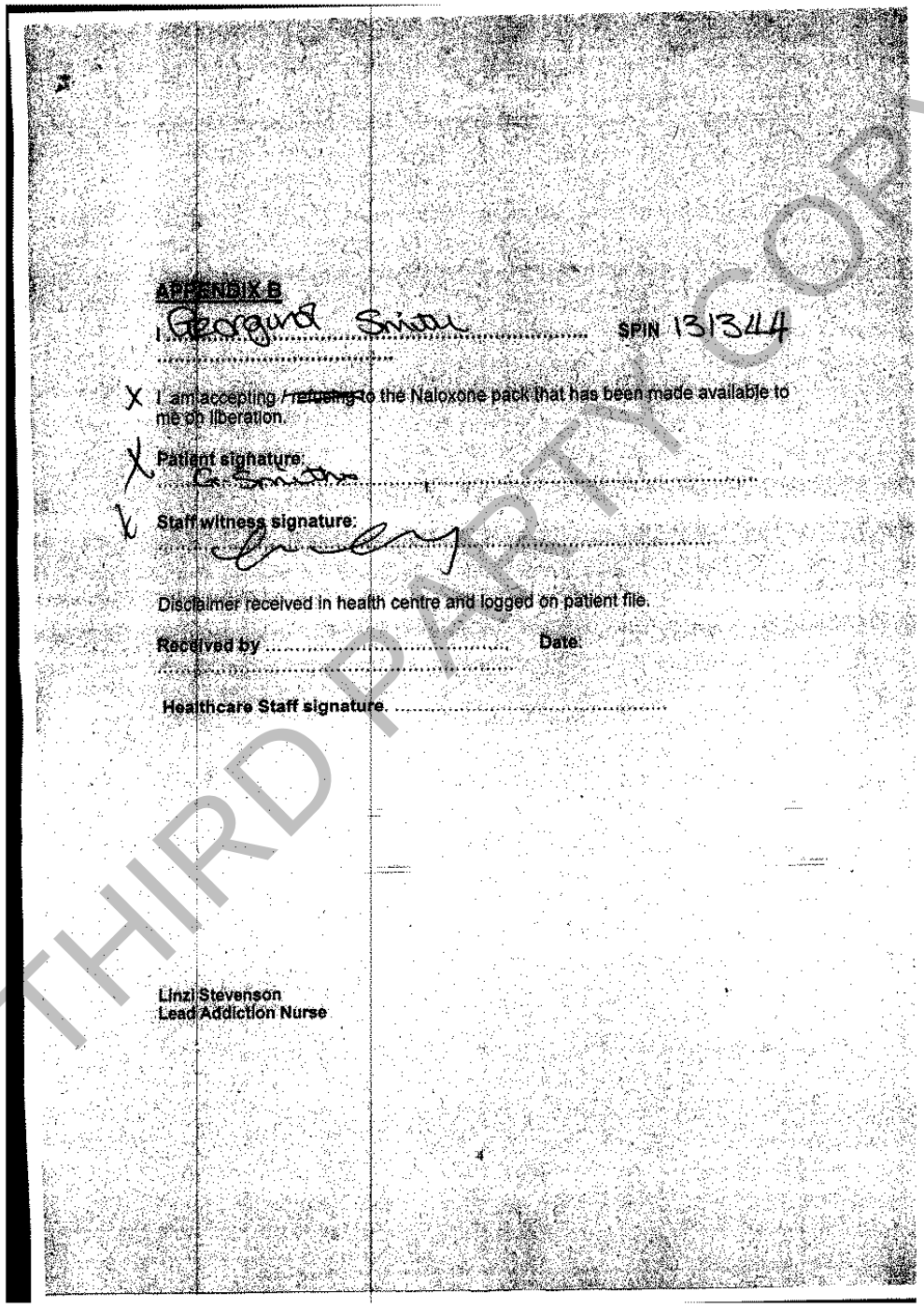

APPENDIX B

I Georgina Swan SPIN 131344

X I am accepting / ~~refusing~~ to the Naloxone pack that has been made available to me on liberation.

X **Patient signature:** .....

X **Staff witness signature:** .....

Disclaimer received in health centre and logged on patient file.

Received by ..... **Date:** .....

Healthcare Staff signature .....

Linzi Stevenson
Lead Addiction Nurse

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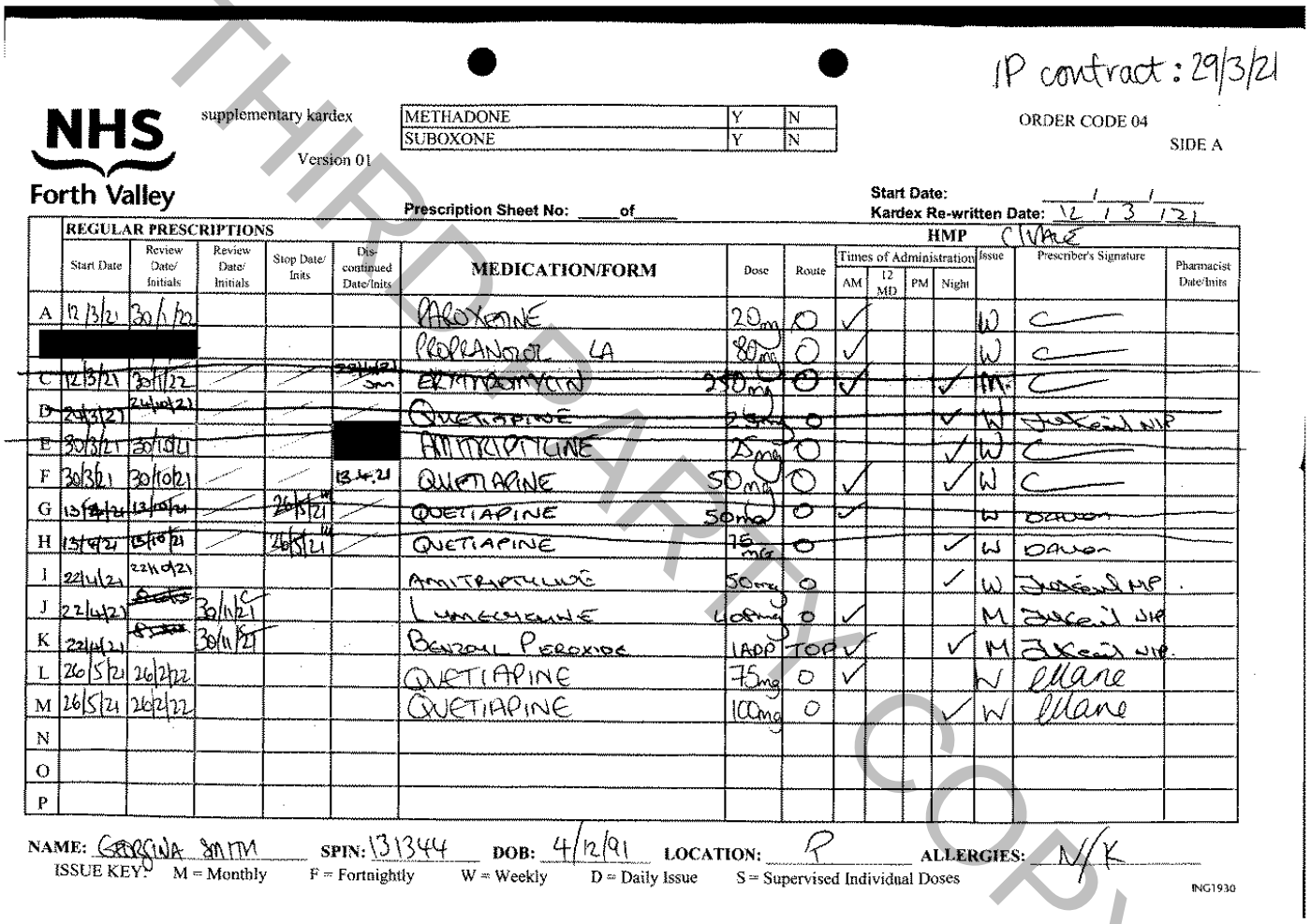

NHS Forth Valley

supplementary kardex

Version 01

METHADONE	Y	N
SUBOXONE	Y	N

IP contract: 29/3/21

ORDER CODE 04

SIDE A

Prescription Sheet No: ____ of ____

Start Date: / /

Kardex Re-written Date: 12/3/21

HMP CLYDE

	REGULAR PRESCRIPTIONS								Times of Administration						
	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Inits	Discontinued Date/Inits	MEDICATION/FORM	Dose	Route	AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Inits
A	12/3/21	30/1/22				PAROXETINE	20mg	O	✓				W	C	
	[redacted]					PROPRANOLOL LA	80mg	O	✓				W	C	
C	12/3/21	30/1/22			22/4/21 SM	ERYTHROMYCIN	250mg	O	✓			✓	W	C	
D	29/3/21	24/4/21				QUETIAPINE	25mg	O				✓	W	DOSETTE MP	
E	30/3/21	30/1/21			[redacted]	AMITRIPTYLINE	25mg	O				✓	W	C	
F	30/3/21	30/10/21			13.4.21	QUETIAPINE	50mg	O	✓			✓	W	C	
G	13/4/21	13/10/21		26/5/21 M		QUETIAPINE	50mg	O	✓				W	DAVON	
H	13/4/21	13/10/21		26/5/21 M		QUETIAPINE	75mg	O				✓	W	DAVON	
I	22/4/21	22/10/21				AMITRIPTYLINE	50mg	O				✓	W	DOSETTE MP	
J	22/4/21	[illegible]	30/11/21			LUMECYCLINE	408mg	O	✓				M	DOSETTE MP	
K	22/4/21	[illegible]	30/11/21			BENZOYL PEROXIDE	1APP	TOP	✓			✓	M	DOSETTE MP	
L	26/5/21	26/2/22				QUETIAPINE	75mg	O	✓				W	ELLANE	
M	26/5/21	26/2/22				QUETIAPINE	100mg	O				✓	W	ELLANE	
N															
O															
P															

NAME: GEORGINA SMITH SPIN: 131344 DOB: 4/12/91 LOCATION: P ALLERGIES: N/K

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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-WILLIAMS

NHS Forth Valley

Version 01

ORDER CODE 06

Side B

Prescription Sheet No: ____ of ____

Start Date: / /

Kardex Re-written Date: 12/3/21

"AS REQUIRED" PRESCR — HMP C/MALE

	Start Date	Review Date	Stop Date	DRUGS (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Initls	Date	Initls
1	12/3/21	30/11/22		BISACODYL	10mg	O	NOCTE	M					
2	12/3/21	30/11/22		PARACETAMOL CAPL 500	1APP	TDP	PRN	M					
3	12/3/21	30/11/22	21/4/21 BRS	UNIT GEL	1APP	TDP	AS DIRECTED	M					
4	12/3/21	30/11/22		FESOTERODINE	4mg	O	ONCE DAILY	M					
5	30/3/21	30/11/21		DEEP HEAT	1APP	TDP	PRN	M					
6	30/3/21	30/11/21		CELECOXIB	100mg	O	BD	M					
7	7/4/21	7/4/22		CETRABEN OINT	1APP	TDP	PRN	M	Liliane				
8	22/4/21	22/10/21		MOVELAT GEL	1APP	TDP	AS DIRECTED	M					
9	22/4/21	22/10/21		DERMOL WASH	1APP	TDP	PRN	M					
10	22/4/21	22/10/21		CHEMIST SHAMPOO	1APP	TDP	TDS	M					
11	13/05/21	13/05/21		DESOGESTREL	X1 TOTAL		one daily	M					
12	[redacted]5/21	19/5/22		YELLOW SOFT PARAFIN	1APP	TDP	PRN	M	Liliane				
13													
14													

Once Only Prescriptions

	Admin Data	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescribers Signature	Given By	Pharmacist Time Given	Date	Initls
1	30/3/21	As RQD	LIDOCAINE 2% (FOR IMPLANTATION)		S/C			11 mg		
2	30/3/21	AM	IMPLANTATION x 1		S/C			11		
3										

NAME: GEORGINA SMITH SPIN: 131344 DOB: 4/12/91 LOCATION: 6 P ALLERGIES: N/K

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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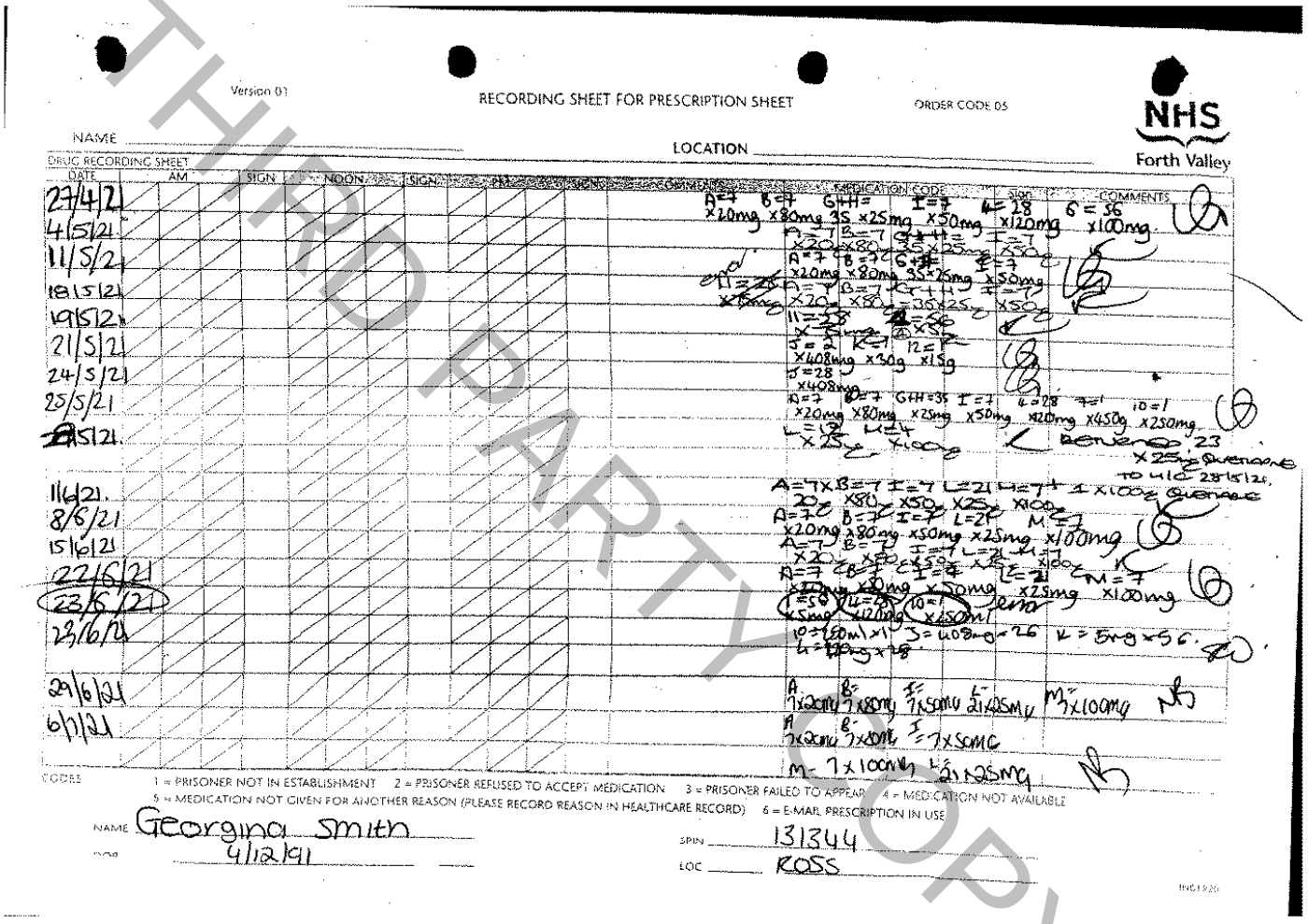

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME

LOCATION

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS
23/4/21							
4/5/21							
11/5/21							
18/5/21							
19/5/21							
21/5/21							
24/5/21							
25/5/21							
28/5/21							
11/6/21							
8/6/21							
15/6/21							
22/6/21							
23/6/21							
23/6/21							
29/6/21							
6/7/21							

MEDICATION CODE | Sign | COMMENTS

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NAME Georgina Smith

DOB 4/12/91

SPIN 131344

LOC ROSS

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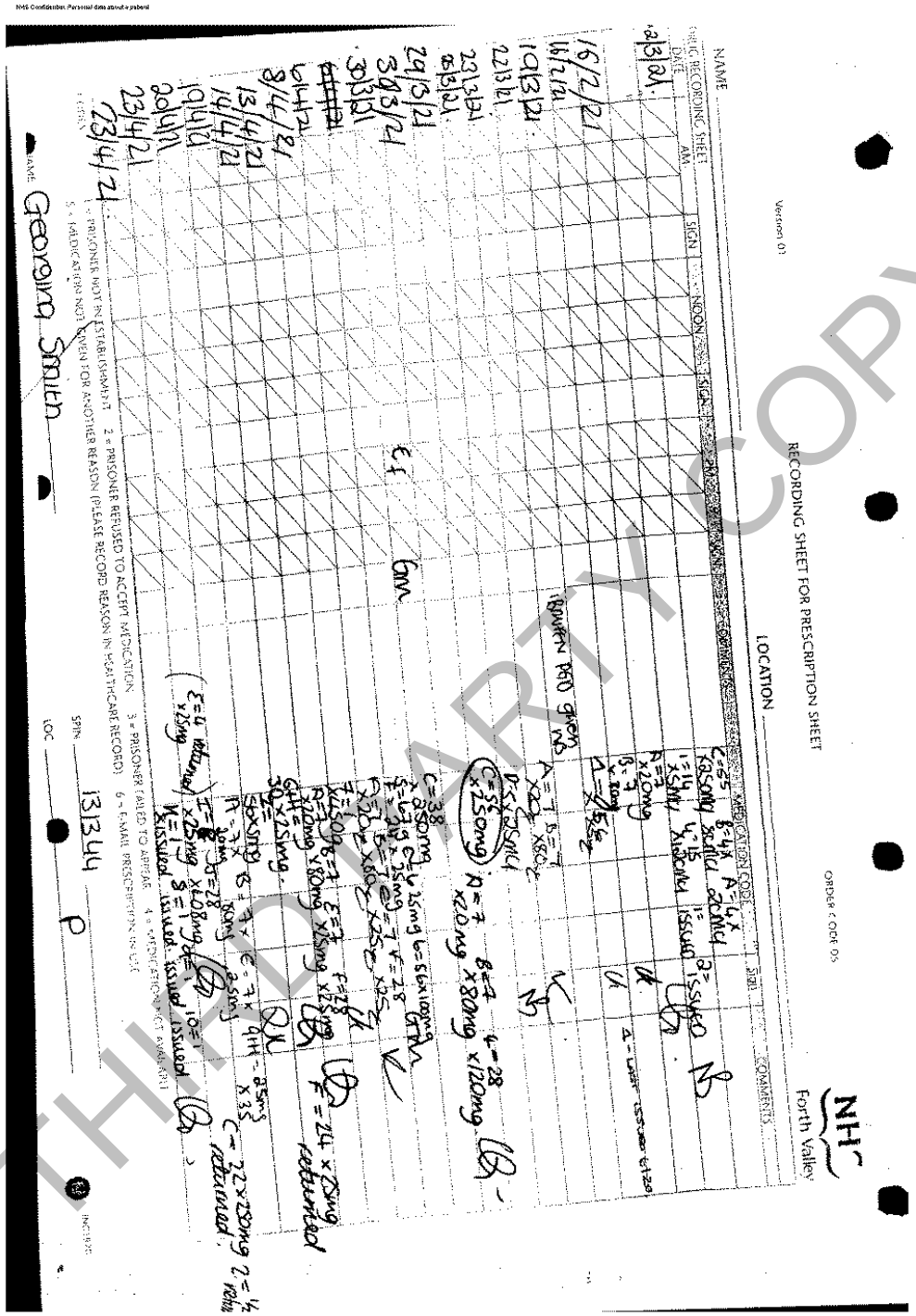

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NAME

LOCATION

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 03

ORDER CODE 05

Forth Valley NHS

DRUG RECORDING SHEET — DATE | AM SIGN | NOON SIGN | PM SIGN | MEDICATION CODE | INITIAL | COMMENTS

NAME Georgina Smith

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE

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SPIN 131344

LOC P

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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

NHS SCOTLAND

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 *	04/12/1991	Address *	65 Newhouse Drive Kilbirnie KA25 6ER
Title *	Miss		
Surname *	Smith		
Forenames *	Georgina		
Previous surname *	Mcmillian	Postcode *	KA25 6ER
		Telephone #	—
Email address #		Mobile #	07871421610

 # 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 *	Ardrossan	Country of birth *	Scotland
Registered district of birth *(Scotland only)*	North Ayrshire	Mother's maiden name	

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 *	HMP Corton Vale	Name and address of previous GP Practice in UK *	Prison healthcare
Postcode *		Postcode *	

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:

Enlistment date *		Service Number	
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 ☐

GMSGPR001 V6 09 2020

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3. VOLUNTARY AUTHORISATION FOR ORGAN OR TISSUE 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.organdonationscotland.org

Any of my organs and tissue ☐

OR, my:

Kidneys ☐ Eyes ☐ Heart ☐ Lungs ☐ Liver ☐ Pancreas ☐ Small bowel ☐ Tissue ☐

Notes on tissue – Heart valves and corneas come under the 'heart' and 'eyes' boxes respectively so the 'tissue' box covers donating other types of tissue, such as your tendons.

Patient signature [signature] Date * [ ]

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 NHSScotland 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 C F Smith Date * 9/7/21

Representative's name (if applicable) [ ]

Relationship to patient (if applicable) [ ]

6. FOR PRACTICE USE

GP reference number [ ] GP name DR STEVENSON

Practice code [ ]

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 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 [ ]

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.

Patient / Patient's representative signature Barbara Mills Date * 9-7-21

7. FOR OFFICIAL USE ONLY

Input by [ ]

Checked by [ ]

Date [ ]

Practice stamp

2

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Kilbirnie
Medical Practice

Kilbirnie Health Centre
2-4, Kirkland Road, Kilbirnie,
North Ayrshire, KA25 6HS
Tel. 01505 683591
Fax. 01505 681512

NEW PATIENT QUESTIONNAIRE

CONTACT DETAILS

Name Georgina Smith Date of Birth 04/12/1991

Address 65 Newhouse Drive, Kilbirnie Postcode KA25 6ER

Please provide the following details. We will only use these contact details if you agree by ticking the box.

Home telephone number ☐ (tick if you agree to contact by this method)

Work telephone number ☐ (tick if you agree to contact by this method)

Mobile telephone number ☑ (tick if you agree to contact by this method)
07871421610

Email address ☐ (tick if you agree to contact by this method)

NEXT OF KIN

Name Ellenor Herd Phone 01236 594 703

Relationship Friend Address 213 Hazel Rd, Cumbernauld, G67 3BP

Additional notes re [redacted]

Emergency contact *(if different from above)*

Name As above Phone

Relationship Address

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POWER OF ATTORNEY/STATE WELFARE GUARDIANSHIP

Do you have a named person who has Power of Attorney/Welfare Guardianship for you? Yes ☐ No ☑

Name_____ Relationship _____

Contact Number_____ Address_____

[redacted] Details

Do you have a [redacted] (please tick the appropriate box) Yes ☐ No ☑

Please give [redacted] details if you are happy for us to contact them on your behalf.

_____

_____

Are you a [redacted] (Please tick the appropriate box. If yes please complete line below) Yes ☐ No ☐

I am a [redacted] for the following people:

Name Address

_____

_____

_____

SUPPORT AT APPOINTMENT

Do you have any learning difficulties? _____

Do you need a translator/interpreter? _____

Do you require a hearing loop? _____

• Support needed to attend apts.

HOUSEHOLD

Do you live alone? Yes.

Who do you live with? (It is helpful for us to know who else is in your household when it comes to change of address, phone number, sudden illness etc)

_____

_____

SOCIAL HISTORY

Are there any vulnerable [redacted] in your household or ones in [redacted] protection? No

Name _____ DOB _____ Relation _____

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MEDICAL HISTORY

Height 5 ft 6 ins Weight 11 st ____ lbs

Do you smoke? Yes Have you ever smoked? ____ Ex smoker? (year stopped) ____

How many cigarettes/cigars per day 10 How many oz per week ____

(If you are a smoker, we would like to remind you it is important to stop – we are happy to offer help and advice in this regard.)

Do you drink alcohol? Not regularly How many units per week? ____

(1 bottle spirits =32 units, 1 can ordinary lager =2.5 units, 1 bottle wine = 10 units, 1 can strong lager or cider = 4 units, 1 litre cider = 8-10 units, 1 bottle tonic wine = 12 units. The maximum safe consumption per week is 14 units for women and 21 units for men)

Have you ever injected drugs? No Are you currently injecting drugs? ____

Do you have any allergies or intolerances, including medication? (If yes please list below)

Allergies: Gluten + Lacto intolerant

• Visacody! 5mg x2 Nightly

What, if any, medication do you take regularly? Please list medicines that you take:

Name of medicine	Dose (e.g. 10 mg)	Frequency
• Paroxetine	20mg	x1 daily
• Propanalol	80mg	x1 daily
• Amitriptaline	50mg	x1 daily
• Lymocycline	408mg	x1 daily
• Copyapine	75mg	x1 Tmg AM
		x1 100mg PM

~~What medicine are you taking that you can get over the counter/herbal?~~

X. Fexofbina 120mg x1 daily.

J. Benoylpanide 2app DD.

Do you have any medical conditions? Please list any illnesses you have had or still have?

Medical condition or operation		Year
• Heart murmur	• Depression	extensive mental health
• Asthma	• Anxiety	issues including
• Gall bladder removed	• Trauma	Suicidal ideation
• Historical eating disorder	• Historic alcohol use.	

Family History: do any diseases or medical conditions run in the family?

Type of illness (e.g. diabetes)	Relationship (e.g. [redacted]
• Breast cancer	Gran, auntie
• Throat + Mouth cancer	Grandfather

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WOMEN ONLY

Women only – number of pregnancies 2 Number of births 2

Name of [redacted] Date of birth

[redacted] have been a [redacted], no longer in my care.

Date of your last smear test Yearly tests needed. Result Due cysts on ovaries + chest

Do you use any of the following methods of contraception? *(please tick)*

IUCD/Coil ☐ When was it fitted? _____

Implanon ☑ When was it fitted? couple of month ago

ETHNICITY & SEXUALITY

What is your sexuality? (Please tick the appropriate box)

Heterosexual ☐ Bisexual ☑ Gay [redacted] ☐ Lesbian/Gay Woman ☐ Transgender ☐ Gender reassignment ☐

Gender Female What is your ethnicity White Scottish

Are you a migrant or refugee? No

OTHER

Employment Status – Are you employed/student/retired/unemployed? (Please delete as applicable)

In the past week, on how many days have you been physically active for a total of 30 minutes or more?

0

Have you been physically active for at least two and a half hours (150 minutes) over the course of the past week?

No

Emergency Care Summary (ECS)*

As part of routine care, an electronic summary of your medical record is normally made available to the out of hour's service which can then be accessed in an emergency.
If you object to this, please tick the box and we will disable your summary ☐

* This is used for emergency care and allows other health professionals to know about important problems. **We strongly recommend that you do not ask to have this disabled.**

If any of these details change while you are registered with us, please try to let us know.

We hope you find the services we offer to your satisfaction.
Kilbirnie Medical Practice

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NHS Confidential: Personal data about a patient

APPLICATION TO REGISTER PERMANENTLY WITH A GENERAL MEDICAL PRACTICE

ALL FIELDS MARKED * ARE MANDATORY AND MUST BE COMPLETED AS FULLY AS POSSIBLE

NHS SCOTLAND

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 *	04/12/1991	Address *	65 Newhouse Drive Kilbirnie KA25 6ER
Title *	Miss		
Surname *	Smith		
Forenames *	Georgina		
Previous surname *	Mcmillian	Postcode *	KA25 6ER
		Telephone #	—
Email address #		Mobile #	07871421610

 # 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 *	Ardrossan	Country of birth *	Scotland
Registered district of birth *(Scotland only)*	North Ayrshire	Mother's maiden name	

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 *	HMP Corton Vale	Name and address of previous GP Practice in UK *	Prison healthcare
Postcode *		Postcode *	

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:

Enlistment date *		Service Number	
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 ☐

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3. VOLUNTARY AUTHORISATION FOR ORGAN OR TISSUE 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.organdonationscotland.org

Any of my organs and tissue ☐

OR, my:

Kidneys ☐ Eyes ☐ Heart ☐ Lungs ☐ Liver ☐ Pancreas ☐ Small bowel ☐ Tissue ☐

Notes on tissue – Heart valves and corneas come under the 'heart' and 'eyes' boxes respectively so the 'tissue' box covers donating other types of tissue, such as your tendons.

Patient signature [signature] Date * [illegible]

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 NHSScotland 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 [signature] Date * 9/7/21

Representative's name (if applicable)

Relationship to patient (if applicable)

6. FOR PRACTICE USE

GP reference number

GP name DR STEVENSON

Practice code

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 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

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.

Patient / Patient's representative signature [signature] Date * 9-7-21

7. FOR OFFICIAL USE ONLY

Input by

Checked by

Date

Practice stamp

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Kilbirnie
Medical Practice

Kilbirnie Health Centre
2-4, Kirkland Road, Kilbirnie,
North Ayrshire, KA25 6HS
Tel. 01505 683591
Fax. 01505 681512

NEW PATIENT QUESTIONNAIRE

CONTACT DETAILS

Name Georgina Smith Date of Birth 04/12/1991

Address 65 Newhouse Drive, Kilbirnie Postcode KA25 6ER

Please provide the following details. We will only use these contact details if you agree by ticking the box.

Home telephone number ☐ (tick if you agree to contact by this method)

Work telephone number ☐ (tick if you agree to contact by this method)

Mobile telephone number ☑ (tick if you agree to contact by this method)
07871421610

Email address ☐ (tick if you agree to contact by this method)

NEXT OF KIN

Name Eleanor Herd Phone 01236 594 703

Relationship Friend Address 213 Hazel Rd, Cumbernauld, G67 3BP

Additional notes re [redacted]

Emergency contact *(if different from above)*

Name As above Phone

Relationship Address

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POWER OF ATTORNEY/STATE WELFARE GUARDIANSHIP

Do you have a named person who has Power of Attorney/Welfare Guardianship for you? Yes ☐ No ☑

Name_____ Relationship _____

Contact Number_____ Address_____

[redacted] Details

Do you have a [redacted] (please tick the appropriate box) Yes ☐ No ☑

Please give [redacted] details if you are happy for us to contact them on your behalf.

_____

_____

Are you a [redacted] (Please tick the appropriate box. If yes please complete line below) Yes ☐ No ☐

I am a [redacted] for the following people:

Name Address

_____

_____

_____

SUPPORT AT APPOINTMENT

Do you have any learning difficulties? _____

Do you need a translator/interpreter? _____

Do you require a hearing loop? _____

• Support needed to attend apts.

HOUSEHOLD

Do you live alone? Yes.

Who do you live with? (It is helpful for us to know who else is in your household when it comes to change of address, phone number, sudden illness etc)

_____

_____

SOCIAL HISTORY

Are there any vulnerable [redacted] in your household or ones in [redacted] protection? No

Name _____ DOB _____ Relation _____

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MEDICAL HISTORY

Height 5 ft 6 ins Weight 11 st ____ lbs

Do you smoke? Yes Have you ever smoked? ____ Ex smoker? (year stopped) ____

How many cigarettes/cigars per day 10 How many oz per week ____

(If you are a smoker, we would like to remind you it is important to stop – we are happy to offer help and advice in this regard.)

Do you drink alcohol? Not regularly How many units per week? ____

(1 bottle spirits =32 units, 1 can ordinary lager =2.5 units, 1 bottle wine = 10 units, 1 can strong lager or cider = 4 units, 1 litre cider = 8-10 units, 1 bottle tonic wine = 12 units. The maximum safe consumption per week is 14 units for women and 21 units for men)

Have you ever injected drugs? No Are you currently injecting drugs? ____

Do you have any allergies or intolerances, including medication? (If yes please list below)

Allergies: Gluten + Lacto intolerant

• Visacodyl 5mg x2 Nightly

What, if any, medication do you take regularly? Please list medicines that you take:

Name of medicine	Dose (e.g. 10 mg)	Frequency
• Paroxetine	20mg	x1 daily
• Propanalol	80mg	x1 daily
• Amitriptaline	50mg	x1 daily
• Lymocycline	408mg	x1 daily
• Copyapine	75mg	x1 Tmg AM
		x1 100mg PM

~~What medicine are you taking that you can get over the counter/herbal?~~

X. Fexofbina 120mg x1 daily.

J. Benoylpanide 2app DD.

Do you have any medical conditions? Please list any illnesses you have had or still have?

Medical condition or operation		Year
• Heart murmur	• Depression }	extensive mental health
• Asthma	• Anxiety }	issues including
• Gall bladder removed	• Trauma }	Suicidal ideation
• Historical eating disorder	• Historic alcohol use.	

Family History: do any diseases or medical conditions run in the family?

Type of illness (e.g. diabetes)	Relationship (e.g. [redacted]
• Breast cancer	Gran, auntie
• Throat + Mouth cancer	Grandfather

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WOMEN ONLY

Women only – number of pregnancies 2 Number of births 2

Name of [redacted] Date of birth

[redacted] have been a [redacted], no longer in my care.

Date of your last smear test Yearly tests needed. Result Due cysts on ovaries + chest

Do you use any of the following methods of contraception? *(please tick)*

IUCD/Coil ☐ When was it fitted? _____

Implanon ☑ When was it fitted? couple of month ago

ETHNICITY & SEXUALITY

What is your sexuality? (Please tick the appropriate box)

Heterosexual ☐ Bisexual ☑ Gay [redacted] ☐ Lesbian/Gay Woman ☐ Transgender ☐ Gender reassignment ☐

Gender Female What is your ethnicity White Scottish

Are you a migrant or refugee? No

OTHER

Employment Status – Are you employed/student/retired/unemployed? (Please delete as applicable)

In the past week, on how many days have you been physically active for a total of 30 minutes or more?

0

Have you been physically active for at least two and a half hours (150 minutes) over the course of the past week?

No

Emergency Care Summary (ECS)*

As part of routine care, an electronic summary of your medical record is normally made available to the out of hour's service which can then be accessed in an emergency.
If you object to this, please tick the box and we will disable your summary ☐

* This is used for emergency care and allows other health professionals to know about important problems. **We strongly recommend that you do not ask to have this disabled.**

If any of these details change while you are registered with us, please try to let us know.

We hope you find the services we offer to your satisfaction.
Kilbirnie Medical Practice

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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

NHS SCOTLAND

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 *	04/12/1991	Address *	65 Newhouse Drive Kilbirnie KA25 6ER
Title *	Miss		
Surname *	Smith		
Forenames *	Georgina		
Previous surname *	Mcmillian	Postcode *	KA25 6ER
		Telephone #	—
Email address #		Mobile #	07871421610

 # 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 *	Ardrossan	Country of birth *	Scotland
Registered district of birth *(Scotland only)*	North Ayrshire	Mother's maiden name	

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 *	HMP Corton Vale	Name and address of previous GP Practice in UK *	Prison healthcare
Postcode *		Postcode *	

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:

Enlistment date *		Service Number	
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 ☐

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3. VOLUNTARY AUTHORISATION FOR ORGAN OR TISSUE 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.organdonationscotland.org

Any of my organs and tissue ☐

OR, my:

Kidneys ☐ Eyes ☐ Heart ☐ Lungs ☐ Liver ☐ Pancreas ☐ Small bowel ☐ Tissue ☐

Notes on tissue – Heart valves and corneas come under the 'heart' and 'eyes' boxes respectively so the 'tissue' box covers donating other types of tissue, such as your tendons.

Patient signature [signature] Date * [ ]

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 NHSScotland 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.

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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 [signature] Date * 9/7/21

Representative's name (if applicable) [ ]

Relationship to patient (if applicable) [ ]

6. FOR PRACTICE USE

GP reference number [ ] GP name DR STEVENSON

Practice code [ ]

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 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 [ ]

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.

Patient / Patient's representative signature [signature] Date * 9-7-21

7. FOR OFFICIAL USE ONLY

Input by [ ]

Checked by [ ]

Date [ ]

Practice stamp [ ]

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Kilbirnie
Medical Practice

Kilbirnie Health Centre
2-4, Kirkland Road, Kilbirnie,
North Ayrshire, KA25 6HS
Tel. 01505 683591
Fax. 01505 681512

NEW PATIENT QUESTIONNAIRE

CONTACT DETAILS

Name Georgina Smith Date of Birth 04/12/1991

Address 65 Newhouse Drive, Kilbirnie Postcode KA25 6ER

Please provide the following details. We will only use these contact details if you agree by ticking the box.

Home telephone number ☐ (tick if you agree to contact by this method)

Work telephone number ☐ (tick if you agree to contact by this method)

Mobile telephone number ☑ (tick if you agree to contact by this method)
07871421610

Email address ☐ (tick if you agree to contact by this method)

NEXT OF KIN

Name Ellenor Herd Phone 01236 594 703

Relationship Friend Address 213 Hazel Rd, Cumbernauld, G67 3BP

Additional notes re [redacted]

Emergency contact *(if different from above)*

Name As above Phone

Relationship Address

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POWER OF ATTORNEY/STATE WELFARE GUARDIANSHIP

Do you have a named person who has Power of Attorney/Welfare Guardianship for you? Yes ☐ No ☑

Name_____ Relationship _____

Contact Number_____ Address_____

[redacted] Details

Do you have a [redacted] (please tick the appropriate box) Yes ☐ No ☑

Please give [redacted] details if you are happy for us to contact them on your behalf.

_____

_____

Are you a [redacted] (Please tick the appropriate box. If yes please complete line below) Yes ☐ No ☐

I am a [redacted] for the following people:

Name Address

_____

_____

_____

SUPPORT AT APPOINTMENT

Do you have any learning difficulties? _____

Do you need a translator/interpreter? _____

Do you require a hearing loop? _____

• Support needed to attend apts.

HOUSEHOLD

Do you live alone? Yes.

Who do you live with? (It is helpful for us to know who else is in your household when it comes to change of address, phone number, sudden illness etc)

_____

_____

SOCIAL HISTORY

Are there any vulnerable [redacted] in your household or ones in [redacted] protection? No

Name _____ DOB _____ Relation _____

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NHS Confidential: Personal data about a patient

MEDICAL HISTORY

Height 5 ft 6 ins Weight 11 st ____ lbs

Do you smoke? Yes Have you ever smoked? ____ Ex smoker? (year stopped) ____

How many cigarettes/cigars per day 10 How many oz per week ____

(If you are a smoker, we would like to remind you it is important to stop – we are happy to offer help and advice in this regard.)

Do you drink alcohol? Not regularly How many units per week? ____

(1 bottle spirits =32 units, 1 can ordinary lager =2.5 units, 1 bottle wine = 10 units, 1 can strong lager or cider = 4 units, 1 litre cider = 8-10 units, 1 bottle tonic wine = 12 units. The maximum safe consumption per week is 14 units for women and 21 units for men)

Have you ever injected drugs? No Are you currently injecting drugs? ____

Do you have any allergies or intolerances, including medication? (If yes please list below)

Allergies: Gluten + Lacto intolerant

• Visacody! 5mg x2 Nightly

What, if any, medication do you take regularly? Please list medicines that you take:

Name of medicine	Dose (e.g. 10 mg)	Frequency
• Paroxetine	20mg	x1 daily
• Propanalol	80mg	x1 daily
• Amitriptaline	50mg	x1 daily
• Lymocycline	408mg	x1 daily
• Copyapine	75mg	x1 Tmg AM
		x1 100mg PM

~~What medicine are you taking that you can get over the counter/herbal?~~

X. Fexofbina 120mg x1 daily.

J. Benoylpanide 2app DD.

Do you have any medical conditions? Please list any illnesses you have had or still have?

Medical condition or operation		Year
• Heart murmur	• Depression }	extensive mental health
• Asthma	• Anxiety }	issues. Including
• Gall bladder removed	• Trauma }	Suicidal ideation
• Historical eating disorder	• Historic alcohol use.	

Family History: do any diseases or medical conditions run in the family?

Type of illness (e.g. diabetes)	Relationship (e.g. [redacted])
• Breast cancer	Gran, auntie
• Throat + Mouth cancer	Grandfather

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WOMEN ONLY

Women only – number of pregnancies 2 Number of births 2

Name of [redacted] Date of birth

[redacted] have been a [redacted], no longer in my care.

Date of your last smear test Yearly tests needed. Result Due cysts on ovaries + chest

Do you use any of the following methods of contraception? *(please tick)*

IUCD/Coil ☐ When was it fitted? _____

Implanon ☑ When was it fitted? couple of month ago

ETHNICITY & SEXUALITY

What is your sexuality? (Please tick the appropriate box)

Heterosexual ☐ Bisexual ☑ Gay [redacted] ☐ Lesbian/Gay Woman ☐ Transgender ☐ Gender reassignment ☐

Gender Female What is your ethnicity White Scottish

Are you a migrant or refugee? No

OTHER

Employment Status – Are you employed/student/retired/unemployed? (Please delete as applicable)

In the past week, on how many days have you been physically active for a total of 30 minutes or more?

0

Have you been physically active for at least two and a half hours (150 minutes) over the course of the past week?

No

Emergency Care Summary (ECS)*

As part of routine care, an electronic summary of your medical record is normally made available to the out of hour's service which can then be accessed in an emergency.
If you object to this, please tick the box and we will disable your summary ☐

* This is used for emergency care and allows other health professionals to know about important problems. **We strongly recommend that you do not ask to have this disabled.**

If any of these details change while you are registered with us, please try to let us know.

We hope you find the services we offer to your satisfaction.
Kilbirnie Medical Practice

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NHS Ayrshire & [redacted] **Area Laboratory Clinical Biochemistry**

SMITH,GEORGINA
65 NEWHOUSE DRIVE
KILBIRNIE

KA25 6ER

CHI No. 0412913127
Unit No.
DOB 04/12/1991
Sex F

Clinician: Dr D A Ferry
Request Location: GP, Kilbirnie Health Centre

This report to :- Dr D A Ferry , GP, Kilbirnie Health Centre

	Result	Units	Normal Range
Urea	2.8	mmol/L	2.5 - 7.8
Creatinine	56	µmol/L	50 - 100
Sodium	138	mmol/L	133 - 146
Potassium	3.9	mmol/L	3.5 - 5.3
Chloride	103	mmol/L	95 - 108
eGFR result/1.73m2	>60	mL/min	>60
Bilirubin	4	µmol/L	3.0 - 21
ALP	111	U/L	30 - 130
AST	19	U/L	10.0 - 45
ALT	16	U/L	5.0- 55
Calcium	2.38	mmol/L	2.2 - 2.6
Adjusted Calcium	2.26	mmol/L	2.2-2.6
Phosphate	1.07	mmol/L	0.8 - 1.5
Total Protein	76	g/L	60 - 80
Albumin	46	g/L	35- 50
Globulin	30	g/L	21 - 35
CRP	<5	mg/L	2.0 - 10

Lab No. 21B352229 Date Collected 19/08/21 Authorised By BHI W7AUQPRO Service Account

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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

NHS SCOTLAND

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 *	04/12/1991	Address *	65 Newhouse Drive Kilbirnie KA25 6ER
Title *	Miss		
Surname *	Smith		
Forenames *	Georgina		
Previous surname *	Mcmillian	Postcode *	KA25 6ER
		Telephone #	
Email address #		Mobile #	07871421610

 # 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 *	Ardrossan	Country of birth *	Scotland
Registered district of birth *(Scotland only)*	North Ayrshire	Mother's maiden name	

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 *	HMP Corton Vale	Name and address of previous GP Practice in UK *	Prison healthcare
Postcode *		Postcode *	

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:

Enlistment date *		Service Number	
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 ☐

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3. VOLUNTARY AUTHORISATION FOR ORGAN OR TISSUE 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.organdonationscotland.org

Any of my organs and tissue ☐

OR, my:

Kidneys ☐ Eyes ☐ Heart ☐ Lungs ☐ Liver ☐ Pancreas ☐ Small bowel ☐ Tissue ☐

Notes on tissue – Heart valves and corneas come under the 'heart' and 'eyes' boxes respectively so the 'tissue' box covers donating other types of tissue, such as your tendons.

Patient signature [signature] Date * [ ]

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 NHSScotland 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 C F Smith Date * 9/7/21

Representative's name (if applicable) [ ]

Relationship to patient (if applicable) [ ]

6. FOR PRACTICE USE

GP reference number [ ] GP name DR STEVENSON

Practice code [ ]

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 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 [ ]

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.

Patient / Patient's representative signature Barbara Mills Date * 9-7-21

7. FOR OFFICIAL USE ONLY

Input by [ ]

Checked by [ ]

Date [ ]

Practice stamp [ ]

2

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Kilbirnie
Medical Practice

Kilbirnie Health Centre
2-4, Kirkland Road, Kilbirnie,
North Ayrshire, KA25 6HS
Tel. 01505 683591
Fax. 01505 681512

NEW PATIENT QUESTIONNAIRE

CONTACT DETAILS

Name Georgina Smith Date of Birth 04/12/1991

Address 65 Newhouse Drive, Kilbirnie Postcode KA25 6ER

Please provide the following details. We will only use these contact details if you agree by ticking the box.

Home telephone number ☐ (tick if you agree to contact by this method)

Work telephone number ☐ (tick if you agree to contact by this method)

Mobile telephone number ☑ (tick if you agree to contact by this method)
07871421610

Email address ☐ (tick if you agree to contact by this method)

NEXT OF KIN

Name Ellenor Herd Phone 01236 594 703

Relationship Friend Address 213 Hazel Rd, Cumbernauld, G67 3BP

Additional notes re [redacted]

Emergency contact *(if different from above)*

Name As above Phone

Relationship Address

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POWER OF ATTORNEY/STATE WELFARE GUARDIANSHIP

Do you have a named person who has Power of Attorney/Welfare Guardianship for you? Yes ☐ No ☑

Name_____ Relationship _____

Contact Number_____ Address_____

[redacted] Details

Do you have a [redacted] (please tick the appropriate box) Yes ☐ No ☑

Please give [redacted] details if you are happy for us to contact them on your behalf.

_____

_____

Are you a [redacted] (Please tick the appropriate box. If yes please complete line below) Yes ☐ No ☐

I am a [redacted] for the following people:

Name Address

_____

_____

_____

SUPPORT AT APPOINTMENT

Do you have any learning difficulties? _____

Do you need a translator/interpreter? _____

Do you require a hearing loop? _____

• Support needed to attend apts.

HOUSEHOLD

Do you live alone? Yes.

Who do you live with? (It is helpful for us to know who else is in your household when it comes to change of address, phone number, sudden illness etc)

_____

_____

SOCIAL HISTORY

Are there any vulnerable [redacted] in your household or ones in [redacted] protection? No

Name _____ DOB _____ Relation _____

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MEDICAL HISTORY

Height 5 ft 6 ins Weight 11 st ____ lbs

Do you smoke? Yes Have you ever smoked? ____ Ex smoker? (year stopped) ____

How many cigarettes/cigars per day 10 How many oz per week ____

(If you are a smoker, we would like to remind you it is important to stop – we are happy to offer help and advice in this regard.)

Do you drink alcohol? Not regularly How many units per week? ____

(1 bottle spirits =32 units, 1 can ordinary lager =2.5 units, 1 bottle wine = 10 units, 1 can strong lager or cider = 4 units, 1 litre cider = 8-10 units, 1 bottle tonic wine = 12 units. The maximum safe consumption per week is 14 units for women and 21 units for men)

Have you ever injected drugs? No Are you currently injecting drugs? ____

Do you have any allergies or intolerances, including medication? (If yes please list below)

Allergies: Gluten + Lacto intolerant

• Visacody! 5mg x2 Nightly

What, if any, medication do you take regularly? Please list medicines that you take:

Name of medicine	Dose (e.g. 10 mg)	Frequency
• Paroxetine	20mg	x1 daily
• Propanalol	80mg	x1 daily
• Amitriptaline	50mg	x1 daily
• Lymocycline	408mg	x1 daily
• Copyapine	75mg	x1 Tmg AM
		x1 100mg PM

~~What medicine are you taking that you can get over the counter/herbal?~~

X. Fexofbina 120mg x1 daily.

J. Benoylpanide 2app DD.

Do you have any medical conditions? Please list any illnesses you have had or still have?

Medical condition or operation		Year
• Heart murmur	• Depression	extensive mental health
• Asthma	• Anxiety	issues including
• Gall bladder removed	• Trauma	Suicidal ideation
• Historical eating disorder	• Historic alcohol use.	

Family History: do any diseases or medical conditions run in the family?

Type of illness (e.g. diabetes)	Relationship (e.g. [redacted]
• Breast cancer	Gran, auntie
• Throat + Mouth cancer	Grandfather

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WOMEN ONLY

Women only – number of pregnancies 2 Number of births 2

Name of [redacted] Date of birth

[redacted] have been a [redacted], no longer in my care.

Date of your last smear test Yearly tests needed. Result Due cysts on ovaries + chest

Do you use any of the following methods of contraception? *(please tick)*

IUCD/Coil ☐ When was it fitted? _____

Implanon ☑ When was it fitted? couple of month ago

ETHNICITY & SEXUALITY

What is your sexuality? (Please tick the appropriate box)

Heterosexual ☐ Bisexual ☑ Gay [redacted] ☐ Lesbian/Gay Woman ☐ Transgender ☐ Gender reassignment ☐

Gender Female What is your ethnicity White Scottish

Are you a migrant or refugee? No

OTHER

Employment Status – Are you employed/student/retired/unemployed? (Please delete as applicable)

In the past week, on how many days have you been physically active for a total of 30 minutes or more?

0

Have you been physically active for at least two and a half hours (150 minutes) over the course of the past week?

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Kilbirnie Medical Practice

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NHS Ayrshire & [redacted] **Area Laboratory Clinical Biochemistry**

SMITH,GEORGINA
65 NEWHOUSE DRIVE
KILBIRNIE

KA25 6ER

CHI No. 0412913127
Unit No.
DOB 04/12/1991
Sex F

Clinician: Dr D A Ferry
Request Location: GP, Kilbirnie Health Centre

This report to :-Dr D A Ferry , GP, Kilbirnie Health Centre

	Result	Units	Normal Range
Free T4	15.8	pmol/L	10.0 - 22.0
TSH	1.23	mU/L	0.27 - 4.20

Lab No. 21B352229 Date Collected 19/08/21 Authorised By BHI W7AUQPRO Service Account

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Lab No. 21B352229 Date Collected 19/08/21 Authorised By BHI W7AUQPRO Service Account

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NHS Ayrshire & [redacted] **Area Laboratory Clinical Biochemistry**

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65 NEWHOUSE DRIVE
KILBIRNIE

KA25 6ER

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NHS Ayrshire & [redacted] **Area Laboratory Clinical Biochemistry**

SMITH,GEORGINA
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KILBIRNIE

KA25 6ER

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Globulin	30	g/L	21 - 35
CRP	<5	mg/L	2.0 - 10

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SMITH,GEORGINA
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KILBIRNIE

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NHS Ayrshire & [redacted] **Area Laboratory Clinical Biochemistry**

SMITH,GEORGINA
65 NEWHOUSE DRIVE
KILBIRNIE

KA25 6ER

CHI No. 0412913127
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eGFR result/1.73m2	>60	mL/min	>60
Bilirubin	4	µmol/L	3.0 - 21
ALP	111	U/L	30 - 130
AST	19	U/L	10.0 - 45
ALT	16	U/L	5.0- 55
Calcium	2.38	mmol/L	2.2 - 2.6
Adjusted Calcium	2.26	mmol/L	2.2-2.6
Phosphate	1.07	mmol/L	0.8 - 1.5
Total Protein	76	g/L	60 - 80
Albumin	46	g/L	35- 50
Globulin	30	g/L	21 - 35
CRP	<5	mg/L	2.0 - 10

Lab No. 21B352229 Date Collected 19/08/21 Authorised By BHI W7AUQPRO Service Account

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16.8.21

UC 113

UC Universal Credit

Universal Credit

50027 000207 0003 E 30800 R2

Dr ~~Unknown~~ Stevenson
KILBIRNIE PRACTICE AYRSHIRE &
[redacted] COMMUNITY HEALTH 30800/3 4640
CARE NHS TRUST
HEALTH CLINIC
2 KIRKLAND ROAD
KILBIRNIE
KA25 6HS

Our phone number is: 0141 314 5496

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

If you get in touch with us, tell us this reference number: JM716260A

Date: 11th August 2021

About your patient

Address: 65, Newhouse Drive, Kilbirnie, KA25 6ER

Full Name: Ms Georgina Smith

NINo: JM716260A

Date of birth: 4th December 1991

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.

P3021643/000297/1/2

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

Please reply within 5 working days. A business reply envelope is enclosed for your use.
Thank you for your help.
Yours sincerely,

Mrs [redacted] Boyd

ON BEHALF OF THE DEPARTMENT FOR WORK AND PENSIONS
RESTRICTED - MEDICAL

Version 10/17

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UC113

Client Name:
Ms Georgina Smith

Client NINo: JM716260A
Client Date of Birth: 04.12.1991

Freepost RTZY-JCHS-LZET
Centre for Health and Disability Assessments
Glasgow BSC
Mail Handling Site A
Wolverhampton
WV98 2EQ

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?

16/8/21

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, inc. medication
See emis print		

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UC113

About your patient - continued

NINo: JM716260A

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

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

Walking or moving	
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	

No concerns in ncs

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

[redacted] 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.

recent release from prison - not documented 8/7/21 reason

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

Your Signature

Signature

Name IN CAPITALS Dr STEVENSON

Date 17/8/21

Practice stamp

Dr Laura Stevenson
Kilbirnie Medical Practice
2-4 Kirkland Road
Kilbirnie KA25 6HS
Fax 01505 681512 Tel 01505 683591

ON BEHALF OF THE DEPARTMENT FOR WORK AND PENSIONS
RESTRICTED - MEDICAL

Version 10/17

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Registration Details - Patient No: 19044

Personal details...		Address details...	
Date of birth	04/12/1991	House Name Flat No	
Sex	F	No and Street	65 Newhouse Drive
Surname	Smith	Village	
Previous Surname	McMillan	Town	Kilbirnie
Forenames	Georgina	County	Ayrshire
Calling Name	Georgina	Post Code	KA25 6ER
Title	Miss		
Birth Surname			
Marital Status	Single		
Ethnic Origin	(White) British		

HA/HB Details...		Contact details...	
Trading partner	Ayrshire & Arran	Home Tel No	
Registered GP	Dr [redacted]	Work Tel No	
Usual GP	Dr [redacted]	Mobile Tel No	07871421610
CHI Number	0412913127	E Mail Address	
Residential Inst			
Branch Surgery			
NHS Number			

Practice Information...		Distances	
Dispensing	N	RPP Road Miles	
Hospital Number		Blocked Special	
Records At		Water Miles	
Organ Donor		Footpath Miles	

ECS (GP Summary) Consent		Further Information	
Patient Consent	Implied Consent (default)	Long/Short stay or Dead	
Date of registration	09/07/2021		

Upload Consent		AMS\CMS Details	
SCI-DC Consent	Implied Consent (default)	AMS Consent	Yes
Pharmacy Details			
[redacted] Collected Check	No		
CMS Suitability Status	-1		
CMS Registration Status	1		

Medical Record

Problems

Active Problems		Authorised By	Code
09/07/2021	Released from prison	Mrs Middleton	13H9-2

Past Problems	Authorised By	Code

Drug Allergies	Authorised By	Code
None		

Non Drug Allergies	Authorised By	Code
None		

Health Status

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09/07/2021	
09/07/2021	**Height 167.64 cm**
09/07/2021	**Weight 69.85 Kg**
	Body Mass Index 24.85 kg/m2
09/07/2021	**Smoking Status Moderate smoker - 10-19 cigs/d**
09/07/2021	**Alcohol consumption 0 units/week**

Consultations

16/08/2021	Dr D A Ferry at Kilbirnie Health Centre
History	Tel. Appt during Corona Virus outbreak - restrictions in place and patients only being physically seen and assessed if clinical need to do so outweighs the safety risks) - cold sweat, pain in belly, no apetite from covid jag (mob).Second vaccination for Covid 19 (Phizer) 3 days ago. Co intermittent right LQ abdo pain since last night. No vomiting or diarrhoea. Some reduced apperite. Some cold sweats last night. No pyrexia. No breathlessness . No dizziness. Passing urine , no visible haematuria, no cloudy or smelly urine. Says has previous hx of hypathyroidism. Will make appt for TFT's. LMP 2 weeks ago. No headaches. No cough today. See nurse for blood tests--U+E's, LFT's and TFT's, CRP,bone biochemistry. Will tel me fore sults and sooner if abdo painn recurrs .I do not thinks her symptoms are seondary to her vaccianation. DF
04/08/2021 14:34	Mrs [redacted] Hodkinson at Telephone Consultation
Comment	EMIS attachment reference code Failed contact.doc Failed contact
Additional	Unsuccessful attempt to contact patient by telephone CLW tried to contact Message left letter sent
30/07/2021	Dr Sean McLaughlin at K[redacted]e Health Centre
History	As per discussion with SM - for increase to paroxetine. Counselled appropriately. Know to review if worsening/side effects.
Medication	Paroxetine Hydrochloride Tablets 30 mg *30 tablet ONE TO BE TAKEN DAILY*
30/07/2021	Mrs Shona [redacted] at Kilbirnie Health Centre
History	Depressed [redacted] senting Problem (MHP Consultation) Thoughts of deliberate self harm Fleeting thoughts, no plan Low suicide risk
Comment	Telephone consultation - review appointment as arranged. Georgina reporting things are "just the same really", money matters have been in touch and providing support with benefits. Will accept referral to local health walk via [redacted] and looking forward to this. Social work continuing to refuse Georgina to partake in [redacted] voluntary [redacted] present, she will receive a review in 2 months, states she "hates this" as its done behind her back [redacted] requesting a prescription for pregablin, I again reiterated there are no notes suggesting Georgina was ever prescribed this. Feels requires this for mood, feels paroxetine "not working", describing fleeting thoughts of not wanting to be here, no plan or intent, again stating she can keep herself safe, has phone numbers for breathing space/samaritans. Mental state appears unchanged from previous assessment. Georgina has agreed a slight increase to paroxetine medication, I discussed same with Dr McLaughlin and agreed. Collect from holmhead, aware to contact surgery if experiencing any side effects. Has agreed to contact surgery any worsening of mood. I will assess for need for referral to CMHT with any changes in mood/mental state. No signs of psychotic symtamology during call.
Additional	[X]Generalized anxiety disorder Presenting Problem (MHP Consultation) [V]Other specified reasons for encounter Contributing Factor (MHP Consultation) - Natural adjustments from leaving prison [redacted] enquiry of abuse [redacted] Protection (MHP Consultation) - N/A Sensitive routine enquiry Gender based violence (MHP Consultation) - [redacted] Sensitive routine enquiry completed Adult Support and Protection (MHP Consultation) - N/A Mental health assessment Telephone consultation Low risk of harm to others Agreeing on mental health care plan Increase paroxetine/continue support with [redacted]

Medication

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Current

Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
30/07/2021	**Paroxetine Hydrochloride Tablets 30 mg** ONE TO BE TAKEN DAILY 30 tablet	30/07/2021P	Dr Sean McLaughlin	REPEAT
13/07/2021	**Propranolol Hydrochloride M/R capsules 80 mg** ONE TO BE TAKEN EACH MORNING 28 CAPSULE	13/07/2021P	Dr Sean McLaughlin	REPEAT
13/07/2021	**Amitriptyline Hydrochloride Tablets 25 mg** TWO TO BE TAKEN ONCE AT NIGHT 56 TABLET	13/07/2021P	Dr Sean McLaughlin	REPEAT
13/07/2021	**Lymecycline Capsules 408 mg** ONE TO BE TAKEN EACH DAY 28 CAPSULE	13/07/2021P	Dr [redacted] McLaughlin	REPEAT
13/07/2021	**Quetiapine Fumarate Tablets 25 mg** THREE TABLETS IN MORNING 84 tablet	13/07/2021P	Dr Sean McLaughlin	REPEAT
13/07/2021	**Quetiapine Fumarate Tablets 100 mg** ONE TO BE TAKEN AT NIGHT 30 Tablet(s)	13/07/2021P	Dr [redacted] McLaughlin	REPEAT
13/07/2021	**Benzoyl Peroxide Gel 5 %** APPLY 1-2 TIMES A DAY AFTER WASHING WITH SOAP AND WATER. 30 GRAM	13/07/2021P	Dr [redacted] McLaughlin	REPEAT

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16.8.21

UC 113

Universal Credit

Universal Credit

50027 000207 0003 E 30800 R2

Dr ~~Unknown~~ Stevenson
KILBIRNIE PRACTICE AYRSHIRE &
[redacted] COMMUNITY HEALTH 30800/3 4650
CARE NHS TRUST
HEALTH CLINIC
2 KIRKLAND ROAD
KILBIRNIE
KA25 6HS

Our phone number is: 0141 314 5496

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

If you get in touch with us, tell us this reference number: JM716260A

Date: 11th August 2021

About your patient

Address
65, Newhouse Drive, Kilbirnie, KA25 6ER

Full Name Ms Georgina Smith

NINo JM716260A

Date of birth 4th December 1991

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.

P3021643/000297/1/2

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

Please reply within 5 working days. A business reply envelope is enclosed for your use.
Thank you for your help.
Yours sincerely,

Mrs [redacted] Boyd

ON BEHALF OF THE DEPARTMENT FOR WORK AND PENSIONS
RESTRICTED - MEDICAL

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UC113

Client Name:
Ms Georgina Smith

Client NINo: JM716260A
Client Date of Birth: 04.12.1991

Freepost RTZY-JCHS-LZET
Centre for Health and Disability Assessments
Glasgow BSC
Mail Handling Site A
Wolverhampton
WV98 2EQ

Your reply

Please answer the following questions from the information which is currently available to you.

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1 When did your patient last see a GP?

16/8/21

2 Current conditions affecting ability to work:
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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, inc. medication
See emis print		

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UC113

About your patient - continued

NINo: JM716260A

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

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

Walking or moving	
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	

No concerns in ncs

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

[redacted]

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.

recent release from prison - not documented 8/7/21
reason

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

Your Signature

Signature

Name IN CAPITALS Dr STEVENSON

Date 17/8/21

Practice stamp

Dr Laura Stevenson
Kilbirnie Medical Practice
2-4 Kirkland Road
Kilbirnie KA25 6HS
Fax 01505 681512 Tel 01505 683591

ON BEHALF OF THE DEPARTMENT FOR WORK AND PENSIONS
RESTRICTED - MEDICAL

Version 10/17

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NHS Confidential: Personal data about a patient

Registration Details - Patient No: 19044

Personal details...		Address details...	
Date of birth	04/12/1991	House Name Flat No	
Sex	F	No and Street	65 Newhouse Drive
Surname	Smith	Village	
Previous Surname	McMillan	Town	Kilbirnie
Forenames	Georgina	County	Ayrshire
Calling Name	Georgina	Post Code	KA25 6ER
Title	Miss		
Birth Surname			
Marital Status	Single		
Ethnic Origin	(White) British		

HA/HB Details...		Contact details...	
Trading partner	Ayrshire & Arran	Home Tel No	
Registered GP	Dr [redacted]	Work Tel No	
Usual GP	Dr [redacted]	Mobile Tel No	07871421610
CHI Number	0412913127	E Mail Address	
Residential Inst			
Branch Surgery			
NHS Number			

Practice Information...		Distances	
Dispensing	N	RPP Road Miles	
Hospital Number		Blocked Special	
Records At		Water Miles	
Organ Donor		Footpath Miles	

ECS (GP Summary) Consent		Further Information	
Patient Consent	Implied Consent (default)	Long/Short stay or Dead	
Date of registration	09/07/2021		

Upload Consent		AMS\CMS Details	
SCI-DC Consent	Implied Consent (default)	AMS Consent	Yes
Pharmacy Details			
[redacted] Collected Check	No		
CMS Suitability Status	-1		
CMS Registration Status	1		

Medical Record

Problems

Active Problems		Authorised By	Code
09/07/2021	Released from prison	Mrs Middleton	13H9-2

Past Problems	Authorised By	Code

Drug Allergies	Authorised By	Code
None		

Non Drug Allergies	Authorised By	Code
None		

Health Status

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09/07/2021		
09/07/2021		**Height 167.64 cm**
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		Body Mass Index 24.85 kg/m2
09/07/2021		**Smoking Status Moderate smoker - 10-19 cigs/d**
09/07/2021		**Alcohol consumption 0 units/week**

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History	Tel. Appt during Corona Virus outbreak - restrictions in place and patients only being physically seen and assessed if clinical need to do so outweighs the safety risks) - cold sweat, pain in belly, no apetite from covid jag (mob).Second vaccination for Covid 19 (Phizer) 3 days ago. Co intermittent right LQ abdo pain since last night. No vomiting or diarrhoea. Some reduced apperite. Some cold sweats last night. No pyrexia. No breathlessness . No dizziness. Passing urine , no visible haematuria, no cloudy or smelly urine. Says has previous hx of hypathyroidism. Will make appt for TFT's. LMP 2 weeks ago. No headaches. No cough today. See nurse for blood tests--U+E's, LFT's and TFT's, CRP,bone biochemistry. Will tel me fore sults and sooner if abdo painn recurrs .I do not thinks her symptoms are seondary to her vaccianation. DF
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Comment	EMIS attachment reference code Failed contact.doc Failed contact
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Medication

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Current

Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
30/07/2021	**Paroxetine Hydrochloride Tablets 30 mg** ONE TO BE TAKEN DAILY 30 tablet	30/07/2021P	Dr Sean McLaughlin	REPEAT
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16.8.21

UC 113

Universal Credit

Universal Credit

50027 000207 0003 E 30800 R2

Dr ~~Unknown~~ Stevenson
KILBIRNIE PRACTICE AYRSHIRE &
[redacted] COMMUNITY HEALTH 30800/3 4650
CARE NHS TRUST
HEALTH CLINIC
2 KIRKLAND ROAD
KILBIRNIE
KA25 6HS

Our phone number is: 0141 314 5496

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

If you get in touch with us, tell us this reference number: JM716260A

Date: 11th August 2021

About your patient

Address
65, Newhouse Drive, Kilbirnie, KA25 6ER

Full Name Ms Georgina Smith

NINo JM716260A

Date of birth 4th December 1991

Dear Doctor,

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P3021643/000297/1/2

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Thank you for your help.
Yours sincerely,

Mrs [redacted] Boyd

ON BEHALF OF THE DEPARTMENT FOR WORK AND PENSIONS
RESTRICTED - MEDICAL

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UC113

Client Name:
Ms Georgina Smith

Client NINo: JM716260A
Client Date of Birth: 04.12.1991

Freepost RTZY-JCHS-LZET
Centre for Health and Disability Assessments
Glasgow BSC
Mail Handling Site A
Wolverhampton
WV98 2EQ

Your reply

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If you need more space for any of your answers, please continue at Part 7.

1 When did your patient last see a GP?

16/8/21

2 Current conditions affecting ability to work:
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- 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, inc. medication
See emis print		

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RESTRICTED - MEDICAL

Version 10/17

NHS Confidential: Personal data about a patient

UC113

About your patient - continued

NINo: JM716260A

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

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

Walking or moving	
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	

No concerns in ncs

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

[redacted] 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.

recent release from prison - not documented reason 8/7/21

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

Your Signature

Signature

Name IN CAPITALS Dr STEVENSON

Date 17/8/21

Practice stamp

Dr Laura Stevenson
Kilbirnie Medical Practice
2-4 Kirkland Road
Kilbirnie KA25 6HS
Fax 01505 681512 Tel 01505 683591

ON BEHALF OF THE DEPARTMENT FOR WORK AND PENSIONS
RESTRICTED - MEDICAL

Version 10/17

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NHS Confidential: Personal data about a patient

Registration Details - Patient No: 19044

Personal details...		Address details...	
Date of birth	04/12/1991	House Name Flat No	
Sex	F	No and Street	65 Newhouse Drive
Surname	Smith	Village	
Previous Surname	McMillan	Town	Kilbirnie
Forenames	Georgina	County	Ayrshire
Calling Name	Georgina	Post Code	KA25 6ER
Title	Miss		
Birth Surname			
Marital Status	Single		
Ethnic Origin	(White) British		

HA/HB Details...		Contact details...	
Trading partner	Ayrshire & Arran	Home Tel No	
Registered GP	Dr [redacted]	Work Tel No	
Usual GP	Dr [redacted]	Mobile Tel No	07871421610
CHI Number	0412913127	E Mail Address	
Residential Inst			
Branch Surgery			
NHS Number			

Practice Information...		Distances	
Dispensing	N	RPP Road Miles	
Hospital Number		Blocked Special	
Records At		Water Miles	
Organ Donor		Footpath Miles	

ECS (GP Summary) Consent		Further Information	
Patient Consent	Implied Consent (default)	Long/Short stay or Dead	
Date of registration	09/07/2021		

Upload Consent		AMS\CMS Details	
SCI-DC Consent	Implied Consent (default)	AMS Consent	Yes
Pharmacy Details			
[redacted] Collected Check	No		
CMS Suitability Status	-1		
CMS Registration Status	1		

Medical Record

Problems

Active Problems		Authorised By	Code
09/07/2021	Released from prison	Mrs Middleton	13H9-2

Past Problems	Authorised By	Code

Drug Allergies	Authorised By	Code
None		

Non Drug Allergies	Authorised By	Code
None		

Health Status

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NHS Confidential: Personal data about a patient

09/07/2021	
09/07/2021	**Height 167.64 cm**
09/07/2021	**Weight 69.85 Kg**
09/07/2021	**Body Mass Index 24.85 kg/m2**
09/07/2021	**Smoking Status Moderate smoker - 10-19 cigs/d**
09/07/2021	**Alcohol consumption 0 units/week**

Consultations

16/08/2021	Dr D A Ferry at Kilbirnie Health Centre
History	Tel. Appt during Corona Virus outbreak - restrictions in place and patients only being physically seen and assessed if clinical need to do so outweighs the safety risks) - cold sweat, pain in belly, no apetite from covid jag (mob).Second vaccination for Covid 19 (Phizer) 3 days ago. Co intermittent right LQ abdo pain since last night. No vomiting or diarrhoea. Some reduced appetite. Some cold sweats last night. No pyrexia. No breathlessness . No dizziness. Passing urine , no visible haematuria, no cloudy or smelly urine. Says has previous hx of hypathyroidism. Will make appt for TFT's. LMP 2 weeks ago. No headaches. No cough today. See nurse for blood tests--U+E's, LFT's and TFT's, CRP,bone biochemistry. Will tel me fore sults and sooner if abdo painn recurrs .I do not thinks her symptoms are seondary to her vaccianation. DF
04/08/2021 14:34	Mrs [redacted] Hodkinson at Telephone Consultation
Comment	EMIS attachment reference code Failed contact.doc Failed contact
Additional	Unsuccessful attempt to contact patient by telephone CLW tried to contact Message left letter sent
30/07/2021	Dr Sean McLaughlin at K[redacted]e Health Centre
History	As per discussion with SM - for increase to paroxetine. Counselled appropriately. Know to review if worsening/side effects.
Medication	Paroxetine Hydrochloride Tablets 30 mg *30 tablet ONE TO BE TAKEN DAILY*
30/07/2021	Mrs Shona [redacted] at Kilbirnie Health Centre
History	Depressed [redacted] senting Problem (MHP Consultation) Thoughts of deliberate self harm Fleeting thoughts, no plan Low suicide risk
Comment	Telephone consultation - review appointment as arranged. Georgina reporting things are "just the same really", money matters have been in touch and providing support with benefits. Will accept referral to local health walk via [redacted] and looking forward to this. Social work continuing to refuse Georgina to partake in [redacted] voluntary [redacted] present, she will receive a review in 2 months, states she "hates this" as its done behind her back [redacted] requesting a prescription for pregablin, I again reiterated there are no notes suggesting Georgina was ever prescribed this. Feels requires this for mood, feels paroxetine "not working", describing fleeting thoughts of not wanting to be here, no plan or intent, again stating she can keep herself safe, has phone numbers for breathing space/samaritans. Mental state appears unchanged from previous assessment. Georgina has agreed a slight increase to paroxetine medication, I discussed same with Dr McLaughlin and agreed. Collect from holmhead, aware to contact surgery if experiencing any side effects. Has agreed to contact surgery any worsening of mood. I will assess for need for referral to CMHT with any changes in mood/mental state. No signs of psychotic symtamology during call.
Additional	[X]Generalized anxiety disorder Presenting Problem (MHP Consultation) [V]Other specified reasons for encounter Contributing Factor (MHP Consultation) - Natural adjustments from leaving prison [redacted] enquiry of abuse [redacted] Protection (MHP Consultation) - N/A Sensitive routine enquiry Gender based violence (MHP Consultation) - [redacted] Sensitive routine enquiry completed Adult Support and Protection (MHP Consultation) - N/A Mental health assessment Telephone consultation Low risk of harm to others Agreeing on mental health care plan Increase paroxetine/continue support with [redacted]

Medication

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NHS Confidential: Personal data about a patient

Current

Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
30/07/2021	**Paroxetine Hydrochloride Tablets 30 mg** ONE TO BE TAKEN DAILY 30 tablet	30/07/2021P	Dr Sean McLaughlin	REPEAT
13/07/2021	**Propranolol Hydrochloride M/R capsules 80 mg** ONE TO BE TAKEN EACH MORNING 28 CAPSULE	13/07/2021P	Dr Sean McLaughlin	REPEAT
13/07/2021	**Amitriptyline Hydrochloride Tablets 25 mg** TWO TO BE TAKEN ONCE AT NIGHT 56 TABLET	13/07/2021P	Dr Sean McLaughlin	REPEAT
13/07/2021	**Lymecycline Capsules 408 mg** ONE TO BE TAKEN EACH DAY 28 CAPSULE	13/07/2021P	Dr [redacted] McLaughlin	REPEAT
13/07/2021	**Quetiapine Fumarate Tablets 25 mg** THREE TABLETS IN MORNING 84 tablet	13/07/2021P	Dr Sean McLaughlin	REPEAT
13/07/2021	**Quetiapine Fumarate Tablets 100 mg** ONE TO BE TAKEN AT NIGHT 30 Tablet(s)	13/07/2021P	Dr [redacted] McLaughlin	REPEAT
13/07/2021	**Benzoyl Peroxide Gel 5 %** APPLY 1-2 TIMES A DAY AFTER WASHING WITH SOAP AND WATER. 30 GRAM	13/07/2021P	Dr [redacted] McLaughlin	REPEAT

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NHS Confidential: Personal data about a patient

16.8.21

UC 113

Universal Credit

50027 000207 0003 E 30800 R2

Dr ~~Unknown~~ Stevenson
KILBIRNIE PRACTICE AYRSHIRE & [redacted] COMMUNITY HEALTH CARE NHS TRUST
HEALTH CLINIC
2 KIRKLAND ROAD
KILBIRNIE
KA25 6HS

30800/3 4640

Our phone number is: 0141 314 5496

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

If you get in touch with us, tell us this reference number: JM716260A

Date: 11th August 2021

About your patient

Address: 65, Newhouse Drive, Kilbirnie, KA25 6ER

Full Name: Ms Georgina Smith

NINo: JM716260A

Date of birth: 4th December 1991

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.

P3021643/000297/1/2

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

Please reply within 5 working days. A business reply envelope is enclosed for your use.
Thank you for your help.
Yours sincerely,

Mrs [redacted] Boyd

ON BEHALF OF THE DEPARTMENT FOR WORK AND PENSIONS
RESTRICTED - MEDICAL

Version 10/17

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NHS Confidential: Personal data about a patient

UC113

Client Name:
Ms Georgina Smith

Client NINo: JM716260A
Client Date of Birth: 04.12.1991

Freepost RTZY-JCHS-LZET
Centre for Health and Disability Assessments
Glasgow BSC
Mail Handling Site A
Wolverhampton
WV98 2EQ

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?

16/8/21

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, inc. medication
See emis print		

©3021443/0002071/2/3

ON BEHALF OF THE DEPARTMENT FOR WORK AND PENSIONS
RESTRICTED - MEDICAL

Version 10/17

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NHS Confidential: Personal data about a patient

UC113

About your patient - continued

NINo: JM716260A

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

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

Walking or moving	
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	

No concerns in ncs

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

[redacted] 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.

recent release from prison - not documented 8/7/21 reason

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

Your Signature

Signature

Name IN CAPITALS Dr STEVENSON

Date 17/8/21

Practice stamp

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ON BEHALF OF THE DEPARTMENT FOR WORK AND PENSIONS
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NHS Confidential: Personal data about a patient

Registration Details - Patient No: 19044

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Surname	Smith	Village	
Previous Surname	McMillan	Town	Kilbirnie
Forenames	Georgina	County	Ayrshire
Calling Name	Georgina	Post Code	KA25 6ER
Title	Miss		
Birth Surname			
Marital Status	Single		
Ethnic Origin	(White) British		

HA/HB Details...		Contact details...	
Trading partner	Ayrshire & Arran	Home Tel No	
Registered GP	Dr [redacted]	Work Tel No	
Usual GP	Dr [redacted]	Mobile Tel No	07871421610
CHI Number	0412913127	E Mail Address	
Residential Inst			
Branch Surgery			
NHS Number			

Practice Information...		Distances	
Dispensing	N	RPP Road Miles	
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Upload Consent		AMS\CMS Details	
SCI-DC Consent	Implied Consent (default)	AMS Consent	Yes
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[redacted] Collected Check	No		
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CMS Registration Status	1		

Medical Record

Problems

Active Problems		Authorised By	Code
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Past Problems	Authorised By	Code

Drug Allergies	Authorised By	Code
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Health Status

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Medication

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NHS Confidential: Personal data about a patient

Current

Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
30/07/2021	Paroxetine Hydrochloride Tablets 30 mg ONE TO BE TAKEN DAILY 30 tablet	30/07/2021P	Dr Sean McLaughlin	REPEAT
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13/07/2021	Amitriptyline Hydrochloride Tablets 25 mg TWO TO BE TAKEN ONCE AT NIGHT 56 TABLET	13/07/2021P	Dr Sean McLaughlin	REPEAT
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NHS Confidential: Personal data about a patient

Patient Registration

NHS SCOTLAND

While you are in prison your healthcare will be provided by the Health Board for the prison you are in.

Please use BLOCK CAPITALS to complete the form and tick all boxes that apply to you.

Please complete this form as best you can. It will help us to get your medical records quickly.

This form will not go into your community health record.

Is this the first time you have registered with a GP (doctor)? yes ☐ no ☐

1. What is your first name? GEORGINA
middle name(s)

2. What is your surname? SMITH
Title (Mr / Mrs / Miss / other)

3. Are you male ☐ female ☒ (please tick)

4. What is your last or other surname?
What is your date of birth? 0 4 1 2 1 9 9 1

5. Address
THE HEALTH CENTRE, P.O. BOX 21616, STIRLING
Postcode FK7 1DW

6. What is your town of birth,
and country of birth?

7. What is your [redacted] maiden name?

8. What was your last address in the United Kingdom?
65 NEWHOUSE DRIVE, KILBIRNIE, AYRSHIRE
Postcode KA25 6ER

9. If you have a doctor, what is their name and address?
Kilbirnie Medical Centre, Ayrshire
Postcode

10. Do you know your:
Community Health Index(CHI) number 0412913127
NHS number 662/91/440

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NHS Confidential: Personal data about a patient

I understand that:

- my medical record may be transferred from my doctor (or community healthcare provider) to the prison health centre;
- my information may be shared as detailed in the box below.

Your Information

- We need this information to make sure we give you the best level of health care we can.
- We may need to share relevant information with other NHS staff involved in your care. This makes caring for you safer, easier and faster.
- We may need to share information about your health and medication with people outside the NHS, such as other prison staff, community healthcare providers or community health agencies. This will only be done when they need it to be able to give you care and treatment.

I confirm that, as far as I know, the information I have given on this form is correct.

[redacted] & G. Smith Date 25/08/24

PRACTICE ACCEPTANCE AGREEMENT - for GP Practice use only

PRACTICE CODE 31391

GP NAME

GP REFERENCE NUMBER

OFFICIAL USE ONLY		
Input By:	Date:	Checked By:

Patient set up on GP IT System as: (please tick one box only)

TR ☐ PR ☐

If status has changed from TR to PR please tick ☐

Please store this form in the prison "blue file" health record

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Pages:

NHS Confidential: Personal data about a patient

Patient Registration

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middle name(s)

2. What is your surname? SMITH
Title (Mr / Mrs / Miss / other)

3. Are you male ☐ female ☒ (please tick)

4. What is your last or other surname?
What is your date of birth? 0 4 1 2 1 9 9 1

5. Address
THE HEALTH CENTRE, P.O. BOX 21616, STIRLING
Postcode FK7 1DW

6. What is your town of birth,
and country of birth?

7. What is your [redacted] maiden name?

8. What was your last address in the United Kingdom?
65 NEWHOUSE DRIVE, KILBIRNIE, AYRSHIRE
Postcode KA25 6ER

9. If you have a doctor, what is their name and address?
Kilbirnie Medical Centre, Ayrshire
Postcode

10. Do you know your:
Community Health Index(CHI) number 0412913127
NHS number 662/91/440

THIRD PARTY COPY

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PRACTICE CODE 31391

GP NAME

GP REFERENCE NUMBER

OFFICIAL USE ONLY		
Input By:	Date:	Checked By:

Patient set up on GP IT System as: (please tick one box only)

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If status has changed from TR to PR please tick ☐

Please store this form in the prison "blue file" health record

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Pages:

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[redacted]

National Harm Reduction Session

Drug Worker Name: Jemma Beveridge

Date Seen: 26/08/2021

12:08

I understand that my tolerance to alcohol and/or drugs/NPS will be lower upon release and by choosing to use these substances, I may be putting myself at risk [redacted] overdose.

Prisoner	SPIN No.	CON ✔	REM ✔	Prisoner Signature	Hall	Admission Date	Refer to PHAS (Y/N)	Refer to Smoking Cessation (Y/N)	Vol T/Care Referral [redacted]	Vol T/Care form comp. [redacted]	Naloxone (Y/N) *If YES see below*	Vison Updated
Georgina Smith	131344	✓		X.G.Smith	R2/11	25/08/21	N	Y	N	N	N.	✓
TAS Referral	Accepted (Y/N)			Reason Declined	Area of Referral	Postcode						
As Above												

Recall.

National Harm Reduction Session Disclaimer

I do not require to participate in the National Harm Reduction Session offered by the Prison Healthcare Addicitons Service for the following reason:

Prisoner	SPIN No.	CON ✔	REM ✔	Prisoner Signature	Hall	Admission Date	Comments/Reason	Vison Updated

The session available has been fully explained to me and I take full responsibility for my own health and fully understand the potential consequences [redacted] my substance use. I understand that I can access this session later if I decide to do so by self referral.

National Naloxone Training Programme

Prisoner	SPIN No.	DOB	Prisoner Signature	Postcode	Initial Supply?	Nyxoid/Naloxone Injection	Vision Upated

iGPR Report

Scanned Document
18-Jun-2026 SARA
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Extension:.tif
Pages:

[redacted]

National Harm Reduction Session

Drug Worker Name: Jemma Beveridge

Date Seen: 26/08/2021

12:08

I understand that my tolerance to alcohol and/or drugs/NPS will be lower upon release and by choosing to use these substances, I may be putting myself at risk [redacted] overdose.

Prisoner	SPIN No.	CON ✓	REM ✓	Prisoner Signature	Hall	Admission Date	Refer to PHAS (Y/N)	Refer to Smoking Cessation (Y/N)	Voi T/Care Referral [redacted]	Voi T/Care form comp. (Y/N)	Naloxone (Y/N) *If YES see below*	Vison Updated
Georgina Smith	131344	✓		X G Smith	R2/11	25/08/21	N	Y	N	N	N	✓
TAS Referral	Accepted (Y/N)			Reason Declined	Area of Referral	Postcode						
As Above												

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I do not require to participate in the National Harm Reduction Session offered by the Prison Healthcare Addictons Service for the following reason:

Prisoner	SPIN No.	CON ✓	REM ✓	Prisoner Signature	Hall	Admission Date	Comments/Reason	Vison Updated

The session available has been fully explained to me and I take full responsibility for my own health and fully understand the potential consequences [redacted] my substance use. I understand that I can access this session later if I decide to do so by self referral.

National Naloxone Training Programme

Prisoner	SPIN No.	DOB	Prisoner Signature	Postcode	Initial Supply?	Nyxoid/Naloxone Injection	Vision Upated

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STOP SMOKING CLIENT PROFILE

NAME: Georgina Smith SPIN: 131344 EDL: _____

LOCATION: Ross WORK PARTY: _____

GROUP/1-1:	NRT PRESCRIBED:
1-1	1mg Lozenge

	DATE OF BIRTH:	GENDER:	IF FEMALE, [redacted]
	4/12/91	MALE / FEMALE	YES / NO

ETHNIC ORIGIN

WHITE	ANY OTHER ETHNIC GROUP PLEASE SPECIFY:	ANY OTHER INFORMATION:
☑ SCOTTISH ☐ OTHER BRITISH ☐ IRISH ☐ POLISH ☐ GYPSY/TRAVELLER ☐ OTHER WHITE ETHNIC GROUP:	..... ☐ NOT DISCLOSED	FVCV-102100033

TOBACCO USE & QUIT ATTEMPTS

TOBACCO PRODUCT USE:	AVERAGE CIGARETTES SMOKED PER DAY:	TIME TO YOUR FIRST CIGARETTE OF THE DAY:	NUMBER OF QUIT ATTEMPTS IN LAST YEAR:
☑ Cigarettes	☐ 10 or less	☑ Within 5 minutes	☑ No quit attempts
☐ Rolled tobacco	☑ 11-20	☐ 6-30 minutes	☐ Once
☐ .....oz per week cannabis	☐ 21-30	☐ 31-60 minutes	☐ 2 or 3 times
	☐ More than 30	☐ Over 1 hour	☐ 4 or more times

MEDICAL HISTORY:		MEDICATION:	
☐ Asthma	☐ Peptic Ulcer	☐ Theophyline	☐ Olanzapine
☐ Diabetes	☐ Breast feeding	☐ Warfarin	☐ Erlotinib
☐ Stroke	☐ Heart disease (Angina/Heart Attack)	☐ Aminophylline	☐ Ruiociguat
☐ Hypertension		☐ Clozapine	☐ Chlorpromazine
			☐ Methadone

Stop smoking service client consent

NHS Forth Valley would like to thank you for stopping smoking.

By using this service you agree to be contacted in the future (4 weeks, 3 months, 1 year) by our service or a third party acting on behalf of NHS Forth Valley to ask about you smoking status. Your details will be anonymised and kept on a confidential database to see if our stop smoking program is working. Some of your information may be used for research purposes within the NHS.

I have received Nicotine Replacement Therapy, my health history has been taken and the contraindications cautions/drug interactions and possible side effects have been explained and discussed and I am if full agreement to take NRT.

DATA CONFIDENTIALITY AND SECURITY (to be signed by the client)

The information provided by you will be held in a secure environment is accordance with the Data Protection Act 1998. The information use to access the outcome of this project and for research purposes; no details will be passed on to any organisation who are not involved in the outcome assessment.

Signature: X. G. Smith Date: 30/8/21

Please ensure **ALL** areas of form are completed before submitting Dec 2018

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STOP SMOKING CLIENT PROFILE

INTERVENTION DETAILS			
		Refer to GP for Zyban / Varenicline	Yes/No
Initial Visit – Date: 30.8.21	CO – ✓		
Week 1 30.8.21	CO – ✓	Week 7	CO –
Week 2	CO –	Week 8	CO –
Week 3	CO –	Week 9	CO –
Week 4	CO –	Week 10	CO –
Week 5	CO –	Week 11	CO –
Week 6	CO –	Week 12	CO –

Date of Referral:	Quit Date:	Date of Initial Appointment:
30/8/21	30/8/21	30/8/21

Pharmaceutical Products Used in THIS quit attempt

☐ 16 hr patch	☐ Champix
☐ 24 hr patch	☐ Zyban
☑ Lozenges (1mg) 2mg	

NOTES

Please ensure **ALL** areas of form are completed before submitting Dec 2018

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NHS Forth Valley Prisons Nicotine Replacement therapy supply form **Appendix 1**

Prison HMP & YOI CORNTON VALE	**Location** Ross
Patients name Georgina Smith	**DOB** 4·12·91
SPIN 131344	**Quit Date** 3018·21

Product with strength	Quantity	date	Received by/supplied by
1mg lozenge	1 box	3018121	[illegible]
1mg lozenge	1box	7/9/21	G Smith
1mg lozenge	1box	28/9/21	Not required G Smith

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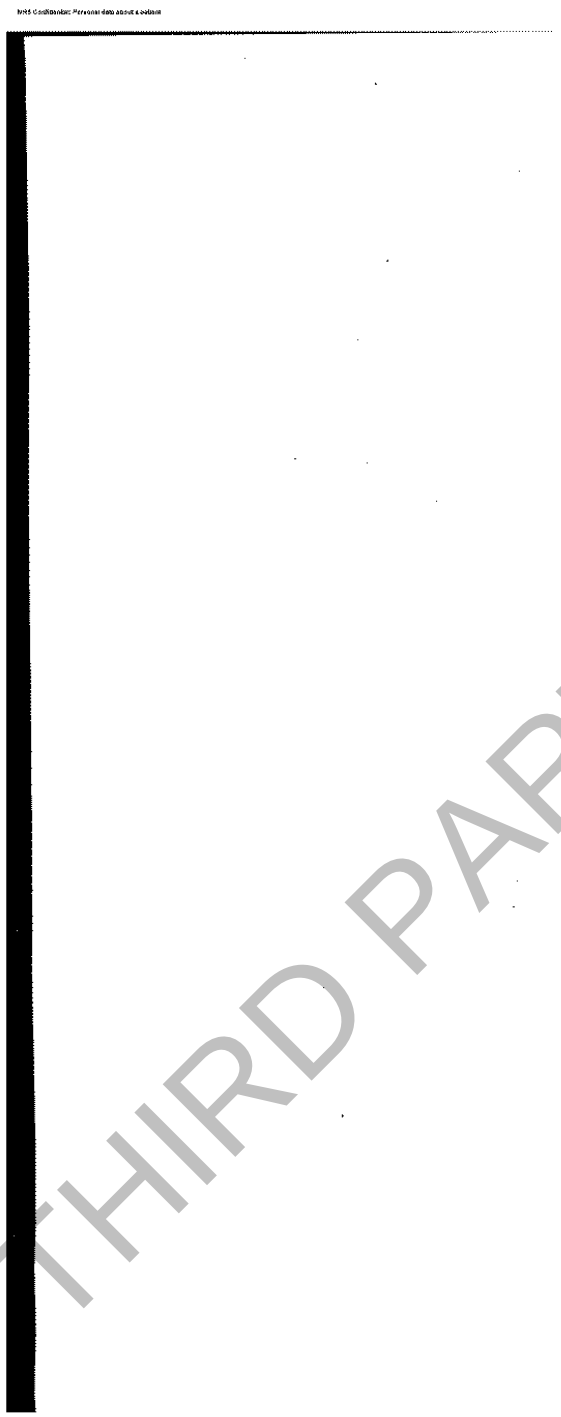

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STOP SMOKING CLIENT PROFILE

NAME: Georgina Smith SPIN: 131344 EDL: _____

LOCATION: Ross WORK PARTY: _____

GROUP/1-1:	NRT PRESCRIBED:
1-1	1mg Lozenge

	DATE OF BIRTH:	GENDER:	IF FEMALE, [redacted]
	4/12/91	MALE / FEMALE	YES / NO

ETHNIC ORIGIN

WHITE	ANY OTHER ETHNIC GROUP PLEASE SPECIFY:	ANY OTHER INFORMATION:
☑ SCOTTISH ☐ OTHER BRITISH ☐ IRISH ☐ POLISH ☐ GYPSY/TRAVELLER ☐ OTHER WHITE ETHNIC GROUP:	..... ☐ NOT DISCLOSED	FVCV-102100033

TOBACCO USE & QUIT ATTEMPTS

TOBACCO PRODUCT USE:	AVERAGE CIGARETTES SMOKED PER DAY:	TIME TO YOUR FIRST CIGARETTE OF THE DAY:	NUMBER OF QUIT ATTEMPTS IN LAST YEAR:
☑ Cigarettes	☐ 10 or less	☑ Within 5 minutes	☑ No quit attempts
☐ Rolled tobacco	☑ 11-20	☐ 6-30 minutes	☐ Once
☐ .....oz per week cannabis	☐ 21-30	☐ 31-60 minutes	☐ 2 or 3 times
	☐ More than 30	☐ Over 1 hour	☐ 4 or more times

MEDICAL HISTORY:		MEDICATION:	
☐ Asthma	☐ Peptic Ulcer	☐ Theophyline	☐ Olanzapine
☐ Diabetes	☐ Breast feeding	☐ Warfarin	☐ Erlotinib
☐ Stroke	☐ Heart disease (Angina/Heart Attack)	☐ Aminophylline	☐ Ruiociguat
☐ Hypertension		☐ Clozapine	☐ Chlorpromazine
			☐ Methadone

Stop smoking service client consent

NHS Forth Valley would like to thank you for stopping smoking.

By using this service you agree to be contacted in the future (4 weeks, 3 months, 1 year) by our service or a third party acting on behalf of NHS Forth Valley to ask about you smoking status. Your details will be anonymised and kept on a confidential database to see if our stop smoking program is working. Some of your information may be used for research purposes within the NHS.

I have received Nicotine Replacement Therapy, my health history has been taken and the contraindications cautions/drug interactions and possible side effects have been explained and discussed and I am if full agreement to take NRT.

DATA CONFIDENTIALITY AND SECURITY (to be signed by the client)

The information provided by you will be held in a secure environment is accordance with the Data Protection Act 1998. The information use to access the outcome of this project and for research purposes; no details will be passed on to any organisation who are not involved in the outcome assessment.

Signature: X. G. Smith Date: 30/8/21

Please ensure **ALL** areas of form are completed before submitting Dec 2018

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STOP SMOKING CLIENT PROFILE

INTERVENTION DETAILS

Refer to GP for Zyban / Varenicline Yes/No

Initial Visit – Date: 30.8.21	CO – ✓		
Week 1 30.8.21	CO – ✓	Week 7	CO –
Week 2	CO –	Week 8	CO –
Week 3	CO –	Week 9	CO –
Week 4	CO –	Week 10	CO –
Week 5	CO –	Week 11	CO –
Week 6	CO –	Week 12	CO –

Date of Referral:	Quit Date:	Date of Initial Appointment:
30/8/21	30/8/21	30/8/21

Pharmaceutical Products Used in THIS quit attempt

☐ 16 hr patch	☐ Champix
☐ 24 hr patch	☐ Zyban
☑ Lozenges (1mg) 2mg	

NOTES

Please ensure **ALL** areas of form are completed before submitting Dec 2018

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NHS Forth Valley Prisons Nicotine Replacement therapy supply form **Appendix 1**

Prison HMP & YOI CORNTON VALE	**Location** Ross
Patients name Georgina Smith	**DOB** 4·12·91
SPIN 131344	**Quit Date** 3018·21

Product with strength	Quantity	date	Received by/supplied by
1mg lozenge	1 box	3018121	[illegible]
1mg lozenge	1box	7/9/21	G Smith
1mg lozenge	1box	28/9/21	Not required G Smith

1

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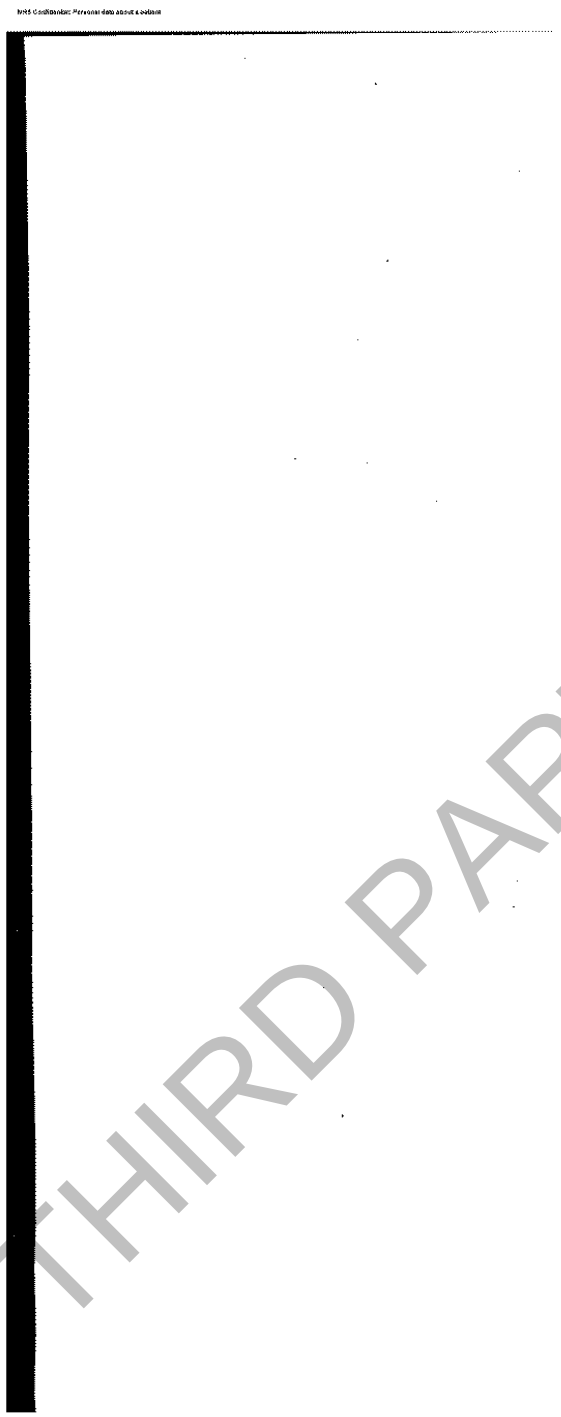

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INITIAL ASSESSMENT – HCA BBV & SH CLINIC

NAME	Georgina Smith			
SPIN	131344			
DOB	4/12/91			
DATE ADMITTED	6/9/21			
CLINIC DATE	6/9/21			
OUTCOME	SEEN ☑ LIBERATED ☐ TRANSFERRED ☐ LACK OF CAPACITY ☐			
DATE OF LIBERATION/TRANSFER				
REMANDED/CONVICTED [redacted] DATE	convicted.			
ADDRESS IF REMANDED LESS THAN 2/12				
DATE LAST BBV TESTING	Negative			
RESULTS	NEGATIVE		POSITIVE – REFER TO SPECIALIST • HEP B • HEP C • HIV	
BBV TESTING DONE	YES (circled) • VENEPUNCTURE DBS		NO • MANDATE SIGNED	
COURSE HEP B VACCINES COMPLETED	YES (circled)		TITRES TAKEN	
			TITRES NOT TAKEN REASON:	
	NO		LISTED FOR TREATMENT [redacted] HEALTH	
[redacted] HEALTH SCREEN REQUIRED	YES (circled)		VAGINAL SEX/ORAL SEX/ANAL SEX (CIRCLE)	
	NO		REASON:	
SWABS OBTAINED	YES/NO (circled)		VAGINAL/ORAL/ANAL	
REASON SWABS NOT TAKEN	DECLINED BY PATIENT – NOTE REASON SYMPTOMATIC – REFERRED TO SH NURSE			
ON CONTRACEPTION	YES		NO – REFER TO SH NURSE	
TYPE OF CONTRACEPTION	implant ~~pod~~			
DATE NEXT DUE CONTRACEPTION			IF OVERDUE – REFER TO SH NURSE	
DATE OF LAST PERIOD				
DATE OF LAST UNPROTECTED [redacted] INTERCOURSE				
PREGNANCY TEST REQUIRED	NO due smear.		YES • NEGATIVE • POSITITVE	
DATE SMEAR DUE	Might be due		IF OVERDUE – REFER TO SH NURSE	
REFERRALS	N/A	[redacted] HEALTH NURSE HIV CONSULTANT	HEPATOLOGY TREATMENT ROOM NURSE	
VISION UPDATED	YES		NO REASON:	

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INITIAL ASSESSMENT – HCA BBV & SH CLINIC

DATABASE UPDATED	YES	NO REASON:
COMPLETED BY		
OTHER NOTES/ISSUES (IE GENTIAL WARTS/LUMPS/ABNORMAL DISCHARGE)		

We screen everybody entering this prison for Hepatitis B, Hepatitis C and HIV.

Screening is free, confidential and the sample will not be used for anything other than this test. You can be infected and still feel healthy, so it's important to test even if you feel fit and well.

If you have Hep C we can treat you with new medication that [redacted] almost all cases, usually with no side effects.

I _____ wish to declined blood borne virus (BBV) testing today. I understand why this testing is being offered. I understand that I can self refer to the sexual health clinic if I wish to take up the off BBV testing at a later date or I am put at risk of contracting a BBV.

Signed_____

Reason testing declined (please circle):

Patient feels no risk

Patient tested in last 12 months and no new risks

BBV positive status known

Other_____

I _____ accept a referral to the Hepatology team/HIV specialist. I understand that you will provide them with my personal and medical information.

Signed_____

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NHS Forth Valley
Microbiology

SURNAME	FORENAME	UNIT No.
SMITH H M PRISON, CORNTON VALE,	GEORGINA	0412913127
	DATE OF BIRTH: 04/12/1991	SEX: F

CONSULTANT: Dr [redacted] Sayers
WARD: Prison Medical Officer CORN
G.P.: HMP & YOI Cornton Vale
CLINICAL DATA: BBV bloods

Syphilis Screening Test	Negative	
Hepatitis B surface antigen	Negative	
Hepatitis B surface antibody	41	IU/L
Hepatitis C antibody screen	Not Reactive	
HCV antibody not detected		
HIV antigen / antibody test	Negative	

Interpretation of antibody titres for immunocompetent persons

Titre	
<10	Non responder. Repeat primary vaccination and re-check antibody titre after 1 - 4 months. If still non-responde will require HBIG (immunoglobulin) after potential exposu
10-99	Responder - give one additional dose following primary vaccination, and a single booster 5 years later. Do not repeat antibody test.
>100	Responder - Do not repeat antibody test. Requires single booster 5 years after primary course.

These comments apply to antibody checks after full course of primary immunisation. N.B. Please ensure full vaccination his is given to allow appropriate testing.

EXAMINATION	LAB No.	AUTHORISED	
Syphilis Serology	MS013330S	Auto authorised	
NATURE OF SPECIMEN	DATE COLLECTED	DATE RECEIVED	DATE REPORTED
Venous blood	06/09/2021	06/09/2021	06/09/2021

letter Sent
to make aware
of result
2L
8/9/21

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NHS
Forth Valley
Microbiology

SURNAME: SMITH H M PRISON, CORNTON VALE,	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Sayers	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: BBV bloods			

EXAMINATION: Syphilis Serology	LAB No.: MS013330S	AUTHORISED: Auto authorised	
NATURE OF SPECIMEN: Venous blood	DATE COLLECTED: 06/09/2021	DATE RECEIVED: 06/09/2021	DATE REPORTED: 06/09/2021

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NHS Forth Valley
Microbiology

SURNAME	FORENAME	UNIT No.
SMITH H M PRISON, CORNTON VALE,	GEORGINA	0412913127
	DATE OF BIRTH: 04/12/1991	SEX: F

CONSULTANT: Dr [redacted] Sayers
WARD: Prison Medical Officer CORN
G.P.: HMP & YOI Cornton Vale
CLINICAL DATA: BBV bloods

Syphilis Screening Test	Negative	
Hepatitis B surface antigen	Negative	
Hepatitis B surface antibody	41	IU/L
Hepatitis C antibody screen	Not Reactive	
HCV antibody not detected		
HIV antigen / antibody test	Negative	

Interpretation of antibody titres for immunocompetent persons

Titre	
<10	Non responder. Repeat primary vaccination and re-check antibody titre after 1 - 4 months. If still non-responde will require HBIG (immunoglobulin) after potential exposu
10-99	Responder - give one additional dose following primary vaccination, and a single booster 5 years later. Do not repeat antibody test.
>100	Responder - Do not repeat antibody test. Requires single booster 5 years after primary course.

These comments apply to antibody checks after full course of primary immunisation. N.B. Please ensure full vaccination his is given to allow appropriate testing.

EXAMINATION	LAB No.	AUTHORISED	
Syphilis Serology	MS013330S	Auto authorised	
NATURE OF SPECIMEN	DATE COLLECTED	DATE RECEIVED	DATE REPORTED
Venous blood	06/09/2021	06/09/2021	06/09/2021

letter Sent
to make aware
of result
2L
8/9/21

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NHS
Forth Valley
Microbiology

SURNAME: SMITH H M PRISON, CORNTON VALE,	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Sayers	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: BBV bloods			

EXAMINATION: Syphilis Serology	LAB No.: MS013330S	AUTHORISED: Auto authorised	
NATURE OF SPECIMEN: Venous blood	DATE COLLECTED: 06/09/2021	DATE RECEIVED: 06/09/2021	DATE REPORTED: 06/09/2021

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NHS
Forth Valley
Microbiology

SURNAME: SMITH H M PRISON, CORNTON VALE,	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Sayers	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: FSHS			

Chlamydia trachomatis PCR	Negative
N.gonorrhoeae PCR	Negative

* Chlamydia / Gonorrhoea testing should only be done if there is a clinical indication OR if there is a concern following [redacted] risk.
* All diagnosed with Chlamydia should have [redacted] notification and be retested at 3-12 months.
* For advice / help contact Central [redacted] Health Helpline 01324 673563 (Mon-Fri 2-4pm).

EXAMINATION: Chlamydia & gonorrhoea PCR	LAB No.: MS013329C	AUTHORISED: Auto authorised	[redacted] REPORTED: [redacted]/2021
NATURE OF SPECIMEN: Low Vaginal swab	DATE COLLECTED: 06/09/2021	DATE RECEIVED: 06/09/2021	

letter sent to make aware of result
GL 14/9/21

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NHS Confidential: Personal data about a patient

NHS
Forth Valley
Microbiology

SURNAME: SMITH H M PRISON, CORNTON VALE,	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Dr [redacted] Sayers	WARD: Prison Medical Officer CORN G.P.: HMP & YOI Cornton Vale		
CLINICAL DATA: FSHS			

Chlamydia trachomatis PCR	Negative
N.gonorrhoeae PCR	Negative

* Chlamydia / Gonorrhoea testing should only be done if there is a clinical indication OR if there is a concern following [redacted] risk.
* All diagnosed with Chlamydia should have [redacted] notification and be retested at 3-12 months.
* For advice / help contact Central [redacted] Health Helpline 01324 673563 (Mon-Fri 2-4pm).

EXAMINATION: Chlamydia & gonorrhoea PCR	LAB No.: MS013329C	AUTHORISED: Auto authorised	[redacted] REPORTED: [redacted]/2021
NATURE OF SPECIMEN: Low Vaginal swab	DATE COLLECTED: 06/09/2021	DATE RECEIVED: 06/09/2021	

letter sent to make aware of result
RL 14/9/21

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INITIAL ASSESSMENT – HCA BBV & SH CLINIC

NAME	Georgina Smith				
SPIN	131344				
DOB	4/12/91				
DATE ADMITTED	6/9/21				
CLINIC DATE	6/9/21				
OUTCOME	SEEN ☑ LIBERATED ☐ TRANSFERRED ☐ LACK OF CAPACITY ☐				
DATE OF LIBERATION/TRANSFER					
REMANDED/CONVICTED	convicted.				
[redacted] DATE					
ADDRESS IF REMANDED LESS THAN 2/12					
DATE LAST BBV TESTING	negative				
RESULTS	NEGATIVE		POSITIVE – REFER TO SPECIALIST • HEP B • HEP C • HIV		
BBV TESTING DONE	(YES) • VENEPUNCTURE • DBS		NO • MANDATE SIGNED		
COURSE HEP B VACCINES COMPLETED	(YES)		TITRES TAKEN		
			TITRES NOT TAKEN REASON:		
	NO		LISTED FOR TREATMENT [redacted] HEALTH		
[redacted] HEALTH SCREEN REQUIRED	(YES)		VAGINAL SEX/ORAL SEX/ANAL SEX (CIRCLE)		
	NO		REASON:		
SWABS OBTAINED	(YES)/NO		VAGINAL/ORAL/ANAL		
REASON SWABS NOT TAKEN	DECLINED BY PATIENT – NOTE REASON SYMPTOMATIC – REFERRED TO SH NURSE				
ON CONTRACEPTION	YES		NO – REFER TO SH NURSE		
TYPE OF CONTRACEPTION	implanon exp				
DATE NEXT DUE CONTRACEPTION			IF OVERDUE – REFER TO SH NURSE		
DATE OF LAST PERIOD					
DATE OF LAST UNPROTECTED [redacted] INTERCOURSE					
PREGNANCY TEST REQUIRED	NO		YES • NEGATIVE • POSITITVE		
DATE SMEAR DUE	due 9/9/21 might be due		IF OVERDUE – REFER TO SH NURSE		
REFERRALS	N/A	[redacted] HEALTH NURSE	HIV CONSULTANT	HEPATOLOGY	TREATMENT ROOM NURSE
VISION UPDATED	YES		NO REASON:		

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INITIAL ASSESSMENT – HCA BBV & SH CLINIC

DATABASE UPDATED	YES	NO REASON:
COMPLETED BY		
OTHER NOTES/ISSUES (IE GENTIAL WARTS/LUMPS/ABNORMAL DISCHARGE)		

We screen everybody entering this prison for Hepatitis B, Hepatitis C and HIV.

Screening is free, confidential and the sample will not be used for anything other than this test. You can be infected and still feel healthy, so it's important to test even if you feel fit and well.

If you have Hep C we can treat you with new medication that [redacted] almost all cases, usually with no side effects.

I _____ wish to declined blood borne virus (BBV) testing today. I understand why this testing is being offered. I understand that I can self refer to the sexual health clinic if I wish to take up the off BBV testing at a later date or I am put at risk of contracting a BBV.

Signed_____

Reason testing declined (please circle):

Patient feels no risk

Patient tested in last 12 months and no new risks

BBV positive status known

Other_____

I _____ accept a referral to the Hepatology team/HIV specialist. I understand that you will provide them with my personal and medical information.

Signed_____

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+HMPYOI CORNTON VALE MEDICATION SPOT CHECKS

5 Friday 24/9/24

PATIENT NAME: Georgina Smith SPIN: 1313444

DATE OF CHECK	MEDICATION TO BE CHECKED	DATE ISSUED	EXPECTED QUANTITY	ACTUAL QUANTITY	+/- DIFFERENCE
7x30mg	Paroxetine	21/9/24	4	4	0
7x80mg	Pregabalin	21/9/24	4	4	0
21x25mg	Quetiapine	21/9/24	12	12	0
7x100mg	Quetiapine	21/9/24	3-4	4	0
7x50mg	Amitriptyline	21/9/24	3-4	4	0
7x400mg	Lamotrigine	21/9/24	4	4	0

REASON STATED FOR DIFFERENCE BETWEEN EXPECTED AND ACTUAL QUANTITY:

CHECK CARRIED OUT BY: _____ SIGNATURE: _____ DATE: _____

PASSED TO : _____ SIGNATURE : _____ DATE: _____

OUTCOME OF SPOT CHECK: _____

_____

_____

[redacted] CARRIED OUT BY: _____ SIGNATURE: _____ DATE: _____

DATE LISTED IN MENTAL HEALTH DIARY FOR REVIEW (if required): _____

LISTED BY: _____

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+HMPYOI CORNTON VALE MEDICATION SPOT CHECKS

5 Friday 24/9/24

PATIENT NAME: Georgina Smith SPIN: 131344

DATE OF CHECK	MEDICATION TO BE CHECKED	DATE ISSUED	EXPECTED QUANTITY	ACTUAL QUANTITY	+/- DIFFERENCE
7x30	Paroxetine	21/9/24	4	4	0
7x80	Pregabalin	21/9/24	4	4	0
21x25	Quetiapine	21/9/24	12	12	0
7x100	Quetiapine	21/9/24	3-4	4	0
7x50	Amitriptyline	21/9/24	3-4	4	0
7x168	Lisinopril	21/9/24	4	4	0

REASON STATED FOR DIFFERENCE BETWEEN EXPECTED AND ACTUAL QUANTITY:

CHECK CARRIED OUT BY: _____ SIGNATURE: X G Smith

PASSED TO : _____ SIGNATURE : _____ DATE: _____

OUTCOME OF SPOT CHECK: _____

_____

_____

[redacted] CARRIED OUT BY: _____ SIGNATURE: _____ DATE: _____

DATE LISTED IN MENTAL HEALTH DIARY FOR REVIEW (if required): _____

LISTED BY: _____

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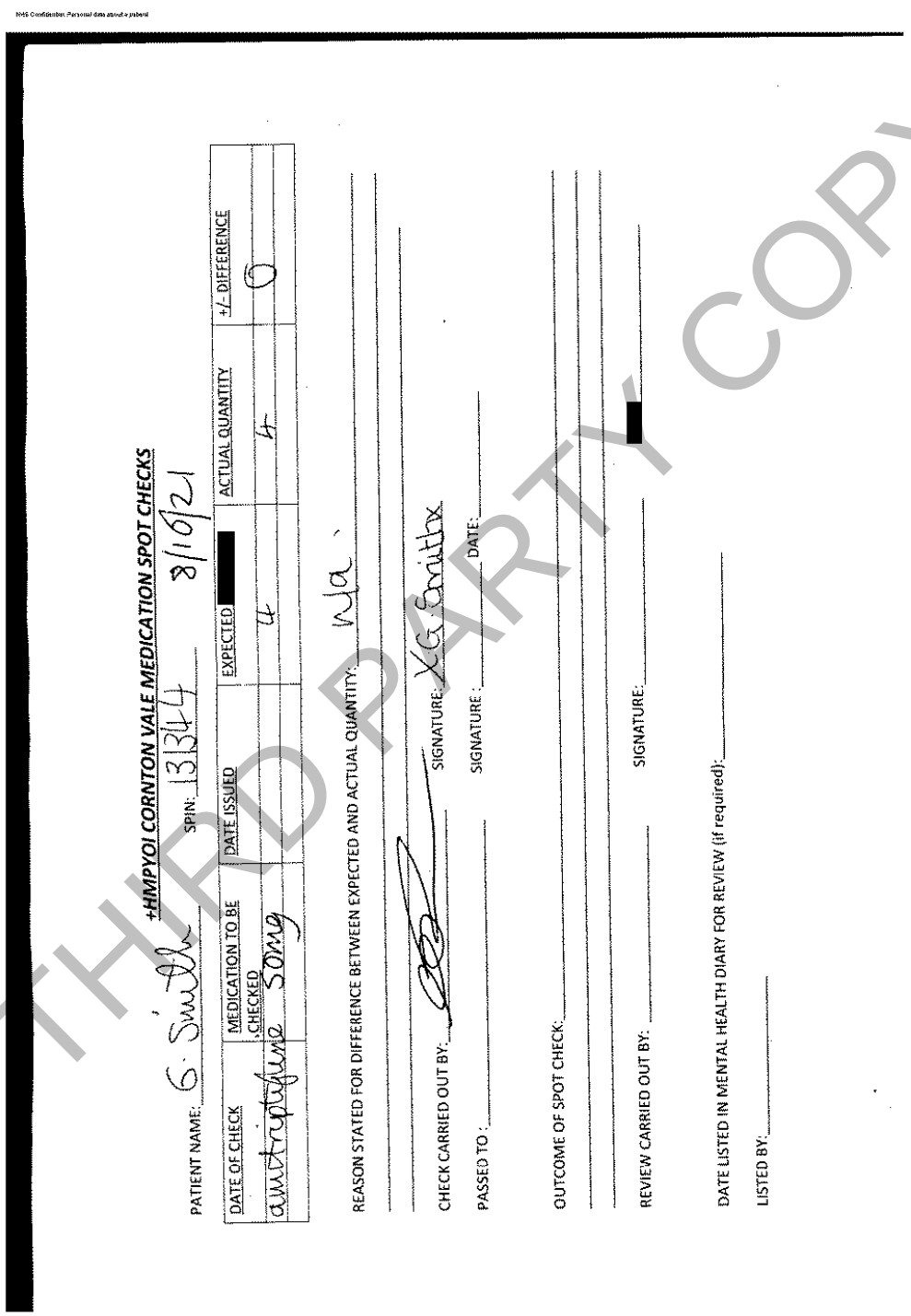

NHS Confidential: Personal data about a patient

+HMPYOI CORNTON VALE MEDICATION SPOT CHECKS

PATIENT NAME: G. Smith SPIN: 133144 8/10/21

DATE OF CHECK	MEDICATION TO BE CHECKED	DATE ISSUED	EXPECTED [redacted]	ACTUAL QUANTITY	+/- DIFFERENCE
amitriptyline 50mg			4	4	0

REASON STATED FOR DIFFERENCE BETWEEN EXPECTED AND ACTUAL QUANTITY: n/a

CHECK CARRIED OUT BY: SIGNATURE: [redacted] DATE:

PASSED TO : SIGNATURE : DATE:

OUTCOME OF SPOT CHECK:

REVIEW CARRIED OUT BY: SIGNATURE: [redacted]

DATE LISTED IN MENTAL HEALTH DIARY FOR REVIEW (if required):

LISTED BY:

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IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
G Smith	22/10/21	1313144	5/2	4/12/91

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM NOON PM NIGHT	Should be remaining	Actual [redacted]	Shortfall/ Excess
Paroxetine	30mg		7	✓	4	4	0
Propranolol MR	80mg		7	✓	4	4	0
Quetiapine	25mg		21	✓✓	12	15	+3
Quetiapine	100mg		7	✓	4	4	0
Time of check			Lymecycline 408mg	✓	4	4	0
			amitriptyline 25mg	✓	4	4	0
			50mg	✓	4	4	0

PRISONERS RESPONSE TO ANY DISCREPANCY: forgot one day. 3 quetiapine 25mg removed

Nurse Signature: [redacted] **Patient Signature:** X. G. Smith

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

[redacted]

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NHS Confidential: Personal data about a patient

+HMPYOI CORNTON VALE MEDICATION SPOT CHECKS

PATIENT NAME: G. Smith SPIN: 133144 8/10/21

DATE OF CHECK	MEDICATION TO BE CHECKED	DATE ISSUED	EXPECTED [redacted]	ACTUAL QUANTITY	+/- DIFFERENCE
amitriptyline 50mg			4	4	0

REASON STATED FOR DIFFERENCE BETWEEN EXPECTED AND ACTUAL QUANTITY: n/a

CHECK CARRIED OUT BY: SIGNATURE: [redacted] K.G. Smith

PASSED TO : SIGNATURE : DATE:

OUTCOME OF SPOT CHECK:

REVIEW CARRIED OUT BY: SIGNATURE: [redacted]

DATE LISTED IN MENTAL HEALTH DIARY FOR REVIEW (if required):

LISTED BY:

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Pages:

IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
G Smith	22/10/21	1313144	5/2	4/12/91

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM NOON PM NIGHT	Should be remaining	Actual [redacted]	Shortfall/ Excess
Paroxetine	30mg		7	✓	4	4	0
Propranolol MR	80mg		7	✓	4	4	0
Quetiapine	25mg		21	✓✓	12	15	+3
Quetiapine	100mg		7	✓	4	4	0
Time of check			Lymecycline 408mg	✓	4	4	0
			amitriptyline 25mg	✓	4	4	0
			50mg	✓	4	4	0

PRISONERS RESPONSE TO ANY DISCREPANCY: forgot one day. 3 quetiapine 25mg removed

Nurse Signature: [signature] Patient Signature: X. G. Smith

Your in – possession medication check on ..... was not correct

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ Date _____

[redacted]

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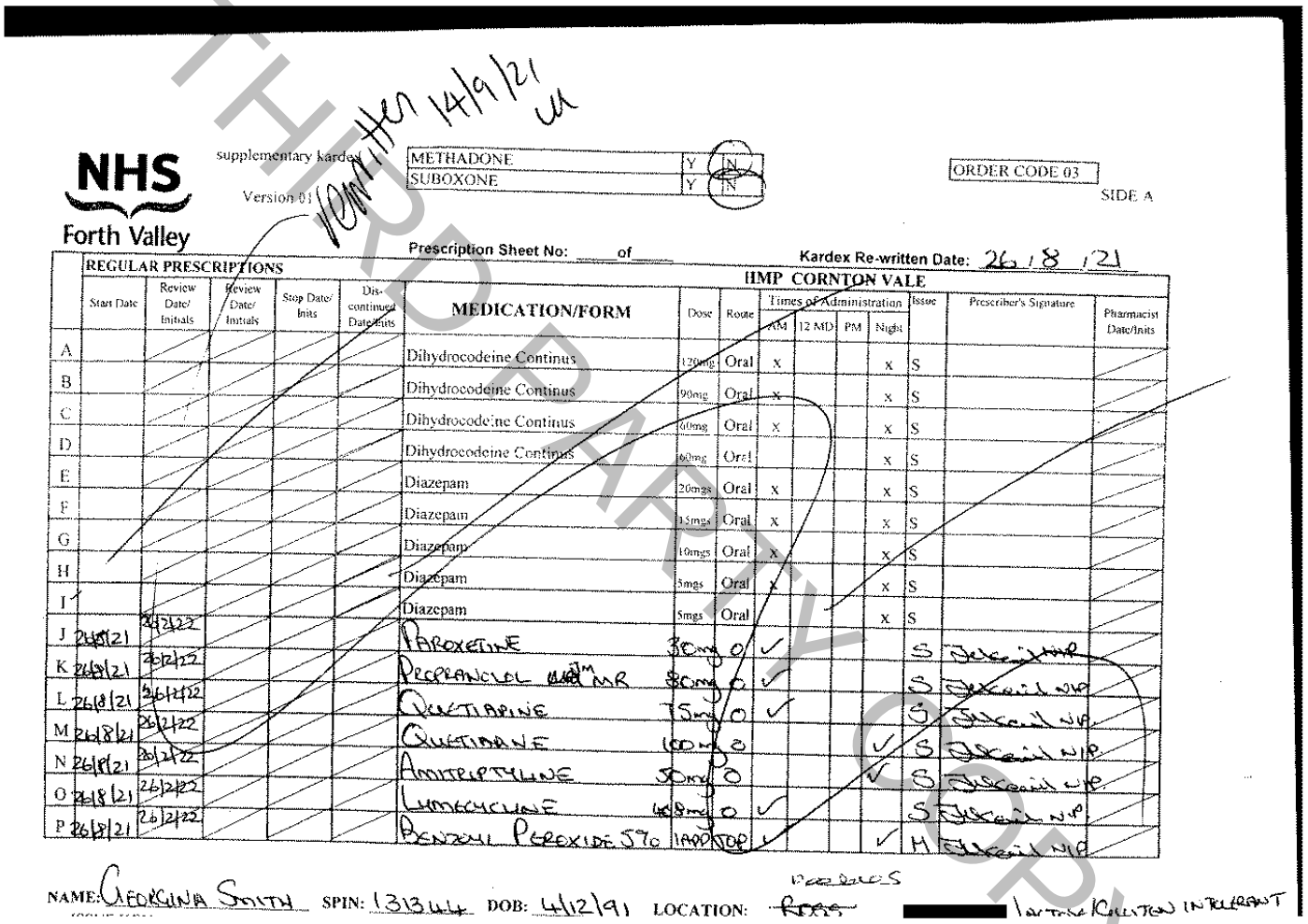

NHS Forth Valley

supplementary kardex

Version 01

METHADONE Y N
SUBOXONE Y N

ORDER CODE 03

SIDE A

Prescription Sheet No: ____ of ____

Kardex Re-written Date: 26/8/21

HMP CORNTON VALE

REGULAR PRESCRIPTIONS

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Inits	Dis-continued Date/Inits	MEDICATION/FORM	Dose	Route	Times of Administration: AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Inits
A						Dihydrocodeine Continus	120mg	Oral	x			x	S		
B						Dihydrocodeine Continus	90mg	Oral	x			x	S		
C						Dihydrocodeine Continus	60mg	Oral	x			x	S		
D						Dihydrocodeine Continus	60mg	Oral				x	S		
E						Diazepam	20mgs	Oral	x			x	S		
F						Diazepam	15mgs	Oral	x			x	S		
G						Diazepam	10mgs	Oral	x			x	S		
H						Diazepam	5mgs	Oral	x			x	S		
I						Diazepam	5mgs	Oral				x	S		
J	26/8/21	26/2/22				PAROXETINE	30mg	O	✓				S		
K	26/8/21	26/2/22				PERPHENAZINE 4mg TDS MR	8mg	O	✓				S		
L	26/8/21	26/2/22				QUETIAPINE	75mg	O	✓				S		
M	26/8/21	26/2/22				QUETIAPINE	100mg	O				✓	S		
N	26/8/21	26/2/22				AMITRIPTYLINE	50mg	O				✓	S		
O	26/8/21	26/2/22				LYMECYCLINE	408mg	O	✓				S		
P	26/8/21	26/2/22				BENZOYL PEROXIDE 5%	1APPTOP		✓			✓	H		

NAME: GEORGINA SMITH SPIN: 1313444 DOB: 4/12/91 LOCATION: ROSS HOUSE

[redacted] ALLERGIC TO CORNTON INTOLERANT

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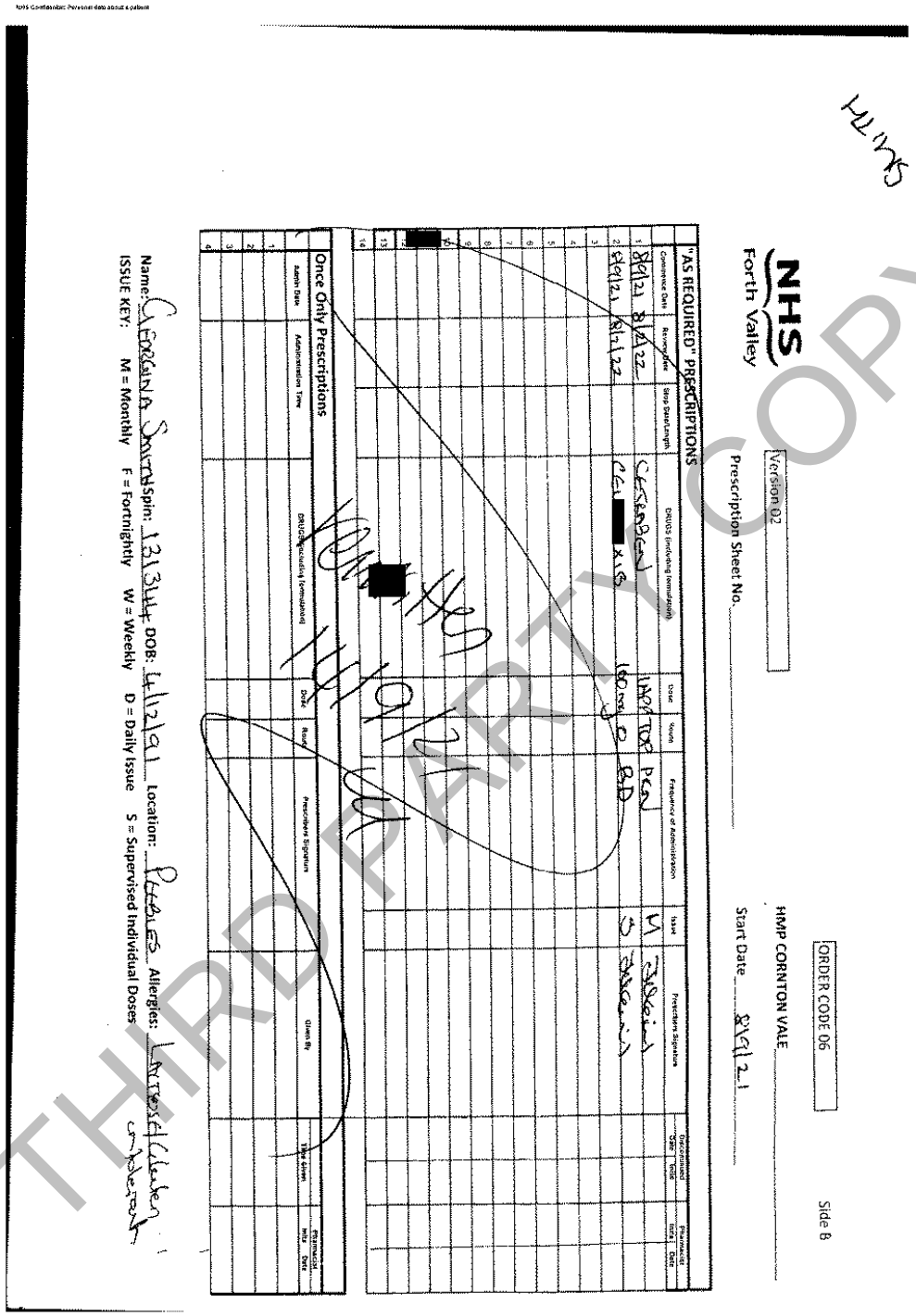
iGPR Report



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NHS Forth Valley

Prescription Sheet No. _____ Version 02

HMP CORNTON VALE

ORDER CODE 06

Start Date 8/8/22

Side B

"AS REQUIRED" PRESCRIPTIONS

Once Only Prescriptions

Name: [redacted] Spin: 1213444 DOB: 4/12/61 Location: Pitlochry Allergies: NKDA

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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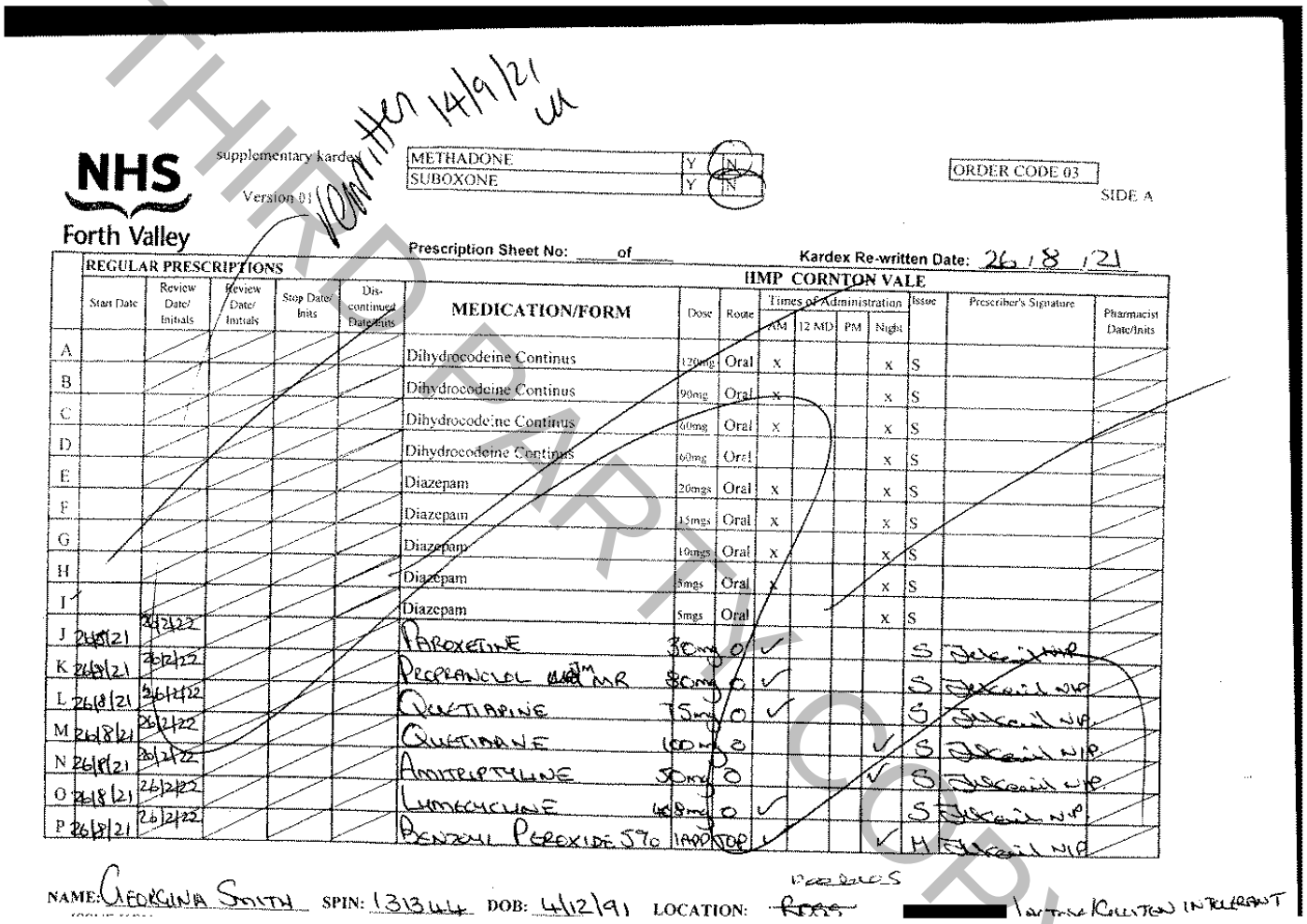

NHS
Forth Valley

supplementary kardex
Version 01

rewritten 14/9/21 LR

METHADONE	Y / N
SUBOXONE	Y / N

ORDER CODE 03

SIDE A

Prescription Sheet No: ____ of ____

Kardex Re-written Date: 26/8/21

HMP CORNTON VALE

	REGULAR PRESCRIPTIONS Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Inits	Dis-continued Date/Inits	MEDICATION/FORM	Dose	Route	Times of Administration AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Inits
A						Dihydrocodeine Continus	120mg	Oral	x			x	S		
B						Dihydrocodeine Continus	90mg	Oral	x			x	S		
C						Dihydrocodeine Continus	60mg	Oral	x			x	S		
D						Dihydrocodeine Continus	60mg	Oral				x	S		
E						Diazepam	20mgs	Oral	x			x	S		
F						Diazepam	15mgs	Oral	x			x	S		
G						Diazepam	10mgs	Oral	x			x	S		
H						Diazepam	5mgs	Oral	x			x	S		
I						Diazepam	5mgs	Oral				x	S		
J	26/8/21	26/2/22				PAROXETINE	30mg	O	✓				S		
K	26/8/21	26/2/22				PECPHENAZINE with NAR	8mg	O	✓				S		
L	26/8/21	26/2/22				QUETIAPINE	75mg	O	✓				S		
M	26/8/21	26/2/22				QUETIAPINE	100mg	O				✓	S		
N	26/8/21	26/2/22				AMITRIPTYLINE	50mg	O				✓	S		
O	26/8/21	26/2/22				LYMECYCLINE	408mg	O	✓				S		
P	26/8/21	26/2/22				BENZOYL PEROXIDE 5%	1APPTOP		✓			✓	H		

NAME: GEORGINA SOUTH SPIN: 1313414 DOB: 4/12/91 LOCATION: ~~ROSE~~ [redacted] ALLERGIES: LACTOSE INTOLERANT

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iGPR Report

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NHS Forth Valley

Prescription Sheet No.

Version 02

ORDER CODE 06

HMP CORNTON VALE

Side B

Start Date 8/8/22

"AS REQUIRED" PRESCRIPTIONS

Once Only Prescriptions

Name: [redacted] Spin: [redacted] DOB: [redacted] Location: [redacted] Allergies: [redacted]

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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For scanning

Georgina Smith CHI: 0412913127

Asked to see by nursing staff, patient c/o abdo pain, distended abdomen, according to officers looks [redacted]
PMH: asthma, backpain, cholecystectomy, breast cysts, gynae issues, mental health issues, eating disorders
Patient states pain started this morning, was woke up with it (6am)
Feels tight, sharp, tingling on upper abdomen radiating down to lower abdomen
constant since 6am, getting worse, describes pain as 8/10
Feels as if something is going to give way in between legs
Patient able to mobilise but rocking back and forward while sitting
o/e looks in pain
colour normal
managed to eat lunch (gluten intolerant), felt worse after this
usually appetite usually poor, has eating disorder, does not always eat meals
recently felt sick with pain, not vomited
no issues with chewing & swallowing,
abdo appears distended
pain in upper left and right quadrant
gaurding present on palpation
reduced pain lower right and left quadrant
no referred pain
abdo feels distended upper half
soft lower, sides
bowel sounds present
no skin changes
bowels - last moved this morning, small drops, moves daily basis, stool hard, can have diarrhoea also, takes regular laxatives, states has blood in stool, after wiping
bladder - states passing more than usual, states passed urine approx 30 times this morning, passed small amount each time went, no burning, no pain, no blood, feels as if bladder constantly full, need to empty bladder but cant
weight was 75kg in April 21 now 85kg
T37.4, BP130/60, sata 98%, p75, R16
Imp: ? constipation, ? urological, ? gynae
For transfer to SAU
Thank you for seeing this patient
[redacted] Mckeich

ANP

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Filename: igprda202606181516330.pdf
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[redacted]

For scanning

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NHS Confidential: Personal data about a patient

Patient Name: SMITH, Georgina DOB: 04-Dec-1991 CHI No: 0412913127

Immediate Discharge Letter (Authorised)

General Surgery
Stirling Road
Larbert
Larbert
Stirlingshire
FK5 4WR

Dept. Contact Details:

UNK-Unknown GP
Patients Where Practice Code
Is Unknown And Who Are Not
Covered By codes 99942
99957 99976 99981 99995

CHI Barcode: 0412913127

Date of Completion: 04-Nov-2021

Patient Demographics

Patient Name:	SMITH, Georgina	**Date Of Birth:**	04-Dec-1991
Patient Address:	The Health Centre PO Box 21616 Stirling FK7 1DW	**Gender:** **CHI No:**	Female 0412913127
Telephone No:	01786 835335		

GP Practice

GP Name:	UNK-Unknown GP	**GP GMC:**	9999998
GP Practice Address:	Patients Where Practice Code Is Unknown And Who Are Not Covered By codes 99942 99957 99976 99981 99995	**GP Practice Code:** **GP Clinic Code:** **GP Telephone:**	9999998/99961 99961/1 11111 111111

Admission Details

Patient Location:	General Surgery	**Admission Care Provider:**	Mr [redacted] Hendry
Admission Date:	03-Nov-2021	**Admission Time:**	18:02
Admission Method:	Emergency Admission, type not known	**Ward:**	FVRH Ward SAU
Source Of Admission:	GP Non Obstetrics - other Provider		

Discharge Details

Discharge Specialty:	General Surgery	**Discharge Care Provider:**	Mr [redacted] Hendry
Discharge Date:	04-Nov-2021	**Ward:**	FVRH Ward SAU
Discharge [redacted]:	13:10	**Discharge Destination:**	Other type of location
Discharge Method:	Transfer within the same NHS Board		

Clinical Summary Including History

Admitted with Abdo pain to SAU
Constipation

Plan: discharged with laxatives

No follow

[redacted] thnks
Dr A [redacted] FY1 SAU

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Page 1 of 3

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Patient Name: SMITH, Georgina DOB: 04-Dec-1991 CHI No: 0412913127

Reason for Admission and Presenting Complaint

Reason for Admission

No Clinical Details

Investigations

-

Diagnosis

Initial Diagnosis:

No Initial Diagnosis Results

Final Diagnosis:

-

Other Active Problems:

-

Co-morbidities

Patient has Comorbidities : No

IDL Additional Information

Follow Up Required : No
Please confirm if there have been changes to this patients medication: : No - there has been NO change to this patients medication
Compliance Aid : No
Final Discharge Letter to Follow : No
Does this patient have a Detention Order? : No

Operations / Procedures

-

Safety Alerts

Nil records exist

Allergy/Intolerance -

Allergy records are as recorded at time and date of printing
Nil records exist

Medications -

Drug Information:

Drug	Dose	Route	Frequency	GP to Continue	POD	Days Supply

Nil records exist

Drug Notes:

Drug	Drug Notes

Nil records exist

Additional Medicine Information:

Medicines discontinued during admission (Medicines that patient was recorded as admitted on only)

Drug	Discontinued Reason

Nil records exist

GP Communications:

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Patient Name: SMITH, Georgina DOB: 04-Dec-1991 CHI No: 0412913127

Outstanding Results - DartOCM

Responsibility of Hospital

Discipline	Investigation	Date Ordered
Microbiology	Unscheduled Admissions - CoVID Screening	03-Nov-2021
Microbiology	URGENT RED pathway	03-Nov-2021
Radiology	XR Abdomen	04-Nov-2021

Person completing record

Name:
Designation or role:
Specialty:
Date completed: 04-Nov-2021

Distribution List

Recipient Name	Recipient Type	Recipient Organisation
UNK-Unknown GP	GP	Patients Where Practice Code

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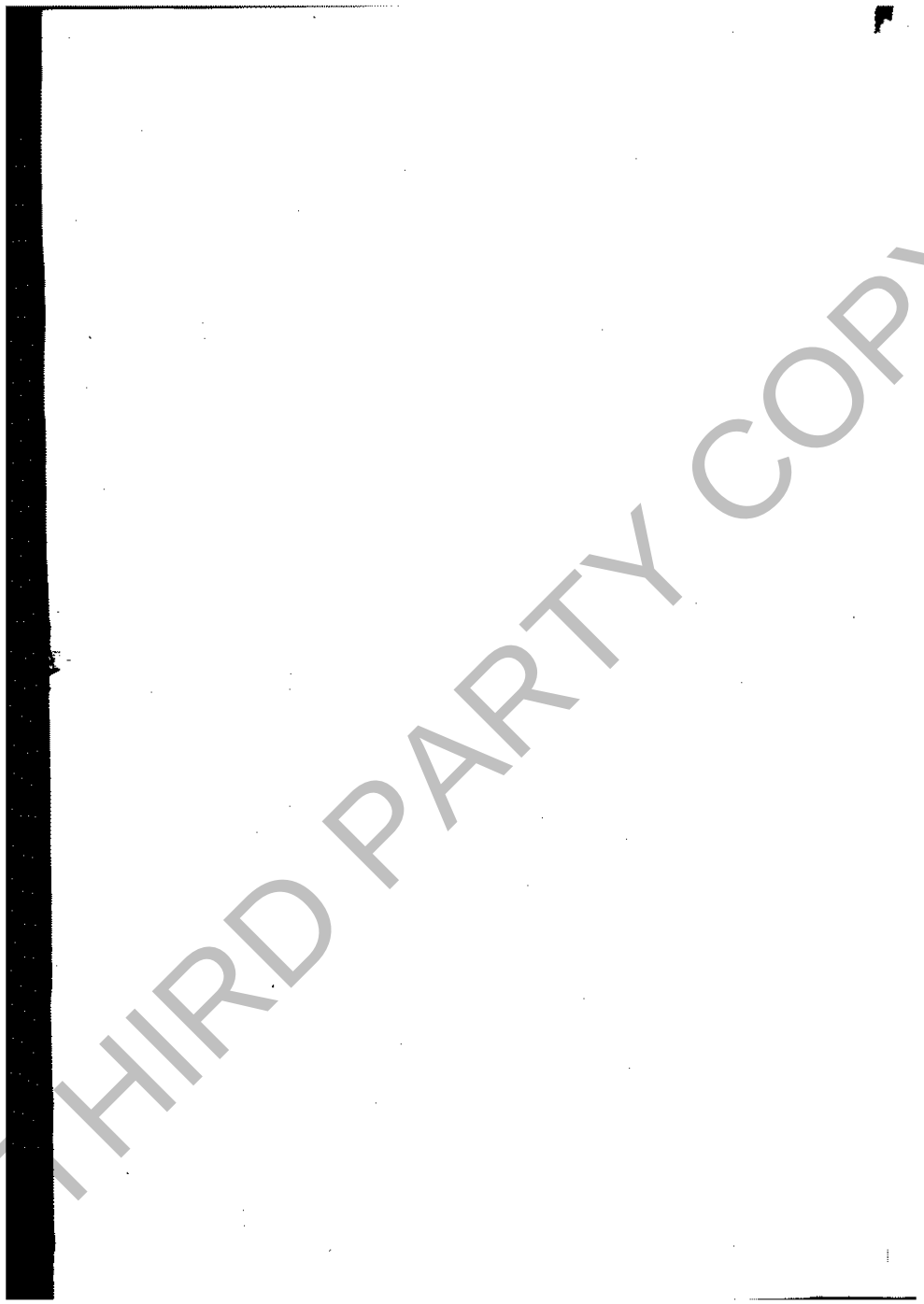

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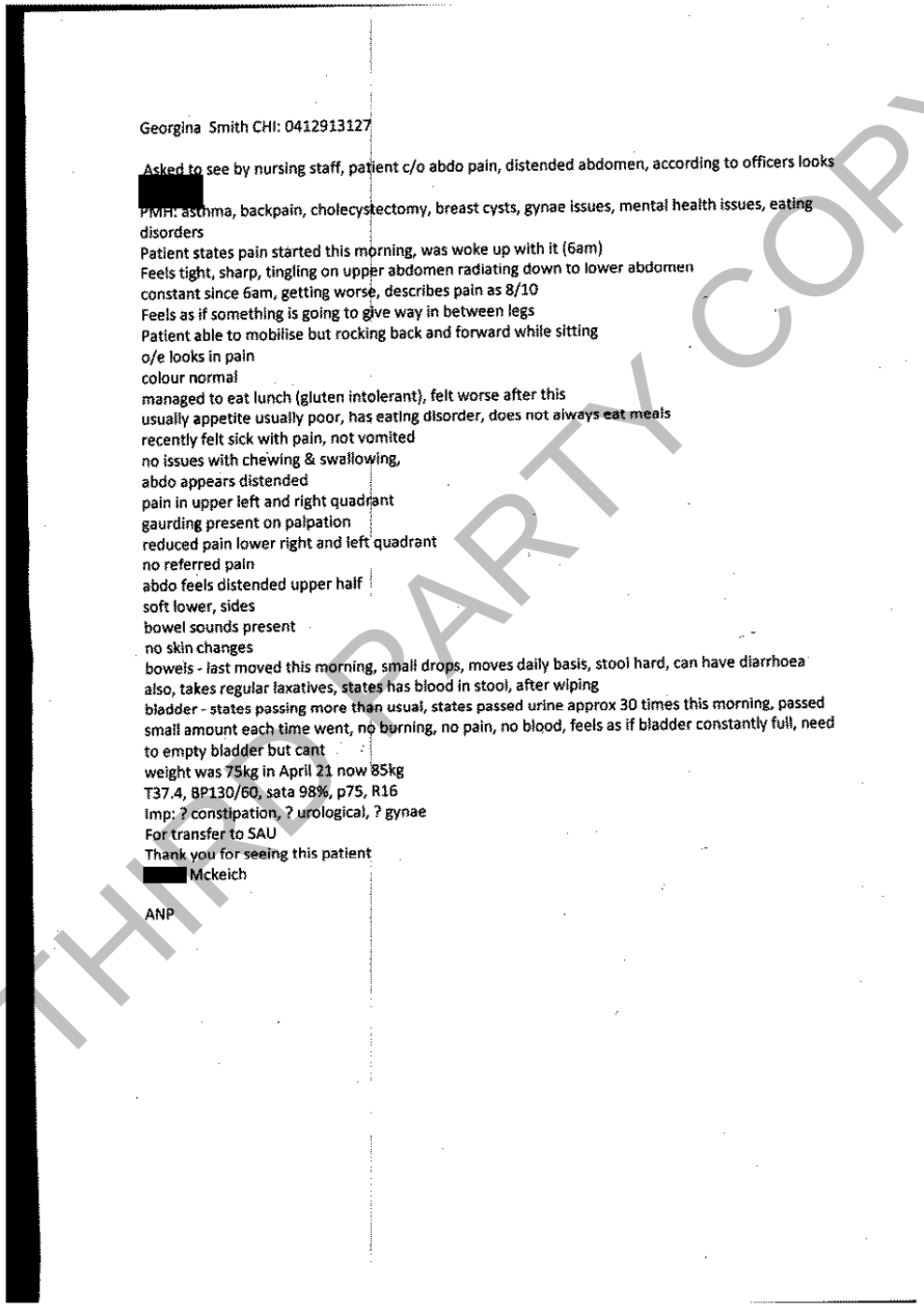

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Georgina Smith CHI: 0412913127

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soft lower, sides
bowel sounds present
no skin changes
bowels - last moved this morning, small drops, moves daily basis, stool hard, can have diarrhoea
also, takes regular laxatives, states has blood in stool, after wiping
bladder - states passing more than usual, states passed urine approx 30 times this morning, passed small amount each time went, no burning, no pain, no blood, feels as if bladder constantly full, need to empty bladder but cant
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Imp: ? constipation, ? urological, ? gynae
For transfer to SAU
Thank you for seeing this patient
[redacted] Mckeich

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Georgina Smith CHI: 0412913127

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T37.4, BP130/60, sata 98%, p75, R16
Imp: ? constipation, ? urological, ? gynae
For transfer to SAU
Thank you for seeing this patient
[redacted] Mckeich

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NHS Forth Valley

HMP CORNTON VALE
CORNTON ROAD
STIRLING
FK9 5NU

REFUSAL FORM

I confirm that on (date) 19.11.21 I declined to ATTEND APPOINTMENT / ~~ACCEPT TREATMENT~~ for me in relation to:

Bloods taken

I note that I take responsibility for my actions in attending allocated appointments/treatments and that my non-attendance or declining treatment may limit the extent to which Health Centre staff are able to meet my healthcare needs.

Patient Name: Georgina Smith Block: Peebles

Spin No: 131344 DoB: 04.12.1991

Date: 19.11.21 Time: 1015

Signature: X G Smith

Witnessed by:

Name: Connor Kennedy Designation: MH DTL

Signature:

Date: 19.11.21 Time: 1015

If patient declines to sign the above, this should be witnessed by another member of staff who observed the decline who should sign below

Declining Witnessed by:

Name: Designation:

Signature:

Date: Time:

Please tick which has been declined by patient

Hospital Appointment ☐ GP/ANP ☐ Nurse ☐ Mental Health ☐

Other Services:

Health Care Assistant ☑ Optician ☐ [redacted] ☐

[redacted] ☐ Dental ☐ Podiatrist ☐

Well Woman ☐ Midwife ☐ Hepatology ☐

Please remember to enter failed encounter on Vision using [redacted] code #9N4..00

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Patient Name: SMITH, Georgina DOB: 04-Dec-1991 CHI No: 0412913127

Immediate Discharge Letter (Authorised)

General Surgery
Stirling Road
Larbert
Larbert
Stirlingshire
FK5 4WR

Dept. Contact Details:

UNK-Unknown GP
Patients Where Practice Code
Is Unknown And Who Are Not
Covered By codes 99942
99957 99976 99981 99995

CHI Barcode: 0412913127

Date of Completion: 04-Nov-2021

Patient Demographics

Patient Name:	SMITH, Georgina	**Date Of Birth:**	04-Dec-1991
Patient Address:	The Health Centre PO Box 21616 Stirling FK7 1DW	**Gender:** **CHI No:**	Female 0412913127
Telephone No:	01786 835335		

GP Practice

GP Name:	UNK-Unknown GP	**GP GMC:**	9999998
GP Practice Address:	Patients Where Practice Code Is Unknown And Who Are Not Covered By codes 99942 99957 99976 99981 99995	**GP Practice Code:** **GP Clinic Code:** **GP Telephone:**	9999998/99961 99961/1 11111 111111

Admission Details

Patient Location:	General Surgery	**Admission Care Provider:**	Mr [redacted] Hendry
Admission Date:	03-Nov-2021	**Admission Time:**	18:02
Admission Method:	Emergency Admission, type not known	**Ward:**	FVRH Ward SAU
Source Of Admission:	GP Non Obstetrics - other Provider		

Discharge Details

Discharge Specialty:	General Surgery	**Discharge Care Provider:**	Mr [redacted] Hendry
Discharge Date:	04-Nov-2021	**Ward:**	FVRH Ward SAU
Discharge [redacted]:	13:10	**Discharge Destination:**	Other type of location
Discharge Method:	Transfer within the same NHS Board		

Clinical Summary Including History

Admitted with Abdo pain to SAU
Constipation

Plan: discharged with laxatives

No follow

[redacted] thnks
Dr A [redacted] FY1 SAU

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Patient Name: SMITH, Georgina DOB: 04-Dec-1991 CHI No: 0412913127

Reason for Admission and Presenting Complaint

Reason for Admission

No Clinical Details

Investigations

-

Diagnosis

Initial Diagnosis:

No Initial Diagnosis Results

Final Diagnosis:

-

Other Active Problems:

-

Co-morbidities

Patient has Comorbidities : No

IDL Additional Information

Follow Up Required : No
Please confirm if there have been changes to this patients medication: : No - there has been NO change to this patients medication
Compliance Aid : No
Final Discharge Letter to Follow : No
Does this patient have a Detention Order? : No

Operations / Procedures

-

Safety Alerts

Nil records exist

Allergy/Intolerance -

Allergy records are as recorded at time and date of printing
Nil records exist

Medications -

Drug Information:

Drug	Dose	Route	Frequency	GP to Continue	POD	Days Supply

Nil records exist

Drug Notes:

Drug	Drug Notes

Nil records exist

Additional Medicine Information:

Medicines discontinued during admission (Medicines that patient was recorded as admitted on only)

Drug	Discontinued Reason

Nil records exist

GP Communications:

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Patient Name: SMITH, Georgina DOB: 04-Dec-1991 CHI No: 0412913127

Outstanding Results - DartOCM

Responsibility of Hospital

Discipline	Investigation	Date Ordered
Microbiology	Unscheduled Admissions - CoVID Screening	03-Nov-2021
Microbiology	URGENT RED pathway	03-Nov-2021
Radiology	XR Abdomen	04-Nov-2021

Person completing record

Name:
Designation or role:
Specialty:
Date completed: 04-Nov-2021

Distribution List

Recipient Name	Recipient Type	Recipient Organisation
UNK-Unknown GP	GP	Patients Where Practice Code

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NHS Forth Valley

HMP CORNTON VALE
CORNTON ROAD
STIRLING
FK9 5NU

REFUSAL FORM

I confirm that on (date) 19.11.21 I declined to ATTEND APPOINTMENT / ~~ACCEPT TREATMENT~~ for me in relation to:

Bloods taken

I note that I take responsibility for my actions in attending allocated appointments/treatments and that my non-attendance or declining treatment may limit the extent to which Health Centre staff are able to meet my healthcare needs.

Patient Name: Georgina Smith Block: Peebles

Spin No: 131344 DoB: 04.12.1991

Date: 19.11.21 Time: 1015

Signature: X G Smith

Witnessed by:

Name: Connor Kennedy Designation: MH DTL

Signature:

Date: 19.11.21 Time: 1015

If patient declines to sign the above, this should be witnessed by another member of staff who observed the decline who should sign below

Declining Witnessed by:

Name: Designation:

Signature:

Date: Time:

Please tick which has been declined by patient

Hospital Appointment ☐ GP/ANP ☐ Nurse ☐ Mental Health ☐

Other Services:

Health Care Assistant ☑ Optician ☐ [redacted] ☐

[redacted] ☐ Dental ☐ Podiatrist ☐

Well Woman ☐ Midwife ☐ Hepatology ☐

Please remember to enter failed encounter on Vision using [redacted] code #9N4..00

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NHS Forth Valley

supplementary kardex Version 01

METHADONE	Y	N
SUBOXONE	Y	N

ORDER CODE 04

Side A

Start Date: ___/___/___

Prescription Sheet No: 1 of 1

Kardex Re-written Date: 14/9/21

HMP Cornton Vale.

REGULAR PRESCRIPTIONS

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Inits	Dis-continued Date/Inits	MEDICATION FORM	Dose	Route	Times of Administration AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Inits
A	14/9/21	14/6/22				PAROXETINE	30mg	O	✓				W	Mane	
B	14/9/21	14/6/22				PROPRANOLOL MR.	80mg	O	✓				W	Mane.	
C	~~14/9/21~~	~~14/6/22~~		11/11/21		~~QUETIAPINE~~	~~75mg~~	~~O~~	~~✓~~				~~W~~	~~Mane~~	
D	~~14/9/21~~	~~14/6/22~~		11/11/21		~~QUETIAPINE~~	~~100mg~~	~~O~~				✓	~~W~~	~~Mane~~	
E	~~14/9/21~~	~~14/6/22~~		8/10/21		~~AMITRIPTYLINE~~	~~50mg~~	~~O~~				✓	~~W~~	~~Mane~~	
F	14/9/21	14/12/21				LYMECYCLINE	408mg	O	✓				W	Mane.	
G	~~14/9/21~~	~~14/12/21~~		3/10/21		~~BENZOYL PEROXIDE 5%~~	~~1APP~~	~~TOP~~	✓			✓	~~M~~	~~Mane~~	
H	8/10/21	30/9/21				AMITRIPTYLINE	75mg	O				✓	W	C	
I	11/11/21	11/11/22				QUETIAPINE	100mg	O	✓			✓	W		
J	~~4/11/21~~	~~4/11/22~~		12/11/21		~~LACTULOSE~~	2 SACHETS	O	✓	✓		✓	~~M~~		
K	~~4/11/21~~	~~4/11/22~~													
L	4/11/21	4/11/22		24/11/21		MEBEVERINE	135mg	O	✓	✓	✓		W		
M	24/11/21	24/11/22				PEPPERMINT CAPSULES	1-2 CAPS	O	✓	✓	✓		W		
N															
O															
P															

NAME: Georgina Smith SPIN: 131344 DOB: 4/12/91 LOCATION: P. ALLERGIES: Lactose/Gluten intolerant

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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NHS Forth Valley

Version 01

ORDER CODE 06

Side B

Start Date: ____/____/____

Kardex Re-

Prescription Sheet No: ____ of ____

written Date: ____/____/____

"AS REQUIRED" PRESCRIPTION

HMP CVHC

	Start Date	Review Date	Stop Date	Drugs (including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Date	Initls
1	14/9/21	14/9/22		CETRABEN	1APP	TOP	PRN	M	Elaine				
2	~~14/9/21~~	~~14/9/22~~ 16/12/22		CELECOXIB	100mg	O	BD	M	Elaine				
3	16/9/21	16/12/22		BISOPROLOL 5mg TABS	1-2 tab	O	DAILY AT NIGHT	M	[illegible]				
4	~~16/9/21~~	~~16/2/22~~ 8/10/21		MELOXICAM WITH FOOD	7.5mg	O	ONCE DAILY	M	[illegible]				
5	~~16/9/21~~	~~16/2/22~~		CARBEAL SHAMPOO	1APP	TOP	AS DIRECTED	M	[illegible]			26/10/21	M
6	8/10/21	30/9/22		BENZOYL PEROXIDE 2.5%	1APP		AS DIRECTED	M	C				
7	~~8/10/21~~	~~30/9/22~~		MELOXICAM	15mg	O	ONCE DAILY	M	C				
8	26/10/21	26/10/22		T-GEL SHAMPOO	1APP	TOP	3x WEEKLY	M	Elaine				
9	11/11/21	30/11/22		LANSOPRAZOLE	2CAPSULES	O	TDS	M	C				
10													
11													
12													
13													
14													

Once Only Prescriptions

	Admin Data	Admin Time	DRUGS (including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1										
2										
3										

NAME: Georgina Smith [redacted] 131344 DOB: 4/12/91 LOCATION: P. ALLERGIES: Lactose/gluten intolerant

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

ING1919

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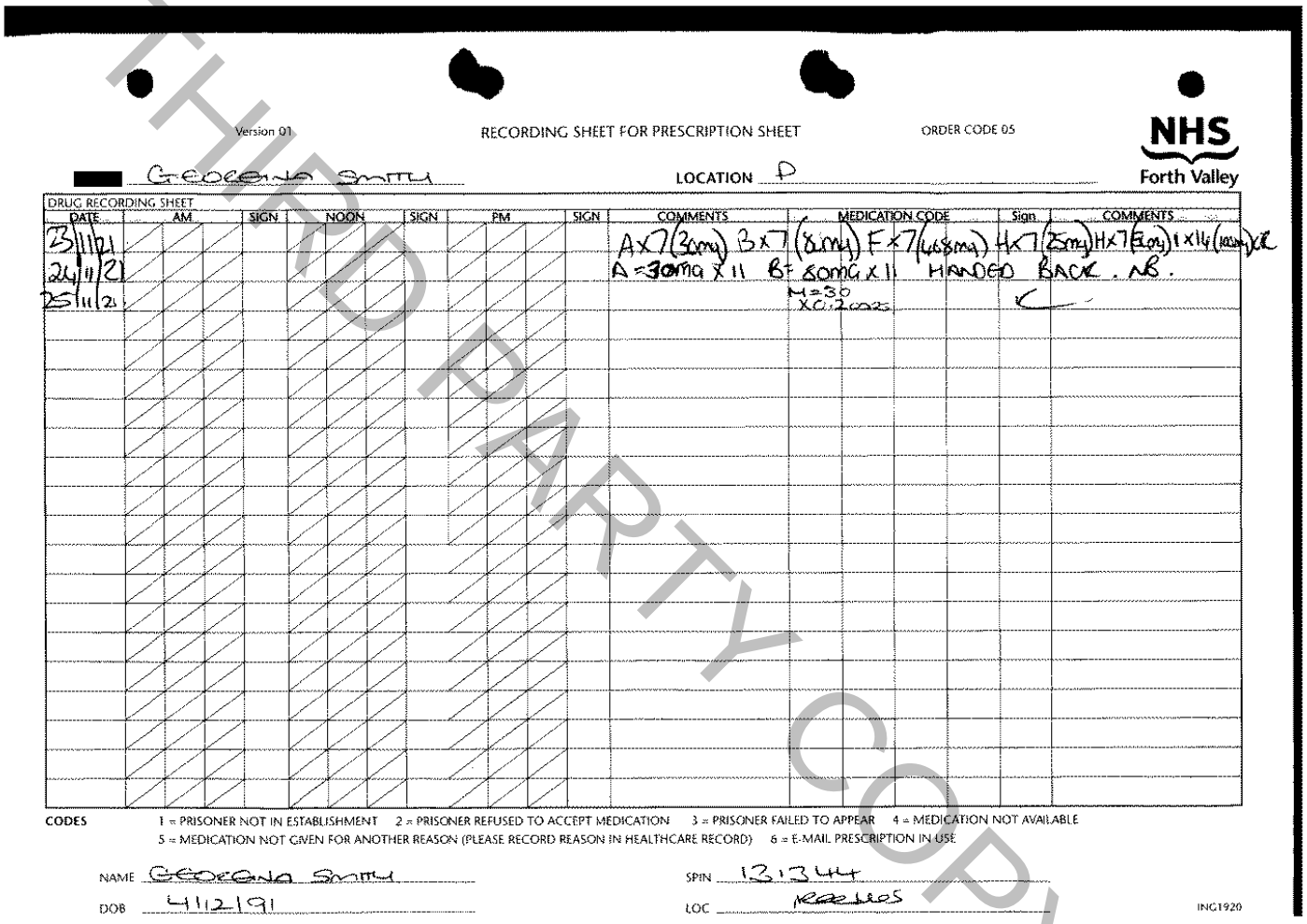

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

[redacted] Georgina Smith

LOCATION D

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENTS
23/11/21							A x 7 (30mg) B x 7 (60mg) F x 7 (45mg) H x 7 (30mg) H x 7 (30mg) I x 14 (40mg) x2			
24/11/21							A = 30mg x 11 B = 60mg x 11 HANDED BACK. NB.			
25/11/21							H = 30 XC. 2025		K	

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith SPIN 131344

DOB 4/12/91 LOC Kerr Ward

ING1920

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Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME Georgina Smith

LOCATION Peebles

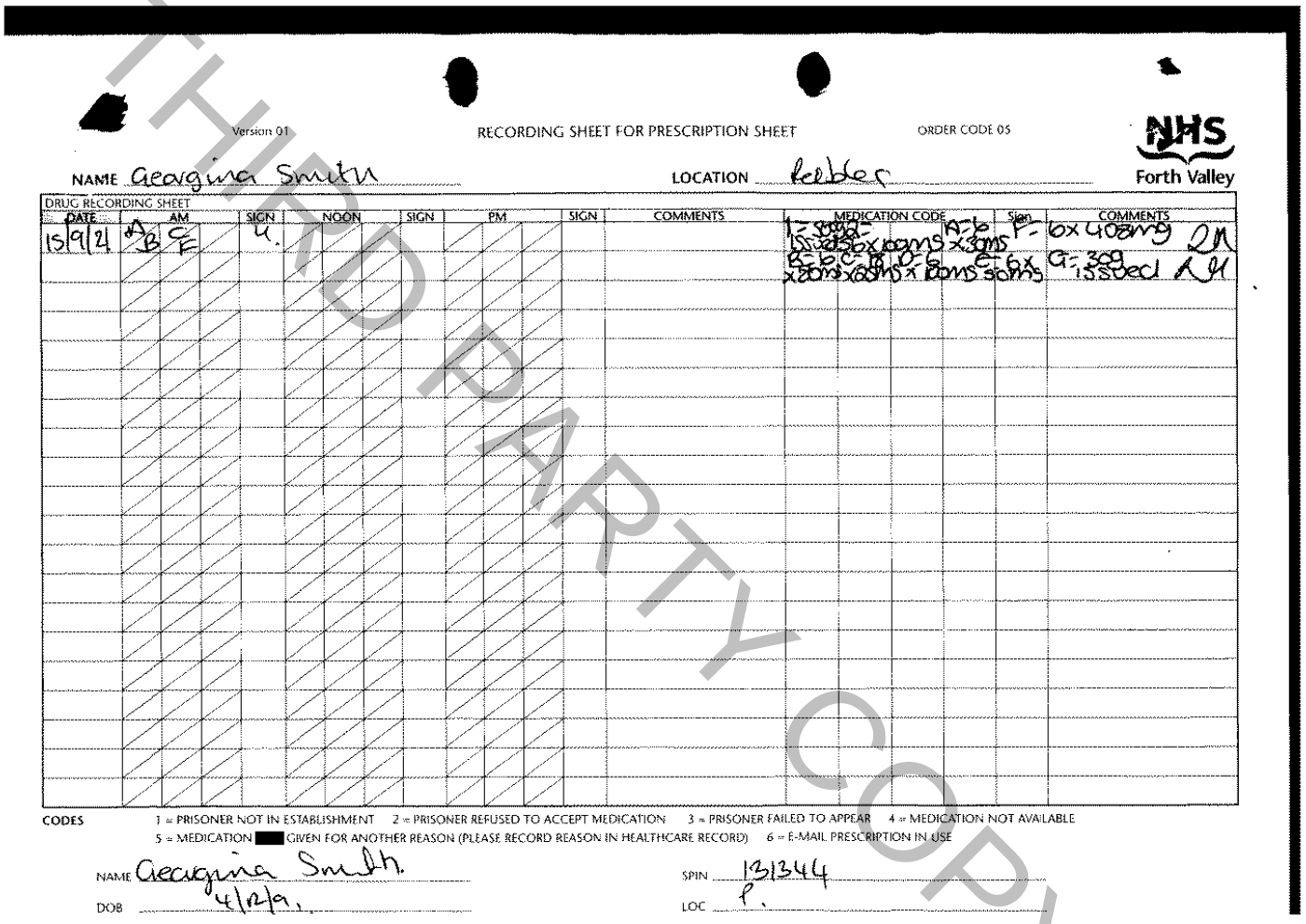
DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENTS
17/9/21								3=56 4=28 5=7bottle		
18/9/21										
21/9/21								A=7 B=7 C=21 D=7 E=7 F=7		
28/9/21								A=7 B=7 C=21 D=7 E=7 F=7 x30mg x80mg x25mg x100mg x50mg x408mg		
5/10/21										
8/10/21								H=7 x50mg		
12/10/21										
18/10/21										
26/10/21										
27/10/21										
1/11/21										
2/11/21										
4/11/21										
8/11/21										
9/11/21										
10/11/21										
11/11/21										
12/11/21										
16/11/21										

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE 5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith SPIN 131344

DOB 4/12/91 LOC Peebles



Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME Georgina Smith

LOCATION Kebbes

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENTS
15/9/14	A B C E	4.						A-1x 30mg x 30ms B-1x 10mg x 30ms C-6x 30ms E-1x 30mg x 30ms F-6x 40mg G-30g 1 issued		

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION [redacted] GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith

DOB 4/12/9.

SPIN 131344

LOC P.

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NAME

LOCATION

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

Version 01

NHS Forth Valley

DRUG RECORDING SHEET

DATE	AM SIGN	NOON SIGN	PM SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENTS
30-8-21				P = given in cell RC.			P.O.J = O
29/8/21				J+O = 4			
30/8/21							
31-8-21							
1/9/21							
2/9/21							
3/9/21							
4/9/21							
5/9/21							
6/9/21							
7/9/21							
8/9/21							
9/9/21							
10/9/21							
11.9.21							
12/9/21							
13/9/21							
14/9/21							

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE

5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith

DOB 4/12/91

SPIN 131344

LOC KOSS

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NHS Forth Valley

Gluten Free Food Prescribable Product List September 2020

This lists the gluten free products that are available on prescription in NHS Forth Valley. Every month you can select a number of units of gluten free food from the list. Please see the table below for your monthly number of units.
This list is updated annually.
It is available online at:

www.nhsforthvalley.com/health-services/az-of-services/gluten-free-food-

The number of units per month

[redacted]	[redacted]
[redacted] 1-3 years	10
[redacted] 4-6 years	11
[redacted] 7-10 years	13
[redacted] 11-14 years	15
[redacted] 15-18 years	18
Male 19-59 years	18
Male 60-74 years	16
Male 75+ years	14
Female 19-74 years	14
Female 75+ years	12
Breastfeeding	Add 4
3rd trimester pregnancy	Add 1

Below is the number of units represented by the gluten free food item

[redacted]	[redacted]
Less than 400g bread	½
400 - 599g bread	1
600g or more of bread	1 ½
500g bread mix or flour mix	2
150 - 250g rolls/baguettes	½
251 - 400g rolls/ baguettes	1
Less than 199g savoury biscuits/crackers	½
200g or more of savoury biscuits/crackers	1
250g pasta	1
251 - 499g pasta	1 ½
500g or more of pasta	2
100 - 170g xanthan gum	1
500g oats or 300g cereal	1½

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BREAD & ROLLS

JUST – (ALL JUST BREAD IS FRESH)		
Good White Bread 380g x 6	(PIP Code 845-3821)	3
White Sandwich Bread 600g x 6	(PIP Code 845-3813)	9
Good White Rolls 260g (4x65g) x 6	(PIP Code 845-3839)	6

JUST products are delivered and distributed by Alliance without any administrative or delivery charges.

- **Fresh Loaves and Rolls are supplied in cases of 6**
- **Delivery cost is included in the cost of each case**
- **Minimum order is one case per delivery**
- **Place order by 2pm on Monday for delivery by Thursday**

GENIUS (ALL GENIUS BREAD IS FRESH)		
Soft Brown Sandwich Loaf Sliced 535g x6	(PIP Code 379-8550)	6
Soft White Sandwich Loaf Sliced 535g x6	(PIP Code 379-8568)	6
Seeded Brown Farmhouse Loaf Sliced 535g x6	(PIP Code 403-8345)	6

Genius products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges.
The pharmacy needs to place Genius Bread orders as follows:

- **Before 2.00 pm Monday –delivered on Thursday**
- **Before 2.00 pm Tuesday –delivered on Friday**
- **Before 2.00 pm Thursday – delivery on Tuesday**
- **Before 9.00 pm Sunday – delivery on Wednesday**

Please note as these are fresh products they must be collected on time and frozen to preserve those products not for immediate use.

GLUTAFIN		
Gluten Free White Loaf – Sliced 300g	(PIP Code: 090-4268)	½
Gluten Free Fibre Loaf – Sliced 300g	(PIP Code: 237-7356)	½
Gluten Free White Rolls (4 pack) 200g	(PIP Code: 344-3645)	½
Gluten Free Part- Baked Baguettes (2 pack) 350g	(PIP Code: 224-0117)	1
Gluten Free Part- Baked Fibre Rolls (4 pack) 200g	(PIP Code: 344-3652)	½
Gluten Free Part- Baked White Rolls (4 pack) 200g	(PIP Code: 344-2753)	½
Gluten Free Part- Baked Long White Rolls (2 pack) 150g	(PIP Code: 344-3637)	½
Gluten Free Select Fibre Loaf – Sliced 400g	(PIP Code: 054-6101)	1
Gluten Free Select Seeded Loaf – Sliced 400g	(PIP Code: 308-9364)	1
Gluten Free Select White Loaf – Sliced 400g	(PIP Code: 054-6093)	1
Gluten Free Select **Fresh** Brown Loaf 400g x8	(PIP Code: 330-6800)	8
Gluten Free Select **Fresh** White Loaf 400g x8	(PIP Code: 290-6840)	8
Gluten Free Select **Fresh** Seeded Loaf – Sliced 400g x8	(PIP Code: 402-3685)	8

Glutafin (Dr Schar) products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges.
Glutafin fresh bread orders/ delivery:

- **Fresh Loaves are supplied in cases of 8**
- **Delivery of fresh brown and seeded bread – place the order before 2pm on Friday to be delivered on Wednesday**
- **Delivery of white bread – place the order before 10am on Tuesday to be delivered Friday or order before 2pm on Friday to be delivered Wednesday**

Please note as these are fresh products they must be collected on time and frozen to preserve those products not for immediate use.

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BREAD & ROLLS CONT...

JUVELA		
Gluten Free Fibre Loaf – Sliced 400g	(PIP Code: 074-8632)	1
Gluten Free Fibre Loaf – Unsliced 400g	(PIP Code: 010-1675)	1
Gluten Free White Loaf – Sliced 400g	(PIP Code: 074-8590)	1
Gluten Free White Loaf – Unsliced 400g	(PIP Code: 031-4781)	1
Gluten Free Part-baked Fibre Loaf unsliced 400g	(PIP Code: 273-6890)	1
Gluten Free Part-baked White Loaf unsliced 400g	(PIP Code: 273-6882)	1
Gluten Free Fibre Rolls (5 pack - each roll 85g) 425g	(PIP Code: 080-3668)	1
Part-baked Fibre Rolls (5 pack - each roll 75g) 375g	(PIP Code: 262-9020)	1
Part-baked White Rolls (5 pack - each roll 75g) 375g	(PIP Code: 243-7267)	1
White Rolls (5 pack - each roll 85g) 425g	(PIP Code: 010-5916)	1
Gluten Free **Fresh** Fibre Sliced Loaf 400g x8	(PIP Code: 339-9789)	8
Gluten Free **Fresh** White Loaf – Sliced 400g x8	(PIP Code: 322-0217)	8
Fresh White Rolls (5 pack - each roll 85g) 425g x8	(PIP Code 355-8871)	8
Fresh Fibre Rolls (5 pack - each roll 85g) 425g x8	(PIP Code 355-6800)	8
Mixed Case Fresh White (20x85g rolls + 4x400g loaves sliced)	(PIP Code: 836-4259)	8
Mixed Case Fresh Fibre (20x85g rolls + 4x400g loaves sliced)	(PIP Code: 836-4242)	8
Mixed Case Fresh Loaves (4x400g fibre + 4x400g white)	(PIP Code: 839-2821)	8
Mixed Case Fresh Rolls (20x85g rolls fibre + 20x85g rolls white)	(PIP Code: 839-2839)	8
Mixed Case Fresh Loaves and Rolls (20x85g fibre rolls + 4x400g white loaves)	(PIP Code: 839-2847)	8
Mixed Case Fresh Loaves and Rolls (20x85g white rolls + 4x400g fibre loaves)	(PIP Code: 839-2730)	8

Juvela products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges
Juvela fresh bread/ rolls orders/ delivery:

- **Both Fresh Loaves and Rolls are supplied in cases of 8.**
- **You can order any combination of both fresh bread & rolls i.e. 4 packs fresh fibre rolls & 4 packs of fresh white loaves (use PIP code for individual product).**

The pharmacy needs to place orders as follows:

- **Orders received by 10am on Monday will be delivered on Wednesday**
- **Orders received by 10am on Tuesday will be delivered on Thursday**
- **Orders received by 10am on Wednesday will be delivered on Friday**
- **Orders received by 10am on Friday will be delivered on Tuesday**

Mixed cases and rolls will be delivered on a Friday only.

Please note as these are fresh products they must be collected on time and frozen to preserve those products not for immediate use.

WARBURTONS (ALL WARBURTONS BREAD IS FRESH)		
Gluten Free Sliced Brown Loaf 400g x4	(PIP Code: 368-5278)	4
Gluten Free Sliced White Loaf 400g x4	(PIP Code: 368-5260)	4
Gluten Free Brown Rolls (3 rolls per pack) 220g x4	(PIP Code: 368-5294)	2
Gluten Free White Rolls (3 rolls per pack) 220g x4	(PIP Code: 368-5286)	2

Warburtons have no handling or distribution costs if ordered through AAH or [redacted] Healthcare Distribution Ltd.

- **Both Fresh Loaves and Rolls are supplied in minimum cases of 4.**
- **Products ordered by 5pm on Thursdays are delivered to pharmacies on Wednesdays**

Please note as these are fresh products they must be collected on time and frozen to preserve those products not for immediate use.

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HOME BAKING		
GLUTAFIN		
Gluten Free Bread Mix 500g	(PIP Code: 298-8418) ■	2
Gluten Free Fibre Bread Mix 500g	(PIP Code: 298-8426) ■	2
Gluten Free Multipurpose Fibre Mix 500g	(PIP Code: 231-2973)	2
Gluten Free Multipurpose White Mix 500g	(PIP Code: 231-2981)	2
Gluten Free Select Bread Mix 500g	(PIP Code: 274-4951)	2
Gluten Free Select Fibre Bread Mix 500g	(PIP Code: 297-9912)	2
Gluten Free Select Multipurpose Fibre Mix 500g	(PIP Code: 004-5591)	2
Gluten Free Select Multipurpose White Mix 500g	(PIP Code: 004-5187)	2
Glutafin (Dr Schar) products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges.		
INNOVATIVE SOLUTIONS (PURE)		
Pure Brown [redacted] Flour 500g	(PIP Code: 325-7912)	2
Pure Tapioca Starch (Flour) 500g	(PIP Code: 325-7946)	2
Pure White [redacted] Flour 500g	(PIP Code: 325-7904)	2
Pure Brown Teff Flour 1kg	(PIP code: 343-1467)	4
Pure White Teff Flour 1kg	(PIP Code: 343-1483)	4
JUVELA		
Fibre Mix 500g	(PIP Code: 023-6042)	2
Harvest White Mix 500g	(PIP Code: 247-7875)	2
White Mix 500g	(PIP Code: 035-2161)	2
Juvela products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges		
BAKING AIDS		
INNOVATIVE SOLUTIONS		
Xanthan Gum 100g	(PIP Code: 282-8572)	1

BREAKFAST CEREAL		
GLUTAFIN		
Gluten-free Cornflakes 375g	(PIP Code: 381-3748)	1 ½
Glutafin (Dr Schar) products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges.		
JUVELA		
Corn Flakes 375g	(PIP Code 388-2990)	1 ½
Crispy [redacted] 375g	(PIP Code 388-2982)	1 ½
Gluten Free Fibre Flakes 300g	(PIP Code 371-1660)	1 ½
Gluten Free Flakes 300g	(PIP Code 371-1652)	1 ½
Pure Oats 500g	(PIP Code 371-1678)	1 ½
Juvela products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges.		

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PASTA		
GLUTAFIN		
Fusilli (Spirals) 500g	(PIP Code: 211-5178)	2
Penne 500g	(PIP Code: 211-5152)	2
Spaghetti 500g	(PIP Code: 211-5160)	2
Fibre Fusilli (Spirals) 500g	(PIP Code: 386-2646)	2
Glutafin (Dr Schar) products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges.		
JUVELA		
Fibre Penne 500g	(PIP Code: 332-8010)	2
Fusilli (Spirals) 500g	(PIP Code: 280-7980)	2
Lasagne Sheets 250g	(PIP Code: 280-7972)	1
Macaroni 500g	(PIP Code: 280-8004)	2
Spaghetti 500g	(PIP Code: 280-7998)	2
Tagliatelle 250g	(PIP Code: 319-3497)	1
Juvela products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges		
RIZOPIA		
ORGANIC BROWN [redacted] PASTA		
Fusilli 500g	(PIP Code: 340-0074)	2
Lasagne 375g	(PIP Code: 340-0108)	1 ½
Penne 500g	(PIP Code: 340-0082)	2
Spaghetti 500g	(PIP Code: 340-0090)	2
Rizopia products are distributed by AAH Pharmaceuticals, Alliance Healthcare Distribution Ltd, and [redacted] Healthcare Distribution Ltd and are distributed without any administrative or delivery charges.		
CRACKERS & CRISPBREAD		
GLUTAFIN		
Crackers 200g	(PIP Code: 009-3302)	1
Crispbread 150g	(PIP Code: 338-4443) ■	½
Mini Crackers 175g	(PIP Code: 353-5515)	½
Glutafin (Dr Schar) products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges.		
JUVELA		
Crispbread 200g	(PIP Code: 236-6136)	1
Savoury Biscuits 150g	(PIP Code: 310-7893)	½
Juvela products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges.		

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Gluten-Free Products – Manufacturers

If you would like to try a new gluten-free product, contact the manufacturers directly as most will be able to send you a free sample.

DR SCHAR UK Ltd
Glutafin,
Dr Schar,
401 Faraday Street,
Birchwood Park,
Risley
Warrington, WA3 6GA
Tel: 0800 988 2470
Email: glutenfree@glutafin.co.uk
www.glutafin.co.uk
Tel: ordering 0844 854 4998,
http://www.glutafin.co.uk/healthcare-professionals/glutafin-fresh-bread-ordering/
Brands- GLUTAFIN

GENIUS GLUTEN FREE
Genius Foods
22 Northumberland Street South
West Lane
Edinburgh EH3 6JD
Tel: 0845 874 4000
www.geniusglutenfree.com
Brands – GENIUS

INNOVATIVE SOLUTIONS UK LTD
Mayfield Centre
Mayfield Street
Rochdale OL16 2UZ
Tel: 01706 746 713 Fax: 01706 341 357
Email: info@pureglutenfree.co.uk
www.pureglutenfree.co.uk
Brands – INNOVATIVE SOLUTIONS, PURE

PGR HEALTH FOODS LTD
PO Box 214,
Hertford SG14 2ZX
Tel: 01992 581715
info@pgrhealthfoods.co.uk
www.rizopia.co.uk
Brands – RIZOPIA

WARBURTONS
Hereford House
Hereford Street
[redacted]
BL1 8JB
Tel: 0800 243684
www.newburnbakehouse.com
Brands- WARBURTONS

HERO UK LTD trading as JUVELA
19 De Havilland Drive
Liverpool L24 8RN
Tel: 0800 783 1992
Email: info@juvela.co.uk
www.juvela.co.uk
Brands – JUVELA GLUTEN FREE

JUST: Gluten Free Bakery
Block 21, Unit 7
Motherwell Food Park
ML4 3NP
Tel: 01698 841559
Info: Info@justglutenfree.co.uk
Order by using all the email addresses below:
admin@justglutenfree.co.uk
Ronnie@justglutenfree.co.uk
ola@justglutenfree.co.uk

MAIN WHOLESALERS

ALLIANCE HEALTHCARE DISTRIBUTION LTD
43 [redacted] Lane
Chessington
Surrey
KT9 1SN
Tel: 020 8391 2323
Pharmacy Services Tel: 020 3044 8021
Gluten Free Bread Team:0844 854 4998
information@alliance-healthcare.co.uk

AAH PHARMACEUTICALS
204 Polmadie Road
Glasgow
G42 0PH
Tel: 0141 423 5888
Order line Tel: 0844 561 8899
enquiries@aah.co.uk

PHOENIX HEALTHCARE DISTRIBUTION LTD
Rivington Road
[redacted] Industrial Estate
Runcorn
Cheshire WA7 3DJ
Tel: 01928 750500
Fax: 01928 750750
www.myp-i-n.co.uk

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Gluten Free Prescribable Product List

ACBS indications for gluten free foods: established gluten-sensitive enteropathies including steatorrhoea due to gluten sensitivity, coeliac disease and dermatitis herpetiformis.

ACBS indications for gluten & wheat free foods: established gluten-sensitive enteropathies with coexisting wheat sensitivity only. These products are highlighted with a square ■. Products highlighted with a ■ are prescribable for those with coexisting wheat sensitivity only.

In line with Coeliac UK guidance 2013, Sweet biscuits should only be considered in exceptional circumstances on clinical advice. There is useful guidance on the Coeliac UK website. Coeliac UK Prescribing Guidelines September 2013

NHS Forth Valley gluten free formulary limits prescribable products to those which are classed as 'staple foods'. Pizza bases are no longer considered a staple food and have, therefore, been removed from the food list. Gluten free pizza bases are now more widely available from supermarkets or may be made using the gluten free flour available on prescription.

This list is intended as a reference document and Forth Valley Health Board endeavours to ensure that the information including both product and delivery details in this list is correct at time of issue. Forth Valley Health Board does not warrant the accuracy and completeness of the material in the list.

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NHS
Forth Valley

Gluten Free Food Prescribable Product List
September 2020

This lists the gluten free products that are available on prescription in NHS Forth Valley. Every month you can select a number of units of gluten free food from the list. Please see the table below for your monthly number of units.
This list is updated annually.
It is available online at:

www.nhsforthvalley.com/health-services/az-of-services/gluten-free-food-

The number of units per month

1-3 years	10
4-6 years	11
7-10 years	13
11-14 years	15
15-18 years	18
Male 19-59 years	18
Male 60-74 years	16
Male 75+ years	14
Female 19-74 years	14
Female 75+ years	12
Breastfeeding	Add 4
3rd trimester pregnancy	Add 1

Below is the number of units represented by the gluten free food item

Less than 400g bread	½
400 - 599g bread	1
600g or more of bread	1 ½
500g bread mix or flour mix	2
150 - 250g rolls/baguettes	½
251 - 400g rolls/ baguettes	1
Less than 199g savoury biscuits/crackers	½
200g or more of savoury biscuits/crackers	1
250g pasta	1
251 - 499g pasta	1 ½
500g or more of pasta	2
100 - 170g xanthan gum	1
500g oats or 300g cereal	1½

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BREAD & ROLLS		
JUST – (ALL JUST BREAD IS FRESH)		
Good White Bread 380g x 6	(PIP Code 845-3821)	3
White Sandwich Bread 600g x 6	(PIP Code 845-3813)	9
Good White Rolls 260g (4x65g) x 6	(PIP Code 845-3839)	6

JUST products are delivered and distributed by Alliance without any administrative or delivery charges.

- **Fresh Loaves and Rolls are supplied in cases of 6**
- **Delivery cost is included in the cost of each case**
- **Minimum order is one case per delivery**
- **Place order by 2pm on Monday for delivery by Thursday**

GENIUS (ALL GENIUS BREAD IS FRESH)		
Soft Brown Sandwich Loaf Sliced 535g x6	(PIP Code 379-8550)	6
Soft White Sandwich Loaf Sliced 535g x6	(PIP Code 379-8568)	6
Seeded Brown Farmhouse Loaf Sliced 535g x6	(PIP Code 403-8345)	6

Genius products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges.
The pharmacy needs to place Genius Bread orders as follows:

- **Before 2.00 pm Monday –delivered on Thursday**
- **Before 2.00 pm Tuesday –delivered on Friday**
- **Before 2.00 pm Thursday – delivery on Tuesday**
- **Before 9.00 pm Sunday – delivery on Wednesday**

Please note as these are fresh products they must be collected on time and frozen to preserve those products not for immediate use.

GLUTAFIN		
Gluten Free White Loaf – Sliced 300g	(PIP Code: 090-4268)	½
Gluten Free Fibre Loaf – Sliced 300g	(PIP Code: 237-7356)	½
Gluten Free White Rolls (4 pack) 200g	(PIP Code: 344-3645)	½
Gluten Free Part- Baked Baguettes (2 pack) 350g	(PIP Code: 224-0117)	1
Gluten Free Part- Baked Fibre Rolls (4 pack) 200g	(PIP Code: 344-3652)	½
Gluten Free Part- Baked White Rolls (4 pack) 200g	(PIP Code: 344-2753)	½
Gluten Free Part- Baked Long White Rolls (2 pack) 150g	(PIP Code: 344-3637)	½
Gluten Free Select Fibre Loaf – Sliced 400g	(PIP Code: 054-6101)	1
Gluten Free Select Seeded Loaf – Sliced 400g	(PIP Code: 308-9364)	1
Gluten Free Select White Loaf – Sliced 400g	(PIP Code: 054-6093)	1
Gluten Free Select **Fresh** Brown Loaf 400g x8	(PIP Code: 330-6800)	8
Gluten Free Select **Fresh** White Loaf 400g x8	(PIP Code: 290-6840)	8
Gluten Free Select **Fresh** Seeded Loaf – Sliced 400g x8	(PIP Code: 402-3685)	8

Glutafin (Dr Schar) products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges.
Glutafin fresh bread orders/ delivery:

- **Fresh Loaves are supplied in cases of 8**
- **Delivery of fresh brown and seeded bread – place the order before 2pm on Friday to be delivered on Wednesday**
- **Delivery of white bread – place the order before 10am on Tuesday to be delivered Friday or order before 2pm on Friday to be delivered Wednesday**

Please note as these are fresh products they must be collected on time and frozen to preserve those products not for immediate use.

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BREAD & ROLLS CONT...

JUVELA		
Gluten Free Fibre Loaf – Sliced 400g	(PIP Code: 074-8632)	1
Gluten Free Fibre Loaf – Unsliced 400g	(PIP Code: 010-1675)	1
Gluten Free White Loaf – Sliced 400g	(PIP Code: 074-8590)	1
Gluten Free White Loaf – Unsliced 400g	(PIP Code: 031-4781)	1
Gluten Free Part-baked Fibre Loaf unsliced 400g	(PIP Code: 273-6890)	1
Gluten Free Part-baked White Loaf unsliced 400g	(PIP Code: 273-6882)	1
Gluten Free Fibre Rolls (5 pack - each roll 85g) 425g	(PIP Code: 080-3668)	1
Part-baked Fibre Rolls (5 pack - each roll 75g) 375g	(PIP Code: 262-9020)	1
Part-baked White Rolls (5 pack - each roll 75g) 375g	(PIP Code: 243-7267)	1
White Rolls (5 pack - each roll 85g) 425g	(PIP Code: 010-5916)	1
Gluten Free **Fresh** Fibre Sliced Loaf 400g x8	(PIP Code: 339-9789)	8
Gluten Free **Fresh** White Loaf – Sliced 400g x8	(PIP Code: 322-0217)	8
Fresh White Rolls (5 pack - each roll 85g) 425g x8	(PIP Code 355-8871)	8
Fresh Fibre Rolls (5 pack - each roll 85g) 425g x8	(PIP Code 355-6800)	8
Mixed Case Fresh White (20x85g rolls + 4x400g loaves sliced)	(PIP Code: 836-4259)	8
Mixed Case Fresh Fibre (20x85g rolls + 4x400g loaves sliced)	(PIP Code: 836-4242)	8
Mixed Case Fresh Loaves (4x400g fibre + 4x400g white)	(PIP Code: 839-2821)	8
Mixed Case Fresh Rolls (20x85g rolls fibre + 20x85g rolls white)	(PIP Code: 839-2839)	8
Mixed Case Fresh Loaves and Rolls (20x85g fibre rolls + 4x400g white loaves)	(PIP Code: 839-2847)	8
Mixed Case Fresh Loaves and Rolls (20x85g white rolls + 4x400g fibre loaves)	(PIP Code: 839-2730)	8

Juvela products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges
Juvela fresh bread/ rolls orders/ delivery:

- **Both Fresh Loaves and Rolls are supplied in cases of 8.**
- **You can order any combination of both fresh bread & rolls i.e. 4 packs fresh fibre rolls & 4 packs of fresh white loaves (use PIP code for individual product).**

The pharmacy needs to place orders as follows:

- **Orders received by 10am on Monday will be delivered on Wednesday**
- **Orders received by 10am on Tuesday will be delivered on Thursday**
- **Orders received by 10am on Wednesday will be delivered on Friday**
- **Orders received by 10am on Friday will be delivered on Tuesday**

Mixed cases and rolls will be delivered on a Friday only.

Please note as these are fresh products they must be collected on time and frozen to preserve those products not for immediate use.

WARBURTONS (ALL WARBURTONS BREAD IS FRESH)		
Gluten Free Sliced Brown Loaf 400g x4	(PIP Code: 368-5278)	4
Gluten Free Sliced White Loaf 400g x4	(PIP Code: 368-5260)	4
Gluten Free Brown Rolls (3 rolls per pack) 220g x4	(PIP Code: 368-5294)	2
Gluten Free White Rolls (3 rolls per pack) 220g x4	(PIP Code: 368-5286)	2

Warburtons have no handling or distribution costs if ordered through AAH or [redacted] Healthcare Distribution Ltd.

- **Both Fresh Loaves and Rolls are supplied in minimum cases of 4.**
- **Products ordered by 5pm on Thursdays are delivered to pharmacies on Wednesdays**

Please note as these are fresh products they must be collected on time and frozen to preserve those products not for immediate use.

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HOME BAKING		
GLUTAFIN		
Gluten Free Bread Mix 500g	(PIP Code: 298-8418) ■	2
Gluten Free Fibre Bread Mix 500g	(PIP Code: 298-8426) ■	2
Gluten Free Multipurpose Fibre Mix 500g	(PIP Code: 231-2973)	2
Gluten Free Multipurpose White Mix 500g	(PIP Code: 231-2981)	2
Gluten Free Select Bread Mix 500g	(PIP Code: 274-4951)	2
Gluten Free Select Fibre Bread Mix 500g	(PIP Code: 297-9912)	2
Gluten Free Select Multipurpose Fibre Mix 500g	(PIP Code: 004-5591)	2
Gluten Free Select Multipurpose White Mix 500g	(PIP Code: 004-5187)	2
Glutafin (Dr Schar) products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges.		
INNOVATIVE SOLUTIONS (PURE)		
Pure Brown [redacted] Flour 500g	(PIP Code: 325-7912)	2
Pure Tapioca Starch (Flour) 500g	(PIP Code: 325-7946)	2
Pure White [redacted] Flour 500g	(PIP Code: 325-7904)	2
Pure Brown Teff Flour 1kg	(PIP code: 343-1467)	4
Pure White Teff Flour 1kg	(PIP Code: 343-1483)	4
JUVELA		
Fibre Mix 500g	(PIP Code: 023-6042)	2
Harvest White Mix 500g	(PIP Code: 247-7875)	2
White Mix 500g	(PIP Code: 035-2161)	2
Juvela products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges		
BAKING AIDS		
INNOVATIVE SOLUTIONS		
Xanthan Gum 100g	(PIP Code: 282-8572)	1

BREAKFAST CEREAL		
GLUTAFIN		
Gluten-free Cornflakes 375g	(PIP Code: 381-3748)	1 ½
Glutafin (Dr Schar) products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges.		
JUVELA		
Corn Flakes 375g	(PIP Code 388-2990)	1 ½
Crispy [redacted] 375g	(PIP Code 388-2982)	1 ½
Gluten Free Fibre Flakes 300g	(PIP Code 371-1660)	1 ½
Gluten Free Flakes 300g	(PIP Code 371-1652)	1 ½
Pure Oats 500g	(PIP Code 371-1678)	1 ½
Juvela products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges.		

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PASTA		
GLUTAFIN		
Fusilli (Spirals) 500g	(PIP Code: 211-5178)	2
Penne 500g	(PIP Code: 211-5152)	2
Spaghetti 500g	(PIP Code: 211-5160)	2
Fibre Fusilli (Spirals) 500g	(PIP Code: 386-2646)	2
Glutafin (Dr Schar) products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges.		
JUVELA		
Fibre Penne 500g	(PIP Code: 332-8010)	2
Fusilli (Spirals) 500g	(PIP Code: 280-7980)	2
Lasagne Sheets 250g	(PIP Code: 280-7972)	1
Macaroni 500g	(PIP Code: 280-8004)	2
Spaghetti 500g	(PIP Code: 280-7998)	2
Tagliatelle 250g	(PIP Code: 319-3497)	1
Juvela products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges		
RIZOPIA		
ORGANIC BROWN [redacted] PASTA		
Fusilli 500g	(PIP Code: 340-0074)	2
Lasagne 375g	(PIP Code: 340-0108)	1 ½
Penne 500g	(PIP Code: 340-0082)	2
Spaghetti 500g	(PIP Code: 340-0090)	2
Rizopia products are distributed by AAH Pharmaceuticals, Alliance Healthcare Distribution Ltd, and [redacted] Healthcare Distribution Ltd and are distributed without any administrative or delivery charges.		

CRACKERS & CRISPBREAD		
GLUTAFIN		
Crackers 200g	(PIP Code: 009-3302)	1
Crispbread 150g	(PIP Code: 338-4443) ■	½
Mini Crackers 175g	(PIP Code: 353-5515)	½
Glutafin (Dr Schar) products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges.		
JUVELA		
Crispbread 200g	(PIP Code: 236-6136)	1
Savoury Biscuits 150g	(PIP Code: 310-7893)	½
Juvela products are distributed by Alliance Healthcare Distribution Ltd and are distributed without any administrative or delivery charges.		

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Gluten-Free Products – Manufacturers

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DR SCHAR UK Ltd
Glutafin,
Dr Schar,
401 Faraday Street,
Birchwood Park,
Risley
Warrington, WA3 6GA
Tel: 0800 988 2470
Email: glutenfree@glutafin.co.uk
www.glutafin.co.uk
Tel: ordering 0844 854 4998,
http://www.glutafin.co.uk/healthcare-professionals/glutafin-fresh-bread-ordering/
Brands- GLUTAFIN

GENIUS GLUTEN FREE
Genius Foods
22 Northumberland Street South
West Lane
Edinburgh EH3 6JD
Tel: 0845 874 4000
www.geniusglutenfree.com
Brands – GENIUS

INNOVATIVE SOLUTIONS UK LTD
Mayfield Centre
Mayfield Street
Rochdale OL16 2UZ
Tel: 01706 746 713 Fax: 01706 341 357
Email: info@pureglutenfree.co.uk
www.pureglutenfree.co.uk
Brands – INNOVATIVE SOLUTIONS, PURE

PGR HEALTH FOODS LTD
PO Box 214,
Hertford SG14 2ZX
Tel: 01992 581715
info@pgrhealthfoods.co.uk
www.rizopia.co.uk
Brands – RIZOPIA

WARBURTONS
Hereford House
Hereford Street
[redacted]
BL1 8JB
Tel: 0800 243684
www.newburnbakehouse.com
Brands- WARBURTONS

HERO UK LTD trading as JUVELA
19 De Havilland Drive
Liverpool L24 8RN
Tel: 0800 783 1992
Email: info@juvela.co.uk
www.juvela.co.uk
Brands – JUVELA GLUTEN FREE

JUST: Gluten Free Bakery
Block 21, Unit 7
Motherwell Food Park
ML4 3NP
Tel: 01698 841559
Info: info@justglutenfree.co.uk
Order by using all the email addresses below:
admin@justglutenfree.co.uk
Ronnie@justglutenfree.co.uk
ola@justglutenfree.co.uk

MAIN WHOLESALERS

ALLIANCE HEALTHCARE DISTRIBUTION LTD
43 [redacted] Lane
Chessington
Surrey
KT9 1SN
Tel: 020 8391 2323
Pharmacy Services Tel: 020 3044 8021
Gluten Free Bread Team:0844 854 4998
information@alliance-healthcare.co.uk

AAH PHARMACEUTICALS
204 Polmadie Road
Glasgow
G42 0PH
Tel: 0141 423 5888
Order line Tel: 0844 561 8899
enquiries@aah.co.uk

PHOENIX HEALTHCARE DISTRIBUTION LTD
Rivington Road
[redacted] Industrial Estate
Runcorn
Cheshire WA7 3DJ
Tel: 01928 750500
Fax: 01928 750750
www.myp-i-n.co.uk

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Gluten Free Prescribable Product List

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NHS Forth Valley

supplementary kardex

Version 01

METHADONE	Y	N
SUBOXONE	Y	N

ORDER CODE 04

Side A

Start Date: ___/___/___

Prescription Sheet No: 1 of 1

Kardex Re-written Date: 14/9/21

HMP Cornton Vale.

REGULAR PRESCRIPTIONS

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Initials	Dis-continued Date/Initials	MEDICATION FORM	Dose	Route	Times of Administration: AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Initials
A	14/9/21	14/6/22				PAROXETINE	30mg	O	✓				W	Mane	
B	14/9/21	14/6/22				PROPRANOLOL MR.	80mg	O	✓				W	Mane.	
C	14/9/21	14/6/22		11/11/21		QUETIAPINE	75mg	O	✓				W	Mane	
D	14/9/21	14/6/22		11/11/21		QUETIAPINE	100mg	O				✓	W	Mane	
E	14/9/21	14/6/22		8/10/21		AMITRIPTYLINE	50mg	O				✓	W	Mane.	
F	14/9/21	14/12/21				LYMECYCLINE	408mg	O	✓				W	Mane.	
G	14/9/21	14/12/21		7/10/21		BENZOYL PEROXIDE 5%	1APP	TOP	✓			✓	M	Mane	
H	8/10/21	30/9/22				AMITRIPTYLINE	75mg	O				✓	W	C	
I	1/11/21	1/11/22				QUETIAPINE	100mg	O	✓			✓	W		
J	4/11/21	4/11/22		12/11/21		LACTULOSE	2 SACHETS	O	✓	✓		✓	M		
K	[illegible]	4/11/22													
L	4/11/21	4/11/22		24/11/21		MEBEVERINE	135mg	O	✓	✓	✓		W		
M	24/11/21	24/11/22				PEPPERMINT CAPSULES	1+2 CAPS	O	✓	✓	✓		W		
N															
O															
P															

NAME: Georgina Smith SPIN: 131344 DOB: 4/12/91 LOCATION: P. ALLERGIES: Lactose/Gluten intolerant

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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iGPR Report

iGPR Report

Page 929 of 1734

NHS Confidential: Personal data (Grade 2 Value)

NHS Forth Valley

Version 01

ORDER CODE 06

Side B

Start Date: ____/____/____

Kardex Re-

Prescription Sheet No: ____ of ____

written Date: ____/____/____

"AS REQUIRED" PRESCRIPTION

HMP CVAC

	Start Date	Review Date	Stop Date	Drugs (including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Date	Initls
1	14/9/21	14/9/22		CETRABEN	1APP	TOP	PRN	M	Elaine				
2	~~14/9/21~~	~~14/9/22~~ 16/12/22		CELECOXIB.	100mg	O	BD.	M	Elaine				
3	16/9/21	16/12/22		BISOPROLOL 5mg TABS	1-2 tab	O	DAILY AT NIGHT	M	[illegible]				
4	~~16/9/21~~	~~16/2/22~~ 8/10/21		~~MELOXICAM WITH FOOD~~	~~7.5mg~~	~~O~~	~~ONCE DAILY~~	~~M~~	~~[illegible]~~				
5	~~16/9/21~~	~~16/2/22~~		~~CARBEAL SHAMPOO~~	~~1APP~~	~~TOP~~	~~AS DIRECTED~~	~~M~~	~~[illegible]~~			26/10/21	M
6	8/10/21	30/9/22		BENZOYL PEROXIDE 2.5%	1APP	TOP	AS DIRECTED	M	[illegible]				
7	~~8/10/21~~	~~30/9/22~~		~~MELOXICAM~~	~~15mg~~	~~O~~	~~ONCE DAILY~~	~~M~~	~~[illegible]~~				
8	26/10/21	26/10/22		T-GEL SHAMPOO	1APP	TOP	3x WEEKLY	M	Elaine				
9	11/11/21	30/11/22		LAX 100	2SACHETS	O	TDS	M	[illegible]				
10													
11													
12													
13													
14													

Once Only Prescriptions

	Admin Data	Admin Time	DRUGS (including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1										
2										
3										

NAME: Georgina Smith [redacted] 131344 DOB: 4/12/91 LOCATION: P. ALLERGIES: Lactose/gluten intolerant

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

ING1919

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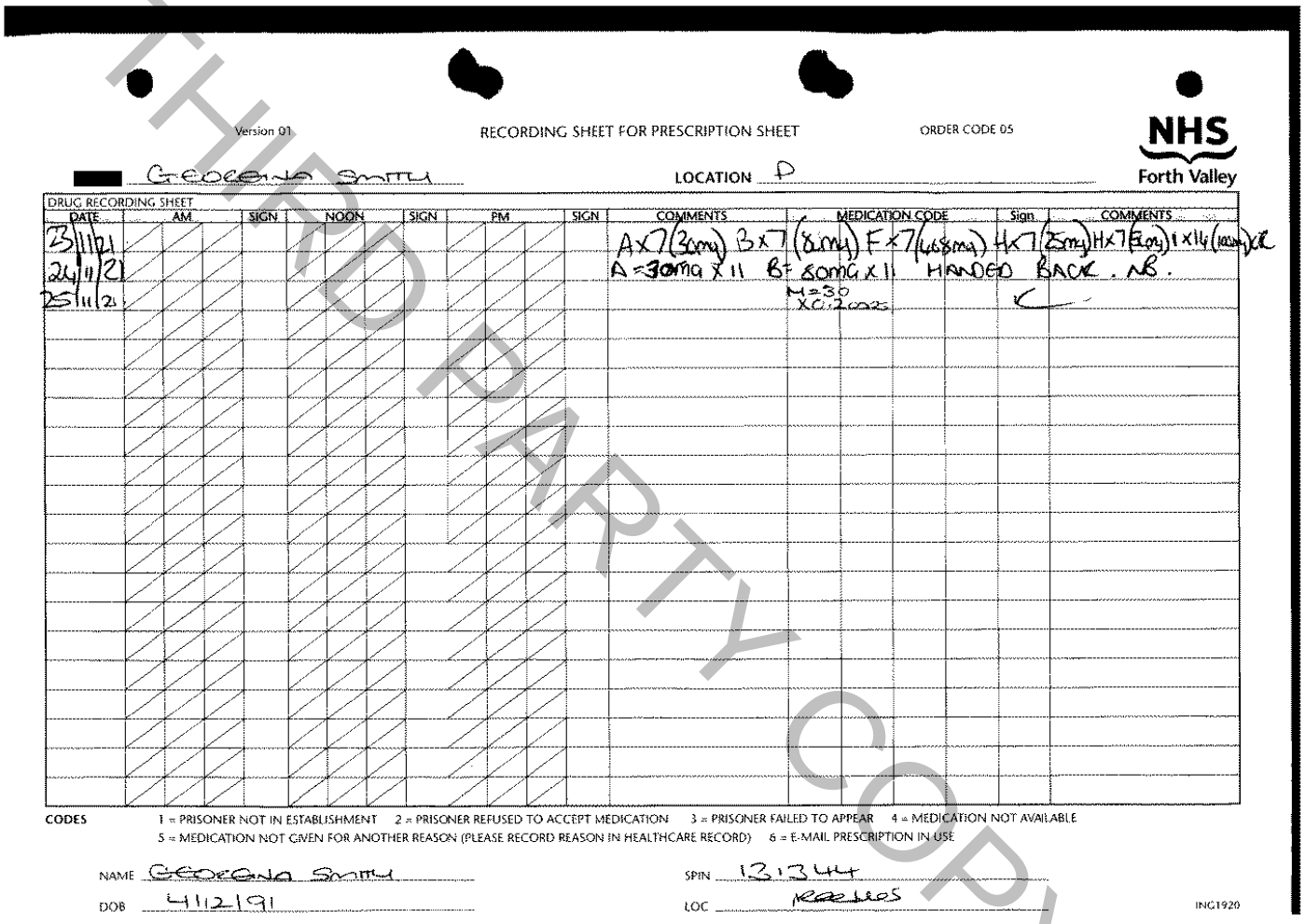

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

[redacted] Georgina Smith

LOCATION D

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENTS
23/11/21							A x 7 (30mg) B x 7 (60mg) F x 7 (45mg) H x 7 (25mg) H x 7 (50mg) I x 14 (100mg) x2			
24/11/21							A = 30mg x 11 B = 60mg x 11 HANDED BACK. NB.			
25/11/21								H=30 XC.2025	K	

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
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NAME Georgina Smith SPIN 131344

DOB 4/1/2191 LOC [redacted]

ING1920

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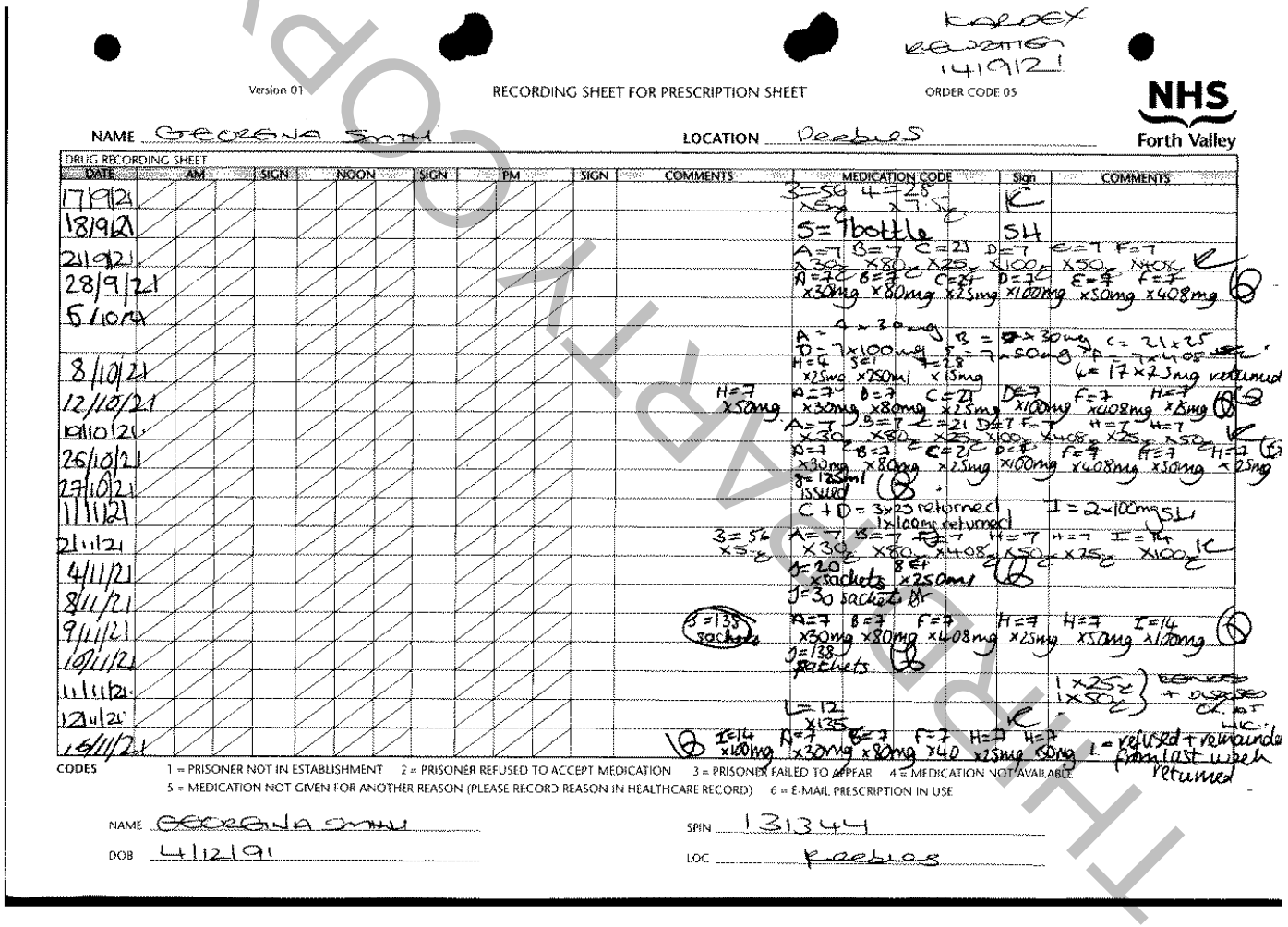
iGPR Report

iGPR Report

COPY



Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME Georgina Smith

LOCATION Peebles

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS
17/9/21							
18/9/21							
21/9/21							
28/9/21							
5/10/21							
8/10/21							
12/10/21							
25/10/21							
26/10/21							
27/10/21							
1/11/21							
2/11/21							
4/11/21							
8/11/21							
9/11/21							
10/11/21							
11/11/21							
12/11/21							
16/11/21							

MEDICATION CODE	Sign	COMMENTS
3=56 4=28 x56 x7.5	K	
5=1bottle	SH	
A=7 B=7 C=21 D=7 E=7 F=7 x30 x80 x25 x100 x50 x408		
A=7 B=7 C=21 D=7 E=7 F=7 x30mg x80mg x25mg x100mg x50mg x408mg		
A=7 x30mg B=7 x30mg C=21 x25 D=7 x100mg E=7 x50mg F=7 x408mg H=4 x25mg x250ml x15mg		4=17 x75mg returned
A=7 B=7 C=21 D=7 F=7 H=7 x30mg x80mg x25mg x100mg x408mg x15mg		
A=7 B=7 C=21 D=7 F=7 H=7 x30 x80 x25 x100 x408 x25 x50		
D=7 B=7 C=21 D=7 F=7 H=7 H=7 x30mg x80mg x25mg x100mg x408mg x50mg x25mg		
B=125ml ISSUED		
C+D = 3x25 returned 1x100mg returned		I = 2x100mg SL
A=7 B=7 F=7 H=7 H=7 I=14 x30 x80 x408 x50 x25 x100		
J=20 sachets x250ml 8 ef		
J=30 sachets BF		
A=7 B=7 F=7 H=7 H=7 I=14 x30mg x80mg x408mg x25mg x50mg x100mg		
J=138 sachets		
		1x25g 1x50g returned + disposed of
L=12 x135	K	
A=7 B=7 F=7 H=7 H=7 I=14 x30mg x80mg x40 x25mg 50mg x100mg		1 = refused + remainder from last week returned

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
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NAME Georgina Smith SPIN 131344

DOB 4/12/91 LOC Peebles

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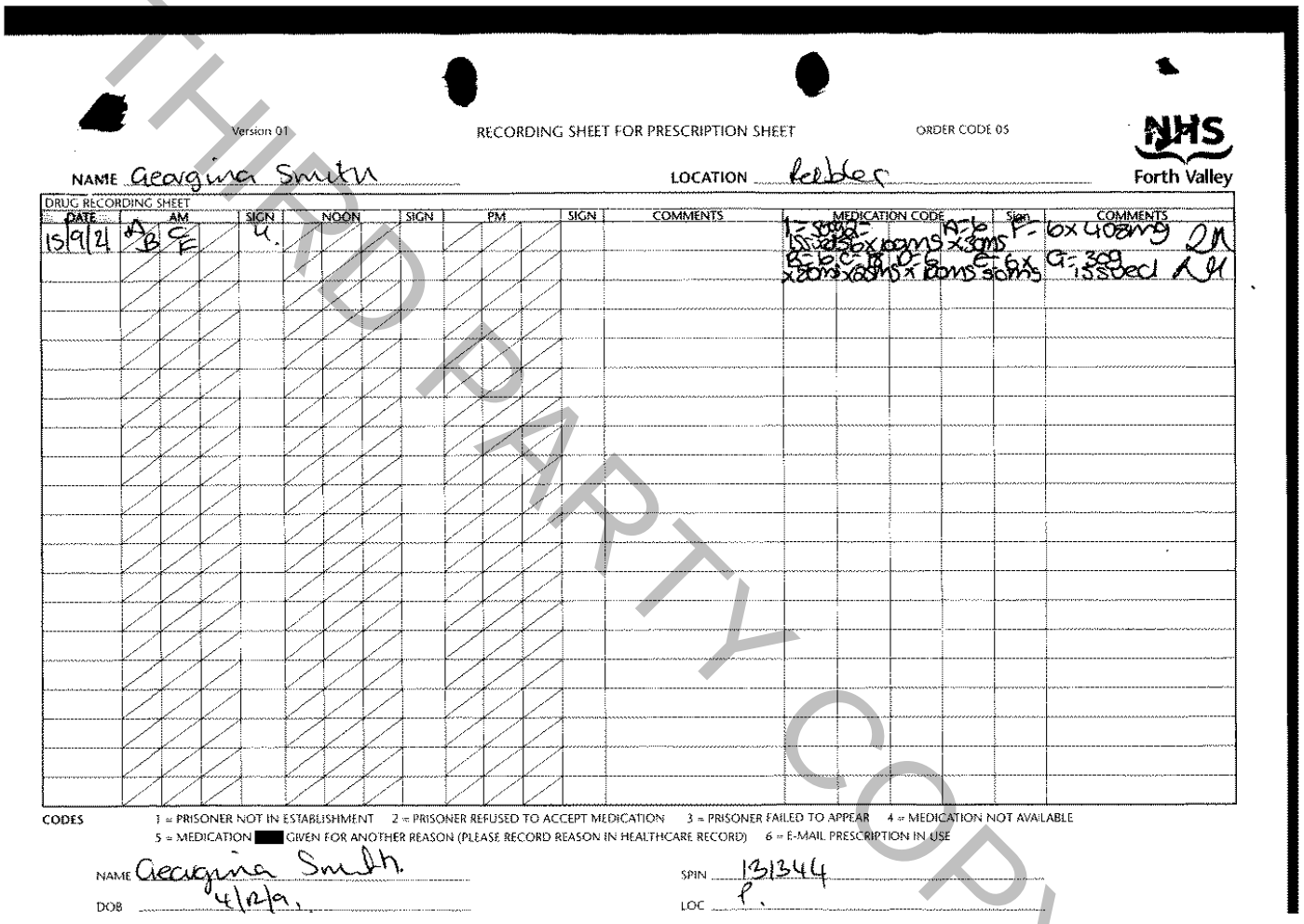

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME Georgina Smith

LOCATION Kebbes

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENTS
15/9/24	A B C E							A-1x 30mg-15x30mg x30ms x3ms F- 6x 40mg B-1x 10mg-15x10ms x30ms C- 6x 10ms 30ms G- 30g 15 used		6x 40mg

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
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NAME Georgina Smith

DOB 4/12/9.

SPIN 131344

LOC P.

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iGPR Report

iGPR Report

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME

LOCATION

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENTS
26-8-21	JK LO				MN		P= given in cell RC.			P.O, J = O
27/8/21	JK LO				MN		J+O = 4			
28/8/21	JK LO				MN					
29/8/21	JK LO				MN					
30.08.21	JK LO				MN					
31-8-21	JK LO				MN					
1/9/21	JK LO				MN					
2/9/21	JK LO				MN					
3/9/21	JK LO				MN					
4/9/21	JK LO				MN					
5/9/21	JK LO				MN					
6/9/21	JK LO				MN					
7/9/21	JK LO				MN		J+O = 4			
8/9/21	JK LO				MN		K = 4			
9/9/21	JK LO				MN 1			1 X 500g		
10/9/21	JK LO				MN 2					
11.9.21	JK LO 2				MN 2					
12/9/21	JK LO				MN 2					
13/9/21	JK LO				MN					
14/9/21	JK LO				DS					

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NAME Georgina Smith

DOB 4/12/91

SPIN 131344

LOC ROSS

ING1920

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Filename: igprda202606181515480.pdf
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Pages:

NHS Confidential: Personal data about a patient

NHS Forth Valley
Haematology

NHS
Forth Valley

Patient	Patient Ref. Number
SMITH, GEORGINA HMP C/VALE	STI1175622
	Date Of Birth 04/12/1991 Sex F

Doctor/Location	Consultant/GP	Date/Time Specimen Received
HMP & YOI Cornton Vale Prison Medical Officer	Dr [redacted] Sayers	23/11/2021 16:05

Clinical Data: No Clinical Details Given

Report From Immunology NHS Greater Glasgow & Clyde

Tissue Transglutaminase A/B 0.4 U/ml (0.0 - 7.0)

(a) Normal= <= 7.0,Equivocal= 7.0 -10.0 Positive = >10.0

If screening for coeliac disease, this result is only valid if the person was eating gluten at least twice a day for previous 6 weeks. If known to have coeliac disease, this negative result suggests adherence to gluten free diet.

Haemoglobin A1c %	Rheumatoid Factor	Rheumaton Titre	Monospot	
Vitamin B12 ng/L	**Serum Folate ug/L**	**Red Cell Folate ug/L**	**Serum Ferritin ug/L**	**Intrinsic Factor Antibody**

Investigation	Laboratory Number	Collection Date	Collection Time	Report Date/Time
Immunology	013643	23/11/2021	09:40	**29/11/2021 12:58**

Reference Ranges For Vitamin B12, Serum Folate, Red Cell Folate and Ferritin

		MALE	FEMALE
Vitamin B12 (ng /L)		180 - 900	180 - 900
Serum Folate (ug/L)		2.1 - 14.0	2.1 - 14.0
Red Cell Folate (ug/L)		160 - 640	160 - 640
Serum Ferritin (ug/L)	Age 0-45 years	36 - 225	10 - 65
Serum Ferritin (ug/L)	Age >45 years	42 - 262	24 - 155

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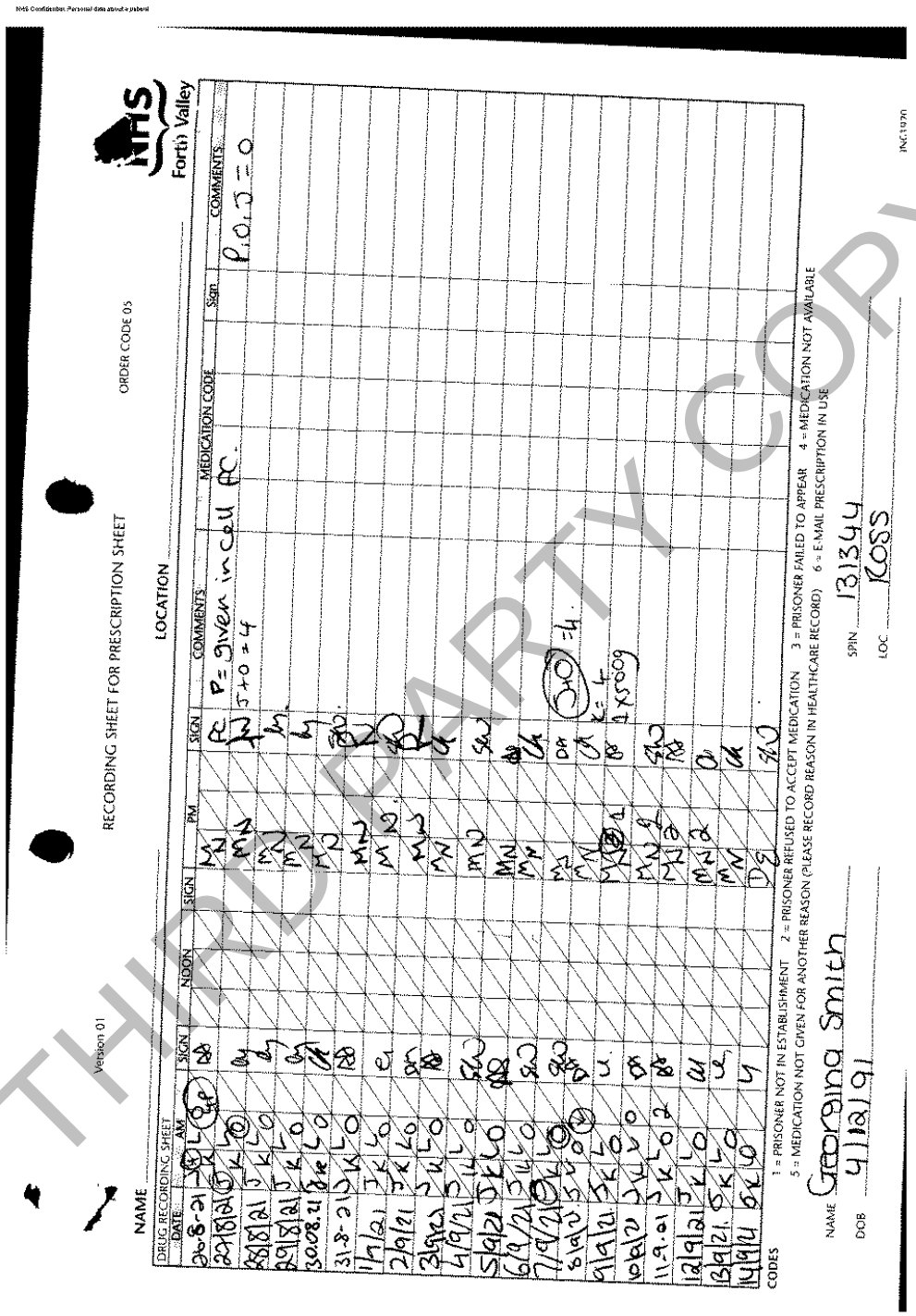

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NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

ORDER CODE 05

NAME Georgina Smith

LOCATION Kelpies

DRUG RECORDING SHEET

DATE	AM SIGN	NOON SIGN	PM SIGN	COMMENTS	MEDICATION CODE	Sig.	COMMENTS
15/9/21							

CODES

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NAME Georgina Smith

DOB

SPR 1313144

LOC P

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Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

NHS Forth Valley
Haematology

NHS
Forth Valley

Patient	Patient Ref. Number
SMITH, GEORGINA HMP C/VALE	STI1175622
	Date Of Birth 04/12/1991 Sex F

Doctor/Location	Consultant/GP	Date/Time Specimen Received
HMP & YOI Cornton Vale Prison Medical Officer	Dr [redacted] Sayers	23/11/2021 16:05

Clinical Data: No Clinical Details Given

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Vitamin B12 ng/L	**Serum Folate ug/L**	**Red Cell Folate ug/L**	**Serum Ferritin ug/L**	**Intrinsic Factor Antibody**

Investigation	Laboratory Number	Collection Date	Collection Time	Report Date/Time
Immunology	013643	23/11/2021	09:40	**29/11/2021 12:58**

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Serum Ferritin (ug/L)	Age 0-45 years	36 - 225	10 - 65
Serum Ferritin (ug/L)	Age >45 years	42 - 262	24 - 155

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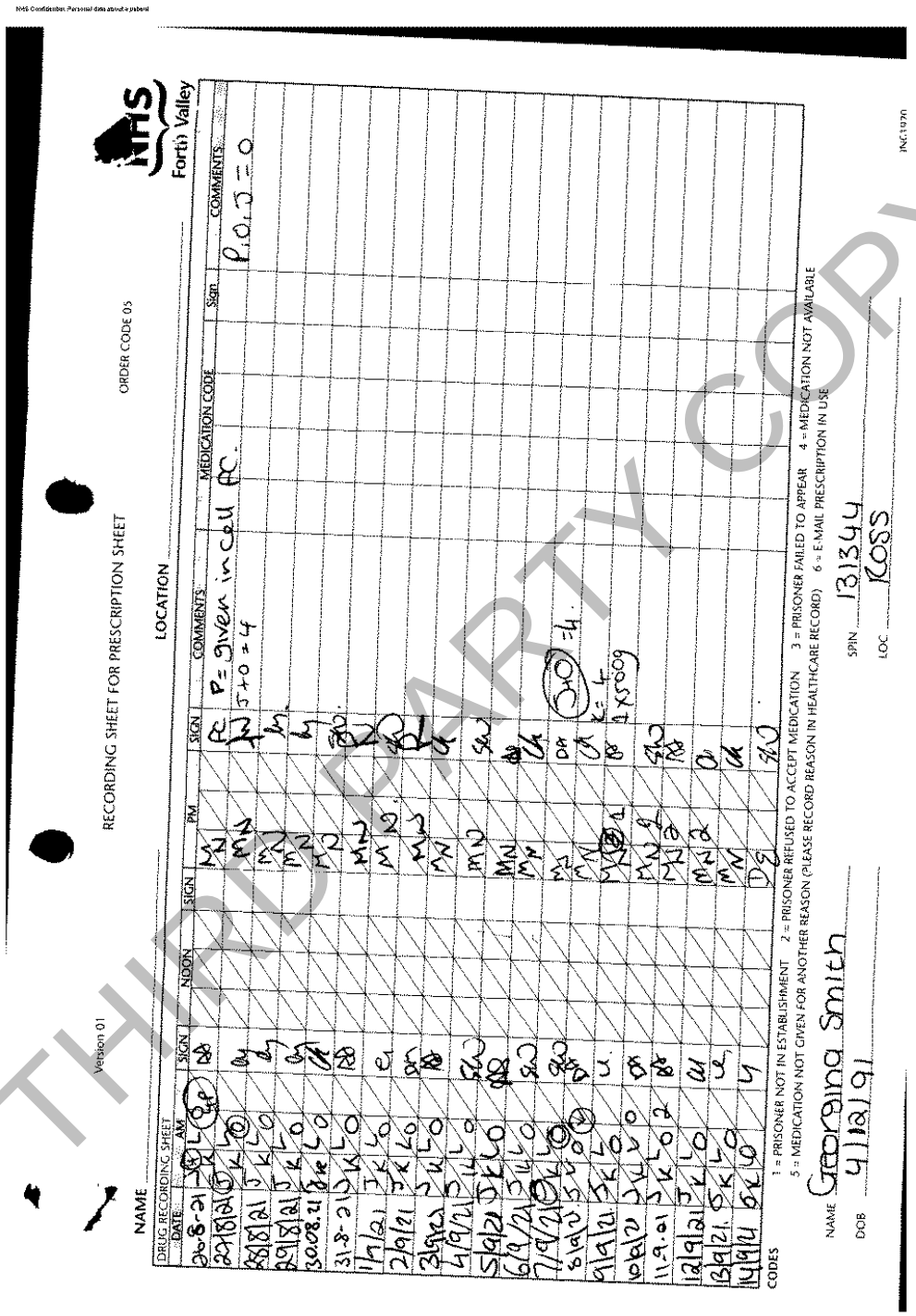

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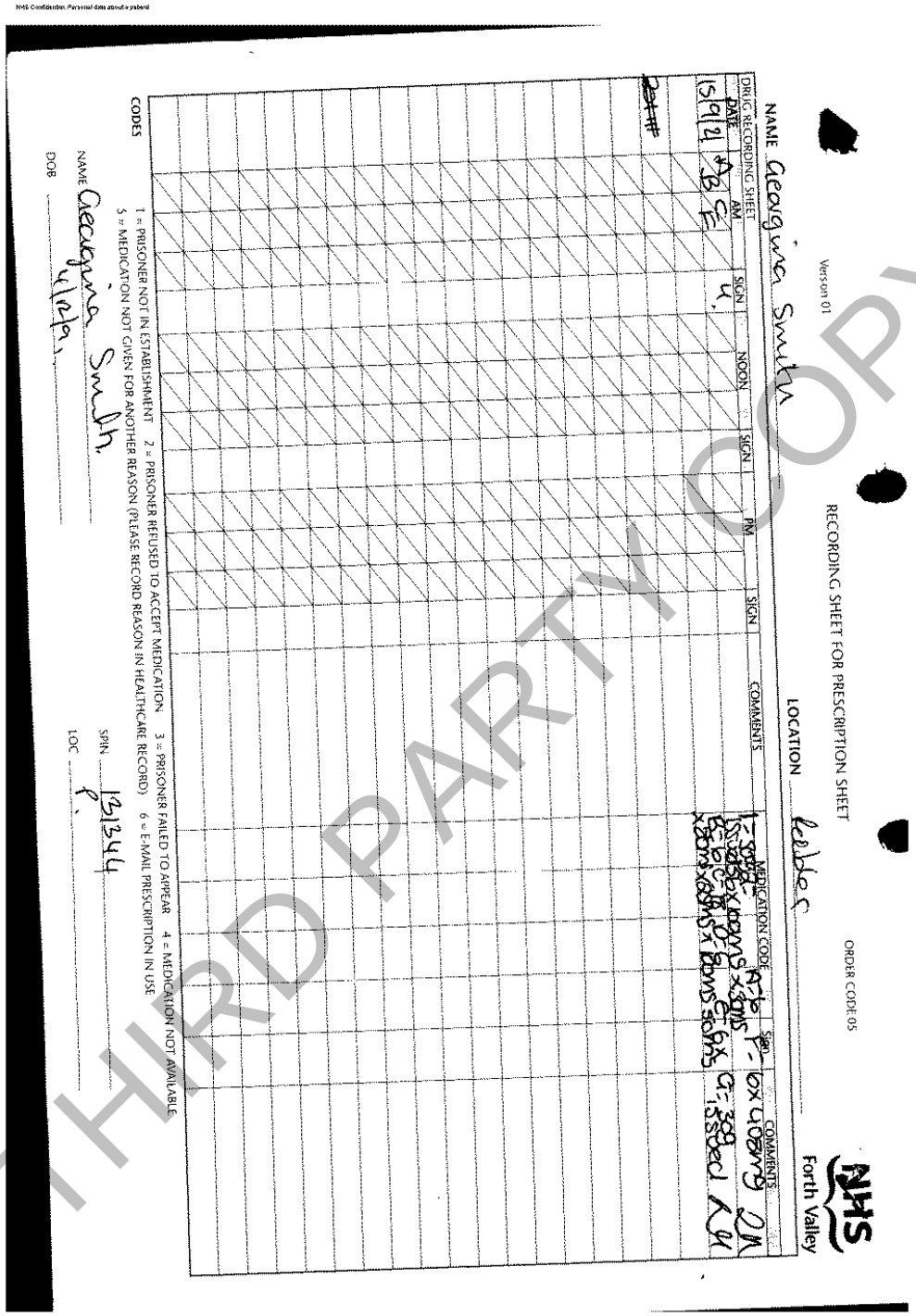

NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

ORDER CODE 05

NAME Georgina Smith

LOCATION Kelpies

DRUG RECORDING SHEET

CODES

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NAME Georgina Smith

DOB

SPN 1313144

LOC P

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Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

GPFR JM716260A: Miss Georgina Smith

30 NOV 2021

Independent Assessment Services
Delivered by Atos

31751 000941 0001 E 30800 H2

Duty Doctor
Ayrshire & [redacted] Community Health Care
Nhs Trust
Health Clinic 30800
2 Kirkland Road
[redacted]BIRNIE
Ayrshire
KA25 6HS

Our address: Independent Assessment Services
c/o DWP PIP(1)
Mail Handling Site A
Wolverhampton
WV98 1AA

Telephone: 0118 914 9400

Our Ref: JM716260A

Date: 23rd November 2021

PERSONAL INDEPENDENCE PAYMENT

Request for Further Medical Evidence

Dear Doctor,
I am writing to you about a patient who has made a claim for Personal Independence Payment:

Patient's name: **Miss Georgina Smith**
Date of birth: **04/12/1991**
Address: **H M Prison, Cornton Vale, STIRLING, FK9 5NU** – address held - 65 Newhouse Drive Kilbirnie KA25 6ER

Independent Assessment Services is contracted to carry out assessments for Personal Independence Payment by the Department for Work and Pensions. It would be very helpful in assessing your patient's benefit claim if you could complete the enclosed factual report form. **Your patient (or a person appointed to handle their affairs due to the claimant's mental incapacity to do so) has given their consent for us to request this information from you.**

You should base your report on your knowledge of the patient and on her records. A special appointment is not required. Please include in your report any relevant information contained in letters or reports from hospitals or consultants. It may be helpful to your patient to enclose any relevant correspondence contained in their file, such as recent consultant letters or letters from a Community Mental Health Team. If the patient has died or recently moved to another area please still complete the report if you can.

To ensure compliance with the Rehabilitation of Offenders Act 1974 your report should not contain any reference to criminal convictions, whether spent or not, unless the information is directly relevant to your patient's condition or disability. This report is not subject to the Access to Medical Reports Act 1998. The patient does not need to [redacted] it before it is returned.

The patient may, at any stage, request a copy of this report to be sent to them by the Department for Work and Pensions. Harmful and embarrassing information should not be included in your report.

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Registered No. 01245534. VAT No. GB 232327983

OP101

Providing assessment services on behalf of Department for Work & Pensions

NHS Confidential: [redacted]

GPFR JM716260A: Miss Georgina Smith

Independent Assessment Services
Delivered by Atos

Guidance on completing section 6 is enclosed. Further information including more detailed guidance on completing your report can be found at www.dwp.gov.uk/healthcare-professional/guidance.

We enclose an invoice for you to claim a fee of £33.50. Please send your completed report and invoice together* in the enclosed business reply envelope. **Please reply within 5 working days.**

*A request for payment will only be accepted on the enclosed invoice form, which must be completed and include the GMC number.

If you have any queries regarding completion of the report or if you would like to discuss this request with our medical staff, please phone the number at the top of this letter. Thank you for your help.

Yours sincerely,

Ms [redacted] Shek (Nurse, 14I2105S)

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Registered No. 01245534, VAT No. GB 232327983

Providing assessment services on behalf of Department for Work & Pensions

NHS Confidential: Personal data about a patient

GPFR JM716260A: Miss Georgina Smith

Independent Assessment Services
Delivered by Atos

Guidance on completion of section 6

The assessment for Personal Independence Payment considers the claimant's ability to carry out a series of everyday activities as per section 6.

In this section, please provide information on the claimant's ability to carry out the relevant activities, if you are able.

Write what has been observed by yourself or another healthcare professional in relation to these listed activities. For example: self-care [redacted] unaided from a chair in surgery, no bending difficulty noted"; getting around - "walks slowly with marked right sided limp using a walking stick, not breathless or very breathless when attends surgery for routine check".

Please only include observations, not opinions.

To consider when completing the form:

Here are **examples of information** that is particularly useful to us for the following conditions.

- **Respiratory conditions** including asthma and COPD - exercise tolerance, **recorded** variability, peak flow readings (including serial readings), spirometry results, treatment and compliance - prescriptions requested regularly / when was last prescription, oral steroids and hospital admissions in last 12 months.
- **Ischaemic Heart Disease** - investigations including results of formal exercise testing, exercise tolerance, clinical findings, response to treatment including nitrates, treatment compliance, hospital admissions in last 12 months.
- **Musculoskeletal conditions - recorded** symptoms, recorded history of falls, detailed clinical findings **including range of joint movements**, treatment including planned surgical treatment with dates, response to treatment and compliance - prescriptions requested regularly / when was last prescription.
- **Mental health conditions** - documented history of [redacted] self-neglect, detailed mental state findings, history of admissions - voluntary or compulsory, regular prescriptions and last one ordered.
- **Sensory impairment** - visual and auditory acuity.

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93267936/009841/273

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Providing assessment services on behalf of Department for Work & Pensions

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5. Treatment - Current, planned, response and prognosis

Please provide details of drug and non-drug treatment and aids and appliances used (prescribed or, if known, non-prescribed). Please specify frequency of treatment and, for medication, dose as relevant.

On: Provelne 30mg daily. } for mental illness
Quetiapine 25mg in morning, 100mg at night
Propranolol 80mg in the morning.
Amitriptyline 50mg at night.

Lymecycline 408mg daily } For Skin (Acne)
Benzoyl Peroxide 5% od or bd

6. Effects of the disabling condition(s) on day to day life

If known, it would be helpful to have information on the patient's ability to:

- *Manage their health conditions and treatment*
- *Communicate*
- *Walk or move around*
- *Get somewhere on their own*
- *Make simple decisions*
- *Prepare, [redacted] and eat food*
- *Wash, bathe and use the toilet/ manage incontinence*
- *Dress and undress*

Only include information that has been confirmed by a health professional. Please state if this is not known.

Issues with social interaction, verbal ability to behave appropriately to situations with mood instability and coping skills
Self-harming, Suicide Attempt.

8302471530/1506941/4/5

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NHS Confidential: Personal data about a patient

7. Does the patient have a history of threatening or violent behaviour?

No ☐ Yes ☑ Don't know ☐ *If yes, tell us about their behaviour within the last 5 years. Use the space below at* **Part 9**

8. Could your patient travel to an assessment centre by public transport or taxi?

Yes ☑ No ☐ Don't know ☐ *If no, please tell us why. Use the space below at* **Part 9**

9. Additional information

Use this section if there was insufficient space in one of the previous boxes OR to add important relevant factual information that has not been written in the body of the report. **Do not use the section to provide an opinion.**

Poison discharge styles can become very angry without warning.

I understand that, in certain circumstances, this report will be released to my patient, their legal representative and any authority deciding an appeal in relation to their entitlement to benefit. I also understand that the only information that can be withheld is medical evidence that would be harmful to the person's health.

Your signature

Name in capitals KG HILLMAN.

Date 01/12/2024

Stamp

Dr Robert G Hillman MBChB MRCGP
Kilbirnie Medical Practice
2-4 Kirkland Road
Kilbirnie KA25 6HS
01505 683591(Tel) / 681512(Fax)
GMC 3592065 A2428-7

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3. Symptoms and variability

This is especially helpful in conditions that fluctuate. It should be based on information in the clinical record. Include both day-to-day and longer-term fluctuations. Include the frequency and duration of exacerbations. Please also specify if the condition is well controlled.

Known to suffer from emotional instab[redacted], episodes of self-harming, eating disorder (restrictive) has attempted suicide in past.

4. Relevant clinical findings

Entitlement is based on the impact of the individual's impairment or health condition(s) on their everyday life. Please provide details of examination findings related to the severity or impact of any health conditions or impairments.

Coping poorly currently, requiring CMHT, CLW & Criminal Justice Support.

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NHS Confidential: Personal data about a patient

Your GP Factual Report 411238017

Patient's name & Ref No Miss Georgina Smith JM716260A

Date when patient last seen by a health professional 25/08/21

Where and by whom Dr E J Nunn, Telephone Appointment.

Notes:

- *Please record relevant information based on your knowledge of the patient and their medical records.*
- *Please write down facts rather than opinion. We require an objective report - please only include information about symptoms that are recorded in the patient's records and information about disabling effects that you or another healthcare professional have directly observed.*
- *It may be helpful to your patient to enclose any relevant correspondence contained in their file - for example, recent consultant letters or letters from a Community Mental Health Team. Please ensure that any third party information is removed. Third party information is any sensitive information that refers to someone other than the patient - for example, the patient's family*
- *Please complete all sections as fully as possible but write "not known" if appropriate. "Not known" can be helpful.*
- *Relevant information is anything that relates to health conditions or disabilities which impact on the patient's functional ability.*

1. Disabling conditions

Please list conditions or impairments which affect the patient's functional ability.

Low mood, Anxiety,

Dyslexic - uses purple overlay ruler to read

2. History of condition(s). Include details of any relevant special investigations

Has a long history of chronic depressive symptoms, suicidality, Emotional instability, fear coping skills, background of childhood abuse and accident + cannabis use. Recently released from prison, has required support + has been struggling to adjust.

2324/7930/000941/3/5

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NHS Confidential: Personal data about a patient

GP Factual Report Invoice

To: Independent Assessment Services
c/o DWP PIP(1)
Mail Handling Site A
Wolverhampton
WV98 1AA

[redacted] **GP Factual Report**

GPFR serial no:	**411238017**
Date requested:	**23rd November 2021**
DWP ref:	**JM716260A**
Patient's name:	**Miss Georgina Smith**
Date of birth:	**04/12/1991**
GP/surgery invoice ref:	PT 19044

Payee details:

Payee name: Kilbirnie Medical Practice
Payee name to be the same as the account holder

Surgery name and address: Kilbirnie Health Centre
2-4 Kirkland Road
Kilbirnie
Ayrshire

Postcode: KA25 6HS

VAT status

☐ VAT registered: VAT no:

☑ Not VAT registered: Total amount: £33.50

NET amount:	£33.50
VAT 20%:	£6.70
Total amount	£40.20

Bank Details (Payment will be made by BACS transfer)

Sort code: 82 65 28 Account no: 60015238

I hereby claim the appropriate fee for completing the above GP factual report

Print name: Dr R G HICKMAN Tel no: 07505 683591

Signature: Date: 01/12/2021

GMC no. of the GP who completed the GPFR (must be completed): 3591965

Authorisation (ATOS USE ONLY) WBS: GB.704471.010.06 GL code: 604102

Print name: GPFR received: / /

Signature: Payment Approved: / /

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HMP YOI/LILIAS

DENTAL TREATMENT REQUEST FORM

Name: Georgina Smith

SPIN: 131344

Date of Birth: 04/12/91

Location: [redacted] house 2

EMERGENCIES WILL BE DEALT WITH AS SOON AS POSSIBLE

Please tick the box that describes your main problem

Problem	Tick One
Swollen Face	
Bleeding won't stop after tooth was removed	
Severe throbbing pain	
Broken tooth/lost filling	
New Denture or repair	✓
Check-up & scale & polish	

Other comments.....

.....

.....

Date: 20/01/23.

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Date of Birth: 04/12/91

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Please tick the box that describes your main problem

Problem	Tick One
Swollen Face	
Bleeding won't stop after tooth was removed	
Severe throbbing pain	
Broken tooth/lost filling	
New Denture or repair	✓
Check-up & scale & polish	

Other comments.....

.....

.....

Date: 20/01/23.

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Transfer of Named Patient Medication Form

Name [redacted]

SPIN 131344

Date of Transfer 15/1/23

Medication	Strength	How many was transferred.	Received and Correct
DIZOTYRE	1.5mg	7 tabs	
LEAX100 SACHETS	3.80gms x 30		(TWO WEEKS)
AMITRIPTYLINE	25mg	2 X 28 tabs	
QUETIAPINE	150mg	2 X 7 tabs	
DOXYCYCLINE	100mg	2 X 7 caps	
DIZOTYRE	1.5mg	2 X 7 tabs	

PASSED

Nurse completing form (HMP Cornton Vale) [redacted]

Date 15/1/23

Developed By: D Allan
Date: December 2018
Review Date: 7th July 2020
Reviewed By: R [redacted]
Next Review Due: 30th July 2021
Version: 2

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[redacted]

Transfer of Named Patient Medication Form

Name [redacted]

SPIN 131344

Date of Transfer 15/1/23

Medication	Strength	How many was transferred.	Received and Correct
DIZOTIVEN	1.5mg	7 tabs	
LEAX100 SACHETS	3.80x28 x30		(TWO WEEKS)
AMITRIPTYLINE	25mg	2 X 28 tabs	
QUETIAPINE	150mg	2 X Seven tabs	
DOXYCYCLINE	100mg	2 X 7 caps	
DIZOTIVEN	1.5mg	2 X 7 tabs	

PASSED

Nurse completing form (HMP Cornton Vale) [redacted]

Date 15/1/23

Developed By: D Allan
Date: December 2018
Review Date: 7th July 2020
Reviewed By: R [redacted]
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GPFR JM716260A: Miss Georgina Smith

30 NOV 2021

Independent Assessment Services
Delivered by Atos

31751 000941 0001 E 30800 H2

Duty Doctor
Ayrshire & [redacted] Community Health Care
Nhs Trust
Health Clinic 30800
2 Kirkland Road
[redacted]BIRNIE
Ayrshire
KA25 6HS

Our address: Independent Assessment Services
c/o DWP PIP(1)
Mail Handling Site A
Wolverhampton
WV98 1AA

Telephone: 0118 914 9400

Our Ref: JM716260A

Date: 23rd November 2021

PERSONAL INDEPENDENCE PAYMENT

Request for Further Medical Evidence

Dear Doctor,
I am writing to you about a patient who has made a claim for Personal Independence Payment:

Patient's name: **Miss Georgina Smith**
Date of birth: **04/12/1991**
Address: **H M Prison, Cornton Vale, STIRLING, FK9 5NU** – address held - 65 Newhouse Drive Kilbirnie KA25 6ER

Independent Assessment Services is contracted to carry out assessments for Personal Independence Payment by the Department for Work and Pensions. It would be very helpful in assessing your patient's benefit claim if you could complete the enclosed factual report form. **Your patient (or a person appointed to handle their affairs due to the claimant's mental incapacity to do so) has given their consent for us to request this information from you.**

You should base your report on your knowledge of the patient and on her records. A special appointment is not required. Please include in your report any relevant information contained in letters or reports from hospitals or consultants. It may be helpful to your patient to enclose any relevant correspondence contained in their file, such as recent consultant letters or letters from a Community Mental Health Team. If the patient has died or recently moved to another area please still complete the report if you can.

To ensure compliance with the Rehabilitation of Offenders Act 1974 your report should not contain any reference to criminal convictions, whether spent or not, unless the information is directly relevant to your patient's condition or disability. This report is not subject to the Access to Medical Reports Act 1998. The patient does not need to [redacted] it before it is returned.

The patient may, at any stage, request a copy of this report to be sent to them by the Department for Work and Pensions. Harmful and embarrassing information should not be included in your report.

P0621930/0b2843/1/5

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Providing assessment services on behalf of Department for Work & Pensions

NHS Confidential: [redacted]

GPFR JM716260A: Miss Georgina Smith

Independent Assessment Services
Delivered by Atos

Guidance on completing section 6 is enclosed. Further information including more detailed guidance on completing your report can be found at www.dwp.gov.uk/healthcare-professional/guidance.

We enclose an invoice for you to claim a fee of £33.50. Please send your completed report and invoice together* in the enclosed business reply envelope. **Please reply within 5 working days.**

*A request for payment will only be accepted on the enclosed invoice form, which must be completed and include the GMC number.

If you have any queries regarding completion of the report or if you would like to discuss this request with our medical staff, please phone the number at the top of this letter. Thank you for your help.

Yours sincerely,

Ms [redacted] Shek (Nurse, 14I2105S)

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Providing assessment services on behalf of Department for Work & Pensions

NHS Confidential: Personal data about a patient

GPFR JM716260A: Miss Georgina Smith

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Guidance on completion of section 6

The assessment for Personal Independence Payment considers the claimant's ability to carry out a series of everyday activities as per section 6.

In this section, please provide information on the claimant's ability to carry out the relevant activities, if you are able.

Write what has been observed by yourself or another healthcare professional in relation to these listed activities. For example: self-care [redacted] unaided from a chair in surgery, no bending difficulty noted"; getting around - "walks slowly with marked right sided limp using a walking stick, not breathless or very breathless when attends surgery for routine check".

Please only include observations, not opinions.

To consider when completing the form:

Here are **examples of information** that is particularly useful to us for the following conditions.

- **Respiratory conditions** including asthma and COPD - exercise tolerance, **recorded** variability, peak flow readings (including serial readings), spirometry results, treatment and compliance - prescriptions requested regularly / when was last prescription, oral steroids and hospital admissions in last 12 months.
- **Ischaemic Heart Disease** - investigations including results of formal exercise testing, exercise tolerance, clinical findings, response to treatment including nitrates, treatment compliance, hospital admissions in last 12 months.
- **Musculoskeletal conditions - recorded** symptoms, recorded history of falls, detailed clinical findings **including range of joint movements**, treatment including planned surgical treatment with dates, response to treatment and compliance - prescriptions requested regularly / when was last prescription.
- **Mental health conditions** - documented history of [redacted] self-neglect, detailed mental state findings, history of admissions - voluntary or compulsory, regular prescriptions and last one ordered.
- **Sensory impairment** - visual and auditory acuity.

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5. Treatment - Current, planned, response and prognosis

Please provide details of drug and non-drug treatment and aids and appliances used (prescribed or, if known, non-prescribed). Please specify frequency of treatment and, for medication, dose as relevant.

On: Paroxetine 30mg daily. } for mental illness
Quetiapine 25mg in morning, 100mg at night
Propranolol 80mg in the morning.
Amitriptyline 50mg at night.

Lymecycline 408mg daily } For Skin (Acne)
Benzoyl Peroxide 5% od or bd

6. Effects of the disabling condition(s) on day to day life

If known, it would be helpful to have information on the patient's ability to:

- *Manage their health conditions and treatment*
- *Communicate*
- *Walk or move around*
- *Get somewhere on their own*
- *Make simple decisions*
- *Prepare, [redacted] and eat food*
- *Wash, bathe and use the toilet/ manage incontinence*
- *Dress and undress*

Only include information that has been confirmed by a health professional. Please state if this is not known.

Issues with social interaction, behaviour, ability to behave appropriately to situations with mood instability and coping skills
Self-harming, Suicide Attempt.

8302471530/1506941/4/5

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7. Does the patient have a history of threatening or violent behaviour?

No ☐ Yes ☑ Don't know ☐ *If yes, tell us about their behaviour within the last 5 years. Use the space below at* **Part 9**

8. Could your patient travel to an assessment centre by public transport or taxi?

Yes ☑ No ☐ Don't know ☐ *If no, please tell us why. Use the space below at* **Part 9**

9. Additional information

Use this section if there was insufficient space in one of the previous boxes OR to add important relevant factual information that has not been written in the body of the report. **Do not use the section to provide an opinion.**

Poison Disharg stules can become very angry colour warning.

I understand that, in certain circumstances, this report will be released to my patient, their legal representative and any authority deciding an appeal in relation to their entitlement to benefit. I also understand that the only information that can be withheld is medical evidence that would be harmful to the person's health.

Your signature

Name in capitals KG HILLMAN.

Date 01/12/2024

Stamp

Dr Robert G Hillman MBChB MRCGP
Kilbirnie Medical Practice
2-4 Kirkland Road
Kilbirnie KA25 6HS
01505 683591(Tel) / 681512(Fax)
GMC 3592065 A2428-7

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3. Symptoms and variability

This is especially helpful in conditions that fluctuate. It should be based on information in the clinical record. Include both day-to-day and longer-term fluctuations. Include the frequency and duration of exacerbations. Please also specify if the condition is well controlled.

Known to suffer from emotional instab[redacted],
episodes of self-harming, eating disordered (restrictive)
has attempted suicide in past.

4. Relevant clinical findings

Entitlement is based on the impact of the individual's impairment or health condition(s) on their everyday life. Please provide details of examination findings related to the severity or impact of any health conditions or impairments.

Coping poorly currently, requiring CMHT, CLW &
Criminal justice Support.

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Your GP Factual Report 411238017

Patient's name & Ref No Miss Georgina Smith JM716260A

Date when patient last seen by a health professional 25/08/21

Where and by whom Dr E J Nunn, Telephone Appointment.

Notes:

- *Please record relevant information based on your knowledge of the patient and their medical records.*
- *Please write down facts rather than opinion. We require an objective report - please only include information about symptoms that are recorded in the patient's records and information about disabling effects that you or another healthcare professional have directly observed.*
- *It may be helpful to your patient to enclose any relevant correspondence contained in their file - for example, recent consultant letters or letters from a Community Mental Health Team. Please ensure that any third party information is removed. Third party information is any sensitive information that refers to someone other than the patient - for example, the patient's family*
- *Please complete all sections as fully as possible but write "not known" if appropriate. "Not known" can be helpful.*
- *Relevant information is anything that relates to health conditions or disabilities which impact on the patient's functional ability.*

1. Disabling conditions

Please list conditions or impairments which affect the patient's functional ability.

Low mood, Anxiety,

Dyslexic - uses purple overlay ruler to read

2. History of condition(s). Include details of any relevant special investigations

Has a long history of chronic depressive symptoms, suicidality, Emotional instability, poor coping skills, background of childhood abuse and a wider + cannabis use. Recently released from prison, has required support + has been struggling to adjust.

2432479320/000941/3/5

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GP Factual Report Invoice

To: Independent Assessment Services
c/o DWP PIP(1)
Mail Handling Site A
Wolverhampton
WV98 1AA

[redacted] **GP Factual Report**

GPFR serial no:	**411238017**
Date requested:	**23rd November 2021**
DWP ref:	**JM716260A**
Patient's name:	**Miss Georgina Smith**
Date of birth:	**04/12/1991**
GP/surgery invoice ref:	PT 19044

Payee details:

Payee name: Kilbirnie Medical Practice
Payee name to be the same as the account holder

Surgery name and address: Kilbirnie Health Centre
2-4 Kirkland Road
Kilbirnie
Ayrshire

Postcode: KA25 6HS

VAT status

☐ VAT registered: VAT no:

☑ Not VAT registered: Total amount: £33.50

NET amount:	£33.50
VAT 20%:	£6.70
Total amount	£40.20

Bank Details (Payment will be made by BACS transfer)

Sort code: 82 65 28 Account no: 60015238

I hereby claim the appropriate fee for completing the above GP factual report

Print name: Dr R G HICKMAN Tel no: 07505 683591

Signature: Date: 01/12/2021

GMC no. of the GP who completed the GPFR (must be completed): 3591965

Authorisation (ATOS USE ONLY) WBS: GB.704471.010.06 GL code: 604102

Print name: GPFR received: / /

Signature: Payment Approved: / /

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NURSE GIVING OUT GLASSES:

PRISON: CORNTON VALE **GLASSES:** TINT ADDED

Please ask the patient to sign for receipt of their glasses then return slip to Admin.

SPIN	LOC	DOB	DATE
131344	PEEMOS	4/12/91	8/10/2026
PATIENTS NAME		SIGNATURE	
GEORGINA SMITH		G. Smith	

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NURSE GIVING OUT GLASSES:

PRISON: CORNTON VALE **GLASSES:** TINT ADDO

Please ask the patient to sign for receipt of their glasses then return slip to Admin.

SPIN	LOC	DOB	DATE
131344	PEEMOS	4/12/91	8/10/2026
PATIENTS NAME		SIGNATURE	
GEORGINA SMITH		G. Smith	

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GPFR JM716260A: Miss Georgina Smith

30 NOV 2021

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Duty Doctor
Ayrshire & [redacted] Community Health Care
Nhs Trust
Health Clinic 30800
2 Kirkland Road
[redacted]BIRNIE
Ayrshire
KA25 6HS

Our address: Independent Assessment Services
c/o DWP PIP(1)
Mail Handling Site A
Wolverhampton
WV98 1AA

Telephone: 0118 914 9400

Our Ref: JM716260A

Date: 23rd November 2021

PERSONAL INDEPENDENCE PAYMENT

Request for Further Medical Evidence

Dear Doctor,
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Patient's name: **Miss Georgina Smith**
Date of birth: **04/12/1991**
Address: **H M Prison, Cornton Vale, STIRLING, FK9 5NU** – address held - 65 Newhouse Drive Kilbirnie KA25 6ER

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OP101

Providing assessment services on behalf of Department for Work & Pensions

NHS Confidential: [redacted]

GPFR JM716260A: Miss Georgina Smith

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Yours sincerely,

Ms [redacted] Shek (Nurse, 14I2105S)

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GPFR JM716260A: Miss Georgina Smith

Independent Assessment Services
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In this section, please provide information on the claimant's ability to carry out the relevant activities, if you are able.

Write what has been observed by yourself or another healthcare professional in relation to these listed activities. For example: self-care [redacted] unaided from a chair in surgery, no bending difficulty noted"; getting around - "walks slowly with marked right sided limp using a walking stick, not breathless or very breathless when attends surgery for routine check".

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- **Musculoskeletal conditions - recorded** symptoms, recorded history of falls, detailed clinical findings **including range of joint movements**, treatment including planned surgical treatment with dates, response to treatment and compliance - prescriptions requested regularly / when was last prescription.
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- **Sensory impairment** - visual and auditory acuity.

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5. Treatment - Current, planned, response and prognosis

Please provide details of drug and non-drug treatment and aids and appliances used (prescribed or, if known, non-prescribed). Please specify frequency of treatment and, for medication, dose as relevant.

On: Provelne 30mg daily. } for mental illness
Quetiapine 25mg in morning, 100mg at night
Propranolol 80mg in the morning.
Amitriptyline 50mg at night.

Lymecycline 408mg daily } For Skin (Acne)
Benzoyl Peroxide 5% od or bd

6. Effects of the disabling condition(s) on day to day life

If known, it would be helpful to have information on the patient's ability to:

- *Manage their health conditions and treatment*
- *Communicate*
- *Walk or move around*
- *Get somewhere on their own*
- *Make simple decisions*
- *Prepare, [redacted] and eat food*
- *Wash, bathe and use the toilet/ manage incontinence*
- *Dress and undress*

Only include information that has been confirmed by a health professional. Please state if this is not known.

Issues with social interaction, withdrawn, ability to behave appropriately to situations with mood instability and coping skills
Self-harming, Suicide Attempt.

8302471530/1506941/4/5

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7. Does the patient have a history of threatening or violent behaviour?

No ☐ Yes ☑ Don't know ☐ *If yes, tell us about their behaviour within the last 5 years. Use the space below at* **Part 9**

8. Could your patient travel to an assessment centre by public transport or taxi?

Yes ☑ No ☐ Don't know ☐ *If no, please tell us why. Use the space below at* **Part 9**

9. Additional information

Use this section if there was insufficient space in one of the previous boxes OR to add important relevant factual information that has not been written in the body of the report. **Do not use the section to provide an opinion.**

Poison discharge tubes can become very angry colleur warning.

I understand that, in certain circumstances, this report will be released to my patient, their legal representative and any authority deciding an appeal in relation to their entitlement to benefit. I also understand that the only information that can be withheld is medical evidence that would be harmful to the person's health.

Your signature

Name in capitals KG HILLMAN.

Date 01/12/2024

Stamp

Dr Robert G Hillman MBChB MRCGP
Kilbirnie Medical Practice
2-4 Kirkland Road
Kilbirnie KA25 6HS
01505 683591(Tel) / 681512(Fax)
GMC 3592065 A2428-7

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3. Symptoms and variability

This is especially helpful in conditions that fluctuate. It should be based on information in the clinical record. Include both day-to-day and longer-term fluctuations. Include the frequency and duration of exacerbations. Please also specify if the condition is well controlled.

Known to suffer from emotional instab[redacted],
episodes of self-harming, eating disordered (restrictive)
has attempted suicide in past.

4. Relevant clinical findings

Entitlement is based on the impact of the individual's impairment or health condition(s) on their everyday life. Please provide details of examination findings related to the severity or impact of any health conditions or impairments.

Coping poorly currently, requiring CMHT, CLW &
Criminal Justice Support.

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Your GP Factual Report 411238017

Patient's name & Ref No Miss Georgina Smith | JM716260A

Date when patient last seen by a health professional 25/08/21

Where and by whom Dr E J Nunn, Telephone Appointment.

Notes:

- *Please record relevant information based on your knowledge of the patient and their medical records.*
- *Please write down facts rather than opinion. We require an objective report - please only include information about symptoms that are recorded in the patient's records and information about disabling effects that you or another healthcare professional have directly observed.*
- *It may be helpful to your patient to enclose any relevant correspondence contained in their file - for example, recent consultant letters or letters from a Community Mental Health Team. Please ensure that any third party information is removed. Third party information is any sensitive information that refers to someone other than the patient - for example, the patient's family*
- *Please complete all sections as fully as possible but write "not known" if appropriate. "Not known" can be helpful.*
- *Relevant information is anything that relates to health conditions or disabilities which impact on the patient's functional ability.*

1. Disabling conditions

Please list conditions or impairments which affect the patient's functional ability.

Low mood, Anxiety,

Dyslexic - uses purple overlay ruler to read

2. History of condition(s). Include details of any relevant special investigations

Has a long history of chronic depressive symptoms, suicidality, Emotional instability, fear abandonment issues, background of childhood abuse and accident + cannabis use. Recently released from prison, has required support + has been struggling to adjust.

2302479302/000941/3/5

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GP Factual Report Invoice

To: Independent Assessment Services
c/o DWP PIP(1)
Mail Handling Site A
Wolverhampton
WV98 1AA

[redacted] **GP Factual Report**

GPFR serial no:	**411238017**
Date requested:	**23rd November 2021**
DWP ref:	**JM716260A**
Patient's name:	**Miss Georgina Smith**
Date of birth:	**04/12/1991**
GP/surgery invoice ref:	PT 19044

Payee details:

Payee name: Kilbirnie Medical Practice
Payee name to be the same as the account holder

Surgery name and address: Kilbirnie Health Centre
2-4 Kirkland Road
Kilbirnie
Ayrshire

Postcode: KA25 6HS

VAT status

☐ VAT registered: VAT no:

☑ Not VAT registered: Total amount: £33.50

NET amount:	£33.50
VAT 20%:	£6.70
Total amount	£40.20

Bank Details (Payment will be made by BACS transfer)

Sort code: 82 65 28 Account no: 60015238

I hereby claim the appropriate fee for completing the above GP factual report

Print name: Dr R G HICKMAN Tel no: 07505 683591

Signature: Date: 01/12/2021

GMC no. of the GP who completed the GPFR (must be completed): 3591965

Authorisation (ATOS USE ONLY) WBS: GB.704471.010.06 GL code: 604102

Print name: GPFR received: / /

Signature: Payment Approved: / /

Independent Assessment Services is a trading name of Atos IT Services UK Limited
Atos IT Services UK Limited is registered in England and Wales
Registered Office: Second Floor, MidCity Place, 71 High Holborn, London, WC1V 6EA
Registered No. 01245534. VAT No. GB 232327983

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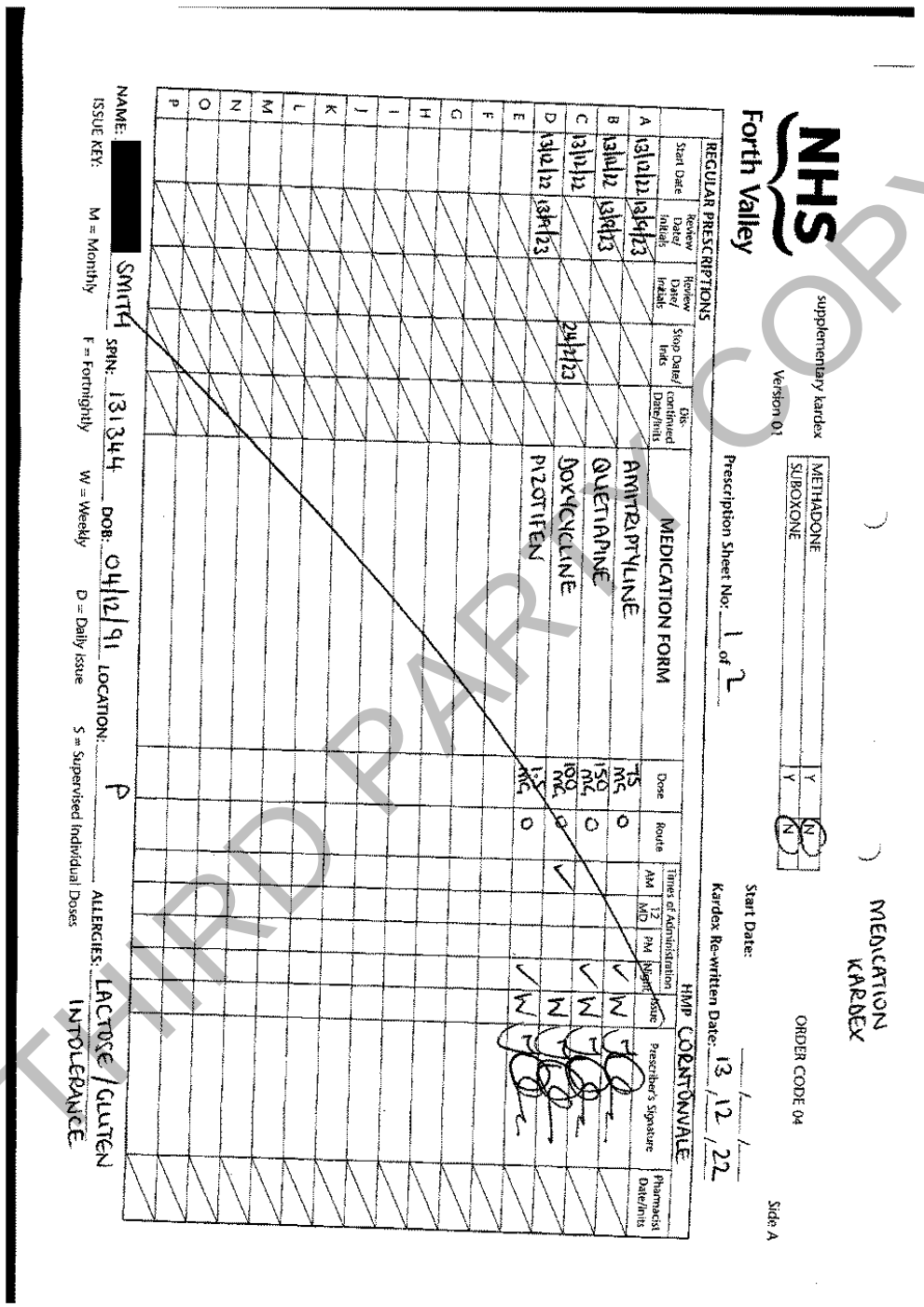

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NHS Forth Valley

supplementary kardex Version 01

MEDICATION KARDEX

METHADONE
SUBOXONE

Y Y
N N

ORDER CODE 04

Side A

Prescription Sheet No: 1 of 2

Start Date: / /

Kardex Re-written Date: 13 / 12 / 22

HMP CORNTONVALE

REGULAR PRESCRIPTIONS

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Initials	Dis-continued Date/Initials	MEDICATION FORM	Dose	Route	Times of Administration AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Initials
A	13/12/22	13/6/23				AMITRIPTYLINE	75 MG	O				✓	N		
B	13/12/22	13/6/23				QUETIAPINE	150 MG	O				✓	N		
C	13/12/22			24/2/23		DOXYCYCLINE	100 MG	O	✓				N		
D	13/12/22	13/6/23				PIZOTIFEN	1.5 MG	O				✓	N		
E															
F															
G															
H															
I															
J															
K															
L															
M															
N															
O															
P															

NAME: [redacted] SMITH

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

SPIN: 131344 DOB: 04/12/91 LOCATION: P

ALLERGIES: LACTOSE/GLUTEN INTOLERANCE

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NHS Forth Valley

Version 01

ORDER CODE 06

Side B

Start Date: __/__/__

Kardex Re-

Prescription Sheet No: 1 of 2

written Date: 13/12/22

HMP CORNTONVALE

"AS REQUIRED" PRESCRIPTION

	Start Date	Review Date	Stop Date	Drugs (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Date	Initls
1	13/12/22	13/12/23		KETOCONAZOLE SHAMPOO 2%	1 APP	TOP	2-3 x WEEKLY	M					
2	13/12/22	13/12/23		CETRABEN	1 APP	TOP	PRN - DRY SKIN	M					
3	13/12/22	13/12/23		BISACODYL TABS 5MG	1-2 TABS	O	NOCTE	M					
4	13/12/22	13/12/23		PEPPERMINT CAPS	1-2 CAPS	O	3 x DAILY PRN	M					
5	13/12/22	13/12/23		CETIRIZINE	10MG	O	ONCE DAILY PRN	M					
6	13/12/22	13/12/23		ETODOLAC	600MG	O	ONCE DAILY PRN	M					
7	13/12/22	13/12/23		DERMOL 500	500g	1 APP	TOP	PRN	M				
8	13/12/22	13/12/23		QV WASH	500g	1 APP	TOP	PRN	M				
9	13/12/22	13/12/23		ALGESAL CREAM		1 APP	TOP	3x DAILY PRN	M				
10													
11													
12													
13													
14													

Once Only Prescriptions

	Admin Data	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1										
2										
3										

NAME: GEORGINA SMITH SPIN: 131344 DOB: 04/12/91 LOCATION: P ALLERGIES: LACTOSE/GLUTEN INTOLERANCE

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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Version 01

ORDER CODE 06

Side B

Start Date: ___/___/___

Kardex Re-

Prescription Sheet No: 1 of 2

written Date: 13/12/22

HMP CORNTONVALE

"AS REQUIRED" PRESCRIPTION

	Start Date	Review Date	Stop Date	Drugs (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Discontinued Pharmacist Date	Discontinued Pharmacist Initls
1	13/12/22	13/12/23		GF SEEDED LOAF 400g			PIP CODE 308-9364	M					
2	13/12/22	13/12/23		CRISPY RICE 375g x 2			PIP CODE 385-2982	M					
3	13/12/22	13/12/23		FUSILLI (SPIRALS) 500g x 2			PIP CODE 211-5178	M					
4	13/12/22	13/12/23		SPAGHETTI 500g			PIP CODE 211-5160	M					
5	13/12/22	13/12/23		CRACKERS 200g			PIP CODE 009-3302	M					
6	13/12/22	13/12/23		MINI CRACKERS 175g x 4			PIP CODE 353-5515	M					
7	13/12/22	13/12/23		SAVOURY BISCUITS 150g x 2			PIP CODE 310-7893	M					
8	13/12/22	13/12/23		GF WHITE ROLLS 4 PACK 200g			PIP CODE 344-3645	M					
9	13/12/22	13/12/23		GF PART BAKED ROLLS 4 PACK 200g			PIP CODE 344-3652	M					
10													
11													
12													
13													
14													

Once Only Prescriptions

	Admin Data	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1										
2										
3										

NAME: GEORGINA SMITH SPIN: 131344 DOB: 04/12/91 LOCATION: P ALLERGIES: GLUTEN / LACTOSE INTOLERANCE

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

ING1919

iGPR Report

PART 2 DRAFT COPY

NHS Forth Valley

supplementary kardex

METHADONE	Y	N
SUBOXONE	Y	N

Version 01

GLUTEN FREE PRODUCTS
KARDEX

ORDER CODE 04

Side A

Start Date: ___/___/___

Kardex Re-written Date: 13/12/22

Prescription Sheet No: 1 of 2

HMP CORNTONVALE

	REGULAR PRESCRIPTIONS					MEDICATION FORM	Dose	Route	Times of Administration				Issue	Prescriber's Signature	Pharmacist Date/Inits
	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Inits	Dis-continued Date/Inits				AM	12 MD	PM	Night			
A															
B															
C															
D															
E															
F															
G															
H															
I															
J															
K															
L															
M															
N															
O															
P															

NAME: GEORGINA SMITH SPIN: 131344 DOB: 04/12/91 LOCATION: P ALLERGIES: GLUTEN & LACTOSE INTOLERANCE

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME

LOCATION

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS
16/8/22							
23/8/22							
24/8/22							
30/8/22							
31/8/22							
6/9/22							
8/9/22							
13/9/22							
20/9/22							
21/9/22							
27/9/22							
28/9/22							
4/10/22							
6/10/22							
11/10/22							
18/10/22							
19/10/22							
25/10/22							
27/10/22							
1/11/22							

MEDICATION CODE	Sign	COMMENTS
[redacted]		
X40 8mg X25mg X150mg		
A=7 B=21 C=7 X40 X25 X150		
S=84 X 0.2ml	BA	
A=7 B=21 C=7 X40 X25mg X150mg	MC	
D=28 X60mg 120ml	SA	
A=7 B=21 C=7 S=56 X40 X25 X150 X5	SA	1,3,7 = ordeal sac.
S=28 X40/10ml	ND	6 = ordeal sac.
A=7 B=21 C=7 X40mg X25mg X150mg		
A=7 B=21 C=7 X40 X25 X150		
S=84 XD=28		
A=7 B=21 C=7 X40mg X25mg X150mg		
T=28 X=N		
X60mg X12.5ml		
A=7 B=21 C=7 B=56 X40mg X25mg X150mg X5mg		
S=84 X40mg		
A=7 B=21 C=7 X40mg X25mg X150mg		3 loaves given
A=7 B=21 C=7 X40 X25 X150		
S=84 XD=28ml		
A=7 B=21 C=7 X40mg X25mg X150mg		Remove 4 hooks each hand + cages 2x
T=28 X60mg		
A=7 B=21 C=7 X40 X25 X150		

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE 5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith

DOB 4/12/91

SPIN 15/3444

LOC P.

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NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

ORDER CODE 05

NAME [redacted]

LOCATION [redacted]

DRUG RECORDING SHEET

DATE	AM SIGN	NOON SIGN	PM SIGN	COMMENTS	MEDICATION CODE	SIGN	COMMENTS
21/11/22							
4/11/22							
8/11/22							
11							
11							
15/11/22							
22/11/22							
24/11/22							
25/11/22							
28/11/22							
2/12/22							
6/12/22							
7/12/22							
11							
13/12/22							

CODES

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5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME [redacted]

DOB [redacted]

SPRN [redacted]

LOC [redacted]

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Kaodex 4 reverter 13/12/22
medications

NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 05

ORDER CODE 05

NAME Eccleston Smith

LOCATION Peebles

DRUG RECORDING SHEET

DATE	AM SIGN	NOON SIGN	PM SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENT
4/12/22							
29/12/22							
22/12/22							
23/12/22							
30/12/22							
4/1/23							
10/1/23							
Miles							

CODES

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NAME Eccleston Smith

DOB 4/12/91

CHI

SPIN 1312 44

LOC Peebles

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NAME [redacted] Smith

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

LOCATION Redbus

ORDER CODE 05

NHS Forth Valley

DRUG RECORDING SHEET DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	COMMENTS

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NAME George Smith

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

LOCATION Peebles

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DRUG RECORDING SHEET

DATE	AM SIGN	NOON SIGN	PM SIGN	COMMENTS	MEDICATION CODE	SIGN	COMMENTS

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NAME George Smith

DOB 4/12/91

SPIN 1 31344

LOC Peebles

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NAME Cecelia Smith

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LOCATION Rothesay

NHS Forth Valley

DRUG RECORDING SHEET DATE	AM SIGN	NOON SIGN	PM SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENTS

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NAME Cecelia Smith

DOB 4/12/31

SPIN 1313144

LOC Rothesay

Kalnox 2 tablets 13/12/22
cuts knee.

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04/07/2022

Patient Name Smith, Georgina Patient ID 0412913127 Accession NumberV213731888001

NHS Forth Valley

NHS Forth Valley Radiology Report

Patient Name:	Smith, Georgina	Exam Date:	17/06/2022
Patient ID:	0412913127	Consultant:	MEDICAL OFFICER - CORNTON VALE
Patient Date of Birth:	04/12/1991	Report Date and Time:	01/07/2022 12:13:55
Patient Address	THE HEALTH CENTRE PO BOX 21616 STIRLING FK7 1DW	Referring Dept/Location:	CORNTON VALE PRISON

Accession: V213731888001, Examination Date: 17/06/2022, Examination: XR Cervical Spine:

Indication:
Clinical details:
Severe increasing pain over 3 weeks, cervical spine. Reports no injury. Reduced range of movement.
Bony prominence, however states she has a history of kyphosis (thoracic), swelling evident

Provisional diagnosis:
? Pathology

Findings:
Cervical spine:
-
No significant bony or joint abnormality demonstrated.
-
Vertebral height and alignment appear well maintained.
-
Cervical lordosis appears well maintained.
-
No prevertebral soft tissue swelling evident.
-
Intervertebral disc spaces appear well maintained.
-
Bone density appears normal.
-

Final Report By: [redacted] Mayers Reporting Radiographer HCPC RA78096 at 01/07/2022 12:13:55
Email Address: [redacted]**.mayers@nhs.scot**.

NHS Forth Valley

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04/07/2022

Patient Name Smith, Georgina Patient ID 0412913127 Accession NumberV213731888001

NHS Forth Valley

NHS Forth Valley Radiology Report

Patient Name:	Smith, Georgina	Exam Date:	17/06/2022
Patient ID:	0412913127	Consultant:	MEDICAL OFFICER - CORNTON VALE
Patient Date of Birth:	04/12/1991	Report Date and Time:	01/07/2022 12:13:55
Patient Address	THE HEALTH CENTRE PO BOX 21616 STIRLING FK7 1DW	Referring Dept/Location:	CORNTON VALE PRISON

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-
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-
Intervertebral disc spaces appear well maintained.
-
Bone density appears normal.
-

Final Report By: [redacted] Mayers Reporting Radiographer HCPC RA78096 at 01/07/2022 12:13:55
Email Address: [redacted]**.mayers@nhs.scot**.

NHS Forth Valley

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GPFR JM716260A: Miss Georgina Smith

30 NOV 2021

Independent Assessment Services
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31751 000941 0001 E 30800 H2

Duty Doctor
Ayrshire & [redacted] Community Health Care
Nhs Trust
Health Clinic 30800
2 Kirkland Road
[redacted]BIRNIE
Ayrshire
KA25 6HS

Our address: Independent Assessment Services
c/o DWP PIP(1)
Mail Handling Site A
Wolverhampton
WV98 1AA

Telephone: 0118 914 9400

Our Ref: JM716260A

Date: 23rd November 2021

PERSONAL INDEPENDENCE PAYMENT

Request for Further Medical Evidence

Dear Doctor,
I am writing to you about a patient who has made a claim for Personal Independence Payment:

Patient's name: **Miss Georgina Smith**
Date of birth: **04/12/1991**
Address: **H M Prison, Cornton Vale, STIRLING, FK9 5NU** – address held - 65 Newhouse Drive Kilbirnie KA25 6ER

Independent Assessment Services is contracted to carry out assessments for Personal Independence Payment by the Department for Work and Pensions. It would be very helpful in assessing your patient's benefit claim if you could complete the enclosed factual report form. **Your patient (or a person appointed to handle their affairs due to the claimant's mental incapacity to do so) has given their consent for us to request this information from you.**

You should base your report on your knowledge of the patient and on her records. A special appointment is not required. Please include in your report any relevant information contained in letters or reports from hospitals or consultants. It may be helpful to your patient to enclose any relevant correspondence contained in their file, such as recent consultant letters or letters from a Community Mental Health Team. If the patient has died or recently moved to another area please still complete the report if you can.

To ensure compliance with the Rehabilitation of Offenders Act 1974 your report should not contain any reference to criminal convictions, whether spent or not, unless the information is directly relevant to your patient's condition or disability. This report is not subject to the Access to Medical Reports Act 1998. The patient does not need to [redacted] it before it is returned.

The patient may, at any stage, request a copy of this report to be sent to them by the Department for Work and Pensions. Harmful and embarrassing information should not be included in your report.

P0621930/0b2943/1/5

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Atos IT Services UK Limited is registered in England and Wales
Registered Office: Second Floor, MidCity Place, 71 High Holborn, London, WC1V 6EA
Registered No. 01245534. VAT No. GB 232327983

Providing assessment services on behalf of Department for Work & Pensions

NHS Confidential: [redacted]

GPFR JM716260A: Miss Georgina Smith

Independent Assessment Services
Delivered by Atos

Guidance on completing section 6 is enclosed. Further information including more detailed guidance on completing your report can be found at www.dwp.gov.uk/healthcare-professional/guidance.

We enclose an invoice for you to claim a fee of £33.50. Please send your completed report and invoice together* in the enclosed business reply envelope. **Please reply within 5 working days.**

*A request for payment will only be accepted on the enclosed invoice form, which must be completed and include the GMC number.

If you have any queries regarding completion of the report or if you would like to discuss this request with our medical staff, please phone the number at the top of this letter. Thank you for your help.

Yours sincerely,

Ms [redacted] Shek (Nurse, 14I2105S)

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Providing assessment services on behalf of Department for Work & Pensions

NHS Confidential: Personal data about a patient

GPFR JM716260A: Miss Georgina Smith

Independent Assessment Services
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Guidance on completion of section 6

The assessment for Personal Independence Payment considers the claimant's ability to carry out a series of everyday activities as per section 6.

In this section, please provide information on the claimant's ability to carry out the relevant activities, if you are able.

Write what has been observed by yourself or another healthcare professional in relation to these listed activities. For example: self-care [redacted] unaided from a chair in surgery, no bending difficulty noted"; getting around - "walks slowly with marked right sided limp using a walking stick, not breathless or very breathless when attends surgery for routine check".

Please only include observations, not opinions.

To consider when completing the form:

Here are **examples of information** that is particularly useful to us for the following conditions.

- **Respiratory conditions** including asthma and COPD - exercise tolerance, **recorded** variability, peak flow readings (including serial readings), spirometry results, treatment and compliance - prescriptions requested regularly / when was last prescription, oral steroids and hospital admissions in last 12 months.
- **Ischaemic Heart Disease** - investigations including results of formal exercise testing, exercise tolerance, clinical findings, response to treatment including nitrates, treatment compliance, hospital admissions in last 12 months.
- **Musculoskeletal conditions - recorded** symptoms, recorded history of falls, detailed clinical findings **including range of joint movements**, treatment including planned surgical treatment with dates, response to treatment and compliance - prescriptions requested regularly / when was last prescription.
- **Mental health conditions** - documented history of [redacted] self-neglect, detailed mental state findings, history of admissions - voluntary or compulsory, regular prescriptions and last one ordered.
- **Sensory impairment** - visual and auditory acuity.

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93267936/009841/273

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OP101

Providing assessment services on behalf of Department for Work & Pensions

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5. Treatment - Current, planned, response and prognosis

Please provide details of drug and non-drug treatment and aids and appliances used (prescribed or, if known, non-prescribed). Please specify frequency of treatment and, for medication, dose as relevant.

On: Paroxetine 30mg daily. } for mental illness
Quetiapine 25mg in morning, 100mg at night
Propranolol 80mg in the morning.
Amitriptyline 50mg at night.

Lymecycline 408mg daily } For Skin (Acne)
Benzoyl Peroxide 5% od or bd

6. Effects of the disabling condition(s) on day to day life

If known, it would be helpful to have information on the patient's ability to:

- *Manage their health conditions and treatment*
- *Communicate*
- *Walk or move around*
- *Get somewhere on their own*
- *Make simple decisions*
- *Prepare, [redacted] and eat food*
- *Wash, bathe and use the toilet/ manage incontinence*
- *Dress and undress*

Only include information that has been confirmed by a health professional. Please state if this is not known.

Issues with social interaction, behaviour, ability to behave appropriately to situations with mood instability and coping skills
Self-harming, Suicide Attempt.

8302471530/1506941/4/5

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7. Does the patient have a history of threatening or violent behaviour?

No ☐ Yes ☑ Don't know ☐ *If yes, tell us about their behaviour within the last 5 years. Use the space below at* **Part 9**

8. Could your patient travel to an assessment centre by public transport or taxi?

Yes ☑ No ☐ Don't know ☐ *If no, please tell us why. Use the space below at* **Part 9**

9. Additional information

Use this section if there was insufficient space in one of the previous boxes OR to add important relevant factual information that has not been written in the body of the report. **Do not use the section to provide an opinion.**

Poison discharge tubes can become very angry colleur warning.

I understand that, in certain circumstances, this report will be released to my patient, their legal representative and any authority deciding an appeal in relation to their entitlement to benefit. I also understand that the only information that can be withheld is medical evidence that would be harmful to the person's health.

Your signature

Name in capitals KG HILLMAN.

Date 01/12/2024

Stamp

Dr Robert G Hillman MBChB MRCGP
Kilbirnie Medical Practice
2-4 Kirkland Road
Kilbirnie KA25 6HS
01505 683591(Tel) / 681512(Fax)
GMC 3592065 A2428-7

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3. Symptoms and variability

This is especially helpful in conditions that fluctuate. It should be based on information in the clinical record. Include both day-to-day and longer-term fluctuations. Include the frequency and duration of exacerbations. Please also specify if the condition is well controlled.

Known to suffer from emotional instab[redacted],
episodes of self-harming, eating disorder (restrictive)
has attempted suicide in past.

4. Relevant clinical findings

Entitlement is based on the impact of the individual's impairment or health condition(s) on their everyday life. Please provide details of examination findings related to the severity or impact of any health conditions or impairments.

Coping poorly currently, requiring CMHT, CLW &
Criminal justice Support.

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NHS Confidential: Personal data about a patient

Your GP Factual Report 411238017

Patient's name & Ref No Miss Georgina Smith JM716260A

Date when patient last seen by a health professional 25/08/21

Where and by whom Dr E J Nunn, Telephone Appointment.

Notes:

- *Please record relevant information based on your knowledge of the patient and their medical records.*
- *Please write down facts rather than opinion. We require an objective report - please only include information about symptoms that are recorded in the patient's records and information about disabling effects that you or another healthcare professional have directly observed.*
- *It may be helpful to your patient to enclose any relevant correspondence contained in their file - for example, recent consultant letters or letters from a Community Mental Health Team. Please ensure that any third party information is removed. Third party information is any sensitive information that refers to someone other than the patient - for example, the patient's family*
- *Please complete all sections as fully as possible but write "not known" if appropriate. "Not known" can be helpful.*
- *Relevant information is anything that relates to health conditions or disabilities which impact on the patient's functional ability.*

1. Disabling conditions

Please list conditions or impairments which affect the patient's functional ability.

Low mood, Anxiety,

Dyslexic - uses purple overlay ruler to read

2. History of condition(s). Include details of any relevant special investigations

Has a long history of chronic depressive symptoms, suicidality, Emotional instability, fear abandonment issues, background of childhood abuse and a violent + convicted ex. Recently released from prison, has required support + has been struggling to adjust.

2432479320/000941/3/5

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NHS Confidential: Personal data about a patient

GP Factual Report Invoice

To: Independent Assessment Services
c/o DWP PIP(1)
Mail Handling Site A
Wolverhampton
WV98 1AA

[redacted] **GP Factual Report**

GPFR serial no:	**411238017**
Date requested:	**23rd November 2021**
DWP ref:	**JM716260A**
Patient's name:	**Miss Georgina Smith**
Date of birth:	**04/12/1991**
GP/surgery invoice ref:	PT 19044

Payee details:

Payee name: Kilbirnie Medical Practice
Payee name to be the same as the account holder

Surgery name and address: Kilbirnie Health Centre
2-4 Kirkland Road
Kilbirnie
Ayrshire

Postcode: KA25 6HS

VAT status

☐ VAT registered: VAT no:

☑ Not VAT registered: Total amount: £33.50

NET amount:	£33.50
VAT 20%:	£6.70
Total amount	£40.20

Bank Details (Payment will be made by BACS transfer)

Sort code: 82 65 28 Account no: 60015238

I hereby claim the appropriate fee for completing the above GP factual report

Print name: Dr R G HICKMAN Tel no: 07505 683591

Signature: Date: 01/12/2021

GMC no. of the GP who completed the GPFR (must be completed): 3591065

Authorisation (ATOS USE ONLY) WBS: GB.704471.010.06 GL code: 604102

Print name: GPFR received: / /

Signature: Payment Approved: / /

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NHS Confidential: Personal data about a patient

NHS Forth Valley Haematology

NHS Forth Valley

Patient		Patient Ref. Number	
SMITH, GEORGINA 65 NEWHOUSE DRIVE KILBIRNIE		0412913127	
		Date Of Birth: 04/12/1991	Sex: F
Doctor/Location	Consultant/GP	Date/Time Specimen Received	
HMP & YOI Cornton Vale Prison Medical Officer	Unknown	23/12/2021 16:04	
Clinical Data: No Clinical Details Given		Sample Type: Blood	

DIFFERENTIAL W.B.C. COUNT ALL x 10^9/L

Neutrophils	Lymphocytes	Monocytes	Eosinophils	Basophils	Meta.	Myelocytes	*	Blasts	N.R.B.C.
3.90	1.70	0.50	0.20	0.10					0.00

R.B.C. x10^{12}/L	P.C.V.	M.C.V.fl	M.C.H. pg	M.C.H.C. g/L	E.S.R. mm/1hr	Retics. x10^9/L	Report Date/Time
4.70	0.399	84.9	28.3	333			23/12/2021 16:53

Hb g/L	W.B.C. x 10^9/L	Plt. x 10^9/L	Investigation	Lab. Number	Collection Date/Time
133	6.4	321	Miscellaneous	053167	23/12/2021 11:40

Full Blood Count Reference Ranges:

ADULTS	MALE	FEMALE
White Cell Count (x10^9/L)	4 - 10	4 - 10
Red Cell Count (x10^9/L)	4.4 - 5.9	3.8 - 5.2
Haemoglobin (g/L)	133 - 177	117 - 157
Packed Cell Volume	0.40 - 0.52	0.35 - 0.47
Mean Cell Volume (fl)	81 - 100	81 - 100
Mean Cell Haemoglobin (pg)	26.6 - 33.8	26.4 - 34
MCH Concentration (g/L)	314 - 363	314 - 358
Platelet Count (x10^9/L)	150 - 440	150 - 440

[redacted] (M & F)	BIRTH	1 YEAR	2 - 6 YEARS	6 - 12 YEARS
WBC (x10^9/L)	10 - 26	6 - 16	5 - 10	5 - 13
RBC (x10^{12}/L)	5 - 6	3.9 - 5.1	4 - 5.2	4 - 5.2
Hb (g/L)	140 - 220	111 - 141	110 - 140	115 - 155
Platelets	150 - 450	200 - 490	200 - 490	170 - 450

Differential White Cell Count: (as absolute counts, x 10^9/L)

	BIRTH	1 YEAR	2 - 6 YEARS	6 - 12 YEARS	ADULT
Neutrophils	4 - 14	1 - 7	1.5 - 8	2 - 8	2 - 7
Lymphocytes	3 - 8	3.5 - 11	6 - 9	1 - 5	1 - 3
Monocytes	0.5 - 2	0.2 - 1	0.2 - 1	0.2 - 1	0.2 - 1
Eosinophils	0.1 - 1	0.1 - 1	0.1 - 1	0.1 - 1	0.02 - 0.5
Basophils					0.02 - 0.1

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA
UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: 65 NEWHOUSE DRIVE, KILBIRNIE
CONSULTANT: Unknown
DOB: 04/12/1991
SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: Prison Medical Officer, HMP & YOI Cornton Vale
SAMPLE TYPE OF LATEST SPECIMEN: Serum
CLINICAL DETAILS REFERRING TO LATEST REQUEST: No Clinical Details Given
COPY DETAILS:

DATE OF COLLECTION	LABORATORY NUMBER	Duration of Collection	Urine VOLUME ml	Urine CREATININE 8.4-22 mmol/24h	CREATININE CLEARANCE 85-150 ml/min	Urine 5 HIAA 0 - 42 µmol/24h	Urine ADRENALINE less than 230 nmol/24h	Urine NORADRENALINE less than 900 nmol/24h	Urine DOPAMINE less than 3300 nmol/24h

DATE OF COLLECTION	LABORATORY NUMBER	Urine OSMOLALITY mosm/KgH2O	Urine SODIUM mmol/24h	Urine POTASSIUM [redacted]	Urine UREA 160-500 mmol/24h	Urine CALCIUM 2.5-7.5 mmol/24h	Urine PHOSPHATE 15-50 mmol/24h	Urine URATE 1.5-4.5 mmol/24h	

22/06/21	BB273421Q	FSH	6.1	U/L	
22/06/21	BB273421Q	LH	8.4	U/L	
22/06/21	BB273421Q	Oestradiol	80	pmol/L	(100 - 2000)
23/12/21	BB102943J	FSH	2.0	U/L	
23/12/21	BB102943J	HCG (Local)	<3	U/L	(0 - 5)
23/12/21	BB102943J	LH	3.1	U/L	
23/12/21	BB102943J	Oestradiol	289	pmol/L	(100 - 2000)
23/12/21	BB102943J	Prolactin	127	mU/L	(0 - 630)
23/12/21	**BB102943J**	FSH Post-pubertal female follicular FSH 3-8 U/L LH 2-13 U/L			

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA
UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: 65 NEWHOUSE DRIVE, KILBIRNIE
CONSULTANT: Unknown
DOB: 04/12/1991
SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: Prison Medical Officer, HMP & YOI Cornton Vale
SAMPLE TYPE OF LATEST SPECIMEN: Serum
CLINICAL DETAILS REFERRING TO LATEST REQUEST: No Clinical Details Given
COPY DETAILS:

DATE OF COLLECTION	LABORATORY NUMBER	Duration of Collection	Urine VOLUME ml	Urine CREATININE 8.4-22 mmol/24h	CREATININE CLEARANCE 85-150 ml/min	Urine 5 HIAA 0 - 42 µmol/24h	Urine ADRENALINE less than 230 nmol/24h	Urine NORADRENALINE less than 900 nmol/24h	Urine DOPAMINE less than 3300 nmol/24h

DATE OF COLLECTION	LABORATORY NUMBER	Urine OSMOLALITY mosm/KgH2O	Urine SODIUM mmol/24h	Urine POTASSIUM [redacted]	Urine UREA 160-500 mmol/24h	Urine CALCIUM 2.5-7.5 mmol/24h	Urine PHOSPHATE 15-50 mmol/24h	Urine URATE 1.5-4.5 mmol/24h	

22/06/21	BB273421Q	FSH	6.1	U/L	
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NHS Confidential: Personal data about a patient

NHS Forth Valley Haematology

NHS Forth Valley

Patient		Patient Ref. Number	
SMITH, GEORGINA 65 NEWHOUSE DRIVE KILBIRNIE		0412913127	
		Date Of Birth: 04/12/1991	Sex: F
Doctor/Location	Consultant/GP	Date/Time Specimen Received	
HMP & YOI Cornton Vale Prison Medical Officer	Unknown	23/12/2021 16:04	
Clinical Data: No Clinical Details Given		Sample Type: Blood	

DIFFERENTIAL W.B.C. COUNT ALL x 10^9/L

Neutrophils	Lymphocytes	Monocytes	Eosinophils	Basophils	Meta.	Myelocytes	*	Blasts	N.R.B.C.
3.90	1.70	0.50	0.20	0.10					0.00

R.B.C. x10^{12}/L	P.C.V.	M.C.V.fl	M.C.H. pg	M.C.H.C. g/L	E.S.R. mm/1hr	Retics. x10^9/L	Report Date/Time
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Hb g/L	W.B.C. x 10^9/L	Plt. x 10^9/L	Investigation	Lab. Number	Collection Date/Time
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[redacted] (M & F)	BIRTH	1 YEAR	2 - 6 YEARS	6 - 12 YEARS
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RBC (x10^{12}/L)	5 - 6	3.9 - 5.1	4 - 5.2	4 - 5.2
Hb (g/L)	140 - 220	111 - 141	110 - 140	115 - 155
Platelets	150 - 450	200 - 490	200 - 490	170 - 450

Differential White Cell Count: (as absolute counts, x 10^9/L)

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Lymphocytes	3 - 8	3.5 - 11	6 - 9	1 - 5	1 - 3
Monocytes	0.5 - 2	0.2 - 1	0.2 - 1	0.2 - 1	0.2 - 1
Eosinophils	0.1 - 1	0.1 - 1	0.1 - 1	0.1 - 1	0.02 - 0.5
Basophils					0.02 - 0.1

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NHS Confidential: Personal data about a patient

Urgent Clinical Note

Name: **Georgina Smith**
CHI: **0412913127**

NHS Forth Valley

Urgent Clinical Note: Georgina Smith / 0412913127

Registered GP Name: [redacted]
Registered GP Practice: Kilbirnie Medical Practice

Referral Management [redacted] Clinical Note

Recorded by: [redacted] / Dietetics (R3)
Recorded on: 13 January 2022 12:04

Presenting Complaint, Investigations, Results, Diagnosis:

Dear Dr. Kildare,

Thank you for your referral for this lady.

It is difficult, within the prison environment, to trial dietary exclusions and make any recommendations. In the first instance you mention ongoing constipation and as cramping and bloating are common symptoms of constipation it might be as straightforward as this rather than it being any kind of dietary intolerance. It is really common to experience discomfort/cramps once a meal has been taken due to everything trying to move along the gut, it is not likely to be anything specifically attributed to the meal itself.

I would initially suggest trialling a regular laxative such as Laxido in addition to her trying to increase her fibre intake. Fybogel could be prescribed however unless she is willing and able to increase her fluid intake substantially it could actually make the situation worse.

This lady is unlikely to have a lactose intolerance as the most common symptom associated with this is loose stools, however if she reports an improvement by excluding milk products then, if possible she could be offered lactose free milk or a plant based alternative (suitably fortified). She can also be advised that cheddar/mozzarella/feta and butter all have lower to minimal lactose in them and are generally well tolerated in small amounts.

Regarding gluten, Coeliac Disease has been excluded therefore it is highly unlikely she has an issue with gluten. It could potentially be wheat which is contributing to symptoms and in that case she can, if she wishes, continue to exclude wheat containing products but there is no need to worry about gluten contamination i.e. she would not require GF [redacted] krispies/oats.

I hope that this information is helpful. Should you find that Ms Smith continues to have symptoms despite her bowels moving on a regular basis then please feel free to contact me at [redacted] and/or re-refer her to us. At the moment I am not carrying out face-to-face appointments but if needed could have a telephone discussion with the patient.

Best wishes
[redacted]

0 Medication Recommendation(s):

No (new, stop or alter) medication recommendation(s) entered/recorded

0 Follow Up action(s):

No 'follow up' info recorded/entered

Further Info:

No 'further info' recorded/entered

Form completed by: [redacted] Miller on Thu 13 January 2022 at 12:18
Form sent to: Primary and secondary care document management system(s). eg. Docman and EDMS

Form: CN388343, for CHI: 0412913127, generated by: [redacted] Miller on 13/01/2022 12:18:46

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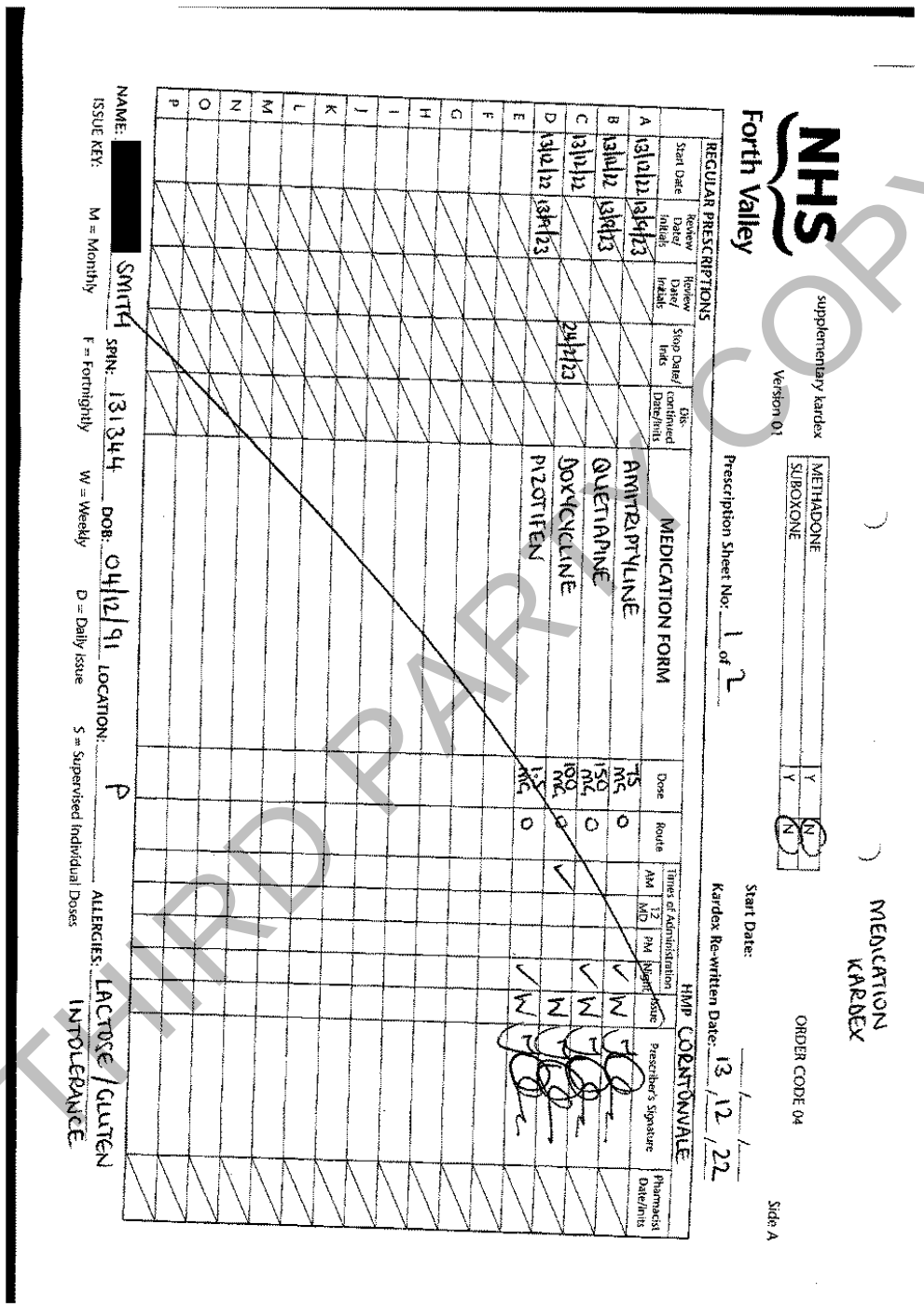

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NHS Forth Valley

supplementary kardex Version 01

MEDICATION KARDEX

METHADONE
SUBOXONE

Y Y
N N

ORDER CODE 04

Start Date: ___/___/___

Side A

Prescription Sheet No: 1 of 2

Kardex Re-written Date: 13/12/22

HMP CORNTONVALE

REGULAR PRESCRIPTIONS

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Initials	Dis-continued Date/Initials	MEDICATION FORM	Dose	Route	Times of Administration: AM	12 MID	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Initials
A	13/12/22	13/6/23				AMITRIPTYLINE	75 MG	O				✓	N		
B	13/12/22	13/6/23				QUETIAPINE	150 MG	O				✓	N		
C	13/12/22			24/1/23		DOXYCYCLINE	100 MG	O	✓				N		
D	13/12/22	13/6/23				PIZOTIFEN	1.5 MG	O				✓	N		
E															
F															
G															
H															
I															
J															
K															
L															
M															
N															
O															
P															

NAME: [redacted] SMITH

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

SPIN: 131344 DOB: 04/12/91 LOCATION: P

ALLERGIES: LACTOSE/GLUTEN INTOLERANCE

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NHS Forth Valley

Version 01

ORDER CODE 06

Side B

Start Date: ___/___/___

Kardex Re-

Prescription Sheet No: 1 of 2

written Date: 13/12/22

HMP CORNTONVALE

"AS REQUIRED" PRESCRIPTION

	Start Date	Review Date	Stop Date	Drugs (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Date	Initls
1	13/12/22	13/12/23		KETOCONAZOLE SHAMPOO 2%	1 APP	TOP	2-3 x WEEKLY	M					
2	13/12/22	13/12/23		CETRABEN	1 APP	TOP	PRN - DRY SKIN	M					
3	13/12/22	13/12/23		BISACODYL TABS 5MG	1-2 TABS	O	NOCTE	M					
4	13/12/22	13/9/23		PEPPERMINT CAPS	1-2 CAPS	O	3 x DAILY PRN	M					
5	13/12/22	13/7/23		CETIRIZINE	10MG	O	ONCE DAILY PRN	M					
6	13/12/22	13/7/23		ETODOLAC	600MG	O	ONCE DAILY PRN	M					
7	13/12/22	13/12/22		DERMOL 500	500g	1 APP	TOP	PRN	M				
8	13/12/22	13/12/23		QV WASH	500g	1 APP	TOP	PRN	M				
9	13/12/22	13/12/23		ALGESAL CREAM		1 APP	TOP	3x DAILY PRN	M				
10													
11													
12													
13													
14													

Once Only Prescriptions

	Admin Data	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1										
2										
3										

NAME: GEORGINA SMITH SPIN: 131344 DOB: 04/12/91 LOCATION: P ALLERGIES: LACTOSE/GLUTEN INTOLERANCE

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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DRAFT COPY

NHS Forth Valley

Version 01

ORDER CODE 06

Side B

Start Date: ___/___/___

Kardex Re-

Prescription Sheet No: 1 of 2

written Date: 13/12/22

HMP CORNTONVALE

"AS REQUIRED" PRESCRIPTION

	Start Date	Review Date	Stop Date	Drugs (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Date	Initls
1	13/12/22	13/12/23		GF SEEDED LOAF 400g			PIP CODE 308-9364	M					
2	13/12/22	13/12/23		CRISPY RICE 375g x 2			PIP CODE 385-2982	M					
3	13/12/22	13/12/23		FUSILLI (SPIRALS) 500g x 2			PIP CODE 21[illegible]-5178	M					
4	13/12/22	13/12/23		SPAGHETTI 500g			PIP CODE 211-5160	M					
5	13/12/22	13/12/23		CRACKERS 200g			PIP CODE 009-3302	M					
6	13/12/22	13/12/23		MINI CRACKERS 175g x 4			PIP CODE 353-5515	M					
7	13/12/22	13/12/23		SAVOURY BISCUITS 150g x 2			PIP CODE 310-7893	M					
8	13/12/22	13/12/23		GF WHITE ROLLS 4 PACK 200g			PIP CODE 344-3645	M					
9	13/12/22	13/12/23		GF PART BAKED ROLLS 4 PACK 200g			PIP CODE 344-3652	M					
10													
11													
12													
13													
14													

Once Only Prescriptions

	Admin Data	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1										
2										
3										

NAME: GEORGINA SMITH SPIN: 131344 DOB: 04/12/91 LOCATION: P ALLERGIES: GLUTEN / LACTOSE INTOLERANCE

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

ING1919

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NHS Forth Valley

supplementary kardex

METHADONE	Y	N
SUBOXONE	Y	N

Version 01

GLUTEN FREE PRODUCTS
KARDEX

ORDER CODE 04

Side A

Start Date: ___/___/___

Kardex Re-written Date: 13/12/22

Prescription Sheet No: 1 of 2

HMP CORNTONVALE

REGULAR PRESCRIPTIONS

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Inits	Dis-continued Date/Inits	MEDICATION FORM	Dose	Route	Times of Administration AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Inits
A															
B															
C															
D															
E															
F															
G															
H															
I															
J															
K															
L															
M															
N															
O															
P															

NAME: GEORGINA SMITH SPIN: 131344 DOB: 04/12/91 LOCATION: P ALLERGIES: GLUTEN / LACTOSE INTOLERANCE

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME

LOCATION

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	SIGN	COMMENTS
16/8/22								[redacted]		
23/8/22										
24/8/22										
30/8/22										
31/8/22										
6/9/22										
8/9/22										
13/9/22										
20/9/22										
21/9/22										
27/9/22										
28/9/22										
4/10/22										
6/10/22										
11/10/22										
18/10/22										
19/10/22										
25/10/22										
27/10/22										
1/11/22										

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith

DOB 4/12/91

SPIN 15/3444

LOC P.

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NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

ORDER CODE 05

NAME [redacted] LOCATION [redacted]

DRUG RECORDING SHEET

DATE	AM SIGN	NOON SIGN	PM SIGN	COMMENTS	MEDICATION CODE	SIGN	COMMENTS
21/11/22							
4/11/22							
8/11/22							
11							
1							
15/11/22							
22/11/22							
24/11/22							
25/11/22							
28/11/22							
2/12/22							
5/12/22							
7/12/22							
11							
13/12/22							

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE

5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME [redacted] SPRN 1313434

DOB [redacted] LOC [redacted]

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Kacoex 1 reverter 13/12/22
megacrinons

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME Georgina Smith

LOCATION Peebles

DRUG RECORDING SHEET

DATE	AM SIGN	NOON SIGN	PM SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENT
4/12/22							
29/12/22							
22/12/22							
23/12/22							
30/12/22							
4/1/23							
10/1/23							
Miles							

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith

DOB 4/2/91

SPIN 1312 44

LOC Peebles

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NAME [redacted]

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

NHS Forth Valley

LOCATION Redbraes

ORDER CODE 05

DRUG RECORDING SHEET DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	COMMENTS

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME [redacted]

DOB [redacted]

SPRN 13134464

LOC Redbraes

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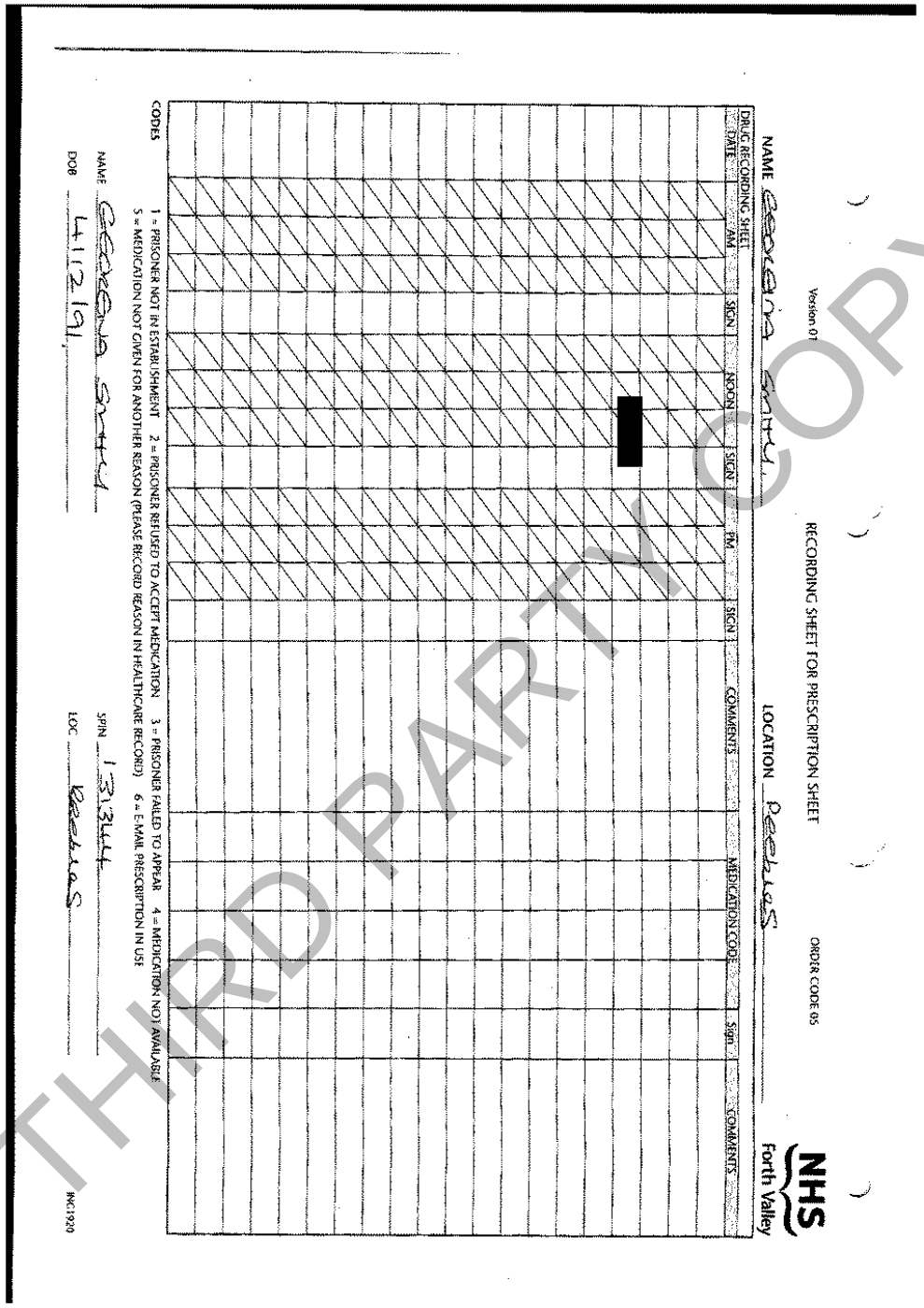

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NAME [redacted]

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

LOCATION Redbraes

DRUG RECORDING SHEET DATE	AM SIGN	NOON SIGN	PM SIGN	COMMENTS SIGN	MEDICATION CODE	SIGN	COMMENTS

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME [redacted]

DOB [redacted]

SPIN [redacted]

LOC Redbraes

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NAME Rebecca Smith

DRUG RECORDING SHEET

DATE | AM | SIGN | NOON | SIGN | PM | SIGN | COMMENTS

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Rebecca Smith

DOB 4/12/91

SPIN 1313444

LOC Rebbles

Kalnex 2 tablets 13/12/22
Cuts knee.

RECORDING SHEET FOR PRESCRIPTION SHEET

LOCATION Rebbles

ORDER CODE 05

NHS Forth Valley

DRUG RECORDING SHEET

DATE | AM | SIGN | NOON | SIGN | PM | SIGN | COMMENTS | MEDICATION CODE | Sign | COMMENTS

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Health and Social Care Partnership

Glasgow City HSCP
Health & Social Care Partnership

NHS Greater Glasgow and Clyde Prison Healthcare
In Possession Spot Check Form

HMP ~~Barlinnie/ Greenock/ Low Moss~~ LILIAS

Date & time of spot check: 24/1/23

Patient Name: GEORGINA SMITH SPIN: 131344

D.O.B: 4/12/91 Location:

Medication Prescribed (In Possession)	Amount required to be In Possession
AMITRIPTYLINE 25mg	12
QUETIAPINE 150mg	4
DOXYCYCLINE	4

Spot Check

Medication in possession	Number of tabs/caps found	Discrepancy (if any) from calcilated amount
AMITRIPTYLINE 25mg	12	0
QUETIAPINE 150mg	4	0
DOXYCYCLINE	4	0

Action Taken

(Pass) / Fail (delete as appropriate)

Comments / details of medication removed from the patient's possession:

Documented on Vision: (Yes) /No

Appointment arranged with prescriber: Yes /(No)

If so, date of appointment:

Individual carrying out spot check to print & sign: CHRISTINE CAMPBELL / CCampbell

Designation: Charge nurse - Primary Care.

Witness of spot check to print & sign: Lauren McTaggart / LMT

Designation: HCSW - Primary Care

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Urgent Clinical Note

Name: **Georgina Smith**
CHI: **0412913127**

NHS Forth Valley

Registered GP Name: [redacted]
Registered GP Practice: Kilbirnie Medical Practice

Referral Management [redacted] Clinical Note

Recorded by: [redacted] / Dietetics (R3)
Recorded on: 13 January 2022 12:04

Presenting Complaint, Investigations, Results, Diagnosis:

Dear Dr. Kildare,

Thank you for your referral for this lady.

It is difficult, within the prison environment, to trial dietary exclusions and make any recommendations. In the first instance you mention ongoing constipation and as cramping and bloating are common symptoms of constipation it might be as straightforward as this rather than it being any kind of dietary intolerance. It is really common to experience discomfort/cramps once a meal has been taken due to everything trying to move along the gut, it is not likely to be anything specifically attributed to the meal itself.

I would initially suggest trialling a regular laxative such as Laxido in addition to her trying to increase her fibre intake. Fybogel could be prescribed however unless she is willing and able to increase her fluid intake substantially it could actually make the situation worse.

This lady is unlikely to have a lactose intolerance as the most common symptom associated with this is loose stools, however if she reports an improvement by excluding milk products then, if possible she could be offered lactose free milk or a plant based alternative (suitably fortified). She can also be advised that cheddar/mozzarella/feta and butter all have lower to minimal lactose in them and are generally well tolerated in small amounts.

Regarding gluten, Coeliac Disease has been excluded therefore it is highly unlikely she has an issue with gluten. It could potentially be wheat which is contributing to symptoms and in that case she can, if she wishes, continue to exclude wheat containing products but there is no need to worry about gluten contamination i.e. she would not require GF [redacted] krispies/oats.

I hope that this information is helpful. Should you find that Ms Smith continues to have symptoms despite her bowels moving on a regular basis then please feel free to contact me at [redacted] and/or re-refer her to us. At the moment I am not carrying out face-to-face appointments but if needed could have a telephone discussion with the patient.

Best wishes
[redacted]

0 Medication Recommendation(s):

No (new, stop or alter) medication recommendation(s) entered/recorded

0 Follow Up action(s):

No 'follow up' info recorded/entered

Further Info:

No 'further info' recorded/entered

Form completed by: [redacted] Miller on Thu 13 January 2022 at 12:18
Form sent to: Primary and secondary care document management system(s), eg. Docman and EDMS

Form: CN388343, for CHI: 0412913127, generated by: [redacted] Miller on 13/01/2022 12:18:46

Urgent Clinical Note: Georgina Smith / 0412913127

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Glasgow City HSCP
Health and Social Care Partnership

Glasgow City HSCP
Health & Social Care Partnership

NHS Greater Glasgow and Clyde Prison Healthcare
In Possession Spot Check Form

HMP ~~Barlinnie/ Greenock/ Low Moss~~ LILIAS

Date & time of spot check: 24/1/23

Patient Name: GEORGINA SMITH SPIN: 131344

D.O.B: 4/12/91 Location:

Medication Prescribed (In Possession)	Amount required to be In Possession
AMITRIPTYLINE 25mg	12
QUETIAPINE 150mg	4
DOXYCYCLINE	4

Spot Check

Medication in possession	Number of tabs/caps found	Discrepancy (if any) from calctilated amount
AMITRIPTYLINE 25mg	12	0
QUETIAPINE 150mg	4	0
DOXYCYCLINE	4	0

Action Taken

(Pass) / Fail (delete as appropriate)

Comments / details of medication removed from the patient's possession:

Documented on Vision: (Yes) /No

Appointment arranged with prescriber: Yes /(No)

If so, date of appointment:

Individual carrying out spot check to print & sign: CHRISTINE CAMPBELL / CCampbell

Designation: Charge nurse - Primary Care.

Witness of spot check to print & sign: Lauren McTaggart / LMT

Designation: HCSW - Primary Care

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Health and Social Care Partnership

Glasgow City HSCP
Health & Social Care Partnership

NHS Greater Glasgow and Clyde Prison Healthcare
In Possession Spot Check Form

HMP ~~Barlinnie/ Greenock/ Low Moss~~ LILIAS

Date & time of spot check: 24/1/23

Patient Name: GEORGINA SMITH

SPIN: 131344

D.O.B: 4/12/91

Location:

Medication Prescribed (In Possession)	Amount required to be in Possession
AMITRIPTYLINE 25mg	12
QUETIAPINE 150mg	4
DOXYCYCLINE	4

Spot Check

Medication in possession	Number of tabs/caps found	Discrepancy (if any) from calculated amount
AMITRIPTYLINE 25mg	12	
QUETIAPINE 150mg	4	8
DOXYCYCLINE	4	8

Action Taken

(Pass) / Fail (delete as appropriate)

Comments / details of medication removed from the patient's possession:

Documented on Vision: (Yes) /No

Appointment arranged with prescriber: Yes /(No)

If so, date of appointment:

Individual carrying out spot check to print & sign: CHRISTINE CAMPBELL / CCampbell

Designation: Charge nurse - Primary Care.

Witness of spot check to print & sign: Lauren McTaggart / LMT

Designation: HSW - Primary Care

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Glasgow City HSCP
Health and Social Care Partnership

Glasgow City HSCP
Health & Social Care Partnership

NHS Greater Glasgow and Clyde Prison Healthcare
In Possession Spot Check Form

HMP ~~Barlinnie/ Greenock/ Low Moss~~ LILIAS

Date & time of spot check: 24/1/23

Patient Name: GEORGINA SMITH

SPIN: 131344

D.O.B: 4/12/91

Location:

Medication Prescribed (In Possession)	Amount required to be in Possession
AMITRIPTYLINE 25mg	12
QUETIAPINE 150mg	4
DOXYCYCLINE	4

Spot Check

Medication in possession	Number of tabs/caps found	Discrepancy (if any) from calculated amount
AMITRIPTYLINE 25mg	12	
QUETIAPINE 150mg	4	8
DOXYCYCLINE	4	8

Action Taken

(Pass) / Fail (delete as appropriate)

Comments / details of medication removed from the patient's possession:

Documented on Vision: (Yes) /No

Appointment arranged with prescriber: Yes /(No)

If so, date of appointment:

Individual carrying out spot check to print & sign: CHRISTINE CAMPBELL / Campbell

Designation: Charge nurse - Primary Care.

Witness of spot check to print & sign: lauren mcTaggart / LMT

Designation: HSW - Primary Care

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HMP YOI/LILIAS

DENTAL TREATMENT REQUEST FORM

Name: Georgina Smith

SPIN: 131344

Date of Birth: 04/12/1991

Location: House 2 Room 4

EMERGENCIES WILL BE DEALT WITH AS SOON AS POSSIBLE

Please tick the box that describes your main problem

Problem	Tick One
Swollen Face	
Bleeding won't stop after tooth was removed	
Severe throbbing pain	
Broken tooth/lost filling	
New Denture or repair	✓
Check-up & scale & polish	

Other comments: This is urgent as i cant wear them without cutting my mouth and getting ulcers and ave very sore mouth

Date: 15/02/2023

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NHS
Greater Glasgow and Clyde

MDMHT REFERRAL FORM

Name Georgina Smith Spin Number 1313444

D.O.B. 04/12/1991 Date of Admission

Referral completed by [redacted]gina Smith

Date of referral 15/02/23

Please state the reasons why you are referring to the Mental Health Team in the box below

I need to speak to mental Health nurse for on-going issues.
Thanks.

Please complete the following,

Have you/the prisoner seen the Mental Health Team before? Yes/No
Are you/the prisoner on anti-psychotic medication Yes/No
Have you/the prisoner received support from a CPN? Yes/No
Is there a history of self harming behaviour Yes/No

FOR ADMINISTRATION PURPOSES ONLY

Date Received by Admin..... Signature.....

Date assessed by MHN ..... Signature.....

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18-Jun-2026 SARA
Additional: Scanned Document

Filename: igprda202606181514430.pdf
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Pages:

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Georgina Smith B1344
For February

NHS Scotland Gluten-Free Food Service

Table 1: Nationally agreed number of gluten-free units

Age and Sex	Units per month
1-3 years	10
4-6 years	11
7-10 years	13
11-14 years	15
15-18 years	18
Male 19-59 years	18
Male 60-74 years	16
Male 75+ years	14
Female 19-74 years	14
Female 75+ years	12
Breastfeeding	+4
3rd trimester of pregnancy	+1

Table 2: How much is a gluten-free unit worth?

Food/item	Units
400g bread/rolls/baguette	1
500g flour/bread mix	2
200g biscuits/crackers/crispbreads	1
250g pasta	1
2 pizza bases	1
300g breakfast cereal/500g oats	1½

Date of publication: 24th January 2014

* Glutafin
Shortbread Biscuits 100g.

* Juvela Savoury Biscuits 150g.
Take off please
-2x

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Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

Urgent Clinical Note

Name: **Georgina Smith**
CHI: **0412913127**

NHS Forth Valley

Registered GP Name: [redacted]
Registered GP Practice: Kilbirnie Medical Practice

Referral Management [redacted] Clinical Note

Recorded by: [redacted] / Dietetics (R3)
Recorded on: 13 January 2022 12:04

Presenting Complaint, Investigations, Results, Diagnosis:

Dear Dr. Kildare,

Thank you for your referral for this lady.

It is difficult, within the prison environment, to trial dietary exclusions and make any recommendations. In the first instance you mention ongoing constipation and as cramping and bloating are common symptoms of constipation it might be as straightforward as this rather than it being any kind of dietary intolerance. It is really common to experience discomfort/cramps once a meal has been taken due to everything trying to move along the gut, it is not likely to be anything specifically attributed to the meal itself.

I would initially suggest trialling a regular laxative such as Laxido in addition to her trying to increase her fibre intake. Fybogel could be prescribed however unless she is willing and able to increase her fluid intake substantially it could actually make the situation worse.

This lady is unlikely to have a lactose intolerance as the most common symptom associated with this is loose stools, however if she reports an improvement by excluding milk products then, if possible she could be offered lactose free milk or a plant based alternative (suitably fortified). She can also be advised that cheddar/mozzarella/feta and butter all have lower to minimal lactose in them and are generally well tolerated in small amounts.

Regarding gluten, Coeliac Disease has been excluded therefore it is highly unlikely she has an issue with gluten. It could potentially be wheat which is contributing to symptoms and in that case she can, if she wishes, continue to exclude wheat containing products but there is no need to worry about gluten contamination i.e. she would not require GF [redacted] krispies/oats.

I hope that this information is helpful. Should you find that Ms Smith continues to have symptoms despite her bowels moving on a regular basis then please feel free to contact me at [redacted] and/or re-refer her to us. At the moment I am not carrying out face-to-face appointments but if needed could have a telephone discussion with the patient.

Best wishes
[redacted]

0 Medication Recommendation(s):

No (new, stop or alter) medication recommendation(s) entered/recorded

0 Follow Up action(s):

No 'follow up' info recorded/entered

Further Info:

No 'further info' recorded/entered

Form completed by: [redacted] Miller on Thu 13 January 2022 at 12:18
Form sent to: Primary and secondary care document management system(s). eg. Docman and EDMS

Form: CN388343, for CHI: 0412913127, generated by: [redacted] Miller on 13/01/2022 12:18:46

Urgent Clinical Note: Georgina Smith / 0412913127

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Urgent Clinical Note

Name: **Georgina Smith**
CHI: **0412913127**

NHS Forth Valley

Registered GP Name: [redacted]
Registered GP Practice: Kilbirnie Medical Practice

Referral Management [redacted] Clinical Note

Recorded by: [redacted] / Dietetics (R3)
Recorded on: 13 January 2022 12:04

Presenting Complaint, Investigations, Results, Diagnosis:

Dear Dr. Kildare,

Thank you for your referral for this lady.

It is difficult, within the prison environment, to trial dietary exclusions and make any recommendations. In the first instance you mention ongoing constipation and as cramping and bloating are common symptoms of constipation it might be as straightforward as this rather than it being any kind of dietary intolerance. It is really common to experience discomfort/cramps once a meal has been taken due to everything trying to move along the gut, it is not likely to be anything specifically attributed to the meal itself.

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Best wishes
[redacted]

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0 Follow Up action(s):

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Further Info:

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Form: CN388343, for CHI: 0412913127, generated by: [redacted] Miller on 13/01/2022 12:18:46

Urgent Clinical Note: Georgina Smith / 0412913127

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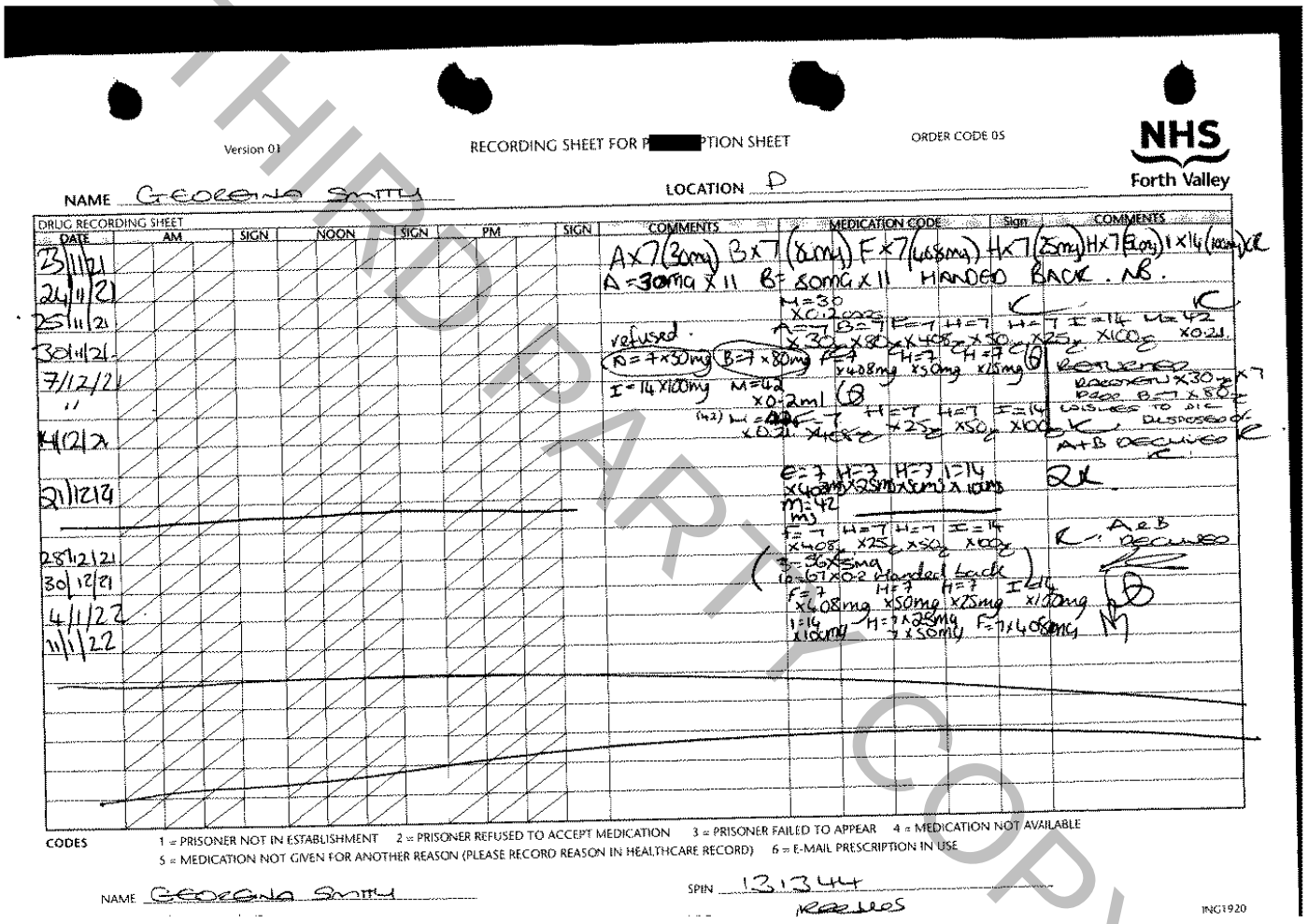

Version 01

RECORDING SHEET FOR P[redacted]PTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME Georgina Smith

LOCATION D

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS
23/11/21							
24/11/21							
25/11/21							
30/11/21							
7/12/21							
"							
14/12/21							
21/12/21							
28/12/21							
30/12/21							
4/1/22							
11/1/22							

COMMENTS

A×7(30mg) B×7(80mg) F×7(40mg) H×7(25mg) H×7(50mg) I×14(100mg)×2

A=30mg X11 B=80mg x11 HANDED BACK. NB.

refused.

R=7×50mg B=7×80mg I=14×100mg M=42 x0.2ml (8)

MEDICATION CODE

Sign

COMMENTS

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith

SPIN 131344

ING1920

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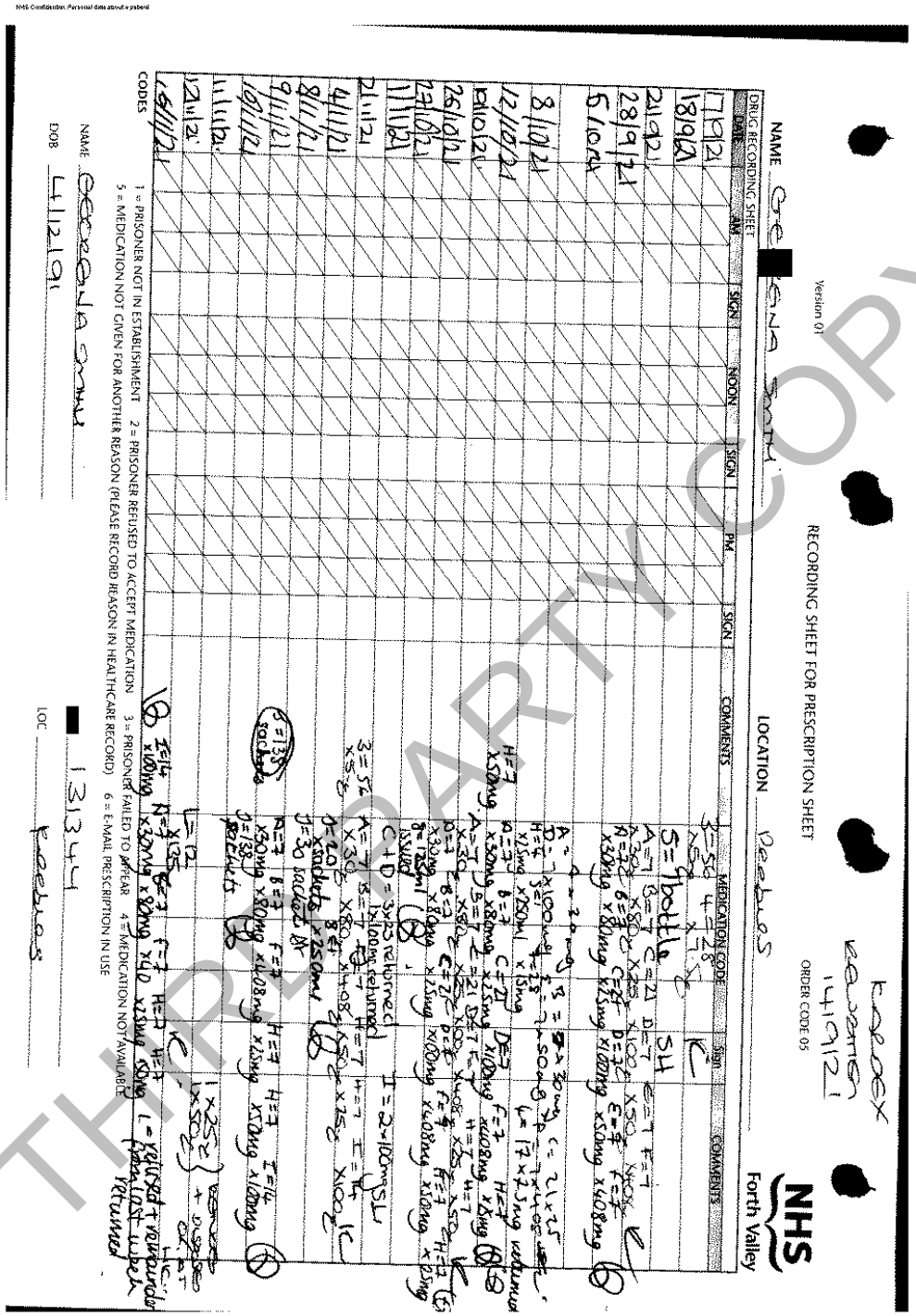
iGPR Report



RECORDING SHEET FOR PRESCRIPTION SHEET

NHS Forth Valley

Version 01

ORDER CODE 03

LOCATION Peebles

NAME Gre[redacted] Scott

DRUG RECORDING SHEET

DATE	AM SIGN	NOON	PM SIGN	COMMENTS	MEDICATION CODE	INIT	COMMENTS
17/9/21				3=Sat 4=28	7	KC	
18/9/21				5= 1 bottle	7	SH	
21/9/21				A=7 B=7 C=21 D=7 E=7 F=7			
28/9/21				A=7 B=7 C=21 D=7 E=7 F=7			
5/10/21				A=7 B=7 C=21 D=7 E=7 F=7			
8/10/21				A=7 B=7 C=21 D=7 E=7 F=7			
12/10/21				A=7 B=7 C=21 D=7 E=7 F=7			
26/10/21				A=7 B=7 C=21 D=7 E=7 F=7			
27/10/21				A=7 B=7 C=21 D=7 E=7 F=7			
1/11/21				A=7 B=7 C=21 D=7 E=7 F=7			
2/11/21				A=7 B=7 C=21 D=7 E=7 F=7			
4/11/21				A=7 B=7 C=21 D=7 E=7 F=7			
8/11/21				A=7 B=7 C=21 D=7 E=7 F=7			
9/11/21				A=7 B=7 C=21 D=7 E=7 F=7			
10/11/21				A=7 B=7 C=21 D=7 E=7 F=7			
11/11/21				A=7 B=7 C=21 D=7 E=7 F=7			
12/11/21				A=7 B=7 C=21 D=7 E=7 F=7			
16/11/21				A=7 B=7 C=21 D=7 E=7 F=7			

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE

5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME [redacted]

DOB 4/12/91

CHI [redacted] 13134

LOC Peebles

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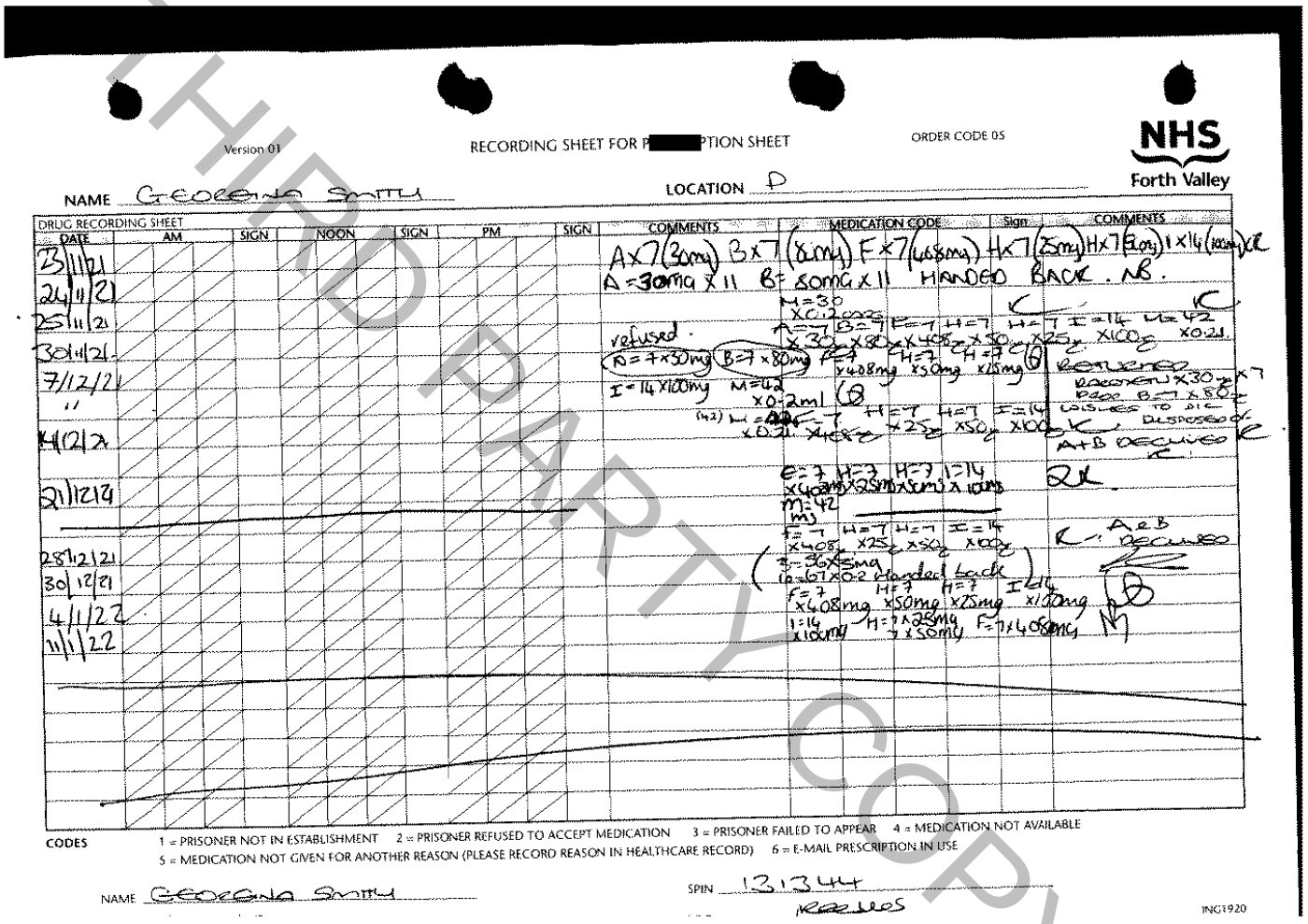

Version 01

RECORDING SHEET FOR P[redacted]PTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME Georgina Smith

LOCATION D

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS
23/11/21							
24/11/21							
25/11/21							
30/11/21							
7/12/21							
"							
14/12/21							
21/12/21							
28/12/21							
30/12/21							
4/1/22							
11/1/22							

MEDICATION CODE | Sign | COMMENTS

A×7(30mg) B×7(80mg) F×7(408mg) H×7(25mg) H×7(50mg) I×14(100mg) K

A=30mg X11 B=80mg X11 HANDED BACK. NB.

refused.

R=7×50mg B=7×80mg

I=14×100mg M=42 X0·2ml (8)

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NAME Georgina Smith SPIN 131344

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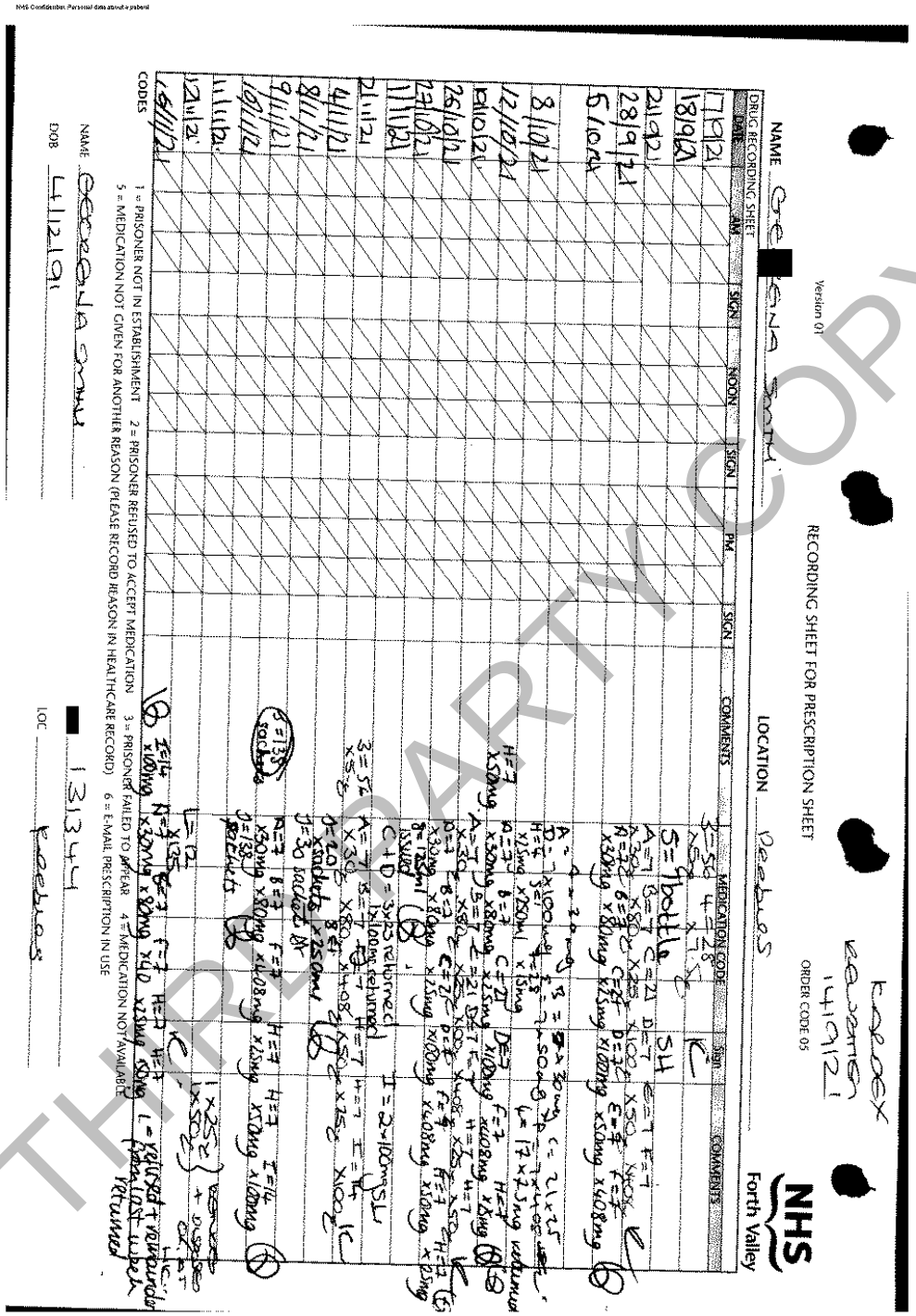

RECORDING SHEET FOR PRESCRIPTION SHEET

NHS Forth Valley

Version 01

NAME [redacted] Gerlena Smith

LOCATION Peebles

DRUG RECORDING SHEET

DATE	AM SIGN	NOON SIGN	PM SIGN	COMMENTS	MEDICATION CODE	SIGN	COMMENTS
17/9/21				3=Sx	4=28	KC	
18/9/21				2=x			
19/9/21				5=1bottle	SH		
28/9/21				A=7 B=7 C=21 D=7 E=7 F=7			
5/10/21				A=3x2 B=3 C=7 D=7 E=7 F=7 x30mg x80mg x15mg x40mg x30mg x80mg x15mg x40mg			
8/10/21				A=7 B=7 C=21 D=7 E=7 F=7 x30mg x80mg x15mg x40mg			
12/10/21				A=7 B=7 C=21 D=7 E=7 F=7 x30mg x80mg x15mg x40mg			
14/10/21				A=7 B=7 C=21 D=7 E=7 F=7 x30mg x80mg x15mg x40mg			
25/10/21				A=7 B=7 C=21 D=7 E=7 F=7 x30mg x80mg x15mg x40mg			
27/10/21				A=7 B=7 C=21 D=7 E=7 F=7 x30mg x80mg x15mg x40mg			
1/11/21				A=7 B=7 C=21 D=7 E=7 F=7 x30mg x80mg x15mg x40mg			
2/11/21				A=7 B=7 C=21 D=7 E=7 F=7 x30mg x80mg x15mg x40mg			
4/11/21				A=7 B=7 C=21 D=7 E=7 F=7 x30mg x80mg x15mg x40mg			
8/11/21				A=7 B=7 C=21 D=7 E=7 F=7 x30mg x80mg x15mg x40mg			
9/11/21				A=7 B=7 C=21 D=7 E=7 F=7 x30mg x80mg x15mg x40mg			
10/11/21				A=7 B=7 C=21 D=7 E=7 F=7 x30mg x80mg x15mg x40mg			
11/11/21				A=7 B=7 C=21 D=7 E=7 F=7 x30mg x80mg x15mg x40mg			
12/11/21				A=7 B=7 C=21 D=7 E=7 F=7 x30mg x80mg x15mg x40mg			
16/11/21				A=7 B=7 C=21 D=7 E=7 F=7 x30mg x80mg x15mg x40mg			

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NHS Confidential: Personal data about a patient

NAME Gerlena Smith

DOB 4/12/91

[redacted] 133144

LOC Peebles

Index examen 14/9/21

ORDER CODE 03

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NAME: DOB/CHI: UNIT ALLOWANCE: DATE:

This list is intended as a reference document. While NHS GGC endeavours to ensure that the information in this list is correct, NHS GGC does not warrant the accuracy and completeness of the material in the list.

ITEM	CODE	NO OF UNITS	QUANTITY
BREAD & ROLLS			
BARKAT			
~~Home Fresh Parbaked Rolls 260g~~	~~(PIP Code: 326-4879)~~	~~4~~	Not available
GENIUS			
Brown Sandwich Bread Sliced 535g (x6)	(PIP Code 379-8550)	6	
White Sandwich Bread Sliced 535g (x6)	(PIP Code 379-8568)	6	
Brown Seeded Farmhouse Loaf Sliced 535g (x6)	(PIP Code 403-8345)	6	
GLUTAFIN			
Baguettes 350g (2 x 175g)	(PIP Code: 224-0117)	1	
Select Fibre Loaf Sliced 400g	(PIP Code: 054-6101)	1	
Select White Loaf Sliced 400g	(PIP Code:054-6093)	1	
~~Select Seeded Loaf Sliced 400g~~	~~(PIP Code: 308-9364)~~	~~1~~	~~x 1~~ (1)
Select Fresh Seeded Loaf Sliced 400g (x 8)	(PIP Code: 402-3685)	8	
Select Fresh Brown Loaf Sliced 400g (x 8)	(PIP Code: 330-6800)	8	
Select Fresh White Loaf Sliced 400g (x 8)	(PIP Code: 290-6840)	8	
JUST			
White Sandwich Bread 600g x 6	(PIP Code:845-3813)	9	
Good White Rolls 260g (4x 65g) x 6	(PIP Code: 845-3839)	6	
JUVELA			
Fibre Loaf Sliced 400g	(PIP Code: 074-8632)	1	
Fibre Loaf Unsliced 400g	(PIP Code: 010-1675)	1	
White Loaf Sliced 400g	(PIP Code: 074-8590)	1	
White Loaf Unsliced 400g	(PIP Code: 031-4781)	1	
Part-baked Fibre Loaf Unsliced 400g	(PIP Code: 273-6890)	1	
Part-baked White Loaf Unsliced 400g	(PIP Code: 273-6882)	1	
Fibre Bread Rolls (5 pack - each roll 85g) 425g	(PIP Code: 080-3668)	1	
Fresh Baked Fibre Loaf Sliced 400g x 8	(PIP Code: 339-9789)	8	
Fresh Baked White Loaf Sliced 400g x 8	(PIP Code: 322-0217)	8	
Fresh White Rolls (5 pack – 5 x 85g) 425g x 8	(PIP Code 355-8871)	8	
Fresh Fibre Rolls (5 pack – 5 x 85g) 425g x 8	(PIP Code 355-6800)	8	
Part-baked Fibre Rolls (5 pack - each roll 75g) 375g	(PIP Code: 262-9020)	1	
TAKE OFF ~~Part-baked White Rolls (5 pack - each roll 75g) 375g~~	(PIP Code: 243-7257)	1	0
White Bread Rolls (5 pack - each roll 85g) 425g	(PIP Code: 010-5916)	1	
Mixed Case Fresh White (4 x 5 (85g) rolls + 4 loaves sliced (4 x 400g)	(PIP Code: 836-4259)	8	
Mixed Case Fresh Fibre (4 x 5 (85g) rolls + 4 loaves sliced (4 x 400g)	(PIP Code: 836-4242)	8	
Mixed Case Fresh Loaves (4 x 400g fibre loaves + 4 x 400g white loaves)	(PIP Code: 839-2821)	8	
Mixed Case Fresh Rolls (4 x 5 (85g) fibre rolls + 4 x 5 (85g) white rolls)	(PIP Code: 839-2839)	8	
Mixed Case Fresh Loaves and Rolls (4 x 5 (85g) fibre rolls + 4 x 400g white loaves)	(PIP Code: 839-2847)	8	
Mixed Case Fresh Loaves and Rolls (4 x 5 (85g) white rolls + 4 x 400g fibre loaves)	(PIP Code: 839-2730)	8	

Gluten Free Food Prescribable List 2021 Page 2

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NAME: DOB/CHI: UNIT ALLOWANCE: DATE:

WARBURTONS			
Brown Bread Sliced 400g (x4)	(PIP Code: 368-5278)	4	
White Bread Sliced 400g (x4)	(PIP Code: 368-5260)	4	
White Rolls 220g (3 rolls per pack) x 4	(PIP Code: 368-5286)	2	
Brown Rolls 220g (3 rolls per pack) x 4	(PIP Code: 368-5294)	2	

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NAME: DOB/CHI: UNIT ALLOWANCE: DATE:

ITEM	CODE	NO OF UNITS	QUANTITY
HOME BAKING			
BARKAT			
Bread Mix 500g	(PIP Code: 051-5336)	2	
All Purpose Flour Mix 500g	(PIP Code: 399-2377)	2	x 1 (2)
GLUTAFIN			
Bread Mix 500g	(PIP Code: 298-8418)	2	
Fibre Bread Mix 500g	(PIP Code: 298-8426)	2	
Multipurpose White Mix 500g	(PIP Code: 231-2981)	2	1x1 (2)
Multipurpose Fibre Mix 500g	(PIP Code: 231-2973)	2	
Select Bread Mix 500g	(PIP Code: 274-4951)	2	
Select Fibre Bread Mix 500g	(PIP Code: 297-9912)	2	
Select Multipurpose Fibre Mix 500g	(PIP Code: 004-5591)	2	
Select Multipurpose White Mix 500g	(PIP Code: 004-5187)	2	
JUVELA			
Fibre Mix 500g	(PIP Code: 023-5042)	2	1x (2)
Harvest Mix 500g	(PIP Code: 247-7875)	2	
White Mix 500g	(PIP Code: 035-2161)	2	
PURE			
Bakery Blend 1kg	(PIP Code: 282-8580)	4	
White [redacted] Flour 500g	(PIP Code: 325-7904)	2	
Brown [redacted] Flour 500g	(PIP Code: 325-7912)	2	
* Potato Starch Flour 500g	(PIP Code: 325-7920)	2	1x (2)
Tapioca Starch Flour 500g	(PIP Code: 325-7946)	2	
White Teff Flour 1kg	(PIP Code: 343-1483)	4	
Brown Teff flour 1kg	(PIP Code: 343-1467)	4	
TRITAMYL			
Self Raising Flour 2kg	(PIP Code: 228-0675)	8	
White Bread Mix 2kg	(PIP Code: 228- 0667)	8	
Brown Bread Mix 1kg	(PIP Code: 228-0659)	4	

ADD~

Bread, Scones & wraps

Baking

flour

Pancakes.

Binding for muffins, Cakes

* Potato starch to thicken sauces, soups

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NAME: DOB/CHI: UNIT ALLOWANCE: DATE:

ITEM	CODE	NO OF UNITS	QUANTITY
PIZZA BASES			
GLUTAFIN			
Pizza Bases 300g (2 x 150g)	(PIP Code: 334-1112)	1	1 x 1
JUVELA			
Pizza Bases (x 2 180g) 360g	(PIP Code: 265-4390)	1	

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NAME: DOB/CHI: UNIT ALLOWANCE: DATE:

ITEM	CODE	NO OF UNITS	QUANTITY
PASTA			
BARKAT			
Animal Shapes 500g	(PIP Code: 339-4913)	2	
Macaroni 500g	(PIP Code: 339-4921)	2	
Spaghetti 500g	(PIP Code: 339-4947)	2	
Spirals 500g	(PIP Code: 339-4939)	2	
Shells 500g	(PIP Code: 392-6763)	2	
Alphabet Shapes 500g	(PIP Code: 339-4962)	2	
Tagliatelle 500g	(PIP Code: 339-4954)	2	
~~Gnocchi 250g~~	~~(PIP Code: 399-1577)~~	~~1~~	Not available
Buckwheat Pasta Penne 250g	(PIP Code: 232-3319)	1	
Buckwheat Pasta Spirals 250g	(PIP Code: 232-2673)	1	
GLUTAFIN			
Spirals 500g	(PIP Code: 211-5178)	2 x 2 = 4	x 1 (2)
Penne 500g	(PIP Code: 211-5152)	2	
Long Cut Spaghetti 500g	(PIP Code: 211-5160)	2	
Fibre Fusilli 500g	(PIP Code: 386-2646)	2	
JUVELA			
Fibre Penne 500g	(PIP Code: 332-8010)	2	
Tagliatelle 250g	(PIP Code: 319-3497)	1	
RIZOPIA			
Organic Brown [redacted] Fusilli 500g	(PIP Code: 340-0074)	2	
Organic Brown [redacted] Spaghetti 500g	(PIP Code: 340-0090)	2	
Organic Brown [redacted] Penne 500g	(PIP Code: 340-0082)	2	
Organic Brown [redacted] Lasagne 375g	(PIP Code: 340-0108)	1½	

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NAME: DOB/CHI: UNIT ALLOWANCE: DATE:

ITEM	CODE	NO OF UNITS	QUANTITY
CRACKERS & CRISPBREAD			
BARKAT			
Matzo Crackers Round 200g	(PIP Code: 337-8296)	1	
Crackers 200g	(PIP Code: 342-7457)	1	
Crispbread 150g	(PIP Code: 341-0420)	½	
GLUTAFIN			
Crackers 200g	(PIP Code: 309-3362)	1 x 1 = 1	1
JUVELA			
Crispbread 200g	(PIP Code: 236-6136)	1	

Take off x

ITEM	CODE	NO OF UNITS	QUANTITY
BAKING AIDS			
BARKAT			
Xanthan Gum 80g	(PIP Code: 400-8074)	½	
PURE			
Xanthan Gum 100g	(PIP Code: 282-8572)	1	x1 1

ADD

ITEM	CODE	NO OF UNITS	QUANTITY
BREAKFAST CEREAL			
BARKAT			
Cornflakes 250g	(PIP Code: 339-4905)	1 ½	
JUVELA			
Flakes 300g	(PIP Code 371-1652)	1 ½	
Fibre Flakes 300g	(PIP Code 371-1660)	1 ½	
Corn Flakes 375g	(PIP Code 388-2990)	1 ½	
Crispy [redacted] 375g	(PIP Code 388-2982)	1 ½ x2 = 3	x1 3
Pure Cornflakes 300g	(PIP Code 371-1678)	1 ½	

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7 ½.

GLUTEN FREE FOOD PRODUCT MANUFACTURERS CONTACT DETAILS

DR SCHAR
Glutafin,
Dr Schar,
Units 1-2, Station [redacted] 442 Stockport Road,
Warrington, WA4 2GW
Tel: 0800 988 2470
Email: glutenfree@glutafin.co.uk
www.glutafin.co.uk
Tel: ordering 0844 854 4998,
http://www.glutafin.co.uk/healthcare-professionals/glutafin-fresh-bread-ordering/
Brands- GLUTAFIN

GENIUS GLUTEN FREE
Genius Foods
22 Northumberland Street South
West Lane
Edinburgh EH3 6JD
Tel: 0845 874 4000
www.geniusglutenfree.com
Brands – GENIUS

GLUTEN FREE FOODS LTD
Unit 270 Centennial Park
Centennial Avenue, Elstree
Borehamwood
Hertfordshire WD6 3SS
Tel: 020 8953[redacted]
Fax: 020 8953 8285
Email: info@glutenfree-foods.co.uk
www.glutenfree-foods.co.uk
Brands – BARKAT, TRITAMYL

HERO UK LTD trading as JUVELA
19 De Havilland Drive
Liverpool L24 8RN
Tel: 0800 783 1992
Email: info@juvela.co.uk
www.juvela.co.uk
Brands – JUVELA GLUTEN FREE

INNOVATIVE SOLUTIONS UK LTD
Mayfield Centre
Mayfield Street
Rochdale OL16 2UZ
Tel: 01706 748713 Fax: 01706 341357
Info@pureglutenfree.co.uk
www.pureglutenfree.co.uk
Brands – INNOVATIVE SOLUTIONS, PURE

JUST: GLUTEN FREE BAKERY
Block 21 Unit 7
Motherwell Food Park
ML4 3NP
T: 01698 841559
E: info@justglutenfree.co.uk
www.justglutenfree.co.uk
Community pharmacy to order by email using all of the addresses below:
admin@justglutenfree.co.uk
ronnie@justglutenfree.co.uk
ola@justglutenfree.co.uk
Brands – JUST

PGR HEALTH FOODS LTD
PO Box 214
Hertford SG14 2ZX
Tel: 01992 581715
info@pgrhealthfoods.co.uk
www.rizopia.co.uk
Brands – RIZOPIA

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Hereford House
Hereford Street
Bolton
BL1 8JB
Tel: 0800 243684
www.newburnbakehouse.com
Brands- WARBURTONS

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ALLIANCE HEALTH CARE
43[redacted] Lane
Chessington
Surrey
KT9 1SN
Tel: 020 8391 2323
Pharmacy Services Tel: 020 3044 8021
Gluten Free Bread Team:0844 854 4998
information@alliance-healthcare.co.uk

AAH PHARMACEUTICALS
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Glasgow
G42 0PH
Tel: 0141 423 5868
Order line Tel: 0844 561 8699
enquiries@aah.co.uk

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Georgina Smith B1344
For February

NHS Scotland Gluten-Free Food Service

Table 1: Nationally agreed number of gluten-free units

Age and Sex	Units per month
1-3 years	10
4-6 years	11
7-10 years	13
11-14 years	15
15-18 years	18
Male 19-59 years	18
Male 60-74 years	16
Male 75+ years	14
Female 19-74 years	14
Female 75+ years	12
Breastfeeding	+4
3rd trimester of pregnancy	+1

Table 2: How much is a gluten-free unit worth?

Food/item	Units
400g bread/rolls/baguette	1
500g flour/bread mix	2
200g biscuits/crackers/crispbreads	1
250g pasta	1
2 pizza bases	1
300g breakfast cereal/500g oats	1½

Date of publication: 24th January 2014

* Glutafin
Shortbread Biscuits 100g.

* Juvela Savoury Biscuits 150g.
Take off please
-2x

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HMP YOI/LILIAS

DENTAL TREATMENT REQUEST FORM

Name: Georgina Smith

SPIN: 131344

Date of Birth: 04/12/1991

Location: House 2 Room 4

EMERGENCIES WILL BE DEALT WITH AS SOON AS POSSIBLE

Please tick the box that describes your main problem

Problem	Tick One
Swollen Face	
Bleeding won't stop after tooth was removed	
Severe throbbing pain	
Broken tooth/lost filling	
New Denture or repair	✓
Check-up & scale & polish	

Other comments: This is urgent as i cant wear them without cutting my mouth and getting ulcers and ave very sore mouth

Date: 15/02/2023

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NAME: DOB/CHI: UNIT ALLOWANCE: DATE:

This list is intended as a reference document. While NHS GGC endeavours to ensure that the information in this list is correct, NHS GGC does not warrant the accuracy and completeness of the material in the list.

ITEM	CODE	NO OF UNITS	QUANTITY
BREAD & ROLLS			
BARKAT			
~~Home Fresh Parbaked Rolls 260g~~	~~(PIP Code: 326-4879)~~	~~4~~	Not available
GENIUS			
Brown Sandwich Bread Sliced 535g (x6)	(PIP Code 379-8550)	6	
White Sandwich Bread Sliced 535g (x6)	(PIP Code 379-8568)	6	
Brown Seeded Farmhouse Loaf Sliced 535g (x6)	(PIP Code 403-8345)	6	
GLUTAFIN			
Baguettes 350g (2 x 175g)	(PIP Code: 224-0117)	1	
Select Fibre Loaf Sliced 400g	(PIP Code: 054-6101)	1	
Select White Loaf Sliced 400g	(PIP Code:054-6093)	1	
~~Select Seeded Loaf Sliced 400g~~	~~(PIP Code: 308-9364)~~	~~1~~	~~x 1~~ (1)
Select Fresh Seeded Loaf Sliced 400g (x 8)	(PIP Code: 402-3685)	8	
Select Fresh Brown Loaf Sliced 400g (x 8)	(PIP Code: 330-6800)	8	
Select Fresh White Loaf Sliced 400g (x 8)	(PIP Code: 290-6840)	8	
JUST			
White Sandwich Bread 800g x 6	(PIP Code:845-3813)	9	
Good White Rolls 260g (4x 65g) x 6	(PIP Code: 845-3839)	6	
JUVELA			
Fibre Loaf Sliced 400g	(PIP Code: 074-8632)	1	
Fibre Loaf Unsliced 400g	(PIP Code: 010-1675)	1	
White Loaf Sliced 400g	(PIP Code: 074-8590)	1	
White Loaf Unsliced 400g	(PIP Code: 031-4781)	1	
Part-baked Fibre Loaf Unsliced 400g	(PIP Code: 273-6890)	1	
Part-baked White Loaf Unsliced 400g	(PIP Code: 273-6882)	1	
Fibre Bread Rolls (5 pack - each roll 85g) 425g	(PIP Code: 080-3668)	1	
Fresh Baked Fibre Loaf Sliced 400g x 8	(PIP Code: 339-9789)	8	
Fresh Baked White Loaf Sliced 400g x 8	(PIP Code: 322-0217)	8	
Fresh White Rolls (5 pack – 5 x 85g) 425g x 8	(PIP Code 355-8871)	8	
Fresh Fibre Rolls (5 pack – 5 x 85g) 425g x 8	(PIP Code 355-6800)	8	
Part-baked Fibre Rolls (5 pack - each roll 75g) 375g	(PIP Code: 262-9020)	1	
TAKE OFF ~~Part-baked White Rolls (5 pack - each roll 75g) 375g~~	(PIP Code: 243-7257)	~~1~~	0
White Bread Rolls (5 pack - each roll 85g) 425g	(PIP Code: 010-5916)	1	
Mixed Case Fresh White (4 x 5 (85g) rolls + 4 loaves sliced (4 x 400g)	(PIP Code: 836-4259)	8	
Mixed Case Fresh Fibre (4 x 5 (85g) rolls + 4 loaves sliced (4 x 400g)	(PIP Code: 836-4242)	8	
Mixed Case Fresh Loaves (4 x 400g fibre loaves + 4 x 400g white loaves)	(PIP Code: 839-2821)	8	
Mixed Case Fresh Rolls (4 x 5 (85g) fibre rolls + 4 x 5 (85g) white rolls)	(PIP Code: 839-2839)	8	
Mixed Case Fresh Loaves and Rolls (4 x 5 (85g) fibre rolls + 4 x 400g white loaves)	(PIP Code: 839-2847)	8	
Mixed Case Fresh Loaves and Rolls (4 x 5 (85g) white rolls + 4 x 400g fibre loaves)	(PIP Code: 839-2730)	8	

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NAME: DOB/CHI: UNIT ALLOWANCE: DATE:

WARBURTONS			
Brown Bread Sliced 400g (x4)	(PIP Code: 368-5278)	4	
White Bread Sliced 400g (x4)	(PIP Code: 368-5260)	4	
White Rolls 220g (3 rolls per pack) x 4	(PIP Code: 368-5286)	2	
Brown Rolls 220g (3 rolls per pack) x 4	(PIP Code: 368-5294)	2	

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NAME: DOB/CHI: UNIT ALLOWANCE: DATE:

ITEM	CODE	NO OF UNITS	QUANTITY
HOME BAKING			
BARKAT			
Bread Mix 500g	(PIP Code: 051-5336)	2	
All Purpose Flour Mix 500g	(PIP Code: 399-2377)	2	x 1 (2)
GLUTAFIN			
Bread Mix 500g	(PIP Code: 298-8418)	2	
Fibre Bread Mix 500g	(PIP Code: 298-8426)	2	
Multipurpose White Mix 500g	(PIP Code: 231-2981)	2	1x1 (1)
Multipurpose Fibre Mix 500g	(PIP Code: 231-2973)	2	
Select Bread Mix 500g	(PIP Code: 274-4951)	2	
Select Fibre Bread Mix 500g	(PIP Code: 297-9912)	2	
Select Multipurpose Fibre Mix 500g	(PIP Code: 004-5591)	2	
Select Multipurpose White Mix 500g	(PIP Code: 004-5187)	2	
JUVELA			
Fibre Mix 500g	(PIP Code: 023-5042)	2	1x (2)
Harvest Mix 500g	(PIP Code: 247-7875)	2	
White Mix 500g	(PIP Code: 035-2161)	2	
PURE			
Bakery Blend 1kg	(PIP Code: 282-8580)	4	
White [redacted] Flour 500g	(PIP Code: 325-7904)	2	
Brown [redacted] Flour 500g	(PIP Code: 325-7912)	2	
* Potato Starch Flour 500g	(PIP Code: 325-7920)	2	1x (2)
Tapioca Starch Flour 500g	(PIP Code: 325-7946)	2	
White Teff Flour 1kg	(PIP Code: 343-1483)	4	
Brown Teff flour 1kg	(PIP Code: 343-1467)	4	
TRITAMYL			
Self Raising Flour 2kg	(PIP Code: 228-0675)	8	
White Bread Mix 2kg	(PIP Code: 228- 0667)	8	
Brown Bread Mix 1kg	(PIP Code: 228-0659)	4	

ADD

Bread, Scones & wraps

Baking

flour

Pancakes.

Binding flour muffins, Cakes

* Potato starch to thicken sauces, soups

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NAME: DOB/CHI: UNIT ALLOWANCE: DATE:

ITEM	CODE	NO OF UNITS	QUANTITY
PIZZA BASES			
GLUTAFIN			
Pizza Bases 300g (2 x 150g)	(PIP Code: 334-1112)	1	1 x 1
JUVELA			
Pizza Bases (x 2 180g) 360g	(PIP Code: 265-4390)	1	

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NAME: DOB/CHI: UNIT ALLOWANCE: DATE:

ITEM	CODE	NO OF UNITS	QUANTITY
PASTA			
BARKAT			
Animal Shapes 500g	(PIP Code: 339-4913)	2	
Macaroni 500g	(PIP Code: 339-4921)	2	
Spaghetti 500g	(PIP Code: 339-4947)	2	
Spirals 500g	(PIP Code: 339-4939)	2	
Shells 500g	(PIP Code: 392-6763)	2	
Alphabet Shapes 500g	(PIP Code: 339-4962)	2	
Tagliatelle 500g	(PIP Code: 339-4954)	2	
~~Gnocchi 250g~~	~~(PIP Code: 399-1577)~~	~~1~~	Not available
Buckwheat Pasta Penne 250g	(PIP Code: 232-3319)	1	
Buckwheat Pasta Spirals 250g	(PIP Code: 232-2673)	1	
GLUTAFIN			
Spirals 500g	(PIP Code: 211-5178)	2 x 2 = 4	x 1 (2)
Penne 500g	(PIP Code: 211-5152)	2	
Long Cut Spaghetti 500g	(PIP Code: 211-5160)	2	
Fibre Fusilli 500g	(PIP Code: 386-2646)	2	
JUVELA			
Fibre Penne 500g	(PIP Code: 332-8010)	2	
Tagliatelle 250g	(PIP Code: 319-3497)	1	
RIZOPIA			
Organic Brown [redacted] Fusilli 500g	(PIP Code: 340-0074)	2	
Organic Brown [redacted] Spaghetti 500g	(PIP Code: 340-0090)	2	
Organic Brown [redacted] Penne 500g	(PIP Code: 340-0082)	2	
Organic Brown [redacted] Lasagne 375g	(PIP Code: 340-0108)	1½	

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NAME: DOB/CHI: UNIT ALLOWANCE: DATE:

ITEM	CODE	NO OF UNITS	QUANTITY
CRACKERS & CRISPBREAD			
BARKAT			
Matzo Crackers Round 200g	(PIP Code: 337-8296)	1	
Crackers 200g	(PIP Code: 342-7457)	1	
Crispbread 150g	(PIP Code: 341-0420)	½	
GLUTAFIN			
Crackers 200g	(PIP Code: 309-3362)	1 x 1 = 1	1
JUVELA			
Crispbread 200g	(PIP Code: 236-6136)	1	

Take off x

ITEM	CODE	NO OF UNITS	QUANTITY
BAKING AIDS			
BARKAT			
Xanthan Gum 80g	(PIP Code: 400-8074)	½	
PURE			
Xanthan Gum 100g	(PIP Code: 282-8572)	1	x1 (1)

ADD

ITEM	CODE	NO OF UNITS	QUANTITY
BREAKFAST CEREAL			
BARKAT			
Cornflakes 250g	(PIP Code: 339-4905)	1 ½	
JUVELA			
Flakes 300g	(PIP Code 371-1652)	1 ½	
Fibre Flakes 300g	(PIP Code 371-1660)	1 ½	
Corn Flakes 375g	(PIP Code 388-2990)	1 ½	
Crispy [redacted] 375g	(PIP Code 388-2982)	1 ½ x2=3	x1 (1)
Pure Cornflakes 300g	(PIP Code 371-1678)	1 ½	

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7 ½.

GLUTEN FREE FOOD PRODUCT MANUFACTURERS CONTACT DETAILS

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Glutafin,
Dr Schar,
Units 1-2, Station [redacted] 442 Stockport Road,
Warrington, WA4 2GW
Tel: 0800 988 2470
Email: glutenfree@glutafin.co.uk
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NHS
Greater Glasgow and Clyde

MDMHT REFERRAL FORM

Name Georgina Smith Spin Number 1313444

D.O.B. 04/12/1991 Date of Admission

Referral completed by [redacted]gina Smith

Date of referral 15/02/23

Please state the reasons why you are referring to the Mental Health Team in the box below

I need to speak to mental Health nurse for on-going issues.
Thanks.

Please complete the following,

Have you/the prisoner seen the Mental Health Team before? Yes/No
Are you/the prisoner on anti-psychotic medication Yes/No
Have you/the prisoner received support from a CPN? Yes/No
Is there a history of self harming behaviour Yes/No

FOR ADMINISTRATION PURPOSES ONLY

Date Received by Admin..... Signature.....

Date assessed by MHN ..... Signature.....

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NORTH GLASGOW BIOCHEMISTRY DEPARTMENT

Form: NKGLS Run: 132

Surname: SMITH
Forename: GEORGINA
DOB/Age: 04.12.91 Sex: Female
CHI/Unit No: 0412913127
Address: THE HEALTH CENTRE
Details:

Location: HMP Lillias YOI
41 Craigmont Street
Maryhill Glasgow
Greater Glasgow & Clyde
Requestor: Not known
Ext Labno:

Specimen type: Blood

Lab Number	Collected	Received	Glucose mmol/L (3.5-6.0)	HbA1c (IFCC) mmol/mol (20-41)
B,23.4390194.X	15.02.23 12:00	15.02.23 15:36		5.0

Result Comments:

Date reported: 16.02.23 Authorised by: Automatic release by system

Page 1 of 1

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NORTH GLASGOW BIOCHEMISTRY DEPARTMENT

Form: NHA2 Run: 132

Surname:	SMITH	Location:	HMP Lillias YOI
Forename:	GEORGINA		41 Craigmont Street
DOB/Age:	04.12.91 Sex: Female		Maryhill Glasgow
CHI/Unit No:	0412913127		Greater Glasgow & Clyde
Address:	THE HEALTH CENTRE	Requestor:	Not known
Details:		Ext Labno:	

			{{ CURRENT }}
Lab Number			B,23.4398193.B
Date/Time collected			15.02.23 12:00
[redacted] received			15.02.23 15:36
Specimen type			Blood
Sodium	mmol/L	(133-146)	137
Potassium	mmol/L	(3.5-5.3)	4.2
Chloride	[redacted]	(95-108)	106
Bicarbonate	[redacted]	(22-29)	
Urea	mmol/L	(2.5-7.8)	3.5
Creatinine	umol/L	(40-130)	63
GFR (est'd)	ml/min	(>60)	>60
CRP	mg/L	(0-10)	
Magnesium	mmol/L	(0.70-1.00)	
Calcium	mmol/L	(2.20-2.60)	2.23
Adj Calcium	mmol/L	(2.20-2.60)	2.32
Phosphate	mmol/L	(0.80-1.50)	1.03
Albumin	g/L	(35-50)	39
Alk Phos	U/L	(30-130)	80
Tot Bilirubin	[redacted]	(<20)	7
Conj Bilirubin	umol/L		
AST	U/L	(<40)	20
gGT	U/L	(<40)	
ALT	U/L	(<50)	17
Amylase	U/L	(<100)	
CK	U/L	(25-200)	
Total Protein	g/L	(60-80)	
Globulins	g/L	(23-38)	
Urate	umol/l	(140-360)	
Cholesterol	mmol/L		
Triglyceride	mmol/L	(0.2-2.3)	
VLDL Chol	mmol/L		
LDL Chol	mmol/L		
HDL Chol	mmol/L		
Chol/HDL			
TSH	mU/L	(0.35-5.00)	1.23
Free T4	pmol/L	(9.0-21.0)	13.9
Total T3	nmol/L	(0.9-2.5)	

Result Comments:

Date reported: 16.02.23 Authoriser: Automatic release by system Page 1 of 1

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IGRI Run: 472

NORTH GLASGOW HOSPITALS
HAEMATOLOGY REPORT

Surname:	SMITH	Location:	HMP Lillias YOI
Forename:	GEORGINA		41 Craigmont Street
DOB/Age:	04.12.91 Sex: Female		Maryhill Glasgow
CHI/Unit No:	0412913127		Greater Glasgow & Clyde
Address:	THE HEALTH CENTRE	Requestor:	Not known
Details:		Ext Labno:	

Lab No:	B,23.4397077	Specimen:	Blood
Collected:	15.02.23 12:00	Received:	15.02.23 15:26
Authorised:	15.02.23	Authoriser:	

B12

Serum Vitamin B12	385	ng/l	(200-883)

SF

Serum Folate	14.2	ug/l	(3.1-20.0)

Comments:

Enquiries: Phone 0141 242 9552 Date reported: 17.02.23 Page 1 of 1

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IGRI Run: 472

NORTH GLASGOW HOSPITALS
HAEMATOLOGY REPORT

Surname: SMITH
Forename: GEORGINA
DOB/Age: 04.12.91 Sex: Female
CHI/Unit No: 0412913127
Address: THE HEALTH CENTRE
Details:

Location: HMP Lillias YOI
41 Craigmont Street
Maryhill Glasgow
Greater Glasgow & Clyde
Requestor: Not known
Ext Labno:

Lab No: B,23.4397077
Collected: 15.02.23 12:00
Authorised: 15.02.23

Specimen: Blood
Received: 15:02.23 15:26
Authoriser:

B12

Serum Vitamin B12	385	ng/l	(200-883)

SF

Serum Folate	14.2	ug/l	(3.1-20.0)

Comments:

Enquiries: Phone 0141 242 9552 Date reported: 17.02.23 Page 1 of 1

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(Form:GRI)

NORTH GLASGOW HOSPITALS
HAEMATOLOGY REPORT

Surname: SMITH
Forename: GEORGINA
DOB/Age: 04.12.91 Sex: Female
CHI/Unit No: 0412913127
Address: THE HEALTH CENTRE
Details:

Location: HMP Lillias YOI
41 Craigmont Street
Maryhill Glasgow
Greater Glasgow & Clyde
Requestor: Not known
Ext Labno:

			[[CURRENT]]
Lab Number			B,23.5987825.B
Date/Time collected			15.02.23 12:00
Date/Time received			15.02.23 15:25
Specimen type			Blood
WBC	x10^9/l	(4.0-10.0)	5.6
RBC	x10^12/l	(3.80-5.80)	4.45
Haemoglobin	g/l	(115-165)	131
Haematocrit	l/l	(0.370-0.478)	0.391
MCV	fl	(83.0-101.0)	87.9
MCH	pg	(27.0-33.0)	29.4
Platelet Count	x10^9/l	(150-410)	313
Neutrophils	x10^9/l	(2.0-7.0)	2.9
Lymphocytes	x10^9/l	(1.5-3.0)	1.8
Monocytes	x10^9/l	(0.2-1.0)	0.4
Eosinophils	x10^9/l	(0.02-0.50)	0.47
Basophils	x10^9/l	(0.0-0.1)	0.1
Nucleated RBC	x10^9/l		0.0
Myelocytes	x10^9/l		
Blasts	x10^9/l		
Others	x10^9/l		
ESR	mm/hr	(0-13)	
Retics	x10^9/l	(55-100)	

Glan Fever Scr

Blood Film

Result Comments:

Date reported: 16.02.23 Authoriser: Run No: 470

Page 1 of 1

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(Form:GRI)

NORTH GLASGOW HOSPITALS
HAEMATOLOGY REPORT

Surname: SMITH
Forename: GEORGINA
DOB/Age: 04.12.91 Sex: Female
CHI/Unit No: 0412913127
Address: THE HEALTH CENTRE
Details:

Location: HMP Lillias YOI
41 Craigmont Street
Maryhill Glasgow
Greater Glasgow & Clyde
Requestor: Not known
Ext Labno:

[[CURRENT]]

Lab Number			B,23.5987825.B
Date/Time collected			15.02.23 12:00
Date/Time received			15.02.23 15:25
Specimen type			Blood
WBC	x10^9/l	(4.0-10.0)	5.6
RBC	x10^12/l	(3.80-5.80)	4.45
Haemoglobin	g/l	(115-165)	131
Haematocrit	l/l	(0.370-0.470)	0.391
MCV	fl	(83.0-101.0)	87.9
MCH	pg	(27.0-33.0)	29.4
Platelet Count	x10^9/l	(150-410)	313
Neutrophils	x10^9/l	(2.0-7.0)	2.9
Lymphocytes	x10^9/l	(1.5-3.5)	1.8
Monocytes	x10^9/l	(0.2-1.0)	0.4
Eosinophils	x10^9/l	(0.02-0.50)	0.47
Basophils	x10^9/l	(0.0-0.1)	0.1
Nucleated RBC	x10^9/l		0.0
Myelocytes	x10^9/l		
Blasts	x10^9/l		
Others	x10^9/l		
ESR	mm/hr	(0-13)	
Retics	x10^9/l	(55-100)	

Glan Fever Scr

Blood Film

Result Comments:

Date reported: 16.02.23 Authoriser: Run No: 470

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NORTH GLASGOW BIOCHEMISTRY DEPARTMENT

Form: NHGLS Run: 132

Surname: SMITH
Forename: GEORGINA
DOB/Age: 04.12.91 Sex: Female
CHI/Unit No: 0412913127
Address: THE HEALTH CENTRE
Detail@:

Location: HMP Lillias YOI
41 Craigmont Street
Maryhill Glasgow
Greater Glasgow & Clyde
Requestor: Not known
Ext Labno:

Specimen type: Blood

Lab Number	Collected	Received	Glucose mmol/L (3.5-6.0)	HbA1c (IFCC) mmol/mol (20-41)
B,23.4390194.X	15.02.23 12:00	15.02.23 15:36		5.0

Result Comments:

Date reported: 16.02.23 Authorised by: Automatic release by system

Page 1 of 1

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NORTH GLASGOW BIOCHEMISTRY DEPARTMENT

Form: NEA2 Run: 132

Surname:	SMITH	Location:	HMP Lillias YOI
Forename:	GEORGINA		41 Craigmont Street
DOB/Age:	04.12.91 Sex: Female		Maryhill Glasgow
CHI/Unit No:	0412913127		Greater Glasgow & Clyde
Address:	THE HEALTH CENTRE	Requestor:	Not known
Details:		Ext Labno:	

			{{ CURRENT }}
Lab Number			B,23.439@193.B
Date/Time collected			15.02.23 12:00
[redacted] received			15.02.23 15:36
Specimen type			Blood
Sodium	mmol/L	(133-146)	137
Potassium	mmol/L	(3.5-5.3)	4.2
Chloride	[redacted]	(95-108)	106
Bicarbonate	[redacted]	(22-29)	
Urea	mmol/L	(2.5-7.8)	3.5
Creatinine	umol/L	(40-130)	63
GFR (est'd)	ml/min	(>60)	>60
CRP	mg/L	(0-10)	
Magnesium	mmol/L	(0.70-1.00)	
Calcium	mmol/L	(2.20-2.60)	2.23
Adj Calcium	mmol/L	(2.20-2.60)	2.32
Phosphate	mmol/L	(0.80-1.50)	1.03
Albumin	g/L	(35-50)	39
Alk Phos	U/L	(30-130)	80
Tot Bilirubin	[redacted]	(<20)	7
Conj Bilirubin	umol/L		
AST	U/L	(<40)	20
gGT	U/L	(<40)	
ALT	U/L	(<50)	17
Amylase	U/L	(<100)	
CK	U/L	(25-200)	
Total Protein	g/L	(60-80)	
Globulins	g/L	(23-38)	
Urate	umol/l	(140-360)	
Cholesterol	mmol/L		
Triglyceride	mmol/L	(0.2-2.3)	
VLDL Chol	mmol/L		
LDL Chol	mmol/L		
HDL Chol	mmol/L		
Chol/HDL			
TSH	mU/L	(0.35-5.00)	1.23
Free T4	pmol/L	(9.0-21.0)	13.9
Total T3	nmol/L	(0.9-2.5)	

Result Comments:

Date reported: 16.02.23 Authoriser: Automatic release by system Page 1 of 1

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GRI Num: 472

NORTH GLASGOW HOSPITALS
HAEMATOLOGY REPORT

Surname: SMITH
Forename: GEORGINA
DOB/Age: 04.12.91 Sex: Female
CHI/Unit No: 0412913127
Address: THE HEALTH CENTRE
Details:

Location: HMP Lillias YOI
41 Craigmont Street
Maryhill Glasgow
Greater Glasgow & Clyde
Requestor: Not known
Ext Labno:

Lab No: B,23.4397077
Collected: 15.02.23 12:00
Authorised: 15.02.23

Specimen: Blood
Received: 15.02.23 15:26
Authoriser:

B12

Serum Vitamin B12	385	ng/l	(200-883)

SF

Serum Folate	14.2	ug/l	(3.1-20.0)

Comments:

Enquiries: Phone 0141 242 9552

Date reported: 17.02.23

Page 1 of 1

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{Form:GRI}

NORTH GLASGOW HOSPITALS
HAEMATOLOGY REPORT

Surname: SMITH
Forename: GEORGINA
DOB/Age: 04.12.91 Sex: Female
CHI/Unit No: 0412913127
Address: THE HEALTH CENTRE
Details:

Location: HMP Lillias YOI
41 Craigmont Street
Maryhill Glasgow
Greater Glasgow & Clyde
Requestor: Not known
Ext Labno:

			[[CURRENT]]
Lab Number			B,23.5887823.B
[redacted] collected			15.02.23 12:00
Date/Time received			15.02.23 15:25
Specimen type			Blood
WBC	x10^9/l	(4.0-11.0)	5.6
RBC	x10^12/l	(3.90-5.80)	4.45
Haemoglobin	g/l	(115-165)	131
Haematocrit	l/l	(0.370-0.470)	0.391
MCV	fl	(83.0-101.0)	87.9
MCH	pg	(27.0-32.5)	29.4
Platelet Count	x10^9/l	[redacted]	313
Neutrophils	x10^9/l	(2.0-7.0)	2.9
Lymphocytes	x10^9/l	(1.1-5.2)	1.8
Monocytes	x10^9/l	(0.2-1.0)	0.4
Eosinophils	x10^9/l	(0.02-0.50)	0.47
Basophils	x10^9/l	(0.0-0.1)	0.1
Nucleated RBC	x10^9/L		0.0
Myelocytes	x10^9/L		
Blasts	x10^9/L		
Others	x10^9/L		
ESR	mm/hr	(0-12)	
Retics	x10^9/L	(50-100)	

Glan Fever Scr

Blood Film

Result Comments:

Date reported: 16.02.23 Authoriser: Run No: 470

Page 1 of 1

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SIDE B

NHS Greater Glasgow and Clyde

METHADONE SCRIPT? ☐ YES ☐ NO
BUPRENORPHINE SCRIPT? ☐ YES ☐ NO ☐ COMPLETE
CHAMPIX or NRT PCD ☐ YES ☐ NO

Prescription Sheet No.: 13/2/23
Start Date: 13/2/23
Rewritten Date:

HMP: Barlinnie
Location:

UNSUPERVISED PRESCRIPTIONS

	Commence Date	Review date Initials	Review date Initials	Stop date Length	DRUGS (including formulation)	Dose	Route	Times of administration AM	Noon	PM	Night	Issue	Prescriber's Signature	Discontinued Days	Initials	Pharmacist Date	Initials
A	13/2/23	6/2/23			omeprazole (Losec)	20mg	O	✓									
B	13/2/23	13/2/23			amitriptyline	25mg	O				✓						
C	13/2/23	13/2/23			Quetiapine	150mg	O				✓						
D	13/2/23	13/2/23			Pizotifen	1.5mg	O				✓						
E	13/2/23	13/2/23			Dihydrocodeine	1.2	O				✓						
F	13/2/23	13/2/23			Seedpod Loop 4 DSS	1	O		PIP								
G	13/2/23	13/2/23			Spirulina	x2	O	PIP	Loop	2							
H	13/2/23	13/2/23			All purpose flour	x2	O	PIP	Loop	350							
I	13/2/23	13/2/23			Multipurpose bulk mix	x2	O	PIP	Loop	350							
J	13/2/23	13/2/23			Fibre mix	x2	O	PIP	Loop	350							
K	13/2/23	13/2/23			potato starch flour	x2	O	PIP	Loop	350							
L	13/2/23	13/2/23			Xanthan Gum	x1	O	PIP	Loop	600							
M	13/2/23	13/2/23			Crumpets	x1½	O	PIP	338								
N	13/2/23	13/2/23															
O																	
P																	
Q																	
R																	
S																	
T																	

Name: Sandra Smith Spin No: CL1346 CHI No. or DOB: 4/12/91 Drug allergies: Penicillin Codeine

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised US = Unsupervised

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SIDE A

NHS Greater Glasgow and Clyde

METHADONE SCRIPT? ☐ YES ☒ NO
BUPRENORPHINE SCRIPT? ☐ YES ☐ NO
CHAMPIX or NRT ☐ YES ☐ NO ☐ COMPLETE
PCD ☐ YES ☐ NO

Prescription Sheet No: 13/2/23 HMP: Addiction
Start Date: Location:
Rewritten Date:

SUPERVISED PRESCRIPTIONS

	Commence Date	Review date initials	Review date initials	Review date initials	Stop date length	DRUGS (including formulation)	Dose	Route	Times of administration AM	Noon	PM	Night	Issue	Prescriber's signature	Discontinued Date	Discontinued Initials	Pharmacist Date	Pharmacist Initials
1																		
2																		
3																		
4																		
5																		
6																		
7																		
8																		

AS REQUIRED PRESCRIPTIONS

	Commence Date	Review date initials	Review date initials	Review date initials	Stop date length	DRUGS (including formulation)	Dose	Route	Frequency of administration	Issue	Prescriber's signature	Discontinued Date	Discontinued Initials	Pharmacist Date	Pharmacist Initials
9	13/2/23				28 days	Diflam 50mg	3-4 tds	po	3-4 hrly	MA					
10	13/2/23				28 days	hydrocortisone 1% ointment	apply	top	BD	MA					
11	13/2/23				28 days	chlorphenamine 4mg	1-2	po	TDS	MA					
12	13/2/23				28 days	paracetamol 1g	1g	po	QD	MA					
13	13/2/23				28 days	600mg	600mg	po	PRN	MA					
14	13/2/23				28 days	Dermol 500	10ml	top	BD	MA					
15															

ONCE ONLY PRESCRIPTIONS

	Administration date	Administration time	DRUGS (including formulation)	Dose	Route	Frequency of administration	Issue	Prescriber's signature	Time given	Pharmacist Date	Pharmacist Initials
16											
17											
18											

Name: Spin No: CHI No. or DOB: Drug allergies:

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised US = Unsupervised

ma + 296903v1.0

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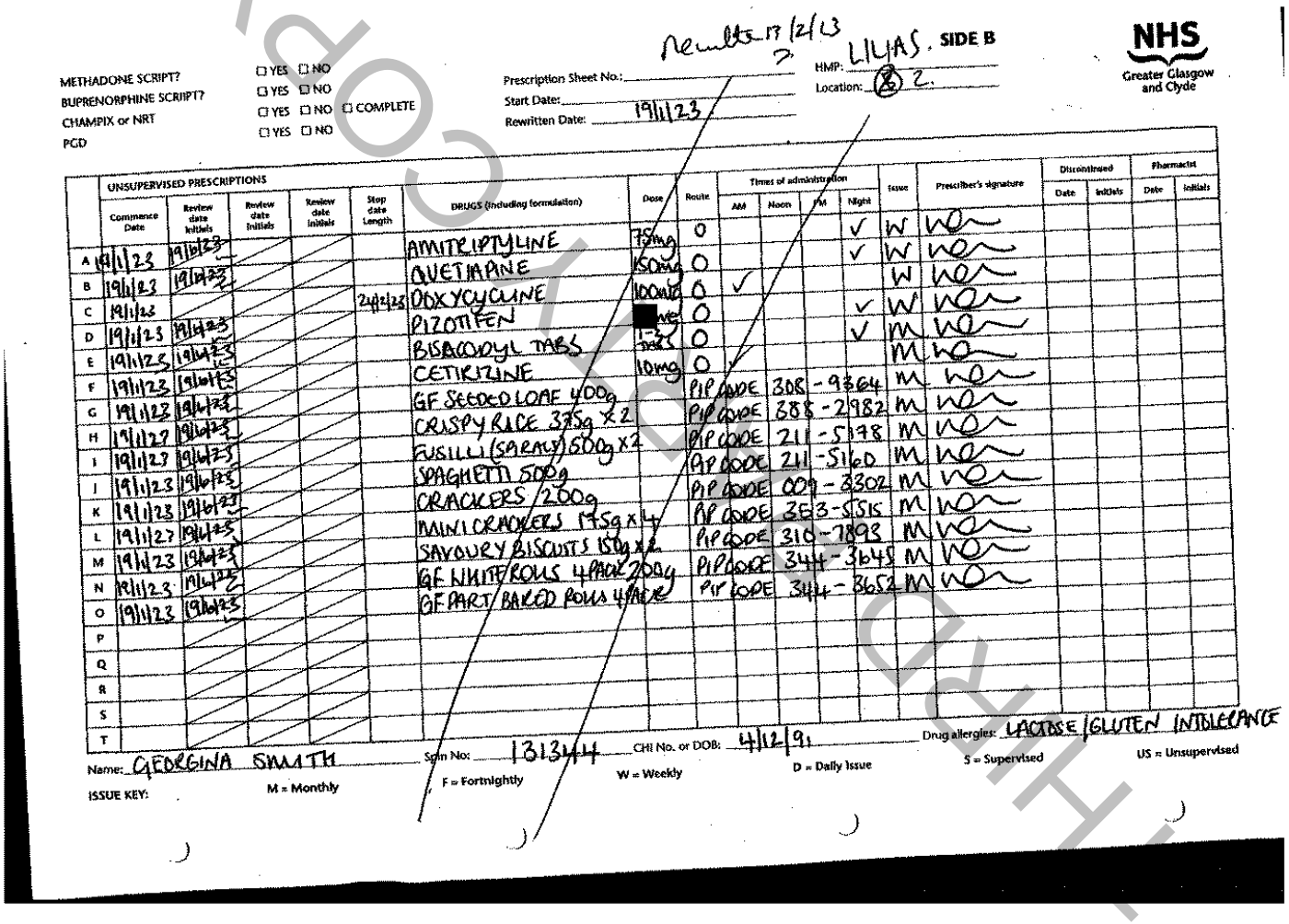

METHADONE SCRIPT? ☐ YES ☐ NO
BUPRENORPHINE SCRIPT? ☐ YES ☒ NO
CHAMPIX or NRT ☐ YES ☐ NO ☐ COMPLETE
PGD ☐ YES ☐ NO

Prescription Sheet No.:
Start Date:
Rewritten Date: 19/1/23

Results 17/2/23

HMP: LILIAS. SIDE B
Location: (B) 2.

NHS Greater Glasgow and Clyde

UNSUPERVISED PRESCRIPTIONS

	Commence Date	Review date initials	Review date Initials	Review date Initials	Stop date Length	DRUGS (including formulation)	Dose	Route	Times of administration: AM	Noon	PM	Night	Issue	Prescriber's signature	Discontinued: Date	Discontinued: Initials	Pharmacist: Date	Pharmacist: Initials
A	19/1/23	19/1/23				AMITRIPTYLINE	75mg	O				✓	W					
B	19/1/23	19/1/23				QUETIAPINE	150mg	O				✓	W					
C	19/1/23				24/2/23	DOXYCYCLINE	100mg	O	✓				W					
D	19/1/23	19/1/23				PIZOTIFEN	[redacted]	O				✓	W					
E	19/1/23	19/1/23				BISACODYL TABS	5mg	O				✓	M					
F	19/1/23	19/1/23				CETIRIZINE	10mg	O					M					
G	19/1/23	19/1/23				GF SEEDED LOAF 400g			PIP CODE 308-9364				M					
H	19/1/23	19/1/23				CRISPY RICE 375g x 2			PIP CODE 388-2982				M					
I	19/1/23	19/1/23				FUSILLI (SPIRAL) 500g x 2			PIP CODE 211-5198				M					
J	19/1/23	19/1/23				SPAGHETTI 500g			PIP CODE 211-5160				M					
K	19/1/23	19/1/23				CRACKERS 200g			PIP CODE 009-8302				M					
L	19/1/23	19/1/23				MINI CRACKERS 175g x 4			PIP CODE 353-5515				M					
M	19/1/23	19/1/23				SAVOURY BISCUITS 150g x 2			PIP CODE 310-7893				M					
N	19/1/23	19/1/23				GF WHITE ROLLS 4 PACK 200g			PIP CODE 344-3645				M					
O	19/1/23	19/1/23				GF PART BAKED ROLLS 4 PACK			PIP CODE 344-3652				M					
P																		
Q																		
R																		
S																		
T																		

Name: GEORGINA SMITH Surn No: 1313144 CHI No. or DOB: 4/12/91 Drug allergies: LACTOSE/GLUTEN INTOLERANCE

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised US = Unsupervised

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NHS Greater Glasgow and Clyde

SIDE A

Prescription Sheet No: _____ HMP: _____

Start Date: _____ Location: _____

Rewritten Date: _____

METHADONE SCRIPT? ☐ YES ☒ NO

BUPRENORPHINE SCRIPT? ☐ YES ☐ NO

CHAMPIX or NRT ☐ YES ☐ NO ☒ COMPLETE

PGD

SUPERVISED PRESCRIPTIONS

	Commence Date	Review date Initials	Review date Initials	Review date Initials	Review date Initials	Stop date Length	DRUGS (including formulation)	Dose	Route	Time of administration: AM	Noon	PM	Night	Issue	Prescriber's signature	Discontinued: Date	Initials	Pharmacist: Date	Initials
1																			
2																			
3																			
4																			
5																			
6																			
7																			
8																			

AS REQUIRED PRESCRIPTIONS

	Commence Date	Review date Initials	Review date Initials	Review date Initials	Stop date Length	DRUGS (including formulation)	Dose	Route	Frequency of administration	Issue	Prescriber's signature	Discontinued: Date	Initials	Pharmacist: Date	Initials
9	19/1/23					KETOCONAZOLE/SHAMPOO 2%	APP	TOP	2-3 TIMES WEEKLY	M W					
10	19/1/23					CEIRABEN	APP	TOP	PRN						
11	19/1/23					PEPPERMINT CAPS	1-2 Caps	O	THREE TIMES DAILY	M W					
12	19/1/23					EDDOLAT	WOUND	TOP	ONCE DAILY/PRN	M W					
13	19/1/23					DERMOVATE SPD 50g	APP	TOP	PRN	M W					
14	19/1/23					QV WASH	APP	TOP	THREE TIMES DAILY	M W					
15	19/1/23					ATARAX / REMEDY 50MG	APP	TOP	THREE TIMES DAILY	M W					

ONCE ONLY PRESCRIPTIONS

	Administration date	Administration time	☒ NHS Dispensing formulation	Dose	Route	Frequency of administration	Issue	Prescriber's signature:	Time given:	Pharmacist: Date	
16											
17											
18											

Name: GEORGINA SMITH CHI No. or DOB: 04/12/91

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue

Spin No: 1313444 Drug allergies: CACODYLATE / IODINE

S = Supervised U = Unsupervised

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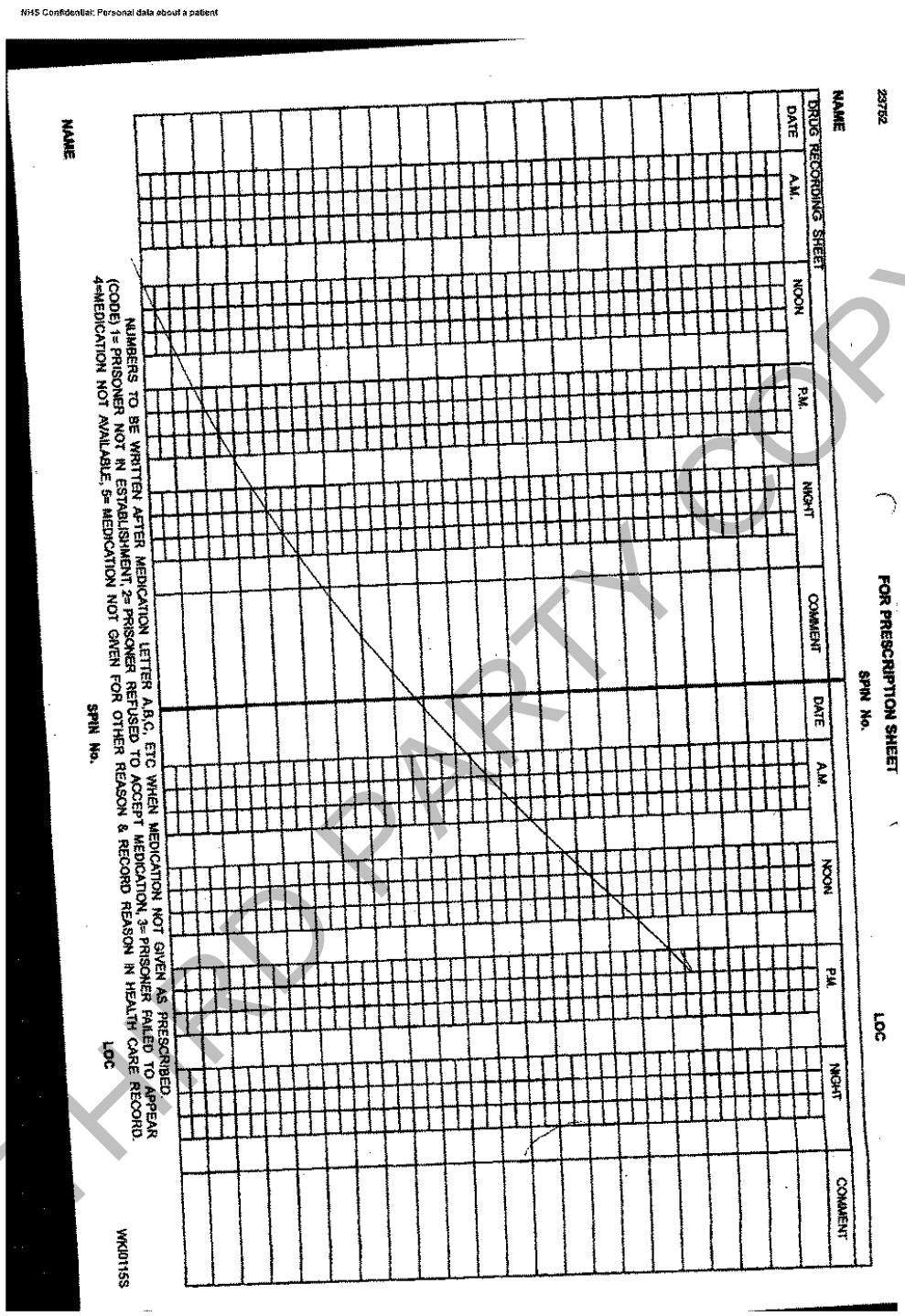

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NAME

NAME

DRUG RECORDING SHEET

DATE	A.M.	NOON	P.M.	NIGHT	COMMENT

NUMBERS TO BE WRITTEN AFTER MEDICATION LETTER A,B,C, ETC WHEN MEDICATION NOT GIVEN AS PRESCRIBED.
(CODE) 1= PRISONER NOT IN ESTABLISHMENT, 2= PRISONER REFUSED TO ACCEPT MEDICATION, 3= PRISONER FAILED TO APPEAR
4=MEDICATION NOT AVAILABLE, 5= MEDICATION NOT GIVEN FOR OTHER REASON & RECORD REASON IN HEALTH CARE RECORD.

SPIN No.

LOC

WK/0115S

253752

FOR PRESCRIPTION SHEET

SPIN No.

LOC

DATE	A.M.	NOON	P.M.	NIGHT	COMMENT

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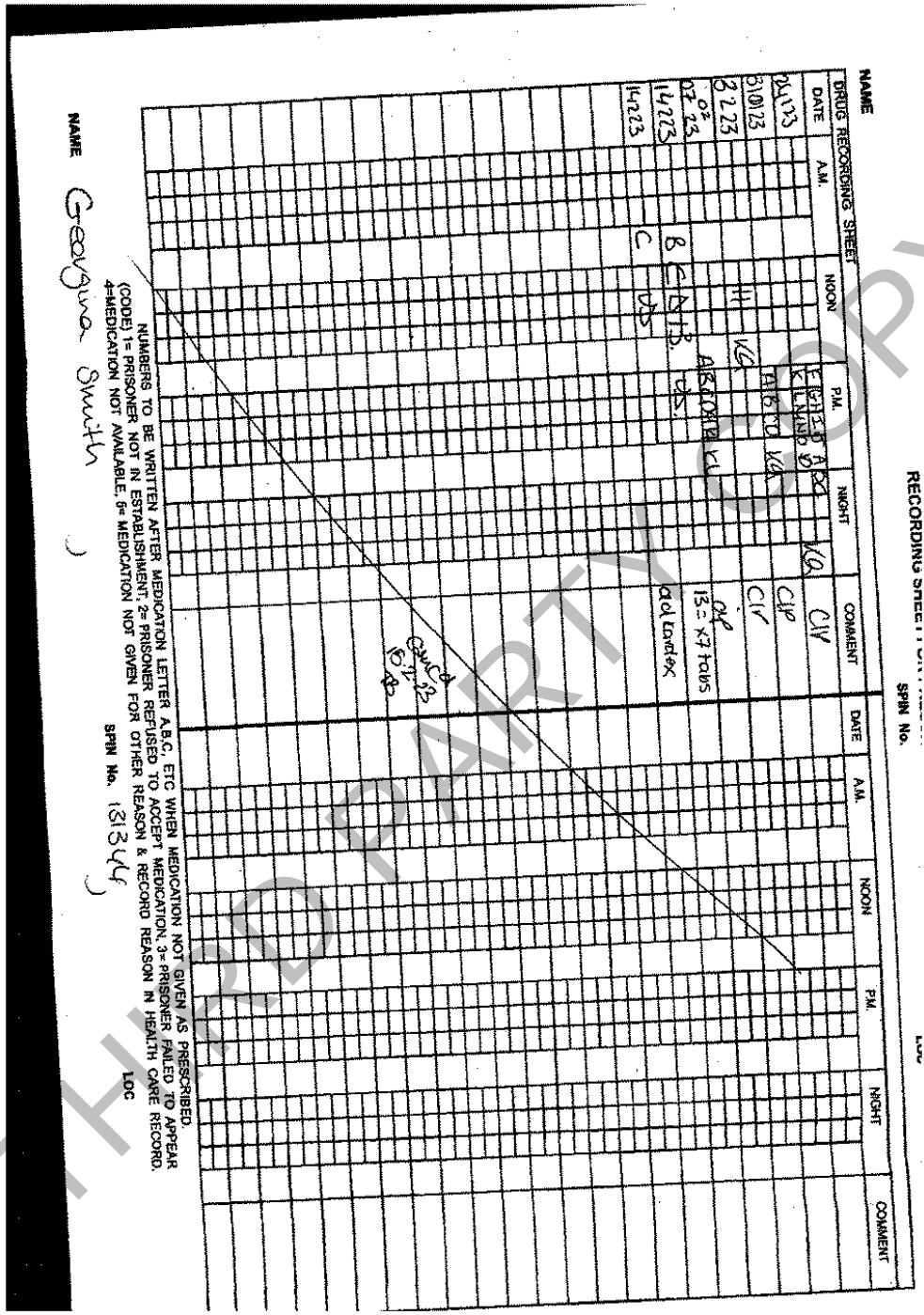

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NAME Graeme Smith

SPIN No. 1313464

LOC

DRUG RECORDING SHEET

DATE	A.M.	NOON	P.M.	NIGHT	COMMENT
29/1/23				KG	CLV
31/1/23				KG	CLV
2.2.23				KG	CLV
07.02.23					13:- x7 taps
14/2/23					
14.2.23					

NUMBERS TO BE WRITTEN AFTER MEDICATION LETTER A,B,C, ETC WHEN MEDICATION NOT GIVEN AS PRESCRIBED.
(CODE) 1= PRISONER NOT IN ESTABLISHMENT; 2= PRISONER REFUSED TO ACCEPT MEDICATION; 3= PRISONER FAILED TO APPEAR
4=MEDICATION NOT AVAILABLE; 5= MEDICATION NOT GIVEN FOR OTHER REASON & RECORD REASON IN HEALTH CARE RECORD.

LOC

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NORTH GLASGOW BIOCHEMISTRY DEPARTMENT

Form: NEGLW Run: 132

Surname:	SMITH	Location:	HMP Lillias YOI
Forename:	GEORGINA		41 Craigmont Street
DOB/Age:	04.12.91 Sex: Female		Maryhill Glasgow
CHI/Unit No:	0412913127		Greater Glasgow & Clyde
Address:	THE HEALTH CENTRE	Requestor:	Not Known
Details:		Ext Labno:	

Specimen type: Blood

Lab Number	Collected	Received	Glucose mmol/L (3.5-6.0)	HbA1c (IFCC) mmol/mol (20-41)
B.23.4398194.X	15.02.23 12:00	15.02.23 15:36	5.0	

Result Comments:

Date reported: 16.02.23 Authorised by: Automatic release by system

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NORTH GLASGOW BIOCHEMISTRY DEPARTMENT

Form: NEA2 Run: 132

Surname:	SMITH	Location:	HMP Lillias YOI
Forename:	GEORGINA		41 Craigmont Street
DOB/Age:	04.12.91 Sex: Female		Maryhill Glasgow
CHI/Unit No:	0412913127		Greater Glasgow & Clyde
Address:	THE HEALTH CENTRE	Requestor:	Not known
Details:		Ext Labno:	

			[[CURRENT]]
Lab Number			B.23.4396193.B
[redacted] collected			15.02.23 12:00
Date/Time received			15.02.23 15:36
Specimen type			Blood
Sodium	mmol/L	(133-146)	137
Potassium	mmol/L	(3.5-5.3)	4.2
Chloride	mmol/L	(95-108)	106
Bicarbonate	mmol/L	(22-29)	
Urea	mmol/L	(2.5-7.8)	3.5
Creatinine	umol/L	(40-130)	63
GFR (est'd)	ml/min	(>60)	>60
CRP	[redacted]	(0-10)	
Magnesium	mmol/L	(0.70-1.00)	
Calcium	mmol/L	(2.20-2.60)	2.23
Adj Calcium	[redacted]	(2.20-2.60)	2.32
Phosphate	mmol/L	(0.80-1.50)	1.03
Albumin	g/L	(35-50)	39
Alk Phos	u/L	(30-130)	90
Tot Bilirubin	umol/L	(<20)	7
Conj Bilirubin	umol/L		
AST	U/L	(<40)	20
gGT	U/L	(<40)	
ALT	U/L	(<50)	17
Amylase	U/L	(<100)	
CK	U/L	(25-200)	
Total Protein	g/L	(60-80)	
Globulins	g/L	(23-38)	
Urate	umol/l	(140-360)	
Cholesterol	mmol/L		
Triglyceride	mmol/L	(0.2-2.3)	
VLDL Chol	mmol/L		
LDL Chol	mmol/L		
HDL Chol	mmol/L		
Chol/HDL			
TSH	mU/L	(0.35-5.00)	1.23
Free T4	pmol/L	(9.0-21.0)	13.9
Total T3	nmol/L	(0.9-2.5)	

Result Comments:

Date reported: 16.02.23 Authoriser: Automatic release by system Page 1 of 1

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NORTH GLASGOW BIOCHEMISTRY DEPARTMENT

Form: NEGLW Run: 132

Surname:	SMITH	Location:	HMP Lillias YOI
Forename:	GEORGINA		41 Craigmont Street
DOB/Age:	04.12.91 Sex: Female		Maryhill Glasgow
CHI/Unit No:	0412913127		Greater Glasgow & Clyde
Address:	THE HEALTH CENTRE	Requestor:	Not Known
Details:		Ext Labno:	

Specimen type: Blood

Lab Number	Collected	Received	Glucose mmol/L (3.5-6.0)	HbA1c (IFCC) mmol/mol (20-41)
B.23.4398194.X	15.02.23 12:00	15.02.23 15:36	5.0	

Result Comments:

Date reported: 16.02.23 Authorised by: Automatic release by system

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NORTH GLASGOW BIOCHEMISTRY DEPARTMENT

Form: NEA2 Run: 132

Surname:	SMITH	Location:	HMP Lillias YOI
Forename:	GEORGINA		41 Craigmont Street
DOB/Age:	04.12.91 Sex: Female		Maryhill Glasgow
CHI/Unit No:	0412913127		Greater Glasgow & Clyde
Address:	THE HEALTH CENTRE	Requestor:	Not known
Details:		Ext Labno:	

			[[CURRENT]]
Lab Number			B.23.4396193.B
[redacted] collected			15.02.23 12:00
Date/Time received			15.02.23 15:36
Specimen type			Blood
Sodium	mmol/L	(133-146)	137
Potassium	mmol/L	(3.5-5.3)	4.2
Chloride	mmol/L	(95-108)	106
Bicarbonate	mmol/L	(22-29)	
Urea	mmol/L	(2.5-7.8)	3.5
Creatinine	umol/L	(40-130)	63
GFR (est'd)	ml/min	(>60)	>60
CRP	[redacted]	(0-10)	
Magnesium	mmol/L	(0.70-1.00)	
Calcium	mmol/L	(2.20-2.60)	2.23
Adj Calcium	[redacted]	(2.20-2.60)	2.32
Phosphate	mmol/L	(0.80-1.50)	1.03
Albumin	g/L	(35-50)	39
Alk Phos	u/L	(30-130)	90
Tot Bilirubin	umol/L	(<20)	7
Conj Bilirubin	umol/L		
AST	u/L	(<40)	20
gGT	u/L	(<40)	
ALT	u/L	(<50)	17
Amylase	u/L	(<100)	
CK	u/L	(25-200)	
Total Protein	g/L	(60-80)	
Globulins	g/L	(23-38)	
Urate	umol/l	(140-360)	
Cholesterol	mmol/L		
Triglyceride	mmol/L	(0.2-2.3)	
VLDL Chol	mmol/L		
LDL Chol	mmol/L		
HDL Chol	mmol/L		
Chol/HDL			
TSH	mU/L	(0.35-5.00)	1.23
Free T4	pmol/L	(9.0-21.0)	13.9
Total T3	nmol/L	(0.9-2.5)	

Result Comments:

Date reported: 16.02.23 Authoriser: Automatic release by system Page 1 of 1

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NHS Greater Glasgow and Clyde

SIDE B

METHADONE SCRIPT? ☐ YES ☐ NO
BUPRENORPHINE SCRIPT? ☐ YES ☐ NO
CHAMPIX or NRT ☐ YES ☐ NO ☐ COMPLETE
PGD ☐ YES ☐ NO

Prescription Sheet No.: 13/2/63
Start Date: 13/2/63
Rewritten Date:

HMP: Barlinnie
Location:

UNSUPERVISED PRESCRIPTIONS

	Commence Date	Review date Initials	Review date Initials	Review date Initials	Stop date Length	DRUGS (including formulation)	Dose	Route	Times of administration AM	Noon	PM	Night	Issue	Prescriber's Signature	Discontinued Days	Initials	Date	Pharmacist Initials
A	13/2/63					omeprazole (PROTON)	20mg	O	✓				M					
B	13/2/63					amitriptyline	25mg	O				✓	M					
C	13/2/63					Quetiapine	150mg	O				✓	M					
D	13/2/63					Diazepam tab.	1-2	O				✓	M					
E	13/2/63					Diazepam oral liquid	10mg	O	✓				M					
F	13/2/63					Clonidine	100mcg	O	PIP				M					
G	13/2/63					Seedled Loaf 4 DSS	x2	O	PIP	Lunch	2PM	- 5:30	M					
H	13/2/63					Spirals	x2	O	PIP	Lunch	3PM	4:30	M					
I	13/2/63					All purpose flour	x2	O	PIP	Lunch	3PM	5:30	M					
J	13/2/63					Multipurpose bulk mix	x2	O	PIP	Lunch	3PM	5:30	M					
K	13/2/63					Fibre mix	x2	O	PIP	Lunch	3PM	5:30	M					
L	13/2/63					potato starch flour	x2	O	PIP	Lunch	3PM	5:30	M					
M	13/2/63					Xanthan gum	x1	O	PIP	4PM	- 8PM		M					
N	13/2/63					crisps x8	x1½	Ø	PIP	3PM	- 8PM		M					
O																		
P																		
Q						Cancelled												
R																		
S																		
T																		

Name: Dr Singh Smith Spin No: 13/2/63 CHI No. or DOB: 4/12/91 Drug allergies: Latex & Antihistamine

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised US = Unsupervised

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SIDE A

NHS Greater Glasgow and Clyde

METHADONE SCRIPT? ☐ YES ☒ NO
BUPRENORPHINE SCRIPT? ☐ YES ☐ NO
CHAMPIX or NRT ☐ YES ☐ NO ☐ COMPLETE
PCD ☐ YES ☐ NO

Prescription Sheet No: 13/2/23 HMP: Addiction
Start Date: Location:
Rewritten Date:

SUPERVISED PRESCRIPTIONS

	Commence Date	Review date initials	Review date initials	Review date initials	Stop date Length	DRUGS (including formulation)	Dose	Route	Times of administration AM	Noon	PM	Night	Issue	Prescriber's signature	Discontinued Date	Discontinued Initials	Pharmacist Date	Pharmacist Initials
1																		
2																		
3																		
4																		
5																		
6																		
7																		
8																		

AS REQUIRED PRESCRIPTIONS

	Commence Date	Review date initials	Review date initials	Review date initials	Stop date Length	DRUGS (including formulation)	Dose	Route	Frequency of administration	Issue	Prescriber's signature	Discontinued Date	Discontinued Initials	Pharmacist Date	Pharmacist Initials
9	13/2/23				28 days	Diflam 50mg	3-4	PO	3-4 hrly						
10	(13/2/23)				(28 days)	hydrocortisone 1% ointment	see	see	see						
11	13/2/23					Cetraben	BD	BD	BD						
12	13/2/23	13/2/23				Replacement oil caps	1-2	0	TDS						
13	13/2/23	13/2/23				Pedialyte	600ml	PO	PRN						
14	13/2/23	13/2/23				Dentyl see 2nd pg									
15	13/2/23	13/2/23													

ONCE ONLY PRESCRIPTIONS

	Administration date	Administration time	DRUGS (including formulation)	Dose	Route	Frequency of administration	Issue	Prescriber's signature	Time given	Pharmacist Date	Pharmacist Initials
16											
17											
18											

Name: Spin No: Chi No. or DOB: Drug allergies:

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised US = Unsupervised

ma + 296903v1.0

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METHADONE SCRIPT? ☐ YES ☐ NO
BUPRENORPHINE SCRIPT? ☐ YES ☒ NO
CHAMPIX or NRT PCD ☐ YES ☐ NO ☐ COMPLETE

Prescription Sheet No.: 2
Start Date: 19/11/23
Rewritten Date: 19/11/23

HMP: LLIAS, SIDE B
Location: 2

NHS Greater Glasgow and Clyde

UNSUPERVISED PRESCRIPTIONS

	Commence Date	Review date initials	Review date initials	Review date initials	Stop date Length	DRUGS (including formulation)	Dose	Route	Times of administration AM	Noon	PM	Night	Issue	Prescriber's signature	Discontinued Date	Discontinued Initials	Pharmacist Date	Pharmacist Initials
A	19/11/23	19/11/23				AMITRIPTYLINE	75mg	O			✓	✓	W	WO~				
B	19/11/23	19/11/23				QUETIAPINE	150mg	O			✓	✓	W	WO~				
C	19/11/23				24/11/23	DOXYCYCLINE	100mg	O	✓			✓	W	WO~				
D	19/11/23	19/11/23				PIZOTIFEN	[redacted]	O				✓	W	WO~				
E	19/11/23	19/11/23				BISACODYL 5MG	10mg	O				✓	W	WO~				
F	19/11/23	19/11/23				CETIRIZINE	10mg	O				✓	W	WO~				
G	19/11/23	19/11/23				GF SEEDED LOAF WDDS	PIP DOSE	PIP DOSE	308 - 9364				W	WO~				
H	19/11/23	19/11/23				CRISPY RICE 375g x 2	PIP DOSE	PIP DOSE	688 - 2982				W	WO~				
I	19/11/23	19/11/23				RUSTICS (SEEDED) 600g x 2	PIP DOSE	PIP DOSE	211 - 5198				W	WO~				
J	19/11/23	19/11/23				SPAGHETTI 500g	PIP DOSE	PIP DOSE	211 - 5160				W	WO~				
K	19/11/23	19/11/23				CRACKERS 200g	PIP DOSE	PIP DOSE	029 - 3502				W	WO~				
L	19/11/23	19/11/23				MANICRACKERS 175g x 4	PIP DOSE	PIP DOSE	3563 - 5515				W	WO~				
M	19/11/23	19/11/23				SAVOURY BISCUITS 150g x 4	PIP DOSE	PIP DOSE	310 - 7893				W	WO~				
N	19/11/23	19/11/23				GF WHITE ROLLS 4PACK 200g	PIP DOSE	PIP DOSE	3444 - 3645				W	WO~				
O	19/11/23	19/11/23				GF PART BAKED ROLLS 4PACK	PIP DOSE	PIP DOSE	3444 - 3652				W	WO~				
P																		
Q																		
R																		
S																		
T																		

Name: GEORGINA SMITH Sgm No: 13134444 CHI No. or DOB: 4/12/91 Drug allergies: LACTOSE/GLUTEN INTOLERANCE

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised US = Unsupervised

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SIDE A

NHS Greater Glasgow and Clyde

METHADONE SCRIPT? ☐ YES ☒ NO
BUPRENORPHINE SCRIPT? ☐ YES ☐ NO ☒ COMPLETE
CHAMPIX or NRT ☐ YES ☐ NO
PGD

Prescription Sheet No: _____ HMP: _____
Start Date: _____ Location: _____
Rewritten Date: _____

SUPERVISED PRESCRIPTIONS

	Commence Date	Review date Initials	Review date Initials	Review date Initials	Review date Initials	Stop date Length	DRUGS (including formulation)	Dose	Route	Times of administration: AM	Noon	PM	Night	Issue	Prescriber's signature	Discontinued: Date	Initials	Pharmacist: Date	Initials
1																			
2																			
3																			
4																			
5																			
6																			
7																			
8																			

AS REQUIRED PRESCRIPTIONS

	Commence Date	Review date Initials	Stop date Length	DRUGS (including formulation)	Dose	Route	Frequency of administration	Issue	Prescriber's signature	Discontinued: Date	Initials	Pharmacist: Date	Initials
9	19/1/23			KETOCONAZOLE SHAMPOO 2%	APP	TOP	2-3 TIMES WEEKLY	M W					
10	19/1/23			PEPPERMINT CAPS	APP	TOP	PRN	M W					
11	19/1/23			CLOBETASOL	APP	TOP	TWICE DAILY	M W					
12	19/1/23			EUCERIN	APP	TOP	ONCE DAILY PRN	M W					
13	19/1/23			DERMOVATE SPD 50g	APP	TOP	PRN	M W					
14	19/1/23			AQUEOUS CREAM 500g	APP	TOP	TWICE DAILY PRN	M W					
15	19/1/23												

ONCE ONLY PRESCRIPTIONS

	Administration date	Administration time	■ NHS Dalkeith formulation	Dose	Route	Frequency of administration	Issue	Prescriber's signature: Print name	Time given	Pharmacist: Date	■
16											
17											
18											

Name: GEORGINA SMITH CHI No. or DOB: 04/12/91 Drug allergies: LACTOSE / GLUTEN
ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue Spin No: 1313444 S = Supervised U = Unsupervised

INTOLERANCE

RM + 2969039v1.0

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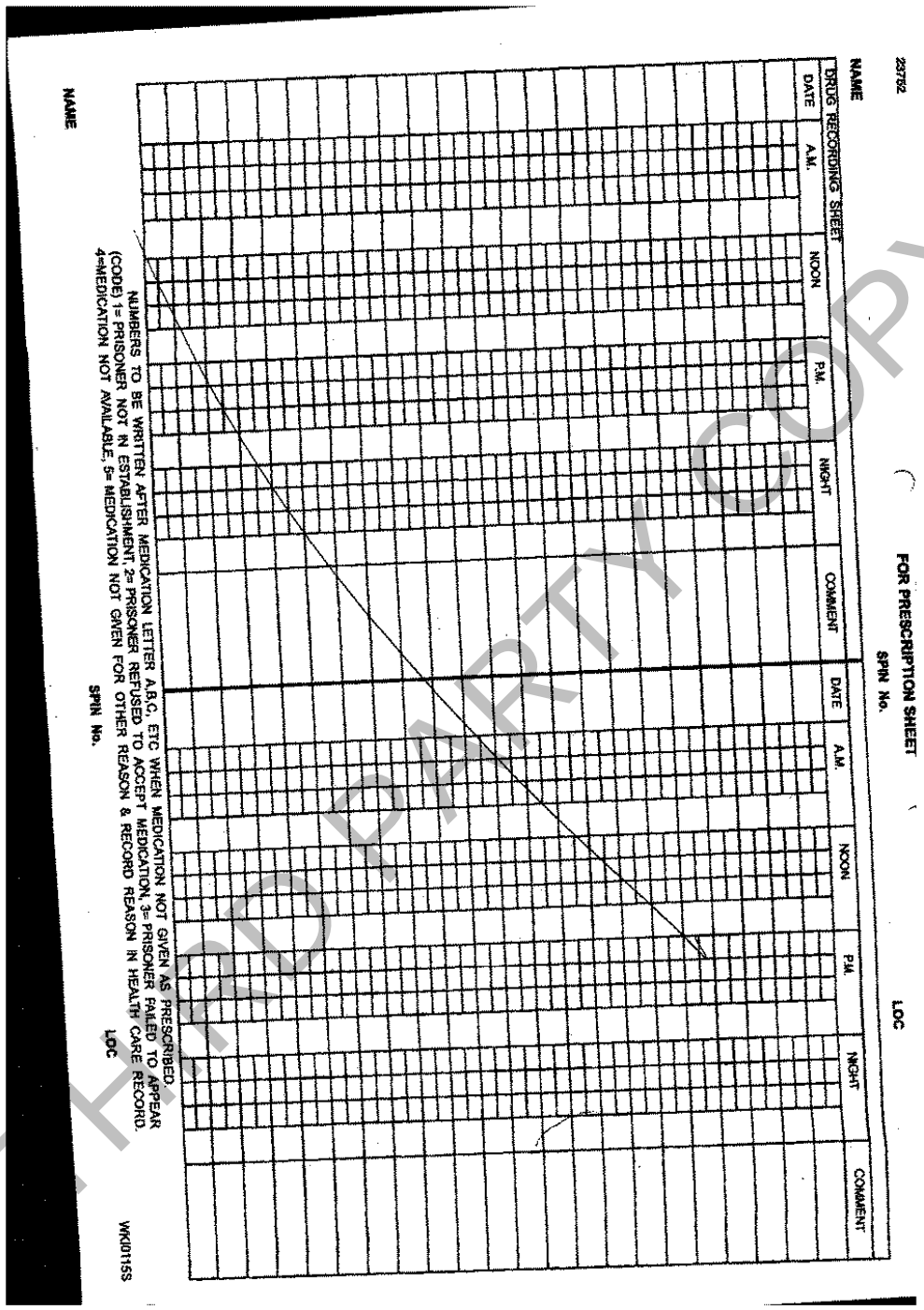

NAME

DRUG RECORDING SHEET

DATE	A.M.	NOON	P.M.	NIGHT	COMMENT

NUMBERS TO BE WRITTEN AFTER MEDICATION LETTER A,B,C, ETC WHEN MEDICATION NOT GIVEN AS PRESCRIBED.
(CODE) 1= PRISONER NOT IN ESTABLISHMENT, 2= PRISONER REFUSED TO ACCEPT MEDICATION, 3= PRISONER FAILED TO APPEAR
4=MEDICATION NOT AVAILABLE, 5= MEDICATION NOT GIVEN FOR OTHER REASON & RECORD REASON IN HEALTH CARE RECORD.

SPIN No.

LOC

WK/0115S

NAME

253752

FOR PRESCRIPTION SHEET

SPIN No.

LOC

DATE	A.M.	NOON	P.M.	NIGHT	COMMENT

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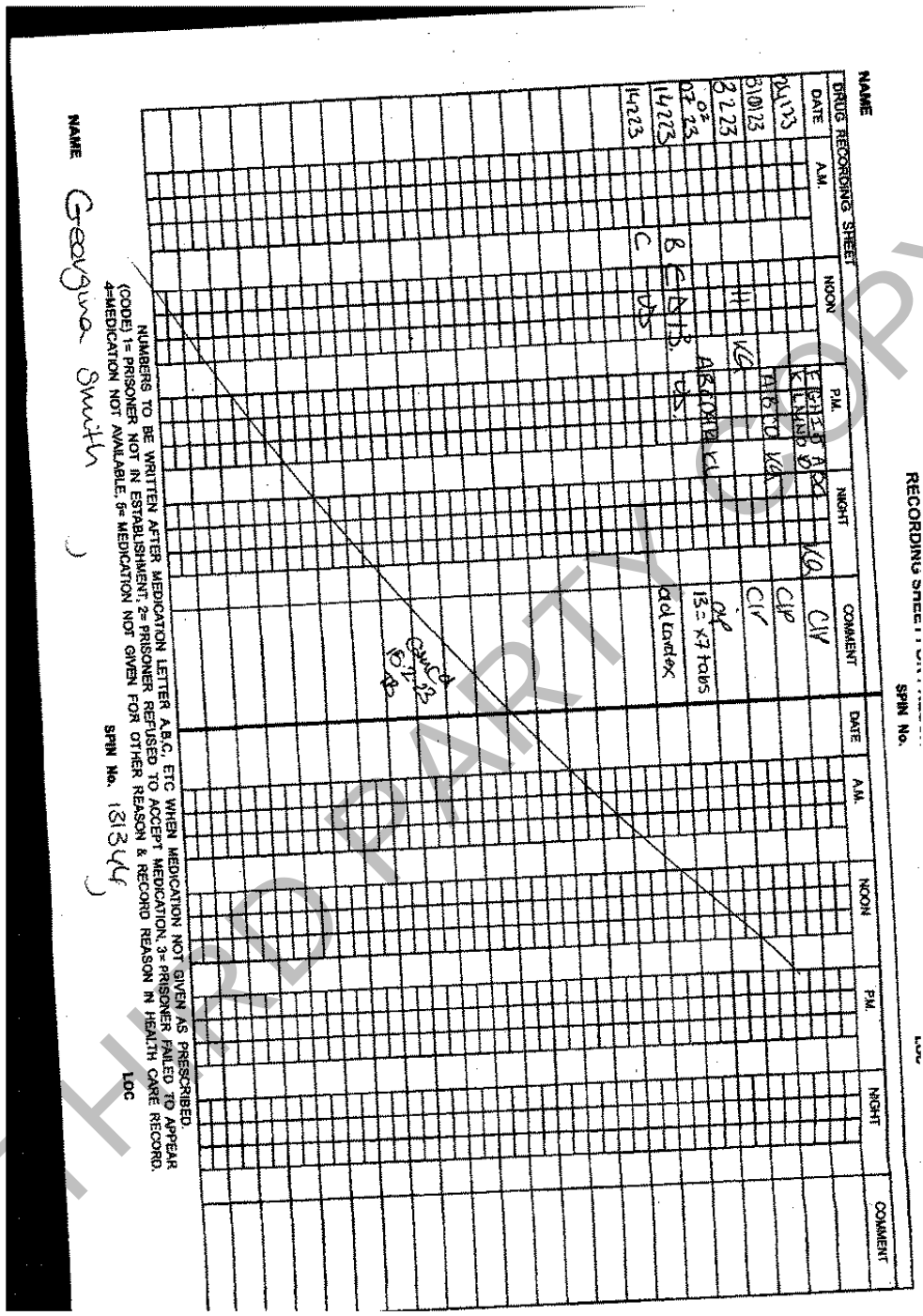

NAME

RECORDING SHEET

SPIN No.

DRUG RECORDING SHEET

DATE	A.M.	NOON	P.M.	NIGHT	COMMENT
20/1/23				KG	CLV
31/1/23				KG	CLV
2.2.23				KG	CLV
07.02.23					13:47 taws
14/2/23				B	
14/2/23				C	

NUMBERS TO BE WRITTEN AFTER MEDICATION LETTER A,B,C, ETC WHEN MEDICATION NOT GIVEN AS PRESCRIBED.
(CODE) 1= PRISONER NOT IN ESTABLISHMENT, 2= PRISONER REFUSED TO ACCEPT MEDICATION, 3= PRISONER FAILED TO APPEAR
4=MEDICATION NOT AVAILABLE, 5= MEDICATION NOT GIVEN FOR OTHER REASON & RECORD REASON IN HEALTH CARE RECORD.

LOC

NAME Graeme Smith

SPIN No. 1313464

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Glasgow City HSCP

Chief Off
Susanne
MA(Hons)

Health Centre
HMP YOI Lilias
41 Craigmont Street
Glasgow
G20 9AJ

01/03/2023

Georgina Smith

131344

H204

Dear Miss Smith,

Your referral has been screened 01/03/2023 and you have been allocated a routine mental health assessment.

A member of the team will contact you in due course to arrange an appointment. Please be aware that we aim to see patients within 28 days.

Kind Regards

The Mental Health Team

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{Form:GRI}

NORTH GLASGOW HOSPITALS
HAEMATOLOGY REPORT

Surname: SMITH
Forename: GEORGINA
DOB/Age: 04.12.91 Sex: Female
CHI/Unit No: 0412913127
Address: THE HEALTH CENTRE
Details:

Location: HMP Lillias YOI
41 Craigmont Street
Maryhill Glasgow
Greater Glasgow & Clyde
Requestor: Not known
Ext Labno:

			[[CURRENT]]
Lab Number			B,23.5887823.B
[redacted] collected			15.02.23 12:00
Date/Time received			15.02.23 15:25
Specimen type			Blood
WBC	x10^9/l	(4.0-11.0)	5.6
RBC	x10^12/l	(3.90-5.80)	4.45
Haemoglobin	g/l	(115-165)	131
Haematocrit	l/l	(0.370-0.470)	0.391
MCV	fl	(83.0-101.0)	87.9
MCH	pg	(27.0-32.5)	29.4
Platelet Count	x10^9/l	[redacted]	313
Neutrophils	x10^9/l	(2.0-7.0)	2.9
Lymphocytes	x10^9/l	(1.1-5.2)	1.8
Monocytes	x10^9/l	(0.2-1.0)	0.4
Eosinophils	x10^9/l	(0.02-0.50)	0.47
Basophils	x10^9/l	(0.0-0.1)	0.1
Nucleated RBC	x10^9/L		0.0
Myelocytes	x10^9/L		
Blasts	x10^9/L		
Others	x10^9/L		
ESR	mm/hr	(0-12)	
Retics	x10^9/L	(50-100)	

Glan Fever Scr

Blood Film

Result Comments:

Date reported: 16.02.23 Authoriser: Run No: 470

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Glasgow City HSCP

Chief Off
Susanne
MA(Hons)

Health Centre
HMP YOI Lilias
41 Craigmont Street
Glasgow
G20 9AJ

01/03/2023

Georgina Smith

131344

H204

Dear Miss Smith,

Your referral has been screened 01/03/2023 and you have been allocated a routine mental health assessment.

A member of the team will contact you in due course to arrange an appointment. Please be aware that we aim to see patients within 28 days.

Kind Regards

The Mental Health Team

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GRI Num: 472

NORTH GLASGOW HOSPITALS
HAEMATOLOGY REPORT

Surname: SMITH
Forename: GEORGINA
DOB/Age: 04.12.91 Sex: Female
CHI/Unit No: 0412913127
Address: THE HEALTH CENTRE
Details:

Location: HMP Lillias YOI
41 Craigmont Street
Maryhill Glasgow
Greater Glasgow & Clyde
Requestor: Not known
Ext Labno:

Lab No: B,23.4397077
Collected: 15.02.23 12:00
Authorised: 15.02.23

Specimen: Blood
Received: 15.02.23 15:26
Authoriser:

B12

Serum Vitamin B12	385	ng/l	(200-883)

SF

Serum Folate	14.2	ug/l	(3.1-20.0)

Comments:

Enquiries: Phone 0141 242 9552

Date reported: 17.02.23

Page 1 of 1

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* Needs appoint. face to face *.

NHS Prison Healthcare
Self Referral Form

NHS Greater Glasgow and Clyde

Print Full Name:	GEORGINA SMITH		
No.	131344	[redacted] & Cell No:	House 2 Room 4
Date of Request:	26/2/23	EDL or Lib Date:	July 2025
		[redacted] Date:	N/A.

Please Tick the relevant box below to indicate service required:

REQUESTING TO SEE A ~~NURSE~~/ DOCTOR

WRITE YOUR REASON:
To re-check my throat since the doctor last checked it as not getting better since taking the spray. Need to check blood results.

Nurse Led Clinics (Please tick the relevant box below):

Asthma		Diabetes	
[redacted] Health	✓	Well [redacted] Woman	
Leg Ulcer & Wound Dressing Clinic		HIV & Hep C Treatment & Testing	

ADDICTION CLINICS

Appointment with Addiction Nurse		Smoking Cessation	

VACCINATIONS

Hep A		Hep B	

DENTIST (Please Complete dental Referral Form)		
PODIATRIST Available to prisoners with 3 months, or more, left to serve.		
OPTICIAN Available to prisoners with 3 months, or more, left to serve.	✓	
DISCHARGE MEDICATION (Please order 7 Days before Liberation Date)		
MENTAL HEALTH SERVICE (Please Complete Mental Health Referral Form)		

IF YOU REQUIRE HELP COMPLETING THIS FORM
PLEASE SPEAK TO THE [redacted] NURSE FOR ASSISTANCE

GP appt made 13/03

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* Needs appoint face to face *.

NHS Prison Healthcare
Self Referral Form

NHS Greater Glasgow and Clyde

Print Full Name:	GEORGINA SMITH		
No.	131344	[redacted] & Cell No:	House 2 Room 4
Date of Request:	26/2/23	EDL or Lib Date:	July 2025
		[redacted] Date:	N/A.

Please Tick the relevant box below to indicate service required:

REQUESTING TO SEE A ~~NURSE~~/ DOCTOR

WRITE YOUR REASON:
To re-check my throat since the doctor last checked it as not getting better since taking the spray. Need to check blood results.

Nurse Led Clinics (Please tick the relevant box below):

Asthma		Diabetes	
[redacted] Health	✓	Well [redacted] Woman	
Leg Ulcer & Wound Dressing Clinic		HIV & Hep C Treatment & Testing	

ADDICTION CLINICS

Appointment with Addiction Nurse		Smoking Cessation	

VACCINATIONS

Hep A		Hep B	

DENTIST (Please Complete dental Referral Form)		
PODIATRIST Available to prisoners with 3 months, or more, left to serve.		
OPTICIAN Available to prisoners with 3 months, or more, left to serve.	✓	
DISCHARGE MEDICATION (Please order 7 Days before Liberation Date)		
MENTAL HEALTH SERVICE (Please Complete Mental Health Referral Form)		

IF YOU REQUIRE HELP COMPLETING THIS FORM
PLEASE SPEAK TO THE [redacted] NURSE FOR ASSISTANCE

GP appt made 13/03

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SCOTTISH PRISON SERVICE

HMP&YOI POLMONT
MEDICAL MARKER

NHS Forth Valley

THIS FORM HAS BEEN COMPLETED HAS THE PRISONER NAMED BELOW REQUIRES A MEDICAL MARKER.

NAME:	Keavgina Smith	D.O.B:	04/12/1991
SPIN:	131344	LOCATION:	B2

MEDICAL REASON:

Gluten and lactose intolerant

PLEASE FILL OUT ALL FIELDS IN THIS FORM AND ENSURE TO DO THE FOLLOWING (TICK BEFORE COPYING TO PROVE THIS HAS BEEN DONE):

- GIVE COPY TO ADMIN TO SCAN TO PATIENTS VISION ☑
- SEND A COPY TO THE PRISONER ☑
- SEND A COPY TO THE PRISONER'S [redacted] ☑
- SEND A COPY TO THE RELEVANT DEPARTMENT ☑
- DOCUMENT ENTRY ON PATIENT'S VISION RECORD ☑

DATE ISSUED:	29/03/2023	REVIEW DATE:	29/03/2024
PRACTITIONER SIGNATURE:	[signature]	PRACTITIONER PRINT:	JILL RAMSAY

- THE PRISONER HAS BEEN GIVEN A COPY OF THIS FORM STATING THEIR REVIEW DATE. IT IS THE SOLE RESPONSIBILTY OF THE PRISONER TO PUT A SELF REFERRAL FORM IN 3-5 DAYS PRIOR TO THEIR REVIEW DATE TO ENSURE THEY RECEIVE A NEW MEDICAL MARKER IF IT IS REQUIRED.
- IF THE [redacted] DOES NOT RECEIVE A NEW MEDICAL MARKER AFTER THE ABOVE REVIEW DATE STATING A NEW REVIEW DATE THEN THE PRISONERS MEDICAL MARKER HAS BEEN REVOKED AS IT IS NO LONGER REQUIRED.

NHS FORTH VALLEY

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SCOTTISH PRISON SERVICE

HMP&YOI POLMONT
MEDICAL MARKER

NHS Forth Valley

THIS FORM HAS BEEN COMPLETED HAS THE PRISONER NAMED BELOW REQUIRES A MEDICAL MARKER.

NAME:	Keavgina Smith	D.O.B:	04/12/1991
SPIN:	1313LL	LOCATION:	B2

MEDICAL REASON:

Gluten and lactose intolerant

PLEASE FILL OUT ALL FIELDS IN THIS FORM AND ENSURE TO DO THE FOLLOWING (TICK BEFORE COPYING TO PROVE THIS HAS BEEN DONE):

- GIVE COPY TO ADMIN TO SCAN TO PATIENTS VISION ☑
- SEND A COPY TO THE PRISONER ☑
- SEND A COPY TO THE PRISONER'S [redacted] ☑
- SEND A COPY TO THE RELEVANT DEPARTMENT ☑
- DOCUMENT ENTRY ON PATIENT'S VISION RECORD ☑

DATE ISSUED:	29/03/2023	REVIEW DATE:	29/03/2024
PRACTITIONER SIGNATURE:	[signature]	PRACTITIONER PRINT:	JILL RAMSAY

- THE PRISONER HAS BEEN GIVEN A COPY OF THIS FORM STATING THEIR REVIEW DATE. IT IS THE SOLE RESPONSIBILTY OF THE PRISONER TO PUT A SELF REFERRAL FORM IN 3-5 DAYS PRIOR TO THEIR REVIEW DATE TO ENSURE THEY RECEIVE A NEW MEDICAL MARKER IF IT IS REQUIRED.
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IN POSSESSION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
Georgia Smith	01/04/23	131344	B2	04/12/91

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM NOON PM NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Amitryptyline	75mg	29/3/23	21 × 25mg	✓	12	15	(+3)
Quetiapine	150mg	29/3/23	7	✓	4	5	(+1)

Time of check	

PRISONERS RESPONSE TO ANY DISCREPANCY:

previous prescription overlapped

Nurse Signature: J P ____ **Patient Signature:** G Smith

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

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IN POSSESSION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
Georgia Smith	01/04/23	131344	B2	04/12/91

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Amitryptyline	75mg	29/3/23	21 × 25mg				✓	12	15	(+3)
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Time of check										

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O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
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O Change your medication

GP Signature _____ **Date** _____

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Department of Endocrinology & Diabetes
Consultant: [redacted] G [redacted]
Tel: 01324 566346

Forth Valley Royal Hospital
Stirling Road
Larbert
FK5 4WR

NHS Forth Valley

Medical Officer
Corton Vale HMP
Cornton Road
Stirling
FK9 5NU

Date Dictated: 03/11/2023
Date Typed: 20/11/2023
Our Ref: CJGK/PM
CHI: 0412913127

Dear Medical Officer

Georgina Smith DOB: 04-12-1991
The Health Centre P.O. Box 21616 Stirling FK7 1DW

Diagnosis:
Probable thyroiditis

Plan:
Stop Carbimazole to monthly TFTs for three months then quarterly for 12 months

It was lovely to meet Georgina today in my endocrine clinic. She gives a history of intermittent weight loss and had a set of thyroid function done in August which were in keeping with thyrotoxicosis. Interestingly, they were repeated a week later and there had already been a reasonable drop in her Free T4 and then just as she started Carbimazole, repeated again and at that point they were within the reference range. She has no receptor antibodies.

She has no family history, no significant past medical history.

On examination, she is euthyroid.

Given her presentation, her negative antibodies and the fact her Free T4 was dropping, I think Georgina almost certainly has thyroiditis. It is very unusual in somebody who is [redacted] and female to have an antibody negative true thyrotoxic picture and I have suggested that she discontinue her Carbimazle, we keep an eye on her bloods as above and clearly if she develops thyrotoxicosis again we can start her on a tiny dose of Carbimazole but I wonder if she might actually become underactive for a period prior to things restoring themselves.

Best wishes. Kindest regards.

Yours sincerely

Dictated and electronically checked by:

Chair: Janie McCusker
Interim Chief Executive: [redacted] Cowan

NHS Forth Valley
Headquarters: Carseview House, Castle Business Park, Stirling, FK9 4SW

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@nhsforthvalley @nhsforthvalley

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[redacted] J G [redacted]
Consultant Physician
GMC Registration Number: 3488920

CC:
Ms Georgina Smith
The Health Centre
P.O. Box 21616
Stirling
FK7 1DW

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NHS
Greater Glasgow and Clyde

MDMHT REFERRAL FORM

Name Georgina Smith Spin Number 131344

D.O.B. 04/12/1991 Date of Admission

Referral completed by Georgina Smith

Date of referral 15/02/23

Please state the reasons why you are referring to the Mental Health Team in the box below

I need to speak [redacted] mental Health nurse for on-going issues.
Thanks.

Please complete the following,

Have you/the prisoner seen the Mental Health Team before? Yes/No
Are you/the prisoner on anti-psychotic medication Yes/No
Have you/the prisoner received support from a CPN? Yes/No
Is there a history of self harming behaviour Yes/No

FOR ADMINISTRATION PURPOSES ONLY

Date Received by Admin..... Signature.....

Date assessed by MHN ..... Signature.....

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NHS
Greater Glasgow and Clyde

MDMHT REFERRAL FORM

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D.O.B. 04/12/1991 Date of Admission

Referral completed by Georgina Smith

Date of referral 15/02/23

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Is there a history of self harming behaviour	Yes/No

FOR ADMINISTRATION PURPOSES ONLY

Date Received by Admin..... Signature.....

Date assessed by MHN ..... Signature.....

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METHADONE SCRIPT? ☐ YES ☑ NO
BUPRENORPHINE SCRIPT? ☐ YES ☒ NO
CHAMPIX or NRT ☐ YES ☐ NO ☐ COMPLETE
PGD ☐ YES ☐ NO

Prescription Sheet No: _____
Start Date: 18.2.23
Rewritten Date: 15.2.23

HMP: LUCAS
Location: _____

SIDE B

NHS Greater Glasgow and Clyde

UNSUPERVISED PRESCRIPTIONS

	Commence Date	Review date Initials	Review date Initials	Review date Initials	Stop after Length	DRUGS (including formulation)	Dose	Route	Times of administration: AM	Noon	PM	Night	Issue	Prescriber's signature	Discontinued: Date	Initials	Pharmacist: Date	Initials
A	~~18.2.23~~	13.2.23				~~DIHYDROCODEINE TABS~~	~~30mg~~	~~O~~	~~✓~~				~~M~~	~~RCSurfer~~	~~13.2.23~~	~~KC~~		
B	13.2.23	15.2.23 TR				AMITRIPTYLINE	75mg	O			✓	✓	W	RCSurfer	13.2.23	KC		
C	13.2.23	15.2.23 TR				QUETIAPINE	150mg	O			✓	✓	W	RCSurfer				
D	15.2.23	15.2.23 TR				PREGABALIN	150mg	O			✓	✓	W	RCSurfer				
E	13.2.23	15.2.23 TR				BISACODYL TABS.	1-2	O			✓	✓	W	RCSurfer				
F	~~18.2.23~~	15.2.23 TR				~~CEFTRIAXONE~~	~~2g~~	~~IV~~					~~M~~	~~RCSurfer~~	~~13.2.23~~	~~KC~~		
G	13.2.23	15.2.23 TR				SECRED LOAF ACOG (1PK)	×1	O				✓	M	RCSurfer				
H	13.2.23	15.2.23 TR				STRAWS (2PKS)	×1	O	Apr: Jab 9bbl				M	RCSurfer				
I	13.2.23	15.2.23 TR				ALL PURPOSE FLOUR (2PKS)	×1	O	Apr: 2lb 3ozs				M	RCSurfer				
J	13.2.23	15.2.23 TR				MUSH PURPOSE WHITE MIX (2PKS)	×1	O	Apr: 3pp 23ZT				M	RCSurfer				
K	13.2.23	15.2.23 TR				FIBRE MIX (2PKS)	×1	O	Apr: 0Ch4 5187				M	RCSurfer				
L	13.2.23	15.2.23 TR				POTATO STARCH FLOUR (2PKS)	×1	O	Apr: 0Ch4 5291				M	RCSurfer				
M	13.2.23	15.2.23 TR				XANTHAN GUM (1PP)	×1	O	Apr: 323 7Bbl6				M	RCSurfer				
N	15.2.23	15.2.23 TR				CRUSH RICE (1PK)	×1	O	Apr: 4bb 8074				M	RCSurfer				
O	13.2.23	[illegible]				PARACETAMOL	1gram	O	Apr: 3bb 2982				M	RCSurfer				
P	13.2.23	15.2.23				FEXOFENADINE	120mg	O				✓	M					
Q	13.2.23	15.2.23				BECLOMETHASONE NASAL SPRAY	1spray	INH				✓	M					
R																		
S																		
T																		

Name: Catherine Smith Spin No: 13 13444 CHI No. or DOB: 04.12.91 Drug allergies: Latex

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised US = Unsupervised

LACOSTE / CAUTION IN PREGNANCY

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METHADONE SCRIPT? ☐ YES ☑ NO

BUPRENORPHINE SCRIPT? ☐ YES ☑ NO

CHAMPIX or NRT ☐ YES ☐ NO ☐ COMPLETE

PGD ☐ YES ☐ NO

Prescription Sheet No.: _____

Start Date: _____

Rewritten Date: 15.2.23

SIDE A

HMP: Lilias

Location: _____

NHS Greater Glasgow and Clyde

SUPERVISED PRESCRIPTIONS

	Commence Date	Review date initials	Review date initials	Review date initials	Stop date Length	DRUGS (including formulation)	Dose	Route	Times of administration AM	Noon	PM	Night	Issue	Prescriber's signature	Discontinued Date	Discontinued Initials	Pharmacist Date	Pharmacist Initials
1																		
2																		
3																		
4																		
5																		
6																		
7																		
8																		

AS REQUIRED PRESCRIPTIONS

	Commence Date	Review date initials	Review date initials	Review date initials	Stop date Length	DRUGS (including formulation)	Dose	Route	Frequency of administration	Issue	Prescriber's signature	Discontinued Date	Discontinued Initials	Pharmacist Date	Pharmacist Initials
9	13.2.23				7/7	DIFFLAM SPRAY	3/4 Puffs	top	(3-4/day	C	TuBuAza				
10	13.2.23				6 WKS	KETOCONAZOLE 2% SHAMPOO	ONE	Top	2 - 3 /wkly	C	TuBuAza				
11	13.2.23	13.6.23 TB				CETIRIZEN 10mg	ONE	top	x2/day	M	TuBuAza				
12	13.2.23	13.6.23 TB				PEPPERMINT OIL CAPS.	1-2	O	x3/day	M	TuBuAza				
13	13.2.23	13.6.23 TB				FLODILAC	1 DOSE	O	X1 /DAILY	M	TuBuAza				
14	13.2.23	13.6.23 TB				DERMOL [redacted] (SOAP SUB)	ONE	TOP	PRN	M	TuBuAza				
15															

ONCE ONLY PRESCRIPTIONS

	Administration date	Administration time	DRUGS (including formulation)	Dose	Route	Frequency of administration	Issue	Prescriber's signature	Time given	Pharmacist Date	Pharmacist Initials
16											
17											
18											

Name: Georgina Smith Spin No: B1C2H4 CHI No. or DOB: 04.2.91 Drug allergies: LACTOSE / GLUTEN INTOLERANCE

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised US = Unsupervised

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NAME

DRUG RECORDING SHEET

DATE	A.M.	NOON	P.M.	NIGHT	COMMENT

NUMBERS TO BE WRITTEN AFTER MEDICATION LETTER A,B,C, ETC WHEN MEDICATION NOT GIVEN AS PRESCRIBED.
(CODE) 1= PRISONER NOT IN ESTABLISHMENT, 2= PRISONER REFUSED TO ACCEPT MEDICATION, 3= PRISONER FAILED TO APPEAR
4=MEDICATION NOT AVAILABLE, 5= MEDICATION NOT GIVEN FOR OTHER REASON & RECORD REASON IN HEALTH CARE RECORD.

NAME

SPIN No.

LOC

RECORDING SHEET FOR PRESCRIPTION SHEET

NAME

SPIN No.

LOC

PS2

DATE	A.M.	NOON	P.M.	NIGHT	COMMENT

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23752

RECORDING SHEET FOR PRESCRIPTION SHEET

PS2

NAME Georgina Smith. **SPIN No.** 131344. **LOC** Ueias

DRUG RECORDING SHEET

DATE	A.M.	NOON	P.M.	NIGHT	COMMENT
15.2.23		#13	US		CIP
21/2/23		BCFOANJ13		CX2J	13=21
23/2/23			G M L S E		CP
24/2/23		E			CP
28/2/23		BCD			CP
3/3/23		BCOB			CIP
4/3/23		BCDPQ			CIP
5/3/23		D			CIP -
6/3/23		BCD			

DATE	A.M.	NOON	P.M.	NIGHT	COMMENT

NUMBERS TO BE WRITTEN AFTER MEDICATION LETTER A,B,C, ETC WHEN MEDICATION NOT GIVEN AS PRESCRIBED.
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NAME **SPIN No.** **LOC** WKI0115S

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SPS SCOTTISH PRISON SERVICE

HMP CORNTONVALE
MEDICAL MARKER

NHS Forth Valley

THIS FORM SHOULD ONLY BE COMPLETED IF THERE IS A CLEAR CLINICAL JUSTIFICATION FOR REQUISITION.

NAME:	Georgina Smith	D.O.B:	04/12/91
SPIN:	134344	LOCATION:	PEEBLES

DATE ISSUED:	17/10/2022	REVIEW DATE:	17/01/23
PRINT NAME:	SPAYNE	SIGN NAME:	SPayne

PLEASE FILL OUT ALL FIELDS IN THIS FORM AND ENSURE TO DO THE FOLLOWING (TICK BEFORE COPYING TO PROVE THIS HAS BEEN DONE):

- GIVE COPY TO ADMIN TO SCAN TO PATIENTS VISION ☑
- SEND A COPY TO THE PRISONER ☑
- SEND A COPY TO THE PRISONER'S [redacted] ☑
- SEND A COPY TO THE RELEVANT DEPARTMENT ☑
- DOCUMENT ENTRY ON PATIENT'S VISION RECORD ☑

- THE PRISONER HAS BEEN GIVEN A COPY OF THIS FORM STATING THEIR REVIEW DATE. IT IS THE SOLE RESPONSIBILTY OF THE PRISONER TO PUT A SELF REFERRAL FORM IN 3-5 DAYS PRIOR TO THEIR REVIEW DATE TO ENSURE THEY RECEIVE A NEW MEDICAL MARKER IF IT IS REQUIRED.
- IF THE [redacted] DOES NOT RECEIVE A NEW MEDICAL MARKER AFTER THE ABOVE REVIEW DATE STATING A NEW REVIEW DATE THEN THE PRISONERS MEDICAL MARKER HAS BEEN REVOKED AS IT IS NO LONGER REQUIRED.

Please allow prisoner to have 2 duvets for under mattress

NHS FORTH VALLEY

HMP GLENOCHIL

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[redacted]

Department of Endocrinology & Diabetes
Consultant: [redacted] G [redacted]
Tel: 01324 566346

Forth Valley Royal Hospital
Stirling Road
Larbert
FK5 4WR

NHS Forth Valley

Medical Officer
Corton Vale HMP
Cornton Road
Stirling
FK9 5NU

Date Dictated: 03/11/2023
Date Typed: 20/11/2023
Our Ref: CJGK/PM
CHI: 0412913127

Dear Medical Officer

Georgina Smith DOB: 04-12-1991
The Health Centre P.O. Box 21616 Stirling FK7 1DW

Diagnosis:
Probable thyroiditis

Plan:
Stop Carbimazole to monthly TFTs for three months then quarterly for 12 months

It was lovely to meet Georgina today in my endocrine clinic. She gives a history of intermittent weight loss and had a set of thyroid function done in August which were in keeping with thyrotoxicosis. Interestingly, they were repeated a week later and there had already been a reasonable drop in her Free T4 and then just as she started Carbimazole, repeated again and at that point they were within the reference range. She has no receptor antibodies.

She has no family history, no significant past medical history.

On examination, she is euthyroid.

Given her presentation, her negative antibodies and the fact her Free T4 was dropping, I think Georgina almost certainly has thyroiditis. It is very unusual in somebody who is [redacted] and female to have an antibody negative true thyrotoxic picture and I have suggested that she discontinue her Carbimazle, we keep an eye on her bloods as above and clearly if she develops thyrotoxicosis again we can start her on a tiny dose of Carbimazole but I wonder if she might actually become underactive for a period prior to things restoring themselves.

Best wishes. Kindest regards.

Yours sincerely

Dictated and electronically checked by:

Chair: Janie McCusker
Interim Chief Executive: [redacted] Cowan

NHS Forth Valley
Headquarters: Carseview House, Castle Business Park, Stirling, FK9 4SW

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@nhsforthvalley @nhsforthvalley

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[redacted] J G [redacted]
Consultant Physician
GMC Registration Number: 3488920

CC:
Ms Georgina Smith
The Health Centre
P.O. Box 21616
Stirling
FK7 1DW

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Department of Endocrinology & Diabetes
Consultant: [redacted] J G [redacted]
Tel: 01324 566346

Forth Valley Royal Hospital
Stirling Road
Larbert
FK5 4WR

NHS Forth Valley

Medical Officer
Corton Vale HMP
Cornton Road
Stirling
FK9 5NU

Date Dictated: 03/11/2023
Date Typed: 20/11/2023
Our Ref: CJGK/PM
CHI: 0412913127

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The Health Centre P.O. Box 21616 Stirling FK7 1DW

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Dictated and electronically checked by:

Chair: Janie McCusker
Interim Chief Executive: [redacted] Cowan

NHS Forth Valley
Headquarters: Carseview House, Castle Business Park, Stirling, FK9 4SW

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[redacted] J G [redacted]
Consultant Physician
GMC Registration Number: 3488920

CC:
Ms Georgina Smith
The Health Centre
P.O. Box 21616
Stirling
FK7 1DW

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Department of Endocrinology & Diabetes
Consultant: [redacted] J G [redacted]
Tel: 01324 566346

Forth Valley Royal Hospital
Stirling Road
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FK5 4WR

NHS Forth Valley

Medical Officer
Corton Vale HMP
Cornton Road
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The Health Centre P.O. Box 21616 Stirling FK7 1DW

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Plan:
Stop Carbimazole to monthly TFTs for three months then quarterly for 12 months

It was lovely to meet Georgina today in my endocrine clinic. She gives a history of intermittent weight loss and had a set of thyroid function done in August which were in keeping with thyrotoxicosis. Interestingly, they were repeated a week later and there had already been a reasonable drop in her Free T4 and then just as she started Carbimazole, repeated again and at that point they were within the reference range. She has no receptor antibodies.

She has no family history, no significant past medical history.

On examination, she is euthyroid.

Given her presentation, her negative antibodies and the fact her Free T4 was dropping, I think Georgina almost certainly has thyroiditis. It is very unusual in somebody who is [redacted] and female to have an antibody negative true thyrotoxic picture and I have suggested that she discontinue her Carbimazle, we keep an eye on her bloods as above and clearly if she develops thyrotoxicosis again we can start her on a tiny dose of Carbimazole but I wonder if she might actually become underactive for a period prior to things restoring themselves.

Best wishes. Kindest regards.

Yours sincerely

Dictated and electronically checked by:

Chair: Janie McCusker
Interim Chief Executive: [redacted] Cowan

NHS Forth Valley
Headquarters: Carseview House, Castle Business Park, Stirling, FK9 4SW

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@nhsforthvalley @nhsforthvalley

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[redacted] J G [redacted]
Consultant Physician
GMC Registration Number: 3488920

CC:
Ms Georgina Smith
The Health Centre
P.O. Box 21616
Stirling
FK7 1DW

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SCOTTISH PRISON SERVICE

HMP CORNTONVALE
MEDICAL MARKER

NHS Forth Valley

THIS FORM SHOULD ONLY BE COMPLETED IF THERE IS A CLEAR CLINICAL JUSTIFICATION FOR REQUISITION.

NAME:	Georgina Smith	D.O.B:	04/12/91
SPIN:	134344	LOCATION:	PEEBLES

DATE ISSUED:	17/10/2022	REVIEW DATE:	17/01/23
PRINT NAME:	SPAYNE	SIGN NAME:	SPayne

PLEASE FILL OUT ALL FIELDS IN THIS FORM AND ENSURE TO DO THE FOLLOWING (TICK BEFORE COPYING TO PROVE THIS HAS BEEN DONE):

- GIVE COPY TO ADMIN TO SCAN TO PATIENTS VISION ☑
- SEND A COPY TO THE PRISONER ☑
- SEND A COPY TO THE PRISONER'S [redacted] ☑
- SEND A COPY TO THE RELEVANT DEPARTMENT ☑
- DOCUMENT ENTRY ON PATIENT'S VISION RECORD ☑

- THE PRISONER HAS BEEN GIVEN A COPY OF THIS FORM STATING THEIR REVIEW DATE. IT IS THE SOLE RESPONSIBILTY OF THE PRISONER TO PUT A SELF REFERRAL FORM IN 3-5 DAYS PRIOR TO THEIR REVIEW DATE TO ENSURE THEY RECEIVE A NEW MEDICAL MARKER IF IT IS REQUIRED.
- IF THE [redacted] DOES NOT RECEIVE A NEW MEDICAL MARKER AFTER THE ABOVE REVIEW DATE STATING A NEW REVIEW DATE THEN THE PRISONERS MEDICAL MARKER HAS BEEN REVOKED AS IT IS NO LONGER REQUIRED.

Please allow prisoner to have 2 duvets for under mattress

NHS FORTH VALLEY

HMP GLENOCHIL

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METHADONE SCRIPT? ☐ YES ☑ NO
BUPRENORPHINE SCRIPT? ☐ YES ☒ NO
CHAMPIX or NRT ☐ YES ☐ NO ☐ COMPLETE
PGD ☐ YES ☐ NO

Prescription Sheet No: _____
Start Date: 18.2.23
Rewritten Date: 15.2.23

HMP: LUCAS
Location: _____

SIDE B

NHS Greater Glasgow and Clyde

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UNSUPERVISED PRESCRIPTIONS

	Commence Date	Review date Initials	Review date Initials	Review date Initials	Stop after Length	DRUGS (including formulation)	Dose	Route	Times of administration: AM	Noon	PM	Night	Issue	Prescriber's signature	Discontinued: Date	Initials	Pharmacist: Date	Initials
A	~~13.2.23~~	~~13.2.23~~				~~EMTRICITABINE 200mg~~	~~1 CAP~~	~~O~~	~~✓~~				~~M~~	~~RCSurfer~~	~~13/2/23~~	~~RC~~		
B	13.2.23	13.2.23 TR				EMTRICITABINE 200mg / TENOFOVIR DISOPROXIL FUMARATE 245mg	1 CAP	O	✓				M	RCSurfer	13/2/23	RC		
C	13.2.23	13.2.23 TR				AMITRIPTYLINE	75mg	O			✓		W	RCSurfer				
D	15.2.23	15.2.23 RS				QUETIAPINE	50mg	O			✓		W	RCSurfer				
E	13.2.23	13.2.23 TR				PREGABALIN	1 (300mg)	O			✓		W	RCSurfer				
F	13.2.23	13.2.23 TR				BISACODYL 5MG	1-2	O			✓		M	RCSurfer				
G	13.2.23	15.2.23 RS				CEFTRIAXONE							M	RCSurfer	13/2/23	RC		
H	13.2.23	15.2.23 RS				SEDRED LOW ACOG (TM) (2PUFFS)	x1	O	Apr: 1208 9bpm				M	RCSurfer				
I	13.2.23	15.2.23 TR				SPIRIVA RESPIMAT (2PUFFS)	x1	O	Apr: 218 93%				M	RCSurfer				
J	13.2.23	15.2.23 TR				ALL PURPOSE FLOUR (2PUFFS)	x1	O	Apr: 323 237				M	RCSurfer				
K	13.2.23	15.2.23 TR				MUSCLE RUBBING WHITE MIX (2PUFFS)	x1	O	Apr: 204 5187				M	RCSurfer				
L	13.2.23	15.2.23 TR				FIBRE MIX (2PUFFS)	x1	O	Apr: 204 5291				M	RCSurfer				
M	13.2.23	15.2.23 TR				POTATO STARCH FLOUR (2PUFFS)	x1	O	Apr: 323 7866				M	RCSurfer				
N	15.2.23	15.2.23 TR				XANTHAN GUM (1PUFF)	x1	O	Pre 600 8074				M	RCSurfer				
O	13/2/23	[illegible]				CRUSH RICE (1PUFF)	x1	O	Apr: 600 2982				M	RCSurfer				
P	13/2/23	13/2/23				IMMOTIDINE	40mg	O	✓				M	RCSurfer				
Q	13/2/23	13/2/23				FEXOFENADINE	120mg	O	✓				M	RCSurfer				
R						BECLOMETHASONE AQUEOUS NASAL SPRAY (100µg)	2 sprays		✓		✓		M	RCSurfer				
S																		
T																		

Name: Gemma Smith
Spin No: 13 13444
CHI No. or DOB: 04/12/91
Drug allergies: Latex
LACOSTE / GLUTEN INTOLERANCE

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised US = Unsupervised

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PATIENT COPY

METHADONE SCRIPT? ☐ YES ☑ NO
BUPRENORPHINE SCRIPT? ☐ YES ☑ NO
CHAMPIX or NRT ☐ YES ☐ NO ☐ COMPLETE
PGD ☐ YES ☐ NO

Prescription Sheet No.: _____
Start Date: _____
Rewritten Date: 15.2.23

SIDE A

HMP: Littlehill
Location: _____

NHS Greater Glasgow and Clyde

SUPERVISED PRESCRIPTIONS

	Commence Date	Review date initials	Review date initials	Review date initials	Stop date Length	DRUGS (including formulation)	Dose	Route	Times of administration AM	Noon	PM	Night	Issue	Prescriber's signature	Discontinued Date	Discontinued Initials	Pharmacist Date	Pharmacist Initials
1																		
2																		
3																		
4																		
5																		
6																		
7																		
8																		

AS REQUIRED PRESCRIPTIONS

	Commence Date	Review date initials	Review date initials	Review date initials	Stop date Length	DRUGS (including formulation)	Dose	Route	Frequency of administration	Issue	Prescriber's signature	Discontinued Date	Discontinued Initials	Pharmacist Date	Pharmacist Initials
9	13.2.23				7/7	DIFFLAM SPRAY	3-4 PUFF	top	(3-4/day	C	TUBUAZ				
10	13.2.23				14/52	KETOCONAZOLE 2% SHAMPOO	ONE	TOP	2-3 WKly	C	TUBUAZ				
11	13.2.23	13.6.23 TB				CETIRIZEN 10mg	ONE	top	x2/day	M	TUBUAZ				
12	13.2.23	13.6.23 TB				PEPPERMINT OIL CAPS.	1-2	O	x3/day	M	TUBUAZ				
13	13.2.23	13.6.23 TB				FLODILAC	1 DOSE	O	X1/DAILY	M	TUBUAZ				
14	13.2.23	13.6.23 TB				DERMOL [redacted] (SOAP SUB)	ONE	TOP	PRN	M	TUBUAZ				
15															

ONCE ONLY PRESCRIPTIONS

	Administration date	Administration time	DRUGS (including formulation)	Dose	Route	Frequency of administration	Issue	Prescriber's signature	Time given	Pharmacist Date	Pharmacist Initials
16											
17											
18											

Name: Georgina Smith Spin No: B1C2H4 CHI No. or DOB: 04.2.91 Drug allergies: LACTOSE / GLUTEN INTOLERANCE

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised US = Unsupervised

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ITEM = 2960/3V1.0

NHS Confidential: Personal data about a patient

NAME

DRUG RECORDING SHEET

DATE	A.M.	NOON	P.M.	NIGHT	COMMENT

NUMBERS TO BE WRITTEN AFTER MEDICATION LETTER A,B,C, ETC WHEN MEDICATION NOT GIVEN AS PRESCRIBED.
(CODE) 1= PRISONER NOT IN ESTABLISHMENT, 2= PRISONER REFUSED TO ACCEPT MEDICATION, 3= PRISONER FAILED TO APPEAR
4=MEDICATION NOT AVAILABLE, 5= MEDICATION NOT GIVEN FOR OTHER REASON & RECORD REASON IN HEALTH CARE RECORD.

NAME

SPIN No.

LOC

RECORDING SHEET FOR PRESCRIPTION SHEET

SPIN No.

LOC

PS2

DATE	A.M.	NOON	P.M.	NIGHT	COMMENT

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23752

NAME Georgina Smith

RECORDING SHEET FOR PRESCRIPTION SHEET

SPIN No. 1313444

LOC Wards

PS2

DRUGS RECORDING SHEET

DATE	A.M.	NOON	P.M.	NIGHT	COMMENT	DATE	A.M.	NOON	P.M.	NIGHT	COMMENT
15.2.23		#13	13		qap						
21.2.23		BCEOTHNTS			13-3						
13.3.23			6 MTH		qp						
27/2/23		E			CP						
28/2/23		BCD	PM		CP						
8/3/23		BCD									
14/3/23		BCDPO			CP						
15/4/23		D			CP						
21/4/23		BCD			CP-						

NUMBERS TO BE WRITTEN AFTER MEDICATION LETTER A,B,C, ETC WHEN MEDICATION NOT GIVEN AS PRESCRIBED.
(CODE) 1= PRISONER NOT IN ESTABLISHMENT, 2= PRISONER REFUSED TO ACCEPT MEDICATION, 3= PRISONER FAILED TO APPEAR
4=MEDICATION NOT AVAILABLE, 5= MEDICATION NOT GIVEN FOR OTHER REASON & RECORD REASON IN HEALTH CARE RECORD.

NAME

SPIN No.

LOC

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Georgina Smith
21 meadowside
Beith
KA15 1BU
JM716260A

NHS
Forth Valley

Health Centre
HMP Stirling
Cornton Rd
Stirling
FK9 5NU

29th November 2023

Confidential

Georgina Smith 04/12/1991

Speech and Language Therapy Summary

Ms Smith has been known to Speech and Language Therapy since her first involvement with the service at HMP Cornton Vale in 2015.

Since that time she has undergone episodes of assessment and intervention in relation to her communication needs. She experiences a range of language and communication issues which appear to be of mixed aetiology. In particular, she has experienced significant developmental trauma and also experienced a head injury as a [redacted] teenager. This head injury is recorded in her medical notes and the history of this suggests she would have been at risk of post concussion syndrome. I also note that Ms Smith has areas of low functioning identified in her cognitive assessment. It is not clear whether these arise from her developmental trauma, her head injury, another cause such as generalised developmental delay, or a combination of these.

Key observations.

Ms Smith displays difficulties with:

- Language comprehension, particularly of more complex information, and of information above sentence level (narrative language)
- Attention, including divided attention.
- Concentration.
- Interpretation of abstract, non-literal or indirect communication.

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She displays strengths in:

- Identifying suitable communication strategies.
- Empathy towards others.
- Developing social relationships.
- Non-verbal communication (context dependent).

Ms Smith has contributed towards the development of her communication support plan, which should be made available to all those supporting her. Ms Smith's communication difficulties can impact upon her ability to transfer theoretical learning to practical situations. As a result, it is advised that in the final stages of her sentence the focus should be on experiential learning and consolidation rather than any further abstract or theoretical learning.

Advice and support in this and any other aspects of communication support is available from Speech and Language Therapy.

Jan Green
Clinical Lead Speech and Language Therapy
NHS Forth Valley Prisons Healthcare

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Georgina Smith 04/12/1991
Confidential Communication Support Plan -

People

- Georgie is sociable, kind-hearted and analytical.
- Georgie can have difficulties with language processing, memory and emotional regulation.
- You can help regulate Georgie by demonstrating a calm, reassuring manner. Avoid loud voices or fast speech. Use open body language.
- Use clear facial expression, body language, demonstration, gesture and tone of voice to enhance and reinforce your own message.
- Be cautious in your use of humour when Georgie is stressed or otherwise upset. It may lead to misunderstandings/dysregulation.
- Take time to gradually build a relationship with Georgie. She can take time to adjust to new people and to understand their communication.
- Monitor your own emotional responses to Georgie's communication, particularly her communication when stressed or upset. Interpret communication via a trauma-informed lens.

Environment & Executive Function

- Although [redacted] appears adaptable and flexible, consider the possibility that changes in environment will increase internal stress and cognitive demands. Wherever possible plan for and explain significant changes.
- For important or emotionally driven conversations, minimise background noise and interruptions. Pay attention to things such as creaking doors, machine and fan noise, people looking in windows, radios and televisions.
- Familiarity is important to [redacted] She likes to keep her environment clean and tidy, and doing this can help to regulate her emotions.

Emotional Regulation

- If Georgie is stressed or upset, remain calm and reassuring. Do not increase the tension in interactions.
- Wait until you are confident that [redacted]s calm and regulated before discussing any challenging or emotional topics or events.

Load

- [redacted] has a good understanding of her language needs. Discuss with her what you can do to make sure she is supported correctly.
- [redacted] can become overloaded with information, emotions and sensory stimuli. Look out for signs that she is becoming dysregulated.

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- Avoid trying to reason with or argue with [redacted] when she is dysregulated. Support regulation and consider later what issues, if any, need to be discussed. Discussion of behaviour should always have a clear purpose. Verbal communication at times of crisis should be the minimum required to achieve essential aims.
- Be aware of [redacted] warning signs. She will be happy to discuss these with trusted staff in a suitable environment.

- Use simple, everyday language – avoid professional jargon. For example, "I am **meeting** [redacted] **and Paul. You** can **come** too". is better than ""We are going to have your professionals case conference, but you are invited too if you'd like to contribute"
- Use brief phrases and talk about ideas in time order "We will **meet** [redacted] **Then** we will **get ready** for **Games Night**" is better than "We need to have a bit of a tidy up in here before the games night, it's a tip. Jim wants to talk to you so we will pop over and see him first."
- Use visuals to reduce the amount of information that [redacted] needs to retain and process. Speech and Language Therapy can help with this.
- Consider carefully the use of activities that are primarily based around discussion. Basing communication around practical activities will promote regulation and help Georgie to understand and engage meaningfully. Low discussion activities include exercise, sport, crafts, cooking, computer games, lego, card games, board games, drawing, writing, music. Find out what suits [redacted]
- Try to stick to 3-4 Information Carrying Words per utterance for routine communication, reducing to 2 if content is novel or Georie is dysregulated.
- Take an anticipatory support to Georgie's communication, ensuring anyone new to her is familiar with her needs.

Jan Green, Clinical Lead Speech and Language Therapist, jan.green@nhs.scot

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Department of Endocrinology & Diabetes
Endocrine Specialist Nurse: Jillian Tough
Tel: 01324 567957

Forth Valley Royal Hospital
Stirling Road
Larbert
FK5 4WR

NHS Forth Valley

Ms Georgina Smith
C/O Medical Officer
Polmont Hm Prison & Yoi
Falkirk
Stirlingshire
FK2 0AB

Date Dictated: 03/08/2023
Date Typed: 03/08/2023
Our Ref: JT/KH
CHI: 0412913127

Dear Ms Smith

You have been referred to the endocrine service with an overactive thyroid gland. This letter is to explain the next steps before your appointment to be seen in the endocrine clinic.

Initial Treatment

We have asked your GP to prescribe a medication called Carbimazole, 10mg daily. This should help control your thyroid hormone levels and allow any symptoms to reduce.
A rare, important, reversible side effect of Carbimazole is a fall in the number of white cells in your blood which usually fight infection. The warning signs are severe sore throat, mouth ulcers or fever. If you have any of these symptoms you should stop taking Carbimazole immediately and ask GP to check your blood. If your blood test is ok, then it is safe to start taking Carbimazole [redacted]in.

If you are [redacted] or contemplating pregnancy please **do not** start Carbimazole but **contact** us by phoning one of the endocrine secretaries on: 01324 567957

Additional Tests

To monitor the effect of the Carbimazole I would ask your GP check a further blood test to check your thyroid function in 6 weeks time. I will arrange a follow-up appointment in clinic.

Some reading

Enclosed are information leaflets on hyperthyroidism and its treatments: Carbimazole, radioactive iodine and surgery, and an antithyroid drugs alert card. Please think about these options before your appointment with the

Chair: Janie McCusker
Chief Executive: Cathie Cowan

NHS Forth Valley
Headquarters: Carseview House, Castle Business Park, Stirling, FK9 4SW

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[redacted]

consultant.

Yours sincerely

Dictated and electronically checked by:

Jillian Tough
Endocrine Specialist Nurse

CC:
Dr UNK-Unknown GP
Patients Where Practice Code
Is Unknown And Who Are Not
Covered By Codes 99942
99957 99976 99981 99995 99961

Encs x4 and alert card

PS: medical officer - can carbimazole 10mg daily be prescribed and advise re agranulocytosis

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Department of Endocrinology & Diabetes
Endocrine Specialist Nurse: Jillian Tough
Tel: 01324 567957

Forth Valley Royal Hospital
Stirling Road
Larbert
FK5 4WR

NHS Forth Valley

Ms Georgina Smith
C/O Medical Officer
Polmont Hm Prison & Yoi
Falkirk
Stirlingshire
FK2 0AB

Date Dictated: 03/08/2023
Date Typed: 03/08/2023
Our Ref: JT/KH
CHI: 0412913127

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Chair: Janie McCusker
Chief Executive: Cathie Cowan

NHS Forth Valley
Headquarters: Carseview House, Castle Business Park, Stirling, FK9 4SW

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[redacted]

consultant.

Yours sincerely

Dictated and electronically checked by:

Jillian Tough
Endocrine Specialist Nurse

CC:
Dr UNK-Unknown GP
Patients Where Practice Code
Is Unknown And Who Are Not
Covered By Codes 99942
99957 99976 99981 99995 99961

Encs x4 and alert card

PS: medical officer - can carbimazole 10mg daily be prescribed and advise re agranulocytosis

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NHS Confidential. Personal data above patient

Georgina Smith
21 meadowside
Beith
KA15 1BU
JM716260A

NHS
Forth Valley

Health Centre
HMP Stirling
Cornton Rd
Stirling
FK9 5NU

29th November 2023

Confidential

Georgina Smith 04/12/1991

Speech and Language Therapy Summary

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Since that time she has undergone episodes of assessment and intervention in relation to her communication needs. She experiences a range of language and communication issues which appear to be of mixed aetiology. In particular, she has experienced significant developmental trauma and also experienced a head injury as a [redacted] teenager. This head injury is recorded in her medical notes and the history of this suggests she would have been at risk of post concussion syndrome. I also note that Ms Smith has areas of low functioning identified in her cognitive assessment. It is not clear whether these arise from her developmental trauma, her head injury, another cause such as generalised developmental delay, or a combination of these.

Key observations.

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- Language comprehension, particularly of more complex information, and of information above sentence level (narrative language)
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- Concentration.
- Interpretation of abstract, non-literal or indirect communication.

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She displays strengths in:

- Identifying suitable communication strategies.
- Empathy towards others.
- Developing social relationships.
- Non-verbal communication (context dependent).

Ms Smith has contributed towards the development of her communication support plan, which should be made available to all those supporting her. Ms Smith's communication difficulties can impact upon her ability to transfer theoretical learning to practical situations. As a result, it is advised that in the final stages of her sentence the focus should be on experiential learning and consolidation rather than any further abstract or theoretical learning.

Advice and support in this and any other aspects of communication support is available from Speech and Language Therapy.

Jan Green
Clinical Lead Speech and Language Therapy
NHS Forth Valley Prisons Healthcare

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Georgina Smith 04/12/1991
Confidential Communication Support Plan -

People

- Georgie is sociable, kind-hearted and analytical.
- Georgie can have difficulties with language processing, memory and emotional regulation.
- You can help regulate Georgie by demonstrating a calm, reassuring manner. Avoid loud voices or fast speech. Use open body language.
- Use clear facial expression, body language, demonstration, gesture and tone of voice to enhance and reinforce your own message.
- Be cautious in your use of humour when Georgie is stressed or otherwise upset, it may lead to misunderstandings/dysregulation.
- Take time to gradually build a relationship with Georgie. She can take time to adjust to new people and to understand their communication.
- Monitor your own emotional responses to Georgie's communication, particularly her communication when stressed or upset. Interpret communication via a trauma-informed lens.

Environment & Executive Function

- Although [redacted] appears adaptable and flexible, consider the possibility that changes in environment will increase internal stress and cognitive demands. Wherever possible plan for and explain significant changes.
- For important or emotionally driven conversations, minimise background noise and interruptions. Pay attention to things such as creaking doors, machine and fan noise, people looking in windows, radios and televisions.
- Familiarity is important to [redacted] She likes to keep her environment clean and tidy, and doing this can help to regulate her emotions.

Emotional Regulation

- If Georgie is stressed or upset, remain calm and reassuring. Do not increase the tension in interactions.
- Wait until you are confident that [redacted]s calm and regulated before discussing any challenging or emotional topics or events.

Load

- [redacted] has a good understanding of her language needs. Discuss with her what you can do to make sure she is supported correctly.
- [redacted] can become overloaded with information, emotions and sensory stimuli. Look out for signs that she is becoming dysregulated.

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- Avoid trying to reason with or argue with [redacted] when she is dysregulated. Support regulation and consider later what issues, if any, need to be discussed. Discussion of behaviour should always have a clear purpose. Verbal communication at times of crisis should be the minimum required to achieve essential aims.
- Be aware of [redacted] warning signs. She will be happy to discuss these with trusted staff in a suitable environment.

- Use simple, everyday language – avoid professional jargon. For example, "I am **meeting** [redacted] **and Paul. You** can **come** too." is better than ""We are going to have your professionals case conference, but you are invited too if you'd like to contribute"
- Use brief phrases and talk about ideas in time order "We will **meet** [redacted] **Then** we will **get ready** for **Games Night**" is better than "We need to have a bit of a tidy up in here before the games night, it's a tip. Jim wants to talk to you so we will pop over and see him first."
- Use visuals to reduce the amount of information that [redacted] needs to retain and process. Speech and Language Therapy can help with this.
- Consider carefully the use of activities that are primarily based around discussion. Basing communication around practical activities will promote regulation and help Georgie to understand and engage meaningfully. Low discussion activities include exercise, sport, crafts, cooking, computer games, lego, card games, board games, drawing, writing, music. Find out what suits [redacted]
- Try to stick to 3-4 Information Carrying Words per utterance for routine communication, reducing to 2 if content is novel or Georie is dysregulated.
- Take an anticipatory support to Georgie's communication, ensuring anyone new to her is familiar with her needs.

Jan Green, Clinical Lead Speech and Language Therapist, jan.green@nhs.scot

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NHS Forth Valley

supplementary kardex

Version 01

METHADONE	Y	N
SUBOXONE	Y	N

ORDER CODE 04

SIDE A

Prescription Sheet No: 2 of 2

Start Date: 24/3/23

Kardex Re-written Date: / /

REGULAR PRESCRIPTIONS — HMP

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Inits	Dis-continued Date/Inits	MEDICATION/FORM	Dose	Route	Times of Administration: AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Inits
A	24/3/23	24/11/23				PIZOTIFEN	1.5mg	O				✓	W	[illegible] HMP	
B	24/3/23	24/11/23				BUSCOPAN 50g TABS	1-2	O				✓	W	[illegible] HMP	
C	24/3/23	24/11/23				CAMOTIDINE	40mg	O	✓				W	[illegible] HMP	
D	24/3/23	24/11/23				FEXOFENADINE	120mg	O	✓				W	[illegible] HMP	
E	12.5.23			5/6/23		GENTAMICIN 0.3% / HYDROCORTISONE ACETATE 1% EAR DROPS	4-5	TOP	4 TO 5 TIMES DAILY				C	[illegible]	
F	12.5.23			12.9.23		SODIUM CROMOGLICATE 2% EYE DROPS	1 APP	TOP	✓	✓	✓	✓	m	[illegible]	
G															
H															
I															
J															
K															
L															
M															
N															
O															
P															

NAME: Georgina Smith SPIN: 131344 DOB: 4/12/91 LOCATION: B2/24 ALLERGIES: Lactose / Gluten intolerance

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

ING1930

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ORDER CODE 06

Side B

NHS
Forth Valley

Version 01

Prescription Sheet No: _____of_____

Start Date: _____/_____/_____

Kardex Re-written Date: _____/_____/_____

"AS REQUIRED" PRESCR HMP

	Start Date	Review Date	Stop Date	DRUGS (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Date	Initls
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													
13													
14													

Once Only Prescriptions

	Admin Data	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescribers Signature	Given By		Pharmacist Time Given		Date	Initls
1												
2												
3												

NAME: _____ SPIN: _____ DOB: _____ LOCATION: _____ ALLERGIES: _____

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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NHS Forth Valley

supplementary kardex

METHADONE	Y	(N)
SUBOXONE	Y	(N)

Version 01

ORDER CODE 04

Side A

Start Date: ___/___/___

Prescription Sheet No: 1 of 2

Kardex Re-written Date: 22/3/23

HMP Polmont

REGULAR PRESCRIPTIONS

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Inits	Dis-continued Date/Inits	MEDICATION FORM	Dose	Route	Times of Administration AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Inits
A	22/3/23	22/3/24			24/3/23 SM	AMITRIPTYLINE	75mg	O				✓	S	Ellane	
B	22/3/23	22/3/24			24/3/23 SM	QUETIAPINE	150mg	O				✓	S	Ellane	
C	22/3/23	22/3/24			24/3/23 SM	PIZOTIFEN	1.5mg	O				✓	S	Ellane	
D	22/3/23	22/3/24			24/3/23 SM	BISACODYL 5mg TABS	1-2 TABS	O				✓	S	Ellane	
E	22/3/23	22/3/24			24/3/23 SM	FAMOTIDINE	40mg	O	✓				S	Ellane	
F	22/3/23	22/3/24			24/3/23 SM	FEXOFENADINE	120mg	O	✓				S	Ellane	
G	22/3/23	22/3/23				BECLOMETASONE NASAL SPRAY	1 SPRAY	NASAL	✓			✓	M	Ellane	
H	22/3/23	22/3/24				SEEDED LOAF (400g) 1 UNIT	x1 PER MONTH	O	PIP: 308	93	64		M	Ellane	
I	22/3/23	22/3/24				SPIRALS 2 UNITS	x1 PER MONTH	O	PIP: 211	51	78		M	Ellane	
J	22/3/23	22/3/24				ALL PURPOSE FLOUR 2UNITS	x1 PER MONTH	O	PIP: ~~044~~ 399	~~5197~~ 23	~~77~~		M	[redacted]	
K	22/3/23	22/3/24				MULTI PURPOSE WHITE MIX 2UNITS.	x1 PER MONTH	O	PIP: 004	51	87		M	Ellane	
L	22/3/23	22/3/24				FIBRE MIX 2UNITS	x1 PER MONTH	O	PIP: 004	55	91		M	Ellane	
M	22/3/23	22/3/24				POTATO STARCH FLOUR 2UNITS	x1 PER MONTH	O	PIP: 325	79	46		M	Ellane	
N	22/3/23	22/3/24				CRISPY RICE 1.5UNITS	x1 PER MONTH	O	PIP: 388	29	82		M	Ellane	
O	24/3/23	24/11/23				AMITRIPTYLINE	75mg	O				✓	W	[illegible] NMP	
P	24/3/23	24/11/23				QUETIAPINE	150mg	O				✓	W	[illegible] NMP	

NAME: Georgina Smith SPIN: 131344 DOB: 4/12/91 LOCATION: ~~B7~~ B2/24 ALLERGIES: LACTOSE / GLUTEN INTOLERANCE

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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[redacted]

NHS Forth Valley

Version 01

ORDER CODE 06

Side B

Start Date: ../../..

Kardex Re-

Prescription Sheet [redacted] L of 1

written Date: 22/3/23

"AS REQUIRED" PRESCRIPTION HMP ~~GTCHS~~ Polmont.

	Start Date	Review Date	Stop Date	Drugs (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Date	Initls
1	22/3/23	22/3/24		KETOCONAZOLE SHAMPOO	1APP	TOP	PRN 2-3x WEEKLY	m	Eliane				
2	22/3/23	22/3/24		CETRABEN (CREAM SCC	1APP	TOP	PRN	m	Eliane				
3	~~22/3/23~~	~~22/3/24~~	~~22/3/23~~	~~PEPPERMINT OIL CAPS~~	~~1-2CAPS~~	~~O~~	~~UP TO TDS~~	~~S~~	~~Eliane~~				
4	~~22/3/23~~	~~22/3/24~~	~~22/3/23~~	~~ETODOLAC~~	~~600mg~~	~~O~~	~~OD PRN~~	~~S~~	~~Eliane~~				
5	~~22/3/23~~	~~22/3/24~~	~~22/3/23~~	~~DERMOL SCC~~	~~1APP~~	~~TOP~~	~~PRN~~	~~m~~	~~Eliane~~				
6	28.3.23	28.3.24		PEPPERMINT OIL CAPS	1-2CAPS	O	UP TO TDS	m	[redacted]				
7	28.3.23	28.3.24		ETODOLAC	600mg	O	OD PRN	m	[redacted]				
8	3.5.23	2.5.24		QV WASH - 500ML	1APP	TOP	OD PRN	m	[redacted]				
9													
10													
11													
12													
13													
14													

Once Only Prescriptions

	Admin Data	Admin Time	[redacted] (Including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1										
2										
3										

NAME: Georgina Smith SPIN: 131344 DOB: 4/12/91 LOCATION: B1 ALLERGIES: Lactose / Gluten Intolerance.

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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Kardex Tracker

[redacted]

Spin: _____

DoB: _____

- To be kept in the Kardex folder
- Fill in details when removing Kardex from folder
- Leave in the pocket that Kardex belongs
- Please complete when Kardex is returned to folder
- On liberation, sign off Kardex
- Hand Kardex Tracker back to Admin

Date removed	Taken by	Reason/Dept	Date Returned	Initials

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Kardex Tracker

Name: Georgina Smith
Spin: 132411
DoB: 01/10/61

- To be kept in the Kardex folder
- Fill in details when removing Kardex from folder
- Leave in the pocket that Kardex belongs
- Please complete when Kardex is returned to folder
- On liberation, sign off Kardex
- Hand Kardex Tracker back to Admin

Date removed	Taken by	Reason/Dept	Date Returned	Initials	Date removed	Taken by	Reason/Dept	Date Returned	Initials
02/04	MG	Acute							
2.5	"	A&E	8.5	"					
12.5	MOT	ANP	14.5	MOT					
22.5	MG	Acute	23.5	MG					
31.5	"	"							

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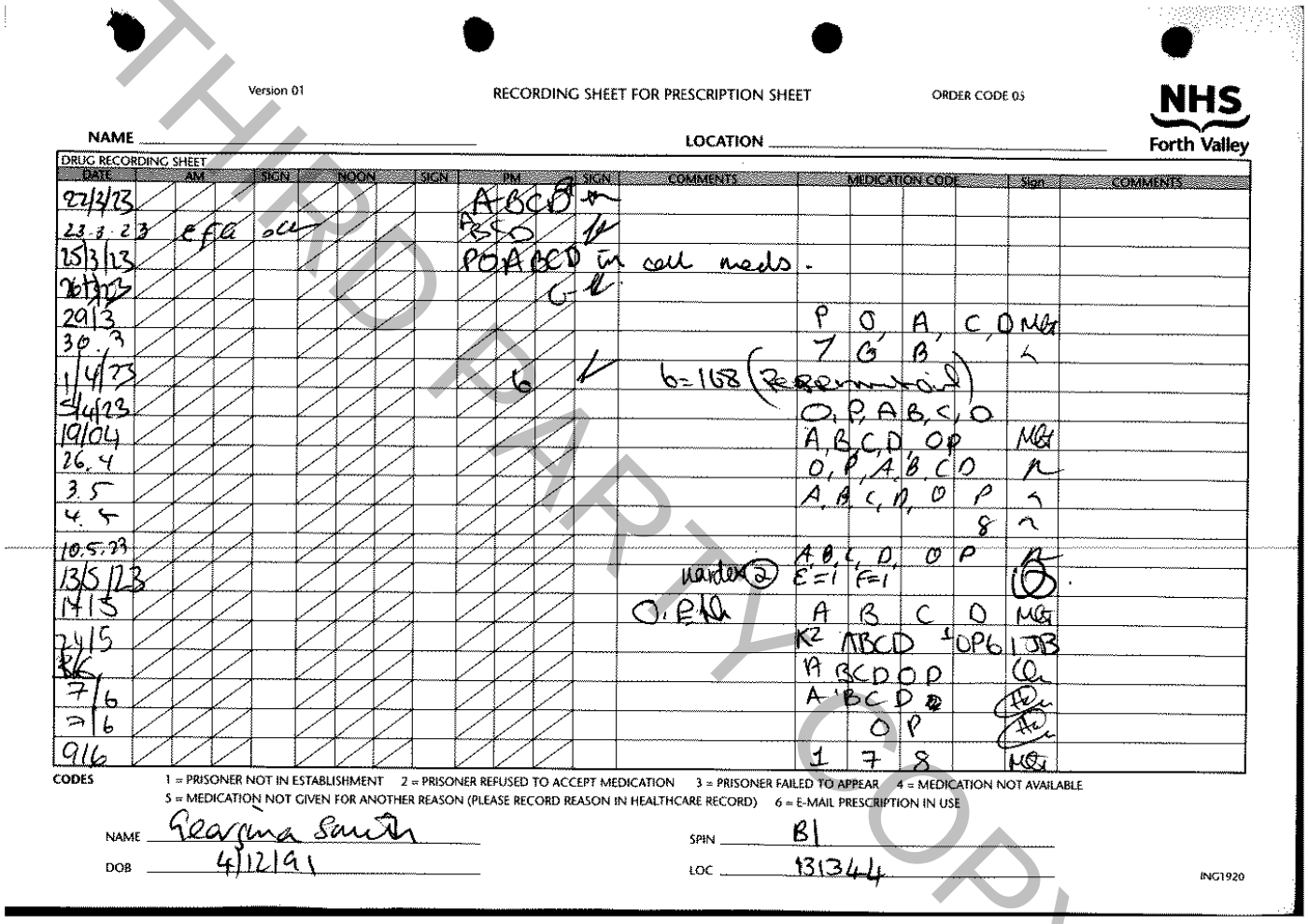

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RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

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NAME _____ LOCATION _____

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENTS
22/3/23					A B C D					
23.3.23	e f a				A B C D					
25/3/23					P O A B C D		in call meds.			
26/3/23										
29/3								P O A C D	MG	
30.3								T G B		
1/4/23					6		b=168 (Removed)			
4/4/23								O P A B C D		
19/04								A B C D O P	MG	
26.4								O P A B C D		
3.5								A B C D O P		
4.5									8	
10.5.23								A B C D O P		
13/5/23							marker ②	E=1 F=1		
14/5							O. P A			
24/5								A B C D	MG	
RK								K2 A B C D	OP6 JB	
7/6								A B C D O P		
9/6								A B C D O P		
9/6								1 7 8	MG	

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith SPIN B1

DOB 4/12/91 LOC 13134

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NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

ORDER CODE 05

NAME _____ LOCATION _____

DRUG RECORDING SHEET

DATE	TIME	SIGN	INITIAL	ROUTE	DOSE	SIGN	COMMENTS	MEDICATION CODE	INIT	COMMENTS
14.6.21							Kardex 1.0 P			
							1. 2	A		
								B		
								C		
								D		
								A		

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE

5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith SPIN 1313446

DOB 04/12/91 LOC

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA | UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: THE HEALTH CENTRE, P.O. BOX 21616
CONSULTANT: Dr [redacted] | DOB: 04/12/1991 | SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: Dr [redacted] HMP Stirling | SAMPLE TYPE OF LATEST SPECIMEN: Serum
CLINICAL DETAILS REFERRING TO LATEST REQUEST: tft monitoring - prev carbimazole | COPY DETAILS:

DATE OF COLLECTION	LABORATORY NUMBER	TIME OF COLLECTION	PLASMA GLUCOSE fasting 3-6 mmol/l
05/12/22	116965V	09.30	

DATE OF COLLECTION	LABORATORY NUMBER	Total CO2 22-29 [redacted]	OSMOLALITY 275-295 mosmol/kg H2O	SODIUM 135-146 mmol/l	POTASSIUM 3.5-5.3 mmol/l	CHLORIDE 95-108 mmol/l	UREA 2.5-7.8 mmol/l	CREATININE 49-130 umol/l	eGFR ml/min/1.73m2 <60 = CKD stage 3,4 or 5
05/12/22	116965V			139	4.8	109	3.7	58	>59
17/07/23	400456G			139	4.6	108	5.1	56	>59
24/07/23	412173P			138	5.0	108	4.7	57	>59
07/08/23	130592C			142	4.3	108	4.1	58	>59

DATE OF COLLECTION	LABORATORY NUMBER	AMYLASE up to 100 iu/l 37°C	AST 0-45 iu/l 37°C	ALT 0-55 iu/l 37°C	BILIRUBIN up to 21 µmol/l	TOTAL PROTEIN 60-80 g/l	ALBUMIN 35-50 g/l	ALKALINE PHOSPHATASE 30 - 120 iu/l 37°C	γGT 0-40 (female) iu/l 37°C
05/12/22	116965V		16	17	6	66	40	94	
17/07/23	400456G		17	20	8	67	42	66	
24/07/23	412173P		20	19	7	72	43	67	
07/08/23	130592C		21	21	8	72	46	77	
16/10/23	568106T		20	20	7	71	44	82	

DATE OF COLLECTION	LABORATORY NUMBER	IRON 10-30 µmol/l	TIBC 45-72 µmol/l	CALCIUM 2.2-2.60 mmol/l	CORRECTED CALCIUM 2.2-2.60 mmol/l	PHOSPHATE 0.8-1.50 mmol/l (12-60 years)	MAGNESIUM 0.7-1.0 mmol/l	URATE 140-360 (female) µmol/l	CK(Total) 25-200 (female) iu/l 37°C

DATE OF COLLECTION	LABORATORY NUMBER	T.S.H. 0.35-5.00 mu/l	FREE T4 9.0-21.0 pmol/l	FREE T3 3.0-6.0 pmol/l	PSA <4.0 ug/L	TRIGLYCERIDE fasting <2.0 mmol/l	CHOLESTEROL mmol/l target levels are risk dependent	H.D.L. >1.2 (female) mmol/l	L.D.L. mmol/l target levels are risk dependent
24/07/23	412173P	**<0.01**	**22.6**	**7.4**					
07/08/23	130592C	**<0.01**	20.7	5.1					
14/09/23	512427N	1.79	10.1	3.0					
16/10/23	568106T	3.29	11.6	3.4					
30/11/23	639649W	1.43	12.6	3.5					

17/07/23	400456G	C-Reactive Prot.	<5 mg/L	(0 - 5)

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA | UNIT NUMBER: 0412913127

PATIENT'S ADDRESS: THE HEALTH CENTRE, P.O. BOX 21616

CONSULTANT: Dr [redacted] | DOB: 04/12/1991 | SEX: Female

WARD AND HOSPITAL / GENERAL PRACTICE: Dr [redacted] HMP Stirling | SAMPLE TYPE OF LATEST SPECIMEN: Serum

CLINICAL DETAILS REFERRING TO LATEST REQUEST: tft monitoring - prev carbimazole | COPY DETAILS:

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DATE OF COLLECTION	LABORATORY NUMBER	Total CO2 22-29 [redacted]	OSMOLALITY 275-295 mosm/kg H2O	SODIUM 135-146 mmol/l	POTASSIUM 3.5-5.3 mmol/l	CHLORIDE 95-108 mmol/l	UREA 2.5-7.8 mmol/l	CREATININE 49-130 umol/l	eGFR ml/min/1.73m2 <60 = CKD stage 3,4 or 5
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17/07/23	400456G			139	4.6	108	5.1	56	>59
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DATE OF COLLECTION	LABORATORY NUMBER	AMYLASE up to 100 iu/l 37°C	AST 0-45 iu/l 37°C	ALT 0-55 iu/l 37°C	BILIRUBIN up to 21 µmol/l	TOTAL PROTEIN 60-80 g/l	ALBUMIN 35-50 g/l	ALKALINE PHOSPHATASE 30 - 120 iu/l 37°C	γGT 0-40 (female) iu/l 37°C
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07/08/23	130592C		21	21	8	72	46	77	
16/10/23	568106T		20	20	7	71	44	82	

DATE OF COLLECTION	LABORATORY NUMBER	IRON 10-30 µmol/l	TIBC 45-72 µmol/l	CALCIUM 2.2-2.60 mmol/l	CORRECTED CALCIUM 2.2-2.60 mmol/l	PHOSPHATE 0.8-1.50 mmol/l (12-60 years)	MAGNESIUM 0.7-1.0 mmol/l	URATE 140-360 (female) µmol/l	CK(Total) 25-200 (female) iu/l 37°C

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07/08/23	130592C	**<0.01**	20.7	5.1					
14/09/23	512427N	1.79	10.1	3.0					
16/10/23	568106T	3.29	11.6	3.4					
30/11/23	639649W	1.43	12.6	3.5					

17/07/23	400456G	C-Reactive Prot.	<5 mg/L	(0 - 5)

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IN POSSESSION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
Georgina Smith		1313444	Ivs	4/12/91

MEDICATION

Name [redacted] drug	Dose (Mg)	Issue Date	Quantity	Times [redacted] Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Amitriptyline.	25	27-12-23	7				✓	5	5	
Amitriptyline	50	27-12-23	7				✓	5	5	
Bisoprolol	1.25	27-12-23	7				✓	5	5	
Lamotrigine	40	27-12-23	7	✓				5	5	
Escitalopram	120	27-12-23	7	✓				5	5	
Time of check										

PRISONERS RESPONSE TO ANY DISCREPANCY:

Nurse Signature: _____ **Patient Signature:** _____

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce [redacted] medication
O Change your medication

GP Signature _____ **Date** _____

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IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
a Smith	20-12-23	1313U4	IV15	

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM NOON PM NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
~~Doxycycline~~ ~~Amoxicillin~~	100 mg	27-12-23	28	✓	26	26	
Quetiapine	25 mg	27-12-23	7	✓	5	5	
Quetiapine	150 mg	27-12-23	7	✓	5	5	
~~Omeprazole~~ already in possession	5mg	27-12-23	~~28~~ 54	✓	~~28~~ 54	54	

Time of check

PRISONERS RESPONSE TO ANY DISCREPANCY:

Nurse Signature: _____ **Patient Signature:** _____

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety ■ others the GP has reviewed your prescription for .....

And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

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IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
E Smith	20-12-23	1313U4	IV15	

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
~~Doxycycline~~ ~~Amoxicillin~~	100 mg	27-12-23	28	✓				26	26	
Quetiapine	25 mg	27-12-23	7			✓		5	5	
Quetiapine	150 mg	27-12-23	7			✓		5	5	
~~Co-amoxiclav~~ already	5mg	27-12-23	~~28~~ 54	✓				~~28~~ 54	54	

Time of check

PRISONERS RESPONSE TO ANY DISCREPANCY:

Nurse Signature: _____ **Patient Signature:** _____

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety [redacted] others the GP has reviewed your prescription for .....

And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

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IN POSSESSION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
Georgina smith		1313444	Ivs	4/12/91

MEDICATION

Name [redacted] drug	Dose (Mg)	Issue Date	Quantity	Times [redacted] Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Amitriptyline	25	27-12-23	7				✓	5	5	
Amitriptyline	50	27-12-23	7				✓	5	5	
Bizoltia	1.5	27-12-23	7				✓	5	5	
Lamotrodu	40	27-12-23	7	✓				5	5	
Exoteradine	120	27-12-23	7	✓				5	5	

Time of check

PRISONERS RESPONSE TO ANY DISCREPANCY:

Nurse Signature: _____ **Patient Signature:** _____

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce [redacted] medication
O Change your medication

GP Signature _____ **Date** _____

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA
UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: THE HEALTH CENTRE, P.O. BOX 21616
CONSULTANT: Dr Fiona Oswald
DOB: 04/12/1991
SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: Dr [redacted] HMP Stirling
SAMPLE TYPE OF LATEST SPECIMEN: Serum
CLINICAL DETAILS REFERRING TO LATEST REQUEST: thyroiditis bloods monitoring
COPY DETAILS:

DATE OF COLLECTION	LABORATORY NUMBER	TIME OF COLLECTION	PLASMA GLUCOSE fasting 3.5 - 6 mmol/l

DATE OF COLLECTION	LABORATORY NUMBER	Total CO_2 22-29 mmol/l	OSMOLALITY 275-295 mosm/kg H_2O	SODIUM 133-146 mmol/l	POTASSIUM 3.5-5.3 mmol/l	CHLORIDE 95-108 mmol/l	UREA 2.5-7.8 mmol/l	CREATININE 49-130 µmol/l	eGFR ml/min/1.73m2 >60 = CKD stage 3,4 or 5
17/07/23	400456G			139	4.6	108	5.1	56	>59
24/07/23	412173P			138	5.0	108	4.7	57	>59
07/08/23	130592C			142	4.3	108	4.1	58	>59

DATE OF COLLECTION	LABORATORY NUMBER	AMYLASE up to 100 IU/l 37°C	AST 0-45 IU/l 37°C	ALT 0-55 IU/l 37°C	BILIRUBIN up to 21 µmol/l	TOTAL PROTEIN 60-80 g/l	ALBUMIN 35-50 g/l	ALKALINE PHOSPHATASE 30 - 130 IU/l 37°C	γGT 0-40 (female) IU/l 37°C
17/07/23	400456G		17	20	8	67	42	68	
24/07/23	412173P		20	19	7	72	43	67	
07/08/23	130592C		21	21	8	72	46	77	
16/10/23	568106T		20	20	7	71	44	82	

DATE OF COLLECTION	LABORATORY NUMBER	IRON 10-30 µmol/l	TIBC 45-72 µmol/l	CALCIUM 2.2-2.60 mmol/l	CORRECTED CALCIUM 2.2-2.60 mmol/l	PHOSPHATE 0.8-1.50 mmol/l (12-60 years)	MAGNESIUM 0.7-1.0 mmol/l	URATE 240-350 (female), 25-200 (female) µmol/l	CK(Total) IU/l 37°C

DATE OF COLLECTION	LABORATORY NUMBER	T.S.H. 0.35-5.00 mu/l	FREE T4 9.0-21.0 pmol/l	FREE T3 3.0-6.0 pmol/l	PSA <4.0 µg/L	TRIGLYCERIDE fasting <2.0 mmol/l	CHOLESTEROL mmol/l target levels are risk dependent	H.D.L. >1.2 (female) mmol/l	L.D.L. mmol/l target levels are risk dependent
07/08/23	130592C	<0.01	20.7	5.1					
14/09/23	512427N	1.79	10.1	3.0					
16/10/23	568106T	3.29	11.6	3.4					
30/11/23	639649W	1.43	12.6	3.5					
29/12/23	666873S	2.12	13.5	3.9					

17/07/23	400456G	C-Reactive Prot.	<5	mg/L	(0 - 5)

Filing Range from: 29/12/2023 to: 17/07/2023 Page 1 of 1

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA
UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: THE HEALTH CENTRE, P.O. BOX 21616
CONSULTANT: Dr Fiona Oswald
DOB: 04/12/1991
SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: Dr [redacted] HMP Stirling
SAMPLE TYPE OF LATEST SPECIMEN: Serum
CLINICAL DETAILS REFERRING TO LATEST REQUEST: thyroiditis bloods monitoring
COPY DETAILS:

DATE OF COLLECTION	LABORATORY NUMBER	TIME OF COLLECTION	PLASMA GLUCOSE fasting 3-6 mmol/l

DATE OF COLLECTION	LABORATORY NUMBER	Total CO_2 22-29 mmol/l	OSMOLALITY 275-295 mosm/kg H_2O	SODIUM 133-146 mmol/l	POTASSIUM 3.5-5.3 mmol/l	CHLORIDE 95-108 mmol/l	UREA 2.5-7.8 mmol/l	CREATININE 40-130 µmol/l	eGFR ml/min/1.73m2 >60 = CKD stage 3,4 or 5
17/07/23	400456G			139	4.6	108	5.1	56	>59
24/07/23	412173P			138	5.0	108	4.7	57	>59
07/08/23	130592C			142	4.3	108	4.1	58	>59

DATE OF COLLECTION	LABORATORY NUMBER	AMYLASE up to 100 IU/l 37°C	AST 0-45 IU/l 37°C	ALT 0-55 IU/l 37°C	BILIRUBIN up to 21 µmol/l	TOTAL PROTEIN 60-80 g/l	ALBUMIN 35-50 g/l	ALKALINE PHOSPHATASE 30 - 130 IU/l 37°C	γGT 0-40 (female) IU/l 37°C
17/07/23	400456G		17	20	8	67	42	68	
24/07/23	412173P		20	19	7	72	43	67	
07/08/23	130592C		21	21	8	72	46	77	
16/10/23	568106T		20	20	7	71	44	82	

DATE OF COLLECTION	LABORATORY NUMBER	IRON 10-30 µmol/l	TIBC 45-72 µmol/l	CALCIUM 2.2-2.60 mmol/l	CORRECTED CALCIUM 2.2-2.60 mmol/l	PHOSPHATE 0.8-1.50 mmol/l (12-60 years)	MAGNESIUM 0.7-1.0 mmol/l	URATE 240-350 (female); 25-200 (female) µmol/l	CK(Total) IU/l 37°C

DATE OF COLLECTION	LABORATORY NUMBER	T.S.H. 0.35-5.00 mu/l	FREE T4 9.0-21.0 pmol/l	FREE T3 3.0-6.0 pmol/l	PSA <4.0 µg/L	TRIGLYCERIDE fasting <2.0 mmol/l	CHOLESTEROL mmol/l target levels are risk dependent	H.D.L. >1.2 (female) mmol/l	L.D.L. mmol/l target levels are risk dependent
07/08/23	130592C	<0.01	20.7	5.1					
14/09/23	512427N	1.79	10.1	3.0					
16/10/23	568106T	3.29	11.6	3.4					
30/11/23	639649W	1.43	12.6	3.5					
29/12/23	666873S	2.12	13.5	3.9					

17/07/23	400456G	C-Reactive Prot.	<5	mg/L	(0 - 5)

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IN POSSESSION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
[redacted]	20-12-23	133144	1V13	

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
~~Lansoprazole~~ Omeprazole	100 mg	27-12-23	28	✓				26	26	
Quetiapine	25 mg	27-12-23	7			✓		5	5	
Quetiapine	150 mg	27-12-23	7			✓		5	5	
~~Omeprazole~~ & laxido	5mg	27-12-23	~~850~~	✓				~~54~~	54	

Time of check	

PRISONERS RESPONSE TO ANY DISCREPANCY:

Nurse Signature: _____ **Patient Signature:** _____

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

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[redacted]

IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
Georgina smith		131344	Ivis	4/12/91

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Amitriptyline.	25	27-12-23	7			✓		5	5	
Amitriptyline.	50	27-12-23	7			✓		5	5	
Bisoprolol	1.5	27-12-23	7			✓		5	5	
Esomeprazole	40	27-12-23	7	✓				5	5	
Lexotanil	120	27-12-23	7	✓				5	5	

Time of check

PRISONERS RESPONSE TO ANY DISCREPANCY:

Nurse Signature: _____ **Patient Signature:** _____

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....

And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

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[redacted]

IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
GEORGINA SMITH		1313444	IVIS	4/12/91

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
AMITRIPTYLINE	25	27-12-23	7			✓		5	5	
AMITRIPTYLINE	50	27-12-23	7			✓		5	5	
BISOPROLOL	1.5	27-12-23	7			✓		5	5	
FOLIC ACID	40	27-12-23	7	✓				5	5	
FEXOFENADINE	120	27-12-23	7	✓				5	5	

Time of check

PRISONERS RESPONSE TO ANY DISCREPANCY:

Nurse Signature: _____ **Patient Signature:** _____

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....

And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

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IN POSSESSION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
[redacted]	20-12-23	133144	IV15	

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
[redacted] Doxycycline	100 mg	27-12-23	28	✓				26	26	
Quetiapine	25 mg	27-12-23	7			✓		5	5	
Quetiapine	150 mg	27-12-23	7			✓		5	5	
[redacted] & laundry	5mg	27-12-23	~~850~~	✓				~~854~~	54	

Time of check

PRISONERS RESPONSE TO ANY DISCREPANCY:

Nurse Signature: _____ **Patient Signature:** _____

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

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NHS
Forth Valley

supplementary kardex
Version 01

METHADONE	Y	N
SUBOXONE	Y	N

ORDER CODE 04

SIDE A

Prescription Sheet No: 2 of 2

Start Date: 24/3/23
Kardex Re-written Date: ___/___/___

	REGULAR PRESCRIPTIONS							HMP							
	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Initls	Dis-continued Date/Initls	MEDICATION/FORM	Dose	Route	Times of Administration AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Initls
A	24/3/23	24/3/23				BUPRENORPHINE	1.5mg	O				✓	W		
B	24/3/23	24/3/23				BUPRENORPHINE SUB	1.2mg	O				✓	W		
C	24/3/23	24/3/23				GABAPENTINOID	100mg	O	✓				W		
D	24/3/23	24/3/23				FENTANYL	12mcg	O	✓				W		
E	14.5.23		5.6.23			CLONAZEPAM 0.5mg/1ml ORAL SOLUTION ACTIVE No EMERGENCY	1.5mg	O	4:30			5 TIMES DAILY	C		
F	14.5.23		12.9.23			SODIUM CROMOGLICATE EYE DROPS 2%	1 DROP	EYE	✓	✓	✓	✓	M		
G															
H															
I															
J															
K															
L															
M															
N															
O															
P															

NAME: Georgina Smith **SPIN:** 13134y **DOB:** 4/12/91 **LOCATION:** B2/24 **ALLERGIES:** Nickel Latex

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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NHS
Forth Valley

Version 01

ORDER CODE 06 Side B

Prescription Sheet No: ____of____

Start Date: ____/____/____

Kardex Re-written Date: ____/____/____

HMP

	"AS REQUIRED" PRESCR			DRUGS (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued		Pharmacist	
	Start Date	Review Date	Stop Date							Date	Initls	Date	Initls
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													
13													
14													

	Once Only Prescriptions										
	Admin Data	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescribers Signature	Given By	Time Given	Pharmacist Date	Initls
1											
2											
3											

NAME: _____ SPIN: _____ DOB: _____ LOCATION: _____ ALLERGIES: _____

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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METHADONE	Y	(N)
SUBOXONE	Y	(N)

Version 01

ORDER CODE 04

Side A

Start Date: ___/___/___

Prescription Sheet No: 1 of 2

Kardex Re-written Date: 22/3/23

HMP Polmont

REGULAR PRESCRIPTIONS

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Inits	Dis-continued Date/Inits	MEDICATION FORM	Dose	Route	Times of Administration AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Inits
A	22/3/23	22/3/24			24/3/23 SM	AMITRIPTYLINE	75mg	O				✓	S	ellane	
B	22/3/23	22/3/24			24/3/23 SM	QUETIAPINE	150mg	O				✓	S	ellane	
C	22/3/23	22/3/24			24/3/23 SM	PIZOTIFEN	1.5mg	O				✓	S	ellane	
D	22/3/23	22/3/24			24/3/23 SM	BISACODYL 5mg TABS	1-2 TABS	O				✓	S	ellane	
E	22/3/23	22/3/24			24/3/23 SM	FAMOTIDINE	40mg	O	✓				S	ellane	
F	22/3/23	22/3/24			24/3/23 SM	FEXOFENADINE	120mg	O	✓				S	ellane	
G	22/3/23	22/3/23				BECLOMETASONE NASAL SPRAY	1 SPRAY	NASAL	✓			✓	M	ellane	
H	22/3/23	22/3/24				SEEDED LOAF (400g) 1 UNIT	x1 PER MONTH	O	PIP: 308	9364			M	ellane	
I	22/3/23	22/3/24				SPIRALS 2 UNITS	x1 PER MONTH	O	PIP: 211	5178			M	ellane	
J	22/3/23	22/3/24				ALL PURPOSE FLOUR 2UNITS	x1 PER MONTH	O	PIP: ~~004 5187~~	399	2377		M	[redacted]	
K	22/3/23	22/3/24				MULTI PURPOSE WHITE MIX 2UNITS.	x1 PER MONTH	O	PIP: 004	5187			M	ellane	
L	22/3/23	22/3/24				FIBRE MIX 2UNITS	x1 PER MONTH	O	PIP: 004	5591			M	ellane	
M	22/3/23	22/3/24				POTATO STARCH FLOUR 2UNITS	x1 PER MONTH	O	PIP: 325	7946			M	ellane	
N	22/3/23	22/3/24				CRISPY RICE 1.5UNITS	x1 PER MONTH	O	PIP: 388	2982			M	ellane	
O	24/3/23	24/11/23				AMITRIPTYLINE	75mg	O				✓	W	[illegible] NMP	
P	24/3/23	24/11/23				QUETIAPINE	150mg	O				✓	W	[illegible] NMP	

LACTOSE / GLUTEN INTOLERANCE

NAME: Georgina Smith SPIN: 131344 DOB: 4/12/91 LOCATION: ~~B7~~ B2/24 ALLERGIES: _____

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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ORDER CODE 06

Side B

Start Date: ../../..

Kardex Re-

Prescription Sheet [redacted] of 1

written Date: 22/3/23

"AS REQUIRED" PRESCRIPTION

HMP ~~Greno~~ Polmont.

	Start Date	Review Date	Stop Date	Drugs (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Date	Initls
1	22/3/23	22/3/24		KETOCONAZOLE SHAMPOO	1APP	TOP	PRN 2-3x WEEKLY	m	Eliane				
2	22/3/23	22/3/24		CETRABEN (CREAM SCC)	1APP	TOP	PRN	m	Eliane				
3	~~22/3/23~~	~~22/3/24~~	~~22/3/24~~	~~PEPPERMINT OIL CAPS~~	~~1-2CAPS~~	~~O~~	~~UP TO TDS~~	~~S~~	~~Eliane~~				
4	~~22/3/23~~	~~22/3/24~~	~~22/3/24~~	~~ETODOLAC~~	~~600mg~~	~~O~~	~~OD PRN~~	~~S~~	~~Eliane~~				
5	~~22/3/23~~	~~22/3/24~~	~~22/3/24~~	~~DERMOL SCC~~	~~1APP~~	~~TOP~~	~~PRN~~	~~m~~	~~Eliane~~				
6	28.3.23	28.3.24		PEPPERMINT OIL CAPS	1-2CAPS	O	UP TO TDS	m	[redacted]				
7	28.3.23	28.3.24		ETODOLAC	600mg	O	OD PRN	m	[redacted]				
8	3/5/23	2/5/24		QV WASH - 500ml	1APP	TOP	OD PRN	m	[redacted]				
9													
10													
11													
12													
13													
14													

Once Only Prescriptions

	Admin Data	Admin Time	[redacted] (Including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1										
2										
3										

NAME: Georgina Smith SPIN: 131344 DOB: 4/12/91 LOCATION: B1 ALLERGIES: Lactose / Gluten Intolerance.

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

NHS Confidential: Personal data about a patient

iGPR Report

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Kardex Tracker

[redacted]

Spin: _____

DoB: _____

- To be kept in the Kardex folder
- Fill in details when removing Kardex from folder
- Leave in the pocket that Kardex belongs
- Please complete when Kardex is returned to folder
- On liberation, sign off Kardex
- Hand Kardex Tracker back to Admin

Date removed	Taken by	Reason/Dept	Date Returned	Initials

NHS Confidential: Personal data about a patient

Kardex Tracker

Name: Georgina Smith
Spin: 132411
DoB: 01/10/61

- To be kept in the Kardex folder
- Fill in details when removing Kardex from folder
- Leave in the pocket that Kardex belongs
- Please complete when Kardex is returned to folder
- On liberation, sign off Kardex
- Hand Kardex Tracker back to Admin

Date removed	Taken by	Reason/Dept	Date Returned	Initials	Date removed	Taken by	Reason/Dept	Date Returned	Initials
03/04	MG	Acute							
2.5	"	A&E	8.5	"					
12.5	MOT	ANP	14.5	MOT					
22.5	MG	Acute	23.5	MG					
31.5	"	"							

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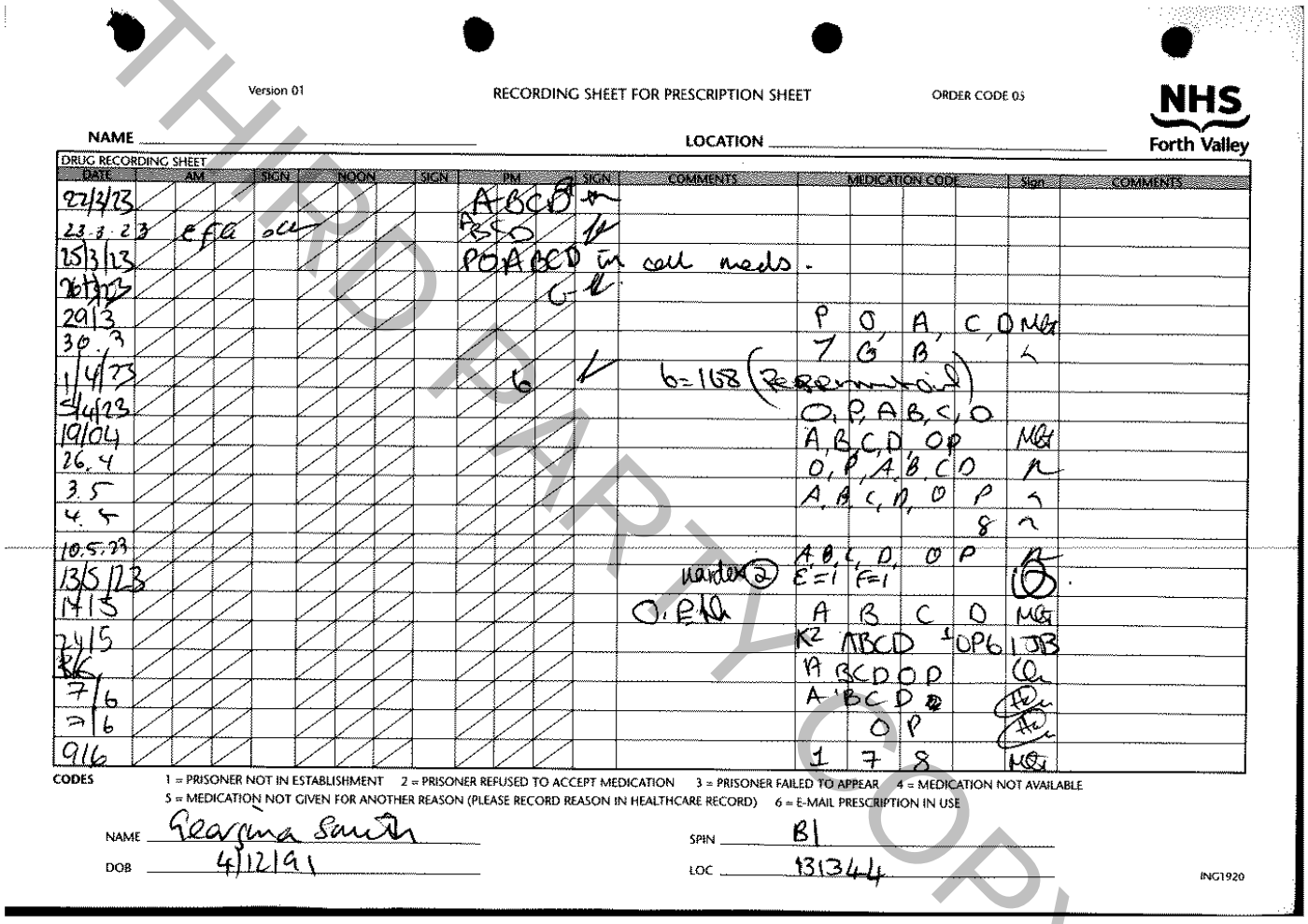

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME _____ LOCATION _____

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	Sign	COMMENTS
22/3/23					A B C D					
23.3.23	e f a				A B C D					
25/3/23					P O A B C D in		call meds.			
26/3/23										
29/3								P O A C D MG		
30.3								T G B		
1/4/23					6		6=168 (Removed)			
4/4/23								O P A B C D		
19/04								A B C D O P	MG	
26.4								O P A B C D		
3.5								A B C D O P		
4.5								8		
10.5.23								A B C D O P		
13/5/23							marker ②	E=1 F=1		
14/5							O. P A	A B C O	MG	
24/5								K2 A B C D	OP6	JB
8/6								A B C D O P		
7/6								A B C D		
9/6								O P		
								1 7 8	MG	

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith SPIN B1

DOB 4/12/91 LOC 13134

ING1920

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iGPR Report

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NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

NAME _____ LOCATION _____ ORDER CODE 05

DRUG RECORDING SHEET

DATE	TIME	SIGN	NOTIFICATION	INITIAL	SIGN	COMMENTS	MEDICATION CODE	INITIAL	COMMENTS
14.6.21						Kardex 1.0	A	K	
						1. 2	A	B	C	D	A		

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE

5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith SPIN 1313446

DOB 04/12/91 LOC

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IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
G Smith	22-01-2024	131344	Iris	4/12/91

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Pizotifen	1.5mg	17-1-24	7				✓	2	2	0
Fexofenadine	120mg	17-1-24	7	✓				2	2	0
Famotidine	40mg	17-1-24	7	✓				2	2	0
Quetiapine	150mg	17-1-24	7				✓	2	2	0
Quetiapine	25mg	17-1-24	7				✓	2	2	0

Time of check	13:30

PRISONERS RESPONSE TO ANY DISCREPANCY:

Nurse Signature: _____ **Patient Signature:** _____

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

NHS Confidential: [redacted] data about a patient

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IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
C Smith	22-01-24	1313444	[redacted]	11/2/91

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Amitriptyline	25mg	17-1-24	7			V		2	2	0
Fluoxetine	20mg	17-1-24	7			V		2	2	0
Doxycycline	100mg	27-12-23	28	V				2	2	0
Bisoprolol	5mg	27-12-23	56			V	V	4	4	0

Time of check	13:30

PRISONERS RESPONSE TO ANY DISCREPANCY:

Nurse Signature: [redacted] **Patient Signature:** _____

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....

And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
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O Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

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Department of Endocrinology & Diabetes
Endocrine Specialist Nurse: Jillian Tough
Tel: 01324 566347

Forth Valley Royal Hospital
Stirling Road
Larbert
FK5 4WR

NHS Forth Valley

Dr UNK-Unknown GP
Patients Where Practice Code
Is Unknown And Who Are Not
Covered By Codes 99942
99957 99976 99981 99995 99961

Date Dictated: 16/01/2024
Date Typed: 16/01/2024
Our Ref: JT/LT
CHI: 0412913127

Dear Dr UNK-Unknown GP

Georgina Smith DOB: 04-12-1991
The Health Centre P.O. Box 21616 Stirling FK7 1DW

Diagnosis:

Probable thyroiditis

Current medication:

NIL

Plan:

Check thyroid bloods at end of January. If thyroid bloods are normal then to check 3-monthly for the next 12 months, unless Georgina has any symptoms of hyper or hypothyroidism, and then she will seek review at an earlier date.

I was pleased to speak to Georgina today. She is feeling fine from a thyroid perspective. She is still experiencing some sweats and she has said that her eye is a little bit itchy, inflamed and red. I have asked her to seek review in the medical centre with regards to that. Her thyroid bloods are [redacted] normal still, which is fantastic and it looks more like a thyroiditis-type picture. She is due to go home next Tuesday and this is in Ayrshire, so I will discharge her from the endocrine clinic here but I would recommend the plan above, as per Dr [redacted] to check thyroid bloods at end of January and then on a 3-monthly basis for a year post, just to monitor for any recurrence of the thyrotoxicosis.

She is aware to contact her local health centre if there is any symptoms of her thyroid, at any time, to allow for review. If the thyroid becomes thyrotoxic again then we would recommend re-referring her to a local endocrine service. If there are any delays with Georgina getting home then please do not hesitate to re-refer her back to the Forth Valley service.

Chair: Janie McCusker
Interim Chief Executive: [redacted] Cowan

NHS Forth Valley
Headquarters: Carseview House, Castle Business Park, Stirling, FK9 4SW

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Yours sincerely

Dictated and electronically checked by:

Jillian Tough
Endocrine Specialist Nurse

CC:

Ms Georgina Smith
The Health Centre
P.O. Box 21616
Stirling
FK7 1DW

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Department of Endocrinology & Diabetes
Endocrine Specialist Nurse: Jillian Tough
Tel: 01324 566347

Forth Valley Royal Hospital
Stirling Road
Larbert
FK5 4WR

NHS Forth Valley

Dr UNK-Unknown GP
Patients Where Practice Code
Is Unknown And Who Are Not
Covered By Codes 99942
99957 99976 99981 99995 99961

Date Dictated: 16/01/2024
Date Typed: 16/01/2024
Our Ref: JT/LT
CHI: 0412913127

Dear Dr UNK-Unknown GP

Georgina Smith DOB: 04-12-1991
The Health Centre P.O. Box 21616 Stirling FK7 1DW

Diagnosis:

Probable thyroiditis

Current medication:

NIL

Plan:

Check thyroid bloods at end of January. If thyroid bloods are normal then to check 3-monthly for the next 12 months, unless Georgina has any symptoms of hyper or hypothyroidism, and then she will seek review at an earlier date.

I was pleased to speak to Georgina today. She is feeling fine from a thyroid perspective. She is still experiencing some sweats and she has said that her eye is a little bit itchy, inflamed and red. I have asked her to seek review in the medical centre with regards to that. Her thyroid bloods are [redacted] normal still, which is fantastic and it looks more like a thyroiditis-type picture. She is due to go home next Tuesday and this is in Ayrshire, so I will discharge her from the endocrine clinic here but I would recommend the plan above, as per Dr [redacted] to check thyroid bloods at end of January and then on a 3-monthly basis for a year post, just to monitor for any recurrence of the thyrotoxicosis.

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Chair: Janie McCusker
Interim Chief Executive: [redacted] Cowan

NHS Forth Valley
Headquarters: Carseview House, Castle Business Park, Stirling, FK9 4SW

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NHS Confidential: Personal data about a patient

Yours sincerely

Dictated and electronically checked by:

Jillian Tough
Endocrine Specialist Nurse

CC:

Ms Georgina Smith
The Health Centre
P.O. Box 21616
Stirling
FK7 1DW

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iGPR Report

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IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
G Smith	22-01-2024	131344	Iris	4/12/91

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Pizotifen	1.5mg	17-1-24	7				✓	2	2	0
Fexofenadine	120mg	17-1-24	7	✓				2	2	0
Famotidine	40mg	17-1-24	7	✓				2	2	0
Quetiapine	150mg	17-1-24	7				✓	2	2	0
Quetiapine	25mg	17-1-24	7				✓	2	2	0

Time of check	13:30

PRISONERS RESPONSE TO ANY DISCREPANCY:

Nurse Signature: _____ **Patient Signature:** _____

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

NHS Confidential: [redacted] data about a patient

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IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
C. Smith	22-01-24	131344	[redacted]	4/12/91

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM NOON PM NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Amitryptyline	25mg	07-1-24	7	✓	2	2	0
Amitryptyline	50mg	17-1-24	7	✓	2	2	0
Doxycycline	100mg	27-12-23	28	✓	2	2	0
Bisacodyl	5mg	27-12-23	56	✓x2	4	4	0

Time of check	13:30

PRISONERS RESPONSE TO ANY DISCREPANCY:

Nurse Signature: [redacted] **Patient Signature:**

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA
UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: THE HEALTH CENTRE, P.O. BOX 21616
CONSULTANT: Dr Craig Sayers
DOB: 04/12/1991
SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: Dr [redacted] Sayers, HMP Stirling
SAMPLE TYPE OF LATEST SPECIMEN: Serum
CLINICAL DETAILS REFERRING TO LATEST REQUEST: thyroid function levels
COPY DETAILS:

DATE OF COLLECTION	LABORATORY NUMBER	TIME OF COLLECTION	PLASMA GLUCOSE fasting 3-6 mmol/l

DATE OF COLLECTION	LABORATORY NUMBER	Total CO_2 22-29 mmol/l	OSMOLALITY 275-295 mosm/kg H_2O	SODIUM 133-146 mmol/l	POTASSIUM 3.5-5.3 mmol/l	CHLORIDE 95-108 mmol/l	UREA 2.5-7.8 mmol/l	CREATININE 40-130 µmol/l	eGFR ml/min/1.73m2 <60 = CKD stage 3,4 or 5
24/07/23	412173P			138	5.0	108	4.7	57	>59
07/08/23	130592C			142	4.3	108	4.1	58	>59

DATE OF COLLECTION	LABORATORY NUMBER	AMYLASE up to 100 iu/l 37°C	AST 0-45 iu/l 37°C	ALT 0-55 iu/l 37°C	BILIRUBIN up to 21 µmol/l	TOTAL PROTEIN 60-80 g/l	ALBUMIN 35-50 g/l	ALKALINE PHOSPHATASE 30 - 130) iu/l 37°C	γGT 0-40 (female) iu/l 37°C
24/07/23	412173P		20	19	7	72	43	67	
07/08/23	130592C		21	21	8	72	46	77	
16/10/23	568106T		20	20	7	71	44	82	

DATE OF COLLECTION	LABORATORY NUMBER	IRON 10-30 µmol/l	TIBC 45-72 µmol/l	CALCIUM 2.2-2.60 mmol/l	CORRECTED CALCIUM 2.2-2.60 mmol/l	PHOSPHATE 0.8-1.50 mmol/l (12-60 years)	MAGNESIUM 0.7-1.0 mmol/l	URATE 140-360 (female) µmol/l	CK(Total) 25-200 (female) iu/l 37°C

DATE OF COLLECTION	LABORATORY NUMBER	T.S.H 0.35-5.00 mu/l	FREE T4 9.0-21.0 pmol/l	FREE T3 3.6-6.0 pmol/l	PSA <4.0 µg/L	TRIGLYCERIDE fasting <2.0 mmol/l	CHOLESTEROL mmol/l target levels are risk dependent	H.D.L. >1.2 (female) mmol/l	L.D.L. mmol/l target levels are risk dependent
14/09/23	512427N	1.79	10.1	3.0					
16/10/23	568106T	3.29	11.6	3.4					
30/11/23	639649W	1.43	12.6	3.5					
29/12/23	666873S	2.12	13.5	3.9					
25/01/24	764132C	1.03							

Filing Range from: 25/01/2024 to: 24/07/2023 Page 1 of 1

Date of Report 25/01/2024 18:34

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IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
G. Smith	06-02-24	1313 44	Iris	

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Amitryptyline	15mg	31-1-24	7				✓	1	1	0
Pizotifen	1.5mg	31-1-24	7				✓	1	1	0
Famotidine	40mg	31-1-24	7	✓			✓	1	1	0
Quetiapine	125mg	31-1-24	7				✓	1	1	0
Domperidone	20mg	24-1-24	28	✓			✓	15	15	0
Pizotifen	1.5mg	24-1-24	56				✓ x2	30	30	0

Time of check

PRISONERS RESPONSE TO ANY DISCREPANCY:

Nurse Signature: _____ **Patient Signature:** G. Smith

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion; however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA
UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: THE HEALTH CENTRE, P.O. BOX 21616
CONSULTANT: Dr Craig Sayers
DOB: 04/12/1991
SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: Dr [redacted] Sayers, HMP Stirling
SAMPLE TYPE OF LATEST SPECIMEN: Serum
CLINICAL DETAILS REFERRING TO LATEST REQUEST: thyroid function levels
COPY DETAILS:

DATE OF COLLECTION	LABORATORY NUMBER	TIME OF COLLECTION	PLASMA GLUCOSE fasting 3-6 mmol/l

DATE OF COLLECTION	LABORATORY NUMBER	Total CO_2 22-29 mmol/l	OSMOLALITY 275-295 mosm/kg H_2O	SODIUM 133-146 mmol/l	POTASSIUM 3.5-5.3 mmol/l	CHLORIDE 95-108 mmol/l	UREA 2.5-7.8 mmol/l	CREATININE 40-130 µmol/l	eGFR ml/min/1.73m2 <60 = CKD stage 3,4 or 5
24/07/23	412173P			138	5.0	108	4.7	57	>59
07/08/23	130592C			142	4.3	108	4.1	58	>59

DATE OF COLLECTION	LABORATORY NUMBER	AMYLASE up to 100 iu/l 37°C	AST 0-45 iu/l 37°C	ALT 0-55 iu/l 37°C	BILIRUBIN up to 21 µmol/l	TOTAL PROTEIN 60-80 g/l	ALBUMIN 35-50 g/l	ALKALINE PHOSPHATASE 30 - 130) iu/l 37°C	γGT 0-40 (female) iu/l 37°C
24/07/23	412173P		20	19	7	72	43	67	
07/08/23	130592C		21	21	8	72	46	77	
16/10/23	568106T		20	20	7	71	44	82	

DATE OF COLLECTION	LABORATORY NUMBER	IRON 10-30 µmol/l	TIBC 45-72 µmol/l	CALCIUM 2.2-2.60 mmol/l	CORRECTED CALCIUM 2.2-2.60 mmol/l	PHOSPHATE 0.8-1.50 mmol/l (12-60 years)	MAGNESIUM 0.7-1.0 mmol/l	URATE 140-360 (female) µmol/l	CK(Total) 25-200 (female) iu/l 37°C

DATE OF COLLECTION	LABORATORY NUMBER	T.S.H 0.35-5.00 mu/l	FREE T4 9.0-21.0 pmol/l	FREE T3 3.6-6.0 pmol/l	PSA <4.0 µg/L	TRIGLYCERIDE fasting <2.0 mmol/l	CHOLESTEROL mmol/l target levels are risk dependent	H.D.L. >1.2 (female) mmol/l	L.D.L. mmol/l target levels are risk dependent
14/09/23	512427N	1.79	10.1	3.0					
16/10/23	568106T	3.29	11.6	3.4					
30/11/23	639649W	1.43	12.6	3.5					
29/12/23	666873S	2.12	13.5	3.9					
25/01/24	764132C	1.03							

Filing Range from: 25/01/2024 to: 24/07/2023 Page 1 of 1
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IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
G. Smith	06-02-24	1313 44	Iris	

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Amitryptyline	15mg	31-1-24	7				✓	1	1	0
Pizotifen	1.5mg	31-1-24	7				✓	1	1	0
Famotidine	40mg	31-1-24	7	✓			✓	1	1	0
Quetiapine	200mg	31-1-24	7				✓	1	1	0
Domperidone	10mg	31-1-24	7	✓			✓	1	1	0
Pizotifen	1.5mg	24-1-24	28	✓			✓	15	15	0
	5mg	24-1-24	56				✓ x2	30	30	0

Time of check

PRISONERS RESPONSE TO ANY DISCREPANCY:

Nurse Signature: _____ **Patient Signature:** G. Smith

Your in – possession medication check on ..... was not correct

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion; however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

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SCOTTISH PRISON SERVICE

HMP STIRLING
MEDICAL MARKER

NHS Forth Valley

THIS FORM SHOULD ONLY BE COMPLETED IF THERE IS A CLEAR CLINICAL JUSTIFICATION FOR REQUISITION.

NAME:	Georgina Smith	D.O.B:	04/12/1991
SPIN:	131344	LOCATION:	[redacted]

DATE ISSUED:	08/02/2024	REVIEW DATE:	08/02/2025
PRINT NAME:	Rebekah Weir	SIGN NAME:	

X2 duvet – Chronic back/neck pain.

PLEASE FILL OUT ALL FIELDS IN THIS FORM AND ENSURE TO DO THE FOLLOWING (TICK BEFORE COPYING TO PROVE THIS HAS BEEN DONE):

- GIVE COPY TO ADMIN TO SCAN TO PATIENTS VISION ☑
- SEND A COPY TO THE PRISONER ☑
- SEND A COPY TO THE PRISONER'S [redacted] ☑
- SEND A COPY TO THE RELEVANT DEPARTMENT ☑
- DOCUMENT ENTRY ON PATIENT'S VISION RECORD ☑

- THE PRISONER HAS BEEN GIVEN A COPY OF THIS FORM STATING THEIR REVIEW DATE. IT IS THE SOLE RESPONSIBILTY OF THE PRISONER TO PUT A SELF REFERRAL FORM IN 3 5 DAYS PRIOR TO THEIR REVIEW DATE TO ENSURE THEY RECEIVE A NEW MEDICAL MARKER IF IT IS REQUIRED.
- IF THE [redacted] DOES NOT RECEIVE A NEW MEDICAL MARKER AFTER THE ABOVE REVIEW DATE STATING A NEW REVIEW DATE THEN THE PRISONERS MEDICAL MARKER HAS BEEN REVOKED AS IT IS NO LONGER REQUIRED.

NHS FORTH VALLEY HMP CORNTONVALE

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SCOTTISH PRISON SERVICE

HMP STIRLING
MEDICAL MARKER

NHS Forth Valley

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NAME:	Georgina Smith	D.O.B:	04/12/1991
SPIN:	131344	LOCATION:	[redacted]

DATE ISSUED:	08/02/2024	REVIEW DATE:	08/02/2025
PRINT NAME:	Rebekah Weir	SIGN NAME:	

X2 duvet – Chronic back/neck pain.

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Department of Endocrinology & Diabetes
Consultant: [redacted] J G [redacted]
Tel: 01324 566346

Forth Valley Royal Hospital
Stirling Road
Larbert
FK5 4WR

NHS Forth Valley

Medical Officer
Corton Vale HMP
Cornton Road
Stirling
FK9 5NU

Date Dictated: 03/11/2023
Date Typed: 20/11/2023
Our Ref: CJGK/PM
CHI: 0412913127

Dear Medical Officer

Georgina Smith DOB: 04-12-1991
The Health Centre P.O. Box 21616 Stirling FK7 1DW

Diagnosis:
Probable thyroiditis

Plan:
Stop Carbimazole to monthly TFTs for three months then quarterly for 12 months

It was lovely to meet Georgina today in my endocrine clinic. She gives a history of intermittent weight loss and had a set of thyroid function done in August which were in keeping with thyrotoxicosis. Interestingly, they were repeated a week later and there had already been a reasonable drop in her Free T4 and then just as she started Carbimazole, repeated again and at that point they were within the reference range. She has no receptor antibodies.

She has no family history, no significant past medical history.

On examination, she is euthyroid.

Given her presentation, her negative antibodies and the fact her Free T4 was dropping, I think Georgina almost certainly has thyroiditis. It is very unusual in somebody who is [redacted] and female to have an antibody negative true thyrotoxic picture and I have suggested that she discontinue her Carbimazle, we keep an eye on her bloods as above and clearly if she develops thyrotoxicosis again we can start her on a tiny dose of Carbimazole but I wonder if she might actually become underactive for a period prior to things restoring themselves.

Best wishes. Kindest regards.

Yours sincerely

Dictated and electronically checked by:

Chair: Janie McCusker
Interim Chief Executive: [redacted] Cowan

NHS Forth Valley
Headquarters: Carseview House, Castle Business Park, Stirling, FK9 4SW

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[redacted] J G [redacted]
Consultant Physician
GMC Registration Number: 3488920

CC:
Ms Georgina Smith
The Health Centre
P.O. Box 21616
Stirling
FK7 1DW

CHI: 0412913127 GEORGINA SMITH

Page 2 of 2

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Department of Endocrinology & Diabetes
Consultant: [redacted] J G [redacted]
Tel: 01324 566346

Forth Valley Royal Hospital
Stirling Road
Larbert
FK5 4WR

NHS Forth Valley

Medical Officer
Corton Vale HMP
Cornton Road
Stirling
FK9 5NU

Date Dictated: 03/11/2023
Date Typed: 20/11/2023
Our Ref: CJGK/PM
CHI: 0412913127

Dear Medical Officer

Georgina Smith DOB: 04-12-1991
The Health Centre P.O. Box 21616 Stirling FK7 1DW

Diagnosis:
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Plan:
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NHS Forth Valley
Headquarters: Carseview House, Castle Business Park, Stirling, FK9 4SW

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[redacted] J G [redacted]
Consultant Physician
GMC Registration Number: 3488920

CC:
Ms Georgina Smith
The Health Centre
P.O. Box 21616
Stirling
FK7 1DW

CHI: 0412913127 GEORGINA SMITH

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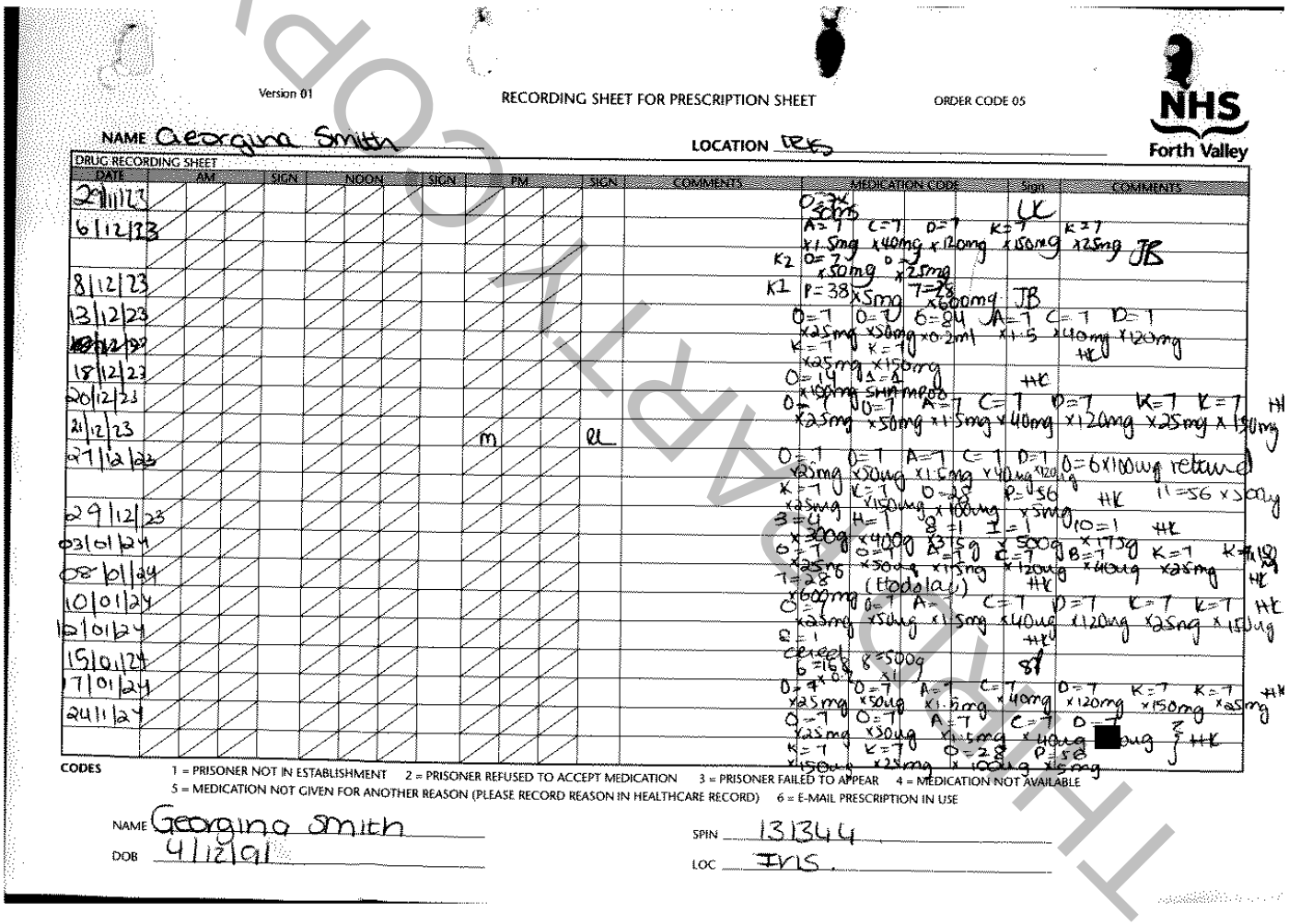

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME Georgina Smith

LOCATION [redacted]

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	SIGN	COMMENTS
29/11/23										
6/12/23										
8/12/23										
13/12/23										
18/12/23										
20/12/23										
21/12/23					m					
27/12/23										
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03/01/24										
08/01/24										
10/01/24										
12/01/24										
15/01/24										
17/01/24										
24/1/24										

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith

DOB 4/12/91

SPIN 131344

LOC INS.

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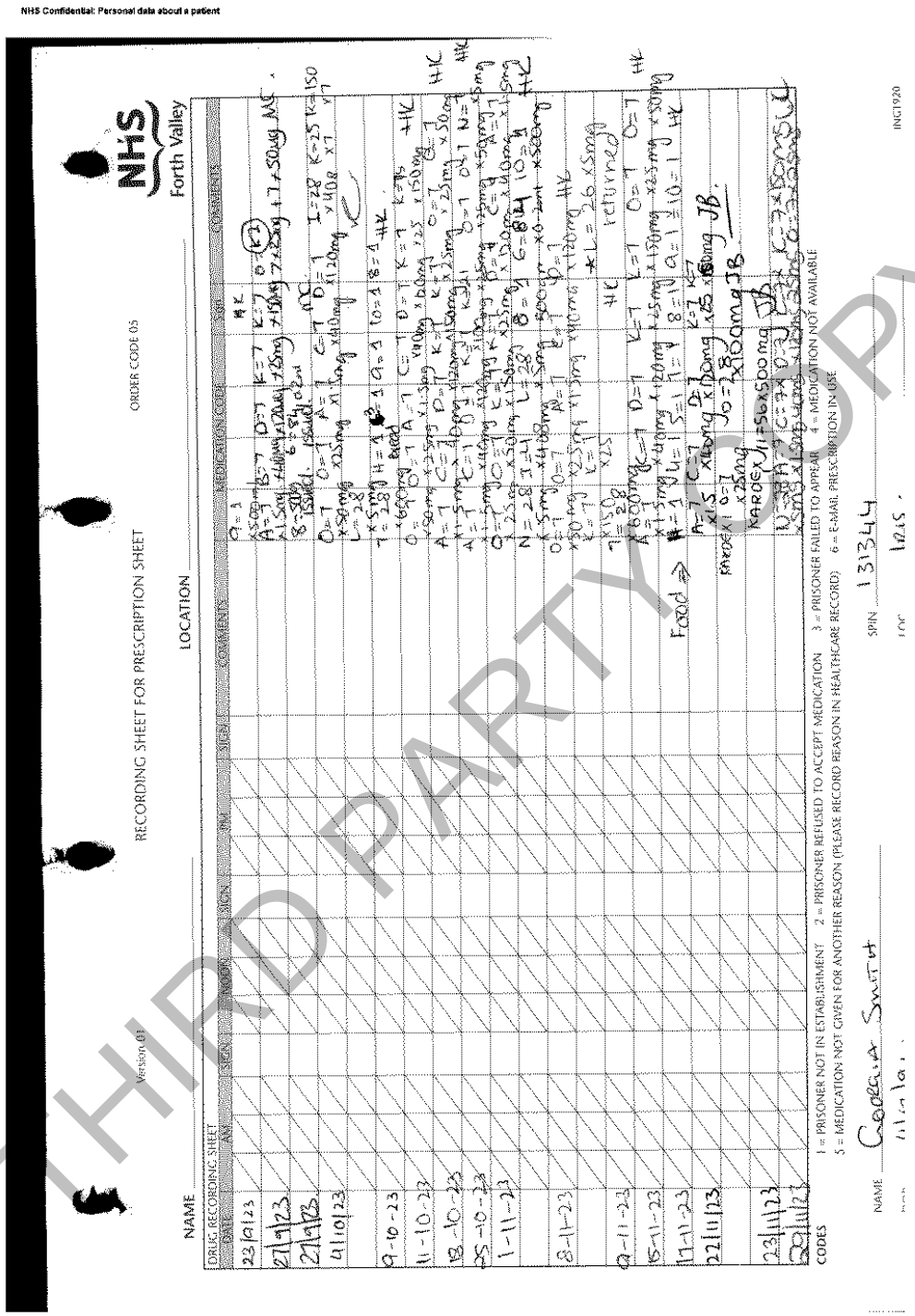

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NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

ORDER CODE 05

NAME Georgina Smith

LOCATION [redacted]

DRUG RECORDING SHEET

DATE	AM/PM	SIGN	NOON	SIGN	COMMENTS	MEDICATION CODE	SIGN	COMMENTS
24/11/23								
6/12/23								
8/12/23								
12/12/23								
13/12/23								
18/12/23								
20/12/23								
21/12/23								
27/12/23								
29/12/23								
31/01/24								
08/01/24								
10/01/24								
15/01/24								
17/01/24								
24/11/24								

CODES

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NAME Georgina Smith

DOB 4/12/91

SPN 131344

LOC Ens

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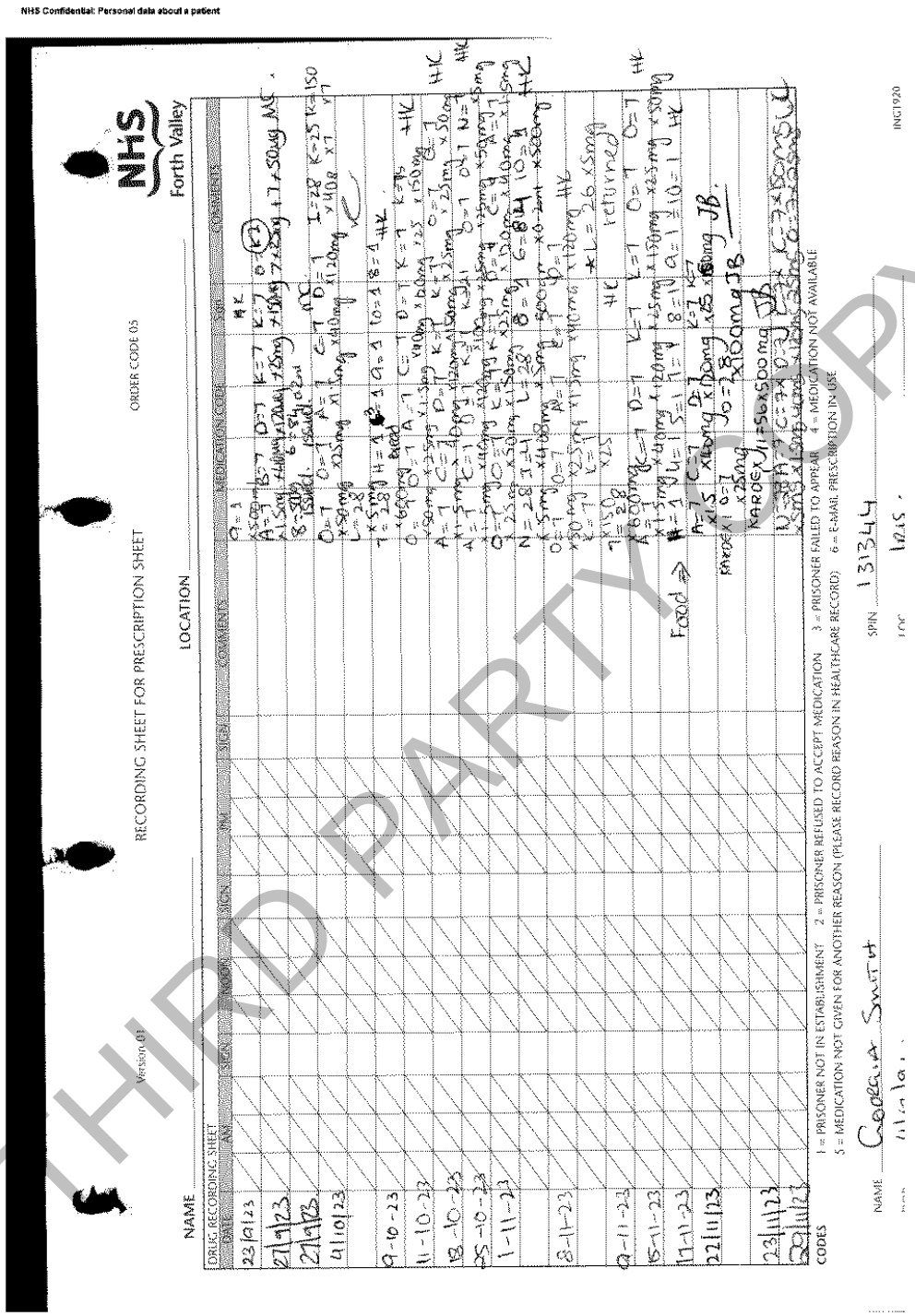

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA
UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: THE HEALTH CENTRE, P.O. BOX 21616
CONSULTANT: Dr [redacted]
DOB: 04/12/1991
SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: Dr [redacted] HMP Stirling
SAMPLE TYPE OF LATEST SPECIMEN: Serum
CLINICAL DETAILS REFERRING TO LATEST REQUEST: ?inflammatory rhritis
COPY DETAILS:

DATE OF COLLECTION	LABORATORY NUMBER	TIME OF COLLECTION	PLASMA GLUCOSE fasting 3.6 mmol/l

DATE OF COLLECTION	LABORATORY NUMBER	Total CO2 22-29 mmol/l	OSMOLALITY 275-295 mosm/kg H2O	SODIUM 133-146 mmol/l	POTASSIUM 3.5-5.3 mmol/l	CHLORIDE 95-108 mmol/l	UREA 2.5-7.8 mmol/l	CREATININE 40-130 µmol/l	eGFR ml/min/1.73m2 <60 = CKD stage 3,4 or 5
07/08/23	130592C			142	4.3	108	4.1	58	>59
21/02/24	817169T			141	4.3	104	3.9	75	>59

DATE OF COLLECTION	LABORATORY NUMBER	AMYLASE up to 100 iu/l 37°C	AST 0-45 iu/l 37°C	ALT 0-65 iu/l 37°C	BILIRUBIN up to 21 µmol/l	TOTAL PROTEIN 60-80 g/l	ALBUMIN 35-50 g/l	ALKALINE PHOSPHATASE 30 - 130 iu/l 37°C	γGT 0-40 (female) iu/l 37°C
07/08/23	130592C		21	21	8	72	46	77	
16/10/23	568106T		20	20	7	71	44	82	
21/02/24	817169T		21	18	9	73	46	71	

DATE OF COLLECTION	LABORATORY NUMBER	IRON 10-30 µmol/l	TIBC 45-72 µmol/l	CALCIUM 2.2-2.60 mmol/l	CORRECTED CALCIUM 2.2-2.60 mmol/l	PHOSPHATE 0.8-1.50 mmol/l (12-60 years)	MAGNESIUM 0.7-1.0 mmol/l	URATE 140-360 (female)	CK(Total) 25-200 (female) iu/l 37°C
[redacted]									

DATE OF COLLECTION	LABORATORY NUMBER	T.S.H. 0.35-5.00 mu/l	FREE T4 9.0-21.0 pmol/l	FREE T3 3.0-6.0 pmol/l	PSA <4.0 µg/L	TRIGLYCERIDE fasting <2.0 mmol/l	CHOLESTEROL mmol/l target levels are risk dependent	H.D.L. >1.2 (female) mmol/l	L.D.L. mmol/l target levels are risk dependent
16/10/23	568106T	3.29	11.6	3.4					
30/11/23	639649W	1.43	12.6	3.5					
29/12/23	656873S	2.12	13.5	3.9					
25/01/24	764132C	1.03							
21/02/24	817169T	**REQ**							

21/02/24	817169T	C-Reactive Prot. <5 mg/L (0 - 5)
21/02/24	**817169T**	Alk. Phosphatase ALP Ref. Limit for patients <30 days old is 0-380 iu/L ALP Ref. Limit for patients <17 years old is 0-425 iu/L ALP Ref. Limit for adults (>17 years) is 0-130 iu/L

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA
UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: THE HEALTH CENTRE, P.O. BOX 21616
CONSULTANT: Dr [redacted]
DOB: 04/12/1991
SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: Dr [redacted] HMP Stirling
SAMPLE TYPE OF LATEST SPECIMEN: Serum
CLINICAL DETAILS REFERRING TO LATEST REQUEST: ?inflammatory rthritis
COPY DETAILS:

DATE OF COLLECTION	LABORATORY NUMBER	TIME OF COLLECTION	PLASMA GLUCOSE fasting 3.6 mmol/l

DATE OF COLLECTION	LABORATORY NUMBER	Total CO2 22-29 mmol/l	OSMOLALITY 275-295 mosm/kg H_2O	SODIUM 133-146 mmol/l	POTASSIUM 3.5-5.3 mmol/l	CHLORIDE 95-108 mmol/l	UREA 2.5-7.8 mmol/l	CREATININE 40-130 µmol/l	eGFR ml/min/1.73m2 <60 = CKD stage 3,4 or 5
07/08/23	130592C			142	4.3	108	4.1	58	>59
21/02/24	817169T			141	4.3	104	3.9	75	>59

DATE OF COLLECTION	LABORATORY NUMBER	AMYLASE up to 100 iu/l 37°C	AST 0-45 iu/l 37°C	ALT 0-55 iu/l 37°C	BILIRUBIN up to 21 µmol/l	TOTAL PROTEIN 60-80 g/l	ALBUMIN 35-50 g/l	ALKALINE PHOSPHATASE 30 - 130 iu/l 37°C	γGT 0-40 (female) iu/l 37°C
07/08/23	130592C		21	21	8	72	46	77	
16/10/23	568106T		20	20	7	71	44	82	
21/02/24	817169T		21	18	9	73	46	71	

DATE OF COLLECTION	LABORATORY NUMBER	IRON 10-30 µmol/l	TIBC 45-72 µmol/l	CALCIUM 2.2-2.60 mmol/l	CORRECTED CALCIUM 2.2-2.60 mmol/l	PHOSPHATE 0.8-1.50 mmol/l (12-60 years)	MAGNESIUM 0.7-1.0 mmol/l	URATE 140-360 (female) µmol/l	CK(Total) 25-200 (female) iu/l 37°C

DATE OF COLLECTION	LABORATORY NUMBER	T.S.H. 0.35-5.00 mu/l	FREE T4 9.0-21.0 pmol/l	FREE T3 3.0-6.0 pmol/l	PSA <4.0 µg/L	TRIGLYCERIDE fasting <2.0 mmol/l	CHOLESTEROL mmol/l target levels are risk dependent	H.D.L. >1.2 (female) mmol/l	L.D.L. mmol/l target levels are risk dependent
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29/12/23	666873S	2.12	13.5	3.9					
25/01/24	764132C	1.03							
21/02/24	817169T	1.45							

21/02/24	817169T	C-Reactive Prot.	<5	mg/L	(0 - 5)

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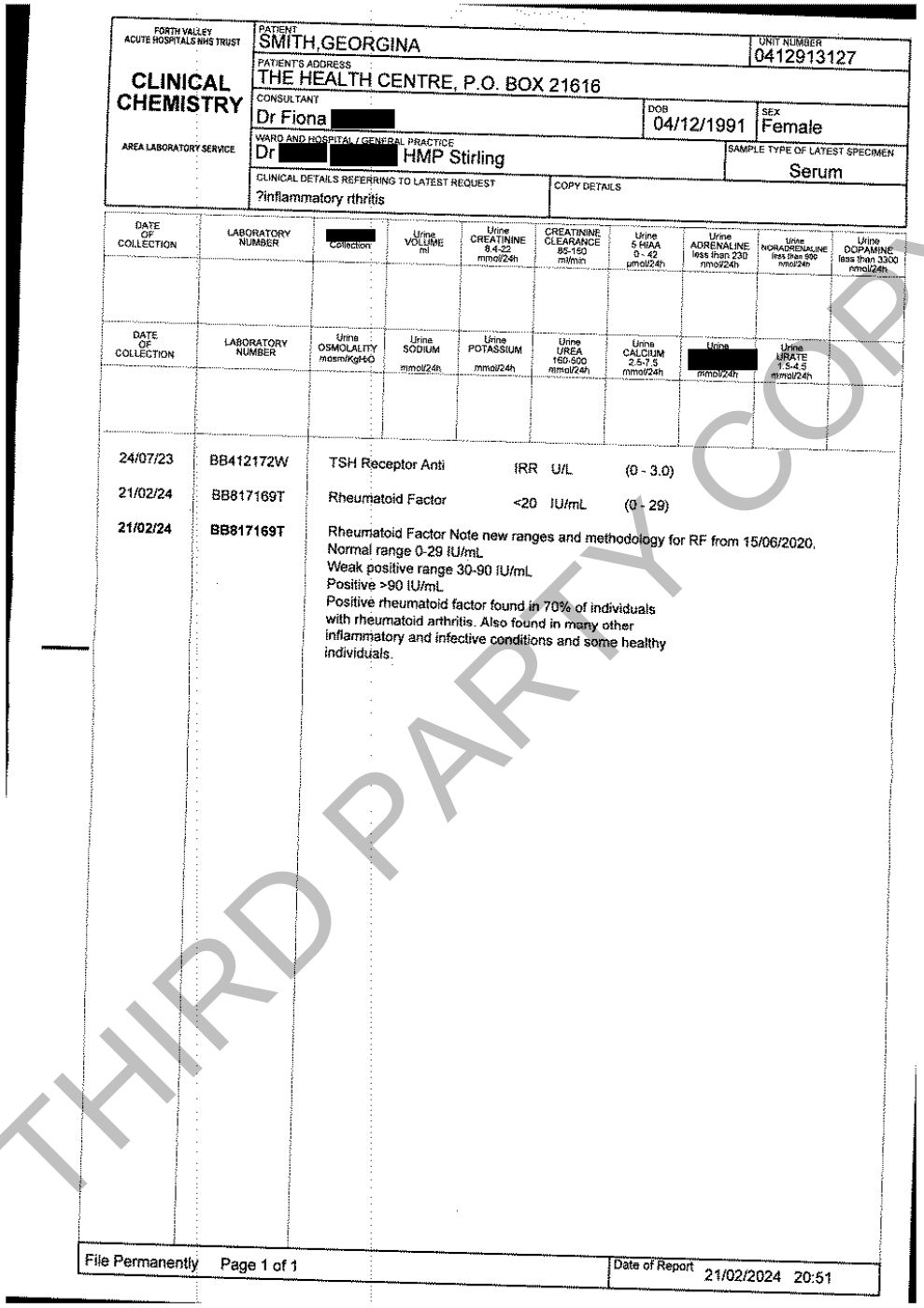

FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA
UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: THE HEALTH CENTRE, P.O. BOX 21616
CONSULTANT: Dr Fiona [redacted]
DOB: 04/12/1991
SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: Dr [redacted] HMP Stirling
SAMPLE TYPE OF LATEST SPECIMEN: Serum
CLINICAL DETAILS REFERRING TO LATEST REQUEST: ?inflammatory rhritis
COPY DETAILS:

DATE OF COLLECTION	LABORATORY NUMBER	[redacted] Collection	Urine VOLUME ml	Urine CREATININE 8.4-22 mmol/24h	CREATININE CLEARANCE 85-150 ml/min	Urine 5 HIAA 9 - 42 µmol/24h	Urine ADRENALINE less than 230 nmol/24h	Urine NORADRENALINE less than 690 nmol/24h	Urine DOPAMINE less than 3300 nmol/24h

DATE OF COLLECTION	LABORATORY NUMBER	Urine OSMOLALITY mosmol/kgH2O	Urine SODIUM mmol/24h	Urine POTASSIUM mmol/24h	Urine UREA 150-500 mmol/24h	Urine CALCIUM 2.5-7.5 mmol/24h	Urine [redacted] mmol/24h	Urine URATE 1.5-4.5 mmol/24h

24/07/23	BB412172W	TSH Receptor Anti	IRR	U/L	(0 - 3.0)
21/02/24	BB817169T	Rheumatoid Factor	<20	IU/mL	(0 - 29)
21/02/24	**BB817169T**	Rheumatoid Factor Note new ranges and methodology for RF from 15/06/2020. Normal range 0-29 IU/mL Weak positive range 30-90 IU/mL Positive >90 IU/mL Positive rheumatoid factor found in 70% of individuals with rheumatoid arthritis. Also found in many other inflammatory and infective conditions and some healthy individuals.			

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NHS Forth Valley Haematology

NHS Forth Valley

Patient	SMITH, GEORGINA THE HEALTH CENTRE P.O. BOX 21616	Patient Ref. Number	0412913127
		Date Of Birth	04/12/1991
		Sex	F
Doctor/Location	HMP Stirling Dr [redacted]	Consultant/GP	Dr [redacted]
		Date/Time Specimen Received	21/02/2024 15:08
Clinical Data	?inflammatory rthritis	Sample Type	Blood

DIFFERENTIAL W.B.C. COUNT ALL x 10^9/L									
Neutrophils	Lymphocytes	Monocytes	Eosinophils	Basophils	Meta.	Myelocytes	*	Blasts	N.R.B.C.

R.B.C. x10^{12}/L	P.C.V.	M.C.V.fl	M.C.H. pg	M.C.H.C. g/L	E.S.R. mm/1hr	Retics. [redacted]/L	Report Date/Time
					2		21/02/2024 16:23
Hb g/L	W.B.C. x 10^9/L	Plt. x 10^9/L	Investigation			Lab. Number	Collection Date/Time
			Miscellaneous			566167	21/02/2024 11:52

Full Blood Count Reference Ranges:

ADULTS	MALE	FEMALE
White Cell Count (x10^9/L)	4 - 10	4 - 10
Red Cell Count (x10^9/L)	4.4 - 5.9	3.8 - 5.2
Haemoglobin (g/L)	133 - 177	117 - 157
Packed Cell Volume	0.40 - 0.52	0.36 - 0.47
Mean Cell Volume (fl)	81 - 100	81 - 100
Mean Cell Haemoglnbin (pg)	26.6 - 33.8	26.4 - 34
MCH Concentration (g/L)	314 - 363	314 - 368
Platelet Count (x10^9/L)	150 - 440	150 - 440

CHILDREN (M & F)	BIRTH	1 YEAR	2 - 6 YEARS	6 - 12 YEARS
WBC (x10^9/L)	10 - 26	6 - 16	5 - 10	5 - 13
RBC (x10^{12}/L)	5 - 6	3.9 - 5.1	4 - 5.2	4 - 5.2
Hb (g/L)	140 - 220	111 - 141	110 - 140	115 - 155
Platelets	150 - 450	200 - 490	200 - 490	170 - 450

Differential White Cell Count: (as absolute counts, x 10^9/L)

	BIRTH	1 YEAR	2 - 6 YEARS	6 - 12 YEARS	ADULT
Neutrophils	4 - 14	1 - 7	1.5 - 8	2 - 8	2 - 7
Lymphocytes	3 - 8	3.5 - 11	6 - 9	1 - 5	1 - 3
Monocytes	0.5 - 2	0.2 - 1	0.2 - 1	0.2 - 1	0.2 - 1
Eosinophils	0.1 - 1	0.1 - 1	0.1 - 1	0.1 - 1	0.02 - 0.5
Basophils					0.02 - 0.1

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NHS Forth Valley Haematology

NHS Forth Valley

Patient		Patient Ref. Number	
SMITH, GEORGINA THE HEALTH CENTRE P.O. BOX 21616		0412913127	
		Date Of Birth: 04/12/1991	Sex: F
Doctor/Location: HMP Stirling Dr [redacted]	Consultant/GP: Dr [redacted]	Date/Time Specimen Received: 21/02/2024 15:08	
Clinical Data: ?inflammatory rthritis		Sample Type: Blood	

DIFFERENTIAL W.B.C. COUNT ALL x 10^9/L

Neutrophils	Lymphocytes	Monocytes	Eosinophils	Basophils	Meta.	Myelocytes	*	Blasts	N.R.B.C.
3.80	2.30	0.50	0.30	0.10					0.00

R.B.C. x10^{12}/L	P.C.V.	M.C.V.fl	M.C.H. pg	M.C.H.C. g/L	E.S.R. mm/1hr	Retics. x10^9/L	Report Date/Time
4.88	0.427	87.5	30.9	354			21/02/2024 15:53

Hb g/L	W.B.C. x 10^9/L	Plt. x 10^9/L	Investigation	Lab. Number	Collection Date/Time
151	7.0	320	Miscellaneous	566167	21/02/2024 11:52

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Mean Cell Volume (fl)	81 - 100	81 - 100
Mean Cell Haemoglobin (pg)	26.6 - 33.8	26.4 - 34
MCH Concentration (g/L)	314 - 363	314 - 358
Platelet Count (x10^9/L)	150 - 440	150 - 440

[redacted] (M & F)	BIRTH	1 YEAR	2 - 6 YEARS	6 - 12 YEARS
WBC (x10^9/L)	10 - 26	6 - 16	5 - 10	5 - 13
RBC (x10^{12}/L)	5 - 6	3.9 - 5.1	4 - 5.2	4 - 5.2
Hb (g/L)	140 - 220	111 - 141	110 - 140	115 - 155
Platelets	150 - 450	200 - 490	200 - 490	170 - 450

Differential White Cell Count: (as absolute counts, x 10^9/L)

	BIRTH	1 YEAR	2 - 6 YEARS	6 - 12 YEARS	ADULT
Neutrophils	4 - 14	1 - 7	1.5 - 8	2 - 8	2 - 7
Lymphocytes	3 - 8	3.5 - 11	6 - 9	1 - 5	1 - 3
Monocytes	0.5 - 2	0.2 - 1	0.2 - 1	0.2 - 1	0.2 - 1
Eosinophils	0.1 - 1	0.1 - 1	0.1 - 1	0.1 - 1	0.02 - 0.5
Basophils					0.02 - 0.1

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NHS Forth Valley
Haematology

NHS
Forth Valley

Patient		Patient Ref. Number	
SMITH, GEORGINA THE HEALTH CENTRE P.O. BOX 21616		0412913127	
		Date Of Birth 04/12/1991	Sex F
Doctor/Location	Consultant/GP	Date/Time Specimen Received	
HMP Stirling Dr [redacted]	Dr [redacted]	21/02/2024 15:08	
Clinical Data ?inflammatory rthritis		Sample Type	Blood

DIFFERENTIAL W.B.C. COUNT ALL x 10^9/L									
Neutrophils	Lymphocytes	Monocytes	Eosinophils	Basophils	Meta.	Myelocytes	*	Blasts	N.R.B.C.

R.B.C. x10^{12}/L	P.C.V.	M.C.V.fl	M.C.H. pg	M.C.H.C. g/L	E.S.R. mm/1hr	Retics. [redacted]/L	Report Date/Time
					2		21/02/2024 16:23
Hb g/L	W.B.C. x 10^9/L	Plt. x 10^9/L	Investigation			Lab. Number	Collection Date/Time
			Miscellaneous			566167	21/02/2024 11:52

Full Blood Count Reference Ranges:

ADULTS	MALE	FEMALE
White Cell Count (x10^9/L)	4 - 10	4 - 10
Red Cell Count (x10^9/L)	4.4 - 5.9	3.8 - 5.2
Haemoglobin (g/L)	133 - 177	117 - 157
Packed Cell Volume	0.40 - 0.52	0.36 - 0.47
Mean Cell Volume (fl)	81 - 100	81 - 100
Mean Cell Haemoglnbin (pg)	26.6 - 33.8	26.4 - 34
MCH Concentration (g/L)	314 - 363	314 - 368
Platelet Count (x10^9/L)	150 - 440	150 - 440

CHILDREN (M & F)	BIRTH	1 YEAR	2 - 6 YEARS	6 - 12 YEARS
WBC (x10^9/L)	10 - 26	6 - 16	5 - 10	5 - 13
RBC (x10^{12}/L)	5 - 6	3.9 - 5.1	4 - 5.2	4 - 5.2
Hb (g/L)	140 - 220	111 - 141	110 - 140	115 - 155
Platelets	150 - 450	200 - 490	200 - 490	170 - 450

Differential White Cell Count: (as absolute counts, x 10^9/L)

	BIRTH	1 YEAR	2 - 6 YEARS	6 - 12 YEARS	ADULT
Neutrophils	4 - 14	1 - 7	1.5 - 8	2 - 8	2 - 7
Lymphocytes	3 - 8	3.5 - 11	6 - 9	1 - 5	1 - 3
Monocytes	0.5 - 2	0.2 - 1	0.2 - 1	0.2 - 1	0.2 - 1
Eosinophils	0.1 - 1	0.1 - 1	0.1 - 1	0.1 - 1	0.02 - 0.5
Basophils					0.02 - 0.1

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NHS Forth Valley Haematology

NHS Forth Valley

Patient		Patient Ref. Number	
SMITH, GEORGINA THE HEALTH CENTRE P.O. BOX 21616		0412913127	
		Date Of Birth 04/12/1991	Sex F
Doctor/Location	Consultant/GP	Date/Time Specimen Received	
HMP Stirling Dr [redacted]	Dr [redacted]	21/02/2024 15:08	
Clinical Data ?inflammatory rthritis		Sample Type	Blood

DIFFERENTIAL W.B.C. COUNT ALL x 10^9/L

Neutrophils	Lymphocytes	Monocytes	Eosinophils	Basophils	Meta.	Myelocytes	*	Blasts	N.R.B.C.
3.80	2.30	0.50	0.30	0.10					0.00

R.B.C. x10^{12}/L	P.C.V.	M.C.V.fl	M.C.H. pg	M.C.H.C. g/L	E.S.R. mm/1hr	Retics. x10^9/L	Report Date/Time
4.88	0.427	87.5	30.9	354			21/02/2024 15:53

Hb g/L	W.B.C. x 10^9/L	Plt. x 10^9/L	Investigation	Lab. Number	Collection Date/Time
151	7.0	320	Miscellaneous	566167	21/02/2024 11:52

Full Blood Count Reference Ranges:

ADULTS	MALE	FEMALE
White Cell Count (x10^9/L)	4 - 10	4 - 10
Red Cell Count (x10^9/L)	4.4 - 5.9	3.8 - 5.2
Haemoglobin (g/L)	133 - 177	117 - 157
Packed Cell Volume	0.40 - 0.52	0.35 - 0.47
Mean Cell Volume (fl)	81 - 100	81 - 100
Mean Cell Haemoglobin (pg)	26.6 - 33.8	26.4 - 34
MCH Concentration (g/L)	314 - 363	314 - 358
Platelet Count (x10^9/L)	150 - 440	150 - 440

[redacted] (M & F)	BIRTH	1 YEAR	2 - 6 YEARS	6 - 12 YEARS
WBC (x10^9/L)	10 - 26	6 - 16	5 - 10	5 - 13
RBC (x10^{12}/L)	5 - 6	3.9 - 5.1	4 - 5.2	4 - 5.2
Hb (g/L)	140 - 220	111 - 141	110 - 140	115 - 155
Platelets	150 - 450	200 - 490	200 - 490	170 - 450

Differential White Cell Count: (as absolute counts, x 10^9/L)

	BIRTH	1 YEAR	2 - 6 YEARS	6 - 12 YEARS	ADULT
Neutrophils	4 - 14	1 - 7	1.5 - 8	2 - 8	2 - 7
Lymphocytes	3 - 8	3.5 - 11	6 - 9	1 - 5	1 - 3
Monocytes	0.5 - 2	0.2 - 1	0.2 - 1	0.2 - 1	0.2 - 1
Eosinophils	0.1 - 1	0.1 - 1	0.1 - 1	0.1 - 1	0.02 - 0.5
Basophils					0.02 - 0.1

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA
UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: THE HEALTH CENTRE, P.O. BOX 21616
CONSULTANT: Dr [redacted]
DOB: 04/12/1991
SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: Dr [redacted] HMP Stirling
SAMPLE TYPE OF LATEST SPECIMEN: Serum
CLINICAL DETAILS REFERRING TO LATEST REQUEST: ?inflammatory rhritis
COPY DETAILS:

DATE OF COLLECTION	LABORATORY NUMBER	TIME OF COLLECTION	PLASMA GLUCOSE fasting 3.6 mmol/l

DATE OF COLLECTION	LABORATORY NUMBER	Total CO2 22-29 mmol/l	OSMOLALITY 275-295 mosm/kg H2O	SODIUM 133-146 mmol/l	POTASSIUM 3.5-5.3 mmol/l	CHLORIDE 95-108 mmol/l	UREA 2.5-7.8 mmol/l	CREATININE 40-130 µmol/l	eGFR ml/min/1.73m2 <60 = CKD stage 3,4 or 5
07/08/23	130592C			142	4.3	108	4.1	58	>59
21/02/24	817169T			141	4.3	104	3.9	75	>59

DATE OF COLLECTION	LABORATORY NUMBER	AMYLASE up to 100 IU/l 37°C	AST 0-45 iu/l 37°C	ALT 0-65 iu/l 37°C	BILIRUBIN up to 21 µmol/l	TOTAL PROTEIN 60-80 g/l	ALBUMIN 35-50 g/l	ALKALINE PHOSPHATASE 30 - 130 IU/l 37°C	γGT 0-40 (female) IU/l 37°C
07/08/23	130592C		21	21	8	72	46	77	
16/10/23	568106T		20	20	7	71	44	82	
21/02/24	817169T		21	18	9	73	46	71	

DATE OF COLLECTION	LABORATORY NUMBER	IRON 10-30 µmol/l	TIBC 45-72 µmol/l	CALCIUM 2.2-2.60 mmol/l	CORRECTED CALCIUM 2.2-2.60 mmol/l	PHOSPHATE 0.8-1.50 mmol/l (12-60 years)	MAGNESIUM 0.7-1.0 mmol/l	URATE 140-360 (female)	CK(Total) 25-200 (female) IU/l 37°C
[redacted]									

DATE OF COLLECTION	LABORATORY NUMBER	T.S.H. 0.35-5.00 mu/l	FREE T4 9.0-21.0 pmol/l	FREE T3 3.0-6.0 pmol/l	PSA <4.0 µg/L	TRIGLYCERIDE fasting <2.0 mmol/l	CHOLESTEROL mmol/l target levels are risk dependent	H.D.L. >1.2 (female) mmol/l	L.D.L. mmol/l target levels are risk dependent
16/10/23	568106T	3.29	11.6	3.4					
30/11/23	639649W	1.43	12.6	3.5					
29/12/23	656873S	2.12	13.5	3.9					
25/01/24	764132C	1.03							
21/02/24	817169T	**REQ**							

21/02/24	817169T	C-Reactive Prot. <5 mg/L (0 - 5)
21/02/24	**817169T**	Alk. Phosphatase ALP Ref. Limit for patients <30 days old is 0-380 iu/L ALP Ref. Limit for patients <17 years old is 0-425 iu/L ALP Ref. Limit for adults (>17 years) is 0-130 iu/L

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Date of Report 21/02/2024 18:34

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA
UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: THE HEALTH CENTRE, P.O. BOX 21616
CONSULTANT: Dr [redacted]
DOB: 04/12/1991
SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: Dr [redacted] HMP Stirling
SAMPLE TYPE OF LATEST SPECIMEN: Serum
CLINICAL DETAILS REFERRING TO LATEST REQUEST: ?inflammatory rthritis
COPY DETAILS:

DATE OF COLLECTION	LABORATORY NUMBER	TIME OF COLLECTION	PLASMA GLUCOSE fasting 3.6 mmol/l						

DATE OF COLLECTION	LABORATORY NUMBER	Total CO2 22-29 mmol/l	OSMOLALITY 275-295 mosm/kg H_2O	SODIUM 133-146 mmol/l	POTASSIUM 3.5-5.3 mmol/l	CHLORIDE 95-108 mmol/l	UREA 2.5-7.8 mmol/l	CREATININE 40-130 µmol/l	eGFR ml/min/1.73m2 <60 = CKD stage 3,4 or 5
07/08/23	130592C			142	4.3	108	4.1	58	>59
21/02/24	817169T			141	4.3	104	3.9	75	>59

DATE OF COLLECTION	LABORATORY NUMBER	AMYLASE up to 100 iu/l 37°C	AST 0-45 iu/l 37°C	ALT 0-55 iu/l 37°C	BILIRUBIN up to 21 µmol/l	TOTAL PROTEIN 60-80 g/l	ALBUMIN 35-50 g/l	ALKALINE PHOSPHATASE 30 - 130 iu/l 37°C	γGT 0-40 (female) iu/l 37°C
07/08/23	130592C		21	21	8	72	46	77	
16/10/23	568106T		20	20	7	71	44	82	
21/02/24	817169T		21	18	9	73	46	71	

DATE OF COLLECTION	LABORATORY NUMBER	IRON 10-30 µmol/l	TIBC 45-72 µmol/l	CALCIUM 2.2-2.60 mmol/l	CORRECTED CALCIUM 2.2-2.60 mmol/l	PHOSPHATE 0.8-1.50 mmol/l (12-60 years)	MAGNESIUM 0.7-1.0 mmol/l	URATE 140-360 (female) µmol/l	CK(Total) 25-200 (female) iu/l 37°C

DATE OF COLLECTION	LABORATORY NUMBER	T.S.H. 0.35-5.00 mu/l	FREE T4 9.0-21.0 pmol/l	FREE T3 3.0-6.0 pmol/l	PSA <4.0 µg/L	TRIGLYCERIDE fasting <2.0 mmol/l	CHOLESTEROL mmol/l target levels are risk dependent	H.D.L. >1.2 (female) mmol/l	L.D.L. mmol/l target levels are risk dependent
16/10/23	568106T	3.29	11.6	3.4					
30/11/23	639649W	1.43	12.6	3.5					
29/12/23	666873S	2.12	13.5	3.9					
25/01/24	764132C	1.03							
21/02/24	817169T	1.45							

21/02/24	817169T	C-Reactive Prot.	<5	mg/L	(0 - 5)

Filing Range from: 21/02/2024 to: 07/08/2023 Page 1 of 1

Date of Report: 21/02/2024 19:34

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA
UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: THE HEALTH CENTRE, P.O. BOX 21616
CONSULTANT: Dr Fiona [redacted]
DOB: 04/12/1991
SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: Dr [redacted] HMP Stirling
SAMPLE TYPE OF LATEST SPECIMEN: Serum
CLINICAL DETAILS REFERRING TO LATEST REQUEST: ?inflammatory rhritis
COPY DETAILS:

DATE OF COLLECTION	LABORATORY NUMBER	[redacted] Collection	Urine VOLUME ml	Urine CREATININE 8.4-22 mmol/24h	CREATININE CLEARANCE 85-150 ml/min	Urine 5 HIAA 9 - 42 µmol/24h	Urine ADRENALINE less than 230 nmol/24h	Urine NORADRENALINE less than 690 nmol/24h	Urine DOPAMINE less than 3300 nmol/24h

DATE OF COLLECTION	LABORATORY NUMBER	Urine OSMOLALITY mosmol/kgH2O	Urine SODIUM mmol/24h	Urine POTASSIUM mmol/24h	Urine UREA 150-500 mmol/24h	Urine CALCIUM 2.5-7.5 mmol/24h	Urine [redacted] mmol/24h	Urine URATE 1.5-4.5 mmol/24h

24/07/23	BB412172W	TSH Receptor Anti	IRR	U/L	(0 - 3.0)
21/02/24	BB817169T	Rheumatoid Factor	<20	IU/mL	(0 - 29)
21/02/24	**BB817169T**	Rheumatoid Factor Note new ranges and methodology for RF from 15/06/2020. Normal range 0-29 IU/mL Weak positive range 30-90 IU/mL Positive >90 IU/mL Positive rheumatoid factor found in 70% of individuals with rheumatoid arthritis. Also found in many other inflammatory and infective conditions and some healthy individuals.			

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Greater Glasgow and Clyde

Glasgow Royal Infirmary
[redacted] Parade
Glasgow
G31 2ER

26/02/2024

Georgina Smith
THE HEALTH CENTRE
P.O. BOX 21616
Stirling
FK7 1DW

Dear, Georgina Smith

CHI Number: 0412913127

We have received a referral to provide you with a **Dermatology** outpatient appointment:

Please telephone us on: **0800 592087** to discuss your appointment.

If we do not hear from you within two weeks of the date on this letter, we will assume that you no longer require an appointment. We will remove your name from the waiting list and will inform your GP or Referrer accordingly.

You can contact us between the hours of 8am - 8pm Monday to Friday and Saturday [redacted] - 1pm, excluding Public Holidays.

Yours sincerely

[redacted] McMahon

Referral Management Centre South/Clyde

User ID SCGC Oper Invitation V1

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NHS
Greater Glasgow and Clyde

Glasgow Royal Infirmary
[redacted] Parade
Glasgow
G31 2ER

26/02/2024

Georgina Smith
THE HEALTH CENTRE
P.O. BOX 21616
Stirling
FK7 1DW

Dear, Georgina Smith

CHI Number: 0412913127

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Please telephone us on: **0800 592087** to discuss your appointment.

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You can contact us between the hours of 8am - 8pm Monday to Friday and Saturday [redacted] - 1pm, excluding Public Holidays.

Yours sincerely

[redacted] McMahon

Referral Management Centre South/Clyde

User ID SCGC Open Invitation V1

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IN POSSESSION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
C Smith	4-3-24	13 13 65	Ivis	

MEDICATION

Name ■ drug	Dose (Mg)	Issue Date	Quantity	Times ■ Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Pizotifen	1.5mg	28/2	7	✓				2	2	0
Paracetamol	40mg	28/2	7			✓		2	2	0
Hydrocodone Bitartrate	12.5mg	28/2	7			✓		2	2	0
Amitriptyline	75mg	28/2	7			✓		2	2	0
Doxycycline	100mg	21/2	28	✓				16	16	0
Ranitidine	8mg	21/2	56			✓	✓	32	32	0

Time of check

PRISONERS RESPONSE TO ANY DISCREPANCY:

.....

Nurse Signature: ..... **Patient Signature:** .....

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety ■ others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature ..... **Date** .....

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NHS
Greater Glasgow and Clyde

Glasgow Royal Infirmary
[redacted] Parade
Glasgow G31 2ER
05/03/2024

Georgina Smith
THE HEALTH CENTRE
P.O. BOX 21616
Stirling
FK7 1DW

Dear, Georgina Smith

CHI Number: 0412913127

I am writing to tell you that unfortunately we need to cancel your appointment for the clinic:

Consultant: Dr [redacted] Jury
Date and time: Wednesday 03/04/2024, at 10:00
Location: Dermatology Department [redacted] Building

We will contact you as soon as possible with a further appointment.

If you have any questions please contact us on

0141 201 5440 / 5442 / 5443 or *email us on

GRI.ReturnAppointments@ggc.scot.nhs.uk.

*If you are contacting us by email you should include the following information:

Your name
CHI Number
Consultant Name
Date and time of your appointment
Reason: e.g Unable to attend and require a further appointment
For security purposes, please do not include any clinical information in your email.

Yours sincerely

Irene Fyfe

Health Records Manager
User ID Paul Frame

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IN POSSESSION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
C Smith	4-3-24	13 13 65	Ivis	

MEDICATION

Name ■ drug	Dose (Mg)	Issue Date	Quantity	Times ■ Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Pizotifen	1.5mg	28/2	7					2	2	0
Paracetamol	40mg	28/2	7					2	2	0
Hydrocodone Bitartrate	5/325mg	28/2	7					2	2	0
Amitriptyline	75mg	28/2	7					2	2	0
Baclofen	10mg	21/2	28					16	16	0
Ranitidine	8mg	21/2	56					32	32	0

Time of check [ ]

PRISONERS RESPONSE TO ANY DISCREPANCY:

Nurse Signature: _____ **Patient Signature:** _____

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety ■ others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

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NHS
Greater Glasgow and Clyde

Glasgow Royal Infirmary
[redacted] Parade
Glasgow G31 2ER
05/03/2024

Georgina Smith
THE HEALTH CENTRE
P.O. BOX 21616
Stirling
FK7 1DW

Dear, Georgina Smith

CHI Number: 0412913127

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Consultant: Dr [redacted] Jury
Date and time: Wednesday 03/04/2024, at 10:00
Location: Dermatology Department [redacted] Building

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*If you are contacting us by email you should include the following information:

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Consultant Name
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For security purposes, please do not include any clinical information in your email.

Yours sincerely

Irene Fyfe

Health Records Manager
User ID Paul Frame

SCGC Op Can no Rebook V1

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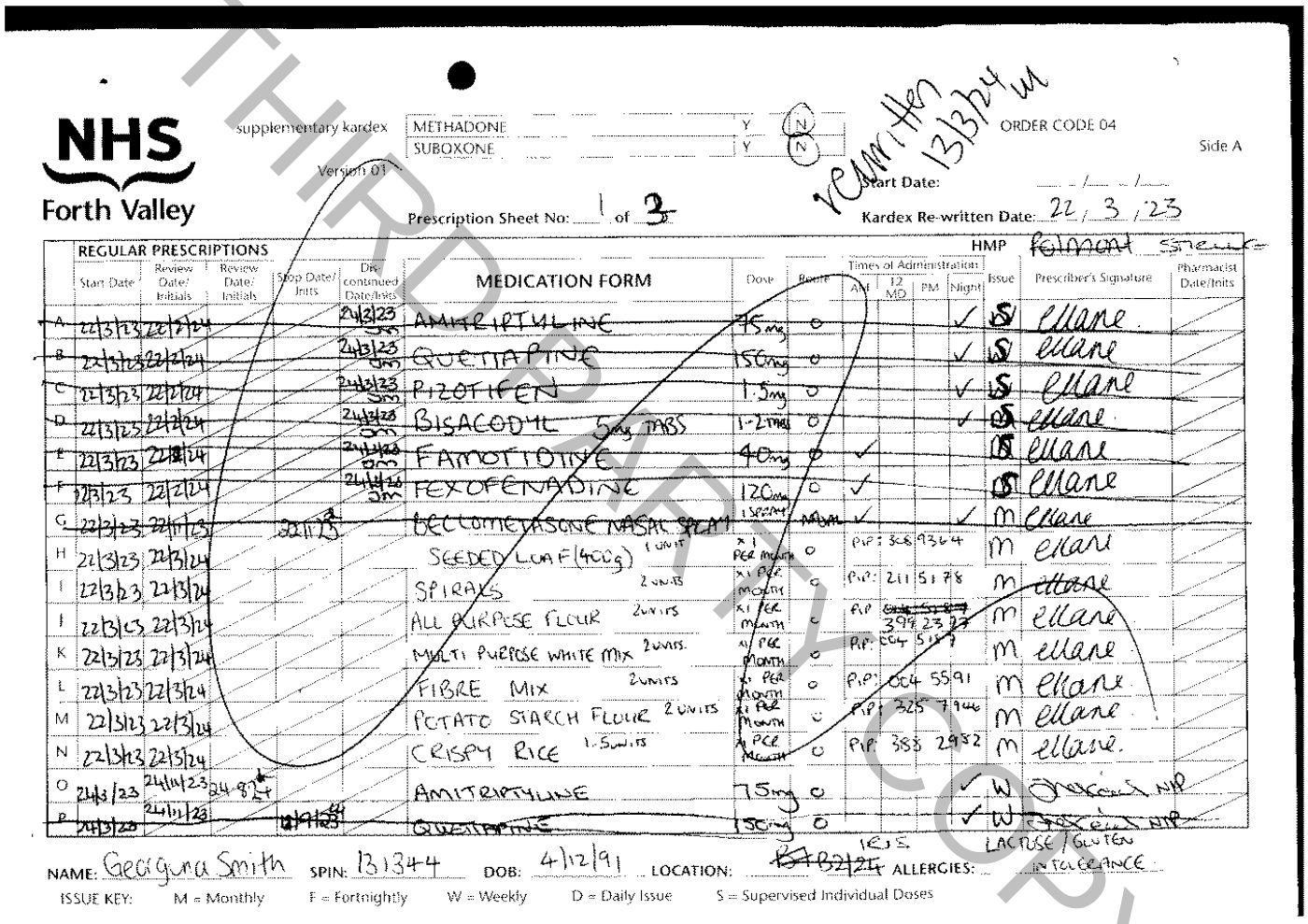

NHS Forth Valley

supplementary kardex

METHADONE Y N
SUBOXONE Y N

ORDER CODE 04

Side A

Version 01

Start Date: __/__/__

Prescription Sheet No: 1 of 3

Kardex Re-written Date: 22/3/23

HMP Polmont

REGULAR PRESCRIPTIONS

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Initials	Discontinued Date/Initials	MEDICATION FORM	Dose	Route	Times of Administration: AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Initials
A	22/3/23	22/3/24			24/3/23	AMITRIPTYLINE	75mg	O				✓	S	Ellane	
B	22/3/23	22/3/24			24/3/23	QUETIAPINE	150mg	O				✓	S	Ellane	
C	22/3/23	22/3/24			24/3/23	PIZOTIFEN	1.5mg	O				✓	S	Ellane	
D	22/3/23	22/3/24			24/3/23	BISACODYL 5mg TABS	1-2 TABS	O				✓	S	Ellane	
E	22/3/23	22/3/24			24/3/23	FAMOTIDINE	40mg	O	✓				S	Ellane	
F	22/3/23	22/3/24			24/3/23	FEXOFENADINE	120mg	O	✓				S	Ellane	
G	22/3/23	22/3/24		22/3/23		BECLOMETASONE NASAL SPRAY	1 SPRAY	NASAL	✓			✓	M	Ellane	
H	22/3/23	22/3/24				SEEDED LOAF (400g)	1 UNIT	x1 PER MONTH	O				M	Ellane	
I	22/3/23	22/3/24				SPIRAXS	2 UNITS	x1 PER MONTH	O				M	Ellane	
J	22/3/23	22/3/24				ALL PURPOSE FLOUR	2 UNITS	x1 PER MONTH	O				M	Ellane	
K	22/3/23	22/3/24				MULTI PURPOSE WHITE MIX	2 UNITS	x1 PER MONTH	O				M	Ellane	
L	22/3/23	22/3/24				FIBRE MIX	2 UNITS	x1 PER MONTH	O				M	Ellane	
M	22/3/23	22/3/24				POTATO STARCH FLOUR	2 UNITS	x1 PER MONTH	O				M	Ellane	
N	22/3/23	22/3/24				CRISPY RICE	1.5 UNITS	x1 PER MONTH	O				M	Ellane	
O	24/3/23	24/4/23	24/4/24			AMITRIPTYLINE	75mg	O				✓	W	[illegible] NHP	
P	24/3/23	24/4/23		24/4/23		QUETIAPINE	150mg	O				✓	W	[illegible] NHP	

NAME: Georgina Smith SPIN: 131344 DOB: 4/12/91 LOCATION: ~~B1/B2/2L~~ IRIS ALLERGIES: LACTOSE / GLUTEN INTOLERANCE

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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H 1145

NHS Forth Valley

Version 01

ORDER CODE 06

Side B

Prescription Sheet No: 1 of 1

Start Date: __/__/__

written Date: 22/3/23

Kardex Re-

"AS REQUIRED" PRESCRIPTION

HMP ~~GLENE~~ Polmont.

	Start Date	Review Date	Stop Date	Drugs (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Date	Initls
1	22/3/23	22/3/24		KETOCONAZOLE SHAMPO	1APP	TOP	PRN 2-3x WEEKLY	M	Eliane				
2	22/3/23	22/3/24		CETRABEN CREAM 50g	1APP	TOP	PRN	M	Eliane				
3	~~22/3/23~~	~~22/3/24~~	~~28/3/23~~	~~PEPPERMINT OIL CAPS~~	~~1CAP~~	~~O~~	~~UP TO TDS~~	~~S~~	~~Eliane~~				
4	~~22/3/23~~	~~22/3/24~~	~~27/3/23~~	ETODOLAC	600mg	O	OD PRN	S	Eliane				
5	~~22/3/23~~	~~22/3/24~~	~~28/3/23~~	~~DERMOL 500~~	~~1APP~~	~~TOP~~	~~PRN~~	M	~~Eliane~~				
6	28/3/23	28/3/24		PEPPERMINT OIL CAPS	1CAP	O	UP TO TDS	M	Eliane				
7	28/3/23	28/3/24		ETODOLAC	600mg	O	OD PRN	M	Eliane				
8	3/5/23	2/5/24		QV WASH	500ml	1APP	TOP OD PRN	M	[illegible]				
9	~~22/4/23~~	~~22/4/24~~	~~25/4/23~~	~~LACTULOSE~~	~~10-15ml~~	~~O~~	~~UP TO 2x WEEKLY~~	~~M~~	~~[illegible]~~				
10	25/4/23	22/4/24		LACTULOSE	10-15ml	O	UP TO TWICE DAILY	M	Emobera				
11	21/4/23	21/5/24		PARACETAMOL	1g	O	MAX QDS	M	[illegible]				
12	20/2/24	20/2/25	27/2/24	ASPIRIN	300mg	O	STAT AT ONSET OF HEADACHE	M	[illegible]				
13													
14													

Once Only Prescriptions

	Admin Date	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1										
2										
3										

NAME: Georgina Smith SPIN: 131344 DOB: 4/12/91 LOCATION: B1 ALLERGIES: Lactose [redacted] Intolerance.

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised individual Doses

BNC1919

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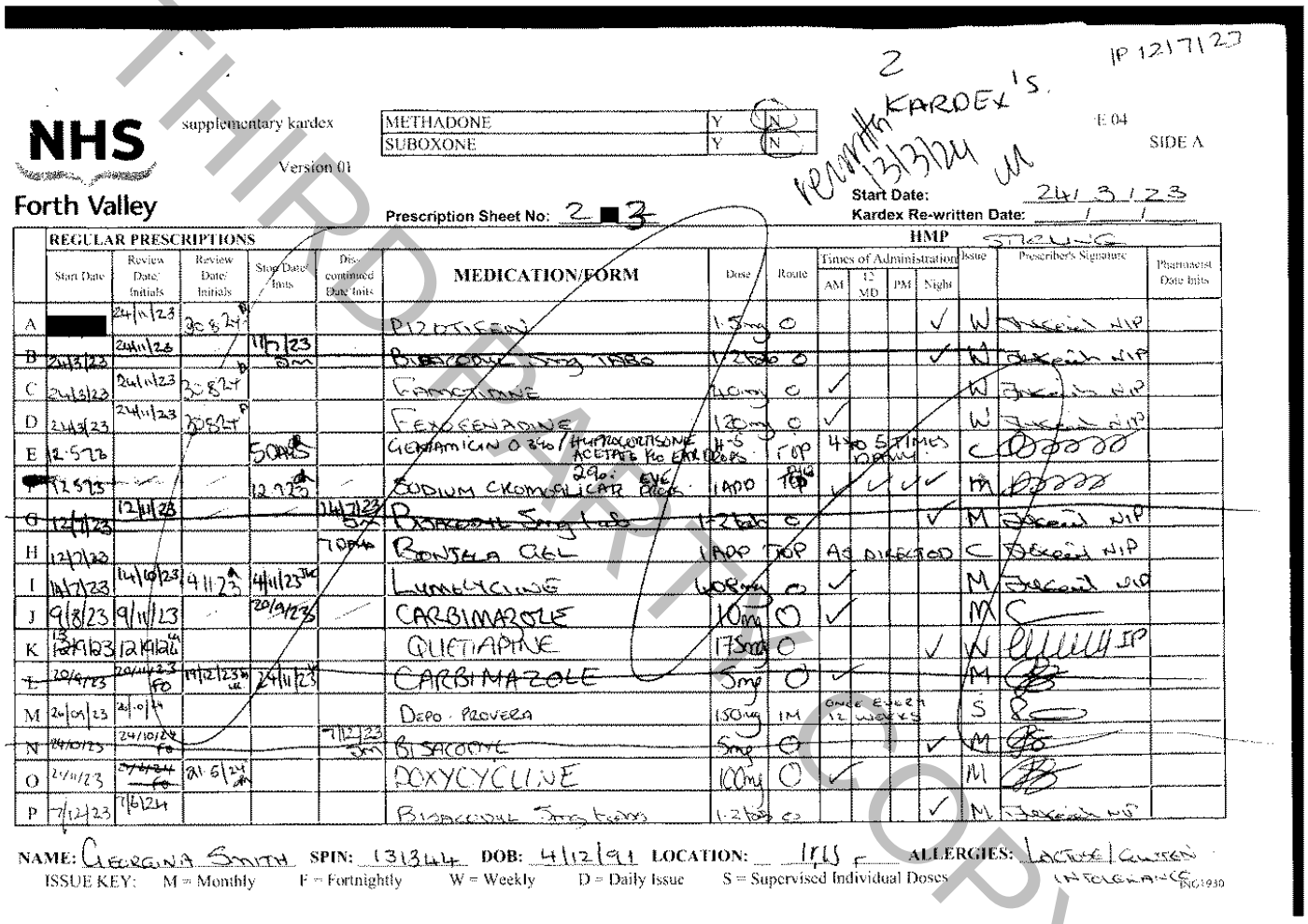

NHS supplementary kardex
Version 01
Forth Valley

METHADONE	Y / N
SUBOXONE	Y / N

IP 12/7/23
2 KARDEX'S.
re-written 13/3/24
E 04
SIDE A
Start Date: 24/3/23
Kardex Re-written Date:
Prescription Sheet No: 2 3

REGULAR PRESCRIPTIONS — HMP

	Start Date	Review Date: Initials	Review Date: Initials	Stop Date: Initials	Discontinued Date: Initials	MEDICATION/FORM	Dose	Route	Times of Administration: AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date Initials
A	[redacted]	24/11/23	30/8/24			PIZOTIFEN	1.5mg	O				✓	W		
B	~~24/11/23~~	~~24/11/23~~		11/7/23		~~BISOPROLOL 5mg TABS~~	~~1/2 tab~~	~~O~~				✓	~~M~~		
C	~~24/8/23~~	24/11/23	30/8/24			CANDESARTAN	16mg	O	✓				W		
D	~~24/8/23~~	24/11/23	30/8/24			FEXOFENADINE	120mg	O	✓				W		
E	12/5/23			5 DAYS		GENTAMICIN 0.3% / HYDROCORTISONE ACETATE 1% EAR DROPS	4-5 DROPS	TOP	4 TO 5 TIMES DAILY				C		
F	12/5/23			12/7/23		SODIUM CROMOGLICATE EYE DROPS 29%	1APD	TOP	✓	✓	✓		M		
G	~~12/11/23~~	~~12/11/23~~			~~24/7/23~~ 5/7	~~PARACETAMOL 5mg/5ml~~	~~1-2 tabs~~	~~O~~				✓	~~M~~		
H	12/12/23				7 DAYS	BONJELA GEL	1APD	TOP	AS DIRECTED				C		
I	~~11/7/23~~	14/10/23	4/11/23	4/11/23		LYMECYCLINE	408mg	O	✓				M		
J	9/8/23	9/11/23		20/9/23		CARBIMAZOLE	10mg	O	✓				M		
K	13/12/23	12/12/23				QUETIAPINE	175mg	O				✓	W		IP
L	~~20/4/23~~	~~20/11/23~~ FD	14/12/23	24/11/23		CARBIMAZOLE	5mg	O	✓				~~M~~		
M	24/10/23	24/10/24				DEPO-PROVERA	150mg	IM	ONCE EVERY 12 WEEKS				S		
N	~~14/10/23~~	24/10/24 FD			~~7/12/23~~	BISACODYL	5mg	O				✓	~~M~~		
O	24/11/23	~~24/11/24~~ FD	21/5/24			DOXYCYCLINE	100mg	O	✓				M		
P	7/12/23	7/6/24				BISACODYL 5mg tabs	1-3 tabs	O				✓	M		

NAME: GEORGINA SMITH SPIN: 131344 DOB: 4/12/91 LOCATION: IRLS F ALLERGIES: LACTOSE / GLUTEN

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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iGPR Report

iGPR Report

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NHS

Version 01

ORDER CODE 06

Side B

(Rewritten 13/3/24 LH)

Forth Valley

Prescription Sheet No: ____ of ____

Start Date: ____/____/____

Kardex Re-written Date: ____/____/____

HMP STIRLING

"AS REQUIRED" PRESCR

	Start Date	Review Date	Stop Date	DRUGS (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Pharmacist Date	Pharmacist Initls
1	~~14/11/23~~	30/	~~14/11/23~~	~~DIFFLAM SPRAY~~	~~3.5ml~~	~~TOP~~	~~ONCE PRN~~	~~C~~	~~[illegible]~~				
2	9/8/23		9/8/23	DIFFLAM SPRAY	TO USE AS DIRECTED			M	C				
3	10/8/23	3/4/24		GF FIBRE (2 UNITS)	O		PIP - 237 7356	M	C				
4	10/8/23	3/4/24		GF BREAD MIX 500G (2 UNITS)	O		PIP - 298 8418	M	C				
5	10/8/23	3/4/24		GF MULTIPURPOSE 500g (2 UNITS)	O		PIP - 231 2981	M	C				
6	10/8/23	3/4/24		GF MULTIPURPOSE 500g (2 UNITS)	O		PIP - 004 5187	M	C				
7	10/8/23	3/4/24		XANTHAN GUM (1 UNIT)	O		PIP - 282 8572	M	C				
8	10/8/23	3/4/24		CRISPY RICE (1-5 UNITS)	O	[redacted]	388 2982	M	C				
9	10/8/23	3/4/24		FUSILLI SPAGS (2 UNITS)	O		PIP - 280 7920	M	C				
10	10/8/23	3/4/24		MINI CRACKERS (1 UNIT)	O		PIP - 353 5515 (2000)	M	C				
11	10/8/23	3/4/24		SAVOURY BISCUITS (0.5 UNITS)	O		PIP - 310 [redacted]	M	C				
12	15/2/24	15/3/24		HYDROMOL OINTMENT 500g	APP	TOP	TDS PRN	M	[illegible]				
13	15/2/24	15/3/24		QV CREAM 500g	APP	TOP	BD PRN	M	[illegible]				
14	15/2/24	15/3/24		BENZOYL PEROXIDE	APP	TOP	BD PRN	M	[illegible]				

Once Only Prescriptions

	Admin Date	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1										
2										
3										

NAME: GEORGINA SMITH SPIN: 131344 DOB: 4/12/91 LOCATION: IR18 ALLERGIES: _____

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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NHS Forth Valley

supplementary kardex

Version 01

METHADONE	Y	N
SUBOXONE	Y	N

ORDER CODE 04

Side A

Start Date: 20 / 2 / 24

Prescription Sheet No: 3 of 3

Kardex Re-written Date: / /

REGULAR PRESCRIPTIONS — HMP

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Initials	Discontinued Date/Initials	MEDICATION FORM	Dose	Route	Times of Administration AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Initials
A	20/2/24	20/3/24 FD				TACROLIMUS 0.03% OINTMENT	1APP	TOP OCYC	TWICE WEEKLY				M		
B															
C															
D															
E															
F															
G															
H															
I															
J															
K															
L															
M															
N															
O															
P															

VERIFIED 13/3/24 CM

NAME: Georginasmith SPIN: 131344 DOB: 4/12/91 LOCATION: Iris ALLERGIES: GLUTEN ALLERGY LACTOSE INTOLLERANCE.

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

iGPR Report

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NHS Forth Valley

Version 01

ORDER CODE 06

Side B

Kardex Re-

Prescription Sheet No: ... of ...

Start Date: .../.../...

written Date: .../.../...

HMP

"AS REQUIRED" PRESCRIPTION

	Start Date	Review Date	Stop Date	Drugs (including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Init.
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											

Once Only Prescriptions

	Admin Date	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescriber's Signature	Checked By	Time Given	Pharmacist Date	Init.
1										
2										
3										

NAME: ..... SPIN: ..... DOB: ..... LOCATION: ..... ALLERGIES: .....

ISSUE KEY M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

ING1919

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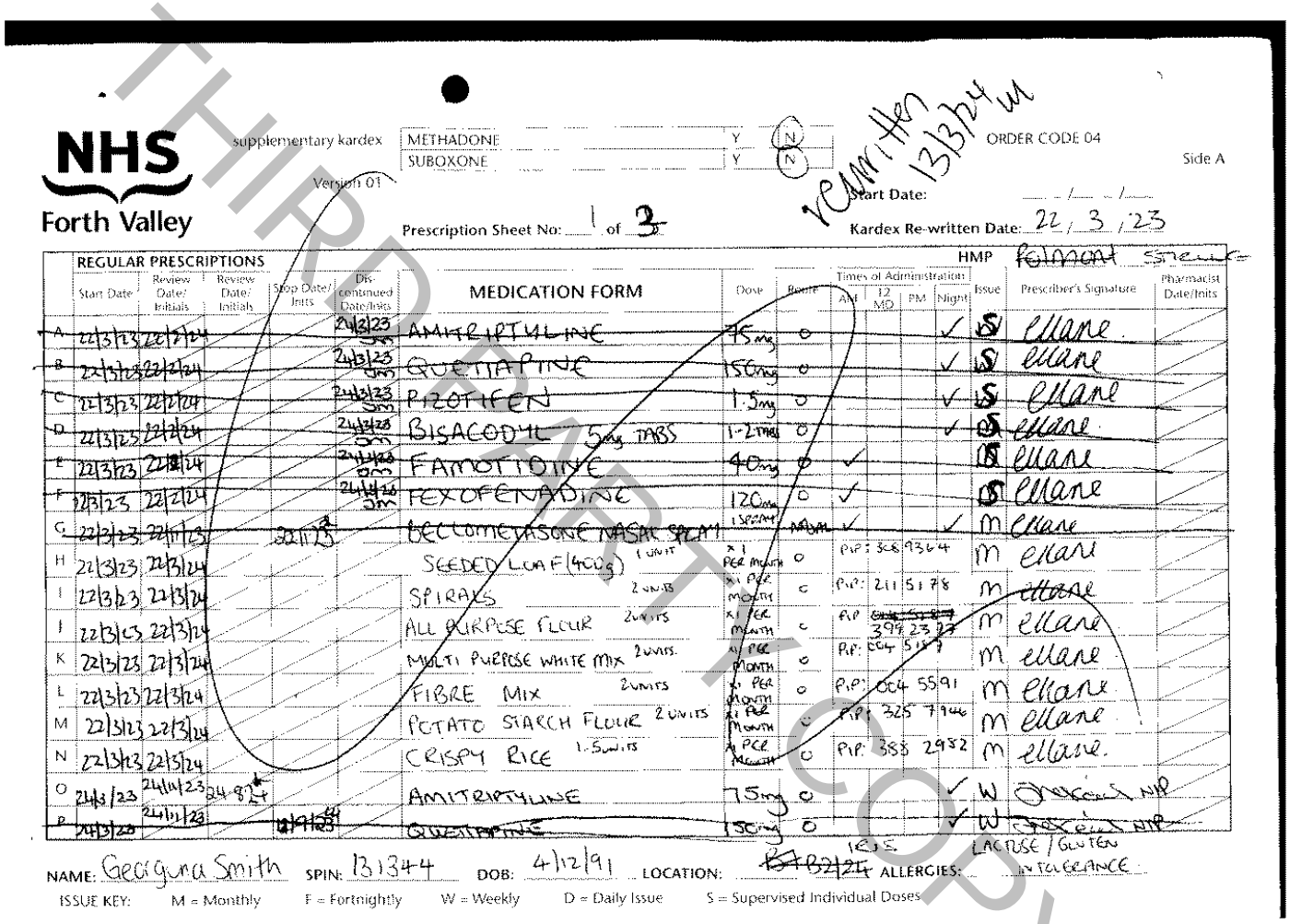

NHS Forth Valley

supplementary kardex

METHADONE	Y	N
SUBOXONE	Y	N

ORDER CODE 04

Side A

Version 01

Start Date: __/__/__

Prescription Sheet No: 1 of 3

Kardex Re-written Date: 22/3/23

HMP Polmont Stirling

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Initis	Discontinued Date/Initis	MEDICATION FORM	Dose	Route	Times of Administration: AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Initis
A	~~22/3/23~~	~~22/2/24~~			24/3/23 SM	AMITRIPTYLINE	75mg	O				✓	S	Ellane.	
B	~~22/3/23~~	~~22/2/24~~			24/3/23 SM	QUETIAPINE	150mg	O				✓	S	Ellane	
C	~~22/3/23~~	~~22/2/24~~			24/3/23 SM	PIZOTIFEN	1.5mg	O				✓	S	Ellane	
D	~~22/3/23~~	~~22/2/24~~			24/3/23 SM	BISACODYL 5mg TABS	1-2 TABS	O				✓	S	Ellane.	
E	~~22/3/23~~	~~22/2/24~~			24/3/23 SM	FAMOTIDINE	40mg	O	✓				S	Ellane	
F	~~22/3/23~~	~~22/2/24~~			24/3/23 SM	FEXOFENADINE	120mg 1 SPOON	O	✓				S	Ellane	
G	~~22/3/23~~	~~22/2/24~~		22/2/23		BECLOMETHASONE NASAL SPRAY		MDI	✓			✓	M	Ellane	
H	22/3/23	22/3/24				SEEDED LOAF (400g)	1 UNIT	x1 PER MONTH	O				M	PIP: 368 9364	Ellane
I	22/3/23	22/3/24				SPIRAXS	2 UNITS	x1 PER MONTH	O				M	PIP: 211 5178	Ellane
J	22/3/23	22/3/24				ALL PURPOSE FLOUR	2 UNITS	x1 PER MONTH	O				M	PIP: ~~036 5187~~ 399 23 27	Ellane
K	22/3/23	22/3/24				MULTI PURPOSE WHITE MIX	2 UNITS	x1 PER MONTH	O				M	PIP: 004 5197	Ellane
L	22/3/23	22/3/24				FIBRE MIX	2 UNITS	x1 PER MONTH	O				M	PIP: 004 5591	Ellane
M	22/3/23	22/3/24				POTATO STARCH FLOUR	2 UNITS	x1 PER MONTH	O				M	PIP: 325 7946	Ellane
N	22/3/23	22/3/24				CRISPY RICE	1.5 UNITS	x1 PER MONTH	O				M	PIP: 388 2982	Ellane.
O	24/3/23	24/4/23	24/8/24			AMITRIPTYLINE	75mg	O				✓	W		
P	24/3/23	24/11/23		~~24/11/23~~		QUETIAPINE	150mg	O				✓	W		

NAME: Georgina Smith SPIN: 131344 DOB: 4/12/91 LOCATION: ~~B2/24~~ ICS ALLERGIES: LACTOSE / GLUTEN INTOLERANCE

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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Page 1298 of 1734

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Version 01

ORDER CODE 06

Side B

Kardex Re-

Start Date: ___/___/___

Prescription Sheet No: 1 of 1

written Date: 22/3/23

"AS REQUIRED" PRESCRIPTION

HMP ~~GLENE~~ Polmont.

	Start Date	Review Date	Stop Date	Drugs (including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Date	Initls
1	22/3/23	22/3/24		KETOCONAZOLE SHAMPO	HAIR TOP		PRN 2-3x WEEKLY	M	Eliane				
2	22/3/23	22/3/24		CETRABEN CREAM 50g	HAIR TOP		PRN	M	Eliane				
3	~~22/3/23~~	~~22/3/24~~	~~28-3-24~~	~~PEPPERMINT OIL CAPS~~	~~200mg~~	~~O~~	~~UP TO TDS~~	~~S~~	~~Eliane~~				
4	~~22/3/23~~	~~22/3/24~~	~~22-3-24~~	~~ETODOLAC~~	~~600mg~~	~~O~~	~~OD PRN~~	~~S~~	~~Eliane~~				
5	~~22/3/23~~	~~22/3/24~~	~~28-3-24~~	~~DERMOL 500~~	~~HAIR TOP~~		~~PRN~~	~~M~~	~~Eliane~~				
6	28-3-23	28-3-24		PEPPERMINT OIL CAPS	200mg	O	UP TO TDS	M	[illegible]				
7	28-3-23	28-3-24		ETODOLAC	600mg	O	OD PRN	M	[illegible]				
8	3-5-23	3-5-24		QV WASH	500ml	1 APPL TOP	OD PRN	M	[illegible]				
9	~~22/9/23~~	~~22/9/24~~	~~25/9/23~~	~~LACTULOSE~~	~~10-15ml~~	~~O~~	~~UP TO 2x WEEKLY~~	~~M~~	~~[illegible]~~				
10	25/9/23	22/9/24		LACTULOSE	10-15ml	O	UP TO TWICE DAILY	M	Emogen				
11	21/6/23	21/5/24		PARACETAMOL	1g	O	MAX QDS	M	[illegible]				
12	20/2/24	20/2/25	27/2/24	ASPIRIN	300mg	O	AT ONSET OF HEADACHE	M	[illegible]				
13													
14													

Once Only Prescriptions

	Admin Date	Admin Time	DRUGS (including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1										
2										
3										

NAME: Georgina Smith SPIN: 131344 DOB: 4/12/91 LOCATION: B1 ALLERGIES: Lactose [redacted] Intolerance.

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised individual Doses

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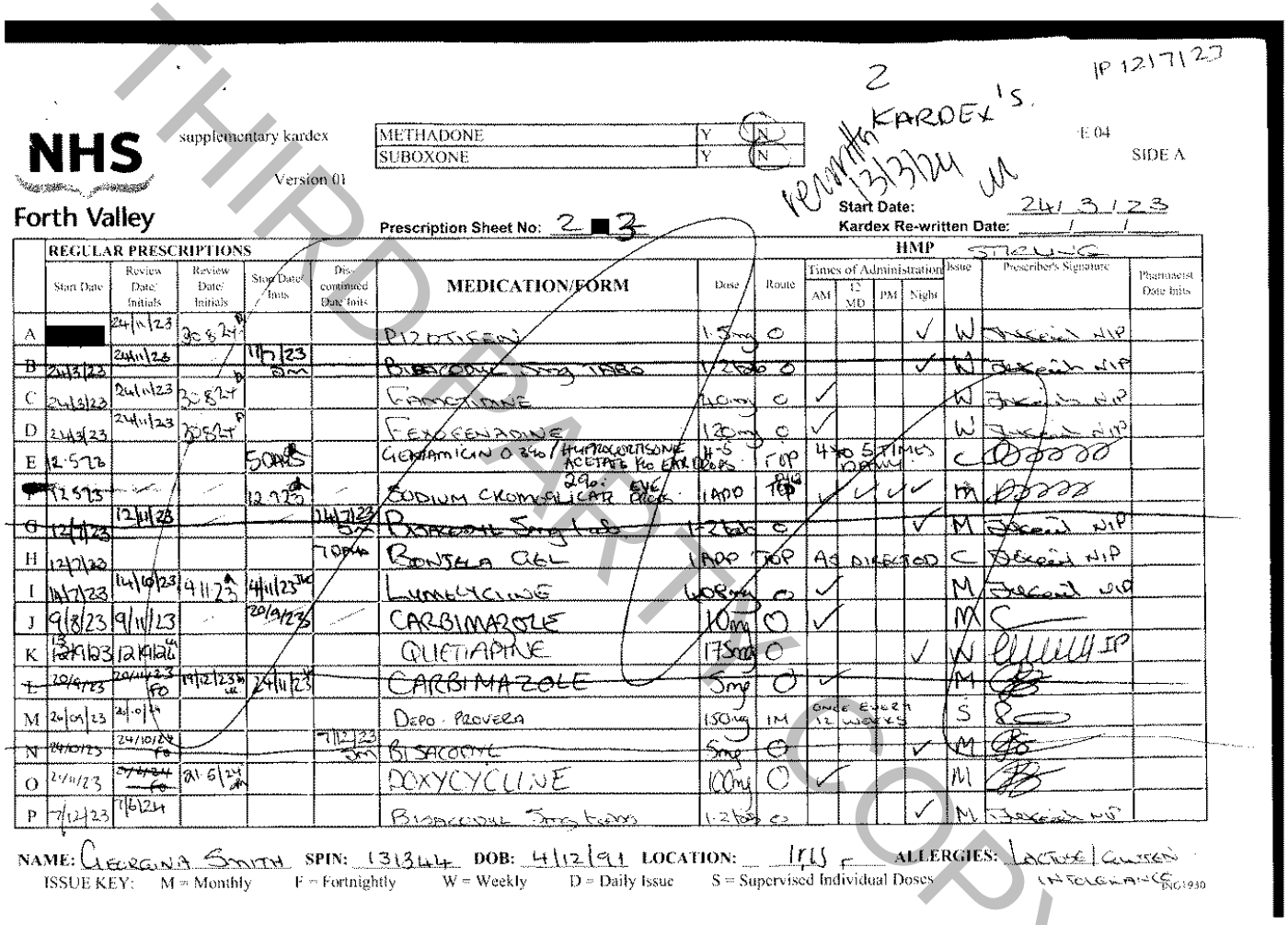

NHS
supplementary kardex
Version 01
Forth Valley

METHADONE	Y	N
SUBOXONE	Y	N

2 KARDEX'S. IP 12/7/23
re-written 13/3/24 ML
E 04
SIDE A
Start Date: 24/3/23
Kardex Re-written Date: / /
Prescription Sheet No: 2 3

	REGULAR PRESCRIPTIONS								Times of Administration				HMP		
	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Initis	Discontinued Date/Initis	MEDICATION/FORM	Dose	Route	AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date Initis
A	[redacted]	24/11/23	30/8/24			PIZOTIFEN	1.5mg	O				✓	W		
B	24/3/23	24/11/23		11/7/23 SM		BISOPROLOL 5mg TABS	1/2 tab	O				✓	M		
C	24/3/23	24/11/23	30/8/24			CANDESARTAN	16mg	O	✓				W		
D	24/3/23	24/11/23	30/8/24			FEXOFENADINE	120mg	O	✓				W		
E	12/5/23			5 DAYS		GENTAMICIN 0.3% / HYDROCORTISONE ACETATE 1% EAR DROPS	4-5 DROPS	TOP	4 TO 5 TIMES DAILY				C		
F	12/5/23			12/7/23		SODIUM CROMOGLICATE EYE DROPS	1 APP	TOP	✓	✓	✓	✓	M		
G	12/1/23	12/11/23			24/11/23 SM	PARACETAMOL 5mg/5ml	1-2 tabs	6				✓	M		
H	12/12/23				7/12/23 SM	BONJELA GEL	1 APP	TOP	AS DIRECTED				C		
I	14/7/23	14/10/23	4/11/23	4/11/23 SM		LUMECYCLINE	408mg	O	✓				M		
J	9/8/23	9/11/23		20/9/23		CARBIMAZOLE	10mg	O	✓				M	C	
K	13 12/1/23	12/4/24 LA				QUETIAPINE	175mg	O				✓	W	IP	
L	20/4/23	20/4/23 FO	14/12/23 LA	24/11/23 SM		CARBIMAZOLE	5mg	O	✓				M		
M	24/10/23	24/10/24				DEPO-PROVERA	150mg	IM	ONCE EVERY 12 WEEKS				S		
N	14/10/23	24/10/24 FO			7/12/23 SM	BISACODYL	5mg	O				✓	M		
O	24/11/23	24/11/24 FO	21/5/24			DOXYCYCLINE	100mg	O	✓				M		
P	7/12/23	7/6/24				BISACODYL 5mg tabs	1-3 tabs	O				✓	M		

NAME: GEORGINA SMITH SPIN: 131344 DOB: 4/12/91 LOCATION: IRIS F ALLERGIES: LACTOSE / GLUTEN
ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses
(ALTERNATIVES ING1930)

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NHS

Forth Valley

Version (1)

ORDER CODE 06

Side B

Prescription Sheet No: ____ of ____

Start Date: ____/____/____

Kardex Re-written Date: ____/____/____

HMP STIRLING

"AS REQUIRED" PRESCR	Start Date	Review Date	Stop Date	DRUGS (including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Date	Pharmacist Initials
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											

Once Only Prescriptions	Admin Date	Admin Time	DRUGS (including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Date	Pharmacist Initials
1									
2									
3									

NAME: [redacted] SPIN: 131344 DOB: [redacted] LOCATION: 1R18 ALLERGIES: [redacted]

ISSUE KEY: M – Monthly F – Fortnightly W – Weekly D = Daily Issue S – Supervised Individual Doses

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NHS Forth Valley

supplementary kardex

Version 01

METHADONE	Y	N
SUBOXONE	Y	N

ORDER CODE 04

Side A

Start Date: 20 / 2 / 24

Prescription Sheet No: 3 of 3

Kardex Re-written Date: ___ / ___ / ___

REGULAR PRESCRIPTIONS — HMP

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Initials	Discontinued Date/Initials	MEDICATION FORM	Dose	Route	Times of Administration AM	12 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Initials
A	20/2/24	20/3/24 FD				TACROLIMUS 0.03% OINTMENT	1APP	TOP OCYC	TWICE WEEKLY				M		
B															
C															
D															
E															
F															
G															
H															
I															
J															
K															
L															
M															
N															
O															
P															

VERBAL HCP 13/3/24 LM

NAME: Georginasmith SPIN: 131344 DOB: 4/12/91 LOCATION: Iris ALLERGIES: COELIAC ALLERGY LACTOSE INTOLLERANCE.

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

iGPR Report

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NHS Forth Valley

Version 01

ORDER CODE 06

Side B

Kardex Re-

Start Date: ../...../.....

Prescription Sheet No: .. of .....

written Date: ...../...../.....

HMP

"AS REQUIRED" PRESCRIPTION

	Start Date	Review Date	Stop Date	Drugs (including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Init.	Discontinued Pharmacist Date	Init.
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													
13													
14													

Once Only Prescriptions

	Admin Date	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescriber's Signature	Checked By	Time Given	Pharmacist Date	Init.
1										
2										
3										

NAME: ..... **SPIN:** ..... **DOB:** ..... **LOCATION:** ..... **ALLERGIES:** .....

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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IN POSSESSION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
C Smith	11-03-24	131344	IVTS	

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Amitriptyline	25mg	6-3-24	7				✓	2	2	0
Amitriptyline	50mg	6-3-24	7				✓	2	2	0
Diazepam	5mg	6-3-24	7	✓			✓	2	2	0
Ramipril	10mg	6-3-24	7	✓				2	2	0
Fexofenadine	120mg	6-3-24	7	✓				2	2	0

Time of check

PRISONERS RESPONSE TO ANY DISCREPANCY:

N/A

Staff Signature: _____ **Patient Signature:** _____

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....

And decided to: .....

O Continue your medication on this occasion; however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

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[redacted]

IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
Georgina Smith	1-03-24	131344	HMP Styal	

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Doxycycline	100mg	21-2-24	28	✓				9	9	0
Quetiapine	25mg	6-3-24	1			✓		2	2	0
Quetiapine	150mg	6-3-24				✓		2	2	0
Bisacodyl	5mg	21-2-24	56			✓x2		18	18	

Time of check

PRISONERS RESPONSE TO ANY DISCREPANCY.

N/A

Patient Signature:

Nurse Signature: [redacted]

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....

And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O To Reduce your medication
O Change your medication

GP Signature .....

Date .....

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[redacted]

IN POSSESION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
Georgina Smith	1-03-24	131344	JP15	

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Doxycycline	100mg	21-2-24	28	✓				9	9	0
Quetiapine	25mg	6-3-24	14			✓		2	2	0
Quetiapine	150mg	6-3-24	1			✓		2	2	0
Risperidone	5mg	21-2-24	56			✓x2		18	18	0

Time of check

PRISONERS RESPONSE TO ANY DISCREPANCY.

N/A

Nurse Signature: [redacted] **Patient Signature:**

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O To Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

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IN POSSESSION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION	D.O.B
C Smith	11-03-24	131344	IVTS	

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM	NOON	PM	NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Amitriptyline	25mg	6-3-24	7			✓		2	2	0
Amitriptyline	50mg	6-3-24	7			✓		2	2	0
Diazepam	1.5mg	6-3-24	7			✓		2	2	0
Famotidine	40mg 20mg	6-3-24	7	✓				2	2	0
Fexofenadine		6-3-24	7	✓						

Time of check

PRISONERS RESPONSE TO ANY DISCREPANCY:

N/A

Staff Signature: _____ **Patient Signature:** _____

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety of others the GP has reviewed your prescription for .....

And decided to: .....

O Continue your medication on this occasion; however further checks highlighting shortages/excess will result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

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NHS
Forth Valley
Microbiology

SURNAME: SMITH THE HEALTH CENTRE P.O. BOX 21616	FORENAME: GEORGINA
CONSULTANT: Cliodhna Lane	WARD: Cliodhna Lane 26157_ G.P.: HMP Stirling
CLINICAL DATA: BBV Screen	

Syphilis Screening Test	Negative
Hepatitis B surface antigen	Negative
Hepatitis C antibody screen	Not Reactive
HCV antibody not detected	
HIV antigen / antibody	Not Detected

Test performed by UKAS accredited medical laboratory No.10825.

EXAMINATION: Syphilis Serology	LAB No.: MS838440B	AUTHORISED: Auto authorised	
NATURE OF SPECIMEN: Venous blood	DATE COLLECTED: 19/03/2024	DATE RECEIVED: 21/03/2024	DATE REPORTED: 21/03/2024

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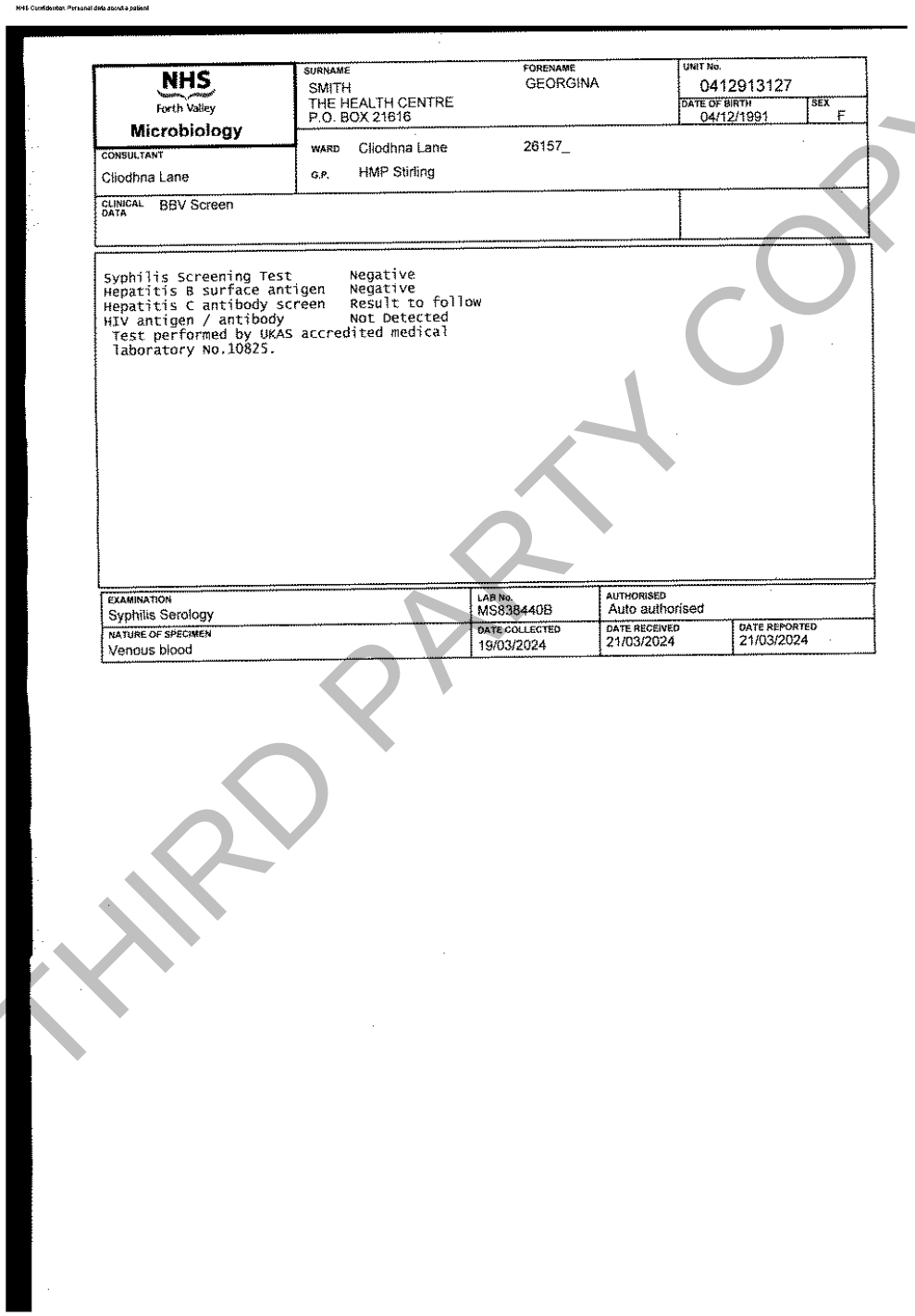

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NHS
Forth Valley
Microbiology

SURNAME: SMITH THE HEALTH CENTRE P.O. BOX 21616	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Cliodhna Lane	WARD: Cliodhna Lane	26157_	
	G.P.: HMP Stirling		
CLINICAL DATA: BBV Screen			

Syphilis Screening Test	Negative
Hepatitis B surface antigen	Negative
Hepatitis C antibody screen	Result to follow
HIV antigen / antibody	Not Detected

Test performed by UKAS accredited medical laboratory No.10825.

EXAMINATION: Syphilis Serology	LAB No.: MS838440B	AUTHORISED: Auto authorised	
NATURE OF SPECIMEN: Venous blood	DATE COLLECTED: 19/03/2024	DATE RECEIVED: 21/03/2024	DATE REPORTED: 21/03/2024

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NHS
Forth Valley
Microbiology

SURNAME: SMITH THE HEALTH CENTRE P.O. BOX 21616	FORENAME: GEORGINA
CONSULTANT: Cliodhna Lane	WARD: Cliodhna Lane 26157_ G.P.: HMP Stirling
CLINICAL DATA: BBV Screen	

Syphilis Screening Test	Negative
Hepatitis B surface antigen	Negative
Hepatitis C antibody screen	Not Reactive
HCV antibody not detected	
HIV antigen / antibody	Not Detected

Test performed by UKAS accredited medical laboratory No.10825.

EXAMINATION: Syphilis Serology	LAB No.: MS838440B	AUTHORISED: Auto authorised	
NATURE OF SPECIMEN: Venous blood	DATE COLLECTED: 19/03/2024	DATE RECEIVED: 21/03/2024	DATE REPORTED: 21/03/2024

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NHS
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Microbiology

SURNAME: SMITH THE HEALTH CENTRE P.O. BOX 21616	FORENAME: GEORGINA	UNIT No.: 0412913127	
		DATE OF BIRTH: 04/12/1991	SEX: F
CONSULTANT: Cliodhna Lane	WARD: Cliodhna Lane	26157_	
	G.P.: HMP Stirling		
CLINICAL DATA: BBV Screen			

Syphilis Screening Test	Negative
Hepatitis B surface antigen	Negative
Hepatitis C antibody screen	Result to follow
HIV antigen / antibody	Not Detected

Test performed by UKAS accredited medical laboratory No.10825.

EXAMINATION: Syphilis Serology	LAB No.: MS838440B	AUTHORISED: Auto authorised	
NATURE OF SPECIMEN: Venous blood	DATE COLLECTED: 19/03/2024	DATE RECEIVED: 21/03/2024	DATE REPORTED: 21/03/2024

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Patient Name Smith, Georgina Patient ID 0412913127 Accession NumberV203914989801

NHS Forth Valley

NHS Forth Valley Radiology Report

Patient Name:	Smith, Georgina	Exam Date:	10/04/2024
Patient ID:	0412913127	Consultant:	GP REQUESTOR
Patient Date of Birth:	04/12/1991	Report Date and Time:	11/04/2024 14:57:50
Patient Address	THE HEALTH CENTRE P.O. BOX 21616 STIRLING FK7 1DW	Referring Dept/Location:	[redacted] DR F, GP HMP STIRLING

Accession: V203914989801, Examination Date: 10/04/2024, Examination:
XR Hand LH:

Indication:
Clinical Details :
pain and rotation of left index finger, no heat or swelling
Provisional Diagnosis :
?erosions ?radiological sign of inflammatory arthritis

Findings:
Left hand.
-
No previous imaging for comparison.
-
Mild osteoarthritic changes affecting the left radio-carpal joint with evidence of articular sclerosis. Joint space appears relatively well preserved.
-
No other significant bone or joint abnormality seen to account for the patient's symptoms.

Preliminary Report By: Dawn Culbert Radiographer HCPC RA66996 at 11/04/2024 11:52:23.

Final Report By: [redacted] Mayers Reporting Radiographer HCPC RA78096 at 11/04/2024 14:57:50
Email Address: [redacted]**.mayers@nhs.scot.**

NHS Forth Valley

Page

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NHS Confidential: Personal data about a patient

Patient Name Smith, Georgina Patient ID 0412913127 Accession NumberV203914989801

NHS Forth Valley

NHS Forth Valley Radiology Report

Patient Name:	Smith, Georgina	Exam Date:	10/04/2024
Patient ID:	0412913127	Consultant:	GP REQUESTOR
Patient Date of Birth:	04/12/1991	Report Date and Time:	11/04/2024 14:57:50
Patient Address	THE HEALTH CENTRE P.O. BOX 21616 STIRLING FK7 1DW	Referring Dept/Location:	[redacted] DR F, GP HMP STIRLING

Accession: V203914989801, Examination Date: 10/04/2024, Examination:
XR Hand LH:

Indication:
Clinical Details :
pain and rotation of left index finger, no heat or swelling
Provisional Diagnosis :
?erosions ?radiological sign of inflammatory arthritis

Findings:
Left hand.
-
No previous imaging for comparison.
-
Mild osteoarthritic changes affecting the left radio-carpal joint with evidence of articular sclerosis. Joint space appears relatively well preserved.
-
No other significant bone or joint abnormality seen to account for the patient's symptoms.

Preliminary Report By: Dawn Culbert Radiographer HCPC RA66996 at 11/04/2024 11:52:23.

Final Report By: [redacted] Mayers Reporting Radiographer HCPC RA78096 at 11/04/2024 14:57:50
Email Address: [redacted]**mayers@nhs.scot.**

NHS Forth Valley

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[redacted]

IN POSSESSION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION
C. Smith	22-4-24	1313 4 4	HMS

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM NOON PM NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Amitriptyline	75mg	17/3	7	✓	2	2	0
Famotidine	40	17/4	7	✓ ✓	2	2	0
Fexofenadine Piotfteen	120 15	17/4	7	✓	2	2	0
Beclometasone Doxycycline	50mg 100mg	17/4	28 x 6	✓ x 4	46 23	46 23	0

Time of check [ ]

PRISONERS RESPONSE TO ANY DISCREPANCY:

Staff Signature: _____ Patient Signature: _____

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety [redacted] others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess [redacted] result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

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[redacted]

IN POSSESSION MEDICATION CHECK FORM

NAME	DATE	SPIN	LOCATION
C. Smith	22-4-24	1313 4 4	HMS

MEDICATION

Name of drug	Dose (Mg)	Issue Date	Quantity	Times of Administration AM NOON PM NIGHT	Should be remaining	Actual remaining	Shortfall/ Excess
Amitriptyline	75mg	17/3	7	✓	2	2	0
famotidine	40	17/4	7	✓ ✓	2	2	0
Paroxetine Pantoprazole	20 15	17/4	7	✓ ✓	2	2	0
Gabapentin Doxycycline	300 100	17/4	28	✓ ✓	46 23	46 23	0

Time of check [ ]

PRISONERS RESPONSE TO ANY DISCREPANCY:

Staff Signature: _____ Patient Signature: _____

**** Your in – possession medication check on ..... was not correct***

To ensure your safety and the safety [redacted] others the GP has reviewed your prescription for .....
And decided to: .....

O Continue your medication on this occasion: however further checks highlighting shortages/excess [redacted] result in your medication being discontinued
O To discontinue your medication
O Reduce your medication
O Change your medication

GP Signature _____ **Date** _____

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA | UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: THE HEALTH CENTRE, P.O. BOX 21616
CONSULTANT: Dr Craig Sayers | DOB: 04/12/1991 | SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: Dr [redacted] Sayers, HMP Stirling | SAMPLE TYPE OF LATEST SPECIMEN: Serum
CLINICAL DETAILS REFERRING TO LATEST REQUEST: TSH | COPY DETAILS:

DATE OF COLLECTION	LABORATORY NUMBER	TIME OF COLLECTION	PLASMA GLUCOSE fasting 3-6 mmol/l							

DATE OF COLLECTION	LABORATORY NUMBER	Total CO2 22-29 mmol/l	OSMOLALITY 275-295 mosm/kg H2O	SODIUM 133-146 mmol/l	POTASSIUM 3.5-5.3 mmol/l	CHLORIDE 95-108 mmol/l	UREA 2.5-7.8 mmol/l	CREATININE 40-130 µmol/l	eGFR ml/min/1.73m2 <60 = CKD stage 3,4 or 5
07/08/23	130592C			142	4.3	108	4.1	58	>59
21/02/24	817169T			141	4.3	104	3.9	75	>59

DATE OF COLLECTION	LABORATORY NUMBER	AMYLASE up to 100 iu/l 37°C	AST 0-45 iu/l 37°C	ALT 0-55 iu/l 37°C	BILIRUBIN up to 21 µmol/l	TOTAL PROTEIN 60-80 g/l	ALBUMIN 35-50 g/l	ALKALINE PHOSPHATASE 30 - 130) iu/l 37°C	γGT 0-40 (female) iu/l 37°C
07/08/23	130592C		21	21	8	72	46	77	
16/10/23	568106T		20	20	7	71	44	82	
21/02/24	817169T		21	18	9	73	46	71	

DATE OF COLLECTION	LABORATORY NUMBER	IRON 10-30 µmol/l	TIBC 45-72 µmol/l	CALCIUM 2.2-2.60 mmol/l	CORRECTED CALCIUM 2.2-2.60 mmol/l	PHOSPHATE 0.8-1.50 mmol/l (12-60 years)	MAGNESIUM 0.7-1.0 mmol/l	URATE 140-360 (female) µmol/l	CK(Total) 25-200 (female) iu/l 37°C

DATE OF COLLECTION	LABORATORY NUMBER	T.S.H. 0.35-5.00 mu/l	FREE T4 9.0-21.0 pmol/l	FREE T3 3.0-6.0 pmol/l	PSA <4.0 µg/L	TRIGLYCERIDE fasting <2.0 mmol/l	CHOLESTEROL mmol/l target levels are risk dependent	H.D.L. >1.2 (female) mmol/l	L.D.L. mmol/l target levels are risk dependent
30/11/23	639649W	1.43	12.6	3.5					
29/12/23	666873S	2.12	13.5	3.9					
25/01/24	764132C	1.03							
21/02/24	817169T	1.45							
26/06/24	373571D	1.30							

21/02/24	817169T	C-Reactive Prot.	<5 mg/L	(0 - 5)

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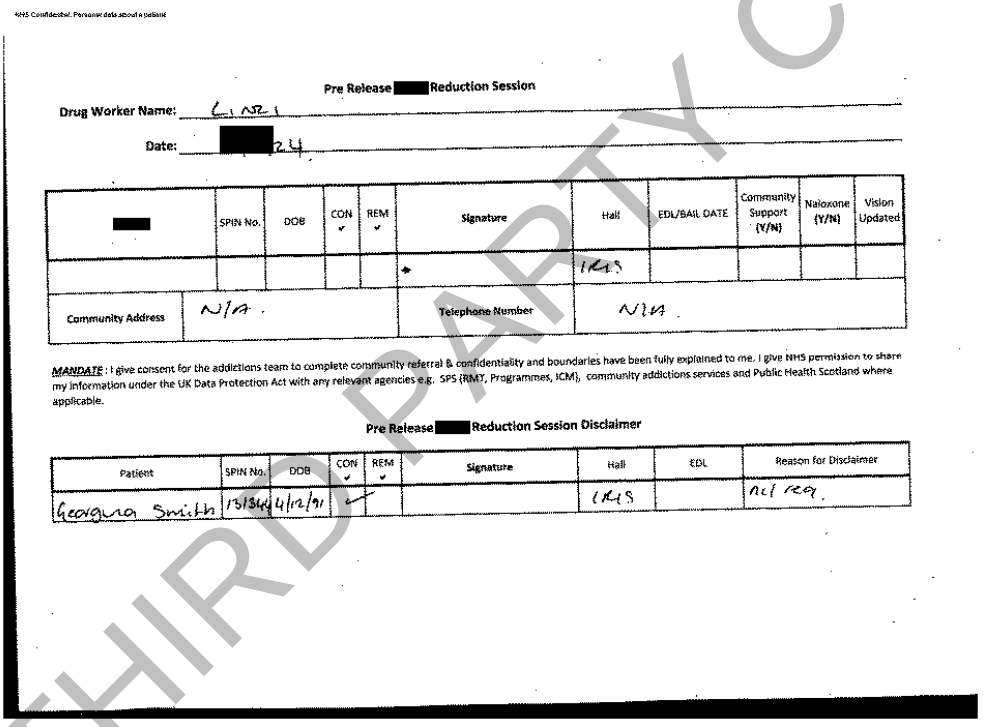

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Pre Release [redacted] Reduction Session

Drug Worker Name: [illegible]

Date: [redacted] 24

[redacted]	SPIN No.	DOB	CON ✓	REM ✓	Signature	Hall	EDL/BAIL DATE	Community Support (Y/N)	Naloxone (Y/N)	Vision Updated
						[illegible]				
Community Address	N/A.				**Telephone Number**	N/A.				

MANDATE: I give consent for the addictions team to complete community referral & confidentiality and boundaries have been fully explained to me. I give NHS permission to share my information under the UK Data Protection Act with any relevant agencies e.g. SPS (RMT, Programmes, ICM), community addictions services and Public Health Scotland where applicable.

Pre Release [redacted] Reduction Session Disclaimer

Patient	SPIN No.	DOB	CON ✓	REM ✓	Signature	Hall	EDL	Reason for Disclaimer
Georgina Smith	[illegible]	4/12/91	✓			[illegible]		Acc req.

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FORTH VALLEY ACUTE HOSPITALS NHS TRUST

CLINICAL CHEMISTRY

AREA LABORATORY SERVICE

PATIENT: SMITH,GEORGINA | UNIT NUMBER: 0412913127
PATIENT'S ADDRESS: THE HEALTH CENTRE, P.O. BOX 21616
CONSULTANT: Dr Craig Sayers | DOB: 04/12/1991 | SEX: Female
WARD AND HOSPITAL / GENERAL PRACTICE: Dr [redacted] Sayers, HMP Stirling | SAMPLE TYPE OF LATEST SPECIMEN: Serum
CLINICAL DETAILS REFERRING TO LATEST REQUEST: TSH | COPY DETAILS:

DATE OF COLLECTION	LABORATORY NUMBER	TIME OF COLLECTION	PLASMA GLUCOSE fasting 3-6 mmol/l

DATE OF COLLECTION	LABORATORY NUMBER	Total CO_2 22-29 mmol/l	OSMOLALITY 275-295 mosm/kg H_2O	SODIUM 133-146 mmol/l	POTASSIUM 3.5-5.3 mmol/l	CHLORIDE 95-108 mmol/l	UREA 2.5-7.8 mmol/l	CREATININE 40-130 µmol/l	eGFR ml/min/1.73m2 <60 = CKD stage 3,4 or 5
07/08/23	130592C			142	4.3	108	4.1	58	>59
21/02/24	817169T			141	4.3	104	3.9	75	>59

DATE OF COLLECTION	LABORATORY NUMBER	AMYLASE up to 100 iu/l 37°C	AST 0-45 iu/l 37°C	ALT 0-55 iu/l 37°C	BILIRUBIN up to 21 µmol/l	TOTAL PROTEIN 60-80 g/l	ALBUMIN 35-50 g/l	ALKALINE PHOSPHATASE 30 - 130) iu/l 37°C	γGT 0-40 (female) iu/l 37°C
07/08/23	130592C		21	21	8	72	46	77	
16/10/23	568106T		20	20	7	71	44	82	
21/02/24	817169T		21	18	9	73	46	71	

DATE OF COLLECTION	LABORATORY NUMBER	IRON 10-30 µmol/l	TIBC 45-72 µmol/l	CALCIUM 2.2-2.60 mmol/l	CORRECTED CALCIUM 2.2-2.60 mmol/l	PHOSPHATE 0.8-1.50 mmol/l (12-60 years)	MAGNESIUM 0.7-1.0 mmol/l	URATE 140-360 (female) µmol/l	CK(Total) 25-200 (female) iu/l 37°C

DATE OF COLLECTION	LABORATORY NUMBER	T.S.H. 0.35-5.00 mu/l	FREE T4 9.0-21.0 pmol/l	FREE T3 3.0-6.0 pmol/l	PSA <4.0 µg/L	TRIGLYCERIDE fasting <2.0 mmol/l	CHOLESTEROL mmol/l target levels are risk dependent	H.D.L. >1.2 (female) mmol/l	L.D.L. mmol/l target levels are risk dependent
30/11/23	639649W	1.43	12.6	3.5					
29/12/23	666873S	2.12	13.5	3.9					
25/01/24	764132C	1.03							
21/02/24	817169T	1.45							
26/06/24	373571D	1.30							

21/02/24	817169T	C-Reactive Prot.	<5	mg/L	(0 - 5)

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Pre Release [redacted] Reduction Session

Drug Worker Name: L. MC I

Date: [redacted] 2.4

[redacted]	SPIN No.	DOB	CON ✓	REM ✓	Signature	Hall	EDL/BAIL DATE	Community Support (Y/N)	Naloxone (Y/N)	Vision Updated
						IRHS				
Community Address	N/A.				**Telephone Number**	N/A.				

MANDATE : I give consent for the addictions team to complete community referral & confidentiality and boundaries have been fully explained to me. I give NHS permission to share my information under the UK Data Protection Act with any relevant agencies e.g. SPS (RMT, Programmes, ICM), community addictions services and Public Health Scotland where applicable.

Pre Release [redacted] Reduction Session Disclaimer

Patient	SPIN No.	DOB	CON ✓	REM ✓	Signature	Hall	EDL	Reason for Disclaimer
Georgina Smith	1313[illegible]	4/12/91	✓			IRHS		Acl req.

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NHC 1/8/24 12751

APPLICATION TO REGISTER PERMANENTLY WITH A GENERAL MEDICAL PRACTICE

NHS Scotland

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 *	04/12/91	Address *	21 meadowside Beith
Title *	Miss		
Surname *	Smith		
Forenames *	Georgina		
Previous surname *	mcmillan	Postcode *	KA15 1BU
		Telephone #	
Email address #	N/A	Mobile #	07831361242

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 *	ARDROS [redacted]	Country of birth *	Scotland
Registered district of birth *(Scotland only)*		Mother's maiden name	Smith

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 *	Hmp Stirling, Corntan Road, Stirling	Name and address of previous GP Practice in UK *	
Postcode *	FK95NU	Postcode *	

If you are from abroad:

Date you first came to [redacted] 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:

Enlistment date *		Service Number	
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 ☐

1

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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 NHSScotland 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: G. Smithe Date *: 19/07/24

Representative's name (if applicable):

Relationship to patient (if applicable):

6. FOR PRACTICE USE

GP reference number:

Practice code:

GP name: Dr. Dimitar Vasilev

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 Citizen Card

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 *: 24.07.24

7. FOR OFFICIAL USE ONLY

Input by:

Checked by:

Date:

Practice stamp

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Mistylaw Medical Practice: PATIENT QUESTIONNAIRE

This short questionnaire will give surgery staff some basic information about your communication support needs and ethnicity to support your health care. We would be grateful if you could complete one for each family member within/joining the practice.

Name Georgina Smith **DOB** 04/12/41

Do you need an interpreter or sign language support? ☐ Yes ☒ No

If you do need an interpreter what language do you speak?

Please state .....

What is your ethnic group?
Choose **ONE** section from A to E then tick **ONE** box which **best describes** your ethnic group or background

A White
- ☑ Scottish
- ☐ English
- ☐ Welsh
- ☐ Northern Irish
- ☐ British
- ☐ Irish
- ☐ Gypsy/Traveller
- ☐ Polish
- ☐ Any other white ethnic group, please write in .....

B Mixed or multiple ethnic groups
- ☐ Any mixed or multiple ethnic groups

C Asian, Asian Scottish or Asian British
- ☐ Pakistani, Pakistani Scottish or Pakistani British
- ☐ Indian, Indian Scottish or Indian British
- ☐ Bangladeshi, Bangladeshi Scottish or Bangladeshi British
- ☐ Chinese, Chinese Scottish or Chinese British
- ☐ Other, please write in.....

D African, Caribbean or Black
- ☐ African, African Scottish or African British
- ☐ Caribbean, Caribbean Scottish or Caribbean British
- ☐ Black, Black Scottish or Black British
- ☐ Other, please write in.....

E Other ethnic group
- ☐ Arab
- ☐ Other, please write in.....

If you do not wish to give this information, please tick here ☐

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NEW PATIENT INFORMATION CARD

Please complete both sides of this sheet

Date: 19/07/24

Title: Mr/Mrs/Miss/Ms/OTHER please state: miss

Surname: Smith

First Name(s): Georgina

Address: 21 meadowside, beith, KA15 1BU.

Home Telephone Number: 07831361242

Other Contact Number:

Email Address: N/A

Marital Status: Single **Date of Birth:** 04/12/1991

Sex: Female **Occupation:** non-employed.

NEXT OF KIN: Donna Bryce

TEL NO : 07514406465

RELATIONSHIP: Girlfriend

When attending your New Health Check appointment with the Practise Nurse, please bring a urine sample in a silver top bottle available from reception.

General History

Have you had any serious illnesses or operations, x-rays or similar tests and when?

What medication are you taking?

Have you any allergies to medicines or anything else?

How much tobacco or cigarettes do you smoke? 6 [redacted]

How much alcohol do you consume per week? None

Wine _____ **Beer** _____ **Spirits** _____

(one unit = 1 glass of wine or ½ pint of beer or small measure of spirits)

Do you exercise regularly? Yes.

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Number of hours? _____

Height _____ metres **Weight** _____ Kg

FAMILY HISTORY **Please tick appropriate boxes**

Which of your blood relations have suffered from the following:

Heart attack	☐		Cancer	☑	
Diabetes	☐		High Blood Pressure	☑	
Asthma	☑		Tuberculosis	☐	
Stroke	☐		Other serious illness	☑	

VACCINATIONS **Which vaccinations have you had and when? (eg Holiday Vaccinations)**

[redacted]

Do you look after someone or does someone look after you _____

FOR FEMALE PATIENTS ONLY

Have you had any [redacted] YES/NO give ages 12+13

Have you had a miscarriage? YES/NO date

Have you had a termination of pregnancy? YES/NO date

Have you had a hysterectomy? YES/NO date

Which method of contraception are you using at present? None

When was your last smear test?

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NHS FORTH VALLEY

DISCHARGE AND PRESCRIPTION

PLEASE WRITE FIRMLY USING A [redacted] PEN. Hospital PO BOX 21616

Dear Dr.

Your Patient Georgina Smith Age Hos. No. G.P. No.

Address

was in the care of Dr./Mr. in Ward

He /She was ADMITTED on and was DISCHARGED on

To his/her home/alternative address

Diagnosis, Treatment and Comments (including details of Appliances and Drug Sensitivities).

PMHx - ASTHMA, CHOLECYSTECTOMY, BREAST CYST, PREVIOUS SUBSTANCE MISUSE, ANXIETY & DEPRESSION, EATING DISORDER, PROBABLE THYROIDITIS (ON CARBIMAZOLE - NOW RESOLVED)

NKDA - BUT HAS LACTOSE / GLUTEN INTOLERANCE

Follow up arrangements ~~NIL~~ TO HAVE REPEAT TFTs AT 3 MONTHS INTERVALS FOR NEXT YEAR.

~~A Discharge letter will follow~~

Medical Office

The following medicine(s) is/are recommended:-

℞ MEDICINE, FORM OF PREPARATION AND STRENGTH	DOSE	DIRECTIONS FOR ADMINISTRATION	QUANTITY SUPPLIED	RECOMMENDED DURATION OF TREATMENT
DOXYCYCLINE UNTIL (June)	100mg	OD	28 DAYS	
AMITRIPTYLINE	75MG	NOCTE	28 DAYS	
PIZOTIFEN	1.5MG	[redacted]	28 DAYS	
FAMOTIDINE	40MG	MANE	28 [redacted]	
FEXOFENADINE	120MG	MANE	28 DAYS	
QUETIAPINE	175MG	NOCTE	28 DAYS	
BISACODYL	5MG-10MG	NOCTE	28 DAYS	
DEPO-PROVERA	150MG	EVERY 12 WEEKS	—	

Medical Officer Pharmacist Date Dispensed

DISTRIBUTION:
1st White - General Practitioner/Receiving Hospit
2nd Pink - Pharmacy
3rd Blue - District Nurse - via Patient
4th Yellow - Patient's Case Notes

Nurse check on discharge

STH 045 Where prescriptions contain **CONTROLLED DRUGS** the original will be retained by the pharmacist

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NHC 1/8/24 12751

APPLICATION TO REGISTER PERMANENTLY WITH A GENERAL MEDICAL PRACTICE
ALL FIELDS MARKED * ARE MANDATORY AND MUST BE COMPLETED AS FULLY AS POSSIBLE

NHS SCOTLAND

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 *	04/12/91	Address *	21 meadowside Beith
Title *	Miss		
Surname *	Smith		
Forenames *	Georgina		
Previous surname *	mcmillan	Postcode *	KA15 1BU
		Telephone #	
Email address #	N/A	Mobile #	07831361242

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Postcode *	FK95NU	Postcode *	

If you are from abroad:

Date you first came to [redacted] 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:

Enlistment date *		Service Number	
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 ☐

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Representative's name (if applicable):

Relationship to patient (if applicable):

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GP reference number:

Practice code:

GP name: Dr. Dimitar Vasilev

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 Citizen Card

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.

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Input by:

Checked by:

Date:

Practice stamp

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Mistylaw Medical Practice: PATIENT QUESTIONNAIRE

This short questionnaire will give surgery staff some basic information about your communication support needs and ethnicity to support your health care. We would be grateful if you could complete one for each family member within/joining the practice.

Name Georgina Smith **DOB** 04/12/91

Do you need an interpreter or sign language support? ☐Yes ☒No

If you do need an interpreter what language do you speak?

Please state .....

What is your ethnic group?
Choose **ONE** section from A to E then tick **ONE** box which **best describes** your ethnic group or background

A White
- ☑ Scottish
- ☐ English
- ☐ Welsh
- ☐ Northern Irish
- ☐ British
- ☐ Irish
- ☐ Gypsy/Traveller
- ☐ Polish
- ☐ Any other white ethnic group, please write in .....

B Mixed or multiple ethnic groups
- ☐ Any mixed or multiple ethnic groups

C Asian, Asian Scottish or Asian British
- ☐ Pakistani, Pakistani Scottish or Pakistani British
- ☐ Indian, Indian Scottish or Indian British
- ☐ Bangladeshi, Bangladeshi Scottish or Bangladeshi British
- ☐ Chinese, Chinese Scottish or Chinese British
- ☐ Other, please write in.....

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- ☐ Caribbean, Caribbean Scottish or Caribbean British
- ☐ Black, Black Scottish or Black British
- ☐ Other, please write in.....

E Other ethnic group
- ☐ Arab
- ☐ Other, please write in.....

If you do not wish to give this information, please tick here ☐

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NEW PATIENT INFORMATION CARD

Please complete both sides of this sheet

Date: 19/07/24

Title: Mr/Mrs/Miss/Ms/OTHER please state: miss

Surname: Smith

First Name(s): Georgina

Address: 21 meadowside, beith, KA15 1BU.

Home Telephone Number: 07831361242

Other Contact Number:

Email Address: N/A

Marital Status: Single **Date of Birth:** 04/12/1991

Sex: Female **Occupation:** non-employed.

NEXT OF KIN: Donna Bryce

TEL NO : 07514406465

RELATIONSHIP: Girlfriend

When attending your New Health Check appointment with the Practise Nurse, please bring a urine sample in a silver top bottle available from reception.

General History

Have you had any serious illnesses or operations, x-rays or similar tests and when?

What medication are you taking?

Have you any allergies to medicines or anything else?

How much tobacco or cigarettes do you smoke? 6 [redacted]

How much alcohol do you consume per week? None

Wine _____ **Beer** _____ **Spirits** _____

(one unit = 1 glass of wine or ½ pint of beer or small measure of spirits)

Do you exercise regularly? Yes.

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Number of hours? _____

Height _____ metres **Weight** _____ Kg

FAMILY HISTORY **Please tick appropriate boxes**

Which of your blood relations have suffered from the following:

Heart attack	☐		Cancer	☑	
Diabetes	☐		High Blood Pressure	☑	
Asthma	☑		Tuberculosis	☐	
Stroke	☐		Other serious illness	☑	

VACCINATIONS **Which vaccinations have you had and when? (eg Holiday Vaccinations)**

[redacted]

Do you look after someone or does someone look after you _____

FOR FEMALE PATIENTS ONLY

Have you had any [redacted] YES/NO give ages 12+13

Have you had a miscarriage? YES/NO date _____

Have you had a termination of pregnancy? YES/NO date _____

Have you had a hysterectomy? YES/NO date _____

Which method of contraception are you using at present? None

When was your last smear test? _____

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NHS Confidential: Personal data about a patient

NHS FORTH VALLEY

DISCHARGE AND PRESCRIPTION

PLEASE WRITE FIRMLY USING A [redacted] PEN.

Hospital PO BOX 21616

Dear Dr.

Your Patient Georgina Smith Age Hos. No. G.P. No.

Address

was in the care of Dr./Mr. in Ward

He /She was ADMITTED on and was DISCHARGED on

To his/her home/alternative address

Diagnosis, Treatment and Comments (including details of Appliances and Drug Sensitivities).

PMHx - ASTHMA, CHOLECYSTECTOMY, BREAST CYST, PREVIOUS SUBSTANCE MISUSE, ANXIETY & DEPRESSION, EATING DISORDER, PROBABLE THYROIDITIS (ON CARBIMAZOLE - NOW RESOLVED)

NKDA - BUT HAS LACTOSE / GLUTEN INTOLERANCE

Follow up arrangements ~~NIL~~ TO HAVE REPEAT TFTs AT 3 MONTHS INTERVALS FOR NEXT YEAR.

~~A Discharge letter will follow~~

Medical Office

The following medicine(s) is/are recommended:-

MEDICINE, FORM OF PREPARATION AND STRENGTH	DOSE	DIRECTIONS FOR ADMINISTRATION	QUANTITY SUPPLIED	RECOMMENDED DURATION OF TREATMENT
DOXYCYCLINE UNTIL (June)	100mg	OD	28 DAYS	
AMITRIPTYLINE	75MG	NOCTE	28 DAYS	
PIZOTIFEN	1.5MG	[redacted]	28 DAYS	
FAMOTIDINE	40MG	MANE	28 [redacted]	
FEXOFENADINE	120MG	MANE	28 DAYS	
QUETIAPINE	175MG	NOCTE	28 DAYS	
BISACODYL	5MG-10MG	NOCTE	28 DAYS	
DEPO-PROVERA	150MG	EVERY 12 WEEKS	—	

Medical Officer

Pharmacist

Date Dispensed

DISTRIBUTION:
1st White - General Practitioner/Receiving Hospit
2nd Pink - Pharmacy
3rd Blue - District Nurse - via Patient
4th Yellow - Patient's Case Notes

Nurse check on discharge

STH 045

Where prescriptions contain **CONTROLLED DRUGS** the original will be retained by the pharmacist

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All Consultations

Address and Telephone numbers

The Health Centre P.O. Box 21616 Stirling FK7 1DW
Telephone - home 0774733501

All Consultations

25/07/2024 Triage Ms [redacted] Rennie - No Data Recorded
24/07/2024 Triage Miss [redacted] No Data Recorded
24/07/2024 Triage Mrs [redacted]
24/07/2024 Ongoing review ANP L [redacted]
ANP Actions
Patient is libbed and asked to do prescription for all her PRN medications
She can buy these OTC or see her GP Mrs [redacted]
16/07/2024 Third Party Consultation Ms [redacted] Cowper
16/07/2024 Document Image Docman Attachment
16/07/2024 Administration Pre R[redacted]e [redacted] reduction disclaimer HMPYOI Stirling Addictions Ms [redacted] Cowper
15/07/2024 Surgery consultation Ms [redacted] Halliday
15/07/2024 Consultation Advised [redacted] AM that [redacted] had been granted parole on Friday 12.07.24.
GP10 completed for 28 days supply of medication by Dr Sayers to allow Georgie time to register with a GP practice.
Discharge Summary also provided.

Writer spoke with Georgie in Reception and explained what each envelope contained and wrote on th front of the envelope what envelope was for her chemist and what one was for her GP practice.

[redacted] appeared in bright spirits and was being supported home by Shine.

[redacted] Halliday
MH T/L
15/07/24
1150 Ms Cara Halliday
15/07/2024 Triage Ms Linzi [redacted]
15/07/2024 Drug addiction therapy Seen in residential area
Informed [redacted] has been granted parole and being liberated today
Pre release [redacted] reduction seession offered- same disclaimed. Naloxone training and supply offered- same disclaimed.
Advised [redacted] that we are organising liberation prescripion to get before release.Spoke about importance of registering with GP at earlies opportunity and about safely taking medication.

Linzi [redacted]
Lead Addiction Nurse 15/7/24 1000hrs Dr Gp Stirling
12/07/2024 Triage Mr [redacted] Mccallum
12/07/2024 Planned telephone contact Virtual Appointment 26/07/2024 @ 10:45
Physio FVRH
Physio`
Georgina Smith / 131344
04/12/1991
https://nhsattend.vc/mskphysio
Near Me
Mr [redacted] Mccall[redacted]
02/07/2024 Other Dr [redacted] Sayers
02/07/2024 TSH - thyroid stim. hormone = 1.3 MicroU/L Normal Normal TSH Dr [redacted] Sayers
01/07/2024 Third Party Consultation Mrs [redacted] Mcfadyen
01/07/2024 Document Image Docman Attachment
01/07/2024 Result Results HMPYOI Stirling Clinical Chemistry Mrs [redacted] Mcfadyen
27/06/2024 Triage Ms [redacted]
27/06/2024 Ongoing review ANP Action
ANP K [redacted]
sensitive scalp ketaconazole ineffective
therefore discontinued. trial dermax shampoo for 3 months
if not resolving to self refer. has full emolient therapy in place wash cream and ointment.
26/06/2024 Triage Miss [redacted]
26/06/2024 Seen by health care assistant
[redacted] in health centre. Bloods obtained for TSH. Sample sent to lab.

[redacted]
HCA
26/06/2024
11:32 Dr Gp Stirling
25/06/2024 Triage Ms Lorin Cummings
25/06/2024 Consultation
S: Seen in Nurse Clinic in the Healthcentre.
B: Scalp Issue.
A: [redacted] has a red and scaly patch at bottom of scalp which she states is really irritated and causing discomfort when touched. [redacted] states this is effecting her daily when brushing her hair etc. On examination this area was inflammed and bleeding slightly. [redacted] has bee prescribed different shampoos but feels these are innefective. She also has similar dry patches on her arms ?psoriasis.
R: Listed for ANP?GP review/actions.

SN PCT Lorin Cummings
25/6/24
18.31 Dr Gp Stirling
20/06/2024 Triage Ms [redacted] Mitchell - No Data Recorded
18/06/2024 Triage Ms Rachel [redacted]
18/06/2024 Recall on 10/09/2024 for Depo-provera injection given with Ms [redacted] Weir Status: Complete GN3573
EXP 08/2025
17/06/2024 Triage Ms [redacted] Binnie - No Data Recorded

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13/06/2024 Triage Ms Aileen [redacted]
13/06/2024 Drug addiction notification Self referral nurse AM - Mental health as per previous forms. Ms Aileen [redacted]
11/06/2024 Triage Ms [redacted] Binnie - No Data Recorded
31/05/2024 Triage Ms Viviene Mitchell
31/05/2024 Consultation S seen in clinic today
B reported sore throat
A pt reports issue self resolved, did not c/o other reported symptoms
R can rerefer if need be
s/n v [redacted]
31/5/24 14.52 Ms Viviene [redacted]
28/05/2024 Triage Ms Aileen [redacted]
28/05/2024 Self-referral Nurse KH - Pain & sore throat. Pain right side under breast. Metalic Taste in louth for 2 days & feeling lethardic - SHC - Would like a jag Ms Aileen [redacted]
21/05/2024 Clinic Dr J Green (Ad)
21/05/2024 Speech therapy Seen in Link centre.
Georgina reported that her parole hearing has been delayed again, for several weeks. She has bene told this is to do with when the parole board received information, but has not further details. Appears to be coping well, continuing to engage in work. Agreed no communication needs at this time but will keep on caseload in case communication support required at short notice.

Jan Green
Clinical Lead Speech and Language Therapy
21/5/24 4.10pm Dr J Green (Ad)
21/05/2024 Triage Ms [redacted] Rennie
21/05/2024 Drug addiction notification Would like smoking cessation Ms [redacted] Rennie
09/05/2024 Triage Miss [redacted] - No Data Recorded
09/05/2024 Triage Mrs [redacted]
09/05/2024 Ongoing review ANP L [redacted] and E.McBeth
Asked to review Doxy
Has acne - continued for 3 months - will require review if requires this after this time
08/05/2024 Triage Mrs [redacted] Toner - No Data Recorded
07/05/2024 Clinic Dr J Green (Ad)
07/05/2024 Speech therapy Case discussion with Sarah Simpson, Social Worker. Parole hearing has been set for 16/5. Accessible licence conditions being held by Social Work,. no changes required. To see Georgina 14/5 for review.

Jan Green
Clinical Lead Speech and Language Therapy
07/05/24 4.30pm Dr J Green (Ad)
02/05/2024 Triage Mrs [redacted]
02/05/2024 Ongoing review ANP L [redacted]
ANP Actions
Asked to review tacrolimus - continued for a further 4 weeks
01/05/2024 Third Party Consultation Ms Aileen [redacted]
01/05/2024 Document Image Docman Attachment
01/05/2024 Administration Clinical Letter HMPYOI Stirling in possesion medication check form Ms Aileen [redacted]
26/04/2024 Clinic Dr J Green (Ad)
26/04/2024 Speech therapy Phone call to Social Work.

[redacted] unavailable. Left message asking for [redacted] to contact me regarding Georgina's parole progress and any current needs regarding communication support.

Jan Green
Clinical Lead Speech and Language Therapy
26/4/24 2pm Dr J Green (Ad)
23/04/2024 Triage Ms [redacted] Meffin
23/04/2024 Mental health administration
CTM Attendees: Dr Swinson, NTL C Halliday, RMN N [redacted] RMN R [redacted] RMN D Doull, RMN N Meffin, RMN L Stevenson, Assistant [redacted] C Docherty, Forensic [redacted] E Vendelanotte, Speech and Language A McCandlish, Social Work K [redacted] OT C [redacted]

No role for MHT at present as Georgina declines any input or changes to medication. RMN N [redacted] to write a letter.
Ms [redacted] Meffin
23/04/2024 Triage Ms Hina Khizar
23/04/2024 Medication - risk monitoring Spot Checked 22.04.24

All count was correct. Dr Gp Stirling
23/04/2024 Triage Miss [redacted] - No Data Recorded
19/04/2024 Triage Ms [redacted] Murphy
19/04/2024 Ongoing review ANP Mail
ANP K [redacted]
X ray results
left hand
mild OA evidence atrticular sclerosis
joint space well preserved
no significant bone or joint abnormality.
Dr Gp Stirling
18/04/2024 Third Party Consultation Ms [redacted] Rennie
18/04/2024 Document Image Docman Attachment
18/04/2024 Result Results X-Ray Ms [redacted] Rennie
15/04/2024 Triage Ms [redacted] Rennie
15/04/2024 Self-referral Nurse triage - LMC - Swollen ear and sore Ms Jane Rennie
04/04/2024 Triage Ms Hina Khizar
04/04/2024 Ongoing review ANP pharmacy
ANP K [redacted] H Khizar
discussed change of gluten options kardex updated
01/04/2024 Triage Ms [redacted] Rennie

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01/04/2024 Self-referral [redacted] Health - KH - Cyst on vagina Ms [redacted] Rennie
30/03/2024 Triage Ms [redacted] - No Data Recorded
28/03/2024 Triage Ms [redacted]
Letter on: 28/03/2024 type: [redacted] SH Results
28/03/2024 Hepatitis C antibody test negative = Ms [redacted]
28/03/2024 HIV negative = Ms Rachel [redacted]
28/03/2024 Hepatitis B surface antigen negative = Ms [redacted]
28/03/2024 Syphilis titre test negative = Ms [redacted]
28/03/2024 Seen in [redacted] health clinic for self referral concerned regarding cyst to left labia majora on examination no lump felt. Also concerned about internal changes/growth, nil of note at this time but states awaiting hospital appointment for review of gentials however same cancelled by Geo- [redacted] on numerous occassions.
Await hosptial appointment.
Depo and BBV screen already provided by Nurse [redacted] on 19/3/24.
R [redacted] - [redacted] health nurse
28/3/24 09:25 Ms [redacted]
26/03/2024 Triage Ms Anne Mitchell
26/03/2024 Consultation
S. Seen in healthcentre
B. C/O Flaky Ears
A. Both ears appear healthy with no visible dry skin, skin intact, no signs of infection, no redness or swelling, Georgie states both ears have cleared up and no any other health issues today.
R. Advised to put referral in if any further issues or [redacted].

RGN [redacted] 10.51am 26/03/2024 Ms [redacted]
25/03/2024 Third Party Consultation Mrs [redacted] Mcfadyen
25/03/2024 Document Image Docman Attachment
25/03/2024 Result Results HMPYOI Stirling Microbiology Mrs [redacted] Mcfadyen
25/03/2024 Third Party Consultation Mrs [redacted] Mcfadyen
25/03/2024 Document Image Docman Attachment
25/03/2024 Result Results HMPYOI Stirling Microbiology Mrs [redacted] Mcfadyen
25/03/2024 Triage Mrs [redacted] Mcfadyen
25/03/2024 Next hospital appointment 10/04/2024 14:40
Stirling Community Hospital - Livilands Gate, Stirling FK8 2AU
X Ray Department
Georgina Smith / 131344
04/12/1991
Normal
Had Ultrasound 19/03 but wasn't given xray so this is still outstanding
Mrs [redacted] Mcfadyen
21/03/2024 Triage Mrs [redacted] Mckay
21/03/2024 Consulta [redacted] Georgina spoke with me whilst I was in [redacted] and was asking when she was going to be seen by mental health. Said the Irish Nurse was going to see her. On checking with MH nurse [redacted] MH nurse [redacted] was supposed to see yesterday, but no note on vision. It will be passed on to her tomorrow when she is on shift.

[redacted] McKay
PCT nurse
3:26pm Mrs [redacted] Mckay
20/03/2024 Third Party Consultation Mrs [redacted] Mcfadyen
20/03/2024 Document Image Docman Attachment
20/03/2024 Administration Administration HMPYOI Stirling In-Possesion Medication Check Mrs [redacted] Mcfadyen
20/03/2024 Third Party Consultation Mrs [redacted] Mcfadyen
20/03/2024 Document Image Docman Attachment
20/03/2024 Administration Administration HMPYOI Stirling In Possession Medication Check Mrs [redacted] Mcfadyen
19/03/2024 Triage Ms [redacted] Berry
19/03/2024 Self-referral Nurse AM - [redacted] health, depo jag and tested is possible. Bloods for thyriod as not been well. Ms Aileen Berry
19/03/2024 Triage Mrs [redacted] Mcfadyen
19/03/2024 Self-referral Self - BJ - PCT - Ears sore and flakey. Added to PCT waiting list, card sent to patient to advise. Mrs [redacted] Mcfadyen
19/03/2024 Triage Ms Viviene Mitchell
19/03/2024 Recall on 13/06/2024 for Depo-provera injection given with Ms Viviene Mitchell Status: Complete
19/03/2024 Depo-provera injection given First service recall due: Claim Expiry Date: Batch no: 382444743815 exp: 08/28
19/03/2024 Hepatitis C antibody level =
19/03/2024 Human immunodefic viral test =
19/03/2024 Hep B surface antigen test =
19/03/2024 Seen in [redacted] health clinic requesting BBV screen. Window periods discussed.
Also due Depo Provera given today happy with medication. Next due 13/06/2024.

14/03/2024 Third Party Consultation Ms Aileen [redacted]
14/03/2024 Document Image Docman Attachment
14/03/2024 Administration Kardex HMPYOI Stirling Pharmacy Ms Aileen [redacted]
13/03/2024 Third Party Consultation Ms Aileen Berry
13/03/2024 Document Image Docman Attachment
13/03/2024 Administration Clinical Letter HMPYOI Stirling Dermatology Appointment cancelled Ms Aileen [redacted]
13/03/2024 Triage Mrs [redacted]
13/03/2024 Ongoing review ANP L.Kane
Asked to rewrite kardex's as has 3x active
Same done - now has seperate kardex for gluten free products
12/03/2024 Triage Ms Hina Khizar
12/03/2024 Medication - risk monitoring Spot Checked 11.03.24

No discrepansies found. Dr Gp Stirling
08/03/2024 Clinic Dr J Green (Ad)

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08/03/2024 Speech therapy Seen for review.
Georgina consented to meeting.
Georgina reported that she is still awaiting a date for completion of her Parole Tribunal. She feels she is managing OK at present. She has found her accessible information provided via Social Work helpful.
Agreed to monitor short-term progress via contact with social work and to review again once dates for tribunal available.

Jan Green
Clinical Lead Speech and Language Therapy
08/03/24 15:00:00 Dr J Green (Ad)

08/03/2024 Third Party Consultation Ms Aileen [redacted]
08/03/2024 Document Image Docman Attachment
08/03/2024 Administration Clinical Letter HMPYOI Stirling In possesion medication check form Ms Aileen [redacted]

07/03/2024 Triage Ms Aileen [redacted]
07/03/2024 Failed encounter - hospital appointment 10:00 on 03/04/2024
Glasgow Royal Infirmary - 1st Floor (off Link Corridor) Walton Building, Castle Street, G4 0SF
Dermatology
Georgina Smith / 131344
04/12/1991
Normal Transport
Advised appointment cancelled by Hospital 07/03/2024, called Hospital 07/03/2024, another appointment will be posted out
Ms Aileen [redacted]
07/03/2024 Administration NOS Admin called hospital regarding caqncelled appointment for 03/04/2024.
Hospital advised another appointment will be sent out and the patient does not require to be re-referred. Ms Aileen [redacted]

07/03/2024 Triage Mrs [redacted]
07/03/2024 Ongoing review ANP L [redacted]
ANP Actions
I have been informed that the hospital has cancelled Georgie's appt as she has had 3x appointments offered and she is to be re-referred
I see that this is due to GeoAmey not attending to take [redacted]
As discussed prev with Dr Sayers we have to send the National letter in relation to this issue which was approved at the Oversight Board in April of this year and distributed to all NHS Board Chief Executives.

It clarifies the agreement that patients must not be removed from waiting lists, and should be reappointed, should they fail to attend secondary care appointments as a consequence of GeoAmey transport failures

[redacted] must not be penalized for GeoAmey not turning up as this is not within her control
I have emailed admin copy of the letter to send on- if you could send this on to the dermatology department to book a new appt Dr Gp Stirling

06/03/2024 Triage Miss Blyth [redacted]
06/03/2024 Consultation Call from dermatology regarding Georgina's missed appointments. They have cancelled this appointment due to [redacted] reaching her maximum missed appointments of 3 and she will need to re-referred to the service to be given another appointment.

Will list for GP/ANP actions for [redacted] to be re-referred

SN Blythe [redacted]
1015 Miss Blyth [redacted]

06/03/2024 Triage Miss Blyth [redacted] - No Data Recorded

04/03/2024 Triage Mr Sharon Mccallum
04/03/2024 Next hospital appointment 03/04/2024 @ 10:00
Glasgow Royal Infirmary - 1st Floor (off Link Corridor) [redacted] Building, Castle Street, G4 0SF
Dermatology
Georgina Smith / 131344
04/12/1991
Normal
Mr [redacted] Mccallum

04/03/2024 Third Party Consultation Ms Aileen [redacted]
04/03/2024 Document Image Docman Attachment
04/03/2024 Administration Clinical Letter HMPYOI Stirling Dermatology Outpatient appointment letter Ms Aileen [redacted]

04/03/2024 Triage Mr [redacted] Mccallum
04/03/2024 Next hospital appointment 19/03/2024 @ 10:00
Forth Valley Royal Hospital, Stirling Road, Larbert, FK5 4WR
X Ray Department - for XRay & US Scan
Georgina Smith / 131344
04/12/1991
Normal
Mr [redacted] Mccallum
04/03/2024 Appt cancelled by hospital 15:00
Stirling Community Hospital - Livilands Gate, Stirling FK8 2AU
X [redacted] Department
Georgina Smith / 131344
04/12/1991
Normal
Cancelled by Hospital - patient to have xray & uss on 19/03/2024 @ 10:00 FVRH
Mr [redacted] Mccallum

29/02/2024 Triage Ms Hina Khizar
29/02/2024 Medication - risk monitoring Spot Checked - All medication count noted to be correct. Patient is no longer precribed aspirin, hence, aspirin returned. Dr Gp Stirling

27/02/2024 Other Dr [redacted] Kildare
27/02/2024 Ongoing review MOA - Pharmacy querying script as [redacted] is written up for both Aspirin and Etodolac
Kardex reviewed - stop Aspirin and review if needed - can remain on Etodolac as was on this previously Dr [redacted] Kildare

27/02/2024 Administration Dr Fiona [redacted]
27/02/2024 Ongoing review GP [redacted] mail
Bloods inc ESR, CRP, RF and TSH all normal - reassuring from an inflammatory arthritis point of view.
XR hand awaited Dr [redacted]

26/02/2024 Triage Mr [redacted] Mccallum

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26/02/2024 Next hospital appointment 18/03/2024 @ 15:00
Stirling Community Hospital - Livilands Gate, Stirling FK8 2AU
X Ray Department
Georgina Smith / 131344
04/12/1991
Normal
Dr Gp Stirling

26/02/2024 Triage Mr Shs [redacted] Mccallum
26/02/2024 Failed encounter - hospital appointment 26/02/2024 @ 10:40
Glasgow Royal Infirmary - 1st Floor (off Link Corridor) [redacted] Building, Castle Street, G4 0SF
Dermatology
Georgina Smith / 131344
04/12/1991
Normal
GeoAmey Refused to take patient 26/02/2024 -- New Appointment will be sent out per phone call 26/02/2024
Mr [redacted] Mccallum

23/02/2024 Third Party Consultation Mr [redacted] Mccallum
23/02/2024 Document Image Docman Attachment
23/02/2024 Administration Haematology Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum

23/02/2024 Third Party Consultation Mr [redacted] Mccallum
23/02/2024 Document Image Docman Attachment
23/02/2024 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr Sharon Mccallum

22/02/2024 Triage Miss [redacted] Campbell
22/02/2024 Failed encounter
Listed for bloods however obtained yesterday. Duplicate appointment

Laura [redacted]
HCA
22/02/2024
10:06 Dr Gp Stirling

21/02/2024 Referral Letter Dr Fiona [redacted]
21/02/2024 SCI Referral Letter

21/02/2024 Administration Dr Fiona [redacted] - No Data Recorded

21/02/2024 Triage Ms [redacted] Kilpatrick
21/02/2024 Seen by health care assistant Seen Georgina in clinic for bloods, bloods obtained as per ordercomms and sent to labs.
[redacted] Kilpatrick
HCA
21/02/2024
11:55HRS Dr Gp Stirling

21/02/2024 Triage Ms Anne Mitchell
21/02/2024 Consultation
S. Seen in healthcentre
B. Cyst and rash on face
A. Georgina states she has been seen previously regarding this and has been prescribed steroid. Does not require further input at this time. Rash and cyst resolved
R. Advised to contact healthcare if any further issues.

RGN [redacted] 10.17am 21/02/2024 Ms Anne [redacted]

20/02/2024 Surgery consultation Dr [redacted]
20/02/2024 Ongoing review GP [redacted]
1) Eye - concerned about Graves disease - I showed her pictures of Grave's disease and we both agreed that she does not have this! Has had left sided upper eyelid periocular dermatitis. No stye or chalazion visible. For course of protopic twice weekly for one month in the first instance.
2) Headaches - in for review as previously described by myself 21/11/23 - unchanged since then. Headaches worse at the weekend when not working. Average 2x month. I wonder if it is worth trialing 900mg aspirin (no contraindications) at onset of headache and review again in 3 months.
3) Arthritis - finger pain and swelling with rotation of left index finger prominent. RF negative in 2018. Would be worth an XR of left hand ?erosions ?alignment and updated bloods inc CRP, ESR and RF.
4) Neck pain and swelling - ongoing since last year. Had XR which was unremarkable. Soft tissue swelling evident on examination, no skin changes. Would be worth asking physio to review in the first instance.

Plan:
- Protopic 0.33% twice weekly for one month
- Trial of aspirin 900mg stat at onset oh headache
RV headaches in 3m
- Bloods as above
- XR left hand
- Physio ref Dr [redacted]

19/02/2024 Triage Ms Aileen Berry
19/02/2024 Next hospital appointment
Monday 26/02/2024 at 10:40am
Glasgow Royal Infirmary - 1st Floor (off Link Corridor) [redacted] Building, Castle Street, G4 0SF
Dermatology
Georgina Smith / 131344
04/12/1991
Normal Transport Ms Aileen [redacted]
19/02/2024 Administration NOS Automated telephone reminder received regarding hospital appointment. No hospital appointment noted on database/vision, admin called Glasgow Royal Infirmary to obtain appointment details. Hospital confirmed 26/02/2024 at 10:40am. Ms Aileen [redacted]

16/02/2024 Triage Ms [redacted] - No Data Recorded

15/02/2024 Triage Ms [redacted]

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15/02/2024 Ongoing review ANP clinic
ANP K [redacted]
Skin review
? sty on eye
Due to make up unable to see eye properly.
No irritation in eye evident no redness noted.
Acne noted to T Zone, chin effected advised pus comes out.
This would be in line with acne vulgaris
Again wearing heavy makeup unable to see properly
On Doxycycline for acne extended course till may
Added in benzoyl peroxide BD PRN
Emolotient therapy for face and eye to use as a wash and moisturiser and added in qv cream
Use twice daily on left eyes area.
Relisted one week for further review of eye.
Worsening advice given.

15/02/2024 Triage Ms [redacted] - No Data Recorded
14/02/2024 Third Party Consultation Mr [redacted] Mccallum
14/02/2024 Document Image Docman Attachment
14/02/2024 Administration Kardex HMPYOI Stirling Pharmacy Mr [redacted] Mccallum
14/02/2024 Triage Ms Aileen [redacted]
14/02/2024 Self-referral [redacted] to check rash on eye and cysts on face. Ms Aileen [redacted]
13/02/2024 Triage Ms Jade Binnie
13/02/2024 Administration Already listed for bloods

[redacted] Binnie
HCA
13/02/2024 Dr Gp Stirling
13/02/2024 Triage Ms Karen [redacted]
13/02/2024 Ongoing review
ANP K [redacted] McBeth
Mail received.
Reviewed letter for Endrocrinology.
Impression: Thyroiditis.
They have advised that Georgina stop taking Carbimazole and montior bloods.
Once monthly for three months and then 3 monthly following this if there are no conerns.
Kardex please Dr Gp Stirling
09/02/2024 Third Party Consultation Mr Sharon Mccallum
09/02/2024 Document Image Docman Attachment
09/02/2024 Administration Clinical Letter Forth Valley Royal Hospital Endocrinology Clinic letter Mr [redacted] Mccallum
09/02/2024 Triage Ms [redacted] Murphy
09/02/2024 Ongoing review ANP action
ANP K murphy
unable to come today- relisted
08/02/2024 Third Party Consultation Mrs [redacted] Mcfadyen
08/02/2024 Consultation Seen in Iris.
Self referral for swelling at top of spine/bottom of neck.
Visible lump noted to the back of neck. States this has been an issue previously in 2022 - see note from 2022 started on etodolac for same.
States this is due to arthritis.
Not been an issue for almost 2 years but feels this has flared up again recently.
Reports +pain when moving her neck - causing issue as [redacted] the hairdressers.
Good range of movement, using regular analgesia with nil effect.
Listed for GP/ANP review.

PCT R WEIR
2020HRS Dr Gp Stirling
08/02/2024 Document Image Docman Attachment
08/02/2024 Consent given for blood test Administration Medical Marker Mrs [redacted] Mcfadyen
08/02/2024 Triage Ms [redacted] Weir - No Data Recorded
08/02/2024 Triage Ms [redacted] Binnie - No Data Recorded
07/02/2024 Third Party Consultation Mrs S[redacted]n Mcfadyen
07/02/2024 Document Image Docman Attachment
07/02/2024 Administration Administration HMPYOI Stirling In-Possesion Medication Check Mrs [redacted] Mcfadyen
01/02/2024 Triage Ms [redacted] No Data Recorded
31/01/2024 Triage Mrs [redacted]
31/01/2024 Ongoing [redacted]
Listed for ANP review
No entry as to why patient requires review?
can see on 25/1/24 self referred to nurse for painful finger
and was reviewed - on analgesia for arthritis of finger
Was seen by GP 2 weeks ago
No need to review again
If nurse have concerns around finger can list for review
Alternatively if pain is problematic her medications can be reviewed if required

31/01/2024 Triage Mrs [redacted]
31/01/2024 Ongoing [redacted]
Mail
Review of TSH- normal range
30/01/2024 Third Party Consultation Mr Sharon Mccallum
30/01/2024 Document Image Docman Attachment
30/01/2024 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
30/01/2024 Triage Ms [redacted] Waleh - No Data Recorded
25/01/2024 Triage Ms Aileen [redacted]
25/01/2024 Self-referral [redacted] AM - Sore finger, tipping to the side - arthritis? Ms Aileen [redacted]

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

25/01/2024 Triage Ms [redacted] Binnie
25/01/2024 Seen by health care assistant Seen Georgina in HC for TFT bloods succesffuly obtained and sent to labs

Complaining of sore finger - checked by PCT L Mccracken - this is arthiritis - on medication for same

Listed for TFT bloods 1 month
[redacted] Binnie
HCA
25/01/2024 Dr Gp Stirling
25/01/2024 Triage Ms [redacted] Binnie - No Data Recorded
23/01/2024 Clinic Dr J Green (Ad)
23/01/2024 Speech therapy Accessible licence conditions provided to [redacted] Discussed content and approaches to sharing information with Georgina.
Parole Hearing today. [redacted] will update on outcome and, if Georgina is libertaed, share contact details to allow advice to be given to Supervising Officer.

Jan Green
Clinical Lead Speech and Language Therapy
23/01/24 2.30pm Dr J Green (Ad)
23/01/2024 Triage Mrs [redacted] Mcfadyen
23/01/2024 Next hospital appointment Booking office confirmed another hospital appointment will be sent in due course Mrs [redacted] Mcfadyen
23/01/2024 Third Party Consultation Mrs [redacted] Mcfadyen
23/01/2024 Document Image Docman Attachment
23/01/2024 Administration Administration HMPYOI Stirling Results Mrs [redacted] Mcfadyen
23/01/2024 Other Dr Jack Kildare
23/01/2024 Ongoing review MOA Mail - see letter from Endocrine Specialist Nurse - has been discharged from follow up but needs TFTs every 3/12 for next year and referred back if deranged or develops symptoms of thyroid disease
I have communicated this on lib letter Dr [redacted] Kildare
23/01/2024 Ongoing review MOA - Lib letter completed Dr [redacted] Kildare
23/01/2024 Third Party Consultation Mr S [redacted] Mccallum
23/01/2024 Document Image Docman Attachment
23/01/2024 Administration Administration HMPYOI Stirling In-Possesion Medication Check Mr [redacted] Mccallum
23/01/2024 Triage Mrs [redacted] Mcfadyen
23/01/2024 Administration NOS Admin been unable to reach dermatology dept over the phone, have sent an email this morning to appointmentsbookingcentre@ggc.scot.nhs.uk to request a new appointment Mrs [redacted] Mcfadyen
22/01/2024 Triage Mrs [redacted] Mcfadyen
22/01/2024 Next hospital appointment Today's hospital appointment cancelled as Geoamy can't facilitate. Admin will rearrange appointment Mrs [redacted] Mcfadyen
16/01/2024 Surgery consultation Dr Jack Kildare
16/01/2024 Consultation GP Review
ATSP as [redacted] reporting some discomfort from left eye
No visual change
Feels sore on top lid
O/E
PERLA, eye movements normal and no conjuctival injection
Has small stye left upper lid
Advised on hot compresses and no need for abx treatment
Further review if not settling in 3/52 Dr [redacted] Kildare
16/01/2024 Triage Ms [redacted] Binnie
16/01/2024 Seen by health care assistant Attended Endocrinology telephone appt with Georgina
[redacted] complaining of sore eye - passed over to GP on shift at time
To provide georgie with letter from Dr [redacted] with plan going forward regarding bloods as possibilty of release on Tuesday - will put this in property
If feeling symptomatic to let gp know to get bloods

Jade Binnie
HCA
16/01/2024 Dr Gp Stirling
16/01/2024 Triage Ms [redacted] Binnie - No Data Recorded
15/01/2024 Triage Miss [redacted] - No Data Recorded
15/01/2024 Triage Ms [redacted] Binnie - No Data Recorded
15/01/2024 Triage Ms [redacted] - No Data Recorded
10/01/2024 Clinic Dr J Green (Ad)
10/01/2024 Speech therapy Case discussion with [redacted] Prison Based [redacted] advised that Ms Smith is being recommended for parole. Discussed risk that she may not comprehend licence conditions in current form. Agreed I will support development and sharing of accessible information on same.
Next steps: await information for development from [redacted] Simpson.

Jan Green
Clinical Lead Speech and Language Therapy
NHS Forth Valley Prisons Healthcare
10/01/24 12:00 Dr J Green (Ad)
08/01/2024 Third Party Consultation Mr Sharon Mccallum
08/01/2024 Document Image Docman Attachment
08/01/2024 Administration Administration HMPYOI Stirling In-Possesion Medication Check Mr [redacted] Mccallum
08/01/2024 Third Party Consultation Mr [redacted] Mccallum
08/01/2024 Document Image Docman Attachment
08/01/2024 Administration Administration HMPYOI Stirling In-Possesion Medication Check Mr Sharon Mccallum
07/01/2024 Triage Miss [redacted] - No Data Recorded
07/01/2024 Triage Miss La[redacted]n Campbell - No Data Recorded
05/01/2024 Triage Ms Laura Kilpatrick

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

05/01/2024 Letter encounter to patient Letter sent to Georgina to make aware of normal bloods as documented by GP [redacted] Kilpatrick
HCA
05/01/2024
15:08HRS Dr Gp Stirling
05/01/2024 Other Dr [redacted] Sayers
05/01/2024 Ongoing review MOA - TFTs normal Dr [redacted] Sayers
05/01/2024 Third Party Consultation Ms [redacted] Rennie
05/01/2024 Document Image Docman Attachment
05/01/2024 Result Results Clinical Chemistry Ms [redacted] Rennie
04/01/2024 Third Party Consultation Mrs S[redacted] Mcfadyen
04/01/2024 Document Image Docman Attachment
04/01/2024 Administration Administration HMPYOI Stirling Alcohol and Benzodiazepine Withdrawal Scale Mrs [redacted] Mcfadyen
04/01/2024 Third Party Consultation Mrs [redacted] Mcfadyen
04/01/2024 Document Image Docman Attachment
04/01/2024 Administration Administration HMPYOI Stirling Alcohol and Benzodiazepine Withdrawal Scale Mrs [redacted] Mcfadyen
02/01/2024 Triage Ms [redacted] Cleary - No Data Recorded
29/12/2023 Triage Ms [redacted] Binnie - No Data Recorded
29/12/2023 Triage Ms [redacted] Binnie
29/12/2023 Seen by [redacted]th care assistant Seen Georgina in HC for bloods TFT
Obtained and sent to labs

[redacted] Binnie
HCa
29/12/2023

Dr Gp Stirling
27/12/2023 Triage Ms A[redacted] - No Data Recorded
21/12/2023 Triage Mrs [redacted] Mcfadyen
21/12/2023 Self-referral RW - PCT - Sore chest, left breast and back. Mrs [redacted] Mcfadyen
21/12/2023 Triage Ms [redacted]
21/12/2023 Recall on 14/03/2024 for Depo-provera injection given with Ms Rachel [redacted] Status: Complete
21/12/2023 Depo-provera injection given First service recall due: 14/03/2024 Claim Expiry Date: Batch GN3573, EXP 08/2025.
Right buttock.
Keen to continue with prescription. No issues raised.
R [redacted] - [redacted] health nurse
21/12/2023 15:14 Ms [redacted]
20/12/2023 Triage Mr [redacted] Mccallum
20/12/2023 Next hospital appointment 22/01/2024 @ 13:45
Glasgow Royal Infirmary - 1st Floor (off Link Corridor) Walton Building, Castle Street, G4 0SF
Dermatology
Georgina Smith / 131344
04/12/1991
Normal
Mr [redacted] Mccallum
19/12/2023 Triage Mr Sharon Mccallum
19/12/2023 Planned telephone contact 16/01/2024 @ 13:30
Endocrinology, Nurse Led Review
Georgina Smith / 131344
04/12/1991
01324 711558
Telephone Clinic
Mr [redacted] Mccallum
18/12/2023 Triage Ms [redacted] Lawson - No Data Recorded
13/12/2023 Triage Ms Lyndsay Mccracken
13/12/2023 Seen by triage nurse S- Seen in health centre treatment room
B- Self referral recieved for health marker
A- Georgina attended clinic this morning advised it was not a health marker that was required it was ? about her depot injection. Advised this is due 19/12/23 and is currently listed for PCT to be administered. Georgina was asking when her flu vaccine would be administered also advised she was listed for clinic 15/12/23 for this. Georgina happy with this information.
R- Awaiting upcoming appointments

PCT S/N Lyndsay McCracken
15.50 Ms Lyndsay Mccracken
08/12/2023 Triage Mr [redacted] Mccallum
08/12/2023 Self-referral Sub referral 08/12/2023 Flu jag and depo jag.SP Dr Gp Stirling
08/12/2023 Triage Ms [redacted]
08/12/2023 Consultation Listed for PCT healthcare marker 13/12/23
PCT [redacted] 11:22 08/12/23 Dr Gp Stirling
07/12/2023 Triage Ms [redacted] Rennie
07/12/2023 Administration NOS Contacted 0800592087 to re-arrange appointment for dermatology. As this is a first appointment there will be another letter sent out to the health centre. Ms [redacted] Rennie
07/12/2023 Triage Ms [redacted] Rennie
07/12/2023 Appointment cancelled by patient 07/12/2023 - 11:15
Stobhill Hospital 133 Balornock Road Glasgow G21 3UW
Dermatology
Georgina Smith 131344
04/12/1991
Normal
Patient Refused to attend due to another appointment
Ms [redacted] Rennie
07/12/2023 Other Miss Jackie Mckeich
07/12/2023 Consultation ANP actions, request to increase bisacodyl back to original dose, rx bisacodyl 5mg 1-2 tabs at night. Miss [redacted] Mckeich
06/12/2023 Other Mrs Doreen Doull - No Data Recorded

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Georgina Smith 04/12/1991 662/91/440 [redacted] **Consultations**

06/12/2023 Triage Ms [redacted]
06/12/2023 Consultation S; Seen in treatment room
B; Toileting issues ;/ dizziness
A; Patient states she is on Bysacodyl, however had asked for this to be reduced, patient states she feels as if she needs this increased again as she is finding it difficult to have a proper bowel movement. Patient also states she is feeling dizzy, but thinks this is down to stress regarding her parole hearing on the 18/12/23 as none of her reports are ready. Full set of observations done as follows; Temp; 36.6, B/P; 113/74, Stats; 100% on air, P; 85.
R; ANP for increase of Bysacodyl. Dizzy spells advised to increase fluid and try to relax a bit more. Worsening advice given.
PCT; C. [redacted]
6/12/23
14.21 Dr Gp Stirling
05/12/2023 Triage Ms [redacted] Cleary
05/12/2023 Letter encounter to patient to inform her of recent blood result.
Michelle Cleary
HCA
05/12/2023
16.55 Ms [redacted] Cleary
05/12/2023 Administration Dr [redacted]
05/12/2023 Thyroiditis Dr [redacted]
05/12/2023 Ongoing review GP [redacted] - Mail
TFTs within notmal range.
For rpt in 1m - added to ordercomms and added to actionable column on vision.
For TFTs: begining of Jan and Feb. Then May, August and November. Dr [redacted]
04/12/2023 Third Party Consultation Ms [redacted]
04/12/2023 Document Image Docman Attachment
04/12/2023 Result [redacted] HMPYOI Stirling Clinical Chemistry Ms Aileen [redacted]
04/12/2023 Triage Ms [redacted] Cleary
04/12/2023 Seen by [redacted] care assistant
Georgina was in the clinic for bloods but these were taken on 30/11/2023
[redacted] Cleary
HCA
04/12/2023
11.41 Ms [redacted] Cleary
03/12/2023 Triage Ms [redacted] Binnie - No Data Recorded
01/12/2023 Triage Mrs [redacted] Mcfadyen
01/12/2023 Self-referral Nurse - AM - Toilet issues Mrs [redacted] Mcfadyen
30/11/2023 Triage Ms [redacted] Kilpatrick
30/11/2023 Seen by health care assistant
Seen in health centre with [redacted] K & [redacted] C. Bloods obtained as per OrderComms, sample sent to lab.

[redacted]
HCA
30/11/2023
11:43 Dr Gp Stirling
30/11/2023 Triage Mr [redacted] Mccallum
30/11/2023 Self-referral Review for Medical Marker - 2 duvets. Mr [redacted] Mccallum
28/11/2023 Triage Ms Michelle Cleary
28/11/2023 Letter encounter to patient to inform her of recent stop to Carbimazole.
Listed for bloods monthly for 3 mnths then quarterly for 1 year.
[redacted] Cleary
HCA
28/11/2023
15.35
Ms [redacted] Cleary
28/11/2023 Other Dr [redacted] Kildare
28/11/2023 Ongoing review MOA Mail - see letter from Dr [redacted] Endo Cons - suspects [redacted] has had a transient thyroiditis which has now settled - Carbimazole is to be stopped and to have TFTs taken monthly for 3/12 then every 4 months for a year Dr [redacted] Kildare
28/11/2023 Triage Ms [redacted] Rennie - No Data Recorded
27/11/2023 Third Party Consultation Ms Aileen [redacted]
27/11/2023 Document Image Docman Attachment
27/11/2023 Administration Clinical Letter HMPYOI Stirling Medical Marker Ms Aileen Berry
27/11/2023 Third Party Consultation Mr [redacted] Mccallum
27/11/2023 Document Image Docman Attachment
27/11/2023 Administration Clinical Letter Forth Valley Royal Hospital Endocrinology Endocrinology Clinic Letter Dr Kelly Mr [redacted] Mccallum
24/11/2023 Triage Mrs [redacted]
24/11/2023 Ongoing review ANP L.Kane
Review of endocrine letter
To STOP carbimazole
Monthly TFTs for 3 months then quaterly for 12 months
Will list TFTs Free T3 and T4 on order comms
Will stop carbimazole
23/11/2023 Third Party Consultation Mr [redacted] Mccallum
23/11/2023 Document Image Docman Attachment
23/11/2023 Administration Clinical Letter NHS Forth Valley Endocrinology Mr Sharon Mccallum
23/11/2023 Triage Mrs [redacted] Mcfadyen
23/11/2023 Administration NOS Admin called Endocrine nurse Jillian Tough's secretary [redacted] 22/11/2023 13:00 and left a message to phone back Health centre with an update as nothing on portal from appt 3/11 dr was querying med changes. (Vision down yesterday so couldn't update note at the time) Mrs [redacted] Mcfadyen
22/11/2023 Triage Ms [redacted] Binnie - No Data Recorded
22/11/2023 Clinic Dr J Green (Ad)

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22/11/2023 Speech therapy Met with case management officer Andy [redacted] to feedback on current invovlement and plans for informaitor sharing.
[redacted] positive about the utility of communication support informaiton.

Next steps: to share communication plan and dictionary w/c 27/11/23

Jan Green
Clinical Lead Speech and Language Therapy
22/11/23 3:10pm Dr J Green (Ad)
22/11/2023 Clinic Dr J Green (Ad)
22/11/2023 Speech therapy Seen on [redacted]

Shared and agreed communication profile - Georgie reporting feeling very positive about this.
[redacted] had completed requested work on communication dictionary. She had produced a detailed account, which is likely to prove useful in her management and support. Discussed and agreed content to by typed up for sharing in week commencing 27/11/23.

Next steps: Sharing of communication support materials, info to case management and risk management team.

[redacted] Green
Clinical Lead Speech and Language Therapy
22/11/23 3:00pm Dr J Green (Ad)
22/11/2023 Triage Mrs [redacted] Mcfadyen - No Data Recorded
21/11/2023 Triage Miss [redacted] Campbell
21/11/2023 Administration
As per GP actions - Listed for bloods W/C 04/12 and W/C 01/01/24. Already listed for depo-provera 19/12. Listed for review appt 3/12 for skin with ANP K [redacted]

Laura Campbell
HCA
21/11/2023
20:27 Dr Gp Stirling
21/11/2023 Triage Ms [redacted] Cleary - No Data Recorded
21/11/2023 Triage Mrs [redacted] Mcfadyen - No Data Recorded
21/11/2023 Surgery consultation Dr [redacted]
21/11/2023 Consultation GP [redacted]

1) Carbimazole. Was out at FVRH on 3/11 to see Dr [redacted] (endocrine). Georgina states that she was told to stop carbimazole after this appointment. Unfortunately no letter from this appointment on portal or docman. Plan had also been to check bloods at 1m (so begining of December) and a month after that. Therefore, I will request bloods for WB 4/12 for TFT and then a month after that. I will also ask admin to contact secretaries at FVRH to chase up formal letter from Dr [redacted]
2) Acne - worst around chin. Has tried 'all of the topical treatments' with no effect/reported allergy with BP. Started lymecycline earlier in the year (with good effect), prior to this had erythromycin with no effect. Worth trying 3m doxy then review with ANP K [redacted]
3) Headaches - right frontal pulsation. Can last up to four days then settle spontaneously. Under a lot of stress which she thinks aggravtes it. Triggered by bright lights and concentrating on drawing. Recent optician review ok. Headaches dont stop her doing anything. No vomitting, no diplopia, no visual change. Having 2 headaches/month. Sound like tension headaches, nil red flags. For simple analgesia PRN in first instance and review in 3m. If change/get worse in the interim then will send in a slip
Plan:
- Bloods WB 4/12 and begining Jan
- Admin to liaise with endocrine secretaries.
- 3m doxyxycline100mg OD then review with [redacted]
- Monitor headaches, simple analgesia. Dr [redacted]
17/11/2023 Triage Ms Michelle Cleary - No Data Recorded
17/11/2023 Triage Mr Sharon Mccallum
17/11/2023 Self-referral Self referral - skin clinic, would like to see doctor. Listed for GP/ANP by NW Mr [redacted] Mccallum
14/11/2023 Triage Ms [redacted] Kilpatrick
14/11/2023 Administration Action from Gp clinic, note [redacted] already chased letter up.
[redacted] Kilpatrick
HCA
14/11/2023
19:29HRS Dr Gp Stirling
14/11/2023 Triage Ms Aileen [redacted]
14/11/2023 Administration NOS Admin called Endocrinology to chase letter, letter has not been typed as yet. Admin requested letter to be emailed once issued. Ms Aileen [redacted]
14/11/2023 Triage Mrs [redacted]
14/11/2023 Ongoing review ANP L.Kane
Triaging appt - was listed for review of carbimazole as patient handed back her meds as she states consultant advised her to stop these.
She was reviewed 11 days [redacted] in clinic and no letter back as yet
Will ask admin to chase clinic letter from endocrinology as patient as she is now not taking these
14/11/2023 Third Party Consultation Ms Aileen [redacted]
14/11/2023 Document Image Docman Attachment
14/11/2023 Administration Administration HMPYOI Stirling In-Possession Medication Check Ms Aileen [redacted]
09/11/2023 Triage Ms [redacted]
09/11/2023 Ongoing review ANP pharmacy
ANP K [redacted]
pharmacy advised patient handed back in carbimazole.
not discontinued at this time i noted appt next week to discuss medication at patients request. await outcome
09/11/2023 Clinic Dr J Green (Ad)
09/11/2023 Speech therapy Seen on [redacted] accompanied by Speech and Language Therapy [redacted] McCandlish.

Georgina appeared in good spirits and consented to session. She had completed work on communication profile as requested. Discussed current needs, Georgina expressing concern that SPS may wish her to do further rehabilitation work when she feels she should focus on stability and preparation for liberation (due for liberation July 2025). Agreed with Georgina that a period of stable preparation, with support [redacted] transition, is important. Asked Georgina to complete a communication dictionary as she raised that staff often do not understand her needs and early warning signs of distress. Georgina reported that she has a RMT due relatively soon. Agreed I will seek to attend this, also will share progess with her social worker [redacted]

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Next steps: to see to complete communication profile and agree communication dictionary.

Jan Green
Clinical Lead Speech and Language Therapy
09/11/23 4pm
Dr J Green (Ad)

09/11/2023 Triage Ms Hina Khizar
09/11/2023 Medication - risk monitoring 08.11.23 Patient has returned 20 tablets of Carbimazole 5mg, stating the reason that the hospital has told her to stop taking the said medicine. Dr Gp Stirling

08/11/2023 Triage Ms [redacted]
08/11/2023 Consultation S. [redacted] in clinic
B. Wants to speak to gp regarding medications
A. Does not want to speak to nurse states has not seen gp since coming to stirling and would like an appt with gp to discuss medication. States previously on meds that worked for her and have been stopped. Would not elaborate as feels nurses cant help as we dont prescribe.

R. Booked in with GP for next week to r/v meds Ms [redacted] Mitchell

07/11/2023 Other Dr [redacted] Kildare
07/11/2023 Ongoing review ANP K.Murphy/GP J.Kildare
Actions
Dates up for review of Pizotifen, Famotidine - reviewed and continued
Beclometasone nasal spray stopped as was for seasonal allergic rhinitis Dr [redacted] Kildare

06/11/2023 Triage Ms Jill Ramsay
06/11/2023 Consultation Requested to be seen in halls, reports is being bullied in halls. Has reported this to officers who state they can no get involved. Feels this is impacting on her mental health, has put referal in for MHT, I will also raise this with them. States is able to keep self safe and has no thoughts of suicide, advised to approach staff if anything changes
PCT SN JRamsay 6/11/23 19.58 Dr Gp Stirling

06/11/2023 Triage Mrs [redacted] Mcfadyen
06/11/2023 Self-referral PCT - JR - To be seen regarding medication Mrs [redacted] Mcfadyen

06/11/2023 Triage Ms Jill Ramsay - No Data Recorded

03/11/2023 Third Party Consultation Mr Sharon Mccallum
03/11/2023 Document Image Docman Attachment
03/11/2023 Administration Kardex HMPYOI Stirling Pharmacy Mr [redacted] Mccallum

03/11/2023 Triage Ms Jill Ramsay - No Data Recorded

31/10/2023 Triage Mrs [redacted] Mcfadyen
31/10/2023 Next hospital appointment 07/12/2023 11:15
Stobhill Hospital 133 Balornock Road Glasgow G21 3UW
Dermatology
Georgina Smith 131344
04/12/1991
Normal Mrs Sian Mcfadyen

25/10/2023 Triage Ms [redacted] Binnie - No Data Recorded

24/10/2023 Triage Ms Eilish Mcbeth
24/10/2023 Ongoing review
ANP action
Dr [redacted] & E McBeth
Listed for bisacodly to be restarted as struggling with constipation - same prescribed. Ms Eilish Mcbeth

23/10/2023 Triage Ms [redacted] Binnie - No Data Recorded

20/10/2023 Triage Ms [redacted]
20/10/2023 Consultation Listed for GP to review Bisacodyl.
[redacted] stated she would like to have her medication reinstated as she is struggling to have regular bowel movements.

PCT [redacted]
20/10/23
17:03 Dr Gp Stirling

20/10/2023 Surgery consultation Ms [redacted] Halliday - No Data Recorded

20/10/2023 Third Party Consultation Ms Aileen Berry
20/10/2023 Document Image Docman Attachment
20/10/2023 Result Results HMP Cornton Vale Clinical Chemistry Ms Aileen [redacted]

19/10/2023 Triage Ms [redacted] Cleary - No Data Recorded

19/10/2023 Triage Ms [redacted] Rennie
19/10/2023 Administration NOS Contacted X-Ray on 01786 454508 to re-arange appointment. They have noted that appointments in Forth Valley Royal will contact the Health Centre with a new appointment. Ms [redacted] Rennie

19/10/2023 Triage Ms [redacted] Rennie
19/10/2023 Failed encounter - hospital appointment Geomay Refused transport - 20/10/2023 10:10
Stirling Health & Care Village, Livilands Gate, Stirling FK8 2AU
X-Ray Reception, GP & Minor Injuries Centre
Georgina Smith / 131344
04/12/1991
Normal Transport
Geomay refused.
Ms [redacted] Rennie

19/10/2023 Triage Ms [redacted] Rennie - No Data Recorded

19/10/2023 Triage Ms Kathleen Quail
19/10/2023 Drug addiction therapy
S - Met with [redacted] for Prison Healthcare Addictions Service one to one support. Verbal consent to proceed obtained.
B - Georgie is currently illicit drug free.
A - Appeared kempt, maintained eye contact, behaved in keeping with setting, communication was bright, reactive [redacted] rate and tone. Relapse prevention plan was discussed. [redacted] has been working through this and today we finalised the paper [redacted] her plan for release.
R - Relapse prevention paperwork e-mailed to Angela France and a copy given to [redacted]
See in 4/52
[redacted] Quail, Substance Use and Recovery Team HMPS
14.10
Ms Kathleen Quail

19/10/2023 Triage Mrs [redacted]

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19/10/2023 Ongoing review ANP [redacted]
Mail
Review of bloods
LFTs- normal

19/10/2023 Triage Ms [redacted] Binnie - No Data Recorded
19/10/2023 Third Party Consultation Ms Aileen [redacted]
19/10/2023 Document Image Docman Attachment
19/10/2023 Result Results HMP Cornton Vale Clinical Chemistry Ms Aileen [redacted]
19/10/2023 Triage Mrs [redacted]
19/10/2023 Ongoing review ANP L [redacted]
Pharmacy
Asked to review carbimazole
Last TFTs 3 days ago- Within normal range
Has endocrine appt 3/11/23
- continued
17/10/2023 Triage Ms Aileen Berry
17/10/2023 Next hospital appointment Stirling Health & Care Village at 10:10
US Abdominal Scan
X-Ray Reception, GP & Minor Injuries Centre
Normal Transport
Ms Aileen [redacted]
17/10/2023 Triage Ms Aileen [redacted]y - No Data Recorded
17/10/2023 Triage Ms Jill Ramsay - No Data Recorded
16/10/2023 Triage Miss Blyth [redacted]
16/10/2023 Consultation S- Seen in clinic
B- Allergic reacting to gluten
A- States she has had an allergic reaction to gluten food
Rash appeared on chest going up to underneath chin - appears to have settled by time of seeing [redacted]
Already prescribed fexofenadine
BP 123/80, HR 88, Sp02 99% temp 36.9, resp 16
R- Will discuss with Dr Kildare re-difflam spray
?gluten free diet marker

SN Blythe Johnston/SN [redacted] Weir
1510 Miss Blyth [redacted]
16/10/2023 Triage Ms [redacted] Kilpatrick
16/10/2023 Seen by health care assistant Seen Georgina in clinic for bloods LFT obtained and sent to labs.
[redacted] Kilpatrick
HCA
16/10/2023
Dr Gp Stirling
16/10/2023 Triage Ms [redacted] Kilpatrick - No Data Recorded
13/10/2023 Triage Mrs [redacted] Stewart
13/10/2023 Self-referral Nurse Triage - AM - Would like to discuss diet. Added to Nurse Triage Waiting list and card sent to patient to confirm. Mrs [redacted]
10/10/2023 Clinic Dr J Green (Ad)
10/10/2023 Speech therapy Seen on hall.
Discussed recent referral. Georgina reported that she has been trying to explain her communication needs to staff but feels that she is not listened to. Agreed to work jointly on a communication profile. Gave Georgina outlines guidance to allow her to prepare notes for next session on 24/10/23.

Jan Green
Clinical Lead Speech and Language Therapy
10/10/23 4.10pm Dr J Green (Ad)
10/10/2023 Other Dr [redacted] Kildare
10/10/2023 Ongoing review MOA - dates up for review of Lymecycline - been on since Feb 23 so stop date applied for beginning of Nov
Dr [redacted] Kildare
06/10/2023 Triage Ms [redacted] Weir
06/10/2023 Consultation S - Seen in healthcentre.
B - Self referral to discuss medication
A - Bisacodyl discontinued due to refusal. Due to an excess of medication transferred from polmont with [redacted] another monthly bag was not required at time of dispensing and therefore 'refused'. [redacted] states she has been on this medication long term and [redacted] requires to be prescribed it.
Georgie also requesting throat spray to be prescribed again due to irritation from eating foods with gluten.
R - Listed for GP/ANP review.

[redacted] Weir
PCT
06/10/2023
1450HRS Dr Gp Stirling
06/10/2023 Triage Ms Karen Murphy
06/10/2023 Ongoing review ANP action
ANP K Murphy
pharmacy review Lymecycline patient has been on since Feb extended for 1 months
if requested again will need listed for review appointment.
05/10/2023 Triage Mr [redacted] Mccallum
05/10/2023 Self-referral Discuss meds I have been took off. SP Mr Sharon Mccallum
05/10/2023 Triage Ms [redacted] Binnie - No Data Recorded
29/09/2023 Triage Mr [redacted] Mccallum

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29/09/2023 Next hospital appointment 03/11/2023 @ 9:30 AM
Forth Valley Royal Hospital, Stirling Road, Larbert, FK5 4WR
Endocrinology - Oupatients Area 3
Georgina Smith / 131344
04/12/1991
Normal

29/09/2023 Triage Ms Jade Binnie
29/09/2023 Weight: 69.7 kgs BMI: 25.6 O/E - weight Dr Gp Stirling
29/09/2023 Seen by health care assistant Seen in HC for weight

[redacted] Binnie
HCA
29/09/2023 Dr Gp Stirling
29/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
29/09/2023 Triage Ms Jill Ramsay - No Data Recorded
27/09/2023 Third Party Consultation Mr [redacted] Mccallum
27/09/2023 Document Image Docman Attachment
27/09/2023 Administration Clinical Letter HMP Cornton Vale In possesion medication check form Mr Sharon Mccallum
27/09/2023 Third Party Consultation Mr Sharon Mccallum
27/09/2023 Document Image Docman Attachment
27/09/2023 Administration Clinical Letter HMP Cornton Vale In possesion medication check form Mr [redacted] Mccallum
26/09/2023 Triage Ms Hina Khizar
26/09/2023 Medication - risk monitoring Spot Check 25.09.23
Noted to have excess of the following meds:
Amitryptyline 75mg (+1)
Pizotifen 1.5mg (+1)
Famotidine 40mg(+1)
Fexofenadine 120mg (+1)
Lymecycline 408mg (+3)
Quetiapine 175mg (+1) Dr Gp Stirling
26/09/2023 Triage Ms [redacted]
26/09/2023 Recall on 19/12/2023 for Depo-provera injection given with Ms [redacted] Status: Complete
26/09/2023 Depo-provera injection given First service recall due: 19/12/2023 Claim Expiry Date: 19/12/2023 08/2025
gn3573
673466293251 Ms [redacted]
25/09/2023 Triage Ms R [redacted] Weir - No Data Recorded
25/09/2023 Triage Ms Aileen [redacted]
25/09/2023 Self-referral Nurse KH - Depo jag. Ms Aileen [redacted]
25/09/2023 Triage Ms Keleigh Mournian - No Data Recorded
22/09/2023 Triage Ms Keleigh Mournian
22/09/2023 Consultation
T/C from Iris staff to state Georgina was in some discomfort with her stomach.
Attended [redacted] to advise Georgina that dr had px lactulose and pharmacy had ordered it.
Georgina happy with this, no other problems reported.

Keyleigh Hale
PCT
22.09.2023
19.18 Dr Gp Stirling
22/09/2023 Triage Ms Keleigh Mournian - No Data Recorded
22/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
22/09/2023 Other Dr [redacted] Kildare
22/09/2023 Ongoing review MOA - constipated - requesting treatment - try Lactulose 10-15ml up to BD and review if not settling Dr [redacted] Kildare
21/09/2023 Triage Ms [redacted]
21/09/2023 Consultation S: Seen in Iris at 19:30
B: Bloated stomach and discomfort.
A: Patient stated she has not moved her bowels in 5 days and feels bloated.
Palpated her stomach which was hard and asked if she had been drinking enough fluids and eating fibre. Patient adivsed that she has been drinking enough fluids but the food in the prison does not agree with her. This has been an ongoing issue ad is being reviewd.
R: Have listed for GP to prescribe a Laxative

PCT [redacted]
21/09/23
20:07 Dr Gp Stirling
21/09/2023 Triage Ms [redacted] - No Data Recorded
20/09/2023 Third Party Consultation Ms Aileen [redacted]
20/09/2023 Document Image Docman Attachment
20/09/2023 Administration Clinical Letter HMP Cornton Vale Endocrinology Ms Aileen [redacted]
20/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
20/09/2023 Triage Ms [redacted] Binnie
20/09/2023 Seen by [redacted] h care assistant Aready listed for TFT bloods 16/10

[redacted] Binnie
HCA
20/09/2023 Dr Gp Stirling
20/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
20/09/2023 Administration Dr [redacted]
20/09/2023 Ongoing review GP actions [redacted]
Carbimazole reduced to 5mg as per endocrine.
Follow up arranged as per yesterdays entry Dr [redacted]
19/09/2023 Other Miss [redacted] Mckeich

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19/09/2023 Consultation ANP mail, review bloods, see entry 14/9/23
TSH 1.79, T4 10.1, T3 3.0
All within range
Letter from endocrinology - to reduce carbimazole to 5mg daily, kardex requested - listed in actions then for repeat bloods in 4 weeks - listed in ordercomms. Miss [redacted] Mckelch
18/09/2023 Third Party Consultation Ms Aileen [redacted]
18/09/2023 Document Image Docman Attachment
18/09/2023 Administration Clinical Letter HMP Cornton Vale Endocrinology Ms Aileen [redacted]
18/09/2023 Third Party Consultation Ms Aileen Berry
18/09/2023 Document Image Docman Attachment
18/09/2023 Result Results HMP Cornton Vale Clinical Chemistry Ms Aileen Berry
14/09/2023 Triage Ms [redacted] Weir
14/09/2023 Seen by health care assistant Seen in healthcentre for virtual appt.
Computer sound not working - Changed to telephone consultation.
Nurse Gillian Tough from endocrinology FVRH requested TFT bloods - obtained with consent and sent to labs.
Follow up appt in 6/52 with endocrinology consultant r.e treatment plan.
Weight obtained - 70.2kg.

HCA R WEIR
14/09/2023
1114HRS
Dr Gp Stirling
14/09/2023 Weight: 70.2 kgs BMI: 25.7 O/E - weight Dr Gp Stirling
08/09/2023 Surgery consultation Ms [redacted] Halliday
08/09/2023 Consultation Prescription of Quetiapine increased from 150mg PM to 175mg PM as per request from Dr [redacted] Swinson.

Prescription increase to take effect from Tuesday12th to allow for same to be delivered by pharmacy. 150mg PM prescription to continue until Monday 11th and then discontinue.

[redacted] Halliday
MH T/L
08/09/23
1142 Ms Cara Halliday
06/09/2023 Triage Ms Hina Khizar - No Data Recorded
05/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
05/09/2023 Third Party Consultation Mr Sharon Mccallum
05/09/2023 Document Image Docman Attachment
05/09/2023 Administration Administration HMP Cornton Vale Medical Marker Mr [redacted] Mccallum
05/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
05/09/2023 Other Dr [redacted] Kildare
05/09/2023 Ongoing review GP J.Kildare/Chronic Disease Nurse E.McBeth
Actions
Requesting medical marker again for lactose free products - see entry from Dieticians 07/12/22 on Clinical Portal - she is not dairy intolerant but they are in agreement for a marker to be given for lactose free products
Medical marker completed Dr [redacted] Kildare
04/09/2023 Triage Mrs Jane Watt
04/09/2023 Mental health review Request for increase in medication
I had met with Georgie 2 weeks ago in the hall. She told me that since moving back to Stirling the smaller household was causing her to be more anxious. She reports that the dynamics of the personalities within the unit makes her more withdrawn as she fears she will react inappropriately if "pushed". She finds herself struggling to sleep and "worries all the time".
[redacted] has not required any input from MHT for over 1 year, also not had a medication review/change in this time. She believes a small increase in her Quetiapine will benefit her at this time. For discussion at CTM.
[redacted] Watt
SSN MH Dr Gp Stirling
01/09/2023 Triage Mr [redacted] Mccallum
01/09/2023 Self-referral Self referral - Well women - not nurse clinic DF Mr [redacted] Mccallum
30/08/2023 Triage Ms Su[redacted] Pa[redacted]
30/08/2023 Administration Patient cancelled appointment.

PCT [redacted]
30/08/23
10:57 Dr Gp Stirling
25/08/2023 Triage Mrs [redacted] Watt
25/08/2023 Mental health review Request for medication increase
I met with [redacted] in Iris this evening. She reports that since coming back to Stirling she has had problems getting to sleep. The environment is causing her more distress. Believes an increase in her Quetiapine would be helpful.
I advised her that I would ask for this to be reviewed for increase at CTM.
[redacted] Watt
SSN MH Dr Gp Stirling
25/08/2023 Triage Ms [redacted] Binnie - No Data Recorded
23/08/2023 Triage Ms Laura Kilpatrick - No Data Recorded
23/08/2023 Triage Ms [redacted] Binnie
23/08/2023 Administration Actions from ANP
Listed for weight in 2 months.

[redacted] Binnie
HCA
23/08/2023 Dr Gp Stirling
23/08/2023 Administration Dr [redacted]
23/08/2023 Ongoing review GP [redacted]
Request to determine if needs to continue with weekly weights - from looking at the notes I dont think this is required. For one off weight in 2m and look at trent then.

Also 'Requesting Lactose Free Diet but not sure if she has been diagnosed as lactose intollerant.'. Not diagnosed. Can simply avoid items on the menu that she wishes to. Dr [redacted]

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21/08/2023 Triage Ms [redacted] Ford - No Data Recorded
21/08/2023 Triage Ms [redacted] Cleary
21/08/2023 Weight: 69.6 kgs BMI: 25.5 O/E - weight Ms [redacted] Cleary
17/08/2023 Triage Ms [redacted] patrick
17/08/2023 Weight: 69.1 kgs BMI: 25.3 O/E - weight Dr Gp Stirling
15/08/2023 Triage Ms [redacted] e Binnie - No Data Recorded
14/08/2023 Triage Ms [redacted] Kilpatrick
14/08/2023 Seen by health care assistant Seen in clinic for weight, as documented below

[redacted] Kilpatrick
HCA
14/08/2023
10:23HRS Dr Gp Stirling
14/08/2023 Weight: 69.5 kgs BMI: 25.5 O/E - weight Dr Gp Stirling
10/08/2023 Triage Ms [redacted] Cleary - No Data Recorded
10/08/2023 Other Dr Craig Savers
10/08/2023 Ongoing review Lab results noted - already initiated on Carbimazole as per endocrine request Dr [redacted] Sayers
10/08/2023 Triage Ms Lyndsay Mccracken
10/08/2023 Weight: 69.3 kgs BMI: 25.4 O/E - weight Ms Lyndsay Mccracken
09/08/2023 Triage Ms [redacted] le Cleary - No Data Recorded
09/08/2023 Third Party Consultation Mr [redacted] Mccallum
09/08/2023 Document Image Docman Attachment
09/08/2023 Administration Haematology Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
09/08/2023 Third Party Consultation Mr [redacted] Mccallum
09/08/2023 Document Image Docman Attachment
09/08/2023 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
08/08/2023 Third Party Consultation Mrs [redacted] Taylor
08/08/2023 Document Image Docman Attachment
08/08/2023 Administration Clinical Letter NHS Forth Valley Endocrinology Mrs [redacted] Taylor
08/08/2023 Other Dr [redacted] Kildare
08/08/2023 Ongoing [redacted]iew MOA Mail - see response from Endocrine - to start Carbimazole 10mg OD and await appt from Endocrine for review Dr [redacted] Kildare
07/08/2023 Third Party Consultation Mr [redacted] Mccallum
07/08/2023 Document Image Docman Attachment
07/08/2023 Administration Clinical Letter Forth Valley Royal Hospital Endocrinology Mr [redacted] Mccallum
07/08/2023 Triage Ms [redacted] Johnston - No Data Recorded
07/08/2023 Third Party Consultation Mr [redacted] Mccallum
07/08/2023 Document Image Docman Attachment
07/08/2023 Administ[redacted] Administration HMP Cornton Vale Glasses Reciept Mr [redacted] Mccallum
07/08/2023 Triage Ms [redacted] Rennie
07/08/2023 Planned [redacted]phone contact Video link - 14/09/2023 10:30
Endocrinology
Georgina Smith/131344
04/12/1991
01324 566249
https://nhsattend.vc/fv-endocrine
Ms [redacted] Rennie
07/08/2023 Triage Ms [redacted] Cleary
07/08/2023 Weight: 69.6 kgs BMI: 25.5 O/E - weight Ms [redacted] Cleary
07/08/2023 [redacted] by health care assistant
Repeat bloods taken as requested U&E LFT,TSH,EGFR,T3,T4
[redacted] Cleary
HCA
11.40
07/08/2023
Ms [redacted] Cleary
04/08/2023 Triage Ms Ailsa Russell - No Data Recorded
04/08/2023 Triage Mrs L[redacted]
04/08/2023 Ongoing review ANP L[redacted]
Discussed with pharmacy staff regarding gluten free foods
Wishes some changes
I have asked pharmacy to give Georgina the list and ask her to pick her 16 units and I will re-write her a kardex with GF foods only on this
03/08/2023 Triage Ms Laura Kilpatrick
03/08/2023 Weight: 70.2 kgs BMI: 25.7 O/E - weight Dr Gp Stirling
01/08/2023 Referral Letter Dr Jack Kildare
01/08/2023 SCI Referral Letter
01/08/2023 Other Dr [redacted] Kildare
01/08/2023 Ongoing review MOA - bloods reviewed - anti-TSH antibodies negative - USS neck requested and referral sent to Endocrine for advice Dr [redacted] Kildare
31/07/2023 Triage Ms Jill Ramsay
31/07/2023 Weight: 71 kgs BMI: 26 O/E - weight Dr Gp Stirling
31/07/2023 Triage Ms Keleigh Mournian
31/07/2023 Consultation
Asked by SSN J Ramsay to check review of bloods.
Note blood results below ?review.
Listed for repeat bloods on 07/08 as instructed by SSN.
Recheck same bloods as before

Keyleigh [redacted]
PCT
31.07.2023
15.14 Dr Gp Stirling
28/07/2023 Triage Ms [redacted]

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28/07/2023 Ongoing review ANP mail
ANP K[redacted]
lab results
U &es ok
EGFr >59 good
LFT ok
TSH 0.01
T4 was 27.2 now 22.6
T3 was 6.6 now 7.4
kardex to review medications

27/07/2023 Triage Ms Jade Binnie
27/07/2023 Weight: 70.2 kgs BMI: 25.7 O/E - weight Dr Gp Stirling
27/07/2023 Third Party Consultation Mr[redacted] Mccallum
27/07/2023 Document Image Docman Attachment
27/07/2023 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr[redacted] Mccallum
27/07/2023 Administration Dr[redacted] Oswald
27/07/2023 Ongoing review GP[redacted]
Mail
Not all bloods back yet, anti TSH/TPO outstanding, wait for these results to come through and then review. Dr[redacted]
26/07/2023 Third Party Consultation Mr S[redacted] Mccallum
26/07/2023 Document Image Docman Attachment
26/07/2023 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr[redacted] Mccallum
24/07/2023 Triage Ms[redacted] Binnie
24/07/2023 Seen by health care assistant Seen in HCA clinic for bloods
Successfully obtained and sent to labs

[redacted] Binnie
HCA
24/07/2023 Dr Gp Stirling
24/07/2023 Weight: 70.1 kgs BMI: 25.7 O/E - weight Dr Gp Stirling
24/07/2023 Triage Ms Jade Binnie - No Data Recorded
21/07/2023 Triage Ms[redacted] Kilpatrick
21/07/2023 Administration Listed for bloods for next week as requested.

[redacted] Kilpatrick
HCA
21/07/2023
18:58HRS Dr Gp Stirling
21/07/2023 Other Dr[redacted] Kildare
21/07/2023 Hyperthyroidism ANP L.Kane/GP J.Kildare
Mail
See bloods - TSH undetectable with hyperthyroidism
Please repeat bloods next week - FBC, U&Es, LFTs, HbA1c, TSH with Anti-TSH and Anti-TPO antibodies
Can review following this and if remains raised for referral to Endocrine team Dr[redacted] Kildare
20/07/2023 Third Party Consultation Mr Sharon Mccallum
20/07/2023 Document Image Docman Attachment
20/07/2023 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr[redacted] Mccallum
20/07/2023 Third Party Consultation Mr[redacted] Mccallum
20/07/2023 Document Image Docman Attachment
20/07/2023 Administration Microbiology Results Forth Valley Royal Hospital Microbiology Mr[redacted] Mccallum
20/07/2023 Third Party Consultation Mr[redacted] Mccallum
20/07/2023 Document Image Docman Attachment
20/07/2023 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr[redacted] Mccallum
20/07/2023 Third Party Consultation Mr[redacted] Mccallum
20/07/2023 Document Image Docman Attachment
20/07/2023 Administration Haematology Results Forth Valley Royal Hospital Labs Mr Sharon Mccallum
20/07/2023 Triage Ms[redacted] Binnie
20/07/2023 Weight: [redacted] kgs BMI: 26.2 O/E - weight Dr Gp Stirling
19/07/2023 Triage Ms[redacted] Binnie - No Data Recorded
19/07/2023 Triage Ms[redacted] Binnie - No Data Recorded
17/07/2023 Triage Ms[redacted] Binnie
17/07/2023 Weight: 71.1 kgs BMI: 26.1 O/E - weight Dr Gp Stirling
17/07/2023 Seen by health care assistant Seen in clinic for bloods
Successfully obtained from L arm
Sent to labs

[redacted] Binnie
HCA
17/07/2023 Dr Gp Stirling
16/07/2023 Triage Ms[redacted] Binnie - No Data Recorded
14/07/2023 Other Miss[redacted] Mckeich
14/07/2023 Consultation ANP entry, request to discontinue bisacodyll as patient refusing, done Miss[redacted] Mckeich
14/07/2023 Triage Ms[redacted] Binnie - No Data Recorded
14/07/2023 Third Party Consultation Mr[redacted] Mccallum
14/07/2023 Document Image Docman Attachment
14/07/2023 Administration Clinical Letter HMP Stirling X-Ray X-Ray Referral Mr[redacted] Mccallum
14/07/2023 Triage Ms[redacted] Binnie - No Data Recorded
14/07/2023 Other Miss[redacted] Mckeich

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14/07/2023 Consultation ANP entry, seen patient, c/o few issues:

1. acne to face, requesting treatment, requesting lymecycline, unable to use benzoyl peroxide - allergy - rash, lymecycline prescribed.

2. requesting throat spray for throat pain, occasional pain to throat when eating certain foods, usually when ubale to get gluten free, mouth examined, throat red, no inflammation, no pus, T37.1, centor score 0, rx difflam x 7 days

3. Feels tired and been loosing weight
present for last 3 weeks
concerned something is wrong
note weight March 23 75kg
weight today 70.4kg
Believes there is something sinister going on
o/e looks well
talking whole sentences
gait normal
has good appetite, states eats regularly (hx eating disorders)
drinking plenty fluids
mouth - throat slightly red/painful - swab taken
swallowing - no issues
vomited 2 days ago, vomited after visit - had ate packet of crisps - foodstuff/bile
Not vomited since but nauseous
feels gets sweats when walking about
new pain to abdomen - pain actually on back when patient pointed to area
pain on palpation back, midline, right side
no flank pain
abdo soft and non tender
no gaurding/referred pain
bowel sounds present
bladder - urine - passing more than normal, no pain, slight odour
recent urine dip NAD
bowels: ok, normal stool, last moved yesterday, moves once daily, no blood
SH - last screen few months [redacted] - clear - states not put self at risk since
Imp: ? msk pain, patient advised
? reason for weight loss over last 3mths
Plan: listed patient for bloods - FBC, U&E, LFT, CRP, TFT, Hba1c,
for 2 weekly weight
worsening advice given

4. Patient also c/o lumps to abdomen
o/e numerous stretch marks over abdomen
on palpation 3 small lesions felt lower abdomen just above pelvic area
small circular lesions
smooth borders
appear attached to underlying skin
Imp: ? lypoma/small cyst
Patient believes they may be sinister, anxious
Agreed for referral for ultrasound
worsening advice given
Miss [redacted] Mckeich

13/07/2023 Triage Ms [redacted] Binnie
13/07/2023 O/E - temperature level = 36.8 degC Dr Gp Stirling
13/07/2023 O/E - pulse rate 79 beats/min Dr Gp Stirling
13/07/2023 Pulse oximetry 97 % Dr Gp Stirling
13/07/2023 11:29.00 BP 102 / 70 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
13/07/2023 Weight: 70.5 kgs BMI: 25.8 O/E - weight Dr Gp Stirling
13/07/2023 Seen by health care assistant Seen in HCA clinic for urinalysis and full set obs
Georgina disgunted to see it was not a dr/anp but explained that she would need to see a hca/nurse initially to know if it is suitable to see a dr and she said 'ive seen yous fucking hunners of times'
Georgina complaining of sore back and sides - shooting pains - asked me to include this in notes as she said can be unbearable at times
Urinalysis negative
Observations recorded:

[redacted] Binnie
HCA
13/04/2023 Dr Gp Stirling
11/07/2023 Triage Ms [redacted] Binnie
11/07/2023 Administration Actions from GP/ANP clinic
Nil bloods required
Listed for urinalysis, full set of observations

[redacted] Binnie
HCA
11/07/2023
Dr Gp Stirling
11/07/2023 Other Dr [redacted] Kildare
11/07/2023 Ongoing review ANP J.McKeich/GP J.Kildare
Actions
Triage entry noted below - [redacted] more information here and routine observations before it can be decided if bloods are necessary - at the moment I dont feel bloods are indicated Dr [redacted] Kildare
10/07/2023 Third Party Consultation Mr [redacted] Mccallum
10/07/2023 Document Image Docman Attachment
10/07/2023 Administration Administration HMP Stirling Optician Patient Response Letter Mr [redacted] Mccallum
10/07/2023 Triage Ms Keleigh Mournian

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10/07/2023 Consultation
S-Seen in triage room
B-Submitted a self referral requesting bloods to be taken
A-Patient states she feels tired and lethargic all the time and feels like she overheats at times.
R-Will list for GP/ANP actions to query if any bloods required?

Keyleigh Hale
PCT
10.07.2023
10.45 Dr Gp Stirling
06/07/2023 Triage Ms [redacted] Rennie
06/07/2023 Self-referral PCT - MM - Would like bloods taken and copy of cell markers. Admin will check if there are any cell markers issued by HMP STirling and forward these to the patient Ms [redacted] Rennie
05/07/2023 Other Miss [redacted] Mckeich
05/07/2023 Consultation ANP actions, requesting bisacodyl monthly and bonjela for cold sores. No concerns from MHT, bisacodyl changed to monthly and prescribed bonjela. Miss [redacted] Mckeich
05/07/2023 Other Miss [redacted] Mckeich - No Data Recorded
04/07/2023 Third Party Consultation Mr S [redacted] Mccallum
04/07/2023 Document Image Docman Attachment
04/07/2023 Administration Administration HMYOI Polmont Transfer Paperwork Mr [redacted] Mccallum
03/07/2023 Triage Ms Lyndsay Mccracken
03/07/2023 Self-referral recieved self referral form ? if Georgina could possibly have her bisacodyl 5mg tablets changed to monthly instead of weekly.
I have had a look at [redacted] kardex and it is prescribed she can take 1-2 tablets per day. She reports on referral that she takes 1 tablet per night however, feels if she recieved monthly's she would have enough to be able to take 2 tablets where necessary.
It is not documented in kardex how many tablets are issued on a weekly basis.
I will list for GP/ANP actions to ? if changing to monthly is an option.

PCT S/N Lyndsay McCracken
12.14 Ms Lyndsay Mccracken
03/07/2023 Triage Ms Lyndsay Mccracken
03/07/2023 Seen by triage nurse S- self referral recieved
B- Listed for review of mouth ulcers from dental referral
A- Seen Georgina in clinic this morning for review. Stated she had put a dental rferral in as her dentures are causing her to develop mouth ulcers.
Also when in clinic Georgina reported she feels like she has a urine infection. Urine test obtained and tested which was negative.
Encouraged to drink more fluids.
R- List for ANP/GP actions for bonjella for mouth ulcer until dentist has appointment available

PCT S/N Lyndsay McCracken
09.54 Ms Lyndsay Mccracken
03/07/2023 Triage Ms Lyndsay Mccracken - No Data Recorded
30/06/2023 Triage Mr Connor [redacted]y - No Data Recorded
29/06/2023 Triage Ms Susan Payne
29/06/2023 Administration Listed for PCT clinic Monday 03/07/23

PCT [redacted]
13:14
29/06/23 Dr Gp Stirling
29/06/2023 Triage Mr [redacted] Mccallum
29/06/2023 Self-referral mouth ulcers and sore. SP Mr [redacted] Mccallum
28/06/2023 Triage Ms Lyndsay Mccracken
28/06/2023 Seen by triage nurse S- self referral recieved
B- Ongoing skin [redacted] to face.
A- [redacted] Georgina in clinic this [redacted] regarding skin [redacted]. Reports she has been awaiting appointment for skin clinic since she has been in both Corntonvale and Lilias.
Georgina had full face of make up on therefore unable to review appropriately. She states she would like commenced back on antibiotics however have advised skin would need reviewed first. She is happy with this.
Georgina also reports she has teeth issues and has been advised to self refr for dentist.
R- List for ANP Murphy to review skin on return to HMP Stirling.

PCT S/N Lyndsay McCracken
10.52 Ms Lyndsay Mccracken
27/06/2023 Triage Ms [redacted]
Letter on: 27/06/2023 type: Referral Smear Results
22/05/2023 reported 27/06/2023 Cervical smear result HPV - Human papillomavirus test negative recall due: 22/05/2028 Ms [redacted]
22/05/2023 Recall on 22/05/2028 for Cervical smear result with Ms [redacted] Status: Outstanding
27/06/2023 Triage Ms Sus[redacted] Payne
27/06/2023 Consultation Listed for PCT clinic 28/06/23 : Skin issues

PCT [redacted]
11:50
216/06/23 Dr Gp Stirling
26/06/2023 Triage Mr Sharon Mccallum
26/06/2023 Self-referral Skin Clinic
Optician Self-referral - Broken/lost glasses. Mr [redacted] Mccallum
22/06/2023 Third Party Consultation Ms [redacted] Rennie
22/06/2023 Document Image Docman Attachment
22/06/2023 Administration Clinical Letter HMP Cornton Vale Medical Marker Ms [redacted] Rennie
22/06/2023 Triage Ms Jill Ramsay
22/06/2023 Consultation Medical marker put in place for dietry requirements.
PCT DTL JRamsay 22/6/23 07.46 Dr Gp Stirling
22/06/2023 Triage Ms Jill Ramsay - No Data Recorded
22/06/2023 Triage Ms Jill Ramsay - No Data Recorded

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

22/06/2023 Triage Ms Jill Ramsay : No Data Recorded
19/06/2023 Triage Ms Michelle Morris
19/06/2023 Transfer profile form completed Georgie is fine with being back. She is excited that she only has 24 months of her sentence left and is glad she is spending it at HMP Stirling. [redacted] does not feel like she requires any input or support from mental health or addictions and is aware of how to place referrals for services. Dr Gp Stirling
19/06/2023 Pulse oximetry 98 % Dr Gp Stirling
19/06/2023 O/E - rate of respiration = /minute Dr Gp Stirling
19/06/2023 O/E - temperature level = 37.1 degC Dr Gp Stirling
19/06/2023 O/E - pulse rate 90 beats/min Dr Gp Stirling
19/06/2023 13:54.00 BP 108 / 72 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
19/06/2023 Height: 1.65 metres O/E - height Dr Gp Stirling
19/06/2023 Weight: 72.9 kgs BMI: 26.7 O/E - weight Dr Gp Stirling
19/06/2023 No apparent risk of suicide Strongly denies any thoughts of suicide and is aware how to refer herself should things change. Dr Gp Stirling
19/06/2023 No thoughts of deliberate self [redacted] Denies any thoughts of [redacted] Dr Gp Stirling
19/06/2023 No drug therapy prescribed [redacted] has arrived with a kardex but we do not have her medications yet as her posessions are still in transit with SPS staff. Dr Gp Stirling
19/06/2023 Allergy Moderate H/O: non-drug allergy Allergic to lactose and gluten and requires non spice food. Medical marker will be completed. Dr Gp Stirling
19/06/2023 Third Party Consultation Mrs [redacted]
19/06/2023 Document Image Docman / [redacted]
19/06/2023 Administration Kardex/Recording Sheet HMPYOI Polmont Pharmacy Clinical Mrs [redacted]
17/06/2023 Triage Mr Steven Blunt
17/06/2023 Administration Patient record accessed for person escort record.

[redacted] Blunt MHT 17/6/2023 Dr Gp Stirling
26/05/2023 Triage Ms [redacted]
26/05/2023 Seen in [redacted] health clinic seen regardin vaginal dryness, no evidence os same during smear, or signs of irritation, keen for lubricant, advised bettert o try and resolve cause if becomes ongoing issue, awati results of recent testing and can self refer back if wishes. R [redacted] - sexual health nurse
26/05/2023 10:29 Ms [redacted]
22/05/2023 Triage Ms [redacted] Lawson
22/05/2023 Recall on 14/08/2023 for Depo-provera injection given with Ms [redacted] Lawson Status: Complete
22/05/2023 Depo-provera injection given First service recall due: Claim Expiry Date: Batch GK5704, EXP 02/2025.
No UPSI since last period. Has had previously with good effect, other options discussed. Ms Rachel [redacted]
22/05/2023 Liquid ba[redacted]ology screening Ms [redacted]
12/05/2023 Triage Ms [redacted]
12/05/2023 Ongoing review ANP Actions
ANP K [redacted]
See below entry 11/05/23 DC SN review
Imp otis externa px gentamicion 0.3% / hydrocortisone ear drop 4-5 x daily 5 days not resolving list for ANP / GP review
Imp season allergies effect s eye px sodium cromglicate2% eye drops
MSU clear. Nil action required continue to push fluids
For review if not resolving

12/05/2023 Triage Mr [redacted] Carruthers
12/05/2023 Consultation - returned urine sample - ward tested and unremarkable .
D.Carruthers s/n 09.50 hours Mr [redacted] Carruthers
11/05/2023 Triage Mr [redacted] Carruthers
11/05/2023 Consultation S - seen in health centre
B - nurse clinic appointment
A - c/o ear ache particularly left ear - also sore throat - O/E - nil signs infection to throat - nil inflammation - nil pus or enlargement to tonsils - glans to neck not palpable - right ear ear drum intact - nil signs infection - left ear ear drum intact but evidence of inflammation - also concerned has UTI - strong smwelling urine.Also c/o early hayfever streaming eyes - states oral antihistamine not generally effective.
R - 1 IMP - [redacted] externa left ear - ANP actions gentisone ear drops or equivalent.
2 - opticrom eye drops or equivlant - ANP actions.
3 - universal container for return of urine sample - for ward test in the a.m - advised push fluids.
D.Carruthers S/N 14.35 hours Mr [redacted] Carruthers
11/05/2023 Triage Ms [redacted] Muir
11/05/2023 Weight: 75 kgs BMI: 27.5 O/E - weight Ms [redacted] Muir
11/05/2023 Seen by health care assistant [redacted] in hall for week 4 weight check. Liusted for ANP to review.
[redacted] Muir
HCA
1140
Ms [redacted] Muir
11/05/2023 Triage Ms [redacted] Muir - No Data Recorded
11/05/2023 Triage Mrs [redacted] Taylor
11/05/2023 Self-referral Dentist Dr Gp Stirling
10/05/2023 Triage Mrs [redacted]
10/05/2023 Self-referral [redacted] Health/BBV - Well Person Clinic - "Need smear done asap (overdue)" Added to SH waiting list and card sent to patient to confirm. Mrs [redacted]
05/05/2023 Triage Ms [redacted]
Letter on: 05/05/2023 type: Referral SH Results
05/05/2023 Hepatitis C antibody test negative = Ms [redacted]
05/05/2023 HIV negative = Ms [redacted] Lawson
05/05/2023 Hepatitis B surface antigen negative = Ms [redacted]
05/05/2023 Syphilis titre test negative = Ms [redacted]
05/05/2023 Triage Mr [redacted] Mccallum
05/05/2023 Self-refe[redacted]Sore throat and head. Dr Gp Stirling
04/05/2023 Triage Ms [redacted] Penman
04/05/2023 Weight: 76 kgs BMI: 27.9 O/E - weight Ms [redacted] Penman

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04/05/2023 Seen by health care assistant Saw Georgina in [redacted] 2 to take her week 3 weight of 4 weeks as requested by AMP [redacted]
Her weight is 76kg. Have relisted her for her 4th weight on 11/5/23.

HCA
[redacted] penman 14.08 Ms [redacted] Penman
02/05/2023 Other Miss [redacted] Mckeich
02/05/2023 Consultation ANP entry J McKeich/K [redacted]
Requesting QV wash, prescribed Miss [redacted] Mckeich
27/04/2023 Triage Ms [redacted] Binnie - No Data Recorded
27/04/2023 Triage Ms [redacted] Thomson
27/04/2023 Seen by health care assistant in [redacted] 2 for weight.
[redacted]
HCA
16.20. Dr Gp Stirling
27/04/2023 Triage Ms [redacted] Thomson - No Data Recorded
22/04/2023 Triage Ms [redacted] - No Data Recorded
21/04/2023 Triage Ms [redacted] Binnie - No Data Recorded
21/04/2023 Triage Ms [redacted]
21/04/2023 Weight: 77 kgs BMI: 28.2 O/E - weight Dr Gp Stirling
21/04/2023 Seen by health care assistant in [redacted] 2 for weight.
Donna [redacted]
HCA
11.50. Dr Gp Stirling
21/04/2023 Third Party Consultation Ms Jane Rennie
21/04/2023 Document Image Docman Attachment
21/04/2023 Result Results Microbiology Ms [redacted] Rennie
20/04/2023 Triage Ms [redacted] Binnie - No Data Recorded
17/04/2023 Triage Ms Ra [redacted] La [redacted]
17/04/2023 Seen in [redacted] health clinic [redacted] for routine BBV screen.
Smear due however has period so relisted.
R [redacted] - [redacted] health nurse
17/04/2023 11:16 Ms [redacted]
17/04/2023 Hepatitis C antibody test = Ms [redacted]
17/04/2023 Human immunodefic.viral test = Ms [redacted]
17/04/2023 Hep B surface antigen test = Ms [redacted]
17/04/2023 Syphilis infectious titre test = Ms [redacted]
17/04/2023 Other Miss [redacted] Mckeich
17/04/2023 Administration - note ANP entry - HCA has listed for weekly weights over the next month.
D.Carruthers S/N 12.00 hours Miss [redacted] Mckeich
17/04/2023 Consultation ANP entry, approached by nursing staff, patient states had bloods done & looking for results, see entry 13/2/23:
FBC ok
BS ok
TFT ok
bone profile ok
U&E ok
LFT ok
folate ok
B12 ok
Patient states was loosing weight, curent weight 75kg (weight 13/2/23 81.6kg,) for weekly weights x 4 weeks then list for ANP actions.
for weekly weights x 4 weeks. Miss [redacted] Mckeich
17/04/2023 Triage Ms K [redacted] Penman
17/04/2023 Seen by health care assistant Have listed Georgina for 4 weekly weights in the hca clinic as per AMP, these are 20/4 27/4 4/5 11/5.
Pass on the results to Jackie once taken.

HCA
[redacted] penman 10.45 Ms [redacted] Penman
11/04/2023 Triage Ms [redacted] Rennie
11/04/2023 Self-referral SHC - Well person - Would like a smear Ms [redacted] Rennie
04/04/2023 Third Party Consultation Ms [redacted] Rennie
04/04/2023 Document Image Docman Attachment
04/04/2023 Administration In possesion medication check form HMPYOI Polmont Health Centre Pharmacy Ms [redacted] Rennie
01/04/2023 Triage Ms [redacted] Binnie
01/04/2023 Seen by health care assistant for spot check medication.

Amitriptlyine 75mg - Should be remanining x12 , Actual remaining x15
Quetiapine 150mg - Should be remanining x4 Actual remaining x5.

Response to discrepancy - previous prescription overlapped

[redacted] Binnie
HCA
01/04/23

No explanation for being short x1 of each.
Dr Gp Stirling
29/03/2023 Third Party Consultation Mrs Lisa Taylor
29/03/2023 Document Image Docman Attachment
29/03/2023 Administration Administration HMYOI Polmont Medical Diet Requistion Mrs [redacted]
29/03/2023 Triage Ms Jill Ramsay
29/03/2023 Consultation Medical marker for gluten and lactose intolerance completed
PCT SN JRamsay 29/03/2023 13.10 Dr Gp Stirling
28/03/2023 Other Dr [redacted] Kildare

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28/03/2023 Ongoing review ANP K [redacted] J.Kildare
Actions
[redacted] requesting Etodolac and Peppermint caps to be made in possession - currently supervised - Kardex amended as requested Dr [redacted] Kildare
24/03/2023 Other Miss [redacted] Mckeich
24/03/2023 Consultation ANP actions, request from PCT to change supervised meds to inpossession, patient been moved to fevel 2, no recent [redacted] on vision re med compliance, discussed with MHT, no [redacted] meds moved to weekly, listed for med check. Miss [redacted] Mckeich
23/03/2023 Other Miss [redacted] Mckeich
23/03/2023 Consultation ANP entry J McKeich/L Kane
Late entry: kardex transcribed following admission to Polmont. Miss Jackie Mckeich
23/03/2023 Clinic Ms Kaitlin Currie
23/03/2023 Mental health admin. NOS Georgina was listed to see writer - RMN - 17/03/2023 however writer had to cover another establishment. Rescheduled Georgina's mental health assessment to today however she has been transferred back to Polmont. Discharged from the MHT. Ms Kaitlin Currie
22/03/2023 Triage Ms Abby Rafferty
22/03/2023 Transfer profile form completed
Transfer of this 31 year old lady from Lillias unit, reports to have been downgraded due to [redacted] contacting unit, and the risk this poses to her. States is only supposed to be here for a few days until this can be discussed at RMT.
Disgruntled at being held within [redacted] 1.
Engaged well, mood reactive and subjectivley denied any concerns.
Reports to be lactose and gluten intolerant.
Nil else signiicant health issues.
Reports numerous MH diagnosis but did not wish to discuss this at lenght today as she feels she is managing her mental health well currently.
Strongly denied current plans, intent of deliberate self harm or suicide. Advised she would seek support should her mental health deteriorate

Would like referral to SH nurse to have smear completed.

Plan-
ANP has kardex to re-wrtie prescriptions
Refer to SH

ARafferty
RMN
22/03/23 Ms [redacted] Rafferty
22/03/2023 No apparent risk of suicide Strongly denied current thoughts, plan or intent of suicide.
Reports history of suicidality over 10 years ago however nil recent. Advises she would seek staff support if her mental state should decline.
Ms [redacted]
22/03/2023 No thoughts of deliberate self [redacted] Strongly denied any current thoughts or intent of deliberate self [redacted] Ms [redacted]
22/03/2023 Prescription by GP Prescribed medications.
Peppermint capsules
Diflam Spray
Beclometasone nasal spray
Etodolac
Bisocodyl
Quetiapine
Amitriptyline
Pzotifen
Fexofenadine
Famotadine
Cetirizine

Also arrived with vitamins she reports she bought from canteen:
Cod liver oil
Vitamin D3
Vitamin C
Multivitamin & Iron Ms [redacted]
22/03/2023 Pulse oximetry 96 % Ms Abby [redacted]
22/03/2023 O/E - rate of respiration = 17 /minute Ms [redacted]
22/03/2023 O/E - temperature level = 36.5 degC Ms [redacted]
22/03/2023 O/E - pulse rate 78 beats/min Ms [redacted]
22/03/2023 15:39.00 BP 114 / 80 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Ms [redacted]
22/03/2023 Height: 1.65 metres O/E - height Ms [redacted]
22/03/2023 Weight: 75 kgs BMI: 27.5 O/E - weight Ms [redacted]
22/03/2023 Triage Ms [redacted]
22/03/2023 Refer for Refer to community [redacted] health advisor Action: 12/04/2023 Text Ms [redacted]
22/03/2023 Prescription by GP Kardex recieved on transfer Ms [redacted]
22/03/2023 Triage Ms [redacted] Queen
22/03/2023 Consultation Georgina attended health centre this morning complaining of ongoing throat issues.
States she ate a meal last night and still feels as if the food is stuck in her throat
Noi issues with breathing, swallowing fluids, speaking
Will book her in for GP attend anywhere this am Ms [redacted] Queen
14/03/2023 Triage Ms [redacted]
14/03/2023 Smoking cessation advice for Smoking Attended stop vape support session in HUB at 1.45pm. Stated interested in possibly stopping vape but is unable to tolerate nicotine patches due to sensitive skin. Advised on structure of stop vape group service, discussed possible access to nicotine lozenges if skin reaction documented on Vision records. Georgina stated may attend group next week. Ms [redacted] Mulheron
13/03/2023 Triage Ms [redacted] No Data Recorded
13/03/2023 Triage Ms [redacted]

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13/03/2023 Patient reviewed ongoing throat issue - seen last 13/2.
still sore. states taking PPI since then and no good. denies specific acid reflux type pain but throat [redacted] sore mnost of the time. no food or fluid sticking eating drinking as normal
no weight loss. occ ear pain - didnt offer present on asking. no discharge from ear or hearing issues.
no cough
smokes but is now vaping
[redacted] had throat cancer was a smoker.

allergiues nasally, on cetirizine but not much help. ongoing issue

o/e throat NAD no neck lumps ears both clear

reassured no red flags re throat., advised best she can do is stop smoking. aware of this . bloods from feb [redacted] normal
can check for h pylori incase acid reflux [redacted] - stop PPI 2 weeks famitidine during this time. then hpylori sample
can restart PI after this if needed

nasal spray incase post nasal drip an attribute
stop cetirzine and start fexofenadine Dr [redacted] Usher

09/03/2023 Clinic Ms Kaitlin Currie
09/03/2023 Administration Geoamy cancelled transport for Georgina's dental appointment this morning. Writer contacted the dental hospital to rearrange this appointment. Further appointment arranged for 29/03/2023 at 3.30pm. Ms Kaitlin Currie
02/03/2023 Third Party Consultation Mr [redacted] Mccallum
02/03/2023 Document Image Docman Attachment
02/03/2023 Administration Clinical Letter HMP Cornton Vale Care and Treatment Plan Asthma Mr [redacted] Mccallum
01/03/2023 Clinic Ms Kaitlin Currie
01/03/2023 Mental health admin. NOS Attempted to see Georgina for the purpose for completing a mental health assessment however she was unavailable due to seeing another service. Will relist for next available appointment. Ms Kaitlin Currie
01/03/2023 Clinic Ms [redacted] Currie
01/03/2023 Mental health admin. NOS Mental health referral form received, submitted 15/02/2023 however just received by MHT to be screened. Georgina requesting to speak to a mental health nurse. Several email correspondence has been made regarding Georgina from SPS and social work regarding Georgina displaying manipulative behaviours and previous input for low mood and anxiety in another establishment. Allocated routine assessment, letter sent. Ms Kaitlin Currie
28/02/2023 Surgery consultation Dr [redacted]
28/02/2023 Administration bloods NAD (including TFTS) Dr Joe [redacted]
27/02/2023 Surgery consultation Dr Joe [redacted]y - No Data Recorded
24/02/2023 Triage Ms [redacted]
24/02/2023 Consultation Georgina attended the health centre - complaining of feeling genreally unwell with dizzy spells.
OB:
136/84, P 95bpm, Sats 98%, Temp 36.4 RR 14
Obs stable, states eating drinking normally, sleeping well, no complaints of pain
Advised to rest today if feeling unwell/dizzy. Worsening statement given Ms [redacted] Campbell
21/02/2023 Triage Ms [redacted]
21/02/2023 Dental care Dental appointment rechduled for Thursday 9/3/23 @9.30am Ms [redacted] Campbell
21/02/2023 Third Party Consultation Ms Nicola [redacted]
21/02/2023 Document Image Docman Attachment
21/02/2023 Result Results Haematology Ms [redacted]
21/02/2023 Third Party Consultation Ms Nicola [redacted]
21/02/2023 Document Image Docman Attachment
21/02/2023 Result Results Biochemistry Ms [redacted]
17/02/2023 Triage Ms [redacted]
17/02/2023 Dental c[redacted]de for routine dental care at Glasgow dental hospital - 28/02/23 @9am - SPS aware to arrange transport Ms [redacted]
17/02/2023 Triage Ms [redacted] - No Data Recorded
16/02/2023 Triage Ms [redacted] Rennie - No Data Recorded
15/02/2023 Triage Ms Christine Campbell
15/02/2023 Administration Self referral received for Mental health - passed to MH nurse.
Self referral received for dentist - second referral for broken plate, advised Lilias still under emergency dental treatment only and she will be added to waiting list. Ms [redacted] Campbell
15/02/2023 Triage Ms [redacted]
15/02/2023 Blood sample taken = As per GP request
Venous blood obtained from right arm - sent to lab Ms [redacted]
13/02/2023 Follow-up/routine visit Ms Amy Swandells
13/02/2023 Occupational therapy Met with Georgina in multi-purpose room 2 from 13:00 - 13:40. Explained current OT role is information gathering to support service development using OSA (Occupational Self Assessment) and activity checklist. Advised Georgina plan to complete assessment to support info gathering, and if occupational need is identified, follow this up once OT service is active.
Georgina gave verbal consent to the above and partake in assessment today.
Completed OSA and activity checklist. Areas Georgina feels she has most difficulty with and would like to prioritise are managing her finances, solving problems, getting done what she needs to do and having a satisfying routine. From the activity checklist, her 3 top activities of interest that she would like to pursue in the future are paid employment (full/part time), Hiking/hill walking and seeing family and friends.
Advised Georgina writer felt they would likely benefit from OT given above described difficulties with daily activity, to maximise participation.
Will follow up in the future as appropriate when OT service is active. Georgina agreeable with this.

Ms Amy Swandells
13/02/2023 Surgery consultation Dr [redacted] - No Data Recorded
13/02/2023 Surgery consultation Dr [redacted] Daly - No Data Recorded
13/02/2023 Surgery consultation Dr [redacted] - No Data Recorded
13/02/2023 Surgery consultation Dr [redacted]
13/02/2023 Consultation FTF with [redacted] nurse
weight 81.6, says has trouble loosing weight and poor energy
bowels fine
chronic sore throat, says prev ENT hospital appt NAD
on examination no masses, throat a bit red, is on nsaid so ? reflux. omeprazole added, with difflam. no diyphagia. Systemically well
for UEs LFTS TFTS bone gluc FBC vit B12/folate Dr [redacted]
10/02/2023 Surgery consultation Dr Joe Daly

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

10/02/2023 SCI Referral Letter
10/02/2023 Surgery consultation Dr [redacted] - No Data Recorded
08/02/2023 Triage Ms [redacted] Campbell
08/02/2023 Administration Discussed with Dr [redacted] this morning, Georgina will need to be seen physically to have throat examined - as no further complaints noted will list for Mon 13/02/23 Ms [redacted] Campbell
08/02/2023 Surgery consultation Dr [redacted] - No Data Recorded
07/02/2023 Clinic Ms Kaitlin Currie
07/02/2023 Mental health admin. NOS Notes accessed for RMT purposes. Ms Kaitlin Currie
04/02/2023 Clinic Ms K [redacted] Currie
04/02/2023 Seen by nurse Georgina attended the health centre asking for a brief conversation regarding ongoing issues with her throat. States she has been experiencing the feeling of some food/fluids being digesting wrong and causing her to cough. Advised to keep a diary o what she is eating to see if any particular foods or liquids are difficult to swallow and this can be discussed with the GP at her appointment
08/02/2023. Ms [redacted] Currie
01/02/2023 Triage Miss [redacted] Mctaggart
01/02/2023 Consultation Seen in HC. Feels as if struggling to lose weight, regardless of eating better and exercising more. Asking re blooc test to check thyroid levels. Will add patient to virtual GP clinic for review. Miss Lauren Mctaggart
27/01/2023 Triage Ms Christine Campbell
27/01/2023 Medication satisfactory Spot check carried out today on weekly medication.
HCSW L McTaggart present
All medication checked and correct.
Spot check form signed and scanned to docman. Ms [redacted]
27/01/2023 Surgery consultation Dr [redacted] Daly - No Data Recorded
25/01/2023 Surgery consultation Dr [redacted] - No Data Recorded
25/01/2023 Surgery consultation Dr [redacted]
25/01/2023 Consultation telehealth, chronic facial /torso acne resistant to multiple oral therapies
agreed routine derm referal Dr [redacted]
25/01/2023 Triage Ms [redacted] Campbell - No Data Recorded
23/01/2023 Clinic Miss Katelin [redacted]
23/01/2023 Urine dipstick test = Urine tested using miltistix

LEU= NEG
NIT= NEG
PRO= NEG
PH= 5.0
BLOOD= NEG
SG=1.030
KET= NEG
GLU= NEG

NIL SIGNS OF UTI
SAMPLE DESTROYED Miss Katelin [redacted]
22/01/2023 Triage Ms Christine [redacted]
22/01/2023 Patient advised re diet Advice Georgina asking if we can prescribe snack/chocolate s as she was not able to buy gluten free snacks on her weekly shopping budget.
When asked what she did in Corton Vale she advised she just "posioned" herself and ate regular chocolate as no alternative was supplied on canteen.
Advised not to do this and that we cannot prescribe anything other than basic food (which are already preacribed). Georgina states we have to have a meeting with SPS to tell them she has to be given money/access to snacks.
Advised Georgina this would not be appropriate as SPS are aware of her dietary requirements and we cannot interfer with shopping and budgets based on preference. Ms [redacted]
22/01/2023 Urine smell = Georgina attended health centre today - complaining of dark, smelly urine. States started yesterday. White top bottle given to provide sample tomorrow. For dipstick test Ms [redacted] Campbell
21/01/2023 Triage Ms [redacted] Campbell
20/01/2023 Dental care Referral received for repair of denture plate.
Georgina aware that we are only able to accomadate emergency dental issues at present. Ms [redacted] Campbell
18/01/2023 Third Party Consultation Ms [redacted] Rennie
18/01/2023 Document Image Docman Attachment
18/01/2023 Administration Kardex HMP Corrton Vale Pharmacy Ms [redacted] Rennie
18/01/2023 Triage Ms Christine Campbell
18/01/2023 Transfer profile form completed TTM paperwork completed by c [redacted]
Georgina wishes to discuss current acne treatment with GP.
Listed for next clinic 25/01/23 Ms [redacted] Campbell
18/01/2023 Pulse oximetry 98 % Ms [redacted] Campbell
18/01/2023 O/E - rate of respiration = 17 /minute Ms Christine Campbell
18/01/2023 O/E - temperature level = 36.4 degC Ms Christine [redacted]
18/01/2023 O/E - pulse rate 68 beats/min Ms [redacted]
18/01/2023 12.09.00 BP 120 / 78 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Ms [redacted]
18/01/2023 No apparent risk of suicide Ms [redacted] Campbell
18/01/2023 No thoughts of deliberate self [redacted] Ms [redacted] Campbell
18/01/2023 H/O: deliberate self harm reports nil self [redacted] for 6 yrs Ms [redacted] Campbell
18/01/2023 H/O: attempted suicide Nil since 2012- reports attempted hanging Ms [redacted] Campbell
18/01/2023 No signif H/O psych. disorder of Ms [redacted]
18/01/2023 Prescription by GP Kardex on transfer Ms Christine [redacted]
18/01/2023 Allergy Moderate H/O: non-drug allergy Ms [redacted] Campbell
18/01/2023 Height: 1.65 metres O/E - height Ms [redacted]
18/01/2023 Triage Ms [redacted] Rennie - No Data Recorded
18/01/2023 Third Party Consultation Ms [redacted] Rennie
18/01/2023 Document Image Docman Attachment
18/01/2023 Administration Transfer Paperwork Corrton Vale Administration Ms [redacted] Rennie
18/01/2023 Triage Ms [redacted] Rennie - No Data Recorded
17/01/2023 Third Party Consultation Ms [redacted] Rennie
17/01/2023 Document Image Docman Attachment
17/01/2023 Administration Kardex HMP Corrton Vale Pharmacy Ms [redacted] Rennie
17/01/2023 Triage Ms [redacted]

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17/01/2023 Consultation See in HC at 10:40

Urine sample back as a negative. Georgina was not sure why she was attending the clinic. She enquired about having a lactose free diet prescribed by Lloyds. I have checked previous notes re lactose intolerance. No documentation on formal tests been undertaken regarding this. Patient self reports lactose intolerance.
PCT [redacted]
11:14
17/01/23 Dr Gp Stirling
16/01/2023 Triage Ms Lyndsay Mccracken - No Data Recorded
13/01/2023 Triage Ms Laura Kilpatrick
13/01/2023 Administration Listed for pct nurse to review why urine was obtained as requested by anp
[redacted] Kilpatrick
HCA
13/01/23
16:10hrs Dr Gp Stirling
13/01/2023 Triage Ms [redacted]
13/01/2023 Ongoing review no info as to why urine sample was obtained no nurse triage
RBC 955
? menstruating
can nursing staff please triage and asses what the patient requires.
12/01/2023 Third Party Consultation Ms [redacted]
12/01/2023 Document Image Docman Attachment
12/01/2023 Administration Microbiology Results Forth Valley Royal Hospital Microbiology Ms Sonja Kelly-Gutowski
11/01/2023 Triage Mr [redacted] - No Data Recorded
09/01/2023 Triage Ms [redacted] Cleary
09/01/2023 Seen by health care assistant
Georgina was at the clinic to give a urine sample for testing for urynalasis but was unable to provide this i gave her a bottle away to hand back in .
Michelle Cleary
HCA
09/01/2023
11.00 Ms [redacted] Cleary
06/01/2023 Triage Ms [redacted] Kilpatrick
06/01/2023 Failed encounter Georgina was listed for urine sample to be sent away to labs for infection?? However officer made writer aware that Georgina is currently at work and unable to come to appointment at this time. I have relisted Georgina in HCA clinic with regards to same.
[redacted] Kilpatrick
HCA
06/11/2023
10:59HRS Dr Gp Stirling
04/01/2023 Triage Ms Jane Rennie
04/01/2023 Self-referral Nurse Triage - MM - Nose bleeds, vomiting, and would like a urine test Ms [redacted] Rennie
30/12/2022 Triage Ms Jill Ramsay
30/12/2022 Consultation Seen in clinic this am, enquiring about a lactose free food list from pharmacy, I will look into this. Also stated throat was sore, nil redness or puss spots noted on back of throat, glands not swollen and temp 36.6, worsening advice given.
PCT SN JRamsay 30/12/2022 09.51 Dr Gp Stirling
30/12/2022 Triage Ms Jill Ramsay - No Data Recorded
22/12/2022 Third Party Consultation Mr [redacted] Mccallum
22/12/2022 Document Image Docman Attachment
22/12/2022 Administration Clinical Letter HMP Cornton Vale Health Care Marker Mr [redacted] Mccallum
22/12/2022 Third Party Consultation Ms Jane Rennie
22/12/2022 Document Image Docman Attachment
22/12/2022 Administration Clinical Letter HMP Cornton Vale Ophthalmology Ms [redacted] Rennie
22/12/2022 Triage Ms Jane Rennie
22/12/2022 Administration NOS Peebles [redacted] staff have enquired why Georgina is wearing blue tinted glasses and have asked for a medical marker to be completed. Optician and Team leader have been contacted. Ms [redacted] Rennie
21/12/2022 Triage Ms [redacted] Binnie
21/12/2022 Administration Glasses provided to Georgina and signed for

[redacted] Binnie
HCA
21/12/2022 Dr Gp Stirling
21/12/2022 Triage Mr [redacted] Mccallum
21/12/2022 Self-referral Nurse/Doctor - Lactrol dietaries. SJ Mr [redacted] Mccallum
13/12/2022 Third Party Consultation Ms [redacted] Rennie
13/12/2022 Document Image Docman Attachment
13/12/2022 Administration Clinical Letter HMP Cornton Vale Medical Marker Ms [redacted] Rennie
13/12/2022 Triage Ms [redacted] Binnie - No Data Recorded
13/12/2022 Third Party Consultation Mr [redacted] Mccallum
13/12/2022 Document Image Docman Attachment
13/12/2022 Result Results HMP Cornton Vale ECG Mr [redacted] Mccallum
13/12/2022 Other Dr [redacted] Kildare
13/12/2022 Ongoing review MOA - Kardexes rewritten to have one specifically for GF products and the other meds
Clinical Portal reviewed and can see eForm from Dieticians requesting [redacted] to have lactose free products - I will complete medical marker Dr [redacted] Kildare
13/12/2022 Surgery consultation Dr [redacted] Kildare
13/12/2022 Consultation GP Re[redacted]
1) Listed for review of chest pain
Vague history of chest discomfort over Sunday and some episodes again yesterday
Left sided, no radiation, no autonomic symptoms, no palps or dizziness
No other red flags
Pain worse with movement, not pleuritic in nature
Has had 2 ECGs taken which are entirely normal and show NSR with Qtc 444ms, nil concerning features
Concerned as has a history of heart murmur she says
Has still been able to be at [redacted] the laundry
No cough/SOB, no reflux symptoms

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No cough/SOB, no reflux symptoms

O/E
Comfortable at rest, completes sentences, no accessory muscle use
Some discomfort over chest wall
HS I + II + 0, regular - I cant hear a murmur today
Chest clear with good A/E to bases

Advised pain unlikely cardiac and more likely MSK/costochondritis component
Advised simple analgesia and could try Algesal rub

2) States has spoken with Dieticians and they have agreed to medical marker to be reinstated for her lactose free products - says they will be sending an eForm

I will review Clinical Portal this morning and see what has been sent through Dr [redacted] Kildare

12/12/2022 Other Dr [redacted] Sayers
12/12/2022 Ongoing review ECG received via email
ECG - SR 80/min - no ST changes
Normal ECG
Dr [redacted] Sayers

12/12/2022 Triage Mrs [redacted]
12/12/2022 Consultation 13.15hrs SPS staff called for her to be assessed for 'chest pain'
DTL C [redacted] attended to obtain observations-
observations all unremarkable.
Resp's 18
pulse 88
temp 36.8
SP02 100%
BP 126/86
[redacted] then escorted to Health Centre for an ECG by [redacted] and SPS staff.
Ecg completed by HCA [redacted] Binnie at 13.30hrs
I then attended to speak with Georgina, She has had ongoing chest pain from yesterday around 11am and became worse last night.
Pain is from left underarm over left breast area.
States worse when breathing in, states no physical/muscle injury.
No obvious wheeze and no coughing up sputum.
Talking in full sentences no SOB evident however Georgina states she feels short of breath at times.
Good colour.
Discussed possible breast tendemess due to time of month however [redacted] states it is not similar pain.
[redacted] has previous breast cysts however was unable to state is any of these have changed.
States that her regular analgesia is not helping with her pain however noted to only have 2 paracetamol tablets from SPS officers yesterday at 2pm and none since.
Reassurance given regarding observations, ECG states normal however no one able to [redacted] here- sent to GP on call Dr Sayers to review.
I told her once her ECG is reviewed and it comes back normal she can be seen at routine clinic for review of pain. However no urgent [redacted] at the moment, any changes Georgina is aware to let staff know.

[redacted]
TL PCT
12/12/22
14.35HRS Dr Gp Stirling

12/12/2022 Triage Ms [redacted] Rennie
12/12/2022 Self-referral Nurse - Pain in left side of chest Ms [redacted] Rennie
09/12/2022 Triage Ms Jade Binnie - No Data Recorded
09/12/2022 Triage Ms [redacted] Binnie - No Data Recorded
09/12/2022 Triage Ms [redacted]
09/12/2022 Ongoing review ANP mail
ANP K [redacted]
FBC normal range
cholesterole 4.6 in range
EGfR >59 normal value
ECG no changes
plasma glucose 5.1 normal vaule
U&Es normal range
LFT normal range
continue NPT

07/12/2022 Third Party Consultation Mr S [redacted] Mccallum
07/12/2022 Document Image Docman Attachment
07/12/2022 Administration Haematology Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum

07/12/2022 Third Party Consultation Mr Sharon Mccallum
07/12/2022 Document Image Docman Attachment
07/12/2022 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum

07/12/2022 Third Party Consultation Mr S [redacted] Mccallum
07/12/2022 Document Image Docman Attachment
07/12/2022 Result Results HMP Cornton Vale ECG Mr Sharon Mccallum

06/12/2022 Other Dr [redacted] Kildare
06/12/2022 ECG Normal See ECG taken for Psychotropic monitoring NSR @ rate 87bpm QTc 437ms, no acute changes Dr [redacted] Kildare

06/12/2022 Results recording Dr [redacted] Sayers
05/12/2022 Serum HDL cholesterol level = 1 mmol/L Target value for HDL >1.2 mmol/L. Dr Craig Sayers
05/12/2022 Serum LDL cholesterol level = 2.7 mmol/L mmol/l Dr [redacted] Sayers
05/12/2022 Serum triglycerides = 2 mmol/L Dr [redacted] Sayers
05/12/2022 Serum total cholesterol level = 4.6 mmol/L Dr [redacted] Sayers
05/12/2022 Serum lipids = <none> Dr [redacted] Sayers
05/12/2022 Glomerular filtration rate = mL/min Abnormal >59 Dr [redacted] Sayers
05/12/2022 Serum creatinine = 58 umol/L New assay in use from 28/11/2022.
Results may be up to 5% lower than previous. Dr [redacted] Sayers
05/12/2022 Serum urea level = 3.7 mmol/L Dr Craig Sayers
05/12/2022 Serum chloride = 109 mmol/L Abnormal Dr Craig Sayers

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05/12/2022 Serum potassium = 4.8 mmol/L Dr Craig Sayers
05/12/2022 Serum sodium = 139 mmol/L Dr [redacted] Sayers
05/12/2022 Urea and electrolytes = <none> Dr [redacted] Sayers
05/12/2022 Serum alkaline phosphatase = 94 U/L U/L - ALP Ref. Limit for patients <30 days old is 0-380 iu/L
ALP Ref. Limit for patients <17 years old is 0-425 iu/L
ALP Ref. Limit for adults (>17 years) is 0-130 iu/L Dr Craig Sayers
05/12/2022 Serum albumin = 40 g/L Dr [redacted] Sayers
05/12/2022 Serum total protein = 66 g/L Dr [redacted] Sayers
05/12/2022 Serum total bilirubin level = 6 umol/L Dr [redacted] Sayers
05/12/2022 [redacted] alanine aminotransferase level = 17 IU/L Serum ALT level - Dr Craig Sayers
05/12/2022 AST serum level = 16 U/L U/L Dr [redacted] Sayers
05/12/2022 Liver function test = <none> Dr [redacted] Sayers
06/12/2022 Results recording Dr Craig Sayers
05/12/2022 Blood Glucose = 5.1 mmol/L
05/12/2022 Biochemical test = 9.3 Dr Craig Sayers
05/12/2022 Blood Glucose = mmol/L <none>
05/12/2022 Triage Ms [redacted] Binnie - No Data Recorded
05/12/2022 Results recording Dr [redacted] Sayers
05/12/2022 Nucleated red blood cell count = 0 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Basophil count = 0.1 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Eosinophil count = 0.5 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Monocyte count = 0.7 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Lymphocyte count = 2 10*9/L 10^9/L Dr Craig Sayers
05/12/2022 Neutrophil count = 5.2 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Mean corpusc. Hb. conc. (MCHC) = 326 g/L Dr [redacted] Sayers
05/12/2022 Mean corpusc. haemoglobin(MCH) = 29.9 pg Dr [redacted] Sayers
05/12/2022 Packed cell volume = 0.389 ratio Dr [redacted] Sayers
05/12/2022 Mean corpuscular volume (MCV) = 91.5 fL fl Dr [redacted] Sayers
05/12/2022 Red blood cell (RBC) count = 4.25 10*12/L 10^12/L Dr [redacted] Sayers
05/12/2022 Platelet count = 310 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Total white cell count = 8.5 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Haemoglobin estimation = 127 g/L Dr [redacted] Sayers
05/12/2022 Full blood count - FBC = <none> Dr [redacted] Sayers
05/12/2022 Triage Ms [redacted] Binnie - No Data Recorded
05/12/2022 Triage Mr [redacted] Mccallum
05/12/2022 Self-refe[redacted]iew Glasses/Fix Glasses. Dentist - Need check up, Need new dentures or dentures fixed. (Added to both waiting lists) JR Mr [redacted] Mccallum
05/12/2022 Third Party Consultation Mr [redacted] Mccallum
05/12/2022 Document Image Docman Attachment
05/12/2022 Administration Clinical Letter HMP Cornton Vale ECG Mr [redacted] Mccallum
05/12/2022 Third Party Consultation Mr [redacted] Mccallum
05/12/2022 Document Image Docman Attachment
05/12/2022 Administration Clinical Letter HMP Cornton Vale GASS Mr [redacted] Mccallum
05/12/2022 Triage Ms Laura Kilpatrick
05/12/2022 Seen by health care assistant Seen Georgina in drug monitoring clinic with hca cleary
Clinical observations obtained and all within normal limits
Bloods obtained u&e's lft,fbc glucose and lipids
ECG obtained in for MOA to review same.
GASS SCORE 18
Mental health team emailed with regards to same.
[redacted] Kilpatrick
HCA
05/12/2022
09:45HRS

Dr Gp Stirling
02/12/2022 Third Party Consultation Mr [redacted] Mccallum
02/12/2022 Document Image Docman Attachment
02/12/2022 Administration Clinical Letter HMP Cornton Vale Glasses Receipt Mr [redacted] Mccallum
28/11/2022 Third Party Consultation Mr [redacted] Mccallum
28/11/2022 Document Image Docman Attachment
28/11/2022 Administration Microbiology Results Forth Valley Royal Hospital Microbiology Mr Sharon Mccallum
28/11/2022 Triage Mr [redacted] Mccallum
28/11/2022 Planned telephone contact 07/12/2022 @ 14:00
[redacted] Miller
Dietician
Georgina Smith / 131344
04/102/1991
07971 647998
Telephone Appointment
Mr [redacted] Mccallum
25/11/2022 Triage Ms [redacted] Quail
25/11/2022 Drug addiction therapy
S - Met with Georgie for Prison Healthcare Addictions Service one to one support. Verbal consent to proceed obtained.
B - [redacted] is not in receipt of any MAT.
A - Appeared kempt, maintained eye contact, behaved in keeping with setting, communication was bright, reactive, normal rate and tone. [redacted] let me know that she had a parole hearing on Monday but that she has been told that this has to go to an oral hearing. She is coping well with this. She admits that she is feeling anxious but that she is getting on with this. She remains drug free and has no cravings.
R -See in 4/52.
[redacted] Quail, Substance Use and Recovery Team HMPCV
10.00
Ms [redacted] Quail
25/11/2022 Triage Ms [redacted]

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25/11/2022 Medication - risk monitoring Spotcheck carried out on 24/11/22. Amitriptyline, Quetiapine ,cetirizine all counted correctly Ms [redacted]

24/11/2022 Triage Ms [redacted] Binnie - No Data Recorded

24/11/2022 Other Miss Je[redacted] Mckeich

24/11/2022 Consultation ANP J McKeich/L[redacted]
Received email from dietician asking if patient still wishes to be seen, see entries below re diet, emailed back advising appointment to go ahead. Miss [redacted] Mckeich

24/11/2022 Other Miss [redacted] Mckeich

24/11/2022 Consultation ANP J McKeich/L[redacted]
Seen patient, ongoing issues with acne, states lymecycline not helping, obvious inflammed papuoles to face, mainly chin states allergic to acne lotions such as benzoyl peroxide - swelling/itchy, agreed to prescription for 3mths doxycycline 100mg daily, Dermol 500 and QV wash. Worsening advice given.

Also c/o headaches
pain forehead between eye brows
states post concussion syndrome since childhood following head injury
describes pain as tight, grabbing pain
occasional numbness to right side of face
usually occurs at night
no benefit from paracetamol
seen optician, told eye sight was ok, states getting tinted glasses
no obvious photosensitivity during consultation - states expereinces this on occasion
reduced sensation to right side of jaw
normal facial/eye movement
PERL
appears to have normal motor function
no red flags
Agreed to trial pizotifen 500mcg at night for one week then increased to 1.5mg as per BNF.
Worsening advice given.

Patient requesting to see [redacted]
States recent mood changes, sometimes gets anry with peers
Has parole meeting today
stress/anxiety levels higher than normal
Listed for review by [redacted] Miss [redacted] Mckeich

22/11/2022 Triage Ms Rachel [redacted]

22/11/2022 High vaginal swab taken Ms [redacted]

22/11/2022 Seen in [redacted] health clinic Seen concerned about vaginal growths related to HPV and abnormal vaginal discharge, advises has had clear discharge for approx 1 year, on examination nil of concern visible on vaginal walls or cervix, white creamy discharge, PH normal, HVS taken.
Discussed HPV and the monitoring in place for this and normal discharge and hormone [redacted] changes.
R [redacted] - [redacted] health nurse
22/11/2022 14:38 Ms [redacted]

21/11/2022 Triage Ms [redacted]

21/11/2022 Consultation Seen in HC at 1430.

S; Self referal to see nurse.

B: Right eye socket pain and ongoing skin issues.
A: Patient states she is experiencing pain in the socket of her right eye which is radiating to the side of her head which is the site of a previous injury. Patient states she has been seen by optition who can see no evidence of trauma. Patient also states her skin is constantly covered in spots and states her medication is no longer working.
R: Have referreed patient to attend GP clinic and worsening advice given.

PCT
[redacted]
21/11/22
15:39 Dr Gp Stirling

17/11/2022 Triage Mr Sharon Mccallum

17/11/2022 Self-referral Nurse/Doctor - Not disclosed. SP Mr [redacted] Mccallum

07/11/2022 Triage Ms Susan Payne

07/11/2022 Consultation Seen in Health Centre.@ 10:00

S; Self referral
B:Gluten/lactose free diet. Prescribed Lymecycline for skin issues and peppermint oil for stomach.
A: Patient stated she has issues with food being stuck in her throat and feels nauseous after eating. Patient states she has been having these symptoms for three weeks. Patient states she only eat once a day as does not like the food given to her. She is on a gluten/lactose free diet.
Patient states her skin has broken out and feels sore.
Patient also stated she would like an appointment with the [redacted] health nurse to discuss changes which may be due to having HPV and is concerned about 'changes'.
Paient also states she feels under stress due to up and coming parole hearing.

R: I have requested patient to eat small portions of food more regularly and not restrict herself to one meal a day.
I have also asked the patient to drink more fluids and exercise to help with peristalsis.
I have listed patient to attend [redacted] health clinic and have given patient worsening advice and to refer again if symptoms continue over the next couple of weeks.
Patient states she dose not require to talk to a MH nurse for stress issues.

PCT [redacted]
07/11/22
10:07
Dr Gp Stirling

03/11/2022 Third Party Consultation Ms [redacted] Rennie
03/11/2022 Document Image Docman Attachment

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

03/11/2022 Administration Administration HMP Cornton Vale Ms [redacted] Rennie
03/11/2022 Triage Ms [redacted] Rennie
03/11/2022 Self-refe[redacted] Nurse - Skin Issues and Well person clinic - CK Ms Jane Rennie
27/10/2022 Triage Ms [redacted] Binnie - No Data Recorded
27/10/2022 Triage Mrs [redacted]
27/10/2022 Ongoing review ANP L.Kane
ANP Actions
see entry 27/10/22
had huge excess of laxido
bisocodyl more effective for georgina and she is utlising this with good effect
therefore stopped laxido as requested
27/10/2022 Triage Mr [redacted] Cooper
27/10/2022 Mental health review Peebles staff approached me with a carrier bag full of laxido sachets (at least four full boxes and a dozen or more un-opened sachets) asking me to dispose of them as Georgie no longer wanted them as her constipation was successfully being manage by using bisocodyl, I spoke to [redacted] to confirm this and it was correct. All of the laxido was handed into our pharmacy to be either re-used or disposed of.
Entry by [redacted] RMN, Medgen, 27/10/22.
Dr Gp Stirling
20/10/2022 Triage Mrs Sadie Mckay - No Data Recorded
18/10/2022 Third Party Consultation Ms [redacted] Rennie
18/10/2022 Document Image Docman Attachment
18/10/2022 Administration Kardex HMP Cornton Vale Pharmacy Ms [redacted] Rennie
18/10/2022 Triage Ms Keleigh Mournian - No Data Recorded
17/10/2022 Third Party Consultation Mr [redacted] Mccallum
17/10/2022 Document Image Docman Attachment
17/10/2022 Administration Clinical Letter HMP Cornton Vale Medical Marker Mr [redacted] Mccallum
17/10/2022 Triage Mr [redacted] Mccallum
17/10/2022 Drug addiction notification Addictions/PHAS - Not disclosed. NT Dr Gp Stirling
17/10/2022 Self-referral Nurse/GP - Not disclosed, Skin clinic - Not disclosed. NT Mr [redacted] Mccallum
17/10/2022 Triage Ms [redacted]
17/10/2022 Consultation Seen in HC @10:30

Patient states she is using 2 Duvets under herr mattress which is helping with back pain.

I have completed a medical marker to allow this to happen. Copies to be forwarded to SPS, prisoner and scanned onto Vision.
PCT [redacted]
11:51
17/10/22 Dr Gp Stirling
14/10/2022 Triage Ms [redacted]
14/10/2022 Consultation SPS informed [redacted] in Pharmacy 13/10/22 that [redacted] was using a duvet cover under her mattress as she has back pain. The duvet has been removed by SPS. Will put patient into app to see The PCT regarding pain in her back.
PCT [redacted]
12:05
14/10/22

[redacted] Dr Gp Stirling
14/10/2022 Other Miss [redacted] Mckeich
14/10/2022 Medication - risk monitoring Spotcheck carried out on 13/10/22. Lymecycline, Amitriptyline,and Quetiapine (all weekly medications) counted and correct Reminded to store all medications in the safe. Prn Bisacodyl and Cetirizine and Etodolac too. Miss [redacted] Mckeich
04/10/2022 Surgery consultation Dr [redacted] Kildare
04/10/2022 Ongoing review MOA - [redacted] no longer wanting the GF crispbreads prescribed - therefore discontinued and in its place would like GF white rolls and GF Part baked fibre rolls
Kardex ammended with PIP codes as requested Dr [redacted] Kildare
29/09/2022 Triage Mrs [redacted] Mckay
29/09/2022 Consultation I spoke with ANP [redacted] and have printed a list of substitutes for Georgina to choose from instead of crispbread. This has been sent to Peebles House for her.

[redacted] McKay
PCT nurse
11:47am Mrs [redacted] Mckay
29/09/2022 Consultation Georgina asking if her diet can be changed as she gets the crispbread, which is prescribed through lloyds, but states cannot eat it. Has tried, but finds it is not tasty. Will list with ANP/GP to discuss, as there are no dieticians, and I cannot prescribe.

Also, stating she has been getting pains in both sides of her abdomen for some time. Observations BP 122/73 P78 T36.1 02 sats 98%
[redacted] McKay
PCT nurse
9:33am Mrs [redacted] Mckay
28/09/2022 Triage Ms Rebekah Weir - No Data Recorded
27/09/2022 Triage Mr [redacted] Mccallum
27/09/2022 Self-referral Nurse/GP - If possible to see dietitian about my diet choices. LS Mr Sharon Mccallum
23/09/2022 Triage Ms S [redacted] Payne
23/09/2022 Consultation Seen In Health Centre for covid and flu vaccine.

Spikevav Moderna Right arm.
Lot 200010A
EXP 21/03/2023
Flu Cell base Quadrivalent Left arm

LOT440051A
EXP 04/23

Administered with no issues . worsening advice give.#

Pct [redacted]
09.47

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09:47
23/09/22 Dr Gp Stirling
20/09/2022 Triage Ms S[redacted] Payne
20/09/2022 Consultation Seen in Health centre:

Follow up review of back pain from consultation on 17/09/22.

Patient states she still have very slight niggling pain in her front lower rib area. She is moving freely, it is not causing her sleep deprivation and she is still able to work.

I have given her worsening advice. Do not feel she require to see GP at this time.

PCT
[redacted]
20/09/22
11:21 Dr Gp Stirling
17/09/2022 Triage Ms [redacted]
17/09/2022 Consultation Seen in peebles:

Patient informed HCA [redacted] that she was experiencing back pain on 16/09/22. Negative for urinalysis.

When I attended patient today and asked what I could do for she couldnt remember at first then said she had rib pain front and back.

Nil diatery changes
Nil medication changes.

She is able to walk and move freely so see [redacted] clinical reason to see a GP this weekend.
Will list her for nurse clinic on 20/09/22 for a review.

PCT
[redacted]
11:39
17/09/22 Dr Gp Stirling
16/09/2022 Triage Ms [redacted] Kilpatrick
16/09/2022 Urinalysis = no abnormality = Urine sample left in pharmacy to be tested for infection? Same done and no infection at this time. I will List Georgina in clinic to see if still has ongoing symptoms of a uti. Dr Gp Stirling
16/09/2022 Triage Mrs Sylvia Barclay
16/09/2022 Mental health review Late entry from 14/09/2022 due to being unable to access vision. Discussed at MDMHT. Meeting chaired by Unit Manager [redacted]
S Barclay
MH Nurse
16/09/2022
Mrs Sylvia Barclay
16/09/2022 Third Party Consultation Ms [redacted] Rennie
16/09/2022 Document Image Docman Attachment
16/09/2022 Administration Clinical Letter HMP Cornton Vale Mental Health Ms [redacted] Rennie
15/09/2022 Triage Ms Nichola Docherty
15/09/2022 Administration Letter sent to Georgina advising of real location to named nurse. [redacted] spoke with Georgina briefly on 11th and Georgina advised of being more settled after situation earlier in the week. Due to ongoing need for guidance and reassurance, monthly contact is appropriate to contain levels of worry.

Nichola Docherty
MHN
15/09/22
1900hrs Ms Nichola Docherty
14/09/2022 T[redacted]ron Mccallum
14/09/2022 [redacted] Nurse/GP - Urine Infection. LS Mr [redacted] Mccallum
08/09/2022 Triage Ms Nichola Docherty
08/09/2022 Had a chat to patient Georgina advised she was feeling very tearful this evening and this was in response to having been into orderly room today. This was due to the fact she had utilised a fellow peers phone to phone the lady's relative after she had taken unwell. Georgina stated she had thought she was doing a helpful thing however I did inform her this was a complete breach of confidentiality and not her place to make these phonecalls. Giorgina is worried her fellow peer will be angry with her when she returns to Peebles House. I have offered reassurance this evening and advised she should learn from today's lesson and not repeat the same behaviour in the future. Will have a chat again with Giorgina on Sunday to check if she has settled. No significant distress, slightly anxious however able to articulate herself well and responded well to reassuring conversation. No issues relating to risk reported.

Nichola Docherty
MHN
08/09/22
1700hrs Ms Nichola Docherty
02/09/2022 Triage Ms [redacted] Kilpatrick
02/09/2022 Consultation Georgina was listed in clinic for a sitting and standing BP however on review of notes G.P has reviewed same and Georgina has also been sent letter to make aware of same.
Laura Kilpatrick
HCA
02/09/2022
11:23HRS Dr Gp Stirling
02/09/2022 Triage Ms L[redacted] Kilpatrick - No Data Recorded
30/08/2022 Triage Ms [redacted] Kilpatrick
30/08/2022 Letter encounter to patient Letter sent to make Georgina aware of normal bloods and normal bp as documented below on the 30/08/2022

[redacted] Kilpatrick
HCA
30/08/20222
16:49HRS Dr Gp Stirling

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30/08/2022 Triage Mr [redacted] Mccallum
30/08/2022 Next hospital appointment 05/09/2022 @ 13:00
Stirling Community Hospital
Physiotherapy
Georgina Smith / 131344
04/12/1991
Normal
Mr [redacted] Mccallum
30/08/2022 Other Dr [redacted] Kildare
30/08/2022 Ongoing review MOA - listed in Actions - states she has Asthma but has not been on treatment for a few years - not entry that Georgie reports its well controlled
Bloods entirely normal as is L&S BP - no further action needed at this time but can be listed for GP/ANP review if needed for on going symptoms Dr [redacted] Kildare
30/08/2022 Third Party Consultation Mr [redacted] Mccallum
30/08/2022 Document Image Docman Attachment
30/08/2022 Administration Kardex HMP Cornton Vale Pharmacy Mr Sharon Mccallum
29/08/2022 Triage Ms [redacted] Weir
29/08/2022 O/E - temperature level = 36.4 degC Dr Gp Stirling
29/08/2022 Pulse oximetry 98 % Dr Gp Stirling
29/08/2022 O/E - pulse rate 92 beats/min Dr Gp Stirling
29/08/2022 14:27.00 BP 126 / 77 taken Standing from Left Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
29/08/2022 14:27.00 BP 122 / 80 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
29/08/2022 Seen by health care assistant Seen in health centre for sitting and standing blood pressure as requested. Observations as documented.

[redacted] Weir
HCA
29/08/2022
1427HRS Dr Gp Stirling
26/08/2022 Third Party Consultation Ms [redacted] Rennie
26/08/2022 Document Image Docman Attachment
26/08/2022 Result Results Haematology Ms [redacted] Rennie
26/08/2022 Third Party Consultation Ms [redacted] Rennie
26/08/2022 Administration Clinical Letter HMPYOI Stirling Clinical Biochemistry Ms [redacted] Rennie
26/08/2022 Triage Ms [redacted]
26/08/2022 Consultation Requesting review of blood pressure and blood result by GP/ANP 30/08/22

PCT
[redacted]

15:53
26/08/22 Dr Gp Stirling
26/08/2022 Third Party Consultation Mr [redacted] Mccallum
26/08/2022 Administration Haemato[redacted]sults Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
26/08/2022 Third Party Consultation Mr [redacted] Mccallum
26/08/2022 Document Image Docman Attachment
26/08/2022 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
26/08/2022 Triage Ms [redacted] Cleary
26/08/2022 10:43.00 BP [redacted]10 / 71 taken Standing Cuff: Standard recall due: O/E - blood pressure reading Ms [redacted] Cleary
26/08/2022 O/E - pulse rate 92 beats/min STANDING Ms [redacted] Cleary
26/08/2022 Pulse oximetry 97 % STANDING Ms Michelle Cleary
26/08/2022 O/E - temperature level = 35.5 degC Ms Michelle Cleary
26/08/2022 O/E - pulse rate 84 beats/min Ms [redacted] Cleary
26/08/2022 Pulse oximetry 99 % Ms [redacted] Cleary
26/08/2022 10:35.00 BP 109 / 74 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Ms [redacted] Cleary
25/08/2022 Third Party Consultation Ms [redacted] Rennie
25/08/2022 Administration Clinical Letter HMPYOI Stirling Genetic Services Ms [redacted] Rennie
25/08/2022 Triage Miss Sarah Hogg
25/08/2022 Consultation S- seen in treatment room for Asthma review.
B- PMX Asthma.
A- Georgina has nil prescibed therapy for asthma at present. Reports that asthma is well controlled. Has nil concerns for same at present. Aware to contact nursing staff if any [redacted]. Also discussed heart murmmer. Reports nil concerns at present. Has had dizzy spells in past, is to have blood pressure monitored and GP to review recent blodds and await plan. Cardiology care plan to be typed and given to patient also. Patient in agreement with care plans and current plan. Worsening advice given.
R- Annual reviews, await further plan, if any from GP. Patient aware. Worsening advice given.

SN S Hogg
PCT 25/08/22 1448
25/08/2022 Third Party Consultation Ms [redacted] Rennie
25/08/2022 Document Image Docman Attachment
25/08/2022 Administration Clinical Letter HMP Cornton Vale Genetic Services Ms [redacted] Rennie
25/08/2022 Results recording Dr Craig Sayers
24/08/2022 Serum C reactive protein level = mg/L <5 Dr [redacted] Sayers
24/08/2022 Glomerular filtration rate = mL/min Abnormal >59 Dr [redacted] Sayers
24/08/2022 Serum urea level = 2.2 mmol/L Abnormal Dr [redacted] Sayers
24/08/2022 Serum creatinine = 63 umol/L Dr [redacted] Sayers
24/08/2022 Serum chloride = 103 mmol/L Dr [redacted] Sayers
24/08/2022 Serum sodium = 138 mmol/L Dr Craig Sayers
24/08/2022 Serum potassium = 4.2 mmol/L Dr [redacted] Sayers
24/08/2022 Urea and electrolytes = <none> Dr [redacted] Sayers
24/08/2022 Serum albumin = 40 g/L Dr [redacted] Sayers
24/08/2022 Serum total protein = 67 g/L Dr [redacted] Sayers
24/08/2022 AST serum level = 18 U/L U/L Dr [redacted] Sayers
24/08/2022 Serum alanine aminotransferase level = 14 IU/L Serum ALT level - Dr [redacted] Sayers

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NHS Confidential: Personal data [redacted] a patient

Georgina Smith 04/12/1991 662/91/440 — **All Consultations**

24/08/2022 Serum alkaline phosphatase = 91 U/L U/L - ALP Ref. Limit for patients <30 days old is 0-380 iu/L
ALP Ref. Limit for patients <17 years old is 0-425 iu/L
ALP Ref. Limit for adults (>17 years) is 0-130 iu/L Dr [redacted] Sayers
24/08/2022 Serum total bilirubin level = 6 umol/L Dr [redacted] Sayers
24/08/2022 Liver function test = <none> Dr [redacted] Sayers
24/08/2022 Results recording Dr [redacted]g Sayers
24/08/2022 Nucleated red blood cell count = 0 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Basophil count = 0.1 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Eosinophil count = 0.4 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Monocyte count = 0.5 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Lymphocyte count = 1.8 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Neutrophil count = 4.1 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Mean corpusc. Hb. conc. (MCHC) = 332 g/L Dr [redacted] Sayers
24/08/2022 Mean corpusc. haemoglobin(MCH) = 29.1 pg Dr Craig Sayers
24/08/2022 Packed cell volume = 0.398 ratio Dr [redacted] Sayers
24/08/2022 Mean corpuscular volume (MCV) = 87.9 fL fl Dr [redacted] Sayers
24/08/2022 Red blood cell (RBC) count = 4.53 10*12/L 10^12/L Dr Craig Sayers
24/08/2022 Platelet count = 296 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Total white cell [redacted] = 6.8 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Haemoglobin estimation = 132 g/L Dr [redacted] Sayers
24/08/2022 Full blood count - FBC = <none> Dr [redacted] Sayers
24/08/2022 Triage Ms [redacted] Cleary - No Data Recorded
24/08/2022 Other Miss [redacted] Mckeich - No Data Recorded
24/08/2022 Triage Ms Eilish Hennessy
24/08/2022 Seen by health care assistant Seen in HCA clinic for bloods. [redacted] gave verbal permission for bloods to be obtained. Bloods obtained and will be sent to labs.

E Hennessy - HCA
24/08/2022
10:45 Dr Gp Stirling
23/08/2022 Third Party Consultation Ms [redacted] Rennie
23/08/2022 Document Image Docman Attachment
23/08/2022 Administration Clinical Letter HMPYOI Stirling Genetic Services Ms [redacted] Rennie
23/08/2022 Triage Mrs [redacted]
23/08/2022 Ongoing review ANP L [redacted]
review of letter from genetic councillor
her extended family history was traced
it does not look like she has an inherited susceptability to cancer
however they have not been able to find out any more information about her [redacted] or [redacted] who were diagnosed with breast cancer in their 30's
If they could confirm her [redacted] and [redacted] were diagnosed with breast cancer at such a young age her lifetime risk may be moderately increased, if confirmed she would be eligible for screening from the age of 35
georgina has to contact them again in 5 years time and they will then see if there is any further information they can find and decide if georgina requires to be referred for assessment at that time

If she finds out any further information regarding her FH then we can inform genetics

I have asked admin to send copy of letter to patient as it is addressed to her
23/08/2022 Third Party Consultation Ms [redacted] Rennie
23/08/2022 Administration Clinical Letter HMP Comton Vale Genetic Services Ms [redacted] Rennie
23/08/2022 Triage Ms [redacted]
23/08/2022 Occupational therapy Mental Health Occupational Therapy - Seen for planned contact - [redacted] reported that her RMT meeting is today, and is feeling anxious regarding same due to recently being put on report for allowing another prisoner access to her phone. We discussed activities that [redacted] can engage with this morning to help manage her anxiety and also self care activities that [redacted] can participate in following her RMT meeting to help manage her emotion. Session was brief due to arrival of lunch, agreed that I would meet with [redacted] next week for follow up. Ms [redacted]
23/08/2022 Triage Ms Laura Kilpatrick
23/08/2022 [redacted] by health care assistant Seen Georgina in clinic for bloods, unable to obtain managed to get flash back however not enough to fill the tube. Georgina stated that she has not had much to drink, encouraged to drink more fluids. Relisted for further appointmer [redacted] Kilpatrick
HCA
23/08/2022
10:12HRS Dr Gp Stirling
23/08/2022 Triage Ms [redacted] Kilpatrick
23/08/2022 09:56.00 BP 128 / 77 taken Standing Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
23/08/2022 09:54.00 BP 122 / 75 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
23/08/2022 Pulse oximetry monitoring 98 % Dr Gp Stirling
23/08/2022 O/E - pulse rate 91 beats/min Dr Gp Stirling
22/08/2022 Triage Ms [redacted] - No Data Recorded
21/08/2022 Triage Mr [redacted] - No Data Recorded
19/08/2022 Triage Ms Susan [redacted]
19/08/2022 Consultation Seen in Health centre.

Patient states she has been having dizzy spells for one week when going from sitting to standing.
Sitting and standing blood pressure was taken

Sitting
BP 128/75
resps 16
sats97%
pulse 82
temp 36.8

Standing
BP 123/83
resps 16

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BP 123/83
resps 16
temp 36.5
pulse 90
Sats 97%

Checked ears for any infection or inflamation. Nil present.
Asked patient if she required an eye test. None required as had a recent eye test.

Have advised patient to keep well hydrated.
Advised patient if she were to feel unwell to report back to the PCT.
Repeat sitting and standing observation to taken twice weekly for two weeks from 22/08/22 and blood LFTs U&Es TFTs and CRP to be taker on 22/08/22

[redacted]
19/08/22
14:52
[redacted]
18 Dr Gp Stirling

19/08/2022 Triage Miss Sarah Hogg - No Data Recorded
16/08/2022 Triage Mr [redacted] Mccallum
16/08/2022 Self-referral Nurse/GP - Dizzy spells everytime I stand up. LS Mr [redacted] Mccallum
09/08/2022 Triage Dr Imogen [redacted]
09/08/2022 Seen in [redacted] clinic Seen in SH clinic. HPV positive on recent smear, so on 12 month smears at the moment. Reassured about that and discussed HPV. Also discussed family hx of throat cancer [redacted] and [redacted] - discussed no need to do anything in light of that information. Dr [redacted] GMC 7421177 Dr Imogen [redacted]
08/08/2022 Third Party Consultation Ms [redacted] Rennie
08/08/2022 Document Image Docman Attachment
08/08/2022 Administration Clinical Letter HMPYOI Stirling Breast Screening Ms Jane Rennie
08/08/2022 Third Party Consultation Mrs [redacted]
08/08/2022 Document Image Link broken, document rescanned and resubmitted to Vision.
08/08/2022 Administration Clinical Letter HMP Cornton Vale Breast Screening Mrs [redacted]
01/08/2022 Triage Ms Nichola Docherty
01/08/2022 Had a chat to patient Spoke with Georgina in Peebles today in the absence of her allocated MH nurse [redacted] Beattie. Had beer previously decided within MHT that Georgina could be offered the opportunity to secure [redacted] if she wished. Georgina has advised sh is due to attend a meeting regarding the possibility of being transferred to one of the community facilities within Dundee. This should be discussed in August with SPS. Georgina has advised she will await the outcome of this and should she be moving on then she will not require Psychology input within Cornton Vale. She has agreed to update us of her own accord. No further MH input from SSN Beattie is required at this time. No significant [redacted] being raised by Georgina or Peebles staff. Continues to attend her work party. DISCHARGED from caseload.

Nichola Docherty
[redacted]
01/08/22
1530hrs Ms Nichola Docherty
29/07/2022 Triage Ms [redacted] Cleary - No Data Recorded
29/07/2022 Triage Ms [redacted] Quail
29/07/2022 Drug addiction therapy
S - Met with [redacted] for Prison Healthcare Addictions Service one to one support. Verbal consent to proceed obtained.
B - [redacted] is not in receipt of any MAT.
A - Appeared kempt, maintained eye contact, communication was bright, reactive, normal rate and tone. I met with Georgie at her request. [redacted] has been in prison 10 years now and is due for parole again soon. She has been in the community once before but she lasted 7 weeks. She admitted that she drinks in the community when she has any problems which she feels that she cannot cope with. She is very aware that this is not a normal way to deal with issues and is something that she wants to work on. We have agreed that we will work through some coping strategies and hopefully these will help her in the future.
R -See in 2/52.
[redacted] Quail, Substance Use and Recovery Team HMPCV
11.00
Ms Kathleen Quail
29/07/2022 Third Party Consultation Ms Jane Rennie
29/07/2022 Document Image Docman Attachment
29/07/2022 Administration Clinical Letter HMP Cornton Vale Medical Marker Ms [redacted] Rennie
28/07/2022 Other Miss [redacted] Mckeich - No Data Recorded
28/07/2022 Other Miss [redacted] Mckeich
28/07/2022 Consultation ANP actions, gluten free choices prescribed on prescription sheet as per guidance from dietician. See email reponse below from same:
"Thanks for sending through Georgina's food and symptom diaries.
I've spent some time going through all of these to try and assess what the current situation is and if there are any obvious triggers. The earlier referral by Dr. Kildare described the main symptoms as pain, bloating and intermittent constipation but having looked at Georgina's diaries she's reporting very regular episodes of loose stools with odd days of no movement (understandable given the amount of loose stools). She also refers to significant numerous other symptoms which are obviously distressing for her.
Most of her reported symptoms could be caused by allergies or intolerances. Unfortunately we don't have an allergy service within FV and no specialist allergy dietitian. If there's a concern about possible anaphylactic reactions then it would be better to refer her to the Allergy Service in Glasgow. The only other way to check for intolerances that cause symptoms like rashes/ulcers etc is to do a full exclusion diet, something that's unfortunately just impossible to carry out in the prison environment. Even for free living individuals it's usually just too overwhelming and challenging!
Loose stools could potentially be caused by food intolerances and possibly linked to the other symptoms but having looked at her food diar her diet is very low in fibre and very high in fat both of which could be causing it. I'm happy to keep Georgina on my waiting list (it's about 5 months at the moment unfortunately) for a telephone/Near Me consultation as long as she has realistic expectations of what I can offer.
Georgina mentioned a couple of times in her diary about doing a trial and being fed up of it? Is the trial just writing her diary or was there a medication/food trial she was doing at the same time?
Given the list of symptoms that Georgina has it's probably reasonable to allow her continued access to gluten free foods and soya milk sol based on what she's telling us because there's not really any way of checking her claims.

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Georgina Smith 04/12/1991 662/91/440 Georgina has it's probably reasonable to allow her continued access to gluten free foods **All Consultations**

based on what she's telling us because there's not really any way of checking her claims.
If you could add markers on for these and maybe mention that fat/lack of fibre can be a cause then I'll keep her on my waiting list and opt her in closer to the time - she might not need or want to be seen if these things have been changed.
Hope this helps - let me know your thoughts and we can take it from there.
Best wishes
[redacted]
Lynn [redacted]
Community Dietitian
Stirling Community Hospital
Can nursing staff please follow up in advise from dietician anout diary/loose stools,fat & fibre.
Miss [redacted] Mckeich
28/07/2022 Triage Ms Jill Ramsay
28/07/2022 Pt advised re gluten free diet Advice Diet Prescribed gluten free diet Dr Gp Stirling
28/07/2022 Triage Ms Jill Ramsay
28/07/2022 Consultation Seen in clinic, gluten free foods chosen off prescription list. Total of 14 points used. review appointment made for 2/52 to review how diet list is going.
Jill Ramsay PCT SN 28/07/2022 14:38 Dr Gp Stirling
26/07/2022 Triage Ms [redacted]
26/07/2022 Occupational therapy Mental HEalth Occupational Therapy - Seen for planned OT contact at Georgies request. [redacted] stated that she feels she is requiring more regular emotional support and feels let down by SPS and NHS services in prison. Georgies main concerns at present are [redacted] to her physical health and lack of progression through RMT. Described feeling anxious about the possibility she has cancer due to raised HPV levels and changes to her cycle. Reports menstrual bleeding lasting 2-3 weeks and thick gel like discharge. Advised [redacted] that if these symptoms are new she should submit a referral to [redacted] health nurse for further examination or reassurance. Georgie dismissive of this advice. Stated that she had received a letter informing her that she is high risk of cancer, and we discussed how this can lead to heightened anxiety and increased vigilance towards potential symptoms. [redacted] also voiced that she feels other people are being prioritised for progression/ rehabilitation , and this is making her feel both angry and uncared for. [redacted] was encouraged to focus on issues that are within her control and to try not to compare her situation to other prisoners as this is likely to increase her frustration and have a negative impact on her mental wellbeing. Focussed on identifying positive aspects of routine that [redacted] is developing in prison, and how this contributes to her rehabilitation and readiness for living more independently on liberation. OT Plan - Liaise with Named Nurse regarding ongoing support. Fortnightly OT contact to be offered for emotional support. Ms [redacted]
12/07/2022 Triage Ms [redacted]
Letter on: 12/07/2022 type: Referral Smear result
05/07/2022 Triage Ms [redacted] Kilpatrick
05/07/2022 Seen by health care assistant Seen Georgina in Peebles house made aware of xray results as documented below.

Laura Kilpatrick
HCA
05/07/2022
20:22HRS Dr [redacted] Sayers
05/07/2022 Other Miss [redacted] Mckeich
05/07/2022 Consultation ANP actions, review xray of cervical spine, no significant bony or joint abnormality found. Can nursing staff please inform patient of same. Miss [redacted] Mckeich
05/07/2022 Third Party Consultation Mr [redacted] Mccallum
05/07/2022 Document Image Docman Attachment
05/07/2022 Administration Clinical Letter HMP Cornton Vale Dental General Mr [redacted] Mccallum
04/07/2022 Third Party Consultation Ms [redacted] Rennie
04/07/2022 Document Image
04/07/2022 Result Results X-Ray Ms [redacted] Rennie
04/07/2022 Triage Ms L [redacted] Kilpatrick
04/07/2022 Seen by health care assistant [redacted] Georgina in her cell in Peebles house, writer Made Georgina aware of wait for Dietetics 16-20 weeks, as advised by admin staff.
[redacted] Kilpatrick
HCA
04/07/2022
16:09HRS
Dr [redacted] Sayers
04/07/2022 Third Party Consultation Mr [redacted] Mccallum
04/07/2022 Administration Clinical Letter HMP Cornton Vale Radiology Mr [redacted] Mccallum
30/06/2022 Triage Mrs [redacted] Watt
30/06/2022 Mental [redacted] review Caught up briefly with [redacted] this lunchtime in Peebles. She was voicing her her [redacted] re lack of information on ongoing tests/requests. Stated she feels abandoned and that noone was listening to her.
I have appointed her to Dr Swinson's clinic for a medication review, she reports she has been having disturbe sleep and increased anxiety.
Appointment to see [redacted] health nurse for feedback on Smear test.
I have advised her again that her X-Ray result was not back.
Admin will find out waiting time for Dieticians and will advise staff so we can give [redacted] that information.
Dentist: Admin will check out waiting time for dentist and inform staff to pass on information to [redacted]
Letter sent to [redacted] to inform her of this.

[redacted] Watt
SSN MH
30/06/22 15:05 Dr [redacted] Sayers
30/06/2022 Triage Mrs [redacted] Watt - No Data Recorded
29/06/2022 Triage Ms [redacted] Kilpatrick
29/06/2022 Letter encounter to patient Letter sent to Georgina to make aware of change in shampoo

[redacted] Kilpatrick
HCA
29/06/2022
16:22HRS Dr [redacted] Sayers
29/06/2022 Triage Ms [redacted]

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[redacted]

Georgina Smith 04/12/1991 662/91/440 [redacted] **Consultations**

29/06/2022 Ongoing review ANP action
ANP K [redacted]
patient requeting a change of shampoo from dermax to dandrazole as finding current shampoo drying to her hair

I have prescribed Ketoconazole 2%shampoo as is same active ingredients. use 2-3 times per week
29/06/2022 Triage Ms Kerly [redacted] No Data Recorded
28/06/2022 Triage Ms [redacted] Kilpatrick
28/06/2022 Administration Listed in nurse clinic to review scalp, Listed in SH clinic for smear results.
[redacted] Kilpatrick
HCA
28/06/2022
20:14HRS Dr Gp Stirling
28/06/2022 Other Miss [redacted] Mckeich - No Data Recorded
28/06/2022 Other Miss [redacted] Mckeich
28/06/2022 Consultation ANP actions, patient requesting result of back xray and smear result. Portal and [redacted] store checked, no results reported on back as yet. Suggest referral to SH clinic for result smear.
Patient also requesting prescription ketoconazole shampoo in place of dermax. Can nursing staff please assess patient's scalp to see in there is a clinical need for this shampoo - such as fungal infection to scalp/dermatitis, if so happy to prescribe. Miss [redacted] Mckeich
28/06/2022 Other Miss Jackie Mckeich - No Data Recorded
27/06/2022 Triage Ms Jill Ramsay - No Data Recorded
27/06/2022 Triage Ms [redacted] Rennie
27/06/2022 Self-referral Doctor and Well Woman - KJM - spine x-rays and smear results
23/06/2022 Triage Mr [redacted] Cooper - No Data Recorded
21/06/2022 Triage Mrs Louise [redacted]
21/06/2022 Ongoing review [redacted] L [redacted]
Asked by pharmacy to prescribe paracetamol 1 week course as patient is covid positive
same done
21/06/2022 Triage Ms [redacted] Cleary - No Data Recorded
21/06/2022 Triage Ms Jill Ramsay
21/06/2022 Consultation not seen in clinic todayas covid positive and stated appointment wasn't urgent, advised her to put another slip in.
Jill Ramsay PCT SN
21/06/2022 10.54
Dr Gp Stirling
21/06/2022 Triage Dr [redacted] Murray
21/06/2022 Failed encounter listed for SH clinic but isolating with covid so not seen. I will ask R [redacted] to relist. Dr Imogen [redacted]
20/06/2022 Triage Ms [redacted] Rennie
20/06/2022 Referral to mental health team Struggling emotionally - JR Ms [redacted] Rennie
20/06/2022 Triage Ms Claire Mcbeath - No Data Recorded
19/06/2022 Triage Ms [redacted] Mckay
19/06/2022 Consultation Contacted by SPS at 11:00hrs to advise that Georgina has tested positive for covid and is now in isolation. SPS mentioned that Georgina has previously had all her COVID vaccinations
[redacted] McKay (RN)
19/08/2022 @ 11:05 Dr Gp Stirling
14/06/2022 Triage Ms [redacted] Rennie
14/06/2022 Next hospital appointment Forth Valley - X-Ray - 17/06/2022 @ 09:20
13/06/2022 Triage Ms Eilish Hennessy
13/06/2022 Seen by health care assistant Georgina was seen by HCA Eilish and SN Keyleigh in clinic for opening of letter. Letter was response to complaint, no concerns raised by Georie, was satisfied with letter.

E Hennessy - HCA
13/06/2022
21:20 Dr Gp Stirling
13/06/2022 Triage Mrs [redacted]
04/06/2022 Joint consultation with georgina, myself and claire Mcbeath.
Georgie expressing that she has a rash on her body from not receiving her requested diet- on examination, [redacted] see. 2 x small red hair folicles.
States blisters all over her mouth- again, Nill evident.
Throat slightly red, advised to take paracetamol at this time.
[redacted] happy to await dietician appointment as her food diary had many different food types and symptoms and we require specialist advice regarding same.
[redacted] also expressed about her lump at the top of her neck- already listed for ANP to review same.
C reid sn Dr Gp Stirling
09/06/2022 Third Party Consultation Ms [redacted] Rennie
09/06/2022 Document Image Docman Attachment
09/06/2022 Administration Clinical Letter HMP Cornton Vale X-Ray Ms [redacted] Rennie
09/06/2022 Triage Ms Keleigh Mournian
09/06/2022 Consultation ATSP for throat swelling and headache. On examination observations as follows; BP 116/81 T 37.5 P 86 SPO2 97%
Throat slightly red on examination. Advised to take paracetamol for pain.
Keyleigh Mournian
PCT
09.06.2022
20.44 Dr Gp Stirling
08/06/2022 Third Party Consultation Mr Sharon Mccallum
08/06/2022 Administration Link broken, document rescanned and resubmitted to Vision.
Mr [redacted] Mccallum
08/06/2022 Triage Mrs [redacted] Kane

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

08/06/2022 Consultation ANP L.Kane
Patient seen due to swelling top of back
OE some swelling evident cervical area
boney prominence felt however has history of kyphosis
reasonable ROM of neck however states pain +++
patient states pain worsened over last 3 weeks
also has chronic back pain
no neuropathic type pain described
patient requesting analgesia as celecoxib and paracetamol not effective
wishes NSAID that she has not tried before
prev tried Naproxen, diclofenac, meloxicam, ibuprofen
therefore trial of etodolac 600mg OD
due to significant increase in pain, swelling and boney prominence i have referred for C- spine XR
Patient happy with this
08/06/2022 Triage Ms Rachel [redacted]
19/04/2022 Recall on 19/04/2023 for Cervical smear: negative with Ms [redacted] Status: Complete
19/04/2022 Cervical smear: negative HPV - Human papillomavirus test positive recall due: 19/04/2023 1 year recall Ms [redacted]
08/06/2022 Triage Ms [redacted] Rennie - No Data Recorded
06/06/2022 Triage Mr [redacted] Mccallum
06/06/2022 Self-referral Well Person Clinic - Discuss smear results, support and advice for next steps. NT Mr [redacted] Mccallum
03/06/2022 Triage Mrs [redacted] Mckay
03/06/2022 Consultation Seen for nurse referral form. She states has put in lots of nurse referral forms when she is not well, but only 6 recorded and have been actioned since January 2022. I have reassured Georgina that she has [redacted] referred to dietician and just waiting on appointment. Georgina complaining of sore back, has a curvature and I note her neck is quite swollen and when assessing it, it became sore and pain shot to the bottom of her back. Advised is in for seeing MO on Tuesday and this can be looked at then.She is already on celecoxib 200mg and amitriptylline 75mg. Feels she needs her quetiapine looked at, therefore have referred her to the mental health team.

Also complaining of a sore throat and mouth. On examination, her throat was swollen and slightly red, also, it was noted she has got small blisters in her mouth, tongue and lips. For MO to assess all of this. Georgina happy with consultation.

[redacted] McKay
PCT nurse
1040am Mrs [redacted] Mckay
02/06/2022 Triage Ms Eilish Hennessy
02/06/2022 Seen by health care assistant Georgina has been written a letter to advise of the refferal put in place for dietician. Furthermore Georgina has advised of back pain following discussion with Charge Nurse C McBeath Georgina has been listed for primary care review for 03/06/2022 and placed on referal list.

Eilish Hennessy
HCA
02/06/2022
16:15 Dr Gp Stirling
02/06/2022 Triage Mr [redacted] Mccallum
02/06/2022 Self-referral Nurse/GP - Curved spine inflamed and painful, Back and shoulders swollen up. DM Mr [redacted] Mccallum
01/06/2022 Triage Ms Eilish Hennessy
01/06/2022 Seen by health care assistant Spoke to Georgina at medication tonight at the request of SSN C [redacted] Explained to Georgina that a refferal had been put in place for dietician due to the submission of food diary at the request of ANP. Georgina was accepting of this information and understood. Georgina advised she was experincing back pain due to a spinal condition. Georgina was advised to put in NRI and primary care team would pick this up. No further [redacted] at present.

Eilish Hennessy - HCA
01/06/2022
21:20 Dr Gp Stirling
01/06/2022 Triage Ms Jill Ramsay - No Data Recorded
30/05/2022 Administration Ms S [redacted] Kelly-Gutowski
30/05/2022 Self-referral Dentist. Ms Sonja [redacted]
27/05/2022 Other Miss J [redacted] Mckeich
27/05/2022 Consultation ANP actions, given copy of food diary patient has completed, had issue regarding coeliac, unable to do test as patient not agreeable to eating normal diet for 6 weeks. After discussion with staff patient states is unable to drink normal milk and is requesting soya milk and no spices. Discussed food diary with Dr Kildare, agreed to re-refer back to dietician, referral completed. Miss [redacted] Mckeich
27/05/2022 Referral Letter Miss [redacted] Mckeich
27/05/2022 SCI Referral Letter
27/05/2022 Third Party Consultation Ms [redacted] Rennie
27/05/2022 Document Image Docman Attachment
27/05/2022 Administration Clinical Letter HMP Cornton Vale Dietician Ms [redacted] Rennie
27/05/2022 Other Miss [redacted] Mckeich - No Data Recorded
24/05/2022 Other Dr [redacted] Kildare
24/05/2022 Ongoing review MOA - Desogestrel discontinued on Kardex at request of [redacted] who handed them back to Pharmacy staff
Dr [redacted] Kildare
23/05/2022 Triage Ms J [redacted] Rennie
23/05/2022 Self-referral Staff Member, no name given would like to discuss patients diets TEL 265335
18/05/2022 Triage Ms [redacted]
18/05/2022 Medication - risk monitoring Delivering a months supply of Desogestral to GS today. GS asked for them to be returned as not effective (still bleeding) Spoke to nursing staff re SHC clinic referral .Desogestral disposed of at HC. Ms [redacted]
17/05/2022 Triage Ms [redacted] Kilpatrick
17/05/2022 Letter encounter to patient Letter sent to make Georgina aware that recent test came back negative as documented on the 17/05/2022 and the 13/05/2022
QFIT-NEGATIVE
Helicobacter-NEGATIVE
Calprotectin-NEGATIVE
[redacted] Kilpatrick
HCA
17/05/2022
16:49HRS Dr Craig Sayers

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

17/05/2022 Triage Mrs Sylvia Barclay
17/05/2022 Multidisciplinary case conference Discussed at RMT. SW and forensic psychology to meet with Georgina to discuss future plans and clarify potential referrals. No plans at present for further programmes. [redacted] will be able to apply for further progression in July 2022.

S Barclay
MH Nurse
17/05/2022 Mrs Sylvia Barclay
17/05/2022 Other Dr [redacted] Kildare
17/05/2022 Ongoing review MOA - see Faecal calprotectin result <50 - therefore normal - symptoms are likely IBS [redacted]
Can discuss at an appointment if needed but really needs to have blood taken for coeliac serology in first instance to confirm if coeliac or not
Dr [redacted] Kildare
16/05/2022 Third Party Consultation Mr [redacted] Mccallum
16/05/2022 Document Image Docman Attachment
16/05/2022 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
13/05/2022 Other Miss [redacted] Mckeich - No Data Recorded
13/05/2022 Other Miss [redacted] Mckeich
13/05/2022 Consultation ANP entry J McKeich/K [redacted]
ANP mail, qFit and helicobacter negative, still awaiting faecal calprotectin Miss [redacted] Mckeich
13/05/2022 Results recording Dr Craig Sayers - No Data Recorded
13/05/2022 Results recording Dr [redacted] Sayers
06/05/2022 Biochemical test = Abnormal <50 Dr [redacted] Sayers
12/05/2022 Third Party Consultation Mr [redacted] Mccallum
12/05/2022 Document Image Docman Attachment
12/05/2022 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
12/05/2022 Triage Ms [redacted] Murphy
12/05/2022 Ongoing review ANP mail
ANP clinic
clinical results H-pylori negative
await fecal protectin
12/05/2022 Triage Ms [redacted]
12/05/2022 Ongoing review ANP clinic not seen due to same already advised to patient
see previous entries patient has been seen and letter have been sent regarding diet.
12/05/2022 Other Miss [redacted] Mckeich - No Data Recorded
11/05/2022 Third Party Consultation Mr [redacted] Mccallum
11/05/2022 Document Image Docman Attachment
11/05/2022 Administration Microbiology Results Forth Valley Royal Hospital Microbiology Mr [redacted] Mccallum
11/05/2022 Results recording Dr [redacted] Sayers
06/05/2022 Biochemical test = Not Detected
- Result from Blood Science, Ninewells Hospital.
Not Detected Dr [redacted] Sayers
11/05/2022 Results recording Dr [redacted] Sayers
06/05/2022 Biochemical test = Dr [redacted] Sayers
06/05/2022 Faecal calprotectin content = <none> Dr [redacted] Sayers
10/05/2022 Triage Mr [redacted] Mccallum
10/05/2022 Referral to mental health team - Diet issues impacting on Mental Health - LS Mr [redacted] Mccallum
10/05/2022 Self-referral Nurse/GP - Diet issues - stopped eating due to change in diet - LS Mr [redacted] Mccallum
10/05/2022 Other Dr Jack Kildare
10/05/2022 Letter encounter to patient , , lab reults from last stool sample normal (negative) letter sent to Georgina advising same.

N.Brown
HCA
10/05/2022 17:03 Ms Elaine Mcadam
10/05/2022 Fibrocystic disease of breast See letter from Gen Surg (Breast Team) - has Fibrocystic changes in her breast - they have written to Clinical Genetics based on her FHx of breast cancer to see if she needs enhanced screening Dr [redacted] Kildare
10/05/2022 Triage Dr [redacted]
10/05/2022 Seen in [redacted] health clinic Seen in clinic with R [redacted]

Discussed labiaplasty referral - [redacted] awaiting an appointment from Glasgow. Discussed waiting list very long, and that there is a long process once they see her of medical photography, MDT input etc and most cases get rejected.Dr [redacted] Dr [redacted]
09/05/2022 Third Party Consultation Ms [redacted] Rennie
09/05/2022 Document Image Docman Attachment
09/05/2022 Administration Clinical Letter HMP Cornton Vale General Surgery Ms [redacted] Rennie
06/05/2022 Third Party Consultation Mr S [redacted] Mccallum
06/05/2022 Document Image Docman Attachment
06/05/2022 Administration Clinical Letter HMP Cornton Vale Clinical Notes Mr Sharon Mccallum
06/05/2022 Third Party Consultation Mr [redacted] Mccallum
06/05/2022 Document Image Docman Attachment
06/05/2022 Administration Clinical Letter HMP Cornton Vale Patient letter Mr [redacted] Mccallum
05/05/2022 Surgery consultation Dr [redacted] Kildare
05/05/2022 Ongoing review ANP [redacted] J.Kildare
Actions
See bloods - all normal
See Micro report - tongue swab - moderate growth of Candida species - for Fluconazole 50mg OD 7/7 Dr [redacted] Kildare
05/05/2022 Ongoing review Listed for GP clinic today - to discuss testing for coeliac disease again - see prev entries - unfortunately I have nothing further to add at this stage - in order for us to confirm/refute a diagnosis of coeliac disease we need accurate serology which involves eating gluten for at least 6 /52 prior to testing.

Letter from Dieticians back in Jan 22 state that gluten senstivity is unlikey but could be wheat [redacted] - [redacted] therefore exclude wheat from diet but would still be able to eat rice crispies etc and wouldnt need to worry about contamination.

I have not seen her today but sent a letter outling this. [redacted] has already been seen by ANP J.McKeich last week for a fairly lengthy appointment. Dr [redacted] Kildare

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

05/05/2022 Triage Ms [redacted] - No Data Recorded
04/05/2022 Third Party Consultation Mr Sharon Mccallum
04/05/2022 Document Image Docman Attachment
04/05/2022 Administration Kardex HMP Cornton Vale Pharmacy Mr [redacted] Mccallum
04/05/2022 Other Miss [redacted] Mckeich - No Data Recorded
04/05/2022 Third Party Consultation Ms [redacted] Rennie
04/05/2022 Document Image Docman Attachment
04/05/2022 Result Results HMP Cornton Vale All results Ms [redacted] Rennie
02/05/2022 Triage Ms [redacted] Durrant
02/05/2022 Indirect encounter sample provided for labs however unable to send due to it being a bank holiday. new sample pots sent to patient with letter advising of same. Dr [redacted] Sayers
02/05/2022 Triage Ms [redacted] Sinclair
02/05/2022 Medication - risk monitoring Prescribed Anusol returned to Health Centre for disposal as pt does not want to use this. Disposed of 020522 Ms [redacted]
02/05/2022 Consultation
Seen in healthcentre to advise of recent advice from GP- no evidence of gluten intolerence test therefore patient is encouraged to undertake this test.
Patient advises that she is not happy with this outcome and she has requested to speak to Dr Sayers to discuss options.
Advised that I will list for GP discussion.

[redacted] SN
02/05/2022, 10:06 Ms [redacted]
30/04/2022 Results recording Dr [redacted] Sayers
29/04/2022 Serum C reactive protein level = mg/L <5 Dr Craig Sayers
29/04/2022 Serum amylase level = 35 U/L U/L Dr [redacted] Sayers
29/04/2022 Glomerular filtration rate = mL/min Abnormal >59 Dr [redacted] Sayers
29/04/2022 Serum urea level = 3 mmol/L Dr [redacted] Sayers
29/04/2022 Serum creatinine = 63 umol/L Dr Craig Sayers
29/04/2022 Serum chloride = 108 mmol/L Dr [redacted] Sayers
29/04/2022 Serum sodium = 138 mmol/L Dr [redacted] Sayers
29/04/2022 Serum potassium = 5 mmol/L Dr [redacted] Sayers
29/04/2022 Urea and electrolytes = <none> Dr [redacted] Sayers
29/04/2022 Serum albumin = 41 g/L Dr [redacted] Sayers
29/04/2022 Serum total protein = 67 g/L Dr [redacted] Sayers
29/04/2022 AST serum level = 17 U/L U/L Dr [redacted] Sayers
29/04/2022 Serum alanine aminotransferase level = 18 IU/L Serum ALT level - Dr [redacted] Sayers
29/04/2022 Serum alkaline phosphatase = 91 U/L U/L - ALP Ref. Limit for patients <30 days old is 0-380 iu/L
ALP Ref. Limit for patients <17 years old is 0-425 iu/L
ALP Ref. Limit for adults (>17 years) is 0-130 iu/L Dr [redacted] Sayers
29/04/2022 Serum total bilirubin level = 5 umol/L Dr [redacted] Sayers
29/04/2022 Liver function test = <none> Dr [redacted] Sayers
30/04/2022 Results recording Dr [redacted] Sayers
29/04/2022 Nucleated red blood cell count = 0 10^9/L 10^9/L Dr Craig Sayers
29/04/2022 Basophil count = 0.1 10^9/L 10^9/L Dr [redacted] Sayers
29/04/2022 Eosinophil count = 0.3 10^9/L 10^9/L Dr [redacted] Sayers
29/04/2022 Monocyte count = 0.5 10^9/L 10^9/L Dr Craig Sayers
29/04/2022 Lymphocyte count = 1.9 10^9/L 10^9/L Dr [redacted] Sayers
29/04/2022 Neutrophil count = 3.7 10^9/L 10^9/L Dr [redacted] Sayers
29/04/2022 Mean corpusc. Hb. conc. (MCHC) = 344 g/L Dr [redacted] Sayers
29/04/2022 Mean corpusc. haemoglobin(MCH) = 28.9 pg Dr [redacted] Sayers
29/04/2022 Packed cell volume = 0.378 ratio Dr [redacted] Sayers
29/04/2022 Mean corpuscular volume (MCV) = 84 fL fl Dr [redacted] Sayers
29/04/2022 Red blood cell (RBC) count = 4.5 10^12/L 10^12/L Dr [redacted] Sayers
29/04/2022 Platelet count = 303 10^9/L 10^9/L Dr [redacted] Sayers
29/04/2022 Total white cell count = 6.4 10^9/L 10^9/L Dr Craig Sayers
29/04/2022 Haemoglobin estimation = 130 g/L Dr Craig Sayers
29/04/2022 Full blood count - FBC = <none> Dr [redacted] Sayers
29/04/2022 Triage Ms Jak-Leanne Durrant
29/04/2022 Indirect encounter Advised that Dr.Sayers has checked outside medical records and there in no evidence of gluten intolerance tests. Will list for nurse clinic to advise [redacted] of same however I am doubtful that she will be convinced to participate in the test. Dr [redacted] Sayers
29/04/2022 Triage Ms [redacted] Durrant
29/04/2022 Blood sample taken = Sent to lab for testing Dr [redacted] Sayers
29/04/2022 Consultation S - Listed by ANP for nurse clinic
B - Bloods, stool sample, discuss gluten free diet
A - Seen in treatment room with S/N Jill Ramsay. Bloods obtained as requested by ANP. Stool sample pots and Qfit given with instruction, advised to return on Monday morning as no transport to labs over weekend.

SPS kitchen staff have advised that they will no longer be providing gluten free food items that can be ordered on prescription due to their budget, therefore Georgie requires a prescription for certain food items. It had been advised that there was no formal evidence of a blood test for this intolerance on vision and so the purpose of todays consultation was to dicuss this with [redacted] Georgie advised me that she would not be able to manage the 6 week period of consuming gluten in her diet that is required prior to the test, and so was unwilling to participate in this. She then became very emotional and advised me that she had been in hospital numerous times for reactions to gluten and lacose - the last admission being as some point earlier this year. States that she has had the blood test taken when she was younger and had a repeat of same in HMP Grampian and again in Corntonvale which Dr.sayers carried out when she was first admitted, nil on vision to support this statement. Advised Georgina that i would discuss her [redacted] with the ANP as she should have evidence on her medical records of the relevent test. ANP K [redacted] advised that ANP L [redacted] has access to global clinical portal and so she may be able to access same.
R - [redacted] is very distressed with the prospect of having to restart a gluten diet. Listed for ANP clinic to discuss further ?Access medical records in order to avoid a repeat test.

J Durrant
PCT
29/04/22 14:02 Dr [redacted] Sayers
28/04/2022 Other Miss J [redacted] Mckeich

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28/04/2022 Consultation ANP entry, reponse received from Dr [redacted]
Hi Jackie,
there is a referral in to Glasgow - let me chase this up and update them that she is in CV.
[redacted]
Dr Imogen [redacted] (she/her)
Specialty Doctor [redacted] Health Miss [redacted] Mckeich
28/04/2022 Consultation ANP entry:
Email sent to Dr [redacted] regarding labiaplasty, see below:
Hi Dr [redacted]
Seen GS DOB: 4/12/91, spin 131344 today in Cortonvale.
She was asking if I could speak to you regarding her referral to Glasgow for possible labiaplasty.
Your entry on vision from Dec 21 states there is lots of prep work to be done prior to a decision being made regards to surgery.
GS is keen to go ahead with this and the prep work.
She was released on parole however is now readmitted till 2025.
I would appreciate if you could look into this/see patient when next in,
kindest regards
[redacted] McKeich
ANP
Miss [redacted] Mckeich
28/04/2022 Other Miss [redacted] Mckeich - No Data Recorded
28/04/2022 Triage Ms Jak-Leanne Durrant
28/04/2022 Asthma Dr [redacted] Sayers
28/04/2022 Other Mis [redacted] Mckeich
28/04/2022 Consultation Seen patient for review has few issues:
1. re long standing abdo pain
c/o abdo pain
present for years
pains to lower left abdomen
states has had grumbling appendix for years
pain also to upper gastric region
pain occurs intermittantly
has had pain x 3 in last week
starts middle of abdomen
travels round back
describes pain as sharp, spasm
triggered by food, bigger the meal/increase in pain
pain can last up to 2 hrs
nothing makes it better
meds: biscacodyl, laxido, peppermint caps, - states taking as prescribed
Bladder - urgency, then goes, passes little
Bowels - last moved this morning, regular, normal stool, states stool consistency changes depending if takes medication
Appetite - ok
fluids - at least 2 litres per day
states had cholecystecomy at 19 years
Also has hx haemorrhoids
o/e mobilising normally
climbed onto examination couch with no difficulty
no difficulty sitting/standing
abdo symmetrical
no skin changes
no jaundice
no rashes
abdo soft non tender
bowel sounds present
no referred pain/gaurding
patuient PR'd, chaperone present, small external haemorrhoid present, no blood on removal finder - patient requesting treatment for same,
states tried anusol with no benefit, have prescribed anusol HC.
Plan - urine dip done - negative
for bloods, FBC, U&E, LFT, CRP, amylase
stool for helicobacter
stool for qFit
stool for faecal calprotectin
if loose stool sample for C&S
Listed in outcome column for same
2. was seen at sexcual health clinic for removal rod and administration depot, states has small lump neat vagina, wants secons opinion,
states has lump just above clitoris
o/e skin over clitoris and surrounding area appears normal
no lumps or bumps felt
small pin sized reddish spot right of clitoris
appears to be possible ingr4own hair - recenlt shaved
no evidence infection, iflammation, abcesses
no discharge
patient advised
Patient asking if Dr [redacted] has done referral to Glasgow for labiaplasty, see entry 6/12/21, discussed response from Glasgow with patient,
still wants to go ahead with same, advised will contact Dr [redacted] for update.
3. Patent stated was seen at hospital yesterday for breast lumps, states was not impressed with consultation, felt she was not being listened
too, has [redacted] done left breast, advised to wait on letter from consultant.
4. Asked to check patient's neck again for lumps, examined, no swelling of lymph nodes, patient advised
Mouth, states nystatin not helped tongue, swab taken
Patient appears very focused on personal health issues, advised once all the results come back and are normal there will be no clinical
reason to investigate further.
5. Patient requesting information on trichomoniasis, NHS info leaflet issued. Miss [redacted] Mckeich

26/04/2022 Triage Ms [redacted] Durrant

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26/04/2022 Consultation S - NRF received
B - Review of face wound
A - Seen in treatment room with S/N Jill. Small scab to right cheek, appeared more like dry skin - no open wounds. Georgina advised that it was looking much better, not causing any itchiness or pain. Also discussed at visit upcoming hospital app, advised that I could not give a date however she has an appointment coming up soon (27/04/22). Also noted lump on labia, can see that this was assessed last week by SH nurse [redacted] however Georgina feels it has worsened and would like a second opinion. States that the lump is not causing any pain at present however sometimes causes some bleeding. Wished to discuss in more depth with ANP so will list for same. Georgie was very concerned regarding family history of cancer and the appearance of these new lumps.
R - Already listed for ANP clinic Wednesday- reason unknown. Advised [redacted] I would list her to discuss this in greater detail with the GP/ANP.

J Durrant
PCT
26/04/22 1713 Dr [redacted] Sayers
20/04/2022 Triage Miss [redacted]
20/04/2022 Consultation Seen by nurse in treatment room.

HCA L Kirkpatrick recieved a phone call from Pebbles staff regarding a [redacted] the [redacted] had on her face feeling that it may be a bite. [redacted] was brought up to the health center where I look at the [redacted] had just been outside playing football and appeared with a red face and moist skin, warm all over and therefore was hard to assess redness and heat.

The [redacted] was on her face, left cheek. The [redacted] looked to have a scab over it looking slightly yellow in colour and was slightly hard under the surface. The [redacted] was cleaned with prontosan and a small inadine patch was placed in situ with a mepore plaster. Gerogie advised to replaced both inadine and mepore after showering this evening-products with patient.

Advised to infrom staff of any worsening symptoms.

S/N N[redacted]
20/04/22
1536hrs. Miss [redacted] Thompson
20/04/2022 Triage Ms [redacted] Rennie
20/04/2022 Next hospital appointment Forth Valley - Area 2 Breast Clinic - 27-04-2022 @ 09:30 Ms [redacted] Rennie
19/04/2022 Triage Ms Rachel Lawson
19/04/2022 Remov subcutaneous contraceptive implant othr healthcre prov First service recall due: Claim Expiry Date: Ms [redacted]
19/04/2022 Seen in [redacted] health clinic Wished nexplanon removed had for approx 1 year and still getting periods regularly and quite heavy states didnt have this issue with previous implant, had considered depo as alternatibve however felt this was [redacted] to ovarian cysts bursting previously, previous had coil and felt it did not sit comfortably and had to be removed due to the pain. Happy to try POP so desogestrel 75micrograms daily prescribed.
Nexplanon removed with chaperone L Hamilton, using lidocaine 1% Batch 124503 EXP 06/2024, wound care advice given.
Concerned about boils around vagina nil evident at this time, slight tender area with evidence of healing spot/ingrown hair top of right labia, no evidence of infection at this time.
Asking if Drmurray had feedback regarding referral to Glasgow advised I would ask and let her know, also asking if could be referred naywhere else if declined or how to go private. Will speak to Dr [redacted] and let Georgina know or arrnage appointment to discuss same.
R [redacted] - [redacted] health nurse
19/04/2022 11:15 Ms [redacted]
19/04/2022 Liquid based cervical cytology screening Ms [redacted]
18/04/2022 Triage Ms [redacted] Rennie
18/04/2022 Failed encounter - hospital appointment Hospital letter sent direct to patient. Contacted 01324 566639 and left details for the appointment to be re-arranged. Forth Valley - Area 2 Breast - 26/04/2022 @ 09:30 - POssible 2 hour appointment Ms [redacted] Rennie
14/04/2022 Triage Ms [redacted] Rennie
14/04/2022 Next hospital appointment Forth Valley - Area 2 Breast - 26/04/2022 @ 09:30 - POssible 2 hour appointment Ms [redacted] Rennie
13/04/2022 Other Miss [redacted] Mckeich - No Data Recorded
13/04/2022 Referral Letter Miss [redacted] Mckeich
13/04/2022 SCI Referral Letter
13/04/2022 Other Mis [redacted] Mckeich
13/04/2022 Consultation Seen patient, c/o ongoing breast lumps
has new breast ,lumps - lump above nipple left breast
states has mass of lumps side left breast
requesting "water ducts" drained - states was told when last seen that ducts were full
states also has lump on back of neck
Has family hx breast cancer - [redacted]
[redacted] - mouth/throat cancer
Menstral cycle - has rod insitu, inserted 1 year ago
never had periods for years, has bled 3 weeks ago for 1st time, lasted for 8-9 days, seen by SH, no concerns, states may be [redacted] to MH/s
o/e looks well
chatty
oth breasts examined
look symmetrical
skin - no obvious cellulitis/infection/pigmentation/changes
nipples appear normal, no retraction
no discharge
right breast - small circular pea size lesion just above aveolar
left breast - small circular pea sized lesion inner right side chest
1 x small pea shaped lesion just above left nipple
1 x small pea shaped lesion upper outer side left breast (approx 2 oclock)
1 x small pea shaped lesion lower left axillae, midline
No pain on palpation breasts/lesions
states had lesion to back of neck, nil felt
neck examined - nad except glands to either side neck slightly swollen
no pain
mouth - normal mucosa
no swelling to back of throat
no hoarsness
no difficulty swallowing
no change taste/smell
no pain

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no difficulty swallowing
no change taste/smell
no pain
no oral ulcers
tongue - thick creamy plaque over back of tongue
apyrexial
? oral thrush
Rx nystatin
Patient given worsening advice
patient very concerned has breast cancer - long chat re same
Has been seen previously by FV for same (2018)
Referred back to surgical team at FV, patient happy with this
Also states has occasional abdo pain, previous cholelststectomy, due to time current consulttation advised would relist patient for another appoinmtne to discuss same, no acute issues at present.

Miss [redacted] Mckeich

12/04/2022 Other Miss [redacted] Mckeich - No Data Recorded
12/04/2022 Surgery consultation Dr [redacted] Kildare
12/04/2022 Ongoing review Listed for GP clinic
I have unfortunately been unable to see Georgie today due to other appointments over running and some unscheduled work
I have relisted for ANP clinic tomorrow Dr [redacted] Kildare
11/04/2022 Triage Mrs [redacted] Watt
11/04/2022 Mental health review Named Nurse Session
Spoke with [redacted] at 14.00hrs in health centre.
Initially [redacted] was very angry. Reported that she didn't feel people were listening to her. She spoke of feeling very distrustful of SPS staff, believes they are checking her mail and phone calls more than other prisoners in order to "catch her out".
Believes that SPS Lesley Whyte and others at RMT such as [redacted] are being destuctive in her forward progression and wants to know what she has to do in order to have more positive feedback from RMT.
She reports feeling stressed and her stress is manifesting with both psychological and physical symptoms.
Recently been having more frequent heavy periods and heavy nose bleeds. Has also been discovering lumps in her breasts and neck which have been referred to GP/ANP.
Another issue of [redacted] is her outstanding request for Labiaplasty which she had been discussing with Dr [redacted] last in Dec 2021. Since she will now remain in custody until July 2025, [redacted] would like Dr [redacted] to follow up this referral.
Outcomes:
I have spoken to Dept Team Leader C [redacted] who will be attending the next RMT to feed back to me their expectations for [redacted] and their plans going forward and will meet up with her in 2 weeks to discuss this.
Appointment with R [redacted] SH Nurse 12/04/22 to discuss referral with Dr [redacted]
Appointment with Dr Kildare 12/04/22 ti discuss lumps.

[redacted] Watt
SSN MH
11/04/22 15.40 Dr [redacted] Sayers
11/04/2022 Triage Mrs [redacted] - No Data Recorded
11/04/2022 Triage Ms Karly [redacted]
11/04/2022 Consultation [redacted] seen patient in treatment room at 10:30AM due to lump on chest. Patient states one now on back of neck also. Informs me she prone to get cysts and is extremely worried incase they are cancerous. Lots of reassurance given. Felt small lump on back of neck and above left breast area. Will relist for ANP/GP appointment.
S/N [redacted] 10:48AM Ms Karly [redacted]
08/04/2022 Administration Ms S [redacted]
08/04/2022 Self-referral Nurse (lump on breast). Well person clinic Ms Sonja [redacted]
04/04/2022 Triage Ms [redacted]
04/04/2022 Mental health review [redacted] attended the Health Centre on Saturday 2nd April 2022 due to excess bleeding and feeling physically unwell regarding same
Observations were taken which were all within normal range
At that time she stated that she was struggling with her mental health and was needing to speak with a nurse
I advised that I meet with her Sunday which she was agreeable
I thereafter met with [redacted] on Sunday 3rd April wherein I advised that I would note her concerns with regards to her mental health and pass same over to her named nurse [redacted] Watt
[redacted] went on to say that her "stress" disorder was getting worse as she feels that she is being held back from the SPS regarding progression
She voiced that she is constantly being held back from progression/open estate and this is impacting on her physical and mental stress
She states that the bleeding she has been suffering from lately is caused by stress
There was not much in way of issues surrounding her mental health with [redacted] and it was more the fact that she wanted the health centre staff to pass over to SPS that impact of lack of progress was triggering her "stress disorder"
There was no [redacted] regarding risk to Georgie at this time
Plan: Passed over to named nurse [redacted] Watt for information

[redacted] Walker
SSN
04/04/2022 12.25 Dr [redacted] Sayers
02/04/2022 Triage Ms [redacted]
02/04/2022 Ongoing review Asked to see Georgina by Peebles staff. Georgina is complaing of heavy bleeding & feeling unwell due to same. Met with Georgina. She does not think this is [redacted] to a period as she has a rod in. Rod was inserted approximately 1 year ago. Observations carried out - BP 133/76; HR 76; SP02 99% ; Temp 37 - all within normal range. She in unsure if this is [redacted] to stress. Advised Georgina that I would catch up with her tomorrow for a chat as she reported that she is feeling stressed at the moment due to the "system"

SSN [redacted]
02/04/2022
15.10 Dr [redacted] Sayers
31/03/2022 Triage Ms [redacted] Durrant

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31/03/2022 Consultation S - Asked to reveiw by officers at 16:45
B - ?increased bleeding, suggesting emergency app
A - Seen in treatment room with SI/N [redacted] Georgina states that she started having vaginal bleeding this morning and that she needed to be seen as a matter of urgency. States has contraceptive rod in situ, does not usually have periods however had one a couple of months ago. Has been getting spells pf dizziness however none at present. Obs as follows - BP - 126/75, HR - 73, SP02 - 98%, T - 36.8, RR - 16. Second standing bp obtained after 5 minutes standing at 122/84. States has been through 3 sanitary pads since this morning. Also reporting increased stress due to some bad news recently.
R - Reassured bleeding most likely period and that observations all normal. Advised to monitor over next few days and if any concerns to make nursing staff aware, advised that increase in stress could also be having an affect.

J Durrant
PCT
31/03/2022 17:10 Dr [redacted] Sayers
25/03/2022 Triage Mrs [redacted] Differ - No Data Recorded
15/03/2022 Surgery consultation Dr [redacted] Kildare
15/03/2022 Consultation GP Review
FTF with PPE
A few issues discussed again
1) Feels MH is still poor and asking to see [redacted] - is on Quetiapine 100mg nocte
Advised to put referral in through MHT for this

2) On going left wrist pain - see prev entry - still had no word from PT yet - advsied very long waiting list
Feels Celecoxib is not working and asking for Pregabalin - explained reasons for why this is not appropriate - she is not overly accepting as has been on before but ultimately have told her its just not an option for her
Due to start [redacted] the gardens tomorrow - anxious that this might worsen it, advised that its best that she keep active - [redacted] for physical and mental health all round
She is asking about a Tubigrip again for support - advised we dont have these
Continue Celecoxib for now

3) Feels her spine is out of alignment -longstanding history of low back pain, wanting a back brace or operation to "crack spine"
Advised her to engage with PT/ do exercises prev taught to strengthen this - she isnt convinced that this will work but I have advised her no tablets take pain away completely and she needs to focus on non-pharm methods

4) Lump in forehead - wanting to have a brain scan for this as feels its realting to a head injury she sustained when she was a [redacted]
Lump is longstanding and hasnt gotten bigger
No neuro deficit, LOC or confusion, no other symptoms
Lump itself can be painful at times but no headaches

O/E
As per my prev entry this looks more like a seb cyst to me, above left eye brow, no red flag features

Advised to leave alone, benign lesions are not usually removed on the NHS unless becoming troublesome in terms of size or other symptoms Dr [redacted] Kildare
10/03/2022 Third Party Consultation Ms Jane Rennie
10/03/2022 Document Image Docman Attachment
10/03/2022 Result Results Microbiology Ms [redacted] Rennie
08/03/2022 Other Miss Jackie Mckeich - No Data Recorded
08/03/2022 Surgery consultation Dr [redacted] Kildare
08/03/2022 Failed encounter Listed for GP clinic - has an activity on this afternoon and is unable to attend for review - relisted for my clinic next week Dr [redacted] Kildare
03/03/2022 Triage Miss [redacted] Hegarty
03/03/2022 Suspected coronavirus infection 03/03/22
S- covid test
A - incell
A - swab done by her self
HCA lyn hamilton
17/20 Miss [redacted] Hegarty
03/03/2022 Suspected coronavirus infection Close contact to Covid-19, PCR test obtained and sent to labs. Awaiting result

s/n Sinéad Hegarty 03/03/22 12:11 Miss [redacted] Hegarty
01/03/2022 Triage Ms Michelle Cleary
01/03/2022 Letter encounter to patient to inform her of recent change from Celecoxib 100mg to 200mg Celecoxib from ANP [redacted] Cleary
HCA
01/03/2022
15.28 Ms [redacted] Cleary
01/03/2022 Triage Mrs [redacted]
01/03/2022 Ongoing review ANP
L [redacted]
unable to see patient due to having no rooms available today
however on reviewing notes georgina has ongoing pain to knee and ankle for 1 month
no recent injury
pain sporadic, worsens throughout the day and with exercise
no swelling visable when examined by nursing staff
no radiation
pain described as an ache
she is currently on celecoxib 100mg BD - i will increase this to 200mg BD and if not effective in 4-6 weeks can re-refer for review

also was complaining of pain in head
small lump evident
same was prev reviewed by GP on 7/1/22
pain now both sides of head radiating from forehead to back of skull
describes shooting pain
due to this i will re-list for appt

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28/02/2022 Triage Ms [redacted] Durrant
28/02/2022 Consultation S - listed for PCT nurse clinic
B - Family history of Arthritis, ongoing pain to knee and ankle
A - Seen in clinic. States that aprox 1 month ago, started having trouble with left knee. States many previous injuries to this knee however none recently. Nothing in particular noted to cause pain, comes on sporadically, worsens on exercise and throughout the day. States elevation does not help. Feels it is swollen, no swelling visible on examination. Describes pain as "achy" and also feels same pain in ankle however pain is localised, does not radiate from knee. Currently takes Amitryptiline for back pain. Also mentions pain in head, states previous brain injury? nil in notes of same. Can see from recently appointment with GP, same issue discussed. Advised me that pain now on both sides raditating from forehead throught back of skull. Describes as shooting pain. Slight lump visible and some redness however patient informed me that would need to be reviewed without makeup to see properly.
R - Listed for ANP clinic, ?blood tests for CRP, FBC, ?ibuprofen prescription- await ANP assessment. Dr [redacted] Sayers
22/02/2022 Administration Ms Sonja [redacted]
22/02/2022 Medication - risk monitoring Spotcheck carried out on weekly medication. Quetiapine, Lymecycline and Amitriptyline counted and correct Dr Craig Sayers
22/02/2022 Self-referral Nurse (knee swollen/painful). Ms Sonja [redacted]
16/02/2022 Triage Ms [redacted] Cleary - No Data Recorded
08/02/2022 Third Party Consultation Ms [redacted] Hedley
08/02/2022 Document Image Docman Attachment
08/02/2022 Administration Kardex HMP Cornton Vale Pharmacy Recording Sheet Ms [redacted] Hedley
04/02/2022 Triage Ms [redacted] Cleary
04/02/2022 Letter encounter to patient to inform patient of recent prescription for Ceterizine .
[redacted] Cleary
HCA
04/02/2022
17.25 Ms [redacted] Cleary
04/02/2022 Other Miss [redacted] Mckeich
04/02/2022 Consultation ANP actions, request for antihistsmine, no allergies, rx cetirizine Miss [redacted] Mckeich
04/02/2022 Other Miss [redacted] Mckeich - No Data Recorded
04/02/2022 Triage Ms [redacted] Rennie - No Data Recorded
04/02/2022 Other Miss [redacted] Mckeich - No Data Recorded
03/02/2022 Triage Mrs [redacted] Watt
03/02/2022 Mental health review Named Nurse Contact
I met with [redacted] this afternoon at 1600hrs. She was bright and reactive. Happy to chat about how things were going.
Remains annoyed at having In Possession medication removed as she still states she has not been abusing Quetiapine and that her packet was short.
We discussed about how she was not attending for AM medication as she felt Sertraline made her feel angry whilst in this environment and her mood was currently not requiring an antidepressant. She also stated at this time she was coping without the morning dose of Quetiapine. We agreed that it would be discussed at CTM to discontinue AM medication of Sertraline and Quetiapine and the re issue of In Possession medication going forward.
We have agreed to meet again in 1 week to carry out Full mental health assessment and care plan.
[redacted] Watt
SS/N MHT
03/02/22 19.50 Dr [redacted] Sayers
03/02/2022 Third Party Consultation Mrs [redacted] Rennie
03/02/2022 Document Image Docman Attachment
03/02/2022 Administration Kardex HMP Cornton Vale Pharmacy Mrs [redacted] Rennie
03/02/2022 Other Dr [redacted] Kildare - No Data Recorded
03/02/2022 Referral Letter Dr [redacted] Kildare
03/02/2022 SCI Referral Letter
31/01/2022 Triage Mrs [redacted] Watt - No Data Recorded
28/01/2022 Surgery consultation Dr [redacted] Kildare
28/01/2022 Consultation GP Re[redacted]
FTF with PPE
1) Georgie continues to report GI symptoms of bloating and intermittent constipation.
Was given [redacted] last night with mince and gravy and has come out with a couple of ulcers in her mouth which she is attributing to this
Dietician referral still pending
Is adamant that she wont repeat her TTG screen whilst eating gluten as feels it will just make her symptoms 100x worse

Explained to her that it is difficult to move forward with her symptoms if she is not willing to do tests to get accurate results etc
We have decided to leave things be and await the Dietician input

2) Still has on going breast pain and feeling of them being engorged - see my prev entry and exam carried out by ANP

For trial of anti-inflammatory for 6/52 and if no improvement could consider routine referral to breast clinic but advised likely to be hormonal in nature
Naproxen she has tried in the past and doesnt work so try Celecoxib instead

3) Feels she has left sided carpal tunnel
Describing a tingling and feeling in her left palm, spreading upwards but has no tingling or paraesthesia in her fingers
Worse when she bends her hand - for example when moving the bins in the laundry
Feels she has had the pain for a few weeks but has been worse over the last week

O/E
No muscle wasting
Tinels test weakly positive - feels tingling in the palm
Phalens test postive

Advised
NSAID for pain - already prescribed as above
Refer PT for splints/exercises and failing that for Ortho opinion Dr [redacted] Kildare
28/01/2022 Celecoxib 100mg capsules Supply: (60) capsule 1 CAPSULE TWICE DAILY Dr [redacted] Kildare
27/01/2022 Triage Ms [redacted] Cleary - No Data Recorded
27/01/2022 Triage Mrs [redacted]

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27/01/2022 Consultation ANP
L[redacted]
SPS advised patient is at polmont at the dentist
re-listed for tomorrow
26/01/2022 Triage Ms Karly[redacted]
26/01/2022 Consultation Seen in treatment room at 10:05 AM about left hand c/o of stabbing pain from thumb to wrist. Area slightly swollen. Had full range of movement in wrist and fingers. Will relist for ANP/GP Appointment.
S/N Karly-Jane[redacted] 10:16 AM Ms Karly[redacted]
25/01/2022 Triage Ms Erin Hedley
25/01/2022 Self-referral for Nurse clinic received and logged.
[redacted] Hedley
Health Centre Administrator
25.01.22
12:05 Ms Erin Hedley
24/01/2022 Triage Ms[redacted] Cleary - No Data Recorded
23/01/2022 Triage Ms Clodina Lane
23/01/2022 Consultation Seen in triage c/o of painful left ear ongoing for 2 weeks
Has been using cotton buds to clean ears - advised not to do this
Reports not bleeding or discharge
O/e right ear looks normal, left ear slightly inflammed and small pocket of pus evident
Advised to apply clod compress to ear, utilise paracetamol for pain and px ciprofloxacin ear drops from 7 days BD
Advised to return to HC if symptoms dont resolve
C.Lane 12.57

21/01/2022 Other Miss [redacted]kie Mckeich
21/01/2022 Consultation ANP action, request to prescribe alternative to polytar shampoo as Lloyds unable to source, rx dermax shampoo, patient should try this for at least 4 weeks before requesting alternative. Miss[redacted] Mckeich
21/01/2022 Triage Ms E[redacted] Hedley
21/01/2022 Self-referral for Nurse clinic received and logged.
[redacted] Hedley
Health Centre Administrator
21.01.22
11:16 Ms[redacted] Hedley
20/01/2022 Triage Ms[redacted] Kilpatrick
20/01/2022 Seen by health care assistant Made Georgina aware of new prescription of shampoo.

Laura Kilpatrick
HCA
20/01/2022
20:52HRS Dr[redacted] Sayers
20/01/2022 Triage Mrs[redacted] Kane
20/01/2022 Consultation ANP
L.Kane
ANP Actions
see entry 19/1/22 requesting alternate shampoo
prescribed polytar scalp shampoo
if no improvement then can be reviewed
19/01/2022 Triage Mrs Aileen[redacted]
19/01/2022 Triage Seen in for nurse referral form. Psoriasis is quite prominant in her head. Her skin is dry and she feels it's tight when she takes her make up off. Has tried T-gel and Capasol shampoos,nothing is working. ?if MO would prescribe something else or if Georgina can be reviewed.

[redacted] McKay
PCT nurse
0934am Mrs Aileen[redacted]
17/01/2022 Medicine Management Ms Laura[redacted] - No Data Recorded
17/01/2022 Triage Ms[redacted] Hedley
17/01/2022 Self-referral for Nurse/Dermatology clinic received and logged.
[redacted] Hedley
Health Centre Administrator
17.01.22
11:35 Ms[redacted] Hedley
13/01/2022 Triage Mrs[redacted] Watt
12/01/2022 Consultation Asked to see following removal of in possession medication due to a discrepancy.
[redacted] staff looking to place her on MORS. Temperature 36.8, BP 117/77, SATS, 99% Pulse 73. Speech and gait normal. No clinical indication for MORS.
Jane Watt
S/N MHT
12/01/22 15.46 Dr[redacted] Sayers
12/01/2022 Other Mr[redacted]e Macpherson
12/01/2022 Mental health assessment Unplanned consultatioin as was approached by Georgina whilst in unit 5 (Peebles house). Unhappy that i had not made contact with her Personal officer last week asa promised, though i explained i was here now to do so. Georgina always plays the victim and constantly moans about her lack of progression after speaking with her personal officer i explained that we merely discussed the same issues that Georgina constantly complains about and that there is a process to follow. During this conversation Georgina never at any time mentioned that she had a problem with her medication issue, and that she was "short" of any weekly medications. I brought the conversation to an end and left the unit.

Donnie Macpherson
MHN
1030
12/01/2022. Mr Donnie Macpherson
12/01/2022 Other Dr[redacted] Kildare

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12/01/2022 Seen by health care assistant , , I received a phone call this morning from Peebles main office regarding Georgina reporting missing medication from her weekly medication she received yesterday, 11/01/2022. Georgina reported this to SPS staff on the backshift last night the early shift were chasing it up this morning.
The [redacted] is she only received 7 quetiapine 100mg not 14 quetiapine 100mg as normal, other weekly medication is correct.
I went over to the [redacted] to see Georgina and check medication pack she was given by me the day before. The package clearly [redacted] 14 quetiapine 100mg to take one twice a day. The packet had one stripe of 7 tablets with one taken out, the night time dose from the night before. I explained before I came over I checked her kardex and recording sheet, our invoice and called Lloyds pharmacy.
The recording sheet was recorded as I= 14x100mg.
The invoice was quetiapine 100mg x 14.
Lloyds said they dispense quetiapine 100mg in either two stripes each having 7 tablets or one stripe of ten and one stripe of 4. They also have it recorded at quetiapine 100mg x 14 it is doubled check before being dispensed for delivery.
I spoke with SPS informing them I will be returning to the health centre bring this to my manager attention and how to deal with the situation.
On speaking to SPS staff they informed me that intel have quite a bit of intel on Georgina regarding medication, swapping, selling and so on.

Doctor giving all information and karex. The weekly medication has been changed to supervised as from today and any incell medication has been removed from cell.
Quetiapine 100mg x 6
Amitriptyline 25mg x 6
Amitriptyline 50mg x 6
Lymecyline 408mg x 6
Meloxicam 15mg x 10
Bisacodyl 5mg x 61 - should only be 56 in packet.
Peppermint Oil 0.2ml x 80 - two packets
Named nurse also informed who happened to see Georgina this morning which there was no mention of medication error.

Ms Elaine Mcadam
12/01/2022 Ongoing review MOA - [redacted] is 7 Quetiapine short - despite getting 14 tablets yesterday - Pharmacy have investigated and are certain that 14 tablets were issued
There have been some intel abot meds being swapped in Peebles
[redacted] is also on Amitriptyline, Propranolol, Paroxetine but is refusing to take Propranolol therefore stop
For her safety unfortunately meds will now be made supervised but this can be reviewed in due course Dr [redacted] Kildare
11/01/2022 Triage Ms Karly [redacted]
11/01/2022 Consultation Received a call from SPS in Peebles informing me Georgie had only received 7 quetiapine tablets and says on bag should be 14 for her weekly medication. I informed SPS to check in room incase she possibly removed. They checked and did not find. Patient anxious due to worrying incase if she takes one tonight/tomorrow morning she will not get anymore. I informed SPS to tell her to take and will look into this issue tomorrow Ms Karly [redacted]
10/01/2022 Triage Ms Michelle Cleary - No Data Recorded
08/01/2022 Triage Ms [redacted] - No Data Recorded
07/01/2022 Referral Letter Dr [redacted] Kildare
07/01/2022 SCI Referral Letter
07/01/2022 Surgery consultation Dr [redacted] Kildare.
07/01/2022 Consultation GP Review
FTF with PPE
Fairly long discussion today about mutiple physical issues that worry her
She had a long FHx cancer and is concenred about this
She is of the opinion that nothing is being done for her

1) GI symptoms remain troublesome for her. Intermittent constipation, bloating and abdo cramps that are central in nature.
Feels it is [redacted] to her diet and normally excludes gluten and lactose when not in prison and has been on this diet before when in HMP CV but at the moment isnt sure if this is being followed
At the moment has reduced her diet down to just eating crisps as most things she eats are worsening her pain and is concerned she will lose weight as a result of her poor diet
No meds help
Has had lap chole aged 19 and also been in FVRH for admission with impaction
Both coeliac screens were negative but this was taken when she wasnt eating any gluten containing products and is not wishing to eat gluten to get a diagnostic test as it will make her pain worse
Weight today 81Kg

Refer Dieticians for opinion ?IBS

2) Concerned about her breasts that have been tender and feel a bit engorged - see ANP entry
Feels that she is unable to wear a normal bra and has to wear sports type bras as they dont cause her as much discomfort
Has a history of breast cysts and her maternal [redacted] died of breast cancer in her 30s so is understandably concerned
Bloods taken are all unremarkable
Advised examination performed 2/52 was reassuring and in absence of red flags does not meet criteria for USC referral but if symptoms of breast pain are on going for several weeks that could refer back to breast clinic routinely
Declined examination by me today as I am a male GP

3) Lump on forehead that looks like a small sebaceous cyst - left sided just above eye brow
She is wearing fairly thick make up so feels its hiding it today
Feels she needs a "brain scan"
Advised to leave alone for now as Derm/Minor ops will unlikely remove this

4) PV bleeding - describes erratic periods for last few years and followed by a bleed for last 8 days with spotting and some suprapubic discomfort
No urinary symptoms
Denies any PV discharge or risk of STI
Had contraceptive implant replaced 6/12 ago
Would feel more at ease if I could just refer her for a hysterectomy and bilateral mastectomy - explained that is not likely an option for her
She explained that she had follow up with [redacted] health clinic again next week to discuss on going PV bleeding
I didnt explore this further Dr [redacted] Kildare
06/01/2022 Other Mr Donnie Macpherson

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06/01/2022 Mental health assessment Follow up, [redacted] today was very frustrtated and appeared angry. Spoke at length about her physical conditions ? and how she felt that little was being done for her.
[redacted] also concerned that she is not being allowed to progress and is unhappy that she cannot move to Unit 3. Discussed that she found it difficult to control her Anger and frustration and that everyone appears to be against her.
Discussed with [redacted] that she has only been back in prison since July 2021, and it would be expected that she will need to show a good level of stability before progressing.
[redacted] is keen that i speak with her personal officer about her behaviours.
I will contact her personal officer at the first opportunity.

Donnie Macpherson
MHN
1435.
06/01/2022. Mr [redacted] Macpherson
06/01/2022 Other Miss [redacted] Mckeich - No Data Recorded
05/01/2022 Other Miss Jackie Mckeich - No Data Recorded
04/01/2022 Triage Ms [redacted]
04/01/2022 Seen in [redacted] health clinic States has been getting vaginal bleeding for approx 7 days, like a period, doesnt normally get period due to implant, however had implant replaced in last 6/12 so disscussed reaction to new implant might be different to previous.
Recently see ANP due to swollen tender breasts again could be due to period.
Very concerned that something is being missed in abdo and unhappy with previous abdominal scans aware that this is not point of todays appointment.
Plan review in 1/52 to see if issues still ongoing.
Aware next appointment will only be for [redacted] health/gynae issues.
R [redacted] - sexual health nurse
04/01/2022 14:27 Ms [redacted]
04/01/2022 Triage Ms Karly [redacted]
04/01/2022 Consultation Will relist for ANP appointment. Ms Karly [redacted]
04/01/2022 Consultation Below error not overdose of drug. Ms Karly [redacted]
04/01/2022 Overdose of drug Seen in treatment room today due to two small lumps present on forehead also states T-gel not helping and requies somehting el[redacted]ribed. Ms Karly [redacted]
31/12/2021 Triage Ms [redacted] Cleary
31/12/2021 Letter en[redacted]o patient to inform her of normal blood results.
[redacted] Cleary
HCA
15.15 Ms [redacted] Cleary
31/12/2021 Other Dr Craig Sayers
31/12/2021 Ongoing review MOA - bloods essentially normal (minimal decrease FSH) Dr [redacted] Sayers
30/12/2021 Surgery consultation Miss Claire Macmillan - No Data Recorded
30/12/2021 Third Party Consultation Ms Erin Hedley
30/12/2021 Document Image Docman Attachment
30/12/2021 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Ms Erin Hedley
30/12/2021 Third Party Consultation Ms [redacted] Hedley
30/12/2021 Document Image Docman Attachment
30/12/2021 Administration Haematology Results Forth Valley Royal Hospital Labs Ms [redacted] Hedley
30/12/2021 Triage Ms Erin Hedley
30/12/2021 Self-referral for Nurse, Well Person and Mental Health clinics received and logged.
[redacted] Hedley
Health Centre Administrator
30.12.21
11:49 Ms [redacted] Hedley
24/12/2021 Triage Ms Laura Kilpatrick
24/12/2021 Seen by health care assistant in clinic for bloods, bloods already obtained.

[redacted] Kilpatrick
HCA
24/12/2021
10:10HRS Dr [redacted] Sayers
24/12/2021 Results recording Dr Jahangir [redacted]
23/12/2021 Serum oestradiol level = 289 pmol/L Dr Jahangir [redacted]
23/12/2021 Biochemical test = <none> Dr Jahangir [redacted]
23/12/2021 Human chorionic gonadotrophin level < 3 U/L Humn chorionic gonadotroph lev - U/L Dr Jahangir [redacted]
23/12/2021 Follicle stimulating hormone level = 2 U/L Follicle stimulating horm lev - U/L - Post-pubertal female follicular FSH 3-8 U/L LH 2-13 U/L Dr Jahangir [redacted]
23/12/2021 Serum prolactin level = 127 mU/L mU/L Dr Jahangir Khan
23/12/2021 Serum LH level = 3.1 U/L U/L Dr Jahangir [redacted]
23/12/2021 Endocrine studies = <none> Dr Jahangir Khan
24/12/2021 Results recording Dr Jahangir [redacted]
23/12/2021 Nucleated red blood cell count = 0 10*9/L 10^9/L Dr Jahangir [redacted]
23/12/2021 Basophil count = 0.1 10*9/L 10^9/L Dr Jahangir Khan
23/12/2021 Eosinophil count = 0.2 10*9/L 10^9/L Dr Jahangir [redacted]
23/12/2021 Monocyte count = 0.5 10*9/L 10^9/L Dr Jahangir [redacted]
23/12/2021 Lymphocyte count = 1.7 10*9/L 10^9/L Dr Jahangir [redacted]
23/12/2021 Neutrophil count = 3.9 10*9/L 10^9/L Dr Jahangir [redacted]
23/12/2021 Mean corpusc. Hb. conc. (MCHC) = 333 g/L Dr Jahangir [redacted]
23/12/2021 Mean corpusc. haemoglobin(MCH) = 28.3 pg Dr Jahangir Khan
23/12/2021 Packed cell volume = 0.399 ratio Dr Jahangir [redacted]
23/12/2021 Mean corpuscular volume (MCV) = 84.9 fL fl Dr Jahangir Khan
23/12/2021 Red blood cell (RBC) count = 4.7 10*12/L 10^12/L Dr Jahangir [redacted]
23/12/2021 Platelet count = 321 10*9/L 10^9/L Dr Jahangir [redacted]
23/12/2021 Total white cell count = 6.4 10*9/L 10^9/L Dr Jahangir [redacted]
23/12/2021 Haemoglobin estimation = 133 g/L Dr Jahangir Khan
23/12/2021 Full blood count - FBC = <none> Dr Jahangir [redacted]
23/12/2021 Triage Ms [redacted] Kilpatrick

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23/12/2021 Administration Listed in clinic for bloods as documented below.

Laura kilpatrick
HCA
23/12/2021
15:28HRS Dr [redacted] Sayers
23/12/2021 Triage Mrs [redacted]
23/12/2021 Consultation ANP
L.Kane
Patient seen to review bilateral swollen, tender breasts
states nipples usually inverted but since swelling nipples now out
OE very tender to touch, both breasts firm
no discharge from nipple
no eczema
no dimpling of skin
states [redacted] and [redacted] had breast ca
has implant therefore does not have menstrual cycle
been in prison for 4 months therefore [redacted] pregnancy test to rule this out - negative
states she is on anti-psychotics
IMP- ? hormonal, ?? elevated prolactin level
Plan- check bloods FBC, CRP for inflammation ? infection
- LH, FSH, prolactin and estrogen to be checked
will review back in 1 week with results to ? if she requires referal to breast clinic
- if prolactin levels high to refer to psychiatry to review anti-psychotic Dr [redacted] Sayers
23/12/2021 Triage Ms [redacted] el Lawson - No Data Recorded
21/12/2021 Triage Ms [redacted]
21/12/2021 Occupational therapy Mental HEalth Occupational Therapy - Seen briefly whilst attending work party in laundry. [redacted] reported that since moving back to Peebles she is coping better and has tried hard to get into the "Christmas spirit". Reports that Christmas is normall a happy time for her and she is trying not to think about her RMT meeting until closer to the time. [redacted] aware that I am on Annual leave over the Christmas and New year period and will meet with her on my return to [redacted] the new year. Ms [redacted]
20/12/2021 Surgery consultation Miss Claire Macmillan
20/12/2021 Seen by triage nurse S: Seen in treatment room due to nurse referral
B: Patient breasts are tender to touch and very firm to touch.
A:
R: Listed for ANP to review. Miss [redacted] Macmillan
19/12/2021 Triage Ms [redacted] Kilpatrick
19/12/2021 Medication - risk monitoring Seen in cell for medication check,
check on Paroxetine Georgina stated that she no longer takes this medication mental health aware of same, Georgina also stated she is no longer taken propranolol also stated mental health team aware of same.
lymecycline check correct at this time
amtriptyline check correct at this time
Qutiapine check correct at this time

[redacted] Kilpatrick
HCA
19/12/2021
15:51HRS Dr Craig Sayers
17/12/2021 Other Mr Donnie Macpherson
17/12/2021 Mental health assessment Follow up. Met with [redacted] at her place of work. She was unaware that SPS had referred her due to increasing Paranoia. [redacted] presented as quite calm and relaxed and conversed at a normal rate rythym and tone.
[redacted] spoke at length regarding how she perceives the way she is treated within C/ Vale and seems to feel that no matter what she does she is regarded as an "Arsehole". When challenged on some of her behaviours Georgies became quite defensive blaming them on her upbringing, her "shitty" life her abuse and very much how she is a victim.
[redacted] spoke at length about how she cannot return to the Saltcoats area due to "Gang wars" and therefore is reluctant to transfer to Greenock as there is a close connection to some of her enemies.
[redacted] during interview tried to control said interview and had to be "reeled in" on numerous occassions.
[redacted] is fully aware of her many "conditions" and has plenty of insight and knowledge and coping skills to deal with these.

Donnie Macpherson
MHN
1045
17/12/2021 Mr Donnie Macpherson
16/12/2021 Triage Ms [redacted] Mclean - No Data Recorded
13/12/2021 Triage Ms [redacted] Broadfoot
Letter on: 13/12/2021 type: Referral
13/12/2021 Self-referral Referral for Nurse/GP received and logged
Sharon Broadfoot
Healthcare Administrator
13.12.21
15.21hrs Ms [redacted] Broadfoot
13/12/2021 Triage Mrs [redacted] Mckay
13/12/2021 Subcutaneous injection Pfizer booster given in left arm. BN 9707 Exp 06/2022

[redacted] McKay
PCT nurse
0109am Mrs [redacted] Mckay
07/12/2021 Triage Ms [redacted] Hedley
07/12/2021 Self-referral for Mental Health clinic received and logged.
[redacted] Hedley
Health Centre Administrator
07.12.21
10:45 Ms [redacted] Hedley
06/12/2021 Triage Dr [redacted]

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06/12/2021 Seen in [redacted] health clinic Seen in SH clinic re labiaplasty.

FV declined referral as don't do labiaplasty. I've spoken to a consultant in FV about if there are other healthboards that might accept a referral ? Glasgow. Reponse from Glasgow team'
' We don't perform routine labiaplasty in GGC anymore but they can be seen in clinic and then have to go through a long process of medical photography for their labia which will then be reviewed by a multidisciplinary panel (plastic surgeon, gynaecologist, [redacted] etc) who will decide whether surgery is justified or not. Most cases are declined. It would be worth explaining the process to the patient before referring her as some of them decline going through medical photography etc .

Discussed this with Georgina - she still would like referral. I will make a referral to Glasgow this week and will send a copy of this referral to georgina.

Dr Imogen [redacted]
GMC 7421177 Dr [redacted]
02/12/2021 Third Party Consultation Ms [redacted] Hedley
02/12/2021 Document Image Docman Attachment
02/12/2021 Administ[redacted] Kardex HMP Cornton Vale Pharmacy Recording Sheet Ms [redacted] Hedley
01/12/2021 Triage Ms [redacted] Kilpatrick
01/12/2021 Administration Listed in mental health waiting list as requested by dr.

[redacted] Kilpatrick
HCA
01/12/2021
15:06HRS Dr [redacted] Sayers
01/12/2021 Other Dr [redacted] Kildare
01/12/2021 Ongoing review MOA - TTG result negative at 0.4 - has already been acted on - see LK entry 25/11/21 Dr [redacted] Kildare
01/12/2021 Consultation Pharmacy informed that [redacted] has handed back her Paroxetine and Propranolol and is no longer wanting to take these meds - for MHT review please to explore reasons behind this Dr [redacted] Kildare
01/12/2021 Third Party Consultation Ms [redacted] Hedley
01/12/2021 Document Image Docman Attachment
01/12/2021 Administration Haematology Results Forth Valley Royal Hospital Labs Ms [redacted] Hedley
29/11/2021 Results recording Dr Craig Sayers
23/11/2021 Anti-tissue transglutaminase level = 0.4 U/mL Anti-tissue transglutnase lev - U/ml - Normal= <= 7.0,Equivocal= 7.0 -10.0 Positive = >10.0 Dr [redacted] Sayers
23/11/2021 Autoimmune profile = If screening for coeliac disease, this result is only valid if the person was
eating gluten at least twice a day for previous 6 weeks.
If known to have coeliac disease, this negative result suggests adherence to gluten free diet. Dr [redacted] Sayers
23/11/2021 Haematology test = Immunology NHS Greater Glasgow & Clyde Dr Craig Sayers
23/11/2021 Autoimmune profile = <none> Dr [redacted] Sayers
26/11/2021 Third Party Consultation Ms [redacted] Hedley
26/11/2021 Document Image Docman Attachment
26/11/2021 Administration Administration HMP Cornton Vale Administration Gluten Free Food Prescribable Product List Ms [redacted] Hedley
26/11/2021 Triage Mrs Aileen A[redacted]ander
26/11/2021 Consultation Spoke with [redacted] regarding her diet today. After meeting with ANP [redacted] has been advised that for one meal a day, she should have foods that she is allergic to. Bloods will then be taken 6 weeks later to confirm a diagnosis. [redacted] is being transferred to Greenock today. Advised all of her paperwork will be scanned on but [redacted] should advise staff on arrival that this is the plan for her care.

Ailen Alexander SN
26/11/2021 11.00 Mrs Aileen [redacted]
26/11/2021 Third Party Consultation Ms Erin Hedley
26/11/2021 Document Image Docman Attachment
26/11/2021 Administration Kardex HMP Cornton Vale Pharmacy Ms Erin Hedley
26/11/2021 Triage Ms [redacted] Hedley - No Data Recorded
25/11/2021 Triage Ms Michelle Cleary - No Data Recorded
25/11/2021 Triage Mrs Louise [redacted]
25/11/2021 Consultation ANP
L[redacted]
Patient had TTG bloods done
however these have been obtained whilst she has medical marker from kitchen for gluten and lactose free diet therefore this may not reflect an accurate result
there does not appear to have formal diagnosis of coeliac disease
to get this diagnosis I suspect patient will have to come off lactose and gluten free diet and have this in at least 1 meal for a minimum of 6 weeks to show accurate results
patient will require this to be discussed with her
I will pass over to PCT Dr [redacted] Sayers
25/11/2021 Triage Ms [redacted] Hedley - No Data Recorded
25/11/2021 Triage Ms [redacted] Hedley - No Data Recorded
24/11/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
24/11/2021 Other Dr [redacted] Kildare
24/11/2021 Ongoing review MOA - request to stop Mebeverine and to swap to Peppermint Capsules instead - stopped on Kardex and Peppermint capsules written up as requested Dr [redacted] Kildare
23/11/2021 Triage Ms [redacted] Cleary - No Data Recorded
23/11/2021 Other Miss [redacted] Mckeich
23/11/2021 Consultation ANP action
ANP K[redacted]
kardex not available action relisted for tomorrow
23/11/2021 Triage Dr [redacted] Swinson

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23/11/2021 Mental health assessment Seen in clinic. Presenting with agiaition, anxiety, low mood, emotional dyregulation and anger.
Parole hearing on Thursday - exacerbating problems.
States abruptly stopped paroxetine and propranolol one wee ago. INformed that current presentation not surprising given this.
Plan
Ongoing MHT input and keen to try decider skills.
No change to meds currently. Dr [redacted] Swinson
23/11/2021 Triage Ms [redacted] Kilpatrick
23/11/2021 Seen by health care assistant Seen in clinic verbal consent given to obtain bloods, TTG bloods obtained and sent to labs.

[redacted] Kilpatrick
HCA
23/11/2021
09:52 Dr [redacted] Sayers
23/11/2021 Triage Ms [redacted] Kilpatrick
23/11/2021 Seen by health care assistant blood pressure obtained as documented below.
I will make nursing staff aware of reading,

[redacted] Kilpatrick
HCA
23/11/2021
09:51HRS Dr [redacted] Sayers
23/11/2021 09:49:00 BP 178 / 116 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Dr [redacted] Sayers
22/11/2021 Medicine Management Ms [redacted]
22/11/2021 Consultation Georgina [redacted] no longer wants her mebeverine medication as believes it can show as false positive for other medications on MDT. Requested peppermint oil capsules instead. Advised to put in referral slip to discuss with GP/ANP. Medication returned to health centre.

[redacted] Pharm Asst 14.26 Ms [redacted]
19/11/2021 Third Party Consultation Ms [redacted] Hedley
19/11/2021 Document image Docman Attachment
19/11/2021 Administration Administration HMP Cornton Vale Refusal Form Ms [redacted] Hedley
19/11/2021 Triage Ms [redacted] Kilpatrick
19/11/2021 Seen by health care assistant Seen in clinic to obtain bloods for TTG, Georgina asked what the bloods were for after speaking to nurse [redacted] McMullen [redacted] advised me these were for celiac disease, Georgina declined to have same obtained. Treatment refusal form signed by writer and patient. Georgina also asked if I would obtain her bloods as she may think she is a diabetic, I explained that Georgina needs to be a slip in to see the nurse with regards to this. No further [redacted] were raised at this time.

[redacted] Kilpatrick
HCA
19/11/2021
10.25HRS Dr [redacted] Sayers
19/11/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
18/11/2021 Triage Ms [redacted] Cleary
18/11/2021 Seen by health care assistant
Listed in HCA clinic for TTG BLOODS .
[redacted] Cleary
HCA
18/11/2021
18.35 Ms [redacted] Cleary
18/11/2021 Triage Miss [redacted] Hegarty
18/11/2021 Suicide risk Pre nurse assessment -
[redacted] was seen in her room. Stated that she has always from the ages of 8 has [redacted] thoughts and thoughts of self harm acting upon these for a long time but currently she has no intention to act upon these thoughts.

[redacted] stated that she is struggling with not knowing if she is staying at Cornton Vale or being transferred out due to altercations in Pebbles. [redacted] stated that SPS officers told her that 'she didn't fit into Peebles' and that's why she is being moved. Georgie states she feels that this has affirmed her own feelings she holds surrounding self and believes this is also a reason for her emotional out bursts of late. [redacted] went on the say that MHT team don't see her - we then explained the 7 day referral and reminded her that she has been in contact with MHT numerous times in the last week- George felt that 7 days were too long to wait as it made her feel like she was [redacted] cared about. It was explained that this process is for everyone. [redacted] then moved on and spoke about her [redacted] regarding male SPS staff which she then explained that she would redirect this concern to the SPS.

[redacted] stated that she has her parole hearing next week this is making her feel fearful and another thing that she is directing blame of her emotional outbursts on. [redacted] said that she does have coping strategies and skills but does not utilise these when needed. Throughout the interaction [redacted] was unwilling to accept responsibility of over own actions throughout interaction.

[redacted] CC -
[redacted] denied any thoughts of suicide or self [redacted] at this time and explained that she didn't feel the need to be on the TTM suicide prevention strategy . [redacted] expressed [redacted] around being transferred, stated again that SPS staff don't feel like she belongs in Peebles which is negatively affecting her. Pebble's staff members were also called to the case conference SPS staff [redacted] and [redacted] and [redacted] agreed that there were no [redacted] that would lead them to believes [redacted] needed to remain on TTM. Their recommendation was to bring George back to Pebbles.
Georgie shared her [redacted] surrounding her medication suggesting it is unfair that she has not been offered depo injection, S/N D McPherson has referred G Smith to Psychiatrist. [redacted] expressed that she has had a lot going on recently and continued to move blame of emotional outbursts on these factors. She stated that she has been at [redacted] recently and on the first day of trial her abuser plead guilty. All staff in agreement that [redacted] can be taken off TTM and moved back to Pebbles, [redacted] happy with same outcome.

[redacted]
HMP Cortonvale
18.11.21
s/n Sinéad Hegarty 11:30 Miss [redacted] Hegarty
18/11/2021 Triage Mrs [redacted]

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18/11/2021 Consultation Met with Georgina this morning in ross house to discuss Gluten Free options for her to order as per nhs forth valley gluten free product list. she can select up to 14 units per month.
she selected;
1x GF seeded loaf sliced 400g
2x [redacted] Crispies 375g
1x penne pasta 500g
1x crackers 200g
2x crispbread 150g
warburtons GF fresh white rolls.
[redacted] will receive some items to her cell and others will go to kitchen.
formulary with prescription codes i will place with kardex for prescribers access.
listged for anp/gp to prescribe.
georgie has only requested to use 10 of her 14 units at the minute until she sees what she likes and will let us know what, if anything she would like added.
c [redacted] sn 0902am Mrs [redacted]
16/11/2021 Triage Ms Laura Kilpatrick - No Data Recorded
16/11/2021 Triage Ms L [redacted]
16/11/2021 Occupational therapy Mental Health Occupational Therapy - Met with [redacted] for planned contact. [redacted] reported to experiencing cold like symptoms and has not attended work this morning. Reported that she is struggling with her physical and mental health and has completed self referrals for a number of services including dietician, dentist, MHT and sick clinic nurse review. I explained scope of MH OT role and what support I am able to offer her , [redacted] reported that she wanted to talk about issues that she is finding stressful to prevent deterioration in mental health. Reflected to Georgie the skills that she has for managing her own emotions whilst acknowledging that the next few weeks may be more stressful due to upcoming parole meetings. Agreed that MH OT contact would remain fortnightly. OT Plan - Continue to develop skills for self management. Ms [redacted]
16/11/2021 Triage Ms [redacted]
16/11/2021 Consultation ANP actions
ANP K [redacted] L Mckeich
patient is coeliac
contacted Lloyds chemist for formulary details
patient is entitled to 14 unit per month in relation to her age and Gender.
Nursing staff to discuss products list with patient then prescription kardex can be written
15/11/2021 Triage Ms Erin Hedley
15/11/2021 Self-referral for Nurse, Dermatology and Diabetes clinics received and logged.
[redacted] Hedley
Health Centre Administrator
15.11.21
12:40 Ms [redacted] Hedley
12/11/2021 Triage Ms [redacted] Kilpatrick
12/11/2021 Letter encounter to patient Letter sent to Georgina to make her aware that the doctor has not prescribed her an antiemetic

[redacted] Kilpatrick
HCA
12/11/2021
16:23 Dr [redacted] Sayers
12/11/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
12/11/2021 Other Dr [redacted] Sayers
12/11/2021 Ongoing review MOA request for IM antiemetic
Nil to suggest intractable vomiting so same not appropriate - not prescribed Dr [redacted] Sayers
12/11/2021 Triage Ms [redacted]
12/11/2021 Medication - risk monitoring Spotcheck carried out 11/11/21. Paroxetine, Propanolol, Lymecycline,Quetiapine noted to be correct but one extra of Amitriptyline 25mg and 50mg. Pt not sure why?The two tablets returned to H/C and disposed of. Ms [redacted]
11/11/2021 Triage Ms [redacted] Kilpatrick
11/11/2021 Letter encounter to patient Letter sent to make Georgina aware that the doctor has changed her prescription, from meloxicam to mebeverine.

[redacted] Kilpatrick
HCA
11/11/2021
21:10HRS Dr Craig Sayers
11/11/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
11/11/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
11/11/2021 Other Mr Donnie Macpherson
11/11/2021 Mental health assessment Follow up clinic . [redacted] presented as a lot more relaxed and calmer today. States feeling reasonably well today and the atmosphere in Peebles is a lot better.
Discussed that due to COP26, and the fact that all her peers have been "squeezed" into one section of Peebles that this would have become a stressor and would cause her to have a heightened level of Anxiety.
[redacted] after been seen twice appears to be, becoming quite demanding and seems to feel that i have taken over her care.
Has been advised that my intervention is temporary as she has a named nurse, and i am only stepping in until her return.
Advised that i will see her at some point next week to discuss any outcome from the CTM.

Donnie Macpherson MHN
1445
11/11/2021 Mr Donnie Macpherson
11/11/2021 Other Dr [redacted] Kildare
11/11/2021 Ongoing review MOA - note previous entries and recent admission for constipation under the surgeons
D/W SN [redacted] - [redacted] continues to describe abdo pain with associated constipation and feels her Meloxicam is not helping with the pain and making her feel sick - therefore stop
Try regular Mebeverine TDS for symptoms over next 6-8/52
Not for opiates as this will constipate her further Dr [redacted] Kildare
10/11/2021 Triage Mr [redacted]

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10/11/2021 Had a chat to patient I saw [redacted] in the health centre in the company of HCA Kilpatrick in order to apologise for a misunderstanding that we had yesterday. She had approached me in the health centre to inform me that she was feeling terrible and asking if I was going to assess her today. I had misinterpreted this as an abusive tirade and advised [redacted] that I would not be spoken to like that however on reflection I realised Georgie was in fact describing how she was feeling and not making accusations of me. She accepted my apology and I assured her this wouldnt happen again.

[redacted]
MH DTL
1555 Mr [redacted] Kennedy
10/11/2021 Triage Ms Erin Hedley
10/11/2021 Self-referral for Nurse clinic received and logged.
[redacted] Hedley
Health Centre Administrator
10.11.21
12:12 Ms [redacted] Hedley
09/11/2021 Triage Ms [redacted] Mclean
09/11/2021 Telephone encounter Peebles SPS officer Dorothy called to ask if Georgina was able to get an anti-sickness injection. Reported she was not prescribed this. [redacted] asked if staff could contact the kitchen to give suggestions about other foods Georgina may tolerate as she is eating a lot of pasta and they believe this is contributing to her being constipated.
[redacted] SSN MHT
09/11/2021 2015hrs Ms [redacted] Mclean
09/11/2021 Other Mr Donnie Macpherson
09/11/2021 Mental health assessment Triage clinic. Refer to Care [redacted] for information.

Donnie Macpherson
MHN
1100
09/11/2021. Mr Donnie Macpherson
09/11/2021 Triage Ms Rachel Lawson - No Data Recorded
06/11/2021 Third Party Consultation Ms [redacted] Broadfoot
06/11/2021 Document Image Docman Attachment
06/11/2021 Administration Administration HMP Cornton Vale Letter to Hospital Ms [redacted] Broadfoot
06/11/2021 Third Party Consultation Ms [redacted] Broadfoot
06/11/2021 Document Image Docman Attachment
06/11/2021 Administration Administration Forth Valley Royal Hospital Discharge Summary / Liberation Ms [redacted] Broadfoot
05/11/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
05/11/2021 Other Dr [redacted] Sayers
05/11/2021 Ongoing review Discharge letter accessed on Clinical Portal - Constipation for laxatives Dr [redacted] Sayers
04/11/2021 Triage Mrs [redacted]
04/11/2021 O/E - temperature level = 36.1 degC Dr Craig Sayers
04/11/2021 Pulse oximetry monitoring 99 % Dr [redacted] Sayers
04/11/2021 O/E - pulse rate 80 beats/min Dr [redacted] Sayers
04/11/2021 16:35.00 BP 107 / 70 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Dr [redacted] Sayers
04/11/2021 Consultation Patient returned from hospital with diagnosis of constipation.
Patient states she had an enema whist in hospital and returned with a prescription for laxido to take daily - same prescribed by dr.
Patient asking regarding codeine that she was issued whilst in hospital. No record of being discharged on same and none sent back with her.
Discussed with patient regarding codeines side effects being constipation and the rationale for hospital not prescribing same.
Also discussed with dr kildair on return who advised to utilise meloxicam and paracetamol.- patient advised of same.
Observations obtained as recorded and all within normal limits.
discharge letter for review by gp tomorrow
C [redacted] sn 16.33hrs Dr [redacted] Sayers
03/11/2021 Third Party Consultation Ms [redacted] Hedley
03/11/2021 Document Image Docman Attachment
03/11/2021 Administration Administration HMP Cornton Vale Clinical Notes Clinical notes by ANP Ms [redacted] Hedley
03/11/2021 Other Miss Jackie Mckelch
03/11/2021 Consultation Asked to see by nursing staff, patient c/o abdo pain, distended abdomen, according to officers looks [redacted] did not look like this yesterday.
PMH: asthma, backpain, cholecystectomy, breasts cysts, gynae issues, illicit drugs, MH, eating disorders
Patient states pain started this morning, was woke up with it (6am)
Feels tight, sharp, tingling on upper abdomen radiating down to lower abdomen
constant since 6am, getting worse, describes pain as 8/10
Feels as if something is going to give way in between legs
mouth
Patient able to mobilise but rocking back and forward while sitting
o/e looks in pain
colour normal
managed to eat lunch (gluten intolerant), felt worse after this
usually appetite usually poor, has eating disorder, does not always eat meals
recently felt sick with pain, not vomitied
no issues with chewing & swallowing,
abdo appears distended
pain in upper left and ight quadrant
gaurding present on palpation
reduced pain lower right and left quadrant
no referred pain
abdo feels distended upper have
soft lower, sides
bowel sounds present
no skin changes
bowels - last moved this morning, small drops, moves [redacted] basis, stool hard, can have diarrhoea also, takes regular laxatives, states has blood in stool, after wiping
bladder - states passing more than usual, states passed urine approx 30 times this morning, passed small amount each time went, no buring, no pain, no blood, feels as if bladder constantly full, need to empty bladder but cant
no vaginal bleeding
weigh was 75kg in April 21 now 85kg

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weigh was 75kg in April 21 now 85kg
T37.4, BP130/60, sata 98%, p75, R16
Contacted on call surgical registrar, patient to be transferred to SAU at FV, letter written, nursing staff and [redacted] staff informed.

Miss [redacted] Mckeich

03/11/2021 Other Miss Jackie Mckeich - No Data Recorded
02/11/2021 Third Party Consultation Ms Erin Hedley
02/11/2021 Document Image Docman Attachment
02/11/2021 Administration Kardex HMP Cornton Vale Pharmacy Ms [redacted] Hedley
02/11/2021 Triage Ms [redacted] Hedley
02/11/2021 Self-referral for Nurse, Dermatology, Diabetes, Epilepsy, Heart and Mental Health clinics received and logged.
[redacted] Hedley
Health Centre Administrator
02.11.21
11:06 Ms [redacted] Hedley
26/10/2021 Triage Mrs [redacted] Watt
26/10/2021 Mental health review Dicussed at CTM
Allocated to Jane. For medication discussion with Dr Swinson(Increase Quetiapine)

[redacted] Watt
SS/N MHT
26/10/21 15.20 Dr [redacted] Sayers
26/10/2021 Other Dr [redacted] Kildare
26/10/2021 Ongoing review MOA - request to change shampoo from Capasal - try T-gel instead Dr [redacted] Kildare
26/10/2021 Triage Mrs Aileen [redacted]
26/10/2021 Consultation S - Seen at nurses clinic.
B - concerned about 'lump' to front of shin.
A - On examination no lump felt but may be dense muscle, reassured no concerns. Georgina reports that she never got change of shampoo for dry patches on scalp, apologised as this may have been missed.
R - Will list for GP/ANP today, Georgina grateful.

[redacted] SN
26/10/2021 09.34 Mrs Aileen [redacted]
25/10/2021 Triage Mrs [redacted] Watt
25/10/2021 Mental health review Named nurse contact - Was asked to see [redacted] this afternoon as a matter or urgency due to her aggressive presentation. [redacted] explained to me that she was extremely angry about one of her peers who she believed was deliberately trying to antagonise her by using her position in the kitchen not to provide [redacted] with the correct diet. Georgie feels so angry that she is afraid she will become physically aggressive towards this peer. [redacted] admits she is stressed about gynae referral and future parole hearings. This she understands is affecting her mood. She requested a review in her medication. I advised she will be discussed at CTM on 26/10/21 where staff nurse Watt will inform Dr Swinson of [redacted] presentation. [redacted] was much calmer at the end of our conversation and awaits the outcome of CTM

SN Jane Watt
15.30hrs
25/10/21 Dr [redacted] Sayers
25/10/2021 Triage Ms [redacted] Hedley
25/10/2021 Self-referral for Nurse/Dermatology and Dental clinics received and logged.
[redacted] Hedley
Health Centre Administrator
25.10.21
11:21 Ms [redacted] Hedley
25/10/2021 Triage Dr [redacted]
25/10/2021 Seen in [redacted] health clinic Still awaiting Parole. Discussed I will send a referral to Glasgow re labiaplasty Dr Imogen [redacted]
GMC 7421177 Dr Imogen [redacted]
22/10/2021 Third Party Consultation Miss [redacted] Broadfoot
22/10/2021 Document Image Docman Attachment
22/10/2021 Administration Administration HMP Cornton Vale In-Possesion Medication Check Miss [redacted] Broadfoot
20/10/2021 Triage Mrs Jane Watt - No Data Recorded
19/10/2021 Triage Ms [redacted]
19/10/2021 Occupational therapy Mental Health Occupational Therapy - Met with [redacted] for planned contact, seen in laundry as attending work party this morning [redacted] reported that she is feeling more tired than usual, described stressors relating to court case yesterday and impact that this had on how she was feeling. We discussed the benefits of maintaining her structured daily routine, as [redacted] recognises that her mental state deteriorates when not engaged in regular activity. Encouraged [redacted] to rest between shifts at work, and to aim to return to her normal sleeping pattern and to avoid sleeping too much during the day. Ms [redacted]
17/10/2021 Triage Mrs [redacted] Watt
17/10/2021 Mental health review Named Nurse Contact
Met up briefly with [redacted] this afternoon to arrange an appointment on 20/10/21 for Triage assessment.
[redacted] is aware that writer will be assessed during this and is happy with this.
[redacted] Watt
S/N MHT
17/10/21 17.00 Dr [redacted] Sayers
11/10/2021 Triage Ms Erin Hedley
11/10/2021 Self-referral for Mental Health clinic received and logged.
[redacted] Hedley
Health Centre Administrator
11.10.21
11:21 Ms [redacted] Hedley
11/10/2021 Triage Mr [redacted]

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11/10/2021 Telephone encounter Contacted by Officer [redacted] at Peebles House to inform us that Georgina had presented to [redacted] over the weekend reporting that she has been experiencing a recurring dream whereby she slits her own throat. She denies suicidality or plans to follow through with this act of self [redacted] she is visualising but is nonetheless concerned by this - [redacted] staff were wondering if it were possible to assess Georgina. It is documented that S/N Watt has scheduled a Comprehensive Assessment with Georgina this week, therefore issues can be addressed then.

[redacted]
MH DTL
1005 Mr Connor [redacted]
08/10/2021 Third Party Consultation Ms [redacted] Hedley
08/10/2021 Document Image Docman Attachment
08/10/2021 Administration Administration HMP Cornton Vale Medication Spot Check Ms [redacted] Hedley
08/10/2021 Surgery consultation Dr [redacted] Sayers
08/10/2021 Ongoing review Ongoing review in relation to acne as per entry 1/10/21
Feels that use of a "scrub" from another prisoner has been beneficial.
Minimal acne evident today
Suggested thast she self purchases same item if she has found this beneficial
Reports Benzoyl peroxide 5% irritates her skin - advised to only use this when significant flares occur and reduced to 2.5% strength

Also c/o ongoing back pain.
Same assessed fully by ANP McKeich on 16/9/21
Has previously attended physio, used TENS (found painful), applied Deep Heat (couldn't tolerate), numerous NSAIDs/paracetamol.
No red flags
Agreed to increase Meloxicam to 15mg daily, also increase amitriptyline to 75mg nocte for reported sciatic element
Stressed the importance of her keeping active - suggested attending gym
Explained that we were unlikely to get her completely pain free and she will likely need to accept a degree of chronic pain Dr [redacted] Sayers
05/10/2021 Triage Ms [redacted] Beveridge
05/10/2021 Drug addiction therapy 1-1 support SPS Requested RPP

S - Met with Georgina at 14:30 for Prison Healthcare Addictions Service one to one support. Verbal consent to proceed obtained.

B - Georgina is currently not prescribed any MAT and does not have any subsance misuse issues. Georgina has been recalled recently and the SPS emailed regarding a relapse prevention plan.

A - Georgina was well kempt when we met in the Link Centre. Georgina is currently working in the Laundry work party. Georgina has a parole hearing tomorrow as is understandably worried about the outcome. Georgina engaged well and maintained eye contact through out the session.
Georgina was bright, reactive with normal rate and tone.

Georgina does not have any addictions issues. She was under the influence at the time of her offense and has licence conditions around drugs and alcohol as a result. Georgina was out on lisence for 7 weeks before her recall and did not have any alcohol or have any urge or desire to rink. When asked directly if Goergina craved alcohol she clearly stated that she does not she also raely drinks when in te community only at special occassions.
Today we discussed her recall and completed the latter half of the relapse prevention plan that describes what Georgina would do if she was put in a situation where she was surrounded with drug and alcohol and how this would be a risk towards her and her lifestyle. We concluded that she would leave and call her emergency contacts and inform social work. Georgina is happy with this and understands the repercussions of not working with this ie coming back to prison. Georgina has the physical copy of her plan.

R - Gerogina successfully completed a RPP and has a copy of it, case closed

[redacted] Beveridge, Prison Healthcare Addictions Team, 15:40
Ms [redacted] Beveridge
04/10/2021 Triage Ms [redacted] Hedley - No Data Recorded
04/10/2021 Triage Dr Imogen Murray
04/10/2021 Seen in [redacted] health clinic Listed for smear - smear not due until Feb 2022. Discussed re-referral for labiaplasty. Awaiting parole hearing on Wednes - if [redacted] in CV will list to be seen in clinic next week so we can discuss futher.

Dr [redacted] Murray

Dr Imogen [redacted]
01/10/2021 Triage Mrs Aileen [redacted]
01/10/2021 Consultation S - Seen at nurses clinic.
B - Nurse referral submitted.
A - Georgina concerned as acne is returning, does not feel current treatment (lymcycline and benxoyt peroxide) working any longer. Also has patches of ?psoriasis in scalp, currently on Caprocin shampoo but does not feel this is an effective either.
R - Agreed to list for ANP/GP for review, Georgina happy with care.

Aileen [redacted] SN
01/10/2021 10.45 Mrs Aileen [redacted]
30/09/2021 Triage Ms [redacted] Hedley - No Data Recorded
30/09/2021 Third Party Consultation Ms [redacted] Hedley
30/09/2021 Document Image Docman Attachment
30/09/2021 Administration Administration HMP Cornton Vale Medication Spot Check Ms [redacted] Hedley
29/09/2021 Triage Mrs [redacted] Watt
29/09/2021 Mental health review Report for ICM.
Report sent to Angela France regarding input from NHS OT and Mental Health Team prior to her liberation.
Met with [redacted] this afternoon to discuss her being reallocated to myself and ICM report.
[redacted] is happy to rengage with me and have arranged to meet up week beginning 11/10/21 to commence FMHA.
[redacted] Watt
S/N J Watt
29/09/21 16.30 Dr [redacted] Sayers
28/09/2021 Triage Ms [redacted]

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

28/09/2021 Occupational therapy Mental Health Occupational Therapy - Attempted to meet with [redacted] for planned contact. [redacted] declined same, appeared abrupt in manner at this time with no reason provided for this refusal. [redacted] requested that I make contact with ICM worker Angela prior to her meeting on Thursday as she would like to request that I attend. Advised [redacted] that I am unable to attend meeting on Thursday as I am on annual leave but that I would be happy to provide information with her consent if this is requested prior to Thursday. Ms [redacted]

23/09/2021 Triage Ms Sharon Broadfoot

23/09/2021 Self-referral Nurse/Gp & MHT referral received and logged
[redacted] Broadfoot
Support Services Co-ordinator
23.09.21
15.03hrs Ms [redacted] Broadfoot

22/09/2021 Triage Ms Denise [redacted]

22/09/2021 Consultation Cookhouse have asked that healthcare meet with [redacted] to discuss gluten free diet. the cookhouse have been ensuring that a gluten free diet available, which [redacted] has declined to eat and is choosing to eat off the normal menu.
e mail sent to cookhouse..
I have checked the healthcare records and met with Georgie this afternoon, she is very much wanting to stick to her special diet of Lactose and gluten free, she has advised that she was given out of date food and also biscuits and wraps had milk within them , this would have an impact on her well being.

Can you please continue with the food as before, she has advised that the wrap that she eat today that was supposed to meet the intolerance actual has given her a skin reaction that is evident.

Hope this helps and if we wish further advice we may need to get a dietician involved
Denise [redacted]
tEAM lEADER
14.15 Ms Denise [redacted]

21/09/2021 Triage Ms [redacted] Edwards

21/09/2021 Occupational therapy Mental HEalth Occupational Therapy - Attempted to meet with Georgie, attending work party. Will attempt contact next [redacted]

20/09/2021 Triage Ms [redacted]

20/09/2021 Medication [redacted] Spotcheck carried out on 17/09/21.All medications counted as correct Ms [redacted]

16/09/2021 Other Miss [redacted] Mckeich

16/09/2021 Consultation Seen patient, c/o right sided backpain
present for few weeks
no hx injury
states has hx curved spine and sciatica due to epidural
pain intermittant
pain to right side chest over ribs
worse at night time, when lying flat and when bending
improves when up and moving around
pain feels like a pressure
can last up to few hours
taking paracetamol and celecoxib with little effect
no bladder problems
bowels = prone to constipation, normally takes bisacodyl (has tried lactulose and senna with little effect), normally moving twice weekly, usually has to strain
o/e chest clear
heart sounds normal
no cough/wheeze
no tnderness palpation spine
tender over lower ribs right side
some right loin pain
no bruising or skin changes
full movement legs/hips
no decreased sensation
urine checked - negative
Imp: ? MSK
Discussed analgesia, changed to meloxicam 7.5mg daily
Rx bisacodyl for bowelsd
Requested capoasal shampoo for dry scalp, prescribed.
Miss [redacted] Mckeich

16/09/2021 Other Miss [redacted] Mckeich

16/09/2021 Consultation ANp task, request to change medication to in[possesion, already changed. Miss [redacted] Mckeich

16/09/2021 Other Miss [redacted] Mckeich - No Data Recorded

14/09/2021 Triage Ms [redacted] Kilpatrick

14/09/2021 Letter encounter to patient Letter sent to Georgina to make aware of recent [redacted] health screening was negative.
Chlamydia - Negative
Gonorrhoea - Negative

[redacted] Kilpatrick
HCA
14/09/21
19:31

Dr [redacted] Sayers

14/09/2021 Surgery consultation Dr [redacted] Kildare

14/09/2021 Ongoing review MOA - request for meds to be prescribed in cell - now in Peebles following move from [redacted] - Kardex rewritten for weekly issue Dr [redacted] Kildare

13/09/2021 Triage Ms [redacted] Kilpatrick

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13/09/2021 Consultation Would MOA please consider prescribing Georgina meds in cell please? Georgina has previously had her medication in cell.
[redacted] Kilpatrick
HCA
13/09/21
18:44 Dr [redacted] Sayers
11/09/2021 Third Party Consultation Ms [redacted] Broadfoot
11/09/2021 Document Image Docman Attachment
11/09/2021 Administration Microbiology Results Forth Valley Royal Hospital Microbiology Ms [redacted] Broadfoot
10/09/2021 Triage Ms [redacted] Warman
10/09/2021 Consultation S- [redacted] in nursing clinic
B- Nurse referral form
A- Complining of back pain since return to custody last month. States going from Right ribs to back and on a deep inspiration feels this pain to the left ribs. Tender on palpation of back and right side, no pain on left side only on deep inspirations. Worse when sitting down or lying in bed. States feels like "vice around back and pushing everything together" and that it is making her bones "crumble" States doesnt feel muscular. History of back problems and pain however feels this is diffrent SP02 97% Pulse 72, Bp 104/66. Family history of artheritis and cancers. No trauma, no awkward movements reported.
R- List for ANP clininc for Monday.

[redacted] Warman
PCT
11:09 Dr [redacted] Sayers
09/09/2021 Triage Ms [redacted] Hedley
09/09/2021 Self-referral for Nurse clinic received and logged.
[redacted] Hedley
Health Centre Administrator
09.09.21
13:18 Ms [redacted] Hedley
08/09/2021 Other Miss [redacted] Mckeich
08/09/2021 Consultation ANP tasks, request for cetraben and analgesia for backpain, rx celecoxib and cetraben Miss [redacted] Mckeich
07/09/2021 Triage Ms Linzi [redacted]
07/09/2021 Smoking cessation advice for Smoking Week 2 smoking cessation
1mg lozenge. States doing ok, reports no concerns
Wishes to continue same
1mg lozenges issued

Linzi [redacted]
Lead Addiction Nurse 7/9/21
1320hrs Ms Linzi Stevenson
06/09/2021 Third Party Consultation Ms [redacted] Hedley
06/09/2021 Document Image Docman Attachment
06/09/2021 Administration Microbiology Results Forth Valley Royal Hospital Microbiology Ms [redacted] Hedley
06/09/2021 Third Party Consultation Ms [redacted] Hedley
06/09/2021 Document Image Docman Attachment
06/09/2021 Administration Administration HMP Cornton Vale Initial Assessment HCA [redacted] Health BBV Clinic Ms [redacted] Hedley
06/09/2021 Triage Ms [redacted] Warman
06/09/2021 Consultation S- Seen in nursing clinic
B- Nurse referral form
A-Requesting creams that were previously prescribed, Cetriben cream for dry skin, dry skin evident on elbows, she also stated something called Gental wash, which she was prescribed in the community. Georgina complaining of back pain, states this just happens at any time, mostly when relaxing, states frequently changes position when lying in bed or sitting in chair as painful, No pain on inspiration or expiration. Requesting Analgesia
R- MOA analgesia and Cetriben cream

[redacted] Warman
PCT
11:45 Dr [redacted] Sayers
06/09/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
06/09/2021 Triage Ms L [redacted] Kilpatrick
06/09/2021 Seen by health care assistant Seen in Hca [redacted] health clinic, Georgina given verbal consent for bloods to be obtained same obtained and sent to labs, obtained for bbv swabs self took for [redacted] health screening, has implant in,
Georgina stated she is due a smear test so will listed for [redacted] health nurse to obtain same.
[redacted] Kilpatrick
HCA
06/09/21
11:17 Dr Craig Sayers
05/09/2021 Triage Ms [redacted] - No Data Recorded
04/09/2021 Triage Ms [redacted] Warman
04/09/2021 Consultation Complaining of dry itchy scalp, dry skin evident on scalp. Requesting Tgel shampoo as previously prescribed same

[redacted] Warman
PCT
13:37 Dr [redacted] Sayers
03/09/2021 Triage Mrs J [redacted] Watt
03/09/2021 Mental health review Named Nurse Discussion

[redacted] told me she has a meeting on Monday but unclear who will attend. She is keen for me to attend her meetings as I worked closely with her prior to her release as her allocated nurse prior to her release.
I have emailed FLM Tammy Breignan to advise her that I would be willing to support her whilst here in Cornton Vale.

[redacted] Watt
S/N MHT
03/09/21 15.30 Dr Craig Sayers
01/09/2021 Triage Ms [redacted] Cleary

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01/09/2021 Seen by health care assistant
Pregnancy test done and negative .
Michelle Cleary
health care assistant
01/09/2021 Ms [redacted] Cleary
01/09/2021 Triage Ms [redacted]
01/09/2021 Occupational therapy Mental Health Occupational Therapy - Met with Georgina following her recall to prison, had worked with Georgie prior to her liberation in July 2021. [redacted] expressed her disappointment at her return to prison, but accepted no responsibility for this, stating that this was due to her not fully understanding what information she was required to share with agencies involved in her care and monitoring in the community. We discussed ways that [redacted] can manage her emotional response to this, and the uncertainty that she is experiencing regaring her short and longer term future. We also reflected on the positive aspect of her time spent in the community, and how she felt reassured that she was able to [redacted] budget and shop independently which had all been factors that she had felt anxious about prior to her recent release from prison. Encouraged [redacted] to reflect on what had went well, and to consider what areas skills she feels requires further support with. [redacted] at this time unsure if she will remain in Cornton Vale or be moved to another establishment. OT Plan - Offer regular weekly session to develop skills for self management if remains in Cornton Vale. Ms [redacted]
31/08/2021 Triage Ms [redacted] Hedley
31/08/2021 Self-referral for Nurse and Dental clinics received and logged.
[redacted] Hedley
Health Centre Administrator
31.08.21
15:07 Ms [redacted] Hedley
30/08/2021 Third Party Consultation Ms [redacted] Hedley
30/08/2021 Document Image Docman Attachment
30/08/2021 Administration Administration HMP Cornton Vale Smoking Cessation Service Ms [redacted] Hedley
30/08/2021 Triage Ms [redacted]
30/08/2021 Smoking cessation advice for Smoking
S – Met following receipt of referral for smoking cessation services. Verbal consent to proceed obtained.

B – Recently admitted to prison, smoker in the community with no access to vape as yet .

A – What is currently used: Nothing – no access to vape as yet.

Amounts smoked per day: 11-20 cigarettes

Time after waking before using nicotine products: within 5 minutes

Number of quit attempts in past year: none

Previous NRT used: lozenges

Current health issues: none

Contraindicated medication: none

Quit date set for: 30/8/21

R – NRT recommended: 1mg lozenge.

NRT to be provided with behavioural support from PHAS.

Kelly [redacted] NHS Forth Valley Prison Healthcare Addictions Service, HMPCV.

1130

Dr [redacted] Sayers
26/08/2021 Third Party Consultation Ms [redacted] Hedley
26/08/2021 Document Image Docman Attachment
26/08/2021 Administration NHRS Session HMP Cornton Vale Addictions Ms [redacted] Hedley
26/08/2021 Triage Ms [redacted]
26/08/2021 Mental health review Following ANP referral to MHT, Georgina has been added to the next CTM list to be allocated to named nurse.
Previously allocated to [redacted]
26/08/2021
1750hrs Ms [redacted]
26/08/2021 Triage Ms [redacted] Beveridge
26/08/2021 Drug addiction therapy Addictions admission session

S - Met with Georgina for addictions admission session at 14:05. Verbal consent to proceed obtained.

B - Georgina is currently convicted and has been recalled to prison for her own safety. Currently not prescribed any MAT. Georgina has historic alcohol dependency.

A - [redacted] was well kempt when we met in excerise yard of [redacted]. Georgina is understandabley upset that she is back in custody through no fault of her own but she has no thoughts of DSH. Georgina was bright, reactive with normal rate and tone.

R - Details of any actions: declined Naloxone, referred to smoking cessation

Advised of how to refer back to PHAS if no actions at this time? yes

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~~A - Details of any actions. Declined Naloxone, referred to smoking cessation~~

Advised of how to refer back to PHAS if no actions at this time? yes

[redacted] Beveridge, Prison Healthcare Addictions Team, 15:30 Ms[redacted] Beveridge

26/08/2021 Other Miss [redacted] Mckeich

26/08/2021 Consultation Admission, recall, last lib's 8th July 2021
PMH: asthma - well controlled, cholecystectomy
lactose/gluten intolerent
MH: long hx depression anxiety,suicide attempts/self [redacted] patient states was placed in prison for safety reasons not for doing anything wrong, upset by this but clearly states no thoughts of suicide or self harm, states no recent attempts, has dyslexia, agreed referral to MHT
allergies - lacose/gluten
Med as per ECS:
Paroxetine Hydrochloride 30 mg Tablets ONE TO BE TAKEN DAILY 30-Jul-2021 30-Jul-2021
In Practice Propranolol Hydrochloride 80 mg M/R capsules ONE TO BE TAKEN EACH MORNING 13-Jul-2021 13-Jul-2021
In Practice Amitriptyline Hydrochloride 25 mg Tablets TWO TO BE TAKEN ONCE AT NIGHT 13-Jul-2021 13-Jul-2021
In Practice Lymecycline 408 mg Capsules ONE TO BE TAKEN EACH DAY 13-Jul-2021 13-Jul-2021
In Practice Quetiapine Fumarate 25 mg Tablets THREE TABLETS IN MORNING 13-Jul-2021 13-Jul-2021
In Practice Quetiapine Fumarate 100 mg Tablets ONE TO BE TAKEN AT NIGHT 13-Jul-2021 13-Jul-2021
In Practice Benzoyl Peroxide 5 % Gel APPLY 1-2 TIMES A DAY AFTER WASHING WITH SOAP AND WATER. 13-Jul-2021 13-Jul-2021
Patient states been complying with medication since release, medication prescribed
smoker - states occasional cigarette, advised smoking cessation service
Periods - last was months [redacted] - has rod in, inserted prior to liberation
[redacted] - no
STI's - states could be at risk, agreed referral to SH clinic
BBV - states was to be tetsted this week, listed for BBV, last test was 2015 - negative
Drug use - nil,
Alcohol - states does not drink, previous hx dependency
Hep B vaccibne - completed course
Also had 2 covid vaccines - last one was 2 weeks ago
Miss [redacted] Mckeich

26/08/2021 Other Miss [redacted] Mckeich - No Data Recorded

25/08/2021 Third Party Consultation Ms [redacted] Hedley

25/08/2021 Document Image Docman Attachment
25/08/2021 Administration Patient Registration HMP Cornton Vale Administration Ms [redacted] Hedley

25/08/2021 Triage Mrs Aileen Alexander

25/08/2021 Admission profile form completed Georgina has returned to custody from Police as a recall. She advises that she had to call the [redacted] as she was being attacked and they decided she was safest to be returned to custody. Georgina is quite happy with this as she felt very vulnerable being returned to Ayrshire as she was at risk of attack. Georgina looked well, has no thoughts of self-harm or suicide, is continuing to take the same medication as was prescribed before release. She knows how to refer to nursing staff if required, no further issues at this time. Mrs Aileen [redacted]
25/08/2021 No apparent risk of suicide Mrs Aileen [redacted]
25/08/2021 No thoughts of deliberate self [redacted] Mrs Aileen [redacted]
25/08/2021 Smoker User of electronic cigarette Mrs Aileen [redacted]
25/08/2021 Current drinker Alcohol intake within recommended sensible limits Mrs Aileen [redacted]
25/08/2021 Housing lack Type of residence: Own home Lives alone No Mrs Aileen [redacted]
25/08/2021 Allergy Moderate H/O: non-drug allergy lactose intolerant Mrs Aileen [redacted]
25/08/2021 Prescription by GP Georgina states her medication has not changed since being in custody, 2 months ago. Quetiapine 75mg mane, 100mg nocte, Propanolol MT 80mg mane, and anti-depressant that she could not recall the name of. Mrs Aileen [redacted]
25/08/2021 Ability to perform activities of everyday life Mrs Aileen [redacted]
25/08/2021 Language Spoken: English Preferred: No Mrs Aileen [redacted]

14/07/2021 Triage Mrs Jane Watt

14/07/2021 Mental health review Ms Smith has recently joined your practice on liberation from HMP Cornton Vale.

History of self-harm or suicide attempts: Georgina reports an extensive history of both self-harming behaviours and [redacted] ideation since childhood. Last suicide attempt was approximately 8 years ago following conviction, states she put blue roll down her throat in an attempt to block her airway, she was found by her cell mate. Reports self-harming by cutting her abdomen and thighs as a way of releasing anger so she does not take it out on someone else. Georgina also has an eating disorder where she restricts her food intake, she describes this as a way of feeling in control.
History or diagnosis of mental health issues: Reports being diagnosed with the following: personality disorder, grieving disorder, stress disorder and panic & anxiety attacks, Georgina reports feeling detached when experiencing a panic attack.

History of drug or alcohol misuse: Reports drinking alcohol since the age of 9/10 years of age, describing herself as being alcohol dependent prior to being in custody. Georgina described being kidnapped by both her [redacted] and [redacted] at the age of 11 years where they injected her with heroin and sexually assaulted her, also states her [redacted] would add heroin to her meals. History of smoking cannabis.

Cognitive decline or impairment; learning difficulties: Georgina has Dyslexia and uses a purple colour ruler to [redacted] Poor memory recall due to ?brain damage.

Significant mood changes: Can become very angry without warning.

Significant psychological reactions to stress: anxiety, anger, irritability and feeling overwhelmed.

Serious physical illness e.g. heart problems, tumour, neurological: Seen in [redacted] health clinic. Letter received from gynae in FV saying they will not consider labiaplasty. Discussed this with Georgina - explained the reasons why (can be a poor cosmetic result, wound can break down to infection). Discussed that a more specialist centre may see her - on liberation if she asks her GP for referral into Glasgow it may be considered. Dr Imogen [redacted] is happy to be contacted for more information regarding this.
Traumatic inter-personal problems; significant life events: Experienced childhood [redacted] emotional and physical abuse from her [redacted] and many paedophiles.

Georgina has had input from Mental Health Team whilst in custody and would benefit being referred to Community Mental Health and Psychology for ongoing support.

If you require any more information, please do not hesitate to contact myself or the team at Cornton Vale Health Centre.

[redacted] Watt
S/N MHT

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

Jane Watt
S/N MHT
14/07/21 15.50 Dr [redacted] Strachan

14/07/2021 Third Party Consultation Mrs [redacted] Watt - No Data Recorded
13/07/2021 Triage Mrs [redacted] Watt
13/07/2021 Symptom [redacted] ntinuous Email contact from Carrie Pirrie, [redacted]
Geroglie Smith has registered at Kilbirnie health centre , 2-4 kirkland road, Kilbirnie Ka25 6hs 01505 683591

Regards
Carrie

[redacted] Watt
S/N MHT
13/07/21 13.50 Dr [redacted] Strachan
09/07/2021 Third Party Consultation Ms Sharon Broadfoot
09/07/2021 Document Image Docman Attachment
09/07/2021 Administration Kardex HMP Cornton Vale Pharmacy Ms [redacted] Broadfoot
09/07/2021 Third Party Consultation Ms [redacted] Broadfoot
09/07/2021 Document Image Docman Attachment
09/07/2021 Administration Administration HMP Cornton Vale Naloxone Training Ms [redacted] Broadfoot
06/07/2021 Third Party Consultation Mr Henshall [redacted]
06/07/2021 Occupational therapy Planned OT Contact.

Met with Georgina in communal area of Pebbles House, HCA present. Informed by Georgina that she had an upcoming visit so the session would have to be brief. She presented as well-kept in appearance and relaxed in mood. I enquired regarding her feelings around liberation. She reported she was kind of numb to the whole process and it did not seem real. She reported it would seem real when she was actually leaving the prison. We discussed how she might deal with difficulties that she might encounter when liberated. She reported she would talk to [redacted] support network and not bottle up feelings of anxiety. She reported she would attend the gym, go for walks and refer to her wellbeing plan given to her by the OT [redacted]

Georgina reported feeling as if she would be ok when liberated and would do well. I wished her luck. Mr Henshall Jon
06/07/2021 Third Party Consultation Mrs [redacted]
06/07/2021 Document Image Docman Attachment
06/07/2021 Administration Clinical Letter NHS Forth Valley Gynaecology Mrs [redacted]
06/07/2021 Other Miss Jack [redacted] Mckeich
06/07/2021 Consultation - on reviewing patients kardex, it was noted that [redacted] is already prescribed celecoxib, an NSAID, therefore ibuprofen will not be appropriate.
[redacted] made aware, and advised to use simple analgesia.

[redacted]
PCT Nurse
6/7/21 Mrs [redacted]
06/07/2021 Consultation - seen for review following complaints of a dental abscess.
No significant swelling evident, Georgie advises that it has since improved.
Pain on and off, and appears to be more agitation of the gum due to dentures than an abscess.
No nausea, vomiting, or fever.
Has been taking regular paracetamol.
Antibiotics not indicated at this time, however advised that she can have PGD ibuprofen for discomfort, and to make a dental appointment on liberation. (due to be libbed in 2/7)

[redacted]
PCT Nurse
6/7/21
15.35 Mrs Caroline [redacted]
06/07/2021 Other Miss J [redacted] Mckeich
06/07/2021 Consultation ANP book, discharge letter completed. Note entry 22/6/21 re ? dental abcess, does not appear to have been prescribed antibiotics, can staff please check if patient is [redacted] having symptoms. Miss [redacted] Mckeich
05/07/2021 Triage Ms [redacted] Hedley - No Data Recorded
05/07/2021 Triage Dr [redacted] Murray
05/07/2021 Seen in [redacted] health clinic Seen in SH clinic for review of recent blood tests. Oestrogen slightly low but nothing for concern and probably just due to timing of tests in relation to cycle. Dr [redacted] Dr [redacted] Murray
02/07/2021 Triage Mrs [redacted] Watt
02/07/2021 Consultation S: Seen at named nurse session
B: Mouth Abscess
A: Ongoing pain and swelling for more tha 2 weeks in lower right gum(no tooth). Unable to tolerate bottom denture plate.
R: Refer MO AM for antibiotic
[redacted] Watt
S/N MHT
02/07/21 16.00 Dr [redacted] Strachan
02/07/2021 Mental health review Named Nurse Contact
[redacted] attended health centre for named nurse contact.
Initially she was a bit upset, told me of a phone call she had just received from her [redacted] telling her her [redacted] had just been given a diagnosis of prostrate cancer. [redacted] and [redacted] were not taking news well and [redacted] was feeling overwhelmed but was able to reassure [redacted] that she would help support them on liberation. We discussed diagnosis, prognosis and treatment of prostrate cancer and [redacted] was given reassurance with this knowledge.
We discussed her liberation and was reassured by myself about package of care that was to be given. Advised I was awaiting notification of her new GP in order for me to forward on to Dr [redacted] for Gynae referral/information, and myself to send discharge Mental Health letter.
[redacted] was bright and reactive, showing a positive outlook on her liberation and hopeful of a positive outcome.
She was informed of Covid test to be carried out in reception on the morning of her liberation. Understands the rationale and is happy to comply.
I have agreed to catch-up on Monday 05/07/21 for a final time.
[redacted] Watt
S/N MHT
02/07/21 16.00 Dr [redacted] Strachan
30/06/2021 Triage Ms L [redacted]

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30/06/2021 Occupational therapy mental health occupational therapy - Attempted to meet with [redacted] this morning, [redacted] was attending ICP meeting therefore unable to meet with her. Ms [redacted]
30/06/2021 Triage Mrs J [redacted] Watt
30/06/2021 Mental health review Named Nurse Appointment
Met with [redacted] during outside exercise on 27/06/21. Georgie was bright and reactive. Reported that she had challenged the peers whom she believed were bullying and talking about her. She stated she felt better for doing same and no violence had occurred. Her upcoming liberation continues to be the source of her anxieties and despite being given reassurance from myself and [redacted] OT. Looking for a referral letter from Dr [redacted] regarding her gynae issues and a [redacted] appointment.
On reading her vision notes, Dr [redacted] is happy to write to [redacted] new GP with her ongoing issues. [redacted] may be discharged before seeing [redacted] due to being so near liberation.
I have emailed SW Carrie Pirrie requesting new GP details in order to forward all of Georgies mental and physical health records.
I will advise [redacted] of this.
[redacted] Watt
S/N MHT
30/06/21 15.15 Dr [redacted] Strachan
06/06/2021 Mental health review Named Nurse Meeting Entry entered in retrospect

I met with [redacted] and her PO [redacted] out in garden area. Georgie had enjoyed playing bingo with her peers.
She was bright and reactive with good eye contact.
[redacted] was upset as she has not been allowed back to her job in the kitchen since voicing her [redacted] about being bullied. She is finding having no distractions during the day is making her more anxious about pending liberation. Although has been advised that most of her questions about her release i.e. early release, destination and transportation can't be answered until week of release she is still anxious about not knowing.
She has anxieties about how she will navigate new surroundings and afraid of how people will react to her. Stresses about meeting acquaintances from the past and what they may expect from her.
Box of files with her childhood reports still missing possibly in Grampian. Would like to retrieve these as she feels that having these will make moving on with new therapists easier if they were available to be [redacted]
I will attempt to contact Community [redacted] Carrie Pirrie base in [redacted] to see if she is able to give any information on levels of support [redacted] will get in order to relieve some her anxieties. I shall also liaise with Moira Arnott throughcare here in Corton Vale to see if she can also give advise.

[redacted] Watt
S/N MHT
06/06/21 14.30
Dr [redacted] Sayers
25/06/2021 Third Party Consultation Ms [redacted] Hedley
25/06/2021 Document Image Docman Attachment
25/06/2021 Administration Naloxone Training HMP Corton Vale Addictions Ms [redacted] Hedley
25/06/2021 Triage Ms [redacted] mma Beveridge
25/06/2021 Drug addiction therapy Naloxone
S - Met with Georgina for Take Home Naloxone (THN) intervention at 14:15. Verbal consent to proceed obtained.

B - Georgina is currently convicted and scheduled for liberation on 9/7/21.

A - [redacted] was well kempt when we met in Peebles, [redacted] has had training before but was still engagin and able to answer all questions correctly, [redacted] was bright, reactive, with normal rate and tone.

THN session delivered. Georgina is now competent in the recognition of when and how to administer naloxone.

R - Make up naloxone pack and place in property prior to liberation.
Naloxone pack made and handed into reception.

Exp date 09/2023
Lot Number 0130843

[redacted] Beveridge, Prison Healthcare Addictions Team, 15:15 Ms [redacted] Beveridge
24/06/2021 Triage Ms [redacted] Cleary - No Data Recorded
24/06/2021 Triage Ms [redacted]
24/06/2021 Occupational therapy Entered in retrospect from 23/6/21
Mental Health Occupational Therapy - Did not attend planned kitchen session this morning, was attending hairdressers. Ms [redacted]
24/06/2021 Other Miss Jackie Mckeigh - No Data Recorded
24/06/2021 Results recording Dr [redacted] Sayers
22/06/2021 Serum oestradiol level = 80 pmol/L Abnormal Dr [redacted] Sayers
22/06/2021 Biochemical test = <none> Dr [redacted] Sayers
22/06/2021 Follicle stimulating hormone level = 6.1 U/L Follicle stimulating horm lev - U/L - Post-pubertal female follicular FSH 3-8 U/L LH 2-13 U/L Dr [redacted] Sayers
22/06/2021 Serum LH level = 8.4 U/L U/L Dr [redacted] Sayers
22/06/2021 Endocrine studies = <none> Dr [redacted] Sayers
22/06/2021 Serum TSH level = 0.92 mU/L mU/L Dr [redacted] Sayers
22/06/2021 Thyroid function test = <none> Dr Craig Sayers
23/06/2021 Third Party Consultation Ms [redacted] Hedley
23/06/2021 Document Image Docman Attachment
23/06/2021 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Ms Erin Hedley
23/06/2021 Triage Ms [redacted] Cleary
23/06/2021 Seen by health care assistant
Removed from the hca clinic for bloods due to the fact she has already had these done by C Lane on 22/06/2021.
[redacted] Cleary
health care assistant
23/06/2021 Ms [redacted] Cleary
23/06/2021 Triage Ms [redacted] Beveridge

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23/06/2021 Drug addiction therapy DNA

[redacted] did not attend Take Home Naloxone with Prison Healthcare Addictions Team at 13:20.
Reason given for non attendance: Patient at hairdresser

Re-offer appointment

Jemma Beveridge, [redacted] Healthcare Addictions Team, 13:51 Ms [redacted] Beveridge
23/06/2021 Triage Ms [redacted] Kilpatrick
23/06/2021 Failed [redacted]er Georgina was listed in HCA clinic for bloods to be obtained however officer advised me that Georgina was at the hair dressers and would be there all morning. I will list for next HCA clinic,

[redacted] Kilpatrick
HCA
23/06/21
11:39 Dr [redacted] Strachan
22/06/2021 Third Party Consultation Ms Erin Hedley
22/06/2021 Document Image Docman Attachment
22/06/2021 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Ms [redacted] Hedley
22/06/2021 Triage Ms Michelle Cleary
22/06/2021 Seen by health care assistant Listed in hcas clinic for bloods .
[redacted] Cleary
health care assistant
22/06/2021 Ms [redacted] Cleary
22/06/2021 Triage Ms Cliodna Lane
22/06/2021 Seen in [redacted] health clinic Georgina is requesting letter from GP so she can give to her community GP herself as she will not get registered until she is realesed. Advised I will contact Dr [redacted] letter.
Patient [redacted] requesting hormone bloods to be checked due to excess hair to face and chest - same done
C.Lane 12.34.

22/06/2021 Triage Ms [redacted] Warman
22/06/2021 Consultation S- Seen in nursing clinic
B- Self referal
A- Georgine complaining of absess to lower right jaw. On palpation small lump felt, not hard. No redness, slight swelling tender to touch, slight heat felt. States she can feel this going up cheekbone and into forehead. Nothing felt on examination. Georgina states feels well in herself and anxious about upcomming release.
R- ?ABX for absess

[redacted] Warman
PCT
10:21 Dr [redacted] Strachan
21/06/2021 Triage Ms [redacted] Hedley
21/06/2021 Self-refe[redacted] for Nurse and Well Person Clinics received and logged.
[redacted] Hedley
Health Centre Administrator
21.06.21
10:52 Ms [redacted] Hedley
18/06/2021 Triage Ms [redacted] Hedley - No Data Recorded
17/06/2021 Third Party Consultation Ms [redacted] Hedley
17/06/2021 Document Image Docman Attachment
17/06/2021 Administration Pre Liberation NHRS Paperwork HMP Cornton Vale Addictions Ms [redacted] Hedley
17/06/2021 Triage Ms [redacted] Beveridge
17/06/2021 Drug addiction therapy Pre liberation [redacted] Reduction

S - Met with Georgina but prefers [redacted] for addiction pre liberation [redacted] reduction at 10:15. Verbal consent to proceed obtained.

B - [redacted] is currently convicted and scheduled for liberation on . Currently not prescribed any MAT. [redacted] is not a drug user but her crime involved intoxication.

A - [redacted] was well kempt and ready for the gym at 10:30am. [redacted] engaged well and maintained good eye contact throughout. [redacted] was bright, reactive with normal rate and tone.
[redacted] is aware of the main risks and causes of substance overdose and aware of signs of the same. Overview of Take Home Naloxone (THN) service given.

R - [redacted] would like to be given THN training.

[redacted] Beveridge, Prison Healthcare Addictions Team, 15:31 Ms [redacted] Beveridge
16/06/2021 Triage Ms [redacted] Hedley
16/06/2021 Drug addiction therapy Allocated to Addictions Caseworker J Beveridge for pre liberation NHRS.
[redacted] Hedley
Health Centre Administrator
16.06.21
14:16 Ms [redacted] Hedley
16/06/2021 Third Party Consultation Mr Henshall[redacted]
16/06/2021 Occupational therapy Planned OT Contact-

Carried out kitchen session with Georgina in [redacted] House with [redacted] OT present.

[redacted] presented in an anxious mood. Well-kept in appearance and engaged positively throughout the session. Reported feeling anxious due to an upcoming meeting regarding the issuing of a laptop. Discussed the possibility of worrying about questions that might not be as bac as she perceives.
Discussed calming strategies with Georgina that she can carry out after her meeting which can help her mood should she need to after session eg listing to her favourite music. She reported she would try this.
She reported feeling anxious regarding where she will live once liberated, as she in concerned what will happen if meets any of her former friends/ gang members. She reported she would rather spend the remainder of her time in a prison in which she was locked away rather than enjoying the freer regime here at Cornton Vale

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Georgina Smith 04/12/1991 662/91/440 [illegible] **All Consultations**

ported she would rather spend the remainder of her time [redacted] in which she was lo[redacted]
than enjoying the freer regime here at Cornton Vale.
Georgina prepared and cooked spaghetti bolognaise independently requiring no prompting/support. Initiated and completed all tasks independently.
Discussed the possibility of completing kitchen session next week. Explained to Georgina that type of session would be dictated by staffing levels, she was accepting of this.

Plan-
Carry out further kitchen session staffing allowing on return to Cornton Vale Mr Henshall [redacted]

15/06/2021 Third Party Consultation Ms [redacted] Hedley
15/06/2021 Document Image Docman Attachment
15/06/2021 Administration Administration HMP Cornton Vale Letter to Patient Letter from [redacted] Health Doctor Ms [redacted] Hedley

09/06/2021 Third Party Consultation Mr Henshall [redacted]
09/06/2021 Occupational therapy Planned OT Contact/kitchen assessment-

Met with Georgina in Pebbles House walked across to [redacted] kitchen with myself, [redacted] OT and member of SPS staff.Georgina was well-kept in appearance and presented in a bright mood. Expressed wish to [redacted] spaghetti next week in the kitchen, we also discussed possible microwave cooking in the weeks to come due to staff numbers. She reported she would be interested in this.

Discussed a Staying Well plan with Georgina with regards her mental health. Georgina took plan with her back to her room and agreed to look over this. She reported an issue with kitchen job which she is no longer carrying out. Reported to wanting to take this further and make change with regards bullying in prison. She was advised to try on concentrate on her upcoming liberation as taking something else on maybe too much for her.

Georgina carried out the baking of individual cholate cakes. She was largely independent during the session, required minimal prompting. Any prompting given was due to engaging in conversation with myself and [redacted] No obvious safety concerns observed from the session. Reflected to Georgina that confidence will increase with practice, she appeared to agree with this.

Plan-
Meet next week for kitchen assessment. Mr Henshall [redacted]

07/06/2021 Triage Dr [redacted] Murray
07/06/2021 Seen in [redacted] health clinic Seen in [redacted] health clinic. Letter recieved from gynae in FV sayin they will not consider labiaplasty. Discussed this with Georgina - explained the reasons why (can be a poor cosmetic result, wound can break down to infection). Discussed that a more specialist centre may see her - on liberation if she asks her GP for referral into Glasgow it may be considered. I'm happy to write to her GP explaining what has happened so far with this referral. Dr [redacted] Dr Imogen [redacted]

06/06/2021 Triage Mrs [redacted] Watt
06/06/2021 Mental health review Seen today for named nurse review.
Full report in Care Partner

[redacted] Watt
S/N MHT
06/06/21 16.00 Dr [redacted] Strachen

04/06/2021 Triage Ms [redacted]
04/06/2021 Consultation
Seen in clinic for NRF: Georgina advises that she has been experiencing loose stools due to increased stress levels associated with [redacted] bullying and her upcoming release in 4 weeks.
Georgina advises that she has taken time off work however she now feels her days are 'dragging in'.
I have encouraged Georgina to continue engaging with the mental health team for support to reduce her stres level.
Advised to keep hydrated and eat a healthy diet.
Suggested further referral if loose stools are ongoing however at this time no clinical action required.

Georgina asked when her next appointment is with the GP as she wants to discuss her back pain and ? being double cuffed. No routine appointment made for this. Advised to complete a referral for same to be added to waiting list for GP review.

[redacted]
Primary care nurse
04/06/2021, 10:35 Ms [redacted]

01/06/2021 Other Ms [redacted] Bradgate
01/06/2021 COVPFIZER Stage: 1 Given Routine Measure Due 22/06/2021 Batch: ET8885 Ms [redacted] Bradgate

01/06/2021 Triage Ms [redacted] Hedley
01/06/2021 Self-referral for Nurse Clinic received and logged.
[redacted] Hedley
Health Centre Administrator
01.06.21
10:25 Ms [redacted] Hedley

31/05/2021 Triage Ms Erin Hedley
31/05/2021 Self-referral for Mental Health Clinic received and logged.
[redacted] Hedley
Health Centre Administrator
31.05.21
11:12 Ms [redacted] Hedley

28/05/2021 Third Party Consultation Ms [redacted] Hedley
28/05/2021 Document Image Docman Attachment
28/05/2021 Administration Administration HMP Cornton Vale Letter from Patient Ms [redacted] Hedley

28/05/2021 Triage Ms Denise [redacted]
28/05/2021 Medication - risk monitoring Spotcheck carried out on 28/05/21. All weekly medications including Paroxetine, Propanolol and Amitriptyline counted correct. Quetiapine 3 + 20 x 25mg returned to H/C and 1 x 100mg Quetipine and increased dose dispensed (100mg and 75mg daily) Ms Denise Allan
28/05/2021 Consultation 10.30am
Letter request to be seen as struggling at this time with bullying and her emotional regulation, states being bullied within her work party and she has discussed this with [redacted] personal officer and work party officer. [redacted] states she's anxious and scared that she will loose control of her anger and temper. We discussed how she may wish to interact with her peers in the work party and means of breaking the bullying cycle.
She feels her mood is low and she is compliant with prescribed medication, she is worried about her pending liberation and the support for her on liberation. It was noted that the [redacted] has increased her quetiapine. [redacted] states that she has not received the increased medications, I have followed this up and she is to have them in cell tonight.
[redacted] states that she often thinks about harming herself, and at this time denies acting upon these thoughts and clearly states she is not

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is up and she is to have them in cell tonight.
Georgie states that she often thinks about harming herself, and at this time denies acting upon these thoughts and clearly states she is not [redacted] and if the thoughts were more significant she would ask for help, it was advised that she [redacted] use her call point at any time day or night.
We explored long lock up times and how she uses her time in the evenings. [redacted] is also engaging with [redacted] MH OT, has [redacted] Watt as her named MH nurse and she feels they are a good support.
I have added Georgie in the MH diary to be seen Next week for follow up until her MH returns from leave.
Brief discussion with FLM A [redacted] who advised that they are aware that [redacted] is stating that she is being bullied. Ms Denise [redacted]
26/05/2021 Triage Ms [redacted]
26/05/2021 Occupational therapy Mental Health Occupational Therapy - Met with Georgina for planned contact. [redacted] voiced increasing anxiety in relation to her upcoming liberation. We discussed these in detail, focussing on those which were within [redacted] control at this time and provided strategies for managing her anxiety regarding factors that are currently out with her control.

Main issues raised by [redacted] were where she will [redacted] liberation and the level of support she will have in the community. [redacted] aware that she has an allocated [redacted] who is dealing with these issues on her behalf, but feels that she needs time to process this information and prepare herself for liberation and is worried that this information will not be provided in enough time for her to do this.

Georgie requested additional cooking sessions (x2 weekly) with OT to develop her confidence in food preparation, advised [redacted] that due to capacity of service this could not be facilitated and that her assessed level of functioning did not suggest that this was necessary. Georgie's self appraisal of her ability to complete activities of [redacted] living are inconsistent with her assessed level of functioning. We explored how Georgies confidence is likely to improve in the community when she is able to practice these skills daily, and we explored transferrable skills that she can continue to develop by attending her work party in the prison kitchens. [redacted] has had experience of using industrial laundry equipment, but was worried that she would find it difficult to use domestic laundry facilities. I am unable to assess this in the prison however we discussed laundry care labels and what these signs mean and Georgie was provided with verbal guidance and a written handout containing this information.

We also discussed strategies that [redacted] uses to manage her emotions and self harming and how these can be further developed to support her at home. [redacted] has a comfort blanket which she intends to keep only a small part of, and will replace this with a new one when home. [redacted] is aware of sensory strategies that are helpful in times of distress, including scents, lighting, music and movement and was encouraged to incorporate a safety plan for maintaining her mental health into her first aid box at home.

OT Plan - Next session 9/6/21. Complete safety plan and kitchen practice to develop confidence.
Contact [redacted] and obtain information regarding support required on liberation.I

Ms [redacted]
26/05/2021 Triage Ms [redacted] Mclean
26/05/2021 Consultation ANP
L.Kane
see entry 26/5/21
for increase in quetiapine 75mg MANE and 100mg NOCTE
if she is oversedated during the day can be changed to 50mg MANE and 125mg NOCTE
Ms [redacted]
26/05/2021 Triage Mrs [redacted] Watt
26/05/2021 E-mail received from consultant Summary of contact Copied from Care [redacted]
Contacted by [redacted] Watt to enquire about an increase to Georgina's prescribed Quetiapine. Georgina has been struggling recently in the run up to her release in July.

Clinical records on Care [redacted] reviewed

Has been stable on current low Quetiapine dose for some time.

I agree that a small increase of 50mg daily would be reasonable in the first instance, to see if this improves her current difficulties with thoughts of self [redacted]

Plan
Increase Quetiapine to 75mg morning 100mg night
If she finds she is over-sedated in the daytime, the dose can be changed to 50mg morning 125mg night Dr [redacted] Strachan
26/05/2021 Triage Mrs Jane Watt
26/05/2021 Mental health review Pre release planning/named nurse session

Met with [redacted] as planned for pre release support. She voiced many anxieties regarding the future.
She reported being more restless at night and although has not self harmed recently she has been using her bobble more often as a form of distraction.
Email sent to Dr [redacted] requesting increase of Quetiapine which has been agreed. Have made a request for this to be prescribed.
Spoke with [redacted] Edward OT for more life skill training/coping strategies as this is a major worry for [redacted] as she has never had her own flat/room which she has had sole responsibility for.
We also spoke about her gynae referral for a labiaplasty. I have emailed Dr Murray for advice regarding this referral.
[redacted] seemed happy at the end of our session and I have arranged to meet up again in 1 weeks time.

Jane Watt
S/N MHT
26/05/21 11.30 Dr Bruce Strachan
22/05/2021 Third Party Consultation Ms Erin Hedley
22/05/2021 Document Image Docman Attachment
22/05/2021 Administration Administration HMP Cornton Vale In-Possesion Medication Check Ms [redacted] Hedley
19/05/2021 Triage Mrs [redacted] E Kane
19/05/2021 Consultation ANP
L.Kane
MOA
see entry 18/5/21
prescribed yellow soft parafin Dr [redacted] Strachan
19/05/2021 Triage Ms [redacted]

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19/05/2021 Occupational therapy Mental Health Occupational Therapy - Met with [redacted] for planned Kitchen assessment, SPS officer [redacted] present throughout.

Georgie had planned menu the previous week - lentil soup. OT staff had purchased ingredients for purpose of assessment. [redacted] had a limited knowledge of the [redacted] of ingredients and how much this meal may cost. This is likely due to extended time in custody and not having access to shops to develop this knowledge.

During assessment [redacted] demonstrated a good ability to prepare fresh vegetables and operate cooker safely. During her time in custody [redacted] has worked in the kitchens and has opportunity to experience bulk preparation of meals and was able to demonstrate use of transferrable skills. [redacted] required some guidance to identify appropriate quantity of food for cooking for 1 person.

[redacted] was provided with a written recipe to follow and was able to follow this independently. [redacted] had selected to add bacon to her soup, and required some assistance to identify the sequencing of additional tasks that were not included in the original recipe.

Following assessment [redacted] cleaned dishes, worksurfaces and floors without prompting, demonstrating a good awareness of kitchen hygiene.

Outcome of assessment
[redacted] demonstrated that she is able to safely prepare lentil soup using electric cooker following a written recipe. Further opportunities for cooking are recommended to develop skills and confidence in meal preparation.

Recommendations
On liberation [redacted] may require further assessment/support to determine ability to complete shopping and budgeting tasks. This should be followed up by community staff.

[redacted]
Occupational Therapist
19.5.21 Ms [redacted]
18/05/2021 Triage Mrs [redacted]
18/05/2021 Consultation - C/O painful sores at the side of the mouth.
[redacted] states that these are caused by constant licking due to anxiety. Requesting cream or something due to sores being painful. Would MO consider prescribing yellow paraffin?

[redacted]
Practitioner Nurse
18/05/21
11.58 Mrs [redacted]
14/05/2021 Triage Ms [redacted] Hedley
14/05/2021 Self-referral for Nurse/Doctor and [redacted] Health Clinics received and logged.
[redacted] Hedley
Health Centre Administrator
14.05.21
10:43 Ms [redacted] Hedley
12/05/2021 Third Party Consultation Ms [redacted]
12/05/2021 Occupational therapy Mental Health Occupational Therapy Met with [redacted] for planned contact. [redacted] described some concerns regarding her upcoming liberation and how she will function independently in the community after having spent most of her childhood and adult life to date in care/prison. Identified practical tasks such as cooking as priority, but also spoke about her concerns regarding how she will cope in the community due to her previous lifestyle and links to gangs. Georgie described her intention to spend most of her time in her house to avoid the chance of meeting people who know her. Discussed the impact that this may have on her mental wellbeing and the benefits of linking in with groups or activities in the community where she can feel safe and develop interests and skills that will support her to live independently. OT plan - Weekly contact to support Georgie to develop skills for independent living, cooking session planned for 19/5/21. Ms Lisa [redacted]
05/05/2021 Triage Ms [redacted]
05/05/2021 Medication - risk monitoring Spotcheck carried out on 05/05/21.All medications counted (Paroxetine, Quetiapine,Amitriptyline, Lymecycline and Propanolol L.A) and correct Ms [redacted]
05/05/2021 Occupational therapy Mental HEalth Occupational Therapy - Met with [redacted] briefly whist she was attending outdoor recreation , was sitting in the company of peers in the garden area. [redacted] reports that she is attending work party in kitchen this afternoon, agreed that I would arrange to see [redacted] at a more suitable time next week. Ms [redacted]
27/04/2021 Triage Ms [redacted] Kilpatrick
27/04/2021 Letter encounter to patient Letter sent to Georgina to make her aware of normal blood result as documted above by the G.P.

[redacted] Kilpatrick
HCA
27/04/21
16:38 Dr [redacted] Strachan
27/04/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
27/04/2021 Other Dr [redacted] Sayers
27/04/2021 Ongoing review Normal bloods noted Dr [redacted] Sayers
26/04/2021 Other Ms [redacted] Bradgate - No Data Recorded
23/04/2021 Triage Mrs Aileen [redacted]
23/04/2021 Telephone encounter S - Telephone call received from SPS staff.
B - Georgina believes she is having an allergic reaction to antibiotics, she does not have antibiotics in her possession at the moment. Due to fact author was medicating and not able to leave asked staff if Georgina was standing, had good colour and could complete sentences. Georgina is prescribed anti-histamine and confirmed that she had taken this earlier that morning. They confirmed all of these positively. Advised that I would attend as [redacted] as able.
R - Attended [redacted] to discover Georgina had attended her work but stated that they had been advised by Georgina that she had eaten ice cream that she is allergic to. Advised staff to contact nursing staff if any changes or deterioration.

Aileen [redacted] SN
23/04/2021 11.00 Mrs Aileen [redacted]
22/04/2021 Other Miss [redacted] Mckeich

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22/04/2021 Consultation Seen patient, requesting review of anal;gesia, states has curvature of spine and been stabbed lower spine, states pain symptoms continue, currently on amitriptyline 25mg and celecoxib 100mg, states using deep heat - no benefit and takes paracetamol. Have increase amitriptyline to 50mg nocte, patient also asking for topical agent such as cream, agreed to add in movelat gel.
Patient also requesting treatment for acne and dry skin, currently on erythromycin, no benefit, states been on for months, red inflammed pustules to chin, changed to lymecycline and added in benzoyl peroxide, patient advised how to use same, dry skin to elbows, scalp, rx dermol wash, capasal shampoo. Miss [redacted] Mckeich
22/04/2021 Other Miss [redacted] Mckeich .. No Data Recorded
22/04/2021 Results recording Dr [redacted] Sayers
21/04/2021 Serum HDL cholesterol level = 1.3 mmol/L Target value for HDL >1.2 mmol/L.. Dr Craig Sayers
21/04/2021 Serum LDL cholesterol level = 3.1 mmol/L mmol/l Dr [redacted] Sayers
21/04/2021 Serum triglycerides = 1.3 mmol/L Dr [redacted] Sayers
21/04/2021 Serum total cholesterol level = 5 mmol/L Dr [redacted] Sayers
21/04/2021 Serum lipids = <none> Dr [redacted] Sayers
21/04/2021 Glomerular filtration rate = mL/min Abnormal >59 Dr [redacted] Sayers
21/04/2021 Serum urea level = 4 mmol/L Dr [redacted] Sayers
21/04/2021 Serum creatinine = 63 umol/L Dr [redacted] Sayers
21/04/2021 Serum chloride = 111 mmol/L Abnormal Dr [redacted] Sayers
21/04/2021 Serum sodium = 140 mmol/L Dr [redacted] Sayers
21/04/2021 Serum potassium = 5 mmol/L Dr [redacted] Sayers
21/04/2021 Urea and electrolytes = <none> Dr [redacted] Sayers
21/04/2021 Serum albumin = 40 g/L Dr Craig Sayers
21/04/2021 Serum total protein = 67 g/L Dr [redacted] Sayers
21/04/2021 AST serum level = 16 U/L U/L Dr [redacted] Sayers
21/04/2021 Serum alanine aminotransferase level = 14 IU/L Serum ALT level - Dr Craig Sayers
21/04/2021 Serum alkaline phosphatase = 75 U/L U/L - ALP Ref. Limit for patients <30 days old is 0-380 iu/L
ALP Ref. Limit for patients <17 years old is 0-425 iu/L
ALP Ref. Limit for adults (>17 years) is 0-130 iu/L Dr [redacted] Sayers
21/04/2021 Serum total bilirubin level = 8 umol/L Dr [redacted] Sayers
21/04/2021 Liver function test = <none> Dr [redacted] Sayers
22/04/2021 Results recording Dr Craig Sayers
21/04/2021 Blood Glucose = 4.7 mmol/L
21/04/2021 Biochemical test = 10.1 Dr [redacted] Sayers
21/04/2021 Blood Glucose = [redacted] <none>
22/04/2021 Results recording Dr [redacted] Sayers
21/04/2021 Nucleated red blood cell count = 0 10*9/L 10^9/L Dr [redacted] Sayers
21/04/2021 Basophil count = 0.1 10*9/L 10^9/L Dr [redacted] Sayers
21/04/2021 Eosinophil count = 0.3 10*9/L 10^9/L Dr [redacted] Sayers
21/04/2021 Monocyte count = 0.4 10*9/L 10^9/L Dr Craig Sayers
21/04/2021 Lymphocyte count = 1.5 10*9/L 10^9/L Dr [redacted] Sayers
21/04/2021 Neutrophil count = 3 10*9/L 10^9/L Dr Craig Sayers
21/04/2021 Mean corpusc. Hb. conc. (MCHC) = 345 g/L Dr [redacted] Sayers
21/04/2021 Mean corpusc. haemoglobin(MCH) = 30 pg Dr [redacted] Sayers
21/04/2021 Packed cell volume = 0.374 ratio Dr [redacted] Sayers
21/04/2021 Mean corpuscular volume (MCV) = 87 fL fl Dr [redacted] Sayers
21/04/2021 Red blood cell (RBC) count = 4.3 10*12/L 10^12/L Dr [redacted] Sayers
21/04/2021 Platelet count = 245 10*9/L 10^9/L Dr [redacted] Sayers
21/04/2021 Total white cell count = 5.4 10*9/L 10^9/L Dr Craig Sayers
21/04/2021 Haemoglobin estimation = 129 g/L Dr [redacted] Sayers
21/04/2021 Full blood count - FBC = <none> Dr [redacted] Sayers
21/04/2021 Third Party Consultation Ms [redacted] Hedley
21/04/2021 Document Image Docman Attachment
21/04/2021 Administration Clinical Letter Falkirk Community Hospital [redacted] And Reproductive Health Ms Erin Hedley
21/04/2021 Triage Mrs [redacted] Watt
21/04/2021 Mental health review For ANP/GP appointment.
Can [redacted] be tested for food intolerances as we have no formal diagnosis of these.

[redacted] Watt
S/N MHT
21/04/21 16.00 Dr [redacted] Strachan
21/04/2021 Triage Mrs [redacted] Watt
21/04/2021 Mental health review Named Nurse Contact:
Saw [redacted] this afternoon in health centre.
[redacted] was upset regarding situation in cookhouse where she feels she is being victimised and deliberately given foods which she has an intolerance with causing her pain.
I have looked back in vision and no actual testing/diagnosis appears to have been done whilst in custody. Will refer to GP/ANP to discuss this so proper dietary needs can be addressed ongoing.
[redacted] feels her options are limited in the [redacted] due to her past and people's inability to forget and move on.
We spoke about her future and how she would cope having her own accommodation. How she could, for the first time, be able to have her own space where she can make her own choices and decisions.
We talked about her favourite colour and how she would like to decorate her bedroom, she likes sensory lighting and lavender oils as she feels they relax her.
By the end of our session she was visibly more relaxed and admitted that she had found it helpful.
I aim to refer her to OT for life skill training i.e. kitchen/cooking/washing machine, use of money/bank cards.
I will meet again with Georgie next week to update on referrals and for ongoing support.

[redacted] Watt
S/N MHT
21/04/21 15.00
Dr [redacted] Strachan
21/04/2021 Triage Ms Laura Kilpatrick

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21/04/2021 Seen by health care assistant Seen in drug monitoring clinic. Bloods obtained and sent to lab. ECG already previously been obtained. Clinical observastions documeted below.
GASS SCORE 3

[redacted] Kilpatrick
HCA
21/04/21
12:10 Dr [redacted] Strachan
21/04/2021 O/E - pulse rate 77 beats/min Dr [redacted] Strachan
21/04/2021 O/E - temperature level = 36.7 degC Dr [redacted] Strachan
21/04/2021 12:09:00 BP 99 / 66 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Dr [redacted] Strachan
21/04/2021 Triage Mrs [redacted]
21/04/2021 Consulta [redacted] reatment room.
B - Nurse referral submitted.
A - Georgina [redacted] to suffer from pain after painkillers have been increased by GP about a month ago. Would like these increased if possible.
R - Will ask GP/ANP to consider this.

Aileen [redacted] SN
21/04/2021 10.00 M [redacted]ben [redacted]
21/04/2021 Triage Ms [redacted] Kilpatrick
21/04/2021 Weight: [redacted]kgs BMI: 27.5 O/E - weight Dr [redacted] Strachan
20/04/2021 Triage Ms Cliodna Lane
20/04/2021 High vaginal swab taken on 06/04/21 negative
19/04/2021 Triage Dr [redacted] - No Data Recorded
19/04/2021 Triage Ms Sharon Broadfoot
19/04/2021 Self-referral Nurse/GP & MHT referrals received and logged.
Sharon Broadfoot
Healthcare Administrator
19.04.21
11.14hrs Ms [redacted] Broadfoot
18/04/2021 Triage Mrs Jane Watt
18/04/2021 Mental health review Officer telephoned the Mental Health Team to refer Georgina as they were concerned about her mood. Nurse met with Georgina in her room. Georgina appeared well kempt but a bit tearful.

Georgina explained that she was worried about her work as she had some issues over the past two days with members of the work party and officers. She had been asked not to attend work today and was worried about the reasons why. Nurse spoke with SPS officer re these concerns. Officer reports that [redacted] has been attempting to manipulate staff in the kitchen in order to get on the pass and Sundays off.

Adding to this, Georgina explained she was stressed about living outside of prison, adjusting to [redacted] her own flat and meeting people from her past. Georgina describes having nightmares about life on the outside.
Appointment has been made with Dr Swinson on 20/04/21 to discuss her medication, but has been advised that medication is not the whole solution and she has to be prepared to do some work around how she will manage her new environment ongoing. We discussed allocation to S/N J Watt's case load and how best to support her leading up to her liberation.The focus of this work was discussed, and looking at the positives of life outside of prison are to be explored and a meeting has been set for Wednesday 21st April.

Georgina appeared happier by the end of the conversation and more positive about the future.

[redacted] Buchanan
Student Nurse
18/04/21 1045 Dr [redacted] Strachan
16/04/2021 Triage Ms Denise [redacted]
16/04/2021 Prescription by nurse practitioner Late entry following [redacted] Dr Swinson's clinic e-mail request to prescribe medications, increase prescription of Quetiapine Prescribed 50mgs(am) and 75mgs (nocte) Ms Denise [redacted]
13/04/2021 Third Party Consultation Ms [redacted] Hedley
13/04/2021 Document Image Docman Attachment
13/04/2021 Administration Administration HMP Cornton Vale Email Prescription Ms [redacted] Hedley
13/04/2021 Triage Ms [redacted] Hedley
13/04/2021 Self-referral for Mental Health Clinic received and logged.
[redacted] Hedley
Health Centre Administrator
13.04.21
10:21 Ms [redacted] Hedley
13/04/2021 Triage Ms Michelle Cleary - No Data Recorded
12/04/2021 Triage Ms [redacted] Kilpatrick
12/04/2021 Letter encounter to patient Letter sent to Georgina to make aware that her recent high virginal swab came back satisfactory.

Laura Kilpatrick
HCA
12/04/21
18:58 Dr [redacted] Strachan
12/04/2021 Triage Dr [redacted]
12/04/2021 Seen in [redacted] health clinic Seen in [redacted] health clinic in HMP Cornton Vale.

Is concerned about genital anatomy - long hx of [redacted] abuse as a child and adult. Feels like there is something abnormal at entrance of vagina. Also states that inner labia re growing and rub on trousers etc and are very uncomfortable. think had previous genital surgery but is unsure - I will [redacted] an track notes.

O/e - cervix visualised - some d/c noted in vaginal vault ? thrush (awaiting HVS). Inner labia - bilaterally quite enlarged and red where has been rubbing on knickers.

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Plan - discussed referral to gynae - long waiting list and might be unwilling to do labiaplasty but I'll put a referral in.

Dr Imogen [redacted] Dr [redacted]
12/04/2021 Triage Ms [redacted] Hedley
12/04/2021 Self-referral for Nurse Clinic received and logged.
Erin Hedley
Health Centre Administrator
12.04.21
09:59 Ms [redacted] Hedley
08/04/2021 Third Party Consultation Ms [redacted] Broadfoot
08/04/2021 Document Image Docman Attachment
08/04/2021 Administration Microbiology Results Forth Valley Royal Hospital Microbiology Ms [redacted] Broadfoot
07/04/2021 Triage Ms [redacted] Kilpatrick
07/04/2021 Letter enclosed to patient Letter sent to Georgina to make her aware that she is priscribed cetraben

[redacted] Kilpatrick
HCA
07/04/21 Dr [redacted] Strachan
07/04/2021 Triage Mrs [redacted]
07/04/2021 Consultation ANP
L.Kane
see entry 6/4/21
prescribed cetraben oint PRN Dr [redacted] Strachan
07/04/2021 Triage Ms [redacted]
07/04/2021 Consultation
Blood Glucose recorded at health event: 6.8mmol. Ms [redacted] Sinclair
07/04/2021 Weight: 70 kgs BMI: 25.7 O/E - weight Ms Amy [redacted]
07/04/2021 O/E - pulse rate 68 beats/min Ms [redacted]
07/04/2021 O/E - temperature level = 36.3 degC Ms [redacted]
07/04/2021 Pulse oximetry 100 % Ms [redacted]
06/04/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
06/04/2021 Triage Ms Cliodna Lane
06/04/2021 High vaginal swab taken TV, BV and thrush
06/04/2021 Seen in [redacted] health clinic as planned.
Reports that she has suffered from childhood [redacted] abuse from her [redacted] and many paedophiles from the age of 16 months, reports last abuse was about 3 years [redacted] while in prison.
Advised that due to abuse it has caused problems with her anatomy to her genital area and that she feels that body parts are not correct, enlarged and experiences discomfort.
Reports that she has had surgery to this area as a [redacted] but can't remember what.
C/o ongoing mucus discharge, hvs obtained for TV, BV and thrush.
Listed for Dr [redacted] for further review.

Also requesting treatment for stretch marks to stomach which are distinctive. Discussed with skin nurse who advised to trial cetraben ointment. Georgina is happy to try this; I will request this prescription in GP/ANP book.
C.Lane 12.33.

02/04/2021 Third Party Consultation Ms [redacted] Broadfoot
02/04/2021 Document Image Docman Attachment
02/04/2021 Administration Administration HMP Cornton Vale Letter to Patient Ms [redacted] Broadfoot
02/04/2021 Third Party Consultation Mrs Dawn [redacted] Beattie
02/04/2021 Document Image Docman Attachment
02/04/2021 Administration Administration Repeat Medication Request Mrs Dawn Anne Beattie
02/04/2021 Triage Ms Eilish Mcbeth
02/04/2021 Seen by triage nurse
Seen in clinic regarding NRF -
Georgina could not remember what she wanted to see a nurse for however asked if there is any treatment she can get for acne scarring on her face and neck.
I advised as this is more cosmetic it is unlikely the GP would be able to prescribe something for same.
Advised when the sundry sheet recommences we could look into adding bio-oil to same for her to order herself.
Georgina advised this would be fine, suggested she remind staff about same when sundry sheet is available again.

Georgina also wanted to dicuss her excess skin she has around her stomach area since having [redacted]
She wants to know if there is anything that will help get rid of same.
I spoke to Georgina about excercise and strengthening her core muscles.
She states she had a PT before and this did not help with same.
PT advised the skin would not reduce with exercise.
She is worried as her [redacted] ended up with a hole in the middle of her stomach due to muscle weakness in the area and Georgina does not want the same.
Unsure is there is anything that can be done about same at this time and have advised Georgina of same as this would also be classed as cosmetic.
Will speak to GP regarding same so I can feed back to Georgina.

Eilish McBeth
Primary Care
02/04/2021
0951hrs Ms Eilish Mcbeth
30/03/2021 Triage Ms Cliodna Lane
30/03/2021 Subcutaneous contraceptive implant palpable First service recall due: Claim Expiry Date: 30/03/2024

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Scanned Document
18-Jun-2026 SARA
Additional: Scanned Document

Filename: igprda202606181506060.pdf
Extension:.tif
Pages:

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ℝ All Consultations

Address and Telephone numbers

The Health Centre P.O. Box 21616 Stirling FK7 1DW
Telephone - home 0774733501

All Consultations

25/07/2024 Triage Ms [redacted] Rennie - No Data Recorded
24/07/2024 Triage Miss [redacted] No Data Recorded
24/07/2024 Triage Mrs [redacted]
24/07/2024 Ongoing review ANP L [redacted]
ANP Actions
Patient is libbed and asked to do prescription for all her PRN medications
She can buy these OTC or see her GP Mrs [redacted]
16/07/2024 Third Party Consultation Ms [redacted] Cowper
16/07/2024 Document Image Docman Attachment
16/07/2024 Administration Pre R[redacted]e [redacted] reduction disclaimer HMPYOI Stirling Addictions Ms [redacted] Cowper
15/07/2024 Surgery consultation Ms [redacted] Halliday
15/07/2024 Consultation Advised [redacted] AM that [redacted] had been granted parole on Friday 12.07.24.
GP10 completed for 28 days supply of medication by Dr Sayers to allow Georgie time to register with a GP practice.
Discharge Summary also provided.

Writer spoke with Georgie in Reception and explained what each envelope contained and wrote on th front of the envelope what envelope was for her chemist and what one was for her GP practice.

[redacted] appeared in bright spirits and was being supported home by Shine.

[redacted] Halliday
MH T/L
15/07/24
1150 Ms Cara Halliday
15/07/2024 Triage Ms Linzi [redacted]
15/07/2024 Drug addiction therapy Seen in residential area
Informed [redacted] has been granted parole and being liberated today
Pre release [redacted] reduction seession offered- same disclaimed. Naloxone training and supply offered- same disclaimed.
Advised [redacted] that we are organising liberation prescripion to get before release.Spoke about importance of registering with GP at earlies opportunity and about safely taking medication.

Linzi [redacted]
Lead Addiction Nurse 15/7/24 1000hrs Dr Gp Stirling
12/07/2024 Triage Mr [redacted] Mccallum
12/07/2024 Planned telephone contact Virtual Appointment 26/07/2024 @ 10:45
Physio FVRH
Physio`
Georgina Smith / 131344
04/12/1991
https://nhsattend.vc/mskphysio
Near Me
Mr [redacted] Mccall[redacted]
02/07/2024 Other Dr [redacted] Sayers
02/07/2024 TSH - thyroid stim. hormone = 1.3 MicroU/L Normal Normal TSH Dr [redacted] Sayers
01/07/2024 Third Party Consultation Mrs [redacted] Mcfadyen
01/07/2024 Document Image Docman Attachment
01/07/2024 Result Results HMPYOI Stirling Clinical Chemistry Mrs [redacted] Mcfadyen
27/06/2024 Triage Ms [redacted]
27/06/2024 Ongoing review ANP Action
ANP K [redacted]
sensitive scalp ketaconazole ineffective
therefore discontinued. trial dermax shampoo for 3 months
if not resolving to self refer. has full emolient therapy in place wash cream and ointment.
26/06/2024 Triage Miss [redacted]
26/06/2024 Seen by health care assistant
[redacted] in health centre. Bloods obtained for TSH. Sample sent to lab.

[redacted]
HCA
26/06/2024
11:32 Dr Gp Stirling
25/06/2024 Triage Ms Lorin Cummings
25/06/2024 Consultation
S: Seen in Nurse Clinic in the Healthcentre.
B: Scalp Issue.
A: [redacted] has a red and scaly patch at bottom of scalp which she states is really irritated and causing discomfort when touched. [redacted] states this is effecting her daily when brushing her hair etc. On examination this area was inflammed and bleeding slightly. [redacted] has bee prescribed different shampoos but feels these are innefective. She also has similar dry patches on her arms ?psoriasis.
R: Listed for ANP?GP review/actions.

SN PCT Lorin Cummings
25/6/24
18.31 Dr Gp Stirling
20/06/2024 Triage Ms [redacted] Mitchell - No Data Recorded
18/06/2024 Triage Ms Rachel [redacted]
18/06/2024 Recall on 10/09/2024 for Depo-provera injection given with Ms [redacted] Weir Status: Complete GN3573
EXP 08/2025
17/06/2024 Triage Ms [redacted] Binnie - No Data Recorded

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13/06/2024 Triage Ms Aileen [redacted]
13/06/2024 Drug addiction notification Self referral nurse AM - Mental health as per previous forms. Ms Aileen [redacted]
11/06/2024 Triage Ms [redacted] Binnie - No Data Recorded
31/05/2024 Triage Ms Viviene Mitchell
31/05/2024 Consultation S seen in clinic today
B reported sore throat
A pt reports issue self resolved, did not c/o other reported symptoms
R can rerefer if need be
s/n v [redacted]
31/5/24 14.52 Ms Viviene [redacted]
28/05/2024 Triage Ms Aileen [redacted]
28/05/2024 Self-referral Nurse KH - Pain & sore throat. Pain right side under breast. Metalic Taste in louth for 2 days & feeling lethardic - SHC - Would like a jag Ms Aileen [redacted]
21/05/2024 Clinic Dr J Green (Ad)
21/05/2024 Speech therapy Seen in Link centre.
Georgina reported that her parole hearing has been delayed again, for several weeks. She has bene told this is to do with when the parole board received information, but has not further details. Appears to be coping well, continuing to engage in work. Agreed no communication needs at this time but will keep on caseload in case communication support required at short notice.

Jan Green
Clinical Lead Speech and Language Therapy
21/5/24 4.10pm Dr J Green (Ad)
21/05/2024 Triage Ms [redacted] Rennie
21/05/2024 Drug addiction notification Would like smoking cessation Ms [redacted] Rennie
09/05/2024 Triage Miss [redacted] - No Data Recorded
09/05/2024 Triage Mrs [redacted]
09/05/2024 Ongoing review ANP L [redacted] and E.McBeth
Asked to review Doxy
Has acne - continued for 3 months - will require review if requires this after this time
08/05/2024 Triage Mrs [redacted] Toner - No Data Recorded
07/05/2024 Clinic Dr J Green (Ad)
07/05/2024 Speech therapy Case discussion with Sarah Simpson, Social Worker. Parole hearing has been set for 16/5. Accessible licence conditions being held by Social Work,. no changes required. To see Georgina 14/5 for review.

Jan Green
Clinical Lead Speech and Language Therapy
07/05/24 4.30pm Dr J Green (Ad)
02/05/2024 Triage Mrs [redacted]
02/05/2024 Ongoing review ANP L [redacted]
ANP Actions
Asked to review tacrolimus - continued for a further 4 weeks
01/05/2024 Third Party Consultation Ms Aileen [redacted]
01/05/2024 Document Image Docman Attachment
01/05/2024 Administration Clinical Letter HMPYOI Stirling in possesion medication check form Ms Aileen [redacted]
26/04/2024 Clinic Dr J Green (Ad)
26/04/2024 Speech therapy Phone call to Social Work.

[redacted] unavailable. Left message asking for [redacted] to contact me regarding Georgina's parole progress and any current needs regarding communication support.

Jan Green
Clinical Lead Speech and Language Therapy
26/4/24 2pm Dr J Green (Ad)
23/04/2024 Triage Ms [redacted] Meffin
23/04/2024 Mental health administration
CTM Attendees: Dr Swinson, NTL C Halliday, RMN N [redacted] RMN R [redacted] RMN D Doull, RMN N Meffin, RMN L Stevenson, Assistant [redacted] C Docherty, Forensic [redacted] E Vendelanotte, Speech and Language A McCandlish, Social Work K [redacted] OT C [redacted]

No role for MHT at present as Georgina declines any input or changes to medication. RMN N [redacted] to write a letter.
Ms [redacted] Meffin
23/04/2024 Triage Ms Hina Khizar
23/04/2024 Medication - risk monitoring Spot Checked 22.04.24

All count was correct. Dr Gp Stirling
23/04/2024 Triage Miss [redacted] - No Data Recorded
19/04/2024 Triage Ms [redacted] Murphy
19/04/2024 Ongoing review ANP Mail
ANP K [redacted]
X ray results
left hand
mild OA evidence atrticular sclerosis
joint space well preserved
no significant bone or joint abnormality.
Dr Gp Stirling
18/04/2024 Third Party Consultation Ms [redacted] Rennie
18/04/2024 Document Image Docman Attachment
18/04/2024 Result Results X-Ray Ms [redacted] Rennie
15/04/2024 Triage Ms [redacted] Rennie
15/04/2024 Self-referral Nurse triage - LMC - Swollen ear and sore Ms Jane Rennie
04/04/2024 Triage Ms Hina Khizar
04/04/2024 Ongoing review ANP pharmacy
ANP K [redacted] H Khizar
discussed change of gluten options kardex updated
01/04/2024 Triage Ms [redacted] Rennie

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

01/04/2024 Self-referral [redacted] Health - KH - Cyst on vagina Ms [redacted] Rennie
30/03/2024 Triage Ms [redacted] - No Data Recorded
28/03/2024 Triage Ms [redacted]
Letter on: 28/03/2024 type: Referral SH Results
28/03/2024 Hepatitis C antibody test negative = Ms [redacted]
28/03/2024 HIV negative = Ms Rachel [redacted]
28/03/2024 Hepatitis B surface antigen negative = Ms [redacted]
28/03/2024 Syphilis titre test negative = Ms [redacted]
28/03/2024 Seen in [redacted] health clinic for self referral concerned regarding cyst to left labia majora on examination no lump felt. Also concerned about internal changes/growth, nil of note at this time but states awaiting hospital appointment for review of gentials however same cancelled by Geo- [redacted] on numerous occassions.
Await hosptial appointment.
Depo and BBV screen already provided by Nurse [redacted] on 19/3/24.
R [redacted] - [redacted] health nurse
28/3/24 09:25 Ms [redacted]
26/03/2024 Triage Ms Anne Mitchell
26/03/2024 Consultation
S. Seen in healthcentre
B. C/O Flaky Ears
A. Both ears appear healthy with no visible dry skin, skin intact, no signs of infection, no redness or swelling, Georgie states both ears have cleared up and no any other health issues today.
R. Advised to put referral in if any further issues or [redacted].

RGN [redacted] 10.51am 26/03/2024 Ms [redacted]
25/03/2024 Third Party Consultation Mrs [redacted] Mcfadyen
25/03/2024 Document Image Docman Attachment
25/03/2024 Result Results HMPYOI Stirling Microbiology Mrs [redacted] Mcfadyen
25/03/2024 Third Party Consultation Mrs [redacted] Mcfadyen
25/03/2024 Document Image Docman Attachment
25/03/2024 Result Results HMPYOI Stirling Microbiology Mrs [redacted] Mcfadyen
25/03/2024 Triage Mrs [redacted] Mcfadyen
25/03/2024 Next hospital appointment 10/04/2024 14:40
Stirling Community Hospital - Livilands Gate, Stirling FK8 2AU
X Ray Department
Georgina Smith / 131344
04/12/1991
Normal
Had Ultrasound 19/03 but wasn't given xray so this is still outstanding
Mrs [redacted] Mcfadyen
21/03/2024 Triage Mrs [redacted] Mckay
21/03/2024 Consulta [redacted] Georgina spoke with me whilst I was in [redacted] and was asking when she was going to be seen by mental health. Said the Irish Nurse was going to see her. On checking with MH nurse [redacted] MH nurse [redacted] was supposed to see yesterday, but no note on vision. It will be passed on to her tomorrow when she is on shift.

[redacted] McKay
PCT nurse
3:26pm Mrs [redacted] Mckay
20/03/2024 Third Party Consultation Mrs [redacted] Mcfadyen
20/03/2024 Document Image Docman Attachment
20/03/2024 Administration Administration HMPYOI Stirling In-Possesion Medication Check Mrs [redacted] Mcfadyen
20/03/2024 Third Party Consultation Mrs [redacted] Mcfadyen
20/03/2024 Document Image Docman Attachment
20/03/2024 Administration Administration HMPYOI Stirling In Possession Medication Check Mrs [redacted] Mcfadyen
19/03/2024 Triage Ms [redacted] Berry
19/03/2024 Self-referral Nurse AM - [redacted] health, depo jag and tested is possible. Bloods for thyriod as not been well. Ms Aileen Berry
19/03/2024 Triage Mrs [redacted] Mcfadyen
19/03/2024 Self-referral Self - BJ - PCT - Ears sore and flakey. Added to PCT waiting list, card sent to patient to advise. Mrs [redacted] Mcfadyen
19/03/2024 Triage Ms Viviene Mitchell
19/03/2024 Recall on 13/06/2024 for Depo-provera injection given with Ms Viviene Mitchell Status: Complete
19/03/2024 Depo-provera injection given First service recall due: Claim Expiry Date: Batch no: 382444743815 exp: 08/28
19/03/2024 Hepatitis C antibody level =
19/03/2024 Human immunodefic viral test =
19/03/2024 Hep B surface antigen test =
19/03/2024 Seen in [redacted] health clinic requesting BBV screen. Window periods discussed.
Also due Depo Provera given today happy with medication. Next due 13/06/2024.

14/03/2024 Third Party Consultation Ms Aileen [redacted]
14/03/2024 Document Image Docman Attachment
14/03/2024 Administration Kardex HMPYOI Stirling Pharmacy Ms Aileen [redacted]
13/03/2024 Third Party Consultation Ms Aileen Berry
13/03/2024 Document Image Docman Attachment
13/03/2024 Administration Clinical Letter HMPYOI Stirling Dermatology Appointment cancelled Ms Aileen [redacted]
13/03/2024 Triage Mrs [redacted]
13/03/2024 Ongoing review ANP L.Kane
Asked to rewrite kardex's as has 3x active
Same done - now has seperate kardex for gluten free products
12/03/2024 Triage Ms Hina Khizar
12/03/2024 Medication - risk monitoring Spot Checked 11.03.24

No discrepansies found. Dr Gp Stirling
08/03/2024 Clinic Dr J Green (Ad)

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08/03/2024 Speech therapy Seen for review.
Georgina consented to meeting.
Georgina reported that she is still awaiting a date for completion of her Parole Tribunal. She feels she is managing OK at present. She has found her accessible information provided via Social Work helpful.
Agreed to monitor short-term progress via contact with social work and to review again once dates for tribunal available.

Jan Green
Clinical Lead Speech and Language Therapy
08/03/24 15:00:00 Dr J Green (Ad)

08/03/2024 Third Party Consultation Ms Aileen [redacted]
08/03/2024 Document Image Docman Attachment
08/03/2024 Administration Clinical Letter HMPYOI Stirling In possesion medication check form Ms Aileen [redacted]

07/03/2024 Triage Ms Aileen [redacted]
07/03/2024 Failed encounter - hospital appointment 10:00 on 03/04/2024
Glasgow Royal Infirmary - 1st Floor (off Link Corridor) Walton Building, Castle Street, G4 0SF
Dermatology
Georgina Smith / 131344
04/12/1991
Normal Transport
Advised appointment cancelled by Hospital 07/03/2024, called Hospital 07/03/2024, another appointment will be posted out
Ms Aileen [redacted]
07/03/2024 Administration NOS Admin called hospital regarding caqncelled appointment for 03/04/2024.
Hospital advised another appointment will be sent out and the patient does not require to be re-referred. Ms Aileen [redacted]

07/03/2024 Triage Mrs [redacted]
07/03/2024 Ongoing review ANP L [redacted]
ANP Actions
I have been informed that the hospital has cancelled Georgie's appt as she has had 3x appointments offered and she is to be re-referred
I see that this is due to GeoAmey not attending to take [redacted]
As discussed prev with Dr Sayers we have to send the National letter in relation to this issue which was approved at the Oversight Board in April of this year and distributed to all NHS Board Chief Executives.

It clarifies the agreement that patients must not be removed from waiting lists, and should be reappointed, should they fail to attend secondary care appointments as a consequence of GeoAmey transport failures

[redacted] must not be penalized for GeoAmey not turning up as this is not within her control
I have emailed admin copy of the letter to send on- if you could send this on to the dermatology department to book a new appt Dr Gp Stirling

06/03/2024 Triage Miss Blyth [redacted]
06/03/2024 Consultation Call from dermatology regarding Georgina's missed appointments. They have cancelled this appointment due to [redacted] reaching her maximum missed appointments of 3 and she will need to re-referred to the service to be given another appointment.

Will list for GP/ANP actions for [redacted] to be re-referred

SN Blythe [redacted]
1015 Miss Blyth [redacted]

06/03/2024 Triage Miss Blyth [redacted] - No Data Recorded

04/03/2024 Triage Mr Sharon Mccallum
04/03/2024 Next hospital appointment 03/04/2024 @ 10:00
Glasgow Royal Infirmary - 1st Floor (off Link Corridor) [redacted] Building, Castle Street, G4 0SF
Dermatology
Georgina Smith / 131344
04/12/1991
Normal
Mr [redacted] Mccallum

04/03/2024 Third Party Consultation Ms Aileen [redacted]
04/03/2024 Document Image Docman Attachment
04/03/2024 Administration Clinical Letter HMPYOI Stirling Dermatology Outpatient appointment letter Ms Aileen [redacted]

04/03/2024 Triage Mr [redacted] Mccallum
04/03/2024 Next hospital appointment 19/03/2024 @ 10:00
Forth Valley Royal Hospital, Stirling Road, Larbert, FK5 4WR
X Ray Department - for XRay & US Scan
Georgina Smith / 131344
04/12/1991
Normal
Mr [redacted] Mccallum
04/03/2024 Appt cancelled by hospital 15:00
Stirling Community Hospital - Livilands Gate, Stirling FK8 2AU
X [redacted] Department
Georgina Smith / 131344
04/12/1991
Normal
Cancelled by Hospital - patient to have xray & uss on 19/03/2024 @ 10:00 FVRH
Mr [redacted] Mccallum

29/02/2024 Triage Ms Hina Khizar
29/02/2024 Medication - risk monitoring Spot Checked - All medication count noted to be correct. Patient is no longer precribed aspirin, hence, aspirin returned. Dr Gp Stirling

27/02/2024 Other Dr [redacted] Kildare
27/02/2024 Ongoing review MOA - Pharmacy querying script as [redacted] is written up for both Aspirin and Etodolac
Kardex reviewed - stop Aspirin and review if needed - can remain on Etodolac as was on this previously Dr [redacted] Kildare

27/02/2024 Administration Dr Fiona [redacted]
27/02/2024 Ongoing review GP [redacted] mail
Bloods inc ESR, CRP, RF and TSH all normal - reassuring from an inflammatory arthritis point of view.
XR hand awaited Dr [redacted]

26/02/2024 Triage Mr [redacted] Mccallum

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26/02/2024 Next hospital appointment 18/03/2024 @ 15:00
Stirling Community Hospital - Livilands Gate, Stirling FK8 2AU
X Ray Department
Georgina Smith / 131344
04/12/1991
Normal
Dr Gp Stirling

26/02/2024 Triage Mr Shs [redacted] Mccallum
26/02/2024 Failed encounter - hospital appointment 26/02/2024 @ 10:40
Glasgow Royal Infirmary - 1st Floor (off Link Corridor) [redacted] Building, Castle Street, G4 0SF
Dermatology
Georgina Smith / 131344
04/12/1991
Normal
GeoAmey Refused to take patient 26/02/2024 -- New Appointment will be sent out per phone call 26/02/2024
Mr [redacted] Mccallum

23/02/2024 Third Party Consultation Mr [redacted] Mccallum
23/02/2024 Document Image Docman Attachment
23/02/2024 Administration Haematology Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum

23/02/2024 Third Party Consultation Mr [redacted] Mccallum
23/02/2024 Document Image Docman Attachment
23/02/2024 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr Sharon Mccallum

22/02/2024 Triage Miss [redacted] Campbell
22/02/2024 Failed encounter
Listed for bloods however obtained yesterday. Duplicate appointment

Laura [redacted]
HCA
22/02/2024
10:06 Dr Gp Stirling

21/02/2024 Referral Letter Dr Fiona [redacted]
21/02/2024 SCI Referral Letter

21/02/2024 Administration Dr Fiona [redacted] - No Data Recorded

21/02/2024 Triage Ms [redacted] Kilpatrick
21/02/2024 Seen by health care assistant Seen Georgina in clinic for bloods, bloods obtained as per ordercomms and sent to labs.
[redacted] Kilpatrick
HCA
21/02/2024
11:55HRS Dr Gp Stirling

21/02/2024 Triage Ms Anne Mitchell
21/02/2024 Consultation
S. Seen in healthcentre
B. Cyst and rash on face
A. Georgina states she has been seen previously regarding this and has been prescribed steroid. Does not require further input at this time. Rash and cyst resolved
R. Advised to contact healthcare if any further issues.

RGN [redacted] 10.17am 21/02/2024 Ms Anne [redacted]

20/02/2024 Surgery consultation Dr [redacted]
20/02/2024 Ongoing review GP [redacted]
1) Eye - concerned about Graves disease - I showed her pictures of Grave's disease and we both agreed that she does not have this! Has had left sided upper eyelid periocular dermatitis. No stye or chalazion visible. For course of protopic twice weekly for one month in the first instance.
2) Headaches - in for review as previously described by myself 21/11/23 - unchanged since then. Headaches worse at the weekend when not working. Average 2x month. I wonder if it is worth trialing 900mg aspirin (no contraindications) at onset of headache and review again in 3 months.
3) Arthritis - finger pain and swelling with rotation of left index finger prominent. RF negative in 2018. Would be worth an XR of left hand ?erosions ?alignment and updated bloods inc CRP, ESR and RF.
4) Neck pain and swelling - ongoing since last year. Had XR which was unremarkable. Soft tissue swelling evident on examination, no skin changes. Would be worth asking physio to review in the first instance.

Plan:
- Protopic 0.33% twice weekly for one month
- Trial of aspirin 900mg stat at onset oh headache
RV headaches in 3m
- Bloods as above
- XR left hand
- Physio ref Dr [redacted]

19/02/2024 Triage Ms Aileen Berry
19/02/2024 Next hospital appointment
Monday 26/02/2024 at 10:40am
Glasgow Royal Infirmary - 1st Floor (off Link Corridor) [redacted] Building, Castle Street, G4 0SF
Dermatology
Georgina Smith / 131344
04/12/1991
Normal Transport Ms Aileen [redacted]
19/02/2024 Administration NOS Automated telephone reminder received regarding hospital appointment. No hospital appointment noted on database/vision, admin called Glasgow Royal Infirmary to obtain appointment details. Hospital confirmed 26/02/2024 at 10:40am. Ms Aileen [redacted]

16/02/2024 Triage Ms [redacted] - No Data Recorded

15/02/2024 Triage Ms [redacted]

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15/02/2024 Ongoing review ANP clinic
ANP K [redacted]
Skin review
? sty on eye
Due to make up unable to see eye properly.
No irritation in eye evident no redness noted.
Acne noted to T Zone, chin effected advised pus comes out.
This would be in line with acne vulgaris
Again wearing heavy makeup unable to see properly
On Doxycycline for acne extended course till may
Added in benzoyl peroxide BD PRN
Emolotient therapy for face and eye to use as a wash and moisturiser and added in qv cream
Use twice daily on left eyes area.
Relisted one week for further review of eye.
Worsening advice given.

15/02/2024 Triage Ms [redacted] - No Data Recorded
14/02/2024 Third Party Consultation Mr [redacted] Mccallum
14/02/2024 Document Image Docman Attachment
14/02/2024 Administration Kardex HMPYOI Stirling Pharmacy Mr [redacted] Mccallum
14/02/2024 Triage Ms Aileen [redacted]
14/02/2024 Self-referral [redacted] to check rash on eye and cysts on face. Ms Aileen [redacted]
13/02/2024 Triage Ms Jade Binnie
13/02/2024 Administration Already listed for bloods

[redacted] Binnie
HCA
13/02/2024 Dr Gp Stirling
13/02/2024 Triage Ms Karen [redacted]
13/02/2024 Ongoing review
ANP K [redacted] McBeth
Mail received.
Reviewed letter for Endrocrinology.
Impression: Thyroiditis.
They have advised that Georgina stop taking Carbimazole and montior bloods.
Once monthly for three months and then 3 monthly following this if there are no conerns.
Kardex please Dr Gp Stirling
09/02/2024 Third Party Consultation Mr Sharon Mccallum
09/02/2024 Document Image Docman Attachment
09/02/2024 Administration Clinical Letter Forth Valley Royal Hospital Endocrinology Clinic letter Mr [redacted] Mccallum
09/02/2024 Triage Ms [redacted] Murphy
09/02/2024 Ongoing review ANP action
ANP K murphy
unable to come today- relisted
08/02/2024 Third Party Consultation Mrs [redacted] Mcfadyen
08/02/2024 Consultation Seen in Iris.
Self referral for swelling at top of spine/bottom of neck.
Visible lump noted to the back of neck. States this has been an issue previously in 2022 - see note from 2022 started on etodolac for same.
States this is due to arthritis.
Not been an issue for almost 2 years but feels this has flared up again recently.
Reports +pain when moving her neck - causing issue as [redacted] the hairdressers.
Good range of movement, using regular analgesia with nil effect.
Listed for GP/ANP review.

PCT R WEIR
2020HRS Dr Gp Stirling
08/02/2024 Document Image Docman Attachment
08/02/2024 Consent given for blood test Administration Medical Marker Mrs [redacted] Mcfadyen
08/02/2024 Triage Ms [redacted] Weir - No Data Recorded
08/02/2024 Triage Ms [redacted] Binnie - No Data Recorded
07/02/2024 Third Party Consultation Mrs S[redacted]n Mcfadyen
07/02/2024 Document Image Docman Attachment
07/02/2024 Administration Administration HMPYOI Stirling In-Possesion Medication Check Mrs [redacted] Mcfadyen
01/02/2024 Triage Ms [redacted] No Data Recorded
31/01/2024 Triage Mrs [redacted]
31/01/2024 Ongoing [redacted]
Listed for ANP review
No entry as to why patient requires review?
can see on 25/1/24 self referred to nurse for painful finger
and was reviewed - on analgesia for arthritis of finger
Was seen by GP 2 weeks ago
No need to review again
If nurse have concerns around finger can list for review
Alternatively if pain is problematic her medications can be reviewed if required

31/01/2024 Triage Mrs [redacted]
31/01/2024 Ongoing [redacted] L [redacted]
Mail
Review of TSH- normal range
30/01/2024 Third Party Consultation Mr Sharon Mccallum
30/01/2024 Document Image Docman Attachment
30/01/2024 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
30/01/2024 Triage Ms [redacted] Waleh - No Data Recorded
25/01/2024 Triage Ms Aileen [redacted]
25/01/2024 Self-referral [redacted] AM - Sore finger, tipping to the side - arthritis? Ms Aileen [redacted]

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

25/01/2024 Triage Ms [redacted] Binnie
25/01/2024 Seen by health care assistant Seen Georgina in HC for TFT bloods succesffuly obtained and sent to labs

Complaining of sore finger - checked by PCT L Mccracken - this is arthiritis - on medication for same

Listed for TFT bloods 1 month
[redacted] Binnie
HCA
25/01/2024 Dr Gp Stirling
25/01/2024 Triage Ms [redacted] Binnie - No Data Recorded
23/01/2024 Clinic Dr J Green (Ad)
23/01/2024 Speech therapy Accessible licence conditions provided to [redacted] Discussed content and approaches to sharing information with Georgina.
Parole Hearing today. [redacted] will update on outcome and, if Georgina is libertaed, share contact details to allow advice to be given to Supervising Officer.

Jan Green
Clinical Lead Speech and Language Therapy
23/01/24 2.30pm Dr J Green (Ad)
23/01/2024 Triage Mrs [redacted] Mcfadyen
23/01/2024 Next hospital appointment Booking office confirmed another hospital appointment will be sent in due course Mrs [redacted] Mcfadyen
23/01/2024 Third Party Consultation Mrs [redacted] Mcfadyen
23/01/2024 Document Image Docman Attachment
23/01/2024 Administration Administration HMPYOI Stirling Results Mrs [redacted] Mcfadyen
23/01/2024 Other Dr Jack Kildare
23/01/2024 Ongoing review MOA Mail - see letter from Endocrine Specialist Nurse - has been discharged from follow up but needs TFTs every 3/12 for next year and referred back if deranged or develops symptoms of thyroid disease
I have communicated this on lib letter Dr [redacted] Kildare
23/01/2024 Ongoing review MOA - Lib letter completed Dr [redacted] Kildare
23/01/2024 Third Party Consultation Mr S [redacted] Mccallum
23/01/2024 Document Image Docman Attachment
23/01/2024 Administration Administration HMPYOI Stirling In-Possesion Medication Check Mr [redacted] Mccallum
23/01/2024 Triage Mrs [redacted] Mcfadyen
23/01/2024 Administration NOS Admin been unable to reach dermatology dept over the phone, have sent an email this morning to appointmentsbookingcentre@ggc.scot.nhs.uk to request a new appointment Mrs [redacted] Mcfadyen
22/01/2024 Triage Mrs [redacted] Mcfadyen
22/01/2024 Next hospital appointment Today's hospital appointment cancelled as Geoamy can't facilitate. Admin will rearrange appointment Mrs [redacted] Mcfadyen
16/01/2024 Surgery consultation Dr Jack Kildare
16/01/2024 Consultation GP Review
ATSP as [redacted] reporting some discomfort from left eye
No visual change
Feels sore on top lid
O/E
PERLA, eye movements normal and no conjuctival injection
Has small stye left upper lid
Advised on hot compresses and no need for abx treatment
Further review if not settling in 3/52 Dr [redacted] Kildare
16/01/2024 Triage Ms [redacted] Binnie
16/01/2024 Seen by health care assistant Attended Endocrinology telephone appt with Georgina
[redacted] complaining of sore eye - passed over to GP on shift at time
To provide georgie with letter from Dr [redacted] with plan going forward regarding bloods as possibilty of release on Tuesday - will put this in property
If feeling symptomatic to let gp know to get bloods

Jade Binnie
HCA
16/01/2024 Dr Gp Stirling
16/01/2024 Triage Ms [redacted] Binnie - No Data Recorded
15/01/2024 Triage Miss [redacted] - No Data Recorded
15/01/2024 Triage Ms [redacted] Binnie - No Data Recorded
15/01/2024 Triage Ms [redacted] - No Data Recorded
10/01/2024 Clinic Dr J Green (Ad)
10/01/2024 Speech therapy Case discussion with [redacted] Prison Based [redacted] advised that Ms Smith is being recommended for parole. Discussed risk that she may not comprehend licence conditions in current form. Agreed I will support development and sharing of accessible information on same.
Next steps: await information for development from [redacted] Simpson.

Jan Green
Clinical Lead Speech and Language Therapy
NHS Forth Valley Prisons Healthcare
10/01/24 12:00 Dr J Green (Ad)
08/01/2024 Third Party Consultation Mr Sharon Mccallum
08/01/2024 Document Image Docman Attachment
08/01/2024 Administration Administration HMPYOI Stirling In-Possesion Medication Check Mr [redacted] Mccallum
08/01/2024 Third Party Consultation Mr [redacted] Mccallum
08/01/2024 Document Image Docman Attachment
08/01/2024 Administration Administration HMPYOI Stirling In-Possesion Medication Check Mr Sharon Mccallum
07/01/2024 Triage Miss [redacted] - No Data Recorded
07/01/2024 Triage Miss La[redacted]n Campbell - No Data Recorded
05/01/2024 Triage Ms Laura Kilpatrick

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05/01/2024 Letter encounter to patient Letter sent to Georgina to make aware of normal bloods as documented by GP [redacted] Kilpatrick
HCA
05/01/2024
15:08HRS Dr Gp Stirling
05/01/2024 Other Dr [redacted] Sayers
05/01/2024 Ongoing review MOA - TFTs normal Dr [redacted] Sayers
05/01/2024 Third Party Consultation Ms [redacted] Rennie
05/01/2024 Document Image Docman Attachment
05/01/2024 Result Results Clinical Chemistry Ms [redacted] Rennie
04/01/2024 Third Party Consultation Mrs S [redacted] Mcfadyen
04/01/2024 Document Image Docman Attachment
04/01/2024 Administration Administration HMPYOI Stirling Alcohol and Benzodiazepine Withdrawal Scale Mrs [redacted] Mcfadyen
04/01/2024 Third Party Consultation Mrs [redacted] Mcfadyen
04/01/2024 Document Image Docman Attachment
04/01/2024 Administration Administration HMPYOI Stirling Alcohol and Benzodiazepine Withdrawal Scale Mrs [redacted] Mcfadyen
02/01/2024 Triage Ms [redacted] Cleary - No Data Recorded
29/12/2023 Triage Ms [redacted] Binnie - No Data Recorded
29/12/2023 Triage Ms [redacted] Binnie
29/12/2023 Seen by [redacted]th care assistant Seen Georgina in HC for bloods TFT
Obtained and sent to labs

[redacted] Binnie
HCa
29/12/2023

Dr Gp Stirling
27/12/2023 Triage Ms A [redacted] - No Data Recorded
21/12/2023 Triage Mrs [redacted] Mcfadyen
21/12/2023 Self-referral RW - PCT - Sore chest, left breast and back. Mrs [redacted] Mcfadyen
21/12/2023 Triage Ms [redacted]
21/12/2023 Recall on 14/03/2024 for Depo-provera injection given with Ms Rachel [redacted] Status: Complete
21/12/2023 Depo-provera injection given First service recall due: 14/03/2024 Claim Expiry Date: Batch GN3573, EXP 08/2025.
Right buttock.
Keen to continue with prescription. No issues raised.
R [redacted] - [redacted] health nurse
21/12/2023 15:14 Ms [redacted]
20/12/2023 Triage Mr [redacted] Mccallum
20/12/2023 Next hospital appointment 22/01/2024 @ 13:45
Glasgow Royal Infirmary - 1st Floor (off Link Corridor) Walton Building, Castle Street, G4 0SF
Dermatology
Georgina Smith / 131344
04/12/1991
Normal
Mr [redacted] Mccallum
19/12/2023 Triage Mr Sharon Mccallum
19/12/2023 Planned telephone contact 16/01/2024 @ 13:30
Endocrinology, Nurse Led Review
Georgina Smith / 131344
04/12/1991
01324 711558
Telephone Clinic
Mr [redacted] Mccallum
18/12/2023 Triage Ms [redacted] Lawson - No Data Recorded
13/12/2023 Triage Ms Lyndsay Mccracken
13/12/2023 Seen by triage nurse S- Seen in health centre treatment room
B- Self referral recieved for health marker
A- Georgina attended clinic this morning advised it was not a health marker that was required it was ? about her depot injection. Advised this is due 19/12/23 and is currently listed for PCT to be administered. Georgina was asking when her flu vaccine would be administered also advised she was listed for clinic 15/12/23 for this. Georgina happy with this information.
R- Awaiting upcoming appointments

PCT S/N Lyndsay McCracken
15.50 Ms Lyndsay Mccracken
08/12/2023 Triage Mr [redacted] Mccallum
08/12/2023 Self-referral Sub referral 08/12/2023 Flu jag and depo jag.SP Dr Gp Stirling
08/12/2023 Triage Ms [redacted]
08/12/2023 Consultation Listed for PCT healthcare marker 13/12/23
PCT [redacted] 11:22 08/12/23 Dr Gp Stirling
07/12/2023 Triage Ms [redacted] Rennie
07/12/2023 Administration NOS Contacted 0800592087 to re-arrange appointment for dermatology. As this is a first appointment there will be another letter sent out to the health centre. Ms [redacted] Rennie
07/12/2023 Triage Ms [redacted] Rennie
07/12/2023 Appointment cancelled by patient 07/12/2023 - 11:15
Stobhill Hospital 133 Balornock Road Glasgow G21 3UW
Dermatology
Georgina Smith 131344
04/12/1991
Normal
Patient Refused to attend due to another appointment
Ms [redacted] Rennie
07/12/2023 Other Miss Jackie Mckeich
07/12/2023 Consultation ANP actions, request to increase bisacodyl back to original dose, rx bisacodyl 5mg 1-2 tabs at night. Miss [redacted] Mckeich
06/12/2023 Other Mrs Doreen Doull - No Data Recorded

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Georgina Smith 04/12/1991 662/91/440 [redacted] **Consultations**

06/12/2023 Triage Ms [redacted]
06/12/2023 Consultation S; Seen in treatment room
B; Toileting issues ;/ dizziness
A; Patient states she is on Bysacodyl, however had asked for this to be reduced, patient states she feels as if she needs this increased again as she is finding it difficult to have a proper bowel movement. Patient also states she is feeling dizzy, but thinks this is down to stress regarding her parole hearing on the 18/12/23 as none of her reports are ready. Full set of observations done as follows; Temp; 36.6, B/P; 113/74, Stats; 100% on air, P; 85.
R; ANP for increase of Bysacodyl. Dizzy spells advised to increase fluid and try to relax a bit more. Worsening advice given.
PCT; C. [redacted]
6/12/23
14.21 Dr Gp Stirling
05/12/2023 Triage Ms [redacted] Cleary
05/12/2023 Letter encounter to patient to inform her of recent blood result.
Michelle Cleary
HCA
05/12/2023
16.55 Ms [redacted] Cleary
05/12/2023 Administration Dr [redacted]
05/12/2023 Thyroiditis Dr [redacted]
05/12/2023 Ongoing review GP [redacted] - Mail
TFTs within notmal range.
For rpt in 1m - added to ordercomms and added to actionable column on vision.
For TFTs: begining of Jan and Feb. Then May, August and November. Dr [redacted]
04/12/2023 Third Party Consultation Ms [redacted]
04/12/2023 Document Image Docman Attachment
04/12/2023 Result [redacted] HMPYOI Stirling Clinical Chemistry Ms Aileen [redacted]
04/12/2023 Triage Ms [redacted] Cleary
04/12/2023 Seen by health care assistant
Georgina was in the clinic for bloods but these were taken on 30/11/2023
[redacted] Cleary
HCA
04/12/2023
11.41 Ms [redacted] Cleary
03/12/2023 Triage Ms [redacted] Binnie - No Data Recorded
01/12/2023 Triage Mrs [redacted] Mcfadyen
01/12/2023 Self-referral Nurse - AM - Toilet issues Mrs [redacted] Mcfadyen
30/11/2023 Triage Ms [redacted] Kilpatrick
30/11/2023 Seen by health care assistant
Seen in health centre with [redacted] K & [redacted] C. Bloods obtained as per OrderComms, sample sent to lab.

[redacted]
HCA
30/11/2023
11:43 Dr Gp Stirling
30/11/2023 Triage Mr [redacted] Mccallum
30/11/2023 Self-referral Review for Medical Marker - 2 duvets. Mr [redacted] Mccallum
28/11/2023 Triage Ms Michelle Cleary
28/11/2023 Letter encounter to patient to inform her of recent stop to Carbimazole.
Listed for bloods monthly for 3 mnths then quarterly for 1 year.
[redacted] Cleary
HCA
28/11/2023
15.35
Ms [redacted] Cleary
28/11/2023 Other Dr [redacted] Kildare
28/11/2023 Ongoing review MOA Mail - see letter from Dr [redacted] Endo Cons - suspects [redacted] has had a transient thyroiditis which has now settled - Carbimazole is to be stopped and to have TFTs taken monthly for 3/12 then every 4 months for a year Dr [redacted] Kildare
28/11/2023 Triage Ms [redacted] Rennie - No Data Recorded
27/11/2023 Third Party Consultation Ms Aileen [redacted]
27/11/2023 Document Image Docman Attachment
27/11/2023 Administration Clinical Letter HMPYOI Stirling Medical Marker Ms Aileen Berry
27/11/2023 Third Party Consultation Mr [redacted] Mccallum
27/11/2023 Document Image Docman Attachment
27/11/2023 Administration Clinical Letter Forth Valley Royal Hospital Endocrinology Endocrinology Clinic Letter Dr Kelly Mr [redacted] Mccallum
24/11/2023 Triage Mrs [redacted]
24/11/2023 Ongoing review ANP L.Kane
Review of endocrine letter
To STOP carbimazole
Monthly TFTs for 3 months then quaterly for 12 months
Will list TFTs Free T3 and T4 on order comms
Will stop carbimazole
23/11/2023 Third Party Consultation Mr [redacted] Mccallum
23/11/2023 Document Image Docman Attachment
23/11/2023 Administration Clinical Letter NHS Forth Valley Endocrinology Mr Sharon Mccallum
23/11/2023 Triage Mrs [redacted] Mcfadyen
23/11/2023 Administration NOS Admin called Endocrine nurse Jillian Tough's secretary [redacted] 22/11/2023 13:00 and left a message to phone back Health centre with an update as nothing on portal from appt 3/11 dr was querying med changes. (Vision down yesterday so couldn't update note at the time) Mrs [redacted] Mcfadyen
22/11/2023 Triage Ms [redacted] Binnie - No Data Recorded
22/11/2023 Clinic Dr J Green (Ad)

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22/11/2023 Speech therapy Met with case management officer Andy [redacted] to feedback on current invovlement and plans for informaitor sharing.
[redacted] positive about the utility of communication support informaiton.

Next steps: to share communication plan and dictionary w/c 27/11/23

Jan Green
Clinical Lead Speech and Language Therapy
22/11/23 3:10pm Dr J Green (Ad)
22/11/2023 Clinic Dr J Green (Ad)
22/11/2023 Speech therapy Seen on [redacted]

Shared and agreed communication profile - Georgie reporting feeling very positive about this.
[redacted] had completed requested work on communication dictionary. She had produced a detailed account, which is likely to prove useful in her management and support. Discussed and agreed content to by typed up for sharing in week commencing 27/11/23.

Next steps: Sharing of communication support materials, info to case management and risk management team.

[redacted] Green
Clinical Lead Speech and Language Therapy
22/11/23 3:00pm Dr J Green (Ad)
22/11/2023 Triage Mrs [redacted] Mcfadyen - No Data Recorded
21/11/2023 Triage Miss [redacted] Campbell
21/11/2023 Administration
As per GP actions - Listed for bloods W/C 04/12 and W/C 01/01/24. Already listed for depo-provera 19/12. Listed for review appt 3/12 for skin with ANP K [redacted]

Laura Campbell
HCA
21/11/2023
20:27 Dr Gp Stirling
21/11/2023 Triage Ms [redacted] Cleary - No Data Recorded
21/11/2023 Triage Mrs [redacted] Mcfadyen - No Data Recorded
21/11/2023 Surgery consultation Dr [redacted]
21/11/2023 Consultation GP [redacted]

1) Carbimazole. Was out at FVRH on 3/11 to see Dr [redacted] (endocrine). Georgina states that she was told to stop carbimazole after this appointment. Unfortunately no letter from this appointment on portal or docman. Plan had also been to check bloods at 1m (so begining of December) and a month after that. Therefore, I will request bloods for WB 4/12 for TFT and then a month after that. I will also ask admin to contact secretaries at FVRH to chase up formal letter from Dr [redacted]
2) Acne - worst around chin. Has tried 'all of the topical treatments' with no effect/reported allergy with BP. Started lymecycline earlier in the year (with good effect), prior to this had erythromycin with no effect. Worth trying 3m doxy then review with ANP K [redacted]
3) Headaches - right frontal pulsation. Can last up to four days then settle spontaneously. Under a lot of stress which she thinks aggravtes it. Triggered by bright lights and concentrating on drawing. Recent optician review ok. Headaches dont stop her doing anything. No vomitting, no diplopia, no visual change. Having 2 headaches/month. Sound like tension headaches, nil red flags. For simple analgesia PRN in first instance and review in 3m. If change/get worse in the interim then will send in a slip
Plan:
- Bloods WB 4/12 and begining Jan
- Admin to liaise with endocrine secretaries.
- 3m doxyxycline100mg OD then review with [redacted]
- Monitor headaches, simple analgesia. Dr [redacted]
17/11/2023 Triage Ms Michelle Cleary - No Data Recorded
17/11/2023 Triage Mr Sharon Mccallum
17/11/2023 Self-referral Self referral - skin clinic, would like to see doctor. Listed for GP/ANP by NW Mr [redacted] Mccallum
14/11/2023 Triage Ms [redacted] Kilpatrick
14/11/2023 Administration Action from Gp clinic, note [redacted] already chased letter up.
[redacted] Kilpatrick
HCA
14/11/2023
19:29HRS Dr Gp Stirling
14/11/2023 Triage Ms Aileen [redacted]
14/11/2023 Administration NOS Admin called Endocrinology to chase letter, letter has not been typed as yet. Admin requested letter to be emailed once issued. Ms Aileen [redacted]
14/11/2023 Triage Mrs [redacted]
14/11/2023 Ongoing review ANP L.Kane
Triaging appt - was listed for review of carbimazole as patient handed back her meds as she states consultant advised her to stop these.
She was reviewed 11 days [redacted] in clinic and no letter back as yet
Will ask admin to chase clinic letter from endocrinology as patient as she is now not taking these
14/11/2023 Third Party Consultation Ms Aileen [redacted]
14/11/2023 Document Image Docman Attachment
14/11/2023 Administration Administration HMPYOI Stirling In-Possession Medication Check Ms Aileen [redacted]
09/11/2023 Triage Ms [redacted]
09/11/2023 Ongoing review ANP pharmacy
ANP K [redacted]
pharmacy advised patient handed back in carbimazole.
not discontinued at this time i noted appt next week to discuss medication at patients request. await outcome
09/11/2023 Clinic Dr J Green (Ad)
09/11/2023 Speech therapy Seen on [redacted] accompanied by Speech and Language Therapy [redacted] McCandlish.

Georgina appeared in good spirits and consented to session. She had completed work on communication profile as requested. Discussed current needs, Georgina expressing concern that SPS may wish her to do further rehabilitation work when she feels she should focus on stability and preparation for liberation (due for liberation July 2025). Agreed with Georgina that a period of stable preparation, with support [redacted] transition, is important. Asked Georgina to complete a communication dictionary as she raised that staff often do not understand her needs and early warning signs of distress. Georgina reported that she has a RMT due relatively soon. Agreed I will seek to attend this, also will share progess with her social worker [redacted]

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Next steps: to see to complete communication profile and agree communication dictionary.

Jan Green
Clinical Lead Speech and Language Therapy
09/11/23 4pm
Dr J Green (Ad)

09/11/2023 Triage Ms Hina Khizar
09/11/2023 Medication - risk monitoring 08.11.23 Patient has returned 20 tablets of Carbimazole 5mg, stating the reason that the hospital has told her to stop taking the said medicine. Dr Gp Stirling

08/11/2023 Triage Ms [redacted]
08/11/2023 Consultation S. [redacted] in clinic
B. Wants to speak to gp regarding medications
A. Does not want to speak to nurse states has not seen gp since coming to stirling and would like an appt with gp to discuss medication. States previously on meds that worked for her and have been stopped. Would not elaborate as feels nurses cant help as we dont prescribe.

R. Booked in with GP for next week to r/v meds Ms [redacted] Mitchell

07/11/2023 Other Dr [redacted] Kildare
07/11/2023 Ongoing review ANP K.Murphy/GP J.Kildare
Actions
Dates up for review of Pizotifen, Famotidine - reviewed and continued
Beclometasone nasal spray stopped as was for seasonal allergic rhinitis Dr [redacted] Kildare

06/11/2023 Triage Ms Jill Ramsay
06/11/2023 Consultation Requested to be seen in halls, reports is being bullied in halls. Has reported this to officers who state they can no get involved. Feels this is impacting on her mental health, has put referal in for MHT, I will also raise this with them. States is able to keep self safe and has no thoughts of suicide, advised to approach staff if anything changes
PCT SN JRamsay 6/11/23 19.58 Dr Gp Stirling

06/11/2023 Triage Mrs [redacted] Mcfadyen
06/11/2023 Self-referral PCT - JR - To be seen regarding medication Mrs [redacted] Mcfadyen

06/11/2023 Triage Ms Jill Ramsay - No Data Recorded

03/11/2023 Third Party Consultation Mr Sharon Mccallum
03/11/2023 Document Image Docman Attachment
03/11/2023 Administration Kardex HMPYOI Stirling Pharmacy Mr [redacted] Mccallum

03/11/2023 Triage Ms Jill Ramsay - No Data Recorded

31/10/2023 Triage Mrs [redacted] Mcfadyen
31/10/2023 Next hospital appointment 07/12/2023 11:15
Stobhill Hospital 133 Balornock Road Glasgow G21 3UW
Dermatology
Georgina Smith 131344
04/12/1991
Normal Mrs Sian Mcfadyen

25/10/2023 Triage Ms [redacted] Binnie - No Data Recorded

24/10/2023 Triage Ms Eilish Mcbeth
24/10/2023 Ongoing review
ANP action
Dr [redacted] & E McBeth
Listed for bisacodly to be restarted as struggling with constipation - same prescribed. Ms Eilish Mcbeth

23/10/2023 Triage Ms [redacted] Binnie - No Data Recorded

20/10/2023 Triage Ms [redacted]
20/10/2023 Consultation Listed for GP to review Bisacodyl.
[redacted] stated she would like to have her medication reinstated as she is struggling to have regular bowel movements.

PCT [redacted]
20/10/23
17:03 Dr Gp Stirling

20/10/2023 Surgery consultation Ms [redacted] Halliday - No Data Recorded

20/10/2023 Third Party Consultation Ms Aileen Berry
20/10/2023 Document Image Docman Attachment
20/10/2023 Result Results HMP Cornton Vale Clinical Chemistry Ms Aileen [redacted]

19/10/2023 Triage Ms [redacted] Cleary - No Data Recorded

19/10/2023 Triage Ms [redacted] Rennie
19/10/2023 Administration NOS Contacted X-Ray on 01786 454508 to re-arange appointment. They have noted that appointments in Forth Valley Royal will contact the Health Centre with a new appointment. Ms [redacted] Rennie

19/10/2023 Triage Ms [redacted] Rennie
19/10/2023 Failed encounter - hospital appointment Geomay Refused transport - 20/10/2023 10:10
Stirling Health & Care Village, Livilands Gate, Stirling FK8 2AU
X-Ray Reception, GP & Minor Injuries Centre
Georgina Smith / 131344
04/12/1991
Normal Transport
Geomay refused.
Ms [redacted] Rennie

19/10/2023 Triage Ms [redacted] Rennie - No Data Recorded

19/10/2023 Triage Ms Kathleen Quail
19/10/2023 Drug addiction therapy
S - Met with [redacted] for Prison Healthcare Addictions Service one to one support. Verbal consent to proceed obtained.
B - Georgie is currently illicit drug free.
A - Appeared kempt, maintained eye contact, behaved in keeping with setting, communication was bright, reactive [redacted] rate and tone. Relapse prevention plan was discussed. [redacted] has been working through this and today we finalised the paper [redacted] her plan for release.
R - Relapse prevention paperwork e-mailed to Angela France and a copy given to [redacted]
See in 4/52
[redacted] Quail, Substance Use and Recovery Team HMPS
14.10
Ms Kathleen Quail

19/10/2023 Triage Mrs [redacted]

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19/10/2023 Ongoing review ANP [redacted]
Mail
Review of bloods
LFTs- normal

19/10/2023 Triage Ms [redacted] Binnie - No Data Recorded
19/10/2023 Third Party Consultation Ms Aileen [redacted]
19/10/2023 Document Image Docman Attachment
19/10/2023 Result Results HMP Cornton Vale Clinical Chemistry Ms Aileen [redacted]
19/10/2023 Triage Mrs [redacted]
19/10/2023 Ongoing review ANP L [redacted]
Pharmacy
Asked to review carbimazole
Last TFTs 3 days ago- Within normal range
Has endocrine appt 3/11/23
- continued
17/10/2023 Triage Ms Aileen Berry
17/10/2023 Next hospital appointment Stirling Health & Care Village at 10:10
US Abdominal Scan
X-Ray Reception, GP & Minor Injuries Centre
Normal Transport
Ms Aileen [redacted]
17/10/2023 Triage Ms Aileen [redacted]y - No Data Recorded
17/10/2023 Triage Ms Jill Ramsay - No Data Recorded
16/10/2023 Triage Miss Blyth [redacted]
16/10/2023 Consultation S- Seen in clinic
B- Allergic reacting to gluten
A- States she has had an allergic reaction to gluten food
Rash appeared on chest going up to underneath chin - appears to have settled by time of seeing [redacted]
Already prescribed fexofenadine
BP 123/80, HR 88, Sp02 99% temp 36.9, resp 16
R- Will discuss with Dr Kildare re-difflam spray
?gluten free diet marker

SN Blythe Johnston/SN [redacted] Weir
1510 Miss Blyth [redacted]
16/10/2023 Triage Ms [redacted] Kilpatrick
16/10/2023 Seen by health care assistant Seen Georgina in clinic for bloods LFT obtained and sent to labs.
[redacted] Kilpatrick
HCA
16/10/2023
Dr Gp Stirling
16/10/2023 Triage Ms [redacted] Kilpatrick - No Data Recorded
13/10/2023 Triage Mrs [redacted] Stewart
13/10/2023 Self-referral Nurse Triage - AM - Would like to discuss diet. Added to Nurse Triage Waiting list and card sent to patient to confirm. Mrs [redacted]
10/10/2023 Clinic Dr J Green (Ad)
10/10/2023 Speech therapy Seen on hall.
Discussed recent referral. Georgina reported that she has been trying to explain her communication needs to staff but feels that she is not listened to. Agreed to work jointly on a communication profile. Gave Georgina outlines guidance to allow her to prepare notes for next session on 24/10/23.

Jan Green
Clinical Lead Speech and Language Therapy
10/10/23 4.10pm Dr J Green (Ad)
10/10/2023 Other Dr [redacted] Kildare
10/10/2023 Ongoing review MOA - dates up for review of Lymecycline - been on since Feb 23 so stop date applied for beginning of Nov
Dr [redacted] Kildare
06/10/2023 Triage Ms [redacted] Weir
06/10/2023 Consultation S - Seen in healthcentre.
B - Self referral to discuss medication
A - Bisacodyl discontinued due to refusal. Due to an excess of medication transferred from polmont with [redacted] another monthly bag was not required at time of dispensing and therefore 'refused'. [redacted] states she has been on this medication long term and [redacted] requires to be prescribed it.
Georgie also requesting throat spray to be prescribed again due to irritation from eating foods with gluten.
R - Listed for GP/ANP review.

[redacted] Weir
PCT
06/10/2023
1450HRS Dr Gp Stirling
06/10/2023 Triage Ms Karen Murphy
06/10/2023 Ongoing review ANP action
ANP K Murphy
pharmacy review Lymecycline patient has been on since Feb extended for 1 months
if requested again will need listed for review appointment.
05/10/2023 Triage Mr [redacted] Mccallum
05/10/2023 Self-referral Discuss meds I have been took off. SP Mr Sharon Mccallum
05/10/2023 Triage Ms [redacted] Binnie - No Data Recorded
29/09/2023 Triage Mr [redacted] Mccallum

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29/09/2023 Next hospital appointment 03/11/2023 @ 9:30 AM
Forth Valley Royal Hospital, Stirling Road, Larbert, FK5 4WR
Endocrinology - Oupatients Area 3
Georgina Smith / 131344
04/12/1991
Normal

29/09/2023 Triage Ms Jade Binnie
29/09/2023 Weight: 69.7 kgs BMI: 25.6 O/E - weight Dr Gp Stirling
29/09/2023 Seen by health care assistant Seen in HC for weight

[redacted] Binnie
HCA
29/09/2023 Dr Gp Stirling
29/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
29/09/2023 Triage Ms Jill Ramsay - No Data Recorded
27/09/2023 Third Party Consultation Mr [redacted] Mccallum
27/09/2023 Document Image Docman Attachment
27/09/2023 Administration Clinical Letter HMP Cornton Vale In possesion medication check form Mr Sharon Mccallum
27/09/2023 Third Party Consultation Mr Sharon Mccallum
27/09/2023 Document Image Docman Attachment
27/09/2023 Administration Clinical Letter HMP Cornton Vale In possesion medication check form Mr [redacted] Mccallum
26/09/2023 Triage Ms Hina Khizar
26/09/2023 Medication - risk monitoring Spot Check 25.09.23
Noted to have excess of the following meds:
Amitryptyline 75mg (+1)
Pizotifen 1.5mg (+1)
Famotidine 40mg(+1)
Fexofenadine 120mg (+1)
Lymecycline 408mg (+3)
Quetiapine 175mg (+1) Dr Gp Stirling
26/09/2023 Triage Ms [redacted]
26/09/2023 Recall on 19/12/2023 for Depo-provera injection given with Ms [redacted] Status: Complete
26/09/2023 Depo-provera injection given First service recall due: 19/12/2023 Claim Expiry Date: 19/12/2023 08/2025
gn3573
673466293251 Ms [redacted]
25/09/2023 Triage Ms R [redacted] Weir - No Data Recorded
25/09/2023 Triage Ms Aileen [redacted]
25/09/2023 Self-referral Nurse KH - Depo jag. Ms Aileen [redacted]
25/09/2023 Triage Ms Keleigh Mournian - No Data Recorded
22/09/2023 Triage Ms Keleigh Mournian
22/09/2023 Consultation
T/C from Iris staff to state Georgina was in some discomfort with her stomach.
Attended [redacted] to advise Georgina that dr had px lactulose and pharmacy had ordered it.
Georgina happy with this, no other problems reported.

Keyleigh Hale
PCT
22.09.2023
19.18 Dr Gp Stirling
22/09/2023 Triage Ms Keleigh Mournian - No Data Recorded
22/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
22/09/2023 Other Dr [redacted] Kildare
22/09/2023 Ongoing review MOA - constipated - requesting treatment - try Lactulose 10-15ml up to BD and review if not settling Dr [redacted] Kildare
21/09/2023 Triage Ms [redacted]
21/09/2023 Consultation S: Seen in Iris at 19:30
B: Bloated stomach and discomfort.
A: Patient stated she has not moved her bowels in 5 days and feels bloated.
Palpated her stomach which was hard and asked if she had been drinking enough fluids and eating fibre. Patient adivsed that she has been drinking enough fluids but the food in the prison does not agree with her. This has been an ongoing issue ad is being reviewd.
R: Have listed for GP to prescribe a Laxative

PCT [redacted]
21/09/23
20:07 Dr Gp Stirling
21/09/2023 Triage Ms [redacted] - No Data Recorded
20/09/2023 Third Party Consultation Ms Aileen [redacted]
20/09/2023 Document Image Docman Attachment
20/09/2023 Administration Clinical Letter HMP Cornton Vale Endocrinology Ms Aileen [redacted]
20/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
20/09/2023 Triage Ms [redacted] Binnie
20/09/2023 Seen by [redacted] h care assistant Aready listed for TFT bloods 16/10

[redacted] Binnie
HCA
20/09/2023 Dr Gp Stirling
20/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
20/09/2023 Administration Dr [redacted]
20/09/2023 Ongoing review GP actions [redacted]
Carbimazole reduced to 5mg as per endocrine.
Follow up arranged as per yesterdays entry Dr [redacted]
19/09/2023 Other Miss [redacted] Mckeich

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19/09/2023 Consultation ANP mail, review bloods, see entry 14/9/23
TSH 1.79, T4 10.1, T3 3.0
All within range
Letter from endocrinology - to reduce carbimazole to 5mg daily, kardex requested - listed in actions then for repeat bloods in 4 weeks - listec in ordercomms. Miss [redacted] Mckelch
18/09/2023 Third Party Consultation Ms Aileen [redacted]
18/09/2023 Document Image Docman Attachment
18/09/2023 Administration Clinical Letter HMP Cornton Vale Endocrinology Ms Aileen [redacted]
18/09/2023 Third Party Consultation Ms Aileen Berry
18/09/2023 Document Image Docman Attachment
18/09/2023 Result Results HMP Cornton Vale Clinical Chemistry Ms Aileen Berry
14/09/2023 Triage Ms [redacted] Weir
14/09/2023 Seen by health care assistant Seen in healthcentre for virtual appt.
Computer sound not working - Changed to telephone consultation.
Nurse Gillian Tough from endocrinology FVRH requested TFT bloods - obtained with consent and sent to labs.
Follow up appt in 6/52 with endocrinology consultant r.e treatment plan.
Weight obtained - 70.2kg.

HCA R WEIR
14/09/2023
1114HRS
Dr Gp Stirling
14/09/2023 Weight: 70.2 kgs BMI: 25.7 O/E - weight Dr Gp Stirling
08/09/2023 Surgery consultation Ms [redacted] Halliday
08/09/2023 Consultation Prescription of Quetiapine increased from 150mg PM to 175mg PM as per request from Dr [redacted] Swinson.

Prescription increase to take effect from Tuesday12th to allow for same to be delivered by pharmacy. 150mg PM prescription to continue until Monday 11th and then discontinue.

[redacted] Halliday
MH T/L
08/09/23
1142 Ms Cara Halliday
06/09/2023 Triage Ms Hina Khizar - No Data Recorded
05/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
05/09/2023 Third Party Consultation Mr Sharon Mccallum
05/09/2023 Document Image Docman Attachment
05/09/2023 Administration Administration HMP Cornton Vale Medical Marker Mr [redacted] Mccallum
05/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
05/09/2023 Other Dr [redacted] Kildare
05/09/2023 Ongoing review GP J.Kildare/Chronic Disease Nurse E.McBeth
Actions
Requesting medical marker again for lactose free products - see entry from Dieticians 07/12/22 on Clinical Portal - she is not dairy intolerant but they are in agreement for a marker to be given for lactose free products
Medical marker completed Dr [redacted] Kildare
04/09/2023 Triage Mrs Jane Watt
04/09/2023 Mental health review Request for increase in medication
I had met with Georgie 2 weeks ago in the hall. She told me that since moving back to Stirling the smaller household was causing her to be more anxious. She reports that the dynamics of the personalities within the unit makes her more withdrawn as she fears she will react inappropriately if "pushed". She finds herself struggling to sleep and "worries all the time".
[redacted] has not required any input from MHT for over 1 year, also not had a medication review/change in this time. She believes a small increase in her Quetiapine will benefit her at this time. For discussion at CTM.
[redacted] Watt
SSN MH Dr Gp Stirling
01/09/2023 Triage Mr [redacted] Mccallum
01/09/2023 Self-referral Self referral - Well women - not nurse clinic DF Mr [redacted] Mccallum
30/08/2023 Triage Ms Su [redacted] Pa [redacted]
30/08/2023 Administration Patient cancelled appointment.

PCT [redacted]
30/08/23
10:57 Dr Gp Stirling
25/08/2023 Triage Mrs [redacted] Watt
25/08/2023 Mental health review Request for medication increase
I met with [redacted] in Iris this evening. She reports that since coming back to Stirling she has had problems getting to sleep. The environment is causing her more distress. Believes an increase in her Quetiapine would be helpful.
I advised her that I would ask for this to be reviewed for increase at CTM.
[redacted] Watt
SSN MH Dr Gp Stirling
25/08/2023 Triage Ms [redacted] Binnie - No Data Recorded
23/08/2023 Triage Ms Laura Kilpatrick - No Data Recorded
23/08/2023 Triage Ms [redacted] Binnie
23/08/2023 Administration Actions from ANP
Listed for weight in 2 months.

[redacted] Binnie
HCA
23/08/2023 Dr Gp Stirling
23/08/2023 Administration Dr [redacted]
23/08/2023 Ongoing review GP [redacted]
Request to determine if needs to continue with weekly weights - from looking at the notes I dont think this is required. For one off weight in 2m and look at trent then.

Also 'Requesting Lactose Free Diet but not sure if she has been diagnosed as lactose intollerant.'. Not diagnosed. Can simply avoid items on the menu that she wishes to. Dr [redacted]

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21/08/2023 Triage Ms [redacted] Ford - No Data Recorded
21/08/2023 Triage Ms [redacted] Cleary
21/08/2023 Weight: 69.6 kgs BMI: 25.5 O/E - weight Ms [redacted] Cleary
17/08/2023 Triage Ms [redacted] patrick
17/08/2023 Weight: 69.1 kgs BMI: 25.3 O/E - weight Dr Gp Stirling
15/08/2023 Triage Ms [redacted] Binnie - No Data Recorded
14/08/2023 Triage Ms [redacted] Kilpatrick
14/08/2023 Seen by health care assistant Seen in clinic for weight, as documented below

[redacted] Kilpatrick
HCA
14/08/2023
10:23HRS Dr Gp Stirling
14/08/2023 Weight: 69.5 kgs BMI: 25.5 O/E - weight Dr Gp Stirling
10/08/2023 Triage Ms [redacted] Cleary - No Data Recorded
10/08/2023 Other Dr Craig Savers
10/08/2023 Ongoing review Lab results noted - already initiated on Carbimazole as per endocrine request Dr [redacted] Sayers
10/08/2023 Triage Ms Lyndsay Mccracken
10/08/2023 Weight: 69.3 kgs BMI: 25.4 O/E - weight Ms Lyndsay Mccracken
09/08/2023 Triage Ms [redacted] le Cleary - No Data Recorded
09/08/2023 Third Party Consultation Mr [redacted] Mccallum
09/08/2023 Document Image Docman Attachment
09/08/2023 Administration Haematology Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
09/08/2023 Third Party Consultation Mr [redacted] Mccallum
09/08/2023 Document Image Docman Attachment
09/08/2023 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
08/08/2023 Third Party Consultation Mrs [redacted] Taylor
08/08/2023 Document Image Docman Attachment
08/08/2023 Administration Clinical Letter NHS Forth Valley Endocrinology Mrs [redacted] Taylor
08/08/2023 Other Dr [redacted] Kildare
08/08/2023 Ongoing [redacted]iew MOA Mail - see response from Endocrine - to start Carbimazole 10mg OD and await appt from Endocrine for review Dr [redacted] Kildare
07/08/2023 Third Party Consultation Mr [redacted] Mccallum
07/08/2023 Document Image Docman Attachment
07/08/2023 Administration Clinical Letter Forth Valley Royal Hospital Endocrinology Mr [redacted] Mccallum
07/08/2023 Triage Ms [redacted] Johnston - No Data Recorded
07/08/2023 Third Party Consultation Mr [redacted] Mccallum
07/08/2023 Document Image Docman Attachment
07/08/2023 Administ[redacted]n Administration HMP Cornton Vale Glasses Reciept Mr [redacted] Mccallum
07/08/2023 Triage Ms [redacted] Rennie
07/08/2023 Planned [redacted]phone contact Video link - 14/09/2023 10:30
Endocrinology
Georgina Smith/131344
04/12/1991
01324 566249
https://nhsattend.vc/fv-endocrine
Ms [redacted] Rennie
07/08/2023 Triage Ms [redacted] Cleary
07/08/2023 Weight: 69.6 kgs BMI: 25.5 O/E - weight Ms [redacted] Cleary
07/08/2023 [redacted] by health care assistant
Repeat bloods taken as requested U&E LFT,TSH,EGFR,T3,T4
[redacted] Cleary
HCA
11.40
07/08/2023
Ms [redacted] Cleary
04/08/2023 Triage Ms Ailsa Russell - No Data Recorded
04/08/2023 Triage Mrs L[redacted]
04/08/2023 Ongoing review ANP L[redacted]
Discussed with pharmacy staff regarding gluten free foods
Wishes some changes
I have asked pharmacy to give Georgina the list and ask her to pick her 16 units and I will re-write her a kardex with GF foods only on this
03/08/2023 Triage Ms Laura Kilpatrick
03/08/2023 Weight: 70.2 kgs BMI: 25.7 O/E - weight Dr Gp Stirling
01/08/2023 Referral Letter Dr Jack Kildare
01/08/2023 SCI Referral Letter
01/08/2023 Other Dr [redacted] Kildare
01/08/2023 Ongoing review MOA - bloods reviewed - anti-TSH antibodies negative - USS neck requested and referral sent to Endocrine for advice Dr [redacted] Kildare
31/07/2023 Triage Ms Jill Ramsay
31/07/2023 Weight: 71 kgs BMI: 26 O/E - weight Dr Gp Stirling
31/07/2023 Triage Ms Keleigh Mournian
31/07/2023 Consultation
Asked by SSN J Ramsay to check review of bloods.
Note blood results below ?review.
Listed for repeat bloods on 07/08 as instructed by SSN.
Recheck same bloods as before

Keyleigh [redacted]
PCT
31.07.2023
15.14 Dr Gp Stirling
28/07/2023 Triage Ms [redacted]

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28/07/2023 Ongoing review ANP mail
ANP K[redacted]
lab results
U &es ok
EGFr >59 good
LFT ok
TSH 0.01
T4 was 27.2 now 22.6
T3 was 6.6 now 7.4
kardex to review medications

27/07/2023 Triage Ms Jade Binnie
27/07/2023 Weight: 70.2 kgs BMI: 25.7 O/E - weight Dr Gp Stirling
27/07/2023 Third Party Consultation Mr[redacted] Mccallum
27/07/2023 Document Image Docman Attachment
27/07/2023 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr[redacted] Mccallum
27/07/2023 Administration Dr[redacted] Oswald
27/07/2023 Ongoing review GP[redacted]
Mail
Not all bloods back yet, anti TSH/TPO outstanding, wait for these results to come through and then review. Dr[redacted]
26/07/2023 Third Party Consultation Mr S[redacted] Mccallum
26/07/2023 Document Image Docman Attachment
26/07/2023 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr[redacted] Mccallum
24/07/2023 Triage Ms[redacted] Binnie
24/07/2023 Seen by health care assistant Seen in HCA clinic for bloods
Successfully obtained and sent to labs

[redacted] Binnie
HCA
24/07/2023 Dr Gp Stirling
24/07/2023 Weight: 70.1 kgs BMI: 25.7 O/E - weight Dr Gp Stirling
24/07/2023 Triage Ms Jade Binnie - No Data Recorded
21/07/2023 Triage Ms[redacted] Kilpatrick
21/07/2023 Administration Listed for bloods for next week as requested.

[redacted] Kilpatrick
HCA
21/07/2023
18:58HRS Dr Gp Stirling
21/07/2023 Other Dr[redacted] Kildare
21/07/2023 Hyperthyroidism ANP L.Kane/GP J.Kildare
Mail
See bloods - TSH undetectable with hyperthyroidism
Please repeat bloods next week - FBC, U&Es, LFTs, HbA1c, TSH with Anti-TSH and Anti-TPO antibodies
Can review following this and if remains raised for referral to Endocrine team Dr[redacted] Kildare
20/07/2023 Third Party Consultation Mr Sharon Mccallum
20/07/2023 Document Image Docman Attachment
20/07/2023 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr[redacted] Mccallum
20/07/2023 Third Party Consultation Mr[redacted] Mccallum
20/07/2023 Document Image Docman Attachment
20/07/2023 Administration Microbiology Results Forth Valley Royal Hospital Microbiology Mr[redacted] Mccallum
20/07/2023 Third Party Consultation Mr[redacted] Mccallum
20/07/2023 Document Image Docman Attachment
20/07/2023 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr[redacted] Mccallum
20/07/2023 Third Party Consultation Mr[redacted] Mccallum
20/07/2023 Document Image Docman Attachment
20/07/2023 Administration Haematology Results Forth Valley Royal Hospital Labs Mr Sharon Mccallum
20/07/2023 Triage Ms[redacted] Binnie
20/07/2023 Weight: [redacted] kgs BMI: 26.2 O/E - weight Dr Gp Stirling
19/07/2023 Triage Ms[redacted] Binnie - No Data Recorded
19/07/2023 Triage Ms[redacted] Binnie - No Data Recorded
17/07/2023 Triage Ms[redacted] Binnie
17/07/2023 Weight: 71.1 kgs BMI: 26.1 O/E - weight Dr Gp Stirling
17/07/2023 Seen by health care assistant Seen in clinic for bloods
Successfully obtained from L arm
Sent to labs

[redacted] Binnie
HCA
17/07/2023 Dr Gp Stirling
16/07/2023 Triage Ms[redacted] Binnie - No Data Recorded
14/07/2023 Other Miss[redacted] Mckeich
14/07/2023 Consultation ANP entry, request to discontinue bisacodyll as patient refusing, done Miss[redacted] Mckeich
14/07/2023 Triage Ms[redacted] Binnie - No Data Recorded
14/07/2023 Third Party Consultation Mr[redacted] Mccallum
14/07/2023 Document Image Docman Attachment
14/07/2023 Administration Clinical Letter HMP Stirling X-Ray X-Ray Referral Mr[redacted] Mccallum
14/07/2023 Triage Ms[redacted] Binnie - No Data Recorded
14/07/2023 Other Miss[redacted] Mckeich

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14/07/2023 Consultation ANP entry, seen patient, c/o few issues:

1. acne to face, requesting treatment, requesting lymecycline, unable to use benzoyl peroxide - allergy - rash, lymecycline prescribed.

2, requesting throat spray for throat pain, occasional pain to throat when eating certain foods, usually when ubale to get gluten free, mouth examined, throat red, no inflammation, no pus, T37.1, centor score 0, rx difflam x 7 days

3. Feels tired and been loosing weight
present for last 3 weeks
concerned something is wrong
note weight March 23 75kg
weight today 70.4kg
Believes there is something sinister going on
o/e looks well
talking whole sentences
gait normal
has good appetite, states eats regularly (hx eating disorders)
drinking plenty fluids
mouth - throat slightly red/painful - swab taken
swallowing - no issues
vomited 2 days ago, vomited after visit - had ate packet of crisps - foodstuff/bile
Not vomited since but nauseous
feels gets sweats when walking about
new pain to abdomen - pain actually on back when patient pointed to area
pain on palpation back, midline, right side
no flank pain
abdo soft and non tender
no gaurding/referred pain
bowel sounds present
bladder - urine - passing more than normal, no pain, slight odour
recent urine dip NAD
bowels: ok, normal stool, last moved yesterday, moves once daily, no blood
SH - last screen few months [redacted] - clear - states not put self at risk since
Imp: ? msk pain, patient advised
? reason for weight loss over last 3mths
Plan: listed patient for bloods - FBC, U&E, LFT, CRP, TFT, Hba1c,
for 2 weekly weight
worsening advice given

4. Patient also c/o lumps to abdomen
o/c numerous stretch marks over abdomen
on palpation 3 small lesions felt lower abdomen just above pelvic area
small circular lesions
smooth borders
appear attached to underlying skin
Imp: ? lypoma/small cyst
Patient believes they may be sinister, anxious
Agreed for referral for ultrasound
worsening advice given
Miss [redacted] Mckeich

13/07/2023 Triage Ms [redacted] Binnie
13/07/2023 O/E - temperature level = 36.8 degC Dr Gp Stirling
13/07/2023 O/E - pulse rate 79 beats/min Dr Gp Stirling
13/07/2023 Pulse oximetry 97 % Dr Gp Stirling
13/07/2023 11:29.00 BP 102 / 70 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
13/07/2023 Weight: 70.5 kgs BMI: 25.8 O/E - weight Dr Gp Stirling
13/07/2023 Seen by health care assistant Seen in HCA clinic for urinalysis and full set obs
Georgina disgunted to see it was not a dr/anp but explained that she would need to see a hca/nurse initially to know if it is suitable to see a dr and she said 'ive seen yous fucking hunners of times'
Georgina complaining of sore back and sides - shooting pains - asked me to include this in notes as she said can be unbearable at times
Urinalysis negative
Observations recorded:

[redacted] Binnie
HCA
13/04/2023 Dr Gp Stirling
11/07/2023 Triage Ms [redacted] Binnie
11/07/2023 Administration Actions from GP/ANP clinic
Nil bloods required
Listed for urinalysis, full set of observations

[redacted] Binnie
HCA
11/07/2023
Dr Gp Stirling
11/07/2023 Other Dr [redacted] Kildare
11/07/2023 Ongoing review ANP J.McKeich/GP J.Kildare
Actions
Triage entry noted below - [redacted] more information here and routine observations before it can be decided if bloods are necessary - at the moment I dont feel bloods are indicated Dr [redacted] Kildare
10/07/2023 Third Party Consultation Mr [redacted] Mccallum
10/07/2023 Document Image Docman Attachment
10/07/2023 Administration Administration HMP Stirling Optician Patient Response Letter Mr [redacted] Mccallum
10/07/2023 Triage Ms Keleigh Mournian

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10/07/2023 Consultation
S-Seen in triage room
B-Submitted a self referral requesting bloods to be taken
A-Patient states she feels tired and lethargic all the time and feels like she overheats at times.
R-Will list for GP/ANP actions to query if any bloods required?

Keyleigh Hale
PCT
10.07.2023
10.45 Dr Gp Stirling
06/07/2023 Triage Ms [redacted] Rennie
06/07/2023 Self-referral PCT - MM - Would like bloods taken and copy of cell markers. Admin will check if there are any cell markers issued by HMP STirling and forward these to the patient Ms [redacted] Rennie
05/07/2023 Other Miss [redacted] Mckeich
05/07/2023 Consultation ANP actions, requesting bisacodyl monthly and bonjela for cold sores. No concerns from MHT, bisacodyl changed to monthly and prescribed bonjela. Miss [redacted] Mckeich
05/07/2023 Other Miss [redacted] Mckeich - No Data Recorded
04/07/2023 Third Party Consultation Mr S [redacted] Mccallum
04/07/2023 Document Image Docman Attachment
04/07/2023 Administration Administration HMYOI Polmont Transfer Paperwork Mr [redacted] Mccallum
03/07/2023 Triage Ms Lyndsay Mccracken
03/07/2023 Self-referral recieved self referral form ? if Georgina could possibly have her bisacodyl 5mg tablets changed to monthly instead of weekly.
I have had a look at [redacted] kardex and it is prescribed she can take 1-2 tablets per day. She reports on referral that she takes 1 tablet per night however, feels if she recieved monthly's she would have enough to be able to take 2 tablets where necessary.
It is not documented in kardex how many tablets are issued on a weekly basis.
I will list for GP/ANP actions to ? if changing to monthly is an option.

PCT S/N Lyndsay McCracken
12.14 Ms Lyndsay Mccracken
03/07/2023 Triage Ms Lyndsay Mccracken
03/07/2023 Seen by triage nurse S- self referral recieved
B- Listed for review of mouth ulcers from dental referral
A- Seen Georgina in clinic this morning for review. Stated she had put a dental rferral in as her dentures are causing her to develop mouth ulcers.
Also when in clinic Georgina reported she feels like she has a urine infection. Urine test obtained and tested which was negative.
Encouraged to drink more fluids.
R- List for ANP/GP actions for bonjella for mouth ulcer until dentist has appointment available

PCT S/N Lyndsay McCracken
09.54 Ms Lyndsay Mccracken
03/07/2023 Triage Ms Lyndsay Mccracken - No Data Recorded
30/06/2023 Triage Mr Connor [redacted]y - No Data Recorded
29/06/2023 Triage Ms Susan Payne
29/06/2023 Administration Listed for PCT clinic Monday 03/07/23

PCT [redacted]
13:14
29/06/23 Dr Gp Stirling
29/06/2023 Triage Mr [redacted] Mccallum
29/06/2023 Self-referral mouth ulcers and sore. SP Mr [redacted] Mccallum
28/06/2023 Triage Ms Lyndsay Mccracken
28/06/2023 Seen by triage nurse S- self referral recieved
B- Ongoing skin [redacted] to face.
A- [redacted] Georgina in clinic this [redacted] regarding skin [redacted]. Reports she has been awaiting appointment for skin clinic since she has been in both Corntonvale and Lilias.
Georgina had full face of make up on therefore unable to review appropriately. She states she would like commenced back on antibiotics however have advised skin would need reviewed first. She is happy with this.
Georgina also reports she has teeth issues and has been advised to self refr for dentist.
R- List for ANP Murphy to review skin on return to HMP Stirling.

PCT S/N Lyndsay McCracken
10.52 Ms Lyndsay Mccracken
27/06/2023 Triage Ms [redacted]
Letter on: 27/06/2023 type: Referral Smear Results
22/05/2023 reported 27/06/2023 Cervical smear result HPV - Human papillomavirus test negative recall due: 22/05/2028 Ms [redacted]
22/05/2023 Recall on 22/05/2028 for Cervical smear result with Ms [redacted] Status: Outstanding
27/06/2023 Triage Ms Sus[redacted] Payne
27/06/2023 Consultation Listed for PCT clinic 28/06/23 : Skin issues

PCT [redacted]
11:50
216/06/23 Dr Gp Stirling
26/06/2023 Triage Mr Sharon Mccallum
26/06/2023 Self-referral Skin Clinic
Optician Self-referral - Broken/lost glasses. Mr [redacted] Mccallum
22/06/2023 Third Party Consultation Ms [redacted] Rennie
22/06/2023 Document Image Docman Attachment
22/06/2023 Administration Clinical Letter HMP Cornton Vale Medical Marker Ms [redacted] Rennie
22/06/2023 Triage Ms Jill Ramsay
22/06/2023 Consultation Medical marker put in place for dietry requirements.
PCT DTL JRamsay 22/6/23 07.46 Dr Gp Stirling
22/06/2023 Triage Ms Jill Ramsay - No Data Recorded
22/06/2023 Triage Ms Jill Ramsay - No Data Recorded

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

22/06/2023 Triage Ms Jill Ramsay : No Data Recorded
19/06/2023 Triage Ms Michelle Morris
19/06/2023 Transfer profile form completed Georgie is fine with being back. She is excited that she only has 24 months of her sentence left and is glad she is spending it at HMP Stirling. [redacted] does not feel like she requires any input or support from mental health or addictions and is aware of how to place referrals for services. Dr Gp Stirling
19/06/2023 Pulse oximetry 98 % Dr Gp Stirling
19/06/2023 O/E - rate of respiration = /minute Dr Gp Stirling
19/06/2023 O/E - temperature level = 37.1 degC Dr Gp Stirling
19/06/2023 O/E - pulse rate 90 beats/min Dr Gp Stirling
19/06/2023 13:54.00 BP 108 / 72 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
19/06/2023 Height: 1.65 metres O/E - height Dr Gp Stirling
19/06/2023 Weight: 72.9 kgs BMI: 26.7 O/E - weight Dr Gp Stirling
19/06/2023 No apparent risk of suicide Strongly denies any thoughts of suicide and is aware how to refer herself should things change. Dr Gp Stirling
19/06/2023 No thoughts of deliberate self [redacted] Denies any thoughts of [redacted] Dr Gp Stirling
19/06/2023 No drug therapy prescribed [redacted] has arrived with a kardex but we do not have her medications yet as her posessions are still in transit with SPS staff. Dr Gp Stirling
19/06/2023 Allergy Moderate H/O: non-drug allergy Allergic to lactose and gluten and requires non spice food. Medical marker will be completed. Dr Gp Stirling
19/06/2023 Third Party Consultation Mrs [redacted]
19/06/2023 Document Image Docman / [redacted]
19/06/2023 Administration Kardex/Recording Sheet HMPYOI Polmont Pharmacy Clinical Mrs [redacted]
17/06/2023 Triage Mr Steven Blunt
17/06/2023 Administration Patient record accessed for person escort record.

[redacted] Blunt MHT 17/6/2023 Dr Gp Stirling
26/05/2023 Triage Ms [redacted]
26/05/2023 Seen in [redacted] health clinic seen regardin vaginal dryness, no evidence os same during smear, or signs of irritation, keen for lubricant, advised bettert o try and resolve cause if becomes ongoing issue, awati results of recent testing and can self refer back if wishes. R [redacted] - sexual health nurse
26/05/2023 10:29 Ms [redacted]
22/05/2023 Triage Ms [redacted] Lawson
22/05/2023 Recall on 14/08/2023 for Depo-provera injection given with Ms [redacted] Lawson Status: Complete
22/05/2023 Depo-provera injection given First service recall due: Claim Expiry Date: Batch GK5704, EXP 02/2025. No UPSI since last period. Has had previously with good effect, other options discussed. Ms Rachel [redacted]
22/05/2023 Liquid ba[redacted]tology screening Ms [redacted]
12/05/2023 Triage Ms [redacted]
12/05/2023 Ongoing review ANP Actions
ANP K [redacted]
See below entry 11/05/23 DC SN review
Imp otis externa px gentamicion 0.3% / hydrocortisone ear drop 4-5 x daily 5 days not resolving list for ANP / GP review
Imp season allergies effect s eye px sodium cromglicate2% eye drops
MSU clear. Nil action required continue to push fluids
For review if not resolving

12/05/2023 Triage Mr [redacted] Carruthers
12/05/2023 Consultation - returned urine sample - ward tested and unremarkable .
D.Carruthers s/n 09.50 hours Mr [redacted] Carruthers
11/05/2023 Triage Mr [redacted] Carruthers
11/05/2023 Consultation S - seen in health centre
B - nurse clinic appointment
A - c/o ear ache particularly left ear - also sore throat - O/E - nil signs infection to throat - nil inflammation - nil pus or enlargement to tonsils - glans to neck not palpable - right ear ear drum intact - nil signs infection - left ear ear drum intact but evidence of inflammation - also concerned has UTI - strong smwelling urine.Also c/o early hayfever streaming eyes - states oral antihistamine not generally effective.
R - 1 IMP - [redacted] externa left ear - ANP actions gentisone ear drops or equivalent.
2 - opticrom eye drops or equivlant - ANP actions.
3 - universal container for return of urine sample - for ward test in the a.m - advised push fluids.
D.Carruthers S/N 14.35 hours Mr [redacted] Carruthers
11/05/2023 Triage Ms [redacted] Muir
11/05/2023 Weight: 75 kgs BMI: 27.5 O/E - weight Ms [redacted] Muir
11/05/2023 Seen by health care assistant [redacted] in hall for week 4 weight check. Liusted for ANP to review.
[redacted] Muir
HCA
1140
Ms [redacted] Muir
11/05/2023 Triage Ms C[redacted] Muir - No Data Recorded
11/05/2023 Triage Mrs [redacted] Taylor
11/05/2023 Self-referral Dentist Dr Gp Stirling
10/05/2023 Triage Mrs [redacted]
10/05/2023 Self-referral [redacted] Health/BBV - Well Person Clinic - "Need smear done asap (overdue)" Added to SH waiting list and card sent to patient to confirm. Mrs [redacted]
05/05/2023 Triage Ms [redacted]
Letter on: 05/05/2023 type: Referral SH Results
05/05/2023 Hepatitis C antibody test negative = Ms [redacted]
05/05/2023 HIV negative = Ms [redacted] Lawson
05/05/2023 Hepatitis B surface antigen negative = Ms [redacted]
05/05/2023 Syphilis titre test negative = Ms [redacted]
05/05/2023 Triage Mr [redacted] Mccallum
05/05/2023 Self-refe[redacted] sore throat and head. Dr Gp Stirling
04/05/2023 Triage Ms [redacted] Penman
04/05/2023 Weight: 76 kgs BMI: 27.9 O/E - weight Ms [redacted] Penman

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04/05/2023 Seen by health care assistant Saw Georgina in [redacted] 2 to take her week 3 weight of 4 weeks as requested by AMP [redacted]
Her weight is 76kg. Have relisted her for her 4th weight on 11/5/23.

HCA
[redacted] penman 14.08 Ms [redacted] Penman
02/05/2023 Other Miss [redacted] Mckeich
02/05/2023 Consultation ANP entry J McKeich/K [redacted]
Requesting QV wash, prescribed Miss [redacted] Mckeich
27/04/2023 Triage Ms [redacted] Binnie - No Data Recorded
27/04/2023 Triage Ms [redacted] Thomson
27/04/2023 Seen by health care assistant in [redacted] 2 for weight.
[redacted]
HCA
16.20. Dr Gp Stirling
27/04/2023 Triage Ms [redacted] Thomson - No Data Recorded
22/04/2023 Triage Ms [redacted] - No Data Recorded
21/04/2023 Triage Ms [redacted] Binnie - No Data Recorded
21/04/2023 Triage Ms [redacted]
21/04/2023 Weight: 77 kgs BMI: 28.2 O/E - weight Dr Gp Stirling
21/04/2023 Seen by health care assistant in [redacted] 2 for weight.
Donna [redacted]
HCA
11.50. Dr Gp Stirling
21/04/2023 Third Party Consultation Ms Jane Rennie
21/04/2023 Document Image Docman Attachment
21/04/2023 Result Results Microbiology Ms [redacted] Rennie
20/04/2023 Triage Ms [redacted] Binnie - No Data Recorded
17/04/2023 Triage Ms Ra [redacted] La [redacted]
17/04/2023 Seen in [redacted] health clinic [redacted] for routine BBV screen.
Smear due however has period so relisted.
R [redacted] - [redacted] health nurse
17/04/2023 11:16 Ms [redacted]
17/04/2023 Hepatitis C antibody test = Ms [redacted]
17/04/2023 Human immunodefic.viral test = Ms [redacted]
17/04/2023 Hep B surface antigen test = Ms [redacted]
17/04/2023 Syphilis infectious titre test = Ms [redacted]
17/04/2023 Other Miss [redacted] Mckeich
17/04/2023 Administration - note ANP entry - HCA has listed for weekly weights over the next month.
D.Carruthers S/N 12.00 hours Miss [redacted] Mckeich
17/04/2023 Consultation ANP entry, approached by nursing staff, patient states had bloods done & looking for results, see entry 13/2/23:
FBC ok
BS ok
TFT ok
bone profile ok
U&E ok
LFT ok
folate ok
B12 ok
Patient states was loosing weight, curent weight 75kg (weight 13/2/23 81.6kg,) for weekly weights x 4 weeks then list for ANP actions.
for weekly weights x 4 weeks. Miss [redacted] Mckeich
17/04/2023 Triage Ms K [redacted] Penman
17/04/2023 Seen by health care assistant Have listed Georgina for 4 weekly weights in the hca clinic as per AMP, these are 20/4 27/4 4/5 11/5.
Pass on the results to Jackie once taken.

HCA
[redacted] penman 10.45 Ms [redacted] Penman
11/04/2023 Triage Ms [redacted] Rennie
11/04/2023 Self-referral SHC - Well person - Would like a smear Ms [redacted] Rennie
04/04/2023 Third Party Consultation Ms [redacted] Rennie
04/04/2023 Document Image Docman Attachment
04/04/2023 Administration In possesion medication check form HMPYOI Polmont Health Centre Pharmacy Ms [redacted] Rennie
01/04/2023 Triage Ms [redacted] Binnie
01/04/2023 Seen by health care assistant for spot check medication.

Amitriptlyine 75mg - Should be remanining x12 , Actual remaining x15
Quetiapine 150mg - Should be remanining x4 Actual remaining x5.

Response to discrepancy - previous prescription overlapped

[redacted] Binnie
HCA
01/04/23

No explanation for being short x1 of each.
Dr Gp Stirling
29/03/2023 Third Party Consultation Mrs Lisa Taylor
29/03/2023 Document Image Docman Attachment
29/03/2023 Administration Administration HMYOI Polmont Medical Diet Requistion Mrs [redacted]
29/03/2023 Triage Ms Jill Ramsay
29/03/2023 Consultation Medical marker for gluten and lactose intolerance completed
PCT SN JRamsay 29/03/2023 13.10 Dr Gp Stirling
28/03/2023 Other Dr [redacted] Kildare

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28/03/2023 Ongoing review ANP K [redacted] J.Kildare
Actions
[redacted] requesting Etodolac and Peppermint caps to be made in possession - currently supervised - Kardex amended as requested Dr [redacted] Kildare
24/03/2023 Other Miss [redacted] Mckeich
24/03/2023 Consultation ANP actions, request from PCT to change supervised meds to inpossession, patient been moved to fevel 2, no recent [redacted] on vision re med compliance, discussed with MHT, no [redacted] meds moved to weekly, listed for med check. Miss [redacted] Mckeich
23/03/2023 Other Miss [redacted] Mckeich
23/03/2023 Consultation ANP entry J McKeich/L Kane
Late entry: kardex transcribed following admission to Polmont. Miss Jackie Mckeich
23/03/2023 Clinic Ms Kaitlin Currie
23/03/2023 Mental health admin. NOS Georgina was listed to see writer - RMN - 17/03/2023 however writer had to cover another establishment. Rescheduled Georgina's mental health assessment to today however she has been transferred back to Polmont. Discharged from the MHT. Ms Kaitlin Currie
22/03/2023 Triage Ms Abby Rafferty
22/03/2023 Transfer profile form completed
Transfer of this 31 year old lady from Lillias unit, reports to have been downgraded due to [redacted] contacting unit, and the risk this poses to her. States is only supposed to be here for a few days until this can be discussed at RMT.
Disgruntled at being held within [redacted] 1.
Engaged well, mood reactive and subjectivley denied any concerns.
Reports to be lactose and gluten intolerant.
Nil else signiicant health issues.
Reports numerous MH diagnosis but did not wish to discuss this at lenght today as she feels she is managing her mental health well currently.
Strongly denied current plans, intent of deliberate self harm or suicide. Advised she would seek support should her mental health deteriorate

Would like referral to SH nurse to have smear completed.

Plan-
ANP has kardex to re-wrtie prescriptions
Refer to SH

ARafferty
RMN
22/03/23 Ms [redacted] Rafferty
22/03/2023 No apparent risk of suicide Strongly denied current thoughts, plan or intent of suicide.
Reports history of suicidality over 10 years ago however nil recent. Advises she would seek staff support if her mental state should decline.
Ms [redacted]
22/03/2023 No thoughts of deliberate self [redacted] Strongly denied any current thoughts or intent of deliberate self [redacted] Ms [redacted]
22/03/2023 Prescription by GP Prescribed medications.
Peppermint capsules
Diflam Spray
Beclometasone nasal spray
Etodolac
Bisocodyl
Quetiapine
Amitriptyline
Pzotifen
Fexofenadine
Famotadine
Cetirizine

Also arrived with vitamins she reports she bought from canteen:
Cod liver oil
Vitamin D3
Vitamin C
Multivitamin & Iron Ms [redacted]
22/03/2023 Pulse oximetry 96 % Ms Abby [redacted]
22/03/2023 O/E - rate of respiration = 17 /minute Ms [redacted]
22/03/2023 O/E - temperature level = 36.5 degC Ms [redacted]
22/03/2023 O/E - pulse rate 78 beats/min Ms [redacted]
22/03/2023 15:39.00 BP 114 / 80 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Ms [redacted]
22/03/2023 Height: 1.65 metres O/E - height Ms [redacted]
22/03/2023 Weight: 75 kgs BMI: 27.5 O/E - weight Ms [redacted]
22/03/2023 Triage Ms [redacted]
22/03/2023 Refer for Refer to community [redacted] health advisor Action: 12/04/2023 Text Ms [redacted]
22/03/2023 Prescription by GP Kardex recieved on transfer Ms [redacted]
22/03/2023 Triage Ms [redacted] Queen
22/03/2023 Consultation Georgina attended health centre this morning complaining of ongoing throat issues.
States she ate a meal last night and still feels as if the food is stuck in her throat
Noi issues with breathing, swallowing fluids, speaking
Will book her in for GP attend anywhere this am Ms [redacted] Queen
14/03/2023 Triage Ms [redacted]
14/03/2023 Smoking cessation advice for Smoking Attended stop vape support session in HUB at 1.45pm. Stated interested in possibly stopping vape but is unable to tolerate nicotine patches due to sensitive skin. Advised on structure of stop vape group service, discussed possible access to nicotine lozenges if skin reaction documented on Vision records. Georgina stated may attend group next week. Ms [redacted] Mulheron
13/03/2023 Triage Ms [redacted] No Data Recorded
13/03/2023 Triage Ms [redacted]

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13/03/2023 Patient reviewed ongoing throat issue - seen last 13/2.
still sore. states taking PPI since then and no good. denies specific acid reflux type pain but throat [redacted] sore mnost of the time. no food or fluid sticking eating drinking as normal
no weight loss. occ ear pain - didnt offer present on asking. no discharge from ear or hearing issues.
no cough
smokes but is now vaping
[redacted] had throat cancer was a smoker.

allergiues nasally, on cetirizine but not much help. ongoing issue

o/e throat NAD no neck lumps ears both clear

reassured no red flags re throat., advised best she can do is stop smoking. aware of this . bloods from feb [redacted] normal
can check for h pylori incase acid reflux [redacted] - stop PPI 2 weeks famitidine during this time. then hpylori sample
can restart PI after this if needed

nasal spray incase post nasal drip an attribute
stop cetirzine and start fexofenadine Dr [redacted] Usher
09/03/2023 Clinic Ms Kaitlin Currie
09/03/2023 Administration Geoamy cancelled transport for Georgina's dental appointment this morning. Writer contacted the dental hospital to rearrange this appointment. Further appointment arranged for 29/03/2023 at 3.30pm. Ms Kaitlin Currie
02/03/2023 Third Party Consultation Mr [redacted] Mccallum
02/03/2023 Document Image Docman Attachment
02/03/2023 Administration Clinical Letter HMP Cornton Vale Care and Treatment Plan Asthma Mr [redacted] Mccallum
01/03/2023 Clinic Ms Kaitlin Currie
01/03/2023 Mental health admin. NOS Attempted to see Georgina for the purpose for completing a mental health assessment however she was unavailable due to seeing another service. Will relist for next available appointment. Ms Kaitlin Currie
01/03/2023 Clinic Ms [redacted] Currie
01/03/2023 Mental health admin. NOS Mental health referral form received, submitted 15/02/2023 however just received by MHT to be screened. Georgina requesting to speak to a mental health nurse. Several email correspondence has been made regarding Georgina from SPS and social work regarding Georgina displaying manipulative behaviours and previous input for low mood and anxiety in another establishment. Allocated routine assessment, letter sent. Ms Kaitlin Currie
28/02/2023 Surgery consultation Dr [redacted]
28/02/2023 Administration bloods NAD (including TFTS) Dr Joe [redacted]
27/02/2023 Surgery consultation Dr Joe [redacted]y - No Data Recorded
24/02/2023 Triage Ms [redacted]
24/02/2023 Consultation Georgina attended the health centre - complaining of feeling genreally unwell with dizzy spells.
OB:
136/84, P 95bpm, Sats 98%, Temp 36.4 RR 14
Obs stable, states eating drinking normally, sleeping well, no complaints of pain
Advised to rest today if feeling unwell/dizzy. Worsening statement given Ms [redacted] Campbell
21/02/2023 Triage Ms [redacted]
21/02/2023 Dental care Dental appointment rescheduled for Thursday 9/3/23 @9.30am Ms [redacted] Campbell
21/02/2023 Third Party Consultation Ms Nicola [redacted]
21/02/2023 Document Image Docman Attachment
21/02/2023 Result Results Haematology Ms [redacted]
21/02/2023 Third Party Consultation Ms Nicola [redacted]
21/02/2023 Document Image Docman Attachment
21/02/2023 Result Results Biochemistry Ms [redacted]
17/02/2023 Triage Ms [redacted]
17/02/2023 Dental c[redacted]de for routine dental care at Glasgow dental hospital - 28/02/23 @9am - SPS aware to arrange transport Ms [redacted]
17/02/2023 Triage Ms [redacted] - No Data Recorded
16/02/2023 Triage Ms [redacted] Rennie - No Data Recorded
15/02/2023 Triage Ms Christine Campbell
15/02/2023 Administration Self referral received for Mental health - passed to MH nurse.
Self referral received for dentist - second referral for broken plate, advised Lilias still under emergency dental treatment only and she will be added to waiting list. Ms [redacted] Campbell
15/02/2023 Triage Ms [redacted]
15/02/2023 Blood sample taken = As per GP request
Venous blood obtained from right arm - sent to lab Ms [redacted]
13/02/2023 Follow-up/routine visit Ms Amy Swandells
13/02/2023 Occupational therapy Met with Georgina in multi-purpose room 2 from 13:00 - 13:40. Explained current OT role is information gathering to support service development using OSA (Occupational Self Assessment) and activity checklist. Advised Georgina plan to complete assessment to support info gathering, and if occupational need is identified, follow this up once OT service is active.
Georgina gave verbal consent to the above and partake in assessment today.
Completed OSA and activity checklist. Areas Georgina feels she has most difficulty with and would like to prioritise are managing her finances, solving problems, getting done what she needs to do and having a satisfying routine. From the activity checklist, her 3 top activities of interest that she would like to pursue in the future are paid employment (full/part time), Hiking/hill walking and seeing family and friends.
Advised Georgina writer felt they would likely benefit from OT given above described difficulties with daily activity, to maximise participation. Will follow up in the future as appropriate when OT service is active. Georgina agreeable with this.

Ms Amy Swandells
13/02/2023 Surgery consultation Dr [redacted] - No Data Recorded
13/02/2023 Surgery consultation Dr [redacted] Daly - No Data Recorded
13/02/2023 Surgery consultation Dr [redacted] - No Data Recorded
13/02/2023 Surgery consultation Dr [redacted]
13/02/2023 Consultation FTF with [redacted] nurse
weight 81.6, says has trouble loosing weight and poor energy
bowels fine
chronic sore throat, says prev ENT hospital appt NAD
on examination no masses, throat a bit red, is on nsaid so ? reflux. omeprazole added, with difflam. no diyphagia. Systemically well
for UEs LFTS TFTS bone gluc FBC vit B12/folate Dr [redacted]
10/02/2023 Surgery consultation Dr Joe Daly

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10/02/2023 SCI Referral Letter
10/02/2023 Surgery consultation Dr [redacted] - No Data Recorded
08/02/2023 Triage Ms [redacted] Campbell
08/02/2023 Administration Discussed with Dr [redacted] this morning, Georgina will need to be seen physically to have throat examined - as no further complaints noted will list for Mon 13/02/23 Ms [redacted] Campbell
08/02/2023 Surgery consultation Dr [redacted] - No Data Recorded
07/02/2023 Clinic Ms Kaitlin Currie
07/02/2023 Mental health admin. NOS Notes accessed for RMT purposes. Ms Kaitlin Currie
04/02/2023 Clinic Ms K [redacted] Currie
04/02/2023 Seen by nurse Georgina attended the health centre asking for a brief conversation regarding ongoing issues with her throat. States she has been experiencing the feeling of some food/fluids being digesting wrong and causing her to cough. Advised to keep a diary o what she is eating to see if any particular foods or liquids are difficult to swallow and this can be discussed with the GP at her appointment
08/02/2023. Ms [redacted] Currie
01/02/2023 Triage Miss [redacted] Mctaggart
01/02/2023 Consultation Seen in HC. Feels as if struggling to lose weight, regardless of eating better and exercising more. Asking re blooc test to check thyroid levels. Will add patient to virtual GP clinic for review. Miss Lauren Mctaggart
27/01/2023 Triage Ms Christine Campbell
27/01/2023 Medication satisfactory Spot check carried out today on weekly medication.
HCSW L McTaggart present
All medication checked and correct.
Spot check form signed and scanned to docman. Ms [redacted]
27/01/2023 Surgery consultation Dr [redacted] Daly - No Data Recorded
25/01/2023 Surgery consultation Dr [redacted] - No Data Recorded
25/01/2023 Surgery consultation Dr [redacted]
25/01/2023 Consultation telehealth, chronic facial /torso acne resistant to multiple oral therapies
agreed routine derm referal Dr [redacted]
25/01/2023 Triage Ms [redacted] Campbell - No Data Recorded
23/01/2023 Clinic Miss Katelin [redacted]
23/01/2023 Urine dipstick test = Urine tested using miltistix

LEU= NEG
NIT= NEG
PRO= NEG
PH= 5.0
BLOOD= NEG
SG=1.030
KET= NEG
GLU= NEG

NIL SIGNS OF UTI
SAMPLE DESTROYED Miss Katelin [redacted]
22/01/2023 Triage Ms Christine [redacted]
22/01/2023 Patient advised re diet Advice Georgina asking if we can prescribe snack/chocolate s as she was not able to buy gluten free snacks on her weekly shopping budget.
When asked what she did in Corton Vale she advised she just "posioned" herself and ate regular chocolate as no alternative was supplied on canteen.
Advised not to do this and that we cannot prescribe anything other than basic food (which are already preacribed). Georgina states we have to have a meeting with SPS to tell them she has to be given money/access to snacks.
Advised Georgina this would not be appropriate as SPS are aware of her dietary requirements and we cannot interfer with shopping and budgets based on preference. Ms [redacted]
22/01/2023 Urine smell = Georgina attended health centre today - complaining of dark, smelly urine. States started yesterday. White top bottle given to provide sample tomorrow. For dipstick test Ms [redacted] Campbell
21/01/2023 Triage Ms [redacted] Campbell
20/01/2023 Dental care Referral received for repair of denture plate.
Georgina aware that we are only able to accomadate emergency dental issues at present. Ms [redacted] Campbell
18/01/2023 Third Party Consultation Ms [redacted] Rennie
18/01/2023 Document Image Docman Attachment
18/01/2023 Administration Kardex HMP Corrton Vale Pharmacy Ms [redacted] Rennie
18/01/2023 Triage Ms Christine Campbell
18/01/2023 Transfer profile form completed TTM paperwork completed by c [redacted]
Georgina wishes to discuss current acne treatment with GP.
Listed for next clinic 25/01/23 Ms [redacted] Campbell
18/01/2023 Pulse oximetry 98 % Ms [redacted] Campbell
18/01/2023 O/E - rate of respiration = 17 /minute Ms Christine Campbell
18/01/2023 O/E - temperature level = 36.4 degC Ms Christine [redacted]
18/01/2023 O/E - pulse rate 68 beats/min Ms [redacted]
18/01/2023 12.09.00 BP 120 / 78 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Ms [redacted]
18/01/2023 No apparent risk of suicide Ms [redacted] Campbell
18/01/2023 No thoughts of deliberate self [redacted] Ms [redacted] Campbell
18/01/2023 H/O: deliberate self harm reports nil self [redacted] for 6 yrs Ms [redacted] Campbell
18/01/2023 H/O: attempted suicide Nil since 2012- reports attempted hanging Ms [redacted] Campbell
18/01/2023 No signif H/O psych. disorder of Ms [redacted]
18/01/2023 Prescription by GP Kardex on transfer Ms Christine [redacted]
18/01/2023 Allergy Moderate H/O: non-drug allergy Ms [redacted] Campbell
18/01/2023 Height: 1.65 metres O/E - height Ms [redacted]
18/01/2023 Triage Ms [redacted] Rennie - No Data Recorded
18/01/2023 Third Party Consultation Ms [redacted] Rennie
18/01/2023 Document Image Docman Attachment
18/01/2023 Administration Transfer Paperwork Corrton Vale Administration Ms [redacted] Rennie
18/01/2023 Triage Ms [redacted] Rennie - No Data Recorded
17/01/2023 Third Party Consultation Ms [redacted] Rennie
17/01/2023 Document Image Docman Attachment
17/01/2023 Administration Kardex HMP Corrton Vale Pharmacy Ms [redacted] Rennie
17/01/2023 Triage Ms [redacted]

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17/01/2023 Consultation See in HC at 10:40

Urine sample back as a negative. Georgina was not sure why she was attending the clinic. She enquired about having a lactose free diet prescribed by Lloyds. I have checked previous notes re lactose intolerance. No documentation on formal tests been undertaken regarding this. Patient self reports lactose intolerance.
PCT [redacted]
11:14
17/01/23 Dr Gp Stirling
16/01/2023 Triage Ms Lyndsay Mccracken - No Data Recorded
13/01/2023 Triage Ms Laura Kilpatrick
13/01/2023 Administration Listed for pct nurse to review why urine was obtained as requested by anp
[redacted] Kilpatrick
HCA
13/01/23
16:10hrs Dr Gp Stirling
13/01/2023 Triage Ms [redacted]
13/01/2023 Ongoing review no info as to why urine sample was obtained no nurse triage
RBC 955
? menstruating
can nursing staff please triage and asses what the patient requires.
12/01/2023 Third Party Consultation Ms [redacted]
12/01/2023 Document Image Docman Attachment
12/01/2023 Administration Microbiology Results Forth Valley Royal Hospital Microbiology Ms Sonja Kelly-Gutowski
11/01/2023 Triage Mr [redacted] - No Data Recorded
09/01/2023 Triage Ms [redacted] Cleary
09/01/2023 Seen by health care assistant
Georgina was at the clinic to give a urine sample for testing for urynalasis but was unable to provide this i gave her a bottle away to hand back in .
Michelle Cleary
HCA
09/01/2023
11.00 Ms [redacted] Cleary
06/01/2023 Triage Ms [redacted] Kilpatrick
06/01/2023 Failed encounter Georgina was listed for urine sample to be sent away to labs for infection?? However officer made writer aware that Georgina is currently at work and unable to come to appointment at this time. I have relisted Georgina in HCA clinic with regards to same.
[redacted] Kilpatrick
HCA
06/11/2023
10:59HRS Dr Gp Stirling
04/01/2023 Triage Ms Jane Rennie
04/01/2023 Self-referral Nurse Triage - MM - Nose bleeds, vomiting, and would like a urine test Ms [redacted] Rennie
30/12/2022 Triage Ms Jill Ramsay
30/12/2022 Consultation Seen in clinic this am, enquiring about a lactose free food list from pharmacy, I will look into this. Also stated throat was sore, nil redness or puss spots noted on back of throat, glands not swollen and temp 36.6, worsening advice given.
PCT SN JRamsay 30/12/2022 09.51 Dr Gp Stirling
30/12/2022 Triage Ms Jill Ramsay - No Data Recorded
22/12/2022 Third Party Consultation Mr [redacted] Mccallum
22/12/2022 Document Image Docman Attachment
22/12/2022 Administration Clinical Letter HMP Cornton Vale Health Care Marker Mr [redacted] Mccallum
22/12/2022 Third Party Consultation Ms Jane Rennie
22/12/2022 Document Image Docman Attachment
22/12/2022 Administration Clinical Letter HMP Cornton Vale Ophthalmology Ms [redacted] Rennie
22/12/2022 Triage Ms Jane Rennie
22/12/2022 Administration NOS Peebles [redacted] staff have enquired why Georgina is wearing blue tinted glasses and have asked for a medical marker to be completed. Optician and Team leader have been contacted. Ms [redacted] Rennie
21/12/2022 Triage Ms [redacted] Binnie
21/12/2022 Administration Glasses provided to Georgina and signed for

[redacted] Binnie
HCA
21/12/2022 Dr Gp Stirling
21/12/2022 Triage Mr [redacted] Mccallum
21/12/2022 Self-referral Nurse/Doctor - Lactrol dietaries. SJ Mr [redacted] Mccallum
13/12/2022 Third Party Consultation Ms [redacted] Rennie
13/12/2022 Document Image Docman Attachment
13/12/2022 Administration Clinical Letter HMP Cornton Vale Medical Marker Ms [redacted] Rennie
13/12/2022 Triage Ms [redacted] Binnie - No Data Recorded
13/12/2022 Third Party Consultation Mr [redacted] Mccallum
13/12/2022 Document Image Docman Attachment
13/12/2022 Result Results HMP Cornton Vale ECG Mr [redacted] Mccallum
13/12/2022 Other Dr [redacted] Kildare
13/12/2022 Ongoing review MOA - Kardexes rewritten to have one specifically for GF products and the other meds
Clinical Portal reviewed and can see eForm from Dieticians requesting [redacted] to have lactose free products - I will complete medical marker Dr [redacted] Kildare
13/12/2022 Surgery consultation Dr [redacted] Kildare
13/12/2022 Consultation GP Re[redacted]
1) Listed for review of chest pain
Vague history of chest discomfort over Sunday and some episodes again yesterday
Left sided, no radiation, no autonomic symptoms, no palps or dizziness
No other red flags
Pain worse with movement, not pleuritic in nature
Has had 2 ECGs taken which are entirely normal and show NSR with Qtc 444ms, nil concerning features
Concerned as has a history of heart murmur she says
Has still been able to be at [redacted] the laundry
No cough/SOB, no reflux symptoms

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No cough/SOB, no reflux symptoms

O/E
Comfortable at rest, completes sentences, no accessory muscle use
Some discomfort over chest wall
HS I + II + 0, regular - I cant hear a murmur today
Chest clear with good A/E to bases

Advised pain unlikely cardiac and more likely MSK/costochondritis component
Advised simple analgesia and could try Algesal rub

2) States has spoken with Dieticians and they have agreed to medical marker to be reinstated for her lactose free products - says they will be sending an eForm

I will review Clinical Portal this morning and see what has been sent through Dr [redacted] Kildare

12/12/2022 Other Dr [redacted] Sayers
12/12/2022 Ongoing review ECG received via email
ECG - SR 80/min - no ST changes
Normal ECG
Dr [redacted] Sayers

12/12/2022 Triage Mrs [redacted]
12/12/2022 Consultation 13.15hrs SPS staff called for her to be assessed for 'chest pain'
DTL C [redacted] attended to obtain observations-
observations all unremarkable.
Resp's 18
pulse 88
temp 36.8
SP02 100%
BP 126/86
[redacted] then escorted to Health Centre for an ECG by [redacted] and SPS staff.
Ecg completed by HCA [redacted] Binnie at 13.30hrs
I then attended to speak with Georgina, She has had ongoing chest pain from yesterday around 11am and became worse last night.
Pain is from left underarm over left breast area.
States worse when breathing in, states no physical/muscle injury.
No obvious wheeze and no coughing up sputum.
Talking in full sentences no SOB evident however Georgina states she feels short of breath at times.
Good colour.
Discussed possible breast tendemess due to time of month however [redacted] states it is not similar pain.
[redacted] has previous breast cysts however was unable to state is any of these have changed.
States that her regular analgesia is not helping with her pain however noted to only have 2 paracetamol tablets from SPS officers yesterday at 2pm and none since.
Reassurance given regarding observations, ECG states normal however no one able to [redacted] here- sent to GP on call Dr Sayers to review.
I told her once her ECG is reviewed and it comes back normal she can be seen at routine clinic for review of pain. However no urgent [redacted] at the moment, any changes Georgina is aware to let staff know.

[redacted]
TL PCT
12/12/22
14.35HRS Dr Gp Stirling

12/12/2022 Triage Ms [redacted] Rennie
12/12/2022 Self-referral Nurse - Pain in left side of chest Ms [redacted] Rennie
09/12/2022 Triage Ms Jade Binnie - No Data Recorded
09/12/2022 Triage Ms [redacted] Binnie - No Data Recorded
09/12/2022 Triage Ms [redacted]
09/12/2022 Ongoing review ANP mail
ANP K [redacted]
FBC normal range
cholesterole 4.6 in range
EGfR >59 normal value
ECG no changes
plasma glucose 5.1 normal vaule
U&Es normal range
LFT normal range
continue NPT

07/12/2022 Third Party Consultation Mr S [redacted] Mccallum
07/12/2022 Document Image Docman Attachment
07/12/2022 Administration Haematology Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum

07/12/2022 Third Party Consultation Mr Sharon Mccallum
07/12/2022 Document Image Docman Attachment
07/12/2022 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum

07/12/2022 Third Party Consultation Mr S [redacted] Mccallum
07/12/2022 Document Image Docman Attachment
07/12/2022 Result Results HMP Cornton Vale ECG Mr Sharon Mccallum

06/12/2022 Other Dr [redacted] Kildare
06/12/2022 ECG Normal See ECG taken for Psychotropic monitoring NSR @ rate 87bpm QTc 437ms, no acute changes Dr [redacted] Kildare

06/12/2022 Results recording Dr [redacted] Sayers
05/12/2022 Serum HDL cholesterol level = 1 mmol/L Target value for HDL >1.2 mmol/L. Dr Craig Sayers
05/12/2022 Serum LDL cholesterol level = 2.7 mmol/L mmol/l Dr [redacted] Sayers
05/12/2022 Serum triglycerides = 2 mmol/L Dr [redacted] Sayers
05/12/2022 Serum total cholesterol level = 4.6 mmol/L Dr [redacted] Sayers
05/12/2022 Serum lipids = <none> Dr [redacted] Sayers
05/12/2022 Glomerular filtration rate = mL/min Abnormal >59 Dr [redacted] Sayers
05/12/2022 Serum creatinine = 58 umol/L New assay in use from 28/11/2022.
Results may be up to 5% lower than previous. Dr [redacted] Sayers
05/12/2022 Serum urea level = 3.7 mmol/L Dr Craig Sayers
05/12/2022 Serum chloride = 109 mmol/L Abnormal Dr Craig Sayers

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05/12/2022 Serum potassium = 4.8 mmol/L Dr Craig Sayers
05/12/2022 Serum sodium = 139 mmol/L Dr [redacted] Sayers
05/12/2022 Urea and electrolytes = <none> Dr [redacted] Sayers
05/12/2022 Serum alkaline phosphatase = 94 U/L U/L - ALP Ref. Limit for patients <30 days old is 0-380 iu/L
ALP Ref. Limit for patients <17 years old is 0-425 iu/L
ALP Ref. Limit for adults (>17 years) is 0-130 iu/L Dr Craig Sayers
05/12/2022 Serum albumin = 40 g/L Dr [redacted] Sayers
05/12/2022 Serum total protein = 66 g/L Dr [redacted] Sayers
05/12/2022 Serum total bilirubin level = 6 umol/L Dr [redacted] Sayers
05/12/2022 [redacted] alanine aminotransferase level = 17 IU/L Serum ALT level - Dr Craig Sayers
05/12/2022 AST serum level = 16 U/L U/L Dr [redacted] Sayers
05/12/2022 Liver function test = <none> Dr [redacted] Sayers
06/12/2022 Results recording Dr Craig Sayers
05/12/2022 Blood Glucose = 5.1 mmol/L
05/12/2022 Biochemical test = 9.3 Dr Craig Sayers
05/12/2022 Blood Glucose = mmol/L <none>
05/12/2022 Triage Ms [redacted] Binnie - No Data Recorded
05/12/2022 Results recording Dr [redacted] Sayers
05/12/2022 Nucleated red blood cell count = 0 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Basophil count = 0.1 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Eosinophil count = 0.5 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Monocyte count = 0.7 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Lymphocyte count = 2 10*9/L 10^9/L Dr Craig Sayers
05/12/2022 Neutrophil count = 5.2 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Mean corpusc. Hb. conc. (MCHC) = 326 g/L Dr [redacted] Sayers
05/12/2022 Mean corpusc. haemoglobin(MCH) = 29.9 pg Dr [redacted] Sayers
05/12/2022 Packed cell volume = 0.389 ratio Dr [redacted] Sayers
05/12/2022 Mean corpuscular volume (MCV) = 91.5 fL fl Dr [redacted] Sayers
05/12/2022 Red blood cell (RBC) count = 4.25 10*12/L 10^12/L Dr [redacted] Sayers
05/12/2022 Platelet count = 310 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Total white cell count = 8.5 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Haemoglobin estimation = 127 g/L Dr [redacted] Sayers
05/12/2022 Full blood count - FBC = <none> Dr [redacted] Sayers
05/12/2022 Triage Ms [redacted] Binnie - No Data Recorded
05/12/2022 Triage Mr [redacted] Mccallum
05/12/2022 Self-refe[redacted]iew Glasses/Fix Glasses. Dentist - Need check up, Need new dentures or dentures fixed. (Added to both waiting lists) JR Mr [redacted] Mccallum
05/12/2022 Third Party Consultation Mr [redacted] Mccallum
05/12/2022 Document Image Docman Attachment
05/12/2022 Administration Clinical Letter HMP Cornton Vale ECG Mr [redacted] Mccallum
05/12/2022 Third Party Consultation Mr [redacted] Mccallum
05/12/2022 Document Image Docman Attachment
05/12/2022 Administration Clinical Letter HMP Cornton Vale GASS Mr [redacted] Mccallum
05/12/2022 Triage Ms Laura Kilpatrick
05/12/2022 Seen by health care assistant Seen Georgina in drug monitoring clinic with hca cleary
Clinical observations obtained and all within normal limits
Bloods obtained u&e's lft,fbc glucose and lipids
ECG obtained in for MOA to review same.
GASS SCORE 18
Mental health team emailed with regards to same.
[redacted] Kilpatrick
HCA
05/12/2022
09:45HRS

Dr Gp Stirling
02/12/2022 Third Party Consultation Mr [redacted] Mccallum
02/12/2022 Document Image Docman Attachment
02/12/2022 Administration Clinical Letter HMP Cornton Vale Glasses Receipt Mr [redacted] Mccallum
28/11/2022 Third Party Consultation Mr [redacted] Mccallum
28/11/2022 Document Image Docman Attachment
28/11/2022 Administration Microbiology Results Forth Valley Royal Hospital Microbiology Mr Sharon Mccallum
28/11/2022 Triage Mr [redacted] Mccallum
28/11/2022 Planned telephone contact 07/12/2022 @ 14:00
[redacted] Miller
Dietician
Georgina Smith / 131344
04/102/1991
07971 647998
Telephone Appointment
Mr [redacted] Mccallum
25/11/2022 Triage Ms [redacted] Quail
25/11/2022 Drug addiction therapy
S - Met with Georgie for Prison Healthcare Addictions Service one to one support. Verbal consent to proceed obtained.
B - [redacted] is not in receipt of any MAT.
A - Appeared kempt, maintained eye contact, behaved in keeping with setting, communication was bright, reactive, normal rate and tone. [redacted] let me know that she had a parole hearing on Monday but that she has been told that this has to go to an oral hearing. She is coping well with this. She admits that she is feeling anxious but that she is getting on with this. She remains drug free and has no cravings.
R -See in 4/52.
[redacted] Quail, Substance Use and Recovery Team HMPCV
10.00
Ms [redacted] Quail
25/11/2022 Triage Ms [redacted]

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25/11/2022 Medication - risk monitoring Spotcheck carried out on 24/11/22. Amitriptyline, Quetiapine ,cetirizine all counted correctly Ms [redacted]

24/11/2022 Triage Ms [redacted] Binnie - No Data Recorded

24/11/2022 Other Miss Je[redacted] Mckeich

24/11/2022 Consultation ANP J McKeich/L[redacted]
Received email from dietician asking if patient still wishes to be seen, see entries below re diet, emailed back advising appointment to go ahead. Miss [redacted] Mckeich

24/11/2022 Other Miss [redacted] Mckeich

24/11/2022 Consultation ANP J McKeich/L[redacted]
Seen patient, ongoing issues with acne, states lymecycline not helping, obvious inflammed papuoles to face, mainly chin states allergic to acne lotions such as benzoyl peroxide - swelling/itchy, agreed to prescription for 3mths doxycycline 100mg daily, Dermol 500 and QV wash. Worsening advice given.

Also c/o headaches
pain forehead between eye brows
states post concussion syndrome since childhood following head injury
describes pain as tight, grabbing pain
occasional numbness to right side of face
usually occurs at night
no benefit from paracetamol
seen optician, told eye sight was ok, states getting tinted glasses
no obvious photosensitivity during consultation - states expereinces this on occasion
reduced sensation to right side of jaw
normal facial/eye movement
PERL
appears to have normal motor function
no red flags
Agreed to trial pizotifen 500mcg at night for one week then increased to 1.5mg as per BNF.
Worsening advice given.

Patient requesting to see [redacted]
States recent mood changes, sometimes gets anry with peers
Has parole meeting today
stress/anxiety levels higher than normal
Listed for review by [redacted] Miss [redacted] Mckeich

22/11/2022 Triage Ms Rachel [redacted]

22/11/2022 High vaginal swab taken Ms [redacted]

22/11/2022 Seen in [redacted] health clinic Seen concerned about vaginal growths related to HPV and abnormal vaginal discharge, advises has had clear discharge for approx 1 year, on examination nil of concern visible on vaginal walls or cervix, white creamy discharge, PH normal, HVS taken.
Discussed HPV and the monitoring in place for this and normal discharge and hormone [redacted] changes.
R [redacted] - [redacted] health nurse
22/11/2022 14:38 Ms [redacted]

21/11/2022 Triage Ms [redacted]

21/11/2022 Consultation Seen in HC at 1430.

S; Self referal to see nurse.

B: Right eye socket pain and ongoing skin issues.
A: Patient states she is experiencing pain in the socket of her right eye which is radiating to the side of her head which is the site of a previous injury. Patient states she has been seen by optition who can see no evidence of trauma. Patient also states her skin is constantly covered in spots and states her medication is no longer working.
R: Have referreed patient to attend GP clinic and worsening advice given.

PCT
[redacted]
21/11/22
15:39 Dr Gp Stirling

17/11/2022 Triage Mr Sharon Mccallum

17/11/2022 Self-referral Nurse/Doctor - Not disclosed. SP Mr [redacted] Mccallum

07/11/2022 Triage Ms Susan Payne

07/11/2022 Consultation Seen in Health Centre.@ 10:00

S; Self referral
B:Gluten/lactose free diet. Prescribed Lymecycline for skin issues and peppermint oil for stomach.
A: Patient stated she has issues with food being stuck in her throat and feels nauseous after eating. Patient states she has been having these symptoms for three weeks. Patient states she only eat once a day as does not like the food given to her. She is on a gluten/lactose free diet.
Patient states her skin has broken out and feels sore.
Patient also stated she would like an appointment with the [redacted] health nurse to discuss changes which may be due to having HPV and is concerned about 'changes'.
Paient also states she feels under stress due to up and coming parole hearing.

R: I have requested patient to eat small portions of food more regularly and not restrict herself to one meal a day.
I have also asked the patient to drink more fluids and exercise to help with peristalsis.
I have listed patient to attend [redacted] health clinic and have given patient worsening advice and to refer again if symptoms continue over the next couple of weeks.
Patient states she dose not require to talk to a MH nurse for stress issues.

PCT [redacted]
07/11/22
10:07
Dr Gp Stirling

03/11/2022 Third Party Consultation Ms [redacted] Rennie
03/11/2022 Document Image Docman Attachment

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

03/11/2022 Administration Administration HMP Cornton Vale Ms [redacted] Rennie
03/11/2022 Triage Ms [redacted] Rennie
03/11/2022 Self-refe[redacted] Nurse - Skin Issues and Well person clinic - CK Ms Jane Rennie
27/10/2022 Triage Ms [redacted] Binnie - No Data Recorded
27/10/2022 Triage Mrs [redacted]
27/10/2022 Ongoing review ANP L.Kane
ANP Actions
see entry 27/10/22
had huge excess of laxido
bisocodyl more effective for georgina and she is utlising this with good effect
therefore stopped laxido as requested
27/10/2022 Triage Mr [redacted] Cooper
27/10/2022 Mental health review Peebles staff approached me with a carrier bag full of laxido sachets (at least four full boxes and a dozen or more un-opened sachets) asking me to dispose of them as Georgie no longer wanted them as her constipation was successfully being manage by using bisocodyl, I spoke to [redacted] to confirm this and it was correct. All of the laxido was handed into our pharmacy to be either re-used or disposed of.
Entry by [redacted] RMN, Medgen, 27/10/22.
Dr Gp Stirling
20/10/2022 Triage Mrs Sadie Mckay - No Data Recorded
18/10/2022 Third Party Consultation Ms [redacted] Rennie
18/10/2022 Document Image Docman Attachment
18/10/2022 Administration Kardex HMP Cornton Vale Pharmacy Ms [redacted] Rennie
18/10/2022 Triage Ms Keleigh Mournian - No Data Recorded
17/10/2022 Third Party Consultation Mr [redacted] Mccallum
17/10/2022 Document Image Docman Attachment
17/10/2022 Administration Clinical Letter HMP Cornton Vale Medical Marker Mr [redacted] Mccallum
17/10/2022 Triage Mr [redacted] Mccallum
17/10/2022 Drug addiction notification Addictions/PHAS - Not disclosed. NT Dr Gp Stirling
17/10/2022 Self-referral Nurse/GP - Not disclosed, Skin clinic - Not disclosed. NT Mr [redacted] Mccallum
17/10/2022 Triage Ms [redacted]
17/10/2022 Consultation Seen in HC @10:30

Patient states she is using 2 Duvets under herr mattress which is helping with back pain.

I have completed a medical marker to allow this to happen. Copies to be forwarded to SPS, prisoner and scanned onto Vision.
PCT [redacted]
11:51
17/10/22 Dr Gp Stirling
14/10/2022 Triage Ms [redacted]
14/10/2022 Consultation SPS informed [redacted] in Pharmacy 13/10/22 that [redacted] was using a duvet cover under her mattress as she has back pain. The duvet has been removed by SPS. Will put patient into app to see The PCT regarding pain in her back.
PCT [redacted]
12:05
14/10/22

[redacted] Dr Gp Stirling
14/10/2022 Other Miss [redacted] Mckeich
14/10/2022 Medication - risk monitoring Spotcheck carried out on 13/10/22. Lymecycline, Amitriptyline,and Quetiapine (all weekly medications) counted and correct Reminded to store all medications in the safe. Prn Bisacodyl and Cetirizine and Etodolac too. Miss [redacted] Mckeich
04/10/2022 Surgery consultation Dr [redacted] Kildare
04/10/2022 Ongoing review MOA - [redacted] no longer wanting the GF crispbreads prescribed - therefore discontinued and in its place would like GF white rolls and GF Part baked fibre rolls
Kardex ammended with PIP codes as requested Dr [redacted] Kildare
29/09/2022 Triage Mrs [redacted] Mckay
29/09/2022 Consultation I spoke with ANP [redacted] and have printed a list of substitutes for Georgina to choose from instead of crispbread. This has been sent to Peebles House for her.

[redacted] McKay
PCT nurse
11:47am Mrs [redacted] Mckay
29/09/2022 Consultation Georgina asking if her diet can be changed as she gets the crispbread, which is prescribed through lloyds, but states cannot eat it. Has tried, but finds it is not tasty. Will list with ANP/GP to discuss, as there are no dieticians, and I cannot prescribe.

Also, stating she has been getting pains in both sides of her abdomen for some time. Observations BP 122/73 P78 T36.1 02 sats 98%
[redacted] McKay
PCT nurse
9:33am Mrs [redacted] Mckay
28/09/2022 Triage Ms Rebekah Weir - No Data Recorded
27/09/2022 Triage Mr [redacted] Mccallum
27/09/2022 Self-referral Nurse/GP - If possible to see dietitian about my diet choices. LS Mr Sharon Mccallum
23/09/2022 Triage Ms S [redacted] Payne
23/09/2022 Consultation Seen In Health Centre for covid and flu vaccine.

Spikevax Moderna Right arm.
Lot 200010A
EXP 21/03/2023
Flu Cell base Quadrivalent Left arm

LOT440051A
EXP 04/23

Administered with no issues . worsening advice give.#

Pct [redacted]
09.47

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09:47
23/09/22 Dr Gp Stirling
20/09/2022 Triage Ms S[redacted] Payne
20/09/2022 Consultation Seen in Health centre:

Follow up review of back pain from consultation on 17/09/22.

Patient states she still have very slight niggling pain in her front lower rib area. She is moving freely, it is not causing her sleep deprivation and she is still able to work.

I have given her worsening advice. Do not feel she require to see GP at this time.

PCT
[redacted]
20/09/22
11:21 Dr Gp Stirling
17/09/2022 Triage Ms [redacted]
17/09/2022 Consultation Seen in peebles:

Patient informed HCA [redacted] that she was experiencing back pain on 16/09/22. Negative for urinalysis.

When I attended patient today and asked what I could do for she couldnt remember at first then said she had rib pain front and back.

Nil diatery changes
Nil medication changes.

She is able to walk and move freely so see [redacted] clinical reason to see a GP this weekend.
Will list her for nurse clinic on 20/09/22 for a review.

PCT
[redacted]
11:39
17/09/22 Dr Gp Stirling
16/09/2022 Triage Ms [redacted] Kilpatrick
16/09/2022 Urinalysis = no abnormality = Urine sample left in pharmacy to be tested for infection? Same done and no infection at this time. I will List Georgina in clinic to see if still has ongoing symptoms of a uti. Dr Gp Stirling
16/09/2022 Triage Mrs Sylvia Barclay
16/09/2022 Mental health review Late entry from 14/09/2022 due to being unable to access vision. Discussed at MDMHT. Meeting chaired by Unit Manager [redacted]
S Barclay
MH Nurse
16/09/2022
Mrs Sylvia Barclay
16/09/2022 Third Party Consultation Ms [redacted] Rennie
16/09/2022 Document Image Docman Attachment
16/09/2022 Administration Clinical Letter HMP Cornton Vale Mental Health Ms [redacted] Rennie
15/09/2022 Triage Ms Nichola Docherty
15/09/2022 Administration Letter sent to Georgina advising of real location to named nurse. [redacted] spoke with Georgina briefly on 11th and Georgina advised of being more settled after situation earlier in the week. Due to ongoing need for guidance and reassurance, monthly contact is appropriate to contain levels of worry.

Nichola Docherty
MHN
15/09/22
1900hrs Ms Nichola Docherty
14/09/2022 T[redacted]ron Mccallum
14/09/2022 [redacted] Nurse/GP - Urine Infection. LS Mr [redacted] Mccallum
08/09/2022 Triage Ms Nichola Docherty
08/09/2022 Had a chat to patient Georgina advised she was feeling very tearful this evening and this was in response to having been into orderly room today. This was due to the fact she had utilised a fellow peers phone to phone the lady's relative after she had taken unwell. Georgina stated she had thought she was doing a helpful thing however I did inform her this was a complete breach of confidentiality and not her place to make these phonecalls. Giorgina is worried her fellow peer will be angry with her when she returns to Peebles House. I have offered reassurance this evening and advised she should learn from today's lesson and not repeat the same behaviour in the future. Will have a chat again with Giorgina on Sunday to check if she has settled. No significant distress, slightly anxious however able to articulate herself well and responded well to reassuring conversation. No issues relating to risk reported.

Nichola Docherty
MHN
08/09/22
1700hrs Ms Nichola Docherty
02/09/2022 Triage Ms [redacted] Kilpatrick
02/09/2022 Consultation Georgina was listed in clinic for a sitting and standing BP however on review of notes G.P has reviewed same and Georgina has also been sent letter to make aware of same.
Laura Kilpatrick
HCA
02/09/2022
11:23HRS Dr Gp Stirling
02/09/2022 Triage Ms L[redacted] Kilpatrick - No Data Recorded
30/08/2022 Triage Ms [redacted] Kilpatrick
30/08/2022 Letter encounter to patient Letter sent to make Georgina aware of normal bloods and normal bp as documented below on the 30/08/2022

[redacted] Kilpatrick
HCA
30/08/20222
16:49HRS Dr Gp Stirling

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30/08/2022 Triage Mr [redacted] Mccallum
30/08/2022 Next hospital appointment 05/09/2022 @ 13:00
Stirling Community Hospital
Physiotherapy
Georgina Smith / 131344
04/12/1991
Normal
Mr [redacted] Mccallum
30/08/2022 Other Dr [redacted] Kildare
30/08/2022 Ongoing review MOA - listed in Actions - states she has Asthma but has not been on treatment for a few years - not entry that Georgie reports its well controlled
Bloods entirely normal as is L&S BP - no further action needed at this time but can be listed for GP/ANP review if needed for on going symptoms Dr [redacted] Kildare
30/08/2022 Third Party Consultation Mr [redacted] Mccallum
30/08/2022 Document Image Docman Attachment
30/08/2022 Administration Kardex HMP Cornton Vale Pharmacy Mr Sharon Mccallum
29/08/2022 Triage Ms [redacted] Weir
29/08/2022 O/E - temperature level = 36.4 degC Dr Gp Stirling
29/08/2022 Pulse oximetry 98 % Dr Gp Stirling
29/08/2022 O/E - pulse rate 92 beats/min Dr Gp Stirling
29/08/2022 14:27.00 BP 126 / 77 taken Standing from Left Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
29/08/2022 14:27.00 BP 122 / 80 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
29/08/2022 Seen by health care assistant Seen in health centre for sitting and standing blood pressure as requested. Observations as documented.

[redacted] Weir
HCA
29/08/2022
1427HRS Dr Gp Stirling
26/08/2022 Third Party Consultation Ms [redacted] Rennie
26/08/2022 Document Image Docman Attachment
26/08/2022 Result Results Haematology Ms [redacted] Rennie
26/08/2022 Third Party Consultation Ms [redacted] Rennie
26/08/2022 Administration Clinical Letter HMPYOI Stirling Clinical Biochemistry Ms [redacted] Rennie
26/08/2022 Triage Ms [redacted]
26/08/2022 Consultation Requesting review of blood pressure and blood result by GP/ANP 30/08/22

PCT
[redacted]

15:53
26/08/22 Dr Gp Stirling
26/08/2022 Third Party Consultation Mr [redacted] Mccallum
26/08/2022 Administration Haemato[redacted]sults Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
26/08/2022 Third Party Consultation Mr [redacted] Mccallum
26/08/2022 Document Image Docman Attachment
26/08/2022 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
26/08/2022 Triage Ms [redacted] Cleary
26/08/2022 10:43.00 BP [redacted]10 / 71 taken Standing Cuff: Standard recall due: O/E - blood pressure reading Ms [redacted] Cleary
26/08/2022 O/E - pulse rate 92 beats/min STANDING Ms [redacted] Cleary
26/08/2022 Pulse oximetry 97 % STANDING Ms Michelle Cleary
26/08/2022 O/E - temperature level = 35.5 degC Ms Michelle Cleary
26/08/2022 O/E - pulse rate 84 beats/min Ms [redacted] Cleary
26/08/2022 Pulse oximetry 99 % Ms [redacted] Cleary
26/08/2022 10:35.00 BP 109 / 74 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Ms [redacted] Cleary
25/08/2022 Third Party Consultation Ms [redacted] Rennie
25/08/2022 Administration Clinical Letter HMPYOI Stirling Genetic Services Ms [redacted] Rennie
25/08/2022 Triage Miss Sarah Hogg
25/08/2022 Consultation S- seen in treatment room for Asthma review.
B- PMX Asthma.
A- Georgina has nil prescibed therapy for asthma at present. Reports that asthma is well controlled. Has nil concerns for same at present. Aware to contact nursing staff if any [redacted]. Also discussed heart murmmer. Reports nil concerns at present. Has had dizzy spells in past, is to have blood pressure monitored and GP to review recent blodds and await plan. Cardiology care plan to be typed and given to patient also. Patient in agreement with care plans and current plan. Worsening advice given.
R- Annual reviews, await further plan, if any from GP. Patient aware. Worsening advice given.

SN S Hogg
PCT 25/08/22 1448
25/08/2022 Third Party Consultation Ms [redacted] Rennie
25/08/2022 Document Image Docman Attachment
25/08/2022 Administration Clinical Letter HMP Cornton Vale Genetic Services Ms [redacted] Rennie
25/08/2022 Results recording Dr Craig Sayers
24/08/2022 Serum C reactive protein level = mg/L <5 Dr [redacted] Sayers
24/08/2022 Glomerular filtration rate = mL/min Abnormal >59 Dr [redacted] Sayers
24/08/2022 Serum urea level = 2.2 mmol/L Abnormal Dr [redacted] Sayers
24/08/2022 Serum creatinine = 63 umol/L Dr [redacted] Sayers
24/08/2022 Serum chloride = 103 mmol/L Dr [redacted] Sayers
24/08/2022 Serum sodium = 138 mmol/L Dr Craig Sayers
24/08/2022 Serum potassium = 4.2 mmol/L Dr [redacted] Sayers
24/08/2022 Urea and electrolytes = <none> Dr [redacted] Sayers
24/08/2022 Serum albumin = 40 g/L Dr [redacted] Sayers
24/08/2022 Serum total protein = 67 g/L Dr [redacted] Sayers
24/08/2022 AST serum level = 18 U/L U/L Dr [redacted] Sayers
24/08/2022 Serum alanine aminotransferase level = 14 IU/L Serum ALT level - Dr [redacted] Sayers

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24/08/2022 Serum alkaline phosphatase = 91 U/L U/L - ALP Ref. Limit for patients <30 days old is 0-380 iu/L
ALP Ref. Limit for patients <17 years old is 0-425 iu/L
ALP Ref. Limit for adults (>17 years) is 0-130 iu/L Dr [redacted] Sayers
24/08/2022 Serum total bilirubin level = 6 umol/L Dr [redacted] Sayers
24/08/2022 Liver function test = <none> Dr [redacted] Sayers
24/08/2022 Results recording Dr [redacted]g Sayers
24/08/2022 Nucleated red blood cell count = 0 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Basophil count = 0.1 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Eosinophil count = 0.4 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Monocyte count = 0.5 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Lymphocyte count = 1.8 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Neutrophil count = 4.1 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Mean corpusc. Hb. conc. (MCHC) = 332 g/L Dr [redacted] Sayers
24/08/2022 Mean corpusc. haemoglobin(MCH) = 29.1 pg Dr Craig Sayers
24/08/2022 Packed cell volume = 0.398 ratio Dr [redacted] Sayers
24/08/2022 Mean corpuscular volume (MCV) = 87.9 fL fl Dr [redacted] Sayers
24/08/2022 Red blood cell (RBC) count = 4.53 10*12/L 10^12/L Dr Craig Sayers
24/08/2022 Platelet count = 296 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Total white cell [redacted] = 6.8 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Haemoglobin estimation = 132 g/L Dr [redacted] Sayers
24/08/2022 Full blood count - FBC = <none> Dr [redacted] Sayers
24/08/2022 Triage Ms [redacted] Cleary - No Data Recorded
24/08/2022 Other Miss [redacted] Mckeich - No Data Recorded
24/08/2022 Triage Ms Eilish Hennessy
24/08/2022 Seen by health care assistant Seen in HCA clinic for bloods. [redacted] gave verbal permission for bloods to be obtained. Bloods obtained and will be sent to labs.

E Hennessy - HCA
24/08/2022
10:45 Dr Gp Stirling
23/08/2022 Third Party Consultation Ms [redacted] Rennie
23/08/2022 Document Image Docman Attachment
23/08/2022 Administration Clinical Letter HMPYOI Stirling Genetic Services Ms [redacted] Rennie
23/08/2022 Triage Mrs [redacted]
23/08/2022 Ongoing review ANP L [redacted]
review of letter from genetic councillor
her extended family history was traced
it does not look like she has an inherited susceptability to cancer
however they have not been able to find out any more information about her [redacted] or [redacted] who were diagnosed with breast cancer in their 30's
If they could confirm her [redacted] and [redacted] were diagnosed with breast cancer at such a young age her lifetime risk may be moderately increased, if confirmed she would be eligible for screening from the age of 35
georgina has to contact them again in 5 years time and they will then see if there is any further information they can find and decide if georgina requires to be referred for assessment at that time

If she finds out any further information regarding her FH then we can inform genetics

I have asked admin to send copy of letter to patient as it is addressed to her
23/08/2022 Third Party Consultation Ms [redacted] Rennie
23/08/2022 Administration Clinical Letter HMP Comton Vale Genetic Services Ms [redacted] Rennie
23/08/2022 Triage Ms [redacted]
23/08/2022 Occupational therapy Mental Health Occupational Therapy - Seen for planned contact - [redacted] reported that her RMT meeting is today, and is feeling anxious regarding same due to recently being put on report for allowing another prisoner access to her phone. We discussed activities that [redacted] can engage with this morning to help manage her anxiety and also self care activities that [redacted] can participate in following her RMT meeting to help manage her emotion. Session was brief due to arrival of lunch, agreed that I would meet with [redacted] next week for follow up. Ms [redacted]
23/08/2022 Triage Ms Laura Kilpatrick
23/08/2022 [redacted] by health care assistant Seen Georgina in clinic for bloods, unable to obtain managed to get flash back however not enough to fill the tube. Georgina stated that she has not had much to drink, encouraged to drink more fluids. Relisted for further appointmer [redacted] Kilpatrick
HCA
23/08/2022
10:12HRS Dr Gp Stirling
23/08/2022 Triage Ms [redacted] Kilpatrick
23/08/2022 09:56.00 BP 128 / 77 taken Standing Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
23/08/2022 09:54.00 BP 122 / 75 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
23/08/2022 Pulse oximetry monitoring 98 % Dr Gp Stirling
23/08/2022 O/E - pulse rate 91 beats/min Dr Gp Stirling
22/08/2022 Triage Ms [redacted] - No Data Recorded
21/08/2022 Triage Mr [redacted] - No Data Recorded
19/08/2022 Triage Ms Susan [redacted]
19/08/2022 Consultation Seen in Health centre.

Patient states she has been having dizzy spells for one week when going from sitting to standing.
Sitting and standing blood pressure was taken

Sitting
BP 128/75
resps 16
sats97%
pulse 82
temp 36.8

Standing
BP 123/83
resps 16

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BP 123/83
resps 16
temp 36.5
pulse 90
Sats 97%

Checked ears for any infection or inflamation. Nil present.
Asked patient if she required an eye test. None required as had a recent eye test.

Have advised patient to keep well hydrated.
Advised patient if she were to feel unwell to report back to the PCT.
Repeat sitting and standing observation to taken twice weekly for two weeks from 22/08/22 and blood LFTs U&Es TFTs and CRP to be taker on 22/08/22

[redacted]
19/08/22
14:52
[redacted]
18 Dr Gp Stirling

19/08/2022 Triage Miss Sarah Hogg - No Data Recorded
16/08/2022 Triage Mr [redacted] Mccallum
16/08/2022 Self-referral Nurse/GP - Dizzy spells everytime I stand up. LS Mr [redacted] Mccallum
09/08/2022 Triage Dr Imogen [redacted]
09/08/2022 Seen in [redacted] clinic Seen in SH clinic. HPV positive on recent smear, so on 12 month smears at the moment. Reassured about that and discussed HPV. Also discussed family hx of throat cancer [redacted] and [redacted] - discussed no need to do anything in light of that information. Dr [redacted] GMC 7421177 Dr Imogen [redacted]
08/08/2022 Third Party Consultation Ms [redacted] Rennie
08/08/2022 Document Image Docman Attachment
08/08/2022 Administration Clinical Letter HMPYOI Stirling Breast Screening Ms Jane Rennie
08/08/2022 Third Party Consultation Mrs [redacted]
08/08/2022 Document Image Link broken, document rescanned and resubmitted to Vision.
08/08/2022 Administration Clinical Letter HMP Cornton Vale Breast Screening Mrs [redacted]
01/08/2022 Triage Ms Nichola Docherty
01/08/2022 Had a chat to patient Spoke with Georgina in Peebles today in the absence of her allocated MH nurse [redacted] Beattie. Had beer previously decided within MHT that Georgina could be offered the opportunity to secure [redacted] if she wished. Georgina has advised sh is due to attend a meeting regarding the possibility of being transferred to one of the community facilities within Dundee. This should be discussed in August with SPS. Georgina has advised she will await the outcome of this and should she be moving on then she will not require Psychology input within Cornton Vale. She has agreed to update us of her own accord. No further MH input from SSN Beattie is required at this time. No significant [redacted] being raised by Georgina or Peebles staff. Continues to attend her work party. DISCHARGED from caseload.

Nichola Docherty
[redacted]
01/08/22
1530hrs Ms Nichola Docherty
29/07/2022 Triage Ms [redacted] Cleary - No Data Recorded
29/07/2022 Triage Ms [redacted] Quail
29/07/2022 Drug addiction therapy
S - Met with [redacted] for Prison Healthcare Addictions Service one to one support. Verbal consent to proceed obtained.
B - [redacted] is not in receipt of any MAT.
A - Appeared kempt, maintained eye contact, communication was bright, reactive, normal rate and tone. I met with Georgie at her request. [redacted] has been in prison 10 years now and is due for parole again soon. She has been in the community once before but she lasted 7 weeks. She admitted that she drinks in the community when she has any problems which she feels that she cannot cope with. She is very aware that this is not a normal way to deal with issues and is something that she wants to work on. We have agreed that we will work through some coping strategies and hopefully these will help her in the future.
R -See in 2/52.
[redacted] Quail, Substance Use and Recovery Team HMPCV
11.00
Ms Kathleen Quail
29/07/2022 Third Party Consultation Ms Jane Rennie
29/07/2022 Document Image Docman Attachment
29/07/2022 Administration Clinical Letter HMP Cornton Vale Medical Marker Ms [redacted] Rennie
28/07/2022 Other Miss [redacted] Mckeich - No Data Recorded
28/07/2022 Other Miss [redacted] Mckeich
28/07/2022 Consultation ANP actions, gluten free choices prescribed on prescription sheet as per guidance from dietician. See email reponse below from same:
"Thanks for sending through Georgina's food and symptom diaries.
I've spent some time going through all of these to try and assess what the current situation is and if there are any obvious triggers. The earlier referral by Dr. Kildare described the main symptoms as pain, bloating and intermittent constipation but having looked at Georgina's diaries she's reporting very regular episodes of loose stools with odd days of no movement (understandable given the amount of loose stools). She also refers to significant numerous other symptoms which are obviously distressing for her.
Most of her reported symptoms could be caused by allergies or intolerances. Unfortunately we don't have an allergy service within FV and no specialist allergy dietitian. If there's a concern about possible anaphylactic reactions then it would be better to refer her to the Allergy Service in Glasgow. The only other way to check for intolerances that cause symptoms like rashes/ulcers etc is to do a full exclusion diet, something that's unfortunately just impossible to carry out in the prison environment. Even for free living individuals it's usually just too overwhelming and challenging!
Loose stools could potentially be caused by food intolerances and possibly linked to the other symptoms but having looked at her food diar her diet is very low in fibre and very high in fat both of which could be causing it. I'm happy to keep Georgina on my waiting list (it's about 5 months at the moment unfortunately) for a telephone/Near Me consultation as long as she has realistic expectations of what I can offer.
Georgina mentioned a couple of times in her diary about doing a trial and being fed up of it? Is the trial just writing her diary or was there a medication/food trial she was doing at the same time?
Given the list of symptoms that Georgina has it's probably reasonable to allow her continued access to gluten free foods and soya milk sol based on what she's telling us because there's not really any way of checking her claims.

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Georgina Smith 04/12/1991 662/91/440 Georgina has it's probably reasonable to allow her continued access to gluten free foods **All Consultations**

based on what she's telling us because there's not really any way of checking her claims.
If you could add markers on for these and maybe mention that fat/lack of fibre can be a cause then I'll keep her on my waiting list and opt her in closer to the time - she might not need or want to be seen if these things have been changed.
Hope this helps - let me know your thoughts and we can take it from there.
Best wishes
[redacted]
Lynn [redacted]
Community Dietitian
Stirling Community Hospital
Can nursing staff please follow up in advise from dietician anout diary/loose stools,fat & fibre.
Miss [redacted] Mckeich

28/07/2022 Triage Ms Jill Ramsay
28/07/2022 Pt advised re gluten free diet Advice Diet Prescribed gluten free diet Dr Gp Stirling

28/07/2022 Triage Ms Jill Ramsay
28/07/2022 Consultation Seen in clinic, gluten free foods chosen off prescription list. Total of 14 points used. review appointment made for 2/52 to review how diet list is going.
Jill Ramsay PCT SN 28/07/2022 14:38 Dr Gp Stirling

26/07/2022 Triage Ms [redacted]
26/07/2022 Occupational therapy Mental HEalth Occupational Therapy - Seen for planned OT contact at Georgies request. [redacted] stated that she feels she is requiring more regular emotional support and feels let down by SPS and NHS services in prison. Georgies main concerns at present are [redacted] to her physical health and lack of progression through RMT. Described feeling anxious about the possibility she has cancer due to raised HPV levels and changes to her cycle. Reports menstrual bleeding lasting 2-3 weeks and thick gel like discharge. Advised [redacted] that if these symptoms are new she should submit a referral to [redacted] health nurse for further examination or reassurance. Georgie dismissive of this advice. Stated that she had received a letter informing her that she is high risk of cancer, and we discussed how this can lead to heightened anxiety and increased vigilance towards potential symptoms. [redacted] also voiced that she feels other people are being prioritised for progression/ rehabilitation , and this is making her feel both angry and uncared for. [redacted] was encouraged to focus on issues that are within her control and to try not to compare her situation to other prisoners as this is likely to increase her frustration and have a negative impact on her mental wellbeing. Focussed on identifying positive aspects of routine that [redacted] is developing in prison, and how this contributes to her rehabilitation and readiness for living more independently on liberation. OT Plan - Liaise with Named Nurse regarding ongoing support. Fortnightly OT contact to be offered for emotional support. Ms [redacted]

12/07/2022 Triage Ms [redacted]
Letter on: 12/07/2022 type: Referral Smear result

05/07/2022 Triage Ms [redacted] Kilpatrick
05/07/2022 Seen by health care assistant Seen Georgina in Peebles house made aware of xray results as documented below.

Laura Kilpatrick
HCA
05/07/2022
20:22HRS Dr [redacted] Sayers

05/07/2022 Other Miss [redacted] Mckeich
05/07/2022 Consultation ANP actions, review xray of cervical spine, no significant bony or joint abnormality found. Can nursing staff please inform patient of same. Miss [redacted] Mckeich

05/07/2022 Third Party Consultation Mr [redacted] Mccallum
05/07/2022 Document Image Docman Attachment
05/07/2022 Administration Clinical Letter HMP Cornton Vale Dental General Mr [redacted] Mccallum

04/07/2022 Third Party Consultation Ms [redacted] Rennie
04/07/2022 Document Image
04/07/2022 Result Results X-Ray Ms [redacted] Rennie

04/07/2022 Triage Ms L [redacted] Kilpatrick
04/07/2022 Seen by health care assistant [redacted] Georgina in her cell in Peebles house, writer Made Georgina aware of wait for Dietetics 16-20 weeks, as advised by admin staff.
[redacted] Kilpatrick
HCA
04/07/2022
16:09HRS
Dr [redacted] Sayers

04/07/2022 Third Party Consultation Mr [redacted] Mccallum
04/07/2022 Administration Clinical Letter HMP Cornton Vale Radiology Mr [redacted] Mccallum

30/06/2022 Triage Mrs [redacted] Watt
30/06/2022 Mental [redacted] review Caught up briefly with [redacted] this lunchtime in Peebles. She was voicing her her [redacted] re lack of information on ongoing tests/requests. Stated she feels abandoned and that noone was listening to her.
I have appointed her to Dr Swinson's clinic for a medication review, she reports she has been having disturbe sleep and increased anxiety.
Appointment to see [redacted] health nurse for feedback on Smear test.
I have advised her again that her X-Ray result was not back.
Admin will find out waiting time for Dieticians and will advise staff so we can give [redacted] that information.
Dentist: Admin will check out waiting time for dentist and inform staff to pass on information to [redacted]
Letter sent to [redacted] to inform her of this.

[redacted] Watt
SSN MH
30/06/22 15:05 Dr [redacted] Sayers

30/06/2022 Triage Mrs [redacted] Watt - No Data Recorded

29/06/2022 Triage Ms [redacted] Kilpatrick
29/06/2022 Letter encounter to patient Letter sent to Georgina to make aware of change in shampoo

[redacted] Kilpatrick
HCA
29/06/2022
16:22HRS Dr [redacted] Sayers

29/06/2022 Triage Ms [redacted]

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[redacted]

Georgina Smith 04/12/1991 662/91/440 [redacted] **Consultations**

29/06/2022 Ongoing review ANP action
ANP K [redacted]
patient requeting a change of shampoo from dermax to dandrazole as finding current shampoo drying to her hair

I have prescribed Ketoconazole 2%shampoo as is same active ingredients. use 2-3 times per week
29/06/2022 Triage Ms Kerly [redacted] No Data Recorded
28/06/2022 Triage Ms [redacted] Kilpatrick
28/06/2022 Administration Listed in nurse clinic to review scalp, Listed in SH clinic for smear results.
[redacted] Kilpatrick
HCA
28/06/2022
20:14HRS Dr Gp Stirling
28/06/2022 Other Miss [redacted] Mckeich - No Data Recorded
28/06/2022 Other Miss [redacted] Mckeich
28/06/2022 Consultation ANP actions, patient requesting result of back xray and smear result. Portal and [redacted] store checked, no results reported on back as yet. Suggest referral to SH clinic for result smear.
Patient also requesting prescription ketoconazole shampoo in place of dermax. Can nursing staff please assess patient's scalp to see in there is a clinical need for this shampoo - such as fungal infection to scalp/dermatitis, if so happy to prescribe. Miss [redacted] Mckeich
28/06/2022 Other Miss Jackie Mckeich - No Data Recorded
27/06/2022 Triage Ms Jill Ramsay - No Data Recorded
27/06/2022 Triage Ms [redacted] Rennie
27/06/2022 Self-referral Doctor and Well Woman - KJM - spine x-rays and smear results
23/06/2022 Triage Mr [redacted] Cooper - No Data Recorded
21/06/2022 Triage Mrs Louise [redacted]
21/06/2022 Ongoing review [redacted] L [redacted]
Asked by pharmacy to prescribe paracetamol 1 week course as patient is covid positive
same done
21/06/2022 Triage Ms [redacted] Cleary - No Data Recorded
21/06/2022 Triage Ms Jill Ramsay
21/06/2022 Consultation not seen in clinic todayas covid positive and stated appointment wasn't urgent, advised her to put another slip in.
Jill Ramsay PCT SN
21/06/2022 10.54
Dr Gp Stirling
21/06/2022 Triage Dr [redacted] Murray
21/06/2022 Failed encounter listed for SH clinic but isolating with covid so not seen. I will ask R [redacted] to relist. Dr Imogen [redacted]
20/06/2022 Triage Ms [redacted] Rennie
20/06/2022 Referral to mental health team Struggling emotionally - JR Ms [redacted] Rennie
20/06/2022 Triage Ms Claire Mcbeath - No Data Recorded
19/06/2022 Triage Ms [redacted] Mckay
19/06/2022 Consultation Contacted by SPS at 11:00hrs to advise that Georgina has tested positive for covid and is now in isolation. SPS mentioned that Georgina has previously had all her COVID vaccinations
[redacted] McKay (RN)
19/08/2022 @ 11:05 Dr Gp Stirling
14/06/2022 Triage Ms [redacted] Rennie
14/06/2022 Next hospital appointment Forth Valley - X-Ray - 17/06/2022 @ 09:20
13/06/2022 Triage Ms Eilish Hennessy
13/06/2022 Seen by health care assistant Georgina was seen by HCA Eilish and SN Keyleigh in clinic for opening of letter. Letter was response to complaint, no concerns raised by Georie, was satisfied with letter.

E Hennessy - HCA
13/06/2022
21:20 Dr Gp Stirling
13/06/2022 Triage Mrs [redacted]
04/06/2022 Joint consultation with georgina, myself and claire Mcbeath.
Georgie expressing that she has a rash on her body from not receiving her requested diet- on examination, [redacted] see. 2 x small red hair folicles.
States blisters all over her mouth- again, Nill evident.
Throat slightly red, advised to take paracetamol at this time.
[redacted] happy to await dietician appointment as her food diary had many different food types and symptoms and we require specialist advice regarding same.
[redacted] also expressed about her lump at the top of her neck- already listed for ANP to review same.
C reid sn Dr Gp Stirling
09/06/2022 Third Party Consultation Ms [redacted] Rennie
09/06/2022 Document Image Docman Attachment
09/06/2022 Administration Clinical Letter HMP Corton Vale X-Ray Ms [redacted] Rennie
09/06/2022 Triage Ms Keleigh Mournian
09/06/2022 Consultation ATSP for throat swelling and headache. On examination observations as follows; BP 116/81 T 37.5 P 86 SPO2 97%
Throat slightly red on examination. Advised to take paracetamol for pain.
Keyleigh Mournian
PCT
09.06.2022
20.44 Dr Gp Stirling
08/06/2022 Third Party Consultation Mr Sharon Mccallum
08/06/2022 Administration Link broken, document rescanned and resubmitted to Vision.
Mr [redacted] Mccallum
08/06/2022 Triage Mrs [redacted] Kane

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

08/06/2022 Consultation ANP L.Kane
Patient seen due to swelling top of back
OE some swelling evident cervical area
boney prominence felt however has history of kyphosis
reasonable ROM of neck however states pain +++
patient states pain worsened over last 3 weeks
also has chronic back pain
no neuropathic type pain described
patient requesting analgesia as celecoxib and paracetamol not effective
wishes NSAID that she has not tried before
prev tried Naproxen, diclofenac, meloxicam, ibuprofen
therefore trial of etodolac 600mg OD
due to significant increase in pain, swelling and boney prominence i have referred for C- spine XR
Patient happy with this

08/06/2022 Triage Ms Rachel [redacted]
19/04/2022 Recall on 19/04/2023 for Cervical smear: negative with Ms [redacted] Status: Complete
19/04/2022 Cervical smear: negative HPV - Human papillomavirus test positive recall due: 19/04/2023 1 year recall Ms [redacted]
08/06/2022 Triage Ms [redacted] Rennie - No Data Recorded
06/06/2022 Triage Mr [redacted] Mccallum
06/06/2022 Self-referral Well Person Clinic - Discuss smear results, support and advice for next steps. NT Mr [redacted] Mccallum
03/06/2022 Triage Mrs [redacted] Mckay
03/06/2022 Consultation Seen for nurse referral form. She states has put in lots of nurse referral forms when she is not well, but only 6 recorded and have been actioned since January 2022. I have reassured Georgina that she has [redacted] referred to dietician and just waiting or appointment. Georgina complaining of sore back, has a curvature and I note her neck is quite swollen and when assessing it, it became sore and pain shot to the bottom of her back. Advised is in for seeing MO on Tuesday and this can be looked at then.She is already on celecoxib 200mg and amitriptylline 75mg. Feels she needs her quetiapine looked at, therefore have referred her to the mental health team.

Also complaining of a sore throat and mouth. On examination, her throat was swollen and slightly red, also, it was noted she has got small blisters in her mouth, tongue and lips. For MO to assess all of this. Georgina happy with consultation.

[redacted] McKay
PCT nurse
1040am Mrs [redacted] Mckay
02/06/2022 Triage Ms Eilish Hennessy
02/06/2022 Seen by health care assistant Georgina has been written a letter to advise of the refferal put in place for dietician. Furthermore Georgina has advised of back pain following discussion with Charge Nurse C McBeath Georgina has been listed for primary care review for 03/06/2022 and placed on referal list.

Eilish Hennessy
HCA
02/06/2022
16:15 Dr Gp Stirling
02/06/2022 Triage Mr [redacted] Mccallum
02/06/2022 Self-referral Nurse/GP - Curved spine inflamed and painful, Back and shoulders swollen up. DM Mr [redacted] Mccallum
01/06/2022 Triage Ms Eilish Hennessy
01/06/2022 Seen by health care assistant Spoke to Georgina at medication tonight at the request of SSN C [redacted] Explained to Georgina that a refferal had been put in place for dietician due to the submission of food diary at the request of ANP. Georgina was accepting of this information and understood. Georgina advised she was experincing back pain due to a spinal condition. Georgina was advised to put in NRI and primary care team would pick this up. No further [redacted] at present.

Eilish Hennessy - HCA
01/06/2022
21:20 Dr Gp Stirling
01/06/2022 Triage Ms Jill Ramsay - No Data Recorded
30/05/2022 Administration Ms S [redacted] Kelly-Gutowski
30/05/2022 Self-referral Dentist. Ms Sonja [redacted]
27/05/2022 Other Miss J [redacted] Mckeich
27/05/2022 Consultation ANP actions, given copy of food diary patient has completed, had issue regarding coeliac, unable to do test as patient not agreeable to eating normal diet for 6 weeks. After discussion with staff patient states is unable to drink normal milk and is requesting soya milk and no spices. Discussed food diary with Dr Kildare, agreed to re-refer back to dietician, referral completed. Miss [redacted] Mckeich
27/05/2022 Referral Letter Miss [redacted] Mckeich
27/05/2022 SCI Referral Letter
27/05/2022 Third Party Consultation Ms [redacted] Rennie
27/05/2022 Document Image Docman Attachment
27/05/2022 Administration Clinical Letter HMP Cornton Vale Dietician Ms [redacted] Rennie
27/05/2022 Other Miss [redacted] Mckeich - No Data Recorded
24/05/2022 Other Dr [redacted] Kildare
24/05/2022 Ongoing review MOA - Desogestrel discontinued on Kardex at request of [redacted] who handed them back to Pharmacy staff Dr [redacted] Kildare
23/05/2022 Triage Ms J [redacted] Rennie
23/05/2022 Self-referral Staff Member, no name given would like to discuss patients diets TEL 265335
18/05/2022 Triage Ms [redacted]
18/05/2022 Medication - risk monitoring Delivering a months supply of Desogestral to GS today. GS asked for them to be returned as not effective (still bleeding) Spoke to nursing staff re SHC clinic referral .Desogestral disposed of at HC. Ms [redacted]
17/05/2022 Triage Ms [redacted] Kilpatrick
17/05/2022 Letter encounter to patient Letter sent to make Georgina aware that recent test came back negative as documented on the 17/05/2022 and the 13/05/2022
QFIT-NEGATIVE
Helicobacter-NEGATIVE
Calprotectin-NEGATIVE
[redacted] Kilpatrick
HCA
17/05/2022
16:49HRS Dr Craig Sayers

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

17/05/2022 Triage Mrs Sylvia Barclay
17/05/2022 Multidisciplinary case conference Discussed at RMT. SW and forensic psychology to meet with Georgina to discuss future plans and clarify potential referrals. No plans at present for further programmes. [redacted] will be able to apply for further progression in July 2022.

S Barclay
MH Nurse
17/05/2022 Mrs Sylvia Barclay
17/05/2022 Other Dr [redacted] Kildare
17/05/2022 Ongoing review MOA - see Faecal calprotectin result <50 - therefore normal - symptoms are likely IBS [redacted]
Can discuss at an appointment if needed but really needs to have blood taken for coeliac serology in first instance to confirm if coeliac or not
Dr [redacted] Kildare
16/05/2022 Third Party Consultation Mr [redacted] Mccallum
16/05/2022 Document Image Docman Attachment
16/05/2022 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
13/05/2022 Other Miss [redacted] Mckeich - No Data Recorded
13/05/2022 Other Miss [redacted] Mckeich
13/05/2022 Consultation ANP entry J McKeich/K [redacted]
ANP mail, qFit and helicobacter negative, still awaiting faecal calprotectin Miss [redacted] Mckeich
13/05/2022 Results recording Dr Craig Sayers - No Data Recorded
13/05/2022 Results recording Dr [redacted] Sayers
06/05/2022 Biochemical test = Abnormal <50 Dr [redacted] Sayers
12/05/2022 Third Party Consultation Mr [redacted] Mccallum
12/05/2022 Document Image Docman Attachment
12/05/2022 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
12/05/2022 Triage Ms [redacted] Murphy
12/05/2022 Ongoing review ANP mail
ANP clinic
clinical results H-pylori negative
await fecal protectin
12/05/2022 Triage Ms [redacted]
12/05/2022 Ongoing review ANP clinic not seen due to same already advised to patient
see previous entries patient has been seen and letter have been sent regarding diet.
12/05/2022 Other Miss [redacted] Mckeich - No Data Recorded
11/05/2022 Third Party Consultation Mr [redacted] Mccallum
11/05/2022 Document Image Docman Attachment
11/05/2022 Administration Microbiology Results Forth Valley Royal Hospital Microbiology Mr [redacted] Mccallum
11/05/2022 Results recording Dr [redacted] Sayers
06/05/2022 Biochemical test = Not Detected
- Result from Blood Science, Ninewells Hospital.
Not Detected Dr [redacted] Sayers
11/05/2022 Results recording Dr [redacted] Sayers
06/05/2022 Biochemical test = Dr [redacted] Sayers
06/05/2022 Faecal calprotectin content = <none> Dr [redacted] Sayers
10/05/2022 Triage Mr [redacted] Mccallum
10/05/2022 Referral to mental health team - Diet issues impacting on Mental Health - LS Mr [redacted] Mccallum
10/05/2022 Self-referral Nurse/GP - Diet issues - stopped eating due to change in diet - LS Mr [redacted] Mccallum
10/05/2022 Other Dr Jack Kildare
10/05/2022 Letter encounter to patient , , lab reults from last stool sample normal (negative) letter sent to Georgina advising same.

N.Brown
HCA
10/05/2022 17:03 Ms Elaine Mcadam
10/05/2022 Fibrocystic disease of breast See letter from Gen Surg (Breast Team) - has Fibrocystic changes in her breast - they have written to Clinical Genetics based on her FHx of breast cancer to see if she needs enhanced screening Dr [redacted] Kildare
10/05/2022 Triage Dr [redacted]
10/05/2022 Seen in [redacted] health clinic Seen in clinic with R [redacted]

Discussed labiaplasty referral - [redacted] awaiting an appointment from Glasgow. Discussed waiting list very long, and that there is a long process once they see her of medical photography, MDT input etc and most cases get rejected.Dr [redacted] Dr [redacted]
09/05/2022 Third Party Consultation Ms [redacted] Rennie
09/05/2022 Document Image Docman Attachment
09/05/2022 Administration Clinical Letter HMP Cornton Vale General Surgery Ms [redacted] Rennie
06/05/2022 Third Party Consultation Mr S [redacted] Mccallum
06/05/2022 Document Image Docman Attachment
06/05/2022 Administration Clinical Letter HMP Cornton Vale Clinical Notes Mr Sharon Mccallum
06/05/2022 Third Party Consultation Mr [redacted] Mccallum
06/05/2022 Document Image Docman Attachment
06/05/2022 Administration Clinical Letter HMP Cornton Vale Patient letter Mr [redacted] Mccallum
05/05/2022 Surgery consultation Dr [redacted] Kildare
05/05/2022 Ongoing review ANP [redacted] J.Kildare
Actions
See bloods - all normal
See Micro report - tongue swab - moderate growth of Candida species - for Fluconazole 50mg OD 7/7 Dr [redacted] Kildare
05/05/2022 Ongoing review Listed for GP clinic today - to discuss testing for coeliac disease again - see prev entries - unfortunately I have nothing further to add at this stage - in order for us to confirm/refute a diagnosis of coeliac disease we need accurate serology which involves eating gluten for at least 6 /52 prior to testing.

Letter from Dieticians back in Jan 22 state that gluten senstivity is unlikey but could be wheat [redacted] - [redacted] therefore exclude wheat from diet but would still be able to eat rice crispies etc and wouldnt need to worry about contamination.

I have not seen her today but sent a letter outling this. [redacted] has already been seen by ANP J.McKeich last week for a fairly lengthy appointment. Dr [redacted] Kildare

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

05/05/2022 Triage Ms [redacted] - No Data Recorded
04/05/2022 Third Party Consultation Mr Sharon Mccallum
04/05/2022 Document Image Docman Attachment
04/05/2022 Administration Kardex HMP Cornton Vale Pharmacy Mr [redacted] Mccallum
04/05/2022 Other Miss [redacted] Mckeich - No Data Recorded
04/05/2022 Third Party Consultation Ms [redacted] Rennie
04/05/2022 Document Image Docman Attachment
04/05/2022 Result Results HMP Cornton Vale All results Ms [redacted] Rennie
02/05/2022 Triage Ms [redacted] Durrant
02/05/2022 Indirect encounter sample provided for labs however unable to send due to it being a bank holiday. new sample pots sent to patient wtih letter advising of same. Dr [redacted] Sayers
02/05/2022 Triage Ms [redacted] Sinclair
02/05/2022 Medication - risk monitoring Prescribed Anusol returned to Health Centre for disposal as pt does not want to use this. Disposed of 020522 Ms [redacted]
02/05/2022 Consultation
Seen in healthcentre to advise of recent advice from GP- no evidence of gluten intolerence test therefore patient is encouraged to undertake this test.
Patient advises that she is not happy with this outcome and she has requested to speak to Dr Sayers to discuss options.
Advised that I will list for GP discussion.

[redacted] SN
02/05/2022, 10:06 Ms [redacted]
30/04/2022 Results recording Dr [redacted] Sayers
29/04/2022 Serum C reactive protein level = mg/L <5 Dr Craig Sayers
29/04/2022 Serum amylase level = 35 U/L U/L Dr [redacted] Sayers
29/04/2022 Glomerular filtration rate = mL/min Abnormal >59 Dr [redacted] Sayers
29/04/2022 Serum urea level = 3 mmol/L Dr [redacted] Sayers
29/04/2022 Serum creatinine = 63 umol/L Dr Craig Sayers
29/04/2022 Serum chloride = 108 mmol/L Dr [redacted] Sayers
29/04/2022 Serum sodium = 138 mmol/L Dr [redacted] Sayers
29/04/2022 Serum potassium = 5 mmol/L Dr [redacted] Sayers
29/04/2022 Urea and electrolytes = <none> Dr [redacted] Sayers
29/04/2022 Serum albumin = 41 g/L Dr [redacted] Sayers
29/04/2022 Serum total protein = 67 g/L Dr [redacted] Sayers
29/04/2022 AST serum level = 17 U/L U/L Dr [redacted] Sayers
29/04/2022 Serum alanine aminotransferase level = 18 IU/L Serum ALT level - Dr [redacted] Sayers
29/04/2022 Serum alkaline phosphatase = 91 U/L U/L - ALP Ref. Limit for patients <30 days old is 0-380 iu/L
ALP Ref. Limit for patients <17 years old is 0-425 iu/L
ALP Ref. Limit for adults (>17 years) is 0-130 iu/L Dr [redacted] Sayers
29/04/2022 Serum total bilirubin level = 5 umol/L Dr [redacted] Sayers
29/04/2022 Liver function test = <none> Dr [redacted] Sayers
30/04/2022 Results recording Dr [redacted] Sayers
29/04/2022 Nucleated red blood cell count = 0 10*9/L 10^9/L Dr Craig Sayers
29/04/2022 Basophil count = 0.1 10*9/L 10^9/L Dr [redacted] Sayers
29/04/2022 Eosinophil count = 0.3 10*9/L 10^9/L Dr [redacted] Sayers
29/04/2022 Monocyte count = 0.5 10*9/L 10^9/L Dr Craig Sayers
29/04/2022 Lymphocyte count = 1.9 10*9/L 10^9/L Dr [redacted] Sayers
29/04/2022 Neutrophil count = 3.7 10*9/L 10^9/L Dr [redacted] Sayers
29/04/2022 Mean corpusc. Hb. conc. (MCHC) = 344 g/L Dr [redacted] Sayers
29/04/2022 Mean corpusc. haemoglobin(MCH) = 28.9 pg Dr [redacted] Sayers
29/04/2022 Packed cell volume = 0.378 ratio Dr [redacted] Sayers
29/04/2022 Mean corpuscular volume (MCV) = 84 fL fl Dr [redacted] Sayers
29/04/2022 Red blood cell (RBC) count = 4.5 10*12/L 10^12/L Dr [redacted] Sayers
29/04/2022 Platelet count = 303 10*9/L 10^9/L Dr [redacted] Sayers
29/04/2022 Total white cell count = 6.4 10*9/L 10^9/L Dr Craig Sayers
29/04/2022 Haemoglobin estimation = 130 g/L Dr Craig Sayers
29/04/2022 Full blood count - FBC = <none> Dr [redacted] Sayers
29/04/2022 Triage Ms Jak-Leanne Durrant
29/04/2022 Indirect encounter Advised that Dr.Sayers has checked outside medical records and there in no evidence of gluten intolerance tests. Will list for nurse clinic to advise [redacted] of same however I am doubtful that she will be convinced to participate in the test. Dr [redacted] Sayers
29/04/2022 Triage Ms [redacted] Durrant
29/04/2022 Blood sample taken = Sent to lab for testing Dr [redacted] Sayers
29/04/2022 Consultation S - Listed by ANP for nurse clinic
B - Bloods, stool sample, discuss gluten free diet
A - Seen in treatment room with S/N Jill Ramsay. Bloods obtained as requested by ANP. Stool sample pots and Qfit given with instruction, advised to return on Monday morning as no transport to labs over weekend.

SPS kitchen staff have advised that they will no longer be providing gluten free food items that can be ordered on prescription due to their budget, therefore Georgie requires a prescription for certain food items. It had been advised that there was no formal evidence of a blood test for this intolerance on vision and so the purpose of todays consultation was to dicuss this with [redacted] Georgie advised me that she would not be able to manage the 6 week period of consuming gluten in her diet that is required prior to the test, and so was unwilling to participate in this. She then became very emotional and advised me that she had been in hospital numerous times for reactions to gluten and lacose - the last admission being as some point earlier this year. States that she has had the blood test taken when she was younger and had a repeat of same in HMP Grampian and again in Corntonvale which Dr.sayers carried out when she was first admitted, nil on vision to support this statement. Advised Georgina that i would discuss her [redacted] with the ANP as she should have evidence on her medical records of the relevent test. ANP K [redacted] advised that ANP L [redacted] has access to global clinical portal and so she may be able to access same.
R - [redacted] is very distressed with the prospect of having to restart a gluten diet. Listed for ANP clinic to discuss further ?Access medical records in order to avoid a repeat test.

J Durrant
PCT
29/04/22 14:02 Dr [redacted] Sayers
28/04/2022 Other Miss J [redacted] Mckeich

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

28/04/2022 Consultation ANP entry, reponse received from Dr [redacted]
Hi Jackie,
there is a referral in to Glasgow - let me chase this up and update them that she is in CV.
[redacted]
Dr Imogen [redacted] (she/her)
Specialty Doctor [redacted] Health Miss [redacted] Mckeich
28/04/2022 Consultation ANP entry:
Email sent to Dr [redacted] regarding labiaplasty, see below:
Hi Dr [redacted]
Seen GS DOB: 4/12/91, spin 131344 today in Cortonvale.
She was asking if I could speak to you regarding her referral to Glasgow for possible labiaplasty.
Your entry on vision from Dec 21 states there is lots of prep work to be done prior to a decision being made regards to surgery.
GS is keen to go ahead with this and the prep work.
She was released on parole however is now readmitted till 2025.
I would appreciate if you could look into this/see patient when next in,
kindest regards
[redacted] McKeich
ANP
Miss [redacted] Mckeich
28/04/2022 Other Miss [redacted] Mckeich - No Data Recorded
28/04/2022 Triage Ms Jak-Leanne Durrant
28/04/2022 Asthma Dr [redacted] Sayers
28/04/2022 Other Mis [redacted] Mckeich
28/04/2022 Consultation Seen patient for review has few issues:
1. re long standing abdo pain
c/o abdo pain
present for years
pains to lower left abdomen
states has had grumbling appendix for years
pain also to upper gastric region
pain occurs intermittantly
has had pain x 3 in last week
starts middle of abdomen
travels round back
describes pain as sharp, spasm
triggered by food, bigger the meal/increase in pain
pain can last up to 2 hrs
nothing makes it better
meds: biscacodyl, laxido, peppermint caps, - states taking as prescribed
Bladder - urgency, then goes, passes little
Bowels - last moved this morning, regular, normal stool, states stool consistency changes depending if takes medication
Appetite - ok
fluids - at least 2 litres per day
states had cholecystecomy at 19 years
Also has hx haemorrhoids
o/e mobilising normally
climbed onto examination couch with no difficulty
no difficulty sitting/standing
abdo symmetrical
no skin changes
no jaundice
no rashes
abdo soft non tender
bowel sounds present
no referred pain/gaurding
patuient PR'd, chaperone present, small external haemorrhoid present, no blood on removal finder - patient requesting treatment for same,
states tried anusol with no benefit, have prescribed anusol HC.
Plan - urine dip done - negative
for bloods, FBC, U&E, LFT, CRP, amylase
stool for helicobacter
stool for qFit
stool for faecal calprotectin
if loose stool sample for C&S
Listed in outcome column for same
2. was seen at sexcual health clinic for removal rod and administration depot, states has small lump neat vagina, wants secons opinion,
states has lump just above clitoris
o/e skin over clitoris and surrounding area appears normal
no lumps or bumps felt
small pin sized reddish spot right of clitoris
appears to be possible ingr4own hair - recenlt shaved
no evidence infection, iflammation, abcesses
no discharge
patient advised
Patient asking if Dr [redacted] has done referral to Glasgow for labiaplasty, see entry 6/12/21, discussed response from Glasgow with patient,
still wants to go ahead with same, advised will contact Dr [redacted] for update.
3. Patent stated was seen at hospital yesterday for breast lumps, states was not impressed with consultation, felt she was not being listened
too, has [redacted] done left breast, advised to wait on letter from consultant.
4. Asked to check patient's neck again for lumps, examined, no swelling of lymph nodes, patient advised
Mouth, states nystatin not helped tongue, swab taken
Patient appears very focused on personal health issues, advised once all the results come back and are normal there will be no clinical
reason to investigate further.
5. Patient requesting information on trichomoniasis, NHS info leaflet issued. Miss [redacted] Mckeich

26/04/2022 Triage Ms [redacted] Durrant

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26/04/2022 Consultation S - NRF received
B - Review of face wound
A - Seen in treatment room with S/N Jill. Small scab to right cheek, appeared more like dry skin - no open wounds. Georgina advised that it was looking much better, not causing any itchiness or pain. Also discussed at visit upcoming hospital app, advised that I could not give a date however she has an appointment coming up soon (27/04/22). Also noted lump on labia, can see that this was assessed last week by SH nurse [redacted] however Georgina feels it has worsened and would like a second opinion. States that the lump is not causing any pain at present however sometimes causes some bleeding. Wished to discuss in more depth with ANP so will list for same. Georgie was very concerned regarding family history of cancer and the appearance of these new lumps.
R - Already listed for ANP clinic Wednesday- reason unknown. Advised [redacted] I would list her to discuss this in greater detail with the GP/ANP.

J Durrant
PCT
26/04/22 1713 Dr [redacted] Sayers
20/04/2022 Triage Miss [redacted]
20/04/2022 Consultation Seen by nurse in treatment room.

HCA L Kirkpatrick recieved a phone call from Pebbles staff regarding a [redacted] the [redacted] had on her face feeling that it may be a bite. [redacted] was brought up to the health center where I look at the [redacted] had just been outside playing football and appeared with a red face and moist skin, warm all over and therefore was hard to assess redness and heat.

The [redacted] was on her face, left cheek. The [redacted] looked to have a scab over it looking slightly yellow in colour and was slightly hard under the surface. The [redacted] was cleaned with prontosan and a small inadine patch was placed in situ with a mepore plaster. Gerogie advised to replaced both inadine and mepore after showering this evening-products with patient.

Advised to infrom staff of any worsening symptoms.

S/N N[redacted]
20/04/22
1536hrs. Miss [redacted] Thompson
20/04/2022 Triage Ms [redacted] Rennie
20/04/2022 Next hospital appointment Forth Valley - Area 2 Breast Clinic - 27-04-2022 @ 09:30 Ms [redacted] Rennie
19/04/2022 Triage Ms Rachel Lawson
19/04/2022 Remov subcutaneous contraceptive implant othr healthcre prov First service recall due: Claim Expiry Date: Ms [redacted]
19/04/2022 Seen in [redacted] health clinic Wished nexplanon removed had for approx 1 year and still getting periods regularly and quite heavy states didnt have this issue with previous implant, had considered depo as alternatibve however felt this was [redacted] to ovarian cysts bursting previously, previous had coil and felt it did not sit comfortably and had to be removed due to the pain. Happy to try POP so desogestrel 75micrograms daily prescribed.
Nexplanon removed with chaperone L Hamilton, using lidocaine 1% Batch 124503 EXP 06/2024, wound care advice given.
Concerned about boils around vagina nil evident at this time, slight tender area with evidence of healing spot/ingrown hair top of right labia, no evidence of infection at this time.
Asking if Drmurray had feedback regarding referral to Glasgow advised I would ask and let her know, also asking if could be referred naywhere else if declined or how to go private. Will speak to Dr [redacted] and let Georgina know or arrnage appointment to discuss same.
R [redacted] - [redacted] health nurse
19/04/2022 11:15 Ms [redacted]
19/04/2022 Liquid based cervical cytology screening Ms [redacted]
18/04/2022 Triage Ms [redacted] Rennie
18/04/2022 Failed encounter - hospital appointment Hospital letter sent direct to patient. Contacted 01324 566639 and left details for the appointment to be re-arranged. Forth Valley - Area 2 Breast - 26/04/2022 @ 09:30 - POssible 2 hour appointment Ms [redacted] Rennie
14/04/2022 Triage Ms [redacted] Rennie
14/04/2022 Next hospital appointment Forth Valley - Area 2 Breast - 26/04/2022 @ 09:30 - POssible 2 hour appointment Ms [redacted] Rennie
13/04/2022 Other Miss [redacted] Mckeich - No Data Recorded
13/04/2022 Referral Letter Miss [redacted] Mckeich
13/04/2022 SCI Referral Letter
13/04/2022 Other Mis [redacted] Mckeich
13/04/2022 Consultation Seen patient, c/o ongoing breast lumps
has new breast ,lumps - lump above nipple left breast
states has mass of lumps side left breast
requesting "water ducts" drained - states was told when last seen that ducts were full
states also has lump on back of neck
Has family hx breast cancer - [redacted]
[redacted] - mouth/throat cancer
Menstral cycle - has rod insitu, inserted 1 year ago
never had periods for years, has bled 3 weeks ago for 1st time, lasted for 8-9 days, seen by SH, no concerns, states may be [redacted] to MH/s
o/e looks well
chatty
oth breasts examined
look symmetrical
skin - no obvious cellulitis/infection/pigmentation/changes
nipples appear normal, no retraction
no discharge
right breast - small circular pea size lesion just above areolar
left breast - small circular pea sized lesion inner right side chest
1 x small pea shaped lesion just above left nipple
1 x small pea shaped lesion upper outer side left breast (approx 2 oclock)
1 x small pea shaped lesion lower left axillae, midline
No pain on palpation breasts/lesions
states had lesion to back of neck, nil felt
neck examined - nad except glands to either side neck slightly swollen
no pain
mouth - normal mucosa
no swelling to back of throat
no hoarsness
no difficulty swallowing
no change taste/smell
no pain

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All Consultations

Address and Telephone numbers

The Health Centre P.O. Box 21616 Stirling FK7 1DW
Telephone - home 0774733501

All Consultations

25/07/2024 Triage Ms [redacted] Rennie - No Data Recorded
24/07/2024 Triage Miss [redacted] No Data Recorded
24/07/2024 Triage Mrs [redacted]
24/07/2024 Ongoing review ANP L [redacted]
ANP Actions
Patient is libbed and asked to do prescription for all her PRN medications
She can buy these OTC or see her GP Mrs [redacted]
16/07/2024 Third Party Consultation Ms [redacted] Cowper
16/07/2024 Document Image Docman Attachment
16/07/2024 Administration Pre R[redacted]e [redacted] reduction disclaimer HMPYOI Stirling Addictions Ms [redacted] Cowper
15/07/2024 Surgery consultation Ms [redacted] Halliday
15/07/2024 Consultation Advised [redacted] AM that [redacted] had been granted parole on Friday 12.07.24.
GP10 completed for 28 days supply of medication by Dr Sayers to allow Georgie time to register with a GP practice.
Discharge Summary also provided.

Writer spoke with Georgie in Reception and explained what each envelope contained and wrote on th front of the envelope what envelope was for her chemist and what one was for her GP practice.

[redacted] appeared in bright spirits and was being supported home by Shine.

[redacted] Halliday
MH T/L
15/07/24
1150 Ms Cara Halliday
15/07/2024 Triage Ms Linzi [redacted]
15/07/2024 Drug addiction therapy Seen in residential area
Informed [redacted] has been granted parole and being liberated today
Pre release [redacted] reduction seession offered- same disclaimed. Naloxone training and supply offered- same disclaimed.
Advised [redacted] that we are organising liberation prescripion to get before release.Spoke about importance of registering with GP at earlies opportunity and about safely taking medication.

Linzi [redacted]
Lead Addiction Nurse 15/7/24 1000hrs Dr Gp Stirling
12/07/2024 Triage Mr [redacted] Mccallum
12/07/2024 Planned telephone contact Virtual Appointment 26/07/2024 @ 10:45
Physio FVRH
Physio`
Georgina Smith / 131344
04/12/1991
https://nhsattend.vc/mskphysio
Near Me
Mr [redacted] Mccall[redacted]
02/07/2024 Other Dr [redacted] Sayers
02/07/2024 TSH - thyroid stim. hormone = 1.3 MicroU/L Normal Normal TSH Dr [redacted] Sayers
01/07/2024 Third Party Consultation Mrs [redacted] Mcfadyen
01/07/2024 Document Image Docman Attachment
01/07/2024 Result Results HMPYOI Stirling Clinical Chemistry Mrs [redacted] Mcfadyen
27/06/2024 Triage Ms [redacted]
27/06/2024 Ongoing review ANP Action
ANP K [redacted]
sensitive scalp ketaconazole ineffective
therefore discontinued. trial dermax shampoo for 3 months
if not resolving to self refer. has full emolient therapy in place wash cream and ointment.
26/06/2024 Triage Miss [redacted]
26/06/2024 Seen by health care assistant
[redacted] in health centre. Bloods obtained for TSH. Sample sent to lab.

[redacted]
HCA
26/06/2024
11:32 Dr Gp Stirling
25/06/2024 Triage Ms Lorin Cummings
25/06/2024 Consultation
S: Seen in Nurse Clinic in the Healthcentre.
B: Scalp Issue.
A: [redacted] has a red and scaly patch at bottom of scalp which she states is really irritated and causing discomfort when touched. [redacted] states this is effecting her daily when brushing her hair etc. On examination this area was inflammed and bleeding slightly. [redacted] has bee prescribed different shampoos but feels these are innefective. She also has similar dry patches on her arms ?psoriasis.
R: Listed for ANP?GP review/actions.

SN PCT Lorin Cummings
25/6/24
18.31 Dr Gp Stirling
20/06/2024 Triage Ms [redacted] Mitchell - No Data Recorded
18/06/2024 Triage Ms Rachel [redacted]
18/06/2024 Recall on 10/09/2024 for Depo-provera injection given with Ms [redacted] Weir Status: Complete GN3573
EXP 08/2025
17/06/2024 Triage Ms [redacted] Binnie - No Data Recorded

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13/06/2024 Triage Ms Aileen [redacted]
13/06/2024 Drug addiction notification Self referral nurse AM - Mental health as per previous forms. Ms Aileen [redacted]
11/06/2024 Triage Ms [redacted] Binnie - No Data Recorded
31/05/2024 Triage Ms Viviene Mitchell
31/05/2024 Consultation S seen in clinic today
B reported sore throat
A pt reports issue self resolved, did not c/o other reported symptoms
R can rerefer if need be
s/n v [redacted]
31/5/24 14.52 Ms Viviene [redacted]
28/05/2024 Triage Ms Aileen [redacted]
28/05/2024 Self-referral Nurse KH - Pain & sore throat. Pain right side under breast. Metalic Taste in louth for 2 days & feeling lethardic - SHC - Would like a jag Ms Aileen [redacted]
21/05/2024 Clinic Dr J Green (Ad)
21/05/2024 Speech therapy Seen in Link centre.
Georgina reported that her parole hearing has been delayed again, for several weeks. She has bene told this is to do with when the parole board received information, but has not further details. Appears to be coping well, continuing to engage in work. Agreed no communication needs at this time but will keep on caseload in case communication support required at short notice.

Jan Green
Clinical Lead Speech and Language Therapy
21/5/24 4.10pm Dr J Green (Ad)
21/05/2024 Triage Ms [redacted] Rennie
21/05/2024 Drug addiction notification Would like smoking cessation Ms [redacted] Rennie
09/05/2024 Triage Miss [redacted] - No Data Recorded
09/05/2024 Triage Mrs [redacted]
09/05/2024 Ongoing review ANP L [redacted] and E.McBeth
Asked to review Doxy
Has acne - continued for 3 months - will require review if requires this after this time
08/05/2024 Triage Mrs [redacted] Toner - No Data Recorded
07/05/2024 Clinic Dr J Green (Ad)
07/05/2024 Speech therapy Case discussion with Sarah Simpson, Social Worker. Parole hearing has been set for 16/5. Accessible licence conditions being held by Social Work,. no changes required. To see Georgina 14/5 for review.

Jan Green
Clinical Lead Speech and Language Therapy
07/05/24 4.30pm Dr J Green (Ad)
02/05/2024 Triage Mrs [redacted]
02/05/2024 Ongoing review ANP L [redacted]
ANP Actions
Asked to review tacrolimus - continued for a further 4 weeks
01/05/2024 Third Party Consultation Ms Aileen [redacted]
01/05/2024 Document Image Docman Attachment
01/05/2024 Administration Clinical Letter HMPYOI Stirling in possesion medication check form Ms Aileen [redacted]
26/04/2024 Clinic Dr J Green (Ad)
26/04/2024 Speech therapy Phone call to Social Work.

[redacted] unavailable. Left message asking for [redacted] to contact me regarding Georgina's parole progress and any current needs regarding communication support.

Jan Green
Clinical Lead Speech and Language Therapy
26/4/24 2pm Dr J Green (Ad)
23/04/2024 Triage Ms [redacted] Meffin
23/04/2024 Mental health administration
CTM Attendees: Dr Swinson, NTL C Halliday, RMN N [redacted] RMN R [redacted] RMN D Doull, RMN N Meffin, RMN L Stevenson, Assistant [redacted] C Docherty, Forensic [redacted] E Vendelanotte, Speech and Language A McCandlish, Social Work K [redacted] OT C [redacted]

No role for MHT at present as Georgina declines any input or changes to medication. RMN N [redacted] to write a letter.
Ms [redacted] Meffin
23/04/2024 Triage Ms Hina Khizar
23/04/2024 Medication - risk monitoring Spot Checked 22.04.24

All count was correct. Dr Gp Stirling
23/04/2024 Triage Miss [redacted] - No Data Recorded
19/04/2024 Triage Ms [redacted] Murphy
19/04/2024 Ongoing review ANP Mail
ANP K [redacted]
X ray results
left hand
mild OA evidence atrticular sclerosis
joint space well preserved
no significant bone or joint abnormality.
Dr Gp Stirling
18/04/2024 Third Party Consultation Ms [redacted] Rennie
18/04/2024 Document Image Docman Attachment
18/04/2024 Result Results X-Ray Ms [redacted] Rennie
15/04/2024 Triage Ms [redacted] Rennie
15/04/2024 Self-referral Nurse triage - LMC - Swollen ear and sore Ms Jane Rennie
04/04/2024 Triage Ms Hina Khizar
04/04/2024 Ongoing review ANP pharmacy
ANP K [redacted] H Khizar
discussed change of gluten options kardex updated
01/04/2024 Triage Ms [redacted] Rennie

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01/04/2024 Self-referral [redacted] Health - KH - Cyst on vagina Ms [redacted] Rennie
30/03/2024 Triage Ms [redacted] - No Data Recorded
28/03/2024 Triage Ms [redacted]
Letter on: 28/03/202[redacted] type: Referral SH Results
28/03/2024 Hepatitis C antibody test negative = Ms [redacted]
28/03/2024 HIV negative = Ms Rachel [redacted]
28/03/2024 Hepatitis B surface antigen negative = Ms [redacted]
28/03/2024 Syphilis titre test negative = Ms [redacted]
28/03/2024 Seen in [redacted] health clinic for self referral concerned regarding cyst to left labia majora on examination no lump felt. Also concerned about internal changes/growth, nil of note at this time but states awaiting hospital appointment for review of gentials however same cancelled by Geo- [redacted] on numerous occassions.
Await hosptial appointment.
Depo and BBV screen already provided by Nurse [redacted] on 19/3/24.
R [redacted] - [redacted] health nurse
28/3/24 09:25 Ms [redacted]
26/03/2024 Triage Ms Anne Mitchell
26/03/2024 Consultation
S. Seen in healthcentre
B. C/O Flaky Ears
A. Both ears appear healthy with no visible dry skin, skin intact, no signs of infection, no redness or swelling, Georgie states both ears have cleared up and no any other health issues today.
R. Advised to put referral in if any further issues or [redacted].

RGN [redacted] 10.51am 26/03/2024 Ms [redacted]
25/03/2024 Third Party Consultation Mrs [redacted] Mcfadyen
25/03/2024 Document Image Docman Attachment
25/03/2024 Result Results HMPYOI Stirling Microbiology Mrs [redacted] Mcfadyen
25/03/2024 Third Party Consultation Mrs [redacted] Mcfadyen
25/03/2024 Document Image Docman Attachment
25/03/2024 Result Results HMPYOI Stirling Microbiology Mrs [redacted] Mcfadyen
25/03/2024 Triage Mrs [redacted] Mcfadyen
25/03/2024 Next hospital appointment 10/04/2024 14:40
Stirling Community Hospital - Livilands Gate, Stirling FK8 2AU
X Ray Department
Georgina Smith / 131344
04/12/1991
Normal
Had Ultrasound 19/03 but wasn't given xray so this is still outstanding
Mrs [redacted] Mcfadyen
21/03/2024 Triage Mrs [redacted] Mckay
21/03/2024 Consulta[redacted] Georgina spoke with me whilst I was in [redacted] and was asking when she was going to be seen by mental health. Said the Irish Nurse was going to see her. On checking with MH nurse [redacted] MH nurse [redacted] was supposed to see yesterday, but no note on vision. It will be passed on to her tomorrow when she is on shift.

[redacted] McKay
PCT nurse
3:26pm Mrs [redacted] Mckay
20/03/2024 Third Party Consultation Mrs [redacted] Mcfadyen
20/03/2024 Document Image Docman Attachment
20/03/2024 Administration Administration HMPYOI Stirling In-Possesion Medication Check Mrs [redacted] Mcfadyen
20/03/2024 Third Party Consultation Mrs [redacted] Mcfadyen
20/03/2024 Document Image Docman Attachment
20/03/2024 Administration Administration HMPYOI Stirling In Possession Medication Check Mrs [redacted] Mcfadyen
19/03/2024 Triage Ms [redacted] Berry
19/03/2024 Self-referral Nurse AM - [redacted] health, depo jag and tested is possible. Bloods for thyriod as not been well. Ms Aileen Berry
19/03/2024 Triage Mrs [redacted] Mcfadyen
19/03/2024 Self-referral Self - BJ - PCT - Ears sore and flakey. Added to PCT waiting list, card sent to patient to advise. Mrs [redacted] Mcfadyen
19/03/2024 Triage Ms Viviene Mitchell
19/03/2024 Recall on 13/06/2024 for Depo-provera injection given with Ms Viviene Mitchell Status: Complete
19/03/2024 Depo-provera injection given First service recall due: Claim Expiry Date: Batch no: 382444743815 exp: 08/28
19/03/2024 Hepatitis C antibody level =
19/03/2024 Human immunodefic viral test =
19/03/2024 Hep B surface antigen test =
19/03/2024 Seen in [redacted] health clinic requesting BBV screen. Window periods discussed.
Also due Depo Provera given today happy with medication. Next due 13/06/2024.

14/03/2024 Third Party Consultation Ms Aileen [redacted]
14/03/2024 Document Image Docman Attachment
14/03/2024 Administration Kardex HMPYOI Stirling Pharmacy Ms Aileen [redacted]
13/03/2024 Third Party Consultation Ms Aileen Berry
13/03/2024 Document Image Docman Attachment
13/03/2024 Administration Clinical Letter HMPYOI Stirling Dermatology Appointment cancelled Ms Aileen [redacted]
13/03/2024 Triage Mrs [redacted]
13/03/2024 Ongoing review ANP L.Kane
Asked to rewrite kardex's as has 3x active
Same done - now has seperate kardex for gluten free products
12/03/2024 Triage Ms Hina Khizar
12/03/2024 Medication - risk monitoring Spot Checked 11.03.24

No discrepansies found. Dr Gp Stirling
08/03/2024 Clinic Dr J Green (Ad)

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

08/03/2024 Speech therapy Seen for review.
Georgina consented to meeting.
Georgina reported that she is still awaiting a date for completion of her Parole Tribunal. She feels she is managing OK at present. She has found her accessible information provided via Social Work helpful.
Agreed to monitor short-term progress via contact with social work and to review again once dates for tribunal available.

Jan Green
Clinical Lead Speech and Language Therapy
08/03/24 15:00:00 Dr J Green (Ad)

08/03/2024 Third Party Consultation Ms Aileen [redacted]
08/03/2024 Document Image Docman Attachment
08/03/2024 Administration Clinical Letter HMPYOI Stirling In possesion medication check form Ms Aileen [redacted]

07/03/2024 Triage Ms Aileen [redacted]
07/03/2024 Failed encounter - hospital appointment 10:00 on 03/04/2024
Glasgow Royal Infirmary - 1st Floor (off Link Corridor) Walton Building, Castle Street, G4 0SF
Dermatology
Georgina Smith / 131344
04/12/1991
Normal Transport
Advised appointment cancelled by Hospital 07/03/2024, called Hospital 07/03/2024, another appointment will be posted out
Ms Aileen [redacted]
07/03/2024 Administration NOS Admin called hospital regarding caqncelled appointment for 03/04/2024.
Hospital advised another appointment will be sent out and the patient does not require to be re-referred. Ms Aileen [redacted]

07/03/2024 Triage Mrs [redacted]
07/03/2024 Ongoing review ANP L [redacted]
ANP Actions
I have been informed that the hospital has cancelled Georgie's appt as she has had 3x appointments offered and she is to be re-referred
I see that this is due to GeoAmey not attending to take [redacted]
As discussed prev with Dr Sayers we have to send the National letter in relation to this issue which was approved at the Oversight Board in April of this year and distributed to all NHS Board Chief Executives.

It clarifies the agreement that patients must not be removed from waiting lists, and should be reappointed, should they fail to attend secondary care appointments as a consequence of GeoAmey transport failures

[redacted] must not be penalized for GeoAmey not turning up as this is not within her control
I have emailed admin copy of the letter to send on- if you could send this on to the dermatology department to book a new appt Dr Gp Stirling

06/03/2024 Triage Miss Blyth [redacted]
06/03/2024 Consultation Call from dermatology regarding Georgina's missed appointments. They have cancelled this appointment due to [redacted] reaching her maximum missed appointments of 3 and she will need to re-referred to the service to be given another appointment.

Will list for GP/ANP actions for [redacted] to be re-referred

SN Blythe [redacted]
1015 Miss Blyth [redacted]

06/03/2024 Triage Miss Blyth [redacted] - No Data Recorded

04/03/2024 Triage Mr Sharon Mccallum
04/03/2024 Next hospital appointment 03/04/2024 @ 10:00
Glasgow Royal Infirmary - 1st Floor (off Link Corridor) [redacted] Building, Castle Street, G4 0SF
Dermatology
Georgina Smith / 131344
04/12/1991
Normal
Mr [redacted] Mccallum

04/03/2024 Third Party Consultation Ms Aileen [redacted]
04/03/2024 Document Image Docman Attachment
04/03/2024 Administration Clinical Letter HMPYOI Stirling Dermatology Outpatient appointment letter Ms Aileen [redacted]

04/03/2024 Triage Mr [redacted] Mccallum
04/03/2024 Next hospital appointment 19/03/2024 @ 10:00
Forth Valley Royal Hospital, Stirling Road, Larbert, FK5 4WR
X Ray Department - for XRay & US Scan
Georgina Smith / 131344
04/12/1991
Normal
Mr [redacted] Mccallum
04/03/2024 Appt cancelled by hospital 15:00
Stirling Community Hospital - Livilands Gate, Stirling FK8 2AU
X [redacted] Department
Georgina Smith / 131344
04/12/1991
Normal
Cancelled by Hospital - patient to have xray & uss on 19/03/2024 @ 10:00 FVRH
Mr [redacted] Mccallum

29/02/2024 Triage Ms Hina Khizar
29/02/2024 Medication - risk monitoring Spot Checked - All medication count noted to be correct. Patient is no longer precribed aspirin, hence, aspirin returned. Dr Gp Stirling

27/02/2024 Other Dr [redacted] Kildare
27/02/2024 Ongoing review MOA - Pharmacy querying script as [redacted] is written up for both Aspirin and Etodolac
Kardex reviewed - stop Aspirin and review if needed - can remain on Etodolac as was on this previously Dr [redacted] Kildare

27/02/2024 Administration Dr Fiona [redacted]
27/02/2024 Ongoing review GP [redacted] mail
Bloods inc ESR, CRP, RF and TSH all normal - reassuring from an inflammatory arthritis point of view.
XR hand awaited Dr [redacted]

26/02/2024 Triage Mr [redacted] Mccallum

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26/02/2024 Next hospital appointment 18/03/2024 @ 15:00
Stirling Community Hospital - Livilands Gate, Stirling FK8 2AU
X Ray Department
Georgina Smith / 131344
04/12/1991
Normal
Dr Gp Stirling

26/02/2024 Triage Mr Shs [redacted] Mccallum
26/02/2024 Failed encounter - hospital appointment 26/02/2024 @ 10:40
Glasgow Royal Infirmary - 1st Floor (off Link Corridor) [redacted] Building, Castle Street, G4 0SF
Dermatology
Georgina Smith / 131344
04/12/1991
Normal
GeoAmey Refused to take patient 26/02/2024 -- New Appointment will be sent out per phone call 26/02/2024
Mr [redacted] Mccallum

23/02/2024 Third Party Consultation Mr [redacted] Mccallum
23/02/2024 Document Image Docman Attachment
23/02/2024 Administration Haematology Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum

23/02/2024 Third Party Consultation Mr [redacted] Mccallum
23/02/2024 Document Image Docman Attachment
23/02/2024 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr Sharon Mccallum

22/02/2024 Triage Miss [redacted] Campbell
22/02/2024 Failed encounter
Listed for bloods however obtained yesterday. Duplicate appointment

Laura [redacted]
HCA
22/02/2024
10:06 Dr Gp Stirling

21/02/2024 Referral Letter Dr Fiona [redacted]
21/02/2024 SCI Referral Letter

21/02/2024 Administration Dr Fiona [redacted] - No Data Recorded

21/02/2024 Triage Ms [redacted] Kilpatrick
21/02/2024 Seen by health care assistant Seen Georgina in clinic for bloods, bloods obtained as per ordercomms and sent to labs.
[redacted] Kilpatrick
HCA
21/02/2024
11:55HRS Dr Gp Stirling

21/02/2024 Triage Ms Anne Mitchell
21/02/2024 Consultation
S. Seen in healthcentre
B. Cyst and rash on face
A. Georgina states she has been seen previously regarding this and has been prescribed steroid. Does not require further input at this time. Rash and cyst resolved
R. Advised to contact healthcare if any further issues.

RGN [redacted] 10.17am 21/02/2024 Ms Anne [redacted]

20/02/2024 Surgery consultation Dr [redacted]
20/02/2024 Ongoing review GP [redacted]
1) Eye - concerned about Graves disease - I showed her pictures of Grave's disease and we both agreed that she does not have this! Has had left sided upper eyelid periocular dermatitis. No stye or chalazion visible. For course of protopic twice weekly for one month in the first instance.
2) Headaches - in for review as previously described by myself 21/11/23 - unchanged since then. Headaches worse at the weekend when not working. Average 2x month. I wonder if it is worth trialing 900mg aspirin (no contraindications) at onset of headache and review again in 3 months.
3) Arthritis - finger pain and swelling with rotation of left index finger prominent. RF negative in 2018. Would be worth an XR of left hand ?erosions ?alignment and updated bloods inc CRP, ESR and RF.
4) Neck pain and swelling - ongoing since last year. Had XR which was unremarkable. Soft tissue swelling evident on examination, no skin changes. Would be worth asking physio to review in the first instance.

Plan:
- Protopic 0.33% twice weekly for one month
- Trial of aspirin 900mg stat at onset oh headache
RV headaches in 3m
- Bloods as above
- XR left hand
- Physio ref Dr [redacted]

19/02/2024 Triage Ms Aileen Berry
19/02/2024 Next hospital appointment
Monday 26/02/2024 at 10:40am
Glasgow Royal Infirmary - 1st Floor (off Link Corridor) [redacted] Building, Castle Street, G4 0SF
Dermatology
Georgina Smith / 131344
04/12/1991
Normal Transport Ms Aileen [redacted]
19/02/2024 Administration NOS Automated telephone reminder received regarding hospital appointment. No hospital appointment noted on database/vision, admin called Glasgow Royal Infirmary to obtain appointment details. Hospital confirmed 26/02/2024 at 10:40am. Ms Aileen [redacted]

16/02/2024 Triage Ms [redacted] - No Data Recorded

15/02/2024 Triage Ms [redacted]

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15/02/2024 Ongoing review ANP clinic
ANP K [redacted]
Skin review
? sty on eye
Due to make up unable to see eye properly.
No irritation in eye evident no redness noted.
Acne noted to T Zone, chin effected advised pus comes out.
This would be in line with acne vulgaris
Again wearing heavy makeup unable to see properly
On Doxycycline for acne extended course till may
Added in benzoyl peroxide BD PRN
Emolotient therapy for face and eye to use as a wash and moisturiser and added in qv cream
Use twice daily on left eyes area.
Relisted one week for further review of eye.
Worsening advice given.

15/02/2024 Triage Ms [redacted] - No Data Recorded
14/02/2024 Third Party Consultation Mr [redacted] Mccallum
14/02/2024 Document Image Docman Attachment
14/02/2024 Administration Kardex HMPYOI Stirling Pharmacy Mr [redacted] Mccallum
14/02/2024 Triage Ms Aileen [redacted]
14/02/2024 Self-referral R/V to check rash on eye and cysts on face. Ms Aileen [redacted]
13/02/2024 Triage Ms Jade Binnie
13/02/2024 Administration Already listed for bloods

[redacted] Binnie
HCA
13/02/2024 Dr Gp Stirling
13/02/2024 Triage Ms Karen [redacted]
13/02/2024 Ongoing review
ANP K [redacted] McBeth
Mail received.
Reviewed letter for Endrocrinology.
Impression: Thyroiditis.
They have advised that Georgina stop taking Carbimazole and montior bloods.
Once monthly for three months and then 3 monthly following this if there are no conerns.
Kardex please Dr Gp Stirling
09/02/2024 Third Party Consultation Mr Sharon Mccallum
09/02/2024 Document Image Docman Attachment
09/02/2024 Administration Clinical Letter Forth Valley Royal Hospital Endocrinology Clinic letter Mr [redacted] Mccallum
09/02/2024 Triage Ms [redacted] Murphy
09/02/2024 Ongoing review ANP action
ANP K murphy
unable to come today- relisted
08/02/2024 Third Party Consultation Mrs [redacted] Mcfadyen
08/02/2024 Consultation Seen in Iris.
Self referral for swelling at top of spine/bottom of neck.
Visible lump noted to the back of neck. States this has been an issue previously in 2022 - see note from 2022 started on etodolac for same.
States this is due to arthritis.
Not been an issue for almost 2 years but feels this has flared up again recently.
Reports +pain when moving her neck - causing issue as [redacted] the hairdressers.
Good range of movement, using regular analgesia with nil effect.
Listed for GP/ANP review.

PCT R WEIR
2020HRS Dr Gp Stirling
08/02/2024 Document Image Docman Attachment
08/02/2024 Consent given for blood test Administration Medical Marker Mrs [redacted] Mcfadyen
08/02/2024 Triage Ms [redacted] Weir - No Data Recorded
08/02/2024 Triage Ms [redacted] Binnie - No Data Recorded
07/02/2024 Third Party Consultation Mrs S[redacted]n Mcfadyen
07/02/2024 Document Image Docman Attachment
07/02/2024 Administration Administration HMPYOI Stirling In-Possesion Medication Check Mrs [redacted] Mcfadyen
01/02/2024 Triage Ms [redacted] No Data Recorded
31/01/2024 Triage Mrs [redacted]
31/01/2024 Ongoing [redacted]
Listed for ANP review
No entry as to why patient requires review?
can see on 25/1/24 self referred to nurse for painful finger
and was reviewed - on analgesia for arthritis of finger
Was seen by GP 2 weeks ago
No need to review again
If nurse have concerns around finger can list for review
Alternatively if pain is problematic her medications can be reviewed if required

31/01/2024 Triage Mrs [redacted]
31/01/2024 Ongoing [redacted]
Mail
Review of TSH- normal range
30/01/2024 Third Party Consultation Mr Sharon Mccallum
30/01/2024 Document Image Docman Attachment
30/01/2024 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
30/01/2024 Triage Ms [redacted] Waleh - No Data Recorded
25/01/2024 Triage Ms Aileen [redacted]
25/01/2024 Self-referral [redacted] AM - Sore finger, tipping to the side - arthritis? Ms Aileen [redacted]

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25/01/2024 Triage Ms [redacted] Binnie
25/01/2024 Seen by health care assistant Seen Georgina in HC for TFT bloods succesffuly obtained and sent to labs

Complaining of sore finger - checked by PCT L Mccracken - this is arthiritis - on medication for same

Listed for TFT bloods 1 month
[redacted] Binnie
HCA
25/01/2024 Dr Gp Stirling
25/01/2024 Triage Ms [redacted] Binnie - No Data Recorded
23/01/2024 Clinic Dr J Green (Ad)
23/01/2024 Speech therapy Accessible licence conditions provided to [redacted] Discussed content and approaches to sharing information with Georgina.
Parole Hearing today. [redacted] will update on outcome and, if Georgina is libertaed, share contact details to allow advice to be given to Supervising Officer.

Jan Green
Clinical Lead Speech and Language Therapy
23/01/24 2.30pm Dr J Green (Ad)
23/01/2024 Triage Mrs [redacted] Mcfadyen
23/01/2024 Next hospital appointment Booking office confirmed another hospital appointment will be sent in due course Mrs [redacted] Mcfadyen
23/01/2024 Third Party Consultation Mrs [redacted] Mcfadyen
23/01/2024 Document Image Docman Attachment
23/01/2024 Administration Administration HMPYOI Stirling Results Mrs [redacted] Mcfadyen
23/01/2024 Other Dr Jack Kildare
23/01/2024 Ongoing review MOA Mail - see letter from Endocrine Specialist Nurse - has been discharged from follow up but needs TFTs every 3/12 for next year and referred back if deranged or develops symptoms of thyroid disease
I have communicated this on lib letter Dr [redacted] Kildare
23/01/2024 Ongoing review MOA - Lib letter completed Dr [redacted] Kildare
23/01/2024 Third Party Consultation Mr S [redacted] Mccallum
23/01/2024 Document Image Docman Attachment
23/01/2024 Administration Administration HMPYOI Stirling In-Possesion Medication Check Mr [redacted] Mccallum
23/01/2024 Triage Mrs [redacted] Mcfadyen
23/01/2024 Administration NOS Admin been unable to reach dermatology dept over the phone, have sent an email this morning to appointmentsbookingcentre@ggc.scot.nhs.uk to request a new appointment Mrs [redacted] Mcfadyen
22/01/2024 Triage Mrs [redacted] Mcfadyen
22/01/2024 Next hospital appointment Today's hospital appointment cancelled as Geoamy can't facilitate. Admin will rearrange appointment Mrs [redacted] Mcfadyen
16/01/2024 Surgery consultation Dr Jack Kildare
16/01/2024 Consultation GP Review
ATSP as [redacted] reporting some discomfort from left eye
No visual change
Feels sore on top lid
O/E
PERLA, eye movements normal and no conjuctival injection
Has small stye left upper lid
Advised on hot compresses and no need for abx treatment
Further review if not settling in 3/52 Dr [redacted] Kildare
16/01/2024 Triage Ms [redacted] Binnie
16/01/2024 Seen by health care assistant Attended Endocrinology telephone appt with Georgina
[redacted] complaining of sore eye - passed over to GP on shift at time
To provide georgie with letter from Dr [redacted] with plan going forward regarding bloods as possibilty of release on Tuesday - will put this in property
If feeling symptomatic to let gp know to get bloods

Jade Binnie
HCA
16/01/2024 Dr Gp Stirling
16/01/2024 Triage Ms [redacted] Binnie - No Data Recorded
15/01/2024 Triage Miss [redacted] - No Data Recorded
15/01/2024 Triage Ms [redacted] Binnie - No Data Recorded
15/01/2024 Triage Ms [redacted] - No Data Recorded
10/01/2024 Clinic Dr J Green (Ad)
10/01/2024 Speech therapy Case discussion with [redacted] Prison Based [redacted] advised that Ms Smith is being recommended for parole. Discussed risk that she may not comprehend licence conditions in current form. Agreed I will support development and sharing of accessible information on same.
Next steps: await information for development from [redacted] Simpson.

Jan Green
Clinical Lead Speech and Language Therapy
NHS Forth Valley Prisons Healthcare
10/01/24 12:00 Dr J Green (Ad)
08/01/2024 Third Party Consultation Mr Sharon Mccallum
08/01/2024 Document Image Docman Attachment
08/01/2024 Administration Administration HMPYOI Stirling In-Possesion Medication Check Mr [redacted] Mccallum
08/01/2024 Third Party Consultation Mr [redacted] Mccallum
08/01/2024 Document Image Docman Attachment
08/01/2024 Administration Administration HMPYOI Stirling In-Possesion Medication Check Mr Sharon Mccallum
07/01/2024 Triage Miss [redacted] - No Data Recorded
07/01/2024 Triage Miss La[redacted]n Campbell - No Data Recorded
05/01/2024 Triage Ms Laura Kilpatrick

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05/01/2024 Letter encounter to patient Letter sent to Georgina to make aware of normal bloods as documented by GP [redacted] Kilpatrick
HCA
05/01/2024
15:08HRS Dr Gp Stirling
05/01/2024 Other Dr [redacted] Sayers
05/01/2024 Ongoing review MOA - TFTs normal Dr [redacted] Sayers
05/01/2024 Third Party Consultation Ms [redacted] Rennie
05/01/2024 Document Image Docman Attachment
05/01/2024 Result Results Clinical Chemistry Ms [redacted] Rennie
04/01/2024 Third Party Consultation Mrs S[redacted] Mcfadyen
04/01/2024 Document Image Docman Attachment
04/01/2024 Administration Administration HMPYOI Stirling Alcohol and Benzodiazepine Withdrawal Scale Mrs [redacted] Mcfadyen
04/01/2024 Third Party Consultation Mrs [redacted] Mcfadyen
04/01/2024 Document Image Docman Attachment
04/01/2024 Administration Administration HMPYOI Stirling Alcohol and Benzodiazepine Withdrawal Scale Mrs [redacted] Mcfadyen
02/01/2024 Triage Ms [redacted] Cleary - No Data Recorded
29/12/2023 Triage Ms [redacted] Binnie - No Data Recorded
29/12/2023 Triage Ms [redacted] Binnie
29/12/2023 Seen by [redacted]th care assistant Seen Georgina in HC for bloods TFT
Obtained and sent to labs

[redacted] Binnie
HCa
29/12/2023

Dr Gp Stirling
27/12/2023 Triage Ms A[redacted] - No Data Recorded
21/12/2023 Triage Mrs [redacted] Mcfadyen
21/12/2023 Self-referral RW - PCT - Sore chest, left breast and back. Mrs [redacted] Mcfadyen
21/12/2023 Triage Ms [redacted]
21/12/2023 Recall on 14/03/2024 for Depo-provera injection given with Ms Rachel [redacted] Status: Complete
21/12/2023 Depo-provera injection given First service recall due: 14/03/2024 Claim Expiry Date: Batch GN3573, EXP 08/2025.
Right buttock.
Keen to continue with prescription. No issues raised.
R [redacted] - [redacted] health nurse
21/12/2023 15:14 Ms [redacted]
20/12/2023 Triage Mr [redacted] Mccallum
20/12/2023 Next hospital appointment 22/01/2024 @ 13:45
Glasgow Royal Infirmary - 1st Floor (off Link Corridor) Walton Building, Castle Street, G4 0SF
Dermatology
Georgina Smith / 131344
04/12/1991
Normal
Mr [redacted] Mccallum
19/12/2023 Triage Mr Sharon Mccallum
19/12/2023 Planned telephone contact 16/01/2024 @ 13:30
Endocrinology, Nurse Led Review
Georgina Smith / 131344
04/12/1991
01324 711558
Telephone Clinic
Mr [redacted] Mccallum
18/12/2023 Triage Ms [redacted] Lawson - No Data Recorded
13/12/2023 Triage Ms Lyndsay Mccracken
13/12/2023 Seen by triage nurse S- Seen in health centre treatment room
B- Self referral recieved for health marker
A- Georgina attended clinic this morning advised it was not a health marker that was required it was ? about her depot injection. Advised this is due 19/12/23 and is currently listed for PCT to be administered. Georgina was asking when her flu vaccine would be administered also advised she was listed for clinic 15/12/23 for this. Georgina happy with this information.
R- Awaiting upcoming appointments

PCT S/N Lyndsay McCracken
15.50 Ms Lyndsay Mccracken
08/12/2023 Triage Mr [redacted] Mccallum
08/12/2023 Self-referral Sub referral 08/12/2023 Flu jag and depo jag.SP Dr Gp Stirling
08/12/2023 Triage Ms [redacted]
08/12/2023 Consultation Listed for PCT healthcare marker 13/12/23
PCT [redacted] 11:22 08/12/23 Dr Gp Stirling
07/12/2023 Triage Ms [redacted] Rennie
07/12/2023 Administration NOS Contacted 0800592087 to re-arrange appointment for dermatology. As this is a first appointment there will be another letter sent out to the health centre. Ms [redacted] Rennie
07/12/2023 Triage Ms [redacted] Rennie
07/12/2023 Appointment cancelled by patient 07/12/2023 - 11:15
Stobhill Hospital 133 Balornock Road Glasgow G21 3UW
Dermatology
Georgina Smith 131344
04/12/1991
Normal
Patient Refused to attend due to another appointment
Ms [redacted] Rennie
07/12/2023 Other Miss Jackie Mckeich
07/12/2023 Consultation ANP actions, request to increase bisacodyl back to original dose, rx bisacodyl 5mg 1-2 tabs at night. Miss [redacted] Mckeich
06/12/2023 Other Mrs Doreen Doull - No Data Recorded

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Georgina Smith 04/12/1991 662/91/440 [redacted] **Consultations**

06/12/2023 Triage Ms [redacted]
06/12/2023 Consultation S; Seen in treatment room
B; Toileting issues ;/ dizziness
A; Patient states she is on Bysacodyl, however had asked for this to be reduced, patient states she feels as if she needs this increased again as she is finding it difficult to have a proper bowel movement. Patient also states she is feeling dizzy, but thinks this is down to stress regarding her parole hearing on the 18/12/23 as none of her reports are ready. Full set of observations done as follows; Temp; 36.6, B/P; 113/74, Stats; 100% on air, P; 85.
R; ANP for increase of Bysacodyl. Dizzy spells advised to increase fluid and try to relax a bit more. Worsening advice given.
PCT; C. [redacted]
6/12/23
14.21 Dr Gp Stirling
05/12/2023 Triage Ms [redacted] Cleary
05/12/2023 Letter encounter to patient to inform her of recent blood result.
Michelle Cleary
HCA
05/12/2023
16.55 Ms [redacted] Cleary
05/12/2023 Administration Dr [redacted]
05/12/2023 Thyroiditis Dr [redacted]
05/12/2023 Ongoing review GP [redacted] - Mail
TFTs within notmal range.
For rpt in 1m - added to ordercomms and added to actionable column on vision.
For TFTs: begining of Jan and Feb. Then May, August and November. Dr [redacted]
04/12/2023 Third Party Consultation Ms [redacted]
04/12/2023 Document Image Docman Attachment
04/12/2023 Result [redacted] HMPYOI Stirling Clinical Chemistry Ms Aileen [redacted]
04/12/2023 Triage Ms [redacted] Cleary
04/12/2023 Seen by health care assistant
Georgina was in the clinic for bloods but these were taken on 30/11/2023
[redacted] Cleary
HCA
04/12/2023
11.41 Ms [redacted] Cleary
03/12/2023 Triage Ms [redacted] Binnie - No Data Recorded
01/12/2023 Triage Mrs [redacted] Mcfadyen
01/12/2023 Self-referral Nurse - AM - Toilet issues Mrs [redacted] Mcfadyen
30/11/2023 Triage Ms [redacted] Kilpatrick
30/11/2023 Seen by health care assistant
Seen in health centre with [redacted] K & [redacted] C. Bloods obtained as per OrderComms, sample sent to lab.

[redacted]
HCA
30/11/2023
11:43 Dr Gp Stirling
30/11/2023 Triage Mr [redacted] Mccallum
30/11/2023 Self-referral Review for Medical Marker - 2 duvets. Mr [redacted] Mccallum
28/11/2023 Triage Ms Michelle Cleary
28/11/2023 Letter encounter to patient to inform her of recent stop to Carbimazole.
Listed for bloods monthly for 3 mnths then quarterly for 1 year.
[redacted] Cleary
HCA
28/11/2023
15.35
Ms [redacted] Cleary
28/11/2023 Other Dr [redacted] Kildare
28/11/2023 Ongoing review MOA Mail - see letter from Dr [redacted] Endo Cons - suspects [redacted] has had a transient thyroiditis which has now settled - Carbimazole is to be stopped and to have TFTs taken monthly for 3/12 then every 4 months for a year Dr [redacted] Kildare
28/11/2023 Triage Ms [redacted] Rennie - No Data Recorded
27/11/2023 Third Party Consultation Ms Aileen [redacted]
27/11/2023 Document Image Docman Attachment
27/11/2023 Administration Clinical Letter HMPYOI Stirling Medical Marker Ms Aileen Berry
27/11/2023 Third Party Consultation Mr [redacted] Mccallum
27/11/2023 Document Image Docman Attachment
27/11/2023 Administration Clinical Letter Forth Valley Royal Hospital Endocrinology Endocrinology Clinic Letter Dr Kelly Mr [redacted] Mccallum
24/11/2023 Triage Mrs [redacted]
24/11/2023 Ongoing review ANP L.Kane
Review of endocrine letter
To STOP carbimazole
Monthly TFTs for 3 months then quaterly for 12 months
Will list TFTs Free T3 and T4 on order comms
Will stop carbimazole
23/11/2023 Third Party Consultation Mr [redacted] Mccallum
23/11/2023 Document Image Docman Attachment
23/11/2023 Administration Clinical Letter NHS Forth Valley Endocrinology Mr Sharon Mccallum
23/11/2023 Triage Mrs [redacted] Mcfadyen
23/11/2023 Administration NOS Admin called Endocrine nurse Jillian Tough's secretary [redacted] 22/11/2023 13:00 and left a message to phone back Health centre with an update as nothing on portal from appt 3/11 dr was querying med changes. (Vision down yesterday so couldn't update note at the time) Mrs [redacted] Mcfadyen
22/11/2023 Triage Ms [redacted] Binnie - No Data Recorded
22/11/2023 Clinic Dr J Green (Ad)

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22/11/2023 Speech therapy Met with case management officer Andy [redacted] to feedback on current invovlement and plans for informaitor sharing.
[redacted] positive about the utility of communication support informaiton.

Next steps: to share communication plan and dictionary w/c 27/11/23

Jan Green
Clinical Lead Speech and Language Therapy
22/11/23 3:10pm Dr J Green (Ad)
22/11/2023 Clinic Dr J Green (Ad)
22/11/2023 Speech therapy Seen on [redacted]

Shared and agreed communication profile - Georgie reporting feeling very positive about this.
[redacted] had completed requested work on communication dictionary. She had produced a detailed account, which is likely to prove useful in her management and support. Discussed and agreed content to by typed up for sharing in week commencing 27/11/23.

Next steps: Sharing of communication support materials, info to case management and risk management team.

[redacted] Green
Clinical Lead Speech and Language Therapy
22/11/23 3:00pm Dr J Green (Ad)
22/11/2023 Triage Mrs [redacted] Mcfadyen - No Data Recorded
21/11/2023 Triage Miss [redacted] Campbell
21/11/2023 Administration
As per GP actions - Listed for bloods W/C 04/12 and W/C 01/01/24. Already listed for depo-provera 19/12. Listed for review appt 3/12 for skin with ANP K [redacted]

Laura Campbell
HCA
21/11/2023
20:27 Dr Gp Stirling
21/11/2023 Triage Ms [redacted] Cleary - No Data Recorded
21/11/2023 Triage Mrs [redacted] Mcfadyen - No Data Recorded
21/11/2023 Surgery consultation Dr [redacted]
21/11/2023 Consultation GP [redacted]

1) Carbimazole. Was out at FVRH on 3/11 to see Dr [redacted] (endocrine). Georgina states that she was told to stop carbimazole after this appointment. Unfortunately no letter from this appointment on portal or docman. Plan had also been to check bloods at 1m (so begining of December) and a month after that. Therefore, I will request bloods for WB 4/12 for TFT and then a month after that. I will also ask admin to contact secretaries at FVRH to chase up formal letter from Dr [redacted]
2) Acne - worst around chin. Has tried 'all of the topical treatments' with no effect/reported allergy with BP. Started lymecycline earlier in the year (with good effect), prior to this had erythromycin with no effect. Worth trying 3m doxy then review with ANP K [redacted]
3) Headaches - right frontal pulsation. Can last up to four days then settle spontaneously. Under a lot of stress which she thinks aggravtes it. Triggered by bright lights and concentrating on drawing. Recent optician review ok. Headaches dont stop her doing anything. No vomitting, no diplopia, no visual change. Having 2 headaches/month. Sound like tension headaches, nil red flags. For simple analgesia PRN in first instance and review in 3m. If change/get worse in the interim then will send in a slip
Plan:
- Bloods WB 4/12 and begining Jan
- Admin to liaise with endocrine secretaries.
- 3m doxyxycline100mg OD then review with [redacted]
- Monitor headaches, simple analgesia. Dr [redacted]
17/11/2023 Triage Ms Michelle Cleary - No Data Recorded
17/11/2023 Triage Mr Sharon Mccallum
17/11/2023 Self-referral Self referral - skin clinic, would like to see doctor. Listed for GP/ANP by NW Mr [redacted] Mccallum
14/11/2023 Triage Ms [redacted] Kilpatrick
14/11/2023 Administration Action from Gp clinic, note [redacted] already chased letter up.
[redacted] Kilpatrick
HCA
14/11/2023
19:29HRS Dr Gp Stirling
14/11/2023 Triage Ms Aileen [redacted]
14/11/2023 Administration NOS Admin called Endocrinology to chase letter, letter has not been typed as yet. Admin requested letter to be emailed once issued. Ms Aileen [redacted]
14/11/2023 Triage Mrs [redacted]
14/11/2023 Ongoing review ANP L.Kane
Triaging appt - was listed for review of carbimazole as patient handed back her meds as she states consultant advised her to stop these.
She was reviewed 11 days [redacted] in clinic and no letter back as yet
Will ask admin to chase clinic letter from endocrinology as patient as she is now not taking these
14/11/2023 Third Party Consultation Ms Aileen [redacted]
14/11/2023 Document Image Docman Attachment
14/11/2023 Administration Administration HMPYOI Stirling In-Possession Medication Check Ms Aileen [redacted]
09/11/2023 Triage Ms [redacted]
09/11/2023 Ongoing review ANP pharmacy
ANP K [redacted]
pharmacy advised patient handed back in carbimazole.
not discontinued at this time i noted appt next week to discuss medication at patients request. await outcome
09/11/2023 Clinic Dr J Green (Ad)
09/11/2023 Speech therapy Seen on [redacted] accompanied by Speech and Language Therapy [redacted] McCandlish.

Georgina appeared in good spirits and consented to session. She had completed work on communication profile as requested. Discussed current needs, Georgina expressing concern that SPS may wish her to do further rehabilitation work when she feels she should focus on stability and preparation for liberation (due for liberation July 2025). Agreed with Georgina that a period of stable preparation, with support [redacted] transition, is important. Asked Georgina to complete a communication dictionary as she raised that staff often do not understand her needs and early warning signs of distress. Georgina reported that she has a RMT due relatively soon. Agreed I will seek to attend this, also will share progess with her social worker [redacted]

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...orker Sarah Simpson.

Next steps: to see to complete communication profile and agree communication dictionary.

Jan Green
Clinical Lead Speech and Language Therapy
09/11/23 4pm
Dr J Green (Ad)

09/11/2023 Triage Ms Hina Khizar
09/11/2023 Medication - risk monitoring 08.11.23 Patient has returned 20 tablets of Carbimazole 5mg, stating the reason that the hospital has told her to stop taking the said medicine. Dr Gp Stirling

08/11/2023 Triage Ms [redacted]
08/11/2023 Consultation S. [redacted] in clinic
B. Wants to speak to gp regarding medications
A. Does not want to speak to nurse states has not seen gp since coming to stirling and would like an appt with gp to discuss medication. States previously on meds that worked for her and have been stopped. Would not elaborate as feels nurses cant help as we dont prescribe.

R. Booked in with GP for next week to r/v meds Ms [redacted] Mitchell

07/11/2023 Other Dr [redacted] Kildare
07/11/2023 Ongoing review ANP K.Murphy/GP J.Kildare
Actions
Dates up for review of Pizotifen, Famotidine - reviewed and continued
Beclometasone nasal spray stopped as was for seasonal allergic rhinitis Dr [redacted] Kildare

06/11/2023 Triage Ms Jill Ramsay
06/11/2023 Consultation Requested to be seen in halls, reports is being bullied in halls. Has reported this to officers who state they can no get involved. Feels this is impacting on her mental health, has put referal in for MHT, I will also raise this with them. States is able to keep self safe and has no thoughts of suicide, advised to approach staff if anything changes
PCT SN JRamsay 6/11/23 19.58 Dr Gp Stirling

06/11/2023 Triage Mrs [redacted] Mcfadyen
06/11/2023 Self-referral PCT - JR - To be seen regarding medication Mrs [redacted] Mcfadyen

06/11/2023 Triage Ms Jill Ramsay - No Data Recorded

03/11/2023 Third Party Consultation Mr Sharon Mccallum
03/11/2023 Document Image Docman Attachment
03/11/2023 Administration Kardex HMPYOI Stirling Pharmacy Mr [redacted] Mccallum

03/11/2023 Triage Ms Jill Ramsay - No Data Recorded

31/10/2023 Triage Mrs [redacted] Mcfadyen
31/10/2023 Next hospital appointment 07/12/2023 11:15
Stobhill Hospital 133 Balornock Road Glasgow G21 3UW
Dermatology
Georgina Smith 131344
04/12/1991
Normal Mrs Sian Mcfadyen

25/10/2023 Triage Ms [redacted] Binnie - No Data Recorded

24/10/2023 Triage Ms Eilish Mcbeth
24/10/2023 Ongoing review
ANP action
Dr [redacted] & E McBeth
Listed for bisacodly to be restarted as struggling with constipation - same prescribed. Ms Eilish Mcbeth

23/10/2023 Triage Ms [redacted] Binnie - No Data Recorded

20/10/2023 Triage Ms [redacted]
20/10/2023 Consultation Listed for GP to review Bisacodyl.
[redacted] stated she would like to have her medication reinstated as she is struggling to have regular bowel movements.

PCT [redacted]
20/10/23
17:03 Dr Gp Stirling

20/10/2023 Surgery consultation Ms [redacted] Halliday - No Data Recorded

20/10/2023 Third Party Consultation Ms Aileen Berry
20/10/2023 Document Image Docman Attachment
20/10/2023 Result Results HMP Cornton Vale Clinical Chemistry Ms Aileen [redacted]

19/10/2023 Triage Ms [redacted] Cleary - No Data Recorded

19/10/2023 Triage Ms [redacted] Rennie
19/10/2023 Administration NOS Contacted X-Ray on 01786 454508 to re-arange appointment. They have noted that appointments in Forth Valley Royal will contact the Health Centre with a new appointment. Ms [redacted] Rennie

19/10/2023 Triage Ms [redacted] Rennie
19/10/2023 Failed encounter - hospital appointment Geomay Refused transport - 20/10/2023 10:10
Stirling Health & Care Village, Livilands Gate, Stirling FK8 2AU
X-Ray Reception, GP & Minor Injuries Centre
Georgina Smith / 131344
04/12/1991
Normal Transport
Geomay refused.
Ms [redacted] Rennie

19/10/2023 Triage Ms [redacted] Rennie - No Data Recorded

19/10/2023 Triage Ms Kathleen Quail
19/10/2023 Drug addiction therapy
S - Met with [redacted] for Prison Healthcare Addictions Service one to one support. Verbal consent to proceed obtained.
B - Georgie is currently illicit drug free.
A - Appeared kempt, maintained eye contact, behaved in keeping with setting, communication was bright, reactive [redacted] rate and tone. Relapse prevention plan was discussed. [redacted] has been working through this and today we finalised the paper [redacted] her plan for release.
R - Relapse prevention paperwork e-mailed to Angela France and a copy given to [redacted]
See in 4/52
[redacted] Quail, Substance Use and Recovery Team HMPS
14.10
Ms Kathleen Quail

19/10/2023 Triage Mrs [redacted]

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19/10/2023 Ongoing review ANP [redacted]
Mail
Review of bloods
LFTs- normal

19/10/2023 Triage Ms [redacted] Binnie - No Data Recorded
19/10/2023 Third Party Consultation Ms Aileen [redacted]
19/10/2023 Document Image Docman Attachment
19/10/2023 Result Results HMP Cornton Vale Clinical Chemistry Ms Aileen [redacted]
19/10/2023 Triage Mrs [redacted]
19/10/2023 Ongoing review ANP L [redacted]
Pharmacy
Asked to review carbimazole
Last TFTs 3 days ago- Within normal range
Has endocrine appt 3/11/23
- continued
17/10/2023 Triage Ms Aileen Berry
17/10/2023 Next hospital appointment Stirling Health & Care Village at 10:10
US Abdominal Scan
X-Ray Reception, GP & Minor Injuries Centre
Normal Transport
Ms Aileen [redacted]
17/10/2023 Triage Ms Aileen [redacted]y - No Data Recorded
17/10/2023 Triage Ms Jill Ramsay - No Data Recorded
16/10/2023 Triage Miss Blyth [redacted]
16/10/2023 Consultation S- Seen in clinic
B- Allergic reacting to gluten
A- States she has had an allergic reaction to gluten food
Rash appeared on chest going up to underneath chin - appears to have settled by time of seeing [redacted]
Already prescribed fexofenadine
BP 123/80, HR 88, Sp02 99% temp 36.9, resp 16
R- Will discuss with Dr Kildare re-difflam spray
?gluten free diet marker

SN Blythe Johnston/SN [redacted] Weir
1510 Miss Blyth [redacted]
16/10/2023 Triage Ms [redacted] Kilpatrick
16/10/2023 Seen by health care assistant Seen Georgina in clinic for bloods LFT obtained and sent to labs.
[redacted] Kilpatrick
HCA
16/10/2023
Dr Gp Stirling
16/10/2023 Triage Ms [redacted] Kilpatrick - No Data Recorded
13/10/2023 Triage Mrs [redacted] Stewart
13/10/2023 Self-referral Nurse Triage - AM - Would like to discuss diet. Added to Nurse Triage Waiting list and card sent to patient to confirm. Mrs [redacted]
10/10/2023 Clinic Dr J Green (Ad)
10/10/2023 Speech therapy Seen on hall.
Discussed recent referral. Georgina reported that she has been trying to explain her communication needs to staff but feels that she is not listened to. Agreed to work jointly on a communication profile. Gave Georgina outlines guidance to allow her to prepare notes for next session on 24/10/23.

Jan Green
Clinical Lead Speech and Language Therapy
10/10/23 4.10pm Dr J Green (Ad)
10/10/2023 Other Dr [redacted] Kildare
10/10/2023 Ongoing review MOA - dates up for review of Lymecycline - been on since Feb 23 so stop date applied for beginning of Nov
Dr [redacted] Kildare
06/10/2023 Triage Ms [redacted] Weir
06/10/2023 Consultation S - Seen in healthcentre.
B - Self referral to discuss medication
A - Bisacodyl discontinued due to refusal. Due to an excess of medication transferred from polmont with [redacted] another monthly bag was not required at time of dispensing and therefore 'refused'. [redacted] states she has been on this medication long term and [redacted] requires to be prescribed it.
Georgie also requesting throat spray to be prescribed again due to irritation from eating foods with gluten.
R - Listed for GP/ANP review.

[redacted] Weir
PCT
06/10/2023
1450HRS Dr Gp Stirling
06/10/2023 Triage Ms Karen Murphy
06/10/2023 Ongoing review ANP action
ANP K Murphy
pharmacy review Lymecycline patient has been on since Feb extended for 1 months
if requested again will need listed for review appointment.
05/10/2023 Triage Mr [redacted] Mccallum
05/10/2023 Self-referral Discuss meds I have been took off. SP Mr Sharon Mccallum
05/10/2023 Triage Ms [redacted] Binnie - No Data Recorded
29/09/2023 Triage Mr [redacted] Mccallum

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29/09/2023 Next hospital appointment 03/11/2023 @ 9:30 AM
Forth Valley Royal Hospital, Stirling Road, Larbert, FK5 4WR
Endocrinology - Oupatients Area 3
Georgina Smith / 131344
04/12/1991
Normal

29/09/2023 Triage Ms Jade Binnie
29/09/2023 Weight: 69.7 kgs BMI: 25.6 O/E - weight Dr Gp Stirling
29/09/2023 Seen by health care assistant Seen in HC for weight

[redacted] Binnie
HCA
29/09/2023 Dr Gp Stirling
29/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
29/09/2023 Triage Ms Jill Ramsay - No Data Recorded
27/09/2023 Third Party Consultation Mr [redacted] Mccallum
27/09/2023 Document Image Docman Attachment
27/09/2023 Administration Clinical Letter HMP Cornton Vale In possesion medication check form Mr Sharon Mccallum
27/09/2023 Third Party Consultation Mr Sharon Mccallum
27/09/2023 Document Image Docman Attachment
27/09/2023 Administration Clinical Letter HMP Cornton Vale In possesion medication check form Mr [redacted] Mccallum
26/09/2023 Triage Ms Hina Khizar
26/09/2023 Medication - risk monitoring Spot Check 25.09.23
Noted to have excess of the following meds:
Amitryptyline 75mg (+1)
Pizotifen 1.5mg (+1)
Famotidine 40mg(+1)
Fexofenadine 120mg (+1)
Lymecycline 408mg (+3)
Quetiapine 175mg (+1) Dr Gp Stirling
26/09/2023 Triage Ms [redacted]
26/09/2023 Recall on 19/12/2023 for Depo-provera injection given with Ms [redacted] Status: Complete
26/09/2023 Depo-provera injection given First service recall due: 19/12/2023 Claim Expiry Date: 19/12/2023 08/2025
gn3573
673466293251 Ms [redacted]
25/09/2023 Triage Ms R [redacted] Weir - No Data Recorded
25/09/2023 Triage Ms Aileen [redacted]
25/09/2023 Self-referral Nurse KH - Depo jag. Ms Aileen [redacted]
25/09/2023 Triage Ms Keleigh Mournian - No Data Recorded
22/09/2023 Triage Ms Keleigh Mournian
22/09/2023 Consultation
T/C from Iris staff to state Georgina was in some discomfort with her stomach.
Attended [redacted] to advise Georgina that dr had px lactulose and pharmacy had ordered it.
Georgina happy with this, no other problems reported.

Keyleigh Hale
PCT
22.09.2023
19.18 Dr Gp Stirling
22/09/2023 Triage Ms Keleigh Mournian - No Data Recorded
22/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
22/09/2023 Other Dr [redacted] Kildare
22/09/2023 Ongoing review MOA - constipated - requesting treatment - try Lactulose 10-15ml up to BD and review if not settling Dr [redacted] Kildare
21/09/2023 Triage Ms [redacted]
21/09/2023 Consultation S: Seen in Iris at 19:30
B: Bloated stomach and discomfort.
A: Patient stated she has not moved her bowels in 5 days and feels bloated.
Palpated her stomach which was hard and asked if she had been drinking enough fluids and eating fibre. Patient adivsed that she has been drinking enough fluids but the food in the prison does not agree with her. This has been an ongoing issue ad is being reviewd.
R: Have listed for GP to prescribe a Laxative

PCT [redacted]
21/09/23
20:07 Dr Gp Stirling
21/09/2023 Triage Ms [redacted] - No Data Recorded
20/09/2023 Third Party Consultation Ms Aileen [redacted]
20/09/2023 Document Image Docman Attachment
20/09/2023 Administration Clinical Letter HMP Cornton Vale Endocrinology Ms Aileen [redacted]
20/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
20/09/2023 Triage Ms [redacted] Binnie
20/09/2023 Seen by [redacted] h care assistant Aready listed for TFT bloods 16/10

[redacted] Binnie
HCA
20/09/2023 Dr Gp Stirling
20/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
20/09/2023 Administration Dr [redacted]
20/09/2023 Ongoing review GP actions [redacted]
Carbimazole reduced to 5mg as per endocrine.
Follow up arranged as per yesterdays entry Dr [redacted]
19/09/2023 Other Miss [redacted] Mckeich

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19/09/2023 Consultation ANP mail, review bloods, see entry 14/9/23
TSH 1.79, T4 10.1, T3 3.0
All within range
Letter from endocrinology - to reduce carbimazole to 5mg daily, kardex requested - listed in actions then for repeat bloods in 4 weeks - listed in ordercomms. Miss [redacted] Mckelch
18/09/2023 Third Party Consultation Ms Aileen [redacted]
18/09/2023 Document Image Docman Attachment
18/09/2023 Administration Clinical Letter HMP Cornton Vale Endocrinology Ms Aileen [redacted]
18/09/2023 Third Party Consultation Ms Aileen Berry
18/09/2023 Document Image Docman Attachment
18/09/2023 Result Results HMP Cornton Vale Clinical Chemistry Ms Aileen Berry
14/09/2023 Triage Ms [redacted] Weir
14/09/2023 Seen by health care assistant Seen in healthcentre for virtual appt.
Computer sound not working - Changed to telephone consultation.
Nurse Gillian Tough from endocrinology FVRH requested TFT bloods - obtained with consent and sent to labs.
Follow up appt in 6/52 with endocrinology consultant r.e treatment plan.
Weight obtained - 70.2kg.

HCA R WEIR
14/09/2023
1114HRS
Dr Gp Stirling
14/09/2023 Weight: 70.2 kgs BMI: 25.7 O/E - weight Dr Gp Stirling
08/09/2023 Surgery consultation Ms [redacted] Halliday
08/09/2023 Consultation Prescription of Quetiapine increased from 150mg PM to 175mg PM as per request from Dr [redacted] Swinson.

Prescription increase to take effect from Tuesday12th to allow for same to be delivered by pharmacy. 150mg PM prescription to continue until Monday 11th and then discontinue.

[redacted] Halliday
MH T/L
08/09/23
1142 Ms Cara Halliday
06/09/2023 Triage Ms Hina Khizar - No Data Recorded
05/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
05/09/2023 Third Party Consultation Mr Sharon Mccallum
05/09/2023 Document Image Docman Attachment
05/09/2023 Administration Administration HMP Cornton Vale Medical Marker Mr [redacted] Mccallum
05/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
05/09/2023 Other Dr [redacted] Kildare
05/09/2023 Ongoing review GP J.Kildare/Chronic Disease Nurse E.McBeth
Actions
Requesting medical marker again for lactose free products - see entry from Dieticians 07/12/22 on Clinical Portal - she is not dairy intolerant but they are in agreement for a marker to be given for lactose free products
Medical marker completed Dr [redacted] Kildare
04/09/2023 Triage Mrs Jane Watt
04/09/2023 Mental health review Request for increase in medication
I had met with Georgie 2 weeks ago in the hall. She told me that since moving back to Stirling the smaller household was causing her to be more anxious. She reports that the dynamics of the personalities within the unit makes her more withdrawn as she fears she will react inappropriately if "pushed". She finds herself struggling to sleep and "worries all the time".
[redacted] has not required any input from MHT for over 1 year, also not had a medication review/change in this time. She believes a small increase in her Quetiapine will benefit her at this time. For discussion at CTM.
[redacted] Watt
SSN MH Dr Gp Stirling
01/09/2023 Triage Mr [redacted] Mccallum
01/09/2023 Self-referral Self referral - Well women - not nurse clinic! DF Mr [redacted] Mccallum
30/08/2023 Triage Ms Su [redacted] Pa [redacted]
30/08/2023 Administration Patient cancelled appointment.

PCT [redacted]
30/08/23
10:57 Dr Gp Stirling
25/08/2023 Triage Mrs [redacted] Watt
25/08/2023 Mental health review Request for medication increase
I met with [redacted] in Iris this evening. She reports that since coming back to Stirling she has had problems getting to sleep. The environment is causing her more distress. Believes an increase in her Quetiapine would be helpful.
I advised her that I would ask for this to be reviewed for increase at CTM.
[redacted] Watt
SSN MH Dr Gp Stirling
25/08/2023 Triage Ms [redacted] Binnie - No Data Recorded
23/08/2023 Triage Ms Laura Kilpatrick - No Data Recorded
23/08/2023 Triage Ms [redacted] Binnie
23/08/2023 Administration Actions from ANP
Listed for weight in 2 months.

[redacted] Binnie
HCA
23/08/2023 Dr Gp Stirling
23/08/2023 Administration Dr [redacted]
23/08/2023 Ongoing review GP [redacted]
Request to determine if needs to continue with weekly weights - from looking at the notes I dont think this is required. For one off weight in 2m and look at trent then.

Also 'Requesting Lactose Free Diet but not sure if she has been diagnosed as lactose intollerant.'. Not diagnosed. Can simply avoid items on the menu that she wishes to. Dr [redacted]

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21/08/2023 Triage Ms [redacted] Ford - No Data Recorded
21/08/2023 Triage Ms [redacted] Cleary
21/08/2023 Weight: 69.6 kgs BMI: 25.5 O/E - weight Ms [redacted] Cleary
17/08/2023 Triage Ms [redacted] patrick
17/08/2023 Weight: 69.1 kgs BMI: 25.3 O/E - weight Dr Gp Stirling
15/08/2023 Triage Ms [redacted] Binnie - No Data Recorded
14/08/2023 Triage Ms [redacted] Kilpatrick
14/08/2023 Seen by health care assistant Seen in clinic for weight, as documented below

[redacted] Kilpatrick
HCA
14/08/2023
10:23HRS Dr Gp Stirling
14/08/2023 Weight: 69.5 kgs BMI: 25.5 O/E - weight Dr Gp Stirling
10/08/2023 Triage Ms [redacted] Cleary - No Data Recorded
10/08/2023 Other Dr Craig Savers
10/08/2023 Ongoing review Lab results noted - already initiated on Carbimazole as per endocrine request Dr [redacted] Sayers
10/08/2023 Triage Ms Lyndsay Mccracken
10/08/2023 Weight: 69.3 kgs BMI: 25.4 O/E - weight Ms Lyndsay Mccracken
09/08/2023 Triage Ms [redacted] le Cleary - No Data Recorded
09/08/2023 Third Party Consultation Mr [redacted] Mccallum
09/08/2023 Document Image Docman Attachment
09/08/2023 Administration Haematology Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
09/08/2023 Third Party Consultation Mr [redacted] Mccallum
09/08/2023 Document Image Docman Attachment
09/08/2023 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
08/08/2023 Third Party Consultation Mrs [redacted] Taylor
08/08/2023 Document Image Docman Attachment
08/08/2023 Administration Clinical Letter NHS Forth Valley Endocrinology Mrs [redacted] Taylor
08/08/2023 Other Dr [redacted] Kildare
08/08/2023 Ongoing [redacted]iew MOA Mail - see response from Endocrine - to start Carbimazole 10mg OD and await appt from Endocrine for review Dr [redacted] Kildare
07/08/2023 Third Party Consultation Mr [redacted] Mccallum
07/08/2023 Document Image Docman Attachment
07/08/2023 Administration Clinical Letter Forth Valley Royal Hospital Endocrinology Mr [redacted] Mccallum
07/08/2023 Triage Ms [redacted] Johnston - No Data Recorded
07/08/2023 Third Party Consultation Mr [redacted] Mccallum
07/08/2023 Document Image Docman Attachment
07/08/2023 Administ[redacted] Administration HMP Cornton Vale Glasses Reciept Mr [redacted] Mccallum
07/08/2023 Triage Ms [redacted] Rennie
07/08/2023 Planned [redacted]phone contact Video link - 14/09/2023 10:30
Endocrinology
Georgina Smith/131344
04/12/1991
01324 566249
https://nhsattend.vc/fv-endocrine
Ms [redacted] Rennie
07/08/2023 Triage Ms [redacted] Cleary
07/08/2023 Weight: 69.6 kgs BMI: 25.5 O/E - weight Ms [redacted] Cleary
07/08/2023 [redacted] by health care assistant
Repeat bloods taken as requested U&E LFT,TSH,EGFR,T3,T4
[redacted] Cleary
HCA
11.40
07/08/2023
Ms [redacted] Cleary
04/08/2023 Triage Ms Ailsa Russell - No Data Recorded
04/08/2023 Triage Mrs L[redacted]
04/08/2023 Ongoing review ANP L[redacted]
Discussed with pharmacy staff regarding gluten free foods
Wishes some changes
I have asked pharmacy to give Georgina the list and ask her to pick her 16 units and I will re-write her a kardex with GF foods only on this
03/08/2023 Triage Ms Laura Kilpatrick
03/08/2023 Weight: 70.2 kgs BMI: 25.7 O/E - weight Dr Gp Stirling
01/08/2023 Referral Letter Dr Jack Kildare
01/08/2023 SCI Referral Letter
01/08/2023 Other Dr [redacted] Kildare
01/08/2023 Ongoing review MOA - bloods reviewed - anti-TSH antibodies negative - USS neck requested and referral sent to Endocrine for advice Dr [redacted] Kildare
31/07/2023 Triage Ms Jill Ramsay
31/07/2023 Weight: 71 kgs BMI: 26 O/E - weight Dr Gp Stirling
31/07/2023 Triage Ms Keleigh Mournian
31/07/2023 Consultation
Asked by SSN J Ramsay to check review of bloods.
Note blood results below ?review.
Listed for repeat bloods on 07/08 as instructed by SSN.
Recheck same bloods as before

Keyleigh [redacted]
PCT
31.07.2023
15.14 Dr Gp Stirling
28/07/2023 Triage Ms [redacted]

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28/07/2023 Ongoing review ANP mail
ANP K[redacted]
lab results
U &es ok
EGFr >59 good
LFT ok
TSH 0.01
T4 was 27.2 now 22.6
T3 was 6.6 now 7.4
kardex to review medications

27/07/2023 Triage Ms Jade Binnie
27/07/2023 Weight: 70.2 kgs BMI: 25.7 O/E - weight Dr Gp Stirling
27/07/2023 Third Party Consultation Mr[redacted] Mccallum
27/07/2023 Document Image Docman Attachment
27/07/2023 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr[redacted] Mccallum
27/07/2023 Administration Dr[redacted] Oswald
27/07/2023 Ongoing review GP[redacted]
Mail
Not all bloods back yet, anti TSH/TPO outstanding, wait for these results to come through and then review. Dr[redacted]
26/07/2023 Third Party Consultation Mr S[redacted] Mccallum
26/07/2023 Document Image Docman Attachment
26/07/2023 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr[redacted] Mccallum
24/07/2023 Triage Ms[redacted] Binnie
24/07/2023 Seen by health care assistant Seen in HCA clinic for bloods
Successfully obtained and sent to labs

[redacted] Binnie
HCA
24/07/2023 Dr Gp Stirling
24/07/2023 Weight: 70.1 kgs BMI: 25.7 O/E - weight Dr Gp Stirling
24/07/2023 Triage Ms Jade Binnie - No Data Recorded
21/07/2023 Triage Ms[redacted] Kilpatrick
21/07/2023 Administration Listed for bloods for next week as requested.

[redacted] Kilpatrick
HCA
21/07/2023
18:58HRS Dr Gp Stirling
21/07/2023 Other Dr[redacted] Kildare
21/07/2023 Hyperthyroidism ANP L.Kane/GP J.Kildare
Mail
See bloods - TSH undetectable with hyperthyroidism
Please repeat bloods next week - FBC, U&Es, LFTs, HbA1c, TSH with Anti-TSH and Anti-TPO antibodies
Can review following this and if remains raised for referral to Endocrine team Dr[redacted] Kildare
20/07/2023 Third Party Consultation Mr Sharon Mccallum
20/07/2023 Document Image Docman Attachment
20/07/2023 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr[redacted] Mccallum
20/07/2023 Third Party Consultation Mr[redacted] Mccallum
20/07/2023 Document Image Docman Attachment
20/07/2023 Administration Microbiology Results Forth Valley Royal Hospital Microbiology Mr[redacted] Mccallum
20/07/2023 Third Party Consultation Mr[redacted] Mccallum
20/07/2023 Document Image Docman Attachment
20/07/2023 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr[redacted] Mccallum
20/07/2023 Third Party Consultation Mr[redacted] Mccallum
20/07/2023 Document Image Docman Attachment
20/07/2023 Administration Haematology Results Forth Valley Royal Hospital Labs Mr Sharon Mccallum
20/07/2023 Triage Ms[redacted] Binnie
20/07/2023 Weight: [redacted] kgs BMI: 26.2 O/E - weight Dr Gp Stirling
19/07/2023 Triage Ms[redacted] Binnie - No Data Recorded
19/07/2023 Triage Ms[redacted] Binnie - No Data Recorded
17/07/2023 Triage Ms[redacted] Binnie
17/07/2023 Weight: 71.1 kgs BMI: 26.1 O/E - weight Dr Gp Stirling
17/07/2023 Seen by health care assistant Seen in clinic for bloods
Successfully obtained from L arm
Sent to labs

[redacted] Binnie
HCA
17/07/2023 Dr Gp Stirling
16/07/2023 Triage Ms[redacted] Binnie - No Data Recorded
14/07/2023 Other Miss[redacted] Mckeich
14/07/2023 Consultation ANP entry, request to discontinue bisacodyll as patient refusing, done Miss[redacted] Mckeich
14/07/2023 Triage Ms[redacted] Binnie - No Data Recorded
14/07/2023 Third Party Consultation Mr[redacted] Mccallum
14/07/2023 Document Image Docman Attachment
14/07/2023 Administration Clinical Letter HMP Stirling X-Ray X-Ray Referral Mr[redacted] Mccallum
14/07/2023 Triage Ms[redacted] Binnie - No Data Recorded
14/07/2023 Other Miss[redacted] Mckeich

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14/07/2023 Consultation ANP entry, seen patient, c/o few issues:

1. acne to face, requesting treatment, requesting lymecycline, unable to use benzoyl peroxide - allergy - rash, lymecycline prescribed.

2. requesting throat spray for throat pain, occasional pain to throat when eating certain foods, usually when ubale to get gluten free, mouth examined, throat red, no inflammation, no pus, T37.1, centor score 0, rx difflam x 7 days

3. Feels tired and been loosing weight
present for last 3 weeks
concerned something is wrong
note weight March 23 75kg
weight today 70.4kg
Believes there is something sinister going on
o/e looks well
talking whole sentences
gait normal
has good appetite, states eats regularly (hx eating disorders)
drinking plenty fluids
mouth - throat slightly red/painful - swab taken
swallowing - no issues
vomited 2 days ago, vomited after visit - had ate packet of crisps - foodstuff/bile
Not vomited since but nauseous
feels gets sweats when walking about
new pain to abdomen - pain actually on back when patient pointed to area
pain on palpation back, midline, right side
no flank pain
abdo soft and non tender
no gaurding/referred pain
bowel sounds present
bladder - urine - passing more than normal, no pain, slight odour
recent urine dip NAD
bowels: ok, normal stool, last moved yesterday, moves once daily, no blood
SH - last screen few months [redacted] - clear - states not put self at risk since
Imp: ? msk pain, patient advised
? reason for weight loss over last 3mths
Plan: listed patient for bloods - FBC, U&E, LFT, CRP, TFT, Hba1c,
for 2 weekly weight
worsening advice given

4. Patient also c/o lumps to abdomen
o/c numerous stretch marks over abdomen
on palpation 3 small lesions felt lower abdomen just above pelvic area
small circular lesions
smooth borders
appear attached to underlying skin
Imp: ? lypoma/small cyst
Patient believes they may be sinister, anxious
Agreed for referral for ultrasound
worsening advice given
Miss [redacted] Mckeich

13/07/2023 Triage Ms [redacted] Binnie
13/07/2023 O/E - temperature level = 36.8 degC Dr Gp Stirling
13/07/2023 O/E - pulse rate 79 beats/min Dr Gp Stirling
13/07/2023 Pulse oximetry 97 % Dr Gp Stirling
13/07/2023 11:29.00 BP 102 / 70 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
13/07/2023 Weight: 70.5 kgs BMI: 25.8 O/E - weight Dr Gp Stirling
13/07/2023 Seen by health care assistant Seen in HCA clinic for urinalysis and full set obs
Georgina disgruntled to see it was not a dr/anp but explained that she would need to see a hca/nurse initially to know if it is suitable to see a dr and she said 'ive seen yous fucking hunners of times'
Georgina complaining of sore back and sides - shooting pains - asked me to include this in notes as she said can be unbearable at times
Urinalysis negative
Observations recorded:

[redacted] Binnie
HCA
13/04/2023 Dr Gp Stirling
11/07/2023 Triage Ms [redacted] Binnie
11/07/2023 Administration Actions from GP/ANP clinic
Nil bloods required
Listed for urinalysis, full set of observations

[redacted] Binnie
HCA
11/07/2023
Dr Gp Stirling
11/07/2023 Other Dr [redacted] Kildare
11/07/2023 Ongoing review ANP J.McKeich/GP J.Kildare
Actions
Triage entry noted below - [redacted] more information here and routine observations before it can be decided if bloods are necessary - at the moment I dont feel bloods are indicated Dr [redacted] Kildare
10/07/2023 Third Party Consultation Mr [redacted] Mccallum
10/07/2023 Document Image Docman Attachment
10/07/2023 Administration Administration HMP Stirling Optician Patient Response Letter Mr [redacted] Mccallum
10/07/2023 Triage Ms Keleigh Mournian

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10/07/2023 Consultation
S-Seen in triage room
B-Submitted a self referral requesting bloods to be taken
A-Patient states she feels tired and lethargic all the time and feels like she overheats at times.
R-Will list for GP/ANP actions to query if any bloods required?

Keyleigh Hale
PCT
10.07.2023
10.45 Dr Gp Stirling
06/07/2023 Triage Ms [redacted] Rennie
06/07/2023 Self-referral PCT - MM - Would like bloods taken and copy of cell markers. Admin will check if there are any cell markers issued by HMP STirling and forward these to the patient Ms [redacted] Rennie
05/07/2023 Other Miss [redacted] Mckeich
05/07/2023 Consultation ANP actions, requesting bisacodyl monthly and bonjela for cold sores. No concerns from MHT, bisacodyl changed to monthly and prescribed bonjela. Miss [redacted] Mckeich
05/07/2023 Other Miss [redacted] Mckeich - No Data Recorded
04/07/2023 Third Party Consultation Mr S [redacted] Mccallum
04/07/2023 Document Image Docman Attachment
04/07/2023 Administration Administration HMYOI Polmont Transfer Paperwork Mr [redacted] Mccallum
03/07/2023 Triage Ms Lyndsay Mccracken
03/07/2023 Self-referral recieved self referral form ? if Georgina could possibly have her bisacodyl 5mg tablets changed to monthly instead of weekly.
I have had a look at [redacted] kardex and it is prescribed she can take 1-2 tablets per day. She reports on referral that she takes 1 tablet per night however, feels if she recieved monthly's she would have enough to be able to take 2 tablets where necessary.
It is not documented in kardex how many tablets are issued on a weekly basis.
I will list for GP/ANP actions to ? if changing to monthly is an option.

PCT S/N Lyndsay McCracken
12.14 Ms Lyndsay Mccracken
03/07/2023 Triage Ms Lyndsay Mccracken
03/07/2023 Seen by triage nurse S- self referral recieved
B- Listed for review of mouth ulcers from dental referral
A- Seen Georgina in clinic this morning for review. Stated she had put a dental rferral in as her dentures are causing her to develop mouth ulcers.
Also when in clinic Georgina reported she feels like she has a urine infection. Urine test obtained and tested which was negative.
Encouraged to drink more fluids.
R- List for ANP/GP actions for bonjella for mouth ulcer until dentist has appointment available

PCT S/N Lyndsay McCracken
09.54 Ms Lyndsay Mccracken
03/07/2023 Triage Ms Lyndsay Mccracken - No Data Recorded
30/06/2023 Triage Mr Connor [redacted]y - No Data Recorded
29/06/2023 Triage Ms Susan Payne
29/06/2023 Administration Listed for PCT clinic Monday 03/07/23

PCT [redacted]
13:14
29/06/23 Dr Gp Stirling
29/06/2023 Triage Mr [redacted] Mccallum
29/06/2023 Self-referral mouth ulcers and sore. SP Mr [redacted] Mccallum
28/06/2023 Triage Ms Lyndsay Mccracken
28/06/2023 Seen by triage nurse S- self referral recieved
B- Ongoing skin [redacted] to face.
A- [redacted] Georgina in clinic this [redacted] regarding skin [redacted]. Reports she has been awaiting appointment for skin clinic since she has been in both Corntonvale and Lilias.
Georgina had full face of make up on therefore unable to review appropriately. She states she would like commenced back on antibiotics however have advised skin would need reviewed first. She is happy with this.
Georgina also reports she has teeth issues and has been advised to self refr for dentist.
R- List for ANP Murphy to review skin on return to HMP Stirling.

PCT S/N Lyndsay McCracken
10.52 Ms Lyndsay Mccracken
27/06/2023 Triage Ms [redacted]
Letter on: 27/06/2023 type: Referral Smear Results
22/05/2023 reported 27/06/2023 Cervical smear result HPV - Human papillomavirus test negative recall due: 22/05/2028 Ms [redacted]
22/05/2023 Recall on 22/05/2028 for Cervical smear result with Ms [redacted] Status: Outstanding
27/06/2023 Triage Ms Sus[redacted] Payne
27/06/2023 Consultation Listed for PCT clinic 28/06/23 : Skin issues

PCT [redacted]
11:50
216/06/23 Dr Gp Stirling
26/06/2023 Triage Mr Sharon Mccallum
26/06/2023 Self-referral Skin Clinic
Optician Self-referral - Broken/lost glasses. Mr [redacted] Mccallum
22/06/2023 Third Party Consultation Ms [redacted] Rennie
22/06/2023 Document Image Docman Attachment
22/06/2023 Administration Clinical Letter HMP Cornton Vale Medical Marker Ms [redacted] Rennie
22/06/2023 Triage Ms Jill Ramsay
22/06/2023 Consultation Medical marker put in place for dietry requirements.
PCT DTL JRamsay 22/6/23 07.46 Dr Gp Stirling
22/06/2023 Triage Ms Jill Ramsay - No Data Recorded
22/06/2023 Triage Ms Jill Ramsay - No Data Recorded

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

22/06/2023 Triage Ms Jill Ramsay : No Data Recorded
19/06/2023 Triage Ms Michelle Morris
19/06/2023 Transfer profile form completed Georgie is fine with being back. She is excited that she only has 24 months of her sentence left and is glad she is spending it at HMP Stirling. [redacted] does not feel like she requires any input or support from mental health or addictions and is aware of how to place referrals for services. Dr Gp Stirling
19/06/2023 Pulse oximetry 98 % Dr Gp Stirling
19/06/2023 O/E - rate of respiration = /minute Dr Gp Stirling
19/06/2023 O/E - temperature level = 37.1 degC Dr Gp Stirling
19/06/2023 O/E - pulse rate 90 beats/min Dr Gp Stirling
19/06/2023 13:54.00 BP 108 / 72 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
19/06/2023 Height: 1.65 metres O/E - height Dr Gp Stirling
19/06/2023 Weight: 72.9 kgs BMI: 26.7 O/E - weight Dr Gp Stirling
19/06/2023 No apparent risk of suicide Strongly denies any thoughts of suicide and is aware how to refer herself should things change. Dr Gp Stirling
19/06/2023 No thoughts of deliberate self [redacted] Denies any thoughts of [redacted] Dr Gp Stirling
19/06/2023 No drug therapy prescribed [redacted] has arrived with a kardex but we do not have her medications yet as her posessions are still in transit with SPS staff. Dr Gp Stirling
19/06/2023 Allergy Moderate H/O: non-drug allergy Allergic to lactose and gluten and requires non spice food. Medical marker will be completed. Dr Gp Stirling
19/06/2023 Third Party Consultation Mrs [redacted]
19/06/2023 Document Image Docman / [redacted]
19/06/2023 Administration Kardex/Recording Sheet HMPYOI Polmont Pharmacy Clinical Mrs [redacted]
17/06/2023 Triage Mr Steven Blunt
17/06/2023 Administration Patient record accessed for person escort record.

[redacted] Blunt MHT 17/6/2023 Dr Gp Stirling
26/05/2023 Triage Ms [redacted]
26/05/2023 Seen in [redacted] health clinic seen regardin vaginal dryness, no evidence os same during smear, or signs of irritation, keen for lubricant, advised bettert o try and resolve cause if becomes ongoing issue, awati results of recent testing and can self refer back if wishes. R [redacted] - sexual health nurse
26/05/2023 10:29 Ms [redacted]
22/05/2023 Triage Ms [redacted] Lawson
22/05/2023 Recall on 14/08/2023 for Depo-provera injection given with Ms [redacted] Lawson Status: Complete
22/05/2023 Depo-provera injection given First service recall due: Claim Expiry Date: Batch GK5704, EXP 02/2025. No UPSI since last period. Has had previously with good effect, other options discussed. Ms Rachel [redacted]
22/05/2023 Liquid ba[redacted]ology screening Ms [redacted]
12/05/2023 Triage Ms [redacted]
12/05/2023 Ongoing review ANP Actions
ANP K [redacted]
See below entry 11/05/23 DC SN review
Imp otis externa px gentamicion 0.3% / hydrocortisone ear drop 4-5 x daily 5 days not resolving list for ANP / GP review
Imp season allergies effect s eye px sodium cromglicate2% eye drops
MSU clear. Nil action required continue to push fluids
For review if not resolving

12/05/2023 Triage Mr [redacted] Carruthers
12/05/2023 Consultation - returned urine sample - ward tested and unremarkable .
D.Carruthers s/n 09.50 hours Mr [redacted] Carruthers
11/05/2023 Triage Mr [redacted] Carruthers
11/05/2023 Consultation S - seen in health centre
B - nurse clinic appointment
A - c/o ear ache particularly left ear - also sore throat - O/E - nil signs infection to throat - nil inflammation - nil pus or enlargement to tonsils - glans to neck not palpable - right ear ear drum intact - nil signs infection - left ear ear drum intact but evidence of inflammation - also concerned has UTI - strong smwelling urine.Also c/o early hayfever streaming eyes - states oral antihistamine not generally effective.
R - 1 IMP - [redacted] externa left ear - ANP actions gentisone ear drops or equivalent.
2 - opticrom eye drops or equivlant - ANP actions.
3 - universal container for return of urine sample - for ward test in the a.m - advised push fluids.
D.Carruthers S/N 14.35 hours Mr [redacted] Carruthers
11/05/2023 Triage Ms [redacted] Muir
11/05/2023 Weight: 75 kgs BMI: 27.5 O/E - weight Ms [redacted] Muir
11/05/2023 Seen by health care assistant [redacted] in hall for week 4 weight check. Liusted for ANP to review.
[redacted] Muir
HCA
1140
Ms [redacted] Muir
11/05/2023 Triage Ms [redacted] Muir - No Data Recorded
11/05/2023 Triage Mrs [redacted] Taylor
11/05/2023 Self-referral Dentist Dr Gp Stirling
10/05/2023 Triage Mrs [redacted]
10/05/2023 Self-referral [redacted] Health/BBV - Well Person Clinic - "Need smear done asap (overdue)" Added to SH waiting list and card sent to patient to confirm. Mrs [redacted]
05/05/2023 Triage Ms [redacted]
Letter on: 05/05/2023 type: Referral SH Results
05/05/2023 Hepatitis C antibody test negative = Ms [redacted]
05/05/2023 HIV negative = Ms [redacted] Lawson
05/05/2023 Hepatitis B surface antigen negative = Ms [redacted]
05/05/2023 Syphilis titre test negative = Ms [redacted]
05/05/2023 Triage Mr [redacted] Mccallum
05/05/2023 Self-refe[redacted]ore throat and head. Dr Gp Stirling
04/05/2023 Triage Ms [redacted] Penman
04/05/2023 Weight: 76 kgs BMI: 27.9 O/E - weight Ms [redacted] Penman

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04/05/2023 Seen by health care assistant Saw Georgina in [redacted] 2 to take her week 3 weight of 4 weeks as requested by AMP [redacted]
Her weight is 76kg. Have relisted her for her 4th weight on 11/5/23.

HCA
[redacted] penman 14.08 Ms [redacted] Penman
02/05/2023 Other Miss [redacted] Mckeich
02/05/2023 Consultation ANP entry J McKeich/K [redacted]
Requesting QV wash, prescribed Miss [redacted] Mckeich
27/04/2023 Triage Ms [redacted] Binnie - No Data Recorded
27/04/2023 Triage Ms [redacted] Thomson
27/04/2023 Seen by health care assistant in [redacted] 2 for weight.
[redacted]
HCA
16.20. Dr Gp Stirling
27/04/2023 Triage Ms [redacted] Thomson - No Data Recorded
22/04/2023 Triage Ms [redacted] - No Data Recorded
21/04/2023 Triage Ms [redacted] Binnie - No Data Recorded
21/04/2023 Triage Ms [redacted]
21/04/2023 Weight: 77 kgs BMI: 28.2 O/E - weight Dr Gp Stirling
21/04/2023 Seen by health care assistant in [redacted] 2 for weight.
Donna [redacted]
HCA
11.50. Dr Gp Stirling
21/04/2023 Third Party Consultation Ms Jane Rennie
21/04/2023 Document Image Docman Attachment
21/04/2023 Result Results Microbiology Ms [redacted] Rennie
20/04/2023 Triage Ms [redacted] Binnie - No Data Recorded
17/04/2023 Triage Ms Ra [redacted] La [redacted]
17/04/2023 Seen in [redacted] health clinic [redacted] for routine BBV screen.
Smear due however has period so relisted.
R [redacted] - [redacted] health nurse
17/04/2023 11:16 Ms [redacted]
17/04/2023 Hepatitis C antibody test = Ms [redacted]
17/04/2023 Human immunodefic.viral test = Ms [redacted]
17/04/2023 Hep B surface antigen test = Ms [redacted]
17/04/2023 Syphilis infectious titre test = Ms [redacted]
17/04/2023 Other Miss [redacted] Mckeich
17/04/2023 Administration - note ANP entry - HCA has listed for weekly weights over the next month.
D.Carruthers S/N 12.00 hours Miss [redacted] Mckeich
17/04/2023 Consultation ANP entry, approached by nursing staff, patient states had bloods done & looking for results, see entry 13/2/23:
FBC ok
BS ok
TFT ok
bone profile ok
U&E ok
LFT ok
folate ok
B12 ok
Patient states was loosing weight, curent weight 75kg (weight 13/2/23 81.6kg,) for weekly weights x 4 weeks then list for ANP actions.
for weekly weights x 4 weeks. Miss [redacted] Mckeich
17/04/2023 Triage Ms K [redacted] Penman
17/04/2023 Seen by health care assistant Have listed Georgina for 4 weekly weights in the hca clinic as per AMP, these are 20/4 27/4 4/5 11/5.
Pass on the results to Jackie once taken.

HCA
[redacted] penman 10.45 Ms [redacted] Penman
11/04/2023 Triage Ms [redacted] Rennie
11/04/2023 Self-referral SHC - Well person - Would like a smear Ms [redacted] Rennie
04/04/2023 Third Party Consultation Ms [redacted] Rennie
04/04/2023 Document Image Docman Attachment
04/04/2023 Administration In possesion medication check form HMPYOI Polmont Health Centre Pharmacy Ms [redacted] Rennie
01/04/2023 Triage Ms [redacted] Binnie
01/04/2023 Seen by health care assistant for spot check medication.

Amitriptlyine 75mg - Should be remanining x12 , Actual remaining x15
Quetiapine 150mg - Should be remanining x4 Actual remaining x5.

Response to discrepancy - previous prescription overlapped

[redacted] Binnie
HCA
01/04/23

No explanation for being short x1 of each.
Dr Gp Stirling
29/03/2023 Third Party Consultation Mrs Lisa Taylor
29/03/2023 Document Image Docman Attachment
29/03/2023 Administration Administration HMYOI Polmont Medical Diet Requistion Mrs [redacted]
29/03/2023 Triage Ms Jill Ramsay
29/03/2023 Consultation Medical marker for gluten and lactose intolerance completed
PCT SN JRamsay 29/03/2023 13.10 Dr Gp Stirling
28/03/2023 Other Dr [redacted] Kildare

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28/03/2023 Ongoing review ANP K [redacted] J.Kildare
Actions
[redacted] requesting Etodolac and Peppermint caps to be made in possession - currently supervised - Kardex amended as requested Dr [redacted] Kildare
24/03/2023 Other Miss [redacted] Mckeich
24/03/2023 Consultation ANP actions, request from PCT to change supervised meds to inpossession, patient been moved to fevel 2, no recent [redacted] on vision re med compliance, discussed with MHT, no [redacted] meds moved to weekly, listed for med check. Miss [redacted] Mckeich
23/03/2023 Other Miss [redacted] Mckeich
23/03/2023 Consultation ANP entry J McKeich/L Kane
Late entry: kardex transcribed following admission to Polmont. Miss Jackie Mckeich
23/03/2023 Clinic Ms Kaitlin Currie
23/03/2023 Mental health admin. NOS Georgina was listed to see writer - RMN - 17/03/2023 however writer had to cover another establishment. Rescheduled Georgina's mental health assessment to today however she has been transferred back to Polmont. Discharged from the MHT. Ms Kaitlin Currie
22/03/2023 Triage Ms Abby Rafferty
22/03/2023 Transfer profile form completed
Transfer of this 31 year old lady from Lillias unit, reports to have been downgraded due to [redacted] contacting unit, and the risk this poses to her. States is only supposed to be here for a few days until this can be discussed at RMT.
Disgruntled at being held within [redacted] 1.
Engaged well, mood reactive and subjectivley denied any concerns.
Reports to be lactose and gluten intolerant.
Nil else signiicant health issues.
Reports numerous MH diagnosis but did not wish to discuss this at lenght today as she feels she is managing her mental health well currently.
Strongly denied current plans, intent of deliberate self harm or suicide. Advised she would seek support should her mental health deteriorate

Would like referral to SH nurse to have smear completed.

Plan-
ANP has kardex to re-wrtie prescriptions
Refer to SH

ARafferty
RMN
22/03/23 Ms [redacted] Rafferty
22/03/2023 No apparent risk of suicide Strongly denied current thoughts, plan or intent of suicide.
Reports history of suicidality over 10 years ago however nil recent. Advises she would seek staff support if her mental state should decline.
Ms [redacted]
22/03/2023 No thoughts of deliberate self [redacted] Strongly denied any current thoughts or intent of deliberate self [redacted] Ms [redacted]
22/03/2023 Prescription by GP Prescribed medications.
Peppermint capsules
Diflam Spray
Beclometasone nasal spray
Etodolac
Bisocodyl
Quetiapine
Amitriptyline
Pzotifen
Fexofenadine
Famotadine
Cetirizine

Also arrived with vitamins she reports she bought from canteen:
Cod liver oil
Vitamin D3
Vitamin C
Multivitamin & Iron Ms [redacted]
22/03/2023 Pulse oximetry 96 % Ms Abby [redacted]
22/03/2023 O/E - rate of respiration = 17 /minute Ms [redacted]
22/03/2023 O/E - temperature level = 36.5 degC Ms [redacted]
22/03/2023 O/E - pulse rate 78 beats/min Ms [redacted]
22/03/2023 15:39.00 BP 114 / 80 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Ms [redacted]
22/03/2023 Height: 1.65 metres O/E - height Ms [redacted]
22/03/2023 Weight: 75 kgs BMI: 27.5 O/E - weight Ms [redacted]
22/03/2023 Triage Ms [redacted]
22/03/2023 Refer for Refer to community [redacted] health advisor Action: 12/04/2023 Text Ms [redacted]
22/03/2023 Prescription by GP Kardex recieved on transfer Ms [redacted]
22/03/2023 Triage Ms [redacted] Queen
22/03/2023 Consultation Georgina attended health centre this morning complaining of ongoing throat issues.
States she ate a meal last night and still feels as if the food is stuck in her throat
Noi issues with breathing, swallowing fluids, speaking
Will book her in for GP attend anywhere this am Ms [redacted] Queen
14/03/2023 Triage Ms [redacted]
14/03/2023 Smoking cessation advice for Smoking Attended stop vape support session in HUB at 1.45pm. Stated interested in possibly stopping vape but is unable to tolerate nicotine patches due to sensitive skin. Advised on structure of stop vape group service, discussed possible access to nicotine lozenges if skin reaction documented on Vision records. Georgina stated may attend group next week. Ms [redacted] Mulheron
13/03/2023 Triage Ms [redacted] No Data Recorded
13/03/2023 Triage Ms [redacted]

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13/03/2023 Patient reviewed ongoing throat issue - seen last 13/2.
still sore. states taking PPI since then and no good. denies specific acid reflux type pain but throat [redacted] sore mnost of the time. no food or fluid sticking eating drinking as normal
no weight loss. occ ear pain - didnt offer present on asking. no discharge from ear or hearing issues.
no cough
smokes but is now vaping
[redacted] had throat cancer was a smoker.

allergiues nasally, on cetirizine but not much help. ongoing issue

o/e throat NAD no neck lumps ears both clear

reassured no red flags re throat., advised best she can do is stop smoking. aware of this . bloods from feb [redacted] normal
can check for h pylori incase acid reflux [redacted] - stop PPI 2 weeks famitidine during this time. then hpylori sample
can restart PI after this if needed

nasal spray incase post nasal drip an attribute
stop cetirzine and start fexofenadine Dr [redacted] Usher

09/03/2023 Clinic Ms Kaitlin Currie
09/03/2023 Administration Geoamy cancelled transport for Georgina's dental appointment this morning. Writer contacted the dental hospital to rearrange this appointment. Further appointment arranged for 29/03/2023 at 3.30pm. Ms Kaitlin Currie
02/03/2023 Third Party Consultation Mr [redacted] Mccallum
02/03/2023 Document Image Docman Attachment
02/03/2023 Administration Clinical Letter HMP Cornton Vale Care and Treatment Plan Asthma Mr [redacted] Mccallum
01/03/2023 Clinic Ms Kaitlin Currie
01/03/2023 Mental health admin. NOS Attempted to see Georgina for the purpose for completing a mental health assessment however she was unavailable due to seeing another service. Will relist for next available appointment. Ms Kaitlin Currie
01/03/2023 Clinic Ms [redacted] Currie
01/03/2023 Mental health admin. NOS Mental health referral form received, submitted 15/02/2023 however just received by MHT to be screened. Georgina requesting to speak to a mental health nurse. Several email correspondence has been made regarding Georgina from SPS and social work regarding Georgina displaying manipulative behaviours and previous input for low mood and anxiety in another establishment. Allocated routine assessment, letter sent. Ms Kaitlin Currie
28/02/2023 Surgery consultation Dr [redacted]
28/02/2023 Administration bloods NAD (including TFTS) Dr Joe [redacted]
27/02/2023 Surgery consultation Dr Joe [redacted]y - No Data Recorded
24/02/2023 Triage Ms [redacted]
24/02/2023 Consultation Georgina attended the health centre - complaining of feeling genreally unwell with dizzy spells.
OB:
136/84, P 95bpm, Sats 98%, Temp 36.4 RR 14
Obs stable, states eating drinking normally, sleeping well, no complaints of pain
Advised to rest today if feeling unwell/dizzy. Worsening statement given Ms [redacted] Campbell
21/02/2023 Triage Ms [redacted]
21/02/2023 Dental care Dental appointment rechduled for Thursday 9/3/23 @9.30am Ms [redacted] Campbell
21/02/2023 Third Party Consultation Ms Nicola [redacted]
21/02/2023 Document Image Docman Attachment
21/02/2023 Result Results Haematology Ms [redacted]
21/02/2023 Third Party Consultation Ms Nicola [redacted]
21/02/2023 Document Image Docman Attachment
21/02/2023 Result Results Biochemistry Ms [redacted]
17/02/2023 Triage Ms [redacted]
17/02/2023 Dental c[redacted]de for routine dental care at Glasgow dental hospital - 28/02/23 @9am - SPS aware to arrange transport Ms [redacted]
17/02/2023 Triage Ms [redacted] - No Data Recorded
16/02/2023 Triage Ms [redacted] Rennie - No Data Recorded
15/02/2023 Triage Ms Christine Campbell
15/02/2023 Administration Self referral received for Mental health - passed to MH nurse.
Self referral received for dentist - second referral for broken plate, advised Lilias still under emergency dental treatment only and she will be added to waiting list. Ms [redacted] Campbell
15/02/2023 Triage Ms [redacted]
15/02/2023 Blood sample taken = As per GP request
Venous blood obtained from right arm - sent to lab Ms [redacted]
13/02/2023 Follow-up/routine visit Ms Amy Swandells
13/02/2023 Occupational therapy Met with Georgina in multi-purpose room 2 from 13:00 - 13:40. Explained current OT role is information gathering to support service development using OSA (Occupational Self Assessment) and activity checklist. Advised Georgina plan to complete assessment to support info gathering, and if occupational need is identified, follow this up once OT service is active.
Georgina gave verbal consent to the above and partake in assessment today.
Completed OSA and activity checklist. Areas Georgina feels she has most difficulty with and would like to prioritise are managing her finances, solving problems, getting done what she needs to do and having a satisfying routine. From the activity checklist, her 3 top activities of interest that she would like to pursue in the future are paid employment (full/part time), Hiking/hill walking and seeing family and friends.
Advised Georgina writer felt they would likely benefit from OT given above described difficulties with daily activity, to maximise participation. Will follow up in the future as appropriate when OT service is active. Georgina agreeable with this.

Ms Amy Swandells
13/02/2023 Surgery consultation Dr [redacted] - No Data Recorded
13/02/2023 Surgery consultation Dr [redacted] Daly - No Data Recorded
13/02/2023 Surgery consultation Dr [redacted] - No Data Recorded
13/02/2023 Surgery consultation Dr [redacted]
13/02/2023 Consultation FTF with [redacted] nurse
weight 81.6, says has trouble loosing weight and poor energy
bowels fine
chronic sore throat, says prev ENT hospital appt NAD
on examination no masses, throat a bit red, is on nsaid so ? reflux. omeprazole added, with difflam. no diyphagia. Systemically well
for UEs LFTS TFTS bone gluc FBC vit B12/folate Dr [redacted]
10/02/2023 Surgery consultation Dr Joe Daly

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10/02/2023 SCI Referral Letter
10/02/2023 Surgery consultation Dr [redacted] - No Data Recorded
08/02/2023 Triage Ms [redacted] Campbell
08/02/2023 Administration Discussed with Dr [redacted] this morning, Georgina will need to be seen physically to have throat examined - as no further complaints noted will list for Mon 13/02/23 Ms [redacted] Campbell
08/02/2023 Surgery consultation Dr [redacted] - No Data Recorded
07/02/2023 Clinic Ms Kaitlin Currie
07/02/2023 Mental health admin. NOS Notes accessed for RMT purposes. Ms Kaitlin Currie
04/02/2023 Clinic Ms K [redacted] Currie
04/02/2023 Seen by nurse Georgina attended the health centre asking for a brief conversation regarding ongoing issues with her throat. States she has been experiencing the feeling of some food/fluids being digesting wrong and causing her to cough. Advised to keep a diary o what she is eating to see if any particular foods or liquids are difficult to swallow and this can be discussed with the GP at her appointment
08/02/2023. Ms [redacted] Currie
01/02/2023 Triage Miss [redacted] Mctaggart
01/02/2023 Consultation Seen in HC. Feels as if struggling to lose weight, regardless of eating better and exercising more. Asking re blooc test to check thyroid levels. Will add patient to virtual GP clinic for review. Miss Lauren Mctaggart
27/01/2023 Triage Ms Christine Campbell
27/01/2023 Medication satisfactory Spot check carried out today on weekly medication.
HCSW L McTaggart present
All medication checked and correct.
Spot check form signed and scanned to docman. Ms [redacted]
27/01/2023 Surgery consultation Dr [redacted] Daily - No Data Recorded
25/01/2023 Surgery consultation Dr [redacted] - No Data Recorded
25/01/2023 Surgery consultation Dr [redacted]
25/01/2023 Consultation telehealth, chronic facial /torso acne resistant to multiple oral therapies
agreed routine derm referal Dr [redacted]
25/01/2023 Triage Ms [redacted] Campbell - No Data Recorded
23/01/2023 Clinic Miss Katelin [redacted]
23/01/2023 Urine dipstick test = Urine tested using miltistix

LEU= NEG
NIT= NEG
PRO= NEG
PH= 5.0
BLOOD= NEG
SG=1.030
KET= NEG
GLU= NEG

NIL SIGNS OF UTI
SAMPLE DESTROYED Miss Katelin [redacted]
22/01/2023 Triage Ms Christine [redacted]
22/01/2023 Patient advised re diet Advice Georgina asking if we can prescribe snack/chocolate s as she was not able to buy gluten free snacks on her weekly shopping budget.
When asked what she did in Corton Vale she advised she just "posioned" herself and ate regular chocolate as no alternative was supplied on canteen.
Advised not to do this and that we cannot prescribe anything other than basic food (which are already preacribed). Georgina states we have to have a meeting with SPS to tell them she has to be given money/access to snacks.
Advised Georgina this would not be appropriate as SPS are aware of her dietary requirements and we cannot interfer with shopping and budgets based on preference. Ms [redacted]
22/01/2023 Urine smell = Georgina attended health centre today - complaining of dark, smelly urine. States started yesterday. White top bottle given to provide sample tomorrow. For dipstick test Ms [redacted] Campbell
21/01/2023 Triage Ms [redacted] Campbell
20/01/2023 Dental care Referral received for repair of denture plate.
Georgina aware that we are only able to accomadate emergency dental issues at present. Ms [redacted] Campbell
18/01/2023 Third Party Consultation Ms [redacted] Rennie
18/01/2023 Document Image Docman Attachment
18/01/2023 Administration Kardex HMP Corrton Vale Pharmacy Ms [redacted] Rennie
18/01/2023 Triage Ms Christine Campbell
18/01/2023 Transfer profile form completed TTM paperwork completed by c [redacted]
Georgina wishes to discuss current acne treatment with GP.
Listed for next clinic 25/01/23 Ms [redacted] Campbell
18/01/2023 Pulse oximetry 98 % Ms [redacted] Campbell
18/01/2023 O/E - rate of respiration = 17 /minute Ms Christine Campbell
18/01/2023 O/E - temperature level = 36.4 degC Ms Christine [redacted]
18/01/2023 O/E - pulse rate 68 beats/min Ms [redacted]
18/01/2023 12.09.00 BP 120 / 78 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Ms [redacted]
18/01/2023 No apparent risk of suicide Ms [redacted] Campbell
18/01/2023 No thoughts of deliberate self [redacted] Ms [redacted] Campbell
18/01/2023 H/O: deliberate self harm reports nil self [redacted] for 6 yrs Ms [redacted] Campbell
18/01/2023 H/O: attempted suicide Nil since 2012- reports attempted hanging Ms [redacted] Campbell
18/01/2023 No signif.H/O psych. disorder of Ms [redacted]
18/01/2023 Prescription by GP Kardex on transfer Ms Christine [redacted]
18/01/2023 Allergy Moderate H/O: non-drug allergy Ms [redacted] Campbell
18/01/2023 Height: 1.65 metres O/E - height Ms [redacted]
18/01/2023 Triage Ms [redacted] Rennie - No Data Recorded
18/01/2023 Third Party Consultation Ms [redacted] Rennie
18/01/2023 Document Image Docman Attachment
18/01/2023 Administration Transfer Paperwork Corrton Vale Administration Ms [redacted] Rennie
18/01/2023 Triage Ms [redacted] Rennie - No Data Recorded
17/01/2023 Third Party Consultation Ms [redacted] Rennie
17/01/2023 Document Image Docman Attachment
17/01/2023 Administration Kardex HMP Corrton Vale Pharmacy Ms [redacted] Rennie
17/01/2023 Triage Ms [redacted]

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17/01/2023 Consultation See in HC at 10:40

Urine sample back as a negative. Georgina was not sure why she was attending the clinic. She enquired about having a lactose free diet prescribed by Lloyds. I have checked previous notes re lactose intolerance. No documentation on formal tests been undertaken regarding this. Patient self reports lactose intolerance.
PCT [redacted]
11:14
17/01/23 Dr Gp Stirling
16/01/2023 Triage Ms Lyndsay Mccracken - No Data Recorded
13/01/2023 Triage Ms Laura Kilpatrick
13/01/2023 Administration Listed for pct nurse to review why urine was obtained as requested by anp
[redacted] Kilpatrick
HCA
13/01/23
16:10hrs Dr Gp Stirling
13/01/2023 Triage Ms [redacted]
13/01/2023 Ongoing review no info as to why urine sample was obtained no nurse triage
RBC 955
? menstruating
can nursing staff please triage and asses what the patient requires.
12/01/2023 Third Party Consultation Ms [redacted]
12/01/2023 Document Image Docman Attachment
12/01/2023 Administration Microbiology Results Forth Valley Royal Hospital Microbiology Ms Sonja Kelly-Gutowski
11/01/2023 Triage Mr [redacted] - No Data Recorded
09/01/2023 Triage Ms [redacted] Cleary
09/01/2023 Seen by health care assistant
Georgina was at the clinic to give a urine sample for testing for urynalasis but was unable to provide this i gave her a bottle away to hand back in .
Michelle Cleary
HCA
09/01/2023
11.00 Ms [redacted] Cleary
06/01/2023 Triage Ms [redacted] Kilpatrick
06/01/2023 Failed encounter Georgina was listed for urine sample to be sent away to labs for infection?? However officer made writer aware that Georgina is currently at work and unable to come to appointment at this time. I have relisted Georgina in HCA clinic with regards to same.
[redacted] Kilpatrick
HCA
06/11/2023
10:59HRS Dr Gp Stirling
04/01/2023 Triage Ms Jane Rennie
04/01/2023 Self-referral Nurse Triage - MM - Nose bleeds, vomiting, and would like a urine test Ms [redacted] Rennie
30/12/2022 Triage Ms Jill Ramsay
30/12/2022 Consultation Seen in clinic this am, enquiring about a lactose free food list from pharmacy, I will look into this. Also stated throat was sore, nil redness or puss spots noted on back of throat, glands not swollen and temp 36.6, worsening advice given.
PCT SN JRamsay 30/12/2022 09.51 Dr Gp Stirling
30/12/2022 Triage Ms Jill Ramsay - No Data Recorded
22/12/2022 Third Party Consultation Mr [redacted] Mccallum
22/12/2022 Document Image Docman Attachment
22/12/2022 Administration Clinical Letter HMP Cornton Vale Health Care Marker Mr [redacted] Mccallum
22/12/2022 Third Party Consultation Ms Jane Rennie
22/12/2022 Document Image Docman Attachment
22/12/2022 Administration Clinical Letter HMP Cornton Vale Ophthalmology Ms [redacted] Rennie
22/12/2022 Triage Ms Jane Rennie
22/12/2022 Administration NOS Peebles [redacted] staff have enquired why Georgina is wearing blue tinted glasses and have asked for a medical marker to be completed. Optician and Team leader have been contacted. Ms [redacted] Rennie
21/12/2022 Triage Ms [redacted] Binnie
21/12/2022 Administration Glasses provided to Georgina and signed for

[redacted] Binnie
HCA
21/12/2022 Dr Gp Stirling
21/12/2022 Triage Mr [redacted] Mccallum
21/12/2022 Self-referral Nurse/Doctor - Lactrol dietaries. SJ Mr [redacted] Mccallum
13/12/2022 Third Party Consultation Ms [redacted] Rennie
13/12/2022 Document Image Docman Attachment
13/12/2022 Administration Clinical Letter HMP Cornton Vale Medical Marker Ms [redacted] Rennie
13/12/2022 Triage Ms [redacted] Binnie - No Data Recorded
13/12/2022 Third Party Consultation Mr [redacted] Mccallum
13/12/2022 Document Image Docman Attachment
13/12/2022 Result Results HMP Cornton Vale ECG Mr [redacted] Mccallum
13/12/2022 Other Dr [redacted] Kildare
13/12/2022 Ongoing review MOA - Kardexes rewritten to have one specifically for GF products and the other meds
Clinical Portal reviewed and can see eForm from Dieticians requesting [redacted] to have lactose free products - I will complete medical marker Dr [redacted] Kildare
13/12/2022 Surgery consultation Dr [redacted] Kildare
13/12/2022 Consultation GP Re[redacted]
1) Listed for review of chest pain
Vague history of chest discomfort over Sunday and some episodes again yesterday
Left sided, no radiation, no autonomic symptoms, no palps or dizziness
No other red flags
Pain worse with movement, not pleuritic in nature
Has had 2 ECGs taken which are entirely normal and show NSR with Qtc 444ms, nil concerning features
Concerned as has a history of heart murmur she says
Has still been able to be at [redacted] the laundry
No cough/SOB, no reflux symptoms

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No cough/SOB, no reflux symptoms

O/E
Comfortable at rest, completes sentences, no accessory muscle use
Some discomfort over chest wall
HS I + II + 0, regular - I cant hear a murmur today
Chest clear with good A/E to bases

Advised pain unlikely cardiac and more likely MSK/costochondritis component
Advised simple analgesia and could try Algesal rub

2) States has spoken with Dieticians and they have agreed to medical marker to be reinstated for her lactose free products - says they will be sending an eForm

I will review Clinical Portal this morning and see what has been sent through Dr [redacted] Kildare

12/12/2022 Other Dr [redacted] Sayers
12/12/2022 Ongoing review ECG received via email
ECG - SR 80/min - no ST changes
Normal ECG
Dr [redacted] Sayers

12/12/2022 Triage Mrs [redacted]
12/12/2022 Consultation 13.15hrs SPS staff called for her to be assessed for 'chest pain'
DTL C [redacted] attended to obtain observations-
observations all unremarkable.
Resp's 18
pulse 88
temp 36.8
SP02 100%
BP 126/86
[redacted] then escorted to Health Centre for an ECG by [redacted] and SPS staff.
Ecg completed by HCA [redacted] Binnie at 13.30hrs
I then attended to speak with Georgina, She has had ongoing chest pain from yesterday around 11am and became worse last night.
Pain is from left underarm over left breast area.
States worse when breathing in, states no physical/muscle injury.
No obvious wheeze and no coughing up sputum.
Talking in full sentences no SOB evident however Georgina states she feels short of breath at times.
Good colour.
Discussed possible breast tendemess due to time of month however [redacted] states it is not similar pain.
[redacted] has previous breast cysts however was unable to state is any of these have changed.
States that her regular analgesia is not helping with her pain however noted to only have 2 paracetamol tablets from SPS officers yesterday at 2pm and none since.
Reassurance given regarding observations, ECG states normal however no one able to [redacted] here- sent to GP on call Dr Sayers to review.
I told her once her ECG is reviewed and it comes back normal she can be seen at routine clinic for review of pain. However no urgent [redacted] at the moment, any changes Georgina is aware to let staff know.

[redacted]
TL PCT
12/12/22
14.35HRS Dr Gp Stirling

12/12/2022 Triage Ms [redacted] Rennie
12/12/2022 Self-referral Nurse - Pain in left side of chest Ms [redacted] Rennie
09/12/2022 Triage Ms Jade Binnie - No Data Recorded
09/12/2022 Triage Ms [redacted] Binnie - No Data Recorded
09/12/2022 Triage Ms [redacted]
09/12/2022 Ongoing review ANP mail
ANP K [redacted]
FBC normal range
cholesterole 4.6 in range
EGfR >59 normal value
ECG no changes
plasma glucose 5.1 normal vaule
U&Es normal range
LFT normal range
continue NPT

07/12/2022 Third Party Consultation Mr S [redacted] Mccallum
07/12/2022 Document Image Docman Attachment
07/12/2022 Administration Haematology Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum

07/12/2022 Third Party Consultation Mr Sharon Mccallum
07/12/2022 Document Image Docman Attachment
07/12/2022 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum

07/12/2022 Third Party Consultation Mr S [redacted] Mccallum
07/12/2022 Document Image Docman Attachment
07/12/2022 Result Results HMP Cornton Vale ECG Mr Sharon Mccallum

06/12/2022 Other Dr [redacted] Kildare
06/12/2022 ECG Normal See ECG taken for Psychotropic monitoring NSR @ rate 87bpm QTc 437ms, no acute changes Dr [redacted] Kildare

06/12/2022 Results recording Dr [redacted] Sayers
05/12/2022 Serum HDL cholesterol level = 1 mmol/L Target value for HDL >1.2 mmol/L. Dr Craig Sayers
05/12/2022 Serum LDL cholesterol level = 2.7 mmol/L mmol/l Dr [redacted] Sayers
05/12/2022 Serum triglycerides = 2 mmol/L Dr [redacted] Sayers
05/12/2022 Serum total cholesterol level = 4.6 mmol/L Dr [redacted] Sayers
05/12/2022 Serum lipids = <none> Dr [redacted] Sayers
05/12/2022 Glomerular filtration rate = mL/min Abnormal >59 Dr [redacted] Sayers
05/12/2022 Serum creatinine = 58 umol/L New assay in use from 28/11/2022.
Results may be up to 5% lower than previous. Dr [redacted] Sayers
05/12/2022 Serum urea level = 3.7 mmol/L Dr Craig Sayers
05/12/2022 Serum chloride = 109 mmol/L Abnormal Dr Craig Sayers

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05/12/2022 Serum potassium = 4.8 mmol/L Dr Craig Sayers
05/12/2022 Serum sodium = 139 mmol/L Dr [redacted] Sayers
05/12/2022 Urea and electrolytes = <none> Dr [redacted] Sayers
05/12/2022 Serum alkaline phosphatase = 94 U/L U/L - ALP Ref. Limit for patients <30 days old is 0-380 iu/L
ALP Ref. Limit for patients <17 years old is 0-425 iu/L
ALP Ref. Limit for adults (>17 years) is 0-130 iu/L Dr Craig Sayers
05/12/2022 Serum albumin = 40 g/L Dr [redacted] Sayers
05/12/2022 Serum total protein = 66 g/L Dr [redacted] Sayers
05/12/2022 Serum total bilirubin level = 6 umol/L Dr [redacted] Sayers
05/12/2022 [redacted] alanine aminotransferase level = 17 IU/L Serum ALT level - Dr Craig Sayers
05/12/2022 AST serum level = 16 U/L U/L Dr [redacted] Sayers
05/12/2022 Liver function test = <none> Dr [redacted] Sayers
06/12/2022 Results recording Dr Craig Sayers
05/12/2022 Blood Glucose = 5.1 mmol/L
05/12/2022 Biochemical test = 9.3 Dr Craig Sayers
05/12/2022 Blood Glucose = mmol/L <none>
05/12/2022 Triage Ms [redacted] Binnie - No Data Recorded
05/12/2022 Results recording Dr [redacted] Sayers
05/12/2022 Nucleated red blood cell count = 0 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Basophil count = 0.1 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Eosinophil count = 0.5 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Monocyte count = 0.7 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Lymphocyte count = 2 10*9/L 10^9/L Dr Craig Sayers
05/12/2022 Neutrophil count = 5.2 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Mean corpusc. Hb. conc. (MCHC) = 326 g/L Dr [redacted] Sayers
05/12/2022 Mean corpusc. haemoglobin(MCH) = 29.9 pg Dr [redacted] Sayers
05/12/2022 Packed cell volume = 0.389 ratio Dr [redacted] Sayers
05/12/2022 Mean corpuscular volume (MCV) = 91.5 fL fl Dr [redacted] Sayers
05/12/2022 Red blood cell (RBC) count = 4.25 10*12/L 10^12/L Dr [redacted] Sayers
05/12/2022 Platelet count = 310 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Total white cell count = 8.5 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Haemoglobin estimation = 127 g/L Dr [redacted] Sayers
05/12/2022 Full blood count - FBC = <none> Dr [redacted] Sayers
05/12/2022 Triage Ms [redacted] Binnie - No Data Recorded
05/12/2022 Triage Mr [redacted] Mccallum
05/12/2022 Self-refe[redacted]iew Glasses/Fix Glasses. Dentist - Need check up, Need new dentures or dentures fixed. (Added to both waiting lists) JR Mr [redacted] Mccallum
05/12/2022 Third Party Consultation Mr [redacted] Mccallum
05/12/2022 Document Image Docman Attachment
05/12/2022 Administration Clinical Letter HMP Cornton Vale ECG Mr [redacted] Mccallum
05/12/2022 Third Party Consultation Mr [redacted] Mccallum
05/12/2022 Document Image Docman Attachment
05/12/2022 Administration Clinical Letter HMP Cornton Vale GASS Mr [redacted] Mccallum
05/12/2022 Triage Ms Laura Kilpatrick
05/12/2022 Seen by health care assistant Seen Georgina in drug monitoring clinic with hca cleary
Clinical observations obtained and all within normal limits
Bloods obtained u&e's lft,fbc glucose and lipids
ECG obtained in for MOA to review same.
GASS SCORE 18
Mental health team emailed with regards to same.
[redacted] Kilpatrick
HCA
05/12/2022
09:45HRS

Dr Gp Stirling
02/12/2022 Third Party Consultation Mr [redacted] Mccallum
02/12/2022 Document Image Docman Attachment
02/12/2022 Administration Clinical Letter HMP Cornton Vale Glasses Receipt Mr [redacted] Mccallum
28/11/2022 Third Party Consultation Mr [redacted] Mccallum
28/11/2022 Document Image Docman Attachment
28/11/2022 Administration Microbiology Results Forth Valley Royal Hospital Microbiology Mr Sharon Mccallum
28/11/2022 Triage Mr [redacted] Mccallum
28/11/2022 Planned telephone contact 07/12/2022 @ 14:00
[redacted] Miller
Dietician
Georgina Smith / 131344
04/102/1991
07971 647998
Telephone Appointment
Mr [redacted] Mccallum
25/11/2022 Triage Ms [redacted] Quail
25/11/2022 Drug addiction therapy
S - Met with Georgie for Prison Healthcare Addictions Service one to one support. Verbal consent to proceed obtained.
B - [redacted] is not in receipt of any MAT.
A - Appeared kempt, maintained eye contact, behaved in keeping with setting, communication was bright, reactive, normal rate and tone. [redacted] let me know that she had a parole hearing on Monday but that she has been told that this has to go to an oral hearing. She is coping well with this. She admits that she is feeling anxious but that she is getting on with this. She remains drug free and has no cravings.
R -See in 4/52.
[redacted] Quail, Substance Use and Recovery Team HMPCV
10.00
Ms [redacted] Quail
25/11/2022 Triage Ms [redacted]

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25/11/2022 Medication - risk monitoring Spotcheck carried out on 24/11/22. Amitriptyline, Quetiapine ,cetirizine all counted correctly Ms [redacted]

24/11/2022 Triage Ms [redacted] Binnie - No Data Recorded

24/11/2022 Other Miss Je[redacted] Mckeich

24/11/2022 Consultation ANP J McKeich/L[redacted]

Received email from dietician asking if patient still wishes to be seen, see entries below re diet, emailed back advising appointment to go ahead. Miss [redacted] Mckeich

24/11/2022 Other Miss [redacted] Mckeich

24/11/2022 Consultation ANP J McKeich/L[redacted]

Seen patient, ongoing issues with acne, states lymecycline not helping, obvious inflammed papuoles to face, mainly chin states allergic to acne lotions such as benzoyl peroxide - swelling/itchy, agreed to prescription for 3mths doxycycline 100mg daily, Dermol 500 and QV wash. Worsening advice given.

Also c/o headaches
pain forehead between eye brows
states post concussion syndrome since childhood following head injury
describes pain as tight, grabbing pain
occasional numbness to right side of face
usually occurs at night
no benefit from paracetamol
seen optician, told eye sight was ok, states getting tinted glasses
no obvious photosensitivity during consultation - states expereinces this on occasion
reduced sensation to right side of jaw
normal facial/eye movement
PERL
appears to have normal motor function
no red flags
Agreed to trial pizotifen 500mcg at night for one week then increased to 1.5mg as per BNF.
Worsening advice given.

Patient requesting to see [redacted]
States recent mood changes, sometimes gets anry with peers
Has parole meeting today
stress/anxiety levels higher than normal
Listed for review by [redacted] Miss [redacted] Mckeich

22/11/2022 Triage Ms Rachel [redacted]

22/11/2022 High vaginal swab taken Ms [redacted]

22/11/2022 Seen in [redacted] health clinic Seen concerned about vaginal growths related to HPV and abnormal vaginal discharge, advises has had clear discharge for approx 1 year, on examination nil of concern visible on vaginal walls or cervix, white creamy discharge, PH normal, HVS taken.
Discussed HPV and the monitoring in place for this and normal discharge and hormone [redacted] changes.
R [redacted] - [redacted] health nurse
22/11/2022 14:38 Ms [redacted]

21/11/2022 Triage Ms [redacted]

21/11/2022 Consultation Seen in HC at 1430.

S; Self referal to see nurse.

B: Right eye socket pain and ongoing skin issues.
A: Patient states she is experiencing pain in the socket of her right eye which is radiating to the side of her head which is the site of a previous injury. Patient states she has been seen by optition who can see no evidence of trauma. Patient also states her skin is constantly covered in spots and states her medication is no longer working.
R: Have referreed patient to attend GP clinic and worsening advice given.

PCT
[redacted]
21/11/22
15:39 Dr Gp Stirling

17/11/2022 Triage Mr Sharon Mccallum

17/11/2022 Self-referral Nurse/Doctor - Not disclosed. SP Mr [redacted] Mccallum

07/11/2022 Triage Ms Susan Payne

07/11/2022 Consultation Seen in Health Centre.@ 10:00

S: Self referral
B:Gluten/lactose free diet. Prescribed Lymecycline for skin issues and peppermint oil for stomach.
A: Patient stated she has issues with food being stuck in her throat and feels nauseous after eating. Patient states she has been having these symptoms for three weeks. Patient states she only eat once a day as does not like the food given to her. She is on a gluten/lactose free diet.
Patient states her skin has broken out and feels sore.
Patient also stated she would like an appointment with the [redacted] health nurse to discuss changes which may be due to having HPV and is concerned about 'changes'.
Paient also states she feels under stress due to up and coming parole hearing.

R: I have requested patient to eat small portions of food more regularly and not restrict herself to one meal a day.
I have also asked the patient to drink more fluids and exercise to help with peristalsis.
I have listed patient to attend [redacted] health clinic and have given patient worsening advice and to refer again if symptoms continue over the next couple of weeks.
Patient states she dose not require to talk to a MH nurse for stress issues.

PCT [redacted]
07/11/22
10:07
Dr Gp Stirling

03/11/2022 Third Party Consultation Ms [redacted] Rennie

03/11/2022 Document Image Docman Attachment

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

03/11/2022 Administration Administration HMP Cornton Vale Ms [redacted] Rennie
03/11/2022 Triage Ms [redacted] Rennie
03/11/2022 Self-refe[redacted] Nurse - Skin Issues and Well person clinic - CK Ms Jane Rennie
27/10/2022 Triage Ms [redacted] Binnie - No Data Recorded
27/10/2022 Triage Mrs [redacted]
27/10/2022 Ongoing review ANP L.Kane
ANP Actions
see entry 27/10/22
had huge excess of laxido
bisocodyl more effective for georgina and she is utlising this with good effect
therefore stopped laxido as requested
27/10/2022 Triage Mr [redacted] Cooper
27/10/2022 Mental health review Peebles staff approached me with a carrier bag full of laxido sachets (at least four full boxes and a dozen or more un-opened sachets) asking me to dispose of them as Georgie no longer wanted them as her constipation was successfully being manage by using bisocodyl, I spoke to [redacted] to confirm this and it was correct. All of the laxido was handed into our pharmacy to be either re-used or disposed of.
Entry by [redacted] RMN, Medgen, 27/10/22.
Dr Gp Stirling
20/10/2022 Triage Mrs Sadie Mckay - No Data Recorded
18/10/2022 Third Party Consultation Ms [redacted] Rennie
18/10/2022 Document Image Docman Attachment
18/10/2022 Administration Kardex HMP Cornton Vale Pharmacy Ms [redacted] Rennie
18/10/2022 Triage Ms Keleigh Mournian - No Data Recorded
17/10/2022 Third Party Consultation Mr [redacted] Mccallum
17/10/2022 Document Image Docman Attachment
17/10/2022 Administration Clinical Letter HMP Cornton Vale Medical Marker Mr [redacted] Mccallum
17/10/2022 Triage Mr [redacted] Mccallum
17/10/2022 Drug addiction notification Addictions/PHAS - Not disclosed. NT Dr Gp Stirling
17/10/2022 Self-referral Nurse/GP - Not disclosed, Skin clinic - Not disclosed. NT Mr [redacted] Mccallum
17/10/2022 Triage Ms [redacted]
17/10/2022 Consultation Seen in HC @10:30

Patient states she is using 2 Duvets under herr mattress which is helping with back pain.

I have completed a medical marker to allow this to happen. Copies to be forwarded to SPS, prisoner and scanned onto Vision.
PCT [redacted]
11:51
17/10/22 Dr Gp Stirling
14/10/2022 Triage Ms [redacted]
14/10/2022 Consultation SPS informed [redacted] in Pharmacy 13/10/22 that [redacted] was using a duvet cover under her mattress as she has back pain. The duvet has been removed by SPS. Will put patient into app to see The PCT regarding pain in her back.
PCT [redacted]
12:05
14/10/22

[redacted] Dr Gp Stirling
14/10/2022 Other Miss [redacted] Mckeich
14/10/2022 Medication - risk monitoring Spotcheck carried out on 13/10/22. Lymecycline, Amitriptyline,and Quetiapine (all weekly medications) counted and correct Reminded to store all medications in the safe. Prn Bisacodyl and Cetirizine and Etodolac too. Miss [redacted] Mckeich
04/10/2022 Surgery consultation Dr [redacted] Kildare
04/10/2022 Ongoing review MOA - [redacted] no longer wanting the GF crispbreads prescribed - therefore discontinued and in its place would like GF white rolls and GF Part baked fibre rolls
Kardex ammended with PIP codes as requested Dr [redacted] Kildare
29/09/2022 Triage Mrs [redacted] Mckay
29/09/2022 Consultation I spoke with ANP [redacted] and have printed a list of substitutes for Georgina to choose from instead of crispbread. This has been sent to Peebles House for her.

[redacted] McKay
PCT nurse
11:47am Mrs [redacted] Mckay
29/09/2022 Consultation Georgina asking if her diet can be changed as she gets the crispbread, which is prescribed through lloyds, but states cannot eat it. Has tried, but finds it is not tasty. Will list with ANP/GP to discuss, as there are no dieticians, and I cannot prescribe.

Also, stating she has been getting pains in both sides of her abdomen for some time. Observations BP 122/73 P78 T36.1 02 sats 98%
[redacted] McKay
PCT nurse
9:33am Mrs [redacted] Mckay
28/09/2022 Triage Ms Rebekah Weir - No Data Recorded
27/09/2022 Triage Mr [redacted] Mccallum
27/09/2022 Self-referral Nurse/GP - If possible to see dietitian about my diet choices. LS Mr Sharon Mccallum
23/09/2022 Triage Ms S [redacted] Payne
23/09/2022 Consultation Seen In Health Centre for covid and flu vaccine.

Spikevav Moderna Right arm.
Lot 200010A
EXP 21/03/2023
Flu Cell base Quadrivalent Left arm

LOT440051A
EXP 04/23

Administered with no issues . worsening advice give.#

Pct [redacted]
09.47

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09:47
23/09/22 Dr Gp Stirling
20/09/2022 Triage Ms S[redacted] Payne
20/09/2022 Consultation Seen in Health centre:

Follow up review of back pain from consultation on 17/09/22.

Patient states she still have very slight niggling pain in her front lower rib area. She is moving freely, it is not causing her sleep deprivation and she is still able to work.

I have given her worsening advice. Do not feel she require to see GP at this time.

PCT
[redacted]
20/09/22
11:21 Dr Gp Stirling
17/09/2022 Triage Ms [redacted]
17/09/2022 Consultation Seen in peebles:

Patient informed HCA [redacted] that she was experiencing back pain on 16/09/22. Negative for urinalysis.

When I attended patient today and asked what I could do for she couldnt remember at first then said she had rib pain front and back.

Nil diatery changes
Nil medication changes.

She is able to walk and move freely so see [redacted] clinical reason to see a GP this weekend.
Will list her for nurse clinic on 20/09/22 for a review.

PCT
[redacted]
11:39
17/09/22 Dr Gp Stirling
16/09/2022 Triage Ms [redacted] Kilpatrick
16/09/2022 Urinalysis = no abnormality = Urine sample left in pharmacy to be tested for infection? Same done and no infection at this time. I will List Georgina in clinic to see if still has ongoing symptoms of a uti. Dr Gp Stirling
16/09/2022 Triage Mrs Sylvia Barclay
16/09/2022 Mental health review Late entry from 14/09/2022 due to being unable to access vision. Discussed at MDMHT. Meeting chaired by Unit Manager [redacted]
S Barclay
MH Nurse
16/09/2022
Mrs Sylvia Barclay
16/09/2022 Third Party Consultation Ms [redacted] Rennie
16/09/2022 Document Image Docman Attachment
16/09/2022 Administration Clinical Letter HMP Cornton Vale Mental Health Ms [redacted] Rennie
15/09/2022 Triage Ms Nichola Docherty
15/09/2022 Administration Letter sent to Georgina advising of real location to named nurse. [redacted] spoke with Georgina briefly on 11th and Georgina advised of being more settled after situation earlier in the week. Due to ongoing need for guidance and reassurance, monthly contact is appropriate to contain levels of worry.

Nichola Docherty
MHN
15/09/22
1900hrs Ms Nichola Docherty
14/09/2022 T[redacted]ron Mccallum
14/09/2022 [redacted] Nurse/GP - Urine Infection. LS Mr [redacted] Mccallum
08/09/2022 Triage Ms Nichola Docherty
08/09/2022 Had a chat to patient Georgina advised she was feeling very tearful this evening and this was in response to having been into orderly room today. This was due to the fact she had utilised a fellow peers phone to phone the lady's relative after she had taken unwell. Georgina stated she had thought she was doing a helpful thing however I did inform her this was a complete breach of confidentiality and not her place to make these phonecalls. Giorgina is worried her fellow peer will be angry with her when she returns to Peebles House. I have offered reassurance this evening and advised she should learn from today's lesson and not repeat the same behaviour in the future. Will have a chat again with Giorgina on Sunday to check if she has settled. No significant distress, slightly anxious however able to articulate herself well and responded well to reassuring conversation. No issues relating to risk reported.

Nichola Docherty
MHN
08/09/22
1700hrs Ms Nichola Docherty
02/09/2022 Triage Ms [redacted] Kilpatrick
02/09/2022 Consultation Georgina was listed in clinic for a sitting and standing BP however on review of notes G.P has reviewed same and Georgina has also been sent letter to make aware of same.
Laura Kilpatrick
HCA
02/09/2022
11:23HRS Dr Gp Stirling
02/09/2022 Triage Ms L[redacted] Kilpatrick - No Data Recorded
30/08/2022 Triage Ms [redacted] Kilpatrick
30/08/2022 Letter encounter to patient Letter sent to make Georgina aware of normal bloods and normal bp as documented below on the 30/08/2022

[redacted] Kilpatrick
HCA
30/08/20222
16:49HRS Dr Gp Stirling

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30/08/2022 Triage Mr [redacted] Mccallum
30/08/2022 Next hospital appointment 05/09/2022 @ 13:00
Stirling Community Hospital
Physiotherapy
Georgina Smith / 131344
04/12/1991
Normal
Mr [redacted] Mccallum
30/08/2022 Other Dr [redacted] Kildare
30/08/2022 Ongoing review MOA - listed in Actions - states she has Asthma but has not been on treatment for a few years - not entry that Georgie reports its well controlled
Bloods entirely normal as is L&S BP - no further action needed at this time but can be listed for GP/ANP review if needed for on going symptoms Dr [redacted] Kildare
30/08/2022 Third Party Consultation Mr [redacted] Mccallum
30/08/2022 Document Image Docman Attachment
30/08/2022 Administration Kardex HMP Cornton Vale Pharmacy Mr Sharon Mccallum
29/08/2022 Triage Ms [redacted] Weir
29/08/2022 O/E - temperature level = 36.4 degC Dr Gp Stirling
29/08/2022 Pulse oximetry 98 % Dr Gp Stirling
29/08/2022 O/E - pulse rate 92 beats/min Dr Gp Stirling
29/08/2022 14:27.00 BP 126 / 77 taken Standing from Left Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
29/08/2022 14:27.00 BP 122 / 80 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
29/08/2022 Seen by health care assistant Seen in health centre for sitting and standing blood pressure as requested. Observations as documented.

[redacted] Weir
HCA
29/08/2022
1427HRS Dr Gp Stirling
26/08/2022 Third Party Consultation Ms [redacted] Rennie
26/08/2022 Document Image Docman Attachment
26/08/2022 Result Results Haematology Ms [redacted] Rennie
26/08/2022 Third Party Consultation Ms [redacted] Rennie
26/08/2022 Administration Clinical Letter HMPYOI Stirling Clinical Biochemistry Ms [redacted] Rennie
26/08/2022 Triage Ms [redacted]

PCT
[redacted]

15:53
26/08/22 Dr Gp Stirling
26/08/2022 Third Party Consultation Mr [redacted] Mccallum
26/08/2022 Administration Haemato[redacted]sults Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
26/08/2022 Third Party Consultation Mr [redacted] Mccallum
26/08/2022 Document Image Docman Attachment
26/08/2022 Administ[redacted] Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
26/08/2022 Triage Ms [redacted] Cleary
26/08/2022 10:43.00 BP [redacted]10 / 71 taken Standing Cuff: Standard recall due: O/E - blood pressure reading Ms [redacted] Cleary
26/08/2022 O/E - pulse rate 92 beats/min STANDING Ms [redacted] Cleary
26/08/2022 Pulse oximetry 97 % STANDING Ms Michelle Cleary
26/08/2022 O/E - temperature level = 35.5 degC Ms Michelle Cleary
26/08/2022 O/E - pulse rate 84 beats/min Ms [redacted] Cleary
26/08/2022 Pulse oximetry 99 % Ms [redacted] Cleary
26/08/2022 10:35.00 BP 109 / 74 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Ms [redacted] Cleary
25/08/2022 Third Party Consultation Ms [redacted] Rennie
25/08/2022 Administration Clinical Letter HMPYOI Stirling Genetic Services Ms [redacted] Rennie
25/08/2022 Triage Miss Sarah Hogg
25/08/2022 Consultation S- seen in treatment room for Asthma review.
B- PMX Asthma.
A- Georgina has nil prescibed therapy for asthma at present. Reports that asthma is well controlled. Has nil concerns for same at present. Aware to contact nursing staff if any [redacted]. Also discussed heart murmmer. Reports nil concerns at present. Has had dizzy spells in past, is to have blood pressure monitored and GP to review recent blodds and await plan. Cardiology care plan to be typed and given to patient also. Patient in agreement with care plans and current plan. Worsening advice given.
R- Annual reviews, await further plan, if any from GP. Patient aware. Worsening advice given.

SN S Hogg
PCT 25/08/22 1448
25/08/2022 Third Party Consultation Ms [redacted] Rennie
25/08/2022 Document Image Docman Attachment
25/08/2022 Administration Clinical Letter HMP Cornton Vale Genetic Services Ms [redacted] Rennie
25/08/2022 Results recording Dr Craig Sayers
24/08/2022 Serum C reactive protein level = mg/L <5 Dr [redacted] Sayers
24/08/2022 Glomerular filtration rate = mL/min Abnormal >59 Dr [redacted] Sayers
24/08/2022 Serum urea level = 2.2 mmol/L Abnormal Dr [redacted] Sayers
24/08/2022 Serum creatinine = 63 umol/L Dr [redacted] Sayers
24/08/2022 Serum chloride = 103 mmol/L Dr [redacted] Sayers
24/08/2022 Serum sodium = 138 mmol/L Dr Craig Sayers
24/08/2022 Serum potassium = 4.2 mmol/L Dr [redacted] Sayers
24/08/2022 Urea and electrolytes = <none> Dr [redacted] Sayers
24/08/2022 Serum albumin = 40 g/L Dr [redacted] Sayers
24/08/2022 Serum total protein = 67 g/L Dr [redacted] Sayers
24/08/2022 AST serum level = 18 U/L U/L Dr [redacted] Sayers
24/08/2022 Serum alanine aminotransferase level = 14 IU/L Serum ALT level - Dr [redacted] Sayers

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24/08/2022 Serum alkaline phosphatase = 91 U/L U/L - ALP Ref. Limit for patients <30 days old is 0-380 iu/L
ALP Ref. Limit for patients <17 years old is 0-425 iu/L
ALP Ref. Limit for adults (>17 years) is 0-130 iu/L Dr [redacted] Sayers
24/08/2022 Serum total bilirubin level = 6 umol/L Dr [redacted] Sayers
24/08/2022 Liver function test = <none> Dr [redacted] Sayers
24/08/2022 Results recording Dr [redacted]g Sayers
24/08/2022 Nucleated red blood cell count = 0 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Basophil count = 0.1 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Eosinophil count = 0.4 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Monocyte count = 0.5 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Lymphocyte count = 1.8 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Neutrophil count = 4.1 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Mean corpusc. Hb. conc. (MCHC) = 332 g/L Dr [redacted] Sayers
24/08/2022 Mean corpusc. haemoglobin(MCH) = 29.1 pg Dr Craig Sayers
24/08/2022 Packed cell volume = 0.398 ratio Dr [redacted] Sayers
24/08/2022 Mean corpuscular volume (MCV) = 87.9 fL fl Dr [redacted] Sayers
24/08/2022 Red blood cell (RBC) count = 4.53 10*12/L 10^12/L Dr Craig Sayers
24/08/2022 Platelet count = 296 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Total white cell [redacted] = 6.8 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Haemoglobin estimation = 132 g/L Dr [redacted] Sayers
24/08/2022 Full blood count - FBC = <none> Dr [redacted] Sayers
24/08/2022 Triage Ms [redacted] Cleary - No Data Recorded
24/08/2022 Other Miss [redacted] Mckeich - No Data Recorded
24/08/2022 Triage Ms Eilish Hennessy
24/08/2022 Seen by health care assistant Seen in HCA clinic for bloods. [redacted] gave verbal permission for bloods to be obtained. Bloods obtained and will be sent to labs.

E Hennessy - HCA
24/08/2022
10:45 Dr Gp Stirling
23/08/2022 Third Party Consultation Ms [redacted] Rennie
23/08/2022 Document Image Docman Attachment
23/08/2022 Administration Clinical Letter HMPYOI Stirling Genetic Services Ms [redacted] Rennie
23/08/2022 Triage Mrs [redacted]
23/08/2022 Ongoing review ANP L [redacted]
review of letter from genetic councillor
her extended family history was traced
it does not look like she has an inherited susceptability to cancer
however they have not been able to find out any more information about her [redacted] or [redacted] who were diagnosed with breast cancer in their 30's
If they could confirm her [redacted] and [redacted] were diagnosed with breast cancer at such a young age her lifetime risk may be moderately increased, if confirmed she would be eligible for screening from the age of 35
georgina has to contact them again in 5 years time and they will then see if there is any further information they can find and decide if georgina requires to be referred for assessment at that time

If she finds out any further information regarding her FH then we can inform genetics

I have asked admin to send copy of letter to patient as it is addressed to her
23/08/2022 Third Party Consultation Ms [redacted] Rennie
23/08/2022 Administration Clinical Letter HMP Cornton Vale Genetic Services Ms [redacted] Rennie
23/08/2022 Triage Ms [redacted]
23/08/2022 Occupational therapy Mental Health Occupational Therapy - Seen for planned contact - [redacted] reported that her RMT meeting is today, and is feeling anxious regarding same due to recently being put on report for allowing another prisoner access to her phone. We discussed activities that [redacted] can engage with this morning to help manage her anxiety and also self care activities that [redacted] can participate in following her RMT meeting to help manage her emotion. Session was brief due to arrival of lunch, agreed that I would meet with [redacted] next week for follow up. Ms [redacted]
23/08/2022 Triage Ms Laura Kilpatrick
23/08/2022 [redacted] by health care assistant Seen Georgina in clinic for bloods, unable to obtain managed to get flash back however not enough to fill the tube. Georgina stated that she has not had much to drink, encouraged to drink more fluids. Relisted for further appointmer [redacted] Kilpatrick
HCA
23/08/2022
10:12HRS Dr Gp Stirling
23/08/2022 Triage Ms [redacted] Kilpatrick
23/08/2022 09:56.00 BP 128 / 77 taken Standing Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
23/08/2022 09:54.00 BP 122 / 75 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
23/08/2022 Pulse oximetry monitoring 98 % Dr Gp Stirling
23/08/2022 O/E - pulse rate 91 beats/min Dr Gp Stirling
22/08/2022 Triage Ms [redacted] - No Data Recorded
21/08/2022 Triage Mr [redacted] - No Data Recorded
19/08/2022 Triage Ms Susan [redacted]
19/08/2022 Consultation Seen in Health centre.

Patient states she has been having dizzy spells for one week when going from sitting to standing.
Sitting and standing blood pressure was taken

Sitting
BP 128/75
resps 16
sats97%
pulse 82
temp 36.8

Standing
BP 123/83
resps 16

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BP 123/83
resps 16
temp 36.5
pulse 90
Sats 97%

Checked ears for any infection or inflamation. Nil present.
Asked patient if she required an eye test. None required as had a recent eye test.

Have advised patient to keep well hydrated.
Advised patient if she were to feel unwell to report back to the PCT.
Repeat sitting and standing observation to taken twice weekly for two weeks from 22/08/22 and blood LFTs U&Es TFTs and CRP to be taker on 22/08/22

[redacted]
19/08/22
14:52
[redacted]
18 Dr Gp Stirling

19/08/2022 Triage Miss Sarah Hogg - No Data Recorded
16/08/2022 Triage Mr [redacted] Mccallum
16/08/2022 Self-referral Nurse/GP - Dizzy spells everytime I stand up. LS Mr [redacted] Mccallum
09/08/2022 Triage Dr Imogen [redacted]
09/08/2022 Seen in [redacted] clinic Seen in SH clinic. HPV positive on recent smear, so on 12 month smears at the moment. Reassured about that and discussed HPV. Also discussed family hx of throat cancer [redacted] and [redacted] - discussed no need to do anything in light of that information. Dr [redacted] GMC 7421177 Dr Imogen [redacted]
08/08/2022 Third Party Consultation Ms [redacted] Rennie
08/08/2022 Document Image Docman Attachment
08/08/2022 Administration Clinical Letter HMPYOI Stirling Breast Screening Ms Jane Rennie
08/08/2022 Third Party Consultation Mrs [redacted]
08/08/2022 Document Image Link broken, document rescanned and resubmitted to Vision.
08/08/2022 Administration Clinical Letter HMP Cornton Vale Breast Screening Mrs [redacted]
01/08/2022 Triage Ms Nichola Docherty
01/08/2022 Had a chat to patient Spoke with Georgina in Peebles today in the absence of her allocated MH nurse [redacted] Beattie. Had beer previously decided within MHT that Georgina could be offered the opportunity to secure [redacted] if she wished. Georgina has advised sh is due to attend a meeting regarding the possibility of being transferred to one of the community facilities within Dundee. This should be discussed in August with SPS. Georgina has advised she will await the outcome of this and should she be moving on then she will not require Psychology input within Cornton Vale. She has agreed to update us of her own accord. No further MH input from SSN Beattie is required at this time. No significant [redacted] being raised by Georgina or Peebles staff. Continues to attend her work party. DISCHARGED from caseload.

Nichola Docherty
[redacted]
01/08/22
1530hrs Ms Nichola Docherty
29/07/2022 Triage Ms [redacted] Cleary - No Data Recorded
29/07/2022 Triage Ms [redacted] Quail
29/07/2022 Drug addiction therapy
S - Met with [redacted] for Prison Healthcare Addictions Service one to one support. Verbal consent to proceed obtained.
B - [redacted] is not in receipt of any MAT.
A - Appeared kempt, maintained eye contact, communication was bright, reactive, normal rate and tone. I met with Georgie at her request. [redacted] has been in prison 10 years now and is due for parole again soon. She has been in the community once before but she lasted 7 weeks. She admitted that she drinks in the community when she has any problems which she feels that she cannot cope with. She is very aware that this is not a normal way to deal with issues and is something that she wants to work on. We have agreed that we will work through some coping strategies and hopefully these will help her in the future.
R -See in 2/52.
[redacted] Quail, Substance Use and Recovery Team HMPCV
11.00
Ms Kathleen Quail
29/07/2022 Third Party Consultation Ms Jane Rennie
29/07/2022 Document Image Docman Attachment
29/07/2022 Administration Clinical Letter HMP Cornton Vale Medical Marker Ms [redacted] Rennie
28/07/2022 Other Miss [redacted] Mckeich - No Data Recorded
28/07/2022 Other Miss [redacted] Mckeich
28/07/2022 Consultation ANP actions, gluten free choices prescribed on prescription sheet as per guidance from dietician. See email reponse below from same:
"Thanks for sending through Georgina's food and symptom diaries.
I've spent some time going through all of these to try and assess what the current situation is and if there are any obvious triggers. The earlier referral by Dr. Kildare described the main symptoms as pain, bloating and intermittent constipation but having looked at Georgina's diaries she's reporting very regular episodes of loose stools with odd days of no movement (understandable given the amount of loose stools). She also refers to significant numerous other symptoms which are obviously distressing for her.
Most of her reported symptoms could be caused by allergies or intolerances. Unfortunately we don't have an allergy service within FV and no specialist allergy dietitian. If there's a concern about possible anaphylactic reactions then it would be better to refer her to the Allergy Service in Glasgow. The only other way to check for intolerances that cause symptoms like rashes/ulcers etc is to do a full exclusion diet, something that's unfortunately just impossible to carry out in the prison environment. Even for free living individuals it's usually just too overwhelming and challenging!
Loose stools could potentially be caused by food intolerances and possibly linked to the other symptoms but having looked at her food diar her diet is very low in fibre and very high in fat both of which could be causing it. I'm happy to keep Georgina on my waiting list (it's about 5 months at the moment unfortunately) for a telephone/Near Me consultation as long as she has realistic expectations of what I can offer.
Georgina mentioned a couple of times in her diary about doing a trial and being fed up of it? Is the trial just writing her diary or was there a medication/food trial she was doing at the same time?
Given the list of symptoms that Georgina has it's probably reasonable to allow her continued access to gluten free foods and soya milk sol based on what she's telling us because there's not really any way of checking her claims.

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Georgina Smith 04/12/1991 662/91/440 Georgina has it's probably reasonable to allow her continued access to gluten free foods **All Consultations**

based on what she's telling us because there's not really any way of checking her claims.
If you could add markers on for these and maybe mention that fat/lack of fibre can be a cause then I'll keep her on my waiting list and opt her in closer to the time - she might not need or want to be seen if these things have been changed.
Hope this helps - let me know your thoughts and we can take it from there.
Best wishes
[redacted]
Lynn [redacted]
Community Dietitian
Stirling Community Hospital
Can nursing staff please follow up in advise from dietician anout diary/loose stools,fat & fibre.
Miss [redacted] Mckeich

28/07/2022 Triage Ms Jill Ramsay
28/07/2022 Pt advised re gluten free diet Advice Diet Prescribed gluten free diet Dr Gp Stirling

28/07/2022 Triage Ms Jill Ramsay
28/07/2022 Consultation Seen in clinic, gluten free foods chosen off prescription list. Total of 14 points used. review appointment made for 2/52 to review how diet list is going.
Jill Ramsay PCT SN 28/07/2022 14:38 Dr Gp Stirling

26/07/2022 Triage Ms [redacted]
26/07/2022 Occupational therapy Mental HEalth Occupational Therapy - Seen for planned OT contact at Georgies request. [redacted] stated that she feels she is requiring more regular emotional support and feels let down by SPS and NHS services in prison. Georgies main concerns at present are [redacted] to her physical health and lack of progression through RMT. Described feeling anxious about the possibility she has cancer due to raised HPV levels and changes to her cycle. Reports menstrual bleeding lasting 2-3 weeks and thick gel like discharge. Advised [redacted] that if these symptoms are new she should submit a referral to [redacted] health nurse for further examination or reassurance. Georgie dismissive of this advice. Stated that she had received a letter informing her that she is high risk of cancer, and we discussed how this can lead to heightened anxiety and increased vigilance towards potential symptoms. [redacted] also voiced that she feels other people are being prioritised for progression/ rehabilitation , and this is making her feel both angry and uncared for. [redacted] was encouraged to focus on issues that are within her control and to try not to compare her situation to other prisoners as this is likely to increase her frustration and have a negative impact on her mental wellbeing. Focussed on identifying positive aspects of routine that [redacted] is developing in prison, and how this contributes to her rehabilitation and readiness for living more independently on liberation. OT Plan - Liaise with Named Nurse regarding ongoing support. Fortnightly OT contact to be offered for emotional support. Ms [redacted]

12/07/2022 Triage Ms [redacted]
Letter on: 12/07/2022 type: Referral Smear result

05/07/2022 Triage Ms [redacted] Kilpatrick
05/07/2022 Seen by health care assistant Seen Georgina in Peebles house made aware of xray results as documented below.

Laura Kilpatrick
HCA
05/07/2022
20:22HRS Dr [redacted] Sayers

05/07/2022 Other Miss [redacted] Mckeich
05/07/2022 Consultation ANP actions, review xray of cervical spine, no significant bony or joint abnormality found. Can nursing staff please inform patient of same. Miss [redacted] Mckeich

05/07/2022 Third Party Consultation Mr [redacted] Mccallum
05/07/2022 Document Image Docman Attachment
05/07/2022 Administration Clinical Letter HMP Cornton Vale Dental General Mr [redacted] Mccallum

04/07/2022 Third Party Consultation Ms [redacted] Rennie
04/07/2022 Document Image
04/07/2022 Result Results X-Ray Ms [redacted] Rennie

04/07/2022 Triage Ms L [redacted] Kilpatrick
04/07/2022 Seen by health care assistant [redacted] Georgina in her cell in Peebles house, writer Made Georgina aware of wait for Dietetics 16-20 weeks, as advised by admin staff.
[redacted] Kilpatrick
HCA
04/07/2022
16:09HRS
Dr [redacted] Sayers

04/07/2022 Third Party Consultation Mr [redacted] Mccallum
04/07/2022 Administration Clinical Letter HMP Cornton Vale Radiology Mr [redacted] Mccallum

30/06/2022 Triage Mrs [redacted] Watt
30/06/2022 Mental [redacted] review Caught up briefly with [redacted] this lunchtime in Peebles. She was voicing her her [redacted] re lack of information on ongoing tests/requests. Stated she feels abandoned and that noone was listening to her.
I have appointed her to Dr Swinson's clinic for a medication review, she reports she has been having disturbe sleep and increased anxiety.
Appointment to see [redacted] health nurse for feedback on Smear test.
I have advised her again that her X-Ray result was not back.
Admin will find out waiting time for Dieticians and will advise staff so we can give [redacted] that information.
Dentist: Admin will check out waiting time for dentist and inform staff to pass on information to [redacted]
Letter sent to [redacted] to inform her of this.

[redacted] Watt
SSN MH
30/06/22 15:05 Dr [redacted] Sayers

30/06/2022 Triage Mrs [redacted] Watt - No Data Recorded

29/06/2022 Triage Ms [redacted] Kilpatrick
29/06/2022 Letter encounter to patient Letter sent to Georgina to make aware of change in shampoo

[redacted] Kilpatrick
HCA
29/06/2022
16:22HRS Dr [redacted] Sayers

29/06/2022 Triage Ms [redacted]

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[redacted]

Georgina Smith 04/12/1991 662/91/440 [redacted] **Consultations**

29/06/2022 Ongoing review ANP action
ANP K [redacted]
patient requeting a change of shampoo from dermax to dandrazole as finding current shampoo drying to her hair

I have prescribed Ketoconazole 2%shampoo as is same active ingredients. use 2-3 times per week
29/06/2022 Triage Ms Kerly [redacted] No Data Recorded
28/06/2022 Triage Ms [redacted] Kilpatrick
28/06/2022 Administration Listed in nurse clinic to review scalp, Listed in SH clinic for smear results.
[redacted] Kilpatrick
HCA
28/06/2022
20:14HRS Dr Gp Stirling
28/06/2022 Other Miss [redacted] Mckeich - No Data Recorded
28/06/2022 Other Miss [redacted] Mckeich
28/06/2022 Consultation ANP actions, patient requesting result of back xray and smear result. Portal and [redacted] store checked, no results reported on back as yet. Suggest referral to SH clinic for result smear.
Patient also requesting prescription ketoconazole shampoo in place of dermax. Can nursing staff please assess patient's scalp to see in there is a clinical need for this shampoo - such as fungal infection to scalp/dermatitis, if so happy to prescribe. Miss [redacted] Mckeich
28/06/2022 Other Miss Jackie Mckeich - No Data Recorded
27/06/2022 Triage Ms Jill Ramsay - No Data Recorded
27/06/2022 Triage Ms [redacted] Rennie
27/06/2022 Self-referral Doctor and Well Woman - KJM - spine x-rays and smear results
23/06/2022 Triage Mr [redacted] Cooper - No Data Recorded
21/06/2022 Triage Mrs Louise [redacted]
21/06/2022 Ongoing review [redacted] L [redacted]
Asked by pharmacy to prescribe paracetamol 1 week course as patient is covid positive
same done
21/06/2022 Triage Ms [redacted] Cleary - No Data Recorded
21/06/2022 Triage Ms Jill Ramsay
21/06/2022 Consultation not seen in clinic todayas covid positive and stated appointment wasn't urgent, advised her to put another slip in.
Jill Ramsay PCT SN
21/06/2022 10.54
Dr Gp Stirling
21/06/2022 Triage Dr [redacted] Murray
21/06/2022 Failed encounter listed for SH clinic but isolating with covid so not seen. I will ask R [redacted] to relist. Dr Imogen [redacted]
20/06/2022 Triage Ms [redacted] Rennie
20/06/2022 Referral to mental health team Struggling emotionally - JR Ms [redacted] Rennie
20/06/2022 Triage Ms Claire Mcbeath - No Data Recorded
19/06/2022 Triage Ms [redacted] Mckay
19/06/2022 Consultation Contacted by SPS at 11:00hrs to advise that Georgina has tested positive for covid and is now in isolation. SPS mentioned that Georgina has previously had all her COVID vaccinations
[redacted] McKay (RN)
19/08/2022 @ 11:05 Dr Gp Stirling
14/06/2022 Triage Ms [redacted] Rennie
14/06/2022 Next hospital appointment Forth Valley - X-Ray - 17/06/2022 @ 09:20
13/06/2022 Triage Ms Eilish Hennessy
13/06/2022 Seen by health care assistant Georgina was seen by HCA Eilish and SN Keyleigh in clinic for opening of letter. Letter was response to complaint, no concerns raised by Georie, was satisfied with letter.

E Hennessy - HCA
13/06/2022
21:20 Dr Gp Stirling
13/06/2022 Triage Mrs [redacted]
04/06/2022 Joint consultation with georgina, myself and claire Mcbeath.
Georgie expressing that she has a rash on her body from not receiving her requested diet- on examination, [redacted] see. 2 x small red hair folicles.
States blisters all over her mouth- again, Nill evident.
Throat slightly red, advised to take paracetamol at this time.
[redacted] happy to await dietician appointment as her food diary had many different food types and symptoms and we require specialist advice regarding same.
[redacted] also expressed about her lump at the top of her neck- already listed for ANP to review same.
C reid sn Dr Gp Stirling
09/06/2022 Third Party Consultation Ms [redacted] Rennie
09/06/2022 Document Image Docman Attachment
09/06/2022 Administration Clinical Letter HMP Cornton Vale X-Ray Ms [redacted] Rennie
09/06/2022 Triage Ms Keleigh Mournian
09/06/2022 Consultation ATSP for throat swelling and headache. On examination observations as follows; BP 116/81 T 37.5 P 86 SPO2 97%
Throat slightly red on examination. Advised to take paracetamol for pain.
Keyleigh Mournian
PCT
09.06.2022
20.44 Dr Gp Stirling
08/06/2022 Third Party Consultation Mr Sharon Mccallum
08/06/2022 Administration Link broken, document rescanned and resubmitted to Vision.
Mr [redacted] Mccallum
08/06/2022 Triage Mrs [redacted] Kane

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NHS Confidential: Personal data [redacted] a patient

Georgina Smith 04/12/1991 662/91/440 **All Consultations**

08/06/2022 Consultation ANP L.Kane
Patient seen due to swelling top of back
OE some swelling evident cervical area
boney prominence felt however has history of kyphosis
reasonable ROM of neck however states pain +++
patient states pain worsened over last 3 weeks
also has chronic back pain
no neuropathic type pain described
patient requesting analgesia as celecoxib and paracetamol not effective
wishes NSAID that she has not tried before
prev tried Naproxen, diclofenac, meloxicam, ibuprofen
therefore trial of etodolac 600mg OD
due to significant increase in pain, swelling and boney prominence i have referred for C- spine XR
Patient happy with this
08/06/2022 Triage Ms Rachel [redacted]
19/04/2022 Recall on 19/04/2023 for Cervical smear: negative with Ms [redacted] Status: Complete
19/04/2022 Cervical smear: negative HPV - Human papillomavirus test positive recall due: 19/04/2023 1 year recall Ms [redacted]
08/06/2022 Triage Ms [redacted] Rennie - No Data Recorded
06/06/2022 Triage Mr [redacted] Mccallum
06/06/2022 Self-referral Well Person Clinic - Discuss smear results, support and advice for next steps. NT Mr [redacted] Mccallum
03/06/2022 Triage Mrs [redacted] Mckay
03/06/2022 Consultation Seen for nurse referral form. She states has put in lots of nurse referral forms when she is not well, but only 6 recorded and have been actioned since January 2022. I have reassured Georgina that she has [redacted] referred to dietician and just waiting on appointment. Georgina complaining of sore back, has a curvature and I note her neck is quite swollen and when assessing it, it became sore and pain shot to the bottom of her back. Advised is in for seeing MO on Tuesday and this can be looked at then.She is already on celecoxib 200mg and amitriptylline 75mg. Feels she needs her quetiapine looked at, therefore have referred her to the mental health team.

Also complaining of a sore throat and mouth. On examination, her throat was swollen and slightly red, also, it was noted she has got small blisters in her mouth, tongue and lips. For MO to assess all of this. Georgina happy with consultation.

[redacted] McKay
PCT nurse
1040am Mrs [redacted] Mckay
02/06/2022 Triage Ms Eilish Hennessy
02/06/2022 Seen by health care assistant Georgina has been written a letter to advise of the refferal put in place for dietician. Furthermore Georgina has advised of back pain following discussion with Charge Nurse C McBeath Georgina has been listed for primary care review for 03/06/2022 and placed on referal list.

Eilish Hennessy
HCA
02/06/2022
16:15 Dr Gp Stirling
02/06/2022 Triage Mr [redacted] Mccallum
02/06/2022 Self-referral Nurse/GP - Curved spine inflamed and painful, Back and shoulders swollen up. DM Mr [redacted] Mccallum
01/06/2022 Triage Ms Eilish Hennessy
01/06/2022 Seen by health care assistant Spoke to Georgina at medication tonight at the request of SSN C [redacted] Explained to Georgina that a refferal had been put in place for dietician due to the submission of food diary at the request of ANP. Georgina was accepting of this information and understood. Georgina advised she was experincing back pain due to a spinal condition. Georgina was advised to put in NRI and primary care team would pick this up. No further [redacted] at present.

Eilish Hennessy - HCA
01/06/2022
21:20 Dr Gp Stirling
01/06/2022 Triage Ms Jill Ramsay - No Data Recorded
30/05/2022 Administration Ms S [redacted] Kelly-Gutowski
30/05/2022 Self-referral Dentist. Ms Sonja [redacted]
27/05/2022 Other Miss J [redacted] Mckeich
27/05/2022 Consultation ANP actions, given copy of food diary patient has completed, had issue regarding coeliac, unable to do test as patient not agreeable to eating normal diet for 6 weeks. After discussion with staff patient states is unable to drink normal milk and is requesting soya milk and no spices. Discussed food diary with Dr Kildare, agreed to re-refer back to dietician, referral completed. Miss [redacted] Mckeich
27/05/2022 Referral Letter Miss [redacted] Mckeich
27/05/2022 SCI Referral Letter
27/05/2022 Third Party Consultation Ms [redacted] Rennie
27/05/2022 Document Image Docman Attachment
27/05/2022 Administration Clinical Letter HMP Cornton Vale Dietician Ms [redacted] Rennie
27/05/2022 Other Miss [redacted] e Mckeich - No Data Recorded
24/05/2022 Other Dr [redacted] Kildare
24/05/2022 Ongoing review MOA - Desogestrel discontinued on Kardex at request of [redacted] who handed them back to Pharmacy staff
Dr [redacted] Kildare
23/05/2022 Triage Ms J [redacted] Rennie
23/05/2022 Self-referral Staff Member, no name given would like to discuss patients diets TEL 265335
18/05/2022 Triage Ms [redacted]
18/05/2022 Medication - risk monitoring Delivering a months supply of Desogestral to GS today. GS asked for them to be returned as not effective (still bleeding) Spoke to nursing staff re SHC clinic referral .Desogestral disposed of at HC. Ms [redacted]
17/05/2022 Triage Ms [redacted] Kilpatrick
17/05/2022 Letter encounter to patient Letter sent to make Georgina aware that recent test came back negative as documented on the 17/05/2022 and the 13/05/2022
QFIT-NEGATIVE
Helicobacter-NEGATIVE
Calprotectin-NEGATIVE
[redacted] Kilpatrick
HCA
17/05/2022
16:49HRS Dr Craig Sayers

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

17/05/2022 Triage Mrs Sylvia Barclay
17/05/2022 Multidisciplinary case conference Discussed at RMT. SW and forensic psychology to meet with Georgina to discuss future plans and clarify potential referrals. No plans at present for further programmes. [redacted] will be able to apply for further progression in July 2022.

S Barclay
MH Nurse
17/05/2022 Mrs Sylvia Barclay
17/05/2022 Other Dr [redacted] Kildare
17/05/2022 Ongoing review MOA - see Faecal calprotectin result <50 - therefore normal - symptoms are likely IBS [redacted]
Can discuss at an appointment if needed but really needs to have blood taken for coeliac serology in first instance to confirm if coeliac or not
Dr [redacted] Kildare
16/05/2022 Third Party Consultation Mr [redacted] Mccallum
16/05/2022 Document Image Docman Attachment
16/05/2022 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
13/05/2022 Other Miss [redacted] Mckeich - No Data Recorded
13/05/2022 Other Miss [redacted] Mckeich
13/05/2022 Consultation ANP entry J McKeich/K [redacted]
ANP mail, qFit and helicobacter negative, still awaiting faecal calprotectin Miss [redacted] Mckeich
13/05/2022 Results recording Dr Craig Sayers - No Data Recorded
13/05/2022 Results recording Dr [redacted] Sayers
06/05/2022 Biochemical test = Abnormal <50 Dr [redacted] Sayers
12/05/2022 Third Party Consultation Mr [redacted] Mccallum
12/05/2022 Document Image Docman Attachment
12/05/2022 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
12/05/2022 Triage Ms [redacted] Murphy
12/05/2022 Ongoing review ANP mail
ANP clinic
clinical results H-pylori negative
await fecal protectin
12/05/2022 Triage Ms [redacted]
12/05/2022 Ongoing review ANP clinic not seen due to same already advised to patient
see previous entries patient has been seen and letter have been sent regarding diet.
12/05/2022 Other Miss [redacted] Mckeich - No Data Recorded
11/05/2022 Third Party Consultation Mr [redacted] Mccallum
11/05/2022 Document Image Docman Attachment
11/05/2022 Administration Microbiology Results Forth Valley Royal Hospital Microbiology Mr [redacted] Mccallum
11/05/2022 Results recording Dr [redacted] Sayers
06/05/2022 Biochemical test = Not Detected
- Result from Blood Science, Ninewells Hospital.
Not Detected Dr [redacted] Sayers
11/05/2022 Results recording Dr [redacted] Sayers
06/05/2022 Biochemical test = Dr [redacted] Sayers
06/05/2022 Faecal calprotectin content = <none> Dr [redacted] Sayers
10/05/2022 Triage Mr [redacted] Mccallum
10/05/2022 Referral to mental health team - Diet issues impacting on Mental Health - LS Mr [redacted] Mccallum
10/05/2022 Self-referral Nurse/GP - Diet issues - stopped eating due to change in diet - LS Mr [redacted] Mccallum
10/05/2022 Other Dr Jack Kildare
10/05/2022 Letter encounter to patient , , lab reults from last stool sample normal (negative) letter sent to Georgina advising same.

N.Brown
HCA
10/05/2022 17:03 Ms Elaine Mcadam
10/05/2022 Fibrocystic disease of breast See letter from Gen Surg (Breast Team) - has Fibrocystic changes in her breast - they have written to Clinical Genetics based on her FHx of breast cancer to see if she needs enhanced screening Dr [redacted] Kildare
10/05/2022 Triage Dr [redacted]
10/05/2022 Seen in [redacted] health clinic Seen in clinic with R [redacted]

Discussed labiaplasty referral - [redacted] awaiting an appointment from Glasgow. Discussed waiting list very long, and that there is a long process once they see her of medical photography, MDT input etc and most cases get rejected.Dr [redacted] Dr [redacted]
09/05/2022 Third Party Consultation Ms [redacted] Rennie
09/05/2022 Document Image Docman Attachment
09/05/2022 Administration Clinical Letter HMP Cornton Vale General Surgery Ms [redacted] Rennie
06/05/2022 Third Party Consultation Mr S [redacted] Mccallum
06/05/2022 Document Image Docman Attachment
06/05/2022 Administration Clinical Letter HMP Cornton Vale Clinical Notes Mr Sharon Mccallum
06/05/2022 Third Party Consultation Mr [redacted] Mccallum
06/05/2022 Document Image Docman Attachment
06/05/2022 Administration Clinical Letter HMP Cornton Vale Patient letter Mr [redacted] Mccallum
05/05/2022 Surgery consultation Dr [redacted] Kildare
05/05/2022 Ongoing review ANP [redacted] J.Kildare
Actions
See bloods - all normal
See Micro report - tongue swab - moderate growth of Candida species - for Fluconazole 50mg OD 7/7 Dr [redacted] Kildare
05/05/2022 Ongoing review Listed for GP clinic today - to discuss testing for coeliac disease again - see prev entries - unfortunately I have nothing further to add at this stage - in order for us to confirm/refute a diagnosis of coeliac disease we need accurate serology which involves eating gluten for at least 6 /52 prior to testing.

Letter from Dieticians back in Jan 22 state that gluten senstivity is unlikey but could be wheat [redacted] - [redacted] therefore exclude wheat from diet but would still be able to eat rice crispies etc and wouldnt need to worry about contamination.

I have not seen her today but sent a letter outling this. [redacted] has already been seen by ANP J.McKeich last week for a fairly lengthy appointment. Dr [redacted] Kildare

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

05/05/2022 Triage Ms [redacted] - No Data Recorded
04/05/2022 Third Party Consultation Mr Sharon Mccallum
04/05/2022 Document Image Docman Attachment
04/05/2022 Administration Kardex HMP Cornton Vale Pharmacy Mr [redacted] Mccallum
04/05/2022 Other Miss [redacted] Mckeich - No Data Recorded
04/05/2022 Third Party Consultation Ms [redacted] Rennie
04/05/2022 Document Image Docman Attachment
04/05/2022 Result Results HMP Cornton Vale All results Ms [redacted] Rennie
02/05/2022 Triage Ms [redacted] Durrant
02/05/2022 Indirect encounter sample provided for labs however unable to send due to it being a bank holiday. new sample pots sent to patient wtih letter advising of same. Dr [redacted] Sayers
02/05/2022 Triage Ms [redacted] Sinclair
02/05/2022 Medication - risk monitoring Prescribed Anusol returned to Health Centre for disposal as pt does not want to use this. Disposed of 020522 Ms [redacted]
02/05/2022 Consultation
Seen in healthcentre to advise of recent advice from GP- no evidence of gluten intolerence test therefore patient is encouraged to undertake this test.
Patient advises that she is not happy with this outcome and she has requested to speak to Dr Sayers to discuss options.
Advised that I will list for GP discussion.

[redacted] SN
02/05/2022, 10:06 Ms [redacted]
30/04/2022 Results recording Dr [redacted] Sayers
29/04/2022 Serum C reactive protein level = mg/L <5 Dr Craig Sayers
29/04/2022 Serum amylase level = 35 U/L U/L Dr [redacted] Sayers
29/04/2022 Glomerular filtration rate = mL/min Abnormal >59 Dr [redacted] Sayers
29/04/2022 Serum urea level = 3 mmol/L Dr [redacted] Sayers
29/04/2022 Serum creatinine = 63 umol/L Dr Craig Sayers
29/04/2022 Serum chloride = 108 mmol/L Dr [redacted] Sayers
29/04/2022 Serum sodium = 138 mmol/L Dr [redacted] Sayers
29/04/2022 Serum potassium = 5 mmol/L Dr [redacted] Sayers
29/04/2022 Urea and electrolytes = <none> Dr [redacted] Sayers
29/04/2022 Serum albumin = 41 g/L Dr [redacted] Sayers
29/04/2022 Serum total protein = 67 g/L Dr [redacted] Sayers
29/04/2022 AST serum level = 17 U/L U/L Dr [redacted] Sayers
29/04/2022 Serum alanine aminotransferase level = 18 IU/L Serum ALT level - Dr [redacted] Sayers
29/04/2022 Serum alkaline phosphatase = 91 U/L U/L - ALP Ref. Limit for patients <30 days old is 0-380 iu/L
ALP Ref. Limit for patients <17 years old is 0-425 iu/L
ALP Ref. Limit for adults (>17 years) is 0-130 iu/L Dr [redacted] Sayers
29/04/2022 Serum total bilirubin level = 5 umol/L Dr [redacted] Sayers
29/04/2022 Liver function test = <none> Dr [redacted] Sayers
30/04/2022 Results recording Dr [redacted] Sayers
29/04/2022 Nucleated red blood cell count = 0 10^9/L 10^9/L Dr Craig Sayers
29/04/2022 Basophil count = 0.1 10^9/L 10^9/L Dr [redacted] Sayers
29/04/2022 Eosinophil count = 0.3 10^9/L 10^9/L Dr [redacted] Sayers
29/04/2022 Monocyte count = 0.5 10^9/L 10^9/L Dr Craig Sayers
29/04/2022 Lymphocyte count = 1.9 10^9/L 10^9/L Dr [redacted] Sayers
29/04/2022 Neutrophil count = 3.7 10^9/L 10^9/L Dr [redacted] Sayers
29/04/2022 Mean corpusc. Hb. conc. {MCHC} = 344 g/L Dr [redacted] Sayers
29/04/2022 Mean corpusc. haemoglobin{MCH} = 28.9 pg Dr [redacted] Sayers
29/04/2022 Packed cell volume = 0.378 ratio Dr [redacted] Sayers
29/04/2022 Mean corpuscular volume (MCV) = 84 fL fl Dr [redacted] Sayers
29/04/2022 Red blood cell {RBC} count = 4.5 10^12/L 10^12/L Dr [redacted] Sayers
29/04/2022 Platelet count = 303 10^9/L 10^9/L Dr [redacted] Sayers
29/04/2022 Total white cell count = 6.4 10^9/L 10^9/L Dr Craig Sayers
29/04/2022 Haemoglobin estimation = 130 g/L Dr Craig Sayers
29/04/2022 Full blood count - FBC = <none> Dr [redacted] Sayers
29/04/2022 Triage Ms Jak-Leanne Durrant
29/04/2022 Indirect encounter Advised that Dr.Sayers has checked outside medical records and there in no evidence of gluten intolerance tests. Will list for nurse clinic to advise [redacted] of same however I am doubtful that she will be convinced to participate in the test. Dr [redacted] Sayers
29/04/2022 Triage Ms [redacted] Durrant
29/04/2022 Blood sample taken = Sent to lab for testing Dr [redacted] Sayers
29/04/2022 Consultation S - Listed by ANP for nurse clinic
B - Bloods, stool sample, discuss gluten free diet
A - Seen in treatment room with S/N Jill Ramsay. Bloods obtained as requested by ANP. Stool sample pots and Qfit given with instruction, advised to return on Monday morning as no transport to labs over weekend.

SPS kitchen staff have advised that they will no longer be providing gluten free food items that can be ordered on prescription due to their budget, therefore Georgie requires a prescription for certain food items. It had been advised that there was no formal evidence of a blood test for this intolerance on vision and so the purpose of todays consultation was to dicuss this with [redacted] Georgie advised me that she would not be able to manage the 6 week period of consuming gluten in her diet that is required prior to the test, and so was unwilling to participate in this. She then became very emotional and advised me that she had been in hospital numerous times for reactions to gluten and lacose - the last admission being as some point earlier this year. States that she has had the blood test taken when she was younger and had a repeat of same in HMP Grampian and again in Corntonvale which Dr.sayers carried out when she was first admitted, nil on vision to support this statement. Advised Georgina that i would discuss her [redacted] with the ANP as she should have evidence on her medical records of the relevent test. ANP K [redacted] advised that ANP L [redacted] has access to global clinical portal and so she may be able to access same.
R - [redacted] is very distressed with the prospect of having to restart a gluten diet. Listed for ANP clinic to discuss further ?Access medical records in order to avoid a repeat test.

J Durrant
PCT
29/04/22 14:02 Dr [redacted] Sayers
28/04/2022 Other Miss J [redacted] Mckeich

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28/04/2022 Consultation ANP entry, reponse received from Dr [redacted]
Hi Jackie,
there is a referral in to Glasgow - let me chase this up and update them that she is in CV.
[redacted]
Dr Imogen [redacted] (she/her)
Specialty Doctor [redacted] Health Miss [redacted] Mckeich
28/04/2022 Consultation ANP entry:
Email sent to Dr [redacted] regarding labiaplasty, see below:
Hi Dr [redacted]
Seen GS DOB: 4/12/91, spin 131344 today in Cortonvale.
She was asking if I could speak to you regarding her referral to Glasgow for possible labiaplasty.
Your entry on vision from Dec 21 states there is lots of prep work to be done prior to a decision being made regards to surgery.
GS is keen to go ahead with this and the prep work.
She was released on parole however is now readmitted till 2025.
I would appreciate if you could look into this/see patient when next in,
kindest regards
[redacted] McKeich
ANP
Miss [redacted] Mckeich
28/04/2022 Other Miss [redacted] Mckeich - No Data Recorded
28/04/2022 Triage Ms Jak-Leanne Durrant
28/04/2022 Asthma Dr [redacted] Sayers
28/04/2022 Other Mis [redacted] Mckeich
28/04/2022 Consultation Seen patient for review has few issues:
1. re long standing abdo pain
c/o abdo pain
present for years
pains to lower left abdomen
states has had grumbling appendix for years
pain also to upper gastric region
pain occurs intermittantly
has had pain x 3 in last week
starts middle of abdomen
travels round back
describes pain as sharp, spasm
triggered by food, bigger the meal/increase in pain
pain can last up to 2 hrs
nothing makes it better
meds: biscacodyl, laxido, peppermint caps, - states taking as prescribed
Bladder - urgency, then goes, passes little
Bowels - last moved this morning, regular, normal stool, states stool consistency changes depending if takes medication
Appetite - ok
fluids - at least 2 litres per day
states had cholecystecomy at 19 years
Also has hx haemorrhoids
o/e mobilising normally
climbed onto examination couch with no difficulty
no difficulty sitting/standing
abdo symmetrical
no skin changes
no jaundice
no rashes
abdo soft non tender
bowel sounds present
no referred pain/gaurding
patuient PR'd, chaperone present, small external haemorrhoid present, no blood on removal finder - patient requesting treatment for same,
states tried anusol with no benefit, have prescribed anusol HC.
Plan - urine dip done - negative
for bloods, FBC, U&E, LFT, CRP, amylase
stool for helicobacter
stool for qFit
stool for faecal calprotectin
if loose stool sample for C&S
Listed in outcome column for same
2. was seen at sexcual health clinic for removal rod and administration depot, states has small lump neat vagina, wants secons opinion,
states has lump just above clitoris
o/e skin over clitoris and surrounding area appears normal
no lumps or bumps felt
small pin sized reddish spot right of clitoris
appears to be possible ingr4own hair - recenlt shaved
no evidence infection, iflammation, abcesses
no discharge
patient advised
Patient asking if Dr [redacted] has done referral to Glasgow for labiaplasty, see entry 6/12/21, discussed response from Glasgow with patient,
still wants to go ahead with same, advised will contact Dr [redacted] for update.
3. Patent stated was seen at hospital yesterday for breast lumps, states was not impressed with consultation, felt she was not being listened
too, has [redacted] done left breast, advised to wait on letter from consultant.
4. Asked to check patient's neck again for lumps, examined, no swelling of lymph nodes, patient advised
Mouth, states nystatin not helped tongue, swab taken
Patient appears very focused on personal health issues, advised once all the results come back and are normal there will be no clinical
reason to investigate further.
5. Patient requesting information on trichomoniasis, NHS info leaflet issued. Miss [redacted] Mckeich

26/04/2022 Triage Ms [redacted] Durrant

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26/04/2022 Consultation S - NRF received
B - Review of face wound
A - Seen in treatment room with S/N Jill. Small scab to right cheek, appeared more like dry skin - no open wounds. Georgina advised that it was looking much better, not causing any itchiness or pain. Also discussed at visit upcoming hospital app, advised that I could not give a date however she has an appointment coming up soon (27/04/22). Also noted lump on labia, can see that this was assessed last week by SH nurse [redacted] however Georgina feels it has worsened and would like a second opinion. States that the lump is not causing any pain at present however sometimes causes some bleeding. Wished to discuss in more depth with ANP so will list for same. Georgie was very concerned regarding family history of cancer and the appearance of these new lumps.
R - Already listed for ANP clinic Wednesday- reason unknown. Advised [redacted] I would list her to discuss this in greater detail with the GP/ANP.

J Durrant
PCT
26/04/22 1713 Dr [redacted] Sayers
20/04/2022 Triage Miss [redacted]
20/04/2022 Consultation Seen by nurse in treatment room.

HCA L Kirkpatrick recieved a phone call from Pebbles staff regarding a [redacted] the [redacted] had on her face feeling that it may be a bite. [redacted] was brought up to the health center where I look at the [redacted] had just been outside playing football and appeared with a red face and moist skin, warm all over and therefore was hard to assess redness and heat.

The [redacted] was on her face, left cheek. The [redacted] looked to have a scab over it looking slightly yellow in colour and was slightly hard under the surface. The [redacted] was cleaned with prontosan and a small inadine patch was placed in situ with a mepore plaster. Gerogie advised to replaced both inadine and mepore after showering this evening-products with patient.

Advised to infrom staff of any worsening symptoms.

S/N N [redacted]
20/04/22
1536hrs. Miss [redacted] Thompson
20/04/2022 Triage Ms [redacted] Rennie
20/04/2022 Next hospital appointment Forth Valley - Area 2 Breast Clinic - 27-04-2022 @ 09:30 Ms [redacted] Rennie
19/04/2022 Triage Ms Rachel Lawson
19/04/2022 Remov subcutaneous contraceptive implant othr healthcre prov First service recall due: Claim Expiry Date: Ms [redacted]
19/04/2022 Seen in [redacted] health clinic Wished nexplanon removed had for approx 1 year and still getting periods regularly and quite heavy states didnt have this issue with previous implant, had considered depo as alternatibve however felt this was [redacted] to ovarian cysts bursting previously, previous had coil and felt it did not sit comfortably and had to be removed due to the pain. Happy to try POP so desogestrel 75micrograms daily prescribed.
Nexplanon removed with chaperone L Hamilton, using lidocaine 1% Batch 124503 EXP 06/2024, wound care advice given.
Concerned about boils around vagina nil evident at this time, slight tender area with evidence of healing spot/ingrown hair top of right labia, no evidence of infection at this time.
Asking if Drmurray had feedback regarding referral to Glasgow advised I would ask and let her know, also asking if could be referred naywhere else if declined or how to go private. Will speak to Dr [redacted] and let Georgina know or arrnage appointment to discuss same.
R [redacted] - [redacted] health nurse
19/04/2022 11:15 Ms [redacted]
19/04/2022 Liquid based cervical cytology screening Ms [redacted]
18/04/2022 Triage Ms [redacted] Rennie
18/04/2022 Failed encounter - hospital appointment Hospital letter sent direct to patient. Contacted 01324 566639 and left details for the appointment to be re-arranged. Forth Valley - Area 2 Breast - 26/04/2022 @ 09:30 - POssible 2 hour appointment Ms [redacted] Rennie
14/04/2022 Triage Ms [redacted] Rennie
14/04/2022 Next hospital appointment Forth Valley - Area 2 Breast - 26/04/2022 @ 09:30 - POssible 2 hour appointment Ms [redacted] Rennie
13/04/2022 Other Miss [redacted] Mckeich - No Data Recorded
13/04/2022 Referral Letter Miss [redacted] Mckeich
13/04/2022 SCI Referral Letter
13/04/2022 Other Mis [redacted] Mckeich
13/04/2022 Consultation Seen patient, c/o ongoing breast lumps
has new breast ,lumps - lump above nipple left breast
states has mass of lumps side left breast
requesting "water ducts" drained - states was told when last seen that ducts were full
states also has lump on back of neck
Has family hx breast cancer - [redacted]
[redacted] - mouth/throat cancer
Menstral cycle - has rod insitu, inserted 1 year ago
never had periods for years, has bled 3 weeks ago for 1st time, lasted for 8-9 days, seen by SH, no concerns, states may be [redacted] to MH/s
o/e looks well
chatty
oth breasts examined
look symmetrical
skin - no obvious cellulitis/infection/pigmentation/changes
nipples appear normal, no retraction
no discharge
right breast - small circular pea size lesion just above aveolar
left breast - small circular pea sized lesion inner right side chest
1 x small pea shaped lesion just above left nipple
1 x small pea shaped lesion upper outer side left breast (approx 2 oclock)
1 x small pea shaped lesion lower left axillae, midline
No pain on palpation breasts/lesions
states had lesion to back of neck, nil felt
neck examined - nad except glands to either side neck slightly swollen
no pain
mouth - normal mucosa
no swelling to back of throat
no hoarsness
no difficulty swallowing
no change taste/smell
no pain

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no difficulty swallowing
no change taste/smell
no pain
no oral ulcers
tongue - thick creamy plaque over back of tongue
apyrexial
? oral thrush
Rx nystatin
Patient given worsening advice
patient very concerned has breast cancer - long chat re same
Has been seen previously by FV for same (2018)
Referred back to surgical team at FV, patient happy with this
Also states has occasional abdo pain, previous cholelststectomy, due to time current consulttation advised would relist patient for another appoinmtne to discuss same, no acute issues at present.

Miss [redacted] Mckeich

12/04/2022 Other Miss [redacted] Mckeich - No Data Recorded
12/04/2022 Surgery consultation Dr [redacted] Kildare
12/04/2022 Ongoing review Listed for GP clinic
I have unfortunately been unable to see Georgie today due to other appointments over running and some unscheduled work
I have relisted for ANP clinic tomorrow Dr [redacted] Kildare
11/04/2022 Triage Mrs [redacted] Watt
11/04/2022 Mental health review Named Nurse Session
Spoke with [redacted] at 14.00hrs in health centre.
Initially [redacted] was very angry. Reported that she didn't feel people were listening to her. She spoke of feeling very distrustful of SPS staff, believes they are checking her mail and phone calls more than other prisoners in order to "catch her out".
Believes that SPS Lesley Whyte and others at RMT such as [redacted] are being destuctive in her forward progression and wants to know what she has to do in order to have more positive feedback from RMT.
She reports feeling stressed and her stress is manifesting with both psychological and physical symptoms.
Recently been having more frequent heavy periods and heavy nose bleeds. Has also been discovering lumps in her breasts and neck which have been referred to GP/ANP.
Another issue of [redacted] is her outstanding request for Labiaplasty which she had been discussing with Dr [redacted] last in Dec 2021. Since she will now remain in custody until July 2025, [redacted] would like Dr [redacted] to follow up this referral.
Outcomes:
I have spoken to Dept Team Leader C [redacted] who will be attending the next RMT to feed back to me their expectations for [redacted] and their plans going forward and will meet up with her in 2 weeks to discuss this.
Appointment with R [redacted] SH Nurse 12/04/22 to discuss referral with Dr [redacted]
Appointment with Dr Kildare 12/04/22 ti discuss lumps.

[redacted] Watt
SSN MH
11/04/22 15.40 Dr [redacted] Sayers
11/04/2022 Triage Mrs [redacted] - No Data Recorded
11/04/2022 Triage Ms Karly [redacted]
11/04/2022 Consultation [redacted] seen patient in treatment room at 10:30AM due to lump on chest. Patient states one now on back of neck also. Informs me she prone to get cysts and is extremely worried incase they are cancerous. Lots of reassurance given. Felt small lump on back of neck and above left breast area. Will relist for ANP/GP appointment.
S/N [redacted] 10:48AM Ms Karly [redacted]
08/04/2022 Administration Ms S [redacted]
08/04/2022 Self-referral Nurse (lump on breast). Well person clinic Ms Sonja [redacted]
04/04/2022 Triage Ms [redacted]
04/04/2022 Mental health review [redacted] attended the Health Centre on Saturday 2nd April 2022 due to excess bleeding and feeling physically unwell regarding same
Observations were taken which were all within normal range
At that time she stated that she was struggling with her mental health and was needing to speak with a nurse
I advised that I meet with her Sunday which she was agreeable
I thereafter met with [redacted] on Sunday 3rd April wherein I advised that I would note her concerns with regards to her mental health and pass same over to her named nurse [redacted] Watt
[redacted] went on to say that her "stress" disorder was getting worse as she feels that she is being held back from the SPS regarding progression
She voiced that she is constantly being held back from progression/open estate and this is impacting on her physical and mental stress
She states that the bleeding she has been suffering from lately is caused by stress
There was not much in way of issues surrounding her mental health with [redacted] and it was more the fact that she wanted the health centre staff to pass over to SPS that impact of lack of progress was triggering her "stress disorder"
There was no [redacted] regarding risk to Georgie at this time
Plan: Passed over to named nurse [redacted] Watt for information

[redacted] Walker
SSN
04/04/2022 12.25 Dr [redacted] Sayers
02/04/2022 Triage Ms [redacted]
02/04/2022 Ongoing review Asked to see Georgina by Peebles staff. Georgina is complaing of heavy bleeding & feeling unwell due to same. Met with Georgina. She does not think this is [redacted] to a period as she has a rod in. Rod was inserted approximately 1 year ago. Observations carried out - BP 133/76; HR 76; SP02 99% ; Temp 37 - all within normal range. She in unsure if this is [redacted] to stress. Advised Georgina that I would catch up with her tomorrow for a chat as she reported that she is feeling stressed at the moment due to the "system"

SSN [redacted]
02/04/2022
15.10 Dr [redacted] Sayers
31/03/2022 Triage Ms [redacted] Durrant

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31/03/2022 Consultation S - Asked to reveiw by officers at 16:45
B - ?increased bleeding, suggesting emergency app
A - Seen in treatment room with SI/N [redacted] Georgina states that she started having vaginal bleeding this morning and that she needed to be seen as a matter of urgency. States has contraceptive rod in situ, does not usually have periods however had one a couple of months ago. Has been getting spells pf dizziness however none at present. Obs as follows - BP - 126/75, HR - 73, SP02 - 98%, T - 36.8, RR - 16. Second standing bp obtained after 5 minutes standing at 122/84. States has been through 3 sanitary pads since this morning. Also reporting increased stress due to some bad news recently.
R - Reassured bleeding most likely period and that observations all normal. Advised to monitor over next few days and if any concerns to make nursing staff aware, advised that increase in stress could also be having an affect.

J Durrant
PCT
31/03/2022 17:10 Dr [redacted] Sayers
25/03/2022 Triage Mrs [redacted] Differ - No Data Recorded
15/03/2022 Surgery consultation Dr [redacted] Kildare
15/03/2022 Consultation GP Review
FTF with PPE
A few issues discussed again
1) Feels MH is still poor and asking to see [redacted] - is on Quetiapine 100mg nocte
Advised to put referral in through MHT for this

2) On going left wrist pain - see prev entry - still had no word from PT yet - advsied very long waiting list
Feels Celecoxib is not working and asking for Pregabalin - explained reasons for why this is not appropriate - she is not overly accepting as has been on before but ultimately have told her its just not an option for her
Due to start [redacted] the gardens tomorrow - anxious that this might worsen it, advised that its best that she keep active - [redacted] for physical and mental health all round
She is asking about a Tubigrip again for support - advised we dont have these
Continue Celecoxib for now

3) Feels her spine is out of alignment -longstanding history of low back pain, wanting a back brace or operation to "crack spine"
Advised her to engage with PT/ do exercises prev taught to strengthen this - she isnt convinced that this will work but I have advised her no tablets take pain away completely and she needs to focus on non-pharm methods

4) Lump in forehead - wanting to have a brain scan for this as feels its realting to a head injury she sustained when she was a [redacted]
Lump is longstanding and hasnt gotten bigger
No neuro deficit, LOC or confusion, no other symptoms
Lump itself can be painful at times but no headaches

O/E
As per my prev entry this looks more like a seb cyst to me, above left eye brow, no red flag features

Advised to leave alone, benign lesions are not usually removed on the NHS unless becoming troublesome in terms of size or other symptoms Dr [redacted] Kildare
10/03/2022 Third Party Consultation Ms Jane Rennie
10/03/2022 Document Image Docman Attachment
10/03/2022 Result Results Microbiology Ms [redacted] Rennie
08/03/2022 Other Miss Jackie Mckeigh - No Data Recorded
08/03/2022 Surgery consultation Dr [redacted] Kildare
08/03/2022 Failed encounter Listed for GP clinic - has an activity on this afternoon and is unable to attend for review - relisted for my clinic next week Dr [redacted] Kildare
03/03/2022 Triage Miss [redacted] Hegarty
03/03/2022 Suspected coronavirus infection 03/03/22
S- covid test
A - incell
A - swab done by her self
HCA lyn hamilton
17/20 Miss [redacted] Hegarty
03/03/2022 Suspected coronavirus infection Close contact to Covid-19, PCR test obtained and sent to labs. Awaiting result

s/n Sinéad Hegarty 03/03/22 12:11 Miss [redacted] Hegarty
01/03/2022 Triage Ms Michelle Cleary
01/03/2022 Letter encounter to patient to inform her of recent change from Celecoxib 100mg to 200mg Celecoxib from ANP [redacted] Cleary
HCA
01/03/2022
15.28 Ms [redacted] Cleary
01/03/2022 Triage Mrs [redacted]
01/03/2022 Ongoing review ANP
L [redacted]
unable to see patient due to having no rooms available today
however on reviewing notes georgina has ongoing pain to knee and ankle for 1 month
no recent injury
pain sporadic, worsens throughout the day and with exercise
no swelling visable when examined by nursing staff
no radiation
pain described as an ache
she is currently on celecoxib 100mg BD - i will increase this to 200mg BD and if not effective in 4-6 weeks can re-refer for review

also was complaining of pain in head
small lump evident
same was prev reviewed by GP on 7/1/22
pain now both sides of head radiating from forehead to back of skull
describes shooting pain
due to this i will re-list for appt

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28/02/2022 Triage Ms [redacted] Durrant
28/02/2022 Consultation S - listed for PCT nurse clinic
B - Family history of Arthritis, ongoing pain to knee and ankle
A - Seen in clinic. States that aprox 1 month ago, started having trouble with left knee. States many previous injuries to this knee however none recently. Nothing in particular noted to cause pain, comes on sporadically, worsens on exercise and throughout the day. States elevation does not help. Feels it is swollen, no swelling visible on examination. Describes pain as "achy" and also feels same pain in ankle however pain is localised, does not radiate from knee. Currently takes Amitryptiline for back pain. Also mentions pain in head, states previous brain injury? nil in notes of same. Can see from recently appointment with GP, same issue discussed. Advised me that pain now on both sides raditating from forehead throught back of skull. Describes as shooting pain. Slight lump visible and some redness however patient informed me that would need to be reviewed without makeup to see properly.
R - Listed for ANP clinic, ?blood tests for CRP, FBC, ?ibuprofen prescription- await ANP assessment. Dr [redacted] Sayers
22/02/2022 Administration Ms Sonja [redacted]
22/02/2022 Medication - risk monitoring Spotcheck carried out on weekly medication. Quetiapine, Lymecycline and Amitriptyline counted and correct Dr Craig Sayers
22/02/2022 Self-referral Nurse (knee swollen/painful). Ms Sonja [redacted]
16/02/2022 Triage Ms [redacted] Cleary - No Data Recorded
08/02/2022 Third Party Consultation Ms [redacted] Hedley
08/02/2022 Document Image Docman Attachment
08/02/2022 Administration Kardex HMP Cornton Vale Pharmacy Recording Sheet Ms [redacted] Hedley
04/02/2022 Triage Ms [redacted] Cleary
04/02/2022 Letter encounter to patient to inform patient of recent prescription for Ceterizine .
[redacted] Cleary
HCA
04/02/2022
17.25 Ms [redacted] Cleary
04/02/2022 Other Miss [redacted] Mckeich
04/02/2022 Consultation ANP actions, request for antihistsmine, no allergies, rx cetirizine Miss [redacted] Mckeich
04/02/2022 Other Miss [redacted] Mckeich - No Data Recorded
04/02/2022 Triage Ms [redacted] Rennie - No Data Recorded
04/02/2022 Other Miss [redacted] Mckeich - No Data Recorded
03/02/2022 Triage Mrs [redacted] Watt
03/02/2022 Mental health review Named Nurse Contact
I met with [redacted] this afternoon at 1600hrs. She was bright and reactive. Happy to chat about how things were going.
Remains annoyed at having In Possession medication removed as she still states she has not been abusing Quetiapine and that her packet was short.
We discussed about how she was not attending for AM medication as she felt Sertraline made her feel angry whilst in this environment and her mood was currently not requiring an antidepressant. She also stated at this time she was coping without the morning dose of Quetiapine.
We agreed that it would be discussed at CTM to discontinue AM medication of Sertraline and Quetiapine and the re issue of In Possession medication going forward.
We have agreed to meet again in 1 week to carry out Full mental health assessment and care plan.
[redacted] Watt
SS/N MHT
03/02/22 19.50 Dr [redacted] Sayers
03/02/2022 Third Party Consultation Mrs [redacted] Rennie
03/02/2022 Document Image Docman Attachment
03/02/2022 Administration Kardex HMP Cornton Vale Pharmacy Mrs [redacted] Rennie
03/02/2022 Other Dr [redacted] Kildare - No Data Recorded
03/02/2022 Referral Letter Dr [redacted] Kildare
03/02/2022 SCI Referral Letter
31/01/2022 Triage Mrs [redacted] Watt - No Data Recorded
28/01/2022 Surgery consultation Dr [redacted] Kildare
28/01/2022 Consultation GP Re[redacted]
FTF with PPE
1) Georgie continues to report GI symptoms of bloating and intermittent constipation.
Was given [redacted] last night with mince and gravy and has come out with a couple of ulcers in her mouth which she is attributing to this
Dietician referral still pending
Is adamant that she wont repeat her TTG screen whilst eating gluten as feels it will just make her symptoms 100x worse

Explained to her that it is difficult to move forward with her symptoms if she is not willing to do tests to get accurate results etc
We have decided to leave things be and await the Dietician input

2) Still has on going breast pain and feeling of them being engorged - see my prev entry and exam carried out by ANP

For trial of anti-inflammatory for 6/52 and if no improvement could consider routine referral to breast clinic but advised likely to be hormonal in nature
Naproxen she has tried in the past and doesnt work so try Celecoxib instead

3) Feels she has left sided carpal tunnel
Describing a tingling and feeling in her left palm, spreading upwards but has no tingling or paraesthesia in her fingers
Worse when she bends her hand - for example when moving the bins in the laundry
Feels she has had the pain for a few weeks but has been worse over the last week

O/E
No muscle wasting
Tinels test weakly positive - feels tingling in the palm
Phalens test postive

Advised
NSAID for pain - already prescribed as above
Refer PT for splints/exercises and failing that for Ortho opinion Dr [redacted] Kildare
28/01/2022 Celecoxib 100mg capsules Supply: (60) capsule 1 CAPSULE TWICE DAILY Dr [redacted] Kildare
27/01/2022 Triage Ms [redacted] Cleary - No Data Recorded
27/01/2022 Triage Mrs [redacted]

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27/01/2022 Consultation ANP
L[redacted]
SPS advised patient is at polmont at the dentist
re-listed for tomorrow
26/01/2022 Triage Ms Karly[redacted]
26/01/2022 Consultation Seen in treatment room at 10:05 AM about left hand c/o of stabbing pain from thumb to wrist. Area slightly swollen. Had full range of movement in wrist and fingers. Will relist for ANP/GP Appointment.
S/N Karly-Jane[redacted] 10:16 AM Ms Karly[redacted]
25/01/2022 Triage Ms Erin Hedley
25/01/2022 Self-referral for Nurse clinic received and logged.
[redacted]Hedley
Health Centre Administrator
25.01.22
12:05 Ms Erin Hedley
24/01/2022 Triage Ms[redacted] Cleary - No Data Recorded
23/01/2022 Triage Ms Clodina Lane
23/01/2022 Consultation Seen in triage c/o of painful left ear ongoing for 2 weeks
Has been using cotton buds to clean ears - advised not to do this
Reports not bleeding or discharge
O/e right ear looks normal, left ear slightly inflammed and small pocket of pus evident
Advised to apply clod compress to ear, utilise paracetamol for pain and px ciprofloxacin ear drops from 7 days BD
Advised to return to HC if symptoms dont resolve
C.Lane 12.57

21/01/2022 Other Miss [redacted]kie Mckeich
21/01/2022 Consultation ANP action, request to prescribe alternative to polytar shampoo as Lloyds unable to source, rx dermax shampoo, patient should try this for at least 4 weeks before requesting alternative. Miss[redacted] Mckeich
21/01/2022 Triage Ms E[redacted] Hedley
21/01/2022 Self-referral for Nurse clinic received and logged.
[redacted]Hedley
Health Centre Administrator
21.01.22
11:16 Ms[redacted] Hedley
20/01/2022 Triage Ms[redacted] Kilpatrick
20/01/2022 Seen by health care assistant Made Georgina aware of new prescription of shampoo.

Laura Kilpatrick
HCA
20/01/2022
20:52HRS Dr[redacted] Sayers
20/01/2022 Triage Mrs[redacted] Kane
20/01/2022 Consultation ANP
L.Kane
ANP Actions
see entry 19/1/22 requesting alternate shampoo
prescribed polytar scalp shampoo
if no improvement then can be reviewed
19/01/2022 Triage Mrs Aileen[redacted]
19/01/2022 Triage Seen in for nurse referral form. Psoriasis is quite prominant in her head. Her skin is dry and she feels it's tight when she takes her make up off. Has tried T-gel and Capasol shampoos,nothing is working. ?if MO would prescribe something else or if Georgina can be reviewed.

[redacted]McKay
PCT nurse
0934am Mrs Aileen[redacted]
17/01/2022 Medicine Management Ms Laura[redacted] - No Data Recorded
17/01/2022 Triage Ms[redacted] Hedley
17/01/2022 Self-referral for Nurse/Dermatology clinic received and logged.
[redacted]Hedley
Health Centre Administrator
17.01.22
11:35 Ms[redacted] Hedley
13/01/2022 Triage Mrs[redacted] Watt
12/01/2022 Consultation Asked to see following removal of in possession medication due to a discrepancy.
[redacted] staff looking to place her on MORS. Temperature 36.8, BP 117/77, SATS, 99% Pulse 73. Speech and gait normal. No clinical indication for MORS.
Jane Watt
S/N MHT
12/01/22 15.46 Dr[redacted] Sayers
12/01/2022 Other Mr[redacted]e Macpherson
12/01/2022 Mental health assessment Unplanned consultatioin as was approached by Georgina whilst in unit 5 (Peebles house). Unhappy that i had not made contact with her Personal officer last week asa promised, though i explained i was here now to do so. Georgina always plays the victim and constantly moans about her lack of progression after speaking with her personal officer i explained that we merely discussed the same issues that Georgina constantly complains about and that there is a process to follow. During this conversation Georgina never at any time mentioned that she had a problem with her medication issue, and that she was "short" of any weekly medications. I brought the conversation to an end and left the unit.

Donnie Macpherson
MHN
1030
12/01/2022. Mr Donnie Macpherson
12/01/2022 Other Dr[redacted] Kildare

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12/01/2022 Seen by health care assistant , , I received a phone call this morning from Peebles main office regarding Georgina reporting missing medication from her weekly medication she received yesterday, 11/01/2022. Georgina reported this to SPS staff on the backshift last night the early shift were chasing it up this morning.
The [redacted] is she only received 7 quetiapine 100mg not 14 quetiapine 100mg as normal, other weekly medication is correct.
I went over to the [redacted] to see Georgina and check medication pack she was given by me the day before. The package clearly [redacted] 14 quetiapine 100mg to take one twice a day. The packet had one stripe of 7 tablets with one taken out, the night time dose from the night before. I explained before I came over I checked her kardex and recording sheet, our invoice and called Lloyds pharmacy.
The recording sheet was recorded as != 14x100mg.
The invoice was quetiapine 100mg x 14.
Lloyds said they dispense quetiapine 100mg in either two stripes each having 7 tablets or one stripe of ten and one stripe of 4. They also have it recorded at quetiapine 100mg x 14 it is doubled check before being dispensed for delivery.
I spoke with SPS informing them I will be returning to the health centre bring this to my manager attention and how to deal with the situation.
On speaking to SPS staff they informed me that intel have quite a bit of intel on Georgina regarding medication, swapping, selling and so on.

Doctor giving all information and karex. The weekly medication has been changed to supervised as from today and any incell medication has been removed from cell.
Quetiapine 100mg x 6
Amitriptyline 25mg x 6
Amitriptyline 50mg x 6
Lymecyline 408mg x 6
Meloxicam 15mg x 10
Bisacodyl 5mg x 61 - should only be 56 in packet.
Peppermint Oil 0.2ml x 80 - two packets
Named nurse also informed who happened to see Georgina this morning which there was no mention of medication error.

Ms Elaine Mcadam
12/01/2022 Ongoing review MOA - [redacted] is 7 Quetiapine short - despite getting 14 tablets yesterday - Pharmacy have investigated and are certain that 14 tablets were issued
There have been some intel abot meds being swapped in Peebles
[redacted] is also on Amitriptyline, Propranolol, Paroxetine but is refusing to take Propranolol therefore stop
For her safety unfortunately meds will now be made supervised but this can be reviewed in due course Dr [redacted] Kildare
11/01/2022 Triage Ms Karly [redacted]
11/01/2022 Consultation Received a call from SPS in Peebles informing me Georgie had only received 7 quetiapine tablets and says on bag should be 14 for her weekly medication. I informed SPS to check in room incase she possibly removed. They checked and did not find. Patient anxious due to worrying incase if she takes one tonight/tomorrow morning she will not get anymore. I informed SPS to tell her to take and will look into this issue tomorrow Ms Karly [redacted]
10/01/2022 Triage Ms Michelle Cleary - No Data Recorded
08/01/2022 Triage Ms [redacted] - No Data Recorded
07/01/2022 Referral Letter Dr [redacted] Kildare
07/01/2022 SCI Referral Letter
07/01/2022 Surgery consultation Dr [redacted] Kildare.
07/01/2022 Consultation GP Review
FTF with PPE
Fairly long discussion today about mutiple physical issues that worry her
She had a long FHx cancer and is concenred about this
She is of the opinion that nothing is being done for her

1) GI symptoms remain troublesome for her. Intermittent constipation, bloating and abdo cramps that are central in nature.
Feels it is [redacted] to her diet and normally excludes gluten and lactose when not in prison and has been on this diet before when in HMP CV but at the moment isnt sure if this is being followed
At the moment has reduced her diet down to just eating crisps as most things she eats are worsening her pain and is concerned she will lose weight as a result of her poor diet
No meds help
Has had lap chole aged 19 and also been in FVRH for admission with impaction
Both coeliac screens were negative but this was taken when she wasnt eating any gluten containing products and is not wishing to eat gluten to get a diagnostic test as it will make her pain worse
Weight today 81Kg

Refer Dieticians for opinion ?IBS

2) Concerned about her breasts that have been tender and feel a bit engorged - see ANP entry
Feels that she is unable to wear a normal bra and has to wear sports type bras as they dont cause her as much discomfort
Has a history of breast cysts and her maternal [redacted] died of breast cancer in her 30s so is understandably concerned
Bloods taken are all unremarkable
Advised examination performed 2/52 was reassuring and in absence of red flags does not meet criteria for USC referral but if symptoms of breast pain are on going for several weeks that could refer back to breast clinic routinely
Declined examination by me today as I am a male GP

3) Lump on forehead that looks like a small sebaceous cyst - left sided just above eye brow
She is wearing fairly thick make up so feels its hiding it today
Feels she needs a "brain scan"
Advised to leave alone for now as Derm/Minor ops will unlikely remove this

4) PV bleeding - describes erratic periods for last few years and followed by a bleed for last 8 days with spotting and some suprapubic discomfort
No urinary symptoms
Denies any PV discharge or risk of STI
Had contraceptive implant replaced 6/12 ago
Would feel more at ease if I could just refer her for a hysterectomy and bilateral mastectomy - explained that is not likely an option for her
She explained that she had follow up with [redacted] health clinic again next week to discuss on going PV bleeding
I didnt explore this further Dr [redacted] Kildare
06/01/2022 Other Mr Donnie Macpherson

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06/01/2022 Mental health assessment Follow up, [redacted] today was very frustrtated and appeared angry. Spoke at length about her physical conditions ? and how she felt that little was being done for her.
[redacted] also concerned that she is not being allowed to progress and is unhappy that she cannot move to Unit 3. Discussed that she found it difficult to control her Anger and frustration and that everyone appears to be against her.
Discussed with [redacted] that she has only been back in prison since July 2021, and it would be expected that she will need to show a good level of stability before progressing.
[redacted] is keen that i speak with her personal officer about her behaviours.
I will contact her personal officer at the first opportunity.

Donnie Macpherson
MHN
1435.
06/01/2022. Mr [redacted] Macpherson
06/01/2022 Other Miss [redacted] Mckeich - No Data Recorded
05/01/2022 Other Miss Jackie Mckeich - No Data Recorded
04/01/2022 Triage Ms [redacted]
04/01/2022 Seen in [redacted] health clinic States has been getting vaginal bleeding for approx 7 days, like a period, doesnt normally get period due to implant, however had implant replaced in last 6/12 so disscussed reaction to new implant might be different to previous.
Recently see ANP due to swollen tender breasts again could be due to period.
Very concerned that something is being missed in abdo and unhappy with previous abdominal scans aware that this is not point of todays appointment.
Plan review in 1/52 to see if issues still ongoing.
Aware next appointment will only be for [redacted] health/gynae issues.
R [redacted] - sexual health nurse
04/01/2022 14:27 Ms [redacted]
04/01/2022 Triage Ms Karly [redacted]
04/01/2022 Consultation Will relist for ANP appointment. Ms Karly [redacted]
04/01/2022 Consultation Below error not overdose of drug. Ms Karly [redacted]
04/01/2022 Overdose of drug Seen in treatment room today due to two small lumps present on forehead also states T-gel not helping and requies somehting el[redacted]ribed. Ms Karly [redacted]
31/12/2021 Triage Ms [redacted] Cleary
31/12/2021 Letter enclosed to patient to inform her of normal blood results.
[redacted] Cleary
HCA
15.15 Ms [redacted] Cleary
31/12/2021 Other Dr Craig Sayers
31/12/2021 Ongoing review MOA - bloods essentially normal (minimal decrease FSH) Dr [redacted] Sayers
30/12/2021 Surgery consultation Miss Claire Macmillan - No Data Recorded
30/12/2021 Third Party Consultation Ms Erin Hedley
30/12/2021 Document Image Docman Attachment
30/12/2021 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Ms Erin Hedley
30/12/2021 Third Party Consultation Ms [redacted] Hedley
30/12/2021 Document Image Docman Attachment
30/12/2021 Administration Haematology Results Forth Valley Royal Hospital Labs Ms [redacted] Hedley
30/12/2021 Triage Ms Erin Hedley
30/12/2021 Self-referral for Nurse, Well Person and Mental Health clinics received and logged.
[redacted] Hedley
Health Centre Administrator
30.12.21
11:49 Ms [redacted] Hedley
24/12/2021 Triage Ms Laura Kilpatrick
24/12/2021 Seen by health care assistant in clinic for bloods, bloods already obtained.

[redacted] Kilpatrick
HCA
24/12/2021
10:10HRS Dr [redacted] Sayers
24/12/2021 Results recording Dr Jahangir [redacted]
23/12/2021 Serum oestradiol level = 289 pmol/L Dr Jahangir [redacted]
23/12/2021 Biochemical test = <none> Dr Jahangir [redacted]
23/12/2021 Human chorionic gonadotrophin level < 3 U/L Humn chorionic gonadotroph lev - U/L Dr Jahangir [redacted]
23/12/2021 Follicle stimulating hormone level = 2 U/L Follicle stimulating horm lev - U/L - Post-pubertal female follicular FSH 3-8 U/L LH 2-13 U/L Dr Jahangir [redacted]
23/12/2021 Serum prolactin level = 127 mU/L mU/L Dr Jahangir Khan
23/12/2021 Serum LH level = 3.1 U/L U/L Dr Jahangir [redacted]
23/12/2021 Endocrine studies = <none> Dr Jahangir Khan
24/12/2021 Results recording Dr Jahangir [redacted]
23/12/2021 Nucleated red blood cell count = 0 10*9/L 10^9/L Dr Jahangir [redacted]
23/12/2021 Basophil count = 0.1 10*9/L 10^9/L Dr Jahangir Khan
23/12/2021 Eosinophil count = 0.2 10*9/L 10^9/L Dr Jahangir [redacted]
23/12/2021 Monocyte count = 0.5 10*9/L 10^9/L Dr Jahangir [redacted]
23/12/2021 Lymphocyte count = 1.7 10*9/L 10^9/L Dr Jahangir [redacted]
23/12/2021 Neutrophil count = 3.9 10*9/L 10^9/L Dr Jahangir [redacted]
23/12/2021 Mean corpusc. Hb. conc. (MCHC) = 333 g/L Dr Jahangir [redacted]
23/12/2021 Mean corpusc. haemoglobin(MCH) = 28.3 pg Dr Jahangir Khan
23/12/2021 Packed cell volume = 0.399 ratio Dr Jahangir [redacted]
23/12/2021 Mean corpuscular volume (MCV) = 84.9 fL fl Dr Jahangir Khan
23/12/2021 Red blood cell (RBC) count = 4.7 10*12/L 10^12/L Dr Jahangir [redacted]
23/12/2021 Platelet count = 321 10*9/L 10^9/L Dr Jahangir [redacted]
23/12/2021 Total white cell count = 6.4 10*9/L 10^9/L Dr Jahangir [redacted]
23/12/2021 Haemoglobin estimation = 133 g/L Dr Jahangir Khan
23/12/2021 Full blood count - FBC = <none> Dr Jahangir [redacted]
23/12/2021 Triage Ms [redacted] Kilpatrick

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23/12/2021 Administration Listed in clinic for bloods as documented below.

Laura kilpatrick
HCA
23/12/2021
15:28HRS Dr [redacted] Sayers

23/12/2021 Triage Mrs [redacted]

23/12/2021 Consultation ANP
L.Kane
Patient seen to review bilateral swollen, tender breasts
states nipples usually inverted but since swelling nipples now out
OE very tender to touch, both breasts firm
no discharge from nipple
no eczema
no dimpling of skin
states [redacted] and [redacted] had breast ca
has implant therefore does not have menstrual cycle
been in prison for 4 months therefore [redacted] pregnancy test to rule this out - negative
states she is on anti-psychotics
IMP- ? hormonal, ?? elevated prolactin level
Plan- check bloods FBC, CRP for inflammation ? infection
- LH, FSH, prolactin and estrogen to be checked
will review back in 1 week with results to ? if she requires referal to breast clinic
- if prolactin levels high to refer to psychiatry to review anti-psychotic Dr [redacted] Sayers

23/12/2021 Triage Ms [redacted] Lawson - No Data Recorded

21/12/2021 Triage Ms [redacted]

21/12/2021 Occupational therapy Mental HEalth Occupational Therapy - Seen briefly whilst attending work party in laundry. [redacted] reported that since moving back to Peebles she is coping better and has tried hard to get into the "Christmas spirit". Reports that Christmas is normall a happy time for her and she is trying not to think about her RMT meeting until closer to the time. [redacted] aware that I am on Annual leave over the Christmas and New year period and will meet with her on my return to [redacted] the new year. Ms [redacted]

20/12/2021 Surgery consultation Miss Claire Macmillan

20/12/2021 Seen by triage nurse S: Seen in treatment room due to nurse referral
B: Patient breasts are tender to touch and very firm to touch.
A:
R: Listed for ANP to review. Miss [redacted] Macmillan

19/12/2021 Triage Ms [redacted] Kilpatrick

19/12/2021 Medication - risk monitoring Seen in cell for medication check,
check on Paroxetine Georgina stated that she no longer takes this medication mental health aware of same, Georgina also stated she is no longer taken propranolol also stated mental health team aware of same.
lymecycline check correct at this time
amtriptyline check correct at this time
Qutiapine check correct at this time

[redacted] Kilpatrick
HCA
19/12/2021
15:51HRS Dr Craig Sayers

17/12/2021 Other Mr Donnie Macpherson

17/12/2021 Mental health assessment Follow up. Met with [redacted] at her place of work. She was unaware that SPS had referred her due to increasing Paranoia. [redacted] presented as quite calm and relaxed and conversed at a normal rate rythym and tone.
[redacted] spoke at length regarding how she perceives the way she is treated within C/ Vale and seems to feel that no matter what she does she is regarded as an "Arsehole". When challenged on some of her behaviours Georgies became quite defensive blaming them on her upbringing, her "shitty" life her abuse and very much how she is a victim.
[redacted] spoke at length about how she cannot return to the Saltcoats area due to "Gang wars" and therefore is reluctant to transfer to Greenock as there is a close connection to some of her enemies.
[redacted] during interview tried to control said interview and had to be "reeled in" on numerous occassions.
[redacted] is fully aware of her many "conditions" and has plenty of insight and knowledge and coping skills to deal with these.

Donnie Macpherson
MHN
1045
17/12/2021 Mr Donnie Macpherson

16/12/2021 Triage Ms [redacted] Mclean - No Data Recorded

13/12/2021 Triage Ms [redacted] Broadfoot

Letter on: 13/12/2021 type: Referral
13/12/2021 Self-referral Referral for Nurse/GP received and logged
Sharon Broadfoot
Healthcare Administrator
13.12.21
15.21hrs Ms [redacted] Broadfoot

13/12/2021 Triage Mrs [redacted] Mckay

13/12/2021 Subcutaneous injection Pfizer booster given in left arm. BN 9707 Exp 06/2022

[redacted] McKay
PCT nurse
0109am Mrs [redacted] Mckay

07/12/2021 Triage Ms [redacted] Hedley

07/12/2021 Self-referral for Mental Health clinic received and logged.
[redacted] Hedley
Health Centre Administrator
07.12.21
10:45 Ms [redacted] Hedley

06/12/2021 Triage Dr [redacted]

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06/12/2021 Seen in [redacted] health clinic Seen in SH clinic re labiaplasty.

FV declined referral as don't do labiaplasty. I've spoken to a consultant in FV about if there are other healthboards that might accept a referral ? Glasgow. Reponse from Glasgow team'
' We don't perform routine labiaplasty in GGC anymore but they can be seen in clinic and then have to go through a long process of medical photography for their labia which will then be reviewed by a multidisciplinary panel (plastic surgeon, gynaecologist, [redacted] etc) who will decide whether surgery is justified or not. Most cases are declined. It would be worth explaining the process to the patient before referring her as some of them decline going through medical photography etc .

Discussed this with Georgina - she still would like referral. I will make a referral to Glasgow this week and will send a copy of this referral to georgina.

Dr Imogen [redacted]
GMC 7421177 Dr [redacted]
02/12/2021 Third Party Consultation Ms [redacted] Hedley
02/12/2021 Document Image Docman Attachment
02/12/2021 Administ[redacted] Kardex HMP Cornton Vale Pharmacy Recording Sheet Ms [redacted] Hedley
01/12/2021 Triage Ms [redacted] Kilpatrick
01/12/2021 Administration Listed in mental health waiting list as requested by dr.

[redacted] Kilpatrick
HCA
01/12/2021
15:06HRS Dr [redacted] Sayers
01/12/2021 Other Dr [redacted] Kildare
01/12/2021 Ongoing review MOA - TTG result negative at 0.4 - has already been acted on - see LK entry 25/11/21 Dr [redacted] Kildare
01/12/2021 Consultation Pharmacy informed that [redacted] has handed back her Paroxetine and Propranolol and is no longer wanting to take these meds - for MHT review please to explore reasons behind this Dr [redacted] Kildare
01/12/2021 Third Party Consultation Ms [redacted] Hedley
01/12/2021 Document Image Docman Attachment
01/12/2021 Administration Haematology Results Forth Valley Royal Hospital Labs Ms [redacted] Hedley
29/11/2021 Results recording Dr Craig Sayers
23/11/2021 Anti-tissue transglutaminase level = 0.4 U/mL Anti-tissue transglutnase lev - U/ml - Normal= <= 7.0,Equivocal= 7.0 -10.0 Positive = >10.0 Dr [redacted] Sayers
23/11/2021 Autoimmune profile = If screening for coeliac disease, this result is only valid if the person was
eating gluten at least twice a day for previous 6 weeks.
If known to have coeliac disease, this negative result suggests adherence to gluten free diet. Dr [redacted] Sayers
23/11/2021 Haematology test = Immunology NHS Greater Glasgow & Clyde Dr Craig Sayers
23/11/2021 Autoimmune profile = <none> Dr [redacted] Sayers
26/11/2021 Third Party Consultation Ms [redacted] Hedley
26/11/2021 Document Image Docman Attachment
26/11/2021 Administration Administration HMP Cornton Vale Administration Gluten Free Food Prescribable Product List Ms [redacted] Hedley
26/11/2021 Triage Mrs Aileen A[redacted]ander
26/11/2021 Consultation Spoke with [redacted] regarding her diet today. After meeting with ANP [redacted] has been advised that for one meal a day, she should have foods that she is allergic to. Bloods will then be taken 6 weeks later to confirm a diagnosis. [redacted] is being transferred to Greenock today. Advised all of her paperwork will be scanned on but [redacted] should advise staff on arrival that this is the plan for her care.

Ailen Alexander SN
26/11/2021 11.00 Mrs Aileen [redacted]
26/11/2021 Third Party Consultation Ms Erin Hedley
26/11/2021 Document Image Docman Attachment
26/11/2021 Administration Kardex HMP Cornton Vale Pharmacy Ms Erin Hedley
26/11/2021 Triage Ms [redacted] Hedley - No Data Recorded
25/11/2021 Triage Ms Michelle Cleary - No Data Recorded
25/11/2021 Triage Mrs Louise [redacted]
25/11/2021 Consultation ANP
L[redacted]
Patient had TTG bloods done
however these have been obtained whilst she has medical marker from kitchen for gluten and lactose free diet therefore this may not reflect an accurate result
there does not appear to have formal diagnosis of coeliac disease
to get this diagnosis I suspect patient will have to come off lactose and gluten free diet and have this in at least 1 meal for a minimum of 6 weeks to show accurate results
patient will require this to be discussed with her
I will pass over to PCT Dr [redacted] Sayers
25/11/2021 Triage Ms [redacted] Hedley - No Data Recorded
25/11/2021 Triage Ms [redacted] Hedley - No Data Recorded
24/11/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
24/11/2021 Other Dr [redacted] Kildare
24/11/2021 Ongoing review MOA - request to stop Mebeverine and to swap to Peppermint Capsules instead - stopped on Kardex and Peppermint capsules written up as requested Dr [redacted] Kildare
23/11/2021 Triage Ms [redacted] Cleary - No Data Recorded
23/11/2021 Other Miss [redacted] Mckeich
23/11/2021 Consultation ANP action
ANP K[redacted]
kardex not available action relisted for tomorrow
23/11/2021 Triage Dr [redacted] Swinson

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23/11/2021 Mental health assessment Seen in clinic. Presenting with agiaition, anxiety, low mood, emotional dyregulation and anger.
Parole hearing on Thursday - exacerbating problems.
States abruptly stopped paroxetine and propranolol one wee ago. INformed that current presentation not surprising given this.
Plan
Ongoing MHT input and keen to try decider skills.
No change to meds currently. Dr [redacted] Swinson
23/11/2021 Triage Ms [redacted] Kilpatrick
23/11/2021 Seen by health care assistant Seen in clinic verbal consent given to obtain bloods, TTG bloods obtained and sent to labs.

[redacted] Kilpatrick
HCA
23/11/2021
09:52 Dr [redacted] Sayers
23/11/2021 Triage Ms [redacted] Kilpatrick
23/11/2021 Seen by health care assistant blood pressure obtained as documented below.
I will make nursing staff aware of reading,

[redacted] Kilpatrick
HCA
23/11/2021
09:51HRS Dr [redacted] Sayers
23/11/2021 09:49:00 BP 178 / 116 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Dr [redacted] Sayers
22/11/2021 Medicine Management Ms [redacted]
22/11/2021 Consultation Georgina [redacted] no longer wants her mebeverine medication as believes it can show as false positive for other medications on MDT. Requested peppermint oil capsules instead. Advised to put in referral slip to discuss with GP/ANP. Medication returned to health centre.

[redacted] Pharm Asst 14.26 Ms [redacted]
19/11/2021 Third Party Consultation Ms [redacted] Hedley
19/11/2021 Document image Docman Attachment
19/11/2021 Administration Administration HMP Cornton Vale Refusal Form Ms [redacted] Hedley
19/11/2021 Triage Ms [redacted] Kilpatrick
19/11/2021 Seen by health care assistant Seen in clinic to obtain bloods for TTG, Georgina asked what the bloods were for after speaking to nurse [redacted] McMullen [redacted] advised me these were for celiac disease, Georgina declined to have same obtained. Treatment refusal form signed by writer and patient. Georgina also asked if I would obtain her bloods as she may think she is a diabetic, I explained that Georgina needs to be a slip in to see the nurse with regards to this. No further [redacted] were raised at this time.

[redacted] Kilpatrick
HCA
19/11/2021
10.25HRS Dr [redacted] Sayers
19/11/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
18/11/2021 Triage Ms [redacted] Cleary
18/11/2021 Seen by health care assistant
Listed in HCA clinic for TTG BLOODS .
[redacted] Cleary
HCA
18/11/2021
18.35 Ms [redacted] Cleary
18/11/2021 Triage Miss [redacted] Hegarty
18/11/2021 Suicide risk Pre nurse assessment -
[redacted] was seen in her room. Stated that she has always from the ages of 8 has [redacted] thoughts and thoughts of self harm acting upon these for a long time but currently she has no intention to act upon these thoughts.

[redacted] stated that she is struggling with not knowing if she is staying at Cornton Vale or being transferred out due to altercations in Pebbles. [redacted] stated that SPS officers told her that 'she didn't fit into Peebles' and that's why she is being moved. Georgie states she feels that this has affirmed her own feelings she holds surrounding self and believes this is also a reason for her emotional out bursts of late. [redacted] went on the say that MHT team don't see her - we then explained the 7 day referral and reminded her that she has been in contact with MHT numerous times in the last week- George felt that 7 days were too long to wait as it made her feel like she was [redacted] cared about. It was explained that this process is for everyone. [redacted] then moved on and spoke about her [redacted] regarding male SPS staff which she then explained that she would redirect this concern to the SPS.

[redacted] stated that she has her parole hearing next week this is making her feel fearful and another thing that she is directing blame of her emotional outbursts on. [redacted] said that she does have coping strategies and skills but does not utilise these when needed. Throughout the interaction [redacted] was unwilling to accept responsibility of over own actions throughout interaction.

[redacted] CC -
[redacted] denied any thoughts of suicide or self [redacted] at this time and explained that she didn't feel the need to be on the TTM suicide prevention strategy . [redacted] expressed [redacted] around being transferred, stated again that SPS staff don't feel like she belongs in Peebles which is negatively affecting her. Pebble's staff members were also called to the case conference SPS staff [redacted] and [redacted] and [redacted] agreed that there were no [redacted] that would lead them to believes [redacted] needed to remain on TTM. Their recommendation was to bring George back to Pebbles.
Georgie shared her [redacted] surrounding her medication suggesting it is unfair that she has not been offered depo injection, S/N D McPherson has referred G Smith to Psychiatrist. [redacted] expressed that she has had a lot going on recently and continued to move blame of emotional outbursts on these factors. She stated that she has been at [redacted] recently and on the first day of trial her abuser plead guilty. All staff in agreement that [redacted] can be taken off TTM and moved back to Pebbles, [redacted] happy with same outcome.

[redacted]
HMP Cortonvale
18.11.21
s/n Sinéad Hegarty 11:30 Miss [redacted] Hegarty
18/11/2021 Triage Mrs [redacted]

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18/11/2021 Consultation Met with Georgina this morning in ross house to discuss Gluten Free options for her to order as per nhs forth valley gluten free product list. she can select up to 14 units per month.
she selected;
1x GF seeded loaf sliced 400g
2x [redacted] Crispies 375g
1x penne pasta 500g
1x crackers 200g
2x crispbread 150g
warburtons GF fresh white rolls.
[redacted] will receive some items to her cell and others will go to kitchen.
formulary with prescription codes i will place with kardex for prescribers access.
listged for anp/gp to prescribe.
georgie has only requested to use 10 of her 14 units at the minute until she sees what she likes and will let us know what, if anything she would like added.
c[redacted] sn 0902am Mrs [redacted]
16/11/2021 Triage Ms Laura Kilpatrick - No Data Recorded
16/11/2021 Triage Ms L[redacted]
16/11/2021 Occupational therapy Mental Health Occupational Therapy - Met with [redacted] for planned contact. [redacted] reported to experiencing cold like symptoms and has not attended work this morning. Reported that she is struggling with her physical and mental health and has completed self referrals for a number of services including dietician, dentist, MHT and sick clinic nurse review. I explained scope of MH OT role and what support I am able to offer her , [redacted] reported that she wanted to talk about issues that she is finding stressful to prevent deterioration in mental health. Reflected to Georgie the skills that she has for managing her own emotions whilst acknowledging that the next few weeks may be more stressful due to upcoming parole meetings. Agreed that MH OT contact would remain fortnightly. OT Plan - Continue to develop skills for self management. Ms [redacted]
16/11/2021 Triage Ms [redacted]
16/11/2021 Consultation ANP actions
ANP K [redacted] L Mckeich
patient is coeliac
contacted Lloyds chemist for formulary details
patient is entitled to 14 unit per month in relation to her age and Gender.
Nursing staff to discuss products list with patient then prescription kardex can be written
15/11/2021 Triage Ms Erin Hedley
15/11/2021 Self-referral for Nurse, Dermatology and Diabetes clinics received and logged.
[redacted] Hedley
Health Centre Administrator
15.11.21
12:40 Ms [redacted] Hedley
12/11/2021 Triage Ms [redacted] Kilpatrick
12/11/2021 Letter encounter to patient Letter sent to Georgina to make her aware that the doctor has not prescribed her an antiemetic

[redacted] Kilpatrick
HCA
12/11/2021
16:23 Dr [redacted] Sayers
12/11/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
12/11/2021 Other Dr [redacted] Sayers
12/11/2021 Ongoing review MOA request for IM antiemetic
Nil to suggest intractable vomiting so same not appropriate - not prescribed Dr [redacted] Sayers
12/11/2021 Triage Ms [redacted]
12/11/2021 Medication - risk monitoring Spotcheck carried out 11/11/21. Paroxetine, Propanolol, Lymecycline,Quetiapine noted to be correct but one extra of Amitriptyline 25mg and 50mg. Pt not sure why?The two tablets returned to H/C and disposed of. Ms [redacted]
11/11/2021 Triage Ms [redacted] Kilpatrick
11/11/2021 Letter encounter to patient Letter sent to make Georgina aware that the doctor has changed her prescription, from meloxicam to mebeverine.

[redacted] Kilpatrick
HCA
11/11/2021
21:10HRS Dr Craig Sayers
11/11/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
11/11/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
11/11/2021 Other Mr Donnie Macpherson
11/11/2021 Mental health assessment Follow up clinic . [redacted] presented as a lot more relaxed and calmer today. States feeling reasonably well today and the atmosphere in Peebles is a lot better.
Discussed that due to COP26, and the fact that all her peers have been "squeezed" into one section of Peebles that this would have become a stressor and would cause her to have a heightened level of Anxiety.
[redacted] after been seen twice appears to be, becoming quite demanding and seems to feel that i have taken over her care.
Has been advised that my intervention is temporary as she has a named nurse, and i am only stepping in until her return.
Advised that i will see her at some point next week to discuss any outcome from the CTM.

Donnie Macpherson MHN
1445
11/11/2021 Mr Donnie Macpherson
11/11/2021 Other Dr [redacted] Kildare
11/11/2021 Ongoing review MOA - note previous entries and recent admission for constipation under the surgeons
D/W SN [redacted] - [redacted] continues to describe abdo pain with associated constipation and feels her Meloxicam is not helping with the pain and making her feel sick - therefore stop
Try regular Mebeverine TDS for symptoms over next 6-8/52
Not for opiates as this will constipate her further Dr [redacted] Kildare
10/11/2021 Triage Mr [redacted]

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10/11/2021 Had a chat to patient I saw [redacted] in the health centre in the company of HCA Kilpatrick in order to apologise for a misunderstanding that we had yesterday. She had approached me in the health centre to inform me that she was feeling terrible and asking if I was going to assess her today. I had misinterpreted this as an abusive tirade and advised [redacted] that I would not be spoken to like that however on reflection I realised Georgie was in fact describing how she was feeling and not making accusations of me. She accepted my apology and I assured her this wouldnt happen again.

[redacted]
MH DTL
1555 Mr [redacted] Kennedy
10/11/2021 Triage Ms Erin Hedley
10/11/2021 Self-referral for Nurse clinic received and logged.
[redacted] Hedley
Health Centre Administrator
10.11.21
12:12 Ms [redacted] Hedley
09/11/2021 Triage Ms [redacted] Mclean
09/11/2021 Telephone encounter Peebles SPS officer Dorothy called to ask if Georgina was able to get an anti-sickness injection. Reported she was not prescribed this. [redacted] asked if staff could contact the kitchen to give suggestions about other foods Georgina may tolerate as she is eating a lot of pasta and they believe this is contributing to her being constipated.
[redacted] SSN MHT
09/11/2021 2015hrs Ms [redacted] Mclean
09/11/2021 Other Mr Donnie Macpherson
09/11/2021 Mental health assessment Triage clinic. Refer to Care [redacted] for information.

Donnie Macpherson
MHN
1100
09/11/2021. Mr Donnie Macpherson
09/11/2021 Triage Ms Rachel Lawson - No Data Recorded
06/11/2021 Third Party Consultation Ms [redacted] Broadfoot
06/11/2021 Document Image Docman Attachment
06/11/2021 Administration Administration HMP Cornton Vale Letter to Hospital Ms [redacted] Broadfoot
06/11/2021 Third Party Consultation Ms [redacted] Broadfoot
06/11/2021 Document Image Docman Attachment
06/11/2021 Administration Administration Forth Valley Royal Hospital Discharge Summary / Liberation Ms [redacted] Broadfoot
05/11/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
05/11/2021 Other Dr [redacted] Sayers
05/11/2021 Ongoing review Discharge letter accessed on Clinical Portal - Constipation for laxatives Dr [redacted] Sayers
04/11/2021 Triage Mrs [redacted]
04/11/2021 O/E - temperature level = 36.1 degC Dr Craig Sayers
04/11/2021 Pulse oximetry monitoring 99 % Dr [redacted] Sayers
04/11/2021 O/E - pulse rate 80 beats/min Dr [redacted] Sayers
04/11/2021 16:35.00 BP 107 / 70 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Dr [redacted] Sayers
04/11/2021 Consultation Patient returned from hospital with diagnosis of constipation.
Patient states she had an enema whist in hospital and returned with a prescription for laxido to take daily - same prescribed by dr.
Patient asking regarding codeine that she was issued whilst in hospital. No record of being discharged on same and none sent back with her.
Discussed with patient regarding codeines side effects being constipation and the rationale for hospital not prescribing same.
Also discussed with dr kildair on return who advised to utilise meloxicam and paracetamol.- patient advised of same.
Observations obtained as recorded and all within normal limits.
discharge letter for review by gp tomorrow
C [redacted] sn 16.33hrs Dr [redacted] Sayers
03/11/2021 Third Party Consultation Ms [redacted] Hedley
03/11/2021 Document Image Docman Attachment
03/11/2021 Administration Administration HMP Cornton Vale Clinical Notes Clinical notes by ANP Ms [redacted] Hedley
03/11/2021 Other Miss Jackie Mckelch
03/11/2021 Consultation Asked to see by nursing staff, patient c/o abdo pain, distended abdomen, according to officers looks [redacted] did not look like this yesterday.
PMH: asthma, backpain, cholecystectomy, breasts cysts, gynae issues, illicit drugs, MH, eating disorders
Patient states pain started this morning, was woke up with it (6am)
Feels tight, sharp, tingling on upper abdomen radiating down to lower abdomen
constant since 6am, getting worse, describes pain as 8/10
Feels as if something is going to give way in between legs
mouth
Patient able to mobilise but rocking back and forward while sitting
o/e looks in pain
colour normal
managed to eat lunch (gluten intolerant), felt worse after this
usually appetite usually poor, has eating disorder, does not always eat meals
recently felt sick with pain, not vomitied
no issues with chewing & swallowing,
abdo appears distended
pain in upper left and ight quadrant
gaurding present on palpation
reduced pain lower right and left quadrant
no referred pain
abdo feels distended upper have
soft lower, sides
bowel sounds present
no skin changes
bowels - last moved this morning, small drops, moves [redacted] basis, stool hard, can have diarrhoea also, takes regular laxatives, states has blood in stool, after wiping
bladder - states passing more than usual, states passed urine approx 30 times this morning, passed small amount each time went, no buring, no pain, no blood, feels as if bladder constantly full, need to empty bladder but cant
no vaginal bleeding
weigh was 75kg in April 21 now 85kg

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Scanned Document
18-Jun-2026 SARA
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Pages:

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ℝ All Consultations

Address and Telephone numbers

The Health Centre P.O. Box 21616 Stirling FK7 1DW
Telephone - home 0774733501

All Consultations

25/07/2024 Triage Ms [redacted] Rennie - No Data Recorded
24/07/2024 Triage Miss [redacted] No Data Recorded
24/07/2024 Triage Mrs [redacted]
24/07/2024 Ongoing review ANP L [redacted]
ANP Actions
Patient is libbed and asked to do prescription for all her PRN medications
She can buy these OTC or see her GP Mrs [redacted]
16/07/2024 Third Party Consultation Ms [redacted] Cowper
16/07/2024 Document Image Docman Attachment
16/07/2024 Administration Pre R[redacted]e [redacted] reduction disclaimer HMPYOI Stirling Addictions Ms [redacted] Cowper
15/07/2024 Surgery consultation Ms [redacted] Halliday
15/07/2024 Consultation Advised [redacted] AM that [redacted] had been granted parole on Friday 12.07.24.
GP10 completed for 28 days supply of medication by Dr Sayers to allow Georgie time to register with a GP practice.
Discharge Summary also provided.

Writer spoke with Georgie in Reception and explained what each envelope contained and wrote on th front of the envelope what envelope was for her chemist and what one was for her GP practice.

[redacted] appeared in bright spirits and was being supported home by Shine.

[redacted] Halliday
MH T/L
15/07/24
1150 Ms Cara Halliday
15/07/2024 Triage Ms Linzi [redacted]
15/07/2024 Drug addiction therapy Seen in residential area
Informed [redacted] has been granted parole and being liberated today
Pre release [redacted] reduction seession offered- same disclaimed. Naloxone training and supply offered- same disclaimed.
Advised [redacted] that we are organising liberation prescripion to get before release.Spoke about importance of registering with GP at earlies opportunity and about safely taking medication.

Linzi [redacted]
Lead Addiction Nurse 15/7/24 1000hrs Dr Gp Stirling
12/07/2024 Triage Mr [redacted] Mccallum
12/07/2024 Planned telephone contact Virtual Appointment 26/07/2024 @ 10:45
Physio FVRH
Physio`
Georgina Smith / 131344
04/12/1991
https://nhsattend.vc/mskphysio
Near Me
Mr [redacted] Mccall[redacted]
02/07/2024 Other Dr [redacted] Sayers
02/07/2024 TSH - thyroid stim. hormone = 1.3 MicroU/L Normal Normal TSH Dr [redacted] Sayers
01/07/2024 Third Party Consultation Mrs [redacted] Mcfadyen
01/07/2024 Document Image Docman Attachment
01/07/2024 Result Results HMPYOI Stirling Clinical Chemistry Mrs [redacted] Mcfadyen
27/06/2024 Triage Ms [redacted]
27/06/2024 Ongoing review ANP Action
ANP K [redacted]
sensitive scalp ketaconazole ineffective
therefore discontinued. trial dermax shampoo for 3 months
if not resolving to self refer. has full emolient therapy in place wash cream and ointment.
26/06/2024 Triage Miss [redacted]
26/06/2024 Seen by health care assistant
[redacted] in health centre. Bloods obtained for TSH. Sample sent to lab.

[redacted]
HCA
26/06/2024
11:32 Dr Gp Stirling
25/06/2024 Triage Ms Lorin Cummings
25/06/2024 Consultation
S: Seen in Nurse Clinic in the Healthcentre.
B: Scalp Issue.
A: [redacted] has a red and scaly patch at bottom of scalp which she states is really irritated and causing discomfort when touched. [redacted] states this is effecting her daily when brushing her hair etc. On examination this area was inflammed and bleeding slightly. [redacted] has bee prescribed different shampoos but feels these are innefective. She also has similar dry patches on her arms ?psoriasis.
R: Listed for ANP?GP review/actions.

SN PCT Lorin Cummings
25/6/24
18.31 Dr Gp Stirling
20/06/2024 Triage Ms [redacted] Mitchell - No Data Recorded
18/06/2024 Triage Ms Rachel [redacted]
18/06/2024 Recall on 10/09/2024 for Depo-provera injection given with Ms [redacted] Weir Status: Complete GN3573
EXP 08/2025
17/06/2024 Triage Ms [redacted] Binnie - No Data Recorded

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13/06/2024 Triage Ms Aileen [redacted]
13/06/2024 Drug addiction notification Self referral nurse AM - Mental health as per previous forms. Ms Aileen [redacted]
11/06/2024 Triage Ms [redacted] Binnie - No Data Recorded
31/05/2024 Triage Ms Viviene Mitchell
31/05/2024 Consultation S seen in clinic today
B reported sore throat
A pt reports issue self resolved, did not c/o other reported symptoms
R can rerefer if need be
s/n v [redacted]
31/5/24 14.52 Ms Viviene [redacted]
28/05/2024 Triage Ms Aileen [redacted]
28/05/2024 Self-referral Nurse KH - Pain & sore throat. Pain right side under breast. Metalic Taste in louth for 2 days & feeling lethardic - SHC - Would like a jag Ms Aileen [redacted]
21/05/2024 Clinic Dr J Green (Ad)
21/05/2024 Speech therapy Seen in Link centre.
Georgina reported that her parole hearing has been delayed again, for several weeks. She has bene told this is to do with when the parole board received information, but has not further details. Appears to be coping well, continuing to engage in work. Agreed no communication needs at this time but will keep on caseload in case communication support required at short notice.

Jan Green
Clinical Lead Speech and Language Therapy
21/5/24 4.10pm Dr J Green (Ad)
21/05/2024 Triage Ms [redacted] Rennie
21/05/2024 Drug addiction notification Would like smoking cessation Ms [redacted] Rennie
09/05/2024 Triage Miss [redacted] - No Data Recorded
09/05/2024 Triage Mrs [redacted]
09/05/2024 Ongoing review ANP L [redacted] and E.McBeth
Asked to review Doxy
Has acne - continued for 3 months - will require review if requires this after this time
08/05/2024 Triage Mrs [redacted] Toner - No Data Recorded
07/05/2024 Clinic Dr J Green (Ad)
07/05/2024 Speech therapy Case discussion with Sarah Simpson, Social Worker. Parole hearing has been set for 16/5. Accessible licence conditions being held by Social Work,. no changes required. To see Georgina 14/5 for review.

Jan Green
Clinical Lead Speech and Language Therapy
07/05/24 4.30pm Dr J Green (Ad)
02/05/2024 Triage Mrs [redacted]
02/05/2024 Ongoing review ANP L [redacted]
ANP Actions
Asked to review tacrolimus - continued for a further 4 weeks
01/05/2024 Third Party Consultation Ms Aileen [redacted]
01/05/2024 Document Image Docman Attachment
01/05/2024 Administration Clinical Letter HMPYOI Stirling in possesion medication check form Ms Aileen [redacted]
26/04/2024 Clinic Dr J Green (Ad)
26/04/2024 Speech therapy Phone call to Social Work.

[redacted] unavailable. Left message asking for [redacted] to contact me regarding Georgina's parole progress and any current needs regarding communication support.

Jan Green
Clinical Lead Speech and Language Therapy
26/4/24 2pm Dr J Green (Ad)
23/04/2024 Triage Ms [redacted] Meffin
23/04/2024 Mental health administration
CTM Attendees: Dr Swinson, NTL C Halliday, RMN N [redacted] RMN R [redacted] RMN D Doull, RMN N Meffin, RMN L Stevenson, Assistant [redacted] C Docherty, Forensic [redacted] E Vendelanotte, Speech and Language A McCandlish, Social Work K [redacted] OT C [redacted]

No role for MHT at present as Georgina declines any input or changes to medication. RMN N [redacted] to write a letter.
Ms [redacted] Meffin
23/04/2024 Triage Ms Hina Khizar
23/04/2024 Medication - risk monitoring Spot Checked 22.04.24

All count was correct. Dr Gp Stirling
23/04/2024 Triage Miss [redacted] - No Data Recorded
19/04/2024 Triage Ms [redacted] Murphy
19/04/2024 Ongoing review ANP Mail
ANP K [redacted]
X ray results
left hand
mild OA evidence atrticular sclerosis
joint space well preserved
no significant bone or joint abnormality.
Dr Gp Stirling
18/04/2024 Third Party Consultation Ms [redacted] Rennie
18/04/2024 Document Image Docman Attachment
18/04/2024 Result Results X-Ray Ms [redacted] Rennie
15/04/2024 Triage Ms [redacted] Rennie
15/04/2024 Self-referral Nurse triage - LMC - Swollen ear and sore Ms Jane Rennie
04/04/2024 Triage Ms Hina Khizar
04/04/2024 Ongoing review ANP pharmacy
ANP K [redacted] H Khizar
discussed change of gluten options kardex updated
01/04/2024 Triage Ms [redacted] Rennie

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

01/04/2024 Self-referral [redacted] Health - KH - Cyst on vagina Ms [redacted] Rennie
30/03/2024 Triage Ms [redacted] - No Data Recorded
28/03/2024 Triage Ms [redacted]
Letter on: 28/03/2024 type: Referral SH Results
28/03/2024 Hepatitis C antibody test negative = Ms [redacted]
28/03/2024 HIV negative = Ms Rachel [redacted]
28/03/2024 Hepatitis B surface antigen negative = Ms [redacted]
28/03/2024 Syphilis titre test negative = Ms [redacted]
28/03/2024 Seen in [redacted] health clinic for self referral concerned regarding cyst to left labia majora on examination no lump felt. Also concerned about internal changes/growth, nil of note at this time but states awaiting hospital appointment for review of gentials however same cancelled by Geo- [redacted] on numerous occassions.
Await hosptial appointment.
Depo and BBV screen already provided by Nurse [redacted] on 19/3/24.
R [redacted] - [redacted] health nurse
28/3/24 09:25 Ms [redacted]
26/03/2024 Triage Ms Anne Mitchell
26/03/2024 Consultation
S. Seen in healthcentre
B. C/O Flaky Ears
A. Both ears appear healthy with no visible dry skin, skin intact, no signs of infection, no redness or swelling, Georgie states both ears have cleared up and no any other health issues today.
R. Advised to put referral in if any further issues or [redacted].

RGN [redacted] 10.51am 26/03/2024 Ms [redacted]
25/03/2024 Third Party Consultation Mrs [redacted] Mcfadyen
25/03/2024 Document Image Docman Attachment
25/03/2024 Result Results HMPYOI Stirling Microbiology Mrs [redacted] Mcfadyen
25/03/2024 Third Party Consultation Mrs [redacted] Mcfadyen
25/03/2024 Document Image Docman Attachment
25/03/2024 Result Results HMPYOI Stirling Microbiology Mrs [redacted] Mcfadyen
25/03/2024 Triage Mrs [redacted] Mcfadyen
25/03/2024 Next hospital appointment 10/04/2024 14:40
Stirling Community Hospital - Livilands Gate, Stirling FK8 2AU
X Ray Department
Georgina Smith / 131344
04/12/1991
Normal
Had Ultrasound 19/03 but wasn't given xray so this is still outstanding
Mrs [redacted] Mcfadyen
21/03/2024 Triage Mrs [redacted] Mckay
21/03/2024 Consulta [redacted] Georgina spoke with me whilst I was in [redacted] and was asking when she was going to be seen by mental health. Said the Irish Nurse was going to see her. On checking with MH nurse [redacted] MH nurse [redacted] was supposed to see yesterday, but no note on vision. It will be passed on to her tomorrow when she is on shift.

[redacted] McKay
PCT nurse
3:26pm Mrs [redacted] Mckay
20/03/2024 Third Party Consultation Mrs [redacted] Mcfadyen
20/03/2024 Document Image Docman Attachment
20/03/2024 Administration Administration HMPYOI Stirling In-Possesion Medication Check Mrs [redacted] Mcfadyen
20/03/2024 Third Party Consultation Mrs [redacted] Mcfadyen
20/03/2024 Document Image Docman Attachment
20/03/2024 Administration Administration HMPYOI Stirling In Possession Medication Check Mrs [redacted] Mcfadyen
19/03/2024 Triage Ms [redacted] Berry
19/03/2024 Self-referral Nurse AM - [redacted] health, depo jag and tested is possible. Bloods for thyriod as not been well. Ms Aileen Berry
19/03/2024 Triage Mrs [redacted] Mcfadyen
19/03/2024 Self-referral Self - BJ - PCT - Ears sore and flakey. Added to PCT waiting list, card sent to patient to advise. Mrs [redacted] Mcfadyen
19/03/2024 Triage Ms Viviene Mitchell
19/03/2024 Recall on 13/06/2024 for Depo-provera injection given with Ms Viviene Mitchell Status: Complete
19/03/2024 Depo-provera injection given First service recall due: Claim Expiry Date: Batch no: 382444743815 exp: 08/28
19/03/2024 Hepatitis C antibody level =
19/03/2024 Human immunodefic viral test =
19/03/2024 Hep B surface antigen test =
19/03/2024 Seen in [redacted] health clinic requesting BBV screen. Window periods discussed.
Also due Depo Provera given today happy with medication. Next due 13/06/2024.

14/03/2024 Third Party Consultation Ms Aileen [redacted]
14/03/2024 Document Image Docman Attachment
14/03/2024 Administration Kardex HMPYOI Stirling Pharmacy Ms Aileen [redacted]
13/03/2024 Third Party Consultation Ms Aileen Berry
13/03/2024 Document Image Docman Attachment
13/03/2024 Administration Clinical Letter HMPYOI Stirling Dermatology Appointment cancelled Ms Aileen [redacted]
13/03/2024 Triage Mrs [redacted]
13/03/2024 Ongoing review ANP L.Kane
Asked to rewrite kardex's as has 3x active
Same done - now has seperate kardex for gluten free products
12/03/2024 Triage Ms Hina Khizar
12/03/2024 Medication - risk monitoring Spot Checked 11.03.24

No discrepansies found. Dr Gp Stirling
08/03/2024 Clinic Dr J Green (Ad)

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08/03/2024 Speech therapy Seen for review.
Georgina consented to meeting.
Georgina reported that she is still awaiting a date for completion of her Parole Tribunal. She feels she is managing OK at present. She has found her accessible information provided via Social Work helpful.
Agreed to monitor short-term progress via contact with social work and to review again once dates for tribunal available.

Jan Green
Clinical Lead Speech and Language Therapy
08/03/24 15:00:00 Dr J Green (Ad)

08/03/2024 Third Party Consultation Ms Aileen [redacted]
08/03/2024 Document Image Docman Attachment
08/03/2024 Administration Clinical Letter HMPYOI Stirling In possesion medication check form Ms Aileen [redacted]

07/03/2024 Triage Ms Aileen [redacted]
07/03/2024 Failed encounter - hospital appointment 10:00 on 03/04/2024
Glasgow Royal Infirmary - 1st Floor (off Link Corridor) Walton Building, Castle Street, G4 0SF
Dermatology
Georgina Smith / 131344
04/12/1991
Normal Transport
Advised appointment cancelled by Hospital 07/03/2024, called Hospital 07/03/2024, another appointment will be posted out
Ms Aileen [redacted]
07/03/2024 Administration NOS Admin called hospital regarding caqncelled appointment for 03/04/2024.
Hospital advised another appointment will be sent out and the patient does not require to be re-referred. Ms Aileen [redacted]

07/03/2024 Triage Mrs [redacted]
07/03/2024 Ongoing review ANP L [redacted]
ANP Actions
I have been informed that the hospital has cancelled Georgie's appt as she has had 3x appointments offered and she is to be re-referred
I see that this is due to GeoAmey not attending to take [redacted]
As discussed prev with Dr Sayers we have to send the National letter in relation to this issue which was approved at the Oversight Board in April of this year and distributed to all NHS Board Chief Executives.

It clarifies the agreement that patients must not be removed from waiting lists, and should be reappointed, should they fail to attend secondary care appointments as a consequence of GeoAmey transport failures

[redacted] must not be penalized for GeoAmey not turning up as this is not within her control
I have emailed admin copy of the letter to send on- if you could send this on to the dermatology department to book a new appt Dr Gp Stirling

06/03/2024 Triage Miss Blyth [redacted]
06/03/2024 Consultation Call from dermatology regarding Georgina's missed appointments. They have cancelled this appointment due to [redacted] reaching her maximum missed appointments of 3 and she will need to re-referred to the service to be given another appointment.

Will list for GP/ANP actions for [redacted] to be re-referred

SN Blythe [redacted]
1015 Miss Blyth [redacted]

06/03/2024 Triage Miss Blyth [redacted] - No Data Recorded

04/03/2024 Triage Mr Sharon Mccallum
04/03/2024 Next hospital appointment 03/04/2024 @ 10:00
Glasgow Royal Infirmary - 1st Floor (off Link Corridor) [redacted] Building, Castle Street, G4 0SF
Dermatology
Georgina Smith / 131344
04/12/1991
Normal
Mr [redacted] Mccallum

04/03/2024 Third Party Consultation Ms Aileen [redacted]
04/03/2024 Document Image Docman Attachment
04/03/2024 Administration Clinical Letter HMPYOI Stirling Dermatology Outpatient appointment letter Ms Aileen [redacted]

04/03/2024 Triage Mr [redacted] Mccallum
04/03/2024 Next hospital appointment 19/03/2024 @ 10:00
Forth Valley Royal Hospital, Stirling Road, Larbert, FK5 4WR
X Ray Department - for XRay & US Scan
Georgina Smith / 131344
04/12/1991
Normal
Mr [redacted] Mccallum
04/03/2024 Appt cancelled by hospital 15:00
Stirling Community Hospital - Livilands Gate, Stirling FK8 2AU
X [redacted] Department
Georgina Smith / 131344
04/12/1991
Normal
Cancelled by Hospital - patient to have xray & uss on 19/03/2024 @ 10:00 FVRH
Mr [redacted] Mccallum

29/02/2024 Triage Ms Hina Khizar
29/02/2024 Medication - risk monitoring Spot Checked - All medication count noted to be correct. Patient is no longer precribed aspirin, hence, aspirin returned. Dr Gp Stirling

27/02/2024 Other Dr [redacted] Kildare
27/02/2024 Ongoing review MOA - Pharmacy querying script as [redacted] is written up for both Aspirin and Etodolac
Kardex reviewed - stop Aspirin and review if needed - can remain on Etodolac as was on this previously Dr [redacted] Kildare

27/02/2024 Administration Dr Fiona [redacted]
27/02/2024 Ongoing review GP [redacted] mail
Bloods inc ESR, CRP, RF and TSH all normal - reassuring from an inflammatory arthritis point of view.
XR hand awaited Dr [redacted]

26/02/2024 Triage Mr [redacted] Mccallum

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26/02/2024 Next hospital appointment 18/03/2024 @ 15:00
Stirling Community Hospital - Livilands Gate, Stirling FK8 2AU
X Ray Department
Georgina Smith / 131344
04/12/1991
Normal
Dr Gp Stirling

26/02/2024 Triage Mr Shs [redacted] Mccallum
26/02/2024 Failed encounter - hospital appointment 26/02/2024 @ 10:40
Glasgow Royal Infirmary - 1st Floor (off Link Corridor) [redacted] Building, Castle Street, G4 0SF
Dermatology
Georgina Smith / 131344
04/12/1991
Normal
GeoAmey Refused to take patient 26/02/2024 -- New Appointment will be sent out per phone call 26/02/2024
Mr [redacted] Mccallum

23/02/2024 Third Party Consultation Mr [redacted] Mccallum
23/02/2024 Document Image Docman Attachment
23/02/2024 Administration Haematology Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum

23/02/2024 Third Party Consultation Mr [redacted] Mccallum
23/02/2024 Document Image Docman Attachment
23/02/2024 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr Sharon Mccallum

22/02/2024 Triage Miss [redacted] Campbell
22/02/2024 Failed encounter
Listed for bloods however obtained yesterday. Duplicate appointment

Laura [redacted]
HCA
22/02/2024
10:06 Dr Gp Stirling

21/02/2024 Referral Letter Dr Fiona [redacted]
21/02/2024 SCI Referral Letter

21/02/2024 Administration Dr Fiona [redacted] - No Data Recorded

21/02/2024 Triage Ms [redacted] Kilpatrick
21/02/2024 Seen by health care assistant Seen Georgina in clinic for bloods, bloods obtained as per ordercomms and sent to labs.
[redacted] Kilpatrick
HCA
21/02/2024
11:55HRS Dr Gp Stirling

21/02/2024 Triage Ms Anne Mitchell
21/02/2024 Consultation
S. Seen in healthcentre
B. Cyst and rash on face
A. Georgina states she has been seen previously regarding this and has been prescribed steroid. Does not require further input at this time. Rash and cyst resolved
R. Advised to contact healthcare if any further issues.

RGN [redacted] 10.17am 21/02/2024 Ms Anne [redacted]

20/02/2024 Surgery consultation Dr [redacted]
20/02/2024 Ongoing review GP [redacted]
1) Eye - concerned about Graves disease - I showed her pictures of Grave's disease and we both agreed that she does not have this! Has had left sided upper eyelid periocular dermatitis. No stye or chalazion visible. For course of protopic twice weekly for one month in the first instance.
2) Headaches - in for review as previously described by myself 21/11/23 - unchanged since then. Headaches worse at the weekend when not working. Average 2x month. I wonder if it is worth trialing 900mg aspirin (no contraindications) at onset of headache and review again in 3 months.
3) Arthritis - finger pain and swelling with rotation of left index finger prominent. RF negative in 2018. Would be worth an XR of left hand ?erosions ?alignment and updated bloods inc CRP, ESR and RF.
4) Neck pain and swelling - ongoing since last year. Had XR which was unremarkable. Soft tissue swelling evident on examination, no skin changes. Would be worth asking physio to review in the first instance.

Plan:
- Protopic 0.33% twice weekly for one month
- Trial of aspirin 900mg stat at onset oh headache
RV headaches in 3m
- Bloods as above
- XR left hand
- Physio ref Dr [redacted]

19/02/2024 Triage Ms Aileen Berry
19/02/2024 Next hospital appointment
Monday 26/02/2024 at 10:40am
Glasgow Royal Infirmary - 1st Floor (off Link Corridor) [redacted] Building, Castle Street, G4 0SF
Dermatology
Georgina Smith / 131344
04/12/1991
Normal Transport Ms Aileen [redacted]
19/02/2024 Administration NOS Automated telephone reminder received regarding hospital appointment. No hospital appointment noted on database/vision, admin called Glasgow Royal Infirmary to obtain appointment details. Hospital confirmed 26/02/2024 at 10:40am. Ms Aileen [redacted]

16/02/2024 Triage Ms [redacted] - No Data Recorded

15/02/2024 Triage Ms [redacted]

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15/02/2024 Ongoing review ANP clinic
ANP K [redacted]
Skin review
? sty on eye
Due to make up unable to see eye properly.
No irritation in eye evident no redness noted.
Acne noted to T Zone, chin effected advised pus comes out.
This would be in line with acne vulgaris
Again wearing heavy makeup unable to see properly
On Doxycycline for acne extended course till may
Added in benzoyl peroxide BD PRN
Emolotient therapy for face and eye to use as a wash and moisturiser and added in qv cream
Use twice daily on left eyes area.
Relisted one week for further review of eye.
Worsening advice given.

15/02/2024 Triage Ms [redacted] - No Data Recorded
14/02/2024 Third Party Consultation Mr [redacted] Mccallum
14/02/2024 Document Image Docman Attachment
14/02/2024 Administration Kardex HMPYOI Stirling Pharmacy Mr [redacted] Mccallum
14/02/2024 Triage Ms Aileen [redacted]
14/02/2024 Self-referral [redacted] to check rash on eye and cysts on face. Ms Aileen [redacted]
13/02/2024 Triage Ms Jade Binnie
13/02/2024 Administration Already listed for bloods

[redacted] Binnie
HCA
13/02/2024 Dr Gp Stirling
13/02/2024 Triage Ms Karen [redacted]
13/02/2024 Ongoing review
ANP K [redacted] McBeth
Mail received.
Reviewed letter for Endrocrinology.
Impression: Thyroiditis.
They have advised that Georgina stop taking Carbimazole and montior bloods.
Once monthly for three months and then 3 monthly following this if there are no conerns.
Kardex please Dr Gp Stirling
09/02/2024 Third Party Consultation Mr Sharon Mccallum
09/02/2024 Document Image Docman Attachment
09/02/2024 Administration Clinical Letter Forth Valley Royal Hospital Endocrinology Clinic letter Mr [redacted] Mccallum
09/02/2024 Triage Ms [redacted] Murphy
09/02/2024 Ongoing review ANP action
ANP K murphy
unable to come today- relisted
08/02/2024 Third Party Consultation Mrs [redacted] Mcfadyen
08/02/2024 Consultation Seen in Iris.
Self referral for swelling at top of spine/bottom of neck.
Visible lump noted to the back of neck. States this has been an issue previously in 2022 - see note from 2022 started on etodolac for same.
States this is due to arthritis.
Not been an issue for almost 2 years but feels this has flared up again recently.
Reports +pain when moving her neck - causing issue as [redacted] the hairdressers.
Good range of movement, using regular analgesia with nil effect.
Listed for GP/ANP review.

PCT R WEIR
2020HRS Dr Gp Stirling
08/02/2024 Document Image Docman Attachment
08/02/2024 Consent given for blood test Administration Medical Marker Mrs [redacted] Mcfadyen
08/02/2024 Triage Ms [redacted] Weir - No Data Recorded
08/02/2024 Triage Ms [redacted] Binnie - No Data Recorded
07/02/2024 Third Party Consultation Mrs S[redacted]n Mcfadyen
07/02/2024 Document Image Docman Attachment
07/02/2024 Administration Administration HMPYOI Stirling In-Possesion Medication Check Mrs [redacted] Mcfadyen
01/02/2024 Triage Ms [redacted] No Data Recorded
31/01/2024 Triage Mrs [redacted]
31/01/2024 Ongoing [redacted]
Listed for ANP review
No entry as to why patient requires review?
can see on 25/1/24 self referred to nurse for painful finger
and was reviewed - on analgesia for arthritis of finger
Was seen by GP 2 weeks ago
No need to review again
If nurse have concerns around finger can list for review
Alternatively if pain is problematic her medications can be reviewed if required

31/01/2024 Triage Mrs [redacted]
31/01/2024 Ongoing [redacted]
Mail
Review of TSH- normal range
30/01/2024 Third Party Consultation Mr Sharon Mccallum
30/01/2024 Document Image Docman Attachment
30/01/2024 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
30/01/2024 Triage Ms [redacted] Waleh - No Data Recorded
25/01/2024 Triage Ms Aileen [redacted]
25/01/2024 Self-referral [redacted] AM - Sore finger, tipping to the side - arthritis? Ms Aileen [redacted]

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

25/01/2024 Triage Ms [redacted] Binnie
25/01/2024 Seen by health care assistant Seen Georgina in HC for TFT bloods succesffuly obtained and sent to labs

Complaining of sore finger - checked by PCT L Mccracken - this is arthiritis - on medication for same

Listed for TFT bloods 1 month
[redacted] Binnie
HCA
25/01/2024 Dr Gp Stirling
25/01/2024 Triage Ms [redacted] Binnie - No Data Recorded
23/01/2024 Clinic Dr J Green (Ad)
23/01/2024 Speech therapy Accessible licence conditions provided to [redacted] Discussed content and approaches to sharing information with Georgina.
Parole Hearing today. [redacted] will update on outcome and, if Georgina is libertaed, share contact details to allow advice to be given to Supervising Officer.

Jan Green
Clinical Lead Speech and Language Therapy
23/01/24 2.30pm Dr J Green (Ad)
23/01/2024 Triage Mrs [redacted] Mcfadyen
23/01/2024 Next hospital appointment Booking office confirmed another hospital appointment will be sent in due course Mrs [redacted] Mcfadyen
23/01/2024 Third Party Consultation Mrs [redacted] Mcfadyen
23/01/2024 Document Image Docman Attachment
23/01/2024 Administration Administration HMPYOI Stirling Results Mrs [redacted] Mcfadyen
23/01/2024 Other Dr Jack Kildare
23/01/2024 Ongoing review MOA Mail - see letter from Endocrine Specialist Nurse - has been discharged from follow up but needs TFTs every 3/12 for next year and referred back if deranged or develops symptoms of thyroid disease
I have communicated this on lib letter Dr [redacted] Kildare
23/01/2024 Ongoing review MOA - Lib letter completed Dr [redacted] Kildare
23/01/2024 Third Party Consultation Mr S [redacted] Mccallum
23/01/2024 Document Image Docman Attachment
23/01/2024 Administration Administration HMPYOI Stirling In-Possesion Medication Check Mr [redacted] Mccallum
23/01/2024 Triage Mrs [redacted] Mcfadyen
23/01/2024 Administration NOS Admin been unable to reach dermatology dept over the phone, have sent an email this morning to appointmentsbookingcentre@ggc.scot.nhs.uk to request a new appointment Mrs [redacted] Mcfadyen
22/01/2024 Triage Mrs [redacted] Mcfadyen
22/01/2024 Next hospital appointment Today's hospital appointment cancelled as Geoamy can't facilitate. Admin will rearrange appointment Mrs [redacted] Mcfadyen
16/01/2024 Surgery consultation Dr Jack Kildare
16/01/2024 Consultation GP Review
ATSP as [redacted] reporting some discomfort from left eye
No visual change
Feels sore on top lid
O/E
PERLA, eye movements normal and no conjuctival injection
Has small stye left upper lid
Advised on hot compresses and no need for abx treatment
Further review if not settling in 3/52 Dr [redacted] Kildare
16/01/2024 Triage Ms [redacted] Binnie
16/01/2024 Seen by health care assistant Attended Endocrinology telephone appt with Georgina
[redacted] complaining of sore eye - passed over to GP on shift at time
To provide georgie with letter from Dr [redacted] with plan going forward regarding bloods as possibilty of release on Tuesday - will put this in property
If feeling symptomatic to let gp know to get bloods

Jade Binnie
HCA
16/01/2024 Dr Gp Stirling
16/01/2024 Triage Ms [redacted] Binnie - No Data Recorded
15/01/2024 Triage Miss [redacted] - No Data Recorded
15/01/2024 Triage Ms [redacted] Binnie - No Data Recorded
15/01/2024 Triage Ms [redacted] - No Data Recorded
10/01/2024 Clinic Dr J Green (Ad)
10/01/2024 Speech therapy Case discussion with [redacted] Prison Based [redacted] advised that Ms Smith is being recommended for parole. Discussed risk that she may not comprehend licence conditions in current form. Agreed I will support development and sharing of accessible information on same.
Next steps: await information for development from [redacted] Simpson.

Jan Green
Clinical Lead Speech and Language Therapy
NHS Forth Valley Prisons Healthcare
10/01/24 12:00 Dr J Green (Ad)
08/01/2024 Third Party Consultation Mr Sharon Mccallum
08/01/2024 Document Image Docman Attachment
08/01/2024 Administration Administration HMPYOI Stirling In-Possesion Medication Check Mr [redacted] Mccallum
08/01/2024 Third Party Consultation Mr [redacted] Mccallum
08/01/2024 Document Image Docman Attachment
08/01/2024 Administration Administration HMPYOI Stirling In-Possesion Medication Check Mr Sharon Mccallum
07/01/2024 Triage Miss [redacted] - No Data Recorded
07/01/2024 Triage Miss L [redacted] n Campbell - No Data Recorded
05/01/2024 Triage Ms Laura Kilpatrick

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05/01/2024 Letter encounter to patient Letter sent to Georgina to make aware of normal bloods as documented by GP [redacted] Kilpatrick
HCA
05/01/2024
15:08HRS Dr Gp Stirling
05/01/2024 Other Dr [redacted] Sayers
05/01/2024 Ongoing review MOA - TFTs normal Dr [redacted] Sayers
05/01/2024 Third Party Consultation Ms [redacted] Rennie
05/01/2024 Document Image Docman Attachment
05/01/2024 Result Results Clinical Chemistry Ms [redacted] Rennie
04/01/2024 Third Party Consultation Mrs S[redacted] Mcfadyen
04/01/2024 Document Image Docman Attachment
04/01/2024 Administration Administration HMPYOI Stirling Alcohol and Benzodiazepine Withdrawal Scale Mrs [redacted] Mcfadyen
04/01/2024 Third Party Consultation Mrs [redacted] Mcfadyen
04/01/2024 Document Image Docman Attachment
04/01/2024 Administration Administration HMPYOI Stirling Alcohol and Benzodiazepine Withdrawal Scale Mrs [redacted] Mcfadyen
02/01/2024 Triage Ms [redacted] Cleary - No Data Recorded
29/12/2023 Triage Ms [redacted] Binnie - No Data Recorded
29/12/2023 Triage Ms [redacted] Binnie
29/12/2023 Seen by [redacted]th care assistant Seen Georgina in HC for bloods TFT
Obtained and sent to labs

[redacted] Binnie
HCa
29/12/2023

Dr Gp Stirling
27/12/2023 Triage Ms A[redacted] - No Data Recorded
21/12/2023 Triage Mrs [redacted] Mcfadyen
21/12/2023 Self-referral RW - PCT - Sore chest, left breast and back. Mrs [redacted] Mcfadyen
21/12/2023 Triage Ms [redacted]
21/12/2023 Recall on 14/03/2024 for Depo-provera injection given with Ms Rachel [redacted] Status: Complete
21/12/2023 Depo-provera injection given First service recall due: 14/03/2024 Claim Expiry Date: Batch GN3573, EXP 08/2025.
Right buttock.
Keen to continue with prescription. No issues raised.
R [redacted] - [redacted] health nurse
21/12/2023 15:14 Ms [redacted]
20/12/2023 Triage Mr [redacted] Mccallum
20/12/2023 Next hospital appointment 22/01/2024 @ 13:45
Glasgow Royal Infirmary - 1st Floor (off Link Corridor) Walton Building, Castle Street, G4 0SF
Dermatology
Georgina Smith / 131344
04/12/1991
Normal
Mr [redacted] Mccallum
19/12/2023 Triage Mr Sharon Mccallum
19/12/2023 Planned telephone contact 16/01/2024 @ 13:30
Endocrinology, Nurse Led Review
Georgina Smith / 131344
04/12/1991
01324 711558
Telephone Clinic
Mr [redacted] Mccallum
18/12/2023 Triage Ms [redacted] Lawson - No Data Recorded
13/12/2023 Triage Ms Lyndsay Mccracken
13/12/2023 Seen by triage nurse S- Seen in health centre treatment room
B- Self referral recieved for health marker
A- Georgina attended clinic this morning advised it was not a health marker that was required it was ? about her depot injection. Advised this is due 19/12/23 and is currently listed for PCT to be administered. Georgina was asking when her flu vaccine would be administered also advised she was listed for clinic 15/12/23 for this. Georgina happy with this information.
R- Awaiting upcoming appointments

PCT S/N Lyndsay McCracken
15.50 Ms Lyndsay Mccracken
08/12/2023 Triage Mr [redacted] Mccallum
08/12/2023 Self-referral Sub referral 08/12/2023 Flu jag and depo jag.SP Dr Gp Stirling
08/12/2023 Triage Ms [redacted]
08/12/2023 Consultation Listed for PCT healthcare marker 13/12/23
PCT [redacted] 11:22 08/12/23 Dr Gp Stirling
07/12/2023 Triage Ms [redacted] Rennie
07/12/2023 Administration NOS Contacted 0800592087 to re-arrange appointment for dermatology. As this is a first appointment there will be another letter sent out to the health centre. Ms [redacted] Rennie
07/12/2023 Triage Ms [redacted] Rennie
07/12/2023 Appointment cancelled by patient 07/12/2023 - 11:15
Stobhill Hospital 133 Balornock Road Glasgow G21 3UW
Dermatology
Georgina Smith 131344
04/12/1991
Normal
Patient Refused to attend due to another appointment
Ms [redacted] Rennie
07/12/2023 Other Miss Jackie Mckeich
07/12/2023 Consultation ANP actions, request to increase bisacodyl back to original dose, rx bisacodyl 5mg 1-2 tabs at night. Miss [redacted] Mckeich
06/12/2023 Other Mrs Doreen Doull - No Data Recorded

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Georgina Smith 04/12/1991 662/91/440 [redacted] **Consultations**

06/12/2023 Triage Ms [redacted]
06/12/2023 Consultation S; Seen in treatment room
B; Toileting issues ;/ dizziness
A; Patient states she is on Bysacodyl, however had asked for this to be reduced, patient states she feels as if she needs this increased again as she is finding it difficult to have a proper bowel movement. Patient also states she is feeling dizzy, but thinks this is down to stress regarding her parole hearing on the 18/12/23 as none of her reports are ready. Full set of observations done as follows; Temp; 36.6, B/P; 113/74, Stats; 100% on air, P; 85.
R; ANP for increase of Bysacodyl. Dizzy spells advised to increase fluid and try to relax a bit more. Worsening advice given.
PCT; C. [redacted]
6/12/23
14.21 Dr Gp Stirling
05/12/2023 Triage Ms [redacted] Cleary
05/12/2023 Letter encounter to patient to inform her of recent blood result.
Michelle Cleary
HCA
05/12/2023
16.55 Ms [redacted] Cleary
05/12/2023 Administration Dr [redacted]
05/12/2023 Thyroiditis Dr [redacted]
05/12/2023 Ongoing review GP [redacted] - Mail
TFTs within notmal range.
For rpt in 1m - added to ordercomms and added to actionable column on vision.
For TFTs: begining of Jan and Feb. Then May, August and November. Dr [redacted]
04/12/2023 Third Party Consultation Ms [redacted]
04/12/2023 Document Image Docman Attachment
04/12/2023 Result [redacted] HMPYOI Stirling Clinical Chemistry Ms Aileen [redacted]
04/12/2023 Triage Ms [redacted] Cleary
04/12/2023 Seen by health care assistant
Georgina was in the clinic for bloods but these were taken on 30/11/2023
[redacted] Cleary
HCA
04/12/2023
11.41 Ms [redacted] Cleary
03/12/2023 Triage Ms [redacted] Binnie - No Data Recorded
01/12/2023 Triage Mrs [redacted] Mcfadyen
01/12/2023 Self-referral Nurse - AM - Toilet issues Mrs [redacted] Mcfadyen
30/11/2023 Triage Ms [redacted] Kilpatrick
30/11/2023 Seen by health care assistant
Seen in health centre with [redacted] K & [redacted] C. Bloods obtained as per OrderComms, sample sent to lab.

[redacted]
HCA
30/11/2023
11:43 Dr Gp Stirling
30/11/2023 Triage Mr [redacted] Mccallum
30/11/2023 Self-referral Review for Medical Marker - 2 duvets. Mr [redacted] Mccallum
28/11/2023 Triage Ms Michelle Cleary
28/11/2023 Letter encounter to patient to inform her of recent stop to Carbimazole.
Listed for bloods monthly for 3 mnths then quarterly for 1 year.
[redacted] Cleary
HCA
28/11/2023
15.35
Ms [redacted] Cleary
28/11/2023 Other Dr [redacted] Kildare
28/11/2023 Ongoing review MOA Mail - see letter from Dr [redacted] Endo Cons - suspects [redacted] has had a transient thyroiditis which has now settled - Carbimazole is to be stopped and to have TFTs taken monthly for 3/12 then every 4 months for a year Dr [redacted] Kildare
28/11/2023 Triage Ms [redacted] Rennie - No Data Recorded
27/11/2023 Third Party Consultation Ms Aileen [redacted]
27/11/2023 Document Image Docman Attachment
27/11/2023 Administration Clinical Letter HMPYOI Stirling Medical Marker Ms Aileen Berry
27/11/2023 Third Party Consultation Mr [redacted] Mccallum
27/11/2023 Document Image Docman Attachment
27/11/2023 Administration Clinical Letter Forth Valley Royal Hospital Endocrinology Endocrinology Clinic Letter Dr Kelly Mr [redacted] Mccallum
24/11/2023 Triage Mrs [redacted]
24/11/2023 Ongoing review ANP L.Kane
Review of endocrine letter
To STOP carbimazole
Monthly TFTs for 3 months then quaterly for 12 months
Will list TFTs Free T3 and T4 on order comms
Will stop carbimazole
23/11/2023 Third Party Consultation Mr [redacted] Mccallum
23/11/2023 Document Image Docman Attachment
23/11/2023 Administration Clinical Letter NHS Forth Valley Endocrinology Mr Sharon Mccallum
23/11/2023 Triage Mrs [redacted] Mcfadyen
23/11/2023 Administration NOS Admin called Endocrine nurse Jillian Tough's secretary [redacted] 22/11/2023 13:00 and left a message to phone back Health centre with an update as nothing on portal from appt 3/11 dr was querying med changes. (Vision down yesterday so couldn't update note at the time) Mrs [redacted] Mcfadyen
22/11/2023 Triage Ms [redacted] Binnie - No Data Recorded
22/11/2023 Clinic Dr J Green (Ad)

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22/11/2023 Speech therapy Met with case management officer Andy [redacted] to feedback on current invovlement and plans for informaitor sharing.
[redacted] positive about the utility of communication support informaiton.

Next steps: to share communication plan and dictionary w/c 27/11/23

Jan Green
Clinical Lead Speech and Language Therapy
22/11/23 3:10pm Dr J Green (Ad)
22/11/2023 Clinic Dr J Green (Ad)
22/11/2023 Speech therapy Seen on [redacted]

Shared and agreed communication profile - Georgie reporting feeling very positive about this.
[redacted] had completed requested work on communication dictionary. She had produced a detailed account, which is likely to prove useful in her management and support. Discussed and agreed content to by typed up for sharing in week commencing 27/11/23.

Next steps: Sharing of communication support materials, info to case management and risk management team.

[redacted] Green
Clinical Lead Speech and Language Therapy
22/11/23 3:00pm Dr J Green (Ad)
22/11/2023 Triage Mrs [redacted] Mcfadyen - No Data Recorded
21/11/2023 Triage Miss [redacted] Campbell
21/11/2023 Administration
As per GP actions - Listed for bloods W/C 04/12 and W/C 01/01/24. Already listed for depo-provera 19/12. Listed for review appt 3/12 for skin with ANP K [redacted]

Laura Campbell
HCA
21/11/2023
20:27 Dr Gp Stirling
21/11/2023 Triage Ms [redacted] Cleary - No Data Recorded
21/11/2023 Triage Mrs [redacted] Mcfadyen - No Data Recorded
21/11/2023 Surgery consultation Dr [redacted]
21/11/2023 Consultation GP [redacted]

1) Carbimazole. Was out at FVRH on 3/11 to see Dr [redacted] (endocrine). Georgina states that she was told to stop carbimazole after this appointment. Unfortunately no letter from this appointment on portal or docman. Plan had also been to check bloods at 1m (so begining of December) and a month after that. Therefore, I will request bloods for WB 4/12 for TFT and then a month after that. I will also ask admin to contact secretaries at FVRH to chase up formal letter from Dr [redacted]
2) Acne - worst around chin. Has tried 'all of the topical treatments' with no effect/reported allergy with BP. Started lymecycline earlier in the year (with good effect), prior to this had erythromycin with no effect. Worth trying 3m doxy then review with ANP K [redacted]
3) Headaches - right frontal pulsation. Can last up to four days then settle spontaneously. Under a lot of stress which she thinks aggravtes it. Triggered by bright lights and concentrating on drawing. Recent optician review ok. Headaches dont stop her doing anything. No vomitting, no diplopia, no visual change. Having 2 headaches/month. Sound like tension headaches, nil red flags. For simple analgesia PRN in first instance and review in 3m. If change/get worse in the interim then will send in a slip
Plan:
- Bloods WB 4/12 and begining Jan
- Admin to liaise with endocrine secretaries.
- 3m doxyxycline100mg OD then review with [redacted]
- Monitor headaches, simple analgesia. Dr [redacted]
17/11/2023 Triage Ms Michelle Cleary - No Data Recorded
17/11/2023 Triage Mr Sharon Mccallum
17/11/2023 Self-referral Self referral - skin clinic, would like to see doctor. Listed for GP/ANP by NW Mr [redacted] Mccallum
14/11/2023 Triage Ms [redacted] Kilpatrick
14/11/2023 Administration Action from Gp clinic, note [redacted] already chased letter up.
[redacted] Kilpatrick
HCA
14/11/2023
19:29HRS Dr Gp Stirling
14/11/2023 Triage Ms Aileen [redacted]
14/11/2023 Administration NOS Admin called Endocrinology to chase letter, letter has not been typed as yet. Admin requested letter to be emailed once issued. Ms Aileen [redacted]
14/11/2023 Triage Mrs [redacted]
14/11/2023 Ongoing review ANP L.Kane
Triaging appt - was listed for review of carbimazole as patient handed back her meds as she states consultant advised her to stop these. She was reviewed 11 days [redacted] in clinic and no letter back as yet
Will ask admin to chase clinic letter from endocrinology as patient as she is now not taking these
14/11/2023 Third Party Consultation Ms Aileen [redacted]
14/11/2023 Document Image Docman Attachment
14/11/2023 Administration Administration HMPYOI Stirling In-Possession Medication Check Ms Aileen [redacted]
09/11/2023 Triage Ms [redacted]
09/11/2023 Ongoing review ANP pharmacy
ANP K [redacted]
pharmacy advised patient handed back in carbimazole.
not discontinued at this time i noted appt next week to discuss medication at patients request. await outcome
09/11/2023 Clinic Dr J Green (Ad)
09/11/2023 Speech therapy Seen on [redacted] accompanied by Speech and Language Therapy [redacted] McCandlish.

Georgina appeared in good spirits and consented to session. She had completed work on communication profile as requested. Discussed current needs, Georgina expressing concern that SPS may wish her to do further rehabilitation work when she feels she should focus on stability and preparation for liberation (due for liberation July 2025). Agreed with Georgina that a period of stable preparation, with support [redacted] transition, is important. Asked Georgina to complete a communication dictionary as she raised that staff often do not understand her needs and early warning signs of distress. Georgina reported that she has a RMT due relatively soon. Agreed I will seek to attend this, also will share progess with her social worker [redacted]

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Next steps: to see to complete communication profile and agree communication dictionary.

Jan Green
Clinical Lead Speech and Language Therapy
09/11/23 4pm
Dr J Green (Ad)

09/11/2023 Triage Ms Hina Khizar
09/11/2023 Medication - risk monitoring 08.11.23 Patient has returned 20 tablets of Carbimazole 5mg, stating the reason that the hospital has told her to stop taking the said medicine. Dr Gp Stirling

08/11/2023 Triage Ms [redacted]
08/11/2023 Consultation S. [redacted] in clinic
B. Wants to speak to gp regarding medications
A. Does not want to speak to nurse states has not seen gp since coming to stirling and would like an appt with gp to discuss medication. States previously on meds that worked for her and have been stopped. Would not elaborate as feels nurses cant help as we dont prescribe.

R. Booked in with GP for next week to r/v meds Ms [redacted] Mitchell

07/11/2023 Other Dr [redacted] Kildare
07/11/2023 Ongoing review ANP K.Murphy/GP J.Kildare
Actions
Dates up for review of Pizotifen, Famotidine - reviewed and continued
Beclometasone nasal spray stopped as was for seasonal allergic rhinitis Dr [redacted] Kildare

06/11/2023 Triage Ms Jill Ramsay
06/11/2023 Consultation Requested to be seen in halls, reports is being bullied in halls. Has reported this to officers who state they can no get involved. Feels this is impacting on her mental health, has put referal in for MHT, I will also raise this with them. States is able to keep self safe and has no thoughts of suicide, advised to approach staff if anything changes
PCT SN JRamsay 6/11/23 19.58 Dr Gp Stirling

06/11/2023 Triage Mrs [redacted] Mcfadyen
06/11/2023 Self-referral PCT - JR - To be seen regarding medication Mrs [redacted] Mcfadyen

06/11/2023 Triage Ms Jill Ramsay - No Data Recorded

03/11/2023 Third Party Consultation Mr Sharon Mccallum
03/11/2023 Document Image Docman Attachment
03/11/2023 Administration Kardex HMPYOI Stirling Pharmacy Mr [redacted] Mccallum

03/11/2023 Triage Ms Jill Ramsay - No Data Recorded

31/10/2023 Triage Mrs [redacted] Mcfadyen
31/10/2023 Next hospital appointment 07/12/2023 11:15
Stobhill Hospital 133 Balornock Road Glasgow G21 3UW
Dermatology
Georgina Smith 131344
04/12/1991
Normal Mrs Sian Mcfadyen

25/10/2023 Triage Ms [redacted] Binnie - No Data Recorded

24/10/2023 Triage Ms Eilish Mcbeth
24/10/2023 Ongoing review
ANP action
Dr [redacted] & E McBeth
Listed for bisacodly to be restarted as struggling with constipation - same prescribed. Ms Eilish Mcbeth

23/10/2023 Triage Ms [redacted] Binnie - No Data Recorded

20/10/2023 Triage Ms [redacted]
20/10/2023 Consultation Listed for GP to review Bisacodyl.
[redacted] stated she would like to have her medication reinstated as she is struggling to have regular bowel movements.

PCT [redacted]
20/10/23
17:03 Dr Gp Stirling

20/10/2023 Surgery consultation Ms [redacted] Halliday - No Data Recorded

20/10/2023 Third Party Consultation Ms Aileen Berry
20/10/2023 Document Image Docman Attachment
20/10/2023 Result Results HMP Cornton Vale Clinical Chemistry Ms Aileen [redacted]

19/10/2023 Triage Ms [redacted] Cleary - No Data Recorded

19/10/2023 Triage Ms [redacted] Rennie
19/10/2023 Administration NOS Contacted X-Ray on 01786 454508 to re-arange appointment. They have noted that appointments in Forth Valley Royal will contact the Health Centre with a new appointment. Ms [redacted] Rennie

19/10/2023 Triage Ms [redacted] Rennie
19/10/2023 Failed encounter - hospital appointment Geomay Refused transport - 20/10/2023 10:10
Stirling Health & Care Village, Livilands Gate, Stirling FK8 2AU
X-Ray Reception, GP & Minor Injuries Centre
Georgina Smith / 131344
04/12/1991
Normal Transport
Geomay refused.
Ms [redacted] Rennie

19/10/2023 Triage Ms [redacted] Rennie - No Data Recorded

19/10/2023 Triage Ms Kathleen Quail
19/10/2023 Drug addiction therapy
S - Met with [redacted] for Prison Healthcare Addictions Service one to one support. Verbal consent to proceed obtained.
B - Georgie is currently illicit drug free.
A - Appeared kempt, maintained eye contact, behaved in keeping with setting, communication was bright, reactive [redacted] rate and tone. Relapse prevention plan was discussed. [redacted] has been working through this and today we finalised the paper [redacted] her plan for release.
R - Relapse prevention paperwork e-mailed to Angela France and a copy given to [redacted]
See in 4/52
[redacted] Quail, Substance Use and Recovery Team HMPS
14.10
Ms Kathleen Quail

19/10/2023 Triage Mrs [redacted]

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19/10/2023 Ongoing review ANP [redacted]
Mail
Review of bloods
LFTs- normal

19/10/2023 Triage Ms [redacted] Binnie - No Data Recorded
19/10/2023 Third Party Consultation Ms Aileen [redacted]
19/10/2023 Document Image Docman Attachment
19/10/2023 Result Results HMP Cornton Vale Clinical Chemistry Ms Aileen [redacted]
19/10/2023 Triage Mrs [redacted]
19/10/2023 Ongoing review ANP L [redacted]
Pharmacy
Asked to review carbimazole
Last TFTs 3 days ago- Within normal range
Has endocrine appt 3/11/23
- continued
17/10/2023 Triage Ms Aileen Berry
17/10/2023 Next hospital appointment Stirling Health & Care Village at 10:10
US Abdominal Scan
X-Ray Reception, GP & Minor Injuries Centre
Normal Transport
Ms Aileen [redacted]
17/10/2023 Triage Ms Aileen [redacted]y - No Data Recorded
17/10/2023 Triage Ms Jill Ramsay - No Data Recorded
16/10/2023 Triage Miss Blyth [redacted]
16/10/2023 Consultation S- Seen in clinic
B- Allergic reacting to gluten
A- States she has had an allergic reaction to gluten food
Rash appeared on chest going up to underneath chin - appears to have settled by time of seeing [redacted]
Already prescribed fexofenadine
BP 123/80, HR 88, Sp02 99% temp 36.9, resp 16
R- Will discuss with Dr Kildare re-difflam spray
?gluten free diet marker

SN Blythe Johnston/SN [redacted] Weir
1510 Miss Blyth [redacted]
16/10/2023 Triage Ms [redacted] Kilpatrick
16/10/2023 Seen by health care assistant Seen Georgina in clinic for bloods LFT obtained and sent to labs.
[redacted] Kilpatrick
HCA
16/10/2023
Dr Gp Stirling
16/10/2023 Triage Ms [redacted] Kilpatrick - No Data Recorded
13/10/2023 Triage Mrs [redacted] Stewart
13/10/2023 Self-referral Nurse Triage - AM - Would like to discuss diet. Added to Nurse Triage Waiting list and card sent to patient to confirm. Mrs [redacted]
10/10/2023 Clinic Dr J Green (Ad)
10/10/2023 Speech therapy Seen on hall.
Discussed recent referral. Georgina reported that she has been trying to explain her communication needs to staff but feels that she is not listened to. Agreed to work jointly on a communication profile. Gave Georgina outlines guidance to allow her to prepare notes for next session on 24/10/23.

Jan Green
Clinical Lead Speech and Language Therapy
10/10/23 4.10pm Dr J Green (Ad)
10/10/2023 Other Dr [redacted] Kildare
10/10/2023 Ongoing review MOA - dates up for review of Lymecycline - been on since Feb 23 so stop date applied for beginning of Nov
Dr [redacted] Kildare
06/10/2023 Triage Ms [redacted] Weir
06/10/2023 Consultation S - Seen in healthcentre.
B - Self referral to discuss medication
A - Bisacodyl discontinued due to refusal. Due to an excess of medication transferred from polmont with [redacted] another monthly bag was not required at time of dispensing and therefore 'refused'. [redacted] states she has been on this medication long term and [redacted] requires to be prescribed it.
Georgie also requesting throat spray to be prescribed again due to irritation from eating foods with gluten.
R - Listed for GP/ANP review.

[redacted] Weir
PCT
06/10/2023
1450HRS Dr Gp Stirling
06/10/2023 Triage Ms Karen Murphy
06/10/2023 Ongoing review ANP action
ANP K Murphy
pharmacy review Lymecycline patient has been on since Feb extended for 1 months
if requested again will need listed for review appointment.
05/10/2023 Triage Mr [redacted] Mccallum
05/10/2023 Self-referral Discuss meds I have been took off. SP Mr Sharon Mccallum
05/10/2023 Triage Ms [redacted] Binnie - No Data Recorded
29/09/2023 Triage Mr [redacted] Mccallum

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29/09/2023 Next hospital appointment 03/11/2023 @ 9:30 AM
Forth Valley Royal Hospital, Stirling Road, Larbert, FK5 4WR
Endocrinology - Oupatients Area 3
Georgina Smith / 131344
04/12/1991
Normal

29/09/2023 Triage Ms Jade Binnie
29/09/2023 Weight: 69.7 kgs BMI: 25.6 O/E - weight Dr Gp Stirling
29/09/2023 Seen by health care assistant Seen in HC for weight

[redacted] Binnie
HCA
29/09/2023 Dr Gp Stirling
29/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
29/09/2023 Triage Ms Jill Ramsay - No Data Recorded
27/09/2023 Third Party Consultation Mr [redacted] Mccallum
27/09/2023 Document Image Docman Attachment
27/09/2023 Administration Clinical Letter HMP Cornton Vale In possesion medication check form Mr Sharon Mccallum
27/09/2023 Third Party Consultation Mr Sharon Mccallum
27/09/2023 Document Image Docman Attachment
27/09/2023 Administration Clinical Letter HMP Cornton Vale In possesion medication check form Mr [redacted] Mccallum
26/09/2023 Triage Ms Hina Khizar
26/09/2023 Medication - risk monitoring Spot Check 25.09.23
Noted to have excess of the following meds:
Amitryptyline 75mg (+1)
Pizotifen 1.5mg (+1)
Famotidine 40mg(+1)
Fexofenadine 120mg (+1)
Lymecycline 408mg (+3)
Quetiapine 175mg (+1) Dr Gp Stirling
26/09/2023 Triage Ms [redacted]
26/09/2023 Recall on 19/12/2023 for Depo-provera injection given with Ms [redacted] Status: Complete
26/09/2023 Depo-provera injection given First service recall due: 19/12/2023 Claim Expiry Date: 19/12/2023 08/2025
gn3573
673466293251 Ms [redacted]
25/09/2023 Triage Ms R [redacted] Weir - No Data Recorded
25/09/2023 Triage Ms Aileen [redacted]
25/09/2023 Self-referral Nurse KH - Depo jag. Ms Aileen [redacted]
25/09/2023 Triage Ms Keleigh Mournian - No Data Recorded
22/09/2023 Triage Ms Keleigh Mournian
22/09/2023 Consultation
T/C from Iris staff to state Georgina was in some discomfort with her stomach.
Attended [redacted] to advise Georgina that dr had px lactulose and pharmacy had ordered it.
Georgina happy with this, no other problems reported.

Keyleigh Hale
PCT
22.09.2023
19.18 Dr Gp Stirling
22/09/2023 Triage Ms Keleigh Mournian - No Data Recorded
22/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
22/09/2023 Other Dr [redacted] Kildare
22/09/2023 Ongoing review MOA - constipated - requesting treatment - try Lactulose 10-15ml up to BD and review if not settling Dr [redacted] Kildare
21/09/2023 Triage Ms [redacted]
21/09/2023 Consultation S: Seen in Iris at 19:30
B: Bloated stomach and discomfort.
A: Patient stated she has not moved her bowels in 5 days and feels bloated.
Palpated her stomach which was hard and asked if she had been drinking enough fluids and eating fibre. Patient adivsed that she has been drinking enough fluids but the food in the prison does not agree with her. This has been an ongoing issue ad is being reviewd.
R: Have listed for GP to prescribe a Laxative

PCT [redacted]
21/09/23
20:07 Dr Gp Stirling
21/09/2023 Triage Ms [redacted] - No Data Recorded
20/09/2023 Third Party Consultation Ms Aileen [redacted]
20/09/2023 Document Image Docman Attachment
20/09/2023 Administration Clinical Letter HMP Cornton Vale Endocrinology Ms Aileen [redacted]
20/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
20/09/2023 Triage Ms [redacted] Binnie
20/09/2023 Seen by [redacted] h care assistant Aready listed for TFT bloods 16/10

[redacted] Binnie
HCA
20/09/2023 Dr Gp Stirling
20/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
20/09/2023 Administration Dr [redacted]
20/09/2023 Ongoing review GP actions [redacted]
Carbimazole reduced to 5mg as per endocrine.
Follow up arranged as per yesterdays entry Dr [redacted]
19/09/2023 Other Miss [redacted] Mckeich

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19/09/2023 Consultation ANP mail, review bloods, see entry 14/9/23
TSH 1.79, T4 10.1, T3 3.0
All within range
Letter from endocrinology - to reduce carbimazole to 5mg daily, kardex requested - listed in actions then for repeat bloods in 4 weeks - listec in ordercomms. Miss [redacted] Mckelch
18/09/2023 Third Party Consultation Ms Aileen [redacted]
18/09/2023 Document Image Docman Attachment
18/09/2023 Administration Clinical Letter HMP Cornton Vale Endocrinology Ms Aileen [redacted]
18/09/2023 Third Party Consultation Ms Aileen Berry
18/09/2023 Document Image Docman Attachment
18/09/2023 Result Results HMP Cornton Vale Clinical Chemistry Ms Aileen Berry
14/09/2023 Triage Ms [redacted] Weir
14/09/2023 Seen by health care assistant Seen in healthcentre for virtual appt.
Computer sound not working - Changed to telephone consultation.
Nurse Gillian Tough from endocrinology FVRH requested TFT bloods - obtained with consent and sent to labs.
Follow up appt in 6/52 with endocrinology consultant r.e treatment plan.
Weight obtained - 70.2kg.

HCA R WEIR
14/09/2023
1114HRS
Dr Gp Stirling
14/09/2023 Weight: 70.2 kgs BMI: 25.7 O/E - weight Dr Gp Stirling
08/09/2023 Surgery consultation Ms [redacted] Halliday
08/09/2023 Consultation Prescription of Quetiapine increased from 150mg PM to 175mg PM as per request from Dr [redacted] Swinson.

Prescription increase to take effect from Tuesday12th to allow for same to be delivered by pharmacy. 150mg PM prescription to continue until Monday 11th and then discontinue.

[redacted] Halliday
MH T/L
08/09/23
1142 Ms Cara Halliday
06/09/2023 Triage Ms Hina Khizar - No Data Recorded
05/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
05/09/2023 Third Party Consultation Mr Sharon Mccallum
05/09/2023 Document Image Docman Attachment
05/09/2023 Administration Administration HMP Cornton Vale Medical Marker Mr [redacted] Mccallum
05/09/2023 Triage Ms [redacted] Binnie - No Data Recorded
05/09/2023 Other Dr [redacted] Kildare
05/09/2023 Ongoing review GP J.Kildare/Chronic Disease Nurse E.McBeth
Actions
Requesting medical marker again for lactose free products - see entry from Dieticians 07/12/22 on Clinical Portal - she is not dairy intolerant but they are in agreement for a marker to be given for lactose free products
Medical marker completed Dr [redacted] Kildare
04/09/2023 Triage Mrs Jane Watt
04/09/2023 Mental health review Request for increase in medication
I had met with Georgie 2 weeks ago in the hall. She told me that since moving back to Stirling the smaller household was causing her to be more anxious. She reports that the dynamics of the personalities within the unit makes her more withdrawn as she fears she will react inappropriately if "pushed". She finds herself struggling to sleep and "worries all the time".
[redacted] has not required any input from MHT for over 1 year, also not had a medication review/change in this time. She believes a small increase in her Quetiapine will benefit her at this time. For discussion at CTM.
[redacted] Watt
SSN MH Dr Gp Stirling
01/09/2023 Triage Mr [redacted] Mccallum
01/09/2023 Self-referral Self referral - Well women - not nurse clinic DF Mr [redacted] Mccallum
30/08/2023 Triage Ms Su [redacted] Pa [redacted]
30/08/2023 Administration Patient cancelled appointment.

PCT [redacted]
30/08/23
10:57 Dr Gp Stirling
25/08/2023 Triage Mrs [redacted] Watt
25/08/2023 Mental health review Request for medication increase
I met with [redacted] in Iris this evening. She reports that since coming back to Stirling she has had problems getting to sleep. The environment is causing her more distress. Believes an increase in her Quetiapine would be helpful.
I advised her that I would ask for this to be reviewed for increase at CTM.
[redacted] Watt
SSN MH Dr Gp Stirling
25/08/2023 Triage Ms [redacted] Binnie - No Data Recorded
23/08/2023 Triage Ms Laura Kilpatrick - No Data Recorded
23/08/2023 Triage Ms [redacted] Binnie
23/08/2023 Administration Actions from ANP
Listed for weight in 2 months.

[redacted] Binnie
HCA
23/08/2023 Dr Gp Stirling
23/08/2023 Administration Dr [redacted]
23/08/2023 Ongoing review GP [redacted]
Request to determine if needs to continue with weekly weights - from looking at the notes I dont think this is required. For one off weight in 2m and look at trent then.

Also 'Requesting Lactose Free Diet but not sure if she has been diagnosed as lactose intollerant.'. Not diagnosed. Can simply avoid items on the menu that she wishes to. Dr [redacted]

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21/08/2023 Triage Ms [redacted] Ford - No Data Recorded
21/08/2023 Triage Ms [redacted] Cleary
21/08/2023 Weight: 69.6 kgs BMI: 25.5 O/E - weight Ms [redacted] Cleary
17/08/2023 Triage Ms [redacted] patrick
17/08/2023 Weight: 69.1 kgs BMI: 25.3 O/E - weight Dr Gp Stirling
15/08/2023 Triage Ms [redacted] e Binnie - No Data Recorded
14/08/2023 Triage Ms [redacted] Kilpatrick
14/08/2023 Seen by health care assistant Seen in clinic for weight, as documented below

[redacted] Kilpatrick
HCA
14/08/2023
10:23HRS Dr Gp Stirling
14/08/2023 Weight: 69.5 kgs BMI: 25.5 O/E - weight Dr Gp Stirling
10/08/2023 Triage Ms [redacted] Cleary - No Data Recorded
10/08/2023 Other Dr Craig Savers
10/08/2023 Ongoing review Lab results noted - already initiated on Carbimazole as per endocrine request Dr [redacted] Sayers
10/08/2023 Triage Ms Lyndsay Mccracken
10/08/2023 Weight: 69.3 kgs BMI: 25.4 O/E - weight Ms Lyndsay Mccracken
09/08/2023 Triage Ms [redacted] le Cleary - No Data Recorded
09/08/2023 Third Party Consultation Mr [redacted] Mccallum
09/08/2023 Document Image Docman Attachment
09/08/2023 Administration Haematology Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
09/08/2023 Third Party Consultation Mr [redacted] Mccallum
09/08/2023 Document Image Docman Attachment
09/08/2023 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
08/08/2023 Third Party Consultation Mrs [redacted] Taylor
08/08/2023 Document Image Docman Attachment
08/08/2023 Administration Clinical Letter NHS Forth Valley Endocrinology Mrs [redacted] Taylor
08/08/2023 Other Dr [redacted] Kildare
08/08/2023 Ongoing [redacted]iew MOA Mail - see response from Endocrine - to start Carbimazole 10mg OD and await appt from Endocrine for review Dr [redacted] Kildare
07/08/2023 Third Party Consultation Mr [redacted] Mccallum
07/08/2023 Document Image Docman Attachment
07/08/2023 Administration Clinical Letter Forth Valley Royal Hospital Endocrinology Mr [redacted] Mccallum
07/08/2023 Triage Ms [redacted] Johnston - No Data Recorded
07/08/2023 Third Party Consultation Mr [redacted] Mccallum
07/08/2023 Document Image Docman Attachment
07/08/2023 Administ[redacted]n Administration HMP Cornton Vale Glasses Reciept Mr [redacted] Mccallum
07/08/2023 Triage Ms [redacted] Rennie
07/08/2023 Planned [redacted]phone contact Video link - 14/09/2023 10:30
Endocrinology
Georgina Smith/131344
04/12/1991
01324 566249
https://nhsattend.vc/fv-endocrine
Ms [redacted] Rennie
07/08/2023 Triage Ms [redacted] Cleary
07/08/2023 Weight: 69.6 kgs BMI: 25.5 O/E - weight Ms [redacted] Cleary
07/08/2023 [redacted] by health care assistant
Repeat bloods taken as requested U&E LFT,TSH,EGFR,T3,T4
[redacted] Cleary
HCA
11.40
07/08/2023
Ms [redacted] Cleary
04/08/2023 Triage Ms Ailsa Russell - No Data Recorded
04/08/2023 Triage Mrs L[redacted]
04/08/2023 Ongoing review ANP L[redacted]
Discussed with pharmacy staff regarding gluten free foods
Wishes some changes
I have asked pharmacy to give Georgina the list and ask her to pick her 16 units and I will re-write her a kardex with GF foods only on this
03/08/2023 Triage Ms Laura Kilpatrick
03/08/2023 Weight: 70.2 kgs BMI: 25.7 O/E - weight Dr Gp Stirling
01/08/2023 Referral Letter Dr Jack Kildare
01/08/2023 SCI Referral Letter
01/08/2023 Other Dr [redacted] Kildare
01/08/2023 Ongoing review MOA - bloods reviewed - anti-TSH antibodies negative - USS neck requested and referral sent to Endocrine for advice Dr [redacted] Kildare
31/07/2023 Triage Ms Jill Ramsay
31/07/2023 Weight: 71 kgs BMI: 26 O/E - weight Dr Gp Stirling
31/07/2023 Triage Ms Keleigh Mournian
31/07/2023 Consultation
Asked by SSN J Ramsay to check review of bloods.
Note blood results below ?review.
Listed for repeat bloods on 07/08 as instructed by SSN.
Recheck same bloods as before

Keyleigh [redacted]
PCT
31.07.2023
15.14 Dr Gp Stirling
28/07/2023 Triage Ms [redacted]n [redacted]

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28/07/2023 Ongoing review ANP mail
ANP K[redacted]
lab results
U &es ok
EGFr >59 good
LFT ok
TSH 0.01
T4 was 27.2 now 22.6
T3 was 6.6 now 7.4
kardex to review medications

27/07/2023 Triage Ms Jade Binnie
27/07/2023 Weight: 70.2 kgs BMI: 25.7 O/E - weight Dr Gp Stirling
27/07/2023 Third Party Consultation Mr[redacted] Mccallum
27/07/2023 Document Image Docman Attachment
27/07/2023 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr[redacted] Mccallum
27/07/2023 Administration Dr[redacted] Oswald
27/07/2023 Ongoing review GP[redacted]
Mail
Not all bloods back yet, anti TSH/TPO outstanding, wait for these results to come through and then review. Dr[redacted]
26/07/2023 Third Party Consultation Mr S[redacted] Mccallum
26/07/2023 Document Image Docman Attachment
26/07/2023 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr[redacted] Mccallum
24/07/2023 Triage Ms[redacted] Binnie
24/07/2023 Seen by health care assistant Seen in HCA clinic for bloods
Successfully obtained and sent to labs

[redacted] Binnie
HCA
24/07/2023 Dr Gp Stirling
24/07/2023 Weight: 70.1 kgs BMI: 25.7 O/E - weight Dr Gp Stirling
24/07/2023 Triage Ms Jade Binnie - No Data Recorded
21/07/2023 Triage Ms[redacted] Kilpatrick
21/07/2023 Administration Listed for bloods for next week as requested.

[redacted] Kilpatrick
HCA
21/07/2023
18:58HRS Dr Gp Stirling
21/07/2023 Other Dr[redacted] Kildare
21/07/2023 Hyperthyroidism ANP L.Kane/GP J.Kildare
Mail
See bloods - TSH undetectable with hyperthyroidism
Please repeat bloods next week - FBC, U&Es, LFTs, HbA1c, TSH with Anti-TSH and Anti-TPO antibodies
Can review following this and if remains raised for referral to Endocrine team Dr[redacted] Kildare
20/07/2023 Third Party Consultation Mr Sharon Mccallum
20/07/2023 Document Image Docman Attachment
20/07/2023 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr[redacted] Mccallum
20/07/2023 Third Party Consultation Mr[redacted] Mccallum
20/07/2023 Document Image Docman Attachment
20/07/2023 Administration Microbiology Results Forth Valley Royal Hospital Microbiology Mr[redacted] Mccallum
20/07/2023 Third Party Consultation Mr[redacted] Mccallum
20/07/2023 Document Image Docman Attachment
20/07/2023 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr[redacted] Mccallum
20/07/2023 Third Party Consultation Mr[redacted] Mccallum
20/07/2023 Document Image Docman Attachment
20/07/2023 Administration Haematology Results Forth Valley Royal Hospital Labs Mr Sharon Mccallum
20/07/2023 Triage Ms[redacted] Binnie
20/07/2023 Weight: [redacted] kgs BMI: 26.2 O/E - weight Dr Gp Stirling
19/07/2023 Triage Ms[redacted] Binnie - No Data Recorded
19/07/2023 Triage Ms[redacted] Binnie - No Data Recorded
17/07/2023 Triage Ms[redacted] Binnie
17/07/2023 Weight: 71.1 kgs BMI: 26.1 O/E - weight Dr Gp Stirling
17/07/2023 Seen by health care assistant Seen in clinic for bloods
Successfully obtained from L arm
Sent to labs

[redacted] Binnie
HCA
17/07/2023 Dr Gp Stirling
16/07/2023 Triage Ms[redacted] Binnie - No Data Recorded
14/07/2023 Other Miss[redacted] Mckeich
14/07/2023 Consultation ANP entry, request to discontinue bisacodyll as patient refusing, done Miss[redacted] Mckeich
14/07/2023 Triage Ms[redacted] Binnie - No Data Recorded
14/07/2023 Third Party Consultation Mr[redacted] Mccallum
14/07/2023 Document Image Docman Attachment
14/07/2023 Administration Clinical Letter HMP Stirling X-Ray X-Ray Referral Mr[redacted] Mccallum
14/07/2023 Triage Ms[redacted] Binnie - No Data Recorded
14/07/2023 Other Miss[redacted] Mckeich

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14/07/2023 Consultation ANP entry, seen patient, c/o few issues:

1. acne to face, requesting treatment, requesting lymecycline, unable to use benzoyl peroxide - allergy - rash, lymecycline prescribed.

2, requesting throat spray for throat pain, occasional pain to throat when eating certain foods, usually when ubale to get gluten free, mouth examined, throat red, no inflammation, no pus, T37.1, centor score 0, rx difflam x 7 days

3. Feels tired and been loosing weight
present for last 3 weeks
concerned something is wrong
note weight March 23 75kg
weight today 70.4kg
Believes there is something sinister going on
o/e looks well
talking whole sentences
gait normal
has good appetite, states eats regularly (hx eating disorders)
drinking plenty fluids
mouth - throat slightly red/painful - swab taken
swallowing - no issues
vomited 2 days ago, vomited after visit - had ate packet of crisps - foodstuff/bile
Not vomited since but nauseous
feels gets sweats when walking about
new pain to abdomen - pain actually on back when patient pointed to area
pain on palpation back, midline, right side
no flank pain
abdo soft and non tender
no gaurding/referred pain
bowel sounds present
bladder - urine - passing more than normal, no pain, slight odour
recent urine dip NAD
bowels: ok, normal stool, last moved yesterday, moves once daily, no blood
SH - last screen few months [redacted] - clear - states not put self at risk since
Imp: ? msk pain, patient advised
? reason for weight loss over last 3mths
Plan: listed patient for bloods - FBC, U&E, LFT, CRP, TFT, Hba1c,
for 2 weekly weight
worsening advice given

4. Patient also c/o lumps to abdomen
o/c numerous stretch marks over abdomen
on palpation 3 small lesions felt lower abdomen just above pelvic area
small circular lesions
smooth borders
appear attached to underlying skin
Imp: ? lypoma/small cyst
Patient believes they may be sinister, anxious
Agreed for referral for ultrasound
worsening advice given
Miss [redacted] Mckeich

13/07/2023 Triage Ms [redacted] Binnie
13/07/2023 O/E - temperature level = 36.8 degC Dr Gp Stirling
13/07/2023 O/E - pulse rate 79 beats/min Dr Gp Stirling
13/07/2023 Pulse oximetry 97 % Dr Gp Stirling
13/07/2023 11:29.00 BP 102 / 70 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
13/07/2023 Weight: 70.5 kgs BMI: 25.8 O/E - weight Dr Gp Stirling
13/07/2023 Seen by health care assistant Seen in HCA clinic for urinalysis and full set obs
Georgina disguntled to see it was not a dr/anp but explained that she would need to see a hca/nurse initially to know if it is suitable to see a dr and she said 'ive seen yous fucking hunners of times'
Georgina complaining of sore back and sides - shooting pains - asked me to include this in notes as she said can be unbearable at times
Urinalysis negative
Observations recorded:

[redacted] Binnie
HCA
13/04/2023 Dr Gp Stirling
11/07/2023 Triage Ms [redacted] Binnie
11/07/2023 Administration Actions from GP/ANP clinic
Nil bloods required
Listed for urinalysis, full set of observations

[redacted] Binnie
HCA
11/07/2023
Dr Gp Stirling
11/07/2023 Other Dr [redacted] Kildare
11/07/2023 Ongoing review ANP J.McKeich/GP J.Kildare
Actions
Triage entry noted below - [redacted] more information here and routine observations before it can be decided if bloods are necessary - at the moment I dont feel bloods are indicated Dr [redacted] Kildare
10/07/2023 Third Party Consultation Mr [redacted] Mccallum
10/07/2023 Document Image Docman Attachment
10/07/2023 Administration Administration HMP Stirling Optician Patient Response Letter Mr [redacted] Mccallum
10/07/2023 Triage Ms Keleigh Mournian

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10/07/2023 Consultation
S-Seen in triage room
B-Submitted a self referral requesting bloods to be taken
A-Patient states she feels tired and lethargic all the time and feels like she overheats at times.
R-Will list for GP/ANP actions to query if any bloods required?

Keyleigh Hale
PCT
10.07.2023
10.45 Dr Gp Stirling
06/07/2023 Triage Ms [redacted] Rennie
06/07/2023 Self-referral PCT - MM - Would like bloods taken and copy of cell markers. Admin will check if there are any cell markers issued by HMP STirling and forward these to the patient Ms [redacted] Rennie
05/07/2023 Other Miss [redacted] Mckeich
05/07/2023 Consultation ANP actions, requesting bisacodyl monthly and bonjela for cold sores. No concerns from MHT, bisacodyl changed to monthly and prescribed bonjela. Miss [redacted] Mckeich
05/07/2023 Other Miss [redacted] Mckeich - No Data Recorded
04/07/2023 Third Party Consultation Mr S [redacted] Mccallum
04/07/2023 Document Image Docman Attachment
04/07/2023 Administration Administration HMYOI Polmont Transfer Paperwork Mr [redacted] Mccallum
03/07/2023 Triage Ms Lyndsay Mccracken
03/07/2023 Self-referral recieved self referral form ? if Georgina could possibly have her bisacodyl 5mg tablets changed to monthly instead of weekly.
I have had a look at [redacted] kardex and it is prescribed she can take 1-2 tablets per day. She reports on referral that she takes 1 tablet per night however, feels if she recieved monthly's she would have enough to be able to take 2 tablets where necessary.
It is not documented in kardex how many tablets are issued on a weekly basis.
I will list for GP/ANP actions to ? if changing to monthly is an option.

PCT S/N Lyndsay McCracken
12.14 Ms Lyndsay Mccracken
03/07/2023 Triage Ms Lyndsay Mccracken
03/07/2023 Seen by triage nurse S- self referral recieved
B- Listed for review of mouth ulcers from dental referral
A- Seen Georgina in clinic this morning for review. Stated she had put a dental rferral in as her dentures are causing her to develop mouth ulcers.
Also when in clinic Georgina reported she feels like she has a urine infection. Urine test obtained and tested which was negative.
Encouraged to drink more fluids.
R- List for ANP/GP actions for bonjella for mouth ulcer until dentist has appointment available

PCT S/N Lyndsay McCracken
09.54 Ms Lyndsay Mccracken
03/07/2023 Triage Ms Lyndsay Mccracken - No Data Recorded
30/06/2023 Triage Mr Connor [redacted]y - No Data Recorded
29/06/2023 Triage Ms Susan Payne
29/06/2023 Administration Listed for PCT clinic Monday 03/07/23

PCT [redacted]
13:14
29/06/23 Dr Gp Stirling
29/06/2023 Triage Mr [redacted] Mccallum
29/06/2023 Self-referral mouth ulcers and sore. SP Mr [redacted] Mccallum
28/06/2023 Triage Ms Lyndsay Mccracken
28/06/2023 Seen by triage nurse S- self referral recieved
B- Ongoing skin [redacted] to face.
A- [redacted] Georgina in clinic this [redacted] regarding skin [redacted]. Reports she has been awaiting appointment for skin clinic since she has been in both Corntonvale and Lilias.
Georgina had full face of make up on therefore unable to review appropriately. She states she would like commenced back on antibiotics however have advised skin would need reviewed first. She is happy with this.
Georgina also reports she has teeth issues and has been advised to self refr for dentist.
R- List for ANP Murphy to review skin on return to HMP Stirling.

PCT S/N Lyndsay McCracken
10.52 Ms Lyndsay Mccracken
27/06/2023 Triage Ms [redacted]
Letter on: 27/06/2023 type: Referral Smear Results
22/05/2023 reported 27/06/2023 Cervical smear result HPV - Human papillomavirus test negative recall due: 22/05/2028 Ms [redacted]
22/05/2023 Recall on 22/05/2028 for Cervical smear result with Ms [redacted] Status: Outstanding
27/06/2023 Triage Ms Sus[redacted] Payne
27/06/2023 Consultation Listed for PCT clinic 28/06/23 : Skin issues

PCT [redacted]
11:50
216/06/23 Dr Gp Stirling
26/06/2023 Triage Mr Sharon Mccallum
26/06/2023 Self-referral Skin Clinic
Optician Self-referral - Broken/lost glasses. Mr [redacted] Mccallum
22/06/2023 Third Party Consultation Ms [redacted] Rennie
22/06/2023 Document Image Docman Attachment
22/06/2023 Administration Clinical Letter HMP Cornton Vale Medical Marker Ms [redacted] Rennie
22/06/2023 Triage Ms Jill Ramsay
22/06/2023 Consultation Medical marker put in place for dietry requirements.
PCT DTL JRamsay 22/6/23 07.46 Dr Gp Stirling
22/06/2023 Triage Ms Jill Ramsay - No Data Recorded
22/06/2023 Triage Ms Jill Ramsay - No Data Recorded

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

22/06/2023 Triage Ms Jill Ramsay : No Data Recorded
19/06/2023 Triage Ms Michelle Morris
19/06/2023 Transfer profile form completed Georgie is fine with being back. She is excited that she only has 24 months of her sentence left and is glad she is spending it at HMP Stirling. [redacted] does not feel like she requires any input or support from mental health or addictions and is aware of how to place referrals for services. Dr Gp Stirling
19/06/2023 Pulse oximetry 98 % Dr Gp Stirling
19/06/2023 O/E - rate of respiration = /minute Dr Gp Stirling
19/06/2023 O/E - temperature level = 37.1 degC Dr Gp Stirling
19/06/2023 O/E - pulse rate 90 beats/min Dr Gp Stirling
19/06/2023 13:54.00 BP 108 / 72 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
19/06/2023 Height: 1.65 metres O/E - height Dr Gp Stirling
19/06/2023 Weight: 72.9 kgs BMI: 26.7 O/E - weight Dr Gp Stirling
19/06/2023 No apparent risk of suicide Strongly denies any thoughts of suicide and is aware how to refer herself should things change. Dr Gp Stirling
19/06/2023 No thoughts of deliberate self [redacted] Denies any thoughts of [redacted] Dr Gp Stirling
19/06/2023 No drug therapy prescribed [redacted] has arrived with a kardex but we do not have her medications yet as her posessions are still in transit with SPS staff. Dr Gp Stirling
19/06/2023 Allergy Moderate H/O: non-drug allergy Allergic to lactose and gluten and requires non spice food. Medical marker will be completed. Dr Gp Stirling
19/06/2023 Third Party Consultation Mrs [redacted]
19/06/2023 Document Image Docman / [redacted]
19/06/2023 Administration Kardex/Recording Sheet HMPYOI Polmont Pharmacy Clinical Mrs [redacted]
17/06/2023 Triage Mr Steven Blunt
17/06/2023 Administration Patient record accessed for person escort record.

[redacted] Blunt MHT 17/6/2023 Dr Gp Stirling
26/05/2023 Triage Ms [redacted]
26/05/2023 Seen in [redacted] health clinic seen regardin vaginal dryness, no evidence os same during smear, or signs of irritation, keen for lubricant, advised bettert o try and resolve cause if becomes ongoing issue, awati results of recent testing and can self refer back if wishes. R [redacted] - sexual health nurse
26/05/2023 10:29 Ms [redacted]
22/05/2023 Triage Ms [redacted] Lawson
22/05/2023 Recall on 14/08/2023 for Depo-provera injection given with Ms [redacted] Lawson Status: Complete
22/05/2023 Depo-provera injection given First service recall due: Claim Expiry Date: Batch GK5704, EXP 02/2025.
No UPSI since last period. Has had previously with good effect, other options discussed. Ms Rachel [redacted]
22/05/2023 Liquid ba[redacted]tology screening Ms [redacted]
12/05/2023 Triage Ms [redacted]
12/05/2023 Ongoing review ANP Actions
ANP K [redacted]
See below entry 11/05/23 DC SN review
Imp otis externa px gentamicion 0.3% / hydrocortisone ear drop 4-5 x daily 5 days not resolving list for ANP / GP review
Imp season allergies effect s eye px sodium cromglicate2% eye drops
MSU clear. Nil action required continue to push fluids
For review if not resolving

12/05/2023 Triage Mr [redacted] Carruthers
12/05/2023 Consultation - returned urine sample - ward tested and unremarkable .
D.Carruthers s/n 09.50 hours Mr [redacted] Carruthers
11/05/2023 Triage Mr [redacted] Carruthers
11/05/2023 Consultation S - seen in health centre
B - nurse clinic appointment
A - c/o ear ache particularly left ear - also sore throat - O/E - nil signs infection to throat - nil inflammation - nil pus or enlargement to tonsils - glans to neck not palpable - right ear ear drum intact - nil signs infection - left ear ear drum intact but evidence of inflammation - also concerned has UTI - strong smwelling urine.Also c/o early hayfever streaming eyes - states oral antihistamine not generally effective.
R - 1 IMP - [redacted] externa left ear - ANP actions gentisone ear drops or equivalent.
2 - opticrom eye drops or equivlant - ANP actions.
3 - universal container for return of urine sample - for ward test in the a.m - advised push fluids.
D.Carruthers S/N 14.35 hours Mr [redacted] Carruthers
11/05/2023 Triage Ms [redacted] Muir
11/05/2023 Weight: 75 kgs BMI: 27.5 O/E - weight Ms [redacted] Muir
11/05/2023 Seen by health care assistant [redacted] in hall for week 4 weight check. Liusted for ANP to review.
[redacted] Muir
HCA
1140
Ms [redacted] Muir
11/05/2023 Triage Ms [redacted] Muir - No Data Recorded
11/05/2023 Triage Mrs [redacted] Taylor
11/05/2023 Self-referral Dentist Dr Gp Stirling
10/05/2023 Triage Mrs [redacted]
10/05/2023 Self-referral [redacted] Health/BBV - Well Person Clinic - "Need smear done asap (overdue)" Added to SH waiting list and card sent to patient to confirm. Mrs [redacted]
05/05/2023 Triage Ms [redacted]
Letter on: 05/05/2023 type: Referral SH Results
05/05/2023 Hepatitis C antibody test negative = Ms [redacted]
05/05/2023 HIV negative = Ms [redacted] Lawson
05/05/2023 Hepatitis B surface antigen negative = Ms [redacted]
05/05/2023 Syphilis titre test negative = Ms [redacted]
05/05/2023 Triage Mr [redacted] Mccallum
05/05/2023 Self-refe[redacted] sore throat and head. Dr Gp Stirling
04/05/2023 Triage Ms [redacted] Penman
04/05/2023 Weight: 76 kgs BMI: 27.9 O/E - weight Ms [redacted] Penman

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04/05/2023 Seen by health care assistant Saw Georgina in [redacted] 2 to take her week 3 weight of 4 weeks as requested by AMP [redacted]
Her weight is 76kg. Have relisted her for her 4th weight on 11/5/23.

HCA
[redacted] penman 14.08 Ms [redacted] Penman
02/05/2023 Other Miss [redacted] Mckeich
02/05/2023 Consultation ANP entry J McKeich/K [redacted]
Requesting QV wash, prescribed Miss [redacted] Mckeich
27/04/2023 Triage Ms [redacted] Binnie - No Data Recorded
27/04/2023 Triage Ms [redacted] Thomson
27/04/2023 Seen by health care assistant in [redacted] 2 for weight.
[redacted]
HCA
16.20. Dr Gp Stirling
27/04/2023 Triage Ms [redacted] Thomson - No Data Recorded
22/04/2023 Triage Ms [redacted] - No Data Recorded
21/04/2023 Triage Ms [redacted] Binnie - No Data Recorded
21/04/2023 Triage Ms [redacted]
21/04/2023 Weight: 77 kgs BMI: 28.2 O/E - weight Dr Gp Stirling
21/04/2023 Seen by health care assistant in [redacted] 2 for weight.
Donna [redacted]
HCA
11.50. Dr Gp Stirling
21/04/2023 Third Party Consultation Ms Jane Rennie
21/04/2023 Document Image Docman Attachment
21/04/2023 Result Results Microbiology Ms [redacted] Rennie
20/04/2023 Triage Ms [redacted] Binnie - No Data Recorded
17/04/2023 Triage Ms Ra [redacted] La [redacted]
17/04/2023 Seen in [redacted] health clinic [redacted] for routine BBV screen.
Smear due however has period so relisted.
R [redacted] - [redacted] health nurse
17/04/2023 11:16 Ms [redacted]
17/04/2023 Hepatitis C antibody test = Ms [redacted]
17/04/2023 Human immunodefic.viral test = Ms [redacted]
17/04/2023 Hep B surface antigen test = Ms [redacted]
17/04/2023 Syphilis infectious titre test = Ms [redacted]
17/04/2023 Other Miss [redacted] Mckeich
17/04/2023 Administration - note ANP entry - HCA has listed for weekly weights over the next month.
D.Carruthers S/N 12.00 hours Miss [redacted] Mckeich
17/04/2023 Consultation ANP entry, approached by nursing staff, patient states had bloods done & looking for results, see entry 13/2/23:
FBC ok
BS ok
TFT ok
bone profile ok
U&E ok
LFT ok
folate ok
B12 ok
Patient states was loosing weight, curent weight 75kg (weight 13/2/23 81.6kg,) for weekly weights x 4 weeks then list for ANP actions.
for weekly weights x 4 weeks. Miss [redacted] Mckeich
17/04/2023 Triage Ms K [redacted] Penman
17/04/2023 Seen by health care assistant Have listed Georgina for 4 weekly weights in the hca clinic as per AMP, these are 20/4 27/4 4/5 11/5.
Pass on the results to Jackie once taken.

HCA
[redacted] penman 10.45 Ms [redacted] Penman
11/04/2023 Triage Ms [redacted] Rennie
11/04/2023 Self-referral SHC - Well person - Would like a smear Ms [redacted] Rennie
04/04/2023 Third Party Consultation Ms [redacted] Rennie
04/04/2023 Document Image Docman Attachment
04/04/2023 Administration In possesion medication check form HMPYOI Polmont Health Centre Pharmacy Ms [redacted] Rennie
01/04/2023 Triage Ms [redacted] Binnie
01/04/2023 Seen by health care assistant for spot check medication.

Amitriptlyine 75mg - Should be remanining x12 , Actual remaining x15
Quetiapine 150mg - Should be remanining x4 Actual remaining x5.

Response to discrepancy - previous prescription overlapped

[redacted] Binnie
HCA
01/04/23

No explanation for being short x1 of each.
Dr Gp Stirling
29/03/2023 Third Party Consultation Mrs Lisa Taylor
29/03/2023 Document Image Docman Attachment
29/03/2023 Administration Administration HMYOI Polmont Medical Diet Requistion Mrs [redacted]
29/03/2023 Triage Ms Jill Ramsay
29/03/2023 Consultation Medical marker for gluten and lactose intolerance completed
PCT SN JRamsay 29/03/2023 13.10 Dr Gp Stirling
28/03/2023 Other Dr [redacted] Kildare

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28/03/2023 Ongoing review ANP K [redacted] J.Kildare
Actions
[redacted] requesting Etodolac and Peppermint caps to be made in possession - currently supervised - Kardex amended as requested Dr [redacted] Kildare
24/03/2023 Other Miss [redacted] Mckeich
24/03/2023 Consultation ANP actions, request from PCT to change supervised meds to inpossession, patient been moved to fevel 2, no recent [redacted] on vision re med compliance, discussed with MHT, no [redacted] meds moved to weekly, listed for med check. Miss [redacted] Mckeich
23/03/2023 Other Miss [redacted] Mckeich
23/03/2023 Consultation ANP entry J McKeich/L Kane
Late entry: kardex transcribed following admission to Polmont. Miss Jackie Mckeich
23/03/2023 Clinic Ms Kaitlin Currie
23/03/2023 Mental health admin. NOS Georgina was listed to see writer - RMN - 17/03/2023 however writer had to cover another establishment. Rescheduled Georgina's mental health assessment to today however she has been transferred back to Polmont. Discharged from the MHT. Ms Kaitlin Currie
22/03/2023 Triage Ms Abby Rafferty
22/03/2023 Transfer profile form completed
Transfer of this 31 year old lady from Lillias unit, reports to have been downgraded due to [redacted] contacting unit, and the risk this poses to her. States is only supposed to be here for a few days until this can be discussed at RMT.
Disgruntled at being held within [redacted] 1.
Engaged well, mood reactive and subjectivley denied any concerns.
Reports to be lactose and gluten intolerant.
Nil else signiicant health issues.
Reports numerous MH diagnosis but did not wish to discuss this at lenght today as she feels she is managing her mental health well currently.
Strongly denied current plans, intent of deliberate self harm or suicide. Advised she would seek support should her mental health deteriorate

Would like referral to SH nurse to have smear completed.

Plan-
ANP has kardex to re-wrtie prescriptions
Refer to SH

ARafferty
RMN
22/03/23 Ms [redacted] Rafferty
22/03/2023 No apparent risk of suicide Strongly denied current thoughts, plan or intent of suicide.
Reports history of suicidality over 10 years ago however nil recent. Advises she would seek staff support if her mental state should decline.
Ms [redacted]
22/03/2023 No thoughts of deliberate self [redacted] Strongly denied any current thoughts or intent of deliberate self [redacted] Ms [redacted]
22/03/2023 Prescription by GP Prescribed medications.
Peppermint capsules
Difflam Spray
Beclometasone nasal spray
Etodolac
Bisocodyl
Quetiapine
Amitriptyline
Pzotifen
Fexofenadine
Famotadine
Cetirizine

Also arrived with vitamins she reports she bought from canteen:
Cod liver oil
Vitamin D3
Vitamin C
Multivitamin & Iron Ms [redacted]
22/03/2023 Pulse oximetry 96 % Ms Abby [redacted]
22/03/2023 O/E - rate of respiration = 17 /minute Ms [redacted]
22/03/2023 O/E - temperature level = 36.5 degC Ms [redacted]
22/03/2023 O/E - pulse rate 78 beats/min Ms [redacted]
22/03/2023 15:39.00 BP 114 / 80 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Ms [redacted]
22/03/2023 Height: 1.65 metres O/E - height Ms [redacted]
22/03/2023 Weight: 75 kgs BMI: 27.5 O/E - weight Ms [redacted]
22/03/2023 Triage Ms [redacted]
22/03/2023 Refer for Refer to community [redacted] health advisor Action: 12/04/2023 Text Ms [redacted]
22/03/2023 Prescription by GP Kardex recieved on transfer Ms [redacted]
22/03/2023 Triage Ms [redacted] Queen
22/03/2023 Consultation Georgina attended health centre this morning complaining of ongoing throat issues.
States she ate a meal last night and still feels as if the food is stuck in her throat
Noi issues with breathing, swallowing fluids, speaking
Will book her in for GP attend anywhere this am Ms [redacted] Queen
14/03/2023 Triage Ms [redacted]
14/03/2023 Smoking cessation advice for Smoking Attended stop vape support session in HUB at 1.45pm. Stated interested in possibly stopping vape but is unable to tolerate nicotine patches due to sensitive skin. Advised on structure of stop vape group service, discussed possible access to nicotine lozenges if skin reaction documented on Vision records. Georgina stated may attend group next week. Ms [redacted] Mulheron
13/03/2023 Triage Ms [redacted] No Data Recorded
13/03/2023 Triage Ms [redacted]

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13/03/2023 Patient reviewed ongoing throat issue - seen last 13/2.
still sore. states taking PPI since then and no good. denies specific acid reflux type pain but throat [redacted] sore mnost of the time. no food or fluid sticking eating drinking as normal
no weight loss. occ ear pain - didnt offer present on asking. no discharge from ear or hearing issues.
no cough
smokes but is now vaping
[redacted] had throat cancer was a smoker.

allergiues nasally, on cetirizine but not much help. ongoing issue

o/e throat NAD no neck lumps ears both clear

reassured no red flags re throat., advised best she can do is stop smoking. aware of this . bloods from feb [redacted] normal
can check for h pylori incase acid reflux [redacted] - stop PPI 2 weeks famitidine during this time. then hpylori sample
can restart PI after this if needed

nasal spray incase post nasal drip an attribute
stop cetirzine and start fexofenadine Dr [redacted] Usher
09/03/2023 Clinic Ms Kaitlin Currie
09/03/2023 Administration Geoamy cancelled transport for Georgina's dental appointment this morning. Writer contacted the dental hospital to rearrange this appointment. Further appointment arranged for 29/03/2023 at 3.30pm. Ms Kaitlin Currie
02/03/2023 Third Party Consultation Mr [redacted] Mccallum
02/03/2023 Document Image Docman Attachment
02/03/2023 Administration Clinical Letter HMP Cornton Vale Care and Treatment Plan Asthma Mr [redacted] Mccallum
01/03/2023 Clinic Ms Kaitlin Currie
01/03/2023 Mental health admin. NOS Attempted to see Georgina for the purpose for completing a mental health assessment however she was unavailable due to seeing another service. Will relist for next available appointment. Ms Kaitlin Currie
01/03/2023 Clinic Ms [redacted] Currie
01/03/2023 Mental health admin. NOS Mental health referral form received, submitted 15/02/2023 however just received by MHT to be screened. Georgina requesting to speak to a mental health nurse. Several email correspondence has been made regarding Georgina from SPS and social work regarding Georgina displaying manipulative behaviours and previous input for low mood and anxiety in another establishment. Allocated routine assessment, letter sent. Ms Kaitlin Currie
28/02/2023 Surgery consultation Dr [redacted]
28/02/2023 Administration bloods NAD (including TFTS) Dr Joe [redacted]
27/02/2023 Surgery consultation Dr Joe [redacted] - No Data Recorded
24/02/2023 Triage Ms [redacted]
24/02/2023 Consultation Georgina attended the health centre - complaining of feeling genreally unwell with dizzy spells.
OB:
136/84, P 95bpm, Sats 98%, Temp 36.4 RR 14
Obs stable, states eating drinking normally, sleeping well, no complaints of pain
Advised to rest today if feeling unwell/dizzy. Worsening statement given Ms [redacted] Campbell
21/02/2023 Triage Ms [redacted]
21/02/2023 Dental care Dental appointment rescheduled for Thursday 9/3/23 @9.30am Ms [redacted] Campbell
21/02/2023 Third Party Consultation Ms Nicola [redacted]
21/02/2023 Document Image Docman Attachment
21/02/2023 Result Results Haematology Ms [redacted]
21/02/2023 Third Party Consultation Ms Nicola [redacted]
21/02/2023 Document Image Docman Attachment
21/02/2023 Result Results Biochemistry Ms [redacted]
17/02/2023 Triage Ms [redacted]
17/02/2023 Dental c[redacted]de for routine dental care at Glasgow dental hospital - 28/02/23 @9am - SPS aware to arrange transport Ms [redacted]
17/02/2023 Triage Ms [redacted] - No Data Recorded
16/02/2023 Triage Ms [redacted] Rennie - No Data Recorded
15/02/2023 Triage Ms Christine Campbell
15/02/2023 Administration Self referral received for Mental health - passed to MH nurse.
Self referral received for dentist - second referral for broken plate, advised Lilias still under emergency dental treatment only and she will be added to waiting list. Ms [redacted] Campbell
15/02/2023 Triage Ms [redacted]
15/02/2023 Blood sample taken = As per GP request
Venous blood obtained from right arm - sent to lab Ms [redacted]
13/02/2023 Follow-up/routine visit Ms Amy Swandells
13/02/2023 Occupational therapy Met with Georgina in multi-purpose room 2 from 13:00 - 13:40. Explained current OT role is information gathering to support service development using OSA (Occupational Self Assessment) and activity checklist. Advised Georgina plan to complete assessment to support info gathering, and if occupational need is identified, follow this up once OT service is active.
Georgina gave verbal consent to the above and partake in assessment today.
Completed OSA and activity checklist. Areas Georgina feels she has most difficulty with and would like to prioritise are managing her finances, solving problems, getting done what she needs to do and having a satisfying routine. From the activity checklist, her 3 top activities of interest that she would like to pursue in the future are paid employment (full/part time), Hiking/hill walking and seeing family and friends.
Advised Georgina writer felt they would likely benefit from OT given above described difficulties with daily activity, to maximise participation.
Will follow up in the future as appropriate when OT service is active. Georgina agreeable with this.

Ms Amy Swandells
13/02/2023 Surgery consultation Dr [redacted] - No Data Recorded
13/02/2023 Surgery consultation Dr [redacted] Daly - No Data Recorded
13/02/2023 Surgery consultation Dr [redacted] - No Data Recorded
13/02/2023 Surgery consultation Dr [redacted]
13/02/2023 Consultation FTF with [redacted] nurse
weight 81.6, says has trouble loosing weight and poor energy
bowels fine
chronic sore throat, says prev ENT hospital appt NAD
on examination no masses, throat a bit red, is on nsaid so ? reflux. omeprazole added, with difflam. no diyphagia. Systemically well
for UEs LFTS TFTS bone gluc FBC vit B12/folate Dr [redacted]
10/02/2023 Surgery consultation Dr Joe Daly

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10/02/2023 SCI Referral Letter
10/02/2023 Surgery consultation Dr [redacted] - No Data Recorded
08/02/2023 Triage Ms [redacted] Campbell
08/02/2023 Administration Discussed with Dr [redacted] this morning, Georgina will need to be seen physically to have throat examined - as no further complaints noted will list for Mon 13/02/23 Ms [redacted] Campbell
08/02/2023 Surgery consultation Dr [redacted] - No Data Recorded
07/02/2023 Clinic Ms Kaitlin Currie
07/02/2023 Mental health admin. NOS Notes accessed for RMT purposes. Ms Kaitlin Currie
04/02/2023 Clinic Ms K [redacted] Currie
04/02/2023 Seen by nurse Georgina attended the health centre asking for a brief conversation regarding ongoing issues with her throat. States she has been experiencing the feeling of some food/fluids being digesting wrong and causing her to cough. Advised to keep a diary o what she is eating to see if any particular foods or liquids are difficult to swallow and this can be discussed with the GP at her appointment
08/02/2023. Ms [redacted] Currie
01/02/2023 Triage Miss [redacted] Mctaggart
01/02/2023 Consultation Seen in HC. Feels as if struggling to lose weight, regardless of eating better and exercising more. Asking re blooc test to check thyroid levels. Will add patient to virtual GP clinic for review. Miss Lauren Mctaggart
27/01/2023 Triage Ms Christine Campbell
27/01/2023 Medication satisfactory Spot check carried out today on weekly medication.
HCSW L McTaggart present
All medication checked and correct.
Spot check form signed and scanned to docman. Ms [redacted]
27/01/2023 Surgery consultation Dr [redacted] Daly - No Data Recorded
25/01/2023 Surgery consultation Dr [redacted] - No Data Recorded
25/01/2023 Surgery consultation Dr [redacted]
25/01/2023 Consultation telehealth, chronic facial /torso acne resistant to multiple oral therapies
agreed routine derm referal Dr [redacted]
25/01/2023 Triage Ms [redacted] Campbell - No Data Recorded
23/01/2023 Clinic Miss Katelin [redacted]
23/01/2023 Urine dipstick test = Urine tested using miltistix

LEU= NEG
NIT= NEG
PRO= NEG
PH= 5.0
BLOOD= NEG
SG=1.030
KET= NEG
GLU= NEG

NIL SIGNS OF UTI
SAMPLE DESTROYED Miss Katelin [redacted]
22/01/2023 Triage Ms Christine [redacted]
22/01/2023 Patient advised re diet Advice Georgina asking if we can prescribe snack/chocolate s as she was not able to buy gluten free snacks on her weekly shopping budget.
When asked what she did in Corton Vale she advised she just "posioned" herself and ate regular chocolate as no alternative was supplied on canteen.
Advised not to do this and that we cannot prescribe anything other than basic food (which are already preacribed). Georgina states we have to have a meeting with SPS to tell them she has to be given money/access to snacks.
Advised Georgina this would not be appropriate as SPS are aware of her dietary requirements and we cannot interfer with shopping and budgets based on preference. Ms [redacted]
22/01/2023 Urine smell = Georgina attended health centre today - complaining of dark, smelly urine. States started yesterday. White top bottle given to provide sample tomorrow. For dipstick test Ms [redacted] Campbell
21/01/2023 Triage Ms [redacted] Campbell
20/01/2023 Dental care Referral received for repair of denture plate.
Georgina aware that we are only able to accomadate emergency dental issues at present. Ms [redacted] Campbell
18/01/2023 Third Party Consultation Ms [redacted] Rennie
18/01/2023 Document Image Docman Attachment
18/01/2023 Administration Kardex HMP Corrton Vale Pharmacy Ms [redacted] Rennie
18/01/2023 Triage Ms Christine Campbell
18/01/2023 Transfer profile form completed TTM paperwork completed by c [redacted]
Georgina wishes to discuss current acne treatment with GP.
Listed for next clinic 25/01/23 Ms [redacted] Campbell
18/01/2023 Pulse oximetry 98 % Ms [redacted] Campbell
18/01/2023 O/E - rate of respiration = 17 /minute Ms Christine Campbell
18/01/2023 O/E - temperature level = 36.4 degC Ms Christine [redacted]
18/01/2023 O/E - pulse rate 68 beats/min Ms [redacted]
18/01/2023 12.09.00 BP 120 / 78 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Ms [redacted]
18/01/2023 No apparent risk of suicide Ms [redacted] Campbell
18/01/2023 No thoughts of deliberate self [redacted] Ms [redacted] Campbell
18/01/2023 H/O: deliberate self harm reports nil self [redacted] for 6 yrs Ms [redacted] Campbell
18/01/2023 H/O: attempted suicide Nil since 2012- reports attempted hanging Ms [redacted] Campbell
18/01/2023 No signif H/O psych. disorder of Ms [redacted]
18/01/2023 Prescription by GP Kardex on transfer Ms Christine [redacted]
18/01/2023 Allergy Moderate H/O: non-drug allergy Ms [redacted] Campbell
18/01/2023 Height: 1.65 metres O/E - height Ms [redacted]
18/01/2023 Triage Ms [redacted] Rennie - No Data Recorded
18/01/2023 Third Party Consultation Ms [redacted] Rennie
18/01/2023 Document Image Docman Attachment
18/01/2023 Administration Transfer Paperwork Corrton Vale Administration Ms [redacted] Rennie
18/01/2023 Triage Ms [redacted] Rennie - No Data Recorded
17/01/2023 Third Party Consultation Ms [redacted] Rennie
17/01/2023 Document Image Docman Attachment
17/01/2023 Administration Kardex HMP Corrton Vale Pharmacy Ms [redacted] Rennie
17/01/2023 Triage Ms [redacted]

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17/01/2023 Consultation See in HC at 10:40

Urine sample back as a negative. Georgina was not sure why she was attending the clinic. She enquired about having a lactose free diet prescribed by Lloyds. I have checked previous notes re lactose intolerance. No documentation on formal tests been undertaken regarding this. Patient self reports lactose intolerance.
PCT [redacted]
11:14
17/01/23 Dr Gp Stirling
16/01/2023 Triage Ms Lyndsay Mccracken - No Data Recorded
13/01/2023 Triage Ms Laura Kilpatrick
13/01/2023 Administration Listed for pct nurse to review why urine was obtained as requested by anp
[redacted] Kilpatrick
HCA
13/01/23
16:10hrs Dr Gp Stirling
13/01/2023 Triage Ms [redacted]
13/01/2023 Ongoing review no info as to why urine sample was obtained no nurse triage
RBC 955
? menstruating
can nursing staff please triage and asses what the patient requires.
12/01/2023 Third Party Consultation Ms [redacted]
12/01/2023 Document Image Docman Attachment
12/01/2023 Administration Microbiology Results Forth Valley Royal Hospital Microbiology Ms Sonja Kelly-Gutowski
11/01/2023 Triage Mr [redacted] - No Data Recorded
09/01/2023 Triage Ms [redacted] Cleary
09/01/2023 Seen by health care assistant
Georgina was at the clinic to give a urine sample for testing for urynalasis but was unable to provide this i gave her a bottle away to hand back in .
Michelle Cleary
HCA
09/01/2023
11.00 Ms [redacted] Cleary
06/01/2023 Triage Ms [redacted] Kilpatrick
06/01/2023 Failed encounter Georgina was listed for urine sample to be sent away to labs for infection?? However officer made writer aware that Georgina is currently at work and unable to come to appointment at this time. I have relisted Georgina in HCA clinic with regards to same.
[redacted] Kilpatrick
HCA
06/11/2023
10:59HRS Dr Gp Stirling
04/01/2023 Triage Ms Jane Rennie
04/01/2023 Self-referral Nurse Triage - MM - Nose bleeds, vomiting, and would like a urine test Ms [redacted] Rennie
30/12/2022 Triage Ms Jill Ramsay
30/12/2022 Consultation Seen in clinic this am, enquiring about a lactose free food list from pharmacy, I will look into this. Also stated throat was sore, nil redness or puss spots noted on back of throat, glands not swollen and temp 36.6, worsening advice given.
PCT SN JRamsay 30/12/2022 09.51 Dr Gp Stirling
30/12/2022 Triage Ms Jill Ramsay - No Data Recorded
22/12/2022 Third Party Consultation Mr [redacted] Mccallum
22/12/2022 Document Image Docman Attachment
22/12/2022 Administration Clinical Letter HMP Cornton Vale Health Care Marker Mr [redacted] Mccallum
22/12/2022 Third Party Consultation Ms Jane Rennie
22/12/2022 Document Image Docman Attachment
22/12/2022 Administration Clinical Letter HMP Cornton Vale Ophthalmology Ms [redacted] Rennie
22/12/2022 Triage Ms Jane Rennie
22/12/2022 Administration NOS Peebles [redacted] staff have enquired why Georgina is wearing blue tinted glasses and have asked for a medical marker to be completed. Optician and Team leader have been contacted. Ms [redacted] Rennie
21/12/2022 Triage Ms [redacted] Binnie
21/12/2022 Administration Glasses provided to Georgina and signed for

[redacted] Binnie
HCA
21/12/2022 Dr Gp Stirling
21/12/2022 Triage Mr [redacted] Mccallum
21/12/2022 Self-referral Nurse/Doctor - Lactrol dietaries. SJ Mr [redacted] Mccallum
13/12/2022 Third Party Consultation Ms [redacted] Rennie
13/12/2022 Document Image Docman Attachment
13/12/2022 Administration Clinical Letter HMP Cornton Vale Medical Marker Ms [redacted] Rennie
13/12/2022 Triage Ms [redacted] Binnie - No Data Recorded
13/12/2022 Third Party Consultation Mr [redacted] Mccallum
13/12/2022 Document Image Docman Attachment
13/12/2022 Result Results HMP Cornton Vale ECG Mr [redacted] Mccallum
13/12/2022 Other Dr [redacted] Kildare
13/12/2022 Ongoing review MOA - Kardexes rewritten to have one specifically for GF products and the other meds
Clinical Portal reviewed and can see eForm from Dieticians requesting [redacted] to have lactose free products - I will complete medical marker Dr [redacted] Kildare
13/12/2022 Surgery consultation Dr [redacted] Kildare
13/12/2022 Consultation GP Re[redacted]
1) Listed for review of chest pain
Vague history of chest discomfort over Sunday and some episodes again yesterday
Left sided, no radiation, no autonomic symptoms, no palps or dizziness
No other red flags
Pain worse with movement, not pleuritic in nature
Has had 2 ECGs taken which are entirely normal and show NSR with Qtc 444ms, nil concerning features
Concerned as has a history of heart murmur she says
Has still been able to be at [redacted] the laundry
No cough/SOB, no reflux symptoms

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No cough/SOB, no reflux symptoms

O/E
Comfortable at rest, completes sentences, no accessory muscle use
Some discomfort over chest wall
HS I + II + 0, regular - I cant hear a murmur today
Chest clear with good A/E to bases

Advised pain unlikely cardiac and more likely MSK/costochondritis component
Advised simple analgesia and could try Algesal rub

2) States has spoken with Dieticians and they have agreed to medical marker to be reinstated for her lactose free products - says they will be sending an eForm

I will review Clinical Portal this morning and see what has been sent through Dr [redacted] Kildare

12/12/2022 Other Dr [redacted] Sayers
12/12/2022 Ongoing review ECG received via email
ECG - SR 80/min - no ST changes
Normal ECG
Dr [redacted] Sayers

12/12/2022 Triage Mrs [redacted]
12/12/2022 Consultation 13.15hrs SPS staff called for her to be assessed for 'chest pain'
DTL C [redacted] attended to obtain observations-
observations all unremarkable.
Resp's 18
pulse 88
temp 36.8
SP02 100%
BP 126/86
[redacted] then escorted to Health Centre for an ECG by [redacted] and SPS staff.
Ecg completed by HCA [redacted] Binnie at 13.30hrs
I then attended to speak with Georgina, She has had ongoing chest pain from yesterday around 11am and became worse last night.
Pain is from left underarm over left breast area.
States worse when breathing in, states no physical/muscle injury.
No obvious wheeze and no coughing up sputum.
Talking in full sentences no SOB evident however Georgina states she feels short of breath at times.
Good colour.
Discussed possible breast tendemess due to time of month however [redacted] states it is not similar pain.
[redacted] has previous breast cysts however was unable to state is any of these have changed.
States that her regular analgesia is not helping with her pain however noted to only have 2 paracetamol tablets from SPS officers yesterday at 2pm and none since.
Reassurance given regarding observations, ECG states normal however no one able to [redacted] here- sent to GP on call Dr Sayers to review.
I told her once her ECG is reviewed and it comes back normal she can be seen at routine clinic for review of pain. However no urgent [redacted] at the moment, any changes Georgina is aware to let staff know.

[redacted]
TL PCT
12/12/22
14.35HRS Dr Gp Stirling

12/12/2022 Triage Ms [redacted] Rennie
12/12/2022 Self-referral Nurse - Pain in left side of chest Ms [redacted] Rennie
09/12/2022 Triage Ms Jade Binnie - No Data Recorded
09/12/2022 Triage Ms [redacted] Binnie - No Data Recorded
09/12/2022 Triage Ms [redacted]
09/12/2022 Ongoing review ANP mail
ANP K [redacted]
FBC normal range
cholesterole 4.6 in range
EGfR >59 normal value
ECG no changes
plasma glucose 5.1 normal vaule
U&Es normal range
LFT normal range
continue NPT

07/12/2022 Third Party Consultation Mr S [redacted] Mccallum
07/12/2022 Document Image Docman Attachment
07/12/2022 Administration Haematology Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum

07/12/2022 Third Party Consultation Mr Sharon Mccallum
07/12/2022 Document Image Docman Attachment
07/12/2022 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum

07/12/2022 Third Party Consultation Mr S [redacted] Mccallum
07/12/2022 Document Image Docman Attachment
07/12/2022 Result Results HMP Cornton Vale ECG Mr Sharon Mccallum

06/12/2022 Other Dr [redacted] Kildare
06/12/2022 ECG Normal See ECG taken for Psychotropic monitoring NSR @ rate 87bpm QTc 437ms, no acute changes Dr [redacted] Kildare

06/12/2022 Results recording Dr [redacted] Sayers
05/12/2022 Serum HDL cholesterol level = 1 mmol/L Target value for HDL >1.2 mmol/L. Dr Craig Sayers
05/12/2022 Serum LDL cholesterol level = 2.7 mmol/L mmol/l Dr [redacted] Sayers
05/12/2022 Serum triglycerides = 2 mmol/L Dr [redacted] Sayers
05/12/2022 Serum total cholesterol level = 4.6 mmol/L Dr [redacted] Sayers
05/12/2022 Serum lipids = <none> Dr [redacted] Sayers
05/12/2022 Glomerular filtration rate = mL/min Abnormal >59 Dr [redacted] Sayers
05/12/2022 Serum creatinine = 58 umol/L New assay in use from 28/11/2022.
Results may be up to 5% lower than previous. Dr [redacted] Sayers
05/12/2022 Serum urea level = 3.7 mmol/L Dr Craig Sayers
05/12/2022 Serum chloride = 109 mmol/L Abnormal Dr Craig Sayers

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05/12/2022 Serum potassium = 4.8 mmol/L Dr Craig Sayers
05/12/2022 Serum sodium = 139 mmol/L Dr [redacted] Sayers
05/12/2022 Urea and electrolytes = <none> Dr [redacted] Sayers
05/12/2022 Serum alkaline phosphatase = 94 U/L U/L - ALP Ref. Limit for patients <30 days old is 0-380 iu/L
ALP Ref. Limit for patients <17 years old is 0-425 iu/L
ALP Ref. Limit for adults (>17 years) is 0-130 iu/L Dr Craig Sayers
05/12/2022 Serum albumin = 40 g/L Dr [redacted] Sayers
05/12/2022 Serum total protein = 66 g/L Dr [redacted] Sayers
05/12/2022 Serum total bilirubin level = 6 umol/L Dr [redacted] Sayers
05/12/2022 [redacted] alanine aminotransferase level = 17 IU/L Serum ALT level - Dr Craig Sayers
05/12/2022 AST serum level = 16 U/L U/L Dr [redacted] Sayers
05/12/2022 Liver function test = <none> Dr [redacted] Sayers
06/12/2022 Results recording Dr Craig Sayers
05/12/2022 Blood Glucose = 5.1 mmol/L
05/12/2022 Biochemical test = 9.3 Dr Craig Sayers
05/12/2022 Blood Glucose = mmol/L <none>
05/12/2022 Triage Ms [redacted] Binnie - No Data Recorded
05/12/2022 Results recording Dr [redacted] Sayers
05/12/2022 Nucleated red blood cell count = 0 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Basophil count = 0.1 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Eosinophil count = 0.5 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Monocyte count = 0.7 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Lymphocyte count = 2 10*9/L 10^9/L Dr Craig Sayers
05/12/2022 Neutrophil count = 5.2 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Mean corpusc. Hb. conc. (MCHC) = 326 g/L Dr [redacted] Sayers
05/12/2022 Mean corpusc. haemoglobin(MCH) = 29.9 pg Dr [redacted] Sayers
05/12/2022 Packed cell volume = 0.389 ratio Dr [redacted] Sayers
05/12/2022 Mean corpuscular volume (MCV) = 91.5 fL fl Dr [redacted] Sayers
05/12/2022 Red blood cell (RBC) count = 4.25 10*12/L 10^12/L Dr [redacted] Sayers
05/12/2022 Platelet count = 310 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Total white cell count = 8.5 10*9/L 10^9/L Dr [redacted] Sayers
05/12/2022 Haemoglobin estimation = 127 g/L Dr [redacted] Sayers
05/12/2022 Full blood count - FBC = <none> Dr [redacted] Sayers
05/12/2022 Triage Ms [redacted] Binnie - No Data Recorded
05/12/2022 Triage Mr [redacted] Mccallum
05/12/2022 Self-refe[redacted]iew Glasses/Fix Glasses. Dentist - Need check up, Need new dentures or dentures fixed. (Added to both waiting lists) JR Mr [redacted] Mccallum
05/12/2022 Third Party Consultation Mr [redacted] Mccallum
05/12/2022 Document Image Docman Attachment
05/12/2022 Administration Clinical Letter HMP Cornton Vale ECG Mr [redacted] Mccallum
05/12/2022 Third Party Consultation Mr [redacted] Mccallum
05/12/2022 Document Image Docman Attachment
05/12/2022 Administration Clinical Letter HMP Cornton Vale GASS Mr [redacted] Mccallum
05/12/2022 Triage Ms Laura Kilpatrick
05/12/2022 Seen by health care assistant Seen Georgina in drug monitoring clinic with hca cleary
Clinical observations obtained and all within normal limits
Bloods obtained u&e's lft,fbc glucose and lipids
ECG obtained in for MOA to review same.
GASS SCORE 18
Mental health team emailed with regards to same.
[redacted] Kilpatrick
HCA
05/12/2022
09:45HRS

Dr Gp Stirling
02/12/2022 Third Party Consultation Mr [redacted] Mccallum
02/12/2022 Document Image Docman Attachment
02/12/2022 Administration Clinical Letter HMP Cornton Vale Glasses Receipt Mr [redacted] Mccallum
28/11/2022 Third Party Consultation Mr [redacted] Mccallum
28/11/2022 Document Image Docman Attachment
28/11/2022 Administration Microbiology Results Forth Valley Royal Hospital Microbiology Mr Sharon Mccallum
28/11/2022 Triage Mr [redacted] Mccallum
28/11/2022 Planned telephone contact 07/12/2022 @ 14:00
[redacted] Miller
Dietician
Georgina Smith / 131344
04/102/1991
07971 647998
Telephone Appointment
Mr [redacted] Mccallum
25/11/2022 Triage Ms [redacted] Quail
25/11/2022 Drug addiction therapy
S - Met with Georgie for Prison Healthcare Addictions Service one to one support. Verbal consent to proceed obtained.
B - [redacted] is not in receipt of any MAT.
A - Appeared kempt, maintained eye contact, behaved in keeping with setting, communication was bright, reactive, normal rate and tone. [redacted] let me know that she had a parole hearing on Monday but that she has been told that this has to go to an oral hearing. She is coping well with this. She admits that she is feeling anxious but that she is getting on with this. She remains drug free and has no cravings.
R -See in 4/52.
[redacted] Quail, Substance Use and Recovery Team HMPCV
10.00
Ms [redacted] Quail
25/11/2022 Triage Ms [redacted]

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25/11/2022 Medication - risk monitoring Spotcheck carried out on 24/11/22. Amitriptyline, Quetiapine ,cetirizine all counted correctly Ms [redacted]
24/11/2022 Triage Ms [redacted] Binnie - No Data Recorded
24/11/2022 Other Miss Je[redacted] Mckeich
24/11/2022 Consultation ANP J McKeich/L[redacted]
Received email from dietician asking if patient still wishes to be seen, see entries below re diet, emailed back advising appointment to go ahead. Miss [redacted] Mckeich
24/11/2022 Other Miss [redacted] Mckeich
24/11/2022 Consultation ANP J McKeich/L[redacted]
Seen patient, ongoing issues with acne, states lymecycline not helping, obvious inflammed papuoles to face, mainly chin states allergic to acne lotions such as benzoyl peroxide - swelling/itchy, agreed to prescription for 3mths doxycycline 100mg daily, Dermol 500 and QV wash. Worsening advice given.

Also c/o headaches
pain forehead between eye brows
states post concussion syndrome since childhood following head injury
describes pain as tight, grabbing pain
occasional numbness to right side of face
usually occurs at night
no benefit from paracetamol
seen optician, told eye sight was ok, states getting tinted glasses
no obvious photosensitivity during consultation - states expereinces this on occasion
reduced sensation to right side of jaw
normal facial/eye movement
PERL
appears to have normal motor function
no red flags
Agreed to trial pizotifen 500mcg at night for one week then increased to 1.5mg as per BNF.
Worsening advice given.

Patient requesting to see [redacted]
States recent mood changes, sometimes gets anry with peers
Has parole meeting today
stress/anxiety levels higher than normal
Listed for review by [redacted] Miss [redacted] Mckeich
22/11/2022 Triage Ms Rachel [redacted]
22/11/2022 High vaginal swab taken Ms [redacted]
22/11/2022 Seen in [redacted] health clinic Seen concerned about vaginal growths related to HPV and abnormal vaginal discharge, advises has had clear discharge for approx 1 year, on examination nil of concern visible on vaginal walls or cervix, white creamy discharge, PH normal, HVS taken.
Discussed HPV and the monitoring in place for this and normal discharge and hormone [redacted] changes.
R [redacted] - [redacted] health nurse
22/11/2022 14:38 Ms [redacted]
21/11/2022 Triage Ms [redacted]
21/11/2022 Consultation Seen in HC at 1430.

S; Self referal to see nurse.

B: Right eye socket pain and ongoing skin issues.
A: Patient states she is experiencing pain in the socket of her right eye which is radiating to the side of her head which is the site of a previous injury. Patient states she has been seen by optition who can see no evidence of trauma. Patient also states her skin is constantly covered in spots and states her medication is no longer working.
R: Have referreed patient to attend GP clinic and worsening advice given.

PCT
[redacted]
21/11/22
15:39 Dr Gp Stirling
17/11/2022 Triage Mr Sharon Mccallum
17/11/2022 Self-referral Nurse/Doctor - Not disclosed. SP Mr [redacted] Mccallum
07/11/2022 Triage Ms Susan Payne
07/11/2022 Consultation Seen in Health Centre.@ 10:00

S; Self referral
B:Gluten/lactose free diet. Prescribed Lymecycline for skin issues and peppermint oil for stomach.
A: Patient stated she has issues with food being stuck in her throat and feels nauseous after eating. Patient states she has been having these symptoms for three weeks. Patient states she only eat once a day as does not like the food given to her. She is on a gluten/lactose free diet.
Patient states her skin has broken out and feels sore.
Patient also stated she would like an appointment with the [redacted] health nurse to discuss changes which may be due to having HPV and is concerned about 'changes'.
Paient also states she feels under stress due to up and coming parole hearing.

R: I have requested patient to eat small portions of food more regularly and not restrict herself to one meal a day.
I have also asked the patient to drink more fluids and exercise to help with peristalsis.
I have listed patient to attend [redacted] health clinic and have given patient worsening advice and to refer again if symptoms continue over the next couple of weeks.
Patient states she dose not require to talk to a MH nurse for stress issues.

PCT [redacted]
07/11/22
10:07
Dr Gp Stirling
03/11/2022 Third Party Consultation Ms [redacted] Rennie
03/11/2022 Document Image Docman Attachment

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

03/11/2022 Administration Administration HMP Cornton Vale Ms [redacted] Rennie
03/11/2022 Triage Ms [redacted] Rennie
03/11/2022 Self-refe[redacted] Nurse - Skin Issues and Well person clinic - CK Ms Jane Rennie
27/10/2022 Triage Ms [redacted] Binnie - No Data Recorded
27/10/2022 Triage Mrs [redacted]
27/10/2022 Ongoing review ANP L.Kane
ANP Actions
see entry 27/10/22
had huge excess of laxido
bisocodyl more effective for georgina and she is utlising this with good effect
therefore stopped laxido as requested
27/10/2022 Triage Mr [redacted] Cooper
27/10/2022 Mental health review Peebles staff approached me with a carrier bag full of laxido sachets (at least four full boxes and a dozen or more un-opened sachets) asking me to dispose of them as Georgie no longer wanted them as her constipation was successfully being manage by using bisocodyl, I spoke to [redacted] to confirm this and it was correct. All of the laxido was handed into our pharmacy to be either re-used or disposed of.
Entry by [redacted] RMN, Medgen, 27/10/22.
Dr Gp Stirling
20/10/2022 Triage Mrs Sadie Mckay - No Data Recorded
18/10/2022 Third Party Consultation Ms [redacted] Rennie
18/10/2022 Document Image Docman Attachment
18/10/2022 Administration Kardex HMP Cornton Vale Pharmacy Ms [redacted] Rennie
18/10/2022 Triage Ms Keleigh Mournian - No Data Recorded
17/10/2022 Third Party Consultation Mr [redacted] Mccallum
17/10/2022 Document Image Docman Attachment
17/10/2022 Administration Clinical Letter HMP Cornton Vale Medical Marker Mr [redacted] Mccallum
17/10/2022 Triage Mr [redacted] Mccallum
17/10/2022 Drug addiction notification Addictions/PHAS - Not disclosed. NT Dr Gp Stirling
17/10/2022 Self-referral Nurse/GP - Not disclosed, Skin clinic - Not disclosed. NT Mr [redacted] Mccallum
17/10/2022 Triage Ms [redacted]
17/10/2022 Consultation Seen in HC @10:30

Patient states she is using 2 Duvets under herr mattress which is helping with back pain.

I have completed a medical marker to allow this to happen. Copies to be forwarded to SPS, prisoner and scanned onto Vision.
PCT [redacted]
11:51
17/10/22 Dr Gp Stirling
14/10/2022 Triage Ms [redacted]
14/10/2022 Consultation SPS informed [redacted] in Pharmacy 13/10/22 that [redacted] was using a duvet cover under her mattress as she has back pain. The duvet has been removed by SPS. Will put patient into app to see The PCT regarding pain in her back.
PCT [redacted]
12:05
14/10/22

[redacted] Dr Gp Stirling
14/10/2022 Other Miss [redacted] Mckeich
14/10/2022 Medication - risk monitoring Spotcheck carried out on 13/10/22. Lymecycline, Amitriptyline,and Quetiapine (all weekly medications) counted and correct Reminded to store all medications in the safe. Prn Bisacodyl and Cetirizine and Etodolac too. Miss [redacted] Mckeich
04/10/2022 Surgery consultation Dr [redacted] Kildare
04/10/2022 Ongoing review MOA - [redacted] no longer wanting the GF crispbreads prescribed - therefore discontinued and in its place would like GF white rolls and GF Part baked fibre rolls
Kardex ammended with PIP codes as requested Dr [redacted] Kildare
29/09/2022 Triage Mrs [redacted] Mckay
29/09/2022 Consultation I spoke with ANP [redacted] and have printed a list of substitutes for Georgina to choose from instead of crispbread. This has been sent to Peebles House for her.

[redacted] McKay
PCT nurse
11:47am Mrs [redacted] Mckay
29/09/2022 Consultation Georgina asking if her diet can be changed as she gets the crispbread, which is prescribed through lloyds, but states cannot eat it. Has tried, but finds it is not tasty. Will list with ANP/GP to discuss, as there are no dieticians, and I cannot prescribe.

Also, stating she has been getting pains in both sides of her abdomen for some time. Observations BP 122/73 P78 T36.1 02 sats 98%
[redacted] McKay
PCT nurse
9:33am Mrs [redacted] Mckay
28/09/2022 Triage Ms Rebekah Weir - No Data Recorded
27/09/2022 Triage Mr [redacted] Mccallum
27/09/2022 Self-referral Nurse/GP - If possible to see dietitian about my diet choices. LS Mr Sharon Mccallum
23/09/2022 Triage Ms S [redacted] Payne
23/09/2022 Consultation Seen In Health Centre for covid and flu vaccine.

Spikevax Moderna Right arm.
Lot 200010A
EXP 21/03/2023
Flu Cell base Quadrivalent Left arm

LOT440051A
EXP 04/23

Administered with no issues . worsening advice give.#

Pct [redacted]
09.47

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09:47
23/09/22 Dr Gp Stirling
20/09/2022 Triage Ms S[redacted] Payne
20/09/2022 Consultation Seen in Health centre:

Follow up review of back pain from consultation on 17/09/22.

Patient states she still have very slight niggling pain in her front lower rib area. She is moving freely, it is not causing her sleep deprivation and she is still able to work.

I have given her worsening advice. Do not feel she require to see GP at this time.

PCT
[redacted]
20/09/22
11:21 Dr Gp Stirling
17/09/2022 Triage Ms [redacted]
17/09/2022 Consultation Seen in peebles:

Patient informed HCA [redacted] that she was experiencing back pain on 16/09/22. Negative for urinalysis.

When I attended patient today and asked what I could do for she couldnt remember at first then said she had rib pain front and back.

Nil diatery changes
Nil medication changes.

She is able to walk and move freely so see [redacted] clinical reason to see a GP this weekend.
Will list her for nurse clinic on 20/09/22 for a review.

PCT
[redacted]
11:39
17/09/22 Dr Gp Stirling
16/09/2022 Triage Ms [redacted] Kilpatrick
16/09/2022 Urinalysis = no abnormality = Urine sample left in pharmacy to be tested for infection? Same done and no infection at this time. I will List Georgina in clinic to see if still has ongoing symptoms of a uti. Dr Gp Stirling
16/09/2022 Triage Mrs Sylvia Barclay
16/09/2022 Mental health review Late entry from 14/09/2022 due to being unable to access vision. Discussed at MDMHT. Meeting chaired by Unit Manager [redacted]
S Barclay
MH Nurse
16/09/2022
Mrs Sylvia Barclay
16/09/2022 Third Party Consultation Ms [redacted] Rennie
16/09/2022 Document Image Docman Attachment
16/09/2022 Administration Clinical Letter HMP Cornton Vale Mental Health Ms [redacted] Rennie
15/09/2022 Triage Ms Nichola Docherty
15/09/2022 Administration Letter sent to Georgina advising of real location to named nurse. [redacted] spoke with Georgina briefly on 11th and Georgina advised of being more settled after situation earlier in the week. Due to ongoing need for guidance and reassurance, monthly contact is appropriate to contain levels of worry.

Nichola Docherty
MHN
15/09/22
1900hrs Ms Nichola Docherty
14/09/2022 T[redacted]ron Mccallum
14/09/2022 [redacted] Nurse/GP - Urine Infection. LS Mr [redacted] Mccallum
08/09/2022 Triage Ms Nichola Docherty
08/09/2022 Had a chat to patient Georgina advised she was feeling very tearful this evening and this was in response to having been into orderly room today. This was due to the fact she had utilised a fellow peers phone to phone the lady's relative after she had taken unwell. Georgina stated she had thought she was doing a helpful thing however I did inform her this was a complete breach of confidentiality and not her place to make these phonecalls. Giorgina is worried her fellow peer will be angry with her when she returns to Peebles House. I have offered reassurance this evening and advised she should learn from today's lesson and not repeat the same behaviour in the future. Will have a chat again with Giorgina on Sunday to check if she has settled. No significant distress, slightly anxious however able to articulate herself well and responded well to reassuring conversation. No issues relating to risk reported.

Nichola Docherty
MHN
08/09/22
1700hrs Ms Nichola Docherty
02/09/2022 Triage Ms [redacted] Kilpatrick
02/09/2022 Consultation Georgina was listed in clinic for a sitting and standing BP however on review of notes G.P has reviewed same and Georgina has also been sent letter to make aware of same.
Laura Kilpatrick
HCA
02/09/2022
11:23HRS Dr Gp Stirling
02/09/2022 Triage Ms L[redacted] Kilpatrick - No Data Recorded
30/08/2022 Triage Ms [redacted] Kilpatrick
30/08/2022 Letter encounter to patient Letter sent to make Georgina aware of normal bloods and normal bp as documented below on the 30/08/2022

[redacted] Kilpatrick
HCA
30/08/20222
16:49HRS Dr Gp Stirling

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30/08/2022 Triage Mr [redacted] Mccallum
30/08/2022 Next hospital appointment 05/09/2022 @ 13:00
Stirling Community Hospital
Physiotherapy
Georgina Smith / 131344
04/12/1991
Normal
Mr [redacted] Mccallum
30/08/2022 Other Dr [redacted] Kildare
30/08/2022 Ongoing review MOA - listed in Actions - states she has Asthma but has not been on treatment for a few years - not entry that Georgie reports its well controlled
Bloods entirely normal as is L&S BP - no further action needed at this time but can be listed for GP/ANP review if needed for on going symptoms Dr [redacted] Kildare
30/08/2022 Third Party Consultation Mr [redacted] Mccallum
30/08/2022 Document Image Docman Attachment
30/08/2022 Administration Kardex HMP Cornton Vale Pharmacy Mr Sharon Mccallum
29/08/2022 Triage Ms [redacted] Weir
29/08/2022 O/E - temperature level = 36.4 degC Dr Gp Stirling
29/08/2022 Pulse oximetry 98 % Dr Gp Stirling
29/08/2022 O/E - pulse rate 92 beats/min Dr Gp Stirling
29/08/2022 14:27.00 BP 126 / 77 taken Standing from Left Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
29/08/2022 14:27.00 BP 122 / 80 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
29/08/2022 Seen by health care assistant Seen in health centre for sitting and standing blood pressure as requested. Observations as documented.

[redacted] Weir
HCA
29/08/2022
1427HRS Dr Gp Stirling
26/08/2022 Third Party Consultation Ms [redacted] Rennie
26/08/2022 Document Image Docman Attachment
26/08/2022 Result Results Haematology Ms [redacted] Rennie
26/08/2022 Third Party Consultation Ms [redacted] Rennie
26/08/2022 Administration Clinical Letter HMPYOI Stirling Clinical Biochemistry Ms [redacted] Rennie
26/08/2022 Triage Ms [redacted]
26/08/2022 Consultation Requesting review of blood pressure and blood result by GP/ANP 30/08/22

PCT
[redacted]

15:53
26/08/22 Dr Gp Stirling
26/08/2022 Third Party Consultation Mr [redacted] Mccallum
26/08/2022 Administration Haematology Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
26/08/2022 Third Party Consultation Mr [redacted] Mccallum
26/08/2022 Document Image Docman Attachment
26/08/2022 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
26/08/2022 Triage Ms [redacted] Cleary
26/08/2022 10:43.00 BP 110 / 71 taken Standing Cuff: Standard recall due: O/E - blood pressure reading Ms [redacted] Cleary
26/08/2022 O/E - pulse rate 92 beats/min STANDING Ms [redacted] Cleary
26/08/2022 Pulse oximetry 97 % STANDING Ms Michelle Cleary
26/08/2022 O/E - temperature level = 35.5 degC Ms Michelle Cleary
26/08/2022 O/E - pulse rate 84 beats/min Ms [redacted] Cleary
26/08/2022 Pulse oximetry 99 % Ms [redacted] Cleary
26/08/2022 10:35.00 BP 109 / 74 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Ms [redacted] Cleary
25/08/2022 Third Party Consultation Ms [redacted] Rennie
25/08/2022 Administration Clinical Letter HMPYOI Stirling Genetic Services Ms [redacted] Rennie
25/08/2022 Triage Miss Sarah Hogg
25/08/2022 Consultation S- seen in treatment room for Asthma review.
B- PMX Asthma.
A- Georgina has nil prescibed therapy for asthma at present. Reports that asthma is well controlled. Has nil concerns for same at present. Aware to contact nursing staff if any [redacted]. Also discussed heart murmmer. Reports nil concerns at present. Has had dizzy spells in past, is to have blood pressure monitored and GP to review recent blodds and await plan. Cardiology care plan to be typed and given to patient also. Patient in agreement with care plans and current plan. Worsening advice given.
R- Annual reviews, await further plan, if any from GP. Patient aware. Worsening advice given.

SN S Hogg
PCT 25/08/22 1448
25/08/2022 Third Party Consultation Ms [redacted] Rennie
25/08/2022 Document Image Docman Attachment
25/08/2022 Administration Clinical Letter HMP Cornton Vale Genetic Services Ms [redacted] Rennie
25/08/2022 Results recording Dr Craig Sayers
24/08/2022 Serum C reactive protein level = mg/L <5 Dr [redacted] Sayers
24/08/2022 Glomerular filtration rate = mL/min Abnormal >59 Dr [redacted] Sayers
24/08/2022 Serum urea level = 2.2 mmol/L Abnormal Dr [redacted] Sayers
24/08/2022 Serum creatinine = 63 umol/L Dr [redacted] Sayers
24/08/2022 Serum chloride = 103 mmol/L Dr [redacted] Sayers
24/08/2022 Serum sodium = 138 mmol/L Dr Craig Sayers
24/08/2022 Serum potassium = 4.2 mmol/L Dr [redacted] Sayers
24/08/2022 Urea and electrolytes = <none> Dr [redacted] Sayers
24/08/2022 Serum albumin = 40 g/L Dr [redacted] Sayers
24/08/2022 Serum total protein = 67 g/L Dr [redacted] Sayers
24/08/2022 AST serum level = 18 U/L U/L Dr [redacted] Sayers
24/08/2022 Serum alanine aminotransferase level = 14 IU/L Serum ALT level - Dr [redacted] Sayers

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24/08/2022 Serum alkaline phosphatase = 91 U/L U/L - ALP Ref. Limit for patients <30 days old is 0-380 iu/L
ALP Ref. Limit for patients <17 years old is 0-425 iu/L
ALP Ref. Limit for adults (>17 years) is 0-130 iu/L Dr [redacted] Sayers
24/08/2022 Serum total bilirubin level = 6 umol/L Dr [redacted] Sayers
24/08/2022 Liver function test = <none> Dr [redacted] Sayers
24/08/2022 Results recording Dr [redacted]g Sayers
24/08/2022 Nucleated red blood cell count = 0 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Basophil count = 0.1 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Eosinophil count = 0.4 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Monocyte count = 0.5 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Lymphocyte count = 1.8 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Neutrophil count = 4.1 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Mean corpusc. Hb. conc. (MCHC) = 332 g/L Dr [redacted] Sayers
24/08/2022 Mean corpusc. haemoglobin(MCH) = 29.1 pg Dr Craig Sayers
24/08/2022 Packed cell volume = 0.398 ratio Dr [redacted] Sayers
24/08/2022 Mean corpuscular volume (MCV) = 87.9 fL fl Dr [redacted] Sayers
24/08/2022 Red blood cell (RBC) count = 4.53 10*12/L 10^12/L Dr Craig Sayers
24/08/2022 Platelet count = 296 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Total white cell [redacted] = 6.8 10*9/L 10^9/L Dr [redacted] Sayers
24/08/2022 Haemoglobin estimation = 132 g/L Dr [redacted] Sayers
24/08/2022 Full blood count - FBC = <none> Dr [redacted] Sayers
24/08/2022 Triage Ms [redacted] Cleary - No Data Recorded
24/08/2022 Other Miss [redacted] Mckeich - No Data Recorded
24/08/2022 Triage Ms Eilish Hennessy
24/08/2022 Seen by health care assistant Seen in HCA clinic for bloods. [redacted] gave verbal permission for bloods to be obtained. Blood obtained and will be sent to labs.

E Hennessy - HCA
24/08/2022
10:45 Dr Gp Stirling
23/08/2022 Third Party Consultation Ms [redacted] Rennie
23/08/2022 Document Image Docman Attachment
23/08/2022 Administration Clinical Letter HMPYOI Stirling Genetic Services Ms [redacted] Rennie
23/08/2022 Triage Mrs [redacted]
23/08/2022 Ongoing review ANP L [redacted]
review of letter from genetic councillor
her extended family history was traced
it does not look like she has an inherited susceptability to cancer
however they have not been able to find out any more information about her [redacted] or [redacted] who were diagnosed with breast cancer in their 30's
If they could confirm her [redacted] and [redacted] were diagnosed with breast cancer at such a young age her lifetime risk may be moderately increased, if confirmed she would be eligible for screening from the age of 35
georgina has to contact them again in 5 years time and they will then see if there is any further information they can find and decide if georgina requires to be referred for assessment at that time

If she finds out any further information regarding her FH then we can inform genetics

I have asked admin to send copy of letter to patient as it is addressed to her
23/08/2022 Third Party Consultation Ms [redacted] Rennie
23/08/2022 Administration Clinical Letter HMP Comton Vale Genetic Services Ms [redacted] Rennie
23/08/2022 Triage Ms [redacted]
23/08/2022 Occupational therapy Mental Health Occupational Therapy - Seen for planned contact - [redacted] reported that her RMT meeting is today, and is feeling anxious regarding same due to recently being put on report for allowing another prisoner access to her phone. We discussed activities that [redacted] can engage with this morning to help manage her anxiety and also self care activities that [redacted] can participate in following her RMT meeting to help manage her emotion. Session was brief due to arrival of lunch, agreed that I would meet with [redacted] next week for follow up. Ms [redacted]
23/08/2022 Triage Ms Laura Kilpatrick
23/08/2022 [redacted] by health care assistant Seen Georgina in clinic for bloods, unable to obtain managed to get flash back however not enough to fill the tube. Georgina stated that she has not had much to drink, encouraged to drink more fluids. Relisted for further appointmer [redacted] Kilpatrick
HCA
23/08/2022
10:12HRS Dr Gp Stirling
23/08/2022 Triage Ms [redacted] Kilpatrick
23/08/2022 09:56.00 BP 128 / 77 taken Standing Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
23/08/2022 09:54.00 BP 122 / 75 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Dr Gp Stirling
23/08/2022 Pulse oximetry monitoring 98 % Dr Gp Stirling
23/08/2022 O/E - pulse rate 91 beats/min Dr Gp Stirling
22/08/2022 Triage Ms [redacted] - No Data Recorded
21/08/2022 Triage Mr [redacted] - No Data Recorded
19/08/2022 Triage Ms Susan [redacted]
19/08/2022 Consultation Seen in Health centre.

Patient states she has been having dizzy spells for one week when going from sitting to standing.
Sitting and standing blood pressure was taken

Sitting
BP 128/75
resps 16
sats97%
pulse 82
temp 36.8

Standing
BP 123/83
resps 16

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BP 123/83
resps 16
temp 36.5
pulse 90
Sats 97%

Checked ears for any infection or inflamation. Nil present.
Asked patient if she required an eye test. None required as had a recent eye test.

Have advised patient to keep well hydrated.
Advised patient if she were to feel unwell to report back to the PCT.
Repeat sitting and standing observation to taken twice weekly for two weeks from 22/08/22 and blood LFTs U&Es TFTs and CRP to be taker on 22/08/22

[redacted]
19/08/22
14:52
[redacted]
18 Dr Gp Stirling

19/08/2022 Triage Miss Sarah Hogg - No Data Recorded
16/08/2022 Triage Mr [redacted] Mccallum
16/08/2022 Self-referral Nurse/GP - Dizzy spells everytime I stand up. LS Mr [redacted] Mccallum
09/08/2022 Triage Dr Imogen [redacted]
09/08/2022 Seen in [redacted] clinic Seen in SH clinic. HPV positive on recent smear, so on 12 month smears at the moment. Reassured about that and discussed HPV. Also discussed family hx of throat cancer [redacted] and [redacted] - discussed no need to do anything in light of that information. Dr [redacted] GMC 7421177 Dr Imogen [redacted]
08/08/2022 Third Party Consultation Ms [redacted] Rennie
08/08/2022 Document Image Docman Attachment
08/08/2022 Administration Clinical Letter HMPYOI Stirling Breast Screening Ms Jane Rennie
08/08/2022 Third Party Consultation Mrs [redacted]
08/08/2022 Document Image Link broken, document rescanned and resubmitted to Vision.
08/08/2022 Administration Clinical Letter HMP Cornton Vale Breast Screening Mrs [redacted]
01/08/2022 Triage Ms Nichola Docherty
01/08/2022 Had a chat to patient Spoke with Georgina in Peebles today in the absence of her allocated MH nurse [redacted] Beattie. Had beer previously decided within MHT that Georgina could be offered the opportunity to secure [redacted] if she wished. Georgina has advised sh is due to attend a meeting regarding the possibility of being transferred to one of the community facilities within Dundee. This should be discussed in August with SPS. Georgina has advised she will await the outcome of this and should she be moving on then she will not require Psychology input within Cornton Vale. She has agreed to update us of her own accord. No further MH input from SSN Beattie is required at this time. No significant [redacted] being raised by Georgina or Peebles staff. Continues to attend her work party. DISCHARGED from caseload.

Nichola Docherty
[redacted]
01/08/22
1530hrs Ms Nichola Docherty
29/07/2022 Triage Ms [redacted] Cleary - No Data Recorded
29/07/2022 Triage Ms [redacted] Quail
29/07/2022 Drug addiction therapy
S - Met with [redacted] for Prison Healthcare Addictions Service one to one support. Verbal consent to proceed obtained.
B - [redacted] is not in receipt of any MAT.
A - Appeared kempt, maintained eye contact, communication was bright, reactive, normal rate and tone. I met with Georgie at her request. [redacted] has been in prison 10 years now and is due for parole again soon. She has been in the community once before but she lasted 7 weeks. She admitted that she drinks in the community when she has any problems which she feels that she cannot cope with. She is very aware that this is not a normal way to deal with issues and is something that she wants to work on. We have agreed that we will work through some coping strategies and hopefully these will help her in the future.
R -See in 2/52.
[redacted] Quail, Substance Use and Recovery Team HMPCV
11.00
Ms Kathleen Quail
29/07/2022 Third Party Consultation Ms Jane Rennie
29/07/2022 Document Image Docman Attachment
29/07/2022 Administration Clinical Letter HMP Cornton Vale Medical Marker Ms [redacted] Rennie
28/07/2022 Other Miss [redacted] Mckeich - No Data Recorded
28/07/2022 Other Miss [redacted] Mckeich
28/07/2022 Consultation ANP actions, gluten free choices prescribed on prescription sheet as per guidance from dietician. See email reponse below from same:
"Thanks for sending through Georgina's food and symptom diaries.
I've spent some time going through all of these to try and assess what the current situation is and if there are any obvious triggers. The earlier referral by Dr. Kildare described the main symptoms as pain, bloating and intermittent constipation but having looked at Georgina's diaries she's reporting very regular episodes of loose stools with odd days of no movement (understandable given the amount of loose stools). She also refers to significant numerous other symptoms which are obviously distressing for her.
Most of her reported symptoms could be caused by allergies or intolerances. Unfortunately we don't have an allergy service within FV and no specialist allergy dietitian. If there's a concern about possible anaphylactic reactions then it would be better to refer her to the Allergy Service in Glasgow. The only other way to check for intolerances that cause symptoms like rashes/ulcers etc is to do a full exclusion diet, something that's unfortunately just impossible to carry out in the prison environment. Even for free living individuals it's usually just too overwhelming and challenging!
Loose stools could potentially be caused by food intolerances and possibly linked to the other symptoms but having looked at her food diar her diet is very low in fibre and very high in fat both of which could be causing it. I'm happy to keep Georgina on my waiting list (it's about 5 months at the moment unfortunately) for a telephone/Near Me consultation as long as she has realistic expectations of what I can offer.
Georgina mentioned a couple of times in her diary about doing a trial and being fed up of it? Is the trial just writing her diary or was there a medication/food trial she was doing at the same time?
Given the list of symptoms that Georgina has it's probably reasonable to allow her continued access to gluten free foods and soya milk sol based on what she's telling us because there's not really any way of checking her claims.

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Georgina Smith 04/12/1991 662/91/440 Georgina has it's probably reasonable to allow her continued access to gluten free foods **All Consultations**

based on what she's telling us because there's not really any way of checking her claims.
If you could add markers on for these and maybe mention that fat/lack of fibre can be a cause then I'll keep her on my waiting list and opt her in closer to the time - she might not need or want to be seen if these things have been changed.
Hope this helps - let me know your thoughts and we can take it from there.
Best wishes
[redacted]
Lynn [redacted]
Community Dietitian
Stirling Community Hospital
Can nursing staff please follow up in advise from dietician anout diary/loose stools,fat & fibre.
Miss [redacted] Mckeich

28/07/2022 Triage Ms Jill Ramsay
28/07/2022 Pt advised re gluten free diet Advice Diet Prescribed gluten free diet Dr Gp Stirling

28/07/2022 Triage Ms Jill Ramsay
28/07/2022 Consultation Seen in clinic, gluten free foods chosen off prescription list. Total of 14 points used. review appointment made for 2/52 to review how diet list is going.
Jill Ramsay PCT SN 28/07/2022 14:38 Dr Gp Stirling

26/07/2022 Triage Ms [redacted]
26/07/2022 Occupational therapy Mental HEalth Occupational Therapy - Seen for planned OT contact at Georgies request. [redacted] stated that she feels she is requiring more regular emotional support and feels let down by SPS and NHS services in prison. Georgies main concerns at present are [redacted] to her physical health and lack of progression through RMT. Described feeling anxious about the possibility she has cancer due to raised HPV levels and changes to her cycle. Reports menstrual bleeding lasting 2-3 weeks and thick gel like discharge. Advised [redacted] that if these symptoms are new she should submit a referral to [redacted] health nurse for further examination or reassurance. Georgie dismissive of this advice. Stated that she had received a letter informing her that she is high risk of cancer, and we discussed how this can lead to heightened anxiety and increased vigilance towards potential symptoms. [redacted] also voiced that she feels other people are being prioritised for progression/ rehabilitation , and this is making her feel both angry and uncared for. [redacted] was encouraged to focus on issues that are within her control and to try not to compare her situation to other prisoners as this is likely to increase her frustration and have a negative impact on her mental wellbeing. Focussed on identifying positive aspects of routine that [redacted] is developing in prison, and how this contributes to her rehabilitation and readiness for living more independently on liberation. OT Plan - Liaise with Named Nurse regarding ongoing support. Fortnightly OT contact to be offered for emotional support. Ms [redacted]

12/07/2022 Triage Ms [redacted]
Letter on: 12/07/2022 type: Referral Smear result

05/07/2022 Triage Ms [redacted] Kilpatrick
05/07/2022 Seen by health care assistant Seen Georgina in Peebles house made aware of xray results as documented below.

Laura Kilpatrick
HCA
05/07/2022
20:22HRS Dr [redacted] Sayers

05/07/2022 Other Miss [redacted] Mckeich
05/07/2022 Consultation ANP actions, review xray of cervical spine, no significant bony or joint abnormality found. Can nursing staff please inform patient of same. Miss [redacted] Mckeich

05/07/2022 Third Party Consultation Mr [redacted] Mccallum
05/07/2022 Document Image Docman Attachment
05/07/2022 Administration Clinical Letter HMP Cornton Vale Dental General Mr [redacted] Mccallum

04/07/2022 Third Party Consultation Ms [redacted] Rennie
04/07/2022 Document Image
04/07/2022 Result Results X-Ray Ms [redacted] Rennie

04/07/2022 Triage Ms L [redacted] Kilpatrick
04/07/2022 Seen by health care assistant [redacted] Georgina in her cell in Peebles house, writer Made Georgina aware of wait for Dietetics 16-20 weeks, as advised by admin staff.
[redacted] Kilpatrick
HCA
04/07/2022
16:09HRS
Dr [redacted] Sayers

04/07/2022 Third Party Consultation Mr [redacted] Mccallum
04/07/2022 Administration Clinical Letter HMP Cornton Vale Radiology Mr [redacted] Mccallum

30/06/2022 Triage Mrs [redacted] Watt
30/06/2022 Mental [redacted] review Caught up briefly with [redacted] this lunchtime in Peebles. She was voicing her her [redacted] re lack of information on ongoing tests/requests. Stated she feels abandoned and that noone was listening to her.
I have appointed her to Dr Swinson's clinic for a medication review, she reports she has been having disturbe sleep and increased anxiety.
Appointment to see [redacted] health nurse for feedback on Smear test.
I have advised her again that her X-Ray result was not back.
Admin will find out waiting time for Dieticians and will advise staff so we can give [redacted] that information.
Dentist: Admin will check out waiting time for dentist and inform staff to pass on information to [redacted]
Letter sent to [redacted] to inform her of this.

[redacted] Watt
SSN MH
30/06/22 15:05 Dr [redacted] Sayers

30/06/2022 Triage Mrs [redacted] Watt - No Data Recorded

29/06/2022 Triage Ms [redacted] Kilpatrick
29/06/2022 Letter encounter to patient Letter sent to Georgina to make aware of change in shampoo

[redacted] Kilpatrick
HCA
29/06/2022
16:22HRS Dr [redacted] Sayers

29/06/2022 Triage Ms [redacted]

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[redacted]

Georgina Smith 04/12/1991 662/91/440 [redacted] **Consultations**

29/06/2022 Ongoing review ANP action
ANP K [redacted]
patient requeting a change of shampoo from dermax to dandrazole as finding current shampoo drying to her hair

I have prescribed Ketoconazole 2%shampoo as is same active ingredients. use 2-3 times per week
29/06/2022 Triage Ms Kerly [redacted] No Data Recorded
28/06/2022 Triage Ms [redacted] Kilpatrick
28/06/2022 Administration Listed in nurse clinic to review scalp, Listed in SH clinic for smear results.
[redacted] Kilpatrick
HCA
28/06/2022
20:14HRS Dr Gp Stirling
28/06/2022 Other Miss [redacted] Mckeich - No Data Recorded
28/06/2022 Other Miss [redacted] Mckeich
28/06/2022 Consultation ANP actions, patient requesting result of back xray and smear result. Portal and [redacted] store checked, no results reported on back as yet. Suggest referral to SH clinic for result smear.
Patient also requesting prescription ketoconazole shampoo in place of dermax. Can nursing staff please assess patient's scalp to see in there is a clinical need for this shampoo - such as fungal infection to scalp/dermatitis, if so happy to prescribe. Miss [redacted] Mckeich
28/06/2022 Other Miss Jackie Mckeich - No Data Recorded
27/06/2022 Triage Ms Jill Ramsay - No Data Recorded
27/06/2022 Triage Ms [redacted] Rennie
27/06/2022 Self-referral Doctor and Well Woman - KJM - spine x-rays and smear results
23/06/2022 Triage Mr [redacted] Cooper - No Data Recorded
21/06/2022 Triage Mrs Louise [redacted]
21/06/2022 Ongoing review [redacted] L [redacted]
Asked by pharmacy to prescribe paracetamol 1 week course as patient is covid positive
same done
21/06/2022 Triage Ms [redacted] Cleary - No Data Recorded
21/06/2022 Triage Ms Jill Ramsay
21/06/2022 Consultation not seen in clinic todayas covid positive and stated appointment wasn't urgent, advised her to put another slip in.
Jill Ramsay PCT SN
21/06/2022 10.54
Dr Gp Stirling
21/06/2022 Triage Dr [redacted] Murray
21/06/2022 Failed encounter listed for SH clinic but isolating with covid so not seen. I will ask R [redacted] to relist. Dr Imogen [redacted]
20/06/2022 Triage Ms [redacted] Rennie
20/06/2022 Referral to mental health team Struggling emotionally - JR Ms [redacted] Rennie
20/06/2022 Triage Ms Claire Mcbeath - No Data Recorded
19/06/2022 Triage Ms [redacted] Mckay
19/06/2022 Consultation Contacted by SPS at 11:00hrs to advise that Georgina has tested positive for covid and is now in isolation. SPS mentioned that Georgina has previously had all her COVID vaccinations
[redacted] McKay (RN)
19/08/2022 @ 11:05 Dr Gp Stirling
14/06/2022 Triage Ms [redacted] Rennie
14/06/2022 Next hospital appointment Forth Valley - X-Ray - 17/06/2022 @ 09:20
13/06/2022 Triage Ms Eilish Hennessy
13/06/2022 Seen by health care assistant Georgina was seen by HCA Eilish and SN Keyleigh in clinic for opening of letter. Letter was response to complaint, no concerns raised by Georie, was satisfied with letter.

E Hennessy - HCA
13/06/2022
21:20 Dr Gp Stirling
13/06/2022 Triage Mrs [redacted]
04/06/2022 Joint consultation with georgina, myself and claire Mcbeath.
Georgie expressing that she has a rash on her body from not receiving her requested diet- on examination, [redacted] see. 2 x small red hair folicles.
States blisters all over her mouth- again, Nill evident.
Throat slightly red, advised to take paracetamol at this time.
[redacted] happy to await dietician appointment as her food diary had many different food types and symptoms and we require specialist advice regarding same.
[redacted] also expressed about her lump at the top of her neck- already listed for ANP to review same.
C reid sn Dr Gp Stirling
09/06/2022 Third Party Consultation Ms [redacted] Rennie
09/06/2022 Document Image Docman Attachment
09/06/2022 Administration Clinical Letter HMP Corton Vale X-Ray Ms [redacted] Rennie
09/06/2022 Triage Ms Keleigh Mournian
09/06/2022 Consultation ATSP for throat swelling and headache. On examination observations as follows; BP 116/81 T 37.5 P 86 SPO2 97%
Throat slightly red on examination. Advised to take paracetamol for pain.
Keyleigh Mournian
PCT
09.06.2022
20.44 Dr Gp Stirling
08/06/2022 Third Party Consultation Mr Sharon Mccallum
08/06/2022 Administration Link broken, document rescanned and resubmitted to Vision.
Mr [redacted] Mccallum
08/06/2022 Triage Mrs [redacted] Kane

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

08/06/2022 Consultation ANP L.Kane
Patient seen due to swelling top of back
OE some swelling evident cervical area
boney prominence felt however has history of kyphosis
reasonable ROM of neck however states pain +++
patient states pain worsened over last 3 weeks
also has chronic back pain
no neuropathic type pain described
patient requesting analgesia as celecoxib and paracetamol not effective
wishes NSAID that she has not tried before
prev tried Naproxen, diclofenac, meloxicam, ibuprofen
therefore trial of etodolac 600mg OD
due to significant increase in pain, swelling and boney prominence i have referred for C- spine XR
Patient happy with this

08/06/2022 Triage Ms Rachel [redacted]
19/04/2022 Recall on 19/04/2023 for Cervical smear: negative with Ms [redacted] Status: Complete
19/04/2022 Cervical smear: negative HPV - Human papillomavirus test positive recall due: 19/04/2023 1 year recall Ms [redacted]
08/06/2022 Triage Ms [redacted] Rennie - No Data Recorded
06/06/2022 Triage Mr [redacted] Mccallum
06/06/2022 Self-referral Well Person Clinic - Discuss smear results, support and advice for next steps. NT Mr [redacted] Mccallum
03/06/2022 Triage Mrs [redacted] Mckay
03/06/2022 Consultation Seen for nurse referral form. She states has put in lots of nurse referral forms when she is not well, but only 6 recorded and have been actioned since January 2022. I have reassured Georgina that she has [redacted] referred to dietician and just waiting or appointment. Georgina complaining of sore back, has a curvature and I note her neck is quite swollen and when assessing it, it became sore and pain shot to the bottom of her back. Advised is in for seeing MO on Tuesday and this can be looked at then.She is already on celecoxib 200mg and amitriptylline 75mg. Feels she needs her quetiapine looked at, therefore have referred her to the mental health team.

Also complaining of a sore throat and mouth. On examination, her throat was swollen and slightly red, also, it was noted she has got small blisters in her mouth, tongue and lips. For MO to assess all of this. Georgina happy with consultation.

[redacted] McKay
PCT nurse
1040am Mrs [redacted] Mckay
02/06/2022 Triage Ms Eilish Hennessy
02/06/2022 Seen by health care assistant Georgina has been written a letter to advise of the refferal put in place for dietician. Furthermore Georgina has advised of back pain following discussion with Charge Nurse C McBeath Georgina has been listed for primary care review for 03/06/2022 and placed on referal list.

Eilish Hennessy
HCA
02/06/2022
16:15 Dr Gp Stirling
02/06/2022 Triage Mr [redacted] Mccallum
02/06/2022 Self-referral Nurse/GP - Curved spine inflamed and painful, Back and shoulders swollen up. DM Mr [redacted] Mccallum
01/06/2022 Triage Ms Eilish Hennessy
01/06/2022 Seen by health care assistant Spoke to Georgina at medication tonight at the request of SSN C [redacted] Explained to Georgina that a refferal had been put in place for dietician due to the submission of food diary at the request of ANP. Georgina was accepting of this information and understood. Georgina advised she was experincing back pain due to a spinal condition. Georgina was advised to put in NRI and primary care team would pick this up. No further [redacted] at present.

Eilish Hennessy - HCA
01/06/2022
21:20 Dr Gp Stirling
01/06/2022 Triage Ms Jill Ramsay - No Data Recorded
30/05/2022 Administration Ms S [redacted] Kelly-Gutowski
30/05/2022 Self-referral Dentist. Ms Sonja [redacted]
27/05/2022 Other Miss J [redacted] Mckeich
27/05/2022 Consultation ANP actions, given copy of food diary patient has completed, had issue regarding coeliac, unable to do test as patient not agreeable to eating normal diet for 6 weeks. After discussion with staff patient states is unable to drink normal milk and is requesting soya milk and no spices. Discussed food diary with Dr Kildare, agreed to re-refer back to dietician, referral completed. Miss [redacted] Mckeich
27/05/2022 Referral Letter Miss [redacted] Mckeich
27/05/2022 SCI Referral Letter
27/05/2022 Third Party Consultation Ms [redacted] Rennie
27/05/2022 Document Image Docman Attachment
27/05/2022 Administration Clinical Letter HMP Cornton Vale Dietician Ms [redacted] Rennie
27/05/2022 Other Miss [redacted] e Mckeich - No Data Recorded
24/05/2022 Other Dr [redacted] Kildare
24/05/2022 Ongoing review MOA - Desogestrel discontinued on Kardex at request of [redacted] who handed them back to Pharmacy staff
Dr [redacted] Kildare
23/05/2022 Triage Ms J [redacted] Rennie
23/05/2022 Self-referral Staff Member, no name given would like to discuss patients diets TEL 265335
18/05/2022 Triage Ms [redacted]
18/05/2022 Medication - risk monitoring Delivering a months supply of Desogestral to GS today. GS asked for them to be returned as not effective (still bleeding) Spoke to nursing staff re SHC clinic referral .Desogestral disposed of at HC. Ms [redacted]
17/05/2022 Triage Ms [redacted] Kilpatrick
17/05/2022 Letter encounter to patient Letter sent to make Georgina aware that recent test came back negative as documented on the 17/05/2022 and the 13/05/2022
QFIT-NEGATIVE
Helicobacter-NEGATIVE
Calprotectin-NEGATIVE
[redacted] Kilpatrick
HCA
17/05/2022
16:49HRS Dr Craig Sayers

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

17/05/2022 Triage Mrs Sylvia Barclay
17/05/2022 Multidisciplinary case conference Discussed at RMT. SW and forensic psychology to meet with Georgina to discuss future plans and clarify potential referrals. No plans at present for further programmes. [redacted] will be able to apply for further progression in July 2022.

S Barclay
MH Nurse
17/05/2022 Mrs Sylvia Barclay
17/05/2022 Other Dr [redacted] Kildare
17/05/2022 Ongoing review MOA - see Faecal calprotectin result <50 - therefore normal - symptoms are likely IBS [redacted]
Can discuss at an appointment if needed but really needs to have blood taken for coeliac serology in first instance to confirm if coeliac or not
Dr [redacted] Kildare
16/05/2022 Third Party Consultation Mr [redacted] Mccallum
16/05/2022 Document Image Docman Attachment
16/05/2022 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
13/05/2022 Other Miss [redacted] Mckeich - No Data Recorded
13/05/2022 Other Miss [redacted] Mckeich
13/05/2022 Consultation ANP entry J McKeich/K [redacted]
ANP mail, qFit and helicobacter negative, still awaiting faecal calprotectin Miss [redacted] Mckeich
13/05/2022 Results recording Dr Craig Sayers - No Data Recorded
13/05/2022 Results recording Dr [redacted] Sayers
06/05/2022 Biochemical test = Abnormal <50 Dr [redacted] Sayers
12/05/2022 Third Party Consultation Mr [redacted] Mccallum
12/05/2022 Document Image Docman Attachment
12/05/2022 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Mr [redacted] Mccallum
12/05/2022 Triage Ms [redacted] Murphy
12/05/2022 Ongoing review ANP mail
ANP clinic
clinical results H-pylori negative
await fecal protectin
12/05/2022 Triage Ms [redacted]
12/05/2022 Ongoing review ANP clinic not seen due to same already advised to patient
see previous entries patient has been seen and letter have been sent regarding diet.
12/05/2022 Other Miss [redacted] Mckeich - No Data Recorded
11/05/2022 Third Party Consultation Mr [redacted] Mccallum
11/05/2022 Document Image Docman Attachment
11/05/2022 Administration Microbiology Results Forth Valley Royal Hospital Microbiology Mr [redacted] Mccallum
11/05/2022 Results recording Dr [redacted] Sayers
06/05/2022 Biochemical test = Not Detected
- Result from Blood Science, Ninewells Hospital.
Not Detected Dr [redacted] Sayers
11/05/2022 Results recording Dr [redacted] Sayers
06/05/2022 Biochemical test = Dr [redacted] Sayers
06/05/2022 Faecal calprotectin content = <none> Dr [redacted] Sayers
10/05/2022 Triage Mr [redacted] Mccallum
10/05/2022 Referral to mental health team - Diet issues impacting on Mental Health - LS Mr [redacted] Mccallum
10/05/2022 Self-referral Nurse/GP - Diet issues - stopped eating due to change in diet - LS Mr [redacted] Mccallum
10/05/2022 Other Dr Jack Kildare
10/05/2022 Letter encounter to patient , , lab reults from last stool sample normal (negative) letter sent to Georgina advising same.

N.Brown
HCA
10/05/2022 17:03 Ms Elaine Mcadam
10/05/2022 Fibrocystic disease of breast See letter from Gen Surg (Breast Team) - has Fibrocystic changes in her breast - they have written to Clinical Genetics based on her FHx of breast cancer to see if she needs enhanced screening Dr [redacted] Kildare
10/05/2022 Triage Dr [redacted]
10/05/2022 Seen in [redacted] health clinic Seen in clinic with R [redacted]

Discussed labiaplasty referral - [redacted] awaiting an appointment from Glasgow. Discussed waiting list very long, and that there is a long process once they see her of medical photography, MDT input etc and most cases get rejected.Dr [redacted] Dr [redacted]
09/05/2022 Third Party Consultation Ms [redacted] Rennie
09/05/2022 Document Image Docman Attachment
09/05/2022 Administration Clinical Letter HMP Cornton Vale General Surgery Ms [redacted] Rennie
06/05/2022 Third Party Consultation Mr S [redacted] Mccallum
06/05/2022 Document Image Docman Attachment
06/05/2022 Administration Clinical Letter HMP Cornton Vale Clinical Notes Mr Sharon Mccallum
06/05/2022 Third Party Consultation Mr [redacted] Mccallum
06/05/2022 Document Image Docman Attachment
06/05/2022 Administration Clinical Letter HMP Cornton Vale Patient letter Mr [redacted] Mccallum
05/05/2022 Surgery consultation Dr [redacted] Kildare
05/05/2022 Ongoing review ANP [redacted] J.Kildare
Actions
See bloods - all normal
See Micro report - tongue swab - moderate growth of Candida species - for Fluconazole 50mg OD 7/7 Dr [redacted] Kildare
05/05/2022 Ongoing review Listed for GP clinic today - to discuss testing for coeliac disease again - see prev entries - unfortunately I have nothing further to add at this stage - in order for us to confirm/refute a diagnosis of coeliac disease we need accurate serology which involves eating gluten for at least 6 /52 prior to testing.

Letter from Dieticians back in Jan 22 state that gluten senstivity is unlikey but could be wheat [redacted] - [redacted] therefore exclude wheat from diet but would still be able to eat rice crispies etc and wouldnt need to worry about contamination.

I have not seen her today but sent a letter outling this. [redacted] has already been seen by ANP J.McKeich last week for a fairly lengthy appointment. Dr [redacted] Kildare

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

05/05/2022 Triage Ms [redacted] - No Data Recorded
04/05/2022 Third Party Consultation Mr Sharon Mccallum
04/05/2022 Document Image Docman Attachment
04/05/2022 Administration Kardex HMP Cornton Vale Pharmacy Mr [redacted] Mccallum
04/05/2022 Other Miss [redacted] Mckeich - No Data Recorded
04/05/2022 Third Party Consultation Ms [redacted] Rennie
04/05/2022 Document Image Docman Attachment
04/05/2022 Result Results HMP Cornton Vale All results Ms [redacted] Rennie
02/05/2022 Triage Ms [redacted] Durrant
02/05/2022 Indirect encounter sample provided for labs however unable to send due to it being a bank holiday. new sample pots sent to patient with letter advising of same. Dr [redacted] Sayers
02/05/2022 Triage Ms [redacted] Sinclair
02/05/2022 Medication - risk monitoring Prescribed Anusol returned to Health Centre for disposal as pt does not want to use this. Disposed of 020522 Ms [redacted]
02/05/2022 Consultation
Seen in healthcentre to advise of recent advice from GP- no evidence of gluten intolerence test therefore patient is encouraged to undertake this test.
Patient advises that she is not happy with this outcome and she has requested to speak to Dr Sayers to discuss options.
Advised that I will list for GP discussion.

[redacted] SN
02/05/2022, 10:06 Ms [redacted]
30/04/2022 Results recording Dr [redacted] Sayers
29/04/2022 Serum C reactive protein level = mg/L <5 Dr Craig Sayers
29/04/2022 Serum amylase level = 35 U/L U/L Dr [redacted] Sayers
29/04/2022 Glomerular filtration rate = mL/min Abnormal >59 Dr [redacted] Sayers
29/04/2022 Serum urea level = 3 mmol/L Dr [redacted] Sayers
29/04/2022 Serum creatinine = 63 umol/L Dr Craig Sayers
29/04/2022 Serum chloride = 108 mmol/L Dr [redacted] Sayers
29/04/2022 Serum sodium = 138 mmol/L Dr [redacted] Sayers
29/04/2022 Serum potassium = 5 mmol/L Dr [redacted] Sayers
29/04/2022 Urea and electrolytes = <none> Dr [redacted] Sayers
29/04/2022 Serum albumin = 41 g/L Dr [redacted] Sayers
29/04/2022 Serum total protein = 67 g/L Dr [redacted] Sayers
29/04/2022 AST serum level = 17 U/L U/L Dr [redacted] Sayers
29/04/2022 Serum alanine aminotransferase level = 18 IU/L Serum ALT level - Dr [redacted] Sayers
29/04/2022 Serum alkaline phosphatase = 91 U/L U/L - ALP Ref. Limit for patients <30 days old is 0-380 iu/L
ALP Ref. Limit for patients <17 years old is 0-425 iu/L
ALP Ref. Limit for adults (>17 years) is 0-130 iu/L Dr [redacted] Sayers
29/04/2022 Serum total bilirubin level = 5 umol/L Dr [redacted] Sayers
29/04/2022 Liver function test = <none> Dr [redacted] Sayers
30/04/2022 Results recording Dr [redacted] Sayers
29/04/2022 Nucleated red blood cell count = 0 10^9/L 10^9/L Dr Craig Sayers
29/04/2022 Basophil count = 0.1 10^9/L 10^9/L Dr [redacted] Sayers
29/04/2022 Eosinophil count = 0.3 10^9/L 10^9/L Dr [redacted] Sayers
29/04/2022 Monocyte count = 0.5 10^9/L 10^9/L Dr Craig Sayers
29/04/2022 Lymphocyte count = 1.9 10^9/L 10^9/L Dr [redacted] Sayers
29/04/2022 Neutrophil count = 3.7 10^9/L 10^9/L Dr [redacted] Sayers
29/04/2022 Mean corpusc. Hb. conc. (MCHC) = 344 g/L Dr [redacted] Sayers
29/04/2022 Mean corpusc. haemoglobin(MCH) = 28.9 pg Dr [redacted] Sayers
29/04/2022 Packed cell volume = 0.378 ratio Dr [redacted] Sayers
29/04/2022 Mean corpuscular volume (MCV) = 84 fL fl Dr [redacted] Sayers
29/04/2022 Red blood cell (RBC) count = 4.5 10^12/L 10^12/L Dr [redacted] Sayers
29/04/2022 Platelet count = 303 10^9/L 10^9/L Dr [redacted] Sayers
29/04/2022 Total white cell count = 6.4 10^9/L 10^9/L Dr Craig Sayers
29/04/2022 Haemoglobin estimation = 130 g/L Dr Craig Sayers
29/04/2022 Full blood count - FBC = <none> Dr [redacted] Sayers
29/04/2022 Triage Ms Jak-Leanne Durrant
29/04/2022 Indirect encounter Advised that Dr.Sayers has checked outside medical records and there in no evidence of gluten intolerance tests. Will list for nurse clinic to advise [redacted] of same however I am doubtful that she will be convinced to participate in the test. Dr [redacted] Sayers
29/04/2022 Triage Ms [redacted] Durrant
29/04/2022 Blood sample taken = Sent to lab for testing Dr [redacted] Sayers
29/04/2022 Consultation S - Listed by ANP for nurse clinic
B - Bloods, stool sample, discuss gluten free diet
A - Seen in treatment room with S/N Jill Ramsay. Bloods obtained as requested by ANP. Stool sample pots and Qfit given with instruction, advised to return on Monday morning as no transport to labs over weekend.

SPS kitchen staff have advised that they will no longer be providing gluten free food items that can be ordered on prescription due to their budget, therefore Georgie requires a prescription for certain food items. It had been advised that there was no formal evidence of a blood test for this intolerance on vision and so the purpose of todays consultation was to dicuss this with [redacted] Georgie advised me that she would not be able to manage the 6 week period of consuming gluten in her diet that is required prior to the test, and so was unwilling to participate in this. She then became very emotional and advised me that she had been in hospital numerous times for reactions to gluten and lacose - the last admission being as some point earlier this year. States that she has had the blood test taken when she was younger and had a repeat of same in HMP Grampian and again in Corntonvale which Dr.sayers carried out when she was first admitted, nil on vision to support this statement. Advised Georgina that i would discuss her [redacted] with the ANP as she should have evidence on her medical records of the relevent test. ANP K [redacted] advised that ANP L [redacted] has access to global clinical portal and so she may be able to access same.
R - [redacted] is very distressed with the prospect of having to restart a gluten diet. Listed for ANP clinic to discuss further ?Access medical records in order to avoid a repeat test.

J Durrant
PCT
29/04/22 14:02 Dr [redacted] Sayers
28/04/2022 Other Miss J [redacted] Mckeich

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28/04/2022 Consultation ANP entry, reponse received from Dr [redacted]
Hi Jackie,
there is a referral in to Glasgow - let me chase this up and update them that she is in CV.
[redacted]
Dr Imogen [redacted] (she/her)
Specialty Doctor [redacted] Health Miss [redacted] Mckeich
28/04/2022 Consultation ANP entry:
Email sent to Dr [redacted] regarding labiaplasty, see below:
Hi Dr [redacted]
Seen GS DOB: 4/12/91, spin 131344 today in Cortonvale.
She was asking if I could speak to you regarding her referral to Glasgow for possible labiaplasty.
Your entry on vision from Dec 21 states there is lots of prep work to be done prior to a decision being made regards to surgery.
GS is keen to go ahead with this and the prep work.
She was released on parole however is now readmitted till 2025.
I would appreciate if you could look into this/see patient when next in,
kindest regards
[redacted] McKeich
ANP
Miss [redacted] Mckeich
28/04/2022 Other Miss [redacted] Mckeich - No Data Recorded
28/04/2022 Triage Ms Jak-Leanne Durrant
28/04/2022 Asthma Dr [redacted] Sayers
28/04/2022 Other Mis [redacted] Mckeich
28/04/2022 Consultation Seen patient for review has few issues:
1. re long standing abdo pain
c/o abdo pain
present for years
pains to lower left abdomen
states has had grumbling appendix for years
pain also to upper gastric region
pain occurs intermittantly
has had pain x 3 in last week
starts middle of abdomen
travels round back
describes pain as sharp, spasm
triggered by food, bigger the meal/increase in pain
pain can last up to 2 hrs
nothing makes it better
meds: biscacodyl, laxido, peppermint caps, - states taking as prescribed
Bladder - urgency, then goes, passes little
Bowels - last moved this morning, regular, normal stool, states stool consistency changes depending if takes medication
Appetite - ok
fluids - at least 2 litres per day
states had cholecystecomy at 19 years
Also has hx haemorrhoids
o/e mobilising normally
climbed onto examination couch with no difficulty
no difficulty sitting/standing
abdo symmetrical
no skin changes
no jaundice
no rashes
abdo soft non tender
bowel sounds present
no referred pain/gaurding
patuient PR'd, chaperone present, small external haemorrhoid present, no blood on removal finder - patient requesting treatment for same,
states tried anusol with no benefit, have prescribed anusol HC.
Plan - urine dip done - negative
for bloods, FBC, U&E, LFT, CRP, amylase
stool for helicobacter
stool for qFit
stool for faecal calprotectin
if loose stool sample for C&S
Listed in outcome column for same
2. was seen at sexcual health clinic for removal rod and administration depot, states has small lump neat vagina, wants secons opinion,
states has lump just above clitoris
o/e skin over clitoris and surrounding area appears normal
no lumps or bumps felt
small pin sized reddish spot right of clitoris
appears to be possible ingr4own hair - recenlt shaved
no evidence infection, iflammation, abcesses
no discharge
patient advised
Patient asking if Dr [redacted] has done referral to Glasgow for labiaplasty, see entry 6/12/21, discussed response from Glasgow with patient,
still wants to go ahead with same, advised will contact Dr [redacted] for update.
3. Patent stated was seen at hospital yesterday for breast lumps, states was not impressed with consultation, felt she was not being listened
too, has [redacted] done left breast, advised to wait on letter from consultant.
4. Asked to check patient's neck again for lumps, examined, no swelling of lymph nodes, patient advised
Mouth, states nystatin not helped tongue, swab taken
Patient appears very focused on personal health issues, advised once all the results come back and are normal there will be no clinical
reason to investigate further.
5. Patient requesting information on trichomoniasis, NHS info leaflet issued. Miss [redacted] Mckeich

26/04/2022 Triage Ms [redacted] Durrant

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26/04/2022 Consultation S - NRF received
B - Review of face wound
A - Seen in treatment room with S/N Jill. Small scab to right cheek, appeared more like dry skin - no open wounds. Georgina advised that it was looking much better, not causing any itchiness or pain. Also discussed at visit upcoming hospital app, advised that I could not give a date however she has an appointment coming up soon (27/04/22). Also noted lump on labia, can see that this was assessed last week by SH nurse [redacted] however Georgina feels it has worsened and would like a second opinion. States that the lump is not causing any pain at present however sometimes causes some bleeding. Wished to discuss in more depth with ANP so will list for same. Georgie was very concerned regarding family history of cancer and the appearance of these new lumps.
R - Already listed for ANP clinic Wednesday- reason unknown. Advised [redacted] I would list her to discuss this in greater detail with the GP/ANP.

J Durrant
PCT
26/04/22 1713 Dr [redacted] Sayers
20/04/2022 Triage Miss [redacted]
20/04/2022 Consultation Seen by nurse in treatment room.

HCA L Kirkpatrick recieved a phone call from Pebbles staff regarding a [redacted] the [redacted] had on her face feeling that it may be a bite. [redacted] was brought up to the health center where I look at the [redacted] had just been outside playing football and appeared with a red face and moist skin, warm all over and therefore was hard to assess redness and heat.

The [redacted] was on her face, left cheek. The [redacted] looked to have a scab over it looking slightly yellow in colour and was slightly hard under the surface. The [redacted] was cleaned with prontosan and a small inadine patch was placed in situ with a mepore plaster. Gerogie advised to replaced both inadine and mepore after showering this evening-products with patient.

Advised to infrom staff of any worsening symptoms.

S/N N [redacted]
20/04/22
1536hrs. Miss [redacted] Thompson
20/04/2022 Triage Ms [redacted] Rennie
20/04/2022 Next hospital appointment Forth Valley - Area 2 Breast Clinic - 27-04-2022 @ 09:30 Ms [redacted] Rennie
19/04/2022 Triage Ms Rachel Lawson
19/04/2022 Remov subcutaneous contraceptive implant othr healthcre prov First service recall due: Claim Expiry Date: Ms [redacted]
19/04/2022 Seen in [redacted] health clinic Wished nexplanon removed had for approx 1 year and still getting periods regularly and quite heavy states didnt have this issue with previous implant, had considered depo as alternatibve however felt this was [redacted] to ovarian cysts bursting previously, previous had coil and felt it did not sit comfortably and had to be removed due to the pain. Happy to try POP so desogestrel 75micrograms daily prescribed.
Nexplanon removed with chaperone L Hamilton, using lidocaine 1% Batch 124503 EXP 06/2024, wound care advice given.
Concerned about boils around vagina nil evident at this time, slight tender area with evidence of healing spot/ingrown hair top of right labia, no evidence of infection at this time.
Asking if Drmurray had feedback regarding referral to Glasgow advised I would ask and let her know, also asking if could be referred naywhere else if declined or how to go private. Will speak to Dr [redacted] and let Georgina know or arrnage appointment to discuss same.
R [redacted] - [redacted] health nurse
19/04/2022 11:15 Ms [redacted]
19/04/2022 Liquid based cervical cytology screening Ms [redacted]
18/04/2022 Triage Ms [redacted] Rennie
18/04/2022 Failed encounter - hospital appointment Hospital letter sent direct to patient. Contacted 01324 566639 and left details for the appointment to be re-arranged. Forth Valley - Area 2 Breast - 26/04/2022 @ 09:30 - POssible 2 hour appointment Ms [redacted] Rennie
14/04/2022 Triage Ms [redacted] Rennie
14/04/2022 Next hospital appointment Forth Valley - Area 2 Breast - 26/04/2022 @ 09:30 - POssible 2 hour appointment Ms [redacted] Rennie
13/04/2022 Other Miss [redacted] Mckeich - No Data Recorded
13/04/2022 Referral Letter Miss [redacted] Mckeich
13/04/2022 SCI Referral Letter
13/04/2022 Other Mis [redacted] Mckeich
13/04/2022 Consultation Seen patient, c/o ongoing breast lumps
has new breast ,lumps - lump above nipple left breast
states has mass of lumps side left breast
requesting "water ducts" drained - states was told when last seen that ducts were full
states also has lump on back of neck
Has family hx breast cancer - [redacted]
[redacted] - mouth/throat cancer
Menstral cycle - has rod insitu, inserted 1 year ago
never had periods for years, has bled 3 weeks ago for 1st time, lasted for 8-9 days, seen by SH, no concerns, states may be [redacted] to MH/s
o/e looks well
chatty
oth breasts examined
look symmetrical
skin - no obvious cellulitis/infection/pigmentation/changes
nipples appear normal, no retraction
no discharge
right breast - small circular pea size lesion just above aveolar
left breast - small circular pea sized lesion inner right side chest
1 x small pea shaped lesion just above left nipple
1 x small pea shaped lesion upper outer side left breast (approx 2 oclock)
1 x small pea shaped lesion lower left axillae, midline
No pain on palpation breasts/lesions
states had lesion to back of neck, nil felt
neck examined - nad except glands to either side neck slightly swollen
no pain
mouth - normal mucosa
no swelling to back of throat
no hoarsness
no difficulty swallowing
no change taste/smell
no pain

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no difficulty swallowing
no change taste/smell
no pain
no oral ulcers
tongue - thick creamy plaque over back of tongue
apyrexial
? oral thrush
Rx nystatin
Patient given worsening advice
patient very concerned has breast cancer - long chat re same
Has been seen previously by FV for same (2018)
Referred back to surgical team at FV, patient happy with this
Also states has occasional abdo pain, previous cholelststectomy, due to time current consulttation advised would relist patient for another appoinmtne to discuss same, no acute issues at present.

Miss [redacted] Mckeich

12/04/2022 Other Miss [redacted] Mckeich - No Data Recorded
12/04/2022 Surgery consultation Dr [redacted] Kildare
12/04/2022 Ongoing review Listed for GP clinic
I have unfortunately been unable to see Georgie today due to other appointments over running and some unscheduled work
I have relisted for ANP clinic tomorrow Dr [redacted] Kildare
11/04/2022 Triage Mrs [redacted] Watt
11/04/2022 Mental health review Named Nurse Session
Spoke with [redacted] at 14.00hrs in health centre.
Initially [redacted] was very angry. Reported that she didn't feel people were listening to her. She spoke of feeling very distrustful of SPS staff, believes they are checking her mail and phone calls more than other prisoners in order to "catch her out".
Believes that SPS Lesley Whyte and others at RMT such as [redacted] are being destuctive in her forward progression and wants to know what she has to do in order to have more positive feedback from RMT.
She reports feeling stressed and her stress is manifesting with both psychological and physical symptoms.
Recently been having more frequent heavy periods and heavy nose bleeds. Has also been discovering lumps in her breasts and neck which have been referred to GP/ANP.
Another issue of [redacted] is her outstanding request for Labiaplasty which she had been discussing with Dr [redacted] last in Dec 2021. Since she will now remain in custody until July 2025, [redacted] would like Dr [redacted] to follow up this referral.
Outcomes:
I have spoken to Dept Team Leader C [redacted] who will be attending the next RMT to feed back to me their expectations for [redacted] and their plans going forward and will meet up with her in 2 weeks to discuss this.
Appointment with R [redacted] SH Nurse 12/04/22 to discuss referral with Dr [redacted]
Appointment with Dr Kildare 12/04/22 ti discuss lumps.

[redacted] Watt
SSN MH
11/04/22 15.40 Dr [redacted] Sayers
11/04/2022 Triage Mrs [redacted] - No Data Recorded
11/04/2022 Triage Ms Karly [redacted]
11/04/2022 Consultation [redacted] seen patient in treatment room at 10:30AM due to lump on chest. Patient states one now on back of neck also. Informs me she prone to get cysts and is extremely worried incase they are cancerous. Lots of reassurance given. Felt small lump on back of neck and above left breast area. Will relist for ANP/GP appointment.
S/N [redacted] 10:48AM Ms Karly [redacted]
08/04/2022 Administration Ms S [redacted]
08/04/2022 Self-referral Nurse (lump on breast). Well person clinic Ms Sonja [redacted]
04/04/2022 Triage Ms [redacted]
04/04/2022 Mental health review [redacted] attended the Health Centre on Saturday 2nd April 2022 due to excess bleeding and feeling physically unwell regarding same
Observations were taken which were all within normal range
At that time she stated that she was struggling with her mental health and was needing to speak with a nurse
I advised that I meet with her Sunday which she was agreeable
I thereafter met with [redacted] on Sunday 3rd April wherein I advised that I would note her concerns with regards to her mental health and pass same over to her named nurse [redacted] Watt
[redacted] went on to say that her "stress" disorder was getting worse as she feels that she is being held back from the SPS regarding progression
She voiced that she is constantly being held back from progression/open estate and this is impacting on her physical and mental stress
She states that the bleeding she has been suffering from lately is caused by stress
There was not much in way of issues surrounding her mental health with [redacted] and it was more the fact that she wanted the health centre staff to pass over to SPS that impact of lack of progress was triggering her "stress disorder"
There was no [redacted] regarding risk to Georgie at this time
Plan: Passed over to named nurse [redacted] Watt for information

[redacted] Walker
SSN
04/04/2022 12.25 Dr [redacted] Sayers
02/04/2022 Triage Ms [redacted]
02/04/2022 Ongoing review Asked to see Georgina by Peebles staff. Georgina is complaing of heavy bleeding & feeling unwell due to same. Met with Georgina. She does not think this is [redacted] to a period as she has a rod in. Rod was inserted approximately 1 year ago. Observations carried out - BP 133/76; HR 76; SP02 99% ; Temp 37 - all within normal range. She in unsure if this is [redacted] to stress. Advised Georgina that I would catch up with her tomorrow for a chat as she reported that she is feeling stressed at the moment due to the "system"

SSN [redacted]
02/04/2022
15.10 Dr [redacted] Sayers
31/03/2022 Triage Ms [redacted] Durrant

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31/03/2022 Consultation S - Asked to reveiw by officers at 16:45
B - ?increased bleeding, suggesting emergency app
A - Seen in treatment room with SI/N [redacted] Georgina states that she started having vaginal bleeding this morning and that she needed to be seen as a matter of urgency. States has contraceptive rod in situ, does not usually have periods however had one a couple of months ago. Has been getting spells pf dizziness however none at present. Obs as follows - BP - 126/75, HR - 73, SP02 - 98%, T - 36.8, RR - 16. Second standing bp obtained after 5 minutes standing at 122/84. States has been through 3 sanitary pads since this morning. Also reporting increased stress due to some bad news recently.
R - Reassured bleeding most likely period and that observations all normal. Advised to monitor over next few days and if any concerns to make nursing staff aware, advised that increase in stress could also be having an affect.

J Durrant
PCT
31/03/2022 17:10 Dr [redacted] Sayers
25/03/2022 Triage Mrs [redacted] Differ - No Data Recorded
15/03/2022 Surgery consultation Dr [redacted] Kildare
15/03/2022 Consultation GP Review
FTF with PPE
A few issues discussed again
1) Feels MH is still poor and asking to see [redacted] - is on Quetiapine 100mg nocte
Advised to put referral in through MHT for this

2) On going left wrist pain - see prev entry - still had no word from PT yet - advsied very long waiting list
Feels Celecoxib is not working and asking for Pregabalin - explained reasons for why this is not appropriate - she is not overly accepting as has been on before but ultimately have told her its just not an option for her
Due to start [redacted] the gardens tomorrow - anxious that this might worsen it, advised that its best that she keep active - [redacted] for physical and mental health all round
She is asking about a Tubigrip again for support - advised we dont have these
Continue Celecoxib for now

3) Feels her spine is out of alignment -longstanding history of low back pain, wanting a back brace or operation to "crack spine"
Advised her to engage with PT/ do exercises prev taught to strengthen this - she isnt convinced that this will work but I have advised her no tablets take pain away completely and she needs to focus on non-pharm methods

4) Lump in forehead - wanting to have a brain scan for this as feels its realting to a head injury she sustained when she was a [redacted]
Lump is longstanding and hasnt gotten bigger
No neuro deficit, LOC or confusion, no other symptoms
Lump itself can be painful at times but no headaches

O/E
As per my prev entry this looks more like a seb cyst to me, above left eye brow, no red flag features

Advised to leave alone, benign lesions are not usually removed on the NHS unless becoming troublesome in terms of size or other symptoms Dr [redacted] Kildare
10/03/2022 Third Party Consultation Ms Jane Rennie
10/03/2022 Document Image Docman Attachment
10/03/2022 Result Results Microbiology Ms [redacted] Rennie
08/03/2022 Other Miss Jackie Mckeigh - No Data Recorded
08/03/2022 Surgery consultation Dr [redacted] Kildare
08/03/2022 Failed encounter Listed for GP clinic - has an activity on this afternoon and is unable to attend for review - relisted for my clinic next week Dr [redacted] Kildare
03/03/2022 Triage Miss [redacted] Hegarty
03/03/2022 Suspected coronavirus infection 03/03/22
S- covid test
A - incell
A - swab done by her self
HCA lyn hamilton
17/20 Miss [redacted] Hegarty
03/03/2022 Suspected coronavirus infection Close contact to Covid-19, PCR test obtained and sent to labs. Awaiting result

s/n Sinéad Hegarty 03/03/22 12:11 Miss [redacted] Hegarty
01/03/2022 Triage Ms Michelle Cleary
01/03/2022 Letter encounter to patient to inform her of recent change from Celecoxib 100mg to 200mg Celecoxib from ANP [redacted] Cleary
HCA
01/03/2022
15.28 Ms [redacted] Cleary
01/03/2022 Triage Mrs [redacted]
01/03/2022 Ongoing review ANP
L [redacted]
unable to see patient due to having no rooms available today
however on reviewing notes georgina has ongoing pain to knee and ankle for 1 month
no recent injury
pain sporadic, worsens throughout the day and with exercise
no swelling visable when examined by nursing staff
no radiation
pain described as an ache
she is currently on celecoxib 100mg BD - i will increase this to 200mg BD and if not effective in 4-6 weeks can re-refer for review

also was complaining of pain in head
small lump evident
same was prev reviewed by GP on 7/1/22
pain now both sides of head radiating from forehead to back of skull
describes shooting pain
due to this i will re-list for appt

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

28/02/2022 Triage Ms [redacted] Durrant
28/02/2022 Consultation S - listed for PCT nurse clinic
B - Family history of Arthritis, ongoing pain to knee and ankle
A - Seen in clinic. States that aprox 1 month ago, started having trouble with left knee. States many previous injuries to this knee however none recently. Nothing in particular noted to cause pain, comes on sporadically, worsens on exercise and throughout the day. States elevation does not help. Feels it is swollen, no swelling visible on examination. Describes pain as "achy" and also feels same pain in ankle however pain is localised, does not radiate from knee. Currently takes Amitryptiline for back pain. Also mentions pain in head, states previous brain injury? nil in notes of same. Can see from recently appointment with GP, same issue discussed. Advised me that pain now on both sides raditating from forehead throught back of skull. Describes as shooting pain. Slight lump visible and some redness however patient informed me that would need to be reviewed without makeup to see properly.
R - Listed for ANP clinic, ?blood tests for CRP, FBC, ?ibuprofen prescription- await ANP assessment. Dr [redacted] Sayers
22/02/2022 Administration Ms Sonja [redacted]
22/02/2022 Medication - risk monitoring Spotcheck carried out on weekly medication. Quetiapine, Lymecycline and Amitriptyline counted and correct Dr Craig Sayers
22/02/2022 Self-referral Nurse (knee swollen/painful). Ms Sonja [redacted]
16/02/2022 Triage Ms [redacted] Cleary - No Data Recorded
08/02/2022 Third Party Consultation Ms [redacted] Hedley
08/02/2022 Document Image Docman Attachment
08/02/2022 Administration Kardex HMP Cornton Vale Pharmacy Recording Sheet Ms [redacted] Hedley
04/02/2022 Triage Ms [redacted] Cleary
04/02/2022 Letter encounter to patient to inform patient of recent prescription for Ceterizine .
[redacted] Cleary
HCA
04/02/2022
17.25 Ms [redacted] Cleary
04/02/2022 Other Miss [redacted] Mckeich
04/02/2022 Consultation ANP actions, request for antihistsmine, no allergies, rx cetirizine Miss [redacted] Mckeich
04/02/2022 Other Miss [redacted] Mckeich - No Data Recorded
04/02/2022 Triage Ms [redacted] Rennie - No Data Recorded
04/02/2022 Other Miss [redacted] Mckeich - No Data Recorded
03/02/2022 Triage Mrs [redacted] Watt
03/02/2022 Mental health review Named Nurse Contact
I met with [redacted] this afternoon at 1600hrs. She was bright and reactive. Happy to chat about how things were going.
Remains annoyed at having In Possession medication removed as she still states she has not been abusing Quetiapine and that her packet was short.
We discussed about how she was not attending for AM medication as she felt Sertraline made her feel angry whilst in this environment and her mood was currently not requiring an antidepressant. She also stated at this time she was coping without the morning dose of Quetiapine.
We agreed that it would be discussed at CTM to discontinue AM medication of Sertraline and Quetiapine and the re issue of In Possession medication going forward.
We have agreed to meet again in 1 week to carry out Full mental health assessment and care plan.
[redacted] Watt
SS/N MHT
03/02/22 19.50 Dr [redacted] Sayers
03/02/2022 Third Party Consultation Mrs [redacted] Rennie
03/02/2022 Document Image Docman Attachment
03/02/2022 Administration Kardex HMP Cornton Vale Pharmacy Mrs [redacted] Rennie
03/02/2022 Other Dr [redacted] Kildare - No Data Recorded
03/02/2022 Referral Letter Dr [redacted] Kildare
03/02/2022 SCI Referral Letter
31/01/2022 Triage Mrs [redacted] Watt - No Data Recorded
28/01/2022 Surgery consultation Dr [redacted] Kildare
28/01/2022 Consultation GP Re[redacted]
FTF with PPE
1) Georgie continues to report GI symptoms of bloating and intermittent constipation.
Was given [redacted] last night with mince and gravy and has come out with a couple of ulcers in her mouth which she is attributing to this
Dietician referral still pending
Is adamant that she wont repeat her TTG screen whilst eating gluten as feels it will just make her symptoms 100x worse

Explained to her that it is difficult to move forward with her symptoms if she is not willing to do tests to get accurate results etc
We have decided to leave things be and await the Dietician input

2) Still has on going breast pain and feeling of them being engorged - see my prev entry and exam carried out by ANP

For trial of anti-inflammatory for 6/52 and if no improvement could consider routine referral to breast clinic but advised likely to be hormonal in nature
Naproxen she has tried in the past and doesnt work so try Celecoxib instead

3) Feels she has left sided carpal tunnel
Describing a tingling and feeling in her left palm, spreading upwards but has no tingling or paraesthesia in her fingers
Worse when she bends her hand - for example when moving the bins in the laundry
Feels she has had the pain for a few weeks but has been worse over the last week

O/E
No muscle wasting
Tinels test weakly positive - feels tingling in the palm
Phalens test postive

Advised
NSAID for pain - already prescribed as above
Refer PT for splints/exercises and failing that for Ortho opinion Dr [redacted] Kildare
28/01/2022 Celecoxib 100mg capsules Supply: (60) capsule 1 CAPSULE TWICE DAILY Dr [redacted] Kildare
27/01/2022 Triage Ms [redacted] Cleary - No Data Recorded
27/01/2022 Triage Mrs [redacted]

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27/01/2022 Consultation ANP
L[redacted]
SPS advised patient is at polmont at the dentist
re-listed for tomorrow
26/01/2022 Triage Ms Karly [redacted]
26/01/2022 Consultation Seen in treatment room at 10:05 AM about left hand c/o of stabbing pain from thumb to wrist. Area slightly swollen. Had full range of movement in wrist and fingers. Will relist for ANP/GP Appointment.
S/N Karly-Jane [redacted] 10:16 AM Ms Karly [redacted]
25/01/2022 Triage Ms Erin Hedley
25/01/2022 Self-referral for Nurse clinic received and logged.
[redacted] Hedley
Health Centre Administrator
25.01.22
12:05 Ms Erin Hedley
24/01/2022 Triage Ms [redacted] Cleary - No Data Recorded
23/01/2022 Triage Ms Clodina Lane
23/01/2022 Consultation Seen in triage c/o of painful left ear ongoing for 2 weeks
Has been using cotton buds to clean ears - advised not to do this
Reports not bleeding or discharge
O/e right ear looks normal, left ear slightly inflammed and small pocket of pus evident
Advised to apply clod compress to ear, utilise paracetamol for pain and px ciprofloxacin ear drops from 7 days BD
Advised to return to HC if symptoms dont resolve
C.Lane 12.57

21/01/2022 Other Miss [redacted]kie Mckeich
21/01/2022 Consultation ANP action, request to prescribe alternative to polytar shampoo as Lloyds unable to source, rx dermax shampoo, patient should try this for at least 4 weeks before requesting alternative. Miss [redacted] Mckeich
21/01/2022 Triage Ms E[redacted] Hedley
21/01/2022 Self-referral for Nurse clinic received and logged.
[redacted] Hedley
Health Centre Administrator
21.01.22
11:16 Ms [redacted] Hedley
20/01/2022 Triage Ms [redacted] Kilpatrick
20/01/2022 Seen by health care assistant Made Georgina aware of new prescription of shampoo.

Laura Kilpatrick
HCA
20/01/2022
20:52HRS Dr [redacted] Sayers
20/01/2022 Triage Mrs [redacted] Kane
20/01/2022 Consultation ANP
L.Kane
ANP Actions
see entry 19/1/22 requesting alternate shampoo
prescribed polytar scalp shampoo
if no improvement then can be reviewed
19/01/2022 Triage Mrs Aileen [redacted]
19/01/2022 Triage Seen in for nurse referral form. Psoriasis is quite prominant in her head. Her skin is dry and she feels it's tight when she takes her make up off. Has tried T-gel and Capasol shampoos,nothing is working. ?if MO would prescribe something else or if Georgina can be reviewed.

[redacted] McKay
PCT nurse
0934am Mrs Aileen [redacted]
17/01/2022 Medicine Management Ms Laura [redacted] - No Data Recorded
17/01/2022 Triage Ms [redacted] Hedley
17/01/2022 Self-referral for Nurse/Dermatology clinic received and logged.
[redacted] Hedley
Health Centre Administrator
17.01.22
11:35 Ms [redacted] Hedley
13/01/2022 Triage Mrs [redacted] Watt
12/01/2022 Consultation Asked to see following removal of in possession medication due to a discrepancy.
[redacted] staff looking to place her on MORS. Temperature 36.8, BP 117/77, SATS, 99% Pulse 73. Speech and gait normal. No clinical indication for MORS.
Jane Watt
S/N MHT
12/01/22 15.46 Dr [redacted] Sayers
12/01/2022 Other Mr [redacted]e Macpherson
12/01/2022 Mental health assessment Unplanned consultatioin as was approached by Georgina whilst in unit 5 (Peebles house). Unhappy that i had not made contact with her Personal officer last week asa promised, though i explained i was here now to do so. Georgina always plays the victim and constantly moans about her lack of progression after speaking with her personal officer i explained that we merely discussed the same issues that Georgina constantly complains about and that there is a process to follow. During this conversation Georgina never at any time mentioned that she had a problem with her medication issue, and that she was "short" of any weekly medications. I brought the conversation to an end and left the unit.

Donnie Macpherson
MHN
1030
12/01/2022. Mr Donnie Macpherson
12/01/2022 Other Dr [redacted] Kildare

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12/01/2022 Seen by health care assistant , , I received a phone call this morning from Peebles main office regarding Georgina reporting missing medication from her weekly medication she received yesterday, 11/01/2022. Georgina reported this to SPS staff on the backshift last night the early shift were chasing it up this morning.
The [redacted] is she only received 7 quetiapine 100mg not 14 quetiapine 100mg as normal, other weekly medication is correct.
I went over to the [redacted] to see Georgina and check medication pack she was given by me the day before. The package clearly [redacted] 14 quetiapine 100mg to take one twice a day. The packet had one stripe of 7 tablets with one taken out, the night time dose from the night before. I explained before I came over I checked her kardex and recording sheet, our invoice and called Lloyds pharmacy.
The recording sheet was recorded as != 14x100mg.
The invoice was quetiapine 100mg x 14.
Lloyds said they dispense quetiapine 100mg in either two stripes each having 7 tablets or one stripe of ten and one stripe of 4. They also have it recorded at quetiapine 100mg x 14 it is doubled check before being dispensed for delivery.
I spoke with SPS informing them I will be returning to the health centre bring this to my manager attention and how to deal with the situation.
On speaking to SPS staff they informed me that intel have quite a bit of intel on Georgina regarding medication, swapping, selling and so on.

Doctor giving all information and karex. The weekly medication has been changed to supervised as from today and any incell medication has been removed from cell.
Quetiapine 100mg x 6
Amitriptyline 25mg x 6
Amitriptyline 50mg x 6
Lymecyline 408mg x 6
Meloxicam 15mg x 10
Bisacodyl 5mg x 61 - should only be 56 in packet.
Peppermint Oil 0.2ml x 80 - two packets
Named nurse also informed who happened to see Georgina this morning which there was no mention of medication error.

Ms Elaine Mcadam
12/01/2022 Ongoing review MOA - [redacted] is 7 Quetiapine short - despite getting 14 tablets yesterday - Pharmacy have investigated and are certain that 14 tablets were issued
There have been some intel abot meds being swapped in Peebles
[redacted] is also on Amitriptyline, Propranolol, Paroxetine but is refusing to take Propranolol therefore stop
For her safety unfortunately meds will now be made supervised but this can be reviewed in due course Dr [redacted] Kildare
11/01/2022 Triage Ms Karly [redacted]
11/01/2022 Consultation Received a call from SPS in Peebles informing me Georgie had only received 7 quetiapine tablets and says on bag should be 14 for her weekly medication. I informed SPS to check in room incase she possibly removed. They checked and did not find. Patient anxious due to worrying incase if she takes one tonight/tomorrow morning she will not get anymore. I informed SPS to tell her to take and will look into this issue tomorrow Ms Karly [redacted]
10/01/2022 Triage Ms Michelle Cleary - No Data Recorded
08/01/2022 Triage Ms [redacted] - No Data Recorded
07/01/2022 Referral Letter Dr [redacted] Kildare
07/01/2022 SCI Referral Letter
07/01/2022 Surgery consultation Dr [redacted] Kildare.
07/01/2022 Consultation GP Review
FTF with PPE
Fairly long discussion today about mutiple physical issues that worry her
She had a long FHx cancer and is concenred about this
She is of the opinion that nothing is being done for her

1) GI symptoms remain troublesome for her. Intermittent constipation, bloating and abdo cramps that are central in nature.
Feels it is [redacted] to her diet and normally excludes gluten and lactose when not in prison and has been on this diet before when in HMP CV but at the moment isnt sure if this is being followed
At the moment has reduced her diet down to just eating crisps as most things she eats are worsening her pain and is concerned she will lose weight as a result of her poor diet
No meds help
Has had lap chole aged 19 and also been in FVRH for admission with impaction
Both coeliac screens were negative but this was taken when she wasnt eating any gluten containing products and is not wishing to eat gluten to get a diagnostic test as it will make her pain worse
Weight today 81Kg

Refer Dieticians for opinion ?IBS

2) Concerned about her breasts that have been tender and feel a bit engorged - see ANP entry
Feels that she is unable to wear a normal bra and has to wear sports type bras as they dont cause her as much discomfort
Has a history of breast cysts and her maternal [redacted] died of breast cancer in her 30s so is understandably concerned
Bloods taken are all unremarkable
Advised examination performed 2/52 was reassuring and in absence of red flags does not meet criteria for USC referral but if symptoms of breast pain are on going for several weeks that could refer back to breast clinic routinely
Declined examination by me today as I am a male GP

3) Lump on forehead that looks like a small sebaceous cyst - left sided just above eye brow
She is wearing fairly thick make up so feels its hiding it today
Feels she needs a "brain scan"
Advised to leave alone for now as Derm/Minor ops will unlikely remove this

4) PV bleeding - describes erratic periods for last few years and followed by a bleed for last 8 days with spotting and some suprapubic discomfort
No urinary symptoms
Denies any PV discharge or risk of STI
Had contraceptive implant replaced 6/12 ago
Would feel more at ease if I could just refer her for a hysterectomy and bilateral mastectomy - explained that is not likely an option for her
She explained that she had follow up with [redacted] health clinic again next week to discuss on going PV bleeding
I didnt explore this further Dr [redacted] Kildare
06/01/2022 Other Mr Donnie Macpherson

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06/01/2022 Mental health assessment Follow up, [redacted] today was very frustrtated and appeared angry. Spoke at length about her physical conditions ? and how she felt that little was being done for her.
[redacted] also concerned that she is not being allowed to progress and is unhappy that she cannot move to Unit 3. Discussed that she found it difficult to control her Anger and frustration and that everyone appears to be against her.
Discussed with [redacted] that she has only been back in prison since July 2021, and it would be expected that she will need to show a good level of stability before progressing.
[redacted] is keen that i speak with her personal officer about her behaviours.
I will contact her personal officer at the first opportunity.

Donnie Macpherson
MHN
1435.
06/01/2022. Mr [redacted] Macpherson
06/01/2022 Other Miss [redacted] Mckeich - No Data Recorded
05/01/2022 Other Miss Jackie Mckeich - No Data Recorded
04/01/2022 Triage Ms [redacted]
04/01/2022 Seen in [redacted] health clinic States has been getting vaginal bleeding for approx 7 days, like a period, doesnt normally get period due to implant, however had implant replaced in last 6/12 so disscussed reaction to new implant might be different to previous.
Recently see ANP due to swollen tender breasts again could be due to period.
Very concerned that something is being missed in abdo and unhappy with previous abdominal scans aware that this is not point of todays appointment.
Plan review in 1/52 to see if issues still ongoing.
Aware next appointment will only be for [redacted] health/gynae issues.
R [redacted] - sexual health nurse
04/01/2022 14:27 Ms [redacted]
04/01/2022 Triage Ms Karly [redacted]
04/01/2022 Consultation Will relist for ANP appointment. Ms Karly [redacted]
04/01/2022 Consultation Below error not overdose of drug. Ms Karly [redacted]
04/01/2022 Overdose of drug Seen in treatment room today due to two small lumps present on forehead also states T-gel not helping and requies somehting el[redacted]ribed. Ms Karly [redacted]
31/12/2021 Triage Ms [redacted] Cleary
31/12/2021 Letter en[redacted]o patient to inform her of normal blood results.
[redacted] Cleary
HCA
15.15 Ms [redacted] Cleary
31/12/2021 Other Dr Craig Sayers
31/12/2021 Ongoing review MOA - bloods essentially normal (minimal decrease FSH) Dr [redacted] Sayers
30/12/2021 Surgery consultation Miss Claire Macmillan - No Data Recorded
30/12/2021 Third Party Consultation Ms Erin Hedley
30/12/2021 Document Image Docman Attachment
30/12/2021 Administration Clinical Chemistry Results Forth Valley Royal Hospital Labs Ms Erin Hedley
30/12/2021 Third Party Consultation Ms [redacted] Hedley
30/12/2021 Document Image Docman Attachment
30/12/2021 Administration Haematology Results Forth Valley Royal Hospital Labs Ms [redacted] Hedley
30/12/2021 Triage Ms Erin Hedley
30/12/2021 Self-referral for Nurse, Well Person and Mental Health clinics received and logged.
[redacted] Hedley
Health Centre Administrator
30.12.21
11:49 Ms [redacted] Hedley
24/12/2021 Triage Ms Laura Kilpatrick
24/12/2021 Seen by health care assistant in clinic for bloods, bloods already obtained.

[redacted] Kilpatrick
HCA
24/12/2021
10:10HRS Dr [redacted] Sayers
24/12/2021 Results recording Dr Jahangir [redacted]
23/12/2021 Serum oestradiol level = 289 pmol/L Dr Jahangir [redacted]
23/12/2021 Biochemical test = <none> Dr Jahangir [redacted]
23/12/2021 Human chorionic gonadotrophin level < 3 U/L Humn chorionic gonadotroph lev - U/L Dr Jahangir [redacted]
23/12/2021 Follicle stimulating hormone level = 2 U/L Follicle stimulating horm lev - U/L - Post-pubertal female follicular FSH 3-8 U/L LH 2-13 U/L Dr Jahangir [redacted]
23/12/2021 Serum prolactin level = 127 mU/L mU/L Dr Jahangir Khan
23/12/2021 Serum LH level = 3.1 U/L U/L Dr Jahangir [redacted]
23/12/2021 Endocrine studies = <none> Dr Jahangir Khan
24/12/2021 Results recording Dr Jahangir [redacted]
23/12/2021 Nucleated red blood cell count = 0 10*9/L 10^9/L Dr Jahangir [redacted]
23/12/2021 Basophil count = 0.1 10*9/L 10^9/L Dr Jahangir Khan
23/12/2021 Eosinophil count = 0.2 10*9/L 10^9/L Dr Jahangir [redacted]
23/12/2021 Monocyte count = 0.5 10*9/L 10^9/L Dr Jahangir [redacted]
23/12/2021 Lymphocyte count = 1.7 10*9/L 10^9/L Dr Jahangir [redacted]
23/12/2021 Neutrophil count = 3.9 10*9/L 10^9/L Dr Jahangir [redacted]
23/12/2021 Mean corpusc. Hb. conc. (MCHC) = 333 g/L Dr Jahangir [redacted]
23/12/2021 Mean corpusc. haemoglobin(MCH) = 28.3 pg Dr Jahangir Khan
23/12/2021 Packed cell volume = 0.399 ratio Dr Jahangir [redacted]
23/12/2021 Mean corpuscular volume (MCV) = 84.9 fL fl Dr Jahangir Khan
23/12/2021 Red blood cell (RBC) count = 4.7 10*12/L 10^12/L Dr Jahangir [redacted]
23/12/2021 Platelet count = 321 10*9/L 10^9/L Dr Jahangir [redacted]
23/12/2021 Total white cell count = 6.4 10*9/L 10^9/L Dr Jahangir [redacted]
23/12/2021 Haemoglobin estimation = 133 g/L Dr Jahangir Khan
23/12/2021 Full blood count - FBC = <none> Dr Jahangir [redacted]
23/12/2021 Triage Ms [redacted] Kilpatrick

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23/12/2021 Administration Listed in clinic for bloods as documented below.

Laura kilpatrick
HCA
23/12/2021
15:28HRS Dr [redacted] Sayers

23/12/2021 Triage Mrs [redacted]

23/12/2021 Consultation ANP
L.Kane
Patient seen to review bilateral swollen, tender breasts
states nipples usually inverted but since swelling nipples now out
OE very tender to touch, both breasts firm
no discharge from nipple
no eczema
no dimpling of skin
states [redacted] and [redacted] had breast ca
has implant therefore does not have menstrual cycle
been in prison for 4 months therefore [redacted] pregnancy test to rule this out - negative
states she is on anti-psychotics
IMP- ? hormonal, ?? elevated prolactin level
Plan- check bloods FBC, CRP for inflammation ? infection
- LH, FSH, prolactin and estrogen to be checked
will review back in 1 week with results to ? if she requires referal to breast clinic
- if prolactin levels high to refer to psychiatry to review anti-psychotic Dr [redacted] Sayers

23/12/2021 Triage Ms [redacted] Lawson - No Data Recorded

21/12/2021 Triage Ms [redacted]

21/12/2021 Occupational therapy Mental HEalth Occupational Therapy - Seen briefly whilst attending work party in laundry. [redacted] reported that since moving back to Peebles she is coping better and has tried hard to get into the "Christmas spirit". Reports that Christmas is normall a happy time for her and she is trying not to think about her RMT meeting until closer to the time. [redacted] aware that I am on Annual leave over the Christmas and New year period and will meet with her on my return to [redacted] the new year. Ms [redacted]

20/12/2021 Surgery consultation Miss Claire Macmillan

20/12/2021 Seen by triage nurse S: Seen in treatment room due to nurse referral
B: Patient breasts are tender to touch and very firm to touch.
A:
R: Listed for ANP to review. Miss [redacted] Macmillan

19/12/2021 Triage Ms [redacted] Kilpatrick

19/12/2021 Medication - risk monitoring Seen in cell for medication check,
check on Paroxetine Georgina stated that she no longer takes this medication mental health aware of same, Georgina also stated she is no longer taken propranolol also stated mental health team aware of same.
lymecycline check correct at this time
amtriptyline check correct at this time
Qutiapine check correct at this time

[redacted] Kilpatrick
HCA
19/12/2021
15:51HRS Dr Craig Sayers

17/12/2021 Other Mr Donnie Macpherson

17/12/2021 Mental health assessment Follow up. Met with [redacted] at her place of work. She was unaware that SPS had referred her due to increasing Paranoia. [redacted] presented as quite calm and relaxed and conversed at a normal rate rythym and tone.
[redacted] spoke at length regarding how she perceives the way she is treated within C/ Vale and seems to feel that no matter what she does she is regarded as an "Arsehole". When challenged on some of her behaviours Georgies became quite defensive blaming them on her upbringing, her "shitty" life her abuse and very much how she is a victim.
[redacted] spoke at length about how she cannot return to the Saltcoats area due to "Gang wars" and therefore is reluctant to transfer to Greenock as there is a close connection to some of her enemies.
[redacted] during interview tried to control said interview and had to be "reeled in" on numerous occassions.
[redacted] is fully aware of her many "conditions" and has plenty of insight and knowledge and coping skills to deal with these.

Donnie Macpherson
MHN
1045
17/12/2021 Mr Donnie Macpherson

16/12/2021 Triage Ms [redacted] Mclean - No Data Recorded

13/12/2021 Triage Ms [redacted] Broadfoot

Letter on: 13/12/2021 type: Referral
13/12/2021 Self-referral Referral for Nurse/GP received and logged
Sharon Broadfoot
Healthcare Administrator
13.12.21
15.21hrs Ms [redacted] Broadfoot

13/12/2021 Triage Mrs [redacted] Mckay

13/12/2021 Subcutaneous injection Pfizer booster given in left arm. BN 9707 Exp 06/2022

[redacted] McKay
PCT nurse
0109am Mrs [redacted] Mckay

07/12/2021 Triage Ms [redacted] Hedley

07/12/2021 Self-referral for Mental Health clinic received and logged.
[redacted] Hedley
Health Centre Administrator
07.12.21
10:45 Ms [redacted] Hedley

06/12/2021 Triage Dr [redacted]

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06/12/2021 Seen in [redacted] health clinic Seen in SH clinic re labiaplasty.

FV declined referral as don't do labiaplasty. I've spoken to a consultant in FV about if there are other healthboards that might accept a referral ? Glasgow. Reponse from Glasgow team'
' We don't perform routine labiaplasty in GGC anymore but they can be seen in clinic and then have to go through a long process of medical photography for their labia which will then be reviewed by a multidisciplinary panel (plastic surgeon, gynaecologist, [redacted] etc) who will decide whether surgery is justified or not. Most cases are declined. It would be worth explaining the process to the patient before referring her as some of them decline going through medical photography etc .

Discussed this with Georgina - she still would like referral. I will make a referral to Glasgow this week and will send a copy of this referral to georgina.

Dr Imogen [redacted]
GMC 7421177 Dr [redacted]
02/12/2021 Third Party Consultation Ms [redacted] Hedley
02/12/2021 Document Image Docman Attachment
02/12/2021 Administ[redacted] Kardex HMP Cornton Vale Pharmacy Recording Sheet Ms [redacted] Hedley
01/12/2021 Triage Ms [redacted] Kilpatrick
01/12/2021 Administration Listed in mental health waiting list as requested by dr.

[redacted] Kilpatrick
HCA
01/12/2021
15:06HRS Dr [redacted] Sayers
01/12/2021 Other Dr [redacted] Kildare
01/12/2021 Ongoing review MOA - TTG result negative at 0.4 - has already been acted on - see LK entry 25/11/21 Dr [redacted] Kildare
01/12/2021 Consultation Pharmacy informed that [redacted] has handed back her Paroxetine and Propranolol and is no longer wanting to take these meds - for MHT review please to explore reasons behind this Dr [redacted] Kildare
01/12/2021 Third Party Consultation Ms [redacted] Hedley
01/12/2021 Document Image Docman Attachment
01/12/2021 Administration Haematology Results Forth Valley Royal Hospital Labs Ms [redacted] Hedley
29/11/2021 Results recording Dr Craig Sayers
23/11/2021 Anti-tissue transglutaminase level = 0.4 U/mL Anti-tissue transglutnase lev - U/ml - Normal= <= 7.0,Equivocal= 7.0 -10.0 Positive = >10.0 Dr [redacted] Sayers
23/11/2021 Autoimmune profile = If screening for coeliac disease, this result is only valid if the person was
eating gluten at least twice a day for previous 6 weeks.
If known to have coeliac disease, this negative result suggests adherence to gluten free diet. Dr [redacted] Sayers
23/11/2021 Haematology test = Immunology NHS Greater Glasgow & Clyde Dr Craig Sayers
23/11/2021 Autoimmune profile = <none> Dr [redacted] Sayers
26/11/2021 Third Party Consultation Ms [redacted] Hedley
26/11/2021 Document Image Docman Attachment
26/11/2021 Administration Administration HMP Cornton Vale Administration Gluten Free Food Prescribable Product List Ms [redacted] Hedley
26/11/2021 Triage Mrs Aileen A[redacted]ander
26/11/2021 Consultation Spoke with [redacted] regarding her diet today. After meeting with ANP [redacted] has been advised that for one meal a day, she should have foods that she is allergic to. Bloods will then be taken 6 weeks later to confirm a diagnosis. [redacted] is being transferred to Greenock today. Advised all of her paperwork will be scanned on but [redacted] should advise staff on arrival that this is the plan for her care.

Ailen Alexander SN
26/11/2021 11.00 Mrs Aileen [redacted]
26/11/2021 Third Party Consultation Ms Erin Hedley
26/11/2021 Document Image Docman Attachment
26/11/2021 Administration Kardex HMP Cornton Vale Pharmacy Ms Erin Hedley
26/11/2021 Triage Ms [redacted] Hedley - No Data Recorded
25/11/2021 Triage Ms Michelle Cleary - No Data Recorded
25/11/2021 Triage Mrs Louise [redacted]
25/11/2021 Consultation ANP
L[redacted]
Patient had TTG bloods done
however these have been obtained whilst she has medical marker from kitchen for gluten and lactose free diet therefore this may not reflect an accurate result
there does not appear to have formal diagnosis of coeliac disease
to get this diagnosis I suspect patient will have to come off lactose and gluten free diet and have this in at least 1 meal for a minimum of 6 weeks to show accurate results
patient will require this to be discussed with her
I will pass over to PCT Dr [redacted] Sayers
25/11/2021 Triage Ms [redacted] Hedley - No Data Recorded
25/11/2021 Triage Ms [redacted] Hedley - No Data Recorded
24/11/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
24/11/2021 Other Dr [redacted] Kildare
24/11/2021 Ongoing review MOA - request to stop Mebeverine and to swap to Peppermint Capsules instead - stopped on Kardex and Peppermint capsules written up as requested Dr [redacted] Kildare
23/11/2021 Triage Ms [redacted] Cleary - No Data Recorded
23/11/2021 Other Miss [redacted] Mckeich
23/11/2021 Consultation ANP action
ANP K[redacted]
kardex not available action relisted for tomorrow
23/11/2021 Triage Dr [redacted] Swinson

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23/11/2021 Mental health assessment Seen in clinic. Presenting with agiaition, anxiety, low mood, emotional dyregulation and anger.
Parole hearing on Thursday - exacerbating problems.
States abruptly stopped paroxetine and propranolol one wee ago. INformed that current presentation not surprising given this.
Plan
Ongoing MHT input and keen to try decider skills.
No change to meds currently. Dr [redacted] Swinson
23/11/2021 Triage Ms [redacted] Kilpatrick
23/11/2021 Seen by health care assistant Seen in clinic verbal consent given to obtain bloods, TTG bloods obtained and sent to labs.

[redacted] Kilpatrick
HCA
23/11/2021
09:52 Dr [redacted] Sayers
23/11/2021 Triage Ms [redacted] Kilpatrick
23/11/2021 Seen by health care assistant blood pressure obtained as documented below.
I will make nursing staff aware of reading,

[redacted] Kilpatrick
HCA
23/11/2021
09:51HRS Dr [redacted] Sayers
23/11/2021 09:49:00 BP 178 / 116 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Dr [redacted] Sayers
22/11/2021 Medicine Management Ms [redacted]
22/11/2021 Consultation Georgina [redacted] no longer wants her mebeverine medication as believes it can show as false positive for other medications on MDT. Requested peppermint oil capsules instead. Advised to put in referral slip to discuss with GP/ANP. Medication returned to health centre.

[redacted] Pharm Asst 14.26 Ms [redacted]
19/11/2021 Third Party Consultation Ms [redacted] Hedley
19/11/2021 Document image Docman Attachment
19/11/2021 Administration Administration HMP Cornton Vale Refusal Form Ms [redacted] Hedley
19/11/2021 Triage Ms [redacted] Kilpatrick
19/11/2021 Seen by health care assistant Seen in clinic to obtain bloods for TTG, Georgina asked what the bloods were for after speaking to nurse [redacted] McMullen [redacted] advised me these were for celiac disease, Georgina declined to have same obtained. Treatment refusal form signed by writer and patient. Georgina also asked if I would obtain her bloods as she may think she is a diabetic, I explained that Georgina needs to be a slip in to see the nurse with regards to this. No further [redacted] were raised at this time.

[redacted] Kilpatrick
HCA
19/11/2021
10.25HRS Dr [redacted] Sayers
19/11/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
18/11/2021 Triage Ms [redacted] Cleary
18/11/2021 Seen by health care assistant
Listed in HCA clinic for TTG BLOODS .
[redacted] Cleary
HCA
18/11/2021
18.35 Ms [redacted] Cleary
18/11/2021 Triage Miss [redacted] Hegarty
18/11/2021 Suicide risk Pre nurse assessment -
[redacted] was seen in her room. Stated that she has always from the ages of 8 has [redacted] thoughts and thoughts of self harm acting upon these for a long time but currently she has no intention to act upon these thoughts.

[redacted] stated that she is struggling with not knowing if she is staying at Cornton Vale or being transferred out due to altercations in Pebbles. [redacted] stated that SPS officers told her that 'she didn't fit into Peebles' and that's why she is being moved. Georgie states she feels that this has affirmed her own feelings she holds surrounding self and believes this is also a reason for her emotional out bursts of late. [redacted] went on the say that MHT team don't see her - we then explained the 7 day referral and reminded her that she has been in contact with MHT numerous times in the last week- George felt that 7 days were too long to wait as it made her feel like she was [redacted] cared about. It was explained that this process is for everyone. [redacted] then moved on and spoke about her [redacted] regarding male SPS staff which she then explained that she would redirect this concern to the SPS.

[redacted] stated that she has her parole hearing next week this is making her feel fearful and another thing that she is directing blame of her emotional outbursts on. [redacted] said that she does have coping strategies and skills but does not utilise these when needed. Throughout the interaction [redacted] was unwilling to accept responsibility of over own actions throughout interaction.

[redacted] CC -
[redacted] denied any thoughts of suicide or self [redacted] at this time and explained that she didn't feel the need to be on the TTM suicide prevention strategy . [redacted] expressed [redacted] around being transferred, stated again that SPS staff don't feel like she belongs in Peebles which is negatively affecting her. Pebble's staff members were also called to the case conference SPS staff [redacted] and [redacted] and [redacted] agreed that there were no [redacted] that would lead them to believes [redacted] needed to remain on TTM. Their recommendation was to bring George back to Pebbles.
Georgie shared her [redacted] surrounding her medication suggesting it is unfair that she has not been offered depo injection, S/N D McPherson has referred G Smith to Psychiatrist. [redacted] expressed that she has had a lot going on recently and continued to move blame of emotional outbursts on these factors. She stated that she has been at [redacted] recently and on the first day of trial her abuser plead guilty. All staff in agreement that [redacted] can be taken off TTM and moved back to Pebbles, [redacted] happy with same outcome.

[redacted]
HMP Cortonvale
18.11.21
s/n Sinéad Hegarty 11:30 Miss [redacted] Hegarty
18/11/2021 Triage Mrs [redacted]

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18/11/2021 Consultation Met with Georgina this morning in ross house to discuss Gluten Free options for her to order as per nhs forth valley gluten free product list. she can select up to 14 units per month.
she selected;
1x GF seeded loaf sliced 400g
2x [redacted] Crispies 375g
1x penne pasta 500g
1x crackers 200g
2x crispbread 150g
warburtons GF fresh white rolls.
[redacted] will receive some items to her cell and others will go to kitchen.
formulary with prescription codes i will place with kardex for prescribers access.
listged for anp/gp to prescribe.
georgie has only requested to use 10 of her 14 units at the minute until she sees what she likes and will let us know what, if anything she would like added.
c[redacted] sn 0902am Mrs [redacted]
16/11/2021 Triage Ms Laura Kilpatrick - No Data Recorded
16/11/2021 Triage Ms L[redacted]
16/11/2021 Occupational therapy Mental Health Occupational Therapy - Met with [redacted] for planned contact. [redacted] reported to experiencing cold like symptoms and has not attended work this morning. Reported that she is struggling with her physical and mental health and has completed self referrals for a number of services including dietician, dentist, MHT and sick clinic nurse review. I explained scope of MH OT role and what support I am able to offer her , [redacted] reported that she wanted to talk about issues that she is finding stressful to prevent deterioration in mental health. Reflected to Georgie the skills that she has for managing her own emotions whilst acknowledging that the next few weeks may be more stressful due to upcoming parole meetings. Agreed that MH OT contact would remain fortnightly. OT Plan - Continue to develop skills for self management. Ms [redacted]
16/11/2021 Triage Ms [redacted]
16/11/2021 Consultation ANP actions
ANP K [redacted] L Mckeich
patient is coeliac
contacted Lloyds chemist for formulary details
patient is entitled to 14 unit per month in relation to her age and Gender.
Nursing staff to discuss products list with patient then prescription kardex can be written
15/11/2021 Triage Ms Erin Hedley
15/11/2021 Self-referral for Nurse, Dermatology and Diabetes clinics received and logged.
[redacted] Hedley
Health Centre Administrator
15.11.21
12:40 Ms [redacted] Hedley
12/11/2021 Triage Ms [redacted] Kilpatrick
12/11/2021 Letter encounter to patient Letter sent to Georgina to make her aware that the doctor has not prescribed her an antiemetic

[redacted] Kilpatrick
HCA
12/11/2021
16:23 Dr [redacted] Sayers
12/11/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
12/11/2021 Other Dr [redacted] Sayers
12/11/2021 Ongoing review MOA request for IM antiemetic
Nil to suggest intractable vomiting so same not appropriate - not prescribed Dr [redacted] Sayers
12/11/2021 Triage Ms [redacted]
12/11/2021 Medication - risk monitoring Spotcheck carried out 11/11/21. Paroxetine, Propanolol, Lymecycline,Quetiapine noted to be correct but one extra of Amitriptyline 25mg and 50mg. Pt not sure why?The two tablets returned to H/C and disposed of. Ms [redacted]
11/11/2021 Triage Ms [redacted] Kilpatrick
11/11/2021 Letter encounter to patient Letter sent to make Georgina aware that the doctor has changed her prescription, from meloxicam to mebeverine.

[redacted] Kilpatrick
HCA
11/11/2021
21:10HRS Dr Craig Sayers
11/11/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
11/11/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
11/11/2021 Other Mr Donnie Macpherson
11/11/2021 Mental health assessment Follow up clinic . [redacted] presented as a lot more relaxed and calmer today. States feeling reasonably well today and the atmosphere in Peebles is a lot better.
Discussed that due to COP26, and the fact that all her peers have been "squeezed" into one section of Peebles that this would have become a stressor and would cause her to have a heightened level of Anxiety.
[redacted] after been seen twice appears to be, becoming quite demanding and seems to feel that i have taken over her care.
Has been advised that my intervention is temporary as she has a named nurse, and i am only stepping in until her return.
Advised that i will see her at some point next week to discuss any outcome from the CTM.

Donnie Macpherson MHN
1445
11/11/2021 Mr Donnie Macpherson
11/11/2021 Other Dr [redacted] Kildare
11/11/2021 Ongoing review MOA - note previous entries and recent admission for constipation under the surgeons
D/W SN [redacted] - [redacted] continues to describe abdo pain with associated constipation and feels her Meloxicam is not helping with the pain and making her feel sick - therefore stop
Try regular Mebeverine TDS for symptoms over next 6-8/52
Not for opiates as this will constipate her further Dr [redacted] Kildare
10/11/2021 Triage Mr [redacted]

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10/11/2021 Had a chat to patient I saw [redacted] in the health centre in the company of HCA Kilpatrick in order to apologise for a misunderstanding that we had yesterday. She had approached me in the health centre to inform me that she was feeling terrible and asking if I was going to assess her today. I had misinterpreted this as an abusive tirade and advised [redacted] that I would not be spoken to like that however on reflection I realised Georgie was in fact describing how she was feeling and not making accusations of me. She accepted my apology and I assured her this wouldnt happen again.

[redacted]
MH DTL
1555 Mr [redacted] Kennedy
10/11/2021 Triage Ms Erin Hedley
10/11/2021 Self-referral for Nurse clinic received and logged.
[redacted] Hedley
Health Centre Administrator
10.11.21
12:12 Ms [redacted] Hedley
09/11/2021 Triage Ms [redacted] Mclean
09/11/2021 Telephone encounter Peebles SPS officer Dorothy called to ask if Georgina was able to get an anti-sickness injection. Reported she was not prescribed this. [redacted] asked if staff could contact the kitchen to give suggestions about other foods Georgina may tolerate as she is eating a lot of pasta and they believe this is contributing to her being constipated.
[redacted] SSN MHT
09/11/2021 2015hrs Ms [redacted] Mclean
09/11/2021 Other Mr Donnie Macpherson
09/11/2021 Mental health assessment Triage clinic. Refer to Care [redacted] for information.

Donnie Macpherson
MHN
1100
09/11/2021. Mr Donnie Macpherson
09/11/2021 Triage Ms Rachel Lawson - No Data Recorded
06/11/2021 Third Party Consultation Ms [redacted] Broadfoot
06/11/2021 Document Image Docman Attachment
06/11/2021 Administration Administration HMP Cornton Vale Letter to Hospital Ms [redacted] Broadfoot
06/11/2021 Third Party Consultation Ms [redacted] Broadfoot
06/11/2021 Document Image Docman Attachment
06/11/2021 Administration Administration Forth Valley Royal Hospital Discharge Summary / Liberation Ms [redacted] Broadfoot
05/11/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
05/11/2021 Other Dr [redacted] Sayers
05/11/2021 Ongoing review Discharge letter accessed on Clinical Portal - Constipation for laxatives Dr [redacted] Sayers
04/11/2021 Triage Mrs [redacted]
04/11/2021 O/E - temperature level = 36.1 degC Dr Craig Sayers
04/11/2021 Pulse oximetry monitoring 99 % Dr [redacted] Sayers
04/11/2021 O/E - pulse rate 80 beats/min Dr [redacted] Sayers
04/11/2021 16:35.00 BP 107 / 70 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading Dr [redacted] Sayers
04/11/2021 Consultation Patient returned from hospital with diagnosis of constipation.
Patient states she had an enema whist in hospital and returned with a prescription for laxido to take daily - same prescribed by dr.
Patient asking regarding codeine that she was issued whilst in hospital. No record of being discharged on same and none sent back with her.
Discussed with patient regarding codeines side effects being constipation and the rationale for hospital not prescribing same.
Also discussed with dr kildair on return who advised to utilise meloxicam and paracetamol.- patient advised of same.
Observations obtained as recorded and all within normal limits.
discharge letter for review by gp tomorrow
C [redacted] sn 16.33hrs Dr [redacted] Sayers
03/11/2021 Third Party Consultation Ms [redacted] Hedley
03/11/2021 Document Image Docman Attachment
03/11/2021 Administration Administration HMP Cornton Vale Clinical Notes Clinical notes by ANP Ms [redacted] Hedley
03/11/2021 Other Miss Jackie Mckelch
03/11/2021 Consultation Asked to see by nursing staff, patient c/o abdo pain, distended abdomen, according to officers looks [redacted] did not look like this yesterday.
PMH: asthma, backpain, cholecystectomy, breasts cysts, gynae issues, illicit drugs, MH, eating disorders
Patient states pain started this morning, was woke up with it (6am)
Feels tight, sharp, tingling on upper abdomen radiating down to lower abdomen
constant since 6am, getting worse, describes pain as 8/10
Feels as if something is going to give way in between legs
mouth
Patient able to mobilise but rocking back and forward while sitting
o/e looks in pain
colour normal
managed to eat lunch (gluten intolerant), felt worse after this
usually appetite usually poor, has eating disorder, does not always eat meals
recently felt sick with pain, not vomitied
no issues with chewing & swallowing,
abdo appears distended
pain in upper left and ight quadrant
gaurding present on palpation
reduced pain lower right and left quadrant
no referred pain
abdo feels distended upper have
soft lower, sides
bowel sounds present
no skin changes
bowels - last moved this morning, small drops, moves [redacted] basis, stool hard, can have diarrhoea also, takes regular laxatives, states has blood in stool, after wiping
bladder - states passing more than usual, states passed urine approx 30 times this morning, passed small amount each time went, no buring, no pain, no blood, feels as if bladder constantly full, need to empty bladder but cant
no vaginal bleeding
weigh was 75kg in April 21 now 85kg

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weigh was 75kg in April 21 now 85kg
T37.4, BP130/60, sata 98%, p75, R16
Contacted on call surgical registrar, patient to be transferred to SAU at FV, letter written, nursing staff and [redacted] staff informed.

Miss [redacted] Mckeich

03/11/2021 Other Miss Jackie Mckeich - No Data Recorded
02/11/2021 Third Party Consultation Ms Erin Hedley
02/11/2021 Document Image Docman Attachment
02/11/2021 Administration Kardex HMP Cornton Vale Pharmacy Ms [redacted] Hedley
02/11/2021 Triage Ms [redacted] Hedley
02/11/2021 Self-referral for Nurse, Dermatology, Diabetes, Epilepsy, Heart and Mental Health clinics received and logged.
[redacted] Hedley
Health Centre Administrator
02.11.21
11:06 Ms [redacted] Hedley
26/10/2021 Triage Mrs [redacted] Watt
26/10/2021 Mental health review Dicussed at CTM
Allocated to Jane. For medication discussion with Dr Swinson(Increase Quetiapine)

[redacted] Watt
SS/N MHT
26/10/21 15.20 Dr [redacted] Sayers
26/10/2021 Other Dr [redacted] Kildare
26/10/2021 Ongoing review MOA - request to change shampoo from Capasal - try T-gel instead Dr [redacted] Kildare
26/10/2021 Triage Mrs Aileen [redacted]
26/10/2021 Consultation S - Seen at nurses clinic.
B - concerned about 'lump' to front of shin.
A - On examination no lump felt but may be dense muscle, reassured no concerns. Georgina reports that she never got change of shampoo for dry patches on scalp, apologised as this may have been missed.
R - Will list for GP/ANP today, Georgina grateful.

[redacted] SN
26/10/2021 09.34 Mrs Aileen [redacted]
25/10/2021 Triage Mrs [redacted] Watt
25/10/2021 Mental health review Named nurse contact - Was asked to see [redacted] this afternoon as a matter or urgency due to her aggressive presentation. [redacted] explained to me that she was extremely angry about one of her peers who she believed was deliberately trying to antagonise her by using her position in the kitchen not to provide [redacted] with the correct diet. Georgie feels so angry that she is afraid she will become physically aggressive towards this peer. [redacted] admits she is stressed about gynae referral and future parole hearings. This she understands is affecting her mood. She requested a review in her medication. I advised she will be discussed at CTM on 26/10/21 where staff nurse Watt will inform Dr Swinson of [redacted] presentation. [redacted] was much calmer at the end of our conversation and awaits the outcome of CTM

SN Jane Watt
15.30hrs
25/10/21 Dr [redacted] Sayers
25/10/2021 Triage Ms [redacted] Hedley
25/10/2021 Self-referral for Nurse/Dermatology and Dental clinics received and logged.
[redacted] Hedley
Health Centre Administrator
25.10.21
11:21 Ms [redacted] Hedley
25/10/2021 Triage Dr [redacted]
25/10/2021 Seen in [redacted] health clinic Still awaiting Parole. Discussed I will send a referral to Glasgow re labiaplasty Dr Imogen [redacted]
GMC 7421177 Dr Imogen [redacted]
22/10/2021 Third Party Consultation Miss [redacted] Broadfoot
22/10/2021 Document Image Docman Attachment
22/10/2021 Administration Administration HMP Cornton Vale In-Possesion Medication Check Miss [redacted] Broadfoot
20/10/2021 Triage Mrs Jane Watt - No Data Recorded
19/10/2021 Triage Ms [redacted]
19/10/2021 Occupational therapy Mental Health Occupational Therapy - Met with [redacted] for planned contact, seen in laundry as attending work party this morning [redacted] reported that she is feeling more tired than usual, described stressors relating to court case yesterday and impact that this had on how she was feeling. We discussed the benefits of maintaining her structured daily routine, as [redacted] recognises that her mental state deteriorates when not engaged in regular activity. Encouraged [redacted] to rest between shifts at work, and to aim to return to her normal sleeping pattern and to avoid sleeping too much during the day. Ms [redacted]
17/10/2021 Triage Mrs [redacted] Watt
17/10/2021 Mental health review Named Nurse Contact
Met up briefly with [redacted] this afternoon to arrange an appointment on 20/10/21 for Triage assessment.
[redacted] is aware that writer will be assessed during this and is happy with this.
[redacted] Watt
S/N MHT
17/10/21 17.00 Dr [redacted] Sayers
11/10/2021 Triage Ms Erin Hedley
11/10/2021 Self-referral for Mental Health clinic received and logged.
[redacted] Hedley
Health Centre Administrator
11.10.21
11:21 Ms [redacted] Hedley
11/10/2021 Triage Mr [redacted]

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11/10/2021 Telephone encounter Contacted by Officer [redacted] at Peebles House to inform us that Georgina had presented to [redacted] over the weekend reporting that she has been experiencing a recurring dream whereby she slits her own throat. She denies suicidality or plans to follow through with this act of self [redacted] she is visualising but is nonetheless concerned by this - [redacted] staff were wondering if it were possible to assess Georgina. It is documented that S/N Watt has scheduled a Comprehensive Assessment with Georgina this week, therefore issues can be addressed then.

[redacted]
MH DTL
1005 Mr Connor [redacted]
08/10/2021 Third Party Consultation Ms [redacted] Hedley
08/10/2021 Document Image Docman Attachment
08/10/2021 Administration Administration HMP Cornton Vale Medication Spot Check Ms [redacted] Hedley
08/10/2021 Surgery consultation Dr [redacted] Sayers
08/10/2021 Ongoing review Ongoing review in relation to acne as per entry 1/10/21
Feels that use of a "scrub" from another prisoner has been beneficial.
Minimal acne evident today
Suggested thast she self purchases same item if she has found this beneficial
Reports Benzoyl peroxide 5% irritates her skin - advised to only use this when significant flares occur and reduced to 2.5% strength

Also c/o ongoing back pain.
Same assessed fully by ANP McKeich on 16/9/21
Has previously attended physio, used TENS (found painful), applied Deep Heat (couldn't tolerate), numerous NSAIDs/paracetamol.
No red flags
Agreed to increase Meloxicam to 15mg daily, also increase amitriptyline to 75mg nocte for reported sciatic element
Stressed the importance of her keeping active - suggested attending gym
Explained that we were unlikely to get her completely pain free and she will likely need to accept a degree of chronic pain Dr [redacted] Sayers
05/10/2021 Triage Ms [redacted] Beveridge
05/10/2021 Drug addiction therapy 1-1 support SPS Requested RPP

S - Met with Georgina at 14:30 for Prison Healthcare Addictions Service one to one support. Verbal consent to proceed obtained.

B - Georgina is currently not prescribed any MAT and does not have any subsance misuse issues. Georgina has been recalled recently and the SPS emailed regarding a relapse prevention plan.

A - Georgina was well kempt when we met in the Link Centre. Georgina is currently working in the Laundry work party. Georgina has a parole hearing tomorrow as is understandably worried about the outcome. Georgina engaged well and maintained eye contact through out the session.
Georgina was bright, reactive with normal rate and tone.

Georgina does not have any addictions issues. She was under the influence at the time of her offense and has licence conditions around drugs and alcohol as a result. Georgina was out on lisence for 7 weeks before her recall and did not have any alcohol or have any urge or desire to rink. When asked directly if Goergina craved alcohol she clearly stated that she does not she also raely drinks when in te community only at special occassions.
Today we discussed her recall and completed the latter half of the relapse prevention plan that describes what Georgina would do if she was put in a situation where she was surrounded with drug and alcohol and how this would be a risk towards her and her lifestyle. We concluded that she would leave and call her emergency contacts and inform social work. Georgina is happy with this and understands the repercussions of not working with this ie coming back to prison. Georgina has the physical copy of her plan.

R - Gerogina successfully completed a RPP and has a copy of it, case closed

[redacted] Beveridge, Prison Healthcare Addictions Team, 15:40
Ms [redacted] Beveridge
04/10/2021 Triage Ms [redacted] Hedley - No Data Recorded
04/10/2021 Triage Dr Imogen Murray
04/10/2021 Seen in [redacted] health clinic Listed for smear - smear not due until Feb 2022. Discussed re-referral for labiaplasty. Awaiting parole hearing on Wednes - if [redacted] in CV will list to be seen in clinic next week so we can discuss futher.

Dr [redacted] Murray

Dr Imogen [redacted]
01/10/2021 Triage Mrs Aileen [redacted]
01/10/2021 Consultation S - Seen at nurses clinic.
B - Nurse referral submitted.
A - Georgina concerned as acne is returning, does not feel current treatment (lymcycline and benxoyt peroxide) working any longer. Also has patches of ?psoriasis in scalp, currently on Caprocin shampoo but does not feel this is an effective either.
R - Agreed to list for ANP/GP for review, Georgina happy with care.

Aileen [redacted] SN
01/10/2021 10:45 Mrs Aileen [redacted]
30/09/2021 Triage Ms [redacted] Hedley - No Data Recorded
30/09/2021 Third Party Consultation Ms [redacted] Hedley
30/09/2021 Document Image Docman Attachment
30/09/2021 Administration Administration HMP Cornton Vale Medication Spot Check Ms [redacted] Hedley
29/09/2021 Triage Mrs [redacted] Watt
29/09/2021 Mental health review Report for ICM.
Report sent to Angela France regarding input from NHS OT and Mental Health Team prior to her liberation.
Met with [redacted] this afternoon to discuss her being reallocated to myself and ICM report.
[redacted] is happy to rengage with me and have arranged to meet up week beginning 11/10/21 to commence FMHA.
[redacted] Watt
S/N J Watt
29/09/21 16.30 Dr [redacted] Sayers
28/09/2021 Triage Ms [redacted]

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Georgina Smith 04/12/1991 662/91/440 **All Consultations**

28/09/2021 Occupational therapy Mental Health Occupational Therapy - Attempted to meet with [redacted] for planned contact. [redacted] declined same, appeared abrupt in manner at this time with no reason provided for this refusal. [redacted] requested that I make contact with ICM worker Angela prior to her meeting on Thursday as she would like to request that I attend. Advised [redacted] that I am unable to attend meeting on Thursday as I am on annual leave but that I would be happy to provide information with her consent if this is requested prior to Thursday. Ms [redacted]

23/09/2021 Triage Ms Sharon Broadfoot

23/09/2021 Self-referral Nurse/Gp & MHT referral received and logged

[redacted] Broadfoot
Support Services Co-ordinator
23.09.21
15.03hrs Ms [redacted] Broadfoot

22/09/2021 Triage Ms Denise [redacted]

22/09/2021 Consultation Cookhouse have asked that healthcare meet with [redacted] to discuss gluten free diet. the cookhouse have been ensuring that a gluten free diet available, which [redacted] has declined to eat and is choosing to eat off the normal menu.
e mail sent to cookhouse..
I have checked the healthcare records and met with Georgie this afternoon, she is very much wanting to stick to her special diet of Lactose and gluten free, she has advised that she was given out of date food and also biscuits and wraps had milk within them , this would have an impact on her well being.

Can you please continue with the food as before, she has advised that the wrap that she eat today that was supposed to meet the intolerance actual has given her a skin reaction that is evident.

Hope this helps and if we wish further advice we may need to get a dietician involved
Denise [redacted]
tEAM lEADER
14.15 Ms Denise [redacted]

21/09/2021 Triage Ms [redacted] Edwards

21/09/2021 Occupational therapy Mental HEalth Occupational Therapy - Attempted to meet with Georgie, attending work party. Will attempt contact next [redacted]

20/09/2021 Triage Ms [redacted]

20/09/2021 Medication [redacted] Spotcheck carried out on 17/09/21.All medications counted as correct Ms [redacted]

16/09/2021 Other Miss [redacted] Mckeich

16/09/2021 Consultation Seen patient, c/o right sided backpain
present for few weeks
no hx injury
states has hx curved spine and sciatica due to epidural
pain intermittant
pain to right side chest over ribs
worse at night time, when lying flat and when bending
improves when up and moving around
pain feels like a pressure
can last up to few hours
taking paracetamol and celecoxib with little effect
no bladder problems
bowels = prone to constipation, normally takes bisacodyl (has tried lactulose and senna with little effect), normally moving twice weekly, usually has to strain
o/e chest clear
heart sounds normal
no cough/wheeze
no tnderness palpation spine
tender over lower ribs right side
some right loin pain
no bruising or skin changes
full movement legs/hips
no decreased sensation
urine checked - negative
Imp: ? MSK
Discussed analgesia, changed to meloxicam 7.5mg daily
Rx bisacodyl for bowelsd
Requested capoasal shampoo for dry scalp, prescribed.
Miss [redacted] Mckeich

16/09/2021 Other Miss [redacted] Mckeich

16/09/2021 Consultation ANp task, request to change medication to in[possesion, already changed. Miss [redacted] Mckeich

16/09/2021 Other Miss [redacted] Mckeich - No Data Recorded

14/09/2021 Triage Ms [redacted] Kilpatrick

14/09/2021 Letter encounter to patient Letter sent to Georgina to make aware of recent [redacted] health screening was negative.
Chlamydia - Negative
Gonorrhoea - Negative

[redacted] Kilpatrick
HCA
14/09/21
19:31

Dr [redacted] Sayers

14/09/2021 Surgery consultation Dr [redacted] Kildare

14/09/2021 Ongoing review MOA - request for meds to be prescribed in cell - now in Peebles following move from [redacted] - Kardex rewritten for weekly issue Dr [redacted] Kildare

13/09/2021 Triage Ms [redacted] Kilpatrick

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13/09/2021 Consultation Would MOA please consider prescribing Georgina meds in cell please? Georgina has previously had her medication in cell.
[redacted] Kilpatrick
HCA
13/09/21
18:44 Dr [redacted] Sayers
11/09/2021 Third Party Consultation Ms [redacted] Broadfoot
11/09/2021 Document Image Docman Attachment
11/09/2021 Administration Microbiology Results Forth Valley Royal Hospital Microbiology Ms [redacted] Broadfoot
10/09/2021 Triage Ms [redacted] Warman
10/09/2021 Consultation S- [redacted] in nursing clinic
B- Nurse referral form
A- Complining of back pain since return to custody last month. States going from Right ribs to back and on a deep inspiration feels this pain to the left ribs. Tender on palpation of back and right side, no pain on left side only on deep inspirations. Worse when sitting down or lying in bed. States feels like "vice around back and pushing everything together" and that it is making her bones "crumble" States doesnt feel muscular. History of back problems and pain however feels this is diffrent SP02 97% Pulse 72, Bp 104/66. Family history of artheritis and cancers. No trauma, no awkward movements reported.
R- List for ANP clininc for Monday.

[redacted] Warman
PCT
11:09 Dr [redacted] Sayers
09/09/2021 Triage Ms [redacted] Hedley
09/09/2021 Self-referral for Nurse clinic received and logged.
[redacted] Hedley
Health Centre Administrator
09.09.21
13:18 Ms [redacted] Hedley
08/09/2021 Other Miss [redacted] Mckeich
08/09/2021 Consultation ANP tasks, request for cetraben and analgesia for backpain, rx celecoxib and cetraben Miss [redacted] Mckeich
07/09/2021 Triage Ms Linzi [redacted]
07/09/2021 Smoking cessation advice for Smoking Week 2 smoking cessation
1mg lozenge. States doing ok, reports no concerns
Wishes to continue same
1mg lozenges issued

Linzi [redacted]
Lead Addiction Nurse 7/9/21
1320hrs Ms Linzi Stevenson
06/09/2021 Third Party Consultation Ms [redacted] Hedley
06/09/2021 Document Image Docman Attachment
06/09/2021 Administration Microbiology Results Forth Valley Royal Hospital Microbiology Ms [redacted] Hedley
06/09/2021 Third Party Consultation Ms [redacted] Hedley
06/09/2021 Document Image Docman Attachment
06/09/2021 Administration Administration HMP Cornton Vale Initial Assessment HCA [redacted] Health BBV Clinic Ms [redacted] Hedley
06/09/2021 Triage Ms [redacted] Warman
06/09/2021 Consultation S- Seen in nursing clinic
B- Nurse referral form
A-Requesting creams that were previously prescribed, Cetriben cream for dry skin, dry skin evident on elbows, she also stated something called Gental wash, which she was prescribed in the community. Georgina complaining of back pain, states this just happens at any time, mostly when relaxing, states frequently changes position when lying in bed or sitting in chair as painful, No pain on inspiration or expiration. Requesting Analgesia
R- MOA analgesia and Cetriben cream

[redacted] Warman
PCT
11:45 Dr [redacted] Sayers
06/09/2021 Triage Ms [redacted] Kilpatrick - No Data Recorded
06/09/2021 Triage Ms L [redacted] Kilpatrick
06/09/2021 Seen by health care assistant Seen in Hca [redacted] health clinic, Georgina given verbal consent for bloods to be obtained same obtained and sent to labs, obtained for bbv swabs self took for [redacted] health screening, has implant in,
Georgina stated she is due a smear test so will listed for [redacted] health nurse to obtain same.
[redacted] Kilpatrick
HCA
06/09/21
11:17 Dr Craig Sayers
05/09/2021 Triage Ms [redacted] - No Data Recorded
04/09/2021 Triage Ms [redacted] Warman
04/09/2021 Consultation Complaining of dry itchy scalp, dry skin evident on scalp. Requesting Tgel shampoo as previously prescribed same

[redacted] Warman
PCT
13:37 Dr [redacted] Sayers
03/09/2021 Triage Mrs J [redacted] Watt
03/09/2021 Mental health review Named Nurse Discussion

[redacted] told me she has a meeting on Monday but unclear who will attend. She is keen for me to attend her meetings as I worked closely with her prior to her release as her allocated nurse prior to her release.
I have emailed FLM Tammy Breignan to advise her that I would be willing to support her whilst here in Cornton Vale.

[redacted] Watt
S/N MHT
03/09/21 15.30 Dr Craig Sayers
01/09/2021 Triage Ms [redacted] Cleary

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Practitioner Services
Enabling Primary Care

NHS
National Services Scotland

Missing / Incomplete Medical Records – Enquiry to GP Practice

Before asking Practitioner Services to instigate a search for missing notes it is important to establish that medical records/notes are actually missing. Please complete the checklist below and return to Practitioner Services.

GP Practice Details

Practice Stamp

DR. D. S. NECHEV C3796-6
DR. T. MCLAUGHLIN C3779-6
DR. T. GAVIN C3908-0
DR. I. SAVAGE C3859-8
MISTYLAW MEDICAL PRACTICE
31 MAIN STREET
[redacted]WINNOCH
RENFREWSHIRE PA12 4AH

NHS Board Area:	A&A NHS BOARD
Practice Ref Number:	8 7 4 3 2
Date Checked:	2 9 0 7 2 0 2 4
Practice Contact:	01505 843 305

Patient Details

Patient Name:	Georgina Smith
CHI Number:	0 4 1 2 9 1 3 1 2 7

Checklist

Has DocMan been checked to establish if the records are held electronically	Yes
Have you checked that there should be records for the period in question	Yes
Dates: From: To: **04.12.91 – 18.02.01**	
Is it possible the patient did not need to attend a GP practice?	
Has a check been carried out to see if the record could have been misfiled	Yes
Is this the patient's first registration with a GP practice in the UK? If so, there will be no previous medical records.	NO
Has the patient lived abroad and if so, for how long.	NO
When did the patient leave the UK and when did they return (there will be no records covering the period the patient lived abroad).	
Where in the UK did the patient reside prior to moving abroad	
Was the patient in the Armed Forces and if so, what are the joining and leaving dates (there will be no GP records for the patient during the period they were in the Armed Forces).	No
What date is the earliest entry in the DocMan record.	18.02.01

If you have established that records are missing, please provide the following information. *If you are unable to provide the requested information, Practitioner Services may need to contact the patient.*

Any other / previous surnames / middle names? Does the patient use a 'known as' name or alternative forename?	No
Place of Birth.	Ardrossan
Previous GP practices in the UK (please state the most recent practice first).	Just released from prison

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If the medical records/notes are missing is there a particular period or incident you can provide details of.	**04.12.91 – 18.02.01**
Please supply any other information which may help trace the missing medical records/notes.	

Comments:

Please sign to confirm that this information has been checked with the patient or patients representative.

Signature:

Designation: **Reception Supervisor**

Date: **29.07.24**

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Aberdeen Regional Office
Practitioner Services (Medical)
Bridge View
1 North Esplanade West
Aberdeen, AB11 5QF
Tel: 01224 358400
Safe Haven Fax: 01224 358493

Edinburgh Regional Office
Practitioner Services (Medical)
Gyle Square
1 South Gyle Crescent
Edinburgh, EH12 9EB
Tel: 0131 275 6000
Safe Haven Fax: 0131 275 7972

Glasgow Regional Office
Practitioner Services (Medical)
Meridian Court
5 Cadogan Street
Glasgow, G2 6QE
Tel: 0141 300 1300
[redacted] Haven Fax: 0141 300 1347

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DR. I. SAVAGE C3859-8
MISTYLAW MEDICAL PRACTICE
31 MAIN STREET
[redacted]WINNOCH
RENFREWSHIRE PA12 4AH

NHS Board Area:	A&A NHS BOARD
Practice Ref Number:	8 7 4 3 2
Date Checked:	2 9 0 7 2 0 2 4
Practice Contact:	01505 843 305

Patient Details

Patient Name:	Georgina Smith
CHI Number:	0 4 1 2 9 1 3 1 2 7

Checklist

Has DocMan been checked to establish if the records are held electronically	Yes
Have you checked that there should be records for the period in question	Yes
Dates: From: To: **04.12.91 – 18.02.01**	
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Was the patient in the Armed Forces and if so, what are the joining and leaving dates (there will be no GP records for the patient during the period they were in the Armed Forces).	No
What date is the earliest entry in the DocMan record.	18.02.01

If you have established that records are missing, please provide the following information. *If you are unable to provide the requested information, Practitioner Services may need to contact the patient.*

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Place of Birth.	Ardrossan
Previous GP practices in the UK (please state the most recent practice first).	Just released from prison

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If the medical records/notes are missing is there a particular period or incident you can provide details of.	**04.12.91 – 18.02.01**
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Comments:

Please sign to confirm that this information has been checked with the patient or patients representative.

Signature:

Designation: **Reception Supervisor**

Date: **29.07.24**

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Safe Haven Fax: 0131 275 7972

Glasgow Regional Office
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Meridian Court
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[redacted] Haven Fax: 0141 300 1347

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Georgina Smith
2.1 Meadowside
Beith
KA15 1BU
JM716260A

SCOTTISH PRISON SERVICE

[redacted] DEPARTMENT
HMPYOI Polmont
Polmont
Brightons
FK2 0AB
Tel:
01324 722337

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COGNITIVE FUNCTIONING ASSESSMENT REPORT

Name : Georgina Smith
Date of birth : 04/12/1991
Prison Number : 131344
Date of assessment : 06/03/2023

Introduction

Ms Smith is a thirty [redacted] female convicted of Culpable Homicide on 02/04/14 and was sentenced to twelve years imprisonment. Ms Smith committed the offence against a male alongside two male co-accused who were subsequently convicted of murder. Ms Smith was released into the community on 08/07/2021 under licence conditions. Ms Smith was managed under MAPPA arrangements in the community as category 3, other risk of serious [redacted] level 2. Ms Smith was recalled to custody on 25/08/2021 on a Section 17 Recall following a breach of licence conditions. The circumstances that led to Ms Smith's recall were Ms Smith not informing her supervising officer of establishing a new friendship with a male. Additionally, Ms Smith's contact with another male who had been under the influence of substances whilst Ms Smith was in his company. Ms Smith's association with these males came to the authority's attention when Ms Smith reported she had been the victim of a domestic incident on 21/08/2021. Ms Smith has six previous convictions including an assault against an adult male, domestic [redacted] Breach of the Peace, Breach of Probation, and Threatening and Abusive Behaviour.

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During Ms Smith's time in custody, she underwent a Learning Disabilities and Difficulties (LDD) screening on 11/06/2021. The results indicated issues with her concentration, attention, communication, social skills, coordination, and organisational skills. Ms Smith has also self-reported post-concussion syndrome (brain injury) although there is no evidence within the file information at the time of writing this report to substantiate this diagnosis. Following Ms Smith's recall to custody, the Risk management Team at HMP Cornton Vale met on 25/01/2022 to discuss managing and supporting Ms Smith through her recall. The results of afore mentioned LLD assessment, as well as Ms Smith self-reporting not understanding her licence conditions, the RMT commissioned a WAIS-IV assessment to be carried out. An RMT was held on 10/01/2023 to discuss Ms Smith's upcoming Parole. A decision was made that if release was not granted, Ms Smith should transfer to less secure conditions to support Ms Smith to develop skills that will aid her to manage returning to the community. Following the Parole's decision to not [redacted] release, Ms Smith transferred to Lilias CCU on 18/01/2023. During her time there, Ms Smith has accrued three Adverse Circumstance Reports. An RMT was held on 23/03/2023 to discuss future management of Ms Smith. The decision was made that Ms Smith could no longer be safely managed in less secure conditions prompting a return to closed conditions. Ms Smith was transferred to HMPYOI Polmont on 24/03/2023.

The Wechsler Adult Intelligence Scale (4th Edition) (WAIS-IV) is used to assess the cognitive abilities of individuals aged 16-90 years. It provides scores that represent intellectual functioning in specific areas as well as a general ability. Although this is important information, these scores should never be interpreted in isolation. It is most helpful in conjunction with a thorough history and careful clinical observations of the individual. The Full Scale IQ (FSIQ) provides a general overview of the client's overall thinking and reasoning skills. It is derived from the Index Scores which give more specific information on Verbal Comprehension (VCI), Perceptual Reasoning (PRI), Working Memory (WMI) and Processing Speed (PSI).

Background information

Schooling/Education

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Records indicate that Ms Smith's schooling has been disrupted throughout her education years, missing significant periods of time in school and subsequently this impacted her literacy and numeracy skills. This was due to Ms Smith's [redacted] preventing her from attending school due to health reasons. Furthermore, due to Ms Smith's family regularly moving this meant that Ms Smith regularly moved between [redacted] Ms Smith also reports during her teenage years she would not attend [redacted] as her [redacted] would cry and want Ms Smith to stay home to keep her company. There are records that also report Ms Smith stating she left [redacted] at thirteen years old and engaged with college link where she gained qualifications in Maths and English. Social work reports indicate that Ms Smith's behaviour was disruptive at [redacted] which led her to be suspended on numerous occasions.

Whilst in custody Ms Smith has engaged in education including maths and literacy courses. This [redacted] to an improvement in Ms Smith's literacy skills which allowed her to effectively engage with offending behaviour programme work. Despite regular, positive engagement with education during her time in custody, a Learning Disabilities and Difficulties screening assessment identified Ms Smith having issues with attention, concentration, social and communication skills as well as coordination and organisation skills.

Mental Health

Ms Smith reports an abusive upbringing that has left her with significant trauma. She has previously engaged in [redacted] and prison based [redacted] which focussed on addressing issues around attachments and boundaries within relationships. At her most recent Integrated Case Management meeting (25/08/2022) there were discussions recommending Ms Smith engage in trauma [redacted] Clinical [redacted] However, Ms Smith expressed [redacted] about revisiting trauma and felt this work had been carried out when she was younger.

Ms Smith had previously engaged with Cognitive Behavioural Therapy work whilst in HMP Cornton Vale but had to withdraw as she struggled to understand this work. She has also had periods of engagement with the Mental Health Team whilst in custody and has previously been prescribed antidepressant medication. Previous social work records report Ms Smith stating she has a personality disorder although there was no record available to substantiate this diagnosis.

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Ms Smith has a history of [redacted] but she reports she no longer engages with [redacted] behaviours as a coping mechanism. There is no evidence from information available to suggest Ms Smith has engaged in any recent [redacted] behaviours.

Medication

Ms Smith is currently taking the following medication: Pizotifen. Famotidine, Fexofenadine and Bisacodyl.

Previous diagnosis

Records available at the time of writing the report indicate no official diagnosis with regards to mental health and cognitive functioning. As mentioned above, a Learning Disabilities and Difficulties screening assessment did highlight issues leading to the current cognitive assessment being commissioned by the RMT in February 2022.

Observations during assessment

The assessor, [redacted] (Forensic [redacted] in Training), met with Ms Smith on 01/03/2023 to obtain consent for WAIS-IV assessment. Ms Smith reported being keen to engage and find out the results of the assessment, feeling this would help staff understand her needs better. Ms Smith was keen to chat to Ms [redacted] about current issues she was experiencing with staff at that time.

Ms [redacted] met with Ms Smith again on 06/03/2023 to administer the WAIS-IV assessment. Ms Smith was orientated to time and place, and there was no concern that she was under the influence of substances. Ms Smith continued to present keen and eager to engage with the assessment.

During the assessment, Ms Smith was observed to concentrate on all tasks and taking her time to complete them. For instance, in the Block Design she was checking and double checking the design she made with the design on the page and self-corrected a block when she realised she made a mistake.

During the arithmetic task Ms Smith was observed using her fingers to count and commented that she struggles to work out sums in her head.

During the similarities task Ms Smith appeared to take the instruction of similarities literally therefore initially struggled with this task. For instance, she commented that 2 and 7 looked

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different so there were no similarities. However, when Ms [redacted] instructed the similarity is they are both numbers, Ms Smith was able to identify similarities on the subsequent items but as the task went on she again reverted back to reporting no similarities. Ms [redacted] also had to clarify with Ms Smith that the word "bud" did not mean a friend but a bud [redacted] to plants. Halfway through the test Ms Smith chose to sit on the floor when completing the symbol task stating it was more comfortable.

Whilst Ms Smith was observed to be putting effort into all tasks, it was evident that she struggled the most with verbal comprehension tasks during the assessment.

Results

Ms Smith completed ten subtests in approximately seventy minutes. The following summary of the scores was obtained:

Summary of FSIQ and Index Scores

WAIS-IV	Qualitative description	Quantitative description	Percentile Rank	Confidence interval of 95%
Full Scale IQ	Extremely Low	66	1	63-71
Verbal Comprehension	Extremely Low	63	1	59-70
Perceptual Reasoning	Borderline	77	6	72-84
Working Memory	Extremely Low	66	1	61-75
Processing Speed	Borderline	79	8	73-89

Relative to examinees of comparable age, Ms Smith is currently functioning within the Extremely Low range of *general intellectual functioning*. That is to say that Ms Smith performs better than 1% of her peers would perform on this assessment. The assessment showed that Ms Smith is likely to experience great difficulty in keeping up with her peers in a wide variety of situations that require age-appropriate thinking and reasoning abilities. More specifically it is worth noting the following:

- The *Verbal Comprehension Index* is a measure of verbal acquired knowledge, verbal concept formation and verbal reasoning. Ms Smith's score on this Index falls within the Extremely Low range. This indicates that Ms Smith is not use to working a lot with words and might experience difficulties expressing herself, understanding others, and understanding written material presented to her. This would support Ms Smith's reports that she struggles to understand written material as well as verbal information being

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provided to her by others. During the assessment, it was clear Ms Smith's vocabulary and understanding of vocabulary was limited. For instance, the assessor had to clarify the word "bud" did not mean friend. This is consistent with her self report that she finds it difficult to understand the meaning of complicated terminology within her licence conditions. Ms Smith's knowledge was also very limited, only managing to answer a few basic items on the Information task. During the similarities task, Ms Smith struggled to identify the abstract notion of similarity and instead focused on literal/physical properties of the item presented to her. Whilst Ms Smith was initially able to identify similarities in subsequent items, she began to struggle again to identify abstract notion of similarity and again reverted back to literal responses and reporting no similarities.

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- There were no significant differences between any of the indexes and Ms Smith did not present with any strengths and weaknesses. Her ability levels appear consistent over all subtests and indexes.

Recommendations

Whilst Ms Smith's cognitive abilities are consistent over all indexes, her main deficits are with verbal comprehension and working memory. This is reflective of Ms Smith's own accounts that she struggles to understand complicated words and terminology. It also suggests that Ms Smith struggles with attention, retention of information, and the ability to mentally manipulate that information. Any materials presented to Ms Smith should be adapted and use of repetition as well as a longer period of time to process information should be applied when working with Ms Smith to help her cope.

The following recommendations might be useful to help support Ms Smith:

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Summary

Ms Smith is a 31 year old women who underwent a Learning Disabilities and Difficulties screening assessment which identified difficulties in concentration, attention, communication, social skills, coordination, and organisational skills. In addition, she has reported difficulties in understanding information provided to her both verbally and in writing. The WAIS-IV assessment revealed that Ms Smith's general cognitive ability is in the very low range with consistent performance in all indexes. Ms Smith was somewhat lower in verbal comprehension and working memory indexes which supports both the outcome of the screening assessment and Ms Smith's own account of understanding information. Due to the very low range working memory, Ms Smith will struggle to recall information and make simple manipulations. Ms Smith will require information presented to her to be put into simple language as well as checking her understanding of this information.

[redacted]
Forensic [redacted] in Training
HMPYOI Polmont

Supervised by Naveel Saleemi
Registered and Chartered Forensic [redacted]
HMP Perth

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References

Wechsler, D. (2008). *Wechsler Adult Intelligence Scale--Fourth Edition* (WAIS-IV). PsycTESTS.

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Community Link Workers Referral Form

For any enquiries or requests for GP Services, please advise patient to contact the GP Surgery directly.

Has Service User given consent to refer (delete as appropriate)?	**Yes / No**

Consent **must** be obtained before the referral can be passed to the service (see notes). Consent permits referral to the CLW service and for appropriate information about the referral to be documented in their GP medical record.

General Practice Name			
CHI: 0412913127 04/12/1991 SMITH, Georgina 21, Meadowside, KA15 1BU		**CLW Service is for 16 years and above**	
		Date of birth	
Dr D Nechev, 6110055 Beith Branch Surgery, KA15 2AR 87432 31/07/2024 10:35 Practice: 87432		Home Telephone	
		Mobile	07831 361 242
Postcode		Email Address	

Is there an identified risk?	**Yes / No** (No) If yes, please provide more information on the type of risk, in the section below. If a description of an identified risk is not provided your referral can not be processed.

[redacted] ☐ [redacted] **thoughts** ☐

If selecting either of the risks above, what support service or medical professional is the individual engaging with:

If no formal support or assessment has been carried out the individual is not suitable for direct referral to this service and should, instead, access medical advice. Urgent assistance information can be found below.

Offending behaviour ☐ **Other** ☐

If selecting either of the risks above, please provide further information:

Preferred contact method:	Landline ☐	Mobile ☑
Safe to leave voicemail: Yes ☑ No ☐		Safe to write: Yes ☑ No ☐

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L. [redacted]
F

Name of other supporting agencies:	

Reason for referral: please tick relevant boxes.

Finances ☐ Employability ☐ Social Isolation ☑ Bereavement ☐ Managing Stress ☐

Alcohol and Drug Use ☐ Healthier Lifestyle ☐ [redacted] Other ☑

Brief reason for referral: Recently released from prison. Hard to adjust to normal life. Anxiety agoraphobia. Feels they needs support.

Referrer's Details

Name	DR DIMITAR NEHEV
Organisation	DR. D. S. NECHEV C3796-6 DR. T. MCLAUGHLIN C3779-6 DR. T. GAVIN C3608-0 DR. I. SAVAGE C3859-8 MISTYLAW MEDICAL PRACTICE BEITH SURGERY 5 MAINS ROAD BEITH, AYRSHIRE KA15 2AF
Address	
Telephone	01505 502344
Email	ggc.gp87432clinical@nhs.scot

Date	31.07.24	Referrer's Signature	

Urgent assistance

If the person you are referring is feeling distressed, in a state of despair, or [redacted] please advise them to contact their GP or Out of Hours on 111. If they need to speak to someone urgently, require a listening or crisis service, you can access the appropriate supports by clicking here.

If you believe your client is at risk please see Adult Support and Protection

Please email completed referral forms to: communitylinkworkers@north-ayrshire.gov.uk

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L. [redacted]
F

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Georgina Smith
2.1 Meadowside
Beith
KA15 1BU
JM716260A

B19.1

SCOTTISH PRISON SERVICE

[redacted] DEPARTMENT
HMPYOI Polmont
Polmont
Brightons
FK2 0AB
Tel:
01324 722337

COGNITIVE FUNCTIONING ASSESSMENT REPORT

Name : Georgina Smith
Date of birth : 04/12/1991
Prison Number : 131344
Date of assessment : 06/03/2023

Introduction

Ms Smith is a thirty [redacted] female convicted of Culpable Homicide on 02/04/14 and was sentenced to twelve years imprisonment. Ms Smith committed the offence against a male alongside two male co-accused who were subsequently convicted of murder. Ms Smith was released into the community on 08/07/2021 under licence conditions. Ms Smith was managed under MAPPA arrangements in the community as category 3, other risk of serious [redacted] level 2. Ms Smith was recalled to custody on 25/08/2021 on a Section 17 Recall following a breach of licence conditions. The circumstances that led to Ms Smith's recall were Ms Smith not informing her supervising officer of establishing a new friendship with a male. Additionally, Ms Smith's contact with another male who had been under the influence of substances whilst Ms Smith was in his company. Ms Smith's association with these males came to the authority's attention when Ms Smith reported she had been the victim of a domestic incident on 21/08/2021. Ms Smith has six previous convictions including an assault against an adult male, domestic [redacted] Breach of the Peace, Breach of Probation, and Threatening and Abusive Behaviour.

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During Ms Smith's time in custody, she underwent a Learning Disabilities and Difficulties (LDD) screening on 11/06/2021. The results indicated issues with her concentration, attention, communication, social skills, coordination, and organisational skills. Ms Smith has also self-reported post-concussion syndrome (brain injury) although there is no evidence within the file information at the time of writing this report to substantiate this diagnosis. Following Ms Smith's recall to custody, the Risk management Team at HMP Cornton Vale met on 25/01/2022 to discuss managing and supporting Ms Smith through her recall. The results of afore mentioned LLD assessment, as well as Ms Smith self-reporting not understanding her licence conditions, the RMT commissioned a WAIS-IV assessment to be carried out. An RMT was held on 10/01/2023 to discuss Ms Smith's upcoming Parole. A decision was made that if release was not granted, Ms Smith should transfer to less secure conditions to support Ms Smith to develop skills that will aid her to manage returning to the community. Following the Parole's decision to not [redacted] release, Ms Smith transferred to Lilias CCU on 18/01/2023. During her time there, Ms Smith has accrued three Adverse Circumstance Reports. An RMT was held on 23/03/2023 to discuss future management of Ms Smith. The decision was made that Ms Smith could no longer be safely managed in less secure conditions prompting a return to closed conditions. Ms Smith was transferred to HMPYOI Polmont on 24/03/2023.

The Wechsler Adult Intelligence Scale (4th Edition) (WAIS-IV) is used to assess the cognitive abilities of individuals aged 16-90 years. It provides scores that represent intellectual functioning in specific areas as well as a general ability. Although this is important information, these scores should never be interpreted in isolation. It is most helpful in conjunction with a thorough history and careful clinical observations of the individual. The Full Scale IQ (FSIQ) provides a general overview of the client's overall thinking and reasoning skills. It is derived from the Index Scores which give more specific information on Verbal Comprehension (VCI), Perceptual Reasoning (PRI), Working Memory (WMI) and Processing Speed (PSI).

Background information

Schooling/Education

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Records indicate that Ms Smith's schooling has been disrupted throughout her education years, missing significant periods of time in school and subsequently this impacted her literacy and numeracy skills. This was due to Ms Smith's [redacted] preventing her from attending school due to health reasons. Furthermore, due to Ms Smith's family regularly moving this meant that Ms Smith regularly moved between [redacted] Ms Smith also reports during her teenage years she would not attend [redacted] as her [redacted] would cry and want Ms Smith to stay home to keep her company. There are records that also report Ms Smith stating she left [redacted] at thirteen years old and engaged with college link where she gained qualifications in Maths and English. Social work reports indicate that Ms Smith's behaviour was disruptive at [redacted] which led her to be suspended on numerous occasions.

Whilst in custody Ms Smith has engaged in education including maths and literacy courses. This [redacted] to an improvement in Ms Smith's literacy skills which allowed her to effectively engage with offending behaviour programme work. Despite regular, positive engagement with education during her time in custody, a Learning Disabilities and Difficulties screening assessment identified Ms Smith having issues with attention, concentration, social and communication skills as well as coordination and organisation skills.

Mental Health

Ms Smith reports an abusive upbringing that has left her with significant trauma. She has previously engaged in [redacted] and prison based [redacted] which focussed on addressing issues around attachments and boundaries within relationships. At her most recent Integrated Case Management meeting (25/08/2022) there were discussions recommending Ms Smith engage in trauma [redacted] Clinical [redacted] However, Ms Smith expressed [redacted] about revisiting trauma and felt this work had been carried out when she was younger.

Ms Smith had previously engaged with Cognitive Behavioural Therapy work whilst in HMP Cornton Vale but had to withdraw as she struggled to understand this work. She has also had periods of engagement with the Mental Health Team whilst in custody and has previously been prescribed antidepressant medication. Previous social work records report Ms Smith stating she has a personality disorder although there was no record available to substantiate this diagnosis.

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Ms Smith has a history of [redacted] but she reports she no longer engages with [redacted] behaviours as a coping mechanism. There is no evidence from information available to suggest Ms Smith has engaged in any recent [redacted] behaviours.

Medication

Ms Smith is currently taking the following medication: Pizotifen. Famotidine, Fexofenadine and Bisacodyl.

Previous diagnosis

Records available at the time of writing the report indicate no official diagnosis with regards to mental health and cognitive functioning. As mentioned above, a Learning Disabilities and Difficulties screening assessment did highlight issues leading to the current cognitive assessment being commissioned by the RMT in February 2022.

Observations during assessment

The assessor, [redacted] (Forensic [redacted] in Training), met with Ms Smith on 01/03/2023 to obtain consent for WAIS-IV assessment. Ms Smith reported being keen to engage and find out the results of the assessment, feeling this would help staff understand her needs better. Ms Smith was keen to chat to Ms [redacted] about current issues she was experiencing with staff at that time.

Ms [redacted] met with Ms Smith again on 06/03/2023 to administer the WAIS-IV assessment. Ms Smith was orientated to time and place, and there was no concern that she was under the influence of substances. Ms Smith continued to present keen and eager to engage with the assessment.

During the assessment, Ms Smith was observed to concentrate on all tasks and taking her time to complete them. For instance, in the Block Design she was checking and double checking the design she made with the design on the page and self-corrected a block when she realised she made a mistake.

During the arithmetic task Ms Smith was observed using her fingers to count and commented that she struggles to work out sums in her head.

During the similarities task Ms Smith appeared to take the instruction of similarities literally therefore initially struggled with this task. For instance, she commented that 2 and 7 looked

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different so there were no similarities. However, when Ms [redacted] instructed the similarity is they are both numbers, Ms Smith was able to identify similarities on the subsequent items but as the task went on she again reverted back to reporting no similarities. Ms [redacted] also had to clarify with Ms Smith that the word "bud" did not mean a friend but a bud [redacted] to plants. Halfway through the test Ms Smith chose to sit on the floor when completing the symbol task stating it was more comfortable.

Whilst Ms Smith was observed to be putting effort into all tasks, it was evident that she struggled the most with verbal comprehension tasks during the assessment.

Results

Ms Smith completed ten subtests in approximately seventy minutes. The following summary of the scores was obtained:

Summary of FSIQ and Index Scores

WAIS-IV	Qualitative description	Quantitative description	Percentile Rank	Confidence interval of 95%
Full Scale IQ	Extremely Low	66	1	63-71
Verbal Comprehension	Extremely Low	63	1	59-70
Perceptual Reasoning	Borderline	77	6	72-84
Working Memory	Extremely Low	66	1	61-75
Processing Speed	Borderline	79	8	73-89

Relative to examinees of comparable age, Ms Smith is currently functioning within the Extremely Low range of *general intellectual functioning*. That is to say that Ms Smith performs better than 1% of her peers would perform on this assessment. The assessment showed that Ms Smith is likely to experience great difficulty in keeping up with her peers in a wide variety of situations that require age-appropriate thinking and reasoning abilities. More specifically it is worth noting the following:

- The *Verbal Comprehension Index* is a measure of verbal acquired knowledge, verbal concept formation and verbal reasoning. Ms Smith's score on this Index falls within the Extremely Low range. This indicates that Ms Smith is not use to working a lot with words and might experience difficulties expressing herself, understanding others, and understanding written material presented to her. This would support Ms Smith's reports that she struggles to understand written material as well as verbal information being

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provided to her by others. During the assessment, it was clear Ms Smith's vocabulary and understanding of vocabulary was limited. For instance, the assessor had to clarify the word "bud" did not mean friend. This is consistent with her self report that she finds it difficult to understand the meaning of complicated terminology within her licence conditions. Ms Smith's knowledge was also very limited, only managing to answer a few basic items on the Information task. During the similarities task, Ms Smith struggled to identify the abstract notion of similarity and instead focused on literal/physical properties of the item presented to her. Whilst Ms Smith was initially able to identify similarities in subsequent items, she began to struggle again to identify abstract notion of similarity and again reverted back to literal responses and reporting no similarities.

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NHS FORTH VALLEY

DISCHARGE AND PRESCRIPTION

PLEASE WRITE FIRMLY USING A [redacted] PEN. Hospital PO BOX 2166

Dear Dr.

Your Patient Georgina Smith Age Hos. No. G.P. No.

Address

was in the care of Dr./Mr. in Ward

He/She was ADMITTED on and was DISCHARGED on

To his/her home/alternative address

Diagnosis, Treatment and Comments (including details of Appliances and Drug Sensitivities).

PMHx - ASTHMA, CHOLECYSTECTOMY, BREAST CYST, PREVIOUS SUBSTANCE MISUSE, ANXIETY & DEPRESSION, EATING DISORDER, PROBABLE THYROIDITIS (ON CARBIMAZOLE - NOW RESOLVED)

NKDA - BUT HAS LACTOSE / GLUTEN INTOLERANCE

Follow up arrangements ~~NIL~~ TO HAVE REPEAT TFTs AT 3 MONTHS INTERVALS FOR NEXT YEAR.

~~A Discharge letter will follow~~

[redacted] Office

The following medicine(s) is/are recommended:-

Rx MEDICINE, FORM OF PREPARATION AND STRENGTH	DOSE	DIRECTIONS FOR ADMINISTRATION	QUANTITY SUPPLIED	RECOMMENDED DURATION OF TREATMENT
DOXYCYCLINE UNTIL (TWO)	100mg	OD	28 DAYS	
AMITRIPTYLINE	75MG	NOCTE	28 DAYS	
PIZOTIFEN	1.5MG	NOCTE	28 DAYS	
FAMOTIDINE	40MG	MANE	28 DAYS	
FEXOFENADINE	120MG	MANE	28 DAYS	
QUETIAPINE	175MG	NOCTE	28 DAYS	
BISACODYL	5MG-10MG	NOCTE	28 DAYS	
DEPO-PROVERA	150MG	EVERY 12 WEEKS	—	

Medical Officer Pharmacist Date Dispensed

Nurse check on discharge

DISTRIBUTION:
1st White - General Practitioner/Receiving Hospit
2nd Pink - Pharmacy
3rd Blue - District Nurse - via Patient
4th Yellow - Patient's Case Notes

STH 045 Where prescriptions contain **CONTROLLED DRUGS** the original will be retained by the pharmacist

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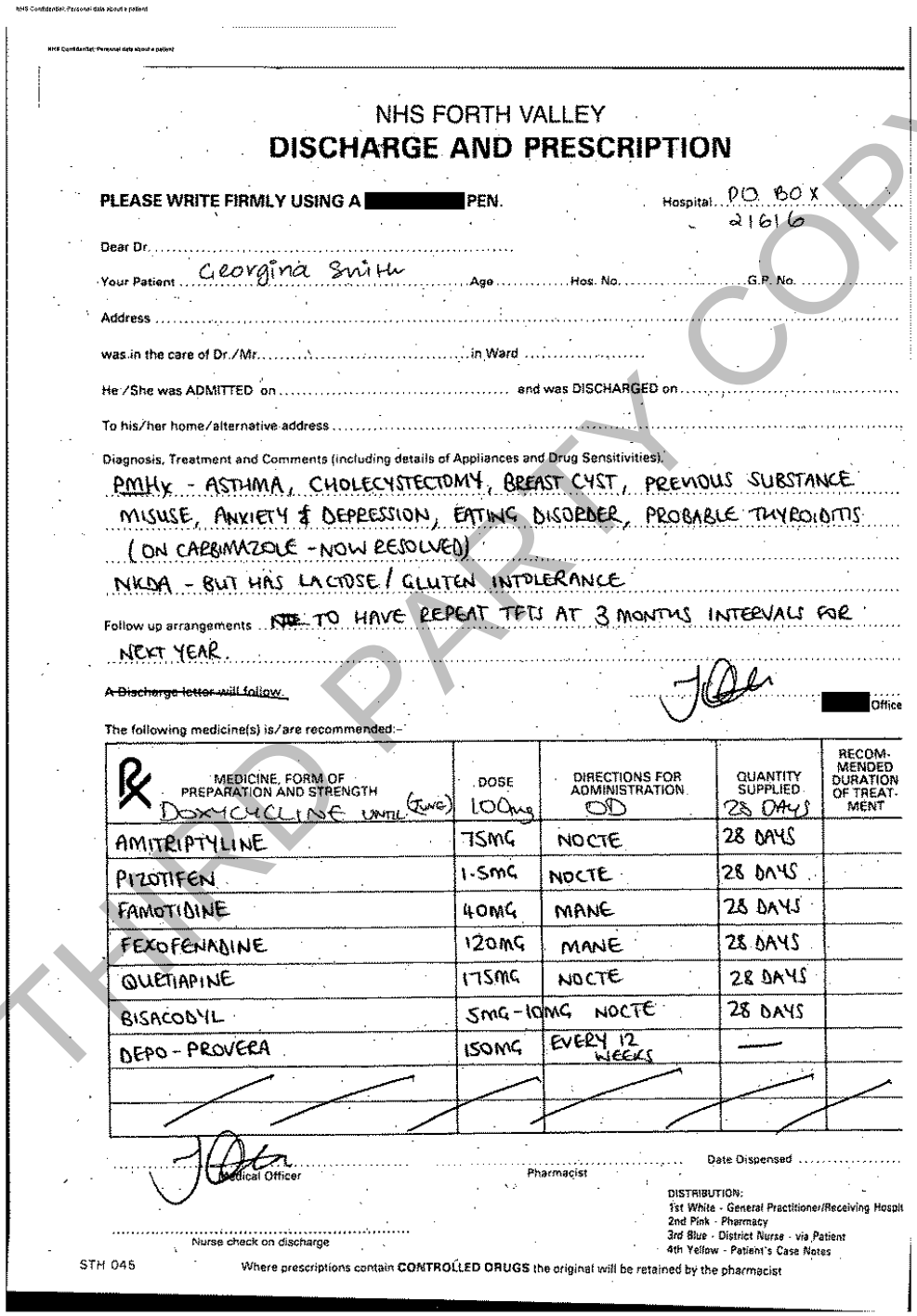

NHS Confidential: Personal data about a patient

NHS FORTH VALLEY

DISCHARGE AND PRESCRIPTION

PLEASE WRITE FIRMLY USING A [redacted] PEN.

Hospital PO BOX 2166

Dear Dr.

Your Patient Georgina Smith Age Hos. No. G.P. No.

Address

was in the care of Dr./Mr. in Ward

He/She was ADMITTED on and was DISCHARGED on

To his/her home/alternative address

Diagnosis, Treatment and Comments (including details of Appliances and Drug Sensitivities).

PMHx - ASTHMA, CHOLECYSTECTOMY, BREAST CYST, PREVIOUS SUBSTANCE MISUSE, ANXIETY & DEPRESSION, EATING DISORDER, PROBABLE THYROIDITIS (ON CARBIMAZOLE - NOW RESOLVED)

NKDA - BUT HAS LACTOSE / GLUTEN INTOLERANCE

Follow up arrangements ~~NIL~~ TO HAVE REPEAT TFTs AT 3 MONTHS INTERVALS FOR NEXT YEAR.

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[redacted] Office

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DOXYCYCLINE UNTIL (TWO)	100mg	OD	28 DAYS	
AMITRIPTYLINE	75MG	NOCTE	28 DAYS	
PIZOTIFEN	1.5MG	NOCTE	28 DAYS	
FAMOTIDINE	40MG	MANE	28 DAYS	
FEXOFENADINE	120MG	MANE	28 DAYS	
QUETIAPINE	175MG	NOCTE	28 DAYS	
BISACODYL	5MG-10MG	NOCTE	28 DAYS	
DEPO-PROVERA	150MG	EVERY 12 WEEKS	—	

Medical Officer

Pharmacist

Date Dispensed

Nurse check on discharge

DISTRIBUTION:
1st White - General Practitioner/Receiving Hospit
2nd Pink - Pharmacy
3rd Blue - District Nurse - via Patient
4th Yellow - Patient's Case Notes

STH 045

Where prescriptions contain **CONTROLLED DRUGS** the original will be retained by the pharmacist

THIRD PARTY COPY

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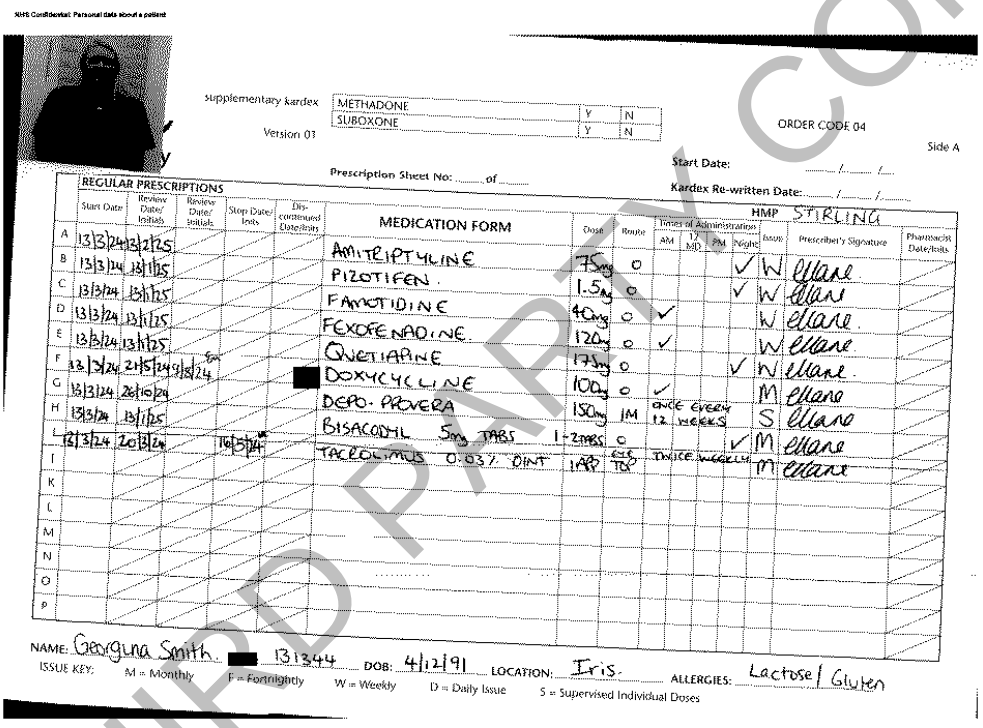

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Supplementary Kardex
Version 03

METHADONE	Y	N
SUBOXONE	Y	N

ORDER CODE 04

Side A

Start Date: ___/___/___

Kardex Re-written Date: ___/___/___

Prescription Sheet No: ___ of ___

HMP STIRLING

REGULAR PRESCRIPTIONS

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Initials	Discontinued Date/Initials	MEDICATION FORM	Dose	Route	Times of Administration: AM	12 MD	PM	Night	Mon	Prescriber's Signature	Pharmacist Date/Initials
A	13/3/24	13/1/25				AMITRIPTYLINE	75mg	O				✓	W	Eliane	
B	13/3/24	13/1/25				PIZOTIFEN	1.5mg	O				✓	W	Eliane	
C	13/3/24	13/1/25				FAMOTIDINE	40mg	O	✓				W	Eliane	
D	13/3/24	13/1/25				FEXOFENADINE	120mg	O	✓				W	Eliane	
E	13/3/24	13/1/25				QUETIAPINE	175mg	O				✓	W	Eliane	
F	13/3/24	21/5/24	9/8/24	5pm		DOXYCYCLINE [redacted]	100mg	O	✓				M	Eliane	
G	13/3/24	26/10/24				DEPO-PROVERA	150mg	IM	ONCE EVERY 12 WEEKS				S	Eliane	
H	13/3/24	13/1/25				BISACODYL 5mg TABS	1-2 TABS	O				✓	M	Eliane	
I	12/3/24	20/3/24		16/5/24		TACROLIMUS 0.03% OINT	1AP	CUTANEOUS	TWICE WEEKLY				M	Eliane	
K															
L															
M															
N															
O															
P															

NAME: Georgina Smith [redacted] 131344 DOB: 4/12/91 LOCATION: Iris ALLERGIES: Lactose / Gluten

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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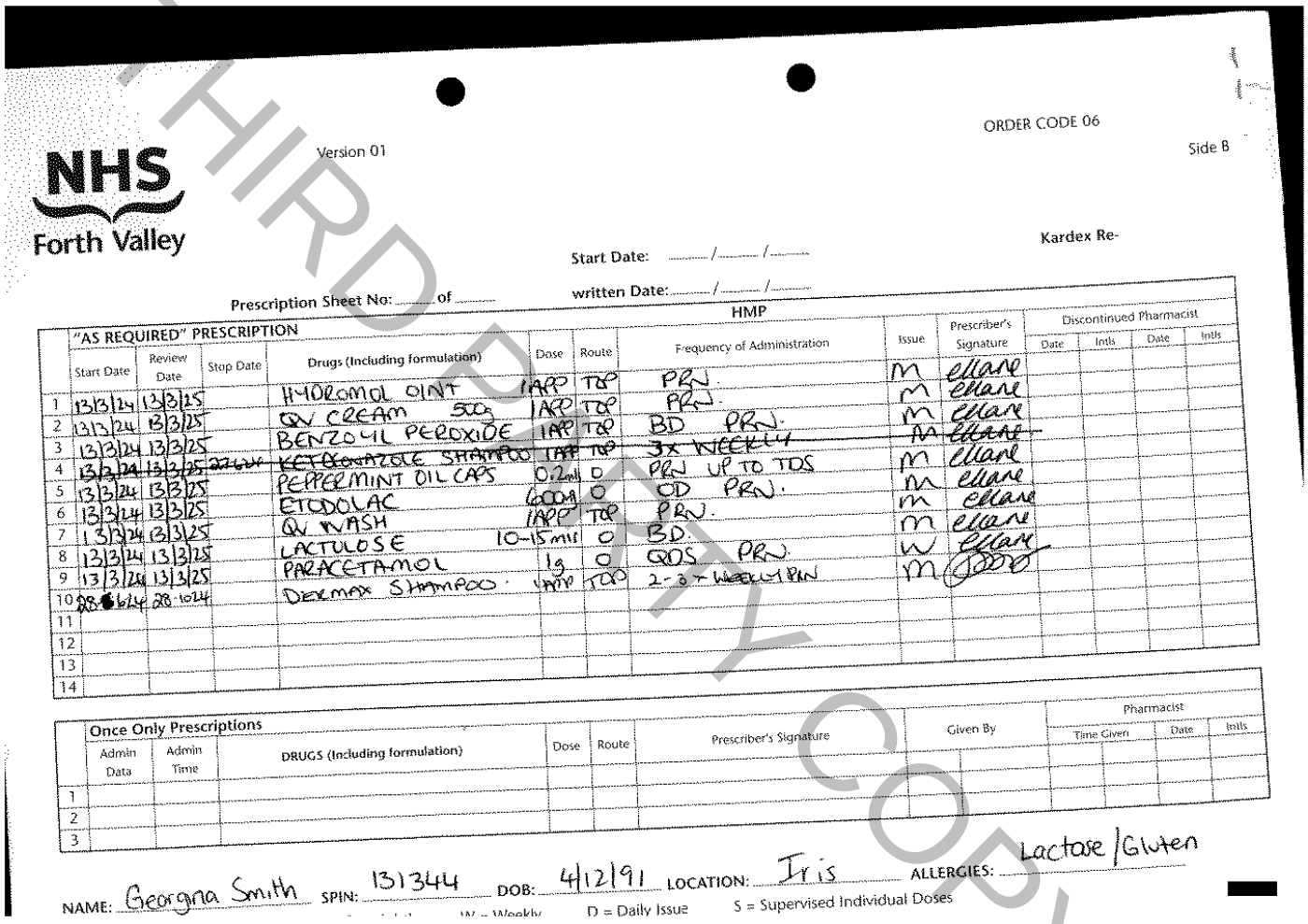
THIRD PARTY COPY



NHS Forth Valley

Version 01

ORDER CODE 06

Side B

Kardex Re-

Start Date: ..../..../....

written Date: ..../..../....

Prescription Sheet No: ..... of .....

HMP

"AS REQUIRED" PRESCRIPTION

	Start Date	Review Date	Stop Date	Drugs (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Date	Initls
1	13/3/24	13/3/25		HYDROMOL OINT	1APP	TOP	PRN	M	eMare				
2	13/3/24	13/3/25		QV CREAM 500g	1APP	TOP	PRN.	M	eMare				
3	13/3/24	13/3/25		BENZOYL PEROXIDE	1APP	TOP	BD PRN.	M	eMare				
4	13/3/24	13/3/25	22/4/24	KETOCONAZOLE SHAMPOO	1APP	TOP	3x WEEKLY	M	eMare				
5	13/3/24	13/3/25		PEPPERMINT OIL CAPS	0.2ml	D	PRN UP TO TDS	M	eMare				
6	13/3/24	13/3/25		ETODOLAC	600mg	O	OD PRN.	M	eMare				
7	13/3/24	13/3/25		QV WASH	1APP	TOP	PRN.	M	eMare				
8	13/3/24	13/3/25		LACTULOSE	10-15ml	O	BD	W	eMare				
9	13/3/24	13/3/25		PARACETAMOL	1g	O	QDS PRN.	M	[illegible]				
10	28/6/24	28/10/24		DERMAX SHAMPOO	1APP	TOP	2-3 x WEEKLY PRN						
11													
12													
13													
14													

Once Only Prescriptions

	Admin Data	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1										
2										
3										

NAME: Georgina Smith SPIN: 131344 DOB: 4/12/91 LOCATION: Iris ALLERGIES: Lactose/Gluten

W = Weekly D = Daily Issue S = Supervised Individual Doses

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iGPR Report

COPY

NHS Forth Valley

supplementary kardex Version 01

METHADONE	Y	N
SUBOXONE	Y	N

GLUTEN FREE FOOD KARDEX
ORDER CODE 04

Side A

Prescription Sheet No: 1 of 1

Start Date: ___/___/___

Kardex Re-written Date: ___/___/___

HMP STIRLING

REGULAR PRESCRIPTIONS

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Inits	Dis-continued Date/Inits	MEDICATION FORM	Dose	Route	Times of Administration AM	T2 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Inits
A	13/3/24	13/3/25				SEEDED LOAF (400G) 1 UNIT	x 1 PER MONTH	O	PIP:		308-9364		M	Eliane	
B	13/3/24	13/3/25				GF FUSILLI (SPIRALS) PASTA 2 UNITS	x 1 PER MONTH	O	PIP:		211-5178		M	Eliane	
C	13/3/24	13/3/25				GF SPAGHETTI PASTA (500G) ~~2 UNITS~~ 1	x 1 PER MONTH	O	PIP:		280-7998		M	Eliane	
D	13/3/24	13/3/25				GF LASAGNE PASTA (500G) 2 UNITS	x 1 PER MONTH	O	PIP:		280-7972		M	Eliane	
E	13/3/24	13/3/25				GF CRISPY RICE CEREAL (375G) 1 UNITS	x 1 PER MONTH	O	PIP:		388-2982		M	Eliane	
F	13/3/24	13/3/25				GF PURE OATS (500G) 1 1/2 UNITS	x 1 PER MONTH	O	PIP:		371-1678		M	Eliane	
G	13/3/24	13/3/25				GF SLICED FIBRE LOAF (300G) 1/2 UNIT	x 1 PER MONTH	O	PIP:		237-9356		M	Eliane	
H	13/3/24	13/3/25				GF FOUR WHITE ROLLS 1/2 UNIT	x 1 PER MONTH	O	PIP:		344-3645		M	Eliane	
I	13/3/24	13/3/25				GF MINI CRACKERS (175G) 1/2 UNIT	x 1 PER MONTH	O	PIP:		353-5535		M	Eliane	
J	13/3/24	13/3/25				GF PIZZA BASES (2X150G) 1 UNIT	x 1 PER MONTH	O	PIP:		~~344-1192~~		M	Eliane	
K	13/3/24	13/3/25				GF MULTIPURPOSE WHITE MIX (500G) ~~2 UNITS~~ 1	x 1 PER MONTH	O	PIP:		231-2981		M	Eliane	
L	13/3/24	13/3/25				GF FIBRE MIX (500G) 2 UNITS	x 1 PER MONTH	O	PIP:		231-2973		M	Eliane	
M	13/3/24	13/3/25				GF BREAD MIX (500G) 2 UNITS	x 1 PER MONTH	O	PIP:		298-8418		M	Eliane	
N	4.4.24	13.3.25				GF FIBRE FLAKES (300G) 1 1/2 UNITS	x 1 PER MONTH	O	PIP:		371-1660		M	[illegible]	
O															
P															

NAME: GEORGINA SMITH SPIN: 13134 DOB: 4-12-91 LOCATION: [redacted] ALLERGIES: ~~Lactose~~ / Gluten Lactose

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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NHS Confidential: Personal data about a patient

NHS Forth Valley

Version 01

ORDER CODE 06

Side B

Kardex Re-

Start Date: ...../...../.....

written Date: ...../...../.....

Prescription Sheet No: ..... of .....

HMP

"AS REQUIRED" PRESCRIPTION																	
	Start Date	Review Date	Stop Date	Drugs (including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist							
										Date	Inits	Date	Inits				
1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	
11																	
12																	
13																	
14																	

Once Only Prescriptions															
	Admin Data	Admin Time	DRUGS (including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist							
								Time Given	Date	Inits					
1															
2															
3															

NAME: ..... SPIN: ..... DOB: ..... LOCATION: ..... ALLERGIES: .....

D = Daily Issue S = Supervised Individual Doses

ENG1919

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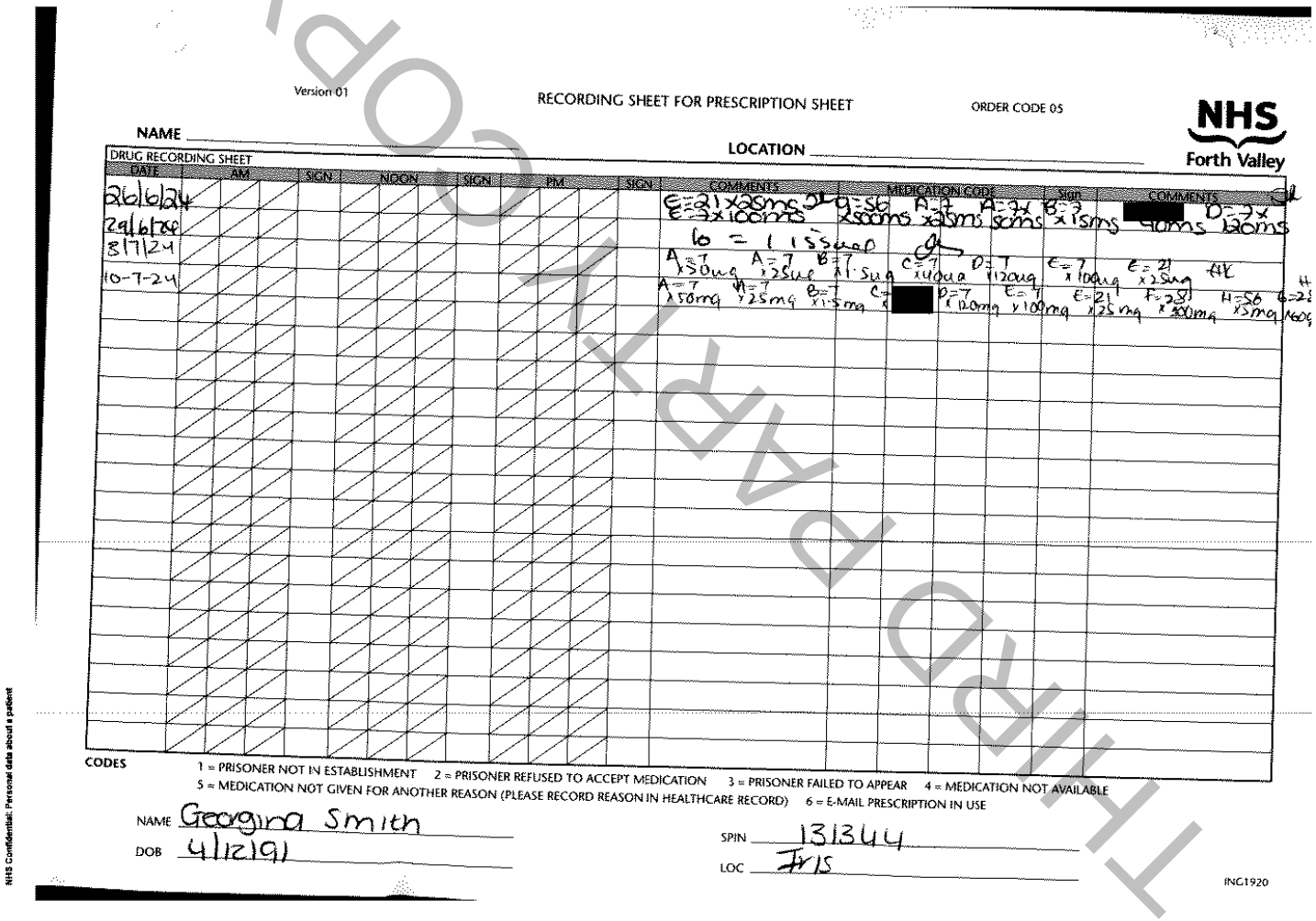

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME

LOCATION

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS
26/6/24							E=21 x25mg 29=56 x500ms A=7 A=3x x15ms 90ms B=7 x15ms [redacted] D=7x 120ms
29/6/24							6 = 1 15Sm6D
8/7/24							A=7 x50mg A=7 x25mg B=7 x1.5mg C=7 x40mg D=7 x12mg E=7 x100mg E=21 x25mg HK
10-7-24							A=7 x50mg B=7 x25mg B=7 x1.5mg C=[redacted] D=7 x12.0mg E=7 x100mg E=21 x25mg F=21 x300mg H=56 x5mg 6=21

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith

DOB 4/12/91

SPIN 131344

LOC Iris

INC1920

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NHS
Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

Version 01

NAME _____ LOCATION _____

DRUG RECORDING SHEET DATE	AM SIGN	NURSE SIGN	PM SIGN	COMMENTS	MEDICATION CODE	SIGN	COMMENTS

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME _____ SPIN _____

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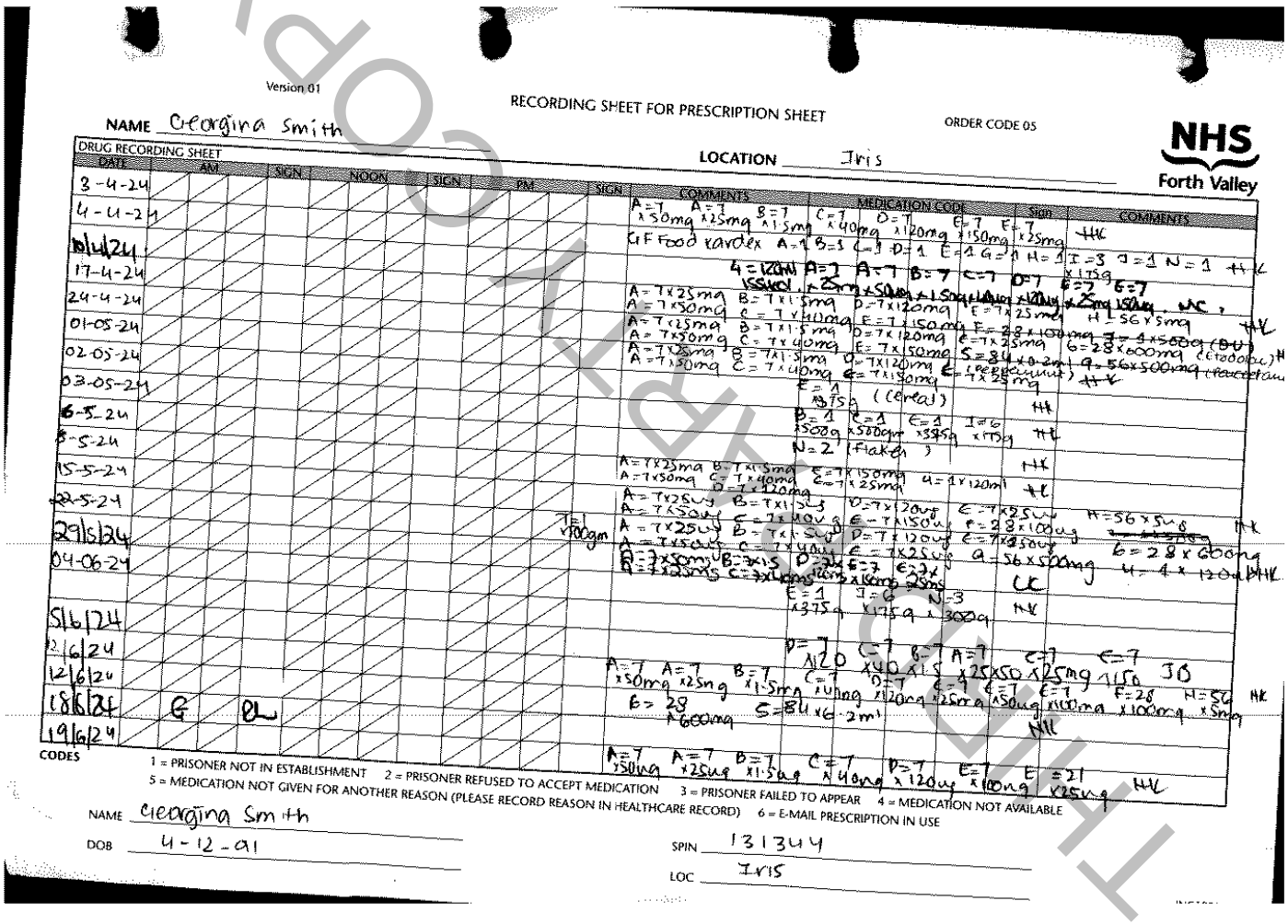

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME Georgina Smith

LOCATION Iris

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	SIGN	COMMENTS
3-4-24										
4-4-24										
10/4/24										
17-4-24										
24-4-24										
01-05-24										
02-05-24										
03-05-24										
6-5-24										
8-5-24										
15-5-24										
22-5-24										
29/5/24										
04-06-24										
5/6/24										
12/6/24										
18/6/24	G	BL								
19/6/24										

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
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NAME Georgina Smith

DOB 4-12-91

SPIN 131344

LOC Iris

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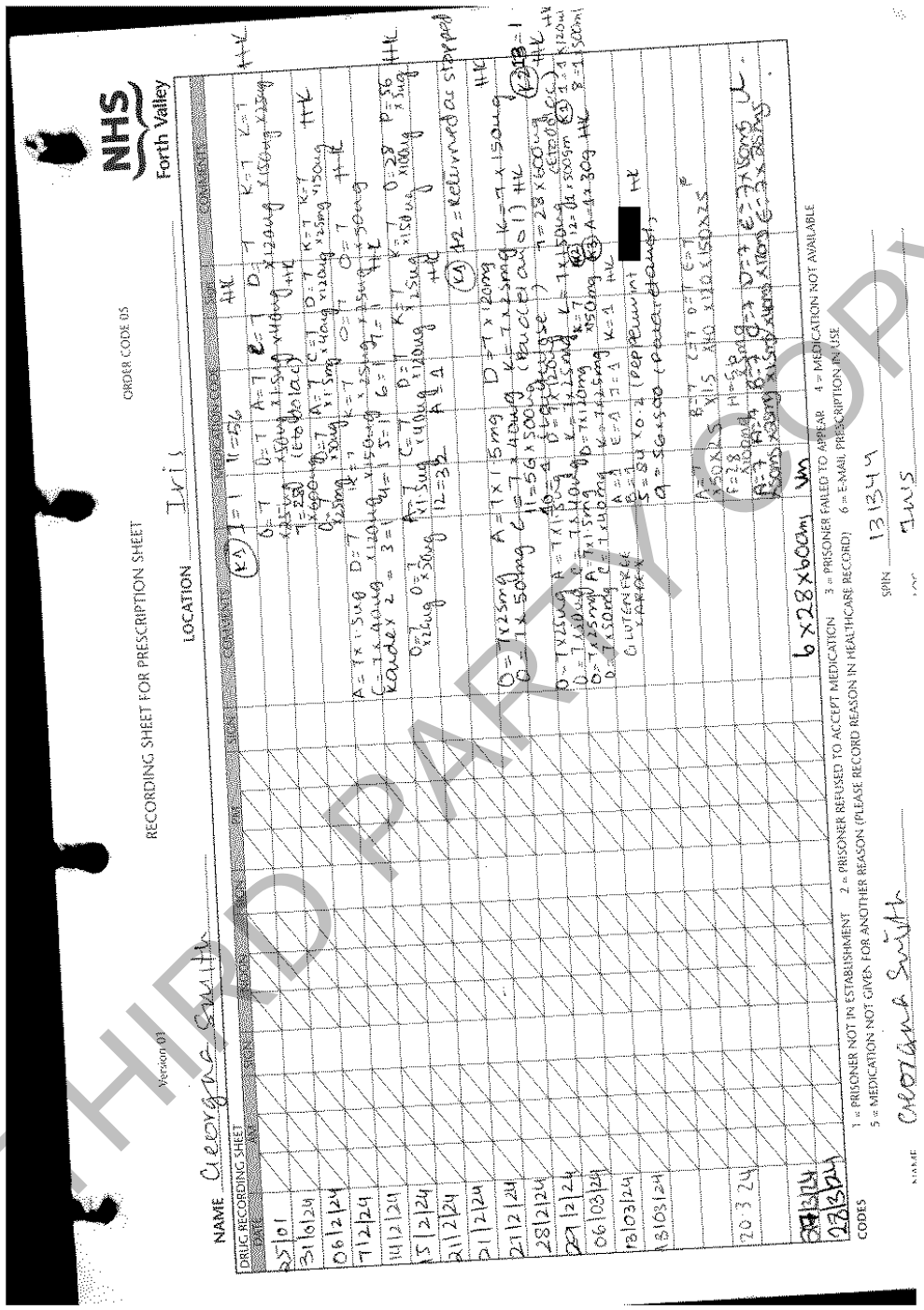

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NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 01

ORDER CODE 05

NAME Cleo Grace Smith

LOCATION Iris

DRUG RECORDING SHEET

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

SIGNATURE Cleo Grace Smith

SPIN 131349

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Blood Sciences Biochemistry Report

Patient Details

Surname	SMITH
Forename	GEORGINA
CHI	0412913127
Date of birth	04.12.1991
Sex	Female
Address	21 Meadowside Beith BEITH AYRSHIRE KA15 1BU

Specimen Details

Specimen Number	B,24.8026867.R
Specimen Type	Blood
Date/Time Collected	22.10.24 / 09:39
Date/Time Received	22.10.24 / 11:57
Requested By	Dr Dimitar Nechev
GP Practice	87432
Date/Time Reported	22.10.24 / 13:07
Details	3 month TFTs for 1 year

Results

Thyroid funct test - Authorised on 22.10.24 at 13:02

TSH	1.26	mU/L	(0.35-5.00)
Free T4	13.2	pmol/L	(9.0-21.0)
Total T3		nmol/L	

End of Report

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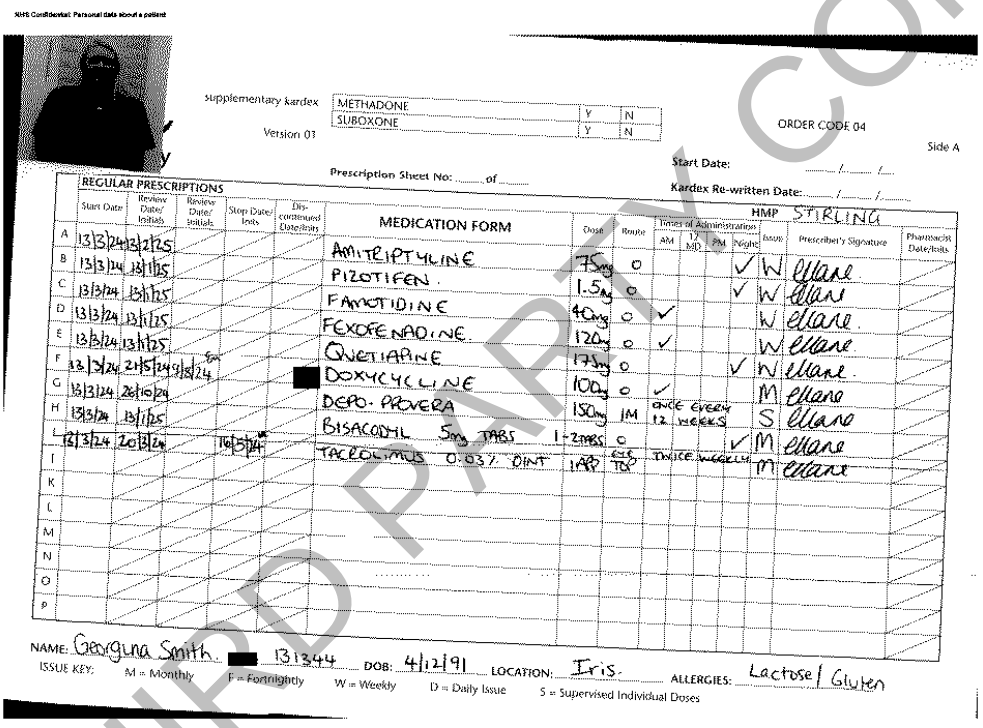

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Supplementary Kardex
Version 03

METHADONE	Y	N
SUBOXONE	Y	N

ORDER CODE 04

Side A

Start Date: ___/___/___

Kardex Re-written Date: ___/___/___

Prescription Sheet No: ___ of ___

HMP STIRLING

REGULAR PRESCRIPTIONS

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Initials	Disc. continued Date/Initials	MEDICATION FORM	Dose	Route	Times of Administration: AM	12 MD	PM	Night	Mon	Prescriber's Signature	Pharmacist Date/Initials
A	13/3/24	13/1/25				AMITRIPTYLINE	75mg	O				✓	W	Eliane	
B	13/3/24	13/1/25				PIZOTIFEN	1.5mg	O				✓	W	Eliane	
C	13/3/24	13/1/25				FAMOTIDINE	40mg	O	✓				W	Eliane	
D	13/3/24	13/1/25				FEXOFENADINE	120mg	O	✓				W	Eliane	
E	13/3/24	13/1/25				QUETIAPINE	175mg	O				✓	W	Eliane	
F	13/3/24	21/5/24	4/8/24	5pm		DOXYCYCLINE	100mg	O	✓				M	Eliane	
G	13/3/24	26/10/24				DEPO-PROVERA	150mg	IM	ONCE EVERY 12 WEEKS				S	Eliane	
H	13/3/24	13/1/25				BISACODYL 5mg TABS	1-2 TABS	O				✓	M	Eliane	
I	12/3/24	20/3/24		16/5/24		TACROLIMUS 0.03% OINT	1AP	EYE TOP	TWICE WEEKLY				M	Eliane	
K															
L															
M															
N															
O															
P															

NAME: Georgina Smith [redacted] 131344 DOB: 4/12/91 LOCATION: Iris ALLERGIES: Lactose / Gluten

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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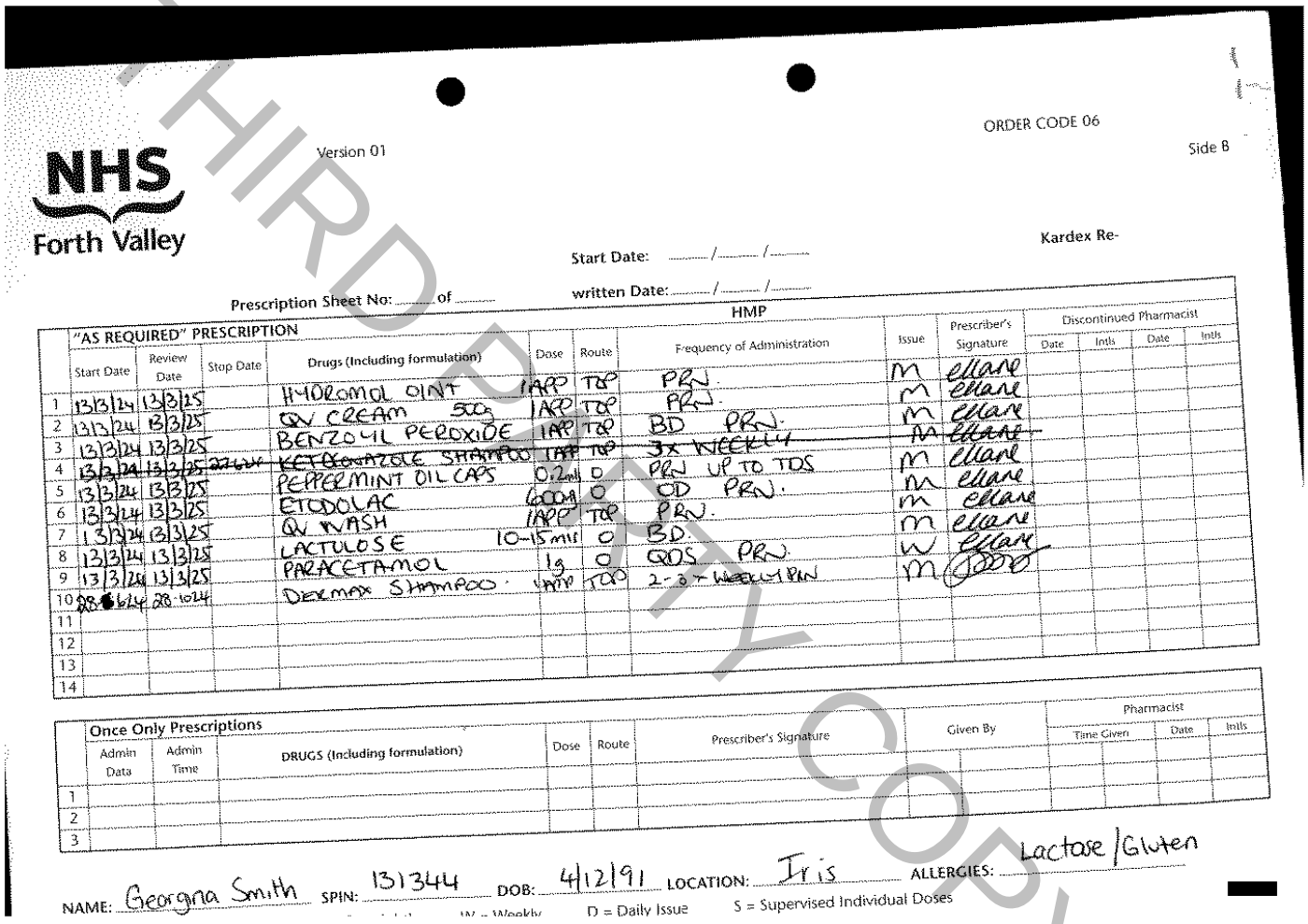
THIRD PARTY COPY



NHS Forth Valley

Version 01

ORDER CODE 06

Side B

Kardex Re-

Start Date: ..../..../....

written Date: ..../..../....

Prescription Sheet No: ..... of .....

HMP

"AS REQUIRED" PRESCRIPTION

	Start Date	Review Date	Stop Date	Drugs (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Discontinued Pharmacist Date	Discontinued Pharmacist Initls	Date	Initls
1	13/3/24	13/3/25		HYDROMOL OINT	1APP	TOP	PRN	M	ellane				
2	13/3/24	13/3/25		QV CREAM 500g	1APP	TOP	PRN.	M	ellane				
3	13/3/24	13/3/25		BENZOYL PEROXIDE	1APP	TOP	BD PRN.	M	ellane				
4	13/3/24	13/3/25	22.04.24	~~KETOCONAZOLE SHAMPOO~~	~~1APP~~	~~TOP~~	3x WEEKLY	M	ellane				
5	13/3/24	13/3/25		PEPPERMINT OIL CAPS	0.2ml	D	PRN UP TO TDS	M	ellane				
6	13/3/24	13/3/25		ETODOLAC	600mg	O	OD PRN.	M	ellane				
7	13/3/24	13/3/25		QV WASH	1APP	TOP	PRN.	M	ellane				
8	13/3/24	13/3/25		LACTULOSE	10-15ml	O	BD	W	ellane				
9	13/3/24	13/3/25		PARACETAMOL	1g	O	QDS PRN.	M	[illegible]				
10	28/6/24	28/10/24		DERMAX SHAMPOO	1APP	TOP	2-3 x WEEKLY PRN						
11													
12													
13													
14													

Once Only Prescriptions

	Admin Data	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescriber's Signature	Given By	Pharmacist Time Given	Pharmacist Date	Pharmacist Initls
1										
2										
3										

NAME: Georgina Smith SPIN: 131344 DOB: 4/12/91 LOCATION: Iris ALLERGIES: Lactose/Gluten

W = Weekly D = Daily Issue S = Supervised Individual Doses

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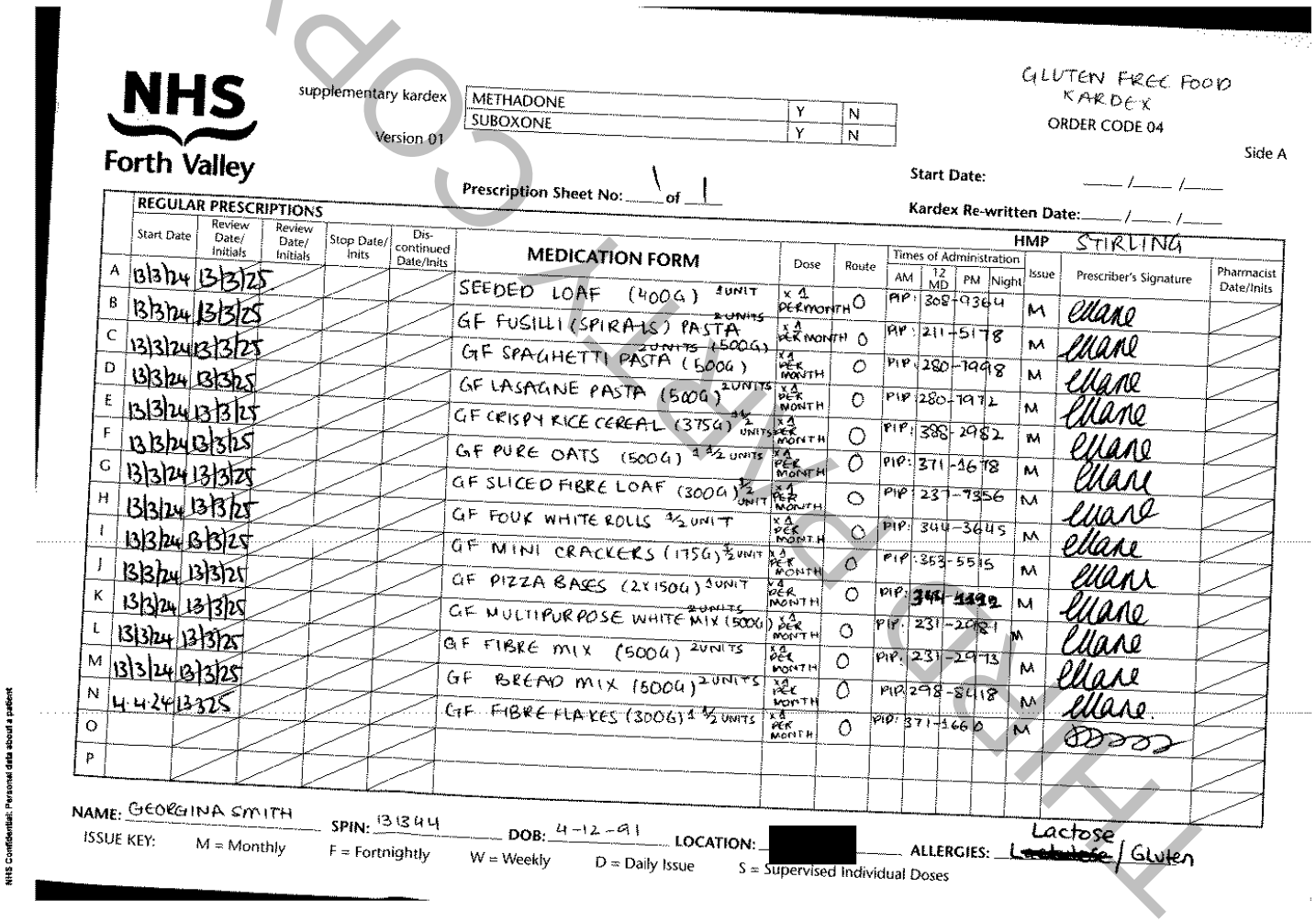

NHS Forth Valley

supplementary kardex Version 01

METHADONE	Y	N
SUBOXONE	Y	N

GLUTEN FREE FOOD KARDEX
ORDER CODE 04

Side A

Prescription Sheet No: 1 of 1

Start Date: ___/___/___

Kardex Re-written Date: ___/___/___

HMP STIRLING

REGULAR PRESCRIPTIONS

	Start Date	Review Date/ Initials	Review Date/ Initials	Stop Date/ Inits	Dis-continued Date/Inits	MEDICATION FORM	Dose	Route	Times of Administration AM	T2 MD	PM	Night	Issue	Prescriber's Signature	Pharmacist Date/Inits
A	13/3/24	13/3/25				SEEDED LOAF (400G) 1 UNIT	x 1 PER MONTH	O	PIP:		308-9364		M	Eliane	
B	13/3/24	13/3/25				GF FUSILLI (SPIRALS) PASTA 2 UNITS	x 1 PER MONTH	O	PIP:		211-5178		M	Eliane	
C	13/3/24	13/3/25				GF SPAGHETTI PASTA (500G) ~~2 UNITS~~ 1	x 1 PER MONTH	O	PIP:		280-7998		M	Eliane	
D	13/3/24	13/3/25				GF LASAGNE PASTA (500G) 2 UNITS	x 1 PER MONTH	O	PIP:		280-7972		M	Eliane	
E	13/3/24	13/3/25				GF CRISPY RICE CEREAL (375G) 1 1/2 UNITS	x 1 PER MONTH	O	PIP:		388-2982		M	Eliane	
F	13/3/24	13/3/25				GF PURE OATS (500G) 1 1/2 UNITS	x 1 PER MONTH	O	PIP:		371-1678		M	Eliane	
G	13/3/24	13/3/25				GF SLICED FIBRE LOAF (300G) 1/2 UNIT	x 1 PER MONTH	O	PIP:		237-9356		M	Eliane	
H	13/3/24	13/3/25				GF FOUR WHITE ROLLS 1/2 UNIT	x 1 PER MONTH	O	PIP:		344-3645		M	Eliane	
I	13/3/24	13/3/25				GF MINI CRACKERS (175G) 1/2 UNIT	x 1 PER MONTH	O	PIP:		353-5535		M	Eliane	
J	13/3/24	13/3/25				GF PIZZA BASES (2X150G) 1 UNIT	x 1 PER MONTH	O	PIP:		~~344-1192~~ 344-1192		M	Eliane	
K	13/3/24	13/3/25				GF MULTIPURPOSE WHITE MIX (500G) ~~2 UNITS~~ 1	x 1 PER MONTH	O	PIP:		231-2981		M	Eliane	
L	13/3/24	13/3/25				GF FIBRE MIX (500G) 2 UNITS	x 1 PER MONTH	O	PIP:		231-2973		M	Eliane	
M	13/3/24	13/3/25				GF BREAD MIX (500G) 2 UNITS	x 1 PER MONTH	O	PIP:		298-8418		M	Eliane	
N	4.4.24	13.3.25				GF FIBRE FLAKES (300G) 1 1/2 UNITS	x 1 PER MONTH	O	PIP:		371-1660		M	Eliane	
O															
P															

NAME: GEORGINA SMITH SPIN: 13144 DOB: 4-12-91 LOCATION: [redacted] ALLERGIES: ~~Lactose~~ / Gluten

ISSUE KEY: M = Monthly F = Fortnightly W = Weekly D = Daily Issue S = Supervised Individual Doses

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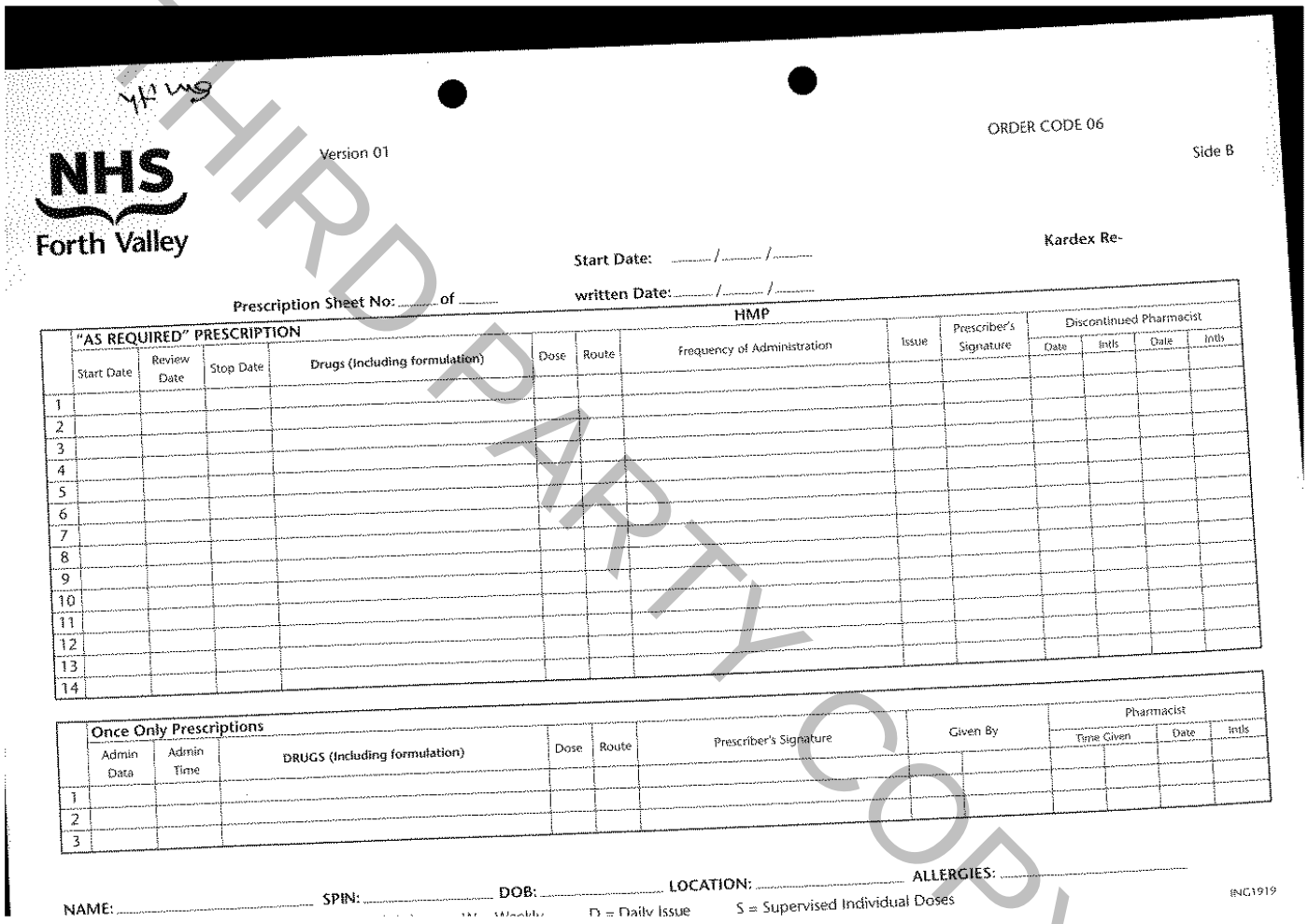

NHS Forth Valley

Version 01

ORDER CODE 06

Side B

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Kardex Re-

Start Date: ..../..../....

Prescription Sheet No: .... of ....

written Date: ..../..../....

HMP

	"AS REQUIRED" PRESCRIPTION								Discontinued Pharmacist			
	Start Date	Review Date	Stop Date	Drugs (Including formulation)	Dose	Route	Frequency of Administration	Issue	Prescriber's Signature	Date	Init's	Date	Init's
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													
13													
14													

	Once Only Prescriptions						Given By	Pharmacist		
	Admin Data	Admin Time	DRUGS (Including formulation)	Dose	Route	Prescriber's Signature		Time Given	Date	Init's
1										
2										
3										

NAME: .... SPIN: .... DOB: .... LOCATION: .... ALLERGIES: ....

D = Daily Issue S = Supervised Individual Doses

(NG)1919

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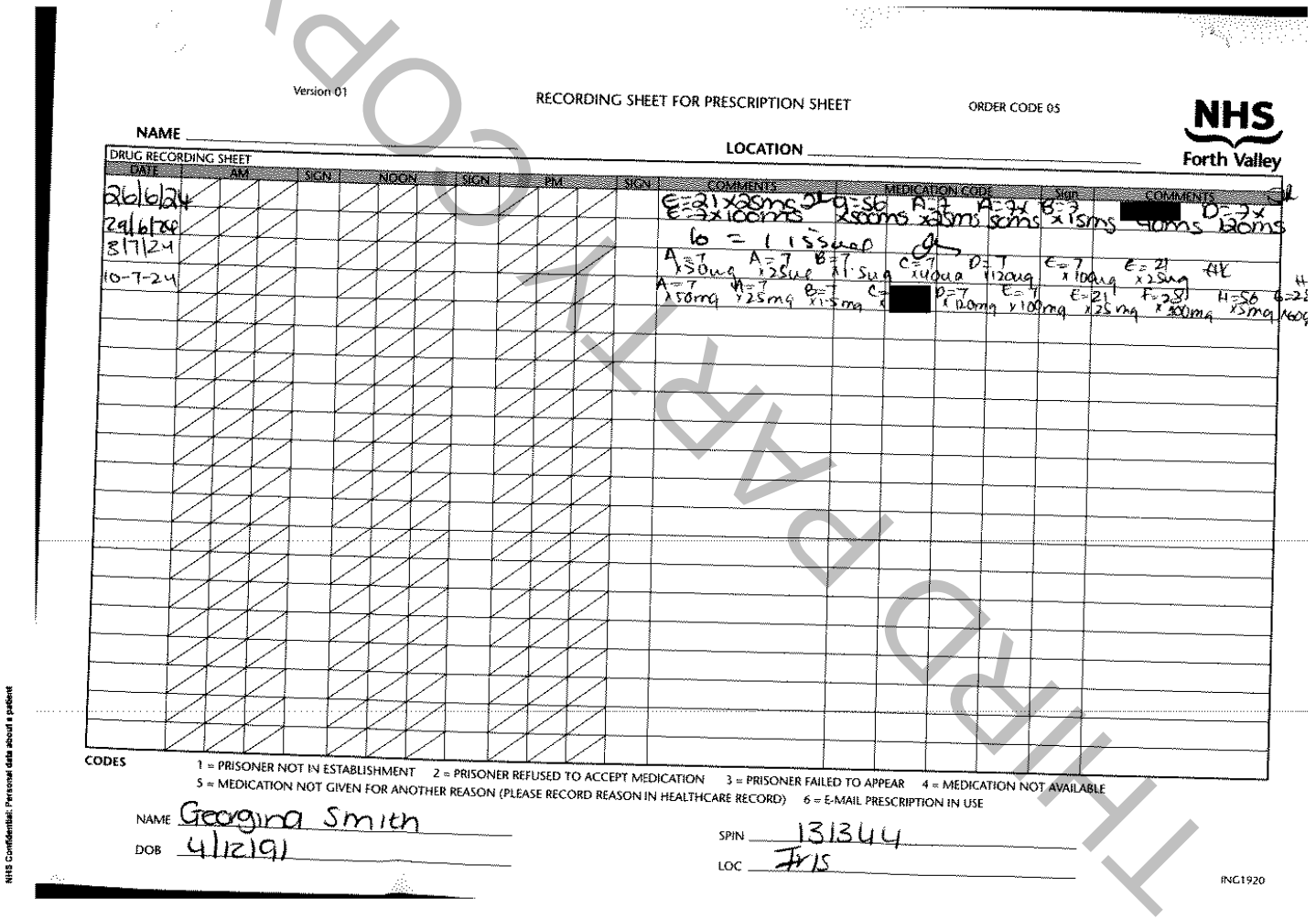
iGPR Report



Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME

LOCATION

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS
26/6/24							
29/6/24							
8/7/24							
10-7-24							

MEDICATION CODE

SIGN	COMMENTS
	E=21 x25mg 29=56 x500ms A=7 A=34 x15ms 30ms B=7 x15ms [redacted] D=7x 90ms 120ms
	6 = 1 15Sum
	A=7 x50mg A=7 x25ug B=7 x1.5ug C=7 x40ug D=7 x12ug E=7 x100mg E=21 x25ug HL
	A=7 x50mg B=7 x25mg B=7 x1.5mg C=[redacted] D=7 x20mg E=7 x100mg E=21 x25mg F=28 x300mg H=56 x5mg 6=2

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE

5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith

DOB 4/12/91

SPIN 131344

LOC Iris

INC1920

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NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

Version 01

NAME _____ LOCATION _____

DRUG RECORDING SHEET DATE	AM	SIGN	NURSE	SIGN	PM	SIGN	COMMENTS	MEDICATION CODE	SIGN	COMMENTS

CODES 1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME _____ SPIN _____

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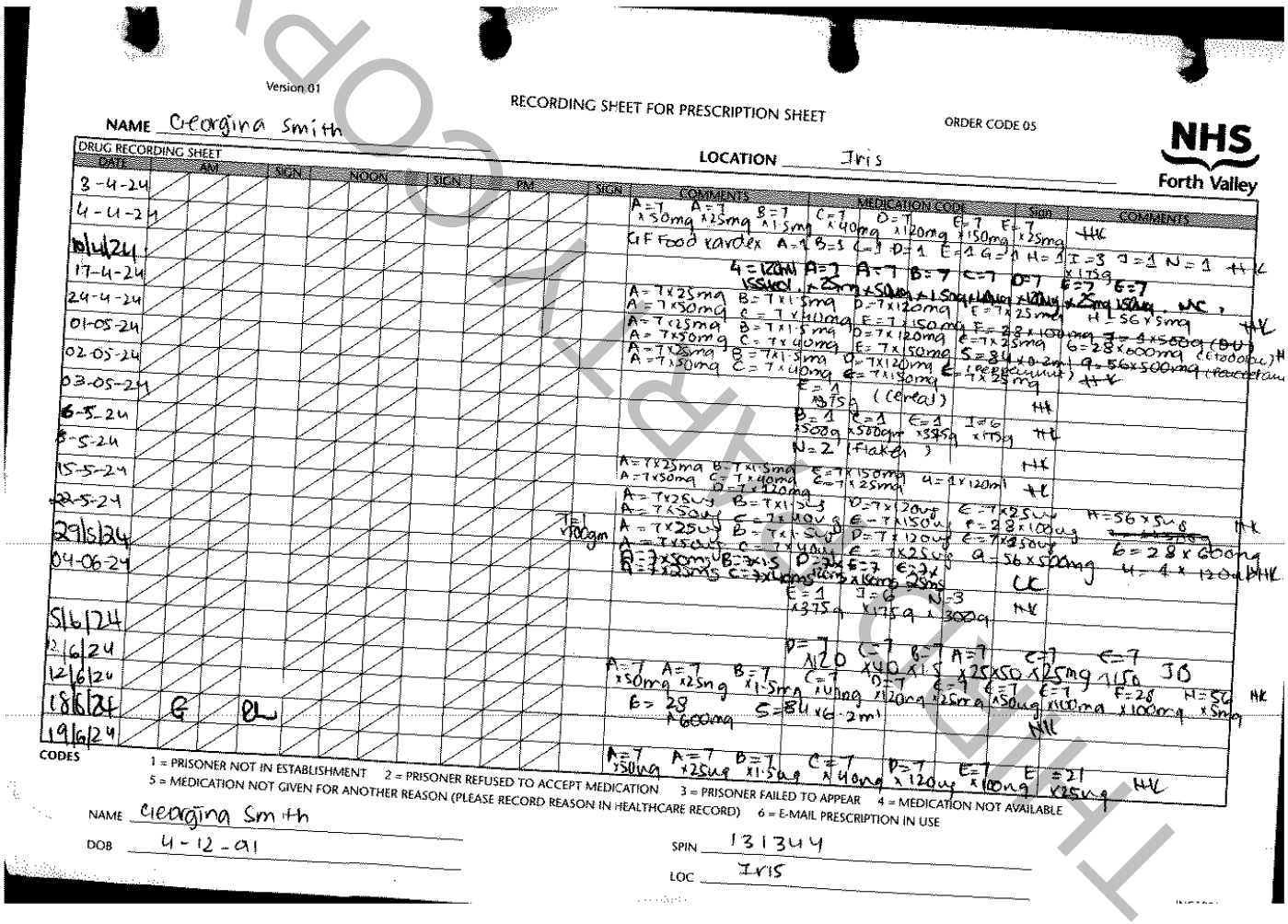

Version 01

RECORDING SHEET FOR PRESCRIPTION SHEET

ORDER CODE 05

NHS Forth Valley

NAME Georgina Smith

LOCATION Iris

DRUG RECORDING SHEET

DATE	AM	SIGN	NOON	SIGN	PM	SIGN	COMMENTS
3-4-24							
4-4-24							
10/4/24							
17-4-24							
24-4-24							
01-05-24							
02-05-24							
03-05-24							
6-5-24							
8-5-24							
15-5-24							
22-5-24							
29/5/24							
04-06-24							
5/6/24							
12/6/24							
18/6/24	G	BL					
19/6/24							

MEDICATION CODE

Sign	COMMENTS
HK	
HK	
HK	
HK	
HK	
HK	
HK	
HK	
HK	
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HK	
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HK	

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

NAME Georgina Smith

DOB 4-12-91

SPIN 131344

LOC Iris

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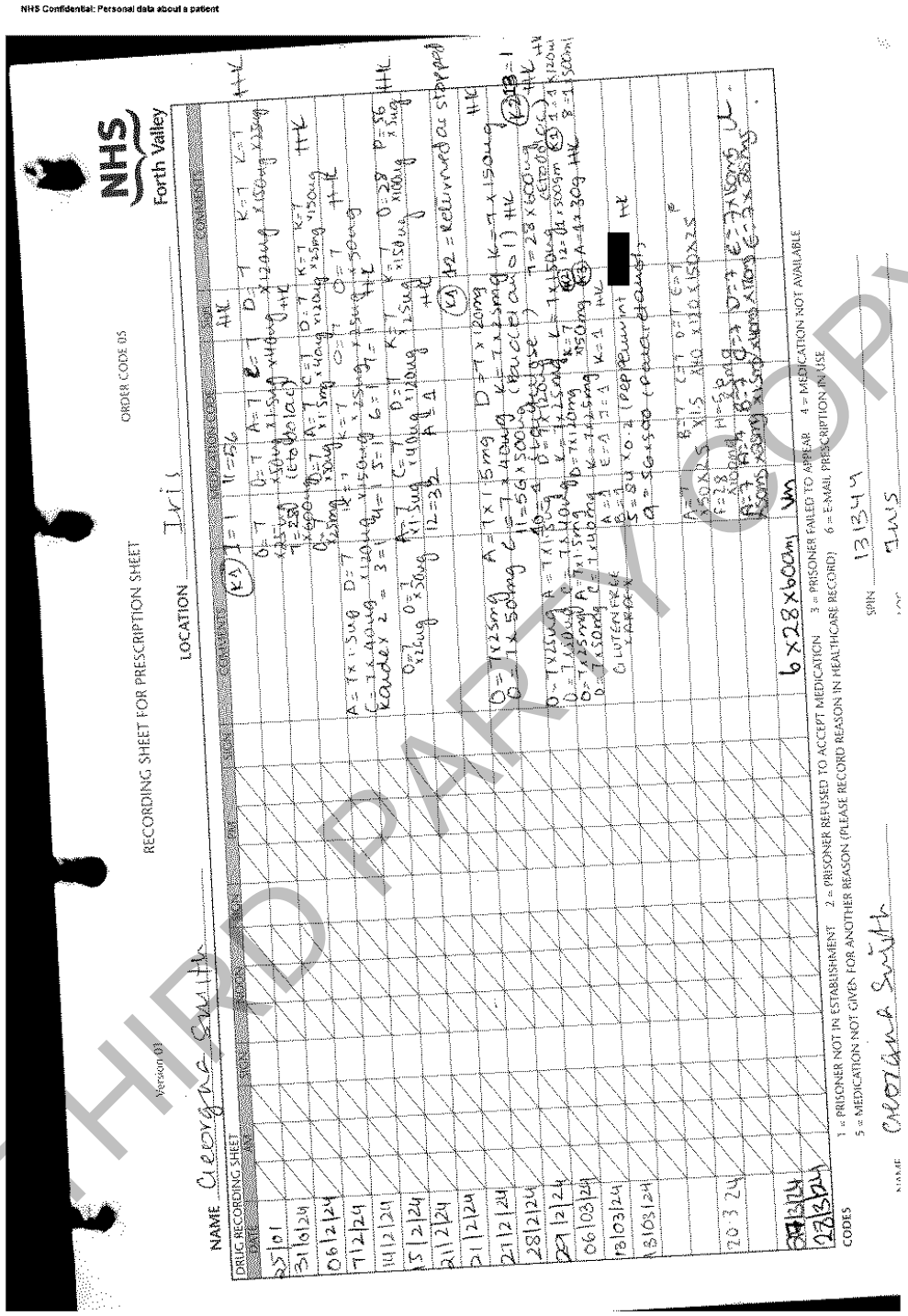

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NHS Forth Valley

RECORDING SHEET FOR PRESCRIPTION SHEET

Version 03

ORDER CODE 05

NAME Cleo Grace Smith

LOCATION Iris

DRUG RECORDING SHEET

CODES

1 = PRISONER NOT IN ESTABLISHMENT 2 = PRISONER REFUSED TO ACCEPT MEDICATION 3 = PRISONER FAILED TO APPEAR 4 = MEDICATION NOT AVAILABLE
5 = MEDICATION NOT GIVEN FOR ANOTHER REASON (PLEASE RECORD REASON IN HEALTHCARE RECORD) 6 = E-MAIL PRESCRIPTION IN USE

SIGNATURE Cleo Grace Smith

SPIN 131349

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4145 Confidential: Personal data about a patient

Blood Sciences Biochemistry Report

Patient Details

Surname	SMITH
Forename	GEORGINA
CHI	0412913127
Date of birth	04.12.1991
Sex	Female
Address	21 Meadowside Beith BEITH AYRSHIRE KA15 1BU

Specimen Details

Specimen Number	B,24.8026867.R
Specimen Type	Blood
Date/Time Collected	22.10.24 / 09:39
Date/Time Received	22.10.24 / 11:57
Requested By	Dr Dimitar Nechev
GP Practice	87432
Date/Time Reported	22.10.24 / 13:07
Details	3 month TFTs for 1 year

Results

Thyroid funct test - Authorised on 22.10.24 at 13:02

TSH	1.26	mU/L	(0.35-5.00)
Free T4	13.2	pmol/L	(9.0-21.0)
Total T3		nmol/L	

End of Report

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UC113

UC Universal Credit
HEALTH ASSESSMENT ADVISORY SERVICE

37
Oct 24
ORS

12049*0015787*0004* E 06900/H2

Mistylaw Medical Practice
MISTYLAW MEDICLAL PRACTICE
5 MAINS ROAD
[redacted]
KA15 2AF

06900/4 4640

Our phone number is: 03000 927670

If you have a textphone, you can call on: 18001 03000 927670

If you get in touch with us, tell us this reference number: JM716260A

Date: 23rd October 2024

About your patient

Address: 21, Meadowside, Beith, KA15 1BU

Full Name: Miss Georgina Smith

NINo: JM716260A

Date of birth: 4th December 1991

Dear Doctor,

If you or someone in your directly employed team has issued a fit note for the above patient, please arrange for that person to complete this form.

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 work capability assessment and if so support that assessment.

Please note

- General Practices 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.
- 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.[redacted]sa113-interactive-for-use-by-healthcare-practitioners
- **A fully completed form may help inform the 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

Ms [redacted]

Health Assessment Advisory Service provided by [redacted] on behalf of the Department for Work and Pensions
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Version 02/24

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UC113

Patient Name:
Miss Georgina Smith

Patient NINo: JM716260A
Patient Date of Birth: 04.12.1991

Freepost RUGX-LXHK-UKEG
Glasgow BSC UC
Mail Handling Site A
Wolverhampton
WV98 2HG

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?
31/10/2024

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
Obsessive compulsive disorder 15/10/24		Re [redacted]
- Psoriasis scalp.	—	—
Learning Disability 06/03/23	—	—
Anxiety with depression.	Pre 2014	On aripiprazole. Previously under psychiatry. On Pizotifen
Migraines	—	
Reflux		On [redacted] famotidine.

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Version 02/24

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UC113

About your patient - continued

NINo: JM716260A

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

Migraines, Chronic pain, hay fever.

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

Walking or moving	
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.

5) Released from prison in July 24.
6) If more information was required we would [redacted] to be contacted via phone/written consent.

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

Your Signature

UC113

Signature	[signature]
Name IN CAPITALS	IAIN STARR
Profession IN CAPITALS	GP
Date	21/01/24

Practice stamp

[redacted]
DR. T. GAVIN C3808-0
DR. T. MCLAUGHLIN C3779-6
DR. I. SAVAGE C3858-8
MISTYLAW MEDICAL PRACTICE
BEITH SURGERY
5 MAINS ROAD
BEITH, AYRSHIRE
KA15 2AF

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NHS Confidential: [redacted] data about a patient

MSK Musculoskeletal Service

MSK DISCHARGE REPORT

NHS Ayrshire [redacted]

Patient Name:	Georgina Smith
Address:	6 Mains Avenue, Beith, Ayrshire, KA15 2AT
CHI:	0412913127
GP:	Dr DS Nechev
Consultant:	
Referrer Source:	GP
Referral Date:	15/08/2024
Start Date:	14/11/2024
Discharge Date:	28/01/2025
No. of treatments:	1
Discharge Reason:	DNA 14/01/25
Treatment Outcome:	Advice only
Therapist:	[redacted] Menzies
Location:	PHYSIOTHERAPY DEPARTMENT KILBIRNIE HEALTH CENTRE

Dear Dr Nechev

Diagnosis: Cervical / Thoracic stiffness

Georgina presented to MSK with a 6 year history of upper thoracic pain and stiffness which she feels is gradually worsening. She reports she had an MRI for this in Forth Valley. She was issued with a thoracic and scapula stretching programme but did not attend her follow up appointment so has now been discharged from MSK

Actions for GP/Follow up recommendations:

Referred on to _____(if applicable)

Yours sincerely,
Authorised on 06/03/2025 11:46:38 by [redacted] Menzies.
[redacted] Menzies
06/03/2025

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NHS Confidential- Personal data about a patient

Blood Sciences Biochemistry Report

Patient Details

Surname	SMITH
Forename	GEORGINA
CHI	0412913127
Date of birth	04.12.1991
Sex	Female
Address	6 Mains Avenue BEITH [redacted] AYRSHIRE KA15 2AT

Specimen Details

Specimen Number	B,24.8219952.J
Specimen Type	Blood
Date/Time Collected	12.12.24 / 11:26
Date/Time Received	12.12.24 / 16:22
Requested By	Dr Dimitar Nechev
GP Practice	87432
Date/Time Reported	12.12.24 / 18:12
Details	Cough for 5 weeks. Mostly...

Results

C-reactive Protein - Authorised on 12.12.24 at 18:10

C Reactive Protein	4	mg/L	(0-10)

End of Report

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Universal Credit
HEALTH ASSESSMENT ADVISORY SERVICE

37
Oct 24
ORS

12049*0015787*0004* E 06900/4 H2

Mistylaw Medical Practice
MISTYLAW MEDICLAL PRACTICE
5 MAINS ROAD
[redacted]
KA15 2AF

06900/4 4540

Our phone number is: 03000 927670

If you have a textphone,
you can call on: 18001 03000 927670

If you get in touch with us, tell us this
reference number: JM716260A

Date: 23rd October 2024

About your patient

Address: 21, Meadowside, Beith, KA15 1BU

Full Name: Miss Georgina Smith

NINo: JM716260A

Date of birth: 4th December 1991

Dear Doctor,

If you or someone in your directly employed team has issued a fit note for the above patient, please arrange for that person to complete this form.

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 work capability assessment and if so support that assessment.

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- Details of the last three consultations. Please remove any third party data.

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

Thank you for your help.

Yours sincerely

Ms [redacted]

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Version 02/24

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NHS Confidential. Personal data about a patient

UC113

Patient Name:
Miss Georgina Smith

Patient NINo: JM716260A
Patient Date of Birth: 04.12.1991

Freepost RUGX-LXHK-UKEG
Glasgow BSC UC
Mail Handling Site A
Wolverhampton
WV98 2HG

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?
31/01/2024.

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
Obsessive compulsive disorder 15/10/24		Re [redacted]
-Psoriasis scalp.	—	—
Learning Disability 06/03/23	—	—
Anxiety with depression.	Pre 2014	On aripiprazole. Previously under psychiatry. On Pizotifen
Migraines	—	
Reflux		On ~~ranitidine~~ famotidine.

P3B3D4D9-0906-4915-9F2-2

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UC113

About your patient - continued

NINo: JM716260A

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

Migraines, Chronic pain, hay fever.

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

Walking or moving	
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**

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

Released from prison in July 24.
If more information was required we would [redacted] to be contacted via phone/written consent.

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

Your Signature

UC113

Signature

Name IN CAPITALS: IAIN STARK

Profession IN CAPITALS: GP

Date: 21/01/24.

Practice stamp

[redacted]
DR. T. GAVIN C3808-0
DR. T. MCLAUGHLIN C3779-6
DR. I. SAVAGE C3856-8
MISTYLAW MEDICAL PRACTICE
BEITH SURGERY
5 MAINS ROAD
BEITH, AYRSHIRE
KA15 2AF

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NHS Confidential: Personal data about a patient

Blood Sciences Haematology Report

Patient Details

Surname	SMITH
Forename	GEORGINA
CHI	0412913127
Date of birth	04.12.1991
Sex	Female
Address	6 Mains Avenue BEITH [redacted] AYRSHIRE KA15 2AT

Specimen Details

Specimen Number	B,24.8226032.J
Specimen Type	Blood
Date/Time Collected	12.12.24 / 11:26
Date/Time Received	12.12.24 / 16:35
Requested By	Dr Dimitar Nechev
GP Practice	87432
Date/Time Reported	12.12.24 / 17:42
Details	Cough for 5 weeks. Mostly...

Results

Full Blood Count - Authorised on 12.12.24 at 16:47

White Blood Count		9.6	x10^9/l	(4.0-10.0)
Red Cell Count		4.79	x10^12/l	(3.80-5.80)
Haemoglobin		145	g/l	(115-165)
Haematocrit		0.439	l/l	(0.370-0.470)
Mean Cell Volume		91.6	fl	(83.0-101.0)
MCH		30.3	pg	(27.0-32.0)
Platelet Count		334	x10^9/l	(150-410)
Neutrophils		5.7	x10^9/l	(2.0-7.0)
Lymphocytes		2.7	x10^9/l	(1.1-5.0)
Monocytes		0.6	x10^9/l	(0.2-1.0)
Eosinophils	+	0.53	x10^9/l	(0.02-0.50)
Basophils		0.1	x10^9/l	(0.0-0.1)
Nucleated RBC		0.0	x10^9/l	

Report comments:

Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except Sick

GFST - Authorised on 12.12.24 at 17:33

Glan. Fever Scr Test Neg

Report comments:

Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except Sick

Blood Film - Authorised on 12.12.24 at 17:36

Blood Film Yes

Comments:
Unremarkable blood film

Report comments:

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NHS Confidential: Personal data about a patient

Blood Sciences Haematology Report

Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except Sick

End of Report

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Filename: igprda202606181502250.pdf
Extension:.tif
Pages:

NHS Confidential: [redacted] data about a patient

MSK Musculoskeletal Service

MSK DISCHARGE REPORT

NHS Ayrshire [redacted]

Patient Name:	Georgina Smith
Address:	6 Mains Avenue, Beith, Ayrshire, KA15 2AT
CHI:	0412913127
GP:	Dr DS Nechev
Consultant:	
Referrer Source:	GP
Referral Date:	15/08/2024
Start Date:	14/11/2024
Discharge Date:	28/01/2025
No. of treatments:	1
Discharge Reason:	DNA 14/01/25
Treatment Outcome:	Advice only
Therapist:	[redacted] Menzies
Location:	PHYSIOTHERAPY DEPARTMENT KILBIRNIE HEALTH CENTRE

Dear Dr Nechev

Diagnosis: Cervical / Thoracic stiffness

Georgina presented to MSK with a 6 year history of upper thoracic pain and stiffness which she feels is gradually worsening. She reports she had an MRI for this in Forth Valley. She was issued with a thoracic and scapula stretching programme but did not attend her follow up appointment so has now been discharged from MSK

Actions for GP/Follow up recommendations:

Referred on to _____(if applicable)

Yours sincerely,
Authorised on 06/03/2025 11:46:38 by [redacted] Menzies.
[redacted] Menzies
06/03/2025

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Filename: igprda202606181502240.pdf
Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

Blood Sciences Haematology Report

Patient Details

Surname	SMITH
Forename	GEORGINA
CHI	0412913127
Date of birth	04.12.1991
Sex	Female
Address	6 Mains Avenue BEITH [redacted] AYRSHIRE KA15 2AT

Specimen Details

Specimen Number	B,24.8226032.J
Specimen Type	Blood
Date/Time Collected	12.12.24 / 11:26
Date/Time Received	12.12.24 / 16:35
Requested By	Dr Dimitar Nechev
GP Practice	87432
Date/Time Reported	12.12.24 / 17:42
Details	Cough for 5 weeks. Mostly...

Results

Full Blood Count - Authorised on 12.12.24 at 16:47

White Blood Count		9.6	x10^9/l	(4.0-10.0)
Red Cell Count		4.79	x10^12/l	(3.80-5.80)
Haemoglobin		145	g/l	(115-165)
Haematocrit		0.439	l/l	(0.370-0.470)
Mean Cell Volume		91.6	fl	(83.0-101.0)
MCH		30.3	pg	(27.0-32.0)
Platelet Count		334	x10^9/l	(150-410)
Neutrophils		5.7	x10^9/l	(2.0-7.0)
Lymphocytes		2.7	x10^9/l	(1.1-5.0)
Monocytes		0.6	x10^9/l	(0.2-1.0)
Eosinophils	*	0.53	x10^9/l	(0.02-0.50)
Basophils		0.1	x10^9/l	(0.0-0.1)
Nucleated RBC		0.0	x10^9/l	

Report comments:

Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except Sick

GPST - Authorised on 12.12.24 at 17:33

Glan. Fever Scr Test Neg

Report comments:

Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except Sick

Blood Film - Authorised on 12.12.24 at 17:36

Blood Film Yes

Comments:
Unremarkable blood film

Report comments:

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Blood Sciences Haematology Report

Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except Sick

End of Report

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Filename: igprda202606181502180.pdf
Extension:.tif
Pages:

NHS Confidential- Personal data about a patient

Blood Sciences Biochemistry Report

Patient Details

Surname	SMITH
Forename	GEORGINA
CHI	0412913127
Date of birth	04.12.1991
Sex	Female
Address	6 Mains Avenue BEITH [redacted] AYRSHIRE KA15 2AT

Specimen Details

Specimen Number	B,24.8219952.J
Specimen Type	Blood
Date/Time Collected	12.12.24 / 11:26
Date/Time Received	12.12.24 / 16:22
Requested By	Dr Dimitar Nechev
GP Practice	87432
Date/Time Reported	12.12.24 / 18:12
Details	Cough for 5 weeks. Mostly...

Results

C-reactive Protein - Authorised on 12.12.24 at 18:10

C Reactive Protein	4	mg/L	(0-10)

End of Report

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Filename: igprda202606181502060.pdf
Extension:.tif
Pages:

4145 Confidential: Personal data about a patient

Royal [redacted] Hospital: Diagnostic Imaging Report

Patient	GEORGINA SMITH	**Address**	6 MAINS AVENUE, BEITH, AYRSHIRE, KA15 2AT
DOB	04/12/1991	**CHI No.**	0412913127
Ref. Source	Mistylaw Medical Practice	**Practice Code**	87432
Referrer	Dr Dimitar Nechev	**Exam Date**	24/12/2024 11:09

Report Summary

Clinical History :
Cough for 5 weeks. Mostly dry. SOB on exertion. Clear lungs. ?cause.

XR Chest

XR Chest :
Rotated film. The heart is not enlarged. The lungs are clear of active disease. No significant focal lung lesion identified.

Last verified by: 3488188 (Dr [redacted] Kelly)
Reported by: 3488188 (Dr [redacted] and CPC (None)

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NHS Confidential: Personal data about a patient

Social Security Scotland
Tèarainteachd Shòisealta

P12657008/000040 1R

Beith Surgery
Beith Surgery
5 Mains Road
Beith
KA15 2AF

18/12/2024

Adult Disability Payment: **Supporting information request**

You have received this request because someone applying for Adult Disability Payment has asked Social Security Scotland to contact you on their behalf.

We need you to confirm the applicants conditions, disability or needs. You do not need to include a diagnosis.

We would like you to provide this supporting information within 28 days of receiving it. The quicker you respond, the sooner we can provide disability assistance if the applicant is entitled to it.

W100N

If you cannot provide this information within 28 days, call us free on 0800 182 2222.

For guidance on how to provide this supporting information, go to 'How to complete a supporting information request' at the end of this form.

P12657008/000040/1/14

For the attention of:

Name:

Organisation:

The applicant has authorised us to approach you to provide supporting information for their case.

The applicant has also given permission for another person in your organisation to complete this request if they hold the information to do so.

Application details

Below are details of the applicant who has applied for Adult Disability Payment.

If you're unable to match these details with your records, call us free on 0800 182 2222. Our opening times are Monday to Friday, 8am to 6pm.

Dignity, fairness, respect.

Page 1

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NHS Confidential: Personal data about a patient

Social Security Scotland
Tèarainteachd Shòisealta [redacted]

Applicant's first and last name:	Georgina Smith
Applicant's address:	
Applicant's postcode:	KA15 2AT
Applicant's date of birth:	4 December 1991
Applicant CHI number:	0412913127

Supporting information form

Please answer the following questions. Use the box below to tell us what you know.

Can you confirm all diagnosed conditions and prescribed medication and treatment?
Can you confirm that Georgina experiences difficulty with mobility?

PERSONALITY DISORDER
LEARNING DISABILITY
HISTORY OF ALCOHOL, [redacted] & EATING DISORDER -
ANXIETY WITH DEPRESSION - QUETIAPINE
CHRONIC BACK PAIN - AMITRIPTYLINE, ETODOLAC. REFERRED TO PHYSIO.
HEADACHES - PIZOTIFEN

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Dignity, fairness, respect.

NHS Confidential: Personal data about a patient

Social Security Scotland
Tèarainteachd Shòisealta [redacted]

If you are aware of potentially harmful information

You should tell us any information that might be harmful to the applicant and/or appointee. For example, a prognosis that the applicant has not been told about or test results that have not been discussed yet.

For Social Security Scotland to be able to withhold the information, a registered medical practitioner or a registered nurse would have to certify that the information would be likely to cause serious [redacted] to the health of the applicant.

Anything you write in this box will not be shared with the applicant, even if they ask for a copy of this form.

W100N

Your details

Fill in your details below if you're the professional completing this form.

P12657008/000040/3/4

Your full name:	DR TRACY MCLAUGHLAN
Your job title:	GP
Name of GP practice:	MISTYLAW GP PRACTICE
GP practice address and practice code:	5 MAINS ROAD, BEITH 87432

Confirm and sign

By signing this form, you agree to the following statement:

☑ I declare that the information in this form is correct, complete and up to date, as far as I know and believe.

Dignity, fairness, respect.

Page 3

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NHS Confidential: Personal data about a patient

Social Security Scotland
Tèarainteachd Shòisealta

Your full name:	DR. TRACY MCVAUGH
Date:	24. 12. 24

Thank you for taking the time to tell us what you know.

How to complete a supporting information request

What we need you to do

The applicant has identified you as a professional who can provide information to support their application for Adult Disability Payment.

We have used information the applicant gave us to decide which questions to ask you.

We need you to answer these questions with as much detail as you can. We do not expect you to answer questions outside of your area of expertise.

Please provide this supporting information within 28 days of receiving it.

If you cannot provide this information within 28 days, call us free on 0800 182 2222 as soon as possible. Our opening times are Monday to Friday, 8am to 6pm.

How your supporting information helps us

We use the supporting information you provide to:

- confirm what the applicant has told us in their application
- understand the impact their conditions or disability have on their daily life

We will review the supporting information you provide, together with any other supporting documents.

Once we have made a decision, we will contact the applicant to let them know.

If you cannot complete this form

If you are unable to provide this information, but there is someone else at your practice who is involved in the care or support of the applicant, you can ask them to complete this form.

Harmful information

You should use the Harmful Information section to tell us any information about their health that the applicant is not aware of.

This protects the applicant from discovering information that could have a harmful effect. For example, a prognosis that the applicant has not been told about or test results that have not been discussed yet.

Dignity, fairness, respect.

Page 4

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NHS Confidential: Personal data about a patient

Social Security Scotland
Tèarainteachd Shòisealta [redacted]

Withholding harmful information from the applicant will only be possible if a registered medical practitioner or a registered nurse certifies that the information would be likely to cause serious [redacted] to the health of the applicant.

Information governance

We have an information-sharing agreement with your organisation. This enables us to legally share information about applications to Social Security Scotland. You can find out more at socialsecurity.gov.scot.

We are looking for information to support an application for Adult Disability Payment. We have the applicant's authorisation to contact you about their application.

Contact us

If you have any questions or [redacted] about this supporting information request, call us free on 0800 182 2222. Our opening times are Monday to Friday, 8am to 6pm.

You and your data

To find out more about how Social Security Scotland uses your data you can either:

- go to mygov.scot/social-security-data
- call us free on 0800 182 2222 and select the relevant benefit

W100N

P:1617068/068040/3/4

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Dignity, fairness, respect.

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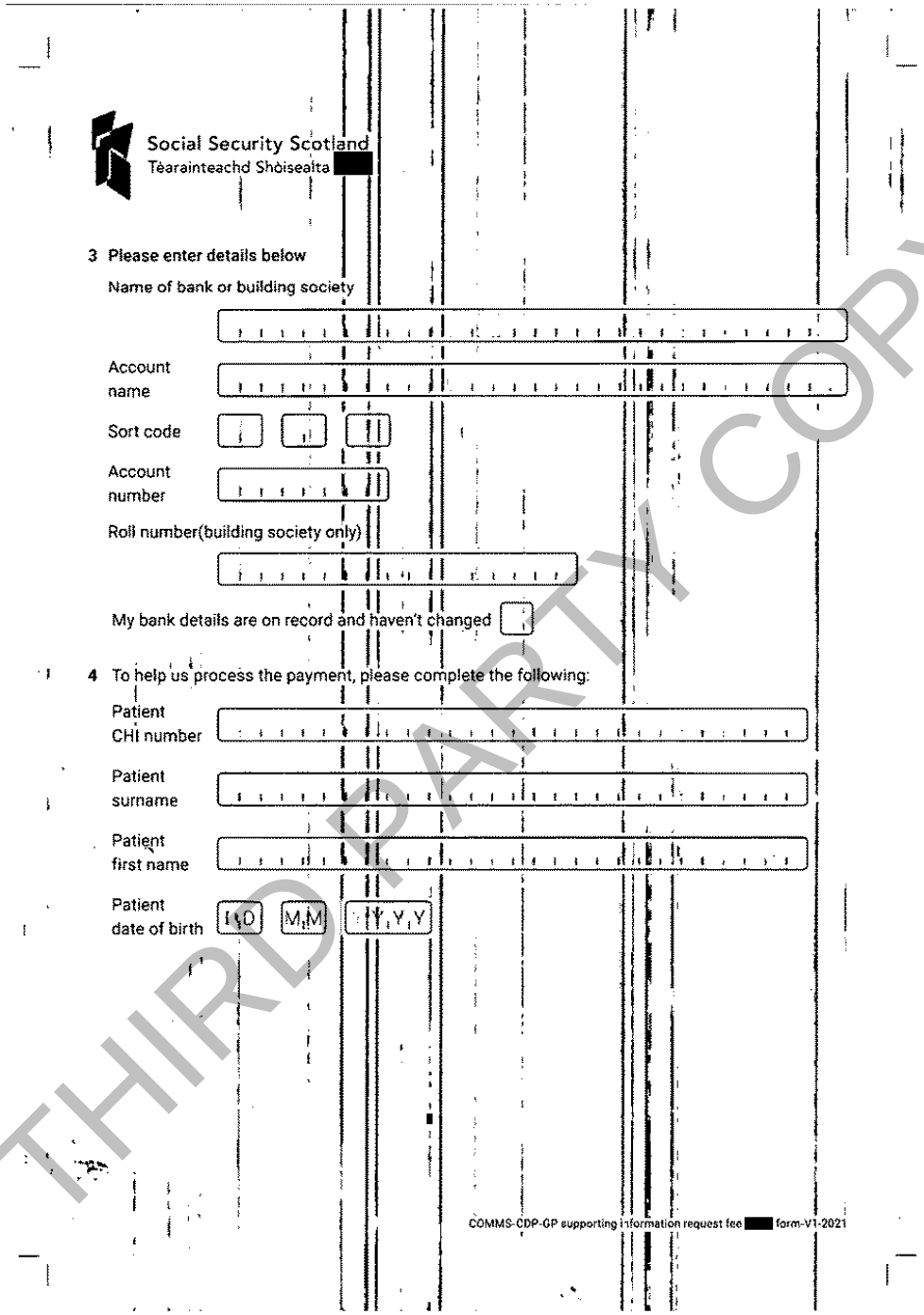

Social Security Scotland
Tèarainteachd Shòisealta

3 Please enter details below

Name of bank or building society

Account name

Sort code

Account number

Roll number(building society only)

My bank details are on record and haven't changed

4 To help us process the payment, please complete the following:

Patient CHI number

Patient surname

Patient first name

Patient date of birth D D M M Y Y Y Y

COMMS-CDP-GP supporting information request fee [redacted] form-V1-2021

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NHS Confidential [redacted]

Social Security Scotland
Tearainteachd Shòisealta [redacted]

Payment Form

Registered medical professional supporting information request fee claim form

Registered medical professional supporting information request payment section:

Eligibility to claim a fee for completing the registered medical professional supporting information request and the fee amount can be found at the Social Security Scotland website under 'Registered medical professional guidance for supporting information requests'. If you are eligible to [redacted] the fee, please complete the information below and return this form for payment in the pre-paid envelope provided.

Confirm that you have checked and are eligible to claim the fee ☐

1 Registered medical professional practice or organisation or name

Address

Town/City

Postcode

Country

Email address

2 Are you registered for VAT Yes ☐ No ☐

VAT reference number

Fee amount

W1D0N

P1265T068/000040/4/4

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Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

Royal [redacted] Hospital: Diagnostic Imaging Report

Patient	GEORGINA SMITH	**Address**	6 MAINS AVENUE, BEITH, AYRSHIRE, KA15 2AT
DOB	04/12/1991	**CHI No.**	0412913127
Ref. Source	Mistylaw Medical Practice	**Practice Code**	87432
Referrer	Dr Dimitar Nechev	**Exam Date**	24/12/2024 11:09

Report Summary

Clinical History :
Cough for 5 weeks. Mostly dry. SOB on exertion. Clear lungs. ?cause.

XR Chest

XR Chest :
Rotated film. The heart is not enlarged. The lungs are clear of active disease. No significant focal lung lesion identified.

Last verified by: 3488188 (Dr [redacted] Kelly)
Reported by: 3488188 (Dr [redacted] and CPC (None)

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Filename: igprda202606181501470.pdf
Extension:.tif
Pages:

NHS Confidential- Personal data about a patient

Blood Sciences Immunology Report

Patient Details

Surname	SMITH
Forename	GEORGINA
CHI	0412913127
Date of birth	04.12.1991
Sex	Female
Address	6 Mains Avenue BEITH [redacted] AYRSHIRE KA15 2AT

Specimen Details

Specimen Number	B,25.3512963.S
Specimen Type	Blood
Date/Time Collected	25.03.25 / 09:29
Date/Time Received	26.03.25 / 10:51
Requested By	Dr Dimitar Nechev
GP Practice	87432
Date/Time Reported	04.04.25 / 13:02
Details	Asthma. On ICS. Monitor E...

Results

I Total IgE - Authorised on 04.04.25 at 12:59

Total IgE	3	kU/L	(<80)

Comments:
Amended age-related references ranges are in use from 11/10/2023

End of Report

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Filename: igprda202606181501530.pdf
Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

Blood Sciences Immunology Report

Patient Details

Surname	SMITH
Forename	GEORGINA
CHI	0412913127
Date of birth	04.12.1991
Sex	Female
Address	6 Mains Avenue BEITH BEITH AYRSHIRE KA15 2AT

Specimen Details

Specimen Number	B,25.3512963.S
Specimen Type	Blood
Date/Time Collected	25.03.25 / 09:29
Date/Time Received	26.03.25 / 10:51
Requested By	Dr Dimitar Nechev
GP Practice	87432
Date/Time Reported	26.03.25 / 10:57
Details	Asthma. On ICS. Monitor E...

Results

I Allergy IgE Ranges - Authorised on 26.03.25 at 10:51

Interpretation Guide See comment

Comments:
INDIVIDUAL RESULT(S) TO FOLLOW WHEN TESTING COMPLETED.
Grade 0=<0.35 (negative)
Grade 1=0.35-0.70 (wk pos) Grade 2=0.70-3.50 (pos)
Grade 3=3.50-17.5 (pos) Grade 4=17.5-52.5 (strong pos)
Grade 5=52.5-100 (strong pos) Grade 6=>100 (strong pos)
Result must be interpreted in context of history.
Negative results do not exclude allergy.
Positive results may be found without clinical
reactions, especially in atopic individuals.
The sensitivity varies between allergens.

End of Report

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Pages:

NHS Confidential: Personal data about a patient

Blood Sciences Immunology Report

Patient Details

Surname	SMITH
Forename	GEORGINA
CHI	0412913127
Date of birth	04.12.1991
Sex	Female
Address	6 Mains Avenue BEITH BEITH AYRSHIRE KA15 2AT

Specimen Details

Specimen Number	B,25.3512963.S
Specimen Type	Blood
Date/Time Collected	25.03.25 / 09:29
Date/Time Received	26.03.25 / 10:51
Requested By	Dr Dimitar Nechev
GP Practice	87432
Date/Time Reported	26.03.25 / 10:57
Details	Asthma. On ICS. Monitor E...

Results

I Allergy IgE Ranges - Authorised on 26.03.25 at 10:51

Interpretation Guide See comment

Comments:
INDIVIDUAL RESULT(S) TO FOLLOW WHEN TESTING COMPLETED.
Grade 0=<0.35 (negative)
Grade 1=0.35-0.70 (wk pos) Grade 2=0.70-3.50 (pos)
Grade 3=3.50-17.5 (pos) Grade 4=17.5-52.5 (strong pos)
Grade 5=52.5-100 (strong pos) Grade 6=>100 (strong pos)
Result must be interpreted in context of history.
Negative results do not exclude allergy.
Positive results may be found without clinical
reactions, especially in atopic individuals.
The sensitivity varies between allergens.

End of Report

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Filename: igprda202606181501520.pdf
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Pages:

NHS Confidential: Personal data about a patient

Blood Sciences Immunology Report

Patient Details

Surname	SMITH
Forename	GEORGINA
CHI	0412913127
Date of birth	04.12.1991
Sex	Female
Address	6 Mains Avenue BEITH [redacted] AYRSHIRE KA15 2AT

Specimen Details

Specimen Number	B,25.3512963.S
Specimen Type	Blood
Date/Time Collected	25.03.25 / 09:29
Date/Time Received	26.03.25 / 10:51
Requested By	Dr Dimitar Nechev
GP Practice	87432
Date/Time Reported	04.04.25 / 13:02
Details	Asthma. On ICS. Monitor E...

Results

I Total IgE - Authorised on 04.04.25 at 12:59

Total IgE	3	kU/L	(<80)

Comments:
Amended age-related references ranges are in use from 11/10/2023

End of Report

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Filename: igprda202606181501490.pdf
Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

Blood Sciences Immunology Report

Patient Details

Surname	SMITH
Forename	GEORGINA
CHI	0412913127
Date of birth	04.12.1991
Sex	Female
Address	6 Mains Avenue BEITH BEITH AYRSHIRE KA15 2AT

Specimen Details

Specimen Number	B,25.3512963.S
Specimen Type	Blood
Date/Time Collected	25.03.25 / 09:29
Date/Time Received	26.03.25 / 10:51
Requested By	Dr Dimitar Nechev
GP Practice	87432
Date/Time Reported	11.04.25 / 13:27
Details	Asthma. On ICS. Monitor E...

Results

1 Dog (e5) - Authorised on 11.04.25 at 13:25

Dog (e5)	<0.35	kU/L	(<0.35)

End of Report

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Pages:

NHS Confidential- Personal data about a patient

Blood Sciences Haematology Report

Patient Details

Surname	SMITH
Forename	GEORGINA
CHI	0412913127
Date of birth	04.12.1991
Sex	Female
Address	6 Mains Avenue BEITH BEITH AYRSHIRE KA15 2AT

Specimen Details

Specimen Number	B,25.7313432.E
Specimen Type	Blood
Date/Time Collected	25.03.25 / 09:29
Date/Time Received	25.03.25 / 11:58
Requested By	Dr Dimitar Nechev
GP Practice	87432
Date/Time Reported	25.03.25 / 12:17
Details	Asthma. On ICS. Monitor E...

Results

Full Blood Count - Authorised on 25.03.25 at 12:14

White Blood Count		9.8	x10^9/l	(4.0-10.0)
Red Cell Count		4.86	x10^12/l	(3.80-5.80)
Haemoglobin		141	g/l	(115-165)
Haematocrit		0.430	l/l	(0.370-0.470)
Mean Cell Volume		88.5	fl	(83.0-101.0)
MCH		29.0	pg	(27.0-32.0)
Platelet Count		330	x10^9/l	(150-410)
Neutrophils		5.4	x10^9/l	(2.0-7.0)
Lymphocytes		2.8	x10^9/l	(1.1-5.0)
Monocytes		0.9	x10^9/l	(0.2-1.0)
Eosinophils	+	0.62	x10^9/l	(0.02-0.50)
Basophils		0.1	x10^9/l	(0.0-0.1)
Nucleated RBC		0.0	x10^9/l	

Report comments:

Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except Sick

End of Report

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Filename: igprda202606181501500.pdf
Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

Blood Sciences Immunology Report

Patient Details

Surname	SMITH
Forename	GEORGINA
CHI	0412913127
Date of birth	04.12.1991
Sex	Female
Address	6 Mains Avenue BEITH BEITH AYRSHIRE KA15 2AT

Specimen Details

Specimen Number	B,25.3512963.S
Specimen Type	Blood
Date/Time Collected	25.03.25 / 09:29
Date/Time Received	26.03.25 / 10:51
Requested By	Dr Dimitar Nechev
GP Practice	87432
Date/Time Reported	11.04.25 / 13:27
Details	Asthma. On ICS. Monitor E...

Results

1 Dog (e5) - Authorised on 11.04.25 at 13:25

Dog (e5)	<0.35	kU/L	(<0.35)

End of Report

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Filename: igprda202606181501550.pdf
Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

Blood Sciences Haematology Report

Patient Details

Surname	SMITH
Forename	GEORGINA
CHI	0412913127
Date of birth	04.12.1991
Sex	Female
Address	6 Mains Avenue BEITH BEITH AYRSHIRE KA15 2AT

Specimen Details

Specimen Number	B,25.7313432.E
Specimen Type	Blood
Date/Time Collected	25.03.25 / 09:29
Date/Time Received	25.03.25 / 11:58
Requested By	Dr Dimitar Nechev
GP Practice	87432
Date/Time Reported	25.03.25 / 12:17
Details	Asthma. On ICS. Monitor E...

Results

Full Blood Count - Authorised on 25.03.25 at 12:14

White Blood Count		9.8	x10^9/l	(4.0-10.0)
Red Cell Count		4.86	x10^12/l	(3.80-5.80)
Haemoglobin		141	g/l	(115-165)
Haematocrit		0.430	l/l	(0.370-0.470)
Mean Cell Volume		88.5	fl	(83.0-101.0)
MCH		29.0	pg	(27.0-32.0)
Platelet Count		330	x10^9/l	(150-410)
Neutrophils		5.4	x10^9/l	(2.0-7.0)
Lymphocytes		2.8	x10^9/l	(1.1-5.0)
Monocytes		0.9	x10^9/l	(0.2-1.0)
Eosinophils	+	0.62	x10^9/l	(0.02-0.50)
Basophils		0.1	x10^9/l	(0.0-0.1)
Nucleated RBC		0.0	x10^9/l	

Report comments:

Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except Sick

End of Report

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NHS Confidential: Personal data about a patient

Social Security Scotland
Tèarainteachd Shòisealta

P12657008/000040 1R

Beith Surgery
Beith Surgery
5 Mains Road
Beith
KA15 2AF

18/12/2024

Adult Disability Payment: **Supporting information request**

You have received this request because someone applying for Adult Disability Payment has asked Social Security Scotland to contact you on their behalf.

We need you to confirm the applicants conditions, disability or needs. You do not need to include a diagnosis.

We would like you to provide this supporting information within 28 days of receiving it. The quicker you respond, the sooner we can provide disability assistance if the applicant is entitled to it.

W100N

If you cannot provide this information within 28 days, call us free on 0800 182 2222.

For guidance on how to provide this supporting information, go to 'How to complete a supporting information request' at the end of this form.

P12657008/000040/1/14

For the attention of:

Name:

Organisation:

The applicant has authorised us to approach you to provide supporting information for their case.

The applicant has also given permission for another person in your organisation to complete this request if they hold the information to do so.

Application details

Below are details of the applicant who has applied for Adult Disability Payment.

If you're unable to match these details with your records, call us free on 0800 182 2222. Our opening times are Monday to Friday, 8am to 6pm.

Dignity, fairness, respect.

Page 1

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Social Security Scotland
Tèarainteachd Shòisealta [redacted]

Applicant's first and last name:	Georgina Smith
Applicant's address:	
Applicant's postcode:	KA15 2AT
Applicant's date of birth:	4 December 1991
Applicant CHI number:	0412913127

Supporting information form

Please answer the following questions. Use the box below to tell us what you know.

Can you confirm all diagnosed conditions and prescribed medication and treatment?
Can you confirm that Georgina experiences difficulty with mobility?

PERSONALITY DISORDER
LEARNING DISABILITY
HISTORY OF ALCOHOL, [redacted] & EATING DISORDER -
ANXIETY WITH DEPRESSION - QUETIAPINE
CHRONIC BACK PAIN - AMITRIPTYLINE, ETODOLAC. REFERRED TO PHYSIO.
HEADACHES - PIZOTIFEN

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Dignity, fairness, respect.

NHS Confidential: Personal data about a patient

Social Security Scotland
Tèarainteachd Shòisealta [redacted]

If you are aware of potentially harmful information

You should tell us any information that might be harmful to the applicant and/or appointee. For example, a prognosis that the applicant has not been told about or test results that have not been discussed yet.

For Social Security Scotland to be able to withhold the information, a registered medical practitioner or a registered nurse would have to certify that the information would be likely to cause serious [redacted] to the health of the applicant.

Anything you write in this box will not be shared with the applicant, even if they ask for a copy of this form.

W100N

Your details

Fill in your details below if you're the professional completing this form.

P1265706S/000940/3/4

Your full name:	DR TRACY MCLAUGHLAN
Your job title:	GP
Name of GP practice:	MISTYLAW GP PRACTICE
GP practice address and practice code:	5 MAINS ROAD, BEITH 87432

Confirm and sign

By signing this form, you agree to the following statement:

☑ I declare that the information in this form is correct, complete and up to date, as far as I know and believe.

Dignity, fairness, respect.

Page 3

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Social Security Scotland
Tèarainteachd Shòisealta

Your full name:	DR. TRACY MCVAUGH
Date:	24. 12. 24

Thank you for taking the time to tell us what you know.

How to complete a supporting information request

What we need you to do

The applicant has identified you as a professional who can provide information to support their application for Adult Disability Payment.

We have used information the applicant gave us to decide which questions to ask you.

We need you to answer these questions with as much detail as you can. We do not expect you to answer questions outside of your area of expertise.

Please provide this supporting information within 28 days of receiving it.

If you cannot provide this information within 28 days, call us free on 0800 182 2222 as soon as possible. Our opening times are Monday to Friday, 8am to 6pm.

How your supporting information helps us

We use the supporting information you provide to:

- confirm what the applicant has told us in their application
- understand the impact their conditions or disability have on their daily life

We will review the supporting information you provide, together with any other supporting documents.

Once we have made a decision, we will contact the applicant to let them know.

If you cannot complete this form

If you are unable to provide this information, but there is someone else at your practice who is involved in the care or support of the applicant, you can ask them to complete this form.

Harmful information

You should use the Harmful Information section to tell us any information about their health that the applicant is not aware of.

This protects the applicant from discovering information that could have a harmful effect. For example, a prognosis that the applicant has not been told about or test results that have not been discussed yet.

Dignity, fairness, respect.

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NHS Confidential: Personal data about a patient

Social Security Scotland
Tèarainteachd Shòisealta [redacted]

Withholding harmful information from the applicant will only be possible if a registered medical practitioner or a registered nurse certifies that the information would be likely to cause serious [redacted] to the health of the applicant.

Information governance

We have an information-sharing agreement with your organisation. This enables us to legally share information about applications to Social Security Scotland. You can find out more at socialsecurity.gov.scot.

We are looking for information to support an application for Adult Disability Payment. We have the applicant's authorisation to contact you about their application.

Contact us

If you have any questions or [redacted] about this supporting information request, call us free on 0800 182 2222. Our opening times are Monday to Friday, 8am to 6pm.

You and your data

To find out more about how Social Security Scotland uses your data you can either:

- go to mygov.scot/social-security-data
- call us free on 0800 182 2222 and select the relevant benefit

W100N

P:1617068/068040/3/4

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Dignity, fairness, respect.

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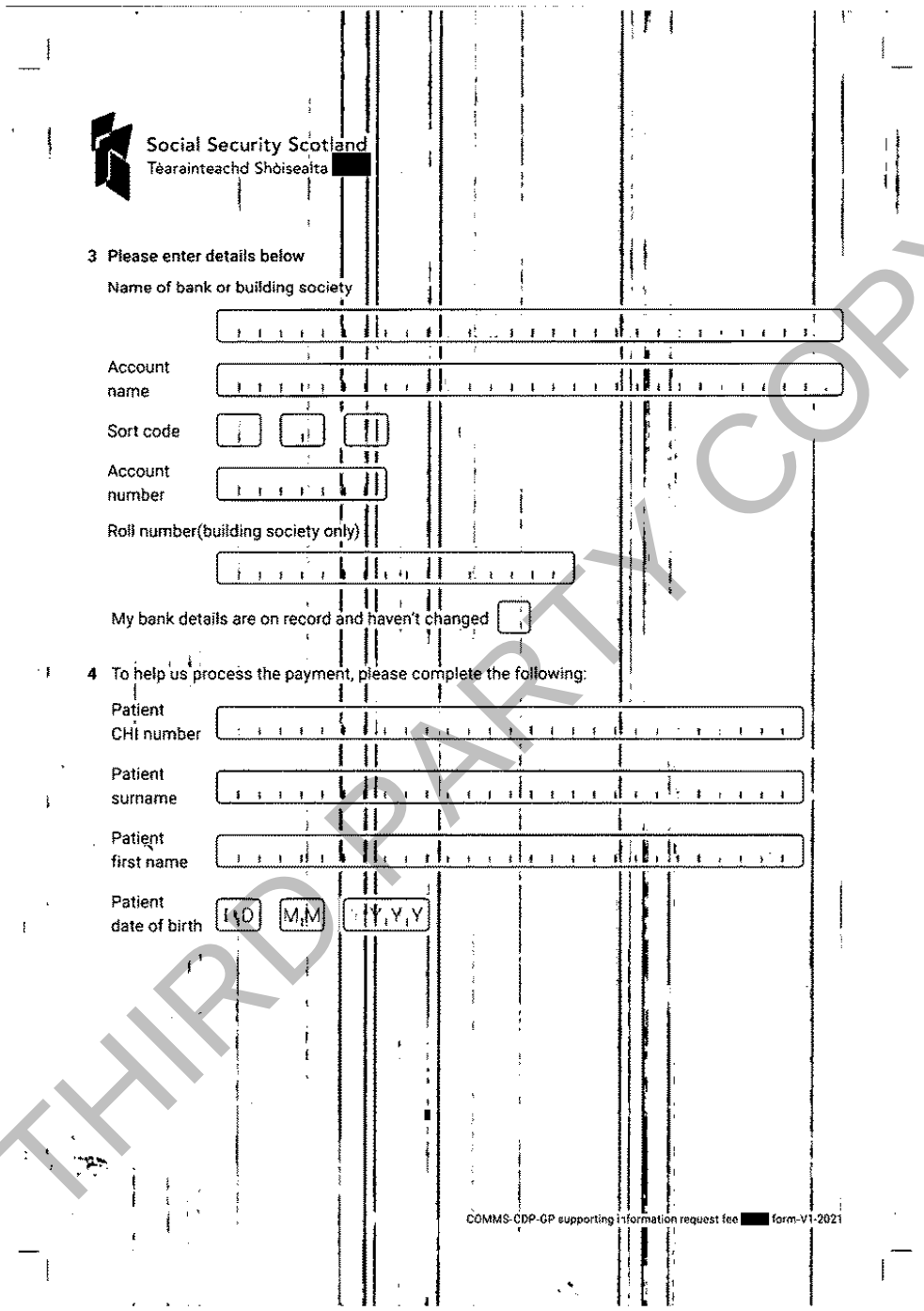

Social Security Scotland
Tèarainteachd Shòisealta

3 Please enter details below

Name of bank or building society

Account name

Sort code

Account number

Roll number(building society only)

My bank details are on record and haven't changed

4 To help us process the payment, please complete the following:

Patient CHI number

Patient surname

Patient first name

Patient date of birth D D M M Y Y Y Y

COMMS-CDP-GP supporting information request fee [redacted] form-V1-2021

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NHS Confidential [redacted]

Social Security Scotland
Tèarainteachd Shòisealta [redacted]

Payment Form

Registered medical professional supporting information request fee claim form

Registered medical professional supporting information request payment section:

Eligibility to claim a fee for completing the registered medical professional supporting information request and the fee amount can be found at the Social Security Scotland website under 'Registered medical professional guidance for supporting information requests'. If you are eligible to [redacted] the fee, please complete the information below and return this form for payment in the pre-paid envelope provided.

Confirm that you have checked and are eligible to claim the fee ☐

1 Registered medical professional practice or organisation or name

Address

Town/City

Postcode

Country

Email address

2 Are you registered for VAT Yes ☐ No ☐

VAT reference number

Fee amount

W1D0N

P1265708/000040/4/4

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NHS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report

Patient Details

Surname	SMITH
Forename	GEORGINA
CHI	0412913127
Date of birth	04.12.1991
Sex	Female
Address	6 Mains Avenue BEITH [redacted] AYRSHIRE KA15 2AT

Specimen Details

Specimen Number	B.25.7111917.Z
Specimen Type	Blood
Date/Time Collected	04.02.25 / 09:32
Date/Time Received	04.02.25 / 12:07
Requested By	Dr Dimitar Nechev
GP Practice	87432
Date/Time Reported	04.02.25 / 13:37
Details	3/12 for 1 year

Results

Thyroid funct test - Authorised on 04.02.25 at 13:33

TSH	1.20	mU/L	(0.35-5.00)
Free T4	12.3	pmol/L	(9.0-21.0)
Total T3		nmol/L	

End of Report

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NHS Confidential- Personal data about a patient

Blood Sciences Biochemistry Report

Patient Details

Surname	SMITH
Forename	GEORGINA
CHI	0412913127
Date of birth	04.12.1991
Sex	Female
Address	6 Mains Avenue BEITH [redacted] AYRSHIRE KA15 2AT

Specimen Details

Specimen Number	B.25.7111917.Z
Specimen Type	Blood
Date/Time Collected	04.02.25 / 09:32
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Details	3/12 for 1 year

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Thyroid funct test - Authorised on 04.02.25 at 13:33

TSH	1.20	mU/L	(0.35-5.00)
Free T4	12.3	pmol/L	(9.0-21.0)
Total T3		nmol/L	

End of Report

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NHS Confidential: Personal data about a patient

University Hospital Crosshouse **Kilmarnock Road** **Kilmarnock** **KA2 0BE** **Phone: 01563 521133**	**Immediate Discharge Letter** **&** **Prescription**

To:	**Re:**
Mistylaw Medical Practice 31 Main Road Lochwinnoch PA12 4AH	GEORGINA SMITH 6 MAINS AVENUE , , BEITH , AYRSHIRE , KA15 2AT DOB: 04/12/1991 Hosp. No.: 0412913127 CHI No.: 0412913127

Date of Admission: 26/03/2025
Mode of Admission: Emergency
Admission Reason: Sudden onset headache
Discharge Date: 27/03/2025

Ward: XCAU INPATIENT
Consultant: DR [redacted] (General Medicine)
Follow Up:

Diagnoses Headache
( )

Investigations CT Head: No intracranial haemorrhage or focal mass lesion. Preserved grey-white matter differentiation and CSF spaces. Patent paranasal and mastoid air spaces. No acute bone lesion.
LP: No RBCs, 1x WBC, -ve for xanthochromia, 0.25 protein, 2.9 glucose
DR LOUISA MCGOVERN (2025-03-27 17:03:02)

Clinical Progress Dear doctor,
This 33 year old lady was admitted to XH on 26/03/25 with new onset of thunderclap headache after orgasm 4 days ago. Associated visual blurring at time and nausea. Headache subsided then recurred when putting curtain pole up and then recurred evening prior to admission after orgasm. Reported mild reduced sesnation to left side. No neck stiffness. CT Head showed no acute intracranial pathology. LP was carried out as IP which was -ve for xanthochromia (see results in investigations tab). She is now medically fit for discharge with WSG.
Many thanks for your continued care,
CAU XH
DR LOUISA MCGOVERN (2025-03-27 17:03:02)

Results Awaited A/w CSF culture
DR [redacted] MCGOVERN (2025-03-27 17:04:02)

Pharmacy No meds required
Many thanks
DR LOUISA MCGOVERN (2025-03-27 15:31:21)

Discharged by: DR [redacted]

Page: 1 of 3
Report generated on: 27/03/2025 20:00

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NHS Confidential: Personal data about a patient

University Hospital Crosshouse **Kilmarnock Road** **Kilmarnock** **KA2 0BE** **Phone: 01563 521133**	**Immediate Discharge Letter** **&** **Prescription**

To: Mistylaw Medical Practice 31 Main Road Lochwinnoch PA12 4AH	**Re:** GEORGINA SMITH 6 MAINS AVENUE , , BEITH , AYRSHIRE , KA15 2AT DOB: 04/12/1991 Hosp. No.: 0412913127 CHI No.: 0412913127

Allergy/Intolerance	Reaction
***No Known Drug Allergies	

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

Drug	Route	Dose/Frequency	Note	GP to continu	POD	Days Supply
AMITRIPTYLINE 50 mg Tablets	Oral	**50 mg ONCE daily at 10pm**		Yes	Y	
BISACODYL 5 mg Enteric Coated Tablets	Oral	**10 mg ONCE daily at 10pm**		Yes	Y	
ETODOLAC 600 mg Modified Release Tablets	Oral	**600 mg ONCE daily at 7am**		Yes	Y	
FAMOTIDINE 40 mg Tablets	Oral	**40 mg ONCE daily at 7am**		Yes	Y	
FEXOFENADINE 120 mg Tablets	Oral	**120 mg ONCE daily at 7am**		Yes	Y	
LUFORBEC 100/6 Metered Dose Inhalation	Inhalation	**1 Puff(s) TWICE daily at 7am and 7pm**		Yes	Y	
LUFORBEC 100/6 Metered Dose Inhalation	Inhalation	**1 Puff(s) when required (PRN) relief of asthma**		Yes	Y	

Discharged by: DR [redacted] MCGOVERN

Page: 2 of 3
Report generated on: 27/03/2025 20:00

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NHS Confidential: Personal data about a patient

University Hospital Crosshouse Kilmarnock Road Kilmarnock KA2 0BE Phone: 01563 521133	Immediate Discharge Letter & Prescription

To:	Re:
Mistylaw Medical Practice 31 Main Road Lochwinnoch PA12 4AH	GEORGINA SMITH 6 MAINS AVENUE , , BEITH , AYRSHIRE , KA15 2AT DOB: 04/12/1991 Hosp. No.: 0412913127 CHI No.: 0412913127

Drug	Route	Dose/Frequency	Note	GP to contin	POD	Days Supply
		symptoms max 8 puffs per day				
MONTELUKAST 10 mg Tablets	Oral	10 mg ONCE daily at 6pm		Yes	Y	
PIZOTIFEN 1.5 mg Tablets	Oral	1.5 mg ONCE daily at 10pm		Yes	Y	
QUETIAPINE 25 mg Tablets	Oral	25 mg ONCE daily at 10pm		Yes	Y	
QUETIAPINE 150 mg Tablets	Oral	150 mg ONCE daily at 10pm		Yes	Y	

Additional Medicines Information:

Medicines discontinued or modified during admission
(Medicines that patient was recorded as admitted on only)

Drug	Discontinued / Modified reason
LUFORBEC 100/6 Metered Dose Inhalation	Dose changed

**** Warning - accuracy of information in this section is dependent on details entered by users of the HEPMA system.****
*****Information here may be incomplete and is for guidance only.*****

Discharged by: DR [redacted]

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NHS Confidential: Personal data about a patient

University Hospital Crosshouse **Kilmarnock Road** **Kilmarnock** **KA2 0BE** **Phone: 01563 521133**	**Immediate Discharge Letter** **&** **Prescription**

To: Mistylaw Medical Practice 31 Main Road Lochwinnoch PA12 4AH	**Re:** GEORGINA SMITH 6 MAINS AVENUE , , BEITH , AYRSHIRE , KA15 2AT DOB: 04/12/1991 Hosp. No.: 0412913127 CHI No.: 0412913127

Date of Admission: 26/03/2025
Mode of Admission: Emergency
Admission Reason: Sudden onset headache
Discharge Date: 27/03/2025

Ward: XCAU INPATIENT
Consultant: DR [redacted] (General Medicine)
Follow Up:

Diagnoses
Headache
( )

Investigations
CT Head: No intracranial haemorrhage or focal mass lesion. Preserved grey-white matter differentiation and CSF spaces. Patent paranasal and mastoid air spaces. No acute bone lesion.
LP: No RBCs, 1x WBC, -ve for xanthochromia, 0.25 protein, 2.9 glucose
DR LOUISA MCGOVERN (2025-03-27 17:03:02)

Clinical Progress
Dear doctor,
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Many thanks for your continued care,
CAU XH
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Results Awaited
A/w CSF culture
DR [redacted] MCGOVERN (2025-03-27 17:04:02)

Pharmacy
No meds required
Many thanks
DR LOUISA MCGOVERN (2025-03-27 15:31:21)

Discharged by: DR [redacted]

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University Hospital Crosshouse **Kilmarnock Road** **Kilmarnock** **KA2 0BE** **Phone: 01563 521133**	**Immediate Discharge Letter** **&** **Prescription**

To: Mistylaw Medical Practice 31 Main Road Lochwinnoch PA12 4AH	**Re:** GEORGINA SMITH 6 MAINS AVENUE , , BEITH , AYRSHIRE , KA15 2AT DOB: 04/12/1991 Hosp. No.: 0412913127 CHI No.: 0412913127

Allergy/Intolerance	Reaction
***No Known Drug Allergies	

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BISACODYL 5 mg Enteric Coated Tablets	Oral	**10 mg ONCE daily at 10pm**		Yes	Y	
ETODOLAC 600 mg Modified Release Tablets	Oral	**600 mg ONCE daily at 7am**		Yes	Y	
FAMOTIDINE 40 mg Tablets	Oral	**40 mg ONCE daily at 7am**		Yes	Y	
FEXOFENADINE 120 mg Tablets	Oral	**120 mg ONCE daily at 7am**		Yes	Y	
LUFORBEC 100/6 Metered Dose Inhalation	Inhalation	**1 Puff(s) TWICE daily at 7am and 7pm**		Yes	Y	
LUFORBEC 100/6 Metered Dose Inhalation	Inhalation	**1 Puff(s) when required (PRN) relief of asthma**		Yes	Y	

Discharged by: DR [redacted] MCGOVERN

Page: 2 of 3
Report generated on: 27/03/2025 20:00

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University Hospital Crosshouse Kilmarnock Road Kilmarnock KA2 0BE Phone: 01563 521133	Immediate Discharge Letter & Prescription

To:	Re:
Mistylaw Medical Practice 31 Main Road Lochwinnoch PA12 4AH	GEORGINA SMITH 6 MAINS AVENUE , , BEITH , AYRSHIRE , KA15 2AT DOB: 04/12/1991 Hosp. No.: 0412913127 CHI No.: 0412913127

Drug	Route	Dose/Frequency	Note	GP to continue	POD	Days Supply
		symptoms max 8 puffs per day				
MONTELUKAST 10 mg Tablets	Oral	10 mg ONCE daily at 6pm		Yes	Y	
PIZOTIFEN 1.5 mg Tablets	Oral	1.5 mg ONCE daily at 10pm		Yes	Y	
QUETIAPINE 25 mg Tablets	Oral	25 mg ONCE daily at 10pm		Yes	Y	
QUETIAPINE 150 mg Tablets	Oral	150 mg ONCE daily at 10pm		Yes	Y	

Additional Medicines Information:

Medicines discontinued or modified during admission
(Medicines that patient was recorded as admitted on only)

Drug	Discontinued / Modified reason
LUFORBEC 100/6 Metered Dose Inhalation	Dose changed

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*****Information here may be incomplete and is for guidance only.*****

Discharged by: DR [redacted]

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NHS Confidential: Personal data about a patient

NHS Lanarkshire Primary Care Operating Division OOH Call Incident Report

Call number:	**17115**	Receive Date:	**4-May-202515:39**
Patient's Name:	**GeorginaSmith**		
Date of birth:	**4-Dec-1991 (33 years)**	Gender:	**F**
Address:	**6 Mains Avenue Beith KA15 2AT**	Current Address:	**42 Glen [redacted] East Kilbride Glasgow G74 3UU**
Return Contact No:			
Tel No:	**07831 361242**		**07831 361242**
Mobile No:			
Priority:	**within 2 hours**	Call Origin:	
Received:	**4-May-202515:39**	Calltype:	**Attend OOH Appointment**
Advised:	**:**	Arrived PCC:	**4-May-202516:26**
Cons start:	**4-May-202516:45**	Cons End:	**4-May-202517:11**
Consulting Doctor:	**Catriona Doran**	Own doctor:	**[redacted] Feeney**

Reported Condition:

Symptoms: This case was generated from 17020. Initial Symptoms: History: TC with Georgina and her [redacted] From Beith but staying with [redacted] in EK. 3/7 hx of blisters on her lip - multiple small blisters. Progressing over time - more blisters, lip swollen, progressing inside mouth. Feels unwell, hot and cold. Today feels face is swelling up and has pain behind ear and in jaw. Similar issue in 2019 but was in prison at the time and feels not properly investigated. Had coldsores as a [redacted] but not recently. No hx genital herpes in herself or [redacted] Recent admission to Hospital in Ayrshire with headache - had CT and LP, all normal. PMH - Asthma, OCD, Chronic Back Pain Examination: Diagnosis: Treatment: Agree to appt in PCC for examination. [redacted] will drive here. Any airway involvement / other deterioration meantime - re-contact / 999. Case Summary: Questions: Would you like to start this consultation?: Yes --- BLISTERS ON LIPS. 3 DAYS. --- Clinical summary created by: Scott Macmillan (Call Taker Si) () [04/05/2025 14:58:23] Reason for call: BLISTERS ON LIPS. 3 DAYS. 04:05:2025 13:32:32 MACMILLANS.. LIPS SWOLLEN. BLISTERS STARTING TO GO INSIDE OF MOUTH. PT STATES "FEEL CHEEKBONE IS SWOLLEN AND SORE AND JAWLINE BEHIND EARS IS SORE." HEADACHE. H/O SIMILAR SYMPTOMS BEFORE AND PT WENT IN AND OUT OF CONSCIOUSNESS... THROAT SORE... 04:05:2025 13:55:42 MCCREEA.. FEELING GENERALLY UNWELL. CLUSTER OF BLISTERS ON RIGHT SIDE TOP LIP SPREADING INSIDE MOUTH. TENDER AREA BEHIND RIGHT EAR. INFLAMMATION AND SWELLING ON RIGHT CHEEK. THROAT INFLAM[redacted] AND PAINFUL. GLANDS ON NECK FEEL SWOLLEN... PYREXIAL AND FEVERISH OVERNIGHT. MILD HEADACHE AT TOP OF HEAD TODAY, WORSE ON MOVING. RECENT ADMISSION WITH THUNDERCLAP HEADACHE. WHITE BLOOD COUNT LOW AT PRESENT AND BEING MONITORED. PCEC 4 HOURS... Outcome: PCEC within 4 Hrs ---

Consultation details:

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NHS Confidential: Personal data about a patient

History -	**PCC. With female [redacted] History noted.**
	Felt feverish last night: no thermometer. No swallowing difficulty, no rash or vomiting.
	Been taking paracetamol for the cold sores but still spreading
Examinatio n -	**NEWS-0. Anxious but looks well. Ears: NAD Throat - NAD, tiny cluster of blisters around RHS of upper lip extending under lip/side of cheek inside. No photophobia or neck stiffness.**
	A little tender over right maxillary sinus.
	Chest: vesicular breathing, no added sounds HS regular
Diagnosis -	**Herpes simplex (cold sore)**
Treatment -	**Script issued for Aciclovir 5/7**
	Advised Ibuprofen for sinus discomfort (doesn't affect her asthma)
	GP review if not improving next week please
Examinatio n Details -	**ASSESSMENT**
	Systolic BP mmHg 128
	Diastolic BP mmHg 74
	Temperature C 37.3
	Pulse bpm 90
	Oxygen saturation % 98.0
	ASTHMA ASSESSMENT CARE BUNDLE
	Rate of respiration 16

Prescriptions:
Aciclovir 200mg tablets Take ONE tablet FIVE times a day for five days dissolved in water 25.00

Followups:
Return To Gp Only If Condition Not Resolved

Clinical Codes:
A54.. Herpes Simplex

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NHS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report

Patient Details

Surname	SMITH
Forename	GEORGINA
CHI	0412913127
Date of birth	04.12.1991
Sex	Female
Address	6 Mains Avenue BEITH [redacted] AYRSHIRE KA15 2AT

Specimen Details

Specimen Number	B.25.7618254.H
Specimen Type	Blood
Date/Time Collected	17.06.25 / 08:39
Date/Time Received	17.06.25 / 12:02
Requested By	Dr Dimitar Nechev
GP Practice	87432
Date/Time Reported	17.06.25 / 13:12
Details	3/12 for 1 year

Results

Thyroid funct test - Authorised on 17.06.25 at 13:10

TSH	0.99	mU/L	(0.35-5.00)
Free T4	12.7	pmol/L	(9.0-21.0)
Total T3		nmol/L	

End of Report

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Pages:

NHS Confidential: Personal data about a patient

NHS Lanarkshire Primary Care Operating Division OOH Call Incident Report

Call number:	**17115**	Receive Date:	**4-May-202515:39**
Patient's Name:	**GeorginaSmith**		
Date of birth:	**4-Dec-1991 (33 years)**	Gender:	**F**
Address:	**6 Mains Avenue Beith KA15 2AT**	Current Address:	**42 Glen [redacted] East Kilbride Glasgow G74 3UU**
Return Contact No:			
Tel No:	**07831 361242**		**07831 361242**
Mobile No:			
Priority:	**within 2 hours**	Call Origin:	
Received:	**4-May-202515:39**	Calltype:	**Attend OOH Appointment**
Advised:	**:**	Arrived PCC:	**4-May-202516:26**
Cons start:	**4-May-202516:45**	Cons End:	**4-May-202517:11**
Consulting Doctor:	**Catriona Doran**	Own doctor:	**[redacted] Feeney**

Reported Condition:

Symptoms: This case was generated from 17020. Initial Symptoms: History: TC with Georgina and her [redacted] From Beith but staying with [redacted] in EK. 3/7 hx of blisters on her lip - multiple small blisters. Progressing over time - more blisters, lip swollen, progressing inside mouth. Feels unwell, hot and cold. Today feels face is swelling up and has pain behind ear and in jaw. Similar issue in 2019 but was in prison at the time and feels not properly investigated. Had coldsores as a [redacted] but not recently. No hx genital herpes in herself or [redacted] Recent admission to Hospital in Ayrshire with headache - had CT and LP, all normal. PMH - Asthma, OCD, Chronic Back Pain Examination: Diagnosis: Treatment: Agree to appt in PCC for examination, [redacted] will drive here. Any airway involvement / other deterioration meantime - re-contact / 999. Case Summary: Questions: Would you like to start this consultation?: Yes --- BLISTERS ON LIPS. 3 DAYS. --- Clinical summary created by: Scott Macmillan (Call Taker Si) () [04/05/2025 14:58:23] Reason for call: BLISTERS ON LIPS. 3 DAYS. 04:05:2025 13:32:32 MACMILLANS.. LIPS SWOLLEN. BLISTERS STARTING TO GO INSIDE OF MOUTH. PT STATES "FEEL CHEEKBONE IS SWOLLEN AND SORE AND JAWLINE BEHIND EARS IS SORE." HEADACHE. H/O SIMILAR SYMPTOMS BEFORE AND PT WENT IN AND OUT OF CONSCIOUSNESS... THROAT SORE... 04:05:2025 13:55:42 MCCREEA.. FEELING GENERALLY UNWELL. CLUSTER OF BLISTERS ON RIGHT SIDE TOP LIP SPREADING INSIDE MOUTH. TENDER AREA BEHIND RIGHT EAR. INFLAMMATION AND SWELLING ON RIGHT CHEEK. THROAT INFLAMM[redacted] AND PAINFUL. GLANDS ON NECK FEEL SWOLLEN... PYREXIAL AND FEVERISH OVERNIGHT. MILD HEADACHE AT TOP OF HEAD TODAY, WORSE ON MOVING. RECENT ADMISSION WITH THUNDERCLAP HEADACHE. WHITE BLOOD COUNT LOW AT PRESENT AND BEING MONITORED. PCEC 4 HOURS... Outcome: PCEC within 4 Hrs ---

Consultation details:

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History -	**PCC. With female [redacted] History noted.**
	Felt feverish last night: no thermometer. No swallowing difficulty, no rash or vomiting.
	Been taking paracetamol for the cold sores but still spreading
Examinatio n -	**NEWS-0. Anxious but looks well. Ears: NAD Throat - NAD, tiny cluster of blisters around RHS of upper lip extending under lip/side of cheek inside. No photophobia or neck stiffness.**
	A little tender over right maxillary sinus.
	Chest: vesicular breathing, no added sounds HS regular
Diagnosis -	**Herpes simplex (cold sore)**
Treatment -	**Script issued for Aciclovir 5/7**
	Advised Ibuprofen for sinus discomfort (doesn't affect her asthma)
	GP review if not improving next week please
Examinatio n Details -	**ASSESSMENT**
	Systolic BP mmHg 128
	Diastolic BP mmHg 74
	Temperature C 37.3
	Pulse bpm 90
	Oxygen saturation % 98.0
	ASTHMA ASSESSMENT CARE BUNDLE
	Rate of respiration 16

Prescriptions:
Aciclovir 200mg tablets Take ONE tablet FIVE times a day for five days dissolved in water 25.00

Followups:
Return To Gp Only If Condition Not Resolved

Clinical Codes:
A54.. Herpes Simplex

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Blood Sciences Biochemistry Report

Patient Details

Surname	SMITH
Forename	GEORGINA
CHI	0412913127
Date of birth	04.12.1991
Sex	Female
Address	6 Mains Avenue BEITH [redacted] AYRSHIRE KA15 2AT

Specimen Details

Specimen Number	B.25.7618254.H
Specimen Type	Blood
Date/Time Collected	17.06.25 / 08:39
Date/Time Received	17.06.25 / 12:02
Requested By	Dr Dimitar Nechev
GP Practice	87432
Date/Time Reported	17.06.25 / 13:12
Details	3/12 for 1 year

Results

Thyroid funct test - Authorised on 17.06.25 at 13:10

TSH	0.99	mU/L	(0.35-5.00)
Free T4	12.7	pmol/L	(9.0-21.0)
Total T3		nmol/L	

End of Report

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Outlook

OFFICIAL - SENSITIVE PERSONAL prescription request Pregabalin

From Everett Julyan (AA Adult Psychiatry - North) <Everett.Julyan@aapct.scot.nhs.uk>
Date Fri 22/08/2025 09:15
To gp87432clinical (Mistylaw Medical Practice) <ggc.gp87432clinical@nhs.scot>
Cc aa.Clinical_MentalHealth_ACMHSNorthAdmin_A&A <Clinical_MentalHealth_ACMHSNorthAdmin_A&A@aapct.scot.nhs.uk>

** OFFICIAL - SENSITIVE PERSONAL **

Dear GP colleagues

I reviewed **Georgina Smith 0412913127** at psychiatry clinic today, and would be grateful for the following:

1. Please add Pregabalin 50mg bd, increasing by 50mg bd at weekly intervals until 150mg bd is achieved, or Georgina asks you to stop increasing.

2. Pregabalin can increase to 175mg bd if Georgina requests this.

3. Once Pregabalin is established, please withdraw Quetiapine by 25mg every week until stopped.

Thank you - a letter will follow.

Dr T Everett Julyan
Consultant [redacted] NHS Ayrshire & [redacted]
Honorary Clinical Senior Lecturer, University of Glasgow
everett.julyan@aapct.scot.nhs.uk

North Ayrshire Community Mental Health Service
Three Towns Resource Centre
Nelson Road
Saltcoats
Ayrshire KA21 5RF
01294 470010

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North Ayrshire
Adult Community Mental Health Service

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Outlook

OFFICIAL - SENSITIVE PERSONAL prescription request Pregabalin

From Everett Julyan (AA Adult Psychiatry - North) <Everett.Julyan@aapct.scot.nhs.uk>
Date Fri 22/08/2025 09:15
To gp87432clinical (Mistylaw Medical Practice) <ggc.gp87432clinical@nhs.scot>
Cc aa.Clinical_MentalHealth_ACMHSNorthAdmin_A&A <Clinical_MentalHealth_ACMHSNorthAdmin_A&A@aapct.scot.nhs.uk>

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Thank you - a letter will follow.

Dr T Everett Julyan
Consultant [redacted] NHS Ayrshire & [redacted]
Honorary Clinical Senior Lecturer, University of Glasgow
everett.julyan@aapct.scot.nhs.uk

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+well Pharmacy

New Collection Service

Keep out of sight and reach of children

Mrs Georgina Smith
6 Mains Avenue, Beith, KA15 2AT

Patient Address Label

Well Beith - Main Street.
KA152AD, 01505 504 114

+well

D | C

Surgery: MISTYLAW.

Free Repeat Prescription Service Consent Form

I wish to nominate a member of the well team to:

Tick all that apply

- ☑ Collect my prescription from the GP Surgery
- ☑ Have my medication available to collect in the pharmacy
- ☑ Text me when my medication is ready to collect

I agree that Well will make arrangements for all my future prescriptions to be dispensed this way. This may include electronic transfer of my prescription, where the service is available.
**Subject to availability
If I wish to change this arrangement, I will inform Well.

Are you the patient or patient's representative providing these details:

☑ Patient ☐ Representative (by signing below you confirm that you are authorised to action on behalf of the patient and consent to the use of information as described in the form)

Signed: G. Smith

Date: 28/8/25.

+well

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+well Pharmacy

New Collection Service

Keep out of sight and reach of children

Mrs Georgina Smith
6 Mains Avenue, Beith, KA15 2AT

Patient Address Label

Well Beith - Main Street,
KA152AD, 01505 504 114

+well

D | C

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Free Repeat Prescription Service Consent Form

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Signed: G. Smith

Date: 28/8/25.

+well

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Registration Details

Personal details...		Address details...	
Date of birth	04/12/1991	Post Code	KA15 2AT
Sex	F	House Name Flat No	
Surname	Smith	No and Street	6 Mains Avenue
Previous Surname	McMillan	Village	
Forenames	Georgina	Town	BEITH
Calling Name	Georgina	County	
Title	Mrs		
Birth Surname			
Marital Status	Single		
Ethnic Origin	(White) S[redacted]		

HA/HB Details...		Contact details...	
Trading partner	Ayrshire & Arran	Home Tel No	
Registered GP	Dr Dimitar Nechev	Work Tel No	
Usual GP	Dr Dimitar Nechev	Mobile Tel No	07831 361 242
Residential Inst		E Mail Address	
Branch Surgery	Mistylaw Medical Practice Beith	Next of Kin - name	[redacted] Black
CHI Number	0412913127	Next of Kin - relationship	
NHS Number		Next of Kin - contact no	07587 740 063
Other Contact			
Other Contact Tel No.			
Consent contact via Text Message			
Consent to Contact via Email			

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	28/03/2025		

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		

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Problems

Active Problems		Authorised By	Code
15/10/2024	Obsessive-compulsive disorders	Dr [redacted]	E203
14/08/2024	Dyspepsia	Dr Nechev	J16y4
14/08/2024	Headache	Dr Nechev	1B1G
14/08/2024	Scalp psoriasis	Dr Nechev	M16y0
14/08/2024	Chronic pain Back pain. Sciatica. Carpal tunnel syndome	Dr Nechev	1M52
14/08/2024	Hay fever - poliens	Dr Nechev	H170-1
15/07/2024	Discharged - prison Incarcerated on 02/04/2014 for Culpable Homicide	Nurse Patrick	EMISNQDI13
03/11/2023	Thyroiditis To have rpt TFT's at 3 month intervals for next year.	Nurse Patrick	C05
06/03/2023	Learning disability and difficulties in concentration, communication,social skills, coordination, organisation	Nurse Patrick	EMISNQLES
19/03/2014	Personality disorder NOS	Nurse Patrick	E21z
Not Known	Gluten intolerance	Nurse Patrick	J690-8
Not Known	Lactose intolerance	Nurse Patrick	C3131
Not Known	[X]Eating disorders	Nurse Patrick	Eu50
Not Known	Anxiety with depression	Nurse Patrick	E2003
Not Known	Cystic breast	Nurse Patrick	K301-2
Not Known	Asthma unspecified	Nurse Patrick	H33z

Past Problems		Authorised By	Code
02/12/2024	**Cough**	Anp [redacted]	171
09/04/2014	**[X]Alcohol addiction** attended therapy while in prison	Nurse Patrick	Eu102-1
08/04/2014	**Drug addiction therapy** attended therapy while in prison	Nurse Patrick	8B23
Not Known	**Cholecystectomy NEC**	Nurse Patrick	7B102-1

Health Admin Problems		Authorised By	Code

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Investigations

Investigations		Authorised By	Code
17/06/2025	**(Non Coded Event - Thyroid funct test)** (Source: LAB) .		
25/03/2025	**(Non Coded Event - I Allergy IgE Ranges)** (Source: LAB) . INDIVIDUAL RESULT(S) TO FOLLOW WHEN TESTING COMPLETED.|Grade 0=<0.35 (negative)|Grade 1=0.35-0.70 (wk pos) Grade 2=0.70-3.50 (pos)|Grade 3=3.50-17.5 (pos) Grade 4=17.5-52.5 (strong pos)|Grade 5=52.5-100 (strong pos) Grade 6=>100 (strong pos)|Result must be interpreted in context of history.|Negative results do not exclude allergy.|Positive results may be found without clinical|reactions, especially in atopic individuals.|The sensitivity varies between allergens.|		
25/03/2025	**(Non Coded Event - I Total IgE)** (Source: LAB) . Amended age-[redacted] references ranges are in use from 11/10/2023|		
25/03/2025	**(Non Coded Event - I Dog (e5))** (Source: LAB) .		
25/03/2025	**(Non Coded Event - I Allergy IgE Ranges)** (Source: LAB) . INDIVIDUAL RESULT(S) TO FOLLOW WHEN TESTING COMPLETED.|Grade 0=<0.35 (negative)|Grade 1=0.35-0.70 (wk pos) Grade 2=0.70-3.50 (pos)|Grade 3=3.50-17.5 (pos) Grade 4=17.5-52.5 (strong pos)|Grade 5=52.5-100 (strong pos) Grade 6=>100 (strong pos)|Result must be interpreted in context of history.|Negative results do not exclude allergy.|Positive results may be found without clinical|reactions, especially in atopic individuals.|The sensitivity varies between allergens.|		
25/03/2025	**(Non Coded Event - I Total IgE)** (Source: LAB) . Amended age-related references ranges are in use from 11/10/2023|		
25/03/2025	**(Non Coded Event - I Allergy IgE Ranges)** (Source: LAB) . INDIVIDUAL RESULT(S) TO FOLLOW WHEN TESTING COMPLETED.|Grade 0=<0.35 (negative)|Grade 1=0.35-0.70 (wk pos) Grade 2=0.70-3.50 (pos)|Grade 3=3.50-17.5 (pos) Grade 4=17.5-52.5 (strong pos)|Grade 5=52.5-100 (strong pos) Grade 6=>100 (strong pos)|Result must be interpreted in context of history.|Negative results do not exclude allergy.|Positive results may be found without clinical|reactions, especially in atopic individuals.|The sensitivity varies between allergens.|		
25/03/2025	**(Non Coded Event - Full Blood Count)** (Source: LAB) .		
04/02/2025	**(Non Coded Event - Thyroid funct test)** (Source: LAB) .		
12/12/2024	**(Non Coded Event - C-reactive Protein)** (Source: LAB) .		
12/12/2024	**(Non Coded Event - Full Blood Count)** (Source: LAB) .		
12/12/2024	**(Non Coded Event - GFST)** (Source: LAB) .		
12/12/2024	**(Non Coded Event - Blood Film)** (Source: LAB) . Unremarkable blood film|		
22/10/2024	**(Non Coded Event - Thyroid funct test)** (Source: LAB) .		

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Values

Values			
Date	Last Entry	Normal Range Indicator	Normal Range
17/06/2025	Serum TSH level 0.99 mU/L	.|.....	0.35-5
17/06/2025	Serum free T4 level 12.7 pmol/L	...|.....	9-21
17/06/2025	Serum total T3 level		
26/03/2025	O/E - rate of respiration 12 /min	|.....	12-20
26/03/2025	O/E - pulse rate 80 beats/minute		
26/03/2025	O/E - BP reading		
26/03/2025	Blood pressure reading 120/70 mm Hg		
25/03/2025	RAST test See comment		
25/03/2025	IgE 3 kU/L		
25/03/2025	Dog dander RAST test < 0.35		
25/03/2025	Total white cell count 9.8 x10^9/l	. . . . .|	4-10
25/03/2025	Red blood cell (RBC) count 4.86 x10^12/l	.....|.....	3.8-5.8
25/03/2025	Haemoglobin estimation 141 g/l	. . .|.....	115-165
25/03/2025	Haematocrit 0.43 l/l	.....|....	0.37-0.47
25/03/2025	Mean corpuscular volume (MCV) 88.5 fl	. .|.....	83-101
25/03/2025	Mean corpusc. haemoglobin(MCH) 29 pg	. . .|.....	27-32
25/03/2025	Platelet count 330 x10^9/l	. . . .|...	150-410
25/03/2025	Neutrophil count 5.4 x10^9/l	.....|...	2-7
25/03/2025	Lymphocyte count 2.8 x10^9/l	. . |.....	1.1-5
25/03/2025	Monocyte count 0.9 x10^9/l	. . . . |.	0.2-1
25/03/2025	Eosinophil count 0.62 x10^9/l	..... |	0.02-0.5
25/03/2025	Basophil count 0.1 x10^9/l	. . . . .|	0-0.1
25/03/2025	Nucleated red blood cell count 0 x10^9/l		
12/12/2024	Serum C reactive protein level 4 mg/L	. . |.....	0-10
12/12/2024	Glandular fever screening test Neg		
12/12/2024	Blood film microscopy Yes		
01/08/2024	Urine protein test negative		
01/08/2024	Urine glucose test negative		
01/08/2024	Urine blood test = negative		
01/08/2024	Ideal weight 63.38 Kg		
01/08/2024	Body Mass Index 26.85	. . . . |	20-25
01/08/2024	O/E - weight 74 Kg		
01/08/2024	O/E - height 166 cm	. . . |....	10-250
01/08/2024	Cigarette smoker 6 Cigarettes/day		

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Attachments

Attachments			Authorised By	Code
13/01/2025	**eMED3 (2018) new statement issued, not fit for work** FitNote.pdf, (Diagnosis: Mental Health Problems; Duration: 12/01/2025 - 11/04/2025)	FitNote_fb71c866-4312-461a-bec2-fb931a1bb937.pdf	Dr Savage	9D15
08/11/2024	**Hypothyroidism monitoring third letter**	Thyroid Recall letter .doc	Miss Murphy	9Oj2
04/10/2024	**Hypothyroidism monitoring second letter**	Thyroid Recall letter .doc	Miss Murphy	9Oj1
02/10/2024	**eMED3 (2018) new statement issued, not fit for work** FitNote.pdf, (Diagnosis: Mental health problems.; Duration: 01/10/2024 - 12/01/2025)	FitNote_883598ea-54fc-4201-ae3d-804a473f31ab.pdf	Dr Nechev	9D15
30/08/2024	**Hypothyroidism monitoring first letter**	Thyroid Recall letter .doc	Miss Murphy	9Oj0
31/07/2024	**eMED3 (2018) new statement issued, not fit for work** FitNote.pdf, (Diagnosis: Mental health problems. Chronic pain.; Duration: 22/07/2024 - 30/09/2024)	FitNote_ecdae97a-b499-4a4a-b9cf-41a5ec5e812f.pdf	Dr Nechev	9D15

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Due Diary Entries

Due Diary Entries		Authorised By	Code
03/12/2056	Influenza vaccination	Dr Nechev	65E..

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Overdue Diary Entires

Overdue Diary Entries		Authorised By	Code
31/07/2025	Medication review OVERDUE	Dr Nechev	8B31 4
12/08/2025	Patient "recall" admin. NOS OVERDUE Asthma	Ms McDonald	9O4Z.

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Alerts

Alerts	Authorised By	Code
None		

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Drug Allergies

Drug Allergies		Authorised By	Code
Not Known	Gluten intolerance	Nurse Patrick	J690.8
Not Known	Lactose intolerance	Nurse Patrick	C3131

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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
01/08/2024	FH: Asthma	Nurse Scobie	12D2
01/08/2024	FH: * - breast	Nurse Scobie	1243

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Referrals

Referrals		Authorised By	Code
16/10/2024	**8H49.: Psychiatric referral (SCI Gateway Referral)**	Dr Nechev	8H49
15/07/2024	**Discharged - prison** Incarcerated on 02/04/2014 for Culpable Homicide	Nurse Patrick	EMISNQDI13

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Immunisations

Immunisations	Authorised By	Code

None

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Health Status

Health Status	
01/08/2024	Height 166 cm
01/08/2024	Weight 74 Kg
01/08/2024	Body Mass Index 26.85 [redacted]
26/03/2025	Blood pressure reading O/E - BP reading
26/03/2025	Blood pressure reading 120/70 mm Hg
26/03/2025	Smoking Status Stopped smoking
01/08/2024	Exercise grading Takes inadequate exercise

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Miscellaneous

Other Observations		Authorised By	Code
10/10/2025	**Site of encounter NOS** Actioned in Pharmacotherapy Hub	Ms O'Neill	9N1Z
10/10/2025	**Telephone encounter**	Ms O'Neill	9N31
16/09/2025	**Site of encounter NOS** Actioned in Pharmacotherapy Hub	Ms O'Neill	9N1Z
16/09/2025	**Telephone encounter**	Ms O'Neill	9N31
16/09/2025	**Medication requested** Acute Rx issued	Ms O'Neill	8B3H
15/09/2025	**Unsuccessful attempt to contact patient by telephone**	Ms Calmey	9Nj0
11/09/2025	**Site of encounter NOS** Actioned in Pharmacotherapy Hub	Ms Lethom	9N1Z
11/09/2025	**Drugs not issued**	Ms Lethom	8B38
26/08/2025	**Site of encounter NOS** Actioned in Pharmacotherapy Hub	Ms McCartney	9N1Z
26/08/2025	**Telephone encounter**	Ms McCartney	9N31
26/08/2025	**New medication commenced** Pregabalin 50mg BD increasing by 50mg BD at weekly intervals until on 150mg BD is achieved or Georgina asks to stop increasing. Can be increased to a Maximum of Pregabalin 175mg BD. Once Pregabalin established withdraw Quetiapine every week until stopped.	[redacted]	8B3A3
26/08/2025	**Outpatient clinic letter received** Psych - 22/8/25.	Ms McCartney	9N3D2
17/06/2025	**Nursing care blood sample taken**	Phleb McSwegan	8C1B
16/06/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 08:40 on Tuesday 17 of June at Beith Surgery. To cancel please reply with the word CANCEL..		9N3G
10/06/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 08:40 on Tue, 17 of Jun at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
02/06/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 09:50 on Tuesday 03 of June at Beith Surgery. To cancel please reply with the word CANCEL..		9N3G
27/05/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 09:50 on Tue, 03 of Jun at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
26/05/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 11:15 on Tuesday 27 of May at Beith Surgery. To cancel please reply with the word CANCEL..		9N3G
20/05/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 11:15 on Tue, 27 of May at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
19/05/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 11:30 on Tuesday 20 of May at Beith Surgery. To cancel please reply with the word CANCEL..		9N3G
15/05/2025	**SMS text sent to patient** Blood Test		9N3G
13/05/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 11:30 on Tue, 20 of May at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
31/03/2025	**Site of encounter NOS** Actioned in Pharmacotherapy Hub	Ms O'Neill	9N1Z
31/03/2025	**Post hospital discharge med reconciliation with medical notes** UHC ED-26/03/25 - Headache	Ms O'Neill	8B3S1
26/03/2025	**Stopped smoking**	Dr Nechev	137K
26/03/2025	**Temperature symptoms**	Dr Nechev	165
25/03/2025	**Nursing care blood sample taken**	Phleb McSwegan	8C1B
24/03/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 09:30 on Tuesday 25 of [redacted] at Beith Surgery. To cancel please reply with the word CANCEL. If you have any symptoms of coronavirus please cancel and rearrange. Check in at Reception to ensure staff know you have arrived..		9N3G
18/03/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 09:30 on Tue, 25 of Mar at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
04/02/2025	**Nursing care blood sample taken**	Phleb McSwegan	8C1B
03/02/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 09:30 on Tuesday 04 of February at Beith Surgery. To cancel please reply with the word CANCEL. If you have any symptoms of coronavirus please cancel and rearrange. Check in at Reception to ensure staff know you have arrived..		9N3G
28/01/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 09:30 on Tue, 04 of Feb at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
23/01/2025	**SMS text sent to patient** Advisory text re emer. service due to weather warning for 24.1.25		9N3G
23/01/2025	**SMS text sent to patient** Blood Text Appt		9N3G
22/10/2024	**Nursing care blood sample taken**	Phleb [redacted]	8C1B

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21/10/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 09:40 on Tuesday 22 of October at Beith Surgery. To cancel please reply with the word CANCEL. If you have any symptoms of coronavirus please cancel and rearrange. Check in at Reception to ensure staff know you have arrived..		9N3G
15/10/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 09:40 on Tue, 22 of Oct at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
15/10/2024	**SMS text sent to patient** 2nd Thyroid Text Message		9N3G
14/10/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 10:20 on Tuesday 15 of October at Beith Surgery. To cancel please reply with the word CANCEL. If you have any symptoms of coronavirus please cancel and rearrange. Check in at Reception to ensure staff know you have arrived..		9N3G
08/10/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 10:20 on Tue, 15 of Oct at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
01/10/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 11:00 on Wednesday 02 of October at Beith Surgery. To cancel please reply with the word CANCEL. If you have any symptoms of coronavirus please cancel and rearrange. Check in at Reception to ensure staff know you have arrived..		9N3G
12/09/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 09:30 on Thu, 19 of Sep at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
12/09/2024	**SMS text received from patient** Type: Appointment Reminder Status: Reply Received Message: Cancel.		[redacted]
05/09/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 10:15 on Thu, 12 of Sep at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
05/09/2024	**SMS text received from patient** Type: Appointment Reminder Status: Reply Received Message: Cancel.		[redacted]
04/09/2024	**SMS text sent to patient** 1st Thyroid Text Message		9N3G
29/08/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 10:15 on Thu, 05 of Sep at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
26/08/2024	**Thyroid Result - set recall**	Nurse Patrick	PCS19008TH1
20/08/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 10:15 on Wednesday 21 of August at Beith Surgery. To cancel please reply with the word CANCEL. If you have any symptoms of coronavirus please cancel and rearrange. Check in at Reception to ensure staff know you have arrived..		9N3G
14/08/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 10:15 on Wed, 21 of Aug at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
13/08/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 11:30 on Wednesday 14 of August at Beith Surgery. To cancel please reply with the word CANCEL. If you have any symptoms of coronavirus please cancel and rearrange. Check in at Reception to ensure staff know you have arrived..		9N3G
07/08/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 11:30 on Wed, 14 of Aug at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
01/08/2024	**New patient health check** , smear up to date, has precription for DEPO injection, due 12/09 apt made. gets TFTS had been regular will ask GP when due. Georgina mentioned that she gets medicated shampoo and creams for her psoriasis not on her repeats, also asking if she can get something for axiety and panic attacks, pulse today 102. still getting pains in relation to this.	Nurse Scobie	6BR1
01/08/2024	**Health ed. - diet**	Nurse Scobie	6799
01/08/2024	**Teetotaller**	Nurse Scobie	1361
01/08/2024	**Takes inadequate exercise**	Nurse Scobie	13BO
31/07/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 10:15 on Thursday 01 of August at Beith Surgery. To cancel please reply with the word CANCEL. If you have any symptoms of coronavirus please cancel and rearrange. Check in at Reception to ensure staff know you have arrived..		9N3G
30/07/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 10:15 on Wednesday 31 of July at Beith Surgery. To cancel please reply with the word CANCEL. If you have any symptoms of coronavirus please cancel and rearrange. Check in at Reception to ensure staff know you have arrived..		9N3G
25/07/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 10:15 on Thu, 01 of Aug at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G

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	SMS text sent to patient Type: Appointment Reminder Status: Message		
24/07/2024	Delivered Message: This is confirmation of your appointment at 10:15 on Wed, 31 of Jul at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
19/07/2024	**Scottish - ethnic category 2001 census**	Miss Murphy	9i21

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Consultations

Consultations	
19/01/2026 15:24	Mrs G[redacted] McDonald at Data Entry
Comment	Below, current meds summary emailed.
19/01/2026 10:09	Dr Iain Savage at Mistylaw Medical Practice Lochwinnoch
Comment	Yes that's fine.
19/01/2026 09:24	Miss Lindsey Murphy at Mistylaw Medical Practice Lochwinnoch
Comment	Patient called to ask if we can email her a list of her current meds. In process of moving to East Kilbride and needs proof of meds. Email address is georginasmith962@gmail[redacted]
07/01/2026 17:05	Mrs G[redacted]nald at Data Entry
Comment	As below. I did explain to patient Pregabalin would be done, but repeats not due. She is checking what meds she has.
07/01/2026 16:50	Dr Dimitar Nechev at Mistylaw Medical Practice Lochwinnoch
History	Repeat meds are not due yet. She may wish to speak with the chemist and they can manage her repeat meds.
Medication	Pregabalin Capsules 150 mg *1*56 capsule ONE TO BE TAKEN TWICE A DAY (TDD 175MG)*
	Pregabalin Capsules 25 mg *1*56 capsule ONE TO BE TAKEN TWICE[redacted] 175MG BD)*
07/01/2026 15:42	Mrs[redacted] McDonald at Special Request
Comment	Patient said she cannot email for scripts because dyslexic. She asked for everything, but not all due. Needs Pregabalin scripts please.
09/12/2025 11:16	Dr Tracy McLaughlin at Special Request
Medication	Pregabalin Capsules 150 mg *1*56 capsule ONE TO BE TAKEN TWICE A DAY (TDD 175MG)*
	Pregabalin Capsules 25 mg *1*56 capsule ONE TO BE TAKEN TWICE[redacted] (TDD 175MG BD)*
09/12/2025 09:37	Miss Lindsey Murphy at Special Request
Comment	Patient requesting Pregabalin 150mg and 25mg.
04/11/2025 09:59	Dr Tra[redacted] McLaughlin at Special Request
Medication	Pregabalin Capsules 150 mg *1*56 capsule ONE TO BE TAKEN TWICE A DAY (TDD 175MG)*
04/11/2025 09:44	Miss Lindsey Murphy at Mistylaw Medical Practice Lochwinnoch
Comment	Patient requesting Pregabalin.
10/10/2025 09:03	Ms Natasha[redacted] at Mistylaw Medical Practice Lochwinnoch
Comment	TC with pt - see entry 18/09. Managing new dose well - as discussed will switch 50mg caps to 150mg caps. Pregab issued 06/10 - pt advised to use supply just collected and on next issue will be amended preperation.
Additional	Telephone encounter
	Site of encounter NOS Actioned in Pharmacotherapy Hub
06/10/2025 08:21	Dr Iain[redacted] at Mistylaw Medical Practice Lochwinnoch
Medication	Pregabalin Capsules 25 mg *1*56 capsule ONE TO BE TAKEN TWICE[redacted] (TDD 175MG BD)*
02/10/2025 14:18	Mrs Grace McDonald at Special Request
Comment	Lady asking for another Pregabalin script please.
18/09/2025 10:13	Miss Lindsey Murphy at Mistylaw Medical Practice Lochwinnoch
Comment	See below - script printed.
Medication	Pregabalin Capsules 25 mg *1*56 capsule ONE TO BE TAKEN TWICE[redacted] (TDD 175MG BD)*
18/09/2025 09:41	Ms Natasha O'Neill at Mistylaw Medical Practice Lochwinnoch

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Comment	TC with pt - is on 150mg BD and quetiapine 25mg OD, states due to stop quetiapine friday, asking to go to 175mg BD as per email. Issued 25mg capsules as below to allow this - advised will phone in 4 weeks time to make sure dose tolerated and if so amend prep and quantity Added to hub column 10/10 for callback
Medication	Pregabalin Capsules 25 mg *1*56 capsule ONE TO BE TAKEN TWICE [redacted] (TDD 175MG BD)*
Additional	Medication requested Acute Rx issued Telephone encounter Site of encounter NOS Actioned in Pharmacotherapy Hub

16/09/2025 09:41 — Miss Lindsey Murphy at Mistylaw Medical Practice Lochwinnoch

Comment: FAO HUB - patient returned your call re below. Can she be called again please?

15/09/2025 14:25 — Ms Tamara Cairney at Mistylaw Medical Practice Lochwinnoch

Comment	Referral from hub to check in regarding pregabalin quetiapine cross-taper per Docman 22/08/2025 - unsuccessful unplanned call to Georgina today - rang out, nil VM facility. Can appoint for discussion on cross taper and ongoing doses per psych instruction at next Rx request.
Additional	Unsuccessful attempt to contact patient by telephone

12/09/2025 15:30 — Miss Lindsey Murphy at Mistylaw Medical Practice Lochwinnoch

Comment: INFO: We were checking TFT 3 monthly for 1 year as per Dr Nechev. Checks now done. TFT normal. No need to continue monitoring.

11/09/2025 14:18 — Ms Frances Lethem at Mistylaw Medical Practice Lochwinnoch

Comment	Task from PST SMcA - " PSW- Pls add to PSP column for PSP duty review. Diary not set up. SM. " Added to Practice Pharmacist Diary for Monday 15th Sept.
Additional	Drugs not issued Site of encounter NOS Actioned in Pharmacotherapy Hub

27/08/2025 14:48 — Miss Lindsey [redacted] at Mistylaw Medical Practice Lochwinnoch

Comment	See below - scripts printed.
Medication	Quetiapine Fumarate Tablets 25 mg *70 TABLET REDUCE BY 25MG EACH WEEK UNTIL STOPPED.* Pregabalin Capsules 50 mg *126 capsule TAKE ONE TWICE [redacted] INCREASED BY 50MG (ONE CAPSULE) TWICE [redacted] UNTIL 150MG TWICE [redacted] IS ACHIEVED.*

26/08/2025 13:59 — Ms Shona McCartney at Mistylaw Medical Practice Lochwinnoch

Comment	Quetiapine is to be reduced by 25mg once pregabalin is established until stopped. Added for PSP on 15/9/25 to review Pregabalin titration and down titration of quetiapine. TC with patient who confirmed to start reducing Quetiapine by 25mg when starting on Pregabalin medication. Patient agreed for Quetiapine 25mg tablets only to be issued for down titration to make it easier. Patient advised to contact GP/111 if experiencing any symptoms with down titration and advised patient not to stop any medication abruptly. Patient consented on pharmacist review on 15/9/25 to review titration process and symtoms.
Medication	Pregabalin Capsules 50 mg *126 capsule TAKE ONE TWICE [redacted] INCREASED BY 50MG (ONE CAPSULE) TWICE DAILY UNTIL 150MG TWICE DAILY IS ACHIEVED.* Quetiapine Fumarate Tablets 25 mg *70 TABLET REDUCE BY 25MG EACH WEEK UNTIL STOPPED.*
Additional	Outpatient clinic letter received Psych - 22/8/25. New medication commenced Pregabalin 50mg BD increasing by 50mg BD at weekly intervals until on 150mg BD is achieved or Georgina asks to stop increasing. Can be increased to a Maximum of Pregabalin 175mg BD. Once Pregabalin established withdraw Quetiapine every week until stopped. Telephone encounter Site of encounter NOS Actioned in Pharmacotherapy Hub

08/08/2025 15:35 — Dr Dimitar Nechev at Mistylaw Medical Practice Lochwinnoch

History: Last 2-3 days has been having pain at right side of umbilicus and at back. Only when walks or laughs. No abdominal lumps, no fever, no N+V. ?Muscular in nature. Should settle on it's own. Review if worsening of pain or if develops other symptoms with it.

08/08/2025 08:49 — Miss Lindsey [redacted] at Mistylaw Medical Practice Lochwinnoch

Comment: Please call patient on mobile number. Asked for tel appt. Belly button pain and back pain.

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16/07/2025 15:23	Dr Dimitar Nechev at Telephone Consultation
History	Unwell for 3 days. Dizzy when standing- light headed and legs would give way. Dizziness settles quickly. No vertigo. Sore muscles. Was sick once and has egg taste at the back of mouth. No fever, no respiratory symptoms, no rash. No urinary symptoms. Has constipation had blood PR. Could be start of viral illness. Rest, fluids. If not better by next week would need seen.
16/07/2025 08:09	Miss Orla McAuley at Mistylaw Medical Practice Lochwinnoch
Comment	Has been having dizzy spells and feeling tired a lot.
17/06/2025 08:37	Phleb [redacted] McSwegan at Mistylaw Medical Practice Lochwinnoch
Comment	Nursing care blood sample taken
Test Request	Thyroid function tests - *Completed*
09/06/2025 11:27	Miss Lindsey [redacted] Mistylaw Medical Practice Lochwinnoch
Comment	INFO: Sick line dated 13.01.25 removed from reception as patient has never collected.
20/05/2025 11:34	Dr Tracy McLaughlin at Mistylaw Medical Practice Beith
History	1. Problems recently with headaches for which she had to be reviewed at accident and emergency and have a CT head. She has now stopped monteulask and headaches have stopped. She believes these were the cause and is keen to remain off. I have removed from her medication list. She is managing her asthma will at the moment and I have advised that if she notices a deterioration to seek further medical review. 2. Advises that she usually gets a [redacted] of her chest and pelvic area for recurrent cysts. Review of the record shows a pelvic ultrasound from 2018 which showed no cysts. Additionally she has a history of breast cysts and was seen at breast clinic. She is unclear if she has had any new lumps within the breast. 3. Says has OCD syptoms-causing arguments with [redacted]. Checking behaviours-annoying her. She will often check light switches, door locks and whether she has her debit card several times. She cleans obsessively additionally. She has been referred to Psychiatry but at this stage would like to consider medication.
Examination	Chaperone offered and declined. Bilateral normal breasts with no evidence of lumps. Abdomen is soft and non-tender with no pelvic masses.
Comment	Commence Fluoxetine. Discuss potential side effects on length of time to work. Review as needed.
Medication	Fluoxetine Hydrochloride Capsules 20 mg *28 capsule ONE TO BE TAKEN EACH DAY*
16/05/2025 16:11	Miss Lindsey [redacted]y at Mistylaw Medical Practice Lochwinnoch
Comment	TEXT SENT - due bloods. 3/12 for 1 year as per Dr Nechev.
Test Request	Thyroid function tests - *Requested*
30/04/2025 09:57	Ms Cheryl McCulloch at Mistylaw Medical Practice Lochwinnoch
Comment	To discuss headaches.
[redacted] 17:36	Dr Dimitar Nechev at Mistylaw Medical Practice Lochwinnoch
History	[redacted] is this the correct patient please.
02/04/2025 16:17	Mrs Grace McDonald at Special Request
Comment	Error - [redacted] patient as above. Sorted.
31/03/2025 10:44	Miss Lindsey Murphy at Special Request
Comment	Patient requesting brown inhaler and Depo injection. Asked for last week but not done.
31/03/2025 09:46	Ms[redacted] O'Neill at Mistylaw Medical Practice Lochwinnoch
Comment	Sudden onset headache. No medication changes - seen by GP as below. No pharmacy action required
Additional	Post hospital discharge med reconciliation with medical notes UHC ED-26/03/25 - Headache Site of encounter NOS Actioned in Pharmacotherapy Hub
28/03/2025 15:25	Dr [redacted] Gavin at Mistylaw Medical Practice Lochwinnoch

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History	TC with patient. D/C yesterday following admission with thunderclap headache- CT/LP excluded SAH. CSF culture awaited. Under impression was to be referred for MRI if ongoing - nil on d/c letter to suggest this but agree if recurrent problem/ongoing then seeing headache specialist for further advice re ix/mx would be warranted. Had no expectations from call, just wanted to update us. I initiated discussion re pain relief- generally simple pain killers such as paracetamol and ibuprofen are recommended, rather than codeine/stronger as they can profong / cause more chronic headaches. Suggest ensure plenty rest and sleep and hydrate well with water- recommend 2l. Advised if any sudden worsening or increase in headache severity or associated unwell/fever- to represent as emergency via A&E. Pt seemed happy with advice given.
28/03/2025 08:43	Miss Lindsey Murphy at Mistylaw Medical Practice Lochwinnoch
Comment	Please call patient on mobile number. See below for background. Discharged from Crosshouse last night. CT scan ok. To discuss this and pain relief, Ibuprofen not helping. No tel appts left with Dr Nechev today, offered to get another GP to call, patient agreeable.
26/03/2025 11:55	Dr Dimitar Nechev at Mistylaw Medical Practice Lochwinnoch
Medication	Montelukast Sodium Tablets 10 mg *28 tablet ONE TO BE TAKEN IN THE EVENING* Luforbec Inhaler 100 micrograms + 6 micrograms/dose *120 dose ONE PUFF TO BE INHALED TWICE DAILY. ONE PUFF AS REWUIRED FOR RELIF OF SYMPTOMS. MAX 8 PUFFS IN 24 HOURS*
26/03/2025 11:19	Dr Dimitar Nechev at Telephone Consultation
History	Headache. Normally does not suffer from headache. Started 3 days ago. Very severe headache all over 10/10 like a vice on head. Settled. Then had same headache when putting curtains up. Yesterday headache started after orgasm again and is ongoing. Currently 5/10. Felt nauseated and vision was blurred when pain was severe. Not known FH of SAH/brain aneurysm .
Examination	O/E - BP reading Blood pressure reading 120/70 mm Hg O/E - pulse rate 80 beats/minute Temperature symptoms O/E - rate of respiration 12 /min PRELA 3mm, CN III-XII nonnal apart from some blurring of vision at lateral gaze but no diplopia.
Comment	We need to rule out SAH. Referred to medical team at XH. Many thanks.
Medication	Luforbec Inhaler 100 micrograms + 6 micrograms/dose *120 dose ONE PUFF TO BE INHALED TWICE DAILY. ONE PUFF AS REWUIRED FOR RELIF OF SYMPTOMS. MAX 8 PUFFS IN 24 HOURS*
History	Discussed oesinophilia. Tells me asthma under good control, uses ICS regularly. Stopped smoking and does not cough any more.
Social	Stopped smoking
26/03/2025 09:01	Dr Dimitar Nechev at Mistylaw Medical Practice Lochwinnoch
History	Called patient. Double booking. In my tel list and also f2f this morning.
26/03/2025 08:41	Ms [redacted] McDonald at Mistylaw Medical Practice Lochwinnoch
Comment	Severe headaches during sex and at climax, feels like a very instense shooting pain into the head. States yesterday was putting up curtains and experienced the same pain, phoned 111 and they advised GP appointment today
25/03/2025 10:02	Dr Tracy McLaughlin at Special Request
Medication	Montelukast Sodium Tablets 10 mg *28 tablet ONE TO BE TAKEN IN THE EVENING*
25/03/2025 09:26	Ms Cheryl McCulloch at Mistylaw Medical Practice Lochwinnoch
Comment	Request for inhalers and montelukast
25/03/2025 09:26	Phleb [redacted] McSwegan at Mistylaw Medical Practice Lochwinnoch
Comment	Nursing care blood sample taken
Test Request	Full Blood Count - *Completed*, IgE to Dog dander (e5) - *Completed*, IgE (total) - *Completed*
26/02/2025 15:09	Dr Dimitar Nechev at Telephone Consultation

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History	As bellow. Coughing fits as bellow worse at night, chest sometimes feels tight. Cold weather makes it worse. There is a god in the house. Takes Luforbec twice daily and would have rescue dose during attack, makes her shaky. Wonders why symptoms worse now. Wonders if needs CT chest. Discussed that symptoms are keeping with asthma and CT chest in unlikely to be informative. Eosinophilic on last FBC. Happy to Montelukast. Happy to suspend Etodolac in case it causes airway reactivity. I will call her for review in a month.
Medication	Montelukast Sodium Tablets 10 mg *28 tablet ONE TO BE TAKEN IN THE EVENING* Paracetamol Tablets 500 mg *200 tablet TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)*
Test Request	Full Blood [redacted] - *Requested*, IgE to Dog dander (e5) - *Requested*, IgE (total) - *Requested*

26/02/2025 08:43 Miss Orla McAuley at Mistylaw Medical Practice Lochwinnoch
Comment: Had cough for over 9 weeks. Been getting coughing fits morning and night

04/02/2025 09:31 Phleb Clare McSwegan at Mistylaw Medical Practice Lochwinnoch
Comment: Nursing care blood sample taken
Test Request: Thyroid function tests - *Completed*

17/01/2025 16:53 Miss Lindsey [redacted]y at Mistylaw Medical Practice Lochwinnoch
Comment: TEXT SENT - due bloods. 3 monthly for 1 year as per Dr Nechev.
Test Request: Thyroid function tests - *Requested*

13/01/2025 06:14 Dr Iain [redacted] at Mistylaw Medical Practice Lochwinnoch
Additional: eMED3 (2010) new statement issued. not fit for work FitNote.pdf, (Diagnosis: Mental Health Problems; Duration: 12/01/2025 - 11/04/2025)

06/01/2025 12:12 Miss Lindsey [redacted] at Mistylaw Medical Practice Lochwinnoch
Comment: See below - patient notified. Advises Jobcentre told her it runs out today.

06/01/2025 09:35 Dr Iain Savage at Mistylaw Medical Practice Lochwinnoch
History: Fit note doesn't run out til 12th Jan. Will put it on list for next week to do.

06/01/2025 09:15 Ms Cheryl McCulloch at Mistylaw Medical Practice Lochwinnoch
Comment: Requesting fitnote. Current fitnote ends today.

30/12/2024 12:49 Miss Lindsey [redacted]y at Mistylaw Medical Practice Lochwinnoch
Comment: See below - script printed.
Medication: Luforbec Inhaler 100 micrograms + 6 micrograms/dose *120 dose ONE PUFF TO BE INHALED TWICE A DAY. 1 PUFF AS REQUIRED FOR RELIEF OF SYMPTOMS. MAX 8 PUFFS IN 24 HOURS*

30/12/2024 12:27 Dr Dimitar Nechev at Telephone Consultation

History	Cough is not better with Clenil. Has been taking it twice daily and an extra dose when coughing. CXR normal. Has mild oesinophylia which would support asthma. Georgina does not feel it is asthma though. She wonders if it could be COPD. Discussed that asthma sometimes can present with cough only. Try combination inhaler. Review if few weeks.
Medication	Luforbec Inhaler 100 micrograms + 6 micrograms/dose *120 dose ONE PUFF TO BE INHALED TWICE A DAY. 1 PUFF AS REQUIRED FOR RELIEF OF SYMPTOMS. MAX 8 PUFFS IN 24 HOURS*

16/12/2024 17:21 Mrs Grace McDonald at Data Entry
Comment: Callback arranged 30/12/24 with Dr Nechev - to discuss recent blood results.

12/12/2024 11:25 Nurse [redacted] Scobie at Mistylaw Medical Practice Lochwinnoch
Test Request: CRP - *Completed*, Full Blood Count - *Completed*, Infectious Mononucleosis - *Completed*

12/12/2024 10:26 Dr Dimitar Nechev at Mistylaw Medical Practice Lochwinnoch

History	Cough for 5 weeks now. Mostly dry but would bring up some discoloured phlegm. No blood. Chest feels tight. Pain right posterior chest. Breathless even when walks slowly. No fever. Noted childhood history of asthma. Had inhalers in adult life.
Examination	Not in distress, temp normal, BP 120/70, pulse 80/min, Sat 95%, pulse 78/min. Normal throat and neck. No fingers clubbing. Clear lungs and heart sounds.
Comment	?Viral illness. ?asthma. Review with results.
Medication	Clenil Modulite Cfc-free inhaler 200 micrograms/actuation *200 DOSE ONE PUFF TO BE INHALED TWICE A DAY* Easychamber Spacer device *1 device TO BE USED AS DIRECTED*

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Test Request	CRP - *Requested*, Full Blood Count - *Requested*, Infectious Mononucleosis - *Requested*, XR Chest - *Completed*
12/12/2024 08:08	Ms Amy McDonald at Mistylaw Medical Practice Lochwinnoch
Comment	Cough for over 5 weeks, nothing OTC helping, chemist advised to see GP
02/12/2024 10:26	Anp Carolyn [redacted] Mistylaw Medical Practice Lochwinnoch
Problem (FIRST)	**Cough**
History	Cough for past 3 weeks, phlegm white/yellow or dry, no haemoptysis, some pain in right lower rib cage, feels as winds her, only occurred once, lasted 30 mins, SOBOE, no sweats, intermittant fever, not SOB or wheezy, appetite normal. Feels throat tight, not sore, not flu like. No ankle swelling or calf pain, denies GORD, worse in morning, not disturbing sleep.
Examination	O/E - BP reading Temp 36.6, Sats 97%, pulse 95, RR 12, Blood pressure reading 109/78 [redacted] Hg Chest ausultation normal breath sounds. Throat mildly red.
Comment	Likely resolving URTI, call bvack if worsens or concerned.
02/12/2024 09:37	Miss Lindsey [redacted]law Medical Practice Lochwinnoch
Comment	F2F appt - cough for over 3 weeks. Has tried various OTC things.
08/11/2024	Miss Lindsey [redacted]y at Externally Entered
Additional	Hypothyroidism monitoring third letter
22/10/2024 09:36	Phleb [redacted] at Mistylaw Medical Practice Lochwinnoch
Comment	Nursing care blood sample taken
Test Request	Thyroid function tests - *Completed*
15/10/2024 11:03	Dr [redacted] Medical Practice Lochwinnoch
Problem (FIRST)	**Obsessive-compulsive disorders**
History	see above. Came to update us. Still using bleach as before. Fumes irritate her. Hands look OK despite its use. Reassures me she showers twice a day and doesn't scrub herself clean. Uses normal shampoo. Feels her cleaning annoys others more but keen to give referral a go.
Comment	will get support worker to do her shopping and get eg a dettol spray. Will look at restarting exercise, gym, jogging to get her out of the house. Seems keen to try ideas. Referral psych done.
15/10/2024 10:19	Miss Lindsey [redacted]y at Mistylaw Medical Practice Lochwinnoch
Comment	Appt 22.10.24.
Test Request	Thyroid function tests - *Requested*
04/10/2024	Miss Lindsey [redacted]y at Externally Entered
Additional	Hypothyroidism monitoring second letter
02/10/2024 11:08	Dr Dimitar Nechev at Mistylaw Medical Practice Lochwinnoch
History	Her support worker asked her to make an appt. Compulsive cleaning. Has been like this since prison. Thinks it is to do with [redacted] abuse in the past. If spills a cup of tea won't just mop it, she would have to clear the whole house. Cleans the house daily. Goes through few bottles of bleach a week. Hoovers the sofa few times a day. She is the same with personal hygiene. Used to wash hair with washing powder, now uses body lotion. No other OCD behaviours. She does not think will change her habits. We discussed taking small steps like using the correct bleach dilution 5 tbs per 5 L of water to start it. She is happy to give it a go.
Additional	eMED3 (2010) new statement issued, not fit for work FitNote.pdf. (Diagnosis: Mental health problems.; Duration: 01/10/2024 - 12/01/2025)
History	Feels that has boil in genital area. No fever, no systemic features. Examined with chaperone (Karleen) small lesion on pubic area about 4-5 mm in size, round superficial ulcer. Not indurated. Does not need Abx, should self clear.
01/10/2024 15:05	Dr Anne Fraser at Mistylaw Medical Practice Lochwinnoch
History	Doxycycline was stopped 14/8. Acne face been clear but developed boil down below. Feels it may burst. Offered to see this afternoon at LW but no transport. Happy for Dr N to review tomorrow morning. Thanks. Will try salt bath.
Comment	says didn't get bisacodyl not been printed off, can this be done tomorrow and needs new Med3 from last one done 22/7. Thanks.
01/10/2024 09:12	Miss Denise Auld at Mistylaw Medical Practice Lochwinnoch
Comment	cyst down below, discuss medication and fit note, call mobile

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24/09/2024 14:30	Dr Iain [redacted] at Telephone Consultation
History	Spoke to Georgina as requested. She wished to change the bisacodyl from supps to oral laxatives. Have changed and put on repeats. No further issues wishing to be discussed.
Medication	Bisacodyl E/c tablets 5 mg *112 tablet TAKE TWO TABLETS AT NIGHT*
24/09/2024 09:12	Miss Lindsey Murphy at Mistylaw Medical Practice Lochwinnoch
Comment	Please call patient on mobile number. Re medication given below. Supposed to be tablets not suppository . I advised I could ask GP to do correct medication but patient wants to speak to Dr as well.
21/08/2024 10:15	Dr Dimitar Nechev at Mistylaw Medical Practice Lochwinnoch
History	Here for review of PV bleeding on intercourse. No pain. Has chronic abdominal pain. Tells me had a smear an year ago and normal.
Examination	Examined with chaperone (Kardeen). Abdomen SNT, no masses. Normal external genitalia. Normal cervix, no vaginal ulcers or lumps. Some white discharge.
Comment	No obvious cause for presentation. ?Due to thrush, Review if ongoing.
Medication	Clotrimazole Pessary 500 mg *1 PESSARY ONE TO BE INSERTED AT NIGHT*
14/08/2024 11:24	Dr Dimitar Nechev at Mistylaw Medical Practice Lochwinnoch
History	1. Here to discuss skin. Diagnosed with scalp psoriasis in prison. Affects occipital area. Has tried few different preparations, not sure which one works best. Lately has noted small dry patch on left elbow which she thinks is psoriasis. Has been managing it by emollients. O/E large patch occipital area more to the left. Pink, red and scaly . Keeps with psoriasis. Steroid to induce remission and then try maintenance therapy. 2. Chronic pain. Back sore, has been investigated, had MRI. Was on Pregabalin but stopped as was used as currency in prison. On AMT 75 mg and Etodolac for pain. Has had problems with sciatica and intermittent pain from carpal tunnel left wrist. O/E today positive Tinnel test, negative Phalen. I will refer to physio. AMT has been stepped down to 10 mg, I think too big reduction, try 50 mg instead. 3. Discussed other meds. On Famotidine for dyspepsia. Tells me had OGD in the past which did not show anything significant. Long standing history of constipation due to [redacted] abuse in the past. 4. On Doxycycline for acne. At the moment mild acne on chin. Happy to stop and switch to topical. Is on depo contraception and is in same sex relationship. Advised that is has sexual contact with opposite sex to use condom as well to prevent risk of STI and pregnancy. 5. For the last 3-4 weeks has been bleeding during and after intercourse. Tells me gentle digital penetration is enough to cause the bleeding. Mild bright bleeding which can continue until the next day. Will book return appt for be examined with chaperone. 6. Will book another appt to discuss mental health. Tells me was diagnosed with body dysmorphia.
Medication	Betamethasone Valerate Scalp application 0.1 % *100 ML APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE* [redacted] Adapalene And Benzoyl Peroxide Gel 0.1 % + 2.5 % *45 gram APPLY THINLY AT NIGHT* Amitriptyline Hydrochloride Tablets 50 mg *56 TABLET ONE TO BE TAKEN IN THE EVENING*
History	Referral to physio: Dear colleague. Georgina is new patient in the practice. She presents with chronic back pain. She tells me that this was previously investigated at Forth Valley and she had normal MRI scan. She also suffers from left carpal tunnel syndrome. She is on Amitriptyline 75 mg and Etodolac 600 mg daily for pain. I would be grateful is she could be seen for review and support of these conditions. [redacted] regards,
07/08/2024 14:16	Mrs [redacted] McDonald at Data Entry
Comment	**Below 6/8/24 10.49, F2F 14/8/24 with Dr Nechev - to discuss medication/review then.** Patient given all info from Dr McLaughlin also.
06/08/2024 10:49	Dr [redacted] McLaughlin at Special Request
History	Discrepancy-discharge sheet states ?75mg AMT (high dose) but 10mg on repeats and doxycycline to stop June. Suggest telephonew review to discuss. I have issued the rest.
Medication	Pizotifen Tablets 1.5 mg *56 TABLET ONE TO BE TAKEN AT NIGHT* Famotidine Tablets 40 mg *56 TABLET ONE TO BE TAKEN EACH DAY* Fexofenadine Hydrochloride Tablets 120 mg *56 tablet 1 Tab Daily* Quetiapine Fumarate Tablets 150 mg *56 tablet 1 Tab At night* Quetiapine Fumarate Tablets 25 mg *56 tablet 1 Tab At night*

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Bisacodyl Suppositories 5 mg *30 suppository 1-2 AT NIGHT*

06/08/2024 08:16 — Miss Lindsey Murphy at Mistylaw Medical Practice Lochwinnoch

Comment: Patient requesting All medication on sheet on reg form (page six). Depo not needed. Patient says she is still on Doxycycline. **PLEASE WRITE COLLECTION SCRIPT.** INFO: I have left sheet at front desk if this is easier for GP.

02/08/2024 17:20 — Miss Lindsey [redacted] at Mistylaw Medical Practice Lochwinnoch

Comment: See below - appt 14.08.24.

01/08/2024 17:13 — Mrs Grace [redacted] at Data Entry

Comment: As per Dr Nechev, to offer F2F for skin review, Dr not doing scripts just now. Still to get patient.

01/08/2024 10:36 — Nurse Fiona Scobie at Special Request

Comment: Needs creams and shampoo for psoriasis, been on Ketaconazole and Dermax which are unaffective, can she try something else pls? QV cream QV wash , gets a throat spray, also ? prescription Gluten free bread/cereal/pasta/biscuits, asking for something for her current anxiety, advised she may need to see you for this

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01/08/2024 10:10 — Nurse Fiona Scobie at Mistylaw Medical Practice Lochwinnoch

History: Cigarette smoker. 6 Cigarettes/day

Examination: Blood pressure reading 117/74 mm Hg
O/E - height, 166 cm
O/E - weight, 74 Kg
Body Mass Index, 26.85
Ideal Weight, 63.38 Kg

Family History: FH: [redacted] - breast
FH: Asthma

Social: Takes inadequate exercise
Teetotaller

Comment: New patient health check , smear up to date, has precription for DEPO injection, due 12/09 apt made, gets TFTS had been regular will ask GP when due. Georgina mentioned that she gets medicated shampoo and creams for her psoriasis not on her repeats, also asking if she can get something for axiety and panic attacks, pulse today 102, still getting pains in relation to this.

Result: Urine blood test = negative
Urine glucose test negative
Urine protein test negative

Additional: Health ed. - diet

31/07/2024 10:14 — Dr Dimitar Nechev at Mistylaw Medical Practice Lochwinnoch

History: Brief chat. 11 years in prison for culpable homicide. Released in May. Finds it difficult to adjust to normal life. Gets panic attacks when having to leave the house, does not like crowds. Has been having [redacted] chest pains in these situations. Has [redacted] can do with more support. Happy to speak with CLW. Told me briefly about childhood history of physical, [redacted] and emotional abuse by mother, her partners and [redacted] Previous history of DHS and [redacted] attempts (OD, having and choking herself). [redacted] family. lives on her own. Has female [redacted] They met in prison over an year ago. [redacted] lives in Greenock [redacted] is very supportive.

Examination: O/E - height, 166 cm
O/E - weight, 74 Kg
Body Mass Index, 26.85
O/E - BP reading
Blood pressure reading 100/70 mm Hg

Comment: Today Georgina needs some of her meds and med 3.

Medication: Etodolac M/R tablets 600 mg *56 TABLET ONE TO BE TAKEN EACH DAY*
Peppermint Oil E/c capsules 0.2 ml *84 capsule ONE TO BE TAKEN THREE TIMES A DAY BEFORE FOOD*
Depo-Provera Prefilled syringe 150 mg/1 ml *1 PRE-FILLED DISPOSABLE INJECTION TO BE USED AS DIRECTED*

Additional: eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: Mental health problems. Chronic pain.; Duration: 22/07/2024 - 30/09/2024)

19/07/2024 11:16 — Miss Lindsey Murphy at Mistylaw Medical Practice Lochwinnoch

Comment: F2F appt 31.07.24 with GP. New patient. Recently released from prision. To discuss medication etc/have general chat.

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Current Medication

Current Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
04/11/2025	**Pregabalin Capsules 25 mg** ONE TO BE TAKEN TWICE DAILY (TDD 175MG BD) 1*56 capsule	07/01/2026P	Dr Dimitar Nechev	ACUTE
10/10/2025	**Pregabalin Capsules 150 mg** ONE TO BE TAKEN TWICE A DAY (TDD 175MG) 1*56 capsule	07/01/2026P	Dr Dimitar Nechev	ACUTE
26/03/2025	**Luforbec Inhaler 100 micrograms + 6 micrograms/dose** ONE PUFF TO BE INHALED TWICE DAILY. ONE PUFF AS REWUIRED FOR RELIF OF SYMPTOMS. MAX 8 PUFFS IN 24 HOURS 120 dose	09/12/2025P	Dr Dimitar Nechev	REPEAT
24/09/2024	**Bisacodyl E/c tablets 5 mg** TAKE TWO TABLETS AT NIGHT 112 tablet	20/05/2025P	Dr Dimitar Nechev	REPEAT
14/08/2024	**Amitriptyline Hydrochloride Tablets 50 mg** ONE TO BE TAKEN IN THE EVENING 56 TABLET	09/12/2025P	Dr Dimitar Nechev	REPEAT
31/07/2024	**Etodolac M/R tablets 600 mg** ONE TO BE TAKEN EACH DAY 56 TABLET	09/12/2025P	Dr Dimitar Nechev	REPEAT
31/07/2024	**Peppermint Oil E/c capsules 0.2 ml** ONE TO BE TAKEN THREE TIMES A DAY BEFORE FOOD 84 capsule	09/12/2025P	Dr Dimitar Nechev	REPEAT
31/07/2024	**Pizotifen Tablets 1.5 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	09/12/2025P	Dr Dimitar Nechev	REPEAT
31/07/2024	**Famotidine Tablets 40 mg** ONE TO BE TAKEN EACH DAY 56 TABLET	09/12/2025P	Dr Dimitar Nechev	REPEAT
31/07/2024	**Fexofenadine Hydrochloride Tablets 120 mg** 1 Tab Daily 56 tablet	09/12/2025P	Dr Dimitar Nechev	REPEAT

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Past Medication

Past Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
08/10/2025	**Pregabalin Capsules 50 mg** THREE TO BE TAKEN TWICE DAILY 168 CAPSULE	08/10/2025P	Dr Iain [redacted]	ACUTE
16/09/2025	**Pregabalin Capsules 25 mg** ONE TO BE TAKEN TWICE DAILY (TDD 175MG BD) 1*56 capsule	08/10/2025P	Dr Iain [redacted]	ACUTE
26/08/2025	**Pregabalin Capsules 50 mg** THREE TO BE TAKEN TWICE DAILY 168 CAPSULE	27/08/2025P	Dr Dimitar Nechev	ACUTE
20/05/2025	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 28 capsule	20/05/2025P	Dr [redacted] McLaughlin	ACUTE
31/03/2025	**Depo-Provera Prefilled syringe 150 mg/1 ml** TO BE USED AS DIRECTED 1 PRE-FILLED DISPOSABLE INJECTION	31/03/2025P	Dr Iain [redacted]	ACUTE
31/03/2025	**Clenil Modulite Cfc-free inhaler 200 micrograms/actuation** ONE PUFF TO BE INHALED TWICE A DAY 200 DOSE	31/03/2025P	Dr Iain [redacted]	ACUTE
25/03/2025	**Luforbec inhaler 100 micrograms + 6 micrograms/dose** ONE PUFF TO BE INHALED TWICE A DAY. 1 PUFF AS REQUIRED FOR RELIEF OF SYMPTOMS. MAX 8 PUFFS IN 24 HOURS 120 dose	25/03/2025P	Dr [redacted] McLaughlin	ACUTE
26/02/2025	**Paracetamol Tablets 500 mg** TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS) 200 tablet	26/02/2025P	Dr Dimitar Nechev	ACUTE
30/12/2024	**Luforbec inhaler 100 micrograms + 6 micrograms/dose** ONE PUFF TO BE INHALED TWICE A DAY. 1 PUFF AS REQUIRED FOR RELIEF OF SYMPTOMS. MAX 8 PUFFS IN 24 HOURS 120 dose	30/12/2024P	Dr Dimitar Nechev	ACUTE
12/12/2024	**Clenil Modulite Cfc-free inhaler 200 micrograms/actuation** ONE PUFF TO BE INHALED TWICE A DAY 200 DOSE	12/12/2024P	Dr Dimitar Nechev	ACUTE
12/12/2024	**Easychamber Spacer device** TO BE USED AS DIRECTED 1 device	12/12/2024P	Dr Dimitar Nechev	ACUTE
21/08/2024	**Clotrimazole Pessary 500 mg** ONE TO BE INSERTED AT NIGHT 1 PESSARY	21/08/2024P	Dr Dimitar Nechev	ACUTE
14/08/2024	**Betamethasone Valerate Scalp application 0.1 %** APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE [redacted] 100 ML	14/08/2024P	Dr Dimitar Nechev	ACUTE
14/08/2024	**Adapalene And Benzoyl Peroxide Gel 0.1 % + 2.5 %** APPLY THINLY AT NIGHT 45 gram	14/08/2024P	Dr Dimitar Nechev	ACUTE
31/07/2024	**Depo-Provera Prefilled syringe 150 mg/1 ml** TO BE USED AS DIRECTED 1 PRE-FILLED DISPOSABLE INJECTION	31/07/2024P	Dr Dimitar Nechev	ACUTE
31/07/2024	**Quetiapine Fumarate Tablets 25 mg** REDUCE BY 25MG EACH WEEK UNTIL STOPPED. 70 TABLET	27/08/2025P	Dr Dimitar Nechev	ACUTE
31/07/2024	**Bisacodyl Suppositories 5 mg** 1-2 AT NIGHT 30 suppository	06/08/2024P	Dr [redacted] McLaughlin	ACUTE
26/02/2025	**Montelukast Sodium Tablets 10 mg** ONE TO BE TAKEN IN THE EVENING 28 tablet	26/03/2025P	Dr Dimitar Nechev	REPEAT
31/07/2024	**Amitriptyline Hydrochloride Tablets 10 mg** ONE TO BE TAKEN IN THE EVENING 56 TABLET	12/08/2024P	Dr Dimitar Nechev	REPEAT
31/07/2024	**Quetiapine Fumarate Tablets 150 mg** 1 Tab At night 56 tablet	24/07/2025P	Dr Dimitar Nechev	REPEAT

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Lab Report ID : B,24.8026867.R **Coding Status** : Part Read Coded
Filed By User : Ms Amy McDonald **File Status** : Filed
Assigned to : **Task Status** : No Tasks

Patient Details : (12751) Georgina Smith DOB : 04/12/1991 CHI : 0412913127 SEX : F
ADR : 6 Mains Avenue BEITH

Report Text :

-3 month TFTs for 1 year

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R Thyroid funct test					
TSH		1.26	mU/L	(0.35-5.00 U)	NK
Free T4		13.2	pmol/L	(9.0-21.0 U)	NK
Total T3					NK

Sample Collected Date : 22/10/2024 09:39:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 22/10/2024 11:57:00
Received Date : 22/10/2024 15:01:05
Requestor :
Requestor GMC Code :

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Lab Report ID : B,24.8226032.J **Coding Status** : Part Read Coded
Filed By User : Miss Orla McAuley **File Status** : Filed
Assigned to : **Task Status** : No Tasks

Patient Details : (12751) Georgina Smith DOB : 04/12/1991 CHI : 0412913127 SEX : F
ADR : 6 Mains Avenue BEITH

**** ABNORMAL ****

Report Text :

-Cough for 5 weeks. Mostly...
-Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except Sickle Cell Screening

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R Full Blood Count	Y				
White Blood Count		9.6	x10^9/l	(4.0-10.0 U)	NK
Red Cell Count		4.79	x10^12/l	(3.80-5.80 U)	NK
Haemoglobin		145	g/l	(115-165 U)	NK
Haematocrit		0.439	l/l	(0.370-0.470 U)	NK
Mean Cell Volume		91.6	fl	(83.0-101.0 U)	NK
MCH		30.3	pg	(27.0-32.0 U)	NK
Platelet Count		334	x10^9/l	(150-410 U)	NK
Neutrophils		5.7	x10^9/l	(2.0-7.0 U)	NK
Lymphocytes		2.7	x10^9/l	(1.1-5.0 U)	NK
Monocytes		0.6	x10^9/l	(0.2-1.0 U)	NK
Eosinophils	*	0.53	x10^9/l	(0.02-0.50 U)	NK
Basophils		0.1	x10^9/l	(0.0-0.1 U)	NK
Nucleated RBC		0	x10^9/l		NK
R GFST					
Glan. Fever Scr Test		Neg			NK
R Blood Film					
-Unremarkable blood film					
Blood Film		Yes			NK

Sample Collected Date : 12/12/2024 11:26:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 12/12/2024 16:35:00
Received Date : 12/12/2024 19:01:17
Requestor :
Requestor GMC Code :

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Lab Report ID : B,24.8219952.J **Coding Status** : Part Read Coded
Filed By User : Miss Orla McAuley **File Status** : Filed
Assigned to : **Task Status** : No Tasks

Patient Details : (12751) Georgina Smith DOB : 04/12/1991 CHI : 0412913127 SEX : F
ADR : 6 Mains Avenue BEITH

Report Text :

-Cough for 5 weeks. Mostly...

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R C-reactive Protein					
C Reactive Protein		4	mg/L	(0-10 U)	NK

Sample Collected Date : 12/12/2024 11:26:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 12/12/2024 16:22:00
Received Date : 12/12/2024 19:01:59
Requestor :
Requestor GMC Code :

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Lab Report ID : B,25.7111917.2 **Coding Status** : Part Read Coded
Filed By User : Miss Orla McAuley **File Status** : Filed
Assigned to : **Task Status** : No Tasks

Patient Details : (12751) Georgina Smith DOB : 04/12/1991 CHI : 0412913127 SEX : F
ADR : 6 Mains Avenue BEITH

Report Text :
-3/12 for 1 year

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R Thyroid funct test					
TSH		1.20	mU/L	(0.35-5.00 U)	NK
Free T4		12.3	pmol/L	(9.0-21.0 U)	NK
Total T3					NK

Sample Collected Date : 04/02/2025 09:32:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 04/02/2025 12:07:00
Received Date : 04/02/2025 15:00:58
Requestor :
Requestor GMC Code :

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Lab Report ID : B,25.7313432.E
Filed By User : Miss Lindsey [redacted]
Assigned to :

Coding Status : Part Read Coded
File Status : Filed
Task Status : No Tasks

Patient Details : (12751) Georgina Smith DOB : 04/12/1991 CHI : 0412913127 SEX : F
ADR : 6 Mains Avenue BEITH

**** ABNORMAL ****

Report Text :

-Asthma. On ICS. Monitor E...
-Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except Sickle Cell Screening

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R Full Blood Count	Y				
White Blood Count		9.8	x10^9/l	(4.0-10.0 U)	NK
Red Cell Count		4.86	x10^12/l	(3.80-5.80 U)	NK
Haemoglobin		141	g/l	(115-165 U)	NK
Haematocrit		0.430	l/l	(0.370-0.470 U)	NK
Mean Cell Volume		88.5	fl	(83.0-101.0 U)	NK
MCH		29.0	pg	(27.0-32.0 U)	NK
Platelet Count		330	x10^9/l	(150-410 U)	NK
Neutrophils		5.4	x10^9/l	(2.0-7.0 U)	NK
Lymphocytes		2.8	x10^9/l	(1.1-5.0 U)	NK
Monocytes		0.9	x10^9/l	(0.2-1.0 U)	NK
Eosinophils	*	0.62	x10^9/l	(0.02-0.50 U)	NK
Basophils		0.1	x10^9/l	(0.0-0.1 U)	NK
Nucleated RBC		0	x10^9/l		NK

Sample Collected Date : 25/03/2025 09:29:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 25/03/2025 11:58:00
Received Date : 25/03/2025 15:01:07
Requestor :
Requestor GMC Code :

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Lab Report ID : B,25.3512963.S **Coding Status** : Part Read Coded
Filed By User : Miss Orla McAuley **File Status** : Filed
Assigned to : **Task Status** : No Tasks

Patient Details : (12751) Georgina Smith DOB : 04/12/1991 CHI : 0412913127 SEX : F
ADR : 6 Mains Avenue BEITH

Report Text :
-Asthma. On ICS. Monitor E...

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R I Allergy IgE Ranges					
-INDIVIDUAL RESULT(S) TO FOLLOW WHEN TESTING COMPLETED.					
-Grade 0=<0.35 (negative)					
-Grade 1=0.35-0.70 (wk pos) Grade 2=0.70-3.50 (pos)					
-Grade 3=3.50-17.5 (pos) Grade 4=17.5-52.5 (strong pos)					
-Grade 5=52.5-100 (strong pos) Grade 6=>100 (strong pos)					
-Result must be interpreted in context of history.					
-Negative results do not exclude allergy.					
-Positive results may be found without clinical					
-reactions, especially in atopic individuals.					
-The sensitivity varies between allergens.					
Interpretation Guide		See comment			NK
R I Total IgE					
-Amended age-related references ranges are in use from 11/10/2023					
Total IgE		3	kU/L	(<<80 U)	NK
R I Dog (e5)					
Dog (e5)		< 0.35	kU/L	(<<0.35 U)	NK

Sample Collected Date : 25/03/2025 09:29:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 26/03/2025 10:51:00
Received Date : 11/04/2025 15:00:12
Requestor :
Requestor GMC Code :

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Lab Report ID : B,25.7618254.8 **Coding Status** : Part Read Coded
Filed By User : Miss Hannah Rawson **File Status** : Filed
Assigned to : **Task Status** : No Tasks

Patient Details : (12751) Georgina Smith DOB : 04/12/1991 CHI : 0412913127 SEX : F
ADR : 6 Mains Avenue BEITH

Report Text :
-3/12 for 1 year

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R Thyroid funct test					
TSH		0.99	mU/L	(0.35-5.00 U)	NK
Free T4		12.7	pmol/L	(9.0-21.0 U)	NK
Total T3					NK

Sample Collected Date : 17/06/2025 08:39:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 17/06/2025 12:02:00
Received Date : 17/06/2025 15:01:04
Requestor :
Requestor GMC Code :

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Hospital use only	Clinic	Day Date	Time	Hospital No.

Transport required?

Unique Care Pathway Number: 1010344997426

REFERRAL LETTER

MEDICAL IN CONFIDENCE

CHI:0412913127

REFERRAL TO

Community Mental Health Services - North GIAD
AA Adult Mental Health

Community Mental Health Services - Adult
NHS Ayrshire &[redacted]

Ethnic Origin	(White) Scottish
Language interpreter req'd	-
Religion	-
Religious Observance	-
Vision impairment	-
Hearing impairment	-
Sign language interpreter req'd.	-

Urgency of referral	Routine
Date of referral	16-Oct-2024
Date submitted	16-Oct-2024

PATIENT DETAILS

Surname	Smith
Forename(s)	Georgina
Title	-
Sex	Female
Date of birth	04-Dec-1991
CHI no.	0412913127

Patient's address

21 Meadowside
Beith
KA15 1BU

Contact number(s)

-

REGISTERED GP DETAILS

Name	Dr Dimitar Nechev		
GMC code	6110055	GP code	37966
Practice name	Mistylaw Medical Practice (19008)		
Practice code	87432		

Practice address

MISTYLAW MEDICAL PRACTICE
5 Mains Road
Beith
KA15 2AF

Contact number(s)

Voice: 01505 502 344
Facsimile: 01505 504 712

REFERRING PRACTITIONER DETAILS

Name	Dr. Dimitar Nechev		
GMC code	6110055	GP code	37966
Practice name	Mistylaw Medical Practice (87432)		
Practice code	87432		

Practice address

31 Main Street
Lochwinnoch
PA12 4AH

Contact number(s)

Voice: 01505 842200

CLINICAL INFORMATION

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History of presenting complaint / examination findings / investigation results

Presenting complaint

Description: Obsessive Compulsive Behaviour

Comment: Dear Colleagues,

Thank you for seeing this 32 year old lady who is new to the Practice. She was in Cornton Vale for 11 years for culpable homicide. She does have a history of physical, [redacted] and emotional abuse by [redacted] and [redacted] I enclose what we have on her. She presented to my colleague a couple of weeks ago as her [redacted] had asked her to make an appointment due to her compulsive cleaning. She has been cleaning excessively since prison and I think she also did it while in prison. For example, if she spills a cup of tea, she won't just mop it up, she will clean the whole house. Her house is cleaned [redacted] and she goes through several bottles of neat bleach a week. She used to be the same with her personal hygiene, but now showers twice a day and assures me that she does not scrub at her skin excessively. She used to use washing powder for her hair but now uses normal shampoo. My colleague had suggested diluting the bleach. However she came to update me today to say that she has been unable to do this. The skin on her hands seem to be normal as I did expect to see some redness. However she did say that the bleach catches her throat. She goes shopping with her [redacted] and she was positive about the suggestion that her [redacted] does the purchasing and looks for something like a Dettol spray as opposed to neat bleach. Georgina thought this was a good idea and is willing to try it. She attends a group twice a week with her [redacted] On the other days, she tends to sit in her house. She used to be keen on exercise and I have encouraged her to go out walking or jogging so that she has something to occupy herself. She will discuss with her [redacted] any exercise classes in the area. She feels her excessive cleaning bothers other people more than it does her. However she is keen to consider a referral to yourselves in the hopethat you can offer her some help.

We don't have a lot of notes on Georgina and I have enclosed what we do have which gives a bit more of her background.

Thank you for your help.

Yours sincerely,

Dr A [redacted]
Locum GP

Examinations and Investigations

If referral is urgent, has this been discussed with duty clinician:	No	-
1. Are there current active thoughts of self harm, is there a plan?:	No	-
Is there a History of [redacted] or self [redacted] injurious behaviours?:	Unknown	-
Any history or current threat of violence or aggression, considerations to staff safety?:	Yes	-
History of violence or aggression/staff safety [redacted] comments:	Please see text	-
Any social circumstances or previous psychiatric history impacting on current presentation?:	Yes	-
Considerations of vulnerability /Child Protection Issues/ First presentation Psychosis/ Peri-Natal:	No	-
Height:	166	-
Weight(kg):	74	-
BMI:	26.85	-
Cigarette smoker, 6 Cigarettes/day:		01-Aug-2024 00:00
Teetotaller:		01-Aug-2024 00:00
Takes inadequate exercise:		01-Aug-2024 00:00

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

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Past medical history
Pre-existing conditions

Description	Laterality	Modifier	Extension	Date of onset	Recorded Date
Obsessive-compulsive disorders	-	-	-	15-Oct-2024	15-Oct-2024
Hay fever - pollens	-	-	-	14-Aug-2024	14-Aug-2024
Chronic pain	-	-	Back pain. Sciatica. Carpal tunnel syndome	14-Aug-2024	14-Aug-2024
Scalp psoriasis	-	-	-	14-Aug-2024	14-Aug-2024
Headache	-	-	-	[redacted] 2024	14-Aug-2024
Dyspepsia	-	-	-	14-Aug-2024	14-Aug-2024
Thyroiditis	-	-	To have rpt TFT's at 3 month intervals for next year.	03-Nov-2023	03-Nov-2023
[X]Alcohol addiction	-	-	attended therapy while in prison	09-Apr-2014	09-Apr-2014
Personality disorder NOS	-	-	-	19-Mar-2014	19-Mar-2014
Asthma unspecified	-	-	-	30-Dec-1899	30-Dec-1899
Cystic breast	-	-	-	30-Dec-1899	30-Dec-1899
Anxiety with depression	-	-	-	30-Dec-1899	30-Dec-1899
[X]Eating disorders	-	-	-	30-Dec-1899	30-Dec-1899
Gluten intolerance	-	-	-	30-Dec-1899	30-Dec-1899

Past procedures

Description	Laterality	Modifier	Comments	Date performed	Recorded Date
Drug addiction therapy	-	-	attended therapy while in prison	08-Apr-2014	08-Apr-2014
Cholecystectomy NEC	-	-	-	30-Dec-1899	30-Dec-1899

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

Drug name	BNF code	Formulation	Dosage	Frequency	Course started	Duration	Last Prescribed Date
Bisacodyl E/c tablets 5 mg	0106020C0AAAAAA	112 tablet	TAKE TWO TABLETS AT NIGHT	-	24-Sep-2024	-	02-Oct-2024
Amitriptyline Hydrochloride Tablets 50 mg	0403010B0AAAIAI	56 TABLET	ONE TO BE TAKEN IN THE EVENING	-	14-Aug-2024	-	02-Oct-2024
Pizotifen Tablets 1.5 mg	0407042Q0AAACAC	56 TABLET	ONE TO BE TAKEN AT NIGHT	-	31-Jul-2024	-	02-Oct-2024
Etodolac M/R tablets 600 mg	1001010E0AAADAD	56 TABLET	ONE TO BE TAKEN EACH DAY	-	[redacted]	-	02-Oct-2024
Peppermint Oil E/c capsules 0.2 ml	0102000T0AAAAAA	84 capsule	ONE TO BE TAKEN THREE TIMES A DAY BEFORE FOOD	-	31-Jul-2024	-	02-Oct-2024
Famotidine Tablets 40 mg	0103010H0AAABAB	56 TABLET	ONE TO BE TAKEN EACH DAY	-	31-Jul-2024	-	02-Oct-2024
Fexofenadine Hydrochloride Tablets 120 mg	0304010E0AAAAAA	56 tablet	1 Tab Daily	-	31-Jul-2024	-	02-Oct-2024
Quetiapine Fumarate Tablets 150 mg	-	56 tablet	1 Tab At night	-	31-Jul-2024	-	02-Oct-2024
Quetiapine Fumarate Tablets 25 mg	0402010ABAAABAB	56 tablet	1 Tab At night	-	31-Jul-2024	-	02-Oct-2024

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

Drug name	BNF code	Formulation	Dosage	Frequency	Course started	Duration	Last Prescribed Date
Clotrimazole Pessary 500 mg	0702020F0AAAFAF	1 PESSARY	ONE TO BE INSERTED AT NIGHT	-	21-Aug-2024	1 Days	21-Aug-2024
Betamethasone Valerate Scalp application 0.1 %	1304000F0AABDBD	100 Ml	APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE [redacted]	-	14-Aug-2024	42 Days	14-Aug-2024
Adapalene And Benzoyl Peroxide Gel 0.1 % + 2.5 %	-	45 gram	APPLY THINLY AT NIGHT	-	14-Aug-2024	42 Days	14-Aug-2024
Depo-Provera Prefilled syringe 150 mg/1 ml	0703022M0BBABAB	1 PRE-FILLED DISPOSABLE INJECTION	TO BE USED AS DIRECTED	-	31-Jul-2024	42 Days	31-Jul-2024
Bisacodyl Suppositories 5 mg	0106020C0AAADAD	30 suppository	1-2 AT NIGHT	-	31-Jul-2024	48 Days	06-Aug-2024
Amitriptyline Hydrochloride Tablets 10 mg	0403010B0AAAGAG	56 TABLET	ONE TO BE TAKEN IN THE EVENING	-	31-Jul-2024	.	12-Aug-2024

Clinical warnings

Lifestyle risks

Exercise status: Not Known

Smoking status: Number per day ? (not known)

Alcohol consumption: Units per day ? (not known)

Intolerances

Description	Comment	Recorded Date
Lactose intolerance	-	30-Dec-1899

Additional relevant information

Administrative information

Referred By:Registered GP

Social circumstances

Signature of referring doctor (or other professional)

Date

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End of Document. Total Pages (including this one): 39

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Scanned Document
18-Jun-2026 SARA
Additional: Scanned Document

Filename: igprda202606181500440.pdf
Extension:.tif
Pages:

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Registration Details

Personal details...		Address details...	
Date of birth	04/12/1991	Post Code	KA15 2AT
Sex	F	House Name Flat No	
Surname	Smith	No and Street	6 Mains Avenue
Previous Surname	McMillan	Village	
Forenames	Georgina	Town	BEITH
Calling Name	Georgina	County	
Title	Mrs		
Birth Surname			
Marital Status	Single		
Ethnic Origin	(White) S[redacted]		

HA/HB Details...		Contact details...	
Trading partner	Ayrshire & Arran	Home Tel No	
Registered GP	Dr Dimitar Nechev	Work Tel No	
Usual GP	Dr Dimitar Nechev	Mobile Tel No	07831 361 242
Residential Inst		E Mail Address	
Branch Surgery	Mistylaw Medical Practice Beith	Next of Kin - name	[redacted] Black
CHI Number	0412913127	Next of Kin - relationship	
NHS Number		Next of Kin - contact no	07587 740 063
Other Contact			
Other Contact Tel No.			
Consent contact via Text Message			
Consent to Contact via Email			

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	28/03/2025		

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		

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Problems

Active Problems		Authorised By	Code
15/10/2024	Obsessive-compulsive disorders	Dr [redacted]	E203
14/08/2024	Dyspepsia	Dr Nechev	J16y4
14/08/2024	Headache	Dr Nechev	1B1G
14/08/2024	Scalp psoriasis	Dr Nechev	M16y0
14/08/2024	Chronic pain Back pain. Sciatica. Carpal tunnel syndome	Dr Nechev	1M52
14/08/2024	Hay fever - poliens	Dr Nechev	H170-1
15/07/2024	Discharged - prison Incarcerated on 02/04/2014 for Culpable Homicide	Nurse Patrick	EMISNQDI13
03/11/2023	Thyroiditis To have rpt TFT's at 3 month intervals for next year.	Nurse Patrick	C05
06/03/2023	Learning disability and difficulties in concentration, communication,social skills, coordination, organisation	Nurse Patrick	EMISNQLES
19/03/2014	Personality disorder NOS	Nurse Patrick	E21z
Not Known	Gluten intolerance	Nurse Patrick	J690-8
Not Known	Lactose intolerance	Nurse Patrick	C3131
Not Known	[X]Eating disorders	Nurse Patrick	Eu50
Not Known	Anxiety with depression	Nurse Patrick	E2003
Not Known	Cystic breast	Nurse Patrick	K301-2
Not Known	Asthma unspecified	Nurse Patrick	H33z

Past Problems		Authorised By	Code
02/12/2024	**Cough**	Anp [redacted]	171
09/04/2014	**[X]Alcohol addiction** attended therapy while in prison	Nurse Patrick	Eu102-1
08/04/2014	**Drug addiction therapy** attended therapy while in prison	Nurse Patrick	8B23
Not Known	**Cholecystectomy NEC**	Nurse Patrick	7B102-1

Health Admin Problems		Authorised By	Code

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Investigations

Investigations		Authorised By	Code
17/06/2025	**(Non Coded Event - Thyroid funct test)** (Source: LAB) .		
25/03/2025	**(Non Coded Event - I Allergy IgE Ranges)** (Source: LAB) . INDIVIDUAL RESULT(S) TO FOLLOW WHEN TESTING COMPLETED.|Grade 0=<0.35 (negative)|Grade 1=0.35-0.70 (wk pos) Grade 2=0.70-3.50 (pos)|Grade 3=3.50-17.5 (pos) Grade 4=17.5-52.5 (strong pos)|Grade 5=52.5-100 (strong pos) Grade 6=>100 (strong pos)|Result must be interpreted in context of history.|Negative results do not exclude allergy.|Positive results may be found without clinical|reactions, especially in atopic individuals.|The sensitivity varies between allergens.|		
25/03/2025	**(Non Coded Event - I Total IgE)** (Source: LAB) . Amended age-[redacted] references ranges are in use from 11/10/2023|		
25/03/2025	**(Non Coded Event - I Dog (e5))** (Source: LAB) .		
25/03/2025	**(Non Coded Event - I Allergy IgE Ranges)** (Source: LAB) . INDIVIDUAL RESULT(S) TO FOLLOW WHEN TESTING COMPLETED.|Grade 0=<0.35 (negative)|Grade 1=0.35-0.70 (wk pos) Grade 2=0.70-3.50 (pos)|Grade 3=3.50-17.5 (pos) Grade 4=17.5-52.5 (strong pos)|Grade 5=52.5-100 (strong pos) Grade 6=>100 (strong pos)|Result must be interpreted in context of history.|Negative results do not exclude allergy.|Positive results may be found without clinical|reactions, especially in atopic individuals.|The sensitivity varies between allergens.|		
25/03/2025	**(Non Coded Event - I Total IgE)** (Source: LAB) . Amended age-related references ranges are in use from 11/10/2023|		
25/03/2025	**(Non Coded Event - I Allergy IgE Ranges)** (Source: LAB) . INDIVIDUAL RESULT(S) TO FOLLOW WHEN TESTING COMPLETED.|Grade 0=<0.35 (negative)|Grade 1=0.35-0.70 (wk pos) Grade 2=0.70-3.50 (pos)|Grade 3=3.50-17.5 (pos) Grade 4=17.5-52.5 (strong pos)|Grade 5=52.5-100 (strong pos) Grade 6=>100 (strong pos)|Result must be interpreted in context of history.|Negative results do not exclude allergy.|Positive results may be found without clinical|reactions, especially in atopic individuals.|The sensitivity varies between allergens.|		
25/03/2025	**(Non Coded Event - Full Blood Count)** (Source: LAB) .		
04/02/2025	**(Non Coded Event - Thyroid funct test)** (Source: LAB) .		
12/12/2024	**(Non Coded Event - C-reactive Protein)** (Source: LAB) .		
12/12/2024	**(Non Coded Event - Full Blood Count)** (Source: LAB) .		
12/12/2024	**(Non Coded Event - GFST)** (Source: LAB) .		
12/12/2024	**(Non Coded Event - Blood Film)** (Source: LAB) . Unremarkable blood film|		
22/10/2024	**(Non Coded Event - Thyroid funct test)** (Source: LAB) .		

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Values

Values			
Date	Last Entry	Normal Range Indicator	Normal Range
17/06/2025	Serum TSH level 0.99 mU/L	.|.....	0.35-5
17/06/2025	Serum free T4 level 12.7 pmol/L	...|.....	9-21
17/06/2025	Serum total T3 level		
26/03/2025	O/E - rate of respiration 12 /min	|.....	12-20
26/03/2025	O/E - pulse rate 80 beats/minute		
26/03/2025	O/E - BP reading		
26/03/2025	Blood pressure reading 120/70 mm Hg		
25/03/2025	RAST test See comment		
25/03/2025	IgE 3 kU/L		
25/03/2025	Dog dander RAST test < 0.35		
25/03/2025	Total white cell count 9.8 x10^9/l	. . . . .|	4-10
25/03/2025	Red blood cell (RBC) count 4.86 x10^12/l	.....|.....	3.8-5.8
25/03/2025	Haemoglobin estimation 141 g/l	. . .|.....	115-165
25/03/2025	Haematocrit 0.43 l/l	.....|....	0.37-0.47
25/03/2025	Mean corpuscular volume (MCV) 88.5 fl	. .|.....	83-101
25/03/2025	Mean corpusc. haemoglobin(MCH) 29 pg	. . .|.....	27-32
25/03/2025	Platelet count 330 x10^9/l	. . . .|...	150-410
25/03/2025	Neutrophil count 5.4 x10^9/l	.....|...	2-7
25/03/2025	Lymphocyte count 2.8 x10^9/l	. . |.....	1.1-5
25/03/2025	Monocyte count 0.9 x10^9/l	. . . . |.	0.2-1
25/03/2025	Eosinophil count 0.62 x10^9/l	..... |	0.02-0.5
25/03/2025	Basophil count 0.1 x10^9/l	. . . . .|	0-0.1
25/03/2025	Nucleated red blood cell count 0 x10^9/l		
12/12/2024	Serum C reactive protein level 4 mg/L	. . |.....	0-10
12/12/2024	Glandular fever screening test Neg		
12/12/2024	Blood film microscopy Yes		
01/08/2024	Urine protein test negative		
01/08/2024	Urine glucose test negative		
01/08/2024	Urine blood test = negative		
01/08/2024	Ideal weight 63.38 Kg		
01/08/2024	Body Mass Index 26.85	. . . . |	20-25
01/08/2024	O/E - weight 74 Kg		
01/08/2024	O/E - height 166 cm	. . . |....	10-250
01/08/2024	Cigarette smoker 6 Cigarettes/day		

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Attachments

Attachments			Authorised By	Code
13/01/2025	**eMED3 (2018) new statement issued, not fit for work** FitNote.pdf, (Diagnosis: Mental Health Problems; Duration: 12/01/2025 - 11/04/2025)	FitNote_fb71c866-4312-461a-bec2-fb931a1bb937.pdf	Dr Savage	9D15
08/11/2024	**Hypothyroidism monitoring third letter**	Thyroid Recall letter .doc	Miss Murphy	9Oj2
04/10/2024	**Hypothyroidism monitoring second letter**	Thyroid Recall letter .doc	Miss Murphy	9Oj1
02/10/2024	**eMED3 (2018) new statement issued, not fit for work** FitNote.pdf, (Diagnosis: Mental health problems.; Duration: 01/10/2024 - 12/01/2025)	FitNote_883698ea-54fc-4201-ae3d-803a473f31eb.pdf	Dr Nechev	9D15
30/08/2024	**Hypothyroidism monitoring first letter**	Thyroid Recall letter .doc	Miss Murphy	9Oj0
31/07/2024	**eMED3 (2018) new statement issued, not fit for work** FitNote.pdf, (Diagnosis: Mental health problems. Chronic pain.; Duration: 22/07/2024 - 30/09/2024)	FitNote_ecdac97a-b499-4a4a-b9cf-41a5ec5e812f.pdf	Dr Nechev	9D15

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Due Diary Entries

Due Diary Entries		Authorised By	Code
03/12/2056	Influenza vaccination	Dr Nechev	65E..

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Overdue Diary Entires

Overdue Diary Entries		Authorised By	Code
31/07/2025	Medication review OVERDUE	Dr Nechev	8B314
12/08/2025	Patient "recall" admin. NOS OVERDUE Asthma	Ms McDonald	9O4Z.

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Alerts

Alerts	Authorised By	Code
None		

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Drug Allergies

Drug Allergies		Authorised By	Code
Not Known	Gluten intolerance	Nurse Patrick	J690.8
Not Known	Lactose intolerance	Nurse Patrick	C3131

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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
01/08/2024	FH: Asthma	Nurse Scobie	12D2
01/08/2024	FH: * - breast	Nurse Scobie	1243

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Referrals

Referrals		Authorised By	Code
16/10/2024	**8H49.: Psychiatric referral (SCI Gateway Referral)**	Dr Nechev	8H49
15/07/2024	**Discharged - prison** Incarcerated on 02/04/2014 for Culpable Homicide	Nurse Patrick	EMISNQDI13

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Immunisations

Immunisations	Authorised By	Code

None

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Health Status

Health Status	
01/08/2024	Height 166 cm
01/08/2024	Weight 74 Kg
01/08/2024	Body Mass Index 26.85 [redacted]
26/03/2025	Blood pressure reading O/E - BP reading
26/03/2025	Blood pressure reading 120/70 mm Hg
26/03/2025	Smoking Status Stopped smoking
01/08/2024	Exercise grading Takes inadequate exercise

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Miscellaneous

Other Observations		Authorised By	Code
10/10/2025	**Site of encounter NOS** Actioned in Pharmacotherapy Hub	Ms O'Neill	9N1Z
10/10/2025	**Telephone encounter**	Ms O'Neill	9N31
16/09/2025	**Site of encounter NOS** Actioned in Pharmacotherapy Hub	Ms O'Neill	9N1Z
16/09/2025	**Telephone encounter**	Ms O'Neill	9N31
16/09/2025	**Medication requested** Acute Rx issued	Ms O'Neill	8B3H
15/09/2025	**Unsuccessful attempt to contact patient by telephone**	Ms Calmey	9Nj0
11/09/2025	**Site of encounter NOS** Actioned in Pharmacotherapy Hub	Ms Lethom	9N1Z
11/09/2025	**Drugs not issued**	Ms Lethom	8B38
26/08/2025	**Site of encounter NOS** Actioned in Pharmacotherapy Hub	Ms McCartney	9N1Z
26/08/2025	**Telephone encounter**	Ms McCartney	9N31
26/08/2025	**New medication commenced** Pregabalin 50mg BD increasing by 50mg BD at weekly intervals until on 150mg BD is achieved or Georgina asks to stop increasing. Can be increased to a Maximum of Pregabalin 175mg BD. Once Pregabalin established withdraw Quetiapine every week until stopped.	[redacted]	8B3A3
26/08/2025	**Outpatient clinic letter received** Psych - 22/8/25.	Ms McCartney	9N3D2
17/06/2025	**Nursing care blood sample taken**	Phleb McSwegan	8C1B
16/06/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 08:40 on Tuesday 17 of June at Beith Surgery. To cancel please reply with the word CANCEL..		9N3G
10/06/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 08:40 on Tue, 17 of Jun at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
02/06/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 09:50 on Tuesday 03 of June at Beith Surgery. To cancel please reply with the word CANCEL..		9N3G
27/05/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 09:50 on Tue, 03 of Jun at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
26/05/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 11:15 on Tuesday 27 of May at Beith Surgery. To cancel please reply with the word CANCEL..		9N3G
20/05/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 11:15 on Tue, 27 of May at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
19/05/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 11:30 on Tuesday 20 of May at Beith Surgery. To cancel please reply with the word CANCEL..		9N3G
15/05/2025	**SMS text sent to patient** Blood Test		9N3G
13/05/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 11:30 on Tue, 20 of May at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
31/03/2025	**Site of encounter NOS** Actioned in Pharmacotherapy Hub	Ms O'Neill	9N1Z
31/03/2025	**Post hospital dischrge med reconciliation with medical notes** UHC ED-26/03/25 - Headache	Ms O'Neill	8B3S1
26/03/2025	**Stopped smoking**	Dr Nechev	137K
26/03/2025	**Temperature symptoms**	Dr Nechev	165
25/03/2025	**Nursing care blood sample taken**	Phleb McSwegan	8C1B
24/03/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 09:30 on Tuesday 25 of [redacted] at Beith Surgery. To cancel please reply with the word CANCEL. If you have any symptoms of coronavirus please cancel and rearrange. Check in at Reception to ensure staff know you have arrived..		9N3G
18/03/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 09:30 on Tue, 25 of Mar at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
04/02/2025	**Nursing care blood sample taken**	Phleb McSwegan	8C1B
03/02/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 09:30 on Tuesday 04 of February at Beith Surgery. To cancel please reply with the word CANCEL. If you have any symptoms of coronavirus please cancel and rearrange. Check in at Reception to ensure staff know you have arrived..		9N3G
28/01/2025	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 09:30 on Tue, 04 of Feb at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
23/01/2025	**SMS text sent to patient** Advisory text re emer. service due to weather warning for 24.1.25		9N3G
23/01/2025	**SMS text sent to patient** Blood Text Appt		9N3G
22/10/2024	**Nursing care blood sample taken**	Phleb [redacted]	8C1B

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21/10/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 09:40 on Tuesday 22 of October at Beith Surgery. To cancel please reply with the word CANCEL. If you have any symptoms of coronavirus please cancel and rearrange. Check in at Reception to ensure staff know you have arrived..		9N3G
15/10/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 09:40 on Tue, 22 of Oct at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
15/10/2024	**SMS text sent to patient** 2nd Thyroid Text Message		9N3G
14/10/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 10:20 on Tuesday 15 of October at Beith Surgery. To cancel please reply with the word CANCEL. If you have any symptoms of coronavirus please cancel and rearrange. Check in at Reception to ensure staff know you have arrived..		9N3G
08/10/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 10:20 on Tue, 15 of Oct at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
01/10/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 11:00 on Wednesday 02 of October at Beith Surgery. To cancel please reply with the word CANCEL. If you have any symptoms of coronavirus please cancel and rearrange. Check in at Reception to ensure staff know you have arrived..		9N3G
12/09/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 09:30 on Thu, 19 of Sep at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
12/09/2024	**SMS text received from patient** Type: Appointment Reminder Status: Reply Received Message: Cancel.		[redacted]
05/09/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 10:15 on Thu, 12 of Sep at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
05/09/2024	**SMS text received from patient** Type: Appointment Reminder Status: Reply Received Message: Cancel.		[redacted]
04/09/2024	**SMS text sent to patient** 1st Thyroid Text Message		9N3G
29/08/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 10:15 on Thu, 05 of Sep at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
26/08/2024	**Thyroid Result - set recall**	Nurse Patrick	PCS19008TH1
20/08/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 10:15 on Wednesday 21 of August at Beith Surgery. To cancel please reply with the word CANCEL. If you have any symptoms of coronavirus please cancel and rearrange. Check in at Reception to ensure staff know you have arrived..		9N3G
14/08/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 10:15 on Wed, 21 of Aug at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
13/08/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 11:30 on Wednesday 14 of August at Beith Surgery. To cancel please reply with the word CANCEL. If you have any symptoms of coronavirus please cancel and rearrange. Check in at Reception to ensure staff know you have arrived..		9N3G
07/08/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 11:30 on Wed, 14 of Aug at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
01/08/2024	**New patient health check** , smear up to date, has precription for DEPO injection, due 12/09 apt made, gets TFTS had been regular will ask GP when due. Georgina mentioned that she gets medicated shampoo and creams for her psoriasis not on her repeats, also asking if she can get something for axiety and panic attacks, pulse today 102, still getting pains in relation to this.	Nurse Scobie	6BR1
01/08/2024	**Health ed. - diet**	Nurse Scobie	6799
01/08/2024	**Teetotaller**	Nurse Scobie	1361
01/08/2024	**Takes inadequate exercise**	Nurse Scobie	13BO
31/07/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 10:15 on Thursday 01 of August at Beith Surgery. To cancel please reply with the word CANCEL. If you have any symptoms of coronavirus please cancel and rearrange. Check in at Reception to ensure staff know you have arrived..		9N3G
30/07/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 10:15 on Wednesday 31 of July at Beith Surgery. To cancel please reply with the word CANCEL. If you have any symptoms of coronavirus please cancel and rearrange. Check in at Reception to ensure staff know you have arrived..		9N3G
25/07/2024	**SMS text sent to patient** Type: Appointment Reminder Status: Message Delivered Message: This is confirmation of your appointment at 10:15 on Thu, 01 of Aug at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G

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	SMS text sent to patient Type: Appointment Reminder Status: Message		
24/07/2024	Delivered Message: This is confirmation of your appointment at 10:15 on Wed, 31 of Jul at Beith Surgery.To cancel please reply with the word CANCEL.		9N3G
19/07/2024	**Scottish - ethnic category 2001 census**	Miss Murphy	9i21

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Consultations

Consultations	
19/01/2026 15:24	Mrs G[redacted] McDonald at Data Entry
Comment	Below, current meds summary emailed.
19/01/2026 10:09	Dr Iain Savage at Mistylaw Medical Practice Lochwinnoch
Comment	Yes that's fine.
19/01/2026 09:24	Miss Lindsey Murphy at Mistylaw Medical Practice Lochwinnoch
Comment	Patient called to ask if we can email her a list of her current meds. In process of moving to East Kilbride and needs proof of meds. Email address is georginasmith962@gmail[redacted]
07/01/2026 17:05	Mrs G[redacted]nald at Data Entry
Comment	As below. I did explain to patient Pregabalin would be done, but repeats not due. She is checking what meds she has.
07/01/2026 16:50	Dr Dimitar Nechev at Mistylaw Medical Practice Lochwinnoch
History	Repeat meds are not due yet. She may wish to speak with the chemist and they can manage her repeat meds.
Medication	Pregabalin Capsules 150 mg *1*56 capsule ONE TO BE TAKEN TWICE A DAY (TDD 175MG)*
	Pregabalin Capsules 25 mg *1*56 capsule ONE TO BE TAKEN TWICE[redacted] 175MG BD)*
07/01/2026 15:42	Mrs[redacted] McDonald at Special Request
Comment	Patient said she cannot email for scripts because dyslexic. She asked for everything, but not all due. Needs Pregabalin scripts please.
09/12/2025 11:16	Dr Tracy McLaughlin at Special Request
Medication	Pregabalin Capsules 150 mg *1*56 capsule ONE TO BE TAKEN TWICE A DAY (TDD 175MG)*
	Pregabalin Capsules 25 mg *1*56 capsule ONE TO BE TAKEN TWICE[redacted] (TDD 175MG BD)*
09/12/2025 09:37	Miss Lindsey Murphy at Special Request
Comment	Patient requesting Pregabalin 150mg and 25mg.
04/11/2025 09:59	Dr Tra[redacted]y McLaughlin at Special Request
Medication	Pregabalin Capsules 150 mg *1*56 capsule ONE TO BE TAKEN TWICE A DAY (TDD 175MG)*
04/11/2025 09:44	Miss Lindsey Murphy at Mistylaw Medical Practice Lochwinnoch
Comment	Patient requesting Pregabalin.
10/10/2025 09:03	Ms Natasha[redacted] at Mistylaw Medical Practice Lochwinnoch
Comment	TC with pt - see entry 16/09. Managing new dose well - as discussed will switch 50mg caps to 150mg caps. Pregab issued 06/10 - pt advised to use supply just collected and on next issue will be amended preperation.
Additional	Telephone encounter
	Site of encounter NOS Actioned in Pharmacotherapy Hub
06/10/2025 08:21	Dr Iain[redacted] at Mistylaw Medical Practice Lochwinnoch
Medication	Pregabalin Capsules 25 mg *1*56 capsule ONE TO BE TAKEN TWICE[redacted] (TDD 175MG BD)*
02/10/2025 14:18	Mrs Grace McDonald at Special Request
Comment	Lady asking for another Pregabalin script please.
16/09/2025 10:13	Miss Lindsey Murphy at Mistylaw Medical Practice Lochwinnoch
Comment	See below - script printed.
Medication	Pregabalin Capsules 25 mg *1*56 capsule ONE TO BE TAKEN TWICE[redacted] (TDD 175MG BD)*
16/09/2025 09:41	Ms Natasha O'Neill at Mistylaw Medical Practice Lochwinnoch

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Comment	TC with pt - is on 150mg BD and quetiapine 25mg OD, states due to stop quetiapine friday, asking to go to 175mg BD as per email. Issued 25mg capsules as below to allow this - advised will phone in 4 weeks time to make sure dose tolerated and if so amend prep and quantity Added to hub column 10/10 for callback
Medication	Pregabalin Capsules 25 mg *1*56 capsule ONE TO BE TAKEN TWICE [redacted] (TDD 175MG BD)*
Additional	Medication requested Acute Rx issued Telephone encounter Site of encounter NOS Actioned in Pharmacotherapy Hub

16/09/2025 09:41 — Miss Lindsey Murphy at Mistylaw Medical Practice Lochwinnoch

Comment: FAO HUB - patient returned your call re below. Can she be called again please?

15/09/2025 14:25 — Ms Tamara Cairney at Mistylaw Medical Practice Lochwinnoch

Comment	Referral from hub to check in regarding pregabalin quetiapine cross-taper per Docman 22/08/2025 - unsuccessful unplanned call to Georgina today - rang out, nil VM facility. Can appoint for discussion on cross taper and ongoing doses per psych instruction at next Rx request.
Additional	Unsuccessful attempt to contact patient by telephone

12/09/2025 15:30 — Miss Lindsey Murphy at Mistylaw Medical Practice Lochwinnoch

Comment: INFO: We were checking TFT 3 monthly for 1 year as per Dr Nechev. Checks now done. TFT normal. No need to continue monitoring.

11/09/2025 14:18 — Ms Frances Lethom at Mistylaw Medical Practice Lochwinnoch

Comment	Task from PST SMcA - " PSW- Pls add to PSP column for PSP duty review. Diary not set up. SM. " Added to Practice Pharmacist Diary for Monday 15th Sept.
Additional	Drugs not issued Site of encounter NOS Actioned in Pharmacotherapy Hub

27/08/2025 14:48 — Miss Lindsey [redacted] at Mistylaw Medical Practice Lochwinnoch

Comment	See below - scripts printed.
Medication	Quetiapine Fumarate Tablets 25 mg *70 TABLET REDUCE BY 25MG EACH WEEK UNTIL STOPPED.* Pregabalin Capsules 50 mg *126 capsule TAKE ONE TWICE [redacted] INCREASED BY 50MG (ONE CAPSULE) TWICE [redacted] UNTIL 150MG TWICE [redacted] IS ACHIEVED.*

26/08/2025 13:59 — Ms Shona McCartney at Mistylaw Medical Practice Lochwinnoch

Comment	Quetiapine is to be reduced by 25mg once pregabalin is established until stopped. Added for PSP on 15/9/25 to review Pregabalin titration and down titration of quetiapine. TC with patient who confirmed to start reducing Quetiapine by 25mg when starting on Pregabalin medication. Patient agreed for Quetiapine 25mg tablets only to be issued for down titration to make it easier. Patient advised to contact GP/111 if experiencing any symptoms with down titration and advised patient not to stop any medication abruptly. Patient consented on pharmacist review on 15/9/25 to review titration process and symtoms.
Medication	Pregabalin Capsules 50 mg *126 capsule TAKE ONE TWICE [redacted] INCREASED BY 50MG (ONE CAPSULE) TWICE DAILY UNTIL 150MG TWICE DAILY IS ACHIEVED.* Quetiapine Fumarate Tablets 25 mg *70 TABLET REDUCE BY 25MG EACH WEEK UNTIL STOPPED.*
Additional	Outpatient clinic letter received Psych - 22/8/25. New medication commenced Pregabalin 50mg BD increaseing by 50mg BD at weekly intervals until on 150mg BD is achieved or Georgina asks to stop increasing. Can be increased to a Maximum of Pregabalin 175mg BD. Once Pregabalin established withdraw Quetiapine every week until stopped. Telephone encounter Site of encounter NOS Actioned in Pharmacotherapy Hub

08/08/2025 15:35 — Dr Dimitar Nechev at Mistylaw Medical Practice Lochwinnoch

History: Last 2-3 days has been having pain at right side of umbilicus and at back. Only when walks or laughs. No abdominal lumps, no fever, no N+V. ?Muscular in nature. Should settle on it's own. Review if worsening of pain or if develops other symptoms with it.

08/08/2025 08:49 — Miss Lindsey [redacted] at Mistylaw Medical Practice Lochwinnoch

Comment: Please call patient on mobile number. Asked for tel appt. Belly button pain and back pain.

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16/07/2025 15:23	Dr Dimitar Nechev at Telephone Consultation
History	Unwell for 3 days. Dizzy when standing- light headed and legs would give way. Dizziness settles quickly. No vertigo. Sore muscles. Was sick once and has egg taste at the back of mouth. No fever, no respiratory symptoms, no rash. No urinary symptoms. Has constipation had blood PR. Could be start of viral illness. Rest, fluids. If not better by next week would need seen.
16/07/2025 08:09	Miss Orla McAuley at Mistylaw Medical Practice Lochwinnoch
Comment	Has been having dizzy spells and feeling tired a lot.
17/06/2025 08:37	Phleb [redacted] McSwegan at Mistylaw Medical Practice Lochwinnoch
Comment	Nursing care blood sample taken
Test Request	Thyroid function tests - *Completed*
09/06/2025 11:27	Miss Lindsey [redacted] Mistylaw Medical Practice Lochwinnoch
Comment	INFO: Sick line dated 13.01.25 removed from reception as patient has never collected.
20/05/2025 11:34	Dr Tracy McLaughlin at Mistylaw Medical Practice Beith
History	1. Problems recently with headaches for which she had to be reviewed at accident and emergency and have a CT head. She has now stopped monteulask and headaches have stopped. She believes these were the cause and is keen to remain off. I have removed from her medication list. She is managing her asthma will at the moment and I have advised that if she notices a deterioration to seek further medical review. 2. Advises that she usually gets a [redacted] of her chest and pelvic area for recurrent cysts. Review of the record shows a pelvic ultrasound from 2018 which showed no cysts. Additionally she has a history of breast cysts and was seen at breast clinic. She is unclear if she has had any new lumps within the breast. 3. Says has OCD syptoms-causing arguments with [redacted]. Checking behaviours-annoying her. She will often check light switches, door locks and whether she has her debit card several times. She cleans obsessively additionally. She has been referred to Psychiatry but at this stage would like to consider medication.
Examination	Chaperone offered and declined. Bilateral normal breasts with no evidence of lumps. Abdomen is soft and non-tender with no pelvic masses.
Comment	Commence Fluoxetine. Discuss potential side effects on length of time to work. Review as needed.
Medication	Fluoxetine Hydrochloride Capsules 20 mg *28 capsule ONE TO BE TAKEN EACH DAY*
16/05/2025 16:11	Miss Lindsey [redacted]y at Mistylaw Medical Practice Lochwinnoch
Comment	TEXT SENT - due bloods. 3/12 for 1 year as per Dr Nechev.
Test Request	Thyroid function tests - *Requested*
30/04/2025 09:57	Ms Cheryl McCulloch at Mistylaw Medical Practice Lochwinnoch
Comment	To discuss headaches.
[redacted] 17:36	Dr Dimitar Nechev at Mistylaw Medical Practice Lochwinnoch
History	[redacted] is this the correct patient please.
02/04/2025 16:17	Mrs Grace McDonald at Special Request
Comment	Error - [redacted] patient as above. Sorted.
31/03/2025 10:44	Miss Lindsey Murphy at Special Request
Comment	Patient requesting brown inhaler and Depo injection. Asked for last week but not done.
31/03/2025 09:46	Ms [redacted] O'Neill at Mistylaw Medical Practice Lochwinnoch
Comment	Sudden onset headache. No medication changes - seen by GP as below. No pharmacy action required
Additional	Post hospital discharge med reconciliation with medical notes UHC ED-26/03/25 - Headache Site of encounter NOS Actioned in Pharmacotherapy Hub
28/03/2025 15:25	Dr [redacted] Gavin at Mistylaw Medical Practice Lochwinnoch

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History	TC with patient. D/C yesterday following admission with thunderclap headache- CT/LP excluded SAH. CSF culture awaited. Under impression was to be referred for MRI if ongoing - nil on d/c letter to suggest this but agree if recurrent problem/ongoing then seeing headache specialist for further advice re ix/mx would be warranted. Had no expectations from call, just wanted to update us. I initiated discussion re pain relief- generally simple pain killers such as paracetamol and ibuprofen are recommended, rather than codeine/stronger as they can profong / cause more chronic headaches. Suggest ensure plenty rest and sleep and hydrate well with water- recommend 2l. Advised if any sudden worsening or increase in headache severity or associated unwell/fever- to represent as emergency via A&E. Pt seemed happy with advice given.
28/03/2025 08:43	Miss Lindsey Murphy at Mistylaw Medical Practice Lochwinnoch
Comment	Please call patient on mobile number. See below for background. Discharged from Crosshouse last night. CT scan ok. To discuss this and pain relief, Ibuprofen not helping. No tel appts left with Dr Nechev today, offered to get another GP to call, patient agreeable.
26/03/2025 11:55	Dr Dimitar Nechev at Mistylaw Medical Practice Lochwinnoch
Medication	Montelukast Sodium Tablets 10 mg *28 tablet ONE TO BE TAKEN IN THE EVENING* Luforbec Inhaler 100 micrograms + 6 micrograms/dose *120 dose ONE PUFF TO BE INHALED TWICE DAILY. ONE PUFF AS REWUIRED FOR RELIF OF SYMPTOMS. MAX 8 PUFFS IN 24 HOURS*
26/03/2025 11:19	Dr Dimitar Nechev at Telephone Consultation
History	Headache. Normally does not suffer from headache. Started 3 days ago. Very severe headache all over 10/10 like a vice on head. Settled. Then had same headache when putting curtains up. Yesterday headache started after orgasm again and is ongoing. Currently 5/10. Felt nauseated and vision was blurred when pain was severe. Not known FH of SAH/brain aneurysm .
Examination	O/E - BP reading Blood pressure reading 120/70 mm Hg O/E - pulse rate 80 beats/minute Temperature symptoms O/E - rate of respiration 12 /min PRELA 3mm, CN III-XII nonnal apart from some blurring of vision at lateral gaze but no diplopia.
Comment	We need to rule out SAH. Referred to medical team at XH. Many thanks.
Medication	Luforbec Inhaler 100 micrograms + 6 micrograms/dose *120 dose ONE PUFF TO BE INHALED TWICE DAILY. ONE PUFF AS REWUIRED FOR RELIF OF SYMPTOMS. MAX 8 PUFFS IN 24 HOURS*
History	Discussed oesinophilia. Tells me asthma under good control, uses ICS regularly. Stopped smoking and does not cough any more.
Social	Stopped smoking
26/03/2025 09:01	Dr Dimitar Nechev at Mistylaw Medical Practice Lochwinnoch
History	Called patient. Double booking. In my tel list and also f2f this morning.
26/03/2025 08:41	Ms [redacted] McDonald at Mistylaw Medical Practice Lochwinnoch
Comment	Severe headaches during sex and at climax, feels like a very instense shooting pain into the head. States yesterday was putting up curtains and experienced the same pain, phoned 111 and they advised GP appointment today
25/03/2025 10:02	Dr Tracy McLaughlin at Special Request
Medication	Montelukast Sodium Tablets 10 mg *28 tablet ONE TO BE TAKEN IN THE EVENING*
25/03/2025 09:26	Ms Cheryl McCulloch at Mistylaw Medical Practice Lochwinnoch
Comment	Request for inhalers and montelukast
25/03/2025 09:26	Phleb [redacted] McSwegan at Mistylaw Medical Practice Lochwinnoch
Comment	Nursing care blood sample taken
Test Request	Full Blood Count - *Completed*, IgE to Dog dander (e5) - *Completed*, IgE (total) - *Completed*
26/02/2025 15:09	Dr Dimitar Nechev at Telephone Consultation

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History	As bellow. Coughing fits as bellow worse at night, chest sometimes feels tight. Cold weather makes it worse. There is a god in the house. Takes Luforbec twice daily and would have rescue dose during attack, makes her shaky. Wonders why symptoms worse now. Wonders if needs CT chest. Discussed that symptoms are keeping with asthma and CT chest in unlikely to be informative. Eosinophilic on last FBC. Happy to Montelukast. Happy to suspend Etodolac in case it causes airway reactivity. I will call her for review in a month.
Medication	Montelukast Sodium Tablets 10 mg *28 tablet ONE TO BE TAKEN IN THE EVENING* Paracetamol Tablets 500 mg *200 tablet TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)*
Test Request	Full Blood [redacted] - *Requested*, IgE to Dog dander (e5) - *Requested*, IgE (total) - *Requested*

26/02/2025 08:43 Miss Orla McAuley at Mistylaw Medical Practice Lochwinnoch
Comment: Had cough for over 9 weeks. Been getting coughing fits morning and night

04/02/2025 09:31 Phleb Clare McSwegan at Mistylaw Medical Practice Lochwinnoch
Comment: Nursing care blood sample taken
Test Request: Thyroid function tests - *Completed*

17/01/2025 16:53 Miss Lindsey [redacted]y at Mistylaw Medical Practice Lochwinnoch
Comment: TEXT SENT - due bloods. 3 monthly for 1 year as per Dr Nechev.
Test Request: Thyroid function tests - *Requested*

13/01/2025 06:14 Dr Iain [redacted] at Mistylaw Medical Practice Lochwinnoch
Additional: eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: Mental Health Problems; Duration: 12/01/2025 - 11/04/2025)

06/01/2025 12:12 Miss Lindsey [redacted] at Mistylaw Medical Practice Lochwinnoch
Comment: See below - patient notified. Advises Jobcentre told her it runs out today.

06/01/2025 09:35 Dr Iain Savage at Mistylaw Medical Practice Lochwinnoch
History: Fit note doesn't run out til 12th Jan. Will put it on list for next week to do.

06/01/2025 09:15 Ms Cheryl McCulloch at Mistylaw Medical Practice Lochwinnoch
Comment: Requesting fitnote. Current fitnote ends today.

30/12/2024 12:49 Miss Lindsey [redacted]y at Mistylaw Medical Practice Lochwinnoch
Comment: See below - script printed.
Medication: Luforbec Inhaler 100 micrograms + 6 micrograms/dose *120 dose ONE PUFF TO BE INHALED TWICE A DAY. 1 PUFF AS REQUIRED FOR RELIEF OF SYMPTOMS. MAX 8 PUFFS IN 24 HOURS*

30/12/2024 12:27 Dr Dimitar Nechev at Telephone Consultation

History	Cough is not better with Clenil. Has been taking it twice daily and an extra dose when coughing. CXR normal. Has mild oesinophylia which would support asthma. Georgina does not feel it is asthma though. She wonders if it could be COPD. Discussed that asthma sometimes can present with cough only. Try combination inhaler. Review if few weeks.
Medication	Luforbec Inhaler 100 micrograms + 6 micrograms/dose *120 dose ONE PUFF TO BE INHALED TWICE A DAY. 1 PUFF AS REQUIRED FOR RELIEF OF SYMPTOMS. MAX 8 PUFFS IN 24 HOURS*

16/12/2024 17:21 Mrs Grace McDonald at Data Entry
Comment: Callback arranged 30/12/24 with Dr Nechev - to discuss recent blood results.

12/12/2024 11:26 Nurse [redacted] Scobie at Mistylaw Medical Practice Lochwinnoch
Test Request: CRP - *Completed*, Full Blood Count - *Completed*, Infectious Mononucleosis - *Completed*

12/12/2024 10:26 Dr Dimitar Nechev at Mistylaw Medical Practice Lochwinnoch

History	Cough for 5 weeks now. Mostly dry but would bring up some discoloured phlegm. No blood. Chest feels tight. Pain right posterior chest. Breathless even when walks slowly. No fever. Noted childhood history of asthma. Had inhalers in adult life.
Examination	Not in distress, temp normal, BP 120/70, pulse 80/min, Sat 95%, pulse 78/min. Normal throat and neck. No fingers clubbing. Clear lungs and heart sounds.
Comment	?Viral illness. ?asthma. Review with results.
Medication	Clenil Modulite Cfc-free inhaler 200 micrograms/actuation *200 DOSE ONE PUFF TO BE INHALED TWICE A DAY* Easychamber Spacer device *1 device TO BE USED AS DIRECTED*

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Test Request	CRP - *Requested*, Full Blood Count - *Requested*, Infectious Mononucleosis - *Requested*, XR Chest - *Completed*
12/12/2024 08:08	Ms Amy McDonald at Mistylaw Medical Practice Lochwinnoch
Comment	Cough for over 5 weeks, nothing OTC helping, chemist advised to see GP
02/12/2024 10:26	Anp Carolyn [redacted] Mistylaw Medical Practice Lochwinnoch
Problem (FIRST)	**Cough**
History	Cough for past 3 weeks, phlegm white/yellow or dry, no haemoptysis, some pain in right lower rib cage, feels as winds her, only occurred once, lasted 30 mins, SOBOE, no sweats, intermittant fever, not SOB or wheezy, appetite normal. Feels throat tight, not sore, not flu like. No ankle swelling or calf pain, denies GORD, worse in morning, not disturbing sleep.
Examination	O/E - BP reading Temp 36.6, Sats 97%, pulse 95, RR 12, Blood pressure reading 109/78 [redacted] Hg Chest ausultation normal breath sounds. Throat mildly red.
Comment	Likely resolving URTI, call bvack if worsens or concerned.
02/12/2024 09:37	Miss Lindsey [redacted]law Medical Practice Lochwinnoch
Comment	F2F appt - cough for over 3 weeks. Has tried various OTC things.
08/11/2024	Miss Lindsey [redacted]y at Externally Entered
Additional	Hypothyroidism monitoring third letter
22/10/2024 09:36	Phleb [redacted] at Mistylaw Medical Practice Lochwinnoch
Comment	Nursing care blood sample taken
Test Request	Thyroid function tests - *Completed*
15/10/2024 11:03	Dr [redacted] Medical Practice Lochwinnoch
Problem (FIRST)	**Obsessive-compulsive disorders**
History	see above. Came to update us. Still using bleach as before. Fumes irritate her. Hands look OK despite its use. Reassures me she showers twice a day and doesn't scrub herself clean. Uses normal shampoo. Feels her cleaning annoys others more but keen to give referral a go.
Comment	will get support worker to do her shopping and get eg a dettol spray. Will look at restarting exercise, gym, jogging to get her out of the house. Seems keen to try ideas. Referral psych done.
15/10/2024 10:19	Miss Lindsey [redacted]y at Mistylaw Medical Practice Lochwinnoch
Comment	Appt 22.10.24.
Test Request	Thyroid function tests - *Requested*
04/10/2024	Miss Lindsey [redacted]y at Externally Entered
Additional	Hypothyroidism monitoring second letter
02/10/2024 11:08	Dr Dimitar Nechev at Mistylaw Medical Practice Lochwinnoch
History	Her support worker asked her to make an appt. Compulsive cleaning. Has been like this since prison. Thinks it is to do with [redacted] abuse in the past. If spills a cup of tea won't just mop it, she would have to clear the whole house. Cleans the house daily. Goes through few bottles of bleach a week. Hoovers the sofa few times a day. She is the same with personal hygiene. Used to wash hair with washing powder, now uses body lotion. No other OCD behaviours. She does not think will change her habits. We discussed taking small steps like using the correct bleach dilution 5 tbs per 5 L of water to start it. She is happy to give it a go.
Additional	eMED3 (2010) new statement issued, not fit for work FitNote.pdf. (Diagnosis: Mental health problems.; Duration: 01/10/2024 - 12/01/2025)
History	Feels that has boil in genital area. No fever, no systemic features. Examined with chaperone (Karleen) small lesion on pubic area about 4-5 mm in size, round superficial ulcer. Not indurated. Does not need Abx, should self clear.
01/10/2024 15:05	Dr Anne Fraser at Mistylaw Medical Practice Lochwinnoch
History	Doxycycline was stopped 14/8. Acne face been clear but developed boil down below. Feels it may burst. Offered to see this afternoon at LW but no transport. Happy for Dr N to review tomorrow morning. Thanks. Will try salt bath.
Comment	says didn't get bisacodyl not been printed off, can this be done tomorrow and needs new Med3 from last one done 22/7. Thanks.
01/10/2024 09:12	Miss Denise Auld at Mistylaw Medical Practice Lochwinnoch
Comment	cyst down below, discuss medication and fit note, call mobile

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24/09/2024 14:30	Dr Iain [redacted] at Telephone Consultation
History	Spoke to Georgina as requested. She wished to change the bisacodyl from supps to oral laxatives. Have changed and put on repeats. No further issues wishing to be discussed.
Medication	Bisacodyl E/c tablets 5 mg *112 tablet TAKE TWO TABLETS AT NIGHT*
24/09/2024 09:12	Miss Lindsey Murphy at Mistylaw Medical Practice Lochwinnoch
Comment	Please call patient on mobile number. Re medication given below. Supposed to be tablets not suppository . I advised I could ask GP to do correct medication but patient wants to speak to Dr as well.
21/08/2024 10:15	Dr Dimitar Nechev at Mistylaw Medical Practice Lochwinnoch
History	Here for review of PV bleeding on intercourse. No pain. Has chronic abdominal pain. Tells me had a smear an year ago and normal.
Examination	Examined with chaperone (Kardeen). Abdomen SNT, no masses. Normal external genitalia. Normal cervix, no vaginal ulcers or lumps. Some white discharge.
Comment	No obvious cause for presentation. ?Due to thrush, Review if ongoing.
Medication	Clotrimazole Pessary 500 mg *1 PESSARY ONE TO BE INSERTED AT NIGHT*
14/08/2024 11:24	Dr Dimitar Nechev at Mistylaw Medical Practice Lochwinnoch
History	1. Here to discuss skin. Diagnosed with scalp psoriasis in prison. Affects occipital area. Has tried few different preparations, not sure which one works best. Lately has noted small dry patch on left elbow which she thinks is psoriasis. Has been managing it by emollients. O/E large patch occipital area more to the left. Pink, red and scaly . Keeps with psoriasis. Steroid to induce remission and then try maintenance therapy. 2. Chronic pain. Back sore, has been investigated, had MRI. Was on Pregabalin but stopped as was used as currency in prison. On AMT 75 mg and Etodolac for pain. Has had problems with sciatica and intermittent pain from carpal tunnel left wrist. O/E today positive Tinnel test, negative Phalen. I will refer to physio. AMT has been stepped down to 10 mg, I think too big reduction, try 50 mg instead. 3. Discussed other meds. On Famotidine for dyspepsia. Tells me had OGD in the past which did not show anything significant. Long standing history of constipation due to [redacted] abuse in the past. 4. On Doxycycline for acne. At the moment mild acne on chin. Happy to stop and switch to topical. Is on depo contraception and is in same sex relationship. Advised that is has sexual contact with opposite sex to use condom as well to prevent risk of STI and pregnancy. 5. For the last 3-4 weeks has been bleeding during and after intercourse. Tells me gentle digital penetration is enough to cause the bleeding. Mild bright bleeding which can continue until the next day. Will book return appt for be examined with chaperone. 6. Will book another appt to discuss mental health. Tells me was diagnosed with body dysmorphia.
Medication	Betamethasone Valerate Scalp application 0.1 % *100 ML APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE* [redacted] Adapalene And Benzoyl Peroxide Gel 0.1 % + 2.5 % *45 gram APPLY THINLY AT NIGHT* Amitriptyline Hydrochloride Tablets 50 mg *56 TABLET ONE TO BE TAKEN IN THE EVENING*
History	Referral to physio: Dear colleague. Georgina is new patient in the practice. She presents with chronic back pain. She tells me that this was previously investigated at Forth Valley and she had normal MRI scan. She also suffers from left carpal tunnel syndrome. She is on Amitriptyline 75 mg and Etodolac 600 mg daily for pain. I would be grateful is she could be seen for review and support of these conditions. [redacted] regards,
07/08/2024 14:16	Mrs [redacted] McDonald at Data Entry
Comment	**Below 6/8/24 10.49, F2F 14/8/24 with Dr Nechev - to discuss medication/review then.** Patient given all info from Dr McLaughlin also.
06/08/2024 10:49	Dr [redacted] McLaughlin at Special Request
History	Discrepancy-discharge sheet states ?75mg AMT (high dose) but 10mg on repeats and doxycycline to stop June. Suggest telephonew review to discuss. I have issued the rest.
Medication	Pizotifen Tablets 1.5 mg *56 TABLET ONE TO BE TAKEN AT NIGHT* Famotidine Tablets 40 mg *56 TABLET ONE TO BE TAKEN EACH DAY* Fexofenadine Hydrochloride Tablets 120 mg *56 tablet 1 Tab Daily* Quetiapine Fumarate Tablets 150 mg *56 tablet 1 Tab At night* Quetiapine Fumarate Tablets 25 mg *56 tablet 1 Tab At night*

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Bisacodyl Suppositories 5 mg *30 suppository 1-2 AT NIGHT*

06/08/2024 08:16 — Miss Lindsey Murphy at Mistylaw Medical Practice Lochwinnoch

Comment: Patient requesting All medication on sheet on reg form (page six). Depo not needed. Patient says she is still on Doxycycline. **PLEASE WRITE COLLECTION SCRIPT.** INFO: I have left sheet at front desk if this is easier for GP.

02/08/2024 17:20 — Miss Lindsey [redacted] at Mistylaw Medical Practice Lochwinnoch

Comment: See below - appt 14.08.24.

01/08/2024 17:13 — Mrs Grace [redacted] at Data Entry

Comment: As per Dr Nechev, to offer F2F for skin review, Dr not doing scripts just now. Still to get patient.

01/08/2024 10:36 — Nurse Fiona Scobie at Special Request

Comment: Needs creams and shampoo for psoriasis, been on Ketaconazole and Dermax which are unaffective, can she try something else pls? QV cream QV wash , gets a throat spray, also ? prescription Gluten free bread/cereal/pasta/biscuits, asking for something for her current anxiety, advised she may need to see you for this

---

01/08/2024 10:10 — Nurse Fiona Scobie at Mistylaw Medical Practice Lochwinnoch

History: Cigarette smoker. 6 Cigarettes/day

Examination: Blood pressure reading 117/74 mm Hg
O/E - height, 166 cm
O/E - weight, 74 Kg
Body Mass Index, 26.85
Ideal Weight, 63.38 Kg

Family History: FH: * - breast
FH: Asthma

Social: Takes inadequate exercise
Teetotaller

Comment: New patient health check , smear up to date, has precription for DEPO injection, due 12/09 apt made, gets TFTS had been regular will ask GP when due. Georgina mentioned that she gets medicated shampoo and creams for her psoriasis not on her repeats, also asking if she can get something for axiety and panic attacks, pulse today 102, still getting pains in relation to this.

Result: Urine blood test = negative
Urine glucose test negative
Urine protein test negative

Additional: Health ed. - diet

31/07/2024 10:14 — Dr Dimitar Nechev at Mistylaw Medical Practice Lochwinnoch

History: Brief chat. 11 years in prison for culpable homicide. Released in May. Finds it difficult to adjust to normal life. Gets panic attacks when having to leave the house, does not like crowds. Has been having [redacted] chest pains in these situations. Has [redacted] can do with more support. Happy to speak with CLW. Told me briefly about childhood history of physical, [redacted] and emotional abuse by mother, her partners and [redacted] Previous history of DHS and [redacted] attempts (OD, having and choking herself). [redacted] family. lives on her own. Has female [redacted] They met in prison over an year ago. [redacted] lives in Greenock [redacted] is very supportive.

Examination: O/E - height, 166 cm
O/E - weight, 74 Kg
Body Mass Index, 26.85
O/E - BP reading
Blood pressure reading 100/70 mm Hg

Comment: Today Georgina needs some of her meds and med 3.

Medication: Etodolac M/R tablets 600 mg *56 TABLET ONE TO BE TAKEN EACH DAY*
Peppermint Oil E/c capsules 0.2 ml *84 capsule ONE TO BE TAKEN THREE TIMES A DAY BEFORE FOOD*
Depo-Provera Prefilled syringe 150 mg/1 ml *1 PRE-FILLED DISPOSABLE INJECTION TO BE USED AS DIRECTED*

Additional: eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: Mental health problems. Chronic pain.; Duration: 22/07/2024 - 30/09/2024)

19/07/2024 11:16 — Miss Lindsey Murphy at Mistylaw Medical Practice Lochwinnoch

Comment: F2F appt 31.07.24 with GP. New patient. Recently released from prision. To discuss medication etc/have general chat.

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Current Medication

Current Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
04/11/2025	**Pregabalin Capsules 25 mg** ONE TO BE TAKEN TWICE DAILY (TDD 175MG BD) 1*56 capsule	07/01/2026P	Dr Dimitar Nechev	ACUTE
10/10/2025	**Pregabalin Capsules 150 mg** ONE TO BE TAKEN TWICE A DAY (TDD 175MG) 1*56 capsule	07/01/2026P	Dr Dimitar Nechev	ACUTE
26/03/2025	**Luforbec Inhaler 100 micrograms + 6 micrograms/dose** ONE PUFF TO BE INHALED TWICE DAILY. ONE PUFF AS REWUIRED FOR RELIF OF SYMPTOMS. MAX 8 PUFFS IN 24 HOURS 120 dose	09/12/2025P	Dr Dimitar Nechev	REPEAT
24/09/2024	**Bisacodyl E/c tablets 5 mg** TAKE TWO TABLETS AT NIGHT 112 tablet	20/05/2025P	Dr Dimitar Nechev	REPEAT
14/08/2024	**Amitriptyline Hydrochloride Tablets 50 mg** ONE TO BE TAKEN IN THE EVENING 56 TABLET	09/12/2025P	Dr Dimitar Nechev	REPEAT
31/07/2024	**Etodolac M/R tablets 600 mg** ONE TO BE TAKEN EACH DAY 56 TABLET	09/12/2025P	Dr Dimitar Nechev	REPEAT
31/07/2024	**Peppermint Oil E/c capsules 0.2 ml** ONE TO BE TAKEN THREE TIMES A DAY BEFORE FOOD 84 capsule	09/12/2025P	Dr Dimitar Nechev	REPEAT
31/07/2024	**Pizotifen Tablets 1.5 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	09/12/2025P	Dr Dimitar Nechev	REPEAT
31/07/2024	**Famotidine Tablets 40 mg** ONE TO BE TAKEN EACH DAY 56 TABLET	09/12/2025P	Dr Dimitar Nechev	REPEAT
31/07/2024	**Fexofenadine Hydrochloride Tablets 120 mg** 1 Tab Daily 56 tablet	09/12/2025P	Dr Dimitar Nechev	REPEAT

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Past Medication

Past Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
08/10/2025	**Pregabalin Capsules 50 mg** THREE TO BE TAKEN TWICE DAILY 168 CAPSULE	08/10/2025P	Dr Iain [redacted]	ACUTE
16/09/2025	**Pregabalin Capsules 25 mg** ONE TO BE TAKEN TWICE DAILY (TDD 175MG BD) 1*56 capsule	08/10/2025P	Dr Iain [redacted]	ACUTE
26/08/2025	**Pregabalin Capsules 50 mg** THREE TO BE TAKEN TWICE DAILY 168 CAPSULE	27/08/2025P	Dr Dimitar Nechev	ACUTE
20/05/2025	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 28 capsule	20/05/2025P	Dr [redacted] McLaughlin	ACUTE
31/03/2025	**Depo-Provera Prefilled syringe 150 mg/1 ml** TO BE USED AS DIRECTED 1 PRE-FILLED DISPOSABLE INJECTION	31/03/2025P	Dr Iain [redacted]	ACUTE
31/03/2025	**Clenil Modulite Cfc-free inhaler 200 micrograms/actuation** ONE PUFF TO BE INHALED TWICE A DAY 200 DOSE	31/03/2025P	Dr Iain [redacted]	ACUTE
25/03/2025	**Luforbec inhaler 100 micrograms + 6 micrograms/dose** ONE PUFF TO BE INHALED TWICE A DAY. 1 PUFF AS REQUIRED FOR RELIEF OF SYMPTOMS. MAX 8 PUFFS IN 24 HOURS 120 dose	25/03/2025P	Dr [redacted] McLaughlin	ACUTE
26/02/2025	**Paracetamol Tablets 500 mg** TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS) 200 tablet	26/02/2025P	Dr Dimitar Nechev	ACUTE
30/12/2024	**Luforbec inhaler 100 micrograms + 6 micrograms/dose** ONE PUFF TO BE INHALED TWICE A DAY. 1 PUFF AS REQUIRED FOR RELIEF OF SYMPTOMS. MAX 8 PUFFS IN 24 HOURS 120 dose	30/12/2024P	Dr Dimitar Nechev	ACUTE
12/12/2024	**Clenil Modulite Cfc-free inhaler 200 micrograms/actuation** ONE PUFF TO BE INHALED TWICE A DAY 200 DOSE	12/12/2024P	Dr Dimitar Nechev	ACUTE
12/12/2024	**Easychamber Spacer device** TO BE USED AS DIRECTED 1 device	12/12/2024P	Dr Dimitar Nechev	ACUTE
21/08/2024	**Clotrimazole Pessary 500 mg** ONE TO BE INSERTED AT NIGHT 1 PESSARY	21/08/2024P	Dr Dimitar Nechev	ACUTE
14/08/2024	**Betamethasone Valerate Scalp application 0.1 %** APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE [redacted] 100 ML	14/08/2024P	Dr Dimitar Nechev	ACUTE
14/08/2024	**Adapalene And Benzoyl Peroxide Gel 0.1 % + 2.5 %** APPLY THINLY AT NIGHT 45 gram	14/08/2024P	Dr Dimitar Nechev	ACUTE
31/07/2024	**Depo-Provera Prefilled syringe 150 mg/1 ml** TO BE USED AS DIRECTED 1 PRE-FILLED DISPOSABLE INJECTION	31/07/2024P	Dr Dimitar Nechev	ACUTE
31/07/2024	**Quetiapine Fumarate Tablets 25 mg** REDUCE BY 25MG EACH WEEK UNTIL STOPPED. 70 TABLET	27/08/2025P	Dr Dimitar Nechev	ACUTE
31/07/2024	**Bisacodyl Suppositories 5 mg** 1-2 AT NIGHT 30 suppository	06/08/2024P	Dr [redacted] McLaughlin	ACUTE
26/02/2025	**Montelukast Sodium Tablets 10 mg** ONE TO BE TAKEN IN THE EVENING 28 tablet	26/03/2025P	Dr Dimitar Nechev	REPEAT
31/07/2024	**Amitriptyline Hydrochloride Tablets 10 mg** ONE TO BE TAKEN IN THE EVENING 56 TABLET	12/08/2024P	Dr Dimitar Nechev	REPEAT
31/07/2024	**Quetiapine Fumarate Tablets 150 mg** 1 Tab At night 56 tablet	24/07/2025P	Dr Dimitar Nechev	REPEAT

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Lab Report ID : B,24.8026867.R **Coding Status** : Part Read Coded
Filed By User : Ms Amy McDonald **File Status** : Filed
Assigned to : **Task Status** : No Tasks

Patient Details : (12751) Georgina Smith DOB : 04/12/1991 CHI : 0412913127 SEX : F
ADR : 6 Mains Avenue BEITH

Report Text :

-3 month TFTs for 1 year

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R Thyroid funct test					
TSH		1.26	mU/L	(0.35-5.00 U)	NK
Free T4		13.2	pmol/L	(9.0-21.0 U)	NK
Total T3					NK

Sample Collected Date : 22/10/2024 09:39:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 22/10/2024 11:57:00
Received Date : 22/10/2024 15:01:05
Requestor :
Requestor GMC Code :

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Lab Report ID : B,24.8226032.J **Coding Status** : Part Read Coded
Filed By User : Miss Orla McAuley **File Status** : Filed
Assigned to : **Task Status** : No Tasks

Patient Details : (12751) Georgina Smith DOB : 04/12/1991 CHI : 0412913127 SEX : F
ADR : 6 Mains Avenue BEITH

**** ABNORMAL ****

Report Text :

-Cough for 5 weeks. Mostly...
-Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except Sickle Cell Screening

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R Full Blood Count	Y				
White Blood Count		9.6	x10^9/l	(4.0-10.0 U)	NK
Red Cell Count		4.79	x10^12/l	(3.80-5.80 U)	NK
Haemoglobin		145	g/l	(115-165 U)	NK
Haematocrit		0.439	l/l	(0.370-0.470 U)	NK
Mean Cell Volume		91.6	fl	(83.0-101.0 U)	NK
MCH		30.3	pg	(27.0-32.0 U)	NK
Platelet Count		334	x10^9/l	(150-410 U)	NK
Neutrophils		5.7	x10^9/l	(2.0-7.0 U)	NK
Lymphocytes		2.7	x10^9/l	(1.1-5.0 U)	NK
Monocytes		0.6	x10^9/l	(0.2-1.0 U)	NK
Eosinophils	*	0.53	x10^9/l	(0.02-0.50 U)	NK
Basophils		0.1	x10^9/l	(0.0-0.1 U)	NK
Nucleated RBC		0	x10^9/l		NK
R GFST					
Glan. Fever Scr Test		Neg			NK
R Blood Film					
-Unremarkable blood film					
Blood Film		Yes			NK

Sample Collected Date : 12/12/2024 11:26:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 12/12/2024 16:35:00
Received Date : 12/12/2024 19:01:17
Requestor :
Requestor GMC Code :

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Lab Report ID : B,24.8219952.J **Coding Status** : Part Read Coded
Filed By User : Miss Orla McAuley **File Status** : Filed
Assigned to : **Task Status** : No Tasks

Patient Details : (12751) Georgina Smith DOB : 04/12/1991 CHI : 0412913127 SEX : F
ADR : 6 Mains Avenue BEITH

Report Text :

-Cough for 5 weeks. Mostly...

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R C-reactive Protein					
C Reactive Protein		4	mg/L	(0-10 U)	NK

Sample Collected Date : 12/12/2024 11:26:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 12/12/2024 16:22:00
Received Date : 12/12/2024 19:01:59
Requestor :
Requestor GMC Code :

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Lab Report ID : B,25.7111917.2 **Coding Status** : Part Read Coded
Filed By User : Miss Orla McAuley **File Status** : Filed
Assigned to : **Task Status** : No Tasks

Patient Details : (12751) Georgina Smith DOB : 04/12/1991 CHI : 0412913127 SEX : F

ADR : 6 Mains Avenue BEITH

Report Text :

-3/12 for 1 year

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R Thyroid funct test					
TSH		1.20	mU/L	(0.35-5.00 U)	NK
Free T4		12.3	pmol/L	(9.0-21.0 U)	NK
Total T3					NK

Sample Collected Date : 04/02/2025 09:32:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 04/02/2025 12:07:00
Received Date : 04/02/2025 15:00:58
Requestor :
Requestor GMC Code :

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Lab Report ID : B,25.7313432.E
Filed By User : Miss Lindsey [redacted]
Assigned to :

Coding Status : Part Read Coded
File Status : Filed
Task Status : No Tasks

Patient Details : (12751) Georgina Smith DOB : 04/12/1991 CHI : 0412913127 SEX : F
ADR : 6 Mains Avenue REITH

**** ABNORMAL ****

Report Text :

-Asthma. On ICS. Monitor E...
-Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except Sickle Cell Screening

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R Full Blood Count	Y				
White Blood Count		9.8	x10^9/l	(4.0-10.0 U)	NK
Red Cell Count		4.86	x10^12/l	(3.80-5.80 U)	NK
Haemoglobin		141	g/l	(115-165 U)	NK
Haematocrit		0.430	l/l	(0.370-0.470 U)	NK
Mean Cell Volume		88.5	fl	(83.0-101.0 U)	NK
MCH		29.0	pg	(27.0-32.0 U)	NK
Platelet Count		330	x10^9/l	(150-410 U)	NK
Neutrophils		5.4	x10^9/l	(2.0-7.0 U)	NK
Lymphocytes		2.8	x10^9/l	(1.1-5.0 U)	NK
Monocytes		0.9	x10^9/l	(0.2-1.0 U)	NK
Eosinophils	*	0.62	x10^9/l	(0.02-0.50 U)	NK
Basophils		0.1	x10^9/l	(0.0-0.1 U)	NK
Nucleated RBC		0	x10^9/l		NK

Sample Collected Date : 25/03/2025 09:29:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 25/03/2025 11:58:00
Received Date : 25/03/2025 15:01:07
Requestor :
Requestor GMC Code :

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Lab Report ID : B,25.3512963.S **Coding Status** : Part Read Coded
Filed By User : Miss Orla McAuley **File Status** : Filed
Assigned to : **Task Status** : No Tasks

Patient Details : (12751) Georgina Smith DOB : 04/12/1991 CHI : 0412913127 SEX : F
ADR : 6 Mains Avenue BEITH

Report Text :
-Asthma. On ICS. Monitor E...

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R I Allergy IgE Ranges					
-INDIVIDUAL RESULT(S) TO FOLLOW WHEN TESTING COMPLETED.					
-Grade 0=<0.35 (negative)					
-Grade 1=0.35-0.70 (wk pos) Grade 2=0.70-3.50 (pos)					
-Grade 3=3.50-17.5 (pos) Grade 4=17.5-52.5 (strong pos)					
-Grade 5=52.5-100 (strong pos) Grade 6=>100 (strong pos)					
-Result must be interpreted in context of history.					
-Negative results do not exclude allergy.					
-Positive results may be found without clinical					
-reactions, especially in atopic individuals.					
-The sensitivity varies between allergens.					
Interpretation Guide		See comment			NK
R I Total IgE					
-Amended age-related references ranges are in use from 11/10/2023					
Total IgE		3	kU/L	(<<80 U)	NK
R I Dog (e5)					
Dog (e5)		< 0.35	kU/L	(<<0.35 U)	NK

Sample Collected Date : 25/03/2025 09:29:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 26/03/2025 10:51:00
Received Date : 11/04/2025 15:00:12
Requestor :
Requestor GMC Code :

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Lab Report ID : B,25.7618254.8 **Coding Status** : Part Read Coded
Filed By User : Miss Hannah Rawson **File Status** : Filed
Assigned to : **Task Status** : No Tasks

Patient Details : (12751) Georgina Smith DOB : 04/12/1991 CHI : 0412913127 SEX : F
ADR : 6 Mains Avenue BEITH

Report Text :
-3/12 for 1 year

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R Thyroid funct test					
TSH		0.99	mU/L	(0.35-5.00 U)	NK
Free T4		12.7	pmol/L	(9.0-21.0 U)	NK
Total T3					NK

Sample Collected Date : 17/06/2025 08:39:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 17/06/2025 12:02:00
Received Date : 17/06/2025 15:01:04
Requestor :
Requestor GMC Code :

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Hospital use only	Clinic	Day Date	Time	Hospital No.

Transport required?

Unique Care Pathway Number: 1010344997426

REFERRAL LETTER

MEDICAL IN CONFIDENCE

CHI:0412913127

REFERRAL TO

Community Mental Health Services - North GIAD
AA Adult Mental Health

Community Mental Health Services - Adult
NHS Ayrshire &[redacted]

Ethnic Origin	(White) Scottish
Language interpreter req'd	-
Religion	-
Religious Observance	-
Vision impairment	-
Hearing impairment	-
Sign language interpreter req'd.	-

Urgency of referral	Routine
Date of referral	16-Oct-2024
Date submitted	16-Oct-2024

PATIENT DETAILS

Surname	Smith
Forename(s)	Georgina
Title	-
Sex	Female
Date of birth	04-Dec-1991
CHI no.	0412913127

Patient's address

21 Meadowside
Beith
KA15 1BU

Contact number(s)

-

REGISTERED GP DETAILS

Name	Dr Dimitar Nechev		
GMC code	6110055	GP code	37966
Practice name	Mistylaw Medical Practice (19008)		
Practice code	87432		

Practice address

MISTYLAW MEDICAL PRACTICE
5 Mains Road
Beith
KA15 2AF

Contact number(s)

Voice: 01505 502 344
Facsimile: 01505 504 712

REFERRING PRACTITIONER DETAILS

Name	Dr. Dimitar Nechev		
GMC code	6110055	GP code	37966
Practice name	Mistylaw Medical Practice (87432)		
Practice code	87432		

Practice address

31 Main Street
Lochwinnoch
PA12 4AH

Contact number(s)

Voice: 01505 842200

CLINICAL INFORMATION

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History of presenting complaint / examination findings / investigation results

Presenting complaint

Description: Obsessive Compulsive Behaviour

Comment: Dear Colleagues,

Thank you for seeing this 32 year old lady who is new to the Practice. She was in Cornton Vale for 11 years for culpable homicide. She does have a history of physical, [redacted] and emotional abuse by [redacted] and [redacted] I enclose what we have on her. She presented to my colleague a couple of weeks ago as her [redacted] had asked her to make an appointment due to her compulsive cleaning. She has been cleaning excessively since prison and I think she also did it while in prison. For example, if she spills a cup of tea, she won't just mop it up, she will clean the whole house. Her house is cleaned [redacted] and she goes through several bottles of neat bleach a week. She used to be the same with her personal hygiene, but now showers twice a day and assures me that she does not scrub at her skin excessively. She used to use washing powder for her hair but now uses normal shampoo. My colleague had suggested diluting the bleach. However she came to update me today to say that she has been unable to do this. The skin on her hands seem to be normal as I did expect to see some redness. However she did say that the bleach catches her throat. She goes shopping with her [redacted] and she was positive about the suggestion that her [redacted] does the purchasing and looks for something like a Dettol spray as opposed to neat bleach. Georgina thought this was a good idea and is willing to try it. She attends a group twice a week with her [redacted] On the other days, she tends to sit in her house. She used to be keen on exercise and I have encouraged her to go out walking or jogging so that she has something to occupy herself. She will discuss with her [redacted] any exercise classes in the area. She feels her excessive cleaning bothers other people more than it does her. However she is keen to consider a referral to yourselves in the hopethat you can offer her some help.

We don't have a lot of notes on Georgina and I have enclosed what we do have which gives a bit more of her background.

Thank you for your help.

Yours sincerely,

Dr A [redacted]
Locum GP

Examinations and Investigations

If referral is urgent, has this been discussed with duty clinician:	No	-
1. Are there current active thoughts of self harm, is there a plan?:	No	-
Is there a History of [redacted] or self [redacted] injurious behaviours?:	Unknown	-
Any history or current threat of violence or aggression, considerations to staff safety?:	Yes	-
History of violence or aggression/staff safety [redacted] comments:	Please see text	-
Any social circumstances or previous psychiatric history impacting on current presentation?:	Yes	-
Considerations of vulnerability /Child Protection Issues/ First presentation Psychosis/ Peri-Natal:	No	-
Height:	166	-
Weight(kg):	74	-
BMI:	26.85	-
Cigarette smoker, 6 Cigarettes/day:		01-Aug-2024 00:00
Teetotaller:		01-Aug-2024 00:00
Takes inadequate exercise:		01-Aug-2024 00:00

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

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Past medical history
Pre-existing conditions

Description	Laterality	Modifier	Extension	Date of onset	Recorded Date
Obsessive-compulsive disorders	-	-	-	15-Oct-2024	15-Oct-2024
Hay fever - pollens	-	-	-	14-Aug-2024	14-Aug-2024
Chronic pain	-	-	Back pain. Sciatica. Carpal tunnel syndome	14-Aug-2024	14-Aug-2024
Scalp psoriasis	-	-	-	14-Aug-2024	14-Aug-2024
Headache	-	-	-	[redacted] 2024	14-Aug-2024
Dyspepsia	-	-	-	14-Aug-2024	14-Aug-2024
Thyroiditis	-	-	To have rpt TFT's at 3 month intervals for next year.	03-Nov-2023	03-Nov-2023
[X]Alcohol addiction	-	-	attended therapy while in prison	09-Apr-2014	09-Apr-2014
Personality disorder NOS	-	-	-	19-Mar-2014	19-Mar-2014
Asthma unspecified	-	-	-	30-Dec-1899	30-Dec-1899
Cystic breast	-	-	-	30-Dec-1899	30-Dec-1899
Anxiety with depression	-	-	-	30-Dec-1899	30-Dec-1899
[X]Eating disorders	-	-	-	30-Dec-1899	30-Dec-1899
Gluten intolerance	-	-	-	30-Dec-1899	30-Dec-1899

Past procedures

Description	Laterality	Modifier	Comments	Date performed	Recorded Date
Drug addiction therapy	-	-	attended therapy while in prison	08-Apr-2014	08-Apr-2014
Cholecystectomy NEC	-	-	-	30-Dec-1899	30-Dec-1899

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

Drug name	BNF code	Formulation	Dosage	Frequency	Course started	Duration	Last Prescribed Date
Bisacodyl E/c tablets 5 mg	0106020C0AAAAAA	112 tablet	TAKE TWO TABLETS AT NIGHT	-	24-Sep-2024	-	02-Oct-2024
Amitriptyline Hydrochloride Tablets 50 mg	0403010B0AAAIAI	56 TABLET	ONE TO BE TAKEN IN THE EVENING	-	14-Aug-2024	-	02-Oct-2024
Pizotifen Tablets 1.5 mg	0407042Q0AAACAC	56 TABLET	ONE TO BE TAKEN AT NIGHT	-	31-Jul-2024	-	02-Oct-2024
Etodolac M/R tablets 600 mg	1001010E0AAADAD	56 TABLET	ONE TO BE TAKEN EACH DAY	-	[redacted]	-	02-Oct-2024
Peppermint Oil E/c capsules 0.2 ml	0102000T0AAAAAA	84 capsule	ONE TO BE TAKEN THREE TIMES A DAY BEFORE FOOD	-	31-Jul-2024	-	02-Oct-2024
Famotidine Tablets 40 mg	0103010H0AAABAB	56 TABLET	ONE TO BE TAKEN EACH DAY	-	31-Jul-2024	-	02-Oct-2024
Fexofenadine Hydrochloride Tablets 120 mg	0304010E0AAAAAA	56 tablet	1 Tab Daily	-	31-Jul-2024	-	02-Oct-2024
Quetiapine Fumarate Tablets 150 mg	-	56 tablet	1 Tab At night	-	31-Jul-2024	-	02-Oct-2024
Quetiapine Fumarate Tablets 25 mg	0402010ABAAABAB	56 tablet	1 Tab At night	-	31-Jul-2024	-	02-Oct-2024

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

Drug name	BNF code	Formulation	Dosage	Frequency	Course started	Duration	Last Prescribed Date
Clotrimazole Pessary 500 mg	0702020F0AAAFAF	1 PESSARY	ONE TO BE INSERTED AT NIGHT	-	21-Aug-2024	1 Days	21-Aug-2024
Betamethasone Valerate Scalp application 0.1 %	1304000F0AABDBD	100 Ml	APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE [redacted]	-	14-Aug-2024	42 Days	14-Aug-2024
Adapalene And Benzoyl Peroxide Gel 0.1 % + 2.5 %	-	45 gram	APPLY THINLY AT NIGHT	-	14-Aug-2024	42 Days	14-Aug-2024
Depo-Provera Prefilled syringe 150 mg/1 ml	0703022M0BBABAB	1 PRE-FILLED DISPOSABLE INJECTION	TO BE USED AS DIRECTED	-	31-Jul-2024	42 Days	31-Jul-2024
Bisacodyl Suppositories 5 mg	0106020C0AAADAD	30 suppository	1-2 AT NIGHT	-	31-Jul-2024	48 Days	06-Aug-2024
Amitriptyline Hydrochloride Tablets 10 mg	0403010B0AAAGAG	56 TABLET	ONE TO BE TAKEN IN THE EVENING	-	31-Jul-2024	.	12-Aug-2024

Clinical warnings

Lifestyle risks

Exercise status: Not Known

Smoking status: Number per day ? (not known)

Alcohol consumption: Units per day ? (not known)

Intolerances

Description	Comment	Recorded Date
Lactose intolerance	-	30-Dec-1899

Additional relevant information

Administrative information

Referred By:Registered GP

Social circumstances

Signature of referring doctor (or other professional)

Date

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End of Document. Total Pages (including this one): 39

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Pages:

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✓ Seen On comp 16/1 SJM

APPLICATION TO REGISTER PERMANENTLY WITH A GENERAL MEDICAL PRACTICE
ALL FIELDS MARKED * ARE MANDATORY AND MUST BE COMPLETED AS FULLY AS POSSIBLE

NHS SCOTLAND

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 * 04/12/1991
Title * Miss
Surname * Smith
Forenames * Georgina
Previous surname * McMillan

Address * 11 Abercromby Place
East Kilbride

Postcode * G74 3DF
Telephone # N/A
Mobile # 07831361242
Email address # Georgina.Smith962@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 * 0412913127
NHS number *

The following information can be found on your birth certificate.

Town of birth * Ardrossan, ayrshire
Country of birth * Scotland
Registered district of [redacted] *(Scotland only)*
Mother's maiden name * Smith

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 *
6 Mains Avenue, beith,
North ayrshire, Scotland
Postcode * KA15 2AT

Name and address of previous GP Practice in UK *
mistylaw medical Practice
5 Mains Road, beith,
North ayrshire, Scotland
Postcode * [redacted] 2AF

If you are from abroad:

Date you first came to live in the UK *
Your most recent country of residence
If previously resident in the UK, [redacted] of leaving *

If you have served in the British Armed Forces:

Enlistment date *
Are you a Reservist? Yes ☐ No ☐
Leaving date *
Service Number
If yes provide your address before enlisting *
Postcode *

Is this your first registration with a GP since leaving the armed forces? Yes ☐ No ☐

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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 NHSScotland 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: G. Smith

Date *: 08/01/2026

Representative's name (if applicable): Georgina Smith

Relationship to patient (if applicable):

6. FOR PRACTICE USE

GP reference number:

Practice code:

GP name:

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 ☑ AML Home Office ☐ app reg [redacted] Other / None

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 [redacted] Verification.

Authorised Practice signature:

Date *:

7. FOR OFFICIAL USE ONLY

Input by:

Checked by:

Date:

Practice stamp:

GMSGPR001 V27.1 2021

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NHS Confidential: [redacted] data about a patient

Kittoch Medical Practice

Hunter Health Centre
Andrew Street
East Kilbride
Glasgow G74 1AD

Dr Brendan Cunning
Dr Gillian Malcolm
Dr Lewis Jackson
Dr Laura Greenwood
Dr Simon Murphy
Dr Marisa Jackson
Dr Colin Wilson

Telephone - 01355 271080
Website - www.kittochmedicalpractice.co.uk

NEW PATIENT QUESTIONNAIRE
Please complete in full

Today's Date 08 / 01 / 2026

FULL NAME	Georgina Smith	Mr/Mrs/Mx etc: Miss Gender: Male/Female/Other:
Date of Birth	04/12/1991	
ADDRESS	11 Abercromby Place, east Kilbride	
POST CODE	G74 3DF	
Home & mob telephone numbers	HOME: N/A	MOB: 07831361242
	DO YOU CONSENT FOR US TO CONTACT YOU BY SMS MESSAGE TO REMIND YOU ABOUT APPOINTMENTS AND TO INFORM YOU OF ANY OTHER RELEVANT MEDICAL INFORMATION Please circle (YES) NO	
Ethnicity (see attached form)	White	
Please state your preferred language	Scottish	
Do you require an interpreter	Please circle YES (NO)	
[redacted] name telephone number	Karen Black 07557422503	

Height: _____ Weight _____ BP ____/____

Do you smoke? YES / NO / (EX) If yes, how many per day? _____

Now vape.

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NHS Confidential: [redacted] data about a patient

Kittoch Medical Practice

Hunter Health Centre
Andrew Street
East Kilbride
Glasgow G74 1AD

Dr [redacted] Cunning
Dr Gillian Malcolm
Dr Lewis [redacted]
Dr Laura [redacted]
Dr Simon [redacted]
Dr Marisa [redacted]
Dr Colin Wilson

Telephone - 01355 271080
Website - www.kittochmedicalpractice.co.uk

Please see over /

Do you drink alcohol? YES / NO / (EX) If yes, how many units per week? _____

Are you a [redacted] YES / (NO)

Do you have any allergies? Celiac, gluten, lactal, hay fever

Do you have any existing medical conditions? Yes

Name, Address of previous GP 5 mains Road, beith, North ayrshire KA15 2AF

Telephone Number of previous GP 01505 502344

IMPORTANT INFORMATION - PLEASE [redacted] BEFORE SIGNING

Please bring a list of any current repeat medication to your initial appointment with the Practice Nurse or GP

Failure to attend an initial appointment without informing us will mean you are no longer eligible to register with us. Failing to attend thereafter without informing us beforehand may mean you will be asked to register with another GP practice.

If you need to cancel, you will find our telephone number at the top of the page.

Patient or patient representative signature G Smithx

Date 08/01/2025

For Practice use only

Information checked by _____ Date _____

Consent Code for text messaging to be added to patient notes.
#9NdQ.00 – decline
#9NdP.00 – accept

If 'accept' add mobile number to contact for patient
If 'decline' add mobile number to contact for current address
If patient is a carer, add code #918A

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Registration Details - Patient No: 12751

Personal details...		Address details...	
Date of birth	04/12/1991	Post Code	KA15 2AT
Sex	F	House Name Flat No	
Surname	Smith	No and Street	6 Mains Avenue
Previous Surname	[redacted]	Village	
Forenames	[redacted]	Town	BEITH
Calling Name	Mrs	County	
Title			
Birth Surname			
Marital Status	Single		
Ethnic Origin	(White) Scottish		

HA/HB Details...		Contact details...	
Trading partner	Ayrshire & Arran	Home Tel No	
Registered GP	Dr Dimitar Nechev	Work Tel No	
Usual GP	Dr Dimitar Nechev	Mobile Tel No	07831 361 242
Residential Inst		E Mail Address	[redacted]
Branch Surgery	Mistylaw Medical Practice Beith	Next of Kin - name	
CHI Number	0412913127	Next of Kin - relationship	
NHS Number		Next of Kin - contact no	[redacted]
Other Contact			
Other Contact Tel No.			
Consent contact via Text Message			
Consent to Contact via Email			

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	28/03/2025		

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

Drug Allergies		Authorised By	Code
Not Known	Lactose intolerance	Nurse Patrick	C3131
Not Known	Gluten intolerance	Nurse Patrick	J690-8

Non Drug Allergies	Authorised By	Code
None		

Immunisations	Authorised By	Code
None		

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Medication

Current Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
04/11/2025	**Pregabalin Capsules 25 mg** ONE TO BE TAKEN TWICE DAILY (TDD 175MG BD) 1*56 capsule	07/01/2026P	Dr Dimitar Nechev	ACUTE
10/10/2025	**Pregabalin Capsules 150 mg** ONE TO BE TAKEN TWICE A DAY (TDD 175MG) 1*56 capsule	07/01/2026P	Dr Dimitar Nechev	ACUTE
26/03/2025	**Luforbec Inhaler 100 micrograms + 6 micrograms/dose** ONE PUFF TO BE INHALED TWICE DAILY, ONE PUFF AS REWUIRED FOR RELIF OF SYMPTOMS. MAX 8 PUFFS IN 24 HOURS 120 dose	09/12/2025P	Dr Dimitar Nechev	REPEAT
24/09/2024	**Bisacodyl E/c [redacted] 5 mg T[redacted]** TABLETS AT NIGHT 112 tab[redacted]	20/05/2025P	Dr Dimitar Nechev	REPEAT
14/08/2024	**Amitriptyline Hydrochloride Tablets 50 mg** ONE TO BE TAKEN IN THE EVENING 56 TABLET	09/12/2025P	Dr Dimitar Nechev	REPEAT
31/07/2024	**Etodolac M/R tablets 600 mg** ONE TO BE TAKEN EACH DAY 56 TABLET	09/12/2025P	Dr Dimitar Nechev	REPEAT
31/07/2024	**Peppermint Oil E/c capsules 0.2 ml** ONE TO BE TAKEN THREE TIMES A DAY BEFORE FOOD 84 capsule	09/12/2025P	Dr Dimitar Nechev	REPEAT
31/07/2024	**Pizotifen Tablets 1.5 mg** ONE TO BE TAKEN AT NIGHT 56 TABLET	09/12/2025P	Dr Dimitar Nechev	REPEAT
31/07/2024	**Famotidine Tablets 40 mg** ONE TO BE TAKEN EACH DAY 56 TABLET	09/12/2025P	Dr Dimitar Nechev	REPEAT
31/07/2024	**Fexofenadine Hydrochloride Tablets 120 mg** 1 Tab Daily 56 tablet	09/12/2025P	Dr Dimitar Nechev	REPEAT

Past Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
06/10/2025	**Pregabalin Capsules 50 mg** THREE TO BE TAKEN TWICE DAILY 168 CAPSULE	06/10/2025P	Dr Iain Savage	ACUTE
18/09/2025	**Pregabalin Capsules 25 mg** ONE TO BE TAKEN TWICE DAILY (TDD 175MG BD) 1*56 capsule	06/10/2025P	Dr Iain Savage	ACUTE
26/08/2025	**Pregabalin Capsules 50 mg** THREE TO BE TAKEN TWICE DAILY 168 CAPSULE	[redacted]	Dimitar Nechev	ACUTE
20/05/2025	**Fluoxetine Hydrochloride Capsules 20 mg** ONE TO BE TAKEN EACH DAY 28 capsule	20/05/2025P	Dr Tracy McLaughlin	ACUTE
31/03/2025	**Depo-Provera Prefilled syringe 150 mg/1 ml** TO BE USED AS DIRECTED 1 PRE-FILLED DISPOSABLE INJECTION	31/03/2025P	Dr Iain Savage	ACUTE
31/03/2025	**Clenil Modulite Cfc-free inhaler 200 micrograms/actuation** ONE PUFF TO BE INHALED TWICE A DAY 200 DOSE	31/03/2025P	Dr Iain [redacted]	ACUTE
25/03/2025	**Luforbec Inhaler 100 micrograms + 6 micrograms/dose** ONE PUFF TO BE INHALED TWICE A DAY, 1 PUFF AS REQUIRED FOR RELIEF OF SYMPTOMS. MAX 8 PUFFS IN 24 HOURS 120 dose	25/03/2025P	Dr Tracy McLaughlin	ACUTE
26/02/2025	**Paracetamol Tablets 500 mg** TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS) 200 tablet	26/02/2025P	Dr Dimitar Nechev	ACUTE
30/12/2024	**Luforbec Inhaler 100 micrograms + 6 micrograms/dose** ONE PUFF TO BE INHALED TWICE A DAY, 1 PUFF AS REQUIRED FOR RELIEF OF SYMPTOMS. MAX 8 PUFFS IN 24 HOURS 120 dose	30/12/2024P	Dr Dimitar Nechev	ACUTE
12/12/2024	**Clenil Modulite Cfc-free inhaler 200 micrograms/actuation** ONE PUFF TO BE INHALED TWICE A DAY 200 DOSE	12/12/2024P	Dr Dimitar Nechev	ACUTE
12/12/2024	**Easychamber Spacer device** TO BE USED AS DIRECTED 1 device	12/12/2024P	Dr Dimitar Nechev	ACUTE
21/08/2024	**Clotrimazole Pessary 500 mg** ONE TO BE INSERTED AT NIGHT 1 PESSARY	21/08/2024P	Dr Dimitar Nechev	ACUTE
14/08/2024	**Betamethasone Valerate Scalp application 0.1 %** APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE DAILY [redacted]	14/08/2024P	Dr Dimitar Nechev	ACUTE
14/08/2024	**Adapalene And Benzoyl Peroxide Gel 0.1 % + 2.5 %** APPLY THINLY AT NIGHT 45 gram	14/08/2024P	Dr Dimitar Nechev	ACUTE
31/07/2024	**Depo-Provera Prefilled syringe 150 mg/1 ml** TO BE USED AS DIRECTED 1 PRE-FILLED DISPOSABLE INJECTION	31/07/2024P	Dr Dimitar Nechev	ACUTE
31/07/2024	**Quetiapine Fumarate Tablets 25 mg** REDUCE BY 25MG EACH WEEK UNTIL STOPPED. 70 TABLET	27/08/2025P	Dr Dimitar Nechev	ACUTE
31/07/2024	**Bisacodyl Suppositories 5 mg** 1-2 AT NIGHT 30 suppository	06/08/2024P	Dr Tracy McLaughlin	ACUTE
26/02/2025	**Montelukast Sodium Tablets 10 mg** ONE TO BE TAKEN IN THE EVENING 28 tablet	26/03/2025P	Dr Dimitar Nechev	REPEAT

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[redacted]

31/07/2024	Amitriptyline Hydrochloride Tablets 10 mg ONE TO BE TAKEN IN THE EVENING 56 TABLET	12/08/2024P	Dr Dimitar Nechev	REPEAT
31/07/2024	Quetiapine Fumarate Tablets 150 mg 1 Tab At night 56 tablet	24/07/2025P	Dr Dimitar Nechev	REPEAT

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Pages:

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Connect to Community

Kittoch Medical Practice
[redacted] Street
East Kilbride
G74 1AD

Re. Georgina Smith, 11 Abercrombie Place, East Kilbride, G74 3DF

DOB: 04/12/1991

Ms Smith has a signed mandate allowing me to reach out to the GP currently dealing with her medical case which she will hand in along with this letter at her next appointment.

My name is Mhairi Phillipson and I am an Advocacy Worker with [redacted] Trust and part of their Connect to Community project. Ms Smith was referred to our service before leaving prison and has been working with us for a number of years.

I am writing to you today to help communicate some of the medical issues she has been having recently.

Firstly, she is concerned that given the complexity of her medical history and the fact her notes have covered various institutions in the prison estate as well as other health authorities that her current GP surgery has not been able to [redacted] through them all or indeed received them all.

Secondly, given her previous medical history Ms Smith would like to be referred to the following:

- Psychiatry – Ms Simth has a long history of diagnosed mental illness and prescription of anti-psychotic medication.
- Community Mental Health – given her complex mental health history she understands that she needs support from Community Mental Health to help her on her desistance journey and to function within the community.
- Dermatology/Gynaecology – Ms Smith suffers from 'overgrown' labia which causes her severe discomfort and infections. Under her previous health authority, a referral had been made (she is not sure to which department) for this to be investigated.

Finally, a number of Ms Smith's prescription medications have always been available for her to get on repeat prescription and she does not seem to be able to do this currently with your practice. She would be grateful if this could be arranged for her.

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If you wish to ask me anything further, or indeed if Ms Smith is struggling to communicate her issues to you. Please feel free to contact me on 07458 016967 or by email MhairiPhillipson@bethanychristiantrust.com.

Yours Faithfully

Mhairi Phillipson
Connect to Community – Referrals, Advocacy and Communication Worker

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NHS Confidential: Personal data about a patient

7th May 2026

Kittoch Medical Practice
[redacted] Street
East Kilbride
G74 1AD

To whom it may concern

Re. Georgina Smith, 11 Abercrombie Place, East Kilbride, G74 3DF DOB: 04/12/1991

This is a signed mandate to give Gillian Falconer, Resettlement Worker (main support worker) or Mhairi Phillipson, Referrals, Advocacy & Communication Worker the authority to act on my behalf as appointed by me in matters pertaining to My dealings with access to medical services with my GP practice. They can speak on my behalf to obtain, release or discuss any matters relating to my medical needs, prescriptions and medical referrals.

They can be contacted on the following numbers

Gillian Falconer 07823 412953

Mhairi Phillipson 07458 016967

Or both on 0141 766 0167 or at the following email address: c2c@bethanychristiantrust.com

Yours faithfully

G. Smithx

Georgina Smith

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