

**NHS Confidential: Personal data about a patient**



Nikki Patterson  
Community Mental Health Nurse  
Central Healthcare Team  
79 South Street  
Perth  
PH2 8PD

**Private and Confidential**  
**Culley & McAlpine**  
**40-42 South Street**  
**Perth**  
**PH2 8PD**

Date 15. 03.11  
Our Ref NP/CH  
Enquiries to Nikki Patterson  
Direct Line 07740937722  
Email npatterson1@nhs.net

To whom it may concern,

RE. Yvonne Jamieson  
C/O Greyfriars House  
55 Princess street  
Perth  
PH2 8LJ

I was contacted by you asking for information regarding Yvonne's mental health, stability and co-operation with myself in relation to getting her son back. As a Community Mental Health Nurse I have been seeing Yvonne since 3<sup>rd</sup> February 11, at this time I found her mood to be quite low understandably due to personal circumstances including her past situation and her current living conditions. Since this time she has been concordant with treatment including medication and mental health monitoring by myself. I have found that her mental health has improved over the last few weeks. As I have only known Yvonne for a number of weeks and have no previous medical notes to consult, I am unable to comment further on this case.

Yours sincerely

Nikki Patterson  
Community Mental Health Nurse  
Central Health Care  
79 South Street  
Perth  
PH2 8PD

Headquarters  
King's Cross, Clepington Road, Dundee DD3 8EA

Chairperson, Mr Alexander Watson OBE DL  
Chief Executive, Professor Tony Wells

Central Healthcare is a nurse-led service, supported by a GP, which aims to meet the health needs of vulnerable individuals and families in the Perth and Kinross area

# NHS Confidential: Personal data about a patient

## Generic Mental Health Assessment

Hospital and Ward: CHC Team: CMHT

<b>NHS Tayside Admission &amp; Discharge Integrated Care Pathway (ICP)</b>	Patient CHI: <u>100382</u>
	Patient Name: <u>YVONNE JAMIESON</u>
	Patient Address: <u>WAVERLY HOSTEL</u>
	GP Name: _____

(or affix patient label)

Presenting Complaint (**Complete Variance 1**): e.g. Low mood; Insomnia; Agitation; Suicidal Ideation; DSH; Delusions; Hallucinations

Low mood, Insomnia

Is the patient to be admitted to the Ward? Yes  No  Not Applicable

Record alternatives to admission which were identified and the reasons for unsuitability for this episode of care (**Complete Variance 2**):

Record reason for admission (**Complete Variance 3**):

Date & Time:		Date & Time:	<u>01/02/11</u>
Print Name:		Print Name:	<u>N. PATTERSON</u>
Signature:		Signature:	<u>[Signature]</u>
Designation		Designation:	<u>CMHN</u>

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**Generic Mental Health Assessment**

Patient Name: YVONNE JAMIESON  
 Hospital and Ward: CHC

Patient CHI: 100382  
 Team: CMHN

**History of Presenting Complaint:**

e.g. Check for all 10 depressive symptoms; specificity of suicidal ideation and suicidal intent of DSH. Associated anxiety disorder, psychotic symptoms etc; ask about precipitants

Yvonne is a 28 year old woman who was referred to myself by Lucille Ironside our community nurse. She states that she has suffered low mood and depressive symptoms for several years since she was a teenager. She feels persistently sad, anxious and has feeling of guilt and worthlessness. She states that she has poor concentration and suffers from insomnia.

Date & Time:		Date & Time:	1/2/11
Print Name:		Print Name:	N. PATTERSON
Signature:		Signature:	<i>N. Patterson</i>
Designation		Designation:	CMHN

**NHS Confidential: Personal data about a patient**

**Generic Mental Health Assessment**

Patient Name: YVONNE JAMIESON  
 Hospital and Ward: CHC

Patient CHI: 100382  
 Team: CMHN

**Past Psychiatric History:** Consult previous psychiatric notes/records: Yes  No

The context e.g. previous depressive episodes; DSH/Suicide attempts; psychotic episodes; Admissions & Treatments

*States she has had depressive symptoms since she was a teenager. Has been on Citalopram for 6m however does not think it is doing.*

**Medication & Treatment History:** current medication (dosage/duration/effect/side-effects); previous medication and why it was changed

*- Has tried anti-depressants before but can't remember what as it was a few years ago. Is currently on Citalopram 20mg.*

*Also states she was in Murray Royal Hospital for about a week after she tried to choke herself with a dressing gown cord.*

Date & Time:	<u>1/2/11</u>	Date & Time:	
Print Name:	<u>N. DATTEKSON</u>	Print Name:	
Signature:	<i>N. Dattekson</i>	Signature:	
Designation:	<u>CMHN</u>	Designation:	

# NHS Confidential: Personal data about a patient

## Generic Mental Health Assessment

Patient Name: Yvonne Jamieson

Patient CHI: \_\_\_\_\_

Hospital and Ward: CHS

Team: \_\_\_\_\_

**Past Medical History (and any physical needs):** A few lines about illnesses; accidents and significant operations

*Asthmatic - controlled*  
*Heart Murmur?*

**Family History:** Brief age, illnesses; mental illnesses; relationships; personality of parents and siblings/one or two lines on each

*Mother - alcoholic*  
*Father - died when she was 10*

Date & Time:		Date & Time:	
Print Name:		Print Name:	
Signature:		Signature:	
Designation:		Designation:	

# NHS Confidential: Personal data about a patient

## Generic Mental Health Assessment

Patient Name: \_\_\_\_\_

Patient CHI: \_\_\_\_\_

Hospital and Ward: \_\_\_\_\_

Team: \_\_\_\_\_

**Personal History:** social; financial; relationships; habits; childhood adversity; education; employment; personality; trauma; abuse issues

Yvonne was born to an alcoholic mother and her father died when she was 10 of cardiovascular disease. Yvonne states that she was sexually abused from the ages of 8-10 by a male friend of her mother's for which she received a criminal injuries payment. She was then put into care at the age of 10 to 15. At 16 she then went back to live with her mother.

**Drug & Alcohol Use:**

No Drug use  
Alcohol now and again

Date & Time:		Date & Time:	
Print Name:		Print Name:	
Signature:		Signature:	
Designation:		Designation:	

**NHS Confidential: Personal data about a patient**

**Generic Mental Health Assessment**

Patient Name: \_\_\_\_\_  
 Hospital and Ward: \_\_\_\_\_

Patient CHI: \_\_\_\_\_  
 Team: \_\_\_\_\_

**Forensic History** eg custodial sentences; offending history:

*None*

**Premorbid Personality:**

*Always says she has felt depressed*

Points to Consider:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
Is this patient subject to the Adults with Incapacity (Scotland) Act?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are arrangements for Guardianship in place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has a Welfare Attorney been appointed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is an Advance Care Plan in place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has an Advance Statement been compiled?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has a Nominated Named Person been identified?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is this patient a woman of child bearing age?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Are there any childcare issues that need to be raised as a result of the information obtained through this assessment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, does the local Child Protection Team need to be involved?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Date & Time:		Date & Time:	
Print Name:		Print Name:	
Signature:		Signature:	
Designation:		Designation:	

**NHS Confidential: Personal data about a patient**

**Generic Mental Health Assessment**

Patient Name: \_\_\_\_\_  
 Hospital and Ward: \_\_\_\_\_

Patient CHI: \_\_\_\_\_  
 Team: \_\_\_\_\_

**Mental State Examination**

<b>Appearance &amp; Behaviour</b>	
<i>Describe Generally Including:</i>	
• <i>Level of activity</i>	
• <i>Self-neglect</i>	
• <i>Socially appropriate</i>	
• <i>Eye contact/rapport</i>	
• <i>Abnormal movements</i>	
<b>Speech</b>	
• <i>Quantity/Quality</i>	
• <i>Rate / Rhythm / Volume / Tone</i>	
• <i>Abnormal Use / Dysphasia</i>	
<b>Mood &amp; Affect</b>	
• <i>Objective / Subjective view of mood</i>	
• <i>Affect appropriate / labile / reduced</i>	
<b>Suicidal Ideation:</b>	
• <i>Passive / Active / Plans</i>	<i>Not suicidal</i>
<b>Thoughts</b>	
• <i>Abnormal Flow</i>	
• <i>Thought content / pre-occupations</i>	
• <i>Obsessions</i>	
• <i>Overvalued ideas / Delusions</i>	

<b>Date &amp; Time:</b>		<b>Date &amp; Time:</b>	
<b>Print Name:</b>		<b>Print Name:</b>	
<b>Signature:</b>		<b>Signature:</b>	
<b>Designation</b>		<b>Designation:</b>	

**NHS Confidential: Personal data about a patient**

**Generic Mental Health Assessment**

Patient Name: \_\_\_\_\_

Patient CHI: \_\_\_\_\_

Hospital and Ward: \_\_\_\_\_

Team: \_\_\_\_\_

<b>Perception</b>	
• Pseudo-hallucinations	
• Hallucinations	<i>Denies any</i>
• Modality, associations	
<b>Insight</b>	
• Beliefs re symptoms	
• Views re treatment	
<b>Cognitive Function</b>	
• Orientation	
• Attention / concentration	<i>Poor concentration</i>
• Memory	<i>Poor memory</i>
• MMSE/Addenbrooke (ACE-R) if appropriate	

<b>Provisional Diagnosis / Confirmation of ICD10</b>

<b>Risks Identified (please ensure mandatory risk assessments are completed)</b>

Does the patient hold a current driving licence?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you discussed with the patient their fitness to drive, given their current mental state and prescribed medication?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you require to inform the DVLA of your recommendation?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Date & Time:		Date & Time:	
Print Name:		Print Name:	
Signature:		Signature:	
Designation		Designation:	

**NHS Confidential: Personal data about a patient**

**Clinical Risk Assessment and Management Plan**

Patient Name: \_\_\_\_\_

Patient CHI: \_\_\_\_\_

Hospital and Ward: \_\_\_\_\_

Team: \_\_\_\_\_

Please indicate  whether this Assessment is being undertaken:

Within 2 hours of admission

72 hours from admission

7 days from admission

An ongoing review of risk

**RISK INDICATORS**

**Suicide**

	Yes	No	Don't Know		Yes	No	Don't Know
Previous attempts on their life	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Expressing high levels of distress	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Previous use of violent methods	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Helplessness or hopelessness	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Misuse of drugs and/or alcohol	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Family history of suicide	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Major psychiatric diagnoses	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Separated/widowed/divorced	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Expressing suicidal ideas	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Unemployed/retired	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Considering/planned intent	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Recent significant life events	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lives alone	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Major physical illness/disability	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Other (please specify) (With an intended outcome of death) .....

Comments .....

**Neglect**

	Yes	No	Don't Know		Yes	No	Don't Know
Previous history of neglect	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Lack of positive social contacts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Failing to drink properly	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Unable to shop for self	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Failing to eat properly	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Insufficient/inappropriate clothing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Difficulty managing physical health	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Difficulty maintaining hygiene	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Living in inadequate accommodation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Experiencing financial difficulties	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lacking basic amenities (water/heat/light)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Difficulty communicating needs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Pressure of eviction/repossession	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Denies problems perceived by others	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Other (please specify) (Resulting in serious risk to personal health and well being) .....

Comments .....

Signature of Assessor: \_\_\_\_\_

Date of Assessment: \_\_\_\_\_

**NHS Confidential: Personal data about a patient**

**Clinical Risk Assessment and Management Plan**

Patient Name: \_\_\_\_\_

Patient CHI: \_\_\_\_\_

Hospital and Ward: \_\_\_\_\_

Team: \_\_\_\_\_

Please indicate  whether this Assessment is being undertaken:

Within 2 hours of admission

72 hours from admission

7 days from admission

An ongoing review of risk

**Aggression/Violence**

Previous incidents of violence

Yes No Don't Know

Previous use of weapons

Misuse of drugs and/or alcohol

Male gender, under 35 years of age

Known personal trigger factors

Expressing intent to harm others

Previous dangerous impulsive acts

Paranoid delusions about others

Yes No Don't Know

Violent command hallucinations

Signs of anger and frustration

Sexually inappropriate behaviour

Preoccupations with violent fantasy

Admission to secure settings

Denial of previous dangerous acts

Other (please specify) (includes actual physical assault on an individual or extreme verbal or written threats or damage to property)

**Comments**

**Other**

Self-injury

Yes No Don't Know

Other self-harm (eg eating disorders)

Stated abuse by others (eg physical, sexual)

Abuse of others

Harassment by others (eg racial, physical)

Harassment of others

Risk to child(ren)

Concordance with treatment plan

Wandering/Disorientation

Moving and handling

Falls

Yes No Don't Know

Exploitation by others (eg financial)

Exploitation of others

Culturally isolated situation

Non-violent sexual offence (eg exposure)

Wilful fire raising (deliberate fire-setting only)

Accidental fire risk

Other damage to property

Home safety (incl. risk of falls)

In-patient?

Other (please specify) (Could be a range of risk factors different from other three categories)

**Comments**

Signature of Assessor: \_\_\_\_\_

Date of Assessment: \_\_\_\_\_

## NHS Confidential: Personal data about a patient

## Encounter Report

Mrs Yvonne Jamieson

10/03/1982

Female

Permanent

## Address

194a Montrose Street Brechin Tayside DD9 7DZ

Address Type: Main address

## Communication numbers

Telephone - home 07774387825

## Problems

Gastric reflux	Started: 20/02/2012	Ended:
H/O: asthma	Started: 20/02/2012	Ended:
Hypothyroidism	Started: 20/02/2012	Ended:
Currently Relevant	Started: 15/02/2012	Ended:

## Drug Allergies &amp; Adverse Reactions

15/02/2012 H/O: drug allergy Allergy Moderate MORPHINE  
 SULPHATE inj 10mg/10ml will input correct dosage & date when paper notes arrive in practice. Advised by CA that patient took allergy/reaction after an operation.

## Medical History

05/03/2012 Had a chat to patient period one wk late, has tested urine twice, negative, is trying to get pregnant, had implanon removed in November Dr S A H Frost  
 05/03/2012 Follow-up arranged will hand in urine at end of week for pregnancy test Dr S A H Frost  
 23/02/2012 Patient MRE received from HB Dr Victoria Ripley  
 20/02/2012 Excepted sexual health quality indicators: patient unsuitabl trying to conceive Dr Victoria Ripley  
 20/02/2012 Had a chat to patient wondering if pregnant, period due today. advised to take a test if still no period in 1/52 and to let us know. trying for a pregnancy so started on folic acid. Dr Victoria Ripley  
 20/02/2012 Had a chat to patient new patient. medication added. still gets reflux despite. says never tested for h. pylori - will come off PPI for 1/12 and hand in stool Dr Victoria Ripley  
 20/02/2012 Gastric reflux Dr Victoria Ripley  
 20/02/2012 Gastric reflux Dr Victoria Ripley  
 20/02/2012 H/O: asthma Dr Victoria Ripley  
 20/02/2012 H/O: asthma Dr Victoria Ripley

## Repeat Masters

OMEPRAZOLE gastro-res cap 20mg	Until:	Last issued:	Number of issues:	maximum 5 allowed
TAKE ONE DAILY				
SEREVENT EVOHALER cfc free inh	Until:	Last issued:	Number of issues:	maximum 5 allowed
25micrograms/actuation				
SALBUTAMOL cfc/free b/act inh	Until:	Last issued:	Number of issues:	maximum 5 allowed
100micrograms/actuation				
CLENIL MODULITE cfc free inh	Until:	Last issued:	Number of issues:	maximum 5 allowed
200micrograms/actuation				
LEVOTHYROXINE tabs 50micrograms	Until:	Last issued: 20/02/2012	Number of issues:	1 maximum 5 allowed
TAKE ONE EACH MORNING WITH 25MCG TABLET ALTERNATE DAYS				
LEVOTHYROXINE tabs 25micrograms	Until:	Last issued: 20/02/2012	Number of issues:	1 maximum 5 allowed
TAKE ONE EACH MORNING WITH 50MCG TABLET ALTERNATE DAYS				
LEVOTHYROXINE tabs 100micrograms	Until:	Last issued: 20/02/2012	Number of issues:	1 maximum 5 allowed
TAKE ONE EACH MORNING EVERY OTHER DAY DAYS				

## Acute and Repeat Issue Therapy

20/02/2012 issued FOLIC ACID tabs 400micrograms Supply: (90) tablet TAKE ONE DAILY  
 20/02/2012 issued RANITIDINE tabs 150mg Supply: (60) tablet TAKE ONE TWICE  
 DAILY FOR A MONTH INSTEAD OF OMEPRAZOLE.

## Recall

15/02/2012 Recall on 15/04/2012 for Asthma follow-up with Mrs Christine Allan Status:Outstanding

## Consultation

05/03/2012 Surgery consultation Dr S A H Frost

## Blood pressure

20/02/2012 16:38.00 BP 120/78 taken Sitting Cuff: Standard recall due: O/E - blood pressure reading

## Smoking

15/02/2012 Never smoked cigarettes per day Never smoked tobacco  
 Mrs Christine Allan

## Alcohol

15/02/2012 Current drinker units per week Alcohol intake within recommended sensible limits Mrs Christine Allan

## Weight

15/02/2012 Weight: 93 kgs BMI: 40 O/E - weight

Brechin Health Centre, Infirmary Street, Brechin, Angus, DD9 7AN

Tel: 01356 624411

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Printed by A STEPHEN on 20/03/12 16:48.12

# NHS Confidential: Personal data about a patient

## Encounter Report

Mrs Yvonne Jamieson

10/03/1982

Female

Permanent

### Height

15/02/2012 Height: 1.524 metres O/E - height  
Christine Allan

Mrs

### Urine test

15/02/2012 Urine dipstick test = tested +ve nit

### Urinalysis - Glucose

15/02/2012 Urine glucose test negative =

### Urinalysis - Protein

15/02/2012 Urine protein test negative =

Total patients for report 1

## NHS Confidential: Personal data about a patient

Yvonne Jamieson 10/03/1982 390/82/223

Data Summary Sheet

## R Data Summary Sheet

Yvonne Jamieson 10/03/1982 Female NHS: 390/82/223 CHI: 1003820107

Anchor House Satellite Flat 185 Rannoch Road Perth PH1 2DP

Mobile phone 07594128297

4/01/2011 Height: 1.62 metres O/E - height Mrs Lucille Ironside

9/03/2012 Weight: 93.6 kgs BMI: 35.6 O/E - weight Dr . Locum

4/03/2012 15:26.00 BP 130 / 70 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Mrs Tracy Connolly

## Significant Medical History

09/02/2011 Symptoms of depression Dr . Locum

No data recorded.

No data recorded.

## Screening

No data recorded.

## Priority Clinical / User Marker

09/02/2011 Symptoms of depression Dr . Locum

## Acute Prescriptions

05/10/2012 Mirtazapine 45mg tablets Supply: ( 28 ) tablet 1 TABLET ONCE A DAY AT NIGHT DISPENSE WEEKLY Dr . Locum

14/09/2012 Levothyroxine sodium 25microgram tablets Supply: ( 6 ) tablet 1 TABLET ONCE A DAY

Notes for dispenser: please supersede prescription dated 10/9 as will be weekly dispense. Dr . Locum

14/09/2012 Levothyroxine sodium 25microgram tablets Supply: ( 21 ) tablet 1 TABLET ONCE A DAY WEEKLY DISPENSE FROM 20/9/2012 Dr . Locum

10/09/2012 Mirtazapine 30mg tablets Supply: ( 28 ) tablet 1 TABLET ONCE A DAY AT NIGHT, DISPENSE WEEKLY Dr . Locum

10/08/2012 Mirtazapine 30mg tablets Supply: ( 28 ) tablet TAKE ONE DAILY AT NIGHT, DISPENSE WEEKLY Dr . Locum

07/08/2012 Calmurid cream (Galderma (UK) Ltd) Supply: ( 100 ) gram APPLY TWICE A DAY Dr . Locum

17/07/2012 MIRTAZAPINE tabs 30mg Supply: ( 28 ) tablet TAKE ONE DAILY AT NIGHT, DISPENSE WEEKLY Dr . Locum

27/06/2012 MIRTAZAPINE tabs 15mg Supply: ( 14 ) tablet ONE TABLET(S) AT NIGHT, DISPENSE WEEKLY Dr . Locum

25/06/2012 MIRTAZAPINE tabs 15mg Supply: ( 7 ) tablet ONE TABLET(S) AT NIGHT, DISPENSE WEEKLY Dr . Locum

11/06/2012 FLUOXETINE caps 20mg Supply: ( 56 ) capsule TAKE TWO DAILY- DISPENSE DAILY Dr . Locum

09/05/2012 NITROFURANTOIN mr cap 100mg Supply: ( 6 ) capsule TAKE ONE TWICE DAILY Dr . Locum

09/05/2012 FLUOXETINE caps 20mg Supply: ( 56 ) capsule TAKE TWO DAILY-WEEKLY DISPENSE Dr . Locum

16/04/2012 AMOXICILLIN caps 500mg Supply: ( 21 ) capsule TAKE ONE THREE TIMES DAILY Dr . Locum

15/04/2012 FLUOXETINE caps 20mg Supply: ( 56 ) capsule TAKE TWO DAILY-WEEKLY DISPENSE Dr . Locum

10/04/2012 ZOPICLONE tabs 3.75mg Supply: ( 5 ) tablet TAKE ONE AT NIGHT Dr . Locum

10/04/2012 BECLOMETASONE aqueous nasal spray 50micrograms/actuation Supply: ( 200 ) dose TWO PUFFS TWICE DAILY Dr . Locum

03/04/2012 FERROUS FUMARATE caps 305mg Supply: ( 84 ) capsule 1 THREE TIMES A DAY Dr . Locum

23/03/2012 FLUOXETINE caps 20mg Supply: ( 28 ) capsule TAKE ONE DAILY-WEEKLY DISPENSE Dr Central Healthcare

15/03/2012 FLUOXETINE caps 20mg Supply: ( 14 ) capsule TAKE ONE DAILY, DISPENSE WEEKLY Dr . Locum

12/01/2012 FERROUS FUMARATE tabs 322mg Supply: ( 56 ) tablet TAKE ONE TWICE A DAY

Instructions: please dispense weekly Mrs Tracy Connolly

10/01/2012 PARACETAMOL tabs 500mg Supply: ( 24 ) tablet TAKE 1 OR 2 FOUR TIMES DAILY NO MORE THAN 8 TABLETS IN A DAY Mrs Tracy Connolly

05/01/2012 AMOXICILLIN caps 500mg Supply: ( 21 ) capsule TAKE ONE THREE TIMES DAILY Mrs Tracy Connolly

23/06/2011 FLUOXETINE caps 20mg Supply: ( 14 ) capsule(s) TAKE TWO DAILY OR DISPENSE FROM 22/6/11 Mrs Tracy Connolly

09/06/2011 FLUOXETINE caps 20mg Supply: ( 28 ) capsule(s) TAKE ONE DAILY-WEEKLY DISPENSE Dr Central Healthcare

03/06/2011 FLUCLOXACILLIN caps 500mg Supply: ( 28 ) capsule(s) TAKE ONE 4 TIMES/DAY Dr Central Healthcare

02/06/2011 CLOTRIMAZOLE crm 1% Supply: ( 20 ) gram(s) APPLY 2-3 TIMES/DAY Mrs Tracy Connolly

27/05/2011 CITALOPRAM tabs 40mg Supply: ( 28 ) tablet(s) ONE TABLET(S) DAILY, DISPENSE WEEKLY Mrs Tracy Connolly

15/05/2011 PROMETHAZINE HCl tabs 25mg Supply: ( 3 ) tablet(s) TAKE ONE AT NIGHT Mrs Tracy Connolly

05/05/2011 CITALOPRAM tabs 40mg Supply: ( 28 ) tablet(s) ONE TABLET(S) DAILY, DISPENSE WEEKLY Mrs Tracy Connolly

03/05/2011 LEVOTHYROXINE tabs 50micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Mrs Tracy Connolly

05/05/2011 LEVOTHYROXINE tabs 25micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Mrs Tracy Connolly

22/04/2011 GAVISCON ADVANCE ANISEED sf oral susp Supply: ( 500 ) mls aniseed 5ML OR 10ML 4 TIMES/DAY Dr Central Healthcare

## NHS Confidential: Personal data about a patient

Yvonne Jamieson 10/03/1982 390/82/223

Data Summary Sheet

20/04/2011 SALMETEROL cfc free inh 25micrograms/actuation Supply: ( 1 ) 120 dose inhaler INHALE 2 DOSES TWICE DAILY Mrs Tracy Connolly

20/04/2011 CLENIL MODULITE cfc free inh 100micrograms/actuation Supply: ( 1 ) 200 dose inhaler INHALE 2 DOSES TWICE DAILY Mrs Tracy Connolly

20/04/2011 PREDNISOLONE ec tab 5mg Supply: ( 40 ) tablet(s) TAKE 8 TABLETS ONCE DAILY (40MG) FOR 5 DAYS Mrs Tracy Connolly

11/04/2011 PREDNISOLONE ec tab 5mg Supply: ( 40 ) tablet(s) TAKE 8 TABLETS ONCE DAILY (40MG) FOR 5 DAYS Dr Central Healthcare

11/04/2011 FERROUS FUMARATE tabs 322mg Supply: ( 56 ) tablet(s) TAKE ONE TWICE A DAY  
instalments: please dispense weekly Dr Central Healthcare

05/04/2011 LEVOTHYROXINE tabs 25micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Dr . Locum

05/04/2011 LEVOTHYROXINE tabs 50micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Dr . Locum

05/04/2011 CITALOPRAM tabs 40mg Supply: ( 28 ) tablet(s) ONE TABLET(S) DAILY, DISPENSE WEEKLY Dr . Locum

31/03/2011 AMOXICILLIN caps 500mg Supply: ( 21 ) capsule(s) TAKE ONE 3 TIMES/DAY Dr . Locum

31/03/2011 Peak Flow Meter standard range Supply: ( 1 ) device(s) AS DIRECTED Dr . Locum

15/03/2011 ANUSOL HC oint Supply: ( 30 ) gram(s) APPLY AS DIRECTED TWICE A DAY AND AFTER EACH BOWEL MOVEMENT Dr Central Healthcare

07/03/2011 LEVOTHYROXINE tabs 50micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Dr . Locum

07/03/2011 LEVOTHYROXINE tabs 25micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Dr . Locum

07/03/2011 CITALOPRAM tabs 40mg Supply: ( 28 ) tablet(s) ONE TABLET(S) DAILY, DISPENSE WEEKLY Dr . Locum

07/03/2011 DICLOFENAC SODIUM ec tab 50mg Supply: ( 84 ) tablet(s) TAKE ONE 3 TIMES/DAY, DISPENSE WEEKLY Dr . Locum

07/03/2011 NITROFURANTOIN mr cap 100mg Supply: ( 14 ) capsule(s) TAKE ONE TWICE DAILY Dr . Locum

28/02/2011 DICLOFENAC SODIUM ec tab 50mg Supply: ( 84 ) tablet(s) TAKE ONE 3 TIMES/DAY, DISPENSE WEEKLY Dr . Locum

21/02/2011 TERBINAFINE crm 1% Supply: ( 30 ) gram(s) APPLY TWICE DAILY TO FEET Dr . Locum

21/02/2011 TOLNAFTATE foot spray 1% Supply: ( 1 ) 150ml aerosol SPRAY SHOES AS DIRECTED BY PODIATRIST Dr . Locum

21/02/2011 NITROFURANTOIN mr cap 100mg Supply: ( 14 ) capsule(s) TAKE ONE TWICE DAILY Dr . Locum

14/02/2011 LEVOTHYROXINE tabs 25micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Dr . Locum

14/02/2011 LEVOTHYROXINE tabs 50micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Dr . Locum

09/02/2011 CITALOPRAM tabs 40mg Supply: ( 28 ) tablet(s) ONE TABLET(S) DAILY, DISPENSE WEEKLY Dr . Locum

18/01/2011 LEVOTHYROXINE tabs 50micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Dr . Locum

18/01/2011 LEVOTHYROXINE tabs 25micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Dr . Locum

18/01/2011 CITALOPRAM tabs 20mg Supply: ( 28 ) tablet(s) ONE DAILY. DISPENSE WEEKLY Dr . Locum

## Active Care Management

No data recorded.

## Examination &amp; Lifestyle Findings

14/03/2012 15:26.00 BP 130 / 70 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Mrs Tracy Connolly

05/01/2012 11:20.00 BP 101 / 77 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Mrs Tracy Connolly

04/05/2011 12:07.00 BP 106 / 70 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Mrs Tracy Connolly

27/04/2011 09:30.00 BP 104 / 72 taken Sitting from Right Cuff: Standard recall due: O/E - blood pressure reading Mrs Lucille Ironside

27/04/2011 09:30.00 BP 93 / 62 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Mrs Lucille Ironside

15/03/2011 09:52.00 BP 110 / 70 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Mrs Tracy Connolly

14/01/2011 15:45.00 BP 111 / 73 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Mrs Lucille Ironside

14/01/2011 Height: 1.62 metres O/E - height Mrs Lucille Ironside

19/03/2012 Weight: 93.6 kgs BMI: 35.6 O/E - weight Dr . Locum

14/01/2011 Weight: 80.6 kgs BMI: 30.7 O/E - weight Mrs Lucille Ironside

No data recorded.

No data recorded.

14/09/2012 PEFR - peak exp. flow rate : = 370 L/min Device Type: EN13826 Previous Best Ever = 300.0, Predicted = 437.4.  
Dr . Locum

## NHS Confidential: Personal data about a patient

Yvonne Jamieson 10/03/1982 390/82/223

Data Summary Sheet

10/05/2012 Peak exp. flow rate: PEFR/PFR : = 270 L/min Previous Best Ever = 300.0, Predicted = . Mrs Lucille Ironside  
 10/05/2012 Peak exp. flow rate: PEFR/PFR : = 270 L/min Previous Best Ever = 300.0, Predicted = . Mrs Lucille Ironside  
 05/01/2012 Peak exp. flow rate: PEFR/PFR : = 300 L/min Device Type: Wright Previous Best Ever = 260.0, Predicted = 485.5. Mrs Tracy Connolly  
 11/04/2011 Peak exp. flow rate: PEFR/PFR : = 260 L/min Previous Best Ever = , Predicted = . Mrs Tracy Connolly  
 16/03/2012 Never smoked Never smoked tobacco Mrs Tracy Connolly  
 13/05/2011 Never smoked Never smoked tobacco Dr Shona Sinclair  
 14/01/2011 Never smoked Never smoked tobacco Mrs Lucille Ironside  
 14/01/2011 Current drinker units per week: 2 Alcohol consumption Mrs Lucille Ironside  
 14/01/2011 Enjoys light exercise Mrs Lucille Ironside  
 14/01/2011 Dietary history Eating habits: Moderate Type of diet: Mrs Lucille Ironside

## Test Results

14/09/2012 PEFR - peak exp. flow rate : = 370 L/min Device Type: EN13826 Previous Best Ever = 300.0, Predicted = 437.4. Dr. Locum  
 26/07/2012 Test - laboratory = Lab Result Tayside Clinical Laboratory Services Biochemistry Mrs Sharon Birrell  
 27/07/2012 Test - laboratory = Lab Result Tayside Clinical Laboratory Services Haematology Mrs Sharon Birrell  
 27/07/2012 Test - laboratory = Lab Result Tayside Clinical Laboratory Services Biochemistry Mrs Sharon Birrell  
 25/07/2012 Serum free T4 level = 12 pmol/L Dr Central Healthcare  
 25/07/2012 Serum free triiodothyronine level = 4.3 pmol/L Serum free T3 level - Dr Central Healthcare  
 25/07/2012 Serum TSH level = 0.02 mU/L Below low reference limit mU/L Dr Central Healthcare  
 26/07/2012 Test - laboratory = Lab Result Tayside Clinical Laboratory Services Haematology Mrs Sharon Birrell  
 25/07/2012 Basophil count = 0 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 25/07/2012 Haematocrit = 0.386 ratio Dr Central Healthcare  
 25/07/2012 Full blood count - FBC = <none> Dr Central Healthcare  
 25/07/2012 Lymphocyte count = 1.7 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 25/07/2012 Total white cell count = 6.6 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 25/07/2012 Red blood cell (RBC) count = 4.45 10<sup>12</sup>/L x10<sup>12</sup>/L Dr Central Healthcare  
 25/07/2012 Platelet count = 248 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 25/07/2012 Neutrophil count = 4.4 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 25/07/2012 Monocyte count = 0.4 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 25/07/2012 Mean corpuscular volume (MCV) = 86.8 fL fl Dr Central Healthcare  
 25/07/2012 Mean corpusc. Hb. conc. (MCHC) = 32.1 g/dL Dr Central Healthcare  
 25/07/2012 Mean corpusc. haemoglobin(MCH) = 27.9 pg Dr Central Healthcare  
 25/07/2012 Haemoglobin estimation = 12.4 g/dL Dr Central Healthcare  
 25/07/2012 Eosinophil count = 0.1 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 09/07/2012 Urine dipstick test = Normal slight trace of blood otherwise Normal Mrs Karen Duncan  
 15/05/2012 Test - laboratory = Lab Result Tayside Clinical Laboratory Services Microbiology Mrs Lisa Mcrae  
 10/05/2012 Serum free triiodothyronine level = 5.6 pmol/L Serum free T3 level - Dr Central Healthcare  
 10/05/2012 Serum testosterone = 1.9 nmol/L Dr Central Healthcare  
 10/05/2012 Serum prolactin level = 225 mU/L mU/L Dr Central Healthcare  
 10/05/2012 Serum LH level = 5.4 U/L U/L Dr Central Healthcare  
 10/05/2012 Serum FSH level = 2.6 U/L U/L Dr Central Healthcare  
 12/05/2012 Test - laboratory = Lab Result Tayside Clinical Laboratory Services Biochemistry Mrs Sharon Birrell  
 10/05/2012 Serum free T4 level = 19.5 pmol/L Above high reference limit Dr Central Healthcare  
 10/05/2012 Serum TSH level < 0.01 mU/L Below low reference limit mU/L Dr Central Healthcare  
 10/05/2012 Peak exp. flow rate: PEFR/PFR : = 270 L/min Previous Best Ever = 300.0, Predicted = . Mrs Lucille Ironside  
 10/05/2012 Peak exp. flow rate: PEFR/PFR : = 270 L/min Previous Best Ever = 300.0, Predicted = . Mrs Lucille Ironside  
 02/04/2012 Test - laboratory = Lab Result Tayside Clinical Laboratory Services Biochemistry Mrs Sharon Birrell  
 30/03/2012 Test - laboratory = Lab Result Tayside Clinical Laboratory Services Haematology Mrs Sharon Birrell  
 30/03/2012 Test - laboratory = Lab Result Tayside Clinical Laboratory Services Biochemistry Mrs Sharon Birrell  
 29/03/2012 Serum free triiodothyronine level = 7.1 pmol/L Above high reference limit Serum free T3 level - Dr Central Healthcare  
 29/03/2012 GFR calculated abbreviated MDRD > 60 mL/min GFR calculated abbreviated MDRD - Dr Central Healthcare  
 29/03/2012 Serum free T4 level = 26.3 pmol/L Above high reference limit Dr Central Healthcare  
 29/03/2012 GFR calculated abbreviated MDRD adj for African Americ origin GFR calctd abbtcd MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA Dr Central Healthcare  
 29/03/2012 Serum urea level = 4.8 mmol/L Dr Central Healthcare  
 29/03/2012 Serum TSH level = 0.01 mU/L Below low reference limit mU/L Dr Central Healthcare  
 29/03/2012 Serum sodium = 138 mmol/L Dr Central Healthcare  
 29/03/2012 Serum potassium = 4.1 mmol/L Dr Central Healthcare  
 29/03/2012 Serum creatinine = 63 umol/L Dr Central Healthcare  
 29/03/2012 Serum total bilirubin level = 10 umol/L Dr Central Healthcare  
 29/03/2012 Serum alanine aminotransferase level = 22 U/L Serum ALT level - U/L Dr Central Healthcare  
 29/03/2012 Serum alkaline phosphatase = 94 U/L U/L Dr Central Healthcare  
 29/03/2012 Serum albumin = 38 g/L Dr Central Healthcare  
 29/03/2012 Basophil count = 0 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 29/03/2012 Haematocrit = 0.384 ratio Dr Central Healthcare

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Yvonne Jamieson 10/03/1982 390/82/223

Data Summary Sheet

29/03/2012 Full blood count - FBC = <none> Dr Central Healthcare  
 29/03/2012 Lymphocyte count = 1.6 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 29/03/2012 Total white cell count = 6.6 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 29/03/2012 Red blood cell (RBC) count = 4.43 10<sup>12</sup>/L x10<sup>12</sup>/L Dr Central Healthcare  
 29/03/2012 Platelet count = 220 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 29/03/2012 Neutrophil count = 4.6 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 29/03/2012 Monocyte count = 0.3 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 29/03/2012 Mean corpuscular volume (MCV) = 86.7 fL fl Dr Central Healthcare  
 29/03/2012 Mean corpusc. Hb. conc. (MCHC) = 30.4 g/dL Below low reference limit Dr Central Healthcare  
 29/03/2012 Mean corpusc. haemoglobin(MCH) = 26.3 pg Below low reference limit Dr Central Healthcare  
 29/03/2012 Haemoglobin estimation = 11.7 g/dL Below low reference limit Dr Central Healthcare  
 29/03/2012 Eosinophil count = 0.07 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 10/01/2012 Biochemical screening test Results PRI Biochemistry Mrs Sharon Birrell  
 10/01/2012 Basophil count = 0 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 10/01/2012 Haematocrit = 0.378 ratio Dr Central Healthcare  
 10/01/2012 Full blood count - FBC = FBC Dr Central Healthcare  
 10/01/2012 Lymphocyte count = 1.5 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 10/01/2012 Total white cell count = 6.2 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 10/01/2012 Red blood cell (RBC) count = 4.4 10<sup>12</sup>/L x10<sup>12</sup>/L Dr Central Healthcare  
 10/01/2012 Platelet count = 225 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 10/01/2012 Neutrophil count = 4.1 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 10/01/2012 Monocyte count = 0.5 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 10/01/2012 Mean corpuscular volume (MCV) = 85.9 fL fl Dr Central Healthcare  
 10/01/2012 Mean corpusc. Hb. conc. (MCHC) = 31.5 g/dL Below low reference limit Dr Central Healthcare  
 10/01/2012 Mean corpusc. haemoglobin(MCH) = 27 pg Dr Central Healthcare  
 10/01/2012 Haemoglobin estimation = 11.9 g/dL Below low reference limit Dr Central Healthcare  
 10/01/2012 Eosinophil count = 0.1 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 10/01/2012 GFR calculated abbreviated MDRD > 60 mL/min GFR calculated abbreviatd MDRD - Dr Central Healthcare  
 10/01/2012 GFR calculated abbreviated MDRD adj for African Americ origin GFR calctd abbtid MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA Dr Central Healthcare  
 10/01/2012 Blood Glucose = 5.2 mmol/L  
 10/01/2012 Serum urea level = 5.3 mmol/L Dr Central Healthcare  
 10/01/2012 Serum TSH level = 1.6 mU/L mU/L Dr Central Healthcare  
 10/01/2012 Serum sodium = 141 mmol/L Dr Central Healthcare  
 10/01/2012 Serum potassium = 4.1 mmol/L POTASSIUM - Dr Central Healthcare  
 10/01/2012 Serum creatinine = 70 umol/L Dr Central Healthcare  
 10/01/2012 Serum total bilirubin level = 8 umol/L Dr Central Healthcare  
 10/01/2012 Serum alanine aminotransferase level = 17 U/L Serum ALT level - U/L Dr Central Healthcare  
 10/01/2012 Serum alkaline phosphatase = 80 U/L U/L Dr Central Healthcare  
 10/01/2012 Serum albumin = 44 g/L Dr Central Healthcare  
 05/01/2012 Peak exp. flow rate: PEF/PFR : = 300 L/min Device Type: Wright Previous Best Ever = 260.0, Predicted = 285.5. Mrs Tracy Connolly  
 13/06/2011 Biochemical screening test Results PRI Biochemistry Mrs Sharon Birrell  
 13/06/2011 Serum TSH level = 0.11 mU/L Below low reference limit mU/L Dr Central Healthcare  
 13/05/2011 Biochemical screening test Results PRI Biochemistry Mrs Sharon Birrell  
 13/05/2011 GFR calculated abbreviated MDRD > 60 mL/min GFR calculated abbreviatd MDRD - Dr Central Healthcare  
 13/05/2011 Serum free T4 level = 19 pmol/L Dr Central Healthcare  
 13/05/2011 GFR calculated abbreviated MDRD adj for African Americ origin GFR calctd abbtid MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA Dr Central Healthcare  
 13/05/2011 Blood Glucose = 4.3 mmol/L  
 13/05/2011 Serum urea level = 4.2 mmol/L Dr Central Healthcare  
 13/05/2011 Serum TSH level = 4.27 mU/L Above high reference limit mU/L Dr Central Healthcare  
 13/05/2011 Serum sodium = 141 mmol/L Dr Central Healthcare  
 13/05/2011 Serum potassium = 5 mmol/L POTASSIUM - Dr Central Healthcare  
 13/05/2011 Serum creatinine = 73 umol/L Dr Central Healthcare  
 13/05/2011 Serum total bilirubin level = 7 umol/L Dr Central Healthcare  
 13/05/2011 ALT/SGPT serum level = 19 U/L U/L Dr Central Healthcare  
 13/05/2011 Serum alkaline phosphatase = 73 U/L U/L Dr Central Healthcare  
 13/05/2011 Serum albumin = 44 g/L Dr Central Healthcare  
 13/05/2011 Basophil count = 0 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 13/05/2011 Haematocrit = 0.391 ratio Dr Central Healthcare  
 13/05/2011 Full blood count - FBC FBC Dr Central Healthcare  
 13/05/2011 Lymphocyte count = 1.6 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 13/05/2011 Total white cell count = 6.4 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 13/05/2011 Red blood cell (RBC) count = 4.5 10<sup>12</sup>/L x10<sup>12</sup>/L Dr Central Healthcare  
 13/05/2011 Platelet count = 219 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 13/05/2011 Neutrophil count = 4 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 13/05/2011 Monocyte count = 0.5 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare

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Yvonne Jamieson 10/03/1982 390/82/223

Data Summary Sheet

13/05/2011 Mean corpuscular volume (MCV) = 86.9 fL fl Dr Central Healthcare  
 13/05/2011 Mean corpusc. Hb. conc. (MCHC) = 32.7 g/dL Dr Central Healthcare  
 13/05/2011 Mean corpusc. haemoglobin(MCH) = 28.4 pg Dr Central Healthcare  
 13/05/2011 Haemoglobin estimation = 12.8 g/dL Dr Central Healthcare  
 13/05/2011 Eosinophil count = 0.1  $10^9/L$  x  $10^9/L$  Dr Central Healthcare  
 05/04/2011 Biochemical screening test Results PRI Biochemistry Mrs Sharon Birrell  
 05/04/2011 Biochemical screening test Results PRI Biochemistry Mrs Sharon Birrell  
 11/04/2011 Peak exp. flow rate: PEFr/PFR : = 260 L/min Previous Best Ever = , Predicted = . Mrs Tracy Connolly  
 31/03/2011 Peak flow rate before bronchodilation = 250 states best peak flow usually 350, has cough and sputum at present-  
 b/e chest no rhonchi and good air entry- pf poor technique and i think could probably have got higher. advised she should not  
 be on diclofenac with asthma as has become wheezy with ibuprofen in past Dr . Locum  
 15/03/2011 Urine dipstick test Normal Mrs Tracy Connolly  
 21/02/2011 Biochemical screening test Results PRI Biochemistry Mrs Sharon Birrell

## Last Encounter

25/10/2012 Other Mrs Lisa Mcrae - No Data Recorded

## last 4 Clinical Notes

05/10/2012 Consultation mood low as has been told will not get custody of son until he is 16. Also appears not to have been  
 receiving her 100mg thyroxine tabs for last few weeks. Agreed to re-issue as script due Dr . Locum  
 20/09/2012 Failed encounter Mr Chris Lamont  
 14/09/2012 Clinical management plan agreed increase clenil to 2 puffs tds until further notice Dr . Locum  
 14/09/2012 Consultation some sob and wheeze especially at night . PEFr reduced/. Chest clear-  
 also need to rationalise Levothyroxine so at same dosage intervals as rest of thyroid script  
 also discussed mirtazapine- currently appears mentally stable and therefore will remain on 30mgs Mirtazapine Dr . Locum

**NHS Confidential: Personal data about a patient**

**PATIENT HEALTH QUESTIONNAIRE (PHQ-9)**

NAME: Yvonne Jamieson DATE: 19.03.12

Over the last 2 weeks, how often have you been bothered by any of the following problems?  
(use "✓" to indicate your answer)

	Not at all	Seldom	More than Seldom	Nearly every day
1. Little interest or pleasure in doing things				✓
2. Feeling down, depressed, or hopeless				✓
3. Trouble falling or staying asleep, or sleeping too much		✓		
4. Feeling tired or having little energy				✓
5. Poor appetite or overeating				✓
6. Feeling bad about yourself—or that you are a failure or have let yourself or your family down				✓
7. Trouble concentrating on things, such as reading the newspaper or watching television				✓
8. Moving or speaking so slowly that other people could have noticed. Or the opposite—being so fidgety or restless that you have been moving around a lot more than usual				✓
9. Thoughts that you would be better off dead, or of hurting yourself in some way				✓

add columns: + +

(Healthcare professional: For interpretation of TOTAL, TOTAL: -- please refer to accompanying scoring card.)

10. If you checked off any problems, how difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?

- Not difficult at all \_\_\_\_\_
- Somewhat difficult \_\_\_\_\_
- Very difficult \_\_\_\_\_
- Extremely difficult \_\_\_\_\_

PHQ-9 is adapted from PRIME MD TODAY, developed by Drs Robert L. Spitzer, Janet B.W. Williams, Kurt Kroenke, and colleagues, with an educational grant from Pfizer Inc. For research information, contact Dr Spitzer at rls8@columbia.edu. Use of the PHQ-9 may only be made in accordance with the Terms of Use available at <http://www.pfizer.com>. Copyright ©1999 Pfizer Inc. All rights reserved. PRIME MD TODAY is a trademark of Pfizer Inc.



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<b>CLINICAL NOTES</b>	National Health Service Number		
	Surname (Block Letters)	Forenames (Block Letters)	
	Address		
		Date of Birth	
		10-3-82	

Date	.	Clinical Notes	Diagnosis
		<p>? PMH Haemorrhoids</p> <p>0/e Apyrexial, 68 kg BP 110/70, not dng</p> <p>abdo-soft 'RS' not tender PR-NAD PV-NAD</p> <p>no evidence feline</p> <p>Advised by Anusol use one and 30g</p> <p>Working Statement TCSMB</p> <p>Will need submit urine as requested as still on ABX</p>	Thornally
17/03/11		letter sent to Yvonne's solicitor regarding marital status. In notes.	(CMTN) P. Patterson
21.3.11		in for med act, given for Imvex, feeling happier but says she sometimes gets agitated, has appointment with CAPU takes in week, advised to bring this up to discuss behavioural ways in coping with agitate	
24/11	C	Follow up appointment, has not expressed any concerns today about difficulty sleeping, says recovering from chest infection, worried about general aches + pains as Diclofenac now stopped will continue with Paracetamol complaining of tiredness, - Hb borderline last B/T + ? results of TSH	
		Further bloods today + review Friday but TCS if needs to before then	Thornally
11-4-11	C	See Vision please	
20-4-11	C	Px See Vision please	
		Clenil Modulate 100mcg ii puffs bd 1:01	
		Seravent 25 micrograms ii puffs bd	

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

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Date	.	Clinical Notes	Diagnosis
27/11/11	e	Prednisolone q/c 5mg tab 40mg od	Fluently
09:30		Contacted OOH Monday/Tue's morning, had D+V, temp. flushed Sweaty, tender lower abdo, soft to touch pulse 63bpm, also do chest pain, central stabbing pain with mins yesterday? dehydrated NIBP taken both arms. Advice from G.P. manage practice Rest + relax 24/48 hrs and take plenty fluids	Fluently           IRON 500
3/5/11	C	Attended for repeat prescription Citalopram 40mg i od 28 (DU) LEVOTHYROXINE 50 microgram 28 DW " 25 microgram 28 OW	Fluently           Fluently PN
4/5/11		See Vision please	Fluently PN
6/5/11	C	See Vision please.	Fluently PN
9/5/11	C	See Vision	
4/6/11		Mental health review see vision.	J. McKenna

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

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		National Health Service Number	
CLINICAL NOTES	Surname (Block Letters)		Forenames (Block Letters)
	Jamieson		Yvorre.
	Address		Date of Birth
		C/O Waverly Hotel	10/3/82

Date	Clinical Notes	Diagnosis
23/2/11	please see vision.	20/20 vision
24-02-11	MSU culture received - sensitive Nitrofurantoin which has been prescribed	UTI
25-2-11	getting pains in both legs, happens on walking O/E no calf tenderness, no tenderness in either thigh on palpation but says pain in this region, FROM both sides, no swelling, no effusions Imp cause of pain, no evidence DVT not injecting has had diclofenac in past, script done & review next week when due citalopram.	
27/2/11	Visited Yvorre in Grayfriars Hostel today, states that mood has slightly improved since starting on Citalopram 40mg. Is going to attend counselling at Women's Aid. Offered bereavement counselling and will think about this. Has social work review on 22nd March about contact with her son.	Alcohol  (CMHN) J. Hutton
7.3.11	Looking brighter today, been waking early morning but due to UTI script for further citalopram & review in month leg pain settling on diclofenac.	

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

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Date	Clinical Notes	Diagnosis
	<p>given further sample, had live active and encouraged to go swimming, review as req.</p> <p>still thinks urine is strong, last urine sample from UTI; sensitive to nitrofurantoin for further weeks course, urine sample following this, if infection not cleared ? for referral to urology</p> <p>levofloxacin 500mg (28) one mane DW                      " 250mg (28) " " DW                      citalopram 40mg (28) one tab daily DW                      diclofenac 50mg (84) one 3x daily DW                      nitrofurantoin 100mg (14) pr bd</p>	
8/03/11	<p>Yvonne feeling quite tired this week thinks she might still have a urine infection which is contributing to this. States mood is okay but is slightly fed up as her friend has a new man and she hasn't seen her for a while. Still. States sleep in poor this week so advised her on good sleep hygiene. Will review again in 1/52.</p>	<p>AKPOUR</p> <p>(CMHN)                      P. Patterson</p>
/03/11	<p>Bright red blood on tissue paper this morning after wiping, ? PR, none on underwear. Bo last night - no change in bowel habit, occasional discomfort on opening bowels, sometimes prone to constipation.</p> <p>Recent UTI - no urinary symptoms now                      No abdominal pain or discomfort, no fever,                      no nausea or vomiting, unsure LMP - contraceptive implant inserted, no weight loss, no sleep problems                      no diarrhoea                      No PV discharge / lining bleeding</p>	

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

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<b>CLINICAL NOTES</b>	National Health Service Number		
	Surname (Block Letters)	Forenames (Block Letters)	
	Address	Date of Birth	
	Jamieson	Yvonne	
	c/o Waverly Hotel	10-03-82	

Date	.	Clinical Notes	Diagnosis
14-1-11	C	<p>New patient assessment.</p> <p>Fleeing domestic abuse.</p> <p>Emmy</p> <p>Asthma.</p> <p>Hypothyroidism.</p> <p>Depression.</p> <p>Orain cyst.</p> <p>Heart murmur 2009?</p> <p>C-section Sept. 2010.</p> <p>3x preg. 1 live (boy) 1 still born.</p> <p>1 prem - died 4 weeks?</p> <p>Non smoker.</p> <p>Social drinker.</p> <p>none drug user.</p> <p>Has asked to be seen by a C.P.N. due to post natal depression</p> <p>Will refer to C.P.N.</p>	
18/1/11		<p>① Needs Med 3</p> <p>4/52 - Depression + anxiety</p> <p>② Cr repeat medication</p> <p>- Citalopram 20mg (28) P.W</p> <p>- Thyroxine 50mg (28) P.W</p> <p>   "      25mg (28) P.W</p> <p>R.V - 1/12</p>	

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

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Date	Clinical Notes	Diagnosis
3/02/11	Initial Mental Health assessment undertaken today (see nursing notes)	(EMHJ) J. Patterson
8/02/11	Yvonne's mood still very low and she was quite tearful at times during interview. She feels her current dose of 20mg citalopram is not helping her as she has felt no change in her mood since she started on them (about 6 months ago). No suicidal ideation however feels hopeless and helpless about her situation and her future	(EMHJ) J. Patterson
9.2.11	still feeling weepy on citalopram, to increase dose to 40mg daily & review before next script, is she, CPN. citalopram 40mg (28) 1 tab daily, DW	A. PEAR
14.2.11	in for thyroxine awaiting TSH results no change in dose meantime levothyroxine 25mg (28) one daily DW levothyroxine 50mg (28) one daily DW	A. PEAR
21.2.11	in for results, TSH not elevated, no change in thyroxine dose says urine strong, has been up to A+E with proven UTI, ? given trimethoprim but results show resistance, for nitrofurantoin still feeling tired to check U&Es, FBC & LFTs & repeat urine culture, review with results also saw podiatrist for athlete's foot	A. PEAR

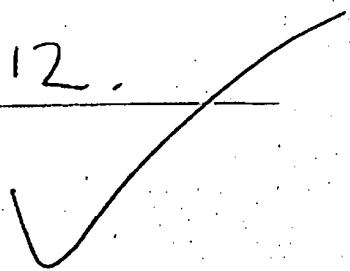
\* This column has been provided for doctors to enter A, V or C at their discretion

NHS Confidential: Personal data about a patient

Name & DoB	Vivonne Jamieson 10-3-82
Date	Summary Item
01/02/11.	Low mood
?	DWP - Claimant form.
?	Asthma.
?	Hypothyroidism.
?	Gastric reflux.

Signature: 

Date: 12-4-12.



**NHS Confidential: Personal data about a patient**

**GP Summaries Sheet**

**Aim**

To accurately update computer summaries to the GMS contract target of 80%

**Method**

Check Current screen for the heading "Notes Summary on Computer (#9344)" after 1999.

If this heading is present, the notes are probably up to date. Might be worth having a quick scan to look for major omissions. If everything seems to be in order, write "summary up to date" in the box over the page and sign and date the form.

If this heading is not present, the summary needs to be updated by looking through in turn:

*Letter in the notes – Pink sheets in the notes – Results (especially XRs)*

**Significant Diagnoses:**

All operations	All chronic diseases	All significant investigation results
All fractures	All significant hospital admissions	Any other significant diagnosis
All cancer diagnoses	All conditions with medication for > 1 year	

**If in doubt, include it!**

Note the date for each item (DD/MM/YY) – do *not* just put a year.

When complete, sign and date the sheet.

PTO

**NHS Confidential: Personal data about a patient**

<b>IMMUNISATION AND SCREENING INVESTIGATIONS</b>	Surname (Block Letters)	Forenames (Block Letters)	CHI No.
	Address		Date of Birth
	194 A MONTROSE STREET BRECHIN DD9 7DZ		10/3/82

**IMMUNISATIONS (Insert Given By, Date, Trade Name, Batch No, Expiry Date, Site and Route)**

	DTP	HIB	Polio	MMR	BCG	Men C	Hep B	Pneumococcal
Given by & Date								
Trade Name, Batch No. & Expiry Date								
Site & Route								
Given by & Date								
Trade Name, Batch No. & Expiry Date								
Site & Route								
Given by & Date							<b>ALLERGIES &amp; HYPERSENSITIVITIES ADVERSE REACTIONS AND/OR CONTRAINDICATIONS TO VACCINE</b>	
Trade Name, Batch No. & Expiry Date								
Site & Route								
Given by & Date								
Trade Name, Batch No. & Expiry Date								
Site & Route								
Given by & Date								
Trade Name, Batch No. & Expiry Date								
Site & Route								

	Influenza	Typhoid	Other	Other	Other	Other	Other	Other
Given by & Date								
Trade Name, Batch No. & Expiry Date								
Site & Route								
Given by & Date								
Trade Name, Batch No. & Expiry Date								
Site & Route								
Given by & Date								
Trade Name, Batch No. & Expiry Date								
Site & Route								

<b>IMMUNOLOGICAL STATUS</b>					
	Tuberculin Test	Rubella Antibodies	HIV	Hep.B.	Others.
Date					
Result					
Date					
Result					
Date					
Result					

## NHS Confidential: Personal data about a patient

Yvonne Jamieson 10/03/1982 390/82/223

Data Summary Sheet

## R Data Summary Sheet

Yvonne Jamieson 10/03/1982 Female NHS: 390/82/223 CHI: 1003820107

Flat 7 Tayview Shore Road Perth PH2 8BH

No data recorded.

14/01/2011 Height: 1.62 metres O/E - height Mrs Lucille Ironside

14/01/2011 Weight: 80.6 kgs BMI: 30.7 O/E - weight Mrs Lucille Ironside

04/05/2011 12:07.00 BP 106 / 70 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Mrs Tracy Connolly

## Significant Medical History

09/02/2011 Symptoms of depression Dr. Locum

No data recorded.

No data recorded.

## Screening

No data recorded.

## Priority Clinical / User Marker

09/02/2011 Symptoms of depression Dr. Locum

## Acute Prescriptions

20/06/2011 FLUOXETINE caps 20mg Supply: ( 14 ) capsule(s) TAKE TWO DAILY OR DISPENSE FROM 22/6/11 Mrs Tracy Connolly

03/06/2011 FLUOXETINE caps 20mg Supply: ( 28 ) capsule(s) TAKE ONE DAILY-WEEKLY DISPENSE Dr Central Healthcare

03/06/2011 FLUCLOXACILLIN caps 500mg Supply: ( 28 ) capsule(s) TAKE ONE 4 TIMES/DAY Dr Central Healthcare

02/06/2011 CLOTRIMAZOLE crm 1% Supply: ( 20 ) gram(s) APPLY 2-3 TIMES/DAY Mrs Tracy Connolly

27/05/2011 CITALOPRAM tabs 40mg Supply: ( 28 ) tablet(s) ONE TABLET(S) DAILY, DISPENSE WEEKLY Mrs Tracy Connolly

13/05/2011 PROMETHAZINE HCl tabs 25mg Supply: ( 3 ) tablet(s) TAKE ONE AT NIGHT Mrs Tracy Connolly

03/05/2011 CITALOPRAM tabs 40mg Supply: ( 28 ) tablet(s) ONE TABLET(S) DAILY, DISPENSE WEEKLY Mrs Tracy Connolly

03/05/2011 LEVOTHYROXINE tabs 50micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Mrs Tracy Connolly

03/05/2011 LEVOTHYROXINE tabs 25micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Mrs Tracy Connolly

22/05/2011 GAVISCON ADVANCE ANISEED sf oral susp Supply: ( 500 ) mls aniseed 5ML OR 10ML 4 TIMES/DAY Dr Central Healthcare

20/04/2011 SALMETEROL cfc free inh 25micrograms/actuation Supply: ( 1 ) 120 dose inhaler INHALE 2 DOSES TWICE DAILY Mrs Tracy Connolly

20/04/2011 CLENIL MODULITE cfc free inh 100micrograms/actuation Supply: ( 1 ) 200 dose inhaler INHALE 2 DOSES TWICE DAILY Mrs Tracy Connolly

20/04/2011 PREDNISOLONE ec tab 5mg Supply: ( 40 ) tablet(s) TAKE 8 TABLETS ONCE DAILY (40MG) FOR 5 DAYS Mrs Tracy Connolly

11/04/2011 PREDNISOLONE ec tab 5mg Supply: ( 40 ) tablet(s) TAKE 8 TABLETS ONCE DAILY (40MG) FOR 5 DAYS Dr Central Healthcare

11/04/2011 FERROUS FUMARATE tabs 322mg Supply: ( 56 ) tablet(s) TAKE ONE TWICE A DAY

Instructions: please dispense weekly Dr Central Healthcare

05/04/2011 LEVOTHYROXINE tabs 25micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Dr. Locum

05/04/2011 LEVOTHYROXINE tabs 50micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Dr. Locum

05/04/2011 CITALOPRAM tabs 40mg Supply: ( 28 ) tablet(s) ONE TABLET(S) DAILY, DISPENSE WEEKLY Dr. Locum

31/03/2011 AMOXICILLIN caps 500mg Supply: ( 21 ) capsule(s) TAKE ONE 3 TIMES/DAY Dr. Locum

31/03/2011 Peak Flow Meter standard range Supply: ( 1 ) device(s) AS DIRECTED Dr. Locum

15/03/2011 ANUSOL HC oint Supply: ( 30 ) gram(s) APPLY AS DIRECTED TWICE A DAY AND AFTER EACH BOWEL MOVEMENT Dr Central Healthcare

07/03/2011 LEVOTHYROXINE tabs 50micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Dr. Locum

07/03/2011 LEVOTHYROXINE tabs 25micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Dr. Locum

07/03/2011 CITALOPRAM tabs 40mg Supply: ( 28 ) tablet(s) ONE TABLET(S) DAILY, DISPENSE WEEKLY Dr. Locum

07/03/2011 DICLOFENAC SODIUM ec tab 50mg Supply: ( 84 ) tablet(s) TAKE ONE 3 TIMES/DAY, DISPENSE WEEKLY Dr. Locum

07/03/2011 NITROFURANTOIN mr cap 100mg Supply: ( 14 ) capsule(s) TAKE ONE TWICE DAILY Dr. Locum

28/02/2011 DICLOFENAC SODIUM ec tab 50mg Supply: ( 84 ) tablet(s) TAKE ONE 3 TIMES/DAY, DISPENSE WEEKLY Dr. Locum

21/02/2011 TERBINAFINE crm 1% Supply: ( 30 ) gram(s) APPLY TWICE DAILY TO FEET Dr. Locum

## NHS Confidential: Personal data about a patient

Yvonne Jamieson 10/03/1982 390/82/223

Data Summary Sheet

21/02/2011 TOLNAFTATE foot spray 1% Supply: ( 1 ) 150ml aerosol SPRAY SHOES AS DIRECTED BY PODIATRIST Dr . Locum  
 21/02/2011 NITROFURANTOIN mr cap 100mg Supply: ( 14 ) capsule(s) TAKE ONE TWICE DAILY Dr . Locum  
 14/02/2011 LEVOTHYROXINE tabs 25micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Dr . Locum  
 14/02/2011 LEVOTHYROXINE tabs 50micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Dr . Locum  
 09/12/2011 CITALOPRAM tabs 40mg Supply: ( 28 ) tablet(s) ONE TABLET(S) DAILY, DISPENSE WEEKLY Dr . Locum  
 18/01/2011 LEVOTHYROXINE tabs 50micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Dr . Locum  
 18/01/2011 LEVOTHYROXINE tabs 25micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Dr . Locum  
 18/01/2011 CITALOPRAM tabs 20mg Supply: ( 28 ) tablet(s) ONE DAILY. DISPENSE WEEKLY Dr . Locum

## Active Care Management

No data recorded.

## Examination &amp; Lifestyle Findings

04/05/2011 12:07.00 BP 106 / 70 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Mrs Tracy Connolly  
 27/04/2011 09:30.00 BP 104 / 72 taken Sitting from Right Cuff: Standard recall due: O/E - blood pressure reading Mrs Lucille Ironside  
 27/04/2011 09:30.00 BP 93 / 62 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Mrs Lucille Ironside  
 15/03/2011 09:52.00 BP 110 / 70 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Mrs Tracy Connolly  
 14/01/2011 15:45.00 BP 111 / 73 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Mrs Lucille Ironside  
 14/01/2011 Height: 1.62 metres O/E - height Mrs Lucille Ironside  
 14/01/2011 Weight: 80.6 kgs BMI: 30.7 O/E - weight Mrs Lucille Ironside  
 No data recorded.  
 No data recorded.  
 11/05/2011 Peak exp. flow rate: PEFR/PFR : = 260 L/min Previous Best Ever = , Predicted = . Mrs Tracy Connolly  
 13/05/2011 Never smoked Never smoked tobacco Dr Shona Sinclair  
 14/01/2011 Never smoked Never smoked tobacco Mrs Lucille Ironside  
 14/01/2011 Current drinker units per week: 2 Alcohol consumption Mrs Lucille Ironside  
 14/01/2011 Enjoys light exercise Mrs Lucille Ironside  
 14/01/2011 Dietary history Eating habits: Moderate Type of diet: Mrs Lucille Ironside

## Test Results

13/06/2011 Biochemical screening test Results PRI Biochemistry Mrs Sharon Birrell  
 13/06/2011 Serum TSH level = 0.11 mu/L Below low reference limit mU/L Dr Central Healthcare  
 13/05/2011 Biochemical screening test Results PRI Biochemistry Mrs Sharon Birrell  
 13/05/2011 GFR calculated abbreviated MDRD > 60 mL/min GFR calculated abbreviated MDRD - Dr Central Healthcare  
 13/05/2011 Serum free T4 level = 19 pmol/L Dr Central Healthcare  
 13/05/2011 GFR calculated abbreviated MDRD adj for African Americ origin GFR calctd abttd MDRD Af Am or - IF HIGH RISK. EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA Dr Central Healthcare  
 13/05/2011 Blood Glucose = 4.3 mmol/L  
 13/05/2011 Serum urea level = 4.2 mmol/L Dr Central Healthcare  
 13/05/2011 Serum TSH level = 4.27 mu/L Above high reference limit mU/L Dr Central Healthcare  
 13/05/2011 Serum sodium = 141 mmol/L Dr Central Healthcare  
 13/05/2011 Serum potassium = 5 mmol/L POTASSIUM - Dr Central Healthcare  
 13/05/2011 Serum creatinine = 73 umol/L Dr Central Healthcare  
 13/05/2011 Serum total bilirubin level = 7 umol/L Dr Central Healthcare  
 13/05/2011 ALT/SGPT serum level = 19 u/L U/L Dr Central Healthcare  
 13/05/2011 Serum alkaline phosphatase = 73 u/L U/L Dr Central Healthcare  
 13/05/2011 Serum albumin = 44 g/L Dr Central Healthcare  
 13/05/2011 Basophil count = 0 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 13/05/2011 Haematocrit = 0.391 ratio Dr Central Healthcare  
 13/05/2011 Full blood count - FBC FBC Dr Central Healthcare  
 13/05/2011 Lymphocyte count = 1.6 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 13/05/2011 Total white cell count = 6.4 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 13/05/2011 Red blood cell (RBC) count = 4.5 10<sup>12</sup>/L x10<sup>12</sup>/L Dr Central Healthcare  
 13/05/2011 Platelet count = 219 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 13/05/2011 Neutrophil count = 4 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 13/05/2011 Monocyte count = 0.5 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 13/05/2011 Mean corpuscular volume (MCV) = 86.9 fL fl Dr Central Healthcare  
 13/05/2011 Mean corpusc. Hb. conc. (MCHC) = 32.7 g/dL Dr Central Healthcare  
 13/05/2011 Mean corpusc. haemoglobin(MCH) = 28.4 pg Dr Central Healthcare

## NHS Confidential: Personal data about a patient

Yvonne Jamieson 10/03/1982 390/82/223

Data Summary Sheet

13/05/2011 Haemoglobin estimation = 12.8 g/dL Dr Central Healthcare  
 13/05/2011 Eosinophil count = 0.1  $10^9/L$  x  $10^9/L$  Dr Central Healthcare  
 05/04/2011 Biochemical screening test Results PRI Biochemistry Mrs Sharon Birrell  
 05/04/2011 Biochemical screening test Results PRI Biochemistry Mrs Sharon Birrell  
 11/04/2011 Peak exp. flow rate: PEFR/PFR : = 260 L/min Previous Best Ever = , Predicted = . Mrs Tracy Connolly  
 31/03/2011 Peak flow rate before bronchodilation = 250 states best peak flow usually 350, has cough and sputum at present -  
 o/e chest no rhonchi and good air entry- pf poor technique and i think could probably have got higher. advised she should not  
 be on diclofenac with asthma as has become wheezy with ibuprofen in past Dr . Locum  
 15/03/2011 Urine dipstick test Normal Mrs Tracy Connolly  
 21/02/2011 Biochemical screening test Results PRI Biochemistry Mrs Sharon Birrell

## Last Encounter

01/07/2011 Administration Mrs Sharon Birrell - No Data Recorded

## last 4 Clinical Notes

21/06/2011 Mental health review Yvonne was adamant that she had made up her mind about going back to her husband.  
 Was reminded about why she left him in the first place however she said that he had promised to never abuse her again. Has  
 said that she will still have access to Kyle once a week and realises that she will now have no chance of getting him back.  
 Letter from doctor given to Yvonne. Mrs Nicola Patterson

20/06/2011 Referral for further care Administration Letter Letter from Doctor Mrs Sharon Birrell

20/06/2011 Administration letter for new gp Mrs Tracy Connolly

20/06/2011 Patient reviewed mood still low- but has decided to move back to husband in Forfar- goes this

Thursday-uncertain whether to keep fighting for son or to leave him permanently with sister-she will see solicitor but says  
 exhausted trying to fight all the time- increase fluoxetine to 40mg and write letter to new GP in Forfar Dr Shona Sinclair

NHS Confidential: Personal data about a patient

07546396169



Confidential Health Questionnaire for New Patients

Name: Yvonne Jamieson		GP: CHC
Address: 10 Waverly Hotel	Telephone:	GP Address:
DOB/CHI: 10/03/82		Telephone:
Next of Kin: Thomasina White		Dentist:
Relationship: mother		Ethnicity: Scottish
Address: Heron Court		Marital Status: Sep.
Telephone: PERTH		Occupation: Ux

Personal Medical History

Please detail any serious or chronic illnesses, operations or disabilities:  
(eg. Asthma, epilepsy)

Asthma  
 Under active therapy  
 2009 ? Heart murmur  
 Depression  
 Orain eye C-section Sept 2010

Are you allergic to anything?

Medication: morphine ?	Other:
------------------------	--------

Do you take any medicines?

Prescribed:	O.C.
Citalopram 20mg	*1
Traxoral 75mg	
Zopiclone 375mg	(was not on repeat)
Inhalers - sub	
Serostim evoinhale	11 x 2 days

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Family Medical History						
Have any of your close relatives (parents, brothers, sisters) suffered from any significant medical problems? Please detail:						
Heart Disease: <i>Father</i>	Cancer: <i>None</i>			Epilepsy: <i>None</i>		
Hypertension: <i>"</i>	Stroke: <i>"</i>			Diabetes: <i>Sister</i>		
Asthma, COPD: <i>Antonia</i>	Mental Health Problems: <i>Siblings</i>			Other: <i>"</i>		
Lifestyle						
<b>SMOKING</b>						
Do you smoke? <i>NO</i>	Have you ever smoked? <i>NO</i>			When did you stop? <i>-</i>		
Duration? <i>-</i>	How many cigs./ozs tobacco a day?			Written advice:		
Oral advice:	NRT:			Refer:		
Follow-up:						
ALCOHOL						
Do you drink alcohol?	<i>Social</i>					
Duration?	0	1	2	3	4	Score
How often do you have 8(men) 6(women) or more drinks on one occasion?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	<i>1</i>
How often in the last year have you not been able to remember what happened when drinking the night before?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	<i>1</i>
How often in the last year have you failed to do what was expected of you because of drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	<i>1</i>
Has a friend/relative/doctor/health worker been concerned about your drinking or advised you to cut down?	No		Yes but not in the last year		Yes, during last year	<i>1</i>
Brief Intervention:						
<b>DIET</b>						
Do you eat healthily? <i>YES</i>	Bowel Ca screening awareness?			Refer:		
Oral advice:						
<b>EXERCISE</b>						
Do you exercise? <i>YES</i>	Refer:					
Oral advice:	<i>Very active etc.</i>					

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<b>DRUGS</b>	
Do you use drugs? <b>NO</b>	Previous detox?
What?	Method / Amount:
Duration?	Frequency?
Abscesses / cellulitis?	Harm reduction advice:
Oral advice:	Refer:
<b>Lifestyle</b>	
<b>DENTAL HEALTH</b>	
Concerns?	
Oral advice:	Refer: <b>Aware of Service</b>
<b>PODIATRY</b>	
Concerns?	
Oral advice:	Refer: <b>Aware of Service</b>
<b>Immunisations</b>	
School: <input checked="" type="checkbox"/>	Influenza: <b>Dec - 2010. Fofarv</b>
BCG: <input checked="" type="checkbox"/>	Pneumonia: <b>July. 2010</b>
Men.C: <input checked="" type="checkbox"/>	Hepatitis A: <b>Course completed? <i>Swine Flu</i></b>
MMR: <input checked="" type="checkbox"/>	Hepatitis B: <b>Course completed? <i>2010</i></b>
Tetanus: <input checked="" type="checkbox"/>	
<b>AT RISK</b>	
(Blood) Screening offered?	Hepatitis B:
HIV:	Hepatitis C:
Written advice:	CXR in last 3 yrs?
<b>Sexual / Reproductive Health - Women</b>	
Current partner? <b>NO</b>	
Previous pregnancies? <b>3x 1 Boy</b>	<b>{ 1 stillborn 1 prem }</b>
Current pregnancy? <b>NO</b>	Last menstrual period:
Current menstrual cycle? <b>YES</b>	
Current method of contraception?	
Contraceptive advice given:	
Breast awareness / self examination / mammogram:	
Cervical screening awareness:	Last cervical smear?
Sexual health advice:	Cervical smear offered: <b>29 Dec</b>
	Refer:
<b>Sexual Health - Men</b>	
Current partner?	
Erectile dysfunction:	Prostate health:
Testicular self examination:	Sexual health advice:
	Refer:

NHS Confidential: Personal data about a patient

Mental Health		
History of mental illness? Diagnosis? <u>Depression</u>	Medication? <u>Cit.</u>	
Current concerns? <u>? postnatal</u>	<u>angina</u>	
During the past month have you often been bothered by feeling down, depressed or hopeless?		
During the past month have you often been bothered by little interest or pleasure in doing things?	Refer: CPN Counsellor: <u>YES</u>	
Have you ever been abused/bullied?..... (e.g. <u>childhood</u> Sexually, physically, verbally)		
Social Circumstances		
Contact with family members?	<u>Difficult at present</u>	
Dependants: <u>1 son - (living with carter)</u>		
Registered homeless? <u>YES</u>		
Time structuring interests? <u>NO</u>		
Other agency involvement? <u>S/W children services</u>		
<u>support worker, Gill McKernie</u>		
Examination		
Blood pressure: <u>111/73 p 68</u>	Urinalysis:	
Weight: <u>80.6</u>	Glucose: Protein:	
Height: <u>1.62's</u>	Chlamydia:	
BMI: <u>30.7</u>	C&S:	
FOLLOW-UP ARRANGEMENTS/ACTION PLAN		
Discharge From Service:		
Date discharged:		
Notification sent to:		
Reason for discharge:		
Follow-up arrangements:		
PRINT NAME: <u>IRONSDALE</u>	DESIGNATION: <u>CSN</u>	DATE: <u>14.1.11</u>
SIGNATURE: <u>[Signature]</u>		

**NHS Confidential: Personal data about a patient**

Operator T013A

**NHS Scotland**

Tuesday, 03/04/2012

**PSD WebCHI Patient Details**

⚠ Last Updated 29/03/2012

CHI Number: 1003820107 On: E	UPI Number: 1003820107 On: E	UPI Status: CURRENT	Namesake: None
Surname: JAMIESON	Forename: YVONNE	Conc Code:	
Birth Surname:	2nd Fname: MURPHY	Immig:	
Prev. Surname: MCLEAN	All. Fname:	Inst: 90	
Surname Changed: 26/11/2008 By T002A	Initials:	Hosp Rec: 0003	
Title:	Sex: Female	Comm Rec: 0004	
DOB: 10/03/1982 (CONFIRMED)	NHS Number: 390/82/223	Dispense: No	
Marital Status: Single		Gone Away:	
		Temp Res:	

Current Address:	Previous Address:	Road Miles:	Rst?
CATH HOUSE	C/O 5B LESLIE COURT	Foot Path Miles:	
47 YORK PLACE	FAIRFIELD AVENUE	Water Miles:	
PERTH	PERTH		
P.Code: PH28EH	P.Code: PH12TB		
	Address Changed 29/03/2012 By T002A		

Area of Res: T	Prac Ref: T1500(6)	Old Area:	
GP Ref: T7848(4)	Date Prac: 16/03/2012	Prev GP: T7585(0)	
Trans Reason: A	Phone: 01738 564261	Prev GP Date Acc: 06/02/2012	
Date Acc: 16/03/2012	Prac Name: CENTRAL HEALTHCARE	Reason Reg:	
GP Name: Dr. PRACTICE CENTRAL HEALTHCARE		New Area:	

**NHS Confidential: Personal data about a patient**

Operator T013A

**NHS Scotland**

Wednesday, 28/03/2012

**PSD WebCHI Patient Details**

*nel*

⚠ Last Updated 28/03/2012

CHI Number: 1003820107 On: E UPI Number: 1003820107 On: E UPI Status: CURRENT Namesake: None

Surname:	JAMIESON	Forename:	YVONNE	Conc Code:	
Birth Surname:		2nd Fname:	MURPHY	Immig:	
Prev. Surname:	MCLEAN	Alt. Fname:		Inst:	99
Surname Changed:	26/11/2008 By T002A	Initials:		Hosp Rec:	0003
Title:		Sex:	Female	Comm Rec:	0004
DOB:	10/03/1982 (CONFIRMED)	NHS Number:	390/82/223	Dispense:	No
Marital Status:	Single.			Gone Away:	
				Temp Res:	

Current Address:	Previous Address:	Road Miles:	Rst?
C/O 5B LESLIE COURT	194A MONTROSE STREET	Foot Path Miles:	
FAIRFIELD AVENUE	BRECHIN	Water Miles:	
PERTH			
P.Code: PH12TB	R.Code: DD97DZ		
	Address Changed 19/03/2012 By T002A		

Area of Res:	T	Prac Ref:	T1500(6)	Old Area:	
GP Ref:	T7848(4)	Date Prac:	16/03/2012	Prev GP:	T7585(0)
Trans Reason:	A	Phone:	01738 564261	Prev GP Date Acc:	06/02/2012
Date Acc:	16/03/2012	Prac Name:	CENTRAL HEALTHCARE	Reason Reg:	
GP Name:	Dr. PRACTICE CENTRAL HEALTHCARE			New Area:	

## NHS Confidential: Personal data about a patient

Operator T013A

NHS Scotland

Thursday, 16/02/2012

## PSD WebCHI Patient Details

⚠ Last Updated 07/02/2012

CHI Number: 1003820107 On: E UPI Number: 1003820107 On: E UPI Status: CURRENT Namesake: None

Surname:	JAMIESON	Forename:	YVONNE	Conc Code:	
Birth Surname:		2nd Fname:	MURPHY	Immig:	
Prev. Surname:	MCLEAN	Alt. Fname:		Inst:	
Surname Changed:	26/11/2008 By T002A	Initials:		Hosp Rec:	0003
Title:		Sex:	Female	Comm Rec:	0004
DOB:	10/03/1982 (CONFIRMED)	NHS Number:	390/82/223	Dispense:	No
Marital Status:	Single			Gone Away:	
				Temp Res:	

Current Address:	Previous Address:	Road Miles:	Rst?
194A MONTROSE STREET	GREYFRIARS HOUSE	Foot Path Miles:	
BRECHIN	55 PRINCES STREET	Water Miles:	
	PERTH		
P.Code: DD97DZ	P.Code: PH28LJ		
	Address Changed: 07/02/2012 By T002A		

Area of Res:	T	Prac Ref:	T1049(8)	Old Area:	
GP Ref:	T7585(0)	Date Prac:	06/02/2012	Prev GP:	T7848(4)
Trans Reason:	A	Phone:	01356 624411	Prev GP Date Acc:	10/01/2012
Date Acc:	06/02/2012	Prac Name:	BRECHIN HEALTH CENTRE	Reason Reg:	
GP Name:	Dr. VICTORIA L RIPLEY			New Area:	

Further notes to come

**NHS Confidential: Personal data about a patient**

**PATIENT TRANSFER NOTIFICATION FORM**

Please enter the patient details below or alternatively attach a printed label if you prefer

Please enter the Practice Stamp in the box below

Forename YVONNE  
Surname JAMIESON  
CHI No 1003820107  
(please note the full CHI No)

CENTRAL HEALTHCARE  
DRUMHAR HEALTH CENTRE  
NORTH METHVEN STREET  
PERTH  
TEL: 01738 564261  
FAX: 01738 564203

Does the patient have a paper medical record:

Yes, attached  No, there is no paper record

The Patient Summary is:

Scanned into Docman  Within the Paper Record  Attached (only document)

Does the patient have Docman images:

Yes, already transferred  To be transferred  No images

See MLE

## NHS Confidential: Personal data about a patient

Yvonne Jamieson 10/03/1982 390/82/223

Data Summary Sheet

## R Data Summary Sheet

Yvonne Jamieson 10/03/1982 Female NHS: 390/82/223 CHI: 1003820107

Greyfriars House 55 Princes Street Perth PH2 8LJ

No data recorded.

14/01/2011 Height: 1.62 metres O/E - height Mrs Lucille Ironside

14/01/2011 Weight: 80.6 kgs BMI: 30.7 O/E - weight Mrs Lucille Ironside

03/01/2012 11:20.00 BP 101 / 77 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Mrs Tracy Connolly

## Significant Medical History

09/02/2011 Symptoms of depression Dr. Locum

No data recorded.

No data recorded.

## Screening

No data recorded.

## Priority Clinical / User Marker

09/02/2011 Symptoms of depression Dr. Locum

## Acute Prescriptions

16/01/2012 FERROUS FUMARATE tabs 322mg Supply: ( 56 ) tablet TAKE ONE TWICE A DAY

Instalments: please dispense weekly Mrs Tracy Connolly

10/01/2012 PARACETAMOL tabs 500mg Supply: ( 24 ) tablet TAKE 1 OR 2 FOUR TIMES DAILY NO MORE THAN 8

TABLETS IN A DAY Mrs Tracy Connolly

05/01/2012 AMOXICILLIN caps 500mg Supply: ( 21 ) capsule TAKE ONE THREE TIMES DAILY Mrs Tracy Connolly

20/06/2011 FLUOXETINE caps 20mg Supply: ( 14 ) capsule(s) TAKE TWO DAILY OR DISPENSE FROM 22/6/11 Mrs Tracy Connolly

03/06/2011 FLUOXETINE caps 20mg Supply: ( 28 ) capsule(s) TAKE ONE DAILY-WEEKLY DISPENSE Dr Central Healthcare

03/06/2011 FLUCLOXACILLIN caps 500mg Supply: ( 28 ) capsule(s) TAKE ONE 4 TIMES/DAY Dr Central Healthcare

02/06/2011 CLOTRIMAZOLE crm 1% Supply: ( 20 ) gram(s) APPLY 2-3 TIMES/DAY Mrs Tracy Connolly

27/05/2011 CITALOPRAM tabs 40mg Supply: ( 28 ) tablet(s) ONE TABLET(S) DAILY, DISPENSE WEEKLY Mrs Tracy Connolly

13/05/2011 PROMETHAZINE HCl tabs 25mg Supply: ( 3 ) tablet(s) TAKE ONE AT NIGHT Mrs Tracy Connolly

03/05/2011 CITALOPRAM tabs 40mg Supply: ( 28 ) tablet(s) ONE TABLET(S) DAILY, DISPENSE WEEKLY Mrs Tracy Connolly

03/05/2011 LEVOTHYROXINE tabs 50micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Mrs Tracy Connolly

03/05/2011 LEVOTHYROXINE tabs 25micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Mrs Tracy Connolly

22/04/2011 GAVISCON ADVANCE ANISEED sf oral susp Supply: ( 500 ) mls aniseed 5ML OR 10ML 4 TIMES/DAY Dr Central Healthcare

20/04/2011 SALMETEROL cfc free inh 25micrograms/actuation Supply: ( 1 ) 120 dose inhaler INHALE 2 DOSES TWICE DAILY Mrs Tracy Connolly

20/04/2011 CLENIL MODULITE cfc free inh 100micrograms/actuation Supply: ( 1 ) 200 dose inhaler INHALE 2 DOSES TWICE DAILY Mrs Tracy Connolly

20/04/2011 PREDNISOLONE ec tab 5mg Supply: ( 40 ) tablet(s) TAKE 8 TABLETS ONCE DAILY (40MG) FOR 5 DAYS Mrs Tracy Connolly

11/04/2011 PREDNISOLONE ec tab 5mg Supply: ( 40 ) tablet(s) TAKE 8 TABLETS ONCE DAILY (40MG) FOR 5 DAYS Dr Central Healthcare

11/04/2011 FERROUS FUMARATE tabs 322mg Supply: ( 56 ) tablet(s) TAKE ONE TWICE A DAY

Instalments: please dispense weekly Dr Central Healthcare

05/04/2011 LEVOTHYROXINE tabs 25micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Dr. Locum

05/04/2011 LEVOTHYROXINE tabs 50micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Dr. Locum

05/04/2011 CITALOPRAM tabs 40mg Supply: ( 28 ) tablet(s) ONE TABLET(S) DAILY, DISPENSE WEEKLY Dr. Locum

31/03/2011 AMOXICILLIN caps 500mg Supply: ( 21 ) capsule(s) TAKE ONE 3 TIMES/DAY Dr. Locum

31/03/2011 Peak Flow Meter standard range Supply: ( 1 ) device(s) AS DIRECTED Dr. Locum

15/03/2011 ANUSOL HC oint Supply: ( 30 ) gram(s) APPLY AS DIRECTED TWICE A DAY AND AFTER EACH BOWEL MOVEMENT Dr Central Healthcare

07/03/2011 LEVOTHYROXINE tabs 50micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Dr. Locum

07/03/2011 LEVOTHYROXINE tabs 25micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE WEEKLY Dr. Locum

07/03/2011 CITALOPRAM tabs 40mg Supply: ( 28 ) tablet(s) ONE TABLET(S) DAILY, DISPENSE WEEKLY Dr. Locum

07/03/2011 DICLOFENAC SODIUM ec tab 50mg Supply: ( 84 ) tablet(s) TAKE ONE 3 TIMES/DAY, DISPENSE WEEKLY Dr. Locum

## NHS Confidential: Personal data about a patient

Yvonne Jamieson 10/03/1982 390/82/223

Data Summary Sheet

07/03/2011 NITROFURANTOIN mr cap 100mg Supply: ( 14 ) capsule(s) TAKE ONE TWICE DAILY Dr . Locum  
 28/02/2011 DICLOFENAC SODIUM ec tab 50mg Supply: ( 84 ) tablet(s) TAKE ONE 3 TIMES/DAY, DISPENSE WEEKLY Dr .  
 Locum  
 21/02/2011 TERBINAFINE crm 1% Supply: ( 30 ) gram(s) APPLY TWICE DAILY TO FEET Dr . Locum  
 21/02/2011 TOLNAFTATE foot spray 1% Supply: ( 1 ) 150ml aerosol SPRAY SHOES AS DIRECTED BY PODIATRIST Dr .  
 Locum  
 21/02/2011 NITROFURANTOIN mr cap 100mg Supply: ( 14 ) capsule(s) TAKE ONE TWICE DAILY Dr . Locum  
 14/02/2011 LEVOTHYROXINE tabs 25micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE  
 WEEKLY Dr . Locum  
 14/02/2011 LEVOTHYROXINE tabs 50micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE  
 WEEKLY Dr . Locum  
 09/02/2011 CITALOPRAM tabs 40mg Supply: ( 28 ) tablet(s) ONE TABLET(S) DAILY, DISPENSE WEEKLY Dr . Locum  
 18/01/2011 LEVOTHYROXINE tabs 50micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE  
 WEEKLY Dr . Locum  
 18/01/2011 LEVOTHYROXINE tabs 25micrograms Supply: ( 28 ) tablet(s) TAKE ONE EACH MORNING. DISPENSE  
 WEEKLY Dr . Locum  
 18/01/2011 CITALOPRAM tabs 20mg Supply: ( 28 ) tablet(s) ONE DAILY. DISPENSE WEEKLY Dr . Locum

## Active Care Management

No data recorded.

## Examination &amp; Lifestyle Findings

05/01/2012 11:20.00 BP 101 / 77 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Mrs  
 Tracy Connolly

04/05/2011 12:07.00 BP 106 / 70 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Mrs  
 Tracy Connolly

27/04/2011 09:30.00 BP 104 / 72 taken Sitting from Right Cuff: Standard recall due: O/E - blood pressure reading Mrs  
 Lucille Ironside

27/04/2011 09:30.00 BP 93 / 62 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Mrs  
 Lucille Ironside

15/03/2011 09:52.00 BP 110 / 70 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Mrs  
 Tracy Connolly

14/01/2011 15:45.00 BP 111 / 73 taken Sitting from Left Cuff: Standard recall due: O/E - blood pressure reading Mrs  
 Lucille Ironside

14/01/2011 Height: 1.62 metres O/E - height Mrs Lucille Ironside

14/01/2011 Weight: 80.6 kgs BMI: 30.7 O/E - weight Mrs Lucille Ironside

No data recorded.

No data recorded.

05/01/2012 Peak exp. flow rate: PEF/PFR : = 300 L/min Device Type: Wright Previous Best Ever = 260.0, Predicted =  
 485.5. Mrs Tracy Connolly

11/04/2011 Peak exp. flow rate: PEF/PFR : = 260 L/min Previous Best Ever = , Predicted = . Mrs Tracy Connolly

13/05/2011 Never smoked Never smoked tobacco Dr Shona Sinclair

14/01/2011 Never smoked Never smoked tobacco Mrs Lucille Ironside

14/01/2011 Current drinker units per week: 2 Alcohol consumption Mrs Lucille Ironside

14/01/2011 Enjoys light exercise Mrs Lucille Ironside

14/01/2011 Dietary history Eating habits: Moderate Type of diet: Mrs Lucille Ironside

## Test Results

10/01/2012 Biochemical screening test Results PRI Biochemistry Mrs Sharon Birrell

10/01/2012 Basophil count = 0 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare

10/01/2012 Haematocrit = 0.378 ratio Dr Central Healthcare

10/01/2012 Full blood count - FBC = FBC Dr Central Healthcare

10/01/2012 Lymphocyte count = 1.5 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare

10/01/2012 Total white cell count = 6.2 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare

10/01/2012 Red blood cell (RBC) count = 4.4 10<sup>12</sup>/L x10<sup>12</sup>/L Dr Central Healthcare

10/01/2012 Platelet count = 225 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare

10/01/2012 Neutrophil count = 4.1 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare

10/01/2012 Monocyte count = 0.5 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare

10/01/2012 Mean corpuscular volume (MCV) = 85.9 fL Dr Central Healthcare

10/01/2012 Mean corpusc. Hb. conc. (MCHC) = 31.5 g/dL Below low reference limit Dr Central Healthcare

10/01/2012 Mean corpusc. haemoglobin(MCH) = 27 pg Dr Central Healthcare

10/01/2012 Haemoglobin estimation = 11.9 g/dL Below low reference limit Dr Central Healthcare

10/01/2012 Eosinophil count = 0.1 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare

10/01/2012 GFR calculated abbreviated MDRD > 60 mL/min GFR calculated abbreviated MDRD - Dr Central Healthcare

10/01/2012 GFR calculated abbreviated MDRD adj for African American origin GFR calctd abttd MDRD Af Am or - IF HIGH RISK,

EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA Dr Central Healthcare

10/01/2012 Blood Glucose = 5.2 mmol/L

10/01/2012 Serum urea level = 5.3 mmol/L Dr Central Healthcare

10/01/2012 Serum TSH level = 1.6 mu/L mU/L Dr Central Healthcare

## NHS Confidential: Personal data about a patient

Yvonne Jamieson 10/03/1982 390/82/223

Data Summary Sheet

10/01/2012 Serum sodium = 141 mmol/L Dr Central Healthcare  
 10/01/2012 Serum potassium = 4.1 mmol/L POTASSIUM - Dr Central Healthcare  
 10/01/2012 Serum creatinine = 70 umol/L Dr Central Healthcare  
 10/01/2012 Serum total bilirubin level = 8 umol/L Dr Central Healthcare  
 10/01/2012 Serum alanine aminotransferase level = 17 u/L Serum ALT level - U/L Dr Central Healthcare  
 10/01/2012 Serum alkaline phosphatase = 80 u/L U/L Dr Central Healthcare  
 10/01/2012 Serum albumin = 44 g/L Dr Central Healthcare  
 05/01/2012 Peak exp. flow rate: PEF/PFR : = 300 L/min Device Type: Wright Previous Best Ever = 260.0, Predicted = 485.5. Mrs Tracy Connolly  
 13/06/2011 Biochemical screening test Results PRI Biochemistry Mrs Sharon Birrell  
 13/06/2011 Serum TSH level = 0.11 mu/L Below low reference limit mU/L Dr Central Healthcare  
 13/05/2011 Biochemical screening test Results PRI Biochemistry Mrs Sharon Birrell  
 13/05/2011 GFR calculated abbreviated MDRD > 60 mL/min GFR calculated abbreviatd MDRD - Dr Central Healthcare  
 13/05/2011 Serum free T4 level = 19 pmol/L Dr Central Healthcare  
 13/05/2011 GFR calculated abbreviated MDRD adj for African Americ origin GFR calctd abbtid MDRD Af Am or - IF HIGH RISK, EXCLUDE CKD1/2. CHECK FOR HAEMATURIA AND PROTEINURIA Dr Central Healthcare  
 13/05/2011 Blood Glucose = 4.3 mmol/L  
 13/05/2011 Serum urea level = 4.2 mmol/L Dr Central Healthcare  
 13/05/2011 Serum TSH level = 4.27 mu/L Above high reference limit mU/L Dr Central Healthcare  
 13/05/2011 Serum sodium = 141 mmol/L Dr Central Healthcare  
 13/05/2011 Serum potassium = 5 mmol/L POTASSIUM - Dr Central Healthcare  
 13/05/2011 Serum creatinine = 73 umol/L Dr Central Healthcare  
 13/05/2011 Serum total bilirubin level = 7 umol/L Dr Central Healthcare  
 13/05/2011 ALT/SGPT serum level = 19 u/L U/L Dr Central Healthcare  
 13/05/2011 Serum alkaline phosphatase = 73 u/L U/L Dr Central Healthcare  
 13/05/2011 Serum albumin = 44 g/L Dr Central Healthcare  
 13/05/2011 Basophil count = 0 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 13/05/2011 Haematocrit = 0.391 ratio Dr Central Healthcare  
 13/05/2011 Full blood count - FBC FBC Dr Central Healthcare  
 13/05/2011 Lymphocyte count = 1.6 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 13/05/2011 Total white cell count = 6.4 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 13/05/2011 Red blood cell (RBC) count = 4.5 10<sup>12</sup>/L x10<sup>12</sup>/L Dr Central Healthcare  
 13/05/2011 Platelet count = 219 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 13/05/2011 Neutrophil count = 4 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 13/05/2011 Monocyte count = 0.5 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 13/05/2011 Mean corpuscular volume (MCV) = 86.9 fL fL Dr Central Healthcare  
 13/05/2011 Mean corpusc. Hb. conc. (MCHC) = 32.7 g/dL Dr Central Healthcare  
 13/05/2011 Mean corpusc. haemoglobin(MCH) = 28.4 pg Dr Central Healthcare  
 13/05/2011 Haemoglobin estimation = 12.8 g/dL Dr Central Healthcare  
 13/05/2011 Eosinophil count = 0.1 10<sup>9</sup>/L x10<sup>9</sup>/L Dr Central Healthcare  
 05/04/2011 Biochemical screening test Results PRI Biochemistry Mrs Sharon Birrell  
 05/04/2011 Biochemical screening test Results PRI Biochemistry Mrs Sharon Birrell  
 11/04/2011 Peak exp. flow rate: PEF/PFR : = 260 L/min Previous Best Ever = , Predicted = . Mrs Tracy Connolly  
 31/03/2011 Peak flow rate before bronchodilation = 250 states best peak flow usually 350, has cough and sputum at present -  
 /e chest no rhonchi and good air entry- pf poor technique and i think could probably have got higher. advised she should not  
 be on diclofenac with asthma as has become wheezy with ibuprofen in past Dr . Locum  
 15/03/2011 Urine dipstick test Normal Mrs Tracy Connolly  
 21/02/2011 Biochemical screening test Results PRI Biochemistry Mrs Sharon Birrell

## Last Encounter

08/02/2012 Administration Mrs Sharon Birrell

08/02/2012 Patient de-reg. MRE to HB Dr Central Healthcare

## last 4 Clinical Notes

08/02/2012 Patient de-reg. MRE to HB Dr Central Healthcare

18/01/2012 Seen by community nurse moving to Angus on friday, requesting that she could collect medication from pharmacy early as it is weekly dispensed, this was cleared with PN . contacted pharmacy and arrange for medication to be released early.

Also contacted Salvation army regarding food parcel as Yvonne has no food at present, and not receiving any benefits until next Friday. Food parcel obtained from SAMy today.

Mrs Lucille Ironside

16/01/2012 Consultation Review of chest infection by L Ironside CMN under supervision

Discussed B/T results and re- Hb as mentioned by Dr Sinclair - Yvonne says yes heavy periods since Implanon removed but does not want any intervention and not wanting to discuss further contraception at this time -agree to Iron supplements as prescribed -take iron and levothyroxine and hour apart Mrs Tracy Connolly

**NHS Confidential: Personal data about a patient**

Yvonne Jamieson 10/03/1982 390/82/223

Data Summary Sheet

16/01/2012 Patient reviewed Finished prescribed antibiotics, feeling better. good diet and fluids taken.  
obs. norotensive. rr. 16 Temp 36.6 Pr 68. NIBP 105/73  
no cough, no phelgm. no lymphadenopathy. Thyroid felt.  
L ear clear TMP intack and no perferation, R clear, TPM intack no perferation scarring to upper quadent from possible  
grommet.  
Throat uvual central, tonsiles inspected , clear no redness or infection noted.  
Chest sounded, good breath sounds no audible wheeze noted., no chest tightness or shortness of breath. ~Using inhalers as  
prescribed for Asthma.  
mpression. URTI now resolved. Mrs Lucille Ironside