

PATCH TEST / CUTANEOUS ALLERGY REFERRAL FORM

GRATTON
LEON
3 Makgill Row
Springfield
CUPAR
KY15 5SA

AF5403178H

17/03/1975
1703751191

patches
4/12

Date of referral

19/9/17

Consultant

Dr Fooker

Referred by

W. Gaskin

Notes required

NW / Perth / Angus / Fife

(Please circle)

After completion of phototherapy

Yes / No

(Please circle)

Groups		Please tick
A	Latex allergy Contact urticaria Complex occupational	
B	Confirmation of allergy after reacted to common products or treatment Confirmation or exclusion of contact allergy in straightforward cases of localised eczema (e.g. hands and feet), atopic eczema, leg ulcer, vulval disease, and other primary diseases (e.g. psoriasis, rosacea, seborrhoeic dermatitis)	✓
C	Others	

For unusual cases / tests (eg intradermal testing), please discuss with Dr Ghaffar.

If needing urgent appointments, please discuss with either Dr Ghaffar or Dr Green.

PLEASE REMEMBER TO GIVE THE PATCH TEST/CUTANEOUS ALLERGY INFORMATION LEAFLET TO THE PATIENT.

**PLEASE SEND THE FORM TO THE DERMATOLOGY SECRETARIES, NINEWELLS.
FOR PATIENTS IN OTHER HOSPITALS, PLEASE SCAN & EMAIL THE FORM FIRST
TO Tay.UHB.patchtest@nhs.net BEFORE SENDING.**

4/12/17

NHS Tayside

Cutaneous Allergy Unit Data Form

updated Jan 2017

I GRATTON L LEON 3 Makgill Row N Springfield S CUPAR KY15 5SA C _____ C _____	AF5403178H 17/03/1975 1703751191	Pregnancy ☐ Recent UV ☐ Immunosuppression ☐ Topical steroids ☐ Active rash on back ☐ Antihistamines ☐ (for immediate tests only) None of the above ☐	Date tested _____ Authorised _____ Applied _____ Not tested _____
--	--	--	--

Clinical notes

Latex
 Gloves
 Condoms
 Fruits
 Balloons
 Dentist/Hospital
 Other
 Local/Rhinoconjunctival/Systemic reactions

Treatment

Sites Affected (2 Maximum, rank 1,2)

Hand	- not specified		Ear	Not specified		Arm	Not specified	
	-entire			Canal			Elbow	
	-back (dorsal)			Lobe			Lower arm	
	-palm (not spec)		Neck	Not specified			Upper arm	
	-palm central			Front			Wrist-entire	
	-palm (peripheral)			Back			Wrist-extensor	
	-finger (not spec)			Side			Wrist-flexor	
	-finger interdigital		Trunk	Not specified		Leg	Not specified	
	-finger tip			Front			Upper leg	
Face	-not specified			Back			Knee	
	-eyelid			Groin			Lower leg	
	-periorbital			Axilla		Foot	Not specified	
	-mouth-lip		Perineal	Ano-genital			Toe	
	-oral mucosa			Peri-anal			Dorsum	
	peri-oral			Genital			sole	
Head	Not specified		Flexures	Not specified		Generalised	generalised	
	Scalp-not spec.			Elbow				
	Scalp-margin			politeal				
	Scalp-centre							

Atopy (Tick if yes)

Eczema ☐

Rhino-conjunctivitis ☐

Asthma ☐

FH atopy ☐

Duration

0-3 months ☐

4-12 months ☐

1-3 yrs ☐

4-7 yrs ☐

>8 yrs ☐

Suspected Allergy

Nickel ☐

Fragrance ☐

Previous Patch test Yes/No

Results:

Occupation

Main

Industry

Duration

Other

PPE

Full time/part time

Work related? Yes ☐ No ☐ Unsure ☐

Hobbies

Small children Yes No

Pets Yes No

Contactants		
Clothing, textiles ☐	Cutting fluids ☐	Food - skin contact ☐
Shoes, boots ☐	Oils/greases ☐	Animal proteins ☐
Gloves ☐	Solvents ☐	Building materials ☐
Leather, other ☐	Rinse off, shampoo ☐	Glues ☐
Rubber (other) ☐	Disinfecting wash ☐	Woods ☐
Dressing ☐	Alcohol gel ☐	Paints, lacquers ☐
Plastics ☐	Skin wipes ☐	Plants, not food ☐
Metal jewellery ☐	Detergent cleaners ☐	Pesticides, herbicides ☐
Metal (eg coins) ☐	Surface wipes ☐	House dust ☐
Tools (metal, etc) ☐	Disinfectants, bleaches ☐	Office materials ☐
Dental prostheses ☐	Leave-on cosmetics ☐	External drugs ☐
Dental fillings ☐	Hair cosmetics ☐	Internal drugs ☐
Metal implants ☐	Nail cosmetics ☐	Medical materials ☐
Metal (worked with) ☐	Perfume, deodorant ☐	

Tests Performed

Patch Tests			
BSCA Standard ☒	Face ☐	Hairdressing ☐	Shoe ☐
Medicament ☒	Perfume ☐	Bakery ☐	Textile ☐
Corticosteroid ☒	Sunscreen ☐	Dental ☐	Epoxy resin ☐
Leg ☐	Plant ☐	Oral ☐	Acrylate ☐
Ear ☐	Rubber ☐	Local anaesthetic ☐	Plastic and glue ☐
Eye ☐	Vulval ☐	Staff ☐	Oils and coolants ☐
Orthopaedic ☐	Prosthesis ☐		
Own ☒	Other ☐		

Immediate tests

Open patch test

Food additives ☐

Other ☐

Skin Prick test

Intradermal test

Glove challenge

Other tests

Swab ☐ Scraping ☐ IgE ☐

CHECK LIST

CONSENT ☐

SERIES ☐

OWN PRODUCTS..... ☐

FLUIDS ☐

PRESCRIPTION RECOMMENDATION FOR ACTION BY THE G.P.

Patient stic GRATTON - LEON 3 Makgill Row Springfield CUPAR KY15 5SA	AF5403178H 17/03/1975 1703751191
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I RECOMMEND THE FOLLOWING CHANGE IN PRESCRIPTION(S) FOR THE ABOVE NAMED:

ALTERATION OF DOSE

Name	Old Strength	Old Frequency	New Strength	New Frequency

NEW MEDICATION

Name	Is it on Fife Formulary?	Formulation	Strength	Frequency	Anticipated Duration	Reason
<i>Protopik</i>	Yes / No	<i>tablet</i>	<i>0.035</i>	<i>bd</i>	<i>2/12</i>	<i>eczema</i>
	Yes / No					
	Yes / No					

STOPPED MEDICATION

Name	Reason for stopping	Code

CODE

1. Ineffective
 2. Adverse event
 3. Inter-action
 4. Compliance problem
 5. Other (explain)

The above changes have already been implemented	YES ☐	NO ☐
The patient has been instructed to contact surgery	YES ☐	NO ☐
The GP practice is requested to implement the change without further contact	YES ☒	NO ☐

NOTES:

- If prescription is required quickly, it should be issued on a "Blue Pad"
- Illegible or ambiguous prescriptions will NOT be issued without phoning the named doctor
- Please ask patient to allow 24 hours for prescription to be issued by GP

COMMENTS

DOCTORS NAME: *DR K N*

CLINIC/DEPT: *Deemo Hagg*

SIGNATURE: *[Signature]*

DATE: *[Date]*

BLEEP NUMBER:

WHITE COPY: General Practitioner

BLUE COPY: Patients Notes

PRESCRIPTION RECOMMENDATION FOR ACTION BY THE G.P.

Patient GRATTON LEON 3 Makgill Row Springfield CUPAR KY15 5SA	AF5403178H 17/03/1975 1703751191
---	--

I RECOMMEND THE FOLLOWING CHANGE IN PRESCRIPTION(S) FOR THE ABOVE NAMED:

ALTERATION OF DOSE

Name	Old Strength	Old Frequency	New Strength	New Frequency

NEW MEDICATION

Name	Is it on Fife Formulary?	Formulation	Strength	Frequency	Anticipated Duration	Reason
<i>Fucidet</i>	Yes / No	<i>ointment</i>		<i>bd</i>	<i>3-4/12</i>	<i>100g eczema</i>
<i>Cetirizine</i>	Yes / No	<i>tab</i>	<i>10mg</i>	<i>daily</i>	<i>2/12</i>	
	Yes / No					

STOPPED MEDICATION

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The above changes have already been implemented YES ☐ NO ☐

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The GP practice is requested to implement the change without further contact YES ☒ NO ☐

NOTES:

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- Please ask patient to allow 24 hours for prescription to be issued by GP

COMMENTS

DOCTORS NAME: *DR K. N.*

CLINIC/DEPT: *Dermatology OPD*

SIGNATURE: *[Signature]*

DATE: *13/12/18*

BLEEP NUMBER:

WHITE COPY: General Practitioner

BLUE COPY: Patients Notes

PRESCRIPTION RECOMMENDATION FOR ACTION BY THE G.P.

Patient sticker here

I RECOMMEND THE FOLLOWING CHANGE IN PRESCRIPTION(S) FOR THE ABOVE NAMED:

ALTERATION OF DOSE

Name	Old Strength	Old Frequency	New Strength	New Frequency

NEW MEDICATION

Name	Is it on Fife Formulary?	Formulation	Strength	Frequency	Anticipated Duration	Reason
Dem 200	Yes / No	1000 mg		Daily		Review
Citalopram	Yes / No	100 mg		do 2x daily		
Fructol	Yes / No	100 mg			1000	

STOPPED MEDICATION

Name	Reason for stopping	Code

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The GP practice is requested to implement the change without further contact YES ☒ NO ☐

NOTES:

- If prescription is required quickly, it should be issued on a "Blue Pad"
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- Please ask patient to allow 24 hours for prescription to be issued by GP

COMMENTS

DOCTORS NAME: *Dr. K...*

CLINIC/DEPT: *Dem OPD*

SIGNATURE: *[Signature]*

DATE: *13/1/11*

BLEEP NUMBER:

WHITE COPY: General Practitioner

BLUE COPY: Patients Notes

PRESCRIPTION RECOMMENDATION FOR ACTION BY THE G.P.

Patient	GRATTON LEON 3 Makgill Row Springfield CUPAR KY15 5SA	AF5403178H
		17/03/1975 1703751191

I RECOMMEND THE FOLLOWING CHANGE IN PRESCRIPTION(S) FOR THE ABOVE NAMED:

ALTERATION OF DOSE

Name	Old Strength	Old Frequency	New Strength	New Frequency

NEW MEDICATION

Name	Is it on Fife Formulary?	Formulation	Strength	Frequency	Anticipated Duration	Reason
Flucloxacillin	Yes / No	caps	500mg	qds	28	infected eczema
Flutibet	Yes / No	ointment		6x	for 2-3 days	than 2-3 times daily
	Yes / No					

STOPPED MEDICATION

Name	Reason for stopping	Code

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The above changes have already been implemented	YES ☐	NO ☐
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The GP practice is requested to implement the change without further contact	YES ☒	NO ☐

NOTES:

- If prescription is required quickly, it should be issued on a "Blue Pad"
- Illegible or ambiguous prescriptions will NOT be issued without phoning the named doctor
- Please ask patient to allow 24 hours for prescription to be issued by GP

COMMENTS

DOCTORS NAME: *DR N*

CLINIC/DEPT: *Remnet NZ*

SIGNATURE: *[Signature]*

DATE: *20/3*

BLEEP NUMBER:

WHITE COPY: General Practitioner

BLUE COPY: Patients Notes

PRESCRIPTION RECOMMENDATION FOR ACTION BY THE G.P.

Patient sticker here

I RECOMMEND THE FOLLOWING CHANGE IN PRESCRIPTION(S) FOR THE ABOVE NAMED:

ALTERATION OF DOSE

Name	Old Strength	Old Frequency	New Strength	New Frequency

NEW MEDICATION

Name	Is it on Fife Formulary?	Formulation	Strength	Frequency	Anticipated Duration	Reason
Potage	Yes / No	Shutout		2-3 times	1-2 hrs	depression
Diazepam	Yes / No			60	10 feet	
Prozac	Yes / No	rob	50mg	100	1/2	anxiety

STOPPED MEDICATION

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CODE

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5. Other (explain)

The above changes have already been implemented YES ☐ NO ☐

The patient has been instructed to contact surgery YES ☐ NO ☐

The GP practice is requested to implement the change without further contact YES ☐ NO ☒

NOTES:

- If prescription is required quickly, it should be issued on a "Blue Pad"
- Illegible or ambiguous prescriptions will NOT be issued without phoning the named doctor
- Please ask patient to allow 24 hours for prescription to be issued by GP

COMMENTS

DOCTORS NAME: *Dr. K. J.*

CLINIC/DEPT: *Depts. GP*

SIGNATURE: *[Signature]*

DATE: *2-10*

BLEEP NUMBER:

WHITE COPY: General Practitioner

BLUE COPY: Patients Notes

Patient sticker here

— — — — —

PREScription RECOMMENDATION

N.B. If the medicine needs to be started within 3 working days, it should be prescribed on a HBP prescription for supply from a community pharmacy or if it is a hospital only medicine a White Hospital prescription form.

I recommend the following change in prescribed medicine(s) for the above named patient

[illegible]

Prescriber Name	Clinic/Dept	Date
Signature	Professional Registration Number	Contact Number

WHITE COPY : General Practitioner

BLUE COPY: Patient's Notes

PINK COPY: Pharmacy department

MS1402A

HISTORY/CONTINUATION SHEET

Ward/Clinic/
Hosp

Cons.

Surname GRATTON
First Name LEON
Address 5 Macgill Row
Springfield
Occupation CUPAR
KY15 5SA

AF5403178H

Unit No.

D. of B.

17/03/1975

M. State

1703751191

Sex

G.P. & Address

UNIT/WARD/DEPT

USE BLOCK CAPITALS

DATE

13/9/16 41yo ♂, atopic dermatitis for years, was attending VNK
but now difficult to travel so prefers St Andrews
Recent infection to skin requiring Amox.

o/k severe atopic dermatitis

- face, trunk, limbs. Quite red + weepy

Try Dermol 200, ollatun bath, epiderm + fructet bd
see 1/82. Info re UVB. ? T/R cupar.

(NO)

20/9/16.

Much better - probably because stopped using e-cig
as only got Rx yesterday.
With CPN. Feet a bit weepy so fructet bd to feet
etc. Flv 4/82.

(NO)

25/10/16.

DNM - 1 fortnite

(NO)

13/12/16.

ECZEMA flared again. Red + weepy limbs/trunk
- going to Gray with him in Derry over Christmas
so will have regular Rx - for fructet + anti-its
see 6/82

(NO)

24/1/17

Skin good over Christmas but flare again since return
home. ^{keep} ~~very~~ UVB. Discussed + spec. Refe

(NO)

DATE

17/9/17.

Skin not much better after 79 UVB treatments.
Using 30g ficobet /week. - will try to reduce.
and try potopic
Refer patch test
See 2/12 (NO)

21/11/17.

Skin worse at present. Amie's patch test (9/12)
Red + weepy hands + legs
Using ficobet 2-3 x weekly so ↑ to bd for 2/12
only add fluroxacin oint qds (28) (NO)
See 3/12.

8/1/18.

Skin OK arms + legs but hands not good;
Discussed itch/scratch cycle and will try and
stop. Use ficobet sparingly (NO)

2/10/18.

Amie - 1 further (NO)

17/1/19.

Skin much better. Only hands + elbows inflamed
Using ficobet daily - advised to try and
reduce. Use potopic instead. (NO)
Open aft

3/9/19.

Feet very bad - scaly + flaky
Try diposalic bd 2-3 weeks then 2x weekly
Potopic 0.03% bd to legs + flurox (NO)

10/12/19

AD + pain relief patches

2

2-3 4 hix

have UVB treated

HISTORY/CONTINUATION SHEET

Ward/Clinic/

Hosp

GRATTON

AF5403178H

Cons.

Surname

LEON

Unit No.

First Name

3 Makgill Row

D. of B.

Address

Springfield

17/03/1975

M. State

Address

CUPAR

1703751191

Sex

Occupation

KY15 5SA

G.P. & Address

USE BLOCK CAPITALS

Derm

UNIT/WARD/DEPT

DATE

14/5/24.

 Δ AD. - telephone apt.

Rowlands - cupar.

- Tuesday ..

not receive MTX regularly.

- called his pharmacy, last prescription was done on the 28th March.

→ ECS has a prescription for 1st May.

→ will ask GP pharmacist to investigate.

manage with enablers only at present.

Anella
copy

17/9/24.

 Δ AD - Telephone apt.

newly diabetic - MTX - Tues.

Sandy positive on telephone.

- 'Sick to stool' - they are currently on it.

① Continue 10g MTX.

encaged to keep ~~keep~~ taking folic Acid.

Gnollie's.

not receive skins at present.

No 3m. tel.

Anella
copy.

Victoria Hospital
Hayfield Road
Kirkcaldy
Fife
KY2 5AH

Department of
Gastroenterology
Tel: 01592 643355 ext 28898
<http://www.nhsfife.scot.nhs.uk>



Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
Bank Street
Cupar
KY15 4JN



CHI: 1703751191

Letter ID: 100305186

Dear Dr MacLaren

Clinic Date: 23/01/2020

Date: 31/01/2020

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Leon failed to attend the liver clinic appointment today 23/01/2020.

If you would like this appointment to be rearranged please get in touch with the secretary whose details are on this letter.

Letter dictated by Dr Rachel Sutherland MBChB Speciality Trainee to Dr Gilchrist

Yours sincerely

Dr S Gilchrist
Consultant Physician and Gastroenterologist

Authorised on 10/02/2020 11:21:39 by Sian Gilchrist.

Victoria Hospital
Hayfield Road
Kirkcaldy
Fife
KY2 5AH

Department of Respiratory
Tel: 01592 643355 21755
Michele Salvaggio, Secretary
<http://www.nhsfife.scot.nhs.uk>



Leon Gratton
3 Makgill Row
Springfield
Cupar
Fife
KY15 5SA



CHI: 1703751191
Our Ref: IM/SB

ADMINISTRATIVE
LETTER

Dictated: 18/11/2025
Date: 15/12/2025

Letter ID: 200259049

Dear Leon Gratton

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Thank you for coming for your chest x-ray. We did this because of your pneumonia and I am pleased to see the changes on your x-ray have recovered. Sometimes your symptoms can take longer than your x-ray changes to recover, but I hope your breathing continues to improve.

Yours sincerely

Dr Iain Murray
Consultant in Respiratory Medicine

Authorised on 17/12/2025 12:09:22 by Iain Murray.

(D) Dr KJ MacLaren, Bank Street Medical Group, The Health Centre, Bank Street, Cupar, KY15 4JN

Fife Area Laboratory

CLINICAL BIOCHEMISTRY

V700828K

HLV

Surname: GRATTON Forename: Leon D.O.B.: 17 Mar 1975 Sex: M Case No: 1703751191
Address: 85 SPITTALFIELD ROAD INVERKEITHING Post code: KY11 1DZ CHI: 1703751191
Cons/GP: Dr Sian GILCHRIST Source: Outpatient Department
Victoria Hospital

Current clin. details: NAFLD/ FIBROSIS ASSESSMENT

	Date	20/12/13	12/11/13	16/07/13	10/06/13	21/05/13
	Time	11:45	10:40	AM	AM	AM
	Labno.	C6169761K	C6132105V	C6007244J	C5970035V	C5950553B
Sodium		137	144	143	142	141
(134-144 mmol/L)						
Potassium		4.5	4.3	4.0	4.5	HAE
(3.6-5.4 mmol/L)						
Urea		5.9	6.0	4.8		
(3.0-8.5 mmol/L)						
Creatinine		72	69	75	70	70
(50-120 umol/L)						
eGFR		> 60	> 60	> 60	> 60	> 60
(mL/min)						
Glucose		6.8H				
(3.3-6.1 mmol/L)						
HbA1C (IFCC)		39				
(31.0-44.3 mmol/mol)						
Albumin		49	45	47	47	HAE
(38-50 g/L)						
Protein (Total)		76	72	73	77	HAE
(60-80 g/L)						
IgG		9.76				
(7.0-19.0 g/L)						
IgA		2.13				
(0.90-4.5 g/L)						
IgM		0.33L				
(0.45-1.80 g/L)						
Alkaline phosphatase		93	91	98	92	HAE
(35-115 U/L)						
Gamma-Glutamyltransferase		296H			356H	HAE
(7-50 U/L)						
Alanine transaminase		58H	35	61H	74H	HAE
(0-40 U/L)						
Bilirubin (Total)		7	7	7	6	HAE
(2-20 umol/L)						
TSH		1.84				
(0.5-3.9 mU/L)						
Free Thyroxine		15				
(10-19 pmol/L)						

HAE = Sample haemolysed, unsuitable for analysis

Aspartate transaminase 65 U/L

Hyaluronic Acid 18.6

ANALYSED BY EXTERNAL LABORATORY, I.D. ON SCI STORE

C5950553B 21/05/13 Please give clinical details

ALL RESULTS APPLY TO SERUM/PLASMA UNLESS OTHERWISE INDICATED

Current Items Reported : EL LF GL HBA1 TS IP AS GT HYL SARC UR

Current Items Requested: EL LF GL HBA1 TS IP AFP AAN CAE AS GT HYL SARC UR

Current Spec. Rec'd: 15:06 20 Dec 2013 Printed: 29 Jan 2014 Authorised by:



SCOTTISH NATIONAL BLOOD TRANSFUSION SERVICE

EDINBURGH & S E SCOTLAND BLOOD TRANSFUSION CENTRE

Royal Infirmary of Edinburgh, 51 Little France Crescent, Edinburgh EH16 4SA

Clinical Immunology 0131-242 7525 / 9 Lothian Network x 27525 / 9

V700828K

NHS

National
Services
Scotland

IMMUNOLOGY SERVICES

CLINICAL IMMUNOLOGY REPORT

SURNAME GRATTON

D.O.B. 17/03/1975

S2279498S

LAB REG. No. HI926893X
Specimen: Blood

FORENAME/S LEON

DATE SAMPLE TAKEN 20/12/2013 u/k

HOSPITAL NUMBER 1703751191

DATE RECEIVED 23/12/2013 14:32

TEST

RESULT

NORMAL RANGE

Gastric Parietal Cell

Negative

Mitochondrial Antibody

Negative

Smooth muscle Antibody

Negative

GPC, AMA and SMA are all tested on a composite liver/
kidney/stomach block. Consequently, requests for any one
of these will result in all three being reported.

Sample aliquot received.

FOLD
HEREFOLD
HEREFurther details in Laboratory Handbook at <http://www.scotblood.co.uk/publications.asp>

REPORT TO BE RETURNED TO:

Dr Craig Ferguson
Microbiology, North Lab, VHK
Victoria Hospital
Hayfield Road

Dr Glickman
VOPD, VHK

DATE REPORTED

13/01/2014
09:39

CONSULTANT CLINICAL SCIENTIST 0131 242 7535
PLEASE PHONE FOR DISCUSSION OF RESULTS IF NECESSARY

SIGNATURE

Hospital use only	Clinic	Day Date	Time	Hospital No.
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Transport required?
No

REFERRAL LETTER

MEDICAL IN CONFIDENCE

REFERRAL TO	
Ear, Nose & Throat (ENT) C5 Fife General Referral	Consultant / receiving practitioner and/or specialty clinic
Victoria Hospital	Hospital and hospital address
	Hospital unit no. F704H
	Email address
Urgency of referral	Routine

PATIENT DETAILS		Patient's address
Surname	Gratton	85 Spittalfield Road INVERKEITHING DUNFERMLINE Fife KY11 1DZ
Forename(s)	Leon James	
Title	Mr	
Sex	Male	
Date of birth	17-Mar-1975	
CHI no.	1703751191	Contact number(s) Voice: 415625

REFERRING PRACTITIONER DETAILS		Practice address
Name	Dr. David Taylor	5 FRIARY COURT INVERKEITHING FIFE
GMC code	1323746 GP code 92827	
Practice name	INVERKEITHING MEDICAL CENTRE (20752)	
Practice code	20752	
		Contact number(s) Voice: 01383 413234

Date submitted by practice: 04-Aug-2009

04 AUG 2009

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

Description: Dizziness.

Comment: Dear Doctor

Thank you for seeing Leon who has complained of feeling light-headed and the room spinning in spells over the past couple of years. Leon has schizophrenia and at present is on Nitrazepam one at night, Diazepam one daily, Chlorpromazine one twice a day and monthly antipsychotic injections from the Continuing Care Group at Haldane House. There is no nystagmus, no past pointing, Romberg's negative, ears are clear and free of wax. Blood pressure is normal and pulse is 62 per minute in sinus rhythm. I would be grateful if you could see this young gentleman who complains of longstanding but intermittent spells of dizziness.

Thank you in advance.

Examinations and Investigations

Blood Pressure (systolic):	110	-
Blood Pressure (diastolic):	66	-
Height (m):	1.82	-
Weight (kg):	88	-
Body Mass Index:	26.57	-
Current smoker:		28-Jan-2009
Alcohol intake above recommended sensible limits:		28-Jan-2009
Enjoys heavy exercise:		28-Jan-2009

Reason for referral

Care type requested: Out Patient

Expected outcome: Treat

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

Description	Modifier	Comment	Date Recorded
Psychotic episode NOS	Persistent	-	12-Sep-2008
[X]Deliberate drug overdose / other poisoning	-	paracetamol	08-Jun-2008
Unspecified schizophrenia	-	Admitted 4 weeks.	08-Jun-2008
[X]Deliberate drug overdose / other poisoning	-	Loratadine and paracetamol - impulsive.	11-Mar-2007
Unspecified schizophrenia	-	Admitted 4 weeks.	28-Jun-2004
Psychotic episode NOS	Recurrence	admitted	22-Nov-2003
Psychotic episode NOS	Persistent	-	24-Oct-2001
Borderline personality disorder	-	-	01-Jan-2001

Past Procedures (High and Medium priority)

Description	Modifier	Comment	Date Recorded
Psychiatry care plan	-	-	23-Jan-2009

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

Drug name	BNF code	Formulation	Dosage	Frequency	Course started	Duration
Ranitidine	01.03.01.0	TABS 150MG	1 Tab	Twice daily	13-Apr-2006	-

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

Drug name	BNF code	Formulation	Dosage	Frequency	Course started	Duration
Diazepam	04.01.02.0	TABS 5MG	1 Tab	Daily	08-Jul-2009	-

Chlorpromazine Hydrochloride	04.02.01.0	TABS 25MG	1 Tab bd dispense	daily	08-Jul-2009	-
Nitrazepam	04.01.01.0	TABS 5MG	1 nocte	dispense daily	08-Jul-2009	-
Naproxen	10.01.01.0	Ec TABS 250MG	1 or 2 Tabs twice	daily with food	29-Jun-2009	-
Orphenadrine Hydrochloride	04.09.02.0	TABS 50MG	1 Tab	Daily PRN	29-Jun-2009	-
Amoxicillin	05.01.01.3	CAPS 500MG	1 Cap	3 times daily	29-Jun-2009	-
Diazepam	04.01.02.0	TABS 5MG	1 Tab	Daily	08-Jun-2009	-
Chlorpromazine Hydrochloride	04.02.01.0	TABS 25MG	1 Tab bd dispense	daily	08-Jun-2009	-
Nitrazepam	04.01.01.0	TABS 5MG	1 nocte	dispense daily	08-Jun-2009	-
Diazepam	04.01.02.0	TABS 5MG	1 Tab	Daily	06-May-2009	-
Chlorpromazine Hydrochloride	04.02.01.0	TABS 25MG	1 Tab bd dispense	daily	06-May-2009	-
Nitrazepam	04.01.01.0	TABS 5MG	1 nocte	dispense daily	06-May-2009	-

Clinical Warnings	Smoking status	Alcohol consumption
Lifestyle risks	Not Known	Units per day
Exercise status: Not Known		? (not known)
Allergies		
Allergy, unspecified		

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

Victoria Hospital
Hayfield Road
Kirkcaldy
Fife
KY2 5AH

Department of Haematology
Tel: 01592 643355 Ext 29484 -
Meg Ross
<http://www.nhsfife.scot.nhs.uk>



Dr Sandeep Datta
Locum Specialty Doctor
Stratheden Hospital
CUPAR
Fife
KY15 5RR

CLINIC LETTER



CHI: 1703751191
Hospital ID: V700828K

Letter ID: 214428

Dear Dr Datta

Clinic Date: 14/05/2012

Date: 15/05/2012

Leon Gratton, C/O Dunino Ward, Stratheden Hospital, Cupar, Fife, KY15 5RR
Date of Birth: 17/03/1975

Thanks for your note about this patient who I saw in clinic today with concerns about swellings in his axillae. These haven't been a problem on and off for several months usually accompanied by a crop of small boils in the axilla. Ultrasound has shown small lymph glands no more than 4mm or 5mm in diameter and a biopsy has shown reactive changes only. In addition to the axillary problems he complains of pain in most parts of her body, particularly chest and abdomen and pain in passing urine. He has no cough or sputum production. He is smoking about half an ounce of tobacco a day.

Current Medications

Nitrazepam 10mg at night, Omeprazole 20mg per day, Pizotifen 1.5mg at night, Paracetamol prn, Trifluoperazine 15mg x bd and Sertraline 50mg per day. He has recently smoked and swallowed drugs of abuse but never injected.

Allergies

Nil.

He is currently an in-patient at Stratheden for rehabilitation.

On examination, he was clearly anxious about his symptoms. He was tender in both axillae with a number of scars in the skin and some pea-sized lymph nodes, particularly on the right. There was no other peripheral lymphadenopathy and no positive findings in the chest or abdomen. He's had a recent normal full blood count and biochemistry.

I think these must be reactive nodes from his superficial boils in the axilla and I really don't think further investigation is required here. He is clearly anxious about a number of physical symptoms but I suspect this is all part of his psychiatric state and I don't think it would be indicated or wise to pursue further investigations at this stage.

Best wishes.

Yours sincerely

Dr Peter J Williamson
Consultant Haematologist

This document has NOT been verified.

(P) Dr DM Taylor, Inverkeithing Medical Centre, 5 Friary Court, Inverkeithing, Fife, KY11 1NU

CT1512.
14/5/12Kirkcaldy & Levenmouth CHP
Mental Health Services**Personal/Patient Information – Medical Confidential**

To: Dr Williamson, Haematology Dept, VHK	Fax No: 01592 648055
From: Dr S Datta, Locum Speciality Doctor, Stratheden Hospital, Cupar	Fax No: 01334 696042
Date: 18 April 2012	No. of Pages(including this page) 5

Subject: Referral for - LG*new
see as outpatient*If you have any difficulties in reading this please telephone:
01334 696362

Ask for: Margaret Thomson

Please call me back to let me know you have received this fax.

- ☐ urgent
- ☐ for information
- ☐ please comment

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**Kirkcaldy & Levenmouth CHP
Mental Health Service****PRIVATE & CONFIDENTIAL**

Dr Williamson
Haematology Department
Victoria Hospital
Hayfield Road
KIRKCALDY
KY2 5AH

Medical Offices
Stratheden Hospital
CUPAR
Fife
KY15 5RR
Tel: 01334 652611
Fax: 01334 696042



Date Dictated: 18 April 2012
Date Typed: 18 April 2012
Your Ref:
Our Ref: SD/MT/SF5155833A

Enquiries to: Margaret Thomson
Direct Line: 01334 696362
Internal ext: 56362
E-mail: m.thomson5@nhs.net

Dear Dr Williamson

**Leon Gratton, C/o Dunino Ward, Stratheden Hospital, Cupar, KY15 5RR
CHI - 1703751191**

I would be very grateful for your opinion on the above patient, Mr Gratton. He is currently an inpatient in Dunino rehabilitation ward at Stratheden Hospital. He has a diagnosis of schizophrenia and borderline personality disorder, and he has taken overdoses in the past.

With regard to his past medical history, he suffered from weight loss and tremors and also has a diagnosis of hidradenitis suppurativa. Late last year Mr Gratton had some superficial axillary masses which were red and tender, therefore an ultrasound scan of both axillae was conducted. The scan showed bilateral enlarged axillary nodes, cortex measuring 4 mm on the right and 4.5 mm on the left. It was concluded that this may be reactive to superficial infection and a more sinister cause could not be excluded, therefore it was suggested that a referral to Haematology may be worthwhile. However, in March of this year he was seen by the surgical team who did a biopsy which confirmed reactive changes compatible with a history of chronic infection and hidradenitis suppurativa. As can be seen from the letter enclosed it was decided that there was no further investigation planned. I would be very grateful for your advice regarding this patient.

His current medication includes:

Nitrazepam - 10 mgs at night.
Orneprazole - 20 mgs in the morning.
Pizotifen - 1.5 mgs at night.
Paracetamol - 1 g n four times a day.
Trifluoperazine liquid - 15 mgs twice a day.
Sertraline - 50 mgs once in the morning.



- ☐ Original
- ☐ Case notes
- ☐ Nursing notes
- ☐ Medical office
- ☐ Medical records

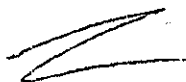
Leon Gratton - SF5153833A
CHI - 1703751191

18 April 2012

I would be very grateful for your opinion and advice regarding this patient. Please do not hesitate to contact me if you require any further information.

Kind regards.

Yours sincerely



Dr Sandip Datta
Locum Specialty Doctor

Queen Margaret Hospital
Whitfield Road
Dunfermline
Fife
KY12 0SU

Breast Services
Tel: 01383 623623 Ext 23701
<http://www.nhsfife.scot.nhs.uk>

NHS
Fife

Dr F Williams
Psychiatry Dept
Queen Margaret Hospital
Dunfermline

ADMINISTRATIVE LETTER



CHI: 1703751151
Hospital ID: D659366L

Letter ID: 153558

Dear Dr Williams

Date: 09/03/2012

Leon Gratton, 85 Spittalfield Road, Inverkeithing, Fife, KY11 1DZ

Date of Birth: 17/03/1975

I reviewed the result of needle aspiration of this gentleman's left axillary node which has confirmed reactive changes which is compatible with his history of chronic infection and hidradenitis suppurativa. This was discussed in our MDT meeting where it was decided no further investigation or treatment is planned.

I am therefore happy to discharge him from our clinic back to your care.

Yours sincerely

Mr H. Ahmad
Staff Grade Surgeon

ah
→
Damiano

Authorised on 09/03/2012 14:30:19 by Typist Jean Lowe: not verified by Consultant.

(P) Dr D Somerville, Inverkeithing Medical Group, 5 Finlay Court, Inverkeithing, KY11 1NU

Details

Page 1 of 1

SCI Store - Patient Result Report

Report ID: E-04015690

Pfe SCI Store Live

Sample Collected: 06/12/2011 14:46:00

Patient

Patient Name	CHI	Date Of Birth	Age	GP	GP Practice	Consultant	Ward/Location
LEON GRATTON	1703751191	17/03/1975	36	GARMANY, DAVID	INVERKEITHING MEDICAL CENTRE	CAVANAGH, P	(Q2) Ward 2 QMH

Report Details

Report Requestor	Requestor Location	Report Identifier	Discipline	Referral Source
Joseph, CAVANAGH, Paul	(F805HSCQ) QMH BREAST CLINIC	E-04015690	Radiology	N/A

Sample Type	Sample Collected	Sample Received	Processed Into Store
IMAGING	06/12/2011 14:46:00	06/12/2011 11:30:01.987	06/12/2011 11:32:09

Report**US Axilla Both****Leon Gratton**

Clinical Information: Bilateral superficial axillary masses. Red and tender on the left. ? abscesses. Known hidradenitis suppurativa.

ULTRASOUND BOTH AXILLAE

There are bilateral enlarged axillary nodes. Cortex measures 4 mm on the right and 4.5 mm on the left. These may be reactive to superficial infection, and the patient does mention that he probably has groin masses as well, but a more sinister cause cannot be excluded (? haematological)

CONCLUSION:

U3. Please refer to the haematologist for further assessment.

Reported by: SHARMA, Ashwini Dr

Verified by: SHARMA, Ashwini Dr

Printed By: Bonnuala Williams on 08/12/2011 14:14:06

HAEMATOLOGY MOUNT SHEET

GRATTON
LEON
85 Spittalfield Road
INVERKEITHING
KY11 1DZ

V700828K

17/03/1975
1703751191

ADMISSION
DISCHARGE
DIAGNOSIS &
OPERATION

DATE

NOTES

14/5/12

See letter.

In stratheden. Sores / boils in axilla. u/s small nodes
4-5 mm. Bx - reactive Rbc (N)
Pain in chest not pleuritic. No cough / sputum.

Cigs 1/2 g 1-2 days.

Abdo pains in abdo too. Passing urine. painful

Drug

Nitroglycerin 10mg route

Ornizole 20mg od

Pyostafin 1.5mg route

Prol. pen

T rifloxycline 15mg bd

Letroline 50mg od

Recent oral / smoked
drug abuse

Mleg

n.i

ok no nodes. Tender both axilla + lower
abdo chest MADS

No need for further Tx

(D) letter

"GP

Victoria Hospital
Hayfield Road
Kirkcaldy
Fife
KY2 5AH

Department of Gastroenterology
Tel: 01592 643355 Ext 28898
<http://www.nhsfife.scot.nhs.uk>



Leon Gratton
3 Macgill Row
Springfield
Cupar
KY15 5SA

ADMINISTRATIVE LETTER



CHI: 1703751191
Hospital ID: V700828K
Ref: SG/PM
Dictated: 25/03/2015

Letter ID: 1441700

Dear Mr Gratton

Date: 08/04/2015

Leon Gratton, 3 Macgill Row, Springfield, Cupar, KY15 5SA

Date of Birth: 17/03/1975

Following your clinic appointment at the beginning of February I now have the blood results. These do not show any deterioration in your liver and therefore I will not arrange to see you again, but would be happy to do so again at the request of your GP.

Yours sincerely

Dr S Gilchrist
Consultant Physician and Gastroenterologist

This document has NOT been verified.

(D) Dr KC Taylor, Bank Street Medical Group, The Health Centre, Bank Street, Cupar, KY15 4JN

Victoria Hospital
Hayfield Road
Kirkcaldy
Fife
KY2 5AH

Department of
Gastroenterology
Tel: 01592 643355 Ext 28898
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Dr KC Taylor
Bank Street Medical Group
The Health Centre
Bank Street
Cupar
KY15 4JN

CLINIC LETTER



CHI: 1703751191
Hospital ID: V700828K

Letter ID: 1377820

Dear Dr Taylor

Clinic Date: 05/02/2015

Date: 05/03/2015

Leon Gratton, 3 Macgill Row, Springfield, Cupar, KY15 5SA

Date of Birth: 17/03/1975

Diagnosis: Non-alcoholic fatty liver disease
Schizophrenia on Clozapine

Pending investigations: Non-alcoholic fatty liver disease fibrosis score

Follow up: To be determined

I met up with Leon Gratton today some 4 years earlier than planned. He doesn't look like he is doing quite so well from a mental health point of view at the moment. He certainly seemed very worried today in clinic. I think he had had a recent viral infection which was settling down now though, and his weight unfortunately is going up.

I have repeated his NAFLD fibrosis score today and depending on what that is like I will probably not arrange to see him again at this stage but I would be delighted to receive a re-referral in due course if that is required.

Yours sincerely

Dr S Gilchrist
Consultant Physician and Gastroenterologist

This document has NOT been verified.

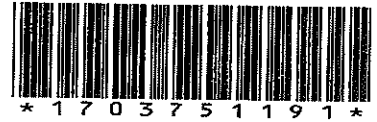
Victoria Hospital
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Kirkcaldy
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KY2 5AH

Department of
Gastroenterology
Tel: 01592 643355 Ext 21162
<http://www.nhsfife.scot.nhs.uk>



Dr JJ Allan
Inverkeithing Medical Group
Inverkeithing Medical Centre
5 Friary Court
Inverkeithing
KY11 1NU

CLINIC LETTER



CHI: 1703751191
Hospital ID: V700828K
Ref: SG/PM
Dictated: 17/04/2014

Letter ID: 993677

Dear Dr Allan

Clinic Date: 17/04/2014

Date: 22/04/2014

Leon Gratton, 3 Macgill Row, Springfield, Cupar, KY15 5SA

Date of Birth: 17/03/1975

Main diagnosis: Non-alcoholic fatty liver disease without evidence of fibrosis

I met up with this chap again and went through the results of his liver screen and non-invasive fibrosis assessment. His liver screen has been negative and his non-fibrosis assessment suggests an absence of significant fibrosis. I see that he has been started back on Clozapine since I last saw him and his weight unfortunately has gone up by about 7 kilos. Obviously this is a risk to his physical health in the long term, but I have told him I do not currently have any concerns about his liver. I have asked him to let the Health Records Staff know that I would like to see him again in about 5 years time to reassess his fibrosis status at that stage, and I have encouraged him to try to lose weight if possible, but more importantly to be a bit more physically active again, as he is able.

Yours sincerely

Dr S Gilchrist
Consultant Physician and Gastroenterologist

This document has NOT been verified.

* 54R ADPT REQ'D
22/4/14.

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Fife
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Leon Gratton
3 Macgill Row
Springfield
Cupar
KY15 5SA

CLINIC LETTER



CHI: 1703751191
Hospital ID: V700828K
Ref: SG/PM
Dictated: 09/01/2014

Letter ID: 863251

Dear Mr Gratton

Clinic Date: 09/01/2014

Date: 09/01/2014

Leon Gratton, 3 Macgill Row, Springfield, Cupar, KY15 5SA

Date of Birth: 17/03/1975

For some reason you were due to come and see me in clinic today which is a little earlier than we had planned, I will put your appointment back to sometime in April.

Yours sincerely

Dr S Gilchrist
Consultant Physician and Gastroenterologist

This document has NOT been verified.

(D) Dr JJ Allan, Inverkeithing Medical Group, Inverkeithing Medical Centre, 5 Friary Court,
Inverkeithing, KY11 1NU



Medical Centre, 5 Friary Court, Inverkeithing, KY11 1JF

**Kirkcaldy & Levenmouth CHP
Mental Health Service**

PRIVATE & CONFIDENTIAL

Dr Gilchrist, Gastroenterology Consultant
Victoria Hospital
Hayfield Road
KIRKCALDY
KY2 5AH

Ext. 21162

Dear Dr Gilchrist

**Leon Gratton, C/o Dunino Ward, Stratheden Hospital, Cupar, KY15 5RR
CHI - 1703751191**

I would be grateful for your opinion on the above patient, Mr Leon Gratton, who is currently an inpatient on Dunino rehabilitation ward at Stratheden Hospital. He has a diagnosis of schizophrenia. Mr Gratton has had abnormal LFTs for a number of months. In September 2012 he had a Gamma-GT of 154 and in April of this year this had increased to 342. Coupled with this he has also had a raised Alt which currently stands at 61. Due to these raised LFTs we conducted an ultrasound scan which was done on 07.05.13. The scan stated there is a diffuse slight increase in echogenicity within the liver parenchyma without focal disease which most likely reflects fatty infiltration, no gall stones or biliary dilatation. The pancreas was also of increased echogenicity, again suggesting fatty infiltration but no local lesion. The spleen and kidneys appear normal. Currently Mr Gratton has been physically well and is not complaining of any symptoms.

With respect to his past medical history Mr Gratton had quite severe eczema in childhood. He was also referred for a twenty four hour ECG in August 2002 as it was felt he may have paroxysmal tachycardia. However, no follow-up was required. In June 2007 Mr Gratton attended his GP complaining of an episode of haematemesis and also intermittent fresh rectal bleeding. The GP requested an opinion from the surgeons and also the urologist as to whether further investigation would be useful. In October 2012 Mr Gratton was seen by the general surgeon for a diagnosis of bilateral auxiliary hidradenitis. He was offered excision of the affected areas or a trial of antibiotics in the first instance and he had the antibiotics which settled the hidradenitis.

His current medication list includes Omeprazole 20 mgs once daily, Pizotifen 1.5 mgs at night, Simvastatin 40 mgs at night, Cetraben one application topical twice daily, Hyoscine Hydrobromide 300 mcgs three times a day, Clozapine 275 mgs at night, Clozapine 125 mgs at lunchtime, Sertraline 100 mgs in the morning and Paracetamol 1 gm three times a day. I would be grateful for your advice abnormal LFTs and abdominal scan results. Please do not hesitate to contact me if you require any further information. Kind regards.

Yours sincerely


**Dr Sandip Datta
Locum Speciality Doctor**



Medical Offices
Stratheden Hospital
CUPAR
Fife
KY15 5RR
Tel: 01334 652611
Fax: 01334 696042



Date Dictated: 12 June 2013
Date Typed: 13 June 2013
Your Ref:
Our Ref: SD/MT/SF5153833A

Enquiries to: Margaret Thomson
Direct Line: 01334 696362
Internal ext: 56362
E-mail: m.thomson5@nhs.net

* Appt
re'd
20/6/13

Acting CHP General Manager Mary Porter

SCI Store - Patient Result Report

Report ID: E-04516311

Fife SCI Store Live

Sample Collected: 07/05/2013 09:43:00

Patient

Patient Name	CHI	Date Of Birth	Age	GP	GP Practice	Consultant	Ward/Location
Leon GRATTON	1703751191	17/03/1975	38	GARMANY, DAVID	Inverkeithing Medical Group	UNKNOWN,	(SDUN) Dunino Ward Stratheden

Report Details

Report Requestor	Requestor Location	Report Identifier	Discipline	Referral Source
Scot, STEVENSON, Gary	(F712HS14) STRATHEDEN WARD 14 DUNINO	E-04516311	Radiology	N/A

Sample Type	Sample Collected	Sample Received	Processed Into Store	Status
IMAGING	07/05/2013 09:43:00	07/05/2013 10:18:08.717	07/05/2013 10:18:24	Active

Report

US Abdomen

Leon Gratton

US Abdomen :

There is a diffuse slight increase in echogenicity within the liver parenchyma without focal disease, which most likely reflects fatty infiltration. No gallstones or biliary dilatation. The pancreas is also of increased echogenicity, again suggesting fatty infiltration, but no focal lesion. The spleen and kidneys appear normal.

Reported by: REID, William Dr

Verified by: REID, William Dr

Last 1 users to access this result

Name	System	Location	Time
alyson henderson	Fife NHS	SCI Store	12/06/2013 13:47:18

Printed By: Margaret Thomson on 14/06/2013 08:59:52

HISTORY/CONTINUATION SHEET

Ward/Clinic/

Hosp

Cons.

Surname GRATTON

V700828K

Unit No.

First Name LEON

D. of B.

Address 85 Spittalfield Road

M. State

..... INVERKEITHING

17/03/1975

Sex

Occupation KY11 1DZ

1703751191

G.P. & Address

USE BLOCK CAPITALS

UNIT/WARD/DEPT

DATE

See letter dated 13/4/13 from Dr Datta
Haematology section.

DATE	28/11/13
WEIGHT	111.2 Kg
HEIGHT	184
BLOOD PRESSURE	

3 MacGill Row
Springfield
Ayr

DATE	17/4/14
WEIGHT	118.1 Kgs
HEIGHT	
BLOOD PRESSURE	

DATE	5/2/15
WEIGHT	121 kg
HEIGHT	
BLOOD PRESSURE	

N/A J. Menfield

V700828K

GRATTON
LEON
3 Macgill Rd
Springfield
Cupar
KY15 5SA

DEPARTMENT OF DERMATOLOGY, VICTORIA HOSPITAL

Contact Tel no:

Attendance next week.

Diagnosis

Allergies

Medical History

infecter agent

Systemic treatment

Review date

E-cuprites

Smoker/non smoker

Fire hazard information given to patient

25/11

$$\frac{5}{6}$$

4-6/52

[illegible]

DATE	COMMENTS	SIGNATURE
29.7.16	SIB Dr Fraser skin extremely dry all over and excoriated. Topicals applied as overleaf encouraged to use as much moisturiser as possible five hazard leaflet given written and verbal instructions and supplies for RIV 5/8/16 Dr Fraser will RIV if required	SINCE 100000
5/8/16	Skin today very active and excoriated, trunk, limbs, feet, hands, buttocks. Leon is a poor historian, not sure what or how often he has been applying his topical treatment. Today, betnovate C applied to all areas, and ichthammol strips applied to arms + legs. Leon's CPN Brian Duffy was with him today - Leon was not keen to attend dressings regularly as he didn't think he could get transport arranged, but Brian can bring him on Monday afternoon for review. Supplies given for the weekend, demonstration, and written and verbal instructions. Brian will arrange for a support worker to visit Leon over the weekend to see if he is managing. Ichthammol in YSP given for legs and trunk over the weekend because we have no yellow line to give Leon home. Returning Monday. He will wash with dermol 500 and moisturise with Diprobase gel or cobaben.	S/N - 100000
8/8/16	Skin today slightly better only - still very active with excoriated areas trunk and legs + arms. Leon did not manage to apply ichthammol strips over the weekend but he says he applied 50/50, betnovate C and ichthammol in YSP - he thinks maybe 2 or times over the weekend. Leon's CPN, Brian was with him today, the earliest he can bring Leon back to dermatology is Friday - he said he will get Leon's support worker to help apply his topical treatment Tuesday Wednesday Thursday. If no improvement, will ask Dr. Fraser to review. Topical treatments applied today (betnovate C and ichthammol in YSP)	S/N - 100000

DATE	COMMENTS	SIGNATURE
12/8/16	Minimal improvement, given supplies & instructions for treatment over weekend. Continued as enollent after bathing, betnate 'c' to excavated areas with ichthammol in YSP to follow & has solso as & when needed returning on Monday.	Shahm
15/8/16	Hands, arms and knees very active and excavated given flucibet to apply until Friday as Leon will need to see Dr Fraser if no improvement.	Shahm
19/8/16	Much worse today - eczema very active & inflamed - Dr Fraser with Dr Fraser, increase steroid to Dominate & refer to Adamson Hospital in Cupar which would be much easier for Leon to attend. Unfortunately Leon's C/N going on holiday for 3 weeks therefore Leon would be unable to attend our department for treatment. Dr Fraser has done an urgent referral to Adamson for them to take over Leon's case as this would be much easier for him as regards distance but also with his other ^{other} anxiety at attending hospitals. All supplies & instructions given to Leon & Brian (C/N).	Shahm

Leon Gratten V700828K

C#1 17-03751191

Victoria Hospital
Hayfield Road
Kirkcaldy
Fife
KY2 5AH

Department of Dermatology
Tel: 01592 643355 28634
<http://www.nhsfife.scot.nhs.uk>



Dr Robert Dawe
Consultant Dermatologist
Dermatology Department
Adamson Hospital
Cupar

REFERRAL LETTER



CHI: 1703751191
Hospital ID: V700828K

Letter ID: 2122970

Dear Dr Dawe

Referral Date: 19/08/2016

Date: 19/08/2016

Leon Gratton, 3 Macgill Row, Springfield, Cupar, KY15 5SA

Date of Birth: 17/03/1975

DIAGNOSIS – ATOPIC ECZEMA WITH RECENT FLARE SECONDARY TO
IMPETIGENISATION
BACKGROUND OF SCHIZOPHRENIA

I would be very grateful if you could offer this gentleman an appointment reasonably urgently. He had been referred to yourselves by his GP, but due to an acute flare in his eczema, he was subsequently referred to the Victoria Hospital Kirkcaldy as an emergency.

He has longstanding atopic eczema, but over the last year or so it has got a lot worse, and he blames this on switching from cigarettes to E-cigarettes. He has a history of schizophrenia, and attended with his community psychiatric nurse, but this condition has been reasonably well controlled on Clozapine and Aripiprazole.

When I saw him at the end of July he had widespread impetigenised eczema, which initially partially responded to Betnovate C, emollient and Ichthammol. He struggles to apply the treatments himself, and unfortunately he is really struggling to attend our Department, and his community psychiatric nurse is going to be on holiday for several weeks, so it would be very helpful if he could receive some treatment closer to home.

With many thanks and kind regards.

Yours sincerely

Dr Susannah Fraser
Consultant Dermatologist

Authorised on 19/08/2016 17:01:33 by Dr Susannah Fraser.

(D) Dr KJ MacLaren, Bank Street Medical Group, The Health Centre, Bank Street, Cupar, KY15 4JN

Victoria Hospital
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Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
Bank Street
Cupar
KY15 4JN

CLINIC LETTER



CHI: 1703751191
Hospital ID: V700828K
SF/JM
Dictated: 29/07/16
Typed: 17/08/16

Letter ID: 2097632

Dear Dr MacLaren

Clinic Date: 29/07/2016

Date: 17/08/2016

Leon Gratton, 3 Macgill Row, Springfield, Cupar, KY15 5SA

Date of Birth: 17/03/1975

Diagnosis: Impetiginised atopic eczema

Management: Complete course of Co-amoxiclav
Betnovate C 1 application once-twice daily
50/50 of emollient 1% Ichthammol and yellow soft paraffin to soothe skin
Early review arranged

This 41-year-old gentleman attended with his community psychiatric nurse. He has a background of schizophrenia which he tells me is quite well controlled. He has a longstanding history of eczema, but over the last year or so it has got a lot worse. This is around the same time as he switched from cigarettes to e-cigarettes.

On examination he had widespread impetiginised eczema which was crusted and inflamed. The above management has been instigated and early review arranged. It is difficult to know whether the e-cigarettes are partly to blame. There had been reports in literature of a lichenoid eruption caused by e-cigarettes. The main problem at the moment is however infection.

Yours sincerely

Dr Susannah Fraser
Consultant Dermatologist

This document has NOT been verified.

REFERRAL LETTER

MEDICAL IN CONFIDENCE



Hospital use only	Clinic	Day Date	Time	Hospital No.
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Unique Care Pathway Number: 1010116928873

Transport required?

REFERRAL LETTER
MEDICAL IN CONFIDENCESuspected Cancer Site:
NOT A CANCER REFERRAL

DERMATOLOGY

REFERRAL TO

Dermatology A7
Fife General ReferralAdamson Hospital
Bank Street
Cupar
KY15 4JGConsultant / receiving practitioner
and/or specialty clinic

Hospital and hospital address

Hospital Location Code

F708H

Email address

Urgency of referral

Routine

PATIENT DETAILS

Surname Gratten

Forename(s) Leon

Title Mr

Sex Male

Date of birth 17-Mar-1975

CHI no. 1703751191

Patient's address

3 Makgill Row
Springfield
Cupar
KY15 5SA

Contact number(s)

Voice: 01334 769473

REFERRING PRACTITIONER DETAILS

Name Dr. Kathryn MacLaren

GMC code 6103632 GP code 92363

Practice name Bank Street Medical Group (20413)

Practice code 20413

Practice address

The Health Centre
Bank Street
Cupar
KY15 4JN

Contact number(s)

Voice: 01334 651201

Date submitted by practice: 01-Jul-2016

Reason for referral

Care type requested: Out Patient - New

Expected outcome: Not Specified

Administrative Information

Suspected Cancer Site: NOT A CANCER REFERRAL

Patient Contact: N/A Not a cancer referral

Does the patient need to be seen in clinic following any investigations: N/A Not a cancer referral

Patient can accept a short notice appointment: yes

Interpreter Required: no

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

Description: Eczema

Comment: Dear Dr I would be grateful if you would see this 41-year-old chap who has very poorly controlled eczema. He has had numerous courses of antibiotics over the last few months with minimal relief. He is itching quite a lot. He has a background of schizophrenia and is under the Weston Day Hospital and psychiatry and has a CPN. Today he has quite a lot of excoriations to his arms hands and back and fissuring of his hands. I have started him on healing tape and Fucibet plus his regular emollients and antibiotic but given the repeated flares and antibiotics I would be grateful for your review and advice. Many thanks Yours sincerely Dr C Colbeck (GP locum)

Examinations and Investigations

Blood Pressure (systolic): 134 -
 Blood Pressure (diastolic): 80 -
 Height (m): 182 -
 Weight (kg): 122 -
 Body Mass Index: 36.83 -
 Ex smoker: 10-Mar-2016
 Alcohol consumption, 0 units/week: 10-Mar-2016

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

Description	Laterality	Modifier	Comment	Date Recorded
Non-alcoholic fatty liver	-	-	- without fibrosis	28-Nov-2013
Osteoarthritis NOS, of knee (Left)	Left	-	early	11-Oct-2012
[X]Osteopenia	-	-	(xray appearance)	11-Oct-2012
Benzodiazepine dependence	-	-	-	22-Nov-2010
H/O: repeated overdose	-	-	-	22-Nov-2010
Migraine	-	-	-	05-Nov-2010
Psychotic episode NOS	-	-	-	12-Sep-2008
Anxiety states	-	-	-	12-Oct-2006
Schizophrenia NOS	-	-	-	28-Jun-2004
Psychotic episode NOS	-	-	- admission	22-Nov-2003
[X]Depressive episode	-	-	-	01-Nov-2001
Psychotic episode NOS	-	-	-	24-Oct-2001
Morbid jealousy	-	-	- admission 12 weeks	01-Nov-2000
Borderline personality disorder	-	-	-	01-Nov-2000
Psychotic episode NOS	-	-	- 4/12 admission	12-Sep-1993
Accidental poisoning by lysergide, LSD	-	-	-	24-Mar-1993
Misuse of drugs NOS	-	-	-	30-Dec-1992
Eczema NOS	-	-	-	15-Mar-1976

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

Drug name	BNF code	Formulation	Dosage	Frequency	Course started	Duration
Light Liquid Paraffin Bath additive 63.4 %	1302011M0BDAEAB	500 ml	USE AS DIRECTED	-	22-Apr-2016	-
Dermol 500 Lotion	130201000BBICBW	500 ML	APPLY AS REQUIRED FOR DRY SKIN	-	06-Jan-2016	-

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

Drug name	BNF code	Formulation	Dosage	Frequency	Course started	Duration
Fludrocortide Tape 4 micrograms/square cm, 7.5 cm	-	2 m	APPLY TO AFFECTED AREA AT NIGHT	-	28-Jun-2016	42 Days
Co-Amoxiclav 500/125	0501013K0AAAJAJ	21 tablet	ONE TO BE TAKEN THREE	-	28-Jun-	7 Days

Tablets			TIMES A DAY.		2016	
Fucibet Cream	1304000F0BCABCC	30 GRAM	APPLY ONCE A DAY	-	28-Jun-2016	42 Days
Dermol 600 Bath emollient	-	600 ML	ADD ONE OR TWO CAPFULS TO BATH WATER	-	28-Jun-2016	42 Days
Doublebase Gel	-	500 GRAM	APPLY AS REQUIRED FOR DRY SKIN	-	17-Jun-2016	-
Epaderm Cream	-	500 gram	APPLY AS REQUIRED FOR DRY SKIN	-	22-Apr-2016	42 Days
Flucloxacillin Capsules 500 mg	0501012G0AAABAB	56 capsule	TWO TO BE TAKEN FOUR TIMES A DAY	-	22-Apr-2016	7 Days
Fucibet Cream	1304000F0BCABCC	120 gram	APPLY TWICE DAILY TO ECZEMA FOR 2 WEEKS	-	22-Apr-2016	42 Days
Lifestyle risks						
Exercise status: Not Known						

HISTORY/CONTINUATION SHEET

Ward/Clinic/ Hosp Cons.
Surname GRATTON LEON V700828K Unit No.
First Name 3 Macgill Row D. of B.
Address Springfield M. State
..... Cupar 17/03/1975 Sex
..... KY15 5SA 1703751191
Occupation
.....
G.P. & Address USE BLOCK CAPITALS

Dermatology UNIT/WARD/DEPT

DATE
24 JUL

E-cy.

- Cirs pmt

Ongazone.

Puphyer

no antitha.

Simga

Anoxetne

Amipazole

Clozapine.

Deed 100.

Pmt

- at

in petz ag

- 4 acap

R

Sharon Carl

DATE

19/8/16 d/w S/n Lynne Murren

- recurrent pain
- difficult attending
- aim to refer to Alton Hospital, Cyp.

A
J. KROGH
Lynne

SCI Store - Patient Result Report**Report ID:** E-07752149**Sample Collected:** 23/10/2025 14:32:00

Fife SCI Store Live

Patient

Patient Name	CHI	Date Of Birth	Age	GP	GP Practice	Consultant	Ward/Location
LEON JAMES GRATTON	1703751191	17/03/1975	51	MacLaren, Kathryn	Bank Street Medical Group	REID, D.	(WES) Weston Day Hospital
Name Changed							

Report Details

Report Requestor	Requestor Location	ReportIdentifier	Discipline	Referral Source
Iain, MURRAY,	(F704HCHEV) VHK CHEST	E-07752149	Radiology	N/A
Sample Type	Sample Collected	Sample Received	Processed Into Store	Status
IMAGING	23/10/2025 14:32:00	30/10/2025 09:49:07.577	30/10/2025 09:49:24	Active

Report**XR Chest****Leon Gratton****Clinical History:**

50M admitted 30/08 with sepsis secondary to pneumonia. Treated with IV abx and discharged 05/09. Could you please arrange 6/52 follow-up CXR?

Many thanks.

Ordered by Watkins Daniel (7952181)

~~(Information via Order Comms)

XR Chest:

Comparison: 30/08/2025.

Resolution of the right lower zone consolidation. Increased bronchovascular markings but no focal lung abnormality.

No pleural effusion.

Stable cardiomedastinal contour.

Opinion: Resolved right lower zone consolidation.

Reported by:

Dr Kate Thomas

Consultant Radiologist

GMC 7014039

Reported by: Kate Thomas

Reported by: THOMAS, Kate and THOMAS, Kate

Verified by: THOMAS, Kate

Last 6 users to access this result

Name	System	Location	Time
Clinical Portal	Orion CP	Location	09/12/2025 12:56:12

Clinical Portal	Orion CP	Location	01/12/2025 15:16:22
Chris Olley	Fife NHS	SCI Store	23/11/2025 11:06:24
ChemoCare ADT Interface	syscode		05/11/2025 11:17:38
Clinical Portal	Orion CP	Location	04/11/2025 13:38:38
SCI-DC Network SCI-Store Interface	SCI-DC	CTC, Ninewells Hospital, Dundee	30/10/2025 10:36:41

Printed By: Tracy Paterson on 23/06/2026 09:43:27

SCI Store - Patient Result Report

Report ID: E-07746997

Sample Collected: 30/08/2025 11:12:00

Fife SCI Store Live

Patient

Patient Name	CHI	Date Of Birth	Age	GP	GP Practice	Consultant	Ward/Location
LEON JAMES GRATTON	1703751191	17/03/1975	51	MacLaren, Kathryn	Bank Street Medical Group	REID, D.	(WES) Weston Day Hospital

Name Changed

Report Details

Report Requestor	Requestor Location	ReportIdentifier	Discipline	Referral Source
Rajendra, RAMAN,	(F704HAEV) VHK A&E	E-07746997	Radiology	N/A

Sample Type	Sample Collected	Sample Received	Processed Into Store	Status
IMAGING	30/08/2025 11:12:00	04/09/2025 17:36:06.91	04/09/2025 17:36:14	Active

Report**XR Chest****Leon Gratton****Clinical History**

new temps + O2 requirement + basal crackles ?pneumonia
 Ordered by Biebrach Edward (8054595)
 ~~(Information via Order Comms)

XR Chest

Comparison made previous film dated 12/05/2017.
 AP erect film.

Bilateral hazy airspace opacification in the lower zones, likely secondary to infective consolidation.
 Normal cardiac, mediastinal and hilar contours.
 No significant bony abnormality.

Dr Tianyu Terry Guo. GMC No: 7634991
 Radiology Registrar. NHS Lothian. Tianyu.Guo@nhs.scot

Reported by: Dr Terry Guo

Reported by: GUO, Terry and GUO, Terry

Verified by: GUO, Terry

Last 4 users to access this result

Name	System	Location	Time
Clinical Portal	Orion CP	Location	01/12/2025 15:16:11
Clinical Portal	Orion CP	Location	15/10/2025 13:39:34
ChemoCare ADT Interface	syscode		11/09/2025 13:56:03
SCI-DC Network SCI-Store Interface	SCI-DC	CTC, Ninewells Hospital, Dundee	04/09/2025 17:42:12

Printed By: Tracy Paterson on 23/06/2026 09:44:08

SCI Store - Patient Result Report

Report ID: E-05764167

Sample Collected: 12/05/2017 09:55:00

Fife SCI Store Live

Patient

Patient Name	CHI	Date Of Birth	Age	GP	GP Practice	Consultant	Ward/Location
LEON JAMES GRATTON Name Changed	1703751191	17/03/1975	51	MacLaren, Kathryn	Bank Street Medical Group	REID, D.	(WES) Weston Day Hospital

Report Details

Report Requestor	Requestor Location	ReportIdentifier	Discipline	Referral Source
Shanti, DAS,	(F20413) BANK STREET MEDICAL GROUP	E-05764167	Radiology	N/A
Sample Type	Sample Collected	Sample Received	Processed Into Store	Status
IMAGING	12/05/2017 09:55:00	16/05/2017 14:52:01.467	16/05/2017 14:52:04	Active

Report**XR Chest****Leon Gratton**

XR Chest :

Normal cardiac, mediastinal and hilar contours.
Lungs clear with normal pulmonary vascularity.**Reported by:** TURNBULL, Colin Dr**Verified by:** TURNBULL, Colin Dr**Last 3 users to access this result**

Name	System	Location	Time
Chris Olley	Fife NHS	SCI Store	15/06/2017 12:13:57
Brian Duffy	Fife NHS	SCI Store	25/05/2017 11:49:28
Trixy Heather	Fife NHS	SCI Store	17/05/2017 10:18:27

Printed By: Tracy Paterson on 23/06/2026 09:44:28

SCI Store - Patient Result Report

Report ID: E-04516311

Fife SCI Store Live

Sample Collected: 07/05/2013 09:43:00

Patient

Patient Name	CHI	Date Of Birth	Age	GP	GP Practice	Consultant	Ward/Location
LEON JAMES GRATTON Name Changed	1703751191	17/03/1975	51	MacLaren, Kathryn	Bank Street Medical Group	REID, D.	(WES) Weston Day Hospital

Report Details

Report Requestor	Requestor Location	ReportIdentifier	Discipline	Referral Source
Scot, STEVENSON, Gary	(F712HS14) STRATHEDEN WARD 14 DUNINO	E-04516311	Radiology	N/A

Sample Type	Sample Collected	Sample Received	Processed Into Store	Status
IMAGING	07/05/2013 09:43:00	07/05/2013 10:18:08.717	07/05/2013 10:18:24	Active

Report**US Abdomen****Leon Gratton****US Abdomen :**

There is a diffuse slight increase in echogenicity within the liver parenchyma without focal disease, which most likely reflects fatty infiltration. No gallstones or biliary dilatation. The pancreas is also of increased echogenicity, again suggesting fatty infiltration, but no focal lesion. The spleen and kidneys appear normal.

Reported by: REID, William Dr**Verified by:** REID, William Dr**Last 3 users to access this result**

Name	System	Location	Time
Sangita Bohra	Fife NHS	SCI Store	28/08/2013 13:11:26
margaret thomson	Fife NHS	SCI Store	14/06/2013 08:58:18
alyson henderson	Fife NHS	SCI Store	12/06/2013 13:47:18

Printed By: Tracy Paterson on 23/06/2026 09:44:47

SCI Store - Patient Result Report

Report ID: E-04332077

Sample Collected: 11/10/2012 09:50:00

Fife SCI Store Live

Patient

Patient Name	CHI	Date Of Birth	Age	GP	GP Practice	Consultant	Ward/Location
LEON JAMES GRATTON Name Changed	1703751191	17/03/1975	51	MacLaren, Kathryn	Bank Street Medical Group	REID, D.	(WES) Weston Day Hospital

Report Details

Report Requestor	Requestor Location	ReportIdentifier	Discipline	Referral Source
Cullinane, Dr Sharon	(EXT) External	E-04332077	Radiology	N/A
Sample Type	Sample Collected	Sample Received	Processed Into Store	Status
IMAGING	11/10/2012 09:50:00	17/10/2012 09:44:07.603	17/10/2012 09:44:13	Active

Report**XR Hand Both****Leon Gratton**

XR BOTH HANDS AND WRISTS: No significant arthropathy.

XR BOTH KNEES: Very minimal OA changes in both knees.

XR BOTH FEET: There are minor OA changes in the 1st MTP joint of the right foot.
No other significant abnormality.**Reported by:** GRIEVE, Douglas Dr**Verified by:** GRIEVE, Douglas Dr**Last 1 users to access this result**

Name	System	Location	Time
alyson henderson	Fife NHS	SCI Store	25/10/2012 08:43:27

Printed By: Tracy Paterson on 23/06/2026 09:44:54

SCI Store - Patient Result Report

Report ID: E-04275449

Fife SCI Store Live

Sample Collected: 21/08/2012 13:45:00

Patient

Patient Name	CHI	Date Of Birth	Age	GP	GP Practice	Consultant	Ward/Location
LEON JAMES GRATTON Name Changed	1703751191	17/03/1975	51	MacLaren, Kathryn	Bank Street Medical Group	REID, D.	(WES) Weston Day Hospital

Report Details

Report Requestor	Requestor Location	ReportIdentifier	Discipline	Referral Source
Scot, STEVENSON, Gary (F712HS14)	STRATHEDEN WARD 14 DUNINO	E-04275449	Radiology	N/A

Sample Type	Sample Collected	Sample Received	Processed Into Store	Status
IMAGING	21/08/2012 13:45:00	21/08/2012 17:19:04.49	21/08/2012 17:19:10	Active

Report**US Testes****Leon Gratton**

CLINICAL DETAILS: Small lump on right testicle, 2 x 2 cm, hard and attached to skin. The lump is painful and has been present for some time.

ULTRASOUND OF TESTES:

The head of the right epididymis contains 2 small cysts which appear to correspond to the area of palpable abnormality. These are measure between 3 and 6 mm in diameter. The rest of the right epididymis and both testes and the left epididymis appear normal.

Reported by: MATTHEWS, Alastair Dr**Verified by:** MATTHEWS, Alastair Dr**Last 1 users to access this result**

Name	System	Location	Time
alyson henderson	Fife NHS	SCI Store	03/10/2012 15:14:02

Printed By: Tracy Paterson on 23/06/2026 09:45:06

SCI Store - Patient Result Report

Report ID: E-04059435

Sample Collected: 14/02/2012 09:41:00

Fife SCI Store Live

Patient

Patient Name	CHI	Date Of Birth	Age	GP	GP Practice	Consultant	Ward/Location
LEON JAMES GRATTON Name Changed	1703751191	17/03/1975	51	MacLaren, Kathryn	Bank Street Medical Group	REID, D.	(WES) Weston Day Hospital

Report Details

Report Requestor	Requestor Location	ReportIdentifier	Discipline	Referral Source
Thomas, NEADES, Glyn	(F805HBCQ) QMH BREAST CLINIC	E-04059435	Radiology	N/A

Sample Type	Sample Collected	Sample Received	Processed Into Store	Status
IMAGING	14/02/2012 09:41:00	15/02/2012 10:01:08.883	15/02/2012 10:04:35	Active

Report**US Axilla Both****Leon Gratton**

Clinical History : Bilateral axillary nodes. Known schizophrenic and hidradenitis.

US Axilla Both : Both axillary nodes are still enlarged, on the right demonstrating cortical thickness of 4.3 mm maximum, and on the left demonstrating a thickness of 4.8 mm. Following verbal consent, biopsy performed of one of the left axillary nodes, using an 18 gauge non advancing Achieve needle.

US Guided core biopsy axilla Left : Two cores obtained. No immediate complications.

The patient is an inpatient at Stratheden Hospital; a further appointment was not made, please contact Stratheden for repeat clinic appointment if necessary.

Reported by: SHARMA, Ashwini Dr

Verified by: SHARMA, Ashwini Dr

Last 3 users to access this result

Name	System	Location	Time
Sharon Cullinane	Fife NHS	SCI Store	24/05/2012 10:00:22
Peter Williamson	Fife NHS	SCI Store	14/05/2012 14:24:00
Andrew White	Fife NHS	SCI Store	02/03/2012 10:06:37

Printed By: Tracy Paterson on 23/06/2026 09:45:16

SCI Store - Patient Result Report

Report ID: E-04016690

Fife SCI Store Live

Sample Collected: 06/12/2011 14:46:00

Patient

Patient Name	CHI	Date Of Birth	Age	GP	GP Practice	Consultant	Ward/Location
LEON JAMES GRATTON Name Changed	1703751191	17/03/1975	51	MacLaren, Kathryn	Bank Street Medical Group	REID, D.	(WES) Weston Day Hospital

Report Details

Report Requestor	Requestor Location	ReportIdentifier	Discipline	Referral Source
Joseph, CAVANAGH, Paul	(F805HBCQ) QMH BREAST CLINIC	E-04016690	Radiology	N/A

Sample Type	Sample Collected	Sample Received	Processed Into Store	Status
IMAGING	06/12/2011 14:46:00	08/12/2011 11:30:06.987	08/12/2011 11:32:09	Active

Report**US Axilla Both****Leon Gratton**

Clinical Information: Bilateral superficial axillary masses. Red and tender on the left. ? abscesses. Known hidradenitis suppurativa.

ULTRASOUND BOTH AXILLAE:

There are bilateral enlarged axillary nodes. Cortex measures 4 mm on the right and 4.5 mm on the left. These may be reactive to superficial infection, and the patient does mention that he probably has groin masses as well, but a more sinister cause cannot be excluded (? haematological)

CONCLUSION:

U3. Please refer to the haematologist for further assessment.

Reported by: SHARMA, Ashwini Dr

Verified by: SHARMA, Ashwini Dr

Last 3 users to access this result

Name	System	Location	Time
Derek Mulherron	Fife NHS	SCI Store	15/01/2012 19:22:23
Lynsey Walker	Fife NHS	SCI Store	09/12/2011 15:25:51
fionnuala williams	Fife NHS	SCI Store	08/12/2011 14:13:43

Printed By: Tracy Paterson on 23/06/2026 09:45:31

SCI Store - Patient Result Report

Report ID: E-03927212

Fife SCI Store Live

Sample Collected: 22/09/2011 11:05:00

Patient

Patient Name	CHI	Date Of Birth	Age	GP	GP Practice	Consultant	Ward/Location
LEON JAMES GRATTON Name Changed	1703751191	17/03/1975	51	MacLaren, Kathryn	Bank Street Medical Group	REID, D.	(WES) Weston Day Hospital

Report Details

Report Requestor	Requestor Location	ReportIdentifier	Discipline	Referral Source
Joseph, CAVANAGH, Paul	(F805HD2) QMH WARD 2 SHORT STAY PSYCHO-GERIATRIC	E-03927212	Radiology	N/A

Sample Type	Sample Collected	Sample Received	Processed Into Store	Status
IMAGING	22/09/2011 11:05:00	22/09/2011 13:28:02.57	22/09/2011 13:28:20	Active

Report**US Testes****Leon Gratton**

Clinical History : Small lump in the right epididymis 3 - 4 mm in diameter, tender. No change in size over last few months. ? epididymal mass.

US Testes : Normal appearances of both testes, no focal lesion evident. Epididymi are normal in appearance, tiny cysts seen bilaterally. The palpable lesion is a tiny 4 mm cyst in the right epididymis, which is exophytic.

Reported by: SHARMA, Ashwini Dr

Verified by: SHARMA, Ashwini Dr

Last 3 users to access this result

Name	System	Location	Time
Peter Williamson	Fife NHS	SCI Store	14/05/2012 14:25:20
Lynsey Walker	Fife NHS	SCI Store	09/12/2011 15:26:29
Steven Park	Fife NHS	SCI Store	07/12/2011 21:48:34

Printed By: Tracy Paterson on 23/06/2026 09:45:39

