

TRAVEL RISK ASSESSMENT FORM – Ideally to be completed by traveller prior to appointment.

Name: CHERIE MARGARET CAMERON		Date of birth: 02/10/1990	
E mail: cameron_cherie90@rocketmail.com		Male ☐ Female ☒	
		Telephone number:	
		Mobile number: 07948368618	
PLEASE SUPPLY INFORMATION ABOUT YOUR TRIP IN THE SECTIONS BELOW			
Date of departure: 23rd FEBRUARY		Total length of trip: Till August	
COUNTRY TO BE VISITED	EXACT LOCATION OR REGION	CITY OR RURAL	LENGTH OF STAY
1. FRANCE	NORMANDY + Paris	WITH VISITS TO MOLAY City RURAL	21st JULY
2. Italy	ROME + VENICE	BOTH	2 WEEKS
3. BELGIUM	NORTH TO SOUTH		
Have you taken out travel insurance for this trip? WORK COVERS MEDICAL INSURANCE			
Do you plan to travel abroad again in the future? YES			
TYPE OF TRAVEL AND PURPOSE OF TRIP - PLEASE TICK ALL THAT APPLY			
☐ Holiday ☐ Staying in hotel ☒ Backpacking Additional information: ☒ Business trip ☐ Cruise ship trip ☒ Camping/hostels WORK TILL JULY AND ☐ Expatriate ☐ Safari ☐ Adventure EXPLORE A FEW OTHER ☐ Volunteer work ☐ Pilgrimage ☐ Diving COUNTRIES OFF OWN BACKS ☐ Healthcare worker ☐ Medical tourism ☐ Visiting friends/family WHEN FINISHED			
PLEASE SUPPLY DETAILS OF YOUR PERSONAL MEDICAL HISTORY			
	YES	NO	DETAILS
Are you fit and well today	☒	☐	
Any allergies including food, latex, medication	☐	☐	GOT A BIT OF A COLD
Severe reaction to a vaccine before	☐	☐	NOT THAT IM AWARE OF
Tendency to faint with injections	☐	☒	PAINTED AFTER BCG JAB
Any surgical operations in the past, including e.g. your spleen or thymus gland removed	☐	☒	
Recent chemotherapy/radiotherapy/organ transplant	☐	☒	
Anaemia	☐	☐	HAD IT PREVIOUSLY
Bleeding /clotting disorders (including history of DVT)	☐	☒	
Heart disease (e.g. angina, high blood pressure)	☐	☒	
Diabetes	☐	☒	
Disability	☐	☒	
Epilepsy/seizures	☐	☒	
Gastrointestinal (stomach) complaints	☐	☒	
Liver and or kidney problems	☐	☒	
HIV/AIDS	☐	☒	
Immune system condition	☐	☒	

	YES	NO	DETAILS
Mental health issues (including anxiety, depression)			Moderate anxiety issues
Neurological (nervous system) illness		✓	
Respiratory (lung) disease		✓	
Rheumatology (joint) conditions		✓	
Spleen problems		✓	
Any other conditions?	✓	✓	Can get migraines
Women only			
Are you pregnant?		✓	
Are you breast feeding?		✓	
Are you planning pregnancy while away?		✓	

Are you currently taking any medication (including prescribed, purchased or a contraceptive pill)?	NO
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PLEASE SUPPLY INFORMATION ON ANY VACCINES OR MALARIA TABLETS TAKEN IN THE PAST					
Tetanus/polio/diphtheria	✓	MMR		Influenza	
Typhoid		Hepatitis A		Pneumococcal	
Cholera		Hepatitis B		Meningitis	
Rabies		Japanese Encephalitis		Tick Borne Encephalitis	
Yellow fever		BCG	✓	Other	
Malaria Tablets					

Any additional information	Not sure on previous vaccines. Would have to get recorded checked. If ones came up for school got them. Plan for after work is to back pack/comp way through France, Italy.
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Travel risk assessment form devised by Jane Chiodini © 2012 in conjunction with resources below.

1. Chiodini J, Boyne L, Grieve S, Jordan A. (2007) *Competencies: An Integrated Career and Competency Framework for Nurses in Travel Health Medicine*. RCN, London. www.rcn.org.uk
2. Field VK, Ford L, Hill DR, eds. (2010) *Health Information for Overseas Travel*. National Travel Health Network and Centre, London, UK. www.nathnac.org

Form devised and created by Jane Chiodini © March 2012

NHS Grampian

Orthoptic Department
Eye Outpatient Department
Aberdeen Royal Infirmary
Aberdeen AB25 2ZN



Enquiries to Eye Outpatient Department
Extension 01224 550885/550886 (Reception)

CGE/TJ

Dr H Zakri
Denburn Medical Practice (North & East
Wing)
Rosemount Viaduct
Aberdeen
AB25 1QB

CHI: 0710902042

NO Paper Copy Required For GP

Date Dictated: 08/07/2016
Date Typed: 22/07/2016

Dear Dr Zakri

**Miss Cherie Cameron (7 October 1990) 12 Beattie Avenue, Aberdeen,
AB25 3AP**

Miss Cameron failed to attend her last 2 appointments and I assume that she no longer needs any orthoptic treatment. I will not be sending out any further appointments.

Yours sincerely

A handwritten signature in black ink, appearing to read 'G Evans', written over a horizontal line.

**Mr Charles Gary Evans
Clinical Head of Service**

NHS Grampian

Miss Jane Harcourt
Eye Outpatient Department
Aberdeen Royal Infirmary
Aberdeen AB25 2ZN



Enquiries to: Ward 203
Direct Line: 01224 552422
Fax No: 01224 551238

AK/LG

Dr H Zakri
Denburn Medical Practice (North & East
Wing)
Rosemount Viaduct
Aberdeen
AB25 1QB

CHI: 0710902042

NO Paper Copy Required For GP

Date Dictated: 17/06/2016
Date Typed: 27/06/2016

Dear Dr Zakri

**Miss Cherie Cameron (7 October 1990) 12 Beattie Avenue, Aberdeen,
AB25 3AP**

Diagnoses: 1. Migraine with visual aura
2. Bilateral dry eye (mild to moderate)
3. Phoria detected on cover testing today

Visual Acuity: Right 6/4-1 with glasses, N5
Left 6/6-1 with glasses, N5

Intraocular Pressure: Right 11
Left 15

Clinical Examination:

Normal direct and consensual pupillary reflexes to light and accommodation.
No RAPD.

Cover/uncover test straight.

Alternate cover test phoria detected.

Ocular motility full with diplopia on right superotemporal gaze.

Anterior segment examination reveals mild to moderate diffuse superficial
punctate keratopathy in both eyes.

Anterior chambers deep and quiet.

Posterior segment examination reveals normal optic disc with grossly healthy
neuroretinal rims.

Tortuous retinal vasculature but no haemorrhage or other abnormalities
detected.

Humphrey visual fields: Full visual fields

Cherie Cameron (0710902042)

This letter is viewable in SCI Store

Management:

1. Carborner gel qds to both eyes prn for dry eyes
2. Follow up in Orthoptic Clinic for diplopia symptoms and phoria detected today
3. GP to kindly commence migraine prophylaxis for migraine with visual aura

Miss Cameron attended the Primary Care Clinic today with increasing frequency of migraine type headaches. Left sided associated with visual aura in the form of seeing lots of white dots. She gets the headaches increasing when outdoors, in bright light and when working on computers and the frequency ranges from weekly to daily and when tired.

She also reports diplopia when tired and symptoms of dry eyes. She does not suffer from any kind of fits and the glasses she wears to correct distance vision do not specifically cause headaches.

Clinical examination findings are above. I would be grateful if you could kindly commence migraine prophylaxis for this lady and we will review her again in the Orthoptic Clinic and I have commenced treatment for her dry eyes.

Yours sincerely



Dr Adnan Khan
Specialty Registrar

Next appointment: 30th June 2016

Cherie M Cameron

CHI: 0710902042

Emergency Department
Aberdeen Royal Infirmary
Foresterhill
Aberdeen
Aberdeenshire, AB25 2ZN

Dept. Contact Details:
Tel:

Dr AS MCEWAN
DENBURN MEDICAL PRACTICE
DENBURN HEALTH CENTRE
ROSEMOUNT VIADUCT
ABERDEEN
AB25 1QB

May 22, 2016

Source of Referral: Self referral

Dear Dr AS McEwan

Re: Cherie M Cameron, 12 Beattie Avenue, Aberdeen, AB25 3AP

DOB: 07/10/1990

CHI: 0710902042

Your patient attended Aberdeen Royal Infirmary on: 22 MAY 2016 at 09:14 hrs.

The A&E diagnosis was:

Fracture of fibula alone

The following treatment was given:

Self attended MIU after falling off a skateboard 2 days ago. Tender fibula head.

X ray shows possible fracture to fibula head - await formal report.

Advised regular analgesia, stick for mobilisation and RIPE.

At the conclusion of treatment the patient was:

Discharged
at hrs.

Follow up:

No Follow Up

Additional Information:

Yours sincerely,
MICHELLE DUNCAN
EM DP, ARI

px: Cherie Cameron
7/10/90
12 beattie av

attended for sight test on 28.2.16 for headaches with no ocular side effects

was prescribed gls but I have advised her to see her gp for blood pressure / bloodwork checks as her retinal blood vessels r+l are very tortuous for someone of her age. could be physiological but given her headache sx it would be worthwhile investigating.

many thanks

Siobhan dolan
optometrist
specsavers
union st
abri

**Public Health Directorate
Health Protection Team**

Summerfield House
2 Eday Road
Aberdeen AB15 6RE



Register at
Denburn Medical Practice
Denburn HC, Rosemount Viaduct
AB25 1QB
Aberdeen

Date 12th of October 2015
Enquiries to 01224 558520
Email grampian.healthprotection@nhs.net

Dear Dr.

Name	Address	Date of Birth
Cherie Cameron	12 Beattie Avenue Aberdeen AB25 3AP	07/10/1990

At recent Sexual Health Roadshow the above patient consented to BBV testing.

Results were:

- Hep B Surface Antigen :- Negative
- Hep C Antibody :- Negative
- HIV types 1 & 2 :- Negative

Your patient is aware of risk factors and should they consider themselves at ongoing risk to approach the surgery and request Hepatitis B vaccination, in line with Department of Health Green Book:- Immunisations Against Infectious Disease.

Yours sincerely

Helen Corrigan

Helen Corrigan
Health Protection Nurse Specialist



Dr AS Mcewan
Denburn Medical Practice
Denburn Health Centre
Rosemount Viaduct
Aberdeen
AB25 1QB

Aberdeen Royal Infirmary
Colposcopy Clinic
Women's Day Clinic
Foresterhill
ABERDEEN
AB25 2ZN

Contact: Andrea Macgregor
Telephone: 01224 554307
andreamacgregor@nhs.net
Reference: AM / JW
14/09/2015

Dear Dr Mcewan

Patient Details: CHI Number 0710902042
Unit Number 0929924J
Name Cherie Cameron
Date of Birth 07/10/1990
Address 12 Beattie Avenue, Aberdeen
AB25 3AP

Your patient was seen at the clinic on 19/08/2015 and at this visit, a colposcopy was done but no treatment was undertaken.

Colposcopy assessment was HPV/Inflamm/Benign.

No smear was taken.

No cervical biopsy was taken.

The test results indicate that no further treatment of your patient is necessary. Your patient has therefore been discharged from the colposcopy clinic. I recommend that a follow up smear should be taken in 6 months time.

Your patient has been advised of the results and that she will be invited to attend for her next smear test. Your patient will therefore appear on your Recommended Call List (RCL) on SCCRS in due course.

Yours sincerely

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

Mrs J Wilson
Nurse Colposcopist

Copy to: Dr L Smart, Cytology

Hospital use only	Clinic	Day Date	Time	Hospital No.
SCI Gateway Electronic Referral MEDICAL IN CONFIDENCE Patient Consent has been given for information sharing			Date Referral Created	
			25-Jan-2019	
			Date Referral Submitted	
			28-Jan-2019 @ 09:56:48	

Unique Care Pathway Number: **101017882811A**CHI No: **0710902042**

REFERRAL TO	
DermatologyA7 Grampian General Protocol	— Consultant / receiving practitioner and/or specialty clinic
Aberdeen Royal Infirmary Foresterhill Road Aberdeen AB25 2ZN	— Hospital and hospital address Hospital unit no. N101H Email address -
Urgency of Referral Routine Sensitivity of Referral Sensitive	

PATIENT DETAILS	
Surname Cameron Forename(s) Cherle Title Miss Sex Female Marital Status Single Date of birth 07-Oct-1990 CHI No. 0710902042	Patients address 12 Beattie Avenue Aberdeen AB25 3AP Contact details Home: 919247 / 07943 368618

REFERRING PRACTITIONER DETAILS	
Name Dr. Amir Iqbal GP Code 62723 GMC Code 6050971 Practice name Denburn Medical Practice (30078) Practice code 30078	Practice address Denburn Health Centre Rosemount Viaduct Aberdeen AB25 1QB Contact details Voice: 01224 643333

ADMINISTRATIVE INFORMATION
This referral letter is complete, has been checked by the referring HCP and authorised for transmission. Referred By: Registered GP

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

Reason For Referral Patch testing

Referral Reason / Background Dear Dr

I would be grateful if you could review this 22-year-old girl who is having problems with exacerbation of her eczema to what she thinks is allergy triggers. She has had a severe reaction to red wine in the past and it appears that some things that she is not able to identify at the moment have made her skin very problematic and increasing her flares.

She is quite an uncontrolled eczema patient but I so think there is some sort of allergy trigger process going on. When she has the reactions she gets some erythema, urticarial rash and some swelling of the soft tissues. However she has never required any steroid treatment. I have put her in for a Rast test in the meantime to see if this will give us any indication and I will refer her again to dermatology.

I would be grateful for patch testing to help with her further management.

Yours sincerely

Dr Amir Iqbal
Signed on behalf of Julie Ann Morrison

Examinations and Investigations**Examinations**

Current smoker	-	29-Jun-2015
Trying to give up smoking	-	27-May-2015
Cigarette smoker	-	27-May-2015
Alcohol consumption, 1 units/week	-	09-Apr-2014
Alcohol consumption 4 units/week	no abdo pain today. , to come back if no improvement	07-Oct-2011
Alcohol intake within recommended sensible limits	-	14-Dec-2010
Aerobic exercise 3+ times/week	-	09-Apr-2014

Investigations

NB:	THE PAST MEDICAL HISTORY SECTION MAY CONTAIN ONLY DATA JUDGED OF THE HIGHEST SIGNIFICANCE TO THE PATIENT'S GP RECORD	-
NB:	IT MAY NOT CONTAIN DATA FROM LABS OR RADIOLOGY FOR WHICH SCI STORE SHOULD BE CONSULTED	-
Patient Weight in Kilograms	54	-
Patient Height in Metres	154	-
Patient BMI	22.77	-

Reason for Referral

Care type requested Out Patient

Expected outcome Not Specified

Past medical history**Pre-existing conditions**

<u>Description</u>	<u>Laterality</u>	<u>Modifier</u>	<u>Extention</u>	<u>Date of onset</u>
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Migraine	-	-	with visual aura	17-Jun-2016
Dry eyes	-	-	bilateral dry eye (mild to moderate) Phoria detected on cover testing to day	17-Jun-2016
Gastritis unspecified	-	-	-	07-Oct-2011
Fracture of metatarsal bone	-	-	conservative treatment	06-Sep-2000

Medication Details**Current and recent medication**

No medications recorded

Past Medication Section

<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Dermol Cream	-	500 gram	APPLY TWICE DAILY	-	24-Jan-2019	42Days
Betamethasone Valerate Cream 0.025 %	-	100 GRAM	APPLY THINLY 1-2 TIMES DAILY	-	24-Jan-2019	42Days
Cetirizine Hydrochloride Tablets 10 mg	-	21 tablet	ONE DAILY	-	04-Jan-2019	21Days
Hydrocortisone Cream 0.5 %	-	30 gram	APPLY THINLY 1-2 TIMES DAILY	-	04-Jan-2019	42Days
Dermol 200 Shower Emollient	-	200 ml	TO BE USED AS SOAP SUBSTITUTE	-	04-Jan-2019	42Days
Zerobase Cream 11 %	-	500 gram	APPLY TWICE A DAY AS A MOISTURISER	-	04-Jan-2019	42Days

Application Version No.**2.1.1c**Stylesheet Version No.**7.17**

Signature of referring doctor (or other professional)

Date

