

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

REFERRAL LETTER

MEDICAL IN CONFIDENCE

REFERRAL TO

Ear, Nose & Throat (ENT) C5
TAY General Referral

Consultant / receiving practitioner
and/or specialty clinic

Stracathro Hospital
By Brechin
DD9 7QA

Hospital and hospital address

Hospital unit no.

T312H

Email address

-

Urgency of referral

Routine

PATIENT DETAILS

Surname

REID

Forename(s)

LEE

Title

MR

Sex

Male

Date of birth

10-May-1992

CHI no.

1005922055

Patient's address

ROSSIE SECURE ACCOMMODATION SERVICE
MONTROSE
DD10 9TW

Contact number(s)

Voice: 01674820204

REGISTERED GP DETAILS

Name

Dr GA Kramer

GMC code

3205066

GP code

76252

Practice name

ANNAT BANK PRACTICE

Practice code

13706

Practice address

LINKS HEALTH CENTRE
MARINE AVENUE
MONTROSE

Contact number(s)

Voice: 01674-673400

REFERRING PRACTITIONER DETAILS

Name

Dr MJ Anderson

GMC code

2593285

GP code

76066

Practice name

ANNAT BANK PRACTICE

Practice code

13706

Practice address

LINKS HEALTH CENTRE
MARINE AVENUE
MONTROSE

Contact number(s)

Voice: 01674-673400

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

Description: Recurrent Epistaxis - Ref by Dr Giles Ledlie

Comment: I would be very grateful if you could see this 16 year old with recurrent epistaxis. He was referred last year but did not attend an appointment in September 2008. He is now having self limiting bleeds every few days.

Many thanks for offering him a further appointment.

Yours sincerely

Dr Giles Ledlie
GMC No., 4646721

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>Extension</u>	<u>Date of onset</u>
Fracture of scaphoid	-	-	[YEAR OF EVENT 2002]	01-Jan-2002
Asthma	-	-	[MONTH AND YEAR OF EVENT 10/1992]	01-Oct-1992
Atopic dermatitis/eczema	-	-	[MONTH AND YEAR OF EVENT 10/1992]	01-Oct-1992

Current and recent medication

<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
SALBUTAMOL cfc free inh 100micrograms/inhalation	02914002	200 dose inhaler	TWO PUFFS TO BE TAKEN WHEN RE [more]	-	12-Feb-2009	-
CLENIL MODULITE cfc free inh 50micrograms/actuation	14173001	200 dose inhaler	TWO PUFFS TWICE DAILY	-	12-Feb-2009	-
BUCCASTEM tabs 3mg	05163001	tablet(s)	ONE TABLET(S) TWICE DAILY WH [more]	-	31-Dec-2008	-
CLENIL MODULITE cfc free inh 50micrograms/actuation	14173001	200 dose inhaler	TWO PUFFS TWICE DAILY	-	18-Dec-2008	-

Clinical warnings**Lifestyle risks**

Exercise status: Not Known

Smoking status

Number per day
? (not known)

Alcohol consumption

Units per day
? (not known)

Additional relevant information**Administrative information**

Referred By:Registered GP

Signature of referring doctor (or other professional) **Date**