

HAEMATOLOGY DEPARTMENT

GLASGOW ROYAL INFIRMARY
UNIVERSITY NHS TRUST

SURNAME KEOWN		FORENAMES MICHAEL		SEX M	HOSP. No.		DOB/AGE 01/12/55	
ADDRESS		POST CODE	CONSULTANT		G.P./OTHER NAME AND ADDRESS			
		HOSPITAL G.P.	WARD/CLINIC Shettleston H.C.					
DATE AND TIME RECEIVED 16/07/96, 18:25 HRS		LAB No. 0148805.X	CLINICAL INFORMATION CLINICAL DETAILS UNCLEAR					

DATE WITHDRAWN	WBC x 10 ⁹ /l	NEUTRO x 10 ⁹ /l	LYMPH x 10 ⁹ /l	Hb g/dl	RBC x 10 ¹² /l	Hct l/l	MCV fl	MCH pg	RDW %	RETIC x 10 ⁹ /l	PLT x 10 ⁹ /l	ESR mm/hr	BLOOD COUNT				
	M 13.0-18.0 F 11.5-16.5		M 4.5-8.5 F 3.8-5.8		M 0.40-0.54 F 0.37-0.47		76-99		27-32		11.5-14.5			50-100		150-400	
16/07/96	8.0	5.6	1.4	14.7	4.61	0.406	88.2	31.9	12.6		212	10	ON VAMP points REC'D 7. JUL 96 RESULT POSITIVE RESULT NORMAL	DIFF	COMMENTS		
	NEUTRO x 10 ⁹ /l	LYMPH x 10 ⁹ /l	MONO x 10 ⁹ /l	EOSIN x 10 ⁹ /l	BASO x 10 ⁹ /l	META	MYELO	BLAST	OTHER	NRBC	GRANULAR FEVER SCREENING TEST						
2.0-7.5	1.5-4.0	0.2-0.8	0.04-0.4	0.01-0.1													
Analysed Diff	5.6	1.4	0.7	0.30	0.00												

COMMENTS

FORMAL ADULT REFERENCE RANGES ARE FOR GUIDANCE ONLY. THEY DO NOT TAKE INTO ACCOUNT PREGNANCY AND AGE DIFFERENCE AND ARE NOT FOR PUBLICATION.

FULL BLOOD COUNT	REPORTED ON 17/07/96 07:49HRS	AUTHORISED BY Maria Brady	HAEMATOLOGIST
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BIOCHEMISTRY DEPARTMENT

GLASGOW ROYAL INFIRMARY UNIVERSITY NHS TRUST

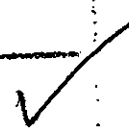
AName **KEOWN MICHAEL** Sex **M** Date of Birth **17/12/55** Hospital **GP** Ward **SHC**Address **12 GARVEL CR**Consultant **BRUCE**
Received **13/ 7/94 1400**

Hospital Number

Accession Number **338428 B**

Clinical Information

Withdrawal Date Time	Sodium 135-145 mmol/L	Potassium 3.5-5.0 mmol/L	Chloride 97-107 mmol/L	CO ₂ Content 23-30 mmol/L	Urea 2.5-8.0 mmol/L	Creatinine 40-130 μmol/L	Osmolality 270-295 mmol/kg	Urine Osmolality mmol/kg	Glucose (Fasting) 4.0-5.5 mmol/L	Amylase 70-200 U/L	Comment (see Overleaf)
30/ 3 1439	138	3.7	105	23	3.9	102			8.1		
12/ 4 1130									7.5		
7/ 6 1402	137	4.0	105	26	3.5	98					
13/ 7 1200									4.8		

15 JUL 1994**RESULT OF TESTS.
GIVE PATIENT****APPOINTMENT****TELL POSITIVE****TELL NORMAL**

COMMENT

ISSUED AT 15:49:18 ON 13/ 7/94

Note: Reference values given are for general guidance, are not differentiated by age and sex, and are not suitable for publication.

RANGE CHECKED BY COMPUTER

INDEX TO COMMENT CODES

- A Unsatisfactory Analysis — Sample insufficient for full repeat
- B We regret one or more specimens broken in centrifuge
- C Specimen collected in inappropriate container
- D Results deleted following discussion with ward/clinic
- E Emergency Analysis
- F Result to follow
- H Haemolysed Specimen
- I Specimen insufficient for full analysis
- N Insufficient specimens received for analyses requested
- T Turbid Specimen
- U Specimen unsuitable for analysis
- V Very old specimen (Received > 24h after withdrawal)
- X Full analysis not performed for any other reason

BELVIDERE HOSPITAL GLASGOW
REPORT FROM RADIOLOGICAL DEPARTMENT

DATE 29.6.94

DOCTOR Dr Spence

04 JUL 1994

FILM NO. 943175

D.O.B. 1.12.55

PATIENT'S NAME Michael Keown

WARD GP

ADDRESS 12 Garvel Crescent

REPORT:-

FILM NO.

CHEST - normal heart and mediastinum.
No active focal lung lesion.

BARIUM MEAL - there is minimal gastro-oesophageal
reflux. No associated hiatus hernia. A fair amount
of resting gastric fluid is noted in the stomach.
The stomach and duodenum is otherwise normal.
No peptic ulceration.

F W POON

29 JUN 1994

HAEMATOLOGY DEPARTMENT

GLASGOW ROYAL INFIRMARY
GLASGOW ROYAL MATERNITY HOSPITAL

SURNAME KEOWN	FORENAMES MICHAEL	SEX M	HOSP. No.	DOB/AGE 01/12/55
ADDRESS 09 JUN 1994	POST CODE	CONSULTANT	G.P./OTHER NAME AND ADDRESS Dr S.J.BRUCE SHETTLESTON H.C. OLD SHETTLESTON RD, GLA	
DATE AND TIME RECEIVED 07/06/94, 14:56 HRS	HOSPITAL G.P.	WARD/CLINIC Shettleston H.C.		
	LAB. No. 0096007.E	CLINICAL INFORMATION CLINICAL DETAILS UNCLEAR		

DATE WITHDRAWN	WBC x 10 ⁹ /l	NEUTRO x 10 ⁹ /l	LYMPH x 10 ⁹ /l	Hb g/dl M 13.0-18.0 F 11.5-16.5	RBC x 10 ¹² /l M 4.5-6.5 F 3.8-5.8	Hct l/l M 0.40-0.54 F 0.37-0.47	MCV fl 76-99	MCH pg 27-32	RDW % 11.5-14.5	RETIC x 10 ⁹ /l 50-100	PLT x 10 ⁹ /l 150-400	ESR mm/hr M < 10 F < 12
30/03/94	5.7	3.0	2.0	14.4	4.71	0.412	87.3	30.6	12.1		173	
07/06/94	6.5	3.8	1.9	15.1	4.90	0.416	84.8	30.8	12.7		187	6
Analyser Diff	NEUTRO x 10 ⁹ /l	LYMPH x 10 ⁹ /l	MONO x 10 ⁹ /l	EOSIN x 10 ⁹ /l	BASO x 10 ⁹ /l	META	MYELO	BLAST	OTHER	CLANDULAR	FEVER SCREENING TEST	DIFFERENTIAL RESULTS AND COMMENTS REFER TO TEST SPECIMEN
	2.0-7.5	1.5-4.0	0.2-0.8	0.04-0.4	0.01-0.1							
	3.8	1.9	0.5	0.30	0.00							

COMMENTS

RESULT OF TESTS.

GIVE PATIENT

APPOINTMENT

TELL POSITIVE

TELL NORMAL

NORMAL ADULT REFERENCE RANGES ARE FOR GUIDANCE ONLY. THEY DO NOT TAKE INTO ACCOUNT AGE DIFFERENCES AND ARE NOT FOR PUBLICATION.

FULL BLOOD COUNT

REPORTED ON

08/06/94 10:55HRS

AUTHORISED BY

Linda Macrae

HAEMATOLOGIST

BIOCHEMISTRY DEPARTMENT

GLASGOW ROYAL INFIRMARY UNIVERSITY NHS TRUST

E1

NameKEOWNMICHAELSexMD. o. b.1/12/55HospitalGPWardSHC

Address12 GARVEL CR

ConsultantSPENCE

Hospital Number

Date sampled7/ 6/94

Date received8/ 6/94

Accession Number28756 K

Clinical Information WT LUSS. TIREDNESS

Date	Time	T4 55-144 nmol/L	T3 0.9-2.8 nmol/L	TSH 0.35-5.0 mU/L	TBG 12-30 mg/L	FT4 9-24 pmol/L	
7/ 6/94	0900	93		1.70			<
ON VAMP 10 JUN 1994							

COMMENT

THYROID

E1

Note: Reference values given are for general guidance, are not differentiated by age and sex, and are not for publication.

ISSUED AT 20:11:17 ON 8/ 6/94

INDEX TO CODES AND ABBREVIATIONS

CODES FOR DYNAMIC FUNCTION TESTS

ARG	Arginine Infusion
BCR	Bromocriptine Suppression
CAI	Calcium Infusion
CLO	Clomiphene Stimulation
CLN	Clonidine Stimulation
CRF	Corticotrophin Releasing Factor
DEX	Dexamethasone Suppression
DOP	Dopamine Infusion
DR	Diurnal Rhythm
EX	Exercise
GLG	Glucagon
GNR	Gonadotrophin Releasing Hormone
GRF	Growth Hormone Releasing Factor
GTT	Glucose Tolerance
HCG	Human Chorionic Gonadotrophin Stimulation
ITT	Insulin Tolerance
MCP	Metoclopramide Stimulation (Maxolon)
MET	Metyrapone
NVC	Neck Vein Catheterisation
PLT	Placental Loading (DHA, DHAS)
PHI	Parathyroid Hormone Infusion
SEC	Secretin
SYN	Synacthen
TM	Test Meal
TPC	Transportal Catheterisation
TRH	Thyrotrophin Releasing Hormone
SI	Special Investigation

A
F
N

SAMPLE COMMENT CODES

Unsatisfactory analysis.
Result to follow.
Insufficient specimens received
for analyses requested.
Specimen unsuitable for analysis.

TEST ABBREVIATIONS

T4	Thyroxine
T3	Triiodothyronine
TSH	Thyroid Stimulating Hormone
TBG	Thyroxine Binding Globulin
FT4	Free Thyroxine

Detailed protocols for dynamic function tests
are available from the laboratory.

BIOCHEMISTRY DEPARTMENT				GLASGOW ROYAL INFIRMARY UNIVERSITY NHS TRUST				B		
Name	KEOWN	MICHAEL	Sex	M	D.o.b.	1/12/55	Hospital	GP	Ward	SHC
Address	12 GARVEL CR		Consultant	SPENCE		Hospital Number				
			Received	7/ 6/94		1412				
							Accession Number	335223 A		

Clinical Information		WEIGHT LOSS											Comment (see overleaf)
Withdrawal Date	Time	Adjusted Calcium 2.2-2.6 mmol/L	Calcium 2.2-2.6 mmol/L	Phosphate 0.7-1.4 mmol/L	Total Protein 62-82 g/L	Albumin 35-55 g/L	Globulins 22-33 g/L	Bilirubin (Total) 3-22 µmol/L	Alk. Phos 80-280 U/L	AsT 12-48 U/L	AlT 3-55 U/L	LDH 230-525 U/L	
30/ 3	1439							8	175	26	27		
7/ 6	1402							8	170	26	23		
08 JUN 1994													
RESULT OF TESTS. GIVE PATIENT													
Withdrawal Date	Time	Magnesium 0.7-1.0 mmol/L	IgA 0.8-4.5 g/L	IgG 8.0-16.0 g/L	IgM 0.5-2.0 g/L	Bilirubin 3-22 µmol/L	C-Reactive Protein < 10 mg/L	Gamma GT < 38 U/L	Urate 110-480 µmol/L	CK-MB <10 µg/L	Comment (see overleaf)		
30/ 3	1439							13					
TELL POSITIVE													
TELL NORMAL											ON WA		

COMMENT	ISSUED AT 15:32:23 ON 7/ 6/94
Note: Reference values given are for general guidance, are not differentiated by age and sex, and are not suitable for publication. RANGE CHECKED BY COMPUTER	

INDEX TO COMMENT CODES

- A Unsatisfactory Analysis — Sample insufficient for full repeat
 - B We regret one or more specimens broken in centrifuge
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 - T Turbid Specimen
 - U Specimen unsuitable for analysis
 - V Very old specimen (Received > 24h after withdrawal)
 - X Full analysis not performed for any other reason
 - HIGH Result > 10,000 U/l (AsT and ALT ONLY).
-

BIOCHEMISTRY DEPARTMENT

GLASGOW ROYAL INFIRMARY UNIVERSITY NHS TRUST

A

Name KEOWN MICHAEL Sex M D. o. b. 1/12/55 Hospital GP Ward SHC

Address 12 GARVEL CR

Consultant SPENCE
Received 7/ 6/94 1412

Hospital Number

Accession Number 335223 A

Clinical Information WEIGHT LOSS

Withdrawal Date Time	Sodium 135-145 mmol/L	Potassium 3.5-5.0 mmol/L	Chloride 97-107 mmol/L	CO ₂ Content 23-30 mmol/L	Urea 2.5-8.0 mmol/L	Creatinine 40-130 μmol/L	Osmolality 270-295 mmol/kg	Urine Osmolality mmol/kg	Glucose (Fasting) 4.0-5.5 mmol/L	Amylase 70-200 U/L	Comment (see Overleaf)
30/ 3 1439	138	3.7	105	23	3.9	102			8.1		
12/ 4 1130									7.5		
7/ 6 1402	137	4.0	105	26	3.5	98					

08 JUN 1994

RESULT OF TESTS.
GIVE PATIENT

APPOINTMENT	
TELL POSITIVE	
TELL NORMAL	✓

INDEX TO COMMENT CODES

A	Unsatisfactory Analysis — Sample insufficient for full repeat
B	We regret one or more specimens broken in centrifuge
C	Specimen collected in inappropriate container
D	Results deleted following discussion with ward/clinic
E	Emergency Analysis
F	Result to follow
H	Haemolysed Specimen
I	Specimen insufficient for full analysis
N	Insufficient specimens received for analyses requested
T	Turbid Specimen
U	Specimen unsuitable for analysis
V	Very old specimen (Received > 24h after withdrawal)
X	Full analysis not performed for any other reason

BIOCHEMISTRY DEPARTMENT

GLASGOW ROYAL INFIRMARY

**E5**

Name **KEOWN MICHAEL** Sex **M** D.o.b. **1/12/55** Hospital **GP** Ward **SHC**

Address **12 GARVEL CR**Consultant **BRUCE**

Hospital Number

Date sampled **29/ 4/94**Date received **29/ 4/94**Accession Number **21451 W**

Clinical Information

Date	Time		GLUCOSE 4.0-5.5 mmol/l	HGH mU/l	INSULIN u.d.-13 mU/l	AMENDED INS/GLU RATIO	C-PEPTIDE 0.18-0.63 nmol/l	GASTRIN u.d.-120 ng/l	PANC PP pmol/l	GLUCAGON 130-500 ng / l	IGF-1 0.30-2.20 UG/L
29/ 4/94	0945	GTT	6.6								
29/ 4/94	1145	GTT	5.0								

**RESULT OF TESTS.
GIVE PATIENT**

APPOINTMENT	
TELL POSITIVE	
TELL NORMAL	✓

bing
05 MAY 1994

COMMENT

Note: Reference values are age dependent, and are established only for the fasting state.
Data for dynamic function tests are available from the laboratory.

ISSUED AT 19:25:46 ON 3/ 5/94

ENDOCRINE**E5**

INDEX TO CODES AND ABBREVIATIONS

CODES FOR DYNAMIC FUNCTION TESTS

ARG	Arginine Infusion
BCR	Bromocriptine Suppression
CAI	Calcium Infusion
CLO	Clomiphene Stimulation
CLN	Clonidine Stimulation
CRF	Corticotrophin Releasing Factor
DEX	Dexamethasone Suppression
DOP	Dopamine Infusion
DR	Diurnal Rhythm
EX	Exercise
GLG	Glucagon
GNR	Gonadotrophin Releasing Hormone
GRF	Growth Hormone Releasing Factor
GTT	Glucose Tolerance
HCG	Human Chorionic Gonadotrophin Stimulation
ITT	Insulin Tolerance
MCP	Metoclopramide Stimulation (Maxolon)
MET	Metyrapone
NVC	Neck Vein Catheterisation
PLT	Placental Loading (DHA, DHAS)
PHI	Parathyroid Hormone Infusion
SEC	Secretin
SYN	Synacthen
TM	Test Meal
TPC	Transportal Catheterisation
TRH	Thyrotrophin Releasing Hormone
SI	Special Investigation

SAMPLE COMMENT CODES

A	Unsatisfactory analysis.
F	Result to follow.
N	Insufficient specimens received for analyses requested.
U	Specimen unsuitable for analysis.

TEST ABBREVIATIONS

Growth Hormone
Insulin Glucose Ratio ($\frac{\text{Insulin}}{\text{Glucose} \times 1.7}$)
C-Peptide of Insulin
Pancreatic Polypeptide
Insulin Growth Factor 1 (a.k.a. Somatomedin C)

Detailed protocols for dynamic function tests are available from the laboratory

GH
 INS/ GLU
 C-PEPTIDE
 PANC PP
 IGF-1
 APPOINTMENT
 GIVE PATIENT
 RESULT OF TESTS
 ON VENT
 TELL NORMAL
 TELL POSITIVE

BIOCHEMISTRY DEPARTMENT

GLASGOW ROYAL INFIRMARY

 **A**

Name **KEOWN**

MICHAEL

Sex **M**

D. o. b. **1/12/55**

Hospital **GP**

Ward **SHC**

Address **INFO ESSENTIAL**

Consultant **BRUCE**

Hospital Number

Received **12/ 4/94 1514**

Accession Number **330306 E**

Withdrawal		Sodium	Potassium	Chloride	CO ₂ Content	Urea	Creatinine	Osmolality	Urine Osmolality	Glucose (Fasting)	Amylase	Comment (see Overleaf)
Date	Time	135-145 mmol/L	3.5-5.0 mmol/L	97-107 mmol/L	23-30 mmol/L	2.5-8.0 mmol/L	40-130 µmol/L	270-295 mmol/kg	mmol/kg	4.0-5.5 mmol/L	70-200 U/L	
12/ 4	1130									7.5		
RESULT OF TESTS. GIVE PATIENT APPOINTMENT TELL POSITIVE TELL NORMAL ON VAMP 14 APR 1994 TW												

INDEX TO COMMENT CODES

- A Unsatisfactory Analysis — Sample insufficient for full repeat
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 - N Insufficient specimens received for analyses requested
 - T Turbid Specimen
 - U Specimen unsuitable for analysis
 - V Very old specimen (Received > 24h after withdrawal)
 - X Full analysis not performed for any other reason
-

BIOCHEMISTRY DEPARTMENT

GLASGOW ROYAL INFIRMARY



A

Name **KEOWN** **MICHAEL** Sex **M** D. o. b. **1/12/55** Hospital **GP** Ward **SHC**

Address **NO INFO**

Consultant **BRUCE**

Hospital Number

Received **30/ 3/94 1449**

Accession Number **328042 L**

Clinical Information

Withdrawal Date	Time	Sodium 135-145 mmol/L	Potassium 3.5-5.0 mmol/L	Chloride 97-107 mmol/L	CO ₂ Content 23-30 mmol/L	Urea 2.5-8.0 mmol/L	Creatinine 40-130 µmol/L	Osmolality 270-295 mmol/kg	Urine Osmolality mmol/kg	Glucose (Fasting) 4.0-5.5 mmol/L	Amylase 70-200 U/L	Comment (see Overleaf)
30/ 3	1439	138	3.7	105	23	3.9	102			8.1		

01 APR 1994

**RESULT OF TESTS.
GIVE PATIENT**

APPOINTMENT

TELL POSITIVE

TELL NORMAL

COMMENT

ISSUED AT 16:00:07 ON 30/ 3/94

Note: Reference values given are for general guidance, are not differentiated by age and sex, and are not suitable for publication.

VAMP

INDEX TO COMMENT CODES

A	Unsatisfactory Analysis — Sample insufficient for full repeat
B	We regret one or more specimens broken in centrifuge
C	Specimen collected in inappropriate container
D	Results DELETED following discussion with ward/clinic
E	Emergency Analysis
F	Result to follow
H	Haemolysed Specimen
I	Specimen insufficient for full analysis
N	Insufficient specimens received for analyses requested
T	Turbid Specimen
U	Specimen unsuitable for analysis
V	Very old specimen (Received > 24h after withdrawal)
X	Full analysis not performed for any other reason

BIOCHEMISTRY DEPARTMENT

GLASGOW ROYAL INFIRMARY

**B**Name **KEOWN** **MICHAEL** Sex **M** D.o.b. **1/12/55** Hospital **GP** Ward **SHC**Address **NO INFO**Consultant **BRUCE**

Hospital Number

Received **30/ 3/94 1449**

Accession Number

328042 L

Clinical Information

Withdrawal Date	Time	Adjusted Calcium 2.2-2.8 mmol/L	Calcium 2.2-2.8 mmol/L	Phosphate 0.7-1.4 mmol/L	Total Protein 62-82 g/L	Albumin 35-55 g/L	Globulins 22-33 g/L	Bilirubin (Total) 3-22 umol/L	Alk. Phos 80-280 U/L	AsT 12-48 U/L	AIT 3-55 U/L	LDH 230-525 U/L	CK <150 U/L	Commer (see overleaf)
30/ 3	1439							8	175	26	27			

01 APR 1994**RESULT OF TESTS.
GIVE PATIENT****APPOINTMENT**

Withdrawal Date	Time	Magnesium 0.7-1.0 mmol/L	IgA 0.8-4.5 g/L	IgG 6.0-15.0 g/L	TbM 4-14 g/L	Bilirubin (Total) 3-22 umol/L	Alk. Phos 80-280 U/L	AsT 12-48 U/L	AIT 3-55 U/L	LDH 230-525 U/L	CK <150 U/L	Commer (see overleaf)
30/ 3	1439											

TELL NORMAL**ON VAMP**

COMMENT

ISSUED AT 16:14:16 ON 30/ 3/94

Note: Reference values given are for general guidance, are not differentiated by age and sex, and are not suitable for publication.**RANGE CHECKED BY COMPUTER**

INDEX TO COMMENT CODES

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 - U Specimen unsuitable for analysis
 - V Very old specimen (Received > 24h after withdrawal)
 - X Full analysis not performed for any other reason
 - HIGH Result > 10,000 U/l (AsT and ALT ONLY).
-

BIOCHEMISTRY DEPARTMENT

GLASGOW ROYAL INFIRMARY

**B**

Name **KEOWN MICHAEL** Sex **M** D.o.b. **1/12/55** Hospital **GP** Ward **SHC**
 Address **12 GARVEL CRES** Consultant **BRUCE** Hospital Number **656660 W**
 Received **10/ 2/92 1500** Accession Number **105241 A**

Clinical Information

Withdrawal		Adjusted Calcium 2.2-2.6 mmol/l	Calcium 2.2-2.6 mmol/l	Phosphate 0.7-1.4 mmol/l	Total Protein 62-82 g/l	Albumin 35-55 g/l	Globulins 22-33 g/l	Bilirubin (Total) 3-22 μmol/l	Alk Phos 80-280 U/l	AsT 12-48 U/l	AIT 3-55 U/l	LDH 230-525 U/l	CK <150 U/l	Comments (see overleaf)
Date	Time													
10/ 2	1105							4	155	21	25			

Withdrawal		Magnesium 0.7-1.0 mmol/l	IgA 0.8-4.5 g/l	IgG 8.0-15.0 g/l	IgM 0.4-3.0 g/l	Bilirubin (Direct) < 8 μmol/l	Acid Phos (Prostatic) 0-2.7 u/l	Gamma GT <38 U/l	Urate 110-460 μmol/l	C-Reactive Protein <10 mg/l	Comments (see overleaf)
Date	Time										

2

1092 ECT CT

1992 FEB 11 12:52

COMMENT

ISSUED AT 12:52:00 ON 11/ 2/92

Note: Reference values given are for general guidance, are not differentiated by age and sex, and are not suitable for publication.

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- E Emergency Analysis
- F Result to follow
- H Haemolysed Specimen
- I Specimen insufficient for full analysis
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- T Turbid Specimen
- U Specimen unsuitable for analysis
- V Very old specimen (Received > 24h after withdrawal)
- X Full analysis not performed for any other reason
- HIGH Result > 10,000 U/l (AsT and ALT ONLY).

1	2	3	4
5	6	7	8
9	10	11	12
13	14	15	16
17	18	19	20
21	22	23	24
25	26	27	28
29	30	31	32
33	34	35	36
37	38	39	40
41	42	43	44
45	46	47	48
49	50	51	52
53	54	55	56
57	58	59	60
61	62	63	64
65	66	67	68
69	70	71	72
73	74	75	76
77	78	79	80
81	82	83	84
85	86	87	88
89	90	91	92
93	94	95	96
97	98	99	100

ON VAMP

HAEMATOLOGY DEPARTMENT

GLASGOW ROYAL INFIRMARY
GLASGOW ROYAL MATERNITY HOSPITAL

SURNAME KEOWN		FORENAMES MICHAEL		SEX M	HOSP. No.		DOB/AGE 01/12/55					
ADDRESS		POST CODE	CONSULTANT			G.P./OTHER NAME AND ADDRESS Dr S.J.BRUCE SHETTLESTON H.C. OLD SHETTLESTON RD, GLA						
		HOSPITAL G.P.	WARD/CLINIC Shettleston H.C.									
DATE AND TIME RECEIVED 30/03/94, 16:24 HRS		LAB. No. 0052307.E		CLINICAL INFORMATION CLINICAL DETAILS UNCLEAR								
DATE WITHDRAWN	WBC x 10 ⁹ /l	NEUTRO x 10 ⁹ /l	LYMPH x 10 ⁹ /l	Hb g/dl M 13.0-18.0 F 11.5-16.5	RBC x 10 ¹² /l M 4.5-6.5 F 3.8-5.8	Hct l M 0.40-0.54 F 0.37-0.47	MCV fl 76-99	MCH pg 27-32	RDW % 11.5-14.5	RETIC x 10 ⁹ /l 50-100	PLT x 10 ⁹ /l 150-400	ESR mm/hr M < 10 F < 12
	30/03/94	5.7	3.0	2.0	14.4	4.71	0.412	87.3	30.6	12.1	173	
Analyser Diff	NEUTRO x 10 ⁹ /l	LYMPH x 10 ⁹ /l	MONO x 10 ⁹ /l	EOSIN x 10 ⁹ /l	BASO x 10 ⁹ /l	MET	MYELO	BLAST	OTHER	NRBC	GLANDULAR FEVER SCREENING TEST	DIFF COMMENTS DIFFERENTIAL RESULTS AND COMMENTS REFER TO LATEST SPECIMEN
	2.0-7.5	1.5-4.0	0.2-0.8	0.04-0.4	0.01-0.1							
COMMENTS	RESULT OF TESTS GIVE PATIENT APPOINTMENT TELL PATIENT ON VAMP 05 APR 1994											
NORMAL ADULT REFERENCE RANGES ARE FOR GUIDANCE ONLY. THEY DO NOT TAKE INTO ACCOUNT AGE DIFFERENCE AND ARE NOT FOR PUBLICATION.												
FULL BLOOD COUNT				REPORTED ON 31/03/94 08:37HRS		AUTHORISED BY Sandra MacColl		HAEMATOLOGIST				

INVESTIGATION REQUIRED <i>FVC</i>	DATE <i>10/2</i>	SIGNATURE <i>[Signature]</i>	LABORATORY No. <i>110177</i>
Form No. 1554	SUMMARY OF CLINICAL HISTORY <i>Fuller</i>		HOSPITAL No. 420 Old Shettleston Road Glasgow G32 7JZ ADDRESS HOSPITAL WD DEPT 9

REPORT:

SHETTLESTON
HEALTH CENTRE
420 OLD SHETTLESTON ROAD
GLASGOW G32 7JZ
041-778 9191

HAEMATOLOGY DEPARTMENT
Glasgow Royal Infirmary
Glasgow Royal Maternity Hospital
Belvidere Hospital

Hematology									Retic% WESTmm/hr	
Polys%	Lymphs%	Monos%	Eosino%	Baso%	Others%					
DATE	NO	WBCx10 ⁹ /l	RBCx10 ¹² /l	HGB g/dl	HCT	MCV fl	MCH pg	MCHC g/dl	PLATESx10 ⁹ /l	
10/02/92	119177	5.8	4.84	14.7	.415	85.	30.4	35.4	167.	

INVESTIGATION REQUIRED <i>FBC, ESR.</i>	DATE <i>24/10/89</i>	SIGNATURE <i>[Signature]</i>	LABORATORY No. <i>69654</i>
Form No. 1554	SUMMARY OF CLINICAL HISTORY <i>?? Re: k's.</i>		DATE OF BIRTH FIRST NAME ADDRESS HOSPITAL HOSPITAL NO. SURNAME MARITAL STATUS OCCUPATION WD/DEPT. CONSULTANT

HAEMATOLOGY DEPARTMENT
Glasgow Royal Infirmary
Glasgow Royal Maternity Hospital
Belvidere Hospital

REPORT:
Drs. J. Brown, T. Cairns, M. Devine
G. Spence & D. Stoddart,
Shettleston Health Centre,
420 Old Shettleston Road,
GLASGOW G32 7JZ
tel: 041 778 9191

50 OCT 1989

										Retics%	WESTmm/hr
Polys%	Lymphs%	Monos%	Eosino%	Baso%	Others%						
DATE	NO	WBCx10 ⁹ /l	RBCx10 ¹² /l	HGBg/dl	HCT	MCVfl	MCHpg	MCHCg/dl	PLATESx10 ⁹ /l		
24/10/89	069654	6.9	4.75	14.3	.413	87.	30.1	34.6	269.		6

MICROBIOLOGY DEPARTMENT

GLASGOW ROYAL INFIRMARY
GLASGOW ROYAL MATERNITY HOSPITAL



UNIT 1

Name	KEOWN MICHAEL	Sex	M	D.O.B.	11/12/55	Hosp.	GP	Ward	GP88
Address	12 GARVEL CRES GLASGOW	Consultant	SULLIVAN			Hosp. No.			
Investigation	CULTURE					Taken	25/10/89		
Specimen	FAECES					Received	25/10/89		

SALMONELLA, SHIGELLA, CAMPYLOBACTER NOT ISOLATED

21 NOV 1989

/ A.J.C. Mead

30/10/89

Bacteriology

Lab. No.

of 401081 H f~

1

MALE		5644-1-1955-729	11/13 - 1-12-55
SURNAME		CHRISTIAN NAMES	
Heaton		Michael	
ADDRESS			
42, Borden Park Rd.			
DATE	C.F.	CLINICAL NOTES	DIAGNOSIS
18/1/60		Abnormal at 3 1/2	
18/12/65	C	Rel. sw. Cerebr.	Rel.
11-1-79	F	Epilepsy	
1/10/79	C	24/12/78 FNU	
9/4/81		1/6	By 6 L.H.
16/4/81		1/6 (60) Injury	Cont. Injury
16-9-81	C	M/C Accident	12-7-81
		Head injury - comm.	
		RT femur	
		RT Tib & Fib.	
		by Hosp. 4-9-81	
		wd 26 and home	
		Home off for Paul	
9-10-81	C	RT femur	
18-2-82	C		
15-4-82	C	RT R/L eye	
23/7/82	C	13	
		C13	
		Headaches for 3 weeks	
		o/p M.D. S/E - M.D. Try heparine	

* In C.F. Column, which is for cases of certified incapacity only, practitioners should enter C for first certificate, and F for final certificate.

MEDICAL RECORD CARD

FORM E.C.7.

(Scotland)

DATE	NO	CLINICAL NOTES	DIAGNOSIS
7/10/82		Tai - (C) Ceq. Per. #	
		2/12/100	
		+ Sympne 2/100	
		To Check Diet. ? 1. Fendul	
		Smul (100)	
22/10/82	13/2		# Ceq
21/11/82	13/2	→ 4m ? Migraine	-
22/4/83	13/2		-
21/7/83	13/2		-
19/11/84	13/52	P/H 100	-
4/3/84		RMD	-
26/3/84		P/H 100	-
19/4/84	13/1		-
10/5/84		Appt	-
14/5/84		asmin spray 100	-
22/5/84		Synde 50-	-
19/7/84	13/1		-
26/5/84		RMD	-
19/10/84	4/2	29/10 Lix with Lix	-
31/10/84	4/2	Lix 60	-
2/11/84		RMD	-
30/11/84	4/2	Lix 60	-
6-12-84	9	90 Ram - (H) Ceq	
	14	80 Ramil Headaches	
		07/2 Arben - Lix 60	
		(H) Lix 60 Lix 60	
		4/2 Lix 60	

* In C.F. Column, which is for cases of certified incapacity only, practitioners should enter C for first certificate, and F for final certificate.

Michael Keown 01/12/1955 S64411955729

Encounter Report

Encounter Report

Address and Telephone numbers

12 Garvel Crescent Glasgow Glasgow G33 4RR
Telephone - home 771 9280

Significant Medical History

17/05/1993 ARTHROSCOPY
07/11/1991 SEPTOPLASTY
1981 FRACTURE FIBULA
1981 FRACTURE TIBIA MID-SHAFT L
1981 FRACTURE ACETABULUM CHIP L
1981 FRACTURE COMPOUND SHAFT R FEMUR
1981 ROAD TRAFFIC ACCIDENT (MOTOR BIKE)

Current Repeat Medication

Repeat CIMETIDINE tabs 800mg Last issued: 27/11/2000 Issued: 2 of 6 Supply: (56) tablet(s) ONE AT NIGHT Dr. Stirling Bruce
Repeat NAPROXEN tabs 250mg Last issued: 27/11/2000 Issued: 3 of 6 Supply: (60) tablet(s) 1-2 TWICE A DAY AFTER FOOD Dr. Gerald Spence

Acute and Repeat issues in last 2 months

27/11/2000 issue 3 NAPROXEN tabs 250mg Supply: (60) tablet(s) 1-2 TWICE A DAY AFTER FOOD Dr. Gerald Spence
27/11/2000 issue 2 CIMETIDINE tabs 800mg Supply: (56) tablet(s) ONE AT NIGHT Dr. Stirling Bruce

Allergies and Intolerances

All Allergy and Intolerance records - No data available.
All Allergy and Intolerance non drug records - No data available.

Last Consultation

11/12/2000 Surgery consultation Sister Ann Smith
11/12/2000 Arthralgia of shoulder Sister Ann Smith
11/12/2000 Injection around joint 0.7ml Depomedrone & Lidocaine to L AC joint Sister Ann Smith

History

23/06/1989 BP 128 / 80 recall due: 22/06/1994 O/E - blood pressure reading
21/01/1991 Smoker Cigarettes: 10 Tobacco consumption
14/09/1993 Life teetotaler ALCOHOL NON-DRINKER
14/09/1993 Weight: 69.1 kgs BMI: 24.1 O/E - weight
14/09/1993 Height: 1.69 metres O/E - height
Last Blood group record. - No data available.

New Consultation Details

Date: Clinician:

National Health Service Number		Surname (Block Letters)		Forenames (Block Letters)	
		KEOWN		MICHAEL	
Address				Date of Birth	
				11/12/55	
CLINICAL NOTES					
Date	*	Clinical Notes			Diagnosis
30.8.02.		No swelling. ankles. → right. Clusty cough/green sputum. Chest clear. C/S 1-4-0 pleu. ankles - "swelly" mild pinky oedema. Temp. LRTI. - ? viral ? bacterial. exac. asthma.			
		Note: on naproxen for shoulder pain. mild ankle oedema ? cause			
		① Erythronycin. C/S VES			
		Stop naproxen → change to codphosph.			
		Gaviscon.			
		GPRy.			
20/9/02		cough by TSL. Green sputum. Tare at ankle.			
		oe → v. dyspnoic chest clear			
		P2 80%			
		1 chest infection.			
260902		APPT at Phoenix 5 Ad - Feb 03			

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

National Health Service Number		Surname (Block Letters)	Forenames (Block Letters)
		Koon	Michael
CLINICAL NOTES		Address	Date of Birth

Date	*	Clinical Notes	Diagnosis
28/1/02		1. Erythema seen - on H₂ - by GONAD 2. H₂ localizing - 3. Clear H₂ → transverse in 4. Skin rash negative - in very unidentifiable 5. H₂ / P₂ - cordant with leg red 6. Dissected rash - feels needed - can act 1/2 of clear 7. completely settled - but dissection only of 1/2 of 1/2 8. No clear change for ulcers needed - new settled - light 9. did mean	1. Lymphoma 2. Corneal
13/2/02		headache for 3/4 week since 20/1/02 2. P₂ - ENT - red throat 3. mount neck 4. ? headache 2nd week pen → Adenoma 5. need to obtain long from tests &	
13/2/02		Long from tests (2) Sec. gun appt 2/12 3pm Chine 7.	
20/5/02		Shoulder pain Ortho See Physio for referral Ortho Naproxen not helping Can't take Codeine prep. By Tramadol 50mg (2)	

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

Date	*	Clinical Notes	Diagnosis
6-8-02	①	T SOB x 2 wks. Cough with dirty sputum. Doesn't feel inhalers are helping - not helped for mths. Takes gulferid's terbutaline inh - helps O/E - chest - clear Plan - change salbutamol to terbutaline - continue beclomethasone - amox 250mg tds (15) - review asthma clinic 2-3 wks	S Cel
23/8/02		Known asthmatic. Sings Approx 2 yrs. never attended Asthma Clinic here. Smoker - 10-20 a day. - cessation discussed. Pack ① TM Asthma ① TM Asthma ① New Rx: 4 wks + 3 days.. At present - Cough & spit dirty & green at times. ① Aortic Aneurysm feels SOB on exertion only. ① wheeze. Cough worse in morning + afternoon Height 5'4" BP 110/60 Pulse 65 bpm. PEFR actual 620 LPM. used Dicoryl 1 hr ago ankle swelling both ankle -> later in day - for hrs. ① Cardiac history Pt is alert of pain today - joints - back, neck, shoulder ankles, knees - Says told not arthritis	30yr
	①	Serial peak flow diary $\geq$ reassess - Spirometry if appropriate	
	②	Continue Beclomethasone 100 2 puffs BD 4 wks	
	③	See GP re - ankle swelling incx SOB + cough Cardiac thx ✓ (xrd 6/01 - normal. + green spit	

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

Date	*	Clinical Notes	Diagnosis
20/6/01		Still cough - all bloods (2). cough seems as minimal exertion + at night. No chest pain after cough. 2 Syds ago worked at panel brake - dust + no Hx foreign travel OG chest clear PEAR SSO (pcd 650). refractive astigmatism 1 - trial salbutamol inhaler - to PU for very faint test ? reversible refractive astigmatism.	
4/7/01		→ Has had a lump in (R) eye for 4/7. last 2-3/12 → got blurred vision (R) eye "headache" "double vision." lasts until pt rubs eye. Then returns in seconds/minutes. Feels as though something in eye. "PMMA" eye disease "contact lenses." O/E - looks like a ^{PIREYGIUM} pterygium. (R) lat aspect of eye. growth of blood vessels under cornea. Plan - refer ophthalmology	
20/11/01		Pushed (R) shoulder 1/2 Neck/shoulder xray all clear P4 recurrent delusional	

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Referral XN + Phos

Phos Phos - given depo-medical - needed to release the condition

CLINICAL NOTES		National Health Service Number	
		Surname (Block Letters)	Forenames (Block Letters)
		Address	Date of Birth
		KEOWN	MICHAEL
			1-12-55

Date	*	Clinical Notes	Diagnosis
6/6/01	0	Still not well today, cough, 1/12. productive cough - smoke.	depression
	0	chest clear but - N/A	
	1	1 chronic sinusitis recent for (N). CXL.	
		speech CFS new 2/12 admission postural drainage + steam	
14/6/01		Still coughing. No sputum. No haemoptysis. Symptoms for 2/12. started with a few. Not working. CXR - normal (verbal report). Appetite - poor. Wt 8 kg (N) Throat - sl. red Chest - clear. Axel - soft	
		Sputum sticky and to phlegm	
		HbC, F8, U+E, FT, LFT, TFT, Atypical Pneumonia screen.	
		Still smoking. - has not taken nicotine patches.	
27 11/02		Pain in chest - 3/12 Went out in clothes last night, itchy, legs were itchy, not itchy or depressed	

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

Date	
14.10.00	Final Defo Machine to (C) Sub Aorta. 1 hour. - (12) Stolen
21/5/01	Gross felted under per (16) > (1) - but (2) valley very wide for the house Remember (16) Stolen Golf: saw with valley at night - all in PM an evening per - black leg
21.8.01	Per (1) Stolen - Term (1) De Def. - 0.5.1 Defo Mech. - 1.0.1. to pl.
11.12.00	Per (1) Stolen - De Def. 0.7.1 Defo Mech. + 1.0.1. - "Fur" for 10/52.
22/5/01	Catank. Dty Ipt. Diarr. OIE NAT. See AN neag, FBC & above
31/5/01	- (1) Stolen above
(1)	Well turned. sclera OK Sally Cupman - Frostette Russet CxR + 1.0.1. to pl.
4/6/01	Discussed smoking cessation. Two attempts prev with reasonable short term success
18.06.01	Nigotin Cx 2/mg quic x 28 Per (1) Stolen per 1.0.1. Defo Mech. - 1.0.1. to pl. (1) Stolen Pentam off road

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

Surname (Block Letters)

Forenames (Block Letters)

CLINICAL NOTES

Address

Date of Birth

Date		
26/8/96		Run out of checklist → 1st year
01/11/97	T	No symptoms - history of very dry skin, itchy & crusty at eye. See throat. Flu-like 3/12 = cough + crusting of eyes. See throat. 1 red cough.
4/7/97		Dysphagia → emergency with good level from NSAID + V released to top without → take H ₂ O 4/8/97 dysphagia → to return relieved or not V.V
25/6/98		1/2 forked pain (A) needed to know H ₂ O - no dilation (A) needed 1/2 L in 1st row = adhesion dy painful as 1 (2) painful as in early detected member
7/8/98	O	Pain in (R) shoulder - saw DBJ 25/6 - awaiting physio O/E As above = seems very painful - in view of this - for X-ray propranolol approx to discontinue discontinue 800mg (SB) no S/I symptoms
23/3/98	(S)	Gilt. (N) shoulder pain rubbing nerves - no help too low enter alcohol to ~ 90° under sub-acromial chronic physio ? lowest option - would seem likely to help

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

More busy