CLINICAL INFORMATION

History of presenting complaint
Presenting complaint

Description: Calf swelling, keen to consider compression stockings

Comment: Dear lymphoedema service

Michael has background of longstanding bilateral pitting oedema to calves. Unfortunately diuretics seem to cause worsening swelling. He is awaiting echocardiogram as BNP was mildly positive recently. However he and partner have asked if compression stockings would improve the situation with swelling. I would be grateful for your review and opinion.

Yours sincerely

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history
Pre-existing conditions (High & medium priority - all)

Description	Comment	Modifier	Date of onset	Date recorded
Type 2 diabetes mellitus	-	-	15-Jul-2025	15-Jul-2025
Type 2 diabetes mellitus	-	-	15-Jul-2025	15-Jul-2025
Shortness of breath	[TRUNCATED]Duty - tel - in background 2 recent abx and steroids - finished 2/8/24 was much better, then worse again overnight last night SOB, not much cough has calle	-	05-Aug-2024	05-Aug-2024
Chest infection NOS	[TRUNCATED]seen with coughing green stuff no blood wt stable (obese) soboe when goes upstairs v breathless no fever/ no vomit drinking and puing ok using inhalers+++ f2f this pm oe sa	-	24-Jul-2024	24-Jul-2024
Chronic kidney disease stage 3	-	-	02-Mar-2023	02-Mar-2023
Discussion	[TRUNCATED] he gave permission egfr..suggest stop nsaid she says allergic pcm nausea and vomiting only taking 300mg gabapentin daily inc bd plts up a bit..has been off aspirin restart rp	-	31-Jan-2023	31-Jan-2023
Guttate psoriasis	[TRUNCATED]last few weeks extensive rash on arms, back , groin thighs partner doesnt have not itchy seemed occur after sore throat oe ?guttate psoriasis says v tired since covid soboe but sats bette	-	25-Jan-2023	25-Jan-2023
Headache	[TRUNCATED]Tel. covid positive. Day 10. ongoign headchae. reoslved after a fewdays but came back worse and present past 4-5 days. all the time. all over but mainly frontal. constant headcahe, thumpi	-	29-Apr-2022	29-Apr-2022
Productive cough-yellow sputum	[TRUNCATED]LFT +ve yesterday doesn't leave house stays with partner feels slightly breathless - like start of a chest infection checked sats - o2sat:93%, - readings generally 93-98 p. 78 agreed try	-	20-Apr-2022	20-Apr-2022
Spinal stenosis	- moderate central canal stenosis at the 4/5 level and slight impingement on the L5 nerve roots, Orthopaedic OP Yorkhill ACH	-	10-Dec-2020	10-Dec-2020
Low back pain	[TRUNCATED]C19(tel) request for amitrityline. Recent flare up of back pain - attended ED in August - given Ralvoand diazepam Then referred for OP MRI via ortho spine. Back pain s	-	04-Nov-2020	04-Nov-2020
Pain in lumbar spine	-	-	27-Aug-2020	27-Aug-2020

			2016	
Breathlessness symptom	[TRUNCATED]Not taking inhalers at present as thought responsible for chest pain. Keen on changing back to old inhalers in case this is the cause. Explained this is unlikely as it should not be going	-	18-Jan-2016	18-Jan-2016
Chest pain	[TRUNCATED]Pain in chest for last 3-4 weeks. Long term issues with acid reflux. On Omeprazole. Has doubled dose since symptoms started. Stopped inhalers as he felt they were the cause. Had not discu	-	18-Jan-2016	18-Jan-2016
Chronic obstructive pulmonary disease	[TRUNCATED]known COPD with asthma component. past few days inc cough with green spit, more sob on exertion with wheeze. no fever. no vomit. E+D ok. otherwise well. ran out of seretide at weekend. OE	-	31-Mar-2015	31-Mar-2015
Cataract	- left eye, Ophthalmology OP, Stobhill Hospital	-	21-Nov-2014	21-Nov-2014
O/E - temperature level	36.40 degC.	-	16-Jul-2014	16-Jul-2014
O/E - pulse rate	Pulse: 72.	-	16-Jul-2014	16-Jul-2014
Breathlessness symptom	[TRUNCATED]2w hx of worsening breathlessness also worsening leg oedema and swollen abdomen had been see in may with leg oedema, improved with furosemide ecg and cxr organised which were normal no hx	-	16-Jul-2014	16-Jul-2014
Referral to nurse	UEs please	-	08-Jul-2014	08-Jul-2014
Referral to nurse	UEs eGFR borderline last check. Thank you.	-	27-May-2014	27-May-2014
Referral to nurse	FBC UE LFT TFT ESR CRP	-	20-May-2014	20-May-2014
Chronic low back pain	[TRUNCATED]left with chronic low back pain after RTA in 1980s also has chronic leg pain and neck pain known OA on nsaid, not controlling low back pain, worse on movement no weight loss no urinary sy	-	14-Mar-2014	14-Mar-2014
Fungal nail infection	[TRUNCATED]been treated with terbinafine, helped, ran out and nails worse says nails were thick and yellow, also affecting toes on hands nails v ridged, slight yellow discolouration, no onycolysis a	-	14-Mar-2014	14-Mar-2014
C/O: a rash	behind ears present for long time , comes and goes slightly scaly erythema behind ears looks dermatitic with slight fungal element treat topically	-	14-Mar-2014	14-Mar-2014
Referral to nurse	please check FBC, U&E, LFT, vitamin B12, folate, ferritin please	-	14-Mar-2014	14-Mar-2014
Sore throat symptom	and macular erythmatous rash. ? Strep throat. Swab taken and commenced on pen V	-	17-Sep-2013	17-Sep-2013
Cervicalgia - pain in neck	[TRUNCATED]pain in neck for years known to have OA also pain in legs from prev RTA NSAID stopped due to gastritis says cant have paracetamol, tramadol, codeine, dihydrocodeine- all make him vomit an	-	10-Sep-2013	10-Sep-2013
C/O: a rash	[TRUNCATED]3 weeks itchy rash over torso intermittent raised lumps, last 2 days then settle to small red blanching mark not active a present no obvious triggers no hx of skin disease no new cosmetic	-	10-Sep-2013	10-Sep-2013
Cough	[TRUNCATED]4 weeks of cough thick white sputum more sob and wheexy had amox then steriods then gastritis and did not finish steriods using inhalers more no fever PEFR excellent today hx of asthma o/	-	10-Sep-2013	10-Sep-2013
Cough	tummy better. can restart asp with double dose ppi. tests all fine, try steroid for wheeze. spit gone	-	20-Aug-2013	20-Aug-2013
			06-	

Chest infection NOS	cxr and bloods	-	Aug-2013	06-Aug-2013
Tenderness of epigastrium	stop asp for 2/52. switch diclo to etod. see 2/52. double up ppi.	-	06-Aug-2013	06-Aug-2013
Referral to nurse	please do ues. lfts. fbc/esr	-	06-Aug-2013	06-Aug-2013
Rosacea	3 month hx - spots/cysts affecting face and neck. can be painful. plan - try topical metronidazole, worsening advice given	-	04-Oct-2012	04-Oct-2012
Discussion	did not tolerate statin. making changes to diet and on stanols to help reduce cholesterol.	-	05-Sep-2012	05-Sep-2012
Referral to nurse	Please check fasting blood glucose	-	24-Jul-2012	24-Jul-2012
Shortness of breath	and hyperventilation on modest exertion	First ever	17-Jul-2012	17-Jul-2012
O/E - chest examination normal	-	First ever	17-Jul-2012	17-Jul-2012
Athlete's foot	-	First ever	17-Jul-2012	17-Jul-2012
C/O - a headache	6 weeks	First ever	17-Jul-2012	17-Jul-2012
[D]Hyperventilation	-	First ever	17-Jul-2012	17-Jul-2012
Productive cough - green sputum	-	First ever	17-Jul-2012	17-Jul-2012
Back pain without radiation NOS	2/12. pain left buttock, not in leg no bladder sxs. o/e stiff back. slr r = l = 80 degs. adv exercise could try physio.	Continuing	15-Jun-2011	15-Jun-2011
[X]Benign coital headache	recent onset, no other episodes, background tension headache. adv to stop diclof as has gi upset and gen lethargy. amitrip might help arthritic pain and headache.	Continuing	15-Jun-2011	15-Jun-2011
Referral to nurse	please check u and es lfts and fbc. long term sue nsaid.	Continuing	15-Jun-2011	15-Jun-2011
Has numbness	[TRUNCATED]bilateral arms, intermittent. getting worse over past few months. worse at night. longstanding neck pain after fracture in motorbike RTA. no weakness. o/e neuro exam upper limbs normal. t	-	24-Nov-2009	24-Nov-2009
Cough	[TRUNCATED]worsening over past few months. productive clear spit. worse at night. Had diagnosis of asthma but heavy smoker 20/day for 30 years. ?element COPD. no weight loss. no haemoptyisis. o/e wh	-	24-Nov-2009	24-Nov-2009
Chest infection NOS	[TRUNCATED]cough greeen sputum for about 2 weeks. getting worse - not much sleep last 2 nights. hasnt felt feverish though has commented on him looking flushed. generalised muscle pains. coa	-	25-Sep-2009	25-Sep-2009
[D]General aches and pains	[TRUNCATED]sore all over, tired, for about a month, no obvious reason, joints are sore, does have arthritis. Not tired any pain painkillers - tried some found quite good,	-	21-Apr-2009	21-Apr-2009
Cough	[TRUNCATED]known asthmatic. 3/12 history of productive cough. Feeling SOB. smoker. weight loss of 6 pounds in 3 months - has been trying to eat healthily. Asthma normally not a problem - takes terbu	-	24-Oct-2007	24-Oct-2007
Pain in joint - arthralgia	avoid nsaids. weakness ++grip. neck tenderness too.?? physio	-	11-May-2007	11-May-2007
Cutaneous abscess	left cheek	-	11-May-2007	11-May-2007
			18-	18-Feb-

[V]Other eye problems	Bilateral Retinal Emboli	First ever	Feb-2003	2003
Dry eye syndrome	-	-	24-Oct-2002	24-Oct-2002
Chest infection NOS	-	-	20-Sep-2002	20-Sep-2002
O/E - ankle oedema	mild - UEs,LFTs cheked	-	30-Aug-2002	30-Aug-2002
Chest infection NOS	-	-	30-Aug-2002	30-Aug-2002
Shortness of breath	-	-	06-Aug-2002	06-Aug-2002
C/O: a pain	-	-	20-May-2002	20-May-2002
Asthma	-	-	21-Feb-2002	21-Feb-2002
Asthma	COUGH VARIENT	-	21-Feb-2002	21-Feb-2002
C/O - a headache	-	-	13-Feb-2002	13-Feb-2002
Pterygium	-	-	04-Jul-2001	04-Jul-2001
Cough	-	-	20-Jun-2001	20-Jun-2001
Arthralgia of shoulder	-	Continuing	18-Jun-2001	18-Jun-2001
Upper respiratory infection NOS	-	-	14-Jun-2001	14-Jun-2001
Acute sinusitis NOS	-	-	06-Jun-2001	06-Jun-2001
Pain in joint - arthralgia	-	-	31-May-2001	31-May-2001
Chest infection NOS	-	-	31-May-2001	31-May-2001
Infectious diarrhoea NOS	-	-	22-May-2001	22-May-2001
Chest infection NOS	-	-	22-May-2001	22-May-2001
Arthralgia of shoulder	-	First ever	11-Dec-2000	11-Dec-2000
Arthralgia of shoulder	-	First ever	21-Aug-2000	21-Aug-2000
Subacromial bursitis	-	Continuing	19-Oct-1998	19-Oct-1998

Shoulder pain	-	-	28-Aug-1998	28-Aug-1998
C/O: a pain	shoulder	-	07-Aug-1998	07-Aug-1998
C/O: a pain	refer physio	First ever	25-Jun-1998	25-Jun-1998
Dyspepsia	-	-	09-Jul-1997	09-Jul-1997
Upper respiratory tract infection NOS	-	First ever	09-Jan-1997	09-Jan-1997
PAIN JOINT	-	-	20-Aug-1996	20-Aug-1996
PAIN WRIST	-	-	16-Jul-1996	16-Jul-1996
TENNIS ELBOW	-	-	07-Jun-1996	07-Jun-1996
TENNIS ELBOW	-	-	09-Oct-1995	09-Oct-1995
ISQ (IN STATUS QUO)	-	-	25-Aug-1995	25-Aug-1995
SORE THROAT	-	-	15-Aug-1995	15-Aug-1995
DEPRESSION	-	-	02-Aug-1995	02-Aug-1995
ARTHRALGIA	-	-	10-Feb-1995	10-Feb-1995
ISQ (IN STATUS QUO)	-	-	15-Nov-1994	15-Nov-1994
LETHARGY	-	-	14-Oct-1994	14-Oct-1994
DEPRESSION	R MED 1	-	27-Sep-1994	27-Sep-1994
DEBILITY	ATTENDED 27/9/94	-	01-Aug-1994	01-Aug-1994
LETHARGY	-	-	13-Jul-1994	13-Jul-1994
TIREDNESS	-	-	09-May-1994	09-May-1994
LACERATION EAR	-	-	11-Apr-1994	11-Apr-1994
VIRAL ILLNESS	-	-	30-Mar-1994	30-Mar-1994
BACK PAIN	-	-	03-Feb-1994	03-Feb-1994
FOOT INJURY	-	-	18-Jul-	18-Jul-

			1993	1993
PAIN KNEE	-	-	25-Sep-1992	25-Sep-1992
NO DIAGNOSIS MADE	-	-	04-Mar-1992	04-Mar-1992
GASTROENTERITIS	-	-	06-Feb-1992	06-Feb-1992
PAIN KNEE	LT	-	04-Feb-1992	04-Feb-1992
PAIN KNEE	LT	-	03-Feb-1992	03-Feb-1992
PAIN KNEE	LT	-	08-Oct-1991	08-Oct-1991
FOREIGN BODY EYE	-	-	07-Oct-1991	07-Oct-1991
PAIN KNEE	-	-	12-Jun-1991	12-Jun-1991
NASAL SEPTUM DEFLECTED	-	-	22-Feb-1991	22-Feb-1991
COUGH PRODUCTIVE	-	-	21-Jan-1991	21-Jan-1991
RHINITIS	-	-	10-Dec-1990	10-Dec-1990
RHINITIS	-	-	26-Oct-1990	26-Oct-1990
PAIN MUSCLE	-	-	26-Oct-1990	26-Oct-1990
DYSPEPSIA	-	-	24-Jul-1990	24-Jul-1990
FRACTURE MALLEOLUS	MEDIAL	-	02-May-1989	02-May-1989
FRACTURE FIBULA	[YEAR OF EVENT 1981]	-	01-Jan-1981	01-Jan-1981
FRACTURE TIBIA	[YEAR OF EVENT 1981] NOTES: MID-SHAFT L.	-	01-Jan-1981	01-Jan-1981
FRACTURE ACETABULUM	[YEAR OF EVENT 1981] NOTES: CHIP L.	-	01-Jan-1981	01-Jan-1981
FRACTURE COMPOUND	[YEAR OF EVENT 1981] NOTES: SHAFT R FEMUR.	-	01-Jan-1981	01-Jan-1981
ROAD TRAFFIC ACCIDENT	[YEAR OF EVENT 1981] NOTES: (MOTOR BIKE).	-	01-Jan-1981	01-Jan-1981

Past procedures (High and medium priority - all)

Description	Comment	Date performed	Date recorded
GFR calculated	32 mL/min. Result qualifier: Abnormal. NOTES: Estimated GFR -		14-Jul-

abbreviated MDRD	ml/min.	14-Jul-2025	2025
Serum creatinine	182 umol/L. Result qualifier: Abnormal, Start of normal range: 40, End of normal range: 130. NOTES: Creatinine -.	14-Jul-2025	14-Jul-2025
Serum urea level	7.30 mmol/L. Start of normal range: 2.500, End of normal range: 7.800. NOTES: Urea -.	14-Jul-2025	14-Jul-2025
Serum chloride	105 mmol/L. Start of normal range: 95, End of normal range: 108. NOTES: Chloride -.	14-Jul-2025	14-Jul-2025
Serum potassium	4.60 mmol/L. Start of normal range: 3.500, End of normal range: 5.300. NOTES: Potassium -.	14-Jul-2025	14-Jul-2025
Serum sodium	142 mmol/L. Start of normal range: 133, End of normal range: 146. NOTES: Sodium -.	14-Jul-2025	14-Jul-2025
Urea and electrolytes	Urea & Electrolytes	14-Jul-2025	14-Jul-2025
Haemoglobin A1c level - IFCC standardised	52 mmol/mol. Result qualifier: Abnormal, Start of normal range: 20, End of normal range: 41. NOTES: HbA1c (IFCC) -.	14-Jul-2025	14-Jul-2025
N terminal pro-brain natriuretic peptide level	411 ng/L. NOTES: NT pro BNP -.	07-Jul-2025	07-Jul-2025
Laboratory procedures	[TRUNCATED]NT-proBNP should always be interpreted in combination with clinical evaluation. Please see Heart Failure Diagnostic Pathway When used as recommended by protocol, NT-proBNP >= 400 suggests	07-Jul-2025	07-Jul-2025
Serum total T3 level	Total T3	07-Jul-2025	07-Jul-2025
Serum free T4 level	11.60 pmol/L. Start of normal range: 9, End of normal range: 21. NOTES: Free T4 -.	07-Jul-2025	07-Jul-2025
Serum TSH level	4.790 mU/L. Start of normal range: 0.350, End of normal range: 5. NOTES: TSH - mU/L.	07-Jul-2025	07-Jul-2025
Thyroid function test	Thyroid funct test	07-Jul-2025	07-Jul-2025
Serum cholesterol/HDL ratio	6 ratio. NOTES: Chol/HDL ratio.	07-Jul-2025	07-Jul-2025
Laboratory procedures	2 mmol/L. NOTES: VLDL-Chol (calc'd) -.	07-Jul-2025	07-Jul-2025
Calculated LDL cholesterol level	3.50 mmol/L. NOTES: LDL-Cholest (calc'd) -.	07-Jul-2025	07-Jul-2025
Serum HDL cholesterol level	1.10 mmol/L. NOTES: HDL Cholesterol -.	07-Jul-2025	07-Jul-2025
Serum triglycerides	4.30 mmol/L. Result qualifier: Abnormal, Start of normal range: 0.200, End of normal range: 2.300. NOTES: Triglycerides -.	07-Jul-2025	07-Jul-2025
Serum cholesterol	6.60 mmol/L. NOTES: Cholesterol -.	07-Jul-2025	07-Jul-2025
Lipid fractionation	Lipid profile	07-Jul-2025	07-Jul-2025
Serum albumin	36 g/L. Start of normal range: 35, End of normal range: 50. NOTES: Albumin -.	07-Jul-2025	07-Jul-2025
Serum alkaline phosphatase	75 U/L. Start of normal range: 30, End of normal range: 130. NOTES: Alkaline Phosphatase - U/L.	07-Jul-2025	07-Jul-2025
AST serum level	37 U/L. NOTES: AST - U/L.	07-Jul-2025	07-Jul-2025
ALT/SGPT serum level	42 U/L. NOTES: ALT - U/L.	07-Jul-2025	07-Jul-2025
Serum total bilirubin level	8 umol/L. NOTES: Total Bilirubin -.	07-Jul-2025	07-Jul-2025
Liver function test	Liver Function Tests	07-Jul-2025	07-Jul-2025
GFR calculated abbreviated MDRD	49 mL/min. Result qualifier: Abnormal. NOTES: Estimated GFR - ml/min.	07-Jul-2025	07-Jul-2025
Serum creatinine	126 umol/L. Start of normal range: 40, End of normal range: 130. NOTES: Creatinine -.	07-Jul-2025	07-Jul-2025
Serum urea level	4 mmol/L. Start of normal range: 2.500, End of normal range: 7.800. NOTES: Urea -.	07-Jul-2025	07-Jul-2025
	104 mmol/L. Start of normal range: 95, End of normal range: 108.		07-Jul-

Serum chloride	NOTES: Chloride -.	07-Jul-2025	2025
Serum potassium	4 mmol/L. Start of normal range: 3.500, End of normal range: 5.300. NOTES: Potassium -.	07-Jul-2025	07-Jul-2025
Serum sodium	138 mmol/L. Start of normal range: 133, End of normal range: 146. NOTES: Sodium -.	07-Jul-2025	07-Jul-2025
Urea and electrolytes	Urea & Electrolytes	07-Jul-2025	07-Jul-2025
Serum C reactive protein level	12 mg/L. Result qualifier: Abnormal, Start of normal range: 0, End of normal range: 10. NOTES: C Reactive Protein -.	07-Jul-2025	07-Jul-2025
Serum alkaline phosphatase	75 U/L. Start of normal range: 30, End of normal range: 130. NOTES: Alkaline Phosphatase - U/L.	07-Jul-2025	07-Jul-2025
Serum albumin	36 g/L. Start of normal range: 35, End of normal range: 50. NOTES: Albumin -.	07-Jul-2025	07-Jul-2025
Serum inorganic phosphate	0.79 mmol/L. Result qualifier: Abnormal, Start of normal range: 0.800, End of normal range: 1.500. NOTES: Phosphate -.	07-Jul-2025	07-Jul-2025
Corrected serum calcium level	2.34 mmol/L. Start of normal range: 2.200, End of normal range: 2.600. NOTES: Calcium (adjusted) -.	07-Jul-2025	07-Jul-2025
Serum calcium	2.16 mmol/L. Result qualifier: Abnormal, Start of normal range: 2.200, End of normal range: 2.600. NOTES: Calcium -.	07-Jul-2025	07-Jul-2025
Bone profile	Bone Profile	07-Jul-2025	07-Jul-2025
Plasma glucose level	8.40 mmol/L. Result qualifier: Abnormal, Start of normal range: 3.500, End of normal range: 6. NOTES: Glucose -.	07-Jul-2025	07-Jul-2025
Plasma glucose level	Non-fasting sample; Glucose	07-Jul-2025	07-Jul-2025
Nucleated red blood cell count	0 10*9/L. NOTES: Nucleated RBC - x10^9/l.	07-Jul-2025	07-Jul-2025
Basophil count	0 10*9/L. Start of normal range: 0, End of normal range: 0.100. NOTES: Basophils - x10^9/l.	07-Jul-2025	07-Jul-2025
Eosinophil count	0.59 10*9/L. Result qualifier: Abnormal, Start of normal range: 0.020, End of normal range: 0.500. NOTES: Eosinophils - x10^9/l.	07-Jul-2025	07-Jul-2025
Monocyte count	0.80 10*9/L. Start of normal range: 0.200, End of normal range: 1. NOTES: Monocytes - x10^9/l.	07-Jul-2025	07-Jul-2025
Lymphocyte count	1.80 10*9/L. Start of normal range: 1.100, End of normal range: 5. NOTES: Lymphocytes - x10^9/l.	07-Jul-2025	07-Jul-2025
Neutrophil count	3.80 10*9/L. Start of normal range: 2, End of normal range: 7. NOTES: Neutrophils - x10^9/l.	07-Jul-2025	07-Jul-2025
Platelet count	339 10*9/L. Start of normal range: 150, End of normal range: 410. NOTES: Platelet Count - x10^9/l.	07-Jul-2025	07-Jul-2025

Family conditions (All priorities)

Description	Comment	Date of Onset
No FH: Ischaemic heart disease	Read code of condition: Ischaemic heart disease [G3...00].	14-Sep-1993

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Aspirin 75mg dispersible tablets	56	tablet	ONE IN THE MORNING	-	07-Feb-2003	08-Jul-2025
Cetirizine 10mg tablets	56	tablet	ONE TABLET EVERY DAY	-	14-Mar-2014	08-Jul-2025
Trelegy Ellipta 92micrograms/dose / 55micrograms/dose / 22micrograms/dose dry powder inhaler (GlaxoSmithKline UK Ltd)	60	dose	1 INHALATION ONCE DAILY	-	19-Sep-2024	04-Jul-2025
Omeprazole 20mg gastro-resistant capsules	112	capsule	ONE BD	-	14-Jul-2010	08-Jul-2025
Hylo-Care eye drops preservative free (Scope Ophthalmics Ltd)	10	ml	AS REQUIRED	-	15-Apr-2020	08-Jul-2025
Salbutamol 100micrograms/dose	200	dose	2 PUFFS WHEN REQUIRED FOUR	-	05-Apr-	04-Jul-

inhaler CFC free			TI[more]		2018	2025

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Naseptin nasal cream (Alliance Pharmaceuticals Ltd)	15	gram	APPLY TWICE A DAY	-	28-Jul-2025	28-Jul-2025
Doxycycline 100mg capsules	8	capsule	TWICE A DAY DAY 1, THEN 1 DAI[more]	-	28-Jul-2025	28-Jul-2025
Pregabalin 50mg capsules	56	capsule	ONE TWICE A DAY	-	28-Jul-2025	28-Jul-2025
Amlodipine 5mg tablets	28	tablet	1 EVERY DAY	-	28-Jul-2025	28-Jul-2025
Prochlorperazine 5mg tablets	28	tablet	ONE UP TO THREE TIMES A DAY W[more]	-	16-Jul-2025	16-Jul-2025
Ramipril 1.25mg capsules	28	capsule	1 CAPSULE ONCE A DAY INSTEAD [more]	-	15-Jul-2025	15-Jul-2025
Sodium cromoglicate 2% eye drops	10	ml	FOUR TIMES A DAY	-	14-Jul-2025	14-Jul-2025
Chloramphenicol 1% eye ointment	4	gram	FOUR TIMES A DAY	-	14-Jul-2025	14-Jul-2025
Simvastatin 20mg tablets	56	tablet	1 NOCTE	-	14-Jul-2025	14-Jul-2025
Bumetanide 1mg tablets	28	tablet	HALF A TABLET IN THE MORNING	-	14-Jul-2025	14-Jul-2025
Amoxicillin 500mg capsules	21	capsule	ONE THREE TIMES A DAY FOR SEV[more]	-	14-Jul-2025	14-Jul-2025
Furosemide 40mg tablets	28	tablet	ONE IN THE MORNING	-	08-Jul-2025	08-Jul-2025
Ramipril 2.5mg capsules	28	capsule	1 CAPSULE ONCE A DAY	-	07-Jul-2025	07-Jul-2025
Glyceryl trinitrate 400micrograms/dose pump sublingual spray	200	dose	1 - 2 SPRAYS UNDER THE TONGUE	-	07-Jul-2025	07-Jul-2025
Gabapentin 300mg capsules	56	capsule	1 CAPSULE MORNING AND AFTERNO[more]	-	04-Nov-2020	08-Jul-2025
Trelegy Ellipta 92micrograms/dose / 55micrograms/dose / 22micrograms/dose dry powder inhaler (GlaxoSmithKline UK Ltd)	60	dose	1 INHALATION ONCE DAILY	-	19-Sep-2024	08-May-2025
Aspirin 75mg dispersible tablets	56	tablet	ONE IN THE MORNING	-	07-Feb-2003	16-May-2025
Cetirizine 10mg tablets	56	tablet	ONE TABLET EVERY DAY	-	14-Mar-2014	16-May-2025
Gabapentin 300mg capsules	56	capsule	1 CAPSULE MORNING AND AFTERNO[more]	-	04-Nov-2020	11-Feb-2025

Blood Pressure

Date Recorded	Systolic	Diastolic
-	148	88

Body Measurements

Date Recorded	Height	Weight	BMI

-	1.69	101.605	35.5

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Ex smoker:	Smoking status on date of event: Ex-smoker.	13-Aug-2024
Ex smoker:	Smoking status on date of event: Ex-smoker.	05-Apr-2018
Ex smoker:	Smoking status on date of event: Ex-smoker.	22-Jan-2016
Ex smoker:	Smoking status on date of event: Ex-smoker.	22-Jan-2016
Never smoked tobacco:	Smoking status on date of event: Never smoked.	15-Aug-2014
Teetotaller:	Drinking status on eventdate: Life teetotaler.	22-Jan-2016
Teetotaller:	Drinking status on eventdate: Life teetotaler.	11-May-2007
ALCOHOL NON-DRINKER:	Drinking status on eventdate: Life teetotaler.	14-Sep-1993
GPPAQ physical activity index: active:	has a prob with plantar fascitis and painful foot, tries to keep active	22-Jan-2016

Clinical warnings

Allergies

Description	Date recorded
Urticaria	28-Jan-2002

Additional Support Needs

No known ASN requirements

Additional relevant information

OK to send correspondence to home address?:Yes
Patient will accept any site:Yes
Patient will accept cancellation or short notice appointment (within 1-6 days):Yes
Referred By:Referring GP
Electronic Attachment Present:No

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

Keown Michael CHI: 0112556132

Emergency Attendance Letter

NHS Greater Glasgow and Clyde

Emergency Department
Glasgow Royal Infirmary
Alexandra Parade
Glasgow
Lanarkshire
G31 2ER

Dept. Contact Details:
Tel:
Fax:
Email:

Date Completed: 06/08/2024

Consultant: Dr Daniel Rodgers

PJ Rogers
The Cairns Practice
Shettleston Health Centre
420 Old Shettleston Road
Glasgow
Glasgow
G32 7JZ

Dear PJ Rogers

Re: **Keown Michael** DOB: **01/12/1955** CHI: **0112556132**
48 Glencorse Street
Glasgow G32 6JQ

Attended on: **05/08/2024 at 15:24 hrs.** Departed on: **06/08/2024 at 00:52 hrs.**
Discharge Type: **04a - Incomplete: left before assessment completed** Destination: **Private residence**
Previous ED Attendance in last 12 months: **0**

Presenting complaint
self- ?new heart failure. SOB, peripheral oedema. hx: COPD

Nursing Assessment:
NEWS 3, low viral risk, recent course of abx and steroids, now deterioration overnight increasingly sob, has bilateral lower leg oedema ?HF ?PTE

Investigations in ED:

1. Coagulation screen	**2. Urea and Electrolytes**	**3. Glucose**
4. LFT	**5. CRP**	**6. Full Blood Count**
7. Troponin I hs	**8. Chol / Triglyceride**	**9. XR Chest**
10. Troponin I hs		

Keown Michael CHI: 0112556132

Diagnosis:

Diagnosis	Side	Site
Dyspnoea		

Procedures: **None**

Immunisations: **None**

Dispensed Medication: **Any medication dispensed or changed is recorded in this letter in the free text below**

Clinician Notes:

68M. Recently completed course of amoxicillin and prednisolone for LRTI. Symptoms improved. Presented with increased SOB, uncomfortable sensation in throat, unable to breathe tilting head forward, denies chest pain. Symptoms resolved at time of assessment. CXR - nil acute. ECG - normal sinus rhythm, nil acute. Trop 33. WBC 14.5, bloods otherwise unremarkable. Repeat troponin taken however self-discharged prior to result coming back. Repeat trop 30.

Followup :

Highly sensitive: N Consent for sharing withheld: N

Yours sincerely,
Lindsay Davies
Doctor

Copies to:

1. PJ Rogers (GP)

School Address:

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

GGC Heart Failure Diagnostic Pathway Protocol

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Heart Failure Diagnostic Pathway
GGC Heart Failure

—— **Consultant / receiving practitioner** and/or **specialty clinic**

Glasgow Royal Infirmary
84 Castle Street
Glasgow
G4 0SF

—— **Hospital** and **hospital address**

Hospital location code.
G107H

Email address
-

Urgency of referral	Urgent		
Date of referral	08-Jul-2025	**Date sent**	08-Jul-2025

PATIENT DETAILS

Surname	KEOWN
Forename(s)	MICHAEL
Title	MR
Sex	Male
Date of birth	01-Dec-1955
CHI no.	0112556132
Area of Residence	-

Patient's address

48 GLENCORSE STREET
CARNTYNE
GLASGOW
GLASGOW
G32 6JQ

Contact number(s)

101037002178Q Unique Care Pathway Number: 101037002178Q

REGISTERED GP DETAILS

Name	Dr Stacey Grant		
GMC code	7460755	GP code	05282
Practice name	The Cairns Practice		
Practice code	46081		

Practice address

420 OLD SHETTLESTON ROAD
SHETTLESTON
GLASGOW
G32 7JZ

Contact number(s)

Voice: 01415316220

REFERRING GP DETAILS

Name	Dr. Fraser McNab		
GMC code	7131989	GP code	00043
Practice name	The Cairns Practice (46081)		
Practice code	46081		

Practice address

Shettleston Health Centre
420 Old Shettleston Road
Glasgow
G32 7JZ

Contact number(s)

Voice: 0141 531 6220

Hospital use only	Clinic	Day Date	Time	Hospital No.

REFERRAL LETTER

MEDICAL IN CONFIDENCE

2021 GGC General Referral Protocol

Additional Support Needs:
No known ASN requirements

REFERRAL TO

Cardiology
GGC General Referral

Glasgow Royal Infirmary
84 Castle Street
Glasgow
G4 0SF

Consultant / receiving practitioner and/or **specialty clinic**

Hospital and **hospital address**

Hospital location code.
G107H

Email address

Urgency of referral Urgent
Date of referral 07-Jul-2025 **Date sent** 07-Jul-2025

PATIENT DETAILS

Surname	KEOWN
Forename(s)	MICHAEL
Title	MR
Sex	Male
Date of birth	01-Dec-1955
CHI no.	0112556132
Area of Residence	-

Patient's address

48 GLENCORSE STREET
CARNTYNE
GLASGOW
GLASGOW
G32 6JQ

Contact number(s)

1010369952653 Unique Care Pathway Number: 1010369952653

REGISTERED GP DETAILS

Name	Dr Stacey Grant		
GMC code	7460755	GP code	05282
Practice name	The Cairns Practice		
Practice code	46081		

Practice address

420 OLD SHETTLESTON ROAD
SHETTLESTON
GLASGOW
G32 7JZ

Contact number(s)

Voice: 01415316220

REFERRING GP DETAILS

Name	Dr. Fraser McNab		
GMC code	7131989	GP code	00043
Practice name	The Cairns Practice (46081)		
Practice code	46081		

Practice address

Shettleston Health Centre
420 Old Shettleston Road
Glasgow
G32 7JZ

Contact number(s)

Voice: 0141 531 6220

	ACH		2020	2020
Low back pain	[TRUNCATED]C19(tel) . Request for amitrityline. Recent flare up of back pain - attended ED in August - given Ralvoand diazepam Then referred for OP MRI via ortho spine. Back pain s	-	04-Nov-2020	04-Nov-2020
Pain in lumbar spine	-	-	27-Aug-2020	27-Aug-2020
MRC Breathlessness Scale: grade 4	-	Continuing	05-Apr-2018	05-Apr-2018
Cough	[TRUNCATED]hx of COPD - feels this is poorly controlled of late. Cough 2/52, worse in past 7/7. Productive of green sputum, no haemoptysis. Breathless and wheezy. No chest pain, no fevers. Parterner	-	12-Feb-2018	12-Feb-2018
Cough	-	-	12-Feb-2018	12-Feb-2018
Erectile dysfunction	[TRUNCATED]-issues since commencing gabapentin. convinced it is secondary to this as decided to come off of it for a few days and was fine. difficulties with pain control though and feels unable to	-	22-Nov-2017	22-Nov-2017
Cervicalgia - pain in neck	[TRUNCATED]neck pain for many years intermittently with assoc paraesthesia in hands. seen neurology in 2011 who arranged nerve conduction tests which were normal. MRI scan at that time showed osteop	-	22-Nov-2017	22-Nov-2017
Cough	[TRUNCATED]cough for 1-2 weeks. feeling SOB/wheezy at times. no chest pain. thick clear sputum, no blood. known COPD. o/e apyrexial sats 97% HR 87 chest clear, slightly reduced AE globally, no wheez	-	22-Nov-2017	22-Nov-2017
Hand pain	Both first carpometacarpal joints. R>L. Previously xrayed - degenerative changes. Not on portal. For Xray both hands. Await result - ?refer hand clinic.	-	25-Apr-2017	25-Apr-2017
Cervicalgia - pain in neck	Big improvement with gabapentin. Continue on repeat.	-	25-Apr-2017	25-Apr-2017
Cervicalgia - pain in neck	[TRUNCATED]Discussed options. Did not receive follow-up appt for Pain service in September. Not enthusiastic about returning there at present. On amitriptylline 50mg nocte and sleeps well with this.	-	28-Mar-2017	28-Mar-2017
Cervicalgia - pain in neck	Spasms. No sphincter dysfunction. No worsening of paraesthesia in hands. Unable to tolerate paracetamol or opioids. For further appt to discuss options - ?refer back to neurology.	-	14-Mar-2017	14-Mar-2017
Chest infection NOS	Purulent productive cough. wheeze throughout lungfields. SaO2 97% amoxicillin and prednisolone prescribed.	-	14-Mar-2017	14-Mar-2017
H/O: asthma	[TRUNCATED]Has prev stopped seretide thinking related to vasculitis rash and chest pain at different times. Appropriate use of salbutamol & slight xs tiotropium. Jan 10 noted mild obstruction no COP	-	09-Jun-2016	09-Jun-2016
Back pain without radiation NOS	[TRUNCATED]long discussion with eeds pain killers adamant cannot take paracetamol or any opiods vomiting and dizzy aware nsaids not good choice recent gastroscopy showed gastritis also renal f	-	29-Apr-2016	29-Apr-2016
Gastritis unspecified	, GRI	-	21-Mar-2016	21-Mar-2016
[D]Abdominal pain	[TRUNCATED]CP better since last visit. No palpitations, no dizziness, no increased SoB. Abdo pain ongoing. Mainly on activity. "Severe burning pain" lasting a few minutes. Relieved by rest. No radia	-	15-Feb-2016	15-Feb-2016
Night cough absent	-	-	25-Jan-2016	25-Jan-2016

CLINICAL INFORMATION

History of presenting complaint
Presenting complaint

Description: Chest pains, also ?CCF

Comment: Dear HFDP

Grateful if you can arrange to urgently review this obese man with COPD who is ex smoker. Not been well last 4 weeks though symptoms for several months. Strong FH of IHD nad MI. Feeling more breathless and pain if take deep breath in at times. Also pressure like chest pains at times at rest or on exertion for 4 weeks. Ankles chronically swollen.

Also - partner been taking BP readings over past 24 hours - high - mostly in range of 160-170 systolic over 85-102. Some headaches especially when standing, also nosebleeds - they were concerned re hypertension.

OE: gasping for breath RR24, HS pure, BP 168/92, sats 89-94% (his normal range), pulse 94bpm regular, bilateral pitting oedema right big bigger than left no obvious DVT, chest bibasal fine creps and left midzone creps.

?Unstable angina or CCF. Advised hospital review ?IV diuretics. He declines this long wait in past to be seen. Aware could be very unwell/die if not treated properly. Agreed commence ramipril and GTN (warned re worsening headache). Get CXR done bloods checked today inc BNP (411). Refer urgent cardiology - Prof Petrie advised in back to referrer letter refer via HFDP as will be quickest way to get echocardiogram done with positive BNP.

Yours sincerely

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history
Pre-existing conditions (High & medium priority - all)

Description	Comment	Modifier	Date of onset	Date recorded
Shortness of breath	[TRUNCATED]Duty - tel -> Michael in background 2 recent abx and steroids - finished 2/8/24 was much better, then worse again overnight last night SOB, not much cough has calle	-	05-Aug-2024	05-Aug-2024
Chest infection NOS	[TRUNCATED] coughing green stuff no blood wt stable (obese) soboe when goes upstairs v breathless no fever/ no vomit drinking and puing ok using inhalers+++ f2f this pm oe sa	-	24-Jul-2024	24-Jul-2024
Chronic kidney disease stage 3	-	-	02-Mar-2023	02-Mar-2023
Discussion	[TRUNCATED] ne gave permission egfr..suggest stop nsaid she says allergic pcm nausea and vomiting only taking 300mg gabapentin daily inc bd plts up a bit..has been off aspirin restart rp	-	31-Jan-2023	31-Jan-2023
Guttate psoriasis	[TRUNCATED]last few weeks extensive rash on arms, back , groin thighs partner doesnt have not itchy seemed occur after sore throat oe ?guttate psoriasis says v tired since covid soboe but sats bette	-	25-Jan-2023	25-Jan-2023
Headache	[TRUNCATED]Tel. covid positive. Day 10. ongoign headchae. reoslved after a fewdays but came back worse and present past 4-5 days. all the time. all over but mainly frontal. constant headcahe, thumpi	-	29-Apr-2022	29-Apr-2022
Productive cough-yellow sputum	[TRUNCATED]LFT +ve yesterday doesn't leave house stays with partner feels slightly breathless - like start of a chest infection checked sats - o2sat:93%, - readings generally 93-98 p. 78 agreed try	-	20-Apr-2022	20-Apr-2022
Spinal stenosis	- moderate central canal stenosis at the 4/5 level and slight impingement on the L5 nerve roots, Orthopaedic OP Yorkhill	-	10-Dec-	10-Dec-

Body Mass Index	33.6	Continuing	22-Jan-2016	22-Jan-2016
Healthy diet	planning on addressing weight	-	22-Jan-2016	22-Jan-2016
MRC Breathlessness Scale: grade 2	-	-	22-Jan-2016	22-Jan-2016
Breathlessness symptom	[TRUNCATED]Not taking inhalers at present as thought responsible for chest pain. Keen on changing back to old inhalers in case this is the cause. Explained this is unlikely as it should not be going	-	18-Jan-2016	18-Jan-2016
Chest pain	[TRUNCATED]Pain in chest for last 3-4 weeks. Long term issues with acid reflux. On Omeprazole. Has doubled dose since symptoms started. Stopped inhalers as he felt they were the cause. Had not discu	-	18-Jan-2016	18-Jan-2016
Chronic obstructive pulmonary disease	[TRUNCATED]known COPD with asthma component. past few days inc cough with green spit, more sob on exertion with wheeze. no fever. no vomit. E+D ok. otherwise well. ran out of seretide at weekend. OE	-	31-Mar-2015	31-Mar-2015
Cataract	- left eye, Ophthalmology OP, Stobhill Hospital	-	21-Nov-2014	21-Nov-2014
O/E - temperature level	36.40 degC.	-	16-Jul-2014	16-Jul-2014
O/E - pulse rate	Pulse: 72.	-	16-Jul-2014	16-Jul-2014
Breathlessness symptom	[TRUNCATED]2w hx of worsening breathlessness also worsening leg oedema and swollen abdomen had been see in may with leg oedema, improved with furosemide ecg and cxr organised which were normal no hx	-	16-Jul-2014	16-Jul-2014
Referral to nurse	UEs please	-	08-Jul-2014	08-Jul-2014
Referral to nurse	UEs eGFR borderline last check. Thank you.	-	27-May-2014	27-May-2014
Referral to nurse	FBC UE LFT TFT ESR CRP	-	20-May-2014	20-May-2014
Chronic low back pain	[TRUNCATED]left with chronic low back pain after RTA in 1980s also has chronic leg pain and neck pain known OA on nsaid, not controlling low back pain, worse on movement no weight loss no urinary sy	-	14-Mar-2014	14-Mar-2014
Fungal nail infection	[TRUNCATED]been treated with terbinafine, helped, ran out and nails worse says nails were thick and yellow, also affecting toes on hands nails v ridged, slight yellow discolouration, no onycolysis a	-	14-Mar-2014	14-Mar-2014
C/O: a rash	behind ears present for long time , comes and goes slightly scaly erythema behind ears looks dermatitic with slight fungal element treat topically	-	14-Mar-2014	14-Mar-2014
Referral to nurse	please check FBC, U&E, LFT, vitamin B12, folate, ferritin please	-	14-Mar-2014	14-Mar-2014
Sore throat symptom	and macular erythmatous rash. ? Strep throat. Swab taken and commenced on pen V	-	17-Sep-2013	17-Sep-2013
Cervicalgia - pain in neck	[TRUNCATED]pain in neck for years known to have OA also pain in legs from prev RTA NSAID stopped due to gastritis says cant have paracetamol, tramadol, codeine, dihydrocodeine- all make him vomit an	-	10-Sep-2013	10-Sep-2013
C/O: a rash	[TRUNCATED]3 weeks itchy rash over torso intermittent raised lumps, last 2 days then settle to small red blanching mark not active a present no obvious triggers no hx of skin disease no new cosmetic	-	10-Sep-2013	10-Sep-2013

Cough	[TRUNCATED]4 weeks of cough thick white sputum more sob and wheexy had amox then steriods then gastritis and did not finish steriods using inhalers more no fever PEFR excellent today hx of asthma o/	-	10-Sep-2013	10-Sep-2013
Cough	tummy better. can restart asp with double dose ppi. tests all fine, try steroid for wheeze. spit gone	-	20-Aug-2013	20-Aug-2013
Chest infection NOS	cxr and bloods	-	06-Aug-2013	06-Aug-2013
Tenderness of epigastrium	stop asp for 2/52. switch diclo to etod. see 2/52. double up ppi.	-	06-Aug-2013	06-Aug-2013
Referral to nurse	please do ues. lfts. fbc/esr	-	06-Aug-2013	06-Aug-2013
Rosacea	3 month hx - spots/cysts affecting face and neck. can be painful. plan - try topical metronidazole, worsening advice given	-	04-Oct-2012	04-Oct-2012
Discussion	did not tolerate statin. making changes to diet and on stanols to help reduce cholesterol.	-	05-Sep-2012	05-Sep-2012
Referral to nurse	Please check fasting blood glucose	-	24-Jul-2012	24-Jul-2012
Shortness of breath	and hyperventilation on modest exertion	First ever	17-Jul-2012	17-Jul-2012
O/E - chest examination normal	-	First ever	17-Jul-2012	17-Jul-2012
Athlete's foot	-	First ever	17-Jul-2012	17-Jul-2012
C/O - a headache	6 weeks	First ever	17-Jul-2012	17-Jul-2012
[D]Hyperventilation	-	First ever	17-Jul-2012	17-Jul-2012
Productive cough - green sputum	-	First ever	17-Jul-2012	17-Jul-2012
Back pain without radiation NOS	2/12. pain left buttock, not in leg no bladder sxs. o/e stiff back. slr r = l = 80 degs. adv exercise could try physio.	Continuing	15-Jun-2011	15-Jun-2011
[X]Benign coital headache	recent onset, no other episodes, background tension headache. adv to stop diclof as has gi upset and gen lethargy. amitrip might help arthritic pain and headache.	Continuing	15-Jun-2011	15-Jun-2011
Referral to nurse	please check u and es lfts and fbc. long term sue nsaid.	Continuing	15-Jun-2011	15-Jun-2011
Has numbness	[TRUNCATED]bilateral arms, intermittent. getting worse over past few months. worse at night. longstanding neck pain after fracture in motorbike RTA. no weakness. o/e neuro exam upper limbs normal. t	-	24-Nov-2009	24-Nov-2009
Cough	[TRUNCATED]worsening over past few months. productive clear spit. worse at night. Had diagnosis of asthma but heavy smoker 20/day for 30 years. ?element COPD. no weight loss. no haemoptyisis. o/e wh	-	24-Nov-2009	24-Nov-2009
Chest infection NOS	[TRUNCATED]cough greeen sputum for about 2 weeks. getting worse - not much sleep last 2 nights. hasnt felt feverish though partner has commented on him looking flushed. generalised muscle pains. coa	-	25-Sep-2009	25-Sep-2009
[D]General aches and pains	[TRUNCATED]sore all over, tired, for about a month, no obvious reason, joints are sore, does have arthritis. Not tired any pain painkillers. Girlfriend has diclofenac - tried some found quite good,	-	21-Apr-2009	21-Apr-2009
Cough	[TRUNCATED]known asthmatic. 3/12 history of productive cough. Feeling SOB. smoker. weight loss of 6 pounds in 3 months - has been trying to eat healthily. Asthma normally not a problem - takes terbu	-	24-Oct-2007	24-Oct-2007

Pain in joint - arthralgia	avoid nsaids. weakness ++grip. neck tenderness too.?? physio	-	11-May-2007	11-May-2007
Cutaneous abscess	left cheek	-	11-May-2007	11-May-2007
[V]Other eye problems	Bilateral Retinal Emboli	First ever	18-Feb-2003	18-Feb-2003
Dry eye syndrome	-	-	24-Oct-2002	24-Oct-2002
Chest infection NOS	-	-	20-Sep-2002	20-Sep-2002
O/E - ankle oedema	mild - UEs,LFTs cheked	-	30-Aug-2002	30-Aug-2002
Chest infection NOS	-	-	30-Aug-2002	30-Aug-2002
Shortness of breath	-	-	06-Aug-2002	06-Aug-2002
C/O: a pain	-	-	20-May-2002	20-May-2002
Asthma	-	-	21-Feb-2002	21-Feb-2002
Asthma	COUGH VARIENT	-	21-Feb-2002	21-Feb-2002
C/O - a headache	-	-	13-Feb-2002	13-Feb-2002
Pterygium	-	-	04-Jul-2001	04-Jul-2001
Cough	-	-	20-Jun-2001	20-Jun-2001
Arthralgia of shoulder	-	Continuing	18-Jun-2001	18-Jun-2001
Upper respiratory infection NOS	-	-	14-Jun-2001	14-Jun-2001
Acute sinusitis NOS	-	-	06-Jun-2001	06-Jun-2001
Pain in joint - arthralgia	-	-	31-May-2001	31-May-2001
Chest infection NOS	-	-	31-May-2001	31-May-2001
Infectious diarrhoea NOS	-	-	22-May-2001	22-May-2001
Chest infection NOS	-	-	22-May-2001	22-May-2001
Arthralgia of shoulder	-	First ever	11-Dec-2000	11-Dec-2000

Arthralgia of shoulder	-	First ever	21-Aug-2000	21-Aug-2000
Subacromial bursitis	-	Continuing	19-Oct-1998	19-Oct-1998
Shoulder pain	-	-	28-Aug-1998	28-Aug-1998
C/O: a pain	shoulder	-	07-Aug-1998	07-Aug-1998
C/O: a pain	refer physio	First ever	25-Jun-1998	25-Jun-1998
Dyspepsia	-	-	09-Jul-1997	09-Jul-1997
Upper respiratory tract infection NOS	-	First ever	09-Jan-1997	09-Jan-1997
PAIN JOINT	-	-	20-Aug-1996	20-Aug-1996
PAIN WRIST	-	-	16-Jul-1996	16-Jul-1996
TENNIS ELBOW	-	-	07-Jun-1996	07-Jun-1996
TENNIS ELBOW	-	-	09-Oct-1995	09-Oct-1995
ISQ (IN STATUS QUO)	-	-	25-Aug-1995	25-Aug-1995
SORE THROAT	-	-	15-Aug-1995	15-Aug-1995
DEPRESSION	-	-	02-Aug-1995	02-Aug-1995
ARTHRALGIA	-	-	10-Feb-1995	10-Feb-1995
ISQ (IN STATUS QUO)	-	-	15-Nov-1994	15-Nov-1994
LETHARGY	-	-	14-Oct-1994	14-Oct-1994
DEPRESSION	R MED 1	-	27-Sep-1994	27-Sep-1994
DEBILITY	ATTENDED 27/9/94	-	01-Aug-1994	01-Aug-1994
LETHARGY	-	-	13-Jul-1994	13-Jul-1994
TIREDNESS	-	-	09-May-1994	09-May-1994
LACERATION EAR	-	-	11-Apr-1994	11-Apr-1994
			30-	30-Mar-

VIRAL ILLNESS	-	-	Mar-1994	1994
BACK PAIN	-	-	03-Feb-1994	03-Feb-1994
FOOT INJURY	-	-	18-Jul-1993	18-Jul-1993
PAIN KNEE	-	-	25-Sep-1992	25-Sep-1992
NO DIAGNOSIS MADE	-	-	04-Mar-1992	04-Mar-1992
GASTROENTERITIS	-	-	06-Feb-1992	06-Feb-1992
PAIN KNEE	LT	-	04-Feb-1992	04-Feb-1992
PAIN KNEE	LT	-	03-Feb-1992	03-Feb-1992
PAIN KNEE	LT	-	08-Oct-1991	08-Oct-1991
FOREIGN BODY EYE	-	-	07-Oct-1991	07-Oct-1991
PAIN KNEE	-	-	12-Jun-1991	12-Jun-1991
NASAL SEPTUM DEFLECTED	-	-	22-Feb-1991	22-Feb-1991
COUGH PRODUCTIVE	-	-	21-Jan-1991	21-Jan-1991
RHINITIS	-	-	10-Dec-1990	10-Dec-1990
RHINITIS	-	-	26-Oct-1990	26-Oct-1990
PAIN MUSCLE	-	-	26-Oct-1990	26-Oct-1990
DYSPEPSIA	-	-	24-Jul-1990	24-Jul-1990
FRACTURE MALLEOLUS	MEDIAL	-	02-May-1989	02-May-1989
FRACTURE FIBULA	[YEAR OF EVENT 1981]	-	01-Jan-1981	01-Jan-1981
FRACTURE TIBIA	[YEAR OF EVENT 1981] NOTES: MID-SHAFT L.	-	01-Jan-1981	01-Jan-1981
FRACTURE ACETABULUM	[YEAR OF EVENT 1981] NOTES: CHIP L.	-	01-Jan-1981	01-Jan-1981
FRACTURE COMPOUND	[YEAR OF EVENT 1981] NOTES: SHAFT R FEMUR.	-	01-Jan-1981	01-Jan-1981
ROAD TRAFFIC			01-	01-Jan-

ACCIDENT	[YEAR OF EVENT 1981] NOTES: (MOTOR BIKE). -	Jan-1981	1981

Past procedures (High and medium priority - all)

Description	Comment	Date performed	Date recorded
N terminal pro-brain natriuretic peptide level	411 ng/L. NOTES: NT pro BNP -.	07-Jul-2025	07-Jul-2025
Laboratory procedures	[TRUNCATED]NT-proBNP should always be interpreted in combination with clinical evaluation. Please see Heart Failure Diagnostic Pathway When used as recommended by protocol, NT-proBNP >= 400 suggests	07-Jul-2025	07-Jul-2025
Serum total T3 level	Total T3	07-Jul-2025	07-Jul-2025
Serum free T4 level	11.60 pmol/L. Start of normal range: 9, End of normal range: 21. NOTES: Free T4 -.	07-Jul-2025	07-Jul-2025
Serum TSH level	4.790 mU/L. Start of normal range: 0.350, End of normal range: 5. NOTES: TSH - mU/L.	07-Jul-2025	07-Jul-2025
Thyroid function test	Thyroid funct test	07-Jul-2025	07-Jul-2025
Serum cholesterol/HDL ratio	6 ratio. NOTES: Chol/HDL ratio.	07-Jul-2025	07-Jul-2025
Laboratory procedures	2 mmol/L. NOTES: VLDL-Chol (calc'd) -.	07-Jul-2025	07-Jul-2025
Calculated LDL cholesterol level	3.50 mmol/L. NOTES: LDL-Cholest (calc'd) -.	07-Jul-2025	07-Jul-2025
Serum HDL cholesterol level	1.10 mmol/L. NOTES: HDL Cholesterol -.	07-Jul-2025	07-Jul-2025
Serum triglycerides	4.30 mmol/L. Result qualifier: Abnormal, Start of normal range: 0.200, End of normal range: 2.300. NOTES: Triglycerides -.	07-Jul-2025	07-Jul-2025
Serum cholesterol	6.60 mmol/L. NOTES: Cholesterol -.	07-Jul-2025	07-Jul-2025
Lipid fractionation	Lipid profile	07-Jul-2025	07-Jul-2025
Serum albumin	36 g/L. Start of normal range: 35, End of normal range: 50. NOTES: Albumin -.	07-Jul-2025	07-Jul-2025
Serum alkaline phosphatase	75 U/L. Start of normal range: 30, End of normal range: 130. NOTES: Alkaline Phosphatase - U/L.	07-Jul-2025	07-Jul-2025
AST serum level	37 U/L. NOTES: AST - U/L.	07-Jul-2025	07-Jul-2025
ALT/SGPT serum level	42 U/L. NOTES: ALT - U/L.	07-Jul-2025	07-Jul-2025
Serum total bilirubin level	8 umol/L. NOTES: Total Bilirubin -.	07-Jul-2025	07-Jul-2025
Liver function test	Liver Function Tests	07-Jul-2025	07-Jul-2025
GFR calculated abbreviated MDRD	49 mL/min. Result qualifier: Abnormal. NOTES: Estimated GFR - ml/min.	07-Jul-2025	07-Jul-2025
Serum creatinine	126 umol/L. Start of normal range: 40, End of normal range: 130. NOTES: Creatinine -.	07-Jul-2025	07-Jul-2025
Serum urea level	4 mmol/L. Start of normal range: 2.500, End of normal range: 7.800. NOTES: Urea -.	07-Jul-2025	07-Jul-2025
Serum chloride	104 mmol/L. Start of normal range: 95, End of normal range: 108. NOTES: Chloride -.	07-Jul-2025	07-Jul-2025
Serum potassium	4 mmol/L. Start of normal range: 3.500, End of normal range: 5.300. NOTES: Potassium -.	07-Jul-2025	07-Jul-2025
Serum sodium	138 mmol/L. Start of normal range: 133, End of normal range: 146. NOTES: Sodium -.	07-Jul-2025	07-Jul-2025
Urea and electrolytes	Urea & Electrolytes	07-Jul-2025	07-Jul-2025
Serum C reactive protein level	12 mg/L. Result qualifier: Abnormal, Start of normal range: 0, End of normal range: 10. NOTES: C Reactive Protein -.	07-Jul-2025	07-Jul-2025
Serum alkaline	75 U/L. Start of normal range: 30, End of normal range: 130.		07-Jul-

phosphatase	NOTES: Alkaline Phosphatase - U/L.	07-Jul-2025	2025
Serum albumin	36 g/L. Start of normal range: 35, End of normal range: 50. NOTES: Albumin -.	07-Jul-2025	07-Jul-2025
Serum inorganic phosphate	0.79 mmol/L. Result qualifier: Abnormal, Start of normal range: 0.800, End of normal range: 1.500. NOTES: Phosphate -.	07-Jul-2025	07-Jul-2025
Corrected serum calcium level	2.34 mmol/L. Start of normal range: 2.200, End of normal range: 2.600. NOTES: Calcium (adjusted) -.	07-Jul-2025	07-Jul-2025
Serum calcium	2.16 mmol/L. Result qualifier: Abnormal, Start of normal range: 2.200, End of normal range: 2.600. NOTES: Calcium -.	07-Jul-2025	07-Jul-2025
Bone profile	Bone Profile	07-Jul-2025	07-Jul-2025
Plasma glucose level	8.40 mmol/L. Result qualifier: Abnormal, Start of normal range: 3.500, End of normal range: 6. NOTES: Glucose -.	07-Jul-2025	07-Jul-2025
Plasma glucose level	Non-fasting sample; Glucose	07-Jul-2025	07-Jul-2025
Nucleated red blood cell count	0 10*9/L. NOTES: Nucleated RBC - x10^9/l.	07-Jul-2025	07-Jul-2025
Basophil count	0 10*9/L. Start of normal range: 0, End of normal range: 0.100. NOTES: Basophils - x10^9/l.	07-Jul-2025	07-Jul-2025
Eosinophil count	0.59 10*9/L. Result qualifier: Abnormal, Start of normal range: 0.020, End of normal range: 0.500. NOTES: Eosinophils - x10^9/l.	07-Jul-2025	07-Jul-2025
Monocyte count	0.80 10*9/L. Start of normal range: 0.200, End of normal range: 1. NOTES: Monocytes - x10^9/l.	07-Jul-2025	07-Jul-2025
Lymphocyte count	1.80 10*9/L. Start of normal range: 1.100, End of normal range: 5. NOTES: Lymphocytes - x10^9/l.	07-Jul-2025	07-Jul-2025
Neutrophil count	3.80 10*9/L. Start of normal range: 2, End of normal range: 7. NOTES: Neutrophils - x10^9/l.	07-Jul-2025	07-Jul-2025
Platelet count	339 10*9/L. Start of normal range: 150, End of normal range: 410. NOTES: Platelet Count - x10^9/l.	07-Jul-2025	07-Jul-2025
Mean corpusc. haemoglobin(MCH)	29.90 pg. Start of normal range: 27, End of normal range: 32. NOTES: MCH -.	07-Jul-2025	07-Jul-2025
Mean corpuscular volume (MCV)	89.80 fL. Start of normal range: 83, End of normal range: 101. NOTES: Mean Cell Volume - fl.	07-Jul-2025	07-Jul-2025
Haematocrit	0.447 L/L. Start of normal range: 0.400, End of normal range: 0.540. NOTES: l/l.	07-Jul-2025	07-Jul-2025
Haemoglobin estimation	149 g/L. Start of normal range: 130, End of normal range: 180. NOTES: Haemoglobin - g/l.	07-Jul-2025	07-Jul-2025
Red blood cell (RBC) count	4.98 10*12/L. Start of normal range: 4.500, End of normal range: 6.500. NOTES: Red Cell Count - x10^12/l.	07-Jul-2025	07-Jul-2025
Total white cell count	7 10*9/L. Start of normal range: 4, End of normal range: 10. NOTES: White Blood Count - x10^9/l.	07-Jul-2025	07-Jul-2025
Full blood count - FBC	Full Blood Count	07-Jul-2025	07-Jul-2025
BCSP faecal occult blood test normal	Result qualifier: Negative. NOTES: No action required.	04-Jul-2025	04-Jul-2025

Family conditions (All priorities)

Description	Comment	Date of Onset
No FH: Ischaemic heart disease	Read code of condition: Ischaemic heart disease [G3...00].	14-Sep-1993

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Aspirin 75mg dispersible tablets	56	tablet	ONE IN THE MORNING	-	07-Feb-2003	08-Jul-2025
Cetirizine 10mg tablets	56	tablet	ONE TABLET EVERY DAY	-	14-Mar-2014	08-Jul-2025
Trelegy Ellipta 92micrograms/dose / 55micrograms/dose / 22micrograms/dose dry powder inhaler (GlaxoSmithKline UK Ltd)	60	dose	1 INHALATION ONCE DAILY	-	19-Sep-2024	04-Jul-2025

Gabapentin 300mg capsules	56	capsule	1 CAPSULE MORNING AND AFTERNO[more]	-	04-Nov-2020	08-Jul-2025
Omeprazole 20mg gastro-resistant capsules	112	capsule	ONE BD	-	14-Jul-2010	08-Jul-2025
Hylo-Care eye drops preservative free (Scope Ophthalmics Ltd)	10	ml	AS REQUIRED	-	15-Apr-2020	08-Jul-2025
Salbutamol 100micrograms/dose inhaler CFC free	200	dose	2 PUFFS WHEN REQUIRED FOUR TI[more]	-	05-Apr-2018	04-Jul-2025

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Furosemide 40mg tablets	28	tablet	ONE IN THE MORNING	-	08-Jul-2025	08-Jul-2025
Ramipril 2.5mg capsules	28	capsule	1 CAPSULE ONCE A DAY	-	07-Jul-2025	07-Jul-2025
Glyceryl trinitrate 400micrograms/dose pump sublingual spray	200	dose	1 - 2 SPRAYS UNDER THE TONGUE	-	07-Jul-2025	07-Jul-2025
Trelegy Ellipta 92micrograms/dose / 55micrograms/dose / 22micrograms/dose dry powder inhaler (GlaxoSmithKline UK Ltd)	60	dose	1 INHALATION ONCE DAILY	-	19-Sep-2024	08-May-2025
Aspirin 75mg dispersible tablets	56	tablet	ONE IN THE MORNING	-	07-Feb-2003	16-May-2025
Cetirizine 10mg tablets	56	tablet	ONE TABLET EVERY DAY	-	14-Mar-2014	16-May-2025
Gabapentin 300mg capsules	56	capsule	1 CAPSULE MORNING AND AFTERNO[more]	-	04-Nov-2020	11-Feb-2025

Blood Pressure

Date Recorded	Systolic	Diastolic
-	170	105

Body Measurements

Date Recorded	Height	Weight	BMI
-	1.69	101.605	35.5

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Ex smoker:	Smoking status on date of event: Ex-smoker.	13-Aug-2024
Ex smoker:	Smoking status on date of event: Ex-smoker.	05-Apr-2018
Ex smoker:	Smoking status on date of event: Ex-smoker.	22-Jan-2016
Ex smoker:	Smoking status on date of event: Ex-smoker.	22-Jan-2016
Never smoked tobacco:	Smoking status on date of event: Never smoked.	15-Aug-2014
Teetotaller:	Drinking status on eventdate: Life teetotaler.	22-Jan-2016
Teetotaller:	Drinking status on eventdate: Life teetotaler.	11-May-2007
ALCOHOL NON-DRINKER:	Drinking status on eventdate: Life teetotaler.	14-Sep-1993
GPPAQ physical activity index: active:	has a prob with plantar fascitis and painful foot, tries to keep active	22-Jan-2016

Investigations

Description/Question	Result/Comment	Date
BNP/NTproBNP value::	411	-
Date of BNP/NTproBNP::	2025-07-07	-

Clinical warnings

Allergies

Description	Date recorded
Urticaria	28-Jan-2002

Additional Support Needs

No known ASN requirements

Additional relevant information

Indication for Referral::NTproBNP > 400

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

Patient will accept cancellation or short notice appointment (within 1-6 days):Yes

Referred By:Referring GP

Electronic Attachment Present:No

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

Low back pain	[TRUNCATED]C19(tel) ?equest for amitrityline. Recent flare up of back pain - attended ED in August - given Ralvoand diazepam Then referred for OP MRI via ortho spine. Back pain s	-	04-Nov-2020	04-Nov-2020
Pain in lumbar spine	-	-	27-Aug-2020	27-Aug-2020
MRC Breathlessness Scale: grade 4	-	Continuing	05-Apr-2018	05-Apr-2018
Cough	[TRUNCATED]hx of COPD - feels this is poorly controlled of late. Cough 2/52, worse in past 7/7. Productive of green sputum, no haemoptysis. Breathless and wheezy. No chest pain, no fevers. Parterner	-	12-Feb-2018	12-Feb-2018
Cough	-	-	12-Feb-2018	12-Feb-2018
Erectile dysfunction	[TRUNCATED]-issues since commencing gabapentin. convinced it is secondary to this as decided to come off of it for a few days and was fine. difficulties with pain control though and feels unable to	-	22-Nov-2017	22-Nov-2017
Cervicalgia - pain in neck	[TRUNCATED]neck pain for many years intermittently with assoc paraesthesia in hands. seen neurology in 2011 who arranged nerve conduction tests which were normal. MRI scan at that time showed osteop	-	22-Nov-2017	22-Nov-2017
Cough	[TRUNCATED]cough for 1-2 weeks. feeling SOB/wheezy at times. no chest pain. thick clear sputum, no blood. known COPD. o/e apyrexial sats 97% HR 87 chest clear, slightly reduced AE globally, no wheez	-	22-Nov-2017	22-Nov-2017
Hand pain	Both first carpometacarpal joints. R>L. Previously xrayed - degenerative changes. Not on portal. For Xray both hands. Await result - ?refer hand clinic.	-	25-Apr-2017	25-Apr-2017
Cervicalgia - pain in neck	Big improvement with gabapentin. Continue on repeat.	-	25-Apr-2017	25-Apr-2017
Cervicalgia - pain in neck	[TRUNCATED]Discussed options. Did not receive follow-up appt for Pain service in September. Not enthusiastic about returning there at present. On amitriptylline 50mg nocte and sleeps well with this.	-	28-Mar-2017	28-Mar-2017
Cervicalgia - pain in neck	Spasms. No sphincter dysfunction. No worsening of paraesthesia in hands. Unable to tolerate paracetamol or opioids. For further appt to discuss options - ?refer back to neurology.	-	14-Mar-2017	14-Mar-2017
Chest infection NOS	Purulent productive cough. wheeze throughout lungfields. SaO2 97% amoxicillin and prednisolone prescribed.	-	14-Mar-2017	14-Mar-2017
H/O: asthma	[TRUNCATED]Has prev stopped seretide thinking related to vasculitis rash and chest pain at different times. Appropriate use of salbutamol & slight xs tiotropium. Jan 10 noted mild obstruction no COP	-	09-Jun-2016	09-Jun-2016
Back pain without radiation NOS	[TRUNCATED]long discussion ... needs pain killers adamant cannot take paracetamol or any opiods vomiting and dizzy aware nsaids not good choice recent gastroscopy showed gastritis also renal f	-	29-Apr-2016	29-Apr-2016
Gastritis unspecified	, GRI	-	21-Mar-2016	21-Mar-2016
[D]Abdominal pain	[TRUNCATED]CP better since last visit. No palpitations, no dizziness, no increased SoB. Abdo pain ongoing. Mainly on activity. "Severe burning pain" lasting a few minutes. Relieved by rest. No radia	-	15-Feb-2016	15-Feb-2016
Night cough absent	-	-	25-Jan-2016	25-Jan-2016
			22-	22-Jan-

CLINICAL INFORMATION

History of presenting complaint
Presenting complaint

Description: Chest pains, also ?CCF

Comment: Dear cardiology

Grateful if you can arrange to urgently review this obese man with COPD who is ex smoker. Not been well last 4 weeks though symptoms for several months. Strong FH of IHD ..ad MI. Feeling more breathless and pain if take deep breath in at times. Also pressure like chest pains at times at rest or on exertion for 4 weeks. Ankles chronically swollen.

Also - partner been taking BP readings over past 24 hours - high - mostly in range of 160-170 systolic over 85-102. Some headaches especially when standing, also nosebleeds - they were concerned re hypertension.

OE: gasping for breath RR24, HS pure, BP 168/92, sats 89-94% (his normal range), pulse 94bpm regular, bilateral pitting oedema right big bigger than left no obvious DVT, chest bibasal fine creps and left midzone creps.

?Unstable angina or CCF. Advised hospital review ?IV diuretics. He declines this long wait in past to be seen. Aware could be very unwell/die if not treated properly. Agreed commence ramipril and GTN (warned re worsening headache). Get CXR done bloods checked today inc BNP. Refer urgent cardiology.

Yours sincerely

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history
Pre-existing conditions (High & medium priority - all)

Description	Comment	Modifier	Date of onset	Date recorded
Shortness of breath	[TRUNCATED]Duty - tel -> FTF spoke in background 2 recent abx and steroids - finished 2/8/24 was much better, then worse again overnight last night SOB, not much cough has calle	-	05-Aug-2024	05-Aug-2024
Chest infection NOS	[TRUNCATED]seen with partner 2 week coughing green stuff no blood wt stable (obese) soboe when goes upstairs v breathless no fever/ no vomit drinking and puing ok using inhalers+++ f2f this pm oe sa	-	24-Jul-2024	24-Jul-2024
Chronic kidney disease stage 3	-	-	02-Mar-2023	02-Mar-2023
Discussion	[TRUNCATED]with partner he gave permission egfr..suggest stop nsaid she says allergic pcm nausea and vomiting only taking 300mg gabapentin daily inc bd plts up a bit..has been off aspirin restart rp	-	31-Jan-2023	31-Jan-2023
Guttate psoriasis	[TRUNCATED]last few weeks extensive rash on arms, back , groin thighs partner doesnt have not itchy seemed occur after sore throat oe ?guttate psoriasis says v tired since covid soboe but sats bette	-	25-Jan-2023	25-Jan-2023
Headache	[TRUNCATED]Tel. covid positive. Day 10. ongoign headchae. reosIved after a fewdays but came back worse and present past 4-5 days. all the time. all over but mainly frontal. constant headcahe, thumpi	-	29-Apr-2022	29-Apr-2022
Productive cough-yellow sputum	[TRUNCATED]LFT +ve yesterday doesn't leave house stays with partner feels slightly breathless - like start of a chest infection checked sats - o2sat:93%, - readings generally 93-98 p. 78 agreed try	-	20-Apr-2022	20-Apr-2022
Spinal stenosis	- moderate central canal stenosis at the 4/5 level and slight impingement on the L5 nerve roots, Orthopaedic OP Yorkhill ACH	-	10-Dec-2020	10-Dec-2020

Body Mass Index	33.6	Continuing	Jan-2016	2016
Healthy diet	planning on addressing weight	-	22-Jan-2016	22-Jan-2016
MRC Breathlessness Scale: grade 2	-	-	22-Jan-2016	22-Jan-2016
Breathlessness symptom	[TRUNCATED]Not taking inhalers at present as thought responsible for chest pain. Keen on changing back to old inhalers in case this is the cause. Explained this is unlikely as it should not be going	-	18-Jan-2016	18-Jan-2016
Chest pain	[TRUNCATED]Pain in chest for last 3-4 weeks. Long term issues with acid reflux. On Omeprazole. Has doubled dose since symptoms started. Stopped inhalers as he felt they were the cause. Had not discu	-	18-Jan-2016	18-Jan-2016
Chronic obstructive pulmonary disease	[TRUNCATED]known COPD with asthma component. past few days inc cough with green spit, more sob on exertion with wheeze. no fever. no vomit. E+D ok. otherwise well. ran out of seretide at weekend. OE	-	31-Mar-2015	31-Mar-2015
Cataract	- left eye, Ophthalmology OP, Stobhill Hospital	-	21-Nov-2014	21-Nov-2014
O/E - temperature level	36.40 degC.	-	16-Jul-2014	16-Jul-2014
O/E - pulse rate	Pulse: 72.	-	16-Jul-2014	16-Jul-2014
Breathlessness symptom	[TRUNCATED]2w hx of worsening breathlessness also worsening leg oedema and swollen abdomen had been see in may with leg oedema, improved with furosemide ecg and cxr organised which were normal no hx	-	16-Jul-2014	16-Jul-2014
Referral to nurse	UEs please	-	08-Jul-2014	08-Jul-2014
Referral to nurse	UEs eGFR borderline last check. Thank you.	-	27-May-2014	27-May-2014
Referral to nurse	FBC UE LFT TFT ESR CRP	-	20-May-2014	20-May-2014
Chronic low back pain	[TRUNCATED]left with chronic low back pain after RTA in 1980s also has chronic leg pain and neck pain known OA on nsaid, not controlling low back pain, worse on movement no weight loss no urinary sy	-	14-Mar-2014	14-Mar-2014
Fungal nail infection	[TRUNCATED]been treated with terbinafine, helped, ran out and nails worse says nails were thick and yellow, also affecting toes on hands nails v ridged, slight yellow discolouration, no onycolysis a	-	14-Mar-2014	14-Mar-2014
C/O: a rash	behind ears present for long time , comes and goes slightly scaly erythema behind ears looks dermatitic with slight fungal element treat topically	-	14-Mar-2014	14-Mar-2014
Referral to nurse	please check FBC, U&E, LFT, vitamin B12, folate, ferritin please	-	14-Mar-2014	14-Mar-2014
Sore throat symptom	and macular erythmatous rash. ? Strep throat. Swab taken and commenced on pen V	-	17-Sep-2013	17-Sep-2013
Cervicalgia - pain in neck	[TRUNCATED]pain in neck for years known to have OA also pain in legs from prev RTA NSAID stopped due to gastritis says cant have paracetamol, tramadol, codeine, dihydrocodeine- all make him vomit an	-	10-Sep-2013	10-Sep-2013
C/O: a rash	[TRUNCATED]3 weeks itchy rash over torso intermittent raised lumps, last 2 days then settle to small red blanching mark not active a present no obvious triggers no hx of skin disease no new cosmetic	-	10-Sep-2013	10-Sep-2013
	[TRUNCATED]4 weeks of cough thick white sputum more			

Cough	sob and wheexy had amox then steriods then gastritis and did not finish steriods using inhalers more no fever PEFR excellent today hx of asthma o/	-	10-Sep-2013	10-Sep-2013
Cough	tummy better. can restart asp with double dose ppi. tests all fine, try steroid for wheeze. spit gone	-	20-Aug-2013	20-Aug-2013
Chest infection NOS	cxr and bloods	-	06-Aug-2013	06-Aug-2013
Tenderness of epigastrium	stop asp for 2/52. switch diclo to etod. see 2/52. double up ppi.	-	06-Aug-2013	06-Aug-2013
Referral to nurse	please do ues. lfts. fbc/esr	-	06-Aug-2013	06-Aug-2013
Rosacea	3 month hx - spots/cysts affecting face and neck. can be painful. plan - try topical metronidazole, worsening advice given	-	04-Oct-2012	04-Oct-2012
Discussion	did not tolerate statin. making changes to diet and on stanols to help reduce cholesterol.	-	05-Sep-2012	05-Sep-2012
Referral to nurse	Please check fasting blood glucose	-	24-Jul-2012	24-Jul-2012
Shortness of breath	and hyperventilation on modest exertion	First ever	17-Jul-2012	17-Jul-2012
O/E - chest examination normal	-	First ever	17-Jul-2012	17-Jul-2012
Athlete's foot	-	First ever	17-Jul-2012	17-Jul-2012
C/O - a headache	6 weeks	First ever	17-Jul-2012	17-Jul-2012
[D]Hyperventilation	-	First ever	17-Jul-2012	17-Jul-2012
Productive cough - green sputum	-	First ever	17-Jul-2012	17-Jul-2012
Back pain without radiation NOS	2/12. pain left buttock, not in leg no bladder sxs. o/e stiff back. slr r = l = 80 degs. adv exercise could try physio.	Continuing	15-Jun-2011	15-Jun-2011
[X]Benign coital headache	recent onset, no other episodes, background tension headache. adv to stop diclof as has gi upset and gen lethargy. amitrip might help arthritic pain and headache.	Continuing	15-Jun-2011	15-Jun-2011
Referral to nurse	please check u and es lfts and fbc. long term sue nsaid.	Continuing	15-Jun-2011	15-Jun-2011
Has numbness	[TRUNCATED]bilateral arms, intermittent. getting worse over past few months. worse at night. longstanding neck pain after fracture in motorbike RTA. no weakness. o/e neuro exam upper limbs normal. t	-	24-Nov-2009	24-Nov-2009
Cough	[TRUNCATED]worsening over past few months. productive clear spit. worse at night. Had diagnosis of asthma but heavy smoker 20/day for 30 years. ?element COPD. no weight loss. no haemoptyisis. o/e wh	-	24-Nov-2009	24-Nov-2009
Chest infection NOS	[TRUNCATED]cough greeen sputum for about 2 weeks. getting worse - not much sleep last 2 nights. hasnt felt feverish though. [illegible] has commented on him looking flushed. generalised muscle pains. coa	-	25-Sep-2009	25-Sep-2009
[D]General aches and pains	[TRUNCATED]sore all over, tired, for about a month, no obvious reason, joints are sore. does have arthritis. Not tired any pain painkillers [illegible] has diclofenac - tried some found quite good,	-	21-Apr-2009	21-Apr-2009
Cough	[TRUNCATED]known asthmatic. 3/12 history of productive cough. Feeling SOB. smoker. weight loss of 6 pounds in 3 months - has been trying to eat healthily. Asthma normally not a problem - takes terbu	-	24-Oct-2007	24-Oct-2007

Pain in joint - arthralgia	avoid nsaids. weakness ++grip. neck tenderness too.?? physio	-	11-May-2007	11-May-2007
Cutaneous abscess	left cheek	-	11-May-2007	11-May-2007
[V]Other eye problems	Bilateral Retinal Emboli	First ever	18-Feb-2003	18-Feb-2003
Dry eye syndrome	-	-	24-Oct-2002	24-Oct-2002
Chest infection NOS	-	-	20-Sep-2002	20-Sep-2002
O/E - ankle oedema	mild - UEs,LFTs cheked	-	30-Aug-2002	30-Aug-2002
Chest infection NOS	-	-	30-Aug-2002	30-Aug-2002
Shortness of breath	-	-	06-Aug-2002	06-Aug-2002
C/O: a pain	-	-	20-May-2002	20-May-2002
Asthma	-	-	21-Feb-2002	21-Feb-2002
Asthma	COUGH VARIENT	-	21-Feb-2002	21-Feb-2002
C/O - a headache	-	-	13-Feb-2002	13-Feb-2002
Pterygium	-	-	04-Jul-2001	04-Jul-2001
Cough	-	-	20-Jun-2001	20-Jun-2001
Arthralgia of shoulder	-	Continuing	18-Jun-2001	18-Jun-2001
Upper respiratory infection NOS	-	-	14-Jun-2001	14-Jun-2001
Acute sinusitis NOS	-	-	06-Jun-2001	06-Jun-2001
Pain in joint - arthralgia	-	-	31-May-2001	31-May-2001
Chest infection NOS	-	-	31-May-2001	31-May-2001
Infectious diarrhoea NOS	-	-	22-May-2001	22-May-2001
Chest infection NOS	-	-	22-May-2001	22-May-2001
Arthralgia of shoulder	-	First ever	11-Dec-2000	11-Dec-2000

Arthralgia of shoulder	-	First ever	21-Aug-2000	21-Aug-2000
Subacromial bursitis	-	Continuing	19-Oct-1998	19-Oct-1998
Shoulder pain	-	-	28-Aug-1998	28-Aug-1998
C/O: a pain	shoulder	-	07-Aug-1998	07-Aug-1998
C/O: a pain	refer physio	First ever	25-Jun-1998	25-Jun-1998
Dyspepsia	-	-	09-Jul-1997	09-Jul-1997
Upper respiratory tract infection NOS	-	First ever	09-Jan-1997	09-Jan-1997
PAIN JOINT	-	-	20-Aug-1996	20-Aug-1996
PAIN WRIST	-	-	16-Jul-1996	16-Jul-1996
TENNIS ELBOW	-	-	07-Jun-1996	07-Jun-1996
TENNIS ELBOW	-	-	09-Oct-1995	09-Oct-1995
ISQ (IN STATUS QUO)	-	-	25-Aug-1995	25-Aug-1995
SORE THROAT	-	-	15-Aug-1995	15-Aug-1995
DEPRESSION	-	-	02-Aug-1995	02-Aug-1995
ARTHRALGIA	-	-	10-Feb-1995	10-Feb-1995
ISQ (IN STATUS QUO)	-	-	15-Nov-1994	15-Nov-1994
LETHARGY	-	-	14-Oct-1994	14-Oct-1994
DEPRESSION	R MED 1	-	27-Sep-1994	27-Sep-1994
DEBILITY	ATTENDED 27/9/94	-	01-Aug-1994	01-Aug-1994
LETHARGY	-	-	13-Jul-1994	13-Jul-1994
TIREDNESS	-	-	09-May-1994	09-May-1994
LACERATION EAR	-	-	11-Apr-1994	11-Apr-1994
			30-	30-Mar-

VIRAL ILLNESS	-	-	Mar-1994	1994
BACK PAIN	-	-	03-Feb-1994	03-Feb-1994
FOOT INJURY	-	-	18-Jul-1993	18-Jul-1993
PAIN KNEE	-	-	25-Sep-1992	25-Sep-1992
NO DIAGNOSIS MADE	-	-	04-Mar-1992	04-Mar-1992
GASTROENTERITIS	-	-	06-Feb-1992	06-Feb-1992
PAIN KNEE	LT	-	04-Feb-1992	04-Feb-1992
PAIN KNEE	LT	-	03-Feb-1992	03-Feb-1992
PAIN KNEE	LT	-	08-Oct-1991	08-Oct-1991
FOREIGN BODY EYE	-	-	07-Oct-1991	07-Oct-1991
PAIN KNEE	-	-	12-Jun-1991	12-Jun-1991
NASAL SEPTUM DEFLECTED	-	-	22-Feb-1991	22-Feb-1991
COUGH PRODUCTIVE	-	-	21-Jan-1991	21-Jan-1991
RHINITIS	-	-	10-Dec-1990	10-Dec-1990
RHINITIS	-	-	26-Oct-1990	26-Oct-1990
PAIN MUSCLE	-	-	26-Oct-1990	26-Oct-1990
DYSPEPSIA	-	-	24-Jul-1990	24-Jul-1990
FRACTURE MALLEOLUS	MEDIAL	-	02-May-1989	02-May-1989
FRACTURE FIBULA	[YEAR OF EVENT 1981]	-	01-Jan-1981	01-Jan-1981
FRACTURE TIBIA	[YEAR OF EVENT 1981] NOTES: MID-SHAFT L.	-	01-Jan-1981	01-Jan-1981
FRACTURE ACETABULUM	[YEAR OF EVENT 1981] NOTES: CHIP L.	-	01-Jan-1981	01-Jan-1981
FRACTURE COMPOUND	[YEAR OF EVENT 1981] NOTES: SHAFT R FEMUR.	-	01-Jan-1981	01-Jan-1981
ROAD TRAFFIC			01-	01-Jan-

ACCIDENT	[YEAR OF EVENT 1981] NOTES: (MOTOR BIKE). -	Jan-1981	1981

Past procedures (High and medium priority - all)

Description	Comment	Date performed	Date recorded
BCSP faecal occult blood test normal	Result qualifier: Negative. NOTES: No action required.	04-Jul-2025	04-Jul-2025
Administration of first dose of SARS-CoV-2 vaccine	Type: COVPFIZER, Stage: 1, Status: Given, Due Date: 20/11/2024, Method: Intramuscular, Source: Out of Practice, Batch No: LK8841. NOTES: C-19 Comirnaty (SAS Glasgow Mobile Clinic).	20-Nov-2024	20-Nov-2024
Administration of first inactivated seasonal influenza vacc	Type: FLUQIVC, Stage: 1, Status: Given, Due Date: 20/11/2024, Method: Intramuscular, Source: Out of Practice, Batch No: 8708321P1. NOTES: FLU - Seqirus UK (SAS Glasgow Mobile Clinic).	20-Nov-2024	20-Nov-2024
Assessing cardiovascular risk using SIGN score	Result of Scoring Test: 40.330, Scoring methodology: ASSIGN.	14-Aug-2024	14-Aug-2024
N terminal pro-brain natriuretic peptide level	200 ng/L. NOTES: NT pro BNP -.	13-Aug-2024	13-Aug-2024
Laboratory procedures	[TRUNCATED]NT-proBNP should always be interpreted in combination with clinical evaluation. Please see Heart Failure Diagnostic Pathway When used as recommended by protocol, NT-proBNP >= 400 suggests	13-Aug-2024	13-Aug-2024
Haemoglobin A1c level - IFCC standardised	48 mmol/mol. Result qualifier: Abnormal, Start of normal range: 20, End of normal range: 41. NOTES: HbA1c (IFCC) -.	13-Aug-2024	13-Aug-2024
Serum cholesterol/HDL ratio	4.80 ratio. NOTES: Chol/HDL ratio.	13-Aug-2024	13-Aug-2024
Laboratory procedures	1.600 mmol/L. NOTES: VLDL-Chol (calc'd) -.	13-Aug-2024	13-Aug-2024
Calculated LDL cholesterol level	2.60 mmol/L. NOTES: LDL-Cholest (calc'd) -.	13-Aug-2024	13-Aug-2024
Serum HDL cholesterol level	1.10 mmol/L. NOTES: HDL Cholesterol -.	13-Aug-2024	13-Aug-2024
Serum triglycerides	3.50 mmol/L. Result qualifier: Abnormal, Start of normal range: 0.200, End of normal range: 2.300. NOTES: Triglycerides -.	13-Aug-2024	13-Aug-2024
Serum cholesterol	5.30 mmol/L. NOTES: Cholesterol -.	13-Aug-2024	13-Aug-2024
Lipid fractionation	Lipid profile	13-Aug-2024	13-Aug-2024
Serum albumin	35 g/L. Start of normal range: 35, End of normal range: 50. NOTES: Albumin -.	13-Aug-2024	13-Aug-2024
Serum alkaline phosphatase	77 U/L. Start of normal range: 30, End of normal range: 130. NOTES: Alkaline Phosphatase - U/L.	13-Aug-2024	13-Aug-2024
AST serum level	28 U/L. NOTES: AST - U/L.	13-Aug-2024	13-Aug-2024
ALT/SGPT serum level	29 U/L. NOTES: ALT - U/L.	13-Aug-2024	13-Aug-2024
Serum total bilirubin level	6 umol/L. NOTES: Total Bilirubin -.	13-Aug-2024	13-Aug-2024
Liver function test	Liver Function Tests	13-Aug-2024	13-Aug-2024
GFR calculated abbreviated MDRD	53 mL/min. Result qualifier: Abnormal. NOTES: Estimated GFR - ml/min.	13-Aug-2024	13-Aug-2024
Serum creatinine	118 umol/L. Start of normal range: 40, End of normal range: 130. NOTES: Creatinine -.	13-Aug-2024	13-Aug-2024
Serum urea level	4.90 mmol/L. Start of normal range: 2.500, End of normal range: 7.800. NOTES: Urea -.	13-Aug-2024	13-Aug-2024
Serum chloride	106 mmol/L. Start of normal range: 95, End of normal range: 108. NOTES: Chloride -.	13-Aug-2024	13-Aug-2024
Serum potassium	4.10 mmol/L. Start of normal range: 3.500, End of normal range: 5.300. NOTES: Potassium -.	13-Aug-2024	13-Aug-2024
Serum sodium	138 mmol/L. Start of normal range: 133, End of normal range:	13-Aug-	13-Aug-

	146. NOTES: Sodium -.	2024	2024
Urea and electrolytes	Urea & Electrolytes	13-Aug-2024	13-Aug-2024
Nucleated red blood cell count	0 10*9/L. NOTES: Nucleated RBC - x10^9/l.	13-Aug-2024	13-Aug-2024
Basophil count	0 10*9/L. Start of normal range: 0, End of normal range: 0.100. NOTES: Basophils - x10^9/l.	13-Aug-2024	13-Aug-2024
Eosinophil count	0.48 10*9/L. Start of normal range: 0.020, End of normal range: 0.500. NOTES: Eosinophils - x10^9/l.	13-Aug-2024	13-Aug-2024
Monocyte count	0.60 10*9/L. Start of normal range: 0.200, End of normal range: 1. NOTES: Monocytes - x10^9/l.	13-Aug-2024	13-Aug-2024
Lymphocyte count	1.60 10*9/L. Start of normal range: 1.100, End of normal range: 5. NOTES: Lymphocytes - x10^9/l.	13-Aug-2024	13-Aug-2024
Neutrophil count	6.10 10*9/L. Start of normal range: 2, End of normal range: 7. NOTES: Neutrophils - x10^9/l.	13-Aug-2024	13-Aug-2024
Platelet count	350 10*9/L. Start of normal range: 150, End of normal range: 410. NOTES: Platelet Count - x10^9/l.	13-Aug-2024	13-Aug-2024
Mean corpusc. haemoglobin(MCH)	31.60 pg. Start of normal range: 27, End of normal range: 32. NOTES: MCH -.	13-Aug-2024	13-Aug-2024
Mean corpuscular volume (MCV)	94.90 fL. Start of normal range: 83, End of normal range: 101. NOTES: Mean Cell Volume - fl.	13-Aug-2024	13-Aug-2024
Haematocrit	0.444 L/L. Start of normal range: 0.400, End of normal range: 0.540. NOTES: l/l.	13-Aug-2024	13-Aug-2024
Haemoglobin estimation	148 g/L. Start of normal range: 130, End of normal range: 180. NOTES: Haemoglobin - g/l.	13-Aug-2024	13-Aug-2024
Red blood cell (RBC) count	4.68 10*12/L. Start of normal range: 4.500, End of normal range: 6.500. NOTES: Red Cell Count - x10^12/l.	13-Aug-2024	13-Aug-2024
Total white cell count	8.90 10*9/L. Start of normal range: 4, End of normal range: 10. NOTES: White Blood Count - x10^9/l.	13-Aug-2024	13-Aug-2024
Full blood count - FBC	Full Blood Count	13-Aug-2024	13-Aug-2024
Chronic obstructive pulmonary disease annual review	[TRUNCATED]On spiromax, braltus and SABA Ongoing chest infection- pt feels not cleared. Waiting to be seen by duty GP CAT score 14- coughing more recently and bringing up phlegm. No chest tightness.	13-Aug-2024	13-Aug-2024
Medication requested	Acute request ibuprofen gel Not ordered in a while but note using sparingly for joint pain - known significant OA. Issued and watch ordering.	28-Mar-2024	28-Mar-2024
Advice to patient - subject	Type of advice given: Advice, Advice: Risk of CVD. NOTES: SR ibuprofen - available via minor ailments..	25-Mar-2024	25-Mar-2024
Administration of first dose of SARS-CoV-2 vaccine	Type: COVPFIZER, Stage: 1, Status: Given, Due Date: 08/10/2023, Method: Intramuscular, Source: Out of Practice, Batch No: HG2292. NOTES: C-19 Comirnaty (Eastbank Conference Training Centre).	08-Oct-2023	08-Oct-2023
Administration of first inactivated seasonal influenza vacc	Type: FLUQIVC, Stage: 1, Status: Given, Due Date: 08/10/2023, Method: Intramuscular, Source: Out of Practice, Batch No: 6782811P1. NOTES: FLU - Seqirus UK (Eastbank Conference Training Centre).	08-Oct-2023	08-Oct-2023
Rep.presc. monitoring NOS	-	02-Oct-2023	02-Oct-2023
Equivalent quantities for all medication checked	-	02-Oct-2023	02-Oct-2023
Bowel cancer screening programme	-	23-Sep-2023	23-Sep-2023
Medication requested	[TRUNCATED]spoke to pt's with Michael's consent ralvo, ibugel10% using for LBP, spinal stenosis previously been given ralvo, feels helping has recently been using partner's ralvo patc	22-Mar-2023	22-Mar-2023

Family conditions (All priorities)

Description	Comment	Date of Onset
No FH: Ischaemic heart disease	Read code of condition: Ischaemic heart disease [G3...00].	14-Sep-1993

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Trelegy Ellipta 92micrograms/dose / 55micrograms/dose / 22micrograms/dose dry powder inhaler (GlaxoSmithKline UK Ltd)	60	dose	1 INHALATION ONCE DAILY	-	19-Sep-2024	04-Jul-2025
Gabapentin 300mg capsules	56	capsule	1 CAPSULE MORNING AND AFTERNO[more]	-	04-Nov-2020	10-Jun-2025
Omeprazole 20mg gastro-resistant capsules	112	capsule	ONE BD	-	14-Jul-2010	16-May-2025
Hylo-Care eye drops preservative free (Scope Ophthalmics Ltd)	10	ml	AS REQUIRED	-	15-Apr-2020	16-May-2025
Salbutamol 100micrograms/dose inhaler CFC free	200	dose	2 PUFFS WHEN REQUIRED FOUR TI[more]	-	05-Apr-2018	04-Jul-2025
Cetirizine 10mg tablets	56	tablet	ONE TABLET EVERY DAY	-	14-Mar-2014	16-May-2025
Aspirin 75mg dispersible tablets	56	tablet	ONE IN THE MORNING	-	07-Feb-2003	16-May-2025

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Ramipril 2.5mg capsules	28	capsule	1 CAPSULE ONCE A DAY	-	07-Jul-2025	07-Jul-2025
Glyceryl trinitrate 400micrograms/dose pump sublingual spray	200	dose	1 - 2 SPRAYS UNDER THE TONGUE	-	07-Jul-2025	07-Jul-2025
Trelegy Ellipta 92micrograms/dose / 55micrograms/dose / 22micrograms/dose dry powder inhaler (GlaxoSmithKline UK Ltd)	60	dose	1 INHALATION ONCE DAILY	-	19-Sep-2024	08-May-2025
Gabapentin 300mg capsules	56	capsule	1 CAPSULE MORNING AND AFTERNO[more]	-	04-Nov-2020	11-Feb-2025

Blood Pressure

Date Recorded	Systolic	Diastolic
-	170	105

Body Measurements

Date Recorded	Height	Weight	BMI
-	1.69	101.605	35.5

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Ex smoker:	Smoking status on date of event: Ex-smoker.	13-Aug-2024
Ex smoker:	Smoking status on date of event: Ex-smoker.	05-Apr-2018
Ex smoker:	Smoking status on date of event: Ex-smoker.	22-Jan-2016
Ex smoker:	Smoking status on date of event: Ex-smoker.	22-Jan-2016
Never smoked tobacco:	Smoking status on date of event: Never smoked.	15-Aug-2014
Teetotaller:	Drinking status on eventdate: Life teetotaler.	22-Jan-2016
Teetotaller:	Drinking status on eventdate: Life teetotaler.	11-May-2007
ALCOHOL NON-DRINKER:	Drinking status on eventdate: Life teetotaler.	14-Sep-1993

GPPAQ physical activity index: active: has a prob with plantar fascitis and painful foot, tries to keep active 22-Jan-2016

Clinical warnings

Allergies

Description	Date recorded
Urticaria	28-Jan-2002

Additional Support Needs

No known ASN requirements

Additional relevant information

OK to send correspondence to home address?:Yes
Patient will accept any site:Yes
Patient will accept cancellation or short notice appointment (within 1-6 days):Yes
Referred By:Referring GP
Electronic Attachment Present:No

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

NHS Confidential: Personal data about a patient

carpenters scotland

Our ref : DTAY/1541394
Your ref :
Date : 4 February 2021

3rd Floor
147 Blythswood Street
Glasgow
G2 4EN

DX: GW31 Glasgow
www.carpentersgroup.co.uk

The Cairns Practice
Shettelston Health Centre
Old Shettleston Road
Glasgow
G32 9AS

Direct Dial: 0141 328 6272
Direct Fax: 3939
E-mail: dtay@carpentersgroup.co.uk
Contact: David Taylor

Dear Sirs

Our Client	**: Michael Keown**
Address	**: 48 Glencorse Street Glasgow G32 6JQ**
Date of Birth	**: 01/12/1955**
Accident Date	**: 10 February 2020**

We write in reference to previous correspondence.

Unfortunately we require a copy of the official radiology report in order to review matters further.

If this can be sent to us that would be much appreciated.

Thank you for your assistance.

Yours faithfully

Carpenters Scotland Ltd

CARPENTERS SCOTLAND LIMITED

Please ensure that our reference 1541394 is quoted on all correspondence.

NHS
Greater Glasgow and Clyde

Glasgow Royal Infirmary
Alexandra Parade
Glasgow G31 2ER

06/01/2021

Dr PJ Rogers
The Cairns Practice
Shettleston Health Centre
420 Old Shettleston Road
Glasgow
G32 7JZ

Dear Dr PJ Rogers

Re: **Michael Keown**
Address: **48 Glencorse Street**
Glasgow
G32 6JQ

CHI Number: **0112556132**

Speciality: **PHYSIO-MSK**

It would appear from our records that:

(✓) Your patient has not responded to our recent letters inviting them to arrange an appointment.

( ) Your patient has indicated that they no longer require an appointment.

( ) Your patient has refused two reasonable offers of appointment.

We therefore assume that your patient no longer needs this appointment. We have removed their name from the waiting list. This is in line with NHS Greater Glasgow and Clyde's Did Not Attend Policy.

If you still wish your patient to be seen, we will require a new referral.

Yours sincerely

NHS Confidential: Personal data about a patient

Our ref : DTAY/1541394
Your ref
Date : 10 December 2020

carpenters scotland

3rd Floor
147 Blythswood Street
Glasgow
G2 4EN

DX: GW31 Glasgow
www.carpentersgroup.co.uk

The Cairns Practice
Shettelston Health Centre
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Glasgow
G32 9AS

Direct Dial: 0141 328 6272
Direct Fax: 3939
E-mail: dtay@carpentersgroup.co.uk
Contact: David Taylor

Dear Sirs

Our Client	**: Michael Keown**
Address	**: 48 Glencorse Street Glasgow G32 6JQ**
Date of Birth	**: 01/12/1955**
Accident Date	**: 10 February 2020**

We write in reference to our client and your patient.

It is our understanding that our client has recently had an MRI scan and we would appreciate it if you could please forward the results to us for our consideration if possible.

Thank you for your assistance.

Yours faithfully

Carpenters Scotland Ltd

CARPENTERS SCOTLAND LIMITED

Please ensure that our reference 1541394 is quoted on all correspondence.

ENCL: MEDICAL RECORDS CONSENT FORM COMPLETED BY MICHAEL KEOWN.

DTAY

Consent form

(Releasing health records under General Data Protection Regulation)

14 JUL 2020

About this form

In order to proceed with your claim, your solicitor may need to see your health records. Solicitors usually need to see all your records as they need to assess which parts are relevant to your case. (Past medical history is often relevant to a claim for compensation.) Also, if your claim goes ahead, the person you are making the claim against will ask for copies of important documents. Under court rules, they may see all your health records. So your solicitor needs to be familiar with all your records.

Part a – your, your solicitor's and the appropriate health professional's details

Your name:	MR MICHAEL KEOW
Your address:	48 GLENCORSE ST CARNTYNE GLASGOW G32 6JQ
Solicitor's name:	DAVID TAYLOR
Solicitor's address:	CARPENTER SCOTLAND
Health professional's name:	CRAIGS PRACTICE
Health professional's address:	SHETTLESTON HEALTH CENTRE OLD SHETTLESTON RD GLASGOW G32

Part b – your declaration and signature

Please see the Notes for the client' over the page before you sign this form.

To the health professional

I understand that filling in and signing this form gives you permission to give all my health records to my solicitor whose details are given above.

Please give my solicitor copies of my health records, in line with General Data Protection Regulation, within 30 days.

Your signature: [signature] Date: 08/07/20

Part c – your solicitor's declaration and signature

~~Please see the 'Notes for the solicitor' over the page before you sign this form.~~

To the health professional

I have told my client the implications of giving me access to his or her health records. I confirm that I need the full records in this case.

Solicitor's signature: [signature] Date: 16/12/20

Our Reference: {FE02}[&If FE02<>US03]/[US03][&EndIf]/[ADN21]

Keown Michael CHI: 0112556132

Clinic Letter

NHS
Greater Glasgow and Clyde

West Glasgow ACH - Yorkhill
Dalnair Street
Glasgow
G3 8SJ
0141 211 2000

Dr. PJ Rogers
The Cairns Practice
Shettleston Health Centre
420 Old Shettleston Road
Glasgow
G32 7JZ

Main Switchboard:	
Department:	Orthopaedics
Contact Tel:	
Enquiries to:	
Letter Date:	10/12/2020
Reference:	JL/KML
Dictated Date:	10/12/2020
Transcribed Date:	10/12/2020

Dear Dr. PJ Rogers,

Michael Keown; D.O.B: 01 Dec 1955; CHI: 0112556132
48 Glencorse Street, Glasgow, Lanarkshire, G32 6JQ

Attendance: Specialty - Orthopaedics ; Clinic - WIPHSPORI-ORTHO PHYSIO SPINE JENNY LOVE TELEPHONE CLINIC
Date and Time of Appointment - 10/12/2020 10:00

Clinical Comments:
Outcome: Discharged, referred on for Physiotherapy

Diagnosis: Low back pain, resolved right leg symptoms

Thank you for your referral of this 65 year old gentleman to the Spinal Clinic today. This consultation was undertaken via telephone due to COVID-19 and this gentleman was triaged through our Virtual Clinic and had an MRI scan organised prior to his attendance here.

His main complaint is of low back pain which is a toothache and constant in nature and he reports that he has had a longstanding history of low back pain, but not to this extent. He reports that this has become more problematic since he was involved in a road traffic accident in February 2020. He was previously aware of a numbness in the whole non-dermatomal distribution of the right leg. There were no symptoms in the left leg. This has all but settled and he is only aware of a very seldom lateral thigh paraesthesia and discomfort. He reports no bladder or bowel signs and no saddle anaesthesia. He has had no Physiotherapy for this complaint. The back is the main problem with the right leg symptoms being so sporadic, they are not problematic.

The MRI scan shows there to be moderate central canal stenosis at the 4/5 level with some nerve root crowding and slight impingement on the L5 nerve roots.

As his symptoms of the right leg have settled to a significant degree, I do not feel that any further Orthopaedic intervention is required for this gentleman. He is in agreement with this but I have also

reassured him that should his leg symptoms recur or he notes any bilateral leg symptoms, we would be more than happy to review him at the clinic.

Yours sincerely,

Jennifer Love

Advanced Physiotherapy Practitioner (Orthopaedics)

Electronically Signed: Physiotherapist Jennifer Love, Physiotherapist

cc.

UK Covid-19 Test Report

Result

SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) detection result **negative**

Patient Details

Surname	Keown
Forename	Michael
CHI	0112556132
Date of birth	1955-12-01
Sex	Male
Address	48 GLENCORSE STREET GLASGOW G326JQ

Specimen Details

Specimen Processed Date	22-10-2020 21:49
Test Start Date	22-10-2020 12:52
Test End Date	22-10-2020 12:53
GP Practice	46081
Specimen Number	AAE71782721
Administration Method	health_care_professional

End of Report

Report Date: 23/10/2020

Flu is serious.

With COVID-19 around, it's more important than ever to get the flu vaccine.

NHS SCOTLAND

CHI: 01/12/19556132

306000/013897

MICHAEL M KEOWN
48 GLENCORSE STREET
GLASGOW
G326JQ

0000000001389700101100000

Dear Sir/Madam

The flu vaccine is offered in autumn to everyone aged 65 or over in Scotland to help protect them against influenza (the flu virus). NHS Scotland strongly recommends you get your flu vaccine this year. This is for three reasons:

1. Flu can be serious and life threatening. Every year thousands of people in Scotland are hospitalised because of flu. **People aged 65 or over are at particular risk.**
2. To reduce the risk of you spreading flu to friends and family.
3. To help our NHS avoid the pressure that a spike in seasonal flu would put on top of COVID-19.

Is it safe to go to my flu vaccine appointment?

- Getting your flu vaccine is one of the most important reasons for leaving your home.
- If you are aged 65 or over, the risk of getting seriously ill with the flu virus is greater than the risk of going to get your vaccine.
- During vaccination, strict infection prevention and control measures will be in place.
- Please wear a face covering while travelling to and from and during your appointment and remember to wash your hands regularly.

What should I do next?

Please attend the allocated appointment for immunisation. The appointment details are:

Date: 09/10/20 **Time: 03.00 P.M.**

Where to attend: SHETTLESTON HLTH CTR, MAIN ENTRANCE, OLD SHETTLESTON ROAD, SHETTLESTON, GLASGOW, G32 7JZ

If you are unable to attend or if you have any queries regarding this appointment, please telephone 01412014180.

Please bring this letter along with you to your immunisation appointment

Also, if you were previously advised to shield to protect you from COVID-19, all of your household members can also have a free flu vaccine. Visit www.nhsinform.scot/flu or call 0800 22 44 88 for more information on this.

If you are showing symptoms of COVID-19 before your vaccination, please contact your health professional to reschedule your appointment.

This year, more than ever, please help protect yourself, others and our NHS

For more information in a range of languages, videos and a link to the patient information leaflet, visit **www.nhsinform.scot/flu**

Public Health Scotland

NHS Confidential: Personal data about a patient

Date: 9/10/20 Vaccine: TRIVALENT

BATCH NUMBER: 274925BIA

Site of Injection (tick below)

☑ Left Arm ☐ Right Arm

Immuniser Name: NIRUNT

Immuniser Signature: [signature]

Practice Code of Patient: G4608

mi • 323828

CLINICAL INFORMATION

History of presenting complaint
Presenting complaint

Description: SOB

Comment: Duty - tel -> FTF
spoke with partner Michael in background
2 recent abx and steroids - finished 2/8/24
was much better, then worse again overnight last night

SOB, not much cough
has called wife home from work
Spo2 93-96%
HR 68

FTF rv
attends with partner

Dyspnoeic, increased wob
Spo2 98%
HR 65
temp 37.1
chest clear
peripheral oedema- reports this is new

sob when looks down or lies down

pt clear this is different from recent infective symptoms.

Imp: ?ccf ?PE

advised to attend GRI AAU - referred medics

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history
Pre-existing conditions (High & medium priority - all)

Description	Comment	Modifier	Date of onset	Date recorded
Shortness of breath	[TRUNCATED]Duty - tel -> FTF spoke with , in background 2 recent abx and steroids - finished 2/8/24 was much better, then worse again overnight last night SOB, not much cough has calle	-	05-Aug-2024	05-Aug-2024
Chest infection NOS	[TRUNCATED]seen with week coughing green stuff no blood wt stable (obese) soboe when goes upstairs v breathless no fever/ no vomit drinking and puing ok using inhalers+++ f2f this pm oe sa	-	24-Jul-2024	24-Jul-2024
Chronic kidney disease stage 3	-	-	02-Mar-2023	02-Mar-2023
Discussion	[TRUNCATED] he gave permission egfr..suggest stop nsaid she says allergic pcm nausea and vomiting only taking 300mg gabapentin daily inc bd plts up a bit..has been off aspirin restart rp	-	31-Jan-2023	31-Jan-2023
Guttate psoriasis	[TRUNCATED]last few weeks extensive rash on arms, back , groin thighs partner doesnt have not itchy seemed occur after sore throat oe ?guttate psoriasis says v tired since covid soboe but sats bette	-	25-Jan-2023	25-Jan-2023
Headache	[TRUNCATED]Tel. covid positive. Day 10. ongoign headchae. reoslved after a fewdays but came back worse	-	29-Apr-	29-Apr-

	and present past 4-5 days. all the time. all over but mainly frontal. constant headcahe, thumpi		2022	2022
Productive cough-yellow sputum	[TRUNCATED]LFT +ve yesterday doesn't leave house stays with partner feels slightly breathless - like start of a chest infection checked sats - o2sat:93%, - readings generally 93-98 p. 78 agreed try	-	20-Apr-2022	20-Apr-2022
Spinal stenosis	- moderate central canal stenosis at the 4/5 level and slight impingement on the L5 nerve roots, Orthopaedic OP Yorkhill ACH	-	10-Dec-2020	10-Dec-2020
Low back pain	[TRUNCATED]C19(tel). R Request for amitrityline. Recent flare up of back pain - attended ED in August - given Ralvoand diazepam Then referred for OP MRI via ortho spine. Back pain s	-	04-Nov-2020	04-Nov-2020
Pain in lumbar spine	-	-	27-Aug-2020	27-Aug-2020
MRC Breathlessness Scale: grade 4	-	Continuing	05-Apr-2018	05-Apr-2018
Cough	[TRUNCATED]hx of COPD - feels this is poorly controlled of late. Cough 2/52, worse in past 7/7. Productive of green sputum, no haemoptysis. Breathless and wheezy. No chest pain, no fevers. Parterner	-	12-Feb-2018	12-Feb-2018
Cough	-	-	12-Feb-2018	12-Feb-2018
Erectile dysfunction	[TRUNCATED]-issues since commencing gabapentin. convinced it is secondary to this as decided to come off of it for a few days and was fine. difficulties with pain control though and feels unable to	-	22-Nov-2017	22-Nov-2017
Cervicalgia - pain in neck	[TRUNCATED]neck pain for many years intermittently with assoc paraesthesia in hands. seen neurology in 2011 who arranged nerve conduction tests which were normal. MRI scan at that time showed osteop	-	22-Nov-2017	22-Nov-2017
Cough	[TRUNCATED]cough for 1-2 weeks. feeling SOB/wheezy at times. no chest pain. thick clear sputum, no blood. known COPD. o/e apyrexial sats 97% HR 87 chest clear, slightly reduced AE globally, no wheez	-	22-Nov-2017	22-Nov-2017
Hand pain	Both first carpometacarpal joints. R>L. Previously xrayed - degenerative changes. Not on portal. For Xray both hands. Await result - ?refer hand clinic.	-	25-Apr-2017	25-Apr-2017
Cervicalgia - pain in neck	Big improvement with gabapentin. Continue on repeat.	-	25-Apr-2017	25-Apr-2017
Cervicalgia - pain in neck	[TRUNCATED]Discussed options. Did not receive follow-up appt for Pain service in September. Not enthusiastic about returning there at present. On amitriptylline 50mg nocte and sleeps well with this.	-	28-Mar-2017	28-Mar-2017
Cervicalgia - pain in neck	Spasms. No sphincter dysfunction. No worsening of paraesthesia in hands. Unable to tolerate paracetamol or opioids. For further appt to discuss options - ?refer back to neurology.	-	14-Mar-2017	14-Mar-2017
Chest infection NOS	Purulent productive cough. wheeze throughout lungfields. SaO2 97% amoxicillin and prednisolone prescribed.	-	14-Mar-2017	14-Mar-2017
H/O: asthma	[TRUNCATED]Has prev stopped seretide thinking related to vasculitis rash and chest pain at different times. Appropriate use of salbutamol & slight xs tiotropium. Jan 10 noted mild obstruction no COP	-	09-Jun-2016	09-Jun-2016
Back pain without radiation NOS	[TRUNCATED]long discussion wi' needs pain killers adamant cannot take paracetamol or any opiods vomiting and dizzy aware nsaids not good choice recent gastroscopy showed gastritis also renal f	-	29-Apr-2016	29-Apr-2016
Gastritis unspecified	, GRI	-	21-Mar-	21-Mar-2016

			2016	
[D]Abdominal pain	[TRUNCATED]CP better since last visit. No palpitations, no dizziness, no increased SoB. Abdo pain ongoing. Mainly on activity. "Severe burning pain" lasting a few minutes. Relieved by rest. No radia	-	15-Feb-2016	15-Feb-2016
Night cough absent	-	-	25-Jan-2016	25-Jan-2016
Body Mass Index	33.6	Continuing	22-Jan-2016	22-Jan-2016
Healthy diet	planning on addressing weight	-	22-Jan-2016	22-Jan-2016
MRC Breathlessness Scale: grade 2	-	-	22-Jan-2016	22-Jan-2016
Breathlessness symptom	[TRUNCATED]Not taking inhalers at present as thought responsible for chest pain. Keen on changing back to old inhalers in case this is the cause. Explained this is unlikely as it should not be going	-	18-Jan-2016	18-Jan-2016
Chest pain	[TRUNCATED]Pain in chest for last 3-4 weeks. Long term issues with acid reflux. On Omeprazole. Has doubled dose since symptoms started. Stopped inhalers as he felt they were the cause. Had not discu	-	18-Jan-2016	18-Jan-2016
Chronic obstructive pulmonary disease	[TRUNCATED]known COPD with asthma component. past few days inc cough with green spit, more sob on exertion with wheeze. no fever. no vomit. E+D ok. otherwise well. ran out of seretide at weekend. OE	-	31-Mar-2015	31-Mar-2015
Cataract	- left eye, Ophthalmology OP, Stobhill Hospital	-	21-Nov-2014	21-Nov-2014
O/E - temperature level	36.40 degC.	-	16-Jul-2014	16-Jul-2014
O/E - pulse rate	Pulse: 72.	-	16-Jul-2014	16-Jul-2014
Breathlessness symptom	[TRUNCATED]2w hx of worsening breathlessness also worsening leg oedema and swollen abdomen had been see in may with leg oedema, improved with furosemide ecg and cxr organised which were normal no hx	-	16-Jul-2014	16-Jul-2014
Referral to nurse	UEs please	-	08-Jul-2014	08-Jul-2014
Referral to nurse	UEs eGFR borderline last check. Thank you.	-	27-May-2014	27-May-2014
Referral to nurse	FBC UE LFT TFT ESR CRP	-	20-May-2014	20-May-2014
Chronic low back pain	[TRUNCATED]left with chronic low back pain after RTA in 1980s also has chronic leg pain and neck pain known OA on nsaid, not controlling low back pain, worse on movement no weight loss no urinary sy	-	14-Mar-2014	14-Mar-2014
Fungal nail infection	[TRUNCATED]been treated with terbinafine, helped, ran out and nails worse says nails were thick and yellow, also affecting toes on hands nails v ridged, slight yellow discolouration, no onycolysis a	-	14-Mar-2014	14-Mar-2014
C/O: a rash	behind ears present for long time , comes and goes slightly scaly erythema behind ears looks dermatitic with slight fungal element treat topically	-	14-Mar-2014	14-Mar-2014
Referral to nurse	please check FBC, U&E, LFT, vitamin B12, folate, ferritin please	-	14-Mar-2014	14-Mar-2014
Sore throat symptom	and macular erythmatous rash. ? Strep throat. Swab taken and commenced on pen V	-	17-Sep-2013	17-Sep-2013

Cervicalgia - pain in neck	[TRUNCATED]pain in neck for years known to have OA also pain in legs from prev RTA NSAID stopped due to gastritis says cant have paracetamol, tramadol, codeine, dihydrocodeine- all make him vomit an	-	10-Sep-2013	10-Sep-2013
C/O: a rash	[TRUNCATED]3 weeks itchy rash over torso intermittent raised lumps, last 2 days then settle to small red blanching mark not active a present no obvious triggers no hx of skin disease no new cosmetic	-	10-Sep-2013	10-Sep-2013
Cough	[TRUNCATED]4 weeks of cough thick white sputum more sob and wheexy had amox then steriods then gastritis and did not finish steriods using inhalers more no fever PEFR excellent today hx of asthma o/	-	10-Sep-2013	10-Sep-2013
Cough	tummy better. can restart asp with double dose ppi. tests all fine, try steroid for wheeze. spit gone	-	20-Aug-2013	20-Aug-2013
Chest infection NOS	cxr and bloods	-	06-Aug-2013	06-Aug-2013
Tenderness of epigastrium	stop asp for 2/52. switch diclo to etod. see 2/52. double up ppi.	-	06-Aug-2013	06-Aug-2013
Referral to nurse	please do ues. lfts. fbc/esr	-	06-Aug-2013	06-Aug-2013
Rosacea	3 month hx - spots/cysts affecting face and neck. can be painful. plan - try topical metronidazole, worsening advice given	-	04-Oct-2012	04-Oct-2012
Discussion	did not tolerate statin. making changes to diet and on stanols to help reduce cholesterol.	-	05-Sep-2012	05-Sep-2012
Referral to nurse	Please check fasting blood glucose	-	24-Jul-2012	24-Jul-2012
Shortness of breath	and hyperventilation on modest exertion	First ever	17-Jul-2012	17-Jul-2012
O/E - chest examination normal	-	First ever	17-Jul-2012	17-Jul-2012
Athlete's foot	-	First ever	17-Jul-2012	17-Jul-2012
C/O - a headache	6 weeks	First ever	17-Jul-2012	17-Jul-2012
[D]Hyperventilation	-	First ever	17-Jul-2012	17-Jul-2012
Productive cough - green sputum	-	First ever	17-Jul-2012	17-Jul-2012
Back pain without radiation NOS	2/12. pain left buttock, not in leg no bladder sxs. o/e stiff back. slr r = l = 80 degs. adv exercise could try physio.	Continuing	15-Jun-2011	15-Jun-2011
[X]Benign coital headache	recent onset, no other episodes, background tension headache. adv to stop diclof as has gi upset and gen lethargy. amitrip might help arthritic pain and headache.	Continuing	15-Jun-2011	15-Jun-2011
Referral to nurse	please check u and es lfts and fbc. long term sue nsaid.	Continuing	15-Jun-2011	15-Jun-2011
Has numbness	[TRUNCATED]bilateral arms, intermittent. getting worse over past few months. worse at night. longstanding neck pain after fracture in motorbike RTA. no weakness. o/e neuro exam upper limbs normal. t	-	24-Nov-2009	24-Nov-2009
Cough	[TRUNCATED]worsening over past few months. productive clear spit. worse at night. Had diagnosis of asthma but heavy smoker 20/day for 30 years. ?element COPD. no weight loss. no haemoptyisis. o/e wh	-	24-Nov-2009	24-Nov-2009
Chest infection NOS	[TRUNCATED]cough greeen sputum for about 2 weeks. getting worse - not much sleep last 2 nights. hasnt felt feverish though . has commented on him looking flushed. generalised muscle pains. coa	-	25-Sep-2009	25-Sep-2009