

Palmer Craig D

CHI: 2707683094

Emergency Attendance Letter



Emergency Department
Royal Alexandra Hospital
Corsebar Road
Paisley
Renfrewshire
PA2 9PN

Dept. Contact Details:
Tel: 0141 314 6195
Fax: 0141 887 1386
Email:

Date Completed: 29/04/2014

Consultant: Dr Iain Young

DP Meighan
The Oaks Medical Practice
1st Floor barrhead health & care c
213 Main Street
Barrhead
Glasgow
G78 1SW

Dear DP Meighan

Re: **Palmer Craig D**
104 Crossmill Avenue
Glasgow G78 1AX

DOB: 27/07/1968

CHI: 2707683094

Attended on: 29/04/2014 at 10:19 hrs.

Departed on: 29/04/2014 at 12:09 hrs.

Discharge Type: 01a - Discharge with no follow up

Destination: Private residence

Previous ED Attendance in last 12 months: 0

Presenting complaint
inj to lower back

Nursing Assessment:

Picked up child last Thursday - felt pain in back shortly after - attended GP - commenced on tramadol 100mg, diclofenac and diazepam 5mg - no relief. Pain worsening.

Investigations in ED: None

Palmer Craig D

CHI: 2707683094

Diagnosis:

Diagnosis	Side	Site
Low back pain		

Procedures: None

Immunisations: None

Dispensed Medication:

Dispensed Medicine	Formulation	Dose	UOM	Route	Frequency	Duration
Co-codamol 30/500 Tablets	Tablets	0	TABS	Oral	No Frequency Defined	No duration defined
Ibuprofen Tablets	Tablets	0	MG	Oral		No duration defined

Clinician Notes:

Back pain started 5/7 ago after bending over to pick child up. Examination normal. No altered bowel or bladder habits. Discharged with analgesia.

Followup:

Highly sensitive: N

Consent for sharing withheld: N

Yours sincerely,

Yan Mei Goh

Doctor

Copies to:

1. DP Meighan (GP)

School Address:

Fax from :

25-04-14 08:59

Pg: 1

NHS 24 FAX REPORT

NHS 24 ID:	Call ID: 14480499	Site:	Glasgow
CHI #:	2707683094	Caller Name:	
Surname:	PALMER	Date/Time Call Received:	25/04/2014 9:43
Forename:	CRAIG	Date Call Completed:	
DOB:	27/07/1968	Time Call Completed:	
Gender:	Male	Call Priority:	CS0
Address:	104 Crossmill Avenue Barrhead Glasgow	Call Reason:	BACK PAIN 24 HRS
	G78 1AY	Current Location:	104 Crossmill Avenue Barrhead Glasgow
PH NO:	07415220464 (Return)		G78 1AY
		Special Directions:	Front Door
		Current PH NO:	07415220464 (Return)
Care Provider:	MEIGHAN, DAVID	Care Provider Details:	1ST FLR HEALTH & CARE CNT 213 MAIN STREET BARRHEAD G78 1SW Scotland
Temporary Resident:	No		

Referred To:

Recommended Action:

CLINICAL SUMMARY

SEVERE PAIN IN LOWER BACK FOR 1 DAY AND INITIALLY TWINGE IN BACK WHEN BENT FORWARDS NOW
SEVERE PAIN IMMOBILISING PT. TAKING REGULAR IBUPROFEN AND SOLPADOL. ADVISE GP4

PAST MEDICAL HISTORY

MEDICAL PROBLEMS

NIL

MEDICATIONS

NIL

ALLERGIES

NIL

Referred Clinical Notes:

T:

P:

R:

BP:

Print Name:

Signature:

Acute Services Division

Surgery and Anaesthetics Directorate

Department of Orthopaedic Surgery
Western Infirmary
Dumbarton Road
Glasgow
G11 6NT



Secretary Tel: 0141 211 2422 (Mrs Stephanie Brown)
Secretary's Fax: 0141 211 2466
Email Address: stephanie.brown@ggc.scot.nhs.uk

Our Ref: UGF/EY

MR UMBERTO G FAZZI'S ORTHOPAEDIC CLINIC - 09/12/2013

Typed: 12/12/2013

Dr. Meighan
The Oaks Medical Practice
1st Floor Barrhead Health
Care C
213 Main Street
Barrhead

Dear Dr Meighan

Patient name: Mr Craig D Palmer DOB 27/07/1968 CHI: 2707683094 Hospital Number: 2707683094
Patient Address: 104 Crossmill Avenue Barrhead Glasgow Lanarkshire G78 1AX

Mr Palmer came back to see me. You will recollect when we last saw him we referred him to Mr Dregghorn for arthrodesis of his shoulder as he previously offered him this procedure. He apparently saw Mr Dregghorn last week and his name has been placed on the waiting list for his surgery. We also referred him for nerve conduction studies as he had some neurological symptoms in his arm. These have actually improved quite significantly since we last saw him. There is no evidence of any peripheral nerve compression lesion. He was apparently informed that there may be some irritations at the nerves in his neck although this isn't reported in the formal report.

It wouldn't be unexpected for him to have some irritation of his nerve roots given that his shoulder function is so poor, he is probably going to set producing mild secondary to mechanical neck pain. There is no surgical issue here.

He had the nerve conduction studies recently at the Southern and in fact was informed of the results at the time. There is no significant peripheral compression.

As he is now on Mr Dregghorn's waiting list I have discharged him from my own clinic.

Yours Sincerely

A handwritten signature in black ink, appearing to be 'U. Fazzi', written over a horizontal line.

UMBERTO G FAZZI FRCS (ORTH)
CONSULTANT ORTHOPAEDIC SURGEON

Delivering better health

www.nhsggc.org.uk

40369

Acute Services Division

Clyde Acute Directorate

DEPARTMENT OF SURGERY

Consultant: Miss L J Chisholm

Date: 24th July 2013

Dictated: 24th July 2013

Ref: LC/AC/226269

Dr Naven
Barrhead Health Centre
203 Main Street
Barrhead
G78 1SA

Royal Alexandra Hospital
Corsebar Road
Paisley
PA2 9PN
Tel No: 0141 887 9111



Sec: Mrs A Christie
Direct ☎: 0141 314 7370
Fax: 0141 314 6834

Dear Dr Naven *Tom*

Re:- Craig Palmer CHI:- 2707683094
104 Crossmill Avenue, Barrhead, G78 1AY

I am advised that this gentleman cancelled his colonoscopy due to his wife going into early labour.

He has asked that his name be removed from the waiting list for the time being and will contact us when things have settled down a bit more at home.

Yours sincerely

L J Chisholm
Miss L J Chisholm
Consultant Colorectal Surgeon

Cc Mrs M Butterly, Endoscopy Co-ordinator, RAH

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www.nhsggc.org.uk

Acute Services Division

Surgery and Anaesthetics Directorate

Department of Orthopaedic Surgery
Western Infirmary
Dumbarton Road
Glasgow
G11 6NT



Secretary Tel: 0141 211 2422 (Mrs Stephanie Brown)
Secretary's Fax: 0141 211 2466
Email Address: stephanie.brown@ggc.scot.nhs.uk

Our Ref: NM/HB

MR UMBERTO G FAZZI'S ORTHOPAEDIC CLINIC - 08/07/2013

Typed: 23/07/2013

Dr D Meighan
The Oaks Medical Practice
1st Floor Barrhead Health
Care C
213 Main Street
Barrhead

Dear Dr Meighan

Patient name: Mr Craig D Palmer DOB 27/07/1968 CHI: 2707683094 Hospital Number: 2707683094

Patient Address: 104 Crossmill Avenue Barrhead Glasgow Lanarkshire G78 1AX

Diagnosis: Left septic shoulder with persistent stiffness and pain
Outcome: Referral back to Mr Dreghorn plus nerve conduction studies

This gentleman turned up at Mr Fazzi's clinic today after having previously seen Mr Hussain who had an onward referral to Mr Dreghorn.

As you know, he has had previous deep latent sepsis within the left shoulder due to previous surgery. He had previously seen Mr Dreghorn with a view to arthrodesis back in 2010 but had decided against this.

He is now presenting with increasing pain and discomfort and has decided that he would like to proceed with the operation.

Of note, he is also complaining of some increased numbness and tingling in the C5/6 distribution of his right left upper limb. The onset has been over the past 4-5 months with no initiating factors that I can delineate today.

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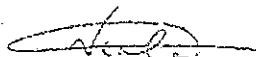
2/2

On previous examination, as you know, he has practically a fixed left shoulder with very little range of movement and previous scar. He does feel he had decreased sensation in the C5 and C6 nerve root regions but there was no motor deficit.

In essence, this is not an operation which Mr Fazzi is able to offer and as such we are going to refer him back to Mr Dreghom for his consideration of arthrodesis. We are going to refer him to the Southern General for nerve conduction studies due to his new onset of neurological symptoms

We do not plan to see him back but should he run into any problems would be happy to do so.

Yours sincerely



Neal Miller
Clinical Lecturer in Orthopaedics

Acute Services Division

Clyde Acute Directorate

Royal Alexandra Hospital

Corsebar Road

Paisley

PA2 9PN

Tel No: 0141 887 9111



DEPARTMENT OF SURGERY

Consultant: Miss L J Chisholm

Date: 12.07.13

Dictated: 09.07.13

Ref: LC/DV/CM/226269

Sec: Mrs A Christie

Direct ☎: 0141 314 7370

Fax: 0141 314 6834

Dr Naven
Barrhead Health Centre
213 Main Street
Barrhead
G78 1SW

Dear Dr Naven

CRAIG PALMER - CHI 2707683094
104 CROSSMILL AVENUE, BARRHEAD, G78 1AY

Thank you for your referral letter regarding Craig who was appointed to Miss Chisholm clinic today.

He presents with a couple of year history of diarrhoea and PR bleeding. He says that he empties his bowels approximately 5 times a day and he experiences fresh rectal bleeding. In addition to this he is aware of "pressure sensation" in his lower abdomen. He does not complain of any mucus PR.

On looking through the case notes this gentleman has been a patient of Mr McCartney regarding his chronic anal fissure and fistula.

On clinical examination his abdomen was soft and non tender. Digital rectal examination revealed some thickening probably due to residual scarring from his fissure however there was no other palpable abnormality.

This gentleman warrants a colonoscopy. I have explained to him the nature of the procedure and inherent risks mainly bleeding and perforation. Oral bowel prep has been dispensed today. We will let you know what transpires.

Kind regards.

Yours sincerely

A handwritten signature in black ink, appearing to be 'D Vass'.

MR DAVID VASS
ST5 IN GENERAL SURGERY

Cc: Margaret Butterly
Endoscopy Co-ordinator
RAH

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40374

Statement of Fitness for Work For social security or Statutory Sick Pay

Patient's name

☒ Mr, Mrs, Miss, Ms Laig Palmer

I assessed your case on:

3 15 13

and, because of the following condition(s):

Shoulder injury

I advise you that:

- ☒ you are not fit for work.
☐ you may be fit for work taking account of the following advice:

If available, and with your employer's agreement, you may benefit from:

- | | |
|--|--|
| ☐ a phased return to work | ☐ amended duties |
| ☐ altered hours | ☐ workplace adaptations |

Comments, including functional effects of your condition(s):

This will be the case for

13 weeks

or from

10 15 13 to 1 1

I will/will not need to assess your fitness for work again at the end of this period.
(Please delete as applicable)

Doctor's signature

[Signature]

Date of statement

3 15 13

Doctor's address

DR. T. J. NAVEN
C3953-5
DR. D. P. MEIGHAN
3863-6
THE OAKS MEDICAL PRACTICE
BARRHEAD HEALTH & CARE CENTRE

213 MAIN STREET
BARRHEAD G78 1SW.

Med 3 04/10

Hospital use only	Clinic	Day Date	Time	Hospital No.
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REFERRAL LETTER**MEDICAL IN CONFIDENCE**

GGC General Referral Protocol (Glasgow, vR15.0)

REFERRAL TO	
Dermatology GGC General Referral	— Consultant / receiving practitioner and/or specialty clinic
Royal Alexandra Hospital Corsebar Road Paisley PA2 9PN	— Hospital and hospital address
	Hospital location code. C418H
	Email address -
Urgency of referral	ROUTINE
Date of referral	30-May-2014
Date sent	30-May-2014

PATIENT DETAILS		Patient's address
Surname	Palmer	104 Crossmill Avenue BARRHEAD G78 1AY
Forename(s)	Craig	
Title	Mr	
Sex	Male	Contact number(s)
Date of birth	27-Jul-1968	Voice: 07415220464 joanne
CHI no.	2707683094	
Area of Residence	-	

101007312049R

Unique Care Pathway Number: 101007312049R

REGISTERED GP DETAILS		Practice address
Name	Dr David Meighan	The Oaks Medical Practice Barrhead Health & Care Centre 213 Main Street Barrhead G78 1SW
GMC code	3559057	
GP code	38636	
Practice name	Oaks Medical Centre	
Practice code	87108	
		Contact number(s)
		Voice: 0141 800 7085 Facsimile: 0141 881 6704 E-mail: anne.traquair@nhs.net

REFERRING GP DETAILS		Practice address
Name	Dr. Thomas Naven	1st Floor Barrhead Health & Care C 213 Main Street Barrhead G78 1SW
GMC code	2697859	
GP code	39535	
Practice name	The Oaks Medical Practice (87108)	
Practice code	87108	
		Contact number(s)
		Voice: 0141 800 7085

CLINICAL INFORMATION**History of presenting complaint****Presenting complaint**

Description: Alopecia areata

Comment: Many thanks for seeing this 45 year old gentleman.

Craig first noticed this on the beard area of his face about six weeks ago. But now there are many such areas on his scalp. But I noticed that the areas of baldness do not have a smooth base. Insofar as Craig is aware there is no family history.

Consequently, I would be most grateful if you could see Craig to offer him advice and support.

Best wishes

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

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

<u>Description</u>	<u>Comment</u>	<u>Date of onset</u>	<u>Date recorded</u>
Depressed	-	11-Dec-2012	11-Dec-2012
Other infections involving bone, of the shoulder region	(joint) -sinus in axilla discharging pus. [Chronic].	29-Jul-2010	29-Jul-2010
Infection and inflammation due to internal prosthetic device	(chronic) Shoulder-caused by screw?	04-Jul-2006	04-Jul-2006
Fistula-in-ano	posterior position, anterior to sacrum, left of midline.	14-Mar-2000	14-Mar-2000
Sepsis	(perianal)	08-Dec-1999	08-Dec-1999
Chronic anal fissure	(biopsy obtained) [large, posterior midline] ?CROHNS	15-Nov-1999	15-Nov-1999
O/E - skin sinus NOS	(left axilla) tracking>shoulder	07-Dec-1998	07-Dec-1998
Localised, primary osteoarthritis of the shoulder region (Left)	-related to previous dislocations.	16-Aug-1990	16-Aug-1990

Past procedures (High and medium priority - all)

<u>Description</u>	<u>Comment</u>	<u>Date performed</u>	<u>Date recorded</u>
Removal of screws from bone	x1 from left shoulder.	24-Nov-2009	24-Nov-2009
[SO]Shoulder NEC (Left)	Bankart's procedure.	28-Apr-1986	28-Apr-1986

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

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Fluoxetine Hydrochloride Capsules 20 mg	56	56 capsule	ONE TO BE TAKEN EACH DAY	-	04-Jan-2013	02-Apr-2014

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

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Clobetasone Butyrate Ointment 0.05 %	30	30 GRAM	APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE DAILY	-	01-May-2014	01-May-2014
Co-Codamol 30/500 Caplets	100	100 tablet	1 or 2 Tabs 4 times daily	-	29-Apr-2014	29-Apr-2014
Diazepam Tablets 5 mg	14	14 tablet	1 or 2 Tabs Daily	-	25-Apr-2014	25-Apr-2014

Tramadol Hydrochloride M/R tablets 100 mg	50	50 tablet	2-3 DAILY	-	25-Apr-2014	25-Apr-2014
Diclofenac Sodium E/c tablets 50 mg	84	84 TABLET	ONE TO BE TAKEN THREE TIMES A DAY WITH OR AFTER FOOD	-	25-Apr-2014	25-Apr-2014

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Current smoker:		01-May-2012
Current smoker:	Disease: SPICE Basic Health Values, priority=2	05-May-2009
Current smoker:	Disease: SPICE Basic Health Values, priority=2	11-Nov-2008
Current smoker:	Disease: SPICE Smoking, priority=2	21-Aug-2007

Clinical warnings

Additional relevant information

Administrative 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

Patient has disability or requires wheelchair access:No

Referred By:Referring GP

Electronic Attachment Present:No

Signature of referring doctor (or other professional) Date

Acute Services Division

Clyde Acute Directorate

DEPARTMENT OF SURGERY

Consultant: Mr M Vella

Date: 19th March 2013

Dictated: 19th March 2013

Ref: MV/AC/ 414612

Royal Alexandra Hospital

Corsebar Road

Paisley

PA2 9PN

Tel No: 0141 887 9111



Sec: Mrs R Cockburn

Direct : 0141 314 6025

Fax: 0141 314 6834

Mr Craig Palmer
104 Crossmill Avenue
Barrhead
G78 1AX

Dear Mr Palmer

I understand that you failed to attend for your clinic appointment today.

As per current Trust policy I am unable to offer you a further appointment.

Should you still wish to be seen please ask your GP to re-refer you.

Kind regards.

Yours sincerely

A handwritten signature in black ink, appearing to be 'M Vella'.

Mr Mark Vella
Consultant Colorectal Surgeon

cc Dr Meighan, Barrhead Health Centre, 203 Main Street, Barrhead, G78 1SA



Royal Alexandra Hospital
Corsebar Road
Paisley PA2 9PN

19/03/2013

DP Meighan
The Oaks Medical Practice
1st Floor barrhead health & care c
213 Main Street
Barrhead G78 1SW

Dear Dr DP Meighan

Re Patient: Mr Craig Palmer
CHI Number: 2707683094

Consultant: Mr Mark Vella
Speciality: General Surgery
Hospital: Royal Alexandra Hospital
Date and time: 19/03/2013, at 13:30

It would appear from our records that your patient did not keep the above appointment and did not notify us that they would not be attending.

No further appointment will be offered, your patient has been removed from the waiting list and we would require a new referral if you consider this necessary. This is in line with the NHS Greater Glasgow and Clyde's Did Not Attend Policy.

Yours sincerely

Stella Williamson Health Records Manager

Statement of Fitness for Work For social security or Statutory Sick Pay

Patient's name

Mr, Mrs, Miss, Ms

Craig Palma

I assessed your case on:

12/2/13

and, because of the
following condition(s):

Shoulder injury

I advise you that:

☐

you are not fit for work.

☐

you may be fit for work taking account
of the following advice:

If available, and with your employer's agreement, you may benefit from:

☐

a phased return to work

☐

amended duties

☐

altered hours

☐

workplace adaptations

Comments, including functional effects of your condition(s):

This will be the case for

13 weeks

or from

1 / 1

to

1 / 1

I will/will not need to assess your fitness for work again at the end of this period.
(Please delete as applicable)

Doctor's signature

[Signature]

Date of statement

12/2/13

Doctor's address

DR. T. J. NAVEN
C3953-5

DR. D. P. MEIGHAN
3863-6

THE OAKS MEDICAL PRACTICE
BARRHEAD HEALTH & CARE CENTRE

213 MAIN STREET
BARRHEAD G78 1SW.

Med 3 04/10

Hospital use only	Clinic	Day Date	Time	Hospital No.
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REFERRAL LETTER**MEDICAL IN CONFIDENCE**

Request for Colorectal Investigations - Glasgow (Glasgow, v15.0)

REFERRAL TO	
A Vella(Consultant) General Surgery - Colorectal GGC Colorectal	— Consultant / receiving practitioner and/or specialty clinic
Royal Alexandra Hospital Corsebar Road Paisley PA2 9PN	— Hospital and hospital address Hospital location code: C418H Email address: -
Urgency of referral Date of referral	Not applicable 29-Apr-2013 Date sent 01-May-2013

PATIENT DETAILS		Patient's address
Surname	Palmer	104 Crossmill Avenue BARRHEAD G78 1AY Contact number(s) -
Forename(s)	Craig	
Title	Mr	
Sex	Male	
Date of birth	27-Jul-1968	
CHI no.	2707683094	
Area of Residence	-	

101005267521P

Unique Care Pathway Number: 101005267521P

REGISTERED GP DETAILS		Practice address
Name	Dr David Meighan	The Oaks Medical Practice Barrhead Health & Care Centre 213 Main Street Barrhead G78 1SW Contact number(s) Voice:0141 800 7085 Facsimile:0141 881 6704 E-mail:anne.traquair@nhs.net
GMC code	3559057 GP code 38636	
Practice name	Oaks Medical Centre (19000)	
Practice code	87108	

REFERRING GP DETAILS		Practice address
Name	Dr. Thomas Naven	1st Floor Barrhead Health & Care C 213 Main Street Barrhead G78 1SW Contact number(s)
GMC code	2697859 GP code 39535	
Practice name	The Oaks Medical Practice (87108)	
Practice code	87108	

Voice:0141 800 7085

CLINICAL INFORMATION**History of presenting complaint****Presenting complaint**

Description: PR bleeding and faecal incontinence

Comment: Many thanks for seeing Craig.

Unfortunately, he was due to attend your clinic on the 19th March last, but due to the fact that his pregnant wife developed quinsy, and was admitted to hospital during that week, he was unable to attend.

The problem persists and Craig is still eager to be seen.

Consequently, I would be grateful if you could see him once more.

Best wishes

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history**Current medication (Active Repeat medication issued within the last 12 months)**

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Fluoxetine Hydrochloride Capsules 20 mg	56	56 capsule	ONE TO BE TAKEN EACH DAY	-	04-Jan-2013	29-Apr-2013

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

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Ciprofloxacin Tablets 250 mg	10	10 tablet	1 Tab morning and night	-	01-Mar-2013	01-Mar-2013
Fluoxetine Hydrochloride Capsules 20 mg	28	28 CAPSULE	ONE TO BE TAKEN EACH DAY	-	11-Dec-2012	11-Dec-2012

Lifestyle Risks and Alerts / Examinations and Investigations

<u>Description/Question</u>	<u>Result/Comment</u>	<u>Date</u>
Current smoker:		01-May-2012
Current smoker:	Disease: SPICE Basic Health Values, priority=2	05-May-2009
Current smoker:	Disease: SPICE Basic Health Values, priority=2	11-Nov-2008
Current smoker:	Disease: SPICE Smoking, priority=2	21-Aug-2007

Investigations

<u>Description/Question</u>	<u>Result/Comment</u>	<u>Date</u>
Previous similar problems?:	Yes	-
Family history of colorectal cancer?:	No	-
Duration of current symptoms (weeks):	25	-
Rectal bleeding:	No	-
Rectal bleeding bright red:	No	-
Rectal bleeding dark red:	No	-
Change in bowel habit:	No	-
Pain:	No	-
Abdominal pain:	No	-
Weight loss:	No	-
Weight loss :	No weight loss	-
Abdominal Examination:	No	-
Rectal Examination:	No	-

Haematology:

No

Clinical warnings

Additional relevant information

Administrative 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

Patient has disability or requires wheelchair access:No

Referred By:Referring GP

Electronic Attachment Present:No

Signature of referring doctor (or other professional) Date

Acute Services Division

Surgery and Anaesthetics Directorate



DEPARTMENT OF TRAUMA AND ORTHOPAEDICS

The Western Infirmary
Dumbarton Road
GLASGOW
G11 6NT

05/02/2013

Dr David Meighan
The Oaks Medical Practice
1st Floor, Barrhead Health
Care C
213 Main Street
Barrhead

Dear Dr Meighan

Mr Craig Palmer DOB 27/07/1968 ~ Hosp: 64073494H
CHI: 2707683094

Your patient had an appointment to be seen at Mr Fazzi's Clinic on 04/02/2013 but failed to attend or notify us.

No further appointment will be sent and the patient will be removed from the waiting list in accordance with the Waiting List Policy of Greater Glasgow and Clyde.

Yours sincerely

Orthopaedic Outpatients

Hospital use only	Clinic	Day Date	Time	Hospital No.
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REFERRAL LETTER
MEDICAL IN CONFIDENCE
 GGC General Referral Protocol (Glasgow, vR15.0)

REFERRAL TO	
Dr Fazzi(Consultant) Trauma & Orthopaedic - Shoulder GGC General Referral	— Consultant / receiving practitioner and/or specialty clinic
Western Infirmary/Gartnavel General Dumbarton Road Glasgow G11 6NT	— Hospital and hospital address Hospital location code. G516H Email address -
Urgency of referral ROUTINE Date of referral 29-Apr-2013 Date sent 01-May-2013	

PATIENT DETAILS	
Surname Palmer Forename(s) Craig Title Mr Sex Male Date of birth 27-Jul-1968 CHI no. 2707683094 Area of Residence -	Patient's address 104 Crossmill Avenue BARRHEAD G78 1AY Contact number(s) -

101005267273M

Unique Care Pathway Number: 101005267273M

REGISTERED GP DETAILS	
Name Dr David Meighan GMC code 3559057 GP code 38636 Practice name Oaks Medical Centre (19000) Practice code 87108	Practice address The Oaks Medical Practice Barrhead Health & Care Centre 213 Main Street Barrhead G78 1SW Contact number(s) Voice:0141 800 7085 Facsimile:0141 881 6704 E-mail:anne.traquair@nhs.net

REFERRING GP DETAILS	
Name Dr. Thomas Naven GMC code 2697859 GP code 39535 Practice name The Oaks Medical Practice (87108) Practice code 87108	Practice address 1st Floor Barrhead Health & Care C 213 Main Street Barrhead G78 1SW Contact number(s) Voice:0141 800 7085

CLINICAL INFORMATION**History of presenting complaint****Presenting complaint**

Description: Left shoulder

Comment: Many thanks for seeing Craig once more.

Sorry he missed a few appointments. This was due to the fact that his wife was admitted to the hospital for treatment of quinsy.

Sadly, the problem with his left shoulder continues. He is most apologetic he did not attend as he has been waiting for this appointment for so long.

Consequently, I would be most grateful if it was at all possible for you to see him again.

His wife is also pregnant and is due to have a baby in about eight weeks time.

Best wishes

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history**Current medication (Active Repeat medication issued within the last 12 months)**

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Fluoxetine Hydrochloride Capsules 20 mg	56	56 capsule	ONE TO BE TAKEN EACH DAY	-	04-Jan-2013	29-Apr-2013

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

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Ciprofloxacin Tablets 250 mg	10	10 tablet	1 Tab morning and night	-	01-Mar-2013	01-Mar-2013
Fluoxetine Hydrochloride Capsules 20 mg	28	28 CAPSULE	ONE TO BE TAKEN EACH DAY	-	11-Dec-2012	11-Dec-2012

Lifestyle Risks and Alerts / Examinations and Investigations

<u>Description/Question</u>	<u>Result/Comment</u>	<u>Date</u>
Current smoker:		01-May-2012
Current smoker:	Disease: SPICE Basic Health Values, priority=2	05-May-2009
Current smoker:	Disease: SPICE Basic Health Values, priority=2	11-Nov-2008
Current smoker:	Disease: SPICE Smoking, priority=2	21-Aug-2007

Clinical warnings**Additional relevant information****Administrative 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

Patient has disability or requires wheelchair access:No

Referred By:Referring GP

Electronic Attachment Present:No

Signature of referring doctor (or other professional) Date

*The Oaks Medical Practice
Barrhead Health & Care Centre
213 Main Street
BARRHEAD. G78 1SW
Tel. 0141 800 7085
Fax 0141 881 6704*

Dr. Tom Naven

Dr. David Meighan

8th January 2013

TO WHOM IT MAY CONCERN

Dear Sir/madam

*Re Craig Palmer, 104 Crossmill Avenue, Barrhead
Glasgow. G78 1AY DOB 27.07.68*

This is to confirm that Craig is a patient of this practice.

He has been unwell for the past few months, that he is suffering from quite severe depression, to the point where he required antidepressants.

He has been on these antidepressants for a few weeks and has improved slightly. But it is likely that he will be on them for the next six months.

During his depression, he found it very difficult to cope, was extremely unhappy and was a source of distress to the rest of the family.

Apart from that Craig has a chronic infected left shoulder joint for which he is waiting to see an orthopaedic surgeon. cont

Cont.

*Re Craig Palmer, 104 Crossmill Avenue, Barrhead
Glasgow. G78 1AY DOB 27.07.68*

He also has a problem with his bowels for which he is also due to see a colorectal surgeon.

I hope this information is helpful.

Best wishes

Yours sincerely

Dr Tom Naven

Hospital use only	Clinic	Day Date	Time	Hospital No.
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REFERRAL LETTER
MEDICAL IN CONFIDENCE
 GGC General Referral Protocol (Glasgow, vR15.0)

REFERRAL TO	
General Surgery - Colorectal GGC General Referral	— Consultant / receiving practitioner and/or specialty clinic
Royal Alexandra Hospital Corsebar Road Paisley PA2 9PN	— Hospital and hospital address Hospital location code. C418H Email address -
Urgency of referral ROUTINE	Date sent 16-Nov-2012
Date of referral 15-Nov-2012	

PATIENT DETAILS		Patient's address
Surname	Palmer	104 Crossmill Avenue
Forename(s)	Craig	BARRHEAD
Title	Mr	G78 1AY
Sex	Male	Contact number(s)
Date of birth	27-Jul-1968	-
CHI no.	2707683094	
Area of Residence	-	

101004500081B

Unique Care Pathway Number: 101004500081B

REGISTERED GP DETAILS		Practice address
Name	Dr David Meighan	The Oaks Medical Practice
GMC code	3559057 GP code 38636	Barrhead Health & Care Centre
Practice name	Oaks Medical Centre (19000)	213 Main Street
Practice code	87108	Barrhead
		G78 1SW
		Contact number(s)
		Voice: 0141 800 7085
		Facsimile: 0141 881 6704
		E-mail: anne.traquair@nhs.net

REFERRING GP DETAILS		Practice address
Name	Dr. Thomas Naven	1st Floor
GMC code	2697859 GP code 39535	Barrhead Health & Care C
Practice name	The Oaks Medical Practice (87108)	213 Main Street
Practice code	87108	Barrhead
		G78 1SW
		Contact number(s)
		Voice: 0141 800 7085

CLINICAL INFORMATION**History of presenting complaint****Presenting complaint**

Description: PR bleeding and faecal incontinence

Comment: Many thanks for seeing this 45 year old gentleman.

Over the past year, Craig has noticed this and it is causing him great embarrassment. In particular, the faecal incontinence usually happens if he can not get to the toilet in time, but occasionally it might happen in bed, without him being aware of it.

About ten years ago, he had a similar problem, during which he had a colonoscopy and said that he had a repair of his sphincter in the RAH. There was a query as to whether he had crohn's, but evidently it cleared up for many years, but now it has come back.

Craig has an ongoing problem with a painful shoulder, and is waiting to get further surgery for a discharging sinus in the joint.

His only medication is cocodomol. He has not taken any inflammatory for over a year.

His weight is stable, and otherwise healthy.

This is causing Craig great concern and embarrassment, and I would be grateful if you could see him for assessment.

Craig's bowels open about three to four times per day, but in the morning it is often preceded by cramps, at which time he needs to go very quickly.

Best wishes

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history**Current medication (Active Repeat medication issued within the last 12 months)**

No current medications recorded

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

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Co-Codamol 30/500 Tablets	100	100 tablet	TWO TO BE TAKEN UPTO FOUR TIMES A DAY		31-Oct-2012	31-Oct-2012

Lifestyle Risks and Alerts / Examinations and Investigations

<u>Description/Question</u>	<u>Result/Comment</u>	<u>Date</u>
Current smoker:		01-May-2012
Current smoker:	Disease: SPICE Basic Health Values, priority=2	05-May-2009
Current smoker:	Disease: SPICE Basic Health Values, priority=2	11-Nov-2008
Current smoker:	Disease: SPICE Smoking, priority=2	21-Aug-2007

Clinical warnings**Additional relevant information****Administrative 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

Patient has disability or requires wheelchair access:No
Referred By:Referring GP
Electronic Attachment Present:No

Signature of referring doctor (or other professional) Date

*The Oaks Medical Practice
Barrhead Health & Care Centre
213 Main Street
BARRHEAD. G78 1SW
Tel. 0141 800 7085
Fax 0141 881 6704*

Dr. Tom Naven

Dr. David Meighan

15th November 2012

TO WHOM IT MAY CONCERN

Dear Sir/madam

*Re Craig Palmer, 104 Crossmill Avenue, Barrhead
Glasgow. G78 1AY DOB 27.07.68*

This is to confirm that Craig is a patient of this practice.

Unfortunately, he has a chronic problem in that several years ago, his shoulder dislocated, after which he had a pin inserted.

Unfortunately, it turned out very badly. The joint became infected and now he has got a discharging sinus.

The pin was taken out two years ago, but unfortunately, the joint is still infected. He is waiting to see another Orthopaedic Surgeon in the Western Infirmary, to see if he can perhaps fuse the joint, in some way to stop this chronic infection.

Cont.

*Re Craig Palmer, 104 Crossmill Avenue, Barrhead,
Glasgow. G78 1AY DOB 27.07.68*

In addition, Craig has also developed a bowel problem in the past year. He has frequent bowels, blood per rectum and occasionally faecal incontinence. At the moment he is waiting to see a colorectal surgeon.

Both these problems are unlikely to clear up in the foreseeable future, so it is very unlikely that Craig will be fit for work for quite a long time.

Best wishes

Yours sincerely

Dr Tom Naven

Statement of Fitness for Work For social security or Statutory Sick Pay

Patient's name

Mr Mrs, Miss, Ms

Craig Palmer

I assessed your case on:

7 / 11 / 12

and, because of the following condition(s):

Shoulder injury - chronic

I advise you that:

☒

you are not fit for work.

☐

you may be fit for work taking account of the following advice:

If available, and with your employer's agreement, you may benefit from:

☐

a phased return to work

☐

amended duties

☐

altered hours

☐

workplace adaptations

Comments, including functional effects of your condition(s):

This will be the case for

13 weeks

or from

/ /

to

/ /

I will/will not need to assess your fitness for work again at the end of this period.
(Please delete as applicable)

Doctor's signature

[Signature]

Date of statement

7 / 11 / 12

Doctor's address

DR. D. J. MEIGHAN
3553-6
THE OAKS MEDICAL PRACTICE
BARRHEAD HEALTH & CARE CENTRE
213 MAIN STREET
BARRHEAD G78 1SW.

Statement of Fitness for Work For social security or Statutory Sick Pay

Patient's name

Mr, Mrs, Miss, Ms

Craig Palmer

I assessed your case on:

7 / 5 / 12

and, because of the
following condition(s):

Left shoulder injury

I advise you that:



you are not fit for work.



you may be fit for work taking account
of the following advice:

If available, and with your employer's agreement, you may benefit from:



a phased return to work



amended duties



altered hours



workplace adaptations

Comments, including functional effects of your condition(s):

This will be the case for

13 weeks

or from

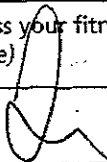
1 / 1

to

1 / 1

I will/will not need to assess your fitness for work again at the end of this period.
(Please delete as applicable)

Doctor's signature



Date of statement

7 / 5 / 12

Doctor's address

DR. T. J. NAVEN
C3953-5

DR. D. P. MEIGHAN
3863-6

THE OAKS MEDICAL PRACTICE
BARRHEAD HEALTH & CARE CENTRE
213 RAFT STREET
BARRHEAD G78 1SW.

Med 3 04/10
029605 06/11

Royal Alexandra Hospital, Corsebar Road,
A & E Department
Paisley PA2 9PN 0141 887 9111

Dr MEIGHAN
1 Paisley Road
BARRHEAD

G78 1HG
June 2, 2011

Dear Dr MEIGHAN,
Re. CRAIG PALMER, 104 Crossmill Avenue, Barrhead, GLASGOW, G78 1AX
Date of Birth 27.07.68 Hospital Number: 2707683094 CHI Number: 2707683094

Your patient attended Royal Alexandra Hospital, Corsebar Road, on the 2 JUN 2011 13:27.

The presenting complaint was: RTA

Triage Information: LT LATERAL MUSCULAR NECK PAIN RESTRAINED
PASSANGER. COLLISION WITH CENTRAL BARRIER • PAIN?

The following investigations were carried out: SHOULDER X-RAY - LEFT

The A&E diagnosis was: SPRAIN - SHOULDER - LEFT

The following treatment was given: Nil

At the conclusion of treatment the patient was: DISCHARGED - NO FOLLOW UP REQUIRED

Follow-up: NO FOLLOW UP ARRANGED

The patient's departure destination was: DISCHARGED

Additional Information: Nil

Yours sincerely,
AMIT ROY
EMERG MED MIDDLE GRADE DOCTOR

Consultants:

Hospital use only	Clinic	Day Date	Time	Hospital No.
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REFERRAL LETTER**MEDICAL IN CONFIDENCE**

GGC General Referral Protocol (Glasgow, vR15.0)

REFERRAL TO	
C. R. Dreghorn(Consultant) Trauma & Orthopaedic - Shoulder GGC General Referral	——— Consultant / receiving practitionerand/orspecialty clinic
Western Infirmary/Gartnavel General Dumbarton Road Glasgow G11 6NT	——— Hospitaland hospital address Hospital location code. G516H Email address -
Urgency of referral ROUTINE Date of referral 31-Oct-2012	Date sent 31-Oct-2012

PATIENT DETAILS		Patient's address
Surname	Palmer	104 Crossmill Avenue BARRHEAD G78 1AY Contact number(s) -
Forename(s)	Craig	
Title	Mr	
Sex	Male	
Date of birth	27-Jul-1968	
CHI no.	2707683094	
Area of Residence	-	

1010044225280

Unique Care Pathway Number: 1010044225280

REGISTERED GP DETAILS		Practice address
Name	Dr David Meighan	The Oaks Medical Practice Barrhead Health & Care Centre 213 Main Street Barrhead G78 1SW Contact number(s) Voice:0141 800 7085 Facsimile:0141 881 6704 E-mail:anne.traquair@nhs.net

REFERRING GP DETAILS		Practice address
Name	Dr. Thomas Naven	1st Floor Barrhead Health & Care C 213 Main Street Barrhead G78 1SW Contact number(s) Voice:0141 800 7085
GMC code	2697859 GP code 39535	
Practice name	The Oaks Medical Practice (87108)	
Practice code	87108	

CLINICAL INFORMATION**History of presenting complaint****Presenting complaint**

Description: Discharging sinus in left shoulder following pin removal two years ago

Comment: Dear Mr. Dreghorn

Many thanks for seeing this 44 year old gentleman.

I wrote to you in May of last year concerning this problem.

As you may remember, in the previous March, following an operation on the same shoulder, it began to ooze pus a few weeks after the operation, and there is a discharge present. He also complains of quite bad pain in the shoulder joint, intermittently.

Consequently, I would be most grateful if you could see Craig for assessment.

Best wishes.

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history**Current medication (Active Repeat medication issued within the last 12 months)**

No current medications recorded

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

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Co-Codamol 30/500 Tablets	100	100 tablet	TWO TO BE TAKEN UPTO FOUR TIMES A DAY	-	31-Oct-2012	31-Oct-2012

Lifestyle Risks and Alerts / Examinations and Investigations

<u>Description/Question</u>	<u>Result/Comment</u>	<u>Date</u>
Current smoker:		01-May-2012
Current smoker:	Disease: SPICE Basic Health Values, priority=2	05-May-2009
Current smoker:	Disease: SPICE Basic Health Values, priority=2	11-Nov-2008
Current smoker:	Disease: SPICE Smoking, priority=2	21-Aug-2007

Clinical warnings**Additional relevant information****Administrative 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

Patient has disability or requires wheelchair access:No

Referred By:Referring GP

Electronic Attachment Present:No

Signature of referring doctor (or other professional) Date

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

REFERRAL LETTER

MEDICAL IN CONFIDENCE

REFERRAL TO

C.R. Dregghorn(Consultant)
Trauma & Orthopaedic - Neck & Shoulder
GGC General Referral

—— Consultant / receiving
practitioner and/or specialty clinic

Victoria Infirmary
Langside Road
Glasgow
G42 9TY

—— Hospital and hospital address

Hospital location code.

G306H

Email address

-

Urgency of referral

ROUTINE

Date of referral

28-Jul-2010

Date sent

29-Jul-2010

PATIENT DETAILS

Surname

Palmer

Forename(s)

Craig

Title

Mr

Sex

Male

Date of birth

27-Jul-1968

CHI no.

2707683094

Patient's address

104 Crossmill Avenue
BARRHEAD
G78 1AY

Contact number(s)

-

101000798435G

Unique Care Pathway Number: 101000798435G

REGISTERED GP DETAILS

Name

Dr David Meighan

GMC code

3559057

GP code

C38636

Practice name

The Oaks Medical Centre

Practice code

87108

Practice address

1 Paisley Rd
Barrhead
Glasgow
G78 1HG

Contact number(s)

Voice: 0141 580 1001

Facsimile: 0141 580 1003

REFERRING GP DETAILS

Name

Dr. Thomas Naven

GMC code

2697859

GP code

39535

Practice name

1 Paisley Road (87108)

Practice code

87108

Practice address

BARRHEAD

Contact number(s)

Voice: 0141 580 1001

CLINICAL INFORMATION**History of presenting complaint****Presenting complaint**

Description: Sinus in left axilla

Comment: Dear Mr. Dreghorn

Many thanks for seeing Craig once more.

You may remember operating on Craig's left shoulder joint in March of this year. Thankfully, everything went fine for a few weeks afterwards.

Unfortunately, today he informs me that he has been oozing pus from the anterior aspect of his left axilla for the past two weeks.

In addition, he has said the joint is painful and less mobile.

I took a swab of the pus today and will treat accordingly when I get the results but, in view of this development, I would be most grateful if you could see him for assessment.

Best wishes.

Reason for referral

Care type requested: Out Patient

Expected outcome: Investigate

Past medical history**Current medication** (Active Repeat medication issued within the last 12 months)

No current medications recorded

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

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Duration</u>
Lodine Sr	60	TABS 600MG	1 Tab	At night	27-Jul-2010	0 Days

Lifestyle Risks and Alerts / Examinations and Investigations

<u>Description/Question</u>	<u>Result/Comment</u>	<u>Date</u>
Current smoker:		05-May-2009
Current smoker:		11-Nov-2008
Current smoker:		21-Aug-2007

Clinical warnings**Additional relevant information****Administrative 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

Patient has disability or requires wheelchair access:No

Referred By:Referring GP

Electronic Attachment Present:No

Signature of referring doctor (or other professional) Date

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

REFERRAL LETTER

MEDICAL IN CONFIDENCE

REFERRAL TO
Dermatology
GGC General Referral

— Consultant / receiving
practitioner and/or specialty clinic

Inverclyde Royal Hospital
Larkfield Road
Greenock
PA16 0XN

— Hospital and hospital address

Hospital location code.

C313H

Email address

-

Urgency of referral

ROUTINE

Date of referral

08-Oct-2010

Date sent

12-Oct-2010

PATIENT DETAILS

Patient's address

Surname Palmer

Forename(s) Craig

Title Mr

Sex Male

Date of birth 27-Jul-1968

CHI no. 2707683094

104 Crossmill Avenue
BARRHEAD
G78 1AY

Contact number(s)

-

1010011044281

Unique Care Pathway Number: 1010011044281

REGISTERED GP DETAILS

Practice address

Name Dr David Meighan

GMC code 3559057

GP code C38636

Practice name The Oaks Medical Centre

Practice code 87108

1 Paisley Rd
Barrhead
Glasgow
G78 1HG

Contact number(s)

Voice: 0141 580 1001
Facsimile: 0141 580 1003
REFERRING GP DETAILS

Practice address

Name Dr. Thomas Naven

GMC code 2697859

GP code 39535

Practice name 1 Paisley Road (87108)

Practice code 87108

BARRHEAD

Contact number(s)

Voice: 0141 580 1001

CLINICAL INFORMATION**History of presenting complaint****Presenting complaint**

Description: Excessive Perspiration in Right Axilla

Comment: Many thanks for seeing this 42 year old gentleman.

For seven or eight years Craig complains of severe sweating, only in his right axilla as his left axilla is damaged because of infection and damage to his left shoulder joint, for which he is due to have an operation soon.

Because of the sweat on his right one he has to change his T-shirt about three times every day.

I was wondering if he would be a candidate for botulinum injections and would be most grateful if you could see him for assessment.

Best wishes.

Reason for referral

Care type requested: Out Patient

Expected outcome: Investigate

Past medical history**Current medication (Active Repeat medication issued within the last 12 months)**

No current medications recorded

Recent medication (Any medication issued within last 168 days not shown above)

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Vapour-Permeable Adhesive Film Dressing	25	Activheal Film 10cmx12.7cm	-	-	03-Aug-2010	03-Aug-2010
Flucloxacillin	56	CAPS 500MG	1 Cap	4 times daily	03-Aug-2010	03-Aug-2010
Lodine Sr	60	TABS 600MG	1 Tab	At night	27-Jul-2010	27-Jul-2010

Lifestyle Risks and Alerts / Examinations and Investigations**Description/Question Result/Comment Date**

Current smoker: 05-May-2009

Current smoker: 11-Nov-2008

Current smoker: 21-Aug-2007

Clinical warnings**Additional relevant information****Administrative 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

Patient has disability or requires wheelchair access:No

Referred By:Referring GP

Electronic Attachment Present:No

Signature of referring doctor (or other professional) Date

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

REFERRAL LETTER

MEDICAL IN CONFIDENCE

REFERRAL TO

Mr Dreghorn(Consultant)
Trauma & Orthopaedic - Neck & Shoulder
GGC General Referral

____ Consultant / receiving
practitioner and/or specialty clinic

Western Infirmary/Gartnavel General
Dumbarton Road
Glasgow
G11 6NT

____ Hospital and hospital address

Hospital location code.

G516H

Email address

-

Urgency of referral

ROUTINE

Date of referral

10-May-2011

Date sent

11-May-2011

PATIENT DETAILS

Surname Palmer

Forename(s) Craig

Title Mr

Sex Male

Date of birth 27-Jul-1968

CHI no. 2707683094

Patient's address

104 Crossmill Avenue
BARRHEAD
G78 1AY

Contact number(s)

-

101001967078H

Unique Care Pathway Number: 101001967078H

REGISTERED GP DETAILS

Name Dr David Meighan

GMC code 3559057

GP code C38636

Practice name The Oaks Medical Centre

Practice code 87108

Practice address

1 Paisley Rd
Barrhead
Glasgow
G78 1HG

Contact number(s)

Voice: 0141 580 1001

Facsimile: 0141 580 1003

REFERRING GP DETAILS

Name Dr. Thomas Naven

GMC code 2697859

GP code 39535

Practice name 1st Floor (87108)

Practice code 87108

Practice address

Barrhead Health & Care Centre
213 Main Street
BARRHEAD

Contact number(s)

Voice: 0141 800 7085

CLINICAL INFORMATION**History of presenting complaint****Presenting complaint**

Description: Discharging sinus in left axilla

Comment: Many thanks for seeing Craig once more.

You may remember receiving a letter from me last July asking you to see Craig again.

In March of last year, you operated on Craig's left shoulder. Everything went fine for a few weeks, but then it began to ooze pus a few weeks later. This has been going on since then.

I am not quite sure if you have tried to contact Craig, the letter may have got lost in the post, but I would be most grateful if you could see Craig once more for assessment, with a view to performing a final operation.

Best wishes

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history**Current medication (Active Repeat medication issued within the last 12 months)**

No current medications recorded

Recent medication (Any medication issued within last 168 days not shown above)

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Hydrocortisone And Miconazole	2	CREAM	Apply	morning and night	09-May-2011	09-May-2011
Paracetamol	100	Caplet TABS 500MG	1 or 2 Tabs	4 times daily	10-Jan-2011	10-Jan-2011
Diclofenac Sodium	84	Ec TABS 50MG	1 Tab	3 times daily	10-Jan-2011	10-Jan-2011
Ibuprofen	100	TABS 400MG	1 Tab	4 Times daily	22-Dec-2010	22-Dec-2010

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question Result/Comment Date

Current smoker: 05-May-2009

Current smoker: 11-Nov-2008

Current smoker: 21-Aug-2007

Clinical warnings**Additional relevant information****Administrative 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

Patient has disability or requires wheelchair access:No

Referred By:Referring GP

Electronic Attachment Present:No

Signature of referring doctor (or other professional) Date

Royal Alexandra Hospital: Clinical Report

Page 1 of 1

Patient: **PALMER, Craig D**DOB: **27/07/1968**

Referrer: Dr Fazila Khattak

CHI No: 2707683094

Ref Loc: GP PRACTICE

C418HOPFRA

CRIS No: 6182355

Ref Src: The Oaks Medical Practice, Barrhead Health & Care Centre, 213 Main Street, Barrhead, G78 1HG,

Clinical History : 30yr smoker. Weightloss. Several wks of right posterior chest pain.**XR Chest :** There are no recent previous films available for comparison.

Normal heart and mediastinum. Emphysematous lungs are clear.

There is gross degenerative change at the left shoulder girdle as shown on the recent previous XR shoulders.

VERIFIED**Reported By: Dr Alexander MacLennan**

2nd Reporter:

Verified By: Dr Alexander MacLennan

E-30417218

Exam Date: 04/04/16

Exams: **XR Chest**

Lab Report ID : V,16.0104659.C Coding Status : Part Read Coded
Filed By User : File Status : Not Filed
Assigned to : Task Status : No Tasks

Patient Details : (997) Craig Palmer DOB : 27/07/1968 CHI : 2707683094 SEX : M

ADR : 104 Crossmill Avenue BARRHEAD

Report Text :

-weight loss

SPECIMEN : SERUM (BIOCH.BOTTLE)

	Abn	Value	Units	Range	Status
R H.pylori serology					
-For advice regarding Helicobacter pylori please contact					
-your local microbiology department					
-This is a SERUM sample.					
H.pylori antibody		DETECTED			NK

Sample Collected Date : 04/04/2016 10:00:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 05/04/2016 16:24:00
Received Date : 08/04/2016 19:00:16
Requestor : KHATTAK, FAZILA
Requestor GMC Code :

Palmer Craig D

CHI: 2707683094

Clinic Letter



Royal Alexandra Hospital
Corsebar Road
Paisley
PA2 9PN
0141-887-9111

Dr. DP Meighan
The Oaks Medical Practice
1st Floor barrhead health & care c
213 Main Street
Barrhead
G78 1SW

Main
Switchboard:
Department:
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Letter Date: 04/04/2016
Reference: Mr H Shanker / LM
Dictated 04/04/2016
Date:
Transcribed 06/04/2016
Date:

Dear Dr. DP Meighan,

Craig D Palmer; D.O.B: 27 Jul 1968; CHI: 2707683094
104 Crossmill Avenue, Barrhead, Glasgow, G78 1AX

Attendance: Specialty - Orthopaedics ; Clinic - RAHHSORI-MR SHANKER EXTRA CLINIC
Date and Time of Appointment - 04/04/2016 14:40

Requested Out-patient Investigations:

Referral to Mr T Hems, Consultant Orthopaedic Surgeon, Victoria Infirmary, Glasgow

Clinical Comments:

I reviewed this 47 year old gentleman who has been under the care of Mr Fazzi and Mr Dreghorn in the past. He gives history of having had recurrent "dislocations" in the past. I do not have any access to the old notes as he was treated in the old Victoria Infirmary in Glasgow. He reports that he had a screw inserted across the joint which subsequently got infected and it was taken out after a period of time. Subsequently he was seen by Mr Dreghorn and the patient reports that Mr Dreghorn had offered shoulder fusion.

At the moment Mr Palmer has ongoing pain. He was also in the recent past seen by Mr Faiz at the Western Infirmary regarding the shoulder

At the moment the main problem is that of ongoing shoulder pain. He also has some tingling in the hand at the distribution of the median nerve. Mr Palmer reports to me that he has had a nerve conduction study which has not shown any significant abnormalities although I do not have access to the original report at this point in time.

Left shoulder shows forward elevation up to 70°, abduction up to 70° and very little external rotation and internal rotation. The range of movement appears to be painful.

X-rays do show complete loss of joint space in the shoulder with large osteophyte formation in the inferior aspect.

Palmer Craig D

CHI: 2707683094

OPCL 04/04/2016 v1

I do not usually perform shoulder fusion for complex problems as in this case and this service is not available with me. I would be referring this gentleman to Mr Tim Hems, Consultant Upper Limb Surgeon at Victoria Infirmary, who has huge experience in performing shoulder fusions.

Thanking you.

Yours sincerely

Mr Harish Shanker

Consultant Orthopaedic Surgeon

Electronically Signed: Mr Harish Shanker, Consultant

cc.

Lab Report ID : E,16.3550647.A Coding Status : Part Read Coded
 Filed By User : File Status : Not Filed
 Assigned to : Task Status : No Tasks

Patient Details : (997) Craig Palmer DOB : 27/07/1968 CHI : 2707683094 SEX : M
 ADR : 104 Crossmill Avenue BARRHEAD
 Report Text :
 -weight loss

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R I ANCA					
-MPO and PR3 antibodies to follow					
ANCA Screen					NK
-C-ANCA, weak positive					
R I MPO/PR3 -sensitive					
-cANCA without MPO or PR3 abs - this is not disease specific					
-May be found with inflammatory bowel/liver disease, other					
-inflammatory, infective, neoplastic and other disorders					
MPO Ab (s)		<0.2	IU/ml	(<<3.5 U)	NK
PR3 Ab (s)		0.5	IU/ml	(<<2.0 U)	NK

Sample Collected Date : 04/04/2016 10:00:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 05/04/2016 14:37:00
 Received Date : 07/04/2016 15:00:17
 Requestor : KHATTAK, FAZILA
 Requestor GMC Code :