

Registration Details - Patient No: 10747

Personal details...		Address details...	
Date of birth	15/08/1977	Post Code	PA238NN
Sex	M	House Name Flat No	
Surname	Leitch	No and Street	97 Ardenslate Road
Previous Surname		Village	
Forenames	Robert John	Town	Dunoon
Calling Name	Robert	County	Argyll
Title	Mr		
Birth Surname			
Marital Status			
Ethnic Origin			
HA/HB Details...		Contact details...	
Trading partner	Argyll and Clyde	Home Tel No	
CHI Number	1508773078	Work Tel No	
Registered GP	Dr Darren Chant	Mobile Tel No	07383443420
Usual GP	Dr Sabeel Saleem	E Mail Address	robertleitch93@gmail.com
NHS Number	532/77/145	Power of Attorney	
Residential Inst		poa contact#	
Branch Surgery		Parent/guardian	
parent/guardian contact			
NOK			
Practice Information...		Distances	
Dispensing	N	Rural Mileage	
Hospital Number		Blocked Special	
Records At		Walking Quarters	
Further Information		Upload Consent	
Long/Short stay or Dead		SCI-DC Consent	Implied Consent (default)
Date of registration	29/08/2024		
AMS/MCR Details		ECS (GP Summary) Consent	
AMS Consent	Yes	Patient Consent	Implied Consent (default)
Pharmacy Details			
Item Collected Check	No		
MCR Suitability Status	-1		
MCR Registration Status	1		

Medical Record

Problems

Active Problems		Authorised By	Code
20/04/2018	Type 2 diabetes mellitus	Sister Logan	C10F
16/07/2024	Adverse reaction to ibuprofen sore joint, bruising	Dr Chant	EMISDRGA
Past Problems		Authorised By	Code
11/04/1991	Nondependent alcohol abuse	Mrs Duncanson	E250
13/02/2018	[D]Sleep apnoea syndrome	Dr Hickman	R0053-1
19/03/2018	Patient reviewed patient	Dr Saleem	6A
13/04/2018	Narcolepsy	Mrs Marshall	F271
13/04/2018	Obstructive sleep apnoea	Mrs Marshall	Fy03-1
29/05/2018	Did not attend - no reason	Dr Hickman	9N42
04/10/2018	Failed encounter	Dr Thome	9N4
11/03/2019	Burn of wrist or hand NOS	Dr Hickman	SH4z
23/10/2019	Mechanical low back pain	Mrs Marshall	18CA
16/07/2024	C/O - low back pain	Dr Chant	18C5
Health Admin Problems		Authorised By	Code
12/08/2020	COVID-19 excluded by laboratory test	Mrs Chant	*ESCT1300245
Investigations		Authorised By	Code
23/02/2018	Test request : Lipids (Source: LAB) Make routine appointment (PHICK_19055). Fasting sample		EMISREQ 440..
23/02/2018	Liver function test (Source: LAB) Make routine appointment (PHICK_19055). Please note change in Abbott Total Bilirubin method from 18/01/18		44D6.
23/02/2018	Urea and electrolytes (Source: LAB) Normal - no action (PHICK_19055). Please note change to Abbott Enzymatic Creat method from 24/04/17		44JB.
23/02/2018	Full blood count - FBC (Source: LAB) Normal - no action (PHICK_19055).		424..
23/02/2018	Erythrocyte sedimentation rate (Source: LAB) Normal - no action (PHICK_19055).		42B6.
23/02/2018	Full blood count - FBC (Source: LAB) Just out of normal range - OK (PHICK_19055).		424..
23/02/2018	Plasma glucose level (Source: LAB) Make routine appointment (PHICK_19055). Fasting sample		44g..
29/03/2018	Full blood count - FBC (Source: LAB) Normal - no action (SASA).		424..
29/03/2018	Plasma glucose level (Source: LAB) Make routine appointment (SASA). Fasting sample		44g..
29/03/2018	Test request : Lipids (Source: LAB) Make routine appointment (SASA). Fasting sample		EMISREQ 440..
29/03/2018	Liver function test (Source: LAB) Make routine appointment (SASA). Please note change in Abbott Total Bilirubin method from 18/01/18		44D6.
29/03/2018	HbA1c level (DCCT aligned) (Source: LAB) Seen and dealt with (SASA).		42W4.
09/01/2019	Serum 25-Hydroxy vitamin D3 level (Source: LAB) Make routine appointment (PHICK_19055). Total 25OH Vit D: <25 deficient, 25-50 insufficient, >50 adequate.		44LP.
09/01/2019	Test request : Lipids (Source: LAB) Make routine appointment (PHICK_19055). Fasting sample		EMISREQ 440..
09/01/2019	Test request : Lipids (Source: LAB) Make routine appointment (PHICK_19055). Fasting sample		EMISREQ 440..
09/01/2019	HbA1c level (DCCT aligned) (Source: LAB) Normal - no action (PHICK_19055).		42W4.
07/02/2023	Full blood count - FBC (Source: LAB) Normal - no action (SASA).		424..
07/02/2023	Erythrocyte sedimentation rate (Source: LAB) passed to Dr McKelvie (SASA).		42B6.
07/02/2023	Full blood count - FBC (Source: LAB) Normal - no action (SASA).		424..
07/02/2023	Liver function test (Source: LAB) passed to Dr McKelvie (SASA).		44D6.
07/02/2023	Gamma - G.T. level (Source: LAB) passed to Dr McKelvie (SASA).		44G4.
07/02/2023	Urea and electrolytes (Source: LAB) Normal - no action (SASA).		44JB.
07/02/2023	Plasma C reactive protein (Source: LAB) Normal - no action (SASA).		44CC.

07/02/2023	(Non Coded Event - Prostate Specific Ag) (Source: LAB) Normal - no action (SASA).	
07/02/2023	(Non Coded Event - Carcino-Embryonic Ag) (Source: LAB) passed to Dr McKelvie (SASA). CEA should NOT be used as a screening test for bowel Ca. CEA elevated. Consistent with but not diagnostic of malignancy.	
07/02/2023	Liver function test (Source: LAB) passed to Dr McKelvie (SASA).	44D6.
07/02/2023	Gamma - G.T. level (Source: LAB) passed to Dr McKelvie (SASA).	44G4.
07/02/2023	Urea and electrolytes (Source: LAB) Normal - no action (SASA).	44JB.
07/02/2023	Plasma C reactive protein (Source: LAB) Normal - no action (SASA).	44CC.
07/02/2023	HbA1c level (DCCT aligned) (Source: LAB) seen and dealt with see F8 (ANNLO_19055).	42W4.
28/02/2023	Thyroid function tests (Source: LAB) Normal - no action (NARE).	442..
28/02/2023	Test request : Lipids (Source: LAB) make appointment with practice nurse (NARE).	EMISREQ440..
28/02/2023	(Non Coded Event - Serum Folate) (Source: LAB) Normal - no action (NARE).	
28/02/2023	(Non Coded Event - Serum Vitamin B12) (Source: LAB) Normal - no action (NARE).	
24/10/2023	HbA1c level (DCCT aligned) (Source: LAB) good control (NARE).	42W4.
24/10/2023	(Non Coded Event - Serum Folate) (Source: LAB) Normal - no action (NARE).	
24/10/2023	(Non Coded Event - Serum Vitamin B12) (Source: LAB) Normal - no action (NARE).	
24/10/2023	Full blood count - FBC (Source: LAB) Normal - no action (NARE).	424..
24/10/2023	Serum total T3 level (Source: LAB) Normal - no action (NARE).	442f.
24/10/2023	Thyroid function tests (Source: LAB) Labs suggest recheck in 3-4 months (NARE). ?Thyroid history. Suggest repeat TFTs in 3-4 months to follow up.	442..
24/10/2023	Test request : Lipids (Source: LAB) Improving - recheck in 3 months (NARE).	EMISREQ440..
24/10/2023	Liver function test (Source: LAB) Normal - no action (NARE).	44D6.
24/10/2023	Urea and electrolytes (Source: LAB) Normal - no action (NARE).	44JB.
24/10/2023	Urine total protein (Source: LAB) Normal - no action (NARE). Unable to calculate protein:creatinine ratio as protein <0.100 g/L.	46N3.
24/10/2023	Urine albumin (Source: LAB) Normal - no action (NARE).	46N4.
19/09/2024	Full blood count - FBC (Source: LAB) Normal - no action (NARE).	424..
19/09/2024	(Non Coded Event - Serum Folate) (Source: LAB) Just out of normal range - OK (DP).	
19/09/2024	(Non Coded Event - Active B12) (Source: LAB) Normal - no action (DP). Note change in the B12 assay to an active B12 assay from 14/5/24.	
19/09/2024	HbA1c level (DCCT aligned) (Source: LAB) discussed with patient - increase metformin titrating dose to 1g BD - see F6 (NARE).	42W4.
19/09/2024	Thyroid function tests (Source: LAB) Normal - no action (NARE).	442..
19/09/2024	Test request : Lipids (Source: LAB) Discussed with patient - to commence on statin (NARE).	EMISREQ440..
19/09/2024	Liver function test (Source: LAB) Alk Phos 152 otherwise normal. check Vit D (DARR).	44D6.
19/09/2024	Urea and electrolytes (Source: LAB) Normal - no action (NARE).	44JB.
04/11/2024	HbA1c level (DCCT aligned) (Source: LAB) Discussed with patient - increase metformin to 1g BD (NARE).	42W4.
04/11/2024	Liver function test (Source: LAB) Alk Phos 157 otherwise normal. Needs Vit D blood test (DARR).	44D6.
04/11/2024	Urea and electrolytes (Source: LAB) normal - no action (DARR).	44JB.
08/11/2024	Serum 25-Hydroxy vitamin D3 level (Source: LAB) Normal - no action (NARE). Total 25OH Vit D: <25 deficient, 25-50 Insufficient, >50 adequate.	44LP.
08/11/2024	Urea and electrolytes (Source: LAB) Normal - no action (NARE).	44JB.
08/11/2024	HbA1c level (DCCT aligned) (Source: LAB) Make appointment with practice nurse (NARE).	42W4.
09/11/2024	HbA1c level (DCCT aligned) (Source: LAB) commenced gliclazide on 28/11/24 (NARE).	42W4.
08/11/2024	Urea and electrolytes (Source: LAB) Normal - no action (NARE).	44JB.
27/01/2025	GMS Contract Back Population (Source: Manually filed).	
13/10/2025	Full blood count - FBC (Source: LAB) Normal - no action (NARE).	424..
13/10/2025	(Non Coded Event - Serum Folate) (Source: LAB) Normal - no action (NARE).	
13/10/2025	(Non Coded Event - Active B12) (Source: LAB) Normal - no action (NARE). Note change in the B12 assay to an active B12 assay from 14/5/24.	
13/10/2025	HbA1c level (DCCT aligned) (Source: LAB) Make appointment with practice nurse (NARE).	42W4.
13/10/2025	Thyroid function tests (Source: LAB) normal - no action (DARR).	442..
13/10/2025	Test request : Lipids (Source: LAB) normal - no action (DARR).	EMISREQ440..
13/10/2025	Liver function test (Source: LAB) Alk Phos 154, as previous. has previously had normal Vit D (DARR).	44D6.
13/10/2025	Urea and electrolytes (Source: LAB) normal - no action (DARR).	44JB.
06/03/2026	GMS Contract Back Population (Source: Manually filed).	
12/03/2026	Liver function test (Source: LAB) Just out of normal range - OK (DP).	44D6.
12/03/2026	Urea and electrolytes (Source: LAB) normal - no action (CLA).	44JB.
12/03/2026	(Non Coded Event - Amylase) (Source: LAB) normal - no action (CLA).	
12/03/2026	HbA1c level (DCCT aligned) (Source: LAB) commenced on Mounjaro (NARE).	42W4.

Values			
Date	Last Entry	Normal Range Indicator	Normal Range
12/03/2026	Haemoglobin A1c level - IFCC standardised 64 mmol/mol		20-41
12/03/2026	Serum amylase level 73 U/L		
12/03/2026	Serum sodium 134 mmol/L		
12/03/2026	Serum potassium 4.3 mmol/L		133-146
12/03/2026	Serum chloride 100 mmol/L		3.5-5.3
12/03/2026	Serum urea level 4.7 mmol/L		95-108
12/03/2026	Serum creatinine 64 umol/L		2.5-7.8
12/03/2026	GFR calculated abbreviated MDRD > 60		40-130
12/03/2026	Serum total bilirubin level 9 umol/L		
12/03/2026	ALT/SGPT serum level 62 U/L		
12/03/2026	AST serum level 31 U/L		5-40
12/03/2026	Serum alkaline phosphatase 137 U/L		
12/03/2026	Serum albumin 44 g/L		30-130
12/03/2026	Body Mass Index 35 kg/m2 Robert attends today for review. Robert works away as a chef. We discussed Mounjaro today to both try and bring down his hba1c and also for weight loss. We discussed eating in a calorie deficit. He is able to attend for review 4 weekly. We discussed side effects and injection sites today. Robert declines being shown how to use injection but I have sign posted to video online.		35-50
12/03/2026	O/E - weight 116 Kg		20-25
03/03/2026	O/E - right eye background diabetic retinopathy		
03/03/2026	Digital retinal screening 1		
03/03/2026	O/E - left eye background diabetic retinopathy		
13/10/2025	Serum cholesterol 3.4 mmol/L		3.5-6.5
13/10/2025	Serum triglycerides 1.6 mmol/L		0.2-2.3
13/10/2025	Serum HDL cholesterol level 0.9 mmol/L		
13/10/2025	Calculated LDL cholesterol level 1.8 mmol/L		
13/10/2025	Serum VLDL cholesterol level 0.7 mmol/L		
13/10/2025	Serum cholesterol/HDL ratio 3.8		
13/10/2025	Serum TSH level 1.71 mU/L		0.35-5
13/10/2025	Serum free T4 level 13.9 pmol/L		9-21
13/10/2025	Serum total T3 level		
13/10/2025	128 pmol/L (Non Coded Event - Active B12)		
13/10/2025	Serum folate 3.2 ug/l		3.1-20
13/10/2025	Total white cell count 6.1 x10^9/l		4-10
13/10/2025	Red blood cell (RBC) count 4.81 x10^12/l		4.5-6.5
13/10/2025	Haemoglobin estimation 148 g/l		130-180
13/10/2025	Haematocrit 0.442 l/l		0.4-0.54
13/10/2025	Mean corpuscular volume (MCV) 91.9 fl		83-101
13/10/2025	Mean corpusc. haemoglobin(MCH) 31 pg		27-32
13/10/2025	Platelet count 230 x10^9/l		150-410
13/10/2025	Neutrophil count 3.5 x10^9/l		2-7
13/10/2025	Lymphocyte count 2.1 x10^9/l		1.1-5
13/10/2025	Monocyte count 0.3 x10^9/l		0.2-1
13/10/2025	Eosinophil count 0.14 x10^9/l		0.02-0.5
13/10/2025	Basophil count 0 x10^9/l		0-0.1
13/10/2025	Nucleated red blood cell count		
13/10/2025	Alcohol consumption 0 units/week		
13/10/2025	O/E - height 181 cm		10-250
13/10/2025	Blood pressure reading 133/80 mm Hg		

22/01/2025	O/E - no right diabetic retinopathy		
08/11/2024	Serum 25-Hydroxy vitamin D3 level 57 nmol/L		
24/10/2023	Urine albumin 10 mg/L		
24/10/2023	Urine albumin:creatinine ratio 0.7 mg/mmol creatinine		
24/10/2023	Urine volume NA	0-2.5	
24/10/2023	Urine creatinine 13.4 mmol/L		
24/10/2023	Urine total protein < 0.100		
24/10/2023	(Non Coded Event - Urine Protein/volume)		
24/10/2023	Urine protein/creatinine ratio NA		
24/10/2023	Serum vitamin B12 280 ng/L		
07/03/2023	O/E - blood pressure reading		
07/02/2023	Serum C reactive protein level 8 mg/L	200-883	
07/02/2023	Serum gamma-glutamyl transferase level 217 U/L		
07/02/2023	Carcinoembryonic antigen level 19.4 ug/L	0-10	
07/02/2023	Prostate specific antigen 0.6 ug/L		
07/02/2023	Erythrocyte sedimentation rate 16 mm/hr	0-5	
07/02/2023	Urinalysis = no abnormality MSU sent.	0-3	
03/01/2019	Lumbar spine X-ray normal	0-10	
29/03/2018	Plasma glucose level 7.6 mmol/L		
13/02/2018	O/E - pulse rate 81 beats/minute		
13/02/2018	Blood oxygen saturation 98 %	3.5-6	
20/12/2017	Cigarette smoker 30 Cigarettes/day		

Attachments		Authorised By	Code
03/04/2018	Attachment app	app.doc	
09/05/2018	Attachment Document1	Document1.doc	
25/05/2018	Attachment DNA - LETTER - MW	DNA - LETTER - MW.doc	
25/05/2018	Attachment DNA - LETTER - MW.doc DNA - LETTER - MW	DNA - LETTER - MW.doc	
05/10/2018	Attachment 2nd DNA Letter - mw	2nd DNA Letter - mw.doc	
15/01/2019	Attachment Invite to make app -15/01/2019	Invite to make app - 26.02.2019.doc	
11/03/2019	eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: Burn of wrist or hand NOS; Duration: 06/03/2019 - 20/03/2019)	FitNote - 044b63b2-956f-4596-889c-6d632273b396.pdf	
09/05/2020	Letter encounter Unscheduled Care Report NHS Highland OOH	D7_00424943.XXX	Dr Hickman
13/08/2020	Letter encounter Virology Report UK Covid Results Virology Unknown	D7_00430794.XXX	Any Man
21/10/2020	eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: Backpain; Duration: 21/10/2020 - 28/10/2020)	FitNote - d15a80ef-946b-4a8a-98dc-61ec58939587.pdf	Any Man
28/10/2020	eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: Back Pain; Duration: 28/10/2020 - 04/11/2020)	FitNote - e782e04e-79d7-45e5-bfd0-004b32ea164e.pdf	Dr Saleem
06/05/2022	Letter encounter Administration Letter Letter to Patient	D7_00492982.XXX	Dr Chant
17/06/2022	Attachment F2F appt with GP (to book one)	F2F appt with GP (to book one).doc	
07/07/2022	Letter encounter Administration Letter Miscellaneous	D7_00498814.XXX	Any Man
02/06/2023	Letter encounter Administration Letter	D7_00530165.XXX	Any Man
22/08/2023	Letter encounter Imaging Result - US Testes Inverclyde Royal Hospital Imaging Audrey Gilmour (Sonographer)	D7_00538700.XXX	Any Man
04/10/2023	Attachment diabetes appointment letter	diabetes appointment letter.doc	
01/01/2024	Letter encounter Out of Hours Seen in A&E	D7_00550517.XXX	Miss Bailey
22/03/2024	Letter encounter Administration Letter Email from patient	D7_00582220.XXX	Any Man
18/04/2024	Letter encounter Clinical Letter Diabetic Eye Screening	D7_00555640.XXX	Any Man
06/05/2024	Letter encounter A&E Discharge Letter Royal Infirmary of Edinburgh Accident & Emergency Dr Zaid Ibrahim	D7_00567638.XXX	Any Man
08/05/2024	Letter encounter Administration Letter Letter from Patient	D7_00567286.XXX	Any Man
18/07/2024	Letter from consultant Result Dunoon General X-Ray	D7_00574340.XXX	Any Man
05/09/2024	Attachment diabetes review	diabetes review.doc	Miss Morgan
27/03/2025	Letter encounter Clinical Letter Cowal Community Hospital Physiotherapy	D7_00588431.XXX	Any Man
18/06/2025	Attachment diabetic review	diabetic review.doc	Any Man
26/08/2025	Letter encounter immediate outpatient letter oral surgery	D7_00616933.XXX	Miss Morgan
20/10/2025	Attachment confirming appt	confirming appt.doc	Any Man
03/03/2026	Letter encounter Clinical Letter Cowal Community Hospital Accident & Emergency	D7_00630278.XXX	Mrs Goffin
23/03/2026	Letter encounter A&E Discharge Letter Royal Infirmary of Edinburgh Ashish Kam	D7_00632293.XXX	Any Man
25/03/2026	eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: chest infection; Duration: 23/03/2026 - 06/04/2026)	FitNote - 404c4b68-c7d6-4bac-af54-2f50bf28af06.pdf	Dr Paterson

Due Diary Entries	Authorised By	Code
None		

Overdue Diary Entries	Authorised By	Code
15/08/2022	Medication review OVERDUE 12/10/2022	
15/08/2025	Diabetic annual review OVERDUE	Dr Saleem
13/04/2026	Diabetic monitoring OVERDUE	Mrs Wakefield
		66AS.
		66A..

Alerts	Authorised By	Code
None		

Drug Allergies	Authorised By	Code
15/07/2024	Adverse reaction to ibuprofen sore joint, bruising	
	Dr Chant	EMISDRGA

Non Drug Allergies	Authorised By	Code
None		

Family History	Authorised By	Code
20/12/2017	FH: Ischaemic heart dis. >60	
20/12/2017	FH: Diabetes mellitus	Mrs McLennan
		12C3
		1252

Immunisations	Authorised By	Code
17/03/2021	Administration of first dose of SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) vaccine (Left arm) PV40008AZ/IM (GMS)	Sister Logan
02/06/2021	Administration of second dose of SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) vaccine (Right arm) PV46684/AZ/IM (GMS)	Mrs McLennan
		*ESCT1348323
		*ESCT1348325

Health Status	
13/10/2025	Height 181 cm
12/03/2026	Weight 116 Kg
12/03/2026	Body Mass Index 35 kg/m2
13/10/2025	Blood pressure reading

07/03/2023
16/07/2024
20/12/2017
20/12/2017

133/80 mm Hg
Blood pressure reading O/E - blood pressure reading
Smoking Status Moderate smoker - 10-18 cigs/d
Exercise grading Aerobic exercise 2 times/week
FH: Ischaemic heart dis. >60

Other Observations	Authorised By	Code
20/12/2017 Aerobic exercise 2 times/week	Mrs McLennan	138A
13/02/2018 Syncope/vasovagal faint	Dr Hickman	1962
13/02/2018 O/E - heart sounds normal	Dr Hickman	24B1
13/02/2018 O/E - no cardiac murmur	Dr Hickman	24D1
13/02/2018 Resp. system examined - NAD	Dr Hickman	2315
13/02/2018 ECG requested Seen in A&E thought to have had Sleep apnoea	Dr Hickman	3211
13/02/2018 Notes summary on computer	Mrs Duncanson	9344
07/03/2018 Avulsion of nail	Ms Neil	7G321
14/03/2018 Did not attend - no reason did 30 minute new diabetic appointment ,have asked the back desk to contact and reschedule	Sister Logan	9N42
09/05/2018 Medication review	Dr Saleem	8B314
04/09/2018 Telephone encounter during covid-19 ' sore back and shoulder 07383443420' message on screen, hurt back when reaching into fridge now finding it difficult to stand, sit, pains down leg, has been on Naproxin for ongoing back problem but not helping has prev been on tramadol, needs to be seen, no covid symptoms	Sister Logan	9N31
21/10/2020 Medication review	Dr Saleem	8B314
10/09/2021 Medication reviewed	Ms Lockhart	8B3H
13/07/2022 Telephone encounter HbA1C 132 to inform of the same is on no medication, needs to stop eating sweets biscuits cakes etc from now and start metformin 1 tab am with breakfast for a week then twice daily with food, is going away tomorrow for 2 weeks so will leave script at reception and made a follow up appointment the day after he returns , also needs to have chcl checked	Sister Logan	9N31
09/02/2023 10g monofilament sensation present	Mrs Wakefield	29B7
28/02/2023 10g monofilament sensation R foot normal	Mrs Wakefield	29BB
28/02/2023 10g monofilament sensation L foot normal	Mrs Wakefield	29BC
28/02/2023 O/E - R.dorsalis pedis present	Mrs Wakefield	24E8
28/02/2023 O/E - L.dorsalis pedis present	Mrs Wakefield	24F8
28/02/2023 O/E - Right diabetic foot at low risk	Mrs Wakefield	2G5E
28/02/2023 O/E - Left diabetic foot at low risk	Mrs Wakefield	2G5I
28/02/2023 Diabetic on oral treatment	Mrs Wakefield	66A4
24/10/2023 10g monofilament sensation present	Mrs Wakefield	29B7
24/10/2023 10g monofilament sensation R foot normal	Mrs Wakefield	29BB
24/10/2023 10g monofilament sensation L foot normal	Mrs Wakefield	29BC
24/10/2023 O/E - R.dorsalis pedis present	Mrs Wakefield	24E8
24/10/2023 O/E - L.dorsalis pedis present	Mrs Wakefield	24F8
24/10/2023 O/E - Right diabetic foot at low risk	Mrs Wakefield	2G5E
24/10/2023 O/E - Left diabetic foot at low risk	Mrs Wakefield	2G5I
24/10/2023 Diabetic on oral treatment	Mrs Wakefield	66A4
16/07/2024 Moderate smoker - 10-19 cigs/d	Dr Chant	1374
19/09/2024 10g monofilament sensation present	Mrs Wakefield	29B7
19/09/2024 10g monofilament sensation R foot normal	Mrs Wakefield	29BB
19/09/2024 10g monofilament sensation L foot normal	Mrs Wakefield	29BC
19/09/2024 O/E - R.dorsalis pedis present	Mrs Wakefield	24E8
19/09/2024 O/E - L.dorsalis pedis present	Mrs Wakefield	24F8
19/09/2024 O/E - Right diabetic foot at low risk	Mrs Wakefield	2G5E
19/09/2024 O/E - Left diabetic foot at low risk	Mrs Wakefield	2G5I
19/09/2024 Diabetic monitoring	Mrs Wakefield	66A
19/09/2024 Diabetic annual review	Mrs Wakefield	66AS
19/09/2024 Diabetic on oral treatment	Mrs Wakefield	66A4
25/09/2024 Ex Patients of Dr Saleem	Mrs Wakefield	PCS19055EX1
13/10/2025 10g monofilament sensation present	Mrs Wakefield	29B7
13/10/2025 10g monofilament sensation R foot normal	Mrs Wakefield	29BB
13/10/2025 10g monofilament sensation L foot abnormal	Mrs Wakefield	29BA
13/10/2025 O/E - R.dorsalis pedis present	Mrs Wakefield	24E8
13/10/2025 O/E - L.dorsalis pedis present	Mrs Wakefield	24F8
13/10/2025 O/E - Right diabetic foot at low risk	Mrs Wakefield	2G5E
13/10/2025 O/E - Left diabetic foot at low risk	Mrs Wakefield	2G5I
13/10/2025 Diabetic monitoring	Mrs Wakefield	66A
13/10/2025 Diabetic annual review	Mrs Wakefield	66AS
13/10/2025 Diabetic on oral treatment	Mrs Wakefield	66A4
13/10/2025 Self monitoring of blood glucose	Mrs Wakefield	8A17
13/10/2025 Outpatient clinic letter received Prescription letter EDI Oral Surgery 26.09.25	Ms Hirsch	9N3D2

Consultations

20/12/2017	<u>Mrs Trish McLennan at Church Street Surgery</u>
Examination	Blood pressure reading 150/89 mm Hg re check 2wks O/E - height, 1.816 cm O/E - weight, 127.5 Kg Body Mass Index, 38.6814.82
Family History	FH: Ischaemic heart dis. >60 FH: Diabetes mellitus
Social	Cigarette smoker, 30 Cigarettes/day Alcohol consumption, 0 units/week Aerobic exercise 2 times/week
Comment	new patient medical.
03/01/2018	<u>Mrs Trish McLennan at Church Street Surgery</u>
Examination	O/E - blood pressure reading Blood pressure reading 150/92 mm Hg remains raised apptment given for 24hrs monitor
08/01/2018	<u>Mrs Trish McLennan at Church Street Surgery</u>
Examination	24hrs bp monitor applied
09/01/2018	<u>Mrs Trish McLennan at Church Street Surgery</u>
Examination	removal 24hrs monitor average reading 155/90 will discuss with gp.
13/02/2018	<u>Dr Paul Hickman at Church Street Surgery</u>
Problem (FIRST)	[D]Sleep apnoea syndrome
History	Syncope/vasovagal faint
Examination	Blood oxygen saturation 98 % O/E - pulse rate 81 beats/minute Blood pressure reading 150/90 mm Hg O/E - heart sounds normal O/E - no cardiac murmur Resp. system examined - NAD
Comment	ECG requested Seen in A&E thought to have had Sleep apnoea
Test Request	Glucose - Requested, Urea and Electrolytes - Requested, Liver Function Tests - Requested, Lipid profile (Inc. HDL) - Requested, ESR - Requested, Full Blood Count - Requested

Problem	Refer to podiatry
14/02/2018 New Referral	<u>Mrs Morven Walsh at Church Street Surgery</u> (NHS), . . . 8H7X.: Refer to podiatry (SCI Gateway Referral)
23/02/2018 Test Request	<u>Mrs Nareenah Wakefield at Church Street Surgery</u> Glucose - Completed, Urea and Electrolytes - Completed, Liver Function Tests - Completed, Lipid profile (inc. HDL) - Completed, ESR - Completed, Full Blood Count - Completed
23/02/2018 Result	<u>Dr Paul Hickman at General Practice Surgery</u> Plasma glucose level Make routine appointment (PHICK_19055)
23/02/2018 Result	<u>Dr Paul Hickman at General Practice Surgery</u> Erythrocyte sedimentation rate Normal - no action (PHICK_19055) Full blood count - FBC Just out of normal range - OK (PHICK_19055)
23/02/2018 Result	<u>Dr Paul Hickman at General Practice Surgery</u> Test request : Lipids Make routine appointment (PHICK_19055) Liver function test Make routine appointment (PHICK_19055) Urea and electrolytes Normal - no action (PHICK_19055)
19/03/2018 Problem (FIRST) History	<u>Dr Sabeel Saleem at Church Street Surgery</u> Patient reviewed patient bloods discussed. Repeat fasting again. FTs, known liver issues, recovering alcoholism , previously investigated in kyle
Test Request	Liver Function Tests - Requested, Lipid profile (inc. HDL) - Requested, HbA1c - Requested, Glucose - Requested, Full Blood Count - Requested
29/03/2018 Test Request	<u>Mrs Nareenah Wakefield at Church Street Surgery</u> Liver Function Tests - Completed, Lipid profile (inc. HDL) - Completed, HbA1c - Completed, Glucose - Completed, Full Blood Count - Completed
29/03/2018 Result	<u>Dr Sabeel Saleem at General Practice Surgery</u> HbA1c level (DCCT aligned) Seen and dealt with (SASA)
29/03/2018 Result	<u>Dr Sabeel Saleem at General Practice Surgery</u> Test request : Lipids Make routine appointment (SASA) Liver function test Make routine appointment (SASA)
29/03/2018 Result	<u>Dr Sabeel Saleem at General Practice Surgery</u> Plasma glucose level Make routine appointment (SASA)
20/04/2018 Comment	<u>Sister Ann Logan at Church Street Surgery</u> O/E - height 181 cm new diabetic, given booklet to read, know your labels, sugars in fruit leaflets and discussed diabetes at length., O/E - weight 126.1 Kg see in 2 weeks for new diabetic review ,is a chef at the Braes Dunoon,so know what is healthy or not
30/04/2018 Comment	<u>Dr Paul Hickman at Medicine Management</u> req dressings, co-cod 30.500, modafinil as per acute Co-Codamol 30/500 Tablets 50 TABLET TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS) 365 Non Woven Island Dressing 5 cm x 7.2 cm 50 dressing TO BE USED AS DIRECTED Modafinil Tablets 100 mg 90 TABLET TAKE TWO IN THE MORNING AND ONE AT MIDDAY
09/05/2018 Comment	<u>Sister Ann Logan at Church Street Surgery</u> Did not attend - no reason did 30 minute new diabetic appointment ,have asked the back desk to contact and reschedule
25/05/2018 Comment	<u>Mrs Morven Walsh at Church Street Surgery</u> EMIS attachment reference code DNA - LETTER - MW.doc DNA - LETTER - MW
29/05/2018 Problem (FIRST)	<u>Dr Paul Hickman at Church Street Surgery</u> Did not attend - no reason
11/07/2018 Comment	<u>Dr Hollie Kilpatrick at Church Street Surgery</u> Patient request for Co-codamol
04/10/2018 Problem (FIRST) History	<u>Dr William Thorne at Church Street Surgery</u> Failed encounter dna, no reason, ongoing issue despite letter
05/10/2018 Comment	<u>Mrs Morven Walsh at Church Street Surgery</u> 2nd DNA letter - mw
03/01/2019 Medication Test Request	<u>Ms Claire De Mortimer-Griffin at Church Street Surgery</u> Tramadol Hydrochloride M/R capsules 100 mg 20 capsule ONE TWICE A DAY Serum Lipids, HbA1C, Serum 25-Hydroxy vitamin D3 level
09/01/2019 Test Request	<u>Mrs Trish McLennan at Church Street Surgery</u> Lipid profile (inc. HDL) - Completed, Vitamin D - Completed, HbA1c - Completed
09/01/2019 Result	<u>Dr Paul Hickman at General Practice Surgery</u> HbA1c level (DCCT aligned) Normal - no action (PHICK_19055)
09/01/2019 Result	<u>Dr Paul Hickman at General Practice Surgery</u> Serum 25-Hydroxy vitamin D3 level Make routine appointment (PHICK_19055) Test request : Lipids Make routine appointment (PHICK_19055)
09/01/2019 Result	<u>Dr Paul Hickman at General Practice Surgery</u>
14/01/2019 Comment Medication	<u>Dr Paul Hickman at Church Street Surgery</u> req tramadol Tramadol Hydrochloride M/R capsules 100 mg 1*60 CAPSULE ONE TWICE A DAY
11/03/2019 Problem (FIRST) Comment Additional	<u>Dr Paul Hickman at Church Street Surgery</u> Burn of wrist or hand NOS req sickline from 6th- has attended a&e and for dressings-burnt hand eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: Burn of wrist or hand NOS; Duration: 06/03/2019 - 20/03/2019)
14/03/2019 Comment	<u>Mrs Nareenah Wakefield at Church Street Surgery</u> Attended today for change of dressing to burns on right hand - thumb index, middle finger and palm. Burns have now healed. No further dressings required.
05/04/2019 History Comment	<u>Dr Darren Chant at Administration</u> Message on screen " pt asking for tramadol 100mg please" see doctor for further
30/04/2019 History	<u>Dr Sabeel Saleem at Church Street Surgery</u> Patient asking for letter of support for housing application - aware of charge that will apply - unsure if needs

Comment	appointment first - rs (30/04/2019 15:03) Recipients: Dr Sabeel Saleem why? called to clarify, number is not working
01/05/2019 History	<u>Dr Darren Chant at Church Street Surgery</u> Message on screen " Pat req Tramadol"
10/07/2019 Comment Medication	<u>Dr Paul Hickman at Church Street Surgery</u> Tramadol on acute please - mw Tramadol Hydrochloride M/R capsules 100 mg 1*60 CAPSULE ONE TWICE A DAY
23/10/2019 Comment Medication	<u>Dr Paul Hickman at Medicine Management</u> pt askint for tramadol please - had in past Tramadol Hydrochloride M/R capsules 100 mg 1*60 CAPSULE ONE TWICE A DAY
28/02/2020 10:30 Comment	<u>Mrs Ann Marshall at Church Street Surgery</u> Patient asking for Tramadol 100mg. Not had since October 2019, would need review by GP before more issued
18/03/2020 History Comment	<u>Dr Darren Chant at Administration</u> Telephone triage consultation arranged during Coronavirus Outbreak . was booked for a surgery appt in two days time but moved to prevent backlog phoned but not connecting
20/03/2020 History	<u>Dr Sabeel Saleem at Church Street Surgery</u> back pain, looking for Co-codamol.
21/04/2020 11:30 Comment	<u>Miss Bethan Bailey at Church Street Surgery</u> Got a phone call from Portonachan Hotel (0186683224)- asking to send a copy of their medication to be sent to the local surgery 01838 206204 Dalmally Surgery- I've sent an email to sheonaid.watson@nhs.net
09/05/2020 Additional	<u>Any Doc Man at Docman</u> Letter encounter Unscheduled Care Report NHS Highland OOH
13/08/2020 Additional	<u>Any Doc Man at Docman</u> Letter encounter Virology Report UK Covid Results Virology Unknown
25/09/2020 10:35 Comment	<u>Miss Bethan Bailey at Church Street Surgery</u> pt called asking for stronger pain killers for his back- asked for his meds to be sent to another chemist (not in dunoon)- explained can't sent anywhere out with dunoon would need to temp register at a surgery to get medication
21/10/2020 History Comment Medication Additional	<u>Dr Sabeel Saleem at Church Street Surgery</u> back pain, mechanical in nature, examinations are all normal including neurology. Apyrexial. On co-codamol. Cant take oral insaids. Try low dose diazepam, sedation discussed, only for short term, added piroxicam gel, advised warm compress Diazepam Tablets 2 mg 15 tablet ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED FOR BACK SPASM Piroxicam Gel 0.5 % 112 gram TO BE USED FOUR TIMES A DAY eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: Backpain; Duration: 21/10/2020 - 28/10/2020)
21/10/2020 09:43 Comment	<u>Sister Ann Logan at Church Street Surgery</u> Telephone encounter during covid-19 ' sore back and shoulder 07383443420' message on screen, hurt back when reaching into fridge now finding it difficult to stand, sit, pains down leg, has been on Naproxin for ongoing back problem but not helping has prev been on tramadol, needs to be seen, no covid symptoms
28/10/2020 15:22 History Comment Additional	<u>Dr Darren Chant at Administration</u> Message on screen during Covid 19 Pandemic " Pt req Diazepam+Piroxicam for back pain - not better. also fit note ext" see doctor if not improving eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: Back Pain; Duration: 28/10/2020 - 04/11/2020)
17/03/2021 15:26 Additional	<u>Sister Ann Logan at Church Street Surgery</u> Administration of first dose of SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) vaccine (Left arm) PV40008AZ/IM (GMS)
02/06/2021 Additional	<u>Mrs Trish McLennan at Church Street Surgery</u> Administration of second dose of SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) vaccine (Right arm) PV46684/AZ/IM (GMS)
01/04/2022 14:09 History	<u>Dr Darren Chant at Administration</u> Message on screen (whilst I am working remotely due to Covid) : "Naproxen e/c please
05/05/2022 13:44 Comment	<u>Miss Bethan Bailey at Church Street Surgery</u> see link below: https://eur01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fonline.citizencard.com%2Freferee%2Fdrd%2F65ab9a2-1ba4-4680-ab95-1b3b014a2b83&data=05%7C01%7Cchurchstdunoon.health%40nhs.scot%7C0ad80e5f29484d08c305ca2e8000c%7C10efe0bda0304bca809cb5e6745e499a%7C0%7C0%7C837873476305141980%7CUnknown%7C7CTVf6pbGZsb3BeyjWj0iMC4wLjAwMDA1LjQ1b2V2LWZlZCJBT1I6IkhWwLcJXVCi6Mn0%3D%7C1000%7C%7C%7Csdsta-J2DZGj8l%2BdJ8Xj0%2FVDRUOglw%2B8u1WXXtWZyHidk%3D&reserved=0
06/05/2022 Additional	<u>Any Doc Man at Docman</u> Letter encounter Administration Letter Letter to Patient
30/05/2022 15:52 History Comment	<u>Dr Daniel Paterson at Church Street Surgery</u> patient not seen. message request. see link in F6 to complete for pt- any charge? link doesn't work in emis. what is this for ?
30/05/2022 17:01 History Comment	<u>Dr Daniel Paterson at Church Street Surgery</u> patient not seen. message request. It is for a CitizenCard Application- consult notes can be edited to copy link sorry but this application is asking if I know the patient. I have never met him or dealt with him so I cannot complete.
07/06/2022 12:18 Comment	<u>Miss Bethan Bailey at Church Street Surgery</u> pt called for an updated- explained that Dr Paterson got his request but as noted not best person to answer query. Said I would speak to on of the other GP's to complete and call him back.
15/06/2022 Comment	<u>Dr Sabeel Saleem at Church Street Surgery</u> will need F2F appt
23/08/2022 10:05 History	<u>Dr Darren Chant at Surgery consultation</u> attends as per Dr P re a CitizenCard (type of ID card) states needs employer and bank both need an ID card - (1) changing bank and new bank requests photo ID (2) company for which he works has changed ownership and require photo ID doesn't drive as has narcolepsy hence no driving license. no utility bills as lives in accomodation provided by employer. lost passport registered with Church Street for many years I copied and pasted the http address as in 5/5/22 entry - doesn't work with tel reading "This link is no longer working" will need to get a new link sent to reception email address
07/07/2022 Additional	<u>Any Doc Man at Docman</u> Letter encounter Administration Letter Miscellaneous
13/07/2022 09:39 Comment	<u>Ms Diana Lockhart at Church Street Surgery</u>

History	Medication requested
Comment	Request for naproxen. Not using regularly last issue May. PMHx mechanical back pain.
<u>21/07/2022 08:08</u>	<u>Miss Bethan Bailey at Church Street Surgery</u>
	https://eu01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fonline.citizenconnect.com%2Freferece%2Fdnd%2F23940d8-6e81-4764-878f-720390e30c8b&data=05%7C01%7Cchurchst@nhs.uk%40nhs.uk%7C00092b10876045c23c6808da5f6bbe23%7C10efe0bda0304bca809cb5e6743e499a%7C0%7C0%7C837827763350386669%7CUnknown%7CTWpGZ3b3d8eyJWjoiMC4wLjAwMDAILCjQljoivZiUzMzILCjE1IjE6Ikh1aWwILCjVCi6Mn0%3D%7C3000%7C%7C%7C&data=3PbUBJEArEwODrbyK%2FBA8pAqIpZYrCjDyKzP%3D&reserved=0
Comment	
<u>21/07/2022 17:28</u>	<u>Dr Darren Chant at Administration</u>
History	Message on "Specials" screen : " please find link required in F6" copied and pasted link fro previous consultation and link completed
<u>22/07/2022 09:50</u>	<u>Miss Bethan Bailey at Church Street Surgery</u>
Comment	Had call from company regarding sending an email to DR Chant directly- said it normally goes through main email. Don't normally give their personal NHS emails out. He said it couldn't be sent to anyone else except the reference directly- so asked to pass on his contact number for the GP to cial him back. TEL- 0207 501 2964
<u>22/07/2022 11:48</u>	<u>Dr Darren Chant at Administration</u>
History	Telephone triage consultation requested " can you please call 02075012964 (regarding reference)" I completed a web link yesterday. I provided the surgery's email address. this company wish for my personal address. For (i) patient safety (I would not wish to receive a time sensitive email sent to me if I am away and unable to respond) and (ii) to prevent my NHS email address being distributed without my consent, correspondence related to this matter needs to be addressed to the surgery email address. reception to advise this company
Comment	
<u>03/02/2023 09:58</u>	<u>Dr Jamie McKelvie at Church Street Surgery</u>
History	called 10.01 no reply straight to voicemail to call back to make appointment later
<u>03/02/2023 10:03</u>	<u>Dr Jamie McKelvie at Church Street Surgery</u>
Problem	testicle growth
History	07383443420 new mobile number for record . swelling in testicle possible blood in urine weight loss revie F2F 14.30
<u>03/02/2023 14:19</u>	<u>Dr Jamie McKelvie at Church Street Surgery</u>
Problem	swelling on testicles
History	has swelling on lower pole left testicle , diabetic but urine frequency nocturia weight loss 2 stone 3/12 works as chef in mainland hotels
Examination	chaperone declined consent given 1.5 cm swelling lower pole left testis tender right testicle upper pole for review
Comment	for testicle USS, urine sample for msu , bloods FBC Ue LFT GGT CRP ESR PSA CEA Hba1c
<u>07/02/2023 10:02</u>	<u>Mrs Nareenah Wakefield at Church Street Surgery</u>
Comment	Urinalysis = no abnormality MSU sent.
Test Request	CEA - Completed, CRP - Completed, Urea and Electrolytes - Completed, Gamma GT - Completed, Liver Function Tests - Completed, PSA - Completed, HbA1c - Completed, ESR - Completed, Full Blood Count - Completed, Midstream Urine (C&S) - Completed
<u>07/02/2023</u>	<u>Sister Ann Logan at General Practice Surgery</u>
Result	HbA1c level (DCC aligned) seen and dealt with see F6 (ANNLO_19055)
<u>07/02/2023</u>	<u>Dr Sabeeel Saleem at General Practice Surgery</u>
Result	(Non Coded Event - Prostate Specific Ag) Normal - no action (SASA) (Non Coded Event - Carcino-Embryonic Ag) passed to Dr McKelvie (SASA) Liver function test passed to Dr McKelvie (SASA) Gamma - G.T. level passed to Dr McKelvie (SASA) Urea and electrolytes Normal - no action (SASA) Plasma C reactive protein Normal - no action (SASA)
<u>07/02/2023</u>	<u>Dr Sabeeel Saleem at General Practice Surgery</u>
Result	Liver function test passed to Dr McKelvie (SASA) Gamma - G.T. level passed to Dr McKelvie (SASA) Urea and electrolytes Normal - no action (SASA) Plasma C reactive protein Normal - no action (SASA)
<u>07/02/2023</u>	<u>Dr Sabeeel Saleem at General Practice Surgery</u>
Result	Erythrocyte sedimentation rate passed to Dr McKelvie (SASA) Full blood count - FBC Normal - no action (SASA)
<u>07/02/2023</u>	<u>Dr Sabeeel Saleem at General Practice Surgery</u>
Result	Full blood count - FBC Normal - no action (SASA)
<u>09/02/2023 12:03</u>	<u>Sister Ann Logan at Church Street Surgery</u>
Comment	Telephone encounter HbA1C 132 to inform of the same is on no medication, needs to stop eating sweets biscuits cakes etc from now and start metformin 1 tab am with breakfast for a week then twice daily with food, is going away tomorrow for 2 weeks so will leave script at reception and made a follow up appointment the day after he returns , also needs to have chcl checked
<u>09/02/2023 12:22</u>	<u>Dr Daniel Paterson at Church Street Surgery</u>
History	patient not seen . message request. see notes from sister logan
Medication	Metformin Hydrochloride Tablets 500 mg 56 TABLET INITIALLY ONE TO BE TAKEN EACH MORNING WITH BREAKFAST FOR 1 WEEK THEN INCREASED TO TWICE PER DAY WITH FOOD
<u>10/02/2023 12:02</u>	<u>Dr Jamie McKelvie at Church Street Surgery</u>
Problem	weight loss and CEA elevated
History	urgent referral to bowel surgeons -> this 45 year old chef has lost 2 stone in weight over the last three months , despite HbA1c of 132 , and checking his CEA showed level of 19.4 , GGT 217 , ALT 51 alk phos 217 , ESR 16 please could you determine if there is a bowel malignancy here
<u>28/02/2023 09:26</u>	<u>Mrs Nareenah Wakefield at Church Street Surgery</u>
Examination	10g monofilament sensation present 10g monofilament sensation R foot normal 10g monofilament sensation L foot normal O/E - R.dorsalis pedis present O/E - L.dorsalis pedis present O/E - Right diabetic foot at low risk O/E - Left diabetic foot at low risk Blood pressure reading 146/95 mm Hg O/E - height, 181 cm O/E - weight, 111.9 Kg Body Mass Index, 34.16
Social	Alcohol consumption, 0 units/week
Comment	Blood pressure slightly elevated. For 24 hour blood pressure monitor. Ongoing issues with lump to testicle. Dr McKelvie has referred for USS. Pt reports that lump has increased in size since seen. Has grown initially from pea size to grape size to slightly larger now. Task sent to Dr Saleem.
Follow up	(diary entry deleted) (Not Known) (diary entry deleted) (Not Known)
Test Request	Vitamin B12 - Completed, Lipid profile (Inc. HDL) - Completed, Folate - Completed, Thyroid function tests - Completed, Urine Albumin (ACR or 24 hour) - Requested
Additional	Diabetic on oral treatment
<u>28/02/2023</u>	<u>Mrs Nareenah Wakefield at General Practice Surgery</u>
Result	(Non Coded Event - Serum Folate) Normal - no action (NARE)

	(Non Coded Event - Serum Vitamin B12) Normal - no action (NARE)
<u>28/02/2023</u> Result	<u>Mrs Nareenah Wakefield at General Practice Surgery</u> Thyroid function tests Normal - no action (NARE) Test request : Lipids make appointment with practice nurse (NARE)
<u>06/03/2023</u> Examination	<u>Mrs Trish McLennan at Church Street Surgery</u> 24HRS BLOOD PRESSURE MONITOR APPLIED.
<u>06/03/2023</u> Examination	<u>Mrs Trish McLennan at Church Street Surgery</u> dna for 24hrs blood pressure monitor.
<u>06/03/2023 15:29</u> Comment	<u>Mrs Nareenah Wakefield at Church Street Surgery</u> Discussed cholesterol. Discussed statin, side effects. Discussed CVRA which I advised I would carry out after we get the results of 24 hour blood pressure monitor. Pt advised that due to his diabetes that I would advocate him starting on a statin. Advised to look at NHS website at statins so that we could further the discussion when we have the results from 24 hour monitor.
<u>07/03/2023</u> Additional	<u>Mrs Trish McLennan at Church Street Surgery</u>
<u>07/03/2023</u> Examination	<u>Mrs Trish McLennan at Church Street Surgery</u> average reading awake 118/76 have put to Naminha to discuss Blood pressure reading 118/79 mm Hg O/E - blood pressure reading
<u>27/03/2023</u> Test Request	<u>Mrs Trish McLennan at Church Street Surgery</u> HbA1c - Requested, Urea and Electrolytes - Requested
<u>02/06/2023</u> Additional	<u>Any Doc Man at Docman</u> Letter encounter Administration Letter
<u>06/07/2023 09:14</u> History	<u>Dr Daniel Paterson at Church Street Surgery</u> patient not seen. message request. auth piromicam & naproxen
<u>22/08/2023</u> Additional	<u>Any Doc Man at Docman</u> Letter encounter Imaging Result - US Testes Inverclyde Royal Hospital imaging Audrey Gilmour (Sonographer)
<u>24/10/2023</u> Test Request	<u>Mrs Trish McLennan at Church Street Surgery</u> Vitamin B12 - Completed, Urea and Electrolytes - Completed, Liver Function Tests - Completed, Lipid profile (inc. HDL) - Completed, Folate - Completed, Thyroid function tests - Completed, HbA1c - Completed, Full Blood Count - Completed, Urine Albumin (ACR or 24 hour) - Completed
<u>24/10/2023 09:04</u> Examination	<u>Mrs Nareenah Wakefield at Church Street Surgery</u> 10g monofilament sensation present 10g monofilament sensation R foot normal 10g monofilament sensation L foot normal O/E - R.dorsalis pedis present O/E - L.dorsalis pedis present O/E - Right diabetic foot at low risk O/E - Left diabetic foot at low risk Blood pressure reading 132/82 mm Hg O/E - height, 181 cm O/E - weight, 113.7 Kg Body Mass Index, 34.71 Alcohol consumption, 0 units/week Pt attends for diabetic review. Pt thinks that he has lost more weight. Pt is 2kg heavier than last time. Pt states that he has had knee pain for the last couple of months. Offered assessment from physio but he is working away from today until 19.11.23. Advised to follow up on his return. Discussed BMI and how weight loss would be beneficial to overall condition and knee.
Social	(diary entry deleted) (Not Known) (diary entry deleted) (Not Known)
Comment	Vitamin B12 - Completed, Urea and Electrolytes - Completed, Liver Function Tests - Completed, Lipid profile (inc. HDL) - Completed, Folate - Completed, Thyroid function tests - Completed, HbA1c - Completed, Full Blood Count - Completed, Urine Albumin (ACR or 24 hour) - Requested
Follow up	Diabetic on oral treatment
Test Request	
Additional	
<u>24/10/2023</u> Result	<u>Mrs Nareenah Wakefield at General Practice Surgery</u> Serum total T3 level Normal - no action (NARE) Thyroid function tests Labs suggest recheck in 3-4 months (NARE) Test request : Lipids improving - recheck in 3 months (NARE) Liver function test Normal - no action (NARE) Urea and electrolytes Normal - no action (NARE)
<u>24/10/2023</u> Result	<u>Mrs Nareenah Wakefield at General Practice Surgery</u> Full blood count - FBC Normal - no action (NARE)
<u>24/10/2023</u> Result	<u>Mrs Nareenah Wakefield at General Practice Surgery</u> (Non Coded Event - Serum Folate) Normal - no action (NARE) (Non Coded Event - Serum Vitamin B12) Normal - no action (NARE)
<u>24/10/2023</u> Result	<u>Mrs Nareenah Wakefield at General Practice Surgery</u> HbA1c level (DCCT aligned) good control (NARE)
<u>24/10/2023</u> Result	<u>Mrs Nareenah Wakefield at General Practice Surgery</u> Urine total protein Normal - no action (NARE) Urine albumin Normal - no action (NARE)
<u>01/01/2024</u> Additional	<u>Any Doc Man at Docman</u> Letter encounter Out of Hours Seen in A&E
<u>22/03/2024</u> Additional	<u>Any Doc Man at Docman</u> Letter encounter Administration Letter Email from patient
<u>03/04/2024</u> Comment	<u>Dr Sabeeh Saleem at Church Street Surgery</u> discussed his email. Its not clear what was asked, seen a private physio, advised to come in so we can asses him and decide. He will make the appt
<u>18/04/2024</u> Additional	<u>Any Doc Man at Docman</u> Letter encounter Clinical Letter Diabetic Eye Screening Diabetic Eye Screening
<u>06/05/2024</u> Additional	<u>Any Doc Man at Docman</u> Letter encounter A&E Discharge Letter Royal Infirmary of Edinburgh Accident & Emergency Dr Zaid Ibrahim
<u>08/05/2024</u> Additional	<u>Any Doc Man at Docman</u> Letter encounter Administration Letter Letter from Patient
<u>18/07/2024 11:28</u>	<u>Dr Darren Chant at Surgery consultation</u>

History	Reception booked this F2F consultation re : " chest infection - coughing for weeks" cough for 4 weeks or so. some sputum yellow in colour. no blood. occ feels wheezy after coughing bouts. no chest pain works as a chef.
Social	Moderate smoker - 10-19 cigs/d
Examination	appears comfortable. HR 80. HS normal. chest clear. temp 36.6
Medication	Amoxicillin Capsules 500 mg 15 CAPSULE ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS
Problem (FIRST)	C/O - low back pain
History	seen by physio earlier in year - advised xray
Comment	left lumbar pains. no changes to bowels or ugs
New Referral	xray (NHS), ... 8HQ1.: Refer for X-Ray (SCI Gateway Referral)
18/07/2024	Any Doc Man at Docman
Additional	Letter from consultant Result Dunoon General X-Ray
26/07/2024 15:30	Dr Darren Chant at Administration
History	Doctor Requested Telephone Appointment(a slot type used solely to discuss results / letters) booked by reception - " re docman"
Comment	recent xray request L Spine was declined. advised pt refer physio
19/08/2024	Ms Chioma Emelugo at Church Street Surgery
Problem	F2F. consent: compliance. left thumb pain x 2/52
History	gradual onset. atraumatic.intermittent. struggles with gripping. activities with thumb. AF: moving thumb, pressing remote
Examination	RP: rest. cocodamol doesn't help have been on and off since 2019. sleep not disturbed.sleep is poor generally. no swelling. pain on palpation at the left thenar eminence,CMCJ , MCPJ and thumb side of the wrist. AROM L wrist: NAD except ulnar deviation which was full but painful at the thumb side of the wrist. Left thumb (P):NAD. MCPJ: full with mild discomfort on flexion. CMCJ: slightly limited and painful in all movts. PROM: full but painful at the CMCJ. MMT: 4/5 limited by pain. Grip strength: fair . thumb grind test :negative. Finkelstein test positive
Social	lives alone. chef. hand dominance depends on the activity
Comment	Rx: AROM and Isometric strengthening exercises to the thumb. cryo/thermotherapy 15 mins several times a day (precautions given). thumb spica for use at work. A:likely dequervains tenosynovitis/ L CMCJ soft tissue irritation P: review in 4/52
20/08/2024 08:32	Dr Darren Chant at Surgery consultation
History	Reception booked this F2F consultation re : " left hand thumb area shooting pains" thumb pain. no specific hx of trauma. ongoing for couple of weeks. seen by physio yesterday
New Referral	pain on abduction of thumb. tender ASB works as a chef. uses both hands (NHS), ... 8HQ1.: Refer for X-Ray (SCI Gateway Referral)
18/09/2024	Ms Chioma Emelugo at Church Street Surgery
Problem	review appt.F2F. consent:verbal/compliance
History	reported improvement in symptoms. reduction in intensity of pain. complaint with HEP. brace helpful. reduced usage of the left hand. Xray:mild OA at L CMCJ
Examination	wrist/thumb brace in situ. mild atrophy at the left thumb. full AROM with discomfort. MMT 4+/5.
Comment	RX: advised against constant wearing of brace which entraps muscle weakness. went over HEP.continue with HEP. P:self manage
19/09/2024 11:47	Mrs Nareenah Wakefield at Church Street Surgery
Examination	10g monofilament sensation present 10g monofilament sensation R foot normal 10g monofilament sensation L foot normal O/E - R.dorsalis pedis present O/E - L.dorsalis pedis present O/E - Right diabetic foot at low risk O/E - Left diabetic foot at low risk Blood pressure reading 131/79 mm Hg O/E - height, 181 cm O/E - weight, 115 Kg Body Mass Index, 35.1 Alcohol consumption, 0 units/week Pt attends for review. Weight increase from last year but has had a couple of injuries this year and not mobile. (diary entry deleted) (Not Known) (diary entry deleted) (Not Known) Vitamin B12 (Active) - Completed, Urea and Electrolytes - Completed, Liver Function Tests - Completed, Lipid profile (inc. HDL) - Completed, Folate - Completed, Thyroid function tests - Completed, HbA1c - Completed, Full Blood Count - Completed, Urine Albumin (ACR or 24 hour) - Requested Diabetic monitoring Diabetic annual review Diabetic on oral treatment
19/09/2024	Dr Darren Chant at General Practice Surgery
Result	Thyroid function tests Normal - no action (NARE) Test request : Lipids Discussed with patient - to commence on statin (NARE) Liver function test Alk Phos 152 otherwise normal. check Vit D (DARR) Urea and electrolytes Normal - no action (NARE)
19/09/2024	Mrs Nareenah Wakefield at General Practice Surgery
Result	HbA1c level (DCCT aligned) discussed with patient - increase metformin titrating dose to 1g BD - see 16 (NARE)
19/09/2024	Dr Daniel Paterson at General Practice Surgery
Result	(Non Coded Event - Serum Folate) Just out of normal range - OK (DP) (Non Coded Event - Active B12) Normal - no action (DP)
19/09/2024	Mrs Nareenah Wakefield at General Practice Surgery
Result	Full blood count - FBC Normal - no action (NARE)
26/09/2024 13:30	Mrs Nareenah Wakefield at Church Street Surgery
Comment	Telephone consultation with pt. Advised hba1c and cholesterol.
27/09/2024 09:44	Mrs Nareenah Wakefield at Church Street Surgery
Comment	Telephone consultation with yesterday evening so written in retrospect. Discussed hba1c which is at 89. Advised to increase metformin to 1g am and 500mg pm for 1 week then lg BD. Cholesterol raised at 5.9. Discussed statin as pt is diabetic. Discussed side effects also. Pt is happy to commence statin and increase dose of metformin. Advised pt to book in for hba1c, LFT and ues in 6 weeks. Added to GP special requests.
27/09/2024 10:12	Dr Daniel Paterson at Church Street Surgery
History	patient not seen. message request. pls increase metformin and commence on statin - see 16
Medication	Atorvastatin Tablets 20 mg 56 TABLET ONE TO BE TAKEN EACH DAY
30/10/2024	Mrs Trish McLennan at Church Street Surgery
Test Request	HbA1c - Requested, Urea and Electrolytes - Requested, Liver Function Tests - Requested
04/11/2024	Mrs Trish McLennan at Church Street Surgery
Test Request	HbA1c - Completed, Urea and Electrolytes - Completed, Liver Function Tests - Completed
04/11/2024	Dr Darren Chant at General Practice Surgery
Result	Liver function test Alk Phos 157 otherwise normal. Needs Vit D blood test (DARR) Urea and electrolytes normal - no action (DARR)

04/11/2024 Result	<u>Mrs Nareenah Wakefield at General Practice Surgery</u> HbA1c level (DCCT aligned) Discussed with patient - increase metformin to 1g BD (NARE)
06/11/2024 15:40 Comment	<u>Mrs Nareenah Wakefield at Church Street Surgery</u> Telephone consultation - discussed hba1c - advised to increase metformin to 1g bd and recheck in 1 month for initial response. Pt will make an appt for bloods.
06/11/2024 15:42 Test Request	<u>Mrs Nareenah Wakefield at Church Street Surgery</u> HbA1c - Requested, Urea and Electrolytes - Requested
08/11/2024 08:15 Test Request	<u>Miss Bethan Bailey at Church Street Surgery</u> Vitamin D - Requested
08/11/2024 09:08 Comment Test Request	<u>Miss Bethan Bailey at Church Street Surgery</u> Patient consented and blood obtained from left arm. HbA1c - Completed, Urea and Electrolytes - Completed, Vitamin D - Completed
08/11/2024 Result	<u>Mrs Nareenah Wakefield at General Practice Surgery</u> HbA1c level (DCCT aligned) Make appointment with practice nurse (NARE)
08/11/2024 Result	<u>Mrs Nareenah Wakefield at General Practice Surgery</u> Serum 25-Hydroxy vitamin D3 level Normal - no action (NARE) Urea and electrolytes Normal - no action (NARE)
08/11/2024 Result	<u>Mrs Nareenah Wakefield at General Practice Surgery</u>
08/11/2024 11:52 History	<u>Dr Daniel Paterson at Church Street Surgery</u> patient not seen. message request. please increase metformin to 1g BD
19/11/2024 16:38 Comment	<u>Mrs Nareenah Wakefield at Church Street Surgery</u> Telephone consultation with pt - booked in for face to face to discuss gliclazide, hypos, sick day rules etc.
26/11/2024 16:57 Medication	<u>Mrs Nareenah Wakefield at Church Street Surgery</u> Gliclazide Tablets 80 mg 56 TABLET ONE TO BE TAKEN TWICE A DAY WITH FOOD Glucorx Safety Lancets 1.8 mm/28 gauge 100 lancet TO BE USED AS DIRECTED Wavesense Jazz Test strips 100 strip USE AS DIRECTED Sharpsafe Container 1 litre, Orange 1 device AS DIRECTED
26/11/2024 17:32 Comment	<u>Mrs Nareenah Wakefield at Church Street Surgery</u> Pt attends to discuss gliclazide. We discussed hypos and sick day rules. pt does not drive. Whilst showing pt how to use glucometer, BMs = 26.mmol. Pt unable to provide urine sample and no working ketone monitor in surgery. I advised pt that he had to keep checking his blood sugar. Fisuh with plenty of non - sugary liquid. Water ideally. Pt feels well - ha just left birthday party. Denies eating anything sugary. I have advised that if blood sugar is not coming down, goes up or if he starts to feel unwell he must attend casually. Pt will commence on gliclazide when he gets home and monitor BM regularly. Discussed with Dr Paterson and he is happy with plan. Written advice given on hypos and DKA. Pt advised to beware of signs and symptoms.
03/12/2024 Test Request	<u>Mrs Trish McLennan at Church Street Surgery</u> HbA1c - Requested, Urea and Electrolytes - Requested
09/12/2024 09:14 Comment Test Request	<u>Miss Bethan Bailey at Church Street Surgery</u> Patient consented and blood obtained from left arm. HbA1c - Completed, Urea and Electrolytes - Completed
09/12/2024 Result	<u>Mrs Nareenah Wakefield at General Practice Surgery</u> Urea and electrolytes Normal - no action (NARE)
09/12/2024 Result	<u>Mrs Nareenah Wakefield at General Practice Surgery</u> HbA1c level (DCCT aligned) commenced gliclazide on 26/11/24 (NARE)
10/12/2024 16:30 History Comment	<u>Dr Daniel Paterson at Church Street Surgery</u> attends asking for fit note. has been made redundant from his job at local cafe. has new job starting but not for a few weeks. went to job centre. they apparently asked him to get a fit note in order that he would not have to look for work in the period between jobs. I have explained that is not how med 3 works and that clearly as he can work (given that he is waiting to start a new job) I am unable to sign him off as being unable to work.
27/03/2025 Additional	<u>Any Doc Man at Docman</u> Letter encounter Clinical Letter Cowal Community Hospital Physiotherapy
30/04/2025 12:40 History Comment	<u>Dr Darren Chant at Administration</u> Message on "Specials" screen : " asking for more cocodamol as hurt back" 30/500 issued yesterday
26/09/2025 Additional	<u>Any Doc Man at Docman</u> Letter encounter immediate outpatient letter oral surgery
13/10/2025 08:53 Examination	<u>Mrs Nareenah Wakefield at Church Street Surgery</u> 10g monofilament sensation present 10g monofilament sensation R foot normal 10g monofilament sensation L foot abnormal O/E - R.dorsalis pedis present O/E - L.dorsalis pedis present O/E - Right diabetic foot at low risk O/E - Left diabetic foot at low risk Blood pressure reading 133/80 mm Hg O/E - height, 181 cm O/E - weight, 113.5 Kg Body Mass Index, 34.64 Alcohol consumption, 0 units/week Robert attends for diabetic review. Reports home BM readings between 6 and 7.5mmols Diabetic monitoring (13/04/2026) Diabetic annual review (15/08/2025) Vitamin B12 (Active) - Completed, Urea and Electrolytes - Completed, Liver Function Tests - Completed, Lipid profile (Inc. HDL) - Completed, Folate - Completed, Thyroid function tests - Completed, HbA1c - Completed, Full Blood Count - Completed, Urine Albumin (ACR or 24 hour) - Requested
Social Comment Follow up	Diabetic monitoring Diabetic annual review Diabetic on oral treatment Self monitoring of blood glucose
13/10/2025 Result	<u>Dr Darren Chant at General Practice Surgery</u> Thyroid function tests normal - no action (DARR) Test request : Lipids normal - no action (DARR) Liver function test Aik Phos 154, as previous. has previously had normal Vit D (DARR) Urea and electrolytes normal - no action (DARR)
13/10/2025 Result	<u>Mrs Nareenah Wakefield at General Practice Surgery</u> HbA1c level (DCCT aligned) Make appointment with practice nurse (NARE)
13/10/2025	<u>Mrs Nareenah Wakefield at General Practice Surgery</u>

Result	(Non Coded Event - Serum Folate) Normal - no action (NARE) (Non Coded Event - Active B12) Normal - no action (NARE)
13/10/2025 Result	<u>Mrs Nareenah Wakefield at General Practice Surgery</u> Full blood count - FBC Normal - no action (NARE)
13/10/2025 10:56 Comment Additional	<u>Ms Jennifer Hirsch at Church Street Surgery</u> No regular medicines listed, noted on prescription pt given penicillin vk 500mg 2 qds. Outpatient clinic letter received Prescription letter EDI Oral Surgery 26.09.25
13/10/2025 11:34 History	<u>Dr Daniel Paterson at Church Street Surgery</u> patient not seen. message request. Piroxicam gel
15/10/2025 14:34 Comment	<u>Mrs Nareenah Wakefield at Church Street Surgery</u> Telephone consultation with Robert re hba1c. Although it has improved from last year, it is still at 83. Discussed adding dapagliflozin and Robert is happy to try. Advised that one of the side effects can cause UTIs so advised to push fluids and let us know if there are any problems. I have asked Robert to book in for blood for 6 weeks. He will confirm leave from work and will contact the surgery.
08/12/2025 12:42 Comment	<u>Miss Bethan Bailey at Church Street Surgery</u> Patient aware appt cancellation for tomorrow- will get a letter sent out when we can book him in again. He noted going away for work- would be back 15th/16th January. This is noted on reappointing list.
03/03/2026 Additional	<u>Any Doc Man at Docman</u> Letter encounter Clinical Letter Cowal Community Hospital Accident & Emergency
12/03/2026 10:55 Examination Comment	<u>Mrs Nareenah Wakefield at Church Street Surgery</u> Body Mass Index, 35.41 O/E - weight 116 Kg Body Mass Index 35 kg/m2 Robert attends today for review. Robert works away as a chef. We discussed Mounjaro today to both try and bring down his hba1c and also for weight loss. We discussed eating in a calorie deficit. He is able to attend for review 4 weekly. We discussed side effects and injection sites today. Robert declines being shown how to use injection but I have sign posted to video online. HbA1c - Completed, Amylase - Completed, Urea and Electrolytes - Completed, Liver Function Tests - Completed
Test Request	
12/03/2026 Result	<u>Mrs Nareenah Wakefield at General Practice Surgery</u> HbA1c level (DCT aligned) commenced on Mounjaro (NARE)
12/03/2026 Result	<u>Dr Daniel Paterson at General Practice Surgery</u> Liver function test Just out of normal range - OK (DP) Urea and electrolytes normal - no action (CLA) (Non Coded Event - Amylase) normal - no action (CLA)
12/03/2026 11:54 History	<u>Dr Daniel Paterson at Church Street Surgery</u> patient not seen. message request. please commence on Mounjaro Mounjaro KwikPen Solution for injection 2.5 mg/0.6 ml, 2.4 ml pre-filled pen 1 pre-filled disposable injection TO BE USED AS DIRECTED Glucorx Carepoint Needles for insulin pens 5 mm/31 gauge 100 NEEDLE TO BE USED AS DIRECTED Sharpak Container 0.5 litre, Orange 1 device TO BE USED AS DIRECTED
23/03/2026 Additional	<u>Any Doc Man at Docman</u> Letter encounter A&E Discharge Letter Royal Infirmary of Edinburgh Ashish Kam
25/03/2026 08:28 History	<u>Dr Daniel Paterson at Church Street Surgery</u> patient not seen. message request. asking for sick line dated 23/03- had to get taken away from work in ambulance?
Additional	eMED3 (2010) new statement issued, not fit for work F4Note.pdf, (Diagnosis: chest infection; Duration: 23/03/2026 - 06/04/2026)
30/03/2026 08:17 History	<u>Dr Daniel Paterson at Church Street Surgery</u> patient not seen. message request. requesting 3 week sickline after OOH sheet in Docman
Comment	alfaty has 2week med 3 in place until 6/4/26. we cannot forward date. if patient still unwell when current med 3 expires then let us know and we can do further week.

Medication

Current	Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
	27/09/2024	Atorvastatin Tablets 20 mg ONE TO BE TAKEN EACH DAY 56 TABLET	29/04/2026P	Dr Darren Chant	REPEAT
	09/02/2023	Metformin Hydrochloride Tablets 500 mg TWO TO BE TAKEN AM AND TWO PM 112 TABLET	29/04/2026P	Dr Darren Chant	REPEAT
	20/03/2020	Co-Codamol 30/500 Tablets TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS) 50 TABLET	29/04/2026P	Dr Darren Chant	REPEAT
	17/04/2018	Modafinil Tablets 100 mg TAKE TWO IN THE MORNING AND ONE AT MIDDAY 90 TABLET	29/04/2026P	Dr Darren Chant	REPEAT
Past	Date Commenced	Drug Details	Date Last Issue	Authorised By	Type
	12/03/2026	Sharpak Container 0.5 litre, Orange TO BE USED AS DIRECTED 1 device	02/04/2026Q	Dr Darren Chant	ACUTE
	12/03/2026	Mounjaro KwikPen Solution for injection 2.5 mg/0.6 ml, 2.4 ml pre-filled pen TO BE USED AS DIRECTED 1 pre-filled disposable injection	12/03/2026P	Dr Daniel Paterson	ACUTE
	12/03/2026	Glucorx Carepoint Needles for insulin pens 5 mm/31 gauge TO BE USED AS DIRECTED 100 NEEDLE	12/03/2026P	Dr Daniel Paterson	ACUTE
	16/02/2026	Wavesense Jazz Test strips USE AS DIRECTED 100 strip	16/02/2026P	Dr Daniel Paterson	ACUTE
	16/02/2026	Glucorx Safety Lancets 1.8 mm/28 gauge TO BE USED AS DIRECTED 100 lancet	16/02/2026P	Dr Daniel Paterson	ACUTE
	13/10/2025	Piroxicam Gel 0.5 % TO BE USED FOUR TIMES A DAY 112 gram	16/01/2026P	Dr Darren Chant	ACUTE
	10/09/2025	Glucorx Safety Lancets 1.8 mm/28 gauge TO BE USED AS DIRECTED 100 lancet	13/10/2025P	Dr Darren Chant	ACUTE
	16/07/2025	Wavesense Jazz Test strips USE AS DIRECTED 100 strip	13/10/2025P	Dr Darren Chant	ACUTE
	16/07/2025	Piroxicam Gel 0.5 % TO BE USED FOUR TIMES A DAY 112 gram	15/08/2025P	Dr Darren Chant	ACUTE
	01/04/2025	Piroxicam Gel 0.5 % TO BE USED FOUR TIMES A DAY 112 gram	29/04/2026P	Dr Daniel Paterson	ACUTE
	15/01/2025	Glucorx Safety Lancets 1.8 mm/28 gauge TO BE USED AS DIRECTED 100 lancet	15/01/2025P	Dr Darren Chant	ACUTE
	15/01/2025	Wavesense Jazz Test strips USE AS DIRECTED 100 strip	15/01/2025P	Dr Darren Chant	ACUTE
	26/11/2024	Gliclazide Tablets 80 mg ONE TO BE TAKEN TWICE A DAY WITH FOOD 56 TABLET	26/11/2024P	Dr Daniel Paterson	ACUTE
	26/11/2024	Wavesense Jazz Test strips USE AS DIRECTED 100 strip	26/11/2024P	Dr Daniel Paterson	ACUTE
	26/11/2024	Glucorx Safety Lancets 1.8 mm/28 gauge TO BE USED AS DIRECTED 100 lancet	26/11/2024P	Dr Daniel Paterson	ACUTE
	26/11/2024	Sharpak Container 1 litre, Orange AS DIRECTED 1 device	26/11/2024P	Dr Daniel Paterson	ACUTE
	20/09/2024	Piroxicam Gel 0.5 % TO BE USED FOUR TIMES A DAY 112 gram	20/09/2024P	Dr Daniel Paterson	ACUTE
	16/07/2024	Amoxicillin Capsules 500 mg ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS 15 CAPSULE	16/07/2024P	Dr Darren Chant	ACUTE
	05/02/2024	Piroxicam Gel 0.5 % TO BE USED FOUR TIMES A DAY 112 gram	05/02/2024P	Dr Sabeel Saleem	ACUTE
	15/12/2023	Piroxicam Gel 0.5 % TO BE USED FOUR TIMES A DAY 112 gram	15/12/2023P	Dr Sabeel Saleem	ACUTE
	17/10/2023	Piroxicam Gel 0.5 % TO BE USED FOUR TIMES A DAY 112 gram	17/10/2023P	Dr Daniel Paterson	ACUTE
	06/07/2023	Piroxicam Gel 0.5 % TO BE USED FOUR TIMES A DAY 112 gram	09/08/2023P	Dr Daniel Paterson	ACUTE
	06/07/2023	Naproxen E/c tablets 250 mg ONE TO BE TAKEN THREE TIMES A DAY WITH FOOD 56 tablet	06/07/2023P	Dr Daniel Paterson	ACUTE
	12/04/2023	Piroxicam Gel 0.5 % TO BE USED FOUR TIMES A DAY 112 gram	12/04/2023P	Dr Sabeel Saleem	ACUTE
	11/01/2023	Naproxen E/c tablets 250 mg ONE TO BE TAKEN THREE TIMES A DAY WITH	03/02/2023P	Dr Sabeel Saleem	ACUTE

11/01/2023	FOOD 56 tablet	03/02/2023P	Dr Sabeel Saleem	ACUTE
12/10/2022	Piroxicam Gel 0.5 % TO BE USED FOUR TIMES A DAY 112 gram	12/10/2022P	Dr Sabeel Saleem	ACUTE
13/07/2022	Naproxen E/c tablets 250 mg ONE TO BE TAKEN THREE TIMES A DAY WITH FOOD 56 tablet	13/07/2022P	Dr Sabeel Saleem	ACUTE
12/07/2022	Piroxicam Gel 0.5 % TO BE USED FOUR TIMES A DAY 112 gram	12/07/2022P	Dr Sabeel Saleem	ACUTE
27/05/2022	Piroxicam Gel 0.5 % TO BE USED FOUR TIMES A DAY 112 gram	27/05/2022P	Dr Sabeel Saleem	ACUTE
27/05/2022	Naproxen E/c tablets 250 mg ONE TO BE TAKEN THREE TIMES A DAY WITH FOOD 56 tablet	27/05/2022P	Dr Sabeel Saleem	ACUTE
11/04/2022	Piroxicam Gel 0.5 % TO BE USED FOUR TIMES A DAY 112 gram	11/04/2022P	Dr Sabeel Saleem	ACUTE
01/04/2022	Naproxen E/c tablets 250 mg ONE TO BE TAKEN THREE TIMES A DAY WITH FOOD 56 tablet	01/04/2022P	Dr Darren Chant	ACUTE
14/02/2022	Naproxen E/c tablets 250 mg ONE TO BE TAKEN THREE TIMES A DAY WITH FOOD 56 tablet	14/02/2022P	Dr Sabeel Saleem	ACUTE
14/02/2022	Piroxicam Gel 0.5 % TO BE USED FOUR TIMES A DAY 112 gram	14/02/2022P	Dr Sabeel Saleem	ACUTE
09/11/2021	Naproxen E/c tablets 250 mg ONE TO BE TAKEN THREE TIMES A DAY WITH FOOD 56 tablet	09/11/2021P	Dr Sabeel Saleem	ACUTE
09/11/2021	Piroxicam Gel 0.5 % TO BE USED FOUR TIMES A DAY 112 gram	09/11/2021P	Dr Sabeel Saleem	ACUTE
04/08/2021	Naproxen E/c tablets 250 mg ONE TO BE TAKEN THREE TIMES A DAY WITH FOOD 56 tablet	10/08/2021P	Dr Sabeel Saleem	ACUTE
04/08/2021	Piroxicam Gel 0.5 % TO BE USED FOUR TIMES A DAY 112 gram	10/08/2021P	Dr Sabeel Saleem	ACUTE
31/05/2021	Piroxicam Gel 0.5 % TO BE USED FOUR TIMES A DAY 112 gram	23/06/2021P	Dr Sabeel Saleem	ACUTE
31/05/2021	Naproxen E/c tablets 250 mg ONE TO BE TAKEN THREE TIMES A DAY WITH FOOD 56 tablet	23/06/2021P	Dr Sabeel Saleem	ACUTE
18/02/2021	Naproxen E/c tablets 250 mg ONE TO BE TAKEN THREE TIMES A DAY WITH FOOD 56 tablet	29/03/2021P	Ms Gail Ritchie	ACUTE
18/02/2021	Piroxicam Gel 0.5 % TO BE USED FOUR TIMES A DAY 112 gram	29/03/2021P	Ms Gail Ritchie	ACUTE
07/01/2021	Naproxen E/c tablets 250 mg ONE TO BE TAKEN THREE TIMES A DAY WITH FOOD 56 tablet	07/01/2021P	Dr Sabeel Saleem	ACUTE
07/01/2021	Piroxicam Gel 0.5 % TO BE USED FOUR TIMES A DAY 112 gram	07/01/2021P	Dr Sabeel Saleem	ACUTE
21/10/2020	Diazepam Tablets 2 mg ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED FOR BACK SPASM 15 tablet	28/10/2020P	Dr Darren Chant	ACUTE
21/10/2020	Piroxicam Gel 0.5 % TO BE USED FOUR TIMES A DAY 112 gram	28/10/2020P	Dr Darren Chant	ACUTE
25/09/2020	Naproxen E/c tablets 250 mg ONE TO BE TAKEN THREE TIMES A DAY WITH FOOD 56 tablet	25/09/2020P	Ms Gail Ritchie	ACUTE
23/10/2019	Tramadol Hydrochloride M/R capsules 100 mg ONE TWICE A DAY 1*60 CAPSULE	23/10/2019P	Dr Sabeel Saleem	ACUTE
02/09/2019	Tramadol Hydrochloride M/R capsules 100 mg ONE TWICE A DAY 1*60 CAPSULE	02/09/2019P	Dr Sabeel Saleem	ACUTE
10/07/2019	Tramadol Hydrochloride M/R capsules 100 mg ONE TWICE A DAY 1*60 CAPSULE	10/07/2019P	Dr Sabeel Saleem	ACUTE
03/03/2019	Tramadol Hydrochloride M/R capsules 100 mg ONE TWICE A DAY 1*60 CAPSULE	01/05/2019P	Dr Darren Chant	ACUTE
03/01/2019	Tramadol Hydrochloride M/R capsules 100 mg ONE TWICE A DAY 1*60 CAPSULE	14/01/2019P	Dr Paul Hickman	ACUTE
26/03/2018	365 Non Woven Island Dressing 5 cm x 7.2 cm TO BE USED AS DIRECTED 50 dressing	30/04/2018P	Dr Paul Hickman	ACUTE
22/02/2018	Co-Codamol 30/500 Tablets TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS) 50 TABLET	22/02/2018P	Dr Sabeel Saleem	ACUTE
19/03/2018	Co-Codamol 30/500 Tablets TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS) 50 TABLET	18/12/2018P	Dr Sabeel Saleem	REPEAT

Lab Report ID : B,18.9041732.E Coding Status : Coded
 Filed By User : Dr Paul Hickman File Status : Filed
 Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon
 ** ABNORMAL **

Report Text :

-Syncope episode Hyperten...
 -Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except GFST and ESR.

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R		Full blood count - FBC Y			
		Just out of normal range - OK (PHICK_19055)			
		White Blood Count		5.8 x10 ⁹ /l (4.0-11.0 U)	NK
		Red Cell Count		5.19 x10 ¹² /l (4.50-6.50 U)	NK
		Haemoglobin	167 g/l	(130-180 U)	NK
		Haematocrit	0.481 l/l	(0.400-0.540 U)	NK
		Mean Cell Volume		92.7 fl (80.0-100.0 U)	NK
		MCH +	32.2 pg	(27.0-32.0 U)	NK
		Platelet Count		213 x10 ⁹ /l (150-400 U)	NK
		Neutrophils	2.5	x10 ⁹ /l (2.0-7.5 U)	NK
		Lymphocytes	2.7	x10 ⁹ /l (1.5-4.0 U)	NK
		Monocytes	0.3	x10 ⁹ /l (0.2-0.8 U)	NK
		Eosinophils	0.19	x10 ⁹ /l (0.00-0.40 U)	NK
		Basophils	0	x10 ⁹ /l (0.0-0.1 U)	NK
		Nucleated RBC		NK	
R		Erythrocyte sedimentation rate			

Normal - no action (PHICK_19055)

ESR 9 mm/hr (1-10 U) NK

Sample Collected Date : 23/02/2018 11:23:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 23/02/2018 14:20:00
 Received Date : 23/02/2018 19:00:06
 Requestor :
 Requestor GMC Code :

Lab Report ID : B,18.9041706.S Coding Status : Coded
 Filed By User : Dr Paul Hickman File Status : Filed
 Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon

**** ABNORMAL ****

Report Text :

-Syncope episode Hyperten...

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R Plasma glucose level	Y				
Make routine appointment (PHICK_19055)					
-Fasting sample					
Glucose	+	6.5	mmol/L	(3.5-6.0 U)	NK

Sample Collected Date : 23/02/2018 11:23:00

Collection Start Date :

Collection End Date :

Received by Lab Date : 23/02/2018 14:25:00

Received Date : 23/02/2018 19:03:34

Requestor :

Requestor GMC Code :

Lab Report ID : B,18.9041707.Z

Filed By User : Dr Paul Hickman

Assigned to :

Coding Status : Coded

File Status : Filed

Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon

**** ABNORMAL ****

Report Text :

-Syncope episode Hyperten...

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R Urea and electrolytes					
Normal - no action (PHICK_19055)					
-Please note change to Abbott Enzymatic Creat method from 24/04/17					
Sodium		137	mmol/L	(133-146 U)	NK
Potassium		4.7	mmol/L	(3.5-5.3 U)	NK
Chloride		103	mmol/L	(95-108 U)	NK
Urea	4.7		mmol/L	(2.5-7.8 U)	NK
Creatinine		82	umol/L	(40-130 U)	NK
Estimated GFR		> 60	ml/min	(>>60 U)	NK
R Liver function test	Y				
Make routine appointment (PHICK_19055)					
-Please note change in Abbott Total Bilirubin method from 18/01/18					
Total Bilirubin		11	umol/L	(<<20 U)	NK
ALT +		114	U/L	(<<50 U)	NK
AST +		54	U/L	(<<40 U)	NK
Alkaline Phosphatase +		138	U/L	(30-130 U)	NK
Albumin		43	g/L	(35-50 U)	NK
R Test request : Lipids	Y				
Make routine appointment (PHICK_19055)					
-Fasting sample					
Cholesterol		7.4	mmol/L		NK
Triglycerides+		2.5	mmol/L	(0.2-2.3 U)	NK
HDL Cholesterol		0.9	mmol/L		NK
LDL-Cholest (calc'd)		5.4	mmol/L		NK
R Serum VLDL cholesterol level			1.1	mmol/L	NK
Chol/HDL ratio			8.2		NK

Sample Collected Date : 23/02/2018 11:23:00

Collection Start Date :

Collection End Date :

Received by Lab Date : 23/02/2018 14:22:00

Received Date : 23/02/2018 19:04:16

Requestor :

Requestor GMC Code :

Lab Report ID : B,18.9066796.Y

Filed By User : Dr Sabeel Saleem

Assigned to :

Coding Status : Coded

File Status : Filed

Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon

**** ABNORMAL ****

Report Text :

-monitoring bloods
 -Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except GFST

SPECIMEN : Blood

Abn	Value	Units	Range	Status
R Full blood count - FBC Y				
Normal - no action (SASA)				
White Blood Count			6.3 x10 ⁹ /l (4.0-10.0 U)	NK
Red Cell Count			5.23 x10 ¹² /l (4.50-5.50 U)	NK
Haemoglobin	169	g/l	(130-170 U)	NK
Haematocrit	0.481	l/l	(0.400-0.500 U)	NK
Mean Cell Volume			92.0 fl (83.0-101.0 U)	NK
MCH +	32.3	pg	(27.0-32.0 U)	NK
Platelet Count			228 x10 ⁹ /l (150-410 U)	NK
Neutrophils	2.8	x10 ⁹ /l	(2.0-7.0 U)	NK
Lymphocytes	2.9	x10 ⁹ /l	(1.0-3.0 U)	NK
Monocytes	0.3	x10 ⁹ /l	(0.2-1.0 U)	NK
Eosinophils	0.20	x10 ⁹ /l	(0.02-0.50 U)	NK
Basophils	0	x10 ⁹ /l	(0.0-0.1 U)	NK
Nucleated RBC				NK

Sample Collected Date : 29/03/2018 09:40:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 29/03/2018 14:21:00
 Received Date : 29/03/2018 19:02:13
 Requestor :
 Requestor GMC Code :

Lab Report ID : B,18.9066795.E Coding Status : Coded
 Filed By User : Dr Sabeel Saleem File Status : Filed
 Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon
**** ABNORMAL ****

Report Text :
 -monitoring bloods

SPECIMEN : Blood

Abn	Value	Units	Range	Status
R Plasma glucose level Y				
Make routine appointment (SASA)				
-Fasting sample				
Glucose	+	7.6	mmol/L (3.5-6.0 U)	NK

Sample Collected Date : 29/03/2018 09:40:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 29/03/2018 14:18:00
 Received Date : 29/03/2018 19:03:30
 Requestor :
 Requestor GMC Code :

Lab Report ID : B,18.9066797.P Coding Status : Coded
 Filed By User : Dr Sabeel Saleem File Status : Filed
 Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon
**** ABNORMAL ****

Report Text :
 -monitoring bloods

SPECIMEN : Blood

Abn	Value	Units	Range	Status
R Liver function test Y				
Make routine appointment (SASA)				
-Please note change in Abbott Total Bilirubin method from 18/01/18				
Total Bilirubin			14 umol/L (<<20 U)	NK
ALT +	143	U/L	(<<50 U)	NK
AST +	64	U/L	(<<40 U)	NK
Alkaline Phosphatase +			138 U/L (30-130 U)	NK
Albumin	42	g/L	(35-50 U)	NK
R Test request : Lipids Y				
Make routine appointment (SASA)				
-Fasting sample				
Cholesterol	7.3	mmol/L		NK
Triglycerides+	2.6	mmol/L	(0.2-2.3 U)	NK
HDL Cholesterol		0.8	mmol/L	NK
LDL-Cholest (calc'd)		5.3	mmol/L	NK

R Serum VLDL cholesterol level 1.2 mmol/L NK
Chol/HDL ratio 9.1 NK

Sample Collected Date : 29/03/2018 09:40:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 29/03/2018 14:19:00
Received Date : 29/03/2018 19:04:02
Requestor :
Requestor GMC Code :

Lab Report ID : B,18.9066798.F Coding Status : Coded
Filed By User : Dr Sabeel Saleem File Status : Filed
Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M
ADR : 97 Ardenslate Road Dunoon

**** ABNORMAL ****

Report Text :
-monitoring bloods

SPECIMEN : Blood
Abn Value Units Range Status
R HbA1c level (DCCT aligned) Y
Seen and dealt with (SASA)
HbA1c (IFCC) + 53 mmol/mol (20-42 U) NK

Sample Collected Date : 29/03/2018 09:40:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 29/03/2018 14:17:00
Received Date : 29/03/2018 19:04:08
Requestor :
Requestor GMC Code :

Lab Report ID : B,19.9007481.G Coding Status : Coded
Filed By User : Dr Paul Hickman File Status : Filed
Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M
ADR : 97 Ardenslate Road Dunoon

Report Text :
-fasting bloods

SPECIMEN : Blood
Abn Value Units Range Status
R HbA1c level (DCCT aligned)
Normal - no action (PHICK 19055)
HbA1c (IFCC) 41 mmol/mol (20-42 U) NK

Sample Collected Date : 09/01/2019 10:03:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 09/01/2019 14:52:00
Received Date : 10/01/2019 15:01:27
Requestor :
Requestor GMC Code :

Lab Report ID : B,19.9007363.E Coding Status : Coded
Filed By User : Dr Paul Hickman File Status : Filed
Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M
ADR : 97 Ardenslate Road Dunoon

**** ABNORMAL ****

Report Text :
-fasting bloods

SPECIMEN : Blood
Abn Value Units Range Status
R Test request : Lipids Y
Make routine appointment (PHICK_19055)
-Fasting sample

	Cholesterol	5.8	mmol/L	NK	
	Triglycerides+	2.9	mmol/L	(0.2-2.3 U)	NK
	HDL Cholesterol		0.9	mmol/L	NK
	LDL-Cholest (calc'd)	3.6	mmol/L		NK
R	Serum VLDL cholesterol level		1.3	mmol/L	NK
	Chol/HDL ratio	6.4			NK
R	Serum 25-Hydroxy vitamin D3 level				

Make routine appointment (PHICK_19055)

-Total 25OH Vit D: <25 deficient, 25-50 insufficient, >50 adequate.
 25-OH Vitamin D < 14 nmol/L NK

Sample Collected Date : 09/01/2019 10:03:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 09/01/2019 14:56:00
 Received Date : 10/01/2019 19:00:23
 Requestor :
 Requestor GMC Code :

Lab Report ID : B,23.9026561.S Coding Status : Coded
 Filed By User : Dr Sabeel Saleem File Status : Filed
 Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon
 ** ABNORMAL **

Report Text :
 -swelling lower pole left ...
 -Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except GFST and SickieScan

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R		Full blood count - FBC			
		Normal - no action (SASA - v.1)			
		White Blood Count		5.2 x10 ⁹ /l (4.0-10.0 U)	NK
		Red Cell Count		5.25 x10 ¹² /l (4.50-6.50 U)	NK
		Haemoglobin	167	g/l (130-180 U)	NK
		Haematocrit	0.488	l/l (0.400-0.540 U)	NK
		Mean Cell Volume		93.0 fl (83.0-101.0 U)	NK
		MCH	31.8	pg (27.0-32.0 U)	NK
		Platelet Count		188 x10 ⁹ /l (150-410 U)	NK
		Neutrophils	2.7	x10 ⁹ /l (2.0-7.0 U)	NK
		Lymphocytes	2.0	x10 ⁹ /l (1.1-5.0 U)	NK
		Monocytes	0.3	x10 ⁹ /l (0.2-1.0 U)	NK
		Eosinophils	0.17	x10 ⁹ /l (0.02-0.50 U)	NK
		Basophils	0	x10 ⁹ /l (0.0-0.1 U)	NK
		Nucleated RBC			NK
R		Erythrocyte sedimentation rate		Y	

passed to Dr McKelvie (SASA)
 ESR + 16 mm/hr (0-10 U)NK

Sample Collected Date : 07/02/2023 10:11:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 07/02/2023 14:30:00
 Received Date : 07/02/2023 19:00:15
 Requestor :
 Requestor GMC Code :

Lab Report ID : B,23.9026498.E Coding Status : Coded
 Filed By User : Sister Ann Logan File Status : Filed
 Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon
 ** ABNORMAL **

Report Text :
 -swelling lower pole left ...

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R		HbA1c level (DCCT aligned)			
		seen and dealt with see F6 (ANNLO_19055)			
		HbA1c (IFCC) +	132	mmol/mol (20-41 U)	NK

Sample Collected Date : 07/02/2023 10:11:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 07/02/2023 14:32:00
 Received Date : 07/02/2023 19:00:21
 Requestor :
 Requestor GMC Code :

Lab Report ID : B,23.9026493.B Coding Status : Part Read Coded
 Filed By User : Dr Sabeel Saleem File Status : Filed
 Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon

**** ABNORMAL ****

Report Text :

-swelling lower pole left....

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R	Plasma C reactive protein				
	Normal - no action (SASA)				
	C Reactive Protein			8 mg/L	(0-10 U)NK
R	Urea and electrolytes				
	Normal - no action (SASA)				
	Sodium	133	mmol/L	(133-146 U)	NK
	Potassium	4.0	mmol/L	(3.5-5.3 U)	NK
	Chloride	99	mmol/L	(95-108 U)	NK
	Urea	3.8	mmol/L	(2.5-7.8 U)	NK
	Creatinine	59	umol/L	(40-130 U)	NK
	Estimated GFR	> 60	ml/min	(>>60 U)	NK
R	Gamma - G.T. level	Y			
	passed to Dr McKelvie (SASA)				
	Gamma-GT	+	217	U/L	(<<70 U)NK
R	Liver function test	Y			
	passed to Dr McKelvie (SASA)				
	Total Bilirubin		7	umol/L	(<<20 U)NK
	ALT +	51	U/L	(<<50 U)	NK
	AST	23	U/L	(<<40 U)	NK
	Alkaline Phosphatase	+	217	U/L	(30-130 U)
	Albumin	40	g/L	(35-50 U)	NK
R	Carcino-Embryonic Ag	Y			
	passed to Dr McKelvie (SASA)				
	-CEA should NOT be used as a screening test for bowel Ca.				
	-CEA elevated.				
	-Consistent with but not diagnostic of malignancy.				
	Carcino-Embryonic Ag +	19.4	ug/L	(0.0-5.0 U)	NK
R	Prostate Specific Ag				
	Normal - no action (SASA)				
	Prostate Spec Ag	0.6	ug/L	(0.0-3.0 U)	NK

Sample Collected Date : 07/02/2023 10:11:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 07/02/2023 14:26:00
 Received Date : 08/02/2023 15:00:23
 Requestor :
 Requestor GMC Code :

Lab Report ID : B,23.9042962.S Coding Status : Coded
 Filed By User : Mrs Nareenah Wakefield File Status : Filed
 Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon

**** ABNORMAL ****

Report Text :

-T2DM review

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R	Test request : Lipids	Y			
	make appointment with practice nurse (NARE)				
	Cholesterol	6.1	mmol/L		NK
	Triglycerides	3.0	mmol/L	(0.2-2.3 U)	NK
	HDL Cholesterol	1.0	mmol/L		NK
	LDL-Cholest (calc'd)	3.7	mmol/L		NK
R	Serum VLDL cholesterol level		1.4	mmol/L	NK
	Chol/HDL ratio	6.1			NK

R Thyroid function tests
Normal - no action (NARE)
 TSH 2.44 mU/L (0.35-5.00 U) NK
 Free T4 15.0 pmol/L (9.0-21.0 U) NK
 Total T3 NK

Sample Collected Date : 28/02/2023 09:53:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 28/02/2023 15:16:00
 Received Date : 28/02/2023 19:00:41
 Requestor :
 Requestor GMC Code :

Lab Report ID : B,23.9042962.S Coding Status : Part Read Coded
 Filed By User : Mrs Nareenah Wakefield File Status : Filed
 Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon

Report Text :
 -T2DM review

SPECIMEN : Blood

Abn	Value	Units	Range	Status
R Serum Vitamin B12				
Normal - no action (NARE)				
Serum Vitamin B12	303	ng/l	(200-883 U)	NK
R Serum Folate				
Normal - no action (NARE)				
Serum Folate	6.3	ug/l	(3.1-20.0 U)	NK

Sample Collected Date : 28/02/2023 09:53:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 28/02/2023 15:16:00
 Received Date : 28/02/2023 19:01:09
 Requestor :
 Requestor GMC Code :

Lab Report ID : B,23.9222440.X Coding Status : Coded
 Filed By User : Mrs Nareenah Wakefield File Status : Filed
 Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon

Report Text :
 -T2DM review
 -Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except GFST and SickleScan

SPECIMEN : Blood

Abn	Value	Units	Range	Status
R Full blood count - FBC				
Normal - no action (NARE)				
White Blood Count	6.3	x10 ⁹ /l	(4.0-10.0 U)	NK
Red Cell Count	4.78	x10 ¹² /l	(4.50-6.50 U)	NK
Haemoglobin	151	g/l	(130-180 U)	NK
Haematocrit	0.457	l/l	(0.400-0.540 U)	NK
Mean Cell Volume	95.6	fl	(83.0-101.0 U)	NK
MCH	31.6	pg	(27.0-32.0 U)	NK
Platelet Count	232	x10 ⁹ /l	(150-410 U)	NK
Neutrophils	3.6	x10 ⁹ /l	(2.0-7.0 U)	NK
Lymphocytes	2.1	x10 ⁹ /l	(1.1-5.0 U)	NK
Monocytes	0.3	x10 ⁹ /l	(0.2-1.0 U)	NK
Eosinophils	0.21	x10 ⁹ /l	(0.02-0.50 U)	NK
Basophils	0	x10 ⁹ /l	(0.0-0.1 U)	NK
Nucleated RBC				NK

Sample Collected Date : 24/10/2023 09:27:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 24/10/2023 14:47:00
 Received Date : 24/10/2023 19:01:05
 Requestor :
 Requestor GMC Code :

Lab Report ID : B,23.922277.N Coding Status : Part Read Coded
 Filed By User : Mrs Nareenah Wakefield File Status : Filed
 Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M
 ADR : 97 Ardenslate Road Dunoon
 Report Text :
 -T2DM review

SPECIMEN : Urine

Abn	Value	Units	Range	Status
R Urine albumin				
Normal - no action (NARE)				
Urine Albumin	10	mg/L	{<<20 U}NK	
U Alb/Creat Ratio	0.7	mg/mmol creatinine	(0.0-2.5 U)	NK
R Urine total protein				
Normal - no action (NARE)				
-Unable to calculate protein:creatinine ratio as protein <0.100 g/L				
Urine volume (ml)	NA			NK
-Urine volume				
Urine Creatinine	13.4	mmol/L		NK
-Urine Creatinine				
Urine Protein	< 0.100	g/L	{<<0.200 U}	NK
Urine Protein/volume				NK
U Protein:Creatinine	NA			NK

Sample Collected Date : 24/10/2023 12:33:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 24/10/2023 14:42:00
 Received Date : 24/10/2023 19:01:08
 Requestor :
 Requestor GMC Code :

Lab Report ID : B,23.9222385.A Coding Status : Coded
 Filed By User : Mrs Nareenah Wakefield File Status : Filed
 Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M
 ADR : 97 Ardenslate Road Dunoon
 ** ABNORMAL **

Report Text :
 -T2DM review

SPECIMEN : Blood

Abn	Value	Units	Range	Status
R HbA1c level (DCCT aligned)				
good control (NARE)				
HbA1c (IFCC) +	52	mmol/mol	(20-41 U)	NK

Sample Collected Date : 24/10/2023 09:27:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 24/10/2023 14:49:00
 Received Date : 24/10/2023 19:01:11
 Requestor :
 Requestor GMC Code :

Lab Report ID : B,23.9222359.E Coding Status : Part Read Coded
 Filed By User : Mrs Nareenah Wakefield File Status : Filed
 Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M
 ADR : 97 Ardenslate Road Dunoon
 Report Text :
 -T2DM review

SPECIMEN : Blood

Abn	Value	Units	Range	Status
R Serum Vitamin B12				
Normal - no action (NARE)				
Serum Vitamin B12	280	ng/l	(200-883 U)	NK
R Serum Folate				
Normal - no action (NARE)				
Serum Folate	3.7	ug/l	(3.1-20.0 U)	NK

Sample Collected Date : 24/10/2023 09:27:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 24/10/2023 14:38:00

Received Date : 24/10/2023 19:01:22
 Requestor :
 Requestor GMC Code :

Lab Report ID : B,23.9222359.E Coding Status : Coded
 Filed By User : Mrs Nareenah Wakefield File Status : Filed
 Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon

**** ABNORMAL ****

Report Text :
 -T2DM review

SPECIMEN : Blood

Abn	Value	Units	Range	Status
R Urea and electrolytes				
Normal - no action (NARE)				
Sodium	140	mmol/L	(133-146 U)	NK
Potassium	4.3	mmol/L	(3.5-5.3 U)	NK
Chloride	107	mmol/L	(95-108 U)	NK
Urea	5.8	mmol/L	(2.5-7.8 U)	NK
Creatinine	62	umol/L	(40-130 U)	NK
Estimated GFR	> 60	ml/min	(>>60 U)	NK
R Liver function test				
Normal - no action (NARE - v.2)				
Total Bilirubin	8	umol/L	(<<20 U)	NK
ALT	44	U/L	(<<50 U)	NK
AST	22	U/L	(<<40 U)	NK
Alkaline Phosphatase	109	U/L	(30-130 U)	NK
Albumin	40	g/L	(35-50 U)	NK
R Test request : Lipids				
Improving - recheck in 3 months (NARE - v.2)				
Cholesterol	5.6	mmol/L		NK
Triglycerides	1.9	mmol/L	(0.2-2.3 U)	NK
HDL Cholesterol	0.9	mmol/L		NK
LDL-Cholest (calc'd)	3.8	mmol/L		NK
Serum VLDL cholesterol level			0.9 mmol/L	NK
Chol/HDL ratio	6.2			NK
R Thyroid function tests Y				
Labs suggest recheck in 3-4 months (NARE - v.2)				
-?Thyroid history. Suggest repeat TFTs in 3-4 months to follow up				
TSH	0.04	mU/L	(0.35-5.00 U)	NK
Free T4	12.3	pmol/L	(9.0-21.0 U)	NK
Total T3				NK
R Serum total T3 level				
Normal - no action (NARE)				
Total T3	1.5	nmol/L	(0.9-2.5 U)	NK

Sample Collected Date : 24/10/2023 09:27:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 24/10/2023 14:38:00
 Received Date : 25/10/2023 15:00:07
 Requestor :
 Requestor GMC Code :

Lab Report ID : B,24.9204735.D Coding Status : Coded
 Filed By User : Mrs Nareenah Wakefield File Status : Filed
 Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon

Report Text :
 -T2DM review
 -Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except Sickle Cell Screening

SPECIMEN : Blood

Abn	Value	Units	Range	Status
R Full blood count - FBC				
Normal - no action (NARE)				
White Blood Count	6.7	x10 ⁹ /l	(4.0-10.0 U)	NK
Red Cell Count	5.00	x10 ¹² /l	(4.50-6.50 U)	NK
Haemoglobin	153	g/l	(130-180 U)	NK
Haematocrit	0.449	l/l	(0.400-0.540 U)	NK
Mean Cell Volume	89.8	fl	(83.0-101.0 U)	NK
MCH	30.6	pg	(27.0-32.0 U)	NK
Platelet Count	199	x10 ⁹ /l	(150-410 U)	NK
Neutrophils	4.1	x10 ⁹ /l	(2.0-7.0 U)	NK
Lymphocytes	2.0	x10 ⁹ /l	(1.1-5.0 U)	NK
Monocytes	0.3	x10 ⁹ /l	(0.2-1.0 U)	NK

Eosinophils	0.15	x10 ⁹ /l	(0.02-0.50 U)	NK
Basophils	0	x10 ⁹ /l	(0.0-0.1 U)	NK
Nucleated RBC				NK

Sample Collected Date : 19/09/2024 11:59:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 19/09/2024 14:38:00
 Received Date : 19/09/2024 15:00:27
 Requestor :
 Requestor GMC Code :

Lab Report ID : B,24.9204794.L	Coding Status	: Coded
Filed By User : Dr Darren Chant	File Status	: Filed
Assigned to :	Task Status	: No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon

**** ABNORMAL ****

Report Text :

-T2DM review

-Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except Sickle Cell Screening

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R	Urea and electrolytes				
	Normal - no action (NARE)				
	Sodium	137	mmol/L	(133-146 U)	NK
	Potassium	4.3	mmol/L	(3.5-5.3 U)	NK
	Chloride	104	mmol/L	(95-108 U)	NK
	Urea	5.2	mmol/L	(2.5-7.8 U)	NK
	Creatinine	61	umol/L	(40-130 U)	NK
	Estimated GFR	> 60	ml/min	(>>60 U)	NK
R	Liver function test	Y			
	Alk Phos 152 otherwise normal. check Vit D (DARR)				
	Total Bilirubin	10	umol/L	(<<20 U)	NK
	ALT	41	U/L	(<<50 U)	NK
	AST	24	U/L	(<<40 U)	NK
	Alkaline Phosphatase +	152	U/L	(30-130 U)	NK
	Albumin	41	g/L	(35-50 U)	NK
R	Test request : Lipids				
	Discussed with patient - to commence on statin (NARE)				
	Cholesterol	5.9	mmol/L		NK
	Triglycerides	2.2	mmol/L	(0.2-2.3 U)	NK
	HDL Cholesterol	0.9	mmol/L		NK
	LDL-Cholest (calc'd)	4.0	mmol/L		NK
R	Serum VLDL cholesterol level	1.0	mmol/L		NK
	Chol/HDL ratio	6.6			NK
R	Thyroid function tests				
	Normal - no action (NARE)				
	TSH	1.34	mU/L	(0.35-5.00 U)	NK
	Free T4	11.5	pmol/L	(9.0-21.0 U)	NK
	Total T3				NK

Sample Collected Date : 19/09/2024 11:59:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 19/09/2024 14:41:00
 Received Date : 19/09/2024 19:01:31
 Requestor :
 Requestor GMC Code :

Lab Report ID : B,24.9204794.L	Coding Status	: Part Read Coded
Filed By User : Dr Daniel Paterson	File Status	: Filed
Assigned to :	Task Status	: No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon

**** ABNORMAL ****

Report Text :

-T2DM review

-Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except Sickle Cell Screening

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R	Active B12				
	Normal - no action (DP)				
	-Note change in the B12 assay to an active B12 assay from 14/5/24.				
R	Active B12	107	pmol/L	(>>25 U)	NK

R Serum Folate Y
Just out of normal range - OK (DP)
Serum Folate - 2.6 ug/l (3.1-20.0 U) NK

Sample Collected Date : 19/09/2024 11:59:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 19/09/2024 14:41:00
Received Date : 19/09/2024 19:02:09
Requestor :
Requestor GMC Code :

Lab Report ID : B,24.9204825.W Coding Status : Coded
Filed By User : Mrs Nareenah Wakefield File Status : Filed
Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M
ADR : 97 Ardenslate Road Dunoon

**** ABNORMAL ****

Report Text :
-T2DM review

SPECIMEN : Blood
Abn Value Units Range Status
R HbA1c level (DCCT aligned) Y
discussed with patient - increase metformin titrating dose to 1g BD - see f6 (NARE)
HbA1c (IFCC) + 87 mmol/mol (20-41 U) NK

Sample Collected Date : 19/09/2024 11:59:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 19/09/2024 14:45:00
Received Date : 19/09/2024 19:02:16
Requestor :
Requestor GMC Code :

Lab Report ID : B,24.9238435.Z Coding Status : Coded
Filed By User : Dr Darren Chant File Status : Filed
Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M
ADR : 97 Ardenslate Road Dunoon

**** ABNORMAL ****

Report Text :
-re check

SPECIMEN : Blood
Abn Value Units Range Status
R Urea and electrolytes
normal - no action (DARR)
Sodium 137 mmol/L (133-146 U) NK
Potassium 4.4 mmol/L (3.5-5.3 U) NK
Chloride 102 mmol/L (95-108 U) NK
Urea 6.5 mmol/L (2.5-7.8 U) NK
Creatinine 65 umol/L (40-130 U) NK
Estimated GFR > 60 ml/min (>>60 U) NK
R Liver function test Y
Alk Phos 157 otherwise normal. Needs Vit D blood test (DARR)
Total Bilirubin 7 umol/L (<<20 U) NK
ALT 35 U/L (<<50 U) NK
AST 22 U/L (<<40 U) NK
Alkaline Phosphatase + 157 U/L (30-130 U) NK
Albumin 40 g/L (35-50 U) NK

Sample Collected Date : 04/11/2024 10:16:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 04/11/2024 14:27:00
Received Date : 04/11/2024 19:00:28
Requestor :
Requestor GMC Code :

Lab Report ID : B,24.9238433.D Coding Status : Coded
Filed By User : Mrs Nareenah Wakefield File Status : Filed
Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon

**** ABNORMAL ****

Report Text :
-re check

SPECIMEN : Blood

Abn	Value	Units	Range	Status
R HbA1c level (DCCT aligned)	Y			
Discussed with patient - increase metformin to 1g BD (NARE)				
HbA1c (IFCC) +	82	mmol/mol (20-41 U)		NK

Sample Collected Date : 04/11/2024 10:16:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 04/11/2024 14:31:00
Received Date : 04/11/2024 19:01:01
Requestor :
Requestor GMC Code :

Lab Report ID : B,24.9241224.M Coding Status : Coded
Filed By User : Mrs Nareenah Wakefield File Status : Filed
Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon

**** ABNORMAL ****

Report Text :
-increase of metformin

SPECIMEN : Blood

Abn	Value	Units	Range	Status
R HbA1c level (DCCT aligned)	Y			
Make appointment with practice nurse (NARE)				
HbA1c (IFCC) +	83	mmol/mol (20-41 U)		NK

Sample Collected Date : 08/11/2024 09:13:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 08/11/2024 14:42:00
Received Date : 08/11/2024 19:01:43
Requestor :
Requestor GMC Code :

Lab Report ID : B,24.9241265.R Coding Status : Coded
Filed By User : Mrs Nareenah Wakefield File Status : Filed
Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon

Report Text :
-increase of metformin

SPECIMEN : Blood

Abn	Value	Units	Range	Status
R Urea and electrolytes				
Normal - no action (NARE)				
Sodium	134	mmol/L	(133-146 U)	NK
Potassium	4.6	mmol/L	(3.5-5.3 U)	NK
Chloride	96	mmol/L	(95-108 U)	NK
Urea	7.5	mmol/L	(2.5-7.8 U)	NK
Creatinine	71	umol/L	(40-130 U)	NK
Estimated GFR	> 60	ml/min	(>>60 U)	NK
R Serum 25-Hydroxy vitamin D3 level				
Normal - no action (NARE)				
-Total 25OH Vit D: <25 deficient, 25-50 insufficient, >50 adequate.				
25-OH Vitamin D	57	nmol/L		NK

Sample Collected Date : 08/11/2024 09:13:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 08/11/2024 14:40:00
Received Date : 11/11/2024 15:00:15
Requestor :
Requestor GMC Code :

Lab Report ID : B,24.9263065.W Coding Status : Coded
 Filed By User : Mrs Nareenah Wakefield File Status : Filed
 Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon

Report Text :
 -diabetic

SPECIMEN : Blood

Abn	Value	Units	Range	Status
R Urea and electrolytes				
Normal - no action (NARE)				
Sodium	136	mmol/L	(133-146 U)	NK
Potassium	4.9	mmol/L	(3.5-5.3 U)	NK
Chloride	100	mmol/L	(95-108 U)	NK
Urea	5.5	mmol/L	(2.5-7.8 U)	NK
Creatinine	89	umol/L	(40-130 U)	NK
Estimated GFR	> 60	ml/min	(>>60 U)	NK

Sample Collected Date : 09/12/2024 09:18:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 09/12/2024 14:56:00
 Received Date : 09/12/2024 19:00:37
 Requestor :
 Requestor GMC Code :

Lab Report ID : B,24.9263064.H Coding Status : Coded
 Filed By User : Mrs Nareenah Wakefield File Status : Filed
 Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon
**** ABNORMAL ****

Report Text :
 -diabetic

SPECIMEN : Blood

Abn	Value	Units	Range	Status
R HbA1c level (DCCT aligned) Y				
commenced gliclazide on 26/11/24 (NARE)				
HbA1c (IFCC) +	94	mmol/mol	(20-41 U)	NK

Sample Collected Date : 09/12/2024 09:18:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 09/12/2024 14:54:00
 Received Date : 09/12/2024 19:00:38
 Requestor :
 Requestor GMC Code :

File Status	Filed.	Tasks	No Tasks.
Assigned User	Unassigned.	Filed By User	Mrs Christine Goffin
Patient Matched	Yes.		

SCI-DC Back Population Message

Patient Demographics		Name	Date Of Birth	Sex
CHI Number		LEITCH, ROBERT	15-08-1977	Male
1508773076				

Results	Value	Abnormal	Date Recorded	Organisation
ClinicalCode	1		22-01-2025	DRS - National Retinal Screening Programme
Digital retinal screening (68A8.)			22-01-2025	DRS - National Retinal Screening Programme
O/E - left eye background diabetic retinopathy (2BBQ.)			22-01-2025	DRS - National Retinal Screening Programme
O/E - no right diabetic retinopathy (2BBJ.)				

Lab Report ID : B,25.9208935.C Coding Status : Coded
 Filed By User : Mrs Nareenah Wakefield File Status : Filed
 Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon

Report Text :
 -T2DM review
 -Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except Sickie Cell Screening

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R	Full blood count - FEC				
	Normal - no action (NARE)				
	White Blood Count		6.1	x10 ⁹ /l (4.0-10.0 U)	NK
	Red Cell Count		4.81	x10 ¹² /l (4.50-6.50 U)	NK
	Haemoglobin	149	g/l	(130-180 U)	NK
	Haematocrit	0.442	l/l	(0.400-0.540 U)	NK
	Mean Cell Volume		91.9	fl (83.0-101.0 U)	NK
	MCH	31.0	pg	(27.0-32.0 U)	NK
	Platelet Count		230	x10 ⁹ /l (150-410 U)	NK
	Neutrophils	3.5	x10 ⁹ /l	(2.0-7.0 U)	NK
	Lymphocytes	2.1	x10 ⁹ /l	(1.1-5.0 U)	NK
	Monocytes	0.3	x10 ⁹ /l	(0.2-1.0 U)	NK
	Eosinophils	0.14	x10 ⁹ /l	(0.02-0.50 U)	NK
	Basophils	0	x10 ⁹ /l	(0.0-0.1 U)	NK
	Nucleated RBC				NK

Sample Collected Date : 13/10/2025 09:06:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 13/10/2025 14:07:00
 Received Date : 13/10/2025 15:00:32
 Requestor :
 Requestor GMC Code :

Lab Report ID : B,25.9208936.K Coding Status : Coded
 Filed By User : Dr Darren Chant File Status : Filed
 Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon

** ABNORMAL **

Report Text :

-T2DM review

-Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except Sickle Cell Screening

SPECIMEN : Blood

	Abn	Value	Units	Range	Status
R	Urea and electrolytes				
	normal - no action (DARR)				
	Sodium	141	mmol/L	(133-146 U)	NK
	Potassium	4.5	mmol/L	(3.5-5.3 U)	NK
	Chloride	107	mmol/L	(95-108 U)	NK
	Urea	6.5	mmol/L	(2.5-7.8 U)	NK
	Creatinine	63	umol/L	(40-130 U)	NK
	Estimated GFR	> 60	ml/min	(>>60 U)NK	
R	Liver function test				
	Y				
	Alk Phos 154, as previous. has previously had normal Vit D (DARR)				
	Total Bilirubin	6	umol/L	(<<20 U)NK	
	ALT	25	U/L	(<<50 U)NK	
	AST	22	U/L	(<<40 U)NK	
	Alkaline Phosphatase +	154	U/L	(30-130 U)	NK
	Albumin	42	g/L	(35-50 U)	NK
R	Test request : Lipids				
	normal - no action (DARR)				
	Cholesterol	3.4	mmol/L		NK
	Triglycerides	1.5	mmol/L	(0.2-2.3 U)	NK
	HDL Cholesterol	0.9	mmol/L		NK
	LDL-Cholest (calc'd)	1.8	mmol/L		NK
R	Serum VLDL cholesterol level		0.7	mmol/L	NK
	Chol/HDL ratio		3.8		NK
R	Thyroid function tests				
	normal - no action (DARR)				
	TSH	1.71	mU/L	(0.35-5.00 U)	NK
	Free T4	13.9	pmol/L	(9.0-21.0 U)	NK
	Total T3				NK

Sample Collected Date : 13/10/2025 09:06:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 13/10/2025 14:11:00
 Received Date : 13/10/2025 19:00:47
 Requestor :
 Requestor GMC Code :

Lab Report ID : B,25.9208934.A Coding Status : Coded
 Filed By User : Mrs Nareenah Wakefield File Status : Filed
 Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon

**** ABNORMAL ****

Report Text :
-T2DM review

SPECIMEN : Blood

Abn	Value	Units	Range	Status
R HbA1c level (DCCT aligned)	Y			
Make appointment with practice nurse (NARE)				
HbA1c (IFCC) +	83	mmol/mol	(20-41 U)	NK

Sample Collected Date : 13/10/2025 09:06:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 13/10/2025 14:08:00
Received Date : 13/10/2025 19:00:51
Requestor :
Requestor GMC Code :

Lab Report ID : B,25.9208936.K Coding Status : Part Read Coded
Filed By User : Mrs Nareenah Wakefield File Status : Filed
Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon

Report Text :
-T2DM review
-Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except Sickle Cell Screening

SPECIMEN : Blood

Abn	Value	Units	Range	Status
R Active B12				
Normal - no action (NARE)				
-Note change in the B12 assay to an active B12 assay from 14/5/24.				
R Active B12	128	pmol/L	(>>25 U)	NK
R Serum Folate				
Normal - no action (NARE)				
Serum Folate	3.2	ug/l	(3.1-20.0 U)	NK

Sample Collected Date : 13/10/2025 09:06:00
Collection Start Date :
Collection End Date :
Received by Lab Date : 13/10/2025 14:11:00
Received Date : 13/10/2025 19:01:16
Requestor :
Requestor GMC Code :

File Status	Filed.	Tasks	No Tasks.
Assigned User	Unassigned.	Filed By User	Mrs Christine Goffin
Patient Matched	Yes.		

SCI-DC Back Population Message

Patient Demographics	Name	Date Of Birth	Sex
CHI Number 1508773076	LEITCH, ROBERT	15-08-1977	Male

Results	Value	Abnormal	Date Recorded	Organisation
ClinicalCode				
O/E - left eye background diabetic retinopathy (2BBQ.)			03-03-2026	DRS - National Retinal Screening Programme
Digital retinal screening (68A8.)	1		03-03-2026	DRS - National Retinal Screening Programme
O/E - right eye background diabetic retinopathy (2BBP.)			03-03-2026	DRS - National Retinal Screening Programme

Lab Report ID : B,26.9057133.G Coding Status : Part Read Coded
Filed By User : Dr Daniel Paterson File Status : Filed
Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M

ADR : 97 Ardenslate Road Dunoon

**** ABNORMAL ****

Report Text :
-monitoring bloods

SPECIMEN : Blood

Abn	Value	Units	Range	Status
R Amylase				

normal - no action (CLA)
 R Amylase 73 U/L (<<125 U) NK
 Urea and electrolytes
 normal - no action (CLA)
 Sodium 134 mmol/L (133-146 U) NK
 Potassium 4.3 mmol/L (3.5-5.3 U) NK
 Chloride 100 mmol/L (95-108 U) NK
 Urea 4.7 mmol/L (2.5-7.8 U) NK
 Creatinine 64 umol/L (40-130 U) NK
 Estimated GFR > 60 ml/min (>>60 U) NK
 R Liver function test Y
 Just out of normal range - OK (DP)
 Total Bilirubin 9 umol/L (<<20 U) NK
 ALT + 52 U/L (<<50 U) NK
 AST 31 U/L (<<40 U) NK
 Alkaline Phosphatase + 137 U/L (30-130 U) NK
 Albumin 44 g/L (35-50 U) NK

Sample Collected Date : 12/03/2026 11:11:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 12/03/2026 14:54:00
 Received Date : 12/03/2026 19:01:43
 Requestor :
 Requestor GMC Code :

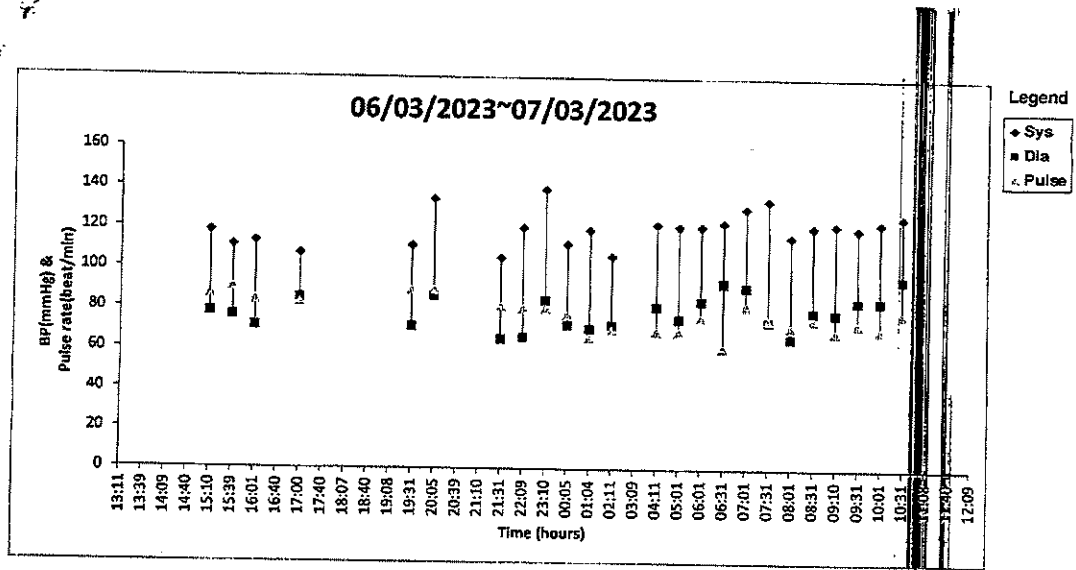
Lab Report ID : B,26.9057129.G Coding Status : Coded
 Filed By User : Mrs Nareenah Wakefield File Status : Filed
 Assigned to : Task Status : No Tasks

Patient Details : (10747) Robert John Leitch DOB : 15/08/1977 CHI : 1508773076 SEX : M
 ADR : 97 Ardenslate Road Dunoon
 ** ABNORMAL **

Report Text :
 -monitoring bloods

SPECIMEN : Blood
 Abn Value Units Range Status
 R HbA1c level (DCCT aligned) Y
 commenced on Mounjaro (NARE)
 HbA1c (IFCC) + 84 mmol/mol (20-41 U) NK

Sample Collected Date : 12/03/2026 11:11:00
 Collection Start Date :
 Collection End Date :
 Received by Lab Date : 12/03/2026 14:54:00
 Received Date : 12/03/2026 19:02:02
 Requestor :
 Requestor GMC Code :



ABPM mode

Patient ID	060323	Study Date	07/03/2023
Patient Name	Robert	Surname	LEACH

Day and night period	Time	Interval
Day Period	06 ~ 22	30 min
Night Period	22 ~ 06	60 min

Day BP load (% of day readings $\geq 135/85$ mmHg)Night BP load (% of night readings $\geq 120/70$ mmHg)

Awake	29.4%
Asleep	100.0%

Overall successful readings

Successful Readings	61.5%
Afib	8.3%

Dip

24-hour Sys	-1.2%
24-hour Dia	6.0%

Hourly Average (Standard deviation)

	Actual Awake / Asleep	Sys (SD)	Dia (SD)	Pulse (SD)	MAP	Afib	Valid readings
24-hour	06 ~ 06	119 (9)	77 (8)	77 (8)	86 (11)	2	24
Awake	06 ~ 22	118 (9)	79 (8)	80 (7)	89 (13)	2	17
Asleep	22 ~ 06	120 (10)	74 (6)	73 (6)	83 (4)	0	7

Date	Time	Sys	Dia	Pulse	MAP	Afib	Remark
06/03/2023	13:11						Abnormal Signals
06/03/2023	13:39						Cuff Leakage
06/03/2023	14:09						Movement
06/03/2023	14:40						Abnormal Signals
06/03/2023	15:10	118	78	87	86		
06/03/2023	15:39	111	76	90	84		
06/03/2023	16:01	113	71	84	74		
06/03/2023	16:40						Abnormal Signals
06/03/2023	17:00	107	85	83	91	*	
06/03/2023	17:40						Movement
06/03/2023	18:07						Abnormal Signals
06/03/2023	18:40						Abnormal Signals
06/03/2023	19:08						Abnormal Signals
06/03/2023	19:31	111	71	89	77		
06/03/2023	20:05	134	86	89	95		
06/03/2023	20:39						Abnormal Signals
06/03/2023	21:10						Abnormal Signals
06/03/2023	21:31	105	65	81	72	*	
06/03/2023	22:09	120	66	80	77		
06/03/2023	23:10	139	84	80	90		
07/03/2023	00:05	112	72	77	81		
07/03/2023	01:04	119	70	66	79		
07/03/2023	02:11	106	72	70	82		
07/03/2023	03:09						Cuff Leakage
07/03/2023	04:11	122	81	69	85		
07/03/2023	05:01	121	75	69	85		
07/03/2023	06:01	121	84	76	90		
07/03/2023	06:31	123	93	61	110		
07/03/2023	07:01	130	91	82	97		
07/03/2023	07:31	134	74	75	123		
07/03/2023	08:01	116	66	71	74		
07/03/2023	08:31	121	79	75	84		
07/03/2023	09:10	122	78	69	84		
07/03/2023	09:31	120	84	73	89		
07/03/2023	10:01	123	84	70	104		
07/03/2023	10:31	126	95	78	105		
07/03/2023	11:08						Cuff Leakage
07/03/2023	11:40						Movement
07/03/2023	12:09						Movement

Acceptable -NW.

Leitch Robert

CHI: 1508773076

OPCL 30/06/2023 v1

Electronically Signed: Ms Sylvia Brown, Consultant

cc.

NHS Confidential: Personal data about a patient

Yours Sincerely,

Dr Zaid Ibrahim, Doctor

Allergy: Ibuprofen

SH: from North Scotland, in Edinburgh for work and staying at work accommodation, smokes 20 cigarettes daily, doesn't drive

Patient was working in a hot kitchen.

Recent history gastroenteritis

A work started having nausea, feeling clammy and dizzy then had LOC (caught before falling), recovered after 2 minutes.

Denies any chest pain, no headache, FAST negative

No seizure activity

Apyrexia

NEWS 0

Chest clear

S1 S2 + 0, ECG NSR

Alert and oriented, nil new neurology

Abdomen and calves SNT

Routine bloods unremarkable

Baseline Trop 7

Impression: likely vasovagal syncope triggered by hot temperature. Patient feels well in himself now and very keen to leave. Offered 3 hr troponin for the unlikely possibility he had a myocardial event that needs to be fully excluded but patient declined. Understanding to return if he becomes unwell again. Happy with plan.

Plan:

dc with worsening advice

Zaid Ibrahim

ED Locum

NHS Lothian

Royal Infirmary of Edinburgh
51 Little France Crescent
Old Dalkeith Road
Edinburgh EH16 4SA

Dr S Saleem
Church Street Surgery
30 Church Street
Dunoon
Argyll
PA23 8BG

Date: 08/05/2024

Emergency Discharge Summary

Patient	Robert Leitch 97 Ardenslate Road Kilm Dunoon Argyllshire PA23 8NN	CHI Date of Birth / Age UHPI A&E Attendance Number	1508773076 15/08/1977 (46 years) 701624632X E5685335
Attendance Date	06/05/2024		
Attendance Time	21:58		
Mode of Arrival	Emergency Ambulance		
Source of Referral	999 Emergency		
Discharge Date	07/05/2024		
Discharge To			

Dear Dr S Saleem

Presentation: heart issues

CLINICAL NOTES:

Clinical note: PC: collapse

PMH:

T2DM

OSA

Complex narcolepsy

DH: as per ECS

08/05/2024, 08:26

Robert Leitch - HEALTH, Churchstdunoon (NHS HIGHLAND) - Outlook

🗑 Delete 📁 Archive ⓘ Report ↩ Reply ↶ Reply all ➜ Forward 🔍 Zoom ⌵

Robert Leitch

👤 This sender robertleitch93@gmail.com is from outside your organisation. Block sender

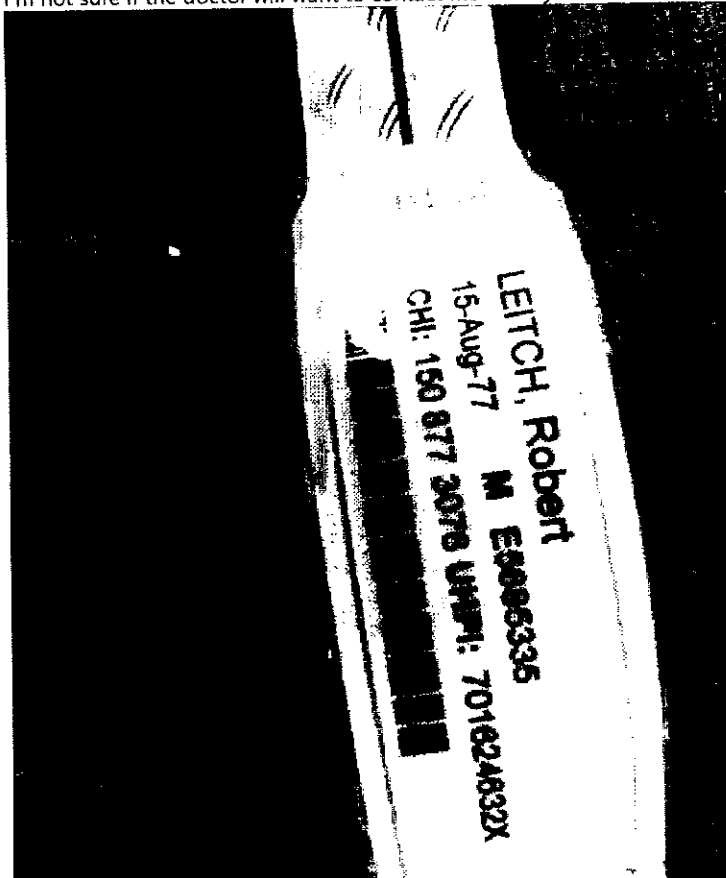
RL Robert Leitch
<robertleitch93@gmail.com>
> ☺ ↩ Reply ↶ Reply all ➜ Forward 📎 ...
To: HEALTH, Churchstdunoon (NHS HIGHLAND) Wed 08/05/2024 06:37

Good morning,

I thought it best to write in so that the doctors are aware whilst at work on Monday night in the seton sands Holliday village kitchen I passed out/fainted and was taken from there to Edinburgh hospital at about 8.30pm and was allowed to leave about 1am.
The doctor I seen ran some test and eventually said he thought it was dehydration and the heat of the kitchen.

I have attached a photo of the hospital bracelet/tag.

I'm not sure if the doctor will want to contact me but my mobile number is +447383443420



about:blank

DCT Gateway - LEITCH, ROBERT, GPH: 1506/15070, 16-July-2024, Clinical Radiology

REFERRING CLINICIAN DETAILS - For referrals from Locums, etc the clinician below is the resident GP/responsible Consultant and Referrer's name and role is noted above		Referring Location Address	
Name	Dr. Darren Chant		30 Church Street
GMC code	4186841	GP code	Dunoon
Referring Location	Church Street Surgery (84241)		Argyll
Practice code	84241		PA23 8BG
			Contact number(s)
			Voice: 01369 703482

CLINICAL INFORMATION			
History of presenting complaint / examination findings / Investigation results			
Presenting Complaint			
Description:	back pain / nerve root irritation		
Referral Summary:	? L4 nerve root irritation. lower back pain. ? loss disc / vertebral height L4		
Examinations requested			
xray Lumbar Spine			
Examinations and Investigations			
<u>Description</u>	<u>Comment</u>	<u>Date Started</u>	
Allergies:	NO		
Diabetes:	NO		
High Risk:	NO		
Pregnant:	NO		
Mobility:	WALKING		
Patient Measurements			
Blood Pressure History			
<u>Systolic</u>	<u>Diastolic</u>	<u>Date Recorded</u>	
132	82	24-Oct-2023	
Body Measurement History			
<u>Body Mass Index</u>	<u>Height</u>	<u>Weight</u>	<u>Date Weight Recorded</u>
34.71	181	113.7	24-Oct-2023
Clinical warnings			
Allergies			
<u>Description</u>	<u>Comment</u>		
Adverse reaction to Ibuprofen	sore joint, bruising		
Additional relevant information			
Social circumstances			
Ethnic Origin: Unavailable			

Dr. Darren Chant	Date of referral:	16-Jul-2024	Exposure justifications: (Radiographer/Radiologist's initials)
Signature of referring doctor (or other professional) accepted as holograph	Out of hours contact number		Patient ID checked: (Radiographer/Radiologist's initials)
I understand that there may be a risk from x-rays in pregnancy			
Patient's signature			

Mr Robert Leitch		15/08/1977	Male	Transferred Out
19/07/2016	Activated partial thromboplastin time ratio	= 1.3 second	Abnormal	APTT Ratio
Infectious titres and antibodies		=		HCV antibody : - Not detected by
06/10/2016	Hepatitis C antibody test	=		
Architect		=		This is a SERUM sample.; Hepatitis C
06/10/2016	Hepatitis C antibody test	=		
antibody		=		HBsAg : - Not detected by Architect
06/10/2016	HBsAg antibody level	=		
Anti smooth muscle autoantibodies		=		Smooth Muscle ab - Negative
06/10/2016	Anti smooth muscle autoantibod	=		
Parietal cell autoantibodies		=		Gastric Parietal Cel - Negative
06/10/2016	Parietal cell autoantibodies	=		
HDL/LDL Ratio		= 8.2 ratio		Chol/HDL ratio
18/01/2016	Serum cholesterol/HDL ratio			
Free Thyroxine		= 12.9 pmol/L		Free T4 -
24/01/2017	Serum free T4 level			
Other autoantibodies		=		Liver Cytosol 1 ab - Negative
06/10/2016	Anti liver cytosol type 1 antibody level	=		LKM abs - Negative
06/10/2016	Anti liver kidney microsomal antibody level	=		
Scoring Test Result				
25/01/2016	Score: 7.82	Method: ASSIGN for: Dr Jenny Leigh		
Enzymes/Specific proteins				
06/10/2016	Serum transferrin	= 2.7 g/L		Transferrin -
06/10/2016	Serum transferrin	= mmol/L		Transferrin / Iron
06/10/2016	Serum caeruloplasmin	= mmol/L		Caeruloplasmin
06/10/2016	Serum caeruloplasmin	= 1.34 g/L		Alpha-1-Antitrypsin -
Thrombin time				
06/10/2016	Thrombin time	= 13 second		s
29/08/2016	Thrombin time	= 14 second		s
19/07/2016	Thrombin time	= 14 second		s
Immunology Screening Tests		=		Nuclear ab (rodent)
06/10/2016	Nuclear autoantibody screening test			
Procedures, Specimens and Samples				
24/01/2017	Blood sample -> Lab NOS tft			
06/10/2016	Blood sample -> Lab NOS lft ggt fbc coag(2) bone hba1c hep b + c, iron studies, autoantibodies,serum antitrypsin serum caeruloplasmin			
22/09/2016	Blood test requested Repeat Lfts, GGT, FBC, coag x2, bone, HbA1cViral hepatitis serologyIron studies (for haemochromatosis), autoantibodies, serum f\1-antitrypsin andserum caeruloplasminplease do BMI, waist circumference and BP also			
29/08/2016	Blood sample -> Lab NOS coag			
19/07/2016	Blood sample -> Lab NOS ue lft fbc coag screen			
18/01/2016	Blood sample -> Lab NOS ue lft lipids hdl fasting chol fbc			
Glomerular Filtration Rate				
19/07/2016	GFR calculated abbreviated MDRD	> 60 mL/min		Estimated GFR - ml/min
18/01/2016	GFR calculated abbreviated MDRD	> 60 mL/min		Estimated GFR - ml/min
Other Lab Result Information				
06/10/2016	Occupations	= 0.22 g/L		Caeruloplasmin -
Total patients for report 1				

Mr Robert Leitch		15/08/1977	Male	Transferred Out
18/01/2016	Plasma glucose level	= mmol/L		Fasting sample; Glucose
Bone studies				
06/10/2016	Bone profile	=		Alkaline Phosphatase results IFCC aligned
from 03/08/15.; Bone Profile				
Clotting tests				
06/10/2016	Thrombin time ratio	= 1		TCT ratio
06/10/2016	APTT	= 39 second	Abnormal	s
06/10/2016	Prothrombin time ratio	= 0.9		PT Ratio
06/10/2016	Coagulation/bleeding tests	=		Coagulation Screen
29/08/2016	Thrombin time ratio	= 1		TCT ratio
29/08/2016	APTT	= 40 second	Abnormal	s
29/08/2016	Prothrombin time ratio	= 0.9		PT Ratio
29/08/2016	Coagulation/bleeding tests	=		Coagulation Screen
19/07/2016	Thrombin time ratio	= 1		TCT ratio
19/07/2016	APTT	= 39 second	Abnormal	s
19/07/2016	Prothrombin time ratio	= 0.9		PT Ratio
19/07/2016	Coagulation/bleeding tests	=		Coagulation Screen
Full blood count				
06/10/2016	Full blood count - FBC	=		Full Blood Count
19/07/2016	Full blood count - FBC	=		Full Blood Count
18/01/2016	Full blood count - FBC	=		Full Blood Count
Liver Function tests				
06/10/2016	Liver function tests	=		Test performed on mouse tissue LKM abs =
Liver kidney microsomal abs LC1 abs = Liver cytosolic antigen type 1 abs; I Autoantibodies				
06/10/2016	Liver function test	=		Alkaline Phosphatase results IFCC aligned
from 03/08/15.; Liver Function Tests				
19/07/2016	Liver function test	=		Alkaline Phosphatase results IFCC aligned
from 03/08/15.; Liver Function Tests				
18/01/2016	Liver function test	=		Alkaline Phosphatase results IFCC aligned
from 03/08/15.; Liver Function Tests				
Thyroid function				
24/01/2017	Thyroid function test	=		Thyroid funct test
Urea and Electrolytes				
19/07/2016	Urea and electrolytes	=		Urea & Electrolytes
18/01/2016	Urea and electrolytes	=		Urea & Electrolytes
Hb A1C - Diabetic control				
06/10/2016	Haemoglobin A1c level - IFCC standardised	= 43 mmol/mol	Abnormal	HbA1c (IFCC) - mmol/mol
06/10/2016	Haemoglobin A1c level - IFCC standardised	= mmol/mol		Please note change in method for HbA1c
analysis from 16/02/16.; HbA1C (IFCC)				
Anti Mitochondrial antibodies				
06/10/2016	Antimitochondrial autoantibod.	=		Mitochondrial ab - Negative
Other Laboratory tests				
06/10/2016	Transferrin saturation index	= 37 %		Tferrin Saturation -
18/01/2016	Lipid fractionation	=		Lipid profile
Occupation				
06/10/2016	Occupations	This is a SERUM sample.; HBSAG		Dr Alida Macgregor
Packed Cell Volume				
06/10/2016	Haematocrit	= 0.487 L/L		1/1
19/07/2016	Haematocrit	= 0.542 L/L	Abnormal	1/1
18/01/2016	Haematocrit	= 0.501 L/L		1/1
Basophil count				
06/10/2016	Basophil count	= 0 10^9/L		Basophils - x10^9/l
19/07/2016	Basophil count	= 0 10^9/L		Basophils - x10^9/l
18/01/2016	Basophil count	= 0 10^9/L		Basophils - x10^9/l
Prothrombin time				
06/10/2016	Prothrombin time	= 10 second		Prothrombin Time - s
29/08/2016	Prothrombin time	= 10 second		Prothrombin Time - s
19/07/2016	Prothrombin time	= 10 second		Prothrombin Time - s
Partial thromboplastin time				
06/10/2016	Activated partial thromboplastin time ratio	= 1.3 second	Abnormal	APTT Ratio
29/08/2016	Activated partial thromboplastin time ratio	= 1.3 second	Abnormal	APTT Ratio

Kyles Medical Centre, Kyles Medical Centre, School Road, Tighnabruaich, Argyll, PA21 2BE

Tel: 01700 811207

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Mr Robert Leitch		15/08/1977	Male	Transferred Out
18/01/2016	Serum HDL cholesterol level	= 0.9 mmol/L		HDL Cholesterol -
Low Density Lipoprotein				
18/01/2016	Calculated LDL cholesterol level	= 4.8 mmol/L		LDL-Cholest (calc'd) -
Mean corpuscular haemoglobin				
06/10/2016	Mean corpusc. haemoglobin(MCH)	= 32.6 pg/mL	Abnormal	MCH - pg
19/07/2016	Mean corpusc. haemoglobin(MCH)	= 32.8 pg/mL	Abnormal	MCH - pg
18/01/2016	Mean corpusc. haemoglobin(MCH)	= 31.6 pg/mL		MCH - pg
Mean corpuscular volume				
06/10/2016	Mean corpuscular volume (MCV)	= 97.4 fL	Abnormal	Mean Cell Volume - fl
19/07/2016	Mean corpuscular volume (MCV)	= 105 fL		Mean Cell Volume - fl
18/01/2016	Mean corpuscular volume (MCV)	= 92.6 fL		Mean Cell Volume - fl
Monocyte count				
06/10/2016	Monocyte count	= 0.3 10 ⁹ /L		Monocytes - x10 ⁹ /l
19/07/2016	Monocyte count	= 0.2 10 ⁹ /L		Monocytes - x10 ⁹ /l
18/01/2016	Monocyte count	= 0.3 10 ⁹ /L		Monocytes - x10 ⁹ /l
Neutrophil count				
06/10/2016	Neutrophil count	= 3 10 ⁹ /L		Neutrophils - x10 ⁹ /l
19/07/2016	Neutrophil count	= 3.5 10 ⁹ /L		Neutrophils - x10 ⁹ /l
18/01/2016	Neutrophil count	= 3.7 10 ⁹ /L		Neutrophils - x10 ⁹ /l
Serum Inorganic Phosphate				
06/10/2016	Serum inorganic phosphate	= 1.21 mmol/L		Phosphate -
Platelets				
06/10/2016	Platelet count	= 211 10 ⁹ /L		Platelet Count - x10 ⁹ /l
19/07/2016	Platelet count	= 209 10 ⁹ /L		Platelet Count - x10 ⁹ /l
18/01/2016	Platelet count	= 216 10 ⁹ /L		Platelet Count - x10 ⁹ /l
Potassium				
19/07/2016	Serum potassium	= 4.3 mmol/L		Potassium -
18/01/2016	Serum potassium	= 4.6 mmol/L		Potassium -
Red blood cell count				
06/10/2016	Nucleated red blood cell count	= 0 10 ⁹ /L		Nucleated RBC - x10 ⁹ /l
06/10/2016	Red blood cell (RBC) count	= 5 10 ¹² /L		Red Cell Count - x10 ¹² /l
19/07/2016	Nucleated red blood cell count	= 0 10 ⁹ /L		Nucleated RBC - x10 ⁹ /l
19/07/2016	Red blood cell (RBC) count	= 5.16 10 ¹² /L		Red Cell Count - x10 ¹² /l
18/01/2016	Nucleated red blood cell count	= 0 10 ⁹ /L		Nucleated RBC - x10 ⁹ /l
18/01/2016	Red blood cell (RBC) count	= 5.41 10 ¹² /L		Red Cell Count - x10 ¹² /l
Sodium				
19/07/2016	Serum sodium	= 138 mmol/L		Sodium -
18/01/2016	Serum sodium	= 139 mmol/L		Sodium -
Triiodothyronine				
24/01/2017	Serum total T3 level	= nmol/L		Total T3
Triglycerides				
18/01/2016	Serum triglycerides	= 3.8 mmol/L	Abnormal	Triglycerides -
Thyroid Stimulating Hormone				
24/01/2017	Serum TSH level	= 2.06 mU/L		TSH - mU/L
Urea - blood				
19/07/2016	Serum urea level	= 2.8 mmol/L		Urea -
18/01/2016	Serum urea level	= 3.9 mmol/L		Urea -
Very low density lipoprotein				
18/01/2016	Serum VLDL cholesterol level	= 1.7 mmol/L		VLDL-Chol (calc'd) -
White blood count				
06/10/2016	Total white cell count	= 5.8 10 ⁹ /L		White Blood Count - x10 ⁹ /l
19/07/2016	Total white cell count	= 6.1 10 ⁹ /L		White Blood Count - x10 ⁹ /l
18/01/2016	Total white cell count	= 6.9 10 ⁹ /L		White Blood Count - x10 ⁹ /l
Lymphocyte count				
06/10/2016	Lymphocyte count	= 2.2 10 ⁹ /L		Lymphocytes - x10 ⁹ /l
19/07/2016	Lymphocyte count	= 2.1 10 ⁹ /L		Lymphocytes - x10 ⁹ /l
18/01/2016	Lymphocyte count	= 2.6 10 ⁹ /L		Lymphocytes - x10 ⁹ /l
Blood glucose				
18/01/2016	Plasma glucose level	= 5.8 mmol/L		Glucose -

Mr Robert Leitch**15/08/1977****Male****Transferred Out**

18/01/2016 12:07.00 BP 120/84 taken Sitting reading

Cuff: Standard

recall due:

O/E - blood pressure

14/01/2016 11:22.00 BP 134/88 taken Sitting reading

Cuff: Standard

recall due:

O/E - blood pressure

Health Promotion - Smoking

24/01/2017 Smoking cessation advice for Smoking

10/01/2017 Smoking cessation advice for Smoking

Weight

06/10/2016 Weight: 125.2 kgs BMI: 39.5 O/E - weight

Height06/10/2016 Height: 1.78 metres O/E - height
Roxburgh

Ms Jacqueline

Albumin

06/10/2016 Serum albumin = 41 g/L

06/10/2016 Serum albumin = 41 g/L

19/07/2016 Serum albumin = 42 g/L

18/01/2016 Serum albumin = 40 g/L

Albumin -

Albumin -

Albumin -

Albumin -

Alkaline Phosphatase

06/10/2016 Serum alkaline phosphatase = 115 U/L

06/10/2016 Serum alkaline phosphatase = 115 U/L

19/07/2016 Serum alkaline phosphatase = 109 U/L

18/01/2016 Serum alkaline phosphatase = 100 U/L

Alkaline Phosphatase - U/L

Alkaline Phosphatase - U/L

Alkaline Phosphatase - U/L

Alkaline Phosphatase - U/L

Alanine Aminotransferase

06/10/2016 ALT/SGPT serum level = 102 U/L

19/07/2016 ALT/SGPT serum level = 111 U/L

18/01/2016 ALT/SGPT serum level = 101 U/L

Abnormal

Abnormal

Abnormal

ALT - U/L

ALT - U/L

ALT - U/L

Aspartate Aminotransferase

06/10/2016 AST serum level = 54 U/L

19/07/2016 AST serum level = 49 U/L

18/01/2016 AST serum level = 49 U/L

Abnormal

Abnormal

Abnormal

AST - U/L

AST - U/L

AST - U/L

Bilirubin

06/10/2016 Serum total bilirubin level = 9 umol/L

19/07/2016 Serum total bilirubin level = 10 umol/L

18/01/2016 Serum total bilirubin level = 13 umol/L

Total Bilirubin -

Total Bilirubin -

Total Bilirubin -

Calcium

06/10/2016 Serum calcium = 2.53 mmol/L

Calcium -

Calcium adjusted

06/10/2016 Corrected serum calcium level = 2.5 mmol/L

Calcium (adjusted) -

Serum chloride

19/07/2016 Serum chloride = 103 mmol/L

18/01/2016 Serum chloride = 106 mmol/L

Chloride -

Chloride -

Serum cholesterol

18/01/2016 Serum cholesterol = 7.4 mmol/L

Cholesterol -

Serum creatinine

19/07/2016 Serum creatinine = 80 umol/L

18/01/2016 Serum creatinine = 81 umol/L

Creatinine -

Creatinine -

Eosinophil count06/10/2016 Eosinophil count = 0.2 10⁹/L19/07/2016 Eosinophil count = 0.2 10⁹/L18/01/2016 Eosinophil count = 0.2 10⁹/LEosinophils - x10⁹/lEosinophils - x10⁹/lEosinophils - x10⁹/l**Serum iron tests**

06/10/2016 Serum iron level = 25 umol/L

Iron -

Gamma Glutamyl Transpeptidase

06/10/2016 Serum gamma-glutamyl transferase level = 132 U/L

Abnormal

Gamma-GT - U/L

Haemoglobin

06/10/2016 Haemoglobin estimation = 163 g/L

19/07/2016 Haemoglobin estimation = 169 g/L

18/01/2016 Haemoglobin estimation = 171 g/L

Haemoglobin - g/l

Haemoglobin - g/l

Haemoglobin - g/l

High Density Lipoprotein

Kyles Medical Centre, Kyles Medical Centre, School Road, Tighnabruaich, Argyll, PA21 2BE

Tel: 01700 811207

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09/02/2016 issued Nicorette invis 25mg/16hours patches (McNeil
Products Ltd) Supply: (14) patch APPLY TO NON HAIRY SKIN, LEAVE ON 16HRS AND LEAVE OFF OVERNIGHT
06/01/2016 issued Flucloxacillin 500mg capsules Supply: (20) capsule TAKE ONE CAPSULE FOUR
TIMES A DAY
06/01/2016 issued Phenoxyethylpenicillin 250mg tablets Supply: (40) tablet 2 TABLETS FOUR TIMES
DAILY
31/12/2015 issued Phenoxyethylpenicillin 250mg tablets Supply: (56) tablet 2 TABLETS FOUR TIMES
DAILY
31/12/2015 issued Flucloxacillin 500mg capsules Supply: (28) capsule TAKE ONE CAPSULE FOUR
TIMES A DAY
10/12/2015 issued Flucloxacillin 250mg capsules Supply: (28) capsule 1 CAPSULE FOUR TIMES A
DAY

Consultation

19/09/2017	Other	Mrs Linda Aitken
19/09/2017	Other	Mrs Linda Aitken
09/08/2017	Other	Dr David Syme
08/08/2017	Other	Dr David Syme
12/07/2017	Medicine Management	Dr Alida Macgregor
23/03/2017	Other	Dr Scott Goudie
20/02/2017	Surgery consultation	Dr Nicola Hallum
14/02/2017	Surgery consultation	Dr Alida Macgregor
25/01/2017	Results recording	Dr Alida Macgregor
24/01/2017	Surgery consultation	Ms Jacqueline Roxburgh
10/01/2017	Surgery consultation	Dr Nicola Hallum
25/10/2016	Surgery consultation	Dr Nicola Hallum
21/10/2016	Results recording	Dr Alida Macgregor
18/10/2016	Surgery consultation	Dr Nicola Hallum
13/10/2016	Results recording	Dr Alida Macgregor
07/10/2016	Results recording	Dr Alida Macgregor
07/10/2016	Results recording	Dr Alida Macgregor
07/10/2016	Results recording	Dr Alida Macgregor
07/10/2016	Results recording	Dr Alida Macgregor
06/10/2016	Surgery consultation	Ms Jacqueline Roxburgh
04/10/2016	Administration	Dr Alida Macgregor
04/10/2016	Surgery consultation	Dr Alida Macgregor
22/09/2016	Administration	Dr Alida Macgregor
05/09/2016	Surgery consultation	Dr Nicola Hallum
30/08/2016	Results recording	Dr Nicola Hallum
29/08/2016	Surgery consultation	Dr Nicola Hallum
21/07/2016	Surgery consultation	Dr Alida Macgregor
20/07/2016	Results recording	Dr Nicola Hallum
20/07/2016	Results recording	Dr Nicola Hallum
20/07/2016	Results recording	Dr Nicola Hallum
19/07/2016	Surgery consultation	Ms Jacqueline Roxburgh
14/07/2016	Surgery consultation	Dr Alida Macgregor
12/05/2016	Surgery consultation	Dr Alida Macgregor
18/03/2016	Surgery consultation	Dr Nicola Hallum
17/03/2016	Other	Mrs Theresa Taylor-Byrne
11/03/2016	Administration	Mrs Elizabeth Mitchell
07/03/2016	Administration	Dr Laura Cameron
09/02/2016	Other	Dr Catriona Ramsay
25/01/2016	Surgery consultation	Dr Jenny Leigh
22/01/2016	Administration	Mrs Elizabeth Mitchell
19/01/2016	Results recording	Dr Nicola Hallum
19/01/2016	Results recording	Dr Nicola Hallum
19/01/2016	Results recording	Dr Nicola Hallum
18/01/2016	Surgery consultation	Ms Jacqueline Roxburgh
14/01/2016	Other	Dr Catriona Ramsay
06/01/2016	Other	Dr Catriona Ramsay
31/12/2015	Surgery consultation	Dr Jenny Leigh
31/12/2015	Other	Mrs Theresa Taylor-Byrne
14/12/2015	Other	Mrs Theresa Taylor-Byrne
10/12/2015	Other	Dr Catriona Ramsay

Blood pressure

24/01/2017 10:36.00	BP 116/80 taken Sitting	Cuff: Standard	recall due:	O/E - blood pressure
reading				
06/10/2016 16:03.00	BP 126/80 taken Sitting	Cuff: Standard	recall due:	O/E - blood pressure
reading				

12/05/2016 Low back pain 3 week ago slid in walk in fridge (at work) caught himself on shelves, back niggling at time but pain got worse over next few days- self referred physio in Dunoon (private)- gave exercises to do- been doing since monday and woke up this morning and pain worse in back. Left side, into left buttock, occ shooting pains into left thigh. pain also in right side but less so. No paresthesia.o/e: can SLR bilat to 90 but does induce some increased pain. no midline tenderness but paravertebral muscle spasm. no increased pain on axial loading. imp: musculoskeletal back pain with some left leg radiation following slip.increase analgesia, advised GI safety re naproxen. seeing physio on monday again, worsening advice given Dr Alida Macgregor

18/03/2016 Consultation talked over xray result. healed now. no pain. reasonable function in toe. nail looks fungal. try paint, 12 weeks, protect skin around when apply paint. happy with this. confirmed he has been referred to sleep clinic. 25/1/16 Dr Nicola Hallum

07/03/2016 Notes summary on computer Dr Laura Cameron

09/02/2016 Consultation ask for help in stopping smoking, however note that being 1x for sleep apnoea, possible narcolepsy so probably best to avoid champix which would be his preference, discussed alternatives and would like to try patches, review 2w Dr Catriona Ramsay

25/01/2016 Refer for X-Ray Dr Jenny Leigh

25/01/2016 Consultation R big toe still sore if standing long periods. remains red and tender but not hot/inflamed. dry with some crusting down lateral side of nail. had 12d penv and flucloxacillin XR ? bone # or infection Dr Jenny Leigh

25/01/2016 Consultation discussed cholesterol - has been tersting menus this month and eating very unhealthily. reluctant to have statin. eats fruit, veg, salads and fish. will cut down on butter/fat etc. repeat cholesterol in 3m Dr Jenny Leigh

25/01/2016 Consultation ongoing sleepiness during the day. falls asleep in his breakfast, sitting down for a minute, on the bus or mid conversation. has been tested for sleep apnoea 2013 and negative. changed work, lost 4 stone and still problems ? narcolepsy. if laughing can feel as though going to fall asleep. epworth sleepiness scale : 22refer back to gartnaval Dr Jenny Leigh

22/01/2016 Patient MRE received from HB Mrs Elizabeth Mitchell

14/01/2016 Consultation toe now healing well, discussed smoking and smoking cessation and previously had Champix for 7 m but ran out and started smoking again, recovering alcoholic, no abstinent, no PH depression/ anxiety, , needs up to date U/e LFT, FBC, lipids and blood sugar then review re starting champix Dr Catriona Ramsay

06/01/2016 Consultation toe improving , less red, minimal tenderness, no discharge. no indication for X-ray at present but extend AB 5 days and review by me next week Dr Catriona Ramsay

31/12/2015 Consultation stubbed R big toe 20d ago. had 5d course flucloxacillin but pain getting worse over the last week and redness which had improved now spreading from site of avulsed nail up to IP joint. well in self. working as chef so on feet all day in sweaty environment o/e t 36.5 R big toe to tender, warm and red to IPj. nail bed weeping for higher dose flucloxacillin and pen v. review if erythema spreadign further over w/end or unwell. if not settling may need admission for iv antibiotics and XR to exclude #/osteomyelitis Dr Jenny Leigh

10/12/2015 Consultation stubbed toe right foot great toe 2 weeks ago and lost part of the nail and as this has started to grow back very painful and now infected, not diabetic, no PMH of note, smokes 20/day. o/e paronychia, right great toe, no allergies known, will be in this area for at least 3 m, chef at Royal an Lochan, for flucloxacillin 5 days and review if not improving, may need referral podiatry for wedge excision if recurs Dr Catriona Ramsay

01/03/1991 Alcohol dependence syndrome Dr Laura Cameron

Acute and Repeat Issue Therapy

08/08/2017 issued Co-codamol 30mg/500mg tablets	Supply: (100) tablet	TAKE TWO TABLETS FOUR
TIMES PER DAY, MAXIMUM OF 8 TABLETS IN 24 HOURS		
12/07/2017 issued Naproxen 250mg tablets	Supply: (56) tablet	1-2 TABLET TWICE DAILY
12/07/2017 issued Co-codamol 30mg/500mg tablets	Supply: (100) tablet	TAKE TWO TABLETS FOUR
TIMES PER DAY, MAXIMUM OF 8 TABLETS IN 24 HOURS		
23/03/2017 issued Nicorette invis 25mg/16hours patches (McNeil Products Ltd)	Supply: (14) patch ONE PATCH PER DAY, REMOVE AT NIGHT. ROTATE SITE	
23/03/2017 issued Nicotine 1mg/dose oromucosal spray sugar free	Supply: (26.4) ml	1-2 SPRAYS TO PREVENT
CRAVINGS. MAX 4 SPRAYS PER HOUR. 64 SPRAYS PER 24HRS		
14/02/2017 issued Nicotine 1mg/dose oromucosal spray sugar free	Supply: (26.4) ml	1-2 SPRAYS TO PREVENT
CRAVINGS. MAX 4 SPRAYS PER HOUR. 64 SPRAYS PER 24HRS		
10/01/2017 issued Nicotine 1mg/dose oromucosal spray sugar free	Supply: (26.4) ml	1-2 SPRAYS TO PREVENT
CRAVINGS. MAX 4 SPRAYS PER HOUR. 64 SPRAYS PER 24HRS		
10/01/2017 issued Nicorette invis 25mg/16hours patches (McNeil Products Ltd)	Supply: (14) patch ONE PATCH PER DAY, REMOVE AT NIGHT. ROTATE SITE	
18/10/2016 issued Co-amoxiclav 500mg/125mg tablets	Supply: (21) tablet	1 TABLET THREE TIMES A
DAY		
29/08/2016 issued Omeprazole 20mg gastro-resistant capsules	Supply: (28) capsule	1 CAPSULE ONCE A DAY
29/08/2016 issued Ibuprofen 400mg tablets	Supply: (84) tablet	1 TABLET THREE TIMES
DAILY		
29/08/2016 issued Co-codamol 30mg/500mg tablets	Supply: (100) tablet	TAKE TWO TABLETS FOUR
TIMES PER DAY, MAXIMUM OF 8 TABLETS IN 24 HOURS		
21/07/2016 issued Co-codamol 30mg/500mg tablets	Supply: (100) tablet	TAKE TWO TABLETS FOUR
TIMES PER DAY, MAXIMUM OF 8 TABLETS IN 24 HOURS		
12/05/2016 issued Co-codamol 30mg/500mg tablets	Supply: (100) tablet	TAKE TWO TABLETS FOUR
TIMES PER DAY, MAXIMUM OF 8 TABLETS IN 24 HOURS		
12/05/2016 issued Naproxen 250mg tablets	Supply: (56) tablet	1-2 TABLET TWICE DAILY
18/03/2016 issued Amorolfine 5% medicated nail lacquer	Supply: (5) ml	APPLY TO THE INFECTED
NAIL ONCE WEEKLY		

Address

Royal An Lochan Tighnabruaich PA21 1BE
40 Ardensate Crescent Kilm Dunoon Argyll PA22 8NE
Temporary Residents

Address Type: Main address
Address Type: Permanent registered address for

Communication numbers

Mobile phone 07867301185
Telephone - business 01700811239

Problems

Currently Relevant

Started: 10/12/2015 Ended:

Medical History

08/08/2017 Ingrowing great toe nail Bilateral Referred to Podiatry October but no word Will re-refer. Dr David Syme
08/08/2017 Back pain without radiation NOS Recurrence low back pain. Is on his feet a lot in his work as a chef. Continue
Co-codamol but maybe best to avoid Naproxen as ahs had further bruising..... Dr David Syme
08/08/2017 Jury exempt form given Further Soul and Conscience letter given He alleges there is a past problem between
himself and the Sherriff's Office Dr David Syme
23/03/2017 Jury exempt form asked for Requesting letter for Jury DutySoul and conscience lettrter given Dr Scott Goudie
20/02/2017 Non-alcoholic fatty liver nafld score -1.5 therefore low risk fibrosis. plan monitor lfts 3 monthly and encourage
weight loss, monitor hba1c. Dr Nicola Hallum
14/02/2017 Consultation 1) had a bad weekend with smoking- mum went into lochgilthead due to dementia and decision
now that she needs full time care. disussed stressors- hasn't bought any today- prefers oral spray to patches, don't give up as was doing well.2) tfts normal3)
waiting for sleep study appointment.4) not heard from podiatry - 4/12 ago apparently self referred- ask EM to chase. Dr Alida Macgregor
24/01/2017 Consultation continuing with NRT not finding it easy but has resisted buying cigs - excellent and takes long
daily walks and uses playstation as distraction therapy Ms Jacqueline Roxburgh
10/01/2017 Consultation unsatisfactory sleep clinic visit, saw a female dr, not dr carlin, found her abrupt. may repeat tests,
said to see gp anyway. ? will ring to find out. sounds like sleep issue, 8hrs at night, snores, daytime naps getting longer. changed job, lost weight, exercising,
doesn't smoke. check tfts. 2.sees haem tomorrow re coag. 3.smoking cessation, will try patches plus spray. 20 cig per day. Dr Nicola Hallum
25/10/2016 Consultation still luq pain. def now upper not lower qud. eating ok. no nausea. no vomiting. pain not there when
getsup but there most of rest of day. bowels bladde rok, weight down a little, intentionally i think. abdo soft, tender far luq round to renal angle. possibly firmness,
dullness to percussion ?speen or renal mass. due uss upper abdo next week. i think this is next step. then rtn for rv. haem rv later in nov. pct for pain. urine sample
dip for blood pls when can Dr Nicola Hallum
18/10/2016 Consultation left lower quadrant pain since flu type illness last week. bowels loose initially, now improved.
shooting pains up from lower left side to under left ribs. oe apyrex pulse 68 looks well abdo soft tender to deep palpation lif, no peritonism and no herniae. chap
declined. ?diverticulitis. treat with coamox and review if no improvement next week, warned may get further loose stool with ab. scope if happens again. Dr
Nicola Hallum
06/10/2016 Consultation unable to measure waist as tape measure not long enough Ms Jacqueline Roxburgh
04/10/2016 Consultation 1) has appoint for bloods on thursday2) no sleep clinic appoint yet- ask EM to chase this up ?what
has happened as referred in Jan3) left great toe- ingrowing nail- needs to see podiatry for Rx- self refer Dr Alida Macgregor
22/09/2016 Discussed with consultant spoke with Dr Clarke- she thinks with Hx of bruising it does merit further IX, LFTs
suggest ?liver/metabolic syndrome may be cause here but other haem pathology to be rules out. We'll send liver screen off pending clinic appointment so they
have results to hand.AST:ALT ration is 0.44 which suggests NAFLD and certainly a metabolic profile but has very significant alcohol use in past so may need
referral as this raise is persistant and has been tee-total for 15 years. Dr Alida Macgregor
22/09/2016 Administration NOS called to discuss with haem- consultant Dr Clark to call back. non-traumatic spontaneous
bruising ongoing for several months. PT ok, APTT borderline up, plats ok. LFTs ok. prev alcohol abuse. ?significance of APTT ?next step or just monitor. do they
need to see? Dr Alida Macgregor
29/08/2016 Consultation back pain since friday. a frequent occurrence, twisted at work. pain in lumbar spine and shooting
pain down left leg. intermittent. mobilising well. no bladder bowel prob or change. no saddle anaest. no weakness noticed. on exam slr 90 bilat, a little
uncomfortable left side. tender paraspinal left l1l2 level forward flexion reasonable. pns lower limbs intact. mild radicular symptoms. analgesia. mobilise. ws. also
rpt coag as mildly outwith n range. said no more unexplained bruises though. Dr Nicola Hallum
21/07/2016 Consultation further large bruise rt side. bloods unremarkable plats ok a clotting slightly raised APTT
?significance.tetotal for 15 years drank to excess from age 16-24, laterally 50+units per day. not sure what we need to do next- i'll d/w NH ?full liver screen ?refer
haem re bruising. Dr Alida Macgregor
19/07/2016 Consultation Robert noticed new bruising on his rt side, on examination pale broad area of bruising noted
roughly mid axilla line travelling approx 5 inches across, back, 3 inches at widest. area marked. Pt denies any trauma or any other bleeding no new symptoms just
usual leg discomfort which he has had for years, he is chef spend 10-12 hours on his feet at work. Has appointment with gp later in week Ms Jacqueline
Roxburgh
14/07/2016 Consultation 1) still no sleep clinic appoint - referre din Jan that is a bit too long now! given aclinik number
advise dhim to call.2) 10days ago noticed brusie on left leg near back of the knee, was initailly size of 10p but then spread to whole inner thigh , lower leg and
same on other side. Feeling ok otherwise. no other bleeding noticed- cut himself a few times and stopped fine. o/e bruising in area indicated- subtle but there. - no
trauma he remembers. plan should do bloods as minimum I think and if recurs need ot look at further. his mum told him a cousin and his gran both had something
similar done and ended up needing something in knee taken out ?bakrs cyst but no knee pain or swelling so not sure how that fits into the picture. for FBc and
coag screen, LFTs nd UEs please Dr Alida Macgregor

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

Referred By:Referring GP

Electronic Attachment Present:No

Signature of referring doctor (or other professional) Date

BOX 054



84241101651

1508773076

Robert John

Leitch

15.08.1977

Vol 1

No Paperwork

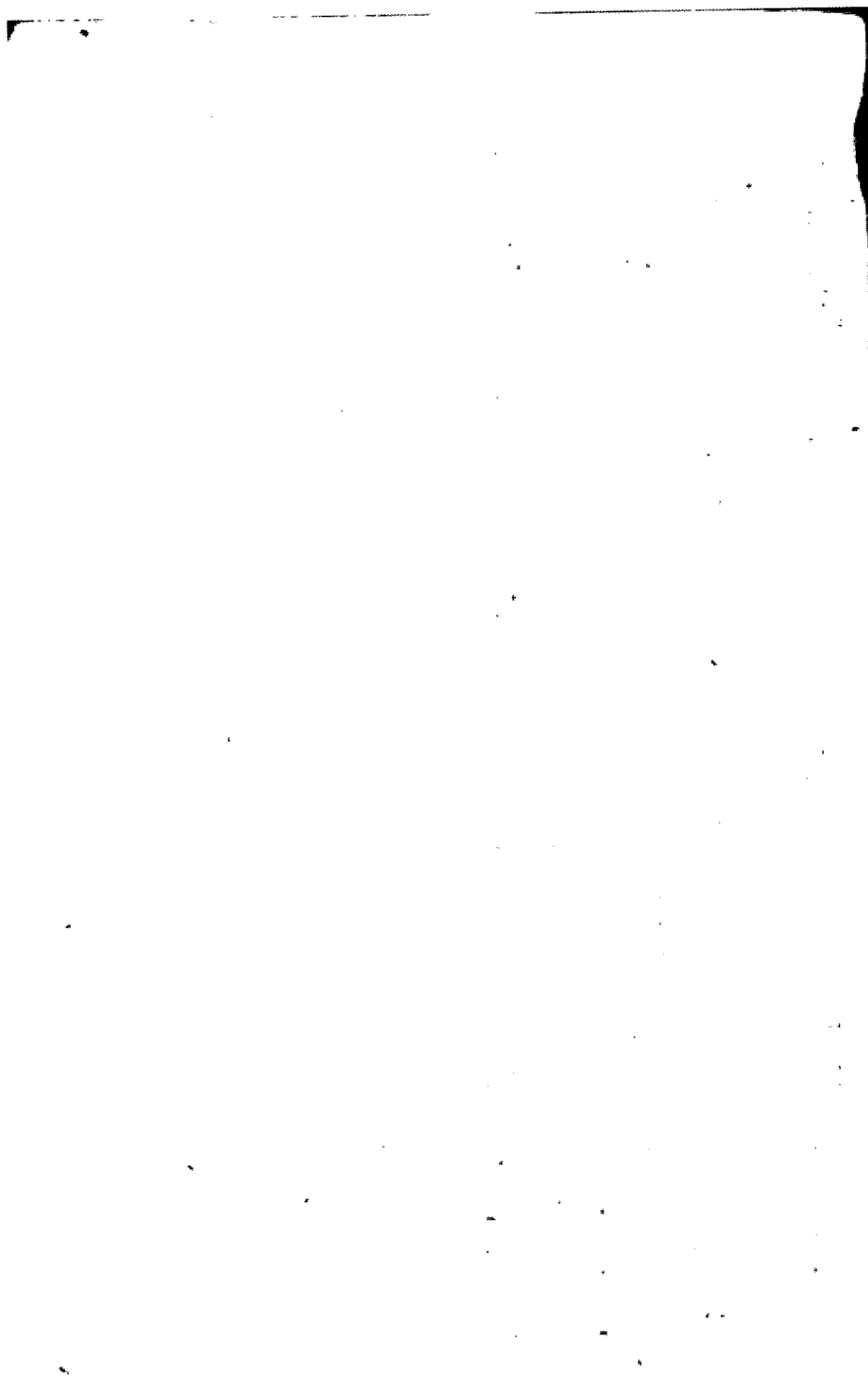


NHS Confidential: Personal data about a patient

LEITCH		ROBERT					SURNAME
SURNAME		CHRISTIAN NAMES			OCCUPATION		
National Health Service Number		Single Married Widowed	Date of Birth	15	8	77	(Note changes and insert year of change) 19.....
532.77.145							
Address (1)	Name of Practitioner		Executive Council Cipher — Date				CHRISTIAN NAMES
ROSENEATH CROMWELL ST					19.....		
(2)	(2)		(2)		19.....		
(3)	(3)		(3)		Died19.....		
(4)	(4)		(4)		CAUSE OF DEATH 1. _____ 2. _____		
						Signature of Practitioner	

Form GP.5B (Scotland) — MALE

NHS Confidential: Personal data about a patient

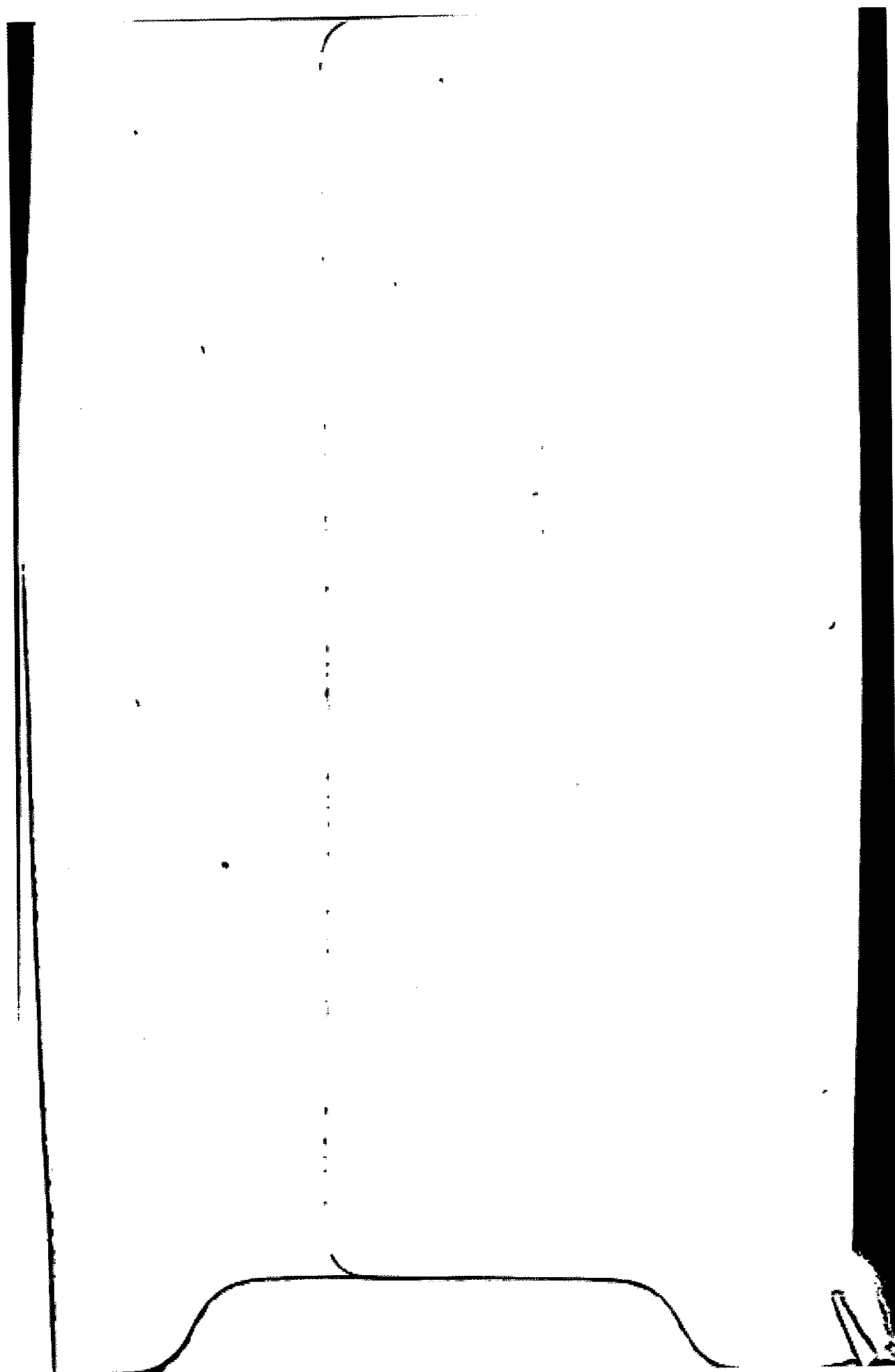


NHS Confidential: Personal data about a patient

IMMUNISATIONS AND		VACCINATIONS		
Diphtheria	Date	Smallpox	Date	Result
Pertussis		Tuberculin Test Method	Date	Result
Tetanus Toxoid		B.C.G.	Date	Result
Serum		Rh. Factor	Date	Blood Group
Polio myelitis				
Others				

MAJOR ALLERGIES AND NOTES OF ANY SERUM ADMINISTRATION

NHS Confidential: Personal data about a patient



NHS Confidential: Personal data about a patient

MALE		SURNAME	CHRISTIAN NAMES
		LEITCH	ROBERT
ADDRESS 1 PIER ROAD - DUNDEE			Date of Birth
			15 08 44
DATE	C F	CLINICAL NOTES	DIAGNOSIS
29-02-00		OW 1 Q	
14/3/00		new patient registration	

ARCOXIA

Levetiracetam 1500mg once BD

Disulfiram 200mg once daily

5 tabs.....

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

MEDICAL RECORD CARD

Form G.P. 7
(Scotland)

[illegible]

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

LEITCH

SERIAL NO.

15/08/77

3076

2F DRUMFORK COURT
HELENSBURGH
684 7ED

DR. R. BROWN

DATE 24/05/96 C

THIS PERSON HAS BEEN PLACED ON YOUR LIST IN ACCORDANCE WITH YOUR ACCEPTANCE
AND THIS CARD SHOULD BE USED UNTIL HIS MEDICAL RECORD ENVELOPE IS SENT TO YOU.
IT SHOULD THEN BE PLACED IN THE ENVELOPE.

[illegible]

IN C.F. COLUMN, WHICH IS FOR CASES OF CERTIFIED INCAPACITY ONLY, PRACTITIONERS SHOULD ENTER 'C' FOR FIRST CERTIFICATE, AND 'F' FOR FINAL CERTIFICATE.

FORM G.P. 7A (CONF)

[illegible]

*IN C.F. COLUMN, WHICH IS FOR CASES OF CERTIFIED INCAPACITY ONLY, PRACTITIONERS SHOULD ENTER 'C' FOR FIRST CERTIFICATE, AND 'F' FOR FINAL CERTIFICATE.

NHS Confidential: Personal data about a patient

MALE		15/8/77	
SURNAME <i>Leitch</i>		CHRISTIAN NAMES <i>Robert</i>	
ADDRESS <i>Rosemount, Brannish St</i>			
DATE	^{°C} °F	CLINICAL NOTES	DIAGNOSIS
19.12.77		<i>Paracetamol: Per Dose</i>	<i>Brucellosis</i>
24.12.77		<i>Chloro Sy. 12.1. 1.2. 1.3.</i>	
25.12.77		"	
26.1.78		<i>Silphen Peck Sy. 5ml 40 Brucella</i>	
2.2.78		<i>Chloro Sy.</i>	
29.4.78		<i>Paracetamol</i>	<i>Brucella</i>
29.4.78		<i>Paracetamol Sy.</i>	<i>Brucellosis</i>
12.2.78		<i>Paracetamol Sy.</i>	"
25/10/82		<i>Knocked down → ? part fracture between problems Not told by accident - not during a swimming. OE MAD. Pumping down Hillside. My father was in the house.</i>	
13/1/83		<i>Chronic 2/52 cough - Amoxicillin</i>	
25/2/83		<i>Says can't see board. Testing → OK. Rifer Optician</i>	
9/10/83		<i>Says can't see board. Rifer has poor vision. Rifer Optician.</i>	
16/1/83		<i>Handed cough - better now not OK still clear.</i>	
13/6/84		<i>Spots. Papular anticon</i>	

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

2/1/84 MEDICAL RECORD CARD

FORM E.C.7
(Scotland)

NHS Confidential: Personal data about a patient

DATE	*C *F	CLINICAL NOTES	DIAGNOSIS
6-9-84		fringes right hand Betadine paint	
9-12-85		Colic: Lactulose 5ml BD 150 ml	
2-6-86		Cough, clear sputum Had amoxicillin, Pholcodine	

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

APPLICATION TO REGISTER PERMANENTLY WITH A GENERAL MEDICAL PRACTICE

1. PERSONAL DETAILS (ALL FIELDS MARKED * ARE MANDATORY AND MUST BE COMPLETED AS FULLY AS POSSIBLE)



Male* ☒ Female* ☐ Is this your first registration with a GP Practice in the UK? Yes ☐ No ☒ Will you be in the area for more than 3 months? Yes ☒ No ☐ (If 'No', please ask for form GMSTRF001)

Date of Birth* 15-8-1977 Address* 40 ARDENSTATE CORSEANT KIRK DUNOON
 Title* Mr Postcode* PA23 8NF
 Surname* LETCH Telephone #
 Forenames* ROBERT JOHN Mobile # 07867 301185
 Previous Surname*
 email address # ROBERT.LETCH493@GMAIL.COM

The following information can be found on your current medical card:

Community Health Index (CHI) Number* NHS Number*

The following information can be found on your birth certificate:

Town of Birth* DUNOON Country of Birth* SCOTLAND
 Registered district of birth (Scotland only) ARGYLL Mother's maiden name INNES

* the data supplied in these fields will not be input to, or updated in, the Community Health Index (CHI), but will be held on the GP Practice's system

2. HELP US TO TRACE YOUR PREVIOUS GP HEALTH RECORDS BY PROVIDING THE FOLLOWING INFORMATION

Address in UK when you were last registered with a GP*

Name and address of previous GP Practice in UK*

40 ARDENSTATE CORSEANT KIRK DUNOON ARGYLL STREET SURGRAYS DUNOON

Postcode* PA23 8NF Postcode* PA22

If you are from abroad:

Date you first came to live in the UK* DD - - YYYY If previously resident in the UK, date of leaving* DD - - YYYY

Your most recent country of residence

If you have served in the British Armed Forces:

Enlistment date* DD - - YYYY Service Number
 Are you a Reservist? ☐ Yes ☐ No If yes, please provide your address before enlisting*
 Leaving date* DD - - YYYY
 Is this your first registration with a GP since leaving the Armed Forces? ☐ Yes ☐ No Postcode*

3. VOLUNTARY CONSENT TO ORGAN DONATION

I would like to join the NHS Organ Donor Register as someone whose organs may be used for transplantation after my death. Please tick the boxes that apply. Your consent to organ donation will be shared with NHS Blood and Transplant together with the information you have provided in Section 1 including your name, gender, date of birth address and CHI number. For more information on being an organ donor or privacy, please ask for the leaflet on joining the NHS Organ Donor Register or visit www.organdonation.nhs.uk.

Any of my organs and tissue ☐ Or my

Kidneys ☒ Eyes ☐ Heart ☒ Lungs ☒ Liver ☒ Pancreas ☐ Small bowel ☒ Tissue ☒

Patient signature Date 15-1-2016

4. HOW WE USE YOUR INFORMATION

The information you have provided will be used by the GP Practice to carry out its various functions and services including scheduling appointments, ordering tests, hospital referrals and sending correspondence.

Your information, including your name, gender, date of birth and address, will be passed to NHS National Services Scotland where it will be held on the Community Health Index (CHI). This information is used to register you with the GP Practice, transfer your medical records between GP practices in the UK, make payments to GP Practices for medical services provided, and to process and issue medical cards, medical exemption certificates and entitlement cards.

NHS National Services Scotland shares information about you within NHSScotland to assist in the provision and improvement of NHS services and the health of the public. When we do this, we make sure that the information which identifies you as a person and your health information are separated or anonymised. Health condition and treatment information which could identify you will not be used for research purposes by the NHS unless you have consented to this.

For more information on how NHS National Services Scotland uses your personal information visit www.nhs.uk. If you have any queries or concerns about how your personal information is used by the NHS please ask for the leaflet 'Confidentiality - it's your right', visit the Health Rights Information Scotland website at www.hris.org.uk or ask your GP surgery.

NHS National Services Scotland is the common name of the Common Services Agency for the Scottish Health Service.

5. PATIENT DECLARATION

I declare that the information I have given on this form is correct and complete. I understand that, if it is not, appropriate action may be taken.

To enable NHS National Services Scotland to confirm my eligibility to lawfully register with a GP and for the purposes of prevention, detection, and investigation of crime, relevant information from this form will be disclosed to the NHS Business Services Authority, NHS National Services Scotland, the Home Office, Identity and Passport Service, HM Revenue and Customs, the General Register Office and Local Authorities.

Patient/Patient's representative signature



Date ☒ ☐ ☐ 2016

Representative's name (if applicable)

Relationship to patient (if applicable)

6. FOR PRACTICE USE

GP reference number

GP name

Practice code

Mileage (No.)

Road

Water

Footpath

Identification seen - do not take or retain photocopies

Please initial each relevant box (it is recommended that at least one form of identification is seen to positively identify the applicant)

Birth
Cert. ☐

Student
ID Card ☐

Driving
Licence ☐

Passport or
HC2 Cert. ☐

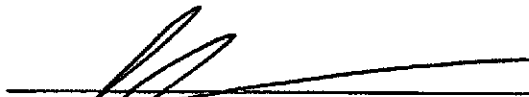
Home Office
App Reg Card ☐

Other/None
- specify

Receptionist
initials

I accept this patient onto the practice list and declare that, to the best of my knowledge, this information is correct. I acknowledge that the details may be authenticated from appropriate records, and that payments generated from this patient registration will be subject to Payment Verification.

Authorised Practice
signature



Date ☒ ☐ ☐ 2016

7. OFFICIAL USE ONLY

Input by

Checked by

Date

DD YYYY

Practice Stamp

11

11

Kyles Medical Centre

Date: 6-1-2016

This letter invites you as a newly registered patient to have a health check. This service involves answering some questions and a basic review with the practice nurse. This service is offered to all our newly registered patients over the age of five years.

It would be very helpful if you could complete this form before you are seen.

Surname: LEITCH	Forenames: ROBERT	Title: MR
Address: THE ROYAL AN LOCHAN HOTEL TIGHNABRUICH ARGYLL		Postcode: PA212BE
Date of birth: 15-8-77	Telephone number: 01700 811234	
Status:	☒ Single / Married / Separated / Divorced / Widowed / Other	
Housing:	House / Maisonette / Flat / Mobile home / ☒ Other	
Occupation:	CHRF	
Emergency contact: ALAN LEITCH	Telephone number: 07479254432	

What serious illnesses have you had?

NONE

Do you have any medical problems at the moment?

YES - SOFT TOE

Are there any serious illnesses that affect members of your family (close relatives)?

YES

Please list any allergies you have:

NONE

Please list any tablets, medicines or other treatments you are taking, including those bought from a chemist: (please include strength and doses where possible) Attach an up to date repeat slip if possible

Smoking:	Current smoker	YES	Ex-smoker	Non-smoker
	Number per day:	30	Year stopped:	
Alcohol:	Do you drink alcohol?	NO	If yes please fill out reverse of form	
Please describe any special diet you are on				
Height:	5'11.5"			
Weight:	19.7			

Women only:

When did you last have a cervical smear?	
When did you last have a breast examination?	

NHS Highland is routinely asking all patients to complete the following questionnaire about alcohol use. Mark your score against each question and then add your total at the bottom.

What is a unit?

1 unit = 10ml of pure alcohol, the number of units of alcohol in a drink depends on the size and strength of drink.

 1 pint of normal strength lager (4% abv) =	2.2 units of alcohol	 330ml bottle of medium strength beer (5% abv) =	1.7 units of alcohol
 250ml (large) glass of wine (12.5% abv) =	3.1 units of alcohol	 175ml (standard) glass of wine (12.5% abv) =	2.2 units of alcohol
 1 standard measure of spirit 25ml (40% abv) =	1 unit of alcohol	 750ml bottle of wine (12.5% abv) =	9.4 units of alcohol

Question 1 asks about units of alcohol, please use the information on units in the box above to give an honest and accurate answer as this will be of help to the doctor or nurse.

1. How often do you have:



6 or more units on one occasion?

8 or more units on one occasion?



Never
0

Less than monthly
1

Monthly
2

Weekly
3

Daily or almost daily
4

score
0

2. In the last year, how often have you been unable to remember things from the night before because you had been drinking?

Never
0

Less than monthly
1

Monthly
2

Weekly
3

Daily or almost daily
4

score
0

3. In the last year, how often have you been unable to do what was normally expected of you because you had been drinking?

Never
0

Less than monthly
1

Monthly
2

Weekly
3

Daily or almost daily
4

score
0

4. In the last year, has anyone suggested you should cut down your drinking?

Never
0

Yes on one occasion
2

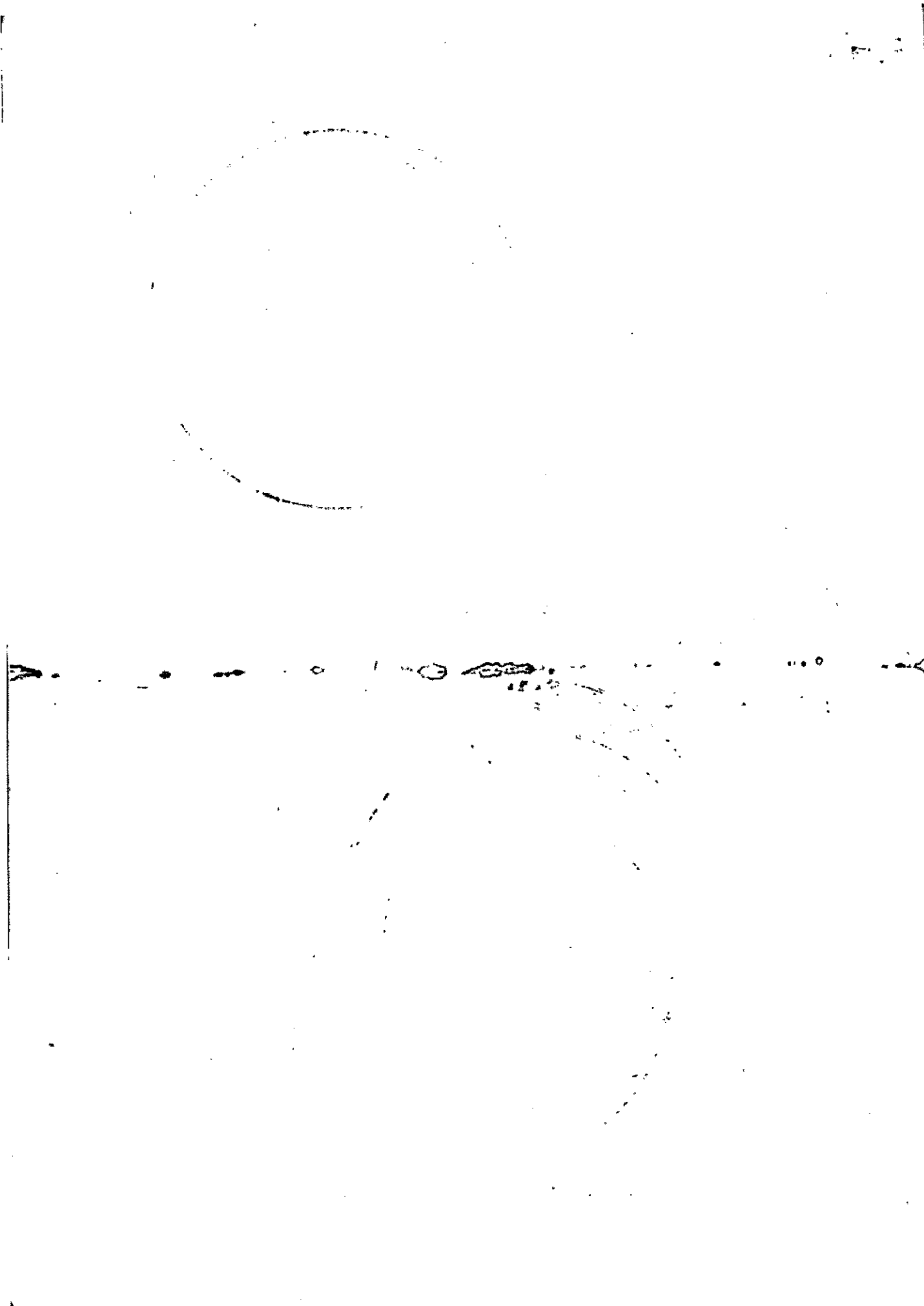
Yes on more than one occasion
4

score
0

total
0

Please add up your total score and write it in the box.

Thanks for your cooperation



NHS Argyll & Clyde

Argyll and Bute Hospital
Lochgilphead
Argyll
PA31 8LD



Dr A W Thomson
246 Argyll Street
Dunoon
PA23 7HW

Date: 18th October 2005
Ref:

Telephone: 01546 602323
Fax: 01546 603350

Dear Dr Thomson

Robert Leitch – 01 Pier Road, Royal Brae, Innellan, Dunoon, Argyll PA23 7TH
Date of birth – 15th August 1977

Robert Leitch did not attend his outpatient clinic appointment at the Dunoon General Hospital on the 18th October 2005 and made no contact in this regard. I have not made another appointment to see him. Please refer him back to the clinic in future if necessary.

Yours sincerely

A handwritten signature in dark ink, appearing to read 'R Sandler'.

Dr Robert Sandler
Consultant Psychiatrist

24 OCT 2005

TE REC.	GP	FILE
ALL PATIENT NORMAL		
OW TO		
KE APPT		
ONTACT PATIENT		
OR PRESCRIPTION		
LEASE		
3h COMPUTER		

A handwritten signature in dark ink, appearing to read 'E.M.' or similar, written across the bottom right of the form.

Use only-	clinic	Date	Time	No.	GP112		
REQUEST FOR OUT-PATIENT CONSULTATION THE INFORMATION IN THIS SECTION MUST BE COMPLETED				Appointment Category Routine ☐ Soon ☐ Urgent ☐			
AT/CC		CHI NO.		3 0 7 6			
Hospital DUNOON GENERAL		Date: 04 October 2005					
Please arrange for this patient to attend the PSYCHIATRIC clinic of Prof/Mr/Dr SANDLER							
Patients Surname LEITCH		Maiden Surname:					
First Names: ROBERT		Single/Married/Widowed/Other:					
Address: 01 PIER ROAD ROYAL BRAE		Date of Birth 15/08/77					
INNELLAN DUNOON ARGYLL		Patients Occupation					
Postal code PA23 7TH		Contact Telephone Number: 01369 830 779					
Has the patient attended hospital before: Yes/No if "Yes" please state:							
Name of Hospital:		Name, Address and Telephone no. of MEDICAL/DENTAL PRACTITIONER Please use rubber stamp					
Year of attendance						Hospital No:	
If the patient's name and/or address has/have changed since then please give details:							
Can patient attend at short notice? Yes/No							
If Yes, minimum notice required _____ days							
PRACTICE CODE NO 84256							
I would be grateful for your opinion and advice on the above named patient. A brief outline of history, symptoms and signs is given below:							

Dear Dr Sandler

I wonder if you would mind seeing this 28-year-old man. He apparently was accused of sexual assault approximately 2 ½ years ago and went through a torrid time in court before eventually being cleared. Following this, he seemed to get over things fairly well but over the past month or so has started getting upsetting nightmares about things once again. As a child he attended Larkfield unit for some time and found the input from them extremely helpful at that time. Following this, he had a fairly severe alcohol problem but he tells me he is now on his 1029th day of abstinence. I would value your advice on how we can help his distressing nightmares and flashback. Thank you for seeing him.

Yours sincerely,

Dr A W Thomson

NEW PATIENT MEDICAL

NAME: ROBERT LEITCH.

DOB: 15/08/77

ADDRESS: 01 PIER ROAD
ROYAL BRAE
INNEILLAN

SEX: M.

PHONE NO: 830 779.

SMOKING:

☒ YES

NO

CIGARETTES:

<1

1-9

10-19

☒ 20-39

40+

OTHER:

REGULAR SMOKER

☒ YES

NO

WANTS TO STOP:

YES

NO

YEARS: 13.

BLOOD PRESSURE:

148/92.

URINALYSIS:

HEIGHT:

5ft 11in.

WEIGHT:

14st 9lb.

BMI:

ALCOHOL:

NO.

93.1 Kg

DIET:

Normal.

PHYSICAL ACTIVITY

Physical job (chef).

CURRENT MEDICATION:

Ramitidine 150mg BD.
Disulfiram 200mg. Daily.

PAST MEDICAL HISTORY:

Recovering alcoholic

FAMILY MEDICAL HISTORY:

Not known.

DATE OF MEDICAL

30/5/03

DATE ON COMPUTER

03/06/03

N/P MEDICAL CLAIMED

30/5/03

ALLERGIES. none known.

1

2

3

4

5

6

7

01

HEALTH QUESTIONNAIRE

Surname LEITCH Forename[s] ROBERT
Sex M/F Title MR
Date of Birth 15/08/77
Address PARTS OF CHAN MOTEL Tel. No. 01866
2 Country Club 833 224
SOUTH LARCH AVE. SIDE
Occupation HEAD CHEF

What serious illnesses have you had and when?

NONE

Have you had any hospital treatment? [inpatient or outpatient]
If so - what conditions and where seen? [Hospital number or outpatients' card if available]

Please list any medications or tablets that you are currently taking: NONE

Do you have any allergies including medication allergies? NO

Is there a family history of any illness? M.S. / CANCER

Father & grand father BOTH HAD operation on spine

When did you last have a tetanus injection? 2001

Do you or have you ever smoked? If so, please give approximate dates of starting/stopping, and how many per day: yes 20 & Day 1995

Do you drink alcohol and if so how much per day/week? 14 pints

Woman only

When did you last have a cervical smear test?

Where did you have this? [GP surgery, FPA clinic, hospital clinic]

WHEN YOU ATTEND FOR YOUR PRE-REGISTRATION PLEASE BRING THIS COMPLETED FORM AND A SPECIMEN OF URINE



PRE-REGISTRATION CHECK

Name: **ROBERT LEITCH** D.O.B. **15.08.77** Date **26/9/02**

Weight: **94** Kg. Height: **6'6** cms **182**
B.M.I. [BMI 25-30 overweight, >30 obese]

Overweight? ☒ **10.5/1** Obese? ☐

Exercise: **moderate**

Requiring health education re. Exercise ☒

Requiring diet education ☒

B.P. **104/70** mm.Hg. PEFR **550** l/min, Cholesterol level Date **26/9/02**

Urinalysis: **contaminated - will bring later**

Smoking: Never

No. cigarettes per day **20** Date started

Other tobacco use: Date stopped

Health education

Alcohol Use: Teetotal

Approximate units per day/per week **26 units/wk**

Health education

Family History: Brother Sister Parents Grandparents

Hypertension CVA/Stroke

Glaucoma Diabetes **none**

IHD <60 IHD >60

Epilepsy

Other **Grandfather Multiple Sclerosis**

History

Ca ? type

Hospital Admissions: Clinic:

Asthma: **No**

- monitoring:

COAD/Emphysema: **No**

CHD:

- Angina:

- MI:

CVA: **No**

Epilepsy

Diabetes: **No**

- Diet:

- Oral Hypoglycaemics

- Insulin

- BMI

Mental Health

Other

Tetanus immunisation **last year at Helenburgh hosp**

Cervical cytology - last done Where?

Result

NAD
27/9/02

Name ROBERT
LEITCH

Address CO DUMBUCK
DUMBARTON

Phone

Date of Birth

Date 21/07/97

Time phoned 14:35 (24 hour clock)

Serial Number A 017928

Patient's GP

Practice CALDER BROWN

Appt. Time

Time seen

TELEPHONE ☒

SEEN AT CENTRE ☐

VISIT ☐

NIGHT VISIT FEE ☐

HISTORY FALL HEAD & KNEE INJ

*Fell at work brny head at brch + kny knee
Now feels better No headache, No sickness,
Not unby to be seen
Advised could be seen if he wished*

EXAMINATION

- Advised re signs of dehydration - Drizzy, sickness etc

DRUGS DISPENSED

DRUG	DOSE	AMOUNT	BATCH

PRESCRIPTION GIVEN

DRUG	DOSE	PER DAY	FOR

REVIEW: Patient to contact if needed ☒

Appointment needed on ☐

Vist needed on ☐

Admitted to ☐

DIAGNOSIS

Wet Bruise to head

SEND BY FAX ☐

Co-Op Doctor (print) N Lynd

Signature N Lynd

CHAPTER 04

DO NOT WRITE

ON THIS

PAGE

LOMOND HEALTHCARE NHS TRUST
ACCIDENT/EMERGENCY FORM

G.P. COPY

ACCIDENT & EMERGENCY DEPT.
ALEXANDRIA
83 QUA
TEL: 01389 754121

AE No. C/

Surname LEITCH		Forename ROBERT		Age 19	Date of Birth 15/08/1977	Arr Date 28/09/96	Time 11:30	AE Number 013532
Address 28 DRUMFORK COURT HELENSBURGH			Sex MALE	Religion		Date of Inc 28/09/96		Time 11:15
C		Tel		Marital Status SINGLE	Occupation/School CHEF	Type of Inc INDUSTRI	Mode of Arrival WALKING/OT	
Name BROWN			Address THE MEDICAL CENTRE 12 EAST KING STREET HELENSBURGH			Referred by SELF REFERRAL		
Name NOT STATED			Address			Complaint INJURY NOS L ARM laceration		
ROAD TRAFFIC ACCIDENT PLACE				DETAILS				
HOME ACCIDENT PROBABLE CAUSE								

TO BE COMPLETED BY MEDICAL OFFICER AFTER SEEING PATIENT

Dear Doctor,

The above-named patient attended Accident & Emergency Department today.

Diagnosis superficial laceration

X-Ray film/ECG shows

Treatment given steric-strip + dressing
tetanus booster

COMPUTER
WHITES
PINKS
NOTES TO DR

Drugs _____ days supply of _____ has been given.

Tetanus Prophylaxis has/has not been administered. TT Course _____ TT Booster _____ HATI _____ (Please Tick)

Would you please arrange _____

DISCHARGE CODES: Please Circle <table> <tr> <td>1. Discharge Home</td> <td>4. Did not wait</td> <td>7. Fracture Clinic</td> <td>10. Admit Ward (see below)</td> </tr> <tr> <td>2. Refer to G.P.</td> <td>5. Ret A/E as advised</td> <td>8. Refer to O.P. Clinic (see below)</td> <td>11. Trans. other Hospital (see below)</td> </tr> <tr> <td>3. Irregular Discharge</td> <td>6. Ret A/E as necessary</td> <td>9. Social Worker</td> <td>12. Died in dept.</td> </tr> <tr> <td></td> <td></td> <td></td> <td>13. Dead on arrival</td> </tr> </table>												1. Discharge Home	4. Did not wait	7. Fracture Clinic	10. Admit Ward (see below)	2. Refer to G.P.	5. Ret A/E as advised	8. Refer to O.P. Clinic (see below)	11. Trans. other Hospital (see below)	3. Irregular Discharge	6. Ret A/E as necessary	9. Social Worker	12. Died in dept.				13. Dead on arrival
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			13. Dead on arrival																								
Ward No. (if admitted)			Transfer to Hospital			Consultant (if admitted)																					
Follow up	Not arranged		Arranged		To be arranged																						
Clinic Referred to	AE	Hand	Fracture	Ortho	Medical	Surgical	Skin	ENT	Gyn.	Others Specify																	
Medical Officers Name (in Block Letters) <u>VILLALBA</u>						Signature of Medical Officer <u>[Signature]</u>																					
Cons	SR	Reg	SHO/JHO	Clin Assist	(please circle)																						

10/10/2010

CLAIM SENT TO P/C ✓

ON COMP ✓

STICKER

MEDICAL QUESTIONNAIRE

NAME Rbt Leitch D.O.B. 13/8/77

ADDRESS _____

HEIGHT 5' 11 1/2" WEIGHT 12 1/2 BML 24.55 ✓

EXERCISE LEVEL tick appropriate box

Avoids even trivial exercise

1382

Enjoys light exercise

1383

Enjoys moderate exercise

1384

Enjoys heavy exercise

1385

ALCOHOL INTAKE

Teetotaller

1361

Trivial Drinker

<1 unit per day

1362

Light drinker

1-2 units per day

1363

at weekends.

Moderate drinker

3-6 units per day

1364

Heavy drinker

7-9 units per day

1365

Very heavy drinker

>9 units per day

1366

BLOOD PRESSURE

Normal

135/85 or less

2464

Borderline raised

140/86 - 160/95

2465

Raised

161/95 - 200/100

2466

Very high

201 + / 110 +

2467

120/80

SMOKING STATUS

Never smoked tobacco

1371

Light smoker 1-9 per day

1373

Moderate smoker 10-19 per day

1374

12/day.

Heavy smoker 20-39 per day

1375

Very heavy smoker 40 + per day

1376

ex smoker

137F

ADVICE GIVEN

Advice on smoking

6791

Advice on diet

6799

Advice on exercise

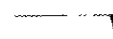
6798

Advice on alcohol

6792

Refer to Dr because of hypertension

Z1028



DR MITCHELSON & DR LOGAN

Date 23/1/96

Name Robert Leitch

Address Duncannon Estate

☒ male / female

Occupation YTS GHEF

☒ Single / married / divorced

Have you had any of the following vaccinations, and if so when

Diphtheria YES / NO

Polio YES / NO

Tetanus

☒ YES / NO

Pertussis YES / NO

MMR YES / NO

TB

YES / NO

Typhoid YES / NO

Cholera YES / NO

2 yrs ago.

FAMILY HISTORY

Heart Disease

Diabetes Mellitus

Stroke

Epilepsy or fits

Cancer

Kidney Disease

☒ Asthma

Hypertension

Skin Disease

Nerves

Brother - but adopted.

PAST MEDICAL HISTORY

Previous illnesses

Date

Operations

Date

Allergies : including medication

None.

Date of last cervical smear

Hysterectomy YES / NO

Smoking Habits

Cigarettes

☒ YES / NO

Quantity

15

Pipe

☒ YES / NO

Quantity

Ex-smoker

Date of Cessation

Exercise Level

Light.

alcohol Consumption

Units per week

100/week.

Height

Ft

Ins

Cm

Weight

St

Lbs

Kg

BP

Systolic

BP

Diastolic

Urine

Sugar

Protein

Blood

Visual Acuity

Right

Left

Uncorrected

Corrected



Argyll and Clyde Health Board
Inverclyde General and Community Unit

Inverclyde Royal Hospital

LARKFIELD ROAD,
GREENOCK PA16 0XN
Tel: (0475) 33777 Ext. 4398

Your Ref:
Our Ref: SB/MF/3112
If phoning please ask for:

CONFIDENTIAL

9th July, 1991.

Dr. Pearce,
30 Church Street,
DUNOON.

cc: Social Work Department - Dunoon

Dear Dr. Pearce,

Robert Leitch, 51 Victoria Road, Dunoon (15.08.77)

Further to my letter of 11th April, 1991, as agreed we offered the Leitchs family therapy and I also offered individual sessions to Robert. We managed to have one of each of these sessions before events overtook us.

The family session which took place on 16th April, was a relatively positive one but as it was the first meeting, it was largely an exploratory one. Despite the family's apparent openness and expressed warmth, we found them a difficult family to engage. At that time Robert was relatively calm and therefore the topics covered were the normal adolescent issues. Robert was able to express the ways in which he felt different and detached from his family. There were very few areas, however, that seemed to be problematic to them at that time. The parents seemed to have already decided how to handle the problems that Robert was presenting. The family meeting was, therefore, completely at odds with subsequent events when Robert again became out of control and was eventually removed by the Social Work Department from his family, at their request.

In the individual session Robert continued to be open about his feelings and to show willingness to work towards change. We also discussed management of his strong feelings that had led to his temper outbursts and I introduced him to relaxation techniques.

All seemed to be going well until our next session which was cancelled by the Social Worker owing to Robert's removal from home. I have since had contact with the Social Worker and have left the offer of further family work open if circumstances permit.

Yours sincerely,



S. BUTLER,
Clinical Psychologist,
Larkfield Child & Family Centre.



ARGYLL AND CLYDE HEALTH BOARD
INVERCLYDE, COWAL AND BUTE UNIT

Inverclyde Royal Hospital

Department of General Medicine

Dr. J. E. Thomson
Dr. P. d'A Semple
Dr. R. C. Brown
Dr. A. Mackay

LARKFIELD ROAD,
GREENOCK PA16 0XN
Tel: (0475) 33777 Ext.

Your Ref:

Our Ref: DM/VS/224401

If phoning please ask for:

Ext. 4507

14 March 1991

Dr A R Turner,
30 Church Street,
DUNOON

Dear Dr Turner,

Robert Leitch, 15.8.77
51 Victoria Road, Dunoon

Admitted: 3.3.91 Discharged: 5.3.91
Diagnosis: alcohol abuse

This 13 year old boy was admitted to our wards the day after drinking a large amount of whisky and cider. He had been kept in Dunoon Hospital that night but the following day had collapsed several times at home apparently unconscious. He has a 6 month history of illicit drinking.

On admission here he was conscious and alert but then lapsed into an apparent unconscious stage. On examination there were no signs of a head injury, there was no papilloedema and there were no focal neurological signs.

He had several more of these episodes during his stay but I do not think he was genuinely unconscious. There was never any seizure and no abnormal neurological signs were ever picked up. On occasions he appeared simply to be lying with his eyes shut and was still able to answer questions and obey commands.

48 hours after admission these episodes appear to stop and he was allowed home with his parents. We have not arranged follow up.

Yours sincerely

D. MURDOCH
Registrar to Dr Mackay



Argyll and Clyde Health Board
Inverclyde General and Community Unit

Inverclyde Royal Hospital

LARKFIELD ROAD,
GREENOCK PA16 0XN
Tel: (0475) 33777 Ext. 4398

gsw
Your Ref:
Our Ref: SB/MF/3112
If phoning please ask for:

CONFIDENTIAL

11th April, 1991.

Dr. Pearce,
30 Church Street,
DUNOON.

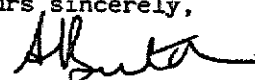
Dear Dr. Pearce,

Robert Leitch, 51 Victoria Road, Dunoon (15.08.77)

Thank you for your referral of Robert and his family who I was able to meet for the first time last week. Robert attended with his mother. Since September last year Robert has exhibited an increasing drink problem which culminated a few weeks ago in his consumption of 3½ litre bottles of whiskey which induced a state of collapse and Robert had to be admitted to Inverclyde Royal. This episode seems to have produced a dramatic change in both Robert and his family's attitude to his problem. Robert himself seems to have been deeply shocked and shamed by this episode and has motivated Robert into seeking the help of a counsellor through the Alcohol Counselling Service. Robert maintains that he has not had anything to drink since this incident and clearly wishes to get this habit under control. He seems to have reduced contact with those friends with whom he drank and has been supported by his friends from school in his attempt to overcome his problem. The family also have undergone a change in their own attitude, previously Mr. Leitch saw this as a discipline problem but now seems to agree with his wife that psychological factors may be involved and seems willing to have accepted counselling from the same service as Robert.

Robert himself was in a very distressed state. His confidence and self-esteem are very low at the moment. He says he suffers from insomnia and anxiety. In particular he talked about his violent temper which he feels sometimes overwhelms him to the point where he cannot cope and seems to use drink to relax himself and to reduce the tension which his temper creates. He seems to find it very difficult to express his feelings and anxieties and to accept counselling seems to be a very big step for Robert. Robert seems to have formed a good relationship with his counsellor in Dunoon regarding his drinking, therefore, I felt that contact with myself should be on two levels, one at an individual level to give Robert relaxation training and methods of coping with and expressing his own anxieties and tensions in order that he does not have to resort to the alcohol and secondly I offered the family some family therapy in order to trace the roots of Robert's difficulties in order that they could be resolved by more positive methods. I have, therefore offered Robert an individual session and I have also offered the family a session in conjunction with the Social Worker here at the Unit. Mrs. Leitch seemed very positive about this plan and I will keep you informed of progress.

Yours sincerely,


S. BUTLER,
Clinical Psychologist, L.C. & F.C.



Mr Robert J Leitch
Printed 01/07/1996

15/08/1977-3076

Page 1

Mr Robert J Leitch, 2F Drumfork Court, HELENSBURGH, G84 7ED
Age 18, Tel?, Status?
Reg. With Dr W R Brown.

ALLERGIES / ADVERSE REACTIONS

NO DATA STORED

PROBLEMS

01/01/1991 Alcohol abuse NOS

18/01/2018 14:00
18/01/2018 14:00

Mr Robert J. Leitch
18/01/2018 14:00

Mr Robert J. Leitch, 18/01/2018 14:00
18/01/2018 14:00
18/01/2018 14:00
18/01/2018 14:00

18/01/2018 14:00

18/01/2018 14:00

18/01/2018 14:00

18/01/2018 14:00

Printed for Tactica Solutions B11654 1/00 71412

NHS Confidential: Personal data about a patient

		National Health Service Number	532-44-145
CLINICAL NOTES		Surname (Block Letters)	Forenames (Block Letters)
		LEITCH	ROBERT
		Address	Date of Birth
		51 VICTORIA Rd. ROSENTHAL, CROMWELL ST. DUNDEE	15.8.44

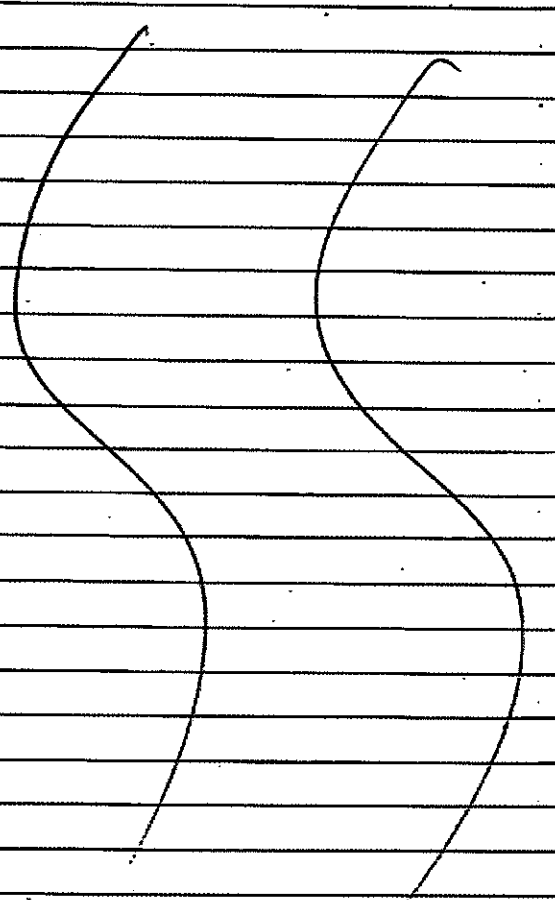
Date	
25.8.87	Chest sore - STENOA ling rash - geometric - front & back feels sick - paracetamol
19.6.87	Temp 38.5°C - 39.0°C
12.6.87	Stomach pain - 1st time
23.9.87	Swollen red infected allergic R. tonsils? from bite. Asp. R. tonsil
25.9.87	am improving
25/11/89	Assaulted by grandfather - punched in stomach - during telephone call from his father in North Sea. No vomiting after initial vomit Hand also squeezed by grandfather on left hand - swollen & tender between metacarpals. Thumb also tender but clinically not so. Abdomen tender around umbilicus & lower ribs. No hernia, no pus. BS. present. Simply unprovoked assault. Suggest they if going to take it further.
10/3/89	feels sick all the time since some dip. ESR 40 mm/hr V15
10.3.89	urine O.K.
1-4.89	leg pain esp @ knee. X-ray.
24.6.90	1st time advice. Amoxicillin
20/6/90	felt unwell at school - no vomiting feels sick & some ribs OK with Amoxicillin.
18.9.90	At 2 months

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

Date	
12-2-91	Chast mother - Alleged i vandalism - got drunk broke someone's window - Hume to police later. S Butler.
14-3-91	Chast.
18-3-91	Chast - went to RA C2HCOH
15-3-91	Chast.
22-3-91	Chast. Butler 2/52
5-4-91	2/52
28-5-91	Chast. Recent C2HCOH - 2/52
28-5-91	Came medical - Assaulted mother. 5'9" 9st 10 62kg (176cm)
15-11-91	Gland under jaw - infection (Cauldwell) erythrocyte A 260
28-9-92	1) neck inj. PE 3/7 ago some neck pain - 1 kgal
	2) inj. C up hockey stick VAB-L-6/6 furious -
25 JUN 1993	Acne. Chast particularly bothered Mother none so Delain T
10/5/92	Medical for 3 wks. BP 110/60 115/9. 64V. Lashed Don't drink. Off drugs.

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

		National Health Service Number
CLINICAL NOTES	Surname (Block Letters)	Forenames (Block Letters)
	LITCH	ROBERT
	Address	Date of Birth
	GLADESLOE DALQUINN ESTATE RENTON - turn Right.	15/8/77

Date	
23/1/96	Lodging in Renton. working here for 2½ years. Chef at Marlhalme Hotel 1½ year lived at Clydebank Children's Home. On YTS scheme Never had major illness since 13 when left home. Brother + Sister + Parents in Inverclyde / Onnoan. On a Supported Accommodation Programme 

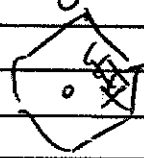
*This column has been provided for doctors to enter A, V or C at their discretion

The figure shows a graph on lined paper. The graph has a vertical y-axis and a horizontal x-axis. Two curves are plotted. The first curve starts at the origin (0,0) and is concave up, increasing as it moves to the right. The second curve starts at a point on the y-axis, is concave down, and intersects the first curve at a point in the first quadrant. The intersection point is approximately at (1, 1). The curves continue to rise as they move to the right, with the concave-up curve remaining above the concave-down curve.

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

17/5/96

CLINICAL NOTES	National Health Service Number	532/77/145	WRB	
	Surname (Block Letters)	LEITCH	Forenames (Block Letters)	ROBERT
	Address		Date of Birth	
		2F DRUMFORK COURT HELENSBURGH	15.8.77	

Date		
21.7.97 14/35	T	LOMOND DOCS (STAT)
14/8/00		Developed cough, aches in back of neck, tired feeling running nose eyes sore. For 4/7. Regular paracetamol.
2-8-1		abdominal pain - 2-3 weeks LUP. no alcohol x 2/12 smokes. no nausea/vomiting No urinary st. no diarrhoea/constipation no OTC Rx worse after eating - eats irregular no weight loss & appetite OTC  - st. tender - SS ✓ - no masses - no guarding - imp ? gastritis - tender area st - low - Adv re diet - ranitidine 150mg BD - Rev 450 if persists

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

A large, stylized, hand-drawn letter 'S' is centered on a sheet of lined paper. The letter is formed by two thick, black, curved lines that meet at the top and bottom, creating a continuous, flowing shape. The lines are slightly irregular, giving it a hand-drawn appearance. The background consists of horizontal ruling lines, and a vertical margin line is visible on the left side of the page.

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

CLINICAL NOTES		National Health Service Number	
		Surname (Block Letters)	Forenames (Block Letters)
		LEITCH	ROBERT JOHN
		Address	Date of Birth
		PORTSONWACHAN HOTEL LOCHABE BALMORAL	15.08.77
Date		Smoker, 20cigs/day since 1995	Diagnosis
26.9.02		New Patient. Born in Dunoon GA. Mums S/M in Dunoon Dunoon (Ann Leitch) OK. Father had an operation on Spine (Cervical Spine, ?? dissecting). Now Retd. from oil rig (was Health & Safety trade union advisor) 1 house, 1 Sister better OK.	
		PMH: Nil of note. No disease. Both maternal & paternal grandfathers had cancers ?? before Robert was born. Paternal grandfathers had Multiple Sclerosis.	
		Drugs: Nil regular. Allergy: Nil known. Gen: Healthy looking. Ht 6'0" wt 94kg. BP 106/70 H+D+D+D, chest OK. Last Tet Vac last year in Helensburgh. Mineralys: - Contains five. Will provide later. c/o low back pain 1/52 ME SLR 60° R+L No radials Lofecoxib 25mg + more x 28 Pain is no better.	
27/10/02		Urinalysis - NAD.	Any

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

FORM GP111F

355 2095

PRINTED FOR ASTRON, 11/01 822826 (13/51)

Date	Clinical Notes	Diagnosis
17.12.02	brachytherapy alcohol. R Diazepam 5mg qid 28/12 Advice. hr	
27.12.02	Has not had alcohol for 10 days. Speech slurred, pupils mid. dilated. Feels better. Appetite returning to normal. Attending AA meetings in town. Has no wish to drink as requested his manager to ban him from bar & handed in his wallet + credit cards to the manager. Discussed. Agrees to take Disulfiram 200mg 4x daily of 10mg or even slightest amt. of alcohol. R Disulfiram 200mg Noto x 50	Revised 6/52
13.2.03	Has had no drink since kept well. R Disulfiram 200mg 4x 100	See 6/52
23.5.03	Disulfiram 200mg x 100 R/L For self purchase hr	

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

CLINICAL NOTES		National Health Service Number	
		Surname (Block Letters)	Forenames (Block Letters)
		Address 01 PIER RD. ROYAL BRAE INNELAN	
		Date of Birth	
		15/08/77	
Date		Clinical Notes	Diagnosis
26/5/03	C.	Disulfiram 200mg x 5 1 daily	
30/5/03		Leg med. Recovering alcoholics Mother significant history. BP 148/92	
30/5/03		On disulfiram - been on since Feb. Stopped Dec 12. Takes 200g once daily. Living with parents. Had varicella 150 b-d to pub 2/92 for epigastric pain - doesn't require rx	
21/05/03		Disulfiram 200mg od. Liver abstract from alcohol on since Feb 03. recurrent neck pain. Ex pancreat. Acid RLV before next script.	
8/10/04		Painful shoulder for 3 weeks. No longer on disulfiram All movements full. but painful. for N.B.A.D. celecox.	
3/10/05		been having nightmares about sexual assault 2 1/2 years ago re sexual assault. Cleared of sexual assault. works as chef. Getting nightmares every night. previously went to hospital unit for 1 1/2 years. No drink for 1029 days After psychiatry.	

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

[illegible]

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

LEITCH

ROBERT JOHN

Address PORTSONACHAN HOTEL
DALMALLY
PA33 1BJ

15.08.77

[illegible]

355 2095

[illegible]

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

IMMUNISATION AND SCREENING INVESTIGATIONS	Surname (Block Letters)	Forenames (Block Letters)
	LEITCH	ROBERT JOHN
	Address	
	PORTSONNACHAN HOTEL	Date of Birth
	LOCHLAW DOCHALLY	15.08.77

IMMUNISATIONS (Insert Date and Batch Number where appropriate)

	Diphtheria	Tetanus	Pertussis	Polio	Measles	Rubella	MMR	BCG
Date								
Manufacturer & Batch No.								
Date								
Manufacturer & Batch No.								
Date								
Manufacturer & Batch No.								
Date								
Manufacturer & Batch No.								
Date								
Manufacturer & Batch No.								
Date								
Manufacturer & Batch No.								
Date								
Manufacturer & Batch No.								

ALLERGIES & HYPERSENSITIVITIES

	Influenza	Hep.B.	Typhoid	HIB	Men C	Cholera
Date						
Manufacturer & Batch No.						
Date						
Manufacturer & Batch No.						
Date						
Manufacturer & Batch No.						
Date						
Manufacturer & Batch No.						
Date						
Manufacturer & Batch No.						
Date						
Manufacturer & Batch No.						

IMMUNOLOGICAL STATUS				
	Tuberculin Test	Rubella Antibodies	HIV	Hep.B.
Date				
Result				
Date				
Result				
Date				
Result				

SCREENING INVESTIGATIONS

[illegible]

CERVICAL CYTOLOGY

[illegible]

MAMMOGRAPHY

[illegible]

CHEST X-RAY

[illegible]

OTHERS

[illegible]

ROBERT LEITCH
DOB. 15.03.77
OUT PATIENT
HISTORY

Regd 19-8.93

DATE	
16/10/93	BCG. LOT E2562A. EXP 04.12.95. 0.1mls intradermal
11/3/94	Sore on medial malleolus (L) - LA Dressings

(Use other side first)

[illegible]

01367 104400

Argyle St Surg

Name: Robert Leitch	DOB: 15-Aug-1977	Date: 19-Jul-2010 14:0
CHI: 158773076		
Tel No:	Call ID: 84294	
Address: King Haakon Bar	Attending GP: Murray, Leo, Bro	
	Consult Start at: 19-Jul-2010 14:0	
Reg GP: INT (Unregistered) -	Call Rec NHS24: 19-Jul-2010 14:0	
	Call Rec Hub: -	
Caller Origin: 01 Walk In -Self		
Call Type: Appointment	Consultation Location:	
Reported Condition:		
Symptoms: shooting pain in upper left arm numbness		
Questions:		
This patient is:: New		
This patient is being dealt with as:: Acute assessment		
NHS24 Call Outcome:		

OOH Detail

History

awoke today with paraesthesiae in left hand

Examination

clearly confined to median distribution

Diagnosis

Clinical code: zV6.. ([V]Other reasons for encounter)

Treatment

first episode - expect resolution - seek rv sos. 1m

Followup

follow up message (No Follow Up)

aaaaaa

Prescription

Call No: 84294

Patient Name: Robert Leitch

END END END END END END END END END END END END END END END END END END

HA: 1 Pier Rd
 ROYAL BRAE
 INNELAN
 DUNOON PA 23 7TH

GP: DR. A. THOMSON C3915
 PRACTICE 84290

NHS Confidential: Personal data about a patient

Inverclyde Royal Hospital, Larkfield Road, Greenock PA16 0XN

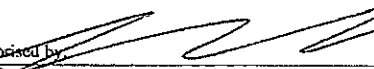
HAEMATOLOGY

Hospital Number 1508773076		Surname LEITCH		Forename ROBERT		Sex M	Dob 15/08/1977						
Location 246 Argyll Street, Dunoon						CHI Number 1508773076							
Consultant/GP Dr Louise Taylor-Kavanagh						Copy to Dr Louise Taylor-Ka DGP1							
Patients Address 01 PIER ROAD ROYAL BRAE INNELLAN DUNOON				Clinical Details Sleep disturbance									
Hb g/l	RBC 10 ¹² /l	Hct l/l	MCV fl	MCHC g/l	MCH pg	RDW %	WBC 10 ⁹ /l	Ne 10 ⁹ /l	Ly 10 ⁹ /l	Mo 10 ⁹ /l	Eo 10 ⁹ /l	Ba 10 ⁹ /l	Plat 10 ⁹ /l
171	5.38	0.496	92	345	31.8	14.0	6.4	3.4	2.5	0.3	0.2	0.0*	215
Date of Collection: 30/04/2012 09:40				Lab Number: BL871280E			Tests Performed FBC						

STY16240

INVERGLYDE ROYAL HOSPITAL GREENOCK PA16 0XN		CLINICAL BIOCHEMISTRY																																																																																					
CHI Number	150 877 3076	Surname	ROBERT Forename																																																																																				
Location		246 Argyll Street, Dunoon	Date of Birth																																																																																				
Hospital Number		TS08773076																																																																																					
Consultant/Ref	Dr Louise Taylor-Kav	Report to	Dr Louise Taylor-Kav																																																																																				
Patient Address	01 PIER ROAD ROYAL BRAE INNELLAN	Clinical Details	DGP1 Sleep disturbance																																																																																				
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**INVERGLYDE ROYAL HOSPITAL
GREENOCK PA16 0NN**
CLINICAL BIOCHEMISTRY

CHI Number	150 877 3076	DEATCH	ROBERT	Forename	Sex	Date of Birth	15/08/1977																																																																																																																			
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Acute Services Division

Emergency Care and Medicine Services Directorate

Department of Respiratory Medicine

DR. CARLIN'S RESPIRATORY CLINIC

Gartnavel General Hospital
1053 Great Western Road
Glasgow G12 0YN
Switchboard: 0141 211 3000
Fax: 0141 211 3464



Clinic 04/01/2013
Dictated 04/01/2013
Typed 24/01/2013
Your Ref
Our Ref CC/CM
Enquiries to 0141 211 3482

Dr Louise Taylor-Kavanagh
Drs Campbell
246 Argyll St
PA23 7HW

Dear Dr Taylor-Kavanagh

Robert Leitch ~ 15/08/1977 ~ CHI: 1508773076 ~ CRN: 64597456K
01 Pier Road, Royal Brae, Innellan, PA23 7TE

Many thanks for referring this young gentleman who I think quite likely has obstructive sleep apnoea syndrome.

He is overweight, he does smoke and he previously took alcohol to excess and prominent snoring, choking awakenings, unrefreshing sleep, poor concentration and day time sleepiness have been long lying problems, much worse over the last 3-4 years. There has been some partial improvement as he has achieved 3-stone weight loss and cut back his busy split shift working as a chef in a hotel. He now works 2am-2.30pm and 6-10.30 pm. He falls asleep uncontrollably in the afternoon and he will often be asleep in bed shortly after his shift is finished.

There is no nasal trouble. Oropharynx isn't overtly crowded. His teeth aren't very healthy. BMI is 36 and a weight of 121 kilos today. Collar size is 19 inches. Epworth sleepiness score was 20/24. Blood pressure was 122/94.

I have of course advised on further weight loss. I have also said he must stop smoking. I explained the suspected diagnosis to him and discussed the possibility of treatment. Given the travel distances we will arrange to investigate him as an over night inpatient to stay in the sleep room in the coming weeks. If this confirms sleep apnoea we will proceed on to initiate CPAP the following morning and I will write with an update after all of that.

Currently he doesn't drive but he is aware of the responsibilities should that change in future.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Chris Carlin'.

Chris Carlin
Consultant Physician

Acute Services Division

Emergency Care and Medicine Services Directorate

Department of Respiratory Medicine

DR. CARLIN'S RESPIRATORY CLINIC

Gartnavel General Hospital
1053 Great Western Road
Glasgow G12 0YN
Switchboard: 0141 211 3000
Fax: 0141 211 3464



Clinic 12/02/2013
Dictated 12/02/2013
Typed 20/02/2013
Our Ref CC/LH
Enquiries to 0141 211 3482

Dr Louise Taylor-Kavanagh
Drs Campbell
246 Argyll St
PA23 7HW

Dear Dr Taylor-Kavanagh

Robert Leitch ~ 15/08/1977 ~ CHI: 1508773076 ~ CRN: 64597456K
01 Pier Road, Royal Brae, Innellan, PA23 7TE

Mr Leitch came for sleep testing. Contrary to my expectations this was reassuring. Full analysis will take some time but there is no major obstructive sleep apnoea. There is some minor flow limitation in keeping with his build but this will not be causing particular sleep disruption.

I therefore think his daytime sleepiness is a result of his shift-work and previous extended hours. He has cut his hours back further but he is still finding fatigue a problem. I have suggested further attempts at weight loss; adopting something of an exercise routine and I have explained that it takes many months at least for sleep routines to recover from shift work upsets.

I haven't arranged further review but if there's anything arising from the full analysis on his polysomnography I'll be in touch again.

Yours sincerely

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

Chris Carlin
Consultant Physician

CLYDE HOSPITALS
BIOCHEMISTRY REPORT

Form: SA Run: 116

Surname: LEITCH
Forename: ROBERT
DOB/Age: 15.08.77
Address: 01 PIER ROAD
Location: Drs Taylor-Kavan & Mosley
Diagnosis: tired

CHI/Unit No: 1508773076

Sex: Male

Requestor: Dr Angela Mosley

[[CURRENT]]

Lab Number B.13.9094113.Q
Date/Time collected 10.12.13 09:13
Date/Time received 10.12.13 16:20

Sodium	mmol/L	(133-146)	140
Potassium	mmol/L	(3.5-5.3)	3.8
Chloride	mmol/L	(95-108)	106
Bicarbonate	mmol/L	(22-29)	
Urea	mmol/L	(2.5-7.8)	5.0
Creatinine	umol/L	(40-130)	73
GFR (est'd)	ml/min	(>60)	>60
Glucose	mmol/L	(3.5-6.0)	
CRP	mg/L	(0-10)	
Magnesium	mmol/L	(0.70-1.00)	
Calcium	mmol/L	(2.20-2.60)	2.44
Adj Calcium	mmol/L	(2.20-2.60)	2.46
Phosphate	mmol/L	(0.80-1.50)	1.34
Albumin	g/L	(35-50)	38
Alk Phos	U/L	(30-130)	102
Tot Bilirubin	umol/L	(0-20)	7
Conj Bilirubin	umol/L		
AST	U/L	(0-40)	31
gGT	U/L	(0-70)	+ 86
ALT	U/L	(0-50)	+ 92
Amylase	U/L	(0-100)	
CK	U/L	(40-320)	
Troponin I	ug/L	(<0.04)	
Total Protein	g/L	(60-80)	
Globulins	g/L	(23-38)	
Urate	mmol/L	(0.20-0.43)	
Osmolality	mosm/Kg	(275-295)	
Cholesterol	mmol/L		
Triglyceride	mmol/L	(0.2-2.3)	
VLDL Chol	mmol/L		
LDL Chol	mmol/L		
HDL Chol	mmol/L		
Chol/HDL			

Result Comments:

Date reported: 10.12.13

Authoriser: Automatic release by system

[IRH]

C L Y D E H O S P I T A L S
H A E M A T O L O G Y R E P O R T

Surname: LEITCH
Forename: ROBERT
DOB/Age: 15.08.77
Address: 01 PIER ROAD
Location: Drs Taylor-Kavan & Mosley
Diagnosis: tired

CHI/Unit No: 1508773076

Sex: Male

Requestor: Dr Angela Mosley

[[CURRENT]]

Lab Number B.13.9291886.M
Date/Time collected 10.12.13 09:13
Date/Time received 10.12.13 16:20

Haemoglobin	g/L	(130-180)	156
WBC	$\times 10^9/L$	(4.0-11.0)	7.1
Platelet Cnt	$\times 10^9/L$	(150-400)	203
RBC	$\times 10^{12}/L$	(4.50-6.50)	4.75
Haematocrit	R	(0.400-0.540)	0.451
MCV	fL	(80.0-100.0)	94.9
MCH	pg	(27.0-32.0)	32.8
Neutrophils	$\times 10^9/L$	(2.0-7.5)	3.2
Lymphocytes	$\times 10^9/L$	(1.5-4.0)	3.2
Monocytes	$\times 10^9/L$	(0.2-0.8)	0.4
Eosinophils	$\times 10^9/L$	(0.0-0.4)	0.3
Basophils	$\times 10^9/L$	(0.0-0.1)	0.0
Myelocytes	$\times 10^9/L$		
Blasts	$\times 10^9/L$		
Others	$\times 10^9/L$		
Nucleated RBC	$\times 10^9/L$		
ESR	mm/hr	(1-10)	
Retics	$\times 10^9/L$	(10-90)	
Glandular Fever Scr			
Blood Film			

Result Comments:

Date reported: 11.12.13

Authoriser:

Run No: 55

[SCI Run: 130]

CLYDE HOSPITALS
BIOCHEMISTRY REPORT

Surname: LEITCH
Forename: ROBERT
DOB/Age: 15.08.77
Address: 01 PIER ROAD
Location: Drs Taylor-Ravan & Mosley
Diagnosis: tired
Details:

CHI/Unit No: 1508773076

Sex: Male

Requestor: Dr Angela Mosley

Lab No: B,13.9094114.E
Collected: 10.12.13 09:13
Authorised: 12.12.13

Received: 10.12.13 16:20
Authorised by: Automatic release by sys

25-OH Vitamin D 25 nmol/L

Comments:

Vitamin D: Borderline low 25-OH Vit D. Risk of developing hyperparathyroidism
Consider increase in Vitamin D intake.

Date reported: 12.12.13

CLYDE HOSPITALS
BIOCHEMISTRY REPORT

Form: SB Run: 121

Surname: LEITCH
Forename: ROBERT
DOB/Age: 15.08.77
Address: 01 PIER ROAD
Location: Drs Taylor-Kavan & Mosley
Diagnosis: tired

CHI/Unit No: 1508773076

Sex: Male

Requestor: Dr Angela Mosley

[[CURRENT]]

Lab Number B,13.9094113.Q
Date/Time collected 10.12.13 09:13
Date/Time received 10.12.13 16:20

TSH mU/L (0.35-5.00) 4.20
Free T4 pmol/L (9.0-21.0) 13.0
T3 nmol/L (0.90-2.50)
TPO U/mL (<6.0)
TRAB U/L (0-15)

LE U/L
FSH U/L
Oestradiol pmol/L
Prolactin mU/L (0-400)
Progesterone nmol/L
Testosterone nmol/L (10.0-36.0)
SHBG nmol/L (13-70)
FAI
Free Testo pmol/L (>200)

AFP kU/L (<6)
ECG U/L (<5)
CEA ug/L (<5.0)
CA125 kU/L (0-35)
PSA ug/L (0.0-3.0)
LDH U/L (80-240)

Result Comments:

10.12.13 TFT : Patient likely to be euthyroid.

Date reported: 11.12.13

Authoriser: Angela Kremmyda CLY BIO

[IRH]

CLYDE HOSPITALS
HAEMATOLOGY REPORT

Name: LEITCH ROBERT

CHI/Unit No: 1508773076

DOB/Age: 15.08.77

Sex: Male

Address: 01 PIER ROAD

Current Location: Drs Taylor-Kavan & Mosley

Requestor: Dr Angela Mosley

Admission diagnosis: tired

Clinical details:

Lab No: B,13.9094114

Collected: 10.12.13 09:13 Received: 10.12.13 16:20

Authorized: 12.12.13 Authorizer:

B12

Serum Vitamin B12	210	ng/l	(189-883)
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SF

Serum Folate	- 1.1	ug/l	(2.7-20.0)
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FER

Serum Ferritin	281	ug/l	(20-300)
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Comments:

The Serum Vitamin B12 level is NORMAL.

Ferritin may vary with age and sex of patient and can rise during an acute phase response

The Serum Ferritin is NORMAL

The Serum Folate is LOW

**CLYDE HOSPITALS
BIOCHEMISTRY REPORT**

Form: SA Run: 274

Surname: **LEITCH**
 Forename: **ROBERT**
 DOB/Age: **15.08.77**
 Address: **01 PIER ROAD**
 Location: **Drs Taylor-Kavan & Mosley**
 Diagnosis: **rpt ??**

CHI/Unit No: **1508773076**Sex: **Male**Requestor: **Dr Angela Mosley**

[[CURRENT]]

Lab Number	B,14.9002109.Z	B,13.9094113.Q
Date/Time collected	07.01.14 09:14	10.12.13 09:13
Date/Time received	07.01.14 15:31	10.12.13 16:20

Sodium	mmol/L (133-146)	140
Potassium	mmol/L (3.5-5.3)	3.8
Chloride	mmol/L (95-108)	106
Bicarbonate	mmol/L (22-29)	
Urea	mmol/L (2.5-7.8)	5.0
Creatinine	umol/L (40-130)	73
GFR (est'd)	ml/min (>60)	>60
Glucose	mmol/L (3.5-6.0)	
CRP	mg/L (0-10)	
Magnesium	mmol/L (0.70-1.00)	
Calcium	mmol/L (2.20-2.60)	2.44
Adj Calcium	mmol/L (2.20-2.60)	2.46
Phosphate	mmol/L (0.80-1.50)	1.34
Albumin	g/L (35-50)	42
Alk Phos	U/L (30-130)	99
Tot Bilirubin	umol/L (0-20)	13
Conj Bilirubin	umol/L	7
AST	U/L (0-40)	+ 45
GGT	U/L (0-70)	+ 86
ALT	U/L (0-50)	+ 114
Amylase	U/L (0-180)	
CK	U/L (40-320)	
Troponin I	ug/L (<0.04)	
Total Protein	g/L (60-80)	
Globulins	g/L (23-38)	
Urate	mmol/L (0.20-0.43)	
Osmolality	mosm/kg (275-295)	
Cholesterol	mmol/L	
Triglyceride	mmol/L (0.2-2.3)	
VLDL Chol	mmol/L	
LDL Chol	mmol/L	
HDL Chol	mmol/L	
Chol/HDL		

Result Comments:

Date reported: 07.01.14

Authoriser: Automatic release by system

NHS Highland

Argyll & Bute CHP

Physiotherapy Department
Cowal Community Hospital
360 Argyll Street
Dunoon, PA23 7RL
01369704341



Dr Taylor-Kavanagh
246 Argyll Street
DUNOON
PA23 7HW

Date: 20/01/15

Enquiries to: Physiotherapy
Extension: 28340
Direct Line: 01369 708340

Dear Dr Taylor-Kavanagh

NAME: ROBERT LEITCH

DOB: 15/08/77

ADDRESS: 1 PIER ROAD, ROYAL BRAE, INNELLAN, BY DUNOON

The above patient arranged an appointment/ appointments but has failed to attend. We have therefore discharged them from the waiting list.

Yours sincerely

Physiotherapy Department



Headquarters: Assynt House, Beechwood Park, INVERNESS IV2 3BW

Chair: Garry Coutts
Chief Executive: Elaine Mead

NHS Confidential: Personal data about a patient

WEST OF SCOTLAND SPECIALIST VIROLOGY CENTRE				
LEVEL 5, NEW LISTER BUILDING, GLASGOW ROYAL INFIRMARY, 10-16 ALEXANDRA PARADE, GLASGOW, G31 2ER				
Tel: 0141 201 8722		Fax: 0141 201 8723		CPA: 0406
SURNAME LEITCH	FORENAME ROBERT	UNIT NO.	SEX DOB M 15.08.77	
SOURCE 246 Argyll St., Duno	CONSULTANT	CHI NO. HI:1508773076 GP DR A MDSLEY		
SPECIMEN P	LAB NO. V.14.0605934.W	REPORT STATUS Final	YOUR REF. NO.	
Hepatitis C antibody: Negative Hep B surface antigen : Negative				
VIROLOGY	DATE COLLECTED 24.01.14	DATE RECEIVED 29.01.14	DATE AUTHORISED 30.01.14 14:33	AUTHORISED BY Mrs A Devanney
Report to:		Copy for: 246 Argyll St., Duno		

Kyles Medical Centre

Tighnabruaich
PA21 2BE

Dr Alida J MacGregor
Dr Nicola S Hallum

Tel: 01700 811207
Fax: 01700 811766

TEMPORARY RESIDENT

DATE: 10-12-15

Robert

NAME: R. LEITCH

PHONE NO: (Local):

01700 811239

DATE OF BIRTH: 15-8-77

TEMPORARY/HOLIDAY ADDRESS:

ROYAL AN LOCHAN HOTEL, SHORE ROAD
TIGHNABRUAICH

HOME ADDRESS (Address where registered with GP):

40 ARDENSTON CRESCENT, KILN, DUNDOON

POST CODE:

PA22 8NE

OWN GP/PRACTICE ADDRESS:

Dr Campbell.
ARGYLL ST SURGERY DUNDOON

LENGTH OF STAY - MORE THAN 15 DAYS

☒

LESS THAN 15 DAYS

☐

LESS THAN 24 hrs

☐

CLINICAL INFORMATION

