

304 Gateway - Leitch, Robert, CHI: 1508773076, 16-July-2024, Clinical Radiology

HIGHLAND HOSPITALS - RADIOLOGY REQUEST: Cowal Community Hospital - Clinical Radiology**Type of referral:****Plain Film**Shaded areas for department use only
INCOMPLETE CARDS WILL BE RETURNED* previous LUV XRAY 3.01.19
after trauma

Appt:	at:
Appt:	at:

Date Referral Created: 16-Jul-2024

Unique Care Pathway Number: 101033631441Y

Date Referral Submitted (This date is fixed at hospital end): 16-Jul-2024**PATIENT DETAILS**

Surname	Leitch		
Forename(s)	Robert		
Title	MR	Sex	Male
Marital Status	Not Known		
Other Surname	-		
Date of Birth	15-Aug-1977		
CHI no.	1508773076		

Patient's address97
Ardenslate Road
Dunoon
PA23 8NN**Contact detail(s)**Mobile: 07383443420
E-mail: robertleitch93@gmail.com**Urgency of Referral:** Routine**Referral Type:**Out
Patient

CHI No: 1508773076

Administrative Information

Lab results will be available No

Special Information

This complies to RCR guidelines? Yes

REGISTERED GP DETAILS

Name	Dr Sabeel Saleem		
GMC code	6154222	GP code	69485
Practice name	Church Street Surgery		
Practice code	84241		

Practice address30 Church Street
Dunoon
Argyll and Bute
PA23 8BG**Contact number(s)**Voice: 01369 702772
Facsimile: 01369 704502

501 Gateway - Leitch, Robert, GMI: 1506773078, 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**

Description	Comment	Date Started
Allergies:	NO	-
Diabetes:	NO	-
High Risk:	NO	-
Pregnant:	NO	-
Mobility:	WALKING	-

Patient Measurements**Blood Pressure History**

Systolic	Diastolic	Date Recorded
132	82	24-Oct-2023

Body Measurement History

Body Mass Index	Height	Weight	Date Weight Recorded
34.71	181	113.7	24-Oct-2023

Clinical warnings**Allergies**

Description	Comment
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		