Registration Details - Patient No: 3313

Personal details...		Address details...	
Date of birth	04/12/1962	**Post Code**	G51 2PU
Sex	M	**House Name Flat No**	
Surname	Wright	**No and Street**	102 Summertown Road
Previous Surname		**Village**	
Forenames	Colin	**Town**	Glasgow
Calling Name	Colin	**County**	Lanarkshire
Title	Mr		
Birth Surname			
Marital Status	Marital status unknown		
Ethnic Origin	(White) Scottish		

HA/HB Details...		Contact details...	
Trading partner	Greater Glasgow	**Home Tel No**	
Registered GP	Dr Frances Chambers	**Work Tel No**	
Usual GP	Dr Frances Chambers	**Mobile Tel No**	07783349366
Residential Inst		**E Mail Address**	
Branch Surgery			
CHI Number	0412626071		

Practice Information...		Distances	
Dispensing	N	**Rural Mileage**	
Hospital Number		**Blocked Special**	
Records At	Rutland Surgery	**Walking Quarters**	

Further Information		Upload Consent	
Long/Short stay or Dead		**SCI-DC Consent**	Implied Consent (default)
Date of registration	07/07/2020		

AMS\MCR Details		ECS (GP Summary) Consent	
AMS Consent	Yes	**Patient Consent**	Implied Consent (default)
Pharmacy Details	Harmony Row Pharmacy-21,Harmony Row,GLASGOW,(G51 3BA)(Org Id - 1538)		
Item Collected Check	Yes		
MCR Suitability Status	-1		
MCR Registration Status	2		

Medical Record

Problems

Active Problems		Authorised By	Code
02/10/2025	Overdose of drug OPIOID	Mrs Boyle	SL-5
22/09/2025	Housebound	Mrs Boyle	13CA
04/04/2025	Plantar fasciitis	Mrs Jackson-Boyce	N2179
05/03/2025	Hypothyroidism	Dr Chambers	C04-3
11/02/2025	Carotid artery stenosis (Bilateral)	Dr Dale	G634
11/02/2025	Stroke and cerebrovascular accident unspecified Right parietal infarct	Dr Dale	G66
04/06/2024	[V]Palliative care	Ms Turner	ZV57C
31/01/2024	Current smoker	Mrs Jackson-Boyce	137R
04/08/2023	Suicidal ideation	Mrs O'Sullivan	1BD1
	Abnormal weight loss	Mrs O'Sullivan	1625

19/07/2023			
26/06/2023	Low mood	Mrs O'Sullivan	1BT-1
26/06/2023	Dysphagia pharyngeal with aspiration - moderate to severe	Mrs O'Sullivan	194-1
17/02/2023	Gastrostomy operations weight gone up 50 kilos	Miss Turner	7617
20/01/2023	Chronic obstructive airways disease NOS	Mrs Jackson-Boyce	H3z
13/01/2023	[V]Has gastrostomy Elective RIG	Mrs O'Sullivan	ZV441
28/10/2022	Nasogastric feeding	Mrs Jackson-Boyce	8C440
06/07/2022	Unintentional weight loss	Mrs O'Sullivan	1627
04/03/2019	Malignant neoplasm of larynx SCC T3	Dr Blackwood	B21
20/03/2017	Asthma unspecified	Sister Henderson	H33z
23/02/2010	[D]Cough syncope	Dr Wolfe	R0620
28/03/2008	ECG: shows LVH	Dr Wolfe	3242
06/01/2004	Essential hypertension	Sister Henderson	G20
01/05/2002	Cerebral infarction NOS	Sister Henderson	G64z
03/08/1994	[X]Deliberate drug overdose / other poisoning ponstan, trazodone, codeine, inderal priority=1	Robin	U20
16/03/1994	[X]Neurotic depression	Robin	Eu341

Past Problems		Authorised By	Code
21/02/2026	**Shortness of breath symptom** & Vomitting	Miss Turner	173-3
20/02/2026	**Standard chest X-ray**	Miss Turner	535
18/12/2025	**Standard chest X-ray**	Mrs Jackson-Boyce	535
10/10/2025	**Misuse of Cocaine unspecified**	Dr Dale	EMISNQMI91
02/10/2025	**Standard chest X-ray**	Mrs Boyle	535
26/08/2025	**Vitamin B12 deficiency anaemia**	DR Gangadharan	D011-1
25/07/2025	**Breathlessness** Left sided weakness	Mrs MacLean	173
24/07/2025	**Computerised tomograph scan**	Mrs MacLean	567-3
04/05/2025	**Chest infection NOS**	Miss Turner	H06z0
11/02/2025	**Computed tomography angiography of coronary arteries**	Mrs Boyle	5544
11/02/2025	**Computed tomography angiography**	Mrs Boyle	56G
11/02/2025	**Computed tomography angiography** angio arch and carotid	Miss Turner	56G
11/02/2025	**Computed tomography angiography** head - right parietal infarct	Miss Turner	56G
01/05/2024	**Shortness of breath**	Mrs MacLean	1739
01/05/2024	**Acute exacerbation of chronic obstructive airways disease**	Mrs MacLean	H3122
27/03/2024	**Aspiration pneumonitis**	Mrs Jackson-Boyce	H47-1
27/03/2024	**Shortness of breath symptom**	Mrs Jackson-Boyce	173-3
04/03/2024	**Poor sleep pattern**	Dr McEntee	1B1Q
04/03/2024	**Local infection skin/subcut tissue NOS**	Dr McEntee	M07z
28/02/2024	**Computed tomography angiography**	Miss Turner	56G
11/01/2024	**Difficulty breathing** Ambulance called	Mrs Boyle	1738
26/06/2023	**Standard chest X-ray** POSSIBLE ASPIRATION	Mrs O'Sullivan	535
19/06/2023	**Computerised tomograph scan** stable	Mrs O'Sullivan	567-3
08/03/2023	**Standard chest X-ray**	Mrs O'Sullivan	535
20/01/2023	**Skin and subcutaneous tissue infections**	Mrs Jackson-Boyce	M0
20/01/2023	**Lower resp tract infection**	Mrs Jackson-Boyce	H06z1
15/12/2022	**Computerised tomograph scan**	Mrs Boyle	567-3
19/08/2022	**Positron emission tomography**	Mrs Boyle	EMISNQPO4
20/07/2022	**Positron emission tomography**	Mrs Boyle	EMISNQPO4
20/07/2022	**Standard chest X-ray** revealed multifocal cavitating nodules	Mrs Boyle	535
13/07/2022	**Did not attend - no reason**	Dr Blackwood	9N42
12/07/2022	**Abnormal weight loss**	Mrs O'Sullivan	1625
12/07/2022	**Dysphagia**	Mrs O'Sullivan	194-1
19/05/2022	**Standard chest X-ray**	Mrs Boyle	535
03/02/2021	**COVID-19 confirmed by laboratory test**	Miss Turner	^ESCT1300228
13/12/2019	**Gastrostomy operations**	Mrs MacLean	7617
17/05/2019	**Nasojejunal feeding**	Dr Blackwood	8C441
20/03/2017	**Spirometry**	Mrs Boyle	5882
16/09/2015	**[X]Mild depressive episode** Informal	Mrs Boyle	Eu320
13/01/2014	**Polypharmacy** Polypharmacy LES	Dr Blackwood	8B36-1
25/01/2010	**Obesity**	Dr Chambers	C380
16/03/2009	**ECG normal** priority=1	Mrs O'Sullivan	3216
29/04/2008	**EEG normal** priority=1	Mrs O'Sullivan	31130
16/04/2008	**CAT scan** brain normal priority=1	Mrs O'Sullivan	567
04/03/2008	**Piles - haemorrhoids** priority=1	Mrs O'Sullivan	G84
04/03/2008	**Proctoscopy** priority=1	Mrs O'Sullivan	772Bz-1
04/03/2008	**Sigmoidoscopy** priority=1	Mrs O'Sullivan	771Qz-1

08/01/2008	**Weight management programme offered** 2:	Sister Henderson	66CG
01/12/2006	**Advancement of mucosa of lip NEC** normal mucosa	Dr Chambers	75041
01/12/2006	**Surgical biopsy - colon**	Dr Chambers	PCSDT18965_592
22/11/2006	**Colonoscopy**	Dr Chambers	771J-1
08/09/2006	**Notes summary on computer** priority=1	Mrs O'Sullivan	9344
07/11/2005	**Magnetic resonance imaging** brain normal priority=1	Mrs O'Sullivan	569
31/10/2005	**Pneumococcal vaccination given** priority=1	Sister Henderson	65720
19/02/2004	**Sigmoidoscopy** normal priority=1	Mrs O'Sullivan	771Qz-1
08/07/2002	**Other specified other operation on haemorrhoid** banding priority=1	Mrs O'Sullivan	7736y
08/07/2002	**Colonoscopy normal** priority=1	Mrs O'Sullivan	3617
01/05/2002	**Cerebral arterial occlusion**	Mrs O'Sullivan	G64
29/04/2002	**ECG normal** priority=1	Mrs O'Sullivan	3216
04/03/2002	**Haemorrhoids** priority=1	Mrs O'Sullivan	G84
24/01/2002	**Helicobacter breath test negative** priority=1	Mrs O'Sullivan	4JM1
14/09/2001	**CLO test positive**	Dr Chambers	4JO0
11/09/2001	**Upper Gastrointestinal endoscopy** priority=1	Mrs O'Sullivan	761Fz
11/09/2001	**Simple hiatus hernia** with oesophagitis priority=1	Mrs O'Sullivan	J347
14/10/1994	**Bilateral vasectomy for contraception** priority=1	Mrs O'Sullivan	7C110
30/11/1965	**Convergent squint** priority=1	Mrs O'Sullivan	F4J0

Health Admin Problems		**Authorised By**	**Code**
07/12/2011	Current smoker	Dr Wolfe	137R
23/02/2010	Current smoker :	Dr Wolfe	137R

Drug Allergies		**Authorised By**	**Code**
	None		

Non Drug Allergies		**Authorised By**	**Code**
	None		

Family History		**Authorised By**	**Code**
	None		

Immunisations		**Authorised By**	**Code**
15/01/2022	**Immunisation course to maintain protection against SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) (Right Arm) C-19 Booster Moderna (K Docherty)** 000050A/ MOD/IM/Right Arm//C-19 Booster Moderna (K Docherty)		^ESCT1423363
15/01/2022	**Administration of first dose of SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) vaccine (Right Arm) C-19 Booster Moderna (Partick Burgh hall public vaccination clinic)** 000050A/ MOD/IM/Right Arm//C-19 Booster Moderna (Partick Burgh hall public vaccination clinic)		^ESCT1348323
23/06/2021	**Administration of second dose of SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) vaccine (Right Arm) C-19 (By A Parvaiz)** PW40041/ AZ/IM/RUA//C-19 (By A Parvaiz)		^ESCT1348325
12/03/2021	**Administration of first dose of SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) vaccine (Right Arm) C-19 (By M MacIntyre)** PV46671/ AZ/IM/RUA//C-19 (By M MacIntyre)		^ESCT1348323
19/09/2020	**Seasonal influenza vaccination (Left arm)** Lot P100243203 Exp 05/21	Mrs Lewis	65ED
19/09/2020	**Immunisations**	Mrs Lewis	65-1
10/10/2016	**Seasonal influenza vaccination** Sanofi Pasteur N4A291V exp 04/2017 Left Deltoid **(GMS)**	Mrs Kyle	65ED
14/12/2015	**Seasonal influenza vaccination** Sanofi Pasteur M8179-1 Exp 05/16 **(GMS)**	Dr Blackwood	65ED
14/12/2015	**Immunisations**	Dr Blackwood	65-1
09/02/2015	**Seasonal influenza vaccination** Sanofi pasteur L8206-1 exp 05/15 **(GMS)**	Sister Henderson	65ED
09/02/2015	**Immunisations** FLU. No CI. VCO. IM (L) deltoid. General advice given	Sister Henderson	65-1
04/12/2013	**Seasonal influenza vaccination** Enzira 24749411a Exp 06/14 **(GMS)**	Mrs Kyle	65ED
04/12/2013	**Immunisations**	Mrs Kyle	65-1
07/12/2011	**Influenza vacc consent given** Recorded through Combined Vaccination priority=2	Sister Henderson	68NV
07/12/2011	**Influenza vaccination** Injection Site: Left Arm priority=2 Batch Number: 113401 Expiry date: 31/08/2012 Manufacturer: Novartis Vaccines Product Name: Agrippal	Sister Henderson	65E
26/11/2010	**Influenza vacc consent given** Recorded through Combined Vaccination priority=2	Maureen	68NV
26/11/2010	**Influenza vaccination** Injection Site: Left Arm priority=2 Batch Number: 107201C Expiry date: 31/05/2011 Manufacturer: Novartis Vaccines	Maureen	65E

	Product Name: Agrippal		
28/11/2009	**Consent given for pandemic influenza vaccination** Recorded through Combined Vaccination priority=2	Robin	68Nr
28/11/2009	**PANDEMRIX - first influenza A (H1N1v) 2009 vaccination given** Injection Site: Left Arm priority=2 Batch Number: A81CA111A Expiry date: 31/03/2010 Manufacturer: GlaxoSmithKline Product Name: Pandemrix	Robin	65E9
28/11/2009	**Influenza vacc consent given** Recorded through Combined Vaccination priority=2	Robin	68NV
28/11/2009	**Influenza vaccination** Injection Site: Right Arm priority=2 Batch Number: 213031A Expiry date: 30/06/2010 Manufacturer: Novartis Vaccines Product Name: Begrivac	Robin	65E
13/10/2008	**Influenza vacc consent given** Recorded through Combined Vaccination priority=2	Nurse Torrance	68NV
13/10/2008	**Influenza vaccination** Site: Left Arm - Batch Number: P07 Expiry Date: 6/2009 priority=2 Batch Number: P07 Expiry date: 30/06/2009 Manufacturer: Unknown Manufacturer Product Name: Unknown Influenza Vaccination	Nurse Torrance	65E
07/01/2008	**Influenza vacc consent given** Recorded through Combined Vaccination priority=2	Sister Henderson	68NV
07/01/2008	**Influenza vaccination** Site: Right Arm priority=2	Sister Henderson	65E
13/10/2006	**Influenza vaccination** Disease: SPICE Stroke Action, priority=2	Mrs Thompson	65E
31/10/2005	**Influenza vaccination** Disease: SPICE Basic Health Values, priority=2	Sister Henderson	65E
31/10/2005	**Pneumococcal vaccination given** priority=1	Sister Henderson	65720
26/11/2004	**Influenza vaccination** Disease: SPICE Basic Health Values, priority=2	norma	65E

Consultations

01/05/2026 12:14	Dr R Dale at Data Entry
History	Palliative care meeting. Was due ENT review 6 months ago. No letter. Check with patient when next contact.
24/04/2026 13:12	DR Anjali Gangadharan at Telephone
History	Further attempt - ringing out - await patient contact
24/04/2026 09:36	DR Anjali Gangadharan at Telephone
History	Prebooked tel call - no answer - was stable at last review. Await contact.
22/04/2026	- Gurinderjit Kaloya at Rutland Surgery
Additional	Repeated prescription Repeat Reauthorisation Medication review done by pharmacist
31/03/2026 13:16	DR Anjali Gangadharan at Telephone
History	Prebooked tel call - doing better, still some moments overwhelming but overall prefers this. Not wishing any changes - for review in 1/12 or sooner if anything changes. Needs more inhalers too - issued.
17/03/2026 14:36	DR Anjali Gangadharan at Telephone
History	Urgent tel call - asking if could reduce antidepressant, wonders if the higher dose isnt as efective for him and think actually maybe making things worse - agree to reduce dose to 30mg and review in 2/52 - for review sooner if required.
Medication	Mirtazapine Tablets 30 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
16/03/2026 18:00	DR Anjali Gangadharan at Acute Prescription Request
History	SR diazepam and zoplicone - due and issued
27/02/2026 11:38	DR Anjali Gangadharan at Telephone
History	Was due to phone patient re: CXR but note admission in interim and given abx. NFA.
26/02/2026 14:00	Mr Kevin Spence at Rutland Surgery
Comment	IDL - Colin was admitted following an episode of vomiting and progressive SOB Diazepam and Zopiclone moved to acutes - GP to kindly review as per IDL Paracetamol directions updated

Additional	See letter for full summary, follow-up and results Post hospital dischrge med reconciliation with medical notes QEUH ward 5d (21/02/2026-25/02/2026) Uses monitored dosage system Site of encounter NOS Actioned in Pharmacotherapy Hub
05/02/2026 17:00	Dr Edel McEntee at Rutland Surgery
History	Morphine, diazepam and zopiclone issued
02/02/2026 11:52	DR Anjali Gangadharan at Telephone
History	Prebooked tel call - chest symptoms much the same as normal, still some cough and SOB. Fully oral intake. Still moof all over the place. No new housing yet.
Examination	Less SOB than I have heard him in past. Managing sentences.
Test Request	Repeat XR Chest - *Completed*
30/01/2026 09:35	DR Anjali Gangadharan at Rutland Surgery
History	Due repeat CXR but should check symptoms - admin to arrange tel call with me.
30/01/2026	at MJog
Additional	SMS text sent to patient Summary of text message sent to patient / Dear Colin Wright, A telephone appointment has been arranged for yourself on Monday 2nd of February between 9-1pm with Dr Gangadharan. Thank you. Rutland Surgery
31/12/2025 08:54	MS Nicola Williams at Rutland Surgery
Comment	SR-Request for Fostair. he is on Trimbow. Reception to check back with patient why this has been requested.
16/12/2025 11:43	DR Anjali Gangadharan at Rutland Surgery
History	Prebooked call - no answer - will issue Vit D - can inform patient, via mjog
Medication	Colecalciferol Tablets 25,000 units *12 TABLET TWO TO BE TAKEN ONCE WEEKLY FOR 6 WEEKS* Stexerol-D3 Tablets 1,000 units *28 TABLET ONE TO BE TAKEN DAILY COMMENCE 4 WEEKS AFTER HIGHER DOSE COURSE COMPLETE*
16/12/2025	at MJog
Additional	Outgoing mail NOS Summary of text message sent to patient / Dear Colin Wright, Your bloods are back and show low vitamin D. We would recommend replacing this. Firstly take high dose once weekly for 12 weeks then 4 weeks later commence daily tablets lifelong. If you have any questions please do not hesitate to contact us. Rutland Surgery
11/12/2025 12:11	Dr Frances Chambers at Data Entry
History	note adm Oct for follow up x-ray after 6 wks to follow up left sided consol
Test Request	XR Chest - *Completed*
02/12/2025	DR Anjali Gangadharan at General Practice Surgery
Result	(Non Coded Event - I Intrinsic factor Q) Normal - no action (AG)
02/12/2025	DR Anjali Gangadharan at General Practice Surgery
Result	(Non Coded Event - I Autoantibodies) Normal - no action (AG)
02/12/2025	DR Anjali Gangadharan at General Practice Surgery
Result	(Non Coded Event - Vitamin D) 15 - needs replaced - tel call to discuss please (AG) (Non Coded Event - Bone Profile) just out of normal range - OK (AG)
02/12/2025	DR Anjali Gangadharan at General Practice Surgery
Result	Serum folate Normal - no action (AG) (Non Coded Event - Active B12) Normal - no action (AG)
28/11/2025 16:56	DR Anjali Gangadharan at Rutland Surgery
	Red appt - attends with daguhter - has been off peg, doing well with oral intake.

History	Has been more coghing over past couple of days, lot sof phlegm. Also finding gets stiff on and off.Note ca borderline during admission -r echeck, along with b12 and folate as beow. Mood okay - still no notice re: housing. Struggles with this and lack of mobility with post stroke but okay.
Examination	36.7 94% 113 Scatered creps. HS1+2+0
Comment	Rx with abx, strict worsening advice and await bloods

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28/11/2025 14:44	Miss Emma Fraser at Rutland Surgery
Comment	DN Amanda (07380121215) called regarding Colin, she said it is about ongoing issues and would like to pass along that he is breathless and said he is coughing up a lot of mucus. He also said he wants to overdose, she said if he didn't accept an appointment today she would like it pass onto the doctor, however she is not overly concerned. An appointment was made with Colin.

26/11/2025	Mrs Vicki Jackson-Boyce at Rutland Surgery
Test Request	Intrinsic Factor Antibodies - *Requested*, Liver/Gastric Parietal Cell abs - *Requested*, Vitamin B12 (Active) - *Requested*, Folate - *Requested*, Bone Profile - *Requested*, Vitamin D - *Requested*
New Referral	(NHS), , , , 8Hll.: Referral to community phlebotomist (SCI Gateway Referral)

26/11/2025	- Gurinderjit Kaloya at Rutland Surgery
Comment	Request for mirtazapine to be changed to standard tabs so can be dispensed in dosette box.
Additional	Prescription by supplementary prescriber Rx issued by Pharmacist Independent Prescriber Medication changed Uses monitored dosage system Medication review done by pharmacist

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21/11/2025 10:22	Ms Marie Claire Grant at Data Entry
Comment	Other medication management Zendesk query - Pharmacy requesting medication to be put on weekly dispense GP has already done this Thanks.

20/11/2025 16:17	Dr Frances Chambers at Special Request
History	changed rpts to weekly disp per pharmacy r/q. also requesting diaz be made 84 tabs and marked 1 tds however uses less than this on a prn basis and shouldn't be taking 3 a day. appears to order 21 ever 3 wks or so. should not be put in dosette but kept oiutside box for prn use and order when running short

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04/11/2025 09:50	Mrs Diane MacLean at Rutland Surgery
Comment	Unable to be contacted by Podiatry several ocasssions

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04/11/2025	at MJog
Additional	Outgoing mail NOS Summary of text message sent to patient / Dear Colin Wright, Colin ignore that previous tel no for podiatry. Please call 0800592087 Thanks Rutland Surgery

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04/11/2025	at MJog
Additional	Outgoing mail NOS Summary of text message sent to patient / Dear Colin Wright, Colin please contact 01475501206 regarding an appointment for podiatry thanks Rutland Surgery

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29/10/2025 12:08	Dr R Dale at Data Entry
History	Note BP. Taking amlodipine 5mg.
Comment	Try increasing amlodipine to 10mg daily. Check BP in 2 weeks.
Medication	Amlodipine Tablets 10 mg *28 tablet ONE TO BE TAKEN EACH DAY. CAN BE CRUSHED AND DISPERSED IN WATER. GIVE IMMEDIATELY*

29/10/2025 09:40	Mrs Carol Anne Boyle at Rutland Surgery
Comment	**Result called in by DNs 125/90**

28/10/2025 16:42	Dr R Dale at Data Entry
History	Phoned, no answer.

28/10/2025 15:39	Dr R Dale at Data Entry
History	Note below. Phoned, no answer. Message left.

28/10/2025 14:31	Ms. Hazel Barr at Rutland Surgery
Comment	Call from Karen McCutcheon Comm.Physio out seeing pt today, pt mentions v low mood & suicidal thoughts, mirtazipine withheld at recent admission asking for call
27/10/2025 09:00	Dr Edel McEntee at Rutland Surgery
History	Mirtazapine issued
23/10/2025 12:33	Mrs Carol Anne Boyle at Rutland Surgery
Comment	**Also added on to referral BP request. Colin has app 19/11/2025 for chest x-ray**
Test Request	Full Blood Count - *Requested*
14/10/2025	at MJog
Additional	Outgoing mail NOS Summary of text message sent to patient / Dear Colin Wright, Podiatry self referral no is 0141-347-8909 or 8908 Rutland Surgery
14/10/2025	at MJog
Additional	Outgoing mail NOS Summary of text message sent to patient / Dear Colin Wright, TYPE YOUR MESSAGE HERE Rutland Surgery
10/10/2025 09:36	Mr Kevin Spence at Rutland Surgery
Comment	IDL 02/10/2025-09/10/2025. For full summary see IDL. Colin was admitted with low GCS and oxygen requirement, secondary to opioid overdose. Co-amoxiclav issued as fixed dose period. Colin was unaware that he has to stop taking Azithromycin while taking co-amoxiclav as stated on IDL. Request by patient to switch to lansoprazole caps instead of orodisp
Follow Up	No
Test request	Yes - 6 week follow up chest x-ray
Additional	Repeated prescription Repeat Reauthorisation Post hospital dischrge med reconciliation with medical notes QEUH Ward 7b Medication changed LKansoprazol orodisp 30mg switched to Lanosprazole 30mg caps Telephone encounter Site of encounter NOS Actioned in Pharmacotherapy Hub
09/10/2025 16:46	Dr Frances Chambers at Data Entry
History	Note IDL
Test Request	Repeat XR Chest - *Completed*
08/10/2025 11:38	Miss Megan Turner at Rutland Surgery
Comment	Patient currently in hospital
02/10/2025 12:53	Dr Frances Chambers at Data Entry
History	Dr Aldwright A&E - in A&E low GCS ?aspiration, has potentially overdosed also. asking about premorbid - on pall care/DNACPR, recent CVA, recurrent aspirations and informed decision to continue to take food orally aware of risks, voiced suicidal feelings in past and shown distress and low mood. contact us prn. apparently recent PEG removed - see dietician letter.
01/10/2025 14:16	Dr R Dale at Phone Encounter
History	CVA in February. Still has weakness in left arm, unable to bend fingers or pick anything up, Ache in left shoulder and wrist. No numbness. Had been seen by OT but was told they could not work with him as he is too breathess. Still open to community stroke team but has been told he could be waiting months. Will write to them about current symptoms.
01/10/2025 14:03	Dr R Dale at Data Entry
History	Request for phone call from DNs. No answer. Message left.
27/09/2025 00:00	Mrs Diane MacLean at General Practice Surgery
Comment	No response to bowel cancer screening programme invitation Non-Responder
Follow up	No response to bowel cancer screening programme invitation (29/06/2025) Bowel Cancer Screening Exclusion

22/09/2025 14:59	- Fatemeh Daryani at Rutland Surgery
Examination	O/E - BP reading
	Blood pressure reading 144/98 mm Hg
Comment	Attends for blood test with daughter, consent given. very weak mobilty, out of breath. very emotional and crying. has not started iron yet, says unable to open the bottle due to stroke and lives alone. patient advised script sent to chemist on 19/Sept for Iron tablet, advised to start taking his tablet and I will send BP & Blood test ref in 4/52. happy with plan.
Examination	O/E - height, 163 cm
	O/E - weight, 47.8 Kg
	Ideal Weight, 61.11 Kg
19/09/2025 10:00	Dr R Dale at Rutland Surgery
History	Daughter states he stuggles to open bottle of iron liquid. Requesting tabs.
Medication	Ferrous Fumarate Tablets 210 mg *28 tablet ONE TAB DAILY*
05/09/2025 09:24	Dr R Dale at Data Entry
History	WCC 16.0, Hb 115, transferrin 1.6, iron 7, transferrin saturation 17.
Comment	Re-start iron. Any symptoms of infection? Repeat FBC in 4 weeks.
03/09/2025	Mrs Vicki Jackson-Boyce at Rutland Surgery
Examination	O/E - height, 163 cm
	O/E - weight, 46 Kg
	Body Mass Index, 17.31
26/08/2025 14:23	DR Anjali Gangadharan at Home visit
Problem (FIRST)	**Vitamin B12 deficiency anaemia**
History	Visit as planned. Doing okay. Had cxr and CT last week - no results yet. Stopped meds but has restarted them. Still eating.
Examination	Looks brighter than I have seen for some time. No temp. SpO2 95% HR 112 Chest - wheeze but nil else.
Comment	Short course steroids. Phoned and discussed B12 and folate - agreeable to commencing - doubt would manage with oral/diet so can commence IM once this complete can commence folic acid. Happy with the same. recheck bloods in 3/12 with IF and PC.
Medication	Prednisolone Tablets 5 mg *30 TABLET SIX TO BE TAKEN IN THE MORNING FOR 5 DAYS*
	Folic Acid Tablets 5 mg *56 TABLET ONE TO BE TAKEN DAILY*
	Hydroxocobalamin Solution for injection 1 mg/ml, 1 ml ampoule *6 AMPOULE LOADING DOSE OF 1MG INJECTED IM 3 TIMES A WEEK FOR 2 WEEKS FOLLOWED BY PRESCRIBED 3 MONTHLY MAINTENANCE DOSE*
	Hydroxocobalamin Solution for injection 1 mg/ml, 1 ml ampoule *1 AMPOULE MAINTENANCE DOSE OF 1MG IM INJECTION EVERY 3 MONTHS WITH CLINICAL REVIEW ONLY IF ADMINISTRATION INTERVAL EXCEEDS 1 YEAR*
26/08/2025	Mrs Vicki Jackson-Boyce at Rutland Surgery
Test Request	Full Blood Count - *Requested*, Ferritin - *Requested*, Iron / Transferrin - *Requested*
New Referral	(NHS), , , , 8HII.: Referral to community phlebotomist (SCI Gateway Referral)
25/08/2025 14:48	DR Anjali Gangadharan at Duty Doctor Telephone Call
History	Message from physio - thinks has deteriorated and could do with a visit - number left but no answer. Phoned Colin - CXR was done last week, still not 100% - offered visit mane - agreeable to this.
20/08/2025 11:57	DR Anjali Gangadharan at Telephone
History	Further attempt at call - no answer - will ask admin to mjog to make appt.
19/08/2025 12:31	DR Anjali Gangadharan at Telephone
History	Prebooked tel call - no asnwer - VM left. To discuss chest, B12 and folate replacement.
13/08/2025 16:21	Dr Frances Chambers at Results recording
History	Note wcc 13.3 - recent pred and had amox 25/7. can repeat in 2 wks. Hb 112 dropping, ferr ok however ?acute phase - iron studies with next bloods also. checked back and can see folate and B12 were low in May and not yet started

	rx - has appt AG on 19/8 - task to her remind to discuss rx of these.

12/08/2025 12:22	DR Anjali Gangadharan at Telephone
History	Prebooked tel call - breathing is main issue. Ongoing dry cough and feeling breathless. Has steroids which he is taking. Using oramorph to some affect but not much. Offered admission if struggling - advised does not want this - wants to wait and see what CXR next week shows first. Feels managing. I will clal to check in next Tuesday but knows can contact us sooner if required.
Examination	Managing sentences okay

11/08/2025 15:38	DR Anjali Gangadharan at Acute Prescription Request
History	SR zoplicon - infrequent use - issued

04/08/2025 16:47	Miss Megan Turner at Rutland Surgery
Test Request	Ferritin - *Requested*, Liver Function Tests - *Requested*, Lipid profile (inc. HDL) - *Requested*, Full Blood Count - *Requested*
New Referral	(NHS), , , , 8HII.: Referral to community phlebotomist (SCI Gateway Referral)

04/08/2025 12:27	Dr R Dale at Phone Encounter
History	Note below. Breathlessness continues (now 10-12 weeks). No benefit from 2 antibiotics. Dry cough. Apyrexial. Feels breathless most of the time, not just on exertion. Discussed prednisolone. Happy to take these again. Requesting tablets. Review if not settling.
Medication	Prednisolone Tablets 5 mg *30 TABLET SIX TO BE TAKEN IN THE MORNING FOR 5 DAYS*

04/08/2025 11:48	Miss Megan Turner at Rutland Surgery
Comment	Dn called - pt breathlessness, refusing hosp, breathless getting worse, doesn't want GP out at house. DN thinks he needs a steroid.

30/07/2025 13:24	Dr R Dale at Data Entry
History	Palliative care review. DNs visit every 3 days to change fentanyl patch. At times contact can be tense.

30/07/2025	- Gurinderjit Kaloya at Rutland Surgery
Comment	Does not take meds via PEG- removed peg instructions on rpt meds. Reviewed meds if can change to liquids. Amlodipine liq would be expensive disolves easily in water so leave as. Atorv chewbale tabs 20mg but would need to take 2 tabs & would be expensive so left as. Continue crushing & dispersing.
Additional	Polypharmacy medication review Medication changed Drug therapy discontinued twocal, saliveeze, pred Medication review done by pharmacist

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25/07/2025 11:58	DR Anjali Gangadharan at Rutland Surgery
History	Attends with daughter. Just does not want to be a burden - daughter is planning to apply to housing with a warden. No immediate plans but just sometimes feels life would be easier if he wasn't here. Breathing a bit more hard. Note FDL and CXR changes. No blood. No other changes. E&D same as usual. Carer helps in am.
Examination	37.1 96% 123 Tearful at times WWP HS1+2+) Chest - scattered creps
Comment	Discussed onward steps - does not feel hospital offers anything, for abx, I will check in in August, knows can contact us sooner. Has counselling planned and thinks this and single level living will help . Strict worsening advice.

25/07/2025 09:30	Miss Johanna Beckert at Rutland Surgery
History	IDL QEUH Ward 64 - 07/07-10/07/25 (delayed IDL, received by pharm hub 25/07/5)
Comment	worsening left sided weakness and SOB. LRTI. Discharged himself AMA. no med changes - some meds located in past view or nw cancelled. No changes made as this is a delayed IDL.
Additional	Post hospital dischrge med reconciliation with medical notes Site of encounter NOS Actioned in Pharmacotherapy Hub

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24/07/2025 17:04	Dr Frances Chambers at Telephone Consultation
History	Tel cons - feeling suicidal, walked down to Clyde last night at midnight amnd felt like throwing himself in. Had not had a drink. feels he is a burden, thinks will be safe but feeling comes and goes. Daughter won't let him out tonight (she was at A&E last night) has got even weaker in left side since CVA - frustrated

	re this. Still frustrations re housing, they have said need more info, can do a further letter. Following on from CVA weakness making stairs difficult. agreed to come down tomorrow am
Comment	letter of support for housing done

23/07/2025 09:05	DR Anjali Gangadharan at Acute Prescription Request
History	SR mirtazipine,out of hospital and has one left - due and ossied

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22/07/2025 13:00	DR Anjali Gangadharan at Acute Prescription Request
History	SR mirtazipine - isnt he still in hospital?

10/07/2025	Mrs Vicki Jackson-Boyce at Rutland Surgery
New Referral	(NHS), , , , 8H72.: Refer to district nurse (SCI Gateway Referral)

09/07/2025 18:20	Dr R Dale at Data Entry
History	Letter from stroke clinic. For review of medication as can struggle with larger tablets. Repeat LFT and lipids in 1 month.

08/07/2025 14:39	DR Anjali Gangadharan at Telephone
History	Phone call with Nicola - Colin in hospital - admitted yesterday, has pneumonia and under observation - will touch base once out of hospital.

23/06/2025 14:14	DR Anjali Gangadharan at Telephone
History	Prebooked tel call - On the whole feels doing well. Has only just started higher dose mirtaz - no effect as such yet. Disussed breathing - has started nebs - has not been using oramorph as had run out. also running out of diazepam - using very sparingly but both help calm things down.
Examination	Easiest I have heard him breathe in recent times.
Comment	Rx done - review in 2-3/52 or sooner if require d- happy with the same

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20/06/2025	Mrs Vicki Jackson-Boyce at Rutland Surgery
Comment	DN called to say pt is complaining of breathlessness more than usual on exersion. His oxtgen levels on rest are 93-95 and on exersion are 94 so not too bad.

19/06/2025 14:01	DR Alison Fullerton at Rutland Surgery
History	As per respiratory
Medication	Azithromycin Tablets 500 mg *12 tablet 1 TAB ON MON/WED/FRI* Salbutamol Nebuliser solution 2.5 mg/2.5 ml unit dose ampoule *20 unit dose USE ONE NEBULE WHEN REQUIRED UP TO FOUR TIMES DAILY*

13/06/2025	at MJog
Additional	Indirect encounter NOS Summary of text message sent to patient / Dear Colin Wright, The doctor will call you on Monday 23rd June in the afternoon for a medication review. If this is unsuitable then please let us know Thanks. Rutland Surgery

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11/06/2025 08:53	Dr R Dale at Data Entry
History	SR - "see letter in Docman". No recent letters in Docman.

09/06/2025 09:05	DR Anjali Gangadharan at Rutland Surgery
History	EF has checked with SAMH - needs further referral - will arrange.
Comment	Dear Colleague, I would be grateful for your assisstance with this gentleman who has been relatively isolated since the loss of his wife. He himself has had laryngeal cancer and although lives with his daughter and her family does not have much support. He is currently engaging with counselling and would like to be able to go out more. I would be grateful if you could consider providing him any support to improve his quality of life. Kind regards, Dr Anjali Gangadharan

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09/06/2025	*** Docman Do Not Edit Or Delete*** at Docman
Additional	Letter from consultant Clinical Letter Prince & Princess of Wales Hospice Palliative Care

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09/06/2025	Mrs Vicki Jackson-Boyce at Rutland Surgery
New Referral	(NHS), , , , JHCRE4: Referral to mental health service (SCI Gateway Referral)

02/06/2025 14:53	DR Anjali Gangadharan at Telephone
History	Prebooked tel call as plannned - discussed antidepressant - keen to try higher dose - using zopiclone to help reset sleep cycle - needs more - agree to issue. Happy to try counselling.
Comment	I will ask admin team to chase up SAM H
Medication	Mirtazapine Orodispersible tablets 45 mg *30 tablet ONE TABLET AT NIGHT*
History	Not for attempted CPR (cardiopulmonary resuscitation)
Comment	Discussed DNAR - keen for this to be in place. Will try counselling etc but does not wish to be resuscitated. No plans for harm etc but if something were to happen, does not want resuscitated. DNAR completed. Will ask admin to inform DNs.
Follow up	Key information summary, special note expiry date (31/12/2099)
KIS	Special patient note Laryngeal cancer Radical Radiotherpay completed 10/5/19 NJ tube came out and declined reinsertion. Under care of Ms Anne Hitchings, ENT Consultant. ENT contact number 1041 232 7565 Lives with daughter and at times iwth wife. 21/7/22. Recent admission to initiate nasogastric feeding. 2/6/25 - mood variable, loss of wife troublesome. Has been reerrred for counselling services. Wishes to have DNAR in place.
30/05/2025 14:52	DR Anjali Gangadharan at Telephone
History	Phone call with Eileen Cleary - has referred to counselling services - I will chase up SAMH. No real further input for Pall services. Would now consider change to antidepressant and DNAR - I will discuss both when I call next week.
30/05/2025 11:33	DR Anjali Gangadharan at Telephone
History	Phoned to speak to Colin - has Prince and Princess of Wales in at present - said I would touch base next week, happy with this.
29/05/2025 13:21	DR Alison Fullerton at Rutland Surgery
History	Zopiclone given 5 days ago, not ideal for long term. only useful for 1 week at a time to get back into sleep routinue. otherwise adictive and less effective. Therefore not prescribed.
29/05/2025	Mrs Vicki Jackson-Boyce at Rutland Surgery
Comment	DN Amanda called to pass on that pt has withdrawn from them again and no longer wants them to attend x2 daily to give his meds through peg tube and wants to take them all orlly. He said he still wants them to attend to give Ventolin patch and water for balloon but is "fed up with no one caring about him" and thinks we don't want to give him his meds. As he has capacity, Amanda said she can be contced if required on 07380121215
23/05/2025 12:28	Dr R Dale at Data Entry
History	Sr ferrous fumarate. Note 19/5/25. No longer required
23/05/2025	at MJog
Additional	SMS text sent to patient Summary of text message sent to patient / Dear Colin Wright, Your prescription for ferrous fumarate has not been processed as its no longer required. Thank you. Rutland Surgery
21/05/2025	DR Anjali Gangadharan at General Practice Surgery
Result	Serum folate <2.2 also need replaced - will discuss both when I call on monday (AG) (Non Coded Event - Active B12) 24 - needs replaced (AG)
21/05/2025	DR Anjali Gangadharan at General Practice Surgery
Result	Serum magnesium level Normal - no action (AG) Liver function tests Alb 30 otherwise NAD (AG) Urea and electrolytes normal - no action (AG) (Non Coded Event - Bone Profile) PO4 1.53 but otherwise fine (AG)
21/05/2025	DR Anjali Gangadharan at General Practice Surgery
Result	Full blood count - FBC WCC 12.2 Hb 128 Plt 382 - stable (AG)

21/05/2025	DR Anjali Gangadharan at General Practice Surgery
Result	Blood glucose result Normal - no action (AG)
20/05/2025 11:51	DR Anjali Gangadharan at Telephone
History	Tel call - doing okay. Feeling tired and lethargic though. Wonder if consequence of not having had feed for sometime. Note dietetic advice re: bloods too - will do this and likely need to relink in with dietetics following this - will consider.
Test Request	Vitamin B12 (Active) - *Requested*, Bone Profile - *Requested*, Urea and Electrolytes - *Requested*, Liver Function Tests - *Requested*, Magnesium - *Requested*, Folate - *Requested*, Glucose - *Requested*, Full Blood Count - *Requested*
New Referral	(NHS), , , , 8Hll.: Referral to community phlebotomist (SCI Gateway Referral)
19/05/2025 16:57	DR Anjali Gangadharan at Acute Prescription Request
History	SRFerrous Fumerate - normal iron - to stop
16/05/2025 12:34	DR Anjali Gangadharan at Home visit
History	Visit as planned. No immediate plans. Just wishes could join wife. E&D as able and will try to engage with DNs. Not wishing feed at present. Not wantign CMHT. Not wanting SW. Feels Son in law makes it difficult to be in the house but has signed house over to daughter. Assked about palliative care - agreeable - I will refer. I will touch base on Tuesday - agreeable ot this too. No changes. No other concerns. Phoned and informed Amanda who will touch base too.
New Referral	(NHS), , , , 8H7g.: Referral to palliative care service (SCI Gateway Referral)
16/05/2025 11:24	DR Anjali Gangadharan at Telephone
History	Phoned ahead - a bit vague about whats triggered things - had been a bit better. Initially declined a visit but have suggest I pop out later as initilaly stated only just awake - agreeable to this.
16/05/2025 10:04	Miss Emma Fraser at Rutland Surgery
Comment	DN Amanda (07990550041) called requesting a home visit. Patient has refused to take his medication or see the district nurses, he said he will buy medicine from the street to kill himself. Amanda spoke to his daughter who lives with him and she said he says these things all the time. He used to have a CPN but not anymore. Amanda is also requesting a call back after the home visit.
13/05/2025 14:43	Dr R Dale at Data Entry
History	Has run out of co-amoxiclav. To take until 19/5/25.
Medication	Co-Amoxiclav 250/62 Sugar free suspension 250 mg/5 ml + 62 mg/5 ml *200 ml 10ML TO BE TAKEN THREE TIMES A DAY*
12/05/2025 16:26	Miss Megan Turner at Rutland Surgery
Comment	Pt self dischagred himself for a 2nd time, DN asking for below request (Ok-issued- FK)
12/05/2025 16:11	Dr Fiona Kinnon at Data Entry
History	SR zoplicone and fentanyl pathches: not clear if pt has been discharged? No IDL in docman. Please confirm (got 30d supply fentanyl 22/4 so should a little early anyway)
09/05/2025 13:29	Dr Frances Chambers at Home visit
History	as below had amox 7 april, ended up in hosp 5 april but self discharged on co-amox. a bit confused and hard to make out but I think has not been administering anything via PEG since was in hosp, unsure when last PU, DNs said had been 24 hrs. lips v dry, can answer questions approriately but appears more dyspnoeic, pale than usual. Not at all keen to go into hospiital but agreed to go eventualkly. ambulance arranged, referred IAU will see thanks
Examination	obs note below, HR 114 and sats 94% air, lips v dry, no obv new neuro deficit/facial droop chest gen poor AE bilat wheezes and creps
09/05/2025 10:23	Dr Frances Chambers at Telephone Consultation
History	TEL CONS - Spoke to DN Suzanne as below - confused doesn't recognise DN, not passed urine in 24 hours, denies CP. Has had prev TIA, left weakness but prev CVA not new. 120/87, pulse 120, T37.2, sats 96%, gray yucky looking
Comment	spoke to Colin will not agree to go in without GP visit first

09/05/2025 10:11	Miss Megan Turner at Rutland Surgery
Comment	DN Sarah 07821114147 pt is very weak, letheragic, hasn't gone to toilet in over 24 hours, no memory of ever seeing DN. had stroke prev and DN's worried. They do not feel he is currently having stroke as advised if that was the case to phone 999 but same symptoms as prev. weak
09/05/2025	Mrs Vicki Jackson-Boyce at Rutland Surgery
Comment	**Ambulance called - Reference No - 1203 6451**
08/05/2025 08:48	- Nicola Campbell at Rutland Surgery
Problem	**Worsening SOB**
Comment	Admitted 05/05/25 Discharged 05/05/25 QEUH ARU1 Respiratory. Admitted with above. - Presumed community aquired pneumonia. - Weaned off o2 had given x14 days abx. See IDL for full clinical summary + comments. - Self discharged against medical advice. Meds: Discharged with Co-Amoxiclav 250mg/62mg/5mls 10mls TDS, no changes to other meds. Spoke to Colin and made him aware to withhold the Atorvastatin while on Co-Amox. Follow up: CRX in June.
Additional	Post hospital dischrge med reconciliation with medical notes Telephone encounter Site of encounter NOS Actioned in Pharmacotherapy Hub
07/05/2025 07:13	Dr R Dale at Data Entry
History	SR co-amoxiclav. Can't see this.
06/05/2025 14:12	DR Anjali Gangadharan at Telephone
History	Prebooked tel call - not doing too bad. Was in hisputal over weekend - on abx as a result of chest infection. Prefer to be at home as feels can manage own diet etc better then. Prefers to stick to oral diet - if changes will let me know. Note below - could stop iron and recheck in 3/12
06/05/2025 10:39	Dr Fiona Kinnon at Rutland Surgery
History	Hb 128 MCV 91 Ferr 181- see 22/4/25- could probably stop iron and rpt fbc ferr in 3 months but will check with GP who knows patient **UPDATE 12/5/25:** RD happy with plan but note pt has been admitted- await IDL
01/05/2025	Dr Fiona Kinnon at General Practice Surgery
Result	Full blood count - FBC See emis 5/5/25 (FK)
01/05/2025	DR Anjali Gangadharan at General Practice Surgery
Result	(Non Coded Event - Thyroid funct test) normal - no action (AG) Liver function tests Alb 28 - stable (AG)
01/05/2025	Dr Fiona Kinnon at General Practice Surgery
Result	Serum ferritin Normal - no action (FK)
30/04/2025 14:56	Dr R Dale at Rutland Surgery
History	Feels no change with last course of antibiotics. Cough with usual light green sputum. No haemoptysis. Frustrated about keeping getting antibiotics. Feels like giving up. Apyrexial.
Examination	T 37.2C, SpO2 97%, P 132/min. Throat NAD, no lymph nodes, not tender, no sinus tenderness. Chest bilateral crepitations, no wheeze, good air entry.
Comment	In view of feelings re antibiotics and satisfactory readings, send sputum for C&S. Advised would treat if positive for infection. Review if change in symptoms.
Test Request	Sputum (C&S) - *Requested*
30/04/2025 09:29	DR Anjali Gangadharan at Rutland Surgery
History	Note letter from dietetics - would offer him review today
28/04/2025 15:23	Miss Megan Turner at Rutland Surgery

Test Request	Liver Function Tests - *Requested*, Thyroid function tests - *Requested*
New Referral	(NHS), , , , 8Hll.: Referral to community phlebotomist (SCI Gateway Referral)

22/04/2025 17:02	Dr Fiona Kinnon at Data Entry
History	SR ferrous fumarate issued today but REC: pls arrange fbc ferritin check before next required (I'm not sure if housebound so have not personally sent the phlebotomy referral- thanks)
Test Request	Full Blood Count - *Requested*, Ferritin - *Requested*

22/04/2025 14:47	DR Anjali Gangadharan at Telephone
History	Prebooked tel call - doing okay. Not heard from SAMH as yet. On the whole feeling a bit better - offered to touch base in 2/52 - keen for this.

17/04/2025 12:21	Dr Frances Chambers at Telephone Consultation
History	triage - spoke to Colin, not able to sleep for 4 nights. taking diazepam. no partic symptoms or pain keeping him awake. taking mirtazapine still not sleeping
Comment	agreed add zop, warned re oversedation, seek review prn, not longterm use
Medication	Zopiclone Tablets 3.75 mg *7 TABLET ONE TO BE TAKEN AT NIGHT*

10/04/2025 11:55	Dr R Dale at Data Entry
History	Requesting liquid rather than caps.
Medication	Amoxicillin Oral Suspension Sugar Free 250 mg/5 ml *200 ml 10ML TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS*

09/04/2025 13:21	Dr R Dale at Data Entry
History	Request from DNs. Fentanyl going to be put in locked box.

08/04/2025 12:00	DR Anjali Gangadharan at Rutland Surgery
History	Attends as planned. Doing okay - slightly SOB. HAs not started abx yet. Felt low on saturday but doing a bit better nad happy to engage.
Examination	97% 107 36.8 WWP HS1+2+0 Chest - bibasal creps but nil else. PEG site NAD
Comment	Treat as LRTI - review if not settling. Will call to review in 2/52 or sooner if required - happy with the same

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07/04/2025 11:58	DR Anjali Gangadharan at Telephone
History	Triage - phone call from Raymond. Fentanyl patches has gone missing from house - controlled drugs will need reported to police - Raymond will do. I will ask admin to chase up. Chesty - tachycardic and pyrexial. Spoke to Colin - feels like chest infection, no blood, using nebuliser - offered abx and can come see me tormorrow as planne d- happy with the same.
Medication	Fentanyl Transdermal patches 12 micrograms/hour *1 patch APPLY EVERY 72 HOURS AND REMOVE PREVIOUS ONE* Amoxicillin Capsules 500 mg *15 CAPSULE ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS*

07/04/2025	Mrs Vicki Jackson-Boyce at Rutland Surgery
Comment	Raymond DN called, patient unwell, tachycardial, also Fentanyl patches missing. 07944195941

02/04/2025	DR Anjali Gangadharan at General Practice Surgery
Result	Liver function tests Alb 30 but otherwise NAD - much improved (AG)

02/04/2025	- Gurinderjit Kaloya at Rutland Surgery
Comment	Follow up of change of Zomorph to Fentanyl patches with DN Amanda. No issues with change & tolerating well happy to continue with. Adjusted quantity & moved to repeats.
Additional	Medication changed Telephone encounter Medication review done by pharmacist

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01/04/2025 10:07	DR Anjali Gangadharan at Rutland Surgery
History	Attends as planned. Feeling better. Going to restart meds and feed. Has considered options - thinks will engaged with SAMH - will try it and see if helpful. Asks if I can arrange - I will write to them and see. I will call to review nexct week and can see how getting on but equally knows can contact me in interim if needed.

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28/03/2025	Mrs Vicki Jackson-Boyce at Rutland Surgery
Test Request	Liver Function Tests - *Requested*
New Referral	(NHS), , , , 8Hll.: Referral to community phlebotomist (SCI Gateway Referral)
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25/03/2025 15:01	DR Anjali Gangadharan at Rutland Surgery
History	Attends as planned. Just feeling overwhelmed and sad. Feels noone is helpoing. Had gone to Brand St and SW re: bus pass yeseterday and neither helped. Both daughters say other one will help. Feels has gone through enough in life with assualt during child hood and loss of brother and loss of wife. No active intent or plans re: suicide. Note similar in past and psych letters.
Examination	Tearful
Comment	Supoortive chat - completed bus pass form with him, offered referral to CMHT - declined. Discussed GAMH - declined. Offered to see him back in one week and encouraged to engage with DNs - agreeable.
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24/03/2025 15:40	DR Anjali Gangadharan at Telephone
History	Triage - note below. Is general feeling of not wanting to be here. Feels none of the people he asked for help are helping him so he does not want to ask for more help. Seems to be centred around bus pass today but npte has had similar in past. Daughters in contact- one lives with him. Dns due in today. Offered mental health support - declined as went to them today and they said no. Offered to see me tomorrow - would prefer this. States can keep self safe overnight - will attend tomorrow.
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24/03/2025 15:04	Miss Megan Turner at Rutland Surgery
Comment	PT called to book cdm and states he is struggling to cope, wants to kill himself, turned upto social work and Mh team and they turned him away. does not want to be here anymore, not coping, trying to apply for bus pass but struggling and doesn't have anyone to help now everything is getting too much
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19/03/2025 14:05	Dr Frances Chambers at Data Entry
History	spoke to Gurinderjit - patch as below and Gurinderjit to d/w Amanda and arrange to review dose in a couple of weeks
Medication	Fentanyl Transdermal patches 12 micrograms/hour *5 patch Apply one every 72 hrs AND REMOVE PREVIOUS ONE*
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19/03/2025	- Gurinderjit Kaloya at Rutland Surgery
Comment	Spoke to Amanda DN. Will monitor for first 48hrs after applying patch- advised will take up to 12 hrs for fentanyl to work. I will follow up 2nd April. Will let us know if needs review of patch strength earlier.
Additional	Telephone encounter Medication review done by pharmacist
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19/03/2025	- Gurinderjit Kaloya at Rutland Surgery
Comment	Morphine 30mg is equivalent to 12mcg/hr Fentanyl patch applied every 72 hrs. Peak fentayl levels occur 12 to 24 hrs after application.
Additional	Medication review done by pharmacist
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14/03/2025 15:58	Dr Frances Chambers at Telephone Consultation
History	spoke to Amanda DN zomorph was causing peg to block sometimes so changed to oromorph but not slow release so not ideal. DN in twice a day. ?try patches as pharmacist to look into thanks Gurinderjit please call Amanda 07380121215 DN once patches issued.
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14/03/2025 12:09	Mrs Diane MacLean at Rutland Surgery
Comment	Amanda asking can he gat a morphine patch
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13/03/2025 10:49	DR Alison Fullerton at Rutland Surgery
History	Speaking to Amanda DN (07380121215) Issue with zomorph 30mg bd and PEG tube. Worried about gviing morphine sulphate 20mg/ml (1.5mg bd) as not slow release. Are there any other slow release options to go through a PEG? Will contact pharmacy hub.
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07/03/2025 08:45	Dr R Dale at Data Entry
History	Note below. Still smoking 2/day. SpO2 98% at rest and 94-95% on mobilising. Unlikely to be suitable for O2, esp as he is still smoking.
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06/03/2025 14:58	Dr Frances Chambers at Rutland Surgery
History	Note recent CVA left arm weak and pins and needles, hard to use left hand to pick up objects etc left hand would struggle to dress self, can make a drink district nurses daily for PEG feeds and meds. walking/leg ok. In with daughter today (Nicola) who is visiting/trying to help. Colin still waiting on own flat. Thinks still tense with other daughter he lives with. Feels mirtaz is the best a/d he has tried and 30mg well tolerated. Sleep can be poor, up all night recently and mood clearly still low - a bit tearful again today. feels needs diaz when sob/anxious, aware not ideal longterm. CVA rehab appt not until Aug.
Comment	keep mirtaz dose same aim to review 2 mths/sooner prn if problems

06/03/2025 12:01	Mrs Diane MacLean at Rutland Surgery
Comment	Amanda DNs phoned oxygen levels 98% sitting and resting, Mobilising and using stairs goes between 94/95 %

05/03/2025 17:18	Dr Frances Chambers at Data Entry
History	spoke to pharmacist at Gilbrides. if disperse tablets it would become unlicensed, can issue oral solution
Medication	Levothyroxine Sodium Oral solution Sugar Free 50 micrograms/5 ml *200 ml 2.5MLS DAILY FOR 2 WEEKS THEN INCREASE TO 5MLS DAILY*

05/03/2025 17:16	Miss Megan Turner at Rutland Surgery
Comment	ref to Dn for o2 status

05/03/2025 17:15	Miss Megan Turner at Rutland Surgery
Comment	Patient is still smoking 2 cigerettes per day. note below.

05/03/2025 17:08	Dr Frances Chambers at Data Entry
Problem (FIRST)	**Hypothyroidism**
History	note email ENT for thyroxine liquid form start at 25mcg inc to 50mcg after 2 wks
Comment	will need bloods in approx 8 wks TFTs

04/03/2025 12:40	Dr R Dale at Data Entry
History	Note below. Chemist reports they can get morphine 20mg/ml solution. Last noted as smoker 1 year. If still smoking, oxygen would not be considered. If no longer smoking, can DNs check oxygen saturation?
Medication	Morphine Sulfate Concentrated Oral Solution 20mg/ml (100mg/5ml) sugar free *120 ml 1.5ML TWICE DAILY*

04/03/2025 12:00	Mrs Diane MacLean at Rutland Surgery
Comment	Amanda DN phoned somorth blocked tube this am can we concert to soluble also he is getting very breathless when moving and she is asking would he quality for oxygen at home.

04/03/2025 08:39	Dr R Dale at Data Entry
History	Request from DNs. Struggling to give zomorph caps. Requesting sachets. Can't see sachets in EMIS or BNF. Check with pharmacy.

28/02/2025 09:42	Dr R Dale at Data Entry
History	Request from hospital to check LFTs in 4 weeks.

26/02/2025 11:18	Mrs Nawgole Goodwin at Rutland Surgery
Problem	IDL 11/2/25 - 25/2/25 QEUH War 62 Hyper acute stroke unit.
Comment	Admitted with left arm weakness of 5 days. CT head - right parietal infarct. CT angio aortic arch and carotid - bilateral stenosis of external carotids - secondary to atheroma - not for surgical intervention. Definitive ischaemic posterior circulation stroke. Discharged with clarithromycin and metronidazole. Atovastatin to commence day after clarithromycin last dose. Atorvastatin commenced at 40mg with scope for GP to increase if LFTs ok in 1 month. Unable to get through to patient to discuss new meds.
Medication	Amlodipine Tablets 5 mg *28 TABLET ONE TO BE TAKEN EACH DAY VIA PEG. CAN BE CRUSHED AND DISPERSED IN WATER. GIVE IMMEDIATELY* Atorvastatin Tablets 40 mg *28 TABLET ONE TO BE TAKEN EACH DAY VIA PEG. CAN BE CRUSHED AND DISPERSED IN WATER. FLUSH WELL AFTER DOSE* Clopidogrel Tablets 75 mg *28 TABLET ONE TO BE TAKEN EACH DAY VIA*

	PEG. CAN BE CRUSHED AND DISPERSED IN WATER
Additional	Post hospital dischrge med reconciliation with medical notes
	New medication commenced Amlodipine 5mg OD, Atorvastatin 40mg OD, Clopidogrel 75mg OD
	Unsuccessful attempt to contact patient by telephone
	Site of encounter NOS Actioned in Pharmacotherapy Hub

10/02/2025 15:37	Mrs Carol Anne Boyle at Administration
Comment	Colin called to say that he has no power in his left hand from Thursday states he has no power and no co-ordination advised to present at A&E

06/02/2025	Mrs Vicki Jackson-Boyce at Rutland Surgery
Test Request	Blood Film - *Requested*, Full Blood Count - *Requested*, Ferritin - *Requested*, Iron / Transferrin - *Requested*
New Referral	(NHS), , , , 8Hll.: Referral to community phlebotomist (SCI Gateway Referral)

05/02/2025 16:43	Dr Frances Chambers at Rutland Surgery
History	getting cramping at throat/neck sometimes and sometimes choking if sips coffee and comes out nose. says meant to thicken fluids/puree food and usually does. also feels change in voice lower, hoarser last few wks. pain inc feeling drained/low, not getting out much. feels breathing a bit worse. On iron not taking reliably. situation in house still tense, v tearful, noise at night affecting sleep, feels not wanted, has applied alternative housing. changed over to mirtazapine now, not sure if helped sleep, still low, tearful
Comment	inc mirtaz to 30mg, last seen ENT sept 24 and 5 yrs given all clear and discharged, agree given recent symptomsrefer back ENT UCS. keen restart difflam helped in past, booked follow up appt 4 wks (will be deceased wife's bday that day but says ok to come in)
Medication	Mirtazapine Orodispersible tablets 30 mg *30 tablet 1 Tab At night*
	Benzydamine Hydrochloride Spray Sugar Free 0.15 % *30 ML USE 4-8 SPRAYS ONTO AFFECTED AREA EVERY 90 MINUTES TO 3 HOURS*

05/02/2025	Mrs Vicki Jackson-Boyce at Rutland Surgery
Comment	Throat infection, however already on a/bs for staph infection, exhausted, not left room

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03/02/2025 11:26	Dr R Dale at Data Entry
History	Abdominal swab - Staph aureus.

28/01/2025 11:25	Dr Frances Chambers at Data Entry
History	Did not attend - no reason

14/01/2025 14:14	DR Anjali Gangadharan at Acute Prescription Request
History	SR diazepam missing? and mitazipinr instead of fluxotine - note review in Dec - due further review - issued but arrange review

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17/12/2024 12:06	Dr Frances Chambers at Data Entry
History	blood res wcc and plts improving. on abx and iron. Hb 125, bloods agin 6 wks to assess response to iron - ensure plts improving with iron

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13/12/2024 12:17	Dr Frances Chambers at Telephone Consultation
History	tel cons - sputum pos for h. influenzae. sens to doxy, skin swab also positive and sens to doxy so stop fluclox and start doxy. No answer Colin mobile, message left call back if any questions
Medication	Doxycycline Oral suspension 50 mg/5 ml *140 ml 10MLS TWICE DAILY FOR 1 WEEK*

11/12/2024 15:02	Dr Frances Chambers at Rutland Surgery
History	Only got antibiotic delivered from chemist yesterday for PEG so has not started yet. Has been v SOB/wheezy esp yesterday, a bit better today. hard to expectorate. Has handed in sputum - green.
Examination	talking sentences, HR 100, Sats 99% air, RR24 laboured breathing (about baseline), chest good AE no added wheeze/creps heard
Comment	await sputum, review if chest worsens

On mirtazapine started 2 wks, still v low, tearful, thinks has helped sleep a little. aware Cruise/bereavement - encouraged, feels a bit hopeless. Lots past bereavement and depression even before death of wife Sandra during covid 3+

History	yrs ago. really tearful, feels there is no point sometimes. Sees neighbour and kids. Daughter he lives with can be quite hostile, he feels rejected - says she has moved all his stuff into hallway/his bedroom and he feels unwelcome in communal areas house. This was his house with wife and daughter (from housing assoc) and he gave tennancy to daughter when wife died. he is applying for own place, no steps due to mobility/SOB. Letter to try to expediate as impacting mental health. also upset as kids often ask him for money/only give him time of day if he gives them money
Comment	aim to review approx 1/12 or sooner prn he will book in

History	started feeds again small amounts, has support dietician. encouraged this and to take iron
Comment	bloods again 6 wks

11/12/2024 14:40	- Fatemeh Daryani at Rutland Surgery
Comment	Blood sample taken attended for repeat blood test, sputum sample also sent.to see GP next. Patient advised to telephone for test result
Test Request	Full Blood Count - *Completed* Sputum (C&S) - *Completed*

04/12/2024 17:22	Dr Frances Chambers at Data Entry
History	bloods - wcc 20.9, neut 18.1 on 29/11. note pos swab now on antibiotics. also Hb 128 (low), MCV ok, plts 485, ferr 68 (?acute phase) but iron and t'ferrin sats low - 5 and 8%. likely needs iron supplement and also for admin to remind sputum sample and bloods and GP review in 1 week

03/12/2024 17:41	Dr R Dale at Data Entry
History	Swab positive for Staph aureus.
Medication	Flucloxacillin Oral solution 250 mg/5 ml *300 ml 10ML TO BE TAKEN FOUR TIMES A DAY FOR 7 DAYS*

29/11/2024 12:32	Dr Frances Chambers at Rutland Surgery
History	PEG site lots sloughy/yellow discharge, gets clothes wet, a bit sore, no fever. showed me photos. DN checking on it
Examination	apyrexial, moisture around peg but no redness/heat at skin, surrounding skin rel normal
Comment	discussed serous fluid/slough may be the cause, not obv infected, swab taken
Test Request	Wound Swab (C&S) #1 - *Completed*

History	completed abx/steroids for chest 8-9 days ago, still some green sputum - thick and gunky. chesty. Can choke when eating.
Examination	speaking rel well, always has laboured breathing approx 28/min, HR 100, T37.5c, sats 99% air. chest good SAE and rel clear.
Comment	will hand in sputum, not for abx just now, r/v if worsens

History	still v low, grieving, wants to be with Sandra, had mirtaz in house will starting tonight. xmas will be hard but will have family there though he may go off to his room.
Comment	will follow up after xmas/new year, start mirtaz tonight reorder when needed

29/11/2024 09:11	Dr Frances Chambers at Telephone Consultation
History	Hard to make out on phone, phlebotomist there to take bloods who helped a bit - now getting lots green sputum coming up from chest and seems chesty/SOB. also c/o PEG site more leaky and red, has sent in photos (not in docman for me to see yet). DN there to flush PEG yesterday and did not think infected. Agreed to come down later and I can swab PEG site and sound chest.

26/11/2024	Mrs Vicki Jackson-Boyce at Rutland Surgery
Test Request	Full Blood Count - *Requested*, Ferritin - *Requested*, Iron / Transferrin - *Requested*
New Referral	(NHS), , , , 8Hll.: Referral to community phlebotomist (SCI Gateway Referral)

20/11/2024	DR Anjali Gangadharan at General Practice Surgery
Result	Serum magnesium level Normal - no action (AG) Urea and electrolytes Normal - no action (AG) (Non Coded Event - Bone Profile) Just out of normal range - OK (AG)

19/11/2024 12:57	Mrs Diane MacLean at Rutland Surgery
Test Request	Urea and Electrolytes - *Requested*, Magnesium - *Requested*, Bone Profile - *Requested*
New Referral	(NHS), , , , 8Hll.: Referral to community phlebotomist (SCI Gateway Referral)

15/11/2024 11:53	Dr Frances Chambers at Rutland Surgery
History	as below leaky peg site and cough/mucous, sob
Examination	T36.9, sats 92-3%, HR 100, RR34, chets reasonable AE bilat no focal creps, peg site v leaky.
Comment	abx presc yesterday add pred, says uses inh and neb and has plenty at home. can't see presc recently and not on rpts - readded rpts encouraged compliance. r/v chest prn not settling/worsening
Medication	Trimbow Inhaler 87 micrograms + 5 micrograms + 9 micrograms/dose *240 DOSE TWO PUFFS TO BE USED TWICE DAILY*
	Salbutamol Dry Powder Inhaler 100 micrograms/actuation *200 DOSE ONE OR TWO DOSES TO BE INHALED WHEN REQUIRED*

History	very low tearful, feels not much worth to his life, little enjoyment. spends a lot of time alone in his room. shares with daughter and her kids but feels a bit unwelcome in communal space so spends lots of time alone in room. has 5 adult kids, lives with 1 daughter but things strained, she never cooks or makes him a cuppa, discontent around finances/who pays for what. contact with other 2 daughters and 1 son but another son prev drug debt Colin says helped him pay but no contact 1 year, tearful re this, lots guilt as wife Sandra who died 4 uyrs ago wanted him to keep in contact all kids. also sees nephew and neighbour sees him weekly for coffee. feels v low often sits and cries, thinks of suicide no plan to act. Writes things to wife and plans where he would be buried, her ashes scattered on his coffin etc.on fluoxetine since 2019, trazodone prev not sure helped and groggy morning, sertraline didn't help. has phoned Cruise before but bad experience. Other counselling in past via Brand St - physically and emotionally abused by dada as kid, does not like to dig this up. can manage or crush tablets
Examination	low tearful
Comment	reduce fluoxetine to 20mg (5mls for 2 wks, tel cons then and start mirtaz then (presc done)
Medication	Mirtazapine Orodispersible tablets 15 mg *30 tablet 1 Tab At night START IN 2 WEEKS WHEN FLUOXETINE STOPS*
	Prednisolone Soluble tablets 5 mg *40 tablet 8 TABS DAILY DISSOLVED IN WATER*

14/11/2024 14:07	Dr Frances Chambers at Telephone Consultation
History	triage - note DN Amy called back to say out to see Colin today to change water in PEG balloon. getting lots leaking at peg site and a bit red also cough and seemed sweaty/hot. Did not check any obs. spoke to Colin on phone cough and sputum seems worse recently and at night, greenish. ?fever. eating a bit, aware risk aspiration but taking oral food and generally not using PEG much. Drinking coffee but overall not drinking enough fluids, giving self some fluid via PEG maybe 120mls every 2nd day and sips oral water, will try to do more, had dietician in today. mood low, hit a low point few months, no motivation to do anything. getting breathless easily. sleeping tablet not working, poor mental health, grieving.
Comment	could phone in a prescription for antibiotic to harmony row pharmacy to cover PEG and chest ?aspiration, given appt tomorrow to come see me and can discuss mental health
Medication	Co-Amoxiclav 500/125 Tablets *15 tablet 1 Tab 3 times daily*

14/11/2024 13:14	Dr Frances Chambers at Data Entry
History	Note DN called re Colin - no call back details, called DN team number and asked for them to call back

14/11/2024	Mrs Vicki Jackson-Boyce at Rutland Surgery
Comment	DN Jamie called re patient asking for a home visit as lots of mucous and coming out of PEG site she seen when changing water at balloon. States pt very chesty

18/10/2024 18:03	DR Anjali Gangadharan at Special Request
History	SR diazepam and ferrous sulphate - note below - issued

15/10/2024 13:28	Dr R Dale at Data Entry
History	Swab - yeasts.
Medication	Clotrimazole Cream 1 % *20 GRAM APPLY TWO TO THREE TIMES DAILY*

10/10/2024 10:35	Mrs Carol Anne Boyle at Administration
Comment	Caitlin Com nurse saw patient having leakage at peg swab taken red no odour will hand into surgery
09/10/2024 16:00	Dr R Dale at Rutland Surgery
History	Some medications running out early each month - particularly diazepam (taking 3x per day) and ferrous fumarate. Takes diazepam for anxiety and hyperventilation. Feels it does help. Sleep still poor, no benefit from zolpidem, zopiclone or hydroxyzine. Mood low, still grieving for wife (1.5 years). Gong to speak to dietician as sometimes does not feel like feeds.
Comment	Quantities of diazepam and ferrous fumarate increased. May consider change of fluoxetine if mood does not improve.
Medication	Promethazine Hydrochloride Tablets 25 mg *28 tablet 1 Tab At night*
02/10/2024	- Gurinderjit Kaloya at Rutland Surgery
Comment	Other medication management
Additional	Medication review done by pharmacist 5 or more Meds
02/10/2024	at MJog
Additional	Indirect encounter NOS Summary of text message sent to patient / Dear Colin Wright, Your wound swab results have came back. They states you have an infection so the doctor has provided a prescription for antibiotics for you. This will be sent to the pharmacy for you this afternoon. Thanks. Rutland Surgery
01/10/2024 12:42	Mrs Carol Lewis at Rutland Surgery
Comment	Wound swab - PEG site result: Staph aureus. Script issued for AB
26/09/2024 09:51	Dr Frances Chambers at Data Entry
History	bloods - Hb 122, ferr 73, Hb improving - was 109 in June 24, on iron tabs. B12/fol N March 24. suggest continue iron tabs and recheck FBC, ferr and Iron studies in 2 mths
26/09/2024	Mrs Vicki Jackson-Boyce at Rutland Surgery
Comment	O/E - weight NOS 49 kg
12/09/2024 09:44	Dr Frances Chambers at Data Entry
History	SR iron - been on since April when started during an admission. for bloods and also note diaz regular use and antidep/other meds due a review - for GP tel cons
Test Request	Full Blood Count - *Requested*, Ferritin - *Requested*
10/09/2024	DR Anjali Gangadharan at Rutland Surgery
History	SR nacysys - seems use is a slightly infrequent - issued
30/08/2024	DR Anjali Gangadharan at Rutland Surgery
History	SR diazepam - ~two weekly use - issued
29/08/2024 08:19	Dr R Dale at Special Request
History	Request from respiratory.
Medication	Azithromycin Capsules 250 mg *24 capsule 2 CAPSULES ONCE ON MONDAY WEDNESDAY AND FRIDAY*
25/07/2024 13:25	Dr Edel McEntee at Rutland Surgery
History	Phoned Colin - DN unable to pass anything through gastrotomy tube today, sluggish over the past couple of weeks. Phoned one of the ENT Nurses Tracey, she will phone Raymond DN to see what's happening. States the community nutritional team will usually come out / else ED
16/07/2024 14:39	DR Laura Harrison at Data Entry
Comment	see optometry letter dated 21/6/24. requesting GP review for ?GCA. was assessed for migranes, noted discomfort from prominent temporal arteries esp R side when it pulses. they have not refered to ophthalmology. they suggest bloods. needs urgent review this week. admin to advise pt if visual loss needs same day optometry assessment
10/07/2024 11:59	Mrs Diane MacLean at Rutland Surgery

Examination	Blood pressure reading 136/64 mm Hg
Comment	O/E - BP reading as per dns
-	-
10/07/2024	DR Anjali Gangadharan at Rutland Surgery
History	BP below noted - nil else required
-	-
03/07/2024	DR Anjali Gangadharan at Rutland Surgery
History	SR diazepam and azithro - issued yesterday
-	-
02/07/2024	DR Anjali Gangadharan at Rutland Surgery
History	SR azithromycin and diazepam - note recent admission - issued
-	-
17/06/2024	DR Anjali Gangadharan at Rutland Surgery
History	Sputum NAD - note below, chest examination appears normal - post exac COPD chest recovery likely - await CRT input and can arrange further follow up as required.
-	-
14/06/2024 12:41	- Yasmin Javid at Rutland Surgery
Problem	**IDL in Docman (29.5.24-03.06.24) - note GP entry below d/c 7/6/24.**
Comment	Admitted with exacerbation of his COPD - managed with Amox. Note IDL for full clinical summary. Discharged with 5 days of Co-Amox and to witthold Azithromycin until course completed. No change made to regular meds - no change made to medication record at present.
Additional	Post hospital dischrge med reconciliation with medical notes QEUH WARD 7B - RESPIRATORY Site of encounter NOS Actioned in Pharmacotherapy Hub
-	-
14/06/2024 10:37	Dr Frances Chambers at Rutland Surgery
History	D/c qeuh last Friday - 7/6 ward 7B, exasc chest, had abx which continued at home ?co-amoxclav, finished wed, had CRT input at home Tues ?follow up planned monday. Chest not feeling better, lots sputum = green/brown, some feed refluxing, SOB if doing anything. gets PEG feeds. no fever. v tearful today re loss of independence, bereave,ment wife etc. has daughter and grandson big supports and daughter pregnant again.
Examination	T 36.7c, Sats 97% air, HR 78, chest reasonbable AE throughout no focal creps.
Comment	sputum sample, rx according to results this. If deteriorates will call 111 at weekend
Test Request	Sputum (C&S) - *Completed*
-	-
13/06/2024 15:23	Dr Edel McEntee at Rutland Surgery
History	Phone call back to Raymond (07944195941) - Colin now out of hospital, d/c last Friday after 9/7 admission with chest - no d/c note yet. Felt Colin's breathing was poorly, coughing + productive, pulse 129. Feels he's lost more weight since he was admitted. Phoned Colin - answers phone, reports doesn't feel any worse since his d/c. Has vomited his feed a couple of times, last vomited last night. Not aware of any fevers. Doesn't feel breathing is so bad, and not as bad as requiring hospital admission. DN due back on Monday
Comment	? risk of aspiration pneumonia - will start an abx this evening - Colin agreeable to coming for review tomorrow am - feels he's able - advised to contact us if was worse - review of chest in am
Medication	Amoxicillin Oral Suspension Sugar Free 250 mg/5 ml *200 ml 10MLS TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS*
-	-
13/06/2024 15:02	Dr Edel McEntee at Rutland Surgery
History	Phonecall back to Raymond DN - ringing out currently - will try again
-	-
13/06/2024 14:46	Mrs Carol Anne Boyle at Administration
Comment	Raymond DN called saw pt today needs to discuss with gp please call Raymond 07456022486
-	-
04/06/2024 18:31	Dr R Dale at Data Entry
History	Palliative care meeting. DNs attend regularly. Frequent issues with swallow/feeds.
Follow up	Key information summary review date (04/09/2024)
-	-
22/05/2024 08:24	Dr R Dale at Data Entry

History	BP raised last 2 times but improving. Ask DN to check again in 1 month. If still raised, may need to discuss treatment.
-	-
16/05/2024 15:47	- Fatemeh Daryani at Data Entry
Comment	Telephone encounter - swab sample handed in with district nurse without any information. spoke to patient, swab sample taken from Peg site due to redness and green discharge. patient says had this problem in the past and last time given course of abx in Feb/2024.
	Sample sent to lab. for test
Test Request	Wound Swab (C&S) #1 - *Completed*
-	-
13/05/2024	Mrs Vicki Jackson-Boyce at Rutland Surgery
Examination	Blood pressure reading 152/90 mm Hg
Comment	O/E - BP reading
-	-
07/05/2024 07:49	- Yasmin Javid at Rutland Surgery
Problem	IDL in Docman (30.04.24-05.05.24)
Comment	Admitted as per entry below - IECOPD. Treated with oral antibiotics/steroids/nebs.
	Discharged to complete 1/52 of antibiotics (Amox/Clar) - to witthold Azithromycin until course completed.
	Telephone encounter - aware not to take Azithromycin until course of amox/clar completed. Requires a further supply of diazepam - states fine for it to be in tablet form at present. - admin to action.
Medication	Diazepam Tablets 2 mg *28 tablet ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED*
Additional	Medication requested Acute Rx Issued
	Post hospital dischrge med reconciliation with medical notes QEUH WARD 7B RESP
	Telephone encounter
	Site of encounter NOS Actioned in Pharmacotherapy Hub
-	-
30/04/2024 11:54	Mrs Diane MacLean at Rutland Surgery
Comment	immediate ambulance arranged Ref: 10872283
-	-
30/04/2024	DR Laura Harrison at Telephone Consultaion
History	phone call with Karen from community resp team. pale, clammy, HR 145, sats 83-87%, BP 101/80. sats usually 99%. purulent sputum. pt initially refused admission but after discussing my concerns he has agreed. ILT ambulance to be arranged via admin.
-	-
30/04/2024	Mrs Vicki Jackson-Boyce at Rutland Surgery
Comment	Karen from Community respiritory called asking for call back on her mobile as pt's oxygen levels are low. Number is 07899831903.
-	-
30/04/2024	DR Laura Harrison at Data Entry
History	SRx ferrous fumarate. started whilst in hosp on IDL 1/4/24. issued
-	-
18/04/2024 17:42	Dr Edel McEntee at Rutland Surgery
History	See recent anticipatory care plan d/w with Colin by community respiratory team - few things were discussed with colin which he is considering such as putting dnacpr in place. Colin would go to hospital if he was unwell enough.
Comment	Would be worth having a further chat with Colin about these things so we could update his EKIS - Colin wants to d/w his family, so not for conversation straight away
-	-
11/04/2024 17:06	Dr Edel McEntee at Rutland Surgery
History	Script done for reg meds as spoke with Colin on phone earlier and only a couple of days of background analgesia left
-	-
11/04/2024 17:02	Dr Edel McEntee at Rutland Surgery
History	Community resp team request
Medication	Aerochamber Plus Flow-Vu Anti-Static Spacer device *2 device TO BE USED WHEN REQUIRED*
-	-
11/04/2024 14:11	Dr Edel McEntee at Rutland Surgery

History	Phonecall from Helen (nurse, in house with colin currently), looking for advice as Colin told her he had pain in his left arm today and she was worried it was cardiac. Speak with Colin by phone, he reports the left arm pain ongoing a while - months, but has been gradually getting worse. Reports he spoke with Dr Blackwood about same previously and also tried to speak with Dr's in hospital. Thinks it's worse if puts pressure on arm, hasn't noticed any exacerbational features. Hasn't had any breakthrough analgesia today but plans to take some. Colin feels he's unchanged since recent hospital d/c post aspiration pneumonia but not worse. Tolerating peg diet
Examination	Helen reports obs - sats 98%, resp 25, HR 120, BP 146/103. Mildly sob over phoned - unchanged since d/c. Browish spit
Comment	Imp - pain does not appear to be cardiac in nature, longstanding pain, advised breakthrough analgesia now. ? need for further abx - sputum sample sent and awaited. Helen reports they're likely to visit again on Monday. Colin advised to call again if worsening

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11/04/2024 14:09 Mrs Vicki Jackson-Boyce at Rutland Surgery

Comment	Nurse Helen called re possible hospital admission for patient. Could you call her back on 07974040728? Thanks

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10/04/2024 18:48 Dr Frances Chambers at Data Entry

History	ref to CRT sent via SCIgw

10/04/2024 12:26 Dr Frances Chambers at Telephone Consultation

History	spoke to CRT note below. Donna at CRT. agree refer - at full capacity today so would need to be after 4.30pm and would be seen tomorrow.

10/04/2024 10:28 Mrs Vicki Jackson-Boyce at Rutland Surgery

Comment	District nurse called (07866957498) to say that patient has been discharged from Respiratory on the 4th of this month on an antibiotic, he has now finished it and on a long-term one (Azithromycin). When nurse was out seeing him today she staes that he was SOB. He does have COPD and this was the first time she had been to see him so she was unsure whether to call or not. He has a productive cough and has taken his inhalers with not much relief. She couldn't get his temp when taking obs but his resp rate was 21, Oxygen was 99, pulse was 104 and BP 160/99. She wanted to pass this on and if you need to speak wit her you can get her on the above mobile number.

05/04/2024 11:50 Dr R Dale at Special Request

History	Request from nurse.
Medication	Nutilis Clear Powder *175 GRAM(S) TO BE USED AS DIRECTED*

02/04/2024 10:35 Ms Louise Pickles at Rutland Surgery

Comment	Admitted 27-1/4/24 QEUH Ward 11B Dx - aspiration pneumonia. To complete 7days of Amoxicillin. Started on Ferrous Fumarate. To withold Azithromycin until Amoxicillin course complete. Telephone enc with pt aware of plan as above.
Additional	Post hospital dischrge med reconciliation with medical notes New medication commenced Telephone encounter Site of encounter NOS Actioned in Pharmacotherapy Hub

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27/03/2024 11:45 Dr Frances Chambers at Data Entry

History	Phoned IAU - declined referral, should be A&E. No way to recontact ambulance.

27/03/2024 10:58 Dr Frances Chambers at Telephone Consultation

History	Diane from ambulance service, hoping to refer directly to medics - see if can be ref to IAU as v long wait A&E. Inc SOB few months, not looking after himself, refusing feeds, poor intake. more recent exasc asthma ?chest infection. struggling with coping at home.
Comment	agree try to refer directly to medics/IAU

27/03/2024 09:52 Mrs Diane MacLean at Rutland Surgery

Comment	nurses req house call

27/03/2024 09:51 Dr Frances Chambers at Telephone Consultation

Suzanne district nurse - attended this morning v v breathless, looks awful, not

History	taking feeds. RR 24, HR 125 - 200, O2 levels 94- 97% air, not taking much in way of feeds - 700mls yesterday, PU ok, , no confusion. spoke to Mr Wright - cannot get a breath, I can hear laboured breathing on phone, agreeable to ambulance being called. DN happy to call for ambulance - recontact us PRN

25/03/2024 15:18	Miss Megan Turner at Rutland Surgery
Comment	**Patient refusing to go into hospital against DN & hospitals opinion.**

20/03/2024 08:56	Dr Edel McEntee at Rutland Surgery
History	Request to say patient could manage azithromycin tablets as these could be put through peg - note script not due yet as was done on 8/3/24 so not issued, but could be issued with tablets next if appropriate
Medication	Azithromycin Tablets 250 mg *12 tablet ONE TABLET MONDAY/WEDNESDAY/FRIDAY VIA TUBE*

14/03/2024 11:40	Dr Frances Chambers at Data Entry
History	Note dietician letter. refer SALT. clarify what bloods they would like us to check

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08/03/2024 18:00	Dr Frances Chambers at Data Entry
History	Note resp letter
Medication	Azithromycin Suspension 200 mg/5 ml *150 ml 500MG (12.5MLS) DAILY FOR 7 DAYS THEN 6.25MLS 3 DAYS A WEEK (MONDAY WED AND FRIDAY) VIA PEG LONGTERM*

04/03/2024 12:56	Dr Edel McEntee at Rutland Surgery
Problem (FIRST)	**Local infection skin/subcut tissue NOS**
History	Phonecall to Colin re positive swab around peg site - reports DN states skin looking better but he reports it's sore and can be quite exudative. Had an updated scan last week - no letter re same yet
Comment	Plan - cover with fluclox for 5/7, no allergies known
Medication	Flucloxacillin Oral solution 250 mg/5 ml *200 ML 10ML FOUR TIMES DAILY*

Problem (FIRST)	**Poor sleep pattern**
History	Sleep poor, wakes intermittently, reports doesn't sleep during the day. Trial of zolpidem did not help. Nothing seems to have helped in the past. Mood generally quite low
Comment	No other medication trialled today - d/w over phone only

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26/02/2024 18:14	Dr Edel McEntee at Rutland Surgery
History	Positive skin swab around peg site - tried to phone colin to d/w but ringing out - tasked reception to put colin in for results slot

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21/02/2024 17:01	Dr Frances Chambers at Data Entry
History	Note below try oromorph - already has on repeat prescription. Checked with admin DN had said wait for results swab prior to starting any rx for PEG site

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21/02/2024 12:09	Mrs Carol Anne Boyle at Administration
Comment	Mandy DN called pt very breathless stats ok heart rate 14 Resp 28 feels he might benefit from some Oromorph has not been taking his feed from last week peg site also looking a bit guncky wound swab taken

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08/02/2024 15:04	Dr Edel McEntee at Rutland Surgery
History	Mood low - unchanged but low. Tearful. Spends most of his time in his room. Daughter lives in hse with her child but doesn't sound like they have a positive relationship. Lost the will to go on 'whats the point'. No plans of self-harm, don't 'have the heart', but feels ready to go. Dietician due again next week for weight check. Awaiting CT chest. Sleep poor. No interested in any aid/support. Sees Sandra's counsin every couple of weeks and speaks with her. Daughter Stacey seems supportive
Comment	Could increase fluoxetine, but given a couple of weeks zolpidem instead. R/v as required. Await CT. Will drop in a sputum sample.
Test Request	Sputum (C&S) - *Completed*

07/02/2024 18:11	Dr Frances Chambers at Data Entry
History	Docman - note resp requesting sputum sample to be arrange - EDEL please give contained when you see him
Comment	note advice in case of positive or negative sputum results

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05/02/2024 12:32	Dr Edel McEntee at Rutland Surgery
History	In for phone review of fluoxetine - but unable to hear him over the phone, hoarse ++, difficult to know if this is any worse than baseline.
Comment	See F2F Thurs 15.15pm
-	----
10/01/2024 14:41	Dr Frances Chambers at Home visit
History	Visit at home, daughter present adult who lives with him. able to mobilise downstairs, coherent and not confused. cough productive sputum,green. SOB+. getting PEG and eating soft/thickened, prone to choking. feverish. Using salb inh 2 puffs and saline nebs. Taken paracet and temp come down. unwilling to be admitted.
Examination	O/E - BP reading HR 128, sats 94% air, Blood pressure reading 160/96 mm Hg RR28 and inc WOB, well hydrated, not looking cyanosed. T 37.4, BM 7.2. chest reasonable AE throiughout, inflated looking, few upper rt bronchial noises, not wheezy.
Comment	advised admission but unwilling, understands risks, will seek review if worsens. for salb neg, pred, paracet, abx to cover aspiration. DN checking in (spoke to Raymond and updated after housecall) ask DNs to check BP next week.
Medication	Salbutamol Nebuliser solution 5 mg/2.5 ml unit dose *40 unit dose USE ONE NEBULE WHEN REQUIRED UP TO FOUR TIMES DAILY* Prednisolone Tablets 5 mg *40 TABLET EIGHT TO BE TAKEN IN THE MORNING* Amoxicillin Capsules 500 mg *15 CAPSULE ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS* Metronidazole Tablets 400 mg *15 tablet 1 Tab 3 times daily*
-	----
10/01/2024 13:05	Dr Frances Chambers at Telephone Consultation
History	spoke to ambulance paramedic in attendance and then Colin, sats up to 94%, HR 130, is refusing to go in. I will attend for visit
-	----
10/01/2024 12:07	Mrs Diane MacLean at Rutland Surgery
Comment	999 ambulance arranged ref: 10536984
-	----
10/01/2024 11:59	Dr Frances Chambers at Telephone Consultation
History	triage - note below. spoke to Colin on phone, struggling to breathe on phone, can hardly talk. Note obs below. ambulance arranged
-	----
10/01/2024 11:37	Miss Megan Turner at Rutland Surgery
Result	dn called, hes unwell, they think he has pneuomnia asparation. pulse 155, temp 38.9, oxygen 87, BP 142/82 resp rate 29. they have requested GP house call. raymond 07944195941
-	----
29/12/2023 16:02	Dr R Dale at Data Entry
History	Chemist reports it is sodium chloride nebs that he takes. Got these in 2019.
Medication	Sodium Chloride Nebuliser Liquid 0.9 %, 2.5 ml unit dose ampoule *40 unit dose 2.5ML AS DIRECTED*
-	----
29/12/2023 15:22	Dr R Dale at Data Entry
History	Requesting salbutamol nebs. States he got them from hospital previously and they are now out of date. Can't see them in letters.
Medication	Salbutamol Nebuliser solution 2.5 mg/2.5 ml unit dose *40 unit dose TO BE USED AS DIRECTED*
-	----
29/12/2023	DR Anjali Gangadharan at Rutland Surgery
History	SR salb nebs - does not appear to have ever had before - Who has started nebs?
-	----
27/12/2023 16:12	Dr Frances Chambers at Data Entry
History	wound swab PEG site 15/12 s aureus sens fluclox
Medication	Flucloxacillin Oral solution 250 mg/5 ml *280 ml ONE 10ML SPOONFUL TO BE TAKEN FOUR TIMES A DAY FOR 7 DAYS*
-	----
27/09/2023 00:00	Mrs Vicki Jackson-Boyce at General Practice Surgery
Comment	No response to bowel cancer screening programme invitation Non-Responder
Follow up	(diary entry deleted) (Not Known)

19/09/2023 14:08	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	dn raymond has called pt has mouth ulcer looking for something for it and proshield cream

07/09/2023 14:05	Dr Edel McEntee at Rutland Surgery
History	F2F - in for d/w headaches - onset of headaches over the past few months, one side of head, last a couple of days, finds walking around most useful, no associated photophobia/nausea/vomiting. Did have a past hx of migraines many years ago - ? similar, bit vague about same. Thinks his headaches might be stress related. Quite low today, under a lot of stress, misses wife who died 2.5 years ago, gives money to his kids, can't eat a normal meal, no real joy in life. Doesn't know why he's hear. Lot of friends/relatives have passed away over the past while. Does have psychological support on offer but not wanting same, doesn't want to open up about past. Knows where he can access support - declines input currently

29/08/2023 11:49	Mrs Pamela Whisker at Rutland Surgery
Examination	Blood pressure reading 122/88 mm Hg
Comment	bp normal. Gp appt to discuss migraines.

24/08/2023 15:13	Mrs Pamela Whisker at Rutland Surgery
Comment	Gp eb has requested **bp appt** as may need hypertensive meds. Left message on voicemail for colin to contact surgery to arrange bp appt

01/08/2023 08:34	Dr R Dale at Data Entry
History	Patient states he will take diazepam tabs.
Medication	Diazepam Tablets 2 mg *28 tablet ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED*

25/07/2023 09:33	Mrs Diane MacLean at Rutland Surgery
Comment	tried to phone patient reg script no reply

25/07/2023 08:50	Dr R Dale at Data Entry
History	Please check with patient to see if he would be able to take tablet.

24/07/2023 15:57	Mrs Vicki Jackson-Boyce at Rutland Surgery
Comment	Diazepam oral solution unavailable, chemist asked for alternative, thinks maybe needs to be tablet.

21/07/2023 17:02	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	chemist called they don't now why it was ordered and neither does pt not required

21/07/2023 14:29	Dr Frances Chambers at Data Entry
History	Sr metronidazole - this was prev used in May as a shortterm abx - admin check was this what he meant to request?

21/06/2023 14:57	Dr R Dale at Phone Encounter
History	Call from Raymond. Looking at bolus feeding rather than using pump. Has suggested ethicon biopatch 2.5cmx4mm to cover site. Asking if can be prescribed.

21/06/2023 14:35	Dr R Dale at Data Entry
History	Phoned Raymond. No answer. Message left.

20/06/2023 15:18	Dr R Dale at Data Entry
History	Phoned Raymond. No answer.

20/06/2023 14:19	Dr R Dale at Data Entry
History	Phoned Raymond as below. No answer. Message left.

20/06/2023 14:15	Mrs Diane MacLean at Rutland Surgery
Comment	Raymond dn 07944795941 reg colins mood

15/06/2023 16:44	Dr R Dale at Data Entry
History	Staph aureus in swab.
15/06/2023	at MJog
Additional	Indirect encounter NOS Summary of text message sent to patient / Dear Colin Wright, We have received your wound swab results. There was infection found so doctor has done you a prescription for this. It will go to your usual pharmacy. Rutland Surgery
12/06/2023 11:06	Dr R Dale at Rutland Surgery
History	Struggling with pump at present. Keeps alarming due to "air in system". Knows how to deal with it but keeps happening. Often does not get full feed. DNs coming out. Still has irritation at PEG site, smelly. Mood low. Misses wife. Trying to be there for children. Had CT chest over weekend. Taking fluoxetine 15ml daily.
Medication	Loperamide Hydrochloride Capsules 2 mg *30 CAPSULE TWO TO BE TAKEN AT ONCE THEN ONE TO BE TAKEN AFTER EACH FURTHER LOOSE MOTION FOR UP TO 5 DAYS (MAX 8 CAPS PER 24 HOURS)* Anusol Suppositories *12 SUPPOSITORY INSERT ONE NIGHT AND MORNING AND AFTER A BOWEL MOVEMENT*
Test Request	Wound Swab (C&S) #1 - *Completed*
08/06/2023 18:28	Dr R Dale at Data Entry
History	Capability for Work form completed.
06/06/2023	at MJog
Additional	Outgoing mail NOS Summary of smart message sent to patient / Please call! Dear «First Name», Please contact «Hospital Name» on «Contact Number» at your earliest convenience.
30/05/2023 15:38	Dr R Dale at Data Entry
History	Note below. Staph aureus sensitive to flucloxacillin. Also mixed anaerobes.
Medication	Flucloxacillin Oral solution 250 mg/5 ml *200 ML 10ML TO BE TAKEN FOUR TIMES A DAY* Metronidazole Suspension 200 mg/5 ml *200 ml 10ML TID*
30/05/2023 15:15	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	lorna connel called done a wound swab last week and has come back showing staforis and a mixed growth looking for anti biotics
22/05/2023 15:10	Miss Megan Turner at Rutland Surgery
Comment	Call from DWP re basris form - they are disputing terminal, pallative and asking if GP feels he will lose his fight within 12 months. Asking who asked GP to do so advised and gave number for mcmillan who asked us to do it. They will call thm and call us back if needed. 0300 0861727
19/05/2023 10:17	Dr R Dale at Data Entry
History	Call from Melissa McDonald, Benefits Agency. Needing date to put on form that patient was deemed terminal. Has been a general decline. Had to find a date. Advised re letter from ENT (28/10/22) with weight loss and for gastrostomy to be re-inserted. Will use this date.
18/05/2023 14:32	Mrs Carol Lewis at Rutland Surgery
Comment	Asthma review with Heather observing. COPD/Asthma On Trimbow but only using once daily. Using salbutamol every 10 mins or so. Technique poor. Shown how to use MDI with spacer device. Smoker approx 10cpd and vapes in-between. Smoked since age 7 or 8. Doesn't think he could stop. Attends respiratory clinic. Concerned about changes in pect scan. Has follow up soon. Mood low/weepy. Wife died of covid infection 2 years ago. Lives with daughter and grandchildren. Stays in his room most of the time. TSH. Previous suicide attempts. Says he cant be sure he wouldn't self harm again. On fluoxetine. CPN visits but cancelled last appt. Declined any input from gp today. Ox sat 98% on air. Plan: for trimbow 2 puffs bd, use spacer with MDI. Review as needed.
11/05/2023 18:54	Dr R Dale at Data Entry
History	BASRiS form completed.

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11/05/2023 15:01	Dr R Dale at Phone Encounter
History	Call from Raymond, DN. Breathlessness seems ot have increased. No cough/sputum. Apyrexial. Gastrostomy working well but still takes tea, coffee, etc orally and does not use thickener. CXR shows patchy left basal consolidation - ? infection, ? aspiration.
Comment	Refer speech therapy.
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11/05/2023 14:58	Mrs Carol Anne Boyle at Rutland Surgery
Comment	Chloe Mulheron called from McMillan asking for a SR1/Baris form to be filled in for patient to call Chloe when completed 0141 287 7077 passed to Dr D
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-	----
24/04/2023 11:12	Mrs Pamela Whisker at Rutland Surgery
Problem (REVIEW)	**Essential hypertension**
History	Cigarette smoker, 18 Cigarettes/day
Examination	O/E - height, 163 cm
	O/E - weight, 51 Kg
	Body Mass Index, 19.2
Social	Aerobic exercise 0 times/week
	Alcohol consumption, 0 units/week
	Current smoker
Comment	CDM annual review. Admits breathing worsening, breathless without doing anything. sp o2 99% hr 89. Attending respiratory at QE. chest xray today and due to have another scan soon. Smoking - 15+ per day. No alcohol intake. Struggling to eat solid foods due to dysphagia, peg in situ but not using often as feels its an effort, was commenced on pureed diet but struggles majorly with this. bp 138/95 Takes medication some days but admits can go days without. bp raised - I do not see hypertensive meds on repeat? Patient said he used to be on meds for high bp. query with gp. Bloods checked regularly at hospital and at surgery end of last year. No weight loss since last check.
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20/04/2023 15:52	Dr Eileen Blackwood at Rutland Surgery
History	F/U appt - has new feed pump which is working better. Alarming a lot less. CPN visited on Monday but didn't feel well so asked daughter to tell them he was at the hospital. Discussed - just didn't feel up to it on Monday. if hasn't heard from CPNs plans to phone Brand St on Monday to rearrange no active suicidal ideation. Reports no heard yet from Impoving cancer journey - referral sent 30/3. going for repeat CXR (f/u L mid and lower zone consolidaton 8/3/23 - been treated).
Comment	Await CXR. Colin is going to cotnact Brand St if no contact by Monday. Asked to make appt as required
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-	----
13/04/2023	Dr Lucy Brennan at Rutland Surgery
History	SR for NACSYS effervescent
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-	----
04/04/2023 19:19	Dr Eileen Blackwood at Data Entry
History	Letter from CMHT. Referral has beeen downgraded to routine as did not meet their urgent criteria (florid psychoic symptoms or suicidal ideation with intent). Referral will be discussed at MDT 5/4/23. Has appt with me 20/4/23.
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03/04/2023 19:09	Dr R Dale at Data Entry
Test Request	Repeat XR Chest - *Completed*
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30/03/2023 16:24	Dr R Dale at Phone Encounter
History	Spoke to Amanda re below. Also states he has some overgranulation at PEG site and advised fucidin H.
Medication	Fucidin H Cream *30 gram APPLY THINLY TO THE AFFECTED AREA TWICE DAILY*
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30/03/2023 16:02	Dr R Dale at Phone Encounter
History	Tried Amanda as below. No answer. Spoke to Colin. Mood low as before. Does not like the thought of living like he is with stage 4 diet and risk of aspiration. Had problem with pump for past 4 weeks. Thinks this has been sorted since yesterday. Has thoughts of suicide at times. Thinks he would jump in front of a train and knows exactly where he woud do it. not actively suicidal at present. Has been seen at psychiatry for past 20 years. Always goes over the same things, not sure they have much more to offer. Awaiting MacMillan referral. More optimistic about this. Takes diazepam up to 3 times per day. Does not feel fluoxetine helping much. Advised fluoxetine

	could be increased to 15ml daily. Agrees to referral to psychiatry partly for advice re medication.
30/03/2023 15:42	Mrs Diane MacLean at Rutland Surgery
Comment	Amanda 07380121215 quite concerned about colins mental state today. He says he dosent want to be here and he knows exactly where he would go to jump. She tried contacting brand street but he is no longer on there list. She was wondering if he could be referred urgently as he was acting really out of character today.
27/03/2023 12:25	Dr Eileen Blackwood at Rutland Surgery
History	Difficulties with feed. Alarm goes off regularly. Colin repots gets to point can't be bothered with alarm and fixing tube any more so turns it off. Given new pump recenlty but still the same. Spoke to eneteral feeding dietitian today - ordering thinner feed ASAP to see if runs better. Thinks DNs are coming with new pump today. Finding it overwhelming. To use stage 4 diet (pureed), needs to thincked tea/coffee. Feeling very down about feed. Often feels life isn't worth living if this is how he has to feed for rest of life. Denies any active suicidal plans but sometimes thougths of jumping in river go through mind - not acted towards this. Takes fluoxeinte 40mg daily. Wondering if swallow will ever recover. Discussed that as of last ENT rv there was no sign of recurrence of cancer but that there will likely always be some damage to larynx following biopsies and radiotherpay. DNs visit regularly. Support from family. but often isolates himself in room as can be tearful. Disengaged from CPN service 2021 - deliend referreal back, doesn't think talking to counsellor would help. next ENT appt 18/8/23.
Comment	Long discussion. Plan - plans to try new pump and thinner feed. Discussed options of CPn, McMillan refefrral for support. Agreed Refer McMIllan, tinks practical support, speakign to people who know what it is like to live with aftermath of cancer might be helpful. Rv appt 20/4/23, invited to call sooner if needed.
23/03/2023 12:49	Dr R Dale at Phone Encounter
History	Call from Amanda, DN. Not taking feeds, switching off pump. Low mood, again stating that he wants to die. Appears to be taking medication. Not interested in CPN, does not think MacMillan or Hospice involved. Has appointment in 1 month, asking if it can be earlier. Given appointment next week.
17/03/2023 10:08	Dr Eileen Blackwood at Phone Encounter
History	Tirage - spoke to Raymond - worried about Colin's mental health. No motivation regarding peg feed eg if alarms turns feed off rather thatn do simple adjustments that might fix problem despite being shown. Raymond spoke to Colin about mood - not new but feels low. Has been feeling like this for several years especially since wifre died of COVID. Worse this time of year around anniversary of wife's death. No active suicidal ideation but when Raymond asked told him if feed didn't work wouldn't mind if he gradually faded away. DNs and dietitians have regular input each week. perscribed fluoxeine 40mg daily. Have discussed before. Declined counselling in past. Disengaged from CPN service 2021.
Comment	Depression but not new presentation. Task to admin to offer Colin appointment - may prefer F2F as difficult to speak on phone.
17/03/2023 09:44	Dr Eileen Blackwood at Phone Encounter
History	Triage - Raymond called back - returned call - no answer, message left
17/03/2023 09:03	Dr Eileen Blackwood at Phone Encounter
History	Triage - Raymond (dn) 07944195941 would like to speak to gp reg his mental health - no answer, message left.
16/03/2023 15:59	Mrs Diane MacLean at Rutland Surgery
Comment	raymond (dn) 07944195941 would like to speak to gp reg his mental health
14/03/2023 19:44	Dr Eileen Blackwood at Special Request
History	unable to take tab. Coamoxiclav changed to oral solution for peg
Medication	Co-Amoxiclav 250/62 Sugar free suspension 250 mg/5 ml + 62 mg/5 ml *150 ml ONE 10ML SPOONFUL TO BE TAKEN THREE TIMES A DAY*
10/03/2023 17:51	Dr Frances Chambers at Data Entry
History	rt basal changes on X-Ray, also left mid zone consol ?aspiration. report suggests treat and repeat after 4-6 weeks
Medication	Co-Amoxiclav 500/125 Tablets *21 tablet 1 Tab 3 times daily*

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02/03/2023 10:56	Dr R Dale at Rutland Surgery
History	Cough continues, no benefit from antibiotics. Thick mucus, esp in am but can be throughout day. No haemoptysis. Struggles to expectorate. Does not feel much benefit from trimbow. Not enjoying thickened food/liquids. Having issues with peg feeding but gettign new pump today. Mood low, poor sleep. Lack of motivation. No benefit from zolpidem, zopiclone or temazepam.
Examination	T 36.8C, SpO2 99%, P 107/min. Throat NAD, no lymph nodes. chest clear, good air entry.
Comment	Try nacsys.
Medication	Nacsys Effervescent tablets 600 mg *28 tablet ONE TO BE TAKEN DAILY* Hydroxyzine Hydrochloride Tablets 25 mg *28 tablet 1 Tab At night if needed*
Test Request	XR Chest - *Completed*
-	----
01/03/2023 14:08	Dr Eileen Blackwood at Phone Encounter
History	Triage - Spoke to Alison Crystal, Communit dietitian. Trouble with gastrostomy feed - alarm going off reuglalry to point turned feed off last night. Also more aware of struggling to swallow. Debbie, Enteral feeding nurse is visiting this afternoon. Spoke to Colin, in the car on the way to see his son for his birthday. Debbies has already visited, thinks sand for feed is worng size causing kinking of tube. She is returning tomorrow with new stand. Feels that it is becoming harder to swallow - reports bring up water as soon as hits "voice box". Attended ENT 17/2 - told no sign of recurrent laryngeal cancer. Meant to have textuerd modified food and fluids but tells me he sometimes still takes tea, water without thickening. 4-5 day hx of cough productive of yellow sputum.
Comment	aspiration? chest infection? advised to thickened fluids as advised by dietitian. Given F2F appt tomorrow morning for rv of oropharynx/chest exam. At end of call reports he would also like to discuss sleeping tabs tomorrow. prescirbed zolipdem 10mg nocte, not sleeping well. Anniversary of wife's death.
-	----
01/03/2023 11:55	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	dietician called quite concerend about pt as having trouble with his tube feeding and struggling to swollow, destrseed on phone to nurse - alison crystal 07741253354
-	----
22/02/2023 08:50	Dr Eileen Blackwood at Special Request
History	Sr - Trimbow inhaler - started 12/22 by respiratory. add to repeat
-	----
13/02/2023 11:30	Mrs Carol Anne Boyle at Rutland Surgery
Comment	Colin called us to let us know that his feeding tube for the passed 3 days is not flushing have called DNs to visit
-	----
09/02/2023 18:59	Dr Eileen Blackwood at Data Entry
History	Wound swab - staph aureus, yeasts. Recent slough at peg site. pyrexial end of jan. swab 6/2. sensitive to flucloxacillin. Flucloxacillin and clotrimazole cream issued. Asked admin team to let DNs know result.
Medication	Flucloxacillin Oral solution 250 mg/5 ml *200 ML ONE 10ML SPOONFUL TO BE TAKEN FOUR TIMES A DAY FOR 5 DAYS* Clotrimazole Cream 1 % *20 GRAM APPLY TWO TO THREE TIMES DAILY*
-	----
30/01/2023 11:29	Dr R Dale at Phone Encounter
History	Call from Raymond, DN. Lethargic, pyrexial for few days. P, BP and sats OK. PEG site red, some slough, no urinary symptoms. Not particularly breathless. Raymond wondering if he needs admission but Colin does not want this. Try antibiotics. Review if not improving.
Medication	Co-Amoxiclav 250/62 Sugar free suspension 250 mg/5 ml + 62 mg/5 ml *200 ml 10ML TO BE TAKEN THREE TIMES A DAY*
-	----
23/01/2023 15:20	Mrs Carol Anne Boyle at Rutland Surgery
Comment	DNA Pulmonary Rehabilitation app 19/01/2023
-	----
16/01/2023 12:00	- Yasmin Javid at Rutland Surgery
Comment	Additional Information received of admission **(12.07.22-19.07.22)** - Sent in error.Note entry below.
Additional	No change made to medication record at present. Post hospital dischrge med reconciliation with medical notes QEUH WARD 11B Medication review done by pharmacy technician Site of encounter NOS Actioned in Pharmacotherapy Hub
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16/01/2023 11:46	- Yasmin Javid at Rutland Surgery
Comment	IDL in Docman (11.01.23-14.01.23)
	Elective admission for a RIG insertion due to previous laryngeal SCC - had a previous RIG in situ which he removed.
	Has received and passed the required training.
	Has ongoing DN follow up.
	Discharged with no meds (all pts own supply) - changes to medication - Amlodipine not current on IDL - last issued 08/22 ?GP review. Note previous IDL from 07/22 has been taken and amended. Have not amended Oramorph dose as it was increased by GP in 09/22. Was given 10mg dose whilst in-patient as per HEPMA kardex.
Additional	Post hospital dischrge med reconciliation with medical notes QEUH WARD 11B
	Medication review done by pharmacy technician
	Drug therapy discontinued Lansoprazole 30mg caps, Macrogol (last issued 12/20), Senna liquid (not issued)
	Site of encounter NOS Actioned in Pharmacotherapy Hub
14/01/2023	*** Docman Do Not Edit Or Delete*** at Docman
Additional	Letter encounter Hospital Immediate Discharge Letter Queen Elizabeth University Hospital ENT Hitchings
08/12/2022 08:58	Dr R Dale at Data Entry
History	Request from respiratory clinic. Stop fostair.
Medication	Trimbow Inhaler 87 micrograms + 5 micrograms + 9 micrograms/dose *240 DOSE TWO PUFFS TO BE USED TWICE DAILY*
01/12/2022 08:39	Dr R Dale at Phone Encounter
History	Mood low for long time, esp since wife died. Poor sleep, lack of motivation. Does not feel fluoxetine 20mg is helping. Advised to increase to 40mg (10ml). Does not wish counselling as states he ahs done this before. Has hospital appointment next week, worrying about that. Advised to let them know how he is feeling.
Comment	He does not feel he needs anything else at present.
30/11/2022 15:31	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	dn called pt was relly upset advising he is not coping teary, negleting himself, skin and bones and ot really got over wife dying a few years ago he doesn't now last time dietican last out to see him dn feels he is just wasting away
29/11/2022 18:28	Dr Eileen Blackwood at Data Entry
History	Bloods normal apart from albutmin 33 - slighlty low and platelets slightly increased, 436. Improved from previosu readings. Rv in one month as planned.
17/11/2022 15:17	Dr Eileen Blackwood at Rutland Surgery
History	Feeling tired all the time for past 3-4 months. Can sleep a lot of the day away. No new pain. Throat has been sore since op for laryngeal cancer 2019. NG tube - waiting to have peg reinserted. Reports weight steady. Attends Miss Hitchins, ENT. BO every 2nd day. No pr bleeding. No urinary symptoms. under resp clinic - multifocal cavitating spiculated nodules on scan. going for repeat scan24/11. No new SOB. Reports mood much the same, thinks about late wife all the time often tearful. Takes fluoxetine 20mg daily. Lives with daughter and grandson.
Examination	O/E - weight NOS 48 kg p 84r, sats 99%, RR 16, no cervical lymphadenopathy, chest clear, HS 1+2+0, abdo nad.
	O/E - BP reading
	Blood pressure reading 136/88 mm Hg
Comment	TATT - Plan - bloods listed, suppotive discussion - decliend cruse, cousnelling. Rv in 1 months
Test Request	Urea and Electrolytes - *Requested*, Liver Function Tests - *Requested*, Thyroid function tests - *Requested*, HbA1c - *Requested*, Full Blood Count - *Requested*
16/11/2022 11:43	Dr Eileen Blackwood at Phone Encounter
History	Triage -feeling tired all the time. sleeping most of the day. Struggles to speak on phone following laryngela cancer.Appt cahnged form 5/12 to tomorrow afternoon, happy with this.
16/11/2022 11:01	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	called pt regrading app on the 5/12 being changed to a f2f he feels he cant wait this long as he is sleeping all the time and could hardly hear him speaking due to low tone, pt sounded really not well

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14/11/2022 18:05	Dr R Dale at Data Entry
Medication	Paracetamol Sugar free suspension 250 mg/5 ml *1000 ml 10-20ML FOUR TIMES PER DAY A REQUIRED*
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14/11/2022 09:52	Mrs Vicki Jackson-Boyce at Rutland Surgery
Comment	Patient came into surgery today to requestt Paracetamol liquid as per his specialist's requests. Unable to take tablet form due to having a feeding tube insitu.
-	----
30/08/2022 16:36	Dr R Dale at Special Request
Medication	Twocal Liquid *28 litre TO BE USED AS DIRECTED*
-	----
03/08/2022 09:09	Dr Frances Chambers at Data Entry
History	pharmacist rang from Harmony row - called back and spoke to them per EBs enquiry below -have checked and zomorph caps can be opened and flushed through tube with 15-20 mls water. diaz CANNOT be crushed so to use solution and note is three times daily. rpts altered and ensure removed as now on fortisip
Medication	Diazepam Oral Solution, Sugar Free 2 mg/5 ml *420 ml 2MG (FIVE MLS) TO BE GIVEN 3 TIMES DAILY VIA PEG*
-	----
02/08/2022 15:57	Mrs Diane MacLean at Rutland Surgery
Comment	Katie from chemist 445-5135 would like to speak to gp reg peg tube meds
-	----
01/08/2022 15:26	Dr Eileen Blackwood at Rutland Surgery
History	Now has PEG. Hooks up feed, usually, overnight. puttin build up dirnks through PEG. For dietitian rv every 2 months. Aslo on stage 4 diet, thickened fluids. Struggling with medication. Changesd to liquids or orodispersible if possible. Spoke to pharmacist at Gilbrides, Harmony Row for advise regarding **Zomorph mr 30mg bd** - advises opening capsules and dispersing in 30-50ml of water to put through peg, **Diazepam 2mg bd** - advises to crush and dissolve in water to put through peg, **Zopiclone 7.5mg od - advises changing to Zolipdem 10mg nocte,** which can be crushed and dissolved in water and put through peg.
Examination	O/E - weight NOS 48.5 kg
Comment	Medication updated. Has ENT appt 19/8/22. Offered f/u appt, decliend at moment, will contact srugery if needed.
Medication	Lansoprazole Orodispersible tablets (Gastro-Resistant) 30 mg *30 tablet ONE TO BE TAKEN EACH DISPENSE WEEKLY*
	Fluoxetine Hydrochloride Liquid 20 mg/5 ml *140 ml TAKE 5ML DAILY*
	Diazepam Tablets 2 mg *56 tablet ONE TO BE TAKEN TWICE A DAY CRUSH AND DISSOLVE IN WATER AND GIVE VIA PEG*
	Zomorph M/R capsules 30 mg *60 capsule ONE TO BE TAKEN TWICE A DAY OPEN CAPSULE AND DISPERSE IN 30 - 50ML OF WATER AND GIVE VIA PEG*
	Zolpidem Tartrate Tablets 10 mg *28 tablet 1 Tab At night DISPERSE IN WATER AND GIVE VIA PEG*
	Morphine Sulfate Oral solution 10 mg/5 ml *300 ml 5ML TO BE TAKEN WHEN REQUIRED FOR BREATHROUGH PAIN*
Additional	Medication review done
-	----
27/07/2022 15:11	Mrs Vicki Jackson-Boyce at Rutland Surgery
Comment	Please add to repeats as per DocMan dated 26/07/2022 - Twocal Liquid Ready to Hang 1000mls and Fortisip Compact Liquid Forest Fruits 125mls
-	----
26/07/2022 15:50	Dr Eileen Blackwood at Data Entry
History	Task - requestign F2F appt, next prebookable appt too far away. Opened up appt Mon 1/8/22. Task to admin - please offer him this. If neds seen sooner would need to go through triage. thanks. Message from daughter - struggling with tabs since NG tube reinserted. Asking if can be changed to liquid. Emailed Yasmin to see if she could arrange switch.
-	----
25/07/2022 07:56	Dr R Dale at Special Request
Medication	Twocal Liquid *28 litre TO BE USED AS DIRECTED*
-	----
22/07/2022 17:41	Dr Eileen Blackwood at Special Request
History	SR- unable to take coamoxiclav tabs. Liquid issued.
Medication	Co-Amoxiclav 250/62 Sugar free suspension 250 mg/5 ml + 62 mg/5 ml *420 ml 10 MLS THREE TIMES DAILY FOR 14 DAYS*

-	----
22/07/2022 17:07	Dr Eileen Blackwood at Special Request
History	SR
Medication	Twocal Liquid *1 litre TO BE USED AS DIRECTED* Fortisip Compact Liquid feed Milkshake Style *3500 ml AS DIRECTED*
-	----
20/07/2022 15:11	Dr Eileen Blackwood at Special Request
Medication	Co-Amoxiclav 500/125 Tablets *42 tablet 1 Tab 3 times daily*
-	----
20/07/2022 12:48	Miss Megan Turner at Rutland Surgery
Comment	call from resp nurse - looking for co- amoxiclav for 2 weeks
-	----
20/07/2022	- Kathryn Gray at Rutland Surgery
Comment	Daughter called back - Dad still taking lansoprazole capsules and can take these with no difficulty. Confirmed prochlorperazine, sodium bicarbonate no longer req. Not sure what Rxs required as just home - will call in and order as necessary.
Additional	Telephone encounter
-	----
20/07/2022	- Kathryn Gray at Rutland Surgery
Comment	Admitted QEUH 12-19/7/22 to be commenced on NG feeding due to dysphagia and significant weight loss. Prochlorperazine (tabs and injection) and water for injection not issued since 2021 but prn - ?still req. Contacted patient to confirm med changes - struggling to speak, says daughter due home shortly so will ask her to call back to discuss.
Medication	Sennosides Oral Solution, Sugar Free 7.5 mg/5 ml *500 ml TAKE TWO 5ML SPOONFULS AT NIGHT* Lansoprazole Orodispersible tablets (Gastro-Resistant) 30 mg *28 tablet ONE TO BE TAKEN EACH DAY*
Additional	Post hospital dischrge med reconciliation with medical notes Medication changed lansoprazole changed to orodispersible New medication commenced senna Telephone encounter Site of encounter NOS Actioned in Pharmacotherapy Hub
-	----
19/07/2022	*** Docman Do Not Edit Or Delete*** at Docman
Additional	Letter encounter Hospital Immediate Discharge Letter Queen Elizabeth University Hospital ENT MacAndie
-	----
13/07/2022 10:46	Dr Eileen Blackwood at Rutland Surgery
Problem (FIRST)	**Did not attend - no reason**
-	----
16/06/2022 15:32	Dr Eileen Blackwood at Rutland Surgery
History	2 week hx of discomfort in R lower throat and sensation of something blockign food and dluid in same area. Hx of laryngeal cancer. Last saw miss Hitchings, ENT April 22. No evidence of local or regional recurrence then. water, yoghurt, tablets sticking in throat has to reswallow. Usign saliveze spray
Examination	No palapble cervical lymphadneopathy, oropharync, - dry mucosa.
Comment	Imp - pain in throat and difficulty swallowing. Recurrence of laryngeal cancer? USOC referral back to ENT.
Medication	Fluoxetine Hydrochloride Capsules 20 mg *56 CAPSULE ONE TO BE TAKEN EACH DAY*
- - - - - - - - - - - - - - -	
History	Eating very little. 2 yoghurts a day, some ice cream, taking sips of fluid. PUlled out PEG about a year ago during argument with daughter. Struggling to manage ensure. Mixuture of taste, texture, low motivation. Decliend changing to different preparation. WOuld like to explore getting PEG back in. DOesn't think he will feel mentally stronger until he is physcially storngер.
Comment	Refer back to dietitians re PEG.
Examination	O/E - weight NOS 50.2 kg
- - - - - - - - - - - - - - -	
History	Stopped trazodone. caused drowsiness during the morning. Mood still low. Grieving wife. Declined counselling. No TSH. Sleep disturbed. Taking zopiclone.
Comment	SUppotive discussion. Plan would like totry another antidepressant. Tiral of fluoxetine 20mg od. Rv in 4 weeks.
-	----
24/05/2022 10:14	Dr Eileen Blackwood at Data Entry

History	Message from Radiology. Urgent findings in portal to be reviewed. Portal - CXR 12/5/22 - Comparison made to previous film of 2020. The heart size is normal, a previous cavitating right lower lobe lesion ahs disappeared although there are changes of scarring in the right lower lobe. Malignancy cannot be entirley excluded. ther is no collapse or consolidation. No pleural effusion is seen. Report recommends a CT of chest and abdomen for further reivew of the above findings. Urgent referral is indicated.
Comment	Spoke with Colin. Refer USOC of respiratory (unable to order CT chest and abdomen in primary care). Update ENT.

18/05/2022 11:27 Dr Eileen Blackwood at Rutland Surgery

History	Started trazodone about a week ago. Felt very lethargic first thing in the morning for the first few days but this has lifted. Tolerating medication. Sleep still disturbed. No TSH. Good support from family Chatty. Happy to continue and follow up arranged in 4 weeks. WIll call sooner if needed.

Had CXR last week. No result on portal yet. No more episodes of coughing up black staining. Had ENT appt/laryngoscopy 26/4 - told appearance stable. Await CXR result. F/U 4w

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16/05/2022 07:54 Dr R Dale at Data Entry

History	SR morphine and zomorph. Prescription was done 12/5/22.

19/04/2022 13:01 Dr Eileen Blackwood at Rutland Surgery

History	Struggling with loss of wife form COVID Jan 21. Lives with daughter and grandson but spends most of time in his room. Cooks dinner for family often but doesn't feel like eating. Since treatment for alryngela cancer mostly has bananas, yoghurts, ensure 2 x day. Spends a lot of time looking at photos of wife. Tearful. Visits grave frequently. Showed me videos. Has had CPN in past. Doesn't feel like talking about things helped. Not keen on Bereamveent cousenlling. Takes mirtazpine 45mg nocte. diazpeam 2mg tid, zopiclone 7.5mg nocte. Sometimes forgets to take mirtapzeine. Sleep disturbed. Reports plans to do things during the day then doesn't. Feels hopeless and misses wife but denies any plans to harm himself. Hx of OD in past. Smoker. No alcohol excess or drugs.
Comment	Long conversation. Decliend CPNreferral, counselling. Plan redcue mirtazepine to 30mg nocte for 1 qeek then 15mg for 1 week then start trazodone 150mg nocte. Given appt in 4 weeks. Advised to contact surguery sooner if needed.
Medication	Mirtazapine Tablets 30 mg *7 tablet ONE TO BE TAKEN AT NIGHT* Mirtazapine Tablets 15 mg *7 tablet ONE TO BE TAKEN AT NIGHT* Trazodone Hydrochloride Tablets 150 mg *28 tablet 1 Tab Daily ISSUE WEEKLY*

History	Showed me photo of hankerchief with black staining from last week. Coughed up. None since. No new cough, sputum, SON, chest pain. Hx of laryngeal cancer and heavy smoker. Has appt with Miss Hitchesn, ENT for laryngela scope 26/4/22.
Examination	O/E - weight NOS 52.5 kg sats 96%, chest clear, no added sounds, throat no bleeding areas.
Comment	Looks like possible altered blood on hanky. Plan - CXR, advised to show Miss Hitchens photos at appt next week.
Test Request	XR Chest - *Completed*

13/04/2022 14:19 Mrs Vicki Jackson-Boyce at Rutland Surgery

Comment	Very low mood, crying all the time.

16/02/2022 14:17 Ms Narinder Dhillon at Rutland Surgery

History	Medication review
Comment	asked to look at acute meds by Dr Fran Chambers to see if anything can be moved to repeats. Tried to call patient to check if getting a weekly dosette as some items have instalment dispensing and others do not - no answer. See las BP done after increase in amlodipin strength in ov 2021 was acceptable so will move to rpt lis. No longer on svodyne - will rmove. Mirtazapine only recently inc to 45mg therefore not suitable to move yet.
Additional	Medication review done by medicines management pharmacist Less Than 5 Meds Unsuccessful attempt to contact patient by telephone

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28/01/2022 11:25 Dr R Dale at Rutland Surgery

History	Mood low, tearful. Has thoughts of not wanting to be here but children are protective. Coming up to anniversary of wife's death. Poor appetite, poor sleep. Not using sevodyne patches as feels he is not able to take a proper bath and

	feels dirty. Takes oromorph about 5 or 6 times per day. Main pain is in left shoulder/arm. Cough, some purulent sputum, no haemoptysis.
Examination	T 37.7C, SpO2 98%, P 112/min. Chest scattered crepitations, no wheeze, good air entry. Throat NAD. Mild tenderness over left deltoid. No other tenderness in neck or arm.
Comment	Increase mirtazapine. Wishes morphine tabs rather than patches. CAll back if no benefit.
Medication	Zomorph M/R capsules 30 mg *60 CAPSULE ONE TO BE TAKEN TWICE A DAY*
	Mirtazapine Tablets 45 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
	Amoxicillin Capsules 500 mg *15 CAPSULE ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS*

26/01/2022 16:21	Dr Eileen Blackwood at Phone Encounter
History	Triage - called Colin before realised dauhgter requested call. Mood low, coming up to anniversary of wife's death from COVID. Doesn't feel like getting up. Discharged 11/2021 from CPN, non engagement. Given information for CRUSE. Doesn't think talking would help. Taking mirtazpine 30mg nocte. Loosing weight 57kg to 53 kg in short time. Reduced appetite. Hx of layngeal cancer. Next ENT appt due 4/2022 Tired and intermittent heartbrun. Takes lansoprazole 30mg od. Reports generally aching. On buprenorphine patch. Hoarse voice , prefers F2F because of voice.
Comment	Imp - low mood, needs phycial review as well. Offered to call daughter, decliend reports he will update her. Given appt 28/1/22, happy with plan.

26/01/2022	Mrs Vicki Jackson-Boyce at Rutland Surgery
Comment	Daughter called as Dad has no vocal chords. His mental health is really suffering. He has spent the whole week in bed, his weight has dropped from 57kg to 53kg and he is sleeping all the time. Please call Daughter, Nicola on 07783372303.

19/01/2022	
Additional	Immunisation course to maintain protection against SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) (Right Arm) C-19 Booster Moderna (K Docherty) 000050A/ MOD/IM/Right Arm//C-19 Booster Moderna (K Docherty)

19/01/2022	
Additional	Administration of first dose of SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) vaccine (Right Arm) C-19 Booster Moderna (Partick Burgh hall public vaccination clinic) 000050A/ MOD/IM/Right Arm//C-19 Booster Moderna (Partick Burgh hall public vaccination clinic)

29/12/2021 17:49	Mrs Natalie O'Sullivan at Rutland Surgery
Test Request	Liver Function Tests - *Requested*

24/11/2021 12:25	Ms Narinder Dhillon at Rutland Surgery
Comment	See Pamela's comments below - will add Atorvastatin 20mg chewable to med list and ask GP to check and sign Rx - task sent to admin to get LFTs done in approx 4 weeks and if acceptable and no SEs reported can move to repeat
Medication	Atorvastatin Chewable Tablets Sugar Free 20 mg *60 tablet ONE TO BE TAKEN DAILY*
Additional	Medication review done by medicines management pharmacist Less Than 5 Meds

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24/11/2021 11:30	Mrs Pamela Whisker at Rutland Surgery
Examination	Blood pressure reading 137/94 mm Hg
Comment	Discussed cholesterol meds , patient happy to try chewable tablet and will let us know how he gets on. No signifcant change in blood pressure , increased dose amlodipine to 10mg from last week. pharmacist has sent admin task - will check blood pressure when doing bloods.

17/11/2021 15:07	Ms Narinder Dhillon at Rutland Surgery
Comment	tried to call to discuss options for statin - ideally atorvastatin 20mg daily - this comes in a chewable tablet - asked pamela to discuss - if not an option could try simvastatin suspension (wanted to avoid this due to interaction with amlodipine) - has apt next week - will see response from Pamela
Additional	Medication review done by medicines management pharmacist Less Than 5 Meds
	Unsuccessful attempt to contact patient by telephone

12/11/2021 12:43	Mrs Natalie O'Sullivan at Rutland Surgery

Comment	DNA 2X Appointments at brand Street
-	-
09/11/2021 17:04	Sister Anne Henderson at Phone Encounter
Comment	Colin informed re ^ dose of amlodipine to 10 mgs/10mls. Upset as still finding it difficult after death of wife, Sandra. Chat re this. Bring in 2 weeks for rpt bp.
-	-
08/11/2021 17:08	Sister Anne Henderson at Phone Encounter
Comment	Pre bookable call to discuss ^ dose of amlodipine. No answer message left on AM to call surgery
-	-
05/11/2021 12:10	Dr Frances Chambers at Data Entry
History	Note BP 135/97 - suggest inc to 10mg amlodipine ie 10mls - passed to nurse to update Colin and arrange repeat BP a week or two after. probably needs a GP tel cons to discuss analgesia.
Medication	Amlodipine Oral Solution, Sugar Free 5 mg/5 ml *300 ML 10MLS DAILY*
-	-
04/11/2021 14:22	Mrs Pamela Whisker at Rutland Surgery
Examination	Blood pressure reading 135/97 mm Hg
Comment	Discussed statin , patient happy to restart . Would have to be in liquid form. Will task narinder. bp diastolic still high , pt taking amlodipine every morning . Still having constant pain in jaw, oromorph used to help but feels its getting worse. Last night pain felt "more intense" Feels the patches arent doing much for pain.
-	-
03/11/2021 12:38	Ms Narinder Dhillon at Rutland Surgery
Comment	tried to call to discuss addition of statin - see he has follow up appointment for bp check in 2 weeks would suggest atorvastatin 20mg daily and to check LFTS in one month given cholesterol levels and previous history - will task pamela to discuss ant next appt.
Additional	Medication review done by medicines management pharmacist Less Than 5 Meds Unsuccessful attempt to contact patient by telephone
-	-
28/10/2021 11:08	Dr Frances Chambers at Data Entry
History	CDM bloods ok, chol 4.7, HDL 1.5. Note hx prev CVA. Not on a statin. was on rosuvastatin until 2019 when stopped ?around time of surgery/changed to feeding/liquid preps. passed to narinder to look into ?statin option for him given PMH CVA.
-	-
26/10/2021 15:42	Mrs Pamela Whisker at Data Entry
Comment	Contacted patient - appt made for repeat bp in two weeks.
-	-
21/10/2021 12:13	Mrs Pamela Whisker at Rutland Surgery
Examination	Blood pressure reading 139/94 mm Hg
Comment	bp check and bloods for annual review , patient had not yet taken amlodipine solution today , advised to go home and take as bp still not quite at target but has improved. Tasked gp
Test Request	Urea and Electrolytes - *Completed*, Liver Function Tests - *Completed*, Lipid profile (inc. HDL) - *Completed*, HbA1c - *Completed*
-	-
20/10/2021 15:10	Ms Narinder Dhillon at Rutland Surgery
Comment	spoke to patient - happy to try paracteamol caplets - due to start new dose of buprenorphine patches today
Medication	Paracetamol Caplets 500 mg *224 tablet TWO TO BE TAKEN UP TO FOUR TIMES DAILY PRN*
Additional	Medication requested Acute Rx Issued Medication review done by medicines management pharmacist Less Than 5 Meds Telephone encounter
-	-
20/10/2021 14:43	Dr Frances Chambers at Data Entry
History	oramorph done but ?r/q for dissolvable co-cod - given on oramorph ?make sense to change to paracet - passed to Narinder
-	-
15/10/2021 17:19	Dr R Dale at Data Entry
History	Message from hospital. Patient states he is taking more sevredol that prescribed. Requesting increase in patch. Add 10mcg patch to 20mcg already

	in use.
Medication	Sevodyne Transdermal patches 10 micrograms/hour *4 PATCH APPLY ONE PATCH EVERY 7 DAYS*
-	-
05/10/2021 10:07	Dr R Dale at Data Entry
History	Note BP. Re-start amlodipine. Review BP in 2 weeks. Advise to contact CPN as still appears to be open to them.
Medication	Amlodipine Oral Suspension Sugar Free 5 mg/5 ml *150 ml 5ML DAILY*
-	-
04/10/2021 15:15	Mrs Pamela Whisker at Rutland Surgery
Examination	Blood pressure reading 126/105 mm Hg
Problem (REVIEW)	**Essential hypertension**
Examination	O/E - height, 163 cm
	O/E - weight, 57 Kg
	Body Mass Index, 21.45
Social	Alcohol consumption, 20 units/week
Comment	c/o breathlessness , pain across jaw almost daily. Nurse from hospital calling patient this afternoon to discuss oromorph. Very tearful today , talking about wife who passed in feb . Felt like taking his own life a few weeks back. Very low mood. Says he used to have a CPN but not spoken with anyone in a while. Has daughter and grandson who lives with him. Running low on ensure - very poor diet , doesn't feel like eating Looks under weight. Will speak to gp . Contacted patient , explained to start amlodipine and f/u appt given for bloods / bp in two weeks. Number given for CPN , patient to contact as still open to them.
Social	Rolls own cigarettes, 100 g/week
	Current smoker
-	-
28/09/2021	Mrs Carol Anne Boyle at Rutland Surgery
Comment	DNA Bowel screening 29/06/2021
-	-
22/09/2021 17:17	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	dna app for Dietician and telephone calls
-	-
18/08/2021 11:19	Ms Narinder Dhillon at Rutland Surgery
History	Rep.presc. monitoring NOS RPLES
	Drug over usage checked RPLES
Comment	called to discuss ensure drinks - patient prefers bannana milkshake and apple and lime juice ones so will issue these and add to rpt.
Medication	Ensure Plus Juce Liquid (Apple) *3080 ml ONE TWICE DAILY AS DIRECTED*
	Ensure Plus Juce Liquid (lemon and lime) *3080 ml ONE TWICE DAILY AS DIRECTED*
	Ensure Plus Liquid feed (banana) Milkshake Style *5600 ml ONE TWICE DAILY AS DIRECTED*
Additional	Medication review done by medicines management pharmacist Less Than 5 Meds
	Telephone encounter
-	-
13/08/2021 08:36	Dr R Dale at Special Request
History	Was due to increase to 30mg 2 weeks ago. Change to 30mg tabs.
Medication	Mirtazapine Tablets 30 mg *28 tablet ONE TO BE TAKEN AT NIGHT*
-	-
12/08/2021 13:14	Dr Frances Chambers at Data Entry
History	Physio - did not respond to letter
-	-
11/08/2021 10:32	Ms Narinder Dhillon at Rutland Surgery
Comment	spoke to patient to see what ensure drinks he would like - wants to try mistur onf juice and milkshakes - Rx for acute and will call back next week to see what he prefers and change to repeat.
Additional	Outpatient clinic letter received enteral feed clinic
	New medication commenced
	Telephone encounter
-	-
09/07/2021 18:23	Dr Eileen Blackwood at Special Request
History	Letter form psychiatrists. Start mirtazepine 15mg nocte increasing to 30mg nocte after 2 weeks.

Medication	Mirtazapine Tablets 15 mg *42 tablet ONE TO BE TAKEN AT NIGHT INCREASING TO TWO TABS AT NIGHT AFTER 2 WEEKS*

30/06/2021

Additional	Administration of second dose of SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) vaccine (Right Arm) C-19 (By A Parvaiz) PW40041/ AZ/IM/RUA//C-19 (By A Parvaiz)

14/06/2021 17:48	Dr Eileen Blackwood at Rutland Surgery
History	Hx as below.
Examination	O/E - BP reading T 36.7, p 102r, sats 96%, RR 18, HS 1+2+0, chest - reduced AE at L base and quiet wheeze. Blood pressure reading 128/72 mm Hg
Comment	Imp - chest infection Plan - doxycyline, prednsiolone. HAs been advised by DNs to use Gastrostomy more and take less orally. Discussed -suggest using fluid to moisten mouth only and concentrate on using feed. Didn't take lastnight. Plans to put on slowly tonight.
Medication	Doxycycline Hyclate Capsules 100 mg *6 CAPSULE TWO TO BE TAKEN ON THE FIRST DAY THEN ONE TO BE TAKEN EACH DAY FOR 4 DAYS* Prednisolone Tablets 5 mg *40 TABLET EIGHT TO BE TAKEN IN THE MORNING*
History	Grieving wife. Linda died of COVID during the winter. Daughter and 18 month grandson staying with him. Rest of family visit regularly. Headstone being put up this week. Struggling with feeling of guilt that he didn't do more for her. Supprotive discussion. Doesn't feel talking about it helps. Has CPN who visits regularly and feels can talk to them. Invited to cotnact surgery if neded.

14/06/2021 17:00	Dr Eileen Blackwood at Phone Encounter
History	Triage - still struggling with breathing, SOB on mid exertion. Cough productive of green/brown sputum. No fever/ change in taste or smell. Symptoms no better that 3/6/21. Has finished amoxicillin and prednisolone. Hx of laryngeal cancer. Has gastrostomy for feed. Still takes sips or tea and fluids orally. Can sometimes caues him to cough. Risk of aspiration. Colin is able to come to surgery this afternoon for appt.

14/06/2021	Mrs Carol Anne Boyle at Rutland Surgery
Comment	struggling with his breathing

04/06/2021 16:17	Dr Frances Chambers at Data Entry
History	Note wound swab - mixed anaerobes - add flagyl
Medication	Metronidazole Tablets 400 mg *15 tablet 1 Tab 3 times daily*

03/06/2021 12:38	Dr Frances Chambers at Telephone Consultation
History	tel cons - doing ok - breathing more difficult 1 week thinks warm weather ? worse, going small walks, using neb - helping, feels more SOB, bringing up green/brown mucous. has asthma. used salb
Examination	talking full sentences, not yet had neb today as slept late
Comment	rx as exasc, r/v if worsens etc
Medication	Amoxicillin Capsules 500 mg *15 CAPSULE ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS* Prednisolone Tablets 5 mg *40 TABLET EIGHT TO BE TAKEN IN THE MORNING*
History	has has further cpn input, suggested further counselling. still down in mood. started using PEG tube yesterday again. will work with CPN and recontact for r/v in 6 wks or so
	discussed inc patch strength, using oramorph prn. DN helping. aware not take sachets oral morphine - handing back to chemist

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03/06/2021 10:04	Dr Frances Chambers at Telephone Consultation
History	tel cons - no answer mob, message left

02/06/2021 13:02	Dr Frances Chambers at Telephone Consultation
History	triage - Raymond staff nurse - DN. visiting Colin today, pain neck/shoulders despite butec 20mcg. is compliant. is taking oral intake but not yet using PEG. c/o some inc difficulty swallowing note at ENT end April and nasendoscopy ok.

Comment	could try inc butec to 25mcg - Raymond will let him know (5 and 20 patches)
Medication	Butec Transdermal patches 5 micrograms/hour *4 PATCH APPLY ONE PATCH EVERY 7 DAYS*

History	some exudate at PEG site has cleaned and swabbed
Test Request	Wound Swab (C&S) #1 - *Completed*

27/05/2021 16:16	Dr R Dale at Special Request
Medication	Benzydamine Hydrochloride Spray Sugar Free 0.15 % *1 SPRAY USE 4-8 SPRAYS ONTO AFFECTED AREA EVERY 90 MINUTES TO 3 HOURS*

26/05/2021 18:37	Dr Frances Chambers at Data Entry
History	note below, prev script cancelled and redone 7 day
Medication	Butec Transdermal patches 20 micrograms/hour *4 patch APPLY ONE PATCH EVERY 7 DAYS*

26/05/2021 14:16	Miss Megan Turner at Rutland Surgery
Comment	call from chemist - would like script to say butec patches every 7 days change not 72 hours

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26/05/2021 11:58	Mrs Trisha Jones at Rutland Surgery
Comment	fortisip req 11200ml from nutricia

20/05/2021 13:09	Dr Frances Chambers at Telephone Consultation
History	tel cons - no answer - message left. given struggling+ when last spoke I have added tel cons in another couple wks so don't lose touch. should be getting CPN input

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10/05/2021 16:41	Dr R Dale at Special Request
Medication	Fortisip Bottle Liquid Feed (Mixed Flavours) Bottle 200 ml *35 bottle TAKE AS DIRECTED*
History	Request from Nutricia.

07/05/2021 10:53	Dr Frances Chambers at Data Entry
History	email response from Karen Darroch - under 1-2 weekly tel review for last month, unwilling/unable to restart tube feeding or inc oral intake, agrees mental health main issue. has suggested fortisip strawberry x1/day could bolus down tube when out. she will keep in contact with him.

06/05/2021 12:31	Dr Frances Chambers at Data Entry
History	Dear Ms Darroch, I am writing about this man who has enteral feeds and some oral intake. I am quite concerned about him recently. His wife died a couple of months ago and he is struggling with bereavement. He has stopped using his PEG tube and is not even putting water through it despite advice. He is mostly existing on tea and biscuits. He is having input via a CPN for his mental health. He was on fortisip earlier last year but it was stopped in June. I was hoping you could arrange urgent review, Many thanks, F CHAMBERS
Comment	above email send to dietician

06/05/2021 12:11	Dr Frances Chambers at Telephone Consultation
History	tel cons - trying to get himself back together. friend from school's funeral today. CPN visited yesterday, back again in 2 wks discussed ?counselling. saw DN yesterday advised re patches - starting patch today, aware liquid morphine will be needed less once patch working. no PEG feeds, sipping water and drinking tea 4-5 cups/day, eating biscuits, jellies, custard pots. Saw ENT and told ok, seeing again 2 mths. Has new dietician coming out soon. going on 2 walks a day. prev fortisips but stopped.
Comment	phoned dietician - message left answerphone to call back

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28/04/2021 15:53	Dr Frances Chambers at Telephone Consultation
History	feeling not too bad today, CPN coming out 5th May, ENT appt mane. still not taken morphine regularly, taking swigs of MST 6x/day. taking lansop and diazepam. not taking regular morphine or fluoxetine. not been taking any feeds. eating biscuits/crisps, sipping water/tea, sore to swallow and can cough. Spoke to dietician yesterday - putting water through now, given advice re feeds using syringues/pumps. been at wife's grave, arranging affairs/headstone. Daughter and grandson in house trying to persuade him. still under dietician r/v

Comment	aware need to take feeds/morphine but can't be bothered. is trying to set goals. last took fluoxetine 2 wks ago, moods v up and down. asking ?morphine patches as struggling with effort making up granules etc - agreed start butec patches, tel cons next week, still oramorph for breakthrough pain. Dietician ongoing input and is taking fluid through PEG. ENT mane and CPN next week. r/v sooner prn
Medication	Butec Transdermal patches 20 micrograms/hour *8 PATCH Apply one every 72 hrs*

21/04/2021 12:11 Dr Frances Chambers at Rutland Surgery

History	Frustrated lack of face to face review for cancer - had laryngeal cancer 2 yrs ago - finished radiotherapy, for annual follow up but nil FTF as covid - frustrated. 3 mths left neck sore, can feel ?lump/gland. if eating regurgitating a bit - 6-8 wks or so, drinking+ to swallow, feels throat less good/closing up. no change in voice - always husky since rx. still smoking, no alcohol. PEG tube - feeds not bothered 4 days. stopped morphine 4 days ago - in pain both sides throat, taking some oramorph - aware wearing off, swigs from bottle. stopped these meds as so low/depressed since death wife.
Examination	throat nil obv abN, palpable left side LN approx half cm, not fixed, sl firm, no other abN felt. gen tender. does not appear dry/dehydrated.
Comment	spoke to Nicky Henderson McMillan/ENT specialist nurse, will email his consultant Anne Hitchings and her secy to ask for urgent FTF appt.

History	discussed mood very low partic since death wife of covid 2 mths ago. She had lung probs but was quite sudden, she died in hospital. he lives with youngest daughter and grandson 17 mths. V V low mood, tearful and can't see point going on since wife died. Lots suicidal thoughts eg overdose, throw self off bridge. emotional and hard to make out. says no plans to act just now due to family but could do so impulsively, feels urge to get away from family etc eg run away to England so doesn't have to face them. is not taking meds or feeds 4 days due to low mood. Longer hx mental health probs, prev sexual abuse and suicide attempts but was doing reasonably ok prior to death wife. Has planned his funeral, bought his plot in graveyard and organised affairs eg collections memorabilia for kids to inherit.Taking fluoxetine 60mg/day liquid since 2019. v poor sleep. says temaz was a bit better than zop but aware not get 'hooked'.
Comment	r/v prev meds had trazadone 20 yrs ago, then sertraline 2006-7, mirtaz 2008, citalopram 2009-11, trazodone 2012-14, fluoxetine then mirtazapine again then sertraline 2015-18, back to fluoxetine 2019
Examination	appropriate dress, clean, clearly low but engaging with conversation, no obv dehydration.
Comment	agree refer psych urgent given suicide risk also ?medication review

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21/04/2021 11:35 Dr Frances Chambers at Telephone Consultation

History	Paula Peacock DN - last 4 days not eaten or taken tabs, not had feeds. really low, talking about running away/pulling out PEG tube. lumps left side neck, feels swallow worse. concerned re mood, no suicidal feelings voiced, wanting to run away. lives with daughter aware what is going on.
Comment	she is asking we refer back to maxfacs hospital and review mental health - phoned Colin - will come down see me

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18/03/2021 12:50 Dr R Dale at Phone Encounter

History	Poor sleep since wife died. Mind racing. Getting irritable with family. No benefit from zopiclone, even after taking 2 tabs. Knows it is early days. Does not feel he needs counselling.
Comment	Call back if no better.
Medication	Temazepam Tablets 10 mg *10 tablet 1 Tab At night if needed*

18/03/2021 12:34 Miss Megan Turner at Rutland Surgery

Comment	pt called regarding previous call with EB. Pt is struggling and would like to speak to someone. wife died and he hasn't slept a full nights sleep since her funeral and would like to discuss with someone.

15/03/2021

Additional	Administration of first dose of SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) vaccine (Right Arm) C-19 (By M MacIntyre) PV46671/ AZ/IM/RUA//C-19 (By M MacIntyre)

19/02/2021 17:51 Dr Eileen Blackwood at Telephone Consultation

History	Prebookable. Colin's wife, Sandra died of COVID 19 earlier this week. Passed on my condolences. Colin has had covid too. Feeling ok. Taking PEG feed again. Dietitians involved. Dealing with funeral arrangmenets. Daughter and grandson live with him. Family close by. Would like ot talk again after funeral, will find out date on Monday, will call to arrange tel appt at a tme that suits him.

-	----
10/02/2021 11:45	Sister Anne Henderson at Phone Encounter
Comment	Phone call from Anna dietician - Colin can start with taking 1/2 feed and diluting with water for 1-2 days and then 3/4 feed and if tolerated and no symptoms then up to full feed. She will call him next Thrs. Colin informed and will be in touch if required. Office number of dietician for patient contact - 0141 531 6821-
-	----
10/02/2021 10:09	Sister Anne Henderson at Phone Encounter
Comment	Telephone triage - as below. Positive covid test 3/2/21 with symptoms of vomiting and diarrhoea and change of taste. No respiratory symptoms. No diarrhoea for 3 days or vomiting for 2 days. Feeling much better and has been tolerating light diet of custard, soups and pizza! Drinking plenty of fluids. PU. has stopped PEG feeding but was planning to restrt tomorrow. ? should start at lower volume. Message left with community dieticians for further advice. Call Colin back
-	----
10/02/2021 09:01	Dr Frances Chambers at Data Entry
History	Paula Peacock DN phoned to say Colin has had diarrhoea since last week. Not been drinking fluids. or getting enteral feeds but has been taking some oral food. Has tested positive for covid - dates unclear. Worried he may be getting dehydrated. Has laryngeal cancer. She has not seen him. For triage call to Colin to get more details but may need referral to covid hub for home visit
-	----
05/02/2021 16:52	Mrs Diane MacLean at Rutland Surgery
Comment	booked colin in for mon 22th feb for gp tel call
-	----
05/02/2021 14:16	Dr Frances Chambers at Data Entry
History	Note SR morphine - ordering hx not really consistent with taking 90mg BD, getting approx 60 of each strength sachet every 2-3 months. For tel cons to discuss
-	----
22/01/2021 17:53	Dr Eileen Blackwood at Data Entry
History	Med Rv has been taking lansoprazol caps instead of orordispersible for severla months. Repeats updated. Not ordered inhalers since the summer
Medication	Lansoprazole Capsules (Gastro-Resistant) 30 mg *28 capsule ONE TO BE TAKEN EACH DAY DISPENSE WEEKLY*
Additional	Medication review done
-	----
30/10/2020 16:19	Mrs Diane MacLean at Rutland Surgery
Comment	Tried phoining patient reg script
-	----
19/09/2020	Mrs Carol Lewis at Rutland Surgery
Comment	Immunisations
Additional	Seasonal influenza vaccination (Left arm) Lot P100243203 Exp 05/21
-	----
02/09/2020 14:24	Dr R Dale at Special Request
History	Can't see lactulose. Is it laxido?
-	----
27/08/2020 07:38	Dr R Dale at Data Entry
History	Yes, should be 90mg bd.
-	----
26/08/2020	Ms Carol Turner at Rutland Surgery
Comment	Harmony Row pharmacy called to clarify the MST dose, script says 2 x 30mg and 1 50mg, however, pt is taking 90mg twice daily. The discharge states 2 30mg 1 60mg but also says total dose is 90mg.
-	----
25/08/2020 12:07	Dr Eileen Blackwood at Telephone Consultation
History	Called Brand St to speak to Gerry, CPN. He's unailable. Admin team will pass on message I've called.
-	----
24/08/2020 17:22	Mrs Angela Farrell at Data Entry
Comment	Spoke with wife regarding MST she states he is taking 90mg morning and 90mg at night
-	----
24/08/2020 17:04	Dr Eileen Blackwood at Data Entry
	Call from Gerry, CPN, 16.24. 0141 303 8900. Didn't get chance to call until

History	now. Closed at 17.00. Call tomorrow.

24/08/2020 07:36	Dr R Dale at Data Entry
History	What dose is he taking? Not had MST 60mg since May.

03/08/2020 08:46	Ms Hilary Campbell at Data Entry
History	Post hospital dischrge med reconciliation with medical notes
Comment	IDL screening: Looking at ordering history of Morphine sulpate sachets it would appear that was on 30mg sachets x 2 twice a day (= 60mg twice a day) and has only ordered 60mg sachets once in May when the dose was increased by Dr B. Note on Docman that reception are going to phone to clarify exactly what dose is currently being taken.

30/07/2020 18:19	Dr Eileen Blackwood at Data Entry
History	D/C - treated for complex right middle lobe abscess possibly communicating with pleural space. Discharged with 6 week course of coamoxiclav. Looks as if now on morphine sulfate 90mg (60mg and 30mg saceht bd) - please double check with Colin what dose of morphine sachets he is taking.

29/07/2020 09:14	Dr Frances Chambers at Data Entry
History	SR - note d/c letter to continue 6 wks on co-amox from start date 16/7. prep is stable for 7 days. 4 wks worth of weekly disp done - to finish 27/08/2020.
Medication	Co-Amoxiclav 250/62 Sugar free suspension 250 mg/5 ml + 62 mg/5 ml *1200 ml 10MLS THREE TIMES DAILY UNTIL 27/12/2020. DISPENSE 300MLS WEEKLY (210MLS WILL BE USED)* Diazepam Tablets 2 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED*

21/07/2020 08:58	Sister Anne Henderson at Phone Encounter
Comment	Telephone triage - as below. Spoke to wife. Colin was agitated and very low mood in hospital yesterday. Wanted to self discharge but on IV antibiotics and was encouraged to stay. Sandra concerned as he on a lower dose of diazepam than normally prescribed. Advised to request an appointment with Senior Docotor regarding concerns. Unfortuately we don't have say in what prescribed while in-patient. Hospital can call for more info if required. Happy to do this

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21/07/2020 08:41	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	wifer number - 07930078818 - wife has called in colin is in hospital he was perscribed diazepam he is in hospital now but not getting in the hospital and his mood is really low

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14/07/2020 16:20	Mrs Angela Farrell at Data Entry
Comment	Tel DN as per Dr Blackwood to advise pt being admitted to hospital

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14/07/2020 15:59	Dr Eileen Blackwood at Home visit
History	Hx and bloods as below. In addition ~ 5 day hx of worsening cough, productive of green sputum. Pleuritic chest pain radiating form L posterior, mid thoracic area through to front. No haemoptysis. Not feverish. more SOB than normal.
Examination	O/E - BP reading T 36.7, p >120r, sats 94%, RR 24, chest wall nontender, chest - odd crackles, moslty clear to bases, HS 1+2+0, abdo soft, non tender, no masses, BS normal, peg - a little yellow slough - swab - staph aureus, flucloxacillin prescribed, not started yet. Blood pressure reading 126/74 mm Hg
Comment	IMP - chest infection? PE? needs CXR to also check for mets. Admit medics via SATA. Family will take down.

14/07/2020 10:20	Dr Eileen Blackwood at Phone Encounter
History	Phonecall from Gerry, CPN who visited Colin yesterday. Feels it was a worthwhile visit and that Colin opened up to him. Denies any suicidal ideation. Sometimes fleeting thoughts of "what's the point in being here". Does not think hospital would be appropriate because not suiicdal, COVID risk. Discussed hospital with Colin and his ex wife who both did not want hospital admission. Feeling a bot calmier over the weekend, takign diazpeam 2mg tid. Gerry is going to keep in regular contact with Colin and work towards helping hin to adjust to his new circumstances and building up hope. Gerry will update Lorraine Gourlay.

14/07/2020 08:38	Dr R Dale at Data Entry
History	Swab - Staph aureus.

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13/07/2020 09:50	Dr Eileen Blackwood at Telephone Consultation
History	Spoke to Colin. Asked about mood first of all - feeling a little less distresesd. Feelign calmer. Taking diazpeam 2mg tid. Denies any suicidal ideation. Did PEG feed over night last night and went well. Bloods Hb 90 (114 11/2019, 137 10/2019, WCC 17.5, Neuts 14.7. MCV 82.4 - reduced. Platelets 485 - increased. Ferritin 563, VB12 and Folate normal. Na 131, K 4.8. e GFR > 60. Ca 2.18, Ad Ca 2.48, Alb 19 (29 11/2019), ALP 674 (143 11/2019), ALT 60 (14 11/2019), GGT 512 - raised.
Comment	Anaemic, raised White cells, platelets and ferirtin. Hyponatraemic, Hypocalcaemic, low albumin. Raised ALP and ALT. Due to malnutrition? Ris of cancer recurrence? SPoke to Lorraine, Gourlay. She spoke to CPN, Gerry on Firday afternoon. He will visit today. Put in for HV tomorrow.
-	----
10/07/2020 15:43	Dr Eileen Blackwood at Data Entry
History	Spoke to Lorraine, DN. Colin was crying throughout her visit today. No suicidal ideation. Takign fluoxetine 60mg od and diazepam 2mg up to qid. CPN phoned and is going to phone again at beginning of week with view to setting up face to face appt later in week. I am not working this afternoon and unable to call BRand St. Lorraine will call and speak to CPN. I will call Mr Wright Monday morning and liase with Lorraine.
-	----
07/07/2020 13:16	Dr Eileen Blackwood at Rutland Surgery
History	Mood low, crying a lot. No active suicidal plans but wouldn't mind if he died. Does think about jumping in the Clyde but knows he wouldn't mbecuase he's not storng enough. Some benfit drom diazpea 2mg - taken prn, not every day. Also takign Fluoxetine 60mg od in liquid form. Buccastem has helped nausea a bit but would prefer to try tablet as buccastem takes along time to dissolve. Mouth dry. Thinks he would manage to swallow tabs. Denies pain but uncomfortable in L side of thorat when swallowing. Weight down to 47.4 kg. Slowing rate of peg feed has imrpoved nausea. Over8 hours. Going to try doing feed at night. BO. Passing urine.DNS visit every Wed. Dietitian in regular ocntact and visit. 10/6/20 - toxicities clinic phone appt 10/6 - f/u 1 y. HAve referred to Brand St for CPN.
Examination	O/E - weight NOS 47.4 kg Tearful, thin, throat dry, no inflammation, exudate. PEg- surrounding skin helathy, not inflammed, a little pale yellow exudate, treated for staph aureus infection early June. DNs going to repeat swab this week
Comment	1. chang3 buccastem to prochlorperazine tabs 2. Tiral of taking diazpem 2mg bd up to qid if needed, 3. change Brand St referral to urgent. 4. checked back - not had bloods recently. Update bloods because- of weight loss. Ask DNs to do when they are next out. 5. Would like to try saliva spray. 6. phone rv next week.
Medication	Prochlorperazine Maleate Tablets 5 mg *84 tablet 1 Tab 3 times daily IF REEQUIRED* Saliveze Spray 50 ml *1 spray TO BE USED WHEN REQUIRED* Diazepam Tablets 2 mg *50 tablet 1 or 2 Tabs FOUR TIMES DAILY IF REQUIRED* Sodium Chloride Nebuliser Liquid 0.9 %, 2.5 ml unit dose ampoule *40 unit dose 2.5M FOUR TIMES PER DAY AS REQUIRED*
Test Request	Glucose - *Requested*, Vitamin B12 - *Requested*, Bone Profile - *Requested*, Urea and Electrolytes - *Requested*, Ferritin - *Requested*, Liver Function Tests - *Requested*, Folate - *Requested*, Thyroid function tests - *Requested*, Full Blood Count - *Requested*
-	----
06/07/2020 15:55	Dr Eileen Blackwood at Phone Encounter
History	Lorraine worried about Colin's mental health. Siutation as before. Wishes he wasn't here. Denies plans to kill himself. DNs concerned. Feels he would benefit from face to face appt as struggls to speak on phone. I will visit tomorrow. Change Brand St referral to urgent.
-	----
03/07/2020 17:15	Dr Eileen Blackwood at Data Entry
History	Message to call Lorraine, DN 07770678204, no answer, message left.
-	----
29/06/2020 18:59	Dr Frances Chambers at Data Entry
History	SR - fluoxetine done 29/6, not redone. lansop issued
-	----
29/06/2020 16:34	Dr Eileen Blackwood at Special Request
Medication	Twocal Liquid *21 litre TO BE USED AS DIRECTED*
-	----
29/06/2020 14:08	Dr Eileen Blackwood at Phone Encounter
History	Mood still low, tearful at times. Sometimes wishes he wasn't here. Denies would act to harm himself. Nausea improved but still sometimes vomits after feed finished. Mind racing at times. Missing grandchildren. Sleep variable. Have referred to Brand St. Takign fluoxetine 20mg/5ml 10ml daily. Discussed. Low

	mood. HAppy to see CPN but not sure whether talking will help. Plan - increase fluoxetine to 20mg/5ml 15ml daily. Trial of short course of diazepam. Phone rv in 2 weeks. WSG.
Medication	Fluoxetine Hydrochloride Liquid 20 mg/5 ml *420 ml 15ML DAILY* Diazepam Tablets 2 mg *28 tablet 1 or 2 Tabs FOUR TIMES DAILY*

24/06/2020 14:35	Dr Eileen Blackwood at Data Entry
History	Call from Beth, Colin has agreed to referral to CPN re low mood. Struggles on the phone, request CPN. Put in for tel rv on antidepressant.

15/06/2020 15:05	Dr Eileen Blackwood at Special Request
Medication	Twocal Liquid *1 litre TO BE USED AS DIRECTED*

12/06/2020 10:09	Dr Eileen Blackwood at Data Entry
History	Called Colin, no answer. Email from Hilary. N+V could be related to increase by 50% of MST in May. Cyclizine may be an option but restricted to specialist initiation. Also spoke to community palliative care team (explained Mr Wright wasn't palliative. Advised if nausea not controlled with buccastem 6mg bd could have additional stemetil 12.5mg IM up to twice a day. BNF Tx of N+V -12.5mg IM followed bu oral medication 6 hours later if needed.
Medication	Prochlorperazine Mesilate Injection 12.5 mg/ml, 1 ml ampoule *10 ampoule TO BE INJECTED AS REQUIRED FOR NAUSEA AND VOMITING REPEAT OR GIVE BUCALLY AFTER 6 HOURS IF NEEDED*

10/06/2020 14:30	Dr Eileen Blackwood at Data Entry
History	Call from Beth DN. IM stemetil helped nausea. Asking for regular to be restarted. Regular metoclopramide didn't help. Start buccastem twice a day long term? Discussed whether IM prochlorperazine can be given in additon to buccastem twice dialy if neede. Trying to find out if it would be ok but can't find clear answer in BNF. Have emailed Hilary for advice. In meantime start buccastem bd. Looked at ondasetron and levomepromazine as other options but they are C/I with his inhalers (risk of hypoaklaemia, arrythmia).
Medication	Prochlorperazine Maleate Buccal tablets 3 mg *56 tablet ONE OR TWO TO BE DISSOLVED BETWEEN UPPER LIP AND GUM FOR NAUSEA UP TO TWICE DAILY*

08/06/2020 17:57	Dr Eileen Blackwood at Special Request
History	Letter from Karen Darroch, Community Enteral Feeding Dietitan. Script issued Abbott Twocal 1000ml bottle x 14 bottles.
Medication	Twocal Liquid *2 litre TO BE USED AS DIRECTED* Twocal Liquid *14 litre TO BE USED AS DIRECTED*

08/06/2020 09:27	Dr R Dale at Data Entry
History	PEG swab result - Staph aureus.
Medication	Flucloxacillin Capsules 500 mg *20 CAPSULE ONE TO BE TAKEN FOUR TIMES A DAY FOR 5 DAYS*

05/06/2020 14:57	Dr Frances Chambers at Data Entry
History	DN Heather phoned from Govan - has been in contact with Colin today - vomiting including feeds, tablets, looking for script for stemetil injectable - done as below - will try giving this and I can sign direction to administer so can be given over weekend. Also has buccal to use if needed 6 hrs after.

05/06/2020 14:47	Dr Frances Chambers at Data Entry
History	DN requesting stemetil injections
Medication	Prochlorperazine Mesilate Injection 12.5 mg/ml, 1 ml ampoule *10 ampoule TO BE INJECTED AS REQUIRED FOR NAUSEA AND VOMITING REPEAT AFTER 6 HOURS IF NEEDED*

05/06/2020 14:05	Mrs Diane MacLean at Rutland Surgery
Comment	stemitil injection

04/06/2020 13:13	Dr R Dale at Phone Encounter
History	Mood low at present, particularly due to nausea and vomiting during feeds. Metoclopramide not helping. Difficulty taking lansoprazole dispersible. Prescription has been done for capsules. Struggling with heartburn and reflux. Fluoxetine recently increased. States he has been through counselling for lots of things over the years and does not think it helps.

Comment	Try short spply of buccal prochlorperazine. Call back if further concerns.
Medication	Prochlorperazine Maleate Buccal tablets 3 mg *8 tablet ONE TO BE DISSOLVED BETWEEN UPPER LIP AND GUM FOR NAUSEA UP TO TWICE DAILY*

03/06/2020 17:12 Dr Eileen Blackwood at Phone Encounter

History: Called again and spoke to Mrs Wright. Colin is still sleeping. She reprots he has only had about 5 hours sleepover past 3-4 days. Exhausted. Not been eating well. Hopefully will feel benefit of decent sleep. Discussed plan noted below. She thinks he would be unlikely to accept talking therpay. McMIllan emotional ? Needs morphine sulphate oral solution - issued. Will ask either Dr Chambers or Dale to call tomorrow.

03/06/2020 16:35 Dr Eileen Blackwood at Data Entry

History: Called again, no answer.

03/06/2020 15:25 Dr Eileen Blackwood at Phone Encounter

History: Called, no answer, message left.

Comment: tried phoning patient reg script

03/06/2020 14:16 Dr Frances Chambers at Data Entry

History: SR - please clarify morphine sulfate liquid or sachets?

03/06/2020 13:21 Dr Eileen Blackwood at Phone Encounter

History: O/E - weight NOS 49.6 kg Call from Heather. She saw Colin today. Mood very low. Sometimes wishes he wasn't here. Reluctant to eat or feed himself through tube. Reports nearly everything he takes is coming back up. Takes lansoprazole 30mg od and metoclopramide. Heather has been in touch with Morrell Busby McEwan (07799582259) Enteral Feeding Nurse. There is some pus at the tube site which puts Colin off using. Swab taken in Feb - no growth. Swab is beging repeated. If negative Morrell will visit. Morrell is alo going to get in touch with Karen Darroch dietitian. They are wondering if Colin is developing a type of eating disorder. Fluoxetine 20mg/5ml increased to 10ml (40mg) 29/4/20. Is he absorbing? Called Colin - spoke to wife - asleep at moment, didn't sleep last night. Arranged to call back later - dicuss CPN or McMillan input.

03/06/2020 12:26 Dr Eileen Blackwood at Phone Encounter

History: Message to call Heather, DN, 07803829997. No answer, message left.

26/05/2020 11:42 Dr Eileen Blackwood at Telephone Consultation

History: Prebookable - called, no answer, message left.

21/05/2020 14:26 Dr Frances Chambers at Data Entry

History: chemist looking for nutrison to be 1000ml

13/05/2020 10:47 Dr Eileen Blackwood at Rutland Surgery

History: Taking morphie sulfate MR sachet 30mg 2 sachets twice a day. Over past 2 weeks has been taking oramorph 10mg/ 5ml 5ml 4 to 6 times a day for breakthrough - estimate average 50mg of morphine extra a day for break though. Taking for pain in throat since last biopsy. Beatson in June.

Comment: Increase morphine sulfate mr saceht to 60mg sachet and 30mg sachet twice a day (90 mg bd). Continue oramoprh 5ml for breakthrough if needed - will monitor. Discussed warning signs of opiate toxicity. Phone rv in 2 weeks. WSG.

Medication: Morphine Sulfate M/R suspension 60 mg/sachet, granules sugar free *60 sachet ONE SACHET TO BE TAKEN TWICE A DAY*

History: Feels mood is starting to lift a bit. SLeeping better - using zopiclone every 3-4 days, usually sleeps well if takes it. Still has supply. Aunite who he is close to is dying in England. Finding it difficult not being able to go see her. Finding covid 19 lockdown worrying and frustrating. supportive conversation. Tolerating fluoxetine 40mg od - happy to continue on this dose.

Finihsed coamoxiclav. Chest symtpoms improved - cough, SOB, CP eased. Still occasional CP in R side but less frequent and severe. No ankle swelling. Will contact surgery if sympotms flare up.

13/05/2020 10:35 Dr Eileen Blackwood at Telephone Consultation

History	Pre bookable -called, no answer, message left.
30/04/2020 09:01	Mrs Angela Farrell at Data Entry
Comment	DN Heather tel looking for update from yesterday
29/04/2020 17:23	Dr Frances Chambers at Telephone Consultation
History	discussion various issues. DN had phoned hoping for us to call Colin. Sleep really poor just now, anxiety re covid, pain from throat which is also making him anxious, mood low. feeling gen tired/weak but can't get sleep. Poor concentration. tearful at times. On fluoxetine 20mg, has had higher doses prev for depression.
Comment	agree inc fluoxetine to 40mg, normal Dr Dr Blackwood, would like follow-up call from her. discussed sleep hygeine and shortterm sleeping tabs. Optimise pain control - try oromorph prn and keep note of use, can adjust MST if needed. Has appt Beatson June.
Medication	Co-Amoxiclav 250/62 Sugar free suspension 250 mg/5 ml + 62 mg/5 ml *200 ml 10MLS 3 TIMES A DAY* Zopiclone Tablets 7.5 mg *14 tablet ONE TO BE TAKEN AT NIGHT* Fluoxetine Hydrochloride Liquid 20 mg/5 ml *280 ml 10MLS DAILY*
History	Ongoing pain back of throat since last biopsy. Throat v slow to recover from radiotherapy. Pain worries him. Lots weight loss. Onc/ENT follow up in June, bipsies reassuring last time. Getting a little rt sided CP anterior for 1-2 wks, worse with deep breath/cough/ Not SOB, no leg swelling. No fever but has cough and bringing up green sputum. Also some pus at gastroscopy site fairly longstanding.
Comment	?chest inf +/- skin inf at gastrosc site. Try abx, seek r/v if worsens/SOB etc
21/04/2020 12:33	Dr R Dale at Special Request
History	Script was done yesterday for morphine sachets.
20/04/2020 16:11	Ms Hilary Campbell at Rutland Surgery
Comment	SR for MST 30mg sachets - last Rx issued was 18th March however 2 Rx had been issued in February; checked with John Gilbride's pharmacy and they don'y have the one issued from us in March, so new Rx issued today
Medication	Morphine Sulfate M/R suspension 30 mg/sachet, granules sugar free *120 sachet TWO SACHETS TO BE TAKEN TWICE A DAY*
Additional	Previous treatment continue Prescription by supplementary prescriber
09/04/2020 13:02	Dr Frances Chambers at Data Entry
History	is it the sachets he needs?
09/04/2020 12:37	Miss Emma Robertson at Special Request
Comment	MST
02/04/2020 07:50	Dr R Dale at Data Entry
History	ESA 113 completed.
18/03/2020 17:37	Dr Frances Chambers at Data Entry
History	fortisip r/q
Medication	Fortisip Compact Liquid Feed (Neutral) Milkshake Style *14000 ml 125ML (ONE BOTTLE) TO BE TAKEN ONCE DAILY*
18/03/2020 17:34	Dr Frances Chambers at Data Entry
History	SR
18/03/2020 17:18	Mrs Diane MacLean at Rutland Surgery
Comment	floxetine, morphine, mst
18/03/2020 11:38	Mrs Carol Anne Boyle at Special Request
Comment	Prescription request Fortisip letter in tray
05/03/2020 12:41	Dr R Dale at Special Request
	Fucibet Cream *30 gram APPLY THINLY TO THE AFFECTED AREA TWICE*

Medication	*DAILY*
04/03/2020 15:10	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	heather dn called loking to order a fuceabet cream
27/02/2020 12:36	Dr Frances Chambers at Data Entry
History	SR
26/02/2020 17:49	Mrs Carol Anne Boyle at Rutland Surgery
Comment	MST Morphine sulphate Fluoxetine liquid Lansoprazole
25/02/2020 08:32	Dr R Dale at Special Request
Medication	Prontosan Wound Irrigation Solution Bottle *350 ML TO BE USED AS DIRECTED* Kliniderm Foam Silicone Border Dressing 7.5 x 7.5 cm *10 dressing TO BE USED AS DIRECTED*
24/02/2020 15:31	Mrs Diane MacLean at Rutland Surgery
Comment	dressings clinaderm border 7.5x 7.5, pronitsan solution, inadine 5 x 5
19/02/2020 11:37	Dr Eileen Blackwood at Special Request
History	See letter 18/2 in docman - meds updated. Nutrison energy liquid and multifibre cahnged to 1000ml Optri bottles to allow bolus feeds.
Medication	Nutrison Energy Liquid *1400 ml TO BE USED AS DIRECTED* Nutrison Energy Multi Fibre Liquid *1400 ml TO BE USED AS DIRECTED*
19/02/2020 10:37	Mrs Carol Anne Boyle at Rutland Surgery
Comment	sterile water for injection 5ml, nutrison energy liquid 1000ml, nutrison energy mfibre liq 1000ml
06/02/2020 08:09	Dr R Dale at Special Request
Additional	
05/02/2020 14:23	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	mst, fluoxetine liquid, oralmorph
04/02/2020 09:19	Dr R Dale at Rutland Surgery
History	Mood low, disappointed that he has been told that he has a 2 year revocery period. Does not think he would have gone through everything if he had known. Weight loss. Awaiting appointment with dietician. Risk fo pressure sores. Has been advised to get barrier cream. Poor sleep, esp initiating. Zopiclone 3.75mg did not help previously, no side effects.
Medication	Zopiclone Tablets 7.5 mg *10 tablet ONE TO BE TAKEN ALTERNATE NIGHTS* Conotrane Cream *100 GRAM APPLY AS DIRECTED*
30/01/2020 08:31	Dr R Dale at Special Request
Medication	Irripod Sterile Irrigation Solution sodium chloride 0.9 %, pod, 20 ml *25 unit dose TO BE USED AS DIRECTED* Hydrofilm Plus Dressing 5 cm x 7.2 cm *10 dressing TO BE USED AS DIRECTED* Inadine Dressing 5 cm x 5 cm *10 dressing TO BE USED AS DIRECTED* Nurse It Sterile Dressing Pack with Small/Medium Gloves *10 pack AS DIRECTED*
29/01/2020 14:07	Mrs Carol Anne Boyle at Special Request
Comment	SR from the DNs Irripods x 1 box Hydrofilm plus 7.2 x 5cm x 1 box Inodine 5 x 5cm 1 box Nurseit dressing packs x 1 box
23/01/2020 12:58	Dr Frances Chambers at Data Entry
History	SR
22/01/2020 15:14	Mrs Trisha Jones at Rutland Surgery
Comment	oromorph,mst

17/01/2020 12:54	Dr R Dale at Special Request
Medication	Water For Injection Injection 5 ml/amp *20 ampoule USE AS DIRECTED*
17/01/2020 10:22	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	sterile water for injection 5ml - 100ml
09/01/2020 13:00	Dr R Dale at Special Request
Additional	
09/01/2020 12:35	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	PARACETAMOL, FLUOXETINE LIQUID, LANSOPRAZOLE CAPSULS
06/01/2020 14:33	Dr R Dale at Special Request
Additional	
06/01/2020 14:30	Mrs Carol Anne Boyle at Rutland Surgery
Comment	Oromorph
23/12/2019 12:54	Dr Frances Chambers at Data Entry
History	SR
23/12/2019 11:12	Mrs Diane MacLean at Rutland Surgery
Comment	oromorth
19/12/2019 11:50	Dr Frances Chambers at Data Entry
History	SR
Medication	Water For Injection Injection 10 ml/amp *20 AMPOULE TO BE USED AS DIRECTED*
18/12/2019 14:35	Mrs Trisha Jones at Rutland Surgery
Comment	water injections shd be the plastic ones pharmacy have issued the glass one
16/12/2019 13:08	Dr R Dale at Special Request
Additional	
16/12/2019 11:12	Mrs Diane MacLean at Rutland Surgery
Comment	NUTRISON ENERY MFIBNRE 1000ML
12/12/2019 08:11	Dr R Dale at Special Request
Additional	
11/12/2019 16:35	Mrs Trisha Jones at Rutland Surgery
Comment	MST, oromorph, lansoprazole, flouxetine
10/12/2019 18:09	Dr Eileen Blackwood at Data Entry
History	Swab from gastrostomy site - staph aureus (s to flucloxacillin), group b strep (sensitive to amox). HAd flucloxacillin. Spoke to COlin, infeciton has cleared up. DNs visit every wednesday. happy to monitor. rv prn.
05/12/2019 11:05	Dr R Dale at Special Request
Medication	Nutrison Energy Multi Fibre Liquid *10000 ml USEAS DIRECTED*
29/11/2019 08:15	Dr Eileen Blackwood at Rutland Surgery
History	Gastrostomy inserted 20/11/19. Changed yesterday. Since then yellow purulent discharge. Wasn't present at time of change. Not tender.
Examination	T 36.6, surrounding skin not inflammed, thick yellow discharge at opening.
Comment	Swab taken, FLucloxacillin, MR Wright will let DNs know today.
Medication	Antacid And Oxetacaine Oral suspension *150 ml 10ML FOUR TIMES A DAY*

	Antacid And Oxetacaine Oral suspension *150 ml 10ML FOUR TIMES DAILY* Artificial Saliva Gel *100 gram Apply as required* Lansoprazole Orodispersible tablets (Gastro-Resistant) 30 mg *56 tablet 1 Tab Daily* Zopiclone Tablets 3.75 mg *14 tablet ONE TO BE TAKEN AT NIGHT* Flucloxacillin Oral solution 250 mg/5 ml *280 ml ONE 10ML SPOONFUL TO BE TAKEN FOUR TIMES A DAY FOR 7 DAYS*
History	Reviewed medication. Has stopped a lot since July. BP 126/78. Atenolol and amlodipine stopped. Meds updated to reflect what he is taking now. Sodium bicarbonate and macrogol - had supply at home. Acid taste in mouth when having feed - lansoprazole 30mg od and antacti/oxetaine started.
	Has sertraline at home. Plans to restart. Not seeping well. Requesting trial of sleeping medication to see if helps. Zopiclone 3.75mg 1 or 2 tabs at night issued. Will make appt for review if needed.
Test Request	Wound Swab (C&S) #1 - *Completed*

28/11/2019 17:01	Mrs Angela Farrell at Special Request
Comment	Oxetacaine
27/11/2019 15:50	Dr Frances Chambers at Data Entry
History	SR
Medication	Water For Injection Injection 5 ml/amp *20 ampoule TO BE USED AS DIRECTED*
27/11/2019 11:18	Mrs Trisha Jones at Rutland Surgery
Comment	D/N req water for injection 5ml can this be added to repeats please
21/11/2019 12:15	Dr R Dale at Special Request
Additional	
21/11/2019 11:30	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	morphine mst, lansprazole, lactulose
14/11/2019 13:26	Dr R Dale at Special Request
Medication	Nutrison Energy Multi Fibre Liquid *19000 ml TO BE USED AS DIRECTED*
14/11/2019 11:18	Mrs Angela Farrell at Special Request
Comment	Nutrison energy multifibre reg by nutricia as per deitician they have have delivered 10 packs req 14 packs for 19/11/2109
06/11/2019 13:11	Dr Alison Cordiner at Rutland Surgery
History	SR
Medication	Morphine Sulfate Oral solution 10 mg/5 ml *200 ml 2.5ML TO 5ML TO BE TAKEN WHEN REQUIRED FOR BREAKTHROUGH PAIN.* Morphine Sulfate Sachets 30 mg *120 sachet TWO TO BE TAKEN TWICE A DAY*
05/11/2019 17:26	Mrs Angela Farrell at Special Request
Comment	Oromorph/Mst 30mg satchets
01/11/2019 11:21	Dr R Dale at Phone Encounter
History	Sore throat, cough, some purulent sputum. Pyrexial. Feels like previous infection. Hoarse voice.
Comment	Call back if not settling.
Medication	Phenoxymethylpenicillin Oral solution 250 mg/5 ml *200 ml 10ML FOUR TIMES PER DAY FOR 5 DAYS*
01/11/2019 08:55	Mrs Diane MacLean at Rutland Surgery
Comment	looking for anti-biotics cannot speak sore throat and sore to swollow
30/10/2019 12:11	Dr Frances Chambers at Data Entry

Additional	Medication review done
24/10/2019 12:35	Dr Frances Chambers at Data Entry
History	SR
Medication	Morphine Sulfate Oral solution 10 mg/5 ml *200 ml 2.5ML TO 5ML TO BE TAKEN WHEN REQUIRED FOR BREAKTHROUGH PAIN.*
23/10/2019 16:43	Mrs Trisha Jones at Rutland Surgery
Comment	oromorph
10/10/2019 12:05	Dr Paul Jennings at Special Request
Medication	Lansoprazole Capsules (Gastro-Resistant) 30 mg *28 CAPSULE ONE TO BE TAKEN EACH DAY* Morphine Sulfate Oral solution 10 mg/5 ml *100 ML 5ML TO BE TAKEN WHEN REQUIRED FOR BREAKTHROUGH PAIN.*
10/10/2019 11:51	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	lansoprazole, oral morph
08/10/2019 10:24	Dr Eileen Blackwood at Phone Encounter
History	Spoke to Mrs Wright. Mr Wright in bed asleep. Up most of night. At OP clinic yesterday. Being admitted today as has lost 5kg since last visit.
02/10/2019 11:10	Dr Eileen Blackwood at Telephone Consultation
History	Called, no answer and message left to contact surgery. put in for anothrr phone review in case does not call back.
27/09/2019 14:31	Dr Eileen Blackwood at Special Request
History	Laryngeal Ca. Ordered 100ml of oramorph 10mg/5ml 19/9/19, 11/9/19, 23/8/19. Called. Taking morphine sulfate sachets 20mg 2 sachets twice daily (40mg bd) and 5mg of breakthrough 7 times a day (35mg). Pain in throat/neck. Worse since biopsy 9/9. Has hospital appt coming up. Change morphine sulfate sachets to 30mg sachet, 2 sachet bd (60mg bd) and increase oramorph 10mg/5ml to 5ml as reqrueid for breakthrough. Discussed side effects. Confusion. No nausea. Has antiemetic if needed. BO with laxative. Phone rv 2/10/19.
Medication	Morphine Sulfate Oral solution 10 mg/5 ml *100 ML 5ML TO BE TAKEN WHEN REQUIRED FOR BREAKTHROUGH PAIN.* Morphine Sulfate Sachets 30 mg *120 sachet TWO TO BE TAKEN TWICE A DAY*
26/09/2019 16:49	Mrs Carol Anne Boyle at Special Request
Comment	Oromorph MST has been increased to 40 in the morning and night needs more
19/09/2019 14:08	Dr Martin Jennings at Special Request
Comment	Issued.
19/09/2019 12:08	Mrs Angela Farrell at Special Request
Comment	Oral Morphine/Antacidi/Lactulose/ also req Lansoprazole be changed back to tabs as oral is making him feel sick
18/09/2019 19:05	Dr Eileen Blackwood at Data Entry
History	Hosp d/c lette states takign sertraline tabs. Natalie checked with Colin, actually takin FLuoxetine 10mg/5ml, 5ml daily - issued.
11/09/2019 12:57	Dr Martin Jennings at Special Request
Additional	
11/09/2019 11:56	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	oral morphine
03/09/2019 16:14	Dr R Dale at Data Entry
History	Wife states script not needed.

03/09/2019 15:50	Dr R Dale at Data Entry
History	Hospital letter. NG tube has come out and does not want it replaced.
02/09/2019	Dr Elizabeth Rainey at Rutland Surgery
History	SR
Medication	Lactulose Solution 3.1-3.7 g/5 ml *500 ML 10-20 ml Twice daily*
30/08/2019 16:50	Mrs Diane MacLean at Rutland Surgery
Comment	lactulose as per mcmillan nurses
29/08/2019 12:16	Dr R Dale at Special Request
Additional	
28/08/2019 17:48	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	oromorph
23/08/2019 10:26	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	morphine sulfate oral solution 10mg
12/08/2019 11:52	Dr Eileen Blackwood at Data Entry
History	Using 5ml over 24 hours of morphine sulfate 10mg/5ml 2.5ml as required for breakthrough pain. Also on morphine sulfate sachets 40mg bd. Continue on current regimen. Note with prescription asking him to let us know if starts needing more oramorph
09/08/2019 12:54	Dr Eileen Blackwood at Special Request
History	Please ask him how much oramorph he is taking each day to work out whether twice daily dose should be increased.
08/08/2019 15:42	Mrs Angela Farrell at Special Request
Comment	Loperamide/MST/Oramorph
01/08/2019 12:50	Dr R Dale at Special Request
Medication	Fortisip Compact Liquid Feed (Neutral) Milkshake Style *16500 ml 125ML (ONE BOTTLE) TO BE TAKEN ONCE DAILY*
01/08/2019 11:18	Mrs Angela Farrell at Special Request
Comment	See req in script tray
01/08/2019 10:18	Dr Martin Jennings at Special Request
Comment	Issued.
31/07/2019 15:27	Mrs Trisha Jones at Rutland Surgery
Comment	oral morph, antacidi, floxetine
31/07/2019 14:38	Sister Maureen Costello at Rutland Surgery
Medication	Micropore Surgical tape 1.25 cm x 5 m *3 tape TO BE USED AS DIRECTED*
30/07/2019 09:00	Mrs Angela Farrell at Data Entry
Comment	Pt tel had to cancel appt as he has appt at QEUH throat had swollen up and getting tube back in
10/07/2019 10:44	Dr Eileen Blackwood at Rutland Surgery
Follow up	(diary entry deleted) (Not Known) (diary entry deleted) (Not Known)
KIS	Special patient note Laryngeal cancer Radical Radiotherpay completed 10/5/19 NJ tube came out and declined reinsertion. Under care of Ms Anne Hitchings, ENT Consultant. ENT contact number 1041 232 7565 Lives with daughter and at times iwth wife.

Additional	Key Holder Sandra Wright Send key information summary (KIS) upload Consent for key information summary upload

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10/07/2019 09:56	Dr Eileen Blackwood at Rutland Surgery
History	Declined reinsertion of NJ tube the following Monday when saw Miss Hitchings 14/6. Felt Beatson didn't care about himw hen tube first came out so has decided not to have reinserted. Only had Morphine sulfate sachet 20mg bd, oramorph 10mg/5ml 2.5ml - 6 to 8 times a day, FLuoxetine liquire, Atenolol liquid since mid June. Taking ensure and some soft food. Reports has put on some weight since tube came out. next ENT appt 8/2019. Definitely does not want another NJ tube in. Still pain in throat. Oramorph helps when takes it. Sandra, wife has been in hospital with UTI/AKI. May be discharged today. Bought new car.
Medication	Amlodipine Oral Solution, Sugar Free 5 mg/5 ml *150 ml 5ML DAILY*
Examination	O/E - BP reading Blood pressure reading 141/100 mm Hg 143/100
Medication	Metoclopramide Hydrochloride Oral solution Sugar Free 5 mg/5 ml *300 ML TWO 5ML SPOONFULS TO BE TAKEN THREE TIMES A DAY* Morphine Sulfate Sachets 20 mg *120 sachet TWO SACHETS TO BE TAKEN TWICE A DAY*
Comment	Amlodipine and Metoclopramide changed to liquid solution. WIll try crushing clopidogrel. Rest of oral meds stopped, not had in about 2 months. Taking 30 - 40mg of oramorph a day in addition to morphine sulfate sachet 20mg bd. Increase Morphine sulfate sachets to 40mg bd and continue to use oramorph as required for breakthrough. Has antiemetic and laxatives. Forgot to take weight today - RV in 2 week GP and PN - BP and weight, sooner if required. consent for EKIS.

08/07/2019	Mrs Diane MacLean at Rutland Surgery
Comment	sertraline

04/07/2019 16:47	Miss Emma Robertson at Special Request
Comment	Oromorph and Oxetacaine

01/07/2019 09:35	Ms Hilary Campbell at Rutland Surgery
Comment	Over-ordering salbutamol inhalers as 2 issued each month since changed over to weekly dispensing; phoned Gilbrides (427 1676) and they order medication for him, so I have amended quantity of salbutamol inhaler to one only as this will save excess supply. Gilbrides will speak to Mr Wright's wife who picks up the medicaton and check if one inhaler is sufficient for a month, and if using more,the quantity can be changed back to two inhalers.

28/06/2019 13:59	Dr Martin Jennings at Special Request
Comment	MST sachets restarted at 20mg BD as per ENT.

27/06/2019 17:39	Mrs Angela Farrell at Special Request
Comment	See hospital letter in script tray

21/06/2019 11:58	Dr R Dale at Special Request
Additional	

20/06/2019 16:49	Mrs Trisha Jones at Rutland Surgery
Comment	oromorph , oxetacaine

14/06/2019 16:41	Dr R Dale at Rutland Surgery
History	Call from Elaine Ross, Head and Neck cancer nurse. Attended today. Was offered appointment on Monday for re-insertion of tube but not interested. Not taking medication. Very poor oral intake. Persuaded him to take Oramorph (300ml given) and oxetacaine and antacids. Has been given appointment next week.
Comment	Had a look at drug liist. Not a lot of liquid alterantives. Try changing seertraline to fluoxetine liquid as not taking it at present.
Medication	Fluoxetine Hydrochloride Liquid 20 mg/5 ml *70 ml 5ML OD*

12/06/2019 11:30	Dr Martin Jennings at Rutland Surgery
	Spoke with patient. Getting fed up with feeling that he is being told contradictory things by different health care profreesionals - esp regarding NJ tube. Also struggling to get in contact directly with all nurse specialists. Managing to

History	swallow liquids only. No solids. As a result wants to 'go it alone'. Has stopped taking morphine - wasn't particularly helpful for pain. Only thing he is taking is paracetamol and lansoprazole - asking for further script. Has apt to see miss Hitchings on Friday to discuss issues. I have sugested she is the boss of H&N cancer MDT so he should listen to her. Advised surgery here for help and support with meds and way he is feeling. He is going to come back to see Anne Henderson next week and can see GP as required.
12/06/2019 11:30	Sister Anne Henderson at Rutland Surgery
Examination	Blood pressure reading 128/78 mm Hg
Comment	O/E - BP reading Appointment to see Martin. Discussed events leading to NJ tube falling out and subsequent reviews etc. Weepy and still feels not wishing any input. Has an appointment with ENT consultant on Friday and may consider other options available. May still go to Portsmouth. Not taking any tabs over last 2 weeks due to swallowing issues. - was previously crushing and putting down tube. Bp normal Discussed he can pop in to see me if wishing.
11/06/2019 10:20	Sister Anne Henderson at Phone Encounter
Comment	Call from Annemarie Brown nurse from ENT/Max Fax 0141 232 7565. Colin presented at clinc this morning to return all his tabs and equipment. Initially really angry regarding the service he has been given generally since diagnosis. Declining any sort of input. Family are aware of his decisions. He has arranged all finances and funeral costs for himself and wife. Continues to tolerate tea and water only. Colin plans to attend surgery today to arrange appointment. Further details are available in portal.
10/06/2019 14:25	Ms Hilary Campbell at Data Entry
Comment	I had looked into liquid formulations of medications which could be administered via NG tube, however this is no longer in situ so may not be relevant given the last entry on EMIS. I have left an envelope with information from NEWT guidelines on possible options for some of his medication, should this be required on a day when I am not in the practice.
10/06/2019 09:51	Mrs Carol Anne Boyle at Rutland Surgery
Comment	Gilbrides Copland Road Colin has not collected his boxes for a few weeks will contact patient / tried to phone no reply
04/06/2019 18:06	Sister Anne Henderson at Phone Encounter
Comment	Spoke to Colin. Denies having any suicidal thoughts and not wishing any medication. Plans to go down south to visit friends. Happy to contact us if required
04/06/2019 12:12	Dr R Dale at Phone Encounter
History	Spoke to Colin. Tube came out last week. Was not keen on going into hospital and blocking a bed whilst waiting for a date to put tube back in. No nutrition for 4 days. Not been able to take medication apart from occasional paracetamol and oromorph. Pain worse. Thinks hospital do not think feeding tube is important so why should he be bothered. Agrees to come along to surgery nad going to contact wife.
04/06/2019 11:59	Dr R Dale at Phone Encounter
History	Mirelle, enteral feeding team. Had contacted patietn re tube. He expressed suicidal thoughts and plans.
31/05/2019 16:06	Dr Martin Jennings at Docman
Comment	See letter from enteral feeding dietician.
Medication	Ensure Shake Oral Powder Sachets (Banana) 57 gram sachet *56 sachet 4 ENSURE SACHETS TO BE TAKEN DAILY* Ensure Shake Oral Powder Sachets (Strawberry) 57 gram sachet *56 sachet FOUR SACHET TO BE TAKEN DAILY*
30/05/2019 16:47	Dr Martin Jennings at Special Request
Comment	Morphine.
30/05/2019 12:13	Dr R Dale at Special Request
Additional	
30/05/2019 11:01	Mrs Trisha Jones at Rutland Surgery
Comment	sertraline

28/05/2019 17:19	Mrs Diane MacLean at Rutland Surgery
Comment	Tracy Jackson McMillan nurse phoned to say she has increased Mr Wrights MST to 50mg bd
28/05/2019 15:32	Dr Eileen Blackwood at Data Entry
History	CAll back from Ron, ENT Reg. Mr Wright to attend Ward 11B, ENT tomorrow 29/5/19 at 2pm. Information passed to Mrs Wright. Family will take up
28/05/2019 15:03	Dr Eileen Blackwood at Data Entry
History	Note message below. Tried calling Eilidh Patterson, no answer. D/W Mrs Wright. Felt choking sensation this morning and pullsed NJ tube out. Hx of laryngeal cancer. Radiotherapy completed 10/5/19. Takign tea and milk and a little fruit. Passing urine. D/W on call Oncologist. Would be replaced by ENT at QEUH since radiotherpay completed. D/W ENT on call (07846684400), likey admit tomorrow for reintroduction of tube. She will phone back with details once finds out plan.
28/05/2019 14:41	Mrs Diane MacLean at Rutland Surgery
Comment	451-6858 Elidh Patterson entral feeding nurse - scropped down tube has dislodged - needs done at hospital (beatson)
23/05/2019 17:01	Dr Martin Jennings at Special Request
Comment	See hand written note from head and neck CND. Note some changes already made to make dispersible/liquid. I will ask PSP to look at liquids for all meds. Tried to call patient to advise, but ringing through to VM.
Medication	Morphine Sulfate Sachets 20 mg *120 sachet TWO TO BE TAKEN TWICE A DAY* Antacid And Oxetacaine Oral suspension *150 ml 10ML QID*
22/05/2019 10:25	Dr Anne Marie Foy at Telephone Consultation
History	spoke to Gilbrides to confirm changes to medication as some drugs changed to dispersible form.
21/05/2019 14:18	Dr Eileen Blackwood at Special Request
Medication	Metoclopramide Hydrochloride Tablets 10 mg *84 tablet ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED*
20/05/2019 14:50	Mrs Angela Farrell at Special Request
Comment	Morphine Sachets /Metoclopramide/Oramorph
17/05/2019 12:44	Mrs Diane MacLean at Rutland Surgery
Comment	See slip in tray
16/05/2019 12:10	Dr Tien-On Chan at Rutland Surgery
History	sr sertraline- can see recent admission with oncology. **Written to make appt to discuss his loperamide usage-see prev entries- Has missed gastro appts**
15/05/2019 16:58	Dr Anne Marie Foy at Data Entry
History	admitted from oncology clinic as poor oral intake. some medication changes/ bp meds reduced. analgesia increased.
15/05/2019 15:08	Mrs Trisha Jones at Rutland Surgery
Comment	sertraline
17/04/2019 10:32	Dr Martin Jennings at Special Request
Comment	Note on script TMA for review as below.
16/04/2019 17:11	Mrs Diane MacLean at Rutland Surgery
Comment	sertraline
16/04/2019 14:31	Mrs Diane MacLean at Special Request
Comment	Loperamide 2mg

05/04/2019 17:09	Dr Eileen Blackwood at Data Entry
History	Invite for eKIS/ACP - laryngeal cancer.
02/04/2019 13:16	Dr Tien-On Chan at Data Entry
History	sr morpine sulphate
02/04/2019 12:46	Mrs Angela Farrell at Rutland Surgery
Comment	morphine sulfate
26/03/2019 12:39	Dr R Dale at Special Request
Additional	
25/03/2019 14:43	Mrs Diane MacLean at Rutland Surgery
Comment	sertraline 100mg
25/03/2019	Mrs Carol Anne Boyle at Special Request
Comment	Morphine Sulphate
14/03/2019 13:07	Dr Martin Jennings at Special Request
Medication	Morphine Sulfate Oral solution 10 mg/5 ml *100 ML 2.5ML TO BE TAKEN WHEN REQUIRED FOR BREAKTHROUGH PAIN.*
14/03/2019	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	oromorph
12/03/2019 16:45	Dr Eileen Blackwood at Data Entry
History	Takign Oramorph 10mg/5ml 5mg/2.5ml qid. Not added to repeat yet - issued after biospy. Wait and see analgesia requirements.
12/03/2019 14:22	Dr Eileen Blackwood at Data Entry
History	New diagnosis. Squamous cell carcinoma of larynx. T2/3. Discharge script from biospyand scope - for radiotherapy. For repeat CT chest in 3 months. Discharged on paracetamol 2 tab qid and oramorph liquid 10mg/5ml four times daily - please check if needs oramoprh and how many mls he is taking each time. Coded. Invite for ACP/eKIS.
11/03/2019 14:50	Mrs Carol Anne Boyle at Rutland Surgery
Comment	see letter in tray looking for paracetamol
05/03/2019 08:52	Mrs Diane MacLean at Rutland Surgery
Comment	Discuss DNA when bowel screening when next seen
21/02/2019 11:19	Dr Martin Jennings at Special Request
Comment	Issued.
20/02/2019 16:54	Mrs Carol Anne Boyle at Rutland Surgery
Comment	sertraline 100mg
06/02/2019 09:26	Dr Martin Jennings at Rutland Surgery
History	Left sided dull headache for ~ 4 months. Assoc with hoarseness, left sided dyphagia and odynophagia and altered sensation left side of face. Missed ENT because of nephews murder trial. No change in vision/jaw claudication.
Examination	Dry mouth. Left tonsil larger than right. No significant other abnormality. No tender LNs. No scalp tenderness.
Comment	Re refer ENT urgently. Try difflam throat spray. Usual analgesia.
Medication	Benzydamine Hydrochloride Spray Sugar Free 0.15 % *1 SPRAY USE 4-8 SPRAYS ONTO AFFECTED AREA EVERY 90 MINUTES TO 3 HOURS*
05/02/2019 15:36	Sister Anne Henderson at Phone Encounter
	Telephone triage - as below. History of migraines and headaches, but over last

Comment	week has had a constant headace over left temple. Also intermittant numbness of left face for months. Headache relieved slightly with analgesia but not totally. Also c/o neck pain for months. No photophobia, loss of power to limbs, no speech probs or visual disturbance. Tends to vomit fairly regularly but feels this has worsened. No blood present. D/w GP. Appointment for tomorrow am with worsening statment
05/02/2019 15:29	Mrs Angela Farrell at Data Entry
Comment	headchaes and one side of face numb for few months - been constant for past week. tel 07783349366
31/01/2019 12:56	Dr R Dale at Special Request
Additional	
31/01/2019 10:53	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	sertralione 100mg
24/01/2019 12:31	Dr Tien-On Chan at Data Entry
Additional	Medication review done
23/01/2019 16:50	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	sertaline
22/01/2019 14:26	Dr Eileen Blackwood at Telephone Consultation
History	Down for prebookable tel appt. Note below re loperamide use and further Gastro DNA. Number not recognised, unable to leave message. Send letter askign to make appt. Thanks.
16/01/2019 16:30	Dr Tien-On Chan at Data Entry
History	sr loperamide- requested few prescriptions of- noted May entry re: bowels and referred but DNA gastro appt again. Ask to attend please
16/01/2019 15:20	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	loperamide
03/01/2019 13:26	Dr R Dale at Special Request
Additional	
03/01/2019	Mrs Natalie O'Sullivan at Rutland Surgery
Comment	sertaline 100mg
03/12/2018 15:38	Dr Frances Chambers at Data Entry
History	DNA endoscopy
30/11/2018	Dr R Dale at Special Request
Additional	
29/11/2018	Mrs Diane MacLean at Rutland Surgery
Comment	sertraline 100
05/11/2018 11:17	Dr R Dale at Special Request
Additional	
02/11/2018	Mrs Diane MacLean at Rutland Surgery
Comment	sertraline
26/10/2018	Dr Eileen Blackwood at Rutland Surgery
History	6 week hx of hoarseness. Pain in lower R side of throat. No dyspahgia. Heartburn controlled with lansoprazole. Long hx of cough productive of little green sputum. Smokes 20-25 roll ups/day. Spirometry 2017 - asthma. On slabutmaol and fostair. No weight loss. HAs appt for colonoscopy 19/11/18 but goitn to call and postpone because nephew's murder trial starts the same day.

Examination	Apyrexial, sats 98R, RR 16, p 78r, oropharynx - back of tongue brown coating, no other lesions, no cerival lymphadenopathy, chest clear, no added sounds. AE to bases
Comment	Imp - 6 week hx of hoarseness - Refer ENT. Nystatin in case of oral thrush. CXR.
Medication	Nystatin Oral suspension 100,000 units/ml *30 ml 1ML TO BE TAKEN FOUR TIMES A DAY*

08/10/2018	Dr R Dale at Special Request
History	Review before next prescription.

08/10/2018	Mrs Diane MacLean at Rutland Surgery
Comment	sertraline

10/09/2018	Dr Simon Tolmie at Rutland Surgery
History	Sr sertrline - message on script to make review apt.

07/09/2018	Miss Emma Robertson at Special Request
Comment	Setraline

05/09/2018 11:34	Dr Jennifer McEwen at Externally Entered
History	srx loperamide + ibuprofen gel
Comment	issued

04/09/2018	Mrs Diane MacLean at Rutland Surgery
Comment	loperamide & ibuprofen cream

24/07/2018	Dr R Dale at Special Request
Additional	

24/07/2018	Mrs Diane MacLean at Rutland Surgery
Comment	sertraline

24/06/2018	Dr Eileen Blackwood at Data Entry
History	Hb 135, ferr 26 - start course of ferrous fumarate. Has been referred to colorectal clinic.
Medication	Ferrous Fumarate Tablets 210 mg *168 tablet 1 Tab 3 times daily*

22/06/2018	Dr R Dale at Rutland Surgery
History	Flashbacks to nephews death. Poor sleep, keeps waking up. Arthritis in right knee worse at present, esp difficulty getting up from kneeling. Ibuprofen 5% did not help. Also has back pain.
Examination	Full rOm of knee, no crepitus, no joint laxity.
Comment	Short course of zoiclone to use sparingly.
Medication	Ibuprofen Gel 10 % *50 gram APPLY UP TO THREE TIMES DAILY* Zopiclone Tablets 7.5 mg *7 TABLET ONE TO BE TAKEN AT NIGHT*

20/06/2018	Sister Maureen Costello at Rutland Surgery
Test Request	Full Blood Count - *Completed*, Ferritin - *Completed*

18/06/2018	Dr Eileen Blackwood at Special Request
History	ASked TMA for rv

18/06/2018	Mrs Carol Anne Boyle at Special Request
Comment	Sertraline

13/06/2018	Mrs Trisha Jones at Rutland Surgery
Comment	Letter sent to pt re change of appt with Dr Chambers from 20/06 to Friday 22/06 @ 3.30pm

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22/05/2018	Dr Eileen Blackwood at Rutland Surgery
	Nephew was murdered in Feb. Colin found him in his flat. Had been stabbed.

History	People who did it have been caught. Unable to get images out his mind. Sleep disturbed. Mood low. No thoughts of self harm but sometimes wishe he could leave. Lives with wife who is ill. Also helps daughter. Grandson with autism ha sbeen struggling to cope with relative's death. HAs been getting in trouble with police. Stress. Low mood. On sertrlaien 150mg od. Drinking 4 cans of beer/night. Discussed counselling - declined. Increase sertraline to 200m god an drv in 4 weeks.
Medication	Sertraline Hydrochloride Tablets 100 mg *56 TABLET TWO TABS DAILY ISSUE WEEKLY*

History	Cotninues to pass bloody motions. Mixture of black tar and fresh blood. Declined colonoscopy last year. Occasional crampy abdominal pain. BO ~ 3 x day. No heartburn. No weight loss. Couldn/t manage klean prep. Gastro suggested PIcolax. Asked if he wanted rereferred - feels like he could manage test now. Reoprts too much going on last year
Examination	Abdo soft, nontender, no masses, BS normal. PR not done today.
Comment	Check FBC, ferritin. Refer back to GAstro.
Test Request	Full Blood Count - *Requested*, Ferritin - *Requested*

History	Still has pain in L shoudler. radiating down arm. Gabapentin 300mg tid helped but has run out. Stretched out supply DId not self refer to physio as report too much going on last year.
Examination	Nontender, no deformity, abduction 100d, felxion 90d, ext 30d, internal and extarenal rotation limited by pain.
Comment	Restart gabapentin and self refer physio. Rv in 4 w

18/05/2018 Dr R Dale at Special Request
Additional

18/05/2018 Mrs Margaret Fraser at Special Request
Comment Sertraline 50 & 100

01/05/2018 Dr Rebecca Brown at Rutland Surgery

Comment	SR loperamide & pregabalin. Allow small supply - TMA if not settling. Not on pregabalin - not issued
Medication	Loperamide Hydrochloride Tablets 2 mg *30 TABLET TWO TO BE TAKEN AT ONCE THEN ONE TO BE TAKEN AFTER EACH FURTHER LOOSE MOTION FOR UP TO 5 DAYS (MAX 8 TABLETS PER 24 HOURS)*

30/04/2018 Mrs Diane MacLean at Rutland Surgery
Comment pregabalin & loperamide

26/04/2018 Dr R Dale at Special Request
Additional

25/04/2018 07:54 Dr Frances Chambers at Data Entry
History SR fostair - added rpts

25/04/2018 Mrs Margaret Fraser at Rutland Surgery
Comment sertraline 100 + 50 can it be labelled dispence weekly - last issue 23/4 cancelled (unsigned)

24/04/2018 Mrs Trisha Jones at Rutland Surgery
Comment pink inhaler

23/04/2018 Dr R Dale at Special Request
History See notes below - COME IN FOR REVIEW.

20/04/2018 Mrs Diane MacLean at Rutland Surgery
Comment sertraline both strenghts

23/03/2018 Dr R Dale at Special Request
Additional

23/03/2018	Mrs Margaret Fraser at Special Request
Comment	Sertraline 100 & 50 mg
26/02/2018	Dr R Dale at Special Request
Additional	
23/02/2018	Mrs Margaret Fraser at Special Request
Comment	gabapentin, ibuprofen gel, loperamide, anusol, fostair, back cream
23/02/2018	Dr R Dale at Special Request
History	Not seen since September. Must come in for review.
23/02/2018	Mrs Margaret Fraser at Special Request
Comment	sertraline both strengths
29/01/2018	Dr R Dale at Special Request
History	Come in before next prescription.
26/01/2018	Mrs Diane MacLean at Rutland Surgery
Comment	sertraline both strengths
11/01/2018	Dr R Dale at Data Entry
History	DNA GI clinic.
03/01/2018 07:31	Dr Frances Chambers at Data Entry
History	SR sertraline, DNA'd Brand St Sept. script done 1/12 and note to make appt review
Medication	Sertraline Hydrochloride Tablets 100 mg *28 tablet ONE TO BE TAKEN EACH DAY* Sertraline Hydrochloride Tablets 50 mg *28 tablet ONE TO BE TAKEN EACH DAY*
29/12/2017	Mrs Trisha Jones at Rutland Surgery
Comment	sertraline
19/12/2017	Dr R Dale at Special Request
Additional	
18/12/2017	Mrs Diane MacLean at Rutland Surgery
Comment	loperamide, gabentin & ibuprofen gel
04/12/2017	Dr Anne Marie Foy at Data Entry
Additional	Medication review done
01/12/2017 13:22	Dr Frances Chambers at Data Entry
History	DNA endoscopy
03/11/2017	Dr R Dale at Data Entry
History	Should still have 4 weeks left of last prescription.
03/11/2017	Mrs Trisha Jones at Rutland Surgery
Comment	sertraline 50mg & 100mg
23/10/2017	Ms Hilary Campbell at Data Entry
Comment	Rep.presc. monitoring NOS Quantity of rosuvastatin aligned to 28d supply. Contacted Gilbrides to clarify what dose of Doxazocin they are dispensing and it is a total daily dose of 16mg daily (two in the morning and two at night). I have amended repeat Rx instructions accordingly.
09/10/2017	Dr R Dale at Special Request

Additional	
06/10/2017	Mrs Diane MacLean at Rutland Surgery
Comment	sertraline both strenghts
03/10/2017	Dr R Dale at Data Entry
History	DNA CPN.
20/09/2017	Dr Eileen Blackwood at Rutland Surgery
History	Pain in shoulder and L arm imrpoved with gabapentin 100mg tid but not fully resolved. Movement imrpoved.
Examination	Abduction 70d, felxion 70d. rotation is easier. FROM of neck.
Comment	Plan - increase gabapentin to 300mg tid. Not self referred to physio yet, encouraged to do so. HAs endoscopy and colonoscopy appt in October. HAd to cancel Brand St appt because of abdo pain but is being sent out another. Review in 1 month.
Medication	Gabapentin Capsules 300 mg *84 capsule ONE TO BE TAKEN THREE TIMES A DAY*
20/09/2017	Sister Anne Henderson at Rutland Surgery
Examination	Blood pressure reading 118/62 mm Hg
Comment	O/E - BP reading HT - bp previously elevated. Normal today rpt at mid review. Discussed bowel screening - declining
22/08/2017	Dr Eileen Blackwood at Rutland Surgery
History	6 month hx of pain in L shoulder, radiates down to forearm. Tingling in forearm and hand. Has been getting worse over past 2 months. Now constant. Keeps him awake at night. Had to give up motability car, bought BMW, manual, thinks symptoms worse since needing to change gears. No chest pain. Attended A+E 21/6/17 with chest pain and L arm pain - ECG normal. Troponin negative.
Examination	FROM of neck, back nontender, slightly tender around L shoulder capsulse, abduction 50d, flexion 50d, ext 30d, external rotation painful, internal rotation normal. Tone, pwer, reflexes ok.
Comment	Imp - rotatot cuff injury causign nerve impingement. Seld refer physio, given nhs inform MSK web address to do exercises at home. start gabapentin 100mg tid, review in 1 month.
Medication	Gabapentin Capsules 100 mg *84 capsule ONE TO BE TAKEN THREE TIMES*
History	BP ok today - comign for repeat in 1 month.
	Attended gastro last week, for endoscopy and colonoscopy. sounds like given lactulose to use- prefers this to other bowel clearing preparation.
	HAs appt for BRand St. Denies any ongoing suicidal ideation at the moment. Didn't pick up script 7/7 -last sertraline script issued 14/8 for 2 months.
22/08/2017	Mrs Carol Anne Boyle at Rutland Surgery
Examination	Blood pressure reading 128/78 mm Hg
Comment	Will recheck BP 1/12
Result	O/E - BP reading
17/08/2017	Mrs Angela Farrell at Data Entry
Comment	Gilbrides tel Sertraline both strenghts 07/07/2018 not dispenesd will cancel
14/08/2017	Dr R Dale at Special Request
Additional	
11/08/2017	Mrs Carol Anne Boyle at Special Request
Comment	Sertraline both strenths
08/08/2017	Sister Anne Henderson at Rutland Surgery
Result	O/E - pulse rate NOS 88
Examination	O/E - pulse rhythm regular
Social	Chron dis mngt ann rev compltd
History	Stroke/CVA annual review

	Current smoker
	Rolls own cigarettes
Result	Cigarette consumption 25
History	Smoking cessation advice
	Alcohol intake above rec limit
Result	Alcohol units per week 84
History	Diet poor
	GPPAQ physcl act ind: inactive

08/08/2017	Sister Anne Henderson at Rutland Surgery
Examination	O/E - weight, 81.1 Kg
	Body Mass Index, 30.52
	Blood pressure reading 156/92 mm Hg
Comment	O/E - BP reading Annual reviews - awaiting Brand Street assessment - still has ongoing suicidal ideation. Losing mobility car but has managed to get a BMW for a good price so will be mobile. bp elevated rpt within next few weeks - coming to see GP.
Test Request	Glucose - *Completed*, Urea and Electrolytes - *Completed*, Liver Function Tests - *Completed*, Lipid profile (inc. HDL) - *Completed*

24/07/2017	Sister Anne Henderson at Data Entry
Comment	Did not attend - no reason

18/07/2017	Dr R Dale at Data Entry
History	Sertraline prescription was done 7/7/17.

14/07/2017	Mrs Diane MacLean at Rutland Surgery
Comment	sertraline both strenghts

07/07/2017	Dr Eileen Blackwood at Rutland Surgery
History	Here with wife. Very upset. Had PIP medical. Motability being reduced to standard rate. HAs to hand car back within 4 weeks. HAs been told he is fit to go on public transport. Spends most of time in bedroom. Only fgoes out in car. Knows he would not leave house includign to come here fi he did not have car. Also suffers from back pain but main issue is mental health preventing him going out. I do think he would become even more isolated without his car. Has appt with money matters next week. I will do a letter of support.
	Asking to be referred back to psychiatrists. In bedroom most of the time. Poor appetite and poor sleep. Poor concentration. Ongoing suicidal ideation, feeling that it would be better if he wasn't here but no firm plans. Takign sertraline 150mg od. Refer brand st.
	HAs Gastro appt in August 2017 - plans to go.
	Asked TMA for CDM/ASTHMA review.

30/06/2017	Dr R Dale at Special Request
Additional	

30/06/2017	Mr Graeme Thompson at Rutland Surgery
Comment	Sertraline 50 and 100

19/05/2017	Mrs Diane MacLean at Rutland Surgery
Comment	Left message reg script

19/05/2017	Dr Sarah Davidson at Special Request
History	should still have weekly dispense was done for 56 days on 21.4

19/05/2017	Mrs Diane MacLean at Rutland Surgery
Comment	sertraline both strenghts

12/05/2017	Sister Maureen Costello at Rutland Surgery

Comment	Did not attend - no reason
-	-
12/05/2017	Mrs Diane MacLean at Rutland Surgery
Comment	Did not attend - no reason
-	-
05/05/2017	Dr Eileen Blackwood at Rutland Surgery
History	Reports mood much the same. Goes out with wife to shops but stays in car. Spends most of time in room. On sertraline 150mgod. HAppy to stay on this. Not interested in counselling, befriending. No suicidal ideation. Told me about an incident 2 weeks ago - reports some men stole money form his 15 year old autisitc grandson. Knew who they were, got in his car, found, them, knocked 2 of them down and got into a fight with another who had a knife. Got knife off him, regrets not harming and killing this other person. Police came afterward, took statement. Not been charged. Tells me wouldn't mind going to prison. Most alive he has felt in a long time. Encouraged to stay away from trouble. Discussed spiromety. Using salbutamol and fostair - given appt for asthma review with SIster Costello.
-	-
21/04/2017	Mrs Carol Anne Boyle at Special Request
Comment	Sertraline 50 Setraline 100
-	-
29/03/2017	Sister Anne Henderson at Data Entry
Comment	Message left on AM to contact PN regarding results of spirometry. Advised not to be concerned. Please inform regarding asthma diagnosis and arrange appointment
-	-
29/03/2017	Sister Anne Henderson at Data Entry
Comment	Spirometry - ASTHMA DIAGNOSIS - obstruction with reversibility. On B2 and recent fostair. If able to arrange appointment with PN for review. Coded
-	-
20/03/2017	Dr Eileen Blackwood at Rutland Surgery
History	Seen with wife. Situation the same. Spending most of his time in his room. Picking at food. Sleep variable. Denies any thoughts of self harm at the moment. Very worried about PIP application. Reassured that I would give letter of support if needed. Attended lipid clinic - to remain on rosuvastatin 20mg od. Going for spirometry this morning. Need more fostair. Still has rectal bleeding - discusssed again, reason he doesn't want to go is can't take kleen prep - makes him vomit. If could take other laxative would be willing to go for colonoscopy - I will write to colorectal clinic to see if taking large dose of lactulose before procedure would be an alternative? Sertraline issued. Review in 1 month - happy with regular contact - revisit option of CPN, befriender at next visit.
Medication	Anusol Suppositories *12 SUPPOSITORY INSERT ONE NIGHT AND MORNING AND AFTER A BOWEL MOVEMENT*
-	-
06/03/2017	Mrs Angela Farrell at Data Entry
Comment	DNA Bowel screening discuss when seen
-	-
23/02/2017	Mrs Trisha Jones at Rutland Surgery
Comment	sertraline both strengths
-	-
13/02/2017	Dr Eileen Blackwood at Rutland Surgery
History	Here with wife. Requesting more anusol, loperamide. Continuing to have fresh rectal bleeind when moving stools. Has been a problem for years. Also often vomits after eating. No haematemesis. No heartburn, dysphagia, weight loss. No teeth, through out false teeth. not been back to denitst as discussed last time. Can snack on small amounts of food throughout the day. Drinking 4-8 cans of cider a day. DNAd Gastro appt again. Tells me he would not go. Has appt for lipid clinic tomorrow - plans to go to this with wife as it will only be a clinic appt. Mood low. Thoughts of self harm but not acted on them. When asked what thougths were told me he has received a letter stating his DLA will be stopped soon and he will be assessed for PIP. Worried about this, doens't think he could attend any assesment. Reports if he looses benefits has thought about driving down south and doing something to himself. Showed me letter - askign him to apply for PIP - wife will do this for him. Taking sertraline 150mg od. Not sure if hleping. Spending most of time in room and doesn't want to change that. Sleep disturbed but no routine. Wife supportive. Attended psychology last year. Feels psychology, psychiatry, CPN, supprot groups, social groups, coming here is pointless as he has felt like this since brother died 20y ago and can't see it ever changing. Does not want to change antidepressant.
Examination	Abdo soft, nontender, no masses, BS normal.

Comment	Long discussion, Reassured about PIP application. Discussed keeping in touch regularly even if we do not change anything. Encouraged to make appt in 1 month.
Medication	Anusol Plus Hc Ointment *15 gram APPLY TO AFFECTED AREA BD AND WHEN REQUIRED*

27/01/2017 Dr Eileen Blackwood at Special Request
History Asked TMA

27/01/2017 Mrs Diane MacLean at Rutland Surgery
Comment sertraline both strenghts

27/01/2017 Dr R Dale at Data Entry
History DNA GI clinic.

28/12/2016 Dr M F Shields at Special Request
History On 150mg sertaline since oct 2015 - last reviewed mid Oct 16. TMA next time.

28/12/2016 Mrs Angela Farrell at Special Request
Comment Sertraline

22/12/2016 Mrs Angela Farrell at Data Entry
Comment DNA Lipid clinic

19/12/2016 Dr Eileen Blackwood at Rutland Surgery

History	~ 1 year hx of vomiting after eating. Feels slighlty nauseous after eating then vomitins. No haematemesis. No heartburn. Takes lansoprazole 30mg od. Refered in Jan 16 with rectal bleeding. decided not to go for colonoscopy. Discussed at time. Reports rectal bleeding for years. Also passing some mucus. Weight loss. Snacks rather than eats 3 meals a day. Has no teeth, through out false teeth becausewere makign him gag and does not want to go back to dentist. Eats mostly soup, egg. Drinks 4 cans of cider a day.
Examination	O/E - weight NOS 83.3 kg p abdo soft, nontender, no masses, BS normal, declined pr.
Comment	Ongoing rectal bleed, weight loss. Vomiting. Discussed - would like referred back. Plan - refer Gastro/colorectal. trial of metoclopramide. Encouraged to see dentist.
Medication	Metoclopramide Hydrochloride Tablets 10 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY*

History Chol 6.8, On rosuvastatin 20mg. od. Poor diet. Does have quite a lot of fired eggs. Missed appt at lipid clinic during the year. Refer back.

05/12/2016 Dr R Dale at Special Request
Additional

05/12/2016 Mrs Diane MacLean at Rutland Surgery
Comment sertraline both strenghts

04/11/2016 Dr R Dale at Special Request
Additional

03/11/2016 Mrs Angela Farrell at Special Request
Comment Sertraline 100mg and 50mg

03/11/2016 Dr R Dale at Data Entry
History Chol 6.8. On rosuvastatin 20mg. Note poor diet. Discuss ? referral to lipid clinic next time.

01/11/2016 Sister Anne Henderson at Rutland Surgery
Result O/E - pulse rate NOS 96
Examination O/E - pulse rhythm regular
Result General well - being schedule 2
History Stroke/CVA annual review

	Current smoker
	Rolls own cigarettes
Result	Cigarette consumption 25
History	Smoking cessation advice
	Alcohol intake above rec limit
Result	Alcohol units per week 84
History	Diet poor
	GPPAQ physcl act ind: inactive

01/11/2016	Sister Anne Henderson at Rutland Surgery
Examination	O/E - weight, 81.5 Kg
	Body Mass Index, 30.67
Comment	annual stroke - stable. (L) sided weakness persists. Mainly housebound due to anxiety. Declining further counselling or help for this. Still smoking approx 100g/week. Diet poor - tends to snack. Seemingly vomits if has large portions to eat for approx 1 year - seemingly has spoken to GP regarding this. Advised to do so again. Wt down 3 kgs in 1 year.
Test Request	Glucose - *Completed*, Urea and Electrolytes - *Completed*, Liver Function Tests - *Completed*, Lipid profile (inc. HDL) - *Completed*
Additional	Medication review done

24/10/2016	Mrs Carol Anne Boyle at Rutland Surgery
Comment	Called Spirometry 8 month waiting list pt on the list for 20 weeks app will be sent

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19/10/2016	Dr Eileen Blackwood at Rutland Surgery
History	Feeling a bit better than earlier in the year. Still prefers to spend most of his time in the house. Can't tolerate more than 3 people in a room or loud noises. Sleep variable. Appetite ok. Reduced alcohol to 4 cans of cider/day. On sertraline 150mg od. Feels his low mood and agrophobia is related to childhood sexual abuse. Seeing psyhcologist earlier in the year. Appt fell away because of holidays. Reports has had a lot of cousnelling over the year - deceind any more and relxation classes at the moment. Reduced libido and erectile dysfunction. Wrse since started sertraline. Smoker
Examination	O/E - BP reading
	Blood pressure reading 122/78 mm Hg
Comment	Depression, social anxiety. Decliend any counselling, continue sertraline 150mg od. Trial of sildenafil, advised no tot ake within 4 hours of doxazosin.
Medication	Nystatin Oral suspension 100,000 units/ml *30 ML USE 1ML IN THE MOUTH AFTER FOOD FOUR TIMES A DAY, USUALLY FOR SEVEN DAYS*
	Sildenafil Citrate Tablets 50 mg *8 TABLET ONE TO BE TAKEN AS DIRECTED. SLS*

History	1 week hx of tongue inflammed, burning, scrapes white exudate off in morning. Has appt with nurse for annual review in Nov.
Examination	glossitis.
Comment	? oral thrush. Plan - nystatin, review if symptoms persist.

10/10/2016	Mrs Clare Kyle at Rutland Surgery
Comment	flu vacc VCO no c/o
Additional	Seasonal influenza vaccination Sanofi Pasteur N4A291V exp 04/2017 Left Deltoid **(GMS)**

10/10/2016	Dr Eileen Blackwood at Special Request
History	Asked TMA for review of sertraline/mood

07/10/2016	Mrs Diane MacLean at Rutland Surgery
Comment	Sertraline both strengths

30/09/2016	Sister Maureen Costello at Rutland Surgery
Comment	Did not attend - no reason ANNUAL REV

19/09/2016	Mrs Angela Farrell at Data Entry
Comment	Cancelled appt for 5.00 at 4.55

12/09/2016	Dr R Dale at Rutland Surgery
History	Had been using purple inhaler but found they were out of date. Feels breathless esp whe outside. Awaiting ? spirometry. Mood fairly stable with

	sertraline. No problems with medication.
Medication	Fostair Cfc-free inhaler 100 micrograms + 6 micrograms/dose *1 INHALER ONE PUFF TO BE INHALED TWICE A DAY*
29/08/2016	Dr Eileen Blackwood at Special Request
History	Sertraline last issued 12/8/16 - too soon. Asked TMA for review.
26/08/2016	Mrs Trisha Jones at Rutland Surgery
Comment	sertraline100mg &50mg
12/08/2016	Dr R Dale at Special Request
Additional	
12/08/2016	Mrs Trisha Jones at Rutland Surgery
Comment	sertraine 100mg & 50mg
29/07/2016	Mrs Diane MacLean at Rutland Surgery
Comment	sertraline 100mg & 50mg
19/07/2016	Dr R Dale at Special Request
Additional	
19/07/2016	Mrs Diane MacLean at Rutland Surgery
Comment	Loperamide, anusol & algisal back cream
27/06/2016	Dr Eileen Blackwood at Data Entry
History	CXR normal
17/06/2016	Dr R Dale at Special Request
Additional	
17/06/2016	Mrs Angela Farrell at Special Request
Comment	Sertraline 100mg and 50mg
31/05/2016	Dr Eileen Blackwood at Rutland Surgery
History	Long hx of of SOB on exertion, cough, yellow sputum in the morning. Symptoms have gradually got worse this year. Smokes 1.2 ounce of tobacco each day. Comfort. Doesn't feel able to reduce. No chest pain or tightness. Slabutamol helps but usually leaves inhaler downstairs and doesn't got down for it.
Examination	Apyrexial, p 80r, sats 98%, RR 18, throat nad, chest clear, HS 1+2+0
Comment	COPD? Plan - extra salbutamol inhaler issued. Refer spirometry. CXR. Review with results.
History	Decided not to go for colonoscopy - does not want to take enema and worried about risk of bowel perforation. Discussed and tried to reassure but certain he does not want to go ahead. Tells me has been passing fresh blood pr for years. Thinks weight is now steady. GEts relied from Sheriproct supps.
Examination	O/E - weight NOS 81.9 kg Abdo nad, (84.6 kg 09/2015)
Comment	Hb 149 - 04/2015 - on sci store. Discussed risk of missing colorectal cancer - decliend rereferral. Reassured can let me know if changes his mind.
20/05/2016	Dr R Dale at Special Request
Additional	
20/05/2016	Mrs Diane MacLean at Rutland Surgery
Comment	Sertraline both strenghts
17/05/2016	Dr Eileen Blackwood at Rutland Surgery
History	Mood much the same. Low. Thinking about childhood. Taking sertraline 150mg od. Sometimes forgets to take a day but takes most days, issued weekly. UNder stress the past few weeks. Daughter was ill, admitted with gallstones? Was able to drive her to hospital but not able to visit her. Discussed medication

	- prefers to cotninue with ertraline 150mg od. Discharged from psychology - last seen 2/16. Does not want any more psychology input or counselling - doesn't feel talking about things will help. Does not feel up to groups eg Galgael.
Medication	Ibuprofen Gel 5 % *50 GRAM(S) APPLY TO THE AFFECTED AREA UP TO THREE TIMES A DAY*

History	Strained lumbar back a couple of weeks ago. No radiation. No cough or sptuum. No urinary symptoms. No bowel symptoms.
Examination	Lumbar muscles slightly stender, Spinal flexion limited, SLR 50d bailterally, FROM of hips. abdo nad. chest clear, sats 98%
Comment	Muscular strain. Plan - trial of ibugel, advised to keep active.

History	Has been more SOB on exertion over past few weeks. No cough, sputum, chest pain. chest clear, sats 98%. Given another appointment to look into further. **Remember to discuss DNA surgical appt then**

05/05/2016	Dr M F Shields at Special Request
History	again asked TMA - should have ran out last week?

04/05/2016	Mrs Trisha Jones at Rutland Surgery
Comment	sertraline both strengths

11/04/2016	Dr Eileen Blackwood at Data Entry
History	DNA surgical appointment.

29/03/2016	Dr Eileen Blackwood at Special Request
History	Asked TMA for review when next prescription due.

29/03/2016	Mrs Diane MacLean at Rutland Surgery
Comment	sertraline both strenghts

26/02/2016	Mrs Diane MacLean at Rutland Surgery
Comment	Sertraline both strenghs

10/02/2016	Dr Eileen Blackwood at Rutland Surgery
History	Mood improved a bit. Getting out a bit more. Has started counselling. Has reduced alcohol from 8 cans of beer/day to 4 cans/day. Plans to reduce further. Sleep still variable. No thoughts of self harm. Plan - continue sertraline 150mg od and counselling. HAs appt 5/4/16 for colonoscopy

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05/02/2016	Mrs Diane MacLean at Rutland Surgery
Comment	Sertraline both strenghts

29/01/2016	Dr Eileen Blackwood at Special Request
History	Sertlaine last issued 13/1/16 - not issued today.
Additional	Medication review done

29/01/2016	Mrs Diane MacLean at Rutland Surgery
Comment	Sertraline both strenghts

13/01/2016	Dr Eileen Blackwood at Rutland Surgery
History	Mood a bit better. No current suicidal ideation. Still spending most of his time in his room. Missed psychology appt because of sickenss but rearranged for 21/1/16. Still drinking 8 cans of beer/day but feels ready to try and cut down. DEcliend CAT input. Plan - continue with sertraline 150mg od, review in 4 weeks.
Medication	Cinchocaine Hydrochloride And Hydrocortisone Suppositories 5 mg + 5 mg *12 suppository TO BE USED AS DIRECTED*

History	Further episode of fresh pr bleed, quite a lot in pan. Bowels quite loose but doesn't eat regular meals. Some weight loss. HAs been unable ot tolerate prep for colonoscopy in past. Would barium imaging be appropriate?
Examination	Abdo soft, nontender, no masses, BS normal, pr nad.
Comment	Cheriproct supps issued. Refer back to colorectal clinic. Appt for FBC.

Test Request	Full Blood Count - *Requested*
30/12/2015	Dr Eileen Blackwood at Rutland Surgery
History	No further attempts at self harm. No current plans. Still spending most of his time in his bedroom when other family members are visiting. Over past week or so has been drinking 8 cans of beer a day rather than previous 4/day. Taking sertraline 150mg od, now in dosette box. Attended psychhology appt. Not sure if it will help but plans to keep next appt on 8/1/16. Discussed alcohol, declined help, thinks he will be able to cut down himseld. Discussed other support groups, declined. Review in 2 weeks.
16/12/2015	Dr Eileen Blackwood at Data Entry
History	D/W Duty CPN. Mr Wright actually has an appointment with Susan Ralston (clinical psychologist) on Monday 21/12/15 at 3.30pm at Brand St. I don't think he has received notifiction of this. Susan will liase with Duty team if needed on monday - let Mr Wright know
14/12/2015	Dr Eileen Blackwood at Rutland Surgery
History	Immunisations
Additional	Seasonal influenza vaccination Sanofi Pasteur M8179-1 Exp 05/16 **(GMS)**
14/12/2015	Dr Eileen Blackwood at Rutland Surgery
History	On 5th Dec had argument with wife about a very small matter. Drove car to quiet street in Kinning Park - took about 30 5mg diazepam, all his sertraline. Can't remember getting home. Disappointed something didn't happen but denies any more plans to harm himself at the moment but doesn't know how he will reacti to next stressful situation at home. Spending most if his time in his room. Drinks 4 cans of beer at night. Appetite variable. Still waiting for psychology appt. Saw psychiatrists in Spetmeber 15. Long discussion. Restart sertraline 150mg od, weekly dispense. I will contact Brand St ? psychiatry review. Review 30/12/15
Medication	Sertraline Hydrochloride Tablets 100 mg *28 tablet ONE TO BE TAKEN EACH DAY ISSUE WEEKLY* Sertraline Hydrochloride Tablets 50 mg *28 tablet ONE TO BE TAKEN EACH DAY ISSUE WEEKLY* Loperamide Hydrochloride Tablets 2 mg *30 TABLETS TWO TO BE TAKEN AT ONCE THEN ONE TO BE TAKEN AFTER EACH FURTHER LOOSE MOTION FOR UP TO 5 DAYS (MAX 8 CAPS PER 24 HOURS)*
25/11/2015	Dr R Dale at Rutland Surgery
History	Does not feel much imrpovement on sertraline 100mg. No side effects. Lack of motivation, poor appetite. Awaiting appointment with psychology. Letter from lipid clinic to change to rosuvastatin.
Medication	Rosuvastatin Tablets 20 mg *56 tablet 1 Tab Daily* Sertraline Hydrochloride Tablets 50 mg *28 tablet ONE TO BE TAKEN EACH DAY* Sertraline Hydrochloride Tablets 100 mg *28 tablet ONE TO BE TAKEN EACH DAY*
19/10/2015	Dr Eileen Blackwood at Rutland Surgery
History	On sertraline 50mg od for nearly 4 weeks. Initially some nausea but now settled. Mood much the same. Waiting for appt with psychologist. Sleep disturbed, poor appetite. No acitive suicidal plans. Plan - increase sertraline to 100mg od. Review in 4 weeks.
Medication	Sertraline Hydrochloride Tablets 100 mg *28 tablet ONE TO BE TAKEN EACH DAY*
History	Chol 7.8 Poor appetite at moment. Doesn't normally eat fatty food. Drinks 4 cans of Budweiser every day. On atorvastatin 80mg od. Smoker
Examination	O/E - weight 84.6 Kg O/E - BP reading Blood pressure reading 126/84 mm Hg
Comment	Discussed. Refer lipid clinic.
18/09/2015	Dr R Dale at Special Request
History	Request from psychiatry
Medication	Sertraline Hydrochloride Tablets 50 mg *42 tablet ONE TO BE TAKEN EACH DAY*
18/09/2015	Mrs Diane MacLean at Rutland Surgery

Comment	see letter in tray

07/09/2015	Dr R Dale at Data Entry
History	Chol 7.8 despite atorvastatin 80mg. ? refer lipid clinic. Discuss when next in.

07/09/2015	Dr Eileen Blackwood at Rutland Surgery
History	HAs psychiatry appt 16/9/15. Long chat. No suicidal ideation at moment. Doesn't think he'll ever get over childhood sexual abuse. Tells me he was angry and violent as a result when he was a younger man now mostily feels scared. Has been thinking about counsellign and would be willing to try one to one counselling but not group work - will let psychiatrists know. Has bought a bicycle, plans to try and get out and exercise. Grandson with autism and ADHD lives with him and his wife. Supportive and tries his best for him but finds it very tiring. HAs read a lot about ADHD and autism and thinks he has always displayed some of the symptoms himself. Tearful. Long chat. Didn't want to discuss anything else today. Will make a return appt for after psychiatry appt.

02/09/2015	Mrs Clare Kyle at Rutland Surgery
Comment	Fasted for bloods. Says take meds daily as prescribed - all in dosette box. Discussed diet - eats cheese sandwiches as evening meal - discussed and advised to vary diet - dietary advice sheet provided. Smoker - roll ups - has reduced but not keen to stop completely. Advise given.
Test Request	Chol / Triglyceride - *Completed*

26/08/2015	Dr R Dale at Data Entry
History	Chol 7.6, trig 5.8. Lab suggests repeatig on fasting sample. Also check compliance.

19/08/2015	Sister Anne Henderson at Rutland Surgery
Comment	Annual Stroke Review - awaiting psychiatry appointment. Feeling it very difficult coping with past history of abuse. Weepy. Has had suicidal thoughts in past but not current. Due to see Dr Blackwood in September.
Test Request	Glucose - *Completed*, Urea and Electrolytes - *Completed*, Liver Function Tests - *Completed*, Lipid profile (inc. HDL) - *Completed*

07/08/2015	Dr Eileen Blackwood at Rutland Surgery
History	Felt " crazy" with mitrazepine 30mg od. Only took 1 dose. HAs not tolerated several antidepressants - fluoxetine (delusional), trazadone (sedation), sertraline and citalorpam. Still feeling low. Tearful, short tempered, Stays in his room most of the time. Sleep variable. Appetite ok at the moment. FEels it would be best if he wan't here but denies that he would harm himseld. Hx of childhood sexual abuse. Decliend counselling. Long chat. Agreed to referral to psychiatrists for advice on medication. HAs several other longstanding issues he would like to discuss - breathing, backpina. Will makea double appt.

09/06/2015	Dr Eileen Blackwood at Rutland Surgery
History	Mood still low. Short tempered. Unable to tolerate being in a large group. Left fmaily meal out and daughter's 21st birthday early because couldn't stand the noise of people eating. Sometimes feels it would be better if he wasn't here but no plans to harm himself. Sleep disturbed. Appetite variable. Hx of childhood sexual abuse. HAs had a lot of consellign int he past, doesn;t see the point in any more. Supportive disucssion Plan - increase mirtazepin eto 30mg nocte. review in 1 month.
Medication	Mirtazapine Tablets 30 mg *28 tablet ONE TO BE TAKEN AT NIGHT*

08/05/2015	Dr R Dale at Data Entry
History	ESA 113 completed.

27/04/2015	Dr R Dale at Rutland Surgery
History	Has been off anti-depressants for few months, mood has got worse. Arguing a lot, poor concentration, poor sleep.
Comment	Willing to try change to mirtazapine and review 4 weeks.
Medication	Mirtazapine Tablets 15 mg *28 tablet ONE TO BE TAKEN AT NIGHT*

12/03/2015	Dr R Dale at Special Request
Additional	

11/03/2015	Mrs Diane MacLean at Special Request
Comment	Loperamide

11/03/2015	Dr M F Shields at Special Request
History	on cocdamol for many years -> put on repeats
11/03/2015	Mrs Carol Anne Boyle at Special Request
Comment	co codamol
09/02/2015	Dr Eileen Blackwood at Rutland Surgery
History	Here with wife. Mood still low. Long term depression. Started 21 years ago when brother comitted suicide. Brought up memories of childhood sexual abuse by father. Has been on several antidepressants in the past including citalopram and trazodone. Now on fluoxeitne 60mg od. Not sure if they help. Wondering if he should change. Sleep disturbed. Poor appetite. Short temper with grandchildren. Drinking 8 cans of beer at night over the past week. Not suicidal Long discussion - feels referral for counselling or to psychiatry is pointless. Discussed alcohol, feels in control. Disussed change in medication might not make much difference but would like to try. Plan - reduce fluoxetine to 40mg for 2 weeks then 20mg for 2 weeks then change to mirtazepine. Appt for review in 4 weeks.
Medication	Amoxicillin Capsules 500 mg *15 capsule ONE TO BE TAKEN THREE TIMES A DAY*
History	1 week hx of chesty cough productive of green sputum. no haemoptysis. Wroacked himself coughing. No SOB
Examination	T 36.8, sats 98%, RR18, throat and, chest - ronchi and some corase crackels in R upper lung. cehst wall nontender.
Comment	Imp - chest infection Plan - amoxicillin. Review if not settling.
09/02/2015	Sister Anne Henderson at Rutland Surgery
Comment	Immunisations FLU. No CI. VCO. IM (L) deltoid. General advice given
Additional	Seasonal influenza vaccination Sanofi pasteur L8206-1 exp 05/15 **(GMS)**
05/12/2014	Dr Eileen Blackwood at Rutland Surgery
History	Here for med 3. Gets 12 month line for depression. Issued. Also needs fluoxeinte 20mg 3 tabs daily. LAst issued 09/2014. Ran out but has been taking daughter's tabs. Mood stable. Recently lost father in law. Long hx of depression. Spoke about childhood sexual abuse. Declined counselling, had before. Motivated to look after family. No plans to harm himself. Still experiencing diarrhoea nd rectal bleeding. DIscussed - refused investigation.
Additional	eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: Depression; Duration: 05/12/2014 - 05/12/2015)
17/09/2014	Dr R Dale at Rutland Surgery
History	Still has PR bleeding. Mood fairly stable with fluoxetine but still feels low.
Comment	Blood taken for U&E, LFT, GGT, FBC.
21/08/2014	Dr Eileen Blackwood at Rutland Surgery
History	Ongoing intermittent loose stools and fresh and dark rectal bleeding, sometimes small clots. Cancelled colonoscopy appt because vomited with xprep in the past. Still drinkin 6 cans of beer/night. GGT 328.
Examination	O/E - weight 72.9 Kg Abdo nad. Pr not repeted today. stable
Comment	Discussed alcohol intake.. DIscussed risk of missing bowel cancer if rectal bleeding not investigated. Certain he will not take x prep. Agreed I would write back to colorectal clinic - is there alternative laxative preparationa? alternative investigatio - ? CT pneumocolon.
14/08/2014	Dr Eileen Blackwood at Data Entry
History	GGT 328, AST 45. ? alcohol. DNAd colorectal clinic. Referred in July with weight loss, diarrhoea, rectal bleeding. Appointment for review.
11/08/2014	Sister Anne Henderson at Rutland Surgery
Examination	Blood pressure reading 124/80 mm Hg
Comment	O/E - BP reading Hypertension - Rpt bloods as requested. Cancelled colonoscopy appointment as can't tolerate drinking xprep!
Test Request	LFTs, GGT
23/07/2014	Dr Eileen Blackwood at Data Entry
	GGT 438 - increased, alb 31- stable. Transaminases, bilirubin and ALP normal.

History	Drinking more 6 cans of Budweiser a day - discussed at last appt. Awaiting colorectal appt. Repeat LFTs in 1 month.
Test Request	LFTs

22/07/2014	Dr Eileen Blackwood at Data Entry
Additional	Medication review done

18/07/2014	Mrs Diane MacLean at Special Request
Comment	Meds review

10/07/2014	Dr Eileen Blackwood at Rutland Surgery
History	Here for fluoxetine 60mg od. Feels it helps. Father in law died recently, funeral last week. Drinking 6 cans of Budweiser a a time, not every night.
	Appetite reduced, weight loss. Long hx of diarrhoea several times a day. Long hx of fresh and dark rectal bleeding. Investigated in the past. On PPI. Colonoscopy 2008 normal apart from haemorrhoids. Alb 31, GGT 326 23/5/14
Examination	weight 72.8kg (75.1 kg 11/4/14), abdo soft, nontender, no masses, BS present. pr - no haemorrhoids, no rectal masses.
Comment	Weight loss, diarrhoea, rectal bleeding. Discussed - agreed to referral. Refer colorectal clinic. LFT, GGT repeated.

30/05/2014	Dr R Dale at Data Entry
History	Alb 31 (poor appetite), GGT 326 (had been drinking)
Comment	Repeat LFT, GGT in 1-2 months.

23/05/2014	Dr R Dale at Rutland Surgery
History	Ran out of fluoxetine 5 days ago. Admits to drinking again since then. Had been doing well on fluoxetine. Advised to restart on 40mg for 1-2 weeks then increase to 60mg.
	Continues to have PR bleeding but not interested in referral to hospital as has had numerous investigatinos in the past. Tends to have diarrhoea.
Comment	Blood taken for U&E, LFT, GGT, Ca/PO4, CrP, FBC.

17/04/2014	Dr R Dale at Data Entry
History	Albumin 31. Probably due to poor appetite.

11/04/2014	Sister Maureen Costello at Rutland Surgery
Social	Healthy lifestyle program stat

11/04/2014	Sister Maureen Costello at Rutland Surgery
Result	Not interested in stop smoking 3
Social	Refuses stop smoking monitor

11/04/2014	Sister Maureen Costello at Rutland Surgery
Comment	ANNUAL STROKE REV Main problem depression Lives like a recluse in his bedroom with his mothers ashes beside him.Not keen to consider any form of counselling as done it all before.Bp good and wt stable,Appetite dreadful.Manages to do all the home cooking and very involved in helping his family and taking grandchildren to clubs .Bloods to lab

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11/04/2014	Sister Maureen Costello at Rutland Surgery
History	Patient advised about driving
	Bowels: occasional accident
	Bladder: occasional accident
Result	Weight 75.1 Kg
	BMI 28.3 kg/m2
	O/E - pulse rate NOS 72
Examination	O/E - pulse rhythm regular
Result	Blood pressure reading 90/60 mm Hg
History	Medication review
Result	General well - being schedule 3
History	Depression screen using quest
Social	Chron dis mngt ann rev compltd
History	Stroke/CVA annual review
	Current smoker

	Rolls own cigarettes
Result	Cigarette consumption 25
History	Smoking cessation advice
	Current non drinker
	Diet poor
	GPPAQ physcl act ind: inactive
Result	Patient initiated diet NOS 3
History	Advice about weight
	Health ed. - diet
	Goal identification
	Goal identification

07/04/2014 — Dr R Dale at Rutland Surgery

History	Little change in mood. Still not interacting much. Appetite not great. Willing to try increasing fluoxetine to 60mg and re-assess in 1 month.

28/02/2014 — Dr R Dale at Rutland Surgery

History	Seen with wife. Some improvement over past month, interacting a bit more. Poor appetite, no interest in food. Weight loss. No alcohol for 3 weeks.
Examination	O/E - height, 163 cm
	O/E - weight, 74.1 Kg
	Ideal Weight, 61.11 Kg
Comment	Happy to remain on fluoxetine 40mg for further month and then re-assess.

13/01/2014 — Dr Eileen Blackwood at Rutland Surgery

Problem (FIRST)	**Polypharmacy** Polypharmacy LES
History	Mood still low. Told me about lifelong problems with low mood. Sexually abused as a child. Poor motivation. Irritable. Sleep and appetite variable. Would like to increase fluoxetine to 40mg od - has helped in the past. Taking 20mg od. Drinks 6 cans of beer a day. Not interested in cutting down. Declined counselling. Increase fluoxetine to 40mg od. Review in 4 weeks.
Medication	Atenolol Tablets 50 mg *56 tablet 1 Tab Daily ISSUE WEEKLY*
	Salbutamol Cfc-free inhaler 100 micrograms/puff *2 inhaler 2 Puffs Take as required*
	Fluoxetine Hydrochloride Capsules 20 mg *60 capsule TWO TABS DAILY*
Additional	Inappropriate medication stopped Propranolol
	Medication commenced Atenolol50mg od
	Medication changed Fluoxetine increased to 40mg od. Slabutamol inhaler changed to MDI.
	Medication review done

History	O/E - BP reading Propranolol changed to atenolol 50mg od (cardioselective). Smokes ~15/day and roll ups. SOB on exertion and cough, sometimes yellow sputum. Has salbutamol inhaler - found MDI more effective. Spirometry 03/2009 - no airflow obstruction. Feels symptoms worse than 5 years ago. No chest pain or tightness. No palpitations.
Examination	Blood pressure reading 128/74 mm Hg x 2 sats 96%, p 64r, RR18, chest clear. PEFR 330 (exp ~ 580)
Comment	Smoking cessation advice ? COPD. Plan - rerefer spirometry. Change to slabutamol MDI. Not interested in stopping.

History	Takes lansoprazole 30mg od for reflux. Well controlled. SUggested reducing to 15mg od. Declined - has tried before and symtpoms flared up. Discussed alcohol. Declined any help.

10/12/2013 — Ms Hilary Campbell at Rutland Surgery

Comment	**Polypharmacy work up referral** filed in Docman. Issues valid today however may have changed at the time of the face to face review. H Campbell PSP

06/12/2013 — Dr R Dale at Data Entry

Additional	eMED3 (2010) new statement issued, not fit for work FitNote.pdf, (Diagnosis: Depression; Duration: 06/12/2013 - 06/12/2014)

04/12/2013 — Mrs Clare Kyle at Rutland Surgery

Examination	Blood pressure reading 148/100 mm Hg
Comment	O/E - BP reading FLU. NO CI. VCO. IM (L) DELTOID Recheck bp !/12. Given number for Lifelink.
	Immunisations
Additional	Seasonal influenza vaccination Enzira 24749411a Exp 06/14 **(GMS)**

04/12/2013	Dr R Dale at Rutland Surgery
History	Seen with wife. Ran out of fluoxetine and didn't come in for more. Had not noticed much improvement. ? increased diarrhoea but not sure. Drinking more recently - 6-8 cans and 1/4 - 1/2 bottle of vodka per night. Does not wish help with this at present (wife agrees to re-start fluoxetine in first place).
Comment	Advised of importance of remaining on tablets. Given 6 week supply to cover holiday period. Sick line due on 6/12/13.
Medication	Fluoxetine Hydrochloride Capsules 20 mg *42 capsule ONE TO BE TAKEN EACH DAY*
20/09/2013	Dr R Dale at Rutland Surgery
History	Mood slightly worse since stopping trazodone. Staying in room and not socialising. Thinks he had felt better on fluoxetine in the past. Had some side effects but willing to try it again.
	Localised infection around nail of left ring finger.
Comment	Review 1 month.
Medication	Fluoxetine Hydrochloride Capsules 20 mg *28 capsule ONE TO BE TAKEN EACH DAY*
	Fusidic Acid Cream 2 % *15 GRAM APPLY THREE TIMES DAILY*
26/08/2013	Dr R Dale at Rutland Surgery
History	Has felt more drowsy with trazodone, esp after morning dose. Does not feel that it has improved mood. Still stating in room most of the time and avoids socialising.
	Pain in right elbow for about 6 weeks. Not aware of any injury. No benefit from various gels.
Examination	Full ROM of elbow, no tenderness.
Comment	Stop diclofenac if any side effects.
	Reduce trazodone and review in about 3 weeks.
Medication	Diclofenac Sodium E/c tablets 50 mg *56 tablet ONE TO BE TAKEN THREE TIMES A DAY WITH OR AFTER FOOD*
	Trazodone Hydrochloride Capsules 100 mg *28 capsule ONE TO BE TAKEN AT NIGHT*
	Trazodone Hydrochloride Capsules 50 mg *28 capsule ONE TO BE TAKEN AT NIGHT*
20/08/2013	Dr M F Shields at Special Request
History	given as asked by chemist
Medication	Trazodone Hydrochloride Capsules 100 mg *28 capsule AS DIRECTED*
	Trazodone Hydrochloride Capsules 50 mg *14 capsule AS DIRECTED*
19/08/2013	Mrs Margaret McCoy at Special Request
Comment	trazadone 100mg x28 trazodone 50mg x14 owed to chemist for previous dosette
08/08/2013	Dr R Wolfe at Special Request
History	TCI
07/08/2013	Mrs Diane MacLean at Special Request
Comment	Trazadone 50mg 1 in the mane
06/08/2013	Dr R Wolfe at Special Request
History	TCI
05/08/2013	Mrs Angela Farrell at Special Request
Comment	Trazodone 50mg
22/07/2013	Dr R Wolfe at Data Entry
History	Trazodone -TCI
01/07/2013	Dr R Dale at Special Request
History	Dispense weekly.
Medication	Trazodone Hydrochloride Capsules 100 mg *28 capsule ONE TO BE TAKEN AT NIGHT*
	Trazodone Hydrochloride Capsules 50 mg *28 capsule ONE TO BE TAKEN AT NIGHT*

28/06/2013	Mrs Angela Farrell at Special Request
Comment	Chemist req 100mg 28/Trazadone 50mg 28 as problem with 150mg
24/06/2013	Dr R Wolfe at Special Request
Additional	
21/06/2013	Mrs Trisha Jones at Data Entry
Comment	trazodone 50mg and trazodone 150mg
29/04/2013	Dr R Wolfe at Special Request
Medication	Clopidogrel Tablets 75 mg *56 TABLET ONE TO BE TAKEN EACH DAY*
26/04/2013	Miss Katie Flynn at Special Request
Comment	aspirin 75mg, dipyridamole 200mg, trazodone 150mg tabs and trazodone 50mg caps
23/04/2013	Sister Anne Henderson at Data Entry
Comment	ER for cholesterol - on max tolerated.
23/04/2013	Dr M F Shields at Data Entry
History	Chol 7.0, HDL/chol 5.4 -> on atrovo 80 -> for exception reporting
18/04/2013	Dr M F Shields at Data Entry
History	chol 7.0 and HDL/chol 5.4 - on atrova 80 and complaince looks OK
15/04/2013	Sister Anne Henderson at Rutland Surgery
Medication	Clopidogrel Tablets 75 mg *56 TABLET ONE TO BE TAKEN EACH DAY*
15/04/2013	Sister Anne Henderson at Rutland Surgery
History	Patient advised about driving
Result	General well - being schedule 1
	O/E - pulse rate NOS 82
Examination	O/E - regular pulse
History	Medication review
	Warfarin not indicated
	Aspirin not indicated
	Dipyridamole not indicated
Social	Exc depr qual: ind: Pat unsuit
Result	HAD scale: anxiety score 99
	HAD scale: depression score 99
History	Depression screen using quest
	Alcohol intake above rec limit
Result	Alcohol units per week 42
History	Alcohol cons screen test decld
	Diet poor
	GPPAQ physcl act ind: inactive
Social	Healthy lifestyle program stat
History	Not interested in stop smoking
Social	Refuses stop smoking monitor
History	Goal identification
15/04/2013	Sister Anne Henderson at Rutland Surgery
Examination	O/E - BP reading
	Blood pressure reading 158/100 mm Hg
Comment	ANNUAL STROKE/HYPERTENSION - still (l) sided weakness, walks with walking stick for longer distances. Balance can be poor but has never fallen. bp remains elevated - compliance had been poor up until Jan but restarted since then. Getting through dossit box. rpt bp 2/52 + GP. Still feeling depresed and stays in room away from rest of family. Not wishing referral. Continues to smoke and alcohol intake 42 units. Not keen to stop or reduce at present. Discussed change to clopidogrel from asp/dipyrid. Script changed.
Test Request	U and E, Glucose, LFTs, Serum Lipids

08/04/2013	Dr R Dale at Data Entry
History	Trazodone 150mg not available at present.
Medication	Trazodone Hydrochloride Capsules 100 mg *28 capsule ONE TO BE TAKEN AT NIGHT* Trazodone Hydrochloride Capsules 50 mg *28 capsule ONE TO BE TAKEN AT NIGHT*
08/04/2013	Mrs Clare Kyle at Rutland Surgery
Examination	Blood pressure reading 166/111 mm Hg
Comment	O/E - BP reading . remains elevated. Returning 1/52 for recheck and seeing Dr in 2/52. Very emotional and weepy. Still smoking, not keen to stop. drinking every night. advice given.
08/04/2013	Dr R Dale at Rutland Surgery
History	In for medication. Recurrence of fungal infection on foot. Still low mood, lack of motivation, avoids social contact. No side effects from trazodone 200mg nocte. Drinks up to 4 cans at night to try to get to sleep.
Comment	Review dose of trazodone when next due. ? increase.
06/03/2013	Sister Anne Henderson at Data Entry
Comment	(I) sent to come in for stroke rv etc ****
04/03/2013	Dr R Wolfe at Special Request
Additional	
01/03/2013	Mrs Trisha Jones at Rutland Surgery
Comment	trazodone 150mg & 50mg
07/01/2013	Dr R Wolfe at Data Entry
Additional	Medication review done
04/01/2013	Mrs Trisha Jones at Data Entry
Comment	trazodone 50mg & 150mg
04/01/2013	Dr R Dale at Data Entry
History	States previous sick line has been lost by Benefits Agency.
Social	Duplicate Med 3 from 12/12/12 given.
18/12/2012	Dr R Wolfe at Special Request
History	TCI
17/12/2012	Mrs Linda Parker at Special Request
Comment	Trazodone 50. Trazodone 150
12/12/2012	Dr R Dale at Rutland Surgery
History	Stopped taking tablets few weeks ago when close friend died. Tearful, mood very low. does not like Christmas time. Not interested in psychiatry or counselling (feels like he has been talking about things for years with no benefit). Advised to start back on tablets. Wishes he was not here but no active suicidal thoughts. Going to arrange stroke review next week.
Social	Med 3 1 year from 6/12/12 "depression".
07/11/2012	Dr R Dale at Rutland Surgery
History	Was assaulted in May whilst driving. Has only been out of the house about 12 times since then and very anxious when driving. Mood still low, smoking more, irritable. Lifelong friend has been given 6 months to live. Very upset by this.
Comment	Add in trazodone 50mg in am.
Medication	Trazodone Hydrochloride Capsules 50 mg *28 capsule 1 IN THE MORNING*
15/10/2012	Dr R Dale at Special Request
Additional	

12/10/2012	Mrs Angela Farrell at Special Request
Comment	Trazadone 150mg
17/09/2012	Dr R Dale at Special Request
Additional	
14/09/2012	Mrs Trisha Jones at Data Entry
Comment	trazodone
21/08/2012	Dr R Wolfe at Data Entry
History	change trazodone to weekly disp.
20/08/2012	Dr R Wolfe at Special Request
History	TCI next time.
17/08/2012	Mrs Linda Parker at Special Request
Comment	Trazodone 150mg
23/07/2012	Dr R Dale at Special Request
Additional	
20/07/2012	Mrs Trisha Jones at Rutland Surgery
Comment	trazodone
25/06/2012	Dr R Dale at Special Request
Additional	
22/06/2012	Mrs Trisha Jones at Rutland Surgery
Comment	trazodone
22/06/2012	Dr R Wolfe at Data Entry
History	Deg changes of mid to lower c-spine. Shoulder not x-rayed separately.
30/05/2012	Ms Antonia Costello at Rutland Surgery
Comment	bloods to lab as requested, will phone for results
30/05/2012	Dr R Wolfe at Rutland Surgery
History	Left shoulder pain no better, worse on moving and now has pleuritic left sided chest pain since assaulted on 15/5, but no specific injury to chest. Has more of a cough. Small amount of sputum. No haemoptysis. No pyrexia. Appetite good No weight loss. T=37.3 P=82 O2=97% No clubbing. Lungs good AE L=R Resonance L=R Nil added FROM of upper limbs and C-spine (rotation to left caused more arm pain.) No local tenderness. Rx and advised re S/Es and bloods and X-rays in shoulder and c-spine.
Medication	Paracetamol And Dihydrocodeine Tablets 500 mg + 20 mg *112 tablet 1 or 2 Tabs FOUR TIMES DAILY*
Test Request	FBC, U and E, LFTs, Calcium, CXR
28/05/2012	Dr R Wolfe at Data Entry
Additional	
25/05/2012	Mrs Angela Farrell at Data Entry
Comment	Trazodone 150mg tabs (28)
14/05/2012	Dr R Dale at Rutland Surgery
History	Stil troubled by pain in left arm. Not helped by pregabalin but no side effects. Struggling to change gear in car. Still getting irritable with children and visitors. Feels drowsy in am after trazodone.
Examination	Neck NAD. Tone, power, reflexes and sensation in arm normal.
Comment	Increase pregabalin for 1 month.
Medication	Pregabalin Capsules 150 mg *56 capsule 1 MORNING AND NIGHT*

-	----
30/04/2012	Dr M F Shields at Data Entry
History	See note from PN on 30/03 - TCI
-	----
27/04/2012	Mrs Angela Farrell at Data Entry
Comment	Trazadone 150mg
-	----
03/04/2012	Dr R Wolfe at Data Entry
Additional	
-	----
02/04/2012	Mrs Phyllis Thompson at Data Entry
Comment	Trazodone
-	----
30/03/2012	Dr R Dale at Rutland Surgery
History	Gabapentin not helping pain in left neck/shoulder. No side effects. Not helped by analgesics. Wife reports mood more stable on trazodone. Recurrence of athletes foot.
Comment	Change gabapentin to pregabalin.
Medication	Pregabalin Capsules 75 mg *56 capsule 1 MORNING AND NIGHT* Daktarin Cream 2 % *30 GRAM APPLY TWICE DAILY CONTINUING FOR 10 DAYS AFTER LESIONS HAVE HEALED*
-	----
30/03/2012	Sister Maureen Costello at Rutland Surgery
Comment	Stroke rev weepy and mood very low no motivation to do anything .Smoking and drinking every night alone in his room BP 140/100
-	----
20/02/2012	Mrs Angela Farrell at Data Entry
Comment	Chemist tel ? is pt still using inhalers Discuss respiratory next time he is in
-	----
02/02/2012	Dr R Dale at Special Request
Medication	Trazodone Hydrochloride Tablets 150 mg *28 TABS 1 Tab At night*
-	----
01/02/2012	Dr R Dale at Rutland Surgery
History	Getting pins and needles at times in left arm.Tends to be there more often than not. Can be worse after leaning on table.
Examination	Tone, power, reflexes, sensation normal. No pain around albow or wrist.
Medication	Loperamide Hydrochloride Tablets 2 mg *100 TABS 1 Tab As directed* Co-Codamol 30/500 Capsules *100 CAPS 1 or 2 Caps 4 times daily* Gabapentin Capsules 300 mg *100 capsule ONE TO BE TAKEN THREE TIMES A DAY 1 tab on day 1 1 tab twice daily on day 2 then 1 three times per day.*
-	----
10/01/2012	Ms Antonia Costello at Data Entry
Comment	DNA for Colonoscopy
-	----
13/12/2011	Mrs Angela Farrell at Rutland Surgery
History	Serum total cholesterol level 4.8: priority=2 Plasma random glucose level 5.5: priority=2 Serum total cholesterol level Plasma random glucose level
-	----
07/12/2011	Dr R Dale at Rutland Surgery
History	In with wife. Does not feel citalopram is helping. Barely goes out, does not interact with children. Smoking constantly and drinks 6 cans beer per night. Poor sleep, poor appetite. Has seen lots of counsellors over the years and does not feel that they help. Plan change anti-depressant. Review 1 month. Med 3 1 year "depression". Still troubled with diarrhoea. Did not attend for colonoscopy. priority=2
-	----
07/12/2011	Sister Anne Henderson at Rutland Surgery
History	Partial stroke review. bp borderline elevated 139/95 138/97.Rpt 1/12. Routine bloods. Complete stroke review next visit - HRB from wt section. Main problem at present is depression - not been over door for 6/12. Has lost 6kgs in weight - appetite poor. Observe. priority=2

	General well - being schedule 1: priority=2
	O/E - height Characteristic 165:cm priority=2
	O/E - weight Characteristic 78.4:kg priority=2
	Body Mass Index 28.79:kg/m2 priority=2
	O/E - regular pulse : priority=2
	O/E - pulse rate NOS 88: priority=2
	Medication review : priority=2
	Influenza vaccination Injection Site: Left Arm priority=2 Batch Number: 113401 Expiry date: 31/08/2012 Manufacturer: Novartis Vaccines Product Name: Agrippal
	Influenza vacc consent given Recorded through Combined Vaccination priority=2
	Excepted from depression quality indicators: Patient unsuita : priority=2
	Current smoker : priority=2
	Cigarette smoker : priority=2
	Rolls own cigarettes : priority=2
	Cigarette consumption 50: priority=2
	Not interested in stopping smoking : priority=2
	Refuses stop smoking monitor : priority=2
	Smoking cessation advice : priority=2
	Systolic blood pressure
	Diastolic blood pressure
	O/E - Diastolic BP reading B P Screening$$.clm - Repeat after an Interval 12M
	O/E - Diastolic BP reading B P Screening$$.clm - Repeat after an Interval 12M (diary entry deleted) (Not Known)
	General well - being schedule
	O/E - height
	O/E - weight
	Body Mass Index
	O/E - pulse rate NOS
	Cigarette consumption
	Medication review
15/11/2011	Acute Prescriptions at Rutland Surgery
History	Repeat citalopram 30mg. Still TCI priority=2
21/10/2011	Dr M F Shields at Rutland Surgery
History	Combined Vaccination Recall priority=2
	Letter sent to patient Influenza Influenza vaccination invitation letter sent priority=2
19/10/2011	Acute Prescriptions at Rutland Surgery
History	Repeat citalopram. Still TCI priority=2
20/09/2011	Acute Prescriptions at Rutland Surgery
History	see 25/07 - TCI for review priority=2
15/08/2011	Dr R Dale at Rutland Surgery
History	Tender lump in right groin for 1 week. Tender. No systemic upset. O/E abscess in right groin, tender. No discharge. No lymph nodes. Advise review if not settling. priority=2
01/08/2011	Sister Anne Henderson at Rutland Surgery
History	Hypertension - bp remains elevated. 154/102 142/99. Rpt x1 + GP for ? alteration of tabs. Compliance good via dossit box. SPIROMETRY = NORMAL. Lung Age = 61years (smoker) Previous spirometry (hospital 2006 = normal) ? diagnosis. Discuss next visit - for HPF. Says he feels benefit from inhalers. Hardly uses seretide. B2 most days of week approx x3. priority=2
	Forced expired volume in 1 second 2.74: priority=2
	FEV1/FVC ratio 72:% priority=2
	Percent predicted FEV1 85:% priority=2
	Systolic blood pressure
	Diastolic blood pressure
	O/E - Diastolic BP reading B P Screening$$.clm - Repeat after an Interval 12M
	O/E - Diastolic BP reading B P Screening$$.clm - Repeat after an Interval 12M (diary entry deleted) (Not Known)
	Forced expired volume in 1 second
	FEV1/FVC ratio

	Percent predicted FEV1
-	----
29/07/2011	Dr R Dale at Rutland Surgery
History	SCI Electronic Referral priority=2
-	----
26/07/2011	Acute Prescriptions at Rutland Surgery
History	O/E - height Medication review
-	----
25/07/2011	Dr R Dale at Rutland Surgery
History	Mother died in May. Does not feel he has grieved properly. More irritable, not going out his room, reduced appetite. Plan increase citalopram to 30mg and review 1 month. States he was waiting for a colonoscopy appointment. Last letter says he failed to attend. priority=2
-	----
25/07/2011	Sister Anne Henderson at Rutland Surgery
History	On inhalers with no diagnosis as yet. Feels little benefit from seretide commenced 7/10. Had spirometry at hospital at some point - check records. TCI for rpt spirometry + TCI with inhalers to check technique. Bp elevated - rpt 1/52. Compliance good with tabs via dossit box. Bp 150/104 148/102. priority=2 Smoking cessation advice priority=2 Systolic blood pressure Diastolic blood pressure O/E - Diastolic BP reading B P Screening$$.clm - Repeat after an Interval 12M O/E - Diastolic BP reading B P Screening$$.clm - Repeat after an Interval 12M (diary entry deleted) (Not Known)
-	----
05/07/2011	Acute Prescriptions at Rutland Surgery
History	Duplicate script for cipramil priority=2
-	----
29/06/2011	Acute Prescriptions at Rutland Surgery
History	See previous - TCI see Dr and PN priority=2
-	----
27/04/2011	Acute Prescriptions at Rutland Surgery
History	on seretide - no diagnosis - TCI priority=2
-	----
10/03/2011	Acute Prescriptions at Rutland Surgery
History	TCI for review antiD before next script priority=2
-	----
07/12/2010	Dr M F Shields at Rutland Surgery
History	DNA ENDOSCOPY priority=2
-	----
06/12/2010	Dr R Dale at Rutland Surgery
History	Chol/HDL 5.3. Due to come in this week. Discuss. priority=2
-	----
06/12/2010	Dr R Dale at Rutland Surgery
History	Feels mood slightly better. Sleep still a problem. Med 3 1 year "depressive illness". Discussed cholesterol. Does not have a great appetite. Taking atorvastatin as it is in his dosette box. Plan repeat cholesterol in 2-3 months. priority=2
-	----
06/12/2010	Mrs Margaret McCoy at Rutland Surgery
History	Total cholesterol measurement 5.3:mmol/L priority=2 Tot Chol Tot Chol date Value text: 26 Nov 2010 00:00
-	----
02/12/2010	Mrs Phyllis Thompson at Rutland Surgery
History	Plasma random glucose level 4.9: priority=2 Plasma random glucose level

-	----
26/11/2010	Sister Maureen Costello at Rutland Surgery
History	STROKE rev very depressed to see GP today bloods to lab priority=2
	Influenza vaccination Injection Site: Left Arm priority=2 Batch Number: 107201C Expiry date: 31/05/2011 Manufacturer: Novartis Vaccines Product Name: Agrippal
	Influenza vacc consent given Recorded through Combined Vaccination priority=2
	White Scottish : priority=2
	O/E - regular pulse : priority=2
	O/E - pulse rate NOS 100: priority=2
	O/E - height Characteristic 165:cm priority=2
	O/E - weight Characteristic 84:kg priority=2
	Body Mass Index 30.85:kg/m2 priority=2
	General well - being schedule 1: priority=2
	Car driver : priority=2
	Patient advised about driving : priority=2
	Medication review : priority=2
	Excepted from depression quality indicators: Patient unsuita : priority=2
	Current smoker : priority=2
	Cigarette consumption 30: priority=2
	Systolic blood pressure
	Diastolic blood pressure
	O/E - Diastolic BP reading B P Screening$$.clm - Repeat after an Interval 0W
	O/E - Diastolic BP reading B P Screening$$.clm - Repeat after an Interval 0W
	Stroke monitoring Rutland Stroke.clm - Repeat after an Interval 12M
	(diary entry deleted) (Not Known)
	O/E - pulse rate NOS
	O/E - height
	O/E - weight
	Body Mass Index
	General well - being schedule
	Cigarette consumption
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-	----
26/11/2010	Dr R Dale at Rutland Surgery
History	Mood has been getting lower for past 8 weeks. 5th anniversary of sister's death recently, mother in hospital. Locking himself away in his room again. Poor sleep, poor concentration. Arguing with people. Plan increase citalopram. Given Pathways leaflet. Review 1 week. Still troubled by lose BM. Awaiting colonoscopy. priority=2
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-	----
17/11/2010	Acute Prescriptions at Rutland Surgery
History	requesting codydramol but been on cocdamol for last year|? also on seretide but no diagnosis of asthma - TCI and see PN (see 18/03/09) priority=2
---	---
-	----
16/11/2010	Acute Prescriptions at Rutland Surgery
History	Repeat Cipramil. TCI for R/V priority=2
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-	----
01/10/2010	Dr R Dale at Rutland Surgery
History	Pain down right posterior chest for 3-4 days. Feels like a muscle spasm. Trying to keep active. Not helped by algesal and has run out of co-codamol. O/E tender to right side of thoracic and lumbar spine, no bony tenderness, no deformity. Imp muscular pain. priority=2
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-	----
23/09/2010	Acute Prescriptions at Rutland Surgery
History	repeat cipramil priority=2
	Body mass index 30+ - obesity priority=2
Problem	**Obesity**
History	O/E - height
---	---
-	----
03/09/2010	Dr R Dale at Rutland Surgery
History	SCI Electronic Referral priority=2
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-	----
30/08/2010	Dr R Dale at Rutland Surgery
History	Still having diarrhoea virtually every time he has a bowel motion. Passes blood most times. Colicky abdominal pain. Has been the case for years. No constipation, weight steady. O/E abdomen soft, non-tender, no LKKS, BS ++.

	Plan refer colorectal clinic. priority=2
09/07/2010	Dr R Dale at Rutland Surgery
History	WCC 11.2. priority=2
07/07/2010	Dr R Dale at Rutland Surgery
History	Diarrhoea for 3 months. Intermittent PR bleeding (as before). Some colicky pain. Good oral intake. No episodes of constipation. O/E abdomen soft, non-tender, no LKKS, BS ++. Plan blood for FBC, ESR, U&E, LFT, TFT, CrP. Prefers co-codamol to co-dydramol. priority=2
07/07/2010	Sister Anne Henderson at Rutland Surgery
History	bloods as requested. Bp - n priority=2 Systolic blood pressure Diastolic blood pressure O/E - BP reading raised B P Screening$$.clm - Repeat after an Interval 12M (diary entry deleted) (Not Known) Medication review
07/07/2010	Mrs Angela Farrell at Rutland Surgery
History	COA noted priority=2
23/02/2010	Dr R Wolfe at Rutland Surgery
Problem	**[D]Cough syncope**
History	Smoking cessation advice priority=2
25/01/2010	Dr R Dale at Rutland Surgery
History	Requesting prescription for amlodipine and citalopram. Had ? seizure few weeks ago - awaiting appointment at seizure clinic. Sounds as if it could have been a vasovagal attack. Has felt well since then. Advised that chemist appears to have ordered medication. priority=2 Systolic blood pressure Diastolic blood pressure
25/01/2010	Sister Anne Henderson at Rutland Surgery
History	Stroke rv - manages well. walks unaided now although sometimes balance off - no falls. Continues to smoke - advised. Bloods done. BMI = 31. Advised. priority=2 O/E - pulse rate NOS 80: priority=2 O/E - regular pulse : priority=2 O/E - height Characteristic 165:cm priority=2 O/E - weight Characteristic 85:kg priority=2 Body Mass Index high K/M2 31.22:kg/m2 priority=2 General well - being schedule 3: priority=2 Medication review : priority=2 Excepted from depression quality indicators: Patient unsuita : priority=2 Current smoker : priority=2 Cigarette smoker 25: priority=2 Cigarette consumption 25: priority=2 Thinking about stopping smoking 2: priority=2 Referral to stop-smoking clinic 2: priority=2 Smoking cessation advice : priority=2 Refuses stop smoking monitor : priority=2 Wants to lose weight 2: priority=2 Advice about weight : priority=2 Number of portions of fruit and vegetables daily 0: priority=2 Patient initiated diet NOS 2: priority=2 Health ed. - diet : priority=2 Exercise grading 7: priority=2 Exercise grading NOS 5: priority=2 Health ed. - exercise : priority=2 Alcohol units per week 20: priority=2 Alcohol consumption screening test declined : priority=2 Health ed. - alcohol : priority=2 Health ed. - alcohol : priority=2 Stroke monitoring Rutland Stroke.clm - Repeat after an Interval 9M (diary entry deleted) (Not Known) O/E - pulse rate NOS

	O/E - height O/E - weight Body Mass Index General well - being schedule Cigarette smoker Cigarette consumption Thinking about stopping smoking Referral to stop-smoking clinic Wants to lose weight Number of portions of fruit and vegetables daily Patient initiated diet NOS Exercise grading Exercise grading NOS Alcohol units per week
11/01/2010	Dr R Wolfe at Rutland Surgery
History	Seen at A&E for ??seizure priority=2
23/12/2009	Mrs Phyllis Thompson at Rutland Surgery
History	Plasma random glucose level 5.6: priority=2 Plasma random glucose level
23/12/2009	Mrs Phyllis Thompson at Rutland Surgery
History	Serum total cholesterol level 3.0: priority=2 Serum total cholesterol level
21/12/2009	Sister Anne Henderson at Rutland Surgery
History	Hypertension - bp still raised on ^ doxazosin and has had tabs this am. Seeing GP. Fasting lipids, fbs, u&es, lfts - due stroke rv 1/10. priority=2 Systolic blood pressure Diastolic blood pressure O/E - BP reading raised B P Screening$$.clm - Repeat after an Interval 12M (diary entry deleted) (Not Known) Medication review
21/12/2009	Dr R Dale at Rutland Surgery
History	Discussed BP. On maximum doses of current medication. Plan try adding amlodipine. Review BP in 1 month. priority=2
07/12/2009	Sister Anne Henderson at Rutland Surgery
History	Hypertension - bp previously elevated but had not had tabs yet. Today 139/102 134/106. Compliance good with tabs via dossit box. Elevated cholesterol on statin tci fasting lipids priority=2 Systolic blood pressure Diastolic blood pressure O/E - BP reading raised B P Screening$$.clm - Repeat after an Interval 12M (diary entry deleted) (Not Known) Medication review
07/12/2009	Dr R Dale at Rutland Surgery
History	Note BP. No problems with medication. Plan try increasing doxazocin to 16mg od. Review BP in 2 weeks. Med 3 1 year form 03/12/09 "depressive illness" priority=2
30/11/2009	Sister Anne Henderson at Rutland Surgery
History	Hypertension - bp elevated 157/110 157/107 P 72 (reg) Compliance good with tabs (wkly dispensed) but no tabs as yet this am. priority=2 Medication review
28/11/2009	Sister Anne Henderson at Rutland Surgery
History	Influenza vaccination Injection Site: Right Arm priority=2 Batch Number: 213031A Expiry date: 30/06/2010 Manufacturer: Novartis Vaccines Product Name: Begrivac Influenza vacc consent given Recorded through Combined Vaccination priority=2

	PANDEMRIX - first influenza A (H1N1v) 2009 vaccination given Injection Site: Left Arm priority=2 Batch Number: A81CA111A Expiry date: 31/03/2010 Manufacturer: GlaxoSmithKline Product Name: Pandemrix Consent given for pandemic influenza vaccination Recorded through Combined Vaccination priority=2
25/11/2009	Acute Prescriptions at Rutland Surgery
History	needs seretide assessed and ??should he be on BB?? priority=2
20/10/2009	Acute Prescriptions at Rutland Surgery
History	Confirm that fluoxetine is stopped now. priority=2
16/10/2009	Dr R Dale at Rutland Surgery
History	More bad days than good. Took extra fluoxetine yesterday as he was feeling low (not suicidal). Plan change fluoxetine to citalopram. Cough, no sputum. O/E throat NAD, no lymph nodes. Chest clear. Imp viral URTI. priority=2
16/10/2009	Mrs Angela Farrell at Rutland Surgery
History	Chemist informed to stop Fluoxetine priority=2
15/10/2009	Acute Prescriptions at Rutland Surgery
History	Repeat fluoxetine -TCI priority=2
18/09/2009	Acute Prescriptions at Rutland Surgery
History	Repeat fluoxetine TCI next time priority=2
27/08/2009	Dr M F Shields at Rutland Surgery
History	**DIPYRIDAMOLE** priority=2
19/08/2009	Dr R Dale at Rutland Surgery
History	Feels some improvement with fluoxetine but still getting mood swings and panic attacks. Plan increase to 40mg od. Some improvement with seretide but still gets breathless at times. Plan increase strength. Feels he gets itchy after taking co-codamol. Wishes alternative. priority=2
11/05/2009	Dr R Dale at Rutland Surgery
History	Feels his mood is getting worse again and suffering from panic attacks especially when out shopping. Advised to restart fluoxetine (has some at home) Breathless on mild exertion. Does not feel much benefit from inhalers. Plan try seretide. priority=2
18/03/2009	Sister Anne Henderson at Rutland Surgery
History	Bp = n. dossit box appears to be helping. Spirometry as arranged for sob on minimal exertion. Previously done at hospital 12/06 and although no airflow obstruction, suggested ? asthma. Has been on inhalers since but feels little benefit from these. Smoker - not keen to give up at present. Has tried previously unsuccessfully. Advised. TCI and see Gp. priority=2 Forced expired volume in 1 second 2.92: priority=2 FEV1/FVC percent 76:% priority=2 Percent predicted FEV1 89:% priority=2 Systolic blood pressure Diastolic blood pressure O/E - BP reading normal B P Screening$$.clm - Repeat after an Interval 12M (diary entry deleted) (Not Known) Forced expired volume in 1 second FEV1/FVC percent Percent predicted FEV1
16/03/2009	Dr R Wolfe at Rutland Surgery

Problem	**ECG normal** priority=1
12/03/2009	Nurse Amanda Torrance at Rutland Surgery
History	comp off for part of consultation. unsure what to be done etc, unable to open last consultation and see what needs done. Bp high today but ran out of tabs. ?? was for Doseete box. Phoned pharmacy and they have same. Advised to go pick up and restart tabs. To return next week for spirometry.(apologies for not doing!) priority=2
04/03/2009	Sister Anne Henderson at Rutland Surgery
	RPT CHOL 1/12.

History

Hypertension/cva - bp very high 2/7 ago. No tabs had been taken. Today 140/104 138/106. Rpt 1/52. Dossit box discussed and keen for this. D/w GP. C/o sob also - for spirometry - arrange appointment. Chol discussed. Compliance could be better. Rpt 1/12 priority=2
O/E - height Characteristic 165:cm priority=2
O/E - weight Characteristic 84:kg priority=2
Body Mass Index high K/M2 30.85:kg/m2 priority=2
General well - being schedule 3: priority=2
Patient Advised to inform DVLA : priority=2
Patient advised to inform insurance company : priority=2
O/E - height
O/E - weight
Body Mass Index
General well - being schedule

04/03/2009	Dr R Wolfe at Rutland Surgery
History	For dosette box priority=2
	Medication review
04/03/2009	Mrs Angela Farrell at Rutland Surgery
History	Total cholesterol measurement 5.8:mmol/L priority=2

	Tot Chol Tot Chol date Value text: 02 Mar 2009 00:00
-	-
04/03/2009	Mrs Angela Farrell at Rutland Surgery
History	Plasma random glucose level 5.3: priority=2 Plasma random glucose level
-	-
03/03/2009	Dr M F Shields at Rutland Surgery
History	Chol 5.8 - complaince poor from computer, got ezetimide once only - need to discuss with him...ENCOURAGE TO GO FOR DOSSET priority=2
-	-
02/03/2009	Sister Anne Henderson at Rutland Surgery
History	Opportunistic stroke rv (am surgery) - bp raised + 182/124 180/120 (aneroid) No tabs taken this morn. Admittted to hospital last week and bp seemingly low!! Rpt 2/7. Advised re importance of returning. Continues to smoke 40 cigs daily. No plans to give up. Alcohol 40 units week. pm. Dr wolfe informed priority=2 Interpreter not needed : priority=2 O/E - pulse rate NOS 84: priority=2 O/E - regular pulse : priority=2 Medication review : priority=2 Excepted from depression quality indicators: Patient unsuita : priority=2 Current non-smoker : priority=2 Cigarette consumption 40: priority=2 Not interested in stopping smoking 1: priority=2 Smoking cessation advice : priority=2 Refuses stop smoking monitor : priority=2 Pt advised re wt reducing diet : priority=2 Wants to lose weight 2: priority=2 Weight management programme offered 2: priority=2 Advice about weight : priority=2 Number of portions of fruit and vegetables daily 3: priority=2 Patient initiated diet NOS 2: priority=2 Health ed. - diet : priority=2 Exercise grading 4: priority=2 Exercise grading NOS 2: priority=2 Health ed. - exercise : priority=2 Alcohol units per week 40:units/week priority=2 Alcohol intake above recommended sensible limits : priority=2 Alcohol consumption NOS 1: priority=2 Health ed. - alcohol : priority=2 Systolic blood pressure Diastolic blood pressure O/E - BP reading raised B P Screening$$.clm - Repeat after an Interval 12M (diary entry deleted) (Not Known) Screening due Rutland Stroke.clm - Repeat after an Interval 9M (diary entry deleted) (Not Known) O/E - pulse rate NOS Cigarette consumption Not interested in stopping smoking Wants to lose weight Weight management programme offered Number of portions of fruit and vegetables daily Patient initiated diet NOS Exercise grading Exercise grading NOS Alcohol units per week Alcohol consumption NOS Medication review
-	-
02/03/2009	Dr R Wolfe at Rutland Surgery
History	Attended A&E on 24/2 with diarrhoea and hypotension - ?due to fluoxetine priority=2
-	-
03/02/2009	Acute Prescriptions at Rutland Surgery
History	Duloxetine unavailable. Try fluoxetine, had this before (on aspirin and zoton) priority=2
-	-
30/01/2009	Dr R Dale at Rutland Surgery

History	Problems of dry mouth with trazodone so stopped them. not taking any medication regularly. Plan try duloxetine. Review 1 month. priority=2
-	-
01/12/2008	Dr R Dale at Rutland Surgery
History	Mood no better. Does not seem to have been taking mirtazepine consistently. Not going out, staying in room. Unable to bond with grandchildren. Wishes he was dead but no suicidal thoughts. Poor appetite, poor sleep. Has been seen by various agencis in the past and has not felt that any of them have helped. Advised to take medication regulalry. Med 3 1 year "depressive illness" priority=2
-	-
13/10/2008	Nurse Locum at Rutland Surgery
History	Hypertensive check, Bp 166/119, 162/123. Has not taken this morning. Admits had few weeks off tabs and only started back last week. Advised strongly of risk of stroke if not taking meds. To recheck Bp 1/52 and make sure takes tabs that morning. Flu vaccine given. priority=2
	Influenza vaccination Site: Left Arm - Batch Number: P07 Expiry Date: 6/2009 priority=2 Batch Number: P07 Expiry date: 30/06/2009 Manufacturer: Unknown Manufacturer Product Name: Unknown Influenza Vaccination
	Influenza vacc consent given Recorded through Combined Vaccination priority=2
	Systolic blood pressure
	Diastolic blood pressure
	Systolic blood pressure
	Diastolic blood pressure
-	-
06/10/2008	Dr M F Shields at Rutland Surgery
History	1st recall letter sent for Hypertension priority=2
	CALM - Hypertension 1st Letter Sent priority=2
-	-
17/09/2008	Dr R Dale at Rutland Surgery
History	Feels improvement with mirtazapine. Getting out more. Going to restart all of his medication. Will see nurse in 2 weeks. Plan bloods for FBC, ESR, U&E, LFT. priority=2
-	-
04/08/2008	Dr R Dale at Rutland Surgery
History	Has shut himself in his room most of the time since November. Low mood, tearful, lack of motivation, anger, poor appetite, poor sleep. Has missed several family events. Has not been taking any of his medication (apart from lansoprazole) as he wishes he was dead. No thoughts of self harm. Plan start mirtazapine, Pathways leaflet (although not keen on counselling at present) priority=2
-	-
29/04/2008	Dr M F Shields at Rutland Surgery
Problem	**EEG normal** priority=1
-	-
16/04/2008	Dr R Wolfe at Rutland Surgery
Problem	**CAT scan** brain normal priority=1
-	-
01/04/2008	Acute Prescriptions at Rutland Surgery
History	Medication review
-	-
28/03/2008	Dr R Wolfe at Rutland Surgery
Problem	**ECG: shows LVH**
-	-
04/03/2008	Dr R Wolfe at Rutland Surgery
Problem	**Sigmoidoscopy** priority=1
Problem	**Proctoscopy** priority=1
Problem	**Piles - haemorrhoids** priority=1
-	-
23/01/2008	Dr R Dale at Rutland Surgery
History	Discussed cholesterol. Does not miss any atorvastatin. Admits to eating fatty foods - advised. Start ezetimibe. Repeat cholesterol 2-3 months. priority=2
-	-

11/01/2008	Mrs Angela Farrell at Rutland Surgery
History	Pt informed by letter tci regarding blood results priority=2
-	-
11/01/2008	Mrs Angela Farrell at Rutland Surgery
History	Total cholesterol measurement 6.1:mmol/L priority=2 Tot Chol Tot Chol date Value text: 07 Jan 2008 00:00
-	-
11/01/2008	Mrs Angela Farrell at Rutland Surgery
History	Plasma random glucose level 5.4: priority=2 Plasma random glucose level
-	-
10/01/2008	Dr R Wolfe at Rutland Surgery
History	Chol=6.1 Trig=6.0 gamaGT=170. On atorvastatin 80mg compliance appears good. ?ezetimibe. ?CAT TCI priority=2
-	-
08/01/2008	Sister Anne Henderson at Rutland Surgery
History	O/E - pulse rate NOS 80: priority=2 O/E - regular pulse : priority=2 O/E - height Characteristic 165:cm priority=2 O/E - weight Characteristic 85:kg priority=2 Body Mass Index high K/M2 31.22:kg/m2 priority=2 General well - being schedule 2: priority=2 Car driver : priority=2 Medication review : priority=2 Excepted from depression quality indicators: Patient unsuita : priority=2 Depression screening using questions : priority=2 Current smoker : priority=2 Very heavy smoker - 40+cigs/d : priority=2 Thinking about stopping smoking 2: priority=2 Referral to smoking cessation advisor : priority=2 Referral to stop-smoking clinic : priority=2 Refuses stop smoking monitor : priority=2 Smoking cessation advice : priority=2 Wants to lose weight 2: priority=2
Problem	**Weight management programme offered** 2:
History	Advice about weight : priority=2 Number of portions of fruit and vegetables daily 2: priority=2 Patient initiated diet NOS 2: priority=2 Patient advised re diet : priority=2 Exercise grading 3: priority=2 Exercise grading NOS 2: priority=2 Health ed. - exercise : priority=2 Alcohol consumption NOS 21: priority=2 Alcohol consumption NOS 5: priority=2 Alcohol consumption 21:units/week priority=2 Alcohol intake within recommended sensible limits : priority=2 Health ed. - alcohol : priority=2 Systolic blood pressure Diastolic blood pressure O/E - BP reading raised B P Screening$$.clm - Repeat after an Interval 12M (diary entry deleted) (Not Known) O/E - pulse rate NOS O/E - height O/E - weight Body Mass Index General well - being schedule Thinking about stopping smoking Wants to lose weight Weight management programme offered Number of portions of fruit and vegetables daily Patient initiated diet NOS Exercise grading Exercise grading NOS Alcohol consumption NOS Alcohol consumption NOS Alcohol consumption
-	-

07/01/2008	Sister Anne Henderson at Rutland Surgery
History	Stroke rv - still c/o weakness of (r) arm and leg. ? reduced sensation worse since stroke. Discussed rereferral to stroke team for physio or refer to Live active. Will consider this. Further PR bleeding has been referred to clinic. Previous colonoscopy - nad. Smoking 40 - 60 daily. Has unsuccessfully attempted to stop in past. Advised - re group sessions etc. Chol, u&es, lfts, rbs, ggt (drinks 3 units nightly) priority=2
	Influenza vaccination Site: Right Arm priority=2
	Influenza vacc consent given Recorded through Combined Vaccination priority=2
	Stroke monitoring Rutland Stroke.clm - Repeat after an Interval 12M
	(diary entry deleted) (Not Known)
14/12/2007	Dr R Dale at Rutland Surgery
History	SCI Electronic Referral priority=2
	Referral for further care Referred To: Southern General Hospital, NHS. Referral Type: Out Patient. Speciality Type: Neurology. Referral Nature: Not Specified. , Referral Reason: 1st Seizure Clinic
12/12/2007	Dr R Dale at Rutland Surgery
History	Got out of bed on Sunday morning - collapse, LOC. ? hit head on edge of bed. Does not remember any more about incident. Wife found him and thought he might have been shaking. No tongue biting, slight incontinence. Felt disorientated for the next 24 hours. Now OK. No new weakness or sensory loss. O/E undistressed, PERLA, fundoscopy NAD. CN, CNS intact. HS I+II+0, chest clear. Plan refer epilepsy clinic. priority=2
	Systolic blood pressure
	Diastolic blood pressure
	Systolic blood pressure
	Diastolic blood pressure
03/12/2007	Dr R Dale at Rutland Surgery
History	Gets frustrated and tearful when he is unable to do something due to CVA. Med 3 1 year "depressive illness" priority=2
14/11/2007	Dr M F Shields at Rutland Surgery
History	Combined Vaccination Recall (Influenza) priority=2
	Letter sent to patient Influenza Influenza Vaccination invitation letter sent priority=2
12/11/2007	Dr M F Shields at Rutland Surgery
History	SCI Electronic Referral priority=2
	Referral for further care Referred To: Southern General Hospital, NHS. Referral Type: Out Patient. Speciality Type: General Surgery. Referral Nature: Not Specified. , Referral Reason: Mr Wright Colorectal Dept
09/11/2007	Mr Dr Locum at Rutland Surgery
History	missed colorectal appt x 2. blames this on appt being changed several times and on not speaking to wife who deals with these things for him. no diarrhoea now. colonoscopy normal. still having episodes of red rectal bleeding. rerefer. rpt meds. better on sertraline - mood swings and suicidal thoughts when off - restart. fungal inf feet and IGT - see chiropody. no skin breaks. priority=2
06/09/2007	Sister Anne Henderson at Rutland Surgery
History	requesting sertraline- ?when did he last have it -> TMA priority=2
	Systolic blood pressure
	Diastolic blood pressure
	Systolic blood pressure
	Diastolic blood pressure
	Medication review
10/08/2007	Mr Dr Locum at Rutland Surgery
History	BP check 116/74 --- advised to continue on current anti-hypertensive meds/review BP in 6 months. Still smoking 40cig/day (down from 100!!) advised. Requesting further analgesia and salbutamol inhaler/technique probs with evohaler - advised to try the turbohaler/chemist can show how to use. priority=2
20/06/2007	Dr M F Shields at Rutland Surgery
History	2nd recall letter sent for Hypertension priority=2

	CALM - Hypertension 2nd Letter Sent priority=2
04/06/2007	Mrs Margaret McCoy at Rutland Surgery
History	Total cholesterol measurement 4.6:mmol/L priority=2 Tot Chol Tot Chol date Value text: 25 May 2007 00:00
25/05/2007	Sister Sterling at Rutland Surgery
History	Body mass index 30+ - obesity Disease: SPICE Basic Health Values, priority=2 Current smoker Disease: SPICE Basic Health Values, priority=2 Smoking cessation advice Disease: SPICE Basic Health Values, priority=2 O/E - height O/E - weight O/E - height O/E - weight
14/05/2007	Dr M F Shields at Rutland Surgery
History	1st recall letter sent for Hypertension priority=2 CALM - Hypertension 1st Letter Sent priority=2
08/01/2007	Dr M F Shields at Rutland Surgery
History	Medication review
01/12/2006	Dr R Wolfe at Rutland Surgery
Problem	**Surgical biopsy - colon**
Problem	**Advancement of mucosa of lip NEC** normal mucosa
22/11/2006	Dr R Wolfe at Rutland Surgery
Problem	**Colonoscopy**
13/10/2006	Mrs Phyllis Thompson at Rutland Surgery
History	Influenza vaccination Disease: SPICE Stroke Action, priority=2
27/09/2006	Kathryn at Rutland Surgery
History	Total cholesterol measurement 5.7: priority=2 Tot Chol Tot Chol date Value text: 18 Sep 2006 00:00
21/09/2006	Dr R Dale at Rutland Surgery
History	SCI Electronic Referral priority=2 Referral for further care Referred To: Southern General Hospital, NHS. Referral Type: Speciality Type: Trauma and Orthopaedic Surgery. Referral Nature: , Referral Reason: Orthopeadic Surgery
18/09/2006	Nurse Locum at Rutland Surgery
History	O/E - pulse rate NOS 98: priority=2 O/E - regular pulse : priority=2 General well - being schedule 2: priority=2 Car driver : priority=2 HAD scale: anxiety score 99: priority=2 HAD scale: depression score 99: priority=2 Thinking about stopping smoking 1: priority=2 Advice about weight : priority=2 Wants to lose weight 2: priority=2 Number of portions of fruit and vegetables daily 2: priority=2 Patient initiated diet NOS 2: priority=2 Patient advised re diet : priority=2 Exercise grading 2: priority=2 Exercise grading NOS 2: priority=2 Alcohol intake within recommended sensible limits : priority=2 Alcohol consumption NOS 6: priority=2 Smoking cessation advice ZZZ GMS Smoking Status.clm - No Action Required Stroke monitoring Rutland Stroke.clm - Repeat after an Interval 12M

	(diary entry deleted) (Not Known)
	O/E - pulse rate NOS
	General well - being schedule
	HAD scale: anxiety score
	HAD scale: depression score
	Thinking about stopping smoking
	Wants to lose weight
	Number of portions of fruit and vegetables daily
	Patient initiated diet NOS
	Exercise grading
	Exercise grading NOS
	Alcohol consumption NOS

08/09/2006	Dr R Dale at Rutland Surgery
Problem	**Convergent squint** priority=1
Problem	**[X]Neurotic depression**
Problem	**[X]Deliberate drug overdose / other poisoning** ponstan, trazodone, codeine, inderal priority=1
Problem	**Bilateral vasectomy for contraception** priority=1
Problem	**Simple hiatus hernia** with oesophagitis priority=1
Problem	**Upper Gastrointestinal endoscopy** priority=1
Problem	**CLO test positive**
Problem	**Helicobacter breath test negative** priority=1
Problem	**Haemorrhoids** priority=1
Problem	**ECG normal** priority=1
Problem	**Colonoscopy normal** priority=1
Problem	**Other specified other operation on haemorrhoid** banding priority=1

08/09/2006	Dr R Dale at Rutland Surgery
Problem	**Notes summary on computer** priority=1

03/07/2006	Dr R Dale at Rutland Surgery
History	Systolic blood pressure
	Diastolic blood pressure
	Systolic blood pressure
	Diastolic blood pressure

17/03/2006	Dr R Dale at Rutland Surgery
History	SCI Electronic Referral priority=2
	Referral for further care Referred To: Southern General Hospital, NHS. Referral Type: Speciality Type: General Surgery. Referral Nature: , Referral Reason: Surgical Outpatients

08/03/2006	Sister Anne Henderson at Rutland Surgery
History	Smoking cessation advice Disease: SPICE Hypertension, priority=2
	Systolic blood pressure
	Diastolic blood pressure
	Systolic blood pressure
	Diastolic blood pressure
	Medication review

07/11/2005	Mrs Margaret McCoy at Rutland Surgery
Problem	**Magnetic resonance imaging** brain normal priority=1

31/10/2005	Sister Anne Henderson at Rutland Surgery
Problem	**Pneumococcal vaccination given** priority=1
History	Influenza vaccination Disease: SPICE Basic Health Values, priority=2

26/10/2005	Dr M F Shields at Rutland Surgery
History	Medication review

26/10/2005	Sister Anne Henderson at Rutland Surgery
History	Stroke monitoring Rutland Stroke.clm - Repeat after an Interval 11M
	(diary entry deleted) (Not Known)

22/09/2005	Kathryn at Rutland Surgery
History	Plasma random glucose level 5.1: priority=2
	Plasma random glucose level

20/09/2005	Dr M F Shields at Rutland Surgery
History	Total cholesterol measurement
	Systolic blood pressure
	Diastolic blood pressure
	Systolic blood pressure
	Diastolic blood pressure
	Systolic blood pressure
	Diastolic blood pressure
	Systolic blood pressure
	Diastolic blood pressure
	Total cholesterol measurement
	Systolic blood pressure
	Diastolic blood pressure
	[]
	HAD scale: anxiety score
	HAD scale: depression score
	O/E - pulse rate NOS
	Tot Chol
	Tot Chol date
	Value text: 15 Aug 2005 00:00
	Body Mass Index
	General well - being schedule
	Thinking about stopping smoking
	Wants to lose weight
	Number of portions of fruit and vegetables daily
	Patient initiated diet NOS
	Exercise grading
	Exercise grading NOS
	Alcohol consumption
	Creat
	Creatinine date
	Value text: 15 Aug 2005 00:00
	Tot Chol date
	Value text: 22 Jun 2005 00:00

19/09/2005	Nurse Locum at Rutland Surgery
History	White : priority=2
	O/E - pulse rate NOS 76: priority=2
	O/E - regular pulse : priority=2
	Body Mass Index high K/M2 29.75:kg/m2 priority=2
	General well - being schedule 4: priority=2
	Seen by psychologist : priority=2
	Car driver : priority=2
	Thinking about stopping smoking 1: priority=2
	Advice about weight : priority=2
	Wants to lose weight 2: priority=2
	Obesity monitoring NOS : priority=2
	Number of portions of fruit and vegetables daily 3: priority=2
	Patient initiated diet NOS 2: priority=2
	Patient advised re diet : priority=2
	Exercise grading 0: priority=2
	Exercise grading NOS 1: priority=2
	Health ed. - exercise : priority=2
	Alcohol consumption 21:units/week priority=2
	Serum creatinine 90: priority=2
	Systolic blood pressure
	Diastolic blood pressure
	O/E - BP reading normal B P Screening$$.clm - Repeat after an Interval 12M
	(diary entry deleted) (Not Known)
	O/E - height
	(diary entry deleted) (Not Known)
	O/E - weight
	(diary entry deleted) (Not Known)
	Current smoker ZZZ GMS Smoking Status.clm - No Action Required
	Smoking cessation advice ZZZ GMS Smoking Status.clm - No Action Required
	Health ed. - alcohol ZZZAlcohol Intake$$.clm - Repeat after an Interval 12M
	(diary entry deleted) (Not Known)

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19/09/2005	Mrs Janette Harran at Rutland Surgery
History	Heavy smoker - 20-39 cigs/day : priority=2
-	----
14/09/2005	Mrs Margaret McCoy at Rutland Surgery
History	HAD scale: anxiety score 16: priority=2 HAD scale: depression score 17: priority=2
-	----
24/06/2005	Kathryn at Rutland Surgery
History	Total cholesterol measurement 4.90: [] priority=2
-	----
22/06/2005	Sister Anne Henderson at Rutland Surgery
History	Medication review
-	----
13/05/2005	Mrs Janette Harran at Rutland Surgery
History	Stroke monitoring Rutland Stroke.clm - Repeat after an Interval 12M (diary entry deleted) (Not Known)
-	----
21/04/2005	Sister Sterling at Rutland Surgery
History	Systolic blood pressure Diastolic blood pressure Diastolic blood pressure Systolic blood pressure
-	----
24/03/2005	Kathryn at Rutland Surgery
History	Total cholesterol measurement 5.40: priority=2
-	----
22/03/2005	Sister Anne Henderson at Rutland Surgery
History	Current smoker : priority=2 Smoking cessation advice : priority=2 Systolic blood pressure Diastolic blood pressure O/E - BP reading raised B P Screening$$.clm - Repeat after an Interval 12M (diary entry deleted) (Not Known) Medication review
-	----
26/01/2005	Dr M F Shields at Rutland Surgery
History	1st recall letter sent for Stroke and TIA priority=2 CALM - Stroke & TIA 1st Letter Sent priority=2
-	----
13/12/2004	Mrs Margaret McCoy at Rutland Surgery
History	Systolic blood pressure Diastolic blood pressure Systolic blood pressure Diastolic blood pressure Diastolic blood pressure Systolic blood pressure
-	----
29/11/2004	Dr R Dale at Rutland Surgery
History	Systolic blood pressure Diastolic blood pressure Diastolic blood pressure Systolic blood pressure Medication review
-	----
26/11/2004	Sister Anne Henderson at Rutland Surgery
History	Influenza vaccination Disease: SPICE Basic Health Values, priority=2
-	----
19/08/2004	Dr M F Shields at Rutland Surgery
History	Medication review
-	----
14/06/2004	Mrs Angela Farrell at Rutland Surgery

History	Total cholesterol measurement 4.50: priority=2 Systolic blood pressure Diastolic blood pressure O/E - BP reading normal B P Screening$$.clm - Repeat after an Interval 6M (diary entry deleted) (Not Known)
14/06/2004	Mrs Angela Farrell at Rutland Surgery
History	Heavy smoker - 20-39 cigs/day ZZZ Hp Smoker$$.clm - Repeat after an Interval 12M (diary entry deleted) (Not Known)
20/05/2004	Dr M F Shields at Rutland Surgery
Problem	**Cerebral arterial occlusion**
19/02/2004	Dr R Wolfe at Rutland Surgery
Problem	**Sigmoidoscopy** normal priority=1
09/02/2004	Dr R Dale at Rutland Surgery
History	Systolic blood pressure Diastolic blood pressure O/E - BP stable B P Screening$$.clm - Repeat after an Interval 12M (diary entry deleted) (Not Known)
06/01/2004	Dr M F Shields at Rutland Surgery
History	Medication review
06/01/2004	Sister Anne Henderson at Rutland Surgery
Problem	**Essential hypertension**
Problem	**Current smoker** :
History	Health ed. - smoking priority=2 Smoking cessation advice : priority=2 Systolic blood pressure Diastolic blood pressure O/E - BP reading raised B P Screening$$.clm - Repeat after an Interval 6M (diary entry deleted) (Not Known) Medication review
27/08/2003	Dr M F Shields at Rutland Surgery
History	Medication review
18/08/2003	UnknownUser at Rutland Surgery
History	Referral for further care Referred To: Southern General Hospital, NHS. Referral Type: Speciality Type: Surgical. Referral Nature:
20/05/2003	Dr R Wolfe at Rutland Surgery
History	Systolic blood pressure Diastolic blood pressure O/E - BP stable B P Screening$$.clm - Repeat after an Interval 12M (diary entry deleted) (Not Known)
31/12/2002	Dr M F Shields at Rutland Surgery
History	Medication review
26/11/2002	Dr M F Shields at Rutland Surgery
History	Systolic blood pressure Diastolic blood pressure O/E - BP reading normal B P Screening$$.clm - Repeat after an Interval 1M (diary entry deleted) (Not Known)
26/11/2002	Dr M F Shields at Rutland Surgery
History	Medication review
31/10/2002	UnknownUser at Rutland Surgery

History	Referral for further care Referred To: Southern General Hospital, NHS. Referral Type: Speciality Type: Gastroenterology. Referral Nature:
30/10/2002	Dr M F Shields at Rutland Surgery
History	Systolic blood pressure Diastolic blood pressure O/E - BP borderline raised B P Screening$$.clm - Repeat after an Interval 6M (diary entry deleted) (Not Known)
30/10/2002	Dr M F Shields at Rutland Surgery
History	Medication review
25/09/2002	Dr M F Shields at Rutland Surgery
History	Medication review
25/09/2002	Dr M F Shields at Rutland Surgery
History	Systolic blood pressure Diastolic blood pressure O/E - BP borderline raised B P Screening$$.clm - Repeat after an Interval 6M (diary entry deleted) (Not Known) O/E - weight (diary entry deleted) (Not Known)
25/07/2002	Dr M F Shields at Rutland Surgery
History	Systolic blood pressure Diastolic blood pressure O/E - BP borderline raised B P Screening$$.clm - Repeat after an Interval 6M (diary entry deleted) (Not Known)
25/07/2002	Dr M F Shields at Rutland Surgery
History	Medication review
03/07/2002	Dr M F Shields at Rutland Surgery
History	O/E - weight (diary entry deleted) (Not Known) Systolic blood pressure Diastolic blood pressure O/E - BP reading normal B P Screening$$.clm - Repeat after an Interval 36M (diary entry deleted) (Not Known)
17/06/2002	Dr M F Shields at Rutland Surgery
History	Medication review
20/05/2002	Dr M F Shields at Rutland Surgery
History	Systolic blood pressure Diastolic blood pressure O/E - BP reading raised B P Screening$$.clm - Repeat after an Interval 1M (diary entry deleted) (Not Known) Medication review
20/05/2002	UnknownUser at Rutland Surgery
History	Systolic blood pressure Diastolic blood pressure O/E - BP borderline raised B P Screening$$.clm - Repeat after an Interval 6M (diary entry deleted) (Not Known)
11/04/2002	UnknownUser at Rutland Surgery
History	Systolic blood pressure Diastolic blood pressure O/E - BP borderline raised B P Screening$$.clm - Repeat after an Interval 6M (diary entry deleted) (Not Known)
04/04/2002	Dr R Wolfe at Rutland Surgery

History	Automatically generated by transaction priority=2 Patient reg. form sent to HB priority=2
-	-
04/04/2002	UnknownUser at Rutland Surgery
History	Current smoker ZZZ Smoker$$ Status.clm - No Action Required Systolic blood pressure Diastolic blood pressure O/E - BP reading raised B P Screening$$.clm - Repeat after an Interval 12M (diary entry deleted) (Not Known)