

ACCIDENT & EMERGENCY DEPARTMENT
THE AYR HOSPITAL, DALMELLINGTON ROAD, AYR KA6 6DX Tel: (0292) 610555
 — THIS CARD IS CONFIDENTIAL — IT MUST NOT BE HANDLED BY PATIENTS OR UNAUTHORISED PERSONS



SOUTH AYRSHIRE HOSPITALS
THE AYR HOSPITAL

DALMELLINGTON ROAD
AYR KA6 6DX
Telephone: (0292) 610555
Fax: (0292) 288952

Our ref: JLM/CM

Your ref.

If phoning
please ask for:

ACCIDENT & EMERGENCY/SHORT STAY UNIT

DICTATED 4.2.93

5th February 1993

Dr Low
67 Aftonbridgend
New Cumnock

Dear Dr Low

JOHN MCHARG, 5 GLEBE STREET, NEW CUMNOCK, DOB 9.9.68

This man was admitted through A & E at your request on 1.2.93.
It seems that he had been assaulted and rendered unconscious.
There was some bruising of the face but no fracture. He was
observed uneventfully overnight.

Yours sincerely


LEO MURRAY FRCS MRCP MRCGP DA
CONSULTANT IN ACCIDENT & EMERGENCY CARE

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Acute Hospitals NHS Trust

The Ayr Hospital
Dalmellington Road
Ayr KA6 6DX
Telephone: 01292 610555
Fax:
www.show.scot.nhs.uk/aaht



PSR/ME/647434

DEPARTMENT OF TRAUMA AND ORTHOPAEDICS

MR. P. S. RAE

Date dictated : 21st November 2003
Date typed : 21st November 2003

Dr. R. Lockens,
The Health Centre,
2 Tanyard,
CUMNOCK.

Dear Dr. Lockens,

JOHN MCHARG, 31 GLENLAMONT, NEW CUMNOCK (09.09.68)

DATE OF ADMISSION	:	17.11.03
DATE OF DISCHARGE	:	18.11.03
DIAGNOSIS	:	PROBABLE SOFT TISSUE INJURY LEFT ANKLE
OPERATION	:	APPLICATION OF PLASTER

Mr. McHarg was admitted to the Ayr Hospital having had a further injury to his left ankle. As you know, he is being treated by my colleagues at Crosshouse for a calcaneal and medial malleolar fracture and X-ray showed evidence of both of these injuries but did not show any evidence of any new bony injury. He seemed to be in rather a lot of pain and unwilling to weight bear and, therefore, he has had this rested in a plaster which will be retained for a couple of weeks. I will see him again then when it can be removed.

Yours sincerely

K.

P. S. RAE
CONSULTANT ORTHOPAEDIC SURGEON

Awarded for excellence

Chairman Professor Gordon M Wilson
Chief Executive Jim Currie

STA 2035

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**OUT-PATIENT PHYSIOTHERAPY CLINIC
REFERRAL/DISCHARGE RECORD**

C171

Order	Order No.1	Acct: 04020-00172 Unit: 100-647434
Req D/T: 20/01/04 10.52A		MCHARG, JOHN
Prior: urgent Freq:		31 GLENLAMONT
Trans: no tran		Tel:
Ord Cons: SALIH, K.M.		NEW CUMNOCK
Cur Cons: RAE, P.S.		AYRSHIRE KA18 1HP
Referring GP:		LOCKENS, R (GP)
Iso:	Iv: O2:	DOB: 09/09/68 35Y
Prc:		Ward: OPG
Ht: 0'0.0" / 0.0cm		Rm/Bed: -
Wt: 0lbs / 0.0kg		Cond:
Allergies: NKA		Sex: M
Work Diag: UK		Adm: 20/01/04
Ord Diag:		Svc: OR
		Smk: UNK
		Loc: SHK
		Init: MAHADIK, S

POSTPOP STIFFNESS
fr. calcaneum, int. fixation. (D)
fell again sprain pop.
stiffness
Order: 0010 ASSESS & TREAT
Physio Bias 20/01/04 10.52am
Perf Cons:
Physio:
First Appt:
Received 20/01/04.

3. OTHER RELEVANT INFORMATION (Including Medication):

K.

TO BE COMPLETED BY PHYSIOTHERAPIST:

DATE RECEIVED: 21/1/04 START DATE: 27-01-04 DISCHARGE DATE: 2/3/04

DISCHARGE SUMMARY:

This patient attended for his first Rx
it was advised of exercises, it is Rx
for swelling.
He was for his next 2 appointments
as you have been dx.

Referred on to:

TREATMENT OUTCOME

All Treatment Goals Achieved	
Not all Treatment Goals Achieved	
No Treatment Goals Achieved	✓

Waste Visits	2
No. of Treatments	1

PHYSIOTHERAPIST: LESLEY CHESNED NO: SIGNATURE: Lesley Chesned

*Referral Outpats/proforma

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OUT-PATIENT PHYSIOTHERAPY CLINIC
REFERRAL/DISCHARGE RECORD

C 204/03

STA0162

X- House Hospital

Referral and Treatment Record

Physiotherapy Department

XH 430525
Name: MCHARG JOHN
33 LOGAN AVE
LOGAN
Address: KA18 3HA
09/09/1968
DR. R. LOCKENS
2 TANYARD,
CUMNOCK,
CHI 0909683638

Date of Birth..... Physiotherapy No. C204/03
Tel. No. 07729 124 042 Hospital Care Record No.
Male/Female

DIAGNOSIS AND RELEVANT MEDICAL HISTORY

Avalusion # of left OS-Calcis. Had ORIF.
Ankle movements restricted & painful.
left ankle exercise K.

I confirm that the above patient is not a Private Patient.

Ambulance Transport is *is not required. (*please ☒ box)

1 Man/2 Men ☐ Walking ☐ Chair ☐ Stretcher ☐

Office Use
Appt. Date and Time

Doctor's Signature *Amal* Date 30.10.03 Source of Referral # Clinic
Ambulance arranged ☐ (V)

TO BE COMPLETED BY PHYSIOTHERAPIST:

DATE RECEIVED: 4.11.03 START DATE: 10.11.03 DISCHARGE DATE: 25.11.03

DISCHARGE SUMMARY:

Failed to attend initial
assessment on 10/11/03.
No contact from patient
Discharged

TREATMENT OUTCOME

All Treatment Goals Achieved	
Not all Treatment Goals Achieved	
No Treatment Goals Achieved	

Waste Visits	DNA	1
No. of Treatments		

Referred on to:

PHYSIOTHERAPIST: Alice Scan NO: SIGNATURE: *Alice Scan*
*Referral Out-pat/proforma CUMNOCK HEALTH CENTRE

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rom: Ayresshire Doctors To: 9,01290425444

Page 12 of 16

04:21:23, 21 March 200

Call #: 38443

Received NHS24: 20-Mar-2004 16:46

Full cover

Patient's Name: John Mchart

Date of birth: 09-Sep-1968 (Age: 35 years) Sex: Male

31 Glenlamont Cumnock

KA18 1HP ()

Tel No:

07709 812713

Origin: Drop In At Cen

Urgency:

Routine

Type: PCTC Visit

Consulted by:

McGee, Thomas C

Own Doctor: Strachan, G (Cumnock H

Received ADOC: 16:50

Passed : 16:50

Advised : :_

Arrived : 17:55

Departed : :_

NHS24 Triage Begin :_:_

NHS24 Triage End :_:_

NHS24 Triaged by :

Current Medication:

Time Adoc Advised : :_:_

Advised by :

Time of Visit/Base 17:55

Consulting Doctor : McGee, Thomas C

Outcome :

Had 2 grand mal seizures today. Past head injury. Has no drugs left - says not due to see GP until 25.03.04. Given Dihydrocodeine 30mg x 12, Epilin 500mg x 20, Zopiclone 7.5mg x 6, Diazepam 5mg x 16. Told to contact surgery on 22.03.04 to organise further supplies.

Followups:

Handwritten signature/initials

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Acute Hospitals NHS Trust

The Ayr Hospital
Dalmellington Road
Ayr KA6 6DX
Telephone: 01292 610555
Fax:
www.show.scot.nhs.uk/aaht



PSR/ME/647434

DEPARTMENT OF TRAUMA AND ORTHOPAEDICS

MR P. S. RAE

Date attended : 20th April 2004
Date dictated : 20th April 2004
Date typed : 20th April 2004

Dr. R. Lockens,
The Health Centre,
2 Tanyard,
CUMNOCK.

Dear Dr. Lockens,

JOHN MCHARG, 31 CLENLAMONT, NEW CUMNOCK (09.09.68)

Your patient was seen in the Orthopaedic Clinic today.

Please find overleaf a copy of my clinical findings made at the time of examination.

Yours sincerely

A handwritten signature in black ink, appearing to read 'P. S. Rae'.

P. S. RAE
CONSULTANT ORTHOPAEDIC SURGEON



Awarded for excellence

Chairman Professor Gordon M Wilson
Chief Executive Jim Currie

STA 2035

JOHN MCHARG (647434)

20.04.04

HISTORY:

Mr. McHarg has been referred back by his GP for further review. His problems, or at least his most recent ones, are related to his left foot and ankle where he was treated at Crosshouse at the end of last year for a calcaneal fracture which was screwed. He also had a fracture of the medial malleolus which was treated conservatively. He fell into our care when he had a further injury to it in November of last year when somebody stood on his ankle. It was not considered that there was any new injury at that time and he was treated initially in plaster, subsequently referred to physiotherapy and has had a history of defaulting from follow up appointments here and at physiotherapy.

He feels he has considerable problems. He still feels the ankle is sore and stiff. He also complains of stiffness in his right foot where he had a fracture of the fourth toe three years ago and also a soft tissue injury to his right knee three years ago in a road traffic accident. He feels a lot of his trouble also emanates from his low back where he has a past history of a stable spinal fracture, again following a road traffic accident in 2002.

EXAMINATION:

On examination his right knee has some patello-femoral crepitus, full range of movement, no effusion, the knee feels stable. His right foot shows no evidence of any abnormality. His left ankle is still extremely stiff, it is swollen and indurated, he has dorsiflexion to neutral, plantar flexion of about 30° and a very stiff sub-talar joint.

TREATMENT:

For referral back to physiotherapy and I have stressed to him the importance of attending and attempting to get his foot and ankle going. See here again in two months' time with an up to date X-ray of the left ankle and left os calcis on arrival. Copy to GP. PSR/ME

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General Hospitals Division

The Ayr Hospital
Dalmellington Road
Ayr KA6 6DX
Telephone: 01292 610555



WSH/CW/100647434

EXT 4181

MAXILLOFACIAL SURGERY

MR W S HISLOP

Date of Clinic: 28.09.04.
Date Dictated: 28.09.04.
Date Typed: 29.09.04.

Dr G. Strachan
Cumnock Health Centre
2 Tanyard
Cumnock
KA18 1BF

Dear Gordon,

RE: John McHarg, 31 Glenlamont, New Cumnock. DOB 09.09.68.

Many thanks for asking me to see Mr McHarg. Unfortunately, he has failed to attend for consultation.

I have not arranged a further appointment but will happily see him if you so wish.

Kind Regards.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Stuart Hislop'.

**STUART HISLOP FRCS FDSRCS FDSRCPS
CONSULTANT MAXILLOFACIAL SURGEON**

STA 4138

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OUT-PATIENT PHYSIOTHERAPY CLINIC REFERRAL/DISCHARGE RECORD

Order Order No.2 Acct: 04020-00172 Unit: 100-647434

Req D/T: 20/04/04 10.13A MCHARG, JOHN
Prior: routine Freq: 31 GLENLAMONT
Trans: Walking Tel: 425577
Ord Cons: RAE, P.S. ~~XXXX~~ CUMNOCK
Cur Cons: RAE, P.S. AYRSHIRE KA18 1HP
Referring GP: LOCKENS, R (GP)
Iso: Iv: O2: DOB: 09/09/68 35Y Sex: M
Prc: Ward: OPG Adm: 20/01/04
Ht: 0'0.0" / 0.0cm Rm/Bed: - Svc: OR
Wt: 0lbs / 0.0kg Cond: Smk: UNK
Allergies: NKA Loc: SHK
Work Diag: UK Init: SALIH, K.M.
Ord Diag: 824.0-FX MEDIAL MALLEOLUS-CLOS

ANKLE MED MALL AND CALCANEUS FIXED
Mobilise (he promises to attend this time!)

Perf Cons:
Physio:
First Appt:

Order: 0320 JOINT MOBILISATION
Order:

Physio EACH 20/04/04 10.14am

DATE RECEIVED: 21.4.04 START DATE: 29.4.04 DISCHARGE DATE: 16/8/04

DISCHARGE SUMMARY

DNA last appt. 5/7/04.
R / Ankle strengthening ex.
7 Quads ex
31 Gait re-ed.
Did not complete treatment course
Previous DNA on last referrals
- Jan '04 and Nov '03.

Referred on to:

PHYSIOTHERAPIST: AUCIE SWAN NO:

*Referral-Outpats/proforma

CUMNOCK HEALTH CENTRE.

SIGNATURE: AUCIE SWAN

TREATMENT OUTCOME

All Treatment Goals Achieved	
Not all Treatment Goals Achieved	
No Treatment Goals Achieved	

Waste Visits	DNA	2
No. of Treatments		4

Consistent poor attender
- DNA again

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Patient Services

Consultant: Sam Allen
Infectious Diseases Unit

Crosshouse Hospital
Crosshouse
Kilmarnock KA2 0BE
Telephone: 01563 521133
www.show.scot.nhs.uk/aaaht



Direct Line: 01563 827970
E-mail: Fiona.elliott@aaaht.scot.nhs.uk
Fax: 01563 827978

Chronic Hepatitis Specialist Nurse Clinic – 18th June 2008

JT/MK/430525
CHI No:0909683638.

2nd July 2008

Dr Lowry
The Health Centre
2 Tanyard
CUMNOCK

Dear Dr Lowry

JOHN MCHARG 31 GLENLAMONT CUMNOCK D.O.B. 09/09/68

Previous Hep C PCR – 31.01.06 Genotype: 1a
Latest liver biopsy None grade inflammation of 18
stage fibrosis of 6

Previous hepatitis C treatment - None
Weekly alcohol intake- Nil
Continued risk activities - Nil
Hepatitis A and hepatitis B - fully immunised for both.

Current results: 18th June 2008

Haemoglobin	14.2g/dl
White blood count	11.6x10 ⁹ /l
Platelets	273x10 ⁹ /l
AST	25U/l
ALT	27U/l
Alpha fetoprotein	3kU/l
Hep C PCR has been checked	

This patient with chronic hepatitis C was seen for annual review. He has no complaints and I have informed Dr Allen of this.

He has been advised to abstain from alcohol/need use. We discussed treatments available, but John is unwilling to consider any attempt at treatment.

He will be seen in 1 year.

Yours sincerely

A handwritten signature in black ink that reads 'Jackie Tomnay'.

Jackie Tomnay
Nurse Specialist

STA5000

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ACCIDENT & EMERGENCY DEPARTMENT,
THE AYR HOSPITAL
Tel. 01292 610555

Wednesday 30th March 2005

Dr. GR STRACHAN,
CUMNOCK HEALTH CENTRE
2 TANYARD
CUMNOCK
KA181BF

Dear Dr. Strachan,

JOHN MCHARG
31 GLENLAMONT
CUMNOCK
DoB: 09/09/68
CHI: 0909683638

The above patient attended the Accident & Emergency Department of The Ayr Hospital at 13:43 on 30/03/05. The following information was noted:

Triage Nurse notes	VOMITING FOR 2/7
Diagnosis	UTI
Attendance group	(NONE RECORDED)
Investigations performed	(NONE RECORDED)
Procedures performed	(NONE RECORDED)
Attendance outcome	HOME
Nursing remarks	SEEN BY DR MCNAUGHT
Additional remarks	TRIMETHOPRIM
Follow up plans	GP/GP NURSE

If you require any further information, please phone the A&E Clinical Area direct on 01292 614522 quoting Account Number 05089-00224.

Yours Sincerely,

A&E Department.

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RADIOLOGY REPORT

Name: MCHARG,JOHN
31 GLENLAMONT ,
CUMNOCK
Sex: M DOB: 09/09/68
Location: DIS
Unit #: A100647434

East Ayrshire Hosp

Current Cons: POWELL,GJ (GP)
Requesting Dr: POWELL,GJ (GP)
THE MEDICAL CE 2 TANYARD
Exam Date/Time: 11/03/08 1524

Chk-in #	Order	Code	Exam
997913	0001	1140	Foot*R

Moderate OA changes noted. No acute bony or joint abnormality.

Reported By: Nafisa Paruk

Typed By: CT 27/03/08 1146

ENTERED 31 MAR 2008

Verified

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General Hospitals Division
The Ayr Hospital,
Dalmellington Road
AYR.
KA6 6DX

☎ : 01292 610555



KMS/ME/647434

DEPARTMENT OF TRAUMA AND ORTHOPAEDICS

MR. P. S. RAE

Date of clinic : 23rd February 2005
Date dictated : 23rd February 2005
Date typed : 23rd February 2005

Dr. R. Lockens,
The Health Centre,
2 Tanyard,
CUMNOCK.

Dear Dr. Lockens,

JOHN MCHARG, 31 GLENLAMONT, CUMNOCK (09.09.68)

Your patient was seen at the Orthopaedic Clinic today.

Please find overleaf a copy of my clinical findings made at the time of examination.

Yours sincerely


K. M. SALIH
STAFF GRADE IN ORTHOPAEDICS

S / A 5000

NEW REFERRAL**JOHN MCHARG (647434)**

**DIAGNOSIS : BILATERAL ANTERIOR KNEE PAIN BOTH KNEES
 POST TRAUMATIC STIFFNESS AND OSTEOARTHRITIC
 CHANGES LEFT ANKLE**

23.02.05**HISTORY:**

This gentleman is known to have sustained multiple injuries to his back, right knee and left ankle. He has had internal fixation of fractured os calcis in Crosshouse Hospital. Recently he has developed pain around the left ankle, he has difficulty walking and his ankle has given way once or twice a week. He has difficulty walk and his walking distance is restricted to 200 yards. He also complains of pain in the right knee which sometimes gives way. He has similar symptoms on the left side but not as severe as the right.

EXAMINATION:

On examination of the right knee he has good straight leg raising, good quadriceps. There is palpable clicking at the patello-femoral joint in both patello-femoral joints. Good extension and flexion, ligament stable. There is slight tenderness around the medial surface of the knee. There is no synovial fluid and knee is stable. Patellar apprehension test is positive both knees.

On examination of his left ankle he has residual stiffness in dorsiflexion and in pronation/supination he has some discomfort. There is minimal tenderness around the medial and lateral collateral ligament of the ankle but there is no swelling. Tip-toe walking is difficult and he can manage about two metres with heel walking.

X-ray arranged by his GP in August shows minimal osteoarthritic changes at the talo-navicular and also on the medial side of the ankle. The X-ray also shows a healed fracture of the os calcis with the screws in place.

TREATMENT:

Reassurance given. To continue with painkillers and physiotherapy ordered to both knees and left ankle. Tubigrip given to the knee and see again in four months' time for follow up. Copy to GP. KMS/ME

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ACCIDENT & EMERGENCY DEPARTMENT,
THE AYR HOSPITAL
Tel. 01292 610555

Sunday 28th August 2005

Dr. GR STRACHAN,
CUMNOCK HEALTH CENTRE
2 TANYARD
CUMNOCK
KA181BF
Dear Dr. Strachan,

JOHN MCHARG
31 GLENLAMONT
CUMNOCK
DoB: 09/09/68
CHI: 0909683638

The above patient attended the Accident & Emergency Department of The Ayr Hospital at 16:08 on 28/08/05. The following information was noted:

Triage Nurse notes	PAIN RT LEG INJ SITE CHEST PAIN ?
Diagnosis	(NONE RECORDED)
Attendance group	(NONE RECORDED)
Investigations performed	(NONE RECORDED)
Procedures performed	(NONE RECORDED)
Attendance outcome	DID NOT WAIT
Nursing remarks	(NONE RECORDED)
Additional remarks	(NONE RECORDED)
Follow up plans	(NONE RECORDED)

If you require any further information, please phone the A&E Clinical Area direct on 01292 614522 quoting Account Number 05240-00081.

Yours Sincerely,

A&E Department.

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Ayrshire & Arran
ACUTE HOSPITALS NHS TRUST

OUT-PATIENT PHYSIOTHERAPY CLINIC
REFERRAL/DISCHARGE RECORD

C46/05

Order Order No.1 Acct: 05054-00106 Unit: 100-647434

Req D/T: 23/02/05 10.16A MCHARG, JOHN
Prior: routine Freq: 31 GLENLAMONT
Trans: no tran Tel:
Ord Cons: RAE, P.S. CUMNOCK
Cur Cons: RAE, P.S. AYRSHIRE KA18 1HP
Referring GP: LOCKENS, R (GP)
Iso: Iv: O2: DOB: 09/09/68 36Y Sex: M
Prc: Adm: 23/02/05
Ht: 0'0.0" / 0.0cm Rm/Bed: - Svc: OR
Wt: 0lbs / 0.0kg Cond: Smk: UNK
Allergies: NKA Loc: SHK
Work Diag: UK Init: SALIH, K.M.
Ord Diag:

ANT. KNEE PAIN
bilatertal ant. knee pain, post
traumatic oa changes l. ankle.

Perf Cons:
Physio:
First Appt:

Order: 0010 ASSESS & TREAT
Order:

Physio ~~BACH~~ 23/02/05 10.18am

DATE RECEIVED: 24.2.05 START DATE: 2.5.05 DISCHARGE DATE: 20.6.05

DISCHARGE SUMMARY

Did not attend last appt. on 18/5/5.
Initial assessment only
* gait re-ed
* encouraged to attend local gym
* consider mountain bike
No contact from pt
- discharged

Referred on to:

TREATMENT OUTCOME

All Treatment Goals Achieved	
Not all Treatment Goals Achieved	
No Treatment Goals Achieved	

Waste Visits	0 NA	1
No. of Treatments		1

PHYSIOTHERAPIST: Alice Sear NO: _____
Cumnock H.C

SIGNATURE: Alice Sear

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PATIENT SERVICES

Department of Oral & Maxillofacial Surgery
Mr W S Hislop, Consultant Maxillofacial Surgeon
Direct Line: ☎ 01563 577488
Fax No: ☎ 01563 577300

Secretary: Ms Denise Fagan
Email: Denise.Fagan@aaaht.scot.nhs.uk

CW/EMck/ XH - 430525
CHI No: 0909683638

Crosshouse Hospital
Crosshouse
Kilmarnock KA2 0BE
Telephone: 01563 521133
Fax:
www.show.scot.nhs.uk/aaaht



Clinic date: 21st December 2006
Date typed: 24th January 2007

Dr Karen Lowry
Tanyard Medical Practice
2 Tanyard
CUMNOCK
KA18 1BF

Dear Dr Lowry

JOHN MCHARG, 33 LOGAN AVENUE, LOGAN, KA18 3HA.
DOB - 09/09/1968

Many thanks for your referral. Unfortunately, your patient failed to attend his appointment. We don't plan to see him again.

Kind regards,

Yours sincerely,

Craig Wales FDSRCS (Edin) MRCS
Specialist Registrar in Oral and Maxillofacial Surgery



Awarded for excellence

STA 5006

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Department of General Surgery
The Ayr Hospital
Dalmellington Road
AYR
KA6 6DX

☎ : 01292 610555



GENERAL SURGERY

MR M CHUDY
CONSULTANT SURGEON

Dr G J Powell
Cumnock Health Centre
2 Tanyard
CUMNOCK

Date Admitted 16.01.08
Date Discharged 16.01.08
Date Dictated 22.01.08
Date Typed 23.01.08

Our Ref MC/FS/100-647434
CHI 0909683638

Enquiries to Frances Scott
Extension 14864
Fax 01292 616451
E-mail : Secretary – frances.scott@aaaht.scot.nhs.uk

Dear Dr Powell

JOHN McHARG, 31 GLENLAMONT, CUMNOCK : DOB 09.09.68

Diagnosis : Non-specific abdominal pain
Treatment : Conservative
Follow up : None planned

John McHarg was admitted as an emergency under my care with symptoms of right upper quadrant and epigastric discomfort. He told us he had been having these problems for a couple of months now. He is Hepatitis C positive and epileptic post head injury. He also has a history of drug abuse and is currently on Methadone and Dihydrocodeine.

On examination, he had a gentle tenderness in the right upper quadrant. Murphy's sign was negative. Chest x-ray was normal. Abdominal x-ray showed faecal loading in the ascending and transverse colon. His bloods came back as entirely normal. Urine dipstick was normal as well.

He was treated conservatively, opened his bowels with very good results and his discomfort settled down after this.

He was discharged back home and there are no plans to review him in our clinic.

Kind regards

Yours sincerely

MR MICHAL CHUDY
CONSULTANT SURGEON

STA 5000

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16/01/2008 18:42 FAX		STATION 2 AYR HOSPITAL		001	
Ayr Hospital, Dalmellington Road, Ayr, KA6 6DX Phone: 01292 610 555		Immediate Discharge Letter & Prescription			
Date: 16-Jan-2008 @ 11:26				Page 1 of 1	
To: POWELL, Dr. GJ, THE MEDICAL CENTRE, 2 TANYARD, CUMNOCK, KA18 1BF		Re: JOHN MCHARG 31 GLENLAMONT, CUMNOCK, KA13 1HP DOB: 09/09/1968 Hosp. No.: 100647434 CHI No.: 0909683638			
Date of Admission: 16/01/2008		Ward: STATION 2-AYR			
Mode of Admission: Emergency Admission		Consultant: MR MICHAEL CHUDY (Surgical)			
Discharge Date: 16/01/2008		Outpatient Follow-up on:			
Admission Reason: ABDO PAIN		Diagnosis: CONSTIPATION			
Allergy/Intolerance		Reaction			
No allergy details recorded on system					
Allergy records are as recorded on the Ayr Hospital HEPMA system at time and date of printing (see above).					
Procedures:		ADMITTED FOLLOWING AN EXACERBATION OF CHRONIC ABDOMINAL PAIN. BELIEVED TO BE DUE TO CONSTIPATION THEREFORE LAXATIVES HAVE BEEN STARTED. NO OTHER CHANGES TO MEDICATION. NO FOLLOW UP ARRANGED.			
Drug	Dose	Route	Frequency	Days Supply	GP to continue
LACTULOSE Oral Solution	20 mL	Oral	TWICE daily - 7am; 10pm	28	Yes
SENNA 7.5 mg Tablets	5 mg	Oral	ONCE daily at 10pm	28	Yes
Medicines discontinued during admission (admission medicines only)					
Drug	Date	Discontinued by	Discontinuation reason		
None recorded					
**** Warning - accuracy of information in this section is dependent on details entered by user's clinician HEPMA system. **** **** Information here may be incomplete and is for guidance only. ****					
Discharged by: DR CATHERINE GILBERT		Dispensed by:			
Grade: Junior House Officer		Checked by:			
Bleep:		Date: 16/1/08			
Originally Printed: 16/01/2008 @ 11:26		GP Copy 1/2			

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Patient Services

Consultant: Glyn R Williams
Infectious Diseases Unit

Crosshouse Hospital
Crosshouse
Kilmarnock KA2 0BE
Telephone: 01563 521133



Direct Line: 01563 577970 e-mail: ann.lundie@aaaht.scot.nhs.uk Fax: 01563 577978
Clinics: Travel Clinic 10.00 a.m. Tuesday (ACH), Outpatients 2.00 p.m. Tuesday (ACH)
HTV/Hep B/Hep C Clinic 10.00 a.m. Thursday (Crosshouse)

GRW/AL/430525
 CHI No. 0909683638

2nd February 2006

Dr I T Christie
 The Health Centre
 2 Tanyard
 CUMNOCK

Dear Dr Christie

Re: John McHarg DoB 9.9.68 31 Glenlamont Cumnock

Thank you for referring this 37-year-old unemployed man with chronic hepatitis C, whom I saw for baseline assessment on 31st January 2006. He recalls his first positive test to be in September 2005 and believes he had his last negative test in early 2004. His risk activities have been from sporadic needle use from 2001 up to date. He feels he has injected no more than 20 times. He has shared equipment and he believes his current partner is hepatitis C antibody positive but PCR negative. He has never been jaundiced, had blood transfusion only at birth, and has several tattoos and piercings done both professionally and by self. His only complaint is of occasional tiredness.

He is currently on Efexor, Zimovane, Diazepam, Dihydrocodeine, Esomeprazole and Methadone. He plans to reduce the latter. He has no known allergies. In the past he has had three car related accidents, and he suffers from anxiety, depression and paranoia under review by Dr Bett from Ailsa. He has hypercholesterolaemia. His dad died from spinal tuberculosis and mum has Parkinson's. He has 7 children, the youngest aged 2, whom he thinks has been tested and is negative. He is unemployed, smokes 15 cigarettes a day, and has taken no alcohol for 10 years. He has no pets, has been abroad for one week only to Amsterdam, and has received one hepatitis A immunisation. He is planning a full clearance of his carious teeth later this year.

On examination he appeared well, had no enlarged lymph nodes and no signs of chronic liver disease other than mild liver palms. There was no hepatosplenomegaly. Blood pressure was 105/70mm.Hg.

I/



Awarded for excellence

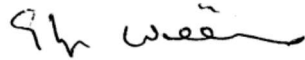
Free

I have checked bloods for possible aetiologies of chronic liver inflammation.

We discussed the natural history and infectivity of chronic hepatitis C, particularly that if he was infected over the last year, there is little risk of fibrosis over the next decade or so from the virus alone though there may be previous damage from his earlier drinking

He will be reviewed with his results in 2 months.

Yours sincerely



Glyn R Williams
Consultant in Infectious Diseases

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A&E Department, Ayr Hospital, Dalmellington Road, Ayr KA6 6DX

If you require further information, phone A&E Clinical Area on
01292-614522, quoting account number 08015-00549

To Dr.: GJ (GP) POWELL
THE MEDICAL CENTRE
2 TANYARD
CUMNOCK
KA181BF

JOHN MCHARG DOB 09/09/68
31 GLENLAMONT

CUMNOCK;;KA181HP
CHI 0909683638

Your patient attended the Ayr Hospital on 15/01/08
at 20:52.

Triage nurse described problem as:

rt sided abdo pain/rectal bleeding

Investigations ordered:

HAEMATOLOGY; CROSS MATCH; BIOCHEMISTRY; NEAR PATIENT TESTING; FUL

Procedures

VASCULAR ACCESS: no venflon left in, bloods taken.

Diagnosis

GASTROINTESTINAL^-ABDO PAIN/ RECTAL BLE

Outcome of attendance was:

ADMITTED

Nursing remarks were:

admit tost 2.

Additional remarks were:

(None recorded)

Follow up plans were:

(None recorded)

Yours Sincerely,

A&E Department.

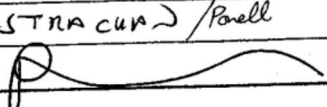
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**OUT-PATIENT PHYSIOTHERAPY CLINIC
REFERRAL/DISCHARGE RECORD**

NAME:	MCHARG, John 31 Glenlamont CUMNOCK KARIB 1HP Dr G Strachan 2 Tanyard, Cumnock	PHYSIO NO.:	258/06
ADDRESS:		D.O.B.:	9/9/68
PRACTICE:		TELEPHONE NO.:	01254 891111
GP (Print Name):	STRACHAN / Powell	REFERRAL DATE:	18/5/06
GP SIGNATURE:		GP REF:	A80171

1. DIAGNOSIS:
 MECHANICAL BACK PAIN
 → @ L6

2. REASON FOR REFERRAL:
 SLR ~ 30° positive @

3. OTHER RELEVANT INFORMATION (Including Medication):
 PAIN 2mg 3x daily / 6p.m. 15mg
 0.5 of 118 / 2026007 / 6+6x02 / 21mg 0.6 / 6p.m. 11mg

TO BE COMPLETED BY PHYSIOTHERAPIST:
 DATE RECEIVED: 18/5/6 START DATE: 12.10.06 DISCHARGE DATE: 8/12/6

DISCHARGE SUMMARY:
 FTA 24/11/6 D/C 8/12/6.

Referred on to:

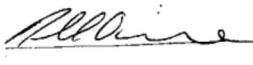
TREATMENT OUTCOME

All Treatment Goals Achieved	☐
Not all Treatment Goals Achieved	☒
No Treatment Goals Achieved	☐

Waste Visits	1
No. of Treatments	4

PHYSIOTHERAPIST: ORANIZ

NO:

SIGNATURE: 

*Referral Outpatients/proforma

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Patient Services

Consultant: Glyn R Williams
Infectious Diseases Unit

Crosshouse Hospital
Crosshouse
Kilmarnock KA2 0BE
Telephone: 01563 521133
Fax:
www.show.scot.nhs.uk/aaaht



Direct Line: 01563 577970 e-mail: ann.lundie@aaaht.scot.nhs.uk Fax: 01563 577978
Clinics: Travel Clinic 10.00 a.m. Tuesday (ACH), Outpatients 2.00 p.m. Tuesday (ACH)
HIV/Hep B/Hep C Clinic 10.00 a.m. Thursday (Crosshouse)

GRW/AL/430525
CHI No. 0909683638

16th March 2006

Dr I T Christie
The Health Centre
2 Tanyard
CUMNOCK

Dear Dr Christie

Re: John McHarg DoB 9.9.68 31 Glenlamont Cumnock

Further to my letter of 2nd February John was reviewed with his results in clinic on 16th March 2006. These results confirmed that he had chronic hepatitis C with positive hepatitis C PCR, of genotype 1a. He was susceptible to both hepatitis A and hepatitis B. Transaminases had been mildly elevated at 42 and 59u/l for AST and ALT respectively. INR and alpha fetoprotein were normal. No other cause for liver inflammation was determined. Rheumatoid factor was positive at 64iu/ml (titre of 1/160).

His weight was down slightly to 66.5 kilograms mainly he said because of poor appetite. I advised him to continue regular feeding, even when no appetite, to maintain nutrition. His Methadone is down to 94 mls per day and he remains on his other medication. He remains off alcohol.

He received his first dose of hepatitis B vaccine and a booster of his hepatitis A vaccine that he had received in the practice last year. As he believes his infection has only been in the last 2 years, we will continue annual review, and attempt clearance when he is hopefully on less medication, that may interact, than at present.

Yours sincerely

Glyn R Williams
Consultant in Infectious Diseases



Awarded for excellence

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Biomechanics Department
East Ayrshire Community Hospital
Cumnock
Tel: 01290 426629



PODIATRY SERVICES

Patient's Name..

Address..... JOHN MCHARG
31 GLENLAMONT, CUMNOCK
D.O.B. 09/09/68
Post Code..... GP DR STRACHAN
CUMNOCK

DOB.....

CHI No.....

Place
Patient Label
Here

Dear *London*

The above patient attended the
Biomechanics Clinic, as a new patient on: *17/1/06*

Complaining of: *pain in left foot, mainly heel*
of fracture.

The following examinations were carried out:

Gait Analysis ☒

Joint Range Assessment ☒

Footwear evaluation & Advice ☒

On Examination *to perform various causing pain*
along lateral border R foot

TREATMENT PLAN

AIM

Casted Orthotic/s ☒ *To stabilise S.I. & reduce pain*

Non Casted Appliances ☒ *R heel raise*

Advice ☐

Monitoring ☐

Discharged ☐ Date / /

The orthotic(s) / appliance(s) were fitted and verbal and written instructions given.

The patient will be reviewed on *20/4/06*, the outcome of which will be
communicated to you once the patient is discharged.

Yours sincerely,

Dr Shaw

New Patient Letter

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Patient Services

Annandale Suite - Day Surgery Unit
Crosshouse Hospital
Kilmarnock
KA2 0BE



Our ref: AN/AB/430525
CHI: 0909683638

Dict: 08/02/07
Typ: 07/03/07

Enquiries to: Mrs Karen Gilroy
Extension: 2250
Direct Line: 01563 577250
Fax: 01563 577249
E-mail: Karen.Gilroy@aaaht.scot.nhs.uk

Dr Lowry
The Health Centre
2 Tanyard
CUMNOCK

Dear Dr Lowry

JOHN MCHARG 31 GLENLAMONT CUMNOCK DOB: 09/09/68

Date of Admission: 08/02/07
Date of Operation: 08/02/07
Date of Discharge: 08/02/07
Diagnosis: Carious upper teeth and lower posterior teeth
Operation: Surgical removal LL5, 8, LR8 and extraction
UL8, 6, 5, 3, 1, UR1, 2, 3, 4, 5, 6, 7 and 8 root
Investigations: Routine x-rays
Complications: Nil
Drugs on discharge: Co-codamol 1-2 tabs 4-6 hourly as required for 5 days
Follow-up: No review appointment

Mr McHarg had the above operation carried out in our Day Surgery Unit without event. We have not arranged to see him, but would be happy to do so, should this be necessary.

Yours sincerely


Ainsley Ness
Locum Specialist Registrar
Maxillofacial Surgery

STA 5000

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PATIENT SERVICES

Department of Oral & Maxillofacial Surgery
Mr W S Hislop, Consultant Maxillofacial Surgeon
Direct Line: ☎ 01563 577488
Fax No: ☎ 01563 577300

Crosshouse Hospital
Crosshouse
Kilmarnock KA2 0BE
Telephone: 01563 521133
Fax:
www.show.scot.nhs.uk/aaaht

NHS
**Ayrshire
& Arran**

Secretary: Ms Denise Fagan
Email: Denise.Fagan@aaaht.scot.nhs.uk

Our Ref: JI/EMcK/XH - 430525
CHI: 0909683638

Clinic date: 7th December 2006
Date typed: 16th January 2007

Dr Karen Lowry
Tanyard Medical Practice
2 Tanyard
CUMNOCK
KA18 1BF

Dear Dr Lowry

JOHN MCHARG, 31 GLENLAMONT, CUMNOCK, KA18 1HP.
DOB - 09/09/1968

I saw the above patient in the Oral and Maxillofacial Surgery Out-Patient Clinic today on behalf of Mr Hislop. You may recall that this was with regards to pain in relation to old upper teeth

Mr McHarg was allegedly assaulted in April 1996. He had a right malar osteotomy in July 1997. He has been complaining of pain in relation to the upper teeth as well as pain in the right ear since then. Medically, this patient has gastric ulcers. He has also been diagnosed with Hepatitis C. However, Hep B and HIV are negative. He is currently being immunised against Hep B. There is a history of seizures following trauma in 1996 but he has not had any seizures for the last 3 years and he is on Epilim. He also suffers from osteoporosis. He is Methadone 86 mls per day.

On examination most of his upper teeth have decayed or filling with secondary decay. Mr McHarg wanted all of his teeth extracted. However, most of his lower teeth are healthy and firm and after discussion with him I have decided to plan for extraction of the lower left 5 and 8 along with all remaining upper teeth under general anaesthetic in the Day Surgery Unit. I have taken bloods today for FBC, U&E's LFT's as well as a coag screen. I am bringing Mr McHarg back to the clinic in 2 weeks to check the blood results. We shall keep you informed regarding this patient.

With kind regards.

Yours sincerely



Jaya Indira
Senior House Officer in Oral & Maxillofacial Surgery



Awarded for excellence

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PATIENT SERVICES**Department of Oral & Maxillofacial Surgery**

Mr W S Hislop, Consultant Maxillofacial Surgeon

Direct Line: ☎ 01563 577488

Fax No: ☎ 01563 577300

Secretary: Miss Denise Fagan

Email: Denise.Fagan@aaaht.scot.nhs.uk

Crosshouse Hospital

Crosshouse

Kilmarnock KA2 0BE

Telephone: 01563 521133

Fax:

www.show.scot.nhs.uk/aaaht

Our Ref: HP/MK/XH-430525
CHI: 0909683638

Clinic date: 29th December 2006
Date Typed: 26th January 2007

Dr Karen Lowry
The Health Centre
2 Tanyard
CUMNOCK

Dear Dr Lowry

JOHN MCHARG 31 GLENLAMONT CUMNOCK D.O.B. 09/09/68

Further to previous correspondence, I reviewed your patient today with his blood results. I enclose a copy for your benefit. His LFT's were altered. However, his Coag was normal and we shall proceed with the extractions as planned.

We shall of course keep you informed.

Kind regards,

Yours sincerely

A handwritten signature in black ink, appearing to read 'Hazel Pahnke', written over a large, diagonal, semi-transparent watermark that says 'THIRD PARTY COPY'.

Hazel Pahnke
SHO in Oral & Maxillofacial Surgery

Enc.



Awarded for excellence

STA 5000

9000185036, JOHN MCHARG, DOB: 09/09/1968, Sex: M (sample B.06.703313)

Page 1 of 2

Radiology Results displayed are **verified reports only**All results from Occupational Health and GUM clinics **are suppressed**.All Gonorrhoea, Chlamydia, Pertussis, and Pregnancy tests **are suppressed**.Samples requesting the following will have **all results from that sample suppressed** - HIV, HepB, HepC and Syphilis.DEPARTMENT OF
BIOCHEMISTRY

Name: John MCHARG D.o.B: 09/09/1968 Sex: M

CHI No.: 0909683638

Patient ID: 9000185036

Address: 31 GLENLAMONT, , CUMNOCK, , KA18 1HP

Laboratory Number: B.06.703313 Sample Site: Unspecified

Requester: Hislop, W S (Mr) Sample Date: 07/12/2006 12:00

Location: Crosshouse Hosp. Maxillofacial Clin

Coded Sample Comments:

This Investigation Contains ABNORMAL Results.

Description	Value	Normal Range	Units	H/L	Comment
Investigation: Liver Function Tests Auth. Date: 07/12/2006 16:25					
Total Bilirubin	5	3-15	umol/l		
Alkaline Phos.	100	46-157	U/l		
Aspartate Aminotransferase	45	10-40	U/l	Hi	
Alanine Transferase	63	10-50	U/l	Hi	
Total Protein	85	63-83	g/l	Hi	
Albumin	47	39-51	g/l		
Globulin	38	21-35	g/l	Hi	

This Investigation Contains ABNORMAL Results.

Description	Value	Normal Range	Units	H/L	Comment
Investigation: Full Blood count Auth. Date: 07/12/2006 15:29					
Haemoglobin	14.2	13.5-18.0	g/dl		
White Cell Count	10.1	4.0-11.5	x 10 ⁹ /l		
Platelets	265	100-500	x 10 ⁹ /l		
Red Cell Count	5.24	4.20-6.50	x 10 ¹² /l		
Haematocrit	0.440	0.400-0.550			
Mean Cell Volume	85	79-100	fl		
Mean Cell Haemoglobin	27.1	25.0-32.0	pg		
Mean Cell Haemoglobin Concentration	32.1	30.0-36.0	g/dl		
Neutrophils	5.3	1.5-7.5	x 10 ⁹ /l		
Lymphocytes	3.9	1.5-3.5	x 10 ⁹ /l	Hi	
Monocytes	0.6	0.2-1.0	x 10 ⁹ /l		
Eosinophils	0.2	0.0-0.5	x 10 ⁹ /l		

<http://skye/results/patient/dreport.asp>

26/01/2007

9000185036, JOHN MCHARG, DOB: 09/09/1968, Sex: M (sample B.06.703313)

Page 2 of 2

Basophils	0.0	0.0-0.1	x 10 ⁹ /l		
-----------	-----	---------	----------------------	--	--

Description	Value	Normal Range	Units	H/L	Comment
Investigation: Urea & Electrolytes Auth. Date: 07/12/2006 16:25					
Urea	5.4	2.5-7.5	mmol/l		
Creatinine	90	50-125	μmol/l		
Sodium	142	135-145	mmol/l		
Serum Potassium	4.6	3.5-5.0	mmol/l		
Chloride	99	95-108	mmol/l		
Bicarbonate	27	22-33	mmol/l		
eGFR (Female)			ml/min		

Description	Value	Normal Range	Units	H/L	Comment
Investigation: Coagulation Screen Auth. Date: 07/12/2006 15:29					
APTT Activated Partial Thromboplast	27	25-31	sec		
PT	9	9-13	sec		
Fibrinogen	370	150-400	mg/dl		
Thrombin Time	N/A	10-14	sec		

HAEMATOLOGY REPORT

<http://skye/results/patient/dreport.asp>

26/01/2007

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Department of Radiology

UNIVERSITY HOSPITAL AYR
Medical Imaging Department
Dalmellington Road
AYR
KA6 6DX



RADIOLOGY REPORT

CHI NUMBER: 0909683638 Examination Number: 34335120 Examination Date: 11/06/2016

Name: **MCHARG, JOHN DOB: 09/09/1968**

Address: 82 KEIR HARDIE HILL, CUMNOCK, AYRSHIRE, KA18 1PS - CC: -

Referring Department / Location: Amin.Mutaz

The Healthcentre
2 Tannyard

Cumnock
KA18 1BF

Referring Consultant: GP Requestor

Date Dictated: 13/06/2016

Typed by: None

Examination: XR Chest

Clinical Indication

Report:

Chest.

No active heart or lung lesions seen

Dictating Radiologist / Clinical Specialist **Bell, Peter (Loc Rad)**

Verified by: Bell, Peter (Loc Rad)

ENTERED - 8 JUN 2016

Page 1 of 1



Examination Number: 34335120 Examination Date: 11/06/2016
Name: **MCHARG, JOHN DOB: 09/09/1968**
Dose :- 9.14 cGy cm2

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Department of Radiology

UNIVERSITY HOSPITAL AYR
Medical Imaging Department
Dalmellington Road
AYR
KA6 6DX



RADIOLOGY REPORT

CHI NUMBER: 0909683638 Examination Number: 34285755 Examination Date: 11/06/2016

Name: **MCHARG, JOHN DOB: 09/09/1968**

Address: 82 KEIR HARDIE HILL, CUMNOCK, AYRSHIRE, KA18 1PS - CC: -

Referring Department / Location: Amin.Mutaz

The Healthcentre
2 Tannyard

Cumnock
KA18 1BF

Referring Consultant: GP Requestor

Date Dictated: 11/06/2016

Typed by: None

Examination: US Abdomen

Clinical Indication

Abdo swelling ? cause

Report:

The left lobe of the liver was not accessible with ultrasound scan.

Sub optimal images of the liver were obtained due to patient body habitus. The right lobe of the liver appears bright and attenuation suggestive of fatty infiltration. A reliable flow direction within the Portal vein was not confidently identified on Doppler examination.

The gallbladder bile ducts, abdominal aorta, kidneys and spleen appear normal.

The pancreas was obscured therefore not examined.

No obvious ascites.

Dictating Radiologist / Clinical Specialist **Gayle Siedlecki (Radiographer)**

Verified by: **Gayle Siedlecki (Radiographer)**

ENTERED 16 JUN 2016

Page 1 of 1



Examination Number: 34285755 Examination Date: 11/06/2016
Name: MCHARG, JOHN DOB: 09/09/1968
Dose :-

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Dr AT Hand Dr E Ofei Dr A Stevenson Dr A Krichell Dr S Learmonth Dr F Gibson

Dr. R LOCKENS
TANYARD MEDICAL PRACTICE
THE HEALTH CENTRE
2 TANYARD
CUMNOCK
KA18 1BF

Accident and Emergency
Ayr Hospital
Dalmellington Road, Ayr, KA6 6DX

Phone: 01292 614615
Fax: 01292 288105

Duty Consultant Dr TERESA HAND

John Mcharg
82 KEIR HARDIE HILL
CUMNOCK, KA18 1PS

DOB: 09/09/1968
A/E No: AYR-16-009094
CHI No: 0909683638

Date and Time of Attendance: 17 Mar 2016 01:34
Total A&E Attendances = 25 , attendances in last year = 0

Diagnosis Constipation

Treatment Drug given in A+E

Drugs:

Investigations X-Ray , Lumbar spine, Chest

Follow up: Discharge, no follow up

Usual place of residence

Additional Information: right flank pain worse with movement. AXR fecal loading. Decreased disc space at lower thoracic level. Observations satisfactory. Advised on diet, simple analgesia , laxatives and to seek advice if not improved

Tanvir Abbass
ED SHO

If you have any queries about this patient, please contact one of the staff at the above number.

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Department of Radiology

EAST AYRSHIRE COMMUNITY HOSPITAL
Medical Imaging Department
Ayr Road
CUMNOCK
KA18 1EF

**RADIOLOGY REPORT**

CHI NUMBER: 0909683638 **Examination Number:** 33737378 **Examination Date:** 09/11/2015

Name: Mcharg, John **DOB:** 09/09/1968

Address: 135 Keir Hardie Hill, Cumnock, Ayrshire, KA18 1PR -- **CC:** -

Referring Department / Location: Amin.Mutaz

The Healthcentre
2 Tannyard

Cumnock
KA18 1BF

Referring Consultant: GP Requestor

Date Dictated: 09/11/2015 **Typed by:** None

Examination: US Abdomen, US Kidneys

Clinical Indication

Right sided abdo pain pmh hep c

Report:

The left lobe of the liver was inaccessible to examination by ultrasound. Otherwise the liver appears normal. Normal directional flow is observed within the main portal vein.

The pancreas was obscured by bowel gas.

The gallbladder, bile ducts, spleen, abdominal aorta and both kidneys appear normal.

Dictating Radiologist / Clinical Specialist Penny McRoberts (Sonographer)

Verified by: Penny McRoberts (Sonographer)

Page 1 of 1



Examination Number: 33737378 **Examination Date:** 09/11/2015
Name: Mcharg, John **DOB:** 09/09/1968
Dose :-

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AYR HOSPITAL
DALMEINGTON ROAD
AYR

Ward
Telephone:

Page 1/1

EXERCISE STRESS TEST REPORT

Patient Name: McHarg, John
Patient ID: 0909683638
Height:
Weight:
DOB: 09-09-1968
Age: 48yrs
Gender: Male
Race:

Study Date: 31-03-2017
Test Type:
Protocol: BRUCE
Referring Physician:
Attending Physician:
Technician: ANGELA HEWITT

Medications:

Medical History:

Reason for Exercise Test:

Exercise Test Summary

Phase Name	Stage Name	Time In Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	STANDING	00:01			78		
	WARM-UP	01:07	0.10	0.00	81	114/80	
EXERCISE	STAGE 1	03:00	1.70	10.00	96	132/80	
	STAGE 2	00:07	2.50	12.00	97		
RECOVERY		04:36	0.00	0.00	77	76	

The patient exercised according to the BRUCE for 3:06 mins, achieving a work level of Max METS: 4.70. The resting heart rate of 79 bpm, rose to a maximal heart rate of 98 bpm. This value represents 56% of the maximal age predicted heart rate. The resting blood pressure of 114/80 mmHg, rose to a maximum blood pressure of 132/80 mmHg. The exercise test was stopped due to Leg discomfort.

Interpretation

Summary: Resting ECG: normal. Functional Capacity: markedly decreased (by >40%). HR Response to Exercise: appropriate. BP Response to Exercise: normal resting BP - appropriate response. Chest Pain: none. Arrhythmias: none. ST Changes: Depression upsloping.

Conclusions

Patient asked test to be stopped repeatedly due to upper leg burning pain, both legs.
No angina type symptoms
No significant ST changes
Inconclusive test
No pain or ST changes
Physician: *Questionnaire - possible angina*
Technician: *Gr 3 run HR 98/min Led by leg pain*
Negative, led to
Angela Hewitt

IT QUESTIONNAIRE

NAME:- Sami Mervan
 HOSP NO:- 0904683638
 GP:- Dr. Lakshmi

CHEST PAIN

SITE.....describe (C) S.O.E.D

DATE:-

NATURE.....describe (crushing, squeezing, burning, stabbing) Crushing

RADIATION..... (arm(s), neck, back, jaw, teeth) None

LAST OCCURRENCE 2 days Ago FREQUENCY stable Increasing

PRECIPITATION

Does the pain occur on EXERTION? If so what. Yes, No, Waking

Is this Predictable? No

Does it occur at rest? Yes

What else brings on the Pain? Stress

ASSOCIATED FEATURES

Sweating..... ☒

Breathlessness..... ☒

Panic..... ☒

Nausea..... ☒

DURATION OF ATTACKS

relieving factors:-

rest (how long) :-

GTN (how long):-

No. Rest

RISK FACTORS

Is there a history of :-

Diabetes.....

PH

FH

High blood pressure...

Myocardial Infarction...

High cholesterol....

Peripheral vascular disease

Stroke/TIA.....

SMOKING

Yes / No / Ex

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

Unique Care Pathway Number: 101013186606G

REFERRAL LETTER
 MEDICAL IN CONFIDENCE

CHI:0909683638

REFERRAL TO
 CardiologyA2
 AA RACPC - ETT Open Access

 University Hospital Ayr
 Dalmellington Road
 Ayr
 KA6 6DX

 Ethnic Origin
 Language Interpreter
 req'd
 Religion
 Religious
 Observance
 Vision Impairment
 Hearing Impairment
 Sign language
 Interpreter req'd.
Urgency of referral
 Routine - Open
 Access ETT
 08-Mar-2017
 08-Mar-2017

Date of referral

Date submitted

PATIENT DETAILS

Surname

McHarg

Forename(s)

John

Title

-

Sex

Male

Date of birth

09-Sep-1968

CHI no.

0909683638

Patient's address
 82 Kelt Hardie Hill
 Cumnock
 KA18 1PS

Contact number(s)

Voice: 07502 544 937

REGISTERED GP DETAILS

Name

Dr Rosalind Lockens

GMC code

3327364

GP code

24066

Practice name

Tanyard Medical Practice (17305)

Practice code

80171

Practice address
 Tanyard Medical Practice
 2 Tanyard Cumnock

Contact number(s)

Voice: 01290 421157

Facsimile: 01290 425444

REFERRING PRACTITIONER DETAILS

Name

Dr. Mutaz Amin

GMC code

7020248

GP code

20133

Practice name

Tanyard Medical Practice (80171)

Practice code

80171

Practice address
 The Health Centre
 2-Tanyard
 Cumnock
 KA18 1BF

Contact number(s)

Voice: 01290 421157

<http://pmslive.chd.nhsaa.internal/trakcare/web/csp/web.RBReferral.cls?ID=583752&...> 15/03/2017

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Department of Radiology

EAST AYRSHIRE COMMUNITY HOSPITAL
Medical Imaging Department
Ayr Road
CUMNOCK
KA18 1EF

**RADIOLOGY REPORT**

CHI NUMBER: 0909683638 Examination Number: 33237687 Examination Date: 15/04/2015

Name: **Mcharg, John** DOB: **09/09/1968**

Address: 135 Keir Hardie Hill, Cumnock, Ayrshire, KA18 1PR -- CC: -

Referring Department / Location: Amin.Mutaz

The Healthcentre
2 Tannyard

Cumnock
KA18 1BF

Referring Consultant: GP Requestor

Date Dictated: 17/04/2015

Typed by: None

Examination: XR Knee both

Clinical Indication

See scanned referral: known OA right knee. Worsening pain both knees. Crepitus. Decreased ROM.

Report:**Right knee:**

The previously reported (18.05.2011) narrowing at the medial and lateral compartments is again noted with no obvious interval change.

Traction osteophytes are seen at the superior and inferior margins of the patella at the quadriceps and patella tendon insertions respectively.

No other significant bone or joint abnormality is seen.

Left knee:

Traction osteophytes are seen at the superior and inferior margins of the patella at the quadriceps and patella tendon insertions respectively.

No other significant bone or joint abnormality is seen.

Dictating Radiologist / Clinical Specialist **V. Murrells (Rep. Radiographer)**

Signed by: V. Murrells (Rep. Radiographer)

Verified by: V. Murrells (Rep. Radiographer)

ENTERED 23 APR 2015

Page 1 of 1



Examination Number: 33237687 Examination Date: 15/04/2015

Name: Mcharg, John DOB: 09/09/1968

Dose :- 13 cGy cm2

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MSK DISCHARGE REPORT



Patient Name:	John McHarg
Address:	135 Keir Hardie Hill, Cumnock, Ayrshire, KA18 1PR
CHI:	0909683638
GP:	Dr GJ Powell
Consultant:	
Referrer Source:	GP
Referral Date:	11/06/2014
Start Date:	26/09/2014
Discharge Date:	01/12/2014
No. of treatments:	2
Discharge Reason:	Failed to complete treatment
Treatment Outcome:	?
Therapist:	Chris Clarke
Location:	CUMNOCK HEALTH CENTRE

Dear Dr Powell

Diagnosis: Lower limb weakness – generally poorly conditioned

Actions for GP/Follow up recommendations: Nil

Was responding well to his exercise programme but failed to attend on the 10/10/14.
As no contact has been made he has now been discharged from our care.

Referred on to _____ (if applicable)

Yours sincerely,
Authorised on 01/12/2014 10:21:23 by Chris Clarke.
Chris Clarke
01/12/2014

Dr R Lockens
Tanyard Medical Practice
The Health Centre
2 Tanyard
Cumnock
KA18 1BF

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MSK DISCHARGE REPORT



Patient Name:	John McHarg
Address:	135 Keir Hardie Hill, Cumnock, Ayrshire, KA18 1PR
CHI:	0909683638
GP:	Dr GJ Powell
Consultant:	
Referrer Source:	GP
Referral Date:	11/06/2014
Start Date:	26/09/2014
Discharge Date:	01/12/2014
No. of treatments:	2
Discharge Reason:	Failed to complete treatment
Treatment Outcome:	?
Therapist:	Chris Clarke
Location:	CUMNOCK HEALTH CENTRE

Dear Dr Powell

Diagnosis: Lower limb weakness – generally poorly conditioned

Actions for GP/Follow up recommendations: Nil

Was responding well to his exercise programme but failed to attend on the 10/10/14.
As no contact has been made he has now been discharged from our care.

Referred on to _____ (if applicable)

Yours sincerely,
Authorised on 01/12/2014 10:21:23 by Chris Clarke.
Chris Clarke
01/12/2014

Dr R Lockens
Tanyard Medical Practice
The Health Centre
2 Tanyard
Cumnock
KA18 1BF

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NHS Ayrshire and Arran COLONOSCOPY REPORT

Name: John MCHARG, 09/09/1968 (M)
CHI No: 0909683638
Case note no.: A-H019662

Address: 135 Keir Hardie Hill
Cumnock
KA18 1PR

Procedure date
24th March 2014

GP: Dr R Lockens
The Medical Centre
2 Tanyard
Cumnock
Ayrshire
KA18 1BF

Priority: Routine
Status: Outpatient/NHS
Hospital: Ayr Hospital

Referring Cons: Open Access
(None)

Indications

Acute constipation with fresh blood rectal bleeding.
No allergy.

Report

Bowel preparation with moviprep was satisfactory.
A digital rectal examination was performed.
The colonoscope was inserted via the anus to the caecum, which was identified with reasonable confidence by the ileocecal valve and the appendicular orifice.
The examination to the limit of insertion was normal.

Medication

Continue medication.

Follow up

Return to the referring GP.

Advice/comments

Bowel prep not very good throughout but no gross pathology was encountered.

Kevin Malyan
Endoscopist

Consultant/Endoscopist

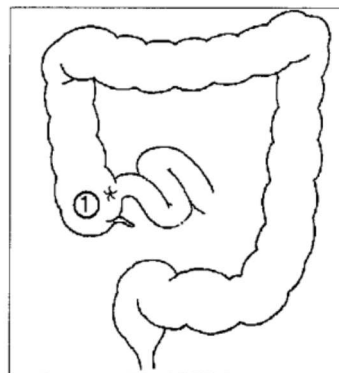
List consultant: Mr Robbie Muir
Endoscopist No1: Kevin Malyan
Nurses: Angela Johnstone
Christine Moffat

Instrument

CF 260DL - 2610419

Premedication

Buscopan (IV) 20 mg
Midazolam (IV) 5 mg
Pethidine (IV) 50 mg



1: Caecum (photographed)

entered 24/3

DRS 6005

ENDOSCOPY SUITE

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Department of Radiology

UNIVERSITY HOSPITAL AYR
Medical Imaging Department
Dalmellington Road
AYR
KA6 6DX



RADIOLOGY REPORT

CHI NUMBER: 0909683638 Examination Number: 35734063 Examination Date: 10/11/2017

Name: **McHarg, John** DOB: **09/09/1968**

Address: 82 Keir Hardie Hill, Cumnock, KA18 1PS – CC: -

Referring Department / Location: GILLESPIE JOHN

67 AFTON BRIDGEND

NEW CUMNOCK

AYRSHIRE

KA18 4BA

Referring Consultant: GP Requestor

Date Dictated: 10/11/2017

Typed by: None

Examination: US Abdomen

Clinical Indication

c/o right iliac fossa, right loin and right upper quadrant pain, ? gallstones, ? renal stones

Report: US examination of abdomen.

Liver is normal in size, with mild degree diffuse fatty infiltration. No focal nodules or masses were discernible. Intra hepatic biliary radicles are not dilated. GB is moderately distended with normal wall thickness. No calculi in lumen. Pancreas is normal in size and echotexture. Aorta, IVC and retro peritoneum are normal. No para aortic adenopathy or ascites. Spleen is normal.

Kidneys are at normal locations, measuring 12 cm in long axes, with normal echotexture of parenchyma and collecting system. No renal calculi/ caliectasis.

Comment : Mild degree fatty infiltration liver ; No gall stones or renal calculi.

Dictating Radiologist / Clinical Specialist **Ramachandran, Pothera (Loc)**

Verified by: **Ramachandran, Pothera (Loc)**

Page 1 of 1



Examination Number: 35734063 Examination Date: 10/11/2017

Name: **McHarg, John** DOB: **09/09/1968**

Dose :-

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PATIENT SERVICES**Consultant: Sam Allen**

Blood Borne Virus Service
Annanhill Suite
Crosshouse Hospital
KILMARNOCK KA2 0BE
Telephone: 01563 521133



www.show.scot.nhs.uk/aaaht

Dr Powell
Tanyard Medical Practice
The Medical Centre
2 Tanyard
Cumnock
KA18 1BF

Date	24 April 2013
Clinic	Chronic Hepatitis Specialist Nurse Clinic
Our Ref	EG/KG
CHI	0909683638
Enquiries to	Kerry Gallagher
Extension	45508
Direct line	01563 545508
Fax	01563 827974
E-mail	Kerry.Gallagher@aaaht.scot.nhs.uk

Dear Dr Powell

John McHarg 135 Keir Hardie Drive Cumnock KA18 1PR 09/09/68

John's hepatitis C status was repeated recently by his addictions nurse. I was delighted to inform him it remains negative. This is a sustained viral response and we expect this to remain life long. He is at no risk of liver disease from hepatitis C and non infectious to others.

He was advised, however, clearing hepatitis C gives no acquired immunity and if he were to carry out any high risk activity he would become re-infected.

He is now discharged from our service.

Yours sincerely

PP

Jackie Tomnay
Nurse Specialist

www.nhsayrshireandarran.com

www.nhsayrshireandarran.com



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**Confidential - Clinical
Information**

Gastroenterology Unit
University Hospital Ayr
Dalmellington Road
Ayr
KA6 6DX
01292 610555
Fax: 01292 614575
www.nhsaaa.net



Dr JS Gillespie
Valley Medical Practice
67 Afton Bridgend
New Cumnock
Ayrshire
KA18 4BA

Our Ref: AA/EM/
Hospital No:

Date Dictated: 14/11/2017
Date Typed: 15/11/2017
Enquiries to: Liz Malcolmson
Direct Line: 01292 614341
Ext. Number:
Email: liz.malcolmson@aaaht.scot.nhs.uk

Dear Dr Gillespie,

JOHN MCHARG **DOB: 09/09/1968** **CHI No: 0909683638**
82 KEIR HARDIE HILL, CUMNOCK, AYRSHIRE, KA18 1PS

John hand in a stool sample on 19.10.17 for faecal calprotectin and it has come back elevated at 179 ug/g. This information will be forwarded to Dr Gillen for his thoughts and ongoing management planning.

Yours sincerely

Authorised on 16/11/2017 08:36:05 by Audrey Anderson.

Audrey Anderson
GI Nurse Practitioner

Dr Christopher Gillen
Consultant Gastroenterologist
University Hospital Ayr
Dalmellington Road
AYR
KA6 6DX

www.nhsaaa.net



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Dr AT Hand Dr E Ofei Dr A Stevenson Dr A Krichell Dr S Learmonth Dr F Gibson

Dr. PAUL PA DUNLOP
TANYARD MEDICAL PRACTICE
THE MEDICAL CENTRE
2 TANYARD
CUMNOCK
KA18 1BF

Accident and Emergency

Ayr Hospital
Dalmellington Road, Ayr, KA6 6DX

Phone: 01292 614615
Fax: 01292 288105

Duty Consultant Dr Alastair Stevenson

John Mcharg

135 KEIR HARDIE HILL
CUMNOCK, KA18 1HP

DOB: 09/09/1968
A/E No: AYR-13-001333
CHI No: 0909683638

Date and Time of Attendance: 11 Jan 2013 14:32
Total A&E Attendances = 24 , attendances in last year = 0

Diagnosis Limb pain , Multiple body sites , .
Back pain

Treatment Advice
Drugs:

Investigations

Follow up: Discharge, Primary Care follow up
Usual place of residence

Additional Information: self presented with pain in both legs and back ongoing for long time yrs, o/e no muscle wasting, no weakness in arms or legs, gait normal no spinal tenderness, GROM in spine, neurologically intact, SLR > 90 bilaterally discharged home with own analgesia and advised to see GP for further pain management.

Dr Asgarali Patankar
Staff Grade doctor

If you have any queries about this patient, please contact one of the staff at the above number.

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Department of Radiology

UNIVERSITY HOSPITAL AYR
Medical Imaging Department
Dalmellington Road
Ayr
KA6 6DX



RADIOLOGY REPORT

CHI NUMBER: 0909683638 Examination Number: 32033948 Examination Date: 18/02/2013

Name: **Mcharg, John** DOB: 09/09/1968

Address: 135 Keir Hardie Hill, Cumnock, Ayrshire, KA18 1PR -- CC: -

Referring Department / Location: POWELL GARETH

CUMNOCK HEALTH CENTRE

2 TANYARD

CUMNOCK

AYRSHIRE

KA18 1BF

Referring Consultant: GP Requestor

Date Dictated: 19/02/2013

Typed by: None

Examination: CT Head

Clinical Indication

Recent onset of from multiple symptoms (bilateral) in associated with right-sided weakness plus headache and nausea.

Report:

An unenhanced study was performed through the brain.

No space occupying lesion or other abnormality identified within the brain.

No cause has been shown for symptoms described above.

Dictating Radiologist / Clinical Specialist **Cooper.S (Con Radiologist)**

Verified by: **Cooper.S (Con Radiologist)**

ENTERED 21 FEB 2013

Page 1 of 1



Examination Number: 32033948 Examination Date: 18/02/2013
Name: **Mcharg, John** DOB: 09/09/1968
Dose :- 820.81 mGy cm2

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Confidential - Clinical Information

Department of Otolaryngology
University Hospital Crosshouse
Kilmarnock Road
Kilmarnock
KA2 0BE
01563 521133



www.nhsaaa.net

Dr JS Gillespie
Valley Medical Practice
67 Afton Bridgend
New Cumnock
Ayrshire
KA18 4BA

Our Ref: AW/ch
Hospital No:
Clinic Date: 29/04/2017
Date Dictated: 29/04/2017
Date Typed: 09/05/2017
Enquiries to: Christine McLeish
Direct Line: 01563 827368
Ext. Number: 27368
Email: christine.mcleish@aapct.scot.nhs.uk

Dear Dr Gillespie,

JOHN MCHARG DOB: 09/09/1968 CHI No: 0909683638
82 KEIR HARDIE HILL, CUMNOCK, AYRSHIRE, KA18 1PS

Diagnosis: Normal sinuses

I would agree with the plan to manage Mr McHarg's symptoms with topical steroid spray, or drops as you see fit.

Examination of his nose today, with a flexible nasal endoscope, shows a normal healthy nose and no signs of chronic or acute sinusitis. His last CT scan in 2013 of his head, also shows healthy sinuses at that time. There is no indication to repeat the scans or for any surgery and I have discharged him from ENT follow up.

Yours sincerely

Authorised on 11/05/2017 13:44:02 by Mr Andrew Whymark.

Mr A Whymark
Consultant ENT Surgeon
GMC 4188403

www.nhsaaa.net



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MSK DISCHARGE REPORT											
Physiotherapy, Occupational Therapy, Podiatry											
Location: <u>E.A.C.H.</u>			Therapist: <u>D. THOMPSON</u>								
CHI: <u> </u>		Grade: <u>6</u>		Discipline: <u>PHYSIOTHERAPY</u>							
Surname: <u>MCHARG</u>			Forename: <u>JOHN</u>			(M/F: <u> </u>)					
Address: <u>135 KERR HARSTE AVE</u>											
Town: <u>GLASGOW</u>				Postcode: <u>KA18 1PR</u>							
Date Referred: <u>03/09/12</u>			Name Referred by: <u> </u>			Discharge Reason: <u> </u>					
Start Date: <u>29/11/12</u>			GP: <u>DR LOCKENS</u>			Failed to Attend <u> </u>					
Discharge Date: <u>06/02/13</u>			Cons: <u> </u>			Failed to Continue <u> </u>					
No of Attendances: <u>1</u>			WHS: <u> </u>			Treatment Complete <u> </u>					
Is this MSK presentation the cause of work absence: <u> </u>			NHS 24: <u> </u>			Other - Specify: <u> </u>					
Return to work on discharge: <u> </u>			Rheumatology: <u> </u>			Other - Specify: <u> </u>					
Worse <u> </u>			same <u> </u>			Improved <u> </u>					
Signposted to:		Referral to:		Patient declined		N/A					
W Work											
A Alcohol											
T Tobacco											
O Overweight											
M Mental Health											
Physical Activity											
Intervention:			Treatment:			Body Part:					
Complex Case Clinic			Advice <u> </u>			Low Back <u> </u>					
Level 1 Pain Management <u> </u>			Manual Therapy <u> </u>			Thoracic <u> </u>					
Onward Referral:			Electrotherapy <u> </u>			Neck <u> </u>					
Orthopaedics			Exercise Plan <u> </u>			Shoulder <u> </u>					
Rheumatology			Class <u> </u>			Elbow/ Wrist/Hand <u> </u>					
Pain Service			Hydrotherapy <u> </u>			Hip <u> </u>					
Interdisciplinary Referral:			Splint Fabrication /Provision <u> </u>			Knee <u> </u>					
Specify:			Orthotic Provision <u> </u>			Foot/Ankle <u> </u>					
INVESTIGATION:			Acupuncture <u> </u>								
MRI <u> </u>			Steroid Injection <u> </u>								
X Ray <u> </u>			Other - Specify: <u> </u>								
STarT Tool			Low Med High			Low Med High					
STarT Back						2 nd Score					
STarT MSK											
OUTCOME MEASURES			Initial			Vas			End		
All EQ 5D SL			4 4 5 5 5								
Hand/Elbow/Wrist DASH											
Shoulder Quick Dash											
Knee Oxford Knee Score											
Hip Oxford											
Foot/Ankle Manchester Oxford											
HADS											
COMMENTS: <u>PT PRESENTS 2 CITRUS MEDICATIONS HSP AT FTA N 2 OCCASIONS AT 5/1</u>											

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Shaw 
eyecare
James R Shaw & Sons

Cumnock Health Centre
2 Tanyard
Cumnock
KA18 1BF

04/01/2013

Dear Dr Powell

RE: John McHarg
135 Keir Hardie Hill
Cumnock
KA18 1HP

DOB: 09/09/1968

This patient whom you referred for an eye exam was suffering spells of tunnel vision and peripheral zigzag shaped flashing lights along with a "beating" sound in his ears.

Refraction showed the vision to be stable. New glasses were required.

Ocular examination showed the eyes to be healthy. I therefore am concluding that the symptoms that are being experienced are neurological. Commonly, ocular migraines are the cause but this patient's history of cranial surgery could be related.

I hope this information is of use.

Yours sincerely



A. Dunstone B.Sc (Hons) MCOptom

41 Townhead St
Cumnock
KA18 1LF
Tel 01290 421421

43-45 High Street
Sanquhar
Tel 01659 50324

22-23 East Morton St
Thornhill
Tel 01848 330263

3 Earl Grey St
Mauchline
Tel 01290 551466

Enquiries@jamesrshaw.co.uk
<http://www.jamesrshaw.co.uk>
Fax 01290 426518

Free NHS eye testing

Home visits

Diabetic eye tests

LVA fitting

Contact lenses

Partners
Russell R. Shaw
Bsc (Hons) MCOptom

Stewart J. Shaw
Bsc (Hons) MCOptom

Associates
Alan J. Beck
Bsc (Hons) MCOptom

Alistair J. Duff
Bsc (Hons) MCOptom

Andrew J. Dunstone
Bsc (Hons) MCOptom

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Page 1 of 4

Hospital use only	Clinic	Day Date	Time	Hospital No.
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Unique Care Pathway Number: 101013186606G

Transport required?

REFERRAL LETTER

CHI:0909683638

MEDICAL IN CONFIDENCE

REFERRAL TOCardiologyA2
AA RACPC - ETT Open Access

Ethnic Origin

Language interpreter req'd

Religion

Religious Observance

Vision impairment

Hearing impairment

Sign language interpreter req'd.

University Hospital Ayr
Dalmellington Road
Ayr
KA6 6DX**Urgency of referral**Routine - Open
Access ETT**Date of referral**

08-Mar-2017

Date submitted

08-Mar-2017

PATIENT DETAILS**Surname**

McHarg

Forename(s)

John

Title

-

Sex

Male

Date of birth

09-Sep-1968

CHI no.

0909683638

Patient's address82 Keir Hardie Hill
Cumnock
KA18 1PS**Contact number(s)**

Voice: 07502 544 937

REGISTERED GP DETAILS**Name**

Dr Rosalind Lockens

GMC code

3327364

GP code

24066

Practice name

Tanyard Medical Practice (17305)

Practice code

80171

Practice addressTanyard Medical Practice
2 Tanyard Cumnock**Contact number(s)**

Voice: 01290 421157

Facsimile: 01290 425444

REFERRING PRACTITIONER DETAILS**Name**

Dr. Mutaz Amin

GMC code

7020248

GP code

20133

Practice name

Tanyard Medical Practice (80171)

Practice code

80171

Practice addressThe Health Centre
2-Tanyard
Cumnock
KA18 1BF**Contact number(s)**

Voice: 01290 421157

<http://pmslive.chd.nhs.uk/internal/trakcare/web/csp/web.RBReferral.cls?ID=583752&...> 15/03/2017

AYR HOSPITAL
DALMEINGTON ROAD
AYR

Ward
Telephone:

Page 1/1

EXERCISE STRESS TEST REPORT

Patient Name: McHarg, John
Patient ID: 0909683638
Height:
Weight:

DOB: 09-09-1968
Age: 48yrs
Gender: Male
Race:

Study Date: 31.03.2017
Test Type: --
Protocol: BRUCE

Referring Physician: --
Attending Physician: --
Technician: ANGELA HEWITT

Medications:

Medical History:

Reason for Exercise Test:

Exercise Test Summary

Phase Name	Stage Name	Time In Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	STANDING	00:01			78		
	WARM-UP	01:07	0.10	0.00	81	114/80	
EXERCISE	STAGE 1	03:00	1.70	10.00	96	132/80	
	STAGE 2	00:07	2.50	12.00	97		
RECOVERY		04:36	0.00	0.00	77	76	

The patient exercised according to the BRUCE for 3:06 min:s, achieving a work level of Max. METS: 4.70. The resting heart rate of 79 bpm rose to a maximal heart rate of 98 bpm. This value represents 56 % of the maximal, age-predicted heart rate. The resting blood pressure of 114/80 mmHg, rose to a maximum blood pressure of 132/80 mmHg. The exercise test was stopped due to Leg discomfort.

Interpretation

Summary: Resting ECG: normal. Functional Capacity: markedly decreased (by >40%). HR Response to Exercise: appropriate. BP Response to Exercise: normal resting BP - appropriate response. Chest Pain: none. Arrhythmias: none. ST Changes: Depression upsloping.

Conclusions

Patient asked test to be stopped repeatedly due to upper leg burning pain, both legs.
No angina type symptoms
No significant ST changes

Inconclusive test

No pain or ST changes

Physician

Technician

Questionnaire - possible angina

Gx 3 mins, HR 98/min led by leg pain

Negative, led to

FORWARDED
O.D. GARRIN

ETT QUESTIONNAIRE

NAME:- John McNamee
 HOSP NO:- 02104683638
 GP:- Dr Lockers

CHEST PAIN

SITE.....describe C.S.O.E.D

DATE:-

NATURE.....describe (crushing, squeezing, burning, stabbing) Crushing

RADIATION..... (arm(s), neck, back, jaw, teeth) None

LAST OCCURRENCE 2 days Ago FREQUENCY stable/Increasing

PRECIPITATION

Does the pain occur on EXERTION? If so what. Yes, No, No, No, No

Is this Predictable? No

Does it occur at rest? Yes

What else brings on the Pain? Stress

ASSOCIATED FEATURES

Sweating..... ☒

Breathlessness..... ☒

Panic..... ☒

Nausea..... ☒

DURATION OF ATTACKS

relieving factors:-

rest (how long) :-

GTN (how long):-

> No. Present

RISK FACTORS

Is there a history of :-

Diabetes.....

PH

FH

High blood pressure...

Myocardial Infarction...

High cholesterol....

Peripheral vascular disease

Stroke/TIA.....

SMOKING

Yes / No / Ex

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20-July-2026 CAT
Additional: Scanned Document

Filename: 01529166.TIF
Extension: .TIF
Pages:

SITE: Physiotherapy Out-Patients
Cumnock Health Centre



Unit No
CHI No 0909683638

PHYSIOTHERAPY DISCHARGE REPORT

PHYSIOTHERAPY NO:		C0123/12	Discharge Code:		8
NAME:	Mr John McHarg		Treatment complete		
Address:	135 Keir Hardie Hill		Did not attend		
Town:	Cumnock		Failed to continue		
Postcode:	KA18 1PR				
Date Of Birth:	09/09/1968		Treatment Outcome:		
CONSULTANT			All Treatment goals achieved:		
GP:	Dr Lockens		Not all treatment goals achieved:		
Diagnosis:	LBP		No Treatment goals achieved:		
			Number of Treatments:		
			0		
Date Referred:	15/02/2012		Outcome measure used		
Start Date:	—		Score - Pre		
Discharge Date:	29.03.12		Score - Post		

Summary:

Patient moving to Torquay and
referral sent onward to Torbay Hospital,
Torquay at patient's request.

Physiotherapist: *Allen (PTA)*

Date: 29.03.12

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Pages:

PATIENT SERVICES**Consultant: Sam Allen**

Infectious Diseases Unit
Ward 2D
Crosshouse Hospital
KILMARNOCK KA2 0BE
Telephone: 01563 521133

www.show.scot.nhs.uk/aaah



Dr Powell
The Health Centre
2 Tanyard
CUMNOCK
KA18 1BF

Date	1 November 2011
Clinic	28 September 2011
Our Ref	MC/FE/ x
CHI:	0909683638
Enquiries to	Fiona Elliott
Extension	27970
Direct line	01563 827970
Fax	01563 827978
E-mail	fiona.elliott@aaah.scot.nhs.uk

Dear Dr Powell

John McHarg 135 Keir Hardie Hill Cumnock 09.09.1968

John attended the blood borne virus clinic on 28 September 2011 for repeat hepatitis C PCR. Blood was obtained and he remains hepatitis C negative.

John will be reviewed again in 6 months for repeat bloods.

Yours sincerely

A handwritten signature in cursive script that reads 'Marjory Cameron'.

Marjory Cameron
Nurse Specialist

www.nhsayrshireandarran.com



STA 5000

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9009 SRQ

NHS Ayrshire and Arran
Ayr Hospital
GASTROSCOPY REPORT

Name: **John MCHARG (M)**
Date of birth: **09/09/1968**
No: **0909683638**
Ref note no.: **0909683638**

Address: **82 Keir Hardie Hill
Cumnock
Ayrshire
KA18 1PS**

Dr M Amin
Tanyard Medical Practice
The Health Centre
2 Tanyard
Cumnock
KA18 1BF

Procedure date: **6th October 2018 (14:42)**
Priority: **Routine**
Status: **Outpatient/NHS**
Hospital: **Ayr Hospital**
Referring Cons: **Open Access**

Indications

Abdominal pain and dyspepsia.

Report

The scope was retroflexed in the stomach.
The procedure was completed successfully to D2.
Apparent mucosal junction at 40cm from the incisors.
The whole upper gastro-intestinal tract was normal.

Medication

Continue medication.

Follow up

Return to the referring GP.

Consultant/Endoscopist

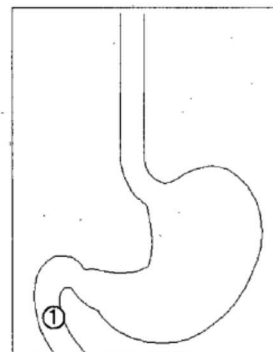
Mr A Hussain
Nurses: Sarah Cuthbert
Eilidh Hamilton

Instrument

GIF H260 - 2948380

Premedication

Xylocaine (Spray) 100 mg



1: Second part (photographed)

ENDOSCOPY SUITE

A Hussain
Consultant Surgeon
McHarg, John

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Pages:

PATIENT SERVICES**Consultant: Sam Allen**

Infectious Diseases Unit
Ward 2D
Crosshouse Hospital
KILMARNOCK KA2 0BE
Telephone: 01563 521133

www.show.scot.nhs.uk/aaaht



Dr Powell
The Health Centre
2 Tanyard
CUMNOCK
KA18 1BF

Date	22 July 2011
Clinic	22 June 2011
Our Ref	JT/FE/ X
CHI:	0909683638
Enquiries to	Fiona Elliott
Extension	27970
Direct line	01563 827970
Fax	01563 827978
E-mail	fiona.elliott@aaaht.scot.nhs.uk

Dear Dr Powell

John McHarg 115 Barshore Road Cumnock 09.09.1968

John was seen in clinic on 22 June 2011 14 weeks after completing 26 weeks of hepatitis C treatment.

He looked and felt well and reported no illicit drug use.

Results: - haemoglobin 13.5, white cell count 7.3, platelets 240, neutrophils 3.9, AST 23, ALT 14 and alpha fetoprotein 4.

John will be seen again in September 2011.

Yours sincerely

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

Jackie Tomnay
Nurse Specialist

www.nhsayrshireandarran.com



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Pages:

Department of Radiology

East Ayrshire Community hospital
X-ray Department
Ayr Road
Cumnock

**RADIOLOGY REPORT**

CHI NUMBER: 0909683638 Examination Number: 31226377 Examination Date: 18/05/2011

Name: **Mcharg, John** DOB: **09/09/1968**

Address: 46 KEIR HARDIE HILL, CUMNOCK, AYRSHIRE, KA18 1PP -- CC: -

Referring Department / Location: POWELL GARETH

CUMNOCK HEALTH CENTRE

2 TANYARD

CUMNOCK

AYRSHIRE

KA18 1BF

Referring Consultant: GP Requestor

Date Dictated: 19/05/2011 Typed by: Dr D Raw (Medica)

Examination: XR Knee Rt

Clinical Indication:

Pain and stiffness.

Report:

Right knee.

Mild joint space narrowing in the medial and lateral joint compartments. No effusion.

Dictating Radiologist / Clinical Specialist **Dr D Raw (Medica)**

Verified by: Dr D Raw (Medica)

ENTERED 25 MAY 2011

Page 1 of 1

CHI NUMBER: 0909683638 Examination Number: 31226377 Examination Date: 18/05/2011

Name: John Mcharg DOB: 09/09/1968

0909683638 Dose :- 7 cGy cm2

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PATIENT SERVICES**Consultant: Sam Allen**

Dr Powell
The Health Centre
2 Tanyard
CUMNOCK
KA18 1BF

Infectious Diseases Unit
Ward 2D
Crosshouse Hospital
KILMARNOCK KA2 0BE
Telephone: 01563 521133

www.show.scot.nhs.uk/aaaht

Date	12 April 2011
Clinic	17 March 2011
Our Ref	MC/FE/ 430525
CHI:	0909683638
Enquiries to	Fiona Elliott
Extension	27970
Direct line	01563 827970
Fax	01563 827978
E-mail	fiona.elliott@aaaht.scot.nhs.uk



Dear Dr Powell

John McHarg 115 Barshore Road Cumnock -09.09.1968.

This patient attended for review at the BBV clinic on 17 March 2011.

Due to ongoing social difficulties the decision to stop hepatitis C clearance treatment was made at this time.

Johns should have completed 48 weeks of treatment but stopped at weeks 26 of treatment.

This decision was also made as treatment guidelines have changed recently and as his hepatitis C PCR was negative at weeks 4, 12 and 24 of treatment he fitted the criteria for early completion of treatment.

He will be reviewed again in 6 months time where further bloods for hepatitis C PCR will be obtained.

Yours sincerely

A handwritten signature in black ink that reads 'Marjory Cameron'. The signature is written in a cursive style with a large, looped 'M' and a trailing flourish.

Marjory Cameron
Nurse Specialist

www.nhsayrshireandarran.com



STA 5002

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PATIENT SERVICES**Consultant: Sam Allen**

Infectious Diseases Unit
Ward 2D
Crosshouse Hospital
KILMARNOCK KA2 0BE
Telephone: 01563 521133

www.show.scot.nhs.uk/aaaht



Dr Powell
The Health Centre
2 Tanyard
CUMNOCK
KA18 1BF

Date 19 February 2011
Clinic 3 February 2011
Our Ref JT/FE/ 430525
CHI: 0909683638
Enquiries to Fiona Elliott
Extension 27970
Direct-line 01563 827970
Fax 01563 827978
E-mail fiona.elliott@aaaht.scot.nhs.uk

Dear Dr Powell

John McHarg 115 Barshore Road Cumnock 09.09.1968

This patient with chronic hepatitis C is currently undergoing clearance therapy with pegylated interferon and ribavirin. This therapy was commenced whilst he was in HMP Kilmarnock.

Commenced treatment - 17 September 2010
Expected duration of treatment - 48 weeks
Length of treatment to date - 20 weeks

Current results:

Haemoglobin 10.6g/dl
White blood count $4.1 \times 10^9/l$
Platelets $90 \times 10^9/l$
AST 37U/l
ALT 18U/l

He remains very tired with ongoing poor sleep.

He will be reviewed again in 2 weeks.

Yours sincerely

Jackie Tomnay
Specialist Nurse

www.nhsayrshireandarran.com



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PATIENT SERVICES

Consultant: Sam Allen
Infectious Diseases Unit

Direct Line: 01563 827970
E-mail: Fiona.elliott@aaaht.scot.nhs.uk
Fax: 01563 577978

CHRONIC HEPATITIS SPECIALIST NURSE CLINIC – 1 DECEMBER 2010
MC/FE/430525
CHI: 0909683638

3 December 2010

Dr Powell
The Health Centre
2 Tanyard
CUMNOCK
KA18 1BF

Dear Dr Powell

John McHarg 115 Barshore Road Cumnock 09.09.1968

This patient with chronic hepatitis C is currently undergoing clearance therapy with pegylated interferon and ribavirin. This therapy was commenced whilst he was in HMP Kilmarnock.

Commenced treatment -	17 September 2010
Expected duration of treatment -	48 weeks
Length of treatment to date -	11 weeks

Current results:

Haemoglobin	11.2g/dl
White blood count	$3.5 \times 10^9/l$
Platelets	$101 \times 10^9/l$
AST	27U/l
ALT	30U/l

John continues to have problems with fatigue and poor sleep. His weight is down by almost 3kg and this will be monitored again at his next visit in 3 weeks' time.

Yours sincerely



Marjory Cameron
Specialist Nurse



Crosshouse Hospital
Crosshouse
KILMARNOCK KA2 0BE
Telephone: 01563 521133
www.show.scot.nhs.uk/aaaht

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Dr AT Hand Dr E Ofei Dr A Stevenson Dr A Krichell Dr S Learmonth

Dr. P Dunlop
THE MEDICAL CENTRE
2 TANYARD
CUMNOCK
AYRSHIRE
KA181BF

Accident and Emergency
Ayr Hospital
Dalmellington Road, Ayr, KA6 6DX

Phone: 01292 614615
Fax: 01292 288105

Duty Consultant Dr Alan Krichell

John Mcharg

31 GLENLAMONT
CUMNOCK, KA18 1HP

DOB: 09/09/1968
A/E No: AYR-10-013603
CHI No: 0909683638

Date and Time of Attendance: 21 Apr 2010 09:47

Diagnosis Sprain , Ankle , Right

Treatment Advice, Tubigrip

Drugs:

Investigations X-Ray , Calcaneum Right, Foot Right, Ankle Right

Follow up: Discharge, no follow up

Usual place of residence

Additional Information: xr right ankle, foot and calcaneus - nbi

Dr Carl Williams
Staff Grade doctor

If you have any queries about this patient, please contact one of the staff at the above number.

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MSK DISCHARGE REPORT



Patient Name:	John McHarg
Address:	82 Keir Hardie Hill, Cumnock, Ayrshire, KA18 1PS
CHI:	0909683638
GP:	Dr F Mitchell
Consultant:	
Referrer Source:	Dr Mitchell
Referral Date:	20/03/2018
Start Date:	10/04/2018
Discharge Date:	19/07/2018
No. of treatments:	2
Discharge Reason:	DNA
Treatment Outcome:	
Therapist:	Scott Gray
Location:	EACH PHYSIOTHERAPY

Dear Dr

Diagnosis: John has attended 2 Physiotherapy sessions for bilateral anterior knee pain and mechanical low back pain. He has been progressing with a home exercise programme however recently failed to attend for follow up and will now be discharged.

Actions for GP/Follow up recommendations: N/A

Referred on to _____ (if applicable)

Yours sincerely,
Authorised on 19/07/2018 15:03:18 by Scott Gray.
Scott Gray
19/07/2018

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Department of Radiology

East Ayrshire Community hospital
X-ray Department
Ayr Road
Cumnock

**RADIOLOGY REPORT**

CHI NUMBER: 0909683638 Examination Number: 30663651 Examination Date: 22/01/2010

Name: **Mcharg, John** DOB: 09/09/1968

Address: 31 GLENLAMONT, NEW CUMNOCK, , KA18 1HP -- CC: -

Referring Department / Location: POWELL GARETH

CUMNOCK HEALTH CENTRE

2 TANYARD

CUMNOCK

AYRSHIRE

KA18 1BF

Referring Consultant: GP Requestor

Date Dictated: 24/01/2010 Typed by: Dr P Evans (Medica)

Examination: XR Foot Lt, XR Knee Lt

Clinical Indication:

pain

Report:

LT KNEE

Normal appearances.

LT FOOT

There are screws through the calcaneum. Otherwise normal appearances.

Dictating Radiologist / Clinical Specialist **Dr P Evans (Medica)**

Verified by: Dr P Evans (Medica)

ENTERED 27 JAN 2010

Page 1 of 1

CHI NUMBER: 0909683638 Examination Number: 30663651 Examination Date: 22/01/2010

Name: John Mcharg DOB: 09/09/1968

0909683638

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Pages:

Department of Radiology

EAST AYRSHIRE COMMUNITY HOSPITAL
Medical Imaging Department
Ayr Road
CUMNOCK
KA18 1EF



RADIOLOGY REPORT

CHI NUMBER: 0909683638 Examination Number: 35996822 Examination Date: 08/02/2018

Name: **McHarg, John** DOB: **09/09/1968**

Address: 82 Keir Hardie Hill, Cumnock, KA18 1PS -- CC: -

Referring Department / Location: Amin.Mutaz

The Healthcentre
2 Tannyard

Cumnock
KA18 1BF

Referring Consultant: GP Requestor Clinical Specialty: General Practice

Date Dictated: 12/02/2018

Typed by: None

Examination: XR Pelvis

Clinical Indication

left hip pain, history of left knee OA, ? hip OA ? severity.

Report:

No significant bone or joint abnormality is seen.

Dictating Radiologist / Clinical Specialist **Blower.Caroline (Con Radiographer)**

Verified by: Blower.Caroline (Con Radiographer)

Page 1 of 1

***0909683638*]**

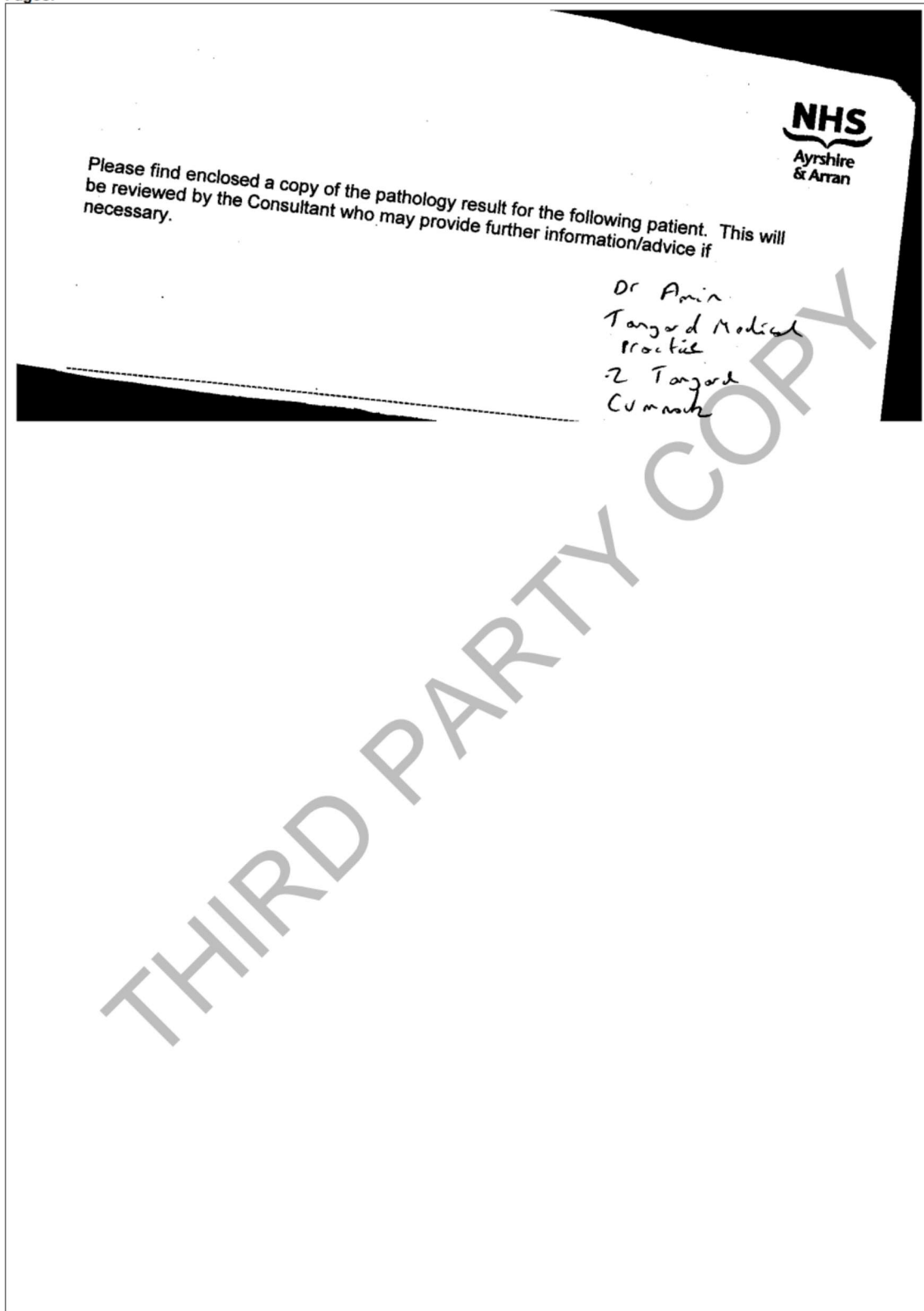
Examination Number: 35996822 Examination Date: 08/02/2018

Name: **McHarg, John** DOB: **09/09/1968**

Dose :- 332 cGy cm2

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**NHS AYRSHIRE and ARRAN
PATHOLOGY DEPARTMENT - CROSSHOUSE HOSPITAL**

HISTOPATHOLOGY REPORT

Laboratory No.: 18P004427

Name: JOHN MCHARG

DOB: 09/09/1968

Sex: M

CHI No:

090968638

Address: 82 KEIR HARDIE HILL

Sender:

Dr C Glen

Source:

Ayr Hosp Endoscopy Unit

CUMNOCK

KA18 1PS

Date Taken: 16/03/18

Date Recvd: 16/03/18

CLINICAL HISTORY

Lesions: 1 probably benign pedunculated polyp

Clinical diagnoses. colonic polyps.

MACROSCOPY

A '4 RANDOM BIOPSIES FROM (2) - AREA EXTENDING FROM THE CAECUM TO THE MID TRANSVERSE': Three pale fragments the largest a 6mm strip in cell safe cassette.

B '1 COLONIC PEDUNCULATED POLYP FROM (3) - DISTAL DESCENDING': Dark brown polyp 7 x 7 x 6mm with ?indrawn base 3 x 1mm. Also received two fragments ?tissue ?veg matter 3 x 3 x 2mm.

C '2 RANDOM COLONIC BIOPSIES FROM (4) - AREA EXTENDING FROM PROXIMAL SIGMOID TO THE MID TRANSVERSE': Pale fragment 6 x 1 x 1mm in cell safe cassette.

MICROSCOPY

A '4 RANDOM BIOPSIES FROM (2) - AREA EXTENDING FROM THE CAECUM TO THE MID TRANSVERSE': Microscopy shows normal colonic mucosa. There is no evidence of inflammation, dysplasia or malignancy.

B '1 COLONIC PEDUNCULATED POLYP FROM (3) - DISTAL DESCENDING': Microscopy shows tubular adenoma with low grade dysplasia. There is no evidence of stromal invasion.

C '2 RANDOM COLONIC BIOPSIES FROM (4) - AREA EXTENDING FROM PROXIMAL SIGMOID TO THE MID TRANSVERSE': Microscopy shows normal colonic mucosa. There is no evidence of inflammation, dysplasia or malignancy.

Reported by: Dr H El Terafi

Authorised by: Dr Hassan El Terafi

First Print: 25/04/18

Current Print: 25/04/18

Page 1 of 1

*Please note: The Pathology Department does not issue "Copy to" reports.
This report has now been authorised and is available electronically.*

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Pages:

Patient ID. :15346
Patient Name :John McHarg
Measurement time :10-08-2018 14:00 -> 11-08-2018 11:00
Printout :13-08-2018

Patient ID. : 15346
Patient Name: John McHarg
Date of birth: 09-09-1968
Sex: Male

Registration Date: 13-08-2018 12:40
Section range: 10-08-2018 14:00 -> 11-08-2018 11:00

[Meas. info. 1]
Wake time: 07:00
Bedtime: 23:00
RecorderID: 1

Patient ID. :15346
 Patient Name :John McHarg
 Measurement time :10-08-2018 14:00 -> 11-08-2018 11:00
 Printout :13-08-2018

AWAKE SUMMARY

Section range 07:00 -> 23:00

Valid readings = 30

Excluded readings = 7 18.9 %

	MIN	AVE	MAX	SD	SE	CV (%)
SYS[mmHg]	103	134	180	19.95	3.64	14.85
DIA[mmHg]	40	84	152	25.76	4.70	30.85
MAP[mmHg]	61	100	155	21.42	3.91	21.39
PULSE[BPM]	47	80	130	17.79	3.25	22.34

SYS/DIA limits Awake 140/90 mmHg

Readings>SYS limits(s) 33.3 %

Readings>DIA limits(s) 30.0 %

Highest SYS 180 mmHg 11-08-2018 09:30

Lowest SYS 103 mmHg 10-08-2018 16:17

Highest DIA 152 mmHg 10-08-2018 16:00

Lowest DIA 40 mmHg 10-08-2018 16:17

SLEEP SUMMARY

Section range 23:00 -> 07:00

Valid readings = 6

Excluded readings = 2 25.0 %

	MIN	AVE	MAX	SD	SE	CV (%)
SYS[mmHg]	86	97	113	9.09	3.71	9.41
DIA[mmHg]	45	57	72	9.24	3.77	16.12
MAP[mmHg]	62	70	85	8.26	3.37	11.77
PULSE[BPM]	65	70	73	3.13	1.28	4.48

SYS/DIA limits Sleep 120/70 mmHg

Readings>SYS limits(s) 0.0 %

Readings>DIA limits(s) 16.7 %

Highest SYS 113 mmHg 11-08-2018 06:00

Lowest SYS 86 mmHg 11-08-2018 03:00

Highest DIA 72 mmHg 11-08-2018 06:00

Lowest DIA 45 mmHg 11-08-2018 04:00

FULL SUMMARY

Section range 21 h 10-08-2018 14:00 -> 11-08-2018 11:00

Valid readings = 36

Excluded readings = 9 20.0 %

	MIN	AVE	MAX	SD	SE	CV (%)
SYS[mmHg]	86	128	180	23.34	3.89	18.22
DIA[mmHg]	40	79	152	25.69	4.28	32.46
MAP[mmHg]	61	95	155	22.77	3.79	23.93
PULSE[BPM]	47	78	130	16.65	2.77	21.35

SYS/DIA limits Awake 140/90 mmHg

Sleep 120/70 mmHg

Readings>SYS limits(s) 27.8 %

Readings>DIA limits(s) 27.8 %

Highest SYS 180 mmHg 11-08-2018 09:30

Lowest SYS 86 mmHg 11-08-2018 03:00

Highest DIA 152 mmHg 10-08-2018 16:00

Lowest DIA 40 mmHg 10-08-2018 16:17

Trends

