

Subject Access Request



Patient	Mr William Campbell
Date of birth	02-May-1974 (age 52)
Gender	M
NHS number	4993485891
Patient's address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire G83 9LE
Date range selected	Full record
Organisation	MMA Legal
Reference	100206

Problems

Active

25-Apr-2025 Mr Craig Ferguson (CF)

Home blood pressure monitor loaned to patient

08-Apr-2025 Mr Alex Newcombe (AN)

Home blood pressure monitor loaned to patient

24-Feb-2025 Mrs Fern Bissett (FB)

Caution -"same name"-check pat

01-Sept-2022 Mrs Caitlin McCallion (CC)

Drug over usage checked

27-Aug-2021 Miss Laura Clark (L)

Tested for 2019-nCoV (Wuhan) infection

27-Aug-2021 Miss Laura Clark (L)

Excluded 2019-nCoV (Wuhan) infection

Negative

20-July-2021 Miss Paula MacLean (PM)

Tested for 2019-nCoV (Wuhan) infection

Negative

20-July-2021 Miss Paula MacLean (PM)

Excluded 2019-nCoV (Wuhan) infection

19-Feb-2021 Mrs Caitlin McCallion (CC)

Confirmed 2019-nCoV (Wuhan) infection

19-Feb-2021 Mrs Caitlin McCallion (CC)

Tested for 2019-nCoV (Wuhan) infection

positive

21-Nov-2020 Mrs Caitlin McCallion (CC)

Tested for 2019-nCoV (Wuhan) infection

negative

05-Sept-2020 Mrs Caitlin McCallion (CC)

Tested for 2019-nCoV (Wuhan) infection

negative

11-May-2016 Dr Julia A. Dunn (JDUNN_18980)

Mixed hyperlipidaemia

03-Feb-2014 Miss Judith McLaughlin (JMCL)

Fast alcohol screening test

11-July-2010 Miss Anne Darroch (ADARROCH_18980)

Contusion of face, scalp and neck NOS

Contusion-face-front

12-May-2008 Miss Anne Darroch (ADARROCH_18980)

Acute gastritis

02-Feb-2007 Dr Stephen H. Dunn (SDUNN_18980)

Alcoholic gastritis

08-May-2006 UnknownUser (UnknownUse18980)

Summarised by Dr J McGlinchey

04-Feb-2003 UnknownUser (UnknownUse18980)

[D]Alcohol blood level excessive

29-Jan-2002 UnknownUser (UnknownUse18980)

Refer to psychologist

16-Jun-1999 UnknownUser (UnknownUse18980)

Glandular fever

Significant Past

26-Aug-2025 Miss Hannah Laird (HL)

Spirometry

Normal

25-Apr-2025 Dr Onyekachi Nwala (ON)

Essential hypertension

28-Mar-2025 Miss Hannah Laird (HL)

Sliding hiatus hernia

24-Mar-2025 Miss Hannah Laird (HL)

Gastroscopy abnormal

Hiatus hernia

Minor Past

23-Aug-2023 Dr Michael Kenning (MK)

Fungal nail infection

14-Mar-2023 Miss Lesley Goodwin (LGOODWIN_18980)

DNA hospital appointment

Lipid clinic

09-Mar-2020 Dr Julia A. Dunn (JDUNN_18980)

Pandemic Triage - telephone

14-July-2017 Dr Paul Jennings (PJ)

Failed encounter

09-Dec-2013 Dr Stephen H. Dunn (SDUNN_18980)

Pityriasis versicolor

26-Aug-2013 Dr Julia A. Dunn (JDUNN_18980)

[X]Depression NOS

08-May-2013 Dr Stephen H. Dunn (SDUNN_18980)

Acute sinusitis

20-May-2011 Dr Stephen H. Dunn (SDUNN_18980)

Telephone encounter

Impetigo per chemist. Given cream but rash spread. Rx flucloxacillin and rivastigmine. SD

Consultations

19-May-2026 Dr Fahad Saadi (FS) Drs Stephen & Julia Dunn Main Surgery

History

History 1. Diarrhoea
C/O diarrhoea for 1/52. Started last Tuesday.
Initially thought food poisoning but has continued.
Describes stools as liquid, watery, dark brown, [I have seen a photo - type 6 to 7 on Bristol stool chart].
Reports urgency and frequency, sometimes needing to go again shortly after a bowel movement.
No blood in stool. No fever, night sweats, weight loss, or rashes.
Reports some abdominal discomfort after bowel movements, but no significant pain.
No recent travel, changes in diet, or new medications.
No other household members with similar symptoms.
Has been taking lmodium and rehydration salts without improvement.
PMH: Haemorrhoids for years, gastritis (2008), hiatus hernia, peptic ulcer (diagnosed last year on endoscopy), hyperlipidaemia.
Medications: Ramipril, salbutamol, fenofibrate, atorvastatin.
Social Hx: Smokes 2-3 packets/week. Drinks alcohol. No significant change in habits. [very reluctant to talk about alcohol and smoking/ annoyed]
FHx: ***** had bowel cancer.
O/E: Temp 36.8°C, O2 sats 97%, HR 70, BP 119/89. Abdomen soft, non-tender, no organomegaly.
Investigations planned: Stool sample for MC&S faecal . Bloods for FBC, U&E, LFTs, TFTs, lipids, and HbA1c.
Treatment planned: Advised to drink plenty of fluids. Discussed risks of smoking and alcohol. Advised to return if diarrhoea persists for 3-4/52 for further investigation [QFIT].

2. Haemorrhoids
C/O bleeding from haemorrhoids for years.
Reports straining leading to bleeding, which has occurred twice in the last week. But photos of diarrhoea has no blood in it that I have seen today
Treatment planned: Prescribed scheriproct suppositories for 7 days.

3. Health Maintenance
Requested blood tests for cholesterol.
Discussed upcoming travel to Turkey. Advised no specific vaccinations required. Counselling on rabies risk from stray animals.

Medication

Medication Scheriproct Suppositories 12 SUPPOSITORY
1 ONCE DAILY

26-Jan-2026 Mr Craig Ferguson (CF) Drs Stephen & Julia DunnMain Surgery

27-Jan-2026 Medication

Medication Aciclovir Tablets 800 mg 35 TABLET ONE
TO BE TAKEN FIVE TIMES A DAY FOR SEVEN DAYS
Comment Supply of urgent rpt medicatn by Community Pharmacy
via PGD

20-Jan-2026 Dr Sarah Ejidiran (SE) Drs Stephen & Julia DunnMain Surgery

Problem	Problem Left sided rib pain
History	History History: - Left-sided rib cage pain for 2-3 days - Dull background pain with intermittent sharp stabbing episodes - Pain located in left rib cage area, extending to back. Severity severity 7-8/10 during sharp episodes, currently 2/10. Slightly responsive to simple analgesia - Pain sometimes triggered by forward bending movements - No associated chest pain or pain on breathing, No shortness of breath - Morning nausea and vomiting for several years due to hiatus hernia - Occasional shivering but no fever, no night sweats - Recent intentional weight loss from 130kg to 120kg, - - Is worried about underlying issue because***** passed away with pancreatic cancer - - Also expressed that he's drinking more than normal - drinking about 6-8 cans of lager nightly since ***** death.
Examination	Examination Physical Examination: - Left rib cage area examined - no inflammation, redness, or swelling - No tenderness on palpation during examination - No current pain reproduction during examination -
Comment	Comment Impression: - Likely musculoskeletal or nerve-related pain - - Plan: - Prescribed pregabalin for neuropathic pain medication - Safety netting provided regarding red flag symptoms: chest pain, shortness of breath, clamminess, sweating - advised to call 999 or return if symptoms worsen - Alcohol cessation support discussed - CAGE questionnaire score 3/4 indicating need for intervention - Advised self-referral information provided for West Dunbartonshire addiction services (Dumbarton: 0141 01389 812 018) - Worsening advice given - to return if no improvement if symptoms worsen
Medication	Medication Pregabalin Capsules 75 mg 14 capsule ONE CAP TWICE DAILY

30-Aug-2025 Mr Docman Docman (DOC1) Docman

Read Code Out of hours patient call detail received

09-July-2025 Dr Patrick Farrell (PF) Drs Stephen & Julia DunnMain Surgery

History History Lansoprazole added to repeat medication for hiatus hernia. Note oesophagitis and ulcer OGD March 2025.

09-July-2025 Mrs Lynsey MacMillan (LMAC) Drs Stephen & Julia DunnMain Surgery

Comment Comment med req - Lansoprazole

15-May-2025 Dr Onyekachi Nwala (ON) Telephone Call

History History Called to discuss blood test
- Recently had a colonoscopy which showed haemorrhoid and polyps, awaiting histology
- Renal function - normal
- Other test- essentially okay, improved lipid levels compared to previous year
- Plan - home blood pressure monitoring
- Follow up with PN
- pt requested for haemorrhoids medication

Medication Medication Anusol Suppositories 24 SUPPOSITORY ONE TO BE INSERTED TWICE A DAY

12-May-2025 Mrs Samantha Taylor (SAM) Drs Stephen & Julia DunnMain Surgery

Comment Comment obtained bloods as requested via right ante-cubital fossa, William will continue to monitor blood pressure, he has asked for referral to no smoking service.

History Cigarette smoker 20 Cigarettes/day

Examination O/E - Systolic BP reading 120 mm Hg

Examination O/E - Diastolic BP reading 100 mm Hg

Examination O/E - height 190 cm

Examination O/E - weight 126 Kg

Examination Body Mass Index 34.9

Examination Ideal Weight 83.03 Kg

Social Alcohol consumption 20 units/week

01-May-2025 Miss Meghan Brown (MB1) Drs Stephen & Julia DunnMain Surgery

Comment Comment PT wanted to pass on going in for Colonoscopy on Fri 09.05.

25-Apr-2025 Dr Onyekachi Nwala (ON) G.P.Surgery

History	History Had a raised Qft - 228
&br>History as earlier stated &br>&br>Average blood pressure - 141/100
&br>Diarrhoea
&br>- Chronic diarrhoea, loose stools
&br>- Urgency to go to toilet within 20 mins of first bowel movement
&br>- Occurs daily, multiple times
&br>- Blood in stool intermittently for 2+ yrs
&br>- Positive faecal occult blood test
&br>- No weight loss, no abdominal pain
&br>- FHx: ***** had bowel cancer
&br>- PMHx: previously given suppositories by Dr Steven Dunn - not effective
Examination	Examination Abdo exam: soft, non-tender
Comment	Comment Imp
&br>1. Bowel issues, raised Qft &br>&br>For USOC referral &br>&br>&br>2. Hypertension
&br>- BP average 141/100 (home monitoring)&br>&br>- Type 1 hypertension
&br>- Risk factors: obesity (130kg), alcohol (&br>&br>4 cans daily), smoking (up to 10/day)&br>&br>- Treatment: Ramipril 1.25mg daily commenced&br>&br>- Investigations: Renal function test in 2 weeks&br>&br>- Advised lifestyle modifications - weight loss, reduced salt intake, increased activity, reduced alcohol, smoking cessation
Problem	Problem Essential hypertension
Medication	Medication Ramipril Capsules 1.25 mg 56 capsule ONE CAP DAIL Y

08-Apr-2025 Dr Onyekachi Nwala (ON) Drs Stephen & Julia DunnMain Surgery

Problem	Problem	Raised blood pressure
History	History	Referred by nurse for high BP - BP today: elevated - No recurrent headaches - No chest pain, SOB, palpitations - 10-20/day - Alcohol: 4 cans of beer most days - Poor diet, irregular eating pattern due to taxi driving/night shifts - Minimal exercise - No sure of any family history of high blood pressure - Rectal bleeding - Intermittent red blood PR for approx 2 years - Frequency: once every 1-2 months - Last episode: 4-6 weeks ago - Previous examination by doctor 2-3 years ago - no abnormality found, suppositories given
Examination	Examination	O/E - BP reading 170/90 - HR 89
Comment	Comment	Imp - Raised blood pressure - Home BP monitoring for 1 week (morning and evening) - To book in for evaluation of rectal bleeding
Examination	Examination	Systolic blood pressure 143 mmHg
Examination	Examination	Diastolic blood pressure 99 mmHg
Medication	Medication	Lansoprazole Capsules (Gastro-Resistant) 30 mg 56 CAPSULE ONE TO BE TAKEN EACH DAY

04-Mar-2025 Miss Meghan Brown (MB1) Drs Stephen & Julia DunnMain Surgery

Comment ~~Comment~~ Med Request - Lansoprazole 30mg

27-Sept-2024 Dr Paul McNamara (PMC) Drs Stephen & Julia Dunn Main Surgery

History	History TC - Discussed bloods - low folate and borderline b12. Taxi driver and likely dietary. Very high cholesterol and triglycerides - discussed lifestyle modifications and restart statin and supralip. Discussed repeating fasting bloods
Medication	Medication Folic Acid Tablets 5 mg 56 TABLET ONE TO BE TAKEN EACH DAY
Medication	Medication Cyanocobalamin Tablets 50 micrograms 56 tablet ONE DAILY
Medication	Medication Atorvastatin Tablets 20 mg 56 TABLET ONE TO BE TAKEN EACH DAY
Medication	Medication Supralip Tablets 160 mg 56 tablet ONE DAILY IN THE MORNING

18-Sept-2024 Mrs Samantha Taylor (SAM) Drs Stephen & Julia DunnMain Surgery

Comment	Comment obtained bloods as requested via right antecubital fossa
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30-Aug-2024 Mr Craig Ferguson (CF) Drs Stephen & Julia DunnMain Surgery

Comment Comment Letter posted 30.08.24

30-Aug-2024 Dr Stephen H. Dunn (SDUNN 18980) Telephone Consultation

History History No reply to prebooked appt. Note pt not had bloods done yet. Will ask staff to write to William and invite in for bloods then rv. SD

23-July-2024 Dr Stephen H. Dunn (SDUNN_18980) Telephone Consultation

History	History 1. Flare of gout in left ankle and right great toe. Rx given.
2. Stopped statin and supralip months ago. Remain off and restart according to bloods.
3. Needs updated bloods. Appt booked and follow up with myself made.
4. Weight increased.
5. No word re endoscopy: will ask staff to chase.	
Medication	Medication Lansoprazole Capsules (Gastro-Resistant) 30 mg 56 CAPSULE ONE TO BE TAKEN EACH DAY	
Medication	Medication Colchicine Tablets 500 micrograms 12 TABLET ONE TO BE TAKEN TWO TO FOUR TIMES A DAY UNTIL SYMPTOMS RELIEVED (MAX 12 PER COURSE - NOT TO BE REPEATED WITHIN 3 DAYS)	
Examination	O/E - height	190 cm
Examination	O/E - weight	133 Kg
Examination	Body Mass Index	36.84

23-Aug-2023 Dr Michael Kenning (MK) Drs Stephen & Julia DunnMain Surgery

Problem	Fungal nail infection	
History	History Bilat greater toes. Going on a long while. Has tried topical rx. No other fungal infections described.	
Examination	Examination Gen well, little overweight. Bilat fungal infections of the great toes. R>L. Quite pungent. Onycholysis.	
Comment	Comment Recent-ish bloods fine for liver and kidneys. Adv about debriding as much as possible of the nail. Cuticles look ok. Will take a while for the nail to grow out, perhaps 6m.	
Medication	Medication Fluconazole Capsules 50 mg 14 capsule ONE CAP DAILY	

24-May-2023 Dr Fadilla Refin (FR) Results recording

History	History FBC clotted - for repeat FBC
Once I have got pre-adhd assessment qs and blood result - will send referral
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22-May-2023 Dr Fadilla Refin (FR) Drs Stephen & Julia DunnMain Surgery

History	History 1) Cough
Has been having cough for several years now
However, noted started to have a wheeze
No sputum/ fever/ chest pain
Smoker 5 roll up per day for 30 plus yeae

2) Hernia
Noted to have nbulge on the tummy when when lying down since Friday
No pain
has been having more frequent indigestion
risk factor ; obese, cough
No history of abdominal surgery

3) Would like to get blood done for lipid

4) Would like to get tested for ADHD
***** diagnosed with ADHD and have similar trait to him	
Examination	Examination chest - bilateral wheeze
abdomen - hernia	
Comment	Comment Plan:
1- amox pred and referral for spirometry
2. referral to surgeon for abdominal hernia
3. blood done for lipid
4. Advise pt to collect ADHD pre -assesment questionnaire. I will refer to pysh once all information are available
5. Safety netted. Patient happy with the above	
Medication	Medication Amoxicillin Capsules 500 mg 15 CAPSULE ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS	
Medication	Medication Prednisolone Tablets 5 mg 40 TABLET EIGHT TO BE TAKEN IN THE MORNING	
Medication	Medication Salbutamol Cfc-free inhaler 100 micrograms/puff 1 INHALER ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY	
Medication	Medication Atorvastatin Tablets 20 mg 56 TABLET ONE TO BE TAKEN EACH DAY	
Medication	Medication Supralip Tablets 160 mg 56 tablet ONE DAILY IN THE MORNING	

19-May-2023 Mr Docman Docman (DOC1) Docman

Read Code	Out of hours patient call detail received
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23-Aug-2022 Dr Anam Abdul Majeed (AAM) General Practice Surgery

History **History** last week he notice a mole near his belly button, it was oozing a little , although he doesnot recall catching it on, but today he realized there is small scab over it. He wants it to get it checked out, because if in case its something sinister.
After examination , explained that its very small in size and will be able to assess it better once when the scab is healed, its not in sun exposed area, and does not have any pearly edges to it. and is very small in size 2mm.
Advice:
Observe for a while, if it grows in size, or changes its character, like right now it has symmetrical clear border, light pink in colour with a scab. but if it changes please do come back.

2nd problem: dry cough since last week, on and off, not continuos, No phlegm, no Temperatures, no SOB, no difficulty in swallowing. he is not known to have asthma.
Advice: Its likely a viral cough, it will go away, but if symptoms gets worse like develops a temperature, or SOb, OR chest tightness, then please come back.

11-Jun-2022 Mr Docman Docman (DOC1) Docman

Read Code Out of hours patient call detail received

16-Apr-2022 Mr Anonymous User (ANON) MJog

Read Code SMS text sent to patient Summary of ***** message sent to patient / Dear William, Please help Drs S & J ***** keep our main telephone line free for enquiries and appointments and do not order your repeat medications on the patient enquiry/booking line. All telephone medication requests should be requested on 01389 811834 (our dedicated prescription line). Our staff will transfer all future medication requests to the prescription line and we ask you to call 01389 811834 in the first instance. We endeavour to have your medication approved within two working days as usual. Naturally, there will also be processing time needed for your pharmacy from this time and they can advised you of this. Thank you Drs S & J ***** / Prescription line reminder

24-Mar-2022 Dr Julia A. Dunn (JDUNN_18980) Drs Stephen & Julia DunnMain Surgery

Read Code Medication review done
Medication Medication Atorvastatin Tablets 20 mg 56 TABLET ONE TO BE TAKEN EACH DAY
Medication Medication Supralip Tablets 160 mg 56 tablet ONE DAILY IN THE MORNING

24-Mar-2022 Miss Anne Darroch (ADARROCH_18980) Drs Stephen & Julia DunnMain Surgery

Comment **Comment** Patient not happy with CMS prescription and wishes to cancel this, was issued 15.03.22. Also change chemist to Lloyds Station Road

15-Mar-2022 Miss Fiona Cairns (MFC) Data Entry

Read Code Prescription by supplementary prescriber Rx issued by Pharmacist Independent Prescriber
Read Code Serial prescription issued
Read Code Dispensing review of use of medicines MCR - Treatment Summary Report Actioned

09-Mar-2022 Mr Anonymous User (ANON) MJog

Read Code SMS text sent to patient Text notification re Well Being Nurse availability

17-Dec-2021 Dr Ili Suhaimi (IS) Telephone Consultation

History **History** Phone call to pt - straight to voicemail saying 'I must be on a phone call, phone back and do not leave a message'. Voicemail not left.

09-Sept-2021 Mr Anonymous User (ANON) MJog

Read Code SMS text sent to patient Summary of text message sent to patient / Dear William, please contact Drs S & J ***** on 01389 811833 at your earliest convenience.

09-Sept-2021 Mr Anonymous User (ANON) MJog

Read Code SMS text sent to patient Summary of text message sent to patient / Dear William Campbell, further to our recent conversation. The message was regarding your blood test on 20/8/21 and you have had it repeated 6/9/21 and these came back normal and satisfactory. You do not need a further blood test. Please call if you have any further questions. Drs S & J *****

05-Sept-2021 Mr Anonymous User (ANON) MJog

Read Code SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 15:35 on Monday 06 of September at Drs S & J ***** If you cannot attend text CANCEL to 07903590756.

03-Sept-2021 Miss Lesley Goodwin (LGOODWIN_18980) Drs Stephen & Julia DunnMain Surgery

Comment Comment Prebookable review post bloods appt offered with SD thurs 09.09.21 "will be sleeping" annoyed could not offer later appt tried to help "forget it, send me a reminder for my blood appt" and hung up

03-Sept-2021 Miss Lesley Goodwin (LGOODWIN_18980) Drs Stephen & Julia DunnMain Surgery

Comment Comment repeat tests (original test taken at OOH)

03-Sept-2021 Mr Anonymous User (ANON) MJog

Read Code SMS text sent to patient Summary of text message sent to patient / Dear William, please contact Drs S & J ***** on 01389 811833 at your earliest convenience.

03-Sept-2021 Mr Anonymous User (ANON) MJog

Read Code SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: Dear William, Confirmation of your appointment at 15:35 on Mon, 06 of Sep at Drs S & J ***** If unable to attend please send CANCEL to 07903590756.

27-Aug-2021 Miss Laura Clark (L) Drs Stephen & Julia DunnMain Surgery

Read Code Tested for 2019-nCoV (Wuhan) infection
Read Code Excluded 2019-nCoV (Wuhan) infection Negative

20-Aug-2021 Mr Docman Docman (DOC1) Docman

Read Code Out of hours patient call detail received

20-July-2021 Miss Paula MacLean (PM) Drs Stephen & Julia DunnMain Surgery

Problem Tested for 2019-nCoV (Wuhan) infection Negative
Problem Excluded 2019-nCoV (Wuhan) infection

04-May-2021 Dr Stephen H. Dunn (SDUNN_18980) Telephone Consultation

History History Clarifying bloods to be done once ?gout settles. Advised this is correct guidance. SD

26-Apr-2021 Dr Ili Suhaimi (IS) Telephone Consultation

History History 1/52 hx of painful MTPJ of right great toe. Not red but sore to touch. Similar episode a few months ago but self-resolved. No fever/vomiting. Takes 4-8 cans of beer a week.
Comment Comment Possible gout. For ibuprofen, cocodamol + PPI cover. Bloods in 4/52. If new fever/vomiting to recontact for rv.
Medication Medication Ibuprofen Tablets 400 mg 42 TABLET ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD
Medication Medication Co-Codamol 30/500 Tablets 50 TABLET TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)
Medication Medication Omeprazole Capsules (Gastro-Resistant) 20 mg 14 capsule ONE TO BE TAKEN EACH DAY

19-Feb-2021 Mrs Caitlin McCallion (CC) Drs Stephen & Julia DunnMain Surgery

Problem Confirmed 2019-nCoV (Wuhan) infection
Problem Tested for 2019-nCoV (Wuhan) infection positive

26-Jan-2021 Dr Stephen H. Dunn (SDUNN_18980) General Practice Surgery

History	History	As below. Intermittent fresh rectal blood on end of stool and on toilet paper.
Examination	Examination	Abdo soft, non tender, no masses. No LKKS. DRE: no obvious fissure. Small pile at anal margin. No palpable lumps or irregularities. Prostate medium size.
Comment	Comment	Likely internal pile. Advice, diet fibre etc discussed.
History	History	Lifestyle advice re weight, smoking, and alcohol.
Comment	Comment	Smoking cessation advice .
Comment	Comment	Has appt with biochemist/lipid clinic this afternoon as chol 8.1, TG 5.5.
Medication	Medication	Scheriproct Suppositories 12 SUPPOSITORY ONE TO BE INSERTED MORNING AND NIGHT FOR UP TO 7 DAYS
Examination	O/E - height	190 cm
Examination	O/E - weight	120 Kg
Examination	Body Mass Index	33.24

25-Jan-2021 Dr Stephen H. Dunn (SDUNN_18980) Video Consult - Attend Anywhere

History	History	Fresh rectal bleeding intermittently for past year. Seen by EE in Jan 2020. qFIT -ve. Bloods NAD. Denies constipation. Blood at end of defaecation and on wiping. No weight loss. Alcohol intake around 56u/week. Under lipid clinic. On Rx. No blood thinners. Smoker. FH bowel cancer *****.
Comment	Comment	Arrange bloods and rv tomorrow with results. SD

21-Nov-2020 Mrs Caitlin McCallion (CC) Drs Stephen & Julia DunnMain Surgery

Problem	Tested for 2019-nCoV (Wuhan) infection	negative
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29-Sept-2020 Mrs Caitlin McCallion (CC) Drs Stephen & Julia DunnMain Surgery

Problem	Tested for 2019-nCoV (Wuhan) infection	negative
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05-Sept-2020 Mrs Caitlin McCallion (CC) Drs Stephen & Julia DunnMain Surgery

Problem	Tested for 2019-nCoV (Wuhan) infection	negative
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02-Jun-2020 Mrs Diana Lockhart (DL) Telephone Consultation

History	Serial prescription issued	MCR - Patient assessed as suitable for serial prescription. Change made.
Medication	Medication	Atorvastatin Tablets 20 mg 392 tablet ONE TO BE TAKEN EACH DAY
Medication	Medication	Supralip Tablets 160 mg 392 tablet ONE DAILY IN MORNING

27-Mar-2020 Dr Ili Suhaimi (IS) Telephone Consultation

History	History	seeking advice. pt feeling better *****. wanting to clarify period of self-isolation.
Comment	Comment	double checked with nhs inform and EE. can confirm pt to complete 7/7, household to complete 14/7, *****. pt happy with explanation
Problem	Problem	Pandemic Triage - telephone

20-Mar-2020 Dr Eric Egong (EE) Telephone Consultation

Comment	Comment	Coryzal, feverish today (tried to phone on 9/3 for same but symptom improved but worse today esp fever) Difficult to say whether recurrence or new symptom-set but advised self-isolation 7/7 (taxi driver). Family members asymptomatic (advised self isolation 7/7; rather than 14 if counting from 9/3). Advised pt can go back to work provided fever has settled (cough may persist) as per gov.uk advice. WS (esp dyspnoea) and phone back if any concerns.
Problem	Problem	Pandemic Triage - telephone

09-Mar-2020 Dr Julia A. Dunn (JDUNN_18980) Drs Stephen & Julia DunnMain Surgery

History	History	Tried mobile a further twice but goes direct to answer machine. Home phone no longer in use
Problem	Problem	Pandemic Triage - telephone

09-Mar-2020 Dr Julia A. Dunn (JDUNN_18980) Drs Stephen & Julia DunnMain Surgery

History	History	Failed encounter - message left on answer machine no to call back
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29-Jan-2020 Dr Eric Egong (EE) Drs Stephen & Julia DunnMain Surgery

Comment Comment Venepuncture performed as planned (note no PR bleed today). Phone next week for result and rv prn. Pt will submit qfit sample at earliest convenience.

28-Jan-2020 Dr Eric Egong (EE) Drs Stephen & Julia DunnMain Surgery

History History PR bleed. Fresh. x2 past 2/52. Had a few episodes last year. No pain backpassage. ***** No unintentional weight loss recently. Taxi driver.

Examination Examination Chaperone declined. DRE - nad. Smooth prostate. Brown stool on glove.

Comment Comment For qfit, bloods - requesting myself for venepuncture. Appt arranged tomorrow with myself.

25-July-2019 Dr Eric Egong (EE) Drs Stephen & Julia DunnMain Surgery

History History Swollen ankles - both. Just flew back from holiday 2hrs ago. Also has red patch on right shin (grazed). Skin feels tight. Works as taxi driver in Glasgow.

Examination O/E - BP reading Well. T36.7 p90 regular Sat 99%

Examination Examination Both calves - SNT; 46cm circumference for both
Redness right shin with excoriation seen - no d/c
Pitting oedema both ankles

Comment Comment Cover for cellulitis - fluclo; trial short course furosemide. No evidence DVT
Return next week to see myself for bloods + r/v
Cautioned re s/e of diuretics inc dizziness and increased diuresis which may affect work
R/v sooner prn

Examination Systolic blood pressure 120 mm Hg

Examination Diastolic blood pressure 80 mm Hg

Medication Medication Furosemide Tablets 20 mg 14 tablet ONE TO BE TAKEN EACH MORNING

Medication Medication Flucloxacillin Capsules 500 mg 28 capsule ONE TO BE TAKEN FOUR TIMES A DAY FOR 7 DAYS

03-Sept-2018 Dr Eric Egong (EE) Drs Stephen & Julia DunnMain Surgery

History History Wanting to quit smoking
Has tried 'evreything' - patch, lozenge, vape
Asking for champix
Said pharmacist informed him that he will need to see a doctor about this

Comment Comment Informed patient smoking cessation service is provided by pharmacy
Start champix - 4/52 initiation pack issued

Medication Medication Varenicline Tablets 1 mg + 500 micrograms 25 TABLET TO BE TAKEN AS DIRECTED. DISPENSE WEEKLY

Medication Medication Champix 4 Week Treatment Initiation Pack Tablets 53 tablet As directed

14-Jun-2018 Dr Rhoda Kelso (RK) Drs Stephen & Julia DunnMain Surgery

Comment Comment to be on atorvastatin 20mg daily as per lipid clinic - rnag William thought he was to take 2 of these, clarified onlay one tbalet of 20mg atorvastatin

Medication Medication Atorvastatin Tablets 20 mg 56 TABLET ONE TO BE TAKEN EACH DAY

13-Jun-2018 Miss Paula MacLean (PM) Drs Stephen & Julia DunnMain Surgery

Comment Comment Med req - Atorvastatin, on repeats but patient states he is taking 2-a-day and has run out, please clarify dose

24-Apr-2018 Dr Emma Renfrew (ER) Data Entry

History History sr

Medication Medication Cetirizine Hydrochloride Tablets 10 mg 56 TABLET ONE TO BE TAKEN EACH DAY

24-Apr-2018 Miss Paula MacLean (PM) Drs Stephen & Julia DunnMain Surgery

Comment Comment Med req - Cetirizine for hayfever

06-Apr-2018 Dr Robert McMillan (RM) Drs Stephen & Julia DunnMain Surgery

Comment Comment Dose increased as per Lipid Clinic

Medication Medication Atorvastatin Tablets 20 mg 56 TABLET ONE TO BE TAKEN EACH DAY

20-Feb-2018 Dr Emma Renfrew (ER) Drs Stephen & Julia DunnMain Surgery

History History cough 2/52. non-productive. smoker 10/day. no haemoptysis. no sob. no fever. e+d. ?wheeze - tried ***** blue/brown inhaler no effect. otherwise well. no cp/ankle swelling.

Examination O/E - BP reading sats97 p80 t37.1 rr16 talking in full sentences. no obvious sob. chest scattered wheeze/creps bibasally. good ae otherwise. hs i+ii+o

Comment rx with abx/steroids given wheeze. rw if worsening sx - discussed. see inb aftr course.

Examination Systolic blood pressure 124 mm Hg

Examination Diastolic blood pressure 80 mm Hg

Medication Amoxicillin Capsules 500 mg 15 CAPSULE ONE TO BE TAKEN THREE TIMES A DAY

Medication Prednisolone Tablets 5 mg 40 TABLET EIGHT TO BE TAKEN IN THE MORNING

14-July-2017 Dr Paul Jennings (PJ) Data Entry

Problem Failed encounter

History History Due for phone consultation- did not call practice

09-Jan-2017 Dr Robert McMillan (RM) Data Entry

Comment Comment Patient DNA'd afternoon appt: made same morning

19-Aug-2016 Dr Robert McMillan (RM) Drs Stephen & Julia DunnMain Surgery

History History 2/7 spots appeared across chest/back/arms - consistent with chickenpox. Spreading. Itchy ++. Otherwise well, no fevers. *****. Has had chicken pox in past. No run down otherwise.

Social Social Worse as food delivery driver

Comment Comment Consistent with chickenpox. Advised 5 days exclusion from onset of rash from work.

Medication Medication Chlorphenamine Tablets 4 mg 28 TABLET ONE TO BE TAKEN EVERY FOUR TO SIX HOURS (MAX 6 TABLETS PER 24 HOURS)

Medication Medication Crotamiton Cream 10 % 100 GRAM APPLY THINLY TWO TO THREE TIMES A DAY

Medication Medication Atorvastatin Tablets 10 mg 56 TABLET ONE TO BE TAKEN EACH DAY

Medication Medication Supralip Tablets 160 mg 56 tablet ONE DAILY IN THE MORNING

27-Jun-2016 Miss Gill Harvey (GH) Drs Stephen & Julia DunnMain Surgery

Comment Comment med req - bezalip rash has resolved now and cetirizine

16-May-2016 Mrs Angela Myers (ANM) Drs Stephen & Julia DunnMain Surgery

Comment Comment Med query - pt has come out in a rash asking if this had to do with new medication Supralip used to take Bexafibrate and no rash?

16-May-2016 Dr Stephen H. Dunn (SDUNN_18980) Telephone Consultation

History History No reply. Message left. SD

16-May-2016 Dr Stephen H. Dunn (SDUNN_18980) Telephone Consultation

History History Rash since starting supralip. Advice stop. RV 1/12 and reconsider bezalip if rash resolved as has had this in past.

11-May-2016 Dr Julia A. Dunn (JDUNN_18980) Drs Stephen & Julia DunnMain Surgery

Problem Mixed hyperlipidaemia

Medication Medication Supralip Tablets 160 mg 56 tablet ONE DAILY IN THE MORNING

23-Mar-2016 Dr Stephen H. Dunn (SDUNN_18980) Telephone Consultation

History History Advice re lipids, high TG and cholesterol. Taking atorva. Has appt for lipid clinic. Lifestyle advice re ETOH, exercise, weight meantime. SD

09-Mar-2016 Miss Gill Harvey (GH) Drs Stephen & Julia DunnMain Surgery

Comment Comment GH - pt req taken from hand next time if possible

29-Feb-2016 Dr Stephen H. Dunn (SDUNN_18980) Drs Stephen & Julia DunnMain Surgery

History **History** Triggering right middle finger.
Recurrence P versicolor.
Worried re lipids and wishes to re-engage.

Examination O/E - height 190 cm

Examination O/E - weight 110 Kg

Examination Body Mass Index 30.47

Social Alcohol intake 83 units/week

Social Moderate smoker - 10-19 cigs/d

Comment **Comment** TCI for fasting bloods.
Refer lipid clinic and ortho hand re triggering.
Itraconazole for skin (then start statin). Stop bexafibrate. SD

Medication **Medication** Itraconazole Capsules 100 mg 14 capsule

Medication TWO CAPS DAILY

Medication **Medication** Atorvastatin Tablets 10 mg 56 TABLET ONE

TO BE TAKEN EACH DAY

05-Oct-2015 Ms Christine M. Sinclair (CDAWSON_18980) Drs Stephen & Julia DunnMain Surgery

Comment **Comment** Flu vaccination given by LSR Pharmacy - batch no J27R exp 01/06/2016 - left deltoid

23-Oct-2014 Dr Claire McGonagle (CMCG) Drs Stephen & Julia DunnMain Surgery

History **History** left shoulder pain for 2 wks-no injury or new activity-sore when wakes and throughout day-movement makes it worse.taking brufen.right hand dominant

Examination **Examination** from both shoulders, no deformity, some discomfort at end of range of movement, no tenderness over ac joint

Comment **Comment** try naproxen-rest with gentle mobilisation.if not settling-physio.also not taken fibrate for a while-missed appt dr.series-wishes re-referral-discussed importance of taking daily-to get bloods checked for lipids in 4 wks

Medication **Medication** Naproxen Tablets 500 mg 56 TABLET ONE

TO BE TAKEN TWICE A DAY

Medication **Medication** Bezafibrate M/R tablets 400 mg 56 tablet 1

Tab Daily

22-Apr-2014 Miss Megan Berry (MB) Drs Stephen & Julia DunnMain Surgery

Comment **Comment** request - cetirizine

03-Feb-2014 Mrs Fiona Connolly (FCONNOLLY_18980) Drs Stephen & Julia DunnMain Surgery

History NHS Health Check programme

Social White British

Family History No FH: Ischaemic heart disease

Family History No FH: Stroke/TIA

History Chest pain not present

History No breathlessness

History Depression screening using questions

Result O/E - pulse rate NOS 70

Examination O/E - pulse rhythm regular

Result Systolic BP 120 mmHg

Result Diastolic BP 70 mmHg

Result Weight 110 Kg

Result BMI 30.5 kg/m2

Result Assessing cardiovascular risk using SIGN score 11

History JBS cardvasc risk 10-20% 10 yr

History Current smoker

Result Cigarette consumption 10

History Smoking cessation advice

History Alcohol intake above rec limit

Result Alcohol units per week 25

Result Alcohol screen - FAST completd 8

History Healthy diet

History GPPAQ physical act ind: active

Social Unemployed

Social Financial problem

Social Healthy lifestyle program stat

History Thinking about stop smoking

Result Feels should cut down drinking 1

History Brief intervention for excessive alcohol consumptn declined

New Referral Referl to stop-smoking clinic

History Health ed. - alcohol

History Goal identification

03-Feb-2014 Mrs Fiona Connolly (FCONNOLLY_18980) Drs Stephen & Julia DunnMain Surgery

Comment Serum triglycerides Keep Well rv. referral to smoke 9.2 mmol/l
cessation and welfare right. Excess alcohol intake
discussed advised to reduce : pt states can stop anytime
wants advised to do ***** before attending Dr Series for
Examination Assign cardiovascular disease score Template Added 11 %
Calculated Using Estimated Data Smoking mean: 13 cpd
used Comparison Score: 5

09-Dec-2013 Dr Stephen H. Dunn (SDUNN_18980) Drs Stephen & Julia DunnMain Surgery

Problem Pityriasis versicolor
History History Recurrence of rash over posterior trunk
Examination Examination Almost guttate like pattern reddish/brown
macules over trunk posteriorly
Comment Comment Prob P versicolor. Rx and rv 1/12 if not
resolved. Consider DDx. SD
Medication Medication Itraconazole Capsules 100 mg 14 capsule 2
Caps Daily

18-Nov-2013 Dr Bhavani Vijaykumar (BV18) Drs Stephen & Julia DunnMain Surgery

Problem Problem Road traffic accident.
History History Pt was driving in a car when he had a RTA 5
days back - he jerked suddenly due to impact. He had no
pain then, 2 days later experienced pain in the nape of
neck more on the right side. No dizziness, LOC, no tingling
numbness in the hands. Pt on Bezafib - not taking
regularly he says. Visits the endocrine clinic regularly,
reports not in.
Examination O/E - BP reading P- 93, So2 - 99, C spine tenderness +
C7, T1. Tenderness + over the paraspinal region rt and
suprascapular area. Normal movements of hand with
sensation bilateral. Shoulder movements normal bilateral.
Comment Comment Musculoskeletal pain. X ray - C spine. Rvw -
1 week with results. Issued meds.
Examination Systolic blood pressure 129 mm Hg
Examination Diastolic blood pressure 99 mm Hg
Medication Medication Bezafibrate M/R tablets 400 mg 56 tablet 1
Tab Daily
Medication Medication Co-Codamol 30/500 Tablets 50 tablet TWO
TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN
REQUIRED (MAXIMUM OF 8 IN 24 HOURS)

26-Aug-2013 Dr Julia A. Dunn (JDUNN_18980) General Practice Surgery

Read Code WML document Cognitive Behavioural Therapy (CBT)
Printed

26-Aug-2013 Dr Julia A. Dunn (JDUNN_18980) Drs Stephen & Julia DunnMain Surgery

Problem [X]Depression NOS
History History Low mood, poor sleep, poor concentration, no
thoughts self harm. Very stressed at work, drives for
Iceland, work hrs variable, has 2yr old and son from prev
marriage who he has not seen much of over summer and
this upsets him
Examination Patient health questionnaire (PHQ-9) score 14 /27
Comment MED3 issued to patient PLAN Fluoxetine and leaflet re
cbt and 3 weeks ND
Medication Medication Fluoxetine Hydrochloride Capsules 20 mg 28
capsule ONE TO BE TAKEN EACH DAY
Examination Biopsychosocial assessment
History Symptom severity and duration discussed
Read Code Depression screening using questions
Read Code Depression annual review

20-Jun-2013 Mrs Fiona Connolly (FCONNOLLY_18980) Drs Stephen & Julia DunnMain Surgery

Comment Comment Travel planned to Tunisia for 1/52 holiday.
previous Hep A/ Typhoid out of date- booster required.
Medication Medication Hepatyrrix Vaccine, Suspension For Injection
1 ml pre-filled syringe 1 pre-filled disposable injection 1ML
INJECTION

20-Jun-2013 Mrs Fiona Connolly (FCONNOLLY_18980) Drs Stephen & Julia DunnMain Surgery

Comment 2nd hepatitis A vaccination (GMS) Hepatyrrix lotATYAB034AA exp: 3/14 advised to return for booster
hep A after 6/12
Comment Booster typhoid vaccination (GMS)

08-May-2013 Dr Stephen H. Dunn (SDUNN_18980) Drs Stephen & Julia DunnMain Surgery

Problem Acute sinusitis
 History **History** 2-3/52 sinusitis, yellow catarrh. Getting married few weeks. Also recurrence of rash on back.
 Examination **Examination** Chest clear. Throat red, no exudate. P 80 reg. Sats 100. P. versicolor.
 Comment **Comment** Rx amox; itracopnazole for p versicolor and v prn. SD
 Medication **Medication** Amoxicillin Capsules 500 mg 15 CAPSULE ONE TO BE TAKEN THREE TIMES A DAY
 Medication **Medication** Itraconazole Capsules 100 mg 14 capsule TWO TO BE TAKEN EACH DAY

28-Jan-2013 Dr Yasir Akbar (YA) Drs Stephen & Julia DunnMain Surgery

History **History** bilateral red and itchy eyes for last two days. not c/o pain or discharge .
 Examination **Examination** HR 90 RR 15 coughing, want chest to be checked chest clear.throat inflamed. . eyes NAD ,PERLA no pain no chemosis noted.
 Comment **Comment** own towel, worried he had tonsillitis- tonsils fine. mouth wash given for sore throat.
 Medication **Medication** Chloramphenicol Eye drops 0.5 % 10 ML APPLY ONE DROP EVERY TWO HOURS INITIALLY THEN REDUCE FREQUENCY AS INFECTION IS CONTROLLED AND CONTINUE FOR 48 HOURS AFTER HEALING
 Medication **Medication** Chlorhexidine Gluconate Mouth wash 0.2 % 300 ML RINSE MOUTH WITH 10ML FOR ABOUT 1 MINUTE TWICE A DAY

31-Oct-2012 Dr Adnan Syeed (AS1) Drs Stephen & Julia DunnMain Surgery

History **History** Itchy rash across back - had for several mths
 Examination **Examination** Light brown coloured patches - areas of depigmentation - quite widespread - looks like pityriasis versicolor
 Medication **Medication** Fluconazole Capsules 50 mg 14 capsule ONE CAP DAILY
 History **History** Finger wound - healing but unsure if infected as has formed thick moist crust? granulation tissue.Not weeping.
 Comment **Comment** Has appt mane to see orthopaed cons

29-Oct-2012 Miss Megan Berry (MB) Drs Stephen & Julia DunnMain Surgery

Comment **Comment** pt asking for duplicate of med3 dated 01/10/12 - 29/10/12 for social, also asking for continuation med3 cert from today (29/10/12) for 4 weeks asking for two copies one for work and one for social

29-Oct-2012 Dr Julia A. Dunn (JDUNN_18980) Drs Stephen & Julia DunnMain Surgery

History MED3 issued to patient post op tendon repair 4 weeks

01-Oct-2012 Dr Stephen H. Dunn (SDUNN_18980) Data Entry

History MED3 issued to patient 4/52 post op tendon repair. SD

28-Sept-2012 Miss Megan Berry (MB) Drs Stephen & Julia DunnMain Surgery

Comment **Comment** request - continuation med3 cert from today (01.09.12) 4/52

13-Sept-2012 Miss Megan Berry (MB) Drs Stephen & Julia DunnMain Surgery

Comment **Comment** request - ibuprofen also requesting more tramadol as px will run out on Sunday 16/09/12 as he is taking 8 tabs daily

11-Sept-2012 Dr Adnan Syeed (AS1) Drs Stephen & Julia DunnMain Surgery

Medication **Medication** Tramadol Hydrochloride Capsules 50 mg 30 capsule ONE OR TWO TABS TAKEN UP TO FOUR TIMES DAILY AS REQUIRED

10-Sept-2012 Miss Megan Berry (MB) Drs Stephen & Julia DunnMain Surgery

Comment **Comment** request med3 cert from today (10/09/12) pt advised will probably be off work 3-4 months

10-Sept-2012 Dr Julia A. Dunn (JDUNN_18980) Drs Stephen & Julia DunnMain Surgery

History MED3 issued to patient 4 weekjs tendon repair

10-Sept-2012 Miss Megan Berry (MB) Drs Stephen & Julia DunnMain Surgery

Comment Comment request - tramadol was given by OOH and feels these are helping the pain

05-Sept-2012 Dr Yasir Akbar (YA) Drs Stephen & Julia DunnMain Surgery

Problem Problem Pain in the left hand after operation for tendon repair
 History History Injured his hand -while repairing a shower
 Examination Examination Hand covered in bandages/ dressing. Asking for pain relief.
 Comment Comment Can self certify for first week for sickline.
 Medication Medication Co-Codamol 30/500 Tablets 100 TABLET TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)
 Medication Medication Ibuprofen Tablets 400 mg 24 tablet ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD
 Medication Medication Bezafibrate M/R tablets 400 mg 28 tablet 1 Tab Daily
 Problem Problem Hyperlipidemia
 Comment Comment Bezafibrate prescribed as per advice.

04-Sept-2012 Mr Docman Docman (DOC1) Docman

Read Code [SO]Flexor digitorum profundus to ring Repair FDP left ring finger

06-July-2012 Ms Christine M. Sinclair (CDAWSON_18980) Drs Stephen & Julia DunnMain Surgery

Comment Comment cetirizine please

06-July-2012 Dr Adnan Syeed (AS1) Drs Stephen & Julia DunnMain Surgery

Comment Comment Develops headache after taking piriton and requesting alternative
 Medication Medication Cetirizine Hydrochloride Tablets 10 mg 30 tablet ONE DAILY

03-July-2012 Mrs Charlotte Sweeney (CHAGGERTY_18980) Drs Stephen & Julia DunnMain Surgery

Comment Comment request - chloramphenamine

25-Nov-2011 Dr Claire McGonagle (CMCG) Drs Stephen & Julia DunnMain Surgery

History History Discussed letter from lipid clinic. To start bezalip mr and will be reviewed again in 6/12.
 Medication Medication Bezalip-Mono M/R tablets 400 mg 28 tablet 1 Tab Daily

08-Nov-2011 Dr Jennifer McCracken (JEN1) Drs Stephen & Julia DunnMain Surgery

History History Diarrhoea on and off 3 weeks. No vomiting. Started with sore throat and general malaise. No fever. Still working. Eating and drinking ok. No foreign travel. No abdo pain
 Examination O/E - BP reading Temp 36.2 HR 61reg Sats 99
 Examination Systolic blood pressure 122 mm Hg
 Examination Diastolic blood pressure 84 mm Hg
 Examination Examination Abdo soft non tender no masses. Bowel sounds normal. Warm periph Well hydrated.
 Comment Comment Send stool for C&S and parasitology first , c/w fluids, light diet. Rv with results 1/52

01-Aug-2011 Mrs Fiona Connolly (FCONNOLLY_18980) Drs Stephen & Julia DunnMain Surgery

Comment Comment chol improved slightly from 10 to 7.8. although TG remain high at 6.8. message left for pt. gp already referred pt to lipid clinic

01-Aug-2011 Dr Julie-Rose McCanny (JRMCCANNY_18980) Drs Stephen & Julia DunnMain Surgery

History History Spots on trunk arms and legs past 2 days.
Itchy. ***** ?bed bugs.
Worried in case might be chicken pox.
2. Fungal skin infection in between toes improved with spray from chemist but still small bit in between toes R foot which is persisting.
 Examination Examination Multiple red spots over chest back and arms. None on face.
Not vesicles. No blistering. Looks like bites.
 Comment Comment IMP-looks like bites. Wash bedding etc.
Antihistamine and observe. For rv again if change or not settling.
Daktacort for foot and rv prn.

21-July-2011 Mrs Fiona Connolly (FCONNOLLY_18980) Drs Stephen & Julia DunnMain Surgery

Comment Comment fasting chol and glucose. pt reducing alcohol and sugary foods

30-Jun-2011 Dr Julie-Rose McCanny (JRMCCANNY_18980) Drs Stephen & Julia DunnMain Surgery

History History Tel appt. No ans. Message left.

30-Jun-2011 Dr Julie-Rose McCanny (JRMCCANNY_18980) Telephone Consultation

History History Hayfever bad. Using cetirizine, and loratadine.

20-Jun-2011 Mrs Fiona Connolly (FCONNOLLY_18980) Drs Stephen & Julia DunnMain Surgery

Comment Comment pt phoned to discuss chol. Tg very high. +ve fh of Dm no osmotic symptoms.. Denies Fh of IHD. pt not keen to restart statin- discussed. wants to try reducing alcohol and eat more melon and tomato juice (read somewhere) appt given for fasting glucose and chol in 4/52

13-Jun-2011 Dr Stephen H. Dunn (SDUNN_18980) Drs Stephen & Julia DunnMain Surgery

Problem Problem Bloods (fasting) for lipids. Had stopped statin. Encouraged to restart. Refer lipid clinic. SD

02-Jun-2011 Mrs Charlotte Sweeney (CHAGGERTY_18980) Drs Stephen & Julia DunnMain Surgery

Comment Comment pt has spoken to nhs 24 re spots on back advised to see a gp no appts left so given emergency as felt he needed to be seen as his partner is pregnant 11.50

02-Jun-2011 Dr Claire McGonagle (CMCG) Drs Stephen & Julia DunnMain Surgery

History History Rash on back - noticed last night. ***** - not itchy and has been well lately.

Examination Examination OE Round small lesions over 10cm area on upper back. ?Fungal. Not chickenpox.

Comment Comment Try trimovate and review if not settling

History O/E - BP reading Stopped simvastatin due to worried re memory loss that read in a paper. Chol 8.9 - repeated today fasted,

Examination Systolic blood pressure 120 mm Hg

Examination Diastolic blood pressure 82 mm Hg

Family History Family History T2 dm fh

Social Cigarette smoker 20 Cigarettes/day

Comment Comment Advised re diet as high fat and fried. Restart simva after discussion. D/c smoking cessation - will self refer smoking cessation KL

20-May-2011 Mrs Charlotte Sweeney (CHAGGERTY_18980) Drs Stephen & Julia DunnMain Surgery

Comment Comment please call pt asking for a px for impetigo as no appts left thank you

20-May-2011 Dr Stephen H. Dunn (SDUNN_18980) Drs Stephen & Julia DunnMain Surgery

Problem Telephone encounter Impetigo per chemist. Given cream but rash spread. Rx flucloxacillin and rv prn. SD

18-Feb-2011 Dr Julia A. Dunn (JDUNN_18980) Drs Stephen & Julia Dunn

History History Poor compliance with statin, invite in for lipids and rv appt to discuss priority=2

17-Feb-2011 Miss Anne Darroch (ADARROCH_18980) Drs Stephen & Julia DunnData Entry

History Rep.presc. monitoring NOS 'MM LES' priority=2

History Equivalent quantities for all medication checked priority=2

03-Dec-2010 Miss Lesley Goodwin (LGOODWIN_18980) Drs Stephen & Julia DunnData Entry

24-Nov-2010 History Ex smoker Disease: SPICE Smoking, priority=2
History Smoking cessation advice Disease: SPICE Smoking, priority=2

10-Aug-2010 Miss Anne Darroch (ADARROCH_18980) Drs Stephen & Julia DunnData Entry

11-July-2010 Problem Contusion of face, scalp and neck NOS Contusion-face-front

20-July-2010 Mr Locum (locum_18980) Drs Stephen & Julia Dunn

History **History** Asking for rv of head - feels a lump on left side forehead is a bit numb - worried its a blood clot. Note assault and A&E have documented haematoma in this site. O.e, small swelling left side forehead, consistent w resolving haematoma, otherwise well. Reassured. LP priority=2

16-July-2010 Dr Dr S Pow (spow_18980) Drs Stephen & Julia Dunn

History **History** assaulted last week attended A&E soft tissue injury left chest wall. been at work doing manual labour. painful when pushing and lifting. tender to touch, sore to move. some pain when takes deep breath but no SOB, sore to cough. no green spit.

o/e - looks well hr 78 reg hs pure chest clear perc res exp equal.

plan - diclofenac/co-codamol 30/500 with advice. rest. r/v any sob/increase in pain. priority=2

13-Apr-2010 Mr Locum (locum_18980) Drs Stephen & Julia Dunn

History **History** New job cutting grass and hayfever is bad. Asking about injection. Advised not currently recommended and to try anti-histamines, nasal spray and eyedrops CA priority=2

History Medication review done priority=2

History Medication review

31-Mar-2010 Ms Christine M. Sinclair (CDAWSON_18980) Drs Stephen & Julia Dunn Data Entry

History White Scottish Disease: Ethnicity, priority=2

23-Mar-2010 Mr Locum (locum_18980) Drs Stephen & Julia Dunn

History **History** Here re blood results. Advised LFTs normal. Had been expecting cholesterol to have been checked but advised NICE does not recommend this. Note previous high triglycerides and ***** died from pancreatitis. Drinks heavily. 11 pints last Fri night and about 10 units + last night (Mon). Drinks every day. New job starting 7/4/10. Advised needs to cut alcohol right back and take statin regularly. Suggest review in 4 weeks ? should attend lipid clinic but no point unless cuts alcohol CA priority=2

17-Mar-2010 Miss Anne Darroch (ADARROCH_18980) Drs Stephen & Julia Dunn Data Entry

15-Mar-2010 History Urea and electrolytes Disease: SPICE Lab Results, priority=2

15-Mar-2010 History Liver function test Disease: SPICE Lab Results, priority=2

15-Mar-2010 History Creatinine date
 Value text: 15 Mar 2010 00:00

15-Mar-2010 History Na+ 139

15-Mar-2010 History K+ 3.9

15-Mar-2010 History Urea 5.4

15-Mar-2010 History Creat 83

15-Mar-2010 History eGFR >60

15-Mar-2010 History eGFR date
 Value text: 15 Mar 2010 00:00

15-Mar-2010 History LFT date
 Value text: 15 Mar 2010 00:00

15-Mar-2010 History Albumin 42

15-Mar-2010 History Bilirubin 9

15-Mar-2010 History ALT 29

15-Mar-2010 History AST 21

15-Mar-2010 History Alk Phos 82

15-Mar-2010 Dr ST1 (kleckie_18980) Drs Stephen & Julia Dunn

History **History** In for LFT check - for some reason wanted Dr to do. Admits not always compliant with statins. Advised re very good evidence for reduction of CV risk. JM priority=2

11-Mar-2010 Dr ST3 (KirstyMill18980) Drs Stephen & Julia Dunn

History **History** URTI for one week. Sore throat - cough worst in morning productive of mucus only in morning. Some relief with lemsip. OE: Apyrexial, pulse 68bpm reg, chest clear, throat erythematous but no tonsillitis. Imp: URTI. Advised paracetamol and fluids. priority=2

08-Oct-2009 Dr Stephen H. Dunn (SDUNN_18980) Drs Stephen & Julia Dunn

History **History** Acute neck spasm left post neck after bending over sink.

OE Tender left post Cx muscles, nil else of note.

Rx diazepam short term, diclofenac; warnings re SE. RV prn. priority=2

30-Jun-2009 Dr Stephen H. Dunn (SDUNN_18980) Drs Stephen & Julia Dunn

History History Hayfever. Rx cetirizine. Beconase trial prn.
priority=2

19-Jun-2009 Dr Stephen H. Dunn (SDUNN_18980) Drs Stephen & Julia Dunn

History History SCI Electronic Referral priority=2
History Referral for further care Referred To: SCI Hospital, NHS. Referral Type: Out Patient. Speciality Type:
Trauma and Orthopaedic Surgery. Referral Nature: Not Specified. , Referral Reason: Actual Hospital:
Vale of Leven General Hospital nerve compression, urgency=low. Referral Type: Unknown (0)

18-Jun-2009 Dr Stephen H. Dunn (SDUNN_18980) Drs Stephen & Julia Dunn

History History Concerned as ankles swollen: just off overnight
flight from abroad (Turkey).

Mosquito
bites purplish.

OE Mild bilateral oedema.
No calf tenderness/redness/warmth. IMP Statis oedema.
Advice and rv if any changes.

Trimovate for bites (infected
looking).

Bilateral carpal tunnel
symptoms. Ortho referral. priority=2
History Medication review

08-Apr-2009 Dr ST3 (KirstyMill18980) Drs Stephen & Julia Dunn

History History in for discussion of blood results. has been to
joint hospital and seen about alcohol, appt for next wed. to
start statin again as LFTs ok. for Rv in 6-8 wks for rpt
bloods. struggling to sleep. no job at present and is going
to bed late and getting up late. sleeps ok thru night. mood
ok but concerned as no job. no thoughts of self harm.
discussed ways of improving sleep pattern and getting more
exercise. will try. 7 zopiclone given for short term - no
more without RV> KM priority=2

31-Mar-2009 Practice Pharmacist (Practice P18980) Drs Stephen & Julia Dunn

History Medication review

27-Mar-2009 Miss Anne Darroch (ADARROCH_18980) Drs Stephen & Julia DunnData Entry

24-Mar-2009	History	Total cholesterol measurement Disease: SPICE Lab	
		Results, priority=2	
24-Mar-2009	History	HDL	1
24-Mar-2009	History	Tot Chol date
 Value text: 24 Mar 2009 00:00	
24-Mar-2009	History	Tot Chol	8.9
24-Mar-2009	History	HDL	1
24-Mar-2009	History	HDL:Chol ratio	8.9
24-Mar-2009	History	Triglyceride	11.6

26-Mar-2009 Miss Anne Darroch (ADARROCH_18980) Drs Stephen & Julia DunnData Entry

24-Mar-2009	History	Urea and electrolytes Disease: SPICE Lab Results,	
		priority=2	
24-Mar-2009	History	Liver function test Disease: SPICE Lab Results,	
		priority=2	
24-Mar-2009	History	Full blood count - FBC Disease: SPICE Lab Results,	
		priority=2	
24-Mar-2009	History	Glucose	5
24-Mar-2009	History	Glucose	5
24-Mar-2009	History	Creatinine date
 Value text: 24 Mar 2009 00:00	
24-Mar-2009	History	Na+	139
24-Mar-2009	History	K+	4.2
24-Mar-2009	History	Urea	6.5
24-Mar-2009	History	Creat	110
24-Mar-2009	History	eGFR >60	
24-Mar-2009	History	eGFR date
 Value text: 24 Mar 2009 00:00	
24-Mar-2009	History	LFT date
 Value text: 24 Mar 2009 00:00	
24-Mar-2009	History	Albumin	44
24-Mar-2009	History	Bilirubin	13
24-Mar-2009	History	ALT	27
24-Mar-2009	History	Alk Phos	81
24-Mar-2009	History	Gamma GT	34
24-Mar-2009	History	Glucose	5
24-Mar-2009	History	Glucose date
 Value text: 24 Mar 2009 00:00	
24-Mar-2009	History	Calcium	2.49

24-Mar-2009 Dr ST3 (KirstyMill18980) Drs Stephen & Julia Dunn

History **History** 1. has had lots of stress with ***** re. access to their child. has been off work and needs a line till monday. med3 given stress related illness.

2. concerned re. alcohol intake - has increased recently. now drinking 1-2 bottles of wine per day. ***** has raised concerns with him. not affecting work. sometimes drinks at lunchtime but not in the morning. no withdraw symptoms. no seizures. wishing referral to joint hospital. done

3. not been taking statin due to alcohol. rpt bloods & RV. KM priority=2

16-Jan-2009 reception1 (reception118980) Drs Stephen & Julia DunnData Entry

History White Scottish Disease: Ethnicity, priority=2

16-Jan-2009 Dr ST3 (KirstyMill18980) Drs Stephen & Julia Dunn

History **History** In to discuss cholesterol results. Chol 8.6, ratio 7.8, increased despite lifestyle changes. Had been on statin before-?stopped. PLAN-re-start and re-check lipids 3/12. Doing better! with alcohol intake. Discussed and plans to continue to reduce. Has support from ***** . priority=2

09-Jan-2009 Ms Christine M. Sinclair (CDAWSON_18980) Drs Stephen & Julia DunnData Entry

History Urea and electrolytes Disease: SPICE Lab Results, priority=2
 History Creatinine date
 Value text: 07 Jan 2009 00:00
 History Na+ 140
 History K+ 3.9
 History Urea 5.2
 History Creat 106
 History eGFR date
 Value text: 07 Jan 2009 00:00
 History LFT date
 Value text: 07 Jan 2009 00:00
 History Albumin 22
 History Bilirubin 9
 History ALT 22
 History Alk Phos 64
 History Gamma GT 35
 History Tot Chol date
 Value text: 07 Jan 2009 00:00
 History Tot Chol 8.6
 History HDL 1.1
 History HDL:Chol ratio 7.8
 History Triglyceride 9.5
 History Calcium 2.43

07-Jan-2009 Dr Julia A. Dunn (JDUNN_18980) Drs Stephen & Julia Dunn

History **History** In for bloods and given advice re cholesterol and ways to reduce.

Athletes foot. Rx given priority=2

10-Dec-2008 Miss Anne Darroch (ADARROCH_18980) Drs Stephen & Julia DunnData Entry

03-Dec-2008 History Full blood count - FBC Disease: SPICE Lab Results, priority=2

05-Dec-2008 Miss Anne Darroch (ADARROCH_18980) Drs Stephen & Julia DunnData Entry

03-Dec-2008 History Urea and electrolytes Disease: SPICE Lab Results, priority=2
 03-Dec-2008 History Liver function test Disease: SPICE Lab Results, priority=2
 03-Dec-2008 History Total cholesterol measurement Disease: SPICE Lab Results, priority=2
 03-Dec-2008 History Creatinine date
 Value text: 03 Dec 2008 00:00
 03-Dec-2008 History Na+ 143
 03-Dec-2008 History K+ 3.7
 03-Dec-2008 History Urea 5.2
 03-Dec-2008 History Creat 109
 03-Dec-2008 History eGFR >60
 03-Dec-2008 History eGFR date
 Value text: 03 Dec 2008 00:00
 03-Dec-2008 History LFT date
 Value text: 03 Dec 2008 00:00
 03-Dec-2008 History Albumin 43
 03-Dec-2008 History Bilirubin 10
 03-Dec-2008 History ALT 25
 03-Dec-2008 History Alk Phos 74
 03-Dec-2008 History Gamma GT 37
 03-Dec-2008 History Tot Chol date
 Value text: 03 Dec 2008 00:00
 03-Dec-2008 History Tot Chol 7.1
 03-Dec-2008 History HDL 1.1
 03-Dec-2008 History HDL:Chol ratio 6.5
 03-Dec-2008 History Triglyceride 7.6
 03-Dec-2008 History Calcium 2.49

03-Dec-2008 Dr ST3 (KirstyMill18980) Drs Stephen & Julia Dunn

History History Feeling much better today. No further vomiting. Decided needs to stop alcohol. Wishes to do this himself with the help of his *****. Also cholesterol previously high, and had been on a statin. ?why stopped. Repeat bloods taken for u+E's LFT, lipids, and fbc. Diet discussed, and review with results re: ?re-starting statin. priority=2

02-Dec-2008 Dr ST3 (KirstyMill18980) Drs Stephen & Julia Dunn

History History Drank 3/4 bottle of whiskey last night. Admits to alcohol excess. Vomited this morning after eating and noticed blood throughout. Red coloured, not coffee-ground. No melaena, no abdo pain. No further episodes. Has had similar episodes in past, but continues to drink daily, usually few cans per day. O/E P80, BP110/80, abdo-soft and non-tender, bs normal. IMP-gastritis secondary to alcohol. PLAN-PPI for 2/52 then rv. Advice re:stopping alcohol, ?AA, will have a think. N.B due for rpt chol. priority=2

03-Nov-2008 Dr Stephen H. Dunn (SDUNN_18980) Drs Stephen & Julia Dunn

History History 24h history of sore throat, swollen glands, fever.

OE Purulent tonsillitis

Rx pen V, cocodamol 30/500 and advice. RV prn. priority=2

22-July-2008 Dr Claire McGonagle (CMCG) Drs Stephen & Julia Dunn

History History Dr Snowden

1. RTA, hit from behind 10/7/8. Had neck pain but settling now. Going to claim for whiplash injury.

2. Lipid discussion. Awaiting dietician, already improving diet. Start simvastatin & will stop smoking. re-check in 3/12. priority=2

History Total cholesterol measurement 8.00:mmol/l priority=2

History Serum HDL cholesterol level 1.20:mmol/l priority=2

History Serum triglycerides 463.00 7.8:mmol/l priority=2

History Serum HDL:non-HDL cholesterol ratio 115900 6.7: priority=2

History Risk factors present at heart disease screen 142100 1.52:% priority=2

History Tot Chol 8 mmol/l

History Tot Chol date

 Value text: 22 Jul 2008 00:00

History HDL 1.2 mmol/l

History Triglyceride 7.8 mmol/l

History Triglyceride date

 Value text: 22 Jul 2008 00:00

History Serum HDL:non-HDL cholesterol ratio 6.7 Unknown

15-July-2008 Dr Stephen H. Dunn (SDUNN_18980) Drs Stephen & Julia Dunn

History History In re lipids. Advice re diet etc. Await dietician letter. Rep Lipids 3/12 and consider statin. priority=2

09-July-2008 Ms Christine M. Sinclair (CDAWSON_18980) Drs Stephen & Julia DunnData Entry

History Tot Chol date

 Value text: 08 Jul 2008 00:00

History Tot Chol 8

History HDL 1.2

History HDL:Chol ratio 6.7

History Triglyceride 7.8

08-July-2008 History Tot Chol 8

09-July-2008 Ms Christine M. Sinclair (CDAWSON_18980) Drs Stephen & Julia DunnData Entry

08-July-2008 History Creatinine date

 Value text: 08 Jul 2008 00:00

08-July-2008 History Na+ 141

08-July-2008 History K+ 3.2

08-July-2008 History Urea 5.6

08-July-2008 History Creat 102

08-July-2008 History eGFR date

 Value text: 08 Jul 2008 00:00

08-July-2008 History LFT date

 Value text: 08 Jul 2008 00:00

08-July-2008 History Albumin 41

08-July-2008 History Bilirubin 17

08-July-2008 History ALT 27

08-July-2008 History Alk Phos 68

08-July-2008 History Gamma GT 35

08-July-2008 History Calcium 2.45

08-July-2008 Phlebotomist (Phlebotomi18980) Drs Stephen & Julia Dunn

History History u&e,lft,fasting glucose,lipids priority=2

01-July-2008 Dr Claire McGonagle (CMCG) Drs Stephen & Julia Dunn

History History high chol - also triglyc - need fasting gluc then diet ref - no sig hx ihd AS priority=2

02-Jun-2008 Miss Anne Darroch (ADARROCH_18980) Drs Stephen & Julia DunnData Entry

30-May-2008 History Total cholesterol measurement Disease: SPICE Lab Results, priority=2
 30-May-2008 History HDL:Chol ratio 9
 30-May-2008 History Tot Chol date
 Value text: 30 May 2008 00:00
 30-May-2008 History Tot Chol 9.9
 30-May-2008 History HDL 1.1
 30-May-2008 History HDL:Chol ratio 9
 30-May-2008 History Triglyceride 9.5

30-May-2008 Phlebotomist (Phlebotomi18980) Drs Stephen & Julia Dunn

History History fasting chol priority=2

16-May-2008 Miss Anne Darroch (ADARROCH_18980) Drs Stephen & Julia DunnData Entry

12-May-2008 Problem Acute gastritis

26-Mar-2008 reception2 (reception218980) Drs Stephen & Julia DunnData Entry

History Thyroid function test Disease: SPICE Lab Results, priority=2
 20-Mar-2008 History TSH date
 Value text: 20 Mar 2008 00:00
 20-Mar-2008 History TSH 1.4

25-Mar-2008 reception2 (reception218980) Drs Stephen & Julia DunnData Entry

20-Mar-2008 History Urea and electrolytes Disease: SPICE Lab Results, priority=2
 20-Mar-2008 History Liver function test Disease: SPICE Lab Results, priority=2
 20-Mar-2008 History Creatinine date
 Value text: 20 Mar 2008 00:00
 20-Mar-2008 History Na+ 139
 20-Mar-2008 History K+ 4.1
 20-Mar-2008 History Urea 4.7
 20-Mar-2008 History Creat 90
 20-Mar-2008 History eGFR >60
 20-Mar-2008 History eGFR date
 Value text: 20 Mar 2008 00:00
 20-Mar-2008 History LFT date
 Value text: 20 Mar 2008 00:00
 20-Mar-2008 History Albumin 38
 20-Mar-2008 History Bilirubin 13
 20-Mar-2008 History ALT 27
 20-Mar-2008 History Alk Phos 68
 20-Mar-2008 History Gamma GT 47
 20-Mar-2008 History Calcium 2.47

20-Mar-2008 Dr Stephen H. Dunn (SDUNN_18980) Drs Stephen & Julia Dunn

History History See above. ECG: sinus tachy of 100/min. HS pure. Chest clear. No goitre. Admits XS ETOH. Advice re this and smoking. Check bloods and rv thereafter. priority=2
 History Current smoker Disease: SPICE Smoking, priority=2
 History Smoking cessation advice Disease: SPICE Smoking, priority=2
 History Smoke oral advice Yes

19-Mar-2008 Dr Stephen H. Dunn (SDUNN_18980) Drs Stephen & Julia Dunn

History History Palpitations - feels worse on awakening. Appt. for ECG and review by myself 20.03.08 priority=2

03-Jan-2008 Dr Dr S Pow (spow_18980) Drs Stephen & Julia Dunn

History History Boxing day had a wee fall and scraped leg, linear wound r shin. tender round wound and slight swell of ankle. no calf swell/pain/erythema or tenderness. no hx dvt. slight erythema around wound. well. for fluclo, if no effect after 48 hours for pen v. any swell or worsening to be seen. priority=2

10-Dec-2007 Dr Julia A. Dunn (JDUNN_18980) Drs Stephen & Julia Dunn

History History Had diarrhoea for a week but has now settled and feels well, no blood or nausea. Eating and drinking normally throughout. Vomited x1 after drinking too much lager after watching boxing! OE abdo soft non tender no lks bs intact. IMP viral and has settled now priority=2

16-Oct-2007 Mr Locum (locum_18980) Drs Stephen & Julia Dunn

History History Dr Loudon. RTA 10/7 ago, pt was reversing and ?hit other car. Was looking right over L shoulder at time. Some mild L sided neck pain persists, making a claim, advised to get documented. Tender mid-trap only, good ROM. Advice re analgesia and exercises priority=2

02-Oct-2007 *****

Free Text *****

10-Aug-2007 Mr Locum (locum_18980) Drs Stephen & Julia Dunn

History History dull ache in chest started today, no palpitations, no FH of hart disease, on and off smoker, no nausea; BP 150/90, P70reg, Cor S1S2, no murmur, chest:clear; chest pain, muscular? Instructions given about red flag symptoms priority=2

12-July-2007 Mr Locum (locum_18980) Drs Stephen & Julia Dunn

History History Dysuria. No other sexual contacts other than current *****. Check MSSU. C/O trimethoprim 200mg bd. priority=2

02-Feb-2007 Dr Stephen H. Dunn (SDUNN_18980) Drs Stephen & Julia Dunn

History History Vomited past 24h. Assoc fresh blood mixed in with food in vomitus. No coffe ground or malaena. No abdo pains. Recent exsmoker. Excessive ETOH during week (friend 30y funeral).

OE Abdo NAD

IMP M-W tear/alcoholic gastritis

Rx zoton 30mg 28d and rv prn. priority=2

History Ex smoker Disease: SPICE Basic Health Values, priority=2

History No FH: Ischaemic heart disease Disease: SPICE Basic Health Values, priority=2

History FH: Diabetes mellitus Disease: SPICE Basic Health Values, priority=2

Problem Alcoholic gastritis

18-Jan-2007 reception1 (reception118980) Drs Stephen & Julia DunnData Entry

08-May-2005 History Computer summary updated priority=2

08-May-2006 UnknownUser (UnknownUse18980) Drs Stephen & Julia DunnData Entry

29-Jan-2002 Problem Refer to psychologist

22-Aug-2001 History 4th hepatitis B vaccination *Vaccinations.clm - No Action Required
Out with GP care*

10-Apr-2001 History 3rd hepatitis B vaccination *Vaccinations.clm - No Action Required
Out with GP care*

13-Mar-2001 History 2nd hepatitis B vaccination *Vaccinations.clm - No Action Required
Out with GP care*

15-Jan-2001 History 1st hepatitis B vaccination *Vaccinations.clm - No Action Required
Out with GP care*

13-Oct-2000 History Booster polio vaccination *z Polio Immunis.\$\$.clm - Repeat after an Interval
Out with GP care*

13-Oct-2000 History Hepatitis A vaccination,unspec *Vaccinations.clm - No Action Required
Out with GP care*

13-Oct-2000 History Single dose typhoid vaccinatr *Vaccinations.clm - No Action Required
Out with GP care*

16-Jun-1999 Problem Glandular fever

08-May-2006 UnknownUser (UnknownUse18980) Drs Stephen & Julia DunnData Entry

Problem Summarised by Dr J McGlinchey

04-Feb-2003 Problem [D]Alcohol blood level excessive

05-May-2006 UnknownUser (UnknownUse18980) Drs Stephen & Julia DunnData Entry

History History Automatically generated by transaction priority=2

Problem Patient MRE received from HB priority=1

16-Mar-2006 UnknownUser (UnknownUse18980) Drs Stephen & Julia DunnData Entry

History History Automatically generated by transaction priority=2

Problem Pat. GP7B/GP8B card from HB priority=1

15-Mar-2006 UnknownUser (UnknownUse18980) Drs Stephen & Julia DunnData Entry

History History Automatically generated by transaction priority=2

Problem Patient reg. form sent to HB priority=1

14-Mar-2006 Dr Stephen H. Dunn (SDUNN_18980) Drs Stephen & Julia Dunn

History Current non-smoker z Smoker\$\$ Status.clm - No Action Required

History O/E - height 190

History O/E - weight 100

History Systolic blood pressure 120

History Diastolic blood pressure 80

Medications (inc. issues)

Acute

Repeat

21-May-2026 Salbutamol Cfc-free inhaler 100 micrograms/puff
1 INHALER - ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY

21-May-2026 Supralip Tablets 160 mg
56 tablet - ONE DAILY IN THE MORNING

21-May-2026 Atorvastatin Tablets 20 mg
56 TABLET - ONE TO BE TAKEN EACH DAY

21-May-2026 Lansoprazole Capsules (Gastro-Resistant) 30 mg
56 CAPSULE - ONE TO BE TAKEN EACH DAY FOR HIATUS HERNIA

21-May-2026 Ramipril Capsules 1.25 mg
56 capsule - ONE CAP DAILY

24-Feb-2026 Ramipril Capsules 1.25 mg
56 capsule - ONE CAP DAILY

24-Feb-2026 Lansoprazole Capsules (Gastro-Resistant) 30 mg
56 CAPSULE - ONE TO BE TAKEN EACH DAY FOR HIATUS HERNIA

24-Feb-2026 Supralip Tablets 160 mg
56 tablet - ONE DAILY IN THE MORNING

24-Feb-2026 Atorvastatin Tablets 20 mg
56 TABLET - ONE TO BE TAKEN EACH DAY

16-Dec-2025 Supralip Tablets 160 mg
56 tablet - ONE DAILY IN THE MORNING

16-Dec-2025 Lansoprazole Capsules (Gastro-Resistant) 30 mg
56 CAPSULE - ONE TO BE TAKEN EACH DAY FOR HIATUS HERNIA

16-Dec-2025 Ramipril Capsules 1.25 mg
56 capsule - ONE CAP DAILY

16-Dec-2025 Atorvastatin Tablets 20 mg
56 TABLET - ONE TO BE TAKEN EACH DAY

29-Oct-2025 Lansoprazole Capsules (Gastro-Resistant) 30 mg
56 CAPSULE - ONE TO BE TAKEN EACH DAY FOR HIATUS HERNIA

29-Oct-2025 Ramipril Capsules 1.25 mg
56 capsule - ONE CAP DAILY

29-Oct-2025 Atorvastatin Tablets 20 mg
56 TABLET - ONE TO BE TAKEN EACH DAY

29-Oct-2025 Supralip Tablets 160 mg
56 tablet - ONE DAILY IN THE MORNING

03-Sept-2025 Ramipril Capsules 1.25 mg
56 capsule - ONE CAP DAILY

03-Sept-2025 Supralip Tablets 160 mg
56 tablet - ONE DAILY IN THE MORNING

03-Sept-2025 Lansoprazole Capsules (Gastro-Resistant) 30 mg
56 CAPSULE - ONE TO BE TAKEN EACH DAY FOR HIATUS HERNIA

03-Sept-2025 Atorvastatin Tablets 20 mg
56 TABLET - ONE TO BE TAKEN EACH DAY

09-July-2025 Lansoprazole Capsules (Gastro-Resistant) 30 mg
56 CAPSULE - ONE TO BE TAKEN EACH DAY FOR HIATUS HERNIA

09-July-2025 Lansoprazole Capsules (Gastro-Resistant) 30 mg
56 CAPSULE - ONE TO BE TAKEN EACH DAY FOR HIATUS HERNIA

09-July-2025 Ramipril Capsules 1.25 mg
56 capsule - ONE CAP DAILY

09-July-2025 Atorvastatin Tablets 20 mg
56 TABLET - ONE TO BE TAKEN EACH DAY

09-July-2025 Supralip Tablets 160 mg
56 tablet - ONE DAILY IN THE MORNING

12-May-2025 Ramipril Capsules 1.25 mg
56 capsule - ONE CAP DAILY

12-May-2025 Supralip Tablets 160 mg
56 tablet - ONE DAILY IN THE MORNING

12-May-2025 Atorvastatin Tablets 20 mg
56 TABLET - ONE TO BE TAKEN EACH DAY

25-Apr-2025 Ramipril Capsules 1.25 mg
56 capsule - ONE CAP DAILY

25-Apr-2025 Ramipril Capsules 1.25 mg
56 capsule - ONE CAP DAILY

04-Mar-2025 Supralip Tablets 160 mg
56 tablet - ONE DAILY IN THE MORNING

04-Mar-2025 Atorvastatin Tablets 20 mg
56 TABLET - ONE TO BE TAKEN EACH DAY

27-Sept-2024 Atorvastatin Tablets 20 mg
56 TABLET - ONE TO BE TAKEN EACH DAY

27-Sept-2024 Supralip Tablets 160 mg
56 tablet - ONE DAILY IN THE MORNING

13-Nov-2023 Atorvastatin Tablets 20 mg
56 TABLET - ONE TO BE TAKEN EACH DAY

13-Nov-2023 Supralip Tablets 160 mg
56 tablet - ONE DAILY IN THE MORNING

13-Nov-2023 Salbutamol Cfc-free inhaler 100 micrograms/puff
1 INHALER - ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY

11-Aug-2023 Supralip Tablets 160 mg
56 tablet - ONE DAILY IN THE MORNING

11-Aug-2023 Salbutamol Cfc-free inhaler 100 micrograms/puff
1 INHALER - ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY

11-Aug-2023 Atorvastatin Tablets 20 mg
56 TABLET - ONE TO BE TAKEN EACH DAY

22-May-2023 Salbutamol Cfc-free inhaler 100 micrograms/puff
1 INHALER - ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY

22-May-2023 Supralip Tablets 160 mg
56 tablet - ONE DAILY IN THE MORNING

22-May-2023 Salbutamol Cfc-free inhaler 100 micrograms/puff
1 INHALER - ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY

22-May-2023 Atorvastatin Tablets 20 mg
56 TABLET - ONE TO BE TAKEN EACH DAY

12-Jan-2023 Atorvastatin Tablets 20 mg
56 TABLET - ONE TO BE TAKEN EACH DAY

12-Jan-2023 Supralip Tablets 160 mg
56 tablet - ONE DAILY IN THE MORNING

30-Sept-2022 Supralip Tablets 160 mg
56 tablet - ONE DAILY IN THE MORNING

30-Sept-2022 Atorvastatin Tablets 20 mg
56 TABLET - ONE TO BE TAKEN EACH DAY

02-Jun-2022 Supralip Tablets 160 mg
56 tablet - ONE DAILY IN THE MORNING

02-Jun-2022 Atorvastatin Tablets 20 mg
56 TABLET - ONE TO BE TAKEN EACH DAY

29-Mar-2022 Atorvastatin Tablets 20 mg
56 TABLET - ONE TO BE TAKEN EACH DAY

29-Mar-2022 Supralip Tablets 160 mg
56 tablet - ONE DAILY IN THE MORNING

24-Mar-2022 Supralip Tablets 160 mg
56 tablet - ONE DAILY IN THE MORNING

24-Mar-2022 Supralip Tablets 160 mg
56 tablet - ONE DAILY IN THE MORNING

24-Mar-2022 Atorvastatin Tablets 20 mg
56 TABLET - ONE TO BE TAKEN EACH DAY

24-Mar-2022 Atorvastatin Tablets 20 mg
56 TABLET - ONE TO BE TAKEN EACH DAY

Past

19-May-2026 Scheriproct Suppositories Acute Medication (Past)
12 SUPPOSITORY - 1 ONCE DAILY

19-May-2026 Scheriproct Suppositories Acute Medication (Past)
12 SUPPOSITORY - 1 ONCE DAILY

26-Jan-2026 Aciclovir Tablets 800 mg Acute Medication (Past)
35 TABLET - ONE TO BE TAKEN FIVE TIMES A DAY FOR SEVEN DAYS

26-Jan-2026 Aciclovir Tablets 800 mg Acute Medication (Past)
35 TABLET - ONE TO BE TAKEN FIVE TIMES A DAY FOR SEVEN DAYS

20-Jan-2026 Pregabalin Capsules 75 mg Acute Medication (Past)
14 capsule - ONE CAP TWICE DAILY

20-Jan-2026 Pregabalin Capsules 75 mg Acute Medication (Past)
14 capsule - ONE CAP TWICE DAILY

15-May-2025 Anusol Suppositories Acute Medication (Past)
24 SUPPOSITORY - ONE TO BE INSERTED TWICE A DAY

15-May-2025 Anusol Suppositories Acute Medication (Past)
24 SUPPOSITORY - ONE TO BE INSERTED TWICE A DAY

08-Apr-2025 Lansoprazole Capsules (Gastro-Resistant) 30 mg Acute Medication (Past)
56 CAPSULE - ONE TO BE TAKEN EACH DAY

05-Mar-2025 Lansoprazole Capsules (Gastro-Resistant) 30 mg Acute Medication (Past)
56 CAPSULE - ONE TO BE TAKEN EACH DAY

05-Mar-2025 Lansoprazole Capsules (Gastro-Resistant) 30 mg Acute Medication (Past)
56 CAPSULE - ONE TO BE TAKEN EACH DAY

27-Sept-2024 Folic Acid Tablets 5 mg Acute Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

27-Sept-2024 Cyanocobalamin Tablets 50 micrograms Acute Medication (Past)
56 tablet - ONE DAILY

27-Sept-2024 Folic Acid Tablets 5 mg Acute Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

27-Sept-2024 Cyanocobalamin Tablets 50 micrograms Acute Medication (Past)
56 tablet - ONE DAILY

23-July-2024 Colchicine Tablets 500 micrograms Acute Medication (Past)
12 TABLET - ONE TO BE TAKEN TWO TO FOUR TIMES A DAY UNTIL SYMPTOMS RELIEVED (MAX 12 PER COURSE - NOT TO BE REPEATED WITHIN 3 DAYS)

23-July-2024 Colchicine Tablets 500 micrograms Acute Medication (Past)
12 TABLET - ONE TO BE TAKEN TWO TO FOUR TIMES A DAY UNTIL SYMPTOMS RELIEVED (MAX 12 PER COURSE - NOT TO BE REPEATED WITHIN 3 DAYS)

23-July-2024 Lansoprazole Capsules (Gastro-Resistant) 30 mg Acute Medication (Past)
56 CAPSULE - ONE TO BE TAKEN EACH DAY

23-July-2024 Lansoprazole Capsules (Gastro-Resistant) 30 mg Acute Medication (Past)
56 CAPSULE - ONE TO BE TAKEN EACH DAY

23-Aug-2023 Fluconazole Capsules 50 mg Acute Medication (Past)
14 capsule - ONE CAP DAILY

23-Aug-2023 Fluconazole Capsules 50 mg Acute Medication (Past)
14 capsule - ONE CAP DAILY

22-May-2023 Prednisolone Tablets 5 mg Acute Medication (Past)
40 TABLET - EIGHT TO BE TAKEN IN THE MORNING

22-May-2023 Prednisolone Tablets 5 mg Acute Medication (Past)
40 TABLET - EIGHT TO BE TAKEN IN THE MORNING

22-May-2023 Amoxicillin Capsules 500 mg Acute Medication (Past)
15 CAPSULE - ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS

22-May-2023 Amoxicillin Capsules 500 mg Acute Medication (Past)
15 CAPSULE - ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS

15-Mar-2022 Supralip Tablets 160 mg Repeat Medication (Past)
392 tablet - ONE DAILY IN MORNING

15-Mar-2022 Atorvastatin Tablets 20 mg Repeat Medication (Past)
392 tablet - ONE TO BE TAKEN EACH DAY

26-Apr-2021 Omeprazole Capsules (Gastro-Resistant) 20 mg Acute Medication (Past)
14 capsule - ONE TO BE TAKEN EACH DAY

26-Apr-2021 Ibuprofen Tablets 400 mg Acute Medication (Past)
42 TABLET - ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD

26-Apr-2021 Co-Codamol 30/500 Tablets Acute Medication (Past)
50 TABLET - TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)

26-Apr-2021 Omeprazole Capsules (Gastro-Resistant) 20 mg Acute Medication (Past)
14 capsule - ONE TO BE TAKEN EACH DAY

26-Apr-2021 Co-Codamol 30/500 Tablets Acute Medication (Past)
50 TABLET - TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)

26-Apr-2021 Ibuprofen Tablets 400 mg Acute Medication (Past)
42 TABLET - ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD

26-Feb-2021 Supralip Tablets 160 mg Repeat Medication (Past)
392 tablet - ONE DAILY IN MORNING

26-Feb-2021 Atorvastatin Tablets 20 mg Repeat Medication (Past)
392 tablet - ONE TO BE TAKEN EACH DAY

26-Jan-2021 Scheriproct Suppositories Acute Medication (Past)
12 SUPPOSITORY - ONE TO BE INSERTED MORNING AND NIGHT FOR UP TO 7 DAYS

26-Jan-2021 Scheriproct Suppositories Acute Medication (Past)
12 SUPPOSITORY - ONE TO BE INSERTED MORNING AND NIGHT FOR UP TO 7 DAYS

23-Sept-2020 Atorvastatin Tablets 20 mg Repeat Medication (Past)
392 tablet - ONE TO BE TAKEN EACH DAY

23-Sept-2020 Supralip Tablets 160 mg Repeat Medication (Past)
392 tablet - ONE DAILY IN MORNING

02-Jun-2020 Atorvastatin Tablets 20 mg Repeat Medication (Past)
392 tablet - ONE TO BE TAKEN EACH DAY

02-Jun-2020 Supralip Tablets 160 mg Repeat Medication (Past)
392 tablet - ONE DAILY IN MORNING

02-Jun-2020 Atorvastatin Tablets 20 mg Repeat Medication (Past)
392 tablet - ONE TO BE TAKEN EACH DAY

02-Jun-2020 Atorvastatin Tablets 20 mg Repeat Medication (Past)
392 tablet - ONE TO BE TAKEN EACH DAY

02-Jun-2020 Supralip Tablets 160 mg Repeat Medication (Past)
392 tablet - ONE DAILY IN MORNING

02-Jun-2020 Supralip Tablets 160 mg Repeat Medication (Past)
392 tablet - ONE DAILY IN MORNING

02-Jun-2020 Atorvastatin Tablets 20 mg Repeat Medication (Past)
392 tablet - ONE TO BE TAKEN EACH DAY

02-Jun-2020 Supralip Tablets 160 mg Repeat Medication (Past)
392 tablet - ONE DAILY IN MORNING

30-Apr-2020 Supralip Tablets 160 mg Repeat Medication (Past)
56 TABLET - ONE DAILY IN MORNING

15-Nov-2019 Supralip Tablets 160 mg Repeat Medication (Past)
56 TABLET - ONE DAILY IN MORNING

15-Nov-2019 Atorvastatin Tablets 20 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

06-Sept-2019 Supralip Tablets 160 mg Repeat Medication (Past)
56 TABLET - ONE DAILY IN MORNING

06-Sept-2019 Atorvastatin Tablets 20 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

25-July-2019 Flucloxacillin Capsules 500 mg Acute Medication (Past)
28 capsule - ONE TO BE TAKEN FOUR TIMES A DAY FOR 7 DAYS

25-July-2019 Furosemide Tablets 20 mg Acute Medication (Past)
14 tablet - ONE TO BE TAKEN EACH MORNING

25-July-2019 Flucloxacillin Capsules 500 mg Acute Medication (Past)
28 capsule - ONE TO BE TAKEN FOUR TIMES A DAY FOR 7 DAYS

25-July-2019 Furosemide Tablets 20 mg Acute Medication (Past)
14 tablet - ONE TO BE TAKEN EACH MORNING

02-July-2019 Supralip Tablets 160 mg Repeat Medication (Past)
56 TABLET - ONE DAILY IN MORNING

02-July-2019 Atorvastatin Tablets 20 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

26-Apr-2019 Supralip Tablets 160 mg Repeat Medication (Past)
56 TABLET - ONE DAILY IN MORNING

26-Apr-2019 Atorvastatin Tablets 20 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

05-Feb-2019 Atorvastatin Tablets 20 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

05-Feb-2019 Supralip Tablets 160 mg Repeat Medication (Past)
56 TABLET - ONE DAILY IN MORNING

20-Nov-2018 Supralip Tablets 160 mg Repeat Medication (Past)
56 TABLET - ONE DAILY IN MORNING

20-Nov-2018 Atorvastatin Tablets 20 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

03-Sept-2018 Champix 4 Week Treatment Initiation Pack Tablets Acute Medication (Past)
53 tablet - As directed

03-Sept-2018 Champix 4 Week Treatment Initiation Pack Tablets Acute Medication (Past)
53 tablet - As directed

03-Sept-2018 Varenicline Tablets 1 mg + 500 micrograms Acute Medication (Past)
25 TABLET - TO BE TAKEN AS DIRECTED. DISPENSE WEEKLY

03-Sept-2018 Varenicline Tablets 1 mg + 500 micrograms Acute Medication (Past)
25 TABLET - TO BE TAKEN AS DIRECTED. DISPENSE WEEKLY

29-Aug-2018 Atorvastatin Tablets 20 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

20-July-2018 Supralip Tablets 160 mg Repeat Medication (Past)
56 TABLET - ONE DAILY IN MORNING

14-Jun-2018 Atorvastatin Tablets 20 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

24-Apr-2018 Atorvastatin Tablets 20 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

24-Apr-2018 Supralip Tablets 160 mg Repeat Medication (Past)
28 TABLET - ONE DAILY IN MORNING

24-Apr-2018 Cetirizine Hydrochloride Tablets 10 mg Acute Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

24-Apr-2018 Cetirizine Hydrochloride Tablets 10 mg Acute Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

06-Apr-2018 Atorvastatin Tablets 20 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

07-Mar-2018 Atorvastatin Tablets 10 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

07-Mar-2018 Supralip Tablets 160 mg Repeat Medication (Past)
56 tablet - ONE DAILY IN THE MORNING

20-Feb-2018 Amoxicillin Capsules 500 mg Acute Medication (Past)
15 CAPSULE - ONE TO BE TAKEN THREE TIMES A DAY

20-Feb-2018 Prednisolone Tablets 5 mg Acute Medication (Past)
40 TABLET - EIGHT TO BE TAKEN IN THE MORNING

20-Feb-2018 Amoxicillin Capsules 500 mg Acute Medication (Past)
15 CAPSULE - ONE TO BE TAKEN THREE TIMES A DAY

20-Feb-2018 Prednisolone Tablets 5 mg Acute Medication (Past)
40 TABLET - EIGHT TO BE TAKEN IN THE MORNING

18-Dec-2017 Atorvastatin Tablets 10 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

18-Dec-2017 Supralip Tablets 160 mg Repeat Medication (Past)
56 tablet - ONE DAILY IN THE MORNING

26-Sept-2017 Atorvastatin Tablets 10 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

26-Sept-2017 Supralip Tablets 160 mg Repeat Medication (Past)
56 tablet - ONE DAILY IN THE MORNING

13-July-2017 Supralip Tablets 160 mg Repeat Medication (Past)
56 tablet - ONE DAILY IN THE MORNING

13-July-2017 Atorvastatin Tablets 10 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

19-Apr-2017 Atorvastatin Tablets 10 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

19-Apr-2017 Supralip Tablets 160 mg Repeat Medication (Past)
56 tablet - ONE DAILY IN THE MORNING

16-Jan-2017 Supralip Tablets 160 mg Repeat Medication (Past)
56 tablet - ONE DAILY IN THE MORNING

16-Jan-2017 Atorvastatin Tablets 10 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

02-Nov-2016 Atorvastatin Tablets 10 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

02-Nov-2016 Supralip Tablets 160 mg Repeat Medication (Past)
56 tablet - ONE DAILY IN THE MORNING

19-Aug-2016 Crodamon Cream 10 % Acute Medication (Past)
100 GRAM - APPLY THINLY TWO TO THREE TIMES A DAY

19-Aug-2016 Crodamon Cream 10 % Acute Medication (Past)
100 GRAM - APPLY THINLY TWO TO THREE TIMES A DAY

19-Aug-2016 Supralip Tablets 160 mg Repeat Medication (Past)
56 tablet - ONE DAILY IN THE MORNING

19-Aug-2016 Chlorphenamine Tablets 4 mg Acute Medication (Past)
28 TABLET - ONE TO BE TAKEN EVERY FOUR TO SIX HOURS (MAX 6 TABLETS PER 24 HOURS)

19-Aug-2016 Atorvastatin Tablets 10 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

19-Aug-2016 Chlorphenamine Tablets 4 mg Acute Medication (Past)
28 TABLET - ONE TO BE TAKEN EVERY FOUR TO SIX HOURS (MAX 6 TABLETS PER 24 HOURS)

27-Jun-2016 Bezalip-Mono M/R tablets 400 mg Acute Medication (Past)
28 tablet - 1 Tab Daily

27-Jun-2016 Bezafibrate M/R tablets 400 mg Repeat Medication (Past)
56 tablet - 1 Tab Daily

27-Jun-2016 Atorvastatin Tablets 10 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

27-Jun-2016 Bezalip-Mono M/R tablets 400 mg Acute Medication (Past)
28 tablet - 1 Tab Daily

27-Jun-2016 Cetirizine Hydrochloride Tablets 10 mg Acute Medication (Past)
30 tablet - ONE DAILY

27-Jun-2016 Cetirizine Hydrochloride Tablets 10 mg Acute Medication (Past)
30 tablet - ONE DAILY

27-Jun-2016 Cetirizine Hydrochloride Tablets 10 mg Acute Medication (Past)
30 tablet - ONE DAILY

12-May-2016 Atorvastatin Tablets 10 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

11-May-2016 Supralip Tablets 160 mg Repeat Medication (Past)
56 TABLET - ONE DAILY IN MORNING

11-May-2016 Supralip Tablets 160 mg Repeat Medication (Past)
56 tablet - ONE DAILY IN THE MORNING

29-Feb-2016 Atorvastatin Tablets 10 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

29-Feb-2016 Atorvastatin Tablets 10 mg Repeat Medication (Past)
56 TABLET - ONE TO BE TAKEN EACH DAY

29-Feb-2016 Itraconazole Capsules 100 mg Acute Medication (Past)
14 capsule - TWO CAPS DAILY

29-Feb-2016 Itraconazole Capsules 100 mg Acute Medication (Past)
14 capsule - TWO CAPS DAILY

31-July-2015 Bezafibrate M/R tablets 400 mg Repeat Medication (Past)
56 tablet - 1 Tab Daily

10-Jun-2015 Bezafibrate M/R tablets 400 mg Repeat Medication (Past)
56 tablet - 1 Tab Daily

17-Mar-2015 Bezafibrate M/R tablets 400 mg Repeat Medication (Past)
56 tablet - 1 Tab Daily

14-Jan-2015 Bezafibrate M/R tablets 400 mg Repeat Medication (Past)
56 tablet - 1 Tab Daily

23-Oct-2014 Naproxen Tablets 500 mg Acute Medication (Past)
56 TABLET - ONE TO BE TAKEN TWICE A DAY

23-Oct-2014 Bezafibrate M/R tablets 400 mg Repeat Medication (Past)
56 tablet - 1 Tab Daily

23-Oct-2014 Naproxen Tablets 500 mg Acute Medication (Past)
56 TABLET - ONE TO BE TAKEN TWICE A DAY

17-July-2014 Bezafibrate M/R tablets 400 mg Repeat Medication (Past)
56 tablet - 1 Tab Daily

22-Apr-2014 Cetirizine Hydrochloride Tablets 10 mg Acute Medication (Past)
30 tablet - ONE DAILY

22-Apr-2014 Cetirizine Hydrochloride Tablets 10 mg Acute Medication (Past)
30 tablet - ONE DAILY

10-Feb-2014 Bezafibrate M/R tablets 400 mg Repeat Medication (Past)
56 tablet - 1 Tab Daily

09-Dec-2013 Itraconazole Capsules 100 mg Acute Medication (Past)
14 capsule - 2 Caps Daily

09-Dec-2013 Itraconazole Capsules 100 mg Acute Medication (Past)
14 capsule - 2 Caps Daily

18-Nov-2013 Bezafibrate M/R tablets 400 mg Repeat Medication (Past)
56 tablet - 1 Tab Daily

18-Nov-2013 Co-Codamol 30/500 Tablets Acute Medication (Past)
50 tablet - TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)

18-Nov-2013 Co-Codamol 30/500 Tablets Acute Medication (Past)
50 tablet - TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)

26-Aug-2013 Fluoxetine Hydrochloride Capsules 20 mg Acute Medication (Past)
28 capsule - ONE TO BE TAKEN EACH DAY

26-Aug-2013 Fluoxetine Hydrochloride Capsules 20 mg Acute Medication (Past)
28 capsule - ONE TO BE TAKEN EACH DAY

20-Jun-2013 Hepatyrix Vaccine, Suspension For Injection 1 ml pre-filled syringe Acute Medication (Past)
1 pre-filled disposable injection - 1ML INJECTION

20-Jun-2013 Hepatyrix Vaccine, Suspension For Injection 1 ml pre-filled syringe Acute Medication (Past)
1 pre-filled disposable injection - 1ML INJECTION

20-Jun-2013 Bezafibrate M/R tablets 400 mg Repeat Medication (Past)
56 tablet - 1 Tab Daily

30-May-2013 Bezafibrate M/R tablets 400 mg Repeat Medication (Past)
56 tablet - 1 Tab Daily

30-May-2013 Bezafibrate M/R tablets 400 mg Repeat Medication (Past)
56 tablet - 1 Tab Daily

08-May-2013 Amoxicillin Capsules 500 mg Acute Medication (Past)
15 CAPSULE - ONE TO BE TAKEN THREE TIMES A DAY

08-May-2013 Itraconazole Capsules 100 mg Acute Medication (Past)
14 capsule - TWO TO BE TAKEN EACH DAY

08-May-2013 Amoxicillin Capsules 500 mg Acute Medication (Past)
15 CAPSULE - ONE TO BE TAKEN THREE TIMES A DAY

08-May-2013 Itraconazole Capsules 100 mg Acute Medication (Past)
14 capsule - TWO TO BE TAKEN EACH DAY

28-Jan-2013 Chlorhexidine Gluconate Mouth wash 0.2 % Acute Medication (Past)
300 ML - RINSE MOUTH WITH 10ML FOR ABOUT 1 MINUTE TWICE A DAY

28-Jan-2013 Chlorhexidine Gluconate Mouth wash 0.2 % Acute Medication (Past)
300 ML - RINSE MOUTH WITH 10ML FOR ABOUT 1 MINUTE TWICE A DAY

28-Jan-2013 Chloramphenicol Eye drops 0.5 % Acute Medication (Past)
10 ML - APPLY ONE DROP EVERY TWO HOURS INITIALLY THEN REDUCE FREQUENCY AS INFECTION IS CONTROLLED AND CONTINUE FOR 48 HOURS AFTER HEALING

28-Jan-2013 Chloramphenicol Eye drops 0.5 % Acute Medication (Past)
10 ML - APPLY ONE DROP EVERY TWO HOURS INITIALLY THEN REDUCE FREQUENCY AS INFECTION IS CONTROLLED AND CONTINUE FOR 48 HOURS AFTER HEALING

31-Oct-2012 Fluconazole Capsules 50 mg Acute Medication (Past)
14 capsule - ONE CAP DAILY

31-Oct-2012 Fluconazole Capsules 50 mg Acute Medication (Past)
14 capsule - ONE CAP DAILY

14-Sept-2012 Ibuprofen Tablets 400 mg Acute Medication (Past)
24 tablet - ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD

14-Sept-2012 Tramadol Hydrochloride Capsules 50 mg Acute Medication (Past)
30 capsule - ONE OR TWO TABS TAKEN UP TO FOUR TIMES DAILY AS REQUIRED

14-Sept-2012 Ibuprofen Tablets 400 mg Acute Medication (Past)
24 tablet - ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD

11-Sept-2012 Tramadol Hydrochloride Capsules 50 mg Acute Medication (Past)
30 capsule - ONE OR TWO TABS TAKEN UP TO FOUR TIMES DAILY AS REQUIRED

11-Sept-2012 Tramadol Hydrochloride Capsules 50 mg Acute Medication (Past)
30 capsule - ONE OR TWO TABS TAKEN UP TO FOUR TIMES DAILY AS REQUIRED

05-Sept-2012 Co-Codamol 30/500 Tablets Acute Medication (Past)
100 TABLET - TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)

05-Sept-2012 Ibuprofen Tablets 400 mg Acute Medication (Past)
24 tablet - ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD

05-Sept-2012 Ibuprofen Tablets 400 mg Acute Medication (Past)
24 tablet - ONE TO BE TAKEN THREE TIMES A DAY WHEN REQUIRED WITH OR AFTER FOOD

05-Sept-2012 Bezafibrate M/R tablets 400 mg Acute Medication (Past)
28 tablet - 1 Tab Daily

05-Sept-2012 Co-Codamol 30/500 Tablets Acute Medication (Past)
100 TABLET - TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)

05-Sept-2012 Bezafibrate M/R tablets 400 mg Acute Medication (Past)
28 tablet - 1 Tab Daily

06-July-2012 Cetirizine Hydrochloride Tablets 10 mg Acute Medication (Past)
30 tablet - ONE DAILY

06-July-2012 Cetirizine Hydrochloride Tablets 10 mg Acute Medication (Past)
30 tablet - ONE DAILY

04-July-2012 Chlorphenamine Tablets 4 mg Acute Medication (Past)
28 TABLET - 1 AT NIGHT

04-July-2012 Chlorphenamine Tablets 4 mg Acute Medication (Past)
28 TABLET - 1 AT NIGHT

25-Nov-2011 Bezalip-Mono M/R tablets 400 mg Acute Medication (Past)
28 tablet - 1 Tab Daily

25-Nov-2011 Bezalip-Mono M/R tablets 400 mg Acute Medication (Past)
28 tablet - 1 Tab Daily

01-Aug-2011 Daktacort Cream 2 % + 1 % Acute Medication (Past)
30 GRAM - APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE DAILY

01-Aug-2011 Daktacort Cream Acute Medication (Past)
30 GRAM - APPLY THINLY TO THE AFFECTED AREA ONCE OR TWICE DAILY

30-Jun-2011 Chlorphenamine Tablets 4 mg Acute Medication (Past)
28 TABLET - 1 AT NIGHT

30-Jun-2011 Mometasone Furoate Nasal spray 50 micrograms/dose Acute Medication (Past)
1 SPRAY - 2 sprays each nostril Daily

30-Jun-2011 Chlorphenamine Tablets 4 mg Acute Medication (Past)
28 TABLET - 1 AT NIGHT

30-Jun-2011 Sodium Cromoglicate Eye drops 2 % Acute Medication (Past)
10 DROPS - Apply Qds

30-Jun-2011 Mometasone Furoate Nasal spray 50 micrograms/dose Acute Medication (Past)
1 SPRAY - 2 sprays each nostril Daily

30-Jun-2011 Sodium Cromoglicate Eye drops 2 % Acute Medication (Past)
10 DROPS - Apply Qds

02-Jun-2011 Trimovate Cream Acute Medication (Past)
30 GRAM - APPLY TO THE AFFECTED AREA UP TO FOUR TIMES DAILY

02-Jun-2011 Trimovate Cream Acute Medication (Past)
30 GRAM - APPLY TO THE AFFECTED AREA UP TO FOUR TIMES DAILY

20-May-2011 Flucloxacillin Capsules 500 mg Acute Medication (Past)
28 CAPSULE - ONE TO BE TAKEN FOUR TIMES A DAY

20-May-2011 Flucloxacillin Capsules 500 mg Acute Medication (Past)
28 CAPSULE - ONE TO BE TAKEN FOUR TIMES A DAY

16-July-2010 Co-Codamol 30/500 Caplets Acute Medication (Past)
56 tablet - 2 Tabs 4 times daily

16-July-2010 Diclofenac Sodium E/c tablets 50 mg Acute Medication (Past)
42 TABS - 1 Tab 3 times daily

16-July-2010 DICLOFENAC SODIUM EC TABLETS 50MG Acute Medication (Past)
42 TABS - 1 Tab 3 times daily

16-July-2010 Co-Codamol 30/500 Caplets Acute Medication (Past)
56 tablet - 2 Tabs 4 times daily

16-July-2010 Omeprazole Capsules (Gastro-Resistant) 20 mg Acute Medication (Past)
14 CAPS - 1 Cap Daily

16-July-2010 OMEPRAZOLE CAPSULES20MG Acute Medication (Past)
14 CAPS - 1 Cap Daily

01-Jun-2010 Acrivastine Capsules 8 mg Acute Medication (Past)
24 CAPS - 1 Cap Daily

01-Jun-2010 Sodium Cromoglicate Eye drops 2 % Acute Medication (Past)
10 DROPS - Apply Qds

01-Jun-2010 ACRIVASTINE CAPSULES8MG Acute Medication (Past)
24 CAPS - 1 Cap Daily

01-Jun-2010 SODIUM CROMOGLICATE EYE DROPS 2% Acute Medication (Past)
10 DROPS - Apply Qds

14-Apr-2010 Simvastatin Tablets 40 mg Repeat Medication (Past)
56 TABS - 1 Tab At night

14-Apr-2010 SIMVASTATIN TABLETS 40MG Repeat Medication (Past)
56 TABS - 1 Tab At night

13-Apr-2010 REVAXIS PREFILLED SYRINGE 0.5ML VACC Acute Medication (Past)
1 VACC - To be injected

13-Apr-2010 MOMETASONE FUROATE 140 DOSE AQUEOUS NASAL SPRAY 50MCG/DOSE Acute Medication (Past)
1 SPRAY - 2 sprays each nostril Daily

13-Apr-2010 Revaxis Injection 0.5 ml pre-filled syringe Acute Medication (Past)
1 VACC - To be injected

13-Apr-2010 Mometasone Furoate Nasal spray 50 micrograms/dose Acute Medication (Past)
1 SPRAY - 2 sprays each nostril Daily

13-Apr-2010 ACRIVASTINE CAPSULES8MG Acute Medication (Past)
24 CAPS - 1 Cap Daily

13-Apr-2010 SODIUM CROMOGLICATE EYE DROPS 2% Acute Medication (Past)
10 DROPS - Apply Qds

13-Apr-2010 Sodium Cromoglicate Eye drops 2 % Acute Medication (Past)
10 DROPS - Apply Qds

13-Apr-2010 Acrivastine Capsules 8 mg Acute Medication (Past)
24 CAPS - 1 Cap Daily

08-Apr-2010 CETIRIZINE HYDROCHLORIDE TABLETS 10MG Acute Medication (Past)
28 TABS - 1 Tab Daily

08-Apr-2010 Cetirizine Hydrochloride Tablets 10 mg Acute Medication (Past)
28 TABS - 1 Tab Daily

23-Mar-2010 SIMVASTATIN TABLETS 40MG Repeat Medication (Past)
56 TABS - 1 Tab At night

17-Dec-2009 LANSOPRAZOLE GASTRO RESISTANT CAPSULES30MG Acute Medication (Past)
28 CAPS - 1 Cap Daily

17-Dec-2009 Lansoprazole Capsules (Gastro-Resistant) 30 mg Acute Medication (Past)
28 CAPS - 1 Cap Daily

09-Oct-2009 SIMVASTATIN TABLETS 40MG Repeat Medication (Past)
56 TABS - 1 Tab At night

08-Oct-2009 Diclofenac Sodium E/c tablets 50 mg Acute Medication (Past)
28 TABS - 1 Tab tds with food

08-Oct-2009 DICLOFENAC SODIUM EC TABLETS 50MG Acute Medication (Past)
28 TABS - 1 Tab tds with food

08-Oct-2009 Diazepam Tablets 2 mg Acute Medication (Past)
21 TABS - 1 Tab 3 times daily prn

08-Oct-2009 DIAZEPAM TABLETS 2MG Acute Medication (Past)
21 TABS - 1 Tab 3 times daily prn

30-Jun-2009 Cetirizine Hydrochloride Tablets 10 mg Acute Medication (Past)
28 TABS - 1 Tab Daily

30-Jun-2009 BECLOMETASONE DIPROPIONATE 200 DOSE AQUEOUS NASAL SPRAY 50MCG/DOSE Acute Medication (Past)
1 SPRAY - 2 sprays each nostril Twice daily

30-Jun-2009 Beclometasone Aqueous nasal spray 50 micrograms/actuation Acute Medication (Past)
1 SPRAY - 2 sprays each nostril Twice daily

30-Jun-2009 CETIRIZINE HYDROCHLORIDE TABLETS 10MG Acute Medication (Past)
28 TABS - 1 Tab Daily

18-Jun-2009 TRIMOVATE CREAM Acute Medication (Past)
30 CREAM - Apply morning and night

18-Jun-2009 Trimovate Cream Acute Medication (Past)
30 CREAM - Apply morning and night

02-Jun-2009 Acrivastine Capsules 8 mg Acute Medication (Past)
28 CAPS - 1 Cap Daily

02-Jun-2009 ACRIVASTINE CAPSULES8MG Acute Medication (Past)
28 CAPS - 1 Cap Daily

08-Apr-2009 Zopiclone Tablets 3.75 mg Acute Medication (Past)
7 TABS - 1 Tab At night

08-Apr-2009 ZOPICLONE TABLETS 3.75MG Acute Medication (Past)
7 TABS - 1 Tab At night

18-Feb-2009 SIMVASTATIN TABLETS 40MG Repeat Medication (Past)
56 TABS - 1 Tab At night

16-Jan-2009 SIMVASTATIN TABLETS 40MG Acute Medication (Past)
28 TABS - 1 Tab At night

16-Jan-2009 Simvastatin Tablets 40 mg Acute Medication (Past)
28 TABS - 1 Tab At night

07-Jan-2009 Miconazole Nitrate Spray powder 0.16 % Acute Medication (Past)
1 SPRAY -

07-Jan-2009 MICONAZOLE NITRATE POWDER 100G SPRAY 0.16% Acute Medication (Past)
1 SPRAY -

05-Jan-2009 Omeprazole Capsules (Gastro-Resistant) 40 mg Acute Medication (Past)
-1 INVALID - DELETED for reason of: Wrong patient – 1 Cap In the morning

05-Jan-2009 OMEPRAZOLE CAPSULES40MG Acute Medication (Past)
-1 INVALID - DELETED: Wrong patient – 1 Cap In the morning

02-Dec-2008 OMEPRAZOLE CAPSULES40MG Acute Medication (Past)
14 CAPS - 1 Cap In the morning

02-Dec-2008 Omeprazole Capsules (Gastro-Resistant) 40 mg Acute Medication (Past)
14 CAPS - 1 Cap In the morning

03-Nov-2008 CO-CODAMOL 30MG/500MG TABLETS Acute Medication (Past)
100 TABS - 1 or 2 Tabs up to max qid

03-Nov-2008 PENICILLIN V TABLETS 250MG Acute Medication (Past)
28 TABS - 1 Tab 4 times daily

03-Nov-2008 Co-Codamol 30/500 Tablets Acute Medication (Past)
100 TABS - 1 or 2 Tabs up to max qid

03-Nov-2008 Penicillin V Tablets 250 mg Acute Medication (Past)
28 TABS - 1 Tab 4 times daily

22-July-2008 SIMVASTATIN TABLETS 40MG Acute Medication (Past)
28 TABS - 1 Tab At night

22-July-2008 Simvastatin Tablets 40 mg Acute Medication (Past)
28 TABS - 1 Tab At night

03-Jan-2008 PENICILLIN V TABLETS 250MG Acute Medication (Past)
56 TABS - 2 Tabs 4 times daily

03-Jan-2008 Penicillin V Tablets 250 mg Acute Medication (Past)
56 TABS - 2 Tabs 4 times daily

03-Jan-2008 FLUCLOXACILLIN CAPSULES500MG Acute Medication (Past)
28 CAPS - 1 Cap 4 times daily

03-Jan-2008 Flucloxacillin Capsules 500 mg Acute Medication (Past)
28 CAPS - 1 Cap 4 times daily

12-July-2007 ACRIVASTINE CAPSULES8MG Acute Medication (Past)
24 CAPS - 1 Cap In the morning

12-July-2007 Acrivastine Capsules 8 mg Acute Medication (Past)
24 CAPS - 1 Cap In the morning

12-July-2007 Trimethoprim Tablets 200 mg Acute Medication (Past)
14 TABS - 1 Tab morning and night

12-July-2007 TRIMETHOPRIM TABLETS 200MG Acute Medication (Past)
14 TABS - 1 Tab morning and night

02-Feb-2007 Lansoprazole Capsules (Gastro-Resistant) 30 mg Acute Medication (Past)
28 CAPS - 1 Cap Daily

02-Feb-2007 LANSOPRAZOLE GASTRO RESISTANT CAPSULES30MG Acute Medication (Past)
28 CAPS - 1 Cap Daily

04-July-2006 ACRIVASTINE CAPSULES8MG Acute Medication (Past)
28 CAPS - 1 Cap Daily

04-July-2006 Clotrimazole Cream 1 % Acute Medication (Past)

20 g - Apply 2 to 3 times daily

04-July-2006 CLOTRIMAZOLE CREAM 1% Acute Medication (Past)

20 g - Apply 2 to 3 times daily

04-July-2006 Acrivastine Capsules 8 mg Acute Medication (Past)

28 CAPS - 1 Cap Daily

14-Jun-2006 Acrivastine Capsules 8 mg Acute Medication (Past)

28 CAPS - 1 Cap Daily

14-Jun-2006 ACRIVASTINE CAPSULES8MG Acute Medication (Past)

28 CAPS - 1 Cap Daily

14-Jun-2006 Mometasone Furoate Nasal spray 50 micrograms/dose Acute Medication (Past)

1 SPRAY - 1 Puff morning and night

14-Jun-2006 MOMETASONE FUROATE 140 DOSE AQUEOUS NASAL SPRAY 50MCG/DOSE Acute Medication (Past)

1 SPRAY - 1 Puff morning and night

Allergies

This section is empty.

Vaccinations

05-Oct-2015 Ms Christine M. Sinclair (CDAWSON_18980)

Seasonal influenza vaccin given by other healthcare provider

20-Jun-2013 Mrs Fiona Connolly (FCONNOLLY_18980)

2nd hepatitis A vaccination (GMS)

Hepatyrix lotATYAB034AA exp: 3/14 advised to return for booster hep A after 6/12

Comment

20-Jun-2013 Mrs Fiona Connolly (FCONNOLLY_18980)

Booster typhoid vaccination (GMS)

Comment

28-Oct-2011 Ms Christine M. Sinclair (CDAWSON_18980)

Influenza vaccination

Batch No.NB110201 Exp 04-2012

28-Oct-2011 Ms Christine M. Sinclair (CDAWSON_18980)

Influenza vacc consent given

22-Aug-2001 UnknownUser (UnknownUse18980)

4th hepatitis B vaccination

Vaccinations.clm - No Action Required
Out with GP care

History

10-Apr-2001 UnknownUser (UnknownUse18980)

3rd hepatitis B vaccination

Vaccinations.clm - No Action Required
Out with GP care

History

13-Mar-2001 UnknownUser (UnknownUse18980)

2nd hepatitis B vaccination

Vaccinations.clm - No Action Required
Out with GP care

History

15-Jan-2001 UnknownUser (UnknownUse18980)

1st hepatitis B vaccination

Vaccinations.clm - No Action Required
Out with GP care

History

13-Oct-2000 UnknownUser (UnknownUse18980)

Booster polio vaccination

z Polio Immunis. \$.clm - Repeat after an Interval
Out with GP care

History

13-Oct-2000 UnknownUser (UnknownUse18980)

Hepatitis A vaccination,unspec

Vaccinations.clm - No Action Required
Out with GP care

History

13-Oct-2000 UnknownUser (UnknownUse18980)

Single dose typhoid vaccinatn

Vaccinations.clm - No Action Required
Out with GP care

History

Referrals

12-May-2025 Dr Julia A. Dunn (JDUNN_18980)

8H7i.: Referral to smoking cessation advisor (SCI Gateway Referral)

. Referral Type: Self Referral; Reason: Out Patient

25-Apr-2025 Dr Onyekachi Nwala (ON)

8Hn4.: Fast track referral for suspected colorectal cancer (SCI Gateway Referral)

. Referral Type: Self Referral; Reason: Out Patient

23-May-2023 Dr Fadilla Refin (FR)

8H5.: Referral to surgeon (SCI Gateway Referral)

. Referral Type: Self Referral; Reason: Out Patient

23-May-2023 Dr Fadilla Refin (FR)

8HRC.: Referral for spirometry (SCI Gateway Referral)

. Referral Type: Self Referral; Reason: Out Patient

01-Mar-2016 Dr Stephen H. Dunn (SDUNN_18980)

8H...: Referral for further care (SCI Gateway Referral)

. Referral Type: Self Referral; Reason: Out Patient

01-Mar-2016 Dr Stephen H. Dunn (SDUNN_18980)

8H...: Referral for further care (SCI Gateway Referral)

. Referral Type: Self Referral; Reason: Out Patient

24-Oct-2014 Dr Stephen H. Dunn (SDUNN_18980)

8H...: Referral for further care (SCI Gateway Referral)

. Referral Type: Self Referral; Reason: Out Patient

13-Jun-2011 Dr Stephen H. Dunn (SDUNN_18980)

8H...: Referral for further care (SCI Gateway Referral)

. Referral Type: Self Referral; Reason: Out Patient

19-Jun-2009 Dr Stephen H. Dunn (SDUNN_18980)

Referral for further care

Referred To: SCI Hospital, NHS. Referral Type: Out Patient. Speciality Type: Trauma and Orthopaedic Surgery. Referral Nature: Not Specified. , Referral Reason: Actual Hospital: Vale of Leven General Hospital nerve compression, urgency=low. Referral Type: Unknown (0)

Test Requests

This section is empty.

Test Results

12-May-2025 Mr Anonymous User (ANON)**Result:** Full blood count - FBC

Nucleated RBC, 0	0 x10 ⁹ /l	(No range available)
Basophils, 0	0 x10 ⁹ /l	(No range available)
Eosinophils	0.11 x10 ⁹ /l	(Range: 0.02 - 0.5)
Monocytes	0.4 x10 ⁹ /l	(Range: 0.2 - 1)
Lymphocytes	2 x10 ⁹ /l	(Range: 1.1 - 5)
Neutrophils	1.6 x10⁹/l	(Range: 2 - 7)
Platelet Count	213 x10 ⁹ /l	(Range: 150 - 410)
MCH	30.5 pg	(Range: 27 - 32)
Mean Cell Volume	93.3 fl	(Range: 83 - 101)
Haematocrit	0.434 l/l	(Range: 0.4 - 0.54)
Haemoglobin	142 g/l	(Range: 130 - 180)
Red Cell Count	4.65 x10 ¹² /l	(Range: 4.5 - 6.5)
White Blood Count	4.1 x10 ⁹ /l	(Range: 4 - 10)

12-May-2025 Mr Anonymous User (ANON)**Result:** Haemoglobin A1c level - IFCC standardised

HbA1c (IFCC)	34 mmol/mol	(Range: 20 - 41)
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12-May-2025 Mr Anonymous User (ANON)**Result:** Thyroid function tests

Total T3		(No range available)
Free T4	12.8 pmol/L	(Range: 9 - 21)
TSH	0.79 mU/L	(Range: 0.35 - 5)

12-May-2025 Mr Anonymous User (ANON)**Result:** Serum total protein

Globulins	30 g/L	(Range: 23 - 38)
Albumin	42 g/L	(Range: 35 - 50)
Total Protein	72 g/L	(Range: 60 - 80)

12-May-2025 Mr Anonymous User (ANON)**Result:** Blood sent for serum lipids

Chol/HDL ratio	3.8	(No range available)
Serum VLDL cholesterol level	2 mmol/L	(No range available)
LDL-Cholest (calc'd)	1.6 mmol/L	(No range available)
HDL Cholesterol	1.3 mmol/L	(No range available)
Triglycerides	4.3 mmol/L	(Range: 0.2 - 2.3)
Cholesterol	4.9 mmol/L	(No range available)

12-May-2025 Mr Anonymous User (ANON)**Result:** Liver function test

Albumin	42 g/L	(Range: 35 - 50)
Alkaline Phosphatase	65 U/L	(Range: 30 - 130)
AST	46 U/L	(No range available)
ALT	40 U/L	(No range available)
Total Bilirubin	7 umol/L	(No range available)

12-May-2025 Mr Anonymous User (ANON)**Result:** Urea and electrolytes

Estimated GFR > 60		(No range available)
Creatinine	73 umol/L	(Range: 40 - 130)
Urea	3.5 mmol/L	(Range: 2.5 - 7.8)
Chloride	108 mmol/L	(Range: 95 - 108)
Potassium	4.3 mmol/L	(Range: 3.5 - 5.3)
Sodium	140 mmol/L	(Range: 133 - 146)

12-May-2025 Mr Anonymous User (ANON)**Result:** Urine total protein

U Protein:Creatinine NA		(No range available)
Urine total protein		(No range available)
Urine Protein < 0.100		(No range available)
Urine Creatinine	18.4 mmol/L	(No range available)
Urine volume (ml) NA		(No range available)

12-May-2025 Mr Anonymous User (ANON)**Result:** Urine albumin

U Alb/Creat Ratio	0.3 mg/mmol creatinine	(No range available)
Urine Albumin	6 mg/L	(No range available)

22-Apr-2025 Mr Anonymous User (ANON)**Result:** Quantitative faecal immunochemical test

Quantitative faecal immunochemical test	228 ug Hb/g faeces	(No range available)
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18-Sept-2024 Mr Anonymous User (ANON)**Result:** Erythrocyte sedimentation rate

ESR	9 mm/hr	(No range available)
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18-Sept-2024 Mr Anonymous User (ANON)**Result:** Full blood count - FBC

Nucleated RBC, 0	0 x10 ⁹ /l	(No range available)
Basophils	0.1 x10 ⁹ /l	(No range available)
Eosinophils	0.08 x10 ⁹ /l	(Range: 0.02 - 0.5)
Monocytes	0.4 x10 ⁹ /l	(Range: 0.2 - 1)
Lymphocytes	2.1 x10 ⁹ /l	(Range: 1.1 - 5)
Neutrophils	3.2 x10 ⁹ /l	(Range: 2 - 7)
Platelet Count	208 x10 ⁹ /l	(Range: 150 - 410)
MCH	30.4 pg	(Range: 27 - 32)
Mean Cell Volume	93.3 fl	(Range: 83 - 101)
Haematocrit	0.473 l/l	(Range: 0.4 - 0.54)
Haemoglobin	154 g/l	(Range: 130 - 180)
Red Cell Count	5.07 x10 ¹² /l	(Range: 4.5 - 6.5)
White Blood Count	5.8 x10 ⁹ /l	(Range: 4 - 10)

18-Sept-2024 Mr Anonymous User (ANON)**Result:** Plasma glucose level

Glucose	5.6 mmol/L	(Range: 3.5 - 6)
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18-Sept-2024 Mr Anonymous User (ANON)**Result:** Haemoglobin A1c level - IFCC standardised

HbA1c (IFCC)	37 mmol/mol	(Range: 20 - 41)
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18-Sept-2024 Mr Anonymous User (ANON)**Result:** Thyroid function tests

Total T3		(No range available)
Free T4	11.6 pmol/L	(Range: 9 - 21)
TSH	1.42 mU/L	(Range: 0.35 - 5)

18-Sept-2024 Mr Anonymous User (ANON)**Result:** Blood sent for serum lipids

Chol/HDL ratio	6.3	(No range available)
Serum VLDL cholesterol level		(No range available)
LDL-Cholest (calc'd)		(No range available)
HDL Cholesterol	1.2 mmol/L	(No range available)
Triglycerides	5.4 mmol/L	(Range: 0.2 - 2.3)
Cholesterol	7.5 mmol/L	(No range available)

18-Sept-2024 Mr Anonymous User (ANON)**Result:** Liver function test

Albumin	43 g/L	(Range: 35 - 50)
Alkaline Phosphatase	72 U/L	(Range: 30 - 130)
AST	21 U/L	(No range available)
ALT	26 U/L	(No range available)
Total Bilirubin	5 umol/L	(No range available)

18-Sept-2024 Mr Anonymous User (ANON)**Result:** Urea and electrolytes

Estimated GFR > 60		(No range available)
Creatinine	86 umol/L	(Range: 40 - 130)
Urea	5.2 mmol/L	(Range: 2.5 - 7.8)
Chloride	105 mmol/L	(Range: 95 - 108)
Potassium	4.4 mmol/L	(Range: 3.5 - 5.3)
Sodium	138 mmol/L	(Range: 133 - 146)

18-Sept-2024 Mr Anonymous User (ANON)**Result:** Bone profile

Alkaline Phosphatase	72 U/L	(Range: 30 - 130)
Albumin	43 g/L	(Range: 35 - 50)
Phosphate	0.93 mmol/L	(Range: 0.8 - 1.5)
Calcium (adjusted)	2.29 mmol/L	(Range: 2.2 - 2.6)
Calcium	2.29 mmol/L	(Range: 2.2 - 2.6)

18-Sept-2024 Mr Anonymous User (ANON)**Result:** Serum folate

Serum Folate	2.7 ug/l	(Range: 3.1 - 20)
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18-Sept-2024 Mr Anonymous User (ANON)**Result:** Serum ferritin

Serum Ferritin	108 ug/l	(Range: 15 - 300)
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18-Sept-2024 Mr Anonymous User (ANON)**Result:** (Non Coded Event - Active B12)

Active B12 (Non Coded Event - Active B12)	52 pmol/L	(No range available)
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22-May-2023 Mr Anonymous User (ANON)**Result:** Full blood count - FBC

Nucleated RBC	NA	(No range available)
Basophils	NA	(No range available)
Eosinophils	NA	(No range available)
Monocytes	NA	(No range available)
Lymphocytes	NA	(No range available)
Neutrophils	NA	(No range available)
Platelet Count	NA	(No range available)
MCH	NA	(No range available)
Mean Cell Volume	NA	(No range available)
Haematocrit	NA	(No range available)
Haemoglobin	NA	(No range available)
Red Cell Count	NA	(No range available)
White Blood Count	NA	(No range available)

22-May-2023 Mr Anonymous User (ANON)**Result:** Vitamin B12 deficiency

25-OH Vitamin D	37 nmol/L	(No range available)
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22-May-2023 Mr Anonymous User (ANON)**Result:** Thyroid function tests

Total T3		(No range available)
Free T4	12.5 pmol/L	(Range: 9 - 21)
TSH	0.9 mU/L	(Range: 0.35 - 5)

22-May-2023 Mr Anonymous User (ANON)**Result:** Serum folate

Serum Folate	NA	(No range available)
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22-May-2023 Mr Anonymous User (ANON)**Result:** Serum vitamin B12

Serum Vitamin B12	NA	(No range available)
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22-May-2023 Mr Anonymous User (ANON)**Result:** Serum ferritin

Serum Ferritin	187 ug/l	(Range: 15 - 300)
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22-May-2023 Mr Anonymous User (ANON)**Result:** Liver function test

Albumin	44 g/L	(Range: 35 - 50)
Alkaline Phosphatase	71 U/L	(Range: 30 - 130)
AST	NA	(No range available)
ALT	50 U/L	(No range available)
Total Bilirubin	5 umol/L	(No range available)

22-May-2023 Mr Anonymous User (ANON)**Result:** Urea and electrolytes

Estimated GFR > 60		(No range available)
Creatinine	75 umol/L	(Range: 40 - 130)
Urea	4.5 mmol/L	(Range: 2.5 - 7.8)
Chloride	101 mmol/L	(Range: 95 - 108)
Potassium NA		(No range available)
Sodium	140 mmol/L	(Range: 133 - 146)

22-May-2023 Mr Anonymous User (ANON)**Result:** Bone profile

Alkaline Phosphatase	71 U/L	(Range: 30 - 130)
Albumin	44 g/L	(Range: 35 - 50)
Phosphate NA		(No range available)
Calcium (adjusted)	2.61 mmol/L	(Range: 2.2 - 2.6)
Calcium	2.59 mmol/L	(Range: 2.2 - 2.6)

22-May-2023 Mr Anonymous User (ANON)**Result:** Blood sent for serum lipids

Chol/HDL ratio	6.3	(No range available)
Serum VLDL cholesterol level		(No range available)
LDL-Cholest (calc'd)		(No range available)
HDL Cholesterol	1.4 mmol/L	(No range available)
Triglycerides	7.1 mmol/L	(Range: 0.2 - 2.3)
Cholesterol	8.8 mmol/L	(No range available)

22-May-2023 Mr Anonymous User (ANON)**Result:** Vitamin B12 deficiency

25-OH Vitamin D	37 nmol/L	(No range available)
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22-May-2023 Mr Anonymous User (ANON)**Result:** Thyroid function tests

Total T3		(No range available)
Free T4	12.5 pmol/L	(Range: 9 - 21)
TSH	0.9 mU/L	(Range: 0.35 - 5)

06-Sept-2021 Mr Anonymous User (ANON)**Result:** Liver function test

Albumin	39 g/L	(Range: 35 - 50)
Alkaline Phosphatase	57 U/L	(Range: 30 - 130)
AST	24 U/L	(No range available)
ALT	27 U/L	(No range available)
Total Bilirubin	9 umol/L	(No range available)

06-Sept-2021 Mr Anonymous User (ANON)**Result:** Urea and electrolytes

Estimated GFR > 60		(No range available)
Creatinine	72 umol/L	(Range: 40 - 130)
Urea	3.6 mmol/L	(Range: 2.5 - 7.8)
Chloride	104 mmol/L	(Range: 95 - 108)
Potassium	4.3 mmol/L	(Range: 3.5 - 5.3)
Sodium	138 mmol/L	(Range: 133 - 146)

27-Aug-2021 Mr Anonymous User (ANON)**Result:** 2019-nCoV (novel coronavirus) not detected
2019-nCoV (novel coronavirus) not detected

(No range available)

20-Aug-2021 Mr Anonymous User (ANON)**Result:** Serum urate level

Urate	457 umol/L	(Range: 200 - 430)
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20-Aug-2021 Mr Anonymous User (ANON)**Result:** Blood sent for serum lipids

Chol/HDL ratio	2.9	(No range available)
Serum VLDL cholesterol level		(No range available)
LDL-Cholest (calc'd)		(No range available)
HDL Cholesterol	1.6 mmol/L	(No range available)
Triglycerides	5.2 mmol/L	(Range: 0.2 - 2.3)
Cholesterol	4.6 mmol/L	(No range available)

20-Aug-2021 Mr Anonymous User (ANON)**Result:** Liver function test

Albumin NA		(No range available)
Alkaline Phosphatase NA		(No range available)
AST NA		(No range available)
ALT NA		(No range available)
Total Bilirubin NA		(No range available)

20-Aug-2021 Mr Anonymous User (ANON)**Result:** Urea and electrolytes

Estimated GFR		(No range available)
Creatinine NA		(No range available)
Urea NA		(No range available)
Chloride NA		(No range available)
Potassium NA		(No range available)
Sodium NA		(No range available)

20-Aug-2021 Mr Anonymous User (ANON)**Result:** Serum urate level

Urate	457 umol/L	(Range: 200 - 430)
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20-Aug-2021 Mr Anonymous User (ANON)**Result:** Blood sent for serum lipids

Chol/HDL ratio	2.9	(No range available)
Serum VLDL cholesterol level		(No range available)
LDL-Cholest (calc'd)		(No range available)
HDL Cholesterol	1.6 mmol/L	(No range available)
Triglycerides	5.2 mmol/L	(Range: 0.2 - 2.3)
Cholesterol	4.6 mmol/L	(No range available)

20-July-2021 Mr Anonymous User (ANON)**Result:** 2019-nCoV (novel coronavirus) not detected

2019-nCoV (novel coronavirus) not detected		(No range available)
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19-Feb-2021 Mr Anonymous User (ANON)**Result:** (Non Coded Event - SARS-CoV-2)

SARS-CoV-2 (Non Coded Event - SARS-CoV-2)		(No range available)
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25-Jan-2021 Mr Anonymous User (ANON)**Result:** Erythrocyte sedimentation rate

ESR	12 mm/hr	(No range available)
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25-Jan-2021 Mr Anonymous User (ANON)**Result:** Full blood count - FBC

Nucleated RBC, 0	0 x10 ⁹ /l	(No range available)
Basophils, 0	0 x10 ⁹ /l	(No range available)
Eosinophils	0.16 x10 ⁹ /l	(Range: 0.02 - 0.5)
Monocytes	0.5 x10 ⁹ /l	(Range: 0.2 - 1)
Lymphocytes	2.3 x10 ⁹ /l	(Range: 1.1 - 5)
Neutrophils	2.7 x10 ⁹ /l	(Range: 2 - 7)
Platelet Count	210 x10 ⁹ /l	(Range: 150 - 410)
MCH	31.4 pg	(Range: 27 - 32)
Mean Cell Volume	93.3 fl	(Range: 83 - 101)
Haematocrit	0.445 l/l	(Range: 0.4 - 0.54)
Haemoglobin	150 g/l	(Range: 130 - 180)
Red Cell Count	4.77 x10 ¹² /l	(Range: 4.5 - 6.5)
White Blood Count	5.7 x10 ⁹ /l	(Range: 4 - 10)

25-Jan-2021 Mr Anonymous User (ANON)**Result:** Plasma glucose level

Glucose	5.3 mmol/L	(Range: 3.5 - 6)
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25-Jan-2021 Mr Anonymous User (ANON)**Result:** Thyroid function tests

Total T3		(No range available)
Free T4	12.8 pmol/L	(Range: 9 - 21)
TSH	2.25 mU/L	(Range: 0.35 - 5)

25-Jan-2021 Mr Anonymous User (ANON)**Result:** Liver function test

Albumin	40 g/L	(Range: 35 - 50)
Alkaline Phosphatase	79 U/L	(Range: 30 - 130)
AST	38 U/L	(No range available)
ALT	42 U/L	(No range available)
Total Bilirubin	4 umol/L	(No range available)

25-Jan-2021 Mr Anonymous User (ANON)**Result:** Urea and electrolytes

Estimated GFR > 60		(No range available)
Creatinine	75 umol/L	(Range: 40 - 130)
Urea	4.3 mmol/L	(Range: 2.5 - 7.8)
Chloride	106 mmol/L	(Range: 95 - 108)
Potassium	4.3 mmol/L	(Range: 3.5 - 5.3)
Sodium	140 mmol/L	(Range: 133 - 146)

25-Jan-2021 Mr Anonymous User (ANON)

Result: Bone profile		
Alkaline Phosphatase	79 U/L	(Range: 30 - 130)
Albumin	40 g/L	(Range: 35 - 50)
Phosphate	1.21 mmol/L	(Range: 0.8 - 1.5)
Calcium (adjusted)	2.3 mmol/L	(Range: 2.2 - 2.6)
Calcium	2.31 mmol/L	(Range: 2.2 - 2.6)

25-Jan-2021 Mr Anonymous User (ANON)

Result: Serum ferritin		
Serum Ferritin	171 ug/l	(Range: 15 - 300)

25-Jan-2021 Mr Anonymous User (ANON)

Result: Blood sent for serum lipids		
Chol/HDL ratio	5.8	(No range available)
Serum VLDL cholesterol level		(No range available)
LDL-Cholest (calc'd)		(No range available)
HDL Cholesterol	1.4 mmol/L	(No range available)
Triglycerides	5.5 mmol/L	(Range: 0.2 - 2.3)
Cholesterol	8.1 mmol/L	(No range available)

25-Jan-2021 Mr Anonymous User (ANON)

Result: Thyroid function tests		
Total T3		(No range available)
Free T4	12.8 pmol/L	(Range: 9 - 21)
TSH	2.25 mU/L	(Range: 0.35 - 5)

25-Jan-2021 Mr Anonymous User (ANON)

Result: Liver function test		
Albumin	40 g/L	(Range: 35 - 50)
Alkaline Phosphatase	79 U/L	(Range: 30 - 130)
AST	38 U/L	(No range available)
ALT	42 U/L	(No range available)
Total Bilirubin	4 umol/L	(No range available)

25-Jan-2021 Mr Anonymous User (ANON)

Result: Urea and electrolytes		
Estimated GFR > 60		(No range available)
Creatinine	75 umol/L	(Range: 40 - 130)
Urea	4.3 mmol/L	(Range: 2.5 - 7.8)
Chloride	106 mmol/L	(Range: 95 - 108)
Potassium	4.3 mmol/L	(Range: 3.5 - 5.3)
Sodium	140 mmol/L	(Range: 133 - 146)

25-Jan-2021 Mr Anonymous User (ANON)

Result: Bone profile		
Alkaline Phosphatase	79 U/L	(Range: 30 - 130)
Albumin	40 g/L	(Range: 35 - 50)
Phosphate	1.21 mmol/L	(Range: 0.8 - 1.5)
Calcium (adjusted)	2.3 mmol/L	(Range: 2.2 - 2.6)
Calcium	2.31 mmol/L	(Range: 2.2 - 2.6)

25-Jan-2021 Mr Anonymous User (ANON)

Result: Haemoglobin A1c level - IFCC standardised		
HbA1c (IFCC)	35 mmol/mol	(Range: 20 - 41)

21-Nov-2020 Mr Anonymous User (ANON)

Result: (Non Coded Event - SARS-CoV-2)		
SARS-CoV-2 (Non Coded Event - SARS-CoV-2)		(No range available)

29-Sept-2020 Mr Anonymous User (ANON)

Result: (Non Coded Event - SARS-CoV-2)		
SARS-CoV-2 (Non Coded Event - SARS-CoV-2)		(No range available)

05-Sept-2020 Mr Anonymous User (ANON)

Result: (Non Coded Event - SARS-CoV-2)		
SARS-CoV-2 (Non Coded Event - SARS-CoV-2)		(No range available)

29-Apr-2020 Mr Anonymous User (ANON)

Result: (Non Coded Event - SARS-CoV-2)		
SARS-CoV-2 (Non Coded Event - SARS-CoV-2)		(No range available)

29-Jan-2020 Mr Anonymous User (ANON)**Result:** Full blood count - FBC

Nucleated RBC, 0	0 x10 ⁹ /l	(No range available)
Basophils	0.1 x10 ⁹ /l	(No range available)
Eosinophils	0.1 x10 ⁹ /l	(Range: 0.02 - 0.5)
Monocytes	0.3 x10 ⁹ /l	(Range: 0.2 - 1)
Lymphocytes	1.7 x10 ⁹ /l	(Range: 1.1 - 5)
Neutrophils	2.1 x10 ⁹ /l	(Range: 2 - 7)
Platelet Count	191 x10 ⁹ /l	(Range: 150 - 410)
MCH	31.2 pg	(Range: 27 - 32)
Mean Cell Volume	92.9 fl	(Range: 83 - 101)
Haematocrit	0.435 l/l	(Range: 0.4 - 0.54)
Haemoglobin	146 g/l	(Range: 130 - 180)
Red Cell Count	4.68 x10 ¹² /l	(Range: 4.5 - 6.5)
White Blood Count	4.2 x10 ⁹ /l	(Range: 4 - 10)

29-Jan-2020 Mr Anonymous User (ANON)**Result:** Urea and electrolytes

Estimated GFR > 60		(No range available)
Creatinine	85 umol/L	(Range: 40 - 130)
Urea	4.7 mmol/L	(Range: 2.5 - 7.8)
Chloride	104 mmol/L	(Range: 95 - 108)
Potassium	4.1 mmol/L	(Range: 3.5 - 5.3)
Sodium	142 mmol/L	(Range: 133 - 146)

29-Jan-2020 Mr Anonymous User (ANON)**Result:** Serum ferritin

Serum Ferritin	160 ug/l	(Range: 15 - 300)
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29-Jan-2020 Mr Anonymous User (ANON)**Result:** Quantitative faecal immunochemical test

Quantitative faecal immunochemical test < 9		(No range available)
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09-Mar-2016 Mr Anonymous User (ANON)**Result:** Plasma glucose level

Glucose	4.5 mmol/L	(Range: 3.5 - 6)
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09-Mar-2016 Mr Anonymous User (ANON)**Result:** Thyroid function tests

Total T3		(No range available)
Free T4	13.4 pmol/L	(Range: 9 - 21)
TSH	0.97 mU/L	(Range: 0.35 - 5)

09-Mar-2016 Mr Anonymous User (ANON)**Result:** Blood sent for serum lipids

Chol/HDL ratio	4.8	(No range available)
Serum VLDL cholesterol level		(No range available)
LDL-Cholest (calc'd)		(No range available)
HDL Cholesterol	1.4 mmol/L	(No range available)
Triglycerides	5.8 mmol/L	(Range: 0.2 - 2.3)
Cholesterol	6.7 mmol/L	(No range available)

09-Mar-2016 Mr Anonymous User (ANON)**Result:** Liver function test

Albumin	38 g/L	(Range: 35 - 50)
Alkaline Phosphatase	74 U/L	(Range: 30 - 130)
AST	22 U/L	(No range available)
ALT	20 U/L	(No range available)
Total Bilirubin	8 umol/L	(No range available)

09-Mar-2016 Mr Anonymous User (ANON)**Result:** Gamma - G.T. level

Gamma-GT	39 U/L	(No range available)
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09-Mar-2016 Mr Anonymous User (ANON)**Result:** Urea and electrolytes

Estimated GFR > 60		(No range available)
Creatinine	72 umol/L	(Range: 40 - 130)
Urea	5.1 mmol/L	(Range: 2.5 - 7.8)
Chloride	101 mmol/L	(Range: 95 - 108)
Potassium	5.1 mmol/L	(Range: 3.5 - 5.3)
Sodium	139 mmol/L	(Range: 133 - 146)

09-Mar-2016 Mr Anonymous User (ANON)**Result:** Bone profile

Alkaline Phosphatase	74 U/L	(Range: 30 - 130)
Albumin	38 g/L	(Range: 35 - 50)
Phosphate	0.97 mmol/L	(Range: 0.8 - 1.5)
Calcium (adjusted)	2.3 mmol/L	(Range: 2.2 - 2.6)
Calcium	2.28 mmol/L	(Range: 2.2 - 2.6)

09-Mar-2016 Mr Anonymous User (ANON)

Result: Serum amylase level

Amylase

54 U/L

(No range available)

09-Mar-2016 Mr Anonymous User (ANON)

Result: Full blood count - FBC

Nucleated RBC, 0

0 x10⁹/l

(No range available)

Basophils

0.1 x10⁹/l

(No range available)

Eosinophils

0.1 x10⁹/l

(No range available)

Monocytes

0.3 x10⁹/l

(Range: 0.2 - 0.8)

Lymphocytes

1.6 x10⁹/l

(Range: 1.5 - 4)

Neutrophils

1.6 x10⁹/l**(Range: 2 - 7.5)**

Platelet Count

220 x10⁹/l

(Range: 150 - 400)

MCH

29.7 pg

(Range: 27 - 32)

Mean Cell Volume

93.4 fl

(Range: 80 - 100)

Haematocrit

0.469 l/l

(Range: 0.4 - 0.54)

Haemoglobin

149 g/l

(Range: 130 - 180)

Red Cell Count

5.02 x10¹²/l

(Range: 4.5 - 6.5)

White Blood Count

3.7 x10⁹/l**(Range: 4 - 11)**

Other Items

19-May-2026	Read Code	SMS text sent to patient ***** Message Details.	Type: Appointment Reminder Status: Message Delivered Message: See MLog for *****
27-Jan-2026	Read Code	SMS text sent to patient	Summary of ***** message sent to patient / Dear Mr William Campbell, Please remember that tomorrow, due to a family bereavement, there will be no afternoon GP surgeries and we will be operating on emergency only basis. We will have our admin team available on the phone and in the practice to help with general enquiries, and assist you where they can. Thank you very much for your understanding and kindness during this difficult time. Drs S & J *****
26-Jan-2026	Read Code	SMS text sent to patient	Summary of ***** message sent to patient / Dear Mr William Campbell We are sorry to inform you, due to a family bereavement, there will be no afternoon GP surgeries on Wednesday 28th January and we will be operating on emergency only basis. We will have our admin team available on the phone and in the practice to help with general enquiries, and assist you where they can. Thank you very much for your understanding and kindness during this difficult time. Drs S & J *****
15-Jan-2026	Read Code	Rep.presc. monitoring NOS	RPLES
08-Dec-2025	Read Code	SMS text sent to patient	Face Coverings
05-Dec-2025	Read Code	SMS text sent to patient	Summary of ***** message sent to patient / Dear Mr William Campbell Please find a message below from Greater Glasgow & Clyde Health Board. If you have mild or moderate flu symptoms, stay home to avoid spreading the virus, especially in GP practices, hospitals, and other healthcare settings. If you need medical advice, contact your local pharmacy or call NHS 24 on 111 for urgent concerns. To reduce the spread: Wash hands often, cover coughs/sneezes with a tissue or your elbow and consider wearing a face mask. Find a self-help guide at NHS Inform - Flu-like illness.
05-Dec-2025	Read Code	SMS text sent to patient	CDM review
30-Oct-2025	Read Code	SMS text sent to patient	Summary of ***** message sent to patient / Dear Mr William Campbell, We're making it easier and faster to check in when you arrive for your GP appointment. Our new system, Engage Arrive, lets you confirm your arrival securely from your smartphone, no need to wait at reception. Simply download the Engage Arrive app and follow the instructions when you arrive for your appointment: Engage if you'd prefer, the check-in screen at reception will still be available for you to use. It's simple, secure, and helps us keep things running smoothly. Drs S & J *****
25-Oct-2025	Recall	Patient "recall"	admin. NOS
26-Aug-2025	Read Code	Spirometry	Normal
19-Jun-2025	Read Code	SMS text sent to patient	Summary of ***** message sent to patient / Message from Drs S & J ***** Dear William Campbell, We note from our records you have borrowed a Blood Pressure machine from the Practice on 25th April 2025. Please return this at your earliest convenience. We currently have a waiting list of patients who require use of one. Drs S & J ***** 01389 811833
12-Jun-2025	Read Code	SMS text sent to patient	Summary of ***** message sent to patient / Message from Drs S & J ***** Dear William Campbell, We note from our records you have borrowed a Blood Pressure machine from the Practice. Please return this at your earliest convenience. We currently have a waiting list of patients who require use of one. Drs S & J ***** 01389 811833
14-May-2025	Read Code	SMS text sent to patient	Summary of ***** message sent to patient / Dear Mr William Campbell, We have received your blood test results. Please contact the surgery on 01389 811833 to arrange a routine telephone call. This is a routine message and should cause you no alarm. Thank you, Drs S & J ***** / X-Ray Scan Results - Docman

11-May-2025	Read Code	SMS text sent to patient ***** Message Details. Type: Appointment Reminder Status: Message Delivered Message: See MLog for
05-May-2025	Read Code	SMS text sent to patient ***** Message Details. Type: Appointment Reminder Status: Message Delivered Message: See MLog for
28-Apr-2025	Read Code	SMS text sent to patient Summary of ***** message sent to patient / Message from Drs S & J ***** Dear William Campbell, Please respond to the BP review text messages so that we are able to set you up for further monitoring. Thank you Drs S & J ***** Drs S & J ***** 01389 811833
28-Apr-2025	Read Code	SMS text sent to patient Summary of ***** message sent to patient / Dear Mr William Campbell, Please be assured your referral has now been sent to the hospital for vetting. If you have not heard with regards an appointment from the hospital after 4 weeks, please get in touch with us and we can look into this for an update. More information on waiting times can be found at NHS inform - Waiting Well (click here) Should your condition deteriorate, please get in touch. Kind regards, Dr ***** and ***** ***** / Patient notification of USoC referral sent
25-Apr-2025	Read Code	Home blood pressure monitor loaned to patient
25-Apr-2025	Read Code	Patient "recall"; admin. NOS
24-Apr-2025	Read Code	SMS text sent to patient Summary of ***** message sent to patient / Dear Mr William Campbell, The GP has looked at your BP readings. Please contact the surgery on 01389 811833 to arrange a routine telephone call. This is a routine message and should cause you no alarm. Thank you, Drs S & J ***** / X-Ray Scan Results - Docman
16-Apr-2025	Read Code	SMS text sent to patient Summary of ***** message sent to patient / Message from Drs S & J ***** Dear William Campbell, We note from our records you have borrowed a Blood Pressure machine from the Practice. Please return this at your earliest convenience. We currently have a waiting list of patients who require use of one. Drs S & J ***** 01389 811833
08-Apr-2025	Read Code	Home blood pressure monitor loaned to patient
28-Mar-2025	Read Code	Sliding hiatus hernia
24-Mar-2025	Read Code	Gastroscopy abnormal Hiatus hernia
18-Mar-2025	Read Code	SMS text sent to patient Summary of ***** message sent to patient / Dear Patient, Unfortunately, due to limited clinician appointments we are operating on an urgent appointment service on Wednesday 19th March 2025. We apologise for any inconvenience this may cause. Remember other services are available for non-urgent services such as NHS Inform. Also your local pharmacist can assist and provide medications for minor ailments such as coughs, sore throats etc - and at times urine infections. Any appointments already booked for today will go ahead. Thank you for your ***** and understanding.Drs S & J *****
14-Mar-2025	Read Code	SMS text sent to patient Summary of ***** message sent to patient / Dear Patient, Unfortunately, due to unexpected clinician absence we are operating on an emergency only service today. We apologise for any inconvenience this may cause. Remember other services are available for non urgent services such as NHS Inform also, your local pharmacist can assist and provide medications for minor ailments such as coughs, sore throats etc - and at times urine infections. Any appointments already booked for today will go ahead. Thank you for your ***** and understanding.Drs S & J *****
26-Feb-2025	Read Code	SMS text sent to patient Summary of ***** message sent to patient / Dear Patient, Unfortunately, due to clinician sickness we are operating on an emergency only service on Thursday 27th February 2025. We apologise for any inconvenience this may cause. Remember other services are available for non urgent services such as NHS Inform also, your local pharmacist can assist and provide medications for minor ailments such as coughs, sore throats etc - and at times urine infections. Any appointments already booked for today will go ahead. Thank you for your ***** and understanding.Drs S & J *****
24-Feb-2025	Read Code	Caution -"same name";-check pat
27-Jan-2025	Read Code	SMS text sent to patient Summary of ***** message sent to patient / Dear Patient, Firstly, thank you for your support and ***** on Friday. We managed to still be available for urgent care via telephone, despite limited resources. We are pleased to inform you our systems, phones and services are back up and running normally as of today, Monday 27th January. We will do our best to help you and thank you again for your support in what has been a challenging time for all. Best wishes, Drs S & J ***** / Service Resumed
24-Jan-2025	Read Code	SMS text sent to patient Summary of ***** message sent to patient / Dear Patients, Our phone lines are down and there has been damage done to the building. Unfortunately, and as a priority to staff safety, we are having to evacuate the building. Please do not attempt to come to the Health Centre - The building will be CLOSED. Please contact NHS24 if you are in need of emergency care. As a result, we expect Monday to be exceptionally busy trying to get systems back up and running, please be patient and only contact us on Monday for EMERGENCY ONLY. Thank you for your understanding and *****.

24-Jan-2025	Read Code	SMS text sent to patient	Summary of ***** message sent to patient / Update. We are currently working on getting our phone line diverted for emergency only. Please be patient as this will be manned by one member of staff only. We cannot deal with routine queries and can only deal with emergency only at the moment. Thank you for your *****.
23-Dec-2024	Read Code	SMS text sent to patient	Xmas ***** emergency only
19-Dec-2024	Read Code	SMS text sent to patient	Festive period text - acute only appointment
13-Dec-2024	Read Code	SMS text sent to patient	Festive period text - acute only appointment
06-Dec-2024	Read Code	SMS text sent to patient	Summary of ***** message sent to patient / Dear Mr William Campbell Due to unforeseen circumstances we are unfortunately only able to deal with acute medical emergencies today. Please only contact the practice for an appointment if you feel you have a medical emergency that cannot wait. If you have an appointment booked, then please keep this appointment. Drs S & J *****
07-Oct-2024	Read Code	SMS text sent to patient	Winter Vaccination Programme
01-Oct-2024	Read Code	SMS text sent to patient	Emergency only - 1 GP
20-Aug-2024	Read Code	SMS text sent to patient	Type: Appointment Reminder Status: Message Delivered Message: See MJog for ***** Message Details.
14-Aug-2024	Read Code	SMS text sent to patient	Type: Appointment Reminder Status: Message Delivered Message: See MJog for ***** Message Details.
07-Aug-2024	Read Code	DNA bowel cancer screening	Summary of ***** message sent to patient / You were recently invited to take a bowel screening test, which we have been notified you have as yet, failed to return. These tests are very simple to use and very effective. Bowel cancer is the 3rd most common cancer in the UK and the UK's second biggest killer but it is one of the easier cancers to treat with a high success rate if caught early enough. The ***** comes with full instructions and it is free to post. If you still have the ***** please use it and send it away. If you no longer have the ***** you can phone 0800 0121 833 for a replacement. If you have internet access you can get more information at www.bowelscreening.scot.nhs.uk . / Bowel screening text reminder sent
31-July-2024	Read Code	No response to bowel cancer screening programme invitation	Non-Responder
22-May-2024	Read Code	SMS text sent to patient	Emergency Only Appts
16-May-2024	Read Code	SMS text sent to patient	Summary of text message sent to patient / Dear MrCampbell, Due to unforeseen circumstances we are unfortunately only able to deal with medical emergencies today. Please only contact the practice for an appointment if you feel you have a medical emergency that cannot wait. If you have an appointment booked, then please keep this appointment. Drs S & J *****
02-May-2024	Recall	No response to bowel cancer screening programme invitation	<i>Bowel Cancer Screening Exclusion</i>
02-May-2024	Read Code	SMS text sent to patient	Summary of text message sent to patient / Dear MrCampbell, Due to unforeseen circumstances we are unfortunately only able to deal with medical emergencies today. Please only contact the practice for an appointment if you feel you have a medical emergency that cannot wait. If you have an appointment booked, then please keep this appointment. Drs S & J *****
12-Feb-2024	Read Code	SMS text sent to patient	Emergency only appts 13.02.24
17-Jan-2024	Read Code	SMS text sent to patient	Notification of Physio in practice
18-Aug-2023	Read Code	SMS text sent to patient	Summary of text message sent to patient / Dear William Campbell, Your Face to Face appointment with Dr Kenning is on Wednesday 23/08/2023 at 9.40. Kind regards, Drs S & J *****
19-May-2023	Read Code	SMS text sent to patient	Early prescription queries
24-Mar-2023	Recall	Medication review	
14-Mar-2023	Read Code	DNA hospital appointment	Lipid clinic
15-Feb-2023	Read Code	Drug over usage checked	
20-Dec-2022	Read Code	Rep.presc. monitoring NOS	MM LES
20-Dec-2022	Read Code	SMS text sent to patient	Summary of text message sent to patient / Dear «First Name», please contact «Hospital Name» on «Contact Number» at your earliest convenience.
21-Nov-2022	Read Code	SMS text sent to patient	Summary of text message sent to patient / Dear «First Name», please contact «Hospital Name» on «Contact Number» at your earliest convenience.

01-Sept-2022	Read Code	Drug over usage checked
29-Jan-2021	Read Code	SMS text sent to patient Covid Vaccine advice - Surgery not vaccinating under 75s or non shielding registered
28-Dec-2020	Read Code	SMS text sent to patient Advice re entering Health Centre
02-Dec-2020	Read Code	SMS text sent to patient Advice re Covid Vaccine roll out
11-Nov-2020	Read Code	SMS text sent to patient Appt line 811834 tel no update
28-July-2020	Read Code	Rep.presc. monitoring NOS MM LES
01-Jun-2020	Read Code	SMS text sent to patient Covid 19 - unannounced attendance
05-Mar-2020	Read Code	SMS text sent to patient Coronavirus advice
27-Jan-2020	Read Code	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 18:10 on Tuesday 28 of January at Drs S & J *****. If you cannot attend text CANCEL to 078000...
31-July-2019	Read Code	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 09:10 on Thursday 01 of August at Drs S & J *****. If you cannot attend text CANCEL to 078000...
26-July-2019	Read Code	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: Confirmation of your appointment at 09:10 on Thu, 01 of Aug at Drs S & J *****. If unable to attend please send CANCEL to 07800008113.
23-May-2018	Read Code	Obtaining consent MJOG Data Protection Consent reminder
16-May-2018	Read Code	Obtaining consent sent for SMS text consent
14-Mar-2018	Read Code	Rep.presc. monitoring NOS MM LES
07-Jun-2017	Read Code	SMS text sent to patient Minor Ailments Service
09-Jan-2017	Read Code	SMS text sent to patient Register for online prescription ordering.
08-Mar-2016	Read Code	SMS text sent to patient Type: Appointment Reminder Status: Message Delivered Message: Don't forget your appointment at 09:40 on Wednesday 09 of March at Drs S & J *****. If you cannot attend text CANCEL to 078000...
29-Feb-2016	Read Code	SMS text sent to patient Need to update home address details.
17-Feb-2016	Read Code	SMS text sent to patient Mjog sent for email (online prescriptions)
01-July-2015	Read Code	Rep.presc. monitoring NOS MM LES
17-Oct-2014	Read Code	SMS text sent to patient Initial consent-to-SMS recieved (opt-out basis)
03-Feb-2014	Read Code	Fast alcohol screening test 8 /16
11-Dec-2013	Read Code	Equivalent quantities for all medication checked MM LES
11-Dec-2013	Read Code	Rep.presc. monitoring NOS MM LES
28-Oct-2013	Read Code	Depression resolved
28-Jan-2013	Read Code	Current smoker
28-Jan-2013	Read Code	Not interested in stopping smoking
28-Jan-2013	Read Code	Smoking cessation advice
28-Jan-2013	Read Code	Health ed. - smoking
20-Dec-2011	Read Code	Dog bite

21-July-2011	Read Code	Lymphocyte count	1.5 x10 ⁹ /L
21-July-2011	Read Code	Basophil count	0 x10 ⁹ /L
21-July-2011	Read Code	Eosinophil count	0.2 x10 ⁹ /L
21-July-2011	Read Code	Monocyte count	0.5 10 ⁹ /L
21-July-2011	Read Code	Neutrophil count	2.2 x10 ⁹ /L
21-July-2011	Read Code	Mean corpusc. haemoglobin(MCH)	30.5 pg
21-July-2011	Read Code	Mean corpuscular volume (MCV)	92 fl
21-July-2011	Read Code	Serum bicarbonate	20 mmol/l
21-July-2011	Read Code	Serum globulin	34 g/L
21-July-2011	Read Code	Serum total protein	72 g/L
21-July-2011	Read Code	Serum urea level	6.8 mmol/l
21-July-2011	Read Code	Platelet count	185 x10 ⁹ /L
21-July-2011	Read Code	Total white cell count	4.4 x10 ⁹ /L
21-July-2011	Read Code	Haemoglobin estimation	152 g/dL
21-July-2011	Read Code	Serum fasting glucose level	4.9 mmol/L
21-July-2011	Read Code	Serum sodium	139 mmol/l
21-July-2011	Read Code	Serum triglycerides	6.8 mmol/l
21-July-2011	Read Code	Serum potassium	4 mmol/l
21-July-2011	Read Code	Serum HDL cholesterol level	1.1 mmol/l
21-July-2011	Read Code	GFR calculated abbreviated MDRD	60 mL/min
21-July-2011	Read Code	Serum creatinine	86 umol/L
21-July-2011	Read Code	Serum cholesterol/HDL ratio	6.8
21-July-2011	Read Code	Serum cholesterol	7.8 mmol/l
21-July-2011	Read Code	Serum chloride	102 mmol/l
21-July-2011	Read Code	Serum total bilirubin level	10 umol/l
21-July-2011	Read Code	AST serum level	24 IU/L
21-July-2011	Read Code	ALT/SGPT serum level	28 U/l
21-July-2011	Read Code	Serum alkaline phosphatase	72 U/l
21-July-2011	Read Code	Serum albumin	38 g/l
13-Jun-2011	Read Code	Serum bicarbonate	23 mmol/l
13-Jun-2011	Read Code	Serum globulin	34 g/L
13-Jun-2011	Read Code	Serum total protein	73 g/L
13-Jun-2011	Read Code	Serum urea level	6 mmol/l
13-Jun-2011	Read Code	Serum sodium	138 mmol/l

13-Jun-2011	Read Code	Serum triglycerides 11.8 mmol/l
13-Jun-2011	Read Code	Serum potassium 4 mmol/l
13-Jun-2011	Read Code	Serum HDL cholesterol level 1 mmol/l
13-Jun-2011	Read Code	GFR calculated abbreviated MDRD 60 mL/min
13-Jun-2011	Read Code	Serum creatinine 81 umol/L
13-Jun-2011	Read Code	Serum cholesterol 9.9 mmol/l
13-Jun-2011	Read Code	Serum chloride 102 mmol/l
13-Jun-2011	Read Code	Serum total bilirubin level 9 umol/l
13-Jun-2011	Read Code	AST serum level 23 IU/L
13-Jun-2011	Read Code	ALT/SGPT serum level 26 U/l
13-Jun-2011	Read Code	Serum alkaline phosphatase 78 U/l
13-Jun-2011	Read Code	Serum albumin 39 g/l
02-Jun-2011	Read Code	Serum triglycerides 11.7 mmol/l
02-Jun-2011	Read Code	Serum TSH level 0.9 mu/l
02-Jun-2011	Read Code	Serum HDL cholesterol level 1.1 mmol/l
02-Jun-2011	Read Code	Free T4 level 12.8 pmol/l
02-Jun-2011	Read Code	Serum cholesterol 10 mmol/l
20-May-2011	Read Code	Scottish - ethnic category 2001 census
01-Jan-1899	Read Code	Marital Status: Single

Attachments

Scanned Document
19-Jun-2026 AN
Additional:Scanned Document

Filename: WC_refs.pdf
Extension:.tif
Pages:

Hospital use only	Clinic	Day Date	Time	Hospital No.
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REFERRAL LETTER
MEDICAL IN CONFIDENCE
 GGC Colorectal Protocol

Additional Support Needs:
No known ASN requirements

REFERRAL TO	
General Surgery - Colorectal GGC Colorectal	— Consultant / receiving practitioner and/or specialty clinic
Vale of Leven General Hospital North Main Street Alexandria G83 0UA	— Hospital and hospital address Hospital location code. C206H Email address -
Urgency of referral Urgent - Suspected Cancer	
Date of referral 25-Apr-2025	Date sent 28-Apr-2025

PATIENT DETAILS		Patient's address
Surname Campbell		42 Pappert Bonhill ALEXANDRIA Dunbartonshire G83 9LE
Forename(s) William		
Title Mr		
Sex Male		Contact number(s)
Date of birth 02-May-1974		Voice: 01389 605301
CHI no. 0205743056		Voice: 07888 334 400
Area of Residence -		

101036291247C

Unique Care Pathway Number: 101036291247C

REGISTERED GP DETAILS		Practice address
Name Dr Stephen H. Dunn		Dumbarton Health Centre 12 Station Road Dumbarton G82 1PW
GMC code 3476385	GP code 34339	
Practice name Dumbarton Health Centre (18980)		Contact number(s)
Practice code 85090		Voice: 01389 811833
		E-mail: ggc.gp85090clinical@nhs.scot

REFERRING GP DETAILS		Practice address
Name Dr. Onyekachi Nwala		The Health Centre Station Road Dumbarton G82 1PW
GMC code 7804112	GP code 99999	
Practice name Dr Stephen H Dunn & Partners (85090)		Contact number(s)
Practice code 85090		Voice: 01389 811833

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

Description: Rectal Bleeding

Comment: Dear Colleague

I would be grateful for your review and further investigation of Mr William Campbell, a 50 year old gentleman who presents today with diarrhoea and rectal bleeding.

William reports that his bowel has never been right as he has had intermittent diarrhoea for a very long time. However, for the past 2 years, he has intermittent passing of fresh blood when moving his bowel. He has, in the past, been assessed for this and was given suppositories to treat possible haemorrhoids, although no specific haemorrhoid was seen on examination. He has no history of lower tummy pain but he does get epigastric tenderness and reflux for which he recently had an upper GI scope which showed a gastric ulcer. There is no weight loss or fever. He reported that his grandmother had bowel cancer.

On examination, his tummy was soft and non-tender with no palpable mass, however, he declined a PR examination. His Q-fit was returned as 228. He is happy to be referred in order to undergo further investigation.

Kind regards

Dr O Nwaia

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

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

Description	Comment	Date of onset	Date recorded
Essential hypertension	-	25-Apr-2025	25-Apr-2025
Mixed hyperlipidaemia	-	11-May-2016	11-May-2016
Contusion of face, scalp and neck NOS	Contusion-face-front	11-Jul-2010	11-Jul-2010
Acute gastritis	-	12-May-2008	12-May-2008
Alcoholic gastritis	-	02-Feb-2007	02-Feb-2007
[D]Alcohol blood level excessive	-	04-Feb-2003	04-Feb-2003
Glandular fever	-	16-Jun-1999	16-Jun-1999

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Refer to psychologist	29-Jan-2002	29-Jan-2002

Family conditions (All priorities)

Description	Comment	Date of Onset
No FH: Ischaemic heart disease	03-Feb-2014	
No FH: Stroke/TIA	03-Feb-2014	
No FH: Ischaemic heart disease	Disease: SPICE Basic Health Values, priority=2	02-Feb-2007
FH: Diabetes mellitus	Disease: SPICE Basic Health Values, priority=2	02-Feb-2007

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Ramipril Capsules 1.25 mg	56	56 capsule	ONE CAP DAILY	-	25-Apr-2025	25-Apr-2025
Atorvastatin Tablets 20 mg	56	56 TABLET	ONE TO BE TAKEN EACH DAY	-	24-Mar-2022	04-Mar-2025

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Supralip Tablets 160 mg	56	56 tablet	ONE DAILY IN THE MORNING	-	24-Mar-2022	04-Mar-2025
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Recent medication (Any medication issued within last 90 days not shown above)

<u>Drug name</u>	<u>Quantity</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Date started</u>	<u>Date last issued</u>
Lansoprazole Capsules (Gastro-Resistant) 30 mg	56	56 CAPSULE	ONE TO BE TAKEN EACH DAY	-	05-Mar-2025	08-Apr-2025

Blood Pressure

<u>Date Recorded</u>	<u>Systolic</u>	<u>Diastolic</u>
08-Apr-2025	143	99
25-Jul-2019	120	80
20-Feb-2018	124	80
03-Feb-2014	120	70
18-Nov-2013	129	99

Body Measurements

<u>Date Recorded</u>	<u>Height</u>	<u>Weight</u>	<u>BMI</u>
23-Jul-2024	190	133	36.84
26-Jan-2021	190	120	33.24
29-Feb-2016	190	110	30.47
03-Feb-2014	-	110	30.5
14-Mar-2006	190	100	-

Lifestyle Risks and Alerts / Examinations and Investigations

<u>Description/Question</u>	<u>Result/Comment</u>	<u>Date</u>
Moderate smoker - 10-19 cigs/d :		29-Feb-2016
Thinking about stop smoking:		03-Feb-2014
Current smoker:		03-Feb-2014
Cigarette consumption 10 :		03-Feb-2014
Not interested in stopping smoking:		28-Jan-2013
Feels should cut down drinking 1 :		03-Feb-2014
Alcohol intake above rec limit:		03-Feb-2014
Alcohol units per week 25 :		03-Feb-2014
GPPAQ physical act ind: active:		03-Feb-2014

Clinical warnings**Additional Support Needs**

No known ASN requirements

Additional relevant information

Abdominal examination performed: Yes - Normal
 Rectal examination performed: No
 Comments: Exam declined by patient
 QFIT requested?: Result available
 QFIT concentration: 228
 FBC requested?: Yes - result pending
 Urea and Electrolytes requested?: Yes - result pending
 I feel that this patient would tolerate colonoscopy?: Yes
 Is patient aware they are being referred under a suspicion of cancer pathway?: Yes
 OK to send correspondence to home address?: Yes
 Patient will accept any site: Yes
 Patient will accept cancellation or short notice appointment (within 1-6 days): Yes

Referred By: Referring GP
Electronic Attachment Present: No

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) **Date**

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Hospital use only	Clinic	Day Date	Time	Hospital No.
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REFERRAL LETTER
MEDICAL IN CONFIDENCE
 GGC Non Clinical Protocol

Additional Support Needs:
No known ASN requirements

REFERRAL TO	
West Dunbarton Smokefree Team GGC Non Clinical	— Consultant / receiving practitioner and/or specialty clinic
Smokefree Services (GGC) NHS Greater Glasgow & Clyde	— Hospital and hospital address
	Hospital location code. G032G
	Email address -
Urgency of referral Routine	Date sent 12-May-2025
Date of referral 12-May-2025	

PATIENT DETAILS		Patient's address
Surname	Campbell	42 Pappert Bonhill ALEXANDRIA Dunbartonshire G83 9LE
Forename(s)	William	
Title	Mr	
Sex	Male	
Date of birth	02-May-1974	
CHI no.	0205743056	Contact number(s)
Area of Residence	-	Voice: 01389 605301 Voice: 07888 334 400

101036437252P

Unique Care Pathway Number: 101036437252P

REGISTERED GP DETAILS		Practice address
Name	Dr Stephen H. Dunn	Dumbarton Health Centre 12 Station Road Dumbarton G82 1PW
GMC code	3476385	
GP code	34339	
Practice name	Dumbarton Health Centre (18980)	
Practice code	85090	
		Contact number(s)
		Voice: 01389 811833 E-mail: ggc.gp85090clinical@nhs.scot

REFERRING GP DETAILS		Practice address
Name	Dr. Julia Dunn	The Health Centre Station Road Dumbarton G82 1PW
GMC code	3580602	
GP code	35114	
Practice name	Dr Stephen H Dunn & Partners (85090)	
Practice code	85090	
		Contact number(s)
		Voice: 01389 811833

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

Description: Smoking Cessation

Comment: Dear Colleague,

I would be grateful for your input with William Campbell who is 51 year old and keen to stop smoking.

he has a past medical history of Essential Hypertension and smokes 20 cigarettes per day.

Thank you.

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

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

No current medications recorded

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

No recent medications recorded

Blood Pressure

No Blood Pressures Recorded

Body Measurements

No Body Measurements Recorded

Clinical warnings**Additional Support Needs**

No known ASN requirements

Additional relevant information

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

Patient will accept cancellation or short notice appointment (within 1-6 days):Yes

Referred By:Referring GP

Electronic Attachment Present:No

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) Date

Hospital use only	Clinic	Day Date	Time	Hospital No.
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REFERRAL LETTER
MEDICAL IN CONFIDENCE
 2021 GGC General Referral Protocol

Additional Support Needs:
No known ASN requirements

REFERRAL TO	
General Surgery GGC General Referral	— Consultant / receiving practitioner and/or specialty clinic
Vale of Leven General Hospital North Main Street Alexandria G83 0UA	— Hospital and hospital address Hospital location code. C206H Email address -
Urgency of referral Routine	Date sent 23-May-2023
Date of referral 23-May-2023	

PATIENT DETAILS		Patient's address
Surname Campbell		42 Pappert Bonhill ALEXANDRIA Dunbartonshire G83 9LE
Forename(s) William		
Title Mr		
Sex Male		Contact number(s)
Date of birth 02-May-1974		Voice: 01389 605301
CHI no. 0205743056		Voice: 07888334400
Area of Residence -		

101029663449Z

Unique Care Pathway Number: 101029663449Z

REGISTERED GP DETAILS		Practice address
Name Dr Stephen H. Dunn		Dumbarton Health Centre 12 Station Road Dumbarton G82 1PW
GMC code 3476385	GP code 34339	
Practice name Dumbarton Health Centre (18980)		Contact number(s)
Practice code 85090		Voice: 01389 811833 E-mail: ggc.gp85090clinical@nhs.scot

REFERRING GP DETAILS		Practice address
Name Dr. tengku nur fadilla b T Refin		The Health Centre Station Road Dumbarton G82 1PW
GMC code 7635121	GP code 99999	
Practice name Dr Stephen H Dunn & Partners (85090)		Contact number(s)
Practice code 85090		Voice: 01389 811833

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THIRD PARTY COPY

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

Description: Abdominal hernia

Comment: Dear Colleague,

I would be grateful if you could review this gentleman who has had an abdominal hernia since Friday of last week. He has also noted his indigestion has become worse recently. He has a risk factor of being obese and a frequent cough.

On examination today there is no pain on palpation, however, I noted a 3x7cm hernia.

I would be grateful for your input.

Kind regards,

Dr Fadilla Refin

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

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

Description	Comment	Date of onset	Date recorded
Mixed hyperlipidaemia	-	11-May-2016	11-May-2016
Contusion of face, scalp and neck NOS	Contusion-face-front	11-Jul-2010	11-Jul-2010
Acute gastritis	-	12-May-2008	12-May-2008
Alcoholic gastritis	-	02-Feb-2007	02-Feb-2007
[D]Alcohol blood level excessive	-	04-Feb-2003	04-Feb-2003
Glandular fever	-	16-Jun-1999	16-Jun-1999

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Refer to psychologist	29-Jan-2002	29-Jan-2002

Family conditions (All priorities)

Description	Comment	Date of Onset
No FH: Stroke/TIA	03-Feb-2014	
No FH: Ischaemic heart disease	03-Feb-2014	
No FH: Ischaemic heart disease	Disease: SPICE Basic Health Values, priority=2	02-Feb-2007
FH: Diabetes mellitus	Disease: SPICE Basic Health Values, priority=2	02-Feb-2007

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Salbutamol Cfc-free inhaler 100 micrograms/puff	1	1 INHALER	ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY	-	22-May-2023	22-May-2023
Atorvastatin Tablets 20 mg	56	56 TABLET	ONE TO BE TAKEN EACH DAY	-	24-Mar-2022	22-May-2023
Supralip Tablets 160 mg	56	56 tablet	ONE DAILY IN THE MORNING	-	24-Mar-2022	22-May-2023

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
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Amoxicillin Capsules 500 mg	15	15 CAPSULE	ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS	-	22-May- 2023	22-May- 2023
Prednisolone Tablets 5 mg	40	40 TABLET	EIGHT TO BE TAKEN IN THE MORNING	-	22-May- 2023	22-May- 2023

Blood Pressure

<u>Date Recorded</u>	<u>Systolic</u>	<u>Diastolic</u>
25-Jul-2019	120	80
20-Feb-2018	124	80
03-Feb-2014	120	70
18-Nov-2013	129	99
08-Nov-2011	122	84

Body Measurements

<u>Date Recorded</u>	<u>Height</u>	<u>Weight</u>	<u>BMI</u>
26-Jan-2021	190	120	33.24
29-Feb-2016	190	110	30.47
03-Feb-2014	-	110	30.5
14-Mar-2006	190	100	-

Lifestyle Risks and Alerts / Examinations and Investigations

<u>Description/Question</u>	<u>Result/Comment</u>	<u>Date</u>
Moderate smoker - 10-19 cigs/d :		29-Feb-2016
Thinking about stop smoking:		03-Feb-2014
Current smoker:		03-Feb-2014
Cigarette consumption 10 :		03-Feb-2014
Not interested in stopping smoking:		28-Jan-2013
Feels should cut down drinking 1 :		03-Feb-2014
Alcohol intake above rec limit:		03-Feb-2014
Alcohol units per week 25 :		03-Feb-2014
GPPAQ physical act ind: active:		03-Feb-2014

Clinical warnings**Additional Support Needs**

No known ASN requirements

Additional relevant information

OK to send correspondence to home address?:Yes
 Patient will accept any site:Yes
 Patient will accept cancellation or short notice appointment (within 1-6 days):Yes
 Referred By:Referring GP
 Electronic Attachment Present:No

Social circumstances

Ethnic Origin: (White) Scottish

 Signature of referring doctor (or other professional) Date

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

GGC General Referral Protocol (Glasgow, vR15.0)

REFERRAL TO	
Chemical Pathology - Lipid GGC General Referral	Consultant / receiving practitioner and/or specialty clinic
Vale of Leven General Hospital North Main Street Alexandria G83 0UA	Hospital and hospital address Hospital location code. C206H Email address -
Urgency of referral Routine	Date sent 01-Mar-2016
Date of referral 01-Mar-2016	

PATIENT DETAILS		Patient's address
Surname Campbell		42 Pappert Bonhill ALEXANDRIA Dunbartonshire G83 9LE
Forename(s) William		
Title Mr		
Sex Male		Contact number(s)
Date of birth 02-May-1974		Voice: 01389 605301
CHI no. 0205743056		Voice: 07888334400
Area of Residence -		

1010109300157

Unique Care Pathway Number: 1010109300157

REGISTERED GP DETAILS		Practice address
Name Dr Stephen H. Dunn		Dumbarton Health Centre 12 Station Road Dumbarton G82 1PW
GMC code 3476385	GP code 34339	
Practice name Dumbarton Health Centre (18980)		Contact number(s)
Practice code 85090		Voice: 01389 811833
		Facsimile: 01389 811823

REFERRING GP DETAILS		Practice address
Name Dr. Stephen Dunn		The Health Centre Station Road Dumbarton G82 1PW
GMC code 3476385	GP code 34339	
Practice name Dr Stephen H Dunn & Partners (85090)		Contact number(s)
Practice code 85090		Voice: 01389 811833

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

Description: Hypertriglyceridemia & hyperlipidaemia

Comment: Dear Colleague

I would value your assessment of William who is 41 years old and who has hypertriglyceridemia along with hyperlipidaemia. As discussed in previous letters he has failed to attend multiple clinic appointments, but has now resigned to accepting that he does need treatment and is willing to re-engage. He has been poorly compliant on occasions in the past and had stopped his Simvastatin as he was worried of possible memory loss he read about with this medication in a paper. He was subsequently commenced upon Bezalip and has been taking this erratically.

There is a family history of pancreatitis, [REDACTED] and he is aware of the risks associated with his condition. He is a smoker of 10 per day and drinks approximately 3 bottles of red wine and approximately 28 cans of beer per week. His weight is 18 stones and he measures 6ft 3 giving him a BMI of 30.5. He is aware of his risk factors and is willing to address these.

I have encouraged him to take his Bezafibrate regularly now and I have restarted his statin. I feel it would be helpful to have him reviewed by yourself.

Kind regards

Dr Stephen Dunn

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

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

Description	Comment	Date of onset	Date recorded
Contusion of face, scalp and neck NOS	Contusion-face-front	11-Jul-2010	11-Jul-2010
Acute gastritis	-	12-May-2008	12-May-2008
Alcoholic gastritis	-	02-Feb-2007	02-Feb-2007
[D]Alcohol blood level excessive	-	04-Feb-2003	04-Feb-2003
Glandular fever	-	16-Jun-1999	16-Jun-1999

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Refer to psychologist	29-Jan-2002	29-Jan-2002

Family conditions (All priorities)

Description	Comment	Date of Onset
No FH: Stroke/TIA	03-Feb-2014	
No FH: Ischaemic heart disease	03-Feb-2014	
No FH: Ischaemic heart disease	Disease: SPICE Basic Health Values, priority=2	02-Feb-2007
FH: Diabetes mellitus	Disease: SPICE Basic Health Values, priority=2	02-Feb-2007

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Atorvastatin Tablets 10 mg	56	56 TABLET	ONE TO BE TAKEN EACH DAY	-	29-Feb-2016	29-Feb-2016

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Itraconazole Capsules 100			TWO CAPS		29-Feb-	

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mg	14	14 capsule	DAILY	-	2016	29-Feb-2016
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Blood Pressure

Date Recorded	Systolic	Diastolic
03-Feb-2014	120	70
18-Nov-2013	129	99
08-Nov-2011	122	84
02-Jun-2011	120	82
14-Mar-2006	120	80

Body Measurements

Date Recorded	Height	Weight	BMI
29-Feb-2016	190	110	30.47
03-Feb-2014	-	110	30.5
14-Mar-2006	190	100	-

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Moderate smoker - 10-19 cigs/d :		29-Feb-2016
Thinking about stop smoking:		03-Feb-2014
Current smoker:		03-Feb-2014
Cigarette consumption 10 :		03-Feb-2014
Not interested in stopping smoking:		28-Jan-2013
Feels should cut down drinking 1 :		03-Feb-2014
Alcohol intake above rec limit:		03-Feb-2014
Alcohol units per week 25 :		03-Feb-2014
GPPAQ physical act ind: active:		03-Feb-2014

Clinical warnings

Additional relevant information

Administrative information

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

Patient will accept cancellation or short notice appointment (within 1-6 days):Yes

Referred By:Referring GP

Electronic Attachment Present:No

Social circumstances

Ethnic Origin: (White) Scottish

 Signature of referring doctor (or other professional) Date

Hospital use only	Clinic	Day Date	Time	Hospital No.
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REFERRAL LETTER
MEDICAL IN CONFIDENCE
 GGC Direct Access Spirometry

Additional Support Needs:
No known ASN requirements

REFERRAL TO	
Spirometry GGC Direct Access Spirometry	— Consultant / receiving practitioner and/or specialty clinic
Respiratory Direct Access Services NHS Greater Glasgow & Clyde	— Hospital and hospital address
	Hospital location code. G035G
	Email address -
Urgency of referral Routine	Date sent 23-May-2023
Date of referral 23-May-2023	

PATIENT DETAILS		Patient's address
Surname	Campbell	42 Pappert Bonhill ALEXANDRIA Dunbartonshire G83 9LE
Forename(s)	William	
Title	Mr	
Sex	Male	
Date of birth	02-May-1974	
CHI no.	0205743056	Contact number(s)
Area of Residence	-	Voice: 01389 605301 Voice: 07888334400

101029664025G

Unique Care Pathway Number: 101029664025G

REGISTERED GP DETAILS		Practice address
Name	Dr Stephen H. Dunn	Dumbarton Health Centre 12 Station Road Dumbarton G82 1PW
GMC code	3476385	
GP code	34339	
Practice name	Dumbarton Health Centre (18980)	
Practice code	85090	
		Contact number(s)
		Voice: 01389 811833 E-mail: ggc.gp85090clinical@nhs.scot

REFERRING GP DETAILS		Practice address
Name	Dr. tengku nur fadilla b T Refin	The Health Centre Station Road Dumbarton G82 1PW
GMC code	7635121	
GP code	99999	
Practice name	Dr Stephen H Dunn & Partners (85090)	
Practice code	85090	
		Contact number(s)
		Voice: 01389 811833

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

Description: COPD

Comment: Dear Colleague,

I would be grateful if you could review this gentleman.

Mr William Campbell is a 49 year old gentleman who is having issues with a cough for the last few years now. However, he has noted a wheeze recently. He is a smoker, smokes 5 roll ups a day for 30+ years.

On examination, there is bilateral wheeze. I would be grateful if you could perform spirometry to exclude COPD for this gentleman.

Your help is greatly appreciated.

Yours sincerely,

Dr Fadilla Refin

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

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

Description	Comment	Date of onset	Date recorded
Mixed hyperlipidaemia	-	11-May-2016	11-May-2016
Contusion of face, scalp and neck NOS	Contusion-face-front	11-Jul-2010	11-Jul-2010
Acute gastritis	-	12-May-2008	12-May-2008
Alcoholic gastritis	-	02-Feb-2007	02-Feb-2007
[D]Alcohol blood level excessive	-	04-Feb-2003	04-Feb-2003
Glandular fever	-	16-Jun-1999	16-Jun-1999

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Refer to psychologist	29-Jan-2002	29-Jan-2002

Family conditions (All priorities)

Description	Comment	Date of Onset
No FH: Stroke/TIA	03-Feb-2014	
No FH: Ischaemic heart disease	03-Feb-2014	
No FH: Ischaemic heart disease	Disease: SPICE Basic Health Values, priority=2	02-Feb-2007
FH: Diabetes mellitus	Disease: SPICE Basic Health Values, priority=2	02-Feb-2007

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Salbutamol Cfc-free inhaler 100 micrograms/puff	1	1 INHALER	ONE OR TWO PUFFS TO BE INHALED WHEN REQUIRED UP TO FOUR TIMES A DAY	-	22-May-2023	22-May-2023
Atorvastatin Tablets 20 mg	56	56 TABLET	ONE TO BE TAKEN EACH DAY	-	24-Mar-2022	22-May-2023
Supralip Tablets 160 mg	56	56 tablet	ONE DAILY IN THE MORNING	-	24-Mar-2022	22-May-2023

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date	Date last
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Amoxicillin Capsules 500 mg	15	15 CAPSULE	ONE TO BE TAKEN THREE TIMES A DAY FOR 5 DAYS	-	<u>started</u> 22-May-2023	<u>issued</u> 22-May-2023
Prednisolone Tablets 5 mg	40	40 TABLET	EIGHT TO BE TAKEN IN THE MORNING	-	22-May-2023	22-May-2023

Blood Pressure

<u>Date Recorded</u>	<u>Systolic</u>	<u>Diastolic</u>
25-Jul-2019	120	80
20-Feb-2018	124	80
03-Feb-2014	120	70
18-Nov-2013	129	99
08-Nov-2011	122	84

Body Measurements

<u>Date Recorded</u>	<u>Height</u>	<u>Weight</u>	<u>BMI</u>
26-Jan-2021	190	120	33.24
29-Feb-2016	190	110	30.47
03-Feb-2014	-	110	30.5
14-Mar-2006	190	100	-

Lifestyle Risks and Alerts / Examinations and Investigations

<u>Description/Question</u>	<u>Result/Comment</u>	<u>Date</u>
Weight (kg):	120	-
Height (m):	190	-
BMI (Weight / Height):	33.24	-
Moderate smoker - 10-19 cigs/d :		29-Feb-2016
Thinking about stop smoking:		03-Feb-2014
Current smoker:		03-Feb-2014
Cigarette consumption 10 :		03-Feb-2014
Not interested in stopping smoking:		28-Jan-2013
Feels should cut down drinking 1 :		03-Feb-2014
Alcohol intake above rec limit:		03-Feb-2014
Alcohol units per week 25 :		03-Feb-2014
GPAAQ physical act ind: active:		03-Feb-2014

Clinical warnings

Additional Support Needs

No known ASN requirements

Additional relevant information

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

Patient will accept cancellation or short notice appointment (within 1-6 days):Yes

Referred By:Referring GP

Electronic Attachment Present:No

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) **Date**

THIRD PARTY COPY

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NHS Confidential: Personal data about a patient



SERVICE REFERRAL FORM ☒ **Keep Well** ☐ **Non Keep Well**

CLIENT'S PERSONAL DETAILS (please tick)

NAME	CHI: 0205743055 02/05/1974 M	
ADDRESS	CAMPBELL, 175 Croydon, G83 9DY William	
POSTCODE	01389 298677	
TEL	F. Connolly, Dr. Stephen H. Dunn, G82 1PW 03/02/2014 12:28 Practice: 850900	CHI NUMBER
HOME/MOBILE		DoB

REFERRER'S DETAILS

NAME	Fiona Connolly RN		
PRACTICE NAME	DR. S+T Dunn		
ADDRESS	Station Rd Dunbarton		
POSTCODE	G82 1PW	TELEPHONE	01389 811833

SERVICE REQUIRED

SMOKING

Smoking Co-ordinator ☒

HEALTHY EATING

Eat Up ☐

STRESS MANAGEMENT

Stepping Stones ☐

ALCOHOL

DACA ☐

Leven Addiction Service ☐

Clydebank Addictions ☐

FINANCIAL INCLUSION

Welfare Rights ☐

LITERACY

CLAN West Dun ☐

EMPLOYABILITY

Job Centre Plus ☐

If a client is being referred to more than one service please use a separate form for each service.

PERSONAL DECLARATION

I have discussed personal information about my circumstances and understand that in being referred to the above organisation I agree for them to exchange relevant information I have provided and communicate with each other about my case. I have provided my telephone number and address and give my permission for these organisations to contact me at home if necessary.

I understand that my participation in the Keep Well project is voluntary and that I am free to withdraw at any time, without giving any reason, without my medical care or legal rights being affected.

I agree to have this information I provide recorded for this project.

I agree for anonymous information about me to be given to the evaluation team to compile records on the success of the project for the Scottish Government.

CLIENT'S NAME	WILLIAM CAMPBELL	DATE	3-14	SIGNATURE	<i>William Campbell</i>
REFERRER'S NAME	FIONA CONNOLLY	DATE	3-2-14	SIGNATURE	<i>Fiona Connolly</i>

NHS Confidential: Personal data about a patient

West Dunbartonshire

Community Health Partnership



SERVICE REFERRAL FORM ☒ Keep Well ☐ Non Keep Well

CLIENT'S PERSONAL DETAILS

(please tick)

NAME

ADDRESS

POSTCODE

TEL

HOME/MOBILE

CHI: 0205743056 02/05/1974 M
 CAMPBELL William
 178 Caston, G83 9DY
 01389 298677
 F Connolly, Dr. Stephen H. Dunn : G82 1PW
 03/02/2014 12:25 Practice: 050000

CHI NUMBER

DoB

REFERRER'S DETAILS

NAME

PRACTICE NAME

ADDRESS

POSTCODE

TELEPHONE

SERVICE REQUIRED

SMOKING

Stop Smoking Team

HEALTHY EATING

Eat Up

STRESS MANAGEMENT

Stepping Stones

ALCOHOL

DACA

Leven Addiction Service

Clydebank Addictions

FINANCIAL INCLUSION

Welfare Rights

LITERACY

CLAN

EMPLOYABILITY

Job Centre Plus

If a client is being referred to more than one service please use a separate form for each service.

PERSONAL DECLARATION

I have discussed personal information about my circumstances and understand that in being referred to the above organisation I agree for them to exchange relevant information I have provided and communicate with each other about my case. I have provided my telephone number and address and give my permission for these organisations to contact me at home if necessary.

I understand that my participation in the Keep Well project is voluntary and that I am free to withdraw at any time, without giving any reason, without my medical care or legal rights being affected.

I agree to have this information I provide recorded for this project.

I agree for anonymous information about me to be given to the evaluation team to compile records on the success of the project for the Scottish Government.

CLIENT'S NAME

William Campbell

DATE

3/2/14

SIGNATURE

[Signature]

REFERRER'S NAME

Hona Connolly

DATE

3/2/14

SIGNATURE

[Signature]

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

GGC General Referral Protocol (Glasgow, vR15.0)

REFERRAL TO	
Trauma and Orthopaedic Surgery GGC General Referral	Consultant / receiving practitioner and/or specialty clinic
Vale of Leven General Hospital North Main Street Alexandria G83 0UA	Hospital and hospital address Hospital location code. C206H Email address -
Urgency of referral Routine	Date sent 01-Mar-2016
Date of referral 01-Mar-2016	

PATIENT DETAILS		Patient's address
Surname Campbell		42 Pappert Bonhill ALEXANDRIA Dunbartonshire G83 9LE
Forename(s) William		
Title Mr		
Sex Male		Contact number(s)
Date of birth 02-May-1974		Voice: 01389 605301
CHI no. 0205743056		Voice: 07888334400
Area of Residence -		

101010929651S

Unique Care Pathway Number: 101010929651S

REGISTERED GP DETAILS		Practice address
Name Dr Stephen H. Dunn		Dumbarton Health Centre 12 Station Road Dumbarton G82 1PW
GMC code 3476385	GP code 34339	
Practice name Dumbarton Health Centre (18980)		Contact number(s)
Practice code 85090		Voice: 01389 811833
		Facsimile: 01389 811823

REFERRING GP DETAILS		Practice address
Name Dr. Stephen Dunn		The Health Centre Station Road Dumbarton G82 1PW
GMC code 3476385	GP code 34339	
Practice name Dr Stephen H Dunn & Partners (85090)		Contact number(s)
Practice code 85090		Voice: 01389 811833

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

Description: Triggering finger

Comment: Dear Colleague

I would value your assessment of this 41 year old gentleman who presents with triggering of his right middle finger, present for around a year and a half and worsening, particularly in the morning when he is waking. He has previously worked with vibrating heavy machinery which he feels may have accounted for the problem, although he is now working as a security guard.

Examination reveals no evidence of Dupuytren's with no thickening of the tendons. Certainly there is trigger occurring on examination and I would be grateful for your advice with regards to treatment.

Yours sincerely

Dr Stephen Dunn

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

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

Description	Comment	Date of onset	Date recorded
Contusion of face, scalp and neck NOS	Contusion-face-front	11-Jul-2010	11-Jul-2010
Acute gastritis	-	12-May-2008	12-May-2008
Alcoholic gastritis	-	02-Feb-2007	02-Feb-2007
[D]Alcohol blood level excessive	-	04-Feb-2003	04-Feb-2003
Giandular fever	-	16-Jun-1999	16-Jun-1999

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Refer to psychologist	29-Jan-2002	29-Jan-2002

Family conditions (All priorities)

Description	Comment	Date of Onset
No FH: Stroke/TIA	03-Feb-2014	
No FH: Ischaemic heart disease	03-Feb-2014	
No FH: Ischaemic heart disease	Disease: SPICE Basic Health Values, priority=2	02-Feb-2007
FH: Diabetes mellitus	Disease: SPICE Basic Health Values, priority=2	02-Feb-2007

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Atorvastatin Tablets 10 mg	56	56 TABLET	ONE TO BE TAKEN EACH DAY	-	29-Feb-2016	29-Feb-2016

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Itraconazole Capsules 100 mg	14	14 capsule	TWO CAPS DAILY	-	29-Feb-2016	29-Feb-2016

Blood Pressure

Date Recorded Systolic Diastolic

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03-Feb-2014	120	70
18-Nov-2013	129	99
08-Nov-2011	122	84
02-Jun-2011	120	82
14-Mar-2006	120	80

Body Measurements

Date Recorded	Height	Weight	BMI
29-Feb-2016	190	110	30.47
03-Feb-2014	-	110	30.5
14-Mar-2006	190	100	-

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Moderate smoker - 10-19 cigs/d :		29-Feb-2016
Thinking about stop smoking:		03-Feb-2014
Current smoker:		03-Feb-2014
Cigarette consumption 10 :		03-Feb-2014
Not interested in stopping smoking:		28-Jan-2013
Feels should cut down drinking 1 :		03-Feb-2014
Alcohol intake above rec limit:		03-Feb-2014
Alcohol units per week 25 :		03-Feb-2014
GPPAQ physical act ind: active:		03-Feb-2014

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

OK to send correspondence to home address?:Yes
 Patient will accept any site:Yes
 Patient will accept cancellation or short notice appointment (within 1-6 days):Yes
 Referred By:Referring GP
 Electronic Attachment Present:No

Social circumstances

Ethnic Origin: (White) Scottish

 Signature of referring doctor (or other professional) Date

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

GGC General Referral Protocol (Glasgow, vR15.0)

REFERRAL TO	
General Medicine GGC General Referral	— Consultant / receiving practitioner and/or specialty clinic
Vale of Leven General Hospital North Main Street Alexandria G83 0UA	— Hospital and hospital address Hospital location code: C206H Email address: -
Urgency of referral ROUTINE	Date sent 24-Oct-2014
Date of referral 24-Oct-2014	

PATIENT DETAILS		Patient's address
Surname	Campbell	176 Ladyton Bonhill Dumbarton G83 9DY Contact number(s) Voice: 01389 298677 Voice: 07888334400
Forename(s)	William	
Title	Mr	
Sex	Male	
Date of birth	02-May-1974	
CHI no.	0205743056	
Area of Residence	-	

1010081129788	Unique Care Pathway Number: 1010081129788
-----------------	---

REGISTERED GP DETAILS		Practice address
Name	Dr Stephen H. Dunn	Dumbarton Health Centre 12 Station Road Dumbarton G82 1PW Contact number(s) Voice: 01389 811833 Facsimile: 01389 811823
GMC code	3476385 GP code 34339	
Practice name	Dumbarton Health Centre (18980)	
Practice code	85090	

REFERRING GP DETAILS		Practice address
Name	Dr. Stephen Dunn	The Health Centre Station Road Dumbarton G82 1PW Contact number(s) Voice: 01389 811833
GMC code	3476385 GP code 34339	
Practice name	Dr Stephen H Dunn & Partners (85090)	
Practice code	85090	

file:///P:/PCTI/DOCMAN7/DATA_S1/Document/DMEDOC01/00003900/00244843.... 19/06/2026

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

Description: Lipid Clinic

Comment: Dear Dr Series,

I would be very grateful if you could arrange to see this 40 year old gentleman who attended your clinic in 2011 with a mixed hyperlipidaemia. He was commenced on Bezafibrate 400 mg daily and was last seen in the Clinic in November 2013 when his triglyceride was still 9.2. At that point it was planned for him to be seen in 6 months before any decision regarding medication changes were made. Unfortunately Mr Campbell missed his two subsequent appointments. He attended today for an unrelated reason. He requested re-referral to the clinic.

It also appears that he has not been taking his Bezafibrate on a regular basis.

He has had no recent checks and I have suggested he make an appointment to do this 4-6 weeks after starting back on the Bezafibrate.

Yours sincerely

Dr Irene Calderwood

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

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

Description	Comment	Date of onset	Date recorded
Contusion of face, scalp and neck NOS	Contusion-face-front	11-Jul-2010	11-Jul-2010
Acute gastritis	-	12-May-2008	12-May-2008
Alcoholic gastritis	-	02-Feb-2007	02-Feb-2007
[D]Alcohol blood level excessive	-	04-Feb-2003	04-Feb-2003
Giandular fever	-	16-Jun-1999	16-Jun-1999

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Refer to psychologist	29-Jan-2002	29-Jan-2002

Family conditions (All priorities)

Description	Comment	Date of Onset
No FH: Ischaemic heart disease	03-Feb-2014	
No FH: Stroke/TIA	03-Feb-2014	
No FH: Ischaemic heart disease	Disease: SPICE Basic Health Values, priority=2	02-Feb-2007
FH: Diabetes mellitus	Disease: SPICE Basic Health Values, priority=2	02-Feb-2007

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Bezafibrate M/R tablets 400 mg	56	56 tablet	1 Tab Daily	-	30-May-2013	23-Oct-2014

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Naproxen Tablets 500 mg	56	56 TABLET	ONE TO BE TAKEN TWICE A DAY	-	23-Oct-2014	23-Oct-2014

Lifestyle Risks and Alerts / Examinations and Investigations

file:///P:/PCTI/DOCMAN7/DATA_S1/Document/DMEDOC01/00003900/00244843.... 19/06/2026

<u>Description/Question</u>	<u>Result/Comment</u>	<u>Date</u>
Thinking about stop smoking:		03-Feb-2014
Current smoker:		03-Feb-2014
Cigarette consumption 10 :		03-Feb-2014
Not interested in stopping smoking:		28-Jan-2013
Current smoker:		28-Jan-2013
Feels should cut down drinking 1 :		03-Feb-2014
Alcohol intake above rec limit:		03-Feb-2014
Alcohol units per week 25 :		03-Feb-2014
GPPAQ physical act ind: active:		03-Feb-2014

Clinical warnings

Additional relevant information

Administrative information

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

Patient will accept cancellation or short notice appointment (within 1-6 days):Yes

Patient has disability or requires wheelchair access:No

Referred By:Referring GP

Electronic Attachment Present:No

Social circumstances

Ethnic Origin: (White) Scottish

Signature of referring doctor (or other professional) **Date**

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

REFERRAL LETTER

MEDICAL IN CONFIDENCE

REFERRAL TO	
Trauma and Orthopaedic Surgery C8 AC General Referral	Consultant / receiving practitioner and/or specialty clinic
Vale of Leven General Hospital	Hospital and hospital address
	Hospital location code. C206H
	Email address -
Urgency of referral	ROUTINE
Date of referral	19-Jun-2009
Date sent	19-Jun-2009

PATIENT DETAILS		Patient's address
Surname	Campbell	4/4 Merkins Ave
Forename(s)	William	BELLSMYRE
Title	Mr	DUMBARTON
Sex	Male	G82 3EB
Date of birth	02-May-1974	Contact number(s)
CHI no.	0205743056	Voice: 07535669410
		Voice: 01389 600842

REGISTERED GP DETAILS		Practice address
Name	Dr S Dunn	Dumbarton Health Centre
GMC code	3476385	12 Station Road
GP code	C34339	Dumbarton
Practice name	Dr S Dunn and Partners	G82 1PW
Practice code	85090	Contact number(s)
		Voice: 01389 811833
		Facsimile: 01389 811823

REFERRING GP DETAILS		Practice address
Name	Dr. Stephen Dunn	Station Road
GMC code	3476385	Dumbarton
GP code	34339	Contact number(s)
Practice name	The Health Centre (85090)	Voice: 01389 811833
Practice code	85090	

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CLINICAL INFORMATION**History of presenting complaint / examination findings / investigation results****Presenting complaint**

Description: nerve compression

Comment: Dear Doctor,

I would be grateful if you would see this 35 year old man who has been having increasing symptoms of persistent medium nerve compression affecting both limbs, worse at night but now occurring also during the day this strikes to me of an element of cubital tunnel or carpal tunnel syndrome and I would value your assessment with regards confirmation of this with nerve conduction studies and potential surgical correction.

Yours sincerely,

Stephen Dunn M.B. Ch.B.

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Current non-smoker:		14-Mar-2006
Current smoker:		20-Mar-2008
Ex smoker:		02-Feb-2007

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

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

Description	Modifier	Extension	Date of onset
Acute gastritis	-	-	12-May-2008
Alcoholic gastritis	-	-	02-Feb-2007
Summarised by Dr J McGlinchey	-	-	08-May-2006
[D]Alcohol blood level excessive	-	-	04-Feb-2003
Glandular fever	-	-	16-Jun-1999

Past procedures (High and medium priority - all)

Description	Modifier	Date performed
Refer to psychologist	-	29-Jan-2002

Family conditions (All priorities)

Description	Modifier	Extension	Date Recorded
No FH: Ischaemic heart disease	-	-	02-Feb-2007
FH: Diabetes mellitus	-	-	02-Feb-2007

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued	Duration
Simvastatin	56	TABS 40MG	1 Tab	At night	18-Feb-2009	-	0 Days

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued	Duration
Trimovate	30	CREAM	Apply	morning and night	18-Jun-2009	-	0 Days
Acrivastine	28	CAPS 8MG	1 Cap	Daily	02-Jun-2009	-	0 Days
Zopiclone	7	TABS 3.75MG	1 Tab	At night	08-Apr-2009	-	0 Days
Simvastatin	28	TABS 40MG	1 Tab	At night	16-Jan-2009	-	0 Days

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Miconazole Nitrate	1	Powder 100g SPRAY 0.16%	-	-	07-Jan-2009	-	0 Days
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Clinical warnings

Additional relevant information

Administrative information

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

Patient will accept cancellation or short notice appointment (within 1-21 days):Yes

Patient has disability or requires wheelchair access:No

Referred By:Referring GP

Electronic Attachment Present:No

Signature of referring doctor (or other professional) **Date**

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

REFERRAL LETTER
MEDICAL IN CONFIDENCE
**GGC Single Stylesheet - [standard|dental|diagnostic
imaging]**
GGC General Referral Protocol (Glasgow, vR13.0)

REFERRAL TO

General Medicine
GGC General Referral

— **Consultant / receiving
practitioner and/or specialty clinic**

Vale of Leven General Hospital
North Main Street
Alexandria
G83 0UA

— **Hospital and hospital address**

Hospital location code.

C206H

Email address

Urgency of referral

ROUTINE

Date of referral

13-Jun-2011

Date sent

14-Jun-2011

PATIENT DETAILS

Surname

Campbell

Forename(s)

William

Title

Mr

Sex

Male

Date of birth

02-May-1974

CHI no.

0205743056

**Area of
Residence**

-

Patient's address

4/4 Merkins Ave
BELLSMYRE
DUMBARTON
G82 3EB

Contact number(s)

Voice: 07888334400

101002122201H

Unique Care Pathway Number: 101002122201H

REGISTERED GP DETAILS

Name

Dr Stephen H. Dunn

GMC code

3476385

GP code

34339

Practice name

Dumbarton Health Centre (18980)

Practice code

85090

Practice address

Dumbarton Health Centre
12 Station Road
Dumbarton

Contact number(s)

Voice: 01389 811833

Facsimile: 01389 811823

REFERRING GP DETAILS

Name

Dr. Stephen Dunn

GMC code

3476385

GP code

34339

Practice name

Dr Stephen H Dunn & Partners (85090)

Practice code

85090

Practice address

The Health Centre
Station Road
Dumbarton

Contact number(s)

Voice: 01389 811833

file:///P:/PCTI/DOCMAN7/DATA_S1/Document/DMEDOC01/00003900/00135596.... 19/06/2026

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

Description: Lipid Clinic

Comment: Dear Dr Series

I would be grateful for your input with this 37 year old gentleman who has kind of markedly raised lipids with cholesterol of 10.0, triglycerides 11.7 and hdl of 1.1. He was previously prescribed a statin, but stopped this as he was concerned about potential side effects although, I have reassured him of this and encouraged him to restart his Simvastatin at 40 mg.

I suspect however he may require more aggressive therapy and input from yourself would be helpful.

Yours sincerely

Dr Stephen Dunn

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

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

Description	Comment	Date of onset	Date recorded
Contusion of face, scalp and neck NOS	Contusion-face-front	11-Jul-2010	11-Jul-2010
Acute gastritis	-	12-May-2008	12-May-2008
Alcoholic gastritis	-	02-Feb-2007	02-Feb-2007
[D]Alcohol blood level excessive	-	04-Feb-2003	04-Feb-2003
Glandular fever	-	16-Jun-1999	16-Jun-1999

Past procedures (High and medium priority - all)

Description	Date performed	Date recorded
Refer to psychologist	29-Jan-2002	29-Jan-2002

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

No current medications recorded

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

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Trimovate Cream	30	30 GRAM	APPLY TO THE AFFECTED AREA UP TO FOUR TIMES DAILY	-	02-Jun-2011	02-Jun-2011
Fludoxacillin Capsules 500 mg	28	28 CAPSULE	ONE TO BE TAKEN FOUR TIMES A DAY	-	20-May-2011	20-May-2011

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Cigarette smoker 20 Cigarettes/day:		02-Jun-2011
Ex smoker:	Disease: SPICE Smoking, priority=2	03-Dec-2010
Current smoker:	Disease: SPICE Smoking, priority=2	20-Mar-2008
Ex smoker:	Disease: SPICE Basic Health Values, priority=2	02-Feb-2007
Current non-smoker:	z Smoker\$\$ Status.cdm - No Action Required	14-Mar-2006

Clinical warnings

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Additional relevant information**Administrative information**

OK to send correspondence to home address?:Yes

Patient will accept any site:Yes

Patient will accept cancellation or short notice appointment (within 1-6 days):Yes

Patient has disability or requires wheelchair access:No

Referred By:Referring GP

Electronic Attachment Present:No

Signature of referring doctor (or other professional) Date

Hospital Only Use	Clinic	Day Date	Time	Hospital No
Referral To: <u>Consultant</u> Mr Mike Mellon <u>Speciality Clinic</u> Alcohol Addiction <u>Hospital</u> Dumbarton Joint Hospital <u>Hospital No:</u> Patient Attended Hospital Before Name of Hospital Year of Attendance If patients name or address has changed since -		Referring GP Details GP Registrar Dumbarton Health Centre Station Road Dumbarton G82 1PW <u>Email address:</u> administrator@GP85051.ac-hb.scot.nhs.uk <u>Practice Code:</u> C85090 <u>GP Identifier</u> C34339 <u>Telephone No:</u> 01389 811833 <u>Fax No:</u> 01389 811823		

Patient Details	
<u>Surname</u> Campbell Title: Mr <u>Forename:</u> William Sex: Male <u>Date of Birth:</u> 02/05/1974 CHI No: 0205743056	<u>Patient Address:</u> 4/4 Merkins Ave BELLSMYRE DUMBARTON <u>Post Code</u> G82 3EB <u>Telephone No:</u> 07988 561 830
<u>Type Of Appointment:-</u> Routine	

Dear Colleague

I saw this 34 year old man in surgery today. He has a long history of drinking alcohol to excess and has always been keen to try and manage this himself. However he came to be today saying his partner has been concerned as to how much he is drinking and he has admitted himself that his intake has started to creep up. He drinks now about one to two bottles of wine per night. He has a lot of stress regarding his son at the moment; he feels that this is not helping.

He tells me that when he drinks he does not get drunk, even when he drinks two bottles of wine. He gets no withdrawal symptoms and does not drink in the morning. He some times has a couple of pints at lunchtime. He is a forklift truck driver, but does not admit to this interfering with his work. He has never had any alcoholic seizures. He is keen himself to cut down his drinking and feels that now is the time to seek help. We would appreciate your input.

Yours sincerely

Dr Kirsty Miller

History of presenting complaint:

<u>Past Medical History</u> 29/01/2002 Refer to psychologist (8H7T.) 04/02/2003 [D]Alcohol blood level excessive (R103.) 02/02/2007 Alcoholic gastritis (J153.) 12/05/2008 Acute gastritis (J150.)	<u>Medication</u> Simvastatin tabs 40mg 1 tab at night <u>Recent Medication:</u> Simvastatin tabs 40mg 1 tab at night (commenced 16/01/2009) Miconazole Nitrate powder 100g spray 0.16% (commenced 07/01/2009)
<u>Other Comments:</u>	<u>Signature:</u> Date: 25 March 2009

 Campbell, William, 0205743056, 02/05/1974 Mr Mike Mellon Alcohol Addiction Dumbarton Joint Hospital Routine
 LG \Gpssql02\85090Documents\GP Registrar\Campbell, William 2009 03 25 #1.doc

Scanned Document
 19-Jun-2026 AN
 Additional:Scanned Document

Filename: WC_10_Hist.pdf
 Extension:.tif
 Pages:

NHS Confidential: Personal data about a patient

ARGYLL & CLYDE HEALTH BOARD

TREATMENT CARD

DOCTOR *W. Angus*NAME: *William Campbell* D.O.B. *2/5/74*ADDRESS: *25 Bellona Ave
Dunbart.*

DATE	TREATMENT	PROGRESS NOTES	Nurses Initials
<i>24/2/94</i>	<i>Pres. dem as dem. grant met G. & J. Flanagan</i>		
	<i>Done with grassed remaining moist. Most of it has been Flanagane & J. Flanagan applied to a small moist area chore tomorrow</i>		
<i>25/2/94</i>	<i>D. TUN</i>		<i>G. Flanagan</i>

DOCTOR

Bawlow:

ADDRESS: 25 Bedwyn Avenue / Haverhill

[illegible]

Dear Patient

12/6/96

We would like to invite you to make an appointment for a brief medical check, which we are obliged to offer you under government ruling. Please complete this questionnaire and make an appointment to see a doctor. Your registration will not be complete until you have seen the doctor

SURNAME FORENAMES
 CAMPBELL WILLIAM THOMAS
 ADDRESS 38 HOLLINGBURY PARK AVE
 POST CODE TELEPHONE NO: 558463
 DATE OF BIRTH OCCUPATION NAT HEALTH NO:
 02-05-74 PARTSMAN
 YOUR HEIGHT (approx) YOUR WEIGHT (approx)
 6'3"
 DO YOU TAKE REGULAR EXERCISE? YES / ~~NO~~ IF YES WHAT
 TYPE OF EXERCISE AND HOW OFTEN?
 WALK
 HOW MUCH DO YOU SMOKE A DAY? HOW MUCH ALCOHOL DO YOU DRINK
 A WEEK?
 10-20 NOT SURE
 WHEN WAS YOUR LAST TETANUS INJECTION? DO YOU HAVE ANY ALLERGIES?
 Don't know HAYFEVER
 DO YOU TAKE ANY REGULAR MEDICATION? PLEASE LIST
 NO
 PLEASE LIST ANY MAJOR ILLNESSES OR OPERATIONS
 NONE

P.T.O

HAVE YOU, OR ANY MEMBER OF YOUR FAMILY HAD ANY OF THE
FOLLOWING? IF YES, PLEASE STATE WHO. *DONT KNOW*

ASTHMA

DIABETES

HIGH BLOOD PRESSURE

HEART DISEASE

STROKE

TUBERCULOSIS

CANCER

FOR WOMEN

WHEN WAS YOUR LAST CERVICAL SMEAR

WHAT WAS THE RESULT

WHO PERFORMED THE SMEAR

DO YOU USE ANY CONTRACEPTION?

WHAT SORT?

HOW MANY PREGNANCIES HAVE YOU HAD?

PLEASE LIST DATES AND NAMES OF CHILDREN

FOR CHILDREN

IMMUNISATIONS. HAVE YOU HAD ALL THE NORMAL CHILDHOOD JABS
SO FAR?

	DATE	GP OR CLINIC?
TRIPLE (including WHOOPING COUGH)		
POLIO		
M.M.R.		
HIB		

Thank you for completing the questions

NHS Confidential: Personal data about a patient

APP Vicky 24/8/01
© 1-45

LOMOND HEALTHCARE NHS TRUST

Treatment Card

Doctor: *M. Loh*

Name: *William Campbell* DOB: *2/5/74*

Address: *4 Canman View*
D/Boston

Date	Treatment	Progress Notes	Nurses in
<i>15/01/01</i>	<i>Please give Hep B</i> <i>accelerated course mthly.</i>		
	<i>1st hep B. ENG 29 770A4</i>		<i>Albion</i>
<i>13/3/01</i>	<i>2nd hep B. ENG 29 770A4</i>	<i>.. ENG 29 770A4</i>	<i>Albion</i>
<i>10/4/01</i>	<i>3rd hep B. ENG 29 770A4</i>		<i>Albion</i>
<i>22/8/01</i>	<i>Please give a 4th hep B</i> <i>repeat Blood Immunity 2 months</i>		
<i>24/8/01</i>	<i>ENGRIX B given in</i>		<i>W</i>

ZAAC0487 9/95

NHS Confidential: Personal data about a patient

Argyll and Clyde Health Board Treatment Card

Doctor

Name: Wm Campbell DOB 020574 Doctor Mitchelson

Address: 4 CARMAN VIEW
Bellmyre

Date	Treatment	Progress Notes	Nurses Initials
13/10/00	Pheon give Polio + Typhoid + Hep. A polio 3 drops. 512502 Havrix VH650 B6.	2 deemed 29/12/00	abameen

SURNAME CAMPBELL

FIRST NAME WILLIAM

FULL ADDRESS 414 MERRINS AVE
DUMFRIES

HOME TEL. _____

WORK TEL. _____

SEX M

MARITAL STATUS.....

COUNTRY OF ORIGIN SCOTLAND

NEXT OF KIN...

YOUR OCCUPATION Unemployed

PREVIOUS GP DR LOCAN

MEDICATION

ARE YOU TAKING ANY MEDICATION AT PRESENT. No

IF YES DETAILS.....

GENERAL HISTORY

HAVE YOU HAD ANY SERIOUS ILLNESSES / OPERATIONS, X-RAYS, OR
SIMILAR TESTS. IF YES WHEN. NO

HAVE YOU ANY ALLERGIES TO MEDICINES OR ANYTHING ELSE Hay fever / ATS

SMOKING STATUS *NON*

SMOKING STATUS NON
HOW MUCH ALCOHOL, IF ANY, DO YOU CONSUME PER WEEK 20-40 UNITS

HEIGHT 6'3"

WEIGHT 16 STONS

DO YOU EXERCISE REGULARLY YES
 IF YES HOW OFTEN 1-3 TIMES A WEEK
 DO YOU HAVE A HEALTHY DIET DON'T KNOW
 WHEN WAS THE LAST TIME YOU WERE VACCINATED DON'T KNOW
VACCINATIONS

TETANUS

POLIO

FAMILY HISTORY

WHICH OF YOUR BLOOD RELATIONS HAVE SUFFERED FROM ANY OF THE FOLLOWING?

HEART ATTACK NO
 DIABETES DON'T KNOW
 STROKE NO
 CANCER NO
 ASTHMA NO
 TB NO
 HIGH BLOOD PRESSURE DON'T KNOW
 ANY OTHER SERIOUS ILLNESSES DON'T KNOW
 Do you look after someone? NO
 Does someone look after you? NO

FEMALE PATIENTS ONLY

HAVE YOU HAD CHILDREN? | GIVE AGES 1
 HAVE YOU SUFFERED FROM A MISCARRIAGE NO DATE
 HAVE YOU HAD A TERMINATION OF PREGNANCY DATE
 HAVE YOU HAD A HYSTERECTOMY DATE
 WHEN WAS YOUR LAST SMEAR DATE
 SMEAR RESULT IF KNOWN FOLLOW UP DATE
 WHICH METHOD OF CONTRACEPTION, IF ANY, ARE YOU USING AT PRESENT
 HAVE YOU EVER HAD A BLOOD TRANSFUSION

Signed Dr. CampbellDate 7-3-2006

CLAIM SENT TO P/C ☒ ON COMP ☒ STICKER ☒ Chi 3056

MEDICAL QUESTIONNAIRE

NAME Wm Campbell D.O.B. 20574

ADDRESS 26 Bellamyre Ave Dunbarton

HEIGHT 6ft 2 WEIGHT 115 7lbs BMI 20.67

EXERCISE LEVEL tick appropriate box

Avoids even trivial exercise	1382
Enjoys light exercise	<u>1383</u>
Enjoys moderate exercise	1384
Enjoys heavy exercise	1385

ALCOHOL INTAKE

Teetotaler	1361
Trivial Drinker <1 unit per day	<u>1362</u>
Light drinker 1-2 units per day	1363
Moderate drinker 3-6 units per day	1364
Heavy drinker 7-9 units per day	1365
Very heavy drinker >9 units per day	1366

BLOOD PRESSURE

Normal 135/85 or less	<u>2464</u> ¹³⁰ / ₈₂
Borderline raised 140/86 - 160/95	2465
Raised 161/95 - 200/100	2466
Very high 201 + / 110 +	2467

SMOKING STATUS

Never smoked tobacco	1371
Light smoker 1-9 per day	<u>1373</u>
Moderate smoker 10-19 per day	1374
Heavy smoker 20-39 per day	1375
Very heavy smoker 40 + per day	1376
ex smoker	137F

ADVICE GIVEN

Advice on smoking	6791 ☒
Advice on diet	6799 ☒
Advice on exercise	6798 ☒
Advice on alcohol	6792
Refer to Dr because of hypertension	Z1028

RHS Confidential: Personal data about a patient

ACCIDENT/EMERGENCY FORM

G.P. COPY

ACCIDENT & EMERGENCY DEPT.
VALE OF LEVEN DISTRICT GENERAL HOSPITAL
MAIN STREET, ALEXANDRIA, G83 0UA
TEL: 01389 817345
FAX: 01389 817362

AE No. C/

HOSPITAL No:

P	Surname CAMPBELL	Forename WILLIAM	Age 31	Date of Birth 02/05/1974	Arr Date 22/12/05	Time 13:34	AE Number 013403/										
T	Address 4/4 MERKINS AVENUE BELLSMYRE DUMBARTON		Sex MALE	Religion	Date of Inc 21/12/05	Time											
I	PC G82 3EB		Tel 07747180007	Marital Status SINGLE	Occupation/School	Type of Inc HOME ACC	Mode of Arrival WALKING/OT										
E	Name LOGAN		Address DUMBARTON HEALTH CENTRE STATION ROAD DUMBARTON		Referred by SELF REFERRAL												
N	NEXT OF KIN Name [REDACTED]		Address [REDACTED]		Complaint RASH HANDS/FACE												
T	Relat. [REDACTED]		[REDACTED]		<table border="1"> <tr><td>FILE</td><td></td></tr> <tr><td>NORMAL</td><td></td></tr> <tr><td>MAKE APPT.</td><td></td></tr> <tr><td>SCRIPT</td><td></td></tr> <tr><td>NOTES</td><td></td></tr> </table>			FILE		NORMAL		MAKE APPT.		SCRIPT		NOTES	
FILE																	
NORMAL																	
MAKE APPT.																	
SCRIPT																	
NOTES																	

HOME ACCIDENT PROBABLE CAUSE

TO BE COMPLETED BY MEDICAL OFFICER AFTER SEEING PATIENT

Dear Doctor.

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

Diagnosis ? VIRAL ILLNESS - OUTWITH MIV PROTOCOLS

X-Ray film/ECG shows

Treatment given ANALGESIA / ANTI PYRETICS
(OBS. ALL IN NORMAL LIMITS)
HAS GP APPT LATER PM.

Drugs _____ days supply of _____ has been given.

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

Would you please arrange

DISCHARGE CODES: Please Circle												
1. Discharge Home	4. Did not Wait	7. Fracture Clinic	10. Admit Ward (see below)									
2. Refer to G.P.	5. Ret A/E as advised	8. Refer to O.P. Clinic (see below)	11. Trans. other Hospital (see below)									
3. Irregular Discharge	6. Ret A/E as necessary	9. Social Worker	12. Died in dept.									
			13. Dead on Arrival									
Ward No. (if admitted)		Transfer to Hospital		Consultant (if admitted)								
				RECEIVED								
				29 DEC 2005								
Follow up	Not arranged	Arranged	To be arranged									
Clinic Referred to	AE	Hand	Fracture	Ortho	Medical							
					Surgical							
					Skin							
					ENT							
					Gyn.							
Others Specify												

Medical Officers Name (in Block Letters)

CODE

Signature of Medical Officer

Cons

SP

SHO/UHO

Clin Assist

M.C. DARGIE N° 238

[Signature]

STY3051N

Department of Clinical Psychology
Dumbarton Joint Hospital
Cardross Road
DUMBARTON
G82 5JA

Tel: 01389 604111
Fax: 01389 607348
Email: [REDACTED]

Your Ref:

Our Ref: IKM/393/01-02

Date: 21st January 2003



CONFIDENTIAL

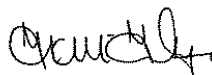
Dr Logan
Health Centre
Station Road
DUMBARTON
G82 1PW

Dear Dr Logan

Re: William Campbell DOB 02 05 74
4/4 Merkins Ave, Dumbarton, G82 3EB

You referred this man for possible psychological help and he was sent an appointment for initial assessment on 10th January, 2003 at Joint Hospital, Dumbarton. As part of our opt-in scheme the patient was asked to contact the department to let us know whether or not he would attend. The patient has not responded to this at all. In the circumstances, no further appointment will be sent unless you advise otherwise.

Yours sincerely

 (Secretary)
PP MS ELIZABETH IRVINE
CONSULTANT CLINICAL PSYCHOLOGIST

RECEIVED

22 JAN 2003

Page 94 of 369

NHS Confidential: Personal data about a patient

ARGYLL & CLYDE ACUTE HOSPITALS NHS TRUST

G.P. COPY

ACCIDENT & EMERGENCY DEPT.
VALE OF LEVEN DISTRICT GENERAL HOSPITAL
ALEXANDRIA
GB3 0UA
TEL: 01389 754121

ACCIDENT/EMERGENCY FORM

AE No. C/

HOSPITAL No:

P A T I E N T	Surname CAMPBELL	Forename WILLIAM	Age 28	Date of Birth 02/05/1974	Arr Date 18/07/02	Time 10:46	AE Number 009836/02
	Address 474 WERKINS AVENUE BELLSMYRE DUMBARTON		Sex MALE	Religion	Date of Inc 7/02	Time	
	Marital Status SINGLE		Occupation/School UNEMPLOYED	Type of Inc OTHER	Mode of Arrival WALKING/OT		
	PC G82 3XB	Tel 602111					
G P	Name LOGAN	Address DUMBARTON HEALTH CENTRE STATION ROAD DUMBARTON			Referred by SELF REFERRAL		
	Complaint LACERATION L/SIDE FACIAL						
NEXT OF KIN	Name						
	Relat.						
	Tel. No.						

ROAD TRAFFIC ACCIDENT PLACE

DETAILS

HOME ACCIDENT PROBABLE CAUSE

RECEIVED

TO BE COMPLETED BY MEDICAL OFFICER AFTER SEEING PATIENT

23 JUL 2002

Dear Doctor,

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

Diagnosis laceration to face on glass yesterday.X-Ray film/ECG shows Xr - nado.Treatment given Wound cleaned + sutured.Antibiotics - penicillin 3 daysDrugs 7 days supply of flucloxacillin 500 mg qds has been given.Tetanus Prophylaxis has/has not been administered. TT Course TT Booster HATI (Please Tick)

Would you please arrange

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

CLINIC: -CLINICAL PSYCHOLOGY

DOCTOR: -

HOSPITAL AND No: -DUMBARTON JOINT

CHI No: -3056

PATIENT's NAME: -WILLIAM T CAMPBELL

DATE OF BIRTH: -02/05/74

ADDRESS
-4-4 MERKINS AVENUE
-BELLSMYRE
-DUMBARTON G82 3EB

REFERRING PRACTICE: DR AV MITCHELSON AND DR D LOGAN
HEALTH CENTRE
STATION ROAD
DUMBARTON G82 1PW
01389 602620

PRACTICE NUMBER: C85032
PCPI No: SCB 27
GENERAL PRACTITIONER: -DR D LOGAN
DATE OF REFERRAL: - 29TH JANUARY 20002

Dear Doctor

I wonder if this man can be placed on your waiting list for Psychology assessment. He came to me this week saying that he was highly stressed. He says a lot of the problems are to do with the deaths of [REDACTED]

[REDACTED] He has a history of psychological problems and saw an educational psychologist throughout his school days up until secondary two. He says that he has always been a loner but he was quite aggressive at school. All I can see in the notes is that in 1983 it said that he had discipline problems in class since the age of 9. He was going to speech therapy. It seemed defiance was his worst problem. He tended to bite when fighting. He was a bed wetter. The Doctor at the time thought that he had a psychopathic personality. He couldn't concentrate. He felt angry. Nothing more was said.

He registered with the practice again after having moved away in March 1998. It was noted that he was a heavy smoker, 20 cigarettes per day, he drank quite heavily at weekends and smoked Cannabis. Also he had been in a fight and was in police custody and had many bruising injuries. It seems at that time that he was drinking heavily, although funnily enough it seems that he got a job as a pub bouncer in 2001. He was bitten by a Heroin addict he says, which caused a bit of stress and then by September 2001 he was feeling quite depressed.

He developed glandular fever in June 1999. Otherwise there is nothing else major of note in his past history.

Yours sincerely

DR D LOGAN

NORTHGATE
DOCUMENT STAMPED
TO ENSURE DETECTION
BY SCANNER

THIRD PARTY COPY

Our Ref G/1/254027-CW05

COPY posted
3/10/01

Incident in which applicant was injured took place:

Place: HALDANE CO-OP

Date: ON 12/01/2001

Date of First Treatment:

Reference Number:

Name of injured Person: WILLIAM CAMPBELL
4 CARMEN VIEW
BELLSMURE
G82 3AX

Report Fee Payment Voucher

To ensure payment the name and address of the person to whom the fee should be sent should be printed below.

PLEASE COMPLETE IN BLOCK CAPITALS

Title: Dr Initials: D. Surname: LOGAN

Position: GP Hospital Department:

Full Address: DUMBARTON HEALTH CENTRE
STATION ROAD
DUMBARTON
G82 1PW.
Dr. D. Logan
Health Centre
Station Road
Dumbarton G82 1PW
Tel: 01389 602611

G/1 /254027-CW05

1. If the applicant was treated, please give:

Date of first visit 15/1/01 Date of last visit 24/8/01 No. of visits 4

2. Please give details of any physical injuries, treatment given, and any recognised psychological condition resulting from the incident.

Patient says he was bitten by a drug addict at work. An intravenous needle was found on the arrested man. Bite penetrated shirt and left him with a shallow abrasion 1 inch long with a small bruise but no bleeding.

3. Do you expect the applicant to make a full recovery? If not, please give details of any likely continuing disability or residual scarring.

Yes; full recovery. Advice given by casualty staff that it was a low risk injury but a High Risk assailant, therefore an accelerated course of Hepatitis B was recommended.

4. How long did the main effects of the injury last?

He needed Hepatitis B injections on: 15/1/01; 13/3/01; 10/4/01 and on blood test level not showing immunity a fourth injection given 24/8/01 and he will need a further booster.

5. a) Has the injury accelerated or exacerbated an existing condition?
b) If so, please indicate the percentage attributable to acceleration or exacerbation.
c) How long did any exacerbation last?

(a) No

6. Please provide any supplementary information which you think might assist us in determining this application.

Signature

Date

[Signature]
3 OCTOBER 2001

Dr. D. Logan
Health Centre
Station Road
Dumbarton G82 1PW
Tel: 01389 602611



Tom Brown LLB

Bill Cairns LLB MBA

Roddy Boag LLB

Bert Thomson LLB

Our Ref: RB/AD/563/4

Yours Ref:

27th September 2001

Dr D R Logan
Dumbarton Health Centre
Station Road
DUMARTON
G82 1PW

CAIRNS BROWN
Solicitors

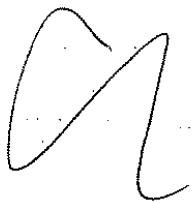
45 High Street, Dumbarton G82 1LS
Tel: 01389 742777 Fax: 01389 742888
Legal Post - LP3 Dumbarton

Dear Dr Logan

OUR CLIENT - WILLIAM CAMPBELL

We enclose a form of consent signed by our above client who we understand is a patient of yours in relation to a criminal injuries claim.

Yours faithfully



RECEIVED
01 OCT 2001

e-mail: mail@cairnsbrown.co.uk

Also at 112 Main Street, Alexandria G83 0NZ
Tel: 01389 756979 Fax: 01389 754281 Legal Post - LP2 Alexandria

www.cairnsbrown.co.uk

Our Ref G/1/254027-CW05

Applicant: WILLIAM CAMPBELL
4 CARMEN VIEW
BELLSMURE
G82 3AX

Date of Birth: 02/05/1974

Medical Authority: DR D R LOGAN
DUMBARTON HEALTH CENTRE
STATION ROAD
DUMBARTON
G82 1PW

Date of Incident: ON 12/01/2001

CONSENT

I authorise and request my GP to supply any information reasonably requested by CICA in connection with this application for compensation.

Signature of applicant. *W Campbell* Date. 25-09-01

(Note - if the applicant is under 18 years of age, this form should be completed by his/her parent or guardian).

Applicants - PLEASE ENSURE THAT THIS FORM IS SENT TO YOUR GP AS SOON AS POSSIBLE.

GPs - A formal request for a medical report will be sent to you shortly.

RHD Confidential: Personal data about a patient

CALL BACK

Name..... **WILLIAM**

Address..... **CAMPBELL**

..... **4 CARMAN VIEW**

..... **DUMBARTON**

Phone..... **763712**

Date of Birth..... **02/05/74**

Date..... **11/08/01**



Serial No.: **63875**

Patient's GP..... **MITCHELSON**

Practice.....

Appt. Time.....

Time phoned..... **19:21**

Time Seen.....

TELEPHONE ☒ SEEN AT CENTRE ☐ VISIT ☐ NIGHT VISIT FEE ☐

CALL BACK - RASH ON FACE- IMPETIGO?

Impetigo.
Offered appt tonight or M of Monday.
Checked for letter as working tonight

PRESCRIPTION GIVEN

DRUG	DOSE	PER DAY	FOR...

DRUGS DISPENSED

DRUG	DOSE	AMOUNT	BATCH

DIAGNOSIS

2 impetigo

REVIEW: Patient to contact if needed..... ☒

Appointment needed on..... /..... /..... ☐

Visit needed on..... /..... /..... ☐

Admitted to..... ☐

Please let me know outcome..... ☐

SEND BY FAX..... **602621** *SW* ☒

Co-Op Doctor (print)..... *SW*

Signature..... *SW*

PHS Confidential: Personal data about a patient

12-AUG-01 SUN 13:28 INFO SERVICES VOLDGH
CALL BACK

FAX NO. 038952596

Sent by P.01
next body of P.01Name WILLIAMAddress CAMPBELL4 CARMAN VIEWDUMBARTONPhone 763742Date of Birth 02/05/74Date 11/08/01Time phoned 19:21
(24 hour clock)Serial No.: 63875Patient's GP MITCHELSON

Practice

Appt. Time

Time Seen

TELEPHONE ☒SEEN AT CENTRE ☐VISIT ☐NIGHT VISIT FEE ☐

CALL BACK - RASH ON FACE- IMPETIGO?

Hb. impetigo.

- Offered appt tonight or M of monday.
- Selected for latter as working tonight

PRESCRIPTION GIVEN

DRUG	DOSE	PER DAY	FOR

DRUGS DISPENSED

DRUG	DOSE	AMOUNT	BATCH

DIAGNOSIS:

2 h. impetigo

REVIEW: Patient to contact if needed ☒Appointment needed on 1/1/ ☐Visit needed on 1/1/ ☐Admitted to 1/1/ ☐Please let me know outcome ☐SEND BY FAX 602621 ☒Co-Op Doctor (print) SKNSignature SKN

12/08 '01 12:42

TX/RX NO.4329

P.001

NHS Confidential: Personal data about a patient

 ARGYLL & CLYDE ACUTE HOSPITALS NHS TRUST
 ACCIDENT/EMERGENCY FORM

G.P. COPY

 ACCIDENT & EMERGENCY DEPT.
 VALE OF LEVEN DISTRICT GENERAL HOSPITAL
 ALEXANDRIA
 G80 0UA
 TEL: 01389 754121

AE No. C/

HOSPITAL No.

P A T I E N T	Surname	Forename	Age	Date of Birth	Arr Date	Time	AE Number
	CAMPBELL	WILLIAM	25	2/5/74	2/9/99	12 ⁴⁰ AM	810697
	Address		Sex	Religion	Date of Inc	Time	
	4 Camnan View Dumbarton		M.		1.9.99	11.30pm.	
G P	PC	Tel	Marital Status	Occupation/School	Type of Inc	Mode of Arrival	
		01389 763712	SI		assault.	walk	
NEXT OF KIN	Name		Address		Referred by		
	Logan		DNC		Self.		
	Name		Address		Complaint		
	Relat.			Laceration to head.			
	Tel. No						

ROAD TRAFFIC ACCIDENT PLACE

DETAILS

HOME ACCIDENT PROBABLE CAUSE

TO BE COMPLETED BY MEDICAL OFFICER AFTER SEEING PATIENT

Dear Doctor,

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

Diagnosis alleged assault - head injury = lac

X-Ray film/ECG shows

 Treatment given Sutured x 3.
cleaned
head injury advice + card

Drugs _____ days supply of _____ has been given.

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

Would you please arrange

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

RHS Confidential: Personal data about a patient

Name: WILLIAM
CAMPBELL
Address: 4 CARMAN VIEW
DUMBARTON

Phone: 763712

Date of birth: 02/05/74

Date: 15/10/98 Time phoned: 22:00 (24 hour clock) Time seen:

TELEPHONE ☒ SEEN AT CENTRE ☐ VISIT ☐ NIGHT VISIT FEE ☐

BURST BLOOD VESSEL R EYE - Spontaneous - this morning

No pain

No visual upset

otherwise well

sounds like S-C haemorrhage

observe only / advised

See Practice Nurse for BP check soon

PRESCRIPTION GIVEN			
DRUG	DOSE	PER DAY	FOR..

DRUGS DISPENSED			
DRUG	DOSE	AMOUNT	BATCH

REVIEW: Patient to contact if needed..... ☒

Appointment needed on..... ☐

Visit needed on..... ☐

Admitted to..... ☐

DIAGNOSIS

subconjunctival
haemorrhage

Please let me know outcome ☐

SEND BY FAX ☐

Co-Op Doctor (print) FURNEAUX Signature

NHS Confidential: Personal data about a patient

ACCIDENT & EMERGENCY DEPT.
VALE OF LEVEN DISTRICT GENERAL HOSPITAL
ALEXANDRIA
G83 0UA
TEL: 01309 754121

LOMOND HEALTHCARE NHS TRUST
ACCIDENT/EMERGENCY FORM

AE No. C/

G.P. COPY

BWE.

HOSPITAL No:

P A T I E N T	Surname	Forename	Age	Date of Birth	Arr Date	Time	AE Number
	CAMPBELL	WILLIAM	24	02/05/1974	13/08/98	19:48	010714/98
	Address 4 CARMAN VIEW BELLSMYRE DUMBARTON		Sex MALE	Religion	Date of Inc 03/08/98	Time	
	PC G82	Tel 763712	SINGLE	Occupation/School	Type of Inc OTHER	Mode of Arrival WALKING/OT	
G P	Name LOGAN	Address DUMBARTON HEALTH CENTRE STATION ROAD DUMBARTON			Referred by SELF REFERRAL		
	Next of Kin Name [REDACTED] Relat. [REDACTED] Tel. No. [REDACTED]				Complaint INJURY NOS HEAD		

ROAD TRAFFIC ACCIDENT PLACE

DETAILS

HOME ACCIDENT PROBABLE CAUSE

TO BE COMPLETED BY MEDICAL OFFICER AFTER SEEING PATIENT

Dear Doctor,

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

Diagnosis

Mina head injury today's ago. Scalp still
harmful.

X-Ray film/ECG shows

Treatment given

Advice given - head injury warnings
If pain persists to return for x-ray to exclude K/S

Drugs _____ days supply of _____ has been given.

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

Would you please arrange

DISCHARGE CODES: Please Circle 1. Discharge Home 2. Refer to G.P. 3. Irregular Discharge 4. Did not wait 5. Ret A/E as advised 6. Ret A/E as necessary 7. Fracture Clinic 8. Refer to O.P. Clinic (see below) 9. Social Worker 10. Admit Ward (see below) 11. Trans. other Hospital (see below) 12. Died in dept. 13. Dead on arrival										
Ward No. (if admitted)			Transfer to Hospital				Consultant (if admitted)			
Follow up	Not arranged _____		Arranged _____		To be arranged _____					
Clinic Referred to	AE	Hand	Fracture	Ortho	Medical	Surgical	Skin	ENT	Gyn.	Others Specify

Medical Officers Name (in Block Letters)

Signature of Medical Officer

Cons SR Reg SHO/JHO Clin Assist (please circle)

CORONARY ARTERY SCREENING PROFORMA

NAME William Campbell D.O.B. 2/5/76 SEX M
 DATE OF SCREENING 16/1/92
 HEIGHT 6' 1" WEIGHT 102 lb BMI ✓

FAMILY HISTORY

	CODE
Family history of Stroke / TIA - Score 1	12C4
FH: ischaemic heart disease < 60 - Score 1	12C2
FH: ischaemic heart disease > 60 - Score 1	12C3
History of Stroke/TIA - Score 5	14A7
History of M.I. < 60 - Score 5	14A3
History of M.I. > 60 - Score 3	14A4
History of Angina - Score 3	14A5
Total score 0-2	Z1032 <u>X</u>
Total score > 2	Z1033

EXERCISE LEVEL

Tick appropriate box

Avoids even trivial exercise	1382
Enjoys light exercise	1383
Enjoys moderate exercise	1384 <u>X</u>
Enjoys heavy exercise	1385

ALCOHOL INTAKE

Tick appropriate box

Teetotal	1361
Trivial drinker < 1 unit per day	1362
Light drinker 1-2 units per day	1363 <u>X</u>
Moderate drinker 3-6 units per day	1364
Heavy drinker 7-9 units per day	1365
Very heavy drinker > 9 units per day	1366

BLOOD PRESSURE READING ACTUAL READING 120/70

1) normal 135/85 or less	2464 <u>X</u>
2) Borderline raised 140/86 - 160/95	2465
3) Raised 161/95 - 200/110	2466
4) Very High 201+/110+	2467

SMOKING STATUS

Tick appropriate box

1) Never smoked tobacco	1371
2) Light smoker (1-9 per day)	1373
3) Moderate smoker (10-19 per day)	1374 <u>X</u>
4) Heavy smoker (20-39 per day)	1375
5) Very heavy smoker 40+ per day	1376
6) Ex smoker	137F <u>10 dets</u>
8) Pipe smoker	137H

PROVISIONAL DUNDEE RANK

Tick appropriate.

(0-30)	Z1006
(31-60)	Z1007
(61-100)	Z1008

ACTION TAKEN

Tick as appropriate

1) Advice on smoking given	6791 <u>X</u>
2) Advice on diet given	6799 <u>X</u>
3) advice on exercise given	6798 <u>X</u>
4) Advice on alcohol given	6792
5) Refer to Dr because of Hypertension	Z1028

1015 Confidential: Personal data about a patient

Accident and Emergency Dept.,
Vale of Leven DGH,
Alexandria
Dunbartonshire G30 0UA
Tel: 01389 754121

Argyll and Clyde Health Board
Accident / Emergency Form

AE No. C/

GP COPY

2 73

Surname CAMPBELL		Forenames WILLIAM		Hospital Code	
Address 25 BELSMYRE AVE DUMBARTON		Birth Surname		Patient's Own Occupation	
Postcode G782 3AR	Telephone No. 765707	Date of Birth 2-5-74	Sex M	Marital status S1	Religion PROT.
Relationship [REDACTED]		Family Doctor: Surname DR BARLOW		Initials	
Address SIA		Address DHC			
Postcode	Telephone No.	Postcode	Telephone No.		
Accident / Emergency: Date of Attendance 20-1-95		Previous Attendance at this Hospital Yes / No YES		In / Out Patient	Year
Time of Attendance 16.55	Reason for Attendance IND (R) FOOT SMALL TOE				
Date of Injury or illness 20.1.95	Time of Injury 09.00	Type (Code) 10	Source of Referral		
Road Traffic Accident Place			Details		
Home Accident Probable Cause					

To be completed by Medical Officer after seeing patient

Dear Doctor

The above named patient attended Accident and Emergency Department today.

Diagnosis **SOFT TISSUE INJURY (R) LITTLE TOE**

X-ray film / ECG shows

Treatment given **NIL**

Drugs days supply of has been given.

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

Would you please arrange

Discharge Codes: Please circle									
1 Admission	3 Refer to GP	5 Died	7 Irregular Discharge						
2 Discharge	4 Transfer to other Hospital (see below)	6 Refer to OP clinic (see below)	8 DOA						
Ward No. (if admitted)		Transfer to Hospital			Consultant (if admitted)				
Follow up	Not arranged		Arranged		To be arranged				
Clinic referred to	AE	Hand	Fracture	Ortho	Medical	Surgical	Skin	ENT	Gyn. Others Specify
Medical Officers Name (in block letters)					Signature of Medical Officer				
Cons	SR	Reg	SHO / JHO	Clin Assist	(please circle)				

NHS Confidential: Personal data about a patient

Accident and Emergency Dept.,
Vale of Leven DGH,
Alexandria
Dunbartonshire G30 0UA
Tel: 0389 54121

Argyll and Clyde Health Board
Accident / Emergency Form

AE No. C/

GP COPY

Surname CAMPBELL		Forenames WILLIAM		Hospital Code	
Address 3A MURROCH AVE, DUMBARTON		Birth Surname		Patient's Own Occupation	
Postcode	Telephone No.	Date of Birth 2-5-73	Sex M	Marital status	Religion
Next of Kin Name		Relationship	Family Doctor Surname	Initials	
Address 25 Bellsmyre Ave Dun		Address DHC			
Postcode	Telephone No.	Postcode	Telephone No.		
Accident / Emergency Date of Attendance 19-2-94		Previous Attendance at this Hospital Yes / No		In / Out Patient	Year
Time of Attendance 11.25pm		Reason for Attendance (N) to (L) leg			
Date of Injury or illness 19-2-94		Time of Injury	Type (Code)	Source of Referral	
				GP _____ Self _____ Police _____ Other (Code) _____	
Road Traffic Accident Place			Details		
Home Accident Probable Cause					

To be completed by Medical Officer after seeing patient

Dear Doctor

The above named patient attended Accident and Emergency Department today.

Diagnosis

N.B.I.

X-ray film / ECG shows

Treatment given

**Dressed Sock. Crutches.
advised to Return if pain/
swelling remain.**

Drugs days supply of

has been given.

Tetanus / Prophylaxis has / has not been administered.

TT Course

TT Booster

HATI

(Please tick)

Would you please arrange

Discharge Codes: Please circle										
1 Admission	3 Refer to GP	5 Died	7 Irregular Discharge							
2 Discharge	4 Transfer to other Hospital (see below)	6 Refer to OP clinic (see below)	8 DOA							
Ward No. (if admitted)		Transfer to Hospital		Consultant (if admitted)						
Follow up	Not arranged	Arranged		To be arranged						
Clinic referred to	AE	Hand	Fracture	Ortho	Medical	Surgical	Skin	ENT	Gyn.	Others Specify

Medical Officers Name (in block letters)

Signature of Medical Officer

Cons

SR

Reg

SHO / JHO

Clin Assist

(please circle)

NHS Confidential: Personal data about a patient

VALE OF LEVEN HOSPITAL, ALEXANDRIA. ACCIDENT/EMERGENCY DEPARTMENT

Surname: <u>Campbell</u>		Forename: <u>William</u>		Age: <u>15</u>	DoB: <u>2/5/74</u>	A/E Number: <u>1068</u>
Birth Surname:		Address: <u>25 Bellsmyre Ave</u>		NoK: <u>[REDACTED]</u>		Date: <u>20/6/89</u>
Marital Status: <u>S</u>	Sex: <u>M</u>	Address: <u>Dumbarton</u>		Address: <u>S/A</u>		Time: <u>12.05pm</u>
Tel: <u>65707</u>		Postcode:		Phone:		
Accident/Emergency Delete as applicable		Place of Injury: <u>1 2 3 4 5</u>		Cause of Injury: <u>ft</u>		Date of Injury: <u>20/6/89</u>
Referred by: <u>1 2 3 4 5 6</u>		Religion: <u>CS</u>		Complaint: <u>INJ. @ pinkie</u>		G.P.: <u>DR. Barlow</u>

CLINICAL NOTE

Fell off skateboard last night → hurt @ 1st finger
+ left eye

OE// Bruised + swollen left + 1st finger

Mup's okay

Sensation intact.

XR → # base of prox phalanx 1st finger.

For - buddy taping
cl 10/7. (3-7.89)

Examining Doctor W. M. H. H.

Investigations	x-ray ☒ ; Lab ☐ ; ECG ☐				
Treatment	Dressing ☐ ; Suture ☐ ; Tet ☐ ; Tox ☐ ; Pop ☐ ; Resusc ☐				
Diagnosis	<u>1st finger</u>				
Disposal	Home	Admit	A/E Clinic	Irreg Dis	Died
	GP	Transfer other Hosp.	Other Clinic	Did not Wait	DOA

cl 3.7.89

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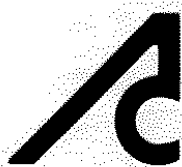
ARGYLL AND CLYDE HEALTH BOARD (DUMBARTON DISTRICT)Health Centre
Dumbarton
25th Sept. 78

Dear Dr. Day,

WILLIAM T. CAMPBELL D.O.B 2.5.74.
1/5, ST. ANDREWS ROAD, D/TON.

This little boy was referred for Speech Therapy in August 1978 by Dr. Ellis Belch. An assessment of language shows comprehension and expressive language to be well within normal limits, with a good vocabulary range and good sentence construction. Articulation shows several defective sounds and as the parents are willing for treatment I will make arrangements for William to be seen on a weekly basis.

Yours sincerely,
S.E. Wallace
Chief Speech Therapist



Argyll & Clyde Health Board
Dumbarton District

Health Centre,
 Station Road,
 Dumbarton.
 G82 1PS

Tel. No. 63111

9th November 1981

Your Ref:

If telephoning, please ask for:

Our Ref:

Dr. S. A. Balch,
 Clinical Medical Officer,
 James Street Clinic,
 Dumbarton.

Dear Dr. Balch,

William Campbell, 1/5 St. Andrew's Road, Dumbarton. 2.5.74

William attended for assessment on 9th November 1981.
 Articulation is now secure in the main though any substitutions
 can be self corrected.

I shall, therefore, discharge William.

Yours sincerely,

Margaret Rooney

M. J. Rooney
 Chief Speech Therapist

cc Head Teacher, Brecknock Primary School, Dumbarton
 Dr. G. Day, Dumbarton Health Centre ✓

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SURNAME (BLOCK LETTERS)		Campbell		MALE	
TITLE		MR		OCCUPATION	
FORENAMES (BLOCK LETTERS)		William		PHONE NUMBER 01389 600842 (Sister) Jeanette	
DATE OF BIRTH	SINGLE	N.H.S. NUMBER			
2/5/74	MARRIED (DATE)	3056			
	DIVORCED (DATE)	C.H.I. NUMBER			
	WIDOWED (DATE)	3056			
ALLERGIES		SPECIAL HAZARDS			
ADDRESS		D	M	DOCTOR'S NAME	OTHER & DATE
414 Merkins Avenue Bellsmyre Dumbarton G92 3EB				DR S Dunn	3/4/3
1.					
2.					
3.					
4.					
5.					
Cause of Death:					
(1)					
(2)					
Printed for Astron B42074 805					
Form GP 1115 (Rev. 5/87) 355-2091					

G.P. 111.

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SURNAME (BLOCK LETTERS)		MALE	
TITLE <i>CAMPBELL</i>		OCCUPATION	
FORENAMES (BLOCK LETTERS) <i>WILLIAM</i>		PHONE NUMBER	
DATE OF BIRTH	-- SINGLE	N.H.S. NUMBER	
<i>02/05/74</i>	MARRIED (DATE)	<i>4993485891</i>	
	DIVORCED (DATE)	C.H.I. NUMBER	
	WIDOWED (DATE)	<i>3056</i>	
ALLERGIES		SPECIAL HAZARDS	
ADDRESS	D	M	DOCTOR'S NAME CIPHER & DATE
<i>4/4 MERIKINS AVE 1. BELLSHIRE DUMBARTON</i>			<i>S.M. DUNN C160306</i>
2.			
3.			
4.			
5.			
Cause of Death			
(1)			
(2)			
ad for Astron B38076 10/04			

Form GP IIIB (Rev. 5/87)
355—2091

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SURNAME (BLOCK LETTERS)		3056 MALE	
TITLE <i>Campbell</i>		OCCUPATION	
FORENAMES (BLOCK LETTERS)		PHONE NUMBER	
<i>William Thomas</i>			
DATE OF BIRTH	SINGLE	N.H.S. NUMBER	
<i>02.05.74</i>	MARRIED (DATE)	<i>505/74/109</i>	
	DIVORCED (DATE)		
	WIDOWED (DATE)		
ALLERGIES		SPECIAL HAZARDS	
ADDRESS	D	M	CIPHER & DATE
<i>4 CARMAN VIEW 1. Bellomyre G82 3AX</i>			<i>DR AV. MITCHELSON 2403.98</i>

Page 116 of 369

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 SIMILAR NAME			
GAMPBELL		MALE	3056
		SURNAME (BLOCK LETTERS)	
WILLIAM THOMAS		FORENAMES (BLOCK LETTERS)	
DATE OF BIRTH	SINGLE	NATIONAL HEALTH SERVICE NO.	
25-74	☒ MARRIED (DATE)	505-74-109	
	☐ WIDOWED (DATE)		
ADDRESS		DOCTOR'S NAME	CIPHER & DATE
25 BELLSMYRE AVE DUMBARTON		DR. T. BARLOW	12-8-74 DB.
TEL. NO.	765707	G 82 3AR	DISPENSING
			MILEAGE

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NHS IN SCOTLAND

Application to Register with a General Medical PractitionerPlease complete in **block capitals** and tick relevant boxes

Patient details	
Surname CANNIBELL	Address 517 PERKINS AVE DUMFRIES
Forename WILLIAM	
Previous Surname	
Date of birth 11/11/1973	
Male ☒ Female ☐	
I wish the child named above to be registered at the practice for Child Health Surveillance	Post code KA12 8EB
Relationship to patient	I will be in the area for more than three months ☐
Patient's / Patient's representative signature <i>[Signature]</i>	Date 07.03.06
Voluntary consent to organ donation	
If you wish to register on the NHS Organ Donor Register as someone whose organs can be used for transplantation purposes after your death, please tick relevant box(es) below:	
Any Organ ☐	Kidneys ☐ Liver ☐ Lungs ☐ Heart ☐ Corneas ☐ Pancreas ☐
Patient's signature	Date
NHS No. (not National Insurance No.)	Community Health Index (CHI) No.
Previous address in U.K.	Name and address of previous doctor in U.K.
414 PERKINS AVE	DR HOLAN
Town DUMFRIES	114
County	
Post code KA12 8EB	
If returning from abroad	If returning from HM Forces
Date of departure from U.K.	Date enlisted
Date of return to U.K.	Service / Personnel No.
If none of the above information is known then please complete the following:	
Town of birth ALEXANDRIA	Reg. district of birth (see birth certificate)
County of birth	Maternal maiden name
Doctor's agreement	
Enter 'D' if supplying drugs	Mileage claim road ☐ water ☐ footpath ☐
CHS acceptance yes ☐ no ☐	Enter date if registration examination completed 14/02/06
I accept this patient on my list and I claim payment in accordance with the Regulations.	CHS Ref No. of GP providing service if different from below
Doctor's signature <i>[Signature]</i>	Doctor's name DR J. M. [Signature]
Date 14.03.06	GP Ref. No. 03438

Printed for Astron J202564 (04/03/97)

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CAMPBELL SURNAME		WILLIAM THOMAS CHRISTIAN NAMES		OCCUPATION		SURNAME
National Health Service Number 505 74 109		Single Married Widowed	Date of Birth	2	5 74	
Address (1) 13 SEAFIELD ROAD DUMFRIES		Name of Practitioner Dr. Gordon T. Day Dumfries		Executive Council CP 2 AUG 1974 C 30		19.....
(2) 115 ST. ANDREWS BARR		(2)		(2)		Died 19.....
(3)		(3)		(3)		CAUSE OF DEATH 1. 2.
(4)		(4)		(4)		
Form E.C.5B (Scotland) - MALE				Signature of Practitioner		CHRISTIAN NAMES

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MAJOR ALLERGIES								
Date Noted								
BLOOD GROUP		RH	ANTIBODIES					
		Date	Date					
	DIP VAC	Per VAC	TET VAC	POL VAC	SMALLPOX	TAB VAC	MEAS VAC	
1								
2								
3								
Boost								
Boost								
Boost								
TUBERCULIN TEST	Result					B.C.G.	Result	
	Date						Date	
OTHER INOCULATIONS	Type							
	Date							
M.M.R. (Date)								

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19-Jun-2026 AN
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Pages:

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DUMBARTON DISTRICT LABORATORY HAEMATOLOGY				Date received	
				05 FEB 1985	
SURNAMES		Forenames	D.O.B.	Sex	Date collected
Campbell		William	28/74	M	05 FEB 1985
Address		Examination Requested			
Dumbarton		NB FBC ESR Phor			
Hospital/Ward/Etc.		Consultant/G.P.		Clinical Information	
DHE		C. D. A. M.		Heart on back. occasional small lymph	
FILM—		DIFFERENTIAL		Doctor's Signature	
Red Cells-Normal		Neutrophils		Platelets	
Hypochromasia		Lymphocytes		Reticulocytes	
Polychromasia		Monocytes		Thrombotest	
Anisochromasia		Eosinophils		Infectious Mononucleosis	
Macrocytosis		Basophils		Screening Test Positive/Negative	
Anisocytosis		Toxic Changes		ESR(Westergren)	
Poikilocytosis				5 mm in 1st hr.	
Nucleated Rbc/100Wbc					
HB 12.6 G/DL		WBC 4.1		Probably Ref (? diet)	
RBC 4.48		GRAN		Minimal signs ?? virus	
HCT 34.6%		LYMPH		PLATS. 236	
MCV 77 FL		MONO		MPV 13.4	
MCH 28.1 PG		RDW 13.2%		NB	

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Dr. DAY
DUMBARTON HIC

CASUALTY DEPARTMENT
 VALE OF LEVEN DISTRICT GENERAL HOSPITAL
 ALEXANDRIA, Dunbartonshire G83 0UA

19/3 19 83

Dear Dr. DAY

Your patient BILLY CAMPBELL
 of 1/5 ST ANDREWS GAE
BELLYMYRE
DUMBARTON

attended the Casualty Department of this Hospital on 19/3/83

Condition Acute eye pain

Treatment 4 swabs 4/a 4thian
- please remove 24/3/83

Disposal _____

Yours sincerely,

N. Bruce J.H.

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Use Ball Pen firmly 39 CULTURE		DUMBARTON DISTRICT LABORATORY MICROBIOLOGY		Date Received -1. JUL 1982		Lab. Number 6219340																	
Clinical Information and Antibiotic Therapy 2° Nocturnal Enuresis				Surname CAMPBELL		Forename WILLIAM																	
				Address 1/5 ST. ANDREW BRAC DUMBARTON		Age 2.5.74																	
				Sex M		D.O.B. 2.5.74																	
Specimen MSU		Examination Required Crs. Mpl. sm.		Date Collected 1st July 82		Address for Report DHC																	
				Doctor M. M. M. M. M.		Signed Mr. M. M. M.																	
ONE FORM PER SPECIMEN				LAB. USE ONLY BELOW THIS LINE																			
MICROSCOPY	URINE WBC within 1000 normal limits		RBC	AAFB	T.V.	Yeasts	WBC	Gram +ve Bacilli	Gram -ve Bacilli	Gram +ve Cocci													
CULTURE	NO GROWTH		Fusidic Acid	Metronidazole	Chloramphenicol	Neomycin	Penicillin	Flucloxacillin	Erythromycin	Cefoxitin	Gentamicin	Cotrimoxazole	Ampicillin	Tetracycline	Cephalexin	Nitrofurantoin	Nalidixic Acid	Carfecillin	Colistin	Noxytetrin	Amikacin	Azlocillin	Carbenicillin
	S = Sensitive R = Resistant																						
COMMENT		Date Reported 2/7/82																					
		Signed I. Houghton																					

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DUMBARTON DISTRICT LABORATORY HAEMATOLOGY				Date received	
SURNAME CAMPBELL		Forenames WINNIE	D.O.B. 2/8/24	Sex M	Date collected 4/7/85
Address 101...		Unit No.	Examination Requested HB Hct Hemo		
Hospital/Ward/Etc. DHE		Consultant/G.P. C. Dav		Clinical Information on oral con	
FILM—		DIFFERENTIAL		Doctor's Signature [Signature]	
Red Cells-Normal		%	X10 ⁹ /l	Platelets	X10 ⁹ /l
Hypochromasia		Neutrophils		Reticulocytes	%RBC
Polychromasia		Lymphocytes		Thrombotest	% Activity
Anisochromasia		Monocytes		Infectious Mononucleosis	
Macrocytosis		Eosinophils		Screening Test Positive/Negative	
Anisocytosis ✓		Basophils		ESR(Westergren)	mm in 1st hr.
Poikilocytosis		Toxic Changes			
Nucleated Rbc/100Wbc					
Rin still clearly red. (she taking what you have prescribed?)					
HB 11.8 G/DL	WBC 4.8				
RBC 4.33	GRAN *%* ABS.				
HCT 34.7%	LYMPH 36% = 1.7 "				
MCV 80 FL	MONO *%* "	PLATS. 273			
MCH 27.3 PG	RDW 13.9%	MPV 11.2			

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MICROBIOLOGY REPORT		LOMOND HEALTHCARE NHS TRUST		CPA Accredited								
Surname CAMPBELL	Patient ID No 189524	Lab Ref No S81766	Source Dr D. LOGAN									
Forename William	Date of birth 02 May 1974	Date received 05 Jan 1996	Dumbarton Health Centre 2									
25 BELLSMYRE AVE DUMBARTON	Male	Date of report 08 Jan 1996	Station Road Dumbarton									
Time												
Clinical details: SORE THROAT YESTERDAY RASH ?SCARLETINA ? RABELLA												
Antistreptolysin O titre <200 Units/ml												
<table border="1"><tr><td>NORMAL</td><td></td></tr><tr><td>NOTES PLEASE</td><td></td></tr><tr><td>MAKE APPOINT.</td><td></td></tr><tr><td>PRESCRIPTION</td><td></td></tr></table>					NORMAL		NOTES PLEASE		MAKE APPOINT.		PRESCRIPTION	
NORMAL												
NOTES PLEASE												
MAKE APPOINT.												
PRESCRIPTION												
			Specimen Type Blood	Date of Specimen 05 Jan 1996								

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MICROBIOLOGY REPORT		LOMOND HEALTHCARE NHS TRUST		Vale of Leven Hospital, Alexandria, Dunbartonshire, G83 0UA. Tel: 01541 211 54121 Ext: 3504		CPA Accredited								
Surname CAMPBELL	Patient ID No 189524	Lab Ref No M43335	Source Dr D. LOGAN			<i>[Signature]</i>								
Forename William	Date of birth 02 May 1974	Date received 05 Jan 1996	Dumbarton Health Centre 2											
25 BELLSMYRE AVE	Male	Date of report 08 Jan 1996	Station Road											
DUMBARTON						Time								
Clinical details: SORE THROAT YESTERDAY RASH ?SCARLETINA ?RABELLA														
Routine sens 1 Penicillin S Erythromycin S <i>on Pen ✓</i> <table border="1"> <tr><td>NORMAL</td><td></td></tr> <tr><td>NOTES PLEASE</td><td></td></tr> <tr><td>MAKE APPOINT.</td><td></td></tr> <tr><td>PRESCRIPTION</td><td></td></tr> </table>							NORMAL		NOTES PLEASE		MAKE APPOINT.		PRESCRIPTION	
NORMAL														
NOTES PLEASE														
MAKE APPOINT.														
PRESCRIPTION														
Routine culture 1) Heavy growth of B-Haem Streptococcus grp A														
Specimen Type						Date of Specimen								
Throat swab						05 Jan 1996								

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HAEMATOLOGY REPORT		LOMOND HEALTHCARE NHS TRUST		Vale of Leven Hospital, Alexandria, Dunbartonshire, G83 0UA. Tel: 01896 4121 Ext: 3503		CPA Accredited									
Surname	CAMPBELL	Patient ID No	189524	Lab Ref No	H65436	Source	Dr D. LOGAN								
Forename	William	Date of birth	02 May 1974	Date received	05 Jan 1996	Dumbarton Health Centre 2									
	25 BELLSMYRE AVE	Male		Date of report	08 Jan 1996	Station Road									
	DUMBARTON					Dumbarton									
Clinical details: SORE THROAT YESTERDAY RASH ?SCARLETINA ?RABELLA															
Film appearances unremarkable.															
<table border="1"> <tr> <td>NORMAL</td> <td>☒</td> </tr> <tr> <td>NOTES PLEASE</td> <td>☐</td> </tr> <tr> <td>MAKE APPOINT.</td> <td>☐</td> </tr> <tr> <td>PRESCRIPTION</td> <td>☐</td> </tr> </table>								NORMAL	☒	NOTES PLEASE	☐	MAKE APPOINT.	☐	PRESCRIPTION	☐
NORMAL	☒														
NOTES PLEASE	☐														
MAKE APPOINT.	☐														
PRESCRIPTION	☐														
Please see reverse for normal values															
Reported by Dr. P Clarke															
Neuts X 10 ⁹ /l	Lymphs X 10 ⁹ /l	Monos X 10 ⁹ /l	Eosinos X 10 ⁹ /l	Basos X 10 ⁹ /l	Metamyelocyte X 10 ⁹ /l	Myelocyte X 10 ⁹ /l	Promyelocyte X 10 ⁹ /l								
7.2	0.5	0.6	0.20	<0.1											
Blast X 10 ⁹ /l	NRBC per 100 WBC	ESR mm/hour	IM Test												
RBC X 10 ¹² /l	Hb g/dl	Hct ratio	MCV fl	MCH pg	RDW %	Plats X 10 ⁹ /l	Other results								
8.9	5.00	15.4	450	90	30.8	12.1	181								
FBC Film							Date of Specimen								
							05 Jan 1996								

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**HAEMATOLOGY
REPORT**Vale of Leven District General Hospital, Alexandria, Dunbartonshire, G83 0UA
Tel: 01389 603865Surname
CAMPBELLPatient ID No
189524Lab Ref No
H411826Source
Dr D. LOGANForename
WilliamDate of birth
02 May 1974Date received
28 Jun 1999**Dumbarton Health Centre 2
Station Road
Dumbarton****4 CARMAN VIEW
DUMBARTON****Male**Date of report
30 Jun 1999

Time

Clinical details:

**GLANDULAR FEVER GLANDS RESOLVED LAST WK FELT
BETTER HEAVY DRINK 2/7 AGO**

Rouleaux.

Reported by Dr M Scullion

NORMAL	
NOTES	
APPOINTMENT	
PRESCRIPTION	1-2 months
P.C.P.I.	
FILE	nk

Please see reverse for normal values.

Neuts X 10 ⁹ /l	Lymph X 10 ⁹ /l	Monos X 10 ⁹ /l	Eosinos X 10 ⁹ /l	Basos X 10 ⁹ /l	Metamyelocyte X 10 ⁹ /l	Myelocyte X 10 ⁹ /l	Promyelocyte X 10 ⁹ /l	Blast X 10 ⁹ /l	NRBC per 100 WBC	ESR mm/hour	IM Test
3.5	1.8	0.5	0.10	0.0							POS
WBC X 10 ⁹ /l	RBC X 10 ¹² /l	HB g/dl	Hct ratio	MCV fl	MCH pg	RDW %	PLATS X 10 ⁹ /l	Other results		Date of Specimen	
5.9	4.63	14.7	.420	90	31.8	13.1	249	FBC-IM-test Film		28 Jun 1999	

JB-12520

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**BIOCHEMISTRY
REPORT**Vale of Leven District General Hospital, Alexandria, Dunbartonshire, G83 0UA
Tel: 01389 603868

Surname CAMPBELL	Patient ID No 189524	Lab Ref No 411826	Source Dr D. LOGAN
Forename William	Date of birth 02 May 1974 ✓	Date received 28 Jun 1999	Dumbarton Health Centre 2
4 CARMAN VIEW DUMBARTON	Male	Date of report 29 Jun 1999	Station Road Dumbarton
		Venous Blood	Time

Critical details:

GLANDULAR FEVER GLANDS RESOLVED LAST WK FELT
BETTER HEAVY DRINK 2/7 AGO

Sodium			
Potassium			
Bicarb			
Urea	3.4	mmol/l (2.5-7.0)	
Creat	87	umol/l (60-120)	
Glucose			
Bilirubin	7	umol/l (3-20)	
AST	30	iu/l (5-40)	
ALT	19	iu/l (2-40)	
CK			
Alk Phos	333 *	iu/l (60-270)	
GammaGT	20	iu/l (4-45)	
Protein	75	g/l (62-80)	
Albumin	42	g/l (37-50)	
Globs	33	g/l (22-33)	

NORMAL	
NOTES	✓ gwen
APPOINTMENT	Repeat
PRESCRIPTION	Alk Phos
PC.RI.	1-2 months
FILE	

Please see reverse for normal ranges

Date of Specimen

LFT

28 Jun 1999

JB-12520A

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BIOCHEMISTRY REPORT		Vale of Leven District General Hospital, Alexandria, Dunbartonshire, G83 0UA Tel: 01389 603868		CPA Accredited
Surname	Patient ID No	Lab Ref No	Source	
CAMPBELL	189524	408543	Dr D. LOGAN	
Forename	Date of birth	Date received	Dumbarton Health Centre 2	
William	02 May 1974	17 Jun 1999	Station Road	
		Date of report	Dumbarton	
4 CARMAN VIEW	Male	22 Jun 1999		
			Venous Blood	Time
Clinical details: LYMPHADENOPATHY - NECK				
Sodium				
Potassium				
Bicarb				
Urea	2.9	mmol/l (2.5-7.0)		
Creat	92	umol/l (60-120)		
Glucose				
Bilirubin	7	umol/l (3-20)		
AST	50 *	iu/l (5-40)		
ALT	46 *	iu/l (2-40)		
CK				
Alk Phos	292 *	iu/l (60-270)		
GammaGT	26	iu/l (4-45)		
Protein	70	g/l (62-80)		
Albumin	38	g/l (37-50)		
Globs	32	g/l (22-33)		
Please see reverse for normal ranges				
LFT				Date of Specimen
				16 Jun 1999

correct name + address
this time

NORMAL	
NOTES	
APPOINT	1-2 weeks
PRESCRIPTION	in book
PCPI	
FILE	

JB-12520A

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HbA1c - GUIDELINES FOR JUDGING DIABETIC CONTROL			
(note that results for Clydebank practices are issued with a different normal range and S.D. guide levels should be followed)			
Normal range	4.2 - 6.4%		(Clydebank 3.8 - 5.8%)
Target value for ideal diabetic control	6.4%	(+ 2 s.d's)	(Clydebank 5.8%)
Values below the target value increase the risk of hypoglycaemia			
European IDDM policy group guidelines 1993			
Good control	<7.0 %	(< + 3 s.d's)	
Borderline control	7.0 - 8.0 %	(+ 3 - 5 s.d's)	
Inadequate control	> 8.0 %	(> + 5 s.d's)	

THYROID FUNCTION			LIPIDS				
TSH	mU/l	0.35 - 5.0			Desirable	Borderline	Abnormal
T4	nmol/l	55 - 144	Cholesterol	mmol/l	<5.2	5.2 - 6.5	>6.5
T3	nmol/l	0.9 - 2.8	Triglyceride	mmol/l	<2.0	2.0 - 2.5	>2.5
Free T4	pmol/l	9 - 24	HDL chol.	mmol/l	>1.0	0.9 - 1.0	<0.9
TBG	mg/l	12 - 30	LDL (calc.)	mmol/l	<4.0	4.0 - 5.0	>5.0

REPRODUCTIVE ENDOCRINOLOGY							
Test	Units	Male	Female				
			follicular	mid-cycle	luteal	postmen.	pre-pubert.
LH	U/l	2 - 12	2 - 15	22 - 90	1 - 19	16 - 64	<3.4
FSH	U/l	1 - 12	3 - 13	9 - 18	1 - 10	18 - 150	0.6 - 3.6
Prolactin	mU/l		<500				2 - 15
Progesterone	nmol/l	<5	<5	-	18 - 72	<5	<5
Oestradiol	pmol/l	<300	180 - 1500	500 - 1500	440 - 800	<200	<40
Testosterone	nmol/l	11 - 36	1.0 - 3.2			1.0 - 3.2	<1
Androstenedione	nmol/l	1.6 - 8.4	0.6 - 8.8			-	<2
D.H.A.S.	μol/l	2 - 9	2 - 11			-	<2
S.H.B.G.	nmol/l	6 - 45	30 - 120			30 - 120	-
Free Androgen index	Test x 100 SHBG	36 - 156	<7			-	-

NHS Confidential: Personal data about a patient

HAEMATOLOGY REPORT		Vale of Leven District General Hospital, Alexandria, Dunbartonshire, G83 0UA Tel: 01389 603865		CPA Accredited												
Surname	Patient ID No	Lab Ref No	Source													
CAMPBELL (name)	189524	H408543	Dr D. LOGAN													
William	Date of birth	Date received	Dumbarton Health Centre 2													
	02 May 1974	17 Jun 1999	Station Road													
		Date of report	Dumbarton													
4 CARMAN VIEW	Male	18 Jun 1999	Time													
DUMBARTON																
Clinical details: LYMPHADENOPATHY - NECK																
Features consistent with infectious mononucleosis. Thrombocytopenia. Suggest repeat in 1-2 weeks. Reported by Dr M Scullion <table border="1"> <tr><td>NORMAL</td><td></td></tr> <tr><td>NOTES</td><td></td></tr> <tr><td>APPOINTMENT</td><td>1-2 weeks</td></tr> <tr><td>PRESCRIPTION</td><td></td></tr> <tr><td>P.C.P.I.</td><td></td></tr> <tr><td>FILE</td><td></td></tr> </table>					NORMAL		NOTES		APPOINTMENT	1-2 weeks	PRESCRIPTION		P.C.P.I.		FILE	
NORMAL																
NOTES																
APPOINTMENT	1-2 weeks															
PRESCRIPTION																
P.C.P.I.																
FILE																
Please see reverse for normal values.																
Neuts X 10 ⁹ /l	Lymph X 10 ⁹ /l	Monos X 10 ⁹ /l	Eosinos X 10 ⁹ /l	Basos X 10 ⁹ /l	Metamyelocyte X 10 ⁹ /l	Myelocyte X 10 ⁹ /l	Promyelocyte X 10 ⁹ /l	Blast X 10 ⁹ /l	NRBC per 100 WBC	ESR mm/hour	IM Test					
3.6	5.0	1.3	0.00	0.1							POS					
WBC X 10 ⁹ /l	RBC X 10 ¹² /l	HB g/dl	Hct ratio	MCV fl	MCH pg	RDW %	PLATS X 10 ⁹ /l	Other results		Date of Specimen						
10.0	4.56	14.4	.420	92	31.6	14.1	117 *	FBC-IM test Film		16 Jun 1999						

NHS Confidential: Personal data about a patient

MICROBIOLOGY REPORT		Vale of Leven District General Hospital, Alexandria, Dunbartonshire, G83 0UA Tel: 01389 603867		CPA Accredited												
Surname CAMPBELL	Patient ID No	Lab Ref No S134727	Source Dr D. LOGAN	<i>[Signature]</i>												
Forename William Thomas	Date of birth 2/5/74	Date received 13 Aug 2001	Dumbarton Health Centre 2													
4 CARMAN VW ✓	Male	Date of report 20 Aug 2001	Station Road													
DUMBARTON			Dumbarton													
Time																
Clinical details: FINISHED ACCELERATED COURSE OF HEP B 2/12 AGO																
Hep B antibody titre 6.4 iu/L		Laboratory Comment Anti HBS titre is less than 10 iu/L (post accelerated course of vaccine) Give 4th dose now and recheck antibody titre in 2-3 months.														
<table border="1"> <tr><td>NORMAL</td><td></td></tr> <tr><td>NOTES <i>2/8/01</i></td><td><i>✓ given</i></td></tr> <tr><td>APPOINTMENT</td><td><i>✓</i></td></tr> <tr><td>PRESCRIPTION</td><td><i>✓</i></td></tr> <tr><td>PC.P.I.</td><td></td></tr> <tr><td>FILE</td><td></td></tr> </table>		NORMAL		NOTES <i>2/8/01</i>	<i>✓ given</i>	APPOINTMENT	<i>✓</i>	PRESCRIPTION	<i>✓</i>	PC.P.I.		FILE		RECEIVED 21 AUG 2001		
NORMAL																
NOTES <i>2/8/01</i>	<i>✓ given</i>															
APPOINTMENT	<i>✓</i>															
PRESCRIPTION	<i>✓</i>															
PC.P.I.																
FILE																
		Specimen Type Blood	Date of Specimen 13 Aug 2001													

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MICROBIOLOGY REPORT		Vale of Leven District General Hospital, Alexandria, Dunbartonshire, G83 0UA Tel: 01389 603867		CPA Accredited
Surname CAMPBELL	Patient ID No. 189524	Lab Ref No. S147390	Source Dr D. LOGAN	
Forename William Thomas	Date of birth 02 May 1974 	Date received 10 Oct 2002	Dumbarton Health Centre 2	
4-4 MERKINS AVE DUMBARTON	Male	Date of report 23 Oct 2002	Station Road Dumbarton	
Clinical details:		Time		
VOMITING. COMPLETED HEP B COURSE AUG 01				
Please see attached form RECEIVED 24 OCT 2002 NOTES PLEASE Jeva 24/10/02 JMC				
Specimen Type		Date of Specimen		
Blood		09 Oct 2002		

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REGIONAL VIRUS LABORATORY			
GARTNAVEL GENERAL HOSPITAL, P.O. BOX 16766, GLASGOW G12 0ZA			
Tel: 0141-211 0080		Fax: 0141-211 0082	
SURNAME CAMPBELL	FORENAME WILLIAM	UNIT NO. 3056	SEX DOB M 02.05.74
SOURCE VALE OF LEVEN HOSP	CONSULTANT	GP DR.A.MITCHELSON	
SPECIMEN serum	LAB NO. V,02.0625579.X	REPORT STATUS Final	YOUR REF. NO. 147390
Anti-HBs Titre :7.1 IU/L Anti-HBs titre is <10 IU/l. Non-responder to hepatitis B vaccination. Recommend 2 additional doses of vaccine (now and 1 month) and re-check titre in 2-3 months. Clinical details			
VIRIOLOGY	DATE COLLECTED 09.10.02	DATE RECEIVED 11.10.02	DATE AUTHORISED 18.10.02
AUTHORISED BY Dr Cameron			
Copy for :VALE OF LEVEN HOSP			

NHS Confidential: Personal data about a patient

**BIOCHEMISTRY
REPORT**Vale of Leven District General Hospital, Alexandria, Dunbartonshire, G83 0UA
Tel: 01389 603868

Surname CAMPBELL	Patient ID No 189524	Lab Ref No B826442	Source Dr D. LOGAN
Forename William	Date of birth 02 May 1974	Date received 10 Oct 2002	Dumbarton Health Centre 2
		Date of report 10 Oct 2002	Station Road
4-4 MERKINS AVE DUMBARTON			Dumbarton
			Serum/plasma
			Time

Clinical details:

VOMITING
COMPLETED HEP B COURSE AUG 01

Sodium				
Potassium				
Bicarb				
Urea	4.5	mmol/l	(2.5-7.0)	
Creat	90	umol/l	(60-120)	
Glucose				
Bilirubin	13	umol/l	(3-30)	
AST	17	iu/l	(5-40)	
ALT	17	iu/l	(2-40)	
CK				
Alk Phos	190	iu/l	(60-270)	
GammaGT	15	iu/l	(4-45)	
Protein	72	g/l	(62-80)	
Albumin	44	g/l	(37-50)	
Globs	28	g/l	(15-35)	

RECEIVED

10 OCT 2002

NORMAL	✓
NOTES	
APPOINTMENT	
PRESCRIPTION	
P.C.P.I.	
FILE	

Please see reverse for normal ranges

LFT

09 Oct 2002

WATERSON & GROVES 01620 658571

NHS Confidential: Personal data about a patient

**HAEMATOLOGY
REPORT**Vale of Leven District General Hospital, Alexandria, Dunbartonshire, G83 0UA
Tel: 01389 603865

Surname CAMPBELL	Patient ID No. 189524	Lab Ref No. H826442	Source Dr D. LOGAN
Forename William	Date of birth 02 May 1974	Date received 10 Oct 2002	Dumbarton Health Centre 2
4-4 MERKINS AVE DUMBARTON		Date of report 10 Oct 2002	Station Road Dumbarton

Time

Clinical details:

VOMITING
COMPLETED HEP B COURSE AUG 01

RECEIVED

10 OCT 2002

NORMAL	
NOTES	
APPOINTMENT	
PRESCRIPTION	
P.C.P.I.	
FILE	

Please see reverse for normal values.

Neuts x 10 ⁹ /l	Lymph x 10 ⁹ /l	Monos x 10 ⁹ /l	Eosinos x 10 ⁹ /l	Basos x 10 ⁹ /l	Metamyelocyte x 10 ⁹ /l	Myelocyte x 10 ⁹ /l	Promyelocyte x 10 ⁹ /l	Blast x 10 ⁹ /l	NRBC per 100 WBC	ESR mm/hour	IM Test
5.3	1.0	0.2	0.10	0.0							
WBC x 10 ⁹ /l	RBC x 10 ¹² /l	HB g/dl	Hct ratio	MCV fl	MCH pg	RDW %	PLATS x 10 ⁹ /l	Other results		Date of Specimen	
6.6	4.90	15.2	0.45	93	31.0	12.1	238	FBC		09 Oct 2002	

NHS Confidential: Personal data about a patient

HAEMATOLOGY REPORT		Vale of Leven District General Hospital, Alexandria, Dunbartonshire, G83 0UA Tel: 01389 817265		CPA Accredited										
Surname	Patient ID No.	Lab Ref No.	Source											
CAMPBELL	189524	H304853	Dr D. LOGAN											
Forename	Date of birth	Date received	Dumbarton Health Centre 2											
William Thomas	02 May 1974	08 Mar 2006	Station Road											
4-4 MERKINS AVE		Date of report	Dumbarton											
DUMBARTON	CHI: 0205743056	08 Mar 2006												
Clinical details:		Time												
NON SPECIFIC RASH														
RECEIVED 09 MAR 2006 <table border="1"> <tr> <td>FILE</td> <td><i>[Signature]</i></td> </tr> <tr> <td>NORMAL</td> <td>✓</td> </tr> <tr> <td>MAKE APPT.</td> <td></td> </tr> <tr> <td>SCRIPT</td> <td></td> </tr> <tr> <td>NOTES</td> <td></td> </tr> </table>					FILE	<i>[Signature]</i>	NORMAL	✓	MAKE APPT.		SCRIPT		NOTES	
FILE	<i>[Signature]</i>													
NORMAL	✓													
MAKE APPT.														
SCRIPT														
NOTES														
Please see reverse for normal values.														
Neuts x 10 ⁹ /l	Lymph x 10 ⁹ /l	Monos x 10 ⁹ /l	Eosinos x 10 ⁹ /l	Basos x 10 ⁹ /l	Metamyelocyte x 10 ⁹ /l	Myelocyte x 10 ⁹ /l	Promyelocyte x 10 ⁹ /l	Blast x 10 ⁹ /l	NRBC per 100 WBC	ESR min/hour	IM Test			
3.3	1.7	0.4	0.10	0.0						5				
WBC x 10 ⁹ /l	RBC x 10 ¹² /l	HB g/dl	Hct ratio	MCV fl	MCH pg	RDW %	PLATS x 10 ⁹ /l	Other results		Date of Specimen				
5.5	4.79	14.7	0.43	90	30.7	12.0	200	FBC ESR		07 Mar 2006				

Ref 13924 B

NHS Confidential: Personal data about a patient

BIOCHEMISTRY REPORT		Vale of Leven District General Hospital, Alexandria, Dunbartonshire, G83 0UA New Tel No 01389 817568 XXXXXX XXXXXX		CPA Accredited										
Surname CAMPBELL	Patient ID No. 189524	Lab Ref No. B304853	Source Dr D. LOGAN											
Forename William Thomas	Date of birth 02 May 1974	Date received 08 Mar 2006	Dumbarton Health Centre 2 Station Road Dumbarton											
4-4 MERKINS AVE DUMBARTON	CHI 0205743056	Date of report 08 Mar 2006	Serum/plasma											
Clinical details: NON SPECIFIC RASH														
Sodium Potassium Bicarb Urea Creat Glucose Bilirubin 12 umol/l (3-30) ALT 20 iu/l (2-40) Alk Phos 215 iu/l (60-270) GammaGT 22 iu/l (4-45) Protein 70 g/l (62-80) Albumin 42 g/l (37-50) Globs 28 g/l (15-35) RECEIVED 09 MAR 2006 <table border="1"> <tr><td>FILE</td><td></td></tr> <tr><td>NORMAL</td><td>✓</td></tr> <tr><td>MAKE APPT.</td><td></td></tr> <tr><td>SCRIPT</td><td></td></tr> <tr><td>NOTES</td><td></td></tr> </table>					FILE		NORMAL	✓	MAKE APPT.		SCRIPT		NOTES	
FILE														
NORMAL	✓													
MAKE APPT.														
SCRIPT														
NOTES														
Please see reverse for normal ranges														
				Date of Specimen 07 Mar 2006										

Ref 13924C

Form FP7

Page 141 of 369

Page 142 of 369

NHS Confidential: Personal data should be protected

Campbell, William
DoB: 02/05/1974

Report Valid On 05/07/06 11:00

Dr S Dunn and Partners
 Page number 1

Registration

Mr William Campbell
 4/4 Merkins Ave
 BELLSMYRE
 DUMBARTON
 G82 3EB

Service Code: Permanent

DoB: 02/05/1974

Age: 32

Telephone:

Contact: 01389 600842

(sister)

Email: ?

CHI Number: 0205743056

NHS Number: 4993485891

Patient ID:

Road: 0 Water: 0 FootPath: 0

Registered GP: Dr S Dunn

BMI: 27.7

Height: 1.9 m

Weight: 100 kg

BP: 120/80

Parity: 0

Gravida: 0

Repeat Medication

Drug/Preparation

Quantity/Dose/Frequency

Start

Last

Pres.

Interval

Review

Adverse Reactions

Read Code

Description

Clinical / User Marker

Date Recorded	Start Date	Priority	Description	Modifier
08/05/2006	None	High	Summarised by Dr J McGlinchey	
04/02/2003	None	High	[D]Alcohol blood level excessive	
29/01/2002	None	High	Refer to psychologist	
16/06/1999	None	High	Glandular fever	

Last 4 Clinical Notes

Date	Clinical Notes
05/05/2006	Automatically generated by transaction
16/03/2006	Automatically generated by transaction
15/03/2006	Automatically generated by transaction

Summary Sheet: summary sheet

Printed at 05/07/2006 11:00:35

1915 Confidential: Personal data about a patient

IMMUNISATIONS AND SCREENING INVESTIGATIONS	National Health Service Number	
	Surname (Block letters) <i>Campbell</i>	Forename (Block letters) <i>William T.</i>
	Address	
		Date of Birth <i>02.05.74</i>

IMMUNISATIONS (insert Date and Batch Number where appropriate)

	Diphtheria	Tetanus	Pertussis	Polio	Meas- les	Rubella	MMR	BCG
Date		<i>21/1/99</i>		<i>13/10/00</i>				
Manufacturer & Batch No.		<i>at A 25</i>		<i>S125 42</i>				
Date								
Manufacturer & Batch No.								
Date								
Manufacturer & Batch No.								
Date								
Manufacturer & Batch No.								
Date								
Manufacturer & Batch No.								
Date								
Manufacturer & Batch No.								

ALLERGIES & HYPERSENSITIVITIES

	Influenza	Hep.B	Typhoid	Cholera	Hep.A	HIV	Hep.B
Date		<i>15/1/01</i>			<i>13/10/00</i>		
Manufacturer & Batch No.					<i>VH6506</i>		
Date		<i>13/3/01</i>					
Manufacturer & Batch No.							
Date		<i>10/4/01</i>					
Manufacturer & Batch No.							
Date		<i>24/5/01</i>					
Manufacturer & Batch No.							
Date							
Manufacturer & Batch No.							

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

Form GP 111H 355—2097

NHS Confidential: Personal data about a patient

		National Health Service Number	505-74-109
CLINICAL NOTES		Surname (Block Letters)	Forenames (Block Letters)
		CAMPBELL	WILLIAM THOMAS
		Address	Date of Birth
		11/13/1911 1911/13/11	2/6/24

Date	
1/9/28	Chickens pox
30/6/28	Also 2° Acute Glandular - only if matter does not get him up at 11 am. Post 26 - 50 for M.S. 4 If no improvement - holding. ? and be lead for both obs.
4/3/28	Disinfect in the class. nearly 90% want to speak through. School report OK. Defiance is most feature. In front of class. Bites in fits. ? Psychopathic personality. Red matter - occasionally runs. The truth was M. ? gave the word.
26/4/28	Can't work with a group. Teacher could try to get to know him. wrote for. Can't get past his 12 years old. bumps, rubs. Calmness. Needs a school problem like a home problem. Briefly described. Line on mouth + date 18 day.
28/12/28	Mollusca Caputurum glandular
	Mollusca Caputurum - (L) acapital
	Tumor gland +
28/1/29	Swampy. Gave nose therapy. - Penicillin 280 mg H.H. Neck glands diminished in size. (R) Inflammation around the throat. went down. Forrows sulphate 100 mg H.H. Repeat 6/12
1/10/29	Fine nose. Advised.
31/10/29	BP 100/60 ht. 54.7 lb. Indistinctly pale of gelatinous No adagath - Appetite good. Mucus mucus
30/3/30	Shown T. S. A. Antons (L) G. .

FORM GP111F

1945 Confidential: Previous data about a patient

Date	*	
21/11/90		Serious & long term
22/11/90		Pharyngeal dysphagia, left breast Removal of it concern
5.3.93	C	Injury to @ hand required 6 stitches o/k flap surgery to @ hand 
24.6.93		Stitches to be removed Monday Sue took 2 1/2 days o/k slightly better 2 beds longer - good KOT. R Parvaneh (60)
16/9/93		Heart attack, Meds left En B. Mon, 20, 93 (20)
26/2/94		Knockdown by car on 20/2/94 Sue at D.O.L. (Nursing) Gm x box at D.O.L. Throbbled with + Fendone both muller. Grant not @ En
7.12.94	C	Thy Vingly / heart 2 days o/k not dysphagia still not R Advice
23/10/95		DNA
6/11/96		Scarlet fever Pharyngitis R Pen V 2500 jds x 28
31/1/96		Dental screen Pen V 250 (20) → Dental

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

AL 53-2502 9/76

1995 Confidential Personal Data about a patient

		National Health Service Number	
CLINICAL NOTES	Surname (Block Letters)	Forenames (Block Letters)	
	Campbell	William	
	Address		Date of Birth
	4 Cornman View Bellsmyre B32 3AP		020574

Date	
24 3 98	New Patient.
	6' 2" 11 3
	Smoker 10-20/yr
	Alcohol. Weekend 20/yr.
	Smoker cannabis/regular
	Exercise - walks.
	PMH. Nil of note
	Allergic Hay fever
	Medicine Nil
	Admitted Glasgow with alcohol/cannabis.
	Obtains no intention sleep
	PC. Says he was taken into Police
	custody 3 night ago Police used force +
	det him
	see over for injuries

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

FORM GP111F
355 2095

NHS Confidential: Personal data about a patient

Pat.

Date	
	Small bruise (L) shoulder 2 1/2 by 2 1/2 cm L/D 2 on bruise medial aspect L elbow cliff from very faint bruise above wrist lateral aspect that means small area 1 cm across anterior aspect knee bruise 3 cm by 2 cm 2 small bruise medial aspect (R) knee 2 as long abrasions knee leg 2 1/2 cm abrasion front aspect (D) ankle superficial abrasion front aspect neck 5 cm by 2 1/2 cm 7 by 1 cm abrasion (R) side back below scapula

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

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NHS Confidential: Personal data about a patient

		National Health Service Number	
CLINICAL NOTES	Surname (Block Letters)	Forenames (Block Letters)	
	Campbell.		William T.
	Address		Date of Birth
			02.05.74

Date	
24/3/98	<i>superficial abrasion back of neck</i> <i>Sus by 2+</i> <i>small bruise</i> <i>2+ by 2+ on</i> <i>marked aspect elbow</i> <i>2 on back elbow</i> <i>diffuse faint bruise</i> <i>2 on back marked aspect</i> <i>1 on forearm</i> <i>pitted number. lateral aspect RS</i> <i>Sus by 1/2</i> <i>side back</i> <i>below scapula</i> <i>bruise</i> <i>2 small bruise</i> <i>marked aspect</i> <i>2 on back</i> <i>2 x 5 big abrasions</i> <i>1 on leg</i> <i>2 on 2+ on abrasions per aspect</i>

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

FORM GP111F
355 2095

NHS Confidential: Personal data about a patient

Date	
16.10.98	(R) Subconjunctival haemorrhage 1 slip to M3. No trauma BP 110 Pupils 5/50. Fund (N) Reassured. O/M
15/11/98	Ibuprofen 600mg t.i.d. x 30 for coccydynia Fell heavily at weekend
16/11/98	Smells of alcohol neck glands - occiput + L.T.M. and sore throat glutamate fever Advised of Alcohol intake 40-600ml 23/6/99
23/6/99	Better 1st weekend Glands disappeared I.M. confirmed Heavy alcohol at weekend again - warned!! Bloods checked again
5 1 00	① Large mouth ulcer the Adenoid - Chakra ② Abscess, neck & pain sore throat o/e Throat very red swollen & purulent Pen V 250 2g x 56 9/8/00
9/8/00	Back from Postnatal Brown L. thumb infection Had a throat Only took cyproxa for 2 days!! didn't finish course. Now has a sore throat given cyproxa to finish course
4/12/00	DNA

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

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1995 Confidential: Personal data about a patient

		National Health Service Number	
CLINICAL NOTES	Surname (Block Letters)	Forenames (Block Letters)	
	Campbell	William	
	Address	Date of Birth	
		02 05 74	

Date	
15/01/01	① Bitten by dog, addict at work. (noodle found in mouth by police) Throat & chest very slight abrasion & small bruise. No bleeding. Disarmed. Casualty. Last bit injury. High risk unavailable. Abused. covered for Tetanus given accelerated course Hep B. ② Anal itching - warts! → go clinic
21/5/01	DNA
13/8/01	Impeygo ② beard - syphilis barbed. Nibo Hep B check 3 jags Fluor 500 g. d. x56
24/9/01	Engix B ENCAPTALL given
21/9/01	① Dam - Depressed ? Anxious loss of appetite sweat works at Flycatcher + lastie as a Barber Anorexia lives with mum Social life OK. - 5 small bottles bone D'Abace at weekend - but only 1 few parts make him sick & check bloods - morning Appt
	BP 120/80
	89.6 kg.
1/11/01	Impeygo again & Fluor 500 g. d. x56
75 1 02	DNA

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

FORM GP111F
355 2095

NHS Confidential Personal data should be stored

Date	
22/1/02	sore throat coughs cough stressed out "highly stressed" OCCASION Had been looking for a job on the Railways was meant to be digging trenches and gone up after to a shift. Is moving into Menhays Ave. Smoking salt - up 5 Throat (the gland) chest clear Sometimes difficult to breathe - tension Loner Psychology to SZ Gravimetric diet. Eaten died - not me it yet
9/7/2	Atorvastatin 20mg 30 Benadryl 8mg 30
26/7/2	Benadryl 8mg 30
9/10/02	wanting for a few weeks Still drinks too much ? gristly Sleeps taken + 1kg 5 seconds By Hamilton 1205 DNA PSYCHIATROLOG
10/1/05	DNA
24/1/05	DNA
4/2/05	Alcohol Abuse Vomit Terrible since New Year large motions Last night went to pub 5 Buds + 3 belgian beer + 4 cans beer. In before 8 cans
* This column has been provided for doctors to enter A, V or C at their discretion Sut 8 cans Friday Drinking Every Day - monthly Unemployed 2 yrs	

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WHS Confidential: Personal data about a patient

		National Health Service Number
CLINICAL NOTES	Surname (Block Letters)	Forenames (Block Letters)
	Campbell	William T.
	Address	
		Date of Birth
		02 05 74

Date	
4/3/05	(1) Alcohol Abuse - over 1000/week
	(2) Gastritis
	(3) wants to stop smoking - must stop alcohol first
	(4) L Knee Pain - came off BMX bike 3/8/02 He thinks he hit it. certainly has a dent but no loss of function and no pain - He even wants to join BUPA
	(5) Hep B vaccine did not take (or won't)
27/4/04	Mometasone nasal spray Rashivastatin
14/11/05	DNA
27/6/05	Became unwell 19/6/05 - UNT1 - stopped work. cold. Last worked last NOV - school familiar to him. He was meant to be on a course of OTI now apart from being fever.
23/8/05	Talcaine Cream for Athletes foot.
22/12/05	Rash on forehead Looks non-specific rash. Virus

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

FORM GP111F
355 2095

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

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

PRINTED FOR ASTRON, B41219 4/05 (017302)

355 2095

		National Health Service Number	
CLINICAL NOTES	Surname (Block Letters) <i>Campbell</i>		Forenames (Block Letters) <i>William T.</i>
	Address		Date of Birth <i>020574</i>

[illegible]

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

FORM GP111F
355 2095

CLINICAL NOTES	National Health Service Number	
	Surname (Block Letters)	Forenames (Block Letters)
	Address	Date of Birth
	Campbell	William Thomas
		02.05.74

[illegible]

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

FORM GP111F
355 2095

		National Health Service Number
CLINICAL NOTES	Surname (Block Letters) <i>Camphell</i>	Forenames (Block Letters) <i>William T.</i>
	Address	Date of Birth <i>020574</i>

[illegible]

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

FORM GP111F
355 2095

[illegible]

Filename: WC_08.pdf
Extension: .tif
Pages:

TEL CALL

Dr. Stephen Dunn & Partners**Wednesday 19th March 2008**PATIENTS NAME
& ADDRESSWilliam Campbell
1 MERKINS AVENUE
DUMBARTON.

DOB

02.05.74

TELEPHONE NUMBER

07853 55 55 48

Presenting Complaint

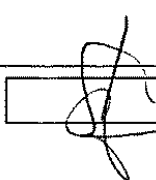
Palpitations - feels worse on antacid.

Advice Given

Appt for ECG / RV tomorrow by myself.

↓
APPT 9.40 20.3.08.PrescriptionIssuedFollow Up

GP Signature



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VALE OF LEVEN HOSPITAL MICROBIOLOGY DEPARTMENT 01389 817567				VERIFIED 85
SRN Number		Patient Address	FLAT 4 4 MERKINS AVENUE DUMBARTON G82 3EB	Division DR J DUNN DUMBARTON HEALTH CTRE 3 DUMBARTON HEALTH CTRE STATION RD DUMBARTON , G82 1PW
CRN	VOL189524	Sex	Male	
Surname	CAMPBELL	Date of Birth	02/05/1974	
Forename	WILLIAM			
Client Details	DYSURIA . NO NAME ON SPEC			Laboratory Ref. No. MU474126L
Specimen Comment				Page 1 of 1
Antibiotic Therapy	Trimethoprim			
Urine Examination Not tested No name on accompanying specimen. Advise Repeat				

Technically Validated By : J Raeside

Reported : 13/07/2007 09:17

Received : 12/07/2007 15:12

MICROBIOLOGY	Midstream Specimen Urine : Urine Examination	Date Collected 12/07/2007 u/k
--------------	--	----------------------------------

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NHSmail - Read

Page 1 of 3



Date: Mon, 21 May 2007 13:00:00 +0100
From: 1-ac-uhb.acpces@nhs.net | [Show headers](#)
Subject: William Campbell
To: 1-ac-uhb.gp85032@nhs.net

Call No.: 54162 NHS ARGYLL AND CLYDE Date:

Call Category: Doctor PCC Priority: Within 4 Hours

Age: 02-May-1974 (Age: 33 years) Patients Name: William Campbell

Current Location: Lomond Healthcare N H S TruHome Address: Flat 4

Vale Of Leven General Hospi 4 Merkins Avenue

Alexandria Dumbarton
 Dunbartonshire G83 0UA Dunbartonshire G8.

Tel. No.: 01389 754121 Tel. No.: 01389 754121

Caller Origin: Walk In Patient Caller Name: Tel. No.:

Gender: Male Community Health Index:

Temporary Resident: Surgery: Health Centre, Dumbarton GP: Logan, De

Reported Condition:

Symptoms: lot feeling very well. symptoms vague

NHS24 Ref.No.: 0 NHS24 Date/Time: 20-May-2007 16:0

<https://webmail02.dcl.nhs.net/wm/mail/read.html?>

21/05/2007

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NHSmail - Read

Page 2 of 3

NHS24 Consultation Start: NHS24 Consultation Complete:

NHS24 Outcome:

NHS24 Clinical Summary:

TIMES:- Arrival time: 16:12 Cons. begin: 16:12

Advice Doctor :
Consulting Doctor: Al-Najim, Ziad

Clinical Notes:
Anxiety disorder

Symptoms of anxiety - 2 episodes recently. Sweats, numb/tingly all over upper
tight & overwhelmed. No obvious trigger. No cardiac/focal neuro/thyroid s,
otherwise.

Calm & collected. Mood & affect ok. NAD o/e of general, CVS, CNS, chest &
musculoskeletal systems.

Breathing & relaxation exercises advice & see own GP for further assessment
management.

Prescribed Medication:

Follow-Ups:

follow up message (Patient To Contact Own GP)

54162 William Campbell

This message may contain confidential and privileged information.
If you are not the intended recipient please accept our apologies.
Please do not disclose, copy or distribute information in this e-mail
or take any action in reliance on its contents: to do so is strictly
prohibited and may be unlawful. Please inform us that this message has
gone astray before deleting it. Thank you for your co-operation.

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21/05/2007

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ARGYLL & BUTE CHP
Accident / Emergency Form

Isle of Mull
Islay
Rothsay
Dunoon
Campbeltown
Lochgilphead

Health Visitor
Name
Address

Hospital **Dunroos**

Surname **Campbell** Forenames **William** Birth Surname

Address **4/4 Merkins Avenue - Dumbarton** Patient's Own Occupation **Bulldozer Fitter**

Postcode **G82 3ER** Telephone No. Date of Birth **02.05.74** Sex **M.** Marital status Religion

Next of Kin: Name Relationship Family Doctor: Surname **Steven Dun** Initials

Address **19/20 Station Rd Dumbarton**

Postcode Telephone No. Postcode Telephone No.

Accident / Emergency: Date of Attendance Previous Attendance at this Hospital Yes / No In / Out Patient Year

Time of Attendance **14.15** Reason for Attendance **Acute anxiety: panic attack**

Date of Injury or Illness Time of Injury Type (Code) **13** Source of Referral **GP**

Road Traffic Accident Place Details

Home Accident Probable Cause

To be completed by Medical Officer after seeing Patient

Dear Doctor

The above named patient attended Accident and Emergency Department today

Diagnosis **Feeling shaky + cold since yesterday. This am while driving worse → shaking, hyperventilating, tingling in hands. Obs all OK. Symptoms settled once calmed.**

X-Ray film / ECG shows

Treatment Given **Pulse 100/min → 80/min. A panic attack + hyperventilation. Recent worries plus drinking heavily. Stressed on loose 1/2 age by GP for alcohol gastritis but still drinking + not eating regularly plus starting viral infection. No Rx. Stop drinking. Eat more veg. Home rest.**

Drugs days supply of + travel back home tomorrow. **Alka Seltzer Clear N.A. Payment.** has been given.

Tetanus / Prophylaxis has / has not been administered TT Course TT Booster HAT (Please tick)

Would you please arrange

Discharge Codes: Please circle

1. Admission	3. Refer to GP	5. Died	7. Irregular Discharge
2. Discharge	4. Transfer to Other Hospital (see below)	6. Refer to GP clinic (see below)	8. DDA

Ward No. (if admitted) Transfer to Hospital Consultant (if admitted)

Follow up Not arranged Arranged To be arranged

Clinic referred to A&E Hand Fracture Ortho Medical Surgical Skin ENT Gyn Others specify

Medical Officers Name (in block capitals) **SHIRLEY HAUNSCHMIDT.** Signature of Medical Officer **S. Haunschmidt**

Cons SR Rag SHO / JHO Clin Assist (Please circle)

GP Copy Pink - Medical records copy Yellow - Health Visitors copy Blue - Treatment card copy White

STY0441D

Scanned Document
19-Jun-2026 AN
Additional: Scanned Document

Filename: WC_07B.pdf
Extension: .tif
Pages:

Call No.:42206
11-May-2008 22:41

NHS ARGYLL AND CLYDE

Date:

Call Category: Doctor PCC
Hours

Priority: Within 4

Age: 02-May-1974 (Age: 34 years)
Campbell

Patients Name: William

Current Location:Flat 4, 4 Merkins Avenue

Home Address: Flat 4

4 Merkins

Avenue

Dumbarton

Dumbarton

G82 3EB

Dunbartonshire G82 3EB

Tel. No.: 07853 555548
754121

Tel.No.: 01389

Caller Origin: Other

Caller Name:

Tel. No.:

Gender: Male

Community Health Index:

Temporary Resident:
Dunn, Stephen

Surgery: Health Centre, Dumbarton GP:

Reported Condition:

SEVERE HEARTBURN 6HRS SEE A/V

\

NHS24 Ref.No.: 5809867
2008 22:33

NHS24 Date/Time: 11-May-

NHS24 Consultation Start: 11-May-2008 22:38 NHS24 Consultation
Complete: 11-May-2008 22:40

NHS24 Outcome: Attend PCEC within 4 Hrs

NHS24 Clinical Summary:

Clinical summary created: 11-May-2008

EPIGASTRIC PAIN FOR 6 HOURS AND PAIN COMING IN WAVES. NO RADIATION
INTO CHEST. TAKEN
GAVISCON AND RENNIES WITHOUT ANY EFFECT. PCEC 4 HOURS. HUB TO RING
WITH APPOINTMENT

Past Medical History:

NIL

Medications:

AS ECS

Allergies:

POLLEN

TIMES:- Arrival time: 00:44 Cons. begin: 00:44

Advice Doctor :
Consulting Doctor: McLachlan, Brian

Clinical Notes:
? Alcohol Gastritis

EPIGASTRIC PAIN FOR 6 HOURS AND PAIN COMING IN WAVES. NO RADIATION
INTO CHEST. TAKEN
GAVISCON AND RENNIES WITHOUT ANY EFFECT. no help from rennies or
gaviscon. rarely gets
heartburn 1 year and uses rennies. 20 + bottles of bud friday night

Sl tender epig. P 78 regular. For Troponin T / UE/ LFT/ Amylase/ ECG

ECG Normal. Bloods normal

Zoton 30mg which needed repeated and IM stemetil 12.5mg BN 7135C41
Exp 02/10

Prescribed Medication:

Follow-Ups:

follow up message (Patient To Contact If Worsens)

follow up message (Ambulance Arranged By Dispatcher)

1 hour ambulance arranged to take patient to rah, incident number
2500778

follow up message (Ambulance Arranged By Dispatcher)

upgraded to 999 on instructions of dr mclachlan

42206 William Campbell

THIRD PARTY COPY

Scanned Document
19-Jun-2026 AN
Additional:Scanned Document

Filename: WC_07.pdf
Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

VALE OF LEVEN HOSPITAL BIOCHEMISTRY DEPARTMENT 01389 817568

VCHEW
31

CHI Number **0205743056** Patient Address **FLAT 4
4 MERKINS AVENUE
DUMBARTON
G82 3EB** Clinician **Registrar**
CRN **VOL189524** Address **DUMBARTON HEALTH CTRE 3
DUMBARTON HEALTH CTRE
STATION RD
DUMBARTON
G82 1PW**
Surname **CAMPBELL** Sex **Male**
Forename **WILLIAM** Date of Birth **02/05/1974**

Clinical Details **ALC XS + STATIN**Fasting Laboratory Ref.
U BC615282APage
1 of 1

Date Reported	GLUCOSE mmol/l	SODIUM mmol/l	POTASSIUM mmol/l	CHLORIDE mmol/l	BICARBONATE mmol/l	UREA mmol/l	CREATININE umol/l	eGFR mls/min
25/03/2009	5.0 (3.0 - 6.0)	139 (135 - 145)	4.2 (3.5 - 5.0)	104 (95 - 105)	23 (23 - 31)	6.5 (2.5 - 7.0)	110 (60 - 120)	>60* (90 - 140)
Time Reported	CRP	ADJ CALCIUM mmol/l	CALCIUM mmol/l	PHOSPHATE	MAGNESIUM	URATE	CK	AMYLASE
18:55								
Date Received		2.45 (2.10 - 2.60)	2.49 (-)					
25/03/2009								
Time Received								
14:34								
Specimen Type	BILIRUBIN umol/l	ALK PHOS u/l	GAMMA GT u/l	AST	ALT u/l	TOTAL PROTEIN g/l	ALBUMIN g/l	GLOBULINS g/l
BLOOD	13 (3 - 30)	81 (33 - 117)	34 (4 - 45)		27 (2 - 40)	79 (62 - 80)	44 (37 - 50)	35 (15 - 35)

Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.

BIOCHEMISTRY

FLIP,LFT,SEP,VGLU,VUE

Date / Time Collection
24/03/2009 15:48

Page 1 of 1

NHS Confidential: Personal data about a patient

VALE OF LEVEN HOSPITAL - HAEMATOLOGY DEPARTMENT 01389 817265

VHFBG
81

CHI Number	0205743056	Patient Address	FLAT 4 4 MERKINS AVENUE DUMBARTON G82 3EB	Clinician	Registrar
CRN	VOL189524			Address	DUMBARTON HEALTH CTRE 3 DUMBARTON HEALTH CTRE STATION RD DUMBARTON G82 1PW
Surname	CAMPBELL	Sex	Male		
Forename	WILLIAM	Date of Birth	02/05/1974		
Clinical Details	ALC XS + STATIN			Laboratory Ref.	Page BL615282X 1 of 1

Normal Adult reference Ranges are for Guidance Only.
They do not take into account age difference.

Date / Time Received	Neut	Lymph	Mono	Eos	Baso	Meta	Myelo	Blast	Others	Atypical Lymph	NRBC
25/03/2009 14:34	10 ⁹ /L (2.0 - 7.5)	10 ⁹ /L (1.5 - 4.0)	10 ⁹ /L (0.2 - 1.0)	10 ⁹ /L (0 - 0.5)	10 ⁹ /L (0 - 0.3)						
Date / Time Reported	2.0	1.5	0.2	0.1	0.5						
25/03/2009 18:47											
Date / Time Collected	WCC	Hb	RCC	Hct	MCV	MCH	RDW	Retic	Platelets	Infectious Mono Screen	ESR
24/03/2009 15:48	10 ⁹ /L (4.0 - 11.0)	g/dl (14.0 - 18.0)	10 ¹² /L (4.6 - 6.2)	L/L (0.420 - 0.520)	fL (80 - 98)	pg (27 - 32)	% (11.0 - 15.0)		10 ⁹ /L (150 - 450)		
	4.3	15.2	4.79	0.42	87	31.8	12.4		212		

Page 170 of 369

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VALE OF LEVEN HOSPITAL BIOCHEMISTRY DEPARTMENT 01389 817568

CHL Number: **0205743056** Patient Address: **FLAT 4
4 MERKINS AVENUE
DUMBARTON
G82 3EB** Clinician Address: **DR J DUNN
DUMBARTON HEALTH CTRE 3
DUMBARTON HEALTH CTRE
STATION RD
DUMBARTON
G82 1PW**

CRN: **VOL189524** Sex: **Male**

Surname: **CAMPBELL** Forename: **WILLIAM** Date of Birth: **02/05/1974**

Clinical Details: **HIGH CHOL** Pasting: **U** Laboratory Ref: **BC580762J** Page: **1 of 1**

Date Reported 08/01/2009	GLUCOSE	SODIUM mmol/l 140 (135 - 145)	POTASSIUM mmol/l 3.9 (3.5 - 5.0)	CHLORIDE mmol/l 106* (95 - 105)	BICARBONATE mmol/l 27 (23 - 31)	UREA mmol/l 5.2 (2.5 - 7.0)	CREATININE umol/l 106 (60 - 120)	eGFR mla/min >60* (90 - 140)
Time Reported 16:42	CRP	ADJ CALCIUM mmol/l 2.43 (2.10 - 2.60)	CALCIUM mmol/l 2.39 (-)	PHOSPHATE	MAGNESIUM	URATE	CK	AMYLASE
Date Received 08/01/2009								
Time Received 15:35								
Specimen Type BLOOD	BILIRUBIN umol/l 9 (3 - 30)	ALK PHOS iu/l 64 (33 - 117)	GAMMA GT iu/l 35 (4 - 45)	AST iu/l 22 (2 - 40)	ALT iu/l 22 (2 - 40)	TOTAL PROTEIN g/l 67 (62 - 82)	ALBUMIN g/l 40 (37 - 50)	GLOBULINS g/l 27 (15 - 35)

Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.

BIOCHEMISTRY **FLIP,LFT,SEP,VUE** Date / Time Collection: **07/01/2009 09:16** Page: **1 of 1**

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VALE OF LEVEN HOSPITAL		BIOCHEMISTRY DEPARTMENT		01389 817568	
CHI Number	0205743056	Patient Address	FLAT 4 4 MERKINS AVENUE DUMBARTON G82 3EB	Clinician	DR J DUNN
GRN	VOL189524			Address	DUMBARTON HEALTH CTRE 3 DUMBARTON HEALTH CTRE STATION RD DUMBARTON G82 1PW
Surname	CAMPBELL	Sex	Male		
Forename	WILLIAM	Date of Birth	02/05/1974		
Clinical Details	HIGH CHOL			Laboratory Ref	BC580762J
				Page	1 of 1

Cholesterol * 8.6 mmol/l
 HDL Cholesterol 1.1 mmol/l
 LDL (calculated) Trig. too High to calculate LDL
 Chol/HDL Ratio 7.8
 Triglycerides * 9.5 mmol/l

Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.		Date / Time Received	08/01/2009 15:35
		Date / Time Reported	08/01/2009 18:40
BIOCHEMISTRY	FLIP,LFT,SEP,VUE	Date / Time Collected	07/01/2009 09:16
		Page	1 of 1

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VALE OF LEVEN HOSPITAL HAEMATOLOGY DEPARTMENT 01389 817265

CHI Number	0205743056	Patient Address	FLAT 4 4 MERKINS AVENUE DUMBARTON G82 3EB	Clinician	DR S DUNN
CRN	VOL189524			Address	DUMBARTON HEALTH CTRE 3 DUMBARTON HEALTH CTRE STATION RD DUMBARTON G82 1PW
Surname	CAMPBELL	Sex	Male		
Forename	WILLIAM	Date of Birth	02/05/1974		
Clinical Details	ALCOHOL XS, PREV HIGH CHOL			Laboratory Ref.	Page BL569177T 1 of 1

Film appearances unremarkable.

Reported by Dr Ellis.

Normal Adult reference Ranges are for Guidance Only.
They do not take into account age difference.

Date / Time Received	Neut	Lymph	Mono	Eos	Baso	Meta	Myelo	Blast	Others	Atypical Lymph	NRBC
04/12/2008 14:54	10 ⁹ /L	10 ⁹ /L	10 ⁹ /L	10 ⁹ /L	10 ⁹ /L						
Date / Time Reported	(-)	(-)	(-)	(-)	(-)						
09/12/2008 15:06	0.0	0.0	0.0	0.0	0.0						
	WCC	Hb	RCC	Hct	MCV	MCH	RDW	Retic	Platelets	Infectious Mono Screen	ESR
	10 ⁹ /L	g/dl	10 ¹² /L	L/L	fL	pg	%		10 ⁹ /L		
	(4.0 - 11.0)	(14.0 - 18.0)	(4.6 - 6.2)	(0.420 - 0.520)	(80 - 98)	(27 - 32)	(11.0 - 15.0)		(150 - 450)		
Date / Time Collected											
03/12/2008 u/k	6.9	14.6	4.59	0.40	87	31.9	12.3		232		

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VALE OF LEVEN HOSPITAL BIOCHEMISTRY DEPARTMENT 01389 817568

CHI Number **0205743056** Patient Address **FLAT 4
4 MERKINS AVENUE
DUMBARTON
G82 3EB** Clinician **DR S DUNN**
CRN **VOL189524** Address **DUMBARTON HEALTH CTRE 3
DUMBARTON HEALTH CTRE
STATION RD
DUMBARTON
G82 1PW**
Surname **CAMPBELL** Sex **Male**
Forename **WILLIAM** Date of Birth **02/05/1974**

Clinical Details **ALCOHOL XS, PREV HIGH CHOL**Fasting Laboratory Ref **U BC569177N** Page **1 of 1**

Date Reported 04/12/2008	GLUCOSE	SODIUM mmol/l 143 (136 - 145)	POTASSIUM mmol/l 3.7 (3.5 - 5.0)	CHLORIDE mmol/l 104 (96 - 105)	BICARBONATE mmol/l 26 (23 - 31)	UREA mmol/l 5.2 (2.5 - 7.0)	CREATININE umol/l 109 (80 - 120)	eGFR ml/min >60* (80 - 140)
Time Reported 16:27	CRP	ADJ CALCIUM mmol/l 2.47 (2.10 - 2.80)	CALCIUM mmol/l 2.49 (-)	PHOSPHATE	MAGNESIUM	URATE	CK	AMYLASE
Date Received 04/12/2008								
Time Received 14:54								
Specimen Type BLOOD	BILIRUBIN umol/l 10 (3 - 90)	ALK PHOS iut 74 (33 - 117)	GAMMA GT iut 37 (4 - 45)	AST iut 25 (2 - 40)	ALT iut 25 (2 - 40)	TOTAL PROTEIN g/l 74 (62 - 82)	ALBUMIN g/l 43 (37 - 50)	GLOBULINS g/l 31 (15 - 35)

Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.

BIOCHEMISTRY	FLIP, LFT, NGLU, SEP, VUE	Date / Time Collection 03/12/2008 u/k	Page 1 of 1
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VALE OF LEVEN HOSPITAL BIOCHEMISTRY DEPARTMENT 01389 817568

CHI Number	0205743056	Patient Address	FLAT 4 14 MERKINS AVENUE DUMBARTON G82 3EB	Clinician Address	DR S DUNN DUMBARTON HEALTH CTRE 3 DUMBARTON HEALTH CTRE STATION RD DUMBARTON G82 1PW
CRN	VOL189524	Sex	Male		
Surname	CAMPBELL	Forename	WILLIAM	Date of Birth	02/05/1974
Clinical Details	ALCOHOL XS, PREV HIGH CHOL	Laboratory Ref.	BC569177N	Page	1 of 1

Cholesterol	7.1	mmol/l
HDL Cholesterol	1.1	mmol/l
LDL (calculated)	Trig. too High to calculate LDL	
Chol/HDL Ratio	6.5	
Triglycerides	* 7.6	mmol/l
NO GLUCOSE RECEIVED	No glucose specimen received.	

Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.

Date / Time Received	04/12/2008 14:54
Date / Time Reported	04/12/2008 16:28

BIOCHEMISTRY	FLIP,LFT,NGLU,SEP,VUE	Date / Time Collected	03/12/2008 u/k	Page 1 of 1
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West Dunbartonshire
Community Health Partnership
Department of Nutrition & Dietetics

Vale of Leven Hospital
Main Street
ALEXANDRIA
G83 0UA



Dr A Sharpe
GP Locum
Dr Dunn & Partners
Dumbarton Health Centre
Station Road
DUMBARTON
G82 1PN

Date: 9th September 2008
Ref: AK

Direct Line: 01389 817237
Fax: 01389 817359

Dear Dr Sharpe

Re:- William Campbell
4/4 Merkins Avenue, Bellismyre, Dumbarton, G82 3EB
CHI: 0205743056

Thank you for referring the above patient to the Department of Nutrition & Dietetics.

Unfortunately, we have been unable to offer Mr Campbell any dietary advice as he failed to attend his appointment on 2nd September 2008. Since he has not been in touch we can only assume that he does not wish to attend. No further appointment has been offered.

We are sorry we have been unable to assist on this occasion.

Yours sincerely

Clair Grieve
Senior Dietitian

NHS Confidential: Personal data about a patient

Dr SH Dunn
Dr J Dunn
Dr S Pow

fine

Dumbarton Health Centre
Station Road
Dumbarton G82 1PW
Tel: 01389 811833
Fax: 01389 811823

11.07.08

Mr William Campbell
4/4 Merkins Avenue
Dumbarton.
G82 3EB

Dear Mr Campbell,

This is just a note to confirm that your repeat blood tests showed a very high cholesterol level but the sugar level was fine. I have done a referral to the dietician and if you wish you can attempt dietary changes for 3 months and then have your cholesterol rechecked to see if this has any benefit. However in light of the very high readings of the fats in your blood you may wish to consider taking treatment for this in the form of a tablet. Please make an appointment to discuss this if you wish to do so.

Yours sincerely,

Dr A. Sharpe



RCGP Scotland
2003-2006

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VALE OF LEVEN HOSPITAL BIOCHEMISTRY DEPARTMENT 01389 817568

Che Number: **0205743056** Patient Address: **FLAT 4, 4 MERKINS AVENUE, DUMBARTON, G82 3EB** Clinician: **DR S DUNN**
 CRN: **VOL189524** Sex: **Male** Address: **DUMBARTON HEALTH CTRE 3, DUMBARTON HEALTH CTRE, STATION RD, DUMBARTON, G82 1PW**
 Forename: **WILLIAM** Date of Birth: **02/05/1974**

Clinical Details: **RAISED TRIGLYCERIDES** Fasting: **U** Laboratory Ref. No.: **BC505245S** Page: **1 of 1**

Date Reported 08/07/2008	GLUCOSE mmol/l 4.1 (3.0 - 6.0)	SODIUM mmol/l 141 (135 - 145)	POTASSIUM mmol/l 3.2* (3.5 - 5.0)	CHLORIDE mmol/l 104 (95 - 105)	BICARBONATE mmol/l 27 (23 - 31)	UREA mmol/l 5.6 (2.5 - 7.0)	CREATININE umol/l 102 (60 - 120)	eGFR ml/min >60* (90 - 140)
Time Reported 16:38	CRP	ADJ CALCIUM mmol/l 2.45 (2.10 - 2.60)	CALCIUM mmol/l 2.43 (-)	PHOSPHATE	MAGNESIUM	URATE	CK	AMYLASE
Date Received 08/07/2008								
Time Received 15:22								
Specimen Type BLOOD	BILIRUBIN umol/l 17 (0 - 30)	ALK PHOS iul/l 68 (33 - 117)	GAMMA GT u/l 35 (4 - 45)	AST u/l	ALT u/l 27 (2 - 40)	TOTAL PROTEIN g/l 71 (62 - 82)	ALBUMIN g/l 41 (37 - 50)	GLOBULINS g/l 30 (15 - 35)

GLU: Normal fasting glucose.

Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.

BIOCHEMISTRY FLIP, GLUF, LFT, VUE Date / Time Collection: **08/07/2008 u/k** Page **1 of 1**

NHS Confidential: Personal data about a patient

VALE OF LEVEN HOSPITAL		BIOCHEMISTRY DEPARTMENT		01389 817568		YOUTH 60
City Number	0205743056	Patient Address	FLAT 4 4 MERKINS AVENUE DUMBARTON G82 3EB	Onlooker Address	DR S DUNN DUMBARTON HEALTH CTRE 3 DUMBARTON HEALTH CTRE STATION RD DUMBARTON G82 1PW	
DOB	VOL189524	Sex	Male			
Surname	CAMPBELL	Forename	WILLIAM	Date of Birth	02/05/1974	
Clinical Details	RAISED TRIGLYCERIDES				Laboratory Ref. No. BC605245S	Page 1 of 1
Cholesterol	8.0	mmol/l				
HDL Cholesterol	1.2	mmol/l				
LDL (calculated)	Trig. too High to calculate LDL					
Chol/HDL Ratio	6.7					
Triglycerides	7.8	mmol/l		(a)		
(a)	Fasting Specimen.					
©						
Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.						
Date / Time Received			08/07/2008 15:22			
Date / Time Reported			08/07/2008 18:40			
Date / Time Collected			08/07/2008 u/x			
BIOCHEMISTRY		FLIP, GLUF, LFT, VUE		Page 1 of 1		

NHS Confidential: Personal data about a patient

Acute Services Division

Clyde Acute Directorate

DEPARTMENT OF SURGERY

Consultant: Mr P J Finn

Date: 30th May 2008

Dictated: 29th May 2008

Ref: PF/KH/AC/522484

Dr Dunn
The Health Centre
Station Road
Dumbarton
G82 1PW

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

NHS

Greater Glasgow
and Clyde

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

Dear Dr Dunn

Re:- William Campbell DOB:- 02.05.74 - 3056
4/4 Mervins Avenue, Bellismyre, Dumbarton, G82 3EB

Admission:- 12.05.08
Discharged:- 12.05.08
Diagnosis:- Non-specific abdominal pain
Follow up:- None

Mr Campbell is a 34-year old gentleman who presented via the NHS24 with a short history of upper abdominal pain. There were no other associated symptoms. The night prior to his presentation he had drunk a significant quantity of alcohol.

On examination he appeared generally well, although he was mildly tender in the epigastric region.

We had some simple investigations performed which included blood tests, which were entirely normal. Specifically his liver function was normal and his amylase was only 80. X-rays of the chest and abdomen added little. His symptoms rapidly resolved and he was discharged home on the day of his presentation. His symptoms probably relate to chemical gastritis and he was given advice about his alcohol intake. No follow up has been arranged.

Yours sincerely

Mr K Hussey
Surgical FT ST A3

Delivering better health

www.nhsggc.org.uk

40374

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VALE OF LEVEN HOSPITAL		BIOCHEMISTRY DEPARTMENT		01389 817568		VC07H
Lab Number	0205743056	Patient Address	FLAT 4 4 MERKINS AVENUE DUMBARTON G82 3EB	Director	DR S DUNN	50
CRN	VOL189524			Address	DUMBARTON HEALTH CTRE 3 DUMBARTON HEALTH CTRE STATION RD DUMBARTON G82 1PW	
Surname	CAMPBELL	Sex	Male			
Forename	WILLIAM	Date of Birth	02/05/1974			
Clinical Details	FASTING CHOL			Laboratory Ref. No.	BC489999W	Page 1 of 1
Cholesterol	* 9.9	mmol/l				
HDL Cholesterol	1.1	mmol/l				
LDL (calculated)	Trig. too High to calculate LDL					
Chol/HDL Ratio	9.0					
Triglycerides	* 9.5	mmol/l				
Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.						
BIOCHEMISTRY		FLIP		Date / Time Received	30/05/2008 14:58	
				Date / Time Reported	30/05/2008 16:21	
				Date / Time Collected	30/05/2008 u/k	Page 1 of 1

NHS Confidential: Personal data about a patient

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

Dr DUNN
The Health Centre
Station Road
Dumbarton

G82 1PW

May 12, 2008

Dear Dr Dunn,
Re. WILLIAM CAMPBELL, 4/4 MERKINS AVE, BELLSMYRE, DUMBARTON

Date of Birth 02.05.74 Hospital Number: 0205743056 CHI Number: 0205743056

Your patient attended Royal Alexandra Hospital, Corsebar Road, on the 12 MAY 2008 02:35.

The presenting complaint was: N24 REF SURG

Triage Information: SEVERE PAIN?

The following investigations were carried out: CHEST X-RAY ABDOMINAL X-RAY

The A&E diagnosis was: GASTRITIS

The following treatment was given: Nil

At the conclusion of treatment the patient was:

Follow-up: Nil

The patient's departure destination was: RAH WARD 24 GENERAL SURGERY

Additional Information: Nil

Yours sincerely,
LOCUM LOCUM
LOCUM EMERGENCY DEPARTMENT DOCTOR

Consultants:

NHS Confidential: Personal data about a patient

Date: 11-May-2008 Case Number: 42206 CHI Number: Case Type: Doctor PCC

Patient Name: William Campbell Sex: M Date of Birth: 02-May-1974 Age: 34 years
 Home Address: Flat 4 4 Merkins Avenue Current Address: Flat 4, 4 Merkins Avenue
 Dumbarton G82 3EB Own Doctor: Dunn, Stephen
 Home Tel: 01389 754121 Surgery: Health Centre, Dumbarton
 Case Origin: Other Receive time NHS24: 10:33 PM
 Caller Name: Tel: PCC [] Home Visit []
 Appointment time: 11:40 PM
 Arrival time: 10:57 PM
 Case Priority: Routine

NHS24 Triaged By: (Nurse Advisor) (Glasgow) Triage Start: 9:38 PM
 Operator's Name: (Non-Clinical User) (Glasgow) Triage Finish: 9:40 PM

Reported condition: SEVERE HEARTBURN 6HRS SEE A/V

Allergies	Medications	Previous Medical History
POLLEN	AS ECS	NIL

Clinical Summary:

Clinical summary created: 11-May-2008
 EPIGASTRIC PAIN FOR 6 HOURS AND PAIN COMING IN WAVES. NO RADIATION INTO CHEST. TAKEN GAVISCON AND RENNIES WITHOUT ANY EFFECT. PCEC 4 HOURS. HUB TO RING WITH APPOINTMENT

Disposition: Contact GP Practice within 4 Hours (as soon as possible) Outcome code: PCC4

Reported Condition: Receive Time: Operator:

Latest Advice Details Consulted by: Advice Begin:
 Advice End:

Latest Consultation Details Consulted By: McLachlan, Brian Cons. Begin: 12:44 AM
 EPIGASTRIC PAIN FOR 6 HOURS AND PAIN COMING IN WAVES. NO RADIATION INTO CHEST. Cons. Finished: 12:46 AM
 TAKEN GAVISCON AND RENNIES WITHOUT ANY EFFECT. no help from rennies or gaviscon.
 rarely gets heartburn 1 year and uses rennies. 20 + bottles of bud friday night

Examination Details: Clinical Codes:
 S/ tender epig. P 78 regular. For Troponin T / UE/ LFT/ Amylase/ ECG J16y4 Dyspepsia
 ECG Normal. Bloods normal

Zoton 30mg which needed repeated and IM stemetil 12.5mg BN 7135C41 Exp 02/10

Diagnosis:
 ? Alcohol Gastritis

Prescription Items:

Follow-up: Patient To Contact If Worsens
 Ambulance Arranged By Dispatcher
 Ambulance Arranged By Dispatcher

Name of attending Gp/Nurse: McLachlan, Brian Signature: _____

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Case Number: 42206

THIRD PARTY COPY

NHS Confidential: Personal data about a patient

VALE OF LEVEN HOSPITAL		BIOCHEMISTRY DEPARTMENT		01389 817568	
CHI Number	0205743056	Patient Address	FLAT 4 4 MERKINS AVENUE DUMBARTON G82 3EB	Clinician	DR S DUNN
CRN	VOL189524			Address	VOL Minor Injuries Unit VALE OF LEVEN HOSPITAL
Surname	CAMPBELL	Sex	Male		
Forename	WILLIAM	Date of Birth	02/05/1974		
Clinical Details	Chest Pain			Laboratory Ref. No.	BC482182D
				Page	1 of 1

Cholesterol	* 8.6	mmol/l
Triglycerides	* 20.6	mmol/l

Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.

BIOCHEMISTRY	AMY,CHOL,LFT,TRIG,VUE	Date / Time Received	12/05/2008 00:06
		Date / Time Reported	12/05/2008 16:40
		Date / Time Collected	12/05/2008 00:06
			Page 1 of 1

NHS Confidential: Personal data about a patient

VALE OF LEVEN HOSPITAL BIOCHEMISTRY DEPARTMENT 01389 817568

DR Number: **0205743056** Patient Address: **FLAT 4
4 MERKINS AVENUE
DUMBARTON
G82 3EB** Clinician: **DR S DUNN**
 Date: **VOL189524** Address: **VOL Minor Injuries Unit
VALE OF LEVEN HOSPITAL**
 Surname: **CAMPBELL** Sex: **Male**
 Forename: **WILLIAM** Date of Birth: **02/05/1974**

Clinical Details: **Chest Pain** Fasting: **U** Laboratory Ref. No.: **BC482182D** Page: **1 of 1**

Date Reported 12/05/2008	GLUCOSE	SODIUM mmol/l 134* (135 - 145)	POTASSIUM mmol/l 3.6 (3.5 - 5.0)	CHLORIDE mmol/l 98 (95 - 105)	BICARBONATE mmol/l 25 (23 - 31)	UREA mmol/l 6.4 (2.5 - 7.0)	CREATININE umol/l 96 (60 - 120)	eGFR mls/min >60* (90 - 140)
Time Reported 00:50	CRP	ADJ CALCIUM mmol/l 2.55 (2.10 - 2.60)	CALCIUM mmol/l 2.53 (-)	PHOSPHATE	MAGNESIUM	URATE	CK	AMYLASE iul 80 (25 - 125)
Date Received 12/05/2008								
Time Received 00:06								
Specimen Type BLOOD	BILIRUBIN umol/l 16 (3 - 30)	ALK PHOS iul 84 (33 - 117)	GAMMA GT iul 34 (4 - 45)	AST iul 21 (2 - 40)	ALT iul 21 (2 - 40)	TOTAL PROTEIN g/l 70 (62 - 80)	ALBUMIN g/l 41 (37 - 50)	GLOBULINS g/l 29 (15 - 35)

Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.

BIOCHEMISTRY **AMY,LFT,VUE** Date/Time Collection: **12/05/2008 00:06** Page **1 of 1**

NHS Confidential: Personal data about a patient

VALE OF LEVEN HOSPITAL BIOCHEMISTRY DEPARTMENT 01389 817568

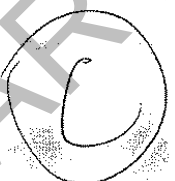
CHI Number	0205743056	Patient Address	FLAT 4 4 MERKINS AVENUE DUMBARTON G82 3EB	Doctor	DR S DUNN	Page	1 of 1
CHI	VOL189524	Sex	Male	Address	VOL Minor Injuries Unit VALE OF LEVEN HOSPITAL		
Surname	CAMPBELL	Forename	WILLIAM	Date of Birth	02/05/1974	Laboratory Ref. No.	BC482182D
Clinical Details	Chest Pain						

Cholesterol	* 8.6	mmol/l
Triglycerides	* 20.6	mmol/l

Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.

BIOCHEMISTRY	AMY, CHOL, LFT, TRIG, VUE	Date / Time Received	12/05/2008 00:06	Date / Time Reported	12/05/2008 16:40	Date / Time Collected	12/05/2008 00:06	Page 3 of 1
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VALE OF LEVEN HOSPITAL		BIOCHEMISTRY DEPARTMENT		01389 817568	
CHI Number	0205743056	Patient Address	FLAT 4 4 MERKINS AVENUE DUMBARTON G82 3EB	GP/Ref	DR S DUNN DUMBARTON HEALTH CTRE 3 DUMBARTON HEALTH CTRE STATION RD DUMBARTON G82 1PW
CHI	VOL189524	Sex	Male		
Surname	CAMPBELL	Date of Birth	02/05/1974		
Forename	WILLIAM				
Clinical Details	PALPATATIONS			Laboratory Ref. No.	Page
				BC462471K	1 of 1
Ferritin	148	ug/l	(30 - 300)		
TSH	1.4	mU/l	(0.15 - 4.0) (a)		
Vitamin B12	320	pg/ml	(180 - 914) (b)		
Serum Folate	5.8	ng/ml	(3.0 - 9.1) (c)		
(a)	Euthyroid levels.				
(b)	Normal vitamin B12 level.				
(c)	Normal serum Folate level.				
					
Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.					
BIOCHEMISTRY		FERR,FOL,LFT,TSH,VBONE,VITB12,		Date / Time Received	20/03/2008 14:58
				Date / Time Reported	25/03/2008 16:40
				Date / Time Collected	20/03/2008 10:26
				Page 1 of 1	

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VALE OF LEVEN HOSPITAL BIOCHEMISTRY DEPARTMENT 01389 817568

VENUE
3

Date Reported: 20/03/2008
 Time Reported: 18:50
 Date Received: 20/03/2008
 Time Received: 14:58
 Specimen Type: BLOOD

Patient Address: FLAT 4
 4 MERKINS AVENUE
 DUMBARTON
 G82 3EB

Clinician Address: DR S DUNN
 DUMBARTON HEALTH CTRE 3
 DUMBARTON HEALTH CTRE
 STATION RD
 DUMBARTON
 G82 1PW

Surname: CAMPBELL
 Forename: WILLIAM
 Sex: Male
 Date of Birth: 02/05/1974

Clinical Details
PALPITATIONSFasting Laboratory Ref. No.
U BC462471KPage
1 of 1

Date Reported 20/03/2008	GLUCOSE	SODIUM mmol/l 139 (135 - 145)	POTASSIUM mmol/l 4.1 (3.5 - 5.0)	CHLORIDE mmol/l 103 (95 - 105)	BICARBONATE mmol/l 28 (23 - 31)	UREA mmol/l 4.7 (2.5 - 7.0)	CREATININE umol/l 90 (60 - 120)	eGFR mls/min >60 (60 - 140)
Time Reported 18:50	CRP	ADJ CALCIUM mmol/l 2.55 (2.10 - 2.50)	CALCIUM mmol/l 2.47 (-)	PHOSPHATE mmol/l 0.84 (0.8 - 1.4)	MAGNESIUM	URATE	CK	AMYLASE
Date Received 20/03/2008								
Time Received 14:58								
Specimen Type BLOOD	BILIRUBIN umol/l 13 (3 - 30)	ALK PHOS u/l 68 (35 - 117)	GAMMA GT u/l 47* (4 - 45)	AST u/l 27 (2 - 40)	ALT u/l 27 (2 - 40)	TOTAL PROTEIN g/l 68 (62 - 80)	ALBUMIN g/l 38 (37 - 50)	GLOBULINS g/l 30 (15 - 35)

Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.

BIOCHEMISTRY
 FERR,FOL,LFT,TSH,VBONE,VITB12
 Date / Time Collection: 20/03/2008 10:26
 Page 1 of 1

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VALE OF LEVEN HOSPITAL		HAEMATOLOGY DEPARTMENT		01389 817265		VHBC 94
CHI Number	0205743056	Patient Address	FLAT 4 4 MERKINS AVENUE DUMBARTON G82 3EB		Clinician Address	DR S DUNN DUMBARTON HEALTH CTRE 3 DUMBARTON HEALTH CTRE STATION RD DUMBARTON G82 1PW
CRN	VOL189524	Sex	Male			
Surname	CAMPBELL	Forename	WILLIAM		Date of Birth	02/05/1974
Clinical Details	PALPITATIONS			Laboratory Ref. No.	BL462471G	
				Page	1 of 1	

Normal Adult reference Ranges are for Guidance Only.
They do not take into account age difference.

Date / Time Received	Neut	Lymph	Mono	Eos	Baso	Meta	Myelo	Blast	Others	Atypical Lymph	NRBC
20/03/2008 14:58	10 ⁹ /L	10 ⁹ /L	10 ⁹ /L	10 ⁹ /L	10 ⁹ /L						
Date / Time Reported	(2.0 - 7.5)	(1.5 - 4.0)	(0.2 - 1.0)	(0 - 0.5)	(0 - 0.3)						
20/03/2008 16:02	3.0	1.5	0.4	0.1	0.0						
	WCC	Hb	RCC	Hct	MCV	MCH	RDW	Retic	Platelets	Infectious Mono Screen	ESR
	10 ⁹ /L	g/dl	10 ¹² /L	L/L	fL	pg	%		10 ⁹ /L		
	(4.0 - 11.0)	(14.0 - 18.0)	(4.6 - 6.2)	(0.420 - 0.520)	(80 - 98)	(27 - 32)	(11.0 - 15.0)		(150 - 450)		
Date / Time Collected											
20/03/2008 10:26	5.0	16.0	5.03	0.44	88	31.8	11.8		187		

Scanned Document
19-Jun-2026 AN
Additional:Scanned Document

Filename: WC_06.pdf
Extension:.tif
Pages:

CH1: 0205743056 02/05/1974 M
CAMPBELL William
474 Perkins Av, G82 3E8
07888334400
Dr S Dunn, 347638
Dr. Stephen H. Dunn, G82 1PW
22/12/2011 08:56 Practice: 0500

Practice Stamp

KNOWN ALLERGIES:

[illegible]

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NHS Greater Glasgow & Clyde

Vale of Leven Hospital, Main Street, Alexandria, G83 0UA

Accident & Emergency Department

Tel: 01389 817538

Fax: 01389 817397

E-Mail: Elaine.Brown@vol.scot.nhs.uk

Consultants:-

Mr. C. Allister Dr. G. McNaughton Dr. I. Young Dr. D. Stoddart Dr D. Gray Dr L. Thomas
Dr N. Mukerjee Dr. S. Hearn Dr. F. Westerduin Dr. A. Corfield Dr A. Newton

RB/EB/
CHI 0205743056

4th January 2012

Soft Tissue Clinic – 20.12.11

Dr S. Dunn
Dumbarton Health Centre
Station Road
DUMBARTON
G82 1PW

Dear Dr Dunn

WILLIAM CAMPBELL DOB 02.05.74
4/4 MERKINS AVENUE, DUMBARTON

I reviewed this patient at the Soft Tissue Clinic today. He initially attended the Minor Injuries Unit yesterday after sustaining a dog bite to his left hand 2 day's previously. He had been applying an Iodine solution to this area which appears to have burnt the skin. He was treated with the wound being thoroughly irrigated, an Atrauman dressing and Vaseline applied to the little and ring finger area. He was also commenced on Co-amoxiclav 625mgs tds.

At review today this chap appears to be much more comfortable. He certainly has a full range of movement of his fingers and there is no evidence of any cellulitis. I have arranged for him to have an Iodine dressing placed over the bite wound and have advised him to continue with Vaseline to the areas where his skin is stained with the Iodine solution. I have advised this chap to attend your Practice Nurse in 3 days time for a dressing change. I have discharged him from our care.

Yours sincerely

DR R. BARRIE
ASSOCIATE SPECIALIST

c.c ENP – Y. Roy

\\XGCG.SCOT.NHS.UK\XGCGData\Folder\Redirects\IGR12\brownel544\My Documents\My Documents\STC-2011\STC20.12.11-RB.doc

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NHS GREATER GLASGOW & CLYDE
DEPARTMENT OF LABORATORY MEDICINE

Vale of Leven Hospital
Main Street
Alexandria G83 0UA



Haematology Consultants: Dr P T Clarke
Dr M G Rainey
Staff Grade: Dr L Marsh
Biochemistry Consultant: Dr J J Series

Tel No: (01389) 817481/497
Fax No: (01389) 817496
Enquiries to: Haematology Secretaries
E-Mail: [REDACTED]

JJS/AMM/189524

11 November 2011

Lipid Clinic 8 November 2011

Dr S Dunn
Health Centre 3
Station Road
Dumbarton

Dear Dr Dunn

William Campbell, DOB 02 05 74, CHI No. 0205743056
4/4 Merkins Avenue, Bellsmyre, Dumbarton

I saw this man, with a mixed hyperlipidaemia, in the lipid clinic this week. Type 3 hyperlipidaemia has been excluded. Checked in the clinic, on a non-fasting sample, his cholesterol was 8.1, triglyceride 15.9 and HDL cholesterol 1.2 mmol/l. I suspect some of this is related to alcohol consumption but nonetheless I discussed the possibility of tablet treatment with him and I would be grateful if you could start him on Bezalip MR 400 mg once daily. This is a slow release bezafibrate.

He is coming back to the clinic in six months time but I have asked him to contact me if he has any questions about this.

Yours sincerely


J J Series
Consultant Clinical Biochemist

cc: Patient

NHS Confidential: Personal data about a patient

ROYAL ALEXANDRA HOSPITAL MICROBIOLOGY DEPARTMENT 0141 314 6172 RMVE 1

CHI Number		Patient Address	FLAT 4 4 MERKINS AVENUE DUMBARTON G82 3EB	Clinician Address	Dr Jennifer McCracken DUMBARTON HEALTH CTRE 3 DUMBARTON HEALTH CTRE STATION RD DUMBARTON G82 1PW
CRN	VOL189524				
Surname	CAMPBELL	Sex	Male		
Forename	WILLIAM	Date of Birth	02/05/1974		

Clinical Details	DIARRHOEA	Laboratory Ref.	ME048747N	Page	1 of 1
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Specimen	Soft faeces, does not conform to shape of container
Antibiotic	Not Stated

Campylobacter species Culture
 Campylobacter sp. not isolated
Cryptosporidium Oocysts
 Cryptosporidium oocysts not seen
E.coli O157 Culture
 E.coli O157 not isolated
Salmonella/ Shigella culture
 Salmonella or Shigella not isolated
Ova Cysts & Parasites
 Ova Cysts & Parasites not seen

Technically Validated By : M Smith

 Printed : 11/11/2011 12:09
 Received : 09/11/2011 16:19

MICROBIOLOGY	Faeces : Faecal Culture	Collected 08/11/2011 17:51
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NHS GREATER GLASGOW & CLYDE
DEPARTMENT OF LABORATORY MEDICINE

Vale of Leven Hospital
Main Street
Alexandria G83 0UA



Haematology Consultants: Dr P T Clarke
Dr M G Rainey
Staff Grade: Dr L Marsh
Biochemistry Consultant: Dr J J Series

Tel No: (01389) 817481/497
Fax No: (01389) 817496
Enquiries to: Haematology Secretaries
E-Mail: [REDACTED]

JJS/AMM/189524

15 August 2011

Lipid Clinic 10 August 2011

Dr S Dunn
Health Centre 3
Station Road
Dumbarton

Dear Dr Dunn

William Campbell, DOB 02 05 74, CHI No. 0205743056
4/4 Merkins Avenue, Bellsmyre, Dumbarton

Thank you for asking me to see this thirty seven year old man with a mixed hyperlipidaemia which was, as far as I can see, an incidental finding. He has no significant history and occasionally uses an antihistamine. He is not currently on any medication. He is trying to stop smoking and does still smoke occasionally and although he drinks alcohol, his consumption is not excessive. There is no family history of ischaemic heart disease.

Checked in the clinic he was euthyroid and a random blood sugar was 4.8. Liver function was normal. Cholesterol was 8.5, triglyceride 11.3 and HDL cholesterol 1.1. I have sent blood for an Apo E genotype to exclude type III hyperlipidaemia as in the unlikely event he has this, it would clarify exactly that he does need to be on treatment. He is not keen on any treatment and is trying hard to improve his life style.

He is coming back to the clinic in three months time but I think if his triglyceride levels don't improve it is likely that he would benefit from fibrate therapy. I have explained to him the variability in his results and the fact that he doesn't particularly need to take a fasting blood sample but obviously if it is non fasting this will account for the change in his results.

Yours sincerely

J J Series
Consultant Clinical Biochemist

cc: Patient

PS: I will notify Mr Campbell when I have the results of his Apo E genotype.

NHS Confidential: Personal data about a patient

VALE OF LEVEN HOSPITAL BIOCHEMISTRY DEPARTMENT 01389 817568

CHL Number: 0205743056 Patient Address: FLAT 4, 4 MERKINS AVENUE, DUMBARTON, G82 3EB Clinician: Unknown

CRN: VOL189524 Sex: Male Address: DUMBARTON HEALTH CTRE 3, DUMBARTON HEALTH CTRE, STATION RD, DUMBARTON, G82 1PW

Surname: CAMPBELL Forename: WILLIAM Date of Birth: 02/05/1974

Clinical Reason for Request: Not Stated

Pasting Laboratory Ref: U BC566708J Page: 1 of 1

Date Reported	GLUCOSE mmol/L	SODIUM mmol/L	POTASSIUM mmol/L	CHLORIDE mmol/L	BICARBONATE mmol/L	UREA mmol/L	CREATININE umol/L	eGFR mla/min
21/07/2011 Time Reported 16:54	4.9 (3.4 - 6.0)	139 (135 - 145)	4.0 (3.6 - 6.0)	102 (96 - 108)	20+ (23 - 30)	6.8 (2.5 - 7.5)	86 (40 - 130)	>60 (80 - 140)
Date Received	CRP	ADJ CALCIUM	CALCIUM	PHOSPHATE	MAGNESIUM	URATE	CK	AMYLASE
21/07/2011 Time Received 15:38								
Specimen Type	BILIRUBIN umol/L	ALK PHOS IU/L	GAMMA GT	AST IU/L	ALT IU/L	TOTAL PROTEIN g/L	ALBUMIN g/L	GLOBULINS g/L
BLOOD	10 (3 - 20)	72 (25 - 110)		24 (5 - 40)	28 (5 - 50)	72 (60 - 80)	38 (32 - 45)	34 (23 - 36)

GLU Normal fasting glucose.

Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.

BIOCHEMISTRY FLIP, GLUF, LFT, VUE Date / Time Collection: 21/07/2011 09:34 Page 1 of 1

NHS Confidential: Personal data about a patient

VALE OF LEVEN HOSPITAL		BIOCHEMISTRY DEPARTMENT		01389 817568	
CHI Number	0205743056	Patient Address	FLAT 4 4 MERKINS AVENUE DUMBARTON G82 3EB	Clinician Address	Unknown DUMBARTON HEALTH CTRE 3 DUMBARTON HEALTH CTRE STATION RD DUMBARTON G82 1PW
CRN	VOL189524	Sex	Male		
Surname	CAMPBELL	Forename	WILLIAM	Date of Birth	02/05/1974
Clinical Details	Reason for Request Not Stated				Laboratory Ref. BC566708J Page 1 of 1
Cholesterol	* 7.8	mmol/L	(3.1 - 5.0)		
HDL Cholesterol	1.1	mmol/L	(0.9 - 1.8)		
LDL Chol(calc)	LDL result not available due to high triglyceride				
Chol/HDL Ratio	6.8				
Triglycerides	* 6.8	mmol/L	(0.0 - 2.3)	(a)	
(a)	Fasting Specimen				
Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference. Date / Time Received 21/07/2011 15:38 Date / Time Reported 21/07/2011 17:24 BIOCHEMISTRY FLIP, GLUF, LFT, VUE Date / Time Collected 21/07/2011 09:34 Page 1 of 1					

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VALE OF LEVEN HOSPITAL HAEMATOLOGY DEPARTMENT 01389 817265

VHPEC
65

CHI Number	0205743056	Patient Address	FLAT 4 4 MERKINS AVENUE DUMBARTON G82 3EB	Clinician Address	Unknown DUMBARTON HEALTH CTRE 3 DUMBARTON HEALTH CTRE STATION RD DUMBARTON , G82 1PW
CRN	VOL189524	Sex	Male		
Surname	CAMPBELL	Forename	WILLIAM	Date of Birth	02/05/1974
Clinical Details	Reason for Request Not Stated			Laboratory Ref.	Page
				BL566708N	1 of 1

Normal Adult reference Ranges are for Guidance Only.
They do not take into account age differences.

Date / Time Received	Neut	Lymph	Mono	Eos	Baso	Meta	Myelo	Blast	Others	Atypical Lymph	NRBC
21/07/2011 15:38	10 ⁹ /L (2.0 - 7.5)	10 ⁹ /L (1.5 - 4.0)	10 ⁹ /L (0.2 - 0.8)	10 ⁹ /L (0.0 - 0.4)	10 ⁹ /L (0.01 - 0.10)						
Date / Time Reported	2.2	1.5	0.5	0.2	0.0						
21/07/2011 16:50											
	WCC	Hb	RCC	Hct	MCV	MCH	RDW	Retic	Platelets	Infectious Mono Screen	ESR
	10 ⁹ /L (4.0 - 11.0)	g/L (130 - 160)	10 ¹² /L (4.50 - 6.50)	L/L (0.45 - 0.55)	fL (78 - 99)	pg (27.0 - 32.0)	% (11.5 - 14.5)		10 ⁹ /L (150 - 400)		
Date / Time Collected	4.4	152	4.99	0.458	92	30.5	12.9		185		
21/07/2011 09:34											

NHS Confidential: Personal data about a patient

VALE OF LEVEN HOSPITAL BIOCHEMISTRY DEPARTMENT 01389 817568

VCNE 68

CHI Number: **0205743056** Patient Address: **FLAT 4
4 MERKINS AVENUE
DUMBARTON
G82 3EB** Clinician: **DR S DUNN**

CRN: **VOL189524** Address: **DUMBARTON HEALTH CTRE 3
DUMBARTON HEALTH CTRE
STATION RD
DUMBARTON
G82 1PW**

Surname: **CAMPBELL** Sex: **Male**

Forename: **WILLIAM** Date of Birth: **02/05/1974**

Clinical Details: **RAISED LIPIDS** Posting: **U** Laboratory Ref: **BC551151J** Page: **1 of 1**

Date Reported 13/06/2011	GLUCOSE	SODIUM mmol/L 138 (135 - 145)	POTASSIUM mmol/L 4.0 (3.5 - 5.0)	CHLORIDE mmol/L 102 (98 - 108)	BICARBONATE mmol/L 23 (23 - 30)	UREA mmol/L 6.0 (2.5 - 7.5)	CREATININE umol/L 81 (40 - 130)	eGFR mls/min >60 (60 - 140)
Time Reported 16:54	CRP	ADJ CALCIUM	CALCIUM	PHOSPHATE	MAGNESIUM	URATE	CK	AMYLASE
Date Received 13/06/2011								
Time Received 15:59								
Specimen Type BLOOD	BILIRUBIN umol/L 9 (3 - 20)	ALK PHOS IU/L 78 (25 - 110)	GAMMA GT	AST IU/L 23 (5 - 40)	ALT IU/L 26 (5 - 50)	TOTAL PROTEIN g/L 73 (60 - 80)	ALBUMIN g/L 39 (32 - 45)	GLOBULINS g/L 34 (23 - 38)

Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.

BIOCHEMISTRY **FLIP,LFT,VUE** Date / Time Collection: **13/06/2011 09:53** Page **1 of 1**

NHS Confidential: Personal data about a patient

VALE OF LEVEN HOSPITAL BIOCHEMISTRY DEPARTMENT 01389 817568

VOOTH
32

CHI Number	0205743056	Patient Address	FLAT 4 4 MERKINS AVENUE DUMBARTON G82 3EB	Clinician Address	DR S DUNN DUMBARTON HEALTH CTRE 3 DUMBARTON HEALTH CTRE STATION RD DUMBARTON G82 1PW
CRN	VOL189524	Sex	Male		
Surname	CAMPBELL	Date of Birth	02/05/1974		
Forename	WILLIAM				
Clinical Details	RAISED LIPIDS			Laboratory Ref.	BC551151J
				Page	1 of 1

Cholesterol	* 9.9	mmol/L	(3.1 - 5.0)
HDL Cholesterol	1.0	mmol/L	(0.9 - 1.8)
LDL Chol(calc)	LDL result not available due to high triglyceride		
Chol/HDL Ratio	Calculated result not available.		
Triglycerides	* 11.8	mmol/L	(0.0 - 2.3)

Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.

Date / Time Received 13/06/2011 15:59
Date / Time Reported 13/06/2011 17:25

BIOCHEMISTRY	FLIP,LFT,VUE	Date / Time Collected 13/06/2011 09:53	Page 1 of 1
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NHS Confidential: Personal data about a patient

VALE OF LEVEN HOSPITAL		BIOCHEMISTRY DEPARTMENT		01389 817568		VOOTH 90
CHI Number	0205743056	Patient Address	FLAT 4 4 MERKINS AVENUE DUMBARTON G82 3EB	Clinician Address	DR S DUNN DUMBARTON HEALTH CTRE 3 DUMBARTON HEALTH CTRE STATION RD DUMBARTON G82 1PW	
CRN	VOL189524	Sex	Male			
Surname	CAMPBELL	Forename	WILLIAM	Date of Birth	02/05/1974	
Clinical Details	CHOL 8.9, OVERWEIGHT				Laboratory Ref.	Page BC547331B 1 of 1
Cholesterol	* 10.0	mmol/L	(3.1 - 5.0)			
HDL Cholesterol	1.1	mmol/L	(0.9 - 1.8)			
LDL Chol (calc)	LDL result not available due to high triglyceride					
Chol/HDL Ratio	Calculated result not available.					
Triglycerides	* 11.7	mmol/L	(0.0 - 2.3)			
TSH	0.90	mU/L	(0.35 - 4.0) (a)			
Free T4	12.8	pmol/L	(9.0 - 21.0)			
(a)	Euthyroid levels.					
Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.				Date / Time Received	03/06/2011 12:19	
				Date / Time Reported	06/06/2011 12:25	
BIOCHEMISTRY		FLIP,HIL,SEP,TFT		Date / Time Collected	02/06/2011 14:05	
					Page 1 of 1	

NHS Confidential: Personal data about a patient**NHS Greater Glasgow & Clyde OOH Services**

Call No: **3144122** Date: **01 Jun 2011** Time of Call: **18:04**
 Patient's Name: **William Campbell** DOB: **02/05/1974** Age: **37** Y
 Address Today: **Flat 4, 4 Merkins Avenue** Home Address If different: **Flat 4, 4 Merkins Avenue**

Dumbarton **Dumbarton**
Intercom/Buzzer Entry **Intercom/Buzzer Entry**
 Post Code: **G82 3EB** Post Code: **G82 3EB**
 Phone Number Today: **(07888) 334 400** Home Phone If different: **(01389) 605 627**
NHS24 Call ID : 10280186

Callers Name: Relationship to patient:

Name of GP: **Dunn Stephen** Practice No:

Surgery: **A 6 Health Centre Dumbarton (Dunn)** Cipher No:

Address: **Station Road DUMBARTON G82 1PW** Fax No:

Speed Dial:

Call Type: **No Action Required by Co- NOT GIVEN** NHS24 Time Passed:

Receptionist's Name: **HF** Time Arrived: Time Complete: **01/06/2011 18:05:12**

Patient's Complaint: **Patient's Complaint:**
 UNKNOWN HOW LONG IT HAS BEEN THERE. [REDACTED] HAS BEEN TAKING MEDS
 FOR IPETIGO NOW GONE, 1 WEEK AGO ((Non-Clinical User) (Cardonald))
 HAS DONE GLASS TEST, RASH REMAINED UNDER GLASS. ((Non-Clinical User) (Cardonald))
 PASSED AS S&U DUE TO ADD VIEW ((Nurse Advisor) (Aberdeen))

 CB RASH ON BACK 30 MINS SEE AV

Clinical summary created by: (Nurse Advisor) (Cardonald) [01/06/2011 18:08:31]
 RASH TO LEFT SIDE OF BACK FOR 1 HOUR AND NOTED RED SMOOTH SPOTTY RASH SIZE OF PALM OF HAND
 AT LEFT MID BACK AT BASE OF RIBS. NIL PAIN OR ITCH. BLANCHES WITH PRESSURE. NO OTHER
 SYMPTOMS, FEELS WELL BUT CONCERNED AS PARTNER PREGNANT AND LOOKS SIMILAR TO SHINGLES
 TYPE RASH. ADVISED TO TAKE ANTIHISTAMINE AS PRECAUTION MEANTIME AND IF PERSISTS SEE OWN GP
 TOMORROW FOR REASSURANCE. WORSENING STATEMENT GIVEN

TO BE CALLED BACK: Your call will be placed on a queue and will be prioritised and monitored. We will aim to call back within three hours.

WORSENING: Whilst waiting for a return call, if symptoms change, or any new symptoms develop, call us back immediately.

The symptoms reported during this call suggest that the individual should be assessed by the GP practice within the next 36 hours.

WORSENING: If symptoms persist, worsen or any new symptoms develop, call us back or contact the GP practice when the surgery reopens.

Remarks: TO BE CALLED BACK: Your call will be placed on a queue and will be prioritised and monitored. We will aim

BP: PR: per min Temp:

Clinical Notes:

Triage Doctor

Follow Up:

NHS Confidential: Personal data about a patient

Consultation(s):

By:

Start:

Finish

THIRD PARTY COPY

NHS Confidential: Personal data about a patient

NHS GG&C Smokefree Pharmacy Service

To : Dr Dunn

Date : 24/11/2010

Re Patient Campbell, Mr William

DoB : 02/05/1974

- **Set the following Quit Date with the Pharmacy Service :** 14/05/2010
- **At Pharmacy :** Bellismyre Pharmacy, 7c Merkins Avenue, G82 3EB
- **Progress at 4 weeks post Quit-Date** ceased smoking

NHS Confidential: Personal data about a patient

Vale of Leven District General Hospital
A & E Department
Minor Injuries/Medical Assessment Unit
Main St. Alexandria G83 0UA 01389 817345

Dr DUNN
The Health Centre
Station Road
Dumbarton

G82 1PW

July 13, 2010

Dear Dr Dunn,
Re. WILLIAM CAMPBELL, 4/4 MERKINS AVE, BELLSMYRE, DUMBARTON, G82 3EB

Date of Birth 02.05.74 Hospital Number: 0205743056 CHI Number: 0205743056

Your patient attended Vale of Leven District General Hospital on the 13 JUL 2010 15:35.

The presenting complaint was: **ASSAULTED SATURDAY NIGHT - PAIN / LUMP LEFT UPPER CHEST**

Triage Information:

The following investigations were carried out: **Nil**

The A&E diagnosis was: **CHEST TRAUMA - BLUNT CHEST INJURY - LEFT**

The following treatment was given: **CHEST/RIB INJURY ADVICE CARD GIVEN**

At the conclusion of treatment the patient was:

Follow-up: **Nil**

The patient's departure destination was: **DISCHARGED**

Additional Information: **Pt c/o left upper chest wall pain, after alleged assault 3/7 ago. C/o pain on movement and deep inspiration whilst working over past 2/7. No SOB/no chest pain. no radiation. Obs normal. breath sounds normal. Chest advice provided, to attend gp/A&E if any further concerns of increase in symptoms.**

Yours sincerely,
GILLIAN ELLIS
EMERGENCY NURSE PRACTITIONER

Consultants:

NHS Confidential: Personal data about a patient

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

Dr DUNN
The Health Centre
Station Road
Dumbarton

G82 1PW

July 11, 2010

Dear Dr Dunn,

~~Re: WILLIAM CAMPBELL, 4/4 MERKINS AVE, BELLSMYRE, DUMBARTON, G82 3EB~~

Date of Birth 02.05.74 Hospital Number: 0205743056 CHI Number: 0205743056

Your patient attended Royal Alexandra Hospital, Corsebar Road, on the 11 JUL 2010 13:21.

The presenting complaint was: **FACIAL INJURY**

Triage Information: **ALLEGED ASSAULT YESTERDAY BY 3 ASSAILLENTS. KICKED AND PUNCHED ABOUT FACE AND HEAD. NO LOC. ATTENDED VOL DID NOT WAIT FOR AMBULANCE TRANSFER. O/A BRUISING SWELLING LACERATION TO NOSE. • PAIN?**

The following investigations were carried out: **FACIAL X-RAYS**

The A&E diagnosis was: **CONTUSION - FACE - FRONT**

The following treatment was given: **Nil**

At the conclusion of treatment the patient was:

Follow-up: **Nil**

The patient's departure destination was: **DISCHARGED**

Additional Information: **Nil**

Yours sincerely,
GARY MANSON
EMERGENCY MEDICINE STAFF GRADE

Consultants:

NHS Confidential: Personal data about a patient**NHS Greater Glasgow & Clyde OOH Services**

Call No: **2868948** Date: **11 Jul 2010** Time of Call: **00:22**
 Patient's Name: **William Campbell** DOB: **02/05/1974** Age: **36** Y

Address Today: **Lomond Healthcare N H S Trust** Home Address If different: **Flat 4**
Vale Of Leven General Hospital North Main Street **4 Merkins Avenue**

Alexandria**Dumbarton**Post Code: **G83 0UA**Post Code: **G82 3EB**Phone Number Today: **(01389) 754 121**Home Phone If different: **() -**NHS24 Call ID : **0**

Callers Name:

Relationship to patient:

Name of GP: **Dunn Stephen**

Practice No:

Surgery: **A 6 Health Centre Dumbarton (Dunn)**

Cipher No:

Address: **Station Road DUMBARTON G82 1PW**

Fax No:

Speed Dial:

Call Type: **Walk In - MIU**Priority **3** Within **90**Time Passed: **00:45**Receptionist's Name: **LINDM**Time Arrived: **11/07/2010**Time Complete: **11/07/2010 00:44:46****Patient's Complaint:**

been kicked in head and face nose

Patient's Complaint:**Remarks:** a+e rah

BP:

PR: per min

Temp:

Clinical Notes:Triage Doctor **A233**Follow Up: **A & E Follow Up****Consultation(s):****By:** McGonigle Robert**Start:** 11/07/2010 00:32:03**Finish** 11/07/2010 00:44:00

Clinical Assessment Details

Started-11/07/2010 00:32:03

Finished-11/07/2010 00:44:00

History

victim of assault this evening-at bbq-kicked on head and face a number of times-not kod-has been drinking nasty
 laceration at base of nose/philtrum and left nostril also number of haematomas on head-no obvious fracture of skull
 clinically no other injury noted

Examination

smells of alcohol/peria gcs-15/15 bp-141/90 mmhg sat-98 % p-110 reg 3/4 inch laceration-top of philtrum/nostil-
 left side heamatomas x 3 on head-no obvious skull fracture or other bony injury

Diagnosis

head injury philtrum/nasal laceration

Treatment

d/w rah a+e and also plastics gri head injury obs at rah-plastics will see tomorrow if rah unhappy to suture wound
 advised sent in ambulance to rah

Clinical Coding

Clinical code: S646. (Head injury)

Clinical code: R047. ((D)Epistaxis)

Prescription Details

NHS Confidential: Personal data about a patient

VALE OF LEVEN HOSPITAL BIOCHEMISTRY DEPARTMENT 01389 817568

CHI Number	0205743056	Patient Address	FLAT 4 4 MERKINS AVENUE DUMBARTON G82 3EB	Clinician	Unknown
CRN	VOL189524			Address	DUMBARTON HEALTH CTRE 3 DUMBARTON HEALTH CTRE STATION RD DUMBARTON G82 1PW
Surname	CAMPBELL	Sex	Male		
Forename	WILLIAM	Date of Birth	02/05/1974		
Clinical Details	RESTARTED STATIN	Fasting	U	Laboratory Ref.	BC589633K
				Page	1 of 1

Date Reported 15/03/2010 Time Reported 15:42	GLUCOSE	SODIUM mmol/L 139 (135 - 145)	POTASSIUM mmol/L 3.9 (3.5 - 5.0)	CHLORIDE mmol/L 104 (98 - 108)	BICARBONATE mmol/L 22* (23 - 30)	UREA mmol/L 5.4 (2.5 - 7.5)	CREATININE umol/L 83 (40 - 130)	eGFR >60
Date Received 16/03/2010 Time Received 14:44	CRP	ADJ CALCIUM	CALCIUM	PHOSPHATE	MAGNESIUM	URATE	CK	AMYLASE
Specimen Type BLOOD	BILIRUBIN umol/L 9 (3 - 20)	ALK PHOS iU/L 82 (40 - 150)	GAMMA GT	AST iU/L 21 (5 - 40)	ALT iU/L 29 (5 - 50)	TOTAL PROTEIN g/L 75 (60 - 80)	ALBUMIN g/L 42 (32 - 45)	GLOBULINS (-)

Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.

BIOCHEMISTRY	LFT,SEP,VUE	Date / Time Collection 15/03/2010 11:20	Page 1 of 1
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NHS Confidential: Personal data about a patient

CLYDE DIVISION

Surgical & Anaesthetics Directorate

Orthopaedic Department

Consultant **Mr M Durrani**

Secretary **Mrs Martha Allander**

E-mail: [REDACTED]

Royal Alexandra Hospital
Corsebar Road
PAISLEY
PA2 5PN
Tel: 0141-887 9111
Fax: 0141-887 4387



Date: 18 November 2009
Clinic: 5 November 2009
Our Ref: MHD/CM/VOL189524

Direct Line: 0141-314 7361
Fax: 0141-314 7275

Dr Mann
Consultant Neurophysiologist
Southern General Hospital
Glasgow

Dear Dr Mann

William Campbell D.O.B. 02.05.74 CHI: 0205743056
4/4 Merkins Avenue, Bellismyre, Dumbarton

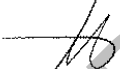
I would be much obliged if you could perform nerve conduction studies on this gentleman, who is complaining of tingling sensations in the distribution of ulnar nerve in both hands. Symptoms have been prevalent for several months. He gets tingling along medial border of hand, little finger and ulnar half of ring finger in both hands. He denies any neck problem. General health otherwise remains satisfactory. He takes statins for hypercholesterolemia.

On examination, cervical spine shows full ranges of pain-free movements. Both shoulders are mobile. No wasting of muscles in either hand. Tinel's sign at left cubital fossa is vaguely positive. Otherwise, there is no motor deficit in the distribution of ulnar nerves. Radial pulses are palpable.

Symptoms are vague, but nerve conduction studies may help in pinning out the root cause.

Many thanks for your help.

Yours sincerely


M H Durrani
Consultant Orthopaedic Surgeon

C.C. Dr Dunn
Dumbarton Health Centre
Station Road
Dumbarton

NHS Confidential: Personal data about a patient



VALE OF LEVEN HOSPITAL

Main St. Alexandria, G83 OUA
Department of Orthopaedics

Tel: 01389 817446

Fax : 01389 817397

Clinical Director : Mr M McKirdy
Directorate Manager :

Email: [REDACTED]

Consultants : Mr S L Chitnis Mr S Smith Mr Gam Ayana
 Mr P K Sharma Mr T Azzopardi Mr V Kavouriadis

VK/AC/189524

19TH AUGUST 2009

ORTHOPAEDIC CLINIC DHC – 14/08/09

DR S DUNN
HEALTH CENTRE
STATION ROAD
DUMBARTON

Dear Dr Dunn

WILLIAM CAMPBELL, DOB 02/05/74
CHI.NO 0205743056
4/4 MERKINS AVENUE, DUMBARTON

I reviewed this gentleman in clinic today regarding his bilateral sensation of pins and needles in the two ulnar digits of his hands. He said that his symptoms are getting worse in the morning and his three radial digits are not giving him any trouble. He does not feel any loss of power and he is not dropping objects. Tinel test was negative in his cubital tunnel and in the ~~geons~~ ^{Carpus} canal. Phalen test was negative. Although it does look like ulnar nerve compression, because of the negative Tinel sign I will send him for nerve conduction studies to clarify whether it is a peripheral compression or there is something else going on. I will review him again with the results of his nerve conduction studies.

Yours sincerely

MR V KAVOURIADIS
CONSULTANT ORTHOPAEDIC SURGEON

NHS Confidential: Personal data about a patient

**West Dunbartonshire**
Community Health PartnershipDumbarton Joint Hospital
Cardross Road
Dumbarton
G82 5JATel: 01389 812014
Fax: 01389 764677**CONFIDENTIAL**
Dr Miller
Dumbarton H.C
Station Rd
Dumbarton
G83 1PWDate: 15/04/09
Our Ref: GAC/JL
Direct line: 01389 812014

Dear Dr Miller

RE: William Campbell DOB/CHI: 02/05/74 0205743056
4/4 Merkins Ave, Dumbarton, G82 3EB

Thank you for referring Mr Campbell to the Lomond Alcohol Service. He attended for assessment on Monday 06/04/09, he breathalysed negative, however he was not feeling great, as he drank heavily last night. He states that his drinking tends to be heavier at the weekend, drinking wine and cans of lager. He denies any significant withdrawals.

Due to no medical cover until 20/04/09, I scheduled a further appointment for today (15/04/09), however Mr Campbell did not attend. I contacted him via telephone and spoke to him about whether he would still like to attend the LAS for support to achieve a period of abstinence, unfortunately he declined our offer and would like to give abstinence "a go himself". He also indicated that he did not agree with the questions being asked in the assessment, he felt it was unnecessary, however he did not elaborate on exactly what he was unhappy about. The question and topic discussed in the assessment follow the specialist Addiction Supplement and adult Single Shared Assessment.

I advised Mr Campbell that if he would like help in the future, not to hesitate in getting re-referred back to us.

Therefore I have now discharged Mr Campbell from the service.

Yours Sincerely,

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

Gemma A Cowan
Staff Nurse LAS

NHS Confidential: Personal data about a patient

VALE OF LEVEN HOSPITAL		BIOCHEMISTRY DEPARTMENT		01389 817568		VOOTH 89
CHI Number	0205743056	Patient Address	FLAT 4 4 MERKINS AVENUE DUMBARTON G82 3EB	Clinician Address	Registrar DUMBARTON HEALTH CTRE 3 DUMBARTON HEALTH CTRE STATION RD DUMBARTON G82 1PW	
CRN	VOL189524	Sex	Male			
Surname	CAMPBELL	Forename	WILLIAM	Date of Birth	02/05/1974	
Clinical Details	ALC XS + STATIN			Laboratory Ref.	BC615282A	Page 1 of 1
Cholesterol	* 8.9	mmol/l				
HDL Cholesterol	1.0	mmol/l				
LDL (calculated)	Trig. too High to calculate LDL					
Chol/HDL Ratio	8.9					
Triglycerides	* 11.6	mmol/l				
Normal Adult Reference Ranges are for Guidance Only. They do not take into account age difference.				Date / Time Received	25/03/2009 14:34	
				Date / Time Reported	25/03/2009 18:57	
BIOCHEMISTRY		FLIP,LFT,SEP,VGLU,VUE		Date / Time Collected	24/03/2009 15:48	
				Page 1 of 1		

Scanned Document
 19-Jun-2026 AN
 Additional:Scanned Document

Filename: WC_05.pdf
 Extension:.tif
 Pages:

ACUTE SERVICES DIVISION

Physiotherapy Department
Royal Alexandra Hospital
Corsebar Road
Paisley
PA2 9PN



Clyde Acute Directorate

Tel: 0141 3146124/3147112

Referral Source

ortho

Date

06/12/12

Dear

Mr Macdonald. DV Dunn

Patient's Name

William Campbell. DOB 02/05/74 CHI 3056

Address

4 Casman ViewDumbartonPost code G82 3AX

He/She accessed treatment for

following trauma refer to infection & multiple wash-outs

He/She attended from

06/12/12 - FIA

to

after discharging

The patient is now discharged because :

Patient cancelled further treatment

☐

Fully resolved

☐

Failed to complete course of treatment

☐

Significantly improved

☐

Given telephone advice/exercises

☐

Partially resolved

☐

On hold and no further help sought

☐

Unchanged

☐

Referred on elsewhere

Worse

☐

As you know, this patient was offered several appointments for physiotherapy, including one for today - when he could be seen immediately after his appointment with you. He declined them all and failed to attend physio. & also, I think, his review appointment with yourself. Therefore, he has not been seen

Signature

E.O. Mara

Designation

Senr Physio

Part 1 - To Referring Practitioner
(White copy)

Part 2 - Remain in Physiotherapy Notes
(Yellow copy)

Part 3 - With patient if requested
(Blue copy)

STV30549

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Immediate Discharge Letter

Dr. SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton
G82 1PW

NHS
Greater Glasgow
and Clyde

Royal Alexandra Hospital
Corsebar Road
Paisley
PA2 9PN

Main Switchboard: 0141-887-9111

Date of Completion: 27/11/2012

Highly Sensitive: No
Consent for Sharing Withheld: No

Dear Dr SH Dunn,

Patient

Name: Campbell William
CHI: 0205743056
DOB: 02 May 1974
Address: 4 Carman View
Dumbarton
G82 3AX

Long Term Conditions:

Admission

Admitted: 08/10/2012 16:02
Discharged:
Admission Type: In Patient
Discharge to:
Consultant: Mr Duncan MacDonald
Specialty: Orthopaedics
Ward: RAH 22 - A&E/
Orthopaedics
Ward Tel: 0141 314 7022
Ward Fax:

Reason for Admission: Admission for treatment - Where the patient is expected to be treated for a
diagnosed condition not otherwise specified

Treatments: None recorded.

Copy 2 of 3 - Copy for GP

Page 1 of 2

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Clinical Comments:

This man was admitted for a washout and debridement of his left ring finger. He was advised to stay in hospital on IV antibiotics but has decided to go home on oral antibiotics. For PO Flucloxacillin 1G QID for 7/7. R7V in #clinic on 15/10/12 with Mr MacDonald

Follow-up arranged?:

Requested Outpatient
Investigations:

Final Discharge letter to follow:

Medication Info:

Allergies:

Height: cm

Weight: kg

Discharge Medication:

Medicine	Formulation	Route	Dose	UOM	Frequency	Duration
Flucloxacillin Capsules	Capsules	Oral	1000	MG	FOUR Times a Day	7 Days
Pharmacy Comment: 56x 500mg medreich						
Ibuprofen Tablets	Tablets	Oral	400	MG	THREE Times a Day	Indefinite
Pharmacy Comment: 24 M@A						
Co-codamol 30/500 Tablets	Tablets	Oral	2	TABS	FOUR Times a Day	Indefinite
Pharmacy Comment: 60 M@A						

New Medication Started:

Medication Comment:

Medication compliance aid:

Discontinued Medication:

Yours sincerely,

Paul Goley

Doctor

cc. 1. Dr SH Dunn

Prescription Review

Medications Reviewed by Pharmacist:

Dispensed Medications Checked by Pharmacy: Pamela Watson, Pharmacist

Nurse discharging patient: Harriet Gibson, Nurse

Copy 2 of 3 - Copy for GP

Page 2 of 2

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Immediate Discharge Letter

Dr. SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton
G82 1PW



Royal Alexandra Hospital
Corsebar Road
Paisley
PA2 9PN

Main Switchboard: 0141-887-9111

Date of Completion: 27/11/2012

Highly Sensitive: No
Consent for Sharing Withheld: No

Dear Dr SH Dunn,

Patient

Name: Campbell William
CHI: 0205743056
DOB: 02 May 1974
Address: 4 Carman View
Dumbarton
G82 3AX

Long Term Conditions:

Admission

Admitted: 08/10/2012 16:02
Discharged:
Admission Type: In Patient
Discharge to:
Consultant: Mr Duncan MacDonald
Specialty: Orthopaedics
Ward: RAH 22 - A&E/
Orthopaedics
Ward Tel: 0141 314 7022
Ward Fax:

Reason for Admission: Admission for treatment - Where the patient is expected to be treated for a
diagnosed condition not otherwise specified

Treatments: None recorded.

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Clinical Comments:

This man was admitted for a washout and debridement of his left ring finger. He was advised to stay in hospital on IV antibiotics but has decided to go home on oral antibiotics. For PO Flucloxacillin 1G QID for 7/7. R?V in #clinic on 15/10/12 with Mr MacDonald

Follow-up arranged?:

Requested Outpatient
Investigations:

Final Discharge letter to follow:

Medication Info:

Allergies:

Height: cm

Weight: kg

Discharge Medication:

Medicine	Formulation	Route	Dose	UOM	Frequency	Duration
Flucloxacillin Capsules	Capsules	Oral	1000	MG	FOUR Times a Day	7 Days
Pharmacy Comment: 56x 500mg medreich						
Ibuprofen Tablets	Tablets	Oral	400	MG	THREE Times a Day	Indefinite
Pharmacy Comment: 24 M@A						
Co-codamol 30/500 Tablets	Tablets	Oral	2	TABS	FOUR Times a Day	Indefinite
Pharmacy Comment: 60 M@A						

New Medication Started:

Medication Comment:

Medication compliance aid:

Discontinued Medication:

Yours sincerely,

Paul Goley

Doctor

cc. 1. Dr SH Dunn

Prescription Review

Medications Reviewed by Pharmacist:

Dispensed Medications Checked by Pharmacy: Pamela Watson, Pharmacist

Nurse discharging patient: Harriet Gibson, Nurse

NHS Confidential: Personal data about a patient

CLYDE DIVISION

Surgical & Anaesthetics Directorate

Orthopaedic Department

Consultant: Mr H Shanker

Consultant: Mr D Macdonald

Royal Alexandra Hospital
Corsebar Road
PAISLEY
PA2 9PN
Tel: 0141-887 9111
Fax: 0141-887 4387



Date: 27 November 2012
Clinic: 22 November 2012 (Fracture)
Our Ref: NN/JC/522484

Mr Shanker's Secy 0141-314 7107
Mr Macdonald's Secy 0141-314 6946

Dr Dunn
Dumbarton Health Centre
Station Road
Dumbarton
G82 1PW

Dear Dr Dunn

WILLIAM CAMPBELL D.O.B. 02.05.74 CHI: 0205743056
4 CARMAN VIEW, DUMBARTON

I reviewed Mr Campbell in the clinic today. Mr Campbell's wound has completely healed and granulated over. There is no obvious defect and no signs of infection.

I have advised him to return to his job as a van driver but I have advised him to keep the dressing on the scar to protect it. I have referred him for physiotherapy today.

He will be reviewed again in two weeks' time to make sure everything is fine. He is aware that he might require tenolysis.

Yours sincerely


Mr N Natsioulas
Registrar in Orthopaedics

NHS Confidential: Personal data about a patient

CLYDE DIVISION

Surgical & Anaesthetics Directorate

Orthopaedic Department

Consultant: Mr H Shanker
Consultant: Mr D Macdonald

Royal Alexandra Hospital
Corsebar Road
PAISLEY
PA2 9PN
Tel: 0141-887 9111
Fax: 0141-887 4387



Date: 19 November 2012
Clinic: 15 November 2012 (Fracture)
Our Ref: NN/JC/522484

Mr Shanker's Secy 0141-314 7107
Mr Macdonald's Secy 0141-314 6946

Dr Dunn
Dumbarton Health Centre
Station Road
Dumbarton
G82 1PW

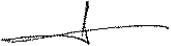
Dear Dr Dunn

WILLIAM CAMPBELL D.O.B. 02.05.74 CHI: 0205743056
4 CARMAN VIEW, DUMBARTON

I reviewed Mr Campbell in the clinic today. Mr Campbell's wound has completely healed and granulated over. There is no obvious defect at this time. There doesn't appear to be any active infection. I note that the last swab showed a heavy growth of staphylococcus aureus and he is on oral Flucloxacillin.

I have advised him to continue with the oral antibiotics and he will be reviewed next week for a further review. He is aware that he might require tenolysis.

Yours sincerely


Mr N Natsioulas
Registrar in Orthopaedics

NHS Confidential: Personal data about a patient

CLYDE DIVISION

Surgical & Anaesthetics Directorate

Orthopaedic Department

Consultant: Mr H Shanker
Consultant: Mr D Macdonald

Royal Alexandra Hospital
Corsebar Road
PAISLEY
PA2 9PN
Tel: 0141-887 9111
Fax: 0141-887 4387



Date: 09 November 2012
Clinic: 08 November 2012 (Fracture)
Our Ref: DMacd/JC/522484

Mr Shanker's Secy 0141-314 7107
Mr Macdonald's Secy 0141-314 6946

Dr Dunn
Dumbarton Health Centre
Station Road
Dumbarton
G82 1PW

Dear Dr Dunn

WILLIAM CAMPBELL D.O.B. 02.05.74 CHI: 0205743056
4 CARMAN VIEW, DUMBARTON

Mr Campbell's wound is continuing to heal and granulate over. He does have a small exudate and a recent swab showed a heavy growth of staphylococcus aureus. Therefore, I think we should continue to treat him on Flucloxacillin.

He will be seen again next week for further review. He may require a tenolysis but the priority at the moment is to return to work once the wound has healed over.

Yours sincerely

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

Mr D Macdonald
Consultant Orthopaedic Surgeon

NHS Confidential: Personal data about a patient

CLYDE DIVISION

Surgical & Anaesthetics Directorate

Orthopaedic Department

Consultant: Mr H Shanker
Consultant: Mr D Macdonald

Royal Alexandra Hospital
Corsebar Road
PAISLEY
PA2 9PN
Tel: 0141-887 9111
Fax: 0141-887 4387



Date: 02 November 2012
Clinic: 01 November 2012 (Fracture)
Our Ref: NN/JC/522484

Mr Shanker's Secy 0141-314 7107
Mr Macdonald's Secy 0141-314 6946

Dr Dunn
Dumbarton Health Centre
Station Road
Dumbarton
G82 1PW

Dear Dr Dunn

WILLIAM CAMPBELL D.O.B. 02.05.74 CHI: 0205743056
4 CARMAN VIEW, DUMBARTON

Mr Campbell was reviewed again in the clinic today.

On clinical examination there are no signs of acute infection. He continues to have a defect measuring less than 1 cm x 1 cm and as compared to the defect last week, I have the impression it is smaller. It is still not granulated over the tendon. As I mentioned, there does not appear to be any active infection.

I took a microbiology swab and checked his CRP and ESR. I don't think he should go back on to the oral antibiotics. We will continue with dressings.

He will be reviewed in the nurse led clinic on the 5th November and he will return to the fracture clinic on the 8th November.

Yours sincerely


Mr N Natsioulas
Registrar in Orthopaedics

NHS Confidential: Personal data about a patient

CLYDE DIVISION

Surgical & Anaesthetics Directorate

Orthopaedic Department

Consultant: Mr H Shanker
Consultant: Mr D Macdonald

Royal Alexandra Hospital
Consebar Road
PAISLEY
PA2 9PN
Tel: 0141-887 9111
Fax: 0141-887 4387

NHS
Greater Glasgow
and Clyde

Date: 29 October 2012
Clinic: 25 October 2012 (Fracture)
Our Ref: DMacd/JC/522484

Mr Shanker's Secy 0141-314 7107
Mr Macdonald's Secy 0141-314 6946

Dr Dunn
Dumbarton Health Centre
Station Road
Dumbarton
G82 1PW

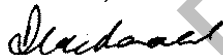
Dear Dr Dunn

WILLIAM CAMPBELL D.O.B. 02.05.74 CHI: 0205743056
4 CARMAN VIEW, DUMBARTON

Mr Campbell was reviewed again in the clinic today. He has an area of eschar over the defect of the flexor tendon. When this was removed, some of the suture material came away and this was formally removed. He continues to have a defect measuring 1 cm x 1 cm which has an increased amount of granulation at the edges but it is not granulated over yet which is disappointing. At this stage there doesn't appear to be any active infection. I think he should stop taking his oral antibiotics and we will carry on with dressings.

I will see him again next week for a further review.

Yours sincerely



Mr D Macdonald
Consultant Orthopaedic Surgeon

NHS Confidential: Personal data about a patient

Treatment Room Record

NAME: PRACTICE STAMP: Drs Stephen & Julia Dunn
 ADDRESS: CHI: 0205743056 02/05/1974 William Health Centre
 12 Station Road
 Dumbarton G82 1PW
 01389 811833
 TEL NO: KNOWN ALLERGIES: KNA

DATE	DIAGNOSIS	TREATMENT REQUEST	DOCTOR/NURSES SIGNATURE

DATE	TREATMENT GIVEN	PROGRESS	REVIEW DATE	SIGNATURE
22/01/12	DRESSING			
22/10/12	Attended for dressing to (L) ring finger. Cleaned paracetamol gel / Iodine / Mepore. Area of hard scabbing evident with yellow slough. Surgeon apparently wishes finger to be kept dry and not to be debrided. Attending surgeon this Thursday. Will need plastic surgery as the tendon has been damaged.			K A T D F 16 13 13 12 He will contact T/R. R. Allen

NHS Confidential: Personal data about a patient

CLYDE DIVISION

Surgical & Anaesthetics Directorate

Orthopaedic Department

Consultant Mr D Macdonald

E-mail [REDACTED]

Secretary Janet Watson

E-mail [REDACTED]

Date: 25 October 2012

Dictated: 17 October 2012

Our Ref: DM/JW/522484

Royal Alexandra Hospital

Corsebar Road

PAISLEY

PA2 9PN

Tel: 0141-887 9111

Fax: 0141-887 4387



Greater Glasgow
and Clyde

Dr Dunn
The Health Centre
Station Road
Dumbarton

Dear Dr Dunn

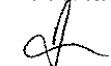
William Campbell DOB 02.05.74 CHI 0205743056
4 Carman View Dumbarton

Diagnosis: Infected left ring finger flexor tendon repair with skin loss over the
proximal phalanx

Outcome: Review in one week

This man is making good progress with physiotherapy his finger is more mobile than it has been and his skin looks far healthier. There is a large crusted area over the skin defect and the intention is that this will granulate although this may take some weeks. We will continue with dressings and we would be grateful if you could send the Practice Nurse for dressings to be done. In the meantime he is going to carry on with hand physiotherapy and I will see him back in one week.

Yours sincerely


Mr D Macdonald
Consultant Orthopaedic Surgeon

NHS Confidential: Personal data about a patient

CLYDE DIVISION
Surgical Directorate
Orthopaedic Dept.

Vale of Leven Hospital
Main Street
Alexandria
G83 0UA
Tel: 01389-754121
Fax: 01389-755948

Royal Alexandra Hospital
Corsebar Road
Paisley
PA2 9PN
Tel: 0141-887 9111
Fax: 0141-887 4387

NHS
Greater Glasgow
and Clyde

Consultant: Mr D Macdonald
E-mail: [REDACTED]

Secretary: Mrs Janet Watson
E-mail: [REDACTED]

Date: 24 October 2012
Clinic: 15 October 2012
Our Ref: DM/CM/522484

Direct Line: 0141-314 6946
Fax: 0141-314 7275

Dr Dunn
Health Centre
Station Road
Dumbarton

Dear Dr Dunn

William Campbell D.O.B. 02.05.74 CHI: 0205743056
4 Carman View, Dumbarton, G82 3AX

This gentleman was seen back in the clinic today. He has stiffened up since I last saw him but, after some passive movements, he regained a good range of movement. His wound has crusted over and appears dry. There is no obvious pus from the wound, and he remains on oral antibiotics.

We will see him back at the clinic in 2 days time to assess his range of movement.

Yours sincerely



Mr D Macdonald
Consultant Orthopaedic Surgeon

Campbell William

CHI: 0205743056

Immediate Discharge Letter

Dr. SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton
G82 1PW



Royal Alexandra Hospital
Corsebar Road
Paisley
PA2 9PN

Main Switchboard: 0141-887-9111

Date of Completion: 27/11/2012

Highly Sensitive: No
Consent for Sharing Withheld: No

Dear Dr SH Dunn,

Patient

Name: Campbell William
CHI: 0205743056
DOB: 02 May 1974
Address: 4 Carman View
Dumbarton
G82 3AX

Long Term Conditions:

Admission

Admitted: 08/10/2012 16:02
Discharged:
Admission Type: In Patient
Discharge to:
Consultant: Mr Duncan MacDonald
Specialty: Orthopaedics
Ward: RAH 22 - A&E/
Orthopaedics
Ward Tel: 0141 314 7022
Ward Fax:

Reason for Admission: Admission for treatment - Where the patient is expected to be treated for a
diagnosed condition not otherwise specified

Treatments: None recorded.

Campbell William

CHI: 0205743056

Clinical Comments:

This man was admitted for a washout and debridement of his left ring finger. He was advised to stay in hospital on IV antibiotics but has decided to go home on oral antibiotics. For PO Flucloxacillin 1G QID for 7/7. R?V in #cInlc on 15/10/12 with Mr MacDonald

Follow-up arranged?:

Requested Outpatient
Investigations:

Final Discharge letter to follow:

Medication Info:

Allergies:

Height: cm

Weight: kg

Discharge Medication:

Medicine	Formulation	Route	Dose	UOM	Frequency	Duration
Flucloxacillin Capsules	Capsules	Oral	1000	MG	FOUR Times a Day	7 Days
Pharmacy Comment: 56x 500mg medreich						
Ibuprofen Tablets	Tablets	Oral	400	MG	THREE Times a Day	Indefinite
Pharmacy Comment: 24 M@A						
Co-codamol 30/500 Tablets	Tablets	Oral	2	TABS	FOUR Times a Day	Indefinite
Pharmacy Comment: 60 M@A						

New Medication Started:

Medication Comment:

Medication compliance aid:

Discontinued Medication:

Yours sincerely,
Paul Goley
Doctor

cc. 1. Dr SH Dunn

Prescription Review

Medications Reviewed by Pharmacist: .

Dispensed Medications Checked by Pharmacy: Pamela Watson, Pharmacist

Nurse discharging patient: Harriet Gibson, Nurse

NHS Confidential: Personal data about a patient

CLYDE DIVISION

Surgical & Anaesthetics Directorate

Orthopaedic Department

Consultant Mr D Macdonald

E-mail

Secretary Janet Watson

E-mail

Date: 11 October 2012

Dictated: 05 October 2012

Our Ref: NN/JW/522484

Royal Alexandra Hospital

Corsebar Road

PAISLEY

PA2 9PN

Tel: 0141-887 9111

Fax: 0141-887 4387



Direct Line: 0141-314 6946

Fax: 0141-314 7275

Dr Dunn
The Health Centre
Station Road
Dumbarton

Dear Dr Dunn

William Campbell DOB 02.05.74 CHI 0205743056
4 Carman View Dumbarton

Admitted: 05.10.12

Discharge

Diagnosis: Infection and skin loss of the left ring finger following repair of laceration of FDP to the left ring finger on 04.09.12

Procedure: Evaluation, washout and debridement flexor tendon sheath left ring finger

Follow up: Review in Mr Macdonald's hand clinic on 8 October 2012

Mr Campbell sustained a laceration of his FDP to the left ring finger on 2 September 2012. He underwent repair of the FDP to the left ring finger on 4 September 2012 but unfortunately he developed an infection of his finger for which he had 2 washouts on 15 and 20 September 2012. After that he was seen in Fracture Clinic when there were no signs of superficial infection but there was slow healing of the wound especially of the more distal part. When he was seen in the clinic on 4 October 2012 the wound was dry but unfortunately the more distal part of the wound had not healed and the tendon was exposed. Hence we decided to proceed the next morning to evaluation of his wound.

The tendon was quite stiff. There was no discharge of pus but after exploration of the whole wound suspicion of deep ongoing chronic infection was raised. Hence we proceeded to washout and debridement of the flexor tendon sheath. We assessed the option of local flap or cross finger flap but eventually we decided to leave the wound open and continue with antibiotics at this point so as to eliminate the risk of infection.

The patient was advised to stay in the hospital to have IV antibiotics however he wished to go home and continue with oral antibiotics. In this case we advised him to come for further review in Mr Macdonald's hand clinic on 8 October 2012. At that point in time we will reassess the option of covering the skin loss with either a local flap or a finger cross flap.

Yours sincerely

Mr N Natsoullas
Registrar in Orthopaedics

NHS Confidential: Personal data about a patient

CLYDE DIVISION

Surgical Directorate

Orthopaedic Dept.

Consultant: Mr D Macdonald

E-mail: [REDACTED]

Secretary: Mrs Janet Watson

E-mail: [REDACTED]

Date: 22 October 2012

Clinic: 08 October 2012

Our Ref: DM/CM/522484

Royal Alexandra Hospital

Corsebar Road

Paisley

PA2 9PN

Tel: 0141-887 9111

Fax: 0141-887 4387

NHS
Greater Glasgow
and Clyde

Direct Line: 0141-314 6946

Fax: 0141-314 7276

Dr Dunn
Health Centre
Station Road
Dumbarton

Dear Dr Dunn

William Campbell D.O.B. 02.05.74 CHI: 0205743056
4 Carman View, Dumbarton, G82 3AX

Mr Campbell was reviewed in the plaster room today. He has a chronically infected left ring finger following FDP repair on 04.09.12; unfortunately, he presented shortly afterward with infection, and had to have it washed out. He was discharged but then re-presented and had further washout and debridement. He has unfortunately developed a soft tissue defect over the PIPJ and returned to the operating theatre 3 days for EUA, where there was evidence of ongoing deep infection. Most recent swabs taken have shown heavy growth of staph aureus.

On examination today, he has marked stiffness in all his fingers. The wound has dried over; however, he still has some erythema. On passive flexion, his wounds started exuding serous fluid. I had discussed his case with ~~hand~~ ^{plaster} surgeons and I am unsure if, in the current face of infection, soft tissue reconstruction is appropriate. I think elevation and IV antibiotics are probably the most appropriate route, whilst trying to maintain some passive mobilisation.

Mr Campbell is aware that he is at risk of losing the deep flexor or having significant stiffness, requiring subsequent surgery; however, he says he would be happy if he just had FDS function and a mobile hand. I have expressed to him that it is very important that he complies with treatment. I will discuss his case further with Professor Hart at the plastic surgery unit to decide on the next most appropriate step.

Yours sincerely


Mr D Macdonald
Consultant Orthopaedic Surgeon

NHS Confidential: Personal data about a patient

CLYDE DIVISION

Surgical & Anaesthetics Directorate

Orthopaedic Department

Consultant: Mr H Shanker

Consultant: Mr D Macdonald

Royal Alexandra Hospital
Corsebar Road
PAISLEY
PA2 9PN
Tel: 0141-887 9111
Fax: 0141-887 4387



Date: 09 October 2012
Clinic: 04 October 2012 (Fracture)
Our Ref: DMacd/JC/522484

Mr Shanker's Secy 0141-314 7107
Mr Macdonald's Secy 0141-314 6946

Dr Dunn
Dumbarton Health Centre
Station Road
Dumbarton
G82 1PW

Dear Dr Dunn

WILLIAM CAMPBELL D.O.B. 02.05.74 CHI: 0205743056
4 CARMAN VIEW, DUMBARTON

Diagnosis: Zone 2 laceration FDP to left index finger - 02.09.12 with subsequent infection and washout of flexor sheath - 22.09.12

Mr Campbell was reviewed again in the clinic today. Unfortunately he had an infection and following his most recent admission at the end of September, he signed himself out at the September weekend but he had been taking antibiotics two days ago.

On examination there is a skin defect over the volar aspect of the PIP joint and it appears that the flexor tendon is visible with a suture present. He has quite marked stiffness of the finger as expected given the infection but he no longer has any tenderness. Passively reasonable flexion is possible but I have grave concerns regarding the skin coverage over the PIP joint on the volar aspect and I will discuss his case with fellow hand surgeons and make a plan for possible cross finger flap skin coverage and tenolysis. This maybe done tomorrow and I will contact Mr Campbell to confirm this.

Yours sincerely


Mr D Macdonald
Consultant Orthopaedic Surgeon

NHS Confidential: Personal data about a patient

CLYDE DIVISION

Surgical & Anaesthetics Directorate

Orthopaedic Department

Consultant: Mr H Shanker
Consultant: Mr D Macdonald

Royal Alexandra Hospital
Corsebar Road
PAISLEY
PA2 9PN
Tel: 0141-887 9111
Fax: 0141-887 4387



Date: 02 October 2012
Clinic: 27 September 2012 (Fracture)
Our Ref: NN/JC/522484

Mr Shanker's Secy 0141-314 7107
Mr Macdonald's Secy 0141-314 6946

Dr Dunn
Dumbarton Health Centre
Station Road
Dumbarton
G82 1PW

Dear Dr Dunn

WILLIAM CAMPBELL D.O.B. 02.05.74 CHI: 0205743056
4 CARMAN VIEW, DUMBARTON

Diagnosis: Zone 2 laceration of the FDP to left index finger
Date of Injury: 02.09.12
Treatment: Repair of laceration on 4th September
Outcome: Infected left index finger with washout - 15.09.12 and 22.09.12

I reviewed Mr Campbell in the clinic today who unfortunately developed an infection in his left index finger following repair of a zone 2 laceration of the FDP. The last washout was on the 22nd September.

On clinical examination today the most proximal part of the wound has completely healed. The more distal part is partially healed. There is a small area of skin loss around the distal part of the wound. No signs of acute infection. No discharge of pus at this stage. The finger is quite stiff.

I think we shall continue with oral antibiotics. He is still getting physiotherapy and he will be reviewed again in one week for a wound check.

Yours sincerely

Mr N Natsioulas
Registrar in Orthopaedics

NHS Confidential: Personal data about a patient

CLYDE DIVISION

Surgical & Anaesthetics Directorate

Orthopaedic Department

Consultant: Mr H Shanker

Consultant: Mr D Macdonald

Royal Alexandra Hospital
Corsebar Road
PAISLEY
PA2 9PN
Tel: 0141-887 9111
Fax: 0141-887 4387



Date: 27 September 2012
Clinic: 20 September 2012 (Fracture)
Our Ref: NN/JC/522484

Mr Shanker's Secy 0141-314 7107
Mr Macdonald's Secy 0141-314 6946

Dr Dunn
Dumbarton Health Centre
Station Road
Dumbarton
G82 1PW

Dear Dr Dunn

WILLIAM CAMPBELL D.O.B. 02.05.74 CHI: 0205743056
4 CARMAN VIEW, DUMBARTON

This 38 year old gentleman had a zone 2 laceration of the FDS to the left ring finger on the 2nd September. He underwent repair of the flexor tendon on the 4th September but unfortunately he developed an infection. He underwent washout of the infected left ring finger on the 15th September and he returned to the fracture clinic today for a wound check.

On clinical examination today there was leaking of pus from the more distal part of the wound in the left ring finger. There was tenderness on palpation over the flexor tendon sheath. Any attempt of passive extension of the finger was giving him severe pain.

I think that this patient would benefit from a further washout of his left ring finger. He will be admitted today for washout of his left ring finger.

Yours sincerely

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

Mr N Natsioulas
Registrar in Orthopaedics

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Emergency Attendance Letter

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

Dept. Contact Details:

Tel: 0141 314 6195

Fax: 0141 887 1386

Email:

Date Completed: 20/09/2012

Consultant: Dr Gordon McNaughton

SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton
Dumbarton
G82 1PW

Dear SH Dunn

Re: **Campbell William**
4 Carman View
Dumbarton G82 3AX

DOB: 02/05/1974

CHI: 0205743056

Attended on: 14/09/2012 at 17:10 hrs.

Discharge Type: 02 - Admitted

Departed on: 14/09/2012 at 18:58 hrs.

Destination: Admission to this Hospital (triaged in A&E)

Previous ED Attendance in last 12 months: 8

Presenting complaint

VOL ortho ref

Nursing Assessment:

Investigations in ED: None

Diagnosis: None

Page 1 of 2

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Procedures: **None**Immunisations: **None**Dispensed Medication: **None**

Clinician Notes:

Followup :

Highly sensitive: N

Consent for sharing withheld: N

Yours sincerely,
Lynsey Johnston .
Doctor

Copies to:
1. SH Dunn (GP)

School Address:

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Emergency Attendance Letter

DOUBLE SIDED



Emergency Department
Vale of Leven Hospital
Main St
Alexandria
Dunbartonshire
G83 0UA

Dept. Contact Details:
Tel: 01389 817240(MIU)817345(Reception)
Fax: 01389 817274
Email:

Date Completed: 14/09/2012

Consultant: Dr Gordon McNaughton

SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton
Dumbarton
G82 1PW

Dear SH Dunn

Re: **Campbell William**
4 Carman View
Dumbarton G82 3AX

DOB: 02/05/1974

CHI: 0205743056

Attended on: 14/09/2012 at 15:12 hrs.

Discharge Type: 03 - Transferred

Departed on: 14/09/2012 at 16:01 hrs.

Destination: Transferred to other Hospital (triaged in MIU)

Previous ED Attendance in last 12 months: 8

Presenting complaint

spoke to nurse told to attend as # staff away

Nursing Assessment:

Investigations in ED: None

Diagnosis:

Diagnosis	Side	Site
Wound Infection (following procedure)	Left	Finger: Ring

Page 1 of 2

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Procedures: **None**

Immunisations: **None**

Dispensed Medication: **None**

Clinician Notes:

tendon repair 4/9/12 increased pain in digit and hand today , with pus discharging from wound
referred to # clinic RAH for orthopaedic review

Followup :

Highly sensitive: N

Consent for sharing withheld: N

Yours sincerely,

Maureen Blair

Emergency Nurse Practitioner

Copies to:

1. SH Dunn (GP)

School Address:

NHS Confidential: Personal data about a patient

NHS GREATER GLASGOW AND CLYDE

Vale of Leven Hospital

Main Street, Alexandria, G83 0UA

Department of Orthopaedics



Tele: 01389 817446

Fax: 01389 817397

E-Mail: [REDACTED]

Consultants : Mr S Gupta (Locum)
Mr S L Chitnis

Mr T Nunn
Mr S Smith

RK/AC/189524

16TH SEPTEMBER 2012

FRACTURE CLINIC VOLH – 13/09/12

DR S DUNN
HEALTH CENTRE
STATION ROAD
DUMBARTON

Dear Dr Dunn

WILLIAM CAMPBELL, DOB 02/05/74
CHI.NO 0205743056
4 CARMAN VIEW, DUMBARTON

Diagnosis: Laceration to left ring finger and PTP repair on 04/09/12

I reviewed Mr Campbell today who is approximately 9 days from the above injury which was repaired on the above date.

On examination today the wound was not very healthy, looked emaciated, the distal flat was necrosed on the ulnar aspect.

Mr Campbell has been attending the Physiotherapist for finger mobilisation. As of today the sutures have been kept in to provide cover of the wound but I have commenced him on oral Flucloxacillin 500mgs to be taken four times a day. He has been encouraged to mobilise his fingers as his fingers were getting stiff and a return appointment has been arranged for next week for wound examination. In the interim he will attend the minor injuries unit over the weekend for wound review and if required he can be referred back to RAH.

Yours sincerely

MR R KARKAR
REGISTRAR IN ORTHOPAEDICS

Drs Stephen & Julia Dunn
Health Centre
12 Station Road
Dumbarton G82 1PW
01389 811833

name _____
address _____

CHI: 0205743056 02/85/1974 M
CAMPBELL, William
4 Carman View, GB2 3AX

Hi No...
el no...

Dr. J. Dunn, 3506502
Dr. Stephen H. Dunn, GB2 5PW
DATE TIME Practice: 0500

Practice Stamp

KNOWN ALLERGIES: KNA

DATE	TREATMENT PRESCRIBED	SIGNATURE
10/09/12	Wound Check	
10/01/12	Injury to (L) ring finger with tendon damage. Required surgery 6 days ago at R.A.H. Dressing needed reinserting. Cleaned with tap water / Iodine / Adaptadig. Sutures all intact. No signs of infection noted. Attending # done at Voe this Thurs. JSM Ritten	

NHS Confidential: Personal data about a patient**NHS Greater Glasgow & Clyde OOH Services**

Call No: **3540099** Date: **08 Sep 2012** Time of Call: **02:10**
 Patient's Name: **William Campbell** DOB: **02/05/1974** Age: **38** Y
 Address Today: **176 Ladyton Estate** Home Address If different: **4 Carman View**

Alexandria**Dumbarton**

Post Code: **G83 9DY**
 Phone Number Today: **(07888) 334 400**
NHS24 Call ID : 12087644

Post Code: **G82 3AX**
 Home Phone If different: **() -**

Callers Name:

Relationship to patient:

Name of GP: **Dunn Stephen**

Practice No:

Surgery: **A 6 Health Centre Dumbarton (Dunn)**

Cipher No:

Address: **Station Road DUMBARTON G82 1PW**

Fax No:

Speed Dial:

Call Type: **Attend PCEC****Priority 3 Within 90**

NHS24 Time Passed:

Receptionist's Name: **HIF**Time Arrived: **08/09/2012**Time Complete: **08/09/2012 09:05:58****Patient's Complaint:****Patient's Complaint:**

HAD OPERATION ON FINGER LAST WEEK...HAD CAST OFF ON FRIDAY...ALSO POSSIBLE OVERMEDICATION WITH PAINKILLERS ((Non-Clinical User) (Cardonald))

 PAINFUL FINGER 2 DAY..ADD/V

 Clinical summary created by: (Nurse Advisor) (Glasgow) [08/09/2012 02:14:18]

FINGER PAIN FOR 2 DAYS AND SURGERY TO RING FINGER LEFT HAND 4 DAYS AGO, SEEN AT HOSPITAL FRIDAY MORING CAST REMOVED , SINCE THEN INCREASING PAIN HAS TAKEN 12 COCODAMOL OVER PAST 24 HRS 10 PREVIOUS 24 HRS AND UNSURE HOW MANY PREVIOUS DAYS , ADVSIED TO ATTEND A&E REGARDING HAND AND IN VIEW OF NEW PARACETAMOL GUIDANCE , DECLINED , SPEAK TO DR PLEASE, (DISPUTED)

 This call should be directed via consult telephony route.

WORSENING: Whilst waiting for a return call, if symptoms change, or any new symptoms develop, call us back immediately.

Remarks: left message saying will try mobile number

BP:

PR: per min

Temp:

Clinical Notes:Triage Doctor **D577**

Follow Up: GP Follow Up

Consultation(s):**By:** Kanwal Roomi**Start:** 08/09/2012 08:39:10**Finish** 08/09/2012 09:05:38**Clinical Assessment Details**

Started-08/09/2012 08:39:10

Finished-08/09/2012 09:05:38

History

L hand injury.Tendon damage by cutting fingers with metal pipe accidently last sunday. Seen at RAH stright after

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and surgery done. Seen by physio yesterday. Thinks exercises at physio made the pain worse. Co-codamol 30/500(12 in 24 hrs) + brufen 400mg tds with little effect. Wants something stronger for pain. No numbess/ tingling/ weakness/ redness/ warmth etc. R handed person.

Examination

L hand + fingers bandaged. Moving fingers ok.C+S:nad.

Diagnosis

L hand injury

Treatment

-Advised not to take medications above recommended range as can cause seroius side effects. -Tramadol 50mg qds+ paracetamol 1gm qds -as required fro pain advised(SE explained) . -Has already got an appointment with his own GP coming monday. -Seeing ortho on 13/9 & physio on 17/9. -Worsening statement given .

Clinical Coding

Clinical code: N245. (Pain in limb)

Prescription Details

Drug Name-tramadol capsules 50mg

Preparation-capsule(s)

Dosage-1 capsule upto 4 times aday as required.

Quantity-30

Consultation(s):

By: Tilston S.G **Start:** 08/09/2012 08:05:19 **Finish** 08/09/2012 08:10:26

Clinical Assessment Details

Started-08/09/2012 08:05:19

Finished-08/09/2012 08:10:26

History

I ring finger-tendon damage-6 days ago-op at rah pain increasing cocodamol 30/500-30 in 65 hours no excessive redness/swelling assess wound and advise on analgesia

Examination**Diagnosis****Treatment****Clinical Coding**

Clinical code: ZV6. ([V]Other reasons for encounter)

Prescription Details**Consultation(s):**

By: Troup David **Start:** 08/09/2012 04:10:09 **Finish** 08/09/2012 04:10:09

Patient Contact Attempt Details

Date - 08/09/2012 04:10:09 Started - 08/09/2012 04:10:09

Finished - 08/09/2012 04:10:09

Performed By - A345

Summary - Contact (07888 334400): Voicemail - left message - (Online Consultation) Comments - left message that i'd try later Reason - Failure -

Consultation(s):

By: Troup David **Start:** 08/09/2012 04:08:43 **Finish** 08/09/2012 04:08:43

Patient Contact Attempt Details

Date - 08/09/2012 04:08:43 Started - 08/09/2012 04:08:43

Finished - 08/09/2012 04:08:43

Performed By - A345

Summary - Home: (01389 605627): Voicemail - left message - (Online Consultation) Comments - left message saying will try mobile number Reason - Failure -

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Campbell William

CHI: 0205743056

Emergency Attendance Letter

Emergency Department
Vale of Leven Hospital
Main St
Alexandria
Dunbartonshire
G83 0UA

Dept. Contact Details:
Tel: 01389 817240(MIU)817345(Reception)
Fax: 01389 817274
Email:

Date Completed: 05/09/2012

Consultant: Dr Gordon McNaughton

SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton
Dumbarton
G82 1PW

Dear SH Dunn

Re: **Campbell William**
4 Carman View
Dumbarton G82 3AX

DOB: 02/05/1974

CHI: 0205743056

Attended on: **02/09/2012 at 18:47 hrs.**
Discharge Type: **01c - Discharge with referral**
Previous ED Attendance in last 12 months: **6**

Departed on: **02/09/2012 at 21:00 hrs.**
Destination: **Private residence**

Presenting complaint
injury to left ring finger

Nursing Assessment:

Investigations in ED:
1. XR Finger ring Lt

Diagnosis:

Diagnosis	Side	Site
Open wound of finger(s) without damage to nail	Left	Finger: Ring

Page 1 of 2

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Campbell William CHI: 0205743056

Procedures: **None**

Immunisations: **None**

Dispensed Medication: **None**

Clinician Notes:

Followup : **ortho RAH**

Highly sensitive: N

Consent for sharing withheld: N

Yours sincerely,
James Shirley
Emergency Nurse Practitioner

Copies to:
1. SH Dunn (GP)

School Address:

NHS Confidential: Personal data about a patient

CLYDE DIVISION

Surgical & Anaesthetics Directorate

Orthopaedic Department

Consultant Mr D Macdonald

E-mail [REDACTED]

Secretary Janet Watson

E-mail [REDACTED]

Date: 6 September 2012

Dictated: 4 September 2012

Our Ref: NN/JW/522484

Royal Alexandra Hospital

Corsebar Road

PAISLEY

PA2 9PN

Tel: 0141-887 9111

Fax: 0141-887 4387



Direct Line: 0141-314 6946

Fax: 0141-314 7275

Dr Dunn
The Health Centre
Station Road
Dumbarton

Dear Dr Dunn

William Campbell DOB 02.05.74 CHI 0205743056
4 Carman View Dumbarton

Admitted: 04.09.12

Discharge: 04.09.12

Diagnosis: Zone 2 Complete division FDP tendon of left ring finger

Procedure: Repair FDP left ring finger (04.09.12)

Follow up: Review in Fracture Clinic on 13 September 2012; Urgent hand
physiotherapy; Removal of stitches in 10 - 14 days

This 38 year old gentleman sustained a laceration in the volar aspect of his left middle finger. He was initially admitted on 3 September 2012 under Mr Nunn's care but because the injury was into Zone 2 the patient was discussed with Mr Macdonald who proceeded to repair of FDP left ring finger on 4 September 2012.

The post-operative period was uneventful. Post-operatively he was put into a protective dorsal slab keeping the wrist and fingers in flexion. We sent a request form for urgent hand physiotherapy and he will be reviewed in our clinic as above mentioned.

Yours sincerely

Mr N Natsioulas
Registrar in Orthopaedics

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NHS GREATER GLASGOW & CLYDE
DEPARTMENT OF LABORATORY MEDICINE

Vale of Leven Hospital
Main Street
Alexandria G83 0UA



Haematology Consultants: Dr P T Clarke
Dr M G Rainey
Staff Grade: Dr L Marsh

Tel No: (01389) 817481/497
Fax No: (01389) 817496
Enquiries to: Haematology Secretaries
E-Mail: [REDACTED]

Biochemistry Consultant: Dr J J Series

JJS/AMM/189524

28 May 2012

Lipid Clinic 22 May 2012

Dr S Dunn
Health Centre 3
Station Road
Dumbarton

Dear Dr Dunn

William Campbell, DOB 02 05 74, CHI No. 0205743056
4/4 Merkins Avenue, Bellismyre, Dumbarton

I saw this man, with a mixed hyperlipidaemia, in the lipid clinic this week. He is not on any lipid medication at present. Checked in the clinic his cholesterol was 9.1, triglyceride 10.9 and HDL cholesterol 1.1 mmol/l. He is euthyroid but a random blood sugar was 9.4 mmol/l.

I would be grateful if you could start him on modified release bezafibrate 400 mg once daily. Previous random blood sugars have been entirely normal and I am seeing him again in six months time and I will check this again then if you have not checked it in the meantime.

Yours sincerely

J J Series
Consultant Clinical Biochemist

cc: Patient

Scanned Document
19-Jun-2026 AN
Additional: Scanned Document

Filename: WC_04.pdf
Extension: .tif
Pages:

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Form: CIA Run#42

CLYDE HOSPITALS BIOCHEMISTRY REPORT

Surname: CAMPBELL
Forename: WILLIAM
DOB/Age: 02.05.74 Sex: Male
CHI/Unit No: 0205743056
Address: 42 Pappert Bonhill
Details: hypertriglyceridaemia

Location: P3 Dumbarton Health Cent
Station Rd
Dumbarton
Greater Glasgow & Clyde
Requestor: Dr Stephen H. Dunn
Ext Labno:

[[CURRENT]]
Lab Number B.16.7227942.E
Date/Time collected 09.03.16 09:55
Date/Time received 10.03.16 11:05

Sodium	mmol/L	(133-146)	139
Potassium	mmol/L	(3.5-5.3)	5.1
Chloride	mmol/L	(95-108)	101
Bicarbonate	mmol/L	(22-29)	
Urea	mmol/L	(2.5-7.8)	5.1
Creatinine	umol/L	(40-130)	72
GFR (est'd)	ml/min	(>60)	>60
CRP	mg/L	(0-10)	
Magnesium	mmol/L	(0.70-1.00)	
Calcium	mmol/L	(2.20-2.60)	2.28
Adj Calcium	mmol/L	(2.20-2.60)	2.30
Phosphate	mmol/L	(0.80-1.50)	0.97
Albumin	g/L	(35-50)	38
Alk Phos	U/L	(30-130)	74
Tot Bilirubin	umol/L	(<20)	8
Conj Bilirubin	umol/L		
AST	U/L	(<40)	22
gGT	U/L	(<70)	39
ALT	U/L	(<50)	20
Amylase	U/L	(<100)	54
CK	U/L	(40-320)	
Total Protein	g/L	(60-80)	
Globulins	g/L	(23-38)	
Urate	umol/L	(200-430)	
Cholesterol	mmol/L		6.7
Triglyceride	mmol/L	(0.2-2.3)	*5.8
VLDL Chol	mmol/L		
LDL Chol	mmol/L		
HDL Chol	mmol/L		1.4
Chol/HDL			4.8
TSH	mU/L	(0.35-5.00)	0.97
Free T4	pmol/L	(9.0-21.0)	13.4
Total T3	nmol/L	(0.9-2.5)	

Result Comments:

09.03.16 Amylase : Results IFCC aligned from 03/08/15.
09.03.16 Bone : Alkaline Phosphatase results IFCC aligned from 03/08/15.
09.03.16 LFTS : Alkaline Phosphatase results IFCC aligned from 03/08/15.
09.03.16 Lipids : Fasting sample
Calculation of LDL & VLDL-chol only valid when Trig <4.50 mmol/L.

Date reported: 11.03.16

Authoriser: Automatic release by system

NHS Confidential: Personal data about a patient

{Form:VOL}

CLYDE HOSPITALS
HAEMATOLOGY REPORT

Surname:	CAMPBELL	Location:	P3 Dumbarton Health Cent
Forename:	WILLIAM		Station Rd
DOB/Age:	02.05.74 Sex: Male		Dumbarton
CHI/Unit No:	0205743056		Greater Glasgow & Clyde
Address:	42 Pappert Bonhill	Requestor:	Dr Stephen H. Dunn
Details:	hypertriglyceridaemia	Ext Labno:	

[[CURRENT]]

Lab Number	B.16.7227944.P
Date/Time collected	09.03.16 09:55
Date/Time received	10.03.16 11:05

WBC	$\times 10^9/L$ (4.0-11.0)	3.7
RBC	$\times 10^{12}/L$ (4.50-6.50)	5.02
Haemoglobin	g/L (130-180)	149
Haematocrit	L/L (0.400-0.540)	0.469
MCV	fL (80.0-100.0)	93.4
MCH	pg (27.0-32.0)	29.7
Platelet Count	$\times 10^9/L$ (150-400)	220
Neutrophils	$\times 10^9/L$ (2.0-7.5)	1.6
Lymphocytes	$\times 10^9/L$ (1.5-4.0)	1.6
Monocytes	$\times 10^9/L$ (0.2-0.8)	0.3
Eosinophils	$\times 10^9/L$ (0.0-0.4)	0.1
Basophils	$\times 10^9/L$ (0.0-0.1)	0.1
Nucleated RBC	$\times 10^9/L$	0.0
Myelocytes	$\times 10^9/L$	
Elasts	$\times 10^9/L$	
Others	$\times 10^9/L$	

ESR	mm/hr (1-10)
Retics	$\times 10^9/L$ (10-99)

Glan Fever Scr
Blood Film

Result Comments:

Date reported: 11.03.16

Authoriser:

Run No: 642

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Services - PharmOutcomes

<https://pharmoutcomes.org/pharmoutcomes/services/enter?notification...>

Alt title



5th Oct 2015

Lloyds Pharmacy
19 Station Road
Dumbarton G82 1NR
01389 765077

PATIENT VACCINATION RECORD

Registered GP practice Dr Stephen H Dunn & Partners, The Health Centre, Station Road, Dumbarton, Dunbartonshire G82 1PW (S85090)

The patient below has reported they are registered at your GP practice. This patient has today received a flu vaccination under our private PGD arrangements

Patient and Vaccine Details	
Patient Name	William Campbell
Patient Address	176 Ladyton Estate, Alexandria, Dunbartonshire, G83 9DY
Date of Birth	02 May 1974
Vaccine administered	Imuvac - BGP Products Ltd
Batch number	J27R
Expiry date	-2016-06-01
Site of injection	Left deltoid

1 of 1

05/10/2015 11:52

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Campbell William

CHI: 0205743056

Clinic Letter

Dr. SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton
G82 1PW

Main Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
Dictated Date:
Transcribed Date:

NHS
Greater Glasgow
and Clyde
Vale of Leven Hospital
Main St
Alexandria
G83 0UA
01389 754 121
Biochemistry
Christine McAlees Tel : 01475 50432
27/01/2015
LJ/CMcA
06/02/2015
09/02/2015

Dear Dr. SH Dunn,

William Campbell; D.O.B: 02 May 1974; CHI: 0205743056
176 LADYTON ESTATE, Alexandria, Dunbartonshire, G83 9DY

Attendance: Specialty - Chemical Pathology; Clinic - VLJJSKP4-DR SERIES LIPID CLINIC TUES
PM

Date and Time of Appointment - 27/01/2015 15:30

Clinical Comments:

Dear Doctor,

This 40 year old gentleman with Hypertriglyceridaemia failed to attend his second Lipid Clinic appointment with me. I note that your referral letter indicates you had suggested he made an appointment with yourself for lipid levels 4-6 weeks after starting back on his Bezafibrate, and note there are no blood tests on the system for him since November 2013. Should he be willing to come and see me I am happy to accept a further referral. Should he not be willing to come and see me but re-engages with yourselves I refer you to my letter of 25th November 2014 regarding how he could be managed.

Yours sincerely,

Dr. Iain Jones
Speciality Registrar

Electronically Signed: Dr Iain Jones, Doctor

cc.

NHS Confidential: Personal data about a patient



Vale of Leven Hospital
Main St
Alexandria G83 0UA

27/01/2015

Dr SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton G82 1PW

Dear Dr SH Dunn

Re Patient

Mr William Campbell
176 LADYTON ESTATE
Alexandria G83 9DY

CHI Number: 0205743056
Consultant: Dr John Series
Specialty: Chemical Pathology
Hospital: Vale of Leven Hospital
Date and time: 27/01/2015, at 15:30

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

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

Please note, your patient has also been notified of this removal.

Yours sincerely

Gillian Robertson Referral Management Centre Clyde.

User ID Leanne Coyne

SCGC-Op DNA Removal to GP V1

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NHS Greater Glasgow and Clyde

Page 1 of 2

Call No: 4306387 **Date:** 03/01/2015 **External Case**
Patient's Name: William Campbell **DOB:** 02/05/1974 **Age:** 40 years
Address Today **Home Address (If Different)**
 Outside Boots Chemist, Clydebank Shopping Centre Clydebank 176 Ladyton Estate

Postcode: **Postcode:** Alexandria G83 9DY
Current Phone 07888 334400 **Home Phone (If Different)** 01389 605627
CHI Number 0205743056
Callers Name: **Relationship to patient:**
Name of GP: Dunn,Stephen(A6) **Time Call Received NHS24** 03/01/2015 12:34:35
Surgery: A 6 Health Centre Dumbarton (Dunn) **Time Received OOH**
Call Type: Dr To Phone Pt <4 Hrs **Time Patient Arrived**
Priority **Consultation Start** 03/01/2015 15:58:09
Consultation End 03/01/2015 16:02:58

Receptionist: **Time Arrived:** **Time Complete:** 03/01/2015 16:02

PT HAS RAN OUT BENZIP SATANS ((User) (Edinburgh))

PSL - LOOKING FOR ACCESS TO BEZAFIBRATE. PHARMACY REFUSED AS NO BOX AND DIDN'T KNOW NAME OF MEDICATION. SPEAK TO DOCTOR 4 HOURS. ((Other Clinical User) (Edinburgh))

SPOKE TO SIOBHAN SMITH PHARMIST ON PSL AS ABOVE ((User) (Edinburgh))

ENQUIRY MEDICATION 2 DYS, SEE A/V

DPP4 Dr to phone patient within 4 Hrs

Clinical summary created by: (User) (Edinburgh) [03/01/2015 12:53:35]

MEDICATION ENQUIRY RAN OUT BEFAFIBRATE FOR 2 DYS AND LOOKING FOR ACCESS TO BEZAFIBRATE. PHARMACY REFUSED AS NO BOX AND DIDN'T KNOW NAME OF MEDICATION. SPEAK TO DOCTOR 4 HOURS.

NHS24 Summary**Remarks:**

BP: **PR:** **Temp:**
Doctor/Nurse: Easson,MT(106) **Follow Up:** No Follow Up -

Consultation(s):

By: Easson,MT(106) **Start** 03/01/2015 15:58 **Finish** 03/01/2015 16:02

Clinical Assessment Details:

Started- 03/01/2015 15:58:09

Finished- 03/01/2015 16:02:58

Initial Assessment

Report Statistics:

Report produced by Adastra Version 3 - 03/01/2015 17:06:39

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Page 2 of 2

History

Spoke to William. ECS checked with consent. On bezafibrate. He has not had for a few days. He has now left pharmacy and won't be able to return. He will omit for next 2 days and collect script from GP on Monday

Examination

Diagnosis

Treatment

Clinical Coding

8B3H. Medication requested

Prescription Details

Report Statistics:

Report produced by Adastra Version 3 - 03/01/2015 17:06:39

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Clinic Letter

Dr. SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton
G82 1PW

Main Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
Dictated Date:
Transcribed Date:

NHS
Greater Glasgow
and Clyde
Vale of Leven Hospital
Main St
Alexandria
G83 0UA
01389 754 121
Biochemistry
Christine McAlees Tel : 01475 504326
25/11/2014
Dr. Iain Jones
25/11/2014
26/11/2014

Dear Dr. SH Dunn,

William Campbell; D.O.B: 02 May 1974; CHI: 0205743056
176 LADYTON ESTATE, Alexandria, Dunbartonshire, G83 9DY

Attendance: Specialty - Chemical Pathology; Clinic - VLJJSCP4-DR SERIES LIPID CLINIC TUES
PM

Date and Time of Appointment - 25/11/2014 15:00

Clinical Comments:

Dear Doctor,

Your patient did not attend the Lipid Clinic again today. A further appointment has been sent for 3 months time. I note that prior to this year he DNA'd one to two clinics per year in the context of all the clinics he was going to. I note that he seems to have DNA'd all but one of his appointments this year and note that these would be appointments which were sent to the address currently on the computer system for him which is 176 Ladyton Estate, Alexandria, G83 9DY, and this address is different to that he had last year. Is his current address correct?

If this address is correct and he just does not wish to come and see us my greatest concern would be about his risk of pancreatitis in view of his raised triglycerides. Whilst classically risk of pancreatitis is considered to increase as triglycerides rise above 10, any sustained triglyceride risk will be associated with some increased risk of pancreatitis and his triglycerides, hovering at around 7 - 9, might ideally be lower. Were he to attend clinic I would enquire as to current alcohol intake, establish whether he was overweight and recommend weight loss if he were, check TST's and fasting glucose.

If his triglycerides were still between 7 & 9 I would probably start atorvastatin 10mg daily. If his triglycerides remained above 5 or so I might consider adding Omacor two capsules twice daily. As per Dr. Series' letter dated 14th May 2013 in view of the history of his father having pancreatitis I would tend to be a little bit more aggressive with triglycerides, in line with what's outlined above.

A further appointment will be sent out for around three months. Yours sincerely,

Dr. Iain Jones

Speciality Registrar

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

OPCL 25/11/2014 v1

Electronically Signed: Dr Iain Jones, Doctor

cc.

THIRD PARTY COPY

Printed on 28/11/2014 14:14 by Christine Mcalees

Page 2 of 2

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Campbell William

CHI: 0205743056

Clinic Letter

Dr. SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton
G82 1PW

Main Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
Dictated Date:
Transcribed Date:

NHS
Greater Glasgow
and Clyde
Vale of Leven Hospital
Main St
Alexandria
G83 0UA
01389 754 121
Lipid Clinic
01389 817497
09/09/2014
IJ/FM
09/09/2014
10/09/2014

Dear Dr. SH Dunn,

William Campbell; D.O.B: 02 May 1974; CHI: 0205743056
176 LADYTON ESTATE, Alexandria, Dunbartonshire, G83 9DY

Attendance: Specialty - Chemical Pathology; Clinic - VLJJS CP4-DR SERIES LIPID CLINIC TUES
PM

Date and Time of Appointment - 09/09/2014 15:40

Clinical Comments:

Your patient did not attend his 2nd consecutive appointment at the Lipid Clinic. We have therefore discharged him. Should he wish further input for his combined hypercholesterolaemia / hypertriglyceridaemia in future we would be happy for him to be re-referred.

Yours sincerely

Dr Iain Jones
Speciality Registrar

Electronically Signed: Dr Iain Jones, Doctor

cc.

NHS Confidential - Personal Health Information



Vale of Leven Hospital
Main St
Alexandria G83 0UA

09/09/2014

SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton G82 1PW

Dear Dr SH Dunn

Re Patient: Mr William Campbell
176 LADYTON ESTATE

Alexandria G83 9DY
CHI Number: 0205743056
Consultant: Dr John Series
Specialty: Chemical Pathology
Hospital: Vale of Leven Hospital
Date and time: 09/09/2014, at 15:40

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

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

Please note, your patient has also been notified of this removal.

Yours sincerely

Gillian Robertson Referral Management Centre Clyde.

User ID Leanne Coyne
SCGC Op DNA Removal to GP V1

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Clinic Letter

Dr. SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton
G82 1PW

Main Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
Dictated Date:
Transcribed Date:

NHSGreater Glasgow
and Clyde

Canniesburn Plastic Surgery Unit
84 Castle Street
Glasgow
G4 0SF
0141 211 4000

0141 211 5282

27/06/2014

Professor A Hart

27/06/2014

01/07/2014

Dear Dr. SH Dunn,

William Campbell; D.O.B: 02 May 1974; CHI: 0205743056
176 LADYTON ESTATE, Alexandria, Dunbartonshire, G83 9DY

Attendance: Specialty - Plastic Surgery; Clinic - CAAHPS9-DR HART PS FRIDAY AM
Date and Time of Appointment - 27/06/2014 10:30

Clinical Comments:

Letter to Mr MacDonald Consultant Orthopaedic Surgeon

Thanks very much for asking me to see this chap about contracture after a FDP injury. He failed to attend for a second time so under current policy I am not able to re-issue an appointment. I would be happy to see him if he wished to attend and could be re-referred by either yourself or his GP. Thanks again for asking me to see him.

Yours Sincerely

Professor Andrew Hart

Consultant Hand and Plastic Surgeon

Electronically Signed: Professor Andrew Hart, Consultant

cc. Mr D MacDonald
Consultant Orthopaedic Surgeon
Royal Alexandra Hospital
Paisley
PA2 9PN

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Clinic Letter

Dr. SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton
G82 1PW

Canniesburn Plastic Surgery Unit
84 Castle Street
Glasgow
G4 0SF

Main Switchboard: 0141 211 4000
Email Inquiries to: karen.mcdaid@ggc.scot.nhs.uk
Contact Tel Details: 0141 211 5282

Dictated Date: 25/04/2014

By: Professor A Hart

Transcribed Date: 28/04/2014

By: Karen McDaid

Dear Dr. SH Dunn,

Patient

Name: Campbell William
CHI: 0205743056
DOB: 02 May 1974
Address: 176 LADYTON ESTATE
Alexandria
G83 9DY

Attendance

Attended: 25/04/2014 15:10
New/Return: G N PLASTIC SURGERY
Referral Source: Consultant at this Health Board/ Health Care Provider
Consultant: Prof Andrew Hart
Specialty: Plastic Surgery
Clinic: CAAHPS9-DR HART PS FRIDAY AM

Clinical Comments:

Letter to Mr MacDonald

Thanks for asking me to see this gentleman with regards to flexion contracture after a FDP injury, and infection related skin loss. Unfortunately he did not attend today, but I will send for him a second time.

Yours Sincerely

Professor Andrew Hart

Created on 15/05/2014 10:20 by Karen McDaid

Page 1 of 2

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

OPCL 25/04/2014 v1

Consultant Hand and Plastic Surgeon

Electronically Signed: Professor Andrew Hart, Consultant

cc. Mr D MacDonald
Consultant Orthopaedic Surgeon
Royal Alexandra Hospital
Paisley
PA2 9PN

THIRD PARTY COPY

Created on 15/05/2014 10:20 by Karen McDaid

Page 2 of 2

NHS Confidential. Personal data about a patient

Campbell William

CHI: 0205743056

Referral letter:

Professor Andrew Hart
Consultant Plastic Surgeon
Glasgow Royal Infirmary
84 Castle Street
Glasgow
G4 0SF



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

Department: Orthopaedics
Tel: 0141 314 9581

Enquiries to: [REDACTED]

Letter Date: 21/03/2014
Reference: DMacd/JC/0205743056
Dictated Date: 20/03/2014
Transcribed Date: 21/03/2014

Dear Professor Hart,

Name: Campbell William
CHI: 0205743056
DOB: 02/05/1974
Address: 176 LADYTON ESTATE
Alexandria
Dunbartonshire
G83 9DY

I would be very grateful if you could kindly see this 39 year old gentleman who we have previously discussed. You may recall he had an FDP injury two years ago which subsequently became infected and he had several washouts. He was then left with a soft tissue defect over the proximal phalanx with a small area of exposed tendon which subsequently healed by secondary intention. He repeatedly failed to comply with physiotherapy and for various reasons did not attend for splintage or hand rehabilitation and I last saw him in April 2013. At this stage he had a flexion contracture of the finger and I referred him for physiotherapy, splintage and planned review 3 months later. He failed to comply with this arrangement and only attended the clinic today. He now has a marked flexion contracture and the PIP joint is stuck at 90° of flexion and the DIP joint at 45° of flexion with very little passive extension possible to either of these joints. He has a shortage of skin on the volar aspect which is not helping but any form of surgical reconstruction would require quite intensive physiotherapy and splinting and I am not sure if that would be fruitful in this case.

1016 Confidential: Person's data about a patient

Campbell William

CHI: 0205743056

GCL 20/03/2014 v1

I would be grateful for your opinion as to the most appropriate surgical solution and I have suggested to him that fusion of the PIP joint maybe a satisfactory option. However, this would need to be done in conjunction with soft tissue coverage of the volar aspect of the finger.

I have some reservations about further surgery because of previous compliance issues and if you felt that further surgery was appropriate, I would be happy for you would take over his care, otherwise I would be happy to see him again at the Southern General Hospital where I am relocating from April.

Yours sincerely

Mr Duncan MacDonald
Consultant Orthopaedic Surgeon

Electronically Signed: Mr Duncan MacDonald, Consultant

cc. Dr Dunn
Dumbarton Health Centre
Station Road
Dumbarton
G82 1PW ✓

With Confidentiality: Personal data about a patient

Result Details

Page 1 of 1

Greater Glasgow & Clyde SCI Store - Patient Result Report

Report ID: BC276056X

Sample Collected: 12/11/2013 19:27:00

Patient						
Patient Name	CHI	Date Of Birth	Age	GP	GP Practice	Consultant Ward/Location
William Campbell Name Changed	0205743056	02/05/1974	39	DUNN, STEPHEN	DR STEPHEN H DUNN & PARTNERS	

Report Details					
Report Requestor	Requestor Location	Report Identifier	Discipline	Referral Source	
SERIES, JOHN	(VBSC) VOL - Biochemistry Dep	BC276056X	BIOCHEMISTRY	N/A	
Sample Type	Sample Collected	Sample Received	Processed Into Store	Status	
BLOOD	12/11/2013 19:27:00	12/11/2013 19:27:00	13/11/2013 10:06:24	Active	

Report				
Routine Biochemistry				
Description	Value	Range	Unit	Normalcy Notes
Glucose	5.1	3.5 - 6.0	mmol/L	
Sodium	141	133 - 146	mmol/L	
Potassium	4.1	3.5 - 5.3	mmol/L	
Chloride	106	95 - 108	mmol/L	
Urea	5.5	2.5 - 7.8	mmol/L	
Creatinine	113	50 - 120	umol/L	
Albumin	39	35 - 50	g/L	
Alk Phos	64	30 - 130	IU/L	
Bilirubin	4	3 - 21	umol/L	
AST	20	10 - 45	IU/L	
ALT	19	5 - 55	IU/L	
Cholesterol	6.8	3.1 - 5.0	mmol/L	R
Triglycerides	9.2	0.0 - 2.3	mmol/L	R
Estimated GFR (1.73m ²)	>60	60 - 140	mL/min	
Thyroid Function Tests				
Description	Value	Range	Unit	Normalcy Notes
TSH	1.0	0.35 - 4.0	mu/L	(TSH)
Free T4	12.0	9.0 - 21.0	pmol/L	
Test Comments				
(TSH) Euthyroid levels.				

Last 1 users to access this result			
Name	System	Location	Time
WS Test App	Test App	SG033827	22/11/2013 07:26:52

Printed By: Fiona Connolly on 03/02/2014 12:35:12

<https://ggc-scistore.scot.nhs.uk/StoreWeb/Restricted/Results/Result.aspx?PatientID=1...> 03/02/2014

W10 Confidential: Personal data about a patient

FAST ALCOHOL SCREENING TEST (FAST) FOR THE DETECTION OF PROBABLE HAZARDOUS DRINKING

For the following questions please circle the answer which best applies.

1 drink = 1 unit = 1/2 pint of beer or 1 glass of wine or 1 single spirits

0205743056
CAMPBELL
WILLIAM
02/05/1974 M
DATE: 03/02/2014
TIME: 12:13
F. Connolly
Dr. Stephen H. D.

1. MEN: How often do you have EIGHT or more drinks on one occasion?
WOMEN: How often do you have SIX or more drinks on one occasion?

Never 0	Less than monthly 1	Monthly 2	Weekly 3	Daily or almost daily 4	SCORE 2
------------	---------------------------	--------------	-------------	-------------------------------	------------

Only ask Questions 2, 3 & 4 if the response to Question 1 is "Less than monthly" or "Monthly"

2. How often during the last year have you been unable to remember what happened the night before because you had been drinking?

Never 0	Less than monthly 1	Monthly 2	Weekly 3	Daily or almost daily 4	SCORE 2
------------	---------------------------	--------------	-------------	-------------------------------	------------

3. How often during the last year have you failed to do what was normally expected of you because of drink?

Never 0	Less than monthly 1	Monthly 2	Weekly 3	Daily or almost daily 4	SCORE 0
------------	---------------------------	--------------	-------------	-------------------------------	------------

4. In the last year has a relative or friend, or a doctor or other health worker been concerned about your drinking or suggested you cut down?

Never 0	Yes, on one occasion 2	Yes, on more than one occasion 4	SCORE 8
------------	---------------------------	-------------------------------------	------------

TOTAL

If the person scores 3 or above, ask two consumption questions to record levels of alcohol use:

1. On average how many days of the week do you drink?
2. On average how many units of alcohol do you consume?

FAST POSITIVE
(Score of 3 or more)

YES

NO

NHS Confidential: Personal data about a patient

Vale of Leven Hospital: Clinical Report

Page 1 of 1

Patient: CAMPBELL, William		DOB: 02/05/1974
Referrer: Dr Stephen Dunn	HospNo: VOL189524	CHI No: 0205743056
Ref Loc: GP PRACTICE		CRIS No: 20225219
Ref Src: Dr Stephen H Dunn & Partners, The Health Centre, 12 Station Road, Dumbarton, G82 1PW,		
Clinical History : Road traffic accident with whiplash injury. To exclude cervical spine fracture.		
XR Cervical spine : Standard series plus trauma oblique views on one side. The cervical vertebral body appearances heights and alignment disc spaces and soft tissue shadows appear to be within normal limits. No fracture or subluxation identified and no evidence of any significant degenerative change or other findings.		
VERIFIED	Reported By: Dr Alan Wallace 2nd Reporter: Verified By: Dr Alan Wallace	
E-28003825	Exam Date: 18/11/13	
Exams: XR Cervical spine		

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Clinic Letter

Dr. SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton
G82 1PW

Vale of Leven Hospital
Main St
Alexandria
G83 0UA

Main Switchboard: 01389 754 121

Email inquiries to:

Contact for Details: 01389 817481

Dictated Date: 13/11/2013

By: Dr John Series

Transcribed Date: 18/11/2013

By: Ann Marie Meehan

Dear Dr. SH Dunn,

Patient

Name: Campbell William
CHI: 0205743056
DOB: 02 May 1974
Address: 4 Carman View
Dumbarton
G82 3AX

Attendance

Attended: 12/11/2013 14:40
New/Return: R LIPID
Referral Source: General Practitioner
Consultant: Dr John Series
Specialty: Chemical Pathology
Clinic: VLJJSCP4-DR SERIES
LIPID CLINIC TUES PM

Clinical Comments:

I saw this man with a hypertriglyceridaemia in the lipid clinic last week. He is now on bezafibrate 400 mg daily. Checked in the clinic his triglyceride is still raised at 9.2. Rather than leaping in to change his medication now, I think he should be followed a bit further.

He is coming back to the clinic in six months time and if he can have his triglyceride checked before that time this will help inform any decisions about change in treatment.

Yours sincerely,

Created on 25/11/2013 16:42 by Ann Marie Meehan

Page 1 of 2

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

OPCL 12/11/2013 v1

Dr J J Series

Consultant Clinical Biochemist

Electronically Signed: Dr John Series, Consultant

cc.

THIRD PARTY COPY

Created on 25/11/2013 16:42 by Ann Marie Meehan

Page 2 of 2

NHS Confidential: Personal data about a patient

Dr S Dunn
Dr J DunnDr S Dunn & Partner
Dumbarton Health Centre
Tel 01389 811833
Fax 01389 811823**Travel Vaccination Form**

Please complete this form and return it to our Receptionist. Our Practice Nurse will then review your medical notes and arrange any prescriptions you may require. It would be useful if you could provide us with a contact number (mobile if possible) should we need to contact you as we may require more information to ensure you are given the correct travel vaccinations.

****When we have received your completed form the nurse will review your medical notes we will contact you to collect your prescription and make a suitable appointment with our Practice Nurse.****

If you cannot complete this form in full this may delay your prescription.

Name	WILLIAM T. CAMPBELL			DOB	02/05/74		
Address	176 LADYTOWN, BOWHILL, ALEXANDRIA						
	G8A 3 9DY			Tel Mobile	0788833400		
Countries to be visited	TUNISIA						
Tick as appropriate	HOTEL	☒	BACKPACKING	☐	CRUISE	☐	
When are you going?	10-7-13						
For how long?	1 WEEK						
Did you receive all of your child hood vaccinations?						Yes / ☒	
Do you take medicines such as immunosuppressant's or high dose steroids?						☒ / No	
Do you know of any reason why you should not have a live vaccine?						☒ / No	
List all vaccinations in the last ten years?							

Please be aware if your holiday is short notice we cannot always accommodate an appointment and you can contact www.thetravelclinicglasgow.co.uk or www.fitfortravel.nhs.uk for vaccinations and advice. Vaccinations are not held in the practice and we require time to order them.

Please complete one form per patient.

Hep A -
Typhoid

NHS Confidential: Personal data about a patient

NHS GREATER GLASGOW & CLYDE
DEPARTMENT OF LABORATORY MEDICINE

Vale of Leven Hospital
Main Street
Alexandria G83 0UA



Haematology Consultants: Dr P T Clarke
Dr M G Rainey
Staff Grade: Dr L Marsh

Tel No: (01389) 817481/497
Fax No: (01389) 817496
Enquiries to: Haematology Secretaries
E-Mail: [REDACTED]

Biochemistry Consultant: Dr J J Series

JJS/AMM/189524

16 May 2013

Lipid Clinic 14 May 2013

Dr S Dunn
Health Centre 3
Station Road
Dumbarton

Dear Dr Dunn

William Campbell, DOB 02 05 74, CHI No. 0205743056
4/4 Merkins Avenue, Bellsmyre, Dumbarton

I saw this man, with a mixed hyperlipidaemia, in the lipid clinic this week. Has had a significantly high triglyceride in the past and despite advice to try a fibrate for cover to prevent a rise in his triglyceride he is still not on this. Talking to him, his father had pancreatitis and so I think it is very important that he should be on a fibrate.

Checked in the clinic a random blood sugar was completely normal, as was liver function. He is euthyroid. His cholesterol was 5.8 and triglyceride 7.2 mmol/l.

I would be grateful if he could be started on modified release bezafibrate 400mg once daily. His is coming back to the clinic in six months time and if he has several cholesterol checks before this it would be helpful. He does not need to be fasting for the tests.

Yours sincerely

J J Series
Consultant Clinical Biochemist

cc: Patient

NHS Confidential: Personal data about a patient

CLYDE DIVISION

Surgical & Anaesthetics Directorate

Orthopaedic Department

Consultant: Mr D Macdonald
Consultant: Mr H Shanker

Royal Alexandra Hospital
Corsebar Road
PAISLEY
PA2 9PN
Tel: 0141-887 9111
Fax: 0141-887 4387



Date: 08 April 2013
Clinic: 04 April 2013 (Fracture)
Our Ref: DMacd/JC/522484

Mr Macdonald's Secy 0141-314 7207
Mr Shanker's Secy 0141-314 7107

Dr Dunn
Dumbarton Health Centre
Station Road
Dumbarton
G82 1PW

Dear Dr Dunn

WILLIAM CAMPBELL D.O.B. 02.05.74 CHI: 0205743056
4 CARMAN VIEW, DUMBARTON

Diagnosis: Left ring finger flexion contracture following FDP repair and subsequent
Flexor sheath infection

Outcome: Physiotherapy and review in four months' time for consideration of surgery

I reviewed Mr Campbell in the clinic today. He has developed marked flexion contracture of the PIP and DIP joints of the ring finger. However, he has reasonably good function and doesn't stop him from doing activities and he has returned to work.

On examination he has some active flexion of the PIP joint although passively it will not extend beyond 90° of flexion and similarly with the DIP joint. There is shortage of skin and probably bow stringing over the proximal phalanx. Any surgery at this stage would require a skin graft or cross finger flap and teno arthrolysis. It is possible that we could fuse his DIP joint in slight flexion and leave him with an FDS finger although he may have limited flexion depending on adhesions within the flexor sheath because of the previous infections. I have explained that surgery would not necessarily guarantee a good outcome.

In the first instance, he is going to try passive extension by manual manipulation and splintage of the finger.

We will see him again in four months' time when we can consider surgery.

Yours sincerely


Mr D Macdonald
Consultant Orthopaedic Surgeon

NHS Confidential: Personal data about a patient

CLYDE DIVISION

Surgical & Anaesthetics Directorate

Orthopaedic Department

Consultant: Mr H Shanker
Consultant: Mr D Macdonald

Royal Alexandra Hospital
Corsebar Road
PAISLEY
PA2 9PN
Tel: 0141-887 9111
Fax: 0141-887 4387



Date: 12 March 2013
Clinic: 07 March 2013 (Fracture)
Our Ref: HS/JC/522484

Mr Shanker's Secy 0141-314 7107
Mr Macdonald's Secy 0141-314 7207

Dr Dunn
Dumbarton Health Centre
Station Road
Dumbarton
G82 1PW

Dear Dr Dunn

WILLIAM CAMPBELL D.O.B. 02.05.74 CHI: 0205743056
4 CARMAN VIEW, DUMBARTON

I reviewed this gentleman in the clinic today. He should have been reviewed a few months ago but he couldn't attend due to various reasons. There is no infection in the finger. However, he has a flexion deformity of the ring finger which he wishes to be considered for tenolysis. Mr Macdonald is not available in the clinic today so I have arranged for him to be reviewed in the fracture clinic on the 4th April which is suitable for the patient and I have confirmed that Mr Macdonald will be in the fracture clinic on that day.

Yours sincerely

Mr H Shanker
Consultant Orthopaedic Surgeon

C.C. Mr D Macdonald
Consultant Orthopaedic Surgeon

Scanned Document
19-Jun-2026 AN
Additional: Scanned Document

Filename: WC_03.pdf
Extension: .tif
Pages:

NHS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report**Patient Details**

Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE

Specimen Details

Specimen Number	B,21.7063157.M
Specimen Type	Blood
Date/Time Collected	25.01.21 / 12:26
Date/Time Received	25.01.21 / 16:22
Requested By	Dr Stephen H. Dunn
GP Practice	85090
Date/Time Reported	25.01.21 / 19:47
Details	Fresh rectal bleeding, at...

Results

Bone Profile - Authorised on 25.01.21 at 17:28

Calcium	2.31	mmol/L	(2.20-2.60)
Calcium (adjusted)	2.30	mmol/L	(2.20-2.60)
Phosphate	1.21	mmol/L	(0.80-1.50)
Albumin	40	g/L	(35-50)
Alkaline Phosphatase	79	U/L	(30-130)

Urea & Electrolytes - Authorised on 25.01.21 at 17:28

Sodium	140	mmol/L	(133-146)
Potassium	4.3	mmol/L	(3.5-5.3)
Chloride	106	mmol/L	(95-108)
Urea	4.3	mmol/L	(2.5-7.8)
Creatinine	75	umol/L	(40-130)
Estimated GFR	>60	ml/min	(>60)

Liver Function Tests - Authorised on 25.01.21 at 17:28

Total Bilirubin	4	umol/L	(<20)
ALT	42	U/L	(<50)
AST	38	U/L	(<40)
Alkaline Phosphatase	79	U/L	(30-130)
Albumin	40	g/L	(35-50)

Thyroid funct test - Authorised on 25.01.21 at 17:44

TSH	2.25	mU/L	(0.35-5.00)
Free T4	12.8	pmol/L	(9.0-21.0)
Total T3		nmol/L	

Lipid profile - Authorised on 25.01.21 at 19:41

Cholesterol	8.1	mmol/L	
Triglycerides	+	5.5	mmol/L (0.2-2.3)
HDL Cholesterol	1.4	mmol/L	

Blood Sciences Biochemistry Report

LDL-Cholest (calc'd)		mmol/L
VLDL-Chol (calc'd)		mmol/L
Chol/HDL ratio	5.8	

Comments:

Calculation of LDL & VLDL-chol only valid when Trig <4.50 mmol/L.

End of Report

THIRD PARTY COPY

WIS Confidential: Personal data about a patient

Blood Sciences Haematology Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.21.7063192.Y
Specimen Type	Blood
Date/Time Collected	25.01.21 / 12:26
Date/Time Received	25.01.21 / 16:25
Requested By	Dr Stephen H. Dunn
GP Practice	85090
Date/Time Reported	25.01.21 / 17:17
Details	Fresh rectal bleeding, at...

Results

Full Blood Count - Authorised on 25.01.21 at 16:35

White Blood Count	5.7	$\times 10^9/l$	(4.0-10.0)
Red Cell Count	4.77	$\times 10^{12}/l$	(4.50-6.50)
Haemoglobin	150	g/l	(130-180)
Haematocrit	0.445	l/l	(0.400-0.540)
Mean Cell Volume	93.3	fl	(83.0-101.0)
MCH	31.4	pg	(27.0-32.0)
Platelet Count	210	$\times 10^9/l$	(150-410)
Neutrophils	2.7	$\times 10^9/l$	(2.0-7.0)
Lymphocytes	2.3	$\times 10^9/l$	(1.1-5.0)
Monocytes	0.3	$\times 10^9/l$	(0.2-1.0)
Eosinophils	0.16	$\times 10^9/l$	(0.02-0.50)
Basophils	0.0	$\times 10^9/l$	(0.0-0.1)
Nucleated RBC	0.0	$\times 10^9/l$	

Report comments:

Clyde Haematology Labs are a UKAS accredited medical lab (No 5046) for all tests except GFST

ESR - Authorised on 25.01.21 at 17:12

ESR	+	12	mm/hr	(0-10)
-----	---	----	-------	----------

Report comments:

Clyde Haematology Labs are a UKAS accredited medical lab (No 5046) for all tests except GFST

End of Report

WIS Confidential: Personal data about a patient

Blood Sciences Haematology Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.21.7063157.M
Specimen Type	Blood
Date/Time Collected	25.01.21 / 12:26
Date/Time Received	25.01.21 / 16:22
Requested By	Dr Stephen H. Dunn
GP Practice	85090
Date/Time Reported	25.01.21 / 17:47
Details	Fresh rectal bleeding, at...

Results

Serum Ferritin - Authorised on 25.01.21 at 17:44

Serum Ferritin 171 ug/l (15-300)

Comments:

Males 15-300 (<15 iron deficiency)
Females 15-200 (<15 iron deficiency)
15-50 intermediate result. Consider iron deficiency
in anaemic patients, older patients and those
with inflammatory disease.

End of Report

19165 Covid-19 Test: Personal data about a patient

UK Covid-19 Test Report**Result**SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) detection result **negative****Patient Details**

Surname	Campbell
Forename	William
CHI	0205743056
Date of birth	1974-05-02
Sex	Male
Address	42 PAPPERY ALEXANDRIA G839LE

Specimen Details

Specimen Processed Date	22-11-2020 08:47
Test Start Date	21-11-2020 12:08
Test End Date	21-11-2020 12:10
GP Practice	85090
Specimen Number	AAH11748241
Administration Method	health_care_professional

End of Report**Report Date:** 22/11/2020

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Letter to Patient:

William Campbell
42 Pappert
Alexandria
Dumbartonshire
G83 9LE

Main Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
Dictated Date:
Transcribed Date:

NHS
Greater Glasgow
and Clyde
Vale of Leven Hospital
Main St
Alexandria
G83 0UA
01389 754 121
Biochemistry/Lipid Clinic
Audrey Carmichael

30/09/2020

IJ/AMC 0205743056

22/09/2020

22/09/2020

Dear Mr Campbell,

I was not able to get you by phone as per your appointment on 8th September as your phone kept going through to your answer phone. I have asked for an appointment to be sent out for four months which will also be an appointment by phone.

You somehow got two appointments on the system. I have cancelled the one for the 12th January and left the one for the 26th January 2021 in place.

My secretary told me you were saying you did not want to have your blood tests taken by a nurse and wanted them to be taken by me. Unfortunately I anticipate that at that point in time I will still only be able to see patients new to my clinic in person, and other appointments will be by phone. Therefore you will get an appointment for the weeks before your appointment with me to have your blood tests taken by a phlebotomist. This is somebody who spends their day taking blood samples and is therefore much better at it than myself and I would appreciate it if you could get your blood tests done with them.

I hope this letter finds you well.

Yours sincerely,

Dr Iain Jones

Consultant Clinical Biochemist

Electronically Signed:

cc. Dr S H Dunn, Dr Stephen H Dunn & Partners, The Health Centre, Station Road, Dumbarton, G82 1PW

Printed on 30/09/2020 14:29 by Audrey Paterson

Page 1 of 1

19165 Covid19Test: Personal data about a patient

UK Covid-19 Test Report**Result**SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) detection result **negative****Patient Details**

Surname	Campbell
Forename	William
CHI	0205743056
Date of birth	1974-05-02
Sex	Male
Address	42 PAPPERT ALEXANDRIA G839LE

Specimen Details

Specimen Processed Date	30-09-2020 05:41
Test Start Date	29-09-2020 18:26
Test End Date	29-09-2020 18:27
GP Practice	85090
Specimen Number	AAC58493673
Administration Method	health_care_professional

End of Report**Report Date:** 30/09/2020

1916 Covid-19 Test: Personal data about a patient

UK Covid-19 Test Report**Result**SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) detection result **negative****Patient Details**

Surname	Campbell
Forename	William
CHI	0205743056
Date of birth	1974-05-02
Sex	Male
Address	42 PAPPERY ALEXANDRIA G839LE

Specimen Details

Specimen Processed Date	06-09-2020 05:50
Test Start Date	05-09-2020 13:01
Test End Date	05-09-2020 13:02
GP Practice	85090
Specimen Number	AAB36090420
Administration Method	health_care_professional

End of Report**Report Date:** 06/09/2020

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Letter to Patient:

William Campbell
42 Pappert
Alexandria
Dunbartonshire
G83 9LE

Main Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
Dictated Date:
Transcribed Date:

NHS
Greater Glasgow
and Clyde
Vale of Leven Hospital
Main St
Alexandria
G83 0UA
01389 754 121
Biochemistry/Lipid Clinic
Audrey Carmichael

20/04/2020
IJ/AMC 0205743056
14/04/2020
16/04/2020

Dear Mr Campbell,

It was good to talk to you today, as it was not safe to bring you up to the clinic due to the current Covid-19 outbreaks.

You told me that you were feeling overall 'not too bad'. You felt your weight was likely similar, and possibly slightly higher than previously. At the moment you tell me you are walking two to three hours at times up into the hills for exercise. You tell me that you are only snacking occasionally.

You tell me that your blood pressure is a little bit high when you checked it on one occasion. I suggested that you check it daily for two weeks, as you have your own blood pressure monitor. I advised you that that the most informative blood pressure readings would be your blood pressure readings over the second week of regularly checking your blood pressure.

We agreed that I would see you back in around four to five months time, to allow your weight to settle down again after things go back to normal after the Covid.

I will check your blood tests then. We also discussed your medications and you told me that you had been missing doses of your medications recently and that you would address this, again making it not a good time to check your blood tests at present.

I hope this letter finds you well.

Yours sincerely,

Dr Iain Jones

Consultant Clinical Biochemist.

Electronically Signed:

Printed on 20/04/2020 12:21 by Audrey Paterson

Page 1 of 2

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Letter to Patient:

William Campbell
42 Peppert
Alexandria
Dumfrieshire
G83 9LE

Main Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
Dictated Date:
Transcribed Date:

NHSGreater Glasgow
and Clyde

Vale of Leven Hospital
Main St
Alexandria
G83 0JA

01389 754 121

Biochemistry/Lipid Clinic lipid
Audrey Carmichael

26/03/2020

J/AMC0205743056

25/03/2020

26/03/2020

Dear Mr Campbell,

You have an appointment scheduled for my clinic for Tuesday 14th of April. In light of the current COVID-19 outbreak I do not wish to put you and your family at any additional risk, not matter how small, by bringing you up to an outpatient clinic in a hospital at the present time.

I would be happy to either reschedule your appointment to a later date once this outbreak has settled, or make an appointment to discuss your care by phone for the week you are scheduled to be in clinic.

I would be grateful if you could get in touch with my secretary by email if possible:

audrey.carmichael@ggc.scot.nhs.uk Or by phone: **0141 314 7390** Prior to Monday 6th April.

To let me know:

1. Whether you would like to be rescheduled or have a phone appointment.

2. If you would like a phone appointment then let me know:

a) What is the best number to phone you on.

b) At what times are you **not** available between Tuesday the 14th and Friday 17th April, between 9am and 5pm.

If you are to get a phone appointment we will be in touch with a time during the above period to expect your phone call.

If pressures on the wards become significant it is possible I will be redeployed to the wards and these phone appointments will be cancelled, if this is the case we will be in touch to inform you of this.

I hope this letter finds you well.

Printed on 26/03/2020 14:26 by Audrey Paterson

Page 1 of 2

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

GCL 25/03/2020 v1

Yours sincerely,

Dr Iain Jones

Consultant Clinical Biochemist

Electronically Signed:

✓ cc. Dr S Dunn, The Health Centre, Station Road, Dumbarton G82 1PW

Printed on 26/03/2020 14:26 by Audrey Paterson

Page 2 of 2

WIS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.20.7100877.P
Specimen Type	Blood
Date/Time Collected	29.01.20 / 11:43
Date/Time Received	29.01.20 / 15:58
Requested By	Dr Eric Egong
GP Practice	85090
Date/Time Reported	29.01.20 / 17:37
Details	PR bleed

Results

Urea & Electrolytes - Authorised on 29.01.20 at 17:33

Sodium	142	mmol/L	(133-146)
Potassium	4.1	mmol/L	(3.5-5.3)
Chloride	104	mmol/L	(95-108)
Urea	4.7	mmol/L	(2.5-7.8)
Creatinine	85	umol/L	(40-130)
Estimated GFR	>60	ml/min	(>60)

End of Report

NHS Confidential - Personal data about a patient

Blood Sciences Biochemistry Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.20.4414095.J
Specimen Type	Faeces
Date/Time Collected	29.01.20 / 11:43
Date/Time Received	03.02.20 / 10:11
Requested By	Dr Eric Egong
GP Practice	85090
Date/Time Reported	04.02.20 / 13:12
Details	PR bleed

Results

qFIT - Authorized on 04.02.20 at 13:08

qFIT <9 ug Hb/g faec (<9)

Comments:

Negative qFIT result.

Refer to NHS GG&C guidelines for symptom based triage.

End of Report

WIS Confidential: Personal data about a patient

Blood Sciences Haematology Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.20.7100880.Y
Specimen Type	Blood
Date/Time Collected	29.01.20 / 11:43
Date/Time Received	29.01.20 / 16:01
Requested By	Dr Eric Egong
GP Practice	85090
Date/Time Reported	29.01.20 / 16:47
Details	PR bleed

Results

Full Blood Count - Authorised on 29.01.20 at 16:42

White Blood Count	4.2	$\times 10^9/l$	(4.0-10.0)
Red Cell Count	4.68	$\times 10^{12}/l$	(4.50-6.50)
Haemoglobin	146	g/l	(130-180)
Haematocrit	0.435	l/l	(0.400-0.540)
Mean Cell Volume	92.9	fl	(83.0-101.0)
MCH	31.2	pg	(27.0-32.0)
Platelet Count	191	$\times 10^9/l$	(150-410)
Neutrophils	2.1	$\times 10^9/l$	(2.0-7.0)
Lymphocytes	1.7	$\times 10^9/l$	(1.1-5.0)
Monocytes	0.3	$\times 10^9/l$	(0.2-1.0)
Eosinophils	0.10	$\times 10^9/l$	(0.02-0.50)
Basophils	0.1	$\times 10^9/l$	(0.0-0.1)
Nucleated RBC	0.0	$\times 10^9/l$	

Report comments:

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

End of Report

WMS Confidential - Personal data about a patient

Blood Sciences Haematology Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.20.7100877.P
Specimen Type	Blood
Date/Time Collected	29.01.20 / 11:43
Date/Time Received	29.01.20 / 15:58
Requested By	Dr Eric Egong
GP Practice	85090
Date/Time Reported	29.01.20 / 18:12
Details	PR bleed

Results

Serum Ferritin - Authorised on 29.01.20 at 18:10

Serum Ferritin 160 ug/l (15-300)

Comments:

Males 15-300 (<15 iron deficiency)
Females 15-200 (<15 iron deficiency)
15-50 intermediate result. Consider iron deficiency
in anaemic patients, older patients and those
with inflammatory disease.

End of Report

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Clinic Letter

Dr. SH Dunn
 Dr Stephen H Dunn & Partners
 The Health Centre
 Station Road
 Dumbarton
 G82 1PW

Main
 Switchboard:
 Department:
 Contact Tel:
 Enquiries to:
 Letter Date:
 Reference:
 Dictated
 Date:
 Transcribed
 Date:

NHS
 Greater Glasgow
 and Clyde
 Vale of Leven Hospital
 Main St
 Alexandria
 G83 0UA
 01389 754 121
 Biochemistry / Lipid Clinic
 Audrey Paterson Tel: 0141 314 7390
 09/04/2019
 IJ/AP/0205743056
 09/04/2018
 29/04/2019

Dear Dr. SH Dunn,

William Campbell; D.O.B: 02 May 1974; CHI: 0205743056
42 Pappert, Alexandria, Dunbartonshire, G83 9LE

Attendance: Specialty - Chemical Pathology; Clinic - VLIJCP4-DR JONES LIPID CLINIC TUES PM
 Date and Time of Appointment - 09/04/2019 14:20

Follow Up: For review in one year.

Medication Note:

Diagnoses: 1) Combined dyslipidaemia 2) Family history of pancreatitis 3) Alcohol excess 4) Smoker
 Medications: Atorvastatin 10mg, Supralip

Clinical Comments:

I saw this 44 year old gentleman back for review in my lipid clinic. He tells me he is feeling "stressed out" he is in debt significantly, he has recently consolidated his loans which hopefully will help. He is trying to walk a bit more for exercise but acknowledges he is not getting enough exercise.

His weight today is up at 120kg, broadly similar to the results from last year. We discussed his risks of diabetes. We discussed the possibility of referral to weight watchers via the Glasgow Weight Management Service which he does not want. We discussed the need for him to plan his meals when he is out driving for work etc. so that he does not end up snacking.

Blood tests showed U&Es, LFTs within normal limits. Total cholesterol 4.4, triglycerides 4.3, LDL 1.0.

Printed on 02/05/2019 14:54 by Audrey Paterson

Page 1 of 2

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

OPCL 09/04/2019 v1

I am somewhat surprised that his results are better today. Hypertriglyceridemia clearly persists. It is likely being driven by both excess alcohol and his obesity. As long as it remains below 10 I would not be recommending any additional treatment in him.

He has a return appointment for one year's time.

Yours sincerely,

Dr Iain Jones

Consultant Clinical Biochemist

Electronically Signed: Dr Iain Jones, Consultant

cc.

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Clinic Letter

Dr. SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton
G82 1PW

Main
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and Clyde
Vale of Leven Hospital
Main St
Alexandria
G83 0UA
01389 754 121

Biochemistry / Lipid Clinic
Arlene Cannon 0141 314 9751

27/03/2018
IJ/AC/0205743056
28/03/2018

05/04/2018

Dear Dr. SH Dunn,

William Campbell; D.O.B: 02 May 1974; CHI: 0205743056
42 Pappert, Alexandria, Dunbartonshire, G83 9LE

Attendance: Specialty - Chemical Pathology; Clinic - VLIJCP4-DR JONES LIPID CLINIC TUES PM
Date and Time of Appointment - 27/03/2018 15:20

Follow Up: For review in 1 year

Clinical Comments:

Diagnoses:

- 1) Combined dyslipidaemia
- 2) Family history of pancreatitis
- 3) Alcohol excess
- 4) Smoker

Medications:

Atorvastatin 10mg, Supralip

Recommendations:

Please increase Atorvastatin to 20mg daily

I saw this 43 year old gentleman for review in my Lipid Clinic. Since he was last here he has started taxi driving instead of his previous job as a security guard and he is therefore considerably less physically active. He is trying to give up smoking with patches at present which is very positive. Alcohol intake continues to be excessive and he describes himself drinking up to 8 pints per night. We discussed that this is not desirable in terms of his lipid profile and also not desirable in terms of his weight, and I have reflected with him on what the calorie content of that amount of alcohol is.

Weight was 119.7kg, up from 110.9kg when he was last here.

Blood tests show U&Es and LFTs within normal limits. Total cholesterol 6.0, triglycerides 6.1.

Printed on 05/04/2018 13:32 by Arlene Cannon

Page 1 of 2

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

OPCL 27/03/2018 v1

I would be grateful if you could increase his Atorvastatin to 20mg daily but this will have a minimal effect on his triglycerides. I discussed in clinic with him that the most important thing to keep his triglycerides under control is reducing his alcohol intake and getting his weight coming down. I will reiterate this in my letter to him.

He has a return appointment for 1 year's time.

Yours Sincerely

Dr Iain Jones

Consultant Clinical Biochemist

Electronically Signed: Dr Iain Jones, Consultant

cc.

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Clinic Letter

Dr. SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton
G82 1PW

Main
Switchboard:
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Letter Date:
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NHS
Greater Glasgow
and Clyde
Vale of Leven Hospital
Main St
Alexandria
G83 0UA
01389 754 121
Biochemistry Department
Arlene Cannon 0141 314 9751
14/03/2017
IJ/AC/0205743056
14/03/2017
27/03/2017

Dear Dr. SH Dunn,

William Campbell; D.O.B: 02 May 1974; CHI: 0205743056
42 Pappert, Alexandria, Dunbartonshire, G83 9LE

Attendance: Specialty - Chemical Pathology; Clinic - VLIJCP4-DR JONES LIPID CLINIC TUES PM
Date and Time of Appointment - 14/03/2017 15:10

Follow Up: For review in 1 year

Clinical Comments:

Diagnoses:

- 1) Combined dyslipidaemia
- 2) Family history of pancreatitis
- 3) Alcohol excess
- 4) Smoker

Medications:

Atorvastatin 10mg, Supralip

Recommendations:

No change

I saw this 42 year old gentleman back for review in my Lipid Clinic. He has been feeling not bad. He is back on Supralip and has had no further hives.

Weight is up at 110.9kg. Blood pressure is 128/88.

Blood tests show normal U&Es, LFTs, blood glucose. Cholesterol 5.5, triglycerides 4.6, HDL 1.4. His triglyceride count has increased slightly from previously, but remains well below 10. This doesn't need any action at present and we will observe.

Printed on 28/03/2017 10:52 by Arlene Cannon

Page 1 of 2

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

OPCL 14/03/2017 v1

We discussed the duration of Mr Campbell's medications. I indicated that the only circumstances under which I would suggest trying him off the medications would be if he both lost a significant amount of weight and was avoiding an excess of alcohol consumption. We discussed the rationale for fibrate treatment and its association with reducing the risk of pancreatitis due to hypertriglyceridaemia and he seems understanding of this. We will see him back for review in 1 years time.

Yours Sincerely

Dr Iain Jones

Consultant Clinical Biochemist

Electronically Signed: Dr Iain Jones, Consultant

cc.

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Clinic Letter

Dr. SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton
G82 1PW

Main
Switchboard:
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Contact Tel:
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Letter Date:
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and Clyde
Vale of Leven Hospital
Main St
Alexandria
G83 0UA
01389 754 121

Biochemistry Department
Arlene Cannon 0141 314 9751
arlene.cannon@ggc.scot.nhs.uk
08/11/2016
1J/AC/0205743056
08/11/2016

Dear Dr. SH Dunn,

16/11/2016

William Campbell; D.O.B: 02 May 1974; CHI: 0205743056
42 Pappert, Alexandria, Dunbartonshire, G83 9LE

Attendance: Specialty - Chemical Pathology; Clinic - VLIJCP4-DR JONES LIPID CLINIC TUES PM
Date and Time of Appointment - 08/11/2016 16:00

Follow Up: For review in 4 months

Clinical Comments:

Diagnoses:

- 1) Combined dyslipidaemia
- 2) Family history of pancreatitis
- 3) Alcohol excess
- 4) Smoker

Medications:

Atorvastatin 10mg, Supralip 160mg daily

Recommendations:

No change

I saw this 42 year old gentlemen back for review in the Lipid Clinic. He has overall been feeling well since he was last here. He tells me he had "hives" with the Supralip but it sounds like he is still taking it or another micronised Fenofibrate preparation. He had run out of fibrate and hasn't had any until taking a further dose today. He has been taking his statin.

Weight today was 106.8kg.

Blood tests show total cholesterol 5.7, triglycerides 2.9. U&Es, LFTs normal.

Printed on 18/11/2016 10:54 by Arlene Cannon

Page 1 of 2

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

OPCL 08/11/2016 v1

I wouldn't suggest any change to Mr Campbell's medications. We will see him back for review in 4 months time to see how he is when taking his Supralip consistently. Thereafter we will adopt annual reviews.

Yours Sincerely

Dr Iain Jones

Consultant Clinical Biochemist

Electronically Signed: Dr Iain Jones, Consultant

cc.

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Letter to Patient:

William Campbell
42 Pappert
Alexandria
Dunbartonshire
G83 9LE

Main
Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
Dictated
Date:
Transcribed
Date:

NHS
Greater Glasgow
and Clyde
Vale of Leven Hospital
Main St.
Alexandria
G83 0UA
01389 754 121

Biochemistry Department
0141 314 9751
Arlene Cannon
22/09/2016
IJ/AC/0205743056
19/09/2016
20/09/2016

Dear Mr Campbell,

I am sorry we did not see you in the lipid clinic recently. A further appointment will follow for around 8 weeks.

Yours Sincerely

Dr Iain Jones

Consultant Clinical Biochemist

Electronically Signed: Dr Iain Jones, Consultant

cc. Dr Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton
G82 1PW

Printed on 22/09/2016 10:42 by Arlene Cannon

Page 1 of 1

NHS Confidential: Personal data about a patient



Vale of Leven Hospital
Main St
Alexandria G83 0UA
13/09/2016

Dr SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton G82 1PW

Dear Dr SH Dunn

Re Patient
Mr William Campbell
42 Pappert
Alexandria G83 9LE

CHI Number: 0205743056
Consultant: Dr Iain Jones
Specialty: Chemical Pathology
Date and time: 13/09/2016, at 16:00

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

Your patient has been informed of the missed appointment and no further appointment will be offered without further request from the patient or yourself. Your patient has been provided with the hospital contact details to use to request a further appointment. If on consideration of the clinical or social circumstances of the patient you feel it is appropriate to request a further appointment on the patient's behalf please resend the gateway referral.

Yours sincerely

Irene Hunter Referral Management Centre, South/Clyde.

User ID Leanne Coyne

SCGC Op DNA Removal to GP V1

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Emergency Attendance Letter

Emergency Department
Vale of Leven Hospital
Main St
Alexandria
Dunbartonshire
G83 0UA

Dept. Contact Details:
Tel: 01389 817240(MIU)817345(Reception)
Fax: 01389 817274
Email:

Date Completed: 13/08/2016

Consultant: Dr Gordon McNaughton

SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton
Dumbarton
G82 1PW

Dear SH Dunn

Re: **Campbell William**
42 Pappert
Alexandria G83 9LE

DOB: 02/05/1974

CHI: 0205743056

Attended on: **13/08/2016 at 21:03 hrs.**
Discharge Type: **01a - Discharge with no follow up**
Previous ED Attendance in last 12 months: **0**

Departed on: **at hrs.**
Destination: **Private residence**

Presenting complaint
head injury

Nursing Assessment:

Investigations in ED: **None**

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Diagnosis:

Diagnosis	Side	Site
Superficial injuries involving head with neck		

Procedures: **None**Immunisations: **None**Dispensed Medication: **None**

Clinician Notes:

Head injury about one hour ago. Just finished work for Domino Pizza. Large plastic sign normally used on top of a car fell on his head from top of a shelf whilst trying to put it away. No LOC. No blood from head, nose or ears. some pain on top of head otherwise well. There is not tenderness or swelling around skull or facial area. Ears NAD. Has full ROM of neck. able to open and clench jaw with no pain. Impression uncomplicated head injury. Reassured. Written head injury advice given.

Followup :

Highly sensitive: N

Consent for sharing withheld: N

Yours sincerely,
Saied Pourghazi
Doctor

Copies to:

1. SH Dunn (GP)

School Address:

NHS Confidential: Personal data about a patient

NHS Greater Glasgow and Clyde

Page 1 of 2

Call No: 4708362 **Date:** 11/06/2016 **External Case**
Patient's Name: William Campbell **DOB:** 02/05/1974 **Age:** 42 years
Address Today **Home Address (If Different)**
 Lomond Healthcare NHS Trust Vale Of Leven
 General Hospital North Main Street
 42 Pappert
 Alexandria
Postcode: G83 0UA **Postcode:** G83 9LE
Current Phone 01389 605627 **Home Phone (If Different)**
CHI Number 0205743056
Callers Name: **Relationship to patient:**
Name of GP: Dunn,Stephen(A6) **Time Call Received NHS24**
Surgery: A 6 Health Centre Dumbarton (Dunn) **Time Received OOH** 11/06/2016
 10:41:14
Call Type: Walk In **Time Patient Arrived** 11/06/2016
 10:41:58
Priority **Consultation Start** 11/06/2016
 10:43:02
Consultation End 11/06/2016
 10:59:14

Receptionist: MARTH **Time Arrived:** 11/06/2016 10:41 **Time Complete:** 11/06/2016 09:59

NHS24 Summary

Symptoms: painful foot

Remarks:

BP: **PR:** **Temp:**
Doctor/Nurse: Pickering,Anna(CC) **Follow Up:** GP Follow Up -

Consultation(s):

By: Pickering,Anna(CC) **Start** 11/06/2016 10:43 **Finish** 11/06/2016 10:59

Clinical Assessment Details:
 Started- 11/06/2016 10:43:02
 Finished- 11/06/2016 10:59:14
 Initial Assessment

History

dog stood on foot a few nights ago - about 25-30kg, didn't think anything of it. out last night watching football.
 had about 8 pints. walked home for 10 mins or so, no difficulty. woke in middle of the night with intense pain
 right 1st MTP base of toe and sole. co cdamol 30/500 x 2 helped a bit. NSAID not tried. otherwise wief. no injury
 PMH high triglycerides
 DH NKDA on statin
 smoker 10/day. alcohol

Report Statistics:

Report produced by Adastra Version 3 - 11/06/2016 12:02:18

NHS Confidential: Personal data about a patient

Page 2 of 2

Examination

temp 36.
p 74reg sats 98%
antalgic gait
left great toe slightly swollen, tender MTP and sole of foot and base of 1st MTP, restricted ROM due to pain,
NV intact

Diagnosis

Gout

Treatment

for NSAID with PPI cover, co codamol if unable to tolerate pain.
red flags discussed
f/u with GP if not settling/returning.
push fluids

Clinical Coding

C34.. Gout

Prescription Details

diclofenac sodium gastro-resistant tablets 50mg 1 tab up to three times a day after food 28.00
omeprazole gastro-resistant capsules 20mg 1 tab daily whilst on PPI 28.00
co-codamol (codeine and paracetamol) tablets 30mg + 500mg 1-2 tabs up to four times a day 15.00

Report Statistics:

Report produced by Adastra Version 3 - 11/06/2016 12:02:18

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Clinic Letter

Dr. SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton
G82 1PW

Main
Switchboard:
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NHS
Greater Glasgow
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Main St
Alexandria
G83 0UA
01389 754 121
Biochemistry Department
Ariene Cannon 0141 314 9751
26/04/2016
IJ/AC/0205743056
28/04/2016
09/05/2016

Dear Dr. SH Dunn,

William Campbell; D.O.B: 02 May 1974; CHI: 0205743056
42 Pappert, Alexandria, Dunbartonshire, G83 9LE

Attendance: Specialty - Chemical Pathology; Clinic - VLIJCP4-DR JONES LIPID CLINIC TUES PM
Date and Time of Appointment - 26/04/2016 15:30

Follow Up: For review in 4 months

Clinical Comments:

Diagnoses:

- 1) Combined dyslipidaemia
- 2) Family history of pancreatitis
- 3) Alcohol excess
- 4) Smoker

Medications:

Atorvastatin 10mg daily

Recommendations:

Please start Supralip 160mg daily as per my handwritten note

Many thanks for referring this 41 year old gentleman to the lipid clinic where I reviewed him for his combined dyslipidaemia. Dyslipidaemia was picked up some years ago, I am unclear how it was picked up. He seemed to have been initially referred to the clinic in August 2011. His attendance has been poor. He was previously on Simvastatin and Bezafibrate. He is now on Atorvastatin, having stopped his Simvastatin because of worries about his memory. His main concern at the moment is numbness in both ulnar nerve distributions. He tells me that this is present in the morning and is self limiting, resolving through the day. I explained that it likely represents cubital tunnel compression and assuming that it resolves when he gets up and is non progressive it does not sound concerning. I note he is due to see orthopaedics.

Printed on 10/05/2016 09:16 by Ariene Cannon

Page 1 of 2

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

OPCL 26/04/2016 v1

Height was 190.5cm, weight 110kg giving a BMI of 30.3.

He smokes around 5 cigarettes per day. He drinks 2-4 cans of lager each night, 4-8 cans of lager at the weekend and around a bottle of wine a week. This is less than when you referred him to me which sounds like a good sign.

His father died of pancreatitis.

Blood pressure was 128/78.

Blood tests show normal U&Es and LFTs. Cholesterol was 7.2 with triglycerides 10.4.

I would be grateful if, as per my handwritten note, you could start Supralip 160mg daily in the morning. His follow up appointment to come back and see me is in 4 months time. We are seeking to keep his triglycerides under reasonable control, not to normalise them. I have reinforced to him that his dyslipidaemia reflects his alcohol consumption. I have reinforced to him that his hypertriglyceridaemia puts him at risk of pancreatitis. I spent a significant proportion of his 30 minute appointment emphasising these links and the potentially serious effects of uncontrolled hypertriglyceridaemia due to uncontrolled alcohol intake.

We will see him back in 4 months for review. Assuming his meds are tolerated our priority is that he be on a small dose of a statin and a fibrate as this combination is most likely to keep his triglyceride count down.

Yours Sincerely

Dr Iain Jones

Consultant Clinical Biochemist

Electronically Signed: Dr Iain Jones, Consultant

cc.

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Clinic Letter

Dr. SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton
G82 1PW

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NHS
Greater Glasgow
and Clyde
Vale of Leven Hospital
Main St
Alexandria
G83 0UA
01389 754 121

Biochemistry Department
Arlene Cannon 0141 314 9751

12/04/2016
IJ/AC/0205743056
25/04/2016

27/04/2016

Dear Dr. SH Dunn,

William Campbell; D.O.B: 02 May 1974; CHI: 0205743056
42 Pappert, Alexandria, Dunbartonshire, G83 9LE

Attendance: Specialty - Chemical Pathology; Clinic - VLIJCP4-DR JONES LIPID CLINIC TUES PM
Date and Time of Appointment - 12/04/2016 14:30

Clinical Comments:

Mr Campbell did not come to the lipid clinic to see me again on 12th April 2016.

He attended a subsequent appointment on 26/4/16 - letter to follow.

Yours Sincerely

Dr Iain Jones

Consultant Clinical Biochemist

Electronically Signed: Dr Iain Jones, Consultant

cc.

NHS Confidential: Personal data about a patient



Vale of Leven Hospital
Main St
Alexandria G83 0UA
08/04/2016

Dr SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton G82 1PW

Dear Dr SH Dunn

Re Patient

Mr William Campbell
42 Pappert /
Alexandria G83 9LE

CHI Number: 0205743056
Consultant: Mr Mohammad Durrani
Specialty: Orthopaedics
Hospital: Vale of Leven Hospital
Date and time: 07/04/2016, at 14:45

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

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

Please note, your patient has also been notified of this removal.

Yours sincerely

Irene Hunter Referral Management Centre South/Clyde

User ID Jane Murray

SCGC Op DNA Removal to GP V1

NHS Confidential: Personal data about a patient

Form: CIGLU Run: 642

**CLYDE HOSPITALS
BIOCHEMISTRY REPORT**

Surname:	CAMPBELL	Location:	F3 Dumbarton Health Cent
Forename:	WILLIAM		Station Rd
DOB/Age:	02.05.74 Sex: Male		Dumbarton
CHI/Unit No:	0205743056		Greater Glasgow & Clyde
Address:	42 Pappert Bonhill	Requestor:	Dr Stephen H. Dunn
Details:	hypertriglyceridaemia	Ext Labno:	

Lab Number	Collected	Received	Glucose mmol/L (3.5-6.0)	HbA1c (IFCC) mmol/mol (20-42)
B,15.7227943.Y	09.03.16 09:55	10.03.16 11:05	4.5	

Result Comments:
09.03.16 Glucose : Fasting sample

Date reported: 11.03.16 Authorised by: Automatic release by system

Scanned Document
19-Jun-2026 AN
Additional:Scanned Document

Filename: WC_02.pdf
Extension:.tif
Pages:

Campbell William

CHI: 0205743056

Clinic Letter

Vale of Leven Hospital
Main St
Alexandria
G83 0UA
01389 754 121

Dr. SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton
G82 1PW

Main
Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
Dictated
Date:
Transcribed
Date:

General Surgery
01389 817630

30/10/2023
JS/HMcM
30/10/2023
14/11/2023

Dear Dr. SH Dunn,

William Campbell; D.O.B: 02 May 1974; CHI: 0205743056
42 Pappert, Alexandria, Dunbartonshire, G83 9LE

Attendance: Specialty - General Surgery; Clinic - VLJSGS2-MRS SAGHIR SURGICAL MON PM
Date and Time of Appointment - 30/10/2023 14:50

Clinical Comments:

Thank you for referring this 49 year old gentleman who noticed a swelling in the epigastric area a few weeks ago when he tried to raise his head from the supine position. He denies any other associated symptoms apart from intermittent reflux for which he takes Rennie's with no benefit. He is a smoker, drinks more than the recommendation and denies any other significant medical problems.

On clinical assessment today he was looking generally well. He is clinically obese with a height of 192cm and weight of 125.4kg giving him a BMI of 34. There was a moderate sized divarication of the rectus sheath with no abdominal wall hernia.

I have explained to Mr Campbell that divarication of the rectus sheath is not a true hernia and surgery is not an option. However a number of patients reported reduction in the size of the divarication by losing weight.

With regards to his ongoing reflux I have advised him to cut down on smoking and alcohol and I will arrange for an upper GI endoscopy on a routine basis. He might benefit from acid suppression therapy.

Yours sincerely

Campbell William

CHI: 0205743056

OPCL 30/10/2023 v1

Jazair Saghir

Associate Specialist In Surgery

Electronically Signed: Ms Jazair Saghir, Consultant

cc.

THIRD PARTY COPY

WIS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 PAPPERT ALEXANDRIA ALEXANDRIA DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.23.7458442.S
Specimen Type	Blood
Date/Time Collected	22.05.23 / 17:39
Date/Time Received	23.05.23 / 18:42
Requested By	Dr Fadila Refin
GP Practice	85090
Date/Time Reported	24.05.23 / 09:02
Details	as per cmht

Results

Bone Profile - Authorised on 24.05.23 at 08:56

Calcium	2.59	mmol/L	(2.20-2.60)
Calcium (adjusted)	+ 2.61	mmol/L	(2.20-2.60)
Phosphate	NA	mmol/L	
Albumin	44	g/L	(35-50)
Alkaline Phosphatase	71	U/L	(30-130)

Comments:

(NA) Old specimen: result invalid.

Urea & Electrolytes - Authorised on 24.05.23 at 08:56

Sodium	140	mmol/L	(133-146)
Potassium	NA	mmol/L	
Chloride	101	mmol/L	(95-108)
Urea	4.5	mmol/L	(2.5-7.8)
Creatinine	75	umol/L	(40-130)
Estimated GFR	>60	ml/min	(>60)

Comments:

(NA) Old specimen: result invalid.

Liver Function Tests - Authorised on 24.05.23 at 08:56

Total Bilirubin	5	umol/L	(<20)
ALT	50	U/L	(<50)
AST	NA	U/L	
Alkaline Phosphatase	71	U/L	(30-130)
Albumin	44	g/L	(35-50)

Comments:

(NA) Old specimen: result invalid.

End of Report

WIS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 PAPPERT ALEXANDRIA ALEXANDRIA DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.23.7456442.S
Specimen Type	Blood
Date/Time Collected	22.05.23 / 17:39
Date/Time Received	23.05.23 / 18:42
Requested By	Dr Fadila Refin
GP Practice	85090
Date/Time Reported	24.05.23 / 08:57
Details	as per cmht

Results

Lipid profile - Authorized on 24.05.23 at 08:53

Cholesterol	8.8	mmol/L	
Triglycerides	+ 7.1	mmol/L	(0.2-2.3)
HDL Cholesterol	1.4	mmol/L	
LDL-Cholest (calc'd)		mmol/L	
VLDL-Chol (calc'd)		mmol/L	
Chol/HDL ratio	6.3		

Comments:

Calculation of LDL & VLDL-chol only valid when Trig <4.50 mmol/L.
Possible secondary causes of hypertriglyceridaemia include alcohol, obesity and diabetes mellitus.

End of Report

WIS Confidential: Personal data about a patient

Blood Sciences Haematology Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 PAPPERT ALEXANDRIA ALEXANDRIA DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.23.7458442.S
Specimen Type	Blood
Date/Time Collected	22.05.23 / 17:39
Date/Time Received	23.05.23 / 18:42
Requested By	Dr Fadila Refin
GP Practice	85090
Date/Time Reported	23.05.23 / 20:27
Details	as per cmht

Results

Serum Ferritin - Authorised on 23.05.23 at 20:11

Serum Ferritin 187 ug/l (15-300)

Comments:

Males 15-300 (<15 iron deficiency)
Females 15-200 (<15 iron deficiency)
15-50 intermediate result. Consider iron deficiency
in anaemic patients, older patients and those
with inflammatory disease.

Serum Vitamin B12 - Authorised on 23.05.23 at 20:25

Serum Vitamin B12 NA ng/l

Comments:

(NA) Specimen haemolysed, result invalid.

Serum Folate - Authorised on 23.05.23 at 20:25

Serum Folate NA ug/l

Comments:

(NA) Specimen haemolysed, result invalid.

End of Report

WIS Confidential: Personal data about a patient

Blood Sciences Haematology Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 PAPPERT ALEXANDRIA ALEXANDRIA DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.23.7458460.X
Specimen Type	Blood
Date/Time Collected	22.05.23 / 17:39
Date/Time Received	23.05.23 / 18:44
Requested By	Dr Fadila Refin
GP Practice	85090
Date/Time Reported	23.05.23 / 18:47
Details	as per cmht

Results

Full Blood Count - Authorised on 23.05.23 at 18:45

White Blood Count	NA	$\times 10^9/l$
Red Cell Count	NA	$\times 10^{12}/l$
Haemoglobin	NA	g/l
Haematocrit	NA	l/l
Mean Cell Volume	NA	f1
MCH	NA	pg
Platelet Count	NA	$\times 10^9/l$
Neutrophils	NA	$\times 10^9/l$
Lymphocytes	NA	$\times 10^9/l$
Monocytes	NA	$\times 10^9/l$
Eosinophils	NA	$\times 10^9/l$
Basophils	NA	$\times 10^9/l$
Nucleated RBC	NA	$\times 10^9/l$

Comments:

Unsuitable

Only 4ml EDTA samples are suitable for Haematology analysis
Test results not available.

Report comments:

Clyde Haematology Labs are a UKAS accredited medical lab (No 5046) for all tests except GFST

End of Report

WIS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 PAPPERT ALEXANDRIA ALEXANDRIA DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.23.7456442.S
Specimen Type	Blood
Date/Time Collected	22.05.23 / 17:39
Date/Time Received	23.05.23 / 18:42
Requested By	Dr Fadila Refin
GP Practice	85090
Date/Time Reported	23.05.23 / 20:17
Details	as per cmht

Results

Thyroid funct test - Authorised on 23.05.23 at 20:13

TSH	0.90	mU/L	(0.35-5.00)
Free T4	12.5	pmol/L	(9.0-21.0)
Total T3		nmol/L	

Vitamin D - Authorised on 23.05.23 at 20:15

25-OH Vitamin D	37	nmol/L
-----------------	----	--------

Comments:

Total 25OH Vit D: <25 deficient, 25-50 insufficient, >50 adequate.

End of Report

NHS Confidential: Personal data about a patient

NHS Greater Glasgow and Clyde OOH Call Incident Report

Call number:	6983337	Receive Date:	19-May-2023 12:28
Patient's Name:	William Campbell		
Date of birth:	2-May-1974 (49 years)	Gender:	M
Address:	42 Pappert Alexandria	Current Address:	42 Pappert Alexandria
	G83 9LE		G83 9LE
Return Contact No:			
Tel No:	07888 334400		07888 334400
Mobile No:			
Priority:	Routine	Call Origin:	
Received:	19-May-2023 12:28	Calltype:	NHS24 Advised (Info Only)
Advised:	12:35	Arrived PCC:	
Cons start:		Cons End:	
Consulting Doctor:		Own doctor:	Stephen Dunn

CHI Number:
0205743056

NHSD details:

Receptionist:

LUMP IN ABDO - 15 MINS

NOA4 Pt advised to contact Practice within 4 Hrs - Info Only

Clinical summary created by: Sharlene Jack (Call Taker St) () [19/05/2023 12:35:38]

Reason for call: LUMP IN ABDO - 15 MINSConfirmed Symptom(s): Body

lump Symptom(s) not found: No fever Risk Factor(s): No travel

outside Europe in last 21 days or to an affected country Call Detail(s):

Clinical supervisor: EMMA AITKEN 19:05:2023 12:28:48 JACKS.. LUMP

BETWEEN NAVAL AND RIB CAGE. NOT NOTICABLE LYING

DOWN BUT EVIDENT ON RAISING HEAD. EGG SHAPE.. DW CS EAITKEN -

LUMP CAUSING NO PAIN, FEELS OTHERWISE WELL, GP IN HOURS 4..

Outcome: Pt advised to contact Practice within 4 Hrs - Info Only

Followups:

NHS Confidential: Personal data about a patient

None

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NHS Confidential: Personal data about a patient



Vale of Leven Hospital
Main St
Alexandria G83 0UA
14/03/2023

Dr SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton G82 1PW

Dear Dr SH Dunn

Re Patient

William Campbell
42 Pappert
Alexandria G83 9LE

CHI Number: 0205743056
Consultant: Dr Iain Jones
Specialty: Chemical Pathology
Date and time: 14/03/2023, at 14:30

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

Your patient has been informed of the missed appointment and no further appointment will be offered without further request from the patient or yourself. Your patient has been provided with the hospital contact details to use to request a further appointment. If on consideration of the clinical or social circumstances of the patient you feel it is appropriate to request a further appointment on the patient's behalf please resend the gateway referral.

Yours sincerely

Dean McMahon

Referral Management Centre South/Clyde

User ID Lauren McDiarmid

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Letter to Patient:

William Campbell
42 Pappert
Alexandria
Dunbartonshire
G83 9LE

Main Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
Dictated Date:
Transcribed Date:

NHS
Greater Glasgow
and Clyde
Vale of Leven Hospital
Main St
Alexandria
G83 0UA
01389 754 121
Biochemistry/Lipid Clinic
Audrey Carmichael

03/10/2022
IJ/AMC 0205743056
13/09/2022
22/09/2022

Dear Mr Campbell,

Diagnoses: 1. Raised cholesterol and triglycerides; 2. Family history of pancreatitis; 3. Previous alcohol above recommended limits; 4. Smoker

Lipid lowering medications: Atorvastatin 20mg daily, Supralip

I was delighted to talk to you today from my lipid clinic.

You tell me overall you feel "fine". Your weight is static. You continue to smoke, you now smoke "roll-ups" smoking 30g of tobacco per week.

Unfortunately the phlebotomy service were not able to get your blood tests today. Your blood tests were very much better when last checked with a total cholesterol of 4.6 and triglycerides of 5.2 in August 2021, showing a good response to the addition of Atorvastatin. **Your GP will receive a copy of this letter and I would be most grateful if they could obtain your blood tests, which they have done successfully in the past.**

Should your lipid profile continue to be stable then I think your care could be passed back to them, with the recommendation that lipid profile is checked every 2 to 3 years. Should your triglycerides be above 10 in future I would be happy to have a further appointment to discuss any further treatment options.

I will keep an eye out for any further blood tests.

Yours sincerely,

Dr Iain Jones

Consultant Clinical Biochemist

Electronically Signed: Dr Iain Jones, Consultant

Printed on 03/10/2022 08:41 by Audrey Paterson

Page 1 of 2

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

GCL 13/09/2022 v1

cc: Dr S H Dunn, Dr Stephen H Dunn & Partners, The Health Centre, Station Road, Dumbarton, Dumbarton, G82 1PW

THIRD PARTY COPY

Printed on 03/10/2022 08:41 by Audrey Paterson

Page 2 of 2

NHS Confidential: Personal data about a patient

NHS Greater Glasgow and Clyde OOH Call Incident Report

Call number:	6703133	Receive Date:	11-Jun-2022 03:10
Patient's Name:	William Campbell		
Date of birth:	2-May-1974 (48 years)	Gender:	M
Address:	42 Pappert Alexandria	Current Address:	42 Pappert Alexandria
	G83 9LE		G83 9LE
Return Contact No:			
Tel No:	07888 334400		07888 334400
Mobile No:			
Priority:	within 4 hours	Call Origin:	
Received:	11-Jun-2022 03:10	Calltype:	Advice
Advised:	03:36	Arrived PCC:	
Cons start:		Cons End:	
Consulting Doctor:	ILI Mohd Suhaimi	Own doctor:	Stephen Dunn

CHI Number:
0205743056

NHSD details:

Receptionist:

COUGH 2 HRS

DPP4 Speak to clinician within 4 Hrs

Clinical summary created by: Grant Speirs (Call Taker St) () [11/06/2022 03:36:54]
Reason for call: COUGH 2 HRSConfirmed Symptom(s): Has Fever
Gradual onset of headache Endpoint Management Selected (CCT) Risk
Factor(s): No travel outside Europe in last 21 days or to an affected country No
high risk factors identified Temperature less than 36??C or more than 38??C No
underlying high risk conditions identified Call Detail(s): Clinical supervisor
(First Triage): MICHAEL ABBAN 11:06:2022 03:11:04 SPEIRSG1. HEADACHE
7 HRS - FEVER PAST COUPLE OF HOURS - BOTH SIDES & BACK OF RIBS
PAINFUL ONLY WHEN COUGHING. TESTED POSITIVE FOR COVID 19 1
HR AGO... HAD UNUSUAL PAIN IN LEFT HAND BETWEEN FINGERS 90
MINS AGO... NECK VERY HOT TO TOUCH... MILD FRONTAL HEADACHE
FOR 7 HOURS. COUGHING FOR > 2 HOURS. CHEST & RIB PAIN ON
COUGHING. PYREXIA FOR 4 HOURS.? LUMP IN BETWEEN INDEX &
MIDDLE LEFT FINGERS. DH: ON STATIN. ANALGESIA ADVISE GIVEN.
SPEAK TO CLINICIAN 4 HOURS PLEASE... Outcome: Speak to clinician within

NHS Confidential: Personal data about a patient

4 Hrs

Triage details:

History COVID +ve today

- Headche, cough, fever, chest pain with coughing
- No SOB/haemoptysis
- Taxi driver - works in Glasgow
- Unvaccinated - pt unsure when asked why
- Self care advice given
- If new SOB/haemoptysis/pleuritic chest pain to recontact for rv

Followups:

No Follow Up

Clinical Codes:

A79z. Viral infection NOS

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Letter to Patient:

William Campbell
42 Pappert
Alexandria
Dumbartonshire
G83 9LE

Main Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
Dictated Date:
Transcribed Date:



Vale of Leven Hospital
Main St
Alexandria
G83 0UA
01389 754 121
Biochemistry/Lipid Clinic
Audrey Carmichael

22/03/2023
IJ/AMC 0205743056
14/03/2023
16/03/2023

Dear Mr Campbell,

I did not see you as planned on 14th March. Additionally your mobile phone is not currently accepting connections from the hospital whenever I dial 07305210993 I get a message saying that your phone is not currently accepting incoming calls.

The reason for giving you a face to face appointment today was to try and get blood tests which the phlebotomy hub was not able to get and which were not able to be done at the surgery when I asked.

I am content with your last set of blood tests from August 2021 showing a total cholesterol of 4.6 and triglycerides of 5.2. I see you are on the same medicines as previously with you last having had a prescription issued in January of this year. As my plan in any case was to pass things back to your GP if things remain stable I will pass the care of your cholesterol back to them. I would recommend that you avoid putting on weight as this will increase your triglycerides.

Should your GP have issues with your cholesterol in the future I would be delighted for them to get back in touch with me for advice. Should your triglycerides be above 10 persistently in future then we can see you back to discuss other treatment options.

I hope this letter finds you well.

Yours sincerely,

Dr Iain Jones

Consultant Clinical Biochemist

Electronically Signed:

cc. Dr S H Dunn, Dr Stephen H Dunn & Partners, The Health Centre, Station Road, Dumbarton, Dumbarton, G82 1PW

Printed on 22/03/2023 09:10 by Arlene Cannon

Page 1 of 1

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Letter to Patient:

William Campbell
42 Pappert
Alexandria
Dumbartonshire
G83 9LE

Main Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
Dictated Date:
Transcribed Date:

NHS
Greater Glasgow
and Clyde
Vale of Leven Hospital
Main St
Alexandria
G83 0UA
01389 754 121
Biochemistry/Lipid Clinic
Audrey Carmichael

17/09/2021
IJ/AMC 0205743056
16/09/2021
17/09/2021

Dear Mr Campbell,

Diagnoses: 1. Raised cholesterol and triglycerides 2. Family history of pancreatitis 3. Previous alcohol above recommended limits 4. Smoker (will check whether still smoking at next appointment) Lipid lowering medications: Atorvastatin 20mg daily, Supralip 160mg daily.

It was good to talk to you by phone. Many thanks for getting your blood tests checked recently. These showed your cholesterol was 4.6 and triglycerides 5.2. I am very pleased with your cholesterol result. While elevated your triglyceride levels are not in what I would regard as being the 'danger level' of above 10. Therefore as we discussed the mainstay of protecting your health is to make sure you are getting plenty of exercise, working on your diet and keeping your alcohol consumption to with recommended limits. I am very pleased that you are particularly working on getting more exercise.

You have a return appointment for one year's time.

Yours sincerely,

Dr Iain Jones

Consultant Clinical Biochemist

Electronically Signed.

cc. Dr S H Dunn, Dr Stephen H Dunn & Partners, The Health Centre, Station Road, Dumbarton, Dumbarton, G82 1PW

Printed on 17/09/2021 14:04 by Audrey Paterson

Page 1 of 1

WIS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.21.7718067.X
Specimen Type	Blood
Date/Time Collected	06.09.21 / 15:34
Date/Time Received	07.09.21 / 11:06
Requested By	Dr Stephen H. Dunn
GP Practice	85090
Date/Time Reported	07.09.21 / 11:42
Details	Repeat tests

Results

Urea & Electrolytes - Authorised on 07.09.21 at 11:38

Sodium	138	mmol/L	(133-146)
Potassium	4.3	mmol/L	(3.5-5.3)
Chloride	104	mmol/L	(95-108)
Urea	3.6	mmol/L	(2.5-7.8)
Creatinine	72	umol/L	(40-130)
Estimated GFR	>60	ml/min	(>60)

Liver Function Tests - Authorised on 07.09.21 at 11:38

Total Bilirubin	9	umol/L	(<20)
ALT	27	U/L	(<50)
AST	24	U/L	(<40)
Alkaline Phosphatase	57	U/L	(30-130)
Albumin	39	g/L	(35-50)

End of Report

1916 Covid-19 Test: Personal data about a patient

UK Covid-19 Test Report**Result**SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) detection result **negative****Patient Details**

Surname	Campbell
Forename	William
CHI	0205743056
Date of birth	1974-05-02
Sex	Male
Address	42 PAPPERT ALEXANDRIA G83 9LE

Specimen Details

Specimen Processed Date	28-08-2021 14:12
Test Start Date	27-08-2021 13:19
Test End Date	27-08-2021 13:19
GP Practice	85090
Specimen Number	KNA52970630
Administration Method	self

End of Report**Report Date:** 30/08/2021

WMS Confidential - Personal data about a patient

Blood Sciences Biochemistry Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.21.7694619.L
Specimen Type	Blood
Date/Time Collected	20.08.21 / 02:15
Date/Time Received	20.08.21 / 07:22
Requested By	Dr Stephen H. Dunn
GP Practice	85090
Date/Time Reported	25.08.21 / 11:47
Details	

Results

Urea & Electrolytes - Authorised on 25.08.21 at 11:45

Sodium	NA	mmol/L
Potassium	NA	mmol/L
Chloride	NA	mmol/L
Urea	NA	mmol/L
Creatinine	NA	umol/L
Estimated GFR	NA	ml/min

Comments:

[NA] Request for ELU and LFTS added after sample discarded.

Liver Function Tests - Authorised on 25.08.21 at 11:45

Total Bilirubin	NA	umol/L
ALT	NA	U/L
AST	NA	U/L
Alkaline Phosphatase	NA	U/L
Albumin	NA	g/L

End of Report

WIS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.21.7694619.L
Specimen Type	Blood
Date/Time Collected	20.08.21 / 02:15
Date/Time Received	20.08.21 / 07:22
Requested By	Dr Stephen H. Dunn
GP Practice	85090
Date/Time Reported	20.08.21 / 08:02
Details	

Results

Lipid profile - Authorised on 20.08.21 at 07:56

Cholesterol	4.6	mmol/L	
Triglycerides	+ 5.2	mmol/L	(0.2-2.3)
HDL Cholesterol	1.6	mmol/L	
LDL-Cholest (calc'd)		mmol/L	
VLDL-Chol (calc'd)		mmol/L	
Chol/HDL ratio	2.9		

Comments:

Calculation of LDL & VLDL-chol only valid when Trig <4.50 mmol/L.

Urate - Authorised on 20.08.21 at 07:56

Urate	+ 457	umol/L	(200-430)
-------	-------	--------	-------------

End of Report

NHS Confidential: Personal data about a patient

NHS Greater Glasgow and Clyde OOH Call Incident Report

Call number:	6437652	Receive Date:	20-Aug-2021 00:16
Patient's Name:	William Campbell		
Date of birth:	2-May-1974 (47 years)	Gender:	M
Address:	42 Pappert Alexandria	Current Address:	42 Pappert Alexandria
	G83 9LE		G83 9LE
Return Contact No:			
Tel No:	07888 334400		07888 334400
Mobile No:			
Priority:	Pr 4 Within 4 hrs	Call Origin:	
Received:	20-Aug-2021 00:16	Calltype:	Attend PCEC
Advised:	00:49	Arrived PCC:	20-Aug-2021 01:55
Cons start:	20-Aug-2021 02:17	Cons End:	20-Aug-2021 02:19
Consulting Doctor:	Stephen Dunn	Own doctor:	Stephen Dunn

CHI Number:
0205743056

NHSD details:

Receptionist:

RIGHT KNEE SWOLLEN 3 DAYS
DPP4 Speak to clinician within 4 Hrs

Clinical summary created by: Kirsty Egan (Call Taker Si) () [20/08/2021 00:49:35]

Reason for call: RIGHT KNEE SWOLLEN 3 DAYS KNEE AND HEAD FEEL
WARM TO TOUCH, COUGH OVER THE LAST FEW DAYS BUT NOT
COUGHED TODAY, NO FEVER, NO CHANGE/LOSS OF TASTE/SMELL
20:08:2021 00:17:40 EGANK.. TEMP 35.5.. D/W CS I CALLAGHAN FOR KEY
WORD ADVISED KNEE.. D/W SCN K BLACK ADVISED TO TICK COVID
BOX AND CALL WILL GO TO COVID HUB.. 20:08:2021 00:44:58 BREWR.. 3/7
H/O RIGHT KNEE SWELLING. AREA WARM TO TOUCH. DENIES PAIN/NIL
INJURY. CAN MOBILISE. STATES BREATHING NOT NORMAL PAST
24HRS. HAD NON PRODUCTIVE COUGH PAST 2/7. HAS TAKEN
ANALGESIA. SPEAK WITH DR 4HRS.. Outcome: Speak to clinician within 4
Hrs

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Consultation details:

History - **Swollen right knee since Tuesday.**
PMH gout

Examination - **Mild effusion right knee. FROM with no pain.**
No evidence of DVT.
Sats 98. T 36°C. BP 120/80. P 90 reg.

Diagnosis - **Gout**

Treatment - **Bloods (for urate and lipids). Pt to phone 1/52 to practice. SD**

Followups:

GP Follow Up

Clinical Codes:

C34. Gout

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Letter to Patient:

William Campbell
42 Pappart
Alexandria
Dumbartonshire
G83 9LE

Main Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
Dictated Date:
Transcribed Date:

NHS
Greater Glasgow
and Clyde
Vale of Leven Hospital
Main St
Alexandria
G83 0UA
01380 754 121
Biochemistry/Lipid Clinic
Audrey Carmichael

02/08/2021
IJ/AMC 0205743056
27/07/2021
28/07/2021

Dear Mr Campbell,

I was pleased to talk to you today by phone. I was sorry to hear that you were not expecting the call and had customers in the car with you. A further appointment will follow. If this does not suit please get in touch with my secretary on the number above.

Yours sincerely,

Dr Iain Jones

Consultant Clinical Biochemist

Electronically Signed: Dr Iain Jones, Consultant

cc. ✓ Dr S H Dunn, Dr Stephen H Dunn & Partners, The Health Centre, Station Road, Dumbarton, Dumbarton, G82 1PW

1916 Covid-19 Test: Personal data about a patient

UK Covid-19 Test Report**Result**SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) detection result **negative****Patient Details**

Surname	Campbell
Forename	William
CHI	0205743056
Date of birth	1974-05-02
Sex	Male
Address	42 PAPPER ALEXANDRIA G83 9LE

Specimen Details

Specimen Processed Date	21-07-2021 07:13
Test Start Date	20-07-2021 16:19
Test End Date	20-07-2021 16:20
GP Practice	85090
Specimen Number	AA163391548
Administration Method	self

End of Report**Report Date:** 21/07/2021

1915 Covid-19 Test: Personal data about a patient

UK Covid-19 Test Report**Result**SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) detection result **positive****Patient Details**

Surname	Campbell
Forename	William
CHI	0205743056
Date of birth	1974-05-02
Sex	Male
Address	42 PAPPER ALEXANDRIA G839LE

Specimen Details

Specimen Processed Date	19-02-2021 23:19
Test Start Date	19-02-2021 11:56
Test End Date	19-02-2021 11:57
GP Practice	85090
Specimen Number	AAF89961148
Administration Method	health_care_professional

End of Report**Report Date:** 20/02/2021

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Blood Sciences Biochemistry Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.21.7063196.M
Specimen Type	Blood
Date/Time Collected	25.01.21 / 12:26
Date/Time Received	25.01.21 / 16:25
Requested By	Dr Stephen H. Dunn
GP Practice	85090
Date/Time Reported	26.01.21 / 14:27
Details	Fresh rectal bleeding, at...

Results

HbA1c (IFCC) - Authorised on 26.01.21 at 14:24

HbA1c (IFCC) 35 mmol/mol (20-41)

End of Report

WIS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.21.7063193.P
Specimen Type	Blood
Date/Time Collected	25.01.21 / 12:26
Date/Time Received	25.01.21 / 16:25
Requested By	Dr Stephen H. Dunn
GP Practice	85090
Date/Time Reported	25.01.21 / 17:12
Details	Fresh rectal bleeding, at...

Results

Glucose - Authorised on 25.01.21 at 17:09

Glucose 5.3 mmol/L (3.5-6.0)

Comments:

Non-fasting sample

End of Report

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Letter to Patient:

William Campbell
42 Pappert
Alexandria
Dunbartonshire
G83 9LE

Main Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
Dictated Date:
Transcribed Date:



Vale of Leven Hospital
Main St
Alexandria
G83 0UA
01389 754 121
Biochemistry/Lipid Clinic
Audrey Carmichael

12/02/2021
IJ/AMC 0205743056
29/01/2021
04/02/2021

Dear Mr Campbell,

Diagnoses:

- 1) Combined dyslipidaemia
- 2) Family history of pancreatitis
- 3) Alcohol above recommended amounts
- 4) Smoker

Medications: Atorvastatin 20mg, Supralip

It was good to talk to you on behalf of the lipid clinic as I am not able to see you in person at present.

Many thanks for getting your blood tests checked. These showed your total cholesterol has increased from 4.4 to 8.1 and your triglycerides from 4.3. to 5.5.

We talked about this and you let me know that you had been missing some doses of your medication. Your weight has also been increasing and is now around 120kg.

You have been in discussion with your GP about your health. In terms of life things are changing in positive directions and you are getting a different job on the railways. You are going to work on taking your medicines more often and work on your weight. You have a further appointment for six months time.

Yours sincerely,

Dr Iain Jones

Printed on 12/02/2021 10:46 by Audrey Paterson

Page 1 of 2

Scanned Document
19-Jun-2026 AN
Additional:Scanned Document

Filename: WC_01.pdf
Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

CAMPBELL, William (Mr)

4 Carman View
DUMBARTON

G82 3AX

0205743056

Aciclovir 800mg tablets
Quant: 35 tablet
one tablet five times daily for seven days

UT91060009R6U8A1

Shingles - Scot. GP Registered

26.01.2026

Send To GP

9106

2065464

85090

~~NOT ALCLOVIR~~

THIRD PARTY COPY

NHS Confidential: Personal data about a patient

Patient Group Direction for treatment of Herpes Zoster (Shingles) in patients aged 18 years and over

Notification of supply from community pharmacy

CONFIDENTIAL WHEN COMPLETED

Data protection confidentiality note: this message is intended only for the use of the individual or entity to whom it is addressed and may contain information that is privileged, confidential and exempt from disclosure under law. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited.

GP name	Click or tap here to enter text.	Pharmacy Stamp / Address details
GP practice address	Click or tap here to enter text.	
The following patient has attended this pharmacy for assessment and potential treatment of Herpes Zoster (Shingles)		STATION ROAD PHARMACY 19-20 STATION ROAD DUMBARTON G62 3AX Tel: 01389 700077
Patient name	Mr William Cammelli	
Date of birth/CHI	2/5/74	Pharmacist name
Patient address	4 Carman View DUMBARTON G62 3AX EX/RX Mobile: 0788834400	Click or tap here to enter text.
Postcode	28/01/2028 Station Road Pharmacy 19-20 Station Road Dumbarton G62 3AX Tel: 01389 700077 Keep out of reach and sight of children	GPhC number
		Click or tap here to enter text.
		Date
		Click or tap here to enter text.

Following assessment (Tick as appropriate)

The patient has been given a 7 day course of aciclovir 800 mg five times daily	☒
The patient has been given self-care advice only	☐
The patient is unsuitable for treatment via PGD for the following reasons and has been referred:	☐
Click or tap here to enter text.	

Your patient has been advised to contact the practice if symptoms fail to resolve following treatment.

You may wish to include this information in your patient records.

Patient consent: I can confirm that the information is a true reflection of my individual circumstances and I give my consent to allow a pharmacist working under the terms of NHS Pharmacy First Scotland to provide the most appropriate advice and/or treatment for me. I also give my permission to allow the pharmacist to pass, to my own GP, details of this consultation and any advice given, or treatment provided. I have been advised that some of the information may be used to assess the uptake of the service, but this will be totally anonymous and not be attributable to any individual patient.	Consent received ☒
--	--

This form should now be sent to the patient's GP and a copy retained in the pharmacy

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Communication

Contact made with	Details (include time and method of communication)
Patient's General Practice (details)	Click or tap here to enter text. <i>Maa</i>

Details of medication supplied and pharmacist supplying under the PGD

Medication supplied	Click or tap here to enter text.	
Batch number	Click or tap here to enter text.	Expiry date
Print name of pharmacist		
GPhC registration details	Click or tap here to enter text.	
Signature of pharmacist		

NHS Pharmacy First Scotland Aciclovir PGD v2.0 February 2024

(Due for review February 2026)

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Letter to Patient: Results

William Campbell
42 Pappert
Alexandria
Dunbartonshire
G83 9LE

Main Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
Dictated Date:
Transcribed Date:

NHS
Greater Glasgow
and Clyde
Vale of Leven Hospital
Main St
Alexandria
G83 0UA
01389 754 121
General Surgery
01289 817630

01/10/2025
JS/KMcC
25/08/2025
30/09/2025

Dear Mr Campbell,

I am writing to update you with the pathology results of the biopsies taken during your upper GI endoscopy in March this year and the colonoscopy in May.

The oesophageal biopsies showed features of reflux-related inflammatory changes with no other abnormality or cause for concern.

The 6 mm polyp removed from the ileo-caecal valve was found to be a benign tubular adenoma with low grade dysplasia. There was no high grade dysplasia or malignancy. The tiny polyp removed from the distal sigmoid was found to be a simple benign hyperplastic polyp. The random colonic biopsies were within the normal limit.

Based on these results no further surveillance is required, however I would encourage you to continue to participate in the National Bowel Screening Programme and should you have any further symptoms to report to your Doctor.

Yours sincerely

MS JAZAIR SAGHIR

Associate Specialist in General Surgery

Electronically Signed: Ms Jazair Saghir, Consultant

cc. GP

Printed on 01/10/2025 14:20 by Karen McCallum

Page 1 of 1

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Letter to Patient:

William Campbell
42 Pappert
Alexandria
Dunbartonshire
G83 9LE

Main Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
Dictated Date:
Transcribed Date:

NHS
Greater Glasgow
and Clyde
Vale of Leven Hospital
Main St
Alexandria
G83 0UA
01389 754 121
Gastroenterology
Siobhan McCready
10/09/2025
SM/AM
15/07/2025
08/09/2025

Dear Mr Campbell,

Thank you for attending your endoscopy on the 24th of March 2025. You will remember on the day I took biopsies from your lower oesophagus.

Biopsies show reflux with no concerning cell changes. I hope you find this reassuring and I have copied your GP into this letter to keep them up to date with your results.

Please accept my apology for the delay in your results, this is due to laboratory and admin pressure, which is out with my control.

Kind regards,

Siobhan McCready

Upper GI Nurse Endoscopist

Electronically Signed: Nurse Siobhan McCready, Consultant

cc.

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Emergency Attendance Letter

Emergency Department
Vale of Leven Hospital
Main St
Alexandria
Dunbartonshire
G83 0UA

Dept. Contact Details:
Tel: 01389 817325
Fax: 01389 817362
Email:

Date Completed: 31/08/2025

Consultant: Dr Graeme Marshall

SH Dunn
Dr Stephen H Dunn & Partners
The Health Centre
Station Road
Dumbarton
Dumbarton
G82 1PW

Dear SH Dunn

Re: **Campbell William**
42 Pappert
Alexandria G83 9LE

DOB: 02/05/1974

CHI: 0205743056

Attended on: 30/08/2025 at 08:12 hrs.

Departed on: 30/08/2025 at 09:23 hrs.

Discharge Type: 01b - Discharge with follow up by
primary care team

Destination: Private residence

Previous ED Attendance in last 12 months: 0

Presenting complaint
pain left arm

Nursing Assessment:

Investigations in ED: None

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Campbell William

CHI: 0205743056

Diagnosis:

Diagnosis	Side	Site
Other Specified Injuries of Shoulder and Upper Arm		

Procedures: **None**Immunisations: **None**Dispensed Medication: **Please see Clinician Notes**

Clinician Notes:

Taxi driver Left arm pain, elbow Denies frank Injury Systemic well Imp of soft tissue strain Given IM
voltarol Co-codamol 30/500 1-2 tab qds (30) Diazepam 2mg tds (6) Naproxen 250mg bd (14) - short
term use, as PPI at home GP follow up if not settling Dr Orme

Followup :

Highly sensitive: N

Consent for sharing withheld: N

Yours sincerely,

Amy Orme

Doctor

Copies to:

1. SH Dunn (GP)

School Address:

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

Clinical letter - GP:

Dr. SH Dunn
 Dr Stephen H Dunn & Partners
 The Health Centre
 Station Road
 Dumbarton
 G82 1PW

Main Switchboard:
 Department:
 Contact Tel:
 Enquiries to:
 Letter Date:
 Reference:
 Dictated Date:
 Transcribed Date:

NHS
 Greater Glasgow
 and Clyde
 Vale of Leven Hospital
 Main St
 Alexandria
 G83 0UA
 01389 754 121

26/08/2025

26/08/2025

Dear Doctor,

William Campbell; D.O.B: 02/05/1974; CHI: 0205743056
 42 Pappert, Alexandria, Dunbartonshire, G83 9LE

Outcome:				
Normal Spirometry				
Clinical Exam		Respiratory History		
Measurements:		Symptoms:		
Height (cm):	190	Persistent Cough:	Yes	
Weight (kg):	122.4	Productive Cough:	Yes	
SpO2:	98	If yes, colour:		
		Wheeze:	No	
		SOB:	On exertion	
		Other:		

Printed on 26/08/2025 13:20 by Emma Giffen

Page 1 of 3

NHS Confidential: Personal data about a patient

Campbell William

CHI: 0205743056

GCL 26/08/2025 v1

Smoking History				
Smoking Status:		Current smoker		
Smoking Cessation:		Already in cessation		
Vaping status:				
Pack years:		15		
				N/A
Pre Spirometry Inhaler:				
Spirometry Test Results				
Quality:		Acceptable and Reproducible		
Test Quality Details:				
Pre bronchodilator FEV1:		3.72		
Z-score:		-1.3		
Post Bronchodilator FEV1:				
Z-score:				
Reversibility:		Not required.		
NICE Classification of COPD:		-		
Interpretation:		Normal Spirometry		

Printed on 26/08/2025 13:20 by Emma Giffen

Page 2 of 3

GCL 26/08/2025 v1

[illegible]

CC.

NHS Confidential: Personal data about a patient

Dr SH Dunn
Dr J Dunn

Dumbarton Health Centre
Station Road Dumbarton
☎: 01389 811833

Friday, 25 April 2025

William Campbell

CHI 0205743056

Contact Numbers Home: 01389 605301 Mobile: 07888 334 400

MSG sent 12.06.

MSG sent 14.06.

letter sent 30.06

letter sent 07.07.

Re Loan of Home Blood Pressure Machine

I, **William Campbell**, am a patient of Dr Stephen H Dunn & Partners, Dumbarton Health Centre and confirm I have received the loan of a home blood pressure monitor from the surgery. I will take care of the blood pressure machine and return it in 7 / 14 days as instructed by Dr Nuala at the surgery.

I am responsible for the care and return of the product. I understand I am liable for any costs for a replacement machine should I fail to return it to the surgery or any damage to the product whilst in my possession.

I will submit my readings by ☒ TEXT ☐ EMAIL ☐ TELEPHONE MANUAL

(You will receive two reminders per day via your preferred contact method)

Signed



Date

25/4/25

BP ID

85090/8

WIS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.25.7493186.Q
Specimen Type	Urine
Date/Time Collected	12.05.25 / 08:47
Date/Time Received	14.05.25 / 10:40
Requested By	Dr Onyekachi Nwala
GP Practice	85090
Date/Time Reported	14.05.25 / 12:22
Details	new diagnosis of HTN

Results

Urine Albumin - Authorised on 14.05.25 at 12:18

Urine Albumin	6	mg/L	(<20)
U Alb/Creat Ratio	0.3	mg/mmol crea	(0.0-2.5)

Urine Protein - Authorised on 14.05.25 at 12:18

Urine volume (ml)	NA	mL	
Urine Creatinine	18.4	mmol/L	
Urine Protein	<0.100	g/L	(<0.200)
Urine Protein/volume		g/volume	
U Protein:Creatinine	NA	mg/mmol crea	

Comments:

Unable to calculate protein:creatinine ratio as protein <0.100 g/L

End of Report

WIS Confidential: Personal data about a patient

Blood Sciences Haematology Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.25.7469035.P
Specimen Type	Blood
Date/Time Collected	12.05.25 / 08:47
Date/Time Received	12.05.25 / 10:52
Requested By	Dr Onyekachi Nwala
GP Practice	85090
Date/Time Reported	12.05.25 / 11:02
Details	new diagnosis of HTN

Results

Full Blood Count - Authorised on 12.05.25 at 10:58

White Blood Count	4.1	$\times 10^9/l$	(4.0-10.0)
Red Cell Count	4.65	$\times 10^{12}/l$	(4.50-6.50)
Haemoglobin	142	g/l	(130-180)
Haematocrit	0.434	l/l	(0.400-0.540)
Mean Cell Volume	93.3	fL	(83.0-101.0)
MCH	30.5	pg	(27.0-32.0)
Platelet Count	213	$\times 10^9/l$	(150-410)
Neutrophils	1.6	$\times 10^9/l$	(2.0-7.0)
Lymphocytes	2.0	$\times 10^9/l$	(1.1-5.0)
Monocytes	0.4	$\times 10^9/l$	(0.2-1.0)
Eosinophils	0.11	$\times 10^9/l$	(0.02-0.50)
Basophils	0.0	$\times 10^9/l$	(0.0-0.1)
Nucleated RBC	0.0	$\times 10^9/l$	

Comments:
borderline neutropenia

Report comments:

Clyde Haematology Labs are a UKAS accredited medical lab (No 8946) for all tests except Sick

End of Report

WIS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.25.7469025.X
Specimen Type	Blood
Date/Time Collected	12.05.25 / 08:47
Date/Time Received	12.05.25 / 10:51
Requested By	Dr Onyekachi Nwala
GP Practice	85090
Date/Time Reported	12.05.25 / 11:52
Details	new diagnosis of HTN

Results

Urea & Electrolytes - Authorised on 12.05.25 at 11:31

Sodium	140	mmol/L	(133-146)
Potassium	4.3	mmol/L	(3.5-5.3)
Chloride	108	mmol/L	(95-108)
Urea	3.5	mmol/L	(2.5-7.8)
Creatinine	73	umol/L	(40-130)
Estimated GFR	>60	ml/min	(>60)

Liver Function Tests - Authorised on 12.05.25 at 11:31

Total Bilirubin	7	umol/L	(<20)
ALT	40	U/L	(<50)
AST	46	U/L	(<40)
Alkaline Phosphatase	65	U/L	(30-130)
Albumin	42	g/L	(35-50)

Lipid profile - Authorised on 12.05.25 at 11:31

Cholesterol	4.9	mmol/L	
Triglycerides	4.3	mmol/L	(0.2-2.3)
HDL Cholesterol	1.3	mmol/L	
LDL-Cholest (calc'd)	1.6	mmol/L	
VLDL-Chol (calc'd)	2.0	mmol/L	
Chol/HDL ratio	3.8		

Comments:

Possible secondary causes of hypertriglyceridaemia include alcohol, obesity and diabetes mellitus.

Total Proteins - Authorised on 12.05.25 at 11:31

Total Protein	72	g/L	(60-80)
Albumin	42	g/L	(35-50)
Globulins	30	g/L	(23-38)

WIS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report

Thyroid funct test - Authorised on 12.05.25 at 11:48

TSH	0.79	mU/L	(0.35-5.00)
Free T4	12.8	pmol/L	(9.0-21.0)
Total T3		nmol/L	

End of Report

THIRD PARTY COPY

WIS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.25.7469038.M
Specimen Type	Blood
Date/Time Collected	12.05.25 / 08:47
Date/Time Received	12.05.25 / 10:52
Requested By	Dr Onyekachi Nwala
GP Practice	85090
Date/Time Reported	12.05.25 / 11:07
Details	new diagnosis of HTN

Results

HbA1c (IFCC) - Authorised on 12.05.25 at 11:01

HbA1c (IFCC) 34 mmol/mol (20-41)

End of Report

NHS Confidential: Personal data about a patient

NHS Greater Glasgow and Clyde

COLONOSCOPY REPORT

Name: **William CAMPBELL (M)**
 Date of birth: **02/05/1974**
 CHI No: **0205743056**
 Case note no.: **0205743056**

Address: **42 Pappert
 Alexandria
 Dunbartonshire
 G83 9LE**

GP: **DUNN, STEPHEN
 Dr Stephen H Dunn & Partners
 The Health Centre
 Station Road
 Dumbarton
 G82 1PW**

Procedure date: **9th May 2025 (08:38)**
 Priority: **Elective**
 Status: **Day patient/NHS**
 Hospital: **VOL**
 Ward: **MDBU**
 Referring Cons: **GP
 (Direct Access)**

Indications

Intermittent diarrhoea with rectal bleeding rectal bleeding and qFIT 228.

Report

Bowel preparation with 2 plenvu was good.

A digital rectal examination was performed.

The colonoscope was inserted via the anus to the caecum, which was identified by the ileocecal valve, the appendicular orifice and the tri-radiate caecal fold. The scope was retroflexed in the rectum.

The rest of the examination to the limit of insertion was normal.

There were no peri-operative complications.

Site a: Ileocecal valve

Lesions: 1 benign sessile polyp (1s, pit type IIIs) (6mm) excised (removed entirely using cold snare), retrieved and sent to labs.

Endoscopic mucosal resection: using Gelofusine, adrenaline, indigo carmine solution.

Specimens: Polyps.

Site c: An area extending from the proximal ascending to the distal sigmoid

Specimens: 6x random biopsy.

Site d: An area extending from the rectosigmoid junction to the proximal sigmoid

Diverticula: a few.

Site e: Distal sigmoid

Lesions: 1 sessile polyp (1s, pit type II) (3mm) excised (removed piecemeal using cold biopsy), retrieved and sent to labs.

Specimens: Polyps.

Site f: Anal margin

Perianal lesions: haemorrhoids.

Diagnoses

Diverticulosis, haemorrhoids and colonic polyps.

Advice/comments

X2 small polyps removed as described.

Random colonic biopsies taken to exclude a microscopic colitis.

Mild diverticulosis seen in sigmoid colon - information leaflet provided prior to discharge.

We will write with the pathology results.

Consultant/Endoscopist

List consultant: Ms Jazair Saghir

Endoscopist No1: Imogen Ross

Nurses: Nicola Bolton

staff nurse LORNA GRAY, STAFF NURSE

Instruments

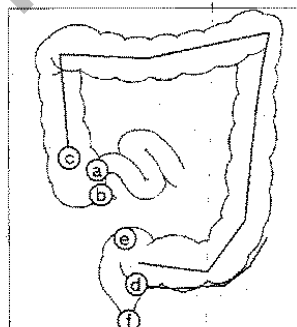
SCANTRACK

Disposable forceps

Premedication

Fentanyl (IV) 50 mcg

Midazolam (IV) 2.5 mg



a: Ileocecal valve (photographed)

b: Appendiceal orifice (photographed)

c: An area extending from the proximal ascending to the distal sigmoid

d: An area extending from the rectosigmoid junction to the proximal sigmoid

e: Distal sigmoid (photographed)

f: Anal margin (photographed)

NHS Confidential: Personal data about a patient

NHS Greater Glasgow and Clyde

COLONOSCOPY REPORT

Name: **William CAMPBELL (M)**
Date of birth: **02/05/1974**
CHI No: **0205743056**
Case note no.: **0205743056**

Address: **42 Pappert
Alexandria
Dunbartonshire
G83 9LE**

Follow up

Awaiting pathology results. Return to the referring GP.

Imogen Ross
Trainee Nurse Endoscopist
c.c. GP (Direct Access)
Campbell, William

Produced by Unisoft's GI Reporting Tool (v12.20.18)

Page 2 of 2

Compiled on 09/05/2025 at 10:31

NHS Confidential: Personal data about a patient

Vale of Leven Hospital
Main St
Alexandria G83 0UA
Contact Telephone Number, Endoscopy Department: 0141 201 3682

28/04/2025

Patient: William Campbell
Address: 42 Pappert

Alexandria G83 9LE
CHI Number: 0205743056
Date of
Ref: 28/04/2025
Urgency: URGENT - SUSPECTED
CANCER
Specialty: General
Surgery
Hospital: Vale of Leven Hospital

Dear Dr OJ Nwala

Thank you for referring the above patient for colorectal investigation at high clinical priority. This referral has been triaged based on your patient's statistical risk of serious colorectal disease. From the qFIT and clinical information you have provided for this patient, they have a risk of serious colorectal disease of up to 5%. In keeping with NMSGC guidance, they have been put on the waiting list for a category 2 colonoscopy. This means the investigation carries a higher priority and we aim to complete within 3-4 weeks.

We are working hard to reduce waiting lists for all patients. Your patient remains at high priority on the waiting list and if your patient was referred as USOC priority, they will be tracked. If their clinical information changes, please submit an updated high priority referral indicating what has changed.

You may be receiving this letter as a result of a referral made within secondary care for colorectal investigation, please note your patient has been added to the waiting list as per above.

Regards,

Endoscopy Service GGC

NHS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.25.4746067.S
Specimen Type	Faeces
Date/Time Collected	22.04.25 /
Date/Time Received	22.04.25 / 11:38
Requested By	Dr Onyekachi Nwala
GP Practice	85090
Date/Time Reported	23.04.25 / 13:37
Results	

qFIT - Authorized on 23.04.25 at 13:35

qFIT + 228 ug Hb/g faec (0-9)

Comments:

Recommend USC colorectal referral
(or Gastro if asymptomatic iron deficiency anaemia).
Refer to NHSGGC guidance for further information.

End of Report

NHS Confidential: Personal data about a patient

Dr SH Dunn
Dr J Dunn

Dumbarton Health Centre
Station Road Dumbarton
☎: 01389 811833

Tuesday, 08 April 2025

Msg sent 16.04

William Campbell

CHI 0205743056

Contact Numbers Home: 01389 605301 Mobile: 07888 334 400

Re Loan of Home Blood Pressure Machine

I, **William Campbell**, am a patient of Dr Stephen H Dunn & Partners, Dumbarton Health Centre and confirm I have received the loan of a home blood pressure monitor from the surgery. I will take care of the blood pressure machine and return it in 7 / 14 days as instructed by DR NWALA at the surgery.

I am responsible for the care and return of the product. I understand I am liable for any costs for a replacement machine should I fail to return it to the surgery or any damage to the product whilst in my possession.

I will submit my readings by ☒ TEXT ☐ EMAIL ☐ TELEPHONE

(You will receive two reminders per day via your preferred contact method)

Signed 	Date 08/04/25
BP ID 85090/26	

NHS Confidential: Personal data about a patient

Blood Pressure Monitoring Service

Patient Name: William Campbell
Patient DOB: 02-May-1974
Patient CHI Number: 020 574 3056
Practice Code: 85090

Patient Summary

- Protocol name: Diagnosis and close monitoring
- Time on protocol: 0 years 0 months 7 days
- Date of report: 15-Apr-2025
- Enrolment date: 08-Apr-2025
- Report period: 08-Apr-2025 - 15-Apr-2025
- Tasks completed (in period): 9 out of 13

William Campbell has been on the Diagnosis and close monitoring protocol for 0 years 0 months 7 days. You may wish to move them on to the Medication titration protocol or deactivate them from this service.

Readings Summary

Type	Value
Average Systolic	141
Average Diastolic	100
Max Systolic	161
Min Systolic	100
Max Diastolic	116
Min Diastolic	73

Readings List

Date	Systolic Reading	Diastolic Reading	Alert
10-Apr-2025 15:57	147	111	
11-Apr-2025 11:30	148	107	
12-Apr-2025 00:58	133	87	
12-Apr-2025 14:28	146	116	

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12-Apr-2025 20:05	149	99	
13-Apr-2025 10:09	151	96	
13-Apr-2025 18:08	132	96	
14-Apr-2025 11:37	161	111	
14-Apr-2025 20:40	100	73	

THIRD PARTY COPY

NHS Confidential: Personal data about a patient

NHS Greater Glasgow and Clyde

GASTROSCOPY REPORT

Name: **William CAMPBELL (M)**
 Date of birth: **02/05/1974**
 CHI No: **0205743056**
 Case note no.: **0205743056**

Address: **42 Pappert
 Alexandria
 Dunbartonshire
 G83 9LE**

GP: **DUNN, STEPHEN
 Dr Stephen H Dunn & Partners
 The Health Centre
 Station Road
 Dunbarton
 G82 1PW**

Procedure date: **24th March 2025 (14:50)**
 Priority: **Repeat/Scheduled**
 Status: **Outpatient/NHS**
 Hospital: **VOL**
 Referring Cons: **Ms Jazair Saghir
 (Surgical)**

Indications

Reflux symptoms and epigastric discomfort.
 Clinically important comments: OGD 04/03/25 distal oesophageal ulcer, large volume of food in stomach, incomplete test.
 is on Lansoprazole od.

Consultant/Endoscopist

Sister Siobhan McCready

Instrument

SCANTRACK

Report

The scope was retroflexed in the stomach.
 The procedure was completed successfully to D2.

Site a: Lower oesophagus

Specimens: 1x biopsy.

Site b: Lower oesophagus

Hiatus hernia: sliding.

Premedication

Xylocaine (Spray) 200 mg

Diagnoses

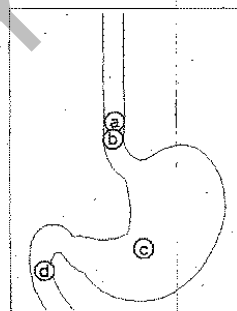
ESOPHAGUS. Hiatus hernia and sub mucosal swelling.
 STOMACH. Normal.
 DUODENUM. Normal.

Advice/comments

Well tolerated procedure
 Oesophageal ulcer has completely healed.
 Small sub mucosal swelling in the distal oesophagus (at 38cm) ?lipoma -
 biopsied to characterise
 Suggest continue on Lansoprazole and follow hiatus hernia advice

Follow up

Awaiting pathology results. The patient and GP will be updated with
 pathology results.



- a: Lower oesophagus (photographed)
 b: Lower oesophagus (photographed)
 c: Lower body (photographed)
 d: Second part (photographed)

Sister Siobhan McCready
 Nurse Endoscopist
 c.c. Campbell, William

NHS Confidential: Personal data about a patient

NHS Greater Glasgow and Clyde

GASTROSCOPY REPORT

Name: **William CAMPBELL (M)**
 Date of birth: **02/05/1974**
 CHI No: **0205743056**
 Case note no.: **0205743056**

Address: **42 Pappert
 Alexandria
 Dunbartonshire
 G83 9LE**

GP: **DUNN, STEPHEN
 Dr Stephen H Dunn & Partners
 The Health Centre
 Station Road
 Dumbarton
 G82 1PW**

Procedure date: **4th March 2025 (10:05)**
 Priority: **Elective**
 Status: **Outpatient/NHS**
 Hospital: **VOL**
 Referring Cons: **Ms Jazair Saghir
 (Surgical)**

Indications

Reflux symptoms and epigastric discomfort.
 Clinically important comments: Clinic review 30/10/2023 - moderate sized
 divarication of the
 rectus sheath with no abdominal wall hernia.
 prescribed PPI but doesn't take this.

Consultant/Endoscopist

Sister Siobhan McCready

Instrument

SCANTRACK

Premedication

Xylocaine (Spray) 200 mg

Report

The procedure was completed successfully to the stomach.

Site a: Lower oesophagus

Grade B oesophagitis (at least one mucosal break longer than 5mm
 confined to the mucosal fold but not continuous between two folds) and
 ulcer.

Site b: Lower body

Lumen: a large amount of food residue found.

Diagnoses

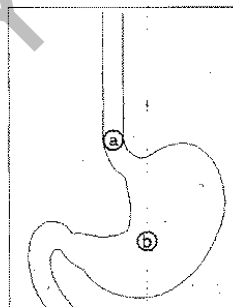
OESOPHAGUS. Oesophagitis/reflux and ulcer.

Advice/comments

Uncomplicated intubation
 Distal oesophageal ulcer seen above a hiatus hernia
 Large volume of undigested food in the stomach, unable to exclude
 underlying pathology or GOO.
 Suggest taking prescribed Lansoprazole to manage oesophageal ulceration.
 Repeat examination to complete, please keep diet light/liquid the day before
 and fast from early evening meal, clear fluids until 2 hours before the test

Follow up

Return to the referring Consultant. Further procedure(s): upper endoscopy in
 2 weeks.



a: Lower oesophagus
 (photographed)

b: Lower body (photographed)

Sister Siobhan McCready
Nurse Endoscopist
 c.c. Campbell, William

WIS Confidential: Personal data about a patient

Blood Sciences Haematology Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.24.7912001.B
Specimen Type	Blood
Date/Time Collected	18.09.24 / 09:48
Date/Time Received	18.09.24 / 10:51
Requested By	Dr Stephen H. Dunn
GP Practice	85090
Date/Time Reported	18.09.24 / 15:42
Details	Suspected gout, high lipi...

Results

Active B12 - Authorised on 18.09.24 at 15:38

Active B12 52 pmol/L (>25)

Comments:

Result in indeterminate range (25 - 70 pmol/L).
Consider treatment for B12 deficiency in following patient groups:
- Patients with a condition which may deteriorate quickly and have a severe effect on QoL (neurological, haematological cond'ns)
- Patients who are pregnant or breast feeding.
- Patients with a recognised cause of B12 deficiency (surgery or autoimmune gastritis).
Otherwise consider other causes of symptoms and if necessary repeat active B12 level at 3-6 months.
Note change in the B12 assay to an active B12 assay from 14/5/24.

Serum Ferritin - Authorised on 18.09.24 at 15:38

Serum Ferritin 106 ug/l (15-300)

Comments:

Males 15-300 (<15 iron deficiency)
Females 15-200 (<15 iron deficiency)
15-50 intermediate result. Consider iron deficiency in anaemic patients, older patients and those with inflammatory disease.

Serum Folate - Authorised on 18.09.24 at 15:38

Serum Folate - 2.7 ug/l (3.1-20.0)

Report comments:

Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except Sick

End of Report

WIS Confidential: Personal data about a patient

Blood Sciences Haematology Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.24.7912021.R
Specimen Type	Blood
Date/Time Collected	18.09.24 / 09:48
Date/Time Received	18.09.24 / 10:53
Requested By	Dr Stephen H. Dunn
GP Practice	85090
Date/Time Reported	18.09.24 / 11:42
Details	Suspected gout, high lipi...

Results

Full Blood Count - Authorised on 18.09.24 at 11:02

White Blood Count	5.8	$\times 10^9/l$	(4.0-10.0)
Red Cell Count	5.07	$\times 10^{12}/l$	(4.50-6.50)
Haemoglobin	154	g/l	(130-180)
Haematocrit	0.473	l/l	(0.400-0.540)
Mean Cell Volume	93.3	fl	(83.0-101.0)
MCH	30.4	pg	(27.0-32.0)
Platelet Count	208	$\times 10^9/l$	(150-410)
Neutrophils	3.2	$\times 10^9/l$	(2.0-7.0)
Lymphocytes	2.1	$\times 10^9/l$	(1.1-5.0)
Monocytes	0.4	$\times 10^9/l$	(0.2-1.0)
Eosinophils	0.08	$\times 10^9/l$	(0.02-0.50)
Basophils	0.1	$\times 10^9/l$	(0.0-0.1)
Nucleated RBC	0.0	$\times 10^9/l$	

Report comments:

Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except Sick

ESR - Authorised on 18.09.24 at 11:37

ESR	9	mm/hr	(0-10)
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Report comments:

Clyde Haematology Labs are a UKAS accredited medical lab (No 8046) for all tests except Sick

End of Report

WIS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.24.7912001.8
Specimen Type	Blood
Date/Time Collected	18.09.24 / 09:48
Date/Time Received	18.09.24 / 10:51
Requested By	Dr Stephen H. Dunn
GP Practice	85090
Date/Time Reported	18.09.24 / 15:42
Details	Suspected gout, high lipi...

Results

Bone Profile - Authorised on 18.09.24 at 15:11

Calcium	2.29	mmol/L	(2.20-2.60)
Calcium (adjusted)	2.29	mmol/L	(2.20-2.60)
Phosphate	0.93	mmol/L	(0.80-1.50)
Albumin	43	g/L	(35-50)
Alkaline Phosphatase	72	U/L	(30-130)

Urea & Electrolytes - Authorised on 18.09.24 at 15:11

Sodium	138	mmol/L	(133-146)
Potassium	4.4	mmol/L	(3.5-5.3)
Chloride	105	mmol/L	(95-108)
Urea	5.2	mmol/L	(2.5-7.8)
Creatinine	86	umol/L	(40-130)
Estimated GFR	>60	ml/min	(>60)

Liver Function Tests - Authorised on 18.09.24 at 15:11

Total Bilirubin	5	umol/L	(<20)
ALT	26	U/L	(<50)
AST	21	U/L	(<40)
Alkaline Phosphatase	72	U/L	(30-130)
Albumin	43	g/L	(35-50)

Lipid profile - Authorised on 18.09.24 at 15:11

Cholesterol	7.5	mmol/L	
Triglycerides	5.4	mmol/L	(0.2-2.3)
HDL Cholesterol	1.2	mmol/L	
LDL-Cholest (calc'd)		mmol/L	
VLDL-Chol (calc'd)		mmol/L	
Chol/HDL ratio	6.3		

Comments:

Calculation of LDL & VLDL-chol only valid when Trig <4.50 mmol/L.

WIS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report

Possible secondary causes of hypertriglyceridaemia include alcohol, obesity and diabetes mellitus.

Thyroid funct test - Authorised on 18.09.24 at 15:38

TSH	1.42	mU/L	(0.35-5.00)
Free T4	11.6	pmol/L	(9.0-21.0)
Total T3		nmol/L	

End of Report

THIRD PARTY COPY

WIS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.24.7912005.N
Specimen Type	Blood
Date/Time Collected	18.09.24 / 09:48
Date/Time Received	18.09.24 / 10:54
Requested By	Dr Stephen H. Dunn
GP Practice	85090
Date/Time Reported	18.09.24 / 12:17
Details	Suspected gout, high lipi...

Results

HbA1c (IFCC) - Authorised on 18.09.24 at 12:14

HbA1c (IFCC) 37 mmol/mol (20-41)

End of Report

WIS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report	
Patient Details	
Surname	CAMPBELL
Forename	WILLIAM
CHI	0205743056
Date of birth	02.05.1974
Sex	Male
Address	42 Pappert Bonhill ALEXANDRIA Dunbartonshire DUNBARTO G83 9LE
Specimen Details	
Specimen Number	B.24.7912004.G
Specimen Type	Blood
Date/Time Collected	18.09.24 / 09:48
Date/Time Received	18.09.24 / 10:51
Requested By	Dr Stephen H. Dunn
GP Practice	85090
Date/Time Reported	18.09.24 / 11:22
Details	Suspected gout, high lipi...

Results

Glucose - Authorised on 18.09.24 at 11:17

Glucose 5.6 mmol/L (3.5-6.0)

Comments:

Non-fasting sample

End of Report

EMIS attachment reference code
07-July-2025 Miss Hannah Laird (HL)
Additional: EMIS attachment reference code
BP machine Overdue 2nd letter
Filename: BP machine Overdue 2nd letter.doc
Extension: .tif
Pages:

Dr SH Dunn
Dr J Dunn

Dumbarton Health Centre
Station Road Dumbarton
☎: 01389 811833

Monday, 07 July 2025

Private & Confidential

Mr William Campbell
42 Pappert Bonhill
ALEXANDRIA
Dunbartonshire
G83 9LE

Dear Mr Campbell,

We sent you a letter on 30th June 2025 requesting the return of our blood pressure monitor (85090/08). We appreciate it may have slipped your mind and you may have other things going on. However, we do require the machine to be returned as soon as possible for us to issue to another patient on our already growing waiting list.

Upon return of the machine we will provide you with the second part of the form you signed on 25th April 25. Please note when the machine was loaned to you, you signed to say you were 'responsible for the care and return of the product and would be liable for any cost of replacement should I fail to return it to the surgery'. If you need to discuss this further, please do not hesitate to contact us on 01389 811833.

If we have not had the machine returned to the Practice within 7 days, we will then ask our finance department to issue you an invoice for the cost of the machine.

Thank you for your co-operation.

Yours sincerely,

Miss Laird
Deputy Practice Manager
DRS STEPHEN & JULIA DUNN

EMIS attachment reference code
30-Jun-2025 Miss Hannah Laird (HL)
Additional: EMIS attachment reference code
BP Overdue
Filename: BP Overdue.doc
Extension: .tif
Pages:

**Dr SH Dunn
Dr J Dunn**

**Dumbarton Health Centre
Station Road Dumbarton
☎: 01389 811833**

30 06 2025

Private & Confidential

Mr William Campbell
42 Pappert Bonhill
ALEXANDRIA
Dunbartonshire
G83 9LE

Dear Mr Campbell

We sent you a text on the 12th & 19th June 2025 requesting the return of our blood pressure monitor (85090/08). We appreciate it may have slipped your mind and you may have other things going on. However, we do require the machine to be returned as soon as possible for us to issue to another patient on our already growing waiting list.

Upon return of the machine we will provide you with the second part of the form you signed on 25.04.2025 as receipt of return. Please note when the machine was loaned to you, you signed to say you were 'responsible for the care and return of the product and would be liable for any cost of replacement should I fail to return it to the surgery'. If you need to discuss this further, please do not hesitate to contact us on 01389 811833.

Thank you for your co-operation.

Yours sincerely,

Miss H Laird
Deputy Practice Manager
DRS STEPHEN & JULIA DUNN

EMIS attachment reference code
30-Aug-2024 Mr Craig Ferguson (CF)
Additional: EMIS attachment reference code
Letter to Pt
Filename: Letter to Pt.doc
Extension: .tif
Pages:

Dr SH Dunn
Dr J Dunn

Dumbarton Health Centre
Station Road Dumbarton
☎: 01389 811833

30 08 2024

Private & Confidential

Mr William Campbell
42 Pappert Bonhill
ALEXANDRIA
Dunbartonshire
G83 9LE

Dear Mr Campbell

Please can you contact the surgery to arrange a blood test and also a follow up appointment with Dr Stephen Dunn one week later.

Yours sincerely,

DRS STEPHEN & JULIA DUNN

EMIS attachment reference code
05-Jan-2023 Miss Laura Clark (L)
Additional: EMIS attachment reference code
Blood Test
Filename: Blood Test .doc
Extension: .tif
Pages:

Dr SH Dunn
Dr J Dunn

Dumbarton Health Centre
Station Road Dumbarton
☎: 01389 811833

05 01 2023

Private & Confidential

Mr William Campbell
42 Pappert Bonhill
ALEXANDRIA
Dunbartonshire
G83 9LE

Dear Mr Campbell

RE Appointment with Phlebotomist

Unfortunately we could not contact you via telephone.

The Consultant from Vale Of Leven Hospital has requested that you make an appointment to see our Practice Phlebotomist at your earliest convenience. This is to have a blood test that was not able to be completed when you attended back in September. There is nothing to worry about, we have been unable to reach you by telephone on either numbers.

Should you have any enquiries regarding this please do not hesitate to contact us here in the surgery.

Thanking you for your co-operation.

Yours sincerely,

Laura Clark

Administration Department

For Office Use Only:

Letter encounter to patient

19-Feb-2015 Ms Christine M. Sinclair (CDAWSON_18980)

Additional: Letter encounter to patient

gp letter

Filename: gp letter.doc

Extension: .tif

Pages:

Dr SH Dunn
Dr J Dunn

Dumbarton Health Centre
Station Road Dumbarton
☎: 01389 811833
Fax: 01389 811823

19 02 2015

Private & Confidential

Mr William Campbell
176 Ladyton
Bonhill
Dumbarton
West Dunbartonshire
G83 9DY

Dear Mr Campbell

RE: HOSPITAL LETTER -Telephone Appointment.

The Doctor has requested you contact the surgery at your earliest convenience to make an appointment for a telephone consultation. This is in order to discuss your recent hospital letter.

An appointment can be made on the day or alternatively they may be available to pre-book in advance. Please contact our Reception on 01389 811833 to arrange your appointment.

Thanking you in anticipation.

Yours sincerely

Administration Department

Cc File

For Office Use Only:

EMIS attachment reference code

22-Jan-2014 Miss Judith McLaughlin (JMCL)

Additional: EMIS attachment reference code

Keep well

Filename: Keep well.doc
Extension:.tif
Pages:

**Dr SH Dunn
Dr J Dunn**

**Dumbarton Health Centre
Station Road Dumbarton
☎: 01389 811833
Fax: 01389 811823**

22 01 2014

Private & Confidential

Mr William Campbell
176 Ladyton
Bonhill
Dumbarton
West Dunbartonshire
G83 9DY

Dear Mr Campbell

KEEP WELL

I am pleased to inform you that Keep Well Health Checks are now available in your Practice. These are available during the day with our practice Nurse Fiona. An appointment has been made for you to see Sister Connolly on Monday the 3rd February at 12.00. You will then have your bloods taken afterwards by Judith.

All patients between the ages of 35 to 64 are being invited to make an appointment with our Practice Nurse to have this carried out.

The Keep Well Health Check is free and includes a few simple but important tests to find out what your health needs may be. By doing this health check, we can make sure we are giving you the best care, advice and support that meets your needs. The enclosed leaflet will explain a little of what is involved.

While you are in the Practice it will give you the opportunity to ask us about anything else that may be concerning you about your health.

Please telephone the Practice to make an appointment with Fiona if you wish to have the Keep Well Health Check carried out.

Yours sincerely

Christine M. Dawson

Practice Manager
Drs S & J Dunn

Cc File

THIRD PARTY COPY