

WIS Confidential: Personal data about a patient

Blood Sciences Haematology Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.22.6248057.L
Specimen Type	Blood
Date/Time Collected	20.09.22 / 10:22
Date/Time Received	20.09.22 / 13:37
Requested By	Dr Wendy Killin
GP Practice	46131
Date/Time Reported	20.09.22 / 13:47
Details	NPT - MTX

Results

Full Blood Count - Authorised on 20.09.22 at 13:43

White Blood Count	5.3	$\times 10^9/l$	(4.0-10.0)
Red Cell Count	- 3.92	$\times 10^{12}/l$	(4.50-6.50)
Haemoglobin	- 118	g/l	(130-180)
Haematocrit	- 0.358	l/l	(0.400-0.540)
Mean Cell Volume	91.3	fl	(83.0-101.0)
MCH	30.1	pg	(27.0-32.0)
Platelet Count	+ 510	$\times 10^9/l$	(150-410)
Neutrophils	3.4	$\times 10^9/l$	(2.0-7.0)
Lymphocytes	1.3	$\times 10^9/l$	(1.1-5.0)
Monocytes	0.6	$\times 10^9/l$	(0.2-1.0)
Eosinophils	0.02	$\times 10^9/l$	(0.02-0.50)
Basophils	0.0	$\times 10^9/l$	(0.0-0.1)
Nucleated RBC	0.0	$\times 10^9/l$	

End of Report

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Blood Sciences Biochemistry Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.22.5347567.A
Specimen Type	Blood
Date/Time Collected	20.09.22 / 10:22
Date/Time Received	20.09.22 / 14:01
Requested By	Dr Wendy Killin
GP Practice	46131
Date/Time Reported	20.09.22 / 15:17
Details	NPT - MTX

Results

Urea & Electrolytes - Authorised on 20.09.22 at 15:13

Sodium	140	mmol/L	(133-146)
Potassium	4.7	mmol/L	(3.5-5.3)
Chloride	103	mmol/L	(95-108)
Urea	4.5	mmol/L	(2.5-7.8)
Creatinine	39	umol/L	(40-130)
Estimated GFR	>60	ml/min	(>60)

Liver Function Tests - Authorised on 20.09.22 at 15:13

Total Bilirubin	5	umol/L	(<20)
ALT	16	U/L	(<50)
AST	17	U/L	(<40)
Alkaline Phosphatase	56	U/L	(30-130)
Albumin	41	g/L	(35-50)

End of Report

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McFarlane Stewart

CHI: 0906716470

Clinic Letter

Dr. El Douglas
Crail Medical Practice
245 Tolcross Road
Glasgow
G31 4UW

Main
Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
Dictated
Date:
Transcribed
Date:

NHS
Greater Glasgow
and Clyde
Glasgow Royal Infirmary
Alexandra Parade
Glasgow
G31 2ER
0141 211 4000
Rheumatology
0141 451 5384
16/09/2022
CW/RM
16/09/2022
23/09/2022

Dear Dr. El Douglas,

Stewart McFarlane; D.O.B: 09 Jun 1971; CHI: 0906716470
32 DALRY STREET, Glasgow, Lanarkshire, G32 9BL

Attendance: Specialty - Rheumatology; Clinic - GRSSRH0-DR SAUNDERS AND DR GRIGOR
COMBINED EARLY ARTHRITIS FRI PM
Date and Time of Appointment - 16/09/2022 15:55

Follow Up: 04/11/2022 15:05 Rheumatology Dr Sarah Saunders

Medication Note:

15mg Methotrexate to increase up to 20mg one day per week, Folic Acid 5mg daily except
Methotrexate day, Hydroxychloroquine 200mg bd, Atorvastatin 20mg one daily, Codydramol 20/500
as required.

Clinical Comments:

I have reviewed Stewart in clinic this afternoon. Issues are as follows:

1. Rheumatoid arthritis : Symptom onset six months ago, first seen CRD June 2022, rheumatoid
factor and CCP antibody positive. ESR at presentation 77, CRP 75 and x-rays non erosive.

Mr McFarlane had presented with bilateral symmetrical inflammatory arthritis affecting wrists, ankles
and MTP joints. He had a good clinical improvement with IM Kenalog given in June in relation to
his hands but he is still struggling at present with pain in both feet. The pain is not limited to any
particular time of day and seems to be present throughout the day and is limiting his mobility.

Printed on 28/09/2022 08:17 by Lauren Scott

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McFarlane Stewart

CHI: 0906716470

OPCL 16/09/2022 v1

On examination, I could not feel any particular hand joint swollen although fingers were extremely stiff and tight generally, both shoulders tender. His main complaint remains both feet and I believe he has been referred to Specialist Podiatrist John Tougher for review.

2. Back pain : He is awaiting an MRI scan for investigation of back pain following on from a road traffic accident a couple of years ago. This is unfortunately still causing Stewart quite a bit of pain.

He works in the building trade as an asbestos remover but has not worked since his back injury.

Weight = 66.8kg. Thankyou for your continued help with blood monitoring and i note bloods are satisfactory.

I have requested a six week follow up consultation and Stewart has the nurse advice line should he need us in between times.

Yours sincerely

Cora Winters

Rheumatology Nurse Specialist

Electronically Signed: Nurse Cora Winters, Nurse

cc.

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0906716470	
MCFARLANE	M
Stewart	09/06/1971
32 DALRY STREET	
Glasgow, Lanarkshire	
G32 9BL	

The patient attended Rheumatology Clinic at GR1
 Hospital on 16/9/22 and I would advise a change to drug therapy from
 _____ to _____
 or additional therapy of _____

as detailed below. Full letter to follow.

Additional Comments: _____

DRUG (print)	DOSE	FREQUENCY	DURATION / REVIEW DATE
methotrexate	20mg	one day per week	3/12

Yours Sincerely

Signature: E. White

Name (print) E. A. WHITE

Grade: 6

Ext. No: (0141) 451 5384

White copy to - G.P. Pink copy - File this copy in Case Records

00545 GGC0004

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Blood Sciences Haematology Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.22.4969828.K
Specimen Type	Blood
Date/Time Collected	06.09.22 / 10:28
Date/Time Received	06.09.22 / 13:43
Requested By	Dr Wendy Killin
GP Practice	46131
Date/Time Reported	07.09.22 / 12:57
Details	lowered Hb

Results

Serum Vitamin B12 - Authorized on 07.09.22 at 12:54

Serum Vitamin B12 271 ng/l (200-883)

End of Report

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Blood Sciences Biochemistry Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.22.4969829.J
Specimen Type	Blood
Date/Time Collected	06.09.22 / 10:29
Date/Time Received	06.09.22 / 13:43
Requested By	Dr Wendy Killin
GP Practice	46131
Date/Time Reported	06.09.22 / 17:02
Details	NPT - MTX

Results

Urea & Electrolytes - Authorised on 06.09.22 at 16:57

Sodium	138	mmol/L	(133-146)
Potassium	4.6	mmol/L	(3.5-5.3)
Chloride	102	mmol/L	(95-108)
Urea	3.2	mmol/L	(2.5-7.8)
Creatinine	64	umol/L	(40-130)
Estimated GFR	>60	ml/min	(>60)

Liver Function Tests - Authorised on 06.09.22 at 16:57

Total Bilirubin	6	umol/L	(<20)
ALT	14	U/L	(<50)
AST	14	U/L	(<40)
Alkaline Phosphatase	57	U/L	(30-130)
Albumin	40	g/L	(35-50)

End of Report

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27-May-2026 KATHLEEN_18885
Additional:Scanned Document

Filename: document1.pdf
Extension:.tif
Pages:

NHS Confidential: Personal data about a patient

Blood Sciences Haematology Report**Patient Details**

Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL

Specimen Details

Specimen Number	B,22.6224026.Z
Specimen Type	Blood
Date/Time Collected	06.09.22 / 10:28
Date/Time Received	06.09.22 / 13:41
Requested By	Dr Wendy Killin
GP Practice	46131
Date/Time Reported	06.09.22 / 13:52
Details	lowered Hb

Results

Full Blood Count - Authorised on 06.09.22 at 13:48

White Blood Count	6.7	$\times 10^9/l$	(4.0-10.0)
Red Cell Count	- 3.92	$\times 10^{12}/l$	(4.50-6.50)
Haemoglobin	- 121	g/l	(130-180)
Haematocrit	- 0.365	l/l	(0.400-0.540)
Mean Cell Volume	93.1	fl	(83.0-101.0)
MCH	30.9	pg	(27.0-32.0)
Platelet Count	+ 473	$\times 10^9/l$	(150-410)
Neutrophils	4.3	$\times 10^9/l$	(2.0-7.0)
Lymphocytes	1.7	$\times 10^9/l$	(1.1-5.0)
Monocytes	0.7	$\times 10^9/l$	(0.2-1.0)
Eosinophils	0.07	$\times 10^9/l$	(0.02-0.50)
Basophils	0.0	$\times 10^9/l$	(0.0-0.1)
Nucleated RBC	0.0	$\times 10^9/l$	

End of Report

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Blood Sciences Haematology Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.22.4969828.K
Specimen Type	Blood
Date/Time Collected	06.09.22 / 10:28
Date/Time Received	06.09.22 / 13:43
Requested By	Dr Wendy Killin
GP Practice	46131
Date/Time Reported	06.09.22 / 18:12
Details	lowered Hb

Results

Serum Ferritin - Authorised on 06.09.22 at 17:47

Serum Ferritin 211 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 06.09.22 at 18:07

Serum Folate 5.1 ug/l (3.1-20.0)

End of Report

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Blood Sciences Biochemistry Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.22.4934209.F
Specimen Type	Blood
Date/Time Collected	23.08.22 / 10:33
Date/Time Received	23.08.22 / 14:28
Requested By	Dr Wendy Killin
GP Practice	46131
Date/Time Reported	23.08.22 / 16:47
Details	NPT - MTX

Results

Urea & Electrolytes - Authorised on 23.08.22 at 16:45

Sodium	139	mmol/L	(133-146)
Potassium	4.2	mmol/L	(3.5-5.3)
Chloride	102	mmol/L	(95-108)
Urea	3.8	mmol/L	(2.5-7.8)
Creatinine	68	umol/L	(40-130)
Estimated GFR	>60	ml/min	(>60)

Liver Function Tests - Authorised on 23.08.22 at 16:45

Total Bilirubin	8	umol/L	(<20)
ALT	16	U/L	(<50)
AST	15	U/L	(<40)
Alkaline Phosphatase	49	U/L	(30-130)
Albumin	42	g/L	(35-50)

End of Report

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Blood Sciences Haematology Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.22.6197901.D
Specimen Type	Blood
Date/Time Collected	23.08.22 / 10:33
Date/Time Received	23.08.22 / 14:23
Requested By	Dr Wendy Killin
GP Practice	46131
Date/Time Reported	23.08.22 / 14:32
Details	NPT - MTX

Results

Full Blood Count - Authorised on 23.08.22 at 14:29

White Blood Count	6.9	$\times 10^9/l$	(4.0-10.0)
Red Cell Count	- 4.01	$\times 10^{12}/l$	(4.50-6.50)
Haemoglobin	- 124	g/l	(130-180)
Haematocrit	- 0.363	l/l	(0.400-0.540)
Mean Cell Volume	90.5	f1	(83.0-101.0)
MCH	30.9	pg	(27.0-32.0)
Platelet Count	354	$\times 10^9/l$	(150-410)
Neutrophils	4.4	$\times 10^9/l$	(2.0-7.0)
Lymphocytes	1.9	$\times 10^9/l$	(1.1-5.0)
Monocytes	0.6	$\times 10^9/l$	(0.2-1.0)
Eosinophils	0.04	$\times 10^9/l$	(0.02-0.50)
Basophils	0.0	$\times 10^9/l$	(0.0-0.1)
Nucleated RBC	0.0	$\times 10^9/l$	

End of Report

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McFarlane Stewart

CHI: 0906716470

Clinic Letter

Dr. El Douglas
 Crail Medical Practice
 245 Tollicross Road
 Glasgow
 G31 4UW

Main
 Switchboard:
 Department:
 Contact Tel:
 Enquiries to:
 Letter Date:
 Reference:
 Dictated
 Date:
 Transcribed
 Date:

NHS
 Greater Glasgow
 and Clyde
 Glasgow Royal Infirmary
 Alexandra Parade
 Glasgow
 G31 2ER
 0141 211 4000
 Respiratory Department
 0141 201 3831
 Fiona.maclellan@ggc.scot.nhs.uk
 15/08/2022
 GVC/FM
 15/08/2022
 15/08/2022

Dear Dr. El Douglas,

Stewart McFarlane; D.O.B: 09 Jun 1971; CHI: 0906716470
32 DALRY STREET, Glasgow, Lanarkshire, G32 9BL

Attendance: Specialty - Respiratory Medicine; Clinic - GRGCRE1-DR CHALMERS TEMP ILD MON
 AM - NO OVERBOOKINGS ON CLINIC UNLESS AUTHORISED BY DR CHALMERS
 Date and Time of Appointment - 15/08/2022 10:50

Clinical Comments:

Dear Doctor,

Problems:

1. Rheumatoid arthritis now on Methotrexate
2. Previous minor interstitial change on CT scan has now resolved
3. Road traffic accident with back pain
4. Solitary left kidney
5. Ex-smoker
6. Avian exposure (No evidence of hypersensitivity pneumonitis)

I contacted Mr McFarlane by telephone on 15/08/2022. I was pleased to inform him that the minor interstitial change seen on previous imaging have now resolved.

He was recently started on Methotrexate but I have no concerns about this beyond the obvious need to monitor for any new symptoms since Methotrexate induced pneumonitis is a rare condition.

NHS Confidential: Personal data about a patient

McFarlane Stewart

CHI: 0906716470

OPCL 15/08/2022 v1

Yours sincerely,

Dr George W Chalmers

Consultant Respiratory Physician

Electronically Signed: Dr George Chalmers, Consultant

cc.

THIRD PARTY COPY

Printed on 24/08/2022 08:18 by Fiona Maclellan

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WIS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.22.4659732.T
Specimen Type	Urine
Date/Time Collected	10.08.22 / 11:16
Date/Time Received	10.08.22 / 15:00
Requested By	Dr Wendy Killin
GP Practice	46131
Date/Time Reported	11.08.22 / 11:47
Details	NPT - MTX + CKD Rev.

Results

Urine Albumin - Authorised on 11.08.22 at 11:43

Urine Albumin	7	mg/L	(<20)
U Alb/Creat Ratio	1.3	mg/mmol crea	(0.0-2.5)

Urine Protein - Authorised on 11.08.22 at 11:43

Urine volume (ml)	NA	mL	
Urine Creatinine	5.2	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

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Blood Sciences Biochemistry Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.22.4675802.G
Specimen Type	Blood
Date/Time Collected	08.08.22 / 11:14
Date/Time Received	08.08.22 / 13:46
Requested By	Dr Wendy Killin
GP Practice	46131
Date/Time Reported	08.08.22 / 16:17
Details	NPT - MTX + CKD Rev.

Results

Glucose - Authorised on 08.08.22 at 16:15

Glucose 5.5 mmol/L (3.5-6.0)

Comments:

Non-fasting sample

End of Report

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Blood Sciences Biochemistry Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.22.4675800.X
Specimen Type	Blood
Date/Time Collected	08.08.22 / 11:14
Date/Time Received	08.08.22 / 13:45
Requested By	Dr Wendy Killin
GP Practice	46131
Date/Time Reported	08.08.22 / 16:37
Details	NPT - MFX + CKD Rev.

Results

Bone Profile - Authorised on 08.08.22 at 16:32

Calcium	2.45	mmol/L	(2.20-2.60)
Calcium (adjusted)	2.44	mmol/L	(2.20-2.60)
Phosphate	1.13	mmol/L	(0.80-1.50)
Albumin	40	g/L	(35-50)
Alkaline Phosphatase	50	U/L	(30-130)

Urea & Electrolytes - Authorised on 08.08.22 at 16:32

Sodium	137	mmol/L	(133-146)
Potassium	4.0	mmol/L	(3.5-5.3)
Chloride	102	mmol/L	(95-108)
Urea	5.5	mmol/L	(2.5-7.8)
Creatinine	61	umol/L	(40-130)
Estimated GFR	>60	ml/min	(>60)

Liver Function Tests - Authorised on 08.08.22 at 16:32

Total Bilirubin	5	umol/L	(<20)
ALT	16	U/L	(<50)
AST	12	U/L	(<40)
Alkaline Phosphatase	50	U/L	(30-130)
Albumin	40	g/L	(35-50)

Lipid profile - Authorised on 08.08.22 at 16:32

Cholesterol	4.5	mmol/L	
Triglycerides	0.8	mmol/L	(0.2-2.3)
HDL Cholesterol	1.5	mmol/L	
LDL-Cholest (calc'd)	2.6	mmol/L	
VLDL-Chol (calc'd)	0.4	mmol/L	
Chol/HDL ratio	3.0		

End of Report

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Blood Sciences Haematology Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.22.6173892.C
Specimen Type	Blood
Date/Time Collected	08.08.22 / 11:14
Date/Time Received	08.08.22 / 13:49
Requested By	Dr Wendy Killin
GP Practice	46131
Date/Time Reported	08.08.22 / 14:07
Details	NPT - MTX + CKD Rev.

Results

Full Blood Count - Authorised on 08.08.22 at 14:01

White Blood Count	7.5	$\times 10^9/l$	(4.0-10.0)
Red Cell Count	- 4.11	$\times 10^{12}/l$	(4.50-6.50)
Haemoglobin	- 124	g/l	(130-180)
Haematocrit	- 0.360	l/l	(0.400-0.540)
Mean Cell Volume	87.6	f1	(83.0-101.0)
MCH	30.2	pg	(27.0-32.0)
Platelet Count	+ 525	$\times 10^9/l$	(150-410)
Neutrophils	4.5	$\times 10^9/l$	(2.0-7.0)
Lymphocytes	2.2	$\times 10^9/l$	(1.1-5.0)
Monocytes	0.8	$\times 10^9/l$	(0.2-1.0)
Eosinophils	- 0.01	$\times 10^9/l$	(0.02-0.50)
Basophils	0.0	$\times 10^9/l$	(0.0-0.1)
Nucleated RBC	0.0	$\times 10^9/l$	

End of Report

NHS Confidential: Personal data about a patient

McFarlane Stewart

CHI: 0906716470

Clinic Letter

Dr. El Douglas
Crail Medical Practice
245 Tolcross Road
Glasgow
G31 4UW

Main
Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
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Date:
Transcribed
Date:

NHS
Greater Glasgow
and Clyde
Glasgow Royal Infirmary
Alexandra Parade
Glasgow
G31 2ER
0141 211 4000
Rheumatology
0141 451 5370 / 0141 451 5384
carrie.macneil@ggc.scot.nhs.uk
01/08/2022
SS/JD
01/08/2022
02/08/2022

Dear Dr. El Douglas,

Stewart McFarlane; D.O.B: 09 Jun 1971; CHI: 0906716470
32 DALRY STREET, Glasgow, Lanarkshire, G32 9BL

Attendance: Specialty - Rheumatology; Clinic - GRSSRH0-DR SAUNDERS AND DR GRIGOR
COMBINED EARLY ARTHRITIS FRI PM TIMESHIFT
Date and Time of Appointment - 01/08/2022 11:40

Requested Out-patient Investigations:

None performed today

Medication Note:

As noted

Clinical Comments:

I reviewed this 51-year-old gentleman in the rheumatoid clinic where we discussed the following:

1. Rheumatoid arthritis: Symptom onset six months ago, first seen CRD June 2022, rheumatoid factor and CCP antibody positive, ESR at presentation 77mm/hr, CRP 75mg/L. X-rays non-erosive.

Mr McFarlane presented with a bilateral, symmetrical inflammatory arthritis affecting wrists, ankles and MTP joints. He seems to have had quite a good clinical improvement with IM Kenalog given in June in relation to his hands, but he is struggling with pain in the MTP joints bilaterally and in both ankles. Foot pain is particularly severe first thing in the morning and is limiting his mobility.

On examination today he had striking metatarsalgia in the 1st MTP joint, but also the 5th, 4th and 3rd MTP joints in both feet. He also had a slightly high arch which is not a new feature. He had pain in the medial aspect of his ankles, but no evidence of ankle synovitis clinically.

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McFarlane Stewart

CHI: 0906716470

OPCL 01/08/2022 v1

I have gone through with him the diagnosis of rheumatoid arthritis and I have given him written information regarding that. I am optimistic that the pain in his feet is inflammatory, I am referring him to my physiotherapy colleagues for a further assessment, as there may be orthotic intervention that might be helpful for him or if his intramuscular steroid is not helpful then targeted injections may be. However I am hopeful that on appropriate disease modifying therapy things will improve.

I would be grateful if you would commence him on methotrexate 15mg once weekly with folic acid 5mg daily except the day of methotrexate. Thank you for carrying out blood monitoring, as per the near patient testing protocol.

He should continue on the hydroxychloroquine which was already started. We can always pull back on that if he gets a good response to methotrexate.

I am arranging for him to be seen in the clinic in six weeks from now at which point we will aim to escalate his methotrexate to 20mg once weekly.

2. Respiratory: He has an appointment for lung function tests. He has very minor fibrotic scarring on a previous high resolution CT scan of chest, but Dr Chalmers is happy that we progress with his methotrexate.

3. Back pain: He is awaiting an MRI scan for investigation of back pain following on from a road traffic accident a couple of years ago.

4. Social: He works in the building trade as an asbestos remover, but has not worked since his back injury.

Yours sincerely

Dr Sarah Saunders

Consultant Rheumatologist

Electronically Signed: Dr Sarah Saunders, Consultant

cc.

NHS Confidential: Personal data about a patient



Patient Label	
	
0908716470	M
MCFARLANE	09/06/1971
Stewart	
32 DALRY STREET	
Glasgow, Lanarkshire	
	G32 9BL

The patient attended RHEUMATOLOGY Clinic at AM
 Hospital on 01/08/22 and I would advise a change to drug therapy from
 _____ to _____
 or additional therapy of ① METHOTREXATE 15MG ONCE WEEKLY ORAL.
② FOLIC AND 5MG DAILY EXCEPT DAY OF METHOTREXATE
 as detailed below. Full letter to follow.
 Additional Comments: PLEASE MONITOR BLOODS AS PER WEAL PATIENT TESTING

DRUG (print)	DOSE	FREQUENCY	DURATION / REVIEW DATE
--------------	------	-----------	------------------------

Yours Sincerely

Signature: SVISName (print) STEWARTGrade: CCNSExt. No: 285370

White copy to - G.P. Pink copy - File this copy in Case Records

00545 GGC0004

NHS Confidential: Personal data about a patient

McFarlane Stewart

CHI: 0906716470

Clinical letter - Others:

Dr David McCarey
Consultant Rheumatologist
Rheumatology Department
Glasgow Royal Infirmary

Main Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
Dictated Date:
Transcribed Date:



Glasgow Royal Infirmary
Alexandra Parade
Glasgow
G31 2ER

0141 211 4000
Respiratory

0141 201 3831

Fiona.maclellan@ggc.scot.nhs.uk

13/07/2022

GWCFM

06/07/2022

08/07/2022

Dear Dr McCarey,

Stewart McFarlane; D.O.B: 09/06/1971; CHI: 0906716470
32 DALRY STREET, Glasgow, Lanarkshire, G32 9BL

Thank you for your letter regarding Mr McFarlane. As you have anticipated I would have no concerns about him starting on Methotrexate for his recent diagnosed rheumatoid arthritis. The absence of interstitial lung disease on his CT scan from June is reassuring.

Yours sincerely,

Dr George W Chalmers

Consultant Respiratory Physician

Electronically Signed: Dr George Chalmers, Consultant

cc. Dr Douglas
Crail Medical Practice
245 Tollcross Road
Glasgow
G31 4UW

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McFarlane Stewart

CHI: 0906716470

Clinic Letter

Dr. El Douglas
 Craik Medical Practice
 245 Tolcross Road
 Glasgow
 G31 4UW

Main
 Switchboard:
 Department:
 Contact Tel:
 Enquiries to:
 Letter Date:
 Reference:
 Dictated
 Date:
 Transcribed
 Date:

NHS
 Greater Glasgow
 and Clyde
 Stobhill Hospital
 133 Balornock Road
 Glasgow
 G21 3UW
 0141 201 3000
 Rheumatology
 0141 355 1050
 16/06/2022
 DM/LS
 16/06/2022
 20/06/2022

Dear Dr. El Douglas,

Stewart McFarlane; D.O.B: 09 Jun 1971; CHI: 0906716470
32 DALRY STREET, Glasgow, Lanarkshire, G32 9BL

Attendance: Specialty - Rheumatology; Clinic - STDMRH4-RHEUM ACH DR D MCCAREY
 TUESDAY PM TIMESHIFT
 Date and Time of Appointment - 16/06/2022 15:00

Clinical Comments:

Many thanks indeed for referring this fifty one year old gentleman to rheumatology for assessment.
 His problems were as follows;

Likely rheumatoid arthritis: Over the last few months he has developed inflammatory joint symptoms in the small joints of the hands and feet. He describes significant morning stiffness lasting around an hour. He finds that his wrists swell up and he has difficulty with tasks requiring power grip strength. In the last couple of weeks his symptoms have been worse in the feet than in the hands.

On examination he appeared systemically well and was of slim build. Musculoskeletal examination revealed mild synovitis around the ulnar styloid in both wrists with slightly reduced power grip strength. He was tender on a few of the small joints of the hands but no definite synovitis in MCPs. Elbows and shoulders move freely. Lower limb examination revealed positive metatarsal squeeze and likely synovitis in the right mid foot. There were no extraarticular features of rheumatic disease, chest was clear to oscillation.

I have explained to Mr McFarlane that in view of his symptoms, signs and weakly positive rheumatoid factor that I think it is highly likely that he has rheumatoid arthritis. For completeness I have arranged to update bloods including inflammatory markers, CCP antibodies and I have also arranged for a BBV screen as low level rheumatoid factor and mild inflammatory joint symptoms can be associated

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Page 1 of 3

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McFarlane Stewart

CHI: 0906716470

OPCL 16/06/2022 v1

with viral hepatitis. I have arranged for him to receive 80mgs intramuscular Kenalog today with a view to settling his symptoms in the short term. I have given him written information on rheumatoid arthritis and on Hydroxychloroquine and would be grateful if you could start him on Hydroxychloroquine 200mgs bd. I have explained the need for annual review with an optician.

I have written to my colleague Dr Sarah Saunders asking if she could arrange for follow up in August in the early RA clinic at GRI. I have also written to Dr George Chalmers asking if he would be happy with us proceeding to Methotrexate should this be clinically indicated.

Chest: He has ongoing follow up with Dr Chalmers for minor fibrotic change on CT. He had probable COVID infection in 2020. He has mild shortness of breath on exertion. I note that he has a parrot at home and he also works as an Asbestos removal operative.

Solitary kidney: This was discovered incidentally on a scan. His eGFR is >60.

Social: He stopped smoking two years ago and drinks little alcohol. Works as an asbestos removal operative.

Investigations: Full blood count, ESR, biochemistry CRP (CRP 75, ESR 77), CCP antibodies, HIV/Hep B/Hep C screen, X-Rays of feet.

Summary medication: Naproxen, Codydramol, Omeprazole, suggest Hydroxychloroquine 200mgs bd, given 80mgs IM Kenalog today 16 06 22

Follow up: To be arranged at early RA clinic at Glasgow Royal Infirmary.

Yours Sincerely,

Dr David McCarey

Consultant Rheumatologist

Electronically Signed: Dr David McCarey, Consultant

cc. Dr Sarah Saunders
Consultant Rheumatologist
Rheumatology Department

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Page 2 of 3

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McFarlane Stewart

CHI: 0906716470

OPCL 16/06/2022 v1

Glasgow Royal Infirmary
84 Castle Street
G4 0SF

Dr George Chalmers
Respiratory Consultant
Respiratory Department
Outpatient Area A Queen Elizabeth Building
Glasgow Royal Infirmary
84 Castle St
G4 0SF

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Page 3 of 3

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Glasgow Royal Infirmary: Diagnostic Imaging Report		Page 1 of 1
McFARLANE, STEWART		DoB: 09-Jun-1971
32 DALRY STREET, GLASGOW, LANARKSHIRE, G32 9BL		CHI. No.: 0906716470
Ref. Locn.: GP PRACTICE		CRIS No.: 5563350
Referrer: Dr Poppy Morgan (Locum)		Curr Ward: G107HW69D
VERIFIED Verified By: Dr Sean Kelly 22-May-2022 0842. Clinical History: under lx for fibrotic lung disease. now c/o bilateral pain in hands mostly affecting PIPJs. early morning stiffness. ?any erosive changes. Note RhF mildly positive in Jan with positive ANA titre. update inflammatory bloods. heartburn - ?h pylori under lx for fibrotic lung disease. now c/o bilateral pain in hands mostly affecting PIPJs. early morning stiffness. ?any erosive changes. Note RhF mildly positive in Jan with positive ANA titre. update inflammatory bloods. heartburn - ?h pylori		
XR Hand Lt: See hand both report		
XR Hand Rt: See hand both report		
XR Hand Both: There are early/minor degenerative changes affecting the majority of the D.I.P. joints plus both thumbs CMC joints. There is no significant erosive change.		
Event Number: E-36529097  Examination Date: 20-May-2022		
Ref. Source: Dr Poppy Morgan (Locum), Craill Medical Practice, 245 Tollcross Road, Glasgow, G31 4UW		
Examinations: XR Hand Lt, XR Hand Rt, XHAB		

WIS Confidential: Personal data about a patient

Virology Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	V.22.1005252.L
Specimen Type	SERUM (BIOCH.BOTTLE)
Date/Time Collected	20.04.22 / 11:14
Date/Time Received	20.04.22 / 14:44
Requested By	Dr Poppy Morgan
GP Practice	46131
Date/Time Reported	25.04.22 / 13:12
Details	under ix for fibrotic lun...

Results

H.pylori serology - Authorized on 25.04.22 at 13:09

H.pylori antibody DETECTED

Comments:

For advice regarding Helicobacter pylori please contact
your local microbiology department
This is a SERUM sample.

End of Report

WIS Confidential: Personal data about a patient

Blood Sciences Immunology Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.22.3564155.C
Specimen Type	Blood
Date/Time Collected	20.04.22 / 11:14
Date/Time Received	20.04.22 / 16:25
Requested By	Dr Poppy Morgan
GP Practice	46131
Date/Time Reported	21.04.22 / 10:07
Details	under ix for fibrotic lun...

Results

I Rheumatoid Factor - Authorised on 21.04.22 at 10:04

Rheumatoid Factor + 39 IU/mL (1-29)

Comments:

Normal range 0-29 IU/mL, Weak positive range 30-99 IU/mL

End of Report

WIS Confidential: Personal data about a patient

Blood Sciences Haematology Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.22.5589674.Y
Specimen Type	Blood
Date/Time Collected	20.04.22 / 11:14
Date/Time Received	20.04.22 / 13:38
Requested By	Dr Poppy Morgan
GP Practice	46131
Date/Time Reported	20.04.22 / 14:47
Details	Under ix for fibrotic lun...

Results

ESR - Authorised on 20.04.22 at 14:27

ESR + 35 mm/hr (0-10)

Full Blood Count - Authorised on 20.04.22 at 13:47

White Blood Count	6.5	$\times 10^9/l$	(4.0-10.0)
Red Cell Count	4.38	$\times 10^{12}/l$	(4.50-6.50)
Haemoglobin	133	g/l	(130-180)
Haematocrit	0.386	l/l	(0.400-0.540)
Mean Cell Volume	88.1	fl	(83.0-101.0)
MCH	30.4	pg	(27.0-32.0)
Platelet Count	424	$\times 10^9/l$	(150-410)
Neutrophils	4.0	$\times 10^9/l$	(2.0-7.0)
Lymphocytes	1.7	$\times 10^9/l$	(1.1-5.0)
Monocytes	0.5	$\times 10^9/l$	(0.2-1.0)
Eosinophils	0.21	$\times 10^9/l$	(0.02-0.50)
Basophils	0.1	$\times 10^9/l$	(0.0-0.1)
Nucleated RBC	0.0	$\times 10^9/l$	

End of Report

WIS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report			
Patient Details			
Surname	MCFARLANE		
Forename	STEWART		
CHI	0906716470		
Date of birth	09.06.1971		
Sex	Male		
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL		
Specimen Details			
Specimen Number	B.22.4587212.M		
Specimen Type	Blood		
Date/Time Collected	20.04.22 / 11:14		
Date/Time Received	20.04.22 / 13:43		
Requested By	Dr Poppy Morgan		
GP Practice	46131		
Date/Time Reported	20.04.22 / 17:22		
Details	Under ix for fibrotic lun...		
Results			
C-reactive Protein - Authorised on 20.04.22 at 17:20			
C Reactive Protein	10	mg/L	(0-10)
Urea & Electrolytes - Authorised on 20.04.22 at 17:20			
Sodium	138	mmol/L	(133-146)
Potassium	4.3	mmol/L	(3.5-5.3)
Chloride	103	mmol/L	(95-108)
Urea	4.7	mmol/L	(2.5-7.8)
Creatinine	65	umol/L	(40-130)
Estimated GFR	>60	ml/min	(>60)
Liver Function Tests - Authorised on 20.04.22 at 17:20			
Total Bilirubin	9	umol/L	(<20)
ALT	18	U/L	(<50)
AST	18	U/L	(<40)
Alkaline Phosphatase	69	U/L	(30-130)
Albumin	43	g/L	(35-50)
End of Report			

10/11/2020 10:00:00 AM

Statement of Fitness for Work For social security or Statutory Sick Pay

Patient's name: Mr, Mrs, Miss, Ms Stewart McFarlane

I assessed your case on: 21 / 01 / 2022

and, because of the following condition(s): back and chest pain

I advise you that: ☒ you are not fit for work

☐ You may be fit for work taking reasonable adjustments to your duties

If available, and with your employer's agreement, you may benefit from:

☐ a phased return to work ☐ extended duties

☐ altered hours ☐ workplace adaptations

Comments, including functional effects of your condition(s):

This will be the case for: 12 / 01 / 2022 to 29 / 03 / 2022

I will/will not need to assess your fitness for work again at the end of this period. (Please delete as applicable)

Doctor's signature: [Signature]

Date of statement: 21 / 01 / 2022

Doctor's address: CRAIL MEDICAL PRACTICE, 245 Tolbooth Road, Glasgow, G2 4JW, Telephone: 0141 554 3199

Unique ID: Med J 01/17

10/11/2020 10:00:00 AM

Data from page 1 of this form may be collected to learn about national patterns of sickness absence. Individuals will not be identified. Find out more at www.gov.uk/dwp/fit-note-data

Help getting back to work if you are employed

If you've been off work or are likely to be off work sick for 4 weeks or more, you may be able to have a free occupational health assessment. You will be able to discuss what advice and support you need to help you go back to work sooner. You can ask your GP or employer to refer you. For further information:

- in England and Wales visit www.fitforwork.org or phone 0800 032 6235
- in Scotland please visit www.fitforworkscotland.scot or phone 0800 019 2211.

What your doctor's advice means

You are not fit for work: Your health condition means that you may not be able to work for the period shown. You can go back to work as soon as you feel able to and, with your employer's agreement, this may be before your fit note runs out.

You may be fit for work: You could go back to work with the support of your employer. Sometimes your employer cannot give you the support you need and if this happens your employer will treat this form as though you are 'not fit for work'. You don't need to get another of these forms from your doctor.

For more information please visit www.gov.uk and type 'patients and employees' into the search field.

Fill in the **Your details** section. You can ask someone to do this for you if you cannot fill in your details yourself.

Your details - Please use BLOCK CAPITALS

Surname: Mr, Mrs, Miss, Ms MCFARLANE

Other names: STEWART

Address: 32 DALRY STREET, GLASGOW, Postcode: G3 7BL

Date of birth: 09 / 06 / 1971 Mobile: [] [] [] [] [] []

NI number: [] [] [] [] [] [] [] [] [] []

What you need to do now

- If you are employed:** Please show this form to your employer. You could get Statutory Sick Pay (SSP) which is paid by your employer. If your employer cannot pay you SSP they will give you form SSP1 to claim benefits.
- If you are self-employed:** You could claim benefits.
- If you are already claiming benefits:** Please send this form to the office dealing with your claim.
- If you need to make a claim to benefits:** Visit www.gov.uk/browse/benefits or phone 0800 055 6688 (8am to 6pm Monday to Friday). Textphone users call 0800 023 4888.

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McFarlane Stewart

CHI: 0906716470

Clinical letter - GP: Discharge

Dr. El Douglas
Crail Medical Practice
245 Tolcross Road
Glasgow
G31 4UW

Main Switchboard:
Department:
Contact Tel:
Enquiries to:
Letter Date:
Reference:
Dictated Date:
Transcribed Date:

NHS
Greater Glasgow
and Clyde
Glasgow Royal Infirmary
Alexandra Parade
Glasgow
G31 2ER
0141 211 4000
Physiotherapy
0141 232 1562
Stuart Burgon
19/01/2022
19/01/2022
19/01/2022

Dear Dr Douglas,

Stewart McFarlane; D.O.B: 09/06/1971; CHI: 0906716470
32 DALRY STREET, Glasgow, Lanarkshire, G32 9BL

GP Action Required: NIL

Presenting Condition: Lx and Cx pain

Physiotherapy Comments:

Onset and Mechanism of injury - RTA 14/02/21

Diagnosis -Soft tissue injury related to RTA

Treatment -Gentle ROM and strengthening programme

Further Info -No red flags/Neurology or signs or CES.

Discharge Outcome:

The patient cancelled review appointment(s) with no further contact.

This patient has now been discharged from our care.

Yours sincerely

Printed on 19/01/2022 11:19 by Stuart Burgon

Page 1 of 2

NHS Confidential: Personal data about a patient

McFarlane Stewart

CHI: 0906716470

GCL 19/01/2022 v1

Stuart Burgon

Band 6 Physiotherapist

Electronically Signed: ,

cc.

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Printed on 19/01/2022 11:19 by Stuart Burgon

Page 2 of 2

NHS Confidential: Personal data about a patient

McFarlane Stewart

CHI: 0906716470

Clinic Letter

Dr. El Douglas
 Craik Medical Practice
 245 Tollicross Road
 Glasgow
 G31 4UW

Main
 Switchboard:
 Department:
 Contact Tel:
 Enquiries to:
 Letter Date:
 Reference:
 Dictated
 Date:
 Transcribed
 Date:

NHS
 Greater Glasgow
 and Clyde
 Glasgow Royal Infirmary
 Alexandra Parade
 Glasgow
 G31 2ER
 0141 211 4000
 Respiratory Department
 0141 201 3831
 suzy.brown@ggc.scot.nhs.uk
 11/01/2022
 GWC/SB
 11/01/2022
 12/01/2022

Dear Dr. El Douglas,

Stewart McFarlane; D.O.B: 09 Jun 1971; CHI: 0906716470
32 DALRY STREET, Glasgow, Lanarkshire, G32 9BL

Attendance: Specialty - Respiratory Medicine; Clinic - GRGCRE4-DR CHALMERS/WRIGHT ILD TUE PM

Date and Time of Appointment - 11/01/2022 14:45

Follow Up: Dr Chalmers Clinic - 12/07/2022 @ 14:00

Clinical Comments:**Problems:**

1. Possible minor fibrotic change on CT.
2. Probable COVID-19 infection 2020.
3. Road traffic accident with back pain.
4. Solitary left kidney.
5. Ex-smoker.
6. Avian exposure (pet parrot at home).

Thank you for referring Mr McFarlane whom I saw at clinic on 11/01/2022. He reports breathlessness on exertion going back about a year or more and has to stop on walking on level ground after a few hundred yards. He can manage three flights of stairs but is breathless thereafter.

He has a history of avian exposure as he has had a pet parrot at home for about 25 years although the pattern of abnormality seen on CT is perhaps not typical of hypersensitivity pneumonitis. More obvious on the scan is some fairly subtle lower zone reticular change consistent with early fibrosis but which could be dependent changes. I have requested a prone CT scan along with inspiratory and expiratory images to assess for any trapping in relation to possible hypersensitivity. I have also

NHS Confidential: Personal data about a patient

McFarlane Stewart

CHI: 0906716470

OPCL 11/01/2022 v1

checked an avian antibody but would update this with a specific antibody for parrot antigen if the test is even mildly positive. He will have outpatient lung function tests and echocardiography.

I explained to him that he has evidence of minor change on CT which requires follow up. At present there is no specific diagnosis or treatment but hopefully investigations will clarify this over time.

Yours sincerely

Dr George W Chalmers

Consultant Respiratory Physician

Electronically Signed: Dr George Chalmers, Consultant

cc.

HIS Confidential: Personal Data about a patient

Glasgow Royal Infirmary: Diagnostic Imaging Report		Page 1 of 1
MCFARLANE, STEWART		DoB: 09-Jun-1971
32 DALRY STREET, GLASGOW, LANARKSHIRE, G32 9BL		CHI. No.: 0906716470
Ref. Locn.: GP PRACTICE		CRIS No.: 5563350
Referrer: Dr Wendy Killin		Curr Ward: G107HW69D
VERIFIED Verified By: Dr Laura Thomson 25-Nov-2021 1441. Clinical History : Has the patient had a recent chest X-ray? : Yes Unexplained and persistent (more than six weeks) CTRL click-to select all that apply : Dyspnoea, Loss of appetite, Weight loss Persistent Haemoptysis in smokers/ex-smokers over 40 years of age? : No New or not previously documented finger clubbing? : No Persistent or recurring chest infection? : No Is the patient a Smoker/Ex Smoker? : Yes ** pt has solitary kidney but normal GFR ** utd UE to be done on mon 8th. fatigue, SOB partic on exertion, new weight loss, loss of appetite. prev worked 7 days week as builder, now has to lie down after school drop off. stopped smoking 2y ago, prev smoked since age 15. ? underlying lung ca CT Thorax : A noncontrast scan of thorax performed. Comparison is made to previous study of 18/02/2021. There is no evidence of parenchymal mass lesion. There is minor paraseptal emphysema at the apices and an ill defined subpleural reticular abnormality at both bases. While this may well be dependent in nature there is also some prominence of the airways in this region and the possibility of an early interstitial lung disease should be considered given the patient's presentation. No size significant mediastinal, hilar or supraclavicular lymphadenopathy, allowing for the noncontrast nature of the study. Satisfactory cardiac appearances. Unremarkable appearance of the partly included solid abdominal organs including the upper pole of the solitary left kidney. Slightly striated appearance of the T7 vertebral body is likely haemangioma. Opinion: No parenchymal mass identified. Ill-defined subpleural reticular abnormality, interstitial lung disease requires exclusion given presentation. Respiratory opinion and prone CT advised.		
Event Number : E-36079777		Examination Date : 25-Nov-2021
Ref. Source : Dr Wendy Killin, Craik Medical Practice, 245 Tollcross Road, Glasgow, G31 4UW Examinations : CT Thorax		

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Blood Sciences Biochemistry Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.21.5071779.H
Specimen Type	Faeces
Date/Time Collected	08.11.21 / 09:16
Date/Time Received	12.11.21 / 09:32
Requested By	Dr Wendy Killin
GP Practice	46131
Date/Time Reported	15.11.21 / 14:32
Details	change in bowel habit

Results

qFIT - Authorised on 15.11.21 at 14:30

qFIT <9 ug Hb/g faec (<9)

Comments:

Negative qFIT result.

Refer to NHS GG4C guidelines for symptom based triage.

End of Report

WIS Confidential: Personal data about a patient

Blood Sciences Haematology Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.21.6333320.S
Specimen Type	Blood
Date/Time Collected	08.11.21 / 09:16
Date/Time Received	08.11.21 / 13:31
Requested By	Dr Wendy Killin
GP Practice	46131
Date/Time Reported	08.11.21 / 14:22
Details	weight loss

Results

Full Blood Count - Authorised on 08.11.21 at 13:38

White Blood Count	6.4	$\times 10^9/l$	(4.0-10.0)
Red Cell Count	4.54	$\times 10^{12}/l$	(4.50-6.50)
Haemoglobin	135	g/l	(130-180)
Haematocrit	0.418	l/l	(0.400-0.540)
Mean Cell Volume	92.1	fl	(83.0-101.0)
MCH	29.7	pg	(27.0-32.0)
Platelet Count	+ 448	$\times 10^9/l$	(150-410)
Neutrophils	3.7	$\times 10^9/l$	(2.0-7.0)
Lymphocytes	1.9	$\times 10^9/l$	(1.1-5.0)
Monocytes	0.6	$\times 10^9/l$	(0.2-1.0)
Eosinophils	0.19	$\times 10^9/l$	(0.02-0.50)
Basophils	0.1	$\times 10^9/l$	(0.0-0.1)
Nucleated RBC	0.0	$\times 10^9/l$	

ESR - Authorised on 08.11.21 at 14:19

ESR	+ 45	mm/hr	(0-10)
-----	------	-------	----------

End of Report

WIS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.21.5063394.S
Specimen Type	Blood
Date/Time Collected	08.11.21 / 09:16
Date/Time Received	08.11.21 / 13:37
Requested By	Dr Wendy Killin
GP Practice	46131
Date/Time Reported	08.11.21 / 17:02
Details	weight loss

Results

Glucose - Authorised on 08.11.21 at 16:58

Glucose 4.6 mmol/L (3.5-6.0)

Comments:

Non-fasting sample

End of Report

WIS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.21.5063393.D
Specimen Type	Blood
Date/Time Collected	08.11.21 / 09:16
Date/Time Received	08.11.21 / 13:38
Requested By	Dr Wendy Killin
GP Practice	46131
Date/Time Reported	08.11.21 / 15:47
Details	weight loss

Results

Urea & Electrolytes - Authorised on 08.11.21 at 15:19

Sodium	138	mmol/L	(133-146)
Potassium	4.9	mmol/L	(3.5-5.3)
Chloride	101	mmol/L	(95-108)
Urea	3.7	mmol/L	(2.5-7.8)
Creatinine	72	umol/L	(40-130)
Estimated GFR	>60	ml/min	(>60)

Thyroid funct test - Authorised on 08.11.21 at 15:43

TSH	1.21	mU/L	(0.35-5.00)
Free T4	13.3	pmol/L	(9.0-21.0)
Total T3		nmol/L	

End of Report

NHS Confidential: Personal data about a patient

West Glasgow Ambulatory Care Hospital: Diagnostic Imaging Report		Page 1 of 1
MCFARLANE, STEWART		DoB : 09-Jun-1971
32 DALRY STREET, GLASGOW, LANARKSHIRE, G32 9BL		CHI. No. : 0906716470
Ref. Locn. : GP PRACTICE		CRIS No. : 5563350
Referrer : Dr Wendy Killin		Curr Ward: G107HW69D
VERIFIED Verified By: Dr Sean Kelly 18-Oct-2021 0649.		
Clinical History :		
URGENT PLS fatigue, post likely covid infection, some weight loss, ex-smoker ? underlying lung pathology		
XR Chest :		
The heart is not enlarged. The lungs are clear of active disease. No significant focal lung lesion identified		
Event Number : E-36008504		Examination Date : 17-Oct-2021
Ref. Source : Dr Wendy Killin, Crail Medical Practice, 245 Tollcross Road, Glasgow, G31 4UW		
Examinations : XR Chest		

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File Status	Not Filed.	Tasks	No Tasks.
Assigned User	Unassigned.	Filed By User	Not Filed
Patient Matched	Yes.	BoSS Message Type	Exclusion

electronic Notification of Bowel Screening Results Service
New Exclusion

CHI Number	0906716470
Name	McFARLANE, STEWART
Date Of Birth	09/ 06/ 1971
Registered GP	G0117
Practice Code	G46131

Report Date	07 Sep 2021
Letter ID	410353174705
Exclusion Reason	Non-Responder
Report Comments	No response to bowel cancer screening programme invitation (90w2.)
Invitation Date	09 Jun 2021

Emis PCS

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	Mcfarlane
Forename	Stewart Snr
CHI	0906716470
Date of birth	1971-06-09
Sex	Male
Address	32 DALRY ST GLASGOW G32 9BL

Specimen Details

Specimen Processed Date	06-09-2021 17:23
Test Start Date	05-09-2021 12:00
Test End Date	05-09-2021 12:38
GP Practice	46131
Specimen Number	KNA80670717
Administration Method	

End of Report**Report Date:** 10/09/2021

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Blood Sciences Biochemistry Report			
Patient Details			
Surname	MCFARLANE		
Forename	STEWART		
CHI	0906716470		
Date of birth	09.06.1971		
Sex	Male		
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL		
Specimen Details			
Specimen Number	B.21.4645928.L		
Specimen Type	Blood		
Date/Time Collected	12.08.21 / 15:41		
Date/Time Received	12.08.21 / 16:32		
Requested By	Dr Emma Douglas		
GP Practice	46131		
Date/Time Reported	13.08.21 / 15:47		
Details	Iatt		
Results			
Liver Function Tests - Authorised on 13.08.21 at 12:35			
Total Bilirubin	6	umol/L	(<20)
ALT	19	U/L	(<50)
AST	17	U/L	(<40)
Alkaline Phosphatase	78	U/L	(30-130)
Albumin	43	g/L	(35-50)
C-reactive Protein - Authorised on 13.08.21 at 12:35			
C Reactive Protein	6	mg/L	(0-10)
Urea & Electrolytes - Authorised on 13.08.21 at 12:35			
Sodium	139	mmol/L	(133-146)
Potassium	4.5	mmol/L	(3.5-5.3)
Chloride	105	mmol/L	(95-108)
Urea	5.2	mmol/L	(2.5-7.8)
Creatinine	66	umol/L	(40-130)
Estimated GFR	>60	ml/min	(>60)
Thyroid funct test - Authorised on 13.08.21 at 14:59			
TSH	2.21	mU/L	(0.35-5.00)
Free T4	13.1	pmol/L	(9.0-21.0)
Total T3		nmol/L	
End of Report			

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McFarlane Stewart

CHI: 0906716470

Emergency Attendance Letter

Emergency Department
Glasgow Royal Infirmary
Alexandra Parade
Glasgow
Lanarkshire
G31 2ER

Dept. Contact Details:

Tel:

Fax:

Email:

Date Completed: 03/06/2021

Consultant: Dr Donogh Maguire

El Douglas
Craig Medical Practice
245 Tollicross Road
Glasgow
Glasgow
G31 4UW

Dear El Douglas

Re: **McFarlane Stewart**
32 DALRY STREET
Glasgow G32 9BL

DOB: 09/06/1971

CHI: 0906716470

Attended on: 03/06/2021 at 06:51 hrs.

Departed on: 03/06/2021 at 09:05 hrs.

Discharge Type: 01a - Discharge with no follow up

Destination: Private residence

Previous ED Attendance in last 12 months: 1

Presenting complaint
chest pain

Nursing Assessment:

CENTRAL CHEST PAIN radiating into back. Sudden onset 0500 this am. No cardiac history. Hx CKD.
Denies covid.

Investigations in ED:

1. Coagulation screen

2. Urea and Electrolytes

3. Glucose

4. LFT

5. CRP

6. Chol / Triglyceride

7. Full Blood Count

8. Troponin I hs

9. XR Chest

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McFarlane Stewart

CHI: 0906716470

Diagnosis:

Diagnosis	Side	Site
Other Chest Pain		

Procedures: **None**Immunisations: **None**Dispensed Medication: **None**

Clinician Notes:

Stewart attended ED with chest pain. He did not have any acute ECG changes. His Trop-I was <4 and PERC rule 0. He was systemically well. Stewart went home with strict worsening advice.

Followup:

Highly sensitive: N

Consent for sharing withheld: N

Yours sincerely,
Thomas Fenwick2
Doctor

Copies to:

1. El Douglas (GP)

School Address:

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McFarlane Stewart

CHI: 0906716470

Final Discharge Letter

Dr. El Douglas
 Craik Medical Practice
 245 Tollicross Road
 Glasgow
 G31 4UW

Main
 Switchboard:
 Department:
 Contact Tel:
 Enquiries to:
 Letter Date:
 Reference:
 Dictated
 Date:
 Transcribed
 Date:

NHS
 Greater Glasgow
 and Clyde
 Glasgow Royal Infirmary
 Alexandra Parade
 Glasgow
 G31 2ER
 0141 211 4000

Urology
 0141 201 3617
 sharon.napier@ggc.scot.nhs.uk
 15/06/2021
 SM/SN
 05/06/2021
 07/06/2021

Dear Dr. El Douglas,

Stewart McFarlane; D.O.B: 09/06/1971; CHI: 0906716470
32 DALRY STREET, Glasgow, Lanarkshire, G32 9BL

Admission: Specialty - Urology; Ward - GRIWD69D GRI Ward 69 Urology Diagnostic Centre
 Consultant - Mr Simon Morton; Date of Admission - 05/06/2021
 Date of Discharge - 05/06/2021; Discharged to - Private Residence - no additional detail added

Clinical Comments:**Summary**

Non visible haematuria

Solitary left kidney

Thank you for referring Mr McFarlane who I reviewed at my flexible cystoscopy clinic this afternoon. This was regards to persistent non visible haematuria. I note he was in a RTA earlier this year and a CT scan upon admission identified he has been born with a congenital absent right kidney and the left kidney was satisfactory. There were no ureteric abnormalities.

I carried out a flexible cystoscopy with informed verbal consent and he was aware of the main risks of pain, infection or bleeding. This identified a normal urethra, non occlusive prostate and no intravesical abnormalities. The urothelium was healthy. I have discharged Mr McFarlane.

Yours sincerely

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McFarlane Stewart

CHI: 0906716470

FDL 05/06/2021 v1

Mr Simon Morton

Consultant Urological Surgeon

Electronically Signed: Mr Simon Morton, Consultant

cc.

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Printed on 15/06/2021 08:06 by Lynne Jardine

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Blood Sciences Biochemistry Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.21.4645933.G
Specimen Type	Blood
Date/Time Collected	12.08.21 / 15:41
Date/Time Received	12.08.21 / 16:30
Requested By	Dr Emma Douglas
GP Practice	46131
Date/Time Reported	12.08.21 / 19:12
Details	fast

Results

Glucose - Authorised on 12.08.21 at 19:07

Glucose 5.1 mmol/L (3.5-6.0)

Comments:

Non-fasting sample

End of Report

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Blood Sciences Haematology Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.21.6190271.S
Specimen Type	Blood
Date/Time Collected	12.08.21 / 15:41
Date/Time Received	12.08.21 / 18:17
Requested By	Dr Emma Douglas
GP Practice	46131
Date/Time Reported	12.08.21 / 19:22
Details	latt

Results

Full Blood Count - Authorised on 12.08.21 at 18:31

White Blood Count	7.3	$\times 10^9/l$	(4.0-10.0)
Red Cell Count	4.67	$\times 10^{12}/l$	(4.50-6.50)
Haemoglobin	143	g/l	(130-180)
Haematocrit	0.418	l/l	(0.400-0.540)
Mean Cell Volume	89.5	f1	(83.0-101.0)
MCH	30.6	pg	(27.0-32.0)
Platelet Count	+ 465	$\times 10^9/l$	(150-410)
Neutrophils	4.0	$\times 10^9/l$	(2.0-7.0)
Lymphocytes	2.3	$\times 10^9/l$	(1.1-5.0)
Monocytes	0.8	$\times 10^9/l$	(0.2-1.0)
Eosinophils	0.14	$\times 10^9/l$	(0.02-0.50)
Basophils	0.1	$\times 10^9/l$	(0.0-0.1)
Nucleated RBC	0.0	$\times 10^9/l$	

ESR - Authorised on 12.08.21 at 19:17

ESR	+ 37	mm/hr	(0-10)
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End of Report

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Blood Sciences Haematology Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.21.4546425.C
Specimen Type	Blood
Date/Time Collected	07.04.21 / 15:52
Date/Time Received	07.04.21 / 18:16
Requested By	Dr Carys Morrison
GP Practice	46131
Date/Time Reported	09.04.21 / 19:12
Details	TATT, calf pain since sta...

Results

Serum Ferritin - Authorised on 09.04.21 at 19:09

Serum Ferritin 285 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

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Blood Sciences Biochemistry Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.21.4546425.C
Specimen Type	Blood
Date/Time Collected	07.04.21 / 15:52
Date/Time Received	07.04.21 / 16:16
Requested By	Dr Carys Morrison
GP Practice	46131
Date/Time Reported	09.04.21 / 16:17
Details	TATT, calf pain since sta...

Results

Thyroid funct test - Authorised on 09.04.21 at 16:12

TSH	2.47	mU/L	(0.35-5.00)
Free T4	12.2	pmol/L	(9.0-21.0)
Total T3		nmol/L	

End of Report

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Blood Sciences Biochemistry Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.21.4657825.R
Specimen Type	Blood
Date/Time Collected	27.05.21 / 11:07
Date/Time Received	27.05.21 / 14:25
Requested By	Christine Roy
GP Practice	46131
Date/Time Reported	28.05.21 / 09:02
Details	Commenced Atorva. 2m ago.

Results

Liver Function Tests - Authorised on 28.05.21 at 08:58

Total Bilirubin	8	umol/L	(<20)
ALT	16	U/L	(<50)
AST	16	U/L	(<40)
Alkaline Phosphatase	72	U/L	(30-130)
Albumin	39	g/L	(35-50)

End of Report

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Blood Sciences Biochemistry Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.21.4546425.C
Specimen Type	Blood
Date/Time Collected	07.04.21 / 15:52
Date/Time Received	07.04.21 / 18:16
Requested By	Dr Carys Morrison
GP Practice	46131
Date/Time Reported	08.04.21 / 18:02
Details	↑ATT, calf pain since sta...

Results

Urea & Electrolytes - Authorised on 08.04.21 at 17:58

Sodium	138	mmol/L	(133-146)
Potassium	4.2	mmol/L	(3.5-5.3)
Chloride	102	mmol/L	(95-108)
Urea	3.7	mmol/L	(2.5-7.8)
Creatinine	69	umol/L	(40-130)
Estimated GFR	>60	ml/min	(>60)

Liver Function Tests - Authorised on 08.04.21 at 17:58

Total Bilirubin	6	umol/L	(<20)
ALT	16	U/L	(<50)
AST	17	U/L	(<40)
Alkaline Phosphatase	79	U/L	(30-130)
Albumin	43	g/L	(35-50)

End of Report

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Blood Sciences Biochemistry Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.21.4546433.X
Specimen Type	Blood
Date/Time Collected	07.04.21 / 15:52
Date/Time Received	07.04.21 / 18:18
Requested By	Dr Carys Morrison
GP Practice	46131
Date/Time Reported	08.04.21 / 14:57
Details	FATT. calf pain since sta...

Results

Glucose - Authorised on 08.04.21 at 14:51

Glucose 3.8 mmol/L (3.5-6.0)

Comments:

Non-fasting sample

End of Report

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Blood Sciences Haematology Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.21.5958696.C
Specimen Type	Blood
Date/Time Collected	07.04.21 / 15:52
Date/Time Received	07.04.21 / 18:15
Requested By	Dr Carys Morrison
GP Practice	46131
Date/Time Reported	07.04.21 / 18:27
Details	rATT, calf pain since sta...

Results

Full Blood Count - Authorised on 07.04.21 at 18:22

White Blood Count	8.1	$\times 10^9/l$	(4.0-10.0)
Red Cell Count	4.62	$\times 10^{12}/l$	(4.50-6.50)
Haemoglobin	141	g/l	(130-180)
Haematocrit	0.405	l/l	(0.400-0.540)
Mean Cell Volume	87.7	fL	(83.0-101.0)
MCH	30.5	pg	(27.0-32.0)
Platelet Count	+ 419	$\times 10^9/l$	(150-410)
Neutrophils	4.9	$\times 10^9/l$	(2.0-7.0)
Lymphocytes	2.4	$\times 10^9/l$	(1.1-5.0)
Monocytes	0.8	$\times 10^9/l$	(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	$\times 10^9/l$	

End of Report

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NHS Greater Glasgow and Clyde OOH Call Incident Report

Call number:	6302324	Receive Date:	29-Mar-2021 18:12
Patient's Name:	Stewart Mcfarlane	Gender:	M
Date of birth:	9-Jun-1971 (49 years)	Current Address:	32 Dalry Street
Address:	32 Dalry Street		Glasgow
	G32 9BL		G32 9BL
Return Contact No:			
Tel No:	07880 855579		07880 855579
Mobile No:		Call Origin:	
Priority:	Pr 4 Within 4 hrs	Calltype:	Attend PCEC
Received:	29-Mar-2021 18:12	Arrived PCC:	29-Mar-2021 20:19
Advised:	18:23	Cons End:	29-Mar-2021 21:27
Cons start:	29-Mar-2021 21:13		
Consulting Doctor:	Claire Davidson	Own doctor:	
CHI Number:	0906716470		

NHSD details:

Receptionist:

LOOKING YELLOW WORSENING 2 DAYS.

PCC4 PCEC within 4 Hrs

Clinical summary created by: Hannah Coldwells (Call Taker St) () [29/03/2021 18:24:58] Reason for call: LOOKING YELLOW WORSENING 2 DAYS. EYES LOOKING RED, D/O CRONIC KIDNEY DISEASE LAST WEEK. BACK PAIN. PAIN IN KNEES. PHONED GP TODAY BUT DIDNT GET THROUGH. WORSENING LETHARGIC. NO FEVER, NEW COUGH, LOSS/CHANGE SMELL OR TASTE. 29:03:2021 18:14:11 COLDWELLSH. IN CAR CRASH 6 WEEKS AGO THIS WHEN BACK PAIN GOT BAD. PAIN BENDING AND STANDING IN LOWER BACK. 29:03:2021 18:22:13 HUNTERG. YELLOW TINGE TO SKIN, 2 DAYS, WORSENING, BACK PAIN, LOWER, SINCE CAR ACCIDENT 6 WEEKS, WHITES OF EYE BLOOD SHOT AND YELLOW, NAUSEATED, TIRED, PAIN IN KNEES AND CALVES FOR 4 DAYS. PCEC 4 HRS PLEASE... Outcome: PCEC within 4 Hrs

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Consultation details:

History - Wife called NHS24 as felt Stewarts skin colour was yellow and was concerned.
 Stewart complains of feeling fatigued ++ - he hadn't noticed any changes to his skin colour but has been told by a couple of friends that he looked quite pale. Reports that he 'doesn't feel right'.
 In a car accident 6 weeks ago (van rolled, wearing seatbelt), seen at A&E in GRI then had CT scan which revealed single kidney (new diagnosis for him) and diagnosed recently as CKD stage 2 (NB I am unable to access previous results). Also started on atorvastatin 20mg. Since accident, gets intermittent pains in both knees (particularly at night) and lower back has been more painful. Ongoing issue since accident with left sided chest pain on deep inspiration (had this at time of CT). No SOB.
 Denies any nausea/vomiting. No weight loss/night sweats. Eating and drinking normally. BO - normal colour. Urine - normal colour, no blood/dysuria. Does complain longstanding issue with hesitency poor flow and nocturia, and did have some lower back pain predating car accident.
 Tells me he was going to go to GP for 'MOT' pre car accident because he wasn't feeling right even then.

SH: lives with wife. ex smoker (6 months ago, prev 10cpd), denies alcohol.

DH: cocodamol and atorvastatin

PMH: recently diagnosed CKD, single kidney, nil else remarkable

Examination - Normal skin tone/appearance. No scleral jaundice. Moist mucus membranes.

HS pure

Chest clear

- no chest wall tenderness

Abdo SNT

No stigmata of liver disease

Calves SNT

Knees - NAD

BP 120/83mmHg, p81, sats 98% RR 16

Urine dip - ++ blood, +protein

Diagnosis - Needs LFTs/U&Es rechecked ?derangement

NB LUTS + back pain + haematuria ?warrants referral

Treatment - To make appt with GP tomorrow for bloods to be checked

Note - ++blood and +protein in urine - will need rechecked by GP

Advised to stop statin in meantime in case causing adverse effects

Worsening advice - if feels more unwell overnight, to contact NHS24

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Followups:

GP Follow Up

Clinical Codes:

M2z.. Other skin/subcut.disease NOS

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Blood Sciences Biochemistry Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.21.4443645.G
Specimen Type	Urine
Date/Time Collected	09.03.21 / 15:08
Date/Time Received	10.03.21 / 11:49
Requested By	Christine Roy
GP Practice	46131
Date/Time Reported	11.03.21 / 11:27
Details	1st CKD Review

Results

Urine Albumin - Authorised on 11.03.21 at 11:24

Urine Albumin	9	mg/L	(<20)
U Alb/Creat Ratio	0.8	mg/mmol crea	(0.0-2.5)

Urine Protein - Authorised on 11.03.21 at 11:24

Urine volume (ml)	NA	mL	
Urine Creatinine	12.0	mmol/L	
Urine Protein	0.106	g/L	(<0.200)
Urine Protein/volume		g/volume	
U Protein:Creatinine	9	mg/mmol crea	(<20)

End of Report

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Blood Sciences Biochemistry Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.21.4468590.X
Specimen Type	Blood
Date/Time Collected	08.03.21 / 11:37
Date/Time Received	08.03.21 / 14:43
Requested By	Christine Roy
GP Practice	46131
Date/Time Reported	09.03.21 / 02:22
Details	1st CKD Review

Results

Glucose - Authorised on 09.03.21 at 02:20

Glucose 4.3 mmol/L (3.5-6.0)

Comments:

Non-fasting sample

End of Report

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Blood Sciences Biochemistry Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.21.4468591.L
Specimen Type	Blood
Date/Time Collected	08.03.21 / 11:37
Date/Time Received	08.03.21 / 14:45
Requested By	Christine Roy
GP Practice	46131
Date/Time Reported	09.03.21 / 03:52
Details	1st CKD Review

Results

Bone Profile - Authorised on 09.03.21 at 03:48

Calcium	2.37	mmol/L	(2.20-2.60)
Calcium (adjusted)	2.45	mmol/L	(2.20-2.60)
Phosphate	1.11	mmol/L	(0.80-1.50)
Albumin	40	g/L	(35-50)
Alkaline Phosphatase	90	U/L	(30-130)

Urea & Electrolytes - Authorised on 09.03.21 at 03:48

Sodium	137	mmol/L	(133-146)
Potassium	4.6	mmol/L	(3.5-5.3)
Chloride	103	mmol/L	(95-108)
Urea	5.6	mmol/L	(2.5-7.8)
Creatinine	61	umol/L	(40-130)
Estimated GFR	>60	ml/min	(>60)

Liver Function Tests - Authorised on 09.03.21 at 03:48

Total Bilirubin	6	umol/L	(<20)
ALT	37	U/L	(<50)
AST	27	U/L	(<40)
Alkaline Phosphatase	90	U/L	(30-130)
Albumin	40	g/L	(35-50)

Lipid profile - Authorised on 09.03.21 at 03:48

Cholesterol	4.7	mmol/L	
Triglycerides	2.0	mmol/L	(0.2-2.3)
HDL Cholesterol	0.9	mmol/L	
LDL-Cholest (calc'd)	2.9	mmol/L	
VLDL-Chol (calc'd)	0.9	mmol/L	
Chol/HDL ratio	5.2		

End of Report

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Blood Sciences Haematology Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.21.5909703.B
Specimen Type	Blood
Date/Time Collected	08.03.21 / 11:37
Date/Time Received	08.03.21 / 15:05
Requested By	Christine Roy
GP Practice	46131
Date/Time Reported	08.03.21 / 15:32
Details	1st CKD Review

Results

Full Blood Count - Authorised on 08.03.21 at 15:26

White Blood Count	7.3	$\times 10^9/l$	(4.0-10.0)
Red Cell Count	4.55	$\times 10^{12}/l$	(4.50-6.50)
Haemoglobin	140	g/l	(130-180)
Haematocrit	0.413	l/l	(0.400-0.540)
Mean Cell Volume	90.8	f1	(83.0-101.0)
MCH	30.8	pg	(27.0-32.0)
Platelet Count	+ 432	$\times 10^9/l$	(150-410)
Neutrophils	4.3	$\times 10^9/l$	(2.0-7.0)
Lymphocytes	2.1	$\times 10^9/l$	(1.1-5.0)
Monocytes	0.7	$\times 10^9/l$	(0.2-1.0)
Eosinophils	0.14	$\times 10^9/l$	(0.02-0.50)
Basophils	0.1	$\times 10^9/l$	(0.0-0.1)
Nucleated RBC	0.0	$\times 10^9/l$	

End of Report

**NHS Greater Glasgow and Clyde
Renal Services**

Stobhill ACH
Renal Dialysis Unit
Ground Floor
GLASGOW G21 3UW
0141 355 1677/8

BLUE TEAM



e-mail: ggc.renalservices@nhs.scot

Our Ref: gl904086.txt gl904086.txt CD/SB

Dictated: 26/02/2021
Typed: 26/02/2021

Stewart McFarlane
32 DALRY STREET, GLASGOW, G32 9BL

CHI number 0906716470
Date of birth 09/06/1971

Dr Carys Morrison
Crail Medical Practice
245 Tollcross Road
GLASGOW
G31 4UW

Dear Dr Morrison

Thank you for your referral letter regarding this 49 year old gentleman who was found to have a solitary left kidney following a road traffic accident.

I note that his CT with contrast showed an enlarged left kidney measuring 12 cm with the appearance of cross fused ectopia, no hydronephrosis and no abnormality of the solid left ureter. The right kidney was absent with no abnormality in the right renal bed and there was a solitary left renal artery rising from the aorta. It would therefore appear that he has a congenital renal agenesis on the right with a solitary left kidney with appropriate compensatory hypertrophy.

I note that he has well preserved renal function with a creatinine of 72 with an eGFR greater than 60. Blood pressure in 2015 was 126/88 and you comment his blood pressure was slightly elevated on arrival to A&E but settled with analgesia and remained within acceptable limits.

In summary therefore, he has a single functioning kidney with excellent renal function, no history of hypertension and has what appears to be renal agenesis on the right with appropriate compensatory hypertrophy on the left.

By definition, he has stage 1 / 2 CKD due to the structural renal abnormality. I do not think he requires renal out-patient review. Data from patients that donate kidneys as live transplant donors suggest there is an increase incidence of hypertension in the long term and a proportion can develop proteinuria. As a result it would seem reasonable for him to have an annual review in primary care to review his blood pressure, dipstick urinalysis and renal function. This would fit with CKD Guidelines. There would be an argument that if his parameters remain normal over a period of time then the frequency of this could be reduced to every couple of years.

I hope this information is of help and would be happy to discuss his case further as required.

Yours sincerely

Dr Chris Deighan

and 1 column. **XXXXXXXXXXXX** is a column

Consultant Nephrologist

THIRD PARTY COPY

NHS Confidential: Personal data about a patient

Renal Medicine
133 Balornock Road
Glasgow
G21 3UW

25/02/2021

Dr El Douglas
Crail Medical Practice
245 Tollcross Road
Glasgow
G31 4UW

Dear Dr El Douglas

Patient Name: Stewart McFarlane
CHI Number: 0906716470
Referral Date: 25/02/2021

Thank you for your referral.

No renal OP appt required. Full letter to follow

Yours sincerely

Dr Christopher Deighan

User ID Christopher Deighan

SCGC Opwl Rem Ref Hosp Req V1

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Covid19 Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 DALRY STREET GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	V.21.2065594.K
Specimen Type	THROAT AND NOSE SWAB
Date/Time Collected	18.02.21 / 20:52
Date/Time Received	19.02.21 / 10:05
Requested By	Dr Colin Bell
GP Practice	46131
Date/Time Reported	19.02.21 / 14:12
Details	admission

Results

2019 NCoV - Authorised on 19.02.21 at 14:10

2019 NCoV Not detected

Comments:

The laboratory will discard negative SARS-CoV-2 PCR specimens after one week.
Tests NOT included in UKAS Accreditation (9319) Scope.
This is a THROAT and NOSE SWAB sample.

End of Report

NHS Confidential: Personal data about a patient

McFarlane Stewart

CHI: 0906716470

Emergency Attendance Letter

Emergency Department
Glasgow Royal Infirmary
Alexandra Parade
Glasgow
Lanarkshire
G31 2ER

Dept. Contact Details:

Tel:

Fax:

Email:

Date Completed: 18/02/2021

Consultant: Dr Colin Bell

El Douglas
Craig Medical Practice
245 Tollicross Road
Glasgow
Glasgow
G31 4UW

Dear El Douglas

Re: **McFarlane Stewart**
32 DALRY STREET
Glasgow G32 9BL

DOB: 09/06/1971

CHI: 0906716470

Attended on: 18/02/2021 at 17:50 hrs.

Departed on: 18/02/2021 at 21:45 hrs.

Discharge Type: 01a - Discharge with no follow up

Destination: Private residence

Previous ED Attendance in last 12 months: 0

Presenting complaint

RTC, chest pain - NO FT

Nursing Assessment:

RTC. News. Passenger in RTC 5/7 Ago. travelling approx. 60mph, van hit ice and flipped onto side. no airbag deployment. R sided neck and Chest pain since. CP radiating into back. Denies COVID19 symptoms. cat 2 due to MCI.

Investigations in ED:

1. Urea and Electrolytes
4. LFT
7. D - Dimer

2. Troponin I hs
5. Full Blood Count
8. Coagulation screen

3. CRP
6. XR Chest
9. CT Aorta thoracic with contrast
12. SARS-CoV-2 (ED/IP use) (COVID-19)

10. CT Aorta thoracic

11. SARS-CoV-2 (ED/IP use) (COVID-19)

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McFarlane Stewart

CHI: 0906716470

Diagnosis:

Diagnosis	Side	Site
Chest Pain, Unspecified		

Procedures: **None**Immunisations: **None**Dispensed Medication: **None**

Clinician Notes:

Attended with chest pain following RTC. Troponin and D-Dimer normal. ECG showed no ST elevation. CT aorta performed due to trauma history and showed normal aorta and no cause for pain. Incidental finding of solitary left kidney. Patient had normal U&E and no known FH of renal disease. We would ask if referral to renal could be made to ask if they would want any follow up or if any routine monitoring is required with regards to this. His pain settled and he was well in department so he was discharged with strict worsening statement.

Followup :

Highly sensitive: N

Consent for sharing withheld: N

Yours sincerely,
Claire Marletta
Doctor

Copies to:

1. El Douglas (GP)

School Address:

WIS Confidential: Personal data about a patient

Blood Sciences Haematology Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.21.5672751.S
Specimen Type	Blood
Date/Time Collected	12.02.21 / 15:56
Date/Time Received	12.02.21 / 16:49
Requested By	Dr Emma Douglas
GP Practice	46131
Date/Time Reported	12.02.21 / 19:37
Details	tatt, daily headache 6 we...

Results

Full Blood Count - Authorised on 12.02.21 at 18:55

White Blood Count	7.1	$\times 10^9/l$	(4.0-10.0)
Red Cell Count	4.58	$\times 10^{12}/l$	(4.50-6.50)
Haemoglobin	138	g/l	(130-180)
Haematocrit	0.400	l/l	(0.400-0.540)
Mean Cell Volume	87.3	fL	(83.0-101.0)
MCH	30.1	pg	(27.0-32.0)
Platelet Count	+ 466	$\times 10^9/l$	(150-410)
Neutrophils	3.7	$\times 10^9/l$	(2.0-7.0)
Lymphocytes	2.3	$\times 10^9/l$	(1.1-5.0)
Monocytes	0.8	$\times 10^9/l$	(0.2-1.0)
Eosinophils	0.21	$\times 10^9/l$	(0.02-0.50)
Basophils	0.0	$\times 10^9/l$	(0.0-0.1)
Nucleated RBC	0.0	$\times 10^9/l$	

ESR - Authorised on 12.02.21 at 19:34

ESR	+ 21	mm/hr	(0-10)
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End of Report

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Blood Sciences Biochemistry Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.21.4416408.S
Specimen Type	Blood
Date/Time Collected	12.02.21 / 15:56
Date/Time Received	12.02.21 / 18:12
Requested By	Dr Emma Douglas
GP Practice	46131
Date/Time Reported	12.02.21 / 19:42
Details	tatt, daily headache 6 we...

Results

Bone Profile - Authorised on 12.02.21 at 18:52

Calcium	2.34	mmol/L	(2.20-2.60)
Calcium (adjusted)	2.30	mmol/L	(2.20-2.60)
Phosphate	0.96	mmol/L	(0.80-1.50)
Albumin	42	g/L	(35-50)
Alkaline Phosphatase	74	U/L	(30-130)

C-reactive Protein - Authorised on 12.02.21 at 18:52

C Reactive Protein	5	mg/L	(0-10)
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Urea & Electrolytes - Authorised on 12.02.21 at 18:52

Sodium	139	mmol/L	(133-146)
Potassium	4.2	mmol/L	(3.5-5.3)
Chloride	105	mmol/L	(95-108)
Urea	6.4	mmol/L	(2.5-7.9)
Creatinine	67	umol/L	(40-130)
Estimated GFR	>60	ml/min	(>60)

Liver Function Tests - Authorised on 12.02.21 at 18:52

Total Bilirubin	5	umol/L	(<20)
ALT	16	U/L	(<50)
AST	17	U/L	(<40)
Alkaline Phosphatase	74	U/L	(30-130)
Albumin	42	g/L	(35-50)

Chol/Triglyceride - Authorised on 12.02.21 at 18:52

Cholesterol	5.5	mmol/L	
Triglycerides	2.1	mmol/L	(0.2-2.3)

Thyroid funct test - Authorised on 12.02.21 at 19:40

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Blood Sciences Biochemistry Report			
TSH	2.07	mU/L	(0.35-5.00)
Free T4	12.8	pmol/L	(9.0-21.0)
Total T3		nmol/L	

End of Report

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Glasgow Hospital
25 Beaconsfield Road
Glasgow
G12 0PJ

Site Code : NT240

☎ 0141 334 9441
☎ 0141 339 1352
nuffieldhealth.com

IMAGING REPORT

PRIVATE AND CONFIDENTIAL

AITKEN I
Crail Medical Practice
245 Tollcross Road
Glasgow
G31 4UW

PATIENT DETAILS:

Name: Mr Stewart McFarlane
Address: 32 DALRY STREET, GLASGOW, G32 9BL
Date of Birth: 09-Jun-1971
Hospital No GL410718

EXAMINATION DETAILS:

Examination: US Testes
Accession No: NT203814394
Examination Date: 02-May-2019
Report Date: 02-May-2019
Secretary: C3649871

Clinical History : Left testicular lump.

US Testes: (reported 02-May-2019)

The testicles are of normal size and appearances. Perfusion is symmetrical on colour Doppler. The right epididymis appears unremarkable. Left epididymis is slightly lumpy but no discrete mass lesion or sinister abnormality is seen. No evidence of a cyst demonstrated. No evidence of varicocoele seen.

Reported by: (GL) Dr Fong Lau C3649871 (Consultant Radiologist)

Report Verified by: (GL) Dr Fong Lau (02-May-2019)

Page 1 of 1

Nuffield Health, Epson Gateway, Ashley Avenue, Epson, Surrey, KT18 5AL
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Registered in England Number: 576970, VAT No GB 544 29 11 37
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NOTE: Confidentiality: Please do not discuss content

Glasgow Royal Infirmary: Diagnostic Imaging Report		Page 1 of 1
MCFARLANE, STEWART 32 DALRY STREET, GLASGOW, LANARKSHIRE, G32 9BL Ref. Locn. : GP PRACTICE Referrer : Dr Ian Aitken		DoB : 09-Jun-1971 CHI. No. : 0906716470 CRIS No. : 5563350 Curr Ward: G405HEDMIU
VERIFIED Verified By: Tina Wilson (locum Sonographer) 27-May-2019 1218. Clinical History : ?left testicular lump. smooth cyst like. also tired poor appte		
US Testes : Both testes are normal in size, shape and echo texture. The right measures 4.6 cm and the left measures 4.6 cm. There is a 9 mm cyst within the left epididymal head. Also noted is a small 2 mm cyst in the mid left testis anteriorly. A small hydrocele and slightly dilated veins are seen on the left. There is a 7 mm cyst in the right epididymal head. Right epididymal body and tail are not well visualised. Examination reported by Tina Wilson, locum sonographer.		
Event Number : E-33632675  Examination Date : 27-May-2019 Ref. Source : Dr Ian Aitken, 245 Tollcross Road, Glasgow, G31 4UW Examinations : US Testes		

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NHS Greater Glasgow and Clyde OOH Call Incident Report

Call number:	6000304	Receive Date:	28-Mar-2020 14:00
Patient's Name:	Stewart McFarlane	Gender:	M
Date of birth:	9-Jun-1971 (48 years)	Current Address:	32 Dalry Street
Address:	32 Dalry Street		Glasgow
	G32 9BL		G32 9BL
Return Contact No:			
Tel No:	07504 247668		07504 247668
Mobile No:			
Priority:	Pr 4 Within 4 hrs	Call Origin:	
Received:	28-Mar-2020 14:00	Calltype:	Home Visit
Advised:	14:15	Arrived PCC:	
Cons start:	28-Mar-2020 15:17	Cons End:	28-Mar-2020 15:50
Consulting Doctor:	Deirdre Lynch	Own doctor:	
CHI Number:	0906716470		

NHSD details:

Receptionist:

Possible Coronavirus : COVID19

DPP4 Dr to phone patient within 4 Hrs

Clinical summary created by: Caroline Spruce (Call Taker Si) () [28/03/2020

14:15:18] Reason for call: Possible Coronavirus : COVID19 NO FEVER COUGH

10 DAYS SOB 10 DAYS FEELS LIKE GASPING FOR AIR, NO ENERGY,

WENT INTO ISOLATION 19TH MARCH Confirmed Symptom(s): COVID 19

Assessment 28:03:2020 14:18:27 SPRUCEC., DW SCN N REID/K BESWICK

COUGH 10 DAYS, SOB 10 DAYS, ABLE TO SPEAK IN SENTENCES - SOB

WHEN LYING DOWN, BREATHING MUCH FASTER THAN NORMAL, TOO

SOB TO LEAVE HOUSE, PAIN WHEN COUGHING, NO PHELG, ADVISED

TO SPEAK TO GP 4 PLEASE.. Outcome: Dr to phone patient within 4 Hrs

Consultation details:

History - 48 yr old man ongoing dry cough x 9 days has been SI no sputum cough worse lying flat -no sob during the day worse at night -assoc post nasal

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drip -burning sensation in chest -vaping ex smoker -no other med hx of note -wife and child SI in another house as they have asthma -tried to call nhs 24 on thurs evening with ongoing cough - describes episodic sob at times when walks a bit and when gets into coughing fits

overall feels no worse but no better since mid week eating and drinking has bird Budgie in house for many years

nkda
 Examination - looks well
 talking in sentences rr 14 /min
 hr 80
 spo2 98
 temp 36.7 had pcm at 8 am(8 hrs ago) no hx of ongoing fever
 normal pattern respiration -dry barking cough intermittently
 gd ae all zones no creps
 Diagnosis - URTI /rti sx -likely COVID no signs of pneumonia or pneumonitis on exam -suspect element reactive airways -cough worse at night
 cover po anitbx as sx ongoing doxycycline 200 mg stat then 100 mg od x 5 days /pred 30 mg od x 4 days /trial of nasal steroid Beconase for post nasal drip -aware should be improving over next 48 hrs -of worse like ongoing persistent SOB feels /unwell then needs review -strong worsening advice
 Treatment - prednisolone 35 mg stat
 doxycycline 200 mg stat

Followups:
 GP Follow Up

Clinical Codes:
 R0062 [D]Fever NOS

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Blood Sciences Biochemistry Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.21.4416404.M
Specimen Type	Blood
Date/Time Collected	12.02.21 / 15:56
Date/Time Received	12.02.21 / 18:13
Requested By	Dr Emma Douglas
GP Practice	46131
Date/Time Reported	12.02.21 / 18:52
Details	fast, daily headache 6 we...

Results

Glucose - Authorised on 12.02.21 at 18:46

Glucose 4.6 mmol/L (3.5-6.0)

Comments:

Non-fasting sample

End of Report

With Confidentiality: Personal data about a patient



CRAIL MEDICAL PRACTICE 245 TOLL CROSS ROAD, GLASGOW, G31 4UW
Consultation by appointment

Dr I.C. Aitken
Dr E. Douglas
Dr W. Killin

Tel: 0141 554 3199
Fax 0141 551 9950

Email: GG-UHB.gp46131clinical@nhs.net

pt to collect

Private Referral

Our Ref – ICA/LM0906710470

26th April 2019

To whom it may concern

Re – **Stewart McFarlane, 32 Dairy Street, Glasgow, G32 9BL**
D.O.B. 09.06.71

Dear Doctor,

The above gentleman has noticed a left testicular lump. On examination of him I can feel a smooth cyst like lump which I am not sure is attached to the testicle or separate from it. I would appreciate if he could have an ultrasound scan.

Many Thanks

Yours sincerely

Doctor Aitken



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Blood Sciences Haematology Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.19.6014327.G
Specimen Type	Blood
Date/Time Collected	23.04.19 / 09:17
Date/Time Received	23.04.19 / 14:38
Requested By	Dr Ian Aitken
GP Practice	46131
Date/Time Reported	23.04.19 / 14:53
Details	?left testicular lump. sm...

Results

Authorised on 23.04.19 at 14:50

White Blood Count	4.6	$\times 10^9/l$	(4.0-10.0)
Red Cell Count	- 4.48	$\times 10^{12}/l$	(4.50-6.50)
Haemoglobin	138	g/l	(130-180)
Haematocrit	0.415	l/l	(0.400-0.540)
Mean Cell Volume	92.6	fL	(83.0-101.0)
MCH	30.8	pg	(27.0-32.0)
Platelet Count	+ 442	$\times 10^9/l$	(150-410)
Neutrophils	2.5	$\times 10^9/l$	(2.0-7.0)
Lymphocytes	1.4	$\times 10^9/l$	(1.1-5.0)
Monocytes	0.3	$\times 10^9/l$	(0.2-1.0)
Eosinophils	0.14	$\times 10^9/l$	(0.02-0.50)
Basophils	0.1	$\times 10^9/l$	(0.0-0.1)
Nucleated RBC	0.0	$\times 10^9/l$	

End of Results

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Blood Sciences Biochemistry Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.19.4601288.F
Specimen Type	Blood
Date/Time Collected	23.04.19 / 09:17
Date/Time Received	23.04.19 / 14:02
Requested By	Dr Ian Aitken
GP Practice	46131
Date/Time Reported	23.04.19 / 15:13
Details	?left testicular lump. sm...

Results

Authorised on 23.04.19 at 15:09

Glucose 4.9 mmol/L (3.5-6.0)

Comments:

Non-fasting sample

End of Results

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Blood Sciences Biochemistry Report	
Patient Details	
Surname	MCFARLANE
Forename	STEWART
CHI	0906716470
Date of birth	09.06.1971
Sex	Male
Address	32 Dalry Street GLASGOW GLASGOW LANARKSH G32 9BL
Specimen Details	
Specimen Number	B.19.4601215.T
Specimen Type	Blood
Date/Time Collected	23.04.19 / 09:17
Date/Time Received	23.04.19 / 13:56
Requested By	Dr Ian Aitken
GP Practice	46131
Date/Time Reported	23.04.19 / 15:13
Details	?left testicular lump. sm...

Results

Authorised on 23.04.19 at 14:45

Calcium	2.47	mmol/L	(2.20-2.60)
Calcium (adjusted)	2.44	mmol/L	(2.20-2.60)
Phosphate	0.99	mmol/L	(0.80-1.50)
Albumin	41	g/L	(35-50)
Alkaline Phosphatase	66	U/L	(30-130)

Authorised on 23.04.19 at 14:45

C Reactive Protein	4	mg/L	(0-10)
--------------------	---	------	----------

Authorised on 23.04.19 at 14:45

Sodium	140	mmol/L	(133-146)
Potassium	4.6	mmol/L	(3.5-5.3)
Chloride	104	mmol/L	(95-108)
Urea	4.2	mmol/L	(2.5-7.8)
Creatinine	70	umol/L	(40-130)
Estimated GFR	>60	ml/min	(>60)

Authorised on 23.04.19 at 14:45

Total Bilirubin	8	umol/L	(<20)
ALT	14	U/L	(<50)
AST	15	U/L	(<40)
Alkaline Phosphatase	66	U/L	(30-130)
Albumin	41	g/L	(35-50)

Comments:

WIS Confidential: Personal data about a patient

Blood Sciences Biochemistry Report

Please note change in Abbott Total Bilirubin method from 18/01/18

Authorised on 23.04.19 at 15:09

TSH	1.53	mU/L	(0.35-5.00)
Free T4	12.8	pmol/L	(9.0-21.0)
Total T3		nmol/L	

End of Results

THIRD PARTY COPY

NHS Confidential: Personal data about a patient

McFarlane Stewart

CHI: 0906716470

Emergency Attendance Letter

Emergency Department
Queen Elizabeth University Hospital
1345 Govan Road
Glasgow
Lanarkshire
G51 4TF

Dept. Contact Details:
Tel: 0141 452 2930/2931
Fax: 0141 201 2804
Email:

Date Completed: 18/07/2017

Consultant: Dr Katy McCarthy

El Douglas
Crail Medical Practice
245 Tollicross Road
Glasgow
Glasgow
G31 4UW

Dear El Douglas

Re: **McFarlane Stewart**
32 DALRY STREET
Glasgow G32 9BL

DOB: 09/06/1971

CHI: 0906716470

Attended on: 18/07/2017 at 01:19 hrs.

Departed on: at hrs.

Discharge Type: 01a - Discharge with no follow up

Destination: Private residence

Previous ED Attendance in last 12 months: 0

Presenting complaint
Hand Injury

Nursing Assessment:

Staff member on duty...crush inj to L hand with heavy linen trolley. Minor wound mid palm...BT dorsal aspect 3rd and 4th MC heads/neck...4th finger

Investigations in ED:

1. XR Hand Lt

NHS Confidential: Personal data about a patient

McFarlane Stewart

CHI: 0906716470

Diagnosis:

Diagnosis	Side	Site
Open wound of hand		

Procedures: **None**Immunisations: **None**Dispensed Medication: **None**

Clinician Notes:

crush Injury with small area shin loss to right palm. nil on xray Dressing and splint

Followup :

Highly sensitive: N

Consent for sharing withheld: N

Yours sincerely,
Cieran McKiernan
Consultant

Copies to:

1, El Douglas (GP)

School Address:

NHS Confidential: Personal data about a patient

ACCIDENT & EMERGENCY DEPARTMENT VICTORIA INFIRMARY				NHS Glasgow and Clyde																			
PAC SUF FOF ADT	SURNAME:	MCFARLANE		DOB: 09/06/71	AGE: 39	SEX: M	A/E Number: AE0077536/10																
	FORENAME:	STEWART		OCCUPATION:			CHI Number: 0906716470																
	ADDRESS:	32 DALRY STREET					UNIT Number: 8001814294																
	GLASGOW						ARRIVAL DATE: 13/09/10																
	POSTCODE:	G32 9BL		TEL: 07768275967			ARRIVAL TIME: 1705																
							MODE: W																
							REFERRAL BY: SELF																
POS G.P. ADD	GP Name:	GAIL GM ADDIS		PRESENTING COMPLAINT: KNEE INJ																			
	ADDRESS:	245 TOLLCROSS ROAD		INCIDENT TYPE: INJ																			
	G31 4UW			INCIDENT LOCATION: OUT																			
	CODE: 46131 1	TEL: 0141 554 3199																					
COD GP DISCHARGE LETTER DIAGNOSIS <i>Strain medial collateral left knee</i> INVESTIGATIONS X-RAYS TREATMENT <i>RICG</i> <i>Analgesia</i> CODE																							
PLEASE PRESCRIBE TETANUS PROPHYLAXIS / IMMUNOGLOBULIN / ALREADY IMMUNISED. PLEASE COMPLETE DOCTOR'S NAME (PRINT) <i>Chris Gibson</i> CODE <i>57A Gench</i> (SIGNATURE) <i>[Signature]</i> DISCHARGE TIME <i>1816</i>																							
FOLLOW UP NOT ARRANGED / ARRANGED DATE TIME OUT PATIENTS (PLEASE CIRCLE) ADMISSION <table border="0"> <tr> <td>A&E CLINIC</td> <td>ORTHOPAEDIC</td> <td>TO WARD</td> <td></td> </tr> <tr> <td>SURGERY</td> <td>MEDICINE</td> <td>MEDICINE</td> <td>SURGERY</td> </tr> <tr> <td>EYE</td> <td>E.N.T.</td> <td>ORTHOPAEDIC</td> <td>E.N.T.</td> </tr> <tr> <td>GYNAECOLOGY</td> <td>OTHER</td> <td>GYNAECOLOGY</td> <td>OTHER</td> </tr> </table>								A&E CLINIC	ORTHOPAEDIC	TO WARD		SURGERY	MEDICINE	MEDICINE	SURGERY	EYE	E.N.T.	ORTHOPAEDIC	E.N.T.	GYNAECOLOGY	OTHER	GYNAECOLOGY	OTHER
A&E CLINIC	ORTHOPAEDIC	TO WARD																					
SURGERY	MEDICINE	MEDICINE	SURGERY																				
EYE	E.N.T.	ORTHOPAEDIC	E.N.T.																				
GYNAECOLOGY	OTHER	GYNAECOLOGY	OTHER																				

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Acute Services Division

Emergency Care and
Medical Services Directorate

EMERGENCY DEPARTMENT
VICTORIA INFIRMARY
LANGSIDE ROAD
GLASGOW G42 8TY

NHS
Greater Glasgow
and Clyde

Enquiries to: Dr J Gordon
Direct Line: 0141 201 5443
Fax: 0141 201 5947
Email: jagordon@nhs.uk

Ref: JG/IW/761/10

2ND February 2010

Dr G Addis
245 Tollicross Road
Glasgow G32 8AZ

Dear Dr Addis

**STEWART MCFARLANE (DOB 09.06.71)
32 DALRY STREET, GLASGOW G32 9BL**

Further to Dr Thomson's letter this 38 year old failed to attend for review of an elbow injury. I assume his symptoms have settled and I have discharged him.

Yours sincerely



J GORDON FRCS MSc FCEM
Consultant in Emergency Medicine

Delivering better health

www.nhsggc.org.uk

40372

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Acute Services Division

**Emergency Care and
Medical Services Directorate**

**EMERGENCY DEPARTMENT
VICTORIA INFIRMARY
LANGSIDE ROAD
GLASGOW G42 9TY**

NHS
Greater Glasgow
and Clyde

Enquiries to: Mr I Anderson
Direct Line: 0141 201 5084
Fax: 0141 201 5947
E-mail: Carole.O'Byrne@gvic.scot.nhs.uk

Ref: KT/CB/AE0000761/10

Dict: 18 January 2010
Typ: 18 January 2010

Dr G Addis
245 Tollcross Road
Glasgow G31 4UW

Dear Dr Addis

STEWART MCFARLANE, 32 DALRY STREET, GLASGOW, G32 9BL
D.O.B. 09.06.71

Attended: 03.01.10

Diagnosis: Clinical fracture to his left radial head.

Treatment: Polysling.

Review: This 38 year old porter is still having pain on extension and supination. He has a full range of movement but I have advised him to avoid any heavy lifting or strenuous exercise and we will see him for final review in 2 weeks' time.

Yours sincerely



K THOMSON
Consultant in Emergency Medicine

Delivering better health

www.nhsggc.org.uk

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ACCIDENT & EMERGENCY DEPARTMENT



SURNAME: MCFARLANE	DOB: 09/06/71 AGE: 38 SEX: M	A/R Number: AE0000761/10
FORENAME: STEWART	OCCUPATION:	CHI Number: 0906716470
ADDRESS: 32 DALRY STREET		UNIT Number: 6088117530
GLASGOW		ARRIVAL DATE: 03/01/10
		ARRIVAL TIME: 1438
		MODE: OWN
POSTCODE: G32 9BL	TEL: 07768275967	REFERRAL BY: SELF

GP Name: GAIL GM ADDIS	PRESENTING COMPLAINT: ARM INJ
ADDRESS: 245 TOLLCROSS ROAD	INCIDENT TYPE: INJ
G31 4UW	INCIDENT LOCATION: OUT
CODE: 46131 1	TEL: 0141 554 3199

GP DISCHARGE LETTER

DIAGNOSIS Left elbow injury

INVESTIGATIONS

X-RAYS No fracture seen but ant & post fat pads

TREATMENT Polysling

Analgesia

eg Mv 200

CODE

PLEASE PRESCRIBE

TETANUS PROPHYLAXIS / IMMUNOGLOBULIN / ALREADY IMMUNISED. PLEASE COMPLETE

DOCTOR'S NAME (PRINT) F. RIZMC CODE STR RIZ

(SIGNATURE) [Signature] DISCHARGE TIME 16:30

FOLLOW UP NOT ARRANGED / ARRANGED DATE		TIME	
OUT PATIENTS (PLEASE CIRCLE)		ADMISSION	
A&E CLINIC	ORTHOPAEDIC	TO WARD	
SURGERY	MEDICINE	MEDICINE	SURGERY
EYE	E.N.T.	ORTHOPAEDIC	E.N.T.
GYNAECOLOGY	OTHER	GYNAECOLOGY	OTHER

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South Glasgow Hospitals
Southern General Hospital, Glasgow G51 4TF. Tel. 0141 201 1100

Part I Discharge Letter and Medicine Prescription Form - Confidential Ref No: 118542

NHS
Create, Connect and Care

Dear Doctor
Surgery: _____

Ward: 62 Tel: _____

Consultant: MALCOLM
Specialty: MAXILLOFACIAL

Named Nurse: _____

Admission date: 1/1/09

Mode of admission: Emergency

Source of admission: _____

Discharge date: 4/9/09

Follow-up arrangements
Clinic appointment made: Yes ☐ No ☐ To follow ☐

Clinic name: _____

Date: _____

Non-childproof containers required: Yes ☐ No ☐

Medicine compliance aids required: Yes ☐ No ☐

Specify: _____

Other information: G.D.P. to remove 15 retained root.

Reason for admission, treatment, diagnosis, investigations, operations, complications:
Abscess related to 15 retained root.
Incised & drained

MEDICINE	Dosage form	Dose	Times for administration										Recommended duration of treatment after discharge	New Drug	New Dose	Number of days supply	Dispensing Details (Pharmacy only)
			am	m	p	pm	bed	Other	times	times	times	times					
COROSOL	MW	10m	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	7 days				
Amoxicillin	PO	250mg	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	5 days				
Metronidazole	PO	400mg	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	5 days				

Medicines discontinued: _____ Reason (if known) e.g. side effects: _____ Clinical Pharmacy check: All known drug sensitivity / adverse reactions: _____

Dispensed by: R. H. Date: 4/9/09
Checked by: _____

WARD USE ONLY
Med. rec. on ward by: _____
Issued by: _____ Date: _____
Signature of recipient: _____

Doctor's name: R. H. Signature: R. H. Date: 4/9/09
Doctor's grade: SHO Page number: 7666 Number of prescription sheets at discharge: _____

While copy - G.P. Pink copy - Case notes Blue copy - Pharmacy White copy - Patient

If you have any problems after discharge, please contact the Ward or your G.P.

NHS Confidential: Personal data about a patient



CRAIL MEDICAL PRACTICE 245 TOLL CROSS ROAD, GLASGOW, G31 4UW

Consultation by appointment

Dr H.S. Bhachu

Dr I.C. Aitken

Dr G.M. Addis

Tel: 0141 554 3199

0141 556 2696

Fax 0141 551 9950

Email Kathleen.diamond@nhs.net

05/08/09

Stewart McFarlane
32 Dairy St
Glasgow
G32 9BL

Mr McFarlane,

We tried to contact you via the following number: 778.6744 but we didn't manage to reach you. Just to let you know that you should contact the surgery as there a prescription ready for you to pick up.

Yours sincerely
G.M. Addis



NHS Confidential: Personal data about a patient

ACCIDENT & EMERGENCY DEPARTMENT		NHS
SURNAME: MCFARLANE DOB: 09/06/71 AGE: 38 SEX: M A/E Number: AE0068551/09 FORENAME: STUART OCCUPATION: ADDRESS: 32 DALRY STREET GLASGOW POSTCODE: G32 9BL TEL:		UNIT Number: UNIT Number: 8088117530 ARRIVAL DATE: 02/08/09 ARRIVAL TIME: 0623 MODE: OWN REFERRAL BY: SELF
GP Name: HARJINDER HS BHACHU ADDRESS: 245 TOLL CROSS ROAD G31 4UW CODE: 4613111 TEL: 0141 554 3199		PRESENTING COMPLAINT: EYE PROB INCIDENT TYPE: INJ INCIDENT LOCATION: INS
(BLOCK LE SURNAM) FOREN/ ADDRESS POST C G.P. NAME ADDRESS:		
CODE TEL		
GP DISCHARGE LETTER DIAGNOSIS <u>2. IIRMS</u> INVESTIGATIONS		
• X-RAYS TREATMENT <u>VOLTAZOL + CILCOAMPENICIL DOORS TO CONTACT IF FURTHER PROBLEMS.</u>		
CODE CODE		
PLEASE PRESCRIBE TETANUS PROPHYLAXIS / IMMUNOGLOBULIN / ALREADY IMMUNISED. PLEASE COMPLETE DOCTOR'S NAME (PRINT) <u>H. BHACHU</u> CODE <u>h2. feife</u> (SIGNATURE) <u>[Signature]</u> DISCHARGE TIME <u>0740</u>		
FOLLOW UP NOT ARRANGED / ARRANGED DATE TIME		
OUT PATIENTS (PLEASE CIRCLE) ADMISSION		
A&E CLINIC	ORTHOPAEDIC	TO WARD
SURGERY	MEDICINE	MEDICINE SURGERY
EYE	E.N.T.	ORTHOPAEDIC E.N.T.
GYNAECOLOGY	OTHER	GYNAECOLOGY OTHER

NHS Confidential: Personal data about a patient

Emergency Department
Glasgow Royal Infirmary
84 Castle Street
Glasgow

Dr Addis
245 Tollicross Road
Glasgow

G31 4UW

22 November, 2008

Dear Dr Addis,

Re. STEWART MCFARLANE, 32 DALRY STREET, GLASGOW, G32 9BL
Date of Birth 09.06.71 Hospital Number: 20993839X CHI Number: 0906716470

Your patient attended Glasgow Royal Infirmary on the 21 NOV 2008 at 19.22 pm.

The presenting complaint
was:

BIT BY SNAKE

Triage
Information:

Nil

The following investigations were carried
out:

Nil

The A&E diagnosis
was:

** Injury ** - Bites/Stings - Insect/Animal - Upper Limb Left -
Hand

The following treatment was
given:

Nil

At the conclusion of treatment the patient
was:

Discharged

Follow-
up:

Discharged

Additional
Information:

Nil

Yours sincerely,

David McGlynn
Emergency Nurse Practitioner

Consultants

NHS Confidential: Personal data about a patient

BUTTERBIGGINS MEDICAL CENTRE

Dr S.H. Goldberg
Dr D.L. Hay
Dr S.A. Sanaghan



134 Butterbiggin's Road
Glasgow G42 7AF
Tele 423 1398
Fax 433 2469

14 March 2008

Our Ref: SG/AG

Dr I Aitken
Crail Medical Practice
245 Tollcross Road
Glasgow
G3 1 4UW

Dear Dr Aitken

Re: Debra Milligan - DOB 08/04/1980
Stewart McFarlane - DOB 09.06.71

Thank you for your letter regarding Stewart McFarlane partner of patient Debra Milligan.

We have a letter from the Gynaecologist dated the 27th December 2007 which states that his semen analysis admitted to the Western Infirmary on the 11th December has shown a sperm count of 1 million per ml with overall progression of 60%. It was noted that this is an abnormal result and he was asked to submit a further sample for semen analysis. The next letter, again from the Gynaecology Clinic, dated 28th February 2008 doesn't give the actual result but just say both show low volume density motility.

I haven't forwarded copies of these letters because they are actually in Debra Milligan's name and I would need her consent to send them to yourself. If you still feel you would like copies of the actual letters please let me know and I will write to Debra for her consent and forward them to you.

Yours sincerely

Dr S Goldberg

NHS Confidential: Personal data about a patient

Emergency Department
Glasgow Royal Infirmary
84 Castle Street
Glasgow

Dr Addis
245 Tollcross Road
Glasgow

G31 4UW

26 October, 2007

Dear Dr Addis,

Re. STEWART MCFARLANE, 32 DALRY STREET, GLASGOW, G32 9BL
Date of Birth 09.06.71 Hospital Number: 20993839X CHI Number: 0906716470

Your patient attended Glasgow Royal Infirmary on the 25 OCT 2007 at 19:46 pm.

The presenting complaint
was:

EYE PROBLEMS

Triage
Information:

Blurred Vision Since Waking 4/7 Ago. Today Now Very
Bloodshot. Denise Hx Trauma. Feels Like He Has "Migrane"
in R Eye.

The following investigations were carried
out:

Nil

The A&E diagnosis
was:

Eye - Conjunctivitis

The following treatment was
given:

Nil

At the conclusion of treatment the patient
was:

Discharged

Follow-
up:

Discharged

Additional
Information:

right eye conjunctivitis, no ulcers or FB visible on slit lamp
examination after fluorescein. given chloramphenicol eye
ointment and eye patch.

Yours sincerely,

Rohit Gupta
Doctor

Consultants

NHS Confidential: Personal data about a patient

Emergency Department
Glasgow Royal Infirmary
84 Castle Street
Glasgow

Dr Addis
245 Tollcross Road
Glasgow

G31 4UW

14 March, 2007

Dear Dr Addis,

Re. STEWART MCFARLANE, 2/2 5 Causewayside Street, GLASGOW, G32 8LT
Date of Birth 09.06.71 Hospital Number: 20993839X CHI Number: 0906716470

Your patient attended Glasgow Royal Infirmary on the 13 MAR 2007 at 09:19 am.

The presenting complaint was: **LEG PAIN**

Triage
Information: **Nil**

The following investigations were carried
out: **Nil**

The A&E diagnosis was: **** Injury ** - Muscle Injury - Hamstring - Right**

The following treatment was
given: **Nil**

At the conclusion of treatment the patient was: **Discharged To Care Of Own Gp**

Follow-
up: **General Practitioner**

Additional
Information: **Nil**

Yours sincerely,

Santhosh Keshavamurthy
Emergency Department Doctor

Consultants:

NHS Confidential: Personal data about a patient

WEST GLASGOW HOSP. UNIV. NHS TRUST
DEPT. OF CYTOLOGY. SEMINOLOGY REPORT.

Lab No: S, 06.0004985

Name : MCFARLANE STEWART
Partner of:

DOB: 09.06.71
CHI No: 0906716470

Hosp No: 0906716470

Sender: General Practice
Cons : Not given or listed

GP: DR AITKEN
245 TOLL CROSS RD

Specimen : SEMINAL FLUID SUB FERTILITY
Date taken : 11.12.06
Date rec'd : 12.12.06

*****RESULT*****

Time since collection -

Volume 2 ml pH: 8.5

Viscosity NORMAL

Motility:

a) Excellent progression 40 %

b) Slow progression 20

c) Non progression 10

d) Immobile 30

18 DEC 2006

Morphology:

Normal - %

Head defects -

Neck & Mid Piece defects -

Tail defects -

Cytoplasmic droplets -

Count 1 Millions per ml

Date reported: 13.12.06

Screener: NXC

Checker: SXS

402 Confidential: Personal data about a patient

SURNAME (BLOCK LETTERS)		TITLE		SEX		OCCUPATION	
McFARLANE				MALE			
FORENAMES (BLOCK LETTERS)		DATE OF BIRTH		SINGLE		N.H.S. NUMBER	
STEWART		09-06-71		☐			
				☐			
				☐			
				☐			
ALLERGIES				SPECIAL HAZARDS			
ADDRESS		D		M		DOCTOR'S NAME	
137 CAUSEWAYSIDE ST						M. McGUIRE	
G32 8LT.						G. M. ADAMS	
16 CORBETT ST.							
G32 8LF							
212 5 CAUSEWAYSIDE ST.							
Cause of Death							
(1) _____							
(2) _____							

Form GP HIB (Rev. 6/87)
355—2091

On 04/05/11 (2000 12/92 Ed 200612)

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

	Date	*	CLINICAL NOTES
FORENAMES			
SURNAME			

THIS RECORD IS THE PROPERTY OF THE
FAMILY HEALTH SERVICES AUTHORITY

FORM FP5B
Dd:D0003895 C10785 08/97 47996

NHS Confidential: Personal data about a patient

McFarlane		Stewart G. W.		774 4704		SURNAME	
SURNAME		CHRISTIAN NAMES		OCCUPATION			
National Health Service Number		Single Married Widowed	Date of Birth	9	6	71	19.....
S665-1971-7148							
Address (1)		Name of Practitioner		Executive Council Cipher - Date		19.....	
24 Bellrock St Glasgow		John C Mc Bride		27 APR 1979			
331 Garsington Road Glasgow		(2)		(2)		Died	
(3)		(3)		(3)		19.....	
(4)		(4)		(4)		CAUSE OF DEATH	
						1.	
						2.	
Form GP.5B (Scotland) - MALE						Signature of Practitioner	

Scanned Document
 27-May-2026 KATHLEEN_18885
 Additional: Scanned Document

Filename: file_P_PCTI_DOCMAN7_DATA_S1_Document_DMEDOC01_00001800_0058.pdf
 Extension: .tif
 Pages:

Hospital use only	Clinic	Day Date	Time	Hospital No.
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REFERRAL LETTER**MEDICAL IN CONFIDENCE**

GGC General Referral or Advice Protocol (Glasgow, vR20.5)

Additional Support Needs:
No known ASN requirements

REFERRAL TO	
Rheumatology GGC General Referral or Advice	— Consultant / receiving practitioner and/or specialty clinic
Glasgow Royal Infirmary 84 Castle Street Glasgow G4 0SF	— Hospital and hospital address Hospital location code. G107H Email address -
Urgency of referral Urgent	Date of referral 26-Apr-2022
Date of referral 26-Apr-2022	Date sent 26-Apr-2022

PATIENT DETAILS		Patient's address
Surname McFarlane	Forename(s) Stewart	32 Dalry Street GLASGOW G32 9BL
Title Mr	Sex Male	Contact number(s) Voice: 07504247668
Date of birth 09-Jun-1971	CHI no. 0906716470	
Area of Residence -		

101026160565H

Unique Care Pathway Number: 101026160565H

REGISTERED GP DETAILS		Practice address
Name Dr Emma Douglas	GMC code 6128501 GP code 01171	Crail Medical Practice 245 Tollcross Road Glasgow G31 4UW
Practice name Crail Medical Practice	Practice code 46131	Contact number(s) Voice: 0141 554 3199 Facsimile: 0141 551 9950 E-mail: ggc.gp46131clinical@nhs.scot

REFERRING GP DETAILS		Practice address
Name Dr. Emma Douglas	GMC code 6128501 GP code 01171	245 Tollcross Road Glasgow G31 4UW
Practice name Crail Medical Practice (46131)	Practice code 46131	Contact number(s) Voice: 0141 554 3199

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CLINICAL INFORMATION**History of presenting complaint****Presenting complaint**

Description: pain and stiffness in joints

Comment: Dear doctor, I would be grateful of your review of this 50 year old gentleman who is currently undergoing investigations by the respiratory teams for possible interstitial lung disease. He presented recently with increasing pain and stiffness in the small joints of both hands. He feels that it is worse across the knuckles. He denies any specific redness or swelling but does describe significant morning stiffness in his hands. He is taking co-dydramol for long standing back pain and is find this beneficial for his hand as well. His blood tests have shown a slightly raised rheumatoid factor on two separate occasions initially in January it was 43 and more recently it was 39. He also has a raised ESR and mildly raised platelets. He had his ANA checked by the respiratory team and it was moderately positive with 1/6.40 homogenous pattern. I have arrange for some x-rays of his hands to see if there is any specific changes in the joints. Given his history and the blood results I wonder if this could be an inflammatory arthritis and would be grateful for you expert input.

Yours sincerely

Dr Morgan

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
Chronic kidney disease stage 1	CKD stage 1/2	26-Feb-2021	26-Feb-2021
Renal agenesis, unspecified	solitary left kidney	18-Feb-2021	18-Feb-2021
Iritis - acute	-	05-Aug-2009	05-Aug-2009
Bite of nonvenomous snakes and lizards	Left upper limb	21-Nov-2008	21-Nov-2008
[X]Mild depression	-	21-Jan-2005	21-Jan-2005
Generalised anxiety disorder	with panic symptoms due to social/ financial problems+++	17-Dec-2004	17-Dec-2004

Current medication (Active Repeat medication issued within the last 12 months)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Paracetamol And Dihydrocodeine Tablets 500 mg + 20 mg	112	112 tablet	ONE OR TWO TO BE TAKEN EVERY 4-6 HOURS WHEN REQUIRED (NO MORE THAN 8 IN 24 HOURS)	-	12-Apr-2022	12-Apr-2022
Atorvastatin Tablets 20 mg	56	56 tablet	ONE TO BE TAKEN EACH DAY	-	15-Mar-2021	02-Jul-2021

Recent medication (Any medication issued within last 90 days not shown above)

Drug name	Quantity	Formulation	Dosage	Frequency	Date started	Date last issued
Omeprazole Capsules (Gastro-Resistant) 20 mg	28	28 capsule	ONE TO BE TAKEN EACH DAY	-	12-Apr-2022	12-Apr-2022

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Promethazine Hydrochloride Tablets 25 mg	28	28 tablet	ONE AT NIGHT	-	06-Dec-2021	06-Dec-2021
Macrogol Compound Oral Powder (sachets) NPF Sugar Free	30	30 sachet	ONE TWICE DAILY	-	03-Nov-2021	06-Dec-2021
Co-Dydramol 10/500 Tablets	100	100 tablet	ONE OR TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)	-	16-Jul-2021	23-Mar-2022

Blood Pressure

Date Recorded	Systolic	Diastolic
08-Mar-2021	110	82
27-Nov-2015	126	88
01-Nov-2004	134	90

Body Measurements

Date Recorded	Height	Weight	BMI
08-Mar-2021	-	71.5	-

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Ex smoker:		08-Mar-2021
Cigarette smoker 6 Cigarettes/day :	pain left ear for 3 days has had URTI left ear nad, imp eust tube dysfxn adv given	01-Feb-2016
Cigarette smoker :		06-Mar-2013
Current smoker:	Smoker\$\$ Status.cim - Repeat after an Interval	01-Nov-2004
Alcohol consumption, 0 units/week:		08-Mar-2021
Light drinker - 1-2u/day:	Alcohol Intake\$\$ Status.cim - Repeat after an Interval	01-Nov-2004

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) British

 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 or Advice Protocol (Glasgow, vR15.0)

Additional Support Needs:
No known ASN requirements

REFERRAL TO	
Respiratory Medicine GGC General Referral or Advice	— Consultant / receiving practitioner and/or specialty clinic
Glasgow Royal Infirmary 84 Castle Street Glasgow G4 0SF	— Hospital and hospital address Hospital location code. G107H Email address -
Urgency of referral Urgent	Date sent 01-Dec-2021
Date of referral 01-Dec-2021	

PATIENT DETAILS		Patient's address
Surname McFarlane		32 Dalry Street GLASGOW G32 9BL
Forename(s) Stewart		
Title Mr		Contact number(s)
Sex Male		Voice: 07504247668
Date of birth 09-Jun-1971		
CHI no. 0906716470		
Area of Residence -		

1010250040347

Unique Care Pathway Number: 1010250040347

REGISTERED GP DETAILS		Practice address
Name Dr Emma Douglas		Crail Medical Practice 245 Tollcross Road Glasgow G31 4UW
GMC code 6128501	GP code 01171	
Practice name Crail Medical Practice		Contact number(s)
Practice code 46131		Voice: 0141 554 3199 Facsimile: 0141 551 9950 E-mail: ggc.gp46131clinical@nhs.scot

REFERRING GP DETAILS		Practice address
Name Dr. Wendy Killin		245 Tollcross Road Glasgow G31 4UW
GMC code 7020263	GP code 01155	
Practice name Crail Medical Practice (46131)		Contact number(s)
Practice code 46131		Voice: 0141 554 3199

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CLINICAL INFORMATION**History of presenting complaint****Presenting complaint**

Description: complaining of feeling breathless on very short distances which was unlike him

Comment: Dear Doctor,

I wonder if you would be kind enough to review Stewart. He is a 50 year old gentleman who has had fatigue for many months. He has a background diagnosis of CKD stage 1 due to having a solitary left kidney.

I spoke to him at the beginning of October and he said that he had, had some weight loss. He had a smoking history from the age of 15 until 2 years ago. He was complaining of feeling breathless on very short distances which was unlike him. He had COVID in 2020 and also had a car accident in February 2021 and he put some of his symptoms down to these issues. A chest x-ray was normal and a CT Scan of his chest was carried and enclosed. He has also been referred for spirometry and we started him on a Salbutamol Inhaler for probable COPD.

The CT Scan has come back a possible interstitial lung disease and I would appreciate your assessment with regards to his on going symptoms.

Thank you and kind regards

Doctor Killin

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history**Pre-existing conditions** (High & medium priority - all)

<u>Description</u>	<u>Comment</u>	<u>Date of onset</u>	<u>Date recorded</u>
Chronic kidney disease stage 1	CKD stage 1/2	26-Feb-2021	26-Feb-2021
Renal agenesis, unspecified	solitary left kidney	18-Feb-2021	18-Feb-2021
Iritis - acute	-	05-Aug-2009	05-Aug-2009
Bite of nonvenomous snakes and lizards	Left upper limb	21-Nov-2008	21-Nov-2008
[X]Mild depression	-	21-Jan-2005	21-Jan-2005
Generalised anxiety disorder	with panic symptoms due to social/ financial problems+++	17-Dec-2004	17-Dec-2004

Current medication (Active Repeat medication issued within the last 12 months)

<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>
Co-Dydramol 10/500 Tablets	100	100 tablet	ONE OR TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)	-	16-Jul-2021	25-Nov-2021
Atorvastatin Tablets 20 mg	56	56 tablet	ONE TO BE TAKEN EACH DAY	-	15-Mar-2021	02-Jul-2021

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>
Macrogol Compound Oral Powder (sachets) NPF	30	30 sachet	ONE TWICE DAILY	-	03-Nov-2021	03-Nov-2021

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Sugar Free						
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	-	03-Nov-2021	03-Nov-2021
Peptac Liquid (peppermint)	500	500 ML	10-20ML TO BE TAKEN AFTER MEALS AND AT BEDTIME	-	07-Oct-2021	07-Oct-2021
Ibuprofen Gel 5 %	50	50 GRAM (S)	APPLY TO THE AFFECTED AREA UP TO THREE TIMES A DAY	-	16-Jul-2021	16-Jul-2021
Co-Codamol 30/500 Tablets	50	50 TABLET	TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)	-	14-Jun-2021	02-Jul-2021

Blood Pressure

<u>Date Recorded</u>	<u>Systolic</u>	<u>Diastolic</u>
08-Mar-2021	110	82
27-Nov-2015	126	88
01-Nov-2004	134	90

Body Measurements

<u>Date Recorded</u>	<u>Height</u>	<u>Weight</u>	<u>BMI</u>
08-Mar-2021	-	71.5	-

Lifestyle Risks and Alerts / Examinations and Investigations

<u>Description/Question</u>	<u>Result/Comment</u>	<u>Date</u>
Ex smoker:		08-Mar-2021
Cigarette smoker 6 Cigarettes/day :	pain left ear for 3 days has had URTI left ear nad, imp eust tube dysfxn adv given	01-Feb-2016
Cigarette smoker :		06-Mar-2013
Current smoker:	Smoker\$\$ Status.cim - Repeat after an Interval	01-Nov-2004
Alcohol consumption, 0 units/week:		08-Mar-2021
Light drinker - 1-2u/day:	Alcohol Intake\$\$ cim - Repeat after an Interval	01-Nov-2004

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:Yes

Social circumstances

Ethnic Origin: (White) British

Signature of referring doctor (or other professional) **Date**

THIRD PARTY COPY

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Hospital use only	Clinic	Day Date	Time	Hospital No.
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REFERRAL LETTER**MEDICAL IN CONFIDENCE**

GGC Direct Access Spirometry (Glasgow, vR13.0)

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	25-Oct-2021
Date of referral	25-Oct-2021		

PATIENT DETAILS		Patient's address	
Surname	Mcfarlane	32 Dalry Street	
Forename(s)	Stewart	GLASGOW	
Title	Mr	G32 9BL	
Sex	Male	Contact number(s)	
Date of birth	09-Jun-1971	Voice: 07504247668	
CHI no.	0906716470		
Area of Residence	-		

1010246767103

Unique Care Pathway Number: 1010246767103

REGISTERED GP DETAILS		Practice address	
Name	Dr Emma Douglas	Crail Medical Practice	
GMC code	6128501	GP code	01171
Practice name	Crail Medical Practice	245 Tollcross Road	
Practice code	46131	Glasgow	
		Contact number(s)	
		Voice: 0141 554 3199	
		Facsimile: 0141 551 9950	
		E-mail: GG-UHB.gp46131clinical@nhs.net	

REFERRING GP DETAILS		Practice address	
Name	Dr. Emma Douglas	245 Tollcross Road	
GMC code	6128501	GP code	01171
Practice name	Crail Medical Practice (46131)	Glasgow	
Practice code	46131	G31 4UW	
		Contact number(s)	
		Voice: 0141 554 3199	

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CLINICAL INFORMATION**History of presenting complaint****Presenting complaint**

Description: COPD

Comment: Dear Colleague,

I would be grateful if you could see this 50 year old gentleman for Spirometry due to shortness of breath on exertion.

Many thanks

Doctor Poppy Morgan

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history**Pre-existing conditions** (High & medium priority - all)

<u>Description</u>	<u>Comment</u>	<u>Date of onset</u>	<u>Date recorded</u>
Chronic kidney disease stage 1	CKD stage 1/2	26-Feb-2021	26-Feb-2021
Renal agenesis, unspecified	solitary left kidney	18-Feb-2021	18-Feb-2021
Iritis - acute	-	05-Aug-2009	05-Aug-2009
Bite of nonvenomous snakes and lizards	Left upper limb	21-Nov-2008	21-Nov-2008
[X]Mild depression	-	21-Jan-2005	21-Jan-2005
Generalised anxiety disorder	with panic symptoms due to social/ financial problems+++	17-Dec-2004	17-Dec-2004

Current medication (Active Repeat medication issued within the last 12 months)

<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>
Atorvastatin Tablets 20 mg	56	56 tablet	ONE TO BE TAKEN EACH DAY	-	15-Mar-2021	02-Jul-2021

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>
Peptac Liquid (peppermint)	500	500 ML	10-20ML TO BE TAKEN AFTER MEALS AND AT BEDTIME	-	07-Oct-2021	07-Oct-2021
Co-Dydramol 10/500 Tablets	100	100 tablet	ONE OR TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)	-	16-Jul-2021	07-Oct-2021
Ibuprofen Gel 5 %	50	50 GRAM (S)	APPLY TO THE AFFECTED AREA UP TO THREE TIMES A DAY	-	16-Jul-2021	16-Jul-2021
Co-Codamol 30/500 Tablets	50	50 TABLET	TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)	-	14-Jun-2021	02-Jul-2021
Co-Codamol 30/500 Tablets	50	50 TABLET	TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)	-	27-May-2021	27-May-2021

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Blood Pressure

<u>Date Recorded</u>	<u>Systolic</u>	<u>Diastolic</u>
08-Mar-2021	110	82
27-Nov-2015	126	88
01-Nov-2004	134	90

Body Measurements

<u>Date Recorded</u>	<u>Height</u>	<u>Weight</u>	<u>BMI</u>
08-Mar-2021	-	71.5	-

Lifestyle Risks and Alerts / Examinations and Investigations

<u>Description/Question</u>	<u>Result/Comment</u>	<u>Date</u>
Weight (kg):	71.5	-
Ex smoker:		08-Mar-2021
Cigarette smoker 6	pain left ear for 3 days has had URTI left ear nad, imp eust tube dysfxn adv	01-Feb-2016
Cigarettes/day :	given	06-Mar-2013
Cigarette smoker :		01-Nov-2004
Current smoker:	Smoker\$\$ Status.cim - Repeat after an Interval	08-Mar-2021
Alcohol consumption, 0 units/week:		01-Nov-2004
Light drinker - 1-2u/day:	Alcohol Intake\$\$ cim - Repeat after an Interval	01-Nov-2004

Investigations

<u>Description/Question</u>	<u>Result/Comment</u>	<u>Date</u>
Persistent Cough:	NO	-
Change in MRC grade in known COPD:	NO	-
Breathlessness:	YES	-
Known COPD:	NO	-
Known asthma:	NO	-
Previous Spirometry:	NO	-
Known current MRSA in sputum:	NO	-
Possible tubercle - if yes, do not refer till clear:	NO	-
Pneumothorax or chest trauma in last three months. If yes, do not refer till after three months from event:	NO	-
Recent chest infection/COPD exacerbation:	NO	-
Recent Eye surgery:	NO	-
Smoking history:	Ex-smoker (quit for more than 12 months)	-

Clinical warnings**Additional Support Needs**

No known ASN requirements

Additional relevant information

Short acting b-agonist:NO
 Long acting b-agonist:NO
 Long acting anti-cholinergic:NO
 Long acting combined inhaled steroid/long acting b-agonist:NO
 Inhaled steroid:NO
 Oral steroid:NO
 Preferred site:Glasgow Royal Infirmary
 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) British

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)

Additional Support Needs:
No known ASN requirements

REFERRAL TO	
Urology GGC General Referral	— Consultant / receiving practitioner and/or specialty clinic
Glasgow Royal Infirmary 84 Castle Street Glasgow G4 0SF	— Hospital and hospital address Hospital location code. G107H Email address -
Urgency of referral Urgent - Suspected Cancer	
Date of referral 20-May-2021	Date sent 20-May-2021

PATIENT DETAILS		Patient's address
Surname McFarlane		32 Dalry Street GLASGOW G32 9BL
Forename(s) Stewart		
Title Mr		Contact number(s)
Sex Male		Voice: 07504247668
Date of birth 09-Jun-1971		
CHI no. 0906716470		
Area of Residence -		

1010234005903

Unique Care Pathway Number: 1010234005903

REGISTERED GP DETAILS		Practice address
Name Dr Emma Douglas		Crail Medical Practice 245 Tollcross Road Glasgow G31 4UW
GMC code 6128501	GP code 01171	
Practice name Crail Medical Practice		Contact number(s)
Practice code 46131		Voice: 0141 554 3199 Facsimile: 0141 551 9950 E-mail: GG-UHB.gp46131clinical@nhs.net

REFERRING GP DETAILS		Practice address
Name Dr. Wendy Killin		245 Tollcross Road Glasgow G31 4UW
GMC code 7020263	GP code 01155	
Practice name Crail Medical Practice (46131)		Contact number(s)
Practice code 46131		Voice: 0141 554 3199

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CLINICAL INFORMATION**History of presenting complaint****Presenting complaint**

Description: non visible haematuria

Comment: Dear Doctor,

I wonder if you would be kind enough to assess Mr McFarlane. He is 49 year old gentleman with non visible haematuria that has persisted since March. In March he had a urine dip which was +blood, in April he had a trace/+blood and in May he has had +blood.

His investigations started in ooh when he attended on the 29th March with some feeling of fatigue and told by his friends that he wasn't looking right. This was on the background of having a car accident 6 weeks previous which he attended A&E for. He had a CT Scan at that time which showed he had a single kidney. He has been under renal review and they have discharged him although he is coded with CKD stage 1/2 due to his structural abnormality, however his eGFR is normal and his blood pressure is also normal. He has had continued back pain following the road traffic accident and is to see a Physiotherapist next week.

He is concerned about the on going non visible haematuria and wonders what the cause is given his new renal diagnosis. He would be most appreciative as would I if you could investigate this for him.

He is an ex smoker with no other urinary symptoms.

Thank you and kind regards

Doctor Killin

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history**Pre-existing conditions** (High & medium priority - all)

<u>Description</u>	<u>Comment</u>	<u>Date of onset</u>	<u>Date recorded</u>
Chronic kidney disease stage 1	CKD stage 1/2	26-Feb-2021	26-Feb-2021
Renal agenesis, unspecified	solitary left kidney	18-Feb-2021	18-Feb-2021
Iritis - acute	-	05-Aug-2009	05-Aug-2009
Bite of nonvenomous snakes and lizards	Left upper limb	21-Nov-2008	21-Nov-2008
[X]Mild depression	-	21-Jan-2005	21-Jan-2005
Generalised anxiety disorder	with panic symptoms due to social/ financial problems+++	17-Dec-2004	17-Dec-2004

Current medication (Active Repeat medication issued within the last 12 months)

<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>
Atorvastatin Tablets 20 mg	56	56 tablet	ONE TO BE TAKEN EACH DAY	-	15-Mar-2021	16-Mar-2021

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>
Co-Codamol 30/500 Tablets	56	56 tablet	TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)	-	11-Mar-2021	29-Apr-2021
Co-Codamol			TWO TO BE TAKEN EVERY FOUR TO		23-Feb-	23-Feb-

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30/500 Tablets	56	56 tablet	SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)	-	2021	2021
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Blood Pressure

Date Recorded	Systolic	Diastolic
08-Mar-2021	110	82
27-Nov-2015	126	88
01-Nov-2004	134	90

Body Measurements

Date Recorded	Height	Weight	BMI
08-Mar-2021	-	71.5	-

Lifestyle Risks and Alerts / Examinations and Investigations

Description/Question	Result/Comment	Date
Ex smoker:		08-Mar-2021
Cigarette smoker 6	pain left ear for 3 days has had URTI left ear nad, imp eust tube dysfxn adv	01-Feb-2016
Cigarettes/day :	given	06-Mar-2013
Cigarette smoker :		01-Nov-2004
Current smoker:	Smoker\$\$ Status.cim - Repeat after an Interval	08-Mar-2021
Alcohol consumption, 0 units/week:		01-Nov-2004
Light drinker - 1-2u/day:	Alcohol Intake\$\$ cim - Repeat after an Interval	

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) British

 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)

Additional Support Needs:
No known ASN requirements

REFERRAL TO	
Renal Medicine GGC General Referral	— Consultant / receiving practitioner and/or specialty clinic
Queen Elizabeth University Hospital 1345 Govan Road Glasgow G51 4TF	— Hospital and hospital address Hospital location code. G405H Email address -
Urgency of referral Routine	Date sent 25-Feb-2021
Date of referral 24-Feb-2021	

PATIENT DETAILS		Patient's address
Surname McFarlane		32 Dalry Street GLASGOW G32 9BL
Forename(s) Stewart		
Title Mr		Contact number(s)
Sex Male		Voice: 07504247668
Date of birth 09-Jun-1971		
CHI no. 0906716470		
Area of Residence -		

101022709382U

Unique Care Pathway Number: 101022709382U

REGISTERED GP DETAILS		Practice address
Name Dr Emma Douglas		Crail Medical Practice 245 Tollcross Road Glasgow G31 4UW
GMC code 6128501	GP code 01171	
Practice name Crail Medical Practice		Contact number(s)
Practice code 46131		Voice: 0141 554 3199 Facsimile: 0141 551 9950 E-mail: GG-UHB.gp46131clinical@nhs.net

REFERRING GP DETAILS		Practice address
Name Dr. Carys Morrison		245 Tollcross Road Glasgow G31 4UW
GMC code 7277414	GP code 09873	
Practice name Crail Medical Practice (46131)		Contact number(s)
Practice code 46131		Voice: 0141 554 3199

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CLINICAL INFORMATION**History of presenting complaint****Presenting complaint**

Description: Solitary left kidney

Comment: Dear Doctor,

Thank you for your advice regarding this 49 year old man. He had a CT Scan done in A&E following a road traffic accident which revealed an incidental finding of a solitary left kidney. His renal function was normal and his blood pressure was slightly elevated on arrival to A&E but settled with pain relief and remained within acceptable limits. I would be grateful if you could advise how this gentleman should be followed up and the timings of this.

Kind Regards

Doctor Carys Morrison

Reason for referral

Care type requested: Out Patient

Expected outcome: Not Specified

Past medical history**Pre-existing conditions** (High & medium priority - all)

<u>Description</u>	<u>Comment</u>	<u>Date of onset</u>	<u>Date recorded</u>
Renal agenesis, unspecified	solitary left kidney	18-Feb-2021	18-Feb-2021
Iritis - acute	-	05-Aug-2009	05-Aug-2009
Bite of nonvenomous snakes and lizards	Left upper limb	21-Nov-2008	21-Nov-2008
[X]Mild depression	-	21-Jan-2005	21-Jan-2005
Generalised anxiety disorder	with panic symptoms due to social/ financial problems+++	17-Dec-2004	17-Dec-2004

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)

<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>
Co-Codamol 30/500 Tablets	56	56 tablet	TWO TO BE TAKEN EVERY FOUR TO SIX HOURS WHEN REQUIRED (MAXIMUM OF 8 IN 24 HOURS)	-	23-Feb-2021	23-Feb-2021

Blood Pressure

<u>Date Recorded</u>	<u>Systolic</u>	<u>Diastolic</u>
27-Nov-2015	126	88
01-Nov-2004	134	90

Body Measurements

No Body Measurements Recorded

Lifestyle Risks and Alerts / Examinations and Investigations

<u>Description/Question</u>	<u>Result/Comment</u>	<u>Date</u>
Cigarette smoker 6	pain left ear for 3 days has had URTI left ear nad, imp eust tube dysfxn adv	01-Feb-

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Cigarettes/day :	given	2016
Cigarette smoker :		06-Mar-2013
Current smoker:	Smoker\$\$ Status.cim - Repeat after an Interval	01-Nov-2004
Light drinker - 1-2u/day:	Alcohol Intake\$\$ cim - Repeat after an Interval	01-Nov-2004

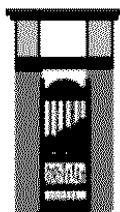
Clinical warnings

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) British

Signature of referring doctor (or other professional) Date

**CRAIL MEDICAL PRACTICE** 245 TOLLCROSS ROAD, GLASGOW, G31 4UW

Consultation by appointment

Dr H.S. Bhachu

Dr I.C. Aitken

Dr G.M. Addis

Tel: 0141 554 3199

0141 556 2696

Fax 0141 551 9950

Email kathleen.diamond@nhs.net27th March 2008

Stewart McFarlane
32 Dairy Street
GLASGOW
G32 9BL

Dear Stewart

I have received a reply about my request for information on your samples. If you want to contact me in the surgery I will give you what information I have.

Yours sincerely

DR I C AITKEN



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27-May-2026 KATHLEEN_18885
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Filename: document2.pdf
Extension: .tif
Pages:

NHS Confidential: Personal data about a patient

NAME SURNAME McFARLANE		CHRISTIAN NAMES STEWART GORDON	
ADDRESS 219 BELL ROCK ST.		Date of Birth 6/6/72	

DATE	*C *F	CLINICAL NOTES	DIAGNOSIS
26/1/77		Examination of throat ? slight lymphadenopathy	
22/3/82		Other R. Pals.	
6/9/82		"Turns" for last 2/yr. Goes white & feels sick & stomachache & has headache: Fundi OK. : General Exam OK Small nervous art boy: "Slow" at school ? migraine suspect. H Valium 2mg / 5mls. 100mg 5mg BD	
14/4/82		none - OK	
31/8/87		Complex for work	
15/9/87		Recent sore throat - large deep cervical nodes. Sore neck. & Shoulders. Heavy	

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

MEDICAL RECORD CARD FORM E.C. 7 (Scotland)

(24.10.72) (E13506) Dd. No. 951826 250,000 12/72 J.&G.I., Ltd. Gp. 259

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

Dr. JOHN C McBRIDE

This person has been placed on your list in accordance with your acceptance and this card should be used until his medical record envelope is sent to you. It should then be placed in the envelope.

Date **11 FEB 1977**

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

FORM E.C.7a
(Scotland)

399676 200M 2/76 J&GI 259

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

NHS Confidential: Personal data about a patient

MALE		Surname	Forenames
		McFARLANE	STEWART
Address			
80 BURLINGTON ROAD BLACKPOOL			
National Health Service Number		Date of Birth	
		9-6-71	
Date	★	CLINICAL NOTES	
12.6.98		Lesions on body & neck for about 1/32. 9/10 impetigo 4 (73) Off Breast and nipple R. Fucoidin (375) (707) - Augment (375) 11 tabs (2) Review.	

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

Form FP7

Produced in the UK by The Stationery Office Ltd, D0002582, 05/97, 36625.

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

THIS RECORD IS THE PROPERTY OF THE FAMILY HEALTH SERVICES AUTHORITY

NHS Confidential: Personal data about a patient

Appointment Sent

Date Attended

HEALTH SUMMARY**MALE**

Name

Address

D.O.B.		SMWD			
--------	----------------------	------	----------------------	----------------------	----------------------

Own Occupation

Partner's Occupation

Date	Date	Date	
1st B/P	2nd B/P	3rd B/P	

Mean if Applicable

Weight	Ideal Weight	Height
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Nutrition Advice

Exercise

Smoker	Cigarettes	Pipe	Since 19
Non Smoker	Never	Stopped 19	

Family History
of CVA or MI

Diabetes	Yes	Insulin	OHD	Diet
	No			

Date of Tetanus	1st	2nd	3rd	Booster
-----------------	-----	-----	-----	---------

Urine date	Protein	Sugar
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Alcohol

Notes/Advice given/Further action

NHS Confidential: Personal data about a patient

MEDICAL HISTORY

Illnesses

Allergies

Hereditary Conditions

Current Medication

SOCIAL FACTORS AFFECTING HEALTH

Employment

Housing

Family Circumstances

Current State of Health:

Mcfarlane, Stewart
DoB: 09/06/1971

Report Valid On 21/06/01 11:46

CRAIL MEDICAL PRACTICE
 Page number 1

Registration

Mr Stewart Mcfarlane
137 Causewayside St
GLASGOW
Scotland

Service Code: Permanent

DoB: 09/06/1971

Age: 30

Telephone: 778 8466

Contact: ?

G32 8LT

CHI Number: 0906716470

NHS Number: S645/371/748

Patient ID:

Occupation:

Registered GP: Dr A Fleming

Repeat Consultation: ?

Registered: 01/09/1998

Confirmed: 01/09/1998

Dispensing: Yes

Road: 0 Water: 0 FootPath: 0

Marital Status: Unknown

Seen By GP: Dr A Fleming

Acute Consultation: ?

Records Received: 27/10/1998

BMI: 0.0

Height: 0 m

Weight: 0 kg

BP: 0/0

Priority Clinical / User Marker

Repeat Medication

Drug/Preparation

Quantity/Dose/Frequency

Start

Last

Interval

Pres. Cons.

Adverse Reactions

Read Code Description

Clinical / User Marker

21/07/1997 Medium [X]Assault
scalp/chin lac

10/12/1993 Medium [X]RTA - Road traffic and other transport accidents
seen by neuro

17/10/1977 Medium Operations on hydrocele
right

21/06/2001 Low Notes summary on computer
by John Marshall

27/10/1998 Low Patient MRE received from HB

01/09/1998 Low Pat. GP7B/GP8B card from HB

01/09/1998 Low Patient signed reg. form

Screening

Referrals

Date Rec. Priority Provider

Speciality

Nature Type

Ref. Appt. Reason For Referral

Referred By

Attendance Type

Summary Sheet: All Sections

Printed at 21/06/01 11:46:04

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Mcfarlane, Stewart

DoB: 09/06/1971

Report Valid On 21/06/01 11:46

CRAIL MEDICAL PRACTICE

Page number 2

Acute Prescriptions

Drug/Preparation

Quantity/Dose/Frequency

Date

Inactive Repeat Drugs

Drug/Preparation

Quantity/Dose/Frequency

Start

Last

Intervals

Pres. Cons.

Last Encounter**Active Care Management**

Type Name

Last Review Recall

Next Review

Num Sessions

Acute/Inactive Care Management

Type Name

Last Review Recall

Next Review

Num Sessions

Summary Sheet: All Sections

Printed at 21/06/01 11:46:04

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		National Health Service Number			
LONG TERM DRUG RECORD		Surname (Block Letters)		Forename(s) (Block Letters)	
		MC. FARLANE		STEWART	
		Address		Date of Birth	
				9.6.71	
Allergies, Drug Reactions and Problems					
Drug	(1)	(2)	(3)	(4)	(5)
Strength/Form					
Quantity					
Dose and Frequency					
Date					
Review by Date					
Drug	(6)	(7)	(8)	(9)	(10)
Strength/Form					
Quantity					
Dose and Frequency					
Date					
Review by Date					

GP111-B
J1300903.066

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Drug	(1)	(2)	(3)	(4)	(5)
Strength/Form					
Quantity					
Dose and Frequency					
Date					
Review by Date					
Drug	(6)	(7)	(8)	(9)	(10)
Strength/Form					
Quantity					
Dose and Frequency					
Date					
Review by Date					
Drug	(11)	(12)	(13)	(14)	(15)
Strength/Form					
Quantity					
Dose and Frequency					
Date					
Review by Date					

GP111-0
D170807.016

355—2103

HMSO Ed Rep 195m 2/93 (105690)

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CLINICAL NOTES		National Health Service Number	
		Surname (Block Letters)	Forenames (Block Letters)
		Address	
		Date of Birth	
Date	*		
		every week.	
		Nal-Mur 200 c (3)	
		2wks Depression	