

KERR, Colin (Mr) Date of Birth: **29-Nov-1979 (46y)**

Report Path: Local Record

Acorn House, 116-118 Shoreditch High Street, London, E1 6JN

NHS Number:	624 191 1090	Home Tel:	
Usual GP:	BURRIDGE, Matthew (Dr)	Work Tel:	
Patient Type:	Regular	Mobile Tel:	07555585417
Registered:	09-Dec-2025	Email:	colinkerr881@gmail.com
Language:	Main spoken language English	Dispensing:	No
Advocacy Needs:		Transport Needs:	

Problems

Active

15-May-2026	Tear of medial meniscus of knee	
14-May-2026	Dyspnoea	
14-May-2026	Foot pain	
22-Apr-2026	Frozen shoulder	
22-Apr-2026	Frozen shoulder	(Combined with Frozen shoulder)
20-Apr-2026	Hiatus hernia	
16-Apr-2026	Injection of knee joint	
04-Mar-2026	Shoulder pain	
18-Feb-2026	Low back pain	
14-Jan-2026	Mental health review	
13-Jan-2026	Reduced libido	
18-Nov-2022	Abdominal pain	Problem severity: Minor First Ended on 17/12/2022

Significant Past

10-Dec-2025	Fluoxetine adverse reaction	this was coded in 2012: had to remove code as otherwise not able to prescribe as code degraded
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Minor Past

18-Mar-2026	Rectal haemorrhage	16-Apr-2026
11-Dec-2025	Knee injury	09-Jan-2026
11-Oct-2023	Low back pain	Problem severity: Minor First Ended on 13/05/2025 13-May-2025
29-Sep-2022	Fungal dermatosis	Problem severity: Minor FirstOriginal text: Dermal mycosis Ended on 28/10/2022 28-Oct-2022

Medication

Acute

Gaviscon Advance Mint chewable tablets (Reckitt Benckiser Healthcare (UK) Ltd)	Chew One Or Two Tablets After Meals And At Bedtime	24 tablet	14-May-2026
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Repeat

Mirtazapine 30mg tablets	One To Be Taken At Night	28 tablet	07-May-2026
Omeprazole 20mg gastro-resistant capsules	One or two To Be Taken Each Day	56 capsule	07-May-2026

Allergies

10-Dec-2025	Fluoxetine adverse reaction	this was coded in 2012: had to remove code as otherwise not able to prescribe as code degraded
08-Apr-2015	No known allergies	
03-Oct-2012	No known allergies	

Health Status

09-Dec-2025	Alcohol consumption	0	U/week
09-Dec-2025	O/E - blood pressure reading	115/87	mmHg
09-Dec-2025	Body mass index	22.4	kg/m2
09-Dec-2025	Body weight	79	kg
09-Dec-2025	Standing height	188	cm
09-Dec-2025	Ex-smoker		
19-Sep-2023	Notes summary on computer		

Immunisations

15-Jan-2026	Seasonal influenza vaccination declined	
15-Jan-2026	Administration of second dose of measles and mumps and rubella vaccine	declined
15-Jan-2026	First MMR (measles mumps and rubella) vaccination	declined
09-Dec-2025	Up-to-date with immunisations	
05-Aug-2025	Use of aseptic technique	
08-Jul-2025	Use of aseptic technique	
16-Dec-2009	Hepatitis B 2	Reason: Routine MeasureBatch No: XXDosage: 0.5 mlExpiry date: 02 Feb 2014GMS Status: Practice GMSPCN Admin: Not PCN
15-Jul-2009	Hepatitis B 1	Reason: Routine MeasureBatch No: XXDosage: 0.5 mlExpiry date: 02 Feb 2014GMS Status: Practice GMSPCN Admin: Not PCN
19-Mar-2002	Tetanus Vaccine (Generic) Booster	Reason: Routine MeasureBatch No: xxDosage: 0.5 mlGMS Status: Practice GMSPCN Admin: Not PCN

Family History

09-Dec-2025	No FH: Stroke/TIA	Family member:
09-Dec-2025	No family history diabetes	Family Member:
09-Dec-2025	FH: Ischaemic heart dis. <60	Family member: Grandfather Family Member:
13-May-2025	FH: Myocardial infarction	
13-May-2025	FH: Hypertension	
13-May-2025	Family history of cancer	
01-Jul-2023	FH: Ischaemic heart dis. <60	Subject: Grandfather
01-Jul-2023	No family history diabetes	
28-Dec-2022	FH: Ischaemic heart disease	Subject: Grandfather

KERR, Colin (Mr)
Date of Birth: 29-Nov-1979



Health E1
NHS Number: 624 191 1090

08-Apr-2015	FH: Ischaemic heart disease at less than 60 years	grandfather m.i. aged 44
03-Oct-2012	FH: Hypertension	r.i.p.
03-Oct-2012	FH: Ischaemic heart disease at less than 60 years	mother
		grandfather

Planned Events

01-Jul-2023	NHS Health Check completed	Status: Seen, Recall status set to 'Seen' by GP2GP transferEvery 5 years.
21-May-2026	2nd MMR vaccination	
20-Jun-2026	Medication review	
14-Mar-2110	Primary Care Group	Admin tag (DO NOT REMOVE)

Consultations

18-May-2026 17:52	accuRx Consultation HASSAN, Muntaiha (Miss)
Comment	Dear Mr Kerr, Please note that the practice will be closed from 1:00 PM tomorrow, Tuesday 18/05/2026, due to staff training. We will reopen as usual on Wednesday at 8:00 AM.For any urgent medical advice while we are closed, please contact NHS 111.Thanks, Health E1NHS app message sent on 18/05/2026 17:52:05
15-May-2026 09:18	Accurx Consultation SULEJ, Katarzyna (Ms)
Comment	Patient mobile telephone number 447555585417 SMS text message sent to patient Dear Mr Kerr,You have a mental health appointment booked at HE1 on 26 May at 4:00 pm with Catherine.Thanks, Health E1Sent on 15/05/2026 at 09:18
14-May-2026 16:32	Administration note (Health E1, Homeless Medical Centre) SOBRATTY, Irfaan (Mr)
Comment	medical record ready for collection
14-May-2026 16:31	Health E1, Homeless Medical Centre SOBRATTY, Irfaan (Mr)
Document	Administration note  consent form
14-May-2026 16:30	Health E1, Homeless Medical Centre SOBRATTY, Irfaan (Mr)
Document	Administration note  (20-Apr-2026) medical record request
14-May-2026 11:58	Face to face consultation (Health E1, Homeless Medical Centre) BURRIDGE, Matthew (Dr)
Problem	Foot pain (First) Laterality: Left
History	pain in foot for one week but had on and off for years fracture some 20 years ago
Comment	Plan: for x-ray ? OA of foot
Test Request	X-ray - Unknown specimen Test Request : XR Foot Lt
Problem	Mental health review (Review)
History	He is struggling with issues realting to past trauama and asking for appt with Kassia again
Comment	note to KS to trequyest he has another appt
Problem	Hiatus hernia (Review)
History	recentrly diagnosied with H HERNIA on endoscopy on PPI bd still hacing pains ? PPI is treating acid
Medication	Gaviscon Advance Mint chewable tablets (Reckitt Benckiser Healthcare (UK) Ltd) Chew One Or Two Tablets After Meals And At Bedtime 24 tablet
Comment	Imp: not clear iof the pain he is havign are related to stomach or mental heaoth issues to try adding in gaviscon and review as needed he has been re-referred to MH nurse for review

Problem	Dyspnoea (First)
History	<p>epsodes of shortness of breath</p> <p>he alsway suffers from anxiety and is in acorn house, see other Hx aytached</p> <p>says that he has had multiple test done over the years and none have found resp illness</p>
Comment	<p>Imp: Given Hx, other medicacal hx and tests he has had, I think that anxiety is most like y cause of this Sx</p> <p>he will see MH nurse</p> <p>can do ohtebr ix in future if this seems apporpaite</p> <p>discussed re-breathign as a help for SOB caused by panic attack/anxiety</p>
13-May-2026 14:18	Scanned document (Health E1, Homeless Medical Centre) MUNSOOR, Jamsheed (Mr)
Problem	Tear of medial meniscus of knee (First) (15-May-2026) Laterality: Right
Document	Seen in orthopaedic clinic 📄 (08-Apr-2026) LONDON INDEPENDENT HOSPITAL (08-Apr-2026)
13-May-2026 12:31	Externally Entered MENSAH, Raphaela (Dr) Entered By: , System User ()
Lab Results	Plain X-ray shoulder joint (RM11) - Normal - no action
08-May-2026 15:39	Administration note (Health E1, Homeless Medical Centre) BRAHMAVARA SHANKARA, Rajesh Kumar (Mr)
Comment	try to phone the pt to know whether pt attended the x-ray appt or not- no response to call
06-May-2026 09:36	Administration note (Health E1, Homeless Medical Centre) BRAHMAVARA SHANKARA, Rajesh Kumar (Mr)
Comment	try to phone the pt to know whether pt attended shoulder x-ray at RLH, if not to remind the pt. no response to call
05-May-2026	Health E1, Homeless Medical Centre BURRIDGE, Matthew (Dr) Entered By: KAMRUZZAMAN, Rashed (Mr)
Document	Hepatology 📄 Royal London Hospital
01-May-2026 15:41	accuRx Consultation HASSAN, Muntaiha (Miss)
Comment	Dear Mr Kerr, The practice will be closed for Bank holiday on Monday 4th May 2026, We will re open as usual from Tuesday 5th May at 8am, If you require urgent medical assistance please contact NHS 111. Thanks, Health E1 NHS app message sent on 01/05/2026 15:41:16
24-Apr-2026 15:21	Administration note (Health E1, Homeless Medical Centre) BURRIDGE, Matthew (Dr)
Problem	Frozen shoulder (First) (22-Apr-2026) Laterality: Left
Test Request	<p>X-ray - Unknown specimen</p> <p>Test Request : XR Shoulder Lt</p>
22-Apr-2026 09:02	Face to face consultation (Health E1, Homeless Medical Centre) BRAHMAVARA SHANKARA, Rajesh Kumar (Mr)
Problem	Frozen shoulder (Review)
History	<p>History / symptoms - ongoing left shoulder pain and stiffness for 8 months and getting worse. seen FCP last month- requested US scan-NAD- possibilities of developing adhesive capsulitis.</p> <p>can go for shoulder jt injection. pt on rehab. will request x-ray left shoulder prior shoulder jt injection to rule out bone pathology- pt agreed.</p> <p>has steroid injection to right knee at London independent last week- no adverse effect.</p> <p>advised to continue with the given exs.</p>
Comment	<p>Frozen shoulder Laterality: Left</p> <p>will d/w gp for the left shoulder x-ray to rule out bone pathology- pt consented.</p>
Additional	<p>Seen by first contact physiotherapist</p> <p>Informed consent for procedure - pt said yes</p> <p>No red flag symptoms</p>
Assessment	Examination / signs
20-Apr-2026 14:41	Administration note (Health E1, Homeless Medical Centre) HASSAN, Muntaiha (Miss)
Comment	tried to call patient, to query email encounter from legal team for med records, however pat took records last week, want to understand if hes made a separate requets for same

issue.

18-Apr-2026	Inbound Document BURRIDGE, Matthew (Dr) Entered By: EXTERNAL USER, ()
Problem	Hiatus hernia (First) (20-Apr-2026)
Document	Endoscopy carried out 📄 (18-Apr-2026) Clinical document
16-Apr-2026 10:15	Telephone consultation (Health E1, Homeless Medical Centre) CUPPOOR, Souvita (Mrs)
Problem	Injection of knee joint (First) Laterality: Right
History	Telephone encounter. Name and date confirmed Had Rt knee steroid at London Independent Hospital yesterday Knee is very sore , asking for nefopam
Medication	Nefopam 30mg tablets Take Two Tablets Three Times A Day 84 tablet
Comment	Medication issued and sent to nominated pharmacy
15-Apr-2026 09:19	Administration note (Health E1, Homeless Medical Centre) SOBRATTY, Irfaan (Mr)
Comment	Medical record collected
15-Apr-2026 08:12	Accurx Consultation SOBRATTY, Irfaan (Mr)
Comment	Patient mobile telephone number 447555585417 SMS text message sent to patient Dear Mr Kerr,Your medical record is ready to be collected.Irfaan SobrattyHealth E1Sent on 15/04/2026 at 08:12
15-Apr-2026 08:11	Administration note (Health E1, Homeless Medical Centre) SOBRATTY, Irfaan (Mr)
Comment	Medical record ready for collection
15-Apr-2026	Inbound Document BURRIDGE, Matthew (Dr) Entered By: EXTERNAL USER, ()
Document	Discharge report 📄 Discharge report from The London Independent Hospital (15-Apr-2026)
10-Apr-2026 11:29	Health E1, Homeless Medical Centre SOBRATTY, Irfaan (Mr)
Document	Administration note 📄 Medical record received from Loxford practice
02-Apr-2026 08:19	accuRx Consultation AHMED, Jamil (Mr)
Comment	Dear Mr Kerr,The practice will be closed for Easter Bank holiday on Friday 03rd April & Monday 6th April, We will re open as usual from Tuesday 08am, If you require urgent medical assistance please contact NHS 111Thanks, Health E1NHS app message sent on 02/04/2026 08:19:06
27-Mar-2026 17:01	Externally Entered BURRIDGE, Matthew (Dr) Entered By: , System User ()
Lab Results	Quantitv faecal immunochem tst (26-Mar-2026) (MB) - Normal - no action
26-Mar-2026 16:10	Telephone consultation (Health E1, Homeless Medical Centre) BURRIDGE, Matthew (Dr)
Problem	Shoulder pain (Review)
History	call to ask for reuslt of uss of shoulder arranged by physiotherapist this has shown to rotator cuff injuries nbut querieis possible adhesive capsulitis he has exercises that he is doing still has restriction in movement
Comment	Advised of this result to book appt with physio to disucss this and future managment
26-Mar-2026 13:07	Health E1, Homeless Medical Centre BURRIDGE, Matthew (Dr) Entered By: SOBRATTY, Irfaan (Mr)
Document	Ultrasound scan report received 📄 (19-Mar-2026) Community Outpatients
25-Mar-2026 13:24	accuRx Consultation SOBRATTY, Irfaan (Mr)
Comment	Dear Mr Kerr,Join us this Friday on the 27th March, from 10:00 AM to 2:00 PM, for our Health and Wellbeing fair!Discover a range of services available to you, a free hot meal, hygiene kits, perishable food, haircuts and clothing will be provided on a first-come, first-served basis. We look forward to welcoming you!Health E1NHS app message sent on 25/03/2026 13:24:20
23-Mar-2026 15:32	Administration note (Health E1, Homeless Medical Centre) AHMED, Jamil (Mr)

	Comment	Failed encounter to book 2nd mmr
19-Mar-2026 14:15		Scanned document (Health E1, Homeless Medical Centre) BURRIDGE, Matthew (Dr) Entered By: UDDIN, Mohammad Shakil (Mr)
	Document	Seen in orthopaedic clinic 📄 (20-Feb-2026) Clinical letter from BMI The London Independent Hospital (20-Feb-2026)
18-Mar-2026 15:31		Scanned document (HEALTH E1) KAN, Rachele (Ms)
	Document	Medical report requested 📄 Medical report requested (18-Mar-2026)
18-Mar-2026 15:06		Face to face consultation (Health E1, Homeless Medical Centre) BURRIDGE, Matthew (Dr)
	Problem	Rectal haemorrhage (First)
	History	episodes of bright red bleedin pr no pain on defaction, no ithcn or lumps has had pr blood in past but not reproted to Dr
	Comment	plan: for fit test advised to book in for pr examin (he has Hx of abuse so not too keen on doping pr exam) see with reuslts of this and for examination
	Test Request	BLT Biochemistry (Faeces) - Unknown specimen Test Request : Faecal Immunochemical Test (FIT)
	History	he is wating for endoscopy: note to admin to chase his appt (on e-bokking as goner to stright toi test)
	History	he is abobut to sue scottish govt about hx of abuse when he was a child under their care and soe needs ful set of medical record note on emis dating to 1982 but minuiimal problem titltes for instance note to admin to check if we have paper notes and let me know so I can let him know
16-Mar-2026 15:42		Enterprise consultation (Tower Hamlets Network 2 PCN) NADIMA, Jamila (Ms)
	Comment	111 Worklist - Appt booked @ 15:00 on 18/03/26 as per SDA GP.
16-Mar-2026 13:15		accuRx Consultation HASSAN, Muntaiha (Miss)
	Comment	Dear Mr Kerr,The practice will be closed from 1PM tomorrow (Tuesday 7.03.2026) due to staff training, we will re open as usual on (Wednesday) at 8:00AM, for any urgent medical advice please call NHS 111.Thanks, Health E1NHS app message sent on 16/03/2026 13:15:14
16-Mar-2026		Inbound Document (HEALTH E1) ALDRIDGE, Kate (Dr) Entered By: EXTERNAL USER, ()
	Document	NHS 111 report received 📄 NHS 111 Report
16-Mar-2026		Enterprise consultation (Tower Hamlets Network 2 PCN) ISLAM, Sumaia (Miss) Entered By: EXTERNAL USER, ()
	Document	Clinical document 📄 NHS 111 Report
10-Mar-2026 15:40		Administration note (Health E1, Homeless Medical Centre) HURST, Catherine (Mrs)
	Problem	Mental health review (Review)
	History	No change with mirtazapine 15mg No increase of suicidal thoughts which ahs been psotive as had sereve reaction with this to Fluoxetine and Sertraline Discussed that there may be limited impact of AD as suspects he may have ADHD and CPTSD Currently having intensive therapy with Acorn house Will explore ADHD ref when he leave Acorn house Discussed that we can trail increase to 30mg for mirtazapine. I would not recommended going higher then this to 45mg. Review again in 2 months time. If no change in this time, review to stop and consider alternative
	Comment	Colin to book back in two months time, or eariler if needed
04-Mar-2026 12:39		Accurx Consultation BRAHMAVARA SHANKARA, Rajesh Kumar (Mr)
	Comment	Email sent to outside agency (finding) omneshealthcare.tnw@nhs.net Dear Colleague,RE: Colin Kerr, 29-Nov-1979, 624 191 1090, MalePlease find attached a referral for the above patient for your attention.Raj PhysioHealth E1Attachments: Referral

for ultrasound investigation KERR, Colin (Mr) 1234 04-Mar-2026.rtf

04-Mar-2026 11:46	Accurx Consultation BRAHMAVARA SHANKARA, Rajesh Kumar (Mr)
Comment	E-mail sent to patient Dear Mr Kerr,Hi,Please find the exercises attachedTo view your attachment, please follow this link: https://accurx.nhs.uk/c/p-ew836nbruqRaj PhysioHealth E1Sent on 04/03/2026 at 11:46 Email sent to: colinkerr881@gmail.com
04-Mar-2026 11:26	Face to face consultation (Health E1, Homeless Medical Centre) BRAHMAVARA SHANKARA, Rajesh Kumar (Mr)
Problem	Shoulder pain (First)
History	History / symptoms - ongoing left shoulder pain and stiffness for 5-6months following lifting heavy at the gym. no h/o fall or trauma ICE; due to gym activities caused this. worried not getting better. examine and advice no parasthesia, no chest pain, no breathlessness, no nausea, no peripheral jt swelling, no skin changes, no elevated temperature, no persistent cough agg> lifting, carrying, overhead activities eases; rest rehab. chef by trade Ambidextrous - right dominant FMH: none used to do gym- dead lift 40 kg. bench press- stopped doing exs
Comment	Subacromial impingement Laterality: Left will request US scan of the left shoulder to rule out any soft tissue pathology- pt consented
Procedure	Exercise on prescription HEP- given exs and demonstrated the exs Advice given -agreed shared decision on shoulder pain diagnosis, management and prognosis. awaiting US scan result, pt agreed to self-manage. Advise, education and reassurance given on shoulder pain symptoms and management- pt understood. if the symptoms not improved in 6-8 weeks r/v physio. redflags safety net discussed. Lifestyle education posture and swimming advised
Additional	Seen by first contact physiotherapist Informed consent for procedure pt said yes No red flag symptoms
Assessment	Examination / signs VAS 1/10 and worst 10/10 AROM of the left shoulder flexion and abd is 80 degrees with pain, IR hand can reach lower lumbar region and others full with ERP PROM of the left shoulder flexion and abd is 150 degrees with pain and others full with ERP O/E - tenderness/pain over the ACJ and anterior shoulder region. no swelling, no redness and no deformity Muscle weakness - left rotator cuff, MMT 4/5. Clusters of shoulder test +ve for the impingement.
04-Mar-2026	Health E1, Homeless Medical Centre BRAHMAVARA SHANKARA, Rajesh Kumar (Mr)
Document	Referral for ultrasound investigation (RP) Direct Access Non-Obstetric Ultrasound referral TNW CEG v5.1
27-Feb-2026 18:00	accuRx Consultation DAHAL, Aanchal (Miss)
Comment	Email sent to: colinkerr881@gmail.com E-mail sent to patient Dear Mr Kerr,We now offer access to a self-management app to aid recovery from your muscle or joint problem. To get started, please read the attachment provided, then click https://getubetter.org/4jpusR6 select a condition, enter your email address and click send. If you do not have any muscle or joint problems, please ignore.Thanks,To view your attachment, please follow this link: https://accurx.nhs.uk/c/p-nytcxbz4s Health E1Email sent on 27/02/2026 18:00:27
25-Feb-2026 13:05	accuRx Consultation KAN, Rachelle (Ms)
Comment	Dear Mr Kerr,The practice will be closed from 1PM tomorrow (Thursday 26.02.2026) due to staff training, we will re open as usual on (Friday 27.02.2026) at 08AM, for any urgent medical advice please call NHS 111 Thanks, Health E1NHS app message sent on 25/02/2026 13:05:50
24-Feb-2026 16:07	Administration note (Health E1, Homeless Medical Centre) HURST, Catherine (Mrs)

Comment	Check in Call Had the flu has been physically tired from this Commence mirtazepine - no suicidal thoughts trigger This is improvement then previous trail of 2 SSRI Tiredness Se and sleep disturbance Happy to continue for next 2 week and come back for f2f rview
18-Feb-2026 10:01	Telephone consultation (Health E1, Homeless Medical Centre) CUPPOOR, Souvita (Mrs)
Problem	Low back pain (New)
History	telephone encounter Name and date of birth confirmed Has history of low back pain Reports whole body joint pain , sometimes feels like a sudden sharp pain which last for only few seconds . Says he mentioned this several times but it has never been disgnosed says he is using naproxen but not enough effective Currently on rehabilitation at Acorn house. He is not allowed to use opiates He is uable to come for a f2f appointment Asking for stronger analgesia He has never been seen by FCP Agreed to be assessed by FCP
Medication	Nefopam 30mg tablets Take Two Tablets Three Times A Day 84 tablet
Comment	To try nefopam Advised to book appointmnet with FCP
17-Feb-2026 15:39	Administration note (Health E1, Homeless Medical Centre) HURST, Catherine (Mrs)
Problem	Mental health review (Review)
History	f2f Been to rehab 9 times. Currently at Acorn house been there 3 months Feels has waves of anxiety that is very bad Sertraline prescribed previously said it made him more suicidal. Feel anxiety made it much worse and started taking benzos in Rehab Attending AA 4 meetings a week Has a girlfriend that lives in sutton One friend since h was in childhood, but they haven't met up or talked in person. Long chat about options with anxiety and limited evidence in PTSD and CPTSD Colin is very keen to try soemthing Negative reaction to two SSRI sertraline and Fluoxetine of increased anxiety Agreed trail of Mirtazapine 15mg I will call back next week and check in I have advised not to commence until he has spoken to Acorn house For weekly check in initally Aware of SE No allergies No other medications ADHD - Explored breifly advised to look into this after rehab has finished
Medication	Mirtazapine 15mg tablets One To Be Taken At Night 28 tablet
21-Jan-2026 17:06	Outbound Referral (Health E1, Homeless Medical Centre) BURRIDGE, Matthew (Dr)
Document	e-RS Letter (21-Jan-2026) NHS e-Referral UBRN 000471029256 for Orthopaedic referral, NHS e-RS UBRN 000471029256 for Orthopaedic referral
Referral	Orthopaedic referral To: NHS e-Referral Service
21-Jan-2026 17:02	Health E1, Homeless Medical Centre BURRIDGE, Matthew (Dr)
Document	Referral for further care Summary of prev Ortho referral March 2025
21-Jan-2026 16:37	Face to face consultation (Health E1, Homeless Medical Centre) BURRIDGE, Matthew (Dr)
History	came to follow upo about appts booked he has been referred stright to triage for endoscopy, so whould be sent appt (depite e-

booking saying that it has been cancelled)
he awaits MH review: our MH nurse is on annual leave
he is asking about referral for his knee: was unable to complete when presented due to a computer problem

19-Jan-2026 18:14	accuRx Consultation AHMED, Jamil (Mr)
Comment	Dear Mr Kerr, The practice will be closed from 1PM tomorrow (Tuesday 20/01/26) due to staff training, we will re open as usual on Wednesday (21/01/26) at 08AM, for any urgent medical advice please call NHS 111 Thanks, Health E1 NHS app message sent on 19/01/2026 18:14:11
17-Jan-2026 11:31	Externally Entered BURRIDGE, Matthew (Dr) Entered By: , System User ()
Lab Results	! Urea and electrolytes (15-Jan-2026) (MB) - just outside normal range - no action
17-Jan-2026 06:41	Externally Entered BURRIDGE, Matthew (Dr) Entered By: , System User ()
Lab Results	TESTOSTERONE LEVEL (15-Jan-2026) (MB) - Normal - no action ! Liver function test (15-Jan-2026) (MB) - just outside normal range - no action Thyroid function test (15-Jan-2026) (MB) - Normal - no action
16-Jan-2026 15:31	Externally Entered CUPPOOR, Souvita (Mrs) Entered By: , System User ()
Lab Results	HbA1c level (DCCT aligned) (15-Jan-2026) (Souvita) - Normal - no action
15-Jan-2026 10:09	Face to face consultation (Health E1, Homeless Medical Centre) OJUOLAPE, Olaoluwa Omoniyi (Ms)
Comment	Blood sample taken with consent and sent to Lab
Procedure	First MMR (measles mumps and rubella) vaccination declined Administration of second dose of measles and mumps and rubella vaccine declined
Additional	Seasonal influenza vaccination declined
14-Jan-2026 16:27	Face to face consultation (Health E1, Homeless Medical Centre) BURRIDGE, Matthew (Dr)
Problem	Reduced libido (Review)
History	I note prev consultation he is worried about his prostate has low libido Also has issues with memory and concentration, mind wanders during session at AA for Acorn House aches and pains urinary frequency Googling Sx made him worried about prostate
Examination	PR examination: normal prostate felt on palpation
Comment	Discussed some of his Sx could be Sx of depression note he is in rehab in Acorn house he requested prostate examination as worried about this: normal Examination agreed to bloods inc testosterone and see with results
Test Request	BLT Blood Sciences - Unknown specimen Test Request : Testosterone Test Request : Renal Profile Test Request : Liver Function Tests (LFT) Test Request : Thyroid Function Tests Test Request : HbA1c
Problem	Mental health review (First)
History	Some of the Sx he presented with today, recorded attached may be as part of mental health presentation he has asked for mental health assessment note sent to KS to arrange a routine MH appt

13-Jan-2026 10:53	Accurx Consultation HASSAN, Muntaiha (Miss)
Comment	Patient mobile telephone number 447555585417 SMS text message sent to patient Dear Mr Kerr, Please book a face to face appointment with Dr Burrridge for physical assessment. Thanks, Health E1 Sent on 13/01/2026 at 10:53
13-Jan-2026 09:39	Telephone consultation (Health E1, Homeless Medical Centre) CUPPOOR, Souvita (Mrs)
Problem	Reduced libido (First)
History	Telephone encounter Identity check done Patient name was added to my list as consultation to discuss 'Private matter' Drop in libido for few month denies any abnormal penile discharge or scrotal pain Feels tired most of the time Felt numbness on left arm on one occasion but did not last long Denies head ache/ chest pain / shortness of breath/ dizziness, nausea & Vomiting/ muscle weakness or slurred speech, No h/o of raised BP , recent blood pressure was normal Asking for prostate check up because of his age. Worried and concerned ,he may have an enlarged prostate Report increased frequency and urgency of urination ex smoker , non alcoholic Advised he needs a physical assessment
Comment	Tasked admin team to book an appointment with Dr M.B
31-Dec-2025 08:56	accuRx Consultation AHMED, Jamil (Mr)
Comment	Dear Mr Kerr, The practice will be closed tomorrow for NEW YEARS DAY we will re open again as normal from 08AM on Friday. For any urgent medical advice please contact NHS 111 Thanks, Health E1 NHS app message sent on 31/12/2025 08:56:13
30-Dec-2025	Health E1, Homeless Medical Centre ISLAM, Amin (Mr)
Document	Clinical document 📄 GP2GP Degraded Events
30-Dec-2025	Health E1, Homeless Medical Centre ISLAM, Amin (Mr)
Document	Clinical document 📄 GP2GP Degraded Allergies
29-Dec-2025 08:16	HEALTH E1 MENSAH, Raphaela (Dr) Entered By: KAN, Rachelle (Ms)
Comment	(31-Dec-2025) Routine OGD then discharge back to GP with results
Document	Advice and guidance response received 📄 Gastroenterology Advice & Guidance response received (29-Dec-2025)-ERS
24-Dec-2025 19:04	accuRx Consultation HASSAN, Muntaiha (Miss)
Comment	Dear Mr Kerr, The practice will be closed on 25 and 26 December 2025 and will reopen on 29 December 2025. If you need urgent medical help while we are closed, please contact NHS 111 or 999 in an emergency. We wish all our patients a very Merry Christmas. Thanks, Health E1 NHS app message sent on 24/12/2025 19:04:18
24-Dec-2025 13:14	Administration note (Health E1, Homeless Medical Centre) BURRIDGE, Matthew (Dr)
Document	e-RS Letter (24-Dec-2025) 📄 NHS e-Referral UBRN 000469379734 for Gastroenterological referral, NHS e-RS UBRN 000469379734 for Gastroenterological referral
Referral	Gastroenterological referral To: NHS e-Referral Service
23-Dec-2025 12:48	HEALTH E1 BURRIDGE, Matthew (Dr) Entered By: KAN, Rachelle (Ms)
Comment	(24-Dec-2025) I have re-sent the referral
Document	Administration note 📄 triage response (23-Dec-2025) from ERS
22-Dec-2025 08:26	Administration note (Health E1, Homeless Medical Centre) BURRIDGE, Matthew (Dr)
Follow up	Diary Entry Medication review (20-Jun-2026)
Regime Review	Medication review with patient (11-Dec-2025)
17-Dec-2025 16:25	accuRx Consultation KAN, Rachelle (Ms)
Comment	Dear Mr Kerr, The practice will be closed from 1pm tomorrow due to staff training. We will



re-open on Friday 8am. for any emergency, please call NHS 111
Health E1 NHS app message sent on 17/12/2025 16:25:48

11-Dec-2025 12:11	Face to face consultation (Health E1, Homeless Medical Centre) BURRIDGE, Matthew (Dr)
Problem	Abdominal pain (Review)
History	seen initially by medical student Reviewing notes he has been referred for endoscopy but not seen, negative H pylori in Aug 2025
Comment	Referral done end sent Editted 17.12.25: as e-referral not working had to return to sewnd the referral throuhg e-referral system
Document	Referral for gastroscopy 📄 (RP) Straight to triage and Gastrointestinal referral CEG TH v7.1 e-RS Letter (11-Dec-2025) 📄 NHS e-Referral UBRN 000468545534 for Gastroenterological referral, NHS e-RS UBRN 000468545534 for Gastroenterological referral e-RS Letter (11-Dec-2025) 📄 NHS e-Referral UBRN 000469233131 for Gastroenterological referral, NHS e-RS UBRN 000469233131 for Gastroenterological referral
Referral	Gastroenterological referral To: NHS e-Referral Service Gastroenterological referral To: NHS e-Referral Service
Problem	Knee injury (First)
History	meniscal injury: referred in the past but due to moving aroundf a lot has not been seen
Comment	Tried to refer for this today but computer stopped working, so will need to do this amnother time
11-Dec-2025 11:31	Externally Entered BURRIDGE, Matthew (Dr) Entered By: , System User ()
Lab Results	HCV IgG (09-Dec-2025) (MB) - Normal - no action HBsAg (09-Dec-2025) (MB) - Normal - no action HIV antibody level (09-Dec-2025) (MB) - Normal - no action Anti HBc (total) (09-Dec-2025) (MB) - Normal - no action Syphilis serology (09-Dec-2025) (MB) - Normal - no action
11-Dec-2025 07:11	Externally Entered BURRIDGE, Matthew (Dr) Entered By: , System User ()
Lab Results	Urea and electrolytes (09-Dec-2025) (MB) - Normal - no action Liver function test (09-Dec-2025) (MB) - Normal - no action ! Serum HDL cholesterol level (09-Dec-2025) (MB) - just outside normal range - no action
11-Dec-2025 07:11	Externally Entered BURRIDGE, Matthew (Dr) Entered By: , System User ()
Lab Results	HbA1c level (DCCT aligned) (09-Dec-2025) (MB) - Normal - no action
11-Dec-2025	Health E1, Homeless Medical Centre BURRIDGE, Matthew (Dr)
Document	Referral for endoscopy 📄 Endoscopy Referral (Village Health Group)
10-Dec-2025 17:11	Externally Entered BURRIDGE, Matthew (Dr) Entered By: , System User ()
Lab Results	Chlam trach nucleic acid detn (09-Dec-2025) (MB) - Normal - no action Sample Data Query (09-Dec-2025) (MB) - Normal - no action
10-Dec-2025 14:10	Telephone consultation (Health E1, Homeless Medical Centre) BURRIDGE, Matthew (Dr)
Problem	Abdominal pain (Review)
History	asking for omeprazole and famotidine Also asking for copy of sick note done in August says that he has been referred for endoscpy in the past but now will need repreferral
Medication	(NOT ISSUED) Famotidine 20mg tablets One To Be Taken At Night, 28 tablet Omeprazole 20mg gastro-resistant capsules One To Be Taken Each Day 28 capsule
Comment	copy of sick not emeialed to adress he gave Rx for omprazole done: disucssed Famotidine: no clear indiaction for both so to continue ppi only see f2f to disucss endoscopy issue

10-Dec-2025	Inbound Document BURRIDGE, Matthew (Dr) Entered By: EXTERNAL USER, ()	
Comment	"Thank you for your recent eConsult request. It will be much easier for us to see you face to face to address these issues: please come and see us tomorrow: we have appointments that can be booked that day (only) so either call from 8am to book or just come to the surgery, first appointment is 9am"	
Document	eConsultation via online application 📄 (10-Dec-2025) Clinical document	
09-Dec-2025 17:29	Accurx Consultation AHMED, Jamil (Mr)	
Comment	Patient mobile telephone number SMS text message sent to patient Dear Mr Kerr, please contact the practice to repeat your blood test Thanks, Health E1 Scheduled to send on 09/02/2026 18:00:00	
09-Dec-2025 15:41	Externally Entered MURPHY DE SOUZA, Theresa (Dr) Entered By: , System User ()	
Comment	Mean corpuscular haemoglobin concentration above reference range , remainder of FBC results normal, no recent haematological events, PVD>CHD etc advised repeat in 8 weeks	
Lab Results	! Full blood count - FBC (TMDS) - Abnormal - contact patient	
09-Dec-2025 08:57	Face to face consultation (Health E1, Homeless Medical Centre) BARDOSHI, Blerjana (Ms)	
History	Patient allocated named accountable general practitioner Named GP is: Matthew Informing patient of named accountable general practitioner • No known disability • Not a carer • Up-to-date with immunisations • Ex-smoker • GPPAQ not in employment • GPPAQ hours in last week spent cycling - none • GPPAQ hrs in last wk spent in physical exercise - 3hrs or more	
Examination	Standing height 188 cm • Body weight 79 kg • Body mass index 22.4 kg/m2 • O/E - blood pressure reading 115/87 mmHg • Pulse rate 72 beats/min • General practice physical activity questionnaire physical activity index: active	
Comment	Blood sample taken	
Result	Patient's next of kin none Urine protein test negative • Urine glucose test negative • Urine blood test = negative	
Family History	FH: Ischaemic heart dis. <60 Family member: Grandfather Family Member: No family history diabetes Family Member: No FH: Stroke/TIA Family member:	
Social	Living in hostel • Single • Heterosexual • Christian • Able to demonstrate health literacy • Housing adequate • Income sufficient to meet needs • Not socially isolated	
Test Request	BLT Virology - Unknown specimen Test Request : HCV IgG Test Request : Sexual Health Screening HIV, Hep B, Syphilis Test Request : CT/GC DNA Urine BLT Blood Sciences - Unknown specimen Test Request : Renal Profile Test Request : Liver Function Tests (LFT) Test Request : HDL with total cholesterol & non-HDL cholesterol Test Request : Full Blood Count Test Request : HbA1c	
Additional	NHS Health Check verbal invitation • New patient screening done • Consultation • Specialised sexual health enhanced service completed • Chlamydia test offered • HIV screening declined • Syphilis screening declined • Hepatitis B screening declined • Hepatitis C screening declined • Scottish - ethnic category 2001 census • Born in Scotland • Main spoken language English Weight monitoring Current weight 79kg (12st 6lb. Based on NICE guidance (NG246) and height entry (09-Dec-2025) a healthy weight is likely to be 65 - 88kg (10st 3lb - 13st 12lb). For higher risk populations (South Asian, Chinese, other Asian, Middle Eastern, Black African, or African-Caribbean) the upper weight limit is lower 65 - 81kg (10st 3lb - 12st 11lb).	

	Quality of life assessment completed
Assessment	Alcohol consumption 0 U/week • AUDIT-C (Alcohol Use Disorders Identification Test - Consumption) score 0 /12 • NHS Health Check completed
09-Dec-2025 08:49	Accurx Consultation SHEPPARD, Helen (Dr) Entered By: , System User ()
Comment	Online questionnaire completed by patient Dear Mr Kerr,I can issue a short course of Omeprazole but please book in for a medication review. Please can you confirm which pharmacy to send to , your current nomination is postcode E2 7QB.thank youDr SheppardBenhill & Belmont PracticeResponse:Yes thats great . The Columbia pharmacy E1 is the correct pharmacy I am not currently in tge Sutton Aria.Â Thankyou. Received on: 09/12/2025 at 08:08
09-Dec-2025 07:55	Accurx Consultation SHEPPARD, Helen (Dr) Entered By: , System User ()
Comment	Patient mobile telephone number SMS text message sent to patient Dear Mr Kerr,I can issue a short course of Omeprazole but please book in for a medication review. Please can you confirm which pharmacy to send to , your current nomination is postcode E2 7QB.thank youTO RESPOND, please follow this link: https://accurx.nhs.uk/c/p-xf7ssfer9vDr SheppardBenhill & Belmont Practice Scheduled to send on 09/12/2025 08:00:00
08-Dec-2025 08:23	Accurx Consultation SOBRATTY, Irfaan (Mr)
Comment	Patient mobile telephone number 447555585417 SMS text message sent to patient Dear Mr Kerr,please contact us to book appointment with the nurse for a health check to complete your registration.Irfaan SobrattyHealth E1Sent on 08/12/2025 at 08:23
08-Dec-2025 08:21	Health E1, Homeless Medical Centre SOBRATTY, Irfaan (Mr)
Document	Patient registration 📄 Patient registration (08-Dec-2025)
04-Dec-2025 14:50	Accurx Consultation GATESON, Kim (Mrs) Entered By: , System User ()
Comment	Administration note Patient mobile telephone number 447555585417 SMS text message sent to patient Dear Mr Kerr,If you would like to contact the practice via email our address is :-swlicb.correspondenceh85031@nhs.netThanks, Kim GatesonBenhill & Belmont PracticeSent on 04/12/2025 at 14:50
04-Dec-2025 12:32	Accurx Consultation RODRIGUEZ-BENITO, Laura (Dr) Entered By: , System User ()
Comment	Patient mobile telephone number 447555585417 SMS text message sent to patient Dear Mr Kerr,I have received your medication request. Please book a routine appointment with your usual GP. Thanks, Dr Rodriguez BenitoBenhill & Belmont PracticeSent on 04/12/2025 at 12:32
30-Nov-2025 12:30	Administration note (Circle MSK) ZZ020, RPABot () Entered By: , System User ()
Additional	Clinician MSK-HQ https://e-forms.circlehealthgroup.co.uk/MSKHQ/MSKHQ/?ID=yzfi5xtt&FormType=Clinician
23-Nov-2025 17:13	Administration note (Circle MSK) ZZ020, RPABot () Entered By: , System User ()
Additional	Clinician MSK-HQ https://e-forms.circlehealthgroup.co.uk/MSKHQ/MSKHQ/?ID=yzfi5xtt&FormType=Clinician
01-Nov-2025 22:02	Administration note (Circle MSK) ZZ024, RPABot () Entered By: , System User ()
Additional	Record Attachment 📎 Letter to PatientsSender: Circle MSKRecipient: Mr Colin KerrSent: 01 Nov 2025 22:05 Record Attachment 📎 NHSmailSender: RPABot Zz024Recipient: Village Health Group (C84005)Sent: 01 Nov 2025 22:06Notes: Sent via NHSmail to: nnicb-nn.vhg@nhs.netOriginally sent Letter to Patients from Circle MSK to Mr Colin Kerr on 01




Nov 2025 22:02

01-Nov-2025 08:27		GP Surgery (Circle MSK) SHAHZAD, Ali () Entered By: , System User ()
	Additional	Consultation via video conference Short message service text message sent to patient Dear Mr Kerr,I'm ready to start our consultation via video. Please enable audio and video. Click the link below to join and wait for me to connect.To join, please follow this link: (link will autogenerate here)Thanks, Ali ShahzadCircle MSK Patient telephone number 07555 595417
01-Nov-2025 08:26		Telephone consultation (Circle MSK) SHAHZAD, Ali () Entered By: , System User ()
	Additional	No response to the video link, tried mobile 4 times but the call did not go through or kept failing for some reason.
01-Nov-2025 08:20		DNA (Circle MSK) SHAHZAD, Ali () Entered By: , System User ()
	Additional	Did not attend for APP Virtual appointment with Ali Shahzad. Did not attend
01-Nov-2025		GP Surgery (Village Health Group) KERRY, Charlotte (Miss) Entered By: , System User ()
	Additional	didnt attend appt pt to contact within 2wks to re-bookotherwise will discharge Did not attend hospital appointment (New Episode)
01-Nov-2025		Letter (Village Health Group) KERRY, Charlotte (Miss) Entered By: , System User ()
	Additional	Scanned Image  DNA LetterSender: Circle MSKRecipient: Village Health GroupSent: 03 Nov 2025 15:23
27-Oct-2025 14:36		Administration note (Benhill Surgery) MADDISON, Rhys (Mr) Entered By: , System User ()
	History	called pt again - see below notes pt confirmed doses of medication in sutton until december planned endoscopy in leicester to review medication communication problems with previous practice - unsure if has an endoscopy appt at leicester advised book for GP appt with practice if needed nominated mulgrave road pharmacy as closest - advised pt if problems with EPS due to temp registration, contact practice
27-Oct-2025 10:29		Administration note (Benhill Surgery) MADDISON, Rhys (Mr) Entered By: , System User ()
	History	See email from pt 23/10/25 temp patient registered with practice email contains letter from Leicester hospital ED dated 20/9/25 letter confirms addition of famotidine to PPI unable to obtain prescription from regular GP pictures attached showing medication strength and dose
	Medication	(NOT ISSUED) Omeprazole 20mg gastro-resistant capsules Two To Be Taken Each Day, 28 capsule (NOT ISSUED) Famotidine 20mg tablets Two To Be Taken Each Day, 28 tablet
	Comment	Failed encounter - message left on answer machine
24-Oct-2025		Docman DOCMAN, dr (Mr) Entered By: , System User ()
	Additional	Attachment  Temporary registration form
23-Oct-2025 12:11		Accurx Consultation DUNNING, Mary (Mrs) Entered By: , System User ()
	Comment	Administration note Patient mobile telephone number 447555585417

SMS text message sent to patient Dear Mr Kerr,If you would like to contact the practice via email our address is :-swlicb.correspondenceh85031@nhs.netKind regards, MaryBenhill & Belmont PracticeSent on 23/10/2025 at 12:11

23-Oct-2025 12:01	Accurx Consultation LAWLESS, Sally (Mrs) Entered By: , System User ()
Comment	Administration note Patient mobile telephone number 447555595417 SMS text message sent to patient Dear Mr Kerr,If you would like to contact the practice via email our address is :-swlicb.correspondenceh85031@nhs.netKind Regards, SallyBenhill & Belmont PracticeSent on 23/10/2025 at 12:01
23-Oct-2025 12:01	Accurx Consultation LAWLESS, Sally (Mrs) Entered By: , System User ()
Comment	Patient mobile telephone number 447555595417 SMS text message sent to patient Dear Mr Kerr,Please reply to this message with photos of your medication.TO RESPOND, please follow this link: https://accurx.nhs.uk/c/p-haw9sjbspj Kind Regards, SallyBenhill & Belmont PracticeSent on 23/10/2025 at 12:01
23-Oct-2025 11:49	Accurx Consultation LAWLESS, Sally (Mrs) Entered By: , System User ()
Comment	Administration note Patient mobile telephone number 447555595417 SMS text message sent to patient Dear Mr Kerr,If you would like to contact the practice via email our address is :-swlicb.correspondenceh85031@nhs.netKind Regards, SallyBenhill & Belmont PracticeSent on 23/10/2025 at 11:49
23-Oct-2025 11:48	Accurx Consultation LAWLESS, Sally (Mrs) Entered By: , System User ()
Comment	Patient mobile telephone number 447555595417 SMS text message sent to patient Dear Mr Kerr,Please reply to this message with your medication information. TO RESPOND, please follow this link: https://accurx.nhs.uk/c/p-9t9egxqef2 Kind Regards, SallyBenhill & Belmont PracticeSent on 23/10/2025 at 11:48
23-Oct-2025	Docman DOCMAN, dr (Mr) Entered By: , System User ()
Additional	Attachment  Letter From Patient Other
20-Oct-2025 14:53	Administration note (Circle MSK) RUGGIERO, Damiano () Entered By: , System User ()
Additional	Pt booked from APP and GPwER VIRTUAL waiting list Record Attachment  Appointment LetterSender: Damiano Ruggiero (Circle MSK)Recipient: Mr Colin KerrSent: 20 Oct 2025 14:55
20-Oct-2025 14:34	Accurx Consultation PASSERA-HUGHES, Gina (Ms) Entered By: , System User ()
Comment	Patient allocated named accountable general practitioner Patient mobile telephone number 447555595417 SMS text message sent to patient Dear Mr Kerr,Welcome to our practice.I can confirm that you are now Temporarily registered with Benhill and Belmont GP Centre. Your registered GP is Dr SheppardYou've been registered under Belmont site:10 Hardegray Close,Belmont,SM2 5FQ0208 642 0920If you wish to sign up for Online services, please do this directly through the NHS app. https://www.nhs.uk/nhs-app/ Thanks, Gina Passera-HughesBenhill & Belmont PracticeSent on 20/10/2025 at 14:34
16-Oct-2025 14:04	Administration note (Village Health Group) MUMFORD, Matthew (Mr) Entered By: , System User ()
Additional	Record Attachment  E-mailSender: Mr Matthew MumfordSent: 16 Oct 2025 14:04Notes: NHS App Support Drop in Session - East Leake Short message service text message sent to patient
07-Oct-2025 13:08	Administration note (Village Health Group) MUMFORD, Matthew (Mr) Entered By: , System User ()
Additional	Record Attachment  E-mailSender: Mr Matthew MumfordSent: 07 Oct 2025 13:09Notes:

NHS App Support Drop in Session
Short message service text message sent to patient


21-Sep-2025	GP Surgery (Village Health Group) KERRY, Charlotte (Miss) Entered By: , System User ()
Additional	requesting prescription prescription provided - wanted white prescription for hosp pharmacydischarged no referral Seen in accident and emergency department
21-Sep-2025	Letter (Village Health Group) KERRY, Charlotte (Miss) Entered By: , System User ()
Additional	Scanned Image  Accident and Emergency LetterSender: Leicester Royal InfirmaryRecipient: Village Health GroupSent: 06 Oct 2025 11:50
20-Sep-2025 16:07	Administration note (University Hospitals of Leicester NHS Trust - EPR) UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST - EPR Entered By: , System User ()
Additional	Other: MISS CLAIRE LYONS Hospital number: S5475029 (Primary PAS ID) at University Hospitals of Leicester NHS Trust
16-Sep-2025 14:18	Administration note (Village Health Group) MUMFORD, Matthew (Mr) Entered By: , System User ()
Additional	Record Attachment  E-mailSender: Mr Matthew MumfordSent: 16 Sep 2025 14:19Notes: NHS App Support Drop in Session - Keyworth (VHG) Short message service text message sent to patient
09-Sep-2025 11:11	Administration note (Village Health Group) SAHOTA, Gurvinder (Dr) Entered By: , System User ()
Medication	Sertraline 50mg tablets Take ONE tablet ONCE daily 28 tablet
02-Sep-2025 09:16	Telephone consultation (Village Health Group) AGBOOLA, Adedamola (Dr) Entered By: , System User ()
Additional	TC- ID confrimed currently in teen challenge rehab started on sertraline 50mg- see previous NJ says mood still same and maybe a lil worse denies any other side effect otherwise at baseline state of health I explained that no surprises that he hasnt experienced postive effects yet as it takes 4- 6weeks on average no significant side effects noted continue current dose if notices any new or woersening signsm then to let us know - as discussed previously
30-Aug-2025 11:11	Triage (Circle MSK) SLAVIN, Jean () Entered By: , System User ()
Additional	Level 4 APP Face-to-Face - Knee - Right Level 4 • Right • Knee joint • Referral to community musculoskeletal service • Appropriate triage decision • Triage
27-Aug-2025	Letter (Village Health Group) ABELL, Alison (Mrs) Entered By: , System User ()
Additional	Scanned Image  DWP ReportsSender: Village Health GroupRecipient: Village Health GroupSent: 27 Aug 2025 12:57
26-Aug-2025 15:03	Administration note (Circle MSK) WARD, Keefa () Entered By: , System User ()
Additional	Outcome recorded: Appointment to be made at a later date (Community) - Appointment 15 Aug 2025 13:30 - 13:50
24-Aug-2025 08:49	Administration note (Village Health Group) BURTON, Leanne () Entered By: , System User ()
Medication	Omeprazole 20mg gastro-resistant capsules One or two To Be Taken Each Day 56 capsule
21-Aug-2025 11:57	Administration note (Village Health Group) ABELL, Alison (Mrs) Entered By: , System User ()

Additional	Miscellaneous administrative request (21 Aug 2025 11:57) Miscellaneous administrative request (21 Aug 2025 11:57)
19-Aug-2025 18:04	Administration note (Village Health Group) AGBOOLA, Adedamola (Dr) Entered By: , System User ()
Medication	Sertraline 50mg tablets Take ONE tablet ONCE daily 28 tablet
Additional	discussed in debrief can commence on setraline 50mg review in 2/52 patient in rehab and having counselling . discussed with patient Discussed starting sertraline, explained expected time to effect (4â€“6 weeks).Common side effects explained: GI upset, headache, sleep disturbance, increased anxiety initially.Rare but serious adverse effects highlighted: serotonin syndrome, suicidal thoughts especially in first few weeks, and Advised not to stop suddenly due to risk of withdrawal symptoms; if discontinuing, to taper under medical supervision.Counselling given on avoiding alcohol excess.Patient understands to seek urgent help if suicidal thoughts develop.will review in 2weeks
19-Aug-2025 17:38	GP Surgery (Village Health Group) SAHOTA, Gurvinder (Dr) Entered By: , System User ()
Additional	Discussed with clinical supervisor
19-Aug-2025 16:29	GP Surgery (Village Health Group) AGBOOLA, Adedamola (Dr) Entered By: , System User ()
Additional	seen face to face - see SC complex and traumatic mental health issues since being a child suffers with intense anxiety and mood changes has had to turn to durg and alchol most of his life has been to rehab 9times already and currently in rehab for alchol dependency has had multiple perosnal family tragedy had suicidal ideation and intent in the past but not currently suicidal isolates himself from everyone had put off coming to the doctors upt until today says still struggling intensely with anxiety had used some antidepressants in his 20s but did not adhere to them and subsequently stoped was encouraged by rehab team to speak to GP looks well kept making eye contact during consultation became teary while narrating history shows insight into current problems GAD -7 PHQ-9 Empathised with patient and acknowleged his strength to discuss this already in rehab and getting counselling we discussed possibility of starting antidepressants , ? after rehab or right away will discuss further in deboref if requires further MH review
19-Aug-2025 15:35	Telephone consultation (Village Health Group) AKHTAR, Asifa (Dr) Entered By: , System User ()
Additional	t/c wants tci f2f. wants to see Gp- will get appt
15-Aug-2025 13:34	GP Surgery (Circle MSK) TAYLOR, Mitchell () Entered By: , System User ()
Additional	Short message service text message sent to patient Dear Mr Kerr,I'm ready to start our consultation via video. Please enable audio and video. Click the link below to join and wait for me to connect.To join, please follow this link: (link will autogenerate here)Thanks, Mitch TaylorCircle MSK Patient telephone number 07749 827872 Consultation via video conference
15-Aug-2025 13:32	Telephone consultation (Circle MSK) TAYLOR, Mitchell () Entered By: , System User ()

Additional	<p>Record Attachment 📎 Physiotherapy Discharge</p> <p>Sender: Circle MSK Recipient: The Elm Group (Village Health Group) Sent: 15 Aug 2025 15:24</p> <p>Chronic • Discussion about clinical red flag warning sign • H/O: injury</p> <p>Presenting complaint VCGPC// R knee pain 2 year history of walking out of door felt snap sensation in right knee knees feels weaker compared to left dull ache is constant with sudden sharp pain pain is fluctuating aggs// pivoting, up and down stairs eases// rest, ice waking up at night due to pain reports episodically using crutches due to lack of confidence in knee reports regular giving way of knee, occasional swelling denies clicking, locking denies referring pain up and down leg nil neurological symptoms MRI Jan 2025 shows horizontal medial meniscal tear Sh// currently not working previously liked mountain climbing and bouldering</p> <p>First outpatient appointment date • Consent obtained • Consultation via video conference not available • Telephone consultation • Clinical action • Clinical action</p> <p>Advice about treatment discussed ongoing care patient keen for referral to orthopaedics for surgical intervention as nil improvements of the last two years previously had referral but moved and was advised will need to restart process again A// right medial meniscal tear nil improvements since onset keen for ortho opinion P// refer back to hub to assist towards ortho</p> <p>Current medication nil THREADEye corrective surgery as child DH// omeprazole otherwise fit and well</p> <p>Discharge by person</p>
05-Aug-2025 10:42	<p>Administration note (Village Health Group) AUTO-FILED</p> <p>Entered By: , System User ()</p>
Investigation	Helicobacter pylori IgG antibody level
05-Aug-2025 10:38	<p>GP Surgery (Village Health Group) CHURCH, Molly (Miss)</p> <p>Entered By: , System User ()</p>
Additional	<p>Use of aseptic technique • Informed consent given</p> <p>Venous blood sample Gentle pressure applied to minimise bruising No reported problems or complications encountered. Obtained sample from L ACF on 1st Attempt Patient feels well and puncture site has stopped bleeding Venous blood taken for the requested samples following infection control and practice policy</p> <p>Seen by health care assistant • Advised to self care</p>
31-Jul-2025 11:11	<p>Administration note (Village Health Group) HACKNEY, Molly ()</p> <p>Entered By: , System User ()</p>
Medication	Omeprazole 20mg gastro-resistant capsules One or two To Be Taken Each Day 56 capsule
25-Jul-2025 12:36	<p>Administration note (Circle MSK) HUNT, India ()</p> <p>Entered By: , System User ()</p>
Additional	<p>Initial virtual appt booked through Riviam from physioline. Letter sent via email as letters not to be sent to address.</p> <p>Record Attachment 📎 Appointment Letter</p> <p>Sender: India Hunt (Circle MSK) Recipient: Mr Colin Kerr Sent: 25 Jul 2025 12:38</p>
17-Jul-2025 16:13	<p>Administration note (Circle MSK) SINGHAI, Shreya ()</p> <p>Entered By: , System User ()</p> <p><i>Empty consultation</i></p>
17-Jul-2025 16:13	<p>GP Surgery (Circle MSK) SINGHAI, Shreya ()</p> <p>Entered By: , System User ()</p>
Additional	Event received at 2025-07-17T15:35:26 has been processed by RIVIAM, and Referral Rushcliffe_MSK_Thu-Jul-17-2025_1641 has been created
17-Jul-2025 15:35	<p>Triage (Circle MSK) SLAVIN, Jean ()</p> <p>Entered By: , System User ()</p>
Additional	<p>Level 1 Physioline - Internal - Knee - Right</p> <p>[String] Rota: PhysioLine Appt: Initial Slot: Virtual Initial Skill: None Period: Any Clinician: Any Allow Self-Booking: Yes Body Part: Knee - Right Urgency: Routine</p> <p>Decision making As no conservative management has been tried to date and this is first line management approach for this condition. physio first</p> <p>Level 1 • Knee joint • Right • Internal practice referral • Next appointment • Triage</p>

- Appropriate triage decision

16-Jul-2025 17:52	Administration note (Circle MSK) ONE, RPABot () Entered By: , System User ()
Referral	Referral for further care Status: Discharged From Care (Active)Recorded on: 16 Jul 2025Recorded at: Circle MSK (576812840106)Source of referral: GP - eRSCaseload holder: APP - Circle Integrated CareService offered: RushcliffeCode number: 0004 5833 9328Urgency: RoutineSource of referral: The Elm Group - GP Surgery Village Health GroupDate of referral: 16 Jul 2025 10:01Date of action: 16 Jul 2025 17:54Appointment booked: 25 Jul 2025 12:37Appointment date: 15 Aug 2025 13:30Primary reason for referral: Knee - RightOutcome of referral: AcceptedDischarged: 22 Nov 2025 08:40Reason For discharge: DischargedType(s) of intervention: DNAPatient aware: true (Circle MSK)
16-Jul-2025 09:16	Administration note (Village Health Group) CROXALL, Jan () Entered By: , System User ()
Referral	Referral for endoscopy Spine Referral - UBRN: 000458345842Sender: Mrs Roslyn Stein (Village Health Group)Type: Unspecified ReasonReferrer: Dr Gurvinder Sahota at Village Health Group (NHS Nottingham and Nottinghamshire Icb - 52r)Status: Waiting For InformationReferral Type: HospitalUrgency: RoutineMessage body: H-Pylori test is negative Referral to physiotherapist Spine Referral - UBRN: 000458339328Sender: Jan Croxall (Village Health Group)Type: Unspecified ReasonReferrer: Dr Gurvinder Sahota at Village Health Group (NHS Nottingham and Nottinghamshire Icb - 52r)Status: Waiting For InformationReferral Type: HospitalUrgency: RoutineSummary: Right knee
Additional	Record Attachment 📎 ReferralSender: Dr G Sahota (Village Health Group)Recipient: Mr Colin KerrSent: 16 Jul 2025 10:02 Record Attachment 📎 ReferralSender: Dr G Sahota (Village Health Group)Recipient: Mr Colin KerrSent: 16 Jul 2025 10:31 Referral modes • Choice and booking enhanced services administration • Choice and booking enhanced services administration
16-Jul-2025	Administration note (Circle MSK) PRACTICE, Previous (User) Entered By: , System User ()
Additional	** Care started at: Circle MSK **
16-Jul-2025	Letter (Circle MSK) ONE, RPABot () Entered By: , System User ()
Additional	Scanned Image 📎 Referral In to CICSender: Village Health Group (C84005), GP Email Addresses, RushcliffeRecipient: Circle MSKSent: 16 Jul 2025 17:57
15-Jul-2025 16:21	Administration note (Village Health Group) MUMFORD, Matthew (Mr) Entered By: , System User ()
Additional	Record Attachment 📎 E-mailSender: Mr Matthew MumfordSent: 15 Jul 2025 16:22Notes: NHS App Support Drop in Session - East Leake Short message service text message sent to patient
14-Jul-2025 12:17	GP Surgery (Village Health Group) HARISH, Ravinder (Dr) Entered By: , System User ()
Medication	Cetirizine 10mg tablets Take ONE tablet ONCE daily 30 tablet
Additional	ID confirmed. Past day or two noticed chest a bit wheezy. Cough, non productive, no heamtopysis. Eyes bit itchy and sneezing. Nose bit runny. Bit SOBOE only. No CPs. No smoke/vape. Alert, talking in complete setnences. T36.8, 97% sats, HR 73 HS=I+II+0 Chest: clear, nad Impression: Seasonal allergic rhinitis Trial regualr antihistamine, monitor, contact back for rv if not resolved in 2/52 or sooner if any changes/worsening/concerns, OOH 111.

14-Jul-2025 08:59	Administration note (Village Health Group) CROXALL, Jan () Entered By: , System User ()
Additional	Referral modes
08-Jul-2025 15:09	GP Surgery (Village Health Group) SAHOTA, Gurvinder (Dr) Entered By: , System User ()
Medication	AeroChamber Plus (Trudell Medical UK Ltd) Use as directed with your inhaler. 1 device Clenil Modulite 50micrograms/dose inhaler (Chiesi Ltd) two puffs twice daily 200 dose
Additional	CXR and USS -clear. For inhalewr trial, and for ogd routinely. Also needs MSK for left knee. Trial inhaler, refer msk fo rknee, refer routtine ogd. Get abck to us as needed.
08-Jul-2025 13:39	Administration note (Village Health Group) AUTO-FILED Entered By: , System User ()
Investigation	Serum lipid levels mildly raised as exepcetd, Follow-up action: Other
08-Jul-2025 13:39	Administration note (Village Health Group) AUTO-FILED Entered By: , System User ()
Investigation	! AST serum level mildy raised as expected, Follow-up action: Other
08-Jul-2025 13:39	Administration note (Village Health Group) AUTO-FILED Entered By: , System User ()
Investigation	! Liver function tests mildly raised as exepcetd, Follow-up action: Other
08-Jul-2025 13:39	Administration note (Village Health Group) AUTO-FILED Entered By: , System User ()
Investigation	Haemoglobin A1c level
08-Jul-2025 13:31	Administration note (Village Health Group) PULL, Rebecca (Miss) Entered By: , System User ()
Additional	O/E - blood pressure reading 114/77 mm[Hg] • Body mass index 22.63 kg/m2 • O/E - weight 80 kg • Ideal body weight - Lemmens formula 77.76 kg • White:Eng/Welsh/Scot/Nl/Brit - England and Wales 2011 census • Template entry - EHR category • Alcohol use disorder identificatn test consumptn questionnre 0 Unk UoM • O/E - height 188 cm • Pulse rate 73 {beats}/min • Use of aseptic technique • Informed consent given • Homeless enhanced service completed • Advised to self care • Seen by practice phlebotomist Venous blood sample Gentle pressure applied to minimise bruisingNo reported problems or complications encountered.Obtained sample from L ACF on 1st AttemptPatient feels well and puncture site has stopped bleedingVenous blood taken for the requested samples following infection control and practice policy Alcohol intake 0 {units}/wk • Never smoked tobacco • O/E - pulse rhythm regular • Enjoys heavy exercise • Diet good • Misused drugs in past
04-Jul-2025 14:33	Administration note (Norfolk and Waveney Musculoskeletal Services) TEDORE, Debra (Miss) Entered By: , System User ()
Additional	On FFT, D/C no further contact
04-Jul-2025	Administration note (Norfolk and Waveney Musculoskeletal Services) PRACTICE, Previous (User) Entered By: , System User ()
Additional	** Care ended at Norfolk and Waveney Musculoskeletal Services **
03-Jul-2025 15:10	Administration note (Village Health Group) MINTON, Ann () Entered By: , System User ()
Medication	Omeprazole 20mg gastro-resistant capsules One or two To Be Taken Each Day 56 capsule
30-Jun-2025	GP Surgery (Village Health Group) KERRY, Charlotte (Miss) Entered By: , System User ()
Additional	IMPRESSIONS: No cause for symptoms identified.
30-Jun-2025	Letter (Village Health Group) KERRY, Charlotte (Miss) Entered By: , System User ()
Additional	Scanned Image  Ultrasound or Scan resultsSender: Diagnostic HealthcareRecipient: Village Health GroupSent: 01 Jul 2025 17:37

30-Jun-2025	GP Surgery (Village Health Group) KERRY, Charlotte (Miss) Entered By: , System User ()
Additional	US scan of abdomen
27-Jun-2025 08:01	Administration note (Village Health Group) KERRY, Charlotte (Miss) Entered By: , System User ()
Additional	Other new condition (27 Jun 2025 08:01) Other new condition (27 Jun 2025 08:01)
26-Jun-2025 12:23	Administration note (Village Health Group) GLASGOW, Louise (Dr) Entered By: , System User ()
Medication	Naproxen 500mg tablets Take ONE tablet TWICE a day when required. Take with Omeprazole to protect stomach 56 tablet
20-Jun-2025 10:16	Administration note (Village Health Group) MUMFORD, Matthew (Mr) Entered By: , System User ()
Additional	Record Attachment E-mailSender: Mr Matthew MumfordSent: 20 Jun 2025 10:17Notes: NHS App Support Drop in Session - Keyworth (VHG) Short message service text message sent to patient
16-Jun-2025 15:34	Administration note (Village Health Group) AUTO-FILED Entered By: , System User ()
Investigation	XR CHEST
04-Jun-2025 10:30	Administration note (Village Health Group) PATEL, Meshwa () Entered By: , System User ()
Additional	Date • Urine sample
03-Jun-2025 11:46	GP Surgery (Village Health Group) PEARS, Bryony (Ms) Entered By: , System User ()
Additional	F2F appt, as per SC. Explains had an ongoing cough for 1yr. Was working on an oil rig this time last year, became unwell with chest. Says they airlifted him off and to hospital, ?LRTI, ?PE, but says tests nad. Given abx. Says since then, has had ongoing productive cough. Worse in mornings. Usually swallows sputum, unsure of colour. Occasional sob. No wheeze. No haemoptysis. No pleuritic chest pains. Also getting some occasional stabbing pains in stomach. Worse with movement. No worse with eating. Taking PPI reg. Also asking about pain relief for knee and back. Well. Speaking in full sentences. Sats 97%, pulse 67bpm, temp 36.1c. Chest -ae throughout, no creps, no wheeze. D/w Dr Sahota - for CXR, given tel number to book. For sputum sample. Due uss for liver, suggest await this for view of stomach. If nad and ongoing abdo pains, ?ogd. Consider occupational link to symptoms, ?a+g after tests if concerned.
27-May-2025 16:54	Administration note (Village Health Group) BLOUNT, Andrea (Mrs) Entered By: , System User ()
Referral	Referral to radiologist Spine Referral - UBRN: 000454812633Sender: Mrs Andrea Blount (Village Health Group)Type: Unspecified ReasonReferrer: Dr Neil Fraser at Village Health Group (NHS Nottingham and Nottinghamshire Icb - 52r)Status: Waiting For InformationReferral Type: CommunityUrgency: Routine
Additional	Appointment booked at Keyworth 30/06/2025 @ 1.40 - information sheet posted to patient
Additional	Choice and booking enhanced services administration
27-May-2025 14:46	Telephone consultation (Village Health Group) AKHTAR, Asifa (Dr)

	Entered By: , System User ()
Medication	Amoxicillin 500mg capsules Acute cough/bronchitis (doxycycline unsuitable): Take ONE capsule three times a day for 5 days 15 capsule Omeprazole 20mg gastro-resistant capsules One or two To Be Taken Each Day 56 capsule
Additional	t/c see SC never smoked. no blood. no chest pain./ pleuritic pain. can hear crackles on chest. no sob. no swelling in legs. weight ok appetite fine. has indigestion.. can try abx. advised scan has been ordered. wanting co-codamol- they will speak to team leader. wanting for back/ knee. not had any since at teen challenge
27-May-2025	Administration note (Village Health Group) HALL, Lorna (Mrs) Entered By: , System User ()
Additional	Lloyd George record received No LG paper notes - note to say GP2GP successful
22-May-2025 10:17	Administration note (Village Health Group) FRASER, Neil (Dr) Entered By: , System User ()
Additional	Record Attachment 📎 ReferralSender: Village Health GroupRecipient: Mr Colin KerrSent: 27 May 2025 16:56 Referral modes
21-May-2025 09:21	Administration note (Village Health Group) AKHTAR, Asifa (Dr) Entered By: , System User ()
Additional	eMED3 (2010) new statement issued, not fit for work New MED3 statement issued: Not fit for work - Valid from 14 May 2025 to 14 Aug 2026Condition: in drug rehab/ substance misuse New MED3 statement issued: Not fit for work - Valid from 14 May 2025 to 14 Aug 2026 📎 New MED3 statement issued: Not fit for work - Valid from 14 May 2025 to 14 Aug 2026
19-May-2025 16:17	GP Surgery (Village Health Group) BOAHENG, Elizabeth () Entered By: , System User ()
Medication	Omeprazole 20mg gastro-resistant capsules
Additional	Seen by clinical pharmacist see task new pt - meds rec done with prev surgery template Medicines reconciliation performed
16-May-2025	Letter (Village Health Group) VINTER, Tracey (Mrs) Entered By: , System User ()
Additional	Scanned Image 📎 PharmacySender: Mr Colin KerrRecipient: Village Health GroupSent: 16 May 2025 09:25
13-May-2025 08:40	Administration note (Village Health Group) VINTER, Tracey (Mrs) Entered By: , System User ()
Additional	New patient questionnaire completed • White British - ethnic category 2001 census • Mental health disorder • Alcohol use disorder identificatn test consumptn questionnre 12 Unk UoM • Misuses drugs • Living in temporary housing • Harmful alcohol use • Family history of cancer • O/E - weight 63.73 kg • O/E - height 188 cm • Never smoked tobacco • FH: Hypertension • FH: Myocardial infarction Sister: Nardia Kerr
13-May-2025	Administration note (Village Health Group) PRACTICE, Previous (User) Entered By: , System User ()

	Additional	** Care started at Village Health Group (GMS) **
09-May-2025 15:55		Administration note (Loughborough Urgent Treatment Centre) ADAMBAI, Ayesha () Entered By: , System User ()
	Additional	Record Attachment 📎 Discharge LetterSender: Loughborough Urgent Treatment CentreRecipient: Dr A Lee (Drayton Medical Practice)Sent: 09 May 2025 15:56
09-May-2025 14:38		Administration note (Nottingham University Hospital Trust - EPR Core) NOTTINGHAM UNIVERSITY HOSPITAL TRUST - EPR CORE Entered By: , System User ()
	Referral	Referral for further care CONSULTANT LED CARE, , Nottingham University Hospital Trust - EPR Core, Status: Discharged From Care (Active)Recorded on: 09 May 2025Recorded at: Nottingham University Hospital Trust - EPR Core (553768426569)Source of referral: Other - not initiated by consultantSource of referral: Other - not initiated by consultantDate of referral: 09 May 2025 14:38Specialty of referral: General Internal MedicineDate of action: 09 May 2025 14:38Outcome of referral: AcceptedDischarged: 09 May 2025 19:16Reason For discharge: DischargedPatient aware: true
	Additional	Hospital number: K3772200 (Primary PAS ID) at Nottingham University Hospital Trust
09-May-2025 12:28		GP Surgery (Loughborough Urgent Treatment Centre) BOND, Reiss (Mr) Entered By: , System User ()
	Medication	Flucloxacillin 500mg capsules take two 4 times/day 56 capsule
	Additional	Discharge home • Outcome
09-May-2025 12:20		Administration note (Loughborough Urgent Treatment Centre) PAL, Prishita () Entered By: , System User ()
	Additional	O/E - blood pressure reading 128/86 mm[Hg] • Royal College of Physicians NEWS2 (National Early Warning Score 2) total score 1 Unk UoM • Temperature 36.7 Cel • Pulse rate 106 {beats}/min • Respiratory rate 18 {breaths}/min Presenting complaint Infected wounds Oxygen saturation at periphery 98 %
09-May-2025 12:17		Administration note (Loughborough Urgent Treatment Centre) APETREI, Elena () Entered By: , System User ()
	Additional	Record Attachment 📎 Acrobat Document: 1090.pdf
09-May-2025 12:16		Administration note (Loughborough Urgent Treatment Centre) STACEY, Kate (Sister) Entered By: , System User ()
	Additional	Triage category set to: 2 Very urgent
09-May-2025 12:16		Administration note (Loughborough Urgent Treatment Centre) APETREI, Elena () Entered By: , System User ()
	Referral	Referral for further care Status: Discharged From Care (Active)Recorded on: 09 May 2025Recorded at: Loughborough Urgent Treatment Centre (NNJ07)Date of referral: 09 May 2025 12:16Date of action: 09 May 2025 12:16Outcome of referral: AcceptedDischarged: 12 May 2025 11:51Reason For discharge: DischargedPatient aware: true (Loughborough Urgent Treatment Centre)
09-May-2025		GP Surgery (Village Health Group) BUTCHART, Angela (Mrs) Entered By: , System User ()
	Additional	Abdominal pain, wound.NAD.Treatment not indicated.Discharged Seen in accident and emergency department
09-May-2025		Other report (Healthcare related organisation. Drayton Surgery) MS AVA AU Entered By: , System User ()
	Additional	Seen in urgent care centre 📎 Description: Original text documentSeen in urgent care centre (09-May-2025) Pulse rate 106 {beats}/min Original units: beats/min Tympanic temperature 36.7 Cel Original units: degrees C Baseline SpO2 (oxygen saturation at periphery) 98 % Respiratory rate 18 {Resp}/min Original units: /minute
09-May-2025		Letter (Village Health Group) BUTCHART, Angela (Mrs) Entered By: , System User ()

	Additional	Scanned Image 📄 Accident and Emergency LetterSender: Queens Medical CentreRecipient: Village Health GroupSent: 15 Jul 2025 08:22
08-May-2025		Letter (Village Health Group) VINTER, Tracey (Mrs) Entered By: , System User ()
	Additional	Scanned Image 📄 Consent FormsSender: Mr Colin KerrRecipient: Village Health GroupSent: 13 May 2025 08:53
08-May-2025		Letter (Village Health Group) VINTER, Tracey (Mrs) Entered By: , System User ()
	Additional	Scanned Image 📄 RegistrationSender: Mr Colin KerrRecipient: Village Health GroupSent: 13 May 2025 08:52
25-Mar-2025		GP Surgery (Healthcare related organisation. Horsford) MR ANDREW LEE Entered By: , System User ()
	Additional	Patient offered choice of provider Choice and booking enhanced services administration ERS via Andrew Lee
24-Mar-2025		GP Surgery (Healthcare related organisation. Horsford) DR ROWAN NEEDHAM Entered By: , System User ()
	Follow up	[Inactive] Diary Entry medication review (25-Mar-2026) Status: Pending
	Additional	for USS chat re blood results.no alcohol at all - hisotry of alcohol abuse.ongoing occassional pains - managing with them.omperazole - doubling dose does help.
	Additional	Medication review
03-Mar-2025 08:37		Administration note (Norfolk and Waveney Musculoskeletal Services) AHMED, Mohammed () Entered By: , System User ()
	Additional	Record Attachment 📄 E-mailSender: Mohammed AhmedSent: 03 Mar 2025 08:39Notes: Physiotherapy Information. Appropriate triage decision Longstanding lower back pain with no red flags. ROUTINE 45 MIN F2F / TEL 30 MIN JP+ Routine
27-Feb-2025 16:53		Administration note (Norfolk and Waveney Musculoskeletal Services) TURNER, Janice () Entered By: , System User ()
	Referral	Referral for further care Status: Discharged From Care (Active)Recorded on: 27 Feb 2025Recorded at: Norfolk and Waveney Musculoskeletal Services (560177692101)Source of referral: GP (National code: 3)Caseload holder: MSK PhysiotherapyService offered: MSK PhysiotherapyUrgency: RoutineSource of referral: GP (National code: 3)Date of referral: 27 Feb 2025 16:53Date of action: 27 Feb 2025 16:54Primary reason for referral: Lumbar spineOutcome of referral: AcceptedDischarged: 04 Jul 2025 14:33Reason For discharge: DischargedType(s) of intervention: Discharged - No further contactPatient aware: true (Norfolk and Waveney Musculoskeletal Services)
	Additional	new referral added for physio
	Additional	Record Attachment 📄 rtf: Referral to musculoskeletal clinic KERR, Colin (Mr) 1456 27-Feb- 2025.rtf - emailed recievedDate 27/02/25Time 16:30
27-Feb-2025		GP Surgery (Healthcare related organisation. Drayton Surgery) MR ANDREW LEE Entered By: , System User ()
	Referral	Referral to physiotherapy service Outcome: Care/Input CompletedReferral Type: OtherSummary: Referral to physiotherapy serviceEast Coast Community Healthcare, Purpose: UnknownPriority: NormalRequestType: UnknownSent: 27 Feb 2025 00:00
	Additional	Referral to musculoskeletal clinic 📄 Description: Original text documentRef - NW - SPoA Community MSK Services Referral
	Additional	Sent: 27 Feb 2025 00:00 Referral letter sent by email 27.02.2025 lg
27-Feb-2025		GP Surgery (Healthcare related organisation. Horsford) MR ANDREW LEE Entered By: , System User ()
	Referral	Referral to orthopaedic surgeon Outcome: Care/Input CompletedReferral Type:

OtherSummary: Referral to orthopaedic surgeonNHS e-Referral Service, Purpose:
UnknownPriority: NormalRequestType: UnknownSent: 27 Feb 2025 00:00

Additional Education re MRI result- medial meniscal tear- fits with symptomsShared decision making - agreed orthopaedic referral, think their opinion is warranted given onset, duration and type of tear seen.Discussed recent bloods - ESR/CRP/HLA B27 all NAD - suggests nil inflammatory cause.Happy with plan, nil other issues
Hx as per entry 9/1/25Knee much the same- medial knee pain, can't deep squat, pain with twistingBack much the same, on/off uses co codamol to helpNot had a chance to look at exercisesNil other changes- well otherwise
e-RS Letter (27-Feb-2025) Description: Original text documentNHS e-Referral UBRN 000450656835 for Referral to orthopaedic surgeon, NHS e-RS UBRN 000450656835 for Referral to orthopaedic surgeon

Additional Sent: 27 Feb 2025 00:00
Shared decision making - agreed onward ECCH referral for ongoing physio input, advised to start the process with previous HEP in meantime
Verbal consent for examination

27-Feb-2025 Administration note (Norfolk and Waveney Musculoskeletal Services) PRACTICE, Previous (User)
Entered By: , System User ()

Additional ** Care started at: Norfolk and Waveney Musculoskeletal Services **

21-Feb-2025 Administration note (Healthcare related organisation. Drayton Surgery) MS LLANEI FITZGERALD
Entered By: , System User ()

Additional Imtcb re task - see and complete

20-Feb-2025 Externally entered note DR ROWAN NEEDHAM
Entered By: , System User ()

Investigation HLA B27 antigen screening test Follow-up action: Other

20-Feb-2025 Externally entered note DR ROWAN NEEDHAM
Entered By: , System User ()

Investigation ! Full blood count - FBC Follow-up action: Other

20-Feb-2025 Externally entered note DR ROWAN NEEDHAM
Entered By: , System User ()

Investigation Diagnostic HbA1c Follow-up action: Other
! Urea and electrolytes, Liver function test, GGT (Gamma Glutamyl Transferase), Bone profile, Thyroid function test, Ferritin Follow-up action: Other

14-Feb-2025 Externally entered note DR ROWAN NEEDHAM
Entered By: , System User ()

Investigation ! Full blood count - FBC Downloaded by: Needham (D82029 GP) on 14/02/2025 17:34:13, Follow-up action: Other

14-Feb-2025 Externally entered note DR ROWAN NEEDHAM
Entered By: , System User ()

Investigation Diagnostic HbA1c Downloaded by: Needham (D82029 GP) on 14/02/2025 17:34:10, Follow-up action: Other
! Urea and electrolytes, Liver function test, GGT (Gamma Glutamyl Transferase), Bone profile, Thyroid function test, Ferritin Follow-up action: Other



13-Feb-2025 accuRx Consultation MR ANDREW LEE
Entered By: , System User ()

Additional Nhs app message sent to: +447555585417Dear Mr Kerr,Your knee MRI results have been returned. Please book an appointment to discuss these further.To book: (link will autogenerate here)(Expires in 7 days)Thanks, Andy LeeDrayton Medical Practice

11-Feb-2025 Externally entered note MR ANDREW LEE
Entered By: , System User ()

Investigation MRI KNEE RT Follow-up action: Other

03-Feb-2025 GP Surgery (Healthcare related organisation. St Faiths) MRS MICHELLE GREEN

	Entered By: , System User ()
Additional	Phlebotomy Comments - taken from left arm Blood sample taken • Consent given for blood test Additional note OneLauncher NonPrescriber used PCIT
09-Jan-2025	accuRx Consultation MR ANDREW LEE Entered By: , System User ()
Additional	Email sent to: colinkerr881@gmail.com E-mail sent to patient Dear Mr Kerr, Please find links below as discussed https://www.youtube.com/watch?v=gxYMMfyC-uch https://www.youtube.com/watch?v=2fR41RNk9eg https://www.youtube.com/watch?v=oprYBFtPfOYA aim once per day, spend 5-10 minutes working through them, resting as needed Thanks, Andy Lee Drayton Medical Practice
09-Jan-2025	GP Surgery (Healthcare related organisation. Horsford) MR ANDREW LEE Entered By: , System User ()
Additional	Impression: medial meniscal tear Discussed mx- agreed will request MRI to further investigate given length of symptoms Tender medial joint line +ve McMurray's Symptoms with end range flexion Ext + 10 recurvatum Nil effusion/redness/heat R knee- twisting injury ~ 1 year ago Medial pain on/off since Wears a support as and needed Flares once a month Nil locking/giving way PC: Low back pain - right sided + into buttock - intermittent HPC: ~10 year history, nil MOI Nil medical input over the years until put on co codamol ~ a year ago, initial help but less so now Flares couple of times a week - can last days but sometimes for weeks at a time Nil obvious triggers/eases 24 hour pattern: feels stiff generally first 30 mins Suffered with tendon pain round elbow over the years Nil hx inflamm bowel self of family Work: chef - offshore, on feet a lot - 12 hour shifts Activities: gym- not been for a year as found back worsening, weighted exercises mainly Feels well otherwise A/w bloods via GP due to epigastric pain Lsp flex- Ft to feet- pain EOR + on ascent Pain with ext- limited SF intact but symptoms EOR bilat Tender R lower lumbar paraspinals + SIJ Impression: ?inflammatory cause Agreed plan - will send mobility based exercises to start via email Will liaise with GP re ?any additional bloods Verbal consent for examination
06-Jan-2025	GP Surgery (Healthcare related organisation. Horsford) DR ROWAN NEEDHAM Entered By: , System User ()
Medication	Hyoscine butylbromide 10mg tablets One To Be Taken three times Daily as needed 56 tablet Macrogol compound oral powder sachets NPF sugar free Dissolve Contents Of One Sachet In Half A Glass (125mL) Of Water And Take once or Twice A Day for constipation 30 sachet
Additional	tedner egigastrium. no masses. book in for bloodsto see phywio about back pains.increase omperazole for 2 weeks. for buscopan and treat constipation with laxido.stop ibuprofen. 3 days abdo pains.Upper abdo, feels different from indigestion.Has got worsneing back pains - had for over a year - taking co-codamol and has also been taking more ibuprofen.Bowels - constipated - every 3 daysno change to urine. no fevers or weight loss.
25-Nov-2024	GP Surgery (Healthcare related organisation. St Faiths) MISS JORDAN EDWARDS Entered By: , System User ()
Additional	(NOT ISSUED) Mometasone 50micrograms/dose nasal spray One Spray To Be Used In Each Nostril Once A Day, 1 x 140 dose(NOT ISSUED) Omeprazole 20mg gastro-resistant capsules One To Be Taken Each Day, 28 capsule(NOT ISSUED) Co-codamol 15mg/500mg tablets One Or Two To Be Taken Four Times A Day When Required, 100 tablet Provision of medication list  Description: Image (document)Provision of medication list (25-Nov-2024) Provision of medication list  Description: Image (document)Provision of medication list (25-Nov-2024) New medication added as per repeat prescription check 25/11

19-Nov-2024	accuRx Consultation MS LAUREN HAMMOND Entered By: , System User ()
Additional	SMS text message sent to patient Dear Mr Kerr,Thankyou for your email about your medication. Unfortunately we require something that has both your name and the medication name, strength and dosage. This can be acquired from your previous pharmacy as they can reprint repeat slips if needed or could be a screenshot from the NHS app medication ordering page as long as it has all the data listed above.Many Thanks Drayton Medical Practice Patient mobile telephone number 7555585417
19-Nov-2024	GP Surgery (Healthcare related organisation. Drayton Surgery) MRS MICHELLE TAYLOR Entered By: , System User ()
Additional	Further to our conversation this morning I can confirm the medication I have on repeat prescription from The Loxford medical practice are as follows :Omeprazole 20mg tablets 1 per day .Co-codamol 15/500 tablets - as and when needed .
13-Nov-2024	accuRx Consultation MRS LISA DACK Entered By: , System User ()
Additional	SMS text message sent to patient Dear Mr Kerr,Thank you for completing your registration form online, we are pleased to inform you that you are now registered at the Practice. We notice that you are on regular medication, therefore we require you to reply to this message attaching proof of this medication. This can be either a photo of the boxes including your name and dose instruction or a copy of your repeat slip.TO RESPOND, please follow this link: (link will autogenerate here)Kind RegardsDrayton Medical Practice Patient mobile telephone number 7555585417
13-Nov-2024	GP Surgery (Healthcare related organisation. Drayton Surgery) MRS LISA DACK Entered By: , System User ()
Additional	Ex-smoker Main spoken language English Other please state Informing patient of named accountable general practitioner • Patient allocated named accountable general practitioner Ethnic category - 2001 census Other please state Express dissent for Summary Care Record dataset upload
13-Nov-2024	Other report (Healthcare related organisation. Drayton Surgery) MRS LISA DACK Entered By: , System User ()
Additional	Patient registration 📄 Description: Original text documentPatient registration (13-Nov-2024)
16-Sep-2024	accuRx Consultation MRS WENDY MUHLY Entered By: , System User ()
Additional	SMS text message sent to patient Dear Mr Kerr,MENS EVENT: Please attend our well man cancer awareness day on 20.09.2024 from 10am-3pm at the Loxford Practice , we have refreshments available , Men's health guest speakers for prostate cancer, bowel cancer, testicular cancer , You can have an NHS CVD health check on the same day without an appointment. National screening is free of charge and can help detect minor changes that may be of significance to your health . come along and ask any questions you may have where one of our team will be happy to help and advise you . Please come alongThe Loxford PracticeSMS sent on 16/09/2024 12:20:06 Patient mobile telephone number 447555585417
29-Aug-2024	Other report (Healthcare related organisation. THE LOXFORD PRACTICE) MISS TANISHA NARWAL Entered By: , System User ()
Additional	Booked with Physio Assessment of needs
12-Aug-2024	accuRx Consultation MR GRAHAM FAIRBROTHER Entered By: , System User ()
Additional	Patient mobile telephone number 447555585417 SMS text message sent to patient Dear Mr Kerr,Thank you for visiting Loxford Practice recently. We value your feedback and invite you to share your experience via this short

survey: <https://forms.gle/JVzGq3Y5Kou7WBT97> Your insights are crucial in helping us improve our services.The Loxford PracticeSMS sent on 12/08/2024 14:21:08

08-Aug-2024		Other report (Healthcare related organisation. THE LOXFORD PRACTICE) MISS EISHA FATIMA Entered By: , System User ()
	Additional	Booked with Physio Assessment of needs
02-Aug-2024		accuRx Consultation MR GRAHAM FAIRBROTHER Entered By: , System User ()
	Additional	Patient mobile telephone number 447555585417 SMS text message sent to patient Dear Mr Kerr,Thank you for visiting Loxford Practice recently. We value your feedback and invite you to share your experience via this short survey: https://forms.gle/d1agtaamQd4Yz8cNA Your insights are crucial in helping us improve our services.The Loxford PracticeSMS sent on 02/08/2024 11:25:06
22-Jul-2024		accuRx Consultation MRS WENDY MUHLY Entered By: , System User ()
	Additional	Patient mobile telephone number 447555585417 Signposting to Citizens Advice SMS text message sent to patient Dear Mr Kerr,Loxford PCN will be holding a pop-up event with Citizen's advice which will be a triage and signposting service only. Indepth and follow up appointments can be made for further support after this event. The event will be at Loxford polyclinic reception on the 25th July 2024, from 10am to 1pm.The Loxford PracticeSMS sent on 22/07/2024 14:37:07
12-Jul-2024		accuRx Consultation DR NADIA SAEED Entered By: , System User ()
	Additional	Patient mobile telephone number 7555585417 Rehabilitation for musculoskeletal disorders SMS text message sent to patient Dear Mr Kerr,I am providing our self-management app to aid recovery from your muscle or joint condition. The app will guide you day-by-day through a sequence of exercises and tips to help you get better. To get started, click this link http://tinyurl.com/gub-sbo998t1 , select a condition, enter your email address, click sendTo view your attachment, please follow this link: (link will autogenerate here)Dr Nadia SaeedThe Loxford PracticeAttachments: getubetter.pdf
12-Jul-2024		accuRx Consultation DR NADIA SAEED Entered By: , System User ()
	Additional	SMS text message sent to patient Dear Mr Kerr,appointment with physio on the 7th of August at 4 pm Loxford Practice Dr Nadia SaeedThe Loxford Practice Patient mobile telephone number 7555585417
12-Jul-2024		Face to face consultation (Healthcare related organisation. THE LOXFORD PRACTICE) DR NADIA SAEED Entered By: , System User ()
	Medication	Doxycycline 100mg capsules Two To Be Taken On The First Day Then One To Be Taken Each Day 8 capsule Mometasone 50micrograms/dose nasal spray One Spray To Be Used In Each Nostril Once A Day 140 dose
	Additional	adv strenghtening exercisebooked with physio HR 67Sat 97 nil effusiongood stabilitymeniscus tear ? right kneeno exercise , nil injurywalking out of the door felt twisting movement last few months , crackling in the chest , disappear throughout the day but recur on smkernil asthmanil DIBnil weight changesnil chest painnasal congestion for few monthssnoring at nightdid not try any nasal spray
	Additional	Radiology requested 📄 Description: Original text documentGP Radiology request form v4 (RP).docx O/E - blood pressure reading 122/74 mm[Hg] Weight monitoring Current weight 84 kg equates to 13 st, 3 lb. A 6% gain from the previous

reading (79kg, 01-Jul-2023). Based on the height entry (01-Jul-2023) a healthy weight is likely to be 64 - 86kg (10 st, 1 lb - 13 st, 8 lb)
Body mass index 24.28 kg/m² (calculation based on height entry 01-Jul-2023, NB prior to age 70 average height loss is 1cm per 10 years)
Body weight 84 kg

11-Jul-2024	Administration note (Healthcare related organisation. THE LOXFORD PRACTICE) MS ANWARA NAHAR Entered By: , System User ()
Additional	Online communication 📄 Description: Original text documentOnline communication (11-Jul-2024) Failed encounter x2
13-Jun-2024	accuRx Consultation DR SARAH FOLASADE ALLOTEY Entered By: , System User ()
Additional	https://web.accurx.com/api/conversation/patientupload/874/57789483/jxxmrspj5j Online questionnaire completed by patientDear Mr Kerr,Regards,The Loxford PracticeResponse:Patient attached photo or documentReceived on 23/05/2024 at 19:28 Attachment 📄 Description: Image (document)Photo submitted by patient (compressed file, for original please see photo link in affiliated consultation)
03-Jun-2024	Other report (Healthcare related organisation. THE LOXFORD PRACTICE) MISS STYLIANNA LOUCAS Entered By: , System User ()
Additional	Discharge summary 📄 Description: Original text documentTogether First
23-May-2024	Other report (Healthcare related organisation. THE LOXFORD PRACTICE) DR SARAH FOLASADE ALLOTEY Entered By: , System User ()
Additional	spoke with pthas received text, he will make his way to SDEC at QH now
23-May-2024	Inbound Document (Healthcare related organisation. THE LOXFORD PRACTICE) MISS STYLIANNA LOUCAS Entered By: , System User ()
Additional	NHS 111 report received 📄 Description: Original text documentNHS 111 Report
23-May-2024	accuRx Consultation DR SARAH FOLASADE ALLOTEY Entered By: , System User ()
Additional	SMS text message sent to patient Dear Mr Kerr,Unfortunately I have not been able to reach you by phone. As agreed, I have discussed your case with the orthopaedic team at Queens Hospital and they are happy to see you directly today for possible drainage. Please make your way to SDEC unit at Queens Hospital today.Regards, Dr AlloteyThe Loxford Practice Patient mobile telephone number 7555585417
23-May-2024	Other report (Healthcare related organisation. THE LOXFORD PRACTICE) DR SARAH FOLASADE ALLOTEY Entered By: , System User ()
Additional	R index finger paronychiastarted on abx yesterdaynoticed pus since yesterdayno dischargeno spreading of rednessno feverno worsening pain discussed likely to drain spontaneously, continue abx, analgesia as needed. safety netted low threshold if spreading erythema/fever/worsening swelling/unwell or concerns to attend A&E. agreed I will discuss with surgical team if can be seen directly for ?I&D and update pt. pt happy with plan. R index paronychia about 9mm. collection of pus visible, appears to be developing a punctum, slightly fluctuant. no dischargenail bed intact. no floating nailnail looks normalno ulceration or necrosisT 36.6
23-May-2024	Other report (Healthcare related organisation. THE LOXFORD PRACTICE) MISS EISHA FATIMA Entered By: , System User ()
Additional	Booked with GP Assessment of needs
23-May-2024	Other report (Healthcare related organisation. THE LOXFORD PRACTICE) DR SARAH

	FOLASADE ALLOTEY Entered By: , System User ()
Additional	Discussed with ortho SHO. referral accepted, will review and decide re ?I&D. Pt will be seen directly at SDEC at Queens Hospitalcalled pt back to update, multiple tries, no answer. text sent
23-May-2024	accuRx Consultation DR SARAH FOLASADE ALLOTEY Entered By: , System User ()
Additional	Patient mobile telephone number 7555585417 SMS text message sent to patient Dear Mr Kerr,TO RESPOND, please follow this link: (link will autogenerate here)Regards,The Loxford Practice
23-May-2024	Other report (Healthcare related organisation. THE LOXFORD PRACTICE) MS ANWARA NAHAR Entered By: , System User ()
Additional	Online communication 📄 Description: Original text documentOnline communication (23-May-2024)
21-May-2024	Face to face consultation (Healthcare related organisation. THE LOXFORD PRACTICE) DR NADIA SAEED Entered By: , System User ()
Medication	Flucloxacillin 500mg capsules One To Be Taken Four Times A Day 28 capsule
Additional	adv to keep it covered at workwear glovesrv if symptroms worsen work as a chefright index paronychiawell otherwisenil fever
20-May-2024	Inbound Document (Healthcare related organisation. THE LOXFORD PRACTICE) MISS STYLIANNA LOUCAS Entered By: , System User ()
Additional	NHS 111 report received 📄 Description: Original text documentNHS 111 Report
10-Apr-2024	Other report (Healthcare related organisation. THE LOXFORD PRACTICE) MISS STYLIANNA LOUCAS Entered By: , System User ()
Additional	Discharged from physiotherapy service 📄 Description: Original text documentKing George Hospital
07-Apr-2024	Administration note (Healthcare related organisation. THE LOXFORD PRACTICE) DR NADIA SAEED Entered By: , System User ()
Additional	Template entry - EHR composition type Adult Safeguarding v17.9 by Ardens Adult no longer safeguarding concern • Adult no longer vulnerable
31-Jan-2024	accuRx Consultation MR ELLIOTT HYDE Entered By: , System User ()
Additional	Unsupported characters in imported note - see record attachment 'Imported Note 1.txt' for text Record Attachment 📄 Text File: Imported Note 1.txt SMS text message sent to patient Patient mobile telephone number 447555585417
24-Jan-2024	accuRx Consultation MR ELLIOTT HYDE Entered By: , System User ()
Additional	Informing patient of named accountable General Practitioner 915J. 447555585417 9N3G. Dear Mr Kerr,This is to inform you that you have a named GP at the practice.If you wish to change your named GP at any time you can do this on your next visit to the Practice or via Dr iQ.Please Note: You have the choice to see any GP at the practice according to their availability at the time you are booking.The Loxford PracticeSMS sent on 24/01/2024 13:39:12
16-Jan-2024	accuRx Consultation MISS REBEKA SULTANA Entered By: , System User ()
Additional	SMS text message sent to patient Dear Mr Kerr,The ownership of AT Medics, who run your GP Practice, may be changing. NHS North East London is seeking assurance that services

will continue as normal. Find out more and attend a webinar at
<https://northeastlondon.icb.nhs.uk/news/potential-change-of-control-of-at-medics-ltd/TheLoxfordPractice>
SMS sent on 16/01/2024 11:22:51
Patient mobile telephone number 447555585417

22-Dec-2023		accuRx Consultation MRS HANNAH MISON Entered By: , System User ()
	Additional	SMS text message sent to patient Dear Mr Kerr, Please contact the surgery to repeat your H Pylori Antigen test, insufficient details on sample/form. Thanks, Mrs Hannah Mison The Loxford Practice Patient mobile telephone number 7555585417
21-Dec-2023		Externally entered note MRS HANNAH MISON Entered By: , System User ()
	Investigation	HELICOBACTER PYLORI STOOL ANTIGEN, SAMPLE REJECTION, SPECIMEN INFO Follow-up action: Other
20-Dec-2023		Other report (Healthcare related organisation. THE LOXFORD PRACTICE) MS ANWARA NAHAR Entered By: , System User ()
	Additional	Online communication  Description: Original text document Online communication (20-Dec-2023)
20-Dec-2023		Telephone consultation (Healthcare related organisation. THE LOXFORD PRACTICE) DR NADEEM ABBAS Entered By: , System User ()
	Medication	Omeprazole 20mg gastro-resistant capsules One To Be Taken Each Day 28 capsule
	Additional	BT requested F/U after blood tests Advised to contact us if needs any further help, Peptic Ulcer? H pylori test requested F/U after above, Try Omeprazole once collected the stool sample, H&M, Wt loss, severe abdo pain, generally feeling unwell, A&E Advised when to seek further/urgent medical help, Advised to contact us if needs any further help, Pt would like to have repeat his LFTs and RFTs No other complaints SW pt, says he is feeling epigastric pain on and off for the last 2-3 weeks Says pain gets better after eating, Says has no pain at present, Says it could be bc he has to use Ibuprofen frequently, for pain, OTC, No hx haematemesis and Melena, wt loss, No other RF symptoms, No other complaints Talking fine
20-Dec-2023		Administration note (Healthcare related organisation. THE LOXFORD PRACTICE) MS ANWARA NAHAR Entered By: , System User ()
	Additional	Booked with GP Assessment of needs
14-Dec-2023		Other report (Healthcare related organisation. THE LOXFORD PRACTICE) MS ANWARA NAHAR Entered By: , System User ()
	Additional	Online communication  Description: Original text document Online communication (14-Dec-2023)
30-Nov-2023		Administration note (Healthcare related organisation. THE LOXFORD PRACTICE) MS ANWARA NAHAR Entered By: , System User ()
	Additional	Booked with Pharmacist Assessment of needs
30-Nov-2023		Telephone consultation (Healthcare related organisation. THE LOXFORD PRACTICE) MISS SABRINE ZAITER Entered By: , System User ()
	Additional	spoke with pt confirmed DOB and address h/o low back pain consultation notes noted 11/10/23 requesting stronger analgesia currently takes otc Paracetamol / Ibuprofen prn has tried co-codamol in the past , helped co-codamol issued adv physio exercise stcb if no better or if sx worsens

29-Nov-2023		accuRx Consultation MRS NURGESS ASLAM Entered By: , System User ()
	Additional	SMS text message sent to patient Dear Mr Kerr, Please contact the surgery to book a telephone appointment with a clinician pharmacist to request pain relief medication. Regards. The Loxford Practice Patient mobile telephone number 7555585417
11-Oct-2023		Telephone consultation (Healthcare related organisation. THE LOXFORD PRACTICE) MR LIAM BRADY Entered By: , System User ()
	Problem	Low back pain (First) Problem severity: Minor First Ended on 13/05/2025
	Additional	A-Advice re heat. HEP sent via physitrack. Safety netted. Lumbar radiculopathy. P-Refer for physiotherapy. Task to reception to rebook for pharmacy team. L-spine aro from flex pain ext pain worse in extension lsf pain rsf pain Heel walks pain limited can do it Toe walks nad Single leg stand better on left than right otherwise nad. Modified Dermatomes L1-S1 NAD B/L. Verbal consent gained. Telephone consultation. Low back pain refers to both legs. Nil b n b. Nil SA. General health-nad. Sleep-nad. Nil fever or night time sweating. Currently taking ibupAM stiffness-can be but not every morning improves as soon as starts to move around. Low back pain First
11-Oct-2023		Other report (Healthcare related organisation. THE LOXFORD PRACTICE) MR LIAM BRADY Entered By: , System User ()
	Additional	Advice and guidance request sent Description: Original text document Rego MSK v4 (RP)
11-Oct-2023		Administration note (Healthcare related organisation. THE LOXFORD PRACTICE) MISS SAARAH KHAN Entered By: , System User ()
	Additional	Booked with Physio Online communication Description: Original text document Online communication (11-Oct-2023) Assessment of needs
15-Aug-2023		GP Surgery (Healthcare related organisation. THE LOXFORD PRACTICE) DR HEMALI TANNA Entered By: , System User ()
	Additional	Explained carbohydrate deficient transferrin test is not a routine test we request and we would not be able to request it for occupational health purposes. He wants to try and obtain a letter from OH, said we still may not be able to request it. Happy to have bloods as requested yesterday Asked to speak to pt earlier to explain why LFTs, hepatitis screen were requested - due to raised AST Works in an oil rig, used to drink alcohol in excess, no longer does Said occupational health are asking him to have carbohydrate deficient transferrin test
14-Aug-2023		Online communication (Healthcare related organisation. THE LOXFORD PRACTICE) DR IRIS POPA Entered By: , System User ()
	Additional	Online communication Description: Original text document Online communication (14-Aug-2023)
09-Aug-2023		Inbound Document MR ALI RANA Entered By: , System User ()
	Additional	Out of hours report Description: Original text document (09-Aug-2023) Clinical document
28-Jul-2023		Administration note (Healthcare related organisation. THE LOXFORD PRACTICE) MS SHEIKH SHARMILA BEGUM Entered By: , System User ()
	Additional	pt has not mentioned substance misuse to work as he fears losing job wanted it removed from the OH letter d/w Dr Nadia, agreed can remove from letter emailed info@anchorhealthsolutions.com for secure email to send letter letter also emailed to pt colinkerr881@gmail.com
21-Jul-2023		Administration note (Healthcare related organisation. THE LOXFORD PRACTICE) DR VIJAYARANI POTHIRAJ

	Entered By: , System User ()
Additional	recall for bld results already spoke to pt yesterday re: blood results.
21-Jul-2023	accuRx Consultation DR NADIA SAEED Entered By: , System User ()
Additional	SMS text message sent to patient Dear Mr Kerr, Please repeat your liver function test in 4-6 weeks as this was slightly outside the range. Dr Nadia Saeed The Loxford Practice Scheduled to send on 21/07/2023 08:00:00 Patient mobile telephone number 7555585417
21-Jul-2023	Other report (Healthcare related organisation. THE LOXFORD PRACTICE) DR NADIA SAEED Entered By: , System User ()
Additional	Refer to pathology department 📄 Description: Original text document Combined Pathology Request
21-Jul-2023	Scanned document (Healthcare related organisation. THE LOXFORD PRACTICE) MS SHEIKH SHARMILA BEGUM Entered By: , System User ()
Additional	Record Attachment 📄 tif: SSBSCN_43.tif - Medical report completed Anchor Health (21-Jul-2023)
21-Jul-2023	GP Surgery (Healthcare related organisation. THE LOXFORD PRACTICE) MISS TASNIMA NESSA Entered By: , System User ()
Additional	£30 cash received for letter
21-Jul-2023	Administration note (Healthcare related organisation. THE LOXFORD PRACTICE) MS SHEIKH SHARMILA BEGUM Entered By: , System User ()
Additional	informed pt to pay £30 for letter for occupational health happy to pay will come after 5pm today also wants copy of letter, in yellow box under 'K' informed Neil
20-Jul-2023	GP Surgery (Healthcare related organisation. THE LOXFORD PRACTICE) DR VIJAYARANI POTHIRAJ Entered By: , System User ()
Additional	Administrative procedure 📄 Description: Original text document To Whom It May Concern
20-Jul-2023	accuRx Consultation MISS AMIRUN AHMED Entered By: , System User ()
Additional	SMS text message sent to patient Dear Mr Kerr, Your blood test shows you would benefit from lowering your cholesterol. We suggest a repeat test in one year. For now, please follow this advice: www.nhs.uk/live-well/healthy-body/lower-your-cholesterol Thanks The Loxford Practice Patient mobile telephone number 7555585417
20-Jul-2023	Administration note (Healthcare related organisation. THE LOXFORD PRACTICE) MISS AMIRUN AHMED Entered By: , System User ()
Additional	QRISK2 cardiovascular disease 10 year risk score 2.2 %
20-Jul-2023	Telephone consultation (Healthcare related organisation. THE LOXFORD PRACTICE) DR VIJAYARANI POTHIRAJ Entered By: , System User ()
Additional	tc booked for medical report requested by his workplace. single episode prob panic attack last yr. works off-shore, 12 hr shifts. was flown onto rig to be told that he is working night shift; this was unexpected and pt was not prepared. felt lightheaded. assessed by medics and presumed panic attack. recovered thereafter. pt states no further similar incidences/symptoms. denies general anxiety at present, mood is good. no mental health consultations since registration at practice phx etoh and substance misuse, and anxiety in past. completed rehab programme on 18th May 2023. 'clean' ever since. recent health check-0/12 on AUDIT-C. attended ED Sept 2022 with abdo pain- suspected gallstones. referred for USS
18-Jul-2023	GP Surgery (Healthcare related organisation. THE LOXFORD PRACTICE) MRS SUKHVINDER K BIRDI

	Entered By: , System User ()
Additional	Booked with GP Assessment of needs
17-Jul-2023	Externally entered note MISS ROSIE ASANTE Entered By: , System User ()
Investigation	! Full blood count - FBC Follow-up action: Other
17-Jul-2023	Externally entered note DR NADIA SAEED Entered By: , System User ()
Investigation	! Serum lipids, UE + LFT Follow-up action: Other
17-Jul-2023	Externally entered note MRS HANNAH MISON Entered By: , System User ()
Investigation	HAEMOGLOBIN A1C Follow-up action: Other
05-Jul-2023	Administration note (Healthcare related organisation. THE LOXFORD PRACTICE) MISS SAARAH KHAN Entered By: , System User ()
Additional	Online communication Description: Original text documentConsent given for occupational health form (05-Jul-2023)
01-Jul-2023	GP Surgery (Healthcare related organisation. THE LOXFORD PRACTICE) MR AZMOL HUSSAIN Entered By: , System User ()
Additional	BT form created as per email Online communication Description: Original text documentOnline communication (01-Jul-2023)
01-Jul-2023	GP Surgery (Healthcare related organisation. THE LOXFORD PRACTICE) MR AZMOL HUSSAIN Entered By: , System User ()
Follow up	Diary Entry NHS Health Check completed (01-Jul-2023) Status: Seen, Recall status set to 'Seen' by GP2GP transferEvery 5 years.
Additional	seen by healthcare assistantpatient identity verifiedpatient wellno ci to blood pressureinformed of blood test procedureblood test form createdbt text to be sent to patientbt form handed to patient
Additional	O/E - blood pressure reading 113/80 mm[Hg] • GPPAQ not in employment • Body mass index 22.8 kg/m2 • GPPAQ hours in last week spent cycling - none • GPPAQ hrs last wk spent physical exercise-1hr but less than 3hrs • O/E - pulse rhythm regular Pulse rate 72 {beats}/min Original units: beats/min Body weight 79 kg Standing height 186 cm Converted from: 186.0 cm Ex-trivial cigarette smoker (<1/day) • General practice physical activity questionnaire physical activity index: moderately active • GPPAQ hrs last wk spent house work/child care-1hr less than 3hrs • GPPAQ hours in last week spent walking - 3 hours or more • GPPAQ usual level of walking pace - steady • GPPAQ hrs in last wk spent gardening/DIY-some but less than 1hr Weight monitoring Current weight 79 kg equates to 12 st, 6 lb. A 4% gain from the previous reading (76kg, 08-Apr-2015). Based on the height entry (01-Jul-2023) a healthy weight is likely to be 64 - 86kg (10 st, 1 lb - 13 st, 8 lb) Alcohol use disorders identification test score 0 Unk UoM Original units: /40 Smoking cessation education Body mass index 22.84 kg/m2 (calculation based on height entry 01-Jul-2023, NB prior to age 70 average height loss is 1cm per 10 years) NHS Health Check invitation short message service text message • Seen by health care assistant • Advice on effects of smoking on health • Smoking cessation advice Alcoholic beverage intake 0 U/week Value: 0.0 U/week NHS Health Check completed AUDIT-C (Alcohol Use Disorders Identification Test - Consumption) score 0 Unk UoM Original units: /12 No family history diabetes

FH: Ischaemic heart dis. <60 Subject: Grandfather
QDiabetes risk calculator score Value: 3.6 % (Estimates used as not all input data present or in range: BMI: 28.2 kg/m²;)
QRISK2 cardiovascular disease 10 year risk score 3.2 % (Estimates used as not all input data present or in range: BMI: 28.2 kg/m²; Cholesterol/HDL Ratio: 4.4; SBP: 129.8 mm Hg;)

01-Jul-2023		accuRx Consultation MR AZMOL HUSSAIN Entered By: , System User ()
	Additional	SMS text message sent to patient Dear Mr Kerr, Please call 03003001704 / 03005551045 or visit https://10to8.com/book/nelftbookabloodtest/ to book your blood test. PLEASE MAKE SURE YOU HAVE COLLECTED YOUR BT FORM FROM THE PRACTICE PRIOR TO ATTENDING BLOOD TEST APPOINTMENT. The Loxford Practice Patient mobile telephone number 7555585417
23-Jun-2023		accuRx Consultation MISS ISHRAT HUSSAIN Entered By: , System User ()
	Additional	Patient mobile telephone number 447555585417 SMS text message sent to patient Dear Mr Kerr, We'd like you to book an appointment. To book: (link will autogenerate here) (Expires in 7 days) Thanks, The Loxford Practice
23-Jun-2023		Other report (Healthcare related organisation. THE LOXFORD PRACTICE) MISS ISHRAT HUSSAIN Entered By: , System User ()
	Additional	Online communication  Description: Original text document Online communication (23-Jun-2023)
07-Jun-2023		Administration note (Healthcare related organisation. THE LOXFORD PRACTICE) DR MUNEEB CHOUDHRY Entered By: , System User ()
	Additional	Had a chat to patient regarding their room number as it was not mentioned on the registration form the patient has confirmed they live in room 15.
07-Jun-2023		Other report (Healthcare related organisation. THE LOXFORD PRACTICE) MR ABDULLAH YUSUF Entered By: , System User ()
	Additional	Patient registration  Description: Original text document DR IQ
10-Apr-2023		Scanned document (Healthcare related organisation. Drayton Surgery) MACBETH, M (Dr) Entered By: , System User ()
	Additional	Record Attachment  tif: Charlotte Roper UPD_171.tif - A&E report A&E report from NORFOLK AND NORWICH UNIVERSITY HOSPITAL NHS TRUST (10-Apr-2023)
08-Mar-2023		GP Surgery (Healthcare related organisation. Drayton Surgery) DR MARK EVERARD Entered By: , System User ()
	Additional	eMED3 (2010) new statement issued, not fit for work.  Description: Full title: eMED3 (2010) new statement issued, not fit for work. Original text document Fit Note Document (Diagnosis: Drug Rehabilitation; Duration 28-Feb-2023 - 28-May-2023)
08-Mar-2023		accuRx Consultation MS KAYLEIGH OLIVER Entered By: , System User ()
	Additional	Email sent to: colinkerr881@gmail.com E-mail sent to patient Good morning Mr Kerr, Please see attached, your medical certificate. To view your attachment, please follow this link: (link will autogenerate here) Kind Regards, Drayton Medical Practice Attachments: FitNote_769be5b9-8d25-4567-92f5-b069ec973a9b.pdf
06-Mar-2023		Telephone consultation (Healthcare related organisation. Drayton Surgery) DR KAROLINA DEBSKA Entered By: , System User ()
	Additional	blood february - normal limits, stool investigations satisfactory, uss testis - no changes Failed encounter - message left on answer machine
06-Mar-2023		Telephone consultation (Healthcare related organisation. Drayton Surgery) DR KAROLINA DEBSKA Entered By: , System User ()

	Additional	Failed encounter - message left on answer machine
28-Feb-2023		Administration note (Healthcare related organisation. Drayton Surgery) MS KAYLEIGH OLIVER Entered By: , System User ()
	Additional	MED 3 Certificate RequestedReason for MED3 (what condition) - Drug rehab for 12 monthsStart Date - 28.02.23 - 28.05.233 monthsAccuRx (sent to phone via text) Consent given for communication by text messaging
14-Feb-2023		Externally entered note DR THOMAS PEARSON Entered By: , System User ()
	Investigation	Laboratory procedures Follow-up action: Other
14-Feb-2023		Externally entered note DR THOMAS PEARSON Entered By: , System User ()
	Investigation	Laboratory procedures Follow-up action: Other
10-Feb-2023		accuRx Consultation DR KAROLINA DEBSKA Entered By: , System User ()
	Additional	SMS text message sent to patient Dear Mr Kerr,I am glad to inform that your stool samples came back as normal - there was no Helicobacter pylori detected, FIT and calprotectin were also negative. I would advise to continue with lansoprazole for 1-2 months and then if you could please book an appointment for lansoprazole review it would be great.Thanks, Dr Karolina DebskaDrayton Medical Practice Patient mobile telephone number 7555585417
10-Feb-2023		Externally entered note MACBETH, M (Dr) Entered By: , System User ()
	Investigation	Serum tissue transglutaminase level Follow-up action: Other
09-Feb-2023		GP Surgery (Healthcare related organisation. Drayton Surgery) MRS GLENDA GRANT Entered By: , System User ()
	Additional	Left armGloves wornHaemostasis ensuredSharp(s) disposed safelySample(s) labelled appropriately and prepared for transportPatient informed of when and how to expect/collect results O/E - blood pressure reading 100/60 mm[Hg] • O/E - pulse rhythm regular Pulse rate 72 {beats}/min Original units: beats/min Informed consent for procedure Template entry - EHR composition type Phlebotomy v16.8 by Ardens-Q Ltd Seen by practice phlebotomist • Blood sample taken
08-Feb-2023		Externally entered note DR KAROLINA DEBSKA Entered By: , System User ()
	Investigation	Faecal Immunochemical Test Follow-up action: Other
08-Feb-2023		Externally entered note DR KAROLINA DEBSKA Entered By: , System User ()
	Investigation	Helicobacter antigen Follow-up action: Other
08-Feb-2023		Externally entered note DR KAROLINA DEBSKA Entered By: , System User ()
	Investigation	Faecal Calprotectin Follow-up action: Other
06-Feb-2023		GP Surgery (Healthcare related organisation. Drayton Surgery) DR KAROLINA DEBSKA Entered By: , System User ()
	Medication	Lansoprazole 30mg gastro-resistant capsules One To Be Taken Each Morning 28 capsule
	Additional	done with chaperone, RobAbdomen tender in epigastric area, no rebound, no rigidity, no guarding,no groin lymphadenopathypenis normal, no redness of foreskin, no ulcerations, no skin changestesticle examination: overall tenderness, palpable lump left testicle, firm, not able to fully separate from left testicle, upper testicle pole, around 0.5-1cm, firm, painful,impression: might be epidimitis/ testicle lump - to rule out cancer has got abdominal pain, ultrasound scan was normal, for 8 months, not going away, would like to have diagnosiswas addict for many years- heroin (not using drugs for 10 years), not ketamine, alcoholic not drinking for 7monhs, stomach was thought a lot, worried that things might be related with somethins serioussharp pain to the left, central, dull, lasts all

day, epigastric type of pain, central and suprapubic radiating to groins for the last 2 weeks right testicle was more swollen and tender, had last sexual partner 8 months ago, no discharge from penis, however feels some penile discomfort abdominal pain is worse in the morning, within an hour after the meal, had positive H pylori in the past, did not receive treatment as was worried about side effects pain in the testicles, intermittent comes and , started 8 months ago lost of weight, periods when felt nausea, loose stools for few years, no mucus, no blood in stool, worse stools after bread cousin died of cancer 49, gynecological cancer not smoking since 14 years off drinking on and off, 7 months ago, tingling on the forehead, red and blotchy, for a year - potentially rosacea, feels that drinking apple juice helps him




Explained side effects and benefits of H pylori eradication - happy to investigate further, aware that if takes lansoprazole we would not be able to detect H pylori will go to STI clinic - likely epididymitis, however prefers to check it first at STI clinic for chlamydia and then treat, safety netting given - if becomes unwell will come back trial with lansoprazole after stool samples, follow up TTG to rule out celiac stool sample to check for H. pylori us testis

06-Feb-2023	accuRx Consultation DR KAROLINA DEBSKA Entered By: , System User ()
Additional	SMS text message sent to patient Dear Mr Kerr, Please bring stool sample, after that you can start lansoprazole. I have issued for you lansoprazole already - its for gastritis treatment as we discussed. Please take one tablet once a day half an hour before breakfast. I also booked for you telephone consultation on 06/03/2023 09:00 to review lansoprazole. If you would like to change the date, please ring reception back. Thanks, Dr Karolina Debska Drayton Medical Practice Patient mobile telephone number 7555585417
03-Feb-2023	Externally entered note MRS CLARE STARLING Entered By: , System User ()
Investigation	Full blood count - FBC Follow-up action: Other
03-Feb-2023	Externally entered note MRS CLARE STARLING Entered By: , System User ()
Investigation	Diagnostic HbA1c Follow-up action: Other ! Bone profile, Cholesterol, HDLC, Urea and electrolytes, Liver function test, GGT (Gamma Glutamyl Transferase), Thyroid function test, Ferritin, B12 & serum Folate Follow-up action: Other
02-Feb-2023	accuRx Consultation MRS CLARE STARLING Entered By: , System User ()
Additional	Patient mobile telephone number 7555585417 SMS text message sent to patient Dear Mr Kerr, Your scan has come back to us and reassuringly it is normal. Your urine dip is also clear so it is unlikely that a urine infection or prostatitis is causing this discomfort. I think the next most important thing is to go to iCash clinic for some blood tests and STI tests and I see you have booked in with the GP. It sounds like it could be epididymitis which the GP may be able to confirm. https://www.nhs.uk/conditions/epididymitis/ Thanks, Clare Starling Drayton Medical Practice
02-Feb-2023	GP Surgery (Healthcare related organisation. Drayton Surgery) MRS RACHAEL WRIGHT Entered By: , System User ()
Additional	Right arm Gloves worn Sample(s) labelled appropriately and prepared for transport Patient informed of when and how to expect/collect results Informed consent for procedure • Blood sample taken Template entry - EHR composition type Phlebotomy v16.8 by Ardens-Q Ltd
02-Feb-2023	GP Surgery (Healthcare related organisation. Drayton Surgery) MRS CLARE STARLING Entered By: , System User ()
Additional	BP and bloods please. Urine sample. if blood please send to labs and task me. Please see GP for genital examination ? epididymitis/prostatitis Please attend iCash for full STI screen and HIV bloods please- given details on how to book appt. MOVED to area last autumn. Has been experiencing low suprapubic intermittent sharp pains for approx 6 months. Went to hospital and had USS but he has not received the results. Pain

is sometimes worse in morning and worse upon micturation. Occasioanly pain into testicles. Also feels some thickening in one testicle.No bowel symptoms. No change bowel habit.NO weight loss.NO blood in urine noticed.Ex heroin user- clean for approx 10 years.he doesn't think he has had hepatitis or HIV blood tests.Alcoholic- started drinking age 14 and alcoholic by 18 years old. He hasn't had a drink for 4 months.Living and working at Teen Challenge Drayton Hall- good support network.

02-Feb-2023	GP Surgery (Healthcare related organisation. Drayton Surgery) MRS MICHELLE PAULING Entered By: , System User ()
Additional	Template entry - EHR composition type Urine dipstick v16.6 by Ardens-Q Ltd. Urinalysis = no abnormality • Urine dipstick test • Urine looks normal
19-Jan-2023	Other report (Healthcare related organisation. Drayton Surgery) MRS LYNDIA SOWTER Entered By: , System User () <i>Empty consultation</i>
14-Jan-2023	Scanned document (Healthcare related organisation. Drayton Surgery) MRS CLARE STARLING Entered By: , System User ()
Additional	Record Attachment 1 tif: Jenny DavisSCN_229.tif - US abdominal scanUS abdominal scan (14-Jan-2023)
10-Jan-2023	Administration note (Healthcare related organisation. Drayton Surgery) MS SARAH BUCHANAN Entered By: , System User ()
Additional	Failed encounter will try again
28-Dec-2022	Administration note (Healthcare related organisation. Drayton Surgery) MRS SHARON CHAPMAN Entered By: , System User ()
Additional	Ex-smoker 20 a day - stopped 5 years ago Main spoken language English Other please state Informing patient of named accountable general practitioner FH: Ischaemic heart disease Subject: Grandfather Express dissent for Summary Care Record dataset upload • Patient allocated named accountable general practitioner British or mixed British - ethnic category 2001 census Other please state
28-Dec-2022	Other report (Healthcare related organisation. Drayton Surgery) MS SARAH STEEPLES Entered By: , System User () <i>Empty consultation</i>
28-Dec-2022	DRAYTON MEDICAL PRACTICE MRS SHARON CHAPMAN Entered By: , System User ()
Additional	Attachment 1 Description: Original text documentFiling Description: Patient Submission as PDF: New Patient Registration, episode #144131
19-Dec-2022	DRAYTON MEDICAL PRACTICE MRS SHARON CHAPMAN Entered By: , System User ()
Additional	== Episode #144131: sent 19/12/2022 13:33:41 by Colin James Kerr DOB 29/11/1979 colinkerr881@gmail.com tel:07555585417 07555585417, form: New Patient Registration ==Do you live within our practice boundary? YesTitle: MrSurname: KerrPrevious Surnames: McsweganFirst Name(s): Colin JamesDate of Birth: 29/11/1979Sex: IndeterminateNHS Number: [BLANK]Town and Country of birth: GlasgowHome Address: Drayton hallPostcode: NR86DPHome Phone Number: 07555585417Mobile Phone Number: 07555585417Work Phone Number: [BLANK]Can we contact you by text? YesWould you like to receive SMS text messages with appointment reminders? YesCan we contact you by email? YesPlease specify the ethnic group you consider you belong to: White BritishDo you speak English? YesDo you read English? YesFirst Language: EnglishFull Name: Nadia kerrRelationship to you: SisterAre they your next of kin? YesDo you give us permission to discuss your medical records with them? YesDo you have any allergies? YesPlease specify what you are allergic to, what happens and when you had your first reaction: Dogs I think , I'm a little unsure need to speak with the GP about itPrevious address in UK: Teen challenge Wilkerson house ,Ilford ,London IG1 2JJName and address of previous GP: Loxford polyclinic

, Ilford lane, Essex
Date you came to live in the UK: [BLANK]
Date you left the UK: [BLANK]
Date you returned to the UK: [BLANK]
Please indicate if you have ever served in the UK Armed Forces and/or been registered with a Ministry of Defence GP in the UK or overseas: (OPTIONAL)
Address before enlisting: Service or Personnel number: [BLANK]
Enlistment date: [BLANK]
Are you happy for us to record this on your medical record? (OPTIONAL)
I am not ordinarily a resident in the UK: [] I am not ordinarily a resident in the UK
Do you live in another EEA country, or have moved to the UK to study or retire, or live in the UK but work in another EEA member state? No
Do you have an S1 Form? [] I have an S1 form (e.g. you are retiring to the UK or you have been posted here by your employer for work or you live in the UK but work in another EEA member state).
Do you have a carer? No
Are you a carer for someone? No
Height: 6,2
Weight: 13
Please state how much exercise and what type of exercise you do per week: Resistance weights 4 times a week
Smoking Status: Ex Smoker
How many did you smoke per day? 20 on and off
When did you stop? 5 years ago
How often do you have a drink containing alcohol? Never
Score: 0
When was your last cervical smear? [BLANK]
Was it done at: (OPTIONAL)
What was the result of the cervical smear? [BLANK]
Have you had a hysterectomy? (OPTIONAL)
Please list any immunisations/vaccinations you have had: COVID x3 unsure of dates
Major Illnesses: Past Operations: Eye operation for alignment
Family History Illnesses: Grandfather died at 44 of heart failure
Current Medication: Sight: Good
Hearing: Good
Do you live more than 1.6km from a pharmacy? No
Would you like to register for electronic prescribing? No
Consent: I do not want additional information in my Summary Care Record
Signature: Colin kerr
Date: 19/12/2022
Would you like to register for our online services? No

02-Dec-2022		Telephone consultation (Healthcare related organisation. THE LOXFORD PRACTICE) MISS AIYSHA ASIF Entered By: , System User ()
	Additional	called Teen challenge Spoke to Nick- support worker pt is there for drug rehabilitation, 12 month programme requesting sick note for job centre needing from 30th Nov- 3 months issued support worker will collect MED3 (2010) issued by hand, not fit for work  Description: Original text document Fit Note Document (Diagnosis: At Teen challenge- drug rehabilitation; Duration 30-Nov-2022 - 28-Feb-2023)
30-Nov-2022		accuRx Consultation MS SHEIKH SHARMILA BEGUM Entered By: , System User ()
	Additional	Dear Colleague, RE: Colin Kerr, 29-Nov-1979, 624Â 191Â 1090 Please find attached a referral for the above patient for your attention. Thanks, The Loxford Practice Attachments: ck.pdf Email sent to outside agency bhrut.gpusrequests@nhs.net
30-Nov-2022		Scanned document (Healthcare related organisation. THE LOXFORD PRACTICE) MS SHEIKH SHARMILA BEGUM Entered By: , System User ()
	Additional	Record Attachment  tif: SSBUPD_64.tif - Radiology requested Radiology requested (30-Nov-2022)
18-Nov-2022		Telephone consultation (Healthcare related organisation. THE LOXFORD PRACTICE) DR MOBEEN QURESHI Entered By: , System User ()
	Problem	Abdominal pain (First) Problem severity: Minor First Ended on 17/12/2022
	Additional	plan to refer to uss Radiology requested  Description: Original text document GP Radiology request form v3 (RP).docx Abdominal pain First Remote consultation spoken to the patient , stated that have not heard for the uss
29-Sep-2022		Telephone consultation (Healthcare related organisation. THE LOXFORD PRACTICE) DR MOBEEN QURESHI Entered By: , System User ()
	Additional	Failed encounter - message left on answer machine
29-Sep-2022		Telephone consultation (Healthcare related organisation. THE LOXFORD PRACTICE) DR MOBEEN QURESHI

	Entered By: , System User ()
Problem	Fungal dermatosis (First) Problem severity: Minor FirstOriginal text: Dermal mycosis Ended on 28/10/2022
Additional	(NOT ISSUED) Amorolfine 5% medicated nail lacquer Apply To Infected Nails 1 Or 2 Times Weekly As Directed, 5 ml planto use the nail lacquer Dermal mycosis First Remote consultation spoken to the patient , stated having fungal nail infection, has used somenail varnish, last year hlepded him , now wanted anotehr course
26-Sep-2022	GP Surgery (Healthcare related organisation. THE LOXFORD PRACTICE) DR NADEEM ABBAS Entered By: , System User ()
Additional	Considering all above, advised pt to go to A&EPt happy to go to A&EAdvised to contact us if needs any further Well,Abd: Soft, Markedly tender in the RIF, BS+veRest of the systemic examination is NAD. Feeling pain in the RIF for th elast 2 weeks,Its on and off,Feeling naseous, but no vomiting,No hx of fever,BO this morning, loose,No other complaints Pulse rate 81 {beats}/min Original units: beats/min Acute appendicitis Tympanic temperature 36.2 Cel Original units: degrees C
26-Sep-2022	Other report (Healthcare related organisation. THE LOXFORD PRACTICE) MISS STYLIANNA LOUCAS Entered By: , System User ()
Additional	Seen in accident and emergency department 📄 Description: Original text documentQueen's Hospital
26-Sep-2022	Inbound Document MISS STYLIANNA LOUCAS Entered By: , System User ()
Additional	KGH UTC Streamed to Majors Out of hours report 📄 Description: Original text documentPELC Live OOH Call Incident Report
02-Sep-2022	Telephone consultation (Healthcare related organisation. THE LOXFORD PRACTICE) MR BHAGESH KATECHIA Entered By: , System User ()
Additional	tcpt needs med 3drug and alcohol rehabissued 3/12 med 3 MED3 (2010) issued by hand, not fit for work 📄 Description: Original text documentFit Note Document (Diagnosis: drug and alcohol rehabilitation; Duration 02-Sep-2022 - 30-Nov-2022)
02-Sep-2022	Scanned document (Healthcare related organisation. THE LOXFORD PRACTICE) MISS STYLIANNA LOUCAS Entered By: , System User ()
Additional	Record Attachment 📄 tif: SefanaUPD_263.tif - Patient registered GMS1Family Doctor Services Registration
30-Aug-2022	Administration note (Healthcare related organisation. THE LOXFORD PRACTICE) MRS SUKHVINDER K BIRDI Entered By: , System User ()
Additional	Previous GP in Scotland
30-Aug-2022	Administration note (Healthcare related organisation. THE LOXFORD PRACTICE) MRS SUKHVINDER K BIRDI Entered By: , System User ()
Additional	Informing patient of named accountable general practitioner Dr M Chaudhry Patient allocated named accountable general practitioner Dr M Chaudhry
09-Aug-2022	Other report (Healthcare related organisation. Drayton Surgery) MACBETH, M (Dr) Entered By: , System User ()
Additional	Coordinated support plan 📄 Description: Original text documentCoordinated support plan (09-Aug-2022)

23-Jun-2022 10:28	Administration note (Norfolk and Norwich University Hospital) GRAY, Emma () Entered By: , System User () <i>Empty consultation</i>
22-Sep-2020 11:34	Administration note (Health Outreach APMS) KIRKBY, Adrian () Entered By: , System User ()
Additional	Main spoken language Gaelic
08-Sep-2020	Administration note (Health Outreach APMS) PRACTICE, Previous (User) Entered By: , System User ()
Additional	** Care ended at Health Outreach APMS **
04-Sep-2020 13:32	Administration note (Health Outreach APMS) BRITTEN, Claire (Mrs) Entered By: , System User () <i>Empty consultation</i>
04-Sep-2020 13:32	Administration note (Health Outreach APMS) BRITTEN, Claire (Mrs) Entered By: , System User ()
Referral	Referral for further care Status: Discharged From Care (Active)Recorded on: 04 Sep 2020Recorded at: Health Outreach APMS (Y06499)Source of referral: Substance Misuse ServiceCaseload holder: STaRS WestService offered: Opioid MaintenanceUrgency: RoutineSource of referral: Substance Misuse ServiceDate of referral: 04 Sep 2020 13:32Date of action: 04 Sep 2020 13:32Primary reason for referral: Risk FactorsLocation: NHS PremisesOutcome of referral: AcceptedPriority: NormalDischarged: 08 Sep 2020 10:57Reason For discharge: DischargedType(s) of intervention: Treatment declined by clientPatient aware: true (Health Outreach APMS)
04-Sep-2020	Administration note (Health Outreach APMS) PRACTICE, Previous (User) Entered By: , System User ()
Additional	** Care started at: Health Outreach APMS **
28-Oct-2015	GP Surgery MRS MINA TRIVEDI Entered By: , System User ()
Additional	No records here (Medical Records Status)
06-Oct-2015 11:14	Administration note (AT Medics - The Loxford Practice) TRIVEDI, Mina (Mrs) Entered By: , System User ()
Additional	Sending of medical records to health authority
06-Oct-2015	GP Surgery MRS MINA TRIVEDI Entered By: , System User ()
Additional	No records here (Medical Records Status)Medical records need to be sent (Previous Status) (Security Controlled Record Flag Amendment) Sending of medical records to health authority
25-Sep-2015	GP Surgery MRS MINA TRIVEDI Entered By: , System User ()
Additional	Records waiting to be sent (Medical Records Status)Removal to New HA (Deduction code received from HA)
22-Sep-2015	Administration note (AT Medics - The Loxford Practice) PRACTICE, Previous (User) Entered By: , System User ()
Additional	** Care ended at AT Medics - The Loxford Practice (GMS) **
18-Aug-2015 14:05	Administration note (AT Medics - The Loxford Practice) SHAIKH, Shirin (Mrs) Entered By: , System User () <i>Empty consultation</i>
18-Aug-2015 13:47	Administration note (AT Medics - The Loxford Practice) SHAIKH, Shirin (Mrs) Entered By: , System User () <i>Empty consultation</i>
18-Aug-2015	Administration note (AT Medics - The Loxford Practice) SHAIKH, Shirin (Mrs) Entered By: , System User ()
Additional	Notes summary on computer
18-Aug-2015	Administration note (AT Medics - The Loxford Practice) SHAIKH, Shirin (Mrs) Entered By: , System User ()
Additional	Computer summary updated

25-Jun-2015 17:10	Bulk Operation (AT Medics - The Loxford Practice) BENGE, Sarah () Entered By: , System User ()
Additional	Patient allocated named accountable general practitioner Added in bulk
03-Jun-2015 09:17	GP Surgery (AT Medics - The Loxford Practice) ALI, Rofique (Dr) Entered By: , System User ()
Additional	attending teen challenge. has come of drugs, getting married and looking to become fitness instructor. extended his rehab for another 3 months. well. Drug dependence given med cert until august. continue to engage. review if problem. eMED3 (2010) new statement issued, not fit for work New MED3 statement issued: Not fit for work - Valid from 24 May 2015 to 24 Aug 2015Condition: drug dependence. rehab. New MED3 statement issued: Not fit for work - Valid from 24 May 2015 to 24 Aug 2015 📄 New MED3 statement issued: Not fit for work - Valid from 24 May 2015 to 24 Aug 2015
20-May-2015 17:07	Administration note (AT Medics - The Loxford Practice) BIRDI, Sukhvinder (Mrs) Entered By: , System User ()
Additional	Lloyd George record received
20-May-2015 17:07	Administration note (AT Medics - The Loxford Practice) BIRDI, Sukhvinder (Mrs) Entered By: , System User () <i>Empty consultation</i>
17-Apr-2015 16:23	GP Surgery (AT Medics - The Loxford Practice) SAHA, Dipankar (Dr) Entered By: , System User ()
Medication	Colecalciferol 20,000unit capsules one cap daily for 4 wk, then change to daily low dose preparation 28 capsule Colecalciferol 800unit capsules one cap daily 60 capsule
Referral	Referral for laboratory tests kgh, Referrer: Dr Dipankar Saha at AT Medics - The Loxford Practice (NHS North East London Icb - A3a8r)Status: Waiting For InformationReferral Type: HospitalSender: Dr Dipankar Saha (The Practice Loxford)Recipient: kghSent: 17 Apr 2015 16:32
Additional	Record Attachment 📄 Sender: Dr Dipankar Saha (The Practice Loxford)Recipient: kghSent: 17 Apr 2015 16:32 Joint British Societies cardiovascular 10yr risk 2.26 % Advice about investigation results c/o attened for recent BT results. (vit D def. Also raised TC - lifestyle Mx only, but pt states forgot to fast for the test and would like to rpt as fasting test). PLAN- commence vit D, BT form given for check Ca/rpt fasting lipids in 3/12. JBS cardiovascular disease risk <10% over next 10 years • Joint British Societies adjusted cardiovascular 10yr risk 3.39 %
16-Apr-2015 14:48	Administration note (AT Medics - The Loxford Practice) SAHA, Dipankar (Dr) Entered By: , System User () <i>Empty consultation</i>
14-Apr-2015 14:37	Administration note (AT Medics - The Loxford Practice) NAEEM, Maryam (Dr) Entered By: , System User () <i>Empty consultation</i>
14-Apr-2015 14:37	Administration note (AT Medics - The Loxford Practice) NAEEM, Maryam (Dr) Entered By: , System User () <i>Empty consultation</i>
14-Apr-2015 14:37	Administration note (AT Medics - The Loxford Practice) NAEEM, Maryam (Dr) Entered By: , System User () <i>Empty consultation</i>
14-Apr-2015 14:19	Administration note (AT Medics - The Loxford Practice) NAEEM, Maryam (Dr) Entered By: , System User () <i>Empty consultation</i>
10-Apr-2015 17:30	Administration note (AT Medics - The Loxford Practice) NAEEM, Maryam (Dr)




	Entered By: , System User ()
Investigation	HAEMOGLOBIN A1C
10-Apr-2015 17:30	Administration note (AT Medics - The Loxford Practice) NAEEM, Maryam (Dr) Entered By: , System User ()
Investigation	Full blood count;Differential white blood cell count
10-Apr-2015 13:30	Administration note (AT Medics - The Loxford Practice) NAEEM, Maryam (Dr) Entered By: , System User ()
Investigation	! Urea and electrolytes;Liver function tests;Serum lipid levels;Bone profile;ESTIMATED GFR Follow-up action: Need to speak to doctor
10-Apr-2015 13:30	Administration note (AT Medics - The Loxford Practice) SAHA, Dipankar (Dr) Entered By: , System User ()
Investigation	! Serum vitamin D level Follow-up action: Need to speak to doctor
10-Apr-2015 13:30	Administration note (AT Medics - The Loxford Practice) NAEEM, Maryam (Dr) Entered By: , System User ()
Investigation	Thyroid function test;Blood haematinic levels;FERRITIN COMMENT;Plasma fasting glucose level
09-Apr-2015 15:10	GP Surgery (AT Medics - The Loxford Practice) OKWUOSA, Chinonye (Dr) Entered By: , System User ()
Referral	Referral for lab test NOS blood test - EVERYTHING TICKED FASTING - QUICK, blood test form quick, 1 loxford quick referrals, Referrer: Dr Chinonye Okwuosa at AT Medics - The Loxford Practice (NHS North East London Icb - A3a8r)Referral Type: HospitalService: General PathologySender: Dr Chinonye Okwuosa (The Practice Loxford)Recipient: blood test - EVERYTHING TICKED FASTING - QUICK, blood test form quick, 1 loxford quick referrals
Additional	Record Attachment 📎 Sender: Dr Chinonye Okwuosa (The Practice Loxford)Recipient: blood test - EVERYTHING TICKED FASTING - QUICK, blood test form quick, 1 loxford quick referrals MED3 - doctor's statement MED3 (2010) issued by hand, not fit for work Pt undergoing rehab at TEEN Challenge until 23/05/2015Issued from today until 23/05/2015
08-Apr-2015 13:55	Administration note (AT Medics - The Loxford Practice) OLIVER, Sonya (Ms) Entered By: , System User ()
Additional	Urine blood test = negative • Urine protein test negative • Urine glucose test negative • Urine nitrite negative • Urine leucocyte test = negative • Urine ketone test negative
08-Apr-2015 13:45	GP Surgery (AT Medics - The Loxford Practice) OLIVER, Sonya (Ms) Entered By: , System User ()
Allergy	No known allergies
Additional	O/E - blood pressure reading 126/78 mm[Hg] • Ex-drinker Interpreter not needed Pt communicates well. Ex-smoker • Smoking cessation advice Medication monitoring Pt says not taking any current medication. Attended new patient screening
Additional	H/O: medical history NOS Drug rehabilitation Pt says is currently residing in rehab on a 12 week resettlement programme. Testicular self-examination instruction • O/E - height 186 cm • O/E - weight 76 kg • Body mass index 21.97 kg/m2 FH: Ischaemic heart disease at less than 60 years grandfather m.i. aged 44 r.i.p. Physically active • Dietary advice • Advice about exercise
03-Apr-2015 09:00	Administration note (AT Medics - The Loxford Practice) ALTAF, Humera (Miss) Entered By: , System User ()
Additional	White British • No current problems or disability Place of birth Glasgow Ex-smoker 2011 Main spoken language English Fiance: Miss Leanne Ross

02-Apr-2015	Administration note (AT Medics - The Loxford Practice) PRACTICE, Previous (User) Entered By: , System User ()
Additional	** Care started at AT Medics - The Loxford Practice (GMS) **
16-Jun-2014 08:58	Administration note (AT Medics - The Loxford Practice) TRIVEDI, Mina (Mrs) Entered By: , System User ()
Additional	Sending of medical records to health authority
06-Jun-2014 14:52	Administration note (AT Medics - The Loxford Practice) SAHA, Dipankar (Dr) Entered By: , System User () <i>Empty consultation</i>
05-Jun-2014	Administration note (AT Medics - The Loxford Practice) PRACTICE, Previous (User) Entered By: , System User ()
Additional	** Care ended at AT Medics - The Loxford Practice (GMS) **
02-May-2014 15:59	GP Surgery (AT Medics - The Loxford Practice) SAHA, Dipankar (Dr) Entered By: , System User ()
Referral	Referral for laboratory tests kgh, Referrer: Dr Dipankar Saha at AT Medics - The Loxford Practice (NHS North East London Icb - A3a8r)Status: Waiting For InformationReferral Type: HospitalSender: Dr Dipankar Saha (The Practice Loxford)Recipient: kghSent: 02 May 2014 16:09
Additional	Record Attachment 📎 Sender: Dr Dipankar Saha (The Practice Loxford)Recipient: kghSent: 02 May 2014 16:09 Advice 1. c/o nearly 3./12 HxL midshaft tibia pain - x-ray (L lower leg) - NAd. Pt sttes moving to scotland in 2/52. PLAN - pt to see new GP and req Rhum referral. Copy of X-rsy report given. Wil co.2. 1yr Hx L great toenail deformed. o/e L great toe nail - white/broken IMP-likley fingakl nail inf PLAN - send nail clippings for MCS/MYcology, pt to ask new GP to contact us for results in 6/52. Will co. Further Mx as approp.
02-May-2014 11:33	Administration note (AT Medics - The Loxford Practice) SAHA, Dipankar (Dr) Entered By: , System User ()
Investigation	Mycology microscopy, culture and sensitivities Follow-up action: Need to speak to doctor
19-Apr-2014	GP Surgery (AT Medics - The Loxford Practice) PATEL, Manjote (Miss) Entered By: , System User ()
Additional	Referral to emergency clinic (New Episode) Leg injury (New Episode) Seen by accident and emergency - service (New Episode)
19-Apr-2014	Letter (AT Medics - The Loxford Practice) PATEL, Manjote (Miss) Entered By: , System User ()
Additional	Scanned Image 📎 A & E LetterSender: King George HospitalRecipient: The Practice LoxfordSent: 10 Jun 2014 18:25
17-Apr-2014 15:02	Administration note (AT Medics - The Loxford Practice) DHANJAL, Charanjeet (Mrs) Entered By: , System User () <i>Empty consultation</i>
10-Apr-2014 13:54	Administration note (AT Medics - The Loxford Practice) GREENAWAY, Beverley (Miss) Entered By: , System User ()
Additional	Administration Cheque received from DVLA .
08-Apr-2014 08:31	GP Surgery (AT Medics - The Loxford Practice) PAGE, Philip (Mr) Entered By: , System User ()
Referral	Referral for diagnostic investigation KGH, Referrer: Mr Philip Page at AT Medics - The Loxford Practice (NHS North East London Icb - A3a8r)Status: Waiting For InformationReferral Type: HospitalSender: Mr Philip Page (The Practice Loxford)Recipient: KGHSent: 08 Apr 2014 08:41
Additional	Pt attending with a couple of days hx of a ? fracture to the Lt tibia- is currently training for a marathon- pain is isolated to the mid left tibia- No known MOI or trauma. Pt alert and orientated and appears well- Pt observed fully weight bearing- No obvious swelling or boney deofrmity- tenderness on palpation of the Lt mid tibia. No ankle or knee pain. ?? stress fracture. Musculoskeletal injury

	Referred for an x-ray, advised on OTC analgesia and to avoid running or anything too strenuous until results known.
Additional	Record Attachment 📎 Sender: Mr Philip Page (The Practice Loxford)Recipient: KGHSent: 08 Apr 2014 08:41
08-Apr-2014	GP Surgery (AT Medics - The Loxford Practice) THETHI, Surinder (Mrs) Entered By: , System User ()
Additional	Tibia and fibula X-ray
08-Apr-2014	Letter (AT Medics - The Loxford Practice) THETHI, Surinder (Mrs) Entered By: , System User ()
Additional	Scanned Image 📎 X Ray ReportSender: Loxford PolyclinicRecipient: The Practice LoxfordSent: 02 May 2014 12:54
21-Feb-2014 08:15	Administration note (AT Medics - The Loxford Practice) GREENAWAY, Beverley (Miss) Entered By: , System User ()
Additional	Record Attachment 📎 InvoiceSender: The Practice LoxfordRecipient: Drivers and Vehicle Licensing AgencySent: 21 Feb 2014 08:21 Record Attachment 📎 InvoiceSender: The Practice LoxfordRecipient: Driver and Vehicle Licensing AgencySent: 21 Feb 2014 08:32 Administration Completed dvla form sent.
19-Feb-2014 10:23	GP Surgery (AT Medics - The Loxford Practice) SAHA, Dipankar (Dr) Entered By: , System User ()
Additional	Administrative form DVLA forms completed. PLAN - form given SV to return to requesting authority.
11-Nov-2013	GP Surgery (AT Medics - The Loxford Practice) BIRDI, Sukhvinder (Mrs) Entered By: , System User ()
Additional	Capable of work on work capability assessment criteria (New Episode) [V]Issue of medical certificate (Ongoing Episode). -Do not issue any more medical certificates for Employment and Support Allowance purposes
11-Nov-2013	Letter (AT Medics - The Loxford Practice) BIRDI, Sukhvinder (Mrs) Entered By: , System User ()
Additional	Scanned Image 📎 MiscellaneousSender: Ms Ann Russell (Jobcentreplus)Recipient: The Practice LoxfordSent: 31 Dec 2013 16:42
27-Sep-2013 11:49	GP Surgery (AT Medics - The Loxford Practice) SAHA, Dipankar (Dr) Entered By: , System User ()
Medication	Diclofenac sodium 50mg gastro-resistant tablets take one 3 times/day 1 pack of 84 tablet(s)
Additional	MED3 - doctor's statement 1. requesting med3 ext. PLAN - med3 issued for ' in community rehab prog for drug/alcohol abuse' from 28.9.13-28.12.13.2. had 2 sore lumps appeared rapidly R side of neck.No longer painful, but lumps still there. o/e 2 x small firm indurated superficial lump IMP - ?small cysts ?remaing indurated tissue form recent superfifcial skin inf PLAN - stop topuching it, will hopefull involute over time.
27-Sep-2013 08:16	Administration note (AT Medics - The Loxford Practice) BELLO, Yusuf (Mr) Entered By: , System User () <i>Empty consultation</i>
24-Jun-2013 14:46	GP Surgery (AT Medics - The Loxford Practice) AKANDE, Jacqueline (Dr) Entered By: , System User ()
Additional	O/E - blood pressure reading 122/72 mm[Hg] • Expected peak expiratory flow rate 652 L/min • Ideal body weight 85.22 kg • Body mass index 22.5 kg/m2 • O/E - height 185 cm • O/E - weight 77 kg • Ex-smoker • Pulse rate 65 {beats}/min • O/E - pulse rhythm regular MED3 - doctor's statement In Teen Challenge . Med 3 issued for 3 months only drug rehabilitation . gp prn
24-Jun-2013 08:01	Administration note (AT Medics - The Loxford Practice) GREENAWAY, Leandra (Miss) Entered By: , System User () <i>Empty consultation</i>
20-Jun-2013 14:40	DNA (AT Medics - The Loxford Practice) FATIMILEHIN, Olasupo (Dr) Entered By: , System User ()
Additional	Did not attend for Doctors Appointments appointment with Dr Olasupo Fatimilehin

	Did not attend
20-Jun-2013 08:07	Administration note (AT Medics - The Loxford Practice) GREENAWAY, Beverley (Miss) Entered By: , System User () <i>Empty consultation</i>
14-Mar-2013 15:18	GP Surgery (AT Medics - The Loxford Practice) MOTTALEB, Munira (Dr) Entered By: , System User ()
Additional	MED3 - doctor's statement in Teen challenge has been there for 6/12 as part of an 18/12 programme for ETOH/heroin. first attempt at rehab. no other concerns voiced at present. med 3 issued for 3/12 for Drug Rehabilitation O/E - weight 77 kg • Body mass index 22.5 kg/m2
14-Mar-2013 08:05	Administration note (AT Medics - The Loxford Practice) GREENAWAY, Leandra (Miss) Entered By: , System User () <i>Empty consultation</i>
14-Mar-2013	Administration note (AT Medics - The Loxford Practice) SHAIKH, Shirin (Mrs) Entered By: , System User ()
Additional	Computer summary updated
18-Jan-2013 12:40	GP Surgery (AT Medics - The Loxford Practice) AKERELE, Dapo (Dr) Entered By: , System User ()
Additional	MED3 has run out. in Drug & etoh rehab. will be ongoing for a year. going well. MED3 issued for Drug Rehabilitation from 30/12/12 - 17/03/13
18-Jan-2013 08:01	Administration note (AT Medics - The Loxford Practice) JOGIA, Harsha (Mrs) Entered By: , System User () <i>Empty consultation</i>
08-Jan-2013 09:57	Administration note (AT Medics - The Loxford Practice) TRIVEDI, Mina (Mrs) Entered By: , System User ()
Additional	Lloyd George record received
08-Jan-2013 09:57	Administration note (AT Medics - The Loxford Practice) TRIVEDI, Mina (Mrs) Entered By: , System User () <i>Empty consultation</i>
21-Nov-2012 13:53	GP Surgery (AT Medics - The Loxford Practice) NDUKWE, Anthony (Dr) Entered By: , System User ()
Additional	[D]Micturition frequency and polyuria long history of urinary frequency - extensively investigated - normal results - scans/urine tests/blood tests . NOW admits heavy alcohol consumption plan- modify alcohol use- for improved urinary frequency Higher risk drinking
21-Nov-2012 08:09	Administration note (AT Medics - The Loxford Practice) JOGIA, Harsha (Mrs) Entered By: , System User () <i>Empty consultation</i>
20-Nov-2012 16:51	Administration note (AT Medics - The Loxford Practice) PITROLA, Neel (Mr) Entered By: , System User () <i>Empty consultation</i>
20-Nov-2012 16:46	GP Surgery (AT Medics - The Loxford Practice) DRYDEN, Doreen (Ms) Entered By: , System User ()
Additional	ultrasound result, spot to neck sebaceous gland to neckline, not infected. Sebaceous cyst reassured. advised to pre book appt with own gp to discuss ongoing problems further.
20-Nov-2012 08:21	Administration note (AT Medics - The Loxford Practice) JOGIA, Harsha (Mrs) Entered By: , System User () <i>Empty consultation</i>
09-Nov-2012	GP Surgery (AT Medics - The Loxford Practice) PATEL, Manjote (Miss) Entered By: , System User ()
Additional	US scan of abdomen (Ongoing Episode) X-ray report received (New Episode)
09-Nov-2012	GP Surgery (AT Medics - The Loxford Practice) CHOWDHURY, Nilufar (Mrs) Entered By: , System User ()

	Additional	US scan of abdomen (New Episode) Renal ultrasound (New Episode)
09-Nov-2012		Letter (AT Medics - The Loxford Practice) CHOWDHURY, Nilufar (Mrs) Entered By: , System User ()
	Additional	Scanned Image  Ultrasound or Scan resultsSender: Loxford PolyclinicRecipient: The Practice LoxfordSent: 19 Nov 2012 10:44
09-Nov-2012		Letter (AT Medics - The Loxford Practice) PATEL, Manjote (Miss) Entered By: , System User ()
	Additional	Scanned Image  X Ray ReportSender: Loxford Polyclinic Moorfield Eye ClinicRecipient: The Practice LoxfordSent: 30 Nov 2012 11:13
01-Nov-2012 15:51		GP Surgery (AT Medics - The Loxford Practice) AKANDE, Jacqueline (Dr) Entered By: , System User ()
	Additional	Helicobacter Pylori Positive Came to discuss his medications for h pylori .He missed taking a dose and worried. Advised complete the medications that he has remaining. gp prn
01-Nov-2012 08:18		Administration note (AT Medics - The Loxford Practice) KHANOM, Rujina (Miss) Entered By: , System User ()
		<i>Empty consultation</i>
31-Oct-2012 10:31		Telephone consultation (AT Medics - The Loxford Practice) SAHA, Dipankar (Dr) Entered By: , System User ()
	Additional	Failed encounter - message left with household member TC. Rang pt at his request. Spoke to Teen Challenge representative - pt n/a at present to take call. PLAN - message left for pt to request another TA if still needs to speak to Dr.
25-Oct-2012 16:29		GP Surgery (AT Medics - The Loxford Practice) OKWUOSA, Chinonye (Dr) Entered By: , System User ()
	Medication	Amoxicillin 500mg capsules Take 2 caps twice daily 28 capsules Clarithromycin 500mg tablets take one every 12 hrs 14 tablets Lansoprazole 30mg gastro-resistant capsules take one twice daily 14 capsules
	Referral	Refer for ultrasound investign Referrer: Dr Chinonye Okwuosa at AT Medics - The Loxford Practice (NHS North East London Icb - A3a8r)Referral Recipient GMC Number: USSStatus: Waiting For InformationReferral Type: HospitalSender: Dr Chinonye Okwuosa (The Practice Loxford)Recipient: USSSent: 25 Oct 2012 16:39 (USS)
	Additional	Record Attachment  Sender: Dr Chinonye Okwuosa (The Practice Loxford)Recipient: USSSent: 25 Oct 2012 16:39 Triple therapy helicobacter pylori Lower urinary tract symptoms C/O- Urinary frequency and nocturia for 5-6 yrs, progressive.No dysuria and ?urgencyO/E- Nil remarkable.KUB USS arranged Helicobacter Pylori Positive
25-Oct-2012 08:10		Administration note (AT Medics - The Loxford Practice) MUDHAR, Baljit (Miss) Entered By: , System User ()
		<i>Empty consultation</i>
24-Oct-2012 19:42		Administration note (AT Medics - The Loxford Practice) NAEEM, Maryam (Dr) Entered By: , System User ()
		<i>Empty consultation</i>
22-Oct-2012 13:21		Administration note (AT Medics - The Loxford Practice) OKORIE, Chidi (Dr) Entered By: , System User ()
		<i>Empty consultation</i>
22-Oct-2012 13:21		Administration note (AT Medics - The Loxford Practice) OKORIE, Chidi (Dr) Entered By: , System User ()
		<i>Empty consultation</i>
22-Oct-2012 13:03		Administration note (AT Medics - The Loxford Practice) OKORIE, Chidi (Dr) Entered By: , System User ()
		<i>Empty consultation</i>
22-Oct-2012 13:03		Administration note (AT Medics - The Loxford Practice) OKORIE, Chidi (Dr) Entered By: , System User ()
		<i>Empty consultation</i>
22-Oct-2012 13:02		Administration note (AT Medics - The Loxford Practice) OKORIE, Chidi (Dr)

	Entered By: , System User ()
	<i>Empty consultation</i>
22-Oct-2012 13:01	Administration note (AT Medics - The Loxford Practice) OKORIE, Chidi (Dr) Entered By: , System User ()
	<i>Empty consultation</i>
22-Oct-2012 12:54	Administration note (AT Medics - The Loxford Practice) OKORIE, Chidi (Dr) Entered By: , System User ()
	<i>Empty consultation</i>
18-Oct-2012 16:56	Administration note (AT Medics - The Loxford Practice) SAHA, Dipankar (Dr) Entered By: , System User ()
	<i>Empty consultation</i>
18-Oct-2012 14:31	Administration note (AT Medics - The Loxford Practice) OKORIE, Chidi (Dr) Entered By: , System User ()
Investigation	Urea and electrolytes;Liver function tests;ESTIMATED GFR
18-Oct-2012 14:31	Administration note (AT Medics - The Loxford Practice) OKORIE, Chidi (Dr) Entered By: , System User ()
Investigation	TSH (KGH)
18-Oct-2012 14:31	Administration note (AT Medics - The Loxford Practice) OKORIE, Chidi (Dr) Entered By: , System User ()
Investigation	! Full blood count;Differential white blood cell count
18-Oct-2012 14:31	Administration note (AT Medics - The Loxford Practice) OKORIE, Chidi (Dr) Entered By: , System User ()
Investigation	Serum glucose level
16-Oct-2012 20:18	Administration note (AT Medics - The Loxford Practice) SAHA, Dipankar (Dr) Entered By: , System User ()
Investigation	Urine culture
16-Oct-2012	GP Surgery (Ranworth Surgery) BROWN, Sheila (Mrs) Entered By: , System User ()
Additional	Work assessment (New Episode)
16-Oct-2012	Letter (Ranworth Surgery) HARTLEY, Amy () Entered By: , System User ()
Additional	Scanned Image  General LetterSender: Job Centre PlusRecipient: Dr Saima Qurban (Ranworth Surgery)Sent: 13 Nov 2012 16:44
11-Oct-2012 15:17	GP Surgery (AT Medics - The Loxford Practice) FATIMILEHIN, Olasupo (Dr) Entered By: , System User ()
Referral	Referral for laboratory tests kgh, Referrer: Dr Olasupo Fatimilehin at AT Medics - The Loxford Practice (NHS North East London Icb - A3a8r)Status: Waiting For InformationReferral Type: HospitalSender: Dr Olasupo Fatimilehin (The Practice Loxford)Recipient: kghSent: 11 Oct 2012 15:21 Referral for laboratory tests kgh, Referrer: Dr Olasupo Fatimilehin at AT Medics - The Loxford Practice (NHS North East London Icb - A3a8r)Status: Waiting For InformationReferral Type: HospitalSender: Dr Olasupo Fatimilehin (The Practice Loxford)Recipient: kghSent: 11 Oct 2012 15:20
Additional	Record Attachment  Sender: Dr Olasupo Fatimilehin (The Practice Loxford)Recipient: kghSent: 11 Oct 2012 15:20 Record Attachment  Sender: Dr Olasupo Fatimilehin (The Practice Loxford)Recipient: kghSent: 11 Oct 2012 15:21 MED3 - doctor's statement 3/12: drug rehab- to run from 30/9/12
10-Oct-2012 13:40	Administration note (Ranworth Surgery) JOHNSON, Julie () Entered By: , System User ()
Additional	Sending of medical records to health authority No recoerds have been received at Ranworth - call consultations are on screen. new surgery is Systemone .
05-Oct-2012 14:32	GP Surgery (AT Medics - The Loxford Practice) SAHA, Dipankar (Dr) Entered By: , System User ()
Medication	Buprenorphine 400microgram sublingual tablets sugar free take 2 tabs in single dose to be

	used on 6.10.12 only 2 tablets
Additional	Medication requested See notes 27.9.12. Mr Newcombe Again attended . One remaining issue - final 4 days of reducing dose is dated to commence from 7.10.12, but last 4 day scrip only gave 6 tabs for 2 tabs daily sue. Should have been 8 tabs - needs 2 final tabs for tomorrow prior to commencing final 4/7 prescription. PLAN - 2 tabs issued of Buprenorphine for consumption tomorrow.
03-Oct-2012 14:24	GP Surgery (AT Medics - The Loxford Practice) OLIVER, Sonya (Ms) Entered By: , System User ()
Allergy	No known allergies
Additional	O/E - blood pressure reading 117/74 mm[Hg] [V]Alcohol rehabilitation Pt currently residing in teen challenge for past 2wks on a 18mth programme. H/O: regular medication ~Taking detox tablets, no confirmation seen. Stopped smoking Pt says stopped smoking 2wks ago.
Additional	H/O: medical history NOS • [V]Drug rehabilitation • O/E - weight 70 kg Urine dipstick test Pt unable to provide urine for dipstick test. O/E - height 185 cm • Body mass index 20.45 kg/m2 • Advice about exercise FH: Ischaemic heart disease at less than 60 years grandfather Dietary advice Interpreter not needed Pt communicates well FH: Hypertension mother Testicular self-examination instruction • Physically active • Attended new patient screening • Ex-drinker • Smoking cessation advice Ex-smoker stopped smoking 2wks ago
02-Oct-2012 15:13	GP Surgery (AT Medics - The Loxford Practice) LEE, Ann (Mrs) Entered By: , System User ()
Medication	Sodium alginate 500mg/5ml / Potassium bicarbonate 100mg/5ml oral suspension sugar free 5ml or 10ml 4 times/day 2 packs of 500 mls
Referral	Referral for diagnostic investigation microbiology, Referrer: Mrs Ann Lee at AT Medics - The Loxford Practice (NHS North East London Icb - A3a8r)Status: Waiting For InformationReferral Type: HospitalSender: Mrs Ann Lee (The Practice Loxford)Recipient: microbiologySent: 02 Oct 2012 15:25. HPylori - says had test done at previous surgery, was positive but not given rx. Not on system, so adv stop omeprazole, repeat test 2/52.
Additional	Record Attachment 📎 Sender: Mrs Ann Lee (The Practice Loxford)Recipient: microbiologySent: 02 Oct 2012 15:25
02-Oct-2012 08:17	Administration note (AT Medics - The Loxford Practice) GARRARD, Leah (Mrs) Entered By: , System User () <i>Empty consultation</i>
02-Oct-2012	Administration note (AT Medics - The Loxford Practice) NAEEM, Maryam (Dr) Entered By: , System User ()
Investigation	Helicobacter pylori antigen test Follow-up action: Need to speak to doctor
01-Oct-2012 08:34	Administration note (AT Medics - The Loxford Practice) BEGUM, Janifa (Miss) Entered By: , System User () <i>Empty consultation</i>
01-Oct-2012	Administration note (Ranworth Surgery) PRACTICE, Previous (User) Entered By: , System User ()
Additional	** Care ended at Ranworth Surgery (GMS) **
27-Sep-2012 13:02	GP Surgery (AT Medics - The Loxford Practice) SAHA, Dipankar (Dr) Entered By: , System User ()
Medication	Buprenorphine 400microgram sublingual tablets sugar free take 3 tabs in single daily dose to use on 27.9.12 and 28.9.12 6 tablets
Additional	Medication given SEe notes above. Verified reducing dose Subutex. Is actually a dose reducing every 4 days by 1 0.4mg tab till zero - script on 29.9.12 is for 3 tabs (so presumably actually meant to be on 4 tabs at present). PLAN - since already half way through current missed 1.6mg Subutex OD 4 day period, have elected to issue 2 additional days of the next

4 day 1.2mg duration instead (so 6/7 on 1.2mg OD in total).



27-Sep-2012 12:43	GP Surgery (AT Medics - The Loxford Practice) SAHA, Dipankar (Dr) Entered By: , System User ()
Additional	Medication requested 3rd party encounter - Garry Newcome from Teen Challenge. See notes above. Pt just been accepted to Teen Challenge - usual scenario in that Teen Challenge's Manager norm does not accept clients who are still on meds, but pt was accepted on 1/12 reducing dose of meds, and once stopped, no more meds. In Teen Challenge safe has the future 1weekly prescriptions (presumable for next 3 weeks till runs out), but the current one has been lost in the post. Pt without meds for several days and current one in severe withdrawal symptoms. Unable to take next weekly script to Pharmacy to dispense as dated from 29.9.12. PLAN - have agreed to issue 2/7 supply (today/tomorrow) Subutex provided Mr Newcome goes back to Teen Challenge and brings immediate next future script to me to verify everything discussed during consult + med doses. Mr Newcombe agreed to go to Teen Challenge immediately to recover future script and will bring back to show it to me next 20-30min.
26-Sep-2012 13:35	GP Surgery (AT Medics - The Loxford Practice) NDUKWE, Anthony (Dr) Entered By: , System User ()
Additional	Medication requested Requesting for surbitex, diazepam ,and detox medications which he says are in post from Colchester - and chemist advised him to see gp to get prescription on blue prescription . Plan - I offered to refer him to RDAS immediately but declined. So I apologised as I was unable to prescribe requested medications - can attend A/E if condition worsens .
25-Sep-2012 14:48	Administration note (Ranworth Surgery) HARTLEY, Karen (Miss) Entered By: , System User ()
Additional	Homeless enhanced service completed
25-Sep-2012 13:47	Administration note (AT Medics - The Loxford Practice) BEGUM, Janifa (Miss) Entered By: , System User ()
Additional	White British Place of birth Glasgow Main spoken language English • Single person • No current problems or disability • White British • Single person • Never smoked tobacco • Alcohol use disorder identification test consumption questionnaire 0 Unk UoM
24-Sep-2012 08:43	Administration note (Ranworth Surgery) QURBAN, Saima (Dr) Entered By: , System User ()
Additional	[V]Issue of medical certificate 1 m with drug dependence
24-Sep-2012	Administration note (AT Medics - The Loxford Practice) AT MEDICS - THE LOXFORD PRACTICE Entered By: , System User () <i>Empty consultation</i>
24-Sep-2012	Administration note (AT Medics - The Loxford Practice) PRACTICE, Previous (User) Entered By: , System User ()
Additional	** Care started at AT Medics - The Loxford Practice (GMS) **
20-Sep-2012	GP Surgery (Ranworth Surgery) JOHNSON, Julie () Entered By: , System User ()
Additional	Administrative form (New Episode). form completed for teen challenge london
20-Sep-2012	Letter (Ranworth Surgery) JOHNSON, Julie () Entered By: , System User ()
Additional	Scanned Image  Medical ReportsSent: 20 Sep 2012 13:15
14-Sep-2012 15:49	GP Surgery (Ranworth Surgery) WAMALWA, Aggrey (Dr) Entered By: , System User ()
Medication	Diazepam 2mg tablets one at night try to omit am dose 28 tablets Diazepam 5mg tablets one bd 28 tablets
Additional	is under NEEDAS . requesting diazepam. has been drinking alcohol and started vomiting yesterday- now with withdrawal with barcadi breezers. Now feels better. Knows to contact a/e /Needas



Medication requested

14-Sep-2012 11:57	Administration note (Clacton Urgent Treatment Centre) WINTER, Valerie () Entered By: , System User ()
Additional	Letter Template: Clacton MIU Departure Letter New  MIU Discharge LetterSender: Clacton Minor Injuries UnitRecipient: Dr Saima Qurban (Ranworth Surgery)Sent: 14 Sep 2012 11:57
14-Sep-2012 11:43	Administration note (Ranworth Surgery) JORDAN, Helena () Entered By: , System User () <i>Empty consultation</i>
14-Sep-2012 11:34	GP Surgery (Clacton Urgent Treatment Centre) WINTER, Valerie () Entered By: , System User ()
Additional	O/E - blood pressure reading 128/90 mm[Hg]
14-Sep-2012 11:25	Administration note (Clacton Urgent Treatment Centre) KENDLE, Mary (Mrs) Entered By: , System User ()
Additional	Triage category set to: 4 Standard
14-Sep-2012 11:25	Administration note (Clacton Urgent Treatment Centre) KENDLE, Mary (Mrs) Entered By: , System User ()
Referral	Referral for further care Status: Discharged From Care (Active)Recorded on: 14 Sep 2012Recorded at: Clacton Urgent Treatment Centre (578427341107)Date of referral: 14 Sep 2012 11:25Date of action: 14 Sep 2012 11:25Outcome of referral: AcceptedDischarged: 14 Sep 2012 11:57Reason For discharge: DischargedPatient aware: true (Clacton Urgent Treatment Centre)
14-Sep-2012 11:25	GP Surgery (Ranworth Surgery) JOHNSON, Julie () Entered By: , System User ()
Additional	Seen in minor injuries department
14-Sep-2012 11:25	Letter (Ranworth Surgery) JOHNSON, Julie () Entered By: , System User ()
Additional	Scanned Image  Minor Injuries UnitSender: Clacton Minor Injuries UnitRecipient: Ranworth SurgerySent: 14 Sep 2012 12:13
14-Sep-2012 11:24	Administration note (Clacton Urgent Treatment Centre) KENDLE, Mary (Mrs) Entered By: , System User ()
Additional	Main spoken language English • Widowed • British or mixed British - ethnic category 2001 census
14-Sep-2012 09:20	DNA (Ranworth Surgery) WAMALWA, Aggrey (Dr) Entered By: , System User ()
Additional	Did not attend for GP appointment with Dr Aggrey L Wamalwa Did not attend
06-Sep-2012 10:57	Administration note (Ranworth Surgery) JORDAN, Helena () Entered By: , System User () <i>Empty consultation</i>
04-Sep-2012 13:54	Administration note (Ranworth Surgery) QURBAN, Saima (Dr) Entered By: , System User ()
Additional	[V]Issue of medical certificate from 1/9/12 till 30/9/12 with drug dependence
04-Sep-2012 12:43	Administration note (Ranworth Surgery) MORRISON, Patricia () Entered By: , System User () <i>Empty consultation</i>
31-Aug-2012 14:55	GP Surgery (Ranworth Surgery) SENTHILNATHAN, Sumitha (Dr) Entered By: , System User ()
Medication	Diazepam 2mg tablets one at night try to omit am dose 28 tablets Diazepam 5mg tablets one bd 28 tablets Omeprazole 20mg gastro-resistant capsules take one daily 28 capsules
Additional	Under Needas - for drug dependenc, run out of diazepam -issued . Medication requested r/v a sneeded
31-Aug-2012 11:21	Administration note (Ranworth Surgery) RICHARDS, Hilary (Mrs)

	Entered By: , System User ()
	<i>Empty consultation</i>
30-Aug-2012 18:00	DNA (Ranworth Surgery) DI, Fabio () Entered By: , System User ()
Additional	Did not attend for GP appointment with Fabio Raffaella Di Did not attend
30-Aug-2012 13:26	Administration note (Ranworth Surgery) MORRISON, Patricia () Entered By: , System User ()
	<i>Empty consultation</i>
23-Aug-2012 12:48	Administration note (Ranworth Surgery) QURBAN, Saima (Dr) Entered By: , System User ()
Additional	[V]Issue of medical certificate Thu 23 Aug 12:15 - Mrs Patricia Morrisonp/t would like med cert from 17/8/12 please for 2 weeks
23-Aug-2012 12:14	Administration note (Ranworth Surgery) MORRISON, Patricia () Entered By: , System User ()
	<i>Empty consultation</i>
21-Aug-2012 11:50	DNA (Ranworth Surgery) QURBAN, Saima (Dr) Entered By: , System User ()
Additional	Did not attend for GP appointment with Dr Saima Qurban Did not attend
21-Aug-2012 11:30	DNA (Ranworth Surgery) QURBAN, Saima (Dr) Entered By: , System User ()
Additional	Did not attend for GP appointment with Dr Saima Qurban Did not attend
21-Aug-2012 09:37	Administration note (Ranworth Surgery) JORDAN, Helena () Entered By: , System User ()
	<i>Empty consultation</i>
21-Aug-2012 09:27	GP Surgery (Ranworth Surgery) QURBAN, Saima (Dr) Entered By: , System User ()
Additional	Mon 20 Aug 09:53 - Miss Gemma Eley Assigned to Dr Sumitha Senthilnathan pt said hes bag was stolen from the frandon hotel he contacted the police as they arrested another man from there and he thought it was him but the police said he this other gentlemen did not have these items on him at time of arrest. are you happy to issue another px?
20-Aug-2012 13:20	Administration note (Ranworth Surgery) BIRD, Gemma (Mrs) Entered By: , System User ()
	<i>Empty consultation</i>
17-Aug-2012 09:34	GP Surgery (Ranworth Surgery) WAMALWA, Aggrey (Dr) Entered By: , System User ()
Medication	Diazepam 2mg tablets one at night try to omit am dose 28 tablets Diazepam 5mg tablets one bd 28 tablets
Additional	under NEEDAS on tapering dose diazepam- currently on 12 mg Drug dependence see 2 weeks
15-Aug-2012 13:53	Administration note (Ranworth Surgery) MORRISON, Patricia () Entered By: , System User ()
Additional	Frequent use of night hostels
14-Aug-2012 17:41	Administration note (Ranworth Surgery) JORDAN, Helena () Entered By: , System User ()
	<i>Empty consultation</i>
14-Aug-2012 17:10	GP Surgery (Ranworth Surgery) MCGLYNN, Moyra (Ms) Entered By: , System User ()
Additional	AWFUL sunburn on chest AND FACE and abdomen and inside of upper arms. Small blisters. For flamazine and aqueous cream and see Friday if he is not feeling well as may need antibiotics.


Sunburn









14-Aug-2012 16:56	GP Surgery (Ranworth Surgery) MCGLYNN, Moyra (Ms) Entered By: , System User ()
Medication	Aqueous cream Apply As needed 500 grams Flamazine 1% cream (Smith & Nephew Healthcare Ltd) use twice daily 1 pack of 250 gram(s)
14-Aug-2012 11:04	Administration note (Ranworth Surgery) MORRISON, Patricia () Entered By: , System User () <i>Empty consultation</i>
14-Aug-2012 11:01	Administration note (Ranworth Surgery) MORRISON, Patricia () Entered By: , System User () <i>Empty consultation</i>
28-Jul-2012 13:37	GP Surgery (Ranworth Surgery) BROWN, Sheila (Mrs) Entered By: , System User ()
Additional	Patient given telephone advice out of hours Doctor Triage
28-Jul-2012 13:37	Letter (Ranworth Surgery) BROWN, Sheila (Mrs) Entered By: , System User ()
Additional	Scanned Image  Out of HoursSender: Harmoni Cpo - Cardinal PointRecipient: Dr Saima Qurban (Ranworth Surgery)Sent: 30 Jul 2012 09:59
27-Jul-2012 09:38	GP Surgery (Ranworth Surgery) QURBAN, Saima (Dr) Entered By: , System User ()
Medication	Diazepam 2mg tablets one at night try to omit am dose 28 tablets Diazepam 5mg tablets one bd 28 tablets
Additional	under NEEDAS on tapering courses of diazepam currently 12mg could take on axtra if required also left hand felt a bit weak as compare to rt couple of weeks had it last yr as well getting better now no numbness except small area over left thumb no visual symptoms power 5/5 UL/hands intact reflexes intact touch both hands dorsal and palmer surface as got better happy to see how he feels will be r/v 2 weeks about his diazepam
Additional	Medication requested
20-Jul-2012 10:02	Administration note (Ranworth Surgery) JORDAN, Helena () Entered By: , System User () <i>Empty consultation</i>
18-Jul-2012	GP Surgery (Ranworth Surgery) JOHNSON, Julie () Entered By: , System User ()
Additional	Seen by psychiatrist (New Episode)
18-Jul-2012	Letter (Ranworth Surgery) HARTLEY, Amy () Entered By: , System User ()
Additional	Scanned Image  Clinic LetterSender: Dr Hem-Raj Pal (N E E M H (NEEDAS))Recipient: Dr Saima Qurban (Ranworth Surgery)Sent: 24 Jul 2012 13:27
16-Jul-2012 09:07	GP Surgery (Ranworth Surgery) QURBAN, Saima (Dr) Entered By: , System User ()
Medication	Diazepam 2mg tablets one at night try to omit am dose 28 tablets Diazepam 5mg tablets one bd 28 tablets
Additional	coming off diazepam doing well FU 2 weeks will taper down am 2mg diazepam from now onwards r/v 2 weeks
Additional	[V]Issue of medical certificate 4 weeks from 21/7 with anxiety and depression
13-Jul-2012 11:18	Administration note (Ranworth Surgery) JORDAN, Helena () Entered By: , System User () <i>Empty consultation</i>
10-Jul-2012	GP Surgery (Ranworth Surgery) JOHNSON, Julie () Entered By: , System User ()
Additional	Letter received (New Episode)
10-Jul-2012	Letter (Ranworth Surgery) JOHNSON, Julie () Entered By: , System User ()

	Additional	Scanned Image  Clinic LetterSender: community drug and alcohol serviceRecipient: Dr Saima Qurban (Ranworth Surgery)Sent: 16 Jul 2012 14:51
09-Jul-2012		GP Surgery (Ranworth Surgery) JOHNSON, Julie () Entered By: , System User ()
	Additional	Drug addiction therapy (New Episode)
09-Jul-2012		Letter (Ranworth Surgery) HARTLEY, Amy () Entered By: , System User ()
	Additional	Scanned Image  Clinic LetterRecipient: Dr Saima Qurban (Ranworth Surgery)Sent: 22 Aug 2012 10:51
03-Jul-2012 15:43		GP Surgery (Ranworth Surgery) SPOONER, Laurel (Dr) Entered By: , System User ()
	Medication	Diazepam 2mg tablets one bd 28 tablets Diazepam 5mg tablets one bd 28 tablets Omeprazole 20mg dispersible gastro-resistant tablets take one daily 28 tablets
	Additional	Repeat script. is doing well. Has offer of Rehab. Told about Emmaus. Did heroine for 2 years & it killed his girlfriend. has one child who has been adopted.
27-Jun-2012 11:18		Administration note (Ranworth Surgery) MANN, Janice (Mrs) Entered By: , System User () <i>Empty consultation</i>
26-Jun-2012 09:54		Administration note (Ranworth Surgery) QURBAN, Saima (Dr) Entered By: , System User ()
	Additional	[V]Issue of medical certificate from 21/6 for 4 weeks with anxiety and depression
25-Jun-2012 16:49		Administration note (Ranworth Surgery) MORRISON, Patricia () Entered By: , System User () <i>Empty consultation</i>
25-Jun-2012 15:50		Administration note (Ranworth Surgery) QURBAN, Saima (Dr) Entered By: , System User ()
	Medication	Diazepam 2mg tablets one bd 28 tablets Diazepam 5mg tablets one bd 28 tablets
25-Jun-2012 11:15		Administration note (Ranworth Surgery) BIRD, Gemma (Mrs) Entered By: , System User ()
	Additional	patient had medication stolen or lost : Police have given patient case number: EC/029627112
22-Jun-2012 12:47		Bulk Operation (Ranworth Surgery) HARTLEY, Karen (Miss) Entered By: , System User ()
	Additional	Homeless enhanced services administration Added in bulk
20-Jun-2012 16:36		Administration note (Ranworth Surgery) MORRISON, Patricia () Entered By: , System User () <i>Empty consultation</i>
20-Jun-2012 16:29		GP Surgery (Ranworth Surgery) QURBAN, Saima (Dr) Entered By: , System User ()
	Medication	Diazepam 2mg tablets one bd 28 tablets Diazepam 5mg tablets one bd 28 tablets Fusidic acid 2% cream apply tds 1 pack of 30 gram(s)
	Additional	want to start 12mg said was on that aware of SE but too anxious agreed to be taper down so will r/v in 2 weeks looked calm no thoughts DSH has impetigo nose Rx with fuscidic acid a week RINB
	Additional	Medication requested
20-Jun-2012 14:56		GP Surgery (Ranworth Surgery) QURBAN, Saima (Dr) Entered By: , System User ()
	Additional	Wed 20 Jun 12:45 - Miss Gemma Eley hes last doctor surgery said they have never prescribed him valium only diazepam he was on 12mg! but the last script he had was only for the 2mg!
20-Jun-2012 14:30		Administration note (Ranworth Surgery) BUNCE, Lorraine (Mrs)

	Entered By: , System User ()
Additional	Old GP surgery London Road Wickford 01268 765533.Vicky Jones from Inside Out Clacton called to say this pt is a bit concerned about his medications. Above GP details if needed to clarify anything
20-Jun-2012 12:41	Administration note (Ranworth Surgery) BIRD, Gemma (Mrs) Entered By: , System User () <i>Empty consultation</i>
20-Jun-2012 12:24	GP Surgery (Ranworth Surgery) QURBAN, Saima (Dr) Entered By: , System User ()
Additional	Wed 20 Jun 11:55 - Miss Gemma Eley pt is a new pt who you are booked to see later he has been given a monthly px from his other doctorw which ha sbeen faxed to a local chemist for pt but they did not issue valium if you need to contact the old surgery to confirm this the number is 01268765533. I have been given this info from the pt probation officer
20-Jun-2012 11:55	Administration note (Ranworth Surgery) BIRD, Gemma (Mrs) Entered By: , System User () <i>Empty consultation</i>
20-Jun-2012 11:51	Administration note (Ranworth Surgery) BIRD, Gemma (Mrs) Entered By: , System User () <i>Empty consultation</i>
20-Jun-2012 11:48	Administration note (Ranworth Surgery) BIRD, Gemma (Mrs) Entered By: , System User ()
Additional	Alcohol screen - AUDIT completed 12 Unk UoM • Alcohol screen - AUDIT C completed 12 Unk UoM • New patient questionnaire completed • FH: Asthma • Patient registered GMS1 • White British • Main spoken language English • Ex-smoker • English language • Widowed • British or mixed British - ethnic category 2001 census Sister: Nadia Kerr Sister: Nadia Kerr
20-Jun-2012	Administration note (London Road Surgery) PRACTICE, Previous (User) Entered By: , System User ()
Additional	** Care ended at London Road Surgery (GMS) **
20-Jun-2012	Administration note (Ranworth Surgery) PRACTICE, Previous (User) Entered By: , System User ()
Additional	** Care started at Ranworth Surgery (GMS) **
20-Jun-2012	Letter (Ranworth Surgery) RICHARDS, Hilary (Mrs) Entered By: , System User ()
Additional	Scanned Image 📄 New Patient RegistrationSent: 20 Jun 2012 12:24
20-Jun-2012	Administration note (Ranworth Surgery) RANWORTH SURGERY Entered By: , System User () <i>Empty consultation</i>
15-Jun-2012 12:05	Administration note (London Road Surgery) HOLLAND, Jane (Ms) Entered By: , System User () <i>Empty consultation</i>
13-Jun-2012 18:17	Administration note (London Road Surgery) RICHARDS, Paul (Dr) Entered By: , System User ()
Additional	MED3 - doctor's statement drug dependency; depression 4wks
18-May-2012 12:31	GP Surgery (London Road Surgery) LANKA, Soumya (Dr) Entered By: , System User ()
Additional	med 3 depression - 4 weeks Certificate depression - 4 weeks
16-May-2012 13:30	GP Surgery (London Road Surgery) OPE-EWE, Olumuyiwa (Dr) Entered By: , System User ()
Medication	Diazepam 10mg tablets take one daily in addition to 2mg 28 tablets Diazepam 2mg tablets take one daily in addition 28 tablets
Additional	patient is on reducing dose of diazepam

he is on 12mg Diazepam reducing dose
needs to discuss his reducing dose

30-Apr-2012 13:38	Administration note (London Road Surgery) LAMBERT, Juliet (Miss) Entered By: , System User ()
Medication	Diazepam 10mg tablets 1 Three Times Daily 2 packs of 28 tablet(s)
24-Apr-2012 14:00	Administration note (London Road Surgery) RICHARDS, Paul (Dr) Entered By: , System User ()
Additional	MED3 - doctor's statement 20.4.12 - 20.5. unfit drug dependency and depression
18-Apr-2012 16:54	Administration note (London Road Surgery) SUTTON, Kim (Mrs) Entered By: , System User ()
Medication	Diazepam 10mg tablets 1 Three Times Daily 2 packs of 28 tablet(s)
04-Apr-2012 13:58	Administration note (London Road Surgery) SUTTON, Kim (Mrs) Entered By: , System User ()
Medication	Diazepam 10mg tablets 1 Three Times Daily 2 packs of 28 tablet(s)
27-Mar-2012 12:53	Administration note (London Road Surgery) RICHARDS, Paul (Dr) Entered By: , System User ()
Additional	MED3 - doctor's statement 13.3.12 4wks unfit 12 drug dependency and depression
21-Mar-2012 12:51	Administration note (London Road Surgery) OPE-EWE, Olumuyiwa (Dr) Entered By: , System User ()
Medication	Diazepam 10mg tablets take 10mg tablet three times daily for the next 14 days 42 tablets
05-Mar-2012 17:23	Administration note (London Road Surgery) GAFF, Barbara (Mrs) Entered By: , System User ()
Medication	Diazepam 10mg tablets 1 Three Times Daily 2 packs of 28 tablet(s) Diazepam 2mg tablets 1 Three Times Daily 2 packs of 28 tablet(s)
22-Feb-2012	Letter (London Road Surgery) COLLINS, Patricia (Mrs) Entered By: , System User ()
Additional	Scanned Image  Clinic LetterSender: Community Drug/Alcohol ServiceRecipient: Dr Janki Persaud (London Road Surgery)Sent: 28 Feb 2012 14:18
22-Feb-2012	Administration note (London Road Surgery) HOLLAND, Jane (Ms) Entered By: , System User ()
Additional	Adult safeguarding concern Victim of child abuse historical abuse as a child previously had an alcohol dependency Seen in community DMARD monitoring clinic • Acute alcoholic intoxication in remission, in alcoholism
21-Feb-2012 09:07	GP Surgery (London Road Surgery) BUDAHN, Leckranee (Dr) Entered By: , System User ()
Additional	MED3 - doctor's statement 24.2.12-25.3.12 drug dependency and depression
20-Feb-2012 16:41	Administration note (London Road Surgery) SHORTALL, Jill (Mrs) Entered By: , System User ()
Medication	Diazepam 10mg tablets 1 Three Times Daily 2 packs of 28 tablet(s) Diazepam 2mg tablets 1 Three Times Daily 2 packs of 28 tablet(s)
09-Feb-2012 13:03	Administration note (London Road Surgery) RICHARDS, Paul (Dr) Entered By: , System User ()
Additional	Medication review done
09-Feb-2012 10:04	GP Surgery (London Road Surgery) BUDAHN, Leckranee (Dr) Entered By: , System User ()
Medication	Diazepam 10mg tablets 1 Three Times Daily 2 packs of 28 tablet(s) Diazepam 2mg tablets 1 Three Times Daily 2 packs of 28 tablet(s) Sertraline 50mg tablets half tablet daily 14 tablets
Additional	could not tolerate fluoxetine as made him feel more depressed has been taking all diazepam at once, advised to split it during the day and try sertraline instead at 15mg for 2/52 Advised to choose a regular doctor and rev in 2/52

	Additional	Drug dependence
07-Feb-2012		Letter (London Road Surgery) SCRIVENER, Gillian () Entered By: , System User ()
	Additional	Scanned Image  FaxSender: SEPTRecipient: Dr Paul Richards (London Road Surgery)Sent: 06 Mar 2012 13:13
25-Jan-2012		Letter (London Road Surgery) BROWNE, Tracy (Mrs) Entered By: , System User ()
	Additional	Scanned Image  Clinic LetterSender: drug and alcohol programmeRecipient: Dr Janki Persaud (London Road Surgery)Sent: 23 Feb 2012 10:51
24-Jan-2012 16:08		GP Surgery (London Road Surgery) RICHARDS, Paul (Dr) Entered By: , System User ()
	Medication	Diazepam 10mg tablets 3 a day 2 packs of 28 tablet(s) Diazepam 2mg tablets 4 tabs a day reducing by 1 tablet every 2 weeks 3 packs of 28 tablet(s) Fluoxetine 20mg capsules take one daily 1 pack of 30 capsule(s)
	Additional	says doin ok. says wrong dose of diazepam prescribed (will investigate- did actually copy from the CDAS recommendation and pt agreed 2mg size to reduce easily). took 40 tabsx2mg ie 80mg initially- was rx ast 20 tabs ie 40mg. now says would prefer 3x 10mg +4x2mg as would help him with counting. currently on 40mg a day and due to reduce to 38mg today. feeling depressed. inquest on girlfriends death. eating well. going to start gym. req antidepressants had citalopram prozac. no thoguhts self harm. weekly contact with CDAS + probation. slowed. eye contact good.
	Additional	MED3 - doctor's statement 23.1.12 - 23.2.12 depression and drug dependency; unfit Medication review done Patient health questionnaire (PHQ-9) score pos Q2 neg Q1 total= 10 somewhat diff
24-Jan-2012		Letter (London Road Surgery) BROWNE, Tracy (Mrs) Entered By: , System User ()
	Additional	Scanned Image  PHQ9 Depression Screening FormSender: london road surgeryRecipient: Dr Paul Richards (London Road Surgery)Sent: 14 Feb 2012 08:49
20-Jan-2012		Letter (London Road Surgery) BROWNE, Tracy (Mrs) Entered By: , System User ()
	Additional	Scanned Image  Clinic LetterSender: drug and alcohol programmeRecipient: Dr Janki Persaud (London Road Surgery)Sent: 23 Feb 2012 10:54
20-Jan-2012		Letter (London Road Surgery) BROWNE, Tracy (Mrs) Entered By: , System User ()
	Additional	Scanned Image  Clinic LetterSender: drug and alcohol programmeRecipient: Dr Janki Persaud (London Road Surgery)Sent: 23 Feb 2012 10:52
20-Jan-2012		Letter (London Road Surgery) BROWNE, Tracy (Mrs) Entered By: , System User ()
	Additional	Scanned Image  Clinic LetterSender: SEPTRecipient: Dr Paul Richards (London Road Surgery)Sent: 23 Feb 2012 09:38
20-Jan-2012		Letter (London Road Surgery) LUCK, Rosamund (Mrs) Entered By: , System User ()
	Additional	Scanned Image  Clinic LetterSender: Community Recipient: Dr Janki Persaud (London Road Surgery)Sent: 28 Jun 2012 12:50
20-Jan-2012		Administration note (London Road Surgery) LYON, Karen (Mrs) Entered By: , System User ()
	Additional	Notes summary on computer
14-Jan-2012		Letter (London Road Surgery) SMITH, Sheila (Mrs) Entered By: , System User ()
	Additional	Scanned Image  MiscellaneousSender: temporary servicesRecipient: Dr Janki Persaud (London Road Surgery)Sent: 14 Mar 2012 11:48

12-Jan-2012 10:04	GP Surgery (London Road Surgery) RICHARDS, Paul (Dr) Entered By: , System User ()
Additional	re script - already done. see in 12days. feels supported. having detox team reg contact.
11-Jan-2012 14:10	Administration note (London Road Surgery) RICHARDS, Paul (Dr) Entered By: , System User ()
Medication	Diazepam 2mg tablets twenty tablets a day = 40mg reducing by 2mg every week to 30mg then reduce by 1mg (half tab) every week. 280 tablets
Additional	see letter re diazepam reducing regime
Additional	Drug dose reducing regime • Medication review done
10-Jan-2012	Administration note (London Road Surgery) RICHARDS, Paul (Dr) Entered By: , System User ()
Additional	Drug dependence (Ongoing Episode. Summary type: Major). Diazepam, opiate, alcohol
10-Jan-2012	Letter (London Road Surgery) GAFF, Barbara (Mrs) Entered By: , System User ()
Additional	Scanned Image  Clinic LetterSender: community Drug & AlcoholRecipient: London Road SurgerySent: 27 Jan 2012 12:09
03-Jan-2012 11:44	Administration note (London Road Surgery) RICHARDS, Paul (Dr) Entered By: , System User ()
Additional	Medication review done no repeats listed! MED3 - doctor's statement depression; drug dependence. 23.12.11 - 23.1.12
19-Dec-2011 10:10	DNA (London Road Surgery) PERSAUD, Janki (Dr) Entered By: , System User ()
Additional	Did not attend for Session appointment with Dr Janki Persaud Did not attend
09-Dec-2011	Letter (London Road Surgery) SMITH, Sheila (Mrs) Entered By: , System User ()
Additional	Scanned Image  Clinic LetterSender: assesment fax m evans south essex partnership universityRecipient: Dr Leckranee Budahn (London Road Surgery)Sent: 28 Dec 2011 12:09
24-Nov-2011 10:58	GP Surgery (London Road Surgery) FERNANDO, Joseph (Dr) Entered By: , System User ()
Medication	Vitamin B compound tablets take one daily 56 tablets
Additional	Feeling depressed addicted to valium. Girl friend died si months ago of septicemia (heroin addict) Daughter is being adopted inJanuary. last time saw her firsat of December. Med3 Ct certificate four weeks Depression and alcohol, drug dependence
Additional	MED3 - doctor's statement (Summary type: Minor). four weeks Depression and alcohol, drug dependence
17-Nov-2011 14:25	Administration note (London Road Surgery) GAFF, Barbara (Mrs) Entered By: , System User ()
	<i>Empty consultation</i>
07-Nov-2011 12:57	Administration note (London Road Surgery) THOMAS, Kellie (Ms) Entered By: , System User ()
	<i>Empty consultation</i>
07-Nov-2011 10:17	Administration note (London Road Surgery) THOMAS, Kellie (Ms) Entered By: , System User ()
Referral	Referral for further care Sender: Dr Chukwuma OfonduRecipient: Community Drug & Alcohol Service Type: ReferralRef: 2133842\07 Nov 2011Entered by Ms Kellie ThomasTemplate: Referral Letter NHSUnactionedCategory: Alcohol ConsumptionType: Management Advice (See and Advise)Transport: No transport requiredUrgency: RoutineMessage body: I would be grateful if you could see Colin who has been drinking for the past 15 years and has been on heroin since 2007 though had a break for one year while in prison. He has recently moved to this area and is homeless presently. Since he is not able to get heroin he is taking Subutex and also takes up to 40mg Valium. He has indicated that he needs help.I have given him your number to call and hope you'll be able to help him.

07-Nov-2011	Administration note (London Road Surgery) THOMAS, Kellie (Ms) Entered By: , System User ()
Additional	Referral to community drug and alcohol team
04-Nov-2011 09:09	GP Surgery (London Road Surgery) OFONDU, Chukwuma (Dr) Entered By: , System User ()
Additional	drug and alcohol dependent alcohol since 15yrs ago drugs since 2007 had been on heroin though off while in prison takes soboxan since in this area not able to get heroin also takes up to 40mg valium new in this area home less wants help spoke to sankey house drug and alcohol unit pt to ring them pt given phone number also will make ref letter
04-Nov-2011 09:07	Administration note (London Road Surgery) GAFF, Barbara (Mrs) Entered By: , System User ()
Additional	British or mixed British - ethnic category 2001 census
04-Nov-2011	Administration note (London Road Surgery) LONDON ROAD SURGERY Entered By: , System User () <i>Empty consultation</i>
04-Nov-2011	Administration note (London Road Surgery) PRACTICE, Previous (User) Entered By: , System User ()
Additional	** Care started and ended at London Road Surgery (TR) **
04-Nov-2011	Administration note (London Road Surgery) PRACTICE, Previous (User) Entered By: , System User ()
Additional	** Care started at London Road Surgery (GMS) **
16-Sep-2011	Administration note (AT Medics - The Loxford Practice) SHAIKH, Shirin (Mrs) Entered By: , System User ()
Additional	Musculoskeletal structure of limb
11-Sep-2011	Administration note (AT Medics - The Loxford Practice) SHAIKH, Shirin (Mrs) Entered By: , System User ()
Additional	Peripheral nervous system disorders
Apr-2011	Administration note (London Road Surgery) RICHARDS, Paul (Dr) Entered By: , System User ()
Additional	Death of partner Fiance.
21-Dec-2010	Administration note (AT Medics - The Loxford Practice) SHAIKH, Shirin (Mrs) Entered By: , System User ()
Additional	Alcohol withdrawal
13-Mar-2010	Administration note (London Road Surgery) LYON, Karen (Mrs) Entered By: , System User ()
Additional	Had a fit Spontaneous recovery- self discharged from Prospect park.
16-Dec-2009	Administration note (AT Medics - The Loxford Practice) SHAIKH, Shirin (Mrs) Entered By: , System User ()
Additional	Hepatitis B 2 Reason: Routine MeasureBatch No: XXDosage: 0.5 mlExpiry date: 02 Feb 2014GMS Status: Practice GMSPCN Admin: Not PCN
15-Jul-2009	Administration note (AT Medics - The Loxford Practice) SHAIKH, Shirin (Mrs) Entered By: , System User ()
Additional	Hepatitis B 1 Reason: Routine MeasureBatch No: XXDosage: 0.5 mlExpiry date: 02 Feb 2014GMS Status: Practice GMSPCN Admin: Not PCN
16-May-2009	Administration note (AT Medics - The Loxford Practice) SHAIKH, Shirin (Mrs) Entered By: , System User ()
Additional	Haematuria
02-Jun-2007	Administration note (London Road Surgery) LYON, Karen (Mrs) Entered By: , System User ()
Additional	Fracture of calcaneus Jumped from first storey window.
22-Dec-2006	Administration note (London Road Surgery) LYON, Karen (Mrs) Entered By: , System User () <i>Empty consultation</i>

21-Dec-2006	Administration note (London Road Surgery) LYON, Karen (Mrs) Entered By: , System User ()
Additional	Opioid type drug dependence
18-Jan-2006	Administration note (London Road Surgery) LYON, Karen (Mrs) Entered By: , System User ()
Additional	Mixed anxiety and depressive disorder
07-Sep-2005	Administration note (London Road Surgery) LYON, Karen (Mrs) Entered By: , System User ()
Additional	Alcoholic gastritis
02-Dec-2003	Administration note (London Road Surgery) LYON, Karen (Mrs) Entered By: , System User ()
Additional	Alcohol dependence Has tried to stop drinking but severe withdrawal symptoms .
10-Nov-2003	Administration note (AT Medics - The Loxford Practice) SHAIKH, Shirin (Mrs) Entered By: , System User ()
Additional	Assault painful jaw
10-Nov-2003	Administration note (London Road Surgery) LYON, Karen (Mrs) Entered By: , System User () <i>Empty consultation</i>
14-Feb-2003	Administration note (London Road Surgery) LYON, Karen (Mrs) Entered By: , System User ()
Additional	Oesophagitis
19-Mar-2002	Administration note (AT Medics - The Loxford Practice) SHAIKH, Shirin (Mrs) Entered By: , System User ()
Additional	Tetanus Vaccine (Generic) Booster Reason: Routine MeasureBatch No: xxDosage: 0.5 mlGMS Status: Practice GMSPCN Admin: Not PCN
18-Mar-2002	Administration note (London Road Surgery) LYON, Karen (Mrs) Entered By: , System User ()
Additional	Tachycardia secondary to increased alcohol consumption.
20-Jan-2001	Letter (London Road Surgery) BROWNE, Tracy (Mrs) Entered By: , System User ()
Additional	Scanned Image  Clinic LetterSender: community drug and alcohol serviceRecipient: Dr Janki Persaud (London Road Surgery)Sent: 23 Feb 2012 09:40
06-May-2000	Administration note (London Road Surgery) LYON, Karen (Mrs) Entered By: , System User ()
Additional	Laceration of hand Right hand
06-Feb-1999	Administration note (London Road Surgery) LYON, Karen (Mrs) Entered By: , System User ()
Additional	Hyperventilation
06-Feb-1999	Administration note (AT Medics - The Loxford Practice) SHAIKH, Shirin (Mrs) Entered By: , System User ()
Additional	Hyperventilation
12-Jul-1998	Administration note (AT Medics - The Loxford Practice) SHAIKH, Shirin (Mrs) Entered By: , System User ()
Additional	Fracture of metacarpal bone
04-Mar-1997	Administration note (AT Medics - The Loxford Practice) SHAIKH, Shirin (Mrs) Entered By: , System User ()
Additional	Primary repair of tendon
1997	Administration note (London Road Surgery) LYON, Karen (Mrs) Entered By: , System User ()
Additional	Self inflicted injury Superficial injury to arm/wrist ,under influence of alcohol.
21-Apr-1995	Administration note (London Road Surgery) LYON, Karen (Mrs) Entered By: , System User ()
Additional	Acne vulgaris

19-Aug-1992	Administration note (AT Medics - The Loxford Practice) SHAIKH, Shirin (Mrs) Entered By: , System User ()
Additional	Penile disorders NOS
25-May-1984	Administration note (London Road Surgery) LYON, Karen (Mrs) Entered By: , System User ()
Additional	Operation for squint Left.
14-Jun-1982	Administration note (London Road Surgery) LYON, Karen (Mrs) Entered By: , System User ()
Additional	Injury of head Fell from a slide.
1982	Administration note (London Road Surgery) LYON, Karen (Mrs) Entered By: , System User () <i>Empty consultation</i>

Values and Investigations

13-May-2026	Plain X-ray shoulder joint - (RM11) - Normal - no action XR Shoulder Lt . 30/04/2026, 12:58, XR Shoulder Lt Clinical Question: left shoulder pain and stiffness for 6-8 months and getting worse. no h/o fall or trauma. Clinical Information: shoulder . Findings: No acute bony injury. Normal alignment at the glenohumeral joint and acromioclavicular joint. Normal acromiohumeral interval. No evidence of OA. . Dr N Kulkarni ST2 . PLEASE NOTE: If you are a patient and have any questions about the contents of this report, these should be discussed with the team/ doctor that arranged this examination.		
26-Mar-2026	Quantitv faecal immunochem tst - (MB) - Normal - no action Quantitv faecal immunochem tst 6 ug/g 0.00 - 9.90ug/g In line with NICE DG30 and local guidance, suggest two week wait referral on lower gastrointestinal cancer pathway if FIT >= 10 ug/g		
15-Jan-2026	! Urea and electrolytes - (MB) - just outside normal range - no action Serum sodium 141 mmol/L 133.00 - 146.00mmol/L Serum potassium 4.4 mmol/L 3.50 - 5.30mmol/L Serum chloride 102 mmol/L 95.00 - 108.00mmol/L ! Serum creatinine 106 umol/L 59.00 - 104.00umol/L eGFRcreat (CKD-EPI)/1.73 m*2 72 mL/min EPI-estimated GFR Comment Units: mL/min/1.73sqm Use with caution for adjusting drug dosage. - Note from 06/05/2025 the eGFR calculation has been updated from MDRD to CKD-EPI 2009 in line with national guidance. There may be some minor changes in the results.		

15-Jan-2026	Thyroid function test - (MB) - Normal - no action			
	Serum free T4 level	16.8	pmol/L	10.50 - 24.50pmol/L
	Serum TSH level	2.27	mU/L	0.27 - 4.20mU/L
15-Jan-2026	! Liver function test - (MB) - just outside normal range - no action			
	Serum albumin	46	g/L	35.00 - 50.00g/L
	Serum total bilirubin level	13	umol/L	0.00 - 21.00umol/L
	Serum alkaline phosphatase	68	U/L	30.00 - 130.00U/L
	! Serum ALT level	55	U/L	10.00 - 50.00U/L
	As of 14th October 2025, IFCC-recommended ALT assay (co-factor B6 -independent) is in use. Results from this method tend to be higher and reference ranges have been updated accordingly. Please be aware of this shift when comparing current results with historical data.			
15-Jan-2026	TESTOSTERONE LEVEL - (MB) - Normal - no action			
	Serum testosterone	18.9	nmol/L	8.60 - 29.00nmol/L
15-Jan-2026	HbA1c level (DCCT aligned) - (Souvita) - Normal - no action			
	HbA1c level - IFCC standardised	34	mmol/mol	20.00 - 41.00mmol/mol
	HbA1c (diagnostic refrn range)			
	~ An HbA1C of 42-47 mmol/mol suggests high risk of progression to diabetes. HbA1c >=48 mmol/mol is consistent with diagnosis of diabetes mellitus, but should be confirmed in asymptomatic individuals.			
09-Dec-2025	Mean corpuscular haemoglobin concentration above reference range			
09-Dec-2025	! Serum HDL cholesterol level - (MB) - just outside normal range - no action			
	Serum HDL cholesterol level	1.3	mmol/L	0.90 - 1.50mmol/L
	! Serum cholesterol	5.7	mmol/L	0.00 - 5.00mmol/L
	- There is no reference range for cholesterol; results should be interpreted according to cardiovascular risk.			
	Serum cholesterol/HDL ratio	4.4		0.00 - 5.00
	Se non HDL cholesterol level	4.4	mmol/L	
09-Dec-2025	Liver function test - (MB) - Normal - no action			
	Serum albumin	45	g/L	35.00 - 50.00g/L
	Serum total bilirubin level	7	umol/L	0.00 - 21.00umol/L
	Serum alkaline phosphatase	62	U/L	30.00 - 130.00U/L
	Serum ALT level	47	U/L	10.00 - 50.00U/L
	As of 14th October 2025, IFCC-recommended ALT assay (co-factor B6 -independent) is in use. Results from this method tend to be higher and reference ranges have been updated accordingly. Please be aware of this shift when comparing current results with historical data.			
09-Dec-2025	Urea and electrolytes - (MB) - Normal - no action			
	Serum sodium	141	mmol/L	133.00 - 146.00mmol/L
	Serum potassium	4.4	mmol/L	3.50 - 5.30mmol/L
	Serum chloride	106	mmol/L	95.00 - 108.00mmol/L
	Serum creatinine	99	umol/L	59.00 - 104.00umol/L
	eGFRcreat (CKD-EPI)/1.73 m*2	78	mL/min	
	EPI-estimated GFR Comment			
	Units: mL/min/1.73sqm			

Use with caution for adjusting drug dosage.

-

Note from 06/05/2025 the eGFR calculation has been updated from MDRD to CKD-EPI 2009 in line with national guidance. There may be some minor changes in the results.

09-Dec-2025 HbA1c level (DCCT aligned) - (MB) - Normal - no action

HbA1c lev - IFCC standardised	37	mmol/mol	20.00 - 41.00mmol/mol
HbA1c (diagnostic refrn range)			

~

An HbA1C of 42-47 mmol/mol suggests high risk of progression to diabetes.

HbA1c >=48 mmol/mol is consistent with diagnosis of diabetes mellitus, but should be confirmed in asymptomatic individuals.

09-Dec-2025 **! Full blood count - FBC - (TMDS) - Abnormal - contact patient**

Haemoglobin estimation	158	g/L	130.00 - 170.00g/L
Total white cell count	4.9	10 ⁹ /L	4.00 - 10.0010 ⁹ /L
Platelet count	271	10 ⁹ /L	150.00 - 410.0010 ⁹ /L
Haematocrit	0.44	L/L	0.40 - 0.50L/L
Red blood cell (RBC) count	5.25	10 ¹² /L	4.50 - 5.5010 ¹² /L
Mean corpuscular volume (MCV)	83.8	fL	83.00 - 101.00fL
Mean corpusc. haemoglobin(MCH)	30.1	pg	27.00 - 32.00pg
! Mean corpusc. Hb. conc. (MCHC)	359	g/L	315.00 - 345.00g/L
Red blood cell distribut width	12.7	%	11.60 - 14.00%
Neutrophil count	2.6	10 ⁹ /L	2.00 - 7.0010 ⁹ /L
Lymphocyte count	1.3	10 ⁹ /L	1.00 - 3.0010 ⁹ /L

Lymphocyte reference ranges updated

Monocyte count	0.5	10 ⁹ /L	0.20 - 1.0010 ⁹ /L
Eosinophil count	0.5	10 ⁹ /L	0.00 - 0.5010 ⁹ /L
Basophil count	0.1	10 ⁹ /L	0.00 - 0.1010 ⁹ /L
Immature granulocyte count	0	10 ⁹ /L	0.00 - 0.3010 ⁹ /L
Nucleated red blood cell count	0	10 ⁹ /L	0.00 - 0.2010 ⁹ /L

09-Dec-2025 Syphilis serology - (MB) - Normal - no action

Syphilis serology

Antibody NOT detected

No serological evidence of treponemal infection

09-Dec-2025 Anti HbC (total) - (MB) - Normal - no action

Hepatitis B core antibody lev

Antibody NOT detected

No evidence of past exposure to Hepatitis B virus.

Immunisation recommended if at risk of acquiring

Hepatitis B.

09-Dec-2025 HIV antibody level - (MB) - Normal - no action

HIV antibody level

Antibody NOT detected

This HIV antibody assay is able to detect

HIV-1, HIV-2 and HIV group O antibody, and p24

antigen.

09-Dec-2025 HBsAg - (MB) - Normal - no action

Hep B surface antigen level

Antigen NOT detected

09-Dec-2025 HCV IgG - (MB) - Normal - no action

Hepatitis C antibody test

Antibody NOT detected

Laboratory Number/Spec Type

Serum - Clotted blood (Virology)

09-Dec-2025	Sample Data Query - (MB) - Normal - no action			
	Specimen Processing Problem			
	Specimen received LEAKING.			
	Please use appropriate sample containers and ensure that lids are tightly closed for safe transport.			
09-Dec-2025	Chlam trach nucleic acid detn - (MB) - Normal - no action			
	Chlam trach nucleic acid detn			
	RNA NOT detected			
	N. gonorrhoeae nucl acid detn			
	RNA NOT detected			
	Laboratory Number/Spec Type			
	Urine (Virology)			
09-Dec-2025	AUDIT-C (Alcohol Use Disorders Identification Test - Consumption) score	0	/12	
09-Dec-2025	Alcohol consumption	0	U/week	
09-Dec-2025	Pulse rate	72	beats/min	
09-Dec-2025	O/E - blood pressure reading	115/87	mmHg	
09-Dec-2025	Body mass index	22.4	kg/m2	
09-Dec-2025	Body weight	79	kg	
09-Dec-2025	Standing height	188	cm	
09-Dec-2025	Urine blood test = negative			
09-Dec-2025	Urine glucose test negative			
09-Dec-2025	Urine protein test negative			
09-Dec-2025	GPPAQ hrs in last wk spent in physical exercise - 3hrs or more			
09-Dec-2025	GPPAQ hours in last week spent cycling - none			
09-Dec-2025	GPPAQ not in employment			
09-Dec-2025	Quality of life assessment completed			
05-Aug-2025	Helicobacter pylori IgG antibody level			
	Abnormality indicator: Negative			
	Clinical Information: GS to file f negative message Andrea- for ogd as per ERS			
	Helicobacter pylori IgG antibody level			
	Negative			
05-Aug-2025	Venous blood sample			
	Gentle pressure applied to minimise bruisingNo reported problems or complications encountered.Obtained sample from L ACF on 1st AttemptPatient feels well and puncture site has stopped bleedingVenous blood taken for the requested samples following infection control and practice policy			
08-Jul-2025	Serum lipid levels - mildly raised as exepcted			
	Abnormality indicator: Satisfactory			
	Clinical Information: SMD bloods			
	Serum lipid levels			
	Serum cholesterol level	5.1	mmol/L	
	Serum triglyceride levels	1.61	mmol/L	0.4 - 1.8 mmol/L
	Serum HDL cholesterol level	1.2	mmol/L	
	Serum LDL cholesterol level	3.2	mmol/L	
	Serum cholesterol/HDL ratio	4.3	mmol/mmol	
	Serum non high density lipoprotein cholesterol level	3.9	mmol/L	
08-Jul-2025	! AST serum level - mildly raised as expected			
	Abnormality indicator: Borderline			
	Clinical Information: SMD bloods			
	! AST serum level	47	[iU]/L	<35 [iU]/L
	Above high reference limit			
08-Jul-2025	! Liver function tests - mildly raised as exepcted			
	Abnormality indicator: Satisfactory			
	Clinical Information: SMD bloods			

08-Jul-2025	Liver function test			
	! Serum alanine aminotransferase level	69	[iU]/L	<50 [iU]/L
	Above high reference limit			
	Serum total bilirubin level	9	umol/L	<21 umol/L
	Serum alkaline phosphatase level	73	[iU]/L	30 - 130 [iU]/L
	Serum albumin level	43	g/L	35 - 50 g/L
	Haemoglobin A1c level			
	Abnormality indicator: Normal			
	Clinical Information: SMD bloods			
	Haemoglobin A1c level			
08-Jul-2025	Haemoglobin A1c level - IFCC standardised	37	mmol/mol	<43 mmol/mol
	Interpretation of HbA1c in screening for Diabetes;			
	42 - 47 mmol/mol - at high risk of developing			
	T2DM consider referral to Diabetes Prevention			
	Program: 48 mmol/mol and above - Suggestive T2 DM.			
	Interpretation of HbA1c in monitoring - see local			
	Diabetes guidelines (nottsapc.nhs.uk).			
	Conditions altering red cell life span			
	(anaemia/haemoglobinopathies) can cause a			
	misleading HbA1c.			
08-Jul-2025	Alcohol intake	0	{units}/wk	
08-Jul-2025	Venous blood sample			
	Gentle pressure applied to minimise bruisingNo reported problems or complications encountered.Obtained			
	sample from L ACF on 1st AttemptPatient feels well and puncture site has stopped bleedingVenous blood			
	taken for the requested samples following infection control and practice policy			
08-Jul-2025	Pulse rate	73	{beats}/min	
08-Jul-2025	O/E - height	188	cm	
08-Jul-2025	Alcohol use disorder identificatn test consumptn	0	Unk UoM	
	questionnre			
08-Jul-2025	Ideal body weight - Lemmens formula	77.76	kg	
08-Jul-2025	O/E - weight	80	kg	
08-Jul-2025	Body mass index	22.63	kg/m2	
08-Jul-2025	O/E - blood pressure reading	114/77	mm[Hg]	
30-Jun-2025	US scan of abdomen			
16-Jun-2025	XR CHEST			
	XR CHEST			
	Abnormality indicator: Normal			
	XR CHEST: This is a FINAL report.			
	XR Chest 16-Jun-2025			
	Accession No: RX1924229034			
	Clinical Information: Chesty cough for 12 months, worked on an oil			
	rig. ;Persistent Cough > 3 Weeks UK ;Indicated;;			
	Report:			
	The heart size and mediastinal outlines are within normal limits.			
	The lungs are clear			
	Typed by: Dr Lisa Hamilton (Consultant Radiologist, NUH NHS Trust,			
	GMC:4191661)			
	17-JUN-2025 10:07 AM			
	Provisionally read by: Dr Lisa Hamilton (Consultant Radiologist, NUH			
	NHS Trust, GMC:4191661)			
	17-JUN-2025 10:07 AM			
	Co-read by: Dr Lisa Hamilton (Consultant Radiologist, NUH NHS Trust,			
	GMC:4191661)			
	Final report approved by: Dr Lisa Hamilton (Consultant Radiologist,			
	NUH NHS Trust, GMC:4191661)			
	17-JUN-2025 10:07 AM			
	NUH Radiology Department: 0115 924 9924 x70485			
	Contact List:			

<http://nuhnet/diagnostics clinical support/radiology/Pages/default.aspx>
Reported by: DR LISA HAMILTON / EXTERNAL
Addendum Added By: EJBSEVER

04-Jun-2025	Urine sample		
13-May-2025	O/E - height	188	cm
13-May-2025	O/E - weight	63.73	kg
13-May-2025	Alcohol use disorder identificatn test consumptn questionre	12	Unk UoM
09-May-2025	Oxygen saturation at periphery	98	%
09-May-2025	Respiratory rate	18	{breaths}/min
09-May-2025	Pulse rate	106	{beats}/min
09-May-2025	Temperature	36.7	Cel
09-May-2025	Royal College of Physicians NEWS2 (National Early Warning Score 2) total score	1	Unk UoM
09-May-2025	O/E - blood pressure reading	128/86	mm[Hg]
09-May-2025	Respiratory rate	18	{Resp}/min
	Original units: /minute		
09-May-2025	Baseline SpO2 (oxygen saturation at periphery)	98	%
09-May-2025	Tympanic temperature	36.7	Cel
	Original units: degrees C		
09-May-2025	Pulse rate	106	{beats}/min
	Original units: beats/min		
20-Feb-2025	HLA B27 antigen screening test - Follow-up action: Other		
	Abnormality indicator: Unknown		
	upper abdo pains and also chrnoic back pain. Physio suggested ?Ank Spo nd		
	HLA B27 antigen screening test		
	(rowan.needham) - Normal / Satisfactory		
	HLA-B27 Negative - the sample was tested by a two		
	Polymerase Chain Reaction (PCR) method		
20-Feb-2025	! Full blood count - FBC - Follow-up action: Other		
	Abnormality indicator: Abnormal		
	upper abdo pains and also chrnoic back pain. Physio suggested ?Ank Spo nd		
	Full blood count - FBC		
	(rowan.needham) - Normal / Satisfactory		
	Total white cell count	5.8	10*9/L 4 - 10 10*9/L
	Red blood cell (RBC) count	4.63	10*12/L 4.5 - 5.5 10*12/L
	Haemoglobin estimation	148	g/L 130 - 170 g/L
	Haematocrit	0.425	Unk UoM 0.4 - 0.5 Unk UoM
	Mean corpuscular volume (MCV)	92	fL 83 - 101 fL
	! Mean corpusc. haemoglobin(MCH)	32.1	pg 27 - 32 pg
	Platelet count	344	10*9/L 150 - 410 10*9/L
	Neutrophil count	3.82	10*9/L 2 - 7 10*9/L
	Lymphocyte count	1.31	10*9/L 1 - 3 10*9/L
	Monocyte count	0.35	10*9/L 0.2 - 1 10*9/L
	Eosinophil count	0.25	10*9/L 0.02 - 0.5 10*9/L
	Basophil count	0.07	10*9/L 0 - 0.1 10*9/L
	Erythrocyte sedimentation rate	6	mm/h 0 - 30 mm/h
	(rowan.needham) - Normal / Satisfactory		
	From 1st November 2018 due to change in analyser method the following changes should be noted:		
	Reference range change to 0-30mm/hour for all sexes and ages		
	For monitoring purposes ESR values tested after this date may differ from previous		

results,
please exercise caution

20-Feb-2025

! Urea and electrolytes, Liver function test, GGT (Gamma Glutamyl Transferase), Bone profile, Thyroid function test, Ferritin - Follow-up action: Other

Abnormality indicator: Abnormal

upper abdo pains and also chrnoic back pain. Physio suggested ?Ank Spo
nd

Urea and electrolytes

(rowan.needham) - Normal / Satisfactory

Serum sodium	141	mmol/L	133 - 146 mmol/L
Serum potassium	4.9	mmol/L	3.5 - 5.3 mmol/L
! Serum urea level	9.7	mmol/L	2.5 - 7.8 mmol/L
Serum creatinine	89	umol/L	59 - 104 umol/L
eGFRcreat (CKD-EPI)/1.73 m*2	90	mL/min	

Original units: mL/min/1.73m^2

Serum C reactive protein level	<1	mg/L	0 - 5 mg/L
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(rowan.needham) - Normal / Satisfactory

Liver function test

(rowan.needham) - Normal / Satisfactory

Serum bilirubin level	9	umol/L	<21 umol/L
Serum total protein	72	g/L	60 - 80 g/L
Serum albumin	45	g/L	35 - 50 g/L
Serum globulin	27	g/L	21 - 35 g/L
Serum alkaline phosphatase	76	[iU]/L	30 - 130 [iU]/L

Original units: u/L

Serum ALT level	37	[iU]/L	<45 [iU]/L
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Original units: u/L

GGT (Gamma Glutamyl Transferase)

(rowan.needham) - Normal / Satisfactory

! Serum gamma GT level	62	[iU]/L	<55 [iU]/L
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Original units: u/L

Bone profile

(rowan.needham) - Normal / Satisfactory

Serum calcium	2.43	mmol/L	
Serum adjusted calcium conc	2.36	mmol/L	2.2 - 2.6 mmol/L
Serum inorganic phosphate	0.9	mmol/L	0.8 - 1.5 mmol/L
Serum alkaline phosphatase	76	[iU]/L	30 - 130 [iU]/L

Original units: u/L

Serum albumin	45	g/L	35 - 50 g/L
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Thyroid function test

(rowan.needham) - Normal / Satisfactory

Serum TSH level	2.06	m[iU]/L	0.35 - 4.94 m[iU]/L
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Original units: mu/L

Serum free T4 level	12.9	pmol/L	9 - 19.1 pmol/L
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Ferritin

(rowan.needham) - Normal / Satisfactory

Serum ferritin	43	ng/mL	23 - 300 ng/mL
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Original units: ug/L

Comment

Ferritin < 15 ug/L may be indicative of iron deficiency.
Levels <30 ug/L can also be associated iron deficiency but are less specific. Ferritin is an acute phase protein. Levels may be raised in inflammatory states, kidney or liver disease and malignancy. In these states a level within the reference range cannot exclude iron deficiency

20-Feb-2025

Diagnostic HbA1c - Follow-up action: Other

Abnormality indicator: Unknown

Diagnostic HbA1c

(rowan.needham) - Normal / Satisfactory

HbA1c lev - IFCC standardised 35 mmol/mol <48 mmol/mol

Comment

Some patients with HbA1c <42 mmol/mol may still be at risk of diabetes. Review the patient's personal risk and treat as 'high diabetes risk' if indicated (provide intensive lifestyle advice; warn the patient to report symptoms of diabetes; and monitor HbA1c annually.

Please note the change in HbA1c methodology as of 16/12/24.

This change in method showed an average negative bias of 5.5%, and therefore please consider this when reviewing your patients

14-Feb-2025

! Full blood count - FBC - Downloaded by: Needham (D82029 GP) on 14/02/2025 17:34:13

Abnormality indicator: Abnormal

upper abdo pains and also chrnoic back pain. Physio suggested ?Ank Spo
nd

Full blood count - FBC

(rowan.needham) - Normal / Satisfactory

Total white cell count	5.8	10 ⁹ /L	4 - 10 10 ⁹ /L
Red blood cell (RBC) count	4.63	10 ¹² /L	4.5 - 5.5 10 ¹² /L
Haemoglobin estimation	148	g/L	130 - 170 g/L
Haematocrit	0.425	Unk UoM	0.4 - 0.5 Unk UoM
Mean corpuscular volume (MCV)	92	fL	83 - 101 fL
! Mean corpusc. haemoglobin(MCH)	32.1	pg	27 - 32 pg
Platelet count	344	10 ⁹ /L	150 - 410 10 ⁹ /L
Neutrophil count	3.82	10 ⁹ /L	2 - 7 10 ⁹ /L
Lymphocyte count	1.31	10 ⁹ /L	1 - 3 10 ⁹ /L
Monocyte count	0.35	10 ⁹ /L	0.2 - 1 10 ⁹ /L
Eosinophil count	0.25	10 ⁹ /L	0.02 - 0.5 10 ⁹ /L
Basophil count	0.07	10 ⁹ /L	0 - 0.1 10 ⁹ /L
Erythrocyte sedimentation rate	6	mm/h	0 - 30 mm/h

(rowan.needham) - Normal / Satisfactory

From 1st November 2018 due to change in analyser method the following changes should

be noted:

Reference range change to 0-30mm/hour for all sexes and ages

For monitoring purposes ESR values tested after this date may differ f
rom previous

results,

please exercise caution

14-Feb-2025

! Urea and electrolytes, Liver function test, GGT (Gamma Glutamyl Transferase), Bone profile, Thyroid function test, Ferritin - Follow-up action: Other

Abnormality indicator: Abnormal

upper abdo pains and also chrnoic back pain. Physio suggested ?Ank Spo
nd

Urea and electrolytes

(rowan.needham) - Normal / Satisfactory

Serum sodium	141	mmol/L	133 - 146 mmol/L
Serum potassium	4.9	mmol/L	3.5 - 5.3 mmol/L
! Serum urea level	9.7	mmol/L	2.5 - 7.8 mmol/L
Serum creatinine	89	umol/L	59 - 104 umol/L
eGFRcreat (CKD-EPI)/1.73 m ²	90	mL/min	
Original units: mL/min/1.73m ²			
Serum C reactive protein level	<1	mg/L	0 - 5 mg/L

(rowan.needham) - Normal / Satisfactory

Liver function test
(rowan.needham) - Normal / Satisfactory

Serum bilirubin level	9	umol/L	<21 umol/L
Serum total protein	72	g/L	60 - 80 g/L
Serum albumin	45	g/L	35 - 50 g/L
Serum globulin	27	g/L	21 - 35 g/L
Serum alkaline phosphatase	76	[iU]/L	30 - 130 [iU]/L
Original units: u/L			
Serum ALT level	37	[iU]/L	<45 [iU]/L
Original units: u/L			

GGT (Gamma Glutamyl Transferase)
(rowan.needham) - Abnormal - routine appointment required with GP or NP

! Serum gamma GT level 62 [iU]/L <55 [iU]/L
Original units: u/L

Bone profile
(rowan.needham) - Normal / Satisfactory

Serum calcium	2.43	mmol/L	
Serum adjusted calcium conc	2.36	mmol/L	2.2 - 2.6 mmol/L
Serum inorganic phosphate	0.9	mmol/L	0.8 - 1.5 mmol/L
Serum alkaline phosphatase	76	[iU]/L	30 - 130 [iU]/L
Original units: u/L			
Serum albumin	45	g/L	35 - 50 g/L

Thyroid function test
(rowan.needham) - Normal / Satisfactory

Serum TSH level	2.06	m[iU]/L	0.35 - 4.94 m[iU]/L
Original units: mu/L			
Serum free T4 level	12.9	pmol/L	9 - 19.1 pmol/L

Ferritin
(rowan.needham) - Normal / Satisfactory

Serum ferritin	43	ng/mL	23 - 300 ng/mL
Original units: ug/L			

Comment
Ferritin < 15 ug/L may be indicative of iron deficiency.
Levels <30 ug/L can also be associated iron deficiency but are less specific. Ferritin is an acute phase protein. Levels may be raised in inflammatory states, kidney or liver disease and malignancy. In these states a level within the reference range cannot exclude iron deficiency

14-Feb-2025

Diagnostic HbA1c - Downloaded by: Needham
(D82029 GP) on 14/02/2025 17:34:10
Abnormality indicator: Unknown

Diagnostic HbA1c
(rowan.needham) - Normal / Satisfactory

HbA1c level - IFCC standardised	35	mmol/mol	<48 mmol/mol
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Comment
Some patients with HbA1c <42 mmol/mol may still be at risk of diabetes. Review the patient's personal risk and treat as 'high diabetes risk' if indicated (provide intensive lifestyle advice; warn the patient to report symptoms of diabetes; and monitor HbA1c annually.
Please note the change in HbA1c methodology as of 16/12/24.
This change in method showed an average negative bias of 5.5%, and therefore please consider this when reviewing your patients

11-Feb-2025

MRI KNEE RT - Follow-up action: Other
Abnormality indicator: Unknown

MRI KNEE RT
(andrew.lee) - Abnormal - routine appointment required with GP or NP

RES

MRI Knee Rt

Exam Name: MRI Knee Rt

Thank you for choosing Healthshare Diagnostics.

Patient Last Name (current): Kerr

Patient First Name (current): Colin James

Patient Date of Birth: 19791129

IDs: MRN - ICE232440, NHS Number - 6241911090, Attendance Number - 1725356, Accession Number - GD2775406, all from Soliton; any GP SoC, ICE, or PACS identifiers

Examination Date: 202502111035

Clinical History:

45-year-old male patient presents with persisting right medial knee pain following twisting injury.

? Meniscal tear.

Technique:

Coronal proton density, sagittal T2 gradient echo and PD fat sat, axial T2 fatsat.

MRI Findings:

There is a small oblique radial/horizontal cleavage tear at the junction between the posterior horn and meniscal body of the medial meniscus which extends into the meniscal body and posterior horn.

There is mild medial and patellofemoral compartment cartilage degeneration.

Normal appearances of the lateral meniscus with no meniscal tear is identified.

Normal cruciate ligaments and collateral ligament complexes.

The lateral compartment articular cartilage surfaces are preserved with no significant focal chondral or osteochondral defect identified.

There is a small joint effusion with a small semimembranosus/medial gastrocnemius bursa posteromedially and secondary ganglion cystic change proximally.

No sign of intra-articular loose bodies.

The subchondral marrow signal is within normal limits.

Normal extensor mechanism.

Comment:

1. Small oblique radial/horizontal cleavage tear at the junction between the posterior horn and meniscal body of the medial meniscus which extends into the meniscal body and posterior horn.
2. Mild medial and patellofemoral compartment cartilage degeneration.
3. Small joint effusion with a small semimembranosus/medial gastrocnemius bursa posteromedially and secondary ganglion cystic change proximally.
4. No other significant intra-articular pathology.

Electronically signed by: Tom Marshall GMC 3326239 (Feb 11, 2025 17:50:26)

Reported by: Tom Marshall - GMC 3326239

Report Author - , Authorised Date - 202502111751.

Healthshare Diagnostics

Current Telephone: +44 (0) 800 6524157 Current Website: www.healthsharediagnostics.org.uk

Current Email: healthshare.diagnostics@nhs.net

Current Address: Colney Hall, Watton Road, Norwich, NR4 7TY

Should any patient require referral to secondary care, it is advisable to confirm in the referral letter that:

- a copy of the report is included.
- the patient has been imaged at Healthshare Diagnostics, and related images can currently be requested directly via the National Image

Exchange Portal (IEP) selecting Global Diagnostics.
- images can also be made available by contacting Healthshare Diagnostics - currently on 01603812266
Thank you for choosing Healthshare Diagnostics. All details marked current and current at the date of the report to the best of our knowledge.
Reported by Tom Marshall - GMC 3326239 / intelrad

29-Aug-2024	Assessment of needs			
08-Aug-2024	Assessment of needs			
12-Jul-2024	Body weight	84	kg	
12-Jul-2024	Body mass index	24.28	kg/m2	
	(calculation based on height entry 01-Jul-2023, NB prior to age 70 average height loss is 1cm per 10 years)			
12-Jul-2024	O/E - blood pressure reading	122/74	mm[Hg]	
23-May-2024	Assessment of needs			
21-Dec-2023	HELICOBACTER PYLORI STOOL ANTIGEN, SAMPLE REJECTION, SPECIMEN INFO - Follow-up action: Other			
	Abnormality indicator: Unknown			
	Clinical Details Not Stated			
	HELICOBACTER PYLORI STOOL ANTIGEN			
	(Hannah1) - message sent to patient			
	H pylori antigen test			
	Not tested			
	SAMPLE REJECTION			
	Sample Rejection			
	Insufficient details on request form/sample			
	NO NHS NO. AND DOB ON SAMPLE			
	Comments			
	As of 10/1/22, we will no longer be accepting samples that do not fulfil our new acceptance criteria, which should consist of 3 unique identifiers; full name, DOB and either the NHS or hospital number			
	SPECIMEN INFO			
	Specimen			
	Faeces			
20-Dec-2023	Assessment of needs			
30-Nov-2023	Assessment of needs			
11-Oct-2023	Assessment of needs			
20-Jul-2023	QRISK2 cardiovascular disease 10 year risk score	2.2	%	
18-Jul-2023	Assessment of needs			
17-Jul-2023	! Full blood count - FBC - Follow-up action: Other			
	Abnormality indicator: Abnormal			
	Full blood count - FBC			
	(RA) - 01.Satisfactory, No action			
	Haemoglobin estimation	146	g/L	133 - 173 g/L
	Total white cell count	7.4	10*9/L	3.8 - 11 10*9/L
	Red blood cell (RBC) count	4.65	10*12/L	4.5 - 6 10*12/L
	Haematocrit	0.42	Unk UoM	0.4 - 0.5 Unk UoM
	Mean corpuscular volume (MCV)	91	fL	80 - 96 fL
	Mean corpusc. haemoglobin(MCH)	31.4	pg	27 - 32 pg
	Mean corpusc. Hb. conc. (MCHC)	34.5	g/dL	32 - 36 g/dL
	Converted from: 345.0 g/L			
	Low value converted from: 320.0 g/L			
	High value converted from: 360.0 g/L			
	Red blood cell distribut width	12.5	%	9 - 15 %
	Platelet count	307	10*9/L	150 - 400 10*9/L
	Mean platelet volume	10.4	fL	

	Platelet distribution width	11.7	%	
	Neutrophil count	5.1	10 ⁹ /L	2 - 7.5 10 ⁹ /L
	! Lymphocyte count	1.4	10 ⁹ /L	1.5 - 4 10 ⁹ /L
	Monocyte count	0.5	10 ⁹ /L	0.2 - 0.8 10 ⁹ /L
	Eosinophil count	0.4	10 ⁹ /L	0 - 0.4 10 ⁹ /L
	Basophil count	0.1	10 ⁹ /L	0 - 0.1 10 ⁹ /L
	Immature Granulocytes			
	Value: 0.02 10 ⁹ /L			
	Reference range: 0.0 - 0.5			
	Percentage nucleated RBCs	0	%	
17-Jul-2023	! Serum lipids, UE + LFT - Follow-up action: Other			
	Abnormality indicator: Abnormal			
	Serum lipids			
	(NS) - 07.Abnormal- sent text			
	Serum total cholesterol level	5	mmol/L	1.5 - 5.1 mmol/L
	Serum HDL cholesterol level	1.28	mmol/L	0.9 - 1.45 mmol/L
	! Serum triglycerides	2.34	mmol/L	0 - 2.25 mmol/L
	Patient unfasted. TG range is for fasted patients			
	Serum LDL cholesterol level	2.65	mmol/L	0 - 3 mmol/L
	Non HDL Cholesterol			
	Value: 3.7 mmol/L			
	See NICE CG181 for guidance on lipid modification			
	Serum cholesterol/HDL ratio			
	Value: 3.9			
	UE + LFT			
	(NS) - repeat LFT in 6-8 weeks			
	Serum sodium	143	mmol/L	133 - 146 mmol/L
	Serum potassium	4.2	mmol/L	3.5 - 5.3 mmol/L
	! Serum creatinine	112	umol/L	59 - 104 umol/L
	eGFRcreat (CKD-EPI)/1.73 m ²	69	mL/min	59 - 120 mL/min
	For assessment of CKD, see NICE NG203			
	http://nice.org.uk/guidance/ng203			
	Serum total protein	70	g/L	60 - 80 g/L
	Serum albumin	46	g/L	35 - 50 g/L
	Serum alkaline phosphatase	93	[iU]/L	30 - 130 [iU]/L
	Original units: u/L			
	! Serum ALT level	44	[iU]/L	0 - 40 [iU]/L
	Original units: u/L			
	Serum bilirubin level	4	umol/L	1 - 21 umol/L
	Serum globulin	24	g/L	18 - 36 g/L
17-Jul-2023	HAEMOGLOBIN A1C - Follow-up action: Other			
	Abnormality indicator: Unknown			
	HAEMOGLOBIN A1C			
	(Hannah1) - 02.Normal , No action			
	HbA1c lev1 - IFCC standardised	39	mmol/mol	0 - 41 mmol/mol
01-Jul-2023	QRISK2 cardiovascular disease 10 year risk score	3.2	%	
	(Estimates used as not all input data present or in range: BMI: 28.2 kg/m ² ; Cholesterol/HDL Ratio: 4.4; SBP: 129.8 mm Hg;)			
01-Jul-2023	AUDIT-C (Alcohol Use Disorders Identification Test	0	Unk UoM	
	- Consumption) score			
	Original units: /12			
01-Jul-2023	Alcoholic beverage intake	0	U/week	
	Value: 0.0 U/week			
01-Jul-2023	Body mass index	22.84	kg/m ²	
	(calculation based on height entry 01-Jul-2023, NB prior to age 70 average height loss is 1cm per 10 years)			
01-Jul-2023	Alcohol use disorders identification test score	0	Unk UoM	
	Original units: /40			
01-Jul-2023	Standing height	186	cm	

	Converted from: 186.0 cm		
01-Jul-2023	Body weight	79	kg
01-Jul-2023	Pulse rate	72	{beats}/min
	Original units: beats/min		
01-Jul-2023	Body mass index	22.8	kg/m2
01-Jul-2023	O/E - blood pressure reading	113/80	mm[Hg]
14-Feb-2023	Laboratory procedures - Follow-up action: Other		
	Abnormality indicator: Unknown		
	US Testes		
	(thomas.pearson) - Satisfactory - no obvious abnormality		
	US Testes		
	Clinical History		
	testicle examination: overall tenderness, palpable lump left		
	testicle, firm, not able to fully separate from left testicle, upper		
	testicle pole, around 0.5-1cm, firm, painful. Ex heroin user,		
	ex-alcoholic. Discomfort in testicles for around 8 monts. To rule out		
	cancer		
	Report		
	No significant pain with probe pressure.		
	The testes demonstrated normal echotexture and vascularity		
	bilaterally. No focal testicular mass lesion. No epididymal mass		
	lesion on either side. Small bilateral hydroceles.		
	Reported by: Dr Hamzah Younus (Radiology ST)		
14-Feb-2023	Laboratory procedures - Follow-up action: Other		
	Abnormality indicator: Unknown		
	US Testes		
	(thomas.pearson) - Satisfactory		
	US Testes		
	Clinical History		
	testicle examination: overall tenderness, palpable lump left		
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	cancer		
	Report		
	No significant pain with probe pressure.		
	The testes demonstrated normal echotexture and vascularity		
	bilaterally. No focal testicular mass lesion. No epididymal mass		
	lesion on either side. Small bilateral hydroceles.		
	Reported by: Dr Hamzah Younus (Radiology ST)		
10-Feb-2023	Serum tissue transglutaminase level - Follow-up		
	action: Other		
	Abnormality indicator: Unknown		
	diarrhoea		
	Ser tiss transglutaminase lev	1.3	U/mL
	(mmacbet) - Normal / Satisfactory		
	TTG Ranges :		
	Negative	< 7 U/ml	
	Equivocal	7 - 10 U/ml	
	Positive	> 10 U/ml	
	TTGC		
	Providing the patient was on a normal (gluten containing) diet, this		
	anti-tTG result makes coeliac disease unlikely but does not completely		
	exclude the diagnosis. In known coeliacs a low TTG indicates good		
	compliance with a gluten free diet		
09-Feb-2023	Pulse rate	72	{beats}/min
	Original units: beats/min		
09-Feb-2023	O/E - blood pressure reading	100/60	mm[Hg]

08-Feb-2023	Faecal Immunochemical Test - Follow-up action: Other Abnormality indicator: Unknown diarrhoea Faecal Immunochemical Test (karolina.debska) - Normal / Satisfactory Quantitv faecal immunochem tst <4 ug/g <10 ug/g Comment Negative FIT result. FIT has a very high negative predictive value for colorectal cancer. However, consider GI referral if clinical concerns or persistent symptoms																																										
08-Feb-2023	Helicobacter antigen - Follow-up action: Other Abnormality indicator: Unknown diarrhoea Helicobacter antigen (karolina.debska) - Normal / Satisfactory I Faeces (Helicobacter) Helicobacter antigen NOT detected Authorised by : Laura Mansell (Senior BMS) Date 08.02.23 Microbiology at NNUH Trust trading as EPA ***F																																										
08-Feb-2023	Faecal Calprotectin - Follow-up action: Other Abnormality indicator: Unknown diarrhoea Faecal Calprotectin (karolina.debska) - Normal / Satisfactory Sample received 08/02/2023 Sample extracted 08/02/2023 Faecal calprotectin content 30 ug/g <50 ug/g Comment This result is negative and makes a diagnosis of inflammatory bowel disease less likely. Review the patient and consider other causes for a change in bowel habit. Please note, change of Calprotectin UOM reporting from mg/kg to ug/g on 24/10/2014 mg/kg = ug/g. This change was applied to align our units with the PBC L recommended units																																										
03-Feb-2023	Full blood count - FBC - Follow-up action: Other Abnormality indicator: Unknown lower abdominal pain ? cause, ex heroin user and alcoholic. Full blood count - FBC (clare.starling) - Normal / Satisfactory <table> <tr> <td>Total white cell count</td><td>7.6</td><td>10⁹/L</td><td>4 - 10 10⁹/L</td></tr> <tr> <td>Red blood cell (RBC) count</td><td>4.79</td><td>10¹²/L</td><td>4.5 - 5.5 10¹²/L</td></tr> <tr> <td>Haemoglobin estimation</td><td>151</td><td>g/L</td><td>130 - 170 g/L</td></tr> <tr> <td>Haematocrit</td><td>0.437</td><td>Unk UoM</td><td>0.4 - 0.5 Unk UoM</td></tr> <tr> <td>Mean corpuscular volume (MCV)</td><td>91</td><td>fL</td><td>83 - 101 fL</td></tr> <tr> <td>Mean corpusc. haemoglobin(MCH)</td><td>31.5</td><td>pg</td><td>27 - 32 pg</td></tr> <tr> <td>Platelet count</td><td>278</td><td>10⁹/L</td><td>150 - 410 10⁹/L</td></tr> <tr> <td>Neutrophil count</td><td>5.2</td><td>10⁹/L</td><td>2 - 7 10⁹/L</td></tr> <tr> <td>Lymphocyte count</td><td>1.43</td><td>10⁹/L</td><td>1 - 3 10⁹/L</td></tr> <tr> <td>Monocyte count</td><td>0.5</td><td>10⁹/L</td><td>0.2 - 1 10⁹/L</td></tr> </table>			Total white cell count	7.6	10 ⁹ /L	4 - 10 10 ⁹ /L	Red blood cell (RBC) count	4.79	10 ¹² /L	4.5 - 5.5 10 ¹² /L	Haemoglobin estimation	151	g/L	130 - 170 g/L	Haematocrit	0.437	Unk UoM	0.4 - 0.5 Unk UoM	Mean corpuscular volume (MCV)	91	fL	83 - 101 fL	Mean corpusc. haemoglobin(MCH)	31.5	pg	27 - 32 pg	Platelet count	278	10 ⁹ /L	150 - 410 10 ⁹ /L	Neutrophil count	5.2	10 ⁹ /L	2 - 7 10 ⁹ /L	Lymphocyte count	1.43	10 ⁹ /L	1 - 3 10 ⁹ /L	Monocyte count	0.5	10 ⁹ /L	0.2 - 1 10 ⁹ /L
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Eosinophil count	0.43	10*9/L	0.02 - 0.5 10*9/L
Basophil count	0.05	10*9/L	0 - 0.1 10*9/L
Nucleated red blood cell count	0	10*9/L	0 - 0.1 10*9/L
Erythrocyte sedimentation rate	10	mm/h	0 - 30 mm/h

(clare.starling) - Normal / Satisfactory

From 1st November 2018 due to change in analyser method the following changes should

be noted:

Reference range change to 0-30mm/hour for all sexes and ages

For monitoring purposes ESR values tested after this date may differ from previous

results,

please exercise caution

03-Feb-2023

! Bone profile, Cholesterol, HDLC, Urea and electrolytes, Liver function test, GGT (Gamma Glutamyl Transferase), Thyroid function test, Ferritin, B12 & serum Folate - Follow-up action: Other

Abnormality indicator: Abnormal

lower abdominal pain ? cause, ex heroin user and alcoholic.

Bone profile

(clare.starling) - Normal / Satisfactory

Serum calcium	2.25	mmol/L	
Serum adjusted calcium conc	2.25	mmol/L	2.2 - 2.6 mmol/L
Serum inorganic phosphate	0.92	mmol/L	0.8 - 1.5 mmol/L
Serum alkaline phosphatase	73	[iU]/L	30 - 130 [iU]/L

Original units: u/L

Serum albumin	41	g/L	35 - 50 g/L
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Cholesterol

(clare.starling) - Normal / Satisfactory

Serum cholesterol	4.8	mmol/L	3.6 - 5 mmol/L
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Comment

Lipid modification in NICE CG181 is based on CVD risk rather than solely on cholesterol results. Statins are recommended for patients with cardiovascular disease, and in those with CVD risk > or = to 10% at 10 years. A reduction > 40% from baseline non-HDL-cholesterol should be achieved

HDLC

(clare.starling) - Normal / Satisfactory

! Serum HDL cholesterol level	1	mmol/L	>1 mmol/L
Serum cholesterol	4.8	mmol/L	3.6 - 5 mmol/L
Serum cholesterol/HDL ratio			

Value: 4.8

Se non HDL cholesterol level	3.8	mmol/L	
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Comment

Lipid modification in NICE CG181 is based on CVD risk rather than solely on cholesterol results. Statins are recommended for patients with cardiovascular disease, and in those with CVD risk > or = to 10% at 10 years. A reduction > 40% from baseline non-HDL-cholesterol should be achieved

Urea and electrolytes

(clare.starling) - Normal / Satisfactory

Serum sodium	139	mmol/L	133 - 146 mmol/L
Serum potassium	4.1	mmol/L	3.5 - 5.3 mmol/L
! Serum urea level	8.2	mmol/L	2.5 - 7.8 mmol/L
Serum creatinine	99	umol/L	59 - 104 umol/L
eGFRcreat (CKD-EPI)/1.73 m*2	80	mL/min	

Original units: mL/min/1.73m^2

Serum C reactive protein level	5	mg/L	0 - 5 mg/L
(clare.starling) - Normal / Satisfactory			
Liver function test			
(clare.starling) - Normal / Satisfactory			
Serum bilirubin level	5	umol/L	<21 umol/L
Serum total protein	68	g/L	60 - 80 g/L
Serum albumin	41	g/L	35 - 50 g/L
Serum globulin	27	g/L	21 - 35 g/L
Serum alkaline phosphatase	73	[iU]/L	30 - 130 [iU]/L
Original units: u/L			
Serum ALT level	46	[iU]/L	0 - 55 [iU]/L
Original units: u/L			
GGT (Gamma Glutamyl Transferase)			
(clare.starling) - Normal / Satisfactory			
Serum gamma GT level	54	[iU]/L	12 - 64 [iU]/L
Original units: u/L			
Thyroid function test			
(clare.starling) - Normal / Satisfactory			
Serum TSH level	1.93	m[iU]/L	0.35 - 4.94 m[iU]/L
Original units: mu/L			
Serum free T4 level	11.3	pmol/L	9 - 19.1 pmol/L
Ferritin			
(clare.starling) - Normal / Satisfactory			
Serum ferritin	67	ng/mL	23 - 300 ng/mL
Original units: ug/L			

Comment

Ferritin < 15 ug/L may be indicative of iron deficiency.
Levels <30 ug/L can also be associated iron deficiency but are less specific. Ferritin is an acute phase protein. Levels may be raised in inflammatory states, kidney or liver disease and malignancy. In these states a level within the reference range cannot exclude iron deficiency

B12 & serum Folate

(clare.starling) - Normal / Satisfactory

Serum vitamin B12	491	ng/L	187 - 883 ng/L
Serum folate	12.1	ng/mL	3.1 - 20.5 ng/mL
Original units: ug/L			

B12 Comment

Total B12 level > 300 ng/L: Vitamin B12 deficiency unlikely. HoloTC not performed.
All tests for vitamin B12 should be interpreted in conjunction with haematological and clinical findings.
Neurological features of Vitamin B12 deficiency can occur without anaemia

03-Feb-2023

Diagnostic HbA1c - Follow-up action: Other
Abnormality indicator: Unknown

Diagnostic HbA1c

(clare.starling) - Normal / Satisfactory

HbA1c level - IFCC standardised	38	mmol/mol	<48 mmol/mol
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Comment

Some patients with HbA1c <42 mmol/mol may still be at risk of diabetes. Review the patient's personal risk and treat as 'high diabetes risk' if indicated (provide intensive lifestyle advice; warn the patient to report symptoms of diabetes; and monitor HbA1c annually

02-Feb-2023

Urine dipstick test

02-Feb-2023

Urinalysis = no abnormality

26-Sep-2022	Tympanic temperature	36.2	Cel	
	Original units: degrees C			
26-Sep-2022	Pulse rate	81	{beats}/min	
	Original units: beats/min			
17-Apr-2015	Joint British Societies adjusted cardiovascular 10yr risk	3.39	%	
17-Apr-2015	Joint British Societies cardiovascular 10yr risk	2.26	%	
10-Apr-2015	HAEMOGLOBIN A1C			
	Abnormality indicator: Normal			
	HAEMOGLOBIN A1C:			
	Clinical Information: PRIMARY PREVENTION			
	Haemoglobin A1c level - IFCC standardised	35	mmol/mol	<42 mmol/mol
	PLEASE NOTE: Since 4th Dec 2014 HbA1c has been analysed using a new method.			
10-Apr-2015	Full blood count;Differential white blood cell count			
	Abnormality indicator: Normal			
	Clinical Information: PRIMARY PREVENTION			
	Full blood count			
	Haemoglobin concentration	157	g/L	133 - 173 g/L
	Total white blood count	6.4	10*9/L	3.8 - 11 10*9/L
	Red blood cell count	5.08	10*12/L	4.5 - 6 10*12/L
	Haematocrit	0.45	Unk UoM	0.4 - 0.5 Unk UoM
	Mean cell volume	88.8	fL	80 - 96 fL
	Red blood cell distribution width	12.4	%	9 - 15 %
	Mean cell haemoglobin level	30.9	pg	27 - 32 pg
	Mean cell haemoglobin concentration	34.8	g/dL	32 - 36 g/dL
	Platelet count	245	10*9/L	150 - 400 10*9/L
	Mean platelet volume	9.5	fL	
	Differential white blood cell count			
	Neutrophil count	4.1	10*9/L	2 - 7.5 10*9/L
	Lymphocyte count	1.6	10*9/L	1.5 - 4 10*9/L
	Monocyte count	0.5	10*9/L	0.2 - 0.8 10*9/L
	Eosinophil count	0.2	10*9/L	0 - 0.4 10*9/L
	Basophil count	0	10*9/L	0 - 0.1 10*9/L
	Promyelocyte count	0.01	10*9/L	0 - 0.5 10*9/L
10-Apr-2015	! Urea and electrolytes;Liver function tests;Serum lipid levels;Bone profile;ESTIMATED GFR - Follow-up action: Need to speak to doctor			
	Abnormality indicator: Abnormal			
	ESTIMATED GFR:			
	Estimated GFR (eGFR): > 60			
	Units for eGFR: ml/min/1.73sqM.			
	If patient of African-Caribbean origin please multiply the eGFR result by 1.21.			
	Further information from BHRUT renal site:			
	http://www.bhrhospitals.nhs.uk/renal/renal1.php			
	Clinical Information: PRIMARY PREVENTION			
	Urea and electrolytes			
	Fasting			
	Serum sodium level	140	mmol/L	133 - 146 mmol/L
	Fasting			
	Serum potassium level	4	mmol/L	3.5 - 5.3 mmol/L
	Fasting			
	Serum urea level	7	mmol/L	2.5 - 7.8 mmol/L
	Fasting			
	Serum creatinine level	103	umol/L	74 - 110 umol/L
	Fasting			

Liver function test

Fasting			
Serum bilirubin level	8	umol/L	1 - 21 umol/L
Fasting			
Serum alkaline phosphatase level	69	[iU]/L	30 - 130 [iU]/L
Fasting			
Serum total protein	71	g/L	60 - 80 g/L
Fasting			
Serum albumin level	46	g/L	35 - 50 g/L
Fasting			
Serum globulin level	25	g/L	18 - 36 g/L
Fasting			
Serum alanine aminotransferase level	33	[iU]/L	0 - 40 [iU]/L
Fasting			
Serum lipid levels			
Fasting			
! Serum total cholesterol level	5.4	mmol/L	3 - 5 mmol/L
Above high reference limit			
Fasting			
Serum triglyceride levels	1.66	mmol/L	0.5 - 2.3 mmol/L
Fasting			
Serum HDL cholesterol level	1.27	mmol/L	1 - 3.5 mmol/L
Fasting			
! Serum LDL cholesterol level	3.4	mmol/L	1 - 3 mmol/L
Above high reference limit			
Fasting			
Serum cholesterol/HDL ratio	4.3	mmol/mmol	
Fasting			
Non high density lipoprotein cholesterol level	4.1	mmol/L	
Please see NICE Guideline on lipid modification for advice on care and treatment (2014):			
http://www.nice.org.uk/guidance/cg181			
Fasting			
Bone profile			
Fasting			
Serum calcium level	2.3	mmol/L	2.2 - 2.6 mmol/L
Fasting			
Serum adjusted calcium concentration	2.23	mmol/L	2.2 - 2.6 mmol/L
Fasting			
Serum inorganic phosphate level	1.28	mmol/L	0.8 - 1.5 mmol/L
Fasting			

10-Apr-2015

! Serum vitamin D level - Follow-up action: Need to speak to doctor

Abnormality indicator: Abnormal

Clinical Information: PRIMARY PREVENTION

Serum vitamin D level

Fasting			
! Total 25-hydroxyvitamin D level	24	nmol/L	30 - 200 nmol/L
Below low reference limit			
Target ranges (revised Apr 2014)			
Total 25-Hydroxyvitamin D (nmol/L):			
< 30: Deficiency			
30-50: May require supplementation, see guideline			
> 50: Replete			
Guideline: www.bhrhospitals.nhs.uk/our-services/biochemistry.htm			
Fasting			

10-Apr-2015	<p>Thyroid function test;Blood haematinic levels;FERRITIN COMMENT;Plasma fasting glucose level</p> <p>Abnormality indicator: Normal</p> <p>FERRITIN COMMENT:</p> <p>Comments:: A normal ferritin result should not be used to exclude iron deficiency in the presence of liver disease or acute phase reaction. For further information see:</p> <p>http://cks.library.nhs.uk/anaemia_iron_deficiency</p> <p>Clinical Information: PRIMARY PREVENTION</p> <p>Thyroid function test</p> <p>Fasting</p> <p>Serum TSH level 3.2 m[iU]/L 0.35 - 5.5 m[iU]/L</p> <p>Fasting</p> <p>Blood haematinic levels</p> <p>Fasting</p> <p>Serum vitamin B12 level 506 ng/L 246 - 911 ng/L</p> <p>Fasting</p> <p>Serum folate level 6.4 ng/mL 3.4 - 20 ng/mL</p> <p>Replete 5.4-20.0 ug/L</p> <p>Indeterminate 3.4-5.3 ug/L</p> <p>Deficient<3.4 ug/L</p> <p>Fasting</p> <p>Serum ferritin level 104.3 ng/mL 20 - 300 ng/mL</p> <p>Fasting</p> <p>Plasma fasting glucose level 4.4 mmol/L 3.5 - 6 mmol/L</p> <p>Fasting</p>			
08-Apr-2015	Urine ketone test negative			
08-Apr-2015	Urine leucocyte test = negative			
08-Apr-2015	Urine nitrite negative			
08-Apr-2015	Urine glucose test negative			
08-Apr-2015	Urine protein test negative			
08-Apr-2015	Urine blood test = negative			
08-Apr-2015	Body mass index	21.97	kg/m2	
08-Apr-2015	O/E - weight	76	kg	
08-Apr-2015	O/E - height	186	cm	
08-Apr-2015	O/E - blood pressure reading	126/78	mm[Hg]	
02-May-2014	<p>Mycology microscopy, culture and sensitivities -</p> <p>Follow-up action: Need to speak to doctor</p> <p>Abnormality indicator: Abnormal</p> <p>Specimen: Toe nail</p> <p>MICROSCOPY: :</p> <p>CULTURE: Trichophyton interdigitale</p> <p>Mycology microscopy, culture and sensitivities</p> <p>Fungal microscopy</p> <p>Not seen</p>			
08-Apr-2014	Tibia and fibula X-ray			
24-Jun-2013	Pulse rate	65	{beats}/min	
24-Jun-2013	O/E - weight	77	kg	
24-Jun-2013	O/E - height	185	cm	
24-Jun-2013	Body mass index	22.5	kg/m2	
24-Jun-2013	Ideal body weight	85.22	kg	
24-Jun-2013	Expected peak expiratory flow rate	652	L/min	
24-Jun-2013	O/E - blood pressure reading	122/72	mm[Hg]	
14-Mar-2013	Body mass index	22.5	kg/m2	
14-Mar-2013	O/E - weight	77	kg	
09-Nov-2012	US scan of abdomen			

	(Ongoing Episode)			
09-Nov-2012	Renal ultrasound			
	(New Episode)			
09-Nov-2012	US scan of abdomen			
	(New Episode)			
18-Oct-2012	Urea and electrolytes;Liver function tests;ESTIMATED GFR			
	Abnormality indicator: Normal			
	ESTIMATED GFR:			
	Estimated GFR (eGFR): > 60			
	Ethnic origin factor: Units for eGFR: ml/min/1.73sqM.			
	If patient of African-Caribbean origin please multiply the eGFR result by 1.21			
	Clinical Information: Nocturia			
	Urea and electrolytes			
	Serum sodium level	140	mmol/L	133 - 146 mmol/L
	Serum potassium level	4.2	mmol/L	3.5 - 5.3 mmol/L
	Serum urea level	5.8	mmol/L	2.5 - 7.8 mmol/L
	Serum creatinine level	91	umol/L	74 - 110 umol/L
	Liver function test			
	Serum bilirubin level	6	umol/L	1 - 21 umol/L
	Serum alkaline phosphatase level	56	[iU]/L	30 - 130 [iU]/L
	Serum total protein	72	g/L	60 - 80 g/L
	Serum albumin level	44	g/L	35 - 50 g/L
	Serum globulin level	28	g/L	18 - 36 g/L
	Serum alanine aminotransferase level	20	[iU]/L	0 - 40 [iU]/L
18-Oct-2012	TSH (KGH)			
	Abnormality indicator: Normal			
	TSH (KGH):			
	Clinical Information: Nocturia			
	Serum TSH level	2.65	m[iU]/L	0.35 - 5.5 m[iU]/L
18-Oct-2012	! Full blood count;Differential white blood cell count			
	Abnormality indicator: Normal			
	Clinical Information: NO DETAILS GIVEN			
	Full blood count			
	Haemoglobin concentration	161	g/L	133 - 173 g/L
	Total white blood count	7.4	10*9/L	3.8 - 11 10*9/L
	Red blood cell count	4.72	10*12/L	4.5 - 6 10*12/L
	Haematocrit	0.45	Unk UoM	0.4 - 0.5 Unk UoM
	Mean cell volume	94.9	fL	80 - 96 fL
	Red blood cell distribution width	11.9	%	9 - 15 %
	! Mean cell haemoglobin level	34.1	pg	27 - 32 pg
	Mean cell haemoglobin concentration	35.9	g/dL	32 - 36 g/dL
	Platelet count	243	10*9/L	150 - 400 10*9/L
	Mean platelet volume	9.8	fL	
	Differential white blood cell count			
	Neutrophil count	5.1	10*9/L	2 - 7.5 10*9/L
	Lymphocyte count	1.6	10*9/L	1.5 - 4 10*9/L
	Monocyte count	0.5	10*9/L	0.2 - 0.8 10*9/L
	Eosinophil count	0.1	10*9/L	0 - 0.4 10*9/L
	Basophil count	0	10*9/L	0 - 0.1 10*9/L
	Promyelocyte count	0.01	10*9/L	0 - 0.5 10*9/L
18-Oct-2012	Serum glucose level			
	Abnormality indicator: Normal			
	Clinical Information: Nocturia			
	Serum glucose level	5.8	mmol/L	3.5 - 8 mmol/L
16-Oct-2012	Urine culture			

Abnormality indicator: Normal
Specimen: Urine
MICROSCOPY: :
COMMENTS: Examination by the Sysmex UF1000i indicates low probability of infection. Culture NOT performed.
Clinical Information: ? UTI

Urine culture
Urine microscopy: pus cells
: <40/ul (Normal)

Urine microscopy: red cells
: <40/ul

Sample microscopy : epithelial cells
Nil

03-Oct-2012	Body mass index	20.45	kg/m2
03-Oct-2012	O/E - height	185	cm
03-Oct-2012	Urine dipstick test		
	Pt unable to provide urine for dipstick test.		
03-Oct-2012	O/E - weight	70	kg
03-Oct-2012	O/E - blood pressure reading	117/74	mm[Hg]
02-Oct-2012	Helicobacter pylori antigen test - Follow-up		

action: Need to speak to doctor
Abnormality indicator: Abnormal
Specimen: Faeces
GENERAL SEROLOGY: :
COMMENTS: This result is only valid if the patient has been off proton pump inhibitors or bismuth preparations for at least 2 weeks. In addition, all patients should be off antibiotics for 1 month prior to testing.
Clinical Information: EPIGASTRIC PAIN, RECURRENT

Helicobacter pylori antigen test
Helicobacter pylori antigen test
DETECTED
Suggestive of recent infection.

25-Sep-2012	Alcohol use disorder identificatn test consumptn questionre	0	Unk UoM
14-Sep-2012	O/E - blood pressure reading	128/90	mm[Hg]
20-Jun-2012	Alcohol screen - AUDIT C completed	12	Unk UoM
20-Jun-2012	Alcohol screen - AUDIT completed	12	Unk UoM
24-Jan-2012	Patient health questionnaire (PHQ-9) score		
	pos Q2 neg Q1 total= 10 somewhat diff		

Referrals

Date	Term	Details	Clinician	Status
21-Jan-2026	Orthopaedic referral	TO: NHS e-Referral Service	BURRIDGE, Matthew (Dr)	Active
24-Dec-2025	Gastroenterological referral	TO: NHS e-Referral Service	BURRIDGE, Matthew (Dr)	Active
11-Dec-2025	Gastroenterological referral	TO: NHS e-Referral Service	BURRIDGE, Matthew (Dr)	Active
11-Dec-2025	Gastroenterological referral	TO: NHS e-Referral Service	BURRIDGE, Matthew (Dr)	Active
16-Jul-2025	Referral for further care		ONE, RPABot ()	Active
16-Jul-2025	Referral to physiotherapist		CROXALL, Jan ()	Active
16-Jul-2025	Referral for endoscopy		CROXALL, Jan ()	Active
27-May-2025	Referral to radiologist		BLOUNT, Andrea (Mrs)	Active
09-May-2025	Referral for further care		NOTTINGHAM UNIVERSITY HOSPITAL TRUST - EPR CORE, ()	Active
09-May-2025	Referral for further care		APETREI, Elena ()	Active
27-Feb-2025	Referral for further care		TURNER, Janice ()	Active

27-Feb-2025	Referral to physiotherapy service	MR ANDREW LEE, ()	Active
27-Feb-2025	Referral to orthopaedic surgeon	MR ANDREW LEE, ()	Active
04-Sep-2020	Referral for further care	BRITTEN, Claire (Mrs)	Active
17-Apr-2015	Referral for laboratory tests	SAHA, Dipankar (Dr)	Active
09-Apr-2015	Referral for lab test NOS	OKWUOSA, Chinonye (Dr)	Active
02-May-2014	Referral for laboratory tests	SAHA, Dipankar (Dr)	Active
08-Apr-2014	Referral for diagnostic investigation	PAGE, Philip (Mr)	Active
25-Oct-2012	Refer for ultrasound investign	OKWUOSA, Chinonye (Dr)	Active
11-Oct-2012	Referral for laboratory tests	FATIMILEHIN, Olasupo (Dr)	Active
11-Oct-2012	Referral for laboratory tests	FATIMILEHIN, Olasupo (Dr)	Active
02-Oct-2012	Referral for diagnostic investigation	LEE, Ann (Mrs)	Active
14-Sep-2012	Referral for further care	KENDLE, Mary (Mrs)	Active
07-Nov-2011	Referral for further care	THOMAS, Kellie (Ms)	Active

Care plans