

Clinical Information Summary

| | | | |
|----------|-------------------------------|----------------|-------------------|
| Patient: | Wilde, MR MARTIN MARTY | Date of Birth: | 01/01/1971 |
| UBRN: | 0000 0007 0006 | Age: | 46 years |
| NHS: | 996 000 0826 | Gender: | Male |

UBRN Information

| | | | |
|-------------------------|---|---------------------------------------|------------------------------|
| Appointment Date/Time: | Thu 02-Mar-2017 14:30 | Referral Created Date: | 22-Feb-2017 14:05 |
| Priority: | Routine | Clinical Information First Submitted: | 22-Feb-2017 14:07 |
| Referred By: | RC, Cave (Mr) | Clinical Information Last Updated: | - |
| Referring Organisation: | Yorkshire Hospital Provider | Named Clinician: | - |
| Address: | Yorkshire County Hospital Trust The Street Sheffield Yorkshire S10 2JF | Allocated Clinician: | - |
| Telephone: | - | Clinical Context: | Cardiology/Arrhythmia |
| | | Location: | Castle Hill Hospital |
| | | Clinical Term: | - |

Patient Information

| | | | |
|------------------|--|----------------------|--|
| Patient Address: | The Laurels, The Drive Bengeo Hertford Herts SG19 1TR | Registered Practice: | NHS England |
| | | Address: | Glamorgan House Croescadarn Rd Cardiff South Glamorgan CF23 8XL |

More contact details available when reviewing online

Attachments

No Information Provided

Risk to Others

02/03/2005 Aggressive behaviour [Ref7]
can be verbally and physically abusive to staff [Ref8]

Reason for Referral

Dear Consultant, please see this 60 year old male, who is being referred for occasional clicking in his left ear. Regards Dr Parker [Ref1]

Narrative Statement table with details.

| | Column1 | Column2 | Column3 | |
|------|---------|---------|---------|--------|
| Row1 | Value11 | Value12 | Value13 | |
| Row2 | Value21 | Value22 | Value12 | [Ref2] |

Expectation of Referral

Requested Action: Treatment [Ref209]
Requested Action Comments: Please treat this patient [Ref210]

Medication and Medical Devices

Current Medication and Medical Devices

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Prescription for medication [Ref58]
Quantity Supplied: 100 tablets[Ref59]
Co-dydramol 10mg/500mg tablets [Ref60]
Dosage: Take ONE or TWO every 6 hours to relieve for pain [Ref61]
ReviewRequired[Ref62]

Prescription for medication [Ref63]
Quantity Supplied: 28 tablets[Ref64]
Simvastatin 20mg tablets [Ref65]
Administration Times: Take immediately after evening meal [Ref67]
Dosage: take one at night [Ref66]

Other Medication and Medical Devices

Prescription for medication [Ref48]
Route: oral to swallow[Ref49]
Quantity Supplied: 30 tablets[Ref50]
Co-cyprindiol 2000microgram/35microgram tablets [Ref51]
Sugar-coated tablets [Ref222]
Administration Times: Three times a day after meals [Ref54]
Dosage: To Be Taken As Directed [Ref52]
Administration Trigger: This is the trigger for administering the medication [Ref55]
ReviewRequired[Ref53]
Comments: This is the medication commentary [Ref56]

14/04/2010 Narrative Statement showing medication - using text/x-h7uk-pmip mediaType
Prescription for medication
Paracetamol 500mg tablets
100 tables
take 1 or 2 4 times/day [Ref57]

from: 10/05/2008 Pain management following fall [Ref68]
to: 10/06/2008
Prescription for medication [Ref69]
Route: oral to swallow [Ref70]
Quantity Supplied: 30 tablets[Ref71]
Co-codamol 2000microgram/35microgram tablets [Ref72]
Administration Times: Three times a day after meals [Ref75]
Dosage: To Be Taken As Directed [Ref73]
Administration Trigger: Prescribed following fall [Ref76]
Comments: This is the medication commentary [Ref77]
Prescription for medication [Ref78]
Route: oral to swallow
Quantity Supplied: 30 tablets[Ref79]
DF118 / 1000mg morphine tablets [Ref80]

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Administration Times: Once per day as required [Ref83]
Dosage: To Be Taken As Directed [Ref81]
Administration Trigger: Prescribed following fall [Ref84]
Comments: This is the medication commentary [Ref85]

Past Medical History

Diagnoses

05/07/2007 Back pain [Ref3]
Patient has back pain following heavy lifting[Ref4]
02/03/2007 Mixed conductive and sensorineural hearing loss [Ref5]
02/03/2007 Chronic obstructive lung disease [Ref6]
02/03/2005 Aggressive behaviour [Ref7]
can be verbally and physically abusive to staff [Ref8]
03/08/2002 Acute myocardial infarction [Ref9]
07/12/2001 Angina [Ref10]
07/12/2001 Ischaemic heart disease [Ref11]
07/12/1995 Rheumatoid arthritis [Ref12]
07/12/1988 Type II diabetes mellitus [Ref13]
02/09/1985 Chronic suppurative otitis media - atticoantral [Ref14]

Procedures

02/05/1990 Appendectomy [Ref15]
Appendectomy performed using keyhole surgery [Ref16]
Appendix removed successfully [Ref17]
02/09/1985 XaB34[Ref18]
No displayName attribute in <code> element - therefore displaying code - Choose and Book does not look up the READ/SNOMED code [Ref19]
02/03/1980 7700.[Ref20]
No displayName attribute in <code> element - therefore displaying code - Choose and Book does not look up the READ/SNOMED code [Ref21]
from: 10/05/2008 Laser Eye Surgery (CompoundStatement) [Ref22]
11/05/2008 Laser Eye Surgery (NarrativeStatement) [Ref23]
10/05/2008 Laser Eye surgery - Left Eye [Ref24]
<text> of ProcedureEvent [Ref25]
Corrective laser surgery on Left Eye for near sightedness [Ref26]

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10/05/2008

Dry AMD - Right Eye [Ref27]

Original text: Noted during routing examination for laser eye surgery [Ref28]
pertinentObservationCommentary text [Ref30]

Conditions

14/04/2010 Acute tonsillitis [Ref31]
11/05/2007 Migraine [Ref32]
26/04/2007 Mixed conductive and sensorineural hearing loss [Ref33]
02/03/2007 Mixed conductive and sensorineural hearing loss[Ref34]
02/03/2007 Acute suppurative otitis media [Ref35]
02/03/2007 Chronic obstructive lung disease [Ref36]
07/02/2007 Acute bronchitis [Ref37]
very wheezy - trial of steroid
02/09/2005 Nondependent cannabis abuse [Ref38]
03/08/2002 Acute myocardial infarction [Ref38]
07/12/2001 Angina [Ref40]
07/12/2001 Ischaemic heart disease [Ref41]
07/12/1995 Rheumatoid arthritis [Ref42]
02/03/1990 Thyrotoxicosis [Ref43]
07/12/1988 Type II diabetes mellitus [Ref44]
02/09/1985 Chronic suppurative otitis media - atticoantral [Ref46]
02/03/1980 Acute appendicitis [Ref47]

Allergies and Adverse Reaction

Allergies

01/12/2006 Phenoxyethylpenicillin 250mg tablet [Ref90]
Text element - intolerance to Phenoxyethylpenicillin [Ref91]
Severe - anaphylaxis [Ref93]
No Uncertainty Recorded[Ref92]

Adverse Reaction

02/03/2007 Naproxen 250mg e/c tablet [Ref86]
Text element - intolerance to Naproxen [Ref87]
severity moderate [Ref89]
Uncertain[Ref88]
01/12/2006 Phenoxyethylpenicillin 250mg tablet [Ref90]

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Text element - intolerance to Phenoxyethylpenicillin [Ref91]
Severe - anaphylaxis [Ref93]
No Uncertainty Recorded[Ref92]

Findings

Investigations and Results

14/04/2010 Full Blood Count [Ref115]
Priority: URGENT [Ref116]
N[Ref117]
Results within reference limits for age and gender [Ref118]

14/04/2010

Platelet count [Ref119]
300 $10^9/l$ [Ref120]
Normal [Ref121]
Normal platelet range is 150 - 400 [Ref122]
Normal Range: from: 150 $10^9/l$ [Ref123] to: 400 $10^9/l$ [Ref124]

14/04/2010

Red Blood Cell Investigations [Ref125]
No Uncertainty Recorded [Ref126]
Results within reference limits for age and gender [Ref127]

14/04/2010

Haemoglobin [Ref128]
16.1 g/dl[Ref129]
Normal[Ref130]
Normal haemoglobin range is 13.3 - 16.7 [Ref131]
Normal Range: from: 13.3 g/dl[Ref132] to: 16.7 g/dl[Ref133]
Within reference limit [Ref134]

14/04/2010

Red Blood Cell count [Ref135]
5.06 $10^{12}/l$ [Ref136]
Normal [Ref137]
Normal RBC range is 4.32 - 5.66 [Ref138]
Normal Range: from: 4.32 $10^{12}/l$ [Ref139] to: 5.66 $10^{12}/l$ [Ref140]
Within reference limit [Ref141]

14/04/2010

Haematocrit / Packed Cell Volume [Ref142]
48 %[Ref143]
Normal [Ref144]

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Normal range is 39.0 - 50.0 [Ref145]
Normal Range: from: 39 %[Ref146] to: 50 %[Ref147]
Within reference limit [Ref148]

14/04/2010

White Blood Cell Investigations [Ref149]
Uncertainty in result [Ref150]
Results within reference limits for age and gender [Ref151]

14/04/2010

White Blood Cell count [Ref152]
8.65 $10^9/l$ [Ref153]
Normal [Ref154]
Normal WBC range is 3.5 - 11.0 [Ref155]
Normal Range: from: 3.5 $10^9/l$ [Ref156] to: 11.0 $10^9/l$ [Ref157]
Within reference limit [Ref158]

14/04/2010

Lymphocytes [Ref159]
2.65 $10^9/l$ [Ref160]
Normal [Ref161]
Normal Lymphocyte range is 1.0 - 3.5 [Ref162]
Normal Range: from: 1.0 $10^9/l$ [Ref163] to: 3.5 $10^9/l$ [Ref164]
Within reference limit [Ref165]

14/04/2010

Monocytes [Ref166]
0.19 $10^9/l$ [Ref168]
Monocytes recorded as low, however within error margin of test [Ref170]
Uncertainty recorded in result [Ref167]
Low [Ref169]
Normal Monocytes range is 0.2 - 0.8 [Ref171]
Normal Range: from: 0.2 $10^9/l$ [Ref172] to: 0.8 $10^9/l$ [Ref173]
Below reference range [Ref174]

03/08/2002 Acute myocardial infarction [Ref9]

Examination Findings

from: **14/04/2010** Well-man clinic [Ref175]
Results within reference limits for age and gender [Ref176]

14/04/2010

O/E - height [Ref177]
1.6 m [Ref178]

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14/04/2010

O/E - weight [Ref179]

73.0 Kg [Ref180]

14/04/2010

Interval example (time) [Ref213]

from: 31/03/2010 to: 30/04/2010

14/04/2010

Coded Value example (CV) [Ref214]

Coded Value display name [Ref216]

This is the reference value [Ref218]

Normal Range: 150 units[Ref217]

14/04/2010

BP reading [Ref215]

140 / 80

14/04/2010

O/E - Diastolic BP reading [Ref181]

80 mmHg [Ref182]

14/04/2010

O/E - Systolic BP reading [Ref183]

140 mmHg [Ref184]

14/04/2010

Serum cholesterol level [Ref185]

4.0 mmol/L [Ref186]

14/04/2010

Body mass index - observation [Ref187]

Original text: Formula = wieght(Kg)/Height squared (m²) [Ref213]

Standard Body Mass Index measurement [Ref212]

28.52 Kg/m²[Ref188]

Patient overweight [Ref190]

Above high reference limit [Ref189]

Normal BMI range is 18-24 [Ref191]

Normal Range: from: 18 Kg/m²[Ref192] to: 24 Kg/m²[Ref193]

Within reference limit [Ref194]

14/04/2010

Serum HDL cholesterol level [Ref195]

1.5 mmol/L [Ref196]

10/05/2009

Lower Leg examinations [Ref201]

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10/05/2009

Complete examination of patient's lower left leg [Ref202]

10/05/2009

Bad bruising to shin [Ref203]

Original text: So-and-so has very bad bruising of the left shin after plaining football without shin pads. [Ref204]

Text from ObservationStatement [Ref211]

Covering 25% of shin

Text from the pertinent observation commentary [Ref208]

Uncertainty recorded in patient's explanation of observation [Ref206]

Potential abnormal levels of bruising for a single game of football [Ref207]

Family History

19/04/2010 FH: Hypertension [Ref197]

02/03/1985 FH: Diabetes mellitus [Ref198]

Social Context

Alcohol Intake

14/04/2010 Light Drinker [Ref94]
10 units/week[Ref95]
Patient is a light drinker with alcohol consumption spread throughout week [Ref97]
within reference limit [Ref96]
Reference range is < 21 units per week [Ref98]
Normal Range: to: 21 units/week[Ref99]
Within reference limit [Ref100]

01/12/2006 Non-drinker [Ref101]
0 units/week[Ref102]
Patient is teetotal [Ref104]
within reference limit [Ref103]
Reference range is < 21 units per week [Ref105]
Normal Range: to: 21 units/week[Ref106]
Within reference limit [Ref107]

Smoking

14/04/2010 Smoker [Ref111]

01/12/2006 Non-smoker [Ref112]

Non-therapeutic Drug Use

14/04/2010 User of recreational drugs [Ref108]
Occasional user of Cocaine and Ecstasy [Ref109]

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Patient feels that drug use is not a problem and only used in social context. Full explanation of health risks provided to patient. [Ref110]

Housing

| | |
|-------------------|--|
| 30/06/2001 | Patient lives alone [Ref199] |
| 30/06/2001 | Patient lives on top-floor of high-rise [Ref200] |

Occupational History

| | |
|-------------------|-------------------------------|
| 14/04/2010 | Full-time employment [Ref113] |
| 01/12/2006 | Self-employed [Ref114] |