BROWN, Anne (Ms) Born: 17 May 1945 (68) Gender: F NHS No: 705 221 0460

Address:
91 Kingsway
Riddings

West Yorkshire LS23 7PO

Riddings Kirkheaton

Problems

Active

13 Mar 2005 - Mrs Jean Kemp Cervical smear non-responder	(6857.)
14 Dec 2004 - Mrs Jean Kemp Cervical smear non-responder	(6857.)
07 Aug 2003 - Mrs Ann Stanley Notes summary on computer	(9344.)
Significant Past	
22 Feb 2004 - Mrs Eileen Bradshaw Mammography not attended Chest clear	(5375.)
29 Jul 2003 - Mrs Eileen Bradshaw Mammography not attended Generalised non-specific abdominal tenderness	(5375.)
04 Dec 2002 - Mrs Ann Stanley [D]Vertigo NOS Erythroped A Tablets 500 mg 1 qds 28 tablets	(R0043)
30 Jun 2002 - Mrs Ann Stanley Thrush SOB in the morning, somewhat lightheaded	(AB2)
19 Aug 2001 - Mrs Ann Stanley Breast screen non-attender Erythroped A Tablets 500 mg 1 qds 28 tablets	(9OHC.)
18 Apr 2000 - Mrs Ann Stanley Seen in orthopaedic clinic Chest clear	(9N1p.)
31 Mar 2000 - Mrs Ann Stanley Seen in hospital casualty Going to pain clinic	(9N19.)

25 Mar 2000 - Mrs Ann Stanley Fracture of lateral malleolus Refer to specialist	(S349.)
23 Jun 1999 - Mrs Ann Stanley Candidal vulvovaginitis Diarrhoea disappeared	(AB21.)
25 Jan 1998 - Mrs Ann Stanley [D]Vertigo NOS Still coughing up some thick globules phlegm - leading again to choking	(R0043)
07 Aug 1996 - Mrs Ann Stanley Fostering medical examination Still feels like thick mucous from chest - causing choking	(6982.)
23 Jul 1996 - Mrs Ann Stanley Letter encounter Pneumovax 11 Injection 25 mcg 0.5 ml 1 vial(s)	(9N33.)
18 Apr 1996 - Mrs Ann Stanley DNA hospital appointment BT taken	(9N4H.)
18 Dec 1995 - Mrs Ann Stanley Cervical smear: negative Generalised non-specific abdominal tenderness	(4K22.)
18 Dec 1995 - Mrs Ann Stanley ECG - general Chest OK. Pretty good at the moment	(321)
05 Dec 1995 - Mrs Ann Stanley Headache Diarrhoea on and off for 3 weeks with abdo cramps.No blood and no recent travel	(1B1G.)
13 Aug 1995 - Mrs Ann Stanley DNA hospital appointment GTT taken	(9N4H.)
17 Apr 1995 - Mrs Ann Stanley Rheumatoid factor Pneumovax 11 Injection 25 mcg 0.5 ml 1 vial(s)	(43F)
11 Apr 1995 - Mrs Ann Stanley Menopausal symptoms NOS	(K5A2z)
11 Apr 1995 - Mrs Ann Stanley Rheumatoid arthritis Continue to improve	(N040.)
29 Mar 1995 - Mrs Ann Stanley History / symptoms Ciprofloxacin Tablets 250 mg 1 bd 10 tablet(s)	(1)
03 Mar 1994 - Mrs Ann Stanley Unspecified polyarthropathy or polyarthritis Awaiting MRI scan to look at anatomy	(N065.)

Awaiting MRI scan to look at anatomy

01 Mar 1994 - Mrs Ann Stanley Letter from consultant Prednisolone E/C Tablets 5 mg 6 od 42 tablet(s)	(9N36.)
27 Feb 1994 - Mrs Ann Stanley Mole of skin Slime and diarrhoea continue	(B76)
01 Mar 1993 - Mrs Ann Stanley Referred to rheumatologist Pale - prob mildly anaemic. Pale and unwell	(8H4B.)
31 Jan 1993 - Mrs Ann Stanley O/E - a lump Awaiting MRI scan to look at anatomy	(2I11.)
31 Jan 1993 - Mrs Ann Stanley C/O: a pain Indigestion still very bothersome	(1D13.)
30 Jan 1990 - Mrs Ann Stanley X-ray report received Chest OK. Pretty good at the moment	(9ND4.)
16 Jan 1990 - Mrs Ann Stanley Cervical spondylosis	(N110.)
28 Apr 1988 - Mrs Ann Stanley [D]Musculoskeletal chest pain Please repeat ENT exam in view of blood	(R065A)
30 Jul 1985 - Mrs Ann Stanley Termination of pregnancy NEC	(7E086)
31 Dec 1981 - Mrs Ann Stanley Other evacuation of contents of uterus Going to pain clinic	(7E08.)
04 Jul 1976 - Mrs Ann Stanley Normal delivery <i>To come in 1 week time</i>	(7F19.)
Minor Past	
02 Jun 2003 - Mrs Jean Mitchell Candidiasis of vagina	(AB211)
23 Jun 1999 - Mrs Ann Stanley [D]Rash and other nonspecific skin eruption NOS Slime and diarrhoea continue	(R021z)
03 Jan 1999 - Mrs Ann Stanley Watery eyes (Bilateral) Try 10 days oral steroids and see friday week	(1B87.)

SAR DATA EXTRACT ON 04-04-2014T11:28:25 PAGE 4 OF 15

BROWN, Anne (Ms) Born: 17 May 1945 (68) **Gender:** F **NHS No:** 705 221 0460

09 Dec 1998 - Mrs Ann Stanley Upper respiratory tract infection NOS

(H05z.)

Consultations

19 Mar 2014 - M Awaiting clinica	r Lung Health Il code migration to EMIS Web	
Additional:	Attachment	(EMISATTACHMENT)
	COPD Assessment - 19/03/2014Assessment Type: Initial AssessmentCarried out by: TestUser	
Additional:	Local Code: 22K, 25.78	(22K)
Additional:	Ex-moderate smoker (10-19/day)	(1379.)
Additional:	Oxygen saturation at periphery, 87	(44YA0)
Additional:	Forced expired volume in 1 second, 1	(3390.)
Additional:	Chronic obstructive pulmonary disease annual review	(66YM.)
Additional:	MRC Breathlessness Scale: grade 2	(173I.)
Additional:	Peak flow rate after bronchodilation, 1	(339B.)
Additional:	Attachment	(EMISATTACHMENT)
	COPD Assessment - 19/03/2014Assessment Type: Initial	
	AssessmentCarried out by: TestUser	
Additional:	Local Code: 22K, 25.78	(22K)
Additional:	Ex-moderate smoker (10-19/day)	(1379.)
Additional:	Oxygen saturation at periphery, 87	(44YA0)
Additional:	Forced expired volume in 1 second, 1	(3390.)
Additional:	Chronic obstructive pulmonary disease annual review	(66YM.)
Additional:	MRC Breathlessness Scale: grade 2	(173I.)
Additional:	Peak flow rate after bronchodilation, 1	(339B.)

02 Jun 2003 - Dr Neil Burgess

EMIS PCS Test Practice 1 GP Surgery

Result: (Non Coded Event - Glucose + Time): Just out of normal range - Ok

Erythrocyte sedimentation rate, No action

Plasma glucose level, 5 mmol/L (44g..)

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BROWN, Anne (Ms) Born: 17 May 1945 (68) **Gender:** F **NHS No:** 705 221 0460

02 Jun 2003 - Mrs GP Surgery	s Jean Mitchell	
History:	Para 6	(1527.)
History:	No known allergies	(1151.)
History:	PMH - past medical history	(14)
History:	H/O: vertigo	(1491.)
	Combivent shaky and giddy	
Examination:	New patient health check	(68R)
Examination:	O/E - height, 162.5 cm	(229)
Examination:	O/E - weight, 96 Kg	(22A)
Examination:	Body mass index, 36.36	(22K)
Examination:	Waist circumference, 104 cm	(22N0.)
Family History:	FH: Father	(12L)
	Reversibility with Salamol EB 200mcgs	
Family History:	FH: Cardiovascular disease	(12C)
Family History:	FH: * - breast	(1243.)
Social:	Teetotaller	(1361.)
Social:	Unemployed	(13J7.)
Social:	Avoids even trivial exercise	(1382.)
Social:	Not on a special diet	(13V2.)
Social:	Cigarette smoker, 8 Cigarettes/day	(137P.)
Result:	Urine protein test not done	(4671.)
Result:	Urine glucose test not done	(4661.)
Medication:	Betahistine Dihydrochloride Tablets 16 mg 84 tablet ONE TO BE TAKEN	
	THREE TIMES A DAY	
Medication:	Fluconazole Capsules 150 mg 1 capsule ONE DAILY	
Medication:	Clotrimazole Cream 2 % 20 gram APPLY TWICE A DAY	
Additional:	Health ed exercise	(6798.)
Additional:	White British	(9S10.)
Additional:	Patient's next of kin	(9182.)
	Scanty coase creps	
Additional:	New patient screen done	(68R2.)
Additional:	Health ed smoking	(6791.)
Problem:	Candidiasis of vagina	(AB211)
History:	Frusemide Tablets 40 mg od 28 tablets	
Examination:	Random blood sugar, 3.5 mmol/l	(44T1.)
Comment:	Reversibility with Salamol EB 200mcgs	,
Result:	01 Jan 2000 - Mrs Jean Mitchell	(4K22.)
	Cervical smear: negative	()

02 Jun 2003 - Dr Neil Burgess EMIS PCS Test Practice 1 GP Surgery

Result:	Serum lipids: Normal - No Action	(440)
	Serum cholesterol, 8.2 mmol/L	(44P)
Result:	Liver function test: Normal - No Action	(44D6.)
	Plasma alkaline phosphatase level, 68 IU/L (Range: 30 - 150 IU/L)	(44CU.)
	Plasma total bilirubin level, 6 umol/L (Range: 0 - 21 umol/L)	(44E9.)
	Plasma globulin level, 27 g/L (Range: 20 - 40 g/L)	(44MP.)
	Plasma albumin level, 39 g/L (Range: 35 - 50 g/L)	(44MI.)
	Plasma total protein, 66 g/L (Range: 64 - 83 g/L)	(44MA.)
Result:	(Non Coded Event - Lipids): Normal - No Action	
	Plasma triglyceride level, 2.8 mmol/L (Range: 0.8 - 2.8 mmol/L)	(44e)
	Plasma LDL cholesterol level, 5.5 mmol/L	(44dB.)
	Plasma HDL cholesterol level, 1.4 mmol/L (Range: 1 - 1.8 mmol/L)	(44dA.)
	Plasma cholesterol/HDL ratio, 6	(44lG.)
Result:	Liver function test: Normal - No Action	(44D6.)
	Plasma gamma-glutamyl transferase level, 13 IU/L (Range: 9 - 36 IU/L)	(44G7.)
	Plasma alanine aminotransferase level, 10 IU/L (Range: 10 - 35 IU/L)	(44GA.)
Result:	Urea and electrolytes: Normal - No Action	(44JB.)
	Serum creatinine, 71 umol/L (Range: 53 - 97 umol/L)	(44J3.)
	Plasma bicarbonate level, 25 mmol/L (Range: 22 - 30 mmol/L)	(44i0.)
	Plasma potassium level, 5 mmol/L (Range: 3.5 - 5.4 mmol/L)	(44h8.)
	Plasma sodium level, 140 mmol/L (Range: 136 - 145 mmol/L)	(44h6.)
	GFR calculated abbreviated MDRD, 87 ml/min/1.73m ²	(451E.)
	Plasma urea level, 4.8 mmol/L (Range: 2.5 - 6.7 mmol/L)	(44JA.)

Medications

Repeat Medication (Current)

02 Jun 2003 - Mrs Jean Mitchell **Betahistine 16mg tablets**84 tablet **DOSE** ONE TO BE TAKEN THREE TIMES A DAY

Issues

02 Jun 2003 - Mrs Jean Mitchell

Acute Medication

02 Jun 2003 - Mrs Jean Mitchell **Fluconazole 150mg capsules** 1 capsule **DOSE** ONE DAILY

Issues

02 Jun 2003 - Mrs Jean Mitchell

Acute Medication

02 Jun 2003 - Mrs Jean Mitchell Clotrimazole 2% cream 20 gram **DOSE** APPLY TWICE A DAY

Issues

02 Jun 2003 - Mrs Jean Mitchell

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BROWN, Anne (Ms) Born: 17 May 1945 (68) **Gender:** F **NHS No:** 705 221 0460

Referrals

None listed in Medical Record.

Test Results

	i cot i toodito	
02 Jun 2003 - Dr		
Result:	(Non Coded Event - Glucose + Time): Just out of normal range - Ok	
	Erythrocyte sedimentation rate, No action	
	Plasma glucose level, 5 mmol/L	(44g)
02 Jun 2003 - Dr		
Result:	Serum lipids: Normal - No Action	(440)
	Serum cholesterol, 8.2 mmol/L	(44P)
02 Jun 2003 - Dr		(445.6)
Result:	Liver function test: Normal - No Action	(44D6.)
	Plasma alkaline phosphatase level, 68 IU/L (<i>Range: 30 - 150 IU/L</i>)	(44CU.)
	Plasma total bilirubin level, 6 umol/L (Range: 0 - 21 umol/L)	(44E9.)
	Plasma globulin level, 27 g/L (Range: 20 - 40 g/L)	(44MP.)
	Plasma albumin level, 39 g/L (Range: 35 - 50 g/L)	(44MI.)
	Plasma total protein, 66 g/L (Range: 64 - 83 g/L)	(44MA.)
02 Jun 2003 - Dr		
Result:	(Non Coded Event - Lipids): Normal - No Action	7.1.4 S
	Plasma triglyceride level, 2.8 mmol/L (Range: 0.8 - 2.8 mmol/L)	(44e)
	Plasma LDL cholesterol level, 5.5 mmol/L	(44dB.)
	Plasma HDL cholesterol level, 1.4 mmol/L (Range: 1 - 1.8 mmol/L)	(44dA.)
	Plasma cholesterol/HDL ratio, 6	(44lG.)
	N	
02 Jun 2003 - Dr		(44DC)
Result:	Liver function test: Normal - No Action	(44D6.)
	Plasma gamma-glutamyl transferase level, 13 IU/L (Range: 9 - 36 IU/L)	(44G7.)
	Plasma alanine aminotransferase level, 10 IU/L (<i>Range: 10 - 35 IU/L</i>)	(44GA.)
02 Jun 2003 - Dr	Noil Burgoon	
Result:	Urea and electrolytes: Normal - No Action	(44JB.)
Nesult.	Serum creatinine, 71 umol/L (Range: 53 - 97 umol/L)	(44J3.)
	Plasma bicarbonate level, 25 mmol/L (<i>Range: 22 - 30 mmol/L</i>)	(44i0.)
	Plasma potassium level, 5 mmol/L (Range: 3.5 - 5.4 mmol/L)	(44h8.)
	Plasma sodium level, 140 mmol/L (Range: 136 - 145 mmol/L)	(44h6.)
	GFR calculated abbreviated MDRD, 87 ml/min/1.73m ²	(451E.)
	Plasma urea level, 4.8 mmol/L (Range: 2.5 - 6.7 mmol/L)	(44JA.)
	1 lastila urca icvol, 4.0 million (Kange. 2.5 - 0.7 million)	(44 JA.)

Journal

Recall 14 Apr 2010 - Dr Neil Burgess Influenza vaccination	(65E)
Read Code 13 Mar 2005 - Mrs Jean Kemp Cervical smear non-responder	(6857.)
Read Code 14 Dec 2004 - Mrs Jean Kemp Cervical smear non-responder	(6857.)
Read Code 22 Feb 2004 - Mrs Eileen Bradshaw Mammography not attended Chest clear	(5375.)
Recall 30 Nov 2003 - Mrs Jean Mitchell Medication review	(8B314)
Read Code 07 Aug 2003 - Mrs Ann Stanley Notes summary on computer	(9344.)
Read Code 29 Jul 2003 - Mrs Eileen Bradshaw Mammography not attended Generalised non-specific abdominal tenderness	(5375.)
Read Code 03 Jun 2003 - Mrs Jean Mitchell English - ethnic category 2001 census Continue to improve	(9i20.)
Read Code 02 Jun 2003 - Mrs Jean Mitchell Systolic blood pressure, 150 mm Hg	(2469.)
Read Code 02 Jun 2003 - Mrs Jean Mitchell Diastolic blood pressure, 80 mm Hg	(246A.)
Read Code 04 Dec 2002 - Mrs Ann Stanley [D]Vertigo NOS Erythroped A Tablets 500 mg 1 qds 28 tablets	(R0043)
Read Code 30 Jun 2002 - Mrs Ann Stanley Thrush	(AB2)

SOB in the morning, somewhat lightheaded

Read Code

19 Aug 2001 - Mrs Ann Stanley

Breast screen non-attender (9OHC.)

Erythroped A Tablets 500 mg 1 qds 28 tablets

Read Code

18 Apr 2000 - Mrs Ann Stanley

Seen in orthopaedic clinic (9N1p.)

Chest clear

Read Code

31 Mar 2000 - Mrs Ann Stanley

Seen in hospital casualty

Going to pain clinic

(9N19.)

Read Code

25 Mar 2000 - Mrs Ann Stanley

Fracture of lateral malleolus

Refer to specialist

(S349.)

Read Code

23 Jun 1999 - Mrs Ann Stanley

Candidal vulvovaginitis
Diarrhoea disappeared
(AB21.)

Read Code

23 Jun 1999 - Mrs Ann Stanley

[D]Rash and other nonspecific skin eruption NOS (R021z)

Slime and diarrhoea continue

Read Code 03 Jan 1999 - Mrs Ann Stanley

Watery eyes (Bilateral)
Try 10 days oral steroids and see friday week

(1B87.)

Read Code

09 Dec 1998 - Mrs Ann Stanley

Upper respiratory tract infection NOS (H05z.)

Read Code

25 Jan 1998 - Mrs Ann Stanley

[D]Vertigo NOS (R0043)

Still coughing up some thick globules phlegm - leading again to choking

Read Code

07 Aug 1996 - Mrs Ann Stanley

Fostering medical examination (6982.)

Still feels like thick mucous from chest - causing choking

Read Code

23 Jul 1996 - Mrs Ann Stanley

Letter encounter

Pneumovax 11 Injection 25 mcg 0.5 ml 1 vial(s)

(9N33.)

Read Code

18 Apr 1996 - Mrs Ann Stanley

DNA hospital appointment (9N4H.)

BT taken

Read Code

18 Dec 1995 - Mrs Ann Stanley

Cervical smear: negative (4K22.)

Generalised non-specific abdominal tenderness

Read Code

18 Dec 1995 - Mrs Ann Stanley

ECG - general (321..)

Chest OK. Pretty good at the moment

Read Code

05 Dec 1995 - Mrs Ann Stanley

Headache (1B1G.)

Diarrhoea on and off for 3 weeks with abdo cramps. No blood and no recent travel

Read Code

13 Aug 1995 - Mrs Ann Stanley

DNA hospital appointment (9N4H.)

GTT taken

Read Code

17 Apr 1995 - Mrs Ann Stanley

Rheumatoid factor (43F..)

Pneumovax 11 Injection 25 mcg 0.5 ml 1 vial(s)

Read Code

11 Apr 1995 - Mrs Ann Stanley

Menopausal symptoms NOS (K5A2z)

Read Code

11 Apr 1995 - Mrs Ann Stanley

Rheumatoid arthritis (N040.)

Continue to improve

Read Code

29 Mar 1995 - Mrs Ann Stanley

History / symptoms (1....)

Ciprofloxacin Tablets 250 mg 1 bd 10 tablet(s)

Read Code

03 Mar 1994 - Mrs Ann Stanley

Unspecified polyarthropathy or polyarthritis (N065.)

Awaiting MRI scan to look at anatomy

Read Code

01 Mar 1994 - Mrs Ann Stanley

Letter from consultant (9N36.)

Prednisolone E/C Tablets 5 mg 6 od 42 tablet(s)

Read Code

27 Feb 1994 - Mrs Ann Stanley

Mole of skin *Slime and diarrhoea continue*

(B76..)

Read Code

01 Mar 1993 - Mrs Ann Stanley

Referred to rheumatologist

(8H4B.)

Pale - prob mildly anaemic. Pale and unwell

Read Code

31 Jan 1993 - Mrs Ann Stanley

O/E - a lump

(2I11.)

Awaiting MRI scan to look at anatomy

Read Code

31 Jan 1993 - Mrs Ann Stanley

C/O: a pain

(1D13.)

Indigestion still very bothersome

Read Code

30 Jan 1990 - Mrs Ann Stanley

X-ray report received

(9ND4.)

Chest OK. Pretty good at the moment

Read Code

16 Jan 1990 - Mrs Ann Stanley

Cervical spondylosis

(N110.)

Read Code

28 Apr 1988 - Mrs Ann Stanley

[D]Musculoskeletal chest pain

(R065A)

Please repeat ENT exam in view of blood

Read Code

30 Jul 1985 - Mrs Ann Stanley

Termination of pregnancy NEC

(7E086)

Read Code

31 Dec 1981 - Mrs Ann Stanley

Other evacuation of contents of uterus

(7E08.)

Going to pain clinic

Read Code

04 Jul 1976 - Mrs Ann Stanley

Normal delivery

(7F19.)

To come in 1 week time

SAR DATA EXTRACT ON 04-04-2014T11:28:25 PAGE 15 OF 15

BROWN, Anne (Ms) Born: 17 May 1945 (68) **Gender:** F **NHS No:** 705 221 0460

Allergies

None listed in Medical Record.

Appendix: Attachments

Attachment 19 Mar 2014 - Mr Lung Health

Attachment

(EMISATTACHMENT)

COPD Assessment - 19/03/2014Assessment Type: Initial AssessmentCarried out by: TestUser

Pen picture for Anne Brown

Valid on 19/03/2014

Generated on 19/03/2014

Page: 1

Anne Brown is a 68 year old woman with moderate COPD. Reviewed by Dr Test User

DoB 17/05/1945 NHS no 7052210460 Address 91 Kingsway

Kirkheaton

Last COPD review 19/03/2014 LS23 7py

Her most recent spirometry on 19/03/2014 was FEV1 1 L 50% of predicted

FVC 2 L 82% of predicted

This patient was reviewed in the COPD clinic. Clinical assessment and spirometry suggest that she has been diagnosed COPD, so she has been entered onto the programme.

Her usual MRC breathlessness score is 2 and her last Oxygen Saturation was 87%.

Her target activity is to go out socially.

Her domicile is not recorded. She is a recent ex-smoker (less than 6 months).

She has had three or more exacerbation(s) of COPD in the last 12 months.

She has had no hospital admission(s) in the last year.

She has not required non-invasive mask ventilation or ITU care.

Respiratory Drug Recommendations - Maintenance treatment Tiotropium 2.5mcg respimat	Dosage anytime	Device MDI Inhaler
Respiratory Drug Recommendations - Exacerbation treatment	Dosage	
== N O N E ==		
Non-Respiratory Drug Recommendations	Dosage	
==NONE==		
Medications were changed (see bold) at last visit please review for effectiveness of change		
Next review: 19/09/2014	22	

Current Issues



Pen picture for Anne Brown

Valid on 19/03/2014

Generated on 19/03/2014

- * Medications were changed (see bold) at last visit please review for effectiveness of change
- * Patient ceased smoking from 2014 further verbal support offered
- * There is no record of this person being offered education COPD literature
- * There is no record that this person has a crisis management plan in place
- * Education was not conducted at initial assessment. This should be carried out at the next review.

Summary Data

Patient accepted onto COPD management package in 19/03/2014.

a) Diagnosis notes: CXR on 19/03/2014 was normal. ECG on 19/03/2014 was normal.

This patient has not reported haemoptysis so far

- b) Verbal advice about COPD has not been given. Education literature has not been given to patient.
- c) No agreed crisis management plan in place.
- d) Smoking status: The patient is noted to be a recent ex-smoker.
- e) Vaccinations: This patient has never had an influenza vaccination. This patient has never had a pneumovax vaccination.
- f) Pulmonary Rehab has not been attended / referred to.
- g) Oxygen Assessment clinic has recommended None for symptoms.
- h) There are no sputum culture growth results to date.
- i) This person has not been referred for social support.
- j) Last wishes statement has not been in place.

Read Codes		
Code v2	Code v3	Description
339B	XaIxR (1)	Patient has been confirmed to have COPD by a post bronchodilator spirometry reading.
3390	X77Qu (1)	Patient has had an FEV1 reading in the last 12 months
173I	XaIUl	MRC breathlessness score Grade 2
66YM	Xalet	COPD annual review
22K	22K (25.78)	BMI observation
1379	Ub1na	Ex-smoker
44YA0	X770D (87)	Oxygen saturation at periphery

Attachment 19 Mar 2014 - Mr Lung Health

Attachment

COPD Assessment - 19/03/2014Assessment Type: Initial AssessmentCarried out by:

TestUser

(EMISATTACHMENT)

Pen picture for Anne Brown Valid on 19/03/2014

Generated on 19/03/2014

Page: 1

Anne Brown is a 68 year old woman with moderate COPD. Reviewed by Dr Test User

DoB 17/05/1945 NHS no 7052210460 Address 91 Kingsway

Kirkheaton

Last COPD review 19/03/2014 LS23 7py

Her most recent spirometry on 19/03/2014 was FEV1 1 L 50% of predicted

FVC 2 L 82% of predicted

This patient was reviewed in the COPD clinic. Clinical assessment and spirometry suggest that she has been diagnosed COPD, so she has been entered onto the programme.

Her usual MRC breathlessness score is 2 and her last Oxygen Saturation was 87%.

Her target activity is to go out socially.

Her domicile is not recorded. She is a recent ex-smoker (less than 6 months).

She has had three or more exacerbation(s) of COPD in the last 12 months.

She has had no hospital admission(s) in the last year.

She has not required non-invasive mask ventilation or ITU care.

Respiratory Drug Recommendations - Maintenance treatment Tiotropium 2.5mcg respimat	Dosage anytime	Device MDI Inhaler
Respiratory Drug Recommendations - Exacerbation treatment	Dosage	
==NONE==		
Non-Respiratory Drug Recommendations	Dosage	
==NONE==		
Medications were changed (see bold) at last visit please review for effectiveness of change		
Next review: 19/09/2014	ı	

Current Issues



Pen picture for Anne Brown

Valid on 19/03/2014

Generated on 19/03/2014

- * Medications were changed (see bold) at last visit please review for effectiveness of change
- * Patient ceased smoking from 2014 further verbal support offered
- * There is no record of this person being offered education COPD literature
- * There is no record that this person has a crisis management plan in place
- * Education was not conducted at initial assessment. This should be carried out at the next review.

Summary Data

Patient accepted onto COPD management package in 19/03/2014.

a) Diagnosis notes: CXR on 19/03/2014 was normal. ECG on 19/03/2014 was normal.

This patient has not reported haemoptysis so far

- b) Verbal advice about COPD has not been given. Education literature has not been given to patient.
- c) No agreed crisis management plan in place.
- d) Smoking status: The patient is noted to be a recent ex-smoker.
- e) Vaccinations: This patient has never had an influenza vaccination. This patient has never had a pneumovax vaccination.
- f) Pulmonary Rehab has not been attended / referred to.
- g) Oxygen Assessment clinic has recommended None for symptoms.
- h) There are no sputum culture growth results to date.
- i) This person has not been referred for social support.
- j) Last wishes statement has not been in place.

Read Codes		
Code v2	Code v3	Description
339B	XaIxR (1)	Patient has been confirmed to have COPD by a post bronchodilator spirometry reading.
3390	X77Qu (1)	Patient has had an FEV1 reading in the last 12 months
173I	XaIUl	MRC breathlessness score Grade 2
66YM	Xalet	COPD annual review
22K	22K (25.78)	BMI observation
1379	Ub1na	Ex-smoker
44YA0	X770D (87)	Oxygen saturation at periphery