

Flexi Cystoscopy - Modified

Name: Mary Banktest (Female) Address: PS20 9HT

Date of birth: 02/06/1975 (49)

NHS No:

Hospital no: XX00000150

GP: Dr AW FOSTER Procedure Date: 22 Aug 2024 (17:24 - 18:24)
27 BEAUMONT STREET27 BEAUMONT Priority: Routine

27 BEAUMONT STREET27 BEAUMONTPriority:RoutineSTREET,Status:OutpatientOXFORD,Referring Hospital:Another HospitalOX1 2NRReferring Cons:ADJOGATSE

Indications

Dribbling, Incomplete emptying, Bladder thickening on CT and Macroscopic

haematuria

Co-morbidity: Deep vein thrombosis Anti-Coagulant drug(s): Acenocoumarol

Potentially Significant drugs(s): Aspirin and an unspecified NSAID

Allergies: none

ASA Status: ASA 1 - Patient is normally healthy

Family history: No risk

LUTS\IPSS symptom score:Incomplete emptying(Score:3), Nocturia(Score:2)

Total Score:5

Urine Dipstick And Cytology: Glucose Negative

Report

Pre-procedure checklist completed The patient has given consent

1

Procedure Type: Flexi Patient Sedation - Drowsy.

Procedure discomfort - Mild: More than 2 episodes of discomfort without

distress.
Site 1: Bladder

- Bladder: 1 Tumour, Flat.

- Specimens taken: Cystoscopy specimen: 4 to Histology and 5 to Cytology.

Diagnoses

Cystoscopy normal

Follow up

Awaiting pathology results.

Consultant/Endoscopist

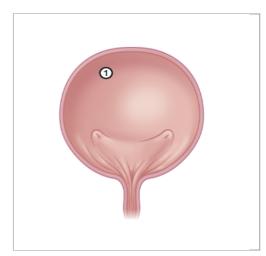
List Consultant: mr Huss Dow Endoscopist No1: Dr Duncan Stanyon

Nurses: . Jerry Bohun mr Huss Dow

Mr Administrator Full Access

Drugs

No sedation/premedication



Dr Duncan Stanyon Consultant Physician



Flexi Cystoscopy - Modified le) Address: PS20 9

Mary Banktest (Female) PS20 9HT Name:

Date of birth: 02/06/1975 (49)

NHS No:

Hospital no: XX00000150

Patient Report

Procedure:	Cystoscopy			
Procedure Date:	22 Aug 2024 (17:24 - 18:24)			
Procedure Completed:	Yes			
Medication:				
Results:				
Follow-Up:				
			No futher followup or procedure required	
			Follow up to follow in the post	
Date &Time of appointn	nent:/		Discharge to GP	
If you have any questions please ask the nursing staff who will be happy to explain anything you are unclear about. If you have any further concerns please phone QLQLQLQLQLQLQLQLQ				
Signature				
Name and Designation				
You have been giv	en an information leaflet			
You have been referred to a Clinical Nurse Specialist				
You have been spoken to by the Endoscopist regarding your diagnosis				
A clinical appointment with your consultant has been made for you				

Hospital no XX00000150

NHS No

Request for examination HISTOLOGY

My Hospital Name reasonable length

Date/Time Collected 22 Aug 2024 (17:24 -18:24)

Laboratory Number

This request is;

Urgent pathway; Routine;

Urgent; 2 WW;

PS20 9HT

Address:

Patient Category

NHS or PP

IP or OP or DC

Name: Mary Banktest
Date of birth (age): 02/06/1975 (49)

Gender: Female

Outpatient (Not Available)

Referring Consultant: GP Practice:

ADJOGATSE Dr AW FOSTER

27 BEAUMONT STREET27 BEAUMONT STREET,

OXFORD, OX1 2NR

Investig	ations	Rea	uired
IIIVCSCIQ	ations	1109	uncu

Container ID Specimens

4 biopsies from (1) Bladder

Clinical Findings

Indications

 $\label{lem:complete} \mbox{Dribbling, Incomplete emptying, Bladder thickening on CT and Macroscopic}$

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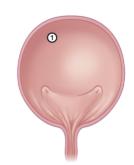
- Bladder: 1 Tumour, Flat.

- Specimens taken: Cystoscopy specimen: 4 to Histology and 5 to Cytology.

Follow up

Awaiting pathology results.





For Lab Use		
Date/time rec'd	COPY TO	
Date Reported		

Hospital no XX00000150

NHS No

Request for examination CYTOLOGY

My Hospital Name reasonable length

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Date of birth (age): 02/06/1975 (49)

Gender: Female
Outpatient (Not Available)

Referring Consultant: ADJOGATSE
GP Practice: Dr AW FOSTER

27 BEAUMONT STREET27 BEAUMONT STREET,

OXFORD, OX1 2NR

Investigations Required

Container ID Specimens

5 biopsies from (1) bladder

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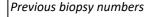
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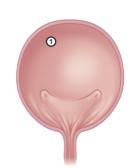
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CYTOLOGY Lab Request	form continuing for Mary Banktest (Female) /NHS: /dob:02/06/1975 (49)
For Lab Use	
	Tanana -
Date/time rec'd	СОРУ ТО
Date Reported	