

Patient Clinical Report - GP Report for Information v4.6.2

<u>Patient Details</u>			
Patient First Name	Simon	DoB	01/01/1978
Patient Surname	Clause	Age Years	40
Preferred Name	Dave	NHS no	0123456789
Patient Address	Someplace		
Patient Postcode	SO30 2UF	ODS no	J01234
Destination	Patient Not Conveyed		

<u>Incident Details</u>			
Incident Number	S1804091234	Incident Date	09/04/2018
Time of Call	12:01		

<u>History of Presenting Complaint</u>			
Date of Onset	09/04/2018	Time of Onset	11:30
Medical history of notes, including relevant information History of Presenting Complaint Free text field for entering information relevant to history presenting complaint here			
Presenting Complaint Notes Free text field for entering information relevant to presenting complaint here			
Other Notes Free text field for other information to be entered here			

<u>Presenting Complaint</u>	
Diagnosis	Presenting Complaint
GP Triage Attempt	No GP Triage Attempted

<u>Urinalysis</u>			
Nitrite	1.0	Leukocytes	1.2
Protein	1.1	Ketones	1.1
Bilirubin	0.9	Blood	1.1
Glucose	1.1		

<u>Vital Signs</u>								
Time	Pulse Rate	Resp Rate	SpO2 (on air)	SpO2 (on oxygen)	Systolic BP	Diastolic BP	Blood Glucose	Temperature
12:30	75	20	99	99	120	70	7	37.6
Vital Signs Notes Free text field for notes relevant ot vital signs to be entered here								

<u>Medicines</u>
Administered by SCAS Clinician

12:45	Saline	IV	10	ml
<u>Administered Notes</u>				
Time	12:50			
Administered Notes	Free text field for relevant medicine information			
Given By Notes	Free text field for relevant notes			
Directions Of Care	Free text field for relevant notes			
<u>Supplied</u>				
12:35	Paracetamol	2	Tablets	500mg

<u>Social History</u>	
Social History	Lives with family; Care Package in place
Social History Notes	Free text field for relevant notes
Occupational History Notes	Free text field for relevant notes
Social Support Notes	Free text field for relevant notes

<u>Safety Netting</u>	
Referred to an Alternative Service	Yes
Details of Alternative Service	GP, Falls Service
Refused Referral	Patient Refused Referral to Health Care Professional
Family and / or Carer Advised	Family / Carers have been advised of the Ambulance Attendance
Care Line	Community Care Line has been informed of the outcome
Advice Provided	Safety Netting Advice Provided
Continuing or Worsening Signs and Symptoms to prompt further help and advice	
Free text field for relevant notes	
Health Care Professional or Service to contact if there are any continuing or worsening signs or symptoms	
Free text field for relevant notes	
Timescales for seeking further help and advice	
Free text field for relevant notes	
Any other important or relevant information	
Free text field for relevant notes	
Patient Advice Leaflet Given to Patient	
Notes	
Free text field for relevant notes	