

Orthopaedic Department History Sheet.....Continuation

Patient: Mark WARD (Mr) RFH GRO-C - DOB GRO-C69

Combined Orthopaedic/Haemophilia Clinic - 14th April 2005

Consultants: Mr Nicholas Goddard - Consultant Orthopaedic Surgeon
Professor Christine Lee - Consultant Haematologist

We reviewed Mr Mark Ward in the Combined Orthopaedic/Haemophilia Clinic on 14th April 2005. He has made satisfactory progress following his Left Knee replacement 3 months ago. The knee though is still a little stiff but he is undoubtedly becoming more mobile with the physiotherapy in Brighton. He has had one of two recent bleeds, which has set him back a bit. I think this is probably related to the change in his antiretroviral medication (protease inhibitors). On examination he has 5° fixed flexion deformity. He flexes to just short of 50° with a smooth arc and normal tracking; I think this will all improve considerably with the passage of time but will, probably, stop just short of 90°.

Plan: We will review Mark Ward in the combined clinic in three months time with X-ray on arrival.

Combined Orthopaedic/Haemophilia Clinic - 9th June 2005

Consultants: Mr Nicholas Goddard - Consultant Orthopaedic Surgeon
Professor Christine Lee - Consultant Haematologist

We reviewed Mr Mark Ward in the Combined Orthopaedic/Haemophilia Clinic on 9th June 2005. He has nicely turned the corner following his **Left Knee Replacement**. He now has no significant pain. Full active extension and flexes to 50°-60°, with normal patellar tracking. No untoward features.

Plan: We will review Mark in the combined clinic in six months time.

Patient: WARD, Mark (Mr) RFH GRO-C - DOB GRO-C69

Combined Orthopaedic/Haemophilia Clinic - 1st March 2007

Consultants: Mr Nicholas Goddard - Consultant Orthopaedic Surgeon
Professor Edward Tuddenham - Professor of Haemophilia
Dr Pratima Chowdary - Consultant Haematologist

We reviewed Mr Mark Ward in the Combined Orthopaedic/Haemophilia Clinic on 1st March 2007. He is slightly worried about pain he is experiencing in his Left Knee. In fairness, I think it is arising from his back. He has had intermittent episodes of low-back pain radiating around into the anterior aspect of the pelvis tending to be worse on activity and relieved at rest. When his pain passes he experiences intermittent discomfort around the posterolateral aspect of the left knee but no hard neurological symptoms. Otherwise the knee is behaving well.

On examination he has some slight stiffness around the lumbar spine and looks like he has a gentle thoracolumbar scoliosis. The lumbar spine movements are reasonably free though and straight-leg raising is 80° bilaterally limited by tight hamstrings. No other untoward neurological symptoms. The Left Knee remains functioning well. A little stiffness in the right

Royal Free Hampstead



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PRIVATE AND CONFIDENTIAL

GP: Dr Byrne
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East Sussex BN10

Dear Dr Byrne,

Patient: WARD, Mark (Mr) REF GRO-C - DOB GRO-C
GRO-C

Combined Orthopaedic/Haemophilia Clinic - 9th June 2005

Consultants: Mr Nicholas Goddard - Consultant Orthopaedic Surgeon
Professor Christine Lee - Consultant Haematologist

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Plan: We will review Mark in the combined clinic in six months time.

Yours sincerely

Mr Nicholas Goddard
Consultant Orthopaedic Surgeon

GRO-C
Professor Christine Lee
Consultant Haematologist

cc: Dr J Wilde, Consultant Haematologist & Haemophilia Director
The Queen Elizabeth Hospital, Edgbaston, Birmingham B15 2TH