

Our reference: RMM/CLW

Hospital no: GRO-C

NHS no: GRO-C

Pathway ID: GRO-C

Start date: 03/01/2007

Treatment code: S90

3 October 2013 (Clinic: 2 October 2013)

Dr J M Gallagher
South Axholme Practice
High Street
Epworth
Doncaster
DN9 1EP

Haemophilia Review Clinic

Dear Dr Gallagher

Re: **David GREEN (DOB: 1967)**

GRO-C

Diagnosis:

1. Mild Haemophilia B baseline factor IX level 5%
2. Hepatitis C positive PCR negative
3. Extensive investigations for iron deficiency including OGD colonoscopy and capsule endoscopy showing some tiny erosions in the terminal ileum – 2012
4. Iron replete, March 2013

Mr Green was seen for review in Clinic today. He well with no symptoms of concern at the current time. He has not had any bleeds that have required treatment. He has no surgery planned although he does require dental extractions and he will be in touch with us regarding the dates of that so we can offer the appropriate haemostatic treatment.

His routine bloods were checked today including haematinics and we will see him for review in six months' time.

Yours sincerely

Checked electronically by

GRO-C

R M MACLEAN
Consultant Haematologist

Dr R M Maclean: GRO-C
Secretary: GRO-C
E-mail: judy.leach@GRO-C

Our reference: RMM/JHL
Hospital number: GRO-C
NHS number: GRO-C

15 October 2013
(Dictated 10 October 2013)

Dr J M Gallagher
South Axholme Practice
High Street
Epworth
Doncaster, DN9 1EP

Dear Dr Gallagher

Re: David GREEN (DOB GRO-C1967)
GRO-C

Diagnosis:

1. Mild Haemophilia B - baseline factor IX level 5%
2. Hepatitis C positive PCR negative
3. Extensive investigations for iron deficiency including OGD colonoscopy and capsule endoscopy showing some tiny erosions in the terminal ileum - 2012
4. Normal full blood count but ferritin reduced at 25µg/l

I now have the results of Mr Green's investigations. His full blood count revealed a haemoglobin of 149g/l with red cell indices within the normal range. His ferritin was reduced at 25µg/l (had been 30 in March of this year). Renal and liver biochemistry were normal and alpha-fetoprotein was not raised.

Mr Green is again gradually becoming iron deficient. Can I suggest he be started on some iron supplementation (eg 200mg ferrous sulphate daily). I would be grateful if you would arrange this; I will write to Mr Green advising him to make an appointment to see you.

I note the results of his previous GI investigations showed some small erosions in the terminal ileum but he had no significant GI symptoms suggesting inflammatory bowel disease. Should Mr Green develop any symptoms suggestive of inflammatory bowel disease he should be re-referred to Gastroenterology; we would be happy to make that referral but he did not have any such complaints when I saw him in clinic.

We will see him for review as planned.

With many thanks,

Yours sincerely

GRO-C

Dr R M Maclean
Consultant Haematologist
(checked electronically)

GRO-C

GRO-C

Dr R M Maclean

GRO-C

Secretary

GRO-C

E-mail: judy.leach@

GRO-C

Our reference: RMM/JHL

Hospital number: **GRO-C**

NHS number: **GRO-C**

15 October 2013

(Dictated 14 October 2013)

Mr David Green

GRO-C

Dear Mr Green

Your blood tests suggest that you are once again becoming slightly iron deficient. You are not at all anaemic, it is just that your iron (ferritin) level in the blood is slightly low. I think the best thing would be for you to start on low-dose iron supplementation (for example 1 tablet of ferrous sulphate daily). Your GP will be able to arrange this for you. I would suggest that you arrange to see him/her in order to get the appropriate prescription.

If you have any questions regarding this please do not hesitate to get back in touch with me.

With many thanks,

Yours sincerely

GRO-C

Dr R M Maclean

Consultant Haematologist

(checked electronically)

Our ref: KKH/KAM

Hospital no:

GRO-C

NHS no:

GRO-C

Pathway ID:

GRO-C

Start date: 03/01/2007 Treatment Status: S90

8 April 2014 (clinic 2 April 2014)

Dr J Gallagher
South Axholme Practice
High Street
Epworth
Doncaster
DN9 1EP

Haemophilia Review Clinic

Dear Dr Gallagher

Re: **David Green** dob: **GRO-C 1967**

GRO-C

Diagnosis: 1. Mild haemophilia B
2. Recent upper respiratory tract infection

I reviewed this gentleman in clinic. In December he was admitted overnight with an episode of haemoptysis that was thought to be due to an upper respiratory tract infection - he had had an episode of flu. This settled with factor IX treatment and he was discharged the following day. His respiratory symptoms completely settled, indeed he went back to work the following day. He has had no further pulmonary complications and certainly no haemoptysis. He has no dental or surgical challenges planned.

He had his bloods done in December; haemoglobin, U&Es, LFTs and X-rays were all entirely normal so I have not repeated them today. I have given him an appointment for a year's time. He has not been seen in the Dental Hospital for some time and did have some extractions planned prior to being lost to follow-up so I have re-referred him back to Simon Utting.

Kind regards

Yours sincerely

Dr K K Hampton
Senior Lecturer/Honorary Consultant in Haematology

