

BASINGSTOKE AND NORTH HAMPSHIRE HEALTH AUTHORITY

Director:

Dr. A. ARONSTAM, D.M., F.R.C.Path.

TRELOAR HAEMOPHILIA CENTRE

Lord Mayor Treloar College

Holybourne Alton

Telephone No. Alton **GRO-C**

AA/SAC

27th June 1983

Dr. D.G. Chalmers,  
Regional Haemophilia Centre,  
Addenbrookes Hospital,  
Hills Road,  
Cambridge.

Dear Dr. Chalmers,

re: **GRO-A** **GRO-A**  
**GRO-A**

**GRO-A** left the college on 24.6.83.

For your information, I enclose copies of:-

- 1) His bleeding episodes and transfusions so far this term
- 2) Orthopaedic chart
- 3) Laboratory results

AIDS RELATED INVESTIGATIONS:

Clinically he exhibits none of the stigmata of AIDS apart from 2 kg. loss in body weight this term.

For your information we have undertaken the enclosed AIDS related tests. We have repeated the tests and will let you have the results when they are available.

I hope he continues to do well.

Yours sincerely,

**GRO-C**

M. Wassef  
S.C.M.O.

ENC.

Information required by:-

The Haemophilia Centre,  
Lord Mayor Treloar Hospital. Alton   
Secretary Mrs. S. A. Norris (Ext. ).

Would you kindly complete the form below and return

FULL NAME

DATE OF BIRTH ...

...1964...

HOME ADDRESS .

...NORFOLK...

Telephone No

(Home or where you can be contacted).

NATIONALITY

...ENGLISH...

\* Whether

Haemophilia

~~Christmas Disease~~

\*Delete which does not apply.

~~Von Willebrand's~~

BLOOD GROUP (If possible) ...A... POSITIVE...

NEXT OF KIN .

RELATIONSHIP ..MOTHER.....

Tel. No.

ADDRESS .

...NORFOLK...

G.P.'s NAME AND ADDRESS ..DR. J. SMITH:

...THE CAMPING LAND...

...SWAFFHAM NORFOLK...

Telephone No:

...SWAFFHAM...

HOME HAEMOPHILIA CENTRE WHERE REGISTERED

...ADDENBROOKS HOSPITAL... CENTRE...

...CAMBRIDGE...

CONTACT DR...

...SEAMAN.....

Tel No:

...EXT.