

wt. 52 kg. Feel well. Doing well at college.  
No abnormal detected on examination of mouth & jaw.  
Review 500.  
Pbc & LFTs.

GRO-C

28/10/93

Review

Problems discussed in June have resolved.  
Passing studies in B:Tech art. & music.  
Bleeds on average once a week. No target joints. Respond to  
one dose of 1000mg VITC. No problems with access.  
No arthralgia pains.

General health good.

Discontinued Hep A, B & C. Appears to be anti HAV pos.  
Says he doesn't take alcohol. Smokes 10-16 cigarettes/day.

Early bleed in ~~left~~ <sup>right</sup> shoulder. Needs jacket VITC today.

off Ht. 178 WT. 51.8

Appear to have stopped growing.

GRO-C

R.P. 100/70

Severe erythema & acne on face & scalp. Erythema on  
both elbow flexors, forearms & wrists. Bleeding encrustations.

Most healthy

Clot clear.

Abdomen: Liver palpable 2cm. below costal margin; firm, smooth.

No other masses. Spleen not palpable.  
Enlarged liver not noted previously.

all joints full ROM

Treated with 1000mg jacket VITC for ~~left~~ <sup>right</sup> shoulder bleed -  
swelling & bruising over ~~post~~ deltoid muscle posteriorly. No  
restriction of movement, tenderness on palpation.

Routine blood samples taken. (repeat anti HAV)

Appt. made for dermatology clinic (Dr. Ruck) tomorrow am

GRO-C

28/10

Urinalysis = trace protein  
otherwise NAD.

GRO-C

2/11/93

Needs CT scan particularly to look at pancreas & liver.  
Last scan April 1992 - no abnormality.

Amylase slightly raised on 28/10/93 & 7/11/93. - d/w Dr. Rosenthal: some  
patients with chronic liver disease have raised amylase (failure to clear) suggested  
failed to keep appt. with Dr. Ruck, doing laboratory test  
time he is reviewed.

HAV pos. Hg Ab > 100

GRO-C