

TC1 Daedalus Ward 11.8.98

PORTSMOUTH

HealthCare

NIIS  
TRUST

NOTE 1

DR R I REID, FRCP  
CONSULTANT GERIATRICIANElderly Medicine  
Queen Alexandra Hospital  
Cosham  
Portsmouth PO6 3LY

RIR/BJG/WVTQ130407

Tel: 01705 822444  
Extension: Code A  
Direct Line: 01705 Code A  
Fax: 01705 200381

5th August 1998

Surgeon Commander M Scott  
The Royal Hospital Haslar  
Gosport  
Hants

Dear Surgeon Commander Scott

RE: WARD VISIT - E6 WARD HASLAR  
Gladys RICHARDS - DOB Code A  
HA: GLENHEATHERS NURSING HOME, LEE-ON-SOLENT, HANTS

Thank you for referring Mrs Richards whom I saw on Ward E6 at Haslar Hospital on 3rd August.

Fortunately two of her daughters were present when I visited so I was able to obtain information from them, about Mrs Richards pre-morbid health. It would appear that Mrs Richards has been confused for some years but was mobile in her nursing home until around Christmas 1997 when she sustained a fall. She started to become increasingly noisy. She was seen by Dr Banks whom presumably felt she was depressed as well as suffering from a dementing illness. She has been on treatment with Haloperidol and Trazodone. According to her daughters she has been "knocked off" by this medication for months and has not spoken to them for some six to seven months. Her mobility has also deteriorated during that time and when unsupervised she has a tendency to get up and fall. In the last such incident she sustained a fracture to the neck of her right femur, for which she has had a hemi-arthroplasty. I believe that she is usually continent of urine but has had occasional episodes of faecal incontinence.

Since her operation she has been catheterised. She has had occasional faecal incontinence and has been noisy at times. She has been continued on Haloperidol, her Trazodone has been omitted. According to her daughters it would seem that since her Trazodone has been omitted she has been much brighter mentally and has been speaking to them at times.

contd.....

- 2 -

Gladys RICHARDS

When I saw Mrs Richards she was clearly confused and unable to give any coherent history. However she was pleasant and cooperative. She was able to move her left leg quite freely and although not able to actively lift her extended right leg from the bed, she appeared to have a little discomfort on passive movement of the right hip. I understand that she has been sitting out in a chair and I think that, despite her dementia, she should be given the opportunity to try to re-mobilise. I will arrange for her transfer to Gosport War Memorial Hospital. I understand that her daughters intend to give up the place in Glenheathers Nursing Home as they have been unhappy with the care, but would be happy to arrange care in another nursing home.

Yours sincerely

DR R I REID, FRCP  
Consultant Physician in Geriatrics

cc. Dr J H Bassett  
Lee-on-Solent Health Centre  
Manor Way  
Lee-on-Solent  
Hampshire