

Richmond Marketplace Medical Centre

Shop 46, Richmond Marketplace
ABN: 28 325 871 904
78 March Street
RICHMOND NSW 2753

Phone: (02) 4578 4800
Fax: (02) 4578 3300

31/08/2024

Dr SUKHVINDER VIRK
096533GB

Ms Michelle Hookam
Old Hawkesbury Hosoutal
6 Christie Sr
Windsor 2756
0245774435

Dear Michelle,

Re: Mrs Sarah-Jane Loftus
08/07/1971

Thank you for seeing Mrs Sarah-Jane Loftus, age 53 yrs, for an opinion and continued management.

Smoking Hx: Smokes 10 cigarettes/day.

Current Problem:

Anxiety/ depression. For 4 further sessions of counselling.

Past History:

	Bipolar affective disorder
	PTSD
	Vitiligo
	Central obesity
	Obesity, Class 3
15/04/1991	Hypertension
22/07/2005	Depression
25/04/2011	Dental Pain, Poor Dentition
16/06/2018	Anxiety
15/07/2020	Low back pain
31/05/2021	COPD, Infective exacerbation
31/05/2021	Hypercholesterolaemia
31/05/2021	TIA
31/05/2021	TIA
31/05/2021	PTSD
10/2021	Tenosynovitis rt hand
05/05/2022	Gastro-oesophageal reflux disease
10/10/2022	Smoking cessation
22/09/2023	Iron deficiency
22/09/2023	B12 Deficiency
22/09/2023	Hashimoto's thyroiditis
21/02/2024	Mitral stenosis moderate

17/07/2024 Otitis media

Allergies:

Pethidine	
Pethidine	Bronchospasm, Severe
Pethidine	Bronchospasm, Severe

Current Medications:

Crestor 10mg Tablet	1 Tablet Daily.
Cymbalta 60mg Capsule	1 Capsule Daily.
Ferro -Tab 200mg Tablet	1 Tablet Daily.
Mirtanza 30mg Tablets	1 Tablet Before bed.
Nebilet 1.25mg Tablet	2 Tablets Daily.
Neo-B12 1mg/mL Injection	3 monthly.
Nicabate P 21mg/24hr Patch	1 Patch Daily.
Omeprazole 20mg Capsule	1 Capsule Daily.
Oroxine 50mcg Tablet	1 Tablet In the morning.
Osteomol 665 Paracetamol 665mg Tablet	2 Tablets Twice a day As directed.
Ozempic 1mg/dose Pen device	0.25 mg weekly x 4 wks then 0.5 mg weekly.
Telmisartan /Amlodipine 80mg; 5mg Tablet	1 Tablet Daily.

I seek your opinion regarding further management.

Thankyou for your care and assistance. I shall await your reply.

Kind Regards,


Dr SUKHVINDER VIRK
Shop 46, 78 March St
Richmond 2753

Richmond Marketplace Medical Centre

**PLEASE NOTE: ALL CORRESPONDENCE CAN BE SENT VIA HEALTHLINK EDI
CODE: ricmktmc**

GP MENTAL HEALTH CARE PLAN

ITEM: Review 2712

From: *Richmond Marketplace Medical Centre*
Shop 46, 78 March Street, Richmond 2753
Ph: (02) 45784800 Fax: (02) 45783300

Date: 31/08/2024

Patient Name: Mrs Sarah-Jane Loftus

Medicare No: 3227311366

DOB: 08/07/1971

Anxiety/ depression

Mental Status Examination:

Appearance and General Behaviour

☒ Normal ☐ Other:

Thinking (Content/Rate/Disturbances)

☒ Normal ☐ Other:

Sleep (Initial Insomnia/Early Morning Wakening)

☐ Normal ☒ Insomnia ☐ Excessive

Appetite (Disturbed Eating Patterns)

☐ Normal ☒ Reduced ☐ Overeating

Motivation/Energy

☐ Normal ☒ Not Motivated

Insight

☒ Normal ☐ Other:

Orientation (Time/Place/Person)

☒ Normal ☐ Other:

Suicidal Ideation

☐ Yes ☒ No

Mood (Depressed/Labile)

☐ Normal ☒ depressed-Anxious:

Perception (Hallucinations, etc.)

☒ Normal ☐ Other:

Cognition (Level of Consciousness/Delirium/Intelligence)

☒ Normal ☐ Other:

Attention/Concentration

☐ Normal ☒ reduced:

Memory (Short and Long Term)

☒ Normal ☐ reduced:

Anxiety Symptoms (Physical and Emotional)

☐ Normal ☒ Anxious

Speech (Volume/Rate/Content)

☒ Normal ☐ Other:

Suicidal Intent

☐ Yes ☒ No

Assessment Plan & Discussion

PTSD

Anxiety/ depression

Goal:

- Counselling
- Learning strategies to be able to deal with all psychological issues

Provision of Psycho Education:

- Material regarding Depression; Anxiety & Bipolar

Plan for Crisis

- Life Line Penrith Regional Centre Ph: (02) 131114
- Mental Health Crisis Team Ph: 1800 011 511
- Hawkesbury Hospital Ph: (02) 4560 5555
- Surgery Phone No: (02) 4578 4800
- Surgery Facsimile No: (02) 4578 3300

Referral to Psychologist/Psychiatrist:

referral to Michelle Hookham for further counselling

Review Date:

2 months

Doctor.....

Dr SUKHYINDER VIRK

096533GB

Richmond Marketplace Medical Centre

Shop 46, 78 March Street, Richmond 2753

Ph: (02) 45784800 fax: (02) 45783300

Patient:.....

K10

For all questions, please fill in the appropriate response with an "X" in the space provided.

The maximum score is 50 indicating severe distress and the minimum score is 10 indicating no distress.

Questions 3 and 6 are not asked if the proceeding question was 'none of the time' in which case questions 3 and 6 would automatically receive a score of one.

In the past 4 weeks	1 None of the time	2 A little of the time	3 Some of the time	4 Most of the time	5 All the time	Score
1. About how often did you feel tired out for no good reason?					✓	
2. About how often did you feel nervous?				✓		
3. About how often did you feel so nervous that nothing could calm you down?					✓	
4. About how often did you feel hopeless?				✓		
5. About how often did you feel restless of fidgety?					✓	
6. About how often did you feel so restless you could not sit still?					✓	
7. About how often did you feel depressed?				✓		
8. About how often did you feel that everything is an effort?					✓	
9. About how often did you feel so sad that nothing could cheer you up?					✓	
10. About how often did you feel worthless?					✓	
Today's Date: 31/8/24					Total Score	47