

Interstitial lung disease (ILD) service

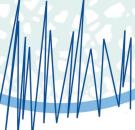
Patient held drug monitoring booklet

Important

Please produce this book when you visit your doctor or the hospital.

Please bring all of your medication with you to hospital appointments.





Patient name:	
Address:	
Telephone no:	
ILD specialist nurses contacts:	Emma Harris Katie Harding Jo Songco Vichel Andaya Ana Lopes Alison Webb Clair Ellis
Contact number :	01223 638018

For the attention of medical staff

This patient is taking therapy that may cause bone marrow suppression.

If the patient becomes unwell, check full blood count.

If the results are abnormal, stop the drug and contact the interstitial lung disease team via the ILD secretaries:

Frankie Clark Tel: 01223 639793

Karen Cowell Tel: 01223 639556

Dorrie Clarke Tel: 01223 638786

Connie Price Tel: 01223 639864

Information for the patient

You have been given	this booklet so	that the test	results
can be recorded.			

It is your responsibility to arrange blood tests at your GP surgery, as advised by the clinic. This is for your own safety.

If you are admitted to hospital show this booklet to the doctor or nurse. Bring it with you to all your clinic appointments.

D!! -	
Diagnosis	

Medication page

Date of dose information	Drug	Dose

Note: For patients on methotrexate, specify in the dose box, the weekly dose in milligrams (i.e. xx mg once per week), the day of the week the dose is usually taken and the strength of tablets required.

Medication page

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	Date				
	CRP				
	ESR				
	Hb				
Full blood count	Total WBC				
poc	MCV				
	Neutrophils				
Z	Lymphocytes				
	Platelets				
je ;	ALT/AST				
Liver	ALK Phos				
U&E	Serum Creatinine				
ne	Protein				
Urine	Blood				
	ВР				
	Other				
	Other				
	Comments				

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What the terms mean

Hb:	The oxygen carrying protein pigment in the blood, specifically in red blood cells.
MCV:	The average volume of red blood cells.
WBC:	White blood cells, important in fighting infection.
Platelets:	Irregular, disc-shaped cells in the blood that assist in blood clotting.
Lymphocytes:	Small white blood cells that play a large role indefending the body against disease. They are responsible for immune responses.
Neutrophils:	Type of white blood cell filled with enzymes used to kill and digest micro organisms.
ALT and AST:	Enzymes normally present in the liver and heart cells that are released into the blood stream when the liver or heart is damaged. Rising blood ALT or AST levels may indicate a liver problem.
CRP:	A protein in the blood that rises in response to inflammation.

ALK phos:	An enzyme made in the liver which is usually released into the blood during injury. Abnormally high levels may indicate a liver problem.
ESR:	A blood test that detects and monitors inflammation in the body. The rate increases with more inflammation.
Urea:	A substance normally cleared from the blood by the kidney. Increased blood levels of urea indicate a problem with kidney function.
Creatinine:	A substance normally cleared from the blood by the kidney. Increased blood levels of creatinine indicate a problem with kidney function.

Usual values for blood tests

Hb:	Man 13 - 18 g/dL
	Woman 11.5 - 16.5 g/dL
MCV:	76 - 100 FL
WBC:	4 - 11 x 100/L
Platelets:	150 - 450 x 100/L
Lymphocytes:	1.50 - 4.0 x 100/L
Neutrophils:	2 - 7.5 x 100/L
ALT:	0 - 50 U/L
AST:	5 - 60 U/L
ALK phos:	30 - 135 U/L
CRP:	0 - 6 mg/L
ESR:	2 - 10 mm/hr
Urea:	0 - 7.5 mmol/L
Creatinine:	35 - 125 umol/l

Royal Papworth Hospital normal ranges (other hospitals may differ slightly).



royalpapworth.nhs.uk

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Large print copies and alternative language versions of this leaflet can be made available on request.

View a digital version of this leaflet by scanning the QR code.

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