



GREATER GLASGOW HEALTH BOARD
WESTERN INFIRMARY / GARTNAVEL GENERAL HOSPITAL UNIT

CLINICAL TEACHING CASE STUDY

**CHILDREN'S
HOMEOPATHY
CLINIC**

Study Case No. 2.14

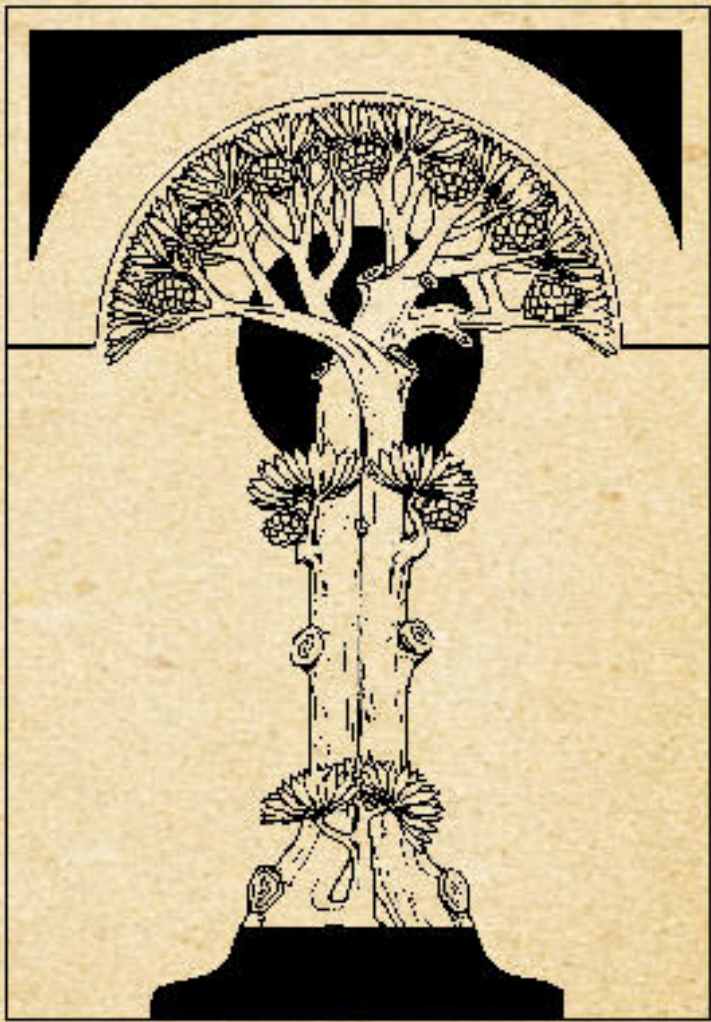
Name: Caroline M.

CONFIDENTIAL

CLINICAL TEACHING CASE No 2.5

Respect Patient Confidentiality

Discussion or disclosure is not permitted, except within your training group.



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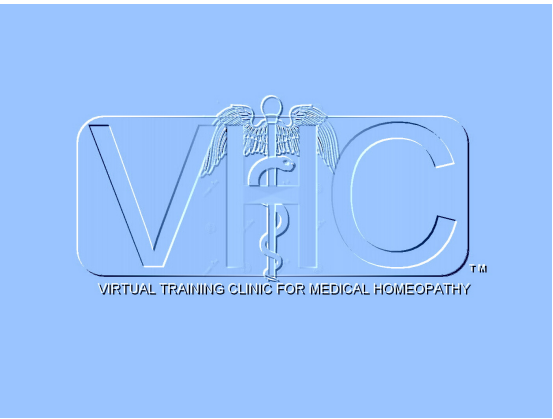
Name: **Caroline M.** Presenting Complaint / Principal diagnosis:
Age at First Consultation **12 yrs** Eczema

INSTRUCTIONS FOR LEARNERS:

Study the referral and [view the first consultation](#) for this case in week: **3**
Consider all review consultations and discuss further treatment in week: **4**



After you have added your own notes to this interactive pdf file, be sure to save it to your computer. Once the case review for this patient has been concluded, save the final copy to your training portfolio.



INDEX

- Referral / Correspondence
- GP LETTER Case Recording Sheets
- Original Written Notes (First Consultation)
- Investigation Reports(empty)
- Repertoristions & Searches (empty)
- Clinical Audit / Outcome Reports (empty)
- Clinical Photographs / Images
- Miscellaneous (empty)

FIRST CONSULTATION

Name: / Age:

You can annotate this recording sheet while you view the video case. You may find it more convenient, however, to download and print the recording sheet from supplemental materials and patch in the history by hand.
Complaint:

History of Present Illness:



<https://youtu.be/BqUiPagYCs>

Use the link above to access the Consultation Video. Size the video player window on your computer desktop so that you can simultaneously make entries into this case recording sheet.

Personal:

Menstrual History:

Family History:

Examination:

FIRST CONSULTATION

HOMEOPATHIC SYMPTOMS

GENERALS

Heat:	Cold:	Perspiration:
Time:	Weather:	

STOMACH

Appetite:	Disordered:
Aversions:	Thirst:
Desires:	

SLEEP

PARTICULARS

Head	Stomach
Eye	Abdomen
Ear	Bowel
Nose	Genito-urinary
Throat	Back
Respiratory	Extremities
	Skin

MIND

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CORRESPONDENCE

NOTES

REPORTS

OTHER

FIRST CONSULTATION

Continuation sheet

Patient name / id

FIRST CONSULTATION

Continuation sheet

Patient name / id.

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CORRESPONDENCE

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REVIEWS



Review appointment at 4 weeks



<https://youtu.be/VAQrmqDGW0Q>