

**THE ROYAL BELFAST HOSPITAL FOR SICK CHILDREN
BELFAST 12**

Flu

Telephone: 240503

Date *24/1/92*

Dear Dr. *Scott*

CH 364377 K
ADAM STRAIN

Name of Patient



S 04/08/91

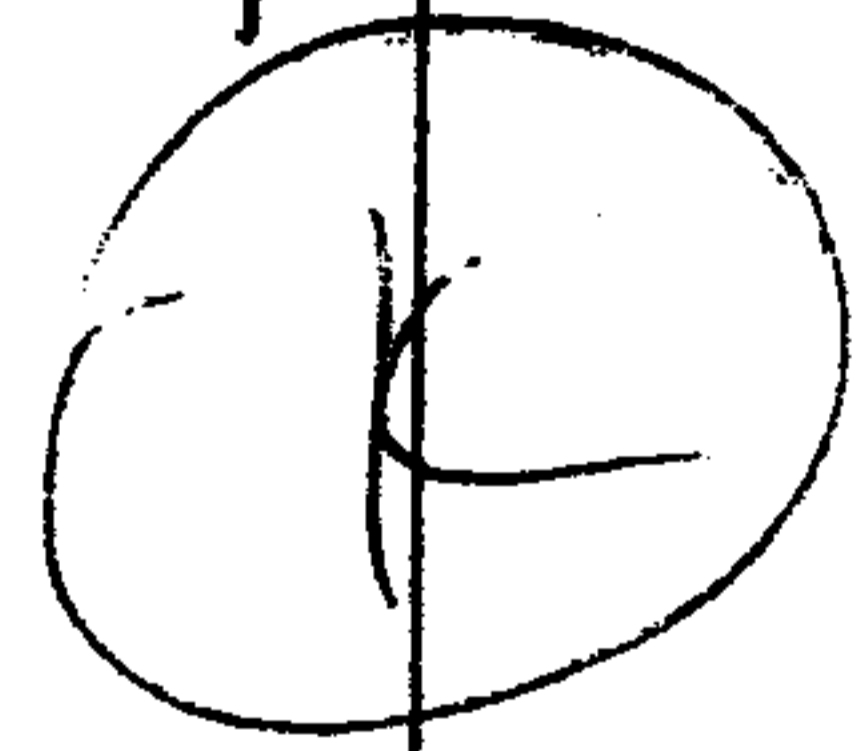
Your patient was examined at
today, and I would recommend

WD/OP CONSULTANT

DETAILS OF DRUGS SUGGESTED

NAME	STRENGTH	FORM, e.g. Injection/Tablets	DOSE	FREQUENCY OF DOSE	LENGTH OF COURSE
<i>Septin</i>	<i>240mg</i>	<i>in Suls</i>	<i>240mg</i>	<i>B.D</i>	<i>1 week</i>

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fits envelope HS.26



A full report will follow.

Yours sincerely *[Signature]*

L3
RECOMMENDED TREATMENT

WNC757

AS - EHSSB

016-072-114