PATIENT PROFILE

SPERRIN LAKELAND HEALTH & SOCIAL CARE TRUST — ERNE HOSPITAL

SURNAME: CRAWFORD FORENAMES: LUCY MARITAL STATUS: S

ADDRESS:

DATE OF BIRTH: 5/11/98 AGE: 1½ WARD: 5/ICU HOSPITAL NO.: 123000

DATE ADMITTED: 13/4/00 TIME ADMITTED: 4⁴⁰ am TYPE OF ADMISSION: Emergency

OCCUPATION: G.P.: Conor CONSULTANT: I. O'Donohoe

RELIGION: C/I C Anae: Dr T. Anderson

ALLERGIES/REACTIONS: None Known. N. Nurse / A. Nurse

RELEVENT FAMILY HISTORY OF ILLNESS: —

REASON FOR ADMISSION: Requiring ventilation following ? Resp arrest after fit

PATIENTS UNDERSTANDING OF PRESENT ILLNESS: — Parents Present.

RELEVANT PAST HISTORY OF ILLNESS/OPERATIONS: Bronchiolitis Nov '99

MEDICATIONS ON ADMISSION KEPT IN HOSPITAL?/RETD?

FINAL DIAGNOSIS: Collapse, Intubated, Ventilated

DISCHARGE PLAN DATE OF DISCHARGE: RELATIVES INFORMED? YES? NO?

DISCHARGED TO:

OPD. APPT. YES? NO? CLINIC? DATE BOOKED

VALUABLES RET'D. YES? NO? BOOK SIGNED?

PRESCRIPTION CARD? TABLETS TO TAKE HOME? OWN TABLETS RETURNED?

COMMUNITY SERVICES INVOLVED:

SIGNATURE OF NURSE:

NEXT OF KIN:

RELATIONSHIP:

ADDRESS:

TELEPHONE NUMBER — HOME: / BUSINESS: / OTHER:

INFORMED? YES NO

DEPENDENTS:

NUMBER OF CHILDREN:

PLACE IN FAMILY:

LIVES WITH:

TYPE OF ACCOMMODATION:

FACILITIES LACKING:

COMMUNITY SERVICES:

SOCIAL REPORT REQUESTED? ~~YES~~ NO

DENTURES:

VALUABLES:

PROPERTY ROOM NUMBER: None

VALUABLES TO RELATIVES? — ADMINISTRATION? —

SUPPLEMENTARY BENEFIT? ~~YES~~ NO

SIGNATURE OF NURSE: [signature]

LPC 1/94/043

027-015-036

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ASSESSMENT OF ACTIVITIES OF LIVING

Usual Routines
what he/she can/cannot do independently

Patient's problems (actual/potential) (p) = potential

DATE

1 Maintaining a Safe Environment Admitted with H/o generally unwell, fever + ~~Vomiting~~ diarrhoea x 4. Sudden collapse 3am, Intubated and Ventilated. Pupils fixed and dilated. Colour very Pale

2 Communicating Unconscious GCS 3.

3 Breathing Intubated on admission with size 4·0 ET tube (oral) Tube changed to size 4·0 ET tube via Lt nostril. – Ventilated SIMV mode of ventilation TV 1·5 Resp Rate 20, O2 100% SaO_2 levels 94% – 100% Size 1 Airway insitu

4 Eating & Drinking H/o Vomiting

IV fluids via Rt peripheral line

5 Eliminating Nappies – Diarrhoea x 3/4

Catheterised with size 10 Catheter. 3mls in balloon

6 Personal Cleansing & Dressing Requires Assistance

7 Controlling Body Temperature Hypothermic, – Cold to touch

8 Mobilising

9 Working & Playing Toddler.

10 Expressing Sexuality [redacted]

11 Sleeping [redacted]

[redacted]

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EVALUATION SHEET

Date	Time	Prob. No.	Evaluation	Signature	B.O.	Communications/Instructions/Investigations
13/4/00	4 35 Am		Transferred from Children's Wd following			
	Breathing		Respiratory Arrest post Epileptic type			
			fit. On admission intubated size 4.0 oral			
			ET Tube, Colour pale, Commenced on			
			SIMV mode of ventilation. TV 0.15 Resp			
			Rate 20, Oxygen 100%. No spontaneous breaths			
			taken. - re intubated with size 4.0 ET tube			
			via Lt Nostril. SAO2 levels 92%-99%			
	CVS		B/P 92/49 ECG sinus rythm rate 112.			
	CBT.		Pupils fixed and dilated Hypothermic			
			Arterial line attempted but unsuccessful.			
			Mannitol 20% 25mls over 30mins as per Dr			
			O'Donohue. Claforan 1gm IV stat. at 5 45 am			
			size 14 NG tube passed orally - No contents in			
			stomach - NG removed by Dr			
	Nutrition		IV fluids via Rt peripheral line, 30ml/hr			
			via Buritol.			
	Communication		Parents spoke to by Dr Auterson + Dr O'			
			Donohue Aware of Lucy's ill condition			
			and of transfer to Belfast RVHSC.			
			Left wd at 6 38 am, Dr and Nurse			
			in attendance.	[signature]		

Name: Lucy Crawford — Hospital Number: ERN 123000 — Ward: S/ICU

HC5

027-015-038

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