PARENTERAL NUTRITION FLUIDS PRESCRIPTION SHEET

	Amount (ml)	TYPE OF FLUID	NAME and AMOUNT of ADDITIVES	Rate ml/hour	Type of pump	Serial number of pump	Prescribed by (Signature)	Batch No. Date of Expiry	Time erected + erected by (Signature)
1	1 litre 80ml/Hour	No 18	—	80ml/Hr	1100.	11445	R Mnh.	01C19BB. 2/2000	10.15a Dr Thomas / P. Beyer
2									
3	~~80ml/hr~~	~~[illegible]~~	~~[illegible]~~						
4									
5									
6									
7									
8									
9									
10									

LPC 01/85/064

020-021-040

RF - ALTNAGELVIN