

AGREED ACTION FOLLOWING CRITICAL INCIDENT MEETING 12/06/01

- 1 Review evidence for use of routine post-operative low electrolyte IV infusion and suggest changes if evidence indicates. No change in current use of Solution 18 until review.

Action Dr Nesbitt

- 2 Arrange daily U&E on all post-operative children receiving IV infusion on Ward 6.

Action Sister Miller

Inform surgical junior staff to assess these results promptly.

Action Mr Gilliland

- 4 All urinary output should be measured and recorded while IV infusion progress in progress.

Action Sister Miller

- 5 A chart for IV fluid infusion rates to be displayed on Ward 6 to guide junior medical staff.

Action Dr McCord

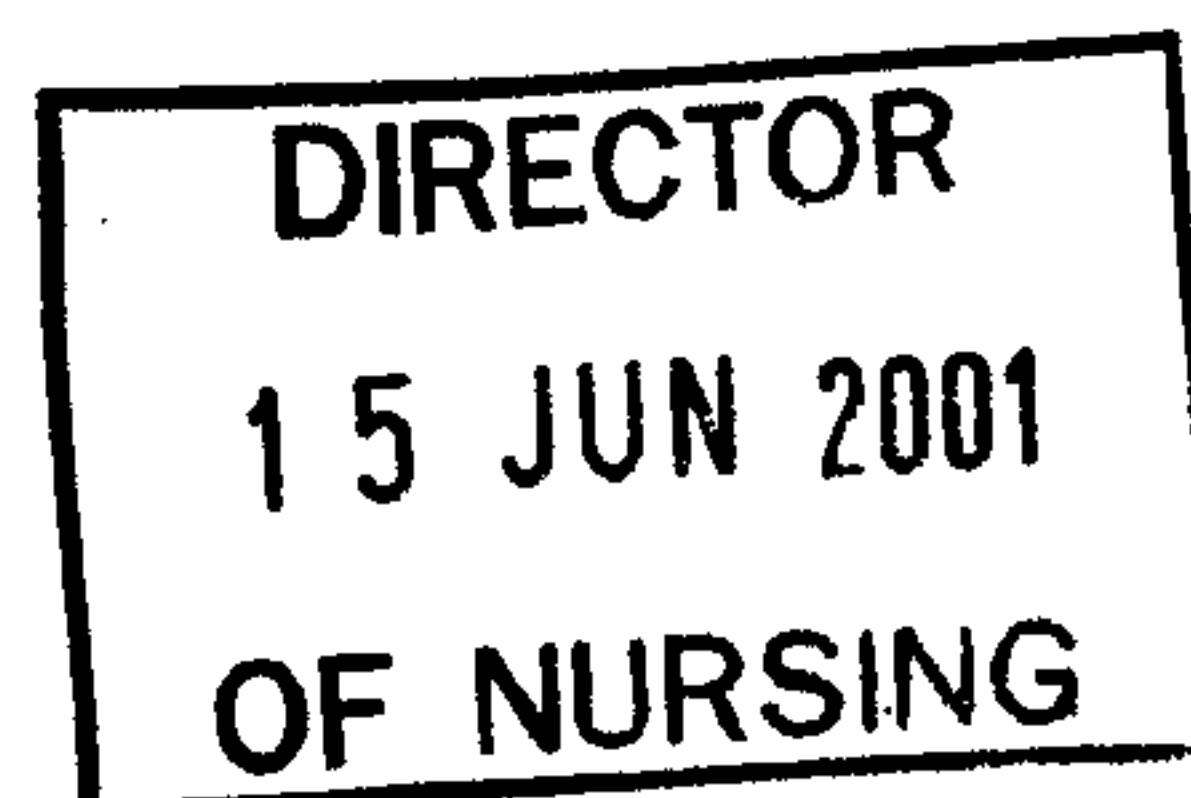
- 6 Review fluid balance documentation used on Ward 6.

Action A Witherow

R A FULTON  
Medical Director

13/06/01

Bring back  
complete report



**AGREED ACTION FOLLOWING CRITICAL INCIDENT MEETING 12/06/01**

- 1 ~~Dr Nesbitt to~~ Review evidence for use of routine post-operative low electrolyte IV infusion and suggest change if evidence indicates. No change in current use of Solution 18 until ~~review~~, Dr Nesbitt's report. *Dr Nesbitt*
- 2 ~~Sister Miller to~~ Arrange daily U&E on all post-operative children receiving IV infusion on Ward 6 *Sister Miller*
- 3 ~~Mr Gilliland to~~ Inform Surgical junior staff to assess these results promptly. *Mr Gilliland*
- 4 All urinary output should be measured and recorded while IV infusion <sup>in</sup> progress. *Sister Miller*
- 5 ~~Dr McCord to~~ <sup>attach</sup> Arrange for IV fluid infusion rate <sup>chart</sup> to be displayed on Ward 6 to guide junior medical staff. *Dr McCord*
- 6 Review of fluid balance documentation <sup>used</sup> on Ward 6 *Ann Williams*

**R A FULTON**  
**Medical Director**

**12/06/01**

**AGREED ACTION FOLLOWING CRITICAL INCIDENT MEETING 12/06/01**

- 1 Review evidence for use of routine post-operative low electrolyte IV infusion and suggest changes if evidence indicates. No change in current use of Solution 18 until review.

**Action Dr Nesbitt**

- 2 Arrange daily U&E on all post-operative children receiving IV infusion on Ward 6.

**Action Sister Miller**

- 3 Inform surgical junior staff to assess these results promptly.

**Action Mr Gilliland**

- 4 All urinary output should be measured and recorded while IV infusion progress in progress.

**Action Sister Miller**

- 5 A chart for IV fluid infusion rates to be displayed on Ward 6 to guide junior medical staff.

**Action Dr McCord**

- 6 Review fluid balance documentation used on Ward 6.

**Action A Witherow**

**R A FULTON**  
**Medical Director**

**13/06/01**



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- 1 Review evidence for use of routine post-operative low electrolyte IV infusion and suggest changes if evidence indicates. No change in current use of Solution 18 until review.

Action Dr Nesbitt ✓

- 2 Arrange daily U&E on all post-operative children receiving IV infusion on Ward 6. *6 hrly. B.M's. on children on Haitman's solution.* ✓

Action Sister Miller

- 3 Inform surgical junior staff to assess these results promptly. ✓

Action Mr Gilliland

- 4 All urinary output *+ vomitus* should be measured and recorded while IV infusion progress in progress. ✓

Action Sister Miller

- 5 A chart for IV fluid infusion rates to be displayed on Ward 6 to guide junior medical staff. ✓

Action Dr McCord

- 6 Review fluid balance documentation used on Ward 6. ✓

Action A Witherow

**R A FULTON**  
**Medical Director**

13/06/01