E/1/X

ERNE HOSPITAL

SURNAME	FIRST NAME(S)	HOSPITAL NO.
CRAWFORD	LUCY.	123000

CONTINUATION SHEET

DATE	
12/4/00.	Chest: Clear.
	Abs. S, FS, ↑ BO
19:30	
	Abd. Soft-BS+ve.
	CNS. NAD.
	→ Viral illness.
	Plan.
	- Admit + observe + Encourage feeding
	- Check urine for Leucocyte + Nitrate.
	- Bloods FBC, U/E + glucose CRP, B/Culture
	- ½ fluid after ½ Cannulation.
	-
	Hb: 12.1 WBC: 15.0 Neuts = 13.7
	Plts = 397
	Na 137. K=4.1. Cl 105. CO 16. U=9.9. Cr=45
	Cre 45.
	Urinalysis - Protein ++ Ketones ++. No Leucocyte
	≈ 2300 - I.V. line inserted. Surgical
	01232 66 70 02 Dr McGregor.
	040 - 131 215
13/4/00 3:15	Called Dr. O'Donohoe to assess the Condition Surgical
13/04/00 05[45]	
	≈ 03[00] Mother noticed baby Rigid. ± Shiny
	later → Rectal diazepam 2.5mgs
	P.R.
	There had been diarrhoea before Res.
	episode and subsequently.
	→ ↓ resp effort
	→ Bag + mask.
	Pulse palpable throughout - O2 sats

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LPC 3/86/024

DATE

≈ 0330

85 ~~bpm~~ –100 over bag. ↓ Capillary refill

<2 secs. Pulse easily felt. Pupils

dilated + unresponsive

U+E: Na: 127   K+ = 2.8

Urea: 4.9

Creat: 28

Dextrostix ≈ 12 ∴ ~~NaCl~~ normal

saline.

D/W Dr McKeague RVH

– for transfer – ? cause of

respiratory arrest

? post

convulsion.

→ I.C.U. ≈ 0500

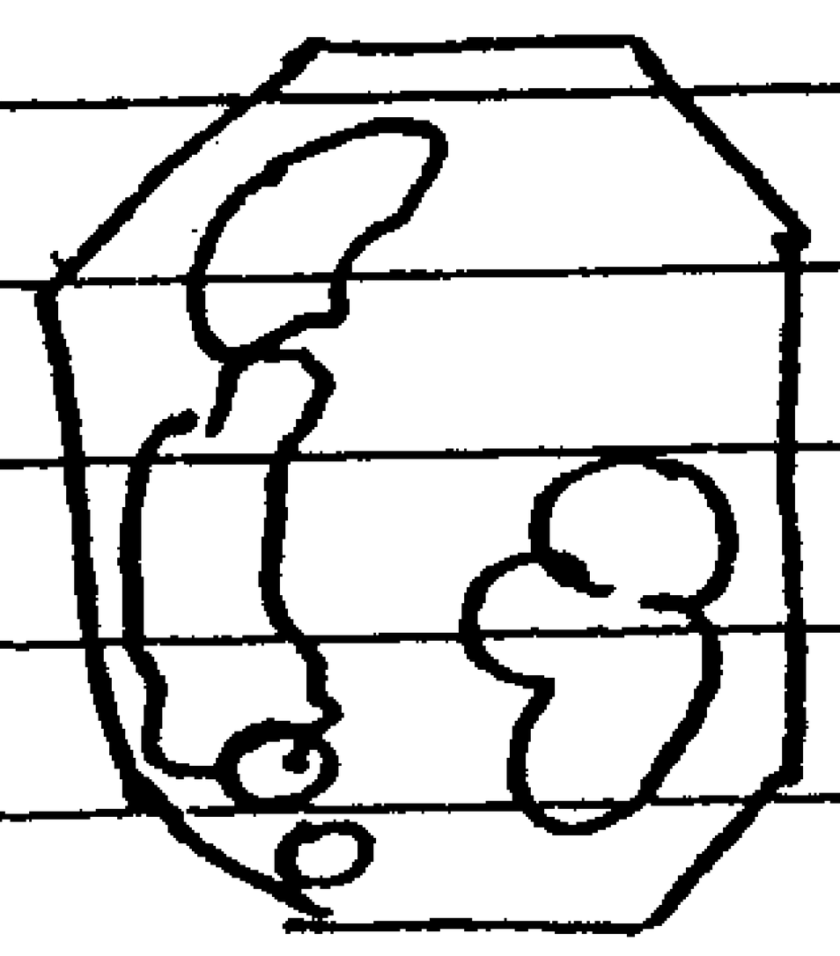
Claforan 1gm I.V. stat

Mannitol ~~[illegible]~~ 5gm I.V. over 1/2 hour

[signature]

0500: CXR: NAD.

AXR: air ++ ? colon + small intestine



[signature]

043-017-041

LC-SLT

E/1/X

ERNE HOSPITAL

SURNAME	FIRST NAME(S)	HOSPITAL NO.
CROWFORD	LUCY	123000

CONTINUATION SHEET

DATE	
13/4/00	Called to see Lucy who had a fit
2:58	according to nurse. Respiratory Rate 36/m
	HR. 140/m. Advised Rectal diazipam as
	she was still twitching her hands.
3:15.	Called Dr. O Donohoe to assess the patient
3:20	Dr O Donohoe came to see the patient
	had developed respiratory arrest and
	was making few respiratory efforts.
	Ambo bagging done, Cardiac + Pulse oximeter
	attached.
	Passed large foul smelling stool,
	NaCl .9% 500ml given over 60 minutes.
	Anaesthetist called put in Endotracheal tube
	Pupil fixed + non responding to light.
	Heart rate above 100 during the whole time
	BP. 90/60 on average. Did not developed
	cyanosis. O_2 Sat - 85% to 100%
	Catheterized (urinary).
4:45.	Shifted Adult I.C.U. to be shifted to
	ICU Ward in RBHSC by Dr O'Donohoe
	Murphy
14/4/00	Yesterday Dr Peter Crean rang from
	PICU RBHSC to enquire what fluid
	regime Lucy had been on. I told
	him a bolus of 100mls over 1
	hour followed by 0.18% NaCl /
	Dextrose 4% at 30 ml/hour. He said
	he thought that it had been NaCl 0.18%
	Dextrose 4% of 100 ml/hour. My recollection
	was of having said a bolus over
	1 hour and 30 ml/hour as above.
	*
	Lucy had had 50 mls of fluid PO
	before I saw her. I gave her 100 mls

LPC 3/86/024

23.

DATE

while waiting for the EMLA cream to take effect.
Maintenance ≈ 100 ml/kg ≈ 1000 ml
-(150 PO + 100 ml bolus) = 750 ≈ 30 ml/hour
Immediately pre transfer I had discussed IVF fluid rate for the journey. Dr Anderson calculated 40 ml/hour (? = 1000/24) but I thought continuing at 30 ml was appropriate.

J Donohoe

18/4/00
mg[10] :- PM - verbal report via PICU R.U.H.

ROM gastroenteritis + medical admission.

18/4/00 Blood culture: no growth
11[00] Urine: no significant growth (white top bottle)
Stool: sent to Microbiology re O157 [illegible]
[illegible] - no specimen received.
But Rotavirus +
parovirus negative

J Donohoe

24.