UKL FORM FOR TOTAL PARENTERAL NUTRITION SOLUTIONS (R.B.H.S.C.)

PATIENTS NAME ADAM STRAIN

PATIENTS WEIGHT 7

NO° OF BAGS REQUIRED 2

HOSPITAL NO° 364377

DATE OF BIRTH 4.8.91

ORDERED BY Dr

WARD Musgrave

FOR ADMINISTRATION ON 9/12/91

DATE 9/12/91 CENTRAL / PERIPHERAL

TICK EQUIRED BAG TYPE

NON STANDARD BAG		STANDARD	STANDARD ICU
SPECIFY REQUIRMENTS		CENTRAL/PERIPHERAL	CENTRAL ONLY
AMINO ACID: S17	140 ml	SYN 9 40ml/kg	SYN 17 20ml/kg
INTRALIPID 20%	70 ml	20ml/kg	20ml/kg
DEXTROSE 25%	500 ml	120ml/kg	80ml/kg
ELECTROLYTES			
SODIUM	21 mmol	3.0mmol/kg	3.0mmol/kg
POTASSIUM	14 mmol	2.4mmol/kg	2.0mmol/kg
PHOSPHATE	7 mmol	1.2mmol/kg	1.0mmol/kg
MAGNESIUM	1.4 mmol	0.2mmol/kg	0.2mmol/kg
CALCIUM	4.5 mmol	0.75mmol/kg	0.75mmol/kg
M.V.I. PAED	5. ml	0-0.999kg 1.5ml / 1-3kg 3.25ml	over 3kg 5ml
ADDITRACE	ml		
ZINC (55.5umol/ml)	ml		
SODIUM LACTATE	mmol		
C.A.C.	581.		

.90 Kcals/ml

ROYAL VICTORIA HOSPITAL BELFAST

09/

--- DUPLICATE LABEL ---

Parenteral Nutrition Solution

Patient Id: 364377 Bag Id: 0007
Name: ADAM STRAIN
Loc: MUSGRAVE Billing Code: 706
Physician: DR MAGILL Order Number: 03091291
Order Volume: 728 ml

SYNTHAMIN 17	-	140 ml
INTRALIPID 20%	-	70 ml
DEXTROSE 25%	-	500 ml

--Additives-- -Dose-
M.V.I. PAED 5.00 ml

** Approximate Electrolyte Totals **

Na+	21.00 mmol	Cl-	32.80 mmol
K+	14.00 mmol	PO4--	7.00 mmol
Ca++	4.50 mmol		
Mg++	1.40 mmol		

Nitrogen Content	2.3 gm	Protein Calories	59 Kcal
Non-Protein Calories	640 Kcal	Dextrose Calories	500 Kcal
Total Calories	699 Kcal	Lipid Calories	140 Kcal

Prep. By:_____ Date 09/12/91 Time 11:32:

Do Not Use After 17:32 on 12/12/91

Delivery Time To Patient: 9/12/91

Solution contains 100 ml overfil

INFUSE THROUGH CENTRAL VEIN * STORE IN FRIDGE *

AS - ROYAL

049-012-084