ROYAL BELFAST HOSPITAL FOR SICK CHILDREN

Fluid Balance and I.V. Prescription Sheet

Date 14-3-92

Weight ..... Kg

Name	D.O.B.	Hosp. No.
Adam Strain		

TIME (hr)	INTAKE						OUTPUT			
	INTRAVENOUS				ORAL		Urine	Aspirate or Vomit	Stool	Comment
	1 Tifeeds Level	Amount	2 TPN Level	Amount	Fluid	Amount				
08										
09							Pu	m	Bo	very loose.
								out		
11.00										
12.00										
13.00										
14.00		150 mls								
15.00								tt.		Vomit-medic
16.00		Plus.					P.U 120ml.			
17.00		32						small.		
18.00				341			120		Bo 18.30	
19.00										
20.00										
21.00		103.		413.						
22		117		425						
23										
24.00							150			
01.00		185		494						
02.00 Stopped for		Rest								
03.00										
04.00				507						
05.00	Restarted									
06.00				518				Mixed fed.	loose B/O	
07.00		36		523			220			

Total Intake			Total Output			
Intravenous 523 ml	Oral 372 ml		Urine 610 ml + Mel	Aspir^{n} ..... ml	No. of Vomits 3	No. of Stools K3

24 – Hour INTAKE 895 ml

24 – Hour OUTPUT ..... ml

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