

ROYAL BELFAST HOSPITAL FOR SICK CHILDREN

FLUID BALANCE

Name: Adam Strain Hospital No. 364371 D.O.B. 4-8-91

TIME	INPUT										OUTPUT						COMMENT				
	INTRAVENOUS										ASP/VOMIT		URINE		STOOL TOTAL	DRAIN					
	Morphine	5% Dext	50% Gluc	TPN							Amt.	Total	Amt.	Total							
00.00	28	2	131	19	3	4								Supra pubic	27	27	11	11	✓	9 lines	
01.00	27	3	112	38	19	7								Drainage in rectum	17	17			✓	9 lines	
02.00	25	5	92	68	17	9								Small stool					✓	E. Hawtho	
03.00	23	7	73	77	13	13					9	19	10	27	20	47	14	24	✓	9 lines	
04.00	22	8	43	107	9	17	150	-								40	87	13	37	✓	9 lines
05.00	20	10	25	125	5	21							2	29							
06.00	20	10	50	142	0	26	118	32			11	30	10	39	6	93	6	43	✓	F. Clene	
07.00	19	11	36	156			101	49					14	53					✓	F. Clene	
08.00	18	12	50	180			78	72					20	73	12	105	20	63	✓	F. Clene	
09.00	17	13	38	192			64	86											✓	F. Clene	
10.00	15	15	22	208			46	104			14	44	26	99	10	115	12	75		dry nappy 0.05 wet nappy 0.08	
11.00	14	16	40	225			28	122													
Intravenous Total										26											
Oral Total										122											
DAY TOTAL INTAKE										225											
										16											
										389											
Intravenous Total										214											
Oral Total										75											
DAY TOTAL OUTPUT										289											

26
122
225
16
389

Intravenous Total
Oral Total
DAY TOTAL INTAKE

214
75
289

Intravenous Total
Oral Total
DAY TOTAL OUTPUT

26
122
225
16
389

82
5/10/91

ROYAL BELFAST HOSPITAL FOR SICK CHILDREN

FLUID BALANCE

Name: ADAM STRAIN Hospital No. 364371 D.O.B. 4/8/91

TIME	INPUT								OUTPUT				COMMENT
	INTRAVENOUS								ASP/VOMIT	URINE	STOOL	DRAIN	
	Morphine	5% Dext	50% Gluc	TPN					Amt. Total	Amt. Total	TOTAL		
00.00	12	1.5	50	17	50	18				13	13		✓ 9 lines
01.00	11	3	30	37	30	38				10	23		✓ 9 lines
02.00	8	6	100	54	100	55			10	10	5	28	✓ 9 lines
03.00	7	7	83	71	82	73			12	12	5	33	✓ 9 lines
04.00	6	8	68	88	68	91				5	38		✓ 9 lines
05.00	5	9	50	96	50	109				5	43		✓ 9 lines
06.00	3	11	35	111	35	127					43		✓ 9 lines
07.00	50	12	20	126	20	142							✓ 9 lines
08.00	50	12	100	144	100	160			17	7	50		✓ 9 lines
09.00	49	12	82	162	82	178			19				✓ 9 lines
10.00	49	12	64	180	64	196				5	55		✓ 9 lines
11.00	48	13	46	196	46	214					120	50	✓ 9 lines
Intravenous Total								423					
Oral Total													
NIGHT TOTAL INTAKE								423					
Urine Total								180					
Other Total								85					
NIGHT TOTAL OUTPUT								285					

37 ml/h

INTRAVENOUS FLUID PRESCRIPTION SHEET

mls/kg

NUTRITION PRESCRIPTION

Day of regime.....[illegible]

24 HR. OUTPUT

051-019b-083