

ROYAL BELFAST HOSPITAL FOR SICK CHILDREN
Fluid Balance and I.V. Prescription Sheet

Date...10.12.91.....

Weight...7.3.....Kg

Name

adam strain

D.O.B.

Hosp. No.

TIME (hr)	INTAKE						OUTPUT				
	INTRAVENOUS				ORAL		Urine (ml)	Aspirate (ml)	Stool (ml)	Conc. (g)	
	TPN Level	Amount	2 Level	Amount	Fluid	Amount					
08.00	100	240									
09.00	85	270									
10.00											
11.00											
12.00											
13.00											
14.00											
15.00											
16.00	85	240									
17.00	120	270									
18.00	100	290					15				
19.00	80	310			Clear Fluid	60 ml	15		30	GREEN	
20.00					Clear Fluid	60 ml			30	Loose	GREEN
21.00	100	380					54	54	30	Loose	GREEN
22.00	85	395					20				
23.00	65	415									
24.00	40	440									
01.00	20	460									
02.00	150	480					15				
03.00	123	503			Dilute	110mls					
04.00	95	535									
05.00	70	560							310		
06.00	48	588			Dilute	30mls	5	164			
07.00	160	615							8ml		
Total Intake						Total Output		No. of Vomits		No. of Stools	
Intravenous.....ml						Oral.....ml		Urine.....ml		Aspirate.....ml	
615						410		206		4	
24 - Hour INTAKE						24 - Hour OUTPUT					
1025						378					
								051-022-096			

ROYAL BELFAST HOSPITAL FOR SICK CHILDREN
Fluid Balance and I.V. Prescription Sheet

Date: 11.12.91

Weight:Kg

CH 364377 K
ADAM STRAIN

S 04/08/91

WD/OP CONSULTANT

180
200
400
124
120
244
190
104
116
117
Intake 922 1000ml

TIME (hr)	INTAKE						OUTPUT				
	INTRAVENOUS				ORAL		Urostromony Urine	Aspirate or Vomit	Suprapub Stool	Comment	
	1 Level	Amount	2 Level	Amount	Fluid	Amount					
08.00	120	10			Oral fluid	80ml	30				
09.00	113	37									
10.00	90	10									
11.00	83	10									
12.00											
13.00											
14.00											
15.00	110	10									
16.00	75	20.6			Oral	80ml					
17.00	65	22.1									
18.00	27	244					14	104		30 loose	
19.00	100	261					12	116			
20.00	75	286			Oral	130ml					
21.00	50	311					10				
22.00	25	336					8	(52)			
23.00	150	361					-	117			
24.00	125	396			wretching +++		-	-			
01.00	600	421			(400) Dyle	10mls	10				
02.00	75	446					-				
03.00	50	471					10				
04.00	25	495					30				
05.00	150	520					10				
06.00	150	545			(480) Dyle	80 (265)	20	87		BNDO	
07.00	75	570									
Total Intake				480		Total Output		+		No. of Vomits	
Intravenous.....ml				Oral.....ml		Urine		Aspir ⁿ		No. of Stools	
						265		604		X3 Large	
24 - Hour INTAKE						24 - Hour OUTPUT					
1050						879					

Name..... Date...../...../..... Hosp. No..... Wt..... Kgs.

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INTRAVENOUS FLUID PRESCRIPTION CHART

AMOUNT (mls)	TYPE OF FLUID	NAME and AMOUNT of ADDITIVES	RATE mls/hr	TIME Start Finish	Prescribed by	ERECTED BY

<u>TOTAL VOL.</u> Per.....Hrs.mls.mls/kg		<u>TOTAL ENERGY</u>kcal kcal/kg	
<u>PROTEIN</u> Vol. Cals.		<u>DEXTROSE</u> Conc. Vol. Cals.	
		<u>FAT</u> Conc. Vol. Cals.	

Amino Acids (grams)	Nitrogen (grams)	Nitrogen/Cal Ratio	CHO (grams)	Other Additives
Fat (grams)	NaCl mmols	Na Lactate mmols	K + mmols	
Cl - mmols	Ca + + mmols	Mg + + mmols	PO ₄ = mmols	
Addamel (mls)	Solvito (mls)	Vitlipid (mls)	Critical Ag. Conc.	

AS - ROYAL

051-022-097a