ROYAL BELFAST HOSPITAL FOR SICK CHILDREN

Fluid Balance and I.V. Prescription Sheet

Date 12-12-91

Weight .....Kg

Name	D.O.B.	Hosp. No.
Adam Strain	4-8-91.	364377

TIME (hr)	INTAKE						OUTPUT			
	INTRAVENOUS				ORAL		Urostomy Urine R L	Aspirate or Vomit	Stool Supp this	Comment
	1 Level	Amount	2 Level	Amount	Fluid	Amount				
08.00							36			
[illegible]					B/Food	100 ml				
[illegible]0	160									
11.00										
12.00										
13.00										
14.00										
15.00										
16.00										
17.00										30 LOOSE
18.00	107	290			3/Feed	90ml	36	Large vomit		
19.00	77	320					8 –			
20.00	47	350.					12 –			
21.00	100	380					– –			
22.00	70	410.					22 – [redacted]			
23.00	50	430					12 – 45			
24.00	40	460								
01.00	75	535			C.Fluid	30	32 –	MED		
02.00	45	505.					15 – 48			
03.00	100	535								
04.00	70	565								
05.00	40	595.					30 – 27			
06.00	150	620			Fluid	80	13 –	MED	B/O loose.	
07.00	75	645.					10 – 30			

Total Intake		Total Output			
Intravenous 645 ml	Oral 380 ml	(R) ~~Urine~~ 236 ml	(L) Aspirn 206 ml	No. of Vomits X4	No. of Stools X2.
24 – Hour INTAKE 1025 ml		24 – Hour OUTPUT [illegible] ml			

051-022a-098

AS - ROYAL

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

INTRAVENOUS FLUID PRESCRIPTION CHART

	AMOUNT (mls)	TYPE OF FLUID	NAME and AMOUNT of ADDITIVES	RATE mls/hr	TIME Start	TIME Finish	Prescribed by	ERECTED BY
1		TPN	—	30.				
2								
3								
4								

TOTAL VOL. .....mls.

Per.....Hrs. .....mls/kg

TOTAL ENERGY .....kcals

..... kcals/kg

PROTEIN		DEXTROSE	Conc.	FAT	Conc.
Vol.	Cals.	Vol.	Cals.	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.	