ROYAL BELFAST HOSPITAL FOR SICK CHILDREN

Fluid Balance and I.V. Prescription Shee

CH 364377 Vol 3 Page: 187

Date 4-4-92

Weight.....Kg

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

800 Hulk
400 5% Dextrose } orally.

TIME (hr)	INTAKE						OUTPUT			
	INTRAVENOUS				ORAL		Urine	Aspirate or Vomit	Stool	Comment
	1 Level	Amount	2 Level	Amount	Fluid	Amount				
08.00							Pu	30 ↩		Bloody
09.00										
10.00					(Sp Feed 50					
11.00					Juice 100					
12.00					Weetabix 1/2					
13.00					day 1		Pu			
14.00										
15.00					(50 Syringe)		Pu			
16.00										
17.00										
18.00										
19.00							50			
20.00										
21.00					N/C					
22.00						170	30			
23.00										
00.00						256				
01.00										
02.00						409				
03.00										
04.00						561				
05.00										
06.00						682	200			Soft yellow green
07.00						790				

Total Intake		Total Output			
Intravenous.....ml	Oral 940 .....ml	Urine Pu 270 + 3 .....ml	Aspir^{n} .....ml	No. of Vomits	No. of Stools x3 .....

24 – Hour INTAKE .....ml

24 – Hour OUTPUT .....ml

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

CH 364377 Vol 3 Page: 188

INTRAVENOUS FLUID PRESCRIPTION CHART

	AMOUNT (mls)	TYPE OF FLUID	NAME and AMOUNT of ADDITIVES	RATE mls/hr	TIME Start Finish	Prescribed by	ERECTED BY
1							
2							
3							
4							
5							
6							

PARENTERAL NUTRITION PRESCRIPTION CHART

TOTAL VOL.

Per.....Hrs. .....mls.

.....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.	