

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

Date 31.5.92.

Weight.....Kg

TEMP

4.00 39.8°

7.00 38.0°

Name ADAM STRAIN	D.O.B. <u>4/8/91</u>	Hosp. No. 364377
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TIME (hr)	INTAKE						OUTPUT			
	INTRAVENOUS				ORAL		Urine	Aspirate or Vomit	Stool	Comment
	1 Level	Amount	2 Level	Amount	Fluid	Amount				
10.00					Milk	100mls	PU		130	Green loose
11.00										
12.00					Milk	100mls	PU		130	Green loose
13.00					Milk	100mls				
14.00					Milk	100mls	PU			
15.00										
16.00					Milk	100mls			50+	Loose Green Stool
17.00							PU		30+	Loose Green Stool
18.00					Water	200mls				
19.00										
20.00					Milk	100mls				
21.00										
22.00										
23.00										
24.00										
01.00										
02.00					Water	200mls				
03.00										
04.00										
05.00										
06.00										
07.00					Milk	200	PU			
Total Intake					Total Output		No. of Vomits		No. of Stools	
Intravenous.....ml					Oral <u>1310</u>ml		Urine <u>25</u>ml		Aspir ⁿml	
24 - Hour INTAKE					24 - Hour OUTPUT					
<u>1310</u>ml									053-011h-030 ml	