# CHILDREN'S HOSPITAL

HOSPITAL NUMBER: 507 (1-3)

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|---|---|
| NAME: STRAIN ADAM | UNIT NUMBER: 364377 (4-13) |
| ADDRESS: [redacted] | (14) |
| BIRTH SURNAME | SEX: M - MALE, F - FEMALE: M (16) |
| DATE OF BIRTH: 04 08 91 (17-22) | |

OCCUPATION — NOTE: Where patient is a 'child', 'at school' or a 'housewife' please state occupation of head of household (23)

MARITAL STATUS — 1 - Single; 2 - Married; 3 - Widowed; 4 - Other; 5 - Not Known: 1 (24)

RELIGION — 1 - Church of Ireland; 2 - Presbyterian; 3 - Methodist; 4 - Roman Catholic; 5 - Jewish; 6 - Other (specify); 7 - Not Known; 9 - None

DATE [redacted]

ADMISSION TYPE — 1 - Emergency; 2 - Waiting; 4 - Booked (Non Maternity); 5 - Booked (Maternity); 6 - Born in Hospital

DATE PLACED ON WAITING LIST OR BOOKED (NON MATERNITY) (33-38)

ACCIDENT — 1 - Home - Burns; 2 - Home - Scalds; 3 - Home - Falls; 4 - Home - Poisoning, Inhalation; 5 - Home - Poisoning, Other; 6 - Home - Other; 7 - RTA; 8 - School; 9 - At Work; 10 - Sport; 11 - Civil Disturbance; 12 - Assault; 13 - Other; 14 - Not Applicable (39)

CONSULTANT: DR M SAVAGE — 6170 (40-43)

No. OF FORM IN BATCH (44-46)

OWN DOCTOR

DR SCOTT
THE SURGERY
9 BROOK STREET
HOLYWOOD

TELEPHONE: [redacted]

RELATIVE OR OTHER PERSON FOR CONTACT IN EMERGENCY

MRS STRAIN

[redacted]

TELEPHONE: MOTHER

PREVIOUS ATTENDANCES

YES / NO

WARD: MUSG

ADMITTED BY: JL

TIME: 10:41



054-011-026

AS - ROYAL