

EASTERN HEALTH AND SOCIAL SERVICES BOARD

N.H.N. REUSE

UNIT OF MANAGEMENT

HOSPITAL/COMMUNITY LIAISON: GENERAL NURSING SERVICES

FACILITY Medical Wd/Dept. Musgrave
NAME Adam Strawn CONSULTANT M. Savage
ADDRESS [REDACTED] GEN. PRACT. Dr Scott
The Surgery 9, Black Street H'head
Date of Adm. 26-11-92
Date of Disch. 4-12-92
Date of Birth 4-8-91 School _____

DIAGNOSIS/CONDITION Renal failure due to renal dysplasia. Frequent UTI

TREATMENT RECEIVED

V. K. [REDACTED] usual medication - sod bicMEDICATION ON DISCHARGE Cisapride 0.2mg TID.

AIDS/EQUIPMENT ORDERED — YES/NO

OTHER SUPPORTING SERVICES REQUIRED YES/NO

This been seen by child psychologist re vomiting & development. Developing well
still having some vomiting. Will review again regarding this

FURTHER RELEVANT INFORMATION

Rx 15/12/92 renal clinic
Mum has feeding pump as loan from ward. H/V Mrs Muirhead.
getting one for use at home.

MESSAGE BY TELEPHONE TO R (YES/NO)SIGNED S/N K^{MC} Auley DATE 4-12-92
(SISTER/CHARGE NURSE)

REFERRAL ACTION TAKEN _____

054-036-083

AS - ROYAL