

	Date Comm.	DRUG (Block letters please)	DOSE	Time of Administration									Method and other Instructions	SIGNATURE	Discontinued	
				AM 6	AM 8.30	MD 12	PM 12.30	PM 5.30	PM 6	PM 9.30	MN 12	Other Times			Date	Initials
G																
H																
I																
J																
K																
L																
M																
N																
O																
P																
Q																
R																
S																
T																
U																

REGULAR PRESCRIPTIONS

DRUG SENSITIVITY

	Date Comm.	DRUG (Block letters please)	DOSE	Time of Administration									Method and other Instructions	SIGNATURE	Discontinued	
				AM 6	AM 8.30	MD 12	PM 12.30	PM 5.30	PM 6	PM 9.30	MN 12	Other Times			Date	Initials
I																
V																
K																

Date	Details	Initials

056003004

Ward	Name of Patient	Age	Hospital Number	Consultant
mm	Adam Serram	24 2		Dr. Savage

AS - ROYAL

STERN HEALTH & SOCIAL SERVICES BOARD
YAL BELFAST HOSPITAL FOR SICK CHILDREN

DESCRIPTION SHEET

PARENTERAL DRUGS
REGULAR PRESCRIPTIONS

DRUG SENSITIVITY

Date Comm.	DRUG (Block letters please)	DOSE	Time of Administration									Method and other Instructions	SIGNATURE	Discontinued	
			AM 6	AM 8.30	MD 12	PM 12.30	PM 5.30	PM 6	PM 9.30	MN 12	Other Times			Date	Initials
11/1/74	PARACETAMOL	135mg										IP	RS		
11/1/74	CASISTAMOLIN	15mg										IP	RS		

Date Given	DRUG (Block letters please)	DOSE	Time of Admin.	Method of Admin.	SIGNATURE	Given by Initials

Ward	Name of Patient		Number															
	Adam Strain																	
Date 1/24/94	REGULAR PRESCRIPTIONS — DRUG RECORDING SHEET																	
	6 a.m.		8.30 a.m.		12 noon		12.30 p.m.		5.30 p.m.		6 p.m.		9.30 p.m.		12 mn.		Other Times	
									A									
									JK									

NC 766

DESCRIPTION SHEET

PARENTERAL DRUGS
REGULAR PRESCRIPTIONS

DRUG SENSITIVITY

Date Comm.	DRUG (Block letters please)	DOSE	Time of Administration								Method and other Instructions	SIGNATURE	Discontinued	
			AM 6	AM 8.30	MD 12	PM 12.30	PM 5.30	PM 6	PM 9.30	MN 12	Other Times		Date	Initials
21/10/01	VANCOMYCIN	125mg									IP	hs		
21/10/01	CISAPRIDE	15mg									IP	hs		

Date Given	DRUG (Block letters please)	DOSE	Time of Admin.	Method of Admin.	SIGNATURE	Given by Initials

[illegible]

REGULAR PRESCRIPTIONS

DRUG SENSITIVITY

[illegible]

Date	Details	Initials

AS - ROYAL

056-003-008

Ward	Name of Patient	Age	Hospital Number	Consultant
W11	Adam Serrano	21 2	[REDACTED]	Dr. Savage

	Date Comm.	DRUG (Block letters please)	DOSE	Time of Administration									Method and other Instructions	SIGNATURE	Discontinued	
				AM 6	AM 8.30	MD 12	PM 12.30	PM 5.30	PM 6	PM 9.30	MN 12	Other Times			Date	Initials
G	28/3	SOD. BICARBONATE	2.5mls		✓		✓	✓		✓			PO	RK.		
H	28/3	FERROMYN	5ml	✓									PO	RK.		
I	28/3	1 alpha	2mls	✓									PO	RK.		
J	28/3	POTASSIUM CHLORIDE	5mls	✓									PO	RK.		
K	28/3	KEEFLEX 5mls	10xmg							✓			PO	RK.		
L	28/3	KETOVITE	1tab.	✓				✓		✓			PO	RK.		
M																
N																
O																
P																
Q																
R																
S																
T																
U																

REGULAR PRESCRIPTIONS

11-30-07

	Date Comm.	DRUG (Block letters please)	DOSE	Time of Administration									Method and other Instructions	SIGNATURE	Discontinued	
				AM 6	AM 8.30	MD 12	PM 12.30	PM 5.30	PM 6	PM 9.30	MN 12	Other Times			Date	Initials
V																
W																
X																
Y																
Z																

Date	Details	Initials

AS - ROYAL

056-003-010

Ward	of Patient	Age	Hospital Number	Consultant
WSG BAUC	ADAM	29 years		DR. Savage

MSR
20 F
AD

EASTERN HEALTH & SOCIAL SERVICES BOARD
ROYAL BELFAST HOSPITAL FOR SICK CHILDREN

PRESCRIPTION SHEET

Date Comm.	DRUG (Block letters please)	DOSE	Time of Administration										Method and other Instructions	SIGNATURE	Discontinued	
			AM 6	AM 8.30	MD 12	PM 12.30	PM 5.30	PM 6	PM 9.30	MN 12	Other Times	Date			Initials	
28/12	VANCOMYCIN	125mg														
28/12	GENTAMYCIN	15mg														

Date Given	DRUG (Block letters please)	DOSE	Time of Admin.	Method of Admin.	SIGNATURE	Given by Initials

	Date Comm.	DRUG (Block letters please)	DOSE	Time of Administration									Method and other Instructions	SIGNATURE	Discontinued	
				AM 6	AM 8.30	MD 12	PM 12.30	PM 5.30	PM 6	PM 9.30	MN 12	Other Times			Date	Initial
G	28/3	SOD. BICARBONATE	2.5ml		✓		✓	✓		✓			PO	RK.		
H	28/3	FERROMYN	5ml	✓									PO	RK.		
I	28/3	1 alpha 2ml	2ml	✓									PO	RK.		
J	28/3	POTASSIUM CHLORIDE	5ml	✓									PO	RK.		
K	28/3	KEFLEX 5ml. a.m.	10x 100mg							✓			PO	RK.		
L	28/3	KETOVITE	1 tab.	✓			✓			✓			PO	RK.		
M																
N																
O																
P																
Q																
R																
S																
T																
U																

REGULAR PRESCRIPTIONS

DRUG SENSITIVITY

	Date Comm.	DRUG (Block letters please)	DOSE	Time of Administration									Method and other Instructions	SIGNATURE	Discontinued	
				AM 6	AM 8.30	MD 12	PM 12.30	PM 5.30	PM 6	PM 9.30	MN 12	Other Times			Date	Initials
V																
W																
X																
Y																
Z																

Date	Details	Initials

AS - ROYAL

056-003-012

Ward	Name of Patient	Age	Hospital Number	Consultant
USGRAND	ADAM	24 years		DR. Savage