ROYAL B[illegible] AST HOSPITAL FOR SICK C[illegible] DREN

PATIENT'S NAME Adam Stan WARD mugrae

ADDRESS [redacted]

HOSP. NO. 364377 TEL. NO.

SEX

AGE D.O.B. 4/8/91 RELIGION/BAPTISM

CONSULTANT Dr. Savage

NAME KNOWN BY

NEXT OF KIN (Relationship) [redacted]

NAME S/N S/A

ADDRESS

TEL NO. Day Night

WHO ACCOMPANIED PATIENT

WHO MAY CONSENT TO TREATMENT

SCHOOL/PLAYGROUP/NURSERY

056-009-021

AS - ROYAL

REASON FOR ADMISSION

PARENTS/PERCEPTION OF ADMISSION

DATE AND TIME OF ADMISSION 2/9/94

PREVIOUS ILLNESSES/HOSPITAL ADMISSIONS/CONTACT WITH INFECTIOUS DISEASES

PREVIOUS ILLNESSES

HOSPITAL ADMISSIONS

RECENT CONTACT WITH INFECTIOUS DISEASES

IMMUNISATIONS RECEIVED

CURRENT MEDICATION

KNOWN ALLERGIES

DENTURES (Include crowns, plates) loose teeth

OTHER PROSTHESIS

DISCHARGE DETAILS

GP LETTER YES/NO

O.P. APPOINTMENT ....

MEDICATION YES/NO

COMMUNITY REFERRAL

HEALTH VISITOR

DISTRICT NURSE

SOCIAL WORKER

OTHERS

	USUAL/NO AL ROUTINES	NUI NG ASSESSMENT
COMMUNICATING AND SPECIAL NEEDS		
MAINTAINING A SAFE ENVIRONMENT		
BREATHING AND CIRCULATION		
CONTROLLING BODY TEMPERATURE		
EATING AND DRINKING		
ELIMINATING		
POSTURE AND MOVEMENT		
REST AND SLEEP		
PERSONAL HYGIENE		
DRESSING		
PLAY AND EDUCATION		
EXPRESSING SEXUALITY		
MEETING SPIRITUAL NEEDS		
SOCIAL HISTORY		

VITAL SIGNS

T. P.

R. B.P.

HT. WT.

URINALYSIS

CONDITION OF SKIN HAIR AND TEETH

SIGNATURE OF ACCOUNTABLE NURSE

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DATE AND TIME

ROYAL BELFAST HOSPITAL FOR SICK CHILDREN

DATE/TIME	EVALUATION	SIGNATURE	ADDITIONAL INFORMATION	SIGNATURE
2/9/94.	Adam was admitted for commencement of dialysis via Rac + machine mum lined the machine and put Adam on the Rac +. Line change + heparinisation carried out fibrin +++	J. Clinger		
3/9/94.	Dialysis as listed No problems Extended x2 Tube feed running as listed	K Midgley		
3/9/94.	Settled today - For Rac x overnight as arranged. To be commenced on oral floxapen for redness around exit site Commenced on floxapen Very settled night	C. Wilders.		
4.9.94	No problems	N. Laughlin		
4.9.94.	Settled this am. Home today. R/V as arranged	C. Wilde.		

056-009-023 AS - ROYAL

PATIENT'S NAME Adam Starr.

REG. No. [redacted]

WNC 753/OS 3779

ROYAL BELFAST HOSPITAL FOR SICK CHILDREN

DATE/TIME	EVALUATION	SIGNATURE	ADDITIONAL INFORMATION	SIGNATURE

PATIENT'S NAME ____________________

REG. No. ____________________

AS - ROYAL

056-009-024