

ROYAL BELFAST HOSPITAL FOR SICK CHILDREN

Fluid Balance and I.V. Prescription Sheet

Date 24.8.94

Weight.....Kg

Name

D.O.B.

Hosp. No.

Adan
Strain

TIME (hr)	INTAKE						OUTPUT			
	INTRAVENOUS				ORAL		Urine	Aspirate or Vomit	Stool	Comment
	1 Level	Amount	2 Level	Amount	Fluid	Amount				
08.00					FASTING					
09.00										
10.00										
11.00										
12.00										
13.00	Returned for theatre									
14.00		164								1 vst
15.00		10276								UNBitten
16.00		459								UNBitten
17.00		545								UNBitten
18.00		596								UNBitten
19.00		658	ccpd complete							UNBitten
20.00		774	35415							
21.00			102%							
22.00		964	+ 63 retained							Lancalund
23.00										
24.00		1094								
01.00		1182								
02.00		1276								
03.00		1358								
04.00		1446								
05.00										
06.00										
07.00		1734								UNBitten
Total Intake 8am				1809	Total Output					
Intravenous.....ml					Oral.....ml		Urine	Aspir ⁿ	No. of Vomits	No. of Stools
							ml	ml		

24 - Hour INTAKE

.....ml

24 - Hour OUTPUT

.....ml

Name..... Date...../...../..... Hosp. No..... Wt.....Kgs.

INTRAVENOUS FLUID PRESCRIPTION CHART

	AMOUNT (mls)	TYPE OF FLUID	NAME and AMOUNT of ADDITIVES	RATE mls/hr	TIME		Prescribed by	ERECTED BY
					Start	Finish		
1	500ml	No 18 sol ⁿ	_____	8ml/hr			Libby	M. Baker
2	500 ml	No 18 sol ⁿ	_____	8ml/hr			Libby	M. Baker
3								
4	500 220 mls,	HPPF		8ml/hr 100ml/hr			Libby	M. Baker
5								
6								

PARENTERAL NUTRITION PRESCRIPTION CHART

<u>TOTAL VOL.</u> Per.....Hrs.mls.mls/kg		<u>TOTAL ENERGY</u>kcal kcal/kg	
<u>PROTEIN</u>		<u>DEXTROSE</u>	<u>FAT</u>
Conc.		Conc.	Conc.
Vol.	Cals.	Vol.	Cals.

Amino Acids (grams)	Nitrogen (grams)	Nitrogen/Cal Ratio	CHO (grams)	Other Additives
Fat (grams)	NaCl mmols	Na Lactate mmols	K + mmols	
Cl- mmols	Ca + + mmols	Mg + + mmols	PO ₄ = mmols	
Addamel (mls)	Solvito (mls)	Vitlipid (mls)	Critical Ag. Conc.	