

NORTHERN IRELAND HEALTH AND PERSONAL SOCIAL SERVICES

Royal Group Hospitals TRUST/DMU

HOSPITAL/COMMUNITY LIAISON : GENERAL NURSING SERVICES

FACILITY RBHSC

NAME Adam Shraun

ADDRESS [REDACTED]

Wd/Dept. Musgrave / Allen

CONSULTANT Dr Savage

GEN. PRACT. Dr Scott

Hollywood H/c

Date of Adm. 29.6.95

Date of Disch. 11/7/95

School

Date of Birth 4.8.91

DIAGNOSIS/CONDITION Pyrexia 2° to infected gastrostomy button

TREATMENT RECEIVED Antibiotic therapy

Therapy + Tube feeds as listed

Dr Savage

NURSING SERVICES REQUIRED As per Dr's letter

MEDICATION ON DISCHARGE As per Dr's letter

DS/EQUIPMENT ORDERED — YES/NO

OTHER SUPPORTING SERVICES REQUIRED YES/NO

FURTHER RELEVANT INFORMATION

R/v Friday on ward for blood transfusion

R/v by Dr Savage as arranged

MESSAGE BY TELEPHONE TO _____ (YES/NO)

SIGNED S/n C. Nettle Cudva DATE 11/7/95
(SISTER/CHARGE NURSE)

REFERRAL ACTION TAKEN _____