Winchester

[redacted]

ROYAL HOSPITALS

HOSPITAL No. 364377

CASE NOTE DISCHARGE SUMMARY

Dear Doctor .....

I wish to advise you that your patient was admitted to hospital and is now being discharged/transferred.

.....

Referral No.

Contract No.

* TICK OR DELETE AS APPROP:

Patient's Name *Mr ☐ Mrs ☐ Miss ☐ Ms ☐

Name Adam Strain

Address No 364377

Postcode .....

D.O.B. / / *Ward* ..... *Male** ☐ *Female** ☐

⇧ *Please place addressograph label here on all 4 sheets* ⇧

	ADMISSION	TRANSFER	DISCHARGE
DATE	22/6/95		
CONSULTANT NAME	M SAVAGE		[redacted]
WARD	Musgrave		

		CODE
PRINCIPAL DIAGNOSIS ON TRANSFER /DISCHARGE * **delete as appropriate*	Chronic Renal failure	
OTHER DIAGNOSIS	Obstructive Uropathy	
OTHER DIAGNOSIS	Gastric [illegible]	

	DATE
PRINCIPAL PROCEDURE	
SECONDARY PROCEDURE	

DRUGS ON DISCHARGE (IF MORE THAN 8, use a separate sheet FOR ALL DRUGS)

DRUG (approved name in caps)	DOSE & FREQUENCY	LENGTH OF COURSE	ADDITIONAL INFORMATION FROM PHARMACIST
Mupirocin (Bactroban) Oint to apply to gastrostomy exit site			
Flucloxacillin	250mg oral QID	exit site infection	
Cisapride	5mg (5ml) tds.		
+ usual medication.			

COMMENTS Increasing vomiting + poor energy

New Rx as above + increase dialysis dose to 700 mls per cycle

Method of Admission	
Emergency	
Waiting list	
Outpatients	

Review Arrangements ..... Further Summary Letter Yes ☐ No ☑

Yours sincerely ..... *(signature)* Date 22/6/95

Name in Block Letters..... Consultant ☑ Senior Reg ☐ Reg ☐ SHO ☐ JHO ☐

Complications

AS – ROYAL

057-054-112