[redacted]

ROYAL HOSPITALS

CASE NOTE DISCHARGE SUMMARY

HOSPITAL No. 364377

Dear Doctor .....Smt.....

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 [redacted]

Postcode.....

D.O.B. 4/5/79 *Ward* MW *Male** ☑ *Female** ☐

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

	ADMISSION	TRANSFER	DISCHARGE
DATE	3/9/94		5.9.94
CONSULTANT NAME	P.L SLUNGE	/	[redacted]
WARD	MW		

PRINCIPAL DIAGNOSIS ON TRANSFER /DISCHARGE * **delete as appropriate*		CODE
OTHER DIAGNOSIS	Chronic Renal Failure - Peritoneal Dialysis	
OTHER DIAGNOSIS		

		DATE	
PRINCIPAL PROCEDURE	Home Peritoneal Dialysis training		
SECONDARY 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
$NaHCO_3$ 8.4% Soln	15mls QDS		
Ferrowyn	5mls daily		
1 alpha Vitamen D	400 nanogms daily		
Kay Cee L Syrup	5 m mols daily		
Ketovite Tab	1 tds		
Keflex	125mg nocte		

COMMENTS Chronic Renal failure 2° to reflux nephropathy

Commencing on home peritoneal dialysis - trained by Dialysis Nurse Specialist who will visit at home

Method of Admission	
Emergency	
Waiting list	
Outpatients	

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

Yours sincerely ..... J Mauro Saragt ..... *(signature)* Date ..... 17/10/94 .....

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

Complications 1.

2.

AS - ROYAL

057-098-173