

REPORT MOUNT SHEET

SURNAME

NAME

HOSPITAL No.

D.O.B.

(Consent forms to be affixed to back of sheet)

AFFIX PATIENT'S IDENTIFICATION LABEL HERE

12		
11		
10		
9		
8		

CH 328770

Page: 92

CHILDREN'S HOSPITAL - NO
Neurology
Allen, Prof, IV.
FALLS ROAD
BELFAST

(1759)

Surname ROBERTS
Forename CLAIRE
Age/DOB 39 10/01/57 Sex F
Hosp.No. 228770 -328770
Specimen CSF

C.S.F. CULTURE..... NO GROWTH IN 48 HOURS

* FOR FURTHER INFORMATION, IF REQUIRED...Phone 4150

Page 1 of 1

CH 328770

Page: 93

CHILDREN'S
Allen Ward

FALLS ROAD
BELFAST

(4827)

Surname ROBERTS
Forename CLAIRE
Age/DOB 09 10/01/87 Sex F
Hosp.No. 328770
Specimen BLOOD

BLOOD CULTURE..... NO GROWTH IN 7 DAYS

M.

* FOR FURTHER INFORMATION, IF REQUIRED... Phone 4150 Page 1 of 1

AT 000 IN LANCET 1987 14 X 0000

1987

1987

1987

CH 328770

Page: 94

CH 328770

Allen Ward

FALLS ROAD

BELFAST

(3396)

Forename CLAIRE

Age/DOB 09 10/01/87 Sex F

Hosp.No. 328770

Specimen URINE (Direct)

URINE MICROSCOPY.....

Neutrophils	per ul.	Present (occasional)
Erythrocytes	per ul.	Nil
Epithelial cells	per ul.	Present (occasional)
Crystals	per ul.	Nil
Crystals		Nil
Organisms		Nil

* FOR FURTHER INFORMATION, IF REQUIRED

CH 328770

Page: 95

CHILDREN'S HOSPITAL

Neurology
Allen, Prof, IV.
FALLS ROAD
BELFAST

(3396)

~~Surname~~ ROBERTS ICU
Forename CLAIRE
Age/DOB 09 10/01/87 Sex F
Hosp.No. 328770
Specimen CSF

CEREBRO-SPINAL FLUID ANALYSIS.

Appearance.....	Bloodstained
Supernatant.....	Straw coloured
Protein (g/l).....	95.0
(Normal range. 0.15-0.45)	
Globulin.....	Present(++)
Erythrocytes (cells/uI).....	300000
Leucocytes (cells/uI).....	4000
Cytology.....	Mostly Lymphocytes

* FOR FURTHER INFORMATION, IF REQUIRED, Phone 4150 Page 1 of 1

CH 328770

Page: 96

O PATIENT CLINIC
ADDRESS
WARD ALLEN WARD
HOSPITAL CH
HOSP NO 328770

Great Ormond Street Hospital For Sick Child
180 Falls Road
Belfast

IgM

MUMPS Negative
MEASLES Negative
HERPES SIMPLEX Negative
HERPES ZOSTER Negative
CMV Negative

No significant antibody detected.

REPORT DATE
30-Oct-1996

SPECIMEN
Serum 31811

76
SPECIMEN DATE 21.10.96
RECEIVED 22.10.96

CH 328770

Page: 97

CHILD
ATTEN

FALLS ROAD
BELFAST

(1719)

Specimen URINE (M.S.S.U.)

URINE CULTURE..... NO SIGNIFICANT GROWTH

..... < 10,000 orgs/ml

* FOR FURTHER INFORMATION, IF REQUIRED, Phone 4150 Page 1 of 1

CH 328770

Page: 98

PATIENT **Class**
ADDRESS
WARD ALLEN WARD
HOSPITAL CH
HOSP NO 328770

Hospital for Sick Children
120 Falls Road
Belfast

ADENOVIRUS	21.10.96		21.10.96
Q FEVER	<40	MYCOPLASMA PNEUMONIAE	<40
PLGV	<40	INFLUENZA A VIRUS	<40
	<40	INFLUENZA B VIRUS	<40

No significant antibody detected.

REPORT DATE
31-Oct-1996

SPECIMEN
Serum 31811

SPECIMEN DATE 21.10.96
RECEIVED 22.10.96