



THE ULSTER HOSPITAL

DUNDONALD — BELFAST BT16 0RH

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JM/DA/U8706831

Dr. McMillin
220 Knock Rd,
Belfast

11th August, 1988

Dear Dr. McMillin,

Claire Roberts, [REDACTED]

Claire was seen at Out-patients on 9th August.

She has been keeping very well since her recent discharge from hospital. There has been no recurrence of chest symptoms. I understand that she is a 3rd child, delivered normally at term, weighing 7 lbs 9 ozs. There were no neonatal problems. However, she developed convulsions at the age of 6 months and had a total of 10 over the next 2 months. However, she has had no convulsions since September 87 on Epilim 2.75 mls b.d. I note that her EEG showed a normal record at that time.

There had been some anxiety because she was slow to walk and her mother was pleased to tell me today that she has been walking independently since the age of 19 months. She tells me that her understanding appears good and from her history and what I saw today I felt this to be the case.

Gross motor development - I observed her walk around the clinic in a manner that is suggestive of one who has just achieved motor independence. She did pull to stand with relative ease. She is not yet able to get from sitting to standing position without holding on.

Fine Motor Development - she used both hands equally well. She played appropriately with toys. She did not however show evidence of constructive play, e.g. she does not build blocks, she does not replace rings on the post, nor men in a boat. She did find the hidden toy.

Speech Development - she has 6 - 7 single words with meaning and verbal comprehension appears satisfactory as she waved bye bye, clapped hands on verbal request.

In summary I was pleased with her performance today though she shows mild overall developmental delay. I thought she would benefit from some occupational therapy.

I have arranged to review her again in December.

Yours sincerely,

DR. JOAN MAJOR, Associate Specialist to
Dr. V. Gleadhill, Consultant Paediatrician

PS Serum valporate is above usual reference range so I have suggested reducing the Epilim to 2.5 mls b.d.