EASTERN HEALTH AND SOCIAL SERVICES BOARD

AP1051
EB2/1/1

.....Ulster.....HOSPITAL

AFFIX LABEL HERE OR ENTER

Dr. V. F. D. GLEADHILL

FULL NAME Claire Roberts

ADDRESS 45 Rodcaster Road BT6

D.O.B. 10-1-87. WD./O.P.D. A/N.

Wt — 17lbs.

HOSPITAL NO. U87 06831.

MONTH Sept. 19 87.

DATE 2 3 4.

	C	ME	ME	ME	ME	ME	ME	ME	ME	ME	ME	ME	ME	ME	ME	ME	ME	ME	ME	ME	ME	ME	C
TEMPERATURE	40.5	Teg	Teg	Teg																			40.5
	40																						40
	39.5																						39.5
	39																						39
	38.5																						38.5
	38																						38
	37.5																						37.5
	37																						37
	36.5																						36.5
	36																						36
	35.5																						35.5
PULSE	160																						160
	150																						150
	140																						140
	130																						130
	120																						120
	110																						110
	100																						100
	90																						90
	80																						80
	70																						70
	60																						60
	50																						50
RESPIRATION		28	28	26																			
BOWEL MOTIONS																							
INTAKE ml.																							
OUTPUT ml.																							
WEIGHT Kg.																							

	DATE	COLOUR	SP. GR.	pH	PROTEIN	GLUCOSE	KETONES	BILI-RUBIN	BLOOD	UROBIL-INOGEN	

WMX311