

NHS Number: _____

CC: Child B Adm Tm _____Firs: NHS: Child B Sex: F _____DOB: PD 06/2015  _____

Surr: _____

Date of Birth: _____

Countess of Chester Hospital 
 NHS Foundation Trust

HISTORY SHEET

LOCATION: _____

DATE and TIME	CLINICAL NOTES (For all entries please end each entry with your signature, name in capitals, grade and contact number)
10/6/15 2.40 am	<p>Written retrospectively from ~ 12.50am Bagged at home ~ 12.36am Arrived at ~ 12.50am. Baby tubed already by reg. Went apnoeic suddenly purple blotching of body all over with slowing of heart rate. Bagged & then tubed by reg. Heart rate came up. Adrenaline not required. 10mls 1/4g bolus given upon my arrival purple blotchings RT mid abdomen & right hand. pink & active. In 40% O₂ Sat 100%. H. Rate 143.</p>
00.51	<p>gas: pH 7.20 PCO₂ 6.76 PO₂ 10.46 BE - 8.4 glucose = 7.5 lactate = 4.5</p>
	<p>On 20/6 40% O₂</p>
	<p>FBC = WCC 8.4. Plt 103 (small clump) N 3.30 L 4.5</p>
	<p>CRP = 1. PT 12.2. APTT 37.8</p>
	<p>Fibrinogen 2.43</p>
	<p>Platelets & FFP had been requested but have held off in view of above results</p>

DATE and
TIME

CLINICAL NOTES

(For all entries please end each entry with your signature, name in capitals, grade and contact number)

2 Clinical improvement
Restarted on Abx.

Second line Teic + Cefotaxime.

Cap. ref 1 ~ 3-4 secs. → 2nd 10mls/kg
bolus given.

CXR + AXR. — reviewed.

ETT tube OK

AXR — dilated loops of gas filled
bowel.

rpt gas PH = 7.33 PCO₂ 5.56.

PO₂ = 4.48

lactate = 2.1

In air 20/6

Spoke to parents.

purple discoloration almost resolved.

?? cause

- Stabilised at present

- Cont. Abx

NBM

- rpt gas & wear on feverant

rpt clotting + FBC + U&E + CRP

~ 7.30am

Doctor V