



FAMILY NAME	TUCKER	MRN	1608846
GIVEN NAME	SIMON	<input checked="" type="checkbox"/> MALE	<input type="checkbox"/> FEMALE
D.O.B.	24 / 08 / 61	M.O.	CROZIER
ADDRESS			
LOCATION / WARD			
SURGICAL WARD.			
COMPLETE ALL DETAILS OR AFFIX PATIENT LABEL HERE			

Facility:

PROGRESS / CLINICAL NOTES

Date and Time (use 24 hr clock)

Note: All entries must be legible, written in black pen and include the health care provider's printed name, designation and signature.

21.05.2018
0630

Nursing: Pt had settled night. Obs within SAGO limits. Pt successfully opened bowels this morning. Pt noted mild pain over incision site, no strike through on dressing.
M. Wilkinson RN *M. Wilkinson*

21.5.18
0800

SURG WIR CROZIER | JOHNSTONE

D4 POST HERNIA REPAIR.

PT NOTED SOME MILD PAIN AT INCISION SITE. PT HAS BEEN PASSING WIND + FINALLY OPENED BOWELS THIS AM.

O/E: OBS STABLE + AFEBRILE.

DRESSING INTACT w/ ϕ STRIKE THROUGH.

PLAN

- FULL DIET.
- MONITOR BOWEL OPENING.
- IF PT WELL IN AM, FOR DIC
↳ FLU IN DR CROZIER CLINIC IN 2/52.
- WILL RVU LATER IN DAY FOR LIKELY DIC.

21/5/18
1000

Nursing: Pt noticed incision site had increasing pain. It has recently been stinging. Pt then noticed sharp pain a few mins ago. Now marked strike through on dressing. obs remain within SAGO limits. JMO called for review. F. Carter. RN *F. Carter*

AMO _____ I attest that I have reviewed the notes (signed) _____ Date _____



SMR050001

Holes Punched as per AS2828.1: 2012
BINDING MARGIN - NO WRITING

NH606513 301213

PROGRESS / CLINICAL NOTES

SMR050.001