NSW GOVERNMENT Health

Facility:

FAMILY NAME WATSON	MRN 0407123
GIVEN NAME KAREN	☐ MALE ☒ FEMALE
D.O.B. 22 / 03 / 70	M.O. EMERGENCY DR.
ADDRESS	
LOCATION / WARD EMERGENCY.	

COMPLETE ALL DETAILS OR AFFIX PATIENT LABEL HERE

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.
21.05.18 1000	Nursing: Pt admitted to ED c abdominal pain. complaining of severe RUQ pain. Febrile at 38.7°C, tachycardic. ED CMO (Dr Hunt) has written up paracetamol and IV morphine for analgesia while awaiting review. IV fluids running at 125 ml/hr. Awaiting review by ED dr. M. Hammond RN

AMO_____ I attest that I have reviewed the notes (signed) _____ Date_____

NO WRITING

WP03-S1-CM09_PN

SMR050001
Holes Punched as per AS2828.1: 2012
BINDING MARGIN - NO WRITING
NH606513 301213
PROGRESS / CLINICAL NOTES
SMR050.001