

SURNAME Mr Mrs Miss	INITIALS	SEX	AGE	WARD	CONSULTANT	UNIT No.
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DATE	
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4/2/92

SR WR

wound looking good
Removal of rest of deep
continuous mobilisation.

SMS

9/2/92

SR WR

Mobilising well, weight bearing
Wound looks OK

Haematology happy. to factor VIII, decreased

Can go home & when night

Dip. Surfactant, clotting factor

? home call Pat. WR

21/2/92

Haematology

Delighted with his progress. Knee is
healing well with no pain, no sign
of infection. Physio. is happy and he
managed stairs well yesterday.

at home presents no major problems.

Plan is home on Monday 1 gaster.

From our point of view, we will
review him one week on Monday
in our clinic.

Continue factor VIII 750 units bd
and go home on 1500 units in the
morning (we will supply this).

On 19th

PT 17 s

APTT 56 s

TT 19 s

Fibrin. 1.99

plt 76

He does therefore have a degree of chronic coagulopathy presumably 20 to his liver disease. This is currently asymptomatic.

on 19th

~~NR~~ ~~Pat~~ ~~Pat~~ ~~Pat~~ ~~Pat~~

Albumin	32	→ improved
Bil	21	→ improved
AST	28	
K ⁺	3.7	

Clinically and biochemically his LFT's are better.

R Se
(JOHNSON)
358

2/12/92

NR Pat K

Mobility well

Have had Monday.

Verdon to be visited

MR

11.3.92 self presentation.

1.) Painful dyspepsia - change
protonix to ranitidine 150mg bdy

2.) Intestinal dyspepsia 1 bdy.
E45 + 1% Hydrocortisone.

MR