

|                              |          |     |     |      |            |          |
|------------------------------|----------|-----|-----|------|------------|----------|
| SURNAME<br>Mr<br>Mrs<br>Miss | INITIALS | SEX | AGE | WARD | CONSULTANT | UNIT No. |
|------------------------------|----------|-----|-----|------|------------|----------|

|      |  |
|------|--|
| DATE |  |
|------|--|

14/2/92

SR WR

wound looking good  
Removal of seal of drip  
continue mobilisation

GRO-C

19/2/92

SR WR

Mobilising well, weight bearing  
Wound looks OK

Physiotherapist happy to further test, deemed  
Can go home when mobile

Rpt SMC, CBC, clotting taken  
? home with Physio

GRO-C

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.

Home presents no major problems.  
Plan is home on Monday 1/3/92.

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

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

On 19/2

PT 17.5

APTT 56.5

TT 19.5

Fibrin 1.99

pH 7.6

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

on 19th

~~NR~~ ~~NR~~ ~~NR~~

|                |     |            |
|----------------|-----|------------|
| Albumin        | 32  | → improved |
| Bil            | 21  | → improved |
| AST            | 28  |            |
| K <sup>+</sup> | 3.7 |            |

Clinically and biochemically his LFT's are better.

GRO-C

(JOHNSON)  
358

2/12/12

NR Pat K  
Mobility well  
Hume lab Monkey.  
Venous to be resided

GRO-C

11.3.92

Self presentation.

- 1.) Painful hyperemesis - change paracetamol to Amitriptyline 5mg 1day
- 2.) Intestinal obstruction 1 day.  
E45 + 1% Hydrocortisone.

GRO-C