

HOSPITAL CODE NUMBER		MEDICAL RECORD NUMBER	
<b>THE NEPEAN HOSPITAL PENRITH</b>			
SURNAME		GIVEN NAMES (IN CIB)	
MAIDEN NAME		MARRIAGE STATUS <input type="checkbox"/> SEP <input type="checkbox"/> N.K.	
HOME	PHONE	BUSINESS	USUAL ADDRESS (PLEASE PRINT)
LANGUAGE SPOKEN AT HOME		COUNTRY OF BIRTH	ABORIGINE <input type="checkbox"/> Y <input type="checkbox"/> N
OCCUPATION		RELIGION	
PERSON FOR NOTIFICATION		RELATIONSHIP	ADDRESS
REFERRING M.O./AGENCY		ADDRESS	
LOCAL MEDICAL OFFICER		ADDRESS	
SOURCE OF REFERRAL		PREVIOUS ATTENDANCE	
<input type="checkbox"/> BORN IN HOSPITAL <input type="checkbox"/> CASUALTY <input type="checkbox"/> COMMUNITY HEALTH SERVICE <input type="checkbox"/> OUTPATIENT DEPARTMENT <input type="checkbox"/> AREA HOSPITAL <input type="checkbox"/> OTHER HOSPITAL <input type="checkbox"/> MEDICAL PRACTITIONER <input type="checkbox"/> NURSING HOME <input type="checkbox"/> OTHER AGENCY		INPATIENT <input type="checkbox"/> YEAR: _____ OUTPATIENT <input type="checkbox"/> YEAR: _____	
ATTENDING MEDICAL OFFICER		ADMISSION DATE	WARD
PATIENT CLASSIFICATION		WORKERS COMP.	M.V. 3RD PARTY
<input type="checkbox"/> NON-CHARGEABLE <input type="checkbox"/> CHARGEABLE - HOSPITAL DOCTOR <input type="checkbox"/> CHARGEABLE - OWN DOCTOR		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
MEDICARE NUMBER		REPATRIATION or PENSIONER No.	DATE OF SEPARATION
REFERRED TO		MODE OF SEPARATION	
<input type="checkbox"/> OPD <input type="checkbox"/> CHS <input type="checkbox"/> DNS <input type="checkbox"/> MED. PRACT. <input type="checkbox"/> GROUP HOME <input type="checkbox"/> OTHER <input type="checkbox"/> NOT REF. <input type="checkbox"/> NOT KNOWN		DISCH. HOME TRANSFER/DISCH. TO: <input type="checkbox"/> BY HOSP. <input type="checkbox"/> NURSING HOME <input type="checkbox"/> OTHER HOSP. <input type="checkbox"/> RISK <input type="checkbox"/> AREA HOSPITAL	
PRESENTING PROBLEM		DEATH <input type="checkbox"/> AUTOPSY <input type="checkbox"/> NO AUTOPSY	

  

DATE	25.5.91					
TIME ARRIVED	2100					
TIME SEEN						
TIME DISCHARGED						
A	B	C	D	E	F	G

Presents from Springfield Hospital where she presented earlier today w PR Bleeding Blood stained fluid from Rectum? approx 1830hrs. See notes from Springfield as they are unable to handle this young DD girl. *J. Dawson R*

2215hrs. Not yet seen by medical staff due to resuscitation in progress, same explained to parents. *(Jecher & Lechee)*

14 yr old ♀  
 Presents w PR bleeding  
 HPI Unwell for ~ 1 week w "abdo pain" -  
 w/o severe stomach, non specific  
 lethargic past 2 days  
 anorectic 2/4  
 no nausea/vomiting  
 no diarrhoea.

BINDING MARGIN - NO WRITING

CASUALTY REGISTRATION

MR/154

0008  
 1990