

PHYSICIAN'S ORDER FORM

LABEL SHEET BEFORE PLACING IN CHART. DATE, TIME AND PHYSICIAN'S SIGNATURE MUST APPEAR FOR EACH SET OF ORDERS. USE APPROVED ABBREVIATIONS ONLY, EACH TIME NEW ORDERS ARE WRITTEN SEND TO PHARMACY. DISCONTINUE ORDERS IN WRITING, COUNTER SIGN TELEPHONE ORDERS, PATIENT WEIGHT AND HEIGHT PERTAINS TO THAT ON ADMISSION. THE GENERIC, THERAPEUTIC OR PHARMACOLOGIC EQUIVALENT WILL BE DISPENSED UNDER THE FORMULARY SYSTEM, UNLESS THE PHYSICIAN SPECIFIES, "DISPENSE AS WRITTEN."

PATIENT ALLERGIC TO		NONE	ASPIRIN	SULFA	PENICILLIN	OTHER			PT. WGT.	PT. HGT.
Date	Time	DO NO mg), la	OT USE AI ack of lead	BBREVIA ing zero (ATIONS U, II (.X mg), MS(J, Q.D., QE D ₄ , MgSO ₄ ,),q.d., qd, Q.0 MS	O.D. QOD, d	q.o.d., qod, trai	ling zero (X.0
				11/11/11						
									финанизация	
									40.00	
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