

SINGLE ORDERS - PRE-OPERATIVE

MEDICATION DOSAGE ROUTE OF ADMINISTRATION	GIVEN			MEDICATION DOSAGE ROUTE OF ADMINISTRATION	GIVEN		
	DATE	TIME	INITIAL		DATE	TIME	INITIAL

PRN AND VARIABLE DOSE MEDICATIONS

ORDE R DATE	MEDICATION-DOSAGE ROUTE OF ADMINISTRATION FREQUENCY  <i>See orders first</i>	DOSES GIVEN- <u>SEE MO ORDERS FIRST FOR CONTRAINDICATIONS</u>																	
		DATE	TIME	DOSE	INIT.														
	Tylenol 650mg or 500 Mg PO Q4-6HR PRN (minor aches, pains, HA)	DATE	TIME	DOSE	INIT.														
	MYLANTA 15-30ML PO Q 4HR PRN (heartburn, indigestion)	DATE	TIME	DOSE	INIT.														
	Benadryl 25-50mg PO Q 6hr PRN (rhinorrhea, sneezing, Watery eyes, itchy rash)	DATE	TIME	DOSE	INIT.														
	Motrin 400-800mg PO TID PRN (moderate pain, headache)	DATE	TIME	DOSE	INIT.														
	Tinactin(tolnaftate) 1% Cream topical AAA BID x 2 wks (athlete's foot, jock itch)	DATE	TIME	DOSE	INIT.														
	Sudafed 30-60mg PO QID PRN (nasal congestion)	DATE	TIME	DOSE	INIT.														
	Cepacol Lozenges 1 PO q 4-6 HR PRN Sore Throat	DATE	TIME	DOSE	INIT.														
		DATE	TIME	DOSE	INIT.														
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		DATE	TIME	DOSE	INIT.														

(b)(3):10  
USC  
§130b,(b)  
(6)

MEDICAL RECORD

MEDICATION ADMINISTRATION RECORD

SCHEDULED DRUGS

MONTH Nov YEAR 2003 DATES: 7-13

ORDER DATE	MEDICATION - DOSAGE - FREQUENCY ROUTE OF ADMINISTRATION	HOURS	11/7	11/8	11/9	11/10	11/11	11/12	11/13
11/29	Zantac 150mg	0400	(b)(3):10 USC §130b,(b)(6)						
2003	PO BID x 30 days (N/C 11/29)	3000							

INITIAL CODE

INITIAL	FULL SIGNATURE & TITLE	INITIAL	FULL SIGNATURE & TITLE	INITIAL	FULL SIGNATURE & TITLE
(b)(2),(b)(6)					

ADDRESSOGRAPH:  
D.JTF HQ - 0693  
888-80 - 0693

(b)(2)

- Injection Site Code
- 1-left buttock    2-right buttock
  - 3-left deltoid    4-right deltoid
  - 5-left leg    6-right leg
  - 7-left arm    8-right arm
  - 9-abdomen

**SINGLE ORDERS – PRE-OPERATIVE**

MEDICATION DOSAGE ROUTE OF ADMINISTRATION	GIVEN			MEDICATION DOSAGE ROUTE OF ADMINISTRATION	GIVEN	
	DATE	TIME	INITIAL		DATE	TIME

**PRN AND VARIABLE DOSE MEDICATIONS**

ORDER DATE	MEDICATION-DOSAGE ROUTE OF ADMINISTRATION FREQUENCY <i>See orders first</i>	DOSES GIVEN-SEE MO ORDERS FIRST FOR CONTRAINDICATIONS									
		DATE	TIME	DOSE	INIT.	DATE	TIME	DOSE	INIT.	DATE	TIME
	Tylenol 650mg or 500 Mg PO Q4-6HR PRN (minor aches, pains, HA)	DATE									
		TIME									
		DOSE									
		INIT.									
	MYLANTA 15-30ML PO Q 4HR PRN (heartburn, indigestion)	DATE									
		TIME									
		DOSE									
		INIT.									
	Benadryl 25-50mg PO Q 6hr PRN (rhinorrhea, sneezing, Watery eyes, itchy rash)	DATE									
		TIME									
		DOSE									
		INIT.									
	Motrin 400-800mg PO TID PRN (moderate pain, headache)	DATE									
		TIME									
		DOSE									
		INIT.									
	Tinactin (tolnaftate) 1% Cream topical AAA BID x 2 wks (athlete's foot, jock itch)	DATE									
		TIME									
		DOSE									
		INIT.									
	Sudafed 30-60mg PO QID PRN (nasal congestion)	DATE									
		TIME									
		DOSE									
		INIT.									
	Cepacol Lozenges	DATE									
		TIME									
		DOSE									
		INIT.									

(b)(3):10 USC §130b,(b)(6)



MEDICAL RECORD

MEDICATION ADMINISTRATION RECORD

ORDER DATE	SCHEDULED DRUGS MEDICATION- DOSAGE- FREQUENCY ROUTE OF ADMINISTRATION	HOURS	MONTH <u>001</u> <u>10</u> <u>2002</u>				DATES GIVEN				

INITIAL CODE

INITIAL	FULL SIGNATURE & TITLE	INITIAL	FULL SIGNATURE & TITLE	INITIAL	FULL SIGNATURE & TITLE

ADDRESSOGRAPH PLATE

888-00-0693

(b)(2)

Injection Site Code

- ① = Left Buttock
- ② = Right Buttock
- ③ = Left Deltoid
- ④ = Right Deltoid
- ⑤ = Left Leg
- ⑥ = Right Leg
- ⑦ = Left Arm
- ⑧ = Right Arm
- ⑨ = Abdomen

BOARD NO

SINGLE CROSS.  
SEE-OF-PRN  
& VARIABLE  
CODE ORDERS  
SEE REVERSE

SINGLE ORDERS - PRE-OPERATIVE

MEDICATION - DOSAGE		GIVEN			MEDICATION - DOSAGE		GIVEN		
ROUTE OF ADMINISTRATION		DATE	TIME		ROUTE OF ADMINISTRATION		DATE	TIME	INITIAL
B.L. LB. W		10/18	1100	(b)(3):10 USC 61206 (b)					

PRN AND VARIABLE DOSE MEDICATIONS

ORDER DATE	MEDICATION-DOSAGE FREQUENCY ROUTE OF ADMINISTRATION	DOSES GIVEN																																																																																																																																																																																																																																																																																																																													
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MEDICAL RECORD

MEDICATION ADMINISTRATION RECORD

SCHEDULED DRUGS

MONTH Oct/Nov 19 2002

DATES GIVEN

ORDER DATE	MEDICATION- DOSAGE- FREQUENCY ROUTE OF ADMINISTRATION	HOURS	10/31	11/1	11/2	11/3	11/4	11/5	11/6	11/7	11/8	11/9	11/10
10/29	Zantac 150mg PO BID x 30d	1400 2000	(b)(3):10 USC §130b,(b)(6)										

(b)(3):10 USC §130b,(b)(6)

ADDRESSOGRAPH PLATE

DJTF OO 0693  
888-00-0693

(b)(2)

- Injection Site Code
- ① = Left Buttock
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  - ⑨ = Abdomen

WARD #  
SINGLE DOSE,  
PRE- OR P.M.  
VARIABLE  
DOSE ORDERS  
SEE REVERSE



SINGLE ORDERS - PRE-OPERATIVE

MEDICATION - DOSAGE ROUTE OF ADMINISTRATION	GIVEN			MEDICATION - DOSAGE ROUTE OF ADMINISTRATION	GIVEN		
	DATE	TIME	INITIAL		DATE	TIME	INITIAL

PRN AND VARIABLE DOSE MEDICATIONS

ORDER DATE	MEDICATION-DOSAGE FREQUENCY ROUTE OF ADMINISTRATION	DOSES GIVEN											
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**SINGLE ORDERS - PRE-OPERATIVE**

MEDICATION DOSAGE ROUTE OF ADMINISTRATION	DATE	GIVEN		MEDICATION DOSAGE ROUTE OF ADMINISTRATION	DATE	GIVEN	
		TIME	INITIAL			TIME	INITIAL

**PRN AND VARIABLE DOSE MEDICATIONS**

ORDER DATE	MEDICATION-DOSAGE ROUTE OF ADMINISTRATION FREQUENCY <i>See orders first</i>	DOSES GIVEN-SEE MO ORDERS FIRST FOR CONTRAINDICATIONS												
		DATE	TIME	DOSE	INIT.									
	Tylenol 650mg or 500 Mg PO Q4-6HR PRN (minor aches, pains, HA)	DATE	TIME	DOSE	INIT.									
	MYLANTA 15-30ML PO Q 4HR PRN (heartburn, indigestion)	DATE	TIME	DOSE	INIT.									
	Benadryl 25-50mg PO Q 6hr PRN (rhinorrhea,sneezing, Watery eyes,itchy rash)	DATE	TIME	DOSE	INIT.									
	Motrin 400-800mg PO TID PRN (moderate pain, headache)	DATE	TIME	DOSE	INIT.									
	Tinactin(tolnaftate) 1% Cream topical AAA BID x 2 wks (athlete's foot, jock itch)	DATE	TIME	DOSE	INIT.									
	Sudafed 30-60mg PO QID PRN (nasal congestion)	DATE	TIME	DOSE	INIT.									
	Cepacol Lozenges 1 PO q 4-6 HR PRN Sore Throat	DATE	TIME	DOSE	INIT.									
		DATE	TIME	DOSE	INIT.									
		DATE	TIME	DOSE	INIT.									



Trans by:

(b)(3): 10 USC §130b,(b)(6)

(b)(3):10 USC §130b,(b)(6)

MEDICAL RECORD

MEDICATION ADMINISTRATION RECORD

SCHEDULED DRUGS

MONTH Nov - Dec YEAR 2002 DATES: 28-04

ORDER DATE	MEDICATION - DOSAGE - FREQUENCY ROUTE OF ADMINISTRATION	HOURS	DATE						
			28	29	30	01	02	03	04
10/29	Zantac 150mg PO BID x 30d (of 11/29)	0400 2000	(b)(3):10 USC §130b,(b)(6)	X	X	X	X	X	X

INITIAL CODE

INITIAL	FULL SIGNATURE & TITLE	INITIAL	FULL SIGNATURE & TITLE	INITIAL	FULL SIGNATURE & TITLE
(b)(3):10 USC §130b,(b)(6)					

ADDRESSOGRAPH:

3 JTF 00 8 693  
80 8-0693

(b)(2)

Injection Site Code

- 1-left buttock
- 2-right buttock
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- 8-right arm
- 9-abdomen

*Transcribed*

**MEDICAL RECORD**

**MEDICATION ADMINISTRATION RECORD**

SCHEDULED DRUGS			MONTH	DATES GIVEN						
ORDER DATE	MEDICATION- DOSAGE- FREQUENCY ROUTE OF ADMINISTRATION	HOURS	July 19 2002	7/3	7/4	7/5	7/6	7/7	7/8	7/9
6/19	Zantac 150mg PO BID	0600 1800	(b)(3):10 USC §130b,(b)(6)							
7/5	Dicloxacillin 250mg T PO QID x 10 Days (DC 7/16 PM)	0600 1200 1800 2200								

*Handwritten note on grid:*  
 2015  
 15

**INITIAL CODE**

(b)(3):10 USC §130b,(b)(6)

ADDRESSOGRAPH PLATE

D, JTF DD DL93  
 888-00-0693

(b)(2)

Injection Site Code

- ① = Left Buttock      ③ = Left Leg
- ② = Right Buttock    ④ = Right Leg
- ⑤ = Left Deltoid      ⑦ = Left Arm
- ⑥ = Right Deltoid     ⑧ = Right Arm
- ⑨ = Abdomen

PLATE NO.

SINGLE DOSE,  
 PRE- OR POST  
 & VARIABLE  
 DOSE ORDERS  
 SEE REVERSE