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Hospital's
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PHYSICIAN'S ORDER SHEET

ALL ORDERS WILL BE FULFILLED UNLESS CROSSED OUT
AFTER EACH ORDER IS PROPERLY CHECKED, FAX ORDER SHEET
TO PHARMACY WHETHER OR NOT ORDERS INVOLVE MEDICATION.

| | | | | |
|------------------------|--|---|--------------|-------------------|
| PATIENT IDENTIFICATION | Check (✓) Each Order As Transcribed | GENERAL ORDERS | | |
| | | PHYSICIANS ORDER | | |
| | | DATE: | TIME: | (Military Time) |
| | | WELL BABY NURSERY | | |
| | | 1. Admit normal newborn | | |
| | | 2. Follow normal "Newborn Admission" Standard | | |
| | | 3. Follow "Infant Feeding" Standard (Breast or Bottle) | | |
| | | 4. Metabolic screen between 24 - 48 hours -or- upon discharge | | |
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| Allergy | MEDICATIONS | | | |
|--|---|-----------------------------------|------------------------|--------------|
| ALL MEDICATIONS: | RATIONALE: | | | |
| 1. Triple dye to cord every day & PRN | Prevent Umbilical Cord Infection | | | |
| 2. Aquamephyton 1mg IM within 1st hour of life x 1 on admission | Prevent Hemorrhagic Disease of Newborn | | | |
| 3. Erythromycin 0.5% ophthalmic ointment, both eyes, within 1st hour of life x 1 on admission | Prevent Eye Infection | | | |
| 4. Hepatitis Vaccine 0.5 ml IM x 1 on admission | Prevent Hepatitis B Infection | | | |
| 5. Eucerin cream to skin PRN | Skin Care | | | |
| 6. | | | | |
| 7. | | | | |
| 8. | | | | |
| 9. | | | | |
| 10. | | | | |
| Faxed by/Time: (Military Time) | Time Noted: (Military Time) | NURSE'S Signature / Title: | MD's Signature: | Date: |
| | | | | Time: |

PART OF THE MEDICAL RECORD