



# Physician Orders

## LEB Antiepileptic Medication Orders Plan

**PEDIATRIC**

T= Today; N = Now (date and time ordered)

Height: \_\_\_\_\_ cm    Weight: \_\_\_\_\_ kg

Allergies:	<input type="checkbox"/> No known allergies
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**Antiepileptics**

<input type="checkbox"/>	carBAMazepine	_____ mg, (2.5 mg/kg), Oral Susp, PO, qid, T;N
<input type="checkbox"/>	carBAMazepine	_____ mg, (5 mg/kg), Chew Tab, PO, tid, T;N
<input type="checkbox"/>	carBAMazepine	_____ mg, (5 mg/kg), Tab, PO, tid, T;N
<input type="checkbox"/>	carBAMazepine	200 mg, ER Capsule, PO, bid, T;N
<input type="checkbox"/>	carBAMazepine	400 mg, ER Capsule, PO, bid, T;N
<input type="checkbox"/>	carBAMazepine	200 mg, ER Tablet, PO, bid, T;N
<input type="checkbox"/>	carBAMazepine	400 mg, ER Tablet, PO, bid, T;N
<input type="checkbox"/>	clonazePAM	_____ mg, (0.01 mg/kg), Tab, PO, bid, T;N, Initial dose seizures
<input type="checkbox"/>	clonazePAM	_____ mg, (0.05 mg/kg), Tab, PO, tid, T;N, Maintenance dose seizures
<input type="checkbox"/>	clonazePAM	0.5 mg, Tab, PO, tid, T;N
<input type="checkbox"/>	clonazePAM	1 mg, Tab, PO, tid, T;N
<input type="checkbox"/>	clonazePAM	0.5 mg, Wafer, PO, tid, T;N
<input type="checkbox"/>	clonazePAM	1 mg, Wafer, PO, tid, T;N
<input type="checkbox"/>	clorazepate	_____ mg, (0.5 mg/kg), Tab, PO, bid, T;N
<input type="checkbox"/>	clorazepate	3.75 mg, Tab, PO, bid, T;N
<input type="checkbox"/>	clorazepate	7.5 mg, Tab, PO, bid, T;N
<input type="checkbox"/>	diazepam	_____ mg, 0.1 mg/kg, Injection, IV Push, q6h, PRN, T;N, Seizure activity
<input type="checkbox"/>	divalproex	125 mg, EC Tablet, PO, bid, T;N
<input type="checkbox"/>	divalproex	250 mg, EC Tablet, PO, bid, T;N
<input type="checkbox"/>	divalproex	500 mg, EC Tablet, PO, bid, T;N
<input type="checkbox"/>	divalproex	125 mg, EC Capsule, PO, bid, T;N (Sprinkle Cap)
<input type="checkbox"/>	divalproex	250 mg, EC Capsule, PO, bid, T;N (Sprinkle Cap)
<input type="checkbox"/>	divalproex	250 mg, ER Tablet, PO, QDay, T;N
<input type="checkbox"/>	divalproex	500 mg, ER Tablet, PO, QDay, T;N
<input type="checkbox"/>	felbamate	_____ mg, (5 mg/kg), Oral Susp, PO, tid, T;N
<input type="checkbox"/>	felbamate	_____ mg, (5 mg/kg), Tab, PO, tid, T;N
<input type="checkbox"/>	felbamate	400 mg, Tab, PO, tid, T;N
<input type="checkbox"/>	fosphenytoin	2.5 mg/kg, Injection, IV Piggyback, q12h, T;N, Dose expressed in mg of phenytoin equivalents
<input type="checkbox"/>	fosphenytoin	10 mg/kg, Injection, IV Piggyback, once, T;N, Loading Dose, Dose expressed in mg of phenytoin equivalents
<input type="checkbox"/>	fosphenytoin	20 mg/kg, Injection, IV Piggyback, once, T;N, Loading Dose, Dose expressed in mg of phenytoin equivalents





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<b>Medications continued</b>	
[ ]	gabapentin _____ mg, (5 mg/kg), Oral Susp, PO, tid, T;N, Initial Dose
[ ]	gabapentin _____ mg, (10 mg/kg), Oral Susp, PO, tid, T;N, Maintenance Dose
[ ]	gabapentin _____ mg, (5 mg/kg), Cap, PO, tid, T;N, Initial Dose
[ ]	gabapentin _____ mg, (10 mg/kg), Cap, PO, tid, T;N, Maintenance Dose
[ ]	gabapentin 300 mg, Oral Susp, PO, tid, T;N
[ ]	gabapentin 300 mg, Cap, PO, tid, T;N
[ ]	lamotrigine _____ mg, (0.3 mg/kg), Tab, PO, bid, T;N, Patients receiving enzyme-inducing AED regimens without valproic acid
[ ]	lamotrigine _____ mg, (0.15 mg/kg), Tab, PO, bid, T;N, Patients receiving AEDs other than carbamazepine, phenytoin, phenobarbital, primidone, or valproic acid
[ ]	lamotrigine _____ mg, (0.075 mg/kg), Tab, PO, bid, T;N, Patients receiving AED regimens containing valproic acid
[ ]	lamotrigine _____ mg, (0.3 mg/kg), Chew Tab, PO, bid, T;N, Patients receiving enzyme-inducing AED regimens without valproic acid
[ ]	lamotrigine _____ mg, (0.15 mg/kg), Chew Tab, PO, bid, T;N, Patients receiving AEDs other than carbamazepine, phenytoin, phenobarbital, primidone, or valproic acid
[ ]	lamotrigine _____ mg, (0.075 mg/kg), Chew Tab, PO, bid, T;N, Patients receiving AED regimens containing valproic acid
[ ]	lamotrigine _____ mg, (0.3 mg/kg), Oral Susp, PO, bid, T;N, Patients receiving enzyme-inducing AED regimens without valproic acid
[ ]	lamotrigine _____ mg, (0.15 mg/kg), Oral Susp, PO, bid, T;N, Patients receiving AEDs other than carbamazepine, phenytoin, phenobarbital, primidone, or valproic acid
[ ]	lamotrigine _____ mg, (0.075 mg/kg), Oral Susp, PO, bid, T;N, Patients receiving AED regimens containing valproic acid
[ ]	lamotrigine 5 mg, Chew Tab, PO, bid, T;N
[ ]	lamotrigine 25 mg, Chew Tab, PO, bid, T;N
[ ]	lamotrigine 100 mg, Tab, PO, bid, T;N
[ ]	levetiracetam _____ mg, (10 mg/kg), Injection, IVPiggyback, q12h, T;N
[ ]	levetiracetam _____ mg, (10 mg/kg), Oral Soln, PO, bid, T;N
[ ]	levetiracetam 250 mg, Tab, PO, bid, T;N
[ ]	levetiracetam 500 mg, Tab, PO, bid, T;N
[ ]	levetiracetam 1000 mg, Tab, PO, bid, T;N
[ ]	oxcarbazepine _____ mg, (4 mg/kg), Oral Susp, PO, bid, T;N
[ ]	oxcarbazepine _____ mg, (4 mg/kg), Tab, PO, bid, T;N
[ ]	oxcarbazepine 300 mg, Tab, PO, bid, T;N
[ ]	phenobarbital _____ mg, (3 mg/kg), Elixir, PO, bid, T;N, Infants to 5 years
[ ]	phenobarbital _____ mg, (2 mg/kg), Elixir, PO, bid, T;N, 5 to 12 years
[ ]	phenobarbital _____ mg, (1.5 mg/kg), Tab, PO, bid, T;N, greater than 12 years
[ ]	phenobarbital _____ mg, (10 mg/kg), Injection, IVPiggyback, once, T;N, Loading Dose
[ ]	phenobarbital _____ mg, (20 mg/kg), Injection, IVPiggyback, once, T;N, Loading Dose
[ ]	phenobarbital _____ mg, (3 mg/kg), Injection, IVPiggyback, q24h, T;N, Neonates
[ ]	phenobarbital _____ mg, (1.5 mg/kg), Injection, IVPiggyback, bid, T;N, greater than 12 years



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**Medications continued**

<input type="checkbox"/> [ ]	PHENobarbital	_____ mg, (2 mg/kg), Injection, IVPiggyback, bid, T;N, 5 to 12 years
<input type="checkbox"/> [ ]	PHENobarbital	_____ mg, (3 mg/kg), Injection, IVPiggyback, bid, T;N, Infants to 5 years
<input type="checkbox"/> [ ]	phenytoin	_____ mg, (5 mg/kg), Oral Susp, PO, q4h, (3 doses), T;N, Loading Dose
<input type="checkbox"/> [ ]	phenytoin	_____ mg, (2.5 mg/kg), Oral Susp, PO, bid, T;N, Neonates
<input type="checkbox"/> [ ]	phenytoin	_____ mg, (1.5 mg/kg), Oral Susp, PO, tid, T;N, Infants and Children
<input type="checkbox"/> [ ]	phenytoin	_____ mg, (1.5 mg/kg), Cap, PO, tid, T;N, Infants and Children
<input type="checkbox"/> [ ]	phenytoin	30 mg, ER Capsule, PO, tid, T;N
<input type="checkbox"/> [ ]	phenytoin	50 mg, Tab, PO, tid, T;N
<input type="checkbox"/> [ ]	phenytoin	100 mg, Cap, PO, tid, T;N
<input type="checkbox"/> [ ]	pregabalin	_____ mg, Cap, PO, tid, T;N
<input type="checkbox"/> [ ]	pregabalin	50 mg, Cap, PO, tid, T;N
<input type="checkbox"/> [ ]	pregabalin	75 mg, Cap, PO, tid, T;N
<input type="checkbox"/> [ ]	pregabalin	100 mg, Cap, PO, tid, T;N
<input type="checkbox"/> [ ]	primidone	_____ mg, (4 mg/kg), Tab, PO, tid, T;N
<input type="checkbox"/> [ ]	primidone	50 mg, Tab, PO, tid, T;N
<input type="checkbox"/> [ ]	primidone	250 mg, Tab, PO, tid, T;N
<input type="checkbox"/> [ ]	tiaGABine	2 mg, Tab, PO, tid, T;N
<input type="checkbox"/> [ ]	tiaGABine	4 mg, Tab, PO, tid, T;N
<input type="checkbox"/> [ ]	tiaGABine	12 mg, Tab, PO, tid, T;N
<input type="checkbox"/> [ ]	tiaGABine	16 mg, Tab, PO, tid, T;N
<input type="checkbox"/> [ ]	topiramate	_____ mg, (1 mg/kg), Oral Susp, PO, qpm, T;N, Initial Dose, Max dose = 25 mg
<input type="checkbox"/> [ ]	topiramate	_____ mg, (1 mg/kg), Tab, PO, qpm, T;N, Initial Dose
<input type="checkbox"/> [ ]	topiramate	_____ mg, (3 mg/kg), Oral Susp, PO, bid, T;N, Maintenance dose
<input type="checkbox"/> [ ]	topiramate	_____ mg, (3 mg/kg), Tab, PO, bid, T;N, Maintenance dose
<input type="checkbox"/> [ ]	topiramate	25 mg, Cap, PO, qpm, T;N, Initial dose
<input type="checkbox"/> [ ]	topiramate	50 mg, Cap, PO, bid, T;N, Maintenance dose
<input type="checkbox"/> [ ]	topiramate	25 mg, Tab, PO, qpm, T;N, Initial dose
<input type="checkbox"/> [ ]	topiramate	50 mg, Tab, PO, bid, T;N, Maintenance dose
<input type="checkbox"/> [ ]	topiramate	100 mg, Tab, PO, bid, T;N, Maintenance dose
<input type="checkbox"/> [ ]	topiramate	200 mg, Tab, PO, bid, T;N, Maintenance dose
<input type="checkbox"/> [ ]	valproic acid	_____ mg, (10 mg/kg), Injection, IVPB, q8h, T;N
<input type="checkbox"/> [ ]	valproic acid	_____ mg, (5 mg/kg), Syrup, PO, tid, T;N, Initial dose
<input type="checkbox"/> [ ]	valproic acid	_____ mg, (10 mg/kg), Syrup, PO, tid, T;N, Maintenance dose
<input checked="" type="checkbox"/> [ ]	zonisamide	25 mg, Cap, PO, QDay, T;N
<input checked="" type="checkbox"/> [ ]	zonisamide	50 mg, Cap, PO, QDay, T;N
<input checked="" type="checkbox"/> [ ]	zonisamide	100 mg, Cap, PO, QDay, T;N

Date \_\_\_\_\_

Time \_\_\_\_\_

Physician's Signature \_\_\_\_\_

MD Number \_\_\_\_\_