Physician Orders ADULT: Radiology MRI Contrast Plan

Radiology MRI Contrast Plan
Medications

- Sodium Chloride 0.9% Flush
  10 mL, Injection, IV Push, prn, PRN Other, specify in Comment, Routine, (for 2 hr)
  Comments: To promote and maintain IV access patency with administration of medications and/or contrast.

**CONTRAST AGENTS**

- +1 Hours Magnevist
  20 mL, IV Push, N/A, Routine
  Comments: RAD BILL ONLY

- +1 Hours Magnevist
  15 mL, IV Push, N/A, Routine
  Comments: RAD BILL ONLY

- +1 Hours Omniscan
  20 mL, IV Push, N/A, Routine
  Comments: RAD BILL ONLY

- +1 Hours Gadavist
  10 mL, IV Push, N/A, Routine
  Comments: RAD BILL ONLY

- +1 Hours Eovist
  10 mL, IV Push, N/A, Routine
  Comments: RAD BILL ONLY

Date ________________  Time ________________  Physician’s Signature ____________________________  MD Number ________________

*Report Legend:*
DEF - This order sentence is the default for the selected order
GOAL - This component is a goal
IND - This component is an indicator
INT - This component is an intervention
IVS - This component is an IV Set
NOTE - This component is a note
Rx - This component is a prescription
SUB - This component is a sub phase, see separate order
R-Required order