Physician Orders ADULT: PRN Common Comfort Medication Plan

PRN Common Comfort Medication Plan

Medications

☐ +1 Hours acetaminophen
   650 mg, Tab, PO, q6h, PRN Pain, Mild (1-3), Routine

☐ +1 Hours promethazine
   12.5 mg, Tab, PO, q4h, PRN Nausea/Vomiting, Routine

☐ +1 Hours ondansetron
   4 mg, Injection, IV Push, q6h, PRN Nausea

☐ +1 Hours temazepam
   7.5 mg, Cap, PO, hs, PRN Insomnia
   Comments: May repeat once after 30 minutes if required.

☐ +1 Hours Milk of Magnesia
   30 mL, Liq, PO, QDay, PRN Constipation, Routine

☐ +1 Hours bisacodyl
   10 mg, DR Tablet, PO, once, Routine

☐ +1 Hours Maalox Advanced Maximum Strength
   10 mL, Oral Susp, PO, q6h, PRN Indigestion, Routine

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 sheet
R-Required order