

PEDIATRIC DISCOMFORT MED PLAN

PHYSICIAN ORDERS

Diagnosis _____

Weight _____

Allergies _____

Place an "X" in the Orders column to designate orders of choice AND an "x" in the specific order detail box(es) where applicable.

ORDER ORDER DETAILS

Medications

Medication sentences are per dose. You will need to calculate a total daily dose if needed.

Analgesics for Mild Pain

Select only ONE of the following for Mild Pain

acetaminophen (acetaminophen pediatric)

15 mg/kg, PO, liq, q6h, PRN pain-mild (scale 1-3)

If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour***

40 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)

If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour***

80 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)

If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour***

120 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)

If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour***

160 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)

If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour***

240 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)

If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour***

320 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)

If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour***

400 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)

If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour***

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PHYSICIAN ORDERS

Place an "X" in the Orders column to designate orders of choice AND an "x" in the specific order detail box(es) where applicable.

ORDER	ORDER DETAILS												
	<input type="checkbox"/> 500 mg, PO, liq, q6h, PRN pain-mild (scale 1-3) If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour*** <input type="checkbox"/> 325 mg, PO, tab, q6h, PRN pain-mild (scale 1-3) If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour*** <input type="checkbox"/> 500 mg, PO, tab, q6h, PRN pain-mild (scale 1-3) If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour***												
	<p>ibuprofen (ibuprofen pediatric)</p> <table style="width:100%;"> <tr> <td><input type="checkbox"/> 10 mg/kg, PO, liq, q6h, PRN pain-mild (scale 1-3)</td> <td><input type="checkbox"/> 50 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)</td> </tr> <tr> <td><input type="checkbox"/> 80 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)</td> <td><input type="checkbox"/> 100 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)</td> </tr> <tr> <td><input type="checkbox"/> 150 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)</td> <td><input type="checkbox"/> 200 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)</td> </tr> <tr> <td><input type="checkbox"/> 200 mg, PO, tab, q6h, PRN pain-mild (scale 1-3)</td> <td><input type="checkbox"/> 250 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)</td> </tr> <tr> <td><input type="checkbox"/> 300 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)</td> <td><input type="checkbox"/> 400 mg, PO, tab, q6h, PRN pain-mild (scale 1-3)</td> </tr> <tr> <td><input type="checkbox"/> 600 mg, PO, tab, q6h, PRN pain-mild (scale 1-3)</td> <td></td> </tr> </table>	<input type="checkbox"/> 10 mg/kg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 50 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 80 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 100 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 150 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 200 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 200 mg, PO, tab, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 250 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 300 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 400 mg, PO, tab, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 600 mg, PO, tab, q6h, PRN pain-mild (scale 1-3)	
<input type="checkbox"/> 10 mg/kg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 50 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)												
<input type="checkbox"/> 80 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 100 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)												
<input type="checkbox"/> 150 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 200 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)												
<input type="checkbox"/> 200 mg, PO, tab, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 250 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)												
<input type="checkbox"/> 300 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 400 mg, PO, tab, q6h, PRN pain-mild (scale 1-3)												
<input type="checkbox"/> 600 mg, PO, tab, q6h, PRN pain-mild (scale 1-3)													
Analgesics for Moderate Pain													
	<p>***Select only ONE of the following for Moderate Pain***</p> <p>ketorolac</p> <table style="width:100%;"> <tr> <td><input type="checkbox"/> 0.5 mg/kg, IVPush, inj, q6h, PRN pain-moderate (scale 4-6), x 48 hr</td> <td><input type="checkbox"/> 0.5 mg/kg, IVPush, inj, q6h, x 24 hr</td> <td><input type="checkbox"/> 0.5 mg/kg, IVPush, inj, q6h, x 48 hr</td> </tr> <tr> <td><input type="checkbox"/> 15 mg, IVPush, inj, q6h, PRN pain-moderate (scale 4-6), x 48 hr</td> <td><input type="checkbox"/> 15 mg, IVPush, inj, q6h, x 24 hr</td> <td><input type="checkbox"/> 15 mg, IVPush, inj, q6h, x 48 hr</td> </tr> </table>	<input type="checkbox"/> 0.5 mg/kg, IVPush, inj, q6h, PRN pain-moderate (scale 4-6), x 48 hr	<input type="checkbox"/> 0.5 mg/kg, IVPush, inj, q6h, x 24 hr	<input type="checkbox"/> 0.5 mg/kg, IVPush, inj, q6h, x 48 hr	<input type="checkbox"/> 15 mg, IVPush, inj, q6h, PRN pain-moderate (scale 4-6), x 48 hr	<input type="checkbox"/> 15 mg, IVPush, inj, q6h, x 24 hr	<input type="checkbox"/> 15 mg, IVPush, inj, q6h, x 48 hr						
<input type="checkbox"/> 0.5 mg/kg, IVPush, inj, q6h, PRN pain-moderate (scale 4-6), x 48 hr	<input type="checkbox"/> 0.5 mg/kg, IVPush, inj, q6h, x 24 hr	<input type="checkbox"/> 0.5 mg/kg, IVPush, inj, q6h, x 48 hr											
<input type="checkbox"/> 15 mg, IVPush, inj, q6h, PRN pain-moderate (scale 4-6), x 48 hr	<input type="checkbox"/> 15 mg, IVPush, inj, q6h, x 24 hr	<input type="checkbox"/> 15 mg, IVPush, inj, q6h, x 48 hr											
	<p>***HYDROcodone-acetaminophen: Recommended not to exceed 15 mL/dose***</p> <p>HYDROcodone-acetaminophen (HYDROcodone-acetaminophen (Norco) 7.5 mg-325 mg/15 mL oral solution)</p> <input type="checkbox"/> 0.2 mL/kg, PO, soln, q4h, PRN pain-moderate (scale 4-6) If hydrocodone/acetaminophen contraindicated or ineffective, use ketorolac if ordered. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hours*** <input type="checkbox"/> 2.5 mL, PO, soln, q4h, PRN pain-moderate (scale 4-6) If hydrocodone/acetaminophen contraindicated or ineffective, use ketorolac if ordered. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hours*** <input type="checkbox"/> 5 mL, PO, soln, q4h, PRN pain-moderate (scale 4-6) If hydrocodone/acetaminophen contraindicated or ineffective, use ketorolac if ordered. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hours*** Continued on next page....												

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PHYSICIAN ORDERS

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ORDER	ORDER DETAILS
	<input type="checkbox"/> 10 mL, PO, soln, q4h, PRN pain-moderate (scale 4-6) If hydrocodone/acetaminophen contraindicated or ineffective, use ketorolac if ordered. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hours*** <input type="checkbox"/> 15 mL, PO, soln, q4h, PRN pain-moderate (scale 4-6) If hydrocodone/acetaminophen contraindicated or ineffective, use ketorolac if ordered. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hours***

Analgesics for Severe Pain

morphine (morphine pediatric)	
<input type="checkbox"/> 0.3 mg/kg, PO, liq, q3h, PRN pain-severe (scale 7-10)	<input type="checkbox"/> 0.5 mg/kg, PO, liq, q3h, PRN pain-severe (scale 7-10)
<input type="checkbox"/> 10 mg, PO, liq, q3h, PRN pain-severe (scale 7-10)	<input type="checkbox"/> 15 mg, PO, liq, q3h, PRN pain-severe (scale 7-10)
<input type="checkbox"/> 0.05 mg/kg, IVPush, inj, q4h, PRN pain-severe (scale 7-10)	
Recommended maximum dose is 2 mg.	
<input type="checkbox"/> 0.1 mg/kg, IVPush, inj, q2h, PRN pain-severe (scale 7-10)	
Recommended maximum dose is 2 mg.	
<input type="checkbox"/> 2 mg, IVPush, inj, q4h, PRN pain-severe (scale 7-10)	

Scheduled Analgesics

Gabapentin frequency increases over a three day period. Select all gabapentin orderables, using the same dose for each day.	
gabapentin	
<input type="checkbox"/> 5 mg/kg, PO, liq, Nightly, x 1 dose, Day 1. For patients 3-11 years old.	Recommended MAX dose of 300 mg.
<input type="checkbox"/> 100 mg, PO, cap, Nightly, x 1 dose, Day 1. For patients GREATER than 11 years old.	
<input type="checkbox"/> 200 mg, PO, cap, Nightly, x 1 dose, Day 1. For patients GREATER than 11 years old.	
<input type="checkbox"/> 300 mg, PO, cap, Nightly, x 1 dose, Day 1. For patients GREATER than 11 years old.	

gabapentin	
<input type="checkbox"/> 5 mg/kg, PO, liq, BID, x 2 dose, Day 2. For patients 3-11 years old.	Recommended MAX dose of 300 mg.
<input type="checkbox"/> 100 mg, PO, cap, BID, x 2 dose, Day 2. For patients GREATER than 11 years old.	
<input type="checkbox"/> 200 mg, PO, cap, BID, x 2 dose, Day 2. For patients GREATER than 11 years old.	
<input type="checkbox"/> 300 mg, PO, cap, BID, x 2 dose, Day 2. For patients GREATER than 11 years old.	

gabapentin	
<input type="checkbox"/> 5 mg/kg, PO, liq, TID, x 3 dose, Day 3. For patients 3-11 years old.	Recommended MAX dose of 300 mg.
<input type="checkbox"/> 100 mg, PO, cap, TID, x 3 dose, Day 3. For patients GREATER than 11 years old.	
<input type="checkbox"/> 200 mg, PO, cap, TID, x 3 dose, Day 3. For patients GREATER than 11 years old.	
<input type="checkbox"/> 300 mg, PO, cap, TID, x 3 dose, Day 3. For patients GREATER than 11 years old.	

Anti-pyretics

Select only ONE of the following for Fever	
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ORDER	ORDER DETAILS
	<p>acetaminophen (acetaminophen pediatric)</p> <p><input type="checkbox"/> 15 mg/kg, PO, liq, q6h, PRN fever If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour***</p> <p><input type="checkbox"/> 40 mg, PO, liq, q6h, PRN fever If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour***</p> <p><input type="checkbox"/> 80 mg, PO, liq, q6h, PRN fever If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour***</p> <p><input type="checkbox"/> 120 mg, PO, liq, q6h, PRN fever If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour***</p> <p><input type="checkbox"/> 160 mg, PO, liq, q6h, PRN fever If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour***</p> <p><input type="checkbox"/> 240 mg, PO, liq, q6h, PRN fever If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour***</p> <p><input type="checkbox"/> 320 mg, PO, liq, q6h, PRN fever If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour***</p> <p><input type="checkbox"/> 400 mg, PO, liq, q6h, PRN fever If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour***</p> <p><input type="checkbox"/> 500 mg, PO, liq, q6h, PRN fever If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour***</p> <p><input type="checkbox"/> 325 mg, PO, tab, q6h, PRN fever If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour***</p> <p>Continued on next page....</p>

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ORDER	ORDER DETAILS
	<input type="checkbox"/> 500 mg, PO, tab, q6h, PRN fever If acetaminophen and ibuprofen both ordered, administer medications in alternating order. ***Do not exceed 2,600 mg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others do not exceed 4,000 mg of acetaminophen from all sources in 24 hour***
	ibuprofen (ibuprofen pediatric) <input type="checkbox"/> 10 mg/kg, PO, liq, q6h, PRN fever <input type="checkbox"/> 80 mg, PO, liq, q6h, PRN fever <input type="checkbox"/> 150 mg, PO, liq, q6h, PRN fever <input type="checkbox"/> 200 mg, PO, tab, q6h, PRN fever <input type="checkbox"/> 300 mg, PO, liq, q6h, PRN fever <input type="checkbox"/> 600 mg, PO, tab, q6h, PRN fever <input type="checkbox"/> 50 mg, PO, liq, q6h, PRN fever <input type="checkbox"/> 100 mg, PO, liq, q6h, PRN fever <input type="checkbox"/> 200 mg, PO, liq, q6h, PRN fever <input type="checkbox"/> 250 mg, PO, liq, q6h, PRN fever <input type="checkbox"/> 400 mg, PO, tab, q6h, PRN fever
Antiemetics	
	Select only ONE of the following for Nausea/Vomiting ondansetron (ondansetron pediatric) <input type="checkbox"/> 0.1 mg/kg, PO, liq, q8h, PRN nausea If ondansetron contraindicated or ineffective, use promethazine if ordered. <input type="checkbox"/> 0.1 mg/kg, PO, liq, q4h, PRN nausea If ondansetron contraindicated or ineffective, use promethazine if ordered. <input type="checkbox"/> 0.15 mg/kg, PO, liq, q4h, PRN nausea If ondansetron contraindicated or ineffective, use promethazine if ordered. <input type="checkbox"/> 4 mg, PO, liq, q4h, PRN nausea If ondansetron contraindicated or ineffective, use promethazine if ordered. <input type="checkbox"/> 0.1 mg/kg, IVPush, soln, q8h, PRN nausea If ondansetron contraindicated or ineffective, use promethazine if ordered. <input type="checkbox"/> 0.1 mg/kg, IVPush, soln, q4h, PRN nausea If ondansetron contraindicated or ineffective, use promethazine if ordered. <input type="checkbox"/> 0.15 mg/kg, IVPush, soln, q4h, PRN nausea If ondansetron contraindicated or ineffective, use promethazine if ordered. <input type="checkbox"/> 4 mg, IVPush, soln, q4h, PRN nausea If ondansetron contraindicated or ineffective, use promethazine if ordered.
	promethazine (promethazine pediatric) <input type="checkbox"/> 0.25 mg/kg, PO, liq, q4h, PRN nausea <input type="checkbox"/> 12.5 mg, PO, liq, q4h, PRN nausea <input type="checkbox"/> 0.5 mg/kg, rectally, supp, q4h, PRN nausea <input type="checkbox"/> 0.5 mg/kg, PO, liq, q4h, PRN nausea <input type="checkbox"/> 0.25 mg/kg, rectally, supp, q4h, PRN nausea <input type="checkbox"/> 12.5 mg, rectally, supp, q4h, PRN nausea
Constipation Treatment/Prevention	
	glycerin (glycerin pediatric rectal suppository) <input type="checkbox"/> 0.25 supp, rectally, ONE TIME <input type="checkbox"/> 1 supp, rectally, ONE TIME <input type="checkbox"/> 0.5 supp, rectally, ONE TIME <input type="checkbox"/> 1 supp, rectally, Daily, PRN constipation
	docusate (docusate sodium) <input type="checkbox"/> 40 mg, PO, liq, Nightly, for patients LESS than 3 years of age <input type="checkbox"/> 50 mg, PO, liq, Nightly, for patients GREATER than or EQUAL to 3 years of age <input type="checkbox"/> 100 mg, PO, liq, Nightly, for patients GREATER than or EQUAL to 3 years of age <input type="checkbox"/> 100 mg, PO, cap, Nightly, for patients GREATER than or EQUAL to 3 years of age

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ORDER	ORDER DETAILS
	polyethylene glycol 3350 <input type="checkbox"/> 0.5 packet, PO, liq, Daily, [1 packet = 17 g] Mix in 4-8 oz of water, juice, soda, coffee, or tea. <input type="checkbox"/> 1 packet, PO, liq, Daily, [1 packet = 17 g] Mix in 4-8 oz of water, juice, soda, coffee, or tea.
	Notify Nurse (DO NOT USE FOR MEDS) <input type="checkbox"/> Give patient ____ ounces of prune juice daily.

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