HANDOUT F-1

MEDICATION ADMINISTRATION RECORD

Medications	Hour	1	2	3	4	5	6	7	8	9 1	10 '	11 ′	12 ′	13 '	14	15	16	17 ·	18	19 :	20 :	21	22	23	24	25	26	27	28	29	30	31
Hydrocodone 10/325	P	ľ	Г		ľ			ľ				· ·			Ī							<u> </u>										
Take 1 tablet by mouth	R			TK						CJ																						
every 4 hours as	N									U																						
needed for pain.																																
LASIX 40mg.		1	2	3	4	5	6	7	8	9 1	0 1	11 1	12 1	3 1	14 '	15 '	16 '	17 ′	18 '	19 2	20 2	21 :	22	23	24	25	26	27	28	29	30	31
Take 1 tablet by mouth	8AM	TK	TK	TK	TK		JU	JU.	JU.												\bigcap											
once every day.												Ω.	co	_+	m	1Q.C		2-	7		<u> </u>		O	ele								
, ,											2	Die	CO					ha	mo	ed	,,	see	, 0	leu	,	00						
							-							C	20	er.		•	0							P	-					
COUMADIN 5mg.		1	2	3	4	5	6	7	8	9 '	10 '	11 <i>ʻ</i>	12 ′	13 '	14	15	16	17 <i>′</i>	18	19 :	20 :	21:	22	23	24	25	26	27	28	29	30	31
Take 1 tablet by mouth																																
every other day.																																
2/08/00	6PM	_					>	(CJ) X	CJ	X	DB	X	DB	X	DB	X	CJ	Χ	CJ	Χ	DB	X	DB	X	DB	Х	CJ	X			
Lanoxin 0.125 mg.		1	2	3	4	5	6	7	8	9 '	10	<u>11 </u>	<u>12 </u>	13	14	15	16	<u> 17 '</u>	18	19:	20	21	22	23	24	25	26	27	28		30	
Take 1 tablet by mouth	8AM	TK	ŢΚ	TK	TK	TK	JU	JU	JU	JU	JU	TK	TK	TΚ	ŢΚ	TK	JU	JU	JU	JU	JU	TK	TK	TK	TK	TK	JU	JU	JU	\subseteq	(H))
daily. Check pulse																																
before giving and hold	Pulse	64	68	72	74	80	84	80	64	60	66	64	72	83	83	88	72	80	80	72	76	60	64	66	68	68	72	80	82	84	54	
if pulse is less than 60																																
beats/min		4			4	_		_			10	44 .	10	10	4.4	45	40	47	4.0	40		04	00	00	0.4	05	00	07	00	00	20	0.4
AMOXICILLIN 250mg	OAM	1	2	3	4 TV	5 TV	6	/ TII	8	9 '	TI	<u>TU</u>	TU	13 TV	14	15	16			19	20 .	<u> </u>	22	23	24	25	20	21	28	29	30	31
Take 1 capsule by	8AM		—	<u> </u>	IK.	IK.	ĮŲ	JU.	ĮŲ	ŢΥ	ŤΛ	IK	IK	1K	/		۷	st	P													
mouth 3 times daily	2PM 8PM		~	7	ND.	ND ND	70	JU	JU	27	ĮΨ		I K	ND ND	/	4 (_	do	116	, ,	m	lψ										
for 10 days. 2/03/00	OPIVI		7		UB	UD	UD	w	CJ	u	CJ	CJ	UD	UB	-	1 (<u> </u>	·	8		7	X										
NITRO-DUR 0.4mg/hr		1	2	3	1	5	6	7	Ω	0	10	11	12	12	1/	15	16	17	1Ω	10	20	21	22	23	2/	25	26	27	28	20	30	21
PATCHApply 1	8AM	TV	TV	TV	TV	Tν	TU	JU .	TII	JU	TII	TV	TV	TV	Tν	TV	TU	TU	TU	TU	TU	עד	TV	TV	TV	TV	TIJ	TIJ				JI
patch every morning	Site	R.C.	i C	RB	i R	R.C.				RC.	10	RR	I R	R C	li C	RR	I R	RC.) (:	RR	I R	RC.	10	RR	i R	R.C.	I C	RR	I R	RC.		
and remove at bedtime	Remove	11.0	-	IV D		I V	-	110	-			11.0	-	10	-	IVD	-	N O		ND	-	10	LV	IVD	-	IV V	-	ווע		IN U		
	8PM	DB	DB	DB	DB	DB	CJ	CJ	CJ	CJ	CJ	DB	DB	DB	DB	DB	CJ	CJ	CJ	CJ	CJ	DB	DB	DB	DB	DB	CJ	CJ	CJ	CJ		
CAPOTEN 25mg		1	2	3	4	5	6	7	8	9 '		11 '					16				20										30	31
Take 1 tablet by mouth	8AM	TK	TK	TK	TK	TK	ΤU	JU	ΤU		/		,	O		1			0	O												
3 times daily.	2PM	TK	TK	TK	TK	TK .	ΤU	JU.	ΤU	/		Ma	er	chi	ang	jed		500	W	lou	Ļ											
	8PM	DB	DB	DB	DB	DB	CJ	CJ							9 6		<u></u>				09 /											
																<u> </u>	<u>p – </u>	00	<u> </u>		¥U	ł										
CAPOTEN 50mg		1	2	3	4	5	6	7	8	9 1	10 '	<u>11 ′</u>	12 1	13 '	<u>14</u> '	15	16 ·	<u> 17 ′</u>	18	19 2	20 2	21	22	23	24	25	26	27	-		30	31
Take 1 tablet by mouth	8AM								_	JU	JU	IK	IK	IK	IK	IK	JU	JU	JU	JU	JU	IK	IK	IK	IK	IK	JU	JU		JU		
3 times daily .	2PM								>				ŢĶ			ŢĶ		ĴŪ		JU	JU	ŢĶ	ŢĶ	TK	TK	ŢĶ			JU			
(Give 2-25mg tablets)	8PM							7	CJ	CJ	CJ	DB	DB	DB	DB	DB	CJ	ĊJ	CJ	CJ	CJ	DB	DB	DB	DB	DB	CJ	CJ	CJ	CJ	Ш	
2/08/00		4		0	4	_	^	7	0	0	10	44	10	10	4.4	45	40	47	40	40	00	04	00	00	0.4	٥٢	00	07	00	00	00	0.4
LASIX 40mg	0.434	1	2	3	4	5	6		8	9 '		<u>11 '</u> TV	12 '	13	<u>14</u>	15 TV	<u> 16</u>	<u>1/ '</u>	<u> 18</u>	19 7	20	21 - 2	<u> 22</u>	<u>23</u>	<u>24</u>	<u>25</u>	26	2/	28	<u>29</u>	30	31
Take 1 tablet by mouth	8AM								_		JU	<u>IK</u>	IK	IK.	IK.	IK	JU	JU	JU	JU	JU	IK	IK	1K	IK	IK	JU	JU	JU	JU		
twice daily. 2/09/00	4PM	_							>	CT.	/ T	ND	ND	ND	NB	ND	CT	CT.	ſΤ	CT.	CT.	NΒ	NΩ	NB	ND	ND	CT	ΛŢ	CT	CJ		
2/09/00	4F IVI									W	U	UD	UD	UĐ	UD	UD	w	U	U	U	U	UD	UD	UD	UD	UD	W	CJ	CJ	w		
Charting for the mont	th of:	1/1	/13	2	t	hrc	חומ	h		1	/3	1/1	3																			_
		17 17	, 13			1110	Ĭ							E		1	21	2					1/1/	adio	nal.	Dο	cor	d #:				-
,	262									ne							<u> </u>	_					IVI	Juic	Jai	NE	COI	u #	•			
Alt. Physician:							A	t. P	'ny:	sici	<u>an</u>	rei	epr	iori	е #	•						<u> </u>	R	ha	hilit	tatio	าท	Pot	ent	ial·		
Allergies: NKA																						_										\blacksquare
Diagnosis: Conges	tive He	art F	ail	ure	. H	αν	erte	ens	ior	1													Ac	lmi	ssic	on I	Dat	e: 5	5/0	3/	09	
	Burn				,	<i>,</i> 1- \					Da	ate	of l	Birt	th:		10	/1	7	/3	0	1	Ro	on	n / k	ped	#:	_	12	3-2	2	
																						ı										

Instructions:

- Put initials in appropriate box when medication given.
- Circle initials when medication refused.
- State reason for refusal on Nurse's Notes. C.
- PRN medication: Reason given should be noted on Nurse's Notes.
- Indicate injection site (code).

Date/Hour

Result Codes:

1. Effective

2. Ineffective

3. Slightly Effective 4. No Effect Observed

Injection/Patch Site Codes: 7-Right deltoid

1-Right dorsal gluteus 2-Left dorsal gluteus 3-Right upper chest

4-Left upper chest

5-Right lateral thigh

6-Left lateral thigh

Initials

8-Left deltoid 9-Right upper arm 10-Left upper arm

Results/Response

11-Upper back left 12-Upper back right

NURSE'S MEDICATION NOTES

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Temperature																															
Respiration																															
Pulse																															
Blood Pressure																															
Initials	Nurse's Signature										lı	nitia	ls		Nurse's Signature																
TK	,	Johl Kase													1	RB = Right side of back															
CJ	7	(Q		2) 0	re	-											ı	RC = Right side of chest												
DB	L)en	mo	- (2	3.	w	<u> </u>											l	LB = Left side of back												
JU	(Cell Ups													LC = Left side of chest																
		0	10		V																										
Charting Code	es: A	4 . ch	art e	rror	B . dr	ug u	nava	ilable	C . 1	esid	ent re	efuse	d D	. drug	g hel	d E .	dos	e cor	ntami	inate	d F .	out c	f faci	lity (G. se	e no	tes				

Reason

Route

Medication/Dosage

Dail	71 10di	Wicalcation/Dosage	Rodio	rtcason	miliais	1 Codito/1 Copolioc	miliaio
		Hydrocodone 10/325					
1-3-13	10 <i>A</i> M	1 tablet	ро	Pain in right leg	Т	Effective at 12pm	Т
1-7-13	6PM	Coumadin 5mg	ро	Not available -	С		С
				DI II I			
		11. da da 10/225		Pharmacy called			
1-9-13	10044	Hydrocodone 10/325 1 tablet		Dain in might las	С	Effective as of 11mm	С
1-9-13	10PM	Lanoxin 0.125 mg	ро	Pain in right leg	C	Effective as of 11pm	<u> </u>
1-30-13	8 AM	1 tablet	ро	Pulse 54	J		
1-30-13	O AM	1 lublet	РО	Tuise 54			
					1		