

## Pharmacy Post-Op/Transfer



**Innovis Health**  
 3000 32nd Ave S  
 Fargo, ND 58104  
 Ph: (701) 364-8000

**Patient Name:** Pharmacy, Test  
**Age:** 67 Years  
**Sex:** Male  
**Ht:** 0.00 inch  
**Wt:** 0.00 kg

**Room:**  
**FIN:** 9879879  
**MRN:** 999991  
**Admit Date:**  
**Attending Phys:** CERNER, CERNER

**IBW:** 0.00 kg  
**SCr:** 0.00 mg/dL  
**CrCl:** 0.00 ml/min

**Allergies:**  
**Dx:**

### Home Medications (Prior to admission)

MD Initial To Continue	Med	Dose	Route	Freq	Start Date / Time	Stop Date / Time
	alprazolam(Xanax 0.25 mg oral tablet) as needed for anxiety	0.25 MG = 1 TAB	PO	TID	PRN 11/27/2007 14:27:48	
	atenolol(Tenormin 50 mg oral tablet) for heart	50 MG = 1 TAB	PO	BID	11/27/2007 14:28:01	
	famotidine(Pepcid 20 mg oral tablet) for gerd	20 MG = 1 TAB	PO	BID	11/27/2007 14:28:18	
	furosemide(Lasix 40 mg oral tablet) for fluid retention	40 MG = 1 TAB	PO	QDay	11/27/2007 14:28:32	
	nicotine(Nicoderm 21 mg/24 hr transdermal film, extended release) for smoking cessation	1 patch	TD	QDay	11/27/2007 14:28:48	
	potassium chloride(K-Dur 20 oral tablet, extended release) for potassium replacement	20 mEq = 1 TAB	PO	BID	11/27/2007 14:29:04	
	tramadol(Ultram 50 mg oral tablet) as needed for pain	50 MG = 1 TAB	PO	Q4H	PRN 11/27/2007 14:29:21	
	warfarin(Coumadin 2.5 mg oral tablet) for atrial fib	5 MG = 2 TAB	PO	SuTuTh	11/27/2007 14:29:50	
	warfarin(Coumadin 2.5 mg oral tablet) for atrial fib	2.5 MG = 1 TAB	PO	MWF	11/27/2007 14:29:34	

# Pharmacy Post-Op/Transfer



**Innovis Health**  
 3000 32nd Ave S  
 Fargo, ND 58104  
 Ph: (701) 364-8000

**Patient Name:** Pharmacy, Test  
**Age:** 67 Years  
**Sex:** Male  
**Ht:** 0.00 inch  
**Wt:** 0.00 kg

**Room:**  
**FIN:** 9879879  
**MRN:** 999991  
**Admit Date:**  
**Attending Phys:** CERNER, CERNER

**IBW:** 0.00 kg  
**SCr:** 0.00 mg/dL  
**CrCl:** 0.00 ml/min

**Allergies:**  
**Dx:**

## Inpatient Medications

MD Initial To Continue	Med	Dose	Route	Freq	Start Date / Time	Stop Date / Time
	AMLODIPINE (NORVASC) TAB	5 MG = 1 TAB	PO	DAILY	11/27/2007 14:31:00	
	DEXTROSE 50% INJECTION for hypoglycemic treatment when BG < 60 mg/dl (if pt cannot take orals)	12.5 GM = 25 ML	IVP	AS DIR	11/27/2007 14:34:00	
	ENOXAPARIN (LOVENOX) INJECTION	40 MG = 0.4 ML	SQ	DAILY	11/27/2007 14:32:00	12/01/2007 09:00:00
	FAMOTIDINE (PEPCID) TAB	20 MG = 1 TAB	PO	BID	11/27/2007 09:00:00	
	FERROUS SULFATE TAB	325 MG = 1 TAB	PO	BIDCC	11/27/2007 18:00:00	
	FUROSEMIDE (LASIX) TAB	40 MG = 1 TAB	PO	BID	11/27/2007 16:00:00	
	GLUCAGON (GlucaGen) INJECTION for hypoglycemic treatment of BG <60 if pt without IV access; give 1mg IM & insert IV access.	1 MG	IM	AS DIR	11/27/2007 14:34:00	
	HYDROCHLOROTHIAZIDE-LISINOPRIL 12.5-10MG (ZESTORETIC) TAB	1 TAB	PO	DAILY	11/27/2007 14:33:00	
	Insulin aspart (NovoLOG) INJECTION LOW DOSE ALGORITHM SUPPLEMENTAL INSULIN- (for pts requiring <= 40 units of insulin/day) (251-300: 2 units) (>300: 3 units) HIGH ALERT MED-DOUBLE CHECK REQUIRED	see comments	SQ	HS	11/27/2007 21:00:00	

# Pharmacy Post-Op/Transfer



**Innovis Health**  
 3000 32nd Ave S  
 Fargo, ND 58104  
 Ph: (701) 364-8000

**Patient Name:** Pharmacy, Test  
**Age:** 67 Years  
**Sex:** Male  
**Ht:** 0.00 inch  
**Wt:** 0.00 kg

**Room:**  
**FIN:** 9879879  
**MRN:** 999991  
**Admit Date:**  
**Attending Phys:** CERNER, CERNER

**IBW:** 0.00 kg  
**SCr:** 0.00 mg/dL  
**CrCl:** 0.00 ml/min

**Allergies:**  
**Dx:**

## Inpatient Medications

MD Initial To Continue	Med	Dose	Route	Freq	Start Date / Time	Stop Date / Time
	Insulin aspart (NovoLOG) INJECTION SCHEDULED INSULIN - (5 units at breakfast) ( 5units at lunch) ( 5units at dinner) SUPPLEMENTAL INSULIN (for pts requiring <= 40 units insulin/day) - (BG<60: hypoglycemic treatment) (60-65: subtrac	see comments	SQ	TID with meals	11/27/2007 18:00:00	
	Insulin glargine (LANTUS) INJECTION Do NOT mix with any other insulin prep. For SQ use only. HIGH ALERT MED-DOUBLE CHECK REQUIRED	25 UNIT = 0.25 ML	SQ	BID	11/27/2007 09:00:00	
	METOPROLOL SUCC XL (TOPROL XL) TAB	50 MG = 1 TAB	PO	DAILY	11/27/2007 14:32:00	
	POTASSIUM CHLORIDE (K-DUR 20) TAB	20 mEq = 1 TAB	PO	QDCC	11/27/2007 14:33:00	
	WARFARIN (COUMADIN) TAB	5 MG = 1 TAB	PO	DAILY	11/27/2007 16:00:00	
	ACETAMINOPHEN (TYLENOL) SUPP PO/PR for minor pain, maximum of all acetaminophen products 4000mg in 24 hours	650 MG = 1 SUPP	PR	Q4H PRN	11/27/2007 14:35:00	
	ACETAMINOPHEN (TYLENOL) TAB PO/PR for minor pain, maximum of all acetaminophen products 4000mg in 24 hours	650 MG = 2 TAB	PO	Q4H PRN	11/27/2007 14:35:00	
	DOCUSATE-SENNA 50-8.6MG (SENOKOT-S) TAB for constipation prevention	2 TAB	PO	HS PRN	11/27/2007 14:35:00	
	MILK OF MAGNESIA SUSP for constipation	30 ML	PO	AS DIR PRN	11/27/2007 14:35:00	
	OXYCODONE IR TAB for moderate pain	5 MG = 1 TAB	PO	Q4H PRN	11/27/2007 14:35:00	
	ZALEPLON (SONATA) CAP for sleep. May repeat x1	5 MG = 1 CAP	PO	HS PRN	11/27/2007 14:35:00	

# Pharmacy Post-Op/Transfer



**Innovis Health**  
3000 32nd Ave S  
Fargo, ND 58104  
Ph: (701) 364-8000

**Patient Name:** Pharmacy, Test  
**Age:** 67 Years  
**Sex:** Male  
**Ht:** 0.00 inch  
**Wt:** 0.00 kg

**Room:**  
**FIN:** 9879879  
**MRN:** 999991  
**Admit Date:**  
**Attending Phys:** CERNER, CERNER

**IBW:** 0.00 kg  
**SCR:** 0.00 mg/dL  
**CrCl:** 0.00 ml/min

**Allergies:**  
**Dx:**

---

## Inpatient Medications

MD	Initial To								
Continue	Med	Dose	Route	Freq	Start Date / Time	Stop Date / Time			

**SIGNATURE:** \_\_\_\_\_

**Date / Time:** \_\_\_\_\_