

PARENTERAL DRUGS
REGULAR PRESCRIPTIONS

DRUG SENSITIVITY

Date Given	DRUG (Block letters please)	DOSE	Time of Administration										Method and other Instructions	SIGNATURE	Discontinued	
			AM 8	AM 8.30	MD 12	PM 12.30	PM 5.30	PM 6	PM 9.30	MN 12	Other Times	Date			Date	Initials

DRUGS-ONCE ONLY PRESCRIPTIONS

Date Given	DRUG (Block letters please)	DOSE	Time of Admin.	Method of Admin.	SIGNATURE	Given by Initials

AS - ROYAL

057-050-103

Ward	Name of Patient _____										Number	
REGULAR PRESCRIPTIONS — DRUG RECORDING SHEET												
Date	6 a.m.	8.30 a.m.	12 noon	1 p.m.	3 p.m.	5.30 p.m.	6 p.m.	9.30 p.m.	12 mn.	Other Times		

WNC 766

AS - ROYAL

057-050-105

Ward	Name of Patient	REGULAR PRESCRIPTIONS — DRUG RECORDING SHEET									
		6 a.m.	8.30 a.m.	12 noon	12.30 p.m.	5.30 p.m.	6 p.m.	9.30 p.m.	12 mn.	Other Times	
	Adam Sivacan 364377										

WNC 766

AS - ROYAL

057-050-106

**PARENTERAL DRUGS
REGULAR PRESCRIPTIONS**

DRUG SENSITIVE

DRUG (Block letters please)	DOSE	Time of Administration										Method and other Instructions	SIGNATURE	Discontinued	
		AM 6	AM 8.30	MD 12	PM 12.30	PM 5.30	PM 6	PM 9.30	MN 12	Other Times	Date			Date	Initials

DRUGS-ONCE ONLY PRESCRIPTIONS

Date Given	DRUG (Block letters please)	DOSE	Time of Admin.	Method of Admin.	SIGNATURE	Given by Initials

AS - ROYAL

057-050-107