Prairie North Health Region

PHYSICIAN/RN(NP) ORDERS HOME CARE

ALLERGIES: ______________________________

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DO NOT USE	Correct Term	DO NOT USE	Correct Term	DO NOT USE	Correct Term
U, IU, u or iu	unit	cc	mL	> or <	greater than or less than
OD, QD, or qd	daily	μg	mcg	Trailing zero (X.0 mg)	Never use zeros AFTER decimal
QOD or qod	every other day	@	At	Lack of leading zero (.X mg)	Always use zeros BEFORE decimal
drug name abbreviations	do not abbreviate	OS,OD,OU	left eye, right eye, both eyes	D/C	discharge

Physician/Registered Nurse (Nurse Practitioner) Instructions: (treatment, medication, dose, frequency). Should it appear to the Registered Nurse (RN)/Registered Psychiatric Nurse (RPN)/Licensed Practical Nurse (LPN), following an injection, that an **Anaphylactic Reaction** has occurred, I authorize the RN/RPN/LPN to give a dose of Epinephrine Hydrochloride (Adrenalin) 1:1000 by intramuscular injection according to the following table:

2 to 6 months*	0.07 mL	(0.07 mg)
12 months*	0.1 mL	(0.1 mg)
18 months* to 4 years	0.15 mL	(0.15 mg)
5 years	0.2 mL	(0.2 mg)
6-9 years	0.3 mL	(0.3 mg)
10-13 years	0.4 mL	(0.4 mg)
> 14 years	0.5 mL	(0.5 mg)

* Dosage for children between the ages shown should be approximated, choosing dose volumes intermediate between those shown or the next larger dose, depending on practicability. **Epinephrine dosing can be repeated twice at 5 minute intervals if necessary for a total of three doses. Arrange for rapid transport to an emergency department. (Canadian Immunization Guidelines page 83, Seventh Edition 2006).**

DATE	TIME ORDERED	MEDICATION – DOSE – ROUTE – FREQUENCY – DURATION – INDICATION Orders and Signature

PHYSICIAN'S/RN(NP) ORDERS