

ORANGE REGIONAL MEDICAL CENTER
Physician Order FormKeyes, Gloria
2-23-51

DO NOT USE ABBREVIATIONS

U	MS	SC	QOD	QD	µg
IU	MSO ₄	MgSO ₄	SQ	SL	

Patient Label

Date & Time

12/20/19
1625**Dx:** Hypomagnesia

T.O. Dr. Maulino / Amorella

Draw CBC diff, CMP; magnesium
on Monday 12/23/19.Give 2g IV magnesium sulfate
for magnesium level less than
2(RBV) 1626
Amorella

Medications will be dispensed in accordance with the hospital formulary system

Prescriber Signature: _____ Print Name: _____ Date/Time: _____

Nurse Signature: _____ Print Name: _____ Date/Time: _____

☐ T.O. RBVFax to Pharmacy ☐

Time Faxed: _____