

**Simulation Hospital**  
Medication Administration Record

<b>Patient Name:</b> Lapp, Samuel <b>DOB:</b> 10/13/19XX <b>MR:</b> 8675309																	
<input type="checkbox"/> <b>Allergies &amp; Sensitivities:</b> <input checked="" type="checkbox"/> <b>NKA</b>																	
<b>Scheduled Medications</b>																	
Date Ordered	Medication	0700-1859	1900-0659														
	ASA 81 mg, PO (Hold for platelets < 100,000)	0900															
	Famotidine 20 mg, IV	0900	2100														
	Bumetanide 1 mg, IV (until within 1 kg of pre-op weight)	0900          1600															
	Metoprolol 25 mg, PO	1400          2200	2400          0600														
	Cefazolin 2 Gm, IV	0800          1600															
	Simvastatin 40 mg, PO	1800															
	Sliding Scale Regular Insulin per Medium Protocol (Average weight)  <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left; width: 60%;"><u>Glucose Level (mg/dl)</u></th> <th style="text-align: left;"><u>Dose</u></th> </tr> <tr> <td>60-150</td> <td>0</td> </tr> <tr> <td>151-200</td> <td>4 units</td> </tr> <tr> <td>201-250</td> <td>8 units</td> </tr> <tr> <td>251-300</td> <td>10 units</td> </tr> <tr> <td>301-350</td> <td>12 units</td> </tr> <tr> <td>351-400</td> <td>16 units</td> </tr> </table> ** For serum BS Greater than 400 mg/dL: <u>GIVE</u> present regimen for BS 351-400 mg/dL, <u>OBTAIN</u> STAT lab blood sugar and <u>CALL</u> PHYSICIAN with results	<u>Glucose Level (mg/dl)</u>	<u>Dose</u>	60-150	0	151-200	4 units	201-250	8 units	251-300	10 units	301-350	12 units	351-400	16 units	0800    1200    1700	2200
<u>Glucose Level (mg/dl)</u>	<u>Dose</u>																
60-150	0																
151-200	4 units																
201-250	8 units																
251-300	10 units																
301-350	12 units																
351-400	16 units																
	Amiodarone 200 mg, PO	0800															
	Clopidogrel 75 mg, PO	0900															
	Coumadin PO per MD order	1800															
<b>PRN Medications</b>																	
	Acetaminophen/Oxycodone 5/325 mg, 2 tabs PO Q 4 hours																
<b>IV Infusions</b>																	
	D5 0.45% NSS with 20 mEq KCl @ 75 mL/hr																
<b>Signature</b>		<b>Initials</b>															