


## Greenfield Medical Center

### Medication Administration Record

<b>Patient Name:</b> Forrester, Chris <b>DOB:</b> 09/21/19//XX <b>Age:</b> 50 years <b>MRN:</b> 99821433	<b>Wt (kg):</b> 93.2 <b>Code:</b> FULL <b>Attending:</b> Glassman, William	 <b>99821433</b>	
<input checked="" type="checkbox"/> <b>Allergies &amp; Sensitivities:</b> IV Contrast Dye <b>Reaction:</b> abdominal cramping, nausea <input type="checkbox"/> <b>NKA</b>			
<b>Scheduled Medications</b>			
<b>Medication</b>	<b>0700-1859</b>	<b>1900-0659</b>	
<b>Aspirin</b> Order Dose: <b>325 mg</b> Route: <b>PO</b> Frequency: <b>Daily</b> Last Dose: Next Dose Due: <b>Today at 0800</b> Order Start Time: <b>Today</b>			
<b>PRN Medications</b>			
<b>Nitroglycerin</b> Order Dose: <b>0.4 mg</b> Route: <b>sublingual</b> Frequency: <b>up to 3 doses, 5 minutes apart for chest pain.</b> <b>HOLD if SBP &lt;100</b> Last Dose: Next Dose Due: Order Start Time: <b>Today</b>			
<b>IV Infusions</b>			
<b>Signature</b>	<b>Initials</b>	<b>Signature</b>	<b>Initials</b>
<i>George Scheurich, BSN, RN, PHRN</i>	<i>GS</i>		