

Standard Dosage Timing:

BD 8 am - 8 pm / 10 am - 10 pm, TDS 6 am - 2 pm - 10 pm, 8am - 4pm - 12 midnight, QDS 6 am - 12 Noon - 6 pm - 12 midnight

REGULAR MEDICATIONS:

			Filled by Doctors Only								Filled by Nursing Staff								
MAR by CPT	Drug Name:	Generic Name:	Standard Time	Date 2/11/29	Date 3/11	Date 4/11/29	Date 5/11	Date	Time & Given by	Checked by	Time & Given by	Checked by	Time & Given by	Checked by	Time & Given by	Checked by	Time & Given by	Checked by	
	MOL SOL EYE DROPS	HYDROXY PROPYL METHYLCELLULOSE	6am	6:30	10am	10:30	11am	11:30	1pm		1pm		1pm		1pm		1pm		
	Dose	Route	Frequency	0.25ml eye drops b.i.d															
	Special Instructions:			2pm soft		X													
	Start Date & Time	Consultant Name	Doctor's Sign. & ID	11/10/29 8pm Dr. Ahabat	2/11/29	X													
	Stop Date & Time	Consultant Name	Doctor's Sign. & ID	10pm	soft														
				10pm	10pm														
MAR by CPT	Drug Name:	Generic Name:	Standard Time	Date 2/11/29	Date	Date 4/11/29	Date 5/11	Date 6/11	Time & Given by	Checked by	Time & Given by	Checked by	Time & Given by	Checked by	Time & Given by	Checked by	Time & Given by	Checked by	
	VENUSIA LOTION	MOLSTURIZER	6am	6:30	10am	10:30	11am	11:30	1pm		1pm		1pm		1pm		1pm		
	Dose	Route	Frequency	As req. Locally application															
	Special Instructions:			2pm soft		X													
	Start Date & Time	Consultant Name	Doctor's Sign. & ID	9/10/29 8pm Dr. Vinay	2/11/29	X													
	Stop Date & Time	Consultant Name	Doctor's Sign. & ID	10pm	soft														
				10pm	10pm														
MAR by CPT	Drug Name:	Generic Name:	Standard Time	Date 2/11/29	Date 3/11	Date 4/11	Date 5/11	Date	Time & Given by	Checked by	Time & Given by	Checked by	Time & Given by	Checked by	Time & Given by	Checked by	Time & Given by	Checked by	
	CAP. NUREWIRE	LONSTINE	6am	6:30	10am	10:30	11am	11:30	1pm		1pm		1pm		1pm		1pm		
	Dose	Route	Frequency	1cap RT O-1-0															
	Special Instructions:			2pm soft		X													
	Start Date & Time	Consultant Name	Doctor's Sign. & ID	11/10/29 10:30pm Dr. Tivadar	2/11/29	X													
	Stop Date & Time	Consultant Name	Doctor's Sign. & ID																
MAR by CPT	Drug Name:	Generic Name:	Standard Time	Date 2/11/29	Date	Date 3/11	Date 4/11/29	Date 5/11	Date	Time & Given by	Checked by	Time & Given by	Checked by	Time & Given by	Checked by	Time & Given by	Checked by	Time & Given by	Checked by
	INJ. KABIMOL	PARACETAMOL	8am	8:00															
	Dose	Route	Frequency	1gm IV 1-0-0															
	Special Instructions:			4pm		X													
	Start Date & Time	Consultant Name	Doctor's Sign. & ID	11/10/29 11am Dr. Arda	2/11/29	X													
	Stop Date & Time	Consultant Name	Doctor's Sign. & ID	12mn		X													
MAR by CPT	Drug Name:	Generic Name:	Standard Time	Date 2/11/29	Date 3/11	Date 4/11/29	Date 5/11	Date 6/11	Time & Given by	Checked by	Time & Given by	Checked by	Time & Given by	Checked by	Time & Given by	Checked by	Time & Given by	Checked by	
	FAB. METXL	METOPROLOL	10am	10:30	1pm	10:30	11am	11:30	1pm		1pm		1pm		1pm		1pm		
	Dose	Route	Frequency	25mg PO 1-0-0															
	Special Instructions:			10:30		X													
	Start Date & Time	Consultant Name	Doctor's Sign. & ID	11/10/29 1pm Dr. VR	2/11/29	X													
	Stop Date & Time	Consultant Name	Doctor's Sign. & ID																