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| **Upper Rio Grande Regional Simulation Hospital** | | Medication Administration Record  **Name:** Leyva, Jessie **MR #** 437103  **Month:**  January **Year:** 2016 **Allergies: Morphine** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Medication** | Time | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | | 27 | 28 | 29 | 30 | 31 |
| Mechanical ventilation with pressure support at 25; PEEP at 5; TV at 300; FIO2 at 50%  Prescribed By: R. Cuomo | 0700  1900 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | DN | DN | DN |  |  | D/C 19 Jan ’16 @ 0630 |  |  |  |  |  | |  |  |  |  |  |
| 1900 0700 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | NN | NN | NN |  |  |  |  |  |  |  |  | |  |  |  |  |  |
| NS at 50 ml/hr  Prescribed By: R. Cuomo | 0700  1900 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | DN | DN | DN |  |  | D/C 19 Jan ’16 @ 0630 |  |  |  |  |  | |  |  |  |  |  |
| 1900 0700 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | NN | NN | NN |  |  |  |  |  |  |  |  | |  |  |  |  |  |
| amiodarone drip, 0.5 mg/min  Prescribed By: R. Cuomo | 0700  1900 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | DN | DN | DN |  |  |  | D/C 19 Jan ’16 @ 0630 |  |  |  |  | |  |  |  |  |  |
| 1900  0700 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | NN | NN | NN |  |  |  |  |  |  |  |  | |  |  |  |  |  |
| fentanyl drip, 1 mcg/kg/hr  Prescribed By: R. Cuomo | 0700  1900 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | DN | DN | DN |  |  |  | D/C 19 Jan ’16 @ 0630 |  |  |  |  | |  |  |  |  |  |
| 1900  0700 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | NN | NN | NN |  |  |  |  |  |  |  |  | |  |  |  |  |  |
| metoprolol, 50 mg, per NG, BID  Prescribed By: R. Cuomo | 0800 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | DN | DN |  |  | D/C 19 Jan ’16 @ 0630 |  |  |  |  |  | |  |  |  |  |  |
| 2000 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | NN | NN | NN |  |  |  |  |  |  |  |  | |  |  |  |  |  |
| cefepime, 1 gm in 50 ml D5W, IVPB, every 12 hours, infuse over 30 minutes  Prescribed By: R. Cuomo | 0800 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | DN | DN |  |  |  |  |  |  |  |  | |  |  |  |  |  |
| 2000 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | NN | NN | NN |  |  |  |  |  |  |  |  | |  |  |  |  |  |
| famotidine, 20 mg in 50 ml D5W, IVPB, every 12 hours, infuse over 30 minutes  Prescribed By: R. Cuomo | 0900 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | DN | DN |  |  |  |  |  |  |  |  | |  |  |  |  |  |
| 2100 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | NN | NN | NN |  |  |  |  |  |  |  |  | |  |  |  |  |  |
| metoprolol, 50 mg, po, BID  Prescribed By: R. Cuomo | 0800 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |
| 2000 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |
| ↑ NS to 100 ml/hr  Prescribed By: R. Cuomo | 0700  1900 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |
| 1900  0700 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | NN |  |  |  |  |  |  |  |  | |  |  |  |  |  |
| **Medication** | Time | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | | 27 | 28 | 29 | 30 | 31 |
| NRB mask @ 10L/min after extubation  Prescribed By: R. Cuomo | 0700  1900 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |
| 1900  0700 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | NN |  |  |  |  |  |  |  |  | |  |  |  |  |  |

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| One-Time Orders | | | |
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| **Nurse Signature** | **Initials** | **Nurse Signature** | **Initials** | **Nurse Signature** | **Initials** |
| Nancy Nails, RN | NN |  |  |  |  |
| Doris Nunez, RN | DN |  |  |  |  |