Sample Prescriptions/Physician's Medication Orders and Guidelines

Each type of prescriptions or medication physician's orders, (routine, limited duration, PRN, discontinuation, or hold orders) have different requirements. Please ensure that all elements are contained in the prescription or physician's orders.

Routine Medications Must Include:

Dr. Prescription Heading

Consumer's Name (Patient): _____

Name of Drug: _____ Strength of Drug: _____

Dosage given_____ by what route_____ time and frequency of administration _____.

MD Signature _____ Date:_____

Limited Duration Medications Must Include:

Dr. Prescription Heading

Consumer's Name (Patient): _____

Name of Drug: _____ Strength of Drug: _____

Dosage given_____ by what route_____ time and frequency of administration _____ **number of days given _____.**

MD Signature _____ Date:_____

PRN Medications Must Include:

Dr. Prescription Heading

Consumer's Name (Patient): _____

Name of Drug: _____ Strength of Drug: _____

Dosage given_____ by what route_____ **maximum frequency of administration in a 24-hour period _____**

Condition/Behavior for administering_____.

MD Signature _____ Date: _____

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Discontinue or D/C Order Medication Must Include:

Dr. Prescription Heading

Consumer's Name (Patient): _____

Name of Drug: _____ **Statement that medication is D/C'd.**

Medication time or frequency that is being D/C's _____.

MD Signature _____ Date:_____

Hold Order Medication Must Include:

Dr. Prescription Heading

Consumer's Name (Patient): _____

Name of Drug: _____. **Statement that medication is to be held. Number of days to be held _____ Medication time or frequency that is being held _____ starting on which day _____.**

MD Signature _____ Date: _____

Important notes: Physician's orders or prescriptions can be prescribed on a Physician's Script Pad or Letterhead as well as on a Medication Recap Sheet as long as the prescription or re-cap sheet has the information described previously for each type of medication and is signed by a Physician. All changes or discontinuations made to the order or re-cap sheet must be signed by a Physician. Telephone orders are not acceptable, even when taken by a nurse. All medications must be sent in their original prescription bottles or cards. Medication bottle and card labels and cannot be altered.