

NURSE'S ORDERS, MEDICATION NOTES, AND INSTRUCTION ON REVERSE SIDE

CHARTING FOR MONTH:			Page of	
Primary Care Physician:			Telephone Number:	
Specialist(s):			Telephone Number:	
			Telephone Number:	
Allergies:				
Adverse Drug Reactions:				
Pharmacy:			Telephone Number:	
Diagnosis:				
Medicaid Number:			Medicare Number:	
Patient:			Location:	
INSTRUCTIONS	a. Put initial in appropriate box when medication given b. Circle initials when medication refused c. State reason for refusal on nurse's notes d. PRN Med: Reason given and results should be noted on Nurse's Medication Notes.	Charting Codes:	A-Charted in error B-Patient refused C-Patient out of facility D-Drug not given. Indicate reason in Nurse's Medication Notes.	E-See Nurse's Notes F-Patient did not retain medication

Date	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	Date
Temperature/Pulse																																Temperature/Pulse
Blood Pressures																																Blood Pressures

NURSE'S MEDICATION NOTES

PATCH SITE/INFECTION SITE CODES:

1-RIGHT DORSAL GLUTEUS
 2-LEFT DORSAL CLUTEUS
 3.-RIGHT VENTAL CLUTEUS

4-LEFT VENTRAL FLUTEUS
 5.-RIGHT LATERAL THIGH
 6-LEFT LATERAL THIGH

7-RIGHT DELTOID
 8-LEFT DELTOID
 9-RIGHT UPPER ARM

10-LEFT UPPER ARM
 11-RIGHT ANTERIOR THIGH
 12-LEFT ANTERIOR THIGH

13-UPPER BACK LEFT
 14-UPPER BACK RIGHT

15-UPPER CHEST LEFT
 16-UPPER CHEST RIGHT

Date/Hour	Medication/Dosage	Reason	Results/Response	Hour/Initials