

Policy for Writing Complete Medication Orders

A **complete medication order** will contain the following components:

- ❖ **Date and Time** the order was written;
- ❖ **Medication Name** (Brand or Generic);
- ❖ **Dosage Strength**;
- ❖ **Dosage Form** (only if not a solid, e.g. syrup, solution, concentrate, etc.);
- ❖ **Route of Administration**;
- ❖ **Frequency of Administration**;
- ❖ **Duration of Therapy**;
- ❖ **Indication(s) for Use** (all PRN orders are required to have an indication or reason for use);
- ❖ **Signature of Physician or Advance Practice Nurse.**

- If a medication order is changed, the previous order **MUST** be discontinued (D/C'd) and a new, **COMPLETE** medication order (as above) must be written.
- **Physician progress notes** must also be written explaining the rationale for changing medications.
- Nurses obtaining verbal and/or telephone orders must write **VO** or **TO** when transcribing. Thank You!