

ANESTHESIA PREOPERATIVE ORDERS

Date: _____ Time: _____

Kilograms

Allergies: _____ Weight: _____ lbs

1. NPO after midnight except for morning medications with a sip of water.
2. Oxygen 3 liters per minute via nasal cannula or simple mask for transport to the preoperative holding area or operating room.
3. Preoperative medication to be given on call to operating room.

4. Please have all old records and charts sent along with patient to the operating room.

Physician Signature _____ Date _____ Time _____

PROHIBITED ABBREVIATION	REQUIRED TERM	PROHIBITED ABBREVIATION	REQUIRED TERM
ug	Write Microgram	1.0	Write 1. Do not use zero after decimal point
qd, q.d.	Write Daily	Zero after decimal point	
qod	Write Every Other Day or Every 48 hrs	MS	Write Morphine
U or u	Write Units	MgSO ₄ , MSO ₄	Write Magnesium sulfate or Morphine sulfate
.5	Write 0.5 - make sure you use preceding 0	IU	Write International units
No zero before decimal point		OS, OD, OU	Write Left or right eye or both eyes
		AS, AD, AU	Write Left or right ear or both ears



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PATIENT LABEL



MR.ORDER

SVPOD-048 (12/08)