

Database Screenshots

| Patient Care Orders island health Royal Jubias Hospital 1952 Bay Street Victoria &C VBR 1JB Home Medication Reconciliation Admission | MRN: 1111111 | | | | 222 042 | | |
|---|------------------------|---|------------------------|-------------------|----------|--|--|
| Community Pharmacy: Costco - Langford | Phone | e: (250) 391-898 | o ra | XX (250 | 391-0413 | | |
| PHY SICIAN INSTRUCTIONS Please approve the following medications taken at home for continuation in the hiospital by ticking the appropriate boxes marked Yes, No or Change and Sign. If Change ticked, please with enew order on separate Physician Order sheet | | | | | | | |
| HOME MEDICATION | N PROFILE: | | | | | | |
| PRESCRIPTION and Select Over the Counter Medications (Pharmacist to Complete) | | Date/Time of Last Dose (SDC Nurse | Yes/No/Change (MRP) | | | | |
| | | with initials) | Yes | No | Change | | |
| nitroglycerin patch 0.4 mg/hr TOPICALLY On at 8 AM, Off at comments) pharmacist comments | 8 PM (med | | | | | | |
| ASA - acetyls alicylic acid 81mg PO DAILY | | | | | | | |
| natural health product 1 tab PO DAILY | | | | | | | |
| warfarin 2 mg PO DAILY | | | | | | | |
| acetaminophen 1000 mg PO QID | | | | | | | |
| ibuprofen 200mg PO BID | | | | | | | |
| salbutamol 100-200mcg INHALE Q4H PRN for shortness of | | | | | | | |
| nitroglycerin 0.4mg/spray SL AS DIRECTED PRN | | | | | | | |
| ** For Information Purposes Only - Relevant Medication Information including Vitamin/Herbal Supplements | | | | | | | |
| herbals etc | | | | | | | |
| Date and Time Physician Signature Signature: Prepared by Pharmacist: | Physician Printed Name | | | College ID Number | | | |
| Please FAX/SCAN Completed Form to Pharmacy | | | | | | | |
| Use FAX/SCAN St | tamp | | F | Page | 1 of 1 | | |

| | DISCHARGE PRESCRIPT | TION | | |
|---|--|------------------|------------------|---|
| island health | 1952 Bay Street Victoria BC V8R 1J8 | | | |
| Name: TEST PATIENT: | 3 | | 1 | |
| Age: 99 | | | 1 | |
| Gender: Female | Ward: 4s | | | |
| PHN: 999999999 | | | | |
| | | | | |
| Community Pharmacy: 0 | Costco - Lang ford | Př | none: (250) 391- | 8986 Fax: (250) 391-0413 |
| | | | | FIII Prescription: See Quantity and refills below, exceptions as follows: |
| Continue (Unchanged si | | | | |
| | hr TOPICALLY On at 8 AM, Off at 8 PM | (med comments) | | |
| pharmacist comments | 0.000 | | | |
| ac etaminophen 1000mg PC | SL AS DIRECTED PRN (mitte: 1 bottle) | | | |
| nitrogrycerin u.amg/spray : | SE AS DIRECTED PRIN (mitte: 1 bottle) | | | |
| Changed | | | | |
| warfarin 3mg PO DAILY dose increased | | | | |
| salbutamol 100-200mcg IN | UNIE ONU | | | |
| changed to regular dosing fr | | | | |
| New | | | | |
| ciprofloxacin 500mg PO BI | D (v 5 dave) | | | |
| Herbal Misc. 1 cap PO QID | • | | | |
| | | | | |
| Discontinue ASA - acetylsalicylic acid | | | | |
| ASA - acetyisancync acid | | | | |
| natural health product | | | | |
| ib uprofen | | | | |
| Discontinued due to interact | ion | | | |
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| | | | | |
| | | | | |
| Fill Prescription: Me | edication Vials OR 🗹 Blister Pack | Qty <u>28</u> | Day(s) Supp | # of Refills 0 |
| Date and Time Physi | ician Signature | Physician Printe | ed Name | College ID Number |
| | | | | |
| Drenared by Pharmacis | + | 11-Dec- | 13 17-56 | Page 1 of 1 |



Database Screenshots

| My Medication Co | | | | | |
|--|-----------|-------|--------|-----------|---------------------------|
| Last Name: PATIENT3 1952 Bay Street | | | | | |
| First Name: TEST Victoria BC V8R 138 | | | | | |
| Medication nitroglycerin patch (NitroDur, Trinipatch, Transderm- | Breakfast | Lunch | Supper | Bedtime | Information |
| Nitro) 0.4mg/hr | | | | | heart |
| Apply topically on at 8 AM and off at 8 PM (med comments) | s l | | | | |
| warfarin (Coumadin) 3mg | | | × | | Blood thinner |
| Take once daily | | | ^ | | brood diffine |
| acetaminophen (Tylenol) 1000mg Take 4 times daily | × | × | × | × | Pain control |
| salbutamol (Ventolin) 100-200mcg Inhale every 4 hours | | | | | Breathing |
| ciprofloxacin (Cipro, Cloxan) 500mg Take 2 times daily (x 5 days) | × | | | × | Antibiotic |
| Herbal Misc. (Herbal) 1 cap Take 4 times daily | × | × | × | × | |
| As Needed | • | | | | |
| nitroglycerin 0.4mg/spray Dissolve under tongue as directed As Needed (mitte: 1 bottle) | | | | | |
| Stop Taking and Reason for Stopping | • | | | | |
| ASA - acetylsalicylic acid | | | | | heart |
| natural health product | | | | | interaction with warfarin |
| ibuprofen | | | | | |
| | | | | | |
| Prepared by Pharmacist: Keri Lockhart | | | | 11-Dec-13 | 18:00 Page 1 of 1 |

Medication Calendar

Reporting Selections

