



Renal Medication Profile CURRENT MEDICATIONS

Printed on: 25-JUL-13

Printed by: ADMINISTRATOR, REI

Allergies: vancomycin (SOB & fever), Ferrlecit (intolerance- diarrhea & wt loss)

PHN: 128 925 333

NAME: APPLEWHITE, BETTY (ALFRE)

DOB: 24-APR-1950

Medications To Be Administered During Dialysis:

Start date	End date	Discont. date	Drug Name	Dose/Directions/Schedule
10-JUL-13			CALCIUM GLUCONATE POSTHD	Take 2 gram(s) every hemodialysis as necessary. IV Give x 1 dose for Cacorr less than or equal to 1.8
10-JUL-13			DARBEPOETIN ALFA (ARANESP) HD	Take 200 mcg(s) once weekly in hemodialysis unit. IV
10-JUL-13			INSULIN HUMAN REG POSTHD	Take 8 unit(s) as needed. Subcutaneous give if blood glucose greater than 15
10-JUL-13			MIDODRINE HCL HD	Take 5 mg prior to dialysis.. PO Give x 1 dose pre-dialysis. Repeat dose two hours into treatment
29-JUL-13			SODIUM FERRIC GLUCONATE (FERRLECIT) HD	Take 125 mg every 2 weeks. IV
10-JUL-13	26-JUL-13		SODIUM FERRIC GLUCONATE (FERRLECIT) HD	Take 125 mg every hemodialysis treatment FROM 10-JUL-2013 TO 26-JUL-2013. IV x 8 doses
10-JUL-13			SODIUM THIOSULFATE (SODIUM THIOSULFATE) POSTHD	Take 25 gram(s) three times a week in hemodialysis unit. IV stop dialysis 15 mins early & run over 30 minutes

Medications Patient Takes At Home:

Start date	End date	Discont. date	Drug Name	Dose/Directions/Schedule
15-JUL-13			5-ASA	Take 1 tablet(s) twice daily. PO
10-JUL-13			ACETAMINOPHEN (TYLENOL EXTRA STRENGTH)	Take 1-2 tablet(s) as needed. PO Patient buys over the counter.
10-JUL-13			ACETAMINOPHEN 325mg/OXYCODONE HCL 5mg (PERCOCET)	Take 1 tablet(s) every 4 hrs as needed. PO
10-JUL-13			ASA 81 MG ENTERIC COATED	Take 1 tablet(s) Once daily on non-dialysis days. PO
10-JUL-13			ATORVASTATIN CALCIUM (LIPITOR)	Take 20 mg at bedtime. PO
10-JUL-13			CALCITRIOL (ROCALTROL)	Take PO
10-JUL-13			CALCIUM CARBONATE 625MG (APO-CAL 250)	Take 4 tablet(s) three times a day with meals and at bedtime. PO
10-JUL-13			CHOLESTYRAMINE 4g/pkt (QUESTRAN)	Take 1 package(s) 3 times daily as needed. PO Dissolve as directed prior to use.
10-JUL-13			CLONAZEPAM	Take 0.25 mg once daily as needed. PO
10-JUL-13			CLONAZEPAM	Take 0.25 mg every morning. alternating WITH 0.5 mg at bedtime. PO
10-JUL-13			CODEINE PHOSPHATE	Take 1-2 tablet(s) every 4 hrs as needed. PO
10-JUL-13			COLCHICINE	Take 0.6 mg as needed. PO 2 tablets for attack then 1 tablet in one hour. Do not repeat within two weeks
10-JUL-13	10-JAN-14		CYCLOPHOSPHAMIDE	Take 500 mg once monthly FROM 10-JUL-2013 TO 10-JAN-2014. IV x 6 doses
10-JUL-13			DOMPERIDONE	Take 10 mg Three times a day before meals. PO Hold am dose on hemodialysis days.



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PHN: 128 925 333

NAME: APPLEWHITE, BETTY (ALFRE)

DOB: 24-APR-1950

Start date	End date	Discont. date	Drug Name	Dose/Directions/Schedule
10-JUL-13			FENTANYL PATCH	Take 25 mcg/hour every 3 days. + 12 mcg/hour every 3 days. Topical total dose = 37 mcg/hour
10-JUL-13			FERROUS SULFATE	Take 900 mg at bedtime. PO Start 300 mg for 7 days then 600 mg for 7 days then 900 mg ongoing
10-JUL-13			FLUTICASONE PROPIONATE 250MCG/SALMETEROL 25MCG (ADVAIR 250 MDI)	Take 2 puff(s) every 12 hrs. Inhale Rinse mouth after use.
10-JUL-13			HERBAL PRODUCT	Take 1 dose(s) as directed. PO CoEnzyme Q10 - patient buys OTC
10-JUL-13			HYDROCORTISONE (EMO-CORT) 2.5000%	Take 1 application twice daily as needed. Topical Written by specialist
10-JUL-13			LACTULOSE	Take 30 mL(s) every 2 hrs as needed. PO Dose until bowel movement. Use if Docusate and Bisacodyl ineffective. Use up to 6 doses per day.
10-JUL-13			LATANOPROST (XALATAN) 0.0050%	Take 1 drop(s) at bedtime. Left eye Prescribed by Dr. Mathen
10-JUL-13			METOPROLOL TARTRATE	Take 25 mg twice daily. PO Hold am dose on hemodialysis days.
10-JUL-13			NITROGLYCERIN PATCH (NITRO-DUR)	Take 0.6 mg/hr once daily. Topical Apply patch in the morning. Remove at bedtime
10-JUL-13			PERINDOPRIL (COVERSYL)	Take 8 mg at bedtime. PO
10-JUL-13			PREDNISONE	Take 50 mg once daily. PO Decrease dose by 10 mg every 2 weeks until 10 mg daily then continue 10 mg daily ongoing
10-JUL-13			REPLAVITE (REPLAVITE)	Take 1 tablet(s) at bedtime. PO
10-JUL-13			SODIUM POLYSTYRENE SULFONATE (KAYEXALATE)	Take 15-30 gram(s) as directed. PO Take only if directed by dialysis unit for emergency or missed dialysis
10-JUL-13			VANCOMYCIN	Take 2 gram(s) once weekly. Intraperitoneal in longest dwell (minimum 6 hours)
10-JUL-13			WARFARIN SODIUM (COUMADIN)	Take 1 dose(s) as directed. PO see anticoagulation sheet for current dose



Hospital Admission Physician Orders

Note: This list may not include the following type of drugs: investigational, antiretroviral, oncology, physician sample, herbal, or self selected over the counter medications. Always review the list with the patient or reliable alternative caregiver

PATIENT: APPLEWHITE, BETTY (ALFRE)

PHN: 128 925 333 25-JUL-2013 14:23
DOB: 24-APR-1950 Printed by Administrator

This report was generated from the eKHR database

DRUG ALLERGIES: vancomycin (SOB & fever), Ferrlecit (intolerance- diarrhea & wt loss)

Prescription	Directions	Continue	Discontinue	Change as Written below
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Physician's Name

College ID

Signature

Date



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Changes to above orders:

Please order additional medications on regular physician's order sheet

Fax all pages to hospital pharmacy

Physician's Name

College ID

Signature

Date