Darken in box for STAT order - >

STONY BROOK UNIVERSITY MEDICAL CENTER
Stony Brook, N.Y. 11794

* P H 2 C 0 2 6 *

PHYSICIAN'S ORDER SHEET CONTINUATION

UNIT

Date	Time	ORDERS: **Must** include physician's signature and ID# **STAT ORDERS MUST BE COMMUNICATED TO NURSE** **DO NOT USE PROHIBITED ABBREVIATIONS** **Never use: QD, qd, QOD, qod, ug, U, IU, Apothecary symbols, Apostrophe for time, BIW, TIW, decimal point without a leading zero, Trailing zero after whole number, $MS0_4$, MS, $MgSO_4$, any other drug abbreviations.**	Transcriber's Initials/ID#
		Dexrazoxane (Mylan) for DAUNOrubicin	1/1
		Indication: Prevention of anthracycline cardiomyopathy	
		Oncologic Dx:	
		Allergies:	
		Ht: _____cm Wt: _____kg BSA: _____m^2	
		Dexrazoxane given in a **15:1** ratio of DAUNOrubicin over 15 minutes.	
		Give DAUNOrubicin within 30 minutes of completion of dexrazoxane.	
		Do NOT give DAUNOrubicin before dexrazoxane.	
		DAUNOrubicin dose: _____mg/m^2 = _____mg **x15= dexrazoxane dose**	
		Give Dexrazoxane _____mg IVPB PRIOR to DAUNOrubicin as above on Day ___ (____/____/____) to Day ___ (____/____/____).	
		Mix in _____mL 0.9%NaCl & infuse over 15 min (dilute to final concentration of 1.3-5mg/mL).	

USE BALL POINT PEN ONLY AND PRINT CLEARLY

PH2CO26 (11/06)

SCAN COPY TO PHARMACY AND PLACE IN MEDICAL RECORDS