

PHYSICIAN ORDER FORM

Date	Time	Order	ABBREVIATIONS	
		ADMISSION STATUS: (please mark only one) <input type="checkbox"/> Observation or <input type="checkbox"/> Inpatient	USE	DO NOT USE
			daily	q.d. q.d.s. QD
			at bedtime	h.s. q.h.s.
			units	u
			inter-national unit	IU
			magnesium sulfate	MgSO ₄
			morphine sulfate	MSO ₄
			every other day or q48h	q.o.d. q48h
			3 times weekly	TID
			mcg or microgram	mcg
			10 mg	100 mg
			0.2 mg	2 mg

H E A L T H C A R E

Physician's Order Form
Revised 9/04