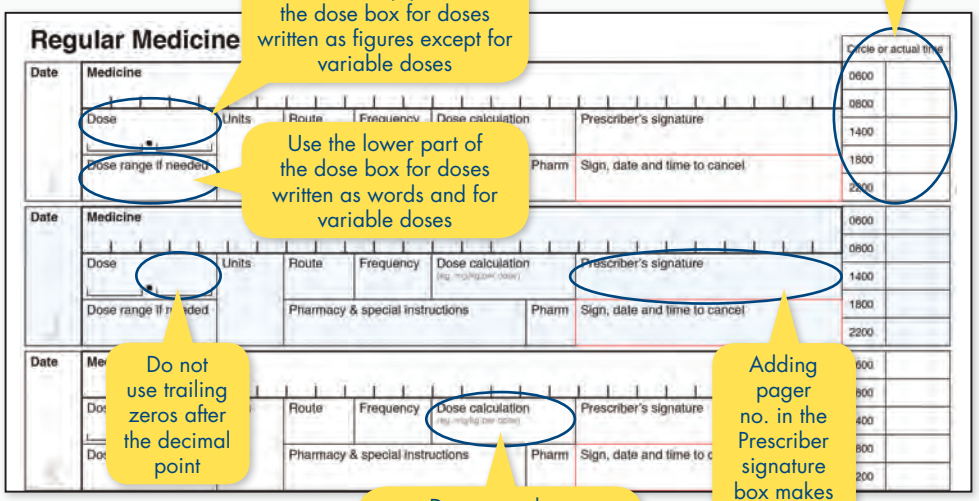
REGULAR MEDICINES



Specify administration times as well as frequency

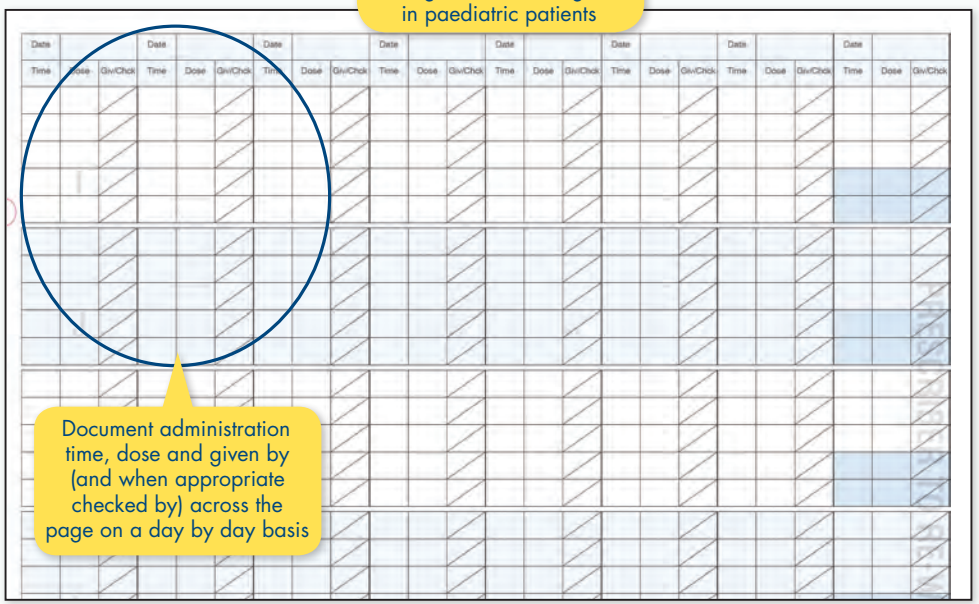
Use the top part of the dose box for doses written as figures except for variable doses

Use the lower part of the dose box for doses written as words and for variable doses

Do not use trailing zeros after the decimal point

Adding pager no. in the Prescriber signature box makes contacting easier

Document dose calculation eg, mg/kg per dose when prescribing medicines that require weight based dosing or in paediatric patients



Document administration time, dose and given by (and when appropriate checked by) across the page on a day by day basis

HEALTH QUALITY & SAFETY COMMISSION NEW ZEALAND
Kupu Taurangi Hauora o Aotearoa

National Medication Chart
YOUR INSTRUCTION GUIDE
NATIONAL MEDICATION SAFETY PROGRAMME

FRONT PAGE

Indicate if more than one medication chart is in use

Fill in date of recharting, in addition annotate old chart as re-charted, date and sign

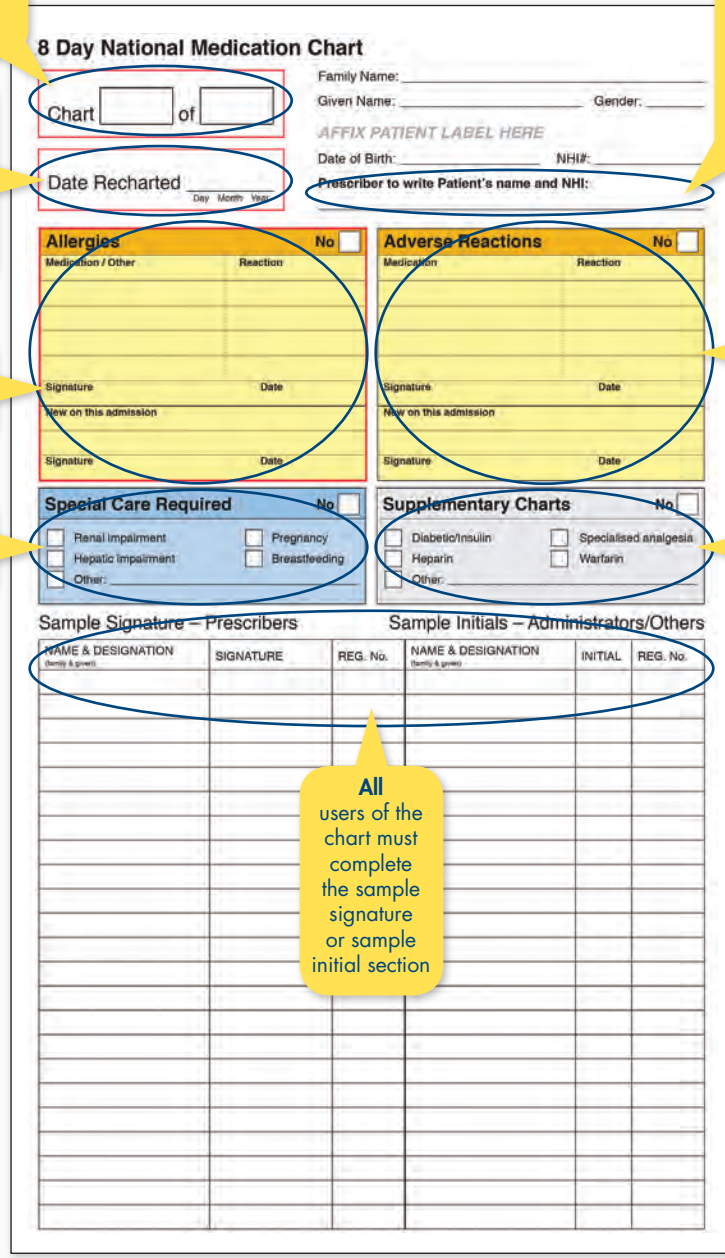
Complete the allergy box, sign and date it

Highlight if any special care is required

First prescriber must write the patient's name and double check against the patient label

Complete the adverse reactions box, sign and date it

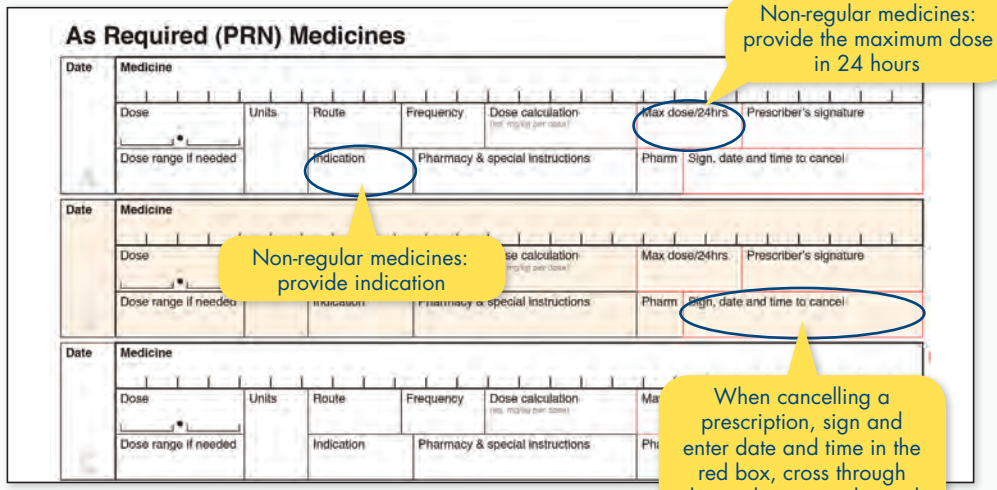
Highlight if any supplementary charts are in use



All users of the chart must complete the sample signature or sample initial section

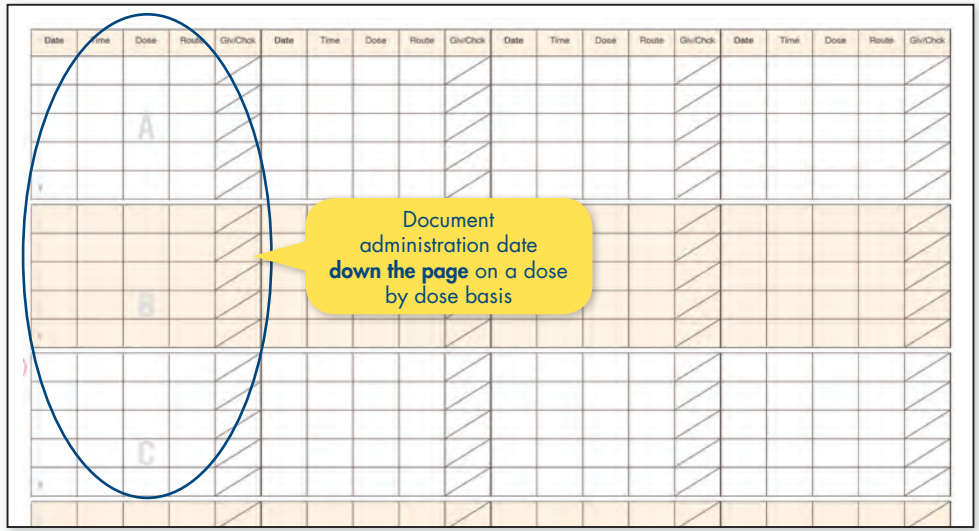
PRN MEDICINES

Non-regular medicines: provide the maximum dose in 24 hours



Non-regular medicines: provide indication

When cancelling a prescription, sign and enter date and time in the red box, cross through the medication order and administration section for that order



Document administration date **down the page** on a dose by dose basis