





## REQUIREMENTS FOR MEDICATION ORDERS: POCKET CARDS


Note: These are printable pocket cards for staff to use as a quick reference for medication order requirements. It is recommended that after printing the page, the sheet is laminated before cutting out the individual cards.


|  <b>Alberta Health Services</b> | <b>Medication Order Requirements</b><br>(September 2017) |
|--|--|
| <b>Minimum Requirements</b>  |  |
| Date   |  |
| Time   |  |
| Patient's first and last name  |  |
| One other patient identifier   |  |
| Medication name  |  |
| Dose   |  |
| Route of administration  |  |
| Frequency with no ranges of time (do not use Q3-4H)  |  |
| Prescriber's name, designation, and signature  |  |
| <b>Required if Applicable</b>  |  |
| Patient weight   |  |
| Formulation (e.g. extended release)  |  |
| Strength/concentration   |  |
| Total quantity   |  |
| Duration of the order  |  |
| Refills and intervals  |  |
| Monitoring requirements  |  |
| Hold orders include timeframe, # of doses, or clinical parameter   |  |
| Indication for medication  |  |
| <b>Recommended</b>   |  |
| Calculated dose for intermittent weight-based orders   |  |
| Dose limit/maximum within specific time period (PRN)   |  |

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For more information and policy implementation resources, please visit the website:  
[Insite > Teams > Provincial Medication Safety > Medication Management Policies > Medication Orders Policy](#)