

## REQUIREMENTS FOR MEDICATION ORDERS

All medication orders in AHS settings are to include the following information to ensure consistent practice and support patient safety. All medication orders must include the minimum requirements stated below in the left column. Depending upon the medication being ordered and the practice setting, medication orders should also include the information below in the centre column, if applicable. It is recommended practice to include the information in the right column, whenever possible.

Minimum Requirements	Required If Applicable	Recommended
<ul style="list-style-type: none"> <li>• Date</li> <li>• Time</li> <li>• Patient's first and last name</li> <li>• One other patient identifier</li> <li>• Medication name</li> <li>• Dose</li> <li>• Route of administration</li> <li>• Frequency with no ranges of time (e.g., do not use Q3-4H)</li> <li>• Prescriber's name, designation, and signature</li> </ul>	<ul style="list-style-type: none"> <li>• Patient weight</li> <li>• Formulation (e.g. extended release)</li> <li>• Strength/concentration</li> <li>• Total quantity</li> <li>• Duration of the order</li> <li>• Refills and intervals</li> <li>• Monitoring requirements</li> <li>• Hold orders include timeframe, number of doses, or clinical parameter</li> <li>• Indication for medication</li> </ul>	<ul style="list-style-type: none"> <li>• Calculated dose for intermittent weight-based orders</li> <li>• Dose limit/maximum within specific time period (PRN)</li> </ul>

For more information and policy implementation resources, please visit the website: