

McLaren Print System Order

Order No: 63051
 Order Date: 2021-06-16
 User: Patricia Peterson
 Phone: (810) 324-2193

Ship Location: McLaren Flint - P.A.T. (1 central) Attn: Tricia P.
 401 S, Ballenger Hwy.
 Flint, MI 48532

Forms

Quantity: 2500
 Paragon Dept No: 30510
 Dept Name: Pre-Admission Testing
 Company Number: 60

Order Total Price: 280.50

Item Number: MHCC-1899
 Item Description: Operating Room Medication Request
 Revision Date: 4/2019
 Print: 1 sided black and white
 Paper: 2 Part (White, Yellow)
 Size: 8.5 x 11
 Fold:
 Finish: None
 Drill: None
 Misc Info:

MCLAREN FLINT Flint, Michigan Operating Room Medication Request							
QUANTITY	DESCRIPTION	QUANTITY	DESCRIPTION	QUANTITY	DESCRIPTION		
ANTIBIOTICS							
	Cefazolin 1g/2gm	ENT DRUGS					
	Cefoxitin 600mg		Alter Nasal Spray	GENERAL STOCK DRUGS			
	Gentamycin 30mg/ml		Nex Symphrine Nasal Spray		Audene 800 75025x1		
	Ceftriaxone 1g/2gm		Bismuth Sub gelatin		Audene Flou 1gm		
	Kefzol 1gm		Ciprofloxacin 400mg		Benzyl 50 mg		
	Tobramycin 30mg/2ml		Cocaine 4% 4ml		B & O Suppository		
	Vancomycin Powder 1.2gm		Erythromycin 250mg		Chlorhexidine 2gm		
	Vancomycin 500mg		Silver Nitrate sticks		Chlorhexidine 40mg/ml		
LOCALS							
	Marsone		Caflon		Eupatil 10 ml		
	Marsone w/Epil		Topical Anesthetics		Indigo Carmine 5ml		
	Lidocaine	HEART & VASCULAR					
	Lidocaine w/Epil		Cardioprep		Metoprolol 50mg		
	Propofol 2%		Fentanyl 100mcg/ml (10ml)		Morphine 30 mg (10ml)		
	Sylte 2% Lidocaine gel		Morphine 1% 1gm		Phen 100mcg		
IRRIGATIONS							
	3% Boric acid 3000ml		Plavix 75 1000ml		Ropivacaine		
	NaCl w/Heparin 500ml		Sodium Bicarbonate 500ml		Saps-Fin		
	Bactroban 50,000U		Propofol 30mg		Surgical Powder		
	Aspic Acid 2% 15g		Propofol 50mg/5ml		Surgical Spones		
	Imasep		Propofol 250mg/25ml		Surgisol 2x3 / 2x4 / 4x4x4		
	NAC		Epinephrine		Thrombin 5,000u		
	NAC without pres. 50ml		Solumedrol 125mg		Toradol		
	ONW		Tegaserod 300mg		Toradol		
CONTINENTS							
	Bactroban 0.2% 15gm	CONTRAST					
	Bactroban 1% 15gm 5 ml		Conray 60% 50ml				
	Topc Antibiotic		Conray 200/200 1000				

Spec Info: *** Please 5 hole punch ***

Signature _____ Date _____ Time _____

OPERATING ROOM
 MEDICATION REQUEST
 MHCC-1899



01
 02
 03