

**Philadelphia Surgi-Center, Inc.**

Name: \_\_\_\_\_

DATE: \_\_\_\_\_

**Patient Home Medication List**

(Include prescriptions, over the counter, herbals, vitamins and birth control pills/patch)

**IF YOU HAVE ANY QUESTIONS ABOUT MEDICATIONS, PLEASE CALL OUR NURSE AT (215) 969-1048**

Allergies:					
Medication Name	mg per pill/capsule	How many pills/capsules per day?	How often do you take them?	Nurse's Notes	
					<input type="checkbox"/> dosage unknown
					<input type="checkbox"/> dosage unknown
					<input type="checkbox"/> dosage unknown
					<input type="checkbox"/> dosage unknown
					<input type="checkbox"/> dosage unknown
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					<input type="checkbox"/> dosage unknown

**(FOR SURGI-CENTER USE ONLY)**

**NEW PRESCRIPTIONS(Check all that apply)**

- Cipro 500mg PO BID X \_\_\_\_\_ Days
- Keflex 500mg PO QID X \_\_\_\_\_ Days
- Clindamycin 300mg PO TID X \_\_\_\_\_ Days
- Valium 2mg PO q6 hours PRN \_\_\_\_\_ #Tabs
- Percocet #5/325 1-2 PO q4 hours PRN \_\_\_\_\_ #Tabs
- Tobradex 2qtt OS/OD Q6 hours \_\_\_\_\_ #days
- Medrol Dose Pack as directed

- Phenergan 12.5mg PO q6hours PRN \_\_\_\_\_ #tabs
- Afrin 2 sprays BID \_\_\_\_\_ #days
- Augmentin 875mg PO BID \_\_\_\_\_ #days
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

*Signature Review of Medications and Allergies across the patient care continuum.*

\_\_\_\_\_  
PRE OP NURSE

\_\_\_\_\_  
PACU NURSE

\_\_\_\_\_  
ANESTHESIOLOGIST

\_\_\_\_\_  
OR NURSE

\_\_\_\_\_  
DISCHARGE NURSE

\_\_\_\_\_  
OTHER