WESTERN MARYLAND HEALTH SYSTEM
Medication Administration Record

POST-PARTUM VAGINAL DELIVERY – DR. HAIDAR

Date: _____

Date Medication Orders	Scheduled Times	0701-1500	1501-2300	2301-0700
Measles/Mumps/Rubella Immunization 0.5 mL subcutaneous, if not immune to Rubella. Give at 0900 hours on first post-partum day.				
Tdap (Adacel®) Vaccine 0.5 mL intra-muscular at 0900 hours on second postpartum day if last Td is more than two years ago or if status unknown.				
Hydrocortisone Cream (Anusol HC®) rectally as needed for hemorrhoids.				
Milk of Magnesia 30mL by mouth twice a day as needed for constipation.				
Docusate Sodium (Colace®) 100mg by mouth twice a day as needed.				
Propoxyphene 100mg/Acetaminophen 650mg (Darvocet-N 100) 1 tablet by mouth every 4 hours as needed for mild pain				
Acetaminophen (Tylenol®) 650 mg by mouth every 4 hours as needed for mild pain				
Ibuprofen (Motrin®) 600 mg by mouth every 4-6 hours as needed for pain				
Oxycodone 5 mg/Acetaminophen 325 mg (Percocet®) 1 tablet by mouth every 4 hours as needed for pain of less than 5/10 pain scale				
Oxycodone 5 mg Acetaminophen 325 mg (Percocet®) 2 tablets by mouth every 4 hours as needed for pain more than 5/10 pain scale.				

SIGNATURE	INITIALS	SIGNATURE	INITIALS