

PEDIATRIC PRESCRIPTION WRITING



MEDICATION:

name of prescribed medication and form (capsule, tablet, liquid)



ROUTE:

specify how the medication is to be given: orally (PO), nasogastric (NG), G-tube, rectal (PR), intranasal, inhaled, intra-muscular (IM), intra-venous (IV), subcutaneous (SC), topical.



Include multiple PATIENT IDENTIFIERS (name, date of birth, health care #, address)



Provider Information

Patient name Date of birth Address Date

Weight = 15 kg

Amoxicillin oral suspension 200 mg by mouth (PO) three times per day (TID) for 5 days

Dispense quantity: 15 doses

Number of refills: 0

Prescriber's signature



Dr. Smiles, MD

DOSAGE:

use the total daily dose to calculate the specific dose in mg. It is important to have the child's weight to calculate the precise dose, ensuring accurate and safe medication administration.



40 mg/kg/day x 15 kg = 600 mg/day. If TID dosing, 200 mg TID.

DURATION:

length of time the patient is instructed to take the medication.



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FREQUENCY:

how often to take the prescribed dose within a specified period.

When prescribing medication, it is imperative to clearly specify both the **dispense amount** and the **number of refills** to ensure accurate dispensing and provide clear guidance for treatment plan.