



CULLMAN
REGIONAL

PHYSICIAN'S ORDERS

NAME:
ROOM NO:
(ADDRESS)
HOSP. NO.
PHYSICIAN

Another brand of drug identical in form and content may be dispensed unless checked. ☐

MRSA Nares Screening – Preop Order Set

- MRSA Nares screening preop for elective hip, knee, and shoulder arthroplasty surgery patients unless 48 hours or less prior to surgery.

11/26/13 Approved by Orthopedic Service Line Committee

Please use Ball Point Pen ONLY

DO NOT USE: U IU QD QOD MS MSO4 MgSO4