Attachment B: Verify Order Modifications

E-Mar® for CAROLYN WATTERSTON 06-15-1999 Tuesday

Order Date Order #	Medication Name Dose, Route, Frequency Ordered By	Start Date Stop Date	Sched. Times	Dose	Shift 1 08:30 AM	Shift 2 04:45 PM	Shift 3 11:30 PM	Bypass AdSite
Verify								
Verify								

Verify Order

MEDSERV000001066 AMPICILLIN 1GM INJUD

START DATE & TIME – 06-15-99 00:00

Starting dose: (●) 06-15-99 12:00 ( ) 06-15-99 18:00

OK | Cancel | Review Order | DC Order