Food and Drug Administration
Center for Food Safety and Applied Nutrition
Office of Special Nutritionals

ARMS#

12844

8 - OTHER

[redacted]

[redacted]

PHYSICIAN ORDER

USE BALL POINT PEN ONLY

Addressograph

ALLERGIES:	
WEIGHT:	
DATE/ TIME	
	Home meds.
	Hydrochlorothiazide 25mg qd
	Tylenol #3 pen pain [redacted]
2315	K Dur 20meq po x 1 dose 2315 Done. [redacted]
	T.O. Dr. [redacted]
3/21	1) Notify Dr [redacted] of Adm.
	2) D/c HCTZ.
	3) Electrolyte panel.
	4) Transfer to [redacted] bed.
	[redacted]
3/21/98	Restart Hydrochlorothiazide 25mg po q day
	K-Dur 20 meq po q day
	V.O./DR. [redacted]

NSV-6563
4-1-98 DED
Exhibit-2

DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS

[redacted]

[redacted]

ORIGINAL

[redacted]

[redacted]

PHYSICIAN ORDER

USE BALL POINT PEN ONLY

ALLERGIES:

WEIGHT: [redacted]

DATE/ TIME	
	[redacted] Flecainide 150 mg po bid - Start this am
3/22	[redacted] 3/22/98 04 [redacted] 1315 3/22/98 [redacted]
3/23	Discharge today
	[redacted] FU ī me 1 week - [redacted]

NSV-6563
4-1-98 DED
Exhibit-2

DO NOT USE THIS SHEET UNLESS A RED NUMBER SHOWS

[redacted]

[redacted]

000003

ORIGINAL