

KUMED
3901 Rainbow Blvd.
Department of Pharmacy
Certificate of Need/Order Form

ADDRESSOGRAPH

MEDICATION SCHEDULE

BID 09-21 (alt 08-17)	Q2H ODD or EVEN Hrs	Q12H 09-21
TID 09-15-21	Q6H 00-06-12-18	(alt 01-13)
TID ac 07-11-17	(alt 09-15-21-03)	Qday 09 (alt 21)
TID pc 09-13-19	QID 09-13-17-21	QHS 21
TID w/meals 08-12-18	Q8H 06-14-22 (alt 09-17-01)	ACHS 07-11-17-21

ROOM

All orders must be written in the metric system & include date, time, physician's signature, and pager number.

NURSING:
 Fax to pharmacy.
 Record fax date/time.

ORDERS

Becaplermin (Regranex) Gel 0.01%
(Page 1 of 1)

DATE & TIME

C m p #

RPh Init

- Wound Type: Arterial ____ Venous ____ Pressure ____ Diabetic ____ Surgical ____ Burn ____
- Wound is full thickness (Stage III or Stage IV) extends through the dermis into the subcutaneous tissue or beyond. YES NO
- Wound is not infected or infection is under control with appropriate systemic antibiotic therapy. YES NO
- The patient has adequate blood flow to the affected area YES NO
- The wound is free of all avascular and necrotic debris. YES NO
- Off-loading of pressure on wound has been accomplished. YES NO
- Adequate nutrition and hydration has been assessed. YES NO
- Enterostomal Therapy (ET) Nurse (ext. 6110) has been notified _____ YES NO

PHYSICIAN ORDER/APPLICATION INSTRUCTIONS
Becaplermin (Regranex) Gel 0.01% costs (not charge) \$312.00/15 gm tube

- Every twelve- (12) hours remove the dressing and gently rinse the wound bed with saline.
- Becaplermin (Regranex) Gel 0.01% 15 gm tube – Topical application **once** daily to wound bed with saline gauze dressing (wet to moist).
- Clean wound with normal saline and gentle 4x4 wash.
- Assess and document wound findings – notify physician of any adverse reactions observed.
- Apply a continuous thin layer 1/16 " (thickness of a dime) using a tongue depressor to the wound bed and cover with moist saline dressing.
- Cover with a dry gauze pad on top of moist dressing and secure with gauze wrap or tube gauze
- Apply moist saline dressing, cover with dry gauze dressing and secure.
- Becaplermin (Regranex) requires storage in the refrigerator. Do not freeze. If left out of the refrigerator at room temperature for ≤ 20 minutes, the stability of the product is not compromised. If left out of the refrigerator ≥ 20 minutes and then refrigerated, the product should be used within 30 days. Becaplermin (Regranex) Gel 0.01% should not be left out at room temperature more than once, for the life of the tube.
- If a tube of Becaplermin (Regranex) Gel 0.01% requires disposal because of noncompliance with refrigeration conditions, an Incident Form should be completed and processed via appropriate channels.

Date _____ **Physician's Signature:** _____ **Pager: 917-**_____