updated 9/10/2010

Patient Label

Greater New Orleans Surgery Center

Michael Zeringue, M. D.

Physician Orders **Patient Name** _____

DATE	TIME	ORDERS FOR MEDICINES AND TREATMENT
		Procedure: Spinal Cord Stimulator Trials and Implants
		Admit to PACU Post surgery
		Norco 10/325 1-2 po prn pain x 1
		Return to Clinic within 5 days
		Give Handouts of "Don’ts" with Spinal Cord Stimulator
		Give Prescription of Bactrim DS before discharge

Date _____ **Physician Signature** _____