

Downtime - Understanding The Printed Downtime MAR



Key Messages

- Patient Name, UR, DOB and Allergies will be on the header of each page of the printed MAR.
- Remember to complete administrations as per **five rights of administration**
- Sign for **Scheduled medications** in the [] at the correct times
- Sign for **PRN medications** with dose and time given
- New bag orders for **Bag By Bag** infusions should be written on the AD285 paper form
- **Truly Continuous** infusions should be transcribed onto the relevant paper charts as soon as practicable during a downtime and volume infused should be documented on the Fluid Balance chart
- No administration should be documented against **Future Orders** on the downtime MAR

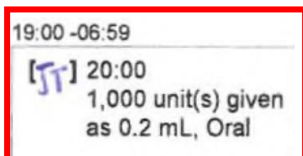
Scheduled Medication Orders

- Scheduled medication orders are printed with administration times for a 24 hour period
- The administration times are grouped in 12 hour time ranges
- Medication orders appear in alphabetical order

Documenting administration of Scheduled Medication Orders:

Scheduled administration times are indicated by a [] and the medication is due time

1. Write your initials into the [] for the administration dose.



2. ✓ indicates the medication was given prior to downtime

Testwhsrho75, Michael MR DOB: 02/02/2010 *No Known Allergies* URN: 1741145
FIN: IPE5128219

Scheduled Medication Orders ✓=completed []=due ▲=modified

31 Mar, 2021 07:00 -18:59	19:00 -06:59	1 Apr, 2021 07:00 -18:59	19:00 -06:59	2 Apr, 2021 07:00 -18:59	19:00 -06:59
✓ 13:27 75 mg Oral		✓ 09:12 75 mg Oral		[] 08:00 75 mg given as 1 tab(s), Oral	

coleciferol NOT VERIFIED BY PHARMACY
1,000 unit(s), Oral, Liquid, BD, First dose 31/03/2021 13:33:00 Ordering Provider: Tiet, Jen - PHARM

31 Mar, 2021 07:00 -18:59	19:00 -06:59	1 Apr, 2021 07:00 -18:59	19:00 -06:59	2 Apr, 2021 07:00 -18:59	19:00 -06:59
✓ 13:34 1,000 unit(s) Oral	✓ 20:00 1,000 unit(s) Oral	✓ 09:12 1,000 unit(s) Oral	[JT] 20:00 1,000 unit(s) given as 0.2 mL, Oral	[] 08:00 1,000 unit(s) given as 0.2 mL, Oral	

fentanyl NOT VERIFIED BY PHARMACY
12 microgram/hr, Transdermal, Patch, every 3 days, First dose 31/03/2021 13:34:00 Ordering Provider: Tiet, Jen - PHARM

Sedation Score (Document)
Respiratory Rate (Document)
Numeric Pain Score with Activity (Document)
Numeric Pain Score at Rest (Document)
Functional Activity Score (Document)

31 Mar, 2021 07:00 -18:59	19:00 -06:59	1 Apr, 2021 07:00 -18:59	19:00 -06:59	2 Apr, 2021 07:00 -18:59	19:00 -06:59
✓ 13:35 12 MICROg/hr Transdermal					

PRN Medication Orders

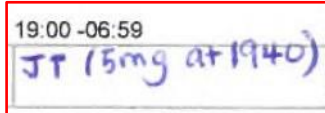
- There are no administration boxes printed for PRN medications
- Always check the order details and note the 'Max dose per 24 hours' if applicable
- **Always check the last date/time and dose a medication was given before administering a PRN medication**



Documenting administration of PRN

Medication Orders:

1. Document your initials within the 12 hour time period
2. Document **dose and time given**



Testwhsrho75, Michael MR		DOB: 02/02/2010 *No Known Allergies*		URN: 1741145 FIN: IPE5128219	
PRN Medication Orders ✓ =completed [] =due ▲ =modified					
metoclopramide NOT VERIFIED BY PHARMACY					
10 mg, Oral, Tablet, QID, PRN for nausea / vomiting, First dose 31/03/2021 13:31:00 Ordering Provider: Tiet, Jen - PHARM					
31 Mar, 2021 07:00 -18:59	19:00 -06:59	1 Apr, 2021 07:00 -18:59	19:00 -06:59	2 Apr, 2021 07:00 -18:59	19:00 -06:59
oxycodone (oxycodone immediate release oral) NOT VERIFIED BY PHARMACY					
5 - 10 mg, Oral, 2 hourly, PRN for pain, First dose 31/03/2021 13:32:00 Ordering Provider: Tiet, Jen - PHARM					
Respiratory Rate (Document) Sedation Score (Document) Numeric Pain Score with Activity (Document) Numeric Pain Score at Rest (Document) Functional Activity Score (Document)					
Order Comment: If sedation score less than 2					
31 Mar, 2021 07:00 -18:59	19:00 -06:59	1 Apr, 2021 07:00 -18:59	19:00 -06:59	2 Apr, 2021 07:00 -18:59	19:00 -06:59
			JT (5mg at 1940)		

Continuous Medication Orders

- **BAG BY BAG** infusions and **TRULY CONTINUOUS** infusions both print under the ‘Continuous Medication Orders’ heading in alphabetical order
- Always check the order if there is a set **number of bags** prescribed

BAG BY BAG Infusions

compound sodium lactate (Hartmann's) infusion (BAG BY BAG) 1,000 mL		NOT VERIFIED BY PHARMACY			
1,000 mL, IV Infusion, Rate: 250 mL/hr, 1 bag(s), First dose 31/03/2021 13:49:00, Stop date 31/03/2021 17:48:00, Total volume (mL): 1,000 Discontinue: 31/03/21 17:48					
Ordering Provider: Tiet, Jen - PHARM					
31 Mar, 2021 07:00 -18:59	19:00 -06:59	1 Apr, 2021 07:00 -18:59	19:00 -06:59	2 Apr, 2021 07:00 -18:59	19:00 -06:59
13:49 Begin Bag 1,000 mL-Bag #1 250 mL/hr *****					
JT 17:49 End bag					

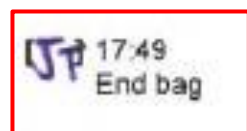
- If the bag was **BEGUN** before downtime, ‘Begin Bag’, will print out with the time, volume, **bag number** and rate
- **Bag number** is indicated by # i.e. 1 means bag number 1

Documenting administration of BAG BY BAG infusions

- **NEW** bags should be re-ordered by a medical officer on the paper Intravenous and Subcutaneous Fluid Order Form (AD 285).
For example: If the order for was 2 bag(s) and bag 1 was commenced prior to downtime and now completed – a Medical Officer should write the second bag up on AD 285 and cross out the 724 downtime MAR order.

No new bags should be commenced on the downtime MAR. Please contact the home team if a new order is required

1. When a running bag is completed, initial in the [] next to the END BAG tile.





- The End bag time is automatically calculated based on the last documented rate in the EMR and may not always be accurate (e.g. if a bolus was given during downtime.) **Document the actual time the bag was taken down.**

Ordering and administering a bolus or rate change on a BAG BY BAG infusion on the downtime MAR

- Document the time and volume to be bolused or rate to be changed
- Initial next to the order and include pager/contact number if appropriate
- Verbally communicate to nurse
- Administration of the bolus documented on the paper Fluid Balance Chart.

sodium chloride 0.9% infusion (BAG BY BAG) 500 mL					
500 mL, IV Infusion, Rate: 125 mL/hr, 1 bag(s), First dose 31/03/2021 13:48:00, Stop date 31/03/2021 17:47:00, Total volume (mL): 500 Discontinue:31/03/21 17:47					
31 Mar, 2021	19:00 -06:59	1 Apr, 2021	19:00 -06:59	2 Apr, 2021	07:00 -18:59
		10:03 Begin Bag 500 mL-Bag #1 125 mL/hr -----			
		10:15	BOLUS 250ml STAT- 14/03 12:01 End bag		

Truly Continuous Infusions

- Administrations actions (e.g. begin bag, infuse volumes, rate changes) that occurred in the EMR in the last 24 hours will print out on the downtime MAR
- In a downtime, **volumes infused are to be recorded on the paper Fluid Balance Chart**
- Truly continuous infusions should be transcribed onto the relevant paper forms as soon practicable.**

morphine sulfate (subcut additive) 60 mg + midazolam (subcut additive) 20 mg + metoclopramide (subc						NOT VERIFIED BY PHARMACY
18 mL, Subcutaneous, Rate: 0.75 mL/hr, First dose 31/03/2021 13:48:00, Total volume (mL): 18						Ordering Provider: Tiet, Jen - PHARM
<div style="border: 1px solid red; padding: 5px;"> morphine sulfate (subcut additive) 60 mg, 2 mL, 2 ampoule(s), EB midazolam (subcut additive) 20 mg, 0, EB metoclopramide (subcut additive) 20 mg, 4 mL, 2 ampoule(s), EB Sodium Chloride 0.9% subcutaneous syringe driver up to 18 mL, 1 bag(s), EB </div>						IMPORTANT Infusions with multiple additives may be cut off in the order header Always refer to the order details
Sedation Score (Document) Respiratory Rate (Document) Numeric Pain Score with Activity (Document) Numeric Pain Score at Rest (Document) Functional Activity Score (Document) Respiratory Rate (Document)						
Order Comment:SYRINGE DRIVER 1						
31 Mar, 2021	19:00 -06:59	1 Apr, 2021	19:00 -06:59	2 Apr, 2021	19:00 -06:59	
07:00 -18:59		07:00 -18:59		07:00 -18:59		
13:49 Begin Bag 18 mL-Bag #1 0.75 mL/hr -----		[] 13:49 End bag				

- Any changes on a continuous infusion order including rate changes requires the order to be crossed off on the downtime MAR and written up on the relevant paper infusion form**



Signature boxes

- This is to identify which staff members the initials/signatures below too
- This is required on **every page** of the printed MAR

Signature	Initials
JEN TIET	JT

1. PRINT name in the signature column
2. Document initials under the initials column

Future Medication Orders

- **The downtime MAR must NOT be used to document administration of Future Medications**
- A Medical Officer must write the treatment order(s) onto the appropriate paper chart
- There are no administration boxes printed for Future Medications as these are not activated and so do not have defined administration times

Future Medication Orders

✓=completed []=due ▲=modified

CYCLOPHOSPHamide + Sodium Chloride 0.9% intravenous solution 500 mL						NOT VERIFIED BY PHARMACY
(CYCLOPHOSPHamide (chemo additive) + Sodium Chloride 0.9% infusion 500 mL)						
1,060 mg, IV Infusion, Bag, chemo-Day of Tx, Infuse over 60 min(s), First dose 27/06/2023 09:15:00, Stop date 27/06/2023 09:15:00, Day 1						Ordering Provider: Cernertest, Medical Officer P2 6
Discontinue:27/06/23 09:15						
CYCLOPHOSPHamide (CYCLOPHOSPHamide (chemo additive)) 600 mg/m2, 1,060 mg, 1 EA						
Sodium Chloride 0.9% intravenous solution (Sodium Chloride 0.9% infusion) 500 mL, 1 EA						
Order Status: Future						
8 Jun, 2023 07:00 -18:59		9 Jun, 2023 07:00 -18:59		10 Jun, 2023 07:00 -18:59		
19:00 -06:59		19:00 -06:59		19:00 -06:59		

dexamethasone						NOT VERIFIED BY PHARMACY
8 mg, Oral, Tablet, chemo-Day of Tx, First dose 27/06/2023 08:30:00, Stop date 27/06/2023 08:30:00, Day 1						Ordering Provider: Cernertest, Medical Officer P2 6
Discontinue:27/06/23 08:30						
Order Status: Future						
8 Jun, 2023 07:00 -18:59		9 Jun, 2023 07:00 -18:59		10 Jun, 2023 07:00 -18:59		
19:00 -06:59		19:00 -06:59		19:00 -06:59		