C & W STANDARDIZED ORDER SET STYLE GUIDE
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PURPOSE

To ensure consistent, standardized order set development

Order Set means a standard, pre-defined order (or set of orders) which is provided in electronic format and to be printed on-demand, and have been developed and approved according to this policy. The order, or order set, contains medication or medication-related orders which, together, are considered to comprise a medication therapeutic intervention for the designated clinical circumstance. (Previously known as a Pre Printed Order [PPO])
1. Order Set Naming Conventions (Title)

Consistent naming enhances the ability of the clinician to find and choose the correct order set.

- The naming convention of an order set will be limited to a maximum of 100 characters including spaces. First letters of all words will be capitalized
- The naming convention sequence:

[Specialty] [Condition/Procedure and/or Event] [Phase/Stage] [Additional Information] (Patient Group)

- **Specialty**: spelled out where possible unless there are known abbreviations (e.g. NICU, PICU, ENT, ORTHO etc.)
- **Condition/Procedure and/or Event**: order set disease state or surgical intervention description and/or event (e.g. Admission, Transfer, Discharge, Treatment)
- **Phase/Stage**: Pre-op, Post-op, Pre-procedure, Post-procedure
- **Additional Information**: any additional information relevant to the order set name
- **Patient Group**: care area to which the orders apply will be suffixed in parenthesis (e.g. Pediatrics, Infants and Children, Neonates, Adult, Mental Health)

**NOTE:**
“Pediatrics” suffix refers to an order set that applies to any Pediatric patient, whereas “Infants & Children” or “Neonates” refer to specific subgroups of the Pediatric population (e.g. GI Bleed: Upper Admission (Pediatrics))
- Restricted order sets to a particular service or location will have a post-fix added after the purpose portion of the order set name in **all capitals and BOLD “FOR_________ONLY”** (e.g. Deep Neck Abscess-Admission- **FOR ENT ONLY**; Dopamine Low Dose Infusion- **FOR ONCOLOGY ONLY**)
- If multiple order sets apply to a condition being managed based on the existence of sub-types of the condition, each subtype will be identified by a colon (e.g. GI Bleed: Upper Admission (Inpatient))
2. Clinical Categories
A clinical category is the highest level sequence of orders displayed in PowerPlans. The following order categories are to be used in the order that they are listed. As content for order sets is developed there may be sections that do not have any orders; these sections may be omitted.
Examples of orders found in the various categories are listed - this is not a complete list
- Code status
  - Adult Code Status; Pediatric Code Status
- Status/Admit/Transfer/Discharge
  - Infection Control Precautions (e.g. Droplet & Contact etc.)
  - Spinal Precautions, Wandering Risk, Seizure Precautions etc.
- Patient Care
  - All non-vitals nursing assessment; Lines; Tubes (NG, chest tube, catheters etc.); wound care;
    IV inserts; total fluid intake; HOB, Point of Care testing etc.
- Activity
  - Bed rest with bathroom privileges; weight bearing as tolerated; positioning etc.
- Vital Signs
  - Routine vitals; cardiorespiratory monitoring; neurovital signs; postural vitals etc.
- Medications
  - All medications but excludes all continuous medication infusions
- IV Infusions
  - All IV fluids, continuous and bolus
  - Includes all continuous medication infusions (e.g. Dopamine, Epinephrine, Morphine etc.)
- Nutrition
  - Includes all diet and enteral feed orders including NPO
  - Total Fluid Intake will be in Patient Care
- Respiratory
  - Includes all oxygen therapy, ventilation orders, CPAP/BiPAP, PFT orders etc.
- Laboratory
  - All bloodwork, urine, sputum, cultures etc.
- Blood Products
  - All blood products
- Medical Imaging
  - General Radiography, Ultrasound, CT, MRI etc.
- Diagnostic Tests/Procedures
  - ECG, EMG, EEG, Audiology, Urodynamics etc.
- Allied Health
  - Dietician, Respiratory Therapist, Pharmacist, Pastoral Care etc.
- Consults
  - Physician Service consults (e.g. Infectious Diseases, Nephrology etc.)
- Communication Orders
  - “Notify Physician” communications (e.g. Notify Physician if SBP greater than 160)
- Equipment/Supplies
  - Crutches, Canes, Special Beds, Pillows, Trapeze, etc.

3. Sub Categories
A sub category is a section within a clinical category that makes clinical sense for a group of orders (e.g. Category: Medications – Sub Category: Antibiotics
4. Formatting Guidelines

4.1 General Formatting

- Use PT&N approved template for new order set creation found on http://policyandorders.cw.bc.ca/publishing
- An order or orderable, is a single, stand-alone procedure or medication and is to be indicated by a “check box” using the icons provided in the template
- Orders that are required 100% of the time are to be “pre-checked” using the icon provided in the template. Pre-checking of orders requires consensus by the Clinical Champion and working group for each order set to ensure patient safety and to optimize quality of care

NOTE: Medication orders should not be pre-checked unless clinically required
- Periods only to be used only between sentences. No periods at the end of lines
- Wherever possible, only one order per line
- If additional information is required to be added to the template, it will be placed in the header of the order set alongside weight and height (e.g. body surface area or gestational age)
- All order sentences containing pre/post-operative are written “pre-op” “post-op”
- All order sentences containing pre/post procedure are written as “pre-procedure” and “post-procedure”
- Use (round) parentheses for order comments (e.g. for children greater than 5 kg)
- Avoid using special characters and special formatting including bold or italics
  - Do not use < > =, instead use greater than, less than, equal to
  - Do not use “-” to indicate range instead use the word “to” e.g. 1 to 2 mg instead of 1 – 2 mg

4.2 Time Formatting

- Minutes and hours will be lower case and abbreviated as “h” and “min” when part of medication dosing frequencies and patient care frequencies with no spacing (e.g. q30min; q4h)
- Contextual follow up reminders which will follow with one space after the quantity (e.g. Repeat in 2 h).
- For timeframes and time sequences, there will be a space after the quantity and “minutes” and “hours” will be spelled out in lower case (e.g. q30min for 1 hour, then q1h for 4 hours, then q4h for 24 hours).
- For offset orders use a consistent unit of measurement. If less than 60 minutes use minutes, but if duration is on the hour use hour (e.g. infuse over 1 hour or infuse over 90 minutes, NOT infuse over 1.5 h)

4.3 Abbreviations

- The use of abbreviations will be avoided unless accompanied by the full term or approved by PT&N
- Refer to the Approved Abbreviations and Do Not Use Abbreviations lists on ePOPs

4.4 Reminders

- Reminders are statements which give providers and clinicians information/guidance regarding clinical best practice
- Reminders should only be used when they will add value or clarity to the decision making process at the point of order entry
- Reminders should be placed immediately above the orderable to which they apply
- Text in reminders should be succinct so to minimize reading and space taken up on the screen
  - Additional detail can be included in supporting documentation on ePOPS
- If referencing a supporting policy, provide the full title of the policy and the policy number (e.g. Seizure Protocol CC.13.15)

NOTE: Avoid over use of reminders. It may increase the length and therefore the usability of an order set
4.5 Formatting of Medication Orders

4.5.1 General

- Comply with C&W Medication Order Requirements policy (PTN.01.001) and Lower Mainland Pharmacy Services Policies and Guidelines where appropriate
- Available in Canada and on hospital formulary (Provincial Formulary)
- Drug name, dose, unit, route and frequency are required for every medication order
- Sequence of medication orders will be:
  [drug name] [dose] [unit] [ROUTE] [frequency] [PRN] [prn reason](order comments)
- PRN will be capitalized
- PRN doses will include a prn reason in lower case
- One space between dose and unit (e.g. 10 mg)
- Medications that are used chronologically, will be placed in chronological order within their subcategory (e.g. ondansetron prior to chemotherapy orders)

4.5.2 Drug Name

- Listed by Canadian generic name only (may refer to brand/trade name in brackets) except for combination products (e.g. Polysporin ointment)
- The entire drug name will be lower case
- Tallman lettering will be used according to the Drug Nomenclature Standards of the Lower Mainland Pharmacy Services policies and guidelines

4.5.3 Dose

- Doses will be documented by strength, not by the volume, number of tablets unless it is a multi-ingredient product and approved by PT&N
- Doses less than 1 will have a 0 prior to the decimal (e.g. 0.25 mg); doses greater than 1 will not have a decimal followed by a zero, but will be listed as integers (e.g. 2 mg)
- The word “to” will be used to indicate range doses (e.g. 1 to 2 mg)
- Correct drug form to be specified if necessary (e.g. controlled release tablet, suspension with concentration specified e.g. morphine 1 mg/mL oral liquid)
- Doses based on weight or body surface area will have the formula in round parenthesis at the end of the order sentence e.g. (10 mg/kg/dose)
- Maximum dose warnings for PRN or total doses in 24 hours will be written at the end of each order sentence following the weight or surface area formula dosing in round parenthesis e.g. (Maximum: 75 mg/kg/day) or (Maximum: 4 g in 24 hours)

4.5.4 Unit

- Use correct term or abbreviation method as outlined in the Medication Order Requirements policy (PTN.01.001)
- There will be one space between the numerical dose and unit of measure (e.g. 10 mg)
- Commas will be used for numbers exceeding 9999 (e.g. 1,000,000,000) for readability
4.5.5 Route and Frequency
- Route abbreviations will be all capitals (e.g. PO)
- Route without abbreviations to be lower case (e.g. intrathecal, subcutaneous)
- Refer to section 4.2 Time Formatting for standard frequency formatting
- Frequency approved abbreviations will be all capitals (e.g. BID, TID) etc.
- Frequency without abbreviations will be lower case (e.g. once daily)
- The priorities of STAT will be capitalized and listed after the route (e.g. metoprolol 5 mg IV STAT)
- Infusion length will be placed after the frequency (e.g. vancomycin 500 mg IV q8h. Infuse over 2 hours)
- Orders with a specified period of time or number of total doses to be administered will have “for” indicated time period not “x” (e.g. ampicillin 500 mg IV q6h for 3 doses; ampicillin 500 mg IV q6h for 48 hours)

4.6 Formatting of Laboratory Orders
- Laboratory sub-headings will be used as appropriate (e.g. Chemistry, Hematology, Microbiology etc.)
- Laboratory test names will be standardized according to a lab-determined set
- The source of all specimens will be assumed as blood unless otherwise specified (e.g. Urine culture and sensitivity Routine; Stool O&P etc.)
- Order details and schedule will be specified as necessary
  - CBC (on admission)
  - CBC (routine)
  - CBC (routine in AM daily for 3 days)
- If collecting samples with specific time frequency, refer to section 4.2 Time Formatting for standard frequency formatting

4.7 Formatting for Diagnostic Imaging
- The “reason for investigation” will be specified as necessary in the orderable
- Diagnostic Imaging subheading (modality) will be used as appropriate (e.g. General Radiology, CT scan, Angiography, Nuclear Medicine etc.)
## 5.1 Appendix A: Safe Medication Order Writing

### SAFE MEDICATION ORDER WRITING

- Double-check you have the correct patient chart.
- For newly admitted or transferred patients, complete or consult the "Medication Reconciliation Form" prior to prescribing.
- Review the hospital approved patient allergy and adverse reaction form.
- **Print or legibly write** medication orders using blue or black ballpoint pen.
- Write only one medication or laboratory order per line.

<table>
<thead>
<tr>
<th>Unacceptable Abbreviations and Symbols</th>
<th>Correct Term or Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug Name Abbreviations</td>
<td>Print generic drug name fully</td>
</tr>
<tr>
<td>U or IU</td>
<td>unit</td>
</tr>
<tr>
<td>QD or OD or GOD</td>
<td>daily or every other day</td>
</tr>
<tr>
<td>OS, OD, OU</td>
<td>left eye, right eye, both eyes</td>
</tr>
<tr>
<td>DIC when intended for patient discharge</td>
<td>Write “discharge patient” (D/C for discontinuation of a medication order is acceptable)</td>
</tr>
<tr>
<td>cc</td>
<td>mL or millilter or millilitre</td>
</tr>
<tr>
<td>µg</td>
<td>microgram or mcg</td>
</tr>
<tr>
<td>@</td>
<td>at</td>
</tr>
<tr>
<td>&gt; or &lt;</td>
<td>greater than, less than</td>
</tr>
<tr>
<td>Trailing Zero (X.0 mg)</td>
<td>X mg</td>
</tr>
<tr>
<td>Lack of Leading Zero (X mg)</td>
<td>0.X mg</td>
</tr>
<tr>
<td>Dosage fractions ½ or ¼ to designate part units</td>
<td>0.5 or 0.25</td>
</tr>
<tr>
<td>IT</td>
<td>intrathecal</td>
</tr>
<tr>
<td>No abbreviations for parenteral solutions, except correct terminology</td>
<td>NS or NaCl 0.9%, NaCl 0.45%, D5W, D10W, D50W, D5 RL, D5-NaCl 0.45%, D5-NaCl 0.9%, D5NS</td>
</tr>
</tbody>
</table>

### Key Required Medication Order Elements

<table>
<thead>
<tr>
<th>Patient Name and Medical Record Number</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date and Time</td>
<td></td>
</tr>
<tr>
<td>Generic Drug Name</td>
<td>Except combination products</td>
</tr>
<tr>
<td>Dose with Correct SI units</td>
<td>o Use SI units and measures</td>
</tr>
<tr>
<td>o Range orders should provide increments and clinical dosing criteria</td>
<td></td>
</tr>
<tr>
<td>Routes of Administration</td>
<td></td>
</tr>
<tr>
<td>Frequency of Dosing</td>
<td></td>
</tr>
<tr>
<td>Prescriber Signature, Printed Last Name, College ID</td>
<td>Add pager or phone number also, if possible</td>
</tr>
</tbody>
</table>

Example of a complete medication order: ibuprofen 200 mg PO q6h (10 mg/kg/dose)

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Excerpts from the C&W Policy: Medication Order Requirements
Refer to the complete policy for additional information, definitions and additional requirements.  

MAY - 2016
## 5.2 Appendix B: TALLman Lettering

**TALLMAN LETTERING**  
Last revised: October 2017

TALLman Lettering is a safety strategy to reduce the risk of medication selection errors associated with look alike – sound alike drug names. TALLman Lettering utilizes a mix of upper and lower case letters within a drug name to highlight primary dissimilarities between look alike - sound alike (LASA) medication name pairs.

<table>
<thead>
<tr>
<th>Drug Name</th>
<th>Brand Name</th>
<th>Chemical Name</th>
<th>Brand Name</th>
<th>Chemical Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>AFAitinib</td>
<td>CISplatin</td>
<td>glyBURIDE</td>
<td>metroNIDAZOLE</td>
<td></td>
</tr>
<tr>
<td>Alfentanil</td>
<td>cloBAZam</td>
<td>guaIFENasin</td>
<td>mIFERPrStone</td>
<td></td>
</tr>
<tr>
<td>ALPRAZolam</td>
<td>clomiPHENE</td>
<td>guanFACINE</td>
<td>misOPROStol</td>
<td></td>
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<tr>
<td>aMLloride</td>
<td>clomiPRAMINE</td>
<td>hydrALAZINE</td>
<td>mitoXANTRONE</td>
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</tr>
<tr>
<td>amLODIPine</td>
<td>clonazePAM</td>
<td>hydroCHLORothiazide</td>
<td>MOXifloxacin</td>
<td></td>
</tr>
<tr>
<td>ARIPiprazole</td>
<td>cloNIDine</td>
<td>HYDROCodone</td>
<td>NIFedipine</td>
<td></td>
</tr>
<tr>
<td>aXitinib</td>
<td>cloZAPine</td>
<td>HYDROMorphone</td>
<td>nilOTinib</td>
<td></td>
</tr>
<tr>
<td>azaCITIDine</td>
<td>cycloSERINE</td>
<td>hydroxYUREA</td>
<td>nilUTAmide</td>
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</tr>
<tr>
<td>azaTHI0prine</td>
<td>cycloSPORINE</td>
<td>hyoscine BUTYLbromide</td>
<td>nilMODipine</td>
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<tr>
<td>bisaCODYL</td>
<td>daBRAFenib</td>
<td>hyoscine BUTYLbromide</td>
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<td>NORepinephrine</td>
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<td>bisOPROLOL</td>
<td>DACTINomycin</td>
<td>iBRUtinib</td>
<td>NORfloxacin</td>
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<td>BUpivacaine</td>
<td>daSATinib</td>
<td>idarUClIZUmab</td>
<td>o8INutuzumab</td>
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<td>buPROPion</td>
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<td>ofATumumab</td>
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<td>busPRone</td>
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<td>iMAtinib</td>
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<td>captOPril</td>
<td>diltIAZem</td>
<td>infLIXimab</td>
<td>OXcarbazepine</td>
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<tr>
<td>carBAMazezepine</td>
<td>dimenhyDRINATE</td>
<td>ISOtretinoIn</td>
<td>oxyBUTYNIN</td>
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<tr>
<td>CARBOplatin</td>
<td>diphenhydrAMINE</td>
<td>lamIVDine</td>
<td>oxyCODONE</td>
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<tr>
<td>caRVEDILOL</td>
<td>DOBUTamine</td>
<td>lamoTRigine</td>
<td>PACLitaxel</td>
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<tr>
<td>ceFAzolin</td>
<td>DOCTetaxel</td>
<td>levETIRacetam</td>
<td>PANitumumab</td>
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<td>cefOXitin</td>
<td>ePHEdrine</td>
<td>medroxyPROGESTERone</td>
<td>penicillin G</td>
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<td>cefAzidime</td>
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<td>metFORMIN</td>
<td>penicillin V</td>
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<td>cefTRIAxone</td>
<td>flavoxATE</td>
<td>methazaMIDE</td>
<td>PERTuzumab</td>
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<td>cephaLEXin</td>
<td>FLUoxetine</td>
<td>methIMAzole</td>
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<td>chlordiazPOXIDE</td>
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<td>methylPREDNISolone</td>
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<td>fuvoxAMINE</td>
<td>methylTESTOSTERone</td>
<td>POTASSIUM</td>
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<td>chlorproPAMIDE</td>
<td>gliCLAZide</td>
<td>metOLazone</td>
<td>prednisOLONE</td>
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<tr>
<td>Common Name</td>
<td>Abbreviation</td>
<td>Trade Name</td>
<td>Brand Name</td>
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<tr>
<td>-------------</td>
<td>--------------</td>
<td>------------</td>
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</tr>
<tr>
<td>Prednisone</td>
<td>prednISONE</td>
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<td>proPOFol</td>
<td>rifaMPin</td>
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<tr>
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<td>risperiDONE</td>
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<td>QuinAPRIL</td>
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<td>romiPLOStim</td>
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<td>quinIDine</td>
<td>rOPINIRole</td>
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<tr>
<td>QuinINE</td>
<td>quinINE</td>
<td>ROpivacaine</td>
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<tr>
<td>RABeprazole</td>
<td>RABeprazole</td>
<td>sAXagliptin</td>
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<tr>
<td>Remifentanil</td>
<td>REMifentanil</td>
<td>scopolamine</td>
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</tbody>
</table>

### BRAND Names
- humaLOG
- humuLIN
- risperDAL
- solu-CORTEF
- solu-MEDROL
- TEGretol
- TRENtal
6. References

