

CARE4 MODULE NAME: Manage Transfer (*Based on New Updates to Manage Transfer*)

Transferring an Inpatient to the OR

Please note surgeons/nursing staff may not use “Hold all Orders Before Surgery”, and are to follow the below process steps.

- A. Admission from ED/Bed Reservation/Fax to the unit
- B. Surgeon to enter **Transfer** orders
 - When completing, surgeon to enter where patient will be going (i.e. “Transfer to OR”)
 - If surgeon has not done this, call to request completed

Upon receiving call from OR to send, Inpatient nurse to activate Transfer Order

Transferring an OR Patient to an Inpatient Unit

When transferring a patient from the OR to an inpatient unit –BOTH the surgeon AND anesthesiologist use the manage transfer to ensure that the patient has orders before they are physically moved to an inpatient unit. Three scenarios can occur:

Scenario 1: Non-APS Patient (the patient requires 0 orders from the PACU to continue onto the floor)

1. **Anesthesia** enters PACU orders through the normal orders routine
 - A. Note: Use the normal orders routine for orders that are to be stopped upon transfer to the unit (e.g., non-APS patients)
2. **Surgery** initiates and completes the transfer
 - A. Enter the transfer and submit the transfer order
 - B. Reconcile any orders (Note: all orders are defaulted to STOP, so the surgeon needs to explicitly specify which are to CONTINUE)
 - C. Add any new orders (likely an admission order set)
 - D. Preview the transfer; click SUBMIT, then enter your PIN
3. **Nursing** staff on Inpatient unit processes the transfer once the patient arrives (PATIENT MUST BE ON THE UNIT PRIOR TO PROCESSING)

Scenario 2: APS Patient (the patient requires all orders from the PACU to

continue onto the floor)

1. **Anesthesia** initiates the transfer
 - A. Enter the transfer and submit the transfer order
 - B. Click ADD NEW and enter any APS orders
 - C. Click SUBMIT, but prior to entering your PIN, click the “NOW” box before entering your PIN
 - D. Click SUBMIT and enter your pin
2. **Surgery** completes the transfer
 - A. Enter the transfer and submit the transfer order
 - B. Reconcile any orders (Note: all orders are defaulted to STOP, so the surgeon needs to explicitly specify which are to CONTINUE)
 - C. Add any new orders (likely an admission order set)
 - D. Preview the transfer; click SUBMIT, then enter your PIN
3. **Nursing** staff on Inpatient unit processes the transfer once the patient arrives (PATIENT MUST BE ON THE UNIT PRIOR TO PROCESSING)

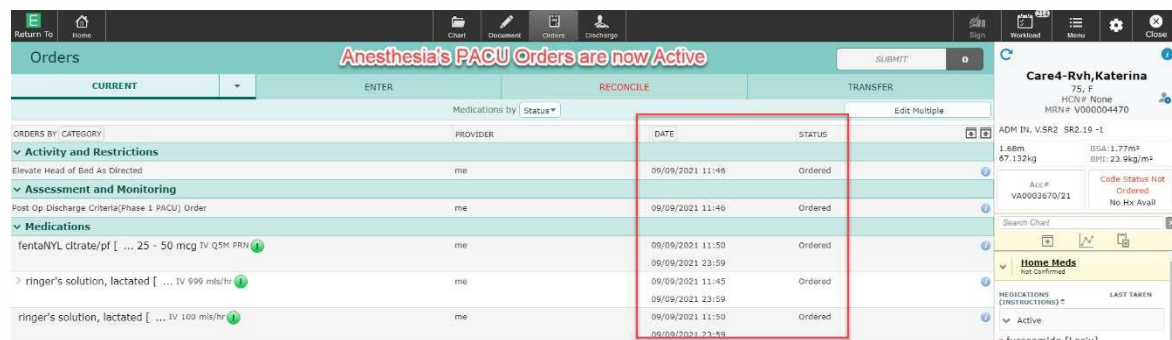
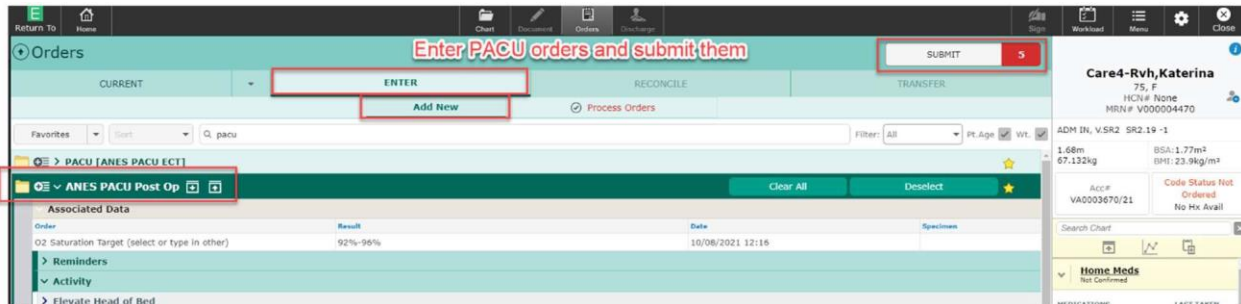
Scenario 3: APS Patient (the patient requires some orders from the PACU to continue onto the floor)

1. **Anesthesia** enters PACU orders through the normal orders routine **order this way for orders that are to STOP upon transfer**
 - A. Note: Use the normal orders routine for orders that are to be stopped upon transfer to the unit (e.g., non-APS patients)
2. **Anesthesia** initiates the transfer **order this way for orders that are to CONTINUE upon transfer**
 - A. Enter the transfer and submit the transfer order
 - B. Click ADD NEW and enter any APS orders
 - C. Click SUBMIT, but prior to entering your PIN, click the “NOW” box before entering your PIN
 - D. Click SUBMIT and enter your pin
3. **Surgery** completes the transfer
 - A. Reconcile any orders (Note: all orders are defaulted to STOP, so the surgeon needs to explicitly specify which are to CONTINUE)
 - B. Add any new orders (likely an admission order set)
 - C. Preview the transfer
 - D. Submit the transfer by entering their PIN
4. **Nursing** staff on Inpatient unit processes the transfer once the patient arrives

(PATIENT MUST BE ON THE UNIT PRIOR TO PROCESSING)

Scenario 1: Non-APS Patient (the patient requires 0 orders from the PACU to continue onto the floor)

- Anesthesia** enters PACU orders through the normal orders routine
 - Note: Use the normal orders routine for orders that are to be stopped upon transfer to the unit (e.g., non-APS patients)



- Surgery** initiates and completes the transfer
 - Enter the transfer and submit the transfer order



B. Reconcile any orders (Note: ALL orders are defaulted to STOP, so the surgeon needs to explicitly specify which are to CONTINUE)

Transfer Orders

Orders	Ordering Provider	Start	Stop	Now
	Transfer Provider			
	me	Continue	Stop	
RRT Home Oxygen Assessment Order	Lane, James, MD	26/09/2021 12:06	Upon Transfer	
	me	Continue	Stop	

Transfer Medications By Generic Name

Home Medications	Visit Medications
Reviewed	Continue All
Continue All	Hold All
bisoprolol [Monacor]	
2.5 mg PO DAILY	
Lane, James, MD	16/09/2021 09:00
me	Upon Transfer
Continue	Hold
	Stop
furosemide [Lasix]	
40 mg PO DAILY	
Lane, James, MD	15/09/2021 18:00
me	Upon Transfer
Continue	Hold
	Stop

C. Add any new orders (likely an admission order set)

Medical/Surgical Admission Clear All Deselect

Medications: Non-Opioid Analgesic/Antipyretic

- ibuprofen [Advil ; Motrin]
 - 200 - 400 mg PO Q4HR PRN
- ketorolac [Toradol]
 - 10 mg PO Q6HR PRN
 - 15 mg IV Q6HR PRN
- naproxen [Naprosyn]
 - 500 mg PO BID PRN

Medications: Miscellaneous

For patients at risk of upper GI ulceration, consider adding PPI or other cytoprotective medication when prescribing a NSAID.

- pantoprazole sodium [Pantoloc]
 - 40 mg PO DAILY SCH

Reminders

Use with caution for patients over 65 years of age.

D. Preview the transfer; click SUBMIT, then enter your PIN

Orders PROCESS TRANSFER SUBMIT

HISTORICAL ENTER RECONCILE TRANSFER

Reconcile Add New Preview

Clinical Unit to Clinical Unit

Category	Order	Provider
New	Protocol Hypoglycemia Management As Per Protocol	me
	dextrose [Dex4 Fast Acting Glucose Liquiblast] 15 g PO PROTOCOL PRN	me
	dextrose [Dex4 Fast Acting Glucose Liquiblast] 20 g PO PROTOCOL PRN	me
	glucagon 1 mg SUBCUT/IM PROTOCOL PRN	me
	glucagon 1 mg SUBCUT/IM PROTOCOL PRN	me
	dextrose 50% in water [D50w] 12.5 g IV PROTOCOL PRN	me
	dextrose 50% in water [D50w] 25 g IV PROTOCOL PRN	me
	POC Capillary Blood Glucose As Per Protocol	me
	Protocol for Diet Ordering As Per Protocol	me
	Oxygen Administration and SpO2 Target As Directed	me
Stop	Peripheral IV/ Saline Lock (Ins./Maint.) Order	me
	acetaminophen [Tylenol] 500 - 1,000 mg PO Q6HR PRN	me
	ondansetron HCl [Zofran ODT] 4 mg PO Q6HR PRN	me
	Elevate Head of Bed As Directed	me
	Post Op Discharge Criteria(Phase I PACU) Order	me
	cefazolin premix [Ancef] 1 g in 55 ml IV Q12HR 110 ml/hr SCH	me
Hold	fentaNYL citrate/pf [fentaNYL citrate] 25 - 50 mcg IV Q3M PRN	me
	ringer's solution, lactated [Lactated ... IV 999 ml/hr	me
	ringer's solution, lactated [Lactated ... IV 100 ml/hr	me
	Oxygen Administration and SpO2 Target As Directed	me
furosemide [Lasix] 20 mg Tablet 20 mg PO BID		
telmisartan 80 mg Tablet 80 mg PO DAILY		

3. Nursing staff on Inpatient unit processes the transfer once the patient arrives (PATIENT MUST BE ON THE UNIT PRIOR TO PROCESSING)

Scenario 2: APS Patient (the patient requires all orders from the PACU to continue onto the floor)

1. Anesthesia initiates the transfer

A. Enter the transfer and submit the transfer order

The screenshot shows the 'TRANSFER' tab with the following details:

- Current Orders:** Admit/ Transfer Order, me, 09/09/2021 11:56, New
- Type of Transfer or Admission:** Transfer to Inpt Unit
- Description for Type of Transfer or Admission:** Use this option to transfer patients from one inpatient unit to another. NOTE: This option is not to be used to transfer patients to mental health (MH), complex continuing care (CCC), or rehab units.
- Transfer/Admit to Service:** Surgical
- Higher Level of care:** (Empty)
- Telemetry:** (Empty)
- Other Requirements:** (Empty)

B. Click ADD NEW and enter any APS orders

The screenshot shows the 'Orders' tab with the following details:

- Order:** PCEA [ANES Epidural (Non-Obs)]
- Activity:** Ambulate Patient
- Respiratory:** Oxygen Administration and SpO2 Target
- Oxygen Administration and SpO2 Target:** As Directed, New, 27/09/2021 18:28
- Physician Instructions:** Patient may ambulate
- O2 Saturation Target (select or type in other):** 92%-96%
- Oxygen Delivery Method:** (Empty)

C. Click SUBMIT, but prior to entering your PIN, click the "NOW" box before entering your PIN

Order Summary				PROCESS TRANSFER	SAVE
HISTORICAL	ENTER	RECONCILE	TRANSFER		
ORDERS	DATE	STATUS	NOW	ALL	
Complete Blood Count Routine Specimen: Send someone from the department to collect	Upon Save	New	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oxygen Administration and SpO2 Target As Directed	Upon Save	New	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peripheral IV/ Saline Lock (Ins./Maint.) Order	Upon Save	New	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Protocol PCA As Per Protocol	Upon Save	New	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
naloxone [Narcan] 0.1 mg IV ONCE PRN	Upon Save max 1 dose	New	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
naloxone [Narcan] 0.1 mg IV Q1M PRN	Upon Save max 3 doses	New	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
morphine ... 100 mg in 100 ml IV PROTOCOL 0 mg/hr SCH	27/09/2021 19:00	New	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

D. Click SUBMIT and enter your pin

The screenshot shows the 'Orders' interface with a 'TRANSFER' button highlighted. The orders are categorized into 'New' (blue background) and 'Stop' (red background).

Category	Order Name	Frequency	Time	Route	Unit
New	bupivac 0.1%/fentaNYL 2mcg/mL [... 100 ml in 100 ml EPIDURAL PROTOCOL 6 ml/hr SCH			me	
	naloxone [Narcan] 0.1 mg IV ONCE PRN			me	
	naloxone [Narcan] 0.1 mg IV Q1M PRN			me	
	ringer's solution, lactated [Lactated ... IV 999 ml/hr			me	
	Peripheral IV/ Saline Lock (Ins./Maint.) Order			me	
	Protocol Epidural (NON-OBS) As Per Protocol			me	
Stop	Red Rest with Bathroom Privileges Routine			me	
	Weight DAILY			me	
	Congestive Heart Failure Care Plan QSHFTE			me	
	Consult Internal Medicine Order			me	
	Protocol for Diet Ordering As Per Protocol			me	
	ECHO Echocardiogram Urgent			me	
	ABC [Arterial Blood Gas] Routine			me	
	Peripheral IV/ Saline Lock (Ins./Maint.) Order			me	
	bisoprolol [Monacor] 2.5 mg PO DAILY			me	
	furosemide [Lasix] 40 mg PO DAILY			me	
	glycerin 1 supp RECTAL DAILY PRN			me	
	Insulin glargine [Lantus SoloStar] 10 unit SUBCUT BEDTIME			me	
	LORazepam [Ativan] 1 mg SUBLINGUAL Q8HR PRN			me	

2. Surgery initiates and completes the transfer

A. Enter the transfer and then reconcile any orders (Note: ALL orders are defaulted to STOP, so the surgeon needs to explicitly specify which are to CONTINUE)

The screenshot shows the 'Transfer Orders' and 'Transfer Medications' interface. The 'Transfer Orders' section shows a table with columns for 'Orders', 'Ordering Provider', 'Transfer Provider', 'Start', 'Stop', and 'Now'. The 'Transfer Medications' section shows a table with columns for 'Home Medications' and 'Visit Medications'.

Orders	Ordering Provider	Transfer Provider	Start	Stop	Now
RRT Home Oxygen Assessment Order	Lane, James, MD	me	26/09/2021 12:06	Upon Transfer	

Home Medications	Visit Medications
bisoprolol [Monacor] 2.5 mg PO DAILY	bisoprolol [Monacor] 2.5 mg PO DAILY
Lane, James, MD 16/09/2021 09:00	Lane, James, MD 16/09/2021 09:00
me Upon Transfer	me Upon Transfer
Continue Hold Stop	Continue Hold Stop
furosemide [Lasix] 40 mg PO DAILY	furosemide [Lasix] 40 mg PO DAILY
Lane, James, MD 15/09/2021 18:00	Lane, James, MD 15/09/2021 18:00
me Upon Transfer	me Upon Transfer
Continue Hold Stop	Continue Hold Stop

C. Add any new orders (likely an admission order set)

The screenshot shows the 'Medical/Surgical Admission' interface with a list of medications. The list is organized into sections: 'Medications: Non-Opioid Analgesic/Antipyretic', 'Medications: Miscellaneous', and 'Reminders'.

- Medications: Non-Opioid Analgesic/Antipyretic**
 - ibuprofen [Advil ; Motrin]
 - 200 - 400 mg PO Q4HR PRN
 - ketorolac [Toradol]
 - 10 mg PO Q6HR PRN
 - 15 mg IV Q6HR PRN
 - naproxen [Naprosyn]
 - 500 mg PO BID PRN
- Medications: Miscellaneous**
 - pantoprazole sodium [Pantoloc]
 - 40 mg PO DAILY SCH
- Reminders**
 - Use with caution for patients over 65 years of age.

D. Preview the transfer; click SUBMIT, then enter your PIN

Orders		PROCESS TRANSFER	SUBMIT
HISTORICAL	ENTER	RECONCILE	TRANSFER
	Reconcile	Add New	Preview
Clinical Unit to Clinical Unit			
New	Protocol Hypoglycemia Management As Per Protocol		me
	dextrose [Dex4 Fast Acting Glucose Liquiblast] 15 g PO PROTOCOL PRN		me
	dextrose [Dex4 Fast Acting Glucose Liquiblast] 20 g PO PROTOCOL PRN		me
	glucagon 1 mg SUBCUT/IM PROTOCOL PRN		me
	glucagon 1 mg SUBCUT/IM PROTOCOL PRN		me
	dextrose 50% in water [D50w] 12.5 g IV PROTOCOL PRN		me
	dextrose 50% in water [D50w] 25 g IV PROTOCOL PRN		me
	POC Capillary Blood Glucose As Per Protocol		me
	Protocol for Diet Ordering As Per Protocol		me
	Oxygen Administration and SpO2 Target As Directed	<input type="button" value="NOW"/>	me
Stop	Peripheral IV/ Saline Lock (Ins./Maint.) Order		me
	acetaminophen [Tylenol] 500 - 1,000 mg PO Q6HR PRN		me
	ondansetron HCl [Zofran ODT] 4 mg PO Q6HR PRN		me
	Elevate Head of Bed As Directed		me
	Post Op Discharge Criteria(Phase I PACU) Order		me
Hold	ceFAZolin premix [Ancef] 1 g in 55 ml IV Q12HR 110 ml/hr SCH		me
	fentaNYL citrate/pf [fentaNYL citrate] 25 - 50 mcg IV Q5M PRN		me
	ringer's solution, lactated [Lactated ... IV 999 ml/hr		me
	ringer's solution, lactated [Lactated ... IV 100 ml/hr		me
	Oxygen Administration and SpO2 Target As Directed		me
furosemide [Lasix] 20 mg Tablet 20 mg PO BID			
telmisartan 80 mg Tablet 80 mg PO DAILY			

3. Nursing staff on Inpatient unit processes the transfer once the patient arrives (PATIENT MUST BE ON THE UNIT PRIOR TO PROCESSING)

Scenario 3: APS Patient (the patient requires some orders from the PACU to continue onto the floor)

1. **Anesthesia** enters PACU orders through the normal orders routine **order this way for orders that are to STOP upon transfer**

A. Note: Use the normal orders routine for orders that are to be stopped upon transfer to the unit (e.g., non-APS patients)

Enter PACU orders and submit them

Current Orders: 5

Order Category: ANES PACU Post Op

Order: O2 Saturation Target (select or type in other) 92%-95% 10/08/2021 12:16

Anesthesia's PACU Orders are now Active

PROVIDER	DATE	STATUS
me	09/09/2021 11:46	Ordered
me	09/09/2021 11:46	Ordered
me	09/09/2021 11:50	Ordered
me	09/09/2021 23:59	Ordered
me	09/09/2021 11:45	Ordered
me	09/09/2021 23:59	Ordered
me	09/09/2021 11:50	Ordered
me	09/09/2021 23:59	Ordered

2. **Anesthesia** initiates the transfer **order this way for orders that are to CONTINUE upon transfer**

A. Enter the transfer and submit the transfer order

Current Orders

Admit/ Transfer Order: me 09/09/2021 11:56 New

Type of Transfer or Admission: Transfer to Inpt Unit

Description for Type of Transfer or Admission: Use this option to transfer patients from one inpatient unit to another. NOTE: This option is not to be used to transfer patients to mental health (MH), complex continuing care (CCC), or rehab units.

Transfer/Admit to Service: Surgical

Higher Level of Care: [Dropdown]

Telemetry: [Dropdown]

Other Requirements: [Dropdown]

B. Click ADD NEW and enter any APS orders

The screenshot shows the 'Orders' interface with the 'TRANSFER' tab selected. The 'Add New' button is highlighted with a red box. Below the header, there are sections for 'Patient Care', 'Activity', and 'Respiratory'. Under 'Patient Care', there is a 'Protocol Epidural (NON-OBS)' section with an 'As Per Protocol' option checked. Under 'Respiratory', there is an 'Oxygen Administration and SpO2 Target' section with an 'As Directed' option checked. The 'O2 Saturation Target' is set to '92%-96%'.

C. Click SUBMIT, but prior to entering your PIN, click the “NOW” box before entering your PIN

HISTORICAL	ENTER	RECONCILE	TRANSFER
ORDERS	DATE	STATUS	NOW <input type="checkbox"/> ALL <input type="checkbox"/>
Complete Blood Count Routine	Upon Save	New	<input checked="" type="checkbox"/> <input type="checkbox"/>
Oxygen Administration and SpO2 Target As Directed	Upon Save	New	<input checked="" type="checkbox"/> <input type="checkbox"/>
Peripheral IV/ Saline Lock (Ins./Maint.) Order	Upon Save	New	<input checked="" type="checkbox"/> <input type="checkbox"/>
Protocol PCA As Per Protocol	Upon Save	New	<input checked="" type="checkbox"/> <input type="checkbox"/>
naloxone [Narcan] 0.1 mg IV ONCE PRN	Upon Save	New	<input checked="" type="checkbox"/> <input type="checkbox"/>
naloxone [Narcan] 0.1 mg IV Q1M PRN	Upon Save	New	<input checked="" type="checkbox"/> <input type="checkbox"/>
morphine ... 100 mg in 100 ml IV PROTOCOL 0 mg/hr SCH	27/09/2021 19:00	New	<input checked="" type="checkbox"/> <input type="checkbox"/>

Order Type	Order Description	Unit
New	bupivac 0.1%/fentaNYL 2mcg/mL [... 100 ml in 100 ml EPIDURAL PROTOCOL 6 ml/hr SCH	me
	naloxone [Narcan] 0.1 mg IV ONCE PRN	me
	naloxone [Narcan] 0.1 mg IV Q1M PRN	me
	ringer's solution, lactated [Lactated ... IV 999 mls/hr	me
Stop	Peripheral IV/ Saline Lock (Ins./Maint.) Order	me
	Protocol Epidural (NON-OBS) As Per Protocol	me
	Bed Rest with Bathroom Privileges Routine	me
	Weight DAILY	me
	Congestive Heart Failure Care Plan QSHIFTE	me
	Consult Internal Medicine Order	me
	Protocol for Diet Ordering As Per Protocol	me
	ECHO Echocardiogram Urgent	me
	ABC (Arterial Blood Gas) Routine	me
	Peripheral IV/ Saline Lock (Ins./Maint.) Order	me
	bisoprolol [Monacor] 2.5 mg PO DAILY	me
	furosemide [Lasix] 40 mg PO DAILY	me
glycerin 1 supp RECTAL DAILY PRN	me	
insulin glargine [Lantus SoloStar] 10 unit SUBCUT BEDTIME	me	
LORazepam [Ativan] 1 mg SUBLINGUAL Q8HR PRN	me	

3. **Surgery** completes the transfer

A. Reconcile any orders (Note: all orders are defaulted to STOP, so the surgeon needs to explicitly specify which are to CONTINUE)

Orders	Ordering Provider	Start	Stop	Now
RRT Home Oxygen Assessment Order	Lane, James, MD	26/09/2021 12:06	Upon Transfer	<input type="checkbox"/>

Home Medications	Visit Medications
<input type="button" value="Reviewed"/> <input type="button" value="Continue All"/> <input type="button" value="Hold All"/>	bisoprolol [Monacor] 2.5 mg PO DAILY Lane, James, MD 16/09/2021 09:00 Upon Transfer <input type="button" value="Continue"/> <input type="button" value="Hold"/> <input checked="" type="button" value="Stop"/>
	furosemide [Lasix] 40 mg PO DAILY Lane, James, MD 15/09/2021 18:00 Upon Transfer <input type="button" value="Continue"/> <input type="button" value="Hold"/> <input checked="" type="button" value="Stop"/>

B. Add any new orders (likely an admission order set)

Medical/Surgical Admission Clear All Deselect

- Medications: Non-Opioid Analgesic/Antipyretic
 - ibuprofen [Advil ; Motrin]
 - 200 - 400 mg PO Q4HR PRN
 - ketorolac [Toradol]
 - 10 mg PO Q6HR PRN
 - 15 mg IV Q6HR PRN
 - naproxen [Naprosyn]
 - 500 mg PO BID PRN
- Medications: Miscellaneous
 - pantoprazole sodium [Pantoloc]
 - 40 mg PO DAILY SCH
- Reminders
 - (Use with caution for patients over 65 years of age)

C. Preview the transfer; click SUBMIT, then enter your PIN

Orders PROCESS TRANSFER SUBMIT

HISTORICAL ENTER RECONCILE TRANSFER

Reconcile Add New Preview

Clinical Unit to Clinical Unit

Status	Order	Provider
New	Protocol Hypoglycemia Management As Per Protocol	me
	dextrose [Dex4 Fast Acting Glucose Liquiblast] 15 g PO PROTOCOL PRN	me
	dextrose [Dex4 Fast Acting Glucose Liquiblast] 20 g PO PROTOCOL PRN	me
	glucagon 1 mg SUBCUT/IM PROTOCOL PRN	me
	glucagon 1 mg SUBCUT/IM PROTOCOL PRN	me
	dextrose 50% in water [D50w] 12.5 g IV PROTOCOL PRN	me
	dextrose 50% in water [D50w] 25 g IV PROTOCOL PRN	me
	POC Capillary Blood Glucose As Per Protocol	me
	Protocol for Diet Ordering As Per Protocol	me
	Oxygen Administration and SpO2 Target As Directed	me
	Peripheral IV/ Saline Lock (Ins./Maint.) Order	me
	acetaminophen [Tylenol] 500 - 1,000 mg PO Q6HR PRN	me
	ondansetron HCl [Zofran ODT] 4 mg PO Q6HR PRN	me
	ondansetron HCl [Zofran ODT] 4 mg PO Q6HR PRN	me
Stop	Elevate Head of Bed As Directed	me
	Post Op Discharge Criteria(Phase 1 PACU) Order	me
	ceFAZolin premix [Ancef] 1 g in 55 ml IV Q12HR 110 ml/hr SCH	me
	fentanyl citrate/pf [fentanyl citrate] 25 - 50 mcg IV Q5M PRN	me
	ringer's solution, lactated [Lactated ... IV 999 ml/hr	me
ringer's solution, lactated [Lactated ... IV 100 ml/hr	me	
Oxygen Administration and SpO2 Target As Directed	me	
Hold	furosemide [Lasix] 20 mg Tablet 20 mg BID	me
	telmisartan 80 mg Tablet 80 mg PO DAILY	me

4. **Nursing** staff on Inpatient unit processes the transfer once the patient arrives (PATIENT MUST BE ON THE UNIT PRIOR TO PROCESSING)