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Unit: CSON

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Pediatric Medication Worksheet – Current Medications & PRN for Last 24 Hours

Allergies: NKDA

Primary IV Fluid and Infusion Rate (ml/hr)	Circle IVF Type	Rationale for IVF	Lab Values to Assess Related to IVF	Contraindications/Complications
D5 ½ NS + 20 meq KCL/liter at 70 ml/hr	Isotonic/ Hypotonic/ Hypertonic	Maintain hydration status	K+, glucose, BUN, Creatinine	Fluid overload, cerebral edema

Generic Name	Pharmacologic Classification	Therapeutic Reason	Dose, Route & Schedule	Therapeutic Range?	IVP - List diluent solution, volume, and rate of administration IVPB - List concentration and rate of administration	Adverse Effects	Appropriate Nursing Assessment, Teaching, Interventions (Precautions/Contraindications, Etc.)
				Is med in therapeutic range?			
				If not, why?			
Ibuprofen 270mg	Non opioid analgesic	Mild to moderate pain, fever, anti-inflammatory	4- 10 mg/kg/dose q 6- 8 hr (108mg-270mg) Dose appropriate	200mg/dose Ordered dose over therapeutic range	Diluent: 0.9% NaCl, D5W, or LR. Concentration: Ibuprofen injection: Dilute the 800 mg dose in at least 200 mL and the 400 mg dose in at least 100 mL for a concentration of 4 mg/mL. Administer over 15 min.	intraventricular hemorrhage, blurred vision, tinnitus, arrhythmias, hypertension, GI BLEEDING, HEPATITIS, constipation, dyspepsia, nausea, vomiting, abdominal discomfort. cystitis, hematuria, renal failure, EXFOLIATIVE DERMATITIS, STEVENS-JOHNSON SYNDROME, TOXIC EPIDERMAL	1. Teach parents to measure appropriate dose for child 2. Give with meals to reduce risk of gastric ulcers 3. Do not give for longer than 10 days or longer than 3 days for fever 4. DO not double doses and avoid other NSAID unless instructed otherwise by physician

						NECROLYSIS, rashes, anemia, ANAPHYLAXIS.	
vMethylprednison e	Corticosteroids	Antiasthmatic	13.5 mg IV push every 12 hours	13.5mg-45.9mg/ day Yes within therapeutic range	IVP-Act-O-Vials, Univials (provided solution) or 2mL of bacteriostatic water. Rate- over 1 to several minutes	CNS :depression, euphoria, headache, increased intracranial pressure (children only), personality changes, psychoses, restlessness. CV: HTN GI: anorexia, Nausea, Peptic ulcerations Derm: acne, decreased wound healing, ecchymoses, fragility, hirsutism, petechiae. Endo: Adrenal suppression MS: muscle wasting, osteoporosis MISC: cushingoid appearance	<ol style="list-style-type: none"> 1. Caution patient/ caregiver to avoid vaccinations without first consulting a health care professional 2. Instruct caregiver on correct technique of administration. Instruct to take medication as directed. Take missed dose as soon as remembered unless almost time for next dose. Do not double doses 3. Children should have periodic evaluations of growth, may slow growth. Use lowest possible dose for shortest period. 4. Assess for signs of adrenal insufficiency before and periodically during therapy.
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