Adult/Geriatric Medication Worksheet – Current Medications & PRN for Last 24 Hours

Primary IV Fluid and Infusion Rate (ml/hr)	Circle IVF Type	Rationale for IVF	Lab Values to Assess Related to IVF	Contraindications/Complications
Lactated Ringers	Isotonic ☒ Hypotonic ☐ Hypertonic ☐	Acid-base levels imbalanced r/t infection	PH, WBCs, RBCs	Click here to enter text.

Student Name: Jennifer Griffith	Unit:	Patient Initials: E.W.	Date: 11/3/2020	Allergies: PCN, Lisinopril		
Generic Name	**Pharmacologic Classification**	**Therapeutic Reason**	**Dose, Route & Schedule**	**Correct Dose? If not, what is correct dose?**	**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.)**
Pantoprazole	Proton Pump Inhibitor	Short term gastric reflux treatment	40mg po daily			Abdominal pain, chest pain, diarrhea, constipation	1. Nurse should monitor pt bowel patterns, frequency, and duration 2. Pantoprazole has been associated with C Diff associated diarrhea; keep close eye 3. Perform abdominal/GI assessment frequently 4. Often confused with propranolol; be sure you get correct name
Enoxaparin	Anticoagulant	Used to prevent blood clots	40mg SubQ daily			Anemia, hemorrhage, hypersensitivity rxn, hematuria, Black Box Warning: can cause spinal and epidural hematomas	1. Monitor pt RBC labs to prevent anemic rxn 2. Monitor pt intake and output; primarily output to observe if urine has blood 3. Medication can cause anaphylaxis; monitor pt for 30 minutes after administration 4. Injections must be given at same time each day
Amlodipine	Antianginals	Used to treat	10mg po			Edema,	1. Angina worsening can develop after a

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		high BP and chest pain	daily			palpitations, abdominal pain	dose is started or increased 2. Use caution in pt with liver issues/impairments 3. Monitor pt cardiac function to observe for any dysrhythmia 4. Monitor pt swelling to prevent edema
Hydrochloro thiazide	Diuretics	Used to treat high BP and fluid retention	25mg po daily			Hypokalemia, electrolyte imbalance, anaphylaxis, renal failure, thrombocytope nia	1. Use caution in pt with renal impairment 2. Monitor pt for hypersensitivity to drug 30 minutes after administration 3. Monitor electrolyte levels and labs 4. Medication is often confused with hydroxychloroquine; be sure pt knows the correct name
Escitalopra m	Antidepress ant	Used to treat depression and general anxiety disorder	20mg po daily			QT Prolongation, suicidality, anaphylaxis, bleeding	1. Perform neurological assessment on pt every hour to observe any s/s suicidality 2. Monitor cardiac function to avoid QT prolongation 3. Monitor pt for s/s anaphylaxis for 30 minutes after administration 4. Monitor blood labs to avoid anemic episodes
Aspirin	Antiplatelet	Anti-	81mg po			Anaphhylaxis,	1. NSAIDs should be avoided if pt has any

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	s	inflammatory drug used for fever reduction and pain relief	daily			bleeding, GI perforation/ulcers, angioedema, nephrotoxicity, hepatotoxicity	stomach ulcers, as they cause GI bleeds 2. Monitor the patient for s/s of anaphylaxis for 30 minutes after administration 3. Use caution with pt who have liver and kidney impairments 4. Have pt inform nurse of any abnormal bleeding
Rosuvastatin	Lipid-lowering agent	Used to lower cholesterol and prevent heart and blood vessel disease	20mg every evening			Tendon rupture, hepatotoxicity, hypersensitivity, abdominal pain, constipation	1. Monitor pt bowel patterns, frequency, and duration to prevent constipation 2. Have pt inform nurse if they begin to have tendon tightening or discomfort 3. Assess pt abdomen for pain or distention 4. Use caution in pt with liver impairments
Quetiapine	Antipsychotic	Used to treat schizophrenia, bipolar disorder and depression	25mg po BID	Click here to enter text.		Black Box Warning: Dementia-Related Psychosis and Suicidality Risk, anaphylaxis, QT prolongation,	1. Nurse should assess pt neurological capabilty every hour due to increased suicidality and psychosis risk 2. Monitor pt for s/s of anaphylaxis 30 minutes after administration 3. Assess pt cardiac function to observe any dysrhythmias or any heart abnormalities

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						hyperglycemia	4. Monitor pt blood sugar to prevent high blood sugar; have pt report s/s including increased thirst, frequent urination, and fatigue
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