

Student Name: Lindsey Lambert

Unit: S8

Pt. Initials: \_\_\_\_\_

Date: 12/16

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

Allergies: Propoxyphene

Primary IV Fluid and Infusion Rate (ml/hr)	Circle IVF Type	Rationale for IVF	Lab Values to Assess Related to IVF	Contraindications/Complications
D5 + 1/2 NS      100ml/hr	Isotonic/ Hypotonic/ Hypertonic	Fluid replacement	Blood sugar Sodium and potassium levels	Hypervolemia Hyperatremia

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.)
Aspirin	NSAID	Pain relief	325mg Ng tube Daily	Y N	/	Rash  Abdominal pain  Gastrointestinal ulceration	<ol style="list-style-type: none"> <li>1. Assess patient for bleeding</li> <li>2. Drink adequate fluid</li> <li>3. Baby aspirin is preferred for acute or prophylactic mgmt of heart disease</li> <li>4. Avoid alcohol when prescribed high doses</li> </ol>
Zosyn  Piperacilin + tazo	Antibiotic	Treat bacterial Infection	3.375g IVPB Q8hr	Y N	Sodium chloride 0.9% 100ml  Run at 25ml/hr	Diarrhea  GI upset	<ol style="list-style-type: none"> <li>1. Not compatible with lactated ringer LR</li> <li>2. Contraindicated if pt is on dialysis</li> <li>3. Not compatible with gentamicin</li> <li>4. Treats streptococci and staphylococcus</li> </ol>
Simvastatin	Antilipemic Agent  HMG CoA reductase inhibitors	High Cholesterol	20mg Ng tube QHS	Y N	/	Abdominal pain  Headache  Constipation	<ol style="list-style-type: none"> <li>1. Can increase creatine phosphokinase in blood specimen</li> <li>2. Dr might suggest a cholesterol lowering diet regimen before medication</li> <li>3. Give at bedtime</li> <li>4. Take with meal</li> </ol>
Enoxaparin	Low molecular weight heparin	Anticoagulant	30mg SubQ Daily	Y N	/	Edema  Fatigue  Hypoglycemia	<ol style="list-style-type: none"> <li>1. Monitor bp</li> <li>2. Be caution if patient with liver disease</li> <li>3. Do not expel air from syringe prior to admin</li> <li>4. Use prefilled syringe, do not transfer or change. Discard if integrity is impaired.</li> </ol>
Pantoprazole	Proton pump Inhibitor  PPI	Decreases acid production in stomach	40 mg IVP daily	Y N	Reconstitute with 10ml NS  Admin over 2 min	Headache  Excess air/gas  Feeling full	<ol style="list-style-type: none"> <li>1. Concomitant use with rilpivirine.</li> <li>2. This drug allows damaged tissue in esophagus, stomach, and duodenum to heal</li> <li>3. No dosage adjustment needed in kidney, liver, or elderly</li> <li>4. Prolonged treatment may cause B12 deficiency</li> </ol>

Adopted: August 2016

Reference; Medscape, Lexicomp

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**Allergies:** \_\_\_\_\_

Generic Name	Pharmacologic Classification	Therapeutic Reason	Dose, Route & Schedule	Correct Dose? If not, what is correct dose?	IVP – List solution to dilute and rate to push. IVPB – List mL/hr and time to give	Adverse Effects	Appropriate Nursing Assessment, Teaching, Interventions (Precautions/Contraindications, Etc.)
				Y N			1. 2. 3. 4.
				Y N			1. 2. 3. 4.
				Y N			1. 2. 3. 4.
				Y N			1. 2. 3. 4.
				Y N			1. 2. 3. 4.