

Student Name: Nadison Gage

Unit: 3N

Pt. Initials: _____

Date: 11/13/2021

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

Allergies: NO KNOWN ALLERGIES

Primary IV Fluid and Infusion Rate (ml/hr)	Circle IVF Type	Rationale for IVF	Lab Values to Assess Related to IVF	Contraindications/Complications
	Isotonic/Hypotonic/Hypertonic			

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?			
Insulin Lispro	rapid-acting insulin pancreatitis	Anti-hyperglycemic	sliding scale, subQ, ACHS	0.5 - 1 unit/kg/day	yes	/	hypoglycemia, site reactions, vasopressin(h), VBL, Hypo-kaluremia	1. Give within 15 minutes of a meal 2. Monitor for s/s of hypoglycemia 3. Teach patient how to admin 4. Teach patient how long needles are good for
Insulin Glargine	Long-acting insulin pancreatitis	Anti-hyperglycemic	12 units (0-12mg) subQ, ACHS	0.5 - 1 unit/kg/day	no, on other insulin products	/	hypoglycemia, irritation at site, back pain, diarrhea, headache	1. Check blood sugar before admin 2. Teach patient not to mix this insulin 3. onset is one hour, so time food 4. Rotate injection sites
Fluticasone	corticosteroid	Anti-inflammatory	1 spray each nostril, nose, Q24	1 spray each nostril	yes	/	headache, nose bleeds, throat pain, fever, cough	1. should not be used for acute symptoms 2. Monitor for s/s of infection 3. Instruct patient to take at the same time 4. Yellout decreased growth
fexofenadine	2nd gen H1 antagonist	Anti-histamine	180 mg, PO, daily	180 mg daily	yes	/	headache, vomiting, drowsiness, VBL, fever	1. Call before getting up if drowsiness 2. take w/ water, no juice 3. avoid aluminum/magnesium products for 30 minutes after 4. relieve headache
mirabegron	Beta 2 agonist	urinary tract antispasmodic	25 mg, PO, daily	25 mg daily	yes	/	HTN, tachycardia, constipation, HA, UTI, CVA	1. Monitor for s/s of UTI 2. retention possible if combined w/ other overactive bladder drugs 3. Monitor BP 4. Monitor s/s urinary retention

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

Allergies: Lactarium

~~★~~ 2nd Patient's meds

Generic Name	Pharmacologic Classification	Therapeutic Reason	Dose, Route & Schedule	Therapeutic Range?		IVP - List solution to dilute and rate to push. IVPB - concentration and rate of administration	Adverse Effects	Appropriate Nursing Assessment, Teaching, Interventions (Precautions/Contraindications, Etc.)
				Is med in therapeutic range?	If not, why?			
Acyclovir	Guanosine nucleoside analog	Antiviral	350mg, PO, QID	20 mg/kg / Q 8	Yes	/	Diarrhea, Headache, Malaise, Thrombocytopenia, renal failure	1. Monitor for nausea/vomiting 2. Maintain hydration 3. Take w/ or w/ food 4. Shake well
Micafungin	guanine synthesis inhibitor	Antifungal	16.5 (16.5mg) mc/hr, IVPB, Q 24	1mg/kg/day	yes	IVPB 1mg/mL, 16.5 mc/hr	Acidosis, Hypokalemia, Nausea, vomiting, sepsis	1. Monitor for renalasis 2. Monitor for hepatic impairment 3. Monitor for fever 4. Monitor ANC levels
Onabotulinum A	5-HT3 receptor antagonist	Antiemetic	2.5mg, IVP, Q 8	0.15 mg/kg	yes	IVP 5mc US over 2-5 minutes	Constipation, headache, hypotonia, malaise, prolonged QT	1. Not w/ use of ampicillin 2. Monitor SIS or cardiac arrhythmias 3. Return in 15-30 min to reassess 4. Auscultate for V bowel activity
								1. 2. 3. 4.

* 2nd patient's meds