

Primary IV Fluid and Infusion Rate (mL/hr)	Circle IVF Type	Rational for IVF	Lab Values to Assess Related to IVF	Contraindications/Complications
NS 100 mL/hour	€ Isotonic € Hypotonic € Hypertonic	Maintenance Fluid	*CMP	*congestive heart failure *renal impairment *liver cirrhosis *sodium retention

Student Name: Bergan Gunter	Unit:	Patient Initials:	Date: 2/23/2021	Allergies: Vancomycin			
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, ETS.)
Prednisone (Deltasone)	Adrenal Glucocorticoid and Endocrine - Metabolic Agent	Used to treat a number of different conditions, such as inflammation, blood or bone marrow problems, stomach or bowel problems	50mg PO	yes		* Hypertension * Body fluid retention, increased appetite, and weight gain * Osteoporosis * Disturbance in mood * Impaired wound healing * At risk for infection	1. Take with food, and don't divide, or chew 2. Consult physician before receiving vaccines due to drug-induced immunosuppression 3. Avoid drinking alcohol and cigarette smoking, as this may increase risk for osteoporosis 4. Drug may cause anxiety, depression, euphoria, irritability, headache,

							insomnia, double vision, cataracts and glaucoma
<p>Docusate Sodium (Colace)</p>	<p>*Laxative</p> <p>*Stool Softener</p>	<p>Stool softener</p>	<p>100mg PO</p> <p>*PO</p> <p>*Enema</p>	<p>yes</p>		<p>*Abnormal taste in mouth (bitter)</p> <p>*Cramp, D/N</p> <p>*Hepatotoxicity (Rare)</p>	<p>1. Tell patient that the drug usually works with 1-2 days, but may take up to 5 days. (Report if no BM occurs)</p> <p>2. Tell the patient to report any rectal bleeding</p> <p>3. Patient should not be used longer than 1 week unless instructed by doctor</p> <p>4. The patient should maintain adequate hydration. (drug works by pulling water into the stool)</p>
<p>Rosuvastatin Calcium (Crestor)</p>	<p>*Antihyperlipidemic</p> <p>*HMG-COA Reductase Inhibitor (statins)</p>	<p>Slow the production of cholesterol . Reduce the chances of developing heart disease and stroke caused by high</p>	<p>*40mg PO</p> <p>2 20mg tab</p> <p>*PO</p> <p>*Nasogastric</p>	<p>yes</p>		<p>*Myalgia (muscle ache)</p> <p>*Asthenia (abnormal physical weakness or lack of energy)</p> <p>*High hemoglobin A1c level</p>	<p>1. Report symptoms of liver injury</p> <p>2. Don't take 2 doses within 12 hours or each other</p> <p>3. Lipid panel: 2-4 weeks after initiation and after dosage adjustment</p> <p>4. Monitor Liver and Kidney labs</p>

		cholesterol				<ul style="list-style-type: none"> *Pancreatitis *Increased liver enzymes *Liver failure *Acute renal failure *Hematuria 	
Ferrous Sulfate (Feosol)	*Iron Supplement	Used to treat or prevent low blood levels of iron	325mg PO	yes		<ul style="list-style-type: none"> ***Black box warning but it only pertains to children under the age of 6*** *Abdominal pain, Constipation, Nausea, Upset stomach, Vomiting *Gastrointestinal Hemorrhage 	<ol style="list-style-type: none"> 1. Tell patient to report black or dark-colored stool (could be a sign of gastrointestinal hemorrhage) 2. Monitor iron levels 3. Have patient report any changes in BM 4. Monitor for iron overload symptoms (joint pain, abdominal pain, irregular heart rhythm, bronze ashen-gray green skin color changes)
Paroxetine Hydrochloride (Paxil)	*Antidepressant *Serotonin Reuptake Inhibitor	Used to treat depression	20mg PO	yes		<ul style="list-style-type: none"> *Loss of appetite *Blurred vision *Constipation , D/N 	<ol style="list-style-type: none"> 1. Tell patient to report worsening depression, suicidal ideation, of therapy or with dose changes

						<ul style="list-style-type: none"> *Dizziness *Insomnia *Suicidal thoughts *Steven Johnson syndrome (A painful rash that spreads and blisters) 	<ol style="list-style-type: none"> 2. Advise patient against sudden discontinuation of drug this may precipitate withdrawal symptoms 3. Avoid alcohol while taking this drug (can increase the nervous system side effects dizziness, drowsiness, and difficulty concentrating) 4. Monitor patient for any changes in mood and behavior. This can tell you if the medication is working or if they are experiencing side effects (ex. Serotonin syndrome, suicidal thoughts)
Peri-Colace	<ul style="list-style-type: none"> *laxative *Stool softener 	Stool softener and laxative	8.6mg/50mg PO 1tab	yes		<ul style="list-style-type: none"> * Rectal bleeding * Severe stomach pain * Gas * Bloating 	<ol style="list-style-type: none"> 1. Report if you have no BM 2. Report any rectal bleeding 3. Don't take more than 7 days in a row unless your doctor tell you to 4. The patient should maintain adequate hydration.

Protonix	<ul style="list-style-type: none"> *Gastric Acid Secretion Inhibitor *Proton Pump Inhibitor 	Decreases the amount of acid in the stomach which relieves symptoms of heartburn, difficulty swallowing , and persistent cough	<p>40mg PO</p> <ul style="list-style-type: none"> *PO *IVP: over 2min *Nasogastric *IV infusion 	yes		<ul style="list-style-type: none"> *Abdominal pain *Flatulence *C diff *Tubulointerstitial nephritis 	<ol style="list-style-type: none"> 1. Teach patient to report diarrhea that does not improve 2. Side effects may include headache, diarrhea, nausea, abdominal pain, vomiting, flatulence, dizziness, arthralgia, rash, and fever 3. Tell patient to report symptoms of Tubulointerstitial Nephritis (excessive urination, fever and or rash) 4. Have patient report symptoms of tremors, weakness, and exhaustion (hypomagnesemia symptoms)
Wellbutrin XL	<ul style="list-style-type: none"> *Aminoketone *Antidepressant *Smoking Cessation Agent 	Treat depression	150mg PO	yes		<ul style="list-style-type: none"> *Tachyarrhythmia *Constipation *Arthralgia *Dizziness *Confusion *Insomnia *tremors *Cardiac dysrhythmia 	<ol style="list-style-type: none"> 1. Advise patient to avoid activities requiring mental alertness or coordination until drug effects are realized 2. Dose should be taken at the same time every day 3. Avoid taking this right

						*Seizure	before bed (to avoid insomnia) 4.If you miss a dose skip it and take the next one at the same time as usual 5. Avoid alcohol
Zyloprim (Allopurinol)	*Antigout *Xanthine Oxidase Inhibitor	Lowers levels of uric acid *for gout	300mg PO	Yes		*Pruritus *Renal Failure *Hepatic necrosis *Aplastic anemia	1. Advise patient to report skin rash 2. Avoid activity requiring mental alertness or coordination as drug may cause drowsiness 3.Take drug after meals to reduce gastric irritation 4. Monitor BUN and Creatinine