

## 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
N/A	Isotonic <input type="checkbox"/> Hypotonic <input type="checkbox"/> Hypertonic <input type="checkbox"/>	N/A	N/A	N/A

<b>Student Name:</b> Jacob Zarazua	<b>Unit:</b> South 5	<b>Patient Initials:</b> CJ	<b>Date:</b> 3/31/2021	<b>Allergies:</b> Penecillin
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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.)
Albumin Human	Volume Expander	Acute Respiratory distress syndrome, Ascities, Hemodialysis, Cardiopulmonary bypass operation	IV infusion 100ml/hr 50ml over 2 hrs.	Yes	IVPB: 25% Solution Flexbumin 100mL/ 50mL over 2hrs.	Endocrine Metabolic: Hypovolemia Immunologic: Hypersensitivity reaction	1. Monitor BP, due to rapid rise in BP may occur. 2. Circulatory overload, or cardiac overload, (headache, dyspnea, jugular venous distention, rales and abnormal elevation in systemic or central venous blood pressure) 3. Conditions where hypervolemia and/or hemodilution may occur may require dose and infusion rate adjustment 4. Do not dilute product with sterile water for injection as there is risk of hemolysis, including potentially fatal cases, and acute renal failure in recipients.
Aztreonam Inj.	Antibiotic	Cystic fibrosis, Dz due to Gram-negative bacteria, Endometritis,	Iv Infusion 100mL/hr 50mL over 30 min	Yes	IVPB: Rate of 100mLs/hr Volume 50mLs Duration of 30 min.	Cardiovascular: chest discomfort (8%) Gastrointestinal: Abdominal pain (7%), Vomiting	1. Culture check and susceptibility information may predict efficacy. 2. Instruct patient to report signs/symptoms of bronchospasm (inhalation formulation)

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		Peritonitis				(6%), Renal: Serum creatinine raised (5.8%) Respiratory: Cough (54%),	3. Instruct patient to report signs/symptoms of thrombophlebitis, pancytopenia, or hepatotoxicity 4. Instruct patient to report severe diarrhea and consult healthcare professional prior to taking anti-diarrhea medicine.
Metronidazole	Antibacterial	Abscess, Anaerobic, Amebic dysentery, Infection due to Anaerobic bacteria, Infection of bone;	Iv Infusion 100mL/hr Volume 100 mL/hr duration of an 1 hr.	Yes	IVPB: Rate is 100mL/hr Volume 100mL/hr	Abdominal discomfort, Abnormal taste in mouth, diarrhea, dizziness,	1. Black box warning, has been shown to be carcinogen in mice and rats. Its use, therefore, should be reserved for only for conditions for which it is approved 2. Stay away from alcohol 3. check liver enzymes, look for s/s for liver injury, abdominal pain, nausea, change in stool color or jaundice 4. Monitor Vital signs along with mental status.
Bumex	Loop Diuretic	Primarily is to treat Hypertension in CHF. Along with treating Edema	Inj. 2.5mg/ 10ml Vial	Choose an item.  yes	IVP: 2mg/ 8ml	Hypotension, hyperuricemia, nausea, cramp, Hypokalemia	1. Black box warning, Is a potent diuretic which, if given is excessive amounts, can lead to a profound diureses with water and electorolyte depletion. 2. Look for improvements of edema has gone down.

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		associated with Chf, hepatic and renal dz, including nephrotic syndrome					<ol style="list-style-type: none"> <li>3. Serum for potassium/ electrolytes periodically</li> <li>4. Renal fuctions, signs for liver damage</li> </ol>
Solmedrol	Adrenal Glucocorticoid, Endocrine-metabolic Agent	Allergic condition, severe or intractable, Inflammatory disorder of musculoskeletal systme, disorder of endocrine systemt	40 mg Daily	Yes	IVP: 40mg	Hypertension, Atrophic conditon of skin, impaired wound healing, Body fluid retention, decreased body growth, hypernatremia, hypokalemia	<ol style="list-style-type: none"> <li>1. Hyperglycemia with chronic therapy</li> <li>2. s/s of hypothalamic- pituitary adrenal (HPA) axis suppression and cushing syndrome: with chronic therapy</li> <li>3. blood pressure, watch frequently</li> <li>4. hypokalemia</li> </ol>
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Choose an item.  Click here to enter text.	Click here to enter text.	Click here to enter text.	<ol style="list-style-type: none"> <li>1. Click here to enter text.</li> <li>2. Click here to enter text.</li> <li>3. Click here to enter text.</li> <li>4. Click here to enter text.</li> </ol>

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