

Student Name: Greg Kelly

Unit: NICU

Pt. Initials: B.G.

Date: 2/7/15

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

Allergies: NKA

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 Ranges?		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?			
Amoxicillin Gammacylin	Antibiotic	Infection	500mg IVPB Q 24H	2.5 mg/kg/d Q 12-24	<input checked="" type="checkbox"/>	IVPB 30-2 hr	OTOPHRY WPOUTS HYPOTENSION N/V	1. VRE CALL FIRST TO SETUP 2. REPORT RISING IN PWR 3. MONITOR BLOOD PRESSURE 4. REPORT N/V
Amoxicillin D/C			400mg PO Q 12H		<input checked="" type="checkbox"/>		H/A DIZZINESS DYSRHYTHMIA N/V	1. VRE CALL FIRST TO SETUP 2. REPORT N/V 3. EXAGGERATION SHOULD OCCUR AS SOON 4. MONITOR BLOOD SUGAR
Glycerin NICU MICRO RENEW	HYPOSMOLIC LAXATIVE	CONSTIPATION	0.2 ML RENEW Q 24H	0.5 ML	<input checked="" type="checkbox"/>	-	H/A DIZZINESS DYSRHYTHMIA N/V	1. VRE CALL FIRST TO SETUP 2. REPORT N/V 3. EXAGGERATION SHOULD OCCUR AS SOON 4. MONITOR BLOOD SUGAR
MORPHINE	OPIOD	PAIN	0.15 MG IN 0.75 ML 0.4M PAIN GRINDM	0.5 MG/KG/HR	<input checked="" type="checkbox"/>	0.75 ML QW 5MIN	RESO DEPRESSION CONSTIPATION SEDATION	1. USE CALL FIRST TO SETUP 2. REPORT CONSTIPATION 3. REPORT DIFFICULTY BREATHING 4. ASSESS PAIN BEFORE ADMIN
Vancomycin	Antibiotic	Infection	10 MG IVPB Q 12H	10 MG/KG/D	<input checked="" type="checkbox"/>	10 MG / MIN	OTO TOXICITY HYPERTENSIVITY SWEET INTENTION N/V	1. CHECK HYPERTENSIVITY 2. HOLD IF SWAN FEELS GO-TO 3. TAKE I&O ON MED 4. REPORT RISING IN PWR

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Date: Click here to enter a date.

<p>1. Disease Process & Brief Pathophysiology (Identify Key Concepts to Your Patient and Include Reference):</p> <p>- Bowel perforation/premature A bowel perforation is when your bowels develop a hole in it leading to contents to possibly spill out of abdomen, this could lead to infections and more,</p>	<p>2. Factors for the Development of the Disease/Acute Illness:</p> <p>- Recent abdominal surgery - Multiple medical problems - Trauma to abdomen or pelvis - Colon cancer - Hx of inflammatory bowel dx</p>	<p>3. Signs and Symptoms:</p> <p>- Sudden & severe abd pain - N/V - Fever - Chills - Swellings (P) - Bloating (P)</p>
<p>4. Diagnostic Tests Pertinent or Confirming of Diagnosis:</p> <p>- X Rays - CT Scan</p>	<p>5. Lab Values That May Be Affected:</p> <p>- WBC - electrolytes - PH in blood - Hemoglobin</p>	<p>6. Current Treatment (Include Procedures):</p> <p>- surgery ~ Close perforation</p>

Phyllis N. (2018, October 7). Gastric perforation. Retrieved from <https://www.healthline.com/health/gastric-perforation>