

Student Name: Caroline AbeytaUnit: OB Sim

Pt. Initials: _____

Date: 08/23/21**Maternal Medication Worksheet – Current Medications & PRN for Last 24 Hours****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	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.)
Oxytocin	Endocrine metabolic agent	Promote uterine contractions	0.5-1mU/min IV	Y N	IV – 3-6mL/hr of a 10U/1000ml dilute solution. Increase 2mU/min q 30-60min until desired contraction frequency	N/V, cardiac dysrhythmia, increased BP, water intoxication, brain injury, CNS deficit, hemorrhage, hematoma, uterine rupture	1. Monitor uterine activity – prevent tachysystole 2. Monitor maternal b/p for hypotension 3. Monitor fetal heart rate. 4. Assess for nausea and vomiting
Magnesium Sulfate	Musculoskeletal agent, anti-inflammatory	Smooth muscle relaxer – lower blood pressure	Initial – 4-5g IV	Y N	IV initial – 4-5 g in 250mL of D5W or NS	Flushing, sweating, CNS depression, hyporeflexia	1. Monitor serum magnesium before and during treatment 2. Monitor for seizure activity 3. Assess I&O for minimum 30mL/hr 4. Monitor for respiratory depression to prevent toxemia
Meperidine	Opioid	Analgesic	Initial – 50-150mg PO/sub Q/IV	Y N		N/V, sweating, dizziness, lightheadedness, sedation, dry mouth, headache	1. Avoid activities requiring mental coordination until drug effects are known 2. Report S/S of serotonin syndrome and adrenal insufficiency 3. Report severe constipation 4. Report S/S of hypotension and syncope
Promethazine	Antihistamine	Antiemetic	25mg q	Y		Dermatitis,	1. Avoid prolonged exposure to sunlight

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

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	ine		4-6hr PRN	N		phytotoxicity, hives, CNS depression, dizziness, lowered seizure threshold, leukopenia	2. Avoid activities that require mental alertness until drug effects are known. 3. Monitor for EPS 4. Avoid all MAO inhibitors or CNS depressants during therapy
Calcium Gluconate	Calcium supplemen t	Potential antidote for magnesium sulfate toxicity	1500- 3000 mg in IV	Y N	1500-3000mg in 15-30mL 10% solution IV over 2-5min	Abnormal taste in mouth, constipation, flatulence, swollen abdomen, cardiac dysrhythmia, hypotension, vasodilation	1. report abnormal cardiac activity (bradycardia, arrhythmias, hypotension, syncope, cardiac arrest) 2. Chew and swallow oral tablets followed with a glass of water 3. Monitor serum calcium levels prior and during therapy 4. Do not give via IM or subQ

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	Classification		Route & Schedule	If not, what is correct dose?	rate to push. IVPB - List mL/hr and time to give		(Precautions/Contraindications, Etc.)
Phytonadione	Nutriceutical	Vitamin K supplement, coagulation agent	2.5-25mg PO	Y N		Cardiac arrest, shock, metabolic acidosis,	1. Report rashes and pruritis 2. Severe reactions have occurred with IV or IM administrations, only give IV or IM if necessary 3. Monitor INR and prothrombin time periodically 4. Monitor for hyperbilirubinemia in neonates.
Erythromycin Ophthalmic Ointment	Topical antibiotic	Inhibits protein synthesis of susceptible bacteria	Topical	Y N		Eye stinging, burning, redness or temporary blurred vision	1. Apply with aseptic technique to reduce chances of infection 2. Keep eyes closed for 1-2 min to allow proper administration 3. Avoid contact with mucous membranes 4. Monitor for ototoxicity
Engerix B	Vaccine	Protection against Hepatitis B virus		Y N		Injection site reaction, diarrhea, nausea, fatigue, fever, malasia	1. Educate accurate vaccination schedule 2. Do not administer IV or intradermally. 3. Do not mix with other vaccines. 4. Shake well prior to drawing into syringe.
Hepatitis B Immune Globulin	Immune Serum			Y N		Injection site reaction, N/V, headache, malaise,	1. Avoid live vaccines aside from Hep B for 3 months after therapy. 2. this is a blood product, therefore proper teaching must be done. 3. do not use in patients with advanced age, heart disease, coagulation disorders, 4. Montior serum anti-Hep B surface antibody level regularly.
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