

**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	Oxytocic	Labor induction	0.5-1 milliunit /min, IV, gradually increase dose in increments of 1-2 milliunits	Y N		N/V, cardiac dysrhythmia (mother & fetus), Fetal bradycardia, Increased BP (mother), Water intoxication	1. Administer loading dose then gradually increase dose in increments of 1-2 milliunits every 30-60 min until desired contraction pattern. 2. Teach pregnant woman this drug may cause nausea and vomiting. 3. Monitor mom's blood pressure. 4. Monitor fetal heart rate.
Magnesium Sulfate	Electrolyte	Prevent seizures, fetal neuro protection, slow/stop preterm labor	Loading dose: 4-6 g; Continuous: 1-2 g/hr	Y N	IVPB : 15-20 min	Flushing, sweating, hypotension, Hyporeflexia, CNS depression, respiratory depression	1. Before administering drug, check blood pressure. 2. Monitor respirations. 3. Teach S/S of magnesium toxicity. 4. Calcium Gluconate should be readily available.
Meperidine	Opioid	Analgesic	50-150 mg, PO/subQ/IM, q 3-4 hr	Y N		Sweating, n/v, dizziness, lightheadedness, respiratory depression	1. Advise patient to avoid activities requiring mental alertness until drug effects are realized. 2. Instruct patient to report S/S of respiratory depression

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							3. Warn patient to report severe constipation 4. Teach side effects may include sweating, nausea, vomiting, dry mouth, or headache.
Promethazine	Phenothiazines	Treatment of nausea and vomiting	25 mg, PO or Rectal, BID	Y N		Dermatitis, Phototoxicity, N/V, CNS depression, extrapyramidal disease, lower seizure threshold	1. Advise patient to avoid activities requiring mental alertness until drug effects are realized. 2. Instruct patient to report S/S of respiratory depression 3. This drug may cause n/v, anticholinergic effects, CNS depression, jaundice, or apnea. 4. Advise to report S/S EP effects or neuroleptic malignant.
Calcium Gluconate	Calcium supplement	Magnesium sulfate antidote	1500-3000 mg, IV over 2-5 minutes	Y N	15-30 mL of 10% solution	Abnormal taste in mouth, constipation, flatulence, cardiac dysrhythmia	1. This drug may cause tingling sensations, chalky taste, or heat waves. 2. Tell patient to report S/S of bradycardia or other arrhythmias, hypotension. 3. Monitor serum calcium levels. 4. Monitor symptomatic improvement.

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Phytonadione	Vitamin K	Prophylaxis and therapy of hemorrhagic disease	0.5 – 1 mg, IM, within 1 hour after birth	Y N		Cardiac arrest, shock, respiratory arrest, flushing, sweating,	1. Drug should be protected from light. 2. Monitor infant for adverse effects. 3. Teach parent there may be pain, swelling, and tenderness at the injection site. 4. Inform the parents of the possibility of

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						dizziness, changes in sense of taste	allergic sensitivity including an anaphylactoid reaction.
Erythromycin Ophthalmic Ointment	Antibiotic	Prophylactic to prevent gonococcal conjunctivitis neonatorum	1 cm ribbon of 0.5%, conjunctival sac, within 1 hour after delivery	Y N		May cause temporary blurred vision	<ol style="list-style-type: none"> <li>1. Teach the important of the drug.</li> <li>2. Teach the pregnant woman the importance of screening and treatment of gonorrhoea.</li> <li>3. Use proper technique for eye application.</li> <li>4. Observe infant for irritation.</li> </ol>
Engerix B	Vaccine	Prophylactic of hepatitis B in exposed and unexposed infants	10 mcg/0.5 mL, IM, within 12 hours of birth	Y N		Injection site pain or redness at site, fever	<ol style="list-style-type: none"> <li>1. If in vial, shake the solution well before preparing.</li> <li>2. Give within 12 hours of birth to infants with infected mothers.</li> <li>3. Bathe infant before injection is administered.</li> <li>4. Obtain parental consent.</li> </ol>
Hepatitis B Immune Globulin	Immune Serum	Prophylaxis for infants of hep B surface antigen positive mothers	0.5 ml, IM, within 12 hours of birth	Y N		Injection site pain and tenderness	<ol style="list-style-type: none"> <li>1. Do not shake or give IV.</li> <li>2. Bathe infant first to avoid contamination.</li> <li>3. Give vaccination and immune globulin at separate sites.</li> <li>4. Give within 12 hours of birth</li> </ol>
				Y N			<ol style="list-style-type: none"> <li>1.</li> <li>2.</li> <li>3.</li> <li>4.</li> </ol>

Student Name: Natalie Martinez

Unit: OB Sim

Pt. Initials: \_\_\_\_\_

Date: 09/07/2021

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