

Student Name: _____

Unit: _____

Pt. Initials: _____

Date: _____

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 inducer	IVPB: 1-2mu/min for 30-60min	Y N		Anaphylaxis, N/V, Pelvic hemorrhage, seizures	1.This is used to induce labor 2.Used to stop or treat bleeding after birth 3.Monitor kick counts 4.Watch for water intoxication
Magnesium Sulfate	Mineral Electrolyte	Treats HTN and preterm labor	IV: 10-14g given in alternating buttock. Spilt dosing	Y N	50% of a solution dilute w/ 20%- to concentration of 0.5meq/mL	Dysrhythmias, bradycardia, flushed face, hypotension	1.Report signs of allergic reaction 2.This drug will be used to treat and control seizures 3.Dont use more that 7 days 4.Monitor infant BP
Meperidine	Opioid Antagonist	Pain reliever	IM: 50-100mg at labor	Y N	Dilute too 1mg/mL in D5W, 0.9% saline/LR	Seizures, resp. depression, apnea, shock	1.Avoid constipation by assessing bowel habits and moving frequently 2.Report changes in LOC 3. Monitor Bp for hypotension 4.Assess respirations if taking
Promethazine	Phenothiazine	Antiemetic in early pregnancy	IVP: 25-75mg given later in pregnancy	Y N	Dilute w/ 0.9% to less than 25mg/mL	NMS, seizures, sedation, bradycardia	1.Report LOC changes- could lead to NMS 2.You are at a high fall risk 3. Can cause abnormal HR 4.Can lead to muscle spasms

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

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Calcium Gluconate	Electrolyte replacer	Prevents hypocalcemia	IVP: 0.5-2g/day in 2-4 doses	Y N	500mg to 2 g calcium gluconate (5 to 20ml of a 10% solution, 46.5 to 186 mg elemental calcium) slow IV injection 1.5mL/min	N/V, H/A, Constipation, Cardiac arrest, Brady	1. This drug may cause tingling sensations 2.Report S/S of bradycardia 3.take oral powder with food or liquid 4.Has significant drug interactions
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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.)
Phytonadione	Fat soluble Vitamin	Treat bleeding tendencies	Neonates: 0.5-1mg IM to mom: 5mg for preterm delivery	Y N		Shock, cardiac arrest, Metabolic acidosis, Respiratory distress, hypersensitivity	1.Can cause injection site side effects such as cyanosis & diaphoresis 2.Oral side effects such as flushing rapid and weak pulse 3.Report signs of a rash 4.Report Bleeding
Erythromycin Ophthalmic Ointment	Antibiotic	Protects eyes/prevent infection		Y N		Itching, seizures, blurred vision, abdominal pain, decreased liver function	1.Report watery bloody stool 2.There are multiple drug- drug interactions 3.Can cause GI problems 4.Assess injection site reactions
Engerix B	Vaccine	Hep B prevention	10mcg given at ages 0/1mo./ 6mo	Y N		Allergic rx, Hives, trouble breathing, seizures	1.May cause diarrhea, nausea, vomiting 2.Review dosing schedule w/ patient 3. monitor after given for 30 min 4.Watch for allergic reaction

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Hepatitis B Immune Globulin	Immune Globulin	Treat Hep B after exposed	IM: 0.15ml < 12 hrs after birth	Y N		Rash, swelling, hypersensitivity, itching	1. May cause ecchymosis 2. May cause thrombotic events 3. avoid live vaccines for 3 months 4. Drug may interfere with some blood types
				Y N			1. 2. 3. 4.