

Pediatric 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
D5 ½ NS + 20meq KCL/liter @70ml/hr	Isotonic <input type="checkbox"/> Hypotonic <input type="checkbox"/> Hypertonic <input checked="" type="checkbox"/>	Used to repair electrolyte and acid base imbalance. Regulate urine output.	Watch for hyperglycemia due to dextrose. Electrolytes.	Should not be used when rapid fluid replacement is needed. Contraindicated in severe burns.

Student Name: Vanessa Pizana		Unit: Pediatrics	Patient Initials: DT	Date: 10/24/2021	Allergies: Cats,Oak tress, bananas		
Generic Name	Pharmacologic Classification	Therapeutic Reason	Dose, Route & Schedule	Is med in therapeutic range? If not, why?	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.)
Ibuprofen	Antipyretics, antirheumatics, non opioid analgesics, NSAID	PRN for Fever or pain. Decrease pain and inflammation. Reduction of fever.	270mg po Q6hrs prn	<div style="border: 1px solid black; width: 100px; height: 15px; margin-bottom: 5px;"></div> Pediatric dosing for a 3year old is 100mg q6-8 hours. 270mg is over dosing in ibuprofen for a 3yr old child.	<div style="border: 1px solid black; width: 100px; height: 15px; margin-bottom: 5px;"></div> Aldolor- 100mg/1ml. push over 2 mins. IVPB concentration dilute with 0.9% NaCl, D5W or LR. Infuse over at least 30mins.	Headaches, dizziness, GI bleed, constipation, nausea, vomiting	1. Hypersensitivity may exist with other NSAID including aspirin 2. Ibuprofen lysine: CHD where patency of PDA is necessary for pulmonary or systemic blood flow 3. Teach parents to calculate and measure doses accurately and use measuring device supplied 4. Advise parents not to administer to children who may be dehydrated because dehydration increases risk of renal dysfunction.
Methylprednisolone	Antiasthmatics, corticosteroids	Suppression of inflammation and modification of the normal immune	13.5mg IVP q12hours	<div style="border: 1px solid black; width: 100px; height: 15px; margin-bottom: 5px;"></div> 0.5-1.7mg/kg/day in divided doses q6-	<div style="border: 1px solid black; width: 100px; height: 15px; margin-bottom: 5px;"></div> max conc. 125mg/ml give over 1-30mins. IVPB- max conc. Is 2.5mg/ml (intermittent infusion) give over 20-60mins	Increased ICP in pedi only. Muscle pain, nausea, vomiting.	1. in children chronic use will result in decrease growth. 2. Use lowest possible dose for shortest period of time. 3. potential infection may mask signs

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