Student Name: _____Bergan Gunter_____ Unit:_____ Pt. Initials: _____ Date: ___10/25/2021_____

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 *Pituitary Hormone, Posterior *Uterine Stimulant	Can be used to induce labor or to help the uterus contract after birth.	IVPB	Y N	Dilute in LR, NS, D5W	**Maternal:** - Postpartum hemorrhage -Rupture of uterus - Nausea/ Vomiting - Uterine tachysystole **Infant:** -bradycardia -Low apgar	1. Monitor uterine contractions. If tachysystole occurs stop or ½ oxytocin dose. 2. Do a lung and cardiac assessment to monitor for fluid overload. 3. Before using (for induction) monitor uterine activity, fetal heart rate pattern for normal baseline, and variability for 20 min. 4. Monitor the fetal heart rate for late and variable decelerations as well as variability.
Magnesium Sulfate	*Anti - inflammatory *Laxative *Musculoskeletal Agent *Parenteral Mineral trace Mineral	Decreases CNS irritability (helps prevent seizures, is a tocolytic, decreases BP)	IVPB	Y N	Dilute with D5W or NS	- Hypotension - Shock - Hyporeflexia - CNS depression -Respiratory tract paralysis	1. Monitor for signs of toxicity (respiratory depression, chest pain, confusion, slurred speech, depresses DTR, sweating, lethargy, hypotension) 2. Monitor the patients vitals 3. Implement seizure precautions 4. Monitor the fetal heart rate for late and variable decelerations as well as variability.

Student Name: _____ Unit:_____ Pt. Initials: _____ Date: _____

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

Allergies: _____

Meperidine	*Analgesic *Opioid	Pain medication that is also used for pregnant mothers with opioid addictions.	IM IVP PO	Y N		-Black Box Warning: Addiction, fatal respiratory depression -N/V - Orthostatic hypotension -Hypotension -Serotonin syndrome -Adrenal insufficiency	1. Teach patient to not suddenly stand because of orthostatic hypotension. Patient should sit and dangle the feet on the side of the bed for a min before standing. 2. Have patient report and monitor for signs of serotonin syndrome (Agitation, confusion, rapid HR, high BP, Loss of muscle coordination or twitching muscles, heavy sweating, diarrhea) 3. Have patient report constipation 4. Do not suddenly discontinue
Promethazine	*Phenothiazine *Gastrointestinal Agent *Antihistamine Aliphatic	Used to treat allergies, nausea, and vomiting	IM (deep) IV	Y N		- Dermatitis - Phototoxicity - CNS depression -Lowered convulsive threshold -Apnea -Respiratory depression -Agranulocytosis	1. Instruct the patient to immediately report any burning or pain during or after injection and stop administration immediately. 2. Monitor for S/S of extrapyramidal reactions (tremor, slurred speech, dystonia, anxiety, paranoia, akathisia) 3. Patient should not take MAO inhibitors or CNS depressant 4. Monitor for S/S of agranulocytosis (monitor WBC)
Calcium Gluconate	*Calcium Supplement *Dermatological agent	Antidote for magnesium toxicity	IV PO	Y N		-Abnormal taste in mouth -Constipation, Swollen abdomen	1. Monitor or improvement of magnesium toxicity. 2. Teach that this medication may cause tingling sensation, chalky taste, a sense of oppression, or heat waves.

Student Name: _____Bergan Gunter_____ Unit:_____ Pt. Initials: _____ Date: ___10/25/2021_____

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

Allergies: _____

	*Parenteral mineral trace mineral					Bradyarrhythmia -Myocardial infarction -Vasodilation -Injection site extravasation -Kidney stone	3. Monitor for S/S or bradycardia or other arrhythmias, hypotension, syncope, or cardiac arrest, especially with IV administration. 4. Monitor serum calcium levels (CMP)

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.)
Phytonadione	*Vitamin K	Aids in clotting	IV PO SubQ	Y N	Dilute in NS or D5W (not to exceed 1mg/min)	-Black box warning: anaphylaxis -Cardiac arrest -Shock -Cutaneous hypersensitivity -Metabolic acidosis -CNS depression -Respiratory arrest	1. Injection side effects may include cyanosis, diaphoresis, dizziness, dyspnea, and flushing. 2. Tell patient to report rashes. 3. tell patient to report any unusual bruising or bleeding. 4. Have the patient tell you if they fell weak, tingly, light headed, warm, itchy, have chest pain, or trouble breathing
Erythromycin	*Macrolide	Prevent eye		Y		-Eye irritation	1. Teach that this medication is used to fight

Student Name: _____ Unit:_____ Pt. Initials: _____ Date: _____

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

Allergies: _____

Ophthalmic Ointment	antibiotic	infections / blindness due to eye infections		N		- Rash -Swelling -Dizziness -Trouble breathing	bacteria that could have gotten in the infant's eye during birth and will help prevent eye infections. 2. Use a tissue to wipe excess ointment from eyelashes 3. Don't touch the tip of the ointment tube or place it directly on your eye. 4. Apply within 24 hours of birth.
Engerix B	*Vaccine	Hep B Prophylaxis	IM	Y N		-Injection site reaction -Diarrhea -Nausea -Asthenia (abnormal physical weakness or lack of energy)	1. May cause diarrhea, nausea, asthenia, headache, fatigue, fever, or malaise. 2. Review dosing schedule with patient. (Birth, 1-4months, 6-18 months) 3. Monitor for injections site reaction. 4. Monitor for fever.
Hepatitis B Immune Globulin	*Immune Serum	Hep B Prophylaxis	IM	Y N		-Injection site reaction -Decreased WBC -Ecchymosis (discoloration of the skin resulting from bleeding underneath) -Joint stiffness -Serum creatinine raised	1. Advise patient to avoid live vaccines other than hepatitis B vaccine for 3 months after receiving this drug. 2. Should assess for religious objections. (blood product) 3. This drug may cause nausea, vomiting, ecchymosis, joint stiffness, myalgia, malaise, or headache. 4. Teach that despite screening and testing, human plasma products carry a risk of transmitting infectious agent.

Student Name: _____Bergan Gunter_____ Unit:_____ Pt. Initials: _____ Date: ___10/25/2021_____

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

Allergies: _____

				Y N			1. 2. 3. 4.