

Student Name: Nathan Mendoza

Unit: PED Floor

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

Date: 01/05/2022

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

Allergies: 365: NKDA 388: NKDA

Primary IV Fluid and Infusion Rate (ml/hr)	Circle IVF Type	Rationale for IVF	Lab Values to Assess Related to IVF	Contraindications/Complications
365/388   D5 NS 0.9 + KCl 20 (for both)	Isotonic/ Hypotonic/ Hypertonic	(NPO status)/ Electrolyte replacement	Potassium/Electrolytes	Hyper-/hypo- kalemia

Generic Name	Pharmacologic Classification	Therapeutic Reason	Dose, Route & Schedule	Therapeutic Range?	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.)
				Is med in therapeutic range?			
				If not, why?			
<sup>388</sup> ↓ Prednisolone Soln 3mg/mL	Corticosteroid hormone	Suppress inflammatory response	20 mg / 8.1667 mL PO BID = 3mg/mL	0.1-2 mg/kg/day Do not exceed 90mg/day yes  Reduce excessive inflammation	N/A	hyperglycemia Polyuria, Polydipsia fatigue Edema Chest pain, seizures	1. Pre: allergic/sensitivity reactions 2. Report excessive thirst/diarrhea 3. Avoid high LOC activities 4. Avoid sudden DC. / long term use
Famotidine Susp	H2 antagonist	Suppresses gastric secretions	13 mg / 1.025 mL PO BID (3.25 mL)	(1mg-2mg)/kg/day 20mg/3.25mL yes	N/A	Fever, fatigue, All block Arrhythmia, hepatitis thrombocytopenia M.S. pain Bronchospasm Tinnitus	1. Hypersensitivity to 1st dose. 2. Avoid prolonged use of med 3. Contra: Do not use if blood stools / vomit 4. Do not combine use w/ other H2 blockers
Aspirin Chew	anti-coagulant	lower risk for excessive clotting	81 mg, TAB PO Daily	3-5mg/kg/day 76.2 - 125mg/day Do not exceed 81mg yes	N/A	Cardiac arrhythmia hypotension tachycardia Dehydration hypernatremia hypoglycemia	1. Report excessive bleeding. 2. Report s/s of hypoglycemia: ↓ LOC, cold + clammy 3. Report urinary changes that are out of the normal. 4. Do NOT take w/ other NSAIDs w/out HCP consultation
Miralax Polyethylene glycol	Laxative	increase GI motility	17g Packet PO Daily	0.2-0.8g/kg/day 5.08g - 20.32g yes do not exceed 17g	N/A	Abdominal bloating/ cramping / distention Diarrhea, flatulence nausea, ischemic colitis Tremors, seizure	1. Do not mix w/ any liquid thickeners 2. Watch drug interactions w/ heart meds and renal impairment 3. Keep adequately hydrated to avoid ↑. 4. Avoid if pt has history w/ seizures
Ibuprofen Susp.	NSAID	Relief pain fever reducer	200mg / 13 mL PO Q6 PRN fever > 100.4 / Pain	5-10mg/kg/dose 127-264 yes	N/A	Tinnitus, vomiting Headache, edema, Dizziness, heartburn Epigastric pain B-box warning	1. B-box warning: NSAID use ↑ risk of stroke, MI Cardiovascular events 2. Can cause GI bleed/ulcers 3. Avoid if pt has any Cardio/renal/hepatic impairment 4. Can cause dizziness/drowsiness

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**Pediatric Medication Worksheet – Current Medications & PRN for Last 24 Hours**

**Allergies:** \_\_\_\_\_

Generic Name	Pharmacologic Classification	Therapeutic Reason	Dose, Route & Schedule	Therapeutic Range?	IVP – List solution to dilute and rate to push.  IVPB – concentration and rate of administration	Adverse Effects	Appropriate Nursing Assessment, Teaching, Interventions (Precautions/Contraindications, Etc.)
				Is med in therapeutic range?			
				If not, why ?			
							1. 2. 3. 4.
							1. 2. 3. 4.
							1. 2. 3. 4.
							1. 2. 3. 4.
							1. 2. 3. 4.