

Adult/Geriatric 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
NS 0.9% sodium chloride	Isotonic <input checked="" type="checkbox"/> Hypotonic <input type="checkbox"/> Hypertonic <input type="checkbox"/>	Replace fluid loss, replace large sodium losses, minerals, electrolytes	CBC, BUN, electrolytes	Fluid overload, do not use with CHF pt, infusion site reactions (phlebitis)

Student Name: Jasmine Rodriguez		Unit: S6	Patient Initials: J.Y.	Date: 3/29/2022	Allergies: NKDA		
Generic Name	Pharmacologic Classification	Therapeutic Reason	Dose, Route & Schedule	Correct Dose? If not, what is correct dose?	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.)
Ascorbic Acid (vitamin C)	vitamins	Treat/ prevent vitamin C deficiency	1000 mg tab daily			Joint pain, headache, nausea, vomiting,	1. teach pt to avoid stopping suddenly after long term use at high doses- can lead to conditional vitamin C deficiency. 2. teach pt about other ways to increase Vitamin C with foods such as oranges, bell peppers, strawberries, tomatoes 3. teach pt to take on that vitamin C is best taken on an empty stomach to be absorbed better 4. teach pt to report joint pain- so we can prevent further complications/ treat
Cyanobalam in (vitamin B12)	Vitamins	Treat vitamin B12 deficiency in anemic pt or pt with folic acid deficiency	20000mcg tab daily			Hypokalemia, headache, anxiety, diarrhea, swelling, nausea	1. monitor K+ closely to prevent hypokalemia 2. avoid drinking alcohol- can make it harder to absorb vitamin B12 3. teach pt that Vitamin C can decrease the amount of vitamin B12 you absorb. Avoid taking large doses of vitamin C

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							within one hour before or after taking this product. 4. teach pt taking the extended-release tablets, do not crush or chew them. Doing so can release all of the drug at once, increasing the risk of side effects.
Enoxaparin (lovenox)	Anticoagulant	Prevents formation of blood clots	40 mg sub Q daily			Unusual bleeding, confusion, hematuria, bruising, epidural hematoma	<ol style="list-style-type: none"> 1. BBW: Spinal epidural hematoma can cause paralysis 2. assess Inj site for bruising or lesions before inj. 3. teach pt to not massage or rub inj site after, can displace med 4. monitor for nose bleeds, bleeding gums, vaginal bleeding.
Lisinopril (prinivil)	ACE inhibitor	Treat HTN	40 mg tab daily	yes	n/a	Dizziness, Cough, hyperkalemia, hypotension, abdominal pain	<ol style="list-style-type: none"> 1. BBW:Fetal Toxicityfetal/neonatal morbidity/mortality may occur when drugs that act directly on the renin-angiotensin system are used in pregnancy; D/C drug ASAP once pregnancy detected 2. assess BP/HR before giving med- hold - can reverse effects of med (hypotension+ low HR) 3. teach pt to never stop abruptly- can

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							cause cause BP to raise, heart attack or stroke 4. teach pt to use call light before getting out of bed to prevent falls
Pantoprazole (protonix)	Proton pump inhibitors	Treats GERD, helps reduce stomach acid / acid reflux	40 mg IVP daily	<input type="text"/> Click here to enter text.	40 mg- reconstitute w/ 10 ml of 0.9% sodium chloride- flush before and after with 0.9% sodium chloride flush- push rate 2 min with med and with flush	Abdominal pain. Diarrhea, hyponatremia, vomiting, C.diff	1. teach pt: using longer than 3 yrs can cause vitamin B12 deficiency 2. teach pt to report joint pain/ skin rash so we can prevent further problems/ treat 3. teach pt to report bloody diarrhea- can be a sign of C.Diff 4. monitor Mg before administering can cause hypomagnesemia
Piperacillin-tazobactam (zosyn)	Beta lactamase inhibitors	Treats infection caused by bacteria. Such as stomach infections	3.375 g in sodium chloride 0.9% 100 ml IVPBq 8h	<input type="text"/> Click here to enter text.	3.375 g in sodium chloride 0.9% 100 mL- 25 ml/hr	Diarrhea, constipation, bleeding, hypokalemia, superinfection, rash	1. Monitor electrolytes due to diarrhea being a SE- can cause an electrolyte imbalance 2. teach pt to increase fiber and fluids to prevent constipation 3. teach pt to report any bleeding- so we can treat immediately 4. teach pt to finish antibiotics until infection is cleared- skipping doses can increase further infection
Hydrocodone	Narcotic	Moderate to	325 mg	<input type="text"/>		Respiratory	1. BBW: Addiction, Abuse, and

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nebitartrate and acetaminophen (norco)	analgesics combination	severe pain	Tab PRN q4-6 h	Click here to enter text.		depression, constipation, dizziness, abuse, hypotension, nausea	Misuse opioid agonist Schedule II controlled substance w/ risk of addiction, abuse, and misuse, which can lead to overdose and death 2. monitor/ assess RR + O2- want to prevent respiratory depression 3. monitor/ assess BP to prevent hypotension 4. teach pt to use call light before getting out of bed to prevent falls
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