

Student Name: Kelsee Hays Unit: OB SIM Pt. Initials: _____ Date: 05/2/22

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	Induction of labor, PP control of uterine bleeding	0.5-2mL/min; 1-2mL/min; 2.30-60 mins	<input checked="" type="radio"/> Y <input type="radio"/> N	begin with infusion at 0.5-2mL/min. Increase in increments of 1-2mL/min at 15-30 minute intervals	↑ uterine motility, painful contractions, fetal arrhythmias	1. Assess fetal maturity, presentation, and pelvic adequacy prior to admin 2. Assess uterine contractions 3. Monitor maternal BP and FHR during therapy 4. Teach pt. to expect contractions similar to menstrual cramps
Magnesium Sulfate	mineral electrolyte	Tx and prevention of seizures associated with pre-eclampsia or eclampsia	4-6g over 15-30 minutes at the onset of labor	<input checked="" type="radio"/> Y <input type="radio"/> N	Infuse over 10-20 mins at the onset of labor	diarrhea, ↓ resp. rate, arrhythmias, bradycardia, hypotension	1. Monitor vital signs and ECG throughout therapy 2. Monitor newborn for hypotension, hyporeflexia, and resp. depression 3. Monitor I and O. UO should be 100ml/4hr 4. Assess neurologic status before and throughout therapy
Meperidine	Opioid Agonist	Moderate or severe pain, analgesic during labor	15-35mg IV q hour	<input type="radio"/> Y <input checked="" type="radio"/> N	4mg/mL administered over 15-30 mins	hypotension, GI upset, confusion, sedation, resp depression	1. Assess BP, pulse, and respirations throughout therapy 2. May cause drowsiness or dizziness. Use call light to get up 3. Teach pt. to change positions slowly (ca. 45 degree increments) 4. Teach pt. to report signs and symptoms of respiratory depression
Promethazine	pheno-thiazines	motion sickness, tx and prevention of nausea and vomiting	20-75mg IV, 1-2 times at 4hr intervals	<input type="radio"/> Y <input checked="" type="radio"/> N	0.9% NaCl or D5W. Administer 25mg slowly over at least 10-15 minutes	confusion, disorientation, sedation, dizziness	1. Assess pt. for nausea and vomiting before and during therapy 2. Teach pt. to call for help when getting out of bed 3. Teach pt. good oral hygiene and chewing gum to help with dry mouth 4. Offer - r for neuroleptic malignant syndrome
Calcium Gluconate	mineral electrolyte replacement or supplement	Tx and prevention of hypocalcemia	0.5-2g PO Daily	<input type="radio"/> Y <input checked="" type="radio"/> N		arrhythmias, constipation, phlebitis	1. Monitor BP, pulse, and ECG during therapy 2. Teach pt signs of toxicity overdose 3. Teach pt. to maintain diet adequate in vit D 4. Notify HCP if breastfeeding

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

Newborn 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.)		
Phytonadione	Fat soluble vitamin	prevention of bleeding due to hypoprothrombinemia	2.5-25 mg PO daily	Y N		GI upset, hemolytic anemia, hypersensitivity reactions	2. Teach pt. to report symptoms of bleeding 2. use soft tooth brush, no floss 3. Apply pressure to venipuncture sites for at least 5 mins 4. Teach pt. foods high in vitamin K		
Erythromycin Ophthalmic Ointment	Macrolide	bacteriostatic action against susceptible bacteria	1/2 in. ointment strip 2-6 times daily	Y N		skin irritation	1. Teach pt. to apply no more than recommended amount 2. Obtain culture and sensitivity before initiating therapy 3. Teach pt. to report signs of superinfection 4. Teach pt. to finish the antibiotics		
Engerix B	Vaccine	immunization against infection caused by hepatitis B	1mL IM 3 times 2nd: 1 month later 3rd: 6 months	Y N		injection site reaction, fatigue, malaise	1. Contraindicated in anaphylaxis to hep-B vaccines or yeast 2. Teach pt. the need to get all 3 doses 3. Pain, swelling, and tenderness at the inj site is normal 4. Teach pt. to not rub inj site		
Hepatitis B Immune Globulin	Immune globulin	prevention of hepatitis B infection	0.05mL/kg IM within 7 days of exposure and repeated 28-30 days later	Y N		IM site reactions, malaise, dizziness, weakness	1. should be administered no later than 7 days after exposure 2. monitor pt. for signs and symptoms of anaphylaxis 3. Pain, swelling, tenderness at inj. site are normal 4. Teach pt. to not rub inj. site	1. 2. 3. 4.	