

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
Dextrose 5% & Sodium Chloride w/ KCl 20mEq/L (D5 NS + KCl 20mEq/L) at 80 mL/hr	Isotonic <input type="checkbox"/> Hypotonic <input type="checkbox"/> Hypertonic <input checked="" type="checkbox"/>	To replenish water and electrolytes due to hypovolemia	K+, Na+, Ca+	Increased risk of hyperglycemia or hypoglycemia

Student Name: Olivia Ledgerwood		Unit: Pedi Med Surg	Patient Initials: 66 Click here to enter text.		Date: 09/15/22	Allergies: no known allergies	
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.)
Ceftriaxone	Cephalosporin	anti-infective	2000mg in sterile water (100ml/hr) IV Q24 Hrs INT	yes	2000mg in sterile water (100ml/hr) IV Q24 Hrs INT	hypotension fever seizures	1. educate pt and family about signs and symptoms of seizure and report if feeling them 2. Always wash hands thoroughly to prevent spread of infection 3. monitor IV site for pain, swelling, and irritation-signs of phlebitis 4. educate pt and signs and symptoms of hypotension
Famotidine	H2 antagonists	antiulcer agents	20 mg PO 2 times daily	yes	N/A PO med	confusion cardiac arrhythmias dizziness	1. educate pt to call not fall if feeling dizzy 2. educate pt about using caution before playing sports or exercising due to increased risk of cardiac arrhythmias 3. assess creatinine before administering 4. monitor kidney and liver function before admin

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Folic Acid	vitamins, water-soluble	treat or prevent folic acid deficiency; treat anemia	1 mg PO daily	yes	N/A PO med	anorexia abdominal pain nausea	<ol style="list-style-type: none"> 1. assess skin for any lesions of discoloration 2. educate pt to report rash, difficulty breathing, pain or discomfort 3. educate to take med with food to prevent nausea 4. educate importance of folic acid with treatment of anemia
Gabapentin	Anticonvulsant	neuropathic pain	300 mg PO 3 times daily	yes	N/A PO med	depression erythema multiforme	<ol style="list-style-type: none"> 1. Assess signs of paresthesia (numbness or tingling) before administering 2. Educate pt to not discontinue med abruptly 3. Educate pt to take med with food to prevent GI upset 4. Educate that child should avoid tasks that call for alertness (riding a bike, sports) until know how drug affects them
Hydroxyurea	Antimetabolites	used to make red blood cells bigger, rounder and more flexible	1000mg PO Daily MTWT	yes	N/A PO med	loss of appetite nausea constipation diarrhea	<ol style="list-style-type: none"> 1. educate pt that med can increase risk for developing cancer 2. educate pt to report fevers, SOB, chills, body aches due to weakening the immune system 3. educate pt not to receive any live vaccines due to being immunocompromised 4. educate pt to wear sunscreen to prevent skin cancer due to being higher risk

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Hydroxyzine Pamoate	antihistamine	control anxiety and tension	25 mg PO Q12 hrs	yes	N/A PO med	drowsiness dry mouth dizziness skin rash	<ol style="list-style-type: none"> educate pt to call not fall if dizzy assess pt often for any skin rashes educate pt not to drive due to the medication increasing risk of decreased attention and focus educate pt about nonpharmacologic methods to reduce anxiety
Ibuprofen	NSAID	anti-inflammatory and antipyretic	400mg PO Q6hrs	yes	N/A PO med	HTN headache & dizziness constipation hepatitis	<ol style="list-style-type: none"> BBW: GI bleeding, ulceration and perforation educate pt to take medication with food to prevent GI upset educate pt to call not fall when feeling dizzy assess pt for signs of hepatitis-yellowing of eyes, anorexia, joint pain
Losartan	Angiotensin receptor antagonists	antihypertensive	25mg PO daily	yes	N/A PO med	dizziness diarrhea angioedema hyperkalemia	<ol style="list-style-type: none"> assess and educate pt to report angioedema-rashes, itchy skin, welts educate pt to call not fall if dizzy educate pt to not take extra potassium and monitor signs of hyperkalemia-bradycardia, fatigue, weakness educate pt about dehydration as result of diarrhea

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Polyethylene glycol	osmotic	laxative	17g PO @ times Daily	yes	N/A PO med	electrolyte disorders laxative dependence nausea & abd distention	<ol style="list-style-type: none"> educate pt that too much can cause diarrhea and excessive stools assess abdomen of pt for distention, discomfort or decreased bowel sounds educate pt to take miralax with food and water to prevent GI upset educate pt about healthy stools
Sertraline	selective serotonin reuptake inhibitor	antidepressant	25mg PO nightly	yes	N/A PO med	suicidal thoughts headache insomnia dizziness	<ol style="list-style-type: none"> BBW: suicidality assess pt for suicide ideations before and after administering medication assess pt for serotonin syndrome—mental changes, agitation, N/V, tachycardia educate pt to call not fall if feeling dizzy
Lidocaine-prilocaine	local anesthetic	used to cause numbness	20g topical once PRN	yes	N/A Topical med	respiratory depression seizures arrhythmia	<ol style="list-style-type: none"> educate pt and family about signs and symptoms of seizure and report if feeling them educate pt to report if having any breathing difficulty educate pt to report if feeling any palpitations educate pt and family that cream take 1-2hrs before it takes effect

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Morphine	opioid agonists	opioid analgesics	4mg IVP Q4hrs PRN	yes	4mg IVP Q4hrs PRN	confusion sedation respiratory depression	<ol style="list-style-type: none"> educate pt to report if having difficulty breathing assess pt for symptoms of respiratory depression-cyanosis, decreased RR assess pt for excessive sedation after administering and report if pt is unconscious assess pain before administering because this med is used for severe pain (8-10)
Lidocaine 1% injection	local anesthetic	used to cause numbness	20mL intradermal once PRN	yes	N/A intradermal med	seizures respiratory arrest lightheadedness	<ol style="list-style-type: none"> educate pt and family about signs and symptoms of seizure and report if feeling them educate pt to call not fall educate pt to report if having any breathing difficulty educate pt not to drive after receiving lidocaine injection due to it possibly impairing pt's thinking
Lorazepam	Benzodiazepines	treat pain relief	2mg Q3hrs IV PRN	yes	2mg Q3hrs IV PRN	respiratory depression apnea seizures	<ol style="list-style-type: none"> BBW: addiction, abuse, and misuse educate pt and family about signs and symptoms of seizure and report if feeling them contraindicated in severe hepatic impairment protect drug from light

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Ondansetron	5-HT3 antagonists	antiemetic	4 mg IV Q3 hrs PRN	yes	4 mg IV Q3 hrs PRN	dizziness constipation diarrhea extrapyramidal rxn	<ol style="list-style-type: none"> 1. Assess motor function and educate pt about extrapyramidal rxns and to report if occurring 2. educate pt to call not fall if feeling dizzy 3. educate pt to report when feeling nauseous 4. educate pt to report if he is still vomiting , nauseous or having diarrhea after administering
Iohexol	Contrast media	used for imaging tests	350mg/mL 40mL Arterial Once PRN	yes	350mg/mL40mL Arterial Once PRN	headache nausea & vomiting dizziness anaphylaxis	<ol style="list-style-type: none"> 1. educate pt to call not fall 2. educate pt to report if feeling nauseous or vomiting 3. educate pt that iodinated contrast may promote sickling and to hydrate before and after administration 4. educate pt to report if having a rash, difficulty breathing, pain or discomfort

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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.)
Acetaminophen	nonopioid analgesics	mild pain and fever	1000mg IVPB 400mL/hr Q6hrs	yes	1000mg IVPB 400mL/hr Q6hrs	Hepatic failure neutropenia/leukopenia rash	<ol style="list-style-type: none"> 1. Assess pain before and after administering (used for mild to moderate pain) 2. educate pt not administer more than 4000mg/day due to causing liver failure 3. BBW: hepatotoxicity: anorexia, yellow eyes, abd pain 4. assess for signs of leukopenia or neutropenia-fever, sore throat, fatigue, excessive bleeding due to increased risk for infection
Sodium Chloride bolus	crystalloid fluid	rehydration	1000mL IV 2000mL/hr Once	yes	1000mL IV 2000mL/hr Once	edema seizures muscle weakness	<ol style="list-style-type: none"> 1. educate pt to call not fall if feeling weakness or drowsiness 2. educate pt and family about signs and symptoms of seizure and report if feeling them 3. educate pt about symptoms of fluid volume overload and to report if experiencing-rapid weight gain, edema, high BP, SOB 4. Ensure the medication is flowing at the correct rate and IV site is patent
Ondansetron	5-HT3 antagonists	antiemetic	4 mg IV Q 6 hrs PRN-nausea & vomiting	yes	4 mg IV Q 6 hrs PRN-nausea & vomiting	dizziness constipation diarrhea	<ol style="list-style-type: none"> 1. Assess motor function and educate pt about extrapyramidal rxns and to report if occurring 2. educate pt to call not fall if feeling dizzy 3. educate pt to report when feeling nauseous

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						extrapyramidal rxn	4. educate pt to report if he is still vomiting , nauseous or having diarrhea after administering		

Continuous: Dextrose 5% & NaCl 0.9% w/ KCl 20 mEq/L @100mL/hr

IVF Type: Hypertonic; Rationale for IVF: to replenish water and electrolytes due to hypovolemia; Lab values: K+, Na+, Ca+; Contraindications; Complications: increased risk for hypoglycemia or hyperglycemia