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 Allergies: NKA 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
AKROSO Df: 250ml with heparin 0.25 units/ml 2ml/hr	Isotonic/Hypotonic/Hypertonic	NO BS PROBLEMS JUST FOR THE ANTI-BIOTIC	CHMP CHMP	ANYWAY WAS NO BS PROBLEMS BUT COULD POSSIBLY ↑ SUGARS.

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?			
Penicillin G potassium	antibiotic	TO FIGHT OFF INFECTION	70ml/hr IV BID	YES		2ml hr ?	CAN CAUSE DIARRHEA	<ol style="list-style-type: none"> 1. 100% @ IV SITE 2. CAN ↑ RATE 3. SHOWN PROBLEMS 4. WATCH FOR REACTION.
								<ol style="list-style-type: none"> 1. 2. 3. 4.
								<ol style="list-style-type: none"> 1. 2. 3. 4.

NICU Disease Process Map

D.O.B. <u>8/24/2023</u>	APGAR at birth: <u>8</u>
Gestational Age <u>38²WK</u>	Adjusted Gestational Age <u>40⁴WK</u>
Birthweight <u>4</u> lbs. <u>7</u> oz./ <u>2920</u> grams	
Current weight <u>7</u> lbs. <u>9.4</u> oz./ <u>3328</u> grams	

Disease Name: RDS, murmur, GBS infection.

What is happening in the body?

surfactant deficiency
babies body is trying to fight off infection



What am I going to see during my assessment?

- fever ~~- 100~~
- SOB, O2 ↓
- HR high
- baby being fussy
- can hear the murmur



What tests and labs will be ordered?

Blood cultures
CBC, CMP
Chest X-ray



What trends and findings are expected?

↑ WBC
O2 stats improving

What medications and nursing interventions/treatments will you anticipate?

Penicillin for the infection
g potassium

↳ used to prevent infection of the valves.

(I'm assuming because of the murmur)

How will you know your patient is improving?

Patient is less fussy, sleeping & eating better, V/S & labs improving.

What are risk factors for the diagnosis?

- Prematurity > RDS
- multiple births > RDS
- mom has infection while birthing > ERBS infection
- premature - mom has fever

What are the long-term complications?

- sepsis & infection
- ↑ risk for asthma: RDS
- SOB: RDS, murmur
- ↑ respiratory infection: RDS
- meningitis: infection

What patient teaching for management and/or prevention can the nurse do?

hand washing

keeping baby away from sick visitors