

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
D5 NS W 20KCL 120mL/hour	Isotonic <input checked="" type="checkbox"/> Hypotonic <input type="checkbox"/> Hypertonic <input type="checkbox"/>	Hydration	Electrolytes (K+)	Fluid overload

Student Name: Shallas Taylor		Unit: PICU	Patient Initials: S, RD, SR		Date: 12/6/2023	Allergies: KNDA	
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.)
Cefdinr (Omnicef)	Antibiotic	Pneumonia	90mg in 125/5ml suspension oral BID	Yes Click here to enter text.	Click here to enter text.	N/V/D, headache,	<ol style="list-style-type: none"> 1. Take complete course of antibiotic regardless if patient starts to feel better. Not completing course places patient at risk for developing a antibiotic resistant infection. 2. Teach patient to avoid take antacids or mineral supplements that contain aluminum, mg+ or iron within 2 hours before or after taking cefdinr. These can make it harder for the body to absorb this drug 3. Inform parents to report rashes including diaper rashes while taking this drug as this could be caused by taking liquid cefdinr 4. Teach parents to report new or worsening diarrhea. Teach parent to report diarrhea that becomes more watery or contains blood as this could be a sign of a new infection. Caution patients

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							not to use antidiarrhea medications until they have spoke to HCP
Lansoprazole (Prevacid)	PPI	GERD	15mg in 3mg/ml suspension oral daily	Yes Choose an item. Click here to enter text.	Click here to enter text.	Headache, diarrhea, constipation, vitamin b12 deficiency in long term usage	<ol style="list-style-type: none"> 1. Teach parents to reports a change in urination patterns as this medication can affect the kidneys. As the nurse we should keep a close eye on I&O's 2. Teach parents not to use OTC prevacid before contacting the HCP as this version may differ from the prescribed Prevacid 3. Teach parents to administer this medication prior to feeding the child breakfast. This allows for better absorption of the medication. 4. Teach parents that dizziness, fast or irregular heart rate, tremors, muscle cramps & spasms are s/s of low mg+ which may require medical intervention to correct. Have parents contact HCP.
Levothyroxine (synthroid)	Hormone	Hypothyroidism	12.5mcg oral tablet once daily before breakfast	No Choose an item. I believe that I may have wrote the	Click here to enter text.	Headache, weight loss, tachycardia, palpitations	<ol style="list-style-type: none"> 1. Teach parents that this medication works best on an empty stomach. So give 30-60 Mins before breakfast and try to take at the same time everyday. 2. Teach parents that the child may need

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				incorrect dosage. According to epocrates the range for pts age group is 5-6mcg/kg/dose. For this patient the range would be between 63.5mcg-76.2mcg			frequent labs or dosage adjustment as this medication depends on the growth of the child. 3. Teach parents that this medication will need to be taken by the child for the rest of their life. It is important that even if the child is feeling well that they continue to take this medication. 4. Teach parents to avoid giving child there prevacid 4 hours before or after they take this medication as this could effect the absorption of this medication.
Polyethylene glycol (miralax)	Osmotic laxitive	constipation	8.5g oral BID PRN	Yes Choose an item.	Mix with 4-8oz water	Nausea, diarrhea, cramping, abdominal distension	1. Teach parents alternative methods of using medication to relieve constipation such as increasing dietary fiber and water consumption. 2. Teach parents to keep child as active as there health allows them to be. Amublation can help promote movement within the bowels. 3. Teach parents to avoid using long term as the child may become dependant on

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							laxatives. 4. Teach parents the different s/s of electrolyte imbalances as this medication can cause imbalances. While the patient is hospitalized we as nurses should keep a close eye on eletrolytes.
Ketorolac Toradol	NSAID	Pain	19.2mg PRN every 6 hours for pain	Yes Choose an item.Click here to enter text.	Click here to enter text.	Headache, nausea, abdominal pain, constipation, dizziness	1. BLACK BOX: Cardiovascular risk- NSAIDS increase risk of serious and potentially fatal cardiovascular thrombolitic events including stroke and MI. 2. Teach patient to report loss of appetite, stomach pain (upper right side), tiredness, itching, dark urine, clay colored stool or jaundice as this could indicate problems with the liver 3. Teach patient to report little or no urination, swelling in feet and ankles as this medication can affect kidneys and cause dehydration 4. Teach the patient to get out of bed slowly and to steady themselves on the side of the bed before standing. This medication can cause dizziness. Which increases the risk of falling.

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