

Student Name: _____

Unit: NICU

Pt. Initials: _____

Date: _____

Pediatric Medication Worksheet – Current Medications & PRN for Last 24 Hours

Allergies: N/A

Primary IV Fluid and Infusion Rate (ml/hr)	Circle IVF Type	Rationale for IVF	Lab Values to Assess Related to IVF	Contraindications/Complications
N/A	Isotonic/ Hypotonic/ Hypertonic			

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?			
Hydrocortisone	Corticosteroid	increase blood glucose	0.30mg oral BID				vomiting, weight gain, diuresis, restlessness	<ol style="list-style-type: none"> 1. Avoid large crowds 2. No live vaccines 3. Take with food to prevent stomach upset 4. Stop taking if black tarry stool occurs
								<ol style="list-style-type: none"> 1. 2. 3. 4.
								<ol style="list-style-type: none"> 1. 2. 3. 4.
								<ol style="list-style-type: none"> 1. 2. 3. 4.

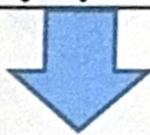
NICU Disease Process Map

D.O.B. <u>12-05-24</u>	APGAR at birth: <u>1 min (8) / 5 min (9)</u>
Gestational Age <u>29¹</u>	Adjusted Gestational Age <u>37</u>
Birthweight <u>1</u> lbs. <u>12.6</u> oz. / <u>512</u> grams	
Current weight <u>3</u> lbs. <u>15.1</u> oz. / <u>1790</u> grams	

Disease Name: Hypoglycemia

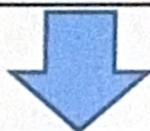
What is happening in the body?

Hypoglycemia in premature infants can occur when there is an interruption from the mother's glucose supply to the baby. This is a common issue in newborns which ~~could~~ could be caused by delayed feeding, deficient glycogen stores, or hyperinsulemia



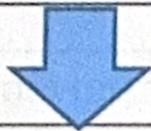
What am I going to see during my assessment?

- Cyanosis
- Apnea, rapid breathing, grunting
- Vomiting, poor feeding
- tremors, sweating
- Seizures
- loose/floppy muscles
- cold temperature
- high pitch cry



What tests and labs will be ordered?

- Serum glucose test
- glucose infiltration rate
- urine ketone test
- lactate
- free fatty acids



What trends and findings are expected?

expected findings:

- Hypotonia
- jitteriness
- Hypothermia

expected trends:

- Rapid decline after birth (first 1-3 hrs)
- will gradually rise with feeding interventions



What medications and nursing interventions/treatments will you anticipate?

- dextrose, glucagon, diazoxide, glucocorticoids
- early feeding
- monitor blood glucose



How will you know your patient is improving?

When their blood glucose levels consistently remain within the normal range without medication.



What are risk factors for the diagnosis?

- Caesarean section
- gestational diabetes
- respiratory distress syndrome
- low gestational age



What are the long-term complications?

- developmental delays
- cerebral palsy
- cognitive impairments
- visual and hearing disturbances



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

- Early and frequent feeding within the first hour.
- providing supplemental glucose
- identifying at-risk babies (low birth weight, preemie, maternal diabetes)
- monitor for symptoms