

Yasmin Perez

10/31/2025

The errors in the process that could have contributed to this incident was we had trouble with the phone to load skyscape, and it was taking long to time which made us feel like we were taking to much time. I also feel like writing the equations without putting which one was for which medication had me mixed the dosages and got them wrong. Another problem that led to incident was not checking the IV rate. I figured it was already running and that it was right. I know that you cant just think someone else did it right or that the orders the doctor put in are always correct and we should always double check.

Potential complications that could have happened to Noah would be having diarrhea from overdosing with ibuprofen, and amoxicillin. These medications could affect his GI, liver, and kidneys. The Ibuprofen could cause bleeding, nausea, vomiting, and abdominal pain. These two medications could cause the child more dehydration. Giving the child too much IV fluids could cause fluid overload which could cause edema, crackles in lungs, and electrolyte imbalance.

The follow up care as the nurse would be notified to watch for gastro symptoms, monitor airway, breathing, and circulation. Monitor vital signs closely. Monitor input and output Watch for dehydration symptoms. Watch labs for renal levels, BUN, creatine, electrolytes, ABG's,

The way I can prevent this from happening again is to always double check fluid calculations and medications. I should never assume the rate is running as it should. Take my time and if I am having phone issues and can't see skyscape, I can call pharmacy and ask for help if it's the right dosage or what the formula is so I can figure out. I can ask another nurse to double check for me if I feel like it is not the right amount. I should take a deep breath and not hurry and try to take my time to prevent errors.

Situation

Hello Dr, this is nurse Yasmin calling from the pediatric nurse unit. I am calling about my patient Noah who is a 3-year-old weighing 15 kg with croup. I have a safety concern for the current medication doses of amoxicillin and ibuprofen and the IV fluid rate. I exceeded the recommended pediatric safe dosage range.

background

Noah was ordered amoxicillin 350 mg orally and ibuprofen 200 mg. Based on its weight of 15 kg, the safe range for amoxicillin should be 125-225mg, and the safe range for ibuprofen should be 75-15-mg. He was also receiving IV fluids at 80 ml/hr but the calculated maintenance rate for his weight is approximately 52 ml/hr. These doses and rate given were higher than the recommended guidelines.

Assessment

The patient is currently stable and alert. I am monitoring vital closely and are within normal limits, with no distress noted. Due to the higher doses, child is at risk for medication toxicity and fluid overload. There's no signs of rash or respiratory distress, and no decrease in urine output.

Recommendation

Would you like me to monitor labs, urine output, and assess for any adverse effects due to the high doses? And would you like me to hold future doses until the new orders are put?