**NAME OF THE PATIENT** : Rejuso Radleigh Jay

**SEX** : Male

**AGE** : 8 Months Old

**WARD** : Pedia

**HOSPITAL NO.** :

| **Med. dosage frequency** | **7/8/24** | **7/9/24** | **7/10/24** | **7/11/24** | **7/12/24** | **7/13/24** | **7/14/24** | **7/15/24** | **7/16/24** | **7/17/24** | **7/18/24** | **7/19/24** |
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| PARACETAMOL  Now then q4 x .37.8 c  100mg  TIV now -37.8  DV q4 RTC  115g TIV  RTC q4  100mg  8ml q4 x t>37.8c | 10:15AM  2:15 PM  12:4PM | 8 AM  12PM  8 - 12 PM | 5:20 PM | 1:30 PM  3PM | 12PM | 5:15 PM |  |  |  | 8AM |  |  |
| CEFUROXIME  315mg  TIV q 8 | 12 PM | 12PM | 8 AM  4 PM  12 PM | 9 AM | 12PM | 12PM |  |  |  |  |  |  |
| DIAZEPAM  1.5g  TIV pior for | 9- 12:30 PM  8:15 PM | 9- 10:30 AM |  |  |  |  |  |  |  |  |  |  |
| PHENYTOIN  37.5mg  TIV q12  75mg  380mg TIV q12 | 12PM |  |  | 12 PM | 10PM |  |  |  | 12PM | 12PM | 12PM | PM |
| SALBUTAMOL NEBULIZER  q4 |  |  |  |  | 8- 12 PM  4PM  8-12 PM | 8-12 AM  4 PM  12PM | 8-12 PM  4-12 PM | 8-12PM  4 PM  8-12 AM | 8-12 PM  12- 4 AM | 8-12 PM  6-10PM  2-6 AM | 10-2 PM  6PM |  |
| SODIUM BY BICARBONATE  PNSS SLOW IV |  |  |  |  |  |  |  |  |  |  |  |  |
| CEFTRIAXONE  250 2ml po.  q12  380mg  TIV q12 |  |  |  |  |  |  |  |  |  | 12PM | 12PM | 12PM |

| **NAME OF DRUGS** | **CLASSIFICATION AND MECHANISM OF ACTION** | **INDICATION AND CONTRADICTION** | **ADVERSE EFFECTIVE/SIDE EFFECT** | **NURSING CONSIDERATION** |
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| Paracetamol  Brand Name: Tylenol  Dosage:  4-11 months - 80mg  100mg/ml  q4  Temp ≥ 37.8  TIV  115 mg/ml  q4  TIV  Frequency:  Q 4hrs  Route of Administration : PO/IV | Classification :  Analgesic and antipyretic drug  Mechanism of Action:  Blocks pain inhibiting synthesis of prostaglandin. It relieves fever by central action in the hypothalamic heat regulating  center | Indication:   * Reduce fever in viral and bacterial in viral infections   Contradiction: Paracetamol is contraindicated for use in patient with know hypersensitivity to drug or idiosyncratic reaction to paracetamol | Adverse Effective and Side effect  CNS : Headache  CV: Chest pain  Hematologic:  breastfeeding  thrombocytopenia,  patients. hemolytic anemia, neutropenia, leukopenia, pancytopenia | Nursing Consideration:   * Verify the patient’s   identity.   * Check the doctor's order. * Explain to the patient about the purpose and the importance of the drug. * Administer the right drug. * Administer at the right time and right dose. * Advise the patient to get up slowly when rising from sitting or lying position. * Documentation |

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| Cefuroxime  Brand Name: Ceftin  Dosage:  Normal 750mg  315mg  TIV Q8  250/5  2ml po.  q12  380mg  tiv q12  Frequency:  Q8  Route of Administration :  IVTT | Classification :  Analgesic and antipyretic drug  Mechanism of Action:  Inhibits cell wall sysnthesis promoting osmotic instability usually bacteriricidal | Indication:   * For the treatment of many different types of bacterial infections such as bronchiti, sinusitis, tonsillitis, ear infections, skin infections, gonorrhea, and urinary tract infections.   Contradiction: conntradicted with allergy cephalosporin or penicillin . Use cautiously in patients with history of colitis and those with renal failure lactation | Side effect  CV: Chest pain  GI: Constipation, diarrhea, nausea, vomiting , anorexia  Adverse Effective    GI: pseudomembranous colitis  CV: Phlebitis, thromboplebitis  SKIN :  maculopapular and erythematous rashes, urticaria, sterile abscesses, temperature elevation, tissue sloughing in injection site. | Nursing Consideration: Interventions   * Give oral drug with food to decrease GI upset and enhance absorption. * Give oral drug to children who can swallow tablets; crushing the drug results in a bitter, unpleasant taste. * Have vitamin K available in case hypoprothrombinemia occurs.   Teaching points  *Oral drug*   * Take full course of therapy even if you are feeling better. * This drug is specific for this infection and should not be used to self-treat other problems. * Swallow tablets whole; do not crush them. Take the drug with food. * You may experience these side effects: Stomach upset or diarrhea. * Report severe diarrhea with blood, pus, or mucus; rash; difficulty breathing; unusual tiredness, fatigue; unusual bleeding or bruising; unusual itching or irritation   *Parenteral drug*   * Avoid alcohol while taking this drug and for 3 days after because severe reactions often occur.You may experience these side effects: Stomach upset or diarrhea. * Report severe diarrhea, difficulty breathing, unusual tiredness or fatigue, pain at injection site. |

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| Diazepam  Brand Name:  Apo-Diazepam  Diastat  Diazepam Intensol  Novo-Dipam  Valium  Dosage:  CHILDREN:  0.12-0.8 mg/kg/day  1.5g  TIV PIOR FOR  Frequency:  Q6 -8  Route of Administration : PO | Classification :  PHARMACOTHERAPEUTIC: Benzodiazepine (Schedule IV  CLINICAL: Antianxiety, skeletal muscle relaxant,    Mechanism of Action:  Produces skeletal muscle relaxation by inhibiting spinal polysynaptic | Indication:   * Adjunct in the management of: * 1.Anxiety * 2. Preoperative * sedation * 3.Conscious * sedation * - provides light * anesthesia and anterograde * amnesia * - treatment of status epilepticus/ uncontrolled * seizures * - skeletal muscle * relaxant * - management of * symptoms of alcohol withdrawal   Contradiction:  Acute narrow-angle glaucoma, severe respiratory depression, severe hepatic insufficiency, sleep apnea syndrome, myasthenie gravis. Children less than 6 months of age.5 | Adverse Effective  IV route may produce pain, swelling, thrombophlebitis, carpal tunnel syndrome.  Overdose results in drowsiness, confusion, diminished reflexes, CNS depression, coma.  Side effect   * CNS. * Dizziness * Drowsiness * Lethargy * Headache * Blurred vision   RESP:  • Respiratory depression  CV:  • Hypotension  Constipation  : Nahea  • Vomiting  DERM:  • Rashes | Nursing Consideration   * Monitor BP, RR, PR, prior to periodically throughout therapy and frequently during IV therapy. |

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| Phenytoin  Brand Name: Dilatin, Phenytek  Dosage:  5mg/kg or 250mg/m2  37.5MG  TIV Q12  75MG  TIV NON  38MG TIV  37.5mg  TIV q12  Frequency:  Q 4hrs  Route of Administration : PO Divided BID Or TID | Classification :  central nervous system agent; anticonvuls ant; hydantoin  Mechanism of Action:  A hydantoin derivative that probably stabilizes neuronal membranes and limits seizure activity by either increasing reflux or decreasing influx or decreasing influx sodium ions across cell membranes in the motor | Indication:   * Phenytoin is indicated to treat grand mal seizures, complex partial seizures and to prevent and treat seizures during or following neurosurgery.   Contradiction:   * Contraindicated in patient hypersensitive to hydantoin and those with sinus bradycardia, SA block, second or third degree AV block or Adams-Stokes syndrome. | Adverse Effective and Side effect   * CNS: ataxia, slurred speech, dizziness, insomnia, nervousness, twitching, headache, mental confusion, decreased coordination. * CV: periarteritis nodosa * EENT: nystagmus, diplopia, blurred vision * GI: gingival hyperplasia, nausea, vomiting, constipation Hematologic: thrombocytopenia, leukopenia, megaloblastic anemia, agrunolocytosis | Nursing Consideration:   * Observe ten rights in giving medication. * > Use cautiously in patients with hepatic dysfunction, hypotension, myocardial infarction, diabetes, or respiratory depression, in elderly or debilitated patients and in those receiving other hydantoin derivatives. |

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| Salbutamol Nebulizer  Brand Name:  Ventolin  Dosage:  2.5 mg  q4    Frequency:  Route of Administration :  Nebulizer/IPPB route | Classification :  Bronchodilators  Mechanism of Action:  Causes bronchodilatation by action on b2 (pulmonary) receptors by increasing levels of cyclic AMP, which relaxes smooth muscle: produces bronchodilatation; CNS, cardiac stimulation increased diurests, and increased gastric acid secretion: longer-acting than isoproterenol | Indication:   * Asthma * Chronic bronchitis * Any lung disease * Bronchospasm * Emphysema * Albuterol is commonly used to treat asthma and chronic obstructive pulmonary disease (COPD).   Contradiction:   * Hypersensitivity sympathomimetics tachydysrhythmias, cardiac disease , heart block. | Adverse Effective and Side effect   * Dizziness, tremors,headache,vomiting * Lower peripheral vascular resistance * Increase blood pressure * Tends to increase blood glucose | Nursing Consideration:   * Monitor respiratory rate, oxygen saturation, and lungs sounds before and after administration. If more than one inhalation is ordered, wait at least 2 minutes between inhalations. |

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| Ceftriaxone  Brand Name: Rocephin  Dosage:  Q4  380mg  TIV q12    Frequency:  Route of Administration : | Classification : ³rd Generation cephalosporin    Mechanism of Action: Bacteridical; inhibits synthesis of bacterial cell wall, causing cell death. | Indication:   * Lower Respiratory infections caused by streptococcus pneumoniae * Acute bacterial otitis media * UTIs caused by E. coli * Gonorrhea * Intra-abdominal infections * PID caused by N. gonorrhoeae * Skin and skin structure infections * Septicaemia * Bone and Joint infections * Meningitis * Lyme Disease * Postoperative prophylaxis for potentially contaminated surgical procedure (1° LSTCS + BTL)   Contradiction:   * Contraindicated with allergy to cephalosporin or penicillins | Adverse Effective and Side effect   * Headache * Dizziness * Lethargy * Nausea * Vomiting * Diarrhea * Anorexia * Pseudomembranous colitis * Nephrotoxicity * Bone marrow depression * Ranging from rash to fever to anaphylaxis | Nursing Consideration:   * Monitor ceftriaxone blood levels in patients with severe renal impairment and in patients with renal and hepatic impairment |

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| Sodium Bicarbonate    Brand Name: Rhea Sodium  Dosage: 17 meqs NaHC0³+17ml SW    Frequency:  Q4 /hr  Route of Administration : IV Drip | Classification : Fluids & Electrolytes    Mechanism of Action: increases plasma bicarbonate, which excess buffer H ion concentrations; reverses metabolic acidosis; neutralizes gastric acid, which forms water, NaCI, CO²; raises blood pH | Indication:   * Treatment of metabolic acidosis; promotion of gastric; systemic and urine alkaminazation in the case of intoxication with weak organic acids; in order to improve the solubility of drug substances that are poorly soluble in neutral acid medium; and in the case of hemolysis.   Contradiction:   * Hypoventilation, hypocalcemia, increased serum osmolarity, further in all situations where sodium intake must be restricted. | Adverse Effective and Side effect   * Hypernatremia * Serum hyperosmolarity * Paravenous administration may lead to tissue necrosis | Nursing Consideration:   * Monitor vital signs and notify the physician of abnormalities * Obtain patient history (drug history and any hypersensitivity) * Monitor fluid balance (input-output ration, weight, edema) * Monitor manifestations of hypokalemia and hyponatremia * Report any symptoms such as nausea, and anorexia |

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| Sodium Lactate solution  Brand Name: Lactated Ringer  Dosage:  1000 mL    Frequency:  Q 24hrs @ 42 mL/hr  Route of Administration : IV | Classification : Intravenous Nutritional Products    Mechanism of Action:  Increase the strong ion difference in solution, leading to proton consumption and on overall alkalinizing effect | Indication:   * Lactated Ringer’s Injection, USP is indicated as a source of water and electrolytes or as an alkalinizing agent   Contradiction:   * Newborns (<28 days of age) receiving concomitant treatment with ceftriaxone, even if separate infusion lines are used due to the risk of fatal ceftriaxone-calcium salt precipitation in the neonate’s bloodstream | Adverse Effective and Side effect   * Abdominal or stomach pain, bloating or swelling of the face, arms, hands, lower legs, or feet, blurred vision, body aches. * Dizziness * Faintness * Lightheadedness | Nursing Consideration:   * Document baseline vital signs, edema, lung sounds, and heart sounds, and continue monitoring during and after the infusion. |

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| Balanced multiple maintenance solution with 5% dextrose  Brand  Name: D5IMB  Dosage:  150mL q 8hr    Frequency:  Route of Administration : IV | Classification : Hypertonic Solutio    Mechanism of Action: contain a high concentration of solute relative to another solution (e.g. the cell’s cytoplasm). When a cell is placed in hypertonic solution, the water diffuses out of the cell, causing the cell to shrivel. | Indication:   * Slow administration essential to prevent overload (100 mL/hr)- water intoxication - severe sodium depletion   Contradiction:   * Phlebitis, peripheral edema, cellular dehydration | Adverse Effective and Side effect   * Swelling (edema) * Blood clot in vein * Abnormal rapid breathing * Fever * Severe dehydration in diabetes * Excess fluid in the blood * Inflammation of a vein * Diarrhea | Nursing Consideration:   * Should not be given to new born babies whose somebody weight is low; patients who have damaged blood vessels and weakened kidneys, and heart problems. |