



DAILY ESSENTIALS CARD

Date: 1/1/2022Student Nurse: Jamie Lee

Instructor: _____

Room#: <u>C473/01</u> Patient Initials: <u>??</u> Age: <u>4yo</u> Gender: <u>Male</u> RN: <u>?</u>	Weight: <u>18.6</u> kg	MEDICATIONS:				
	Diet/Formula: <u>regular</u>	Drug-Dose-Route-Frequency	Reason for Med	Safe Dose Calculation		Administration Time/RN or NS
	Allergies: <u>NKA</u>	<u>lidocaine 4% cream PRN</u>	<u>with IV insertion</u>	<u>none</u>		<u>1813</u>
	Isolation?: Y <u>N</u>	<u>Vancomycin IV 356 mg in D5W</u>	<u>ear infection</u>	<u>744 mg - 1116 mg</u>		<u>1934</u>
		<u>ceftriaxone 40mg/mL in D5W</u>	<u>head/neck</u>	<u>930 mg - 1395 mg</u>		<u>0350</u>
		<u>diphenhydramine 12.5 mg/5mL elixir q8</u>	<u>pain</u>	<u>18.6 mg - 27.9 mg</u>		<u>0859</u>
Current Diagnosis: <u>otomastoiditis</u> Significant Medical History/Review of Hospital course: <u>functional cardiac murmur (2019)</u> <u>pneumonia (Jan 2020)</u>		IV site/type: IV Solution: <u>D5W w/ KCl</u> IV Rate: <u>60mL/H</u> IV checks <u>Y</u> <u>N</u>		Therapies/Treatments Ordered: <u>tentative mastoidectomy</u> <u>CT Inner ear w/ contrast</u> Pertinent Labs/Assessment/Vitals: <u>C-reactive protein</u> <u>Sed Rate</u> <u>CBC</u>		
Interprofessional plan of care: <u>there is a slight possibility of cholestatoma. continue IV antibiotics and consider a mastoidectomy.</u> Nursing goal addressed from plan of care: <u>N/A</u>		Age Specific Care Considerations: <u>diet and weight management (the child has a BMI of 15.69.)</u> Teaching done (if no family in room what teaching would you have done?) <u>explanation of treatment planned as well as medication.</u> <u>father was educated on the possibility of mastoidectomy and other alternative treatments, and the pros and cons of either.</u>		INTAKE (using 100/50/20 Rule) Fluid Intake Requirement: <u>59.58</u> ml/hr Actual Intake: <u>unknown</u> ml/hr Requirement met? Y <u>N</u>		OUTPUT Minimum Urine Output Requirement <u>18.6</u> ml/hr Actual Urine Output <u>unknown</u> ml/hr Foley Diaper <u>Toilet</u> Requirement met? <u>Y</u> <u>N</u>

Checklist: ☐VS ☐I&O ☐Assessment ☐Weight ☐Bed change/hygiene ☐PEWS ☐Braden ☐Pain Assessed ☐Hourly IV check
☐pain managed ☐Sign off Meds ☐RN Report