

Pediatrics Intern Cheat Sheet

To calculate Kcal/kg/d:

(cc's formula)(1 ounce/30cc)(20 kcal/ounce)/(pt's weight in Kg)

similac and enfamil → 20 kcal/ounce

neosure and enfacare → 22 kcal/ounce

other formulations → 24,28,32,36, kcal/ounce

To calculate urine output:

cc/kg/hour = (cc of urine)/(24 hours)/(pt's weight in Kg)

Always read nursing notes! Call admitting beeper for problems with x-cover at night!

Demand and give good x-cover information! Know when to ask for help! Always ask for help if you need it!

To locate out-of-town docs: dial 88, your long distance phone code, 1-901-555-1212 for info

Febrile neonate (T > 38 in child less than two months old)

1. ampicillin 50 mg/kg/dose given q6 hours – no change if suspect meningitis
2. cefotaxime 50 mg/kg/dose given q8 hours – change to q6 if meningitic – can be given IM if IV access becomes a problem

Tylenol 10-15 mg/kg/dose q4-6 hours prn T > 38.5

Ibuprofen 10 mg/kg/dose q6-8 hours → do not give to infants, severely dehydrated pts, renal patients

IVF: bolus 20 cc/kg

<20 kg D5 ¼ NS + 20 meq KCL/L post 1st void

>20 kg D5 ½ NS + 20 meq KCL/L post 1st void

Full Septic work-up → blood culture, CBC with diff, UA with C&S, CXR, LP

Partial Septic work-up → above without LP

For sign out → know if child is on IVF, IV antibx, and what to do if access lost

→ know whether child can be given Tylenol or what type of work-up is needed

If floor calls stating cannot get IV → consider if IV access is needed (i.e. give med IM or IV not needed until AM) → option if in a pinch have them call pedflight RN or hyperal

Call hyperal for picc line placement for long term antibx treatment

Blood products 10 cc/kg, consider premedicating with Tylenol and benadryl

Albuterol 0.5 cc in 2cc NS neb q4 hours, q2 hours prn for little kids

1.0 cc in 2cc NS neb for big kids

Epinephrine (1:1000) nebs 3cc neb prn

Common pain meds for sickle cell disease with pain: toradol, morphine

- remember to review SCD notebook in ED to review previous complications and criteria for admission

SCD with fever: >39 start ceftriaxone: >40 start vanc

Common antibx for cystic fibrosis: ceftazidime and tobramycin (pharmacokinetics will order tobra levels)

Common dose of regular insulin for DM with glucose above 300-350: give 10% of total insulin dose as regular insulin; if unsure call endo fellow; do not deviate from DKA protocol; can feed with ketones

1:4 or less; give SC insulin 15 min prior to eating and D/C insulin drip 30 minutes after eating, do not wean drip below 0.025 U/kg/hour

Body surface area = square root of ht in cm times wt in kg divided by 3600

To dictate: dial 5100, enter attending ID number and pound key, enter 03, enter pt's 6 digit DOB

To listen to dictated reports: dial 5100, enter 8888#, enter #1, work type ID #(00=Radiology, 62=ECHO, 19=EEG), enter 6 digit DOB, press 5 to skip to next report, enter 3 to repeat last few words.

GOOD LUCK!