CALCULATION OF DRUG DOSAGE

① FORMULA METHOD :→

$$A = \frac{D \times V}{H}$$

A : Amount of Medication Required.
D : Desired Dose
H : Dose of Medicatin available
V : volume of Medicatin available.

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Eg :→ when your prescribes 800 mg medicatin to a patient and the Drug available is in stength of 200 mg/1 ml.
so Here:

A = ?
D = 800 mg
H = 200 mg
V = 1 ml.

$$\Rightarrow A = \frac{D \times V}{H} = \frac{800 \times 1}{200} = 4$$

So (4ml) volume of Medicatin Needed.

② Ratio and proportion Method :·

If your have Diazepam labelled as 10 mg per 2 ml. How many "ml" must be administer a dose of 3·5 mg.

so

If : $\frac{10\ mg}{2\ ml}$ Then $\frac{3{\cdot}5\ mg}{(X)}$

Cross Multiplicatin

$$\frac{10}{2} \times \frac{3{\cdot}5}{x} = 10x = 2 \times 3{\cdot}5$$

$$x = \frac{2 \times 3{\cdot}5}{10} = \frac{7}{10}$$

So (X = 0·7)

I/V DRIP CALCULTION FOR PAEDS

① Calculate Drip Rates (drops/minutes).

400 ml of Blood is prescribed to run over 4 hours. Drip set has Drop-factor of 20 gtt/ml (written in drip set). How many drops per minut should be infused:

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$$\text{Rate (Drops/minutes)} = \frac{\text{Volume to be infused} \times \text{Drop factor}}{\text{Time (in Minutes)}}$$

$$= \frac{400 \times 20}{(4 \times 60)\text{minutes}} = \frac{8000}{240} = 33.33$$

So you infuse the given amount of 400 ml Blood at rate of 33 drops/Minutes.

② Calculate ml/Hour Rate:→

1000 ml N/saline to be infused in 6 Hours. How many "ml" will be infused/Hour..?

⇒ Volume to be infused: 100 ml

Total Nombers of Hours: 6

ML/hr = x.

$$\text{Ml/Hr} = \frac{\text{volume to be Infused}}{\text{Total Nomber of Hours to run in}}$$

$$= \frac{1000}{6}$$

$$= 167 \text{ ml}$$

So 167 ml ml will be infused per Hour.

IMP DRUG DOSAGE

EMERGENCY DRUGS:

EASILY PRESCRIBED

(i) Inf provas
1.5 cc/kg - TDS.

(ii) Inf flagyl:
1.5 cc/kg - TDS.

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(iii) Inj adrenalin
0.01 cc/kg.

(iv) Inj Atrophin
0.01 cc/kg.

(v) Inj Avil
0.01 cc/kg.

(vi) Inj Epival
0.2 cc/kg.

(vii) Inj phenobarb
0.2 cc/kg.

(viii) Inj Aminophillin
0.2 cc/kg.

(ix) Inj Ca. Gluconat
1 cc/kg.

(x) Inj KCl.
1 cc/kg.

(xi) Inj $NaHCO_3$.
1 cc/kg.

PAEDIATRIC NURSERY

:: ARTIFICIAL MILK ::

Feeding of choice for Neonates : Breast Milk at least upto 6 Months.

- Expressed Breast Milk :. (EBM).
  All infants should be established on feed of (EBM).
  If EBM is Not indicated (some infection, Carcinoma) or not available formula may be used.

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FORMULA MILK :→

① Morinaga
   - (A) Morinaga BF-1 → Birth To 6 Months
   - (B) Moringa BF-2 → 6 Months onward
   - (C) Morinaga BF-3 → from one year onward.
   - (D) Morinaga BF-P → for low Birth weight or premature B[illegible].

② Lactogen :
   - (i) Lactogen-1 → Birth to 6 Months
   - (ii) Lactogen-2 → 6 Months onward.
   - (iii) Lactogen-3 → one year onward.

③ Meiji :

PAEDIATRIC NURSERY:

BABY SOON AFTER DELIVERY

after the proper assessment of baby done..

If Baby is vitaly stable ~~and~~

→ Inj vit-k 1mg IM stat in Thigh

or

0.2cc I/M Stat

→ vit k injection should be given through Insulin syringes.

→ Apply cord clamp.

→ vidayline drops -

one drop daily for one Month.

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PAEDIATRIC NURSERY

ASSESSMENTS OF NEWBORN BABY:

① APGAR SCORING :→ Done at 1 minutes and 5 minutes after birth.

The baby is Checked for HR, Respiratory rate mussle tone, Reflexes and Colour.

APGAR score of 6 or less mean baby need immediat attension.

② Birth weight: Average Birth weight : 3.2kg

③ Measurements:→

(i) Head Circumference : average : 35 cm

(ii) Abdominal Circumference :

(iii) Length - average → 50 cm.

(iv) Temperature of Body.

(v) pulse Rate : Normal : 110 – 160 Beat/minutes.

(vi) Breathing Rate : 40 – 60 Breaths/minutes.

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④ pHysical Examinations :→

(i) General appearance

Look for pHysical activity, posture, Muscle tone Concciousness.

(ii) Skin :→

look for Skin Colour, texture, Nails or any rashes.

(iii) Head and Neck :

Shape of Head, any Bulging fontanella, clavicle Bone.

ASSESSMENT OF NEWBORN.

Continue.....

(iv) Face: Look at the Eyes, Ears, Nose.

(v) Mouth: Look at roof of Mouth, tongue and Throat

(vi) Lungs: - Breathing pattern
- Auscultation of Lung

(vii) Heart sound and pulse in Groin (femoral)

(viii) Abdomin: look for any mass, Hermia.

(ix) Genital and Anus. Check open passages for urine and Stool.

(x) Arms and legs. Baby movements and development.

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Gestational assessment:.
to check how mature the baby is
this is done when date of pregnancy uncertain

Physical Maturity:.
(i) Skin textures. → sticky, smoth, peeling
(ii) Soft, Hair on Baby's body.
(iii) planter creases
(iv) Breast → thickeness, size, areola.
(v) Genitilia: Male → Check testes
scrotum.
Female: Size of clitoris, labia

MANAGEMENT OF NEONATAL JAUNDICE

Send Investigation
- Serum Bilirubin, Total, Direct, Indirect.
- Mother Blood Group
- Baby Blood Groups
- If Male → G6PD

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According to total Bilirubin, Direct, Indirect

If SBR is in slightly raised
- phototherapy (Single or double light) with eye and genetillia covered.
- Inf prep solution 100 mg/kg/day in divided-
- If fever. panadol-oral drops SOS
- Inj ampiclox - 250 mg. If needed. 100 mg/kg/day.
- Inj wintax - 250 mg. If needed. 100 mg/kg/day.

If SBR → approaching - 20 mg/dl or increasing at rate of 1 mg/dl/hours or 10 mg/day.
Exchange - transfusion Needed.

NEONATAL JAUNDICE

Selection of Blood for Exchange transfusion

- Fresh Blood (Not older than 72 hours).
- Ideally it is O −ive.

Blood transfusion in ABO incompatability

- Select Blood Group of Mother and RH of the Baby.

Blood transfusion in Rh incompatability.

Blood Gp of Baby - Rh of the Mother.

Exchange Transfusion :→

① Counsel the patient.
② Keep NPO 4 hour.
③ Clean umblicus with aseptic
④ Identify umblical vein and insert Catheter (5cm) under aseptic condition
⑤ Arrang fresh Blood.

Array → (A) inj Ca-Gluconat (4cc in a 20cc syringe).
(B) inj Na-Bicarbonat (4cc in 20cc syringe).
Fill the further syringe with N/saline till 20cc.
⑥ 3-way Canula.

procedure:→ Connect one end of 3-way canula with infusion chamber and other end with catheter, 3rd with 20cc syringes.
→ Fill infusion chamber with 100ml Blood.
→ Draw 10ml of Blood and inject 10ml of Blood. till 100 ml of Blood. then inj 5ml of Ca-Gluconat and 5ml of Na-Bicarbonat at the end of cycle.
→ Now repeat 2nd cycle of 100ml Blood but Now with 20ml of Blood each time infused and discarded.
→ Keep the baby NPO - for 3 hrs after finishing Blood transfusion.

PAEDIATRIC NURSERY:

patient admited Neonatal Unit:-

Admit the patient of delay cry, Neonatal jaundice neonatal sepsis, Birth asphexia, seizures, Resp Distress etc.

- pass I/V line
- If respiratory distress → O_2 inhalation

in Sever distress.

Inj aminophillin 0.2 mg/kg/hr I/V diluted.

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- Antibiotic

- Inj amplus (Ampicillin + cloxacellin).
  - 250 mg, 500 mg, 1 gm.

Dose: 100 mg/kg/day in 2 divided doses.

- Inj wintax or Claforan (cefotaxime).
  - → post natal age < 7 day.
    - wt < 2kg → 50 mg/kg/day in 2 Divided Doses.
    - wt > 2kg → 75 mg/kg/day in 2 Divided Doses.
  - → post natal age < 7 days.
    - wt < 1.2kg → 50 mg/kg/day in 2 Divided Dosi
    - wt 1.2 → 2kg → 75 mg/kg/day in 2 Divided Doses
    - wt > 2kg → 100 mg/kg/day - in 2 D. Doses

Note: Meningitis → Double the Dose.

- in Sever infection
  - Inj amikacin (Inj. Amkay) (25, 50, 100, 250).
    - Gram
    - 15 mg/kg/day in 2 Divided or Single Dose.

- Inj Ceftazidim (Inj fortum).
  - 100 mg/kg/day in 3 Divided Doses.

PAEDIATRIC NURSERY:

FLUID in NURSERY:-

- Inf 10% Dextrose
  only for first day.
  Dose: 80 ml/kg in TDS.
- Inf prep-solution
  from 2nd day onward.
  Day 2: 100 ml/kg in TDS.
  Day 3: 120 ml/kg in TDS.

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prep solution (How to prepare).

- 500 ml 1/5th Dextrose Saline
  and take out 100 ml from it discard
- Add
  - 4 Hypertonic (25% D/W) = 80 ml
  - one ampule KCl = 20 ml

So: total of 500 ml prep solution.

NEONATAL TETANUS

- Stiffness, Mussl spasm on stimulation
- Mussle Rigidity. lock Jaw.

Risk factor:

- Home Delivery
- Unvaccinated Mother
- → umbilical Cord Cut at home with unsterilised sei s.

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Managment:

① Maintain Air. way.

⑥ pass N/G, keep NPO

⑩ Inf fluid according to age of baby.

⑩ keep patient in
- Isolation ward

⑤ TT vaccination on one arm I/M.

⑥ TIG 500 IU IM on separat site

⑦ Benzyl phenicillin 50,000 IU/kg over 15 minutes
I/V for 14 Days.

⑧ Inf flagyl 15 mg/kg for 30 min
followed by 7.5 mg/kg over 60 min - BD
for 10 days.

⑨ Syp Debriton - 5 mg/kg/day.

⑩ If fits
inj valium 6 unit/kg/day

⑪ Inf Mg-sulphate:

NEONATAL SEPSIS

High Grade fever with Rigors and Chills.

- Admit the patient
- Send Blood for culture and Sensitivity.
- prophylaptic antibiotic treatment
  - Inj Amplus 250 mg.
    100 mg/kg/day
  - Inj wintax - 250 mg.
    100 mg/kg/day

If there is still not controlled add
Inj Gracil 250 mg.
15 mg/kg/day - daily Dose.

- If shock.
  Inf Dopamin
  5-10 ug/kg/minut
- If late onset sepsis. LP done
  - platlets should be checked.

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#R

PAEDIATRIC NURSERY:-

DISCHARGE OF PATIENT
From Neonatology unit

Send the patient to Home on following medicin according to severity of Disease:

. Inj Amplus - 250 mg - 1/0.
  100 mg/kg/day in 2 Divided Doses - 3-4 days.

. Inj cloforan. 250 mg. 1/0.
  100 mg/kg/day in 2 Divided Doses 3-4 days.
  If wt of patient is (2.5 kg) Then. 1/2 Inj - 1/0 - BD

. panadol oral drops
  SOS.

. vidaylin oral drops - one drop daily
  for one Month.

. Dmax or Dan-D drops - one drop daily.

Not: you may discharge patient on oral antibiotic ~~if condition~~ is according to

. Cefalor or Ceclor oral drops 50 mg/ml.
  Dose: 20-40 mg/kg.

. Augmentin oral drops:
  30 mg/kg/day in 2 Divided Doses

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NAPKIN DERMATITIS

also known as

Diaper- Dermatitis

due to prolong contact of skin with urine and faeces

- Hydrozol cream.
  topically apply twice daily.
- Clotrim cream.
  SOS.

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MEASLES

- Admit the patient Isolation Room.
- Inj Amplus - 250 mg
  100 mg/kg/day.
- Inj Claforan: 250 mg.
  100 mg/kg/day.

- Vitamin A Capsule.
  age less than 6 Months: 50,000 units.
  6 Months to 1 year: 1 lac units.
  More than 1 year: 2 lac units.
- for Conjuctivitis
  Nebra. Eye drops.
- for oral thrush
  Nilstat oral drops.
  Daekterin oral gel.
- fluid replacement
  Inf plabolyte. M
  ~~30 mg~~ 30 ml/kg/dose.
- Nappy Rash
  Rashnil cream.

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ANTI-MALARIAL

Admited patient (ward).

- Inj Quinin 300mg/1ml amp
  - Dose → 20 mg/kg – ½ diluted – stat in D/saline (100ml).

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Then
10 mg/kg/dose → TDS.

- Inj. GeN.M (Artemether ~~Lumefantrine~~ sonat) - 30mg, 60mg, 120 mg/1ml
  - 2.4 mg/kg – ½ stat
    1.2 mg/kg at 12 hrs, 24 hours, and then
    1.2 mg/kg for 6 days daily.
- Inj Artemether. (IM)
  Inj Artem 40 mg/1ml ampul OR: 80mg/1ml.
  Dose: 4 mg/kg – ½M stat
  Then 2 mg/kg/day x OD – 4 days.

Home treatment :→

(Artemether + Lumefantrine) -
Dose: 4 mg/kg/day in 2 divided Doses - 3 days.
→ for artemether
Brand Name: Syp Attem plus. 15/90, 30/180
Syp GeN.M Dt. 30/180.

H Easy to calculate Daily Dose
Syp: Artem: Strength: 15mg/5ml.
Required: 4mg/kg.
If wt: 5kg. So Require: 4x5=20.
= 60x15/20 = 45mg.
(45mg mean 3TSF)
as 1TSF: 5ml = 15mg.

e.g. of: wt: 5Kg → ¾ TSF → BD - 3 days
wt - 7.5Kg → 1 TSF → BD - 3 days
wt: 10kgm → 1½ TSF → BD - 3 days.
15 kg : 2TSF - BD.

Also use. GeN.M. tab: 80/120, 40/240.

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ANTI-BIOTIC DOSAGE

① **CEFTRIAXONE:-** (250, 500, 1gm).

BRAND: Oxidil, Cefxone, Rocephin

DOSE: 50-75 mg/kg/day

for infection

Meningetic Dose: 100 mg/kg/day.

Note:- Dont use in Neonats.

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② **AMPHICILLINE:-**

- Inj Amphicillin - 250, 500 mg
- Syp penbritin - 125 mg/5 ml.
- Cap penbritin - 250, 500 mg.

Dose: Newborn <7 day - 50 mg/kg/day ÷ BD.

Newborn >7 days - 100 mg/kg/day Divided Dose in TDS.

Septicimia - 100 - 200 mg/kg.

Meningitis → 200 mg/kg/day.

③ **AMOXICILLIN ● S→**

Syp - Amoxil - 125 mg

Amoxil drops - 50 mg/ml.

Inj amoxil - 250 mg 500 mg

Dose: 30 mg/kg/day in Sugle Dose.

④ **AMOXICILLIN + CLAVALUNAC ACID:**

- Syp Augmantin - 156 mg.
  Augmatin DS - 312 mg.

Inj Augmantin - 300, 600 mg, 1.2 gm.

Tab Augmantin. 375, 625, 1gm

Dose: 30-50 mg/kg/day in 3 Divided Dose

Augmantin Infants Drop also availab

as - 62.5 mg.

PAEDS
ANTIBIOTIC

(V) CIPROFLOXACIN :-

Brand Name · Syp Novidat, ciproxin 125mg, 250mg/5ml.

· Oral ~~Drops~~ Dose → 20-30 mg/kg/day

½ Dose : 20-30 mg/kg/day in 2 divided dose

· Infusion Cipro - 200 mg/100 ml.

(VI) AMPHICILLINE + Cloxacilline :-

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Brand Name : Amplus, Ampiclox

Inj = 250, 500 mg

Dose : 100 mg/kg in 3 divided Doses.

(VII) CEFOTAXIME :-

Brand Name : Claforan, Wintax, Cefotax

Inj : 250, 500 mg.

Dose : 100-200 mg/kg/day in 3 divided Dose.

Meningitis Dose : 200-300 mg/kg/day in 3 DOSES.

along with vancomycin - 60 mg/kg/24 hr.

(IX) CEFIXIME :-

Brand Name : Syp Cefiget 100mg/5ml, DS : 200 mg/5ml.
Syp Magnet.

Respiratory Dose : 8 mg/kg/day - OD or 2 D.DOSE.

Enteric fever : 20 mg/kg/day : in 2 divided doses

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ANTIBIOTIC DOSAGE:-

(XVII) Levofloxacine.

Brand Name: Leflox

Syp: 125 mg, 250 mg.

Tab: 250mg, 500 mg.

Inf Leflox: 500 mg/100 ml.

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Dose: 10 mg/kg/day in 2 Divided Doses.

Indication:-

- Complicated UTI
  - pyelonephritis
- respiratory tract infection
  - Bronchiolitis

(XVIII) GENTAMYCIN

- Inj 20 mg/2ml

Dose: 7.5 mg/kg/day
in 2 divided Doses.

Indication:-

- Acute Diarrhea.
- Bacterial Infection
- Mastoid Infection
- Billiary tract infection
- Septicimia

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ANTIBIOTIC DOSAGE:.

(XIV) → MEROPENEM :

Brand Name : Meropen

Inj 500 mg, 1gm

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Dose : Common Infection

60 mg/kg/day in 3 Divided Doses.

Meningitic Dose :

120 mg/kg/day

Note : Given in infusion N/Saline. Diluted.

Indication

- Sepsis.
- Meningitis
- Serious Infection not Responding to other antibiotic
- Acute febrill illness.

(XV) → CEFEPIME (4th Generation Cephalosporin).

Brand Name : Cefstar, Megstar

Inj- 250 mg, 500 mg, 1gm.

Dose: 100-150 mg/day in 2 divided Doses.

Indication :.

(I) pneomonia
(II) phylonephritis
(III) skin Infection
(IV) UTI - complicated
(V) Neutropheuia

(iv) AMINOPHILINE

Broncho-dilator.

Brand Name: Ampkyll

Inj. 250mg/10 ml,

Loading Dose: 6 mg/kg – stat

or

0.2cc/kg stat in fluid.

Maint Dose: 0.1 cc/kg/dose – 1/v – BD.

Indicated: (i) Acut Sever Asthma

(ii) Obstructive Airway disease.

(iii) Reversible airway obstruction

(v) Ca. Gluconat

Inj 1gm/10 ml

Loading Dose:

1-2 ml/kg/dose administered in 10 minutes.

Maintanance Dose:

2mg/kg/day 1/v

or

→ 1 cc/kg

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Indication:

(i) Hyperkalemia

(ii) Hypocalcimia.

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ANTIBIOTIC DOSAGE

(X) AMIKACIN

Brand Name: Gracil, Amkay, Amikin

Inj: 50mg, 100 mg, 250 mg.

Dose: 15 mg/kg/day in 2 Divided Doses.

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Indication :-
- Neonatal Infectim
- Menikspitis
- Severe. Respiratory Infectim
- Infectim in Neutropheric pt.

(XI) : CLARITHROMYCIN :-

Brand Name: Klaricid, E.clar

Syp - 125mg/5ml

Inj: 500mg.

Dose :- Dilut This 500 mg in 10 ml Distilled water
Then 0.3 cc/kg/day in 2 divided Dose.

Oral Dose: 15 mg/kg/day in 2 Doses.

I/V Dose: 15 mg/kg/day or
0.3 cc/kg/day.

Indication :- chronic Bronchitis
- Resp tract Infectim
- pneomonia
- Sinusitis
- pharyngitis

PAEDS:

① METRONIDAZOLE.

Brand Name: Flagyl. Diazole. Entamezol

Syp: 200mg/5ml
Inf: 500mg/100ml
Tab: 400mg T

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Dose: Average
20-30 mg/kg/day in 3 Divided Doses.

In Amebiasis.
30-50 mg/kg/day.

In Giardiasis:
15mg/kg/day

↳ I/V Doses: 1.5 cc/kg/day.

Indication:

- Acute Dental Infection
- Gengivitis
- Dysentry
- Amebiasis
- Giardiasis
- protozoa Infection
- PID
- Surgical prophylaxis
- Trichomoniasis

(iv) AMINOPHILINE

Broncho-dilator.

Brand Name: Ampkyll

Inj. 250mg/10 ml,

Loading Dose: 6 mg/kg – stat

or

0.2cc/kg stat in fluid.

Maint Dose: 0.1 cc/kg/dose – 1/v – BD.

Indicated: (i) Acut Sever Asthma

(ii) Obstructive Airway disease.

(iii) Reversible airway obstruction

(v) Ca. Gluconat

Inj 1gm/10 ml

Loading Dose:

1-2 ml/kg/dose administered in 10 minutes.

Maintanance Dose:

2mg/kg/day 1/v

or

→ 1 cc/kg

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Indication:

(i) Hyperkalemia

(ii) Hypocalcimia.

VOMITING

① DOMPERIDONE

Brand : Motillium.

Syp : 5mg/5ml

Tab : 10 mg.

Dose : 0.25 - 0.50 mg/kg x OID

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⑪ Dimenhydrinate :-

Brand : Gravinate.

Inj. Gravinat - 50mg / 1ml.

Dose : 0.5 - 1.0 mg / kg / dose X TDS.

Syp Gravinate 12.5 mg/5ml.

⑪ ONDASECTRON :-

Inj onset 8mg/4ml.

Dose : 0.2mg/kg/dose in fluid.

⑩ Metoclopramide :→

Inj Maxolon 5mg/1ml.

Syp. Maxolon. 5mg/5ml.

Dose : 0.25 - 0.5 mg/kg/dose XTDS.

~~⑤ Ranitidine (H_2 blocker).~~

PAEDS

ANTIVIRAL

→ ACYCLOVIR

Brand Name: Aciova, acylex, Zovirax

Strength: 250 mg, 500 mg / vial.

Syp acylex 200mg / 5ml.

Dose: 3 months to 12 years.

10 mg / kg / dose

in 3 divided doses.

ANEMIA

IN INFANCY

Hb = ↓ 11
MCV = less Than 80.

Managment:.

Mild anemia with Hb - Not less than 9

- Syp Bisleri, Syp Maltofer vivas
  50 mg/ml.
- Syp Ferricure.
- Syp Ibert-folic - 500 mg.
  3 mg/kg/dose x BD.
- with meal.

(11) If Blood Hb is very low and total body pale.
Blood transfusion after Blood grouping and cross-Matching should be done.

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ANTI-TUBERCULOUS DRUGS

① Isoniazid (Syp - 50 mg/5 ml)

10 - 15 mg/kg/day - OD

② Rifamficine (Syp 100 mg/5ml).

10-15 mg/kg/day - OD.

③ Pyrazinamide: (Syp: 250 mg/5 ml).

15-30 mg/kg/day - OD

④ Ethambutol:. (Tab. 400 mg).

15-20 mg/kg/day - OD.

⑤ Inj Streptomycin

20 mg/kg/day - OD.

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.: Combination Therapky :.

- Syp Rifapin - H - 150/100.
- Syp PZA 250mg/5 ml.

Tab - Myrin - P: 30-37 kg = 2 Tab daily
37-54 — 3 Tab daily.
54 and above: 4 tab daily:

for children.

1 tab/15 kg body wt

Tab. Myrin - P. Forte. 150/75/275/40.

MEDICINE USED TO INCREASE BREST MILK PRODUCTION

① Domperidone.

Tab Domel-10mg.

⑪ Metoclopramide

Cap Digestine 40 mg

1 tab. SOS.

⑪ Cap Hi-lacta.

one capsule daily.

SOS.

⑳ Multi-vitamin.

Cap Theragran.

one daily for one Month.

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PAEDS.

ANALGESIC

① IBUPROFEN (NSAIDs)

Syp Brofen 100 mg/5 ml
Brofen DS: 200 mg/5 ml.

Dose: 5-10 mg/kg/Dose (Max 40mg in Day).

⑪ ASPIRIN

Tab Dispirin - 300 mg

Dose: 10-15 mg/kg/Dose

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⑪ Tramadol

Inj tramol 50 mg/ml

Dose: 1-2 mg/kg x TDS

⑫ Diclofenac

Inj voren 50 mg, 75 mg/2ml

Dose: 3 mg/kg/dose

~~Syp Doler - 50 mg/5 ml.~~

⑤ Mefenemic Acid:

Syp Dolaras - 50 mg/5 ml.

Dose: 8 mg/kg/Dose.

PARACETAMOL

BRAND Name:

- panadol oral drops
  80 mg/0.8 ml
  60 mg/5 ml.
- Syp panadol. 120 mg/5 ml
  Colpol. 6 plus : 250 mg/5 ml.
- panado suppository
  125 mg, 250 mg.

Dose : 15 mg/kg/dose

Infusion provas 1 gm/100 ml

So

⇒ 1 ml/kg/dose

If wt less Than ~~2 Years~~ 10 kg.

0.75 ml/kg/Dose

If wt above 10 kg.

1.5 ml/kg/Dose.

PAEDS

ANTI-EPILEPTIC DRUGS :-

Acute Attack

① Diazipam
Inj- Vallium - 10 mg/2ml.
Dose : 0.2-0.5 mg/kg/dose I/V ✓

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② Epigran (phenytoin)
Inj Epigran- 250 mg/5ml
Syp Epitoin . 30 mg/5ml

Loading Dose- 15 mg/kg/day in 50 ml fluid.
Main Dose: 10 mg/kg/day in 50 ml fluid ÷ in BD.

③ Inj Epival (valproic acid).
Syp 250 mg/5ml.
Inj 500 mg/5ml
Loading Dose → 10-15 mg/kg/day.
Maint. Dose → 30mg/kg/day { Diluted in 5ml fluid }

④ phenobarbitone:
Syp Debuton 20 mg/5ml.
Inj phenobab: 200mg/2ml
Tab phenobarb: 30 mg.

Loading Dose: 15 mg/kg
Maint Dose : 5 mg/kg/day.

⑤ Medazolan:
Dormicum.
Inj - 5 mg/5ml. → Dose : 0.05-0.2mg/kg/day.

⑥ Cedate (Chloral hydrate).
Cedation for RMI / CT SAN.
Dose : 25 mg/kg/Dose.

Abdominal Colic

(I) Colorest oral drops
2-3 drops - SOS.

(II) If using formula. Milk.
use it with less Concentration.
(Dilute the formula. Milk).

(III) Lactobillous reuteri DSM
5 droops/day.

(IV) Exclude Cow MHK, eggs, peanuts, wheat.

PAEDS

① Fluid Calculation :-

First 10 kg = 100 ml/kg/day.

Next 10 kg = 50 ml/kg/day.

Next 10 kg = 25 ml/kg/day.

If wt is = 26 kg.

1000 + 500 + 150 = 1650 mg/dl/day.

Note: Best fluid for Resuscitation is (Ringer-Lactate)

PROBIOTIC

To recover the normal Baeterial flora of the intestine

- Actiflor Sachet
- Biflor Sachet (same as above)
- Enterogermina ampule.
  Contain Basillus claussi
- Gut care.

Note: only use oraly - once daily.

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PAEDS

: GASTRITIS :-

① **Ranitidine (H2-Blocker)**

- Inj Zantac 50 mg/2ml.
- Syp peptinil 75 mg/5ml.

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Dose: 0.5-1 mg/kg x TDS.

- Gastric ulcer:
  2-4 mg/kg/day in 2 Divided Dose.
- ~~Gerd~~ GERD:
  5-10 mg/kg/day in 2 divided Dose.

② **Famotidine :-**

Syp polypep 10 mg/5ml.
0.5-1 mg/kg/day in OD.

③ **CIMITIDINE :-**

Syp Ulcerix - 100 mg/5ml.
Inj Ulcerix: 200 mg/2ml.

Dose: Neonat: 5-20 mg/kg/24 Hrs.
Infants: 10-20 mg/kg/day.
child: 20-40 mg/kg/day.

④ **OMEPRAZOLE :-**

Cap Risek. 20 mg
Sachet: 20 mg.

Dose: 0.5-35 mg/kg/day in OD or Divided 2 Dose.

⑤ Syp Ulsanic (Sucralfat)

Syp - 500 mg/5ml. 1gm/5ml.

Dose: 40-80 mg/kg/day - 4. Divided Dose.
or. 0.4cc - 0.8cc/kg/day.

PAEDS

ANTI-HELMINTHIC DRUGS

① **Albendazole :-**

Syp Zentel - 200 mg/5 ml

Tab : 200 mg

Dose: 2TSF - stat

above 2 yrs - 40 mg/kg/ OD.

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② **Mebendazole :-**

Syp vermox 100 mg/5 ml

Tab vermox - 100 mg

Dose: 1TSF X BD - for 3 days

If pinworm - repeated.

③ **Levomisole :**

Syp Icetress 40 mg/5 ml

Dose : 3 mg/kg

④ **pyrantal pamoate**

Syp Combintrine 250 mg/5 ml.

Dose: Sugle Dose.

⑤ **Niclosamide :-**

use in Tapeworm.

Dose : 2 Tab stat

- one tablet : 1000 mg.

PAEDS.

PNEUMONIA

Acute Attack.

(i) O_2 inhalation . SOS.

(ii) Atem Nebulizatim Stat

(iii) Cleni Nebulizatim stat

(iv) panad oral drops.

2-3 drops- sos.

of Temp- ↑↑

Inf provas.

1.5 cc/kg/Dose- stat.

(v) Inj klaricid

15 mg/kg/day in 2 divided Doses.

or. dilut 500 mg of klaricid in 10 ml D/water

Then give 0.3cc/kg/day in 2 divided Doses.

OR

Inj Zinacef

100 mg/kg/day in 2 divided doses

(vi) Salinase N/drops

SOS.

(vii) Of in sever dystress

Inj Hyzonat. 1-2 mg/kg/24 hr.

½ - stat

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BRONCHIOLITIS

During Acute phase:.

- Admit patient
- O_2. inhalation
- Atem Nebulization
  0.025%.
- Clenil- Nebulization
- Inf fluid according to wt and age.
  e.g. Inf D/Saline. 100 mg/kg/day in 2-3 provided dose.
- Salinase Nasal Drops
  If Nasal Obstruction
  2 drops - SOS.
- panadol. syp or oral drops.
  15 mg/kg/day.

If temp ↑:
Inf provas: 1.5 cc/kg/dose - stat

- Inj Zinacept (250, 500)
  100 mg/kg/day - in divided Dose.
- If still in Respiratory distress
  Inj Hyzonat.
  1-2 mg/kg I/V State.
- Syp Avil 15 mg/5 ml.
  1 TSF × BD

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HOME TREATMENT FOR BRONCHIOLITIS

- panadol [redacted] or Brofen DS
  - 15 mg/kg/day
  or panal oral drops
  of Neonates.
- Salinas Nasal / drops
  2 drops - SOS.
- Syp Cefiget or Syp Magnet
  8 mg/kg/day

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[redacted] #R

- Syp Acefyl cough
  1 TSF x BD adjust according to age/wt.
-
- Increase fluid intake.
  → Encourage Breast feeding
- Syp Augmantin, Calamox, Amoxiclav
  Syp: 156 mg/5ml - TDS
  Syp 312 mg/5m - TDS

Gastro-Enteritis :-

Signs of Dehydration

(i) Sunken Eyes.
(ii) Bulges out Fontanella.
(iii) Dry tongue.
(iv) Skin pinch goes back very slowly.
(v) Thirst
or No desire of thirst → Excessive dehydration

Managment :

① Fluid therapy

Deficits : 30 mg/kg · R/L 1/0 stat
Maint-D : 25 mg/kg · plabolyte-M 1/0 – TDS

or

100 mg/kg/day – First 10 kg.
50 mg/kg/day – 2nd 10 kg.
25 mg/kg/day – 3rd-10 kg.

(ii) Inj Cefrone 100
100 mg/kg/day in 2 divided doses.
(iii) ORS : pedicur
(iv) Syp Zincat-od.
0.5–1 mg/kg/OD – 14 days.
- less than 1 year ½ TSF x OD.
More than 1 year : 1 TSP x OD.
(v) Inf flagyl. 1.5 cc/kg/dose x TDS.
(vi) probiotic
(vii) If vomiting
Syp-Metomide

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PAEDS

ACUTE HEPATITIS

- Admit The patient
- Antibiotic.
  - Syp Cefzget
- Fluid Replacement.
  - 30 mg/kg - I/V stat D/Saline
  - 100 mg/kg. I/V - 3 divided DOS. Plabolyt-M.
- Liver tonic
  - Syp Hepa-Mer2.
  - Syp Silliver
- Glucose administration
- Multi-vitamins
  - Syp lysovit 1 TSF X TDS.
  - Syp Vedylin 1 TSF X TDS.
- Appetite Stimulant
  - Syp Treso-orix fort 1 TSF X TDS.
  - or
  - Syp Aplazyme 1 TSF-X TDS.
- NSAIDs
  - Syp ponstan 1 TSF X TDS.

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POISONING:-

DETERGENTS, BLEACHES, SOAP

ingestion

→ Sign: vomiting, Haematemisis (Some time)

→ Early investigation

- Serum. Electrolytes
- If large amount ingested. upper GI. Endoscopy.

- Encourage Drinking of copious amount of water, or MILK to a maximum of 120 ml for child. and 240 ml for adults to dilate the substance.
- No need of pharmacological theraphy.

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FEBRILE FITS

- Generalised fits
- for less than 5 minutes
- age: 3 Month — 5 year.
  Non. CNS infection
- First degree Relative have 30% chances of febrit fits.
- predisposing factor:
  - (i) Respiratory infection
  - (ii) pharangitis
  - (iii) otitis media

Treatment :

(i) Fever controle
- Cold sponging
- paracetamol.

inf provas: 1.5 cc/kg/dose.

(ii) Seizure Control
inj phenobarb 5mg/kg. slow diluted injection

(iii) Family should be Reassured.

(iii) No need to use any long-term anti-epileptic Medication.

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: POISONING :

KEROSENE OIL INGESTION

- Gastric lavage - strictly contra-indicated.
- Admit the child for observation for respiratory dystress
- Maintainance of Airway, Breathing Circulation
- Lab investigation
  - CBC
  - LFTs
  - Electrolytes
  - Chest X-Ray.
- Chest X-ray: positive finding present in most of patients.
- Bronchodilators if required
- Antibiotic
  Inj Cefrone.
  100 mg/kg/day.
- Steroid Hydrocortisone may be effective in liquid paraffin
-

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IMP DRUG DOSAGE

EMERGENCY DRUGS:

EASILY PRESCRIBED

(i) Inf provas
1.5 cc/kg - TDS.

(ii) Inf flagyl:
1.5 cc/kg - TDS.

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(iii) Inj adrenalin
0.01 cc/kg.

(iv) Inj Atrophin
0.01 cc/kg.

(v) Inj Avil
0.01 cc/kg.

(vi) Inj Epival
0.2 cc/kg.

(vii) Inj phenobarb
0.2 cc/kg.

(viii) Inj Aminophillin
0.2 cc/kg.

(ix) Inj Ca. Gluconat
1 cc/kg.

(x) Inj KCl.
1 cc/kg.

(xi) Inj $NaHCO_3$.
1 cc/kg.