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Pharmacology Review Class Prep Day 1

Herbal Therapies: Match the herbal medication with the appropriate drug interaction:

A. St. John's Wort ___2___	1. Can increase hypoglycemia effects of diabetic medications
B. Ma Huang ___5____	2. Decreases effectiveness of oral contraceptives
C. Echinacea ___4____	3. Increased Risk for Bleeding
D. Ginger Root ___1____	4. Chronic use can decrease the effects of medications for TB, HIV, and cancer
E. Feverfew ___3____	5. When combined with a MAOI can cause severe HTN

Mental Health Medications:

1. What is an important teaching point when your client is first prescribed Fluoxetine?
   An important teaching point when a client is first prescribed Fluoxetine is that the medication can take 4-6 weeks or longer before pharmacological benefits take effect. Careful monitoring is needed as there is a risk for increased suicidal thinking.

2. What should you teach your patient who is prescribed Phenelzine?
   A patient who is prescribed Phenelzine should be educated on the importance of avoiding foods high in tyramine. This can cause a hypertensive crisis with symptoms such as a headache, nausea, tachycardia and hypertension.

3. What is the main adverse effect of Venlafaxine?
   The main adverse effect of venlafaxine is serotonin syndrome. Other main adverse effects of Venlafaxine include headaches, insomnia, anxiety, hypertension and tachycardia, as well as hyponatremia.

4. What antidepressant aids in smoking cessation?
   Bupropion is utilized as both an antidepressant and with smoking cessation.

5. What is the therapeutic window for lithium? What are S/S of lithium toxicity? What are expected side effects of lithium?
   The therapeutic window for lithium is 0.8-1.4mEq/L. The symptoms of lithium toxicity include GI distress, confusion, poor coordination, course tremors, and sedation. Severe lithium toxicity includes symptoms such as extreme polyuria, involuntary extremity movements and blurred vision. Expected side effects of lithium include GI distress, fine hand tremors, increased thirst, and weight gain.

6. What is the difference between first generation and second-generation antipsychotics? What do you need to teach your patients?
   The major difference between first generation and second generation antipsychotics is that first generation antipsychotics treat positive symptoms whereas second generation antipsychotics

treat both positive and negative symptoms. Patients should be taught that first generation antipsychotics have side effects including EPS (acute dystonia, Parkinsonism, tardive dyskinesia). Second generation antipsychotics have side effects including metabolic disturbances so blood glucose levels should be monitored.

Neurological Medications:

1. What is Carbidopa/ Levodopa prescribed to treat? – this is prescribed to treat those with Parkinson's disease.
    a. What is important to teach your client who is taking this drug?
    It is important to teach clients that benefits dimmish by the end of five years of treatment and that this medication has periods of "on-off" effectiveness. It is also important to take this med at the same time every day.

2. Why are anticholinergic drugs prescribed for Parkinson's disease?
    Anticholinergics block acetylcholine which is vital in Parkinson's disease because that is the neurotransmitter that is causing symptoms.

3. What is a common drug used to decrease spasticity when treating MS?
    Baclofen (Lioresal)

Pain Medications:

1. Opioid/ Narcotic Medications
    a. 1 mg Dilaudid = _7-11____mg morphine
2. Name 4 side effects of morphine you should teach your client:
    1. Nausea
    2. Itching
    3. Respiratory depression
    4. Constipation
3. A client is prescribed a transdermal Fentanyl patch Q72 hours. You applied the patch 30 minutes ago and your patient is still complaining of pain. What would be your priority action?

The transdermal fentanyl patch has an onset within 12-24 hours. With that in mind, I would assess other methods or medications to bridge pain control until the fentanyl patch sets in.

Chemotherapy Medications:

1. List three common side effects of cytotoxic chemotherapy:
    a. Bone marrow suppression
    b. Fatigue
    c. GI effects
2. Your client is receiving IV doxorubicin to treat her breast cancer and complains of burning at the IV site. What is your priority intervention? Doxorubicin is a vesicant so I would assess the IV site for signs of irritation.