

Pharmacology Review Class Prep Day 1

Mental Health Medications:

1. What is an important teaching point when your client is first prescribed Fluoxetine?
Can increase chance of suicidal thoughts for both adults and children. If pt is having signs of suicidal thoughts please call 911 or the provider right away. Side effects can include constipation, diarrhea, upset stomach, vomiting, decreased appetite, dry mouth, sleepy. These are normal but if drastic changes occur please notify nurse or provider. This medication is a SSRI that improves how the brain circuits/uses serotonin. It is a serotonin reuptake inhibitor. Avoid St Johns wort or other things that may contain serotonin or increase serotonin effects in the body to prevent serotonin syndrome.
2. What should you teach your patient who is prescribed Phenelzine?
Antidepressants (MAOI). Normally a last resort treatment when other drugs have failed to help. Side effects can include headache, constipation, trouble sleeping, feeling dizzy, sleepy, tired, or weak, dry mouth, weight gain, or shakiness. Can increase suicidal thoughts in both adults and children. May interactions with other medications before taking anything else consult with the doctor Avoid foods and beverages rich in tyramine, dopamine, tyrosine, phenylalanine, tryptophan, or caffeine may cause sudden and severe high blood pressure or hypertensive crisis. It is important to monitor glucose as well when taking medication.
3. What is the main adverse effect of Venlafaxine?
Low sex drive or ability, trouble sleeping, weight loss, nervous, anxiety, dry mouth, shaky, constipation, diarrhea
4. What antidepressant aids in smoking cessation?
Bupropion (Wellbutrin)
5. What is the therapeutic window for lithium? What are S/S of lithium toxicity? What are expected side effects of lithium?
Therapeutic blood level: 0.6 to 1.0 mEq/L. Early toxicity N/V/D, thirst, polyuria, slurred speech, muscle weakness, coarse hand tremors, mental confusion, incoordination. Severe toxicity symptoms include ataxia, serious eeg changes, blurred vision, clonic movements, large output of dilute urine, seizures, hypotension Expected side effects of lithium include fine hand tremor, polyuria, mild thirst, mild nausea and general discomfort, weight gain.
6. What is the difference between first generation and second-generation antipsychotics? What do you need to teach your patients?

1st generation antipsychotics are also known as conventional. Medications in this category include chlorpromazine, haloperidol, and thioridazine. S/E of 1st gens are extrapyramidal including acute dystonia and pseudoparkinsons. 2nd generation antipsychotics are known as atypicals. Medications include aripiprazole, clozapine, and risperidone. S/E include metabolic symptoms such as weight gain, hyperglycemia, and dyslipidemia

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&3	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

Neurological Medications:

1. What is Carbidopa/ Levodopa prescribed to treat? Parkinson's
 - a. What is important to teach your client who is taking this drug?
Adverse drug reactions include N/V, orthostatic hypotension, darken sweat and urine. Dyskinesias are common during initial phase of treatment. May take up to 6 months for full response, monitor for on-off episodes. Take at same time daily and do not discontinue abruptly
2. Why are anticholinergic drugs prescribed for Parkinson's disease?
Decreases activity of acetylcholine, maintains balance between dopamine and acetylcholine receptors in the brain. Used as adjunct to reduce motor symptoms
3. What is a common drug used to decrease spasticity when treating MS?
Baclofen

Chemotherapy Medications:

1. List three common side effects of cytotoxic chemotherapy:
 - a. N/V
 - b. myelosuppression
 - c. alopecia
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? Slow down/stop infusion

Pain Medications:

1. Opioid/ Narcotic Medications
 - a. 1 mg Dilaudid = 7-11mg morphine

2. Name 4 side effects of morphine you should teach your client:
 1. Hypotension
 2. Constipation
 3. Respiratory depression
 4. Syncope

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?
 Explain that the transdermal patch does not work right away. It takes 12-24hrs for the onset of action to occur. But I will call their provider too see if they recommend anything else.

Cardiac Medications: Match the Drug with the correct patient teaching and **identify the drug classification**.

A. Hydrochlorothiazide 3 Class: Thiazide Diuretic/Antihypertensive	1. Monitor for Angioedema
B. Digoxin 4 Class: Antiarrhythmic/Inotropic	2. Check blood pressure before taking medication and monitor for ankle swelling
C. Metoprolol 2 Class: Beta-Blocker	3. Increases urination
D. Amlodipine 5 Class: CCB	4. Monitor heart rate for bradycardia
E. Enalapril 1 Class: ACE Inhibitor	5. Toxicity includes visual hallucinations (halos) and anorexia in the elderly