

Pharmacology Review Class Prep Day 1

Mental Health Medications:

1. What is an important teaching point when your client is first prescribed Fluoxetine?
Important teaching points when a client is first prescribed Fluoxetine are to **be aware of suicidal ideation and to look out for Serotonin Syndrome which can begin 2-72 hours after starting treatment.**
2. What should you teach your patient who is prescribed Phenelzine?
Important teaching points when a client is prescribed Phenelzine are explain that Phenelzine is an **MAOI which frequently causes adverse reactions when use in conjunction with other medications and to avoid foods with tyramine as it could lead to a Hypertensive Crisis.**
3. What is the main adverse effect of Venlafaxine?
The main adverse effect of Venlafaxine is **weight loss.**
4. What antidepressant aids in smoking cessation?
Bupropion (Wellbutrin) is an antidepressants that aids in 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 0.6-1mEq/L. Lithium Toxicity = > 1.5 mEq/L: early signs may include marked tremor, nausea, diarrhea, blurred vision, vertigo, confusion; > 2.5 mEq/L: symptoms may progress to seizures, coarse tremors, coma, cardiac dysrhythmia, and permanent neurological impairment; > 3.5 mEq/L: potentially lethal toxicity. Expected side effects of lithium include fatigue, headache, confusion, muscle weakness, memory impairment, and fine hand tremors.
6. What is the difference between first generation and second-generation antipsychotics? What do you need to teach your patients?
The difference between first-generation (conventional) and second-generation (atypical) antipsychotics is conventional antipsychotics target only positive symptoms of schizophrenia and produce extrapyramidal side effects as atypical antipsychotics control both positive and negative symptoms and produce less extrapyramidal side effects when compared to conventional antipsychotics. Clients should be taught that conventional antipsychotics may produce anticholinergic effects such as dry mouth, constipation, urinary retention, and tachycardia. Conventional antipsychotics may also cause photosensitivity, decreased sexual drive, and erectile dysfunction. It is also important to teach the clients about extrapyramidal side effects (i.e., akathisia, parkinsonism, acute dystonia (*requires immediate intervention*), and tardive dyskinesia) and that conventional antipsychotics may cause Neuroleptic Malignant Syndrome (*stop medication immediately*). Client should be taught that atypical

antipsychotics may produce metabolic side effects, tachycardia, sedation, dizziness, headache, weight gain, and sexual dysfunction. Additionally, atypical antipsychotics may alter glucose metabolism causing Type II DM and could produce extrapyramidal side effects when administered in higher doses.

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

Neurological Medications:

1. What is Carbidopa/ Levodopa prescribed to treat?

Parkinson's Disease

- a. What is important to teach your client who is taking this drug?

It is important to teach a client who is taking Carbidopa/Levodopa to take the medication with food and watch for orthostatic hypotension (teach to go from lying/sitting to standing slowly).

2. Why are anticholinergic drugs prescribed for Parkinson's disease?

Anticholinergic drugs are prescribed for Parkinson's Disease because they decrease activity of acetylcholine which maintains balance between dopamine and acetylcholine receptors in the brain (used as an adjunct to reduce motor symptoms).

3. What is a common drug used to decrease spasticity when treating MS?

A common drug used to decrease spasticity when treating MS is Baclofen (Lioresal).

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?

If a client who is receiving IV Doxorubicin complains of burning at the IV site, the priority intervention would be to stop the IV pump.

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. **Respiratory Depression**

2. Constipation

3. Nausea

4. Pruritis

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?

Priority action would be to educate that the onset of action of the transdermal Fentanyl patch takes 12-24 hours and will last up to 72 hours. If the client expresses the need for relief, nonpharmacological techniques can be provided, or the nurse can administer an appropriate analgesic that may be used in conjunction with the transdermal Fentanyl patch that may provide relief quicker.

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

A. Hydrochlorothiazide ___3___ Class: Thiazide Diuretic	1. Monitor for Angioedema
B. Digoxin ___5___ Class: Cardiac Glycoside	2. Check blood pressure before taking medication and monitor for ankle swelling
C. Metoprolol ___4___ Class: Beta Blocker	3. Increases urination
D. Amlodipine ___2___ Class: Calcium Channel Blocker	4. Monitor heart rate for bradycardia
E. Enalapril ___1___ Class: ACE Inhibitor	5. Toxicity includes visual hallucinations (halos) and anorexia in the elderly