

Pharmacology Review Class Prep Day 1

Mental Health Medications:

1. What is an important teaching point when your client is first prescribed Fluoxetine?
Can take 4-6 weeks to see full treatment, report any suicidal ideation, can cause weight loss followed by weight gain

2. What should you teach your patient who is prescribed Phenyelzine?
Avoids foods with tyramine, Monitor for hypertensive crisis, monitor for orthostatic hypotension

3. What is the main adverse effect of Venlafaxine?
Weight loss and serotonin syndrome

4. What antidepressant aids in smoking cessation?
Bupropion

5. What is the therapeutic window for lithium? What are S/S of lithium toxicity? What are expected side effects of lithium?
Therapeutic window: 0.6-1.0
S/Sx lithium toxicity: coarse hand tremor, large output of dilute urine, nausea, confusion
Expected: fine hand tremor, fatigue, HA, muscle weakness

6. What is the difference between first generation and second-generation antipsychotics? What do you need to teach your patients?
A first generation antipsychotic will only tx positive sx and will cause more EPS sx. A second-generation antipsychotic will tx both positive and negative sx and is more likely to cause metabolic sx. For first gen medication, we would want to educate our pts about the anticholinergic SE, to look for EPS sx, and monitor for neuroleptic malignant syndrome. For second gen, we would want to educate about the metabolic effects (hyperglycemia, hypercholesterolemia, weight gain)

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**
 - a. What is important to teach your client who is taking this drug?
May take up to 6 month to see full effect, monitor for "on and off" syndrome

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

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. **Fatigue**
 - b. **n/v**
 - 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?
Stop the IV infusion immediately

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. **Avoid EtOH or other CNS depressants**
 2. **Change position slowly**
 3. **report any pain uncontrolled by morphine**
 4. **can cause 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?
Unfortunately, the fentanyl patch takes about 12-24 hours to take effect, so you could try administering a lower dose opioid or non-opioid analgesic

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: Inotropic agent	2. Check blood pressure before taking medication and monitor for ankle swelling
C. Metoprolol 2 Class: Beta blocker	3. Increases urination

D. Amlodipine 4 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