

ACTIVE LEARNING TEMPLATE: **Medication**

STUDENT NAME Olivia Morales

MEDICATION Ceftriaxone (Rocephin)

REVIEW MODULE CHAPTER \_\_\_\_\_

CATEGORY CLASS Antibiotic, 3rd gen Cephalosporin

**PURPOSE OF MEDICATION**

**Expected Pharmacological Action**

Binds to the bacterial cell wall membrane, causing cell death.

**Therapeutic Use**

Bactericidal action against susceptible bacteria. Can be used to treat skin, bone, joint, urinary, respiratory, gynecological, and abdominal infections.

**Complications**

Rash, diarrhea, cholelithiasis, gallbladder sludging, pancreatitis, acute renal failure, bleeding, phlebitis at IV site, seizures (high doses), superinfection, anaphylaxis, encephalopathy.

**Medication Administration**

IV:  
most infections: 1-2g every 12-24 hrs.  
meningitis: 2g every 12hr  
Perioperative prophylaxis:  
1g 0.5-2hr before surgery (single dose)  
\*do not exceed 2g/day with significant renal/hepatic impairment

**Contraindications/Precautions**

Serious hypersensitivity to penicillins, history of GI disease (especially colitis), combined severe hepatic & renal impairment, hypersensitivity to cephalosporins.

**Nursing Interventions**

- assess for history of penicillin allergy before administration
- obtain specimens & cultures before administering the antibiotic
- observe patient for signs of anaphylaxis or allergic reaction.
- monitor bowel function while being treated.

**Interactions**

Drug-Drug: May ↑ risk of bleeding with Warfarin. Should not be given concomitantly with any calcium containing solutions.

**Client Education**

- inform to report s/sx of superinfection (furry growth on tongue, vaginal itching, etc.)
- notify provider if fever & diarrhea occur.
- watch for signs of anaphylaxis (rash, wheezing, laryngeal edema)

**Evaluation of Medication Effectiveness**

- decrease in signs/symptoms of infection.
- obtain new specimens/cultures to compare to originals before antibiotics.

## Compatibility:

Compatible w/ NS.

\* Avoid use w/ BCG (intravesical), cholera vaccine, fecal microbiota (live/oral), + fecal microbiota (live/rectal)

Amount: (not given but...)

Can be given as 250mg/vial, 500mg/vial, 1g/vial, 2g/vial, 10g/vial, or 100g/vial.

Rate of administration:

Diluent:

Site, supplies, storage, stability:

↓  
IV,  
most  
likely  
arm

↓  
IVPB  
Kit,  
alcohol  
swabs,  
labels

↓  
20-25°C  
as a  
powder,  
protect  
from  
light  
before  
reconstitution

# ACTIVE LEARNING TEMPLATE: Medication

STUDENT NAME Olivia Morales

MEDICATION Acetaminophen (Tylenol)

REVIEW MODULE CHAPTER \_\_\_\_\_

CATEGORY CLASS Antipyretic, nonopioid analgesic

## PURPOSE OF MEDICATION

### Expected Pharmacological Action

Inhibits synthesis of prostaglandins that may serve as mediators of pain & fever, primarily in the CNS.

### Therapeutic Use

Treatment of mild pain and fever.

### Complications

Rash, acute generalized exanthematous pustulosis, Stevens-Johnson syndrome, toxic epidermal necrolysis, urticaria, ↑ liver enzymes, constipation, renal failure (high dosages), neutropenia, pancytopenia.

### Medication Administration

PO: 325-650 mg q6hrs or 1g 3-4 times daily or 1300 mg q8hrs.

\*do not exceed 3g or 2g/24hrs in patients with hepatic/renal impairment.

### Contraindications/Precautions

Severe hepatic impairment/lactive liver disease, alcoholism, chronic malnutrition, chronic alcohol abuse, previous hypersensitivity, hepatic/renal disease.

\*antidote: N-acetylcysteine.

### Nursing Interventions

- assess alcohol usage before administration
- assess type & frequency of OTC drugs used at home
- assess for rash after administration, discontinue if there is a rash.
- administer w/ full glass of water.

### Interactions

Drug-Drug: Warfarin → risk of bleeding. Isoniazid, rifampin, rifabutin, phenytoin, barbiturates, & carbamazepine may ↑ risk of liver damage. Concurrent use of NSAIDs may ↑ risk of adverse renal effects.  
\*Alcohol.

### Client Education

- advise to not take more than recommended.
- advise to avoid alcohol while taking medication.
- notify provider & discontinue if rash occurs.

### Evaluation of Medication Effectiveness

- assess pain scale rating before & after medication administration.
- assess temperature before & after medication administration.