

2Pharmacology Review Class Prep Day 1

Mental Health Medications:

1. What is an important teaching point when your client is first prescribed Fluoxetine?
Don't take within 14 days of MAOI, monitor for increased suicidal thinking, nausea, HA, and visual disturbances, can take 4-6 wks or longer before benefits take effect
2. What should you teach your patient who is prescribed Phenelzine?
Can cause HTN crisis with increased tyramine diet (HA, nausea, tachycardia), avoid food with tyramine, can cause orthostatic hypotension, constipation, taper slowly when discontinuing.
3. What is one of the most serious side effects of Venlafaxine?
Serotonin syndrome
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 the expected side effects of lithium? The window is 0.6 -1 mEq/L. Toxicity - Tremors, blurred vision, confusion, coarse tremors, seizures, dysrhythmias. Fine hand tremors, HA, fatigue, weight gain, fatigue.
6. What is the difference between first-generation and second-generation antipsychotics? What do you need to teach your patients? The second generation has fewer EPS effects than the first-generation medication. First gen blocks dopamine, while the second-gen blocks dopamine and serotonin.

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. Black Cohosh _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. Increases effects of antihypertensive meds, estrogen substitute

Neurological Medications:

1. What is Carbidopa/ Levodopa prescribed to treat? Used to treat Parkinsons disease.
 - a. What is important to teach your client who is taking this drug? Take with food, may take up to 6 months for full response, monitor of orthostatic hypotension
2. Why are anticholinergic drugs prescribed for Parkinson's disease?
Interferes with the body uses the neurotransmitter called acetylcholine, relieves rigidity, and tremors.

3. What is a common drug used to decrease spasticity when treating MS?
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? Stop the infusion and assess the IV site for extravasation.

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. Drowsiness
 2. Respiratory depression
 3. N/V
 4. sedation
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? Assess pain quality and location and educate that the onset of it is within 12-24hr. Give something for break through pain if ordered

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

A. Hydrochlorothiazide <u>_3_</u> Class: <u>_Thiazide diuretic_</u>	1. Monitor for Angioedema
B. Digoxin <u>_5_</u> Class: <u>_Digitalis glycoside_</u>	2. Check blood pressure before taking medication and monitor for ankle swelling
C. Metoprolol <u>_4_</u> Class: <u>_Beta- Blockers_</u>	3. Increases urination
D. Amlodipine <u>_2_</u> Class: <u>_Calcium Channel Blockers_</u>	4. Monitor heart rate for bradycardia
E. Enalapril <u>_1_</u> Class: <u>_ACE Inhibitors_</u>	5. Toxicity includes visual hallucinations (halos) and anorexia in the elderly