

ACTIVE LEARNING TEMPLATE: Medication

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MEDICATION Morphine Sulfate

REVIEW MODULE CHAPTER _____

CATEGORY CLASS Opioid agonist (Schedule II) Opioid analgesic

PURPOSE OF MEDICATION

Expected Pharmacological Action

Binds with opioid receptors within CNS inhibiting ascending pain pathways. Alters pain perception, emotional response to pain.

Therapeutic Use

To relieve severe pain to require opioid treatment which other alternative treatment options such as non-opioid or opioid combinations are ineffective

Complications

Ambulatory patients, patients not in severe pain may increase nausea, vomiting more frequently than patients in supine position or who have severe pain, sedation, decreased blood pressure, diaphoresis, facial flushing, Constipation, dizziness, drowsiness, nausea and vomiting, allergic reaction, dyspnea, confusion, palpitations, tremors, urinary retention

Medication Administration

Adult, elderly I.V: 0.1-0.2mg/kg q4hr as needed or 2-10mg
Children >50kg: 2-5mg q2-4hr
Children <50kg: 0.1mg/kg q4-6hr PRN
Adult, elderly I.V continuous infusion:
0.8-10mg/hr
Range: 20-50 mg/hr

Contraindications/Precautions

Hypersensitivity to morphine. Acute or severe asthma, GI obstruction, known or suspected paralytic alias, concurrent use of MAOIs, or use of MAOIs within 14 days, severe respiratory depression. Extreme caution for COPD, core pulmonale, hypoxia, hypercapnia, pre-existing respiratory depression head injury increased ICP severe hypertension.

Nursing Interventions

Motor skills until response to drug is established, avoid alcohol, CNS depressants, report ineffective pain control, constipation, urinary retention.

Interactions

Alcohol or other CNS depressants may increase CNS effects, respiratory depression, hypertension, MAOIS may produce serotonin syndrome, herbals with sedative properties may increase CNS depression (chamomile, kava, valerian)

Client Education

Change position slowly to avoid orthostatic hypertension, avoid tasks that require alertness, tolerance dependence may occur with prolonged use of high doses.

Evaluation of Medication Effectiveness

Vital signs 5 to 10 minutes after IV administration be alert for decreased respirations, blood pressure. Check for adequate voiding. Monitor daily pattern of bowel activity, store consistency. Initiate deep breathing, coughing exercises. Assessed for clinical improvement recorded onset of pain relief. Screen for drug abuse and misuse, drug seeking behavior.

