

# ACTIVE LEARNING TEMPLATE: Medication

STUDENT NAME Jacob Leitzke

MEDICATION Oxycodone, Xtampza ER REVIEW MODULE CHAPTER \_\_\_\_\_

CATEGORY CLASS Opioid analgesics, opioid agonists, opioid agonists/nonopioid analgesic combinations

## PURPOSE OF MEDICATION

### Expected Pharmacological Action

Alters perception of and emotional response to pain at spinal cord and higher levels of CNS by blocking release of inhibitory neurotransmitters, such as acetylcholine and gamma-aminobutyric acid.

### Therapeutic Use

Manage moderate to severe pain

### Complications

CV: Orthostatic hypotension. Derm: flushing, sweating. EENT: blurred vision, diplopia, miosis. Endo: adrenal insufficiency. GI: constipation, choking, dry mouth, GI obstruction, nausea, vomiting. GU: urinary retention. Neuro: confusion, sedation, dizziness, dysphoria, floating feeling, hallucinations, headache, unusual dreams. Resp: Respiratory depression.

### Medication Administration

-PO adults >50kg: 5-10mg every 3-4 hrs as needed. Then to a 12 hr dose.  
-PO adults <50kg: .2mg/kg every 3-4 hrs as needed. Can convert to 12 hr dose.

### Contraindications/Precautions

Contraindicated in: Hypersensitivity, products that contain alcohol or bisulfates should be avoided in patients with known intolerance or hypersensitivity, respiratory depression, acute bronchial asthma, post op pain

Use cautiously in: personal history of substance use, head trauma, severe impairment, hyperthyroidism, adrenal insufficiency

### Nursing Interventions

-Assess pt pain level regularly.  
-Monitor pt for possible paradoxical pain or increased sensitivity to pain.  
-Monitor pt blood pressure closely especially when initiating oxycodone therapy, could cause severe hypotension.  
-Can cause sleeping disorders like central sleep apnea, so watch that and possible reduce prescription.  
-Assess for abdominal pain.

### Interactions

MAO inhibitors, mixed agonist/antagonist analgesics, nalbuphine or butorphanol, partial agonist analgesics. CYP3A4 inducers, carbamazepine, efavirenz, corticosteroids. Tricyclic antidepressants

### Client Education

-Explain purpose and side effects of the drug to patient, how it is known to have abuse potential.  
-Educate client and family to recognize respiratory depression and getting help.  
-Can cause drowsiness or dizziness.  
-Position change to avoid orthostatic hypotension.  
-Importance of aggressive prevention of constipation with use of oxycodone.

### Evaluation of Medication Effectiveness

Decrease in severity of pain without a significant alteration in level of consciousness or respiratory status.

# ACTIVE LEARNING TEMPLATE: Medication

STUDENT NAME Jacob Leitzke

MEDICATION Guaifenesin (Alden jr, Altarussin, Robitussin, Mucinex) REVIEW MODULE CHAPTER \_\_\_\_\_

CATEGORY CLASS Therapeutic: allergy, cold, cough remedies, expectorant

## PURPOSE OF MEDICATION

### Expected Pharmacological Action

Reduces viscosity of tenacious secretions by increasing respiratory tract fluid. Therapeutic effects: Mobilization and subsequent expectoration of mucus.

### Therapeutic Use

Guaifenesin is used to thin and loosen mucus in the airways, making it easier to clear from the throat and lungs.

Allergy, cold, cough remedies, expectorant

### Complications

Derm: rash, urticaria. GI: diarrhea, nausea, stomach pain, vomiting. Neuro: dizziness, headache.

### Medication Administration

PO(adults): Immediate release: 200-400mg every 4 hr, extended release: 600-1200mg every 12 hr, don't exceed 2400mg/day.

PO(children 6-12) IR: 100-200mg q4hr, ER: 600mg q12hr, do not exceed 1200mg/day.

PO(children4-6) IR: 50-100mg q4hr, do not exceed 600mg/day.

### Contraindications/Precautions

Contraindicated in: hypersensitivity, some products contain alcohol, avoid in pt's with known intolerance, some products contain aspartame and should be avoided in pt's with phenylketonuria.

Use cautiously in: cough lasting > 1 wk or accompanied by fever, rash or headache. Pt's receiving disulfiram, diabetes.

### Nursing Interventions

Assess lung sound, frequency and type of cough, and character bronchial secretions periodically during therapy, maintain fluid intake of 1500-2000 MI/day to decrease viscosity of secretions.

### Interactions

Drug-drug: None reported

### Client Education

- Instruct pt to cough effectively, sit upright and take deep breathes.
- Caution parents to avoid OTC cough and cold products for kids <4 yr.
- Advise pt that Guaifenesin is a drug with known abuse potential.
- Inform pt that drug may occasionally cause dizziness, avoid driving or activities that require alertness.
- Contact professional if cough lasts >1 wk.

### Evaluation of Medication Effectiveness

Easier mobilization and expectoration of mucus from cough associated with upper respiratory infection.

