

Medication

STUDENT NAME Savannah Reed

MEDICATION Guaifenesin (OTC)

REVIEW MODULE CHAPTER _____

CATEGORY CLASS Expectorant

PURPOSE OF MEDICATION

Expected Pharmacological Action

Reduce viscosity of secretions in acute or chronic cough (does not suppress cough)

Therapeutic Use

Relief in chest congestion

Complications

- CNS: dizziness, drowsiness, headache
nausea, vomiting + upset stomach

Medication Administration

Oral:
IR: 200-400mg every 4hrs as needed (max daily dose: 2.4g)
ER: 600mg-1.2g every 12hr as needed (max daily dose 2.4g)

Contraindications/Precautions

Precautions: OTC discontinue use & notify if sympt do not improve w/ 7 days or fever, rash, or persistent headache.
Contraindications: when OTC do not use extended-release in children < 12 years of age

Nursing Interventions

- monitor cough type
- listen to lung sounds
- monitor for side effects

Interactions

- Drugs: may increase CNS depressant (ethanol)
- risk of other additives of other medications & mixing

Client Education

- educate correct dosages
- educate on monitoring symptoms & contacting healthcare provider if symptoms stay persistent/worsen
- importance of hydration
- take w/ food

Evaluation of Medication Effectiveness

- lung sound (get clearer)
- cough becomes more productive (mucus coming up)
- symptoms become better

ACTIVE LEARNING TEMPLATE: Medication

STUDENT NAME Savannah Reed
MEDICATION Oxycodone (xtampza ER, Oxaydo, Roxicodone, Roxycodone) REVIEW MODULE CHAPTER _____
CATEGORY CLASS Opioid analgesic (class II)

PURPOSE OF MEDICATION

Expected Pharmacological Action

alters perception of pain at spinal cord & other levels of CNS by blocking the release of neurotransmitters

Therapeutic Use

- relief or reduce of moderate to severe (acute or chronic) pain

Complications

CV: bradycardia, chest pain, hypotension
CNS: dizziness, drowsiness, sedation, seizures
Resp: respiratory depression
Other: Anaphylaxis, hyponatremia (salt loss)

Medication Administration

- Adults: tablets 5-10mg every 6hrs
ER: 10mg every 12hr increase 1-2 day as needed
Capsules (oral): 5-15mg every 4-6hr
- Dosage Adjustment (Adults)
pts. w hepatic impairment or taking a CNS depressants $\frac{1}{2}$ - $\frac{1}{2}$ usual starting dose then adjust as needed
- Swallowed whole, not broken, or crushed

Contraindications/Precautions

Contraindications: - Significant respiratory distress, acute or severe bronchial asthma, GI obstruction, hypercarbia (excess CO_2) in uncontrolled environment
Precautions: elderly - more sensitive, pregnancy: may cause fetal harm & can be present in breast milk
excessive use may lead to abuse

Nursing Interventions

- monitor respiratory function
- medication safety: make sure dosage is accurate & disposed of correctly
- fall risk precautions:
- assess pain regularly
- encourage fluids & fiber

Interactions

- alcohol: may increase CNS depressant
- Agents w/ clinically relevant anticholinergic: may increase adverse/toxic effects of opioid agonists (risk for constipation & urinary retention or both)
- Diuretics: may decrease therapeutic effects

Client Education

- educate client on how to take correctly & educate overuse can lead to opioid abuse
- educate on not to take with alcohol or other drugs without knowledge of prescriber due to severe respiratory distress
- educate on keeping out of reach of others esp. children can be fatal.
- take with food

Evaluation of Medication Effectiveness

- P.O. = onset 10-30min, peak .5-1hr
- before administering check pain & reassess pain levels 30mins after.
- monitor heart rate, blood pressure, & bowel sounds
- monitor for change in respiratory status, symp. of CNS depression, & orthostatic hypotension