ACTIVE LEARNING TEMPLATE: # *Medication*

STUDENT NAME Rachel Mordes

MEDICATION Pneumonia (Pneumococcal 23-Valent) REVIEW MODULE CHAPTER _____

CATEGORY CLASS Vaccine; inactivated (bacterial)

PURPOSE OF MEDICATION

Expected Pharmacological Action
An inactive bacterial vaccine that induces active immunization to the stereotypes contained in the vaccine.

Therapeutic Use
Provides active immunization against Pneumococcal disease caused by the 23 serotypes in the vaccine. recommended for all adults ≥50 years.

Complications
Injection site: Erythema, soreness, pain, swelling, tenderness, edema. Neuro: fatigue, headache. Neuromuscular: myalgia. GI: diarrhea, nausea. NS: chills. Resp: upper resp tract infection. - chills, neck pain, Fever. Can also cause arthritis, decreased range of motion (limb), and febrile seizure

Contraindications/Precautions
Severe allergic reactions. Hypersensitivity reactions, shoulder injury related to vaccine administration, syncope. Precautions: acute illness, bleeding disorders, cardiovascular disease, HIV, CSF leaks, Pneumococcal meningitis, respiratory disease, splenectomy, and thrombocytopenia purpura. Also, Anticoagulant therapy, other vaccines, and antibiotic Prophylaxis.

Interactions
Acetaminophen, Anti-CD20 B-cell depleting therapies, Atidarsagene, Corticosteroids, dinutuximab beta, Elivaldogene Autotemcel, Fingolimod, Immunosuppressants, Methotrexate, Vaccine (13-Valent), Vaccine (20-Valent), siponimod, tepilzumab, Zostar Vaccine - May all decrease therapeutic effect.

Evaluation of Medication Effectiveness
development of antibody protection against pneumococcal disease. Reduced risk/incidence of pneumonia, bacteremia, meningitis in vaccinated populations. 60-70% protection for invasive pneumococcal disease in adults.

Medication Administration
Adult: ≥ 50 years of age
0.5mL/dose IM
- One time dose for most adults

Pediatrics: ≥2 years/high risk
0.5mL/Im (not common)
the maximum & minimum dosage is 0.5mL - always

Nursing Interventions
-Verify Vaccine history, ensure proper dose/Im technique, Monitor for allergic reaction or syncope for at least 15 minutes post-injection. Keep emergency equipment ready/ready incase a reaction occurs. Document per CDC guidelines.

Client Education
This Vaccine helps prevent serious pneumococcal infections, Common mild effects are; sore arm, redness, fatigue, headache, fever, or chills (should resolve in 1-2 days) report allergic reactions if occurs. May need to be revaccinated after 5 years & does not prevent flu.

ACTIVE LEARNING TEMPLATE: *Medication*

STUDENT NAME Rachel Mordes

MEDICATION Influenza Virus Vaccine REVIEW MODULE CHAPTER

CATEGORY CLASS Vaccine; Inactivated Viral

PURPOSE OF MEDICATION

Expected Pharmacological Action
-Used to prevent individuals from getting Influenza Virus, by inducing specific antibody production.

Therapeutic Use
provides active immunization for the prevention of seasonal influenza, caused by strains of influenza A & B. Reduces the risk of influenza-related complications, hospitalizations, and death. Recommended annually for all persons ≥6 months of age without contraindications

Complications
Complications at injection site: bruising, erythema, pain swelling. CV: chest pain, syncope, tachycardia, Vasodilation. GI: abdominal pain, diarrhea, dysphagia, swelling in mouth. Hypersensitivity: anaphylactic shock. Neuro: abnormal gait, dizziness, headache, seizures, impaired mobility. Neuromuscular: limb pain. Resp: asthma, dyspnea, laryngitis, resp distress, tonsilitis, Wheezing. May also cause nausea/vomiting and/or coughing

Medication Administration
Adults >64 years of age:
IM injection 0.5mL/dose
(only one dose per season)
children: 0.25-0.5mL
(depending on factors
high-dose = IM 0.7mL/dose

Contraindications/Precautions
Severe allergic reaction: anaphylaxis. History of severe allergic reaction to egg protein. Oculorespiratory Syndrome - an acute self-limiting reaction. Shoulder injury related to vaccine administration. Syncope: has been reported with injectable vaccines and may result in serious secondary injury.

Nursing Interventions
Evaluate/ask pt about any known allergies, monitor for hypersensitivity & syncope for 15 mins following administration. Evaluate for previous reactions, bleeding disorders, acute illness, & immunosupressed status. Monitor for mild side-effects (soreness, fever, aches, fatigue, swelling at injection site)

Interactions
Acetaminophen, Anti-CD20 B-cell, Atidarsagene, autotemcel, corticosteroids (systemic), dinutuximab, Elivaldogene autotemcel, fingolimod, immunosuppressants, methotrexate, pneumococcal conjugate vaccine, propacetamol, Siponimod, teplizumab, → (general medications - not specific)
→ May all decrease therapetic affects of the vaccine.

Client Education
The vaccine prevents the flu but does not cause it. Takes about two weeks for protection; recommended to get annually. Common mild side effects are: sore arm, tiredness, headache and low fever. Report Severe allergic reactions.

Evaluation of Medication Effectiveness
Onset of action: most adults have antibody protection within 2 weeks of vaccination. Duration: Vaccine effectiveness declines at a variable rate, depending on virus subtypes, patient age, and other confounding factors.