

# ACTIVE LEARNING TEMPLATE: Medication

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MEDICATION Morphine sulfate (IVP) REVIEW MODULE CHAPTER \_\_\_\_\_ CATEGORY CLASS opioid- controlled substance class II

## PURPOSE OF MEDICATION

### Expected Pharmacological Action

Opioid analgesic. Binds with and activates opioid receptors (mu receptors) in brain and spinal cord to produce analgesia and euphoria

### Therapeutic Use

To relieve severe pain

### Complications

Anxiety, chills, coma, confusion, decreased concentration, dilutions, depression, dizziness, drowsiness, edema, euphoria, fever, gait disturbance, headache, increased intracranial pressure, seizures, bradycardia, cardiac arrest, hypotension, chock, tachycardia, laryngospasm, abdominal cramps, intestinal obstruction, thrombocytopenia, apnea, hypoventilation, bronchospasm, anaphylaxis,

### Medication Administration

Adults: highly individualized based on pt response. 0.1 to 0.2 mg/kg q 4 hr PRN. Have opioid antagonist (naloxone) immediately available before admin. Discard injection solution that is discolored or darker than pale yellow or contains precipitates that don't dissolve with shaking. Dilute drug in 5% dextrose in water to obtain 0.1 to 1mg/mL for continuous infusion. For direct IV injection dilute appropriate dose with 4 to 5 mL of sterile water for injection. Onset about 5 minutes, peak at 20 min, duration 4-5 hours.

### Contraindications/Precautions

Acute or severe bronchial asthma in an unmonitored setting or in the absence of resuscitative equipment. GI obstruction, hypersensitivity, respiratory depression, use of MAO inhibitors within the last 14 days.

### Nursing Interventions

Monitor respiratory status  
Administer carefully  
Monitor bp  
Monitor pt status regularly

### Interactions

Stjohns wort, antidepressants: increased risk of serotonin syndrome;  
Anticholinergics: possible severe constipation leading to ileus, urine retention;  
Diuretics: decreased diuretic efficacy; MAO inhibitors: increased risk for opioid toxicity; Alcohol use: increased morphine plasma levels and potentially fatal overdose of morphine from increased CNS and respiratory depression and hypotension

### Client Education

Stress importance of taking drug exactly as prescribed and before pain is severe. Do not tell medication more than needed. Do not take this medication for long. Avoid alcohol. May cause allergic reaction. See provider if persistent, serious, or unusual adverse reactions, especially breathing problems. Change positions slowly. Long term uses.

### Evaluation of Medication Effectiveness

Patient is no longer in pain