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Adult/Geriatric Medication Worksheet – Current Medications & PRN for Last 24 Hours

Allergies: Penicillin, Lisinopril

Primary IV Fluid and Infusion Rate (ml/hr)		Circle IVF Type		Rationale for IVF		Lab Values to Assess Related to IVF		Contraindications/Complications	
Lactated Ringers 50ml/ hour		Isotonic/ Hypotonic/ Hypertonic		Replace fluid and lytes		Potassium, calcium, sodium		Tachycardia, hyperkalemia, edema	
Generic Name	Pharmacologic Classification	Therapeutic Reason	Dose, Route & Schedule	Correct Dose? If not, what is correct dose?	IVP – List diluent solution, volume, and rate of administration IVPB – List concentration and rate of administration	Adverse Effects	Appropriate Nursing Assessment, Teaching, Interventions (Precautions/Contraindications, Etc.)		
Enoxaparin (lovenox)	Anticoagulant (LMW Heparin)	Prevent: DVT, angina, stroke, STEMI, pulmonary embolism	SQ, 40 mg Daily	Y N		Hemorrhage, fever, site reaction, heparin induced thrombocytopenia	1. Admin in love handles- bunch throughout 2. Monitor platelet count and for bleeding 3. Report bleeding gums, nosebleed, blood in urine/ stool 4. Report easy bruising		
Pantoprazole (protonix)	Proton-pump inhibitors	Decreased acid secretion, lesson acid reflex, heal duodenal ulcers	PO 40mg Daily	Y N		Hyperglycemia, AB pain, diarrhea, CDiff	1. Do not break crush or chew tablets 2. Patient needs to avoid alcohol and NSAIDS 3. Notify HCP if diarrhea, bloody stools, or abdomen cramping occur 4. monitor bowel function and serum magnesium		
Amlodipine	Calcium channel blockers	Decreases blood pressure	PO 10mg daily	Y N		Dizziness, fatigue, peripheral edema, Brady cardia	1. Monitor blood pressure and pulse before Med 2. monitor intake and output and daily weight 3. Advise patient to use sunscreen and protective clothing 4. caution patient to change position slowly		
Hydrochlorothiazide	Thiazide diuretics	Decreases blood pressure	PO 25 mg Daily	Y N		Lethargy, hyperglycemia, Steven Johnson syndrome	1. Monitor blood pressure and intake and output 2. assess lower extremities for edema daily 3. monitor electrolytes and blood glucose 4. patient needs to keep taking this Med even if they feel better		
Escitalopram	SSRI	Antidepressant	PO 20mg	Y N		Insomnia, suicidal thoughts, sweating, dry mouth	1. monitor for mood changes in anxiety level 2. can cause dizziness so avoid activities requiring alertness until response to medication is known 3. advise patient family and caregivers to look for suicidal tendencies		

			Daily				4. advise patient tonight stop taking Med abruptly
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Generic Name	Pharmacologic Classification	Therapeutic Reason	Dose, Route & Schedule	Correct Dose? If not, what is correct dose?	IVP - List solution to dilute and rate to push. IVPB - List mL/hr and time to give	Adverse Effects	Appropriate Nursing Assessment, Teaching, Interventions (Precautions/Contraindications, Etc.)
ASA (Aspirin)	Salicylates Nonopioid analgesics	Analgesia, reduce inflammation, fever. Decrease ischemic attacks and MI	81 mg PO Daily	Y N		Rash, Gi bleed, anemia, anaphylaxis	<ol style="list-style-type: none"> 1. Instruct pt to take with a full glass of water 2. Med may need to be withheld 1 week prior to surgery 3. increasing dosing will not increase benefit of preventing MI or strokes 4. 3 or more glasses of alcohol can increase risk of GI bleed
Crestor (Rosuvastatin Calcium)	HMG-CoA Reductase inhibitors	Lower total and LDL cholesterol and triglycerides	PO 20mg Daily	Y N		Weakness, ab pain, confusion, hyperglycemia	<ol style="list-style-type: none"> 1. if patient develops muscle tenderness during therapy CK levels should be monitored 2. notify if Muscle pain tenderness or weakness occurs 3. Take missed doses as soon as remembered but not within 12 hours of next dose 4. Medication should be used with diet restrictions, exercise, no smoking
Quetiapine	Anti- psychotics	decrease depression, psychosis, or acute mania	PO 25mg BID	Y N		dizziness, pancreatitis, cough, seizures	<ol style="list-style-type: none"> 1. monitor blood pressure and pulls 2. can cause dizziness so avoid activities requiring alertness until response to medication is known 3. Notify HCP of sore throat, fever, unusual bleeding, rash 4. 3. advise patient family and caregivers to look for suicidal tendencies
				Y N			<ol style="list-style-type: none"> 1. 2. 3. 4.
				Y N			<ol style="list-style-type: none"> 1. 2. 3. 4.

Adopted: August 2016, revised October 2018