

## IM 2 Pharmacology Worksheet

**Use the drop-down menu next to each generic drug to select its brand name**

furosemide	<input type="text"/>	enoxaparin	<input type="text"/>
morphine sulfate	<input type="text"/>	losartan	<input type="text"/>
ondansetron	<input type="text"/>	lisinopril	<input type="text"/>
metoclopramide	Reglan	propranolol	<input type="text"/>
ceftriaxone	<input type="text"/>	carvedilol	<input type="text"/>
acetaminophen	<input type="text"/>	amlodipine	<input type="text"/>
levofloxacin	<input type="text"/>	diltiazem	<input type="text"/>
Insulin lispro	<input type="text"/>	pantoprazole	<input type="text"/>
Insulin glargine	<input type="text"/>		

**Use the drop-down menu next to each drug to match it with the correct class/subclass**

furosemide	<input type="text"/>	levofloxacin	<input type="text"/>
metoprolol	<input type="text"/>	morphine	<input type="text"/>
ceftriaxone	<input type="text"/>	acetaminophen	<input type="text"/>
Insulin lispro	<input type="text"/>	vancomycin	<input type="text"/>
enoxaparin	<input type="text"/>	metoclopramide	<input type="text"/>

**Fill in the Blank**

A healthcare provider may choose between these two types of rapid acting insulin for sliding scale Insulin Lispro and Regular Insulin

Rapid Acting insulin is the only insulin that can be administered via the intravenous route.

Two especially important nursing interventions for patients receiving an opioid are Checking Respiration rate and blood pressure

This lab must be assessed prior to administration of enoxaparin- Platelet count must be checked prior to administration of enoxaparin

**Answer the following questions:**

What does the pneumonic CLABSI stand for?

Central Line Associated Blood Stream Infection

List 5 signs/symptoms of hypoglycemia:

Dizziness, cold clammy skin, altered mental status, increased HR, weakness

List 5 signs/symptoms of hyperglycemia:

Weakness, altered mental status, nausea/ vomiting, fruity smelling breath, SOB

Give 5 causes for change in mental status:

Hypoglycemia, hypoxia, UTI, Sepsis, Stroke

List the 6 "P's" for peripheral neurovascular assessment:

Pain, Pallor, Pulse, Parathesia, Paralysis, Poikilothermia

What does MEWS stand for and why is it important?

Modified Early Warning Signs, and it is important because it helps catch Sepsis early.

Many patients in the hospital receive enoxaparin as part of treatment. What is the rationale for this treatment?

Many patients receive enoxaparin in the hospital because it is an anticoagulant. This being because most patients have either just had surgery, or they are bed ridden for days and this keeps the risk of any DVT or clotting at a lower rate.

What is medical asepsis?

State of being free from any disease-causing microorganisms

List 4 examples of medical asepsis in the hospital setting:

Disinfectants, Hand Hygiene, Wearing gloves, Sharps Safety

Other than diabetes, list 4 reasons a patient's blood glucose could be elevated:

Steroid medications, TPN feeding, infection, stress

What is the reason for the use of the incentive spirometer?

Prevent atelectasis, pneumonia, preserve normal lung function

Describe how you would teach a patient to use the incentive spirometer:

Have them sitting up, tell the patient hold onto the left handle, inhale a deep breath nice and slow, watch the gauge on the side and have it hover over their desired target, have them do this ten times an hour. Then I'd tell the patient after they do one rest and catch their breath before doing another.

***In the IV lecture you were asked to read the article on best practices for intravenous medication administration. The answers to the following 6 questions can be found in that article.***

What does ISMP stand for?

Institute of Safe Medication Practices

What does ISMP state regarding dilution of medications for the intravenous push route?

Dilute IV push medications only when recommended by the manufacturer

How does a nurse determine if a central venous device is functional/patent?

Aspirate for positive blood return and encountering no resistance when manually flushing the device.

How does a nurse determine if a peripheral IV site is functional/patent?

Assess for any infiltration or extravasation then use the push pause technique when flushing the line.

Why is a 10 mL diameter-sized syringe recommended for establishing patency of a central venous device?

Manufacturers recommend using a minimum of a 10mL syringe to assess patency because a syringe of this size generates a lower injection pressure than a syringe with a small diameter such as a 5mL or 3mL.

List 3 reasons why a nurse should not withdraw IV push medication from a commercially available, cartridge-type syringe into another syringe for administration.

Using the cartridge as a vial can lead to contamination since they were not intended to be used this way. It can lead to dosage errors, drug mix-ups due to syringes not being labeled, and other types of medication errors. It is also not economical when comparing the cost of prefilled syringes and vials of the same medication.

***Other questions related to intravenous therapy:***

What are the signs and symptoms of air embolism?

Tachypnea, Dyspnea, palpitations, drop in BP, lightheadedness, weakness, cyanosis, expiratory wheezes.

Describe the treatment for air embolism:

Place patient in Trendelenburg position and on left side, call for help, monitor VS, administer oxygen, have crash cart ready.

What are the signs and symptoms of fluid overload?

Dependent edema, pain, SOB, cramping, headache, rapid weight gain, crackles in lungs

Describe the treatment for fluid overload

Monitor intake and output, give fluids and correct rate

List the steps when administering and intravenous medication via a triple lumen subclavian intermittent site:

Check the site, palpate for any edema, then choose the lumen for medications, unclamp lumen, clean the needless connector with alcohol, then aspirate to check patency, flush 9mL using push pause technique, clean with alcohol, push the medication at recommended rate, clean with alcohol, flush at the rate of the given med for 2-3mL then use push pause for the rest of the 9mL, then apply a new orange cap.

Name the only intravenous fluid (crystalloid) that can be used for blood administration.

Normal Saline