

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 -regular insulin, insulin lispro

Rapid acting/regular insulin -is the only insulin that can be administered via the intravenous route.

Two especially important nursing interventions for patients receiving an opioid are- respiratory rate/O2 Saturation, check for constipation

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

Answer the following questions:

What does the mnemonic CLABSI stand for?

Central line associated bloodstream infection

List 5 signs/symptoms of hypoglycemia:

Fatigue, lightheaded, confusion, nausea, fainting

List 5 signs/symptoms of hyperglycemia:

Blurred vision, fatigue, headache, shortness of breath, increased thirst

Give 5 causes for change in mental status:

Medications, liver failure, infections, stroke, UTI, brain tumor

Kambree Irvin

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

Pain, pallor, pulse, paresthesia, paralysis, poikilothermia

What does MEWS stand for and why is it important?

Modified early warning score, It is important to help nurses identify patients with declining conditions.

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

Help prevent DVT and stroke.

What is medical asepsis?

It is clean technique to limit growth of contamination.

List 4 examples of medical asepsis in the hospital setting:

Hand washing, wearing mask, wearing gloves, using alcohol pads

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

Obesity, nutrition through feeding tube, certain medications, dehydration

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

It is a breathing exercise device to help you breathe deeply and keep your lungs healthy possibly after a surgery or lung illness.

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

Sit up if possible, cover mouthpiece to create a seal with lips, breathe in deeply, hold breathe for 5 seconds or more, then exhale slowly. You can move the indicator to set a reasonable goal and repeat several times every hour.

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 for 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, supported by evidence in peer-reviewed biomedical literature, or in accordance with approved institutional guidelines. They also state that whenever possible, dilution should occur by the pharmacy.

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

By flushing with a 10 mL syringe filled with preservative free 0.9% sodium chloride. It's not stated in the article, but you would need to aspirate before flushing.

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

Flush with 10 mL syringe of 0.9% sodium chloride.

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

A syringe of this size generates lower injection pressure than a syringe with a small diameter.

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

To save time and reduce medication errors, can lead to contamination, it is more costly than the prefilled syringes.

Other questions related to intravenous therapy:

What are the signs and symptoms of air embolism?

Dyspnea, tachypnea, palpitations.

Describe the treatment for air embolism:

Call for help, position patient in Trendelenburg on left side, administer oxygen and monitor vitals.

What are the signs and symptoms of fluid overload?

Shortness of breath, cramping, and headache

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Describe the treatment for fluid overload

Administer diuretics and low salt diet.

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

Pull medication from pyxis, check hcp orders and emar, draw up medication after cleaning cap, label syringe, collect supplies, check wristband and ask DOB and name, ask about allergies, scan wristband, scan medication, assess IV site, prime saline syringes, unclamp lumen, clean needless connector for 15 seconds, attach saline and aspirate for blood return, flush 9 mL saline, clean connector, administer medication within IVP rate, clean connector, post flush slowly first 2 mL then flush until 9 mL have been given, attach swab cap, clamp lumen, save medication.

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

Normal saline