

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

Primary IV Fluid and Infusion Rate (ml/hr)	Circle IVF Type	Rationale for IVF	Lab Values to Assess Related to IVF	Contraindications/Complications
	Isotonic <input type="checkbox"/> Hypotonic <input type="checkbox"/> Hypertonic <input type="checkbox"/>			

Student Name: Briana mojica		Unit:	Patient Initials:		Date:	Allergies:	
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.)
Hydroxyzine pamoate	Antihistamine	Anxiety	25mg PO PRN q6	Choose an item.		constipation, dry eyes, dry mouth, and blurred vision antihistamines cause sedation	<ol style="list-style-type: none"> 1. Elderly patients may be more susceptible to adverse anticholinergic effects of antihistamines. 2. Assess allergy symptoms (rhinitis, conjunctivitis, hives) before and periodically throughout therapy. 3. Assess mental status, mood, and behavior when administering for anxiety. 4. Inform patient that drowsiness may occur. Avoid driving or other activities requiring alertness until response to drug is known.
lorazepam	Benzodiazepine	Alcohol withdrawal / anxiety	1-2 mg PO PRN q4 hours	Choose an item.		dizziness, drowsiness, lethargy,	<ol style="list-style-type: none"> 1. Toxicity and Overdose: If overdose occurs, flumazenil (Romazicon) is the antidote. Do not use with patients with seizure

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							<p>disorder. May induce seizures.</p> <p>2. Assess degree and manifestations of anxiety and mental status (orientation, mood, behavior) prior to and periodically throughout therapy.</p> <p>3. Prolonged high-dose therapy may lead to psychological or physical dependence. Restrict amount of drug available to patient.</p> <p>4. Advise patient that lorazepam is usually prescribed for short-term use and does not cure underlying problem. Advise patient to decrease lorazepam dose gradually to minimize withdrawal symptoms; abrupt withdrawal may cause tremors, nausea, vomiting, and abdominal and muscle cramps.</p>
haldol	antipsycho	for psychotic symptoms/ag	10 mg IM PRN	Choose an item.		extrapyramidal reactions,	1. Assess mental status (orientation, mood, behavior) prior to and

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	tic	itation	q8	Click here to enter text.		blurred vision, dry eyes constipation, dry mouth	<p>periodically during therapy and positive (hallucination, delusions) and negative (social isolation) symptoms of schizophrenia.</p> <p>2. Monitor for development of neuroleptic malignant syndrome (fever, respiratory distress, tachycardia, seizures, diaphoresis, hypertension or hypotension, pallor, tiredness, severe muscle stiffness, loss of bladder control). Report symptoms immediately.</p> <p>3. Monitor CBC with differential and liver function tests periodically during therapy.</p> <p>4. Inform patient of possibility of extrapyramidal symptoms, tar-dive dyskinesia, and neuroleptic malignant syndrome. Caution patient to report symptoms immediately.</p>

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diphenhydramine	antihistamine	management of cholinergic effects of antipsychotic	50 mg IM q8 PRN psychotic symptoms	Choose an item. Click here to enter text.		Drowsiness, anorexia, dry mouth	<ol style="list-style-type: none"> 1. frequent oral rinses, good oral hygiene, and sugarless gum or candy may minimize this effect. 2. patient to avoid driving or other activities requiring alertness until response to drug is known. 3. Teach sleep hygiene techniques (dark room, quiet, bedtime ritual, limit daytime napping, avoidance of nicotine and caffeine) to patients taking diphenhydramine to aid sleep. 4. Advise patient to use sunscreen and protective clothing to prevent photosensitivity reactions.
acetaminophen	Analgesic/antipyretic	Mild-moderate pain	500 mg PO q6 for pain of 1-4 on pain scale	Choose an item. Click here to enter text.	Click here to enter text.	ACUTE GENERALIZED EXANTHEMATOUS PUSTULOSIS, STEVENS-	<ol style="list-style-type: none"> 1. Toxicity and Overdose: If overdose occurs, acetylcysteine (Acetadote) is the antidote. 2. Assess type, location, and intensity prior to and 30– 60 min following administration.

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						JOHNSON SYNDROME, TOXIC EPIDERMAL NECROLYSIS, rash, urticaria. HEPATOTOXICITY	3. Advise patient to discontinue acetaminophen and notify health care professional if rash occurs. 4. Caution patient to check labels on all OTC products. Advise patients to avoid taking more than one product containing acetaminophen at a time to prevent toxicity.
olanzapine	antipsychotic	Agitation/psychotic behavior	5 mg PO q6 for agitation	Choose an item. Click here to enter text.	Click here to enter text.	NEUROLEPTIC MALIGNANT SYNDROME, SEIZURES, SUICIDAL THOUGHTS, agitation, delirium, dizziness,	1. Geri: May require decreased doses; increased risk of mortality in elderly patients treated for dementia-related psychosis. 2. Assess mental status (orientation, mood, behavior) before and periodically during therapy. Monitor closely for notable changes in behavior that could indicate the emergence or worsening of suicidal thoughts or behavior or depression. 3. Advise patient and family to notify

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						headache, restlessness, sedation, weakness, agranulocytosis	health care professional if thoughts about suicide or dying, attempts to commit suicide; new or worse depression; new or worse anxiety; feeling very agitated or restless; panic attacks; trouble sleeping; new or worse irritability; acting aggressive; being angry or violent; acting on dangerous impulses; an extreme increase in activity and talking, other unusual changes in behavior or mood occur. 4. Inform patient of possibility of extrapyramidal symptoms and tardive dyskinesia. Instruct patient to report these symptoms immediately to health care professional.
ibuprofen	NSAID	Mild-moderate pain	400 mg PO q6 for pain	Choose an item. Click here		Headache constipation, dyspepsia,	1. Advise patients to take ibuprofen with a full glass of water and to remain in an upright position for 15-

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			of 1-4 on pain scale	to enter text.		nausea, vomiting	<p>30 min after administration.</p> <p>2. Caution patient that use of ibuprofen with 3 or more glasses of alcohol per day may increase the risk of GI bleeding.</p> <p>3. Assess patient for skin rash frequently during therapy. Discontinue ibuprofen at first sign of rash; may be life-threatening. Stevens-Johnson syndrome or toxic epidermal necrolysis may develop. Treat symptomatically; may recur once treatment is stopped.</p> <p>4. Assess pain (note type, location, and intensity) prior to and 1– 2 hr following administration.</p>
risperdal	antipsychotic	Psychotic behavior/bipolar mania	1 mg tablet PO BID	Choose an item. Click here to enter	Click here to enter text.	NEUROLEPTIC MALIGNANT SYNDROME,	1. Monitor closely for notable changes in behavior that could indicate the emergence or worsening of suicidal thoughts or behavior or depression, especially during early

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				text.		SEIZURES, aggressive behavior, dizziness, extrapyramidal reactions, headache, increased dreams, increased sleep duration, insomnia, sedation, itching/skin rash, constipation, diarrhea, dry mouth, nausea	therapy. 2. Monitor for development of neuroleptic malignant syndrome (fever, respiratory distress, tachycardia, seizures, diaphoresis, hypertension or hypotension, pallor, tiredness). Notify health care professional immediately if these symptoms occur. 3. Advise patient to change positions slowly to minimize orthostatic hypotension. Protect from falls. 4. Advise patient to use sunscreen and protective clothing when exposed to the sun to prevent photosensitivity reactions. Extremes in temperature should also be avoided; this drug impairs body temperature regulation.
Nicotine patch	Stimulant	Nicotine replacement	21 mg transder	Choose an item.	Click here to enter	burning at patch site,	1. Apply patch at the same time each day.

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			mal patch daily	Click here to enter text.	text.	erythema, pruritus, cutaneous hypersensitivity, rash, sweating.	<p>2. Advise patient that redness, itching, and burning at application site usually subside within 1 hr.</p> <p>3. May cause drowsiness or dizziness. Caution patient to avoid driving or other activities requiring alertness until response to medication is known.</p> <p>4. Keep patch in place during showering, bathing, or swimming; replace patches that have fallen off. Wash hands with soap and water after handling patches. Do not trim or cut patch.</p>
ziprasidone	antipsychotic	Psychotic behavior/bipolar disorder/mania	40 mg PO BID	Choose an item. Click here to enter text.	Click here to enter text.	NEUROLEPTIC MALIGNANT SYNDROME, seizures,	<p>1. Assess for falls risk. Drowsiness, orthostatic hypotension, and motor and sensory instability increase risk. Institute prevention if indicated.</p> <p>2. Monitor for development of neuroleptic malignant syndrome (fever, respiratory distress,</p>

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						dizziness, drowsiness, restlessness, AGRANULOCYTOSIS,	tachycardia, seizures, diaphoresis, hypertension or hypotension, pallor, tiredness). Notify health care professional 3. May cause seizures and drowsiness. Caution patient to avoid driving or other activities requiring alertness until response to medication is known. 4. Advise patient to notify health care professional of all Rx or OTC medications, vitamins, or herbal products being taken and to consult with health care professional before taking other medications. Caution patient to avoid concurrent use of alcohol and other CNS depressants.
prazosin	Alpha-blocker	Nightmares	1 mg PO QHS	Choose an item.	Click here to enter text.	first-dose orthostatic hypotension, palpitations,	1. Assess for first-dose orthostatic reaction (dizziness, weakness) and syncope. May occur 30 min- 2 hr after initial dose and occasionally

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						dizziness, headache, weakness	thereafter. 2. 1st dose may be given at bedtime to minimize this reaction. 3. Advise patient to weigh self twice weekly and assess feet and ankles for fluid retention. 4. consult with health care professional before taking other medications, especially NSAIDs and cough, cold, or allergy remedies.
Nicotine inhaler	Stimulant	Nicotine replacement	10 mg cartridge for inhalation Q2	Choose an item. Click here to enter text.	Click here to enter text.	Cough Dyspnea Local mouth throat irritation	1. Regular use of the spray or inhaler during the first wk of therapy may help patient adjust to irritant effects of the spray. 2. Prior to therapy, assess smoking history (number of cigarettes smoked daily, smoking patterns, nicotine content of preferred brand, degree to which patient inhales smoke). 3. Assess patient for symptoms of

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							<p>smoking withdrawal (irritability, drowsiness, fatigue, headache, nicotine craving) periodically during nicotine replacement therapy (NRT).</p> <p>4. Toxicity and Overdose: Monitor for nausea, vomiting, diarrhea, increased salivation, abdominal pain, headache, dizziness, auditory and visual disturbances, weakness, dyspnea, hypotension, and irregular pulse.</p>
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Choose an item. Click here to enter text.	Click here to enter text.		<ol style="list-style-type: none"> 1. 2. 3. 4.
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Choose an item. Click here to enter text.	Click here to enter text.		<ol style="list-style-type: none"> 1. 2. 3. 4.

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