Medication Work Sheet – Instructions

1. **Student name, unit, pt. initials, date**: self-explanatory

2. **Allergies:** medications, foods, etc.

3. **Generic name:** non-proprietary name; think NCLEX!

4. **Pharmacological classification:** describes how the drug acts (ie: Anti-hypertensive, diuretic, beta-adrenergic, etc.)

5. **Therapeutic reason:** intended purpose/treatment

6. **Dose, Route, Frequency:**
   a. **Dose** – amount to be given (ie: 25 mg)
   b. **Route** – PO, PR, inhalant, topical, TD etc.
   c. **Frequency** – how often? Daily, BID, TID, QID, etc. – (will see actual hours on eMAR)

7. **Correct Dose? Y/N:** Is the dose ordered within the acceptable range; if no, what is & what would you do?

8. **IVP/IVPB –** will be addressed starting in Module 2

9. **Adverse effects:** list *most* important/applicable effects (ie: bradycardia, hypotension, vertigo, diarrhea, respiratory depression, etc.)

10. **Nursing assessment, teaching, interventions:** decide *most* important
    a. **Assessment:** vital signs, blood sugar, labs, skin, etc.
    b. **Teaching/interventions/precautions:** Information needed to educate your patient (ie: check BP/HR or BS first; meds/foods to avoid; positional precautions, "do not take if …", "report immediately if …", operational precautions, etc.)

- **Remember - each medication work sheet is patient specific**

Student Name:_____ Date:_____

Adult/Geriatric Medication Worksheet – Current Medications & PRN for last 24 Hours (Medication Admin Lab)

Allergies:_____

Generic Name	Pharmacologic Classification	Therapeutic Reason	Dose, Route & Frequency	Correct Dose? If no, what is correct dose?	What RN needs to be aware of: (assessment, interventions, precautions, contraindications)	What to teach patient? What are the possible side effects?
Metoprolol / Toprol	Beta blocker	HTN (high blood pressure)	25 mg/ 2.5mL per PEG tube Daily	Y N	1. Assess VS before admin. HR must be above 50 bpm and BP must be greater than 100/60 mmHg 2. Assess labs: BUN, creatinine, electrolytes, CBC 3. Assess for swelling of the eyes, lips, tongue (angioedema). 4. Avoid other HTN meds, diuretics, NSAIDS	1. May cause extreme fatigue, dizziness, depression, confusion, trouble sleeping, diarrhea 2. Let me know if you feel light-headed, have chest pain, shortness of breath, or if your hands or feet feel cold 2. Call for help when getting out of bed
Ondansetron Hydrochloride/ Zofran	5-HT_3 antagonist	Nausea, emesis (nausea and vomiting)	4 mg SL every 4 hours PRN nausea	Y N	1. Assess bowel sounds	1. May cause drowsiness, headache, constipation, dizziness 2. Report if heart "feels like it's skipping a beat or racing, 3. Call for help when getting out of bed.

Promethazine Hydrochloride/ Phenergan	Dopamine antagonist	Anti-emetic (nausea and vomiting)	12.5 mg PR	Y N	1. Assess respirations. Should be greater than 10. 2. I & O for urinary retention	1. May cause weakness, dizziness, drowsiness, constipation, headache 2. Report uncontrolled movements

			every 4 hours PRN nausea			3. Change positions slowly 4. Sugarless gum/candy for dry mouth
Timolol Maleate / Betimol	Beta – Adrenergic antagonist	Glaucoma (increase pressure in eyes)	0.5% eye 1 gtt OU BID	Y N	Can cause hypotension, bradycardia, arrhythmias; Do not use if have asthma, COPD; heart block, bradycardia 1. apply pressure to lacrimal duct x 1 min post admin 2. assess vs prior to admin 3. instill daily as directed 4. Wait 10 min between other eye meds	1. Can cause ocular stinging, headache, dry eyes, dry mouth 2. Sugarless gum/candy for dry mouth.

Budesonide & Formoterol / Symbicort	Corticosteroid / beta-adrenergic agonist	Bronchospasm COPD	80 mcg/4.5 mcg Inhalation BID	Y N	Headache, chest pain, SOB, tachycardia, nervousness, oral candida, **anaphylactic s/s** **1.** Assess breath sounds before and after administration	1. Can cause headache, chest pain, shortness of breath, nervousness 2. Not a rescue medication 3. Rinse mouth with water – don't swallow
Digoxin / Lanoxin	Cardiac glycoside	Anti-arrhythmic (abnormal heart rhythm, heart failure)	0.125 mg PO Daily	Y N	Bradycardia, fatigue, GI upset, 1. Assess apical rate. Hold for less than 60 Monitor BP. 2. Monitor potassium and dig levels 3. Monitor for N & V (early sign of toxicity)	1. May cause drowsiness, dizziness, fatigue, 2. Take as directed every day, same time 3. Report nausea and vomiting
Naproxen Sodium / Aleve	NSAID	Analgesic (pain reducer)	125 mg/5mL PO Every 12	Y N	Headache, vertigo, decreased mental status; GI bleed, blood disorders, upset stomach 1. Assess pain level	1. Avoid if allergic to aspirin or other non-steroidal anti-inflammatory drugs 2. Avoid with alcohol, ASA,

			hours PRN moderate pain		2. Assess BP	acetaminophen 3. Report ringing in the ears, easy bruising, rash 4. May raise blood pressure.
Nystatin Cream USP / Mycostatin	Anti-fungal, antibiotic	Anti-fungal	100,000 Units/G Topical BID to affected skin area	Y N	Dermatitis, local hypersensitivity 1. Clean and dry area to be treated	1. Apply as directed 2. Avoid occlusive dressing
Acetaminophen / Tylenol	Non-opioid analgesic, Anti-pyretic	Analgesic, anti-pyretic (pain reliever and fever reducer)	325-650 mg PO Every 6 hours PRN fever	Y N	s/s hepatotoxicity, (assess for nausea, vomiting, diarrhea, abdominal discomfort – early signs of)	1. Do not exceed 4 G per day (3g if malnourished) 2. Avoid alcohol 3. Report nausea, vomiting, diarrhea, abdominal discomfort.
Nicotine Transdermal System / Nicoderm CQ	Cholinergic receptor antagonist; Smoking deterrent	Smoking deterrent, cessation	14 mg TD Daily	Y N	Skin reactions, Headache, vertigo, cardiac, anomalies; s/s nicotine toxicity 1. Cleanse previous site and change site (non- hairy) 2. Date, time and initial	1. May cause redness, itching or edema. Report severe redness, itching or edema. 3. Report fast, irregular, pounding heartbeat 4. Remove patch prior to MRI 5. Do not use if pregnant 6. Do not smoke