

Student Name: \_\_\_\_\_

Unit: \_\_\_\_\_

Pt. Initials: \_\_\_\_\_

Date: \_\_\_\_\_

**Medication Worksheet - Current Medications & PRN for Last 24 Hours**

**Allergies:** \_\_\_\_\_

Primary IV Fluid and Infusion Rate (ml/hr)	Circle IVF Type	Rationale for IVF	Lab Values to Assess Related to IVF	Contraindications/Complications
	Isotonic/ Hypotonic/ Hypertonic			

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.)
Alprazolam	Benzodiazepine	Help manage anxiety	0.25 mg PO 2x a day	Y N		Drowsiness, dizziness, fatigue, impaired coordination,	<ol style="list-style-type: none"> <li>1. Assess baseline anxiety, sleep patterns, and CNS status</li> <li>2. Monitor for respiratory depression especially in our older population</li> <li>3. Teach patients to avoid alcohol, opioids, pr driving</li> <li>4. Educate on risk of dependence and importance of tapering doze slowly</li> </ol>
Escitalopram	SSRI	Treatment of major depressive disorder, generalized anxiety disorder	10 mg PO daily	Y N		Nausea, headache, insomnia/somnolence, sexual dysfunction, dry mouth, increased sweating, weight changes	<ol style="list-style-type: none"> <li>1. Monitor for suicidal ideation especially at initiation or dosage changes</li> <li>2. Monitor for serotonin syndrome such as confusion, fever, agitation, and tremors</li> <li>3. Teach that full therapeutic effects may take 2-4 weeks</li> <li>4. Do not stop abruptly; tapering is required to prevent withdrawal effects</li> </ol>
Hydroxyzine	Antihistamine (H1 receptor antagonist)	Short- term management of anxiety	25 mf PO 3x daily	Y N		Drowsiness, dizziness, dry mouth, urinary retention, blurred vision, constipation	<ol style="list-style-type: none"> <li>1. Monitor level of sedation, anticholinergic side effects (dry mouth, constipation, urinary retention).</li> <li>2. Avoid elderly or those with prolonged QT syndrome.</li> <li>3. Teach patient to avoid alcohol, CNS depressants, or driving until effects are known.</li> </ol>

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							4. Educate on short-term use only; not intended for long-term treatment of anxiety.
Quetiapine	Atypical Antipsychotic	Schizophrenia, bipolar disorder (mania, depression, maintenance)	100 mg PO daily	Y N		Sedation, orthostatic hypotension, weight gain, metabolic syndrome, QT prolongation, tardive dyskinesia, neuroleptic malignant syndrome	<ol style="list-style-type: none"> <li>1. Monitor for extrapyramidal symptoms such as involuntary movements, rigidity, and tremors</li> <li>2. Educate patients to rise slowly to prevent orthostatic hypotension</li> <li>3. Warn about sedation; avoid driving until effects are known</li> <li>4. Adherence is essential, and sudden discontinuation can cause withdrawal or relapse</li> </ol>
				Y N			<ol style="list-style-type: none"> <li>1.</li> <li>2.</li> <li>3.</li> <li>4.</li> </ol>