# Medication Work Sheet – Instructions for Use

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

2. **Generic Name/Trade Name:** list non-proprietary name first; then trade name

3. **Pharmacological Class:** describes how the drug acts (i.e.: Diuretic, Beta-Adrenergic)

4. **Therapeutic Reason:** intended purpose/treatment

5. **Dose, Route, Schedule:**
   a. **Dose** – amount to be given (i.e.: 25 mg)
   b. **Route** – PO, IV/IM, sub-Q, topical, rectal, etc.
   c. **Schedule** – how often? Daily, BID, TID, QID, etc.

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

7. **IVPB or IVP:** Is this an intravenous piggyback medication or an intravenous push medication?

8. **Adverse Reactions:** list _most_ important/applicable effects (i.e.: bradycardia, hypotension, vertigo, diarrhea, respiratory depression, etc.). DO NOT list common adverse reactions such as nausea, vomiting and diarrhea.

9. **Assessment, Teaching, Interventions:** decide _most_ important
   a. **Assessment(s):** vital signs, blood sugar, lab(s), skin, etc.
   b. **Teaching/Interventions:** Information needed to educate your patient (i.e.: check HR or BS first, foods to avoid, positional precautions, "do not take if …", "report immediately …", operational precautions, etc.)