

Unit 5 Part 1  
ON-LINE CONTENT

Review the article on the 2023 updates to the Beers list. For purposes of this assignment, focus on the charts inside the article to answer the questions. Place your answers to the following questions in the Unit 5 Part 1 drop box by 0800 on July 10, 2023.

*In order to receive full credit for your time for this assignment, it must be completed in its entirety by the due date/time assigned. Any assignment not completed in its entirety will result in missed theory time.*

1. After reviewing the medications on the Beers List, choose three medications that surprised you they were on the list and discuss why?

**If you want me to be honest, I am not really surprised by any of these medications on the beers list. I think as an older adult being off as many medications as possible would be best for a patient honestly since older adults usually are on many medications and some of which are for side effects of medications they are taking. If I had to choose 3 it would be antidepressants because some patients may need it due to not taking the aging process well. I found it interesting to see insulin with a sliding scale because I have given that to many patients on the med surg floor and they were always older adults. I found it to be surprising because it is common, and some people need it to live. Lastly, mineral oil because I know it is used to pass stool easier and I thought it was a more natural way to pass stool to avoid laxatives.**

2. Are there any medications that are not on the list that you think should be added? If so which medications and why?

**I think in general medications in the older adult populations should be avoided as much as possible. I understand if they need medications for a disease or to survive but again there have been excessive prescriptions in the older adult population that is over looked.**

3. When reviewing the section listing the medications that have been removed from the list on page 24, do any of the medications surprise you? If so, which one(s) and why?

**I found interesting that flurazepam and Quazepam were removed from the list because there were other benzodiazepines on the list. The list stated it was removed due to low use but still I think because it is a highly addictive and one of the side effects is that it could causes dizziness and that means it would be a high fall risk medication.**

4. Think back to the patients you cared for over the past year on clinical. What medications have you administered that are on the Beers list?

**I have administered insulin on a sliding scale that was short term, NSAIDs, warfarin, and most of the proton pump inhibitors that were on the list I have administered. I have administered warfarin A few times but the proton pump inhibitors I have given almost every time I am on clinical.**

5. Have you noticed any of the patients experiencing side effects associated with the medications you administered that were on the Beers list? If so, what were they?

**I have NSAIDs cause GI bleeds. One patient was in them for a GI bleed, and we noticed she took NSAIDs for a very long time. I have seen patient's taking proton pump inhibitors for a time greater then the 8 weeks they are supposed to be taken. I did not see side effects, but I have seen patients with bone loss, but I am not sure if it was associated. Lastly, insulin rapid or short acting I have given to a patient, and it did cause Hypoglycemia which is a side effect.**