

Psychotropic Medication Quiz

1. What is the mechanism of action by which antidepressant medications achieve the desired effect (regardless of the different physiological processes by which this action is accomplished)?

Inhibition or blocking of norepinephrine reuptake

2. For what must the nurse be on the alert with the client who is receiving antidepressant medication?

Be alert for seizures, suicidal ideation, serotonin syndrome

3. As the nurse, when would you expect the client to begin showing signs of symptomatic relief after the initiation of antidepressant therapy? 1-4 weeks

4. Name an example of a tricyclic antidepressant ____ Amitriptyline _____.

Name an example of an MAOI ____ Nardil _____.

Name an example of an SSRI ____ Sertraline _____.

5. Describe some common side effects and nursing implications for tricyclic antidepressants.

dry mouth, blurred vision, photophobia, urine retention, constipation, tachycardia

6. ____hypertensive crisis_____ is the most potentially life-threatening adverse effect of

MAOIs. Symptoms for which the nurse and client must be on the alert include: Headache, nausea, increased heart rate, increased BP, chest pain, and coma

7. . What must be done to prevent these symptoms from occurring? (Your answer must include some examples.) Avoid Tyramine rich foods: aged cheese, pepperoni banana, smoked fish, soy, and some beer/wine,

8. Lithium carbonate is commonly prescribed for bipolar mania. Many times when these

individuals are started on lithium therapy, the physician also orders an antipsychotic medication. Why might he or she do so? Promote sleep, decrease agitation and anxiety. Also promote mood stabilization.

9. There is a narrow margin between the therapeutic and toxic serum levels of lithium carbonate. What is the therapeutic range? List the initial signs and symptoms of lithium toxicity.

Therapeutic Range is $>0.8 - >1.2$ mEq, 1.2 mEq or greater of Lithium you begin to show signs of early toxicity from vomiting and diarrhea, then at higher levels you may experience drowsiness, ataxia, tremors, seizures cardiovascular collapse and even death.

10. Describe some nursing implications for the client on lithium therapy.

Instruct the pt to report all meds, herbals, and caffeine use to HCP, Maintain 2000-3000mL/day fluid intake, avoid activities that cause excessive sweating, and blood level should be drawn 12 hours after last dose.

11. What is the mechanism of action for anxiolytics (with the exception of buspirone)?

Enhance inhibitory effects of gamma-aminobutyric acid (GABA) in the CNS. = anxiety relief

12. What is the most commonly used group of anxiolytics? Give two examples.

Benzodiazepine Sedative Hypnotic Anxiolytics: Xanax and Rivotril

13. What are the most common side effects of anxiolytics?

Sedation, light headedness, confusion, and orthostatic hypotension

14. What must the client on long-term anxiolytic therapy be instructed in order to prevent a potentially life-threatening situation? Do not stop meds abruptly

15. What is thought to be the mechanism of action that produces the desired effect with antipsychotic medications?

Block dopamine, acetylcholine, histamine and norepinephrine receptors in the brain and periphery. Inhibits psychotic manifestations.

of Care in Evidence-Based Practice
16. Phenothiazines are an example of a typical antipsychotic group. Give two examples of phenothiazines

and two examples of the newer “atypical” antipsychotics. Aripiprazole and Brexpiprazole

17. Describe potential adverse hormonal effects associated with antipsychotic therapy.

Gynecomastia or breast enlargement, galactorrhea, and menstrual irregularities

18. Agranulocytosis is a potentially very serious side effect of antipsychotic therapy. The nurse and client should be on the alert for symptoms of ___malaise_____, _____fever_____, and ___sore throat_____.

19. Neuroleptic malignant syndrome (NMS) is a rare but potentially fatal side effect of antipsychotic drugs.

List symptoms for which the nurse must be on the alert when assessing for NMS.

Sudden high-grade fever, BP fluctuations, Dysrhythmias, Muscle rigidity, Diaphoresis, Coma

20. Describe the symptoms of extrapyramidal side effects associated with antipsychotic therapy.

severe spasms of the tongue, neck, face, or back and uncontrolled eye rolling

21. What is the classification of medication that is commonly prescribed for drug-induced extrapyramidal reactions? Give two examples of these medications.

Anticholinergic agents like Benztropine or Diphenhydramine

22. Describe a potentially life-threatening situation that could occur in the client who abruptly withdraws from long-term use of CNS stimulants.

Depression, suicidal ideation, and unstable vital signs.

Please read the chapter and answer the following questions:

1. Identify three priority safety concerns for each class of psychotropic medications.

Antianxiety Agents

- ***Abrupt withdrawal***
- ***Aggravate symptoms of depression***
- ***Blood Dyscrasias***

Antipsychotics (novel)

- ***Extrapyramidal side effects***
- ***Hypotension***
- ***Hyperglycemia/weight gain and diabetes***

Antipsychotics (phenothiazines and haloperidol)

- ***Lithium toxicity***
- ***Increased risk of suicide***
- ***Stevens-Johnson Syndrome***

MAO Inhibitors

- **Serotonin Syndrome**

- **Hypertensive crisis**
- **Seizures**

SSNRIs

- **Insomnia**
- **Tremors**
- **Sexual dysfunction**

SSRIs

- **Serotonin Syndrome**
- **Increased sedation**
- **Increased risk of bleeding**

Tricyclic antidepressants

- **Seizures**
- **Paralytic Ileus**
- **Severe HTN**

2. Differentiate primary actions and side effects for traditional versus atypical antipsychotics.

Traditional antipsychotics primary action is on the reduction of dopamine. Primary side effects include extrapyramidal side effects and sedation however, atypical antipsychotic agents primary action is on serotonin reduction. Primary side effects include diabetes and weight gain.

3. Differentiate primary actions and side effects for tricyclic versus SSRI antidepressants.

Tricyclic antidepressants primary action is on norepinephrine. Primary side effects include anticholinergic activity such as orthostatic hypotension. The primary action of SSRI antidepressants is to reduce the reuptake of serotonin in the CNS. Some primary side effects include anxiety, possible suicide ideation, sexual dysfunction, and hyponatremia.

