

Learning Activity 4.1.

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)?

Increase levels of serotonin and norepinephrine.

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

Suicidal intentions

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

Begin showing signs of symptomatic relief 10-14 days, up to 4 weeks.

4. Name an example of a tricyclic antidepressant ___Doxepin_____.

Name an example of an MAOI ___Phenelzine_____.

Name an example of an SSRI ___Sertraline_____.

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

Some side effects include Dry mouth, Constipation, Sedation, Orthostatic Hypotension, Urinary retention. We would want to request order at bedtime, Teach patient to move slowly, Increase fluids, eat foods rich in fiber and frequent sips of water.

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

Symptoms for which the nurse and client must be on the alert include: ___Increase in BP, HR, and

headache_____. What must be done to prevent these symptoms from occurring? (Your answer

must include some examples.) Avoid food items that include Tyramine like old cheese, preserved meats, chocolate and red wine.

7. Lithium carbonate is commonly prescribed for __bipolar disorders (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? To help with sleep, stabilize mood.

8. 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.

Initial: 0.8-1.4
Toxicity- above 1.5

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

Adequate fluid and sodium levels, monitor plasma lithium levels, watch for signs and semester of toxicity, monitor I&O.

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

CNS depression

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

Chlordiazepoxide and Diazepam

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

Sedation, Confusion, Orthostatic hypotension.

13. What must the client on long-term anxiolytic therapy be instructed in order to prevent a potentially life-threatening situation?

Never stop abruptly

14. What is thought to be the mechanism of action that produces the desired effect with antipsychotic medications? Block dopamine D2, receptors in the brain can result in psychotic signs and symptoms.

15. Phenothiazines are an example of a “typical” antipsychotic group. Give two examples of phenothiazines and two examples of the newer “atypical” antipsychotics.

- Phenothiazines: Chlorpromazine, Thiothixene
- “Atypical” antipsychotics: Risperidone, Clozapine

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

Breast enlargement, menstrual irregularities.

17. Agranulocytosis is a potentially very serious side effect of antipsychotic therapy. The nurse and client should be on the alert for symptoms of ___Fever_____, ___Cough_____, and ___Sore throat_____.

18. 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.

Dysrhythmias, LOC into coma, Sudden high-grade fever and Muscle rigidity.

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

Severe spasms of tongue, neck, face or back and these are a medical emergency and require treatment right away.

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

Anticholinergic agents. Two examples include Diphenhydramine and Benztropine.

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

Delirium Tremens

Homework Assignment Questions and Answers

Please read the chapter and answer the following questions:

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

Antianxiety Agents

1. *Abrupt withdrawal*
2. *Drowsiness, confusion*
3. *Aggravate s/s of depression*

Antipsychotics (novel)

1. *Sedation*
2. *Dizziness*
3. *Blurred Vision*

Antipsychotics (phenothiazines and haloperidol)

1. *Tachycardia*
2. *Urine retention*
3. *Postural hypotension*

MAO Inhibitors

1. *HTN crisis*
2. *Dizziness*
3. *Sedation*

SSNRIs

1. ***Insomnia***
2. ***Tremors***
3. ***Nausea***

SSRIs

1. ***Tremors***
2. ***Insomnia***
3. ***Nausea***

Tricyclic antidepressants

1. ***Urine retention***
2. ***Sedation***
3. ***Dizziness, lethargy, headache, nausea***

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

Atypical antipsychotics: Relief of anxiety, acute mania and psychosis. S/S: Potential interactions for some other drugs, Orthostasis.

Traditional antipsychotics: Relief of psychosis, anxiety, and some relief from N/V. S/S: Postural hypotension, Ejaculatory difficulty, increases plasma prolactin.

Common symptoms of both: Tachycardia, Constipation, urine retention, decrease in sweating, blurred vision, dry mouth.

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

Tricyclic: Block NE receptor, Ach receptor, and histamine receptor. S/S: Sedation, weight gain, dry mouth, constipation, tachycardia, postural hypotension.

SSRI: Inhibit reuptake of serotonin. S/S: Nausea, headache, agitation.