

Unit 8
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 8 Dropbox by 0800 on July 15, 2024.

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?

Glipizide- it's an antidiabetic medication, but it increases the risk of ischemic strokes and MI. I have given it many of times and not paid attention to the side effects.

Growth hormone- I thought the only time we give that medication is for kids. It says it can cause edema and carpal tunnel. I don't understand how edema is one of the risks. Carpal tunnel makes sense, because the body starts to grow rapidly

Mineral oils- It's on the beers list because of the risk of aspiration. I think whenever I give it, I always say drink it fast, so you don't taste it but don't choke.

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

Mineral oils is on the list for aspiration, we should put all liquid forms of medication. Robitussin would be a great example; everyone drinks that fast.

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?

All the medications make since that are on the list. Doxepin is the only one that surprised me. Only because we can't take more than 6mg a day.

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?

Aspirin, SSRIs, zolpidem, verapamil, NASIDs,

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?

Opioids, gabapentin and pregabalin. They all have a risk for respiratory depression and sedation. When I get a large amount of those medications, the patient always falls asleep. It made sense with the opioids and the pregabalin, but I never understood why with gabapentin. Now it makes sense.