

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?**

The first drug on the Beers lists that shocked me was Diphenhydramine (oral). Diphenhydramine (oral) is known as Dramamine. A lot of older adults have always had or developed motion sickness. Dramamine is an over-the-counter medication to help with motion sickness and I see a lot of older people taking it often because it is so convenient. I did not expect something so commonly used there to be avoided.

The second drug that I was surprised to see on that list was Insulin on the sliding scale. That really shocked me because I know a lot of older patients that use Insulin and, in the hospitals, they typically use the sliding scale. That really surprised me to see that they should avoid using it.

The last drug that I was surprised to see on the Beers lists was Aspirin. I know Aspirin has a lot of potential effects, but doctors sometimes recommend Aspirin to patients to prevent cardiac issues. That was interesting to see that Aspirin was on the list to avoid because it's typically something that is recommended to take.

- 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 all the medications that were on the list were the medications that I think should be on the list. There really were not any medications that I thought of that I feel that should be added to the list. After reading why those medications should not be given and why they were on the list I understood why they were on there.

- 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?**

No medications surprised me to see that they were removed. I did not recognize any of the drugs on the table that were removed. I did recognize that a decent amount of the drugs that were removed from the lists they did not sell in the U.S market.

- 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?**

A medication that I have administered a lot to on the Beers lists to a lot of patients of the older age would be Aspirin. I administered a lot of Aspirin in foundations as well as Med Surg and never knew they were on the Beers lists or needed to be avoided.

- 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?**

When I had administered the Aspirin I was there for just half a day mostly when I gave it. From what I had seen during the time I was there after administration of the Aspirin, no patients experienced any side effects at all.