Medication Template

STUDENT NAME: Anthony Drivas

MEDICATION: Lisinopril

PHARMACOLOGIC CLASSIFICATION:
-Ace inhibitor

THERAPEUTIC CLASSIFICATION:
-Antihypertensive

THERAPEUTIC EFFECTS:
-Lowering of blood pressure in hypertensive pt's
-Increased survival after MI
-Increased survival and decreased symptoms in pt's with HF

PHARMACOLOGICAL ACTIONS

-Ace inhibitors block the conversion of angiotensin 1 to the vasoconstrictor angiotensin 2

-Prevent the degradation of bradykinin and other vasodilatory prostaglandins

ADVERSE REACTIONS/SIDE EFFECTS

AR-Angioedema

SE-Hypotension, chest pain, rash, hyperkalemia, abd pain, n/v/d, erectile dysfunction, renal impairment, dizziness, fatigue, headache, weakness and cough

CONTRAINDICATIONS/PRECAUTIONS

C-Hypersensitivity, Hx of angioedema with previous use of ACE inhibitors, concurrent use with sacubitril/valsartan

P-Renal impairment, hypovolemia, hyponatremia or concurrent diuretic therapy, surgery or anesthesia, Black patients

MEDICATION INTERACTIONS

-Concurrent use with sacubitril can increase risk of angioedema

-Excessive hypotension may occur with concurrent use of diuretics

-Additive hypotension with other antihypertensive agents

NURSING INTERVENTIONS

-Monitor blood pressure and pulse

-Monitor BUN and creatinine, may cause hyperkalemia

-monitor frequency of prescription refills

-Assess pt for sings of angioedema

-Monitor weight and assess pt routinely for resolution of fluid overload

ROUTES/ADULT DOSAGES

Tablets- 2.5, 5, 10, 20, 30 and 40mg

Oral solution0 1mg/mL

PATIENT EDUCATION

-Notify PCP if you develop a rash, mouth sores, sore throat, fever, swelling of hands or feet, irregular heart beat, chest pain, dry cough, hoarseness, swelling of face/eyes/lips or tongue or having any difficulty breathing/swallowing

-May cause dizziness so avoid driving until response to medication is known

-advise diabetic pt to closely monitor their blood sugar especially during first month of treatment