Follow the instructions for the online assignment attached. The assignment must be completed and placed in Unit 1 Chapter 3: Psychopharmacotherapy Assignment Dropbox by 0800 on 5/28/2025. In order to receive full credit (0.5H class 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 class time.

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)?

   -They work by effecting the balance of neurotransmitters in the brain to reduce symptoms of depression.

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

   -They must be on alert for the client possibly experiencing suicidal thoughts.

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

   - You would expect them to start showing these signs at about 2-4 weeks.

4. Name an example of a tricyclic antidepressant Amitriptyline.

   Name an example of an MAOI Phenelzine.

   Name an example of an SSRI Fluoxetine.

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

   Some side effects are blurred vision, dry mouth, sedation, and hypotension. Some nursing implications would be that the patient is at an increased fall risk, and should use extra caution, due to

the blurred vison, sedation, and hypotension. Another nursing implication is the need to regularly assess for suicidal ideation.

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 **severe hypertension, chest pain, blurred vision, headaches, and seizures/altered mental status**. What must be done to prevent these symptoms from occurring? (Your answer must include some examples.)

   One thing that can done is adhere to dietary restrictions of tyramine rich foods, such as aged cheeses, cured meats, and red wine. Another that can be done is avoid other medications that interact with MAOIs, such as other antidepressants like SSRIs(ex. Citalopram)

7. Lithium carbonate is commonly prescribed **for bipolar disorder**. Many times when these individuals are started on lithium therapy, the physician also orders an antipsychotic medication. Why might he or she do so?- **They might do this because antipsychotic medications have a faster symptom control than lithium carbonate. This can help when this individual is experiencing severe mood disturbances.**

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.

   Therapeutic range is 0.6-1.2 mEq/L. Signs of toxicity are vomiting, diarrhea, slurred speech, drowsiness, decreased coordination, and hypothyroidism/renal changes.

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

   - **You will want to monitor for signs of toxicity, thyroid/kidney function, electrolytes, ECG, as well as the client's weight while on lithium therapy.**

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

-It's mechanism of action works by enhancing GABA effects, which is a neurotransmitter.

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

    The most commonly used group is Benzodiazepines. Two examples are Lorazepam and Alprazolam.

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

    The most common side effects are drowsiness, sedation, fatigue, confusion, and ataxia.

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

    They must be instructed to not stop taking this medication abruptly.

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

    It is thought to be that the mechanism of action works by modifying neurotransmitter, especially dopamine, activity in the brain.

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

    Two examples of "typical" phenothiazines are Chlorpromazine and Haloperidol. Two examples of "atypical" are Risperidone and Olanzapine.

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

    Some potential hormonal effects are amenorrhea, which is the absence of menstruation, and galactorrhea, which is milk production unrelated to breastfeeding.

17. Agranulocytosis is a potentially very serious side effect of antipsychotic therapy. The nurse and client should be on the alert for symptoms of infection, sore throat, and fever.

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.

-Signs and symptoms such as fever of 103-105 or greater, hypertension/hypotension, tachycardia, tachypnea, diaphoresis/pallor, muscle rigidity, and change in mental status.

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

    Some symptoms include acute dystonia, severe muscle contractions, and akathisia, the urge to move constantly.

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

    -Benzodiazepines are often prescribed. Two examples are Lorazepam and Chlordiazepoxide.

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

    -Suddenly stopping these medications could lead to the client developing suicidal thoughts and severe depression.

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. ***They should not be taken in combination with other CNS medications that are contraindicated in pregnancy, shock, and coma.***
   2. ***Use caution when administering to elderly or clients with hepatic/renal disfunction.***
   3. ***Contraindicated in individuals with known hypersensitivity to drugs within classification of anxiolytics and group benzodiazepines.***

   Antipsychotics (novel)

   1. ***Use of antipsychotics with chlorpromazine or beta blocker increasing effects of both.***
   2. ***Use with alcohol and other CNS depressants will produce increased CNS depression.***
   3. ***Risk for orthostatic hypotension, which increases fall risk.***

   Antipsychotics (phenothiazines and haloperidol)

   1. ***Increased risk for neuroleptic malignant syndrome***
   2. ***Increased sedation and CNS depression can impair mobility and lead to a fall risk.***
   3. ***Extrapyramidal symptoms are more common and should be on the lookout for sudden muscle spasms and restlessness.***

   MAO Inhibitors

   1. ***Avoid tyramine rich foods, which can lead to a hypertensive crisis.***
   2. ***Make sure to avoid other depressants such as SSRIs***

3. ***Make sure to monitor for hypertensive crisis symptoms such as sudden headache, stiff neck, sweating, and increased blood pressure.***

SSNRIs

1. ***Make sure to monitor for serotonin syndrome, which presents with confusion, tachycardia, and muscle rigidity.***
2. ***Monitor blood pressure with the risk of the medication increasing blood pressure.***
3. ***Avoid stopping the medication abruptly, it may cause symptoms such as nausea and vomiting.***

SSRIs

1. ***Hypertensive crisis may occur if used within 14 days of MAOIs.***
2. ***With use of alcohol may cause impairment of mental and motor skills.***
3. ***Serotonin syndrome may occur with use of MAOIs.***

Tricyclic antidepressants

1. Hypertensive crisis, severe seizures, and tachycardia may occur with the use of MAOIs.
2. Additive sympathomimetic and anticholinergic effects may occur if used with drugs that have similar effects.
3. Use of these drugs may decrease therapeutic response to some anti hypertensives.

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

Traditional has strong D2 receptor blockage, while atypical has D2 and 5-HT2 serotonin receptor blockage. They have similar effects however traditional can provide relief from nausea and vomiting, while atypical relieves acute mania. Atypical also relieves psychosis similar to the traditional but with minimal EPS. Typical has more movement related side effects while atypical has more endocrine effects.

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

Tricyclic and SSRI both inhibit reuptake of serotonin. They both reduce depression but SSRIs controls anxiety and obsessions, while tricyclic relieves pain and prevents panic attacks. Tricyclic has more cardiovascular and sedative side effects, while SSRIs have lower risk and more GI related side effects.