

N307 Polypharmacy Rubric

You will use the 7-day pill box given in pharmacology to take your medications as directed. This box will need to be returned at the end of the project for points, undamaged.

Please address all rubric items. Please include a reflection of your experience. You may place drugs in each separate paragraph or in a table. You must cite your source for each paragraph or table.

Graded Item	Points Received	Points Possible
Take your selected medication list and determine how you will take your medications. (ie: Trade (generic), 20mg, BID, I will take this twice a day, once at 0800 and once at 1800.)		35
What is the lowest dose of the medication?		10
Is there any type of medication on your list that have specific directions? (before bed, before breakfast, 30 minutes before meals, etc..)		15
Do any of your medications counteract each other?		15
Do any of your lifestyle factors counteract your medications? You are a daily tobacco user, ETOH use - 3 beers daily		10
Does any of your PMH contradict your medications? You will determine what you believe is the PMH based off your given medication list.		15
What type of PMH can you determine you have based off your medication list?		20
What would you teach yourself about your medications?		15
What was difficult about maintaining your medication regiment?		10

Why do you think it is difficult for patients to remain compliant?		10
What would you do if you missed a medication or had questions?		5
How much would your medications cost per month if you were to pay for them out of pocket? (best assessment based off of research)		10
Return of medication box, undamaged.		5
Source citation, rubric attached for grading, reference page		10
Reflective statement of experience.		15
Total Points		200

Polypharmacy Project

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N307-01: Introduction to Pharmacology

Lakeview College of Nursing

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07/13/2019

I have read and understand the plagiarism policy as outlined in the Catalog relating to the LCN Honesty/Cheating Policy. By signing this statement to the, I certify that I have not cheated or plagiarized in the process of completing my course assignments/exams/quizzes. If it is found that cheating and/or plagiarism did take place in this course, I understand the possible consequences of the act/s, which could include expulsion from Lakeview College of Nursing.

Drug List:

1. Labetalol HCL	4. Spironolactone	7. Atorvastatin	10. Paroxetine HCL
2. Sertraline HCL	5. Metformin	8. St. John’s Wort	11. Allopurinol
3. Lorazepam	6. Amlodipine Besylate	9. Nitroglycerin	12. Risperidone

PMH Based on Medication List:

1. Hypertension (high blood pressure)	4. Spironolactone is used to treat: <ul style="list-style-type: none"> • Heart failure (CHF) • Hypertension • Hypokalemia • Edema • Cirrhosis of the liver • Nephrotic syndrome 	7. Atorvastatin is used to treat: <ul style="list-style-type: none"> • Hypercholesterolemia • Lower risk of stroke • Lower risk of MI • Coronary artery disease (CAD) • Coronary heart disease (CHD) 	10. Paroxetine is used to treat: <ul style="list-style-type: none"> • Depression • Anxiety • Panic disorder • Obsessive-compulsive disorder (OCD) • Post-traumatic stress disorder (PTSD) • Social anxiety disorder (SAD) • Premenstrual dysphoric disorder (PMDD)
2. Sertraline is used to treat: <ul style="list-style-type: none"> • Obsessive compulsive disorder (OCD) • Major depressive disorder (MDD) • Posttraumatic stress disorder (PTSD) 	5. Type 2 Diabetes Mellitus	8. St. John’s Wort is used to treat: <ul style="list-style-type: none"> • Depression • Anxiety • Insomnia 	11. Allopurinol is used to treat: <ul style="list-style-type: none"> • Gout • Kidney stones • Hyperuricemia

<ul style="list-style-type: none"> • Panic disorder (PD) • Social anxiety disorder (SAD) • Premenstrual dysphoric disorder (PMDD) 			
<p>3. Anxiety disorder</p>	<p>6. Amlodipine is used to treat:</p> <ul style="list-style-type: none"> • Chest pain (angina) • Coronary artery disease (CAD) • Hypertension (high blood pressure) 	<p>9. Angina</p>	<p>12. Risperidone is used to treat:</p> <ul style="list-style-type: none"> • Schizophrenia • Bipolar disorder

<p>Drug #1</p> <p>Drug Class: Antihypertensive</p>	<p>Drug Name (Generic): labetalol hydrochloride</p> <p>Drug Name (Trade): Normodyne, Trandate</p>
<p>How I will take the medication: via PO, IV Infusion, or IV injection.</p> <p>ORAL: Initial dose: 100 mg orally 2 times a day (alone or added to a diuretic regimen) Titration: Dosage may be increased in increments of 100 mg orally 2 times a day every 2 or 3 days Maintenance dose: 200 to 400 mg orally 2 times a day</p>	<p>SLOW CONTINUOUS IV INFUSION: -The solution for injection should be prepared according to the manufacturer suggested guidelines for a resultant solution of 1 mg/mL or 2 mg/3 mL: -For 1 mg/mL, the diluted solution should be administered at a rate of 2 mL/min to deliver 2 mg/min. -For 2 mg/3 mL, the diluted solution should be administered at a rate of 3 mL/min to deliver approximately 2 mg/min. -Rate of infusion: The rate of infusion of the diluted solution may be adjusted according to the</p>

<p>Maximum dose: Some patients may require 1200 to 2400 mg orally per day (titration increments should not exceed 200 mg orally 2 times a day).</p> <p>IV Injection:</p> <ul style="list-style-type: none"> -Immediately before the injection and at 5 and 10 minutes after injection, supine blood pressure should be measured to evaluate response. -Initial dose: 20 mg by slow IV injection over a 2-minute period -Additional injections of 40 to 80 mg can be given at 10 minute intervals until a desired supine blood pressure is achieved or a total of 300 mg has been used -The maximum effect usually occurs within 5 minutes of each injection. 	<p>blood pressure response, at the discretion of the physician. To facilitate a desired rate of infusion, the diluted solution can be infused using a controlled administration mechanism, (e.g., graduated burette or mechanically driven infusion pump).</p> <ul style="list-style-type: none"> -Since the half-life of this drug is 5 to 8 hours, steady-state blood levels (in the face of a constant rate of infusion) would not be reached during the usual infusion time period; the infusion should be continued until a satisfactory response is obtained and should then be stopped and the oral formulation should be started. -The effective IV dose is usually in the range of 50 to 200 mg. -A total dose of up to 300 mg IV may be required in some patients. <p>Comments:</p> <ul style="list-style-type: none"> -The injection solution is intended for IV use in hospitalized patients. -Patients should always be kept in a supine position during the period of IV drug administration. A substantial fall in blood pressure on standing should be expected in these patients. -Blood pressure should be monitored during and after completion of the infusion or IV injections.
<p>What is the lowest dose of the medication?</p>	<p>PO: 100 mg tablet IV Infusion: 2mg/min IV injection: 20 mg</p>
<p>Specific Directions:</p> <p>Tablets: Store between 2°C and 30°C (36°F and 86°F). Protect from light and excessive moisture.</p> <p>Injectable: Store between 20°C and 25°C (68°F and 77°F); do not freeze. Protect from light.</p>	<p>Oral: Administer without regard to food; however, the absolute bioavailability of labetalol is increased when administered with food. Administer in a consistent manner with regards to meals.</p> <p>Parenteral: Bolus dose may be administered IV push at a rate of 10 mg/minute; may follow with continuous IV infusion</p>
<p>Does it counteract with my other medications?</p> <p>Moderate: Using labetalol together with sertraline may</p>	<p>Moderate: Labetalol and LORazepam may have additive effects in lowering your blood pressure. You may experience headache, dizziness, lightheadedness, fainting, and/or changes</p>

increase the effects of labetalol. Contact your doctor if you experience uneven heartbeats, shortness of breath, bluish-colored fingernails, dizziness, weakness, fainting, or seizure (convulsions). If your doctor does prescribe these medications together, you may need a dose adjustment or special test to safely use both medications. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.

Moderate: Using labetalol and **spironolactone** together may lower your blood pressure and slow your heart rate. This can cause dizziness, or feeling like you might pass out, weakness, fainting, fast or irregular heartbeats, or loss of blood glucose control. If you take both medications together, tell your doctor if you have any of these symptoms. You may need a dose adjustment or need your blood pressure checked more often to safely use both medications. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.

Moderate: Using labetalol together with **PARoxetine** may increase the effects of labetalol. Contact your doctor if you experience uneven heartbeats, shortness of breath, bluish-colored fingernails, dizziness, weakness, fainting, or seizure (convulsions). If your doctor does prescribe these medications together, you may need a dose adjustment or special test to safely use both medications. It is important to tell your doctor about all other medications you use, including vitamins and

in pulse or heart rate. These side effects are most likely to be seen at the beginning of treatment, following a dose increase, or when treatment is restarted after an interruption. Let your doctor know if you develop these symptoms and they do not go away after a few days or they become troublesome. Avoid driving or operating hazardous machinery until you know how the medications affect you, and use caution when getting up from a sitting or lying position. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.

Moderate: Labetalol and **amLODIPine** may have additive effects in lowering your blood pressure and heart rate. You may experience headache, dizziness, lightheadedness, fainting, and/or changes in pulse or heartbeat. These side effects are most likely to be seen at the beginning of treatment, following a dose increase, or when treatment is restarted after an interruption. Let your doctor know if you develop these symptoms and they do not go away after a few days or they become troublesome. You may need a dose adjustment or more frequent monitoring by your doctor to safely use both medications. Avoid driving or operating hazardous machinery until you know how the medications affect you, and use caution when getting up from a sitting or lying position. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications.

Moderate: **RisperiDONE** and labetalol may have additive effects in lowering your blood pressure. You may experience headache, dizziness, lightheadedness, fainting, and/or changes in pulse or heart rate. These side effects are most likely to be seen at the beginning of treatment, following a dose increase, or when treatment is restarted after an interruption. Let your doctor know if you develop these symptoms and they do not go away after a few days or they become troublesome. Avoid activities requiring mental alertness such as driving or operating hazardous machinery until you know how the medications affect you, and use caution when getting up from a sitting or lying position. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.

<p>herbs. Do not stop using any medications without first talking to your doctor.</p>	
<p>My lifestyle interactions: (Daily tobacco use/ETOH – 3 beers daily)</p> <p>Labetalol may impair your thinking or reactions. Be careful if you drive or do anything that requires you to be alert. Avoid getting up too fast from a sitting or lying position, or you may feel dizzy. Get up slowly and steady yourself to prevent a fall.</p>	<p>Drinking alcohol can further lower your blood pressure and may increase certain side effects of labetalol. Labetalol and ethanol may have additive effects in lowering your blood pressure. You may experience headache, dizziness, lightheadedness, fainting, and/or changes in pulse or heart rate. These side effects are most likely to be seen at the beginning of treatment, following a dose increase, or when treatment is restarted after an interruption. Let your doctor know if you develop these symptoms and they do not go away after a few days or they become troublesome. Avoid driving or operating hazardous machinery until you know how the medications affect you, and use caution when getting up from a sitting or lying position. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p>
<p>Does any of your PMH contradict your medications?</p>	<p>No contradiction to lebatolol.</p>
<p>What type of PMH can you determine you have based off this medication</p>	<p>Hypertension (high blood pressure)</p>
<p>What would you teach yourself if you were taking these medications?</p> <p>Follow all directions on your prescription label. Your doctor may occasionally change your dose to make sure you get the best results. Do not use this medicine in larger or smaller amounts or for longer than recommended.</p> <p>Your blood pressure will need to be checked often, and you may need frequent medical tests at your doctor's office.</p> <p>If you need surgery, tell the surgeon ahead of time that you are using labetalol.</p>	<p>Taking labetalol can make it harder for you to tell when your blood sugar is low. If you have diabetes, check your blood sugar regularly.</p> <p>Keep using this medicine as directed, even if you feel well. High blood pressure often has no symptoms. You may need to use blood pressure medicine for the rest of your life.</p> <p>Store at room temperature away from moisture and heat.</p> <p>Labetalol is only part of a complete program of treatment for hypertension that may also include diet, exercise, weight control, and other medications. Follow your diet, medication, and exercise routines very closely.</p> <p>Labetalol may impair your thinking or reactions. Be careful if you drive or do anything that requires you to be alert. Avoid getting up too fast from a sitting or lying position, or you may feel dizzy. Get up slowly and steady yourself to prevent a fall.</p>

<p>Do not skip doses or stop taking labetalol without first talking to your doctor. Stopping suddenly may make your condition worse.</p> <p>Labetalol can cause false results with certain lab tests of the urine. Tell any doctor who treats you that you are using labetalol.</p>	<p>Drinking alcohol can further lower your blood pressure and may increase certain side effects of labetalol.</p> <p>Get emergency medical help if you have signs of an allergic reaction: hives; difficulty breathing; swelling of your face, lips, tongue, or throat.</p>
<p>What would you do if you missed a medication?</p>	<p>Take the missed dose as soon as you remember. Skip the missed dose if your next dose is less than 8 hours away. Do not take extra medicine to make up the missed dose.</p>
<p>How much would your medication cost per month if you had to pay for it out of pocket?</p>	<p>Tablet (100 mg) = \$24.53/100 tablets Tablet (200 mg) = \$35.70/100 tablets Tablet (300 mg) = \$57.07/100 tablets IV solution (5 mg/mL) = \$11.02 per 20 mL</p>

<p>Drug #2</p> <p>Drug Class: Antidepressant</p>	<p>Drug Name (Generic): sertraline hydrochloride</p> <p>Drug Name (Trade): Zoloft</p>
<p>How I will take the medication: PO</p> <p>ORAL:</p> <p>Continuous regimen:</p> <ul style="list-style-type: none"> -Initial dose: 50 mg orally once a day during the menstrual cycle -Maintenance dose: 50 to 150 mg orally once a day during the menstrual cycle <p>Cyclic regimen:</p>	<p>Comments:</p> <ul style="list-style-type: none"> -The dose may be increased in increments of 50 mg per menstrual cycle, increased at the onset of each new cycle; dosage adjustments may also include changes between regimens. -If a 100 mg once daily dose has been established with the cyclic regimen, a titration step of 50 mg per day for three days should be used at the beginning of each dosing period (luteal phase of the menstrual cycle). -The effectiveness of sertraline for longer than three months has not been systematically evaluated in controlled trials.

<p>-Initial dose: 50 mg orally once a day starting 14 days prior to the anticipated start of menstruation through to the first full day of menses, and repeated with each new cycle</p> <p>-Maintenance dose: 50 to 100 mg orally once a day</p>	
<p>What is the lowest dose of the medication?</p>	<p>PO: 25 mg tablet</p>
<p>Specific Directions:</p> <p>Store at 20°C to 25°C (68°F to 77°F); excursions permitted to 15°C to 30°C (59°F to 86°F).</p>	<p>Oral solution: Must be diluted immediately before use to make the preparation more palatable. Direct administration of the pure solution is astringent and may numb the tongue/mouth for at least a day, even if the mouth is rinsed extensively (Pfizer Medical Information, written communication, February 2, 2016). Note: Use with caution in patients with latex sensitivity; dropper dispenser contains dry natural rubber.</p>
<p>Does it counteract with my other medications?</p> <p>Major: Using sertraline together with St. John's Wort can increase the risk of a rare but serious condition called the serotonin syndrome, which may include symptoms such as confusion, hallucination, seizure, extreme changes in blood pressure, increased heart rate, fever, excessive sweating, shivering or shaking, blurred vision, muscle spasm or stiffness, tremor, incoordination, stomach cramp, nausea, vomiting, and diarrhea. Severe cases may result in coma and even death. You should seek immediate medical attention if you experience these symptoms while taking the medications. Talk to your doctor if you have any questions or concerns. Your doctor may already be</p>	<p>Moderate: Using sertraline together with risperiDONE can increase the risk of an irregular heart rhythm that may be serious and potentially life-threatening, although it is a relatively rare side effect. You may be more susceptible if you have a heart condition called congenital long QT syndrome, other cardiac diseases, conduction abnormalities, or electrolyte disturbances (for example, magnesium or potassium loss due to severe or prolonged diarrhea or vomiting). Talk to your doctor if you have any questions or concerns. You should seek immediate medical attention if you develop sudden dizziness, lightheadedness, fainting, shortness of breath, or heart palpitations during treatment with these medications, whether together or alone. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p> <p>Moderate: Treatment with sertraline may occasionally cause blood sodium levels to get too low, a condition known as hyponatremia, and using it with spironolactone can increase that risk. You should seek medical attention if you experience nausea, vomiting, headache,</p>

<p>aware of the risks, but has determined that this is the best course of treatment for you and has taken appropriate precautions and is monitoring you closely for any potential complications. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p> <p>Moderate: Using labetalol together with sertraline may increase the effects of labetalol. Contact your doctor if you experience uneven heartbeats, shortness of breath, bluish-colored fingernails, dizziness, weakness, fainting, or seizure (convulsions). If your doctor does prescribe these medications together, you may need a dose adjustment or special test to safely use both medications. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p>	<p>lethargy, irritability, difficulty concentrating, memory impairment, confusion, muscle spasm, weakness or unsteadiness, as these may be symptoms of hyponatremia. More severe cases may lead to hallucination, fainting, seizure, coma, and even death. Sertraline can also affect your blood pressure and heart rate. You may need a dose adjustment or more frequent monitoring of your blood pressure and pulse to safely use both medications. You should avoid rising abruptly from a sitting or lying position while taking these medications, especially at the beginning of treatment or after an increase in dose. Call your doctor if you experience dizziness, lightheadedness, fainting, or a rapid heartbeat. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p> <p>Moderate: Using LORazepam together with sertraline may increase side effects such as dizziness, drowsiness, confusion, and difficulty concentrating. Some people, especially the elderly, may also experience impairment in thinking, judgment, and motor coordination. You should avoid or limit the use of alcohol while being treated with these medications. Also avoid activities requiring mental alertness such as driving or operating hazardous machinery until you know how the medications affect you. Talk to your doctor if you have any questions or concerns. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p>
<p>My lifestyle interactions: (Daily tobacco use/ETOH – 3 beers daily)</p> <p>Avoid or limit the use of alcohol while being treated with sertraline. Alcohol can increase the nervous system side effects of sertraline such as dizziness, drowsiness, and difficulty concentrating. Some people may also experience impairment in thinking and judgment. Talk to your doctor or pharmacist if you have any questions or concerns.</p>	<p>Alcohol (Ethyl): May enhance the adverse/toxic effect of Selective Serotonin Reuptake Inhibitors. Specifically, the risk of psychomotor impairment may be enhanced. Management: Patients receiving selective serotonin reuptake inhibitors should be advised to avoid alcohol. Monitor for increased psychomotor impairment in patients who consume alcohol during treatment with selective serotonin reuptake inhibitors. <i>Consider therapy modification</i></p>
<p>Does any of your PMH contradict your medications?</p>	<p>No contradiction to sertraline.</p>

<p>What type of PMH can you determine you have based off this medication</p>	<p>Sertraline is used to treat:</p> <ul style="list-style-type: none"> • Obsessive compulsive disorder (OCD) • Major depressive disorder (MDD) • Posttraumatic stress disorder (PTSD) • Panic disorder (PD) • Social anxiety disorder (SAD) • Premenstrual dysphoric disorder (PMDD)
<p>What would you teach yourself if you were taking these medications?</p> <p>Do not drink alcohol.</p> <p>Ask your doctor before taking a nonsteroidal anti-inflammatory drug (NSAID) for pain, arthritis, fever, or swelling. This includes aspirin, ibuprofen (Advil, Motrin), naproxen (Aleve), celecoxib (Celebrex), diclofenac, indomethacin, meloxicam, and others. Using an NSAID with sertraline may cause you to bruise or bleed easily.</p> <p>Sertraline may impair your thinking or reactions. Be careful if you drive or do anything that requires you to be alert.</p> <p>Do not stop using sertraline suddenly, or you could have unpleasant withdrawal symptoms. Ask your doctor how to safely stop using sertraline.</p> <p>Store at room temperature away from moisture and heat.</p>	<p>Take sertraline exactly as prescribed by your doctor. Follow all directions on your prescription label. Your doctor may occasionally change your dose. Do not take this medicine in larger or smaller amounts or for longer than recommended.</p> <p>Sertraline may be taken with or without food. Try to take the medicine at the same time each day.</p> <p>The liquid (oral concentrate) form of sertraline must be diluted before you take it. To be sure you get the correct dose, measure the liquid with the medicine dropper provided. Mix the dose with 4 ounces (one-half cup) of water, ginger ale, lemon/lime soda, lemonade, or orange juice. Do not use any other liquids to dilute the medicine. Stir this mixture and drink all of it right away. To make sure you get the entire dose, add a little more water to the same glass, swirl gently and drink right away.</p> <p>Sertraline can cause you to have a false positive drug screening test. If you provide a urine sample for drug screening, tell the laboratory staff that you are taking sertraline.</p> <p>It may take up to 4 weeks before your symptoms improve. Keep using the medication as directed and tell your doctor if your symptoms do not improve.</p>
<p>What would you do if you missed a medication?</p>	<p>Take the missed dose as soon as you remember. Skip the missed dose if it is almost time for</p>

	your next scheduled dose. Do not take extra medicine to make up the missed dose.
How much would your medication cost per month if you had to pay for it out of pocket?	Tablet (25 mg) = \$20.87/30 tablets Tablet (50 mg) = \$15.80/30 tablets Oral Concentrate (20 mg/mL) = \$55.46 per 60 mL

Drug #3	Drug Name (Generic): lorazepam
Drug Class: Antianxiety	Drug Name (Trade): Ativan, Lorazepam Intensol, Novo-Lorazem
How I will take the medication:	Comments:
ORAL: Initial dose: 2 to 3 mg orally per day, given 2 to 3 times per day. Maintenance dose: 1 to 2 mg orally 2 to 3 times a day	-The daily dosage may vary from 1 to 10 mg per day. -The dosage should be increased gradually when needed to help avoid adverse effects. -When higher dosage is indicated, the evening dose should be increased before the daytime doses.
What is the lowest dose of the medication?	PO: 1 mg tablet IV injection: 0.044 mg/kg or 2 mg, whichever is less IM injection: 0.05 mg/kg
Specific Directions:	Oral: Lorazepam oral concentrate: Use only the provided calibrated dropper to withdraw the prescribed dose. Mix the dose with liquid (eg, water, juice, soda, soda-like beverage) or semisolid food (eg, applesauce, pudding), and stir for a few seconds to blend completely. The prepared mixture should be administered immediately.
Parenteral: Intact vials should be refrigerated (room temperature storage information may be available; contact product manufacturer to obtain current recommendations). Protect from light. Parenteral admixture in D5W, LR, or NS is stable at room temperature (25°C) for 24 hours (consult parenteral admixture resource for additional detail).	IM: Should be administered (undiluted) deep into the muscle mass.
Oral concentrate: Store at colder room temperature or	IV injection: Dilute prior to use (according to the manufacturer). Do not exceed 2 mg/minute or 0.05 mg/kg over 2 to 5 minutes. Monitor IV site during administration. Avoid intra-arterial administration. Avoid extravasation.

<p>refrigerate at 2°C to 8°C (36°F to 46°F). Discard open bottle after 90 days.</p> <p>Oral tablet: Store at 25°C (77°F); excursions are permitted between 15°C and 30°C (59°F and 86°F).</p>	
<p>Does it counteract with my other medications?</p> <p>Moderate: Using LORazepam together with sertraline may increase side effects such as dizziness, drowsiness, confusion, and difficulty concentrating. Some people, especially the elderly, may also experience impairment in thinking, judgment, and motor coordination. You should avoid or limit the use of alcohol while being treated with these medications. Also avoid activities requiring mental alertness such as driving or operating hazardous machinery until you know how the medications affect you. Talk to your doctor if you have any questions or concerns. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p> <p>Moderate: Using LORazepam together with PARoxetine may increase side effects such as dizziness, drowsiness, confusion, and difficulty concentrating. Some people, especially the elderly, may also experience impairment in thinking, judgment, and motor coordination. You should avoid or limit the use of alcohol while being treated with these medications. Also avoid activities requiring mental alertness such as</p>	<p>Moderate: Labetalol and LORazepam may have additive effects in lowering your blood pressure. You may experience headache, dizziness, lightheadedness, fainting, and/or changes in pulse or heart rate. These side effects are most likely to be seen at the beginning of treatment, following a dose increase, or when treatment is restarted after an interruption. Let your doctor know if you develop these symptoms and they do not go away after a few days or they become troublesome. Avoid driving or operating hazardous machinery until you know how the medications affect you, and use caution when getting up from a sitting or lying position. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p> <p>Moderate: Using LORazepam together with St. John's Wort may increase side effects such as dizziness, drowsiness, confusion, and difficulty concentrating. Some people, especially the elderly, may also experience impairment in thinking, judgment, and motor coordination. You should avoid or limit the use of alcohol while being treated with these medications. Also avoid activities requiring mental alertness such as driving or operating hazardous machinery until you know how the medications affect you. Talk to your doctor if you have any questions or concerns. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p> <p>Moderate: Using LORazepam together with risperiDONE may increase side effects such as dizziness, drowsiness, confusion, and difficulty concentrating. Some people, especially the elderly, may also experience impairment in thinking, judgment, and motor coordination. You should avoid or limit the use of alcohol while being treated with these medications. Also avoid activities requiring mental alertness such as driving or operating hazardous machinery</p>

<p>driving or operating hazardous machinery until you know how the medications affect you. Talk to your doctor if you have any questions or concerns. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p> <p>Moderate: Nitroglycerin and LORazepam may have additive effects in lowering your blood pressure. You may experience headache, dizziness, lightheadedness, fainting, and/or changes in pulse or heart rate. These side effects are most likely to be seen at the beginning of treatment, following a dose increase, or when treatment is restarted after an interruption. Let your doctor know if you develop these symptoms and they do not go away after a few days or they become troublesome. Avoid driving or operating hazardous machinery until you know how the medications affect you, and use caution when getting up from a sitting or lying position. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p>	<p>until you know how the medications affect you. Talk to your doctor if you have any questions or concerns. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p> <p>Moderate: Spironolactone and LORazepam may have additive effects in lowering your blood pressure. You may experience headache, dizziness, lightheadedness, fainting, and/or changes in pulse or heart rate. These side effects are most likely to be seen at the beginning of treatment, following a dose increase, or when treatment is restarted after an interruption. Let your doctor know if you develop these symptoms and they do not go away after a few days or they become troublesome. Avoid driving or operating hazardous machinery until you know how the medications affect you, and use caution when getting up from a sitting or lying position. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p>
<p>My lifestyle interactions: (Daily tobacco use/ETOH – 3 beers daily)</p> <p>Alcohol can increase the nervous system side effects of LORazepam such as dizziness, drowsiness, and difficulty concentrating. Some people may also experience impairment in thinking and judgment. You should avoid or limit the use of alcohol while being</p>	<p>Alcohol (Ethyl): CNS Depressants may enhance the CNS depressant effect of Alcohol (Ethyl). <i>Monitor therapy</i></p>

<p>treated with LORazepam. Do not use more than the recommended dose of LORazepam, and avoid activities requiring mental alertness such as driving or operating hazardous machinery until you know how the medication affects you. Talk to your doctor or pharmacist if you have any questions or concerns.</p>	
<p>Does any of your PMH contradict your medications?</p>	<p>No contradiction to lorazepam.</p>
<p>What type of PMH can you determine you have based off this medication</p>	<p>Antianxiety disorder</p>
<p>What would you teach yourself if you were taking these medications?</p> <p>Avoid drinking alcohol. Dangerous side effects could occur.</p> <p>Lorazepam may impair your thinking or reactions. Avoid driving or operating machinery until you know how this medicine will affect you. Dizziness or severe drowsiness can cause falls or other accidents.</p> <p>Call your doctor if this medicine seems to stop working as well in treating your anxiety symptoms.</p> <p>Keep track of the amount of medicine used from each new bottle. Lorazepam is a drug of abuse and you should be aware if anyone is using your medicine improperly or without a prescription.</p> <p>Store lorazepam tablets at room temperature away from moisture, heat, and light. Store the liquid form of this</p>	<p>Take lorazepam exactly as it was prescribed for you. Follow all directions on your prescription label. Never use this medicine in larger amounts, or for longer than prescribed. Tell your doctor if the medicine seems to stop working as well in treating your symptoms.</p> <p>Lorazepam may be habit-forming. Never share this medicine with another person, especially someone with a history of drug abuse or addiction. Keep the medication in a place where others cannot get to it.</p> <p>Misuse of habit-forming medicine can cause addiction, overdose, or death. Selling or giving away this medicine is against the law.</p> <p>Measure liquid medicine with the dosing syringe provided, or with a special dose-measuring spoon or medicine cup. If you do not have a dose-measuring device, ask your pharmacist for one.</p> <p>Lorazepam should be used for only a short time. Do not take this medicine for longer than your doctor recommends.</p> <p>Do not stop using lorazepam suddenly or you could have unpleasant withdrawal symptoms, including a seizure (convulsions). Ask your doctor how to safely stop using this medicine.</p>

medicine in the refrigerator.	
What would you do if you missed a medication?	Take the missed dose as soon as you remember. Skip the missed dose if it is almost time for your next scheduled dose. Do not take extra medicine to make up the missed dose.
How much would your medication cost per month if you had to pay for it out of pocket?	Injectable solution (2 mg/mL) = \$19.34/25 mL Injectable solution (4 mg/mL) = \$22.86/10 mL Oral Concentrate (2 mg/mL) = \$36.36/30 mL Tablet (0.5 mg) = \$9.94/6 tablets Tablet (1 mg) = \$8.78/tablet Tablet (2 mg) = \$14.88/100 tablet

Drug #4	Drug Name (Generic): spironolactone
Drug Class: Diuretic	Drug Name (Trade): Aldactone, Carospir
How I will take the medication: ORAL: 25 to 200 mg orally per day in single or divided doses Duration of therapy: When given as the sole diuretic, continue the initial dose for at least 5 days, after which the initial dose may be adjusted to an optimal maintenance dose.	Comments: -A second diuretic that acts more proximally at the renal tubule may be added if adequate diuresis has not been achieved after 5 days. The dose of this drug should remain unchanged if a second diuretic is added.
What is the lowest dose of the medication?	PO: 25 mg tablet
Specific Directions:	Oral:

Tablet: Store below 25°C (77°F).
 Suspension: Store at 20°C to 25°C (68°F to 77°F);
 excursions permitted to 15°C to 30°C (59°F to 86°F).

Tablet: Administer with or without food; however, administer consistently with respect to food.

Suspension: Shake well before administering dose. Administer with or without food; however, administer consistently with respect to food.

Does it counteract with my other medications?

Moderate: Using **labetalol** and spironolactone together may lower your blood pressure and slow your heart rate. This can cause dizziness, or feeling like you might pass out, weakness, fainting, fast or irregular heartbeats, or loss of blood glucose control. If you take both medications together, tell your doctor if you have any of these symptoms. You may need a dose adjustment or need your blood pressure checked more often to safely use both medications. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.

Moderate: Spironolactone and **LORazepam** may have additive effects in lowering your blood pressure. You may experience headache, dizziness, lightheadedness, fainting, and/or changes in pulse or heart rate. These side effects are most likely to be seen at the beginning of treatment, following a dose increase, or when treatment is restarted after an interruption. Let your doctor know if you develop these symptoms and they do not go away after a few days or they become

Moderate: Talk to your doctor before using spironolactone together with **metFORMIN**. Spironolactone can increase blood sugar levels and interfere with diabetic control. You may need a dose adjustment or more frequent monitoring of your blood sugar to safely use both medications. Due to its effects on the kidneys, spironolactone can also increase the risk of a rare but serious and potentially life-threatening condition known as lactic acidosis that may occasionally occur during treatment with metformin-containing products. Lactic acidosis is caused by a buildup of lactic acid in the blood, and is more likely to occur if you have kidney or liver disease, acute or unstable congestive heart failure, dehydration, or an excess intake of alcohol. You should seek immediate medical attention if you develop potential signs and symptoms of lactic acidosis such as fatigue, weakness, muscle pain, increasing drowsiness, abdominal pain or discomfort, fast or irregular heartbeat, difficult or rapid breathing, chills, and other unusual symptoms. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.

Moderate: Treatment with **sertraline** may occasionally cause blood sodium levels to get too low, a condition known as hyponatremia, and using it with spironolactone can increase that risk. You should seek medical attention if you experience nausea, vomiting, headache, lethargy, irritability, difficulty concentrating, memory impairment, confusion, muscle spasm, weakness or unsteadiness, as these may be symptoms of hyponatremia. More severe cases may lead to hallucination, fainting, seizure, coma, and even death. Sertraline can also affect your blood pressure and heart rate. You may need a dose adjustment or more frequent monitoring of your blood pressure and pulse to safely use both medications. You should

<p>troublesome. Avoid driving or operating hazardous machinery until you know how the medications affect you, and use caution when getting up from a sitting or lying position. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p> <p>Moderate: RisperiDONE and spironolactone may have additive effects in lowering your blood pressure. You may experience headache, dizziness, lightheadedness, fainting, and/or changes in pulse or heart rate. These side effects are most likely to be seen at the beginning of treatment, following a dose increase, or when treatment is restarted after an interruption. Let your doctor know if you develop these symptoms and they do not go away after a few days or they become troublesome. Avoid activities requiring mental alertness such as driving or operating hazardous machinery until you know how the medications affect you, and use caution when getting up from a sitting or lying position. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p>	<p>avoid rising abruptly from a sitting or lying position while taking these medications, especially at the beginning of treatment or after an increase in dose. Call your doctor if you experience dizziness, lightheadedness, fainting, or a rapid heartbeat. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p> <p>Moderate: Treatment with PARoxetine may occasionally cause blood sodium levels to get too low, a condition known as hyponatremia, and using it with spironolactone can increase that risk. You should seek medical attention if you experience nausea, vomiting, headache, lethargy, irritability, difficulty concentrating, memory impairment, confusion, muscle spasm, weakness or unsteadiness, as these may be symptoms of hyponatremia. More severe cases may lead to hallucination, fainting, seizure, coma, and even death. PARoxetine can also affect your blood pressure and heart rate. You may need a dose adjustment or more frequent monitoring of your blood pressure and pulse to safely use both medications. You should avoid rising abruptly from a sitting or lying position while taking these medications, especially at the beginning of treatment or after an increase in dose. Call your doctor if you experience dizziness, lightheadedness, fainting, or a rapid heartbeat. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p>
<p>My lifestyle interactions: (Daily tobacco use/ETOH – 3 beers daily)</p>	<p>Spironolactone and ethanol may have additive effects in lowering your blood pressure. You may experience headache, dizziness, lightheadedness, fainting, and/or changes in pulse or heart rate. These side effects are most likely to be seen at the beginning of treatment, following a dose increase, or when treatment is restarted after an interruption. Let your doctor know if you develop these symptoms and they do not go away after a few days or they become troublesome. Avoid driving or operating hazardous machinery until you know how the medications affect you, and use caution when getting up from a sitting or lying position. It</p>

	<p>is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p>
<p>Does any of your PMH contradict your medications?</p>	<p>No contradiction to spironolactone.</p>
<p>What type of PMH can you determine you have based off this medication</p>	<p>Spironolactone is used to treat:</p> <ul style="list-style-type: none"> • Heart failure (CHF) • Hypertension (high blood pressure) • Hypokalemia • Edema • Cirrhosis of the liver • Nephrotic syndrome
<p>What would you teach yourself if you were taking these medications?</p> <p>Drinking alcohol can increase certain side effects of spironolactone.</p> <p>Do not use salt substitutes or low-sodium milk products that contain potassium. These products could cause your potassium levels to get too high while you are taking spironolactone.</p> <p>Avoid a diet high in salt. Too much salt will cause your body to retain water and can make this medication less effective.</p> <p>Spironolactone may impair your thinking or reactions. Be careful if you drive or do anything that requires you to be alert. Avoid getting up too fast from a sitting or lying position, or you may feel dizzy. Get up slowly and steady yourself to prevent a fall.</p>	<p>Take spironolactone exactly as prescribed by your doctor. Follow all directions on your prescription label. Your doctor may occasionally change your dose. Do not use this medicine in larger or smaller amounts or for longer than recommended.</p> <p>Do not share this medicine with another person, even if they have the same symptoms you have.</p> <p>You may take spironolactone with or without food, but take it the same way each time.</p> <p>While using spironolactone, you may need frequent blood tests.</p> <p>This medication can cause unusual results with certain medical tests. Tell any doctor who treats you that you are using spironolactone.</p> <p>If you need surgery, tell the surgeon ahead of time that you are using this medicine. You may need to stop using the medicine for a short time.</p> <p>If you are being treated for high blood pressure, keep using this medication even if you feel well. High blood pressure often has no symptoms. You may need to use blood pressure medication for the rest of your life.</p>

<p>Avoid becoming overheated or dehydrated during exercise and in hot weather. Follow your doctor's instructions about the type and amount of liquids you should drink. In some cases, drinking too much liquid can be as unsafe as not drinking enough.</p>	<p>Store at room temperature away from heat, light, and moisture.</p>
<p>What would you do if you missed a medication?</p>	<p>Take the missed dose as soon as you remember. Skip the missed dose if it is almost time for your next scheduled dose. Do not take extra medicine to make up the missed dose.</p>
<p>How much would your medication cost per month if you had to pay for it out of pocket?</p>	<p>Tablet (25 mg) = \$10.91/30 tablets Tablet (50 mg) = \$20.27/30 tablets Tablet (100 mg) = \$20.59/30 tablets</p>

<p>Drug #5</p> <p>Drug Class: Anidiabetic</p>	<p>Drug Name (Generic): Metformin</p> <p>Drug Name (Trade): Fortamet, Glucophage, Glumetza, Riomet</p>
<p>How I will take the medication:</p> <p>ORAL:</p> <p>Immediate-release: Initial dose: 500 mg orally twice a day or 850 mg orally once a day Dose titration: Increase in 500 mg weekly increments or 850 mg every 2 weeks as tolerated Maintenance dose: 2000 mg daily in divided doses Maximum dose: 2550 mg/day</p> <p>Extended-release:</p>	<p>Comments:</p> <p>-Metformin, if not contraindicated, should be considered first line-therapy for the management of type 2 diabetes mellitus.</p> <p>-Immediate-release: Take in divided doses 2 to 3 times a day with meals; titrate slowly to minimize gastrointestinal side effects. In general, significant responses are not observed with doses less than 1500 mg/day and doses above 2000 mg are generally associated with little additional efficacy and poorer tolerability.</p> <p>-Extended-release (ER): Take with the evening meal; if glycemic control is not achieved with ER 2000 mg once a day, may consider splitting daily dose to ER 1000 mg twice a day; if glycemic control is still not achieve, consider switch to immediate-release product.</p>

<p>Initial dose: 500 to 1000 mg orally once a day Dose titration: Increase in 500 mg weekly increments as tolerated Maximum dose: 2000 mg</p> <p>Switching to Extended-Release: -Patients receiving immediate-release may switch to extended-release once a day at same total daily dose (up to 2000 mg/day)</p>	
<p>What is the lowest dose of the medication?</p>	<p>PO: 500 mg tablet</p>
<p>Specific Directions:</p> <p>Oral solution: Store at 15°C to 30°C (59°F to 86°F).</p> <p>Tablets: Store at 20°C to 25°C (68°F to 77°F); excursion permitted to 15°C to 30°C (59°F to 86°F). Protect from light and moisture.</p>	<p>Oral: Administer with a meal (to decrease GI upset). Administer Riomet with supplied dosing cup.</p> <p>Extended release: Swallow whole; do not crush, cut, or chew. Administer once daily doses with the evening meal.</p>
<p>Does it counteract with my other medications?</p> <p>Moderate: Talk to your doctor before using spironolactone together with metFORMIN. Spironolactone can increase blood sugar levels and interfere with diabetic control. You may need a dose adjustment or more frequent monitoring of your blood sugar to safely use both medications. Due to its effects on the kidneys, spironolactone can also increase the risk of a rare but serious and potentially life-threatening condition known as lactic acidosis that may occasionally</p>	<p>Moderate: RisperiDONE may interfere with blood glucose control and reduce the effectiveness of metFORMIN and other diabetic medications. Monitor your blood sugar levels closely. You may need a dose adjustment of your diabetic medications during and after treatment with risperiDONE. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p>

<p>occur during treatment with metformin-containing products. Lactic acidosis is caused by a buildup of lactic acid in the blood, and is more likely to occur if you have kidney or liver disease, acute or unstable congestive heart failure, dehydration, or an excess intake of alcohol. You should seek immediate medical attention if you develop potential signs and symptoms of lactic acidosis such as fatigue, weakness, muscle pain, increasing drowsiness, abdominal pain or discomfort, fast or irregular heartbeat, difficult or rapid breathing, chills, and other unusual symptoms. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p>	
<p>My lifestyle interactions: (Daily tobacco use/ETOH – 3 beers daily)</p> <p>Ask your doctor before using ethanol together with metFORMIN. Taking this combination may cause a condition called lactic acidosis. Get emergency medical help if you have any of these symptoms of lactic acidosis: weakness, increasing sleepiness, slow heart rate, cold feeling, muscle pain, shortness of breath, stomach pain. Use alcohol cautiously. If your doctor prescribes these medications together, you may need a dose adjustment or special tests to safely take this combination. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p>	<p>Alcohol (Ethyl): May enhance the adverse/toxic effect of MetFORMIN. Specifically, alcohol may potentiate the risk of lactic acidosis <i>Avoid combination</i></p>
<p>Does any of your PMH contradict your medications?</p>	<p>No contradiction to metformin.</p>

<p>What type of PMH can you determine you have based off this medication</p>	<p>Type 2 diabetes mellitus</p>
<p>What would you teach yourself if you were taking these medications?</p> <p>Avoid drinking alcohol. It lowers blood sugar and may increase your risk of lactic acidosis.</p> <p>Metformin is only part of a complete treatment program that may also include diet, exercise, weight control, regular blood sugar testing, and special medical care. Follow your doctor's instructions very closely.</p> <p>Your doctor may have you take extra vitamin B12 while you are taking this medicine. Take only the amount of vitamin B12 that your doctor has prescribed.</p> <p>Do not crush, chew, or break an extended-release tablet. Swallow it whole.</p> <p>Store at room temperature away from moisture, heat, and light.</p> <p>Measure liquid medicine carefully. Use the dosing syringe provided, or use a medicine dose-measuring device (not a kitchen spoon).</p>	<p>Take metformin exactly as prescribed by your doctor. Follow all directions on your prescription label and read all medication guides or instruction sheets. Your doctor may occasionally change your dose. Use the medicine exactly as directed.</p> <p>Take metformin with a meal, unless your doctor tells you otherwise. Some forms of metformin are taken only once daily with the evening meal. Follow your doctor's instructions.</p> <p>Some tablets are made with a shell that is not absorbed or melted in the body. Part of this shell may appear in your stool. This is normal and will not make the medicine less effective.</p> <p>Low blood sugar (hypoglycemia) can happen to everyone who has diabetes. Symptoms include headache, hunger, sweating, irritability, dizziness, nausea, fast heart rate, and feeling anxious or shaky. To quickly treat low blood sugar, always keep a fast-acting source of sugar with you such as fruit juice, hard candy, crackers, raisins, or non-diet soda.</p> <p>Your doctor can prescribe a glucagon emergency injection kit to use in case you have severe hypoglycemia and cannot eat or drink. Be sure your family and close friends know how to give you this injection in an emergency.</p> <p>Blood sugar levels can be affected by stress, illness, surgery, exercise, alcohol use, or skipping meals. Ask your doctor before changing your dose or medication schedule.</p>

What would you do if you missed a medication?	Take the medicine as soon as you can, but skip the missed dose if it is almost time for your next dose. Do not take two doses at one time.
How much would your medication cost per month if you had to pay for it out of pocket?	Tablet (500 mg) = \$10.20/14 tablets Tablet (850 mg) = \$12.28/60 tablets Tablet (1,000 mg) = \$12.60/60 tablets

Drug #6 Drug Class: Antianginal	Drug Name (Generic): amlodipine besylate Drug Name (Trade): Norvasc
How I will take the medication: Initial dose: 5 mg orally once a day Maintenance dose: 5 to 10 mg orally once a day Maximum dose: 10 mg/day	Comments: -Patients who are small or fragile may be started on 2.5 mg orally once a day. -The dosage should be adjusted according to patient response. In general, titration should proceed over 7 to 14 days. If clinically warranted, titration may proceed more rapidly, provided the patient is assessed frequently.
What is the lowest dose of the medication?	PO: 2.5 mg tablet
Specific Directions: Store at 15°C to 30°C (59°F to 86°F).	Oral: Administer without regard to meals.
Does it counteract with my other medications? Moderate: Labetalol and amLODIPine may have additive effects in lowering your blood pressure and heart rate. You may experience headache, dizziness, lightheadedness, fainting, and/or changes in pulse or heartbeat. These side effects are most likely to be seen	Moderate: Risperidone and amLODIPine may have additive effects in lowering your blood pressure. You may experience headache, dizziness, lightheadedness, fainting, and/or changes in pulse or heart rate. These side effects are most likely to be seen at the beginning of treatment, following a dose increase, or when treatment is restarted after an interruption. Let your doctor know if you develop these symptoms and they do not go away after a few days or they become troublesome. Avoid activities requiring mental alertness such as driving or

at the beginning of treatment, following a dose increase, or when treatment is restarted after an interruption. Let your doctor know if you develop these symptoms and they do not go away after a few days or they become troublesome. You may need a dose adjustment or more frequent monitoring by your doctor to safely use both medications. Avoid driving or operating hazardous machinery until you know how the medications affect you, and use caution when getting up from a sitting or lying position. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.

Moderate: Talk to your doctor before using amLODIPine together with **St. John's Wort**. Combining these medications may reduce the blood levels and effects of amLODIPine. Contact your doctor if your symptoms worsen or your condition changes during treatment with these medications. Your doctor may be able to prescribe alternatives that do not interact, or you may need a dose adjustment or more frequent monitoring to safely use both medications. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.

My lifestyle interactions:
(Daily tobacco use/ETOH – 3 beers daily)

operating hazardous machinery until you know how the medications affect you, and use caution when getting up from a sitting or lying position. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.

Moderate: Using **nitroglycerin** together with amLODIPine can lower your blood pressure. This can cause dizziness or feeling like you might pass out, especially when getting up from a sitting or lying position. This may be more likely to occur when you first start taking either of these medications. Talk with your doctor before using nitroglycerin and amLODIPine together. You may need a dose adjustment or need your blood pressure checked more often if you take both medications. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.

Using amLODIPine together with multivitamin with minerals can decrease the effects of amLODIPine. Talk with your doctor before using amLODIPine and multivitamin with minerals together. You may need a dose adjustment or need your blood pressure checked more often if you take both medications. It is important to tell your doctor about all other

	medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.
Does any of your PMH contradict your medications?	No contradiction to amlodipine besylate.
What type of PMH can you determine you have based off this medication	Amlodipine is used to treat: <ul style="list-style-type: none"> • Chest pain (angina) • Coronary artery disease (CAD) • Hypertension (high blood pressure)
What would you teach yourself if you were taking these medications? Avoid getting up too fast from a sitting or lying position, or you may feel dizzy. Get up slowly and steady yourself to prevent a fall. You may take amlodipine with or without food. Take the medicine at the same time each day. Your blood pressure will need to be checked often. Amlodipine is only part of a complete program of treatment that may also include diet, exercise, weight control, and other medications. Follow your diet, medication, and exercise routines very closely. Store at room temperature away from moisture, heat, and light.	Take amlodipine exactly as prescribed by your doctor. Follow all directions on your prescription label. Your doctor may occasionally change your dose to make sure you get the best results. Do not use this medicine in larger or smaller amounts or for longer than recommended. Your chest pain may become worse when you first start taking amlodipine or when your dose is increased. Call your doctor if your chest pain is severe or ongoing. If you are being treated for high blood pressure, keep using amlodipine even if you feel well. High blood pressure often has no symptoms. You may need to use blood pressure medicine for the rest of your life. Your hypertension or heart condition may be treated with a combination of drugs. Use all medications as directed by your doctor. Read the medication guide or patient instructions provided with each medication. Do not change your doses or stop taking any of your medications without your doctor's advice. This is especially important if you also take nitroglycerin.
What would you do if you missed a medication?	Take the missed dose as soon as you remember. If you are more than 12 hours late, skip the missed dose. Do not take extra medicine to make up the missed dose.

How much would your medication cost per month if you had to pay for it out of pocket?	Tablet (2.5 mg) = \$14.38/90 tablets Tablet (5 mg) = \$14.38/90 tablets Tablet (10 mg) = \$15.44/90 tablets
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Drug #7	Drug Name (Generic): atorvastatin calcium
Drug Class: Antihyperlipidemic	Drug Name (Trade): Lipitor
How I will take the medication: -Initial dose: 10 mg or 20 mg orally once a day; an initial dose of 40 mg may be used in patients who require a reduction in low density lipoprotein (LDL-C) of more than 45% -Maintenance dose: 10 mg to 80 mg orally once a day	Comments: -Following initiation and/or upon titration, lipid levels should be evaluated within 2 to 4 weeks and dosages adjusted accordingly.
What is the lowest dose of the medication?	PO: 10 mg tablet
Specific Directions: Store at 20°C to 25°C (68°F to 77°F).	Oral: Administer with or without food; may take without regard to time of day. The manufacturer's labeling states tablets should not be broken; however, available data do not indicate any safety or efficacy concerns with this practice.
Does it counteract with my other medications?	Moderate Using St. John's Wort together with atorvastatin may decrease the effects of atorvastatin. Contact your doctor if your condition changes or if your cholesterol increases. If your doctor does prescribe these medications together, you may need a dose adjustment or special test to safely use both medications. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.
My lifestyle interactions:	Grapefruit juice can increase the blood levels of atorvastatin. This can increase the risk of side

<p>(Daily tobacco use/ETOH – 3 beers daily)</p>	<p>effects such as liver damage and a rare but serious condition called rhabdomyolysis that involves the breakdown of skeletal muscle tissue. In some cases, rhabdomyolysis can cause kidney damage and even death. You should limit your consumption of grapefruit juice to no more than 1 quart per day during treatment with atorvastatin. Let your doctor know immediately if you have unexplained muscle pain, tenderness, or weakness during treatment, especially if these symptoms are accompanied by fever or dark colored urine. You should also seek immediate medical attention if you develop fever, chills, joint pain or swelling, unusual bleeding or bruising, skin rash, itching, loss of appetite, fatigue, nausea, vomiting, dark colored urine, and/or yellowing of the skin or eyes, as these may be signs and symptoms of liver damage. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p>
<p>Does any of your PMH contradict your medications?</p>	<p>No contradiction to amlodipine besylate.</p>
<p>What type of PMH can you determine you have based off this medication</p>	<p>Atorvastatin is used to treat:</p> <ul style="list-style-type: none"> • Hypercholesterolemia • Lower risk of stroke • Lower risk of MI • Coronary artery disease (CAD) • Coronary heart disease (CHD)
<p>What would you teach yourself if you were taking these medications?</p> <p>Avoid eating foods that are high in fat or cholesterol. Atorvastatin will not be as effective in lowering your cholesterol if you do not follow a cholesterol-lowering diet plan.</p> <p>Minimize drinking alcohol. It can raise triglyceride levels and may increase your risk of liver damage.</p>	<p>Take atorvastatin exactly as prescribed by your doctor. Follow all directions on your prescription label. Your doctor may occasionally change your dose to make sure you get the best results. Do not use this medicine in larger or smaller amounts or for longer than recommended.</p> <p>You may need to stop using this medicine for a short time if you have:</p> <ul style="list-style-type: none"> • Uncontrolled seizures • An electrolyte imbalance (such as high or low potassium levels in your blood) • Severely low blood pressure • A severe infection or illness

<p>Grapefruit and grapefruit juice may interact with atorvastatin and lead to potentially dangerous effects. Avoid drinking more than 1 liter per day of grapefruit juice while taking this medicine.</p> <p>Atorvastatin is usually taken once a day, with or without food. Take the medicine at the same time each day.</p> <p>Do not break a tablet before taking it.</p> <p>Store at room temperature away from moisture, heat, and light.</p>	<ul style="list-style-type: none"> • Surgery or a medical emergency <p>It may take up to 2 weeks before your cholesterol levels improve, and you may need regular blood tests. You may not notice any change in your symptoms, but keep using the medication as directed. Your blood work will help your doctor determine how long to treat you with atorvastatin. You may need to take atorvastatin for a long time or for life depending on your medical history.</p> <p>Atorvastatin is only part of a complete treatment program that may also include diet, exercise, and weight control. Follow your doctor's instructions very closely.</p>
<p>What would you do if you missed a medication?</p>	<p>Take the missed dose as soon as you remember. Skip the missed dose if your next dose is less than 12 hours away. Do not take extra medicine to make up the missed dose.</p>
<p>How much would your medication cost per month if you had to pay for it out of pocket?</p>	<p>Tablet (10 mg) = \$13.79/90 tablets Tablet (20 mg) = \$16.19/90 tablets Tablet (40 mg) = \$17.73/30 tablets Tablet (80 mg) = \$23.56/90 tablets</p>

<p>Drug #8</p> <p>Drug Class: Herb</p>	<p>Drug Name (Generic): St. John's Wort</p> <p>Drug Name (Trade): St. John's Wort</p>
<p>How I will take the medication:</p>	<p>When considering the use of herbal supplements, seek the advice of your doctor. There are different forms (tablets, capsules, liquid, tincture, teas, etc) of St. John's Wort.</p>
<p>What is the lowest dose of the medication?</p>	<p>PO: 300 mg tablet</p>
<p>Specific Directions:</p>	<p>There are no regulated manufacturing standards in place for many herbal compounds and some</p>

<p>Store at room temperature away from moisture, heat, and light. Exposure to light can make St. John's wort inactive.</p>	<p>marketed supplements have been found to be contaminated with toxic metals or other drugs. Herbal/health supplements should be purchased from a reliable source to minimize the risk of contamination.</p>
<p>Does it counteract with my other medications?</p> <p>Major: Using PAR oxetine together with St. John's wort can increase the risk of a rare but serious condition called the serotonin syndrome, which may include symptoms such as confusion, hallucination, seizure, extreme changes in blood pressure, increased heart rate, fever, excessive sweating, shivering or shaking, blurred vision, muscle spasm or stiffness, tremor, incoordination, stomach cramp, nausea, vomiting, and diarrhea. Severe cases may result in coma and even death. You should seek immediate medical attention if you experience these symptoms while taking the medications. Talk to your doctor if you have any questions or concerns. Your doctor may already be aware of the risks, but has determined that this is the best course of treatment for you and has taken appropriate precautions and is monitoring you closely for any potential complications. It is important to tell your doctor about all other medications you use, including <u>vitamins</u> and herbs. Do not stop using any medications without first talking to your doctor.</p> <p>Major: Using sertraline together with St. John's wort can increase the risk of a rare but serious condition called the serotonin syndrome, which may include symptoms such as confusion, hallucination, seizure, extreme changes in blood pressure, increased heart rate, fever, excessive sweating, shivering or shaking, blurred vision, muscle</p>	<p>Moderate: Talk to your doctor before using amLODIPine together with St. John's wort. Combining these medications may reduce the blood levels and effects of amLODIPine. Contact your doctor if your symptoms worsen or your condition changes during treatment with these medications. Your doctor may be able to prescribe alternatives that do not interact, or you may need a dose adjustment or more frequent monitoring to safely use both medications. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p> <p>Moderate: Using risperiDONE together with St. John's wort may increase side effects such as dizziness, drowsiness, confusion, and difficulty concentrating. Some people, especially the elderly, may also experience impairment in thinking, judgment, and motor coordination. You should avoid or limit the use of alcohol while being treated with these medications. Also avoid activities requiring mental alertness such as driving or operating hazardous machinery until you know how the medications affect you. Talk to your doctor if you have any questions or concerns. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p> <p>Moderate: Using LORazepam together with St. John's wort may increase side effects such as dizziness, drowsiness, confusion, and difficulty concentrating. Some people, especially the elderly, may also experience impairment in thinking, judgment, and motor coordination. You should avoid or limit the use of alcohol while being treated with these medications. Also avoid activities requiring mental alertness such as driving or operating hazardous machinery until you know how the medications affect you. Talk to your doctor if you have any questions or concerns. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p> <p>Moderate: Using St. John's wort together with atorvastatin may decrease the effects of atorvastatin. Contact your doctor if your condition changes or if your cholesterol increases. If</p>

<p>spasm or stiffness, tremor, incoordination, stomach cramp, nausea, vomiting, and diarrhea. Severe cases may result in coma and even death. You should seek immediate medical attention if you experience these symptoms while taking the medications. Talk to your doctor if you have any questions or concerns. Your doctor may already be aware of the risks, but has determined that this is the best course of treatment for you and has taken appropriate precautions and is monitoring you closely for any potential complications. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p>	<p>your doctor does prescribe these medications together, you may need a dose adjustment or special test to safely use both medications. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p>
<p>My lifestyle interactions: (Daily tobacco use/ETOH – 3 beers daily)</p>	<p>While you are taking St. John's wort, you must not eat or drink certain foods and beverages that are high in tyramine. Eating these foods while you are taking St. John's wort can raise your blood pressure to dangerous levels. This may cause life threatening symptoms such as sudden and severe headache, confusion, blurred vision, problems with speech or balance, nausea, vomiting, chest pain, seizure (convulsions), and sudden numbness or weakness (especially on one side of the body). Call your doctor at once if you have any of these symptoms. Foods that are high in tyramine include: air dried meats, aged or fermented meats, sausage or salami, pickled herring, and any spoiled or improperly stored beef, poultry, fish, or liver, red wine, beer from a tap, beer that has not been pasteurize, aged cheeses, including blue, brick, brie, cheddar, parmesan, romano, and swiss, sauerkraut, over the counter supplements or cough and cold medicines that contain tyramine, soy beans, soy sauce, tofu, miso soup, bean curd, fava beans, or yeast extracts (such as Marmite). Caffeine intake should be limited as well. You should avoid or limit the use of alcohol while being treated with St. John's wort. Alcohol can increase the nervous system side effects of St. John's wort such as dizziness, drowsiness, and difficulty concentrating. Some people may also experience impairment in thinking and judgment. Talk to your doctor or pharmacist if you have any questions or concerns.</p>
<p>Does any of your PMH contradict your medications?</p>	<p>No contradiction to St. John's Wort.</p>

<p>What type of PMH can you determine you have based off this medication</p>	<p>St. John’s Wort is used to treat:</p> <ul style="list-style-type: none"> • Depression • Anxiety • Insomnia
<p>What would you teach yourself if you were taking these medications?</p> <p>Do not take topical (for the skin) St. John's wort by mouth. Topical forms of this product are for use only on the skin.</p> <p>St. John's wort may increase your risk of serious heart complications or other problems during surgery. If you need surgery, stop taking St. John's wort at least 2 weeks ahead of time.</p> <p>Call your doctor if the condition you are treating with St. John's wort does not improve, or if it gets worse while using this product.</p> <p>Store at room temperature away from moisture, heat, and light. Exposure to light can make St. John's wort inactive.</p>	<p>When considering the use of herbal supplements, seek the advice of your doctor. You may also consider consulting a practitioner who is trained in the use of herbal/health supplements.</p> <p>If you choose to use St. John's wort, use it as directed on the package or as directed by your doctor, pharmacist, or other healthcare provider. Do not use more of this product than is recommended on the label.</p> <p>Do not use different forms (tablets, capsules, liquid, tincture, teas, etc) of St. John's wort at the same time without medical advice. Using different formulations together increases the risk of an overdose.</p> <p>Take St. John's wort in the morning if this product causes you to have trouble sleeping.</p>
<p>What would you do if you missed a medication?</p>	<p>Skip the missed dose if it is almost time for your next scheduled dose. Do not use extra St. John's wort to make up the missed dose.</p>
<p>How much would your medication cost per month if you had to pay for it out of pocket?</p>	<p>Tablet (300 mg) = \$12.99/100 tablets Tablet (350 mg) = \$11.99/100 tablets</p>

<p>Drug #9</p> <p>Drug Class: Antianginal</p>	<p>Drug Name (Generic): nitroglycerin (glyceryl trinitrate)</p> <p>Drug Name (Trade): GoNitro, Minitran, Nitro-Bid, Ntrocot, Ntro-Dur, Nitrolingual Pumpspray, NitroMist, NitroQuick, Nitrostat, Nitro-Time, Rectiv, Transderm-Nitro</p>
<p>How I will take the medication:</p> <p>SUBLINGUAL TABLET: 0.3 to 0.6 mg sublingually or in the buccal pouch every 5 minutes as needed, up to 3 doses in 15 minutes; if pain persists after maximum dose, prompt medical attention is recommended</p> <p>Comments: -Administer while sitting down due to rapid onset. -Advise patient not to chew or swallow this medication. Use: Acute relief of an angina attack.</p> <p>LINGUAL SPRAY: 1 to 2 sprays (0.4 to 0.8 mg) on or under tongue every 5 minutes as needed, up to 3 sprays in 15 minutes; if pain persists after maximum dose, prompt medical attention is recommended</p> <p>Comments: -Administer while sitting due to rapid onset. -Advise patient not to inhale or swallow this medication. Use: Acute relief of an angina attack.</p> <p>TOPICAL OINTMENT:</p>	<p>TRANSDERMAL PATCH: 0.2 to 0.4 mg/hr patch applied topically once a day for 12 to 14 hours per day; titrate as needed and tolerated up to 0.8 mg/hr.</p> <p>Comments: -Patch should be applied to a dry and hairless area of the upper arm or body; rotate application sites to avoid skin irritation. -Doses between 0.4 and 0.8 mg/hr have shown continued effectiveness for 10 to 12 hours daily for at least 1 month of intermittent administration.</p> <p>EXTENDED RELEASE CAPSULE: 2.5 to 6 mg orally 3 to 4 times a day; titrate as needed and tolerated.</p> <p>Comments: -Subjects were titrated up to 26 mg four times a day in one clinical trial.</p> <p>INTRAVENOUS SOLUTION: 5 mcg/min continuous IV infusion via non-absorptive tubing; increase by 5 mcg/min every 3 to 5 minutes as needed up to 20 mcg/min, then by 10 or 20 mcg/min if needed.</p> <p>Comments: -Starting doses of 25 mcg/min or higher have been used with polyvinyl chloride (PVC) tubing. -Lower concentrations increase potential dosing precision and volume to be delivered;</p>

<p>1/2 inch (7.5 mg) topically upon rising and 1/2 inch (7.5 mg) 6 hours later; titrate as needed and tolerated.</p> <p>Comments: -Clinical trial doses have ranged from 1/2 to 2 inches (7.5 to 30 mg) applied to 36 square inches of truncal skin. -Ointment should be applied to a dry and hairless area of the trunk.</p>	<p>consider patient fluid requirements and expected infusion duration when selecting an appropriate dilution.</p> <p>Use: Treatment of angina pectoris in patients who have not responded to sublingual nitroglycerin and beta-blockers.</p>
<p>What is the lowest dose of the medication?</p>	<p>PO: 0.3 mg sublingual tablet PO: 0.4 mg lingual spray Topical: 7.5 mg ointment Topical: 0.2 mg/hr transdermal patch PO: 2.5 mg extended release capsule IV: 5 mcg/min continuous IV infusion</p>
<p>Specific Directions:</p> <p>Extended-release capsules: Store at 25°C (77°F); excursions permitted to 15°C to 30°C (59°F to 86°F). Protect from moisture.</p> <p>IV solution: Store nitroglycerin premixed with dextrose at 25°C (77°F); brief exposure up to 40°C (104°F) does not adversely affect the product. Protect from light until time of use. Avoid excessive heat; protect from freezing. Nitroglycerin diluted in D5W or NS in glass containers is physically and chemically stable for 48 hours at room temperature and 7 days under refrigeration. In D5W or NS in EXCEL/PAB containers it is physically and chemically stable for 24 hours at room temperature.</p> <p>Sublingual powder: Store at 20°C to 25°C (68°F to</p>	<p>IV: Prepare in glass bottles, EXCEL or PAB containers. Adsorption occurs to soft plastic (eg, PVC); use administration sets intended for nitroglycerin. Avoid in-line IV filters that adsorb nitroglycerin. Administer via infusion pump.</p> <p>Intra-anal ointment: Using a finger covering (e.g., plastic wrap, surgical glove, finger cot), place finger beside 1 inch measuring guide on the box and squeeze ointment the length of the measuring line directly onto covered finger. Insert ointment into the anal canal using the covered finger up to first finger joint (do not insert further than the first finger joint) and apply ointment around the side of the anal canal. If intra-anal application is too painful, may apply the ointment to the outside of the anus. Wash hands following application.</p> <p>Extended release capsule: Swallow whole. Do not chew, break, or crush. Administer with a full glass of water.</p> <p>Sublingual powder: Empty the contents of packet under the tongue, close mouth, and breathe normally. Allow powder to dissolve without swallowing. Do not rinse or spit for 5 minutes</p>

77°F); excursions permitted to 5°C to 40°C (41°F to 104°F).

Sublingual tablets: Store at 20°C to 25°C (68°F to 77°F) in original glass container.

Transdermal patch: Store at 15°C to 30°C (59°F to 86°F)

Translingual spray: Store at 20°C to 25°C (68°F to 77°F); excursions permitted to 15°C to 30°C (59°F to 86°F). Do not forcefully open or burn container after use. Do not spray toward flames.

after dosing.

Sublingual tablet: Do not chew, crush, or swallow sublingual tablet. Place under tongue and allow to dissolve. Alternately, may be placed in the buccal pouch. May take small sip of water prior to placing tablet under the tongue to aid dissolution.

Topical ointment: Wash hands prior to and after use. Application site should be clean, dry, and hair-free. Apply to chest or back with the applicator or dose-measuring paper. Spread in a thin layer over a 2.25 x 3.5 inch area. Do not rub into skin. Tape applicator into place.

Sympathomimetic vasopressors extravasation injury (alternative to phentolamine) (off-label use): Stop vesicant infusion immediately and disconnect IV line (leave needle/cannula in place); gently aspirate extravasated solution from the IV line (do NOT flush the line); remove needle/cannula; elevate extremity. Apply nitroglycerin ointment as a thin ribbon to site of ischemia (Reynolds 2014; Wong 1992). May also apply dry warm compresses (Hurst 2004; Reynolds 2014).

Topical patch, transdermal: Application site should be clean, dry and hair-free. Remove patch after 12 to 14 hours. Rotate patch sites. Dispose of any used or unused patches by folding adhesive ends together, replace in pouch or sealed container and discard properly in trash, away from children and pets.

Translingual spray: Do not shake container. Prior to initial use, the pump must be primed by spraying 5 times (Nitrolingual) or 10 times (Nitromist) into the air. Priming sprays should be directed away from patient and others. Release spray onto or under tongue. Close mouth immediately after administration; do not inhale spray. Do not expectorate or rinse the mouth for 5 to 10 minutes following administration. Content of the container should be checked periodically; when the container is held upright, the end of the pump should be covered by the fluid in the bottle or the remaining sprays will not deliver the intended dose. If pump is unused for 6 weeks, a single priming spray (Nitrolingual) or 2 priming sprays (Nitromist) should be completed. If pump is unused for 3 months, re-prime with up to 5 sprays (Nitrolingual).

<p>Does it counteract with my other medications?</p> <p>Moderate: RisperiDONE and nitroglycerin may have additive effects in lowering your blood pressure. You may experience headache, dizziness, lightheadedness, fainting, and/or changes in pulse or heart rate. These side effects are most likely to be seen at the beginning of treatment, following a dose increase, or when treatment is restarted after an interruption. Let your doctor know if you develop these symptoms and they do not go away after a few days or they become troublesome. Avoid activities requiring mental alertness such as driving or operating hazardous machinery until you know how the medications affect you, and use caution when getting up from a sitting or lying position. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p> <p>Moderate: Using nitroglycerin together with amLODIPine can lower your blood pressure. This can cause dizziness or feeling like you might pass out, especially when getting up from a sitting or lying position. This may be more likely to occur when you first start taking either of these medications. Talk with your doctor before using nitroglycerin and amLODIPine together. You may need a dose adjustment or need your blood pressure checked more often if you take both medications. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to</p>	<p>Moderate: Nitroglycerin and LORazepam may have additive effects in lowering your blood pressure. You may experience headache, dizziness, lightheadedness, fainting, and/or changes in pulse or heart rate. These side effects are most likely to be seen at the beginning of treatment, following a dose increase, or when treatment is restarted after an interruption. Let your doctor know if you develop these symptoms and they do not go away after a few days or they become troublesome. Avoid driving or operating hazardous machinery until you know how the medications affect you, and use caution when getting up from a sitting or lying position. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p>
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your doctor.	
My lifestyle interactions: (Daily tobacco use/ETOH – 3 beers daily)	Alcohol (Ethyl): May enhance the vasodilatory effect of Vasodilators (Organic Nitrates). <i>Monitor therapy</i>
Does any of your PMH contradict your medications?	No contradiction to nitroglycerin.
What type of PMH can you determine you have based off this medication	Angina
<p>What would you teach yourself if you were taking these medications?</p> <p>Follow all directions on your prescription label and read all medication guides or instruction sheets. Use the medicine exactly as directed.</p> <p>If you use too much nitroglycerin, it might stop working as well in controlling your symptoms.</p> <p>Nitroglycerin is usually taken at the first sign of chest pain. You may use nitroglycerin sublingual within 5 to 10 minutes before an activity you think might cause chest pain. Try to rest or stay seated when you take nitroglycerin (may cause dizziness or fainting).</p> <p>Read and carefully follow any Instructions for Use provided with your medicine. Ask your doctor or pharmacist if you do not understand these instructions.</p> <p>Seek emergency medical attention if your chest pain gets worse or lasts more than 5 minutes, especially if you</p>	<p>You may feel a slight burning or stinging in your mouth when you use nitroglycerin. This is not a sign of how well the medicine is working. Do not use more just because you do not feel a burning or stinging.</p> <p>This medicine can affect the results of certain medical tests. Tell any doctor who treats you that you are using nitroglycerin.</p> <p>If you take nitroglycerin on a regular schedule to prevent angina, do not stop taking it suddenly or you could have a severe attack of angina. Keep this medicine on hand at all times. Get your prescription refilled before you run out of medicine completely.</p> <p>Store nitroglycerin at room temperature away from moisture and heat. Keep the tablets in the original glass container, tightly closed when not in use.</p> <p>Keep the spray away from open flame or high heat, such as in a car on a hot day. The canister may explode if it gets too hot.</p> <p>Avoid driving or hazardous activity until you know how nitroglycerin will affect you. Your reactions could be impaired. Avoid getting up too fast from a sitting or lying position, or you may feel dizzy.</p> <p>Drinking alcohol can increase certain side effects such as dizziness, drowsiness, feeling light-</p>

<p>have trouble breathing or feel weak, dizzy, or nauseated, or lightheaded.</p>	<p>headed, or fainting.</p>
<p>What would you do if you missed a medication?</p>	<p>Since nitroglycerin is used when needed, you may not be on a dosing schedule. If you are on a schedule, the medicine as soon as you can, but skip the missed dose if your next dose is due in less than 2 hours. Do not use two doses at one time.</p>
<p>How much would your medication cost per month if you had to pay for it out of pocket?</p>	<p>Sublingual tablet (0.3 mg) = \$28.87/100 tablets Sublingual tablet (0.4 mg) = \$28.66/100 tablets Sublingual tablet (0.6 mg) = \$28.98/100 tablets IV (5 mg/mL) = \$292.88/250 mL IV solution IV (100 mcg/mL-D5%) = \$185.56/3,000 mL IV solution IV (200 mcg/mL-D5%) = \$203.29/3,000 mL IV solution IV (400 mcg/mL-D5%) = \$221.05/3,000 mL IV solution Capsule (2.5 mg) = \$32.87/60 extended release capsules Capsule (6.5 mg) = \$34.75/60 extended release capsules Capsule (9.0 mg) = \$35.59/60 extended release capsules Sublingual spray (0.4 mg) = \$92.25/4.9 grams Transdermal film (0.1 mg/hr) = \$46.19/30 extended release films Transdermal film (0.2 mg/hr) = \$26.31/30 extended release films Transdermal film (0.4 mg/hr) = \$29.94/30 extended release films Transdermal film (0.6 mg/hr) = \$51.27/30 extended release films</p>

<p>Drug #10</p> <p>Drug Class: Antidepressant</p>	<p>Drug Name (Generic): paroxetine hydrochloride</p> <p>Drug Name (Trade): Paxil, Paxil CR</p>
<p>How I will take the medication:</p>	

Usual Adult Dose for Depression**Immediate-release tablets and suspension:**

Initial dose: 20 mg orally once a day

Maintenance dose: 20 to 50 mg orally once a day

Maximum dose: 50 mg orally once a day.

Controlled-release tablets:

Initial dose: 25 mg orally once a day

Maintenance dose: 25 to 62.5 mg orally once a day

Maximum dose: 62.5 mg orally once a day.

Duration: Acute episodes of major depressive disorder require several months or longer of sustained pharmacologic therapy; systemic evaluation has shown that efficacy was maintained for up to one year.

Comments:

-Immediate-release oral formulations: The daily dose may be increased in 10 mg increments at weekly intervals, according to clinical response and tolerability
 -Extended-release oral formulations: The daily dose may be increased in 12.5 mg increments at weekly intervals, according to clinical response and tolerability
 -Efficacy of up to one year was demonstrated with a daily dose averaging 30 mg for the immediate-release formulations and 37.5 mg for the controlled-release formulation.

Usual Adult Dose for Obsessive Compulsive Disorder**Immediate-release tablets and suspension:**

Initial dose: 20 mg orally once a day

Maintenance dose: 20 to 60 mg orally once a day

Maximum dose: 60 mg orally once a day

Duration: Efficacy has been demonstrated for up to 6 months; being a chronic condition, continuation of treatment beyond this time may be considered in responding patients

Comments:

-The daily dose may be increased in 10 mg increments at weekly intervals, according to clinical response and tolerability
 -The target dose is 40 mg once a day

Usual Adult Dose for Post-Traumatic Stress Disorder**Immediate-release tablets and suspension:**

Initial dose: 20 mg orally once a day

Maintenance dose: 20 to 50 mg orally once a day

Maximum dose: 50 mg orally once a day

Duration:

-Generalized Anxiety Disorder: Efficacy has been demonstrated for up to 24 weeks in patients responding to treatment during an 8 week treatment phase
 -Posttraumatic Stress Disorder: Efficacy has been demonstrated for up to 12 weeks; being a chronic condition, continuation of treatment beyond this time may be considered in responding patients

Comments:

-The daily dose may be increased in 10 mg increments at weekly intervals, according to clinical response and tolerability

Usual Adult Dose for Generalized Anxiety Disorder**Immediate-release tablets and suspension:**

Initial dose: 20 mg orally once a day

Maintenance dose: 20 to 50 mg orally once a day

Maximum dose: 50 mg orally once a day

Duration:

-Generalized Anxiety Disorder: Efficacy has been demonstrated for up to 24 weeks in patients responding to treatment during an 8 week treatment phase

-Posttraumatic Stress Disorder: Efficacy has been demonstrated for up to 12 weeks; being a chronic condition, continuation of treatment beyond this time may be considered in responding patients

Comments:

-The daily dose may be increased in 10 mg increments at weekly intervals, according to clinical response and tolerability

Usual Adult Dose for Panic Disorder**Immediate-release tablets and suspension:**

Initial dose: 10 mg orally once a day

Maintenance dose: 10 to 40 mg orally once a day

Maximum dose: 60 mg orally once a day

Controlled-release oral tablets:

Initial dose: 12.5 mg orally once a day

Maintenance dose: 12.5 to 75 mg orally once a day

Usual Adult Dose for Social Anxiety Disorder**Immediate-release tablets and suspension:**

Initial dose: 20 mg orally once a day

Maintenance dose: 20 to 60 mg orally once a day

Maximum dose: 60 mg orally once a day

Controlled-release tablets:

Initial dose: 12.5 mg orally once a day

Maintenance dose: 12.5 to 37.5 mg orally once a day

Duration: Efficacy has been demonstrated for up to 12 weeks; being a chronic condition, continuation of treatment beyond this time may be considered in responding patients

Comments:

-Immediate-release oral formulations: The daily dose may be increased in 10 mg increments at weekly intervals, according to clinical response and tolerability

-Extended-release oral formulations: The daily dose may be increased in 12.5 mg increments at weekly intervals, according to clinical response and tolerability

Usual Adult Dose for Premenstrual Dysphoric Disorder**Controlled-release tablets:****Continuous regimen:**

Initial dose: 12.5 mg orally once a day during the menstrual cycle

Maintenance dose: 25 mg orally once a day during the menstrual cycle

Cyclic regimen:

<p>Maximum dose: 75 mg orally once a day</p> <p>Duration: Efficacy has been demonstrated for up to 12 weeks; being a chronic condition, continuation of treatment beyond this time may be considered in responding patients</p> <p>Comments:</p> <ul style="list-style-type: none"> -Immediate-release oral formulations: The daily dose may be increased in 10 mg increments at weekly intervals, according to clinical response and tolerability -Extended-release oral formulations: The daily dose may be increased in 12.5 mg increments at weekly intervals, according to clinical response and tolerability -The target dose is 40 mg once a day 	<p>Initial dose: 12.5 mg orally once a day, starting 14 days prior to the anticipated start of menstruation through to the first full day of menses, and repeated with each new cycle</p> <p>Maintenance dose: 12.5 to 25 mg orally once a day</p> <p>Duration: Efficacy has been demonstrated for up to 3 menstrual cycles; continuation of treatment beyond this time may be considered in responding patients</p> <p>Comments:</p> <ul style="list-style-type: none"> -The daily dose may be increased in 12.5 mg increments at weekly intervals, according to clinical response and tolerability
<p>What is the lowest dose of the medication?</p>	<p>PO: 7.5 mg capsule PO: 10 mg tablet</p>
<p>Specific Directions:</p> <p>Capsules: Store between 20°C and 25°C (68°F and 77°F); excursions permitted between 15°C and 30°C (59°F and 86°F). Protect from light and humidity.</p> <p>Tablets: Store immediate-release tablets between 15°C and 30°C (59°F and 86°F) and controlled-release tablets at or below 25°C (77°F).</p> <p>Suspension: Store at or below 25°C (77°F).</p>	<p>May be administered without regard to meals. Paxil, Paxil CR, and Pexeva should preferentially be administered in the morning; whereas Brisdelle is recommended to be administered at bedtime. Do not crush, break, or chew controlled-release tablets or Pexeva tablets (film-coated).</p>

<p>Does it counteract with my other medications?</p> <p>Major: Using PARoxetine together with St. John's wort can increase the risk of a rare but serious condition called the serotonin syndrome, which may include symptoms such as confusion, hallucination, seizure, extreme changes in blood pressure, increased heart rate, fever, excessive sweating, shivering or shaking, blurred vision, muscle spasm or stiffness, tremor, incoordination, stomach cramp, nausea, vomiting, and diarrhea. Severe cases may result in coma and even death. You should seek immediate medical attention if you experience these symptoms while taking the medications. Talk to your doctor if you have any questions or concerns. Your doctor may already be aware of the risks, but has determined that this is the best course of treatment for you and has taken appropriate precautions and is monitoring you closely for any potential complications. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p> <p>Moderate: Before taking PARoxetine, tell your doctor if you also use risperiDONE. This combination may increase the effects of risperiDONE. This can cause development of extrapyramidal symptoms resulting in tremor, shuffling of your feet, drooling, a mask-like face, tongue stiffness, muscle spasms or rigidity, and involuntary movements. If you take both medications together, tell your doctor if you have any of these</p>	<p>Moderate: Using labetalol together with PARoxetine may increase the effects of labetalol. Contact your doctor if you experience uneven heartbeats, shortness of breath, bluish-colored fingernails, dizziness, weakness, fainting, or seizure (convulsions). If your doctor does prescribe these medications together, you may need a dose adjustment or special test to safely use both medications. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p> <p>Moderate: Using LORazepam together with PARoxetine may increase side effects such as dizziness, drowsiness, confusion, and difficulty concentrating. Some people, especially the elderly, may also experience impairment in thinking, judgment, and motor coordination. You should avoid or limit the use of alcohol while being treated with these medications. Also avoid activities requiring mental alertness such as driving or operating hazardous machinery until you know how the medications affect you. Talk to your doctor if you have any questions or concerns. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p> <p>Moderate: Treatment with PARoxetine may occasionally cause blood sodium levels to get too low, a condition known as hyponatremia, and using it with spironolactone can increase that risk. You should seek medical attention if you experience nausea, vomiting, headache, lethargy, irritability, difficulty concentrating, memory impairment, confusion, muscle spasm, weakness or unsteadiness, as these may be symptoms of hyponatremia. More severe cases may lead to hallucination, fainting, seizure, coma, and even death. PARoxetine can also affect your blood pressure and heart rate. You may need a dose adjustment or more frequent monitoring of your blood pressure and pulse to safely use both medications. You should avoid rising abruptly from a sitting or lying position while taking these medications, especially at the beginning of treatment or after an increase in dose. Call your doctor if you experience dizziness, lightheadedness, fainting, or a rapid heartbeat. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p>
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<p>symptoms. You may need a dose adjustment if you take both medications. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p>	
<p>My lifestyle interactions: (Daily tobacco use/ETOH – 3 beers daily)</p> <p>Alcohol can increase the nervous system side effects of PARoxetine such as dizziness, drowsiness, and difficulty concentrating. Some people may also experience impairment in thinking and judgment. You should avoid or limit the use of alcohol while being treated with PARoxetine. Do not use more than the recommended dose of PARoxetine, and avoid activities requiring mental alertness such as driving or operating hazardous machinery until you know how the medication affects you. Talk to your doctor or pharmacist if you have any questions or concerns.</p>	<p>Alcohol (Ethyl): May enhance the adverse/toxic effect of Selective Serotonin Reuptake Inhibitors. Specifically, the risk of psychomotor impairment may be enhanced. Management: Patients receiving selective serotonin reuptake inhibitors should be advised to avoid alcohol. Monitor for increased psychomotor impairment in patients who consume alcohol during treatment with selective serotonin reuptake inhibitors. <i>Consider therapy modification</i></p>
<p>Does any of your PMH contradict your medications?</p>	<p>No contradiction to Paroxetine.</p>
<p>What type of PMH can you determine you have based off this medication</p>	<p>Paroxetine is used to treat:</p> <ul style="list-style-type: none"> • Depression • Anxiety • Panic disorder • Obsessive-compulsive disorder (OCD) • Post-traumatic stress disorder (PTSD) • Social anxiety disorder (SAD) • Premenstrual dysphoric disorder (PMDD)
<p>What would you teach yourself if you were taking</p>	<p>Take paroxetine exactly as prescribed by your doctor. Follow all directions on your</p>

<p>these medications?</p> <p>Drinking alcohol with paroxetine can cause side effects.</p> <p>Ask your doctor before taking a nonsteroidal anti-inflammatory drug (NSAID) for pain, arthritis, fever, or swelling. This includes aspirin, ibuprofen (Advil, Motrin), naproxen (Aleve), celecoxib (Celebrex), diclofenac, indomethacin, meloxicam, and others. Using an NSAID with paroxetine may cause you to bruise or bleed easily.</p> <p>Paroxetine may impair your thinking or reactions. Be careful if you drive or do anything that requires you to be alert.</p>	<p>prescription label. Your doctor may occasionally change your dose. Do not take this medicine in larger or smaller amounts or for longer than recommended.</p> <p>Do not crush, chew, or break an extended-release paroxetine tablet. Swallow it whole.</p> <p>Shake the paroxetine oral suspension (liquid) well just before you measure a dose. Measure liquid medicine with the dosing syringe provided, or with a special dose-measuring spoon or medicine cup. If you do not have a dose-measuring device, ask your pharmacist for one.</p> <p>It may take up to 4 weeks before your symptoms improve. Keep using the medication as directed and tell your doctor if your symptoms do not improve.</p> <p>Do not stop using paroxetine suddenly, or you could have unpleasant withdrawal symptoms. Ask your doctor how to safely stop using paroxetine. Follow your doctor's instructions about tapering your dose.</p> <p>Store paroxetine at room temperature away from moisture, heat, and light.</p>
<p>What would you do if you missed a medication?</p>	<p>Take the missed dose as soon as you remember. Skip the missed dose if it is almost time for your next scheduled dose. Do not take extra medicine to make up the missed dose.</p>
<p>How much would your medication cost per month if you had to pay for it out of pocket?</p>	<p>Capsule (7.5 mg) = \$145.02/30 capsules Tablet (10 mg) = \$9.98/30 tablets Tablet (20 mg) = \$10.26/30 tablets Tablet (30 mg) = \$10.68/30 tablets Tablet (40 mg) = \$10.85/30 tablets Tablet (12.5 mg) = \$58.90/30 extended release tablets Tablet (25 mg) = \$56.84/30 extended release tablets Tablet (37.5 mg) = \$63.94/30 extended release tablets</p>

<p>Drug #11</p>	<p>Drug Name (Generic): Allopurinol</p>
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<p>Drug Class: Antigout</p>	<p>Drug Name (Trade): Lopurin, Zylprim</p>
<p>How I will take the medication:</p> <p>Usual Adult Dose for Gout</p> <p>Dose will vary with the severity of the disease:</p> <p>Initial dose: 100 mg orally once a day -Increase in increments of 100 mg weekly until a serum uric level of 6 mg/dL or less is attained</p> <p>Mild Gout: -Average maintenance dose: 200 to 300 mg orally once a day</p> <p>Moderately Severe Tophaceous Gout: -Average maintenance dose: 400 to 600 mg orally/day in divided doses</p> <p>Minimal Effective Dose: 100 to 200 mg per day Maximum Dose: 800 mg per day</p> <p>Comments:</p> <p>-Oral doses in excess of 300 mg/day should be given in divided doses, preferably after meals to minimize gastric irritation.</p> <p>-A gradual dose titration is recommended to reduce the possibility of acute gouty attacks.</p> <p>-Normal serum urate levels are usually achieved in 1 to 3 weeks.</p>	<p>Usual Adult Dose for Hyperuricemia Secondary to Chemotherapy</p> <p>Parenteral: 200 to 400 mg/m²/day IV as a single infusion or in equally divided infusions at 6, 8, or 12 hour intervals Maximum dose: 600 mg/day</p> <p>Oral: Initial dose: 600 to 800 mg orally in divided doses Maintenance: Adjust dose as needed based on serum uric acid levels Maximum dose: 800 mg per day</p> <p>Comments:</p> <p>-When possible, therapy should be initiated 24 to 48 hours before the start of chemotherapy; treatment should be discontinued when the potential for overproduction of uric acid is no longer present.</p> <p>-Oral doses in excess of 300 mg/day should be given in divided doses, preferably after meals to minimize gastric irritation.</p> <p>-The dose to lower serum uric acid to normal or near-normal varies with the severity of the disease; the above dosing represents suggested doses; serum uric acid levels should serve as an index.</p> <p>-Fluid intake should be sufficient to maintain a daily urinary output of at least 2 L; neutral or preferably slightly alkaline urine is desirable.</p> <p>Use: For the management of patients with leukemia, lymphoma, and malignancies who are receiving cancer therapy which causes elevations of serum and urinary uric acid levels; IV therapy is available for patients who cannot tolerate oral therapy.</p>

<p>Use: For the management of patients with signs and symptoms of primary or secondary gout (acute attacks, tophi, joint destruction, uric acid lithiasis, and/or nephropathy).</p> <p>Usual Adult Dose for Calcium Oxalate Calculi with Hyperuricosuria</p> <p>200 to 300 mg orally once a day or in divided doses</p> <p>Comments:</p> <ul style="list-style-type: none"> -Carefully assess risk versus benefit when initiating therapy and periodically thereafter. -Dose adjustments should be based on control of hyperuricosuria based on 24-hour urinary urate determinations. -Clinical experience suggests these patients may benefit dietary changes in addition to drug therapy. <p>Use: For the management recurrent calcium oxalate calculi in patients whose daily uric acid excretion exceeds 800 mg/day in males or 750 mg/day in females.</p>	
<p>What is the lowest dose of the medication?</p>	<p>PO: 100 mg tablet IV: 200 mg/m²</p>
<p>Specific Directions:</p> <p>Powder for injection: Store at 20°C to 25°C (68°F to</p>	<p>Oral: Administer after meals.</p> <p>IV: The rate of infusion depends on the volume of the infusion; infuse maximum single daily</p>

<p>77°F). Following preparation, intravenous solutions in NS or D5W should be stored at 20°C to 25°C (68°F to 77°F). Do not refrigerate reconstituted and/or diluted product. Must be administered within 10 hours of solution preparation.</p> <p>Tablet: Store at 15°C to 25°C (59°F to 77°F). Store in a dry place. Protect from light.</p>	<p>doses (600 mg/day) over ≥30 minutes. IV daily dose can be administered as a single infusion or in equally divided doses at 6-, 8-, or 12-hour intervals (manufacturer's labeling).</p> <p>Other indications: Administer fluids sufficient to yield daily urinary output of at least 2 L and to maintain a neutral or, preferably, slightly alkaline urine.</p>
<p>Does it counteract with my other medications?</p>	<p>No</p>
<p>My lifestyle interactions: (Daily tobacco use/ETOH – 3 beers daily)</p>	<p>Avoid drinking alcohol. It may worsen your condition.</p>
<p>Does any of your PMH contradict your medications?</p>	<p>No contradiction to allopurinol.</p>
<p>What type of PMH can you determine you have based off this medication</p>	<p>Allopurinol is used to treat:</p> <ul style="list-style-type: none"> • Gout • Kidney stones • Hyperuricemia
<p>What would you teach yourself if you were taking these medications?</p> <p>Take allopurinol exactly as prescribed by your doctor. Follow all directions on your prescription label and read all medication guides or instruction sheets. Your doctor may occasionally change your dose.</p> <p>Take each dose with a full glass of water. To reduce your risk of kidney stones forming, drink 8 to 10 full glasses</p>	<p>You may have gout attacks more often when you first start taking allopurinol. Your doctor may recommend other gout medication to take at this time. Keep using your medication as directed and tell your doctor if your symptoms do not improve after 6 weeks of treatment.</p> <p>You may need to follow a special diet while using allopurinol. Follow all instructions of your doctor or dietitian. Learn about the foods to eat or avoid to help control your condition.</p> <p>Avoid driving or hazardous activity until you know how allopurinol will affect you. Your reactions could be impaired.</p>

<p>of fluid every day, unless your doctor tells you otherwise.</p> <p>Take with food if allopurinol upsets your stomach.</p>	<p>Avoid drinking alcohol. It may worsen your condition.</p>
<p>What would you do if you missed a medication?</p>	<p>Take the medicine as soon as you can, but skip the missed dose if it is almost time for your next dose. Do not take two doses at one time.</p>
<p>How much would your medication cost per month if you had to pay for it out of pocket?</p>	<p>IV (500 mg/mL) = \$3,284.50/1 powder for injection Tablet (100 mg) = \$11.03/30 tablets Tablet (300 mg) = \$13.25/30 tablets</p>

<p>Drug #12</p> <p>Drug Class: Antipsychotic</p>	<p>Drug Name (Generic): risperidone</p> <p>Drug Name (Trade): Risperdal, Risperdal Consta</p>
<p>How I will take the medication:</p> <p>Usual Adult Dose for Schizophrenia</p> <p>Oral Formulations:</p> <ul style="list-style-type: none"> -Initial dose: 2 mg orally per day -Titration dose: May increase in increments of 1 to 2 mg per day at interval of 24 hours or more, as tolerated. -Maintenance dose: 2 to 8 mg orally per day -Maximum dose: 16 mg orally per day <p>Oral Formulation Comments:</p> <ul style="list-style-type: none"> -May be administered orally once a day or in divided doses 	<p>Usual Adult Dose for Bipolar Disorder</p> <p>Oral Formulations:</p> <ul style="list-style-type: none"> -Initial dose: 2 to 3 mg orally per day -Titration dose: May increase in increments of 1 mg per day at interval of 24 hours or more, as tolerated. -Maximum dose: 6 mg orally per day <p>Oral Formulation Comments:</p> <ul style="list-style-type: none"> -The effective dose range is 1 to 6 mg orally per day. -May be administered orally once a day or in divided doses twice a day. -Patients experiencing somnolence may benefit from twice a day dosing.

<p>twice a day.</p> <ul style="list-style-type: none"> -Doses above 12 mg per day were not demonstrated to be more efficacious and were associated with more extrapyramidal symptoms and other adverse effects. -Patients who respond to acute treatment doses should be maintained on the effective dose beyond the acute episode. -Patients should be periodically reassessed to determine the continued need for treatment. <p>Long-acting IM Injection:</p> <ul style="list-style-type: none"> -Initial dose: 25 mg IM every 2 weeks -Titration dose: May increase to 37.5 mg or 50 mg if needed; dose titration should occur no more frequently than every 4 weeks as expected drug release starts 3 weeks after injection. -Maximum dose: 50 mg IM every 2 weeks <p>Long-acting IM Injection Comments:</p> <ul style="list-style-type: none"> -For patients who have never taken oral risperidone, it is recommended to establish tolerability with the oral formulation prior to initiating treatment with long acting injection. -This formulation should be administered by a health care professional as deep IM deltoid or gluteal injection; do not administer IV. -To ensure adequate therapeutic plasma concentrations are maintained prior to the main release phase of drug from the injection, oral risperidone (or another antipsychotic drug) should be given for 3 weeks following the first injection. -Some patients not responding to the 25 mg dose may benefit from a 37.5 mg or 50 mg dose, and some patients who have a history of poor tolerability to psychotropic medications may benefit from a lower initial dose of 12.5 mg, however, the 	<ul style="list-style-type: none"> -There are no systematically obtained data to support the use of this drug in maintenance treatment. <p>Long-acting IM Injection:</p> <ul style="list-style-type: none"> -Initial dose: 25 mg IM every 2 weeks -Titration dose: May increase to 37.5 mg or 50 mg if needed; dose titration should occur no more frequently than every 4 weeks as expected drug release starts 3 weeks after injection. -Maximum dose: 50 mg IM every 2 weeks <p>Long-acting IM Injection Comments:</p> <ul style="list-style-type: none"> -For patients who have never taken oral risperidone, it is recommended to establish tolerability with oral formulation prior to initiating treatment with long acting injection. -This formulation should be administered by a health care professional as deep IM deltoid or gluteal injection; do not administer IV. -To ensure adequate therapeutic plasma concentrations are maintained prior to the main release phase of drug from the injection, oral risperidone (or another antipsychotic drug) should be given for 3 weeks following the first injection. -Some patients not responding to the 25 mg dose may benefit from a 37.5 mg or 50 mg dose, and some patients who have a history of poor tolerability to psychotropic medications may benefit from a lower initial dose of 12.5 mg, however, the efficacy of the 12.5 mg dose has not been studied in clinical trials. <p>Use: As monotherapy or as adjunctive therapy with lithium or valproate for the treatment of acute manic or mixed episodes associated with Bipolar I Disorder</p>
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<p>efficacy of the 12.5 mg dose has not been studied in clinical trials.</p> <p>Use: Treatment of schizophrenia</p>	
<p>What is the lowest dose of the medication?</p>	<p>PO: 1 mg tablet PO: 1 mg/mL oral solution IM: 25 mg/2 weeks</p>
<p>Specific Directions:</p> <p>Injection:</p> <p>IM: Store at 2°C to 8°C (36°F to 46°F) and protect from light. May be stored at 25°C (77°F) for up to 7 days prior to administration; do not expose unrefrigerated product to temperatures above 77°F (25°C). Following reconstitution, administer immediately (do not store for future use).</p> <p>Oral solution, tablet: Store at 15°C to 25°C (59°F to 77°F). Protect from light and moisture. Keep orally-disintegrating tablets sealed in foil pouch until ready to use. Do not freeze solution.</p>	<p>Oral: May be administered without regard to meals.</p> <p>Oral solution can be administered directly from the provided calibrated pipette or may be mixed with water, coffee, orange juice, or low-fat milk, but is not compatible with cola or tea.</p> <p>Risperdal M-Tab should not be removed from blister pack until administered. Do not push tablet through foil (tablet may become damaged); peel back foil to expose tablet. Using dry hands, place immediately on tongue. Tablet will dissolve within seconds, and may be swallowed with or without liquid. Do not split or chew.</p> <p>IM: Shake syringe vigorously just before injection. Administer IM into either the deltoid muscle or the upper outer quadrant of the gluteal area. For IM use only; do not administer IV. Avoid inadvertent injection into vasculature. Injection should alternate between the two arms or buttocks. Do not combine two different dosage strengths into one single administration. Do not substitute any components of the dose-pack; administer with needle provided (1-inch needle for deltoid administration or 2-inch needle for gluteal administration). Administer entire contents of the vial to ensure correct dose is provided.</p>
<p>Does it counteract with my other medications?</p>	<p>Moderate: RisperiDONE may interfere with blood glucose control and reduce the effectiveness of metFORMIN and other diabetic medications. Monitor your blood sugar</p>

Moderate: RisperiDONE and **spironolactone** may have additive effects in lowering your blood pressure. You may experience headache, dizziness, lightheadedness, fainting, and/or changes in pulse or heart rate. These side effects are most likely to be seen at the beginning of treatment, following a dose increase, or when treatment is restarted after an interruption. Let your doctor know if you develop these symptoms and they do not go away after a few days or they become troublesome. Avoid activities requiring mental alertness such as driving or operating hazardous machinery until you know how the medications affect you, and use caution when getting up from a sitting or lying position. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.

Moderate: RisperiDONE and **amLODIPine** may have additive effects in lowering your blood pressure. You may experience headache, dizziness, lightheadedness, fainting, and/or changes in pulse or heart rate. These side effects are most likely to be seen at the beginning of treatment, following a dose increase, or when treatment is restarted after an interruption. Let your doctor know if you develop these symptoms and they do not go away after a few days or they become troublesome. Avoid activities requiring mental alertness such as driving or operating hazardous machinery until you know how the medications affect you, and use caution when getting up from a sitting or lying position. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.

Moderate: Using **sertraline** together with risperiDONE can

levels closely. You may need a dose adjustment of your diabetic medications during and after treatment with risperiDONE. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.

Moderate: Using risperiDONE together with **St. John's Wort** may increase side effects such as dizziness, drowsiness, confusion, and difficulty concentrating. Some people, especially the elderly, may also experience impairment in thinking, judgment, and motor coordination. You should avoid or limit the use of alcohol while being treated with these medications. Also avoid activities requiring mental alertness such as driving or operating hazardous machinery until you know how the medications affect you. Talk to your doctor if you have any questions or concerns. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.

Moderate: RisperiDONE and **nitroglycerin** may have additive effects in lowering your blood pressure. You may experience headache, dizziness, lightheadedness, fainting, and/or changes in pulse or heart rate. These side effects are most likely to be seen at the beginning of treatment, following a dose increase, or when treatment is restarted after an interruption. Let your doctor know if you develop these symptoms and they do not go away after a few days or they become troublesome. Avoid activities requiring mental alertness such as driving or operating hazardous machinery until you know how the medications affect you, and use caution when getting up from a sitting or lying position. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.

Moderate: RisperiDONE and **labetalol** may have additive effects in lowering your blood pressure. You may experience headache, dizziness, lightheadedness, fainting, and/or changes in pulse or heart rate. These side effects are most likely to be seen at the beginning of treatment, following a dose increase, or when treatment is restarted after an interruption. Let your doctor know if you develop these symptoms and they do not go away after a few days or they become troublesome. Avoid activities requiring mental alertness such as driving or operating hazardous machinery until you know how the medications affect you,

<p>increase the risk of an irregular heart rhythm that may be serious and potentially life-threatening, although it is a relatively rare side effect. You may be more susceptible if you have a heart condition called congenital long QT syndrome, other cardiac diseases, conduction abnormalities, or electrolyte disturbances (for example, magnesium or potassium loss due to severe or prolonged diarrhea or vomiting). Talk to your doctor if you have any questions or concerns. You should seek immediate medical attention if you develop sudden dizziness, lightheadedness, fainting, shortness of breath, or heart palpitations during treatment with these medications, whether together or alone. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p>	<p>and use caution when getting up from a sitting or lying position. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p> <p>Moderate: Using LORazepam together with risperiDONE may increase side effects such as dizziness, drowsiness, confusion, and difficulty concentrating. Some people, especially the elderly, may also experience impairment in thinking, judgment, and motor coordination. You should avoid or limit the use of alcohol while being treated with these medications. Also avoid activities requiring mental alertness such as driving or operating hazardous machinery until you know how the medications affect you. Talk to your doctor if you have any questions or concerns. It is important to tell your doctor about all other medications you use, including vitamins and herbs. Do not stop using any medications without first talking to your doctor.</p>
<p>My lifestyle interactions: (Daily tobacco use/ETOH – 3 beers daily)</p> <p>RisperiDONE oral solution should not be mixed with tea or cola. It may be taken with water, coffee, orange juice, or low-fat milk. You should avoid the use of alcohol while being treated with risperiDONE. Alcohol can increase the nervous system side effects of risperiDONE such as dizziness, drowsiness, and difficulty concentrating. Some people may also experience impairment in thinking and judgment. Talk to your doctor or pharmacist if you have any questions or concerns.</p> <p>Hyperglycemia, in some cases extreme and associated with ketoacidosis or hyperosmolar coma or death, has been reported with the use of atypical antipsychotic agents. Patients with diabetes should be monitored for worsening</p>	<p>Alcohol (Ethyl): CNS Depressants may enhance the CNS depressant effect of Alcohol (Ethyl). <i>Monitor therapy</i></p> <p>Atypical antipsychotic drugs have been associated with undesirable alterations in lipid levels. While all agents in the class have been shown to produce some changes, each drug has its own specific risk profile. Before or soon after initiation of antipsychotic medication, obtain a fasting lipid profile at baseline and monitor periodically during treatment.</p> <p>Weight gain has been observed with atypical antipsychotic use. While all agents in the class have been shown to produce some changes, each drug has its own specific risk profile. When treating pediatric patients with atypical antipsychotic agents, weight gain should be monitored and assessed against that expected for normal growth. Monitor weight at baseline and frequently thereafter.</p>

<p>control of blood glucose when treated with these agents. It is recommended that patients with risk factors for diabetes mellitus starting treatment with atypical antipsychotics should undergo fasting blood glucose testing at the beginning of treatment, and periodically thereafter. Any patient treated with atypical antipsychotics should be monitored for symptoms of hyperglycemia including polydipsia, polyuria, polyphagia, and weakness. Patients who develop symptoms of hyperglycemia during treatment with atypical antipsychotics should undergo fasting blood glucose testing. In some cases, hyperglycemia has resolved when treatment with these agents was discontinued; however, some patients required continuation of anti-diabetic treatment despite discontinuation of the atypical antipsychotic drug.</p>	
<p>Does any of your PMH contradict your medications?</p>	<p>No contradiction to risperidone.</p>
<p>What type of PMH can you determine you have based off this medication</p>	<p>Risperidone is used to treat:</p> <ul style="list-style-type: none"> • Schizophrenia • Bipolar disorder
<p>What would you teach yourself if you were taking these medications?</p> <p>Avoid driving or hazardous activity until you know how risperidone will affect you. Your reactions could be impaired.</p> <p>Avoid getting up too fast from a sitting or lying position, or you may feel dizzy. Dizziness or severe drowsiness can cause falls, fractures, or other injuries.</p>	<p>Take risperidone exactly as prescribed by your doctor. Follow all directions on your prescription label and read all medication guides or instruction sheets.</p> <p>Risperidone can be taken with or without food.</p> <p>Remove an orally disintegrating tablet from the package only when you are ready to take the medicine. Place the tablet in your mouth and allow it to dissolve, without chewing. Swallow several times as the tablet dissolves.</p> <p>Measure liquid medicine carefully. Use the dosing syringe provided, or use a medicine</p>

<p>Avoid drinking alcohol. Dangerous side effects could occur.</p>	<p>dose-measuring device (not a kitchen spoon).</p> <p>Do not mix the liquid medicine with cola or tea.</p> <p>It may take up to several weeks before your symptoms improve. Keep using the medication as directed and tell your doctor if your symptoms do not improve.</p> <p>Store at room temperature away from moisture, heat, and light. Do not liquid medicine to freeze.</p>
<p>What would you do if you missed a medication?</p>	<p>Take the medicine as soon as you can, but skip the missed dose if it is almost time for your next dose. Do not take two doses at one time.</p> <p>Get your prescription refilled before you run out of medicine completely.</p>
<p>How much would your medication cost per month if you had to pay for it out of pocket?</p>	<p>PO (1 mg/mL) = \$91.63/30 mL oral solution Tablet (1 mg) = \$15.65/30 tablets Tablet (2 mg) = \$82.54/30 tablets Tablet (3 mg) = \$134.30/60 tablets Tablet (4 mg) = \$177.47/60 tablets Tablet (1 mg) = \$37.95/30 disintegrating tablets Tablet (2 mg) = \$48.28/30 disintegrating tablets Tablet (3 mg) = \$114.83/30 disintegrating tablets Tablet (4 mg) = \$123.07/30 disintegrating tablets</p>

What was difficult about maintaining your medication regiment?

Everything was difficult about staying compliant with the medication regimen. Having to remember what drugs contraindicated with one another, knowing when and what dosages to take were all troublesome. Also, almost all of the drugs had adverse effects with alcohol, and the cost of the medications combined is expensive.

Why do you think it is difficult for patients to remain compliant?

In the beginning, it would be difficult to stay compliant with remembering to take all the medications because it does take time for patients to get accustomed to changes in their routine schedule. Some of the adverse effects of these medications include confusion, so that adds to the stress of staying compliant, as well. I'm sure the cost implications per month are out of reach for some patients that cannot afford it.

What would you do if you missed a medication or had questions?

I would notify my health care provider and inform them. Skip the missed dose if the next dose is less than 12 hours away. Do not take extra medicine to make up the missed dose.

What would your monthly out of pocket expense for your twelve medications cost you (Total Cost for all 12 meds)?

The cheapest tablets per drug have a total cost of \$194.49/month.

Reflective Statement of Experience:

I now realize what I can look forward to when I get old and decrepit. It was challenging to stay on top of my medication, and I forgot to take my meds quite often due to my busy schedule. It did help to have my medications sorted out in two-week increments because it gave me a one week buffer to organize them. I also color coordinated the days of the week to help me remember what pills I took on certain days. I'm sure my memory will be worse when it comes time for me to rely on medication to manage my symptoms, and I worry about my family members who will feel obligated to help me in my golden years. I hope there never comes a day when I have to rely on meds, but I know it's inevitable.

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