

Melanie Holder

Pharmacology

Drug Cards 1-10

1) CAPTOPRIL:

Brand Name: Capoten

Classification: Angiotensin-converting enzyme (ACE) inhibitors

Indicator: Hypertension and adjunct in heart failure

Side Effects/Adverse Reaction: Persisted dry cough which may switch to an PRB if persistent cough is present, angioedema, hyperkalemia

Nursing Consideration: Give captopril 1 hr. before meals

Monitor BP closely following first dose. A sudden exaggerated hypertensive response may occur within 3 hrs. of first dose. Advise bed rest and BP monitoring for the first 3 hrs. after initial dose.

2) Losartan

Brand Name: Cozaar

Classification: Antihypertensive agent/ angiotensin 2 receptor antagonists

Indicator: Management of HTN. Treatment of CHF in clients who cannot tolerate ACE inhibitors. Reduction of stroke risk in clients with CHF and left ventricular hypertrophy

Side Effects/ Adverse Effects: Dizziness, fatigue, headache, diarrhea, drug-related hepatitis, renal failure, hyperkalemia.

Nursing Consideration: Always take BP prior to administration

Monitor ECG periodically during prolonged therapy
Monitor I&O and daily weight
Access for signs of CHF and angioedema
Monitor LFT, RFT, CBC, and K level

3) Diltiazem

Brand Name: Cardizem CD and Taztia XT

Classification: Class IV antiarrhythmic, calcium channel blocker

Indication: Rapid ventricular rate associated with a fib stable narrow-complex tachycardia.

Side Effects: Nausea, vomiting, dizziness headache, hypertension

Nursing Consideration: Can be given a IV bolus or IV infusion calcium chloride can reverse some of the untoward effects

4) Nitroprosol

Brand Name: Protonix

Classification: Antihypertensive

Indicator: Hypertensive Crisis

Controls hypertension during anesthesia cardiac pump failure or cardiogenic shock alone or with dopamine.

Side Effects/Adverse Effects: CNS: Dizziness, headache

GI: Abdominal pain, nausea

MISC: Cyanide toxicity

Nursing Consideration: Watch for severe hypertension.

May cause decreased bicarbonate concentration. PCO₂ and pH. May cause increased lactate serum cyanide, and serum thiocyanate concentrations.

Monitor plasma thiocyanate levels daily in patients receiving prolonged infusions at a rate >3mcg/kg/min or 1mcg/kg/min in patients with anuria. Thiocyanate levels should not exceed 1 millimole/liter.

Acute treatment of cyanide toxicity includes 4-6mg/kg of sodium nitrite (as a 3% solution) over 2-4 min.

CENTRAL LINE ONLY.

5) Atenolol

Brand Name: Tenormin

Classification: Therapeutic: antianginals, antihypertensives

Pharmacologic: beta blockers

Indicator: exertional angina

Contraindications: Sinus bradycardia, greater than first-degree AV heart block, uncompensated heart failure, cardiogenic shock, peripheral vascular disease, Raynaud's disease, hypotension;

abrupt discontinuation pulmonary edema. Safety during pregnancy (category D), or lactation is not established

Side Effects/ Adverse Effect: bradycardia, hypotension, dizziness, fatigue

Nursing Considerations: Neonates born to mothers who are receiving atenolol at parturition or breast-feeding may be at risk for hypoglycemia.

6) Metoprolol

Brand Name: Lopressor and Toprol XL

Classification: Pharm: Beta1-adrenergic blocker (Beta Blocker)
Therapeutic: Antihypertensive, Antianginal

Indicator: HTN

Angina pectoris
MI

can be used CAUTIOUSLY for heart failure (BUT teach about left sided heart failure.

*Left sided heart failure s/s:

- SOB
- weight gain (due to fluid retention)

Side Effects/ Adverse Effects: dizzy/drowsy

Depression
N/V; stomach pain
Dry Mouth
Gas/bloating

Nursing Consideration: - Assess HR/BP before administering

- Check I&O before administering
- Use caution w/ Asthma
- HR < 60 or BP < 90/60 Hold Med; notify HCP

Pts w/ HF - b/f starting to expect to give:

- ACE inhibitor
- digoxin
- diuretic

Dose higher than 400 mg/day:

- Monitor for bronchospasm/dyspnea (b/c metoprolol competitively blocks beta2 adrenergic receptors in bronchial and vascular smooth muscles)

7) Furosemide

Brand Name: Lasix

Classification: Loop diuretic, Sulfonamide

Side Effects/Adverse Effects: ECG Changes, dizziness, weakness, orthostatic hypotension, hypokalemia, thrombophlebitis, dry mouth, renal failure. Electrolyte depletion can result

Nursing Considerations: Use caution if pneumonia is suspected. Use caution in renal failure patients

8) Norepinephrine

Brand Name: Levarterenol and Levophed

Classification: Sympathomimetic
Catecholamine
Vasopressor

Indicator: Cardiogenic shock
Neurogenic shock
Shock with systolic blood pressure less than 70 mmHg

Side Effects/Adverse Reaction: Headache
Nausea
Hypertension
Palpitations
Angina
Tachycardia
Weakness
dizziness
Bradycardia
Ectopy
Dyspnea

Necrosis at iv site
Vomiting

Nursing Consideration: Monitor constantly while pt. is receiving this med. take baseline BP and pulse before start.

- . Adjust flow rate to maintain BP at normal low.
- . Observe carefully and record mental status, skin temp of extremities, and color (especially of earlobes, lips, nail beds) in addition to vital signs.
- . Monitor I&O. Urinary retention and kidney shutdown are possibilities.
- . Be alert to pt. complaints of headache, vomiting, palpitation, arrhythmias, chest pain, photophobia, and blurred vision as possible symptoms of overdose.
- .continue to monitor vitals and observe pt. closely after cessation of therapy for clinical sign of circulatory inadequacy.

9) Simvastatin

Brand Name: Zocor

Classification: antihyperlipidemic HMG-CoA reductase inhibitor (statin)

Indicator: hyperlipidemia

Side Effects/Adverse Reaction: upper respiratory infection, headache, abdominal pain, constipation, and nausea. Side effects are uncommon, but some develop rash, or GI disturbances. Serious side effects such as hepatotoxicity and myopathy are relatively rare. Acute renal failure and Rhabdomyolysis.

Nursing Considerations: monitor liver function test before admin,
-monitor signs of liver injury (fatigue, R upper Abd discomfort, dark urine, jaundice),
-when muscle tenderness, monitor creatine kinase level if > 10x than normal, then discontinue, proximal muscle weakness and increased serum creatine kinase are sign of immune-mediated necrotizing myopathy, then need muscle biopsy and then treat with immunosuppressive agent.

10) Amlodipine

Brand name: Norvasc

Classification: Antihypertensive

Indicator: Alone or with other agents in the management of hypertension, angina pectoris, and vasospastic (prinzmetal's) angina.

Side Effects/Adverse Reactions: Systemic vasal dilation resulting in decreased BP. Coronary vasodilation resulting in decreased frequency and severity of attacks of angina.

CNS: dizziness, fatigue.

CV: peripheral edema, angina, bradycardia, hypertension, palpitations. **GI:** gingival hyperplasia, nausea.

DERM: blushing.

Nursing Consideration:

Monitor of BP and pulse before therapy, during dose titration, and periodically during therapy. Monitor ECG periodically during prolonged therapy. Monitor intake and output ratios and daily weight. Assess for signs of HS, peripheral edema, rails / crackles, dyspnea, weight gain, jugular venous distention. Angina: assess location, duration, intensity comma in precipitation factors of Patient and Joey no pain. Lab test considerations: total serum calcium concentrations are not affected by calcium channel blockers.