

Captopril (Captoril, Capoten)

Classification:	Indication:
Angiotensin-converting enzyme (ACE) inhibitors	hypertension, left ventricular dysfunction after myocardial infarction, and diabetic nephropathy
Side effects/ adverse reactions:	Nursing Considerations:
<ul style="list-style-type: none">• Chest pain• Swelling of the face, eyes, lips, tongue, arms or legs• Hives• Hoarseness• Difficulty breathing or swallowing• Stomach pain• Fainting• Rash	<ul style="list-style-type: none">• Instruct patient to notify health care professional if immediately rash; mouth sores; sore throat; fever; swelling of hands or feet; irregular heartbeat; chest pain; dry cough; hoarseness; swelling of face, eyes, lips, or tongue; difficulty swallowing or breathing occurs; or if taste impairment or skin rash persists.

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NUR203: Principles of Pharmacology: NA

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Drug Cards

Losartan (Cozaar)

Classification:		Indication:	
Angiotensin II receptor antagonists		Hypertension, Left ventricular hypertrophy, Diabetic nephropathy	
Side effects/ adverse reactions:		Nursing Considerations:	
<ul style="list-style-type: none"> • Blurred vision. • Difficult breathing. • Dizziness, faintness, or lightheadedness when getting up suddenly from a lying or sitting position. • Fast or irregular heartbeat. • Nausea or vomiting. • Numbness or tingling in the hands, feet, or lips. • Stomach pain. • Weakness or heaviness of the legs. 		<ul style="list-style-type: none"> • Monitor symptoms of high plasma potassium levels (hyperkalemia), including bradycardia, fatigue, weakness, numbness, and tingling. • Notify physician because severe cases can lead to life-threatening arrhythmias and paralysis. • Monitor signs of hypoglycemia, especially during and after exercise. 	

Diltiazem (Cardizem CD, Taztia XT)

Classification:		Indication:	
Calcium-channel blockers		Atrial arrhythmia, hypertension, paroxysmal supraventricular tachycardia, and chronic stable angina.	
Side effects/ adverse reactions:		Nursing Considerations:	
<ul style="list-style-type: none"> • Swollen hands, ankles or feet. • Headaches. • Feeling dizzy and lightheaded. • Feeling tired, weak and generally unwell. • Feeling hot (flushing) and redness of the skin. • Itching or burning on the skin where you use the cream or ointment. • Stomach pain, indigestion and constipation. 		<ul style="list-style-type: none"> • Contraindicated in 2nd and 3rd AV block • May cause arrhythmias, CHF, bradycardia, peripheral edema, gingival hyperplasia • Increases digoxin levels • Don't drink grapefruit juice • Assess for signs of CHF • Monitor EKG continuously • Tell patient to change positions slowly • Monitor serum potassium • Instruct pt. on how to take blood pressure 	

Nitroprusside (Nipride RTU, Nitropress, Sodium Nitroprusside)

Classification:		Indication:	
Vasodilator		Acute hypertensive crises, acute decompensated heart failure, induction of perioperative hypotension (to reduce blood loss)	
Side effects/ adverse reactions:		Nursing Considerations:	
<ul style="list-style-type: none"> • Chest pain or discomfort. • Fast, pounding, or irregular heartbeat or pulse. • Lightheadedness, dizziness, or fainting. • Slow heartbeat. • Trouble breathing. • Unusual tiredness. 		<ul style="list-style-type: none"> • Monitor HR, BP, and EKG continuously during therapy • May cause cyanide toxicity • Sympathomimetics may decrease effectiveness • PAOP monitoring may help with MI and CHF patients 	

Atenolol (Tenormin)

Classification:		Indication:	
Beta Blocker		Hypertension, angina pectoris, and acute myocardial infarction	
Side effects/ adverse reactions:		Nursing Considerations:	
<ul style="list-style-type: none"> • Blurred vision. • Cold hands or feet. • Difficult or labored breathing. • Dizziness, faintness, or lightheadedness when getting up from a lying or sitting position suddenly. • Shortness of breath. • Tightness in chest. • Wheezing. 		<ul style="list-style-type: none"> • Contraindicated in CHF, pulmonary edema, cardiogenic shock, bradycardia, heart block • Monitor hemodynamic parameters (HR, BP) • May cause bradycardia, CHF, pulmonary edema • Masks symptoms associated with diabetes mellitus • Advise to change positions slowly to prevent orthostatic hypotension • Instruct patient on how to take blood pressure 	

Metoprolol (Lopressor, Toprol XL)

Classification:		Indication:	
Beta Blocker		Angina, heart failure, myocardial infarction, atrial fibrillation, atrial flutter and hypertension	
Side effects/ adverse reactions:		Nursing Considerations:	
<ul style="list-style-type: none"> • Headaches. Make sure you rest and drink plenty of fluids. • Feeling tired, dizzy or weak. If metoprolol makes you feel dizzy or weak, stop what you're doing, and sit or lie down until you feel better. • Cold hands or feet • Feeling sick (nausea) • Stomach pain. 		<ul style="list-style-type: none"> • Monitor hemodynamics • May lead to bradycardia, pulmonary edema • Use caution with MAOIs • Assess I&Os and monitor for signs of CHF 	

Norepinephrine (Levarterenol, Levophed)

Classification:		Indication:	
Catecholamine		Blood pressure control in certain acute hypotensive states	
Side effects/ adverse reactions:		Nursing Considerations:	
<ul style="list-style-type: none"> • Blurred vision. • Chest pain or discomfort. • Lightheadedness, dizziness, or fainting. • Pounding in the ears. • Slow, fast, or irregular heartbeat. 		<ul style="list-style-type: none"> • Monitor BP continuously if possible or every couple of minutes • Double check all concentrations with additional nurse • May result in rebound hypotension due to tissue ischemia when discontinued • Monitor EKG and CVP • If patient is awake instruct them to report headaches, dizziness, or chest pain 	

Furosemide (Lasix)

Classification:	Indication:
Loop diuretics	Treatment of edema associated with congestive heart failure, cirrhosis of the liver, and renal disease, including the nephrotic syndrome, in adults and pediatric patients.
Side effects/ adverse reactions:	Nursing Considerations:
<ul style="list-style-type: none"> • Peeing more than normal. This will last for about 6 hours after taking furosemide. • Feeling thirsty. It's important not to get dehydrated, but how much you drink will depend on why you're taking furosemide. • Dry mouth. • Headaches. • Feeling confused or dizzy. • Feeling or being sick (nausea or vomiting) 	<ul style="list-style-type: none"> • Monitor daily weight, intake and output ratios, amount and location of edema, lung sounds, skin turgor, and mucous membranes. • Notify health care professional if thirst, dry mouth, lethargy, weakness, hypotension, or oliguria occurs. • Monitor BP and pulse before and during administration.

Simvastatin (Zocor)

Classification:	Indication:
HMG-CoA reductase inhibitor	Hyperlipidemia, low-density lipoprotein cholesterol (LDL-C), apolipoprotein B (Apo B), and triglycerides (TG), and to increase high-density lipoprotein cholesterol (HDL-C).
Side effects/ adverse reactions:	Nursing Considerations:
<ul style="list-style-type: none"> • Headache, stomach pain • Vomiting, dark-colored urine • Loss of appetite, weight loss • General feeling of tiredness or weakness, light-colored stools, • Upper right stomach pain, or yellow eyes or skin. 	<ul style="list-style-type: none"> • Assess cholesterol at six weeks. • Perform liver function tests in first year of treatment. • In the case of rhabdomyolysis with increased muscle tenderness and creatine phosphokinase, therapy should be discontinued. • Renal tests for patients with impaired renal function.

Amlodipine (Norvasc, Katerzia)

Classification:		Indication:	
Calcium channel blocker		Hypertension, angina and coronary artery disease	
Side effects/ adverse reactions:		Nursing Considerations:	
<ul style="list-style-type: none"> • Swelling of the hands, feet, ankles, or lower legs. • Headache. • Upset stomach. • Nausea. • Stomach pain. • Dizziness or lightheadedness. • Drowsiness. • Excessive tiredness. 		<ul style="list-style-type: none"> • Monitor patient carefully (BP, cardiac rhythm, and output) while adjusting drug to therapeutic dose; use special caution if patient has CHF. • Monitor BP very carefully if patient is also on nitrates. • Monitor cardiac rhythm regularly during stabilization of dosage and periodically during long-term therapy. 	