

Ibuprofen (Advil, Motrin)

Classification:	Indication:
NSAID	Mild to moderate pain, inflammatory states
Side effects/ adverse reactions:	Nursing Considerations:
<ul style="list-style-type: none">• Nausea or vomiting• Constipation or Diarrhea• Dyspepsia or abdominal pain	<ul style="list-style-type: none">• May cause GI bleeding, Stevens-Johnson Syndrome• May cause anaphylaxis• Monitor for headache, nausea, vomiting, constipation• Monitor renal and liver labs• Patient should avoid using alcohol

Acetaminophen (Tylenol)

Classification:	Indication:
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Analgesics	Pain, fever	
Side effects/ adverse reactions:		Nursing Considerations:
<ul style="list-style-type: none"> • Itching • Rash • Hives • Difficulty breathing or swallowing. • Blistering skin • Loss of appetite • Nausea or vomiting 		<ul style="list-style-type: none"> • Overdose will lead to hepatotoxicity • Acetadote is the antidote for overdose. • May increase risk for bleed with warfarin therapy • May alter blood glucose measurements.

Baclofen (Lioresal)

Classification:		Indication:	
Skeletal muscle relaxants		Relief of spasticity of voluntary muscle resulting from multiple sclerosis other spinal lesion. e.g. tumor of spinal cord, syringomyelia, motor neuron transverse myelitis, traumatic partial section of cord.	
Side effects/ adverse reactions:		Nursing Considerations:	
<ul style="list-style-type: none"> • Feeling sleepy, tired, dizzy or weak • Nausea or vomiting • Diarrhea • Headaches • Problem sleeping • Dry Mouth • Rapid eye movements blurred vision or difficulty focusing • Excessive sweating or a mild rash 		<ul style="list-style-type: none"> • Monitor patient closely during initial (test) dose and titration. • Monitor sudden changes in spasticity muscle strength, or CNS symptoms (confusion, somnolence, agitation hallucinations) that might indicate pump malfunction. • Empty the pump reservoir and the patient should receive symptomatic management • Provide additional spasm and pain relief like rest periods, heat application, NSAIDs as ordered. • Positioning to augment the effects of the drug at relieving the musculoskeletal discomfort 	

Methoadadone (Methadose and Dolophine)

Classification:	Indication:
Schedule II drug	Withdrawal symptoms pain
Side effects/ adverse reactions:	Nursing Considerations:
<ul style="list-style-type: none"> • Relief from pain and a feeling of wellbeing. • Nausea • Sleepiness and long-term use can have effects on male reproductive health • Lipido and cause sweating and constipation. 	<ul style="list-style-type: none"> • Use caution if patient is receiving MAO inhibitors • May cause QT prolongation, hypotension, respiratory depression, dependence, confusion, sedation • Assess pain, vital signs, bowel function • May increase pancreatic enzyme level. • Assess withdrawal symptoms

Morphine (MS Contin)

Classification:	Indication:
Opiod Analgesic	<ul style="list-style-type: none"> • Moderate to severe pain • Supplement to general anesthesia • Acute/ severe pain <ul style="list-style-type: none"> o Breakthrough analgesic
Side effects/ adverse reactions:	Nursing Considerations:
<ul style="list-style-type: none"> • Decrease respiration • Lightheadedness • Constipation • Drowsiness • Hypotension • Bradycardia 	<ul style="list-style-type: none"> • Assess during and after administration- causes CNS depression <ul style="list-style-type: none"> o Blood Pressure o Respiration o Pulse • May be used as an atitussive. • Assess client pain scale frequency. • Use Caution <ul style="list-style-type: none"> o With concurrent use of MAOIs <ul style="list-style-type: none"> ▪ Avoid use within 14days of each other <p>Dilute with normal saline prior to administration for IV needs.</p>

Naloxone (Narcan)

Classification:	Indication:
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Non-Opioid analgesic	<ul style="list-style-type: none"> • Mild to moderate pain • Inflammation • Fever • Myocardial Infarction and Stroke (Aspirin)
Side effects/ adverse reactions:	Nursing Considerations:
<ul style="list-style-type: none"> • Salicylism • Tinnitus (ring in ear) • Dizziness • Headache • Dyspepsia • Kidney failure • Fluid retention • Edema 	<ul style="list-style-type: none"> • Monitor <ul style="list-style-type: none"> ○ Renal and liver labs • Therapy should be discontinued after the first sign of rash. • May cause <ul style="list-style-type: none"> ○ Anaphylaxis ○ GI bleeding ○ Hepatitis ○ Stevens-Johnson syndrome

Dopamine (Intropin)

Classification:	Indication:

Intropin	Used to improve blood pressure, cardiac output, and urine output.	
Side effects/ adverse reactions:	Nursing Considerations:	
<ul style="list-style-type: none"> • Chest Pain • Fast, slow or pounding heartbeats. • Shortness of breath • Cold feeling • Numbness 	<ul style="list-style-type: none"> • Can cause neutropenia- check WBCs regularly. • Use cautiously with diuretic therapy • Administer 1 hour before meals • Monitor blood pressure often • Monitor weight and fluid status • Monitor renal profile • Monitor renal profile • Dry cough 	

Hydrocortisone (Hydrocort)		
Classification:	Indication:	
Corticosteroids	Skin problems- psoriasis, allergic reaction dermatitis Asthma & COPD Adrenal insufficiency Edema in brain, kidneys, and liver	
Side effects/ adverse reactions:	Nursing Considerations:	
Immunosuppression Mood swings Increase appetite Weight gain Insomnia	<ul style="list-style-type: none"> ○ May cause <ul style="list-style-type: none"> ○ Osteoporosis ○ Peptic ulcer ○ CNS alterations ○ Decreased wound healing 	

Osteoporosis	Monitor liver profile o Excreted by the liver
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Fentanyl (Actiq)	
Classification:	Indication:
Opioid	<ul style="list-style-type: none"> • Moderate to severe pain • Supplement to general anesthesia • Acute/severe pain <ul style="list-style-type: none"> o Breakthrough analgesic Chronic pain <ul style="list-style-type: none"> o Patch form for some patch
Side effects/ adverse reactions:	Nursing Considerations:
	<ul style="list-style-type: none"> • Assess during and after

<ul style="list-style-type: none"> • Decrease respirations • Lightheadedness • Constipation • Drowsiness • Hypotension • Bradycardia 	<p>administration-causes CNS depression</p> <p>Blood Pressure</p> <p>Respirations</p> <p>Pulse</p> <ul style="list-style-type: none"> • May be used as an atitussive. • Antidote for Overdose <ul style="list-style-type: none"> o Narcan (Naloxone) • Use cause <ul style="list-style-type: none"> o With concurrent use of MAOIs <ul style="list-style-type: none"> ▪ Avoid use 14 days of each other • Assess the client pain scale frequently • Administer slowly to decrease CNS depression
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Oxycodone (Oxycontin)	
Classification:	Indication:
Opiod analgesics	Pain
Side effects/ adverse reactions:	Nursing Considerations:
<ul style="list-style-type: none"> • Constipation • Nausea • Somnolence • Dizziness • Pruritus • Vomiting • Headache 	<ul style="list-style-type: none"> • May cause respiratory depression, constipation confusion, sedation, hallucinations, urinary retention. • Use caution with increased intracranial pressure. • Don't use with MAOIs

<ul style="list-style-type: none">• Asthenia• Sweating	<ul style="list-style-type: none">• Assess hemodynamics• Assess pain• May elevate pancreatic enzymes• Assess bowel function
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