

phenytoin (Dilantin)		
Classification:	Indication:	
<ul style="list-style-type: none"> - Antiepileptic - Antiarrhythmic 	<ul style="list-style-type: none"> - Control grand-mal (tonic-clonic) and psychomotor seizures - Prevention and tx of seizures occurring during or following neurosurgery 	
Side effects/ adverse reactions:		Nursing Considerations:
<ul style="list-style-type: none"> - Hypersensitivity, lack of appetite, headache, tremor, transient nervousness, GI disturbances, tenderness, and hyperplasia of gums, hirsutism, coarsening of facial features - Fatal toxic epidermal necrolysis and Steven-Johnson syndrome 		<ul style="list-style-type: none"> - Administer IV slowly to prevent severe hypotension - Monitor patient's cardiac rhythm and check BP frequently and regularly during IV infusion - Asses for hypersensitivity of hydantoins, sinus bradycardia, and AV heart block

Phenobarbital (Bellatal / Solfoton)		
Classification:	Indication:	
<ul style="list-style-type: none"> - Barbiturate - Antiepileptic 	<ul style="list-style-type: none"> - Sedative, hypnotic treatment of insomnia for up to 2 weeks - Long-term tx of generalized tonic-clonic and cortical focal seizures - Oral emergency control of acute seizures (status epilepticus, eclampsia, meningitis, tetanus, and toxic reactions to local anesthetics. 	
Side effects/ adverse reactions:		Nursing Considerations:
<ul style="list-style-type: none"> - Bradycardia, hypotension syncope, drowsiness, lethargy, CNS excitation or depression, impaired judgment, hangover effect, confusion, somnolence, agitation, hyperkinesia, ataxia, nervousness, headache, 		<ul style="list-style-type: none"> - avoid overdose and take with food or after meals to avoid GI upset - discontinue use if eye changes, symptoms of hepatic impairment or renal impairment occur.

Diazepam (Valium)		
Classification:	Indication:	
<ul style="list-style-type: none"> - Benzodiazepine - Antiepileptic 	<ul style="list-style-type: none"> - Management of anxiety disorders or for short-term relief of symptoms of anxiety - Acute alcohol withdrawal; may become useful in the symptomatic relief of acute agitation, tremor, delirium, and hallucinations 	
Side effects/ adverse reactions:		Nursing Considerations:
<ul style="list-style-type: none"> - Psychological and physical dependence with withdrawal; fatigue, sedation, ataxia, vertigo, mental changes, incontinence, hypotension, tachycardia, thrombophlebitis at injection site. 		<ul style="list-style-type: none"> - Avoid administering via intra-arterially to prevent arteriospasm and gangrene - Monitor pt for hypotension during IV administration - Monitor EKG for status epilepticus; seizure may occur after initial control - Monitor kidney and liver function tests

Valproic Acid (Depakote)		
Classification:	Indication:	
<ul style="list-style-type: none"> - Antiepileptic 	<ul style="list-style-type: none"> - Adjunctive therapy for seizures or bipolar mania; prophylactic tx of migraine headaches 	
Side effects/ adverse reactions:		Nursing Considerations:
<ul style="list-style-type: none"> - Confusion is a major side-effect due to delayed-released Depakote and Depakote ER. - Sedation, tremors, emotional upset, depression, psychosis, aggression hyperactivity, behavioral deterioration, weakness, hair loss, rash, petechiae, hepatic failure, pancreatitis and irregular menses 		<ul style="list-style-type: none"> - Take with meals. - Abrupt discontinuation may cause absent seizures - Monitor LFT; may cause severe hepatic impairment. - Monitor ammonia levels, serum levels of valproic acid, and monitor platelet count. -

Carbamezepine (Tegretol)	
Classification:	Indication:
<ul style="list-style-type: none"> - Barbiturate - Antiepileptic 	<ul style="list-style-type: none"> - Treatment of seizure disorders, including partial seizures with complex patterns; tonic-clonic; mixed seizures; trigeminal neuralgia
Side effects/ adverse reactions:	Nursing Considerations:
<ul style="list-style-type: none"> - Drowsiness, ataxia, dizziness, nausea, vomiting, cardiovascular complications, hepatitis, hematological disorders, steven-Johnson syndrome 	<ul style="list-style-type: none"> - Assess for known allergies to avoid hypersensitivity - Obtain baseline EKG to evaluate brain function - Assess renal and liver functions - Monitor lab results ie: urinalysis and CBC with differential to assess for bone marrow function. - Administer with food to alleviate GI irritation - Discontinue if patient experiences infection, skin rash, bone marrow depression, depression, or personality changes

Carbidopa-levodopa (Sinimet)	
Classification:	Indication:
<ul style="list-style-type: none"> - Antiparkinsonian 	<ul style="list-style-type: none"> - Tx of parkinsonism and Parkinson disease
Side effects/ adverse reactions:	Nursing Considerations:
<ul style="list-style-type: none"> - Adventitious movements, ataxia, increased hand tremor, dizziness, numbness, weakness, agitation, anxiety, anorexia, nausea, dry mouth, dysphagia, urinary retention, flushing, and cardiac irregularities 	<ul style="list-style-type: none"> - Arrange to decrease the dose of the drug if therapy has been interrupted; observe for the development of suicidal tendencies - Give with meals to avoid GI upset - Monitor hepatic, renal, hematopoietic, and CV function - Take medication as prescribed and do not take it with multivitamins

Benztropine (Cogentin)	
Classification:	Indication:
- Anticholinergic	- Tx of parkinsonism and Parkinson disease
Side effects/ adverse reactions:	Nursing Considerations:
<ul style="list-style-type: none"> - Disorientation, confusion, memory loss, nervousness, light-headedness, dizziness, depression, blurred vision, mydriasis, dry mouth, constipation, urinary retention, urinary hesitation, flushing, decreased sweating. 	<ul style="list-style-type: none"> - Decrease dosage or discontinue if dry mouth becomes so severe that swallowing becomes difficult. - Decrease dose in hot weather or with exposure to hot environments. - Give with meals and monitor bowel function. -

bethanechol (Urecholine)	
Classification:	Indication:
- Anticholinergic	- Tx of parkinsonism and Parkinson disease
Side effects/ adverse reactions:	Nursing Considerations:
<ul style="list-style-type: none"> - Abdominal discomfort - salivation, nausea - Vomiting - Sweating - flushing 	<ul style="list-style-type: none"> - Ensure proper administration of ophthalmic preparation to increase the effectiveness of drug - Administer oral medication on an empty stomach to decrease nausea and vomiting - Monitor urine output and provide safety precautions if pt reports poor visual acuity in dim light to prevent injury

pyridostigmine (Mestinon, Regonol)	
Classification:	Indication:
<ul style="list-style-type: none"> - Autonomic nervous system agent - Cholinergic 	<ul style="list-style-type: none"> - Treatment of myasthenia gravis - Antidote for nondepolarizing neuromuscular junction blockers - Increased survival after exposure to nerve gas
Side effects/ adverse reactions:	Nursing Considerations:
<ul style="list-style-type: none"> - Bradycardia, cardiac arrest, tearing, miosis, salivation. - dysphagia, nausea, vomiting - increased bronchial secretions, urinary frequency, and incontinence 	<ul style="list-style-type: none"> - report increasing muscular weakness, cramps, or fasciculations. - monitor VS frequently. - observe pt airway and respiration frequently

atropine	
Classification:	Indication:
<ul style="list-style-type: none"> - Anticholinergic - Antiparkinsonian 	<ul style="list-style-type: none"> - Tx of parkinsonism and Parkinson disease - Restoration of cardiac rate and atrial pressure during anesthesia
Side effects/ adverse reactions:	Nursing Considerations:
<ul style="list-style-type: none"> - Blurred vision, mydriasis, photophobia, increased intra ocular pressure - Palpitations, bradycardia, tachycardia - Dry mouth, altered taste, dysphagia, paralytic ileus 	<ul style="list-style-type: none"> - Take as prescribed, 30 mins before meals, avoid excessive dosage - Avoid hot environments - Report rash; flushing, eye pain, difficulty breathing, tremors - Avoid tasks that require acute vision and wear sunglasses - Have patient void before taking medication if they have difficulty urinating - Ensure adequate hydration and prevent hyperpyrexia