

Phenytoin(Dilantin)

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Classification:	Indication:
anticonvulsants	control of generalized tonic-clonic (grand mal) and complex partial (psychomotor, temporal lobe) seizures and prevention and treatment of seizures occurring during or following neurosurgery.
Side effects/ adverse reactions:	Nursing Considerations:
Headache, nausea, vomiting, constipation, dizziness, feeling of spinning, drowsiness, trouble sleeping, or nervousness	<ul style="list-style-type: none">• Careful cardiac monitoring is needed during and after administering intravenous phenytoin.• serum drug monitoring is required.• Monitor for rashes, blisters, fever, and other signs of hypersensitivity.

Phenobarbital(Luminal)

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Classification:	Indication:

barbiturate	anti-seizure management, treatment for status epilepticus, insomnia, as well as benzodiazepine and alcohol withdrawal treatment	
Side effects/ adverse reactions:		Nursing Considerations:
<ul style="list-style-type: none"> ● drowsiness, lack of energy; ● dizziness or spinning sensation; ● depressed mood; ● feeling restless or excited (especially in children or older adults); ● drunk feeling; or ● "hangover" effect (drowsiness the day after taking phenobarbital). 		<ul style="list-style-type: none"> ■ Monitor patient responses, blood levels (as appropriate) if any interacting drugs listed above are given with phenobarbital; suggest alternative means of contraception to women using hormonal contraceptives. ■ Monitor injection sites carefully for irritation, extravasation (IV use). Solutions are alkaline and very irritating to the tissues. ■ Monitor P, BP, respiration carefully during IV administration. ■ Arrange for periodic lab tests of hematopoietic, renal, and hepatic systems during long-term therapy.

diazepam(Valium)	
Classification:	Indication:

<p>benzodiazepines</p>	<p>FDA approved for the management of anxiety disorders, short-term relief of anxiety symptoms, spasticity associated with upper motor neuron disorders, adjunct therapy for muscle spasms, preoperative anxiety relief, management of certain refractory epilepsy patients</p>
<p>Side effects/ adverse reactions:</p>	<p>Nursing Considerations:</p>
<ul style="list-style-type: none"> ● drowsiness ● dizziness ● tiredness ● muscle weakness ● headache ● dry mouth ● nausea ● constipation 	<p>Do not administer intra-arterially; may produce arteriospasm, gangrene.</p> <p>Change from IV therapy to oral therapy as soon as possible.</p> <p>Do not use small veins (dorsum of hand or wrist) for IV injection.</p>

<p>Valproic acid (Belvo)</p>	
<p>Classification:</p>	<p>Indication:</p>
<p>anticonvulsants</p>	<p>use as sole and adjunctive therapy in the treatment of simple and complex absence seizures, and adjunctively in patients with multiple seizure types which include absence seizures.</p>
<p>Side effects/ adverse reactions:</p>	<p>Nursing Considerations:</p>

<ul style="list-style-type: none"> ● stomach pain, ● feeling or being sick ● diarrhea ● dry or sore mouth, or swollen gums ● shakes (tremors) in a part of your body, or unusual eye movements ● feeling tired or sleepy ● headache ● weight gain 	<ul style="list-style-type: none"> ● Arrange for patient to have platelet counts, bleeding time determination before therapy, periodically during therapy, and prior to surgery. ● Monitor patient carefully for clotting defects (bruising, blood-tinged toothbrush). ● Discontinue if there is evidence of hemorrhage, bruising, or disorder of hemostasis.
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carbamazepine(Tegretol, Curatil)	
Classification:	Indication:
anticonvulsants	manage and treat epilepsy, trigeminal neuralgia, and acute manic and mixed episodes in bipolar I disorder.
Side effects/ adverse reactions:	Nursing Considerations:

<ul style="list-style-type: none"> • Blurred vision or double vision • continuous back-and-forth eye movements 	<ul style="list-style-type: none"> -Observe for confusion and agitation in older people. - Observe for changes in mental state. - Observe for allergic reactions such as rashes, purpura.
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carbidopa-levodopa (CRSinemet)	
Classification:	Indication:
decarboxylase inhibitors.	treatment of motor symptoms encountered in Parkinson disease (PD), post-encephalitic parkinsonism, and parkinsonism symptoms resulting from intoxication by carbon monoxide or manganese.
Side effects/ adverse reactions:	Nursing Considerations:
<ul style="list-style-type: none"> • Falling asleep during activities of daily living and somnolence • Withdrawal-emergent hyperpyrexia and confusion • Cardiovascular ischemic events • Hallucinations/Psychotic-like behavior • Impulse control/compulsive behaviors • Dyskinesia • Peptic ulcer disease • Glaucoma • Depression/Suicidality 	<ul style="list-style-type: none"> • Arrange to decrease dosage if therapy is interrupted; observe for the development of suicidal tendencies. ... • Ensure that patient voids before receiving dose if urinary retention is a problem. • Monitor hepatic, renal, hematopoietic, and CV function.

	<ul style="list-style-type: none"> • For patients who take multivitamins provide Larobec, a preparation without pyridoxine.
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Benztropine (Cogentin)	
Classification:	Indication:
anticholinergics	used as an adjunct in the therapy of all forms of parkinsonism. It can also be used for the control of extrapyramidal disorders due to neuroleptic drugs.
Side effects/ adverse reactions:	Nursing Considerations:
<ul style="list-style-type: none"> • dry mouth • difficulty or pain when urinating • constipation • vomiting • nausea • loss of appetite 	<ul style="list-style-type: none"> • May lead to arrhythmias, hypotension, palpitations, and tachycardia • Anticholinergic effects like constipation, dry mouth • Assess for extrapyramidal symptoms • Instruct patient to take as directed • Instruct patient to maintain good oral hygiene

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Bethanechol (Urecholine)	
Classification:	Indication:
parasympathomimetic	FDA approved to treat postoperative urinary retention, postpartum urinary retention, and overflow incontinence caused by neurogenic atony of the bladder
Side effects/ adverse reactions:	Nursing Considerations:
<ul style="list-style-type: none"> ● Shortness of breath, ● wheezing, ● tightness in chest 	<ul style="list-style-type: none"> ● a focused assessment of urinary symptoms, ● monitoring for side effects and therapeutic effects. ● Client teaching is focused on self-administration and learning to recognize and manage side effects.

pyridostigmine (Mestinon)	
Classification:	Indication:

acetylcholinesterase inhibitor	treatment of myasthenia gravis. When administered intravenously, it is indicated for the reversal or antagonism of the neuromuscular blocking effects of nondepolarizing muscle relaxants.
Side effects/ adverse reactions:	Nursing Considerations:
<ul style="list-style-type: none"> ● upset stomach ● diarrhea ● vomiting ● drooling ● pale skin ● cold sweats ● blurred vision ● watery eyes 	<ul style="list-style-type: none"> ● Report increasing muscular weakness, cramps, or fasciculations. Failure of patient to show improvement may reflect either underdosage or overdosage. ● Observe patient closely if atropine is used to abolish GI adverse effects or other muscarinic adverse effects because it may mask signs of overdosage (cholinergic crisis): Increasing muscle weakness, which through involvement of respiratory muscles can lead to death. ● Monitor vital signs frequently, especially respiratory rate. ● Observe for signs of cholinergic reactions (see Appendix F), particularly when drug is administered IV. ● Observe neonates of myasthenic mothers, who have received pyridostigmine, closely for difficulty in breathing, swallowing, or sucking. ● Observe patient continuously when used as muscle relaxant antagonist. Airway and respiratory assistance must be maintained until full recovery of voluntary respiration and neuromuscular transmission is assured. Complete recovery usually occurs within 30 min.

Atropine (AtroPen, Atreza, Sal-Tropine)	
Classification:	Indication:
anticholinergic or antiparasymphathetic	hypersalivation, bronchial secretions, or bradycardia

(parasympatholytic) drug	
Side effects/ adverse reactions:	Nursing Considerations:
<ul style="list-style-type: none">● eye irritation and redness● swelling of the eyelids● sensitivity to bright light● dry mouth● red or dry skin● blurred vision	<ul style="list-style-type: none">● Avoid driving or operating heavy machinery while under the influence of atropine.● Reduce lighting to decrease photophobia.● Monitor GI motility (BMs and flatus) and urine output while patient is receiving atropine.