

## PHARMACOLOGY THERAPY REFERENCE SHEET

1. Pain meds—prescription or OTC
  2. Steroid pain meds
  3. Muscle relaxers
  4. Anti-depressants
  5. cardiovascular/blood pressure meds
  6. respiratory/breathing meds
  7. antibiotics
  8. Anti-fungals
  9. anti-diabetic meds
  10. anti-seizure meds
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1. Pain meds—NSAIDs, --aspirin, naproxen, Ibuprofen, acetaminophen, celebrex, viox, Tylenol (non-NSAID)
    - a. GI irritation
    - b. Headaches
    - c. Tinnitus—red flag for toxicity
    - d. Acetaminophen—may cause liver toxicity in high doses
  2. steroid pain meds—betamethasone, cortisone, dexamethasone, prednisone
    - a. immunosuppressive
    - b. catabolic effect on bone, muscle, ligament, tendon, skin
    - c. salt/water retention
    - d. increased risk of infection
    - e. gastric ulcers
    - f. glucose intolerance
    - g. glaucoma
    - h. adrenal suppression—hypotension—especially if dosage is suddenly stopped
  3. Muscle Relaxers—diazepam (Valium), Soma, Vanadom, Flexeril, Skelaxin, Norflex, Baclofen, Botox, Neurontin etc
    - a. Sedation
    - b. Dizziness, ataxia
    - c. Generalized weakness

4. Anti-depressants—Diazepam, Lorazepam, Buspar, Paxil, Effexor, Elavil, Pamelor, Wellbutrin, Fluoxetine/Prozac, Zoloft
  - a. Orthostatic hypotension
  - b. Sedation
  - c. Occasional GI complications
  - d. 2-6 week time lag before positive effects are seen
  - e. Mood changes
  - f. Weight gain
  - g. Tardive dyskinesia (oral movements/tongue)—can be irreversible—report immediately
  - h. Pseudoparkinsonism
  
5. Cardiovascular/Blood pressure meds—
  - a. diuretics: lasix, diuril;
    - i. increased urination
    - ii. decreased fluids in vascular system
    - iii. electrolyte imbalance
    - iv. Report the following:
      1. orthostatic hypotension
      2. weakness, fatigue
      3. confusion, mood changes
  - b. Beta-blockers: atenol, metoprolol, pindolol,
    - i. Designed to decrease HR and/or contraction force
    - ii. Bronchoconstriction
    - iii. Decreased maximal exercise capacity
    - iv. Orthostatic hypotension
    - v. Depression, lethargy
  - c. Vasodilators—loniten/minoxidil, Apresoline
    - i. Reflex tachycardia
    - ii. Postural hypotension
    - iii. Dizziness, headaches
    - iv. Edema, fluid retention
  - d. Calcium channel blockers—Cardizem, Procardia
    - i. Swelling in feet, ankles
    - ii. Orthostatic hypotension
    - iii. Altered heart rate
  - e. Nitrates—nitroglycerin—rapid vasodilator
    - i. Headaches, dizziness
    - ii. Orthostatic hypotension
    - iii. **Exaggerated response to systemic heat**
  - f. Digitalis—for CHF
    - i. TOXICITY—sx of:
      1. GI distress
      2. fatigue

- 3. confusion
  - 4. depression
  - 5. blurred vision
  - 6. arrhythmias
  - g. Anti-coagulation—heparin (IV only), warfarin/coumadin, aspirin, plavix
    - i. Hemorrhage
    - ii. Bruise easily
6. Respiratory/breathing meds
- a. Antihistamines that cross BBB—sedation, fatigue, incoordination, blurred vision
  - b. Dries out respiratory tract, may limit “productive” cough
  - c. Nausea
  - d. Vomiting
  - e. Decongestants—
    - i. Headache
    - ii. Nausea
    - iii. Nervousness
    - iv. Increased BP, cardiac palpitations
  - f. REHAB SCHEDULING CONCERNS: schedule rehab to capitalize on drug effects:
    - i. Inhaled bronchodilators: 10 minutes
    - ii. Mucolytic/expectorants: 30-60 minutes
7. Antibiotics Meds
- a. Hypersensitivity reactions/allergic
  - b. Tendon damage with fluoroquinolones
    - i. **RED FLAG** Typically Weight Bearing Tendons
  - c. UV Sensitivity (tetracycline, others)
8. Anti-Fungals (e.g.: Lamisil)
- a. Oral use has side effects
    - i. Headache
    - ii. GI problems—common
    - iii. Hepatotoxicity
    - iv. Blood dyscrasias
9. Diabetic Meds
- a. Insulin (cannot be delivered orally)—
    - i. Immunological reaction
    - ii. Hypoglycemia
      - 1. dose too high
      - 2. delayed/missed meal
      - 3. strenuous exercise
  - b. oral antidiabetics (glucophage, glucotrol)
    - i. hypoglycemia

10. anti-seizure meds—dilantin, tegretol, zarontin, depakene, benzodiazepines, neurontin
  - a. sedation
  - b. headaches
  - c. incoordination
  - d. GI problems
  - e. MORE SERIOUS
    - i. Liver toxicity
    - ii. Blood dyscrasias—aplastic anemia