

PHARMACY TECHS HQ SIMPLIFIED PHARMACOLOGY 5

1. 1 kg=_____lb	2.2lb
2. .453 kg=_____lb	1.0lb
3. 1g=_____mg	1000mg
4. 1L=_____	1000ml
5. 240ml=_____fl oz	8fl oz
6. 30ml=_____fl oz	1 fl oz
7. 30ml=_____tbsp	2tbsp
8. 1tbsp=_____tsp	3tsp
9. 8ml=_____tsp	2tsp
10. 1tsp=_____gtt	60gtt
11. 240ml=_____cup	1cup
12. 2.2lb=_____kg	1kg
13. 1 kg=_____g	1000g
14. PRN means	as needed
15. Qd means	once a day
16. HS means	At bedtime or Time of sleep commonly 2100
17. BID means	twice a day usually 0900 and 2100
18. TID	Three Times a day usually 0900 1700 2100
19. QID	Four times a day
20. STAT	right now
21. q1	give once an hour can substitute any number between 1-12 after q
22. IM	intramuscular
23. IV	intravenous
24. Topical	on skin
25. SL	sublingual
26. PO	by mouth
27. IM sites	Deltoid vastus lateralis dorsogluteus ventrogluteal
28. 5 rights of medication administration	right medication right patient right time right route right dose

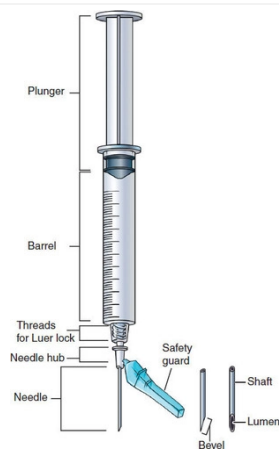
29. The medication order consists of seven parts:	Patient's name Date and time the order is written Name of drug to be administered Dosage of the drug Route by which the drug is to be administered Frequency of administration of the drug Signature of person writing the order
30. 4 ways to take medications by mouth	oral enteral sublingual buccal
31. parenteral routes to administer medications	subcutaneous- subcutaneous tissue intramuscular- muscle tissue intra-dermal- corium(under epidermis) intravenous- vein intra-arterial- artery intracardial- heart tissue intraperitoneal- peritoneal cavity intraspinal- spinal canal intraosseous- bone
32. topical routes to administer medication	vaginal rectal inunction- rubbing drug into skin instillation- placing drug into direct contact with mucous membrane irrigation- flushing mucous membrane with drug in solution skin application- applying transdermal patch
33. pulmonary route to administer medication	having patient inhale drug
34. How much time do you have to administer medication?	an hour before and after
35. what are two identifiers to verify correct patient	Name, Date of birth

36. 10 rights for medication administration	right drug right reason right dose right route right preparation right patient right time right education right documentation right response *right to refuse	46. how do you administer liquid medication to a child (under 5), toddler, infant?	dropper
37. medications administered orally are intended for absorption where	stomach and small intestine	47. what enteral tubes are there?	nasogastric, nasointestinal, percutaneous endoscopic gastrostomy (PEG Tube), jejunostomy (J Tube)
38. Oral medications are available in	solid and liquid form	48. NPO means	nothing by mouth
39. Medication given orally usually have a	slower onset and are more prolonged but less potent effect	49. capsules can be opened if indicated to do so on box. true or false?	True
40. Which route is the fastest onset	IV	50. Any tablet can be cut or crushed. True or false?	False. Only scored tablets and/or non Enteric-coated can be cut/crushed if indicated on medication label/box
41. Oral medication that should not be chewed or crushed	extended-release forms, such as SR (sustained release), XL (extended release), CR or CRT (controlled release), SA (sustained action), or LA (long acting).	51. What is the purpose of enteric-coated capsules?	when the active ingredient of the drug is irritating to the stomach mucosa. As a result, less gastrointestinal irritation occurs, and the medication is protected from destruction by gastric acid
42. certain oral medications can not be chewed or crushed why?	Chewing and/or crushing these medications destroys their extended-release delivery mechanism and may result in potentially toxic peaks and low troughs.	52. sublingually medication go where?	under the tongue
43. a contraindication for giving liquid medication with alcohol in them are?	If the patient has had a previous drug or alcohol addiction	53. Buccal medications go where?	between cheek and gum
44. what precautions should be taken for medication that discolor or damage teeth/ enamel?	mix it well with water or some other liquid, have the patient take the medication mixed with liquid through a drinking straw, and encourage the patient to drink water after administration. This practice reduces the strength of the drug that comes in contact with the teeth.	54. SL and Buccal routes allow medication	to be absorbed relatively rapidly into the bloodstream for quick systemic effects. These areas are rich in superficial blood vessels
45. most medications for children under 5 are available in what form	liquid	55. SL and Buccal medication should never be?	Swallowed
		56. Before administering a SL or Buccal medication have the patient?	take a drink of WATER (if not contraindicated) and/or perform oral care. This ensures that the tablet will dissolve appropriately
		57. Parenteral means	outside the intestines or alimentary canal
		58. Advanced injection techniques are	an artery, the peritoneum, heart tissues, the spinal canal, and bones

59. Needle size and length are determined by:	Route of administration viscosity of solution quantity to be administered body size type of medication	73. drug tolerance	tendency of the body to become accustomed to a drug over time; larger doses are required to produce the desired effects
60. our Book says to not _____ needles.....our instructors showed us how to _____ needles	recap	74. ethnopharmacology	study of the effect of ethnicity on responses to prescribed medication, especially drug absorption, metabolism, distribution, and excretion
61. you must maintain what when administering parenteral injections	surgical asepsis	75. generic name	name assigned by the manufacturer who first develops a drug; it is often derived from the chemical name
62. How to figure out a Client's daily maintenance fluid requirements	100 mL/kg for first 10 kg plus 50 mL/kg for second 10 kg plus 20 mL/kg for remainder of weight in kg equals	76. half life	the amount of time it takes for half a dose of a drug to be eliminated from the body
63. What is this part	brand name	77. idiosyncratic effect	unusual, unexpected response to a drug that may manifest itself by overresponse, underresponse, or response different from the expected outcome
64. what is this	generic name	78. metabolism	(1) chemical changes in the body by which energy is provided; (2) breakdown of a drug to an inactive form; also referred to as biotransformation
65. what is this	manufacturers name	79. official name	name by which a drug is identified in official publications
66. absorption	process by which drugs are transferred from the site of entry into the body to the bloodstream	80. peak level	highest plasma concentration of a drug
67. adverse drug effect	undesirable effects other than the intended therapeutic effect of a drug	81. pharmacodynamic	process by which drugs alter cell physiology and affect the body
68. allergic effect	immune system response that occurs when the body interprets an administered drug as a foreign substance and forms antibodies against the drug	82. pharmacokinetics	movement of drug molecules in the body in relation to the drugs absorption, distribution, metabolism, and excretion
69. anaphylactic reaction/ anaphylaxis	severe reaction occurring immediately after exposure to a drug; characterized by respiratory distress and vascular collapse	83. pharmacotherapeutics	dynamic that achieves the desired therapeutic effect of the drug without causing other undesirable effects
70. antagonist effect	combined effect of two or more drugs that produces less than the effect of each drug alone	84. synergistic effect	combined effect of two or more drugs is greater than the effect of each drug alone
71. cumulative effect	condition that occurs when the body cannot metabolize a drug before additional doses are administered	85. teratogenic	known to have potential to cause developmental defects in embryos or the fetus
72. distribution	movement of drugs by the circulatory system to the site of action	86. toxic effect	specific groups of symptoms related to drug therapy that carry risks for permanent damage or death

87. therapeutic range	that concentration of a drug in the blood serum that produces the desired effect without causing toxicity
88. trade name/brand name/proprietary name	drug name selected and trademarked by the company marketing the drug
89. trough level	the point when a drug is at its lowest concentration
90. z-track	technique used to administer medications intramuscularly that ensures medication does not leak back along the needle track and into the subcutaneous tissue, reducing pain and discomfort
91. Two Teratogenic medications that are commonly prescribed are	accutane and dilantin

92. **name the parts to a needle and syringe (picture included)**



plunger, barrel, needle hub, needle: shaft, bevel, lumen

93. When preparing Insulin to administer in one syringe how do you mix the liquids	Inject air into cloudy, inject air into clear, Pull amount out of clear and then cloudy.
94. length, gauge degrees of intradermal needle	1/4" to 1/2" 25-27gauge 5-15 degrees *usually give 0.5ml or less
95. What is commonly given as an intradermal injection?	Tuberuculin
96. gauge, length and degree for subq injection	25-30 gauge 3/8"-1" 45-90degree angle *3/8"-5/8" most commonly used

97. What three medications are most commonly given subq?	Insulin and heparin and lovenox
98. gauge, length and degree for IM injection	18-15gauge 5/8"-1 1/2" length 72-90 degree
99. Vastus lateralis 5/8" to 1" Deltoid (children) 5/8" to 1 1/4" Deltoid (adults) 5/8" to 1 1/2" Ventrogluteal (adults) 1 1/2"	Which length IM needle length goes where?
100. What type of medication is commonly given IM?	Vaccines
101. how long are you supposed to leave a needle in after injection?	10 seconds *especially for IM Subq it depends on which instructor you talk to intradermal you pull out after finishing injection **even though the book doesn't say to leave the needles in except for the insulin pen
102. genetic influence	may influence drug action amounts of proteins in the body alter pharmacokinetics or pharmacodynamics Exp: acetyltransferase(enzyme)
103. Caucasian men	most drug trials are done on
104. 1993 regulations	required that major clinical drug trials included women
105. OTC	over the counter
106. FDA and CDER	regulate OTC medications
107. education	most important to patients regarding OTC and supplements
108. supplements and herbals	not regulated by FDA
109. falls	A nurse is caring for an elderly client which is the most important safety risk
110. accidental needlestick	health care workers may be exposed to a common occupational injury such as

111. **The nurse is providing postoperative care for a client who has received a prescription for nalbuphine (Nubain) for pain. For which side effects or adverse reactions should the nurse assess this client after administering this medication?**

(Select all that apply.)

1 Oliguria

2 Dry mouth

3 Palpitations

4 Constipation

5 Urinary retention

6 Orthostatic hypotension

2, 3, 4, 6; Dry mouth is a side effect of Nalbuphine HCl . Palpitations are a side effect of Nalbuphine HCl. Constipation is a common side effect of Nalbuphine HCl. Orthostatic hypotension may occur with Nalbuphine HCl. The ability to form urine is not affected; an increased urinary output or frequency may occur. Urinary urgency, not retention, is a reaction to Nalbuphine HCl.