Antipsychotics
Zac, a 25-year-old patient diagnosed with paranoid schizophrenia, has experienced three episodes of psychoses in the past three years. He is currently treated with olanzapine 15 mg daily and has not experienced any delusions in the past eight months. He now has a good understanding of his condition, family relationships have improved and he has started working again. Zac wants to stop his olanzapine because he has been symptom-free and is very concerned about his significant weight gain. There is also a family history of type 2 diabetes.

1. What type of medication is olanzapine?
2. What patient teaching would you give to a client prescribed olanzapine?
3. What assessments are necessary for the nurse to complete for this client?

Opioid Antagonist
Jeffrey Smith is a 17-year-old Caucasian boy who is driven to the emergency department after he collapsed at a party. After examining the patient and talking to others at the party, the physician suspects Mr. Smith has overdosed on oxycodone.

1. The physician orders naloxone (Narcan) 0.2 mg IV at 2-minute intervals. The emergency department has 1-mg/mL vials of naloxone. How many milliliters will the nurse administer per dose?

2. Before naloxone (Narcan) is administered to Mr. Smith, what should be included in the nurse’s preadministration assessment?

3. During the third dose Mr. Smith vomits; how should the nurse handle this situation?

Anticoagulants
Rita Simms is a 28-year-old Caucasian woman. She is being discharged from the hospital today after a recent deep venous thromboembolism. She currently takes Ortho Tri Cyclin Lo for contraception. She is being discharged with a prescription for warfarin (Coumadin) 5 mg with directions to take one tablet daily at 5 p.m. The physician has asked the nurse to complete discharge counseling with Ms. Simms.

1. How often will Ms. Simms need her prothrombin time and international normalized ratio tested?

2. What are the signs of warfarin overdosage?

3. What should Ms. Simms be told about starting new medications?

Cardiotonic and Inotropic Drugs
Mr. Jackson was hospitalized today for heart failure. The physician orders a loading dose of digoxin 0.75 mg to be given intravenously. The digoxin is available in a solution of 0.5 mg/mL.

1. How many milliliters should the nurse prepare?

2. What should the nurse do before administering the IV dose?

3. If digoxin toxicity develops, what signs or symptoms might Mr. Jackson have?

4. How often should Mr. Jackson be monitored for signs of digoxin toxicity?

5. What conditions might increase Mr. Jackson’s likelihood of exhibiting digoxin toxicity?

Antiarrhythmics
Mrs. Simpson was hospitalized today for a ventricular arrhythmia. The physician orders disopyramide (Norpace) to be given orally at a dose of 400 mg per day in divided doses every 12 hours. Mrs. Simpson weighs 176 pounds.

1. How many milligrams should the nurse give Mrs. Simpson in one dose?

2. Procainamide is available in a 200-mg capsule. How many capsules would Mrs. Simpson need per dose?

3. What monitoring should the nurse do while the patient is taking disopyramide (Norpace)?