

## Davis's Drug Guide Scavenger Hunt – 17<sup>th</sup> Edition

***This handout is designed to assist you in locating information in the Davis's Drug Guide. Take advantage of the many resources in this text.***

### **Locate the page or appendix of the following:**

1. Insulins and Insulin therapy: \_\_\_\_\_
2. Information on medication errors and patient safety: \_\_\_\_\_
3. Drug Classifications: \_\_\_\_\_
4. Adult and Pediatric Immunization information: \_\_\_\_\_
5. Pharmacokinetic topics and definitions: \_\_\_\_\_
6. Natural/Herbal products: \_\_\_\_\_
7. How is the medication portion of the drug guide designed to make it easier for drug location? \_\_\_\_\_
8. Locate the reference for Drugs Associated with Increased Risk of Falls in the Elderly: \_\_\_\_\_
9. If you were giving medications through a G-tube, where would you locate the 2-page list of DO NOT CRUSH medications? \_\_\_\_\_

### **Morphine: Which heading/headings in the morphine profile provide(s) information about the following:**

1. Onset, peak, duration of the drug: \_\_\_\_\_
2. How to prepare the drug for IV administration: \_\_\_\_\_
3. Drug-to-drug interactions: \_\_\_\_\_
4. Administration purpose of morphine: \_\_\_\_\_
5. Drug IV compatibilities/incompatibilities: \_\_\_\_\_
6. What to monitor during administration: \_\_\_\_\_
7. Where to locate the ordered dose appropriate for the patient's age/weight: \_\_\_\_\_
8. Respiratory depression information (list all headings that apply): \_\_\_\_\_

### **Answer the following questions as they relate to the specific drug listed:**

1. **pantoprazole (Protonix): (IV push):** How will you reconstitute the Protonix vial for IVP administration? \_\_\_\_\_  
What is the rate for IV push pantoprazole? \_\_\_\_\_
2. **potassium chloride: Continuous infusion:** What is the dilution requirement for this high-alert medication? \_\_\_\_\_

**Peripheral IV line limit:** \_\_\_\_\_

**Central IV line limit:** \_\_\_\_\_

3. **hydromorphone (Dilaudid): Y-site compatibility:** List 2 third-generation cephalosporins that are Y-site compatible with hydromorphone.  
\_\_\_\_\_
4. **lorazepam (Ativan): (IV push):** What are the specific dilution instructions for administering this drug by the IV push route?  
\_\_\_\_\_
5. **heparin: (loading dose):** How will you administer a loading dose of this drug? Be specific: \_\_\_\_\_

**Research the following:**

1. Your patient is ordered methylprednisolone (Solu-Medrol) IV push 40 mg every morning. According to the *Davis Drug Guide*, answer the following:
  - a. Reconstitute with: \_\_\_\_\_
  - b. Your patient is receiving sodium bicarbonate by continuous infusion. Is Solu-Medrol Y-site compatible? \_\_\_\_\_
2. What common primary IV solution is NOT compatible with phenytoin (Dilantin)?  
\_\_\_\_\_
3. Your medical/surgical patient has been admitted with CHF. The patient has a primary IV bag of D5 ½ NSS with 20 mEq of KCL infusing at 80 mL/hr. The patient is also receiving furosemide (Lasix) IV drip (connected to the IVPB port of the primary IV) infusing at 10 mL/hr. The patient is complaining of nausea/vomiting and is ordered ondansetron (Zofran) 4 mg IV push.
  - a. What drugs are infusing through the same IV tubing in question 3?  
\_\_\_\_\_
  - b. Are there any compatibility issues with giving IV push ondansetron (Zofran) with the combination of drugs in question “a”? If so, be specific.  
\_\_\_\_\_

**Utilize *Davis’s Drug Guide* to research the compatibility of the following drug combinations in an IV line.**

**Answer Yes or No to the following combinations of drugs.**

1. Morphine IV and lorazepam IV \_\_\_\_\_
2. Insulin, regular IV and diphenhydramine IV \_\_\_\_\_
3. Digoxin IV and sodium bicarbonate IV \_\_\_\_\_
4. Ondansetron IV and magnesium sulfate IV \_\_\_\_\_
5. Potassium chloride IV and hydralazine IV \_\_\_\_\_

**Locate 2 drugs from *Davis’s Drug Guide* that are listed as *high alert* and explain why:**

1. \_\_\_\_\_
2. \_\_\_\_\_

**CORTICOSTEROIDS:**

1. List the 4 different routes for this group of drugs:  
\_\_\_\_\_
2. If you were giving a corticosteroid by the IV route, which route section would you research?  
\_\_\_\_\_
3. If you were giving fluticasone, which route section would you research?  
\_\_\_\_\_

**INSULINS:**

1. What is the difference in **duration** between regular insulin subcutaneous and regular insulin IV?  
\_\_\_\_\_
2. List the 2 types of insulin glargine and the concentration availability of each one:  
\_\_\_\_\_
3. List 2 insulins that may be mixed with NPH insulin in the same syringe:  
\_\_\_\_\_
4. When mixing NPH with one of the insulins in question 3, which one should be withdrawn in the syringe first?  
\_\_\_\_\_
5. What 2 insulins make up Novolog Mix 70/30?  
\_\_\_\_\_
6. Why would detemir (Levemir) insulin NOT be used for a sliding-scale or coverage insulin?  
\_\_\_\_\_

**MISCELLANEOUS:**

1. What is the only subcutaneous site for enoxaparin (Lovenox)?  
\_\_\_\_\_
2. When giving morphine or hydromorphone (Dilaudid) by IV push, what is the common diluent instruction for these 2 medications?  
\_\_\_\_\_
3. Your patient has been ordered an aminoglycoside IVPB every 8 hr, and a cephalosporin every 12 hr.
  - a. List 2 aminoglycosides that require a peak and trough to monitor blood levels during therapy. \_\_\_\_\_
  - b. What are the 2 restrictions when administering an aminoglycoside and a

cephalosporin concurrently? \_\_\_\_\_

4. Why does a patient taking metformin (Glucophage) need B12 and folic acid monitored every 1–2 years? \_\_\_\_\_
5. What is the most common GI adverse reaction/side effect of narcotics?  
\_\_\_\_\_

### **HEPARIN:**

1. Your patient has been admitted with a venous thromboembolism in the left calf. He has been ordered a continuous heparin IV infusion. Answer the following questions regarding this patient.
  - a. How often should the aPTT level be monitored during early therapy?  
\_\_\_\_\_
  - b. What is the desired outcome of the aPTT level without signs of hemorrhage?  
\_\_\_\_\_
  - c. What is the antidote for heparin in case of toxicity/overdose?  
\_\_\_\_\_
  - d. The patient has been ordered 25,000 units of heparin in a 500-mL bag of D5W to infuse at 1000 units/hr. How many mL/hr will you set the IV pump?  
\_\_\_\_\_

### **ANTIHYPERTENSIVES:**

1. You are giving your 60-year-old male patient metoprolol (Lopressor) PO for hypertension this morning. His blood pressure is 134/75.
  - a. What is the heart rate parameter for the administration of PO metoprolol?  
\_\_\_\_\_
2. A patient is ordered the calcium channel blocker, diltiazem (Cardizem LA). You are to administer 90 mg once daily.
  - a. This patient has difficulty swallowing. Can this pill be crushed? If not, why?  
\_\_\_\_\_
3. A patient is ordered valsartan (Diovan).
  - a. What is the pharmacologic class of this drug?  
\_\_\_\_\_
  - b. What lab values should be monitored with this drug?  
\_\_\_\_\_
  - c. Why is it important to monitor the patient's daily weight with this drug?  
\_\_\_\_\_