

Body System	Drug Class	Prototype Drug (Generic)	Something to Know
Cardiac	Ace	Lisinopril	cough
	Beta Blocker	Metoprolol	blocks beta receptors, hence blocks sympathetic response to low blood sugar, use cautiously with diabetics
	Calcium Channel Blocker	Nifedipine (Procardia)	strongest CCB
		Amlodipine (Norvasc)	pedal edema
	Diuretic	Furosemide	low blood pressure, lowers potassium
	Cardiac Glycoside	Digoxin	hypokalemia potentiates dig toxicity
	Angiotensin Blocker	Losartan (Cozaar)	helps with ventricular remodeling
	Statin	Atorvastatin	liver function tests and no grapefruit juice
	Anticoagulant	Heparin	ptt q 6 hours, check foley for blood; prevents new clot from forming, does not bust existing clots
		Coumadin	pt/INR, GUAIAC, Increase INR: NSAIDs, ASA, many antibiotics; Decrease INR: alcohol barbituates, rifampin, avocados
Low molecular weight	Enoxaparin	daily or BID, often in ortho cases	
Cardiac and Stroke	Tissue Plasminogen Activator	TPA	clot buster, systemic and CTL (tape off ports) Absolute and Relative contraindications systemic use. Absolute: ICH on CT, SAH, previous stroke in 3 mo, HTN > 185, AVM, Aneurysm, Active internal bleeding, Platelets <100,000; Relative: major surgery in past 14 days, recent LP, pregnancy
Pulmonary	Xanthine derivative	Theophylline	leveled drug 10-20 mcg/ml, xanthines are chocolate & coffee, which can increase effects
	Phosphodiesterase (PDE) inhibitor	Sildenafil	used in COPD and Pulmonary hypertension by increasing BP in lungs
	Corticosteroid inhalers	Fluticasone/salmeterol	rinse, can cause thrush, comes in 500/50, 250/50 and 100 mcg/50 mcg
	Non-Corticosteroid bronchodilator	Albuterol & Atrovent	Albuterol (rescue) and atrovent (longer acting), must open airway first
	Xanthine Bronchodilator	Aminophylline	leveled drug 10 - 20 mcg/ml, short-acting drug of theophylline, can lead to arrhythmia
Immunologic / Inflammation	Corticosteroid	Prednisone PO/Prednisolone IV	reduces potassium, thin skin, high glucose, Cushing's Syndrome, taper drug unless used for short-time (sinus)
	NSAID	Ibuprofen PO/Ketorolac IV	renal changes, bleeding, IV ketorolac often limited to 6 doses
Cancer	Antimetabolites	Imuran	mouth ulcers, immunosuppressant
Cancer	Oncology	Vincristine	Pancytopenia, nadir (low point) 7-10 days, recovery 21 days
		Adriamycin	Cardiac-toxic
		Bleomycin	Pulmonary-toxic
Thyroid	Hyperthyroidism	Propylthiouracil and Methimazole	hepatic side-effects including need for liver transplant, often given with radioactive iodine
	Hypothyroidism	Levothyroxine	bone turnover, muscle aches, increased cholesterol
Pain	Narcotics	Morphine, Hydromorphone, Fentanyl, Demerol	gold standard measured against morphine i.e hydromorphone is approx 7.5 X more potent than morphine, demerol produces a metabolite (rarely used) called normeperidine, increase seizures; narcotics decreases respiratory drive, count respirations
	Benzodiazepines	Lorazepam	ETOH protocol, synergistic effects with narcotics and ETOH
	Reversal Drugs	Narcan & Romazicon	Narcan (for narcotics), Romazicon (benzodiazepines)
GI	Nausea	Ondansetron (5-HT3), Compazine (Phenothiazine), Phenergan (Phenothiazine)	Ondansetron shuts off vomiting center in medulla oblongata; the phenothiazines have synergistic effects with narcotics so be careful
	Constipation	Colace, Senna, Miralax	Colace - softener, Senna - Stimulant laxative, Miralax - osmotic laxative
	Diarrhea	Lomotil	do not give with CDIFF
	Proton Pump Inhibitor	Pantoprazole	given before meals for GERD, in hospital used for stress-ulcer prophylaxis, can increase pneumonia
	Histamine Antagonist	Cimetidine, Famotidine	interferes with absorption of other medications

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Antibiotics	Cephalosporins	Ceftriaxone	cross-reactivity with Penicillins, thrush, candida
	Floroquinolones	Ciprofloxacin, Levofloxacin	tendon rupture
	Penicillin-Based	Amoxicillin, Ampicillin	cross allergy with cepalosporins
	Lincosamide	Clindamycin	Black Box: CDIFF
	Sulfa	Bactrim SS or DS	potential cross-reactivity to furosemide
	Tetracycline	Tetracycline, Doxyclyline	Lyme Disease
	Aminoglycoside	Gentamycin	leveled drug, 0.5 - 2 mcg/ml; ototoxic
	Antifungal	Ketonazole	liver toxicity
	Antiviral	Acyclovir	Treats herpes virus infections, including shingles and genital herpes. It can also treat chickenpox. This medication does not cure herpes, but may prevent herpes sores or blisters.
Psychiatric Medications	Typical Antipsychotics	Haloperidol, Thorazine	Extra-pyramidal symptoms (EPS) - dystonia, akathisia, pseudoparkinsonism, tardive dyskinesia; neuroleptic malignant syndrome can occur in typical and atypical (hyperthermia, rigid muscles, rhabdo)
	Atypical Antipsychotics	Abilify, Risperdal, Clozaril	Abilify - drowsiness, constipation; Risperdal - stroke in elders; Clozaril - agranulocytosis
Rescue Medications		Epinephrine	Code: 1 mg IV q 3-5 minutes, no limit, used in cardiac arrest and anaphylaxis, can cause arrhythmia and hypertension
		Transexamic Acid	trauma medication to stop bleeding, caution with renal patients and bleeding problems, trauma benefit within first 3 hours; used in cardiac surgery; side -effect arrhthmia, hypertension, pulmonary edema
Neurologic	ICP	Mannitol	Cushing's Triad: Hypertension, Bradycardia, irregular breathing; vesicant
	Triptan	Sumatriptan	vasoconstriction, chest pain as migraines occur as a vasodilative process
	Multiple Sclerosis	Avonex, Betaseron, Copaxone	flu-like symptoms, immunosuppression; avoid live vaccines
	Myasthenia Gravis	Pyridostigmine Bromide (Mestinon)	Tensilon test (muscles stronger +), side-effects Mestinon: sweating
	Parkinsons	Sinemet, Cogentin, Azilect	Sinemet: cardidopa/levodopa, drug holiday, dopamine; Cogentin: anticholinergic; Azilect: MAOI - no tyramine, can lead to malignant hypertension, treats bradykinesia and stiffness
	Seizures	Phenytoin Depakote	leveled drug 1-2 mcg/ml, pH of bleach, run through a running line, gingivitis, protein-bound, hypoalbuminemia = low dilantin level; corrected Used in epilepsy, bipolar and migraines, leveled drug 50-125 mcg/ml; side effects liver toxicity, suicidal ideation, pancreatitis
Gout	Xanthine oxidase inhibitor	Allopurinol	decreases uric acid, uric acid is increased during cell death due to cancer or cancer treatments
Osteoporosis	Biophosphonate	Alendronate	must be standing up for 30 minutes once per week, does not build bone, prevents additional bone degradation, may cause stomach or esophagus upset
Diabetes	Oral Agents	Metformin, Glipizide	Metformin held prior to contrasting CT scan r/t buildup of lactic acid; peaks in 4-8 hours; glipizide peaks in 1-3 hours;
	Insulin (onset, peak, duration)		
	Rapid-acting	Humalog/Novolog	Onset: 10-30 minutes, Peak 30 minutes- 3 hours, Duration 3-5 hours
	Short	Regular	Onset: 10-30 minutes, Peak 2-5 hours, Duration up to 12 hours
	Intermediate	NPH	Onset: 1.5 - 4 hours, Peak 4-12 hours, Duration up to 24 hours
	Long	Lantus	Onset: 3 to 4 hours, minimal peak, Duration up to 24 hours
GU Medications	Alpha-blocker	Tamulosin	treat BPH, typically given at night due to peak concentration increased when on an empty stomach, floppy iris syndrome
	Alpha-adrenergic Blocker	Prazosin	used to treat PTSD, BPH, pheochromocytoma