MEDICATION PROFILE

Pat	ient			ID	#				Pharmacy	Phone		
Height		Weight	MF	D.	0.B.				Pharmacy Address			
Alle	rgies			Ph	one							
DX								Physician	Phone			
Dates Reviewed//////						/		-			/	
											in the second	
A S/E C/I D/I A	CNS Stimula muscles, dec of GI tract, st. Anorexia, and dizziness, dry polyuria, pros Gilaucoma, ai Use with cau Antihypertens Gilaucoma, ai Use with cau Antihypertens Acute adrena disorders, et dirsuitism, hy latent diabete thromboemb nasal irritation Systemic fun S/E, psychoti Oral anticoag skin test antig thromboemb nasal irritation Systemic fun migraine/vass Bleeding and Ni/I/D, pruriti disturbances damage, hyp Acute intoxic agents: ceret Raynaud's diditational candidisturbances damage, hyp Acute intoxic agents: ceret Raynaud's diditational candidisturbances damage, hyp Acute intoxic agents: ceret Raynaud's diditational candidisturbances damage, hyp Acute intoxic agents: ceret Raynaud's diditational candidisturbances damage, hyp Company (all control candidisturbances) and control candidisturbances damage, hyp company (all control candidisturbances) and control candidisturbances damage, hyp	nt, increase myocardi reased insulin output mooth muscle relaxatiely, blood dyscrasias mouth, dyspepsia, d'tatitis, seizures, sexuxiety, tension, agitatition: Uninary retention sives, MAO inhibitors, of immune response ea it insufficiency, anxiety ema, electrolyte imbergiven, hypergiven, hypergiven, hypergiven, hypergiven, hypergiven, hypergiven, electrolyte,	nasal deconges on. Methylphenic chest pain, con suria, flushing, h. (dysfunctions, s.m., hypertension hepatic disease tricyclic antidep treatment of hyp cataracts, CHF ance, erectile dysion, ictus, imm teatment of the control of th	tion, appetite suppress atte and atomovetine istipation, CV collapse, eadache, insomnia, chincter spasm, tachy, seizure disorders, EE: ressants, caffeine, othersessitivity, inflamma Colitis, Cushingoid sysfunction, esophagitis une suppression, incresses, and consideration of the control of the collitis, cough, decisease. Caution for paranol, barbiturates, pheotransmitters responsinatory, Antipyretic classion, dizziness, dry nordrome (only in child certigo. Acetaminophetic anticoagulants (with himbitors, neuroleptic anticoagulants (with himbitors, neuroleptic anticoagulants (with himbitors, neuroleptic anticoagulants, barbiturates, rues, cardiac arrest, cone, itching, nausea, prition, visual disturbancostruction, seizures, judants, barbiturates, rues, fecal impactions, mental depression, rin renal failure, laxativsphotemia, osteomal calciuruira. Gli hemorif	sion, pupillal ans calming as calming as calming are as calming are also as calming are adrenergication, adrenced as a calming as a cal	ical changes, diaphoresis, NV, palpitations, paresthesia ors, urinary retention, weight letitles, history of drug abuse. cs/CNS stimulants, SSRIs. CORTICOSTEROID cortical insufficiency), pression, dermatological gastritis, glaucoma, headachte, insormia, insulin resistantitis, peptic ulcer, retinopathill, sensation, dry mouth, epist preexisting conditions noted in pin, potassium-depleting dn ANALGESIC Some agents specific for the, hearing loss, hemorrhage 6), sedation, seizures, sleep oed dyscrasias, flushing, hepisto, or opioids. Antimigraine, TIA, hepatic or renal impairribiturates, carbamazepine, f APAP), zidovudine, caffeine, ANALGESIC / NARCOTIC condary actions include CNS astipation, decreased libido, ndence, respiratory depressic, in cystimatic on the condary actions include CNS astipation, decreased libido, ndence, respiratory depressic, in the condary actions include CNS astipation, decreased libido, ndence, respiratory depressic, in the condary actions include CNS astipation, decreased libido, ndence, respiratory depressic, in the condary actions include CNS astipation, decreased libido, ndence, respiratory depressic, in the condary actions include CNS astipation, decreased libido, ndence, respiratory depressic, in the condary actions include CNS astipation, decreased libido, ndence, respiratory depressic, in the condary actions include CNS astipation, decreased libido, ndence, respiratory depressic, in the condary actions include CNS astipation, decreased libido, ndence, respiratory depressic, in the condary actions include CNS astipation, decreased libido, ndence, respiratory depressic, in the condary actions include CNS astipation, decreased libido, ndence, respiratory depressic, in the condary actions include CNS astipation, decreased libido, ndence, respiratory depressic, in the condary actions include CNS astipation, decreased libido, ndence, respiratory depressic, in the condary actions include CNS astipation, decreased libido, ndence, action, action, action, action, action, action, action, act	tillity itility p.sss. 2 p.s. ce, yy, yaxis, n ugs, satic ment, y 4	C/I D/I A S/E C/I D/I A S/E C/I D/I A S/E	inhibition of cyclo-oxygenase a Reduces pain. Abdominal pain, agitation, alop bone thinning, bruises, catarac fatulence, gastric bleeding or I damage, N/V, neutropenia, per I damage, N/V, neutropenia, per Contraceptive pills, alcohol, welding and the Contraceptive pills, alcohol, weldingoxin, phenytoin, carbamaze Growth of microorganism is infor cell wall synthesis. Abdominal pain, anaphylaxis, a dizziness, dyspepsia, dysuria, ilipodystrophy, N/V/D, neuropat clera icterus, taste disturbance Blood dyscrasias, psychoses. Imyasthenia gravis, hypersensit Antibiotics, oral anticoagulants antacids. Consult references for the contraction of the contraction, tachylbradycardia, u Arrhythmia, bowel obstruction, seizure disorders. Enhanced by tricyclic antidepressants, nitrat Arrhythmia, bowel obstruction, seizure disorders. Enhanced by tricyclic antidepressants, nitrat corricosteroids, haloperidol, in Armantadine, phenothiazines, tribodod dyscrasias, powel ulcera Vitamin K-rich foods may decri Many drug interactions. Consultamin K-rich	ANTIARTHRITIC / ANTIGOUT and prostaglandin synthesis of prostaglandin. Antiinflammatory effects caused by and prostaglandin synthesis. TNF blockers reduce inflammatory and immune responseria, armythmias, asthenia, blurred vision, bone marrow suppression, ts, chest pain, CHF, cough, deafness, diabetes, dizziness, drowsiness, edema, ulcers, headache, hematologic changes, hematuria, hypertension, liver or kidney icarditis, pupura, rash, retinal detachment, rhinitis, tachycardia, tinnitus, upper resp dalimumab: CNS disturbances, GI dysfunction, GU infections, malignancies. arfarin resistance, allopurinol, NSAID's, lasix, antacids, ferrous sulfate, barbituates, spine, methotrexate, theophylline. ANTIBIOTIC / ANTIBACTERIAL hibited as a result of inhibition of folic acid production or mucoprotein anemia, anorexia, anuria, asthenia, confusion, conjunctivitis, depression, dermatitis flatulence, headache, hematologic changes, hematuria, increased BUN, jaundice, thy, oliguria, pancreatitis, photodermatitis, photosensitivity, proteinuria, psychosis, se, urticaria, vaginitis. Quinolones: cardiac changes — prolonged QTI. Use caution with asthma, renal and hepatic disease, convulsive disorders, tivity to other medications. Cefditoren: carnitine deficiency, milk protein hypersens or additional drug interactions. ANTICHOLINERGIC mpathetic neuroeffector sites; affects intestinal motility, relaxes specific muscles, or perspiration, constipation, drowsiness, dry mouth & throat, dysuria, headache ado bod temperature, mydriasis, NV/D, nervousness, palpitations, photophobia, ra minary hesitancy. CNS side affect can resemble delirum. glaucoma, hepatic/renal disease, myasthenia gravis, megacolon, prostatch hyper, se, procaliamide, quinidine and MAO inhibitors. Increases intraocular pressure wi creases adverse reactions of digitalis, cholinergics, levodopa, neostigmine. ricyclic antidepressants, ethanol. ANTICOAGULANT rombin to thrombin, decreased renal flow, GI bleed, heavy menstrual flow, altion, leukopenia, NV/D, rash, rhiniti	y onse. 10 10 11 12 12	
C/I	purpuric erup	ain, dizziness, eryther itions, rash, tachycard ity, pregnancy, childro	ia, weakness.	art failure, hypertensio	n, N/V, orth	ostatic hypotension,		A	Mechanisms of action differ for eating disorder, adjunctive to p	r each drug. Treatment of depressions, bipolar disorders, obsessive compulsive dis	-	
	D/I Anlihypertensives, sildenaffi, ethanol. ANTIANXIETY / SEDATIVE HYPNOTIC (Miscellaneous)						7	S/E	Consult literature for full S/E pri dizziness, drowsiness, dry mou	rofile. Agitation, anticholinergic effects, BP changes, cardiac changes, diarrhea, uth, headaches, impaired motor skills, jaundice, libido changes, nausea,		
G/I	 BP changes, cardiac changes, dizziness, drowsiness, dry mouth, fatigue, GI effects, headache, hematological changes, psychiatric/behavior problems, respiratory depression, suicidal tendencies, urinary incontinence/retention, visual disturbances, withdrawal or rebound syndrome when discontinued. Renal, hepatic and respiratory impairment. Severe cardiac disease, pregnancy, lactation, glaucoma, diabetics, hyperthyroidism. Avoid rapid parenteral administration/extravasation. Potential for chemical dependency/abuse. Use with elderly or children. 							C/I D/I F/I	lactation, children, electroconvulsive therapy, allergy, hypersensitivity, cardiac disease/CHF, liver dysfunction. CNS depressants, other antidepressants, drugs metabolized in the liver, alcohol (see specific category/agent for additional D/l). Tyramine rich foods for MAOI inhibitors. NOTE: Refer to the Psychiatric Med Profile for MAOI, tricyclic and other depressants not covered by this classification.			
F/I	theophylline, antiamhythmics, cardiac glycosides, anticonvulsants, anticoagulants. F/I Food may delay absorption and onset of sedation for some agents.						_	A		ANTIDIABETIC gent. Blood sugar is controlled through increasing sensitivity to insurance increasing sensitivity to insurance increasing sensitivity to insurance increasing sensitivity and division an	15	
NOTE: Refer to Psychiatric Med Profile for barbiturates and other antianxiety drugs not covered by this classification ANTIARRHYTHMIC Mechanisms of action vary, decreasing or stabilizing the electrical conduction in the heart. This results in decreased heart rate, myocardial contraction, blood pressure, AV node conduction, oxygen demand, and/or dilation of coronary arteries/arterioles. S/E Abdominal pain, anorexia, bitter taste, brochoconstriction, cardiac changes or arrhythmia, CHF, chills, CNS, depression, diaphoresis, disturbances, dizziness, dry mouth, dyspnea, dysuria, facial paralysis, fatigue, fever, flatulence, headacthe, hepatic damage, hypersensitivity, hypotension, myalgia, NV/D, palpitations, rash, syncope,							8 d ary	S/E C/I D/I	hematologic changes, hepatic toxicity, increased sensitivity to light, itchy skin, jaundice, lactic acidosis, metallic taste, NV/, parasthesia, rash, severe hypoglycemia, swelling of hands and feet, weakness. Hypersensitivity, acidosis, hepatic or renal disease, pregnancy, cardiac disease, SIADH. Metformin: adrenal or pituitary insufficiency, elderly, debilitated, malnourished patients, inflammatory bowel disease, intestinal obstruction. Avoid ethanol. Anticoagulants, MAO inhibitors, beta blockers, corticosteroids, glaucoma meds, aspirin, probenecide. Other drugs can enhance hyperglycemia effects and result in hypoglycemia when stopped or reduce effectiveness.			
C/I D/I	tinnitis, urinary retention or frequency, vertigo, visual changes, weakness. Also: amiodarone — altered liver enzymes, alveolitis, angioedema, arhralgia, back pain, corneal microdeposits. Dofetilide — edema, extrapyramidal symptoms, gynecomastia, hepatic dysfunction, photosensitivity, pneumonitis, UTI. Qunidine — acute asthma, angioedema, blood dyscrasias, respiratory arrest. Verapamil — pulmonary edema. Aortic stenosis, AV block, CHF, cardiogenic shock, sick sinus syndrome, hepatic or renal impairment, hypersensitivity to similar agents, pregnancy, lactation. Concomitant use of ketoconazole, cimetidine, or verapamil with dofetilide is contraindicated. Vary with each class. Acetazolamide, antacids, antiarrhythmics, antihypertensives, barbiturates, beta blockers, calcium channel blockers, carbamazepine, cimetidine, cholestyramine, cisapride, cyclosporine, digoxin, haloperidol, lithium, neuromuscular blockers, nifedipine, phenytoin, rifampin, theophylline, thiazide diuretics, urinary acidifiers and							A S/E C/I D/I	GI obstruction. Use with caution in geriatric and pediatric patients and with convulsive disorders.			
									Ci	71 Contraindications/interactions Consult index for neroavorug interactions. NOTE: lassifications are not inclusive of all actions, side effects, contraindications and intera LL Patient medications have been reviewed for potential adverse effects and drug re		

ALL Patient medications have been reviewed for potential adverse effects and drug reactions, ineffective drug therapy, significant side effects, significant drug interactions, duplicate drug therapy, noncompliance with drug therapy and proper dosage on the dates recorded.

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