

Applied Drug Therapy Homework

Homework #3

Case 1

As a new health care provider to a 60-bed skilled-nursing facility you are reviewing the medical record of a newly admitted resident. B.J. is a 78-year-old male who has resided there for the past 2 months. He was admitted to the facility from home because of declining health and his inability to care for himself. He had suffered a 20 pound weight loss over the preceding 6 months (wt on admission 68 kg) with general decline in health. Synopsis of past medical history. It is noted that at least 3 different primary physicians have cared for B.J. in the last couple of years:

1. "long history" of heart disease and failure
2. hypertension
3. Non-insulin dependent diabetes
4. Peptic ulcer disease
5. constipation
6. osteo arthritis
7. insomnia
8. Transient ischemic attacks
9. dementia, possible organic brain syndrome
10. dizziness and syncope with falls
11. Incontinence

Current Medications:

Digoxin 0.125mg 1 po QD
Aldoril-25 (methyldopa 250mg+hydrochlorothiazide 25mg)
Naproxyn Sodium (Naprosyn) 250mg TID
Aspirin 325mg PO QD
Dipyridamole 25mg PO TID
Glyburide 10mg PO TID
Thioridazine (Mellaril) 25mg PO TID
Ranitidine 150mg PO BID
Omeprazole (Prilosec) 20mg PO QD
Metoclopramide 10mg PO AC and HS
Benzotropin (Cogentin) 1mg BID
Oxybutrin (Ditropan) 5mg TID
Amitriptyline 25mg PO HS
Docusate Sodium 100mg PO BID
Diphenhydramine 25mg PO HS
MOM 30ml HS prn constipation
Chlorazepate (Tranxene) 15mg PO TID prn anxiety
Ibuprofen 200mg PO QID prn pain or headache

Labs since Admission:

Na – 138 (135-145 mEq/ml)
K – 3.0 (3.5 – 5.0 mEq/ml)
Cl -121
CO₂ – 26
BUN – 33 (9-20 mg/dl)
Creatinine – 2.2 (0.6 – 2.0 mg/dl)
Albumin – 2.3 (3.2-5.2gm/dl)
Total Protein – 5.5
Calcium – 8.9 (8.9 – 10.1mg/dl)
PO₄ -
Blood Glucose – 245 (70-130mg/dl)

B.J. is ambulatory and receives his meals in the facility cafeteria. Although he is in no acute distress, nurses' notes indicate that B.J. is often confused and complains of intermittent dizziness when ambulating. B.J.'s BP and pulse is recorded less than daily and ranges between 105-125 over 65-72, with a pulse between 52 and 61. No other daily vital information is ordered or done.

Identify 5 different medication regimen concerns, which need to be evaluated. Briefly discuss your plan of action which will need to be considered (at some point) for solutions to these potential problems. It will be understood that all of these changes will not happen at once or that definite final doses will be known. **(two points for each problem and 1 point for each rational solution).**

Potential problem identified	Solution/Plan of action

Case 2

K.S. is a 79-year-old female, lives at home alone on a modest retirement income. She suffers from 4 chronic medical problems for which she see different specialist and take several prescription medications. She maintains an active social life, hosting and visiting her elderly friends regularly and attends the seniors' congregate meal site program three times a week. She admits a high interest in matters pertaining to her health and also voices a concern as to the cost of her monthly prescription drug bill. She frequently self-medicates with nonprescription medications and other "home remedies" she hears about through her network of senior friends.

What specific difficulties might be encountered by a health care provider who needs to obtain a complete drug history in patients like K.S.? What specific medication regimen characteristics would you likely "quiz" K.S. about? List 3. **(10 points)**.