Drug	Use and dosage	Side effect	Teaching and labs	contraindication
Naloxone HCJ (Narcan) Opioid antagonist. Onset 12 min N; 2-5 mins. SQ or IM Duration 1 hr. N; up to 4 hrs. IM but start to diminish after 20 mins.	□ Competes with opioids at the opiate receptor sites, blocking the effects of the opioids □ Reverses effects of opiates, including respiratory depression, sedation and hypotension. □ May need given every few hours until the opioids has dropped to a nontoxic level	Side effects: Increased BP, HR, hyperpnea tremors, hyperventilation, drowsiness, nervousness N/V Adverse effects/toxicity: Hypotension, Vtach and Vfib convulsion, hepatitis pulmonary edema,	Watch vital signs and respiratory function closely with administration of medication Titrate dose slowly-if too much is given the client will swing from a state of intoxication to one of withdrawal	Avoid use with: Known allergy Respiratory depression dit non- opioids Substance abuse (may lead to withdrawal symptoms)
Nedocromil (Tilade) Inhaled non- steroidal medication arti-inflammatory and antiasthmatic. (also available as optic form – for ocular allergic conjunctivitis)	asthma prophylaxis NOT for acute asthma attacks up to a week for full effectiveness Must be taken regularly to be effective	Adverse effect: abnormal bitter taste N/V, HA, dizziness, sore throat.	Rinse mouth after taking medication to avoid dry mouth Do not use for acute attack Non-compliance is a concern due to bitter taste	Avoid use with: acute bronchospasm or status asthmaticus. Hypersensitivity Use with caution: hepatic or renal function

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Leonarda A. Laskevich

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theory evidence based practice and patient centered care in all settings With illustrated step by step guidelines this book makes it easy to learn important skills and procedures Care plans are presented within a nursing process framework that is coordinated with clinical judgement and case studies show how to apply concepts to nursing practice From an expert author team led by Patricia Potter and Anne Perry this bestselling nursing textbook helps you develop the understanding and clinical judgment you need to succeed in the classroom and in your career **Leadership Commitments to Improve Value in** Health Care Institute of Medicine, Roundtable on Evidence-Based Medicine, J. Michael McGinnis, W. Alexander Goolsby, LeighAnne Olsen, 2009-07-27 This volume reports on discussions among multiple stakeholders about ways they might help transform health care in the United States The U S healthcare system consists of a complex network of decentralized and loosely associated organizations services relationships and participants Each of the healthcare system's component sectors patients healthcare professionals healthcare delivery organizations healthcare product developers clinical investigators and evaluators regulators insurers employers and employees and individuals involved in information technology conducts activities that support a common goal to improve patient health and wellbeing Implicit in this goal is the commitment of each stakeholder group to contribute to the evidence base for health care that is to assist with the development and application of information about the efficacy safety effectiveness value and appropriateness of the health care delivered

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