

ATI Hematologic System Drugs Questions (107 Terms) with Answers Latest Update 2023.

QUIZ: What administration considerations apply to warfarin? -

CORRECT ANS:

Administer orally.

Measure baseline vital signs and prothrombin time (PT), reported as an international normalized ratio (INR).

Monitor INR; recommend reduced dosage for an INR above 2 to 3, depending on condition being treated, and an increased dosage for an INR below this range

Monitor PT/INR daily initially and eventually every 2 to 4 weeks.

Expect anticoagulant effects to take 8 to 12 hr, with the full therapeutic effect in 3 to 5 days.

Increase PT monitoring for clients who take drugs that interact with warfarin.

QUIZ: What are adverse drug reactions associated with warfarin? -

CORRECT ANS:

Hemorrhage

Toxicity (overdose)

QUIZ: What is the brand/trade name for warfarin? - **CORRECT ANS:**

Coumadin

QUIZ: What instructions should be provided for a client taking warfarin?

- **CORRECT ANS:**

Stop taking the drug for signs of hemorrhage.

Report bruising, petechiae, hematomas, or black tarry stool immediately.

Wear medical identification indicating warfarin use.

Avoid excessive alcohol ingestion.

Tell clients to record the dosage, route, and time of warfarin administration on a daily basis.

Make sure clients watch for and report signs of bleeding (bruising, gums bleeding, abdominal pain, nosebleeds, coffee-ground emesis, tarry stools).

Tell them not to take over-the-counter NSAIDs, especially aspirin, or drugs containing salicylates.

Advise them to use an electric razor for shaving and a soft toothbrush.

QUIZ: What contraindications are there for the use of warfarin? -

CORRECT ANS:

Pregnancy risk - teratogenic

Vitamin K deficiency

Thrombocytopenia

Liver disease

Alcoholism

Uncontrollable bleeding

During lumbar puncture, regional anesthesia, or surgery that involves the brain, eyes, or spinal cord

Threatened spontaneous abortion

QUIZ: What are potential interactions for warfarin? - **CORRECT ANS:**

Heparin, aspirin, acetaminophen (Tylenol), glucocorticoids, sulfonamides, and parenteral cephalosporins increase anticoagulation.

Phenobarbital (Luminal), carbamazepine (Tegretol), phenytoin (Dilantin), oral contraceptives, and vitamin K decrease anticoagulation.

Excessive intake of foods high in vitamin K, such as dark green leafy vegetables including cabbage, broccoli, and Brussels sprouts, mayonnaise, canola, and soybean oils decrease anticoagulation. Warfarin interacts with many other prescription and over-the-counter drugs, foods, and herbals, so clients should check with their primary care provider and pharmacist to make sure no other interactions apply.

QUIZ: What interventions should be planned for a client taking warfarin? - **CORRECT ANS:**

Monitor vital signs, checking for hypotension and tachycardia.

Check hematocrit and blood counts.

For warfarin overdose, stop the drug and administer vitamin K parenterally, usually IV.

Administer vitamin K to promote synthesis of coagulation factors VIII, IX, X, and prothrombin.

Administer IV vitamin K slowly and in a diluted solution to prevent serious reactions.

Administer small doses of vitamin K (2.5 mg by mouth, 0.5 to 1 mg IV) to prevent development of resistance to warfarin.

If vitamin K cannot control bleeding, administer fresh frozen plasma or whole blood.

QUIZ: What precautions are there for the use of warfarin? - **CORRECT**

ANS:

Hemophilia

Increased capillary permeability

Dissecting aneurysm

Peptic ulcer disease

Severe hypertension

Severe hepatic or renal disease

QUIZ: What are the therapeutic uses for warfarin? - **CORRECT ANS:**

Prevention of venous thrombosis, pulmonary embolism during atrial fibrillation

Prevention of thromboembolism in clients who have prosthetic heart valves

Prevention of recurrent myocardial infarction and transient ischemic attacks

QUIZ: What administration considerations apply to

heparin/enoxaparin? - **CORRECT ANS:**

Measure baseline vital signs, CBC, platelet count, and hematocrit.

Administer subcutaneously or IV, usually every 12 hr.

Use an infusion pump for continuous IV administration; monitor rate of infusion every 30 to 60 min.

Monitor aPTT every 4 to 6 hr initially, then monitor daily. (Enoxaparin does not require aPTT monitoring.)

Keep aPTT at one and a half to two times the baseline value.

Administer deep subcutaneous injections in the abdomen at least 2 inches from the umbilicus and rotating sites; apply moderate pressure for 1 to 2 min after injection, do not rub.

QUIZ: What are adverse drug reactions associated with

heparin/enoxaparin? - **CORRECT ANS:**

Bleeding/hemorrhage

Thrombocytopenia (low platelet count)

Hypersensitivity reactions

Neurological injury (from hematoma formation during lumbar puncture, epidural anesthesia)

QUIZ: What is the brand/trade name for enoxaparin? - **CORRECT ANS:**

Lovenox

QUIZ: What instructions should be provided for a client taking heparin/enoxaparin? - **CORRECT ANS:**

Report bruising, petechiae, hematomas, or black tarry stools.

Report calf pain, tenderness, or swelling immediately.

Report shortness of breath.

Report itching, rash or hives.

Avoid use of OTC NSAIDs and aspirin

Advise them to use an electric razor for shaving and a soft toothbrush.

QUIZ: What contraindications are there for the use of heparin/enoxaparin? - **CORRECT ANS:**

Uncontrollable bleeding

Severe thrombocytopenia

During lumbar puncture, regional anesthesia, or surgery that involves the brain, eyes, or spinal cord

Threatened spontaneous abortion

QUIZ: What are potential interactions for heparin/enoxaparin? -

CORRECT ANS:

NSAIDs, aspirin and antiplatelet drugs increase bleeding risk.

IV nitroglycerin reduces anticoagulation.

Protamine reverses heparin activity.

Herbals ginger, ginkgo biloba, feverfew, and evening primrose oil increase bleeding risk.

QUIZ: What interventions should be planned for a client taking heparin/enoxaparin? - **CORRECT ANS:**

Monitor vital signs, checking for hypotension and tachycardia.

Monitor activated partial thromboplastin time (aPTT), making sure it is no higher than twice the baseline value.

For heparin overdose, stop heparin and administer protamine, which binds with heparin to form a heparin-protamine complex that has no anticoagulant properties.

Administer IV protamine no faster than 20 mg/min or 50 mg in 10 min.

Monitor platelet count periodically throughout treatment, especially in the first month.

Stop heparin for platelet counts below 100,000/mm³ and administer a non-heparin anticoagulant, such as lepirudin (Refludan).

Administer a small test dose first.

Monitor for itching and rash or hives

Monitor spinal insertion site for signs of hematoma formation, such as bruising or swelling.

Monitor sensation and movement of lower extremities.

QUIZ: What precautions are there for the use of heparin/enoxaparin? -

CORRECT ANS:

Hemophilia

Increased capillary permeability

Dissecting aneurysm

Peptic ulcer disease

Severe hypertension

Severe hepatic or renal disease

QUIZ: What are the therapeutic uses for heparin/enoxaparin? -

CORRECT ANS:

Anticoagulation for evolving cerebrovascular accident, pulmonary embolism, massive deep-venous thrombosis

Adjunct therapy during angioplasty, open-heart surgery, hemodialysis, blood transfusion

Prophylaxis for postoperative venous thrombosis and pulmonary emboli

Acute myocardial infarction (with thrombolytic therapy)

Ischemic complications of unstable angina and some dysrhythmias

Disseminated intravascular coagulation

QUIZ: What administration considerations apply to clopidogrel? -

CORRECT ANS:

Give daily dose orally, with or without food.

Check platelet counts periodically.