

FORMULARY

Aspirin

Class of Drug	Analgesic, antipyretic, salicylate.
Mechanism of Action	Reduction of platelet aggregation in patients with ACS and subacute cardiovascular disease. Though its effects are varied, aspirin's primary function in the emergency care setting is to reduce blood coagulability as a means of preventing acute coronary syndromes (ACS) and improving outcomes in from ACS events.
Indications	Acute Coronary Syndrome
Contraindications	Hypersensitivity to aspirin or other nonsteroidal anti-inflammatories. Recent history of GI bleed, intracranial bleed, or history of bleeding disorder.
Adverse Effects	GI: Dyspepsia, thirst, nausea/vomiting, GI bleeding and/or ulceration. SENSORY: Tinnitus (sign of toxicity), vertigo, reversible hearing loss, visual changes. HEMATOLOGIC: Prolonged bleeding time. INTEGUMENTARY: Urticaria, angioedema, anaphylaxis.
Precautions	Use caution in patients with asthma, nasal polyps, or nasal allergies. Not recommended as an antipyretic for children and teenagers. Use caution in severe liver damage, hypoprothrombinemia, vitamin K deficiency, or surgical patients.
Dosing/Administration	Acute Coronary Syndrome: 162-325 mg PO X 1.
Pregnancy Category	Class D Unsafe – evidence of risk that may be justifiable in certain circumstances