



Active Learning Template medication-2

Nursing Pharmacology (Keiser University)

STUDENT NAME _____

MEDICATION aspirin (acetylsalicylic acid, Acuprin, ASA)

REVIEW MODULE CHAPTER _____

CATEGORY CLASS antipyretics, nonopioid analgesics // salicylates

PURPOSE OF MEDICATION**Expected Pharmacological Action**

Produce analgesia and reduce inflammation and fever by inhibiting the production of prostaglandins. Decreases platelet aggregation.

Therapeutic Use

Analgesia. Reduction of inflammation. Reduction of fever. Decreased incidence of transient ischemic attacks and MI.

Complications

EENT: tinnitus. GI: GI BLEEDING, dyspepsia, epigastric distress, nausea, abdominal pain, anorexia, hepatotoxicity, vomiting. Hemat: anemia, hemolysis. Derm: rash, urticaria. Misc: allergic reactions including ANAPHYLAXIS and LARYNGEAL EDEMA.

Medication Administration

Prevention of Myocardial Infarction/Antiplatelet effects
 PO (Adults): 80 – 325 mg once daily Suspected acute MI-160 mg as soon as MI is suspected.
 PO (Children): 3–10 mg/kg/day given once daily (round dose to a convenient amount).
 Pain/Fever
 PO, Rect (Adults): 325–1000 mg q 4–6 hr (not to exceed 4 g/day). Extended-release tablets—650mgq8hror800mgq12hr.
 PO, Rect (Children 2 – 11 yr): 10 – 15 mg/kg/dose q 4 – 6 hr; maximum dose: 4 g/ day.
 Inflammation
 PO (Adults): 2.4 g/day initially; increased to maintenance dose of 3.6 – 5.4 g/day in divided doses (up to 7.8 g/day for acute rheumatic fever).
 PO (Children): 60–100 mg/kg/day in divided doses (up to 130 mg/kg/day for acute rheumatic fever).
 Prevention of Transient Ischemic Attacks
 PO (Adults): 50 – 325 mg once daily.

Contraindications/Precautions

Contraindicated in: Hypersensitivity to aspirin or other salicylates; Cross-sensitivity with other NSAIDs may exist (less with nonaspirin salicylates); Bleeding disorders or thrombocytopenia; Pedi: May increase risk of Reye's syndrome in children or adolescents with viral infections.

Nursing Interventions

Patients who have asthma, allergies, and nasal polyps or who are allergic to tartrazine are at an increased risk for developing hypersensitivity reactions.

Pain: Assess pain and limitation of movement; note type, location, and intensity before and at the peak (see Time/Action Profile) after administration.

Fever: Assess fever and note associated signs (diaphoresis, tachycardia, malaise, chills).

Interactions

May increase the risk of bleeding with warfarin, heparin, heparin-like agents, thrombolytic agents, dipyridamole, ticlopidine, clopidogrel, tirofiban, or eptifibatide, although these agents are frequently used safely in combination and in sequence.

Increases anticoagulant effect and bleeding risk with arnica, chamomile, clove, feverfew, garlic, ginger, ginkgo, Panax ginseng, and others.

Client Education

Instruct patient to take salicylates with a full glass of water and to remain in an up-right position for 15 – 30 min after administration.

Advise patient to report tinnitus; unusual bleeding of gums; bruising; black, tarry stools; or fever lasting longer than 3 days.

Caution patient to avoid concurrent use of alcohol with this medication to minimize possible gastric irritation; 3 or more glasses of alcohol per day may increase risk of GI bleeding. Caution patient to avoid taking concurrently with acetaminophen or NSAIDs for more than a few days, unless directed by health care professional to prevent analgesic nephropathy.

Evaluation of Medication Effectiveness

Increase in BP.

Increase in peripheral circulation.

Increase in urine output.