

ANSWERS

High Alert and Emergency Drugs

1. Answer: Hypotension

Rationale: Severe hypotension may indicate excessive vasodilation from IV amiodarone and must be reported immediately.

2. Answer: Increase in heart rate to 80 bpm

Rationale: Atropine blocks parasympathetic stimulation, increasing heart rate in bradycardia.

3. Answer: Administer calcium gluconate as prescribed

Rationale: These are signs of magnesium toxicity; calcium gluconate is the antidote.

4. Answer: Hold the dose and notify the physician

Rationale: Pulse <60 bpm and nausea indicate possible digoxin toxicity; hold and report.

5. Answer: (naloxone) Narcan

Rationale: Naloxone (brand name Narcan) is an opioid antagonist — meaning it reverses the effects of opioids such as morphine, fentanyl, oxycodone, hydromorphone, heroin, etc.

6. Heparin - Protamine sulfate

Warfarin - Vitamin K

Opioid - Naloxone

Benzodiazepine - Flumazenil

Digoxin - Digoxin immune Fab



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7. Acetaminophen (Tylenol) overdose - N-acetylcysteine (Mucomyst)

Magnesium sulfate toxicity - Calcium gluconate

Iron overdose - Deferoxamine (Desferal)

Beta blocker overdose - Glucagon

Calcium channel blocker overdose - Calcium chloride or calcium gluconate

8. Cyanide poisoning - Hydroxocobalamin (Cyanokit)

Methanol or ethylene glycol (antifreeze) - Fomepizole or ethanol

Insulin-induced hypoglycemia (conscious patient) - Oral glucose or juice

Insulin-induced hypoglycemia (unconscious patient) - Glucagon IM or 50% dextrose IV (D50W)

