

ACTIVE LEARNING TEMPLATE: *Medication*

STUDENT NAME _____

MEDICATION Acetylsalicylic acid (Aspirin)

REVIEW MODULE CHAPTER _____

CATEGORY CLASS Antipyretics, non-opioid analgesics

PURPOSE OF MEDICATION

Expected Pharmacological Action

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

Therapeutic Use

Inflammatory disorders including: Rheumatoid arthritis and Osteoarthritis.
Mild to moderate pain.
Fever.
Prophylaxis of transient ischemic attacks and myocardial Infarct (MI).
Unlabeled use: Adjunctive treatment of Kawasaki disease.

Complications

Tinnitus.
Gastrointestinal BLEEDING, dyspepsia, epigastric distress, nausea, abdominal pain, anorexia, hepatotoxicity, and vomiting.
Anemia and hemolysis.
Drug rash and urticaria.
Misc: allergic reactions including ANAPHYLAXIS and LARYNGEAL EDEMA.

Contraindications/Precautions

Discontinue if Gastro-intestinal bleeding and or allergic reactions ensue following its administration.

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.
Ibuprofen: may negate the cardioprotective antiplatelet effects of low-dose aspirin.
May increase risk of bleeding with cefoperazone, cefotetan, and valproic acid.
May increase activity of penicillins, phenytoin, methotrexate, valproic acid, oral hypoglycemic agents, and sulfonamides.
Increases GI Irritability with other NSAIDS

Evaluation of Medication Effectiveness

Relief of mild to moderate discomfort.
Increased ease of joint movement. May take 2–3 wk for maximum effectiveness.
Reduction of fever.
Prevention of transient ischemic attacks.
Prevention of MI.

Medication Administration

Per Oral
Rectal

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).

Client Education

Instruct patient to take salicylates with a full glass of water and to remain in an upright position for 15–30min 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.

Teach patients on a sodium-restricted diet to avoid effervescent tablets or buffered- aspirin preparations.