

	Should be part of the care	Should not be part of the care	
Observe for dyskinesia in the next few days	☒ ✗	☐ ✓	✗
Impact of medication should occur in 1-4 weeks	☐ ✓	☐ ✗	✓
Change client's position slowly	☐ ✓	☒ ✗	✗
Report discolored urine as an adverse reaction	☒ ✗	☐ ✓	✗
Encourage a high protein, nutrition diet	☒ ✗	☐ ✓	✗
Will improve dysphagia immediately	☐ ✗	☒ ✓	✓
Administer medication with snack	☒ ✓	☐ ✗	✓

Your answer is partially correct.

Debriefing: Client's who receive carbidopa levodopa should eat a low protein diet and should receive the medication with a meal or snack to prevent gastrointestinal upset. The dyskinesia, which indicates an adverse reaction, takes weeks or months and will not be noted soon in treatment. The medication effects usually take 1-4 weeks, and the dysphagia will not improve immediately. Dark-colored urine and perspiration are benign side effects and do not require reporting to the healthcare provider. Because of potential hypotension, the client's position should be monitored and changed slowly.

Consider:

1. What additional medications might this client have received for Parkinson's Disease prior to the carbidopa-levodopa?
2. Describe dystonic movements associated with antiparkinsonian medications. How are they managed?
3. What cues of Parkinson's Disease should be evaluated as improving following treatment with carbidopa-levodopa?

Before answering this question, review the client's health information in the EHR. **Complete the sentence using the drop-down menus.**

The nurse should anticipate that the dose of the lansoprazole   should be discontinued   based on the level of the RBC   which is low  .

Your answer is partially correct.

Debriefing: The dose of warfarin should be increased because the INR level is low. Clients at risk for clotting, for example, this client who has a history of deep venous thrombosis and pulmonary embolism and receives an anticoagulant to prevent further occurrences. The optimal INR for clients on warfarin is 2-3.5. The client's INR is low, and the dose should be increased.

You have correctly selected 1.

Consider:

1. What other studies are used to assess bleeding times and the effectiveness of anticoagulants?
2. How often are INR levels monitored in clients on warfarin?
3. What nursing care is required of clients on anticoagulants?
4. What risks are associated with increased bleeding times?

The correct answer is:

The nurse should anticipate that the dose of the [warfarin] should be [increased] based on the level of the [INR] which is [low].