DM2 Meglitinides - Repaglinide (Prandin) Cheat Sheet

by Drosario19 via cheatography.com/144803/cs/31340/

Mediation Name

Repaglinide

Prandin

Therapeutic Use

Type 2 diabetes mellitus

Adverse Drug Reactions

Hypoglycemia

Nausea, Vomiting

Nursing Interventions

Monitor for signs of hypoglycemia (diaphoresis, tachycardia, fatigue, excessive hunger, tremors).

If the client is conscious, give glucose orally in either pill form, glass of orange juice, 2–3 tsp of sugar, honey, or corn syrup dissolved in water.

If the client is not conscious, give intravenous glucose; give parenteral glucagon if IV not available

Check the client’s blood glucose every 15–20 minutes.

Continue treatment until the blood glucose has returned to the expect- ed reference range and the client is no longer symptomatic.

Monitor for persistent nausea, vomiting, or diarrhea.

Monitor CBC levels

Drug Administration

Give orally 30 min or less before meals, usually three times a day

Tell clients to skip a dose if they skip a meal and to add a dose if they add a meal.

Do not exceed 4 doses a day.

Patient Education

Wear a medical alert bracelet.

Watch for and report symptoms of hypoglycemia.

Test blood glucose to confirm.

If hypoglycemia occurs, advise patient to take a glass of orange juice or 2–3 tsp of sugar, honey, or corn syrup dissolved in water (glucose, not table sugar, if taking miglitol), and notify health care professional.

Retest in 15 to 20 min and repeat treatment if still low.

Carry a carbohydrate snack at all times.

Lie down when feeling nauseated.

Consume adequate carbohydrates.

Contraindications

Diabetic ketoacidosis

Liver, kidney, and endocrine disorders

Precautions

Renal or hepatic dysfunction

Systemic infection

Older adults

Use of alcohol, NSAIDs, warfarin, loop diuretics, and anabolic steroids

Interactions

Gemfibrozil (Lopid), erythromycin, and chloramphenicol increase hypo- glycemic effects.

Alcohol, corticosteroids, and rifampin decrease hypoglycemic effects.

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