Home Health VNA IV Medication Clinical Fact Sheet

IV Medication: _	Epoprostenol / Veletri / Flolan	Risk Level: 1
Med Class:	Prastacyclin Vasodilator	_
		Pulmonary arterial hypertension;
		scleroderma 2nd to PAH; Raynaud's
	Common Uses:	disease; anticoagulations with CVVHD
	Labs to Monitor:	BUN, Cr, LFTs
		Requires specialized training for assigned nurse. Must be initiated it the hospital; pre-d/c teaching re med adverse effects, precautions to be reinforced in home; responsible caregiver required; given as continuous infusion, back up pump required, peripheral IV start kit should be present in the home in case of line failure; check that pump alarms are audible; interruptions in infusion can cause rebound pulm htn or R ventricular failure; draw blood from differel line; DO NOT FLUSH LINE. If line fails, start peripheral line and send to ED. Adverse Reactions: N/V, H/A, hypotension, flushing, chest pain, anxiety, dizziness, bradycardia, dyspnea, abd pain, MS pain, tachycardia. Caution when given with diuretics, antihypertensives, vasodilators, antiplatelet agents or anticoagulants, digoxin (dig
	Instructions/Precautions:	toxicity)
	First Dose Allowed:	N
	Central Line Only:	Y
	IV Push:	N
	Vesicant:	N
		See PDR.net document for complete drug
	See Procedure Manual:	information
	Only drugs listed as First Dose Allowed may be given in the home as a first dose and are	
	onsidered for a first dose on a case by case basis by the IV Program Manager	
Tł	ne IV Manager and/or Clinical Director must be c	onsulted before a first dose referral is accepted
Risk Levels:	n/a = Routinely given; Clinician must be approved to administer IV medications 1= IV Program Mgr or Clinical Director approval before referral is accepted 2= IV Program Mgr notification; Clinicians must review Special Instructions	