Nursing Process Focus:
Patients Receiving Chlorpromazine (Thorazine)

### Assessment
Prior to administration:
- Obtain complete health history, especially of mental illness, respiratory, gastrointestinal, genitourinary disorders, alcohol and illegal drug use. Include blood studies: electrolytes, CBC, BUN, creatinine, HCG levels if indicated, and drug screens (for use of illegal drugs.)
- Obtain patient’s drug history to determine possible drug interactions and allergies.

### Potential Nursing Diagnoses
- Ineffective Therapeutic Regimen Management
- Risk for Activity Intolerance, related to side effect of drug
- Deficient Knowledge, related to drug action and side effects
- Constipation, related to decreased intestinal motility
- Risk for Injury, related to drug effects

### Planning: Patient Goals and Expected Outcomes
The patient will:
- Experience relief of positive symptoms of schizophrenia, and relief of manic symptoms in patients with schizo-affective disorder.
- Demonstrate an understanding of the drug’s action by accurately describing drug side effects and precautions, and measures to take to decrease any side effects.
- Adhere strictly to the recommended treatment.
- Abstain from alcohol and illegal drug use.
- Immediately report any occurrence of any adverse reactions.

### Implementation

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<thead>
<tr>
<th>Interventions and (Rationales)</th>
<th>Patient Education/Discharge Planning</th>
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<tbody>
<tr>
<td><em>Monitor for EPS and NMS. Medications may be available to treat EPS. (Presence of EPS may be sufficient reason for patient to discontinue chlorpromazine; NMS is life-threatening and must be reported and treated immediately.)</em></td>
<td>Teach patient and family to:</td>
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<td>• Recognize tardive dyskinesia, dystonia, akathesia, pseudoparkinsonism.</td>
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<td>• Recognize and seek treatment immediately for elevated temperature, unstable blood pressure, profuse sweating, dyspnea, muscle rigidity, and incontinence.</td>
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<td><em>Monitor for “cheeking”, hoarding or sharing medication. Observe patient closely for noncompliance. (If therapeutic results are not seen, patient may not be taking medication as ordered, even though he/she may appear to be taking it.)</em></td>
<td>Teach patient/family:</td>
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<td>• Importance of taking medication exactly as ordered, and not sharing it with anyone.</td>
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<td>• How to check to be sure patient has swallowed medication.</td>
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<td><em>Observe for side effects such as orthostatic hypotension, constipation, anorexia, GU problems, respiratory changes, visual disturbances. (These side effects are caused by the anticholinergic effects of chlorpromazine.)</em></td>
<td>*Inform patient that impotence, gynecomastia, amenorrhea or enuresis may occur. Instruct patient:</td>
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<td>• To change position and arise slowly.</td>
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<td>• Do not to drive a car until he/she is stabilized on chlorpromazine and sedating effects are known.</td>
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- To report vision changes.
- To comply with required laboratory tests as ordered, e.g. Thorazine levels, electrolytes, CBC, BUN, and creatinine.
- To increase roughage in diet, increase fluids, and increase exercise to decrease or avoid constipation.

**Monitor for use of medication.** (Medication must be gradually withdrawn over a 2-3 week time, or patient may experience nausea/vomiting, dizziness, tremors, or dyskinesia.)

Instruct patient:
* To continue taking the medication as ordered, even if no therapeutic benefits are felt.
* That it may take 6 weeks-6 months for full therapeutic benefits.

**Monitor patient for respiratory depression, laryngospasm, dyspnea.**

Instruct patient that if any respiratory symptoms occur, their health care provider must be notified.

**Monitor for caffeine use.** (Caffeine will cause a decreased therapeutic response of chlorpromazine.)

Instruct patient to avoid caffeine in common products containing caffeine, including: coffee, tea, carbonated beverages, and chocolate.

**Monitor patient’s environment.** (Chlorpromazine may cause patient to perceive brownish discoloration of objects or photophobia. Chlorpromazine may also interfere with the body’s ability to regulate body temperature.)

Instruct patient to:
* Wear dark glasses to avoid discomfort from photophobia.
* Avoid temperature extremes.

**Observe for evidence of alcohol/illegal drug use.** (The patient may use alcohol/illegal drugs as means as coping with symptoms of psychosis.)

Instruct the patient to refrain from alcohol/illegal drug use.

**Evaluation of Outcome Criteria**
Evaluate the effectiveness of drug therapy by confirming that patient goals and expected outcomes have been met (see “Planning”).