**Nursing Process Focus:**
**Patients Receiving Propranolol (Inderal)**

### Assessment
Prior to administration:
- Assess for cardiac arrhythmias, including supraventricular tachycardia, ventricular tachycardia, and tachycardia secondary to digoxin toxicity.
- Assess for chest pain, palpations, vital signs (initially and throughout therapy.)
- Obtain complete health history, including, allergies, cardiac, endocrine, depressive disorders. Include the following blood studies: CBC, electrolytes, glucose, cardiac enzymes.
- Compare EKG at baseline to throughout therapy.
- Obtain patient’s drug history to determine possible drug interactions and allergies.

### Potential Nursing Diagnoses
- Risk for Injury, related to dizziness secondary to decreased blood pressure
- Ineffective Tissue Perfusion, ineffective, related to decreased cardiac output related to arrhythmia
- Impaired Gas Exchange, related to side effects of drug
- Deficient Knowledge, related to drug action and side effects

### Planning: Patient Goals and Expected Outcomes
The patient will:
- Demonstrate a change in heart rhythm.
- Exhibit a decrease in cardiac arrhythmias.
- Demonstrate expected outcomes of drug therapy and list reportable side effects.
- Maintain adequate tissue perfusion.

### Implementation

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<th>Interventions and (Rationales)</th>
<th>Patient Education/Discharge Planning</th>
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| *Monitor for cognitive dysfunction and depression in the elderly, as well as hallucinations and psychosis (more likely with higher doses.) (These reactions appear to be related to the lipid solubility of this medication and its ability to cross the blood-brain barrier.) | Advise patient:  
  - regarding potential cognitive side effects.  
  - to report any signs of depression to the health care provider. |
| *Monitor for proper medication use. (Abrupt discontinuation of medication may cause myocardial infarction, severe hypertension and ventricular arrhythmias because of a potential rebound effect.) | Instruct patient to:  
  - never discontinue the medication abruptly and to take the medication exactly as prescribed.  
  - take the medication even if feeling well.  
  - take pulse prior to taking the medication. If pulse is irregular, instruct patient to withhold medication and contact the health care provider immediately. |
| *Monitor for hypotension. (Medication may cause hypotension.) | *Instruct patient to change position slowly to avoid postural hypotension. |
lower blood pressure as a result of decreased cardiac output.)

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<th>Avoid dizziness.</th>
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*Monitor for hypoglycemia. (There is an increased incidence of hypoglycemia in patients with Type I Diabetes Mellitus because this medication may inhibit glycogenolysis.)

| Instruct patients with Type I Diabetes Mellitus:  
  - to check blood sugar regularly.  
  - to report unusually low blood sugar reading to the health care provider. |

*Monitor for diarrhea. (This side effect may be related to the medication’s effect on the vascular smooth muscle receptors.)

| *Instruct patient to take medication with food to decrease GI upset. |

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<th><strong>Evaluation of Outcome Criteria</strong></th>
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<td>Evaluate the effectiveness of drug therapy by confirming that patient goals and expected outcomes have been met (see “Planning”).</td>
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