**Nursing Process Focus:**
Patients Receiving Verapamil (Calan)

<table>
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<tr>
<th>Assessment</th>
<th>Potential Nursing Diagnoses</th>
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</thead>
<tbody>
<tr>
<td>Prior to administration:</td>
<td>• Risk for Injury, related to dizziness secondary to hypotension</td>
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<tr>
<td>• Assess for dysrhythmias, heart rate, and radial pulse (initially and throughout therapy.)</td>
<td>• Impaired Gas Exchange, related to side effects of drug</td>
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<tr>
<td>• Obtain complete health history, including allergies, especially cardiac, renal, liver and respiratory diseases including blood studies: BUN, creatinine, liver function tests.</td>
<td>• Decreased Cardiac Output, related to hypotension and bradycardia secondary to side effects of drug</td>
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<tr>
<td>• Obtain patient’s drug history to determine possible drug interactions and allergies.</td>
<td>• Risk for Imbalanced Nutrition, related to nausea secondary to drug</td>
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**Potential Nursing Diagnoses**

- Risk for Injury, related to dizziness secondary to hypotension
- Impaired Gas Exchange, related to side effects of drug
- Decreased Cardiac Output, related to hypotension and bradycardia secondary to side effects of drug
- Risk for Imbalanced Nutrition, related to nausea secondary to drug

**Planning: Patient Goals and Expected Outcomes**

The patient will:
- Demonstrate relief of shortness of breath and dizziness.
- Exhibit expected outcome of drug therapy and list reportable side effects.
- Demonstrate blood pressure monitoring and pulse measurement prior to drug.
- Remain free of physical injury.
- Maintain adequate nutritional status.

**Implementation**

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<th>Interventions and (Rationales)</th>
<th>Patient Education/Discharge Planning</th>
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| *Observe for side effects such as hypotension and bradycardia. (Verapamil causes a decrease in total peripheral resistance which can significantly lower blood pressure. Bradycardia can result because Verapamil slows SA and AV node conduction.) | Instruct patient:  
  • to take own blood pressure prior to taking medication.
  • if blood pressure is less than 90/60, hold medication and notify the health care provider immediately. |
| *Monitor for signs of pulmonary edema and shortness of breath (related to dilation of the coronary arteries.) | *Advise patient to notify health care provider of any breathing difficulties. |
| *Monitor serum liver enzymes level (Verapamil may cause an elevation in liver enzymes.) | *Instruct patient concerning the importance of having lab work done because medications may cause severe liver damage. |
| *Monitor BUN and creatinine levels (Verapamil may cause renal damage.) *Monitor intake and output. | Instruct patient:  
  • concerning the importance of having lab work done because medications may cause severe renal and kidney damage.
  • to report changes in urinary output to the health care provider. |
| *Monitor bowel pattern for occurrence of constipation. (Verapamil often causes nausea and constipation.) | Advise patient:  
- to take medication with food if gastric distress is a problem.  
- to maintain regular bowel habits. Advise patient to increase fruits and fiber in the diet. |
|---|---|
| *Observe for signs of digoxin toxicity. (Causes increased digoxin and quinidine levels when used with diltiazem.) | Instruct patient:  
- to notify health care provider of all medications taken.  
- to notify health care provider of change in cardiac rhythm. |

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