

## NURSING CONSIDERATIONS

### Assess:

- Culture before treatment is initiated; cultures of blood, urine, and throat may all be taken; CMV not confirmed by this method; diagnosis made by ophthalmic exam

**Black Box Warning:** Renal, hepatic, increased hemopoietic studies, BUN; serum creatinine, AST, ALT, creatinine, CCr, A-G ratio, baseline and drip treatment, blood counts should be done q2wk; watch for decreasing granulocytes, Hgb; if low, therapy may have to be discontinued and restarted after hematologic recovery; blood transfusions may be required, renal failure can occur also, Fanconi syndrome

- For GI symptoms: severe nausea, vomiting, diarrhea; severe symptoms may necessitate discontinuing product
- Electrolytes and minerals: calcium, phosphorus, magnesium, sodium, potassium; watch closely for tetany during 1st administration

**Black Box Warning: Blood dyscrasias** (anemia, granulocytopenia); bruising, fatigue, bleeding, poor healing; leukopenia, neutropenia, thrombocytopenia: WBCs, platelets q2days during 2x/day dosing and every wk thereafter; check for leukopenias with daily WBC count in patients with prior leukopenia, with other nucleoside analogs, or for whom leukopenia counts are  $<1000$  cells/mm<sup>3</sup> at start of treatment

- Allergic reactions: flushing, rash, urticaria, pruritus
- Monitor serum creatinine or CCr at least q2wk; give only to those with creatinine levels  $\leq 1.5$  mg/dL, CCr  $>55$  mL/min, urine protein  $<100$  mg/dL

**Black Box Warning: Pregnancy/breast-feeding:** may cause fetal harm; use only if benefits outweigh fetal risk; do not use in breastfeeding

### Evaluate:

- Therapeutic response: decreased symptoms of CMV

### Teach patient/family:

- To notify prescriber if sore throat, swollen lymph nodes, malaise, fever occur; may indicate other infections
- To report perioral tingling, numbness in extremities, paresthesias; report rash immediately, mental/vision changes, urinary problems, abnormal bleeding
- **That serious product interactions may occur if OTC products are ingested; check with prescriber**
- That product is not a cure but will control symptoms
- That regular ophthalmic exams, renal studies must be continued
- That major toxicities may necessitate discontinuing product
- **To use contraception during treatment, that infertility may occur, and that men should use barrier contraception for 90 days after treatment**

### TREATMENT OF OVERDOSE:

Discontinue product; use hemodialysis; increase hydration

## ▲ HIGH ALERT

### cilostazol (Rx)

(sih-los'tah-zol)

*Func. class.:* Platelet aggregation inhibitor

*Chem. class.:* Quinolinone derivative

**ACTION:** Multifactorial effects (anti-thrombotic, antiplatelet vasodilation)

**USES:** Intermittent claudication associated with PVD

**CONTRAINDICATIONS:** Hypersensitivity, acute MI, active bleeding conditions, hemostatic conditions

**Black Box Warning:** HF

**Precautions:** Pregnancy, breastfeeding, children, geriatric patients, previous