UPON COMPLETION OF THIS SECTION, THE STUDENT SHALL BE ABLE TO:

- counsel patients on the potency of antineoplastic agents and the importance of taking them exactly as prescribed.
- counsel patients on the special dietary and fluid requirements associated with cancer chemotherapy.
- demonstrate the proper application of 5-FU topical preparations.
- discuss the benefit of Lupron combination therapy.
- calculate the dose reduction of Imuran if allopurinol is added to the drug regimen.
- counsel the patients on compliance with drugs that are necessary to take along with other chemotherapy drugs.
- caution patients about OTC products, which may have important drug interactions with prescription drugs.
- discuss the various glucocorticoids and compare their glucocorticoid and mineralocorticoid potencies.

DRUG LIST

<table>
<thead>
<tr>
<th>5-FU (topical forms)</th>
<th>Leucovorin calcium</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arimidex</td>
<td>Leukeran</td>
</tr>
<tr>
<td>Aromasin</td>
<td>Lupron</td>
</tr>
<tr>
<td>Casodex</td>
<td>Megace</td>
</tr>
<tr>
<td>CellCept</td>
<td>Methotrexate</td>
</tr>
<tr>
<td>Cytoxan</td>
<td>Nolvadex</td>
</tr>
<tr>
<td>Femara</td>
<td>Nystatin</td>
</tr>
<tr>
<td>Imuran</td>
<td>Prednisone</td>
</tr>
</tbody>
</table>
**5-Fluorouracil**  
Antimetabolite  
1% Cream: Fluoroplex for topical use  
5% Cream: Efudex  
Cream: proper application  
Also solution for scalp  
Correct period of administration  
Compliance: avoid sun, eyes  
Used IV for CA of colon, rectum, breast, stomach, and pancreas

**Casodex**  
Prostate CA treatment  
Antiandrogen at target tissue  
Possible warfarin interaction  
Role of Lupron  
Both agents should be started together  
Do not D/C without consulting prescriber  
Compare with Eulexin

**Cytoxan**  
Alkylating agent: cross-links DNA  
Take with water (2 to 3 L/d)  
Adverse effect: hemorrhagic cystitis  
Compare with Leukeran

**Imuran**  
Immunosuppressive  
Allopurinol interaction: (1/2 dose of Imuran by 3/4 to 1/4 of original dose)  
Report sore throat  
No live vaccines  
AZT/azathioprine confusion  
Many uses: kidney transplant rejection, lupus, RA, Crohn’s disease

**Leucovorin Calcium**  
Folinic acid, not folic acid!!  
The active form  
Leucovorin rescue after high-dose MTX  
PO use with folic acid antagonists

**Lupron**  
LH-RH agonist  
Continuous use results in decrease in LH & FSH  
Estrogen & testosterone production are decreased  
Indicated for endometriosis & prostate CA  
Comply with appointments for injection

**Megace**  
Two different uses  
Tablets  
Liquid (40 mg/mL)  
Dose: 800 mg/day for appetite stimulant  
New formulation: MegaceES

**Methotrexate (MTX)**  
Resembles folic acid; antagonist  
Drug interactions (OTC & Rx): avoid salicylates & NSAIDs  
Caution: Sulfonylureas  
Avoid sunlight  
Compliance with blood tests  
Checkup for liver tests  
Different indications/dosage ranges

**CA, psoriasis, RA**  
PO taken once a week, at 12-hr intervals

**Nolvadex (Tamoxifen)**  
Breast CA, women or men  
Potent antiestrogen  
Take with food  
Check history for other Rxs containing estrogen products (interaction)  
Potential for hot flashes  
Compare with Arimidex, Femara, Aromasin

**Nystatin (oral, topical, and vaginal)**  
Oral: S-S (swish and swallow or spit): thrush  
Shake, then place liquid in buccal areas of both sides of mouth  
Retain in mouth as long as possible  
Continue for 2 days postasymptomatic  
Commonly included in “magic mouthwash” formulas

**Prednisone**  
Glucocorticoid with some mineralocorticoid activity  
Take with food or milk  
Compliance with scheduled doses  
High doses should be tapered down  
Compare potency with other glucocorticoids  
Compare PO mineralocorticoid activity with other glucocorticoids (methylprednisolone, dexamethasone, triamcinolone)  
Potential for hyperglycemia  
Potential for osteoporosis (long-term use)
QUESTIONS TO BE ANSWERED IN PREPARATION FOR CHAPTER 5 LAB

- Describe the mechanism of action of Lupron.
- In a community pharmacy, how should the label be typed for the following prescription? Megace Suspension Sig: 800 mg Q.D.
- A patient takes 1 tablespoonful of Megace Suspension daily. How many milligrams of active ingredient is she taking on a daily basis?
- If a physician prescribes 5-FU cream to be used on the skin, which product would you dispense?
- What is the equipotent dose of dexamethasone PO to prednisone 20 mg PO?
- If a doctor wanted to switch a patient from 10 mg of prednisone a day to methylprednisolone, what would the dose be for the methylprednisolone?
- How many milligrams of active drug are contained in each tablet of methotrexate?
- A prescription is written for MTX 7.5 mg PO weekly. How would you advise the patient concerning the dosing intervals?
- Explain the counseling for the administration of nystatin suspension for the treatment of oral candidiasis (thrush).
- Compare the action of azathioprine (Imuran) with that of CellCept.
- How many milligrams of active drug are contained in each Eulexin capsule?
- What is the advantage of Casodex over Eulexin?
- A patient is taking four Imuran 50-mg tablets daily. The physician adds a new product, Zyloprim, 300 mg once daily. What should be the new Imuran dose?
- What is the difference between azathioprine and Purinethol (6-MP)?
- A person taking Premarin is given a new prescription for Nolvadex. What is the outcome if they are taken concurrently?
- Why would folic acid not be appropriate for use as “leucovorin rescue” therapy with high-dose MTX therapy?
- What is the pharmacologic difference between folic acid and folinic acid?
- Your client is taking PO Cytoxan. He is at risk for which adverse effect? How much water should he drink each day to minimize the risk for the adverse effect?
- How does Megace suspension differ from MegaceES suspension?
### 5.1

<table>
<thead>
<tr>
<th>Pt. Name: Cynthia Smith</th>
<th>Gender: F</th>
<th>Address: 894 West Rd.</th>
<th>Weight: 140</th>
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</thead>
</table>

#### MEDICATION

<table>
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<tr>
<th>SIG.</th>
<th>PRESCRIBER</th>
<th>ORIG. DATE</th>
<th>REFILL DATE</th>
<th>REFILL DATE</th>
<th>REFILL DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bentyl 20 mg #90</td>
<td>1 qid for abdominal pain</td>
<td>Thomas</td>
<td>8/3</td>
<td>8/30</td>
<td>9/28</td>
</tr>
<tr>
<td>Antivert 12.5 mg #40</td>
<td>1 qid prn dizziness</td>
<td>Thomas</td>
<td>8/29</td>
<td>9/7</td>
<td></td>
</tr>
<tr>
<td>Laxix 40 mg #100</td>
<td>1 bid</td>
<td>Thomas</td>
<td>9/7</td>
<td>9/3</td>
<td>10/5</td>
</tr>
<tr>
<td>Ex-Lax Choc. #60</td>
<td>1 to 2 at bedtime</td>
<td>OTC</td>
<td>8/5</td>
<td>8/5</td>
<td>8/29</td>
</tr>
<tr>
<td>Hypotears 15 mL</td>
<td>2 drops qid to ou</td>
<td>OTC</td>
<td>8/5</td>
<td>8/5</td>
<td>8/29</td>
</tr>
</tbody>
</table>

---

**Dr. Erin Thomas**  
988 North Ridge, New York, NY 88364  
813-555-7554  

Name: Cynthia Smith  
Date: 10/5  
Address: 894 West Rd.  
Age: 59

---

**Preparation: 50 mg**  
Prep by S. Smith (PCC)  

---

**Inflamaze Forte 18**:  
10 cc  
BID  

Name: Cynthia Smith  
Refills: 3  

---

**Dr. Erin Thomas**  
988 North Ridge, New York, NY 88364  
813-555-7554

Name: Cynthia Smith  
Date: 10/5  
Address: 894 West Rd.  
Age: 59

---

**Inflamaze Forte 18**:  
10 cc  
BID  

Refills: 3  

---

**Dr. Erin Thomas**
### 5.2 Pt. Name: Michael Murphy

<table>
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<th>REFILL DATE</th>
<th>REFILL DATE</th>
<th>REFILL DATE</th>
<th>REFILL DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Claritin-D 24 #30</td>
<td>1 qd</td>
<td>Griffin</td>
<td>8/8</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Rx:**

```
FLUTAMIDE 25 mg
1 P.O. q30 min
#100

Dr. Doug Griffin
```

**Name:** Michael Murphy  
**Date:** 8/10  
**Address:** 2 Tallahassee Ct.  
**Age:** 67

---

**Refills 2**

---

**Dr. Doug Griffin**

7611 147th Terrace, Monterey, CA 38411  
705-555-6644

---

**Name:** Michael Murphy  
**Date:** 8/10  
**Address:** 2 Tallahassee Ct.  
**Age:** 67

---

**Tylenol C Codeine Elixir 20 cc P.O. q4h PRN Disp. 1 pint.**

**Refill 3 Times**

---

**Dr. Doug Griffin**

7611 147th Terrace, Monterey, CA 38411  
705-555-6644
**Pt. Name:** Diane Myers  
**Gender:** F  
**Address:** 6 Pennsylvania Ave. NW  
**Age:** 46  
**Weight:** 138

<table>
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<th>REFILL DATE</th>
<th>REFILL DATE</th>
<th>REFILL DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ativan 1 mg #100</td>
<td>1 hs</td>
<td>Stace</td>
<td>8/10</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amoxil 500 mg #4</td>
<td>4 caps 1 h before appt.</td>
<td>Ely, DDS</td>
<td>1/6</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DiaBeta 2.5 mg/C</td>
<td>1 qd</td>
<td>Stace</td>
<td>3/5</td>
<td>6/8</td>
<td>10/24</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Dr. Howard Isaacs**  
1115 Turnaround Lane, Detroit, MI 64789  
343-555-7000

**Name:** Diane Myers  
**Date:** 11/5  
**Address:** 6 Pennsylvania Ave. NW  
**Age:** 46

**Refills:** 0

---

**Dr. Marilyn Zoeller**  
45 Alabama Place, Detroit, MI 64789  
343-555-7771

**Name:** Diane Myers  
**Date:** 11/5  
**Address:** 6 Pennsylvania Ave. NW  
**Age:** 46

**Refills:** 0

---

**5.3a**

---

**5.3b**
# Chapter 5: Drugs for Neoplastic Disorders

## 5.4 Pt. Name: Patricia Anderson  Gender: F  Age: 69  
### Address: 564 Capitol Ave.  Weight: 130

### Allergy: NKA

<table>
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<tr>
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<th>REFILL DATE</th>
<th>REFILL DATE</th>
<th>REFILL DATE</th>
<th>REFILL DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>HCTZ 25 #C</td>
<td>1 q am</td>
<td>Robins</td>
<td>4/12</td>
<td>5/15</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Premarin 0.625 #C</td>
<td>1 qd</td>
<td>Robins</td>
<td>4/10</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

### Prescription

Dr. David Knowles  
555 Tea Rose Trail, Miami, FL 44718  
463-555-0098

Dr. Calvin Robins  
7823 Tea Rose Trail, Miami, FL 44718  
463-555-8000

<table>
<thead>
<tr>
<th>Name</th>
<th>Patricia Anderson</th>
<th>Date</th>
<th>Address</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Patricia Anderson</td>
<td>Date</td>
<td>Address</td>
<td>Age</td>
</tr>
</tbody>
</table>

R

*Note: Handwritten notation*

1. *Rx*

2. *Nolvasper 10 mg 10/10  D3 Refill 3  
   Dr. David Knowles*

3. *R x 150 mg  7/0  0/1  #3  
   Dr. Calvin Robins*
Pt. Name: John Johnson
Gender: M
Address: 321 West Rd.
Age: 68
Dx: Actinic keratosis
Allergy: Sulfa

Levaquin 500 #14 bid X 7d
Tessalon Perles 100 mg #15 1 qid

Dr. Erin Thomas
988 North Ridge, New York, NY 88364
813-555-7554

Name John Johnson     Date 10/12
Address 321 West Rd.  Age 68

Rx

Ludex 5% cream
BID x 2 wk

Refills 0

Dr. Erin Thomas

Rx

Triamcinolone Acetonide  0.5% HP cream
15g BID

Refills 0

Dr. Erin Thomas

5.5
5.5a 5.5b
### 5.6

<table>
<thead>
<tr>
<th>MEDICATION</th>
<th>SIG.</th>
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<th>REFILL DATE</th>
<th>REFILL DATE</th>
<th>REFILL DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percocet 5/325 #C</td>
<td>2 q 4 h</td>
<td>Griffin</td>
<td>8/21</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Soma 350 mg #100</td>
<td>1 hs</td>
<td>Griffin</td>
<td>6/23</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Pt. Name:** Mary Schmidt  
**Gender:** F  
**Address:** 566 East Ct.  
**Age:** 72  
**Dx:** CA, HTN  
**Allergy:** NKA  
**Weight:** 118  
**Smoker:** NKA  

**Dr. Doug Griffin**  
7611 147th Terrace, Monterey, CA 38411  
705-555-6644

- **Name:** Mary Schmidt  
- **Date:** 8/30  
- **Address:** 566 East Ct.  
- **Age:** 72  
- **Refills:** 0

---

### 5.6a

Dr. Doug Griffin

---

### 5.6b

Dr. Jay Mack

52 West Drive, Monterey, CA 38411  
705-555-3321

- **Name:** Mary Schmidt  
- **Date:** 8/29  
- **Address:** 566 East Ct.  
- **Age:** 72  
- **Refills:** 0

---

Dr. Jay Mack

---

**Refills** 3

**Label**

**Refill** times
Pt. Name: Lester Kelly  
Gender: M  
Address: 23 South St.  
Weight: Average  
Age: 55  
Dx: Gout, Crohn's disease  
Allergy: NKA

<table>
<thead>
<tr>
<th>MEDICATION</th>
<th>SIG.</th>
<th>PRESCRIBER</th>
<th>ORIG. DATE</th>
<th>REFILL DATE</th>
<th>REFILL DATE</th>
<th>REFILL DATE</th>
<th>REFILL DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Zyloprim 300 mg #C</td>
<td>1 q am</td>
<td>Blank</td>
<td>4/12</td>
<td>7/20</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Xanax 0.25 #60</td>
<td>1 q hs</td>
<td>Blank</td>
<td>6/18</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Dr. Alfred Sauls
151212 S. High Rd., Chicago, IL 23875
954-555-1300

Name: Lester Kelly  
Date: 7/30  
Address: 23 South St.  
Age: 55

Dr. Neil Blank
201 Baker St., Chicago, IL 23875
954-555-0001

Name: Lester Kelly  
Date: 7/31  
Address: 23 South St.  
Age: 55

Refills 0  

Dr. Alfred Sauls

Refill 3 times

Dr. Blank
### 5.8

<table>
<thead>
<tr>
<th>Pt. Name: Benjamin Meyer</th>
<th>Gender: M</th>
<th>Address: 145 North Ave.</th>
<th>Weight: 144</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age: 79</td>
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</table>

#### Medications

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<th>Refill Date</th>
</tr>
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<tbody>
<tr>
<td>Antivert 25 mg #C</td>
<td>tid</td>
<td>Johns</td>
<td>9/29</td>
<td></td>
</tr>
<tr>
<td>Cipro 500 mg #14</td>
<td>bid</td>
<td>Johns</td>
<td>8/12</td>
<td></td>
</tr>
<tr>
<td>Lanoxin 0.25 #C</td>
<td>q am</td>
<td>Johns</td>
<td>8/30</td>
<td></td>
</tr>
</tbody>
</table>

---

**Dr. Donna Johns**

7000 SW 1st Ave., Santa Fe, NM 54545  
766-555-9097

Name: Benjamin Meyer  
Date: 10/25  
Address: 145 North Ave.  
Age: 79  
Refills: 0

---

N.R.

5.8a
### 5.9

<table>
<thead>
<tr>
<th>Pt. Name</th>
<th>Gender</th>
<th>Address</th>
<th>Weight</th>
<th>Allergy</th>
<th>Dx</th>
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<tbody>
<tr>
<td>Lyndon Peterson</td>
<td>M</td>
<td>325 Iris Blvd.</td>
<td>198</td>
<td>ASA</td>
<td>Anemia, sunspots on forehead and cheek</td>
</tr>
</tbody>
</table>

**Medical History:**
Retired, fishes, plays golf

---

<table>
<thead>
<tr>
<th>MEDICATION</th>
<th>SIG.</th>
<th>PRESCRIBER</th>
<th>ORIG. DATE</th>
<th>REFILL DATE</th>
<th>REFILL DATE</th>
<th>REFILL DATE</th>
<th>REFILL DATE</th>
</tr>
</thead>
</table>

---

### 5.9a

**Prescription:**
Folliclex 2% 1 x 400 mg

**Prescriber:** Dr. Thomas Fornier

**Name:** Lyndon Peterson

**Date:** 5/11

**Address:** 325 Iris Blvd.

**Age:** 57

Refills: 0

---

### 5.9b

**Prescription:**
Equadex 5%

**Sig:** Apply to Nose

**Prescriber:** Dr. Theodore Russell

**Name:** Lyndon Peterson

**Date:** 5/11

**Address:** 325 Iris Blvd.

**Age:** 57

Refills: 0

---
CHAPTER 5: DRUGS FOR NEOPLASTIC DISORDERS

Pt. Name: Susan Williams  
Gender: F  
Address: 452 Hall St.  
Age: 48  
Dx: COPD, DM type 2, thrush  
Allergy: PCN, Sulfa  
Weight: 122

<table>
<thead>
<tr>
<th>MEDICATION</th>
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<tbody>
<tr>
<td>Allegra 60 mg #25</td>
<td>1 qd</td>
<td>Thomas</td>
<td>4/11</td>
<td>5/7</td>
<td>6/19</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amaryl 4 mg #C</td>
<td>1 daily</td>
<td>Thomas</td>
<td>4/28</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lotrisone Cr. 45 g</td>
<td>apply bid</td>
<td>Thomas</td>
<td>2/1/6</td>
<td>6/7</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>QVAR 40 mcg 7.3g</td>
<td>use bid</td>
<td>Thomas</td>
<td>2/1</td>
<td>3/9</td>
<td>4/13</td>
<td>5/16</td>
<td></td>
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</table>

Dr. Erin Thomas  
988 North Ridge, New York, NY 88364  
813-555-7554

Refills 0

5.10a

Dr. Roy Verga, D.D.S.  
12-South Ridge, New York, NY 88364  
813-555-2957

Name: Susan Williams  
Date: 8/20

Address: 452 Hall St.  
Age: 48

Dr. Roy Verga, D.D.S

5.10b
Pt. Name: Lisa Cooper  
Gender: F  
Dr: Arthritis, HTN, HRT  
Address: 688 Green St.  
Weight: 165  
Age: 68  
Dx: Arthritis, HTN, HRT  
PCN  
Allergy: Premarin 0.625 mg #100  
Avapro 150 mg #30  
Ambien 5 mg #30  

Dr. Harvey Johns  
5555 166th Terrace, Monterey, CA 38411  
705-555-1232  

Dr. Doug Griffin  
7611 147th Terrace, Monterey, CA 38411  
705-555-6644  

Name: Lisa Cooper  
Address: 688 Green St.  

Refills: 0  

Dr. Harvey Johns  

Dr. Doug Griffin  

Refills: 0
<table>
<thead>
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<th>REFILL DATE</th>
<th>REFILL DATE</th>
<th>REFILL DATE</th>
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<tbody>
<tr>
<td>Insulin Syr. 1 cc #100</td>
<td>ud</td>
<td>Sauls</td>
<td>7/14</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ambien 5 mg #30</td>
<td>1 hs</td>
<td>Sauls</td>
<td>8/10</td>
<td>9/13</td>
<td>10/9</td>
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</table>

**Pt. Name:** William Hoffman  
**Gender:** M  
**Address:** 845 Fantastic St.  
**Weight:** 173  
**Dx:** DM type 2, psoriatic arthritis  
**Allergy:** NKA

---

**Dr. Alfred Sauls**  
151212 S. High Rd., Chicago, IL 23875  
954-555-1300

---

**MEDICATION SIG. PRESCRIBER ORIG. DATE REFILL DATE REFILL DATE REFILL DATE REFILL DATE**

---

**Refills 0**
### MEDICATION

<table>
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<th>Medication</th>
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<th>Prescriber</th>
<th>Orig. Date</th>
<th>Refill Date</th>
<th>Refill Date</th>
<th>Refill Date</th>
<th>Refill Date</th>
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</thead>
<tbody>
<tr>
<td>Maxzide 50/75 #30</td>
<td>1 qd</td>
<td>Weiss</td>
<td>9/11</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Xanax 0.25 mg #5</td>
<td>1 ud</td>
<td>Weiss</td>
<td>9/5</td>
<td></td>
<td></td>
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</tbody>
</table>

---

### Prescriptions

**5.13a**

Dr. Barry Weiss  
901 Sheridan St., Austin, TX 90902  
874-555-9000

Name: Mary Sullivan  
Date: 10/20  
Address: 89 Dexter Ave.  
Age: 58

**Prescription**

Prendzene 10 mg  
# 50  
10 mg daily x 3 days in AM  
then 10 mg daily x 3 days  
then 10 mg daily x 3 days

Dr. Barry Weiss

---

**5.13b**

Dr. Barry Weiss  
901 Sheridan St., Austin, TX 90902  
874-555-9000

Name: Mary Sullivan  
Date: 10/20  
Address: 89 Dexter Ave.  
Age: 58

**Prescription**

PILCOSER 20 mg #25  
Sig: 1 qd AM + 6 ker

3 Refills  
Dr. Barry Weiss
### CHAPTER 5: DRUGS FOR NEOPLASTIC DISORDERS

#### 5.14

<table>
<thead>
<tr>
<th>MEDICATION</th>
<th>SIG.</th>
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<th>REFL. DATE</th>
<th>REFL. DATE</th>
<th>REFL. DATE</th>
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<tbody>
<tr>
<td>Altace 10 mg #60</td>
<td>1 bid</td>
<td>Robins</td>
<td>10/8</td>
<td></td>
<td></td>
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<tr>
<td>Furosemide 20 mg #50</td>
<td>1 qd</td>
<td>Robins</td>
<td>10/8</td>
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<tr>
<td>Prednisone 1 mg #CC</td>
<td>2 tabs bid with food</td>
<td>Samuels</td>
<td>9/30</td>
<td></td>
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</tr>
</tbody>
</table>

**Pt. Name:** George Smith  
**Gender:** M  
**Address:** 145 North Ave.  
**Age:** 58  
**Dx:** HTN, RA  
**Allergy:** PCN

---

Dr. Calvin Robins  
7823 Tea Rose Trail, Miami, FL 44718  
463-555-8000

---

**Name:** George Smith  
**Address:** 145 North Ave.  
**Age:** 58  
**Refills prn**

---

Dr. Calvin Robins  
7823 Tea Rose Trail, Miami, FL 44718  
463-555-8000

---

**Name:** George Smith  
**Address:** 145 North Ave.  
**Age:** 58  
**Refills prn**
<table>
<thead>
<tr>
<th>MEDICATION</th>
<th>SIG.</th>
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<th>REFILL DATE</th>
<th>REFILL DATE</th>
<th>REFILL DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Z-Pak</td>
<td>ud</td>
<td>Thomas</td>
<td>9/27</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Zestril 40 mg #120</td>
<td>daily</td>
<td>Thomas</td>
<td>10/12</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Biaxin XL 500 mg #20</td>
<td>bid</td>
<td>Thomas</td>
<td>10/24</td>
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Dr. Erin Thomas  
988 North Ridge, New York, NY 88364  
813-555-7554  

Name: Sean Nelson  
Date: 10/31  
Address: 92 Ibis Lane  
Age: 72  

Refills: 0  

Dr. Arthur Halpern  
22 North Ridge, New York, NY 88364  
813-555-0444  

Name: Sean Nelson  
Date: 10/31  
Address: 92 Ibis Lane  
Age: 72  

Refills: 0  

Prednisone 1 mg/ml  
4 x 3 ml/syr  
# 18  

Dr. Erin Thomas  

1% Eucain 25 mg/ml  
Upper eyelid - #5010  
Lower eyelid - #5010  

Dr. Arthur Halpern  

5.15a  

5.15b
Pt. Name: Fred Brown
Age: 62
Gender: M
Address: 9 Eagle Run
Weight: 149
Dx: Prostate CA, HTN
Allergy: NKA

<table>
<thead>
<tr>
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<th>SIG.</th>
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<th>REFILL DATE</th>
<th>REFILL DATE</th>
</tr>
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<tbody>
<tr>
<td>Cipro 500 mg #30</td>
<td>1 bid X 7d, then 1 qd</td>
<td>Weiss</td>
<td>8/30</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>Proscar 5 mg #100</td>
<td>1 daily</td>
<td>Weiss</td>
<td>9/12</td>
<td></td>
<td></td>
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<tr>
<td>Oxybutynin 5 mg #C</td>
<td>1 tab tid</td>
<td>Weiss</td>
<td>7/7</td>
<td></td>
<td>8/5</td>
<td></td>
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<tr>
<td>Sonata 10 mg #30</td>
<td>1 cap hs</td>
<td>Weiss</td>
<td>9/12</td>
<td></td>
<td>10/14</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Zestril 10 mg #C</td>
<td>1 tab qd</td>
<td>Weiss</td>
<td>2/2</td>
<td>5/10</td>
<td>8/16</td>
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</table>

HX: Smoker, social drinker

Dr. Barry Weiss
901 Sheridan St., Austin, TX 90902
874-555-9000

Name: Fred Brown
Address: 9 Eagle Run
Age: 62

Refills 2

Dr. Barry Weiss

Celebrex 200 mg
+ 100 mg

Refill 1 2 3 NR PRN

5.16a

5.16b
Pt. Name: David Wagner  
Gender: M  
Address: 145 North Ave.  
Age: 24  
Dx: HIV, neuropathy  
Allergy: PCN  
Weight: 113  
Hx: “Promiscuous” lifestyle

<table>
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<th>REFILL DATE</th>
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</thead>
<tbody>
<tr>
<td>Combivir #C</td>
<td>1 bid, bkfst &amp; dinner</td>
<td>Robins</td>
<td>9/30</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sustiva 200 mg #/30</td>
<td>3 HS</td>
<td>Robins</td>
<td>9/30</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lidocaine Viscous 100 cc</td>
<td>1 tsp swish &amp; swallow prn</td>
<td>Robins</td>
<td>9/2</td>
<td>9/20</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diflucan 100 mg #/30</td>
<td>2 today then 1 daily</td>
<td>Robins</td>
<td>8/24</td>
<td>9/20</td>
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<td></td>
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<tr>
<td>Bactrim DS #/30</td>
<td>1 tab qd</td>
<td>Robins</td>
<td>9/2</td>
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Dr. Calvin Robins  
7823 Tea Rose Trail, Miami, FL 44718  
463-555-8000

Name: David Wagner  
Date: 10/10  
Address: 145 North Ave.  
Age: 24

Refills 3

Dr. Calvin Robins

5.17a

Dr. Calvin Robins  
7823 Tea Rose Trail, Miami, FL 44718  
463-555-8000

Name: David Wagner  
Date: 10/10  
Address: 145 North Ave.  
Age: 24

Refills 3

Dr. Calvin Robins

5.17b
<table>
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<tbody>
<tr>
<td>Prednisone 5 mg #60</td>
<td>One daily</td>
<td>Renosik</td>
<td>1/15</td>
<td>3/18</td>
<td>5/11</td>
<td>7/14</td>
<td></td>
</tr>
<tr>
<td>Pyridostigmine Br 60 mg tabs #C</td>
<td>One tid</td>
<td>Renosik</td>
<td>2/20</td>
<td>3/19</td>
<td>4/19</td>
<td>5/20</td>
<td>6/20</td>
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</table>

Dr. Michael Renosik  
44 Orange Drive, New York, NY 88364  
813-555-9993

Name: Harry Morris  
Address: 80 Alton Rd  
Age: 59  

NR

Dr. Michael Renosik

DEA # BR1234563
Pt. Name: Melinda Granox  
Gender: F  
Address: 77 Bayview Dr.  
Age: 67

Dr. John Davis  
61 NW 5 Ave., Monterey, CA 38411  
705-555-0202

### MEDICATION

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<tr>
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<tbody>
<tr>
<td>Propranolol 20 mg #120</td>
<td>One bid</td>
<td>Davis</td>
<td>4/9</td>
<td>6/8</td>
<td>8/4</td>
<td>9/1</td>
<td></td>
</tr>
<tr>
<td>Triamterene/HCTZ</td>
<td>One daily in am</td>
<td>Davis</td>
<td>3/6</td>
<td>4/8</td>
<td></td>
<td></td>
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<tr>
<td>37.5/25 mg tabs #30</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Dicyclomine 10 mg #50</td>
<td>One bid prn</td>
<td>Davis</td>
<td>4/8</td>
<td>8/9</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cartia XT 120 mg #30</td>
<td>One daily</td>
<td>Davis</td>
<td>5/8</td>
<td>6/9</td>
<td>7/3</td>
<td>8/1</td>
<td>9/1</td>
</tr>
<tr>
<td>Diazepam 5 mg #12</td>
<td>One tid prn</td>
<td>Davis</td>
<td>4/9</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Diazepam 5 mg #50</td>
<td>One tid prn</td>
<td>Davis</td>
<td>4/29</td>
<td>5/18</td>
<td>6/10</td>
<td>7/26</td>
<td>8/20</td>
</tr>
</tbody>
</table>

Dr. John Davis  
61 NW 5 Ave., Monterey, CA 38411  
705-555-0202

Name: Melinda Granox  
Date: 9/4

Address: 77 Bayview Dr.  
Age: 67

Do Not Refill  
Refill 6 Times

Dr. John Davis

#50 (fifty)

Refill times

Dr. John Davis
### MEDICATION

<table>
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<th>MEDICATION</th>
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<tbody>
<tr>
<td>Cipro 500 mg #20</td>
<td>One bid</td>
<td>Spencer</td>
<td>10/7</td>
<td></td>
<td></td>
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<tr>
<td>Viagra 100 mg #5</td>
<td>One before intercourse</td>
<td>Beale</td>
<td>5/9</td>
<td>10/30</td>
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<tr>
<td>Systane Eye Drops</td>
<td>As directed for dry eyes</td>
<td>Holcombe</td>
<td>3/6</td>
<td>6/9</td>
<td>8/1</td>
<td>7/8</td>
<td>9/19</td>
</tr>
<tr>
<td>Zostrix 0.075% cream 60 g</td>
<td>OTC</td>
<td>OTC</td>
<td>2/6</td>
<td>4/8</td>
<td>5/9</td>
<td>7/8</td>
<td>9/19</td>
</tr>
<tr>
<td>Tylenol Arthritis caplets #120</td>
<td>OTC</td>
<td>OTC</td>
<td>2/6</td>
<td>6/19</td>
<td>8/30</td>
<td></td>
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</tr>
</tbody>
</table>

---

**Pt. Name:** Mario Ariola  
**Address:** 8809 Cropsey Ave.  
**Gender:** M  
**Age:** 68  
**Dx:** RA, UTI, dry eyes  
**Allergy:** NKA  
**Weight:** 171

---

**Dr. Gwen Spencer**  
7000 Utopia Parkway, Jamaica, NY 11439  
343-555-2221

---

**Dr. Harvey Greco**  
5000 Utopia Parkway, Jamaica, NY 11439  
343-555-9295

---

**No Refills**

---

**Dr. Harvey Greco**

---

**Refill**

---

**Dr. Gwen Spencer**
Pt. Name: Mary Reiland
Age: 74
Gender: F
Address: 11 Center St.
Weight: 120

Dr. Paul Sinclair
2100 Broadway, Kansas City, MO 64110
463-555-0630

Dr. Cheryl Rue
1234 Parkview Place, St. Louis, MO 63112
947-555-4441

---

**MEDICATION**

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<th>MEDICATION</th>
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<th>REFILL DATE 2</th>
<th>REFILL DATE 3</th>
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<tbody>
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<td>Norvasc 5 mg #30</td>
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<td>Rue</td>
<td>8/12</td>
<td>9/10</td>
<td>10/4</td>
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<tr>
<td>Amlodipine 15-12.5 #60</td>
<td>One daily</td>
<td>Rue</td>
<td>2/15</td>
<td>4/10</td>
<td>6/16</td>
<td>8/11</td>
<td>10/2</td>
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<td>Metoprolol 25 mg #30</td>
<td>One daily</td>
<td>Rue</td>
<td>5/8</td>
<td>6/9</td>
<td>7/1</td>
<td>8/30</td>
<td>10/15</td>
</tr>
<tr>
<td>Coumadin 5 mg #30</td>
<td>One daily</td>
<td>Rue</td>
<td>9/20</td>
<td>10/19</td>
<td></td>
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</tr>
</tbody>
</table>

---

**R**

EFFEDEX CREAM 0.1%

SIG: APPLY TO LESION 2X/ DAY.

NR

Dr. Paul Sinclair

Dr. Cheryl Rue

---

5.21a

5.21b
### CHAPTER 5: DRUGS FOR NEOPLASTIC DISORDERS

#### Pt. Name: Martha Hauser

**Gender:** F  
**Address:** 33 Gray St.  
**Weight:** 121  
**Age:** 61  
**Dx:** Psoriatic arthritis, HTN, elevated cholesterol, osteoporosis  
**Allergy:** NKA  
**Hx:** Retired, active in charitable organization

<table>
<thead>
<tr>
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<th>SIG.</th>
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<tbody>
<tr>
<td>Hydrocodone-APAP 10/650 # 60</td>
<td>I to 2 q4h prn pain</td>
<td>Johnson</td>
<td>3/9</td>
<td>4/2</td>
<td>5/3</td>
<td>6/8</td>
<td>7/14</td>
</tr>
<tr>
<td>Furosemide 40 mg # C</td>
<td>I q am</td>
<td>Samet</td>
<td>2/6</td>
<td>5/16</td>
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<td>Enalapril 5 mg # C</td>
<td>I q am</td>
<td>Samet</td>
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<td>5/16</td>
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<td>I q am</td>
<td>Samet</td>
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<td>5/16</td>
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<tr>
<td>Lipitor 10 mg # C</td>
<td>I hs</td>
<td>Samet</td>
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<td>5/16</td>
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<tr>
<td>Methotrexate 2.5 mg # 40</td>
<td>10 tabs per week</td>
<td>Johnson</td>
<td>6/3</td>
<td>7/1</td>
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</tr>
<tr>
<td>Fosamax Plus D # 4</td>
<td>One tablet per week</td>
<td>Samet</td>
<td>3/3</td>
<td>4/3</td>
<td>5/5</td>
<td>6/2</td>
<td>7/1</td>
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</tbody>
</table>

**Rx**

#### Dr. James Johnson

9103 Highland Ave., Madison, WI 58545  
999-383-5748

**Name:** Martha Hauser  
**Date:** 8/1  
**Address:** 33 Gray St.  
**Age:** 61

**Methotrexate # 40**  
**Sig:** DAILY  
**FRQ:** WEEKLY  
**AS DIRECTED**  
**TIMES PER DAY**  
**LABEL**  
**RENEW** 1 – 2 – 3  
**NR**  
**DO NOT USE SAFETY CAP**

---

**DO NOT USE SAFETY CAP**  
No Refills  
**DEA # BJ1234563**

---

**5.22a**

**5.22b**