

Micromedex



Shou Ray Information Service

2023

Trainer | Fion Lee

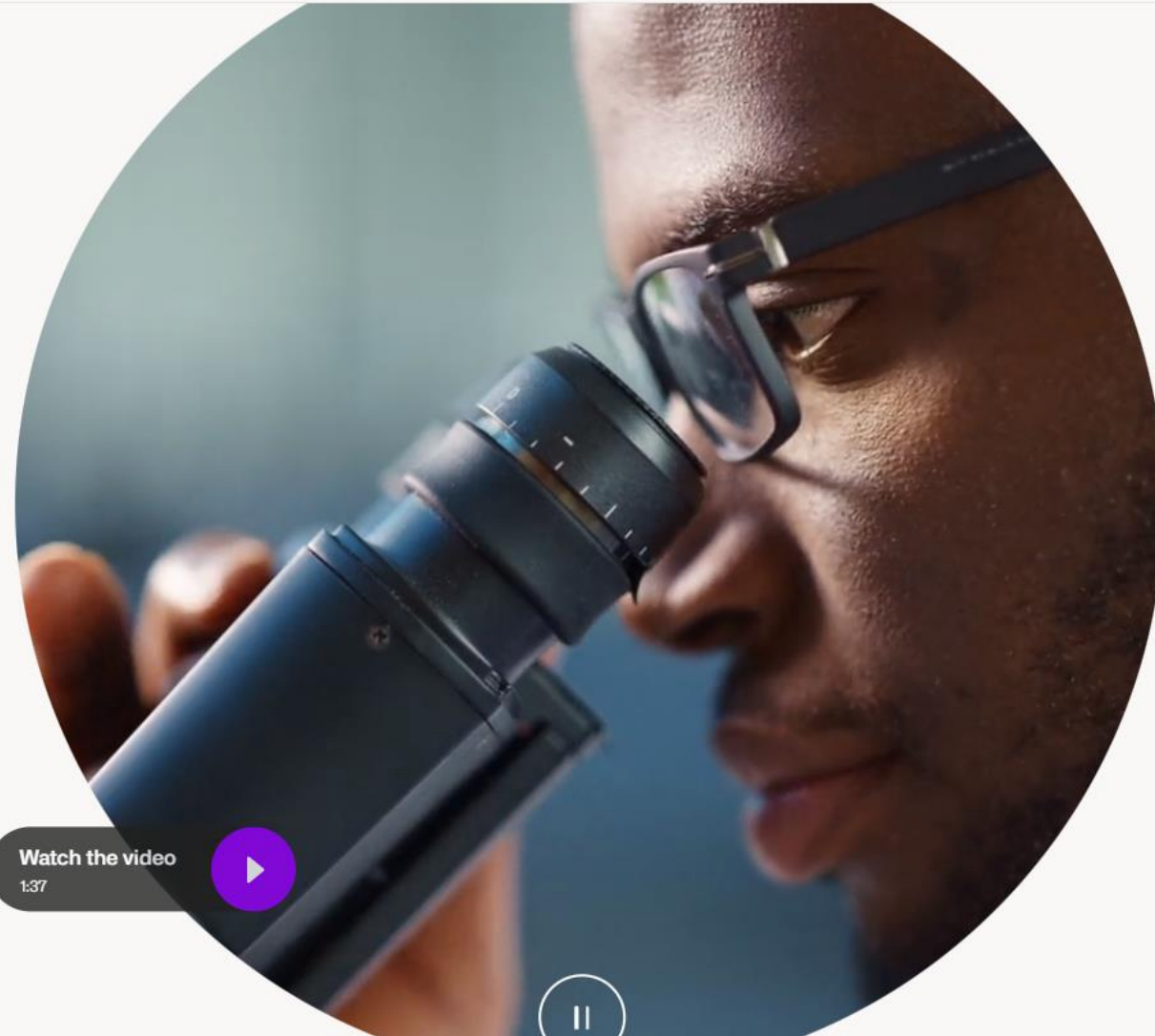
IBM Watson Health is now Merative

At Merative, we're building a more connected future in health. One where organizations can see the whole picture – and its pieces – at the highest levels of privacy and security.

Are you ready to see beyond a single moment in care?

SCROLL

Watch the video
1:37



大綱

Micromedex 內容簡介



Micromedex 使用介面



在 Micromedex 中查找藥物資訊

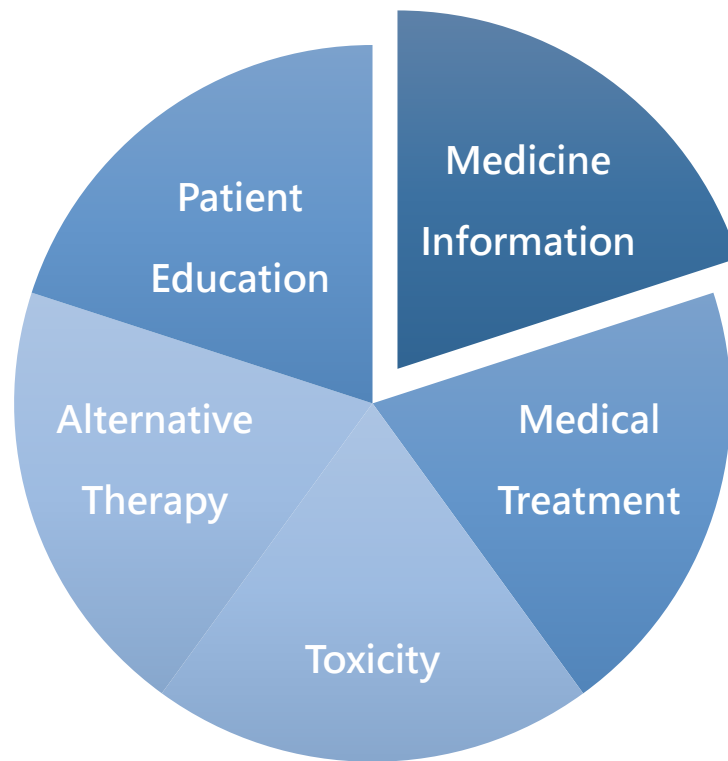


Ask Watson – 有問題，問華生！

Micromedex 內容簡介

Micromedex 收錄內容範圍

Micromedex® Solutions Healthcare Series



內容特性

◆ Authority 權威性

- ◆ DrugDex, Poisindex, DiseaseDex Emergency Medicine was adapted by U.S, Department of State as officially medical encyclopedia

◆ Quality 高品質

- ◆ Strict editorial process

◆ Reliability 專業可靠

- ◆ Provide service for schools, hospitals , and pharmaceutical companies over 30 years

◆ Consistency 一致性

- ◆ Consistency formats and standards

◆ Full-text databases 全文閱讀

- ◆ Fully referenced, Peer reviewed, Written by clinicians

資料來源與編輯方法



我們檢閱全球的醫療文獻

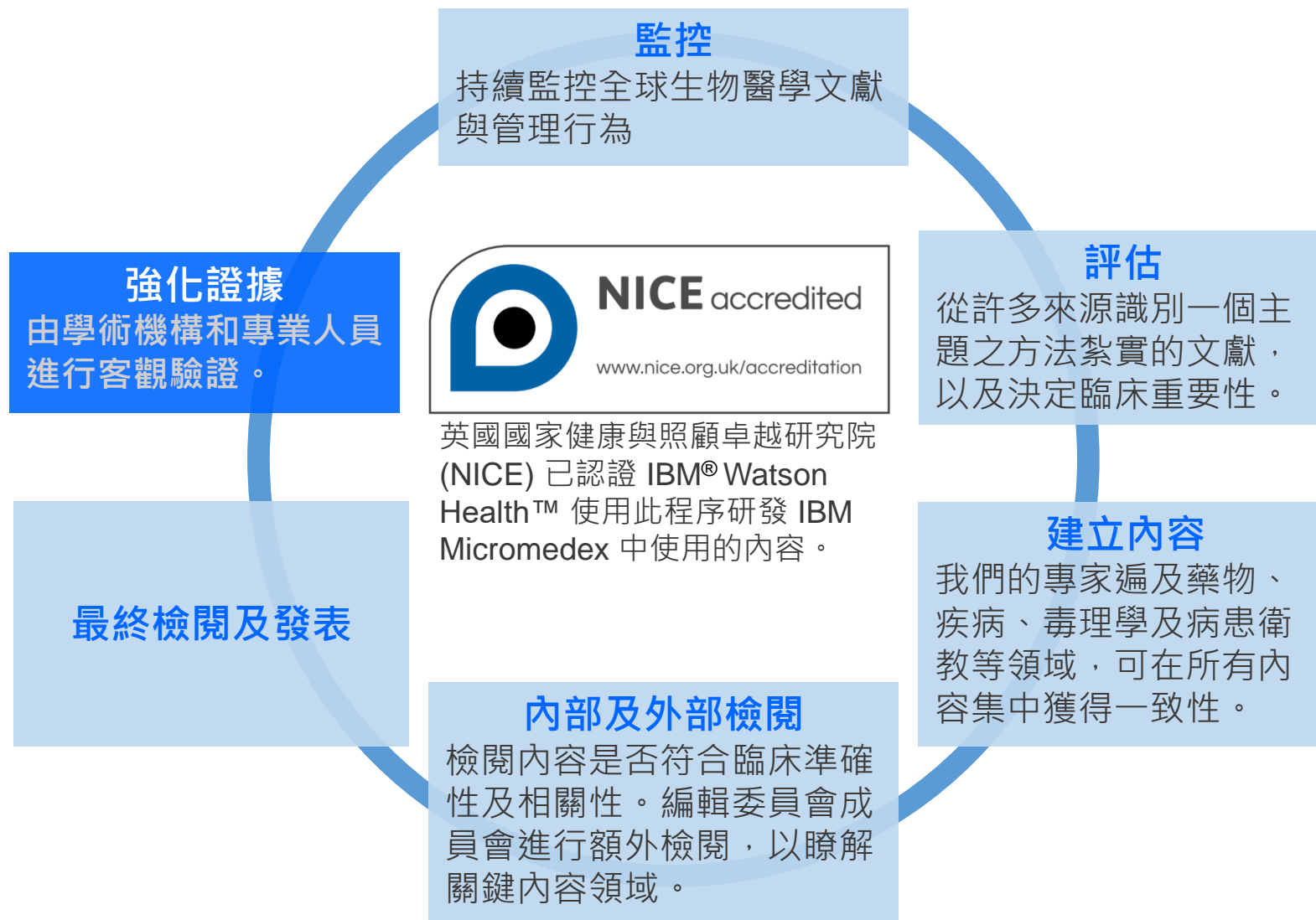
- 每週發表大約 15,000 篇醫學文章
- 監控大約 8,500 個期刊
- 定期進行高階及深度檢閱



內部編輯團隊

擁有研究方法論專業知識之受過臨床訓練的編輯員工

編輯流程



資料來源

Drug Information	Disease Information
DRUGDEX® System DRUG-REAX® System MARTINDALE Index Nominum Physicians' Desk Reference®(PDR®) P & T QUIK® Reports IV INDEX® System MSDS from USP IDENTIDEX® System Red Book® Online KINETIDEX® System	DISEASEDEX™ General Medicine DISEASEDEX™ Emergency Med. Lab adviser™
	Patient Education
	AltCareDex® Alternative Medicine Education CareNotes™ System
	Toxicology Information
Alternative Medicine	POISINDEX® System TOMES® System REPRORISK® System
	Free Resources
AltMedDex® System AltMedDex® Protocols	Calculators Micromedex Apps

資料來源

Drug Information	Disease Information
DRUGDEX [®] System	DISEASEDEX [™] General Medicine
DRUG-REAX [®] System	DISEASEDEX [™] Emergency Med.
MARTINDALE	Lab adviser [™]
Index Nominum	Patient Education
Physicians' Desk	AltCareDex [®] Alternative Medicine
Reference [®] (PDR [®])	Education
P & T QUIK [®] Reports	CareNotes [™] System
IV INDEX [®] System	Toxicology Information
MSDS from USP	POISINDEX [®] System
IDENTIDEX [®] System	TOMES [®] System
Red Book [®] Online	REPRORISK [®] System
KINETIDEX [®] System	
Alternative Medicine	Free Resources
AltMedDex [®] System	Calculators
AltMedDex [®] Protocols	Micromedex Apps

Micromedex 使用介面

資料庫登入與使用



IP認證機制

- 在IP範圍內，從單位圖書館網頁連結
- 利用校 / 院外連線：
設定Proxy或VPN



行動載具APP 訂戶專屬

- 每次登入會自動更新資料
- **可離線使用**，不受網路死角影響

資料庫使用方式

網頁資料庫

IP範圍有網路

完整全文內容

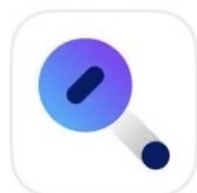
行動載具APP

無需網路連線*

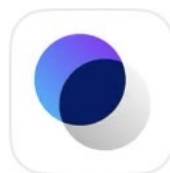
僅有簡要解答

*更新資料時需有網路

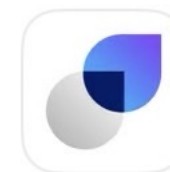
APP下載



Micromedex Drug Reference
醫藥



Micromedex Drug Interactions
醫藥



Micromedex IV Compatibility
醫藥



可離線使用

APP使用方式

下載APP

下載中心
找對應APP

依個別APP
輸入密碼

Merative mobile**Micromedex**[®]

Put the power of Micromedex on your mobile device

↓ Micromedex Native Mobile Apps (Offline access, included with content subscription)

Micromedex Apps on Apple[®] and Android[®]

Micromedex[®] Drug Reference

- The **Micromedex Drug Reference** app for Apple and Android devices is included with Merative Micromedex Drug content subscription.
- You can access these apps via the App Store and Google Play[®].
- You can activate the app by following the simple instructions below.

Simple instructions for installation:

- Step 1:** Visit the App Store from your device and search Micromedex Drug Reference.
- Step 2:** From the App, select download / install the application. You may be prompted to enter your Apple or Google ID.
- Step 3:** The app will download to your app library, or directly to your device.
- Step 4:** Open the app. Enter the password [redacted] to begin using **Micromedex Drug Reference**. *The password is case-sensitive. Please enter it exactly as it appears here.*

App Store

Password Entry Continue

Password Entry

This app is free only for clinicians ("subscribers") who work at a hospital or facility with an online subscription to Merative Micromedex[®]. Subscribers can obtain their password by signing into the Merative Micromedex and following the "Mobile Application Access" link at the top of the page.

The password only needs to be entered once per year.

Need Help?
Not sure if you work at a hospital or facility that subscribes to Merative Micromedex?
Can't find the link to the password?
Visit Our Support Center:
<https://developer.ibm.com/watsonhealth/micromedex-support/>

Once you've obtained your password, please enter it below:

Password: **APP Password**

Feedback

手機APP使用畫面

Drug Interactions

Cancel

Drug List

Selected Drugs(1)

Aspirin ✓

Aspirin/Butalbital/Caffeine

+

Aspirin/Caffeine/Dihydrocodeine Bitartrate

+

Aspirin/Codeine Phosphate

+

Aspirin/Dipyridamole

+

Aspirin/Omeprazole

+

Aspirin/Oxycodone Hydrochloride

+

Aspirin/Pravastatin Sodium

+

Aspirin/Tab (Aspirin)

+

Aggrenox (Aspirin/Dipyridamole)

+

Anacin Aspirin Free (Acetaminophen)

+

Ascomp w/Codeine (Butalbital/Aspirin/Caffeine...)

+

Ascriptin (Aspirin)

+

Aspergum (Aspirin)

+

Bayer (Aspirin)

+

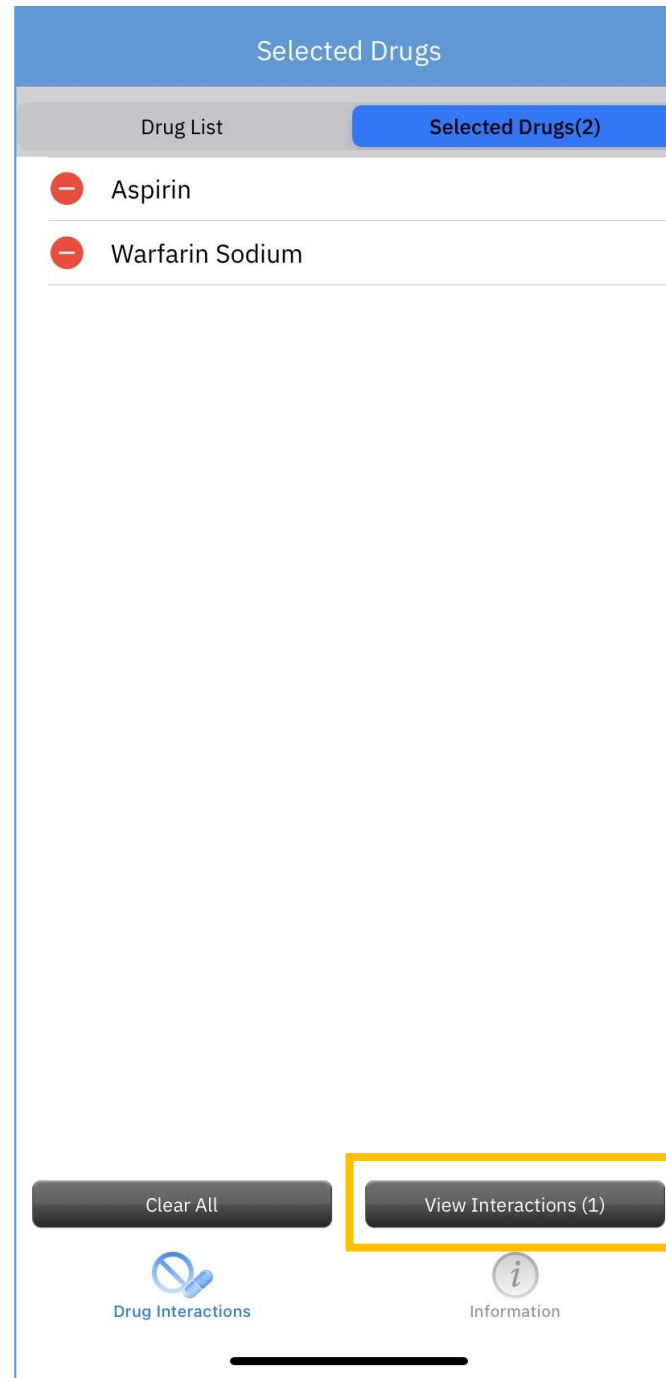
Butalbital/Aspirin/Caffeine/Codeine Phosphate

+

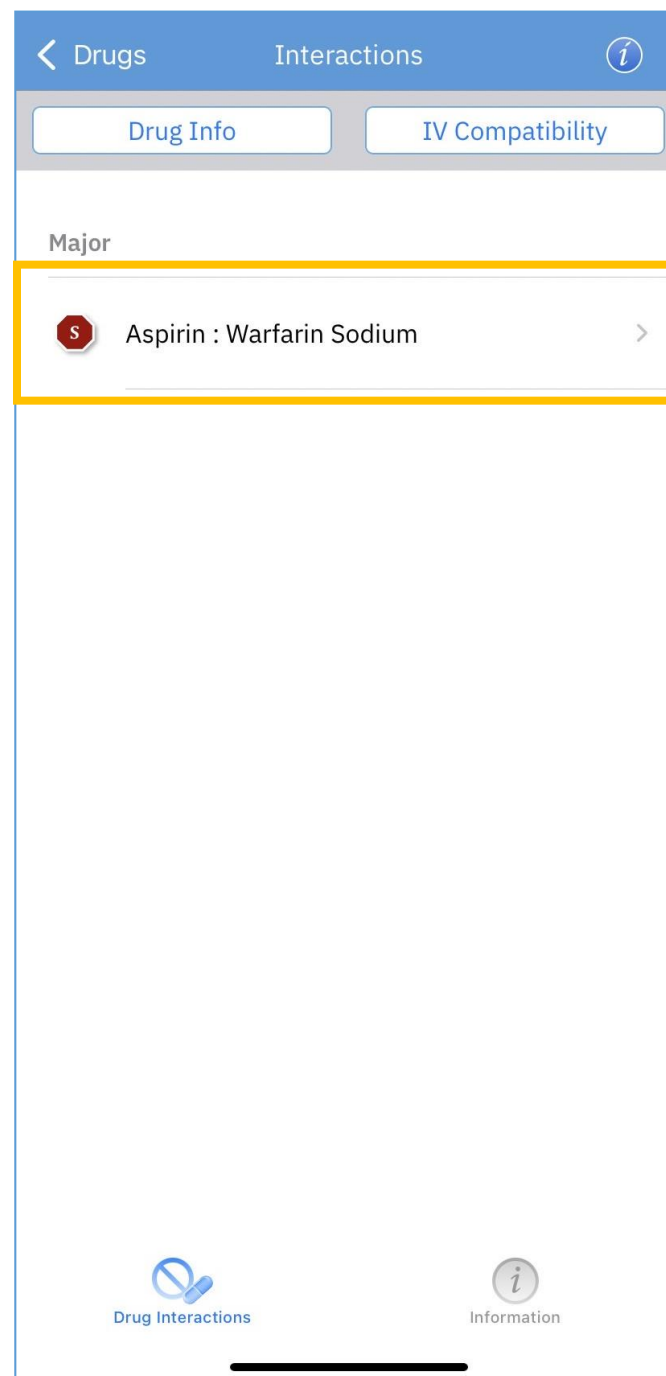
Drug Interactions

Information

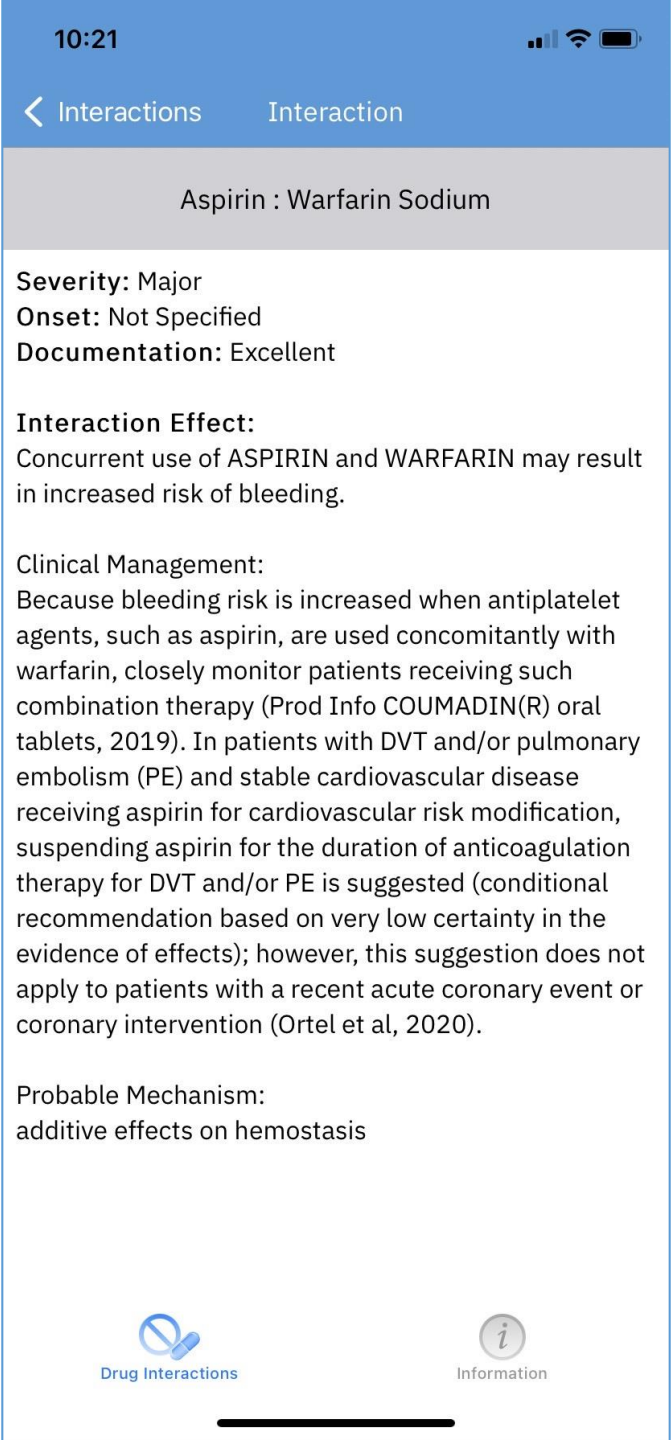
手機APP使用畫面



手機APP使用畫面

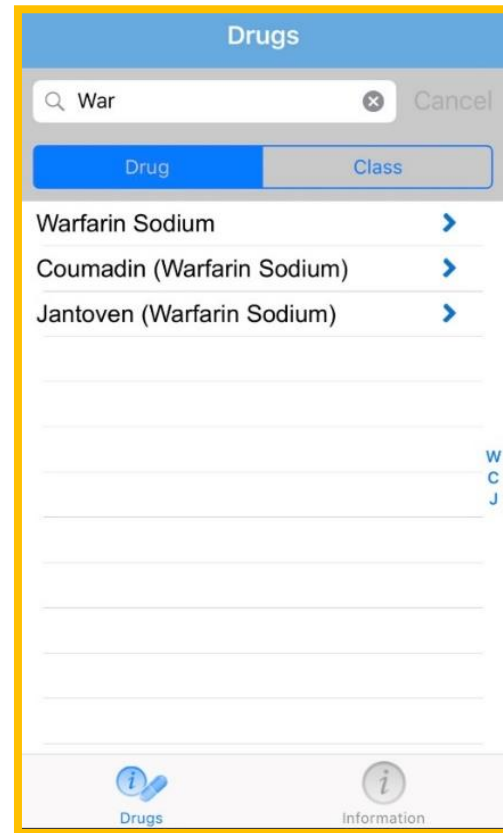


手機APP使用畫面



APP小提醒

- 只有**簡要解答 (Summary)**
 - 深入解答仍需回到Micromedex網頁查詢
- 密碼到期
 - 新密碼的取得須在**IP範圍內登入**Micromedex 資料庫，進入 **下載中心** 頁面或  **Download Mobile Apps** 即可找到。



3 支援總覽

[我的訂閱](#) | [簡導](#) | [Training Center](#) | [說明](#) | [下載中心](#) | [登出](#)

2 工具列

Merative **Micromedex**®

主頁

藥物
相互作用

IV 相容性

藥物
鑑定

藥物
比較

CareNotes

NeoFax® /
Pediatrics

Tox 和藥物
產品查找

RED BOOK

計算器

搜尋藥物、疾病、毒理學及其他資訊

全部

藥物

疾病

毒理學

Keyword search



1 檢索區

Ask Watson

Search Micromedex drug information

Type a quick question...

[Learn more](#)



最新消息

- Evusheld(TM): Emergency Use...
- Orserdu(TM) for ESR1-Mutated Breast...
- Jaypirca(TM) for MCL
- Keytruda(R): 5th NSCLC Indication
- Content Update Highlights

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Read Top News



支援和訓練

- Training Center
- User Guide
- Micromedex Compendia Resources
- Citing Micromedex

5

Support Request



資源

- 黑框警告
- Comparative Tables
- Do Not Confuse Drug List
- Drug Classes
- Drug Consults
- REMS

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Download Mobile Apps

我的訂閱

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搜尋藥物、疾病、毒理學及其他資訊

全部

藥物

Keyword search



最新消息

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已經訂購

尚未訂購

Your Subscribed Products

MICROMEDEX

- AAPCC Codes in POISINDEX
- Alternative Medicine
- Detailed Drug Information for the Consumer
- DISEASEDEX™ Emergency Medicine
- DISEASEDEX™ General Medicine
- DRUGDEX System
- Imprint Codes in Identidex
- Index Nominum
- Interaction Checking
- Italian Drug Database
- IV Compatibility
- Lab Advisor
- MARTINDALE
- Micromedex with Watson Integrated Delivery
- NeoFax®
- P&T QUIK Reports
- Pediatrics
- POISINDEX Managements

Non-subscribed Products

MICROMEDEX

- API CareNotes and DrugNotes
- API In-Depth Drug
- API Summary Drug
- United Kingdom Drug Information
- Watson Assistant for Mobile Browsers

列印 關閉

Ask Watson

edex drug information

question...

Learn more



資源

- 黑框警告
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Feedback

使用說明(Help)

主頁

藥物
相互作用

IV 相容性

藥物
鑒定

藥物
比較

CareNotes

NeoFax® /
Pediatrics

Tox 和藥物
產品查找

RED BOOK

計算器

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Ask Watson

Search Micromedex drug information

Micromedex Solutions Help - Google Chrome

micromedexsolutions.com/micromedex2/100.1.3.545/WebHelp/MICROMEDEX_2.htm?navitem=headerHelp#Home_Page/Home_Page.htm

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- Results for Targeted Searches
- IBM Micromedex Pharmaceutical
- Content
- Tools
- Micromedex on Your Mobile Device

IBM Micromedex® Home Page

Searches Made Simple

With the prominently displayed *Keyword* search box that is available on every page in IBM Micromedex® you have direct access to the information you need. It also provides intelligent searching with in-line spelling suggestions.

By default you can quickly perform one search to get all the relevant results for the content to which you subscribe, or you can specify a filter option to search specifically within the drug, disease, or toxicology content, which will provide you with more targeted results.

All is the default selection

Search Drug, Disease, Toxicology, and more

All Drug Disease Toxicology

Click Drug, Disease, or Toxicology to activate the filter

Keyword search

最新消息

最新消息

- Evusheld(TM): Emergency Use...
- Orserdu(TM) for ESR1-Mutated Breast...
- Jaypirca(TM) for MCL
- Keytruda(R): 5th NSCLC Indication
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- MS

Feedback

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Latest News

關閉 X

▼ Evusheld(TM): Emergency Use Authorization Paused

On January 26, 2023, the FDA announced that Evusheld(TM) (tixagevimab copackaged with cilgavimab) for IM injection is not currently authorized for use in any region in the US until further notice due to the high frequency of circulating SARS-CoV-2 variants that are non-susceptible to Evusheld. The US Government recommends all products be retained in the event that SARS-CoV-2 variants susceptible to Evusheld become more prevalent. Healthcare providers are encouraged to use other approved or authorized products that are expected to maintain activity against the leading subvariants.

The revised Healthcare Provider fact sheet can be found at: <https://www.fda.gov/media/154701/download>.

Last modified: 01/30/2023 16:43:23

Full Article 

▶ Orserdu(TM) for ESR1-Mutated Breast Cancer

▶ Jaypirca(TM) for MCL

▶ Keytruda(R): 5th NSCLC Indication

▶ Content Update Highlights

Training Center

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ibm.com/watson/health/provider-client-training/micromedex/

IBM

Search

IBM Watson Health Product Education



Training and Product Support: mdx.techsupp@us.ibm.com

IBM Micromedex®

Click the **Header** (blue bar) to view the list of courses | Then click the **Title** link for a description of the course

- ^ Quick Tips
- ^ Overviews
- ^ Tools & Apps

Product Education

- IBM CareDiscovery® Electronic Quality Measures
- IBM CareDiscovery® Quality Measures
- IBM Market Expert®
- IBM Micromedex® Clinical Knowledge
 - IBM Micromedex®
 - IBM Micromedex® (Integrated)
 - IBM Micromedex® NeoFax® and Pediatrics
 - IBM Micromedex®

Feedback

引用 Micromedex



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IBM Watson Health : 保護及免費聲明 - Google Chrome

micromedexsolutions.com/micromedex2/librarian/CS/D7CEFA/ND_PR/evidencexpert/ND_P/evidencexpert/DUPLICATIONSHIELDSYNC/79AFB2/ND_PG/evidencexpert/ND_B/...

HOW TO REFERENCE THE Merative SYSTEMS

↑ Top of page

PLEASE NOTE: When referencing a Micromedex product or database, you *must* include: (electronic version), Merative information, URL address (<https://www.micromedexsolutions.com/>) and the date accessed.

Subscribers to the Licensed Solutions often ask how to reference the databases when publishing articles. The following formats should be used:

The entire Micromedex System:

↑ Top of page

Micromedex® (electronic version). Merative, Ann Arbor, Michigan, USA. Available at: <https://www.micromedexsolutions.com/> (cited: *month/day/year*).

An entire System or Database:

↑ Top of page

Merative™ Micromedex® Alternative Medicine:
Merative™ Micromedex® Alternative Medicine (electronic version). Merative, Ann Arbor, Michigan, USA. Available at: <https://www.micromedexsolutions.com/> (cited: *month/day/year*).

CareNotes®:
CareNotes® (electronic version). Merative, Ann Arbor, Michigan, USA. Available at: <https://www.micromedexsolutions.com/> (cited: *month/day/year*).

Merative™ Micromedex® Disease Emergency Medicine:
Merative™ Micromedex® Disease - Emergency Medicine (electronic version). Merative, Ann Arbor, Michigan, USA. Available at: <https://www.micromedexsolutions.com/> (cited: *month/day/year*).

Merative™ Micromedex® Disease General Medicine:
Merative™ Micromedex® Disease - General Medicine (electronic version). Merative, Ann Arbor, Michigan, USA. Available at: <https://www.micromedexsolutions.com/> (cited: *month/day/year*).

Mobile Apps

常用資源 RESOURCES



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Feedback



黑框警告

以藥物首字母序條列有黑框警告的藥物
意即研究表明該藥物具有嚴重、甚至危及生命的不良反應風險，
是美國食品藥品監督管理局（FDA）對上市藥物採取的最嚴厲警告形式

跳轉到： A B C D E F G H I J K L M N **O** P Q R S T U V W X Y Z 0-9

顯示 30 of 999 條結果，帶有黑框警告

Obeticholic Acid

Obiltoxaximab

Obinutuzumab

Ofatumumab

Ofloxacin

Olanzapine

Olanzapine Pamoate

Ofloxacin

Drug Classes: [Antibacterial](#) | [Antibiotic](#) | [All](#)
Routes: [Ophthalmic](#) | [Oral](#) | [Otic](#)

Regulatory Authority
 [FDA](#)

[總要解答](#) [深入解答](#) [全部結果](#)

Dosing/Administration

- Adult Dosing
- Pediatric Dosing
- FDA Uses
- Non-FDA Uses
- Dose Adjustments
- Administration
- Comparative Efficacy
- Place In Therapy

Medication Safety

- Contraindications
- Precautions
- Adverse Effects
- Black Box Warning**
- REMS
- Drug Interactions (single)
- IV Compatibility (single)
- Pregnancy & Lactation
- Monitoring
- Do Not Confuse

Mechanism of Action

- Mechanism of Action

Pharmacokinetics

Medication Safety

Black Box Warning

請參閱 '深入解答' 瞭解詳細結果。

Oral (Tablet)

- Fluoroquinolones, including ofloxacin, are associated with disabling and potentially irreversible serious adverse reactions that have occurred together, including tendinitis and tendon rupture, peripheral neuropathy, and CNS effects. Discontinue ofloxacin and avoid use of fluoroquinolones in patients with these serious adverse reactions. Reserve use of ofloxacin for patients with no alternative treatment options for acute exacerbation of chronic bronchitis or uncomplicated cystitis. Fluoroquinolones, including ofloxacin, may exacerbate muscle weakness in persons with myasthenia gravis. Avoid in patients with known history of myasthenia gravis [2].

[列印](#)

相關結果

- [替代藥物](#)
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- [疾病](#)

- [Drug Consults](#)
- [Index Nominum](#)
- [Martindale](#)
- [Product Lookup - Martindale](#)
- [Product Lookup - RED Book](#)
- [Product Lookup - Tox & Drug](#)
- [消費者藥物資訊](#)

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常用資源 RESOURCES



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Feedback



Dosage

Class

▶ BENZODIAZEPINES (SELECTED)

▶ CORTICOSTEROIDS (SELECTED) PROPERTIES AND POTENCIES

▶ NSAID (NONSTEROIDAL ANTIINFLAMMATORY AGENTS (SELECTED))

Response

The following charts provide selected nonsteroidal antiinflammatory agents and the usual adult dosage ranges for primary therapeutic indications. In general, use lowest effective dose for shortest possible duration [1][2][3][4][5][6][7][8][9][10][11][12][13][14][15][16][17][18][19][20][21][22].

Oral NSAIDs

Generic Name	Brand Name (US)	Indications	Effective Dosage Range
Diclofenac	Cataflam (diclofenac potassium immediate-release tablets)	Pain	50 mg 3 times daily
		Dysmenorrhea	50 mg 3 times daily
		Osteoarthritis	50 mg 2 to 3 times daily
		Rheumatoid Arthritis	50 mg 3 to 4 times daily
	Voltaren (diclofenac sodium enteric-coated tablets)	Ankylosing Spondylitis	25 mg 4 times daily, with an extra 25 mg at bedtime if needed
		Osteoarthritis, Rheumatoid Arthritis	50 mg 2 to 3 times daily, or 75 mg twice daily
	Voltaren XR (diclofenac sodium extended-release tablets)	Osteoarthritis	100 mg every day
		Rheumatoid Arthritis	75 to 100 mg once or twice daily
	Cambia (diclofenac potassium powder for oral solution)	Migraine Headache with or without Aura	Single dose of 50 mg; efficacy of repeated dose not established

Feedback

Ask Watson

Dosage


Class


▶ ACE Inhibitors and Angiotensin Receptor Blockers

▶ Antidiabetic Agents

▶ Antipsychotic

Generic and Brand Name	Efficacy	Hypoglycemia Risk	Weight Change	GI Symptoms	Effect on ASCVD	Effect on CHF	Effect on Progression of DKD
Alpha-glucosidase inhibitors							
Acarbose (Precose(R))	Intermediate	not significant	not significant	diarrhea, flatulence	--	--	--
Miglitol (Glyset(R))	Intermediate	not significant	not significant	diarrhea, flatulence	--	--	--
Amylin Analogues							
Pramlintide (Symlin(R), Symlinpen(R))	Intermediate	not significant	reduction	nausea, vomiting	--	--	--
Biguanides							
Metformin immediate-release (Glucophage(R))	High	not significant	no gain; possible reduction	diarrhea, abdominal cramping	potential benefit	neutral	neutral
Metformin extended-release (Glucophage(R) XR, Glumetza(R), Fortamet(R))							
DPP-4 Inhibitors							
Alogliptin benzoate (Nesina)	Intermediate	not significant	not significant	not significant	neutral	potential risk	neutral
Linagliptin (Tradjenta(R))	Intermediate	not significant	not significant	not significant	neutral	neutral	neutral
Saxagliptin (Onglyza(R))	Intermediate	not significant	not significant	not significant	neutral	potential risk	neutral

Feedback

Ask Watson

Feedback

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- Jaypirca(TM) for MCL
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Support Request



資源

- 黑框警告
- Comparative Tables
- **Do Not Confuse Drug List**
- Drug Classes
- Drug Consults
- REMS



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切勿混淆

針對近似的藥物名稱，列出切勿混淆清單

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顯示 74 of 969 以下項的結果：

Drug Name	May be confused with
Abelcet (Amphotericin B Lipid Complex)	amphotericin B (Amphotericin B)
Accupril (Quinapril Hydrochloride)	Aciphex (Rabeprazole Sodium)
acetaZOLAMIDE (Acetazolamide)	acetoHEXAMIDE
Acetic Acid for Irrigation (Acetic Acid)	Glacial Acetic Acid (Acetic Acid)
acetoHEXAMIDE	acetaZOLAMIDE (Acetazolamide)
Aciphex (Rabeprazole Sodium)	Accupril (Quinapril Hydrochloride)

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Drug Consults

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Abbreviations

ABFM (Augmented Berlin-Frankfurt-Muenster) +/- Nelarabine - Used for T-cell Acute Lymphoblastic Leukemia

Abuse-Deterrent Opioid Medications

ABVD - Used for Hodgkin's Disease

AC - Used for Breast Cancer

AC FOLLOWED BY T WITH TRASTUZUMAB - Used for Breast Cancer

Accidental Awareness During General Anesthesia

ACE Inhibitor-Induced Acute Renal Failure

治療霍奇金氏淋巴瘤的藥物

ABVD - Used for Hodgkin's Disease

藥物諮詢 ⓘ

RESPONSE

- DOXOrubicin 25 mg/m(2) IV, days 1 and 15
- Bleomycin 10 mg/m(2) IV, days 1 and 15
- VinBLAStine 6 mg/m(2) IV, days 1 and 15
- Dacarbazine 375 mg/m(2) IV, days 1 and 15 [1]
- Repeat cycle every 28 days

Reference

1. Bonadonna G & Santoro A: ABVD chemotherapy in the treatment of Hodgkin's disease. Cancer Treat Rev 1982; 9(1):21-35.
PubMed Abstract: <http://www.ncbi.nlm.nih.gov/...>
PubMed Article: <http://www.ncbi.nlm.nih.gov/...>

Last Modified: February 06, 2017

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REMS (Risk Evaluation & Mitigation Strategy) 藥物風險評估暨管控計畫

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Displaying 4 of 97 results for "REMS"

Fenfluramine Elements to Assure Safe Use, Implementation System, Medication Guide

Fentanyl 類鴉片止痛劑 Elements to Assure Safe Use, Implementation System, Medication Guide

Fentanyl Citrate Elements to Assure Safe Use, Implementation System, Medication Guide

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Fentanyl

Drug Classes: [Analgesic](#) | [Central Nervous System Agent](#) | [All](#)

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Black Box Warning

REMS

Drug Interactions (single)

Medication Safety REMS

Summary

- Duragesic(R) (Opioid Analgesic REMS): To make a REMS-compliant education program available to healthcare professionals (including nurses and pharmacists) regarding the treatment and monitoring of patients with pain.
- To counsel patients and/or their caregivers, with every prescription, on safe use, serious risks, storage, and disposal of these products.
- To emphasize to patients and their caregivers the importance of reading the Medication Guide every time it is provided by their pharmacist.
- To consider other tools to improve patient, household, and community safety.
- lonsys(R) (lonsys REMS): To reduce serious adverse outcomes (eg, addiction, unintentional overdose, death) resulting from inappropriate prescribing, misuse, and abuse of extended-release or long-acting opioid analgesics while maintaining patient access to pain medications
- To mitigate the risk of misuse, abuse, addiction, overdose and serious complications due to medication errors by: prescribing and dispensing transmucosal immediate release fentanyl medicines only to appropriate patients, which includes use only in opioid-tolerant patients; preventing inappropriate conversion between transmucosal immediate release fentanyl medicines; preventing accidental exposure to children and others for whom it was not prescribed
- To educate prescribers, pharmacists, and patients on the potential for misuse, abuse, addiction, and overdose of transmucosal immediate release fentanyl medicines
- To inform patients or caregivers about the serious risks associated with transmucosal immediate release and extended-release or long-acting fentanyl treatment
- Subsys(R), Fentanyl buccal (Actavis) (Transmucosal Immediate-Release Fentanyl (TIRF) Products REMS): To mitigate the risk of overdose by requiring documentation of opioid tolerance with every TIRF prescription for outpatient use and requiring inpatient pharmacies to develop policies and procedures to verify opioid tolerance in inpatients who require TIRF medicines while hospitalized as well as educating prescribers, pharmacists and patients that the safe use of TIRF medicines requires patients to be opioid-tolerant

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Fentanyl

Drug Classes: [Analgesic](#) | [Central Nervous System Agent](#) | [All](#)Routes: [Sublingual](#) | [Transdermal](#)

Substance

Fentanyl

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1.減少不良的後果(成癮、無心過量、死亡)
2.減輕誤用、濫用、過量、成癮的風險

Dosing/Administration

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Medication Safety

REMS

Summary

- Duragesic(R) (Opioid Analgesic REMS): To make a REMS-compliant education program available to healthcare professionals (including nurses and pharmacists) regarding the treatment and monitoring of patients with pain.
- To counsel patients and/or their caregivers, with every prescription, on safe use, serious risks, storage, and disposal of these products.
- To emphasize to patients and their caregivers the importance of reading the Medication Guide every time it is provided by their pharmacist,
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- To mitigate the risk of misuse, abuse, addiction, overdose and serious complications due to medication errors by: prescribing and dispensing transmucosal immediate release fentanyl medicines only to appropriate patients, which includes use only in opioid-tolerant patients; preventing inappropriate conversion between transmucosal immediate release fentanyl medicines; preventing accidental exposure to children and others for whom it was not prescribed
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可輸入成份名稱或是商品名稱

常見藥品諮詢問題種類

- 劑量(肝腎功能不良、老人、兒童)之調整及投藥方式
- 藥物不良反應
- 藥品交互作用
- 藥物動力學
- 適應症
- 中毒或藥品過量的處理
- 其他，
如：相容性、禁忌、費用、配製、安定性、貯存等

藥師綜合個案的問題

- 醫生考慮

一位75歲有心房顫動合併高血壓的病人，應該使用抗凝血藥物預防中風嗎？

- 病人需求

本人表示之前曾使用過Aspirin，但覺得吃了胃不舒服，所以不太喜歡...

- 家屬關心

擔心使用抗凝血藥物預防中風，是否會增加出血風險？

資料來源：輔仁大學附設醫院藥劑部劉人瑋主任

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Aspirin

Aspirin

Dosing **Aspirin**

Adverse Effects **Aspirin**

Indications **Aspirin**

Interactions **Aspirin**

Aspirin (Buffered)

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- Orserdu(
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Aspirin- Uses

Aspirin

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FDA

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Non-FDA Uses



請參閱 '深入解答' 瞭解詳細結果。

- Adenocarcinoma of esophagus; Prophylaxis
- Atrial fibrillation - Thromboembolic disorder; Prophylaxis
- Cancer - Thromboembolic disorder; Prophylaxis
- Carotid artery stenosis
- Colorectal cancer, Nonmetastatic, post diagnosis
- Colorectal cancer; Prophylaxis
- Coronary stent stenosis, Subacute; Prophylaxis
- Death, Primary prevention in women
- Disorder of cardiovascular system, Secondary
- Flushing, Niacin Induced
- In vitro fertilization - Pregnancy-induced by

列印

Aspirin

Atrial fibrillation - Thromboembolic disorder; Prophylaxis

FDA Approval:

- Adult, no
- Pediatric, no

Efficacy:

- Adult, Evidence favors efficacy

Strength of Recommendation:

- Adult, [Class IIa](#)

Strength of Evidence:

- Adult, [Category B](#)

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消費者藥物資訊

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Aspirin- Comparative Efficacy

1.考量問題：是否有其他藥物可選擇？

ASPIRIN

Drug Classes: [Analgesic](#) | [Antipyretic](#) | [All](#)

Routes: [Oral](#) | [Rectal](#)

Regulatory Authority



FDA

簡要解答 深入解答 全部結果

Atrial fibrillation - Thromboembolic disorder; Prophylaxis -- Comparative Efficacy

1 / 4 results 用於 atrial fibrillation - thromboembolic disorder; ...

Adult Dosing



Normal Dosage

Important Note

Beers Criteria: Use caution or avoid use as potentially inappropriate in older adults

Oral route

Atrial fibrillation - Thromboembolic disorder; Prophylaxis

- a) Guidelines from The American College of Chest Physicians (ACCP) recommends long-term aspirin 75 to 325 mg orally per day in patients with a low risk of stroke (CHADS(2) score of 0) if they choose to receive antithrombotic therapy, and in intermediate to high risk patients (CHADS(2) score of 1 or 2) who are unsuitable for oral anticoagulant therapy or who choose not to receive anticoagulants [54].
- b) Patient With Atrial Fibrillation Receiving Intracoronary Stents
 - 1) Guidelines from The American College of Chest Physicians (ACCP) recommends the following: Patients with atrial fibrillation at high risk of stroke (CHADS(2) score of 2 or higher): warfarin plus dual antiplatelet therapy for 1 month after bare metal stent placement or 3 to 6 months after drug eluting stent placement, followed by warfarin plus a single antiplatelet agent for up to 12 months of total therapy. After 12 months, continue appropriate antithrombotic therapy for atrial fibrillation

ASPIRIN

Drug Classes: [Analgesic](#) | [Antipyretic](#) | [All](#)

Routes: [Oral](#) | [Rectal](#)

簡要解答 深入解答 全部結果

atrial fibrillation - Thromboembolic disorder; Prophylaxis -- Comparative Efficacy

1 / 7 results 用於 atrial fibrillation - thromboembolic disorder; Prophylaxis

Adult Dosing



Normal Dosage

Important Note

Beers Criteria: Use caution or avoid use as potentially inappropriate in older adults

Oral route

Antiphospholipid syndrome

a) Guideline Dosage

- 1) Usual dosage for primary prophylaxis
- 2) Usual dosage for pregnant women
- 3) Usual dosage in obstetric antiphospholipid syndrome: 75 to 100 mg orally daily in combination with heparin

Atrial fibrillation - Thromboembolic disorder; Prophylaxis

- a) Guidelines from The American College of Chest Physicians (ACCP) recommends long-term aspirin 75 to 325 mg orally per day in patients with a low risk of stroke (CHADS(2) score of 0) if they choose to receive antithrombotic therapy, and in intermediate to high risk patients (CHADS(2) score of 1 or 2) who are unsuitable for oral anticoagulant therapy or who choose not to receive anticoagulants [54].
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Regulatory Authority



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關於以下項的搜尋 "warfarin" 均不相符。

您要尋找的是不是：
farin, marfarin, afrin



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Warfarin- FDA Uses

主頁 藥物相互作用 IV 相容性 藥物鑒定 藥物比較 CareNotes NeoFax® / Pediatrics Tox 和藥物產品查找 RED BOOK 計算器

WARFARIN [您的的搜尋： warfarin]

Drug Classes: [Anticoagulant](#) | [Blood Modifier Agent](#) | [All](#)

Routes: **Oral**

2.考量問題：此藥物的適應症為何？

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深入解答

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Drug Interactions (single)

Dosing/Administration

FDA Uses



請參閱 '簡要解答' 瞭解綜述結果。

Warfarin Sodium

[Atrial fibrillation - Thromboembolic disorder](#)

[Atrial fibrillation - Thromboembolic disorder; Prophylaxis](#)

[Prosthetic cardiac valve component embolism](#)

[Prosthetic cardiac valve component embolism; Prophylaxis](#)

[Pulmonary embolism](#)

[Pulmonary embolism; Prophylaxis](#)

[Thrombosis, Post myocardial infarction; Prophylaxis](#)

[Venous thromboembolism](#)

[Venous thromboembolism; Prophylaxis](#)

Atrial fibrillation - Thromboembolic disorder

FDA Labeled Indication

a) Overview

FDA Approval: Adult, yes; Pediatric, no

Efficacy: Adult, Effective

Recommendation: Adult, Class IIa

Strength of Evidence: Adult, Category A

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warfarin

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FDA Labeled Indication

a) Overview

FDA Approval: Adult, yes; Pediatric, no

Efficacy: Adult, Effective

Recommendation: Adult, Class IIa

Strength of Evidence: Adult, Category A

See Drug Consult reference: [RECOMMENDATION AND EVIDENCE RATINGS](#)

是否為核准的適應症用藥？
有建議強度與證據等級嗎？

b) Summary:

Product Availability

The marketing and distribution of warfarin sodium for injection has been discontinued as of 5/2/2014 [\[15\]](#)

Indication

Warfarin is indicated for the prophylaxis and treatment of thromboembolic complications associated with atrial fibrillation [\[14\]](#).

Limitations of Use

Warfarin has no direct effect on an established thrombus, nor does it reverse ischemic tissue damage. Once a thrombus has occurred, however, the goals of anticoagulant treatment are to prevent further extension of the formed clot and to prevent secondary thromboembolic complications that may result in serious and possibly fatal sequelae [\[14\]](#).

Evidence (Nonvalvular Atrial Fibrillation)

Direct thrombin inhibitors (DTIs) were similar to adjusted-dose warfarin (INR target, 2 to 3) for reduction in the composite of vascular deaths and ischemic events or composite of stroke, systemic embolic (S/SE) event, MI, and cardiovascular mortality in patients with nonvalvular AF who had 1 or more risk factors for stroke in a meta analysis, and a randomized study of patients underlying electrical cardioversion [\[16\]](#)[\[17\]](#). No significant bleeding differences were observed between warfarin and edoxaban [\[17\]](#); however, the addition of aspirin to oral anticoagulants significantly increased risk of major bleeding events and hospitalizations related to bleeding [\[18\]](#). The estimated annual event rate for ischemic stroke and risk of intracranial hemorrhage (ICH) events were lowest for target INR between 2 to 2.5 compared to other INR ranges according to pooled data from 3 large, randomized trials of patients with nonvalvular atrial fibrillation receiving warfarin. Additionally,

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檢視證據等級與建議強度

Recommendation, Evidence and Efficacy Ratings

藥物諮詢

RESPONSE

The Micromedex Efficacy, Strength of Evidence and Strength of Recommendation definitions are outlined below:

Table 1. Strength Of Recommendation		
Class I	Recommended	The given test or treatment has been proven to be useful, and should be performed or administered.
Class IIa	Recommended, In Most Cases	The given test, or treatment is generally considered to be useful, and is indicated in most cases.
Class IIb	Recommended, In Some Cases	The given test, or treatment may be useful, and is indicated in some, but not most, cases.
Class III	Not Recommended	The given test, or treatment is not useful, and should be avoided.
Class Indeterminate	Evidence Inconclusive	

Table 2. Strength Of Evidence	
Category A	Category A evidence is based on data derived from: Meta-analyses of randomized controlled trials with homogeneity with regard to the directions and degrees of results between individual studies. Multiple, well-done randomized clinical trials involving large numbers of patients.
Category B	Category B evidence is based on data derived from: Meta-analyses of randomized controlled trials with conflicting conclusions with regard to the directions and degrees of results between individual studies. Randomized controlled trials that involved small numbers of patients or had significant methodological flaws (e.g., bias, drop-out rate, flawed analysis, etc.). Nonrandomized studies (e.g., cohort studies, case-control studies, observational studies).
Category C	Category C evidence is based on data derived from: Expert opinion or consensus, case reports or case series.
No Evidence	

Table 3. Efficacy		
Class I	Effective	Evidence and/or expert opinion suggests that a given drug treatment for a specific indication is effective
Class IIa	Evidence Favors Efficacy	Evidence and/or expert opinion is conflicting as to whether a given drug treatment for a specific indication is effective, but the weight of evidence and/or expert opinion favors efficacy.
Class IIb	Evidence is Inconclusive	Evidence and/or expert opinion is conflicting as to whether a given drug treatment for a specific indication is effective, but the weight of evidence and/or expert opinion argues against efficacy.
Class III	Ineffective	Evidence and/or expert opinion suggests that a given drug treatment for a specific indication is ineffective.

Therapeutic Uses

3. 考量問題：使用抗凝血藥物是否可顯著降低中風危險？

Atrial fibrillation - Thromboembolic disorder; Prophylaxis

FDA Labeled Indication

a) Overview

FDA Approval: Adult, yes; Pediatric, no

Efficacy: Adult, Effective

Recommendation: Adult, Class I

Strength of Evidence: Adult, Category A

See Drug Consult reference: [RECOMMENDATION AND EVIDENCE RATINGS](#)

Evidence (Elderly)

Adjusted-dose warfarin significantly reduced the incidence of the composite endpoint of fatal and nonfatal disabling stroke (ischemic or hemorrhagic), intracranial hemorrhage, and arterial embolism among patients 75 years or older with chronic AF or atrial flutter compared with aspirin [22]. The recurrence of hemorrhagic events showed variable results; there were no significant differences on extracranial hemorrhage in elderly patients [22].

4) Elderly

a) Adjusted-dose warfarin reduced the incidence of the composite endpoint of fatal and nonfatal disabling stroke (ischemic or hemorrhagic), intracranial hemorrhage, and other clinically significant arterial embolism compared with aspirin 75 mg/day, among patients 75 years or older with chronic atrial fibrillation or atrial flutter, with no significant difference on major extracranial hemorrhage (BAFTA; N=973) [22].

Summary :
療效與出血風險

詳細說明的建議有...

檢視
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4) Elderly

a) Adjusted-dose warfarin reduced the incidence of the composite endpoint of fatal and nonfatal disabling stroke (ischemic or hemorrhagic), intracranial hemorrhage, and other clinically significant arterial embolism compared with aspirin 75 mg/day, among patients 75 years or older with chronic atrial fibrillation or atrial flutter, with no significant difference on major extracranial hemorrhage (BAFTA; N=973)

[22]

References

[22] Mant J, Hobbs R, Fletcher K, et al: Warfarin versus aspirin for stroke prevention in an elderly community population with atrial fibrillation (the Birmingham Atrial Fibrillation Treatment of the Aged Study, BAFTA): a randomised controlled trial. Lancet 2007; 370:493-503.

PubMed Abstract: <http://www.ncbi.nlm.nih.gov/...>

關閉

Adverse Reactions

4. 考量問題：使用抗凝血藥物可能的副作用？

主頁	藥物 相互作用	IV 相容性	藥物 鑒定	藥物 比較	CareNotes®	NeoFax® / Pediatrics	其他工具 ▼
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Adult Dosing

Pediatric Dosing

FDA Uses

Non-FDA Uses

Dose Adjustments

Administration

Comparative Efficacy

Place In Therapy

Medication Safety

Contraindications

Precautions

Adverse Effects

Black Box Warning

REMS

Drug Interactions (single)

IV Compatibility (single)

Pregnancy & Lactation

Monitoring

Do Not Confuse

Adverse Effects

請參閱 '簡要解答' 瞭解綜述結果。

- Cardiovascular Effects
- Dermatologic Effects
- Endocrine/Metabolic Effects
- Gastrointestinal Effects
- Hematologic Effects**
- Hepatic Effects
- Immunologic Effects
- Musculoskeletal Effects
- Neurologic Effects
- Ophthalmic Effects
- Renal Effects
- Reproductive Effects
- Respiratory Effects
- Other

Cardiovascular Effects

Warfarin Sodium

- Cholesterol embolus syndrome
- Gangrenous disorder
- Hemopericardium
- Vasculitis

Cholesterol embolus syndrome

a) Summary

1) Systemic atheroemboli and cholesterol microemboli effecting solid organs and extremities, ranging from local necrosis to fatal cases, have occurred during warfarin therapy. Patients may present with

列印

Hematologic Effects

Warfarin Sodium

- Anemia
- Blood coagulation disorder
- Eosinophil count raised
- Hemolytic anemia
- Hemorrhage**
- Summary

毒理學

疾病

Drug Consults

eMC SmPC (UK)

Index Nominum

IT- Dialogo Sui Farmaci

Martindale

PDR®

Product Lookup - Martindale

Product Lookup - RED Book Online

Product Lookup - Tox & Drug

消費者藥物資訊



Adverse Reactions

Hemorrhage

出血的危險因子

c) Summary

1) Risk factors for major or fatal bleeding in patients taking warfarin sodium include a higher starting INR, age 65 years or older, variable INRs, history of gastrointestinal bleeding, hypertension, cerebrovascular disease, serious heart disease, anemia, malignancy, trauma, renal insufficiency, concomitant drugs, and long duration of warfarin therapy [116]. Other risk factors for a major bleed occurring during warfarin anticoagulation are comorbid conditions, atrial fibrillation, and the first 90 days of warfarin therapy [123][124][125]. Regular monitoring of INR should be performed on all patients. More frequent monitoring, careful dose adjustment, and a shorter duration of therapy may be warranted in patients at high risk for bleeding [116].

b) Prevention and Management

- 1) Perform regular (ie, generally every 1 to 4 weeks) INR monitoring in all treated patients [116]
- 2) Consider more frequent INR monitoring, careful dose titration to desired INR, and shortest possible therapy duration in high-risk patients [116]
- 3) Monitor INR more frequently with treatment initiation, dose adjustment, or withdrawal of other drugs (including botanicals) [116]
- 4) Determine INR immediately before any dental or surgical procedure [116]
- 5) Adjust the dose to maintain INR on the low end of the therapeutic range to continue anticoagulation in patients undergoing minimally invasive procedures [116]
- 6) Do not routinely base vitamin K antagonist (ie, warfarin) therapy interruption solely on clinical prediction rules for bleeding [3].
- 7) If the timeline for anticoagulant reversal is more than 24 hours, interrupt therapy. Oral or parenteral vitamin K may be administered if necessary [116] based on INR [147].
- 8) If expedited (ie, within 1 to 24 hours) anticoagulant reversal is needed, withhold drug. Oral or parenteral vitamin K(1) may be administered if necessary [116]
- 9) If emergent (ie, within less than 1 hour) anticoagulant reversal is required, withhold drug. Consider high-dose phytonadione IV. Consider clotting factor supplementation with prothrombin complex concentrates (eg, 4-factor prothrombin complex concentrate, recombinant factor VIIA plus 3-factor prothrombin complex concentrate, activated prothrombin complex concentrate, 3-factor prothrombin complex concentrate, recombinant factor VIIA, or fresh frozen plasma) [116][147]
- 10) The following are evidence-based guidelines from the American College of Chest Physicians for managing elevated INR or bleeding in patients on vitamin K antagonist (ie, warfarin) therapy:
 - a) INR between 4.5 and 10 with no evidence of bleeding:
 - 1) Routine use of vitamin K is not recommended [3].
 - b) INR greater than 10 with no evidence of bleeding:
 - 1) Administer oral vitamin K [3].
 - c) Vitamin K antagonist-associated major bleeding:
 - 1) Instead of plasma use, achieve rapid anticoagulation reversal with 4-factor prothrombin complex concentrate. Coadminister with vitamin K 5 to 10 mg via slow IV injection rather than attempting reversal with coagulation factor alone [3].

預防與管理：
針對不良反應之處理建議

Monitoring

5. 考量問題：使用抗凝血藥物須監測的項目/頻率？

Dosing/Administration

Adult Dosing
Pediatric Dosing
FDA Uses
Non-FDA Uses
Dose Adjustments
Administration
Comparative Efficacy
Place In Therapy

Medication Safety

Contraindications
Precautions
Adverse Effects
Black Box Warning
REMS
Drug Interactions (single)
IV Compatibility (single)
Pregnancy & Lactation

Monitoring

Medication Safety

Monitoring

請參閱 [簡要解答](#) 瞭解綜述結果。

 [檢視完整文件](#)

 [列印](#)

監測項目與 監測頻率

A) Warfarin Sodium

1) Therapeutic

a) Laboratory Parameters

1) INR

a) Monitor INR daily following the initial warfarin dose until the INR stabilized to the therapeutic range; then periodically based on clinical need, generally every 1 to 4 weeks. Perform additional INR testing when other warfarin products are interchanged with Coumadin(R) or when other drugs (including botanicals) are initiated, discontinued, have dosages changed, or taken irregularly. patients with a high risk of bleeding may require more frequent INR monitoring (manufacturer) [2].

b) Monitor INR up to every 12 weeks in patients with consistently stable INRs, defined as at least 3 months of consistent results with no need to adjust warfarin dosing. Evaluate the INR within 1 to 2 weeks if the patient experiences a single out of range value, below or above the therapeutic INR by 0.5 or less (American College of Chest Physicians guidelines) [1]

In general, the recommended target INR is 2.5 (range, 2 to 3) in adults and pediatric patients in most indications [112][1], except in the following situations:

Target INR is 3 (range 2.5 to 3.5):

相關結果

毒理學
疾病

Drug Consults
eMC SmPC (UK)
Index Nominum
IT- Dialogo Sui Farmaci
Martindale
PDR®
Product Lookup - Martindale
Product Lookup - RED Book Online
Product Lookup - Tox & Drug
消費者藥物資訊

達到穩定狀態後的建議
監測頻率

Patient Handouts

6. 考量問題：如何進行用藥指導？

Monitoring	<p><u>Drugs and Foods to Avoid:</u> Ask your doctor or pharmacist before using any other medicine, including over-the-counter medicines, vitamins, and herbal products.</p> <p>Many medicines and foods can affect how warfarin works and may affect the PT/INR test results. Tell your doctor before you start or stop any medicine, especially the following:</p> <p>Co-enzyme Q10, echinacea, garlic, ginkgo, ginseng, goldenseal, or St John's wort Another blood thinner, including apixaban, argatroban, bivalirudin, cilostazol, clopidogrel, dabigatran, desirudin, dipyridamole, heparin, lepirudin, prasugrel, rivaroxaban, ticlopidine Medicine to treat depression or anxiety, including citalopram, desvenlafaxine, duloxetine, escitalopram, fluoxetine, fluvoxamine, milnacipran, paroxetine, sertraline, venlafaxine, vilazodone Medicine to treat an infection NSAID pain or arthritis medicine, including aspirin, celecoxib, diclofenac, diflunisal, fenoprofen, ibuprofen, indomethacin, ketoprofen, ketorolac, mefenamic acid, naproxen, oxaprozin, piroxicam, sulindac. Check labels for over-the-counter medicines to find out if they contain an NSAID. Steroid medicine, including dexamethasone, hydrocortisone, methylprednisolone, prednisolone, prednisone</p>
Do Not Confuse	
Mechanism of Action	
Mechanism of Action	
Pharmacokinetics	
Pharmacokinetics	
Patient Education	
Medication Counseling	
Patient Handouts	
Toxicology	
Clinical Effects	

監管單位標示

Warfarin Sodium [您的搜尋： warfarin]

Drug Classes: [Anticoagulant](#) | [Blood Modifier Agent](#) | [All](#)

Routes: **Oral**

Regulatory Authority



Health Canada

簡要解答

深入解答

全部結果

Dosing/Administration

[Adult Dosing](#)

[Pediatric Dosing](#)

Dosing/Administration

[Adult Dosing](#)

請參閱 '深入解答' 瞭解詳細結果。



列印

相關結果

[毒理學](#)

[疾病](#)



US, Food & Drug
Administration
美國食品藥品監督
管理局

Does not change how I use Micromedex for USA
and most regions around the world



Health Canada
加拿大衛生部

Enables providers to standardize care around
Health Canada approvals and local guidelines



European
Medicines Agency
歐洲藥品管理局

Enables providers to standardize care around
EMA approvals

各監管單位特有項目內容

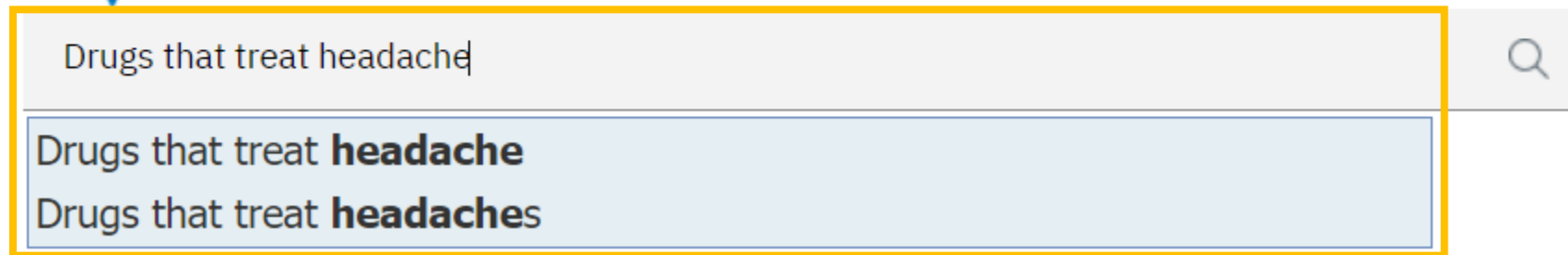


Current Sections	Canadian/EMA Specific Content
Adult Dosing	Adult Dosing
Pediatric Dosing	Pediatric Dosing
<i>FDA Uses</i>	<i>Labeled Uses</i>
<i>Non-FDA Uses</i>	No Section Displayed
Dose Adjustments	Dose Adjustments
Black Box Warnings	Black Box Warnings
Trade Names	Trade Names

搭配專業術語查詢



搜尋藥物、疾病、毒理學及其他資訊



Drugs That Treat Headache

將檢索結果，依證據等級分類

顯示： Effective (7) | Evidence Favors Efficacy (31) | Evidence is Inconclusive (2) | Ineffective (0) | Not Rated (0)

Displaying 40 results for "Drugs That Treat Headache"

▼ Effective (7 results)

藥物名稱	Indication	年齡組別
Aspirin	Headache	Adult, Pediatric
Caffeine	Headache; Adjunct	Adult
Dihydroergotamine Mesylate	Cluster headache	Adult
Galcanezumab-gnlm	Episodic cluster headache	Adult
Ibuprofen	Headache	
Naproxen Sodium	Headache	Adult, Pediatric
Sumatriptan Succinate	Cluster headache	Adult

點擊藥品名稱，可進入藥品資訊

▶ Evidence Favors Efficacy (31 results)

▶ Evidence is Inconclusive (2 results)



工具好幫手

主頁	藥物 相互作用	IV 相容性	藥物 鑒定	藥物 比較	CareNotes	NeoFax® / Pediatrics	其他工具 ▼
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藥物相互作用

[主頁](#) [藥物相互作用](#) [IV 相容性](#) [藥物鑒定](#) [藥物比較](#) [CareNotes](#) [NeoFax / Pediatrics](#) [其他工具 ▾](#)

藥物相互作用

在搜尋欄位鍵入藥物名稱（品牌或學名）。選擇藥物並按一下 **添加過敏**（新增）按鈕。

輸入搜尋詞

相符的藥

保健食品：
歐越莓/
山桑子/
覆盆子

要檢查的藥物：

添加過敏

Bilberry
Ibuprofen
Warfarin

日常用藥：
止痛藥

治療用藥：
AF, 高血壓

帶有星號 (*) 的字母大寫項目表示過敏。

[清除](#) [提交](#)

添加過敏

日常用藥：
止痛藥


治療用藥：
AF, 高血壓

帶有星號 (*) 的字母大寫項目表示過敏。

清除

提交

新增過敏症狀。

在搜尋欄位中鍵入過敏症狀。選擇過敏症狀並按一下  (新增) 按鈕。
按一下「更新」將您的選擇加入至「藥物相互作用」中「要檢查的藥物」表單。

輸入過敏症狀:

asp

相符的過敏症狀: (7)

ASPARAGINASE
ASPARAGINE
ASPARAGUS
ASPARTIC ACID
ASPERGILLUS FUMIGATUS
ASPIRIN INTOLERANCE
ASPIRIN

要檢查的過敏症狀:

ASPIRIN
SEAFOOD

取消

更新

選擇藥物並按一下  (新增) 按鈕。

要檢查的藥物:

添加過敏

Bilberry
Ibuprofen
Warfarin
ASPIRIN*
SEAFOOD*

Bilberry Extra Strength
Bilberry Extract
Bilberry Extract (Beta Carotene/Bilber...
Bilberry Extract (Bilberry Extract/Bio...
Bilberry Extract (Bilberry)
Bilberry Extract/Bioflavonoid/Querceti...

帶有星號 (*) 的字母大寫項目表示過敏。

清除

提交

Drug Interaction Results

← 修改相互作用

列印

細化方式： 藥物： All 嚴重性： All 文件： All 類型： All

跳轉到： 藥物-藥物 (2) | 複方 (0) | 過敏症狀 (1) | 食物 (12) | 乙醇 (1) | 實驗室 (1) | 抽煙 (1) | 懷孕 (2) | 哺乳期 (2)

Drug-Drug 相互作用 (2)

藥物：

IBUPROFEN -- WARFARIN SODIUM

嚴重性：

 Major

文件：

Fair

綜述：

Concurrent use of ANTICOAGULANTS and NSAIDS may result in increased risk of bleeding.

BILBERRY -- WARFARIN SODIUM

 Moderate

Fair

Concurrent use of BILBERRY and ANTICOAGULANTS may result in increased risk of bleeding.

複方 (未找到)

嚴重性
等級不同

Drug-過敏症狀 相互作用 (1)

藥物：

IBUPROFEN -- ASPIRIN

嚴重性：

 UnknownWarfarin分別和
Ibuprofen、歐越莓
併用皆會增加出血風險

Drug-食物 相互作用 (12)

Ask Watson

定義

嚴重性：



禁忌

禁止同時使用這些藥物。



嚴重

這種相互作用可能危及生命和/或需要醫療干預以儘量減少或避免嚴重的不良影響。



中等

這種相互作用可能導致加重患者的病情和/或需要在治療中發生改變。



較弱

這種相互作用將限制臨床效果。表現可能包括增加副作用的頻率或嚴重程度，但一般不需要在治療中發生重大改變。



未知

未知。

INTERACTION DETAIL

Warning:

Concurrent use of ANTICOAGULANTS and NSAIDS may result in increased risk of bleeding.

Clinical Management:

Coadministration of an anticoagulant and an NSAID may increase the risk of serious bleeding relative to the use of either drug alone (Prod Info CALDOLOR® intravenous injection, 2016; Prod Info CELEBREX® oral capsules, 2016; Prod Info COUMADIN® oral tablets, intravenous injection powder for solution, 2015) and may increase the risk of epidural or spinal hematomas that can result in long-term or permanent paralysis in patients who are receiving neuraxial anesthesia or undergoing spinal puncture (Prod Info PRADAXA® oral capsules, 2015; Prod Info SAVAYSA(TM) oral tablets, 2015). If used concomitantly, monitor for signs of bleeding (Prod Info CALDOLOR® intravenous injection, 2016; Prod Info CELEBREX® oral capsules, 2016).

Onset:

Not Specified

INTERACTION DETAIL

Major

Documentation:

Fair

Probable Mechanism:

additive effect on hemostasis

Summary:

Coadministration of an anticoagulant and an NSAID may increase the risk of serious bleeding relative to the use of either drug alone (Prod Info CALDOLOR® intravenous injection, 2016; Prod Info CELEBREX® oral capsules, 2016; Prod Info COUMADIN® oral tablets, intravenous injection powder for solution, 2015) and may increase the risk of epidural or spinal hematomas that can result in long-term or permanent paralysis in patients who are receiving neuraxial anesthesia or undergoing spinal puncture (Prod Info PRADAXA® oral capsules, 2015; Prod Info SAVAYSA(TM) oral tablets, 2015). If used concomitantly, monitor for signs of bleeding (Prod Info CALDOLOR® intravenous injection, 2016; Prod Info CELEBREX® oral capsules, 2016).

列印  關閉 

細化方式： 藥物： All 嚴重性： 2 (Selected) 文件： All 類型： All

跳轉到： 藥物-藥物 (1) | 食物 (2) | 抽煙 (1) | 哺乳期 (1)

Drug-Drug 相互作用 (1)			
藥物：	嚴重性：	文件：	綜述：
IBUPROFEN – WARFARIN SODIUM	<div><div>S</div>Major</div>	Fair	Concurrent use of All NSAIDS may result i
Drug-食物 相互作用 (2)			
藥物：	嚴重性：	文件：	綜述：
WARFARIN SODIUM	<div><div>S</div>Major</div>	Good	Concurrent use of WARFARIN and POMEGRANATE may result in increased warfarin plasma concentrations and increased risk of bleeding.
WARFARIN SODIUM	<div><div>S</div>Major</div>	Good	Concurrent use of WARFARIN and CRANBERRY JUICE may result in an increased risk of bleeding.
Drug-抽煙 相互作用 (1)			
藥物：	嚴重性：	文件：	綜述：
WARFARIN SODIUM	<div><div>S</div>Major</div>	Fair	Concurrent use of CYP1A2 SUBSTRATES and TOBACCO may result in decreased exposure of CYP1A2 substrates.
Drug-哺乳期 相互作用 (1)			
藥物：	嚴重性：	文件：	綜述：
IBUPROFEN	<div><div>S</div>Major</div>	Unknown	Infant risk cannot be ruled out: Available evidence and/ or expert consensus is inconclusive or is inadequate for determining infant risk when Ibuprofen is used during breast-feeding. Weigh the potential benefits of treatment against potential risks before prescribing Ibuprofen during breast-feeding.

選中/取消選中以細化嚴重性設定。

全部選中 | 全部不選

☒ Contraindicated

☒ Major

☐ Moderate

☐ Minor

☐ Unknown

取消

更新

定義

嚴重性：

禁忌

S

嚴重

!

中等

M

較弱

?

未知

文件：

卓越

良好

一般

未知

...

Ask Watson

多個藥物的IV相容性

IV 相容性

Add at least one drug and press View Compatibility

Drugs (1668)

Select Drug(s) to view Drug-Drug IV Compatibility

適用於
焦慮狀態

Lorazepam ×

Palonosetron hydrochloride ×

Solutions (257) *optional

Select Solution(s) to view Drug-Solution IV Compatibility

化療用藥



輸入至少一種藥品



需要時輸入溶液

Clear All

View Compatibility

NOTE: IV Compatibility for Drug - Drug Compatibility is displayed in drug pairs

由 Trissel's™ 2 Clinical Pharmaceuticals Database (Parenteral Compatibility). 支援。

多個藥物的IV相容性


IV 相容性結果 ◀ 修改相容性


Key :     

Preparation and Storage

Click to view Product and Storage Information

Drugs

 Lorazepam

 Palonosetron hydrochloride

Filter Results

☒ 全部選中 | ☐ 全部不選

Drugs

☒ Lorazepam

☒ Palonosetron hydrochloride

取消 更新

Tip: To see additional information on TPN/TNA compatibility, select a single drug from the list and choose Update.


Drug-Solution

Drug-Drug: Y-Site

Drug-Drug: Admixture

Drug-Drug: Syringe

相容性 : All

Y-Site Results Summary (View Compatibility Details)	Status
Lorazepam - Palonosetron hydrochloride	 相容

單一藥物的IV相容性


IV 相容性結果 ◀ 修改相容性


Key :     

Preparation and Storage

Click to view Product and Storage Information

Drugs

 Lorazepam

 Palonosetron hydrochloride

Filter Results

☒ 全部選中 | ☒ 全部不選







Drugs

☒ Lorazepam

☐ Palonosetron hydrochloride

取消 更新

Drug-Solution **Y-Site** Admixture Syringe TPN/TNA 相容性 : All

Y-Site Results Summary (View Compatibility Details)		Status
Acetaminophen		相容
Acyclovir sodium		相容
Alatrofloxacin mesylate		相容
Albumin Human		相容
Aldesleukin		不相容
Alemtuzumab		相容
Alfentanil hydrochloride		相容

藥物鑒定_用印碼查詢

Merative **Micromedex**®[我的訂閱](#) | [關道](#) | [Training Center](#) | [說明](#) | [下載中心](#) | [登出](#)

Keyword search

[主頁](#)[藥物
相互作用](#)[IV 相容性](#)[藥物
鑒定](#)[藥物
比較](#)[CareNotes](#)[NeoFax® /
Pediatrics](#)[Tox 和藥物
產品查找](#)[RED BOOK](#)[計算器](#)

藥物鑒定

[搜尋：按照印碼](#) | [無印碼?](#) [按一下此處按以下條件搜尋說明](#) ▶側面 1 : ☒ 部分印記側面 2 : ☒ 部分印記[清除](#)[搜尋](#)[Feedback](#)© Copyright Merative 2023 | [關於](#) | [聯絡資訊](#) | [Training Center](#) | [使用者指南](#) | [保修與免責聲明](#) | [Micromedex.com](#)

藥物鑒定_印碼查找結果

我的訂閱 | 簡道 | Training Center | 說明 | 下載中心 | 登出

Merative **Micromedex**®

Keyword search



主頁	藥物相互作用	IV 相容性	藥物鑒定	藥物比較	CareNotes	NeoFax® / Pediatrics	Tox 和藥物產品查找	RED BOOK	計算器
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藥物鑒定結果

修改鑒定

搜尋圖像

列印

6 以下項的相符項 : "mrk, 7"

按以下項排序所有結果 : 印記

6 藥物相符 用於 'M'

1 - 6 (6 相符的藥物) ◀ 第一個 ◀ 前面 | 後面 ▶ 最後一個 ▶▶

顯示 : ALL | 0-9 | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q | R | S | T | U | V | W | X | Y | Z

印記 ▼	藥物名稱	製造商	可用性	AAPCC	Poisindex 管理
MRK 711 Singulair	Singulair	Merck Sharp & Dohme LLC	United States	201078	MONTELUKAST
MRK 717 HYZAAR	Hyzaar 50-12.5	Merck Sharp & Dohme LLC	United States	310109	ANGIOTENSIN II ANTAGONISTS DIURETICS
MRK 747 HYZAAR	Hyzaar 100-25	Merck Sharp & Dohme LLC	United States	310109	ANGIOTENSIN II ANTAGONISTS DIURETICS
Mrk; 717	Hyzaar	Merck Frosst	Canada	310109	ANGIOTENSIN II ANTAGONISTS DIURETICS
Mrk; 74; Vioxx	Vioxx	Merck Frosst	Canada	201065	COX-2 INHIBITORS
Mrk; 74; Vioxx	Vioxx	Merck & Company	United States	201065	COX-2 INHIBITORS

藥物鑒定_印碼查找結果

藥物資訊

執行 Tox 和藥物產品查找: [Hyzaar 100-25 ▶](#)

執行 Martindale 藥物產品查找: [Hyzaar 100-25 ▶](#)

藥物名稱: HYZAAR 100-25

成分: HYDROCHLOROTHIAZIDE -- 25 MG
LOSARTAN -- 100 MG

相關文件: POISINDEX MANagements - ANGIOTENSIN II ANTAGONISTS
POISINDEX MANagements - DIURETICS
DRUGDEX EVALUATIONS - LOSARTAN
DRUGDEX EVALUATIONS - HYDROCHLOROTHIAZIDE

顏色: LIGHT YELLOW

形狀: TEARDROP-SHAPE

印記: HYZAAR, MRK 747

劑型: ORAL TABLET

可用容器大小: BOTTLE OF 4000, BOTTLE OF 30, BOTTLE OF 1000, BOTTLE OF 90, STRIP OF 100

AAPCC 代碼: 310109 - ANGIOTENSIN RECEPTOR BLOCKER IN COMBINATION WITH DIURETIC

NDC: 00006-0747-81
00006-0747-31
00006-0747-82
00006-0747-54
00006-0747-28

輔料: D&C YELLOW NO. 10 ALUMINUM LAKE
; HYDROXYPROPYL CELLULOSE
; HYPROMELLOSE ; LACTOSE, HYDROUS
; MAGNESIUM STEARATE ; MICROCRYSTALLINE CELLULOSE ; PREGELATINIZED STARCH

監管狀態: RX

可用性: UNITED STATES

列印

關閉

藥物資訊

可用容器大小: BOTTLE OF 1000, BOTTLE OF 90, STRIP OF 100, BOTTLE OF 4000, BOTTLE OF 30

AAPCC 代碼: 310109 - ANGIOTENSIN RECEPTOR BLOCKER IN COMBINATION WITH DIURETIC

輔料: D&C YELLOW NO. 10 ALUMINUM LAKE
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; MAGNESIUM STEARATE ; MICROCRYSTALLINE CELLULOSE ; PREGELATINIZED STARCH

監管狀態: RX

可用性: UNITED STATES

產品 ID 5724722

聯絡資訊: MERCK SHARP & DOHME



No Image Available

列印

關閉

藥物鑒定_用外觀查詢



- 主頁
- 藥物相互作用
- IV 相容性
- 藥物鑒定
- 藥物比較
- CareNotes
- NeoFax® / Pediatrics
- Tox 和藥物產品查找
- RED BOOK
- 計算器

藥物鑒定

搜尋：按照說明 [按一下此處按以下條件搜尋印碼](#)

- ☐ Black
- ☐ Blue
- ☐ Brown
- ☐ Clear
- ☐ Gold
- ☐ Gray
- ☐ Green
- ☐ Off-White
- ☐ Orange
- ☒ Pink
- ☐ Purple
- ☐ Red
- ☐ Tan
- ☐ White
- ☐ Yellow

形狀：

圖譜：

☒ 顯示帶結果的圖像

清除

搜尋

4 以下項的相符項："Egg-shape, All Patterns, Pink"

按以下項排序所有結果：

4 藥物相符 用於 'A'

1 - 4 (4 相符的藥物) [◀ 第一個](#) [◀ 前面](#) [後面](#) [▶ 最後一個](#)

顯示： | 0.9 | [A](#) | [B](#) | [C](#) | [D](#) | [E](#) | [F](#) | [G](#) | [H](#) | [I](#) | [J](#) | [K](#) | [L](#) | [M](#) | [N](#) | [O](#) | [P](#) | [Q](#) | [R](#) | [S](#) | [T](#) | [U](#) | [V](#) | [W](#) | [X](#) | [Y](#) | [Z](#)

隱藏圖像

圖像 (US)	印記 ▼	藥物名稱
	a ET	Erythrocin Stearate Filmtab
	a ET	Erythrocin Stearate Filmtab
	a PCE	PCE Dispartab
	a PCE	PCE Dispartab

Feedback

藥物比較

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藥物比較

在搜尋欄位鍵入藥物名稱（品牌或學名藥）。選擇藥物並按一下 ➤（新增）按鈕。

輸入搜尋詞：

相符的藥物名稱: (2)

[Warfarin Na](#)[Warfarin Sodium](#)

要檢查的藥物：

[Dabigatran Etexilate Mesylate](#)[Rivaroxaban](#)[Warfarin Sodium](#)

要檢查的藥物：

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藥物比較(適應症)_證據等級

Home	Drug Interactions	IV Compatibility	Drug ID	Drug Comparison	CareNotes	NeoFax / Pediatrics	Other Tools ▼
------	-------------------	------------------	---------	-----------------	-----------	---------------------	---------------

Drug Comparison Results

◀ Modify Comparison

Display in Column 1
Warfarin Sodium ▼

Display in Column 2
Dabigatran Etexilate Mesylate ▼

Update

Jump To: [↑ Top of Page](#) | [Dosing & Indications](#) | [Black Box Warning](#) | [Contraindications/Warnings](#) | [Drug Interactions \(single\)](#) | [Adverse Effects](#) | [Name Info](#) | [Mechanism of Action/Pharmacokinetics](#) | [Administration/Monitoring](#) | [How Supplied](#) | [Toxicology](#) | [Clinical Teaching](#) | [References](#)

FDA-Labeled Indications	FDA-Labeled Indications
View Detailed information in DRUGDEX ▶ ▶ Atrial fibrillation - Thromboembolic disorder FDA Approval: <ul style="list-style-type: none">Adult, yesPediatric, no Efficacy: <ul style="list-style-type: none">Adult, Effective Strength of Recommendation: <ul style="list-style-type: none">Adult, Class I ▶ Strength of Evidence: <ul style="list-style-type: none">Adult, Category A Atrial fibrillation - Thromboembolic disorder; Prophylaxis FDA Approval: <ul style="list-style-type: none">Adult, yesPediatric, no	View Detailed information in DRUGDEX ▶ ▶ Atrial fibrillation - Thromboembolic disorder; Prophylaxis FDA Approval: <ul style="list-style-type: none">Adult, yesPediatric, no Efficacy: <ul style="list-style-type: none">Adult, Effective Strength of Recommendation: <ul style="list-style-type: none">Adult, Class IIa ▶ Strength of Evidence: <ul style="list-style-type: none">Adult, Category B Deep venous thrombosis, Following parenteral therapy FDA Approval: <ul style="list-style-type: none">Adult, yesPediatric, no

藥物比較(不良反應)_一般/嚴重

[Home](#) | [Drug Interactions](#) | [IV Compatibility](#) | [Drug ID](#) | **[Drug Comparison](#)** | [CareNotes](#) | [NeoFax / Pediatrics](#) | [Other Tools ▼](#)

Drug Comparison Results [◀ Modify Comparison](#)

Display in Column 1: Warfarin Sodium | Display in Column 2: Dabigatran Etexilate Mesylate | **Update**

[Jump To: ↑ Top of Page | Dosing & Indications | Black Box Warning | Contraindications/Warnings | Drug Interactions \(single\) | **Adverse Effects** | Name Info | Mechanism of Action/Pharmacokinetics | Administration/Monitoring | How Supplied | Toxicology | Clinical Teaching | References](#)

Adverse Effects	Adverse Effects
View Detailed information in DRUGDEX ▶	View Detailed information in DRUGDEX ▶
Common <ul style="list-style-type: none">Dermatologic: Alopecia	Common <ul style="list-style-type: none">Gastrointestinal: Esophagitis, Gastritis, Gastroesophageal reflux disease (Atrial fibrillation, 5.5%), Gastrointestinal hemorrhage (DVT and pulmonary embolism, 0.7% to 3.1%; nonvalvular atrial fibrillation, 6.1%), Gastrointestinal ulcer, Indigestion (DVT and pulmonary embolism, 4.1% to 7.5%)Hematologic: Hemorrhage (DVT and pulmonary embolism treatment or prophylaxis, 9.7% to 12.3%; nonvalvular atrial fibrillation, 16.6%)
Serious <ul style="list-style-type: none">Cardiovascular: Cholesterol embolus syndrome, Tissue necrosis (Less than 0.1%)Dermatologic: Calciphylaxis, Tissue necrosis (Less than 0.1%)Hematologic: Hemorrhage, HemorrhageImmunologic: Hypersensitivity reactionMusculoskeletal: Compartment syndromeNeurologic: Intracranial hemorrhage	Serious <ul style="list-style-type: none">Cardiovascular: Myocardial infarction (DVT and pulmonary embolism, 0.1% to 0.66%; nonvalvular atrial fibrillation, 0.7%)Gastrointestinal: Gastrointestinal hemorrhage, Major (DVT and pulmonary embolism, 0.1% to 0.6%; nonvalvular atrial fibrillation, 1.6%)Hematologic: Hemorrhage, Major (DVT and pulmonary embolism, 0.3% to 2%; nonvalvular atrial fibrillation, 3.3%), ThrombosisImmunologic: AnaphylaxisNeurologic: Epidural hematoma, Intracranial hemorrhage (Nonvalvular atria

藥物比較-切換另一藥物

[Home](#) | [Drug Interactions](#) | [IV Compatibility](#) | [Drug ID](#) | **[Drug Comparison](#)** | [CareNotes](#) | [NeoFax / Pediatrics](#) | [Other Tools ▾](#)

Drug Comparison Results

◀ [Modify Comparison](#)

Display in Column 1
Warfarin Sodium

Display in Column 2
Dabigatran Etexilate Mesylate
Dabigatran Etexilate Mesylate
Rivaroxaban
Warfarin Sodium

[Jump To: ↑ Top of Page](#) | [Dosing & Indications](#) | [Black Box Warning](#) | [Contraindications/Warnings](#) | [Drug Interactions \(single\)](#) | [Adverse Effects](#) | [Name Info](#) | [Mechanism of Action/Pharmacokinetics](#) | [Administration/Monitoring](#) | [How Supplied](#) | [Toxicology](#) | [Clinical Teaching](#) | [References](#)

Adverse Effects

[View Detailed information in DRUGDEX ▶](#)

Common

- Dermatologic:** Alopecia

Serious

- Cardiovascular:** Cholesterol embolus syndrome, Tissue necrosis (Less than 0.1%)
- Dermatologic:** Calciphylaxis, Tissue necrosis (Less than 0.1%)
- Hematologic:** Hemorrhage, Hemorrhage
- Immunologic:** Hypersensitivity reaction
- Musculoskeletal:** Compartment syndrome

Adverse Effects

[View Detailed information in DRUGDEX ▶](#)

Common

- Gastrointestinal:** Esophagitis, Gastritis, Gastroesophageal reflux disease (Atrial fibrillation, 5.5%), Gastrointestinal hemorrhage (DVT and pulmonary embolism, 0.7% to 3.1%; nonvalvular atrial fibrillation, 6.1%), Gastrointestinal ulcer, Indigestion (DVT and pulmonary embolism, 4.1% to 7.5%)
- Hematologic:** Hemorrhage (DVT and pulmonary embolism treatment or prophylaxis, 9.7% to 12.3%; nonvalvular atrial fibrillation, 16.6%)

Serious

- Cardiovascular:** Myocardial infarction (DVT and pulmonary embolism, 0.1% to 0.66%; nonvalvular atrial fibrillation, 0.7%)
- Gastrointestinal:** Gastrointestinal hemorrhage, Major (DVT and pulmonary embolism, 0.1% to 0.6%; nonvalvular atrial fibrillation, 1.6%)
- Hematologic:** Hemorrhage, Major (DVT and pulmonary embolism, 0.3% to 2%; nonvalvular atrial fibrillation, 3.3%), Thrombosis
- Immunologic:** Anaphylaxis



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Find a calculator



Or click a letter to jump to that section. Click on a link below to use a formula or criteria.

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Displaying 694 calculators

A

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- [ABCD Rule Predicting Stroke Within 7 Days of a TIA](#)
- [ABCD2 Score to Predict Stroke Risk after TIA](#)
- [Absolute Eosinophil Count](#)

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Calculators

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By Category

Frequent Use Calculators

Antidote Dosing And Nomograms

- Blood Ethanol Concentration Estimation
- Acetaminophen (Paracetamol) Toxicity Assessment
- NAC Dosing for Acetaminophen Overdose
- Ethanol - Initial IV Dosing for Methanol/Ethylene Glycol Overdose
- Ethanol - IV Dosing Adjustment for Methanol/Ethylene Glycol Overdose

Laboratory Values

- Creatinine Clearance Estimate by Cockcroft-Gault Equation
- Creatinine Clearance Estimate by Cockcroft-Gault Equation (SI units)

Dosing Tools

- ACLS: Adult Emergency Drug Dosing Calculator
- PALS: Pediatric Emergency Drug Dosing Calculator
- Heparin Dosing Calculator
- IV Drip Maintenance Rate Calculator
- Maintenance Fluid Calculation for Children Based on Hourly Fluid Requirements
- Maintenance fluid calculation for children based on daily fluid requirements

Clinical Calculators

- A-a Gradient
- a/A Ratio
- Anion Gap

Measurement Calculators

- Body Mass Index (BMI) Quetelet's index)
- Body Mass Index (BMI) percentiles for boys (2 to 20 years)
- Body Mass Index (BMI) percentiles for girls (2 to 20 years)
- Body Surface Area (BSA Du Bois Method)
- Ideal body weight (method of Devine) and adjusted

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[< All Calculators](#)

ACLS: Adult Emergency Drug Dosing Calculator

Input

Patient Name:

Patient

Weight^{*}:

80

kg

▼

Create Dosing Table

Notes

- Use this calculator to generate a weight based dosing sheet for commonly used emergency medications.
- **Weight^{*}** is a mandatory input.
- You must have *pop-ups* enabled to see and print the customized dosing sheet.
- Once you have entered the patient **Weight**, and any optional information, click the **Create Dosing Table** button and the customized sheet will appear in a new window. A print prompt will appear automatically.

計算器

EBMcalc Medical Calculator - Google Chrome

about:blank

ACLS: Adult Emergency Drug Dosing Calculator

80 kg

Date: 2022/8/9 下午3:04:38

Patient Name: Patient

Recommendations according to AHA guidelines ACLS resuscitation.

*Attention - Institutionally dispensed drug concentrations may vary.

Drug	Concentration	Route	Dose
Adenosine			
6 mg	3 mg/mL	Rapid IV Push	6 mg (2 mL) over 1 to 3 seconds
May Repeat: 12 mg X 2 MAX: 30 mg	3 mg/mL	Rapid IV Push	May Repeat: after 1 to 2 minutes, 12 mg (4 mL) over 1 to 3 seconds; may repeat another 12 mg after 1 to 2 minutes MAX: 30 mg
Follow adenosine IV push with 20 mL saline flush. Higher doses may be required in patients taking theophylline.			
Amiodarone: Cardiac Arrest			
300 mg	50 mg/mL	IV Push/IO	300 mg (6 mL)
May Repeat: 150 mg X 1	50 mg/mL	IV Push/IO	May Repeat: 150 mg (3 mL) x 1
Dilute in 20 to 30 mL of D5W or may administer undiluted.			
Amiodarone: Stable VT			
150 mg	1.5 mg/mL	Slow IV Push	150 mg (10 mL/min) over 10 minutes
May Repeat: 150 mg	1.5 mg/mL	Slow IV Push	May Repeat: 150 mg
Mix 3 mL from a 50 mg/mL vial in 100 mL D5W for a 1.5 mg/mL solution.			
1 mg/min	1.8 mg/mL	Infusion	1 mg/min (33 mL/hr) for 6 hours, then 0.5 mg/min (16 mL/hr)
MAX Cumulative Dose: 2.2 g over 24 hours			MAX Cumulative Dose: 2.2 g over 24 hours
Mix 18 mL of 50 mg/mL vial in 500 mL D5W for a 1.8 mg/mL solution.			
Atropine sulfate: Bradycardia			
1 mg	0.1 mg/mL	IV Push	1 mg (10 mL)
May Repeat: 1 mg	0.1 mg/mL	IV Push	May Repeat: 1 mg every 3 to 5 minutes
MAX Cumulative Dose: 3 mg			
If manufacturer recommendation is unknown then use maximum available.			
Diltiazem			
15 to 20 mg	5 mg/mL	IV	Initial Dose: 20 mg (4 mL) over 2 minutes (min)
May Repeat: 20 to 25 mg			May repeat after 15 min: 25 mg (5 mL)

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DOBUTamine hydrochloride			
5 to 10 mcg/kg/min	1000 mcg/mL	Infusion	Starting Rate: 400 mcg/min (24 mL/hr)
Dose based on 5 mcg/kg/min			
Mix 20 mL of a 12.5 mg/mL vial in 250 mL of D5W for a 1000 mcg/mL solution.			
DOPamine hydrochloride			
5 to 20 mcg/kg/min	1600 mcg/mL	Infusion	Starting Rate: 400 mcg/min (15 mL/hr)
Titrate to patient response and taper slowly			
Dose based on 5 mcg/kg/min			
Dilute 400 mg DOPamine in 250 mL D5W for a 1600 mcg/mL solution.			
EPINEPHrine: Cardiac Arrest			
1 mg	0.1 mg/mL	IV/IO	1 mg (10 mL)
May Repeat: 1 mg every 3 to 5 minutes	0.1 mg/mL	IV/IO	May Repeat: 1 mg (10 mL) every 3 to 5 minutes
2 to 2.5 mg	1 mg/mL	ET	2 mg (2 mL)
May Repeat: 2 to 2.5 mg every 3 to 5 minutes	1 mg/mL	ET	May Repeat: 2 mg (2 mL) every 3 to 5 minutes
EPINEPHrine: Bradycardia			
2 to 10 mcg/min	4 mcg/mL	Infusion	Starting Rate: 2 mcg/min (30 mL/hr)
Mix 1 mL from a 1 mg/mL vial in 250 mL D5W for a 4 mcg/mL solution.			
EPINEPHrine: Hypotension			
0.1 to 0.5 mcg/kg/min	4 mcg/mL	Infusion	Starting Rate: 8 mcg/min (120 mL/hr)
Dose based on 0.1 mcg/kg/min			
Mix 1 mL from a 1 mg/mL vial in 250 mL D5W for a 4 mcg/mL solution.			
Esmolol			
IV Bolus 0.5 mg/kg	10 mg/mL	IV Bolus	Initial Dose: 40 mg (4 mL) over 1 minute
May Repeat 0.5 mg/kg	10 mg/mL	IV Bolus	May Repeat: if infusion is inadequate, 40 mg (4 mL) over 1 minute
Avoid in patients with asthma, obstructive airway disease, decompensated heart failure and pre-excited atrial fibrillation or flutter. If initial infusion rate is inadequate, repeat bolus and increase infusion rate.			
0.05 mg/kg/min	10 mg/mL	Infusion	Starting Rate: 4 mg/min (24 mL/hr)
Rate Increase: 0.1 mg/kg/min increments	10 mg/mL	Infusion	Rate Increase: 8 mg/min (48 mL/hr) increments
MAX Infusion Rate 0.3 mg/kg/min	10 mg/mL	Infusion	MAX Infusion Rate: 24 mg/min (144 mL/hr)
Further dilution not required.			
Isoproterenol			
2 to 10 mcg/min	4 mcg/mL	Infusion	Starting Rate: 5 mcg/min (75 mL/hr)
Mix 5 mL from a 0.2 mg/mL vial in 250 mL D5W for a 4 mcg/mL solution.			
Lidocaine			
1 to 1.5 mg/kg	20 mg/mL	IV/IO	Initial Dose: 80 mg (4 mL)
Dose based on 1 mg/kg			
May Repeat: 0.5 to 0.75	20 mg/mL	IV/IO	May Repeat: 40 mg (2 mL)

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seconds, and complete within 1 to 2 minutes over 10 seconds.			
Maintenance: 1 to 4 mg/min	4 mg/mL	Infusion	Starting Rate: 1 mg/min (15 mL/hr)
Mix 2 mL from a 500 mg/mL vial in 250 mL NS for a 4 mg/mL solution.			
Propranolol			
0.5 to 1 mg	1 mg/mL	IV	1 mg (1 mL) over 1 minute (min)
May Repeat: 0.5 to 1 mg	1 mg/mL	IV	May Repeat: 1 mg (1 mL) over 1 minute
MAX Total Dose: 0.1 mg/kg	1 mg/mL	IV	MAX Total Dose 8 mg (8 mL)
Avoid in patients with asthma, obstructive airway disease, decompensated heart failure and pre-excited atrial fibrillation or flutter.			
Sotalol			
100 mg	15 mg/mL	IV	100 mg (6.67 mL) over 5 minutes
Dilute in D5W. Avoid if prolonged QT.			
Verapamil			
Initial: 2.5 to 5 mg	2.5 mg/mL	IV	Initial: 5 mg (2 mL) over 2 minutes
May Repeat: 5 to 10 mg	2.5 mg/mL	IV	May Repeat: 10 mg (4 mL) over at least 2 minutes every 15 to 30 minutes
MAX Total Dose: 20 to 30 mg			MAX Total Dose: 20 to 30 mg

Electrical Cardioversion

Synchronized Cardioversion:

Initial Doses:

Narrow regular: 50 to 100 joules (J)

Narrow irregular: 120 to 200 J biphasic or 200 J monophasic

Wide regular: 100 J

Wide irregular: defibrillation dose (not synchronized)

For subsequent doses, increase dose in stepwise fashion for both monophasic and biphasic.

Electrical Defibrillation

Initial Doses:

Biphasic: 120 to 200 J

Monophasic: 360 J

May Repeat:

Biphasic: second and subsequent doses should be equivalent, and higher doses may be considered;

Monophasic: second and subsequent shocks should be 360 J

Verified by: _____ & _____ Date: _____

This document is not to be part of the permanent medical record.

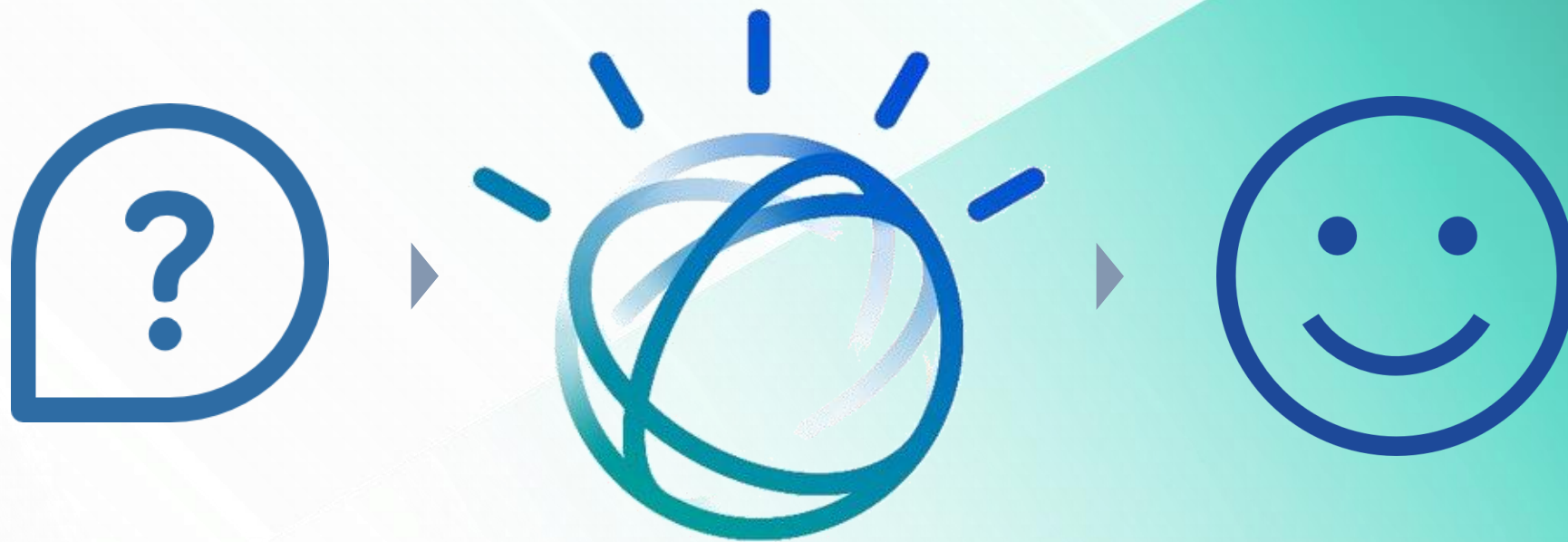
Ask Watson 有問題，問華生！

IBM Micromedex 為何需要華生?



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華生相助精準查

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問題範例

Micromedex Watson Assistant

Hello! What can I help you find?

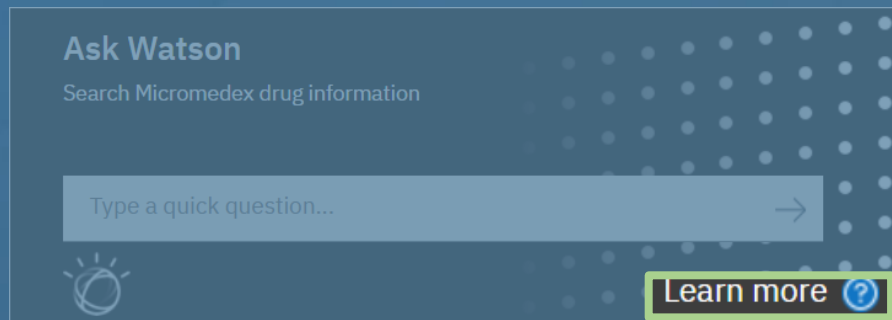
Sample drug information questions you can ask:

- Is fluconazole dialyzable?
- Do tacrolimus and voriconazole interact?
- Are tacrolimus and diltiazem IV compatible?
- What solutions are compatible with fluconazole?

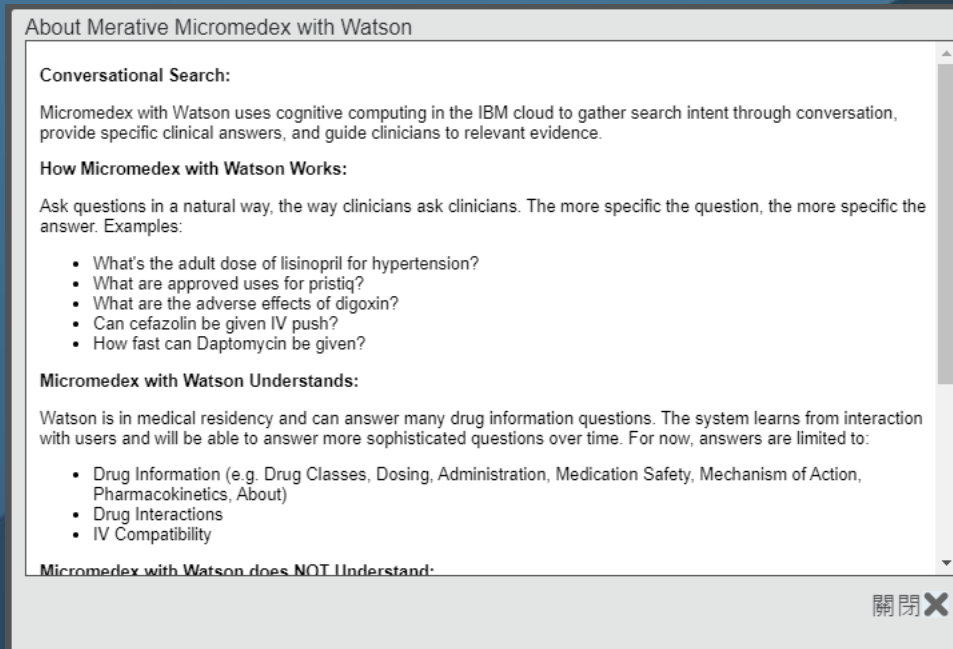
You can also ask a series of questions about the same drug or condition:

- What's the adult dose of rivaroxaban for dvt?
- Are dose adjustments needed?
- Can I give with food?
- What patient monitoring is needed?

怎麼問華生？



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智能檢索說明



怎麼問華生？

像同事之間一樣問問題

華生現在知道：

藥物資訊

藥物分類、劑量、給藥、藥物安全性、作用、藥物動力學、關於機制

藥物交互作用

單一藥物

IV相容性

Solution, Y site, Admixture, Syringe, TPN / TNA

華生還不知道：

NeoFax / Pediatrics, Toxicology, Disease, Lab, Alternative Medicine, Reproductive Risk
第三方內容（例如Martindale, Index Nominum）

About Merative Micromedex with Watson

Conversational Search:

Micromedex with Watson uses cognitive computing in the IBM cloud to gather search intent through conversation, provide specific clinical answers, and guide clinicians to relevant evidence.

How Micromedex with Watson Works:

Ask questions in a natural way, the way clinicians ask clinicians. The more specific the question, the more specific the answer. Examples:

- What's the adult dose of lisinopril for hypertension?
- What are approved uses for pristiq?
- What are the adverse effects of digoxin?
- Can cefazolin be given IV push?
- How fast can Daptomycin be given?

Micromedex with Watson Understands:

Watson is in medical residency and can answer many drug information questions. The system learns from interaction with users and will be able to answer more sophisticated questions over time. For now, answers are limited to:

- Drug Information (e.g. Drug Classes, Dosing, Administration, Medication Safety, Mechanism of Action, Pharmacokinetics, About)
- Drug Interactions
- IV Compatibility

Micromedex with Watson does NOT Understand:

關閉 X

Demo Slides

對話式檢索範例

就像跟你的同事問問題一樣，

對話將提供簡要解答內容、簡要解答連結、深入解答連結

- Dosing and adjustments 劑量與調整
- Adverse effects 不良反應
- Contraindications 禁忌症
- Precautions 注意事項
- Administration 管理
- More 更多

提問範例：

“What’s the adult dose of warfarin for Atrial fibrillation?”

Micromedex Watson Assistant

Warfarin Sodium × Atrial fibrillation × adult × Clear

What patient monitoring is needed?

What's the adult dose of warfarin for Atrial fibrillation

Here is the adult dosing for warfarin sodium:

Atrial fibrillation - Thromboembolic disorder



- Initial, 2 to 5 mg orally once a day; adjust dose based on a target INR of 2.5 (range, 2 to 3); usual maintenance, 2 to 10 mg orally once a day (FDA dosage)
- Duration of therapy: Provide long-term anticoagulation for patients with persistent or paroxysmal non-valvular atrial fibrillation (AF) at high stroke risk (prior ischemic stroke, TIA, systemic embolism, or 2 risk factors) or intermediate stroke risk (1 risk factor), in patients with AF and mitral stenosis, and in patients with prosthetic heart valves (target INR may be increased and concomitant aspirin added depending on valve type, position, and patient factors). Risk factors are older than 75 years, moderately or severely impaired left ventricular systolic function and/or heart failure, history of hypertension, or diabetes mellitus (FDA dosage).
- Following an ischemic stroke or TIA, target an INR of 2.5 (range, 2 to 3). Initiation of therapy within 14 days is reasonable, but initiation may be delayed beyond 14 days in presence of high risk for hemorrhagic conversion (guideline dosage)

Atrial fibrillation - Thromboembolic disorder; Prophylaxis

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Quick Answers Adult Dosing for Warfarin Sodium

In-Depth Answers Adult Dosing for Warfarin Sodium

Was this helpful?  

Type something...

對話式檢索介面

智能過濾器

簡要解答內容

簡要解答連結

深入解答連結

意見回饋

對話檢索框

Warfarin ... x Atrial fibr... x adult x Clear

Here is the adult dosing for warfarin sodium:

Atrial fibrillation - Thromboembolic disorder



- Initial, 2 to 5 mg orally once a day; adjust dose based on the results of INR; usual maintenance, 2 to 10 mg orally once a day
- Following an ischemic stroke or transient ischemic attack, target an INR of 2.5 (range, 2 to 3). Initiation of therapy within 14 days is reasonable, but initiation may be delayed beyond 14 days in presence of high risk for hemorrhagic conversion (guideline dosing)

Atrial fibrillation - Thromboembolic disorder; Prophylaxis

- Initial, 2 to 5 mg orally once a day; adjust dose based on INR; usual maintenance, 2 to 10 mg orally once a day

Quick Answers Adult Dosing for Warfarin Sodium

In-Depth Answers Adult Dosing for Warfarin Sodium

Was this helpful?  

Type something...

Micromedex Watson Assistant

Warfarin Sodium x Atrial fibrillation x adult x Clear

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Quick Answers Adult Dosing for Warfarin Sodium

In-Depth Answers Adult Dosing for Warfarin Sodium

Was this helpful?  

Type something...

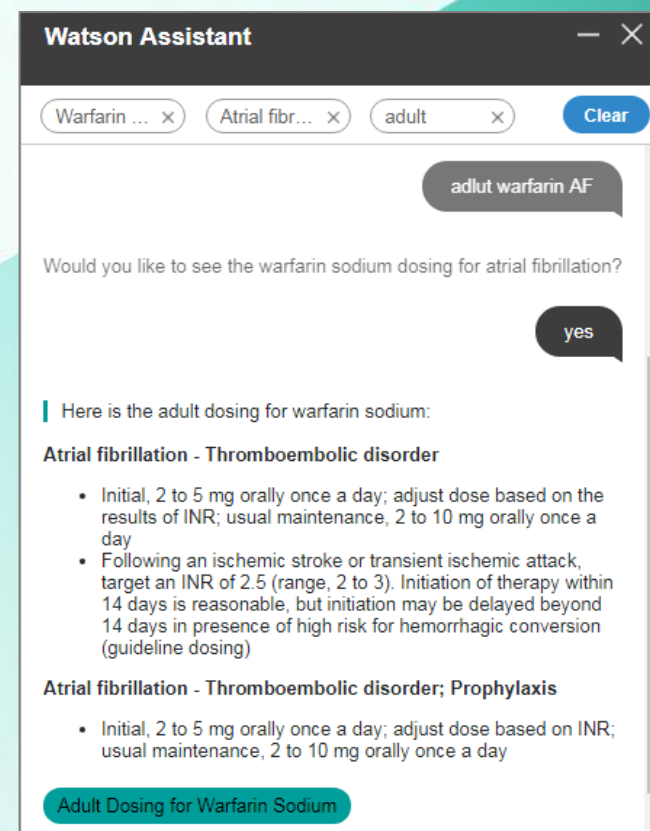
對話式檢索範例

無論是手滑打錯、語意不明、病名縮寫都沒關係，華生會再次確認，提供你正確答案

提問範例：
adult warfarin AF

Would you like to see the warfarin sodium dosing for atrial fibrillation?

yes

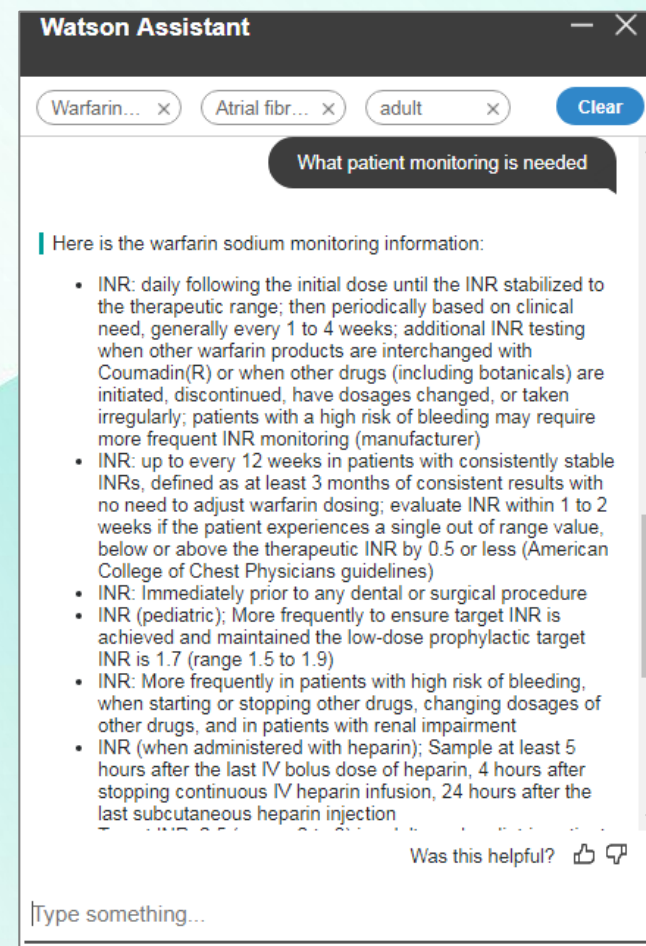


對話式檢索範例

您可延續前面問題繼續發問，智慧過濾器將根據前面提出的問題，提供與前述病患相關背景的解答

提問範例：

"Are dose adjustment needed?"

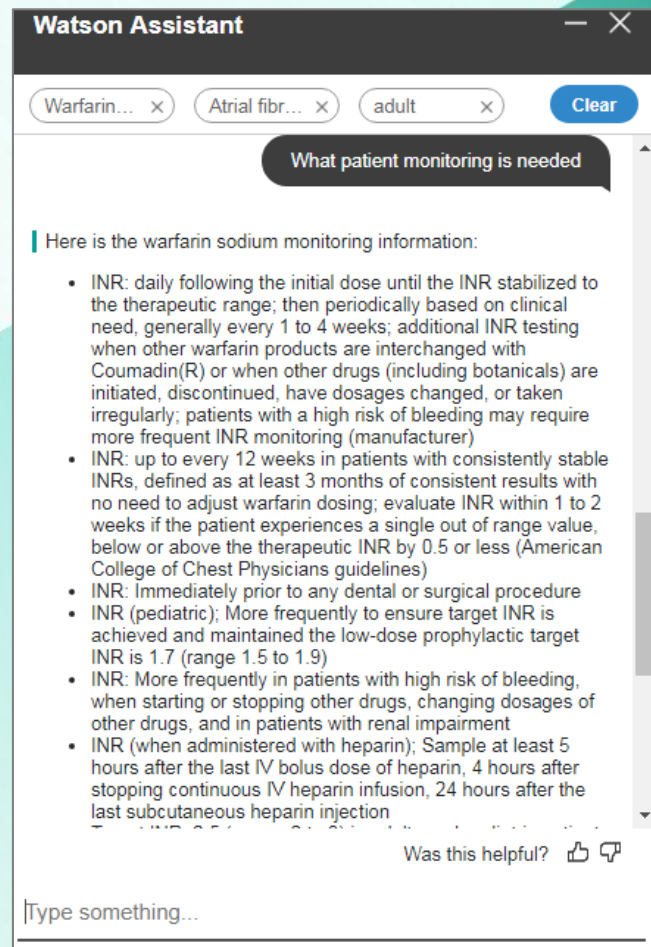


對話式檢索範例

您可延續前面問題繼續發問，智慧過濾器將根據前面提出的問題，提供與前述病患相關背景的解答

提問範例：

“What patient monitoring is needed?”



對話式檢索範例

如在前述問題下接續詢問前述藥物與特定藥物的交互作用，結果將提供連結引導您到藥物交互作用的頁面

提問範例：

"Are there interactions with TAMOXIFEN?"

Drug Interactions for Tamoxifen Citrate

Watson Assistant

Tamoxif... x Clear

- Target INR: 3 (range 2.5 to 3.5) mechanical mitral valve, mechanical heart valves in both the aortic and mitral position, those undergoing percutaneous mitral balloon valvotomy with preprocedural transesophageal echocardiogram who demonstrate a left atrial thrombus, caged ball or caged disk valves, caged ball or caged disk valves
- Pregnancy test: Prior to initiation in female patients of reproductive potential
- Signs or symptoms of bleeding: Regularly during therapy, with more frequent monitoring in those with increased risk (high intensity of anticoagulation (INR greater than 4.0), age 65 years or older, history of highly variable INRs, history of gastrointestinal bleeding, hypertension, cerebrovascular disease, anemia, malignancy, trauma, renal impairment, VKORC1 and CYP2C9 gene variants, concomitant use of drugs with increased bleeding risk, and long duration of therapy).
- Signs and symptoms of necrosis and/or gangrene of skin and other tissues

Warfarin Sodium Monitoring

Are there interactions with TAMOXIFEN

Here are the drug interactions for tamoxifen citrate:

Drug Interactions for Tamoxifen Citrate

Drug Interaction Results

修改相互作用

細化方式: Drug Tamoxifen Citrate 嚴重性: All 文件: All

跳轉到: Drug-Drug (111) | 過敏症狀 (0) | 食物 (0) | 乙醇 (0) | 實驗室 (0) | 抽煙 (0) | 懷孕 (1) | 哺乳 (1)

藥物:	嚴重性:	文件:
MESORIDAZINE -- QT INTERVAL PROLONGING DRUGS	Contraindicated	Excellent
WARFARIN [Systemic] -- TAMOXIFEN [Systemic]	Contraindicated	Good
ZIPRASIDONE -- QT INTERVAL PROLONGING DRUGS	Contraindicated	Fair
SAQUINAVIR -- QT INTERVAL PROLONGING DRUGS	Contraindicated	Fair

對話式檢索範例

除單一藥物的交互作用清單外，亦可直接查詢多個藥物交互作用

提問範例：
“interactions among bilberry Losartan Warfarin ibuprofen?”

Drug Interaction Results

修改相互作用

細化方式：藥物：All 嚴重性：All 文件：All 類型：All

跳轉到：藥物-藥物 (2) | 複方 (0) | 過敏症狀 (0) | 食物 (13) | 乙醇 (1) | 實驗室 (1) | 抽煙 (1) | 懷孕 (3) | 哺乳期 (3)

Drug-Drug 相互作用 (2)

藥物：	嚴重性：	文件：	描述：
IBUPROFEN -- WARFARIN SODIUM	<div><div>S</div>Major</div>	Fair	Concurrent use of ANTICOAGULANTS and NSAIDS may result in increased risk of bleeding.
IBUPROFEN -- LOSARTAN POTASSIUM	<div><div>!</div>Moderate</div>	Excellent	Concurrent use of ACE INHIBITORS AND ANGIOTENSIN RECEPTOR BLOCKERS and NSAIDS may result in renal dysfunction and/or increased blood pressure.

複方 (未找到)

Drug-過敏症狀 相互作用 (未找到)

Drug-食物 相互作用 (13)

藥物：	嚴重性：	文件：	描述：
WARFARIN SODIUM	<div><div>S</div>Major</div>	Good	Concurrent use of WARFARIN and POMEGRANATE may result in increased warfarin plasma concentrations and increased risk of bleeding.
WARFARIN SODIUM	<div><div>S</div>Major</div>	Good	Concurrent use of WARFARIN and CRANBERRY JUICE may result in an increased risk of bleeding.

Micromedex Watson Assistant

ibuprofen x Losartan Pota... x Warfarin Sodium x Clear

Hello! What can I help you find?

Sample drug information questions you can ask:
Is fluconazole dialyzable?
Do tacrolimus and voriconazole interact?
Are tacrolimus and diltiazem IV compatible?
What solutions are compatible with fluconazole?

You can also ask a series of questions about the same drug or condition:
What's the adult dose of rivaroxaban for dvt?
Are dose adjustments needed?
Can I give with food?
What patient monitoring is needed?

interactions among bilberry Losartan Warfarin ibuprofen

I've found multiple results for drug. Which one are you looking for?

ibuprofen

ibuprofen Lysine

Here are the drug interactions for ibuprofen, losartan potassium and warfarin sodium:

View Drug Interactions Results

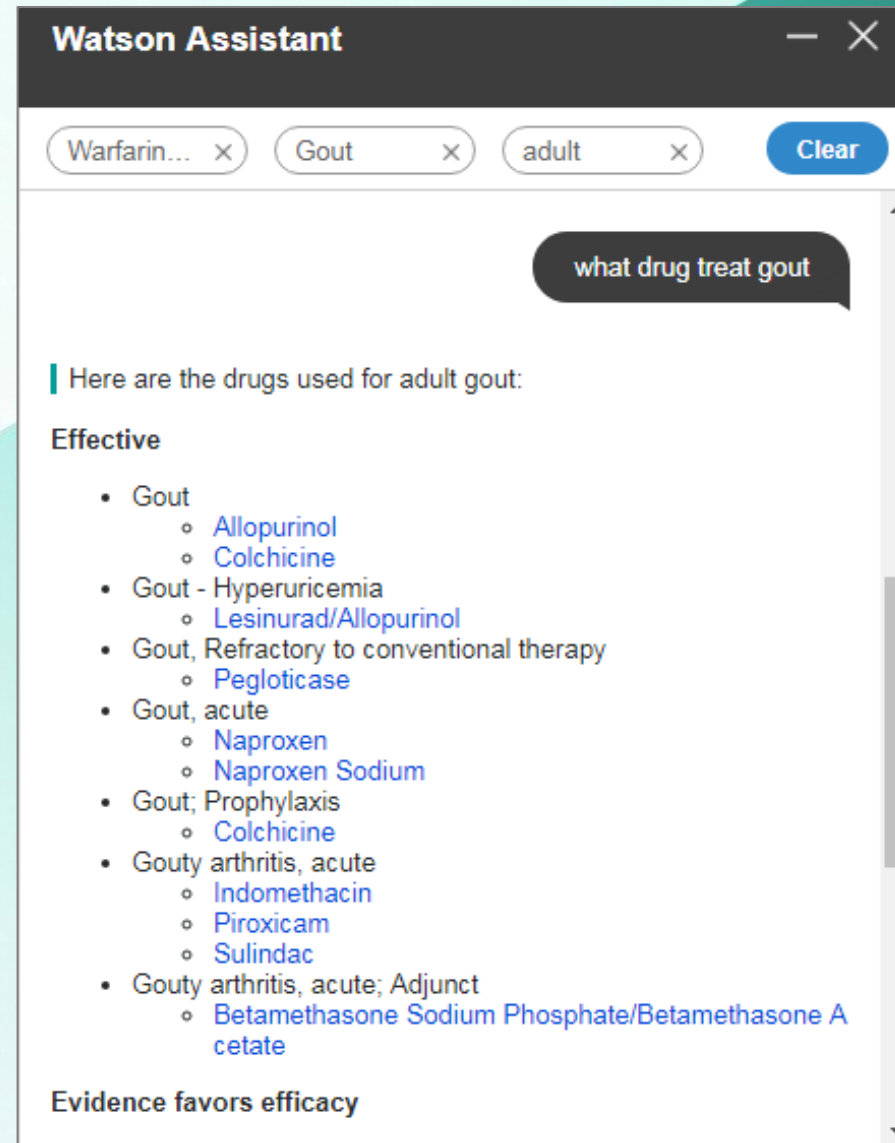
Was this helpful? 1 0

Type something...

對話式檢索範例

若您提出新藥或新病患問題繼續發問，華生將為您重置問題情境並提供相關解答，您無須自行清除前述提問

提問範例：
"what drug treat gout?"



The screenshot displays the Watson Assistant web interface. At the top, the title bar reads "Watson Assistant". Below it, a search bar contains three active filters: "Warfarin...", "Gout", and "adult", each with a close button (x). To the right of the filters is a blue "Clear" button. A dark speech bubble on the right side of the interface contains the text "what drug treat gout". Below the speech bubble, the assistant's response is displayed. It begins with a vertical bar icon followed by the text "Here are the drugs used for adult gout:". Underneath, the word "Effective" is followed by a bulleted list of drug categories and specific medications. The list includes: "Gout" (with sub-items "Allopurinol" and "Colchicine"), "Gout - Hyperuricemia" (with sub-item "Lesinurad/Allopurinol"), "Gout, Refractory to conventional therapy" (with sub-item "Pegloticase"), "Gout, acute" (with sub-items "Naproxen" and "Naproxen Sodium"), "Gout; Prophylaxis" (with sub-item "Colchicine"), "Gouty arthritis, acute" (with sub-items "Indomethacin", "Piroxicam", and "Sulindac"), and "Gouty arthritis, acute; Adjunct" (with sub-item "Betamethasone Sodium Phosphate/Betamethasone A cetate"). At the bottom of the response, it states "Evidence favors efficacy".

Watson Assistant

Warfarin... x Gout x adult x Clear

what drug treat gout

Here are the drugs used for adult gout:

Effective

- Gout
 - [Allopurinol](#)
 - [Colchicine](#)
- Gout - Hyperuricemia
 - [Lesinurad/Allopurinol](#)
- Gout, Refractory to conventional therapy
 - [Pegloticase](#)
- Gout, acute
 - [Naproxen](#)
 - [Naproxen Sodium](#)
- Gout; Prophylaxis
 - [Colchicine](#)
- Gouty arthritis, acute
 - [Indomethacin](#)
 - [Piroxicam](#)
 - [Sulindac](#)
- Gouty arthritis, acute; Adjunct
 - [Betamethasone Sodium Phosphate/Betamethasone A cetate](#)

Evidence favors efficacy

對話式檢索範例

若您提出新藥或新病患問題繼續發問，華生將為您重置問題情境並提供相關解答，或是追問細節以釐清問題，您無須自行清除前述提問

提問範例：
what are the drugs that treat AF

Is it for Adult or Pediatric?

adult

The screenshot shows the Watson Assistant chat window. At the top, the title bar says "Watson Assistant". Below it, there are two input fields: "Atrial fibr..." and "adult", each with a close button (X). To the right of these fields is a "Clear" button. The chat history shows a series of messages:

- System message: "You can also ask a series of questions about the same drug:
What is the adult dose of digoxin for heart failure?
Renal dosing?
Contraindications?
Adverse effects?"
- User message: "what are the drugs that treat AF"
- System message: "Is it for Adult or Pediatric?"
- User message: "adult"
- System message: "Here are the drugs used for adult atrial fibrillation:
Effective
 - Atrial fibrillation - Thromboembolic disorder
 - Heparin Sodium
 - Warfarin Sodium
 - Atrial fibrillation - Thromboembolic disorder; Prophylaxis
 - Dabigatran Etexilate Mesylate
 - Warfarin Sodium
 - Atrial fibrillation and flutter
 - Dofetilide
 - Propafenone Hydrochloride
 - Verapamil Hydrochloride

Q & A Thank You!

客戶服務中心

服務專線：02-7731-5800

服務傳真：02-8226-5022

客戶服務信箱：services@customer-support.com.tw

專人服務時間：週一～週五 9:00~17:30

系統服務時間：全年無休