

Psychiatry Drug Index Cards

Drug Name:	Fluphenazine (Prolixin)
Drug Class:	1 st Generation Antipsychotic
MOA:	Selectively antagonizes dopamine D2 receptors
Indications:	Psychosis, schizophrenia (esp. positive symptoms)
Contraindications:	Comatose pts, CNS depression, respiratory depression, bone marrow depression, hepatotoxicity
Adverse Reactions:	Neuroleptic Malignant Syndrome (NMS), Extrapyrasidal Sx (EPS), Tardive dyskinesia, impotence, nausea, headache, depression
Monitoring:	LFTs, CBC if hx of leukopenia/neutropenia, BUN/Cr
Starting and Maximal dose	Comes in tab, solution, and Injection. Start: 1-2.5 mg/day PO Max: 40 mg/day D/C if ANC <1000

Drug Name:	Sertraline (Zoloft)
Drug Class:	Selective Serotonin Reuptake inhibitor (SSRI)
MOA:	Selectively inhibits CNS uptake of serotonin
Indications:	Major Depressive disorder, OCD, panic disorder, PTSD, PMDD, social anxiety disorder
Contraindications:	Inc. suicide risk in children, adolescents and young adults. Disulfiram use, avoid abrupt withdrawal
Adverse Reactions:	Serotonin syndrome, GI upset, sexual dysfunction, HA, anxiety, insomnia, weight changes, depression exacerbation
Monitoring:	Sx of suicidality, unusual behavior changes, height and weight in children/adolescents
Starting and Maximal dose	Come in Tab and Solution. Taper dose gradually to d/c Major depression: start at 50mg PO qd, Max: 200 mg/day PTSD: start 25 mg PO qdx1wk, then 50 mg PO qd. Max: 200 mg/day

Drug Name:	Aripiprazole (Abilify)
Drug Class:	2 nd Generation Antipsychotic
MOA:	Partially agonizes dopamine D2 and serotonin 5-HT1A receptors, antagonizes serotonin 5-HT2A receptors
Indications:	Schizophrenia, Bipolar 1 disorder, Major depressive disorder,
Contraindications:	Inc. suicide risk in children, caution if 3 rd trimester pregnancy, elderly, CVA, cardiovascular disease, hypovolemia and such.
Adverse Reactions:	NMS, EPS, tardive dyskinesia, dystonia, HA, weight gain, anxiety, insomnia, diabetes, etc.
Monitoring:	Fasting glucose at baseline if diabetes risk, CBC, weight, sx of suicidality, or unusual behaviors
Starting and Maximal dose	Comes in Tab form. D/C if ANC<1000. Schizophrenia: start 10-15 mg PO qd, Max: 30mg/day

	Bipolar I disorder: start 15mg PO qd, Max 30mg/day
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Drug Name:	Lithium
Drug Class:	Bipolar disorder, Mood Stabilizer
MOA:	Alters neuronal sodium transport, increases NE & serotonin receptor sensitivity
Indications:	Bipolar I disorder (acute manic./mixed and maintenance TX), schizoaffective disorder,
Contraindications:	Brugada syndrome, CrCl<30, severe renal disease, caution in pregnancy, elderly, thyroid disorder, and such.
Adverse Reactions:	Lithium toxicity (>1.5mEq/L), seizures, coma, tremor, hypothyroidism, diabetes insipidus, hyperparathyroidism/hypercalcemia, arrhythmias, weight gain,
Monitoring:	Narrow therapeutic index → monitor plasma levels every 4-8 wks, pregnancy test, CBC, UA, Cr, TSH, Ca ²⁺ , ECG
Starting and Maximal dose	Comes in Capsules, Tabs, and solution Bipolar I disorder – start 300 mg PO TID, and inc. by 300 mg/day and adjust based on tx response Schizoaffective disorder – 900-1200 mg/day PO (tid or qid) and adjust based on tx response

Drug Name:	Duloxetine (Cymbalta)
Drug Class:	Serotonin & Norepinephrine reuptake inhibitors (SNRI's)
MOA:	Inhibits reuptake of serotonin and norepinephrine
Indications:	Major depressive disorder, GAD, diabetic neuropathic pain, fibromyalgia, chronic musculoskeletal pain
Contraindications:	Inc. suicide risk in children, CrCl <30, alcohol abuse, caution in MAOI use, renal/hepatic impairment. Avoid abrupt d/c.
Adverse Reactions:	Serotonin syndrome, Hypertension, dizziness, GI upset, sexual dysfunction, HA, anxiety, insomnia, weight changes, depression exacerbation
Monitoring:	Cr, BP at baseline, Sx of suicidality, unusual behavior changes, height and weight in children/adolescents
Starting and Maximal dose	Comes in Capsules. Taper dose gradually to D/C Major depressive disorder – start at 20-30mg PO bid, Max:120mg/day GAD: start 30mg PO qd, Max:120mg/day