Oakley Training School

Psychotropic Medication Standing Orders

1) **Stimulants and Amoxetine (Strattera) Work-up:**
   - EKG (baseline)
   - Hepatic Function Panel (baseline) and then every 6 (six) months.
   - Weight and height measurements
   - Blood Pressure and Pulse recorded at initiation

*Stimulants and Amoxetine (Strattera) Monitor:*
   - Blood Pressure and Pulse recorded every 2 (two) weeks
   - Monthly weight and height measurements
   - Hepatic Function Panel every 6 (six) months

2) **Tricyclic Antidepressants Work-up:**
   - EKG (baseline)
   - CBC
   - CMP

**Tricyclic Antidepressants Monitor:**
   - CBC every 6 (six) months
   - CMP every 6 (six) months

EKG with any significant increase in dosage

3) **Lithium Work-up**
   - CBC with Diff/Plts
   - TSH
   - CMP
   - Pregnancy Test (for females)
   - U/A
   - Baseline EKG

**Lithium Monitor**
   - Lithium level weekly x 2 (two) weeks, then monthly
   - TSH every 3 (three) months
   - CMP every 3 (three) months
   - U/A every 3 (three) months
   - Annual EKG
   - Pregnancy Test (for females) every 3 (three) months

4) **Depakote Work-up**
   - CBC with Diff/Plts
   - CMP
   - Fasting Amylase and Lipase
   - Pregnancy Test (for females)
   - Hepatic Function Panel
Depakote Monitor
- Depakote level weekly x 2 (two), then monthly
- CBC w/Plts, Hepatic Function Panel, Fasting Amylase and Lipase every other month

5) Carbamazepine (Tegretol) Work-up
- CBC with Diff/Plts
- CMP
- EKG
- Pregnancy test (for females)
- Hepatic Function Panel

Carbamazepine (Tegretol) Monitor:
- Carbamazepine (Tegretol) level weekly x 2 (two), then monthly
- CBC with Diff, Hepatic Function every other month

6) Alpha Antagonist: Clonidine and Guafacine (Tenex) Work-up:
- Baseline EKG
- Blood Pressure and pulse readings (sitting and standing) on initiation then once a day for 3 (three) days

Alpha Antagonist: Clonidine and Guafacine (Tenex) Monitor:
- Blood Pressure and pulse once every 2 (two) weeks
- Blood Pressure readings and pulse (sitting and standing) on any dosage increase or decrease then once a day for 3 (three) days

7) All Atypicals (SGA’S) including Clozaril Work-up:
- CMP (fasting)
- Lipid Profile (fasting)
- CBC with Diff/Plts
- Hepatic Function Panel
- Base line EKG
- Waist/Hip Ratio
- Weight
- Blood Pressure
- Pregnancy Test (for females)
- Potassium and Magnesium with Geodon only

Atypical (SGA’S) Monitor:
- Weight, Waist/Hip ratio monthly
- Fasting Plasma Glucose, CMP, Lipid Profile, Hepatic Function Panel, CBC with Diff/Plts after 1 (one) month then every 3 (three) months
- Potassium and Magnesium every 3 (three) months with Geodon only

Clozaril Monitor:
- All of the above
- Weekly CBC x 1 (one) month then every 3 (three) months
- Weekly White Blood Cell count
8) **Effexor Work-up**
   - Blood pressure reading 3 (three) times per week x 2 (two) weeks.
     Notify MD if not within normal limits for age/size or Systolic >140

   **Effexor Monitor**
   - Blood pressure reading weekly. Notify MD if not within normal limits for age/size or Systolic >140

9) **Trileptal Work-up**
   - BMP
   - CBC with Diff/Plts

   **Trileptal Monitor**
   - Monthly Oxycarbazepine Level
   - Monthly BMP

10) **Lamictal**
    - Call MD immediately for any signs or symptoms of a rash

11) **Obtain drug levels on admission if the student arrives on the following medications:**
    - Lithium
    - Depakote
    - Tegretol
    - Nortriptyline
    - Trileptal

**Signatures:**

Dr. John Pruett

Dr. Maude Wright

Dr. Faiza Qureshi

Dr. Dirk Dhossche

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Form XL32.B Psychotropic Medication Protocols
Effective Date: 08/01/08
Revised Date: 09/15/08, 09/29/08
Mississippi Department of Human Services  
Division of Youth Services  
Medical Clinic

Initial Evaluation for students placed on Stimulants:

(Circle medication prescribed)

**ADDERALL /XR**  
**CONCERTA/METADATE/RITALIN /DAYTRANA**  
(methylphenidate)  
**FOCALIN/XR**  
(dexmethylphenidate)

**DEXADRINE**  
(dextroamphetamine)  
**STRATTERA**  
(amoxetine)

Date stimulant was started: ______________  
Date of Admission: ______________

*The following baseline history was obtained during the student's admission:*

<table>
<thead>
<tr>
<th>PERSONAL/FAMILY HISTORY (Circle)</th>
<th>IF YES: WHO AND NATURE OF PROBLEM</th>
</tr>
</thead>
</table>
| Hypertension                     | Yes  
No                                 |
| Cardiovascular                   | Yes  
No                                 |

*The following baseline information was obtained during the student's admission:*

<table>
<thead>
<tr>
<th>Weight (pounds):</th>
<th>Fasting Labs: ______________ (Date completed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Height (inches):</td>
<td>Hepatic Function Panel:</td>
</tr>
</tbody>
</table>
| Blood Pressure:  | Total Protein _____  
Albumin _____  
Alk Phos _____ |
| Pulse:           | SGOT _____  
SGPT _____  
Total Bili _____  
Direct Bili _____ |

**Baseline EKG:**
Mississippi Department of Human Services
Division of Youth Services
Medical Clinic

Initial Evaluation for students placed on SGA’s:
(Second Generation Antipsychotics)

(Circle medication prescribed)

ABILIFY  CLOZARIL  GEODON  RISPERDAL  SEROQUEL  ZYPREXA
(Aripiprazole) (Clozapine) (Ziprasidone) (Risperidone) (Quetiapine) (Olanzapine)

Date SGA was started:  Date of Admission:

The following baseline history was obtained during the student’s admission:

<table>
<thead>
<tr>
<th>PERSONAL/FAMILY HISTORY (Circle)</th>
<th>IF YES: WHO AND NATURE OF PROBLEM:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obesity</td>
<td>Yes</td>
</tr>
<tr>
<td>Diabetes</td>
<td>Yes</td>
</tr>
<tr>
<td>Dyslipidemia (Elevated cholesterol or triglycerides)</td>
<td>Yes</td>
</tr>
<tr>
<td>Hypertension</td>
<td>Yes</td>
</tr>
<tr>
<td>Cardiovascular</td>
<td>Yes</td>
</tr>
</tbody>
</table>

The following baseline information was obtained during the student’s admission:

<table>
<thead>
<tr>
<th></th>
<th>Fasting Labs: (Date completed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weight (pounds):</td>
<td>Glucose:______________</td>
</tr>
<tr>
<td>Waist Circumference (inches):</td>
<td>Lipid Profile:</td>
</tr>
<tr>
<td>Hip Circumference (inches):</td>
<td>Cholesterol:_________ Triglyceride:_________</td>
</tr>
<tr>
<td>Waist/Hip Ratio:</td>
<td>Baseline EKG:</td>
</tr>
<tr>
<td>Blood Pressure:</td>
<td></td>
</tr>
<tr>
<td>AIMS Score of:</td>
<td>on (Date)</td>
</tr>
</tbody>
</table>