


















<p>gentin ...lavulante potassium ...00 mg tabs</p> 	<p>Azithromycin 250, 500 mg tabs</p>  <p>Class: Antibiotic, macrolide Use: Inclusion conjunctivitis, hordeolum Dosage: (Inclusion conj.): 1000 mg single dose; (Hordeolum): 250mg bid x 1d, then qd x 4d CI: Known hypersensitivity to erythromycin, any macrolide or ketolide antibiotic SE: N&V, diarrhea, abdominal pain Notes: Caution in patients with impaired hepatic function; azithromycin may exacerbate myasthenia gravis. Patients should not take Al or Mg-containing antacids concurrently with azithromycin. May enhance effects of oral anticoagulants; use caution in patients on digoxin, ergotamine or dihydroergotamine, terfenadine, cyclosporine, hexobarbital and phenytoin, as possible drug interactions have been observed but not studied. Pregnancy: Category B</p>	<p>Dicloxacillin 250, 500 mg tabs</p>  <p>Class: Antibiotic, penicillin Use: Preseptal cellulitis, acute phase dacryocystitis and canaliculitis, internal hordeolum, prophylaxis Dosage: 250 mg qid x 7-10d, or 500 mg bid x 7-10 d CI: penicillin allergy SE: GI upset Notes: Dicloxacillin is a penicillinase-resistant penicillin with a good safety profile. It is very inexpensive, with a 10-day course costing less than \$10.</p>	<p>Doxycycline 20, 50, 100 mg tabs or capsules</p>  <p>Class: Antibiotic, tetracycline Use: MGD, recurrent hordeola, rosacea, dry eye Dosage: (MGD): 20-100 mg bid x 1 mo or longer if warranted. If MGD secondary to rosacea, extend to 6 weeks followed by 1-3 mo taper or maintain on 40-50 mg qd dose indefinitely; (Dry Eye): 50 mg qd x several mo as warranted; (RCE): 50 mg bid x 2 mo along with topical steroid gts tid x 2-3 wks CI: Children <8 yo, pregnant or lactating women. SE: Photosensitivity, GI upset, diarrhea Notes: Take on empty stomach, avoid dairy products. Avoid sun exposure, as tetracyclines will increase risk and severity of burns. Longer-acting and improved safety profile versus tetracycline. Mechanism: Decreases lipase prod. of Staph. epidermidis to allow stabilization of tear film. Anti-inflammatory activity via IL-1 suppression. Inhibits MMP-9, an enzyme responsible for damage to corneal epithelial basement membrane.</p>	<p>Erythromycin 250mg, 500mg tabs, suspension</p>  <p>Class: Antibiotic, anti-inflammatory, macrolide Use: Inclusion conjunctivitis, MGD Dosage: (Inclusion conj.): 500 mg qid x 3wks; (MGD): 500mg bid x 1-3 mo CI: Hypersensitivity to macrolides; caution in myasthenia gravis, hepatic impairment, cardiomyopathy, bradycardia SE: Diarrhea, hepatic impairment, QT prolongation, anaphylaxis, pancreatitis Notes: Use for meibomianitis is second-line if tetracyclines are contraindicated; interacts with many drugs, incl. antihistamines, theophylline, digoxin, warfarin, lovastatin, phenytoin and carbamazepine. Safe in children and pregnant women. Mechanism: Inhibits bacterial protein synthesis by binding 50s subunit.</p>	<p>Tetracycline 250, 500 mg capsule</p>  <p>Class: Antibiotic, tetracycline Use: MGD, recurrent hordeola, rosacea Dosage: (MGD): 250 mg qid x 1 mo or longer if warranted. If MGD secondary to rosacea, extend to 6 weeks followed by 1-3 mo taper or maintain on 250 mg qd dose indefinitely. CI: Children <8 yo, pregnant or lactating women, renal insufficiency – consider use of doxycycline or dose adjustment SE: Photosensitivity, GI upset, diarrhea Interactions: Depresses prothrombin activity – use caution in patients on anticoagulants. May interfere with antibacterial effects of penicillins. Antacids impair absorption. Notes: Take on empty stomach, avoid dairy products. Avoid sun exposure, as tetracyclines will increase risk and severity of burns. Shortest-acting of the tetracyclines Mechanism: Decreases lipase prod. of Staph. epidermidis to allow stabilization of tear film. Anti-inflammatory activity via IL-1 suppression. Inhibits MMP-9, an enzyme responsible for damage to corneal epithelial basement membrane.</p>	<p>Acyclovir Zovirax 400, 800 mg tabs; 200 mg</p> <p>Class: Antiviral Use: Herpes simplex infection, keratitis and post-herpetic p... Dosage: (H. simplex): A day x 7-10d for acute ep... CI: Renal insufficiency – adjusted if needed SE: GI upset, headache, Notes: Most effective w... Mechanism: Guanosine... Pregnancy: Category B</p>
<p>ndisonone ...0, 20, 50 mg tabs</p> 	<p>Acetazolamide Diamox 125, 250, 500 mg</p>  <p>Class: Anti-glaucoma agent, carbonic anhydrase inhibitor Use: Acute angle closure, reduction of IOP when other methods are ineffective Dosage: (Acute angle closure): 500 mg PO; (chronic glaucoma): 250 mg q6h CI: Hypokalemia, hyponatremia, acidosis, cirrhosis; caution in diabetes, gout, and sulfonamide allergy SE: Fatigue, change in taste, N/V, diarrhea, transient myopia, photosensitivity Notes: Reduces IOP by 30-40% Mechanism: Inhibits carbonic anhydrase and production of aqueous.</p>	<p>Guaimax-D 1200 mg guaifenesin/120 mg pseudoephedrine tabs</p>  <p>Class: Expectorant, decongestant Use: relief of congestion due to viral URI and conjunctivitis Dosage: 1 tab bid x 10d CI: Severe hypertension, coronary artery disease, MAOI use within 14 d; caution in patients with hypertension (meds will be antagonized), diabetes, cardiovascular disease, narrow angle glaucoma, elderly, prostatic hypertrophy, and hyperthyroid. SE: Nervousness, insomnia, headache, GI upset, urinary retention Notes: Taken at breakfast and dinnertime; avoid hs due to insomnia.</p>	<p>Tylenol Acetaminophen 325 mg tabs</p>  <p>Class: Non-narcotic analgesic Use: Mild-moderate ocular pain not well managed by topical drugs; corneal abrasion, PRK, FB, trauma, post-surgical procedures, herpes zoster neuralgia Dosage: 500-1000mg q4-6h as needed CI: Chronic alcohol abuse, hepatic impairment, G6PD deficiency SE: Liver toxicity and hematologic effects at high dosages, nausea, rash Mechanism: Poorly understood</p>	<p>Ibuprofen 200, 400, 600, 800 mg tabs; 200 mg chewable tabs; 200 mg caps</p>  <p>Class: Non-narcotic analgesic, NSAID Mechanism: prevent firing of peripheral pain receptors via COX inhibition, resulting in reduction of prostaglandins Use: Mild-moderate ocular pain not well managed by topical drugs; corneal abrasion, PRK, FB, trauma, post-surgical procedures, herpes zoster neuralgia Dosage: 200-400 mg q4h as needed CI: Known allergic reaction to NSAIDs, severely compromised cardiovascular or renal health SE: GI disturbance, prolonged bleeding time, renal function disruption, headache Notes: Monitor closely in patients with diminished renal function; elderly patients are more susceptible to serious GI bleeding. Pregnancy: Category C prior to 30 wks gestation, D at or after 30 wks gestation; not recommended in lactating women.</p>	<p>Lortab</p>  <p>Hydrocodone bitartrate/Acetaminophen 2.5/500, 5/500, 7.5/500, 10/500 mg tabs</p> <p>Class: Narcotic/non-narcotic combination analgesic Use: Moderate-severe pain Dosage: 1-2 tabs q4-6h prn SE: Respiratory depression, hepatotoxicity, dependency, agranulocytosis, thrombocytopenia, lightheadedness, dizziness, drowsiness, rash, itching CI: Caution in hepatic or renal impairment, hypothyroid, G6PD deficiency, concurrent use of depressants Notes: Use caution in patients with recent alcohol consumption.</p>	<p>Tylenol Acetaminophen 300/30 mg</p> <p>Class: Narcotic/non-narcotic analgesic Use: Moderate-severe pain Dosage: 1-2 tab q4-6h CI: Respiratory depression, G6PD deficiency, seizure SE: Respiratory depression, hepatotoxicity, lightheadedness, dizziness, abdominal pain, Notes: Take with meals.</p>
<p>icodin ...en/Hydrocodone ...5 mg tabs</p> 	<p>Allegra Fexofenadine 30, 60, 180 mg tabs</p>  <p>Class: Anti-allergy, 2nd-generation antihistamine Use: Seasonal allergic rhinitis Dosage: 180 mg qd or 60mg bid SE: HA, dyspepsia, fever, cough, myalgia CI: Hypersensitivity; caution in renal impairment or PKU Notes: Do not take with fruit juice</p>	<p>Zyrtec Cetirizine 10 mg tabs</p>  <p>Class: Anti-allergy, antihistamine Use: Seasonal allergic rhinitis Dosage: 1 tab/cap qd prn SE: bronchospasm, hypersensitivity rxn, cholestasis, seizures, anemia, thrombocytopenia, syncope, hypotension, drowsiness, fatigue, diarrhea. CI: Hypersensitivity to hydroxyzine; caution in use of CNS depressants, hepatic or renal impairment.</p>	<p>AREDS OTC tabs, capsules</p>  <p>Class: Vitamin Supplement Use: Prevention of advanced or exudative forms of AMD Dosage: 500 mg vitamin C, 400 IU vitamin E, 15 mg beta-carotene, 80 mg zinc, 2 mg copper qd SE: GI upset, genitourinary complications, yellowing of skin CI: Use caution in chronic disease and in patients taking multiple medications; avoid beta-carotene in smokers or former smokers. Notes: AREDS formulation is shown to benefit only those with intermediate AMD in one or both eyes, or advanced AMD in one eye only</p>	<p>L-lysine OTC 250, 500, 1000 mg tabs or capsules</p>  <p>Class: Amino Acid Supplement Use: Herpes simplex keratitis Dosage: 3000-9000 mg qd for active infection; 1250 mg qd for prevention of recurrence CI: Use caution in patients on antibiotics – in very high (10-30 g) doses, lysine may increase toxicity of aminoglycosides SE: GI upset may occur in very high doses Notes: Do not take with milk. Mechanism: Interferes with viral replication.</p>	<p>Omega-3 Fatty Acids OTC tabs, capsules in various doses</p>  <p>Class: Fatty Acid Supplement Use: Dry eye Dosage: 2000 mg qd CI: If derived from fish oil, use caution in diabetics (may alter control of blood sugar) and patients on anticoagulants (may enhance effect) SE: GI upset Notes: Very slow onset therapy – may take 3-4 months of supplementation before effect is noticed. Avoid omega-3s derived from fish liver, as these include vitamins A and D which may have additional side effects in higher concentrations Mechanism: decreases inflammation, enhances tear production, thins meibomian secretions</p>	<p>Notes:</p> <hr/> <p>References</p> <ol style="list-style-type: none"> www.drugs.com www.rxlist.com