Common Home Medications

A Field Reference & Study Guide for Paramedic Interns

Bearamedics Training Program

How to use this guide: for each drug class, learn the class-level pattern first (mechanism, why it matters on scene), then use the brand/generic table for recognition drills. Most patients you meet won't say "I take a benzodiazepine," they'll say "I take my Xanax." You need to go both directions.

Benzodiazepines

CNS depressants, GABA agonists. Prescribed for anxiety, panic, and seizures, but also a common drug of abuse and a frequent co-ingestant in overdoses. Watch for respiratory depression when combined with opioids or alcohol. Abrupt cessation in a chronic user can cause withdrawal seizures, a key reason to ask about home meds on any seizure call.

Brand Name	Generic Name	Notes / Indication
Ativan	lorazepam	anxiety
Klonopin	clonazepam	anxiety/panic
Restoril	temazepam	anxiety
Valium	diazepam	seizures/anxiety
Xanax	alprazolam	anxiety

Barbiturates

Older-generation sedative-hypnotics, largely displaced by benzodiazepines but still seen for seizure control and sedation. Narrow therapeutic window, overdose causes profound respiratory and CNS depression. Like benzos, abrupt withdrawal in a dependent patient can be seizure-inducing.

Brand Name	Generic Name	Notes / Indication
Luminal	phenobarbital	seizures
Nembutal	pentobarbital	sedation
Seconal	secobarbital	sedation

Anticonvulsants

A mixed bag, some are seizure-only, several do double duty for bipolar disorder, neuropathic pain, or migraine prevention. If a patient is on one of these but you're called for an altered mental status or new-onset seizure, consider both breakthrough seizure and drug-level toxicity (especially Dilantin/phenytoin, which has a narrow therapeutic range).

Brand Name	Generic Name	Notes / Indication
Depakote	valproic acid	also mania
Dilantin	phenytoin	
Lamictal	lamotrigine	also bipolar
Neurontin	gabapentin	also neuropathy/chronic pain
Topamax	topiramate	also bipolar/weight loss
Tegretol	carbamazepine	also bipolar/mania
Trileptal	oxcarbazepine	
Keppra	levetiracetam	

Antipsychotics (schizophrenia/bipolar)

Used for schizophrenia, bipolar disorder, and severe agitation. Field-relevant risks include QT prolongation (dysrhythmia risk, think about this before giving other QT-prolonging drugs), neuroleptic malignant syndrome (rigidity, hyperthermia, altered mental status), and orthostatic hypotension. Lithium deserves special attention: it's dosed in a narrow therapeutic range and toxicity presents with tremor, GI upset, confusion, and can progress to seizures or dysrhythmia, dehydration and NSAID use are common triggers.

Brand Name	Generic Name	Notes / Indication
Abilify	aripiprazole	
Risperdal	risperidone	
Seroquel	quetiapine	

Brand Name	Generic Name	Notes / Indication
Zyprexa	olanzapine	
Geodon	ziprasidone	
Haldol	haloperidol	
Lithobid	lithium	bipolar/manic

Antianxiety

Overlaps heavily with the benzodiazepine list above. Buspar (buspirone) is the exception, it's not a benzo, has a much lower abuse/withdrawal profile, and won't respond to reversal agents the way benzos might.

Brand Name	Generic Name	Notes / Indication
Buspar	buspirone	
Ativan	lorazepam	
Restoril	temazepam	
Librium	chlordiazepoxide	
Klonopin	clonazepam	

Tricyclic Antidepressants (TCAs)

Older antidepressants, less commonly first-line now but still prescribed for chronic pain and migraine prophylaxis. Highly dangerous in overdose, cardiotoxic (widened QRS, dysrhythmias), anticholinergic toxidrome (hot, dry, dilated pupils, tachycardia, delirium). A TCA overdose is a load-and-go with cardiac monitoring.

Brand Name	Generic Name	Notes / Indication
Aventyl/Pamelor	nortriptyline	
Elavil	amitriptyline	
Sinequan	doxepin	
Tofranil	imipramine	
Anafranil	clomipramine	

Antidepressants (SSRI/SNRI and others)

First-line for depression/anxiety today. Generally safer in overdose than TCAs, but watch for serotonin syndrome (agitation, clonus, hyperreflexia, hyperthermia) when combined with other serotonergic drugs, and for sudden discontinuation effects. Wellbutrin (bupropion) is the outlier, it lowers seizure threshold rather than causing serotonin syndrome.

Brand Name	Generic Name	Notes / Indication
Celexa	citalopram	
Cymbalta	duloxetine	
Effexor	venlafaxine	
Desyrel	trazodone	
Lexapro	escitalopram	
Paxil	paroxetine	
Prozac	fluoxetine	
Remeron	mirtazapine	
Wellbutrin	bupropion	
Zoloft	sertraline	

Hypnotics (insomnia)

Non-benzodiazepine sleep aids ('Z-drugs' plus melatonin-receptor agonist Rozerem). Ambien in particular is notorious for complex sleep behaviors (sleepwalking, sleep-driving) and can cause significant confusion if taken and the patient doesn't go to sleep.

Brand Name	Generic Name	Notes / Indication
Ambien	zolpidem	
Lunesta	eszopiclone	
Rozerem	ramelteon	

Stimulants (ADHD)

Sympathomimetics, expect tachycardia and hypertension at baseline, and be alert for exaggerated cardiovascular effects if a patient has taken more than prescribed. Strattera (atomoxetine) is the exception, it's a non-stimulant ADHD medication.

Brand Name	Generic Name	Notes / Indication
Adderall	dextroamphetamine/amphetamine	
Strattera	atomoxetine	
Ritalin	methylphenidate	

Phenothiazines

Compazine and Phenergan are used as antiemetics, you'll see them in patients' home med lists for nausea. Thorazine is an older antipsychotic in the same chemical family. All can cause extrapyramidal symptoms (dystonia, akathisia) and QT prolongation.

Brand Name	Generic Name	Notes / Indication
Compazine	prochlorperazine	antiemetic
Phenergan	promethazine	antiemetic
Thorazine	chlorpromazine	antipsychotic

Alzheimer's Disease

Cholinesterase inhibitors (Aricept, Exelon) and the NMDA antagonist Namenda slow progression but don't reverse dementia. Relevant on scene because these patients are frequently on multiple other medications and history is often unreliable, get info from family or caregivers when possible.

Brand Name	Generic Name	Notes / Indication
Aricept	donepezil	
Exelon	rivastigmine	
Namenda	memantine	

Narcotics (opioids)

The single most important home-med category to recognize quickly, respiratory depression is the life threat. Know your protocol's reversal agent and dosing. Combination products (Percocet, Vicodin, Norco, Darvocet) also carry acetaminophen, which matters for overdose management and hepatotoxicity risk.

Brand Name	Generic Name	Notes / Indication
Dilaudid	hydromorphone	

Brand Name	Generic Name	Notes / Indication
Demerol	meperidine	
Darvocet	propoxyphene/acetaminophen	
Codeine	codeine	
Darvon	propoxyphene	
Oxycontin	oxycodone	
Methadose	methadone	
Duragesic	fentanyl	
MS Contin	morphine	
Percocet	oxycodone/acetaminophen	
Vicodin	hydrocodone/acetaminophen	
Norco	hydrocodone/acetaminophen	

Non-Steroidal Anti-Inflammatories (NSAIDs)

Ultram (tramadol) is technically an atypical opioid-like analgesic, not a true NSAID, but it's grouped here in the source list, worth clarifying with interns. NSAIDs carry GI bleed and renal risk, especially in dehydrated or elderly patients, and can interact with lithium and anticoagulants.

Brand Name	Generic Name	Notes / Indication
Aleve	naproxen	
Celebrex	celecoxib	
Toradol	ketorolac	
Ultram	tramadol	

Muscle Relaxers

Sedating agents used for musculoskeletal pain/spasm. Additive CNS depression when combined with opioids, benzos, or alcohol, a common combination in polypharmacy overdoses.

Brand Name	Generic Name	Notes / Indication
Flexeril	cyclobenzaprine	
Robaxin	methocarbamol	
Soma	carisoprodol	
Skelaxin	metaxalone	

Beta Blockers (HTN)

Block sympathetic response, expect relative bradycardia and blunted tachycardia even with significant blood loss or shock, which can mask early compensation. Overdose causes bradycardia and hypotension refractory to standard doses of atropine/epinephrine. Coreg also treats CHF.

Brand Name	Generic Name	Notes / Indication
Coreg	carvedilol	also CHF
Inderal	propranolol	
Toprol/Lopressor	metoprolol	
Tenormin	atenolol	
Bystolic	nebivolol	
Trandate	labetalol	

Calcium Channel Blockers

Two functional groups: dihydropyridines (Norvasc, Procardia, Plendil, Cardene, Sular) mainly drop peripheral vascular resistance/BP, while non-dihydropyridines (Cardizem, Cartia, Calan) also slow AV conduction, useful for rate control in a-fib/SVT but dangerous in overdose (profound bradycardia + hypotension, similar picture to beta-blocker OD).

Brand Name	Generic Name	Notes / Indication
Cardizem	diltiazem	a-fib or HTN
Norvasc	amlodipine	HTN
Procardia	nifedipine	HTN
Calan	verapamil	SVT or HTN
Cartia	diltiazem	a-fib or HTN
Plendil	felodipine	HTN
Cardene	nicardipine	HTN
Sular	nisoldipine	HTN

HTN, ARB / ACE Inhibitor / Antiadrenergic

ACE inhibitors ('-pril') and ARBs ('-sartan') are first-line for hypertension and also protect kidneys in diabetics; ACE inhibitors carry a distinctive dry cough and rare but serious angioedema risk. Catapres (clonidine) and Hytrin (terazosin) are antiadrenergics, clonidine withdrawal can cause rebound hypertensive crisis, which is worth asking about in a hypertensive patient who ran out of meds.

Brand Name	Generic Name	Notes / Indication
Catapres	clonidine	antiadrenergic
Hytrin	terazosin	antiadrenergic
Avalide	irbesartan/hctz	ARB
Avapro	irbesartan	ARB
Cozaar	losartan	ARB
Diovan	valsartan	ARB
Hyzaar	losartan	ARB
Benicar	olmesartan	ARB
Prinivil/Zestril	lisinopril	ACE
Vasotec	enalapril	ACE
Accupril	quinapril	ACE
Altace	ramipril	ACE
Lotensin	benazepril	ACE
Capoten	captopril	ACE

Nitrates (angina)

Vasodilators used for angina. Watch for hypotension, especially with recent PDE5-inhibitor use (Viagra/Cialis/Levitra), the combination can cause profound, refractory hypotension, so always ask about ED medication use before nitro administration.

Brand Name	Generic Name	Notes / Indication
Imdur	isosorbide	
Nitrobid/Nitrostat	nitroglycerin	

Antidysrhythmics

Used to control ventricular or supraventricular dysrhythmias. Amiodarone has a long half-life and multiple toxicities (thyroid, lung, liver) with chronic use; digoxin has a narrow therapeutic window and toxicity presents with GI upset, visual changes, and dysrhythmias, important context on any elderly a-fib patient with vague complaints.

Brand Name	Generic Name	Notes / Indication
Cordarone/Pacerone	amiodarone	ventricular
Lanoxin/Digitek	digoxin	a-fib
Rythmol	propafenone	SVT/a-fib

Antiplatelet / Anticoagulant

Bleeding risk is the headline for this whole class, critical to identify on any trauma or head-injury patient regardless of mechanism. The newer DOACs (Xarelto, Pradaxa, Eliquis) don't require routine lab monitoring like warfarin but still carry major bleeding risk and have specific reversal considerations.

Brand Name	Generic Name	Notes / Indication
Plavix	clopidogrel	
Coumadin	warfarin	
Aggrenox	ASA/dipyridamole	
Lovenox	enoxaparin	
Xarelto	rivaroxaban	
Pradaxa	dabigatran	
Eliquis	apixaban	
Brilinta	ticagrelor	

Pulmonary, Beta Agonist / Steroid

Bronchodilators (albuterol-based) treat acute symptoms; inhaled steroids (Flovent, Pulmicort, Aerobid) and Advair/Symbicort combos are maintenance/prevention, not rescue, a patient reaching for these during an acute exacerbation is a sign their disease is poorly controlled. Spiriva/Atrovent (anticholinergics) are also maintenance-focused for COPD.

Brand Name	Generic Name	Notes / Indication
Advair	fluticasone/salmeterol	COPD
Proventil/Ventolin	albuterol	asthma/COPD
Proair	albuterol	asthma/COPD
Combivent	albuterol/ipratropium	COPD
Duoneb	albuterol/ipratropium	COPD
Symbicort	budesonide/formoterol	asthma/COPD
Flovent (steroid)	fluticasone	asthma
Pulmicort (steroid)	budesonide	asthma
Aerobid (steroid)	flunisolide	asthma
Spiriva	tiotropium	COPD
Atrovent	ipratropium	COPD

Diuretics (CHF)

Lasix (furosemide) is the classic loop diuretic for CHF/fluid overload; watch for hypokalemia and dehydration. Aldactone (spironolactone) is potassium-sparing, the opposite risk (hyperkalemia), especially if combined with ACE inhibitors/ARBs.

Brand Name	Generic Name	Notes / Indication
Lasix	furosemide	
HCTZ/Microzide	hydrochlorothiazide	
Aldactone	spironolactone	HTN & edema

Antihistamines (seasonal allergies)

Mostly benign at home doses, but Allegra/Claritin/Zyrtec can still cause sedation in some patients, and Singulair (montelukast) is also used for asthma prevention, not just allergies.

Brand Name	Generic Name	Notes / Indication
Allegra	fexofenadine	
Claritin	loratadine	
Singulair	montelukast	also asthma
Zyrtec	cetirizine	

Diabetes Medications

Know the difference between oral agents (which can cause hypoglycemia, especially sulfonylureas like Glucotrol/Micronase/Amaryl) and insulins. Insulin overdose or a missed meal after dosing is one of the more common preventable prehospital emergencies, always check a blood glucose on altered patients with diabetes in their history.

Brand Name	Generic Name	Notes / Indication
Actos	pioglitazone	
Glucophage	metformin	
Glucotrol	glipizide	
Micronase	glyburide	
Avandia	rosiglitazone	
Amaryl	glimepiride	
Novolog	insulin	
Lantus	insulin	
Humalog	insulin	
Januvia	sitagliptin	
Toujeo	insulin	
Levemir	insulin	
Invokana	canagliflozin	

Thyroid Agent

Levothyroxine replacement is common and generally low-risk in the field, but an untreated or non-compliant hypothyroid patient can present with lethargy, hypothermia, and bradycardia, worth a mental note on unexplained altered/slow patients.

Brand Name	Generic Name	Notes / Indication
Synthroid/Levoxyl/ Levothroid	levothyroxine	

Erectile Dysfunction

PDE5 inhibitors, the critical field fact is the nitrate interaction. Always ask about ED medication use before administering nitroglycerin for chest pain; the combination can cause severe, prolonged hypotension.

Brand Name	Generic Name	Notes / Indication
Cialis	tadalafil	
Levitra	vardenafil	
Viagra	sildenafil	

Antihyperlipidemic

Statins and related cholesterol-lowering agents. Not acutely dangerous, but statin use is a signal of underlying cardiovascular disease worth factoring into your differential on a chest-pain or syncope call.

Brand Name	Generic Name	Notes / Indication
Lipitor	atorvastatin	
Mevacor	lovastatin	
Pravachol	pravastatin	
Crestor	rosuvastatin	
Zocor	simvastatin	
Vytorin	ezetimibe/simvastatin	
Zetia	ezetimibe	

Proton Pump Inhibitors (GERD)

Generally low field-risk maintenance meds for reflux/ulcer disease. Their presence on a med list is mostly useful as a clue toward GI history when evaluating abdominal complaints.

Brand Name	Generic Name	Notes / Indication
Nexium	esomeprazole	
Prevacid	lansoprazole	
Prilosec	omeprazole	
Protonix	pantoprazole	

Antimicrobials

Recent or current antibiotic use is a useful clue for an infectious process (and, indirectly, for possible allergic reaction if the patient presents with a rash or respiratory symptoms shortly after starting one).

Brand Name	Generic Name	Notes / Indication
Cipro	ciprofloxacin	
Avelox	moxifloxacin	
Levaquin	levofloxacin	
Amoxil	amoxicillin	
Zithromax	azithromycin	
Rocephin	ceftriaxone	
Keflex	cephalexin	

Bisphosphonates (osteoporosis prevention)

Low field-acuity, but useful history: these patients have documented osteoporosis, which should raise your index of suspicion for fracture with even low-mechanism falls.

Brand Name	Generic Name	Notes / Indication
Fosamax	alendronate	
Boniva	ibandronate	

Brand Name	Generic Name	Notes / Indication
Actonel	risedronate	
Evista	raloxifene	

Bladder Agents (incontinence)

Anticholinergic-type agents for overactive bladder. Low acute risk, but contribute to the same 'anticholinergic burden' as other drugs on a polypharmacy patient (dry mouth, confusion, constipation), worth considering in an elderly patient with vague cognitive complaints.

Brand Name	Generic Name	Notes / Indication
Detrol	tolterodine	
Ditropan	oxybutynin	
Vesicare	solifenacin	

Benign Prostatic Hyperplasia (enlarged prostate)

Alpha-blockers (Flomax) and 5-alpha reductase inhibitors (Proscar, Avodart) for BPH. Flomax in particular can contribute to orthostatic hypotension, a relevant detail on an older male patient with a fall or syncope complaint.

Brand Name	Generic Name	Notes / Indication
Proscar	finasteride	
Avodart	dutasteride	
Flomax	tamsulosin	