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# TEST BANK

FIFTH EDITION

# Pharmacotherapy

## Principles & Practice



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# Pharmacotherapy Principles and Practice

## 5th Edition Chisholm-Burns Test Bank

### CHAPTER 1. Introduction

1. What is the name under which a drug is listed by the U.S. Food and Drug Administration (FDA)?

- a. Brand
- b. Nonproprietary
- c. Official
- d. Trademark

2. Which source contains information specific to nutritional supplements?

- a. *USP Dictionary of USAN & International Drug Names*
- b. *Natural Medicines Comprehensive Database*
- c. *United States Pharmacopoeia/National Formulary (USP NF)*
- d. *Drug Interaction Facts*

3. What is the most comprehensive reference available to research a drug interaction?

- a. *Drug Facts and Comparisons*
- b. *Drug Interaction Facts*
- c. *Handbook on Injectable Drugs*
- d. *Martindale The Complete Drug Reference*

4. The physician has written an order for a drug with which the nurse is unfamiliar. Which section of the *Physicians Desk Reference (PDR)* is most helpful to get information about this drug?

- a. Manufacturers section
- b. Brand and Generic Name section
- c. Product Category section
- d. Product Information section

5. Which online drug reference makes available to health care providers and the public a standard, comprehensive, up to date look up and downloadable resource about medicines?

- a. *American Drug Index*
- b. *American Hospital Formulary*
- c. DailyMed
- d. *Physicians Desk Reference (PDR)*

6. Which legislation authorizes the FDA to determine the safety of a drug before its marketing?

- a. Federal Food, Drug, and Cosmetic Act (1938)
- b. Durham Humphrey Amendment (1952)

- c. Controlled Substances Act (1970)
- d. Kefauver Harris Drug Amendment (1962)

7. Meperidine (Demerol) is a narcotic with a high potential for physical and psychological dependency. Under which classification does this drug fall?

- a. I
- b. II
- c. III
- d. IV

8. What would the FDA do to expedite drug development and approval for an outbreak of smallpox, for which there is no known treatment?

- a. List smallpox as a health orphan disease.
- b. Omit the preclinical research phase.
- c. Extend the clinical research phase.
- d. Fast track the investigational drug.

9. Which statement is true about over the counter (OTC) drugs?

- a. They are not listed in the *USP NF*.
- b. A prescription from a health care provider is needed.
- c. They are sold without a prescription.
- d. They are known only by their brand names.

10. Which is the most authoritative reference for medications that are injected?

- a. *Physicians Desk Reference*
- b. *Handbook on Injectable Drugs*
- c. DailyMed
- d. *Handbook of Nonprescription Drugs*

11. The nurse is administering Lomotil, a Schedule V drug. Which statement is true about this drug's classification?

- a. Abuse potential for this drug is low.
- b. Psychological dependency is likely.
- c. There is a high potential for abuse.
- d. This drug is not a controlled substance.

12. The nurse is transcribing new orders written for a patient with a substance abuse history. Choose the medication ordered that has the greatest risk for abuse.

- a. Lomotil
- b. Diazepam
- c. Phenobarbital

d. Lortab

13. The nurse is caring for a patient newly diagnosed with type 1 diabetes mellitus. Which approach(es) to therapeutic methods would be considered in this patient's treatment? (*Select all that apply.*)

- a. Therapeutic drugs
- b. Concentrated carbohydrate diet
- c. Family centered care
- d. Regular daily exercise and activity
- e. Daily baths

14. An older adult experiencing shortness of breath is brought to the hospital by her daughter. While obtaining the medication history from the patient and her daughter, the nurse discovers that neither has a list of the patient's current medications or prescriptions. All the patient has is a weekly pill dispenser that contains four different pills. The prescriptions are filled through the local pharmacy. Which resource(s) would be appropriate to use in determining the medication names and doses? (*Select all that apply.*)

- a. *Martindale The Complete Drug Reference*
- b. *Physicians Desk Reference, Section 4*
- c. Senior citizens center
- d. Patient's home pharmacy

15. The nurse planning patient teaching regarding drug names would include which statement(s)? (*Select all that apply.*)

- a. Most drug companies place their products on the market under generic names.
- b. The official name is the name under which the drug is listed by the U.S. Food and Drug Administration (FDA).
- c. Brand names are easier to pronounce, spell, and remember.
- d. The first letter of the generic name is not capitalized.
- e. The chemical name is most meaningful to the patient.

16. When categorizing, the nurse is aware that which drug(s) would be considered Schedule II? (*Select all that apply.*)

- a. Marijuana
- b. Percodan
- c. Amphetamines
- d. Fiorinal
- e. Flurazepam

**Answers**

- 1. C
- 2. C

- 3. B
- 4. B
- 5. C
- 6. A
- 7. B
- 8. D
- 9. C
- 10. B
- 11. A
- 12. D
- 13. A,B,D
- 14. B,D
- 15. B,C,D
- 16. B,C

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## CHAPTER 2. GERIATRICS

1. The following is an accurate description of the aging population:
  - A. The number of older adults will reach 17 million in 2030
  - B. The ratio of women to men will no longer exist
  - C. The surviving baby boomers will be more racially diverse than previous elders
  - D. The surviving baby boomers will have less financial resources than previous elders
  - E. The minority elder populations are projected to decrease in 2020
2. Education and health literacy in the older Americans can be described as:
  - A. In 2007, 62% of Hispanic elders had high school degrees
  - B. Nearly 20% of people 75 years and older have low health literacy
  - C. In 2007, 62% of black elders had high school degrees
  - D. Nearly 40% of people 75 years and older have low health literacy
  - E. None of the above
3. Following are common chronic conditions older Americans have:
  - A. Diabetes, hypertension, cancer
  - B. Hypertension, Alzheimer disease, Parkinson disease
  - C. Asthma, stroke, hypothyroidism
  - D. Chronic lower respiratory diseases, Alzheimer disease, stroke
  - E. Cancer, heart disease, Parkinson disease
4. The most important pharmacokinetic change that occurs with aging is:
  - A. Reduced renal function
  - B. Delayed gastric emptying
  - C. Increased conjugation
  - D. Phase II hepatic metabolism
  - E. Deconditioning
5. All of the following are incorporated into the Cockcroft–Gault equation except:
  - A. Age
  - B. Gender
  - C. Serum albumin
  - D. Serum creatinine
  - E. Weight
6. Because of pharmacodynamic changes, older adults have increased sensitivity to:
  - A. Acetaminophen
  - B. Metformin
  - C. Aspirin
  - D. Morphine
  - E. Cyanocobalamin
7. Polypharmacy use in older adults does not result in:
  - A. Increased adherence
  - B. Increased drug–drug interaction
  - C. Increased complex regimen
  - D. Increased hospitalization
  - E. Increased health care cost
8. According to the 2012 Beers criteria, the following drug should be avoided in older adults:

- A. Diazepam
  - B. Warfarin
  - C. Aspirin
  - D. Pravastatin
  - E. Mirtazapine
9. The following statement about pain in older adults is true:
- A. Older adults do not feel as much pain as younger adults.
  - B. Older adults experience less addiction when using opioids for nerve pain.
  - C. Pain is not a quality indicator in long-term care facilities because it is not an objective measure.
  - D. Pain is frequently undertreated and underreported in elders.
  - E. Elders are more comfortable with opioid use because they are closer to end of life.
10. The predictors of adverse drug reactions include the following except:
- A. More than four medications
  - B. Longer than 14 days of hospital stay
  - C. More than four active medical problems
  - D. Smoking history
  - E. History of alcohol use
11. Medication nonadherence among older adults is influenced by:
- A. More than two prescribers
  - B. Four or more medication changes in past 12 months
  - C. History of more than two surgeries
  - D. Having no caregiver help
  - E. More than two chronic conditions for at least 10 years
12. Anticoagulation therapy in older adults:
- A. has proven benefit in atrial fibrillation
  - B. should be withheld due to bleeding side effects
  - C. should be withheld due to fall risks
  - D. is more beneficial in the very sick
  - E. is less beneficial in the community-dwelling ambulatory patient
13. Geriatric assessment:
- A. should only be performed by a board-certified geriatrician
  - B. is an interprofessional collaborative process
  - C. routinely includes a formal driving evaluation by occupational therapy
  - D. includes history taking from the patient alone without family for maximum privacy
  - E. is usually done at the hospital during an acute admission
14. Quality indicators:
- A. monitor costs related to pressure ulcer formation in long-term care facilities
  - B. are used to measure the environmental quality of outpatient geriatric clinics
  - C. do not include subjective complaints such as pain
  - D. focus on physical health issues and do not include mental health issues
  - E. are used by facility administrators and government overseers to identify problem areas
15. The following statement about pharmacotherapy in older adults is false:
- A. Renal function needs to be monitored for patients on digoxin.



- B. Beers criteria indicate inappropriate medications.
- C. Benzodiazepines may cause significant adverse effects.
- D. Albumin needs to be monitored for patients on phenytoin.
- E. Drug monitoring is often unnecessary due to multimorbidity.

Answers

- 1. C
- 2. D
- 3. A
- 4. A
- 5. C
- 6. D
- 7. A
- 8. A
- 9. D
- 10. D
- 11. B
- 12. A
- 13. B
- 14. E
- 15. E

### CHAPTER 3. PEDIATRICS

1. AJ is a 14-day-old premature male infant, born at 30-week GA, started on ampicillin and gentamicin for neonatal sepsis. Which pharmacokinetic parameter affects the patient's dosing frequency of gentamicin?
  - A. Absorption
  - B. Protein binding
  - C. Metabolism—Phase I reactions
  - D. Metabolism—Phase II reactions
  - E. Elimination half-life
2. Which is an appropriate maintenance fluid requirement for a 4-year-old boy with a weight of 40 pounds?
  - A. ~1400 mL/day
  - B. ~1600 mL/day
  - C. ~1800 mL/day
  - D. ~2000 mL/day
  - E. ~2200 mL/day
3. MM is a 6-month-old male infant who was born at 34-week GA. You are asked to evaluate his renal function in preparation for starting intravenous antibiotics. Which method for assessment is most appropriate?
  - A. "Bedside" Schwartz equation
  - B. Cockcroft–Gault equation
  - C. Schwartz (original) equation
  - D. Modification of diet in renal disease (MDRD) equation
  - E. Urine output alone
4. PG, a 1-week-old, 2.5-kg girl born at 30-week GA, is to be started on gentamicin for suspected neonatal sepsis. Which of the following is true regarding PG's apparent volume of distribution (Vd) in milliliters per kilogram for gentamicin compared with adults and children with normal renal function?
  - A. Vd will be less than those used in adults and children.
  - B. Vd will be greater than those used in adults and children.
  - C. Vd will be less than those used in adults but similar to children.
  - D. Vd will be greater than those used in adults but less than in children.
  - E. Vd will be the same as adults and children.
5. NC is a 5-year-old boy who is to start carbamazepine, an antiepileptic medication, for seizure disorder. Which pharmacokinetic parameter affects his daily dose requirement of carbamazepine, by body weight?
  - A. Absorption
  - B. Distribution
  - C. Metabolism—Phase I reactions
  - D. Metabolism—Phase II reactions
  - E. Elimination
6. Which of the following is not an appropriate treatment of cold symptoms in a 1-year-old child?
  - A. Adequate oral fluid intake
  - B. Dextromethorphan cough syrup
  - C. Honey (orally)