

LEHNE'S PHARMACOTHERAPEUTICS FOR ADVANCED PRACTICE NURSES AND PHYSICIAN ASSISTANTS 2ND EDITION ROSENTHAL TEST BANK

Chapter 1: Prescriptive Authority

Test Bank

Multiple Choice

1. An APRN works in a urology clinic under the supervision of a physician who does not restrict the types of medications the APRN is allowed to prescribe. State law does not require the APRN to practice under physician supervision. How would the APRN's prescriptive authority be described?
 - a. Full authority
 - b. Independent
 - c. Without limitation
 - d. Limited authority

ANS: B

The APRN has independent prescriptive authority because the regulating body does not require that the APRN work under physician supervision. Full prescriptive authority gives the provider the right to prescribe independently and without limitation. Limited authority places restrictions on the types of drugs that can be prescribed. DIF: Cognitive Level: Comprehension REF: p. 1 TOP: Nursing Process: I MSC: NCLEX Client Needs Category: Physiologic Integrity: Pharmacologic and Parenteral Therapies

2. Which factors increase the need for APRNs to have full prescriptive authority?
 - a. More patients will have access to health care.
 - b. Enrollment in medical schools is predicted to decrease.
 - c. Physician's assistants are being utilized less often.
 - d. APRN education is more complex than education for physicians.

ANS: A

Implementation of the Affordable Care Act has increased the number of individuals with health care coverage, and thus the number who have access to health care services. The increase in the number of patients creates the need for more providers with prescriptive authority. APRNs can fill this practice gap. DIF: Cognitive Level: Comprehension REF: p. 2 TOP: Nursing Process: Implementation MSC: NCLEX Client Needs Category: Physiologic Integrity: Pharmacologic and Parenteral Therapies

3. Which factors could be attributed to limited prescriptive authority for APRNs? Select all that apply.

- a. Inaccessibility of patient care
- b. Higher health care costs
- c. Higher quality medical treatment
- d. Improved collaborative care
- e. Enhanced health literacy

ANS: A , B

Limiting prescriptive authority for APRNs can create barriers to quality, affordable, and accessible patient care. It may also lead to poor collaboration among providers and higher health care costs. It would not directly impact patient's health literacy. DIF: Cognitive Level: Comprehension REF: p. 2 TOP: Nursing Process: Implementation MSC: NCLEX Client Needs Category: Physiologic Integrity: Pharmacologic and Parenteral Therapies

4. Which aspects support the APRN's provision for full prescriptive authority?
Select all that apply.
- a. Clinical education includes prescription of medications and disease processes.
 - b. Federal regulations support the provision of full authority for APRNs.
 - c. National examinations provide validation of the APRN's ability to provide safe care.
 - d. Licensure ensures compliance with health care and safety standards.
 - e. Limiting provision can decrease health care affordability.

ANS: A , C , D

APRNs are educated to practice and prescribe independently without supervision. National examinations validate the ability to provide safe and competent care. Licensure ensures compliance with standards to promote public health and safety. Limited prescriptive authority creates numerous barriers to quality, affordable, and accessible patient care. DIF: Cognitive Level: Comprehension REF: pp. 1-2 TOP: Nursing Process: Implementation MSC: NCLEX Client Needs Category: Physiologic Integrity: Pharmacologic and Parenteral Therapies

5. Which aspects support the APRN's provision for full prescriptive authority?
Select all that apply.
- a. Clinical education includes prescription of medications and disease processes.
 - b. Federal regulations support the provision of full authority for APRNs.
 - c. National examinations provide validation of the APRN's ability to provide safe care.
 - d. Licensure ensures compliance with health care and safety standards.

ANS: A , C , D

APRNs are educated to practice and prescribe independently without supervision. National examinations validate the ability to provide safe and competent care. Licensure ensures compliance with standards to promote public health and safety. Limited prescriptive authority creates numerous barriers to quality, affordable, and accessible patient care. DIF: Cognitive Level:

ComprehensionREF: pp. 1-2TOP: Nursing Process: Implementation MSC: NCLEX Client Needs Category: Physiologic Integrity: Pharmacologic and Parenteral Therapies

6. A family nurse practitioner practicing in Maine is hired at a practice across state lines in Virginia. Which aspect of practice may change for the APRN?
- The APRN will have less prescriptive authority in the new position.
 - The APRN will have more prescriptive authority in the new position.
 - The APRN will have equal prescriptive authority in the new position.
 - The APRN's authority will depend on federal regulations.

ANS: A

Virginia allows limited prescriptive authority, while Maine gives full authority to certified nurse practitioners. The federal government does not regulate prescriptive authority.DIF: Cognitive Level: ComprehensionREF: p. 3TOP: Nursing Process: Implementation MSC: NCLEX Client Needs Category: Physiologic Integrity: Pharmacologic and Parenteral Therapies

Rosenthal: Lehne's Pharmacotherapeutics for Advanced Practice Providers, 2nd Ed.

Chapter 2: Rational Drug Selection and Prescription Writing

Test Bank

Multiple Choice

7. How can collaboration with a pharmacist improve positive outcomes for patients? Select all that apply.
- Pharmacists can suggest foods that will help with the patient's condition.
 - Pharmacists have additional information on drug interactions.
 - The pharmacist can suggest adequate medication dosing.
 - Pharmacists have firsthand knowledge of the facility formulary.
 - Pharmacy can alter prescriptions when necessary to prevent patient harm.

ANS: B , C , D

Providers should collaborate with pharmacists because they will likely have additional information on formulary, drug interactions, and suggestions for adequate medication dosing. Dietitians can make food recommendations to treat the patient's condition. The pharmacist can contact the prescriber about questionable prescriptions, but cannot alter the prescription without notification of and approval by the provider.DIF: Cognitive Level: ComprehensionREF: p. 9TOP: Nursing Process: Diagnosis MSC: NCLEX Client Needs Category: Physiologic Integrity: Reduction of Risk Potential