Chapter 1 Issues for the Practitioner in Drug Therapy

MULTIPLE CHOICE

1	Marga	nraatitianar	nragarintizza	anthanity		o and atad	h
Ι.	nuise	practitioner	prescriptive	aumonny	/ 18 1	eguiated	υy.

- A. The National Council of State Boards of Nursing
- B. The U.S. Drug Enforcement Administration
- C. The State Board of Nursing for each state
- D. The State Board of Pharmacy

ANS: C PTS: 1

- 2. Physician Assistant (PA) prescriptive authority is regulated by:
 - A. The National Council of State Boards of Nursing
 - B. The U.S. Drug Enforcement Administration
 - C. The State Board of Nursing
 - D. The State Board of Medical Examiners

ANS: D PTS: 1

- 3. Clinical judgment in prescribing includes:
 - A. Factoring in the cost to the patient of the medication prescribed
 - B. Always prescribing the newest medication available for the disease process
 - C. Handing out drug samples to poor patients
 - D. Prescribing all generic medications to cut costs

ANS: A PTS: 1

- 4. Criteria for choosing an effective drug for a disorder include:
 - A. Asking the patient what drug they think would work best for them
 - B. Consulting nationally recognized guidelines for disease management
 - C. Prescribing medications that are available as samples before writing a prescription
 - D. Following U.S. Drug Enforcement Administration (DEA) guidelines for prescribing

ANS: B PTS: 1

- 5. Nurse practitioner practice may thrive under health-care reform due to:
 - A. The demonstrated ability of nurse practitioners to control costs and improve patient outcomes
 - B. The fact that nurse practitioners will be able to practice independently
 - C. The fact that nurse practitioners will have full reimbursement under health-care reform
 - D. The ability to shift accountability for Medicaid to the state level

ANS: A PTS: 1

Chapter 2.Pharmacokinetic Basis of Therapeutics and Pharmacodynamic

MULTIPLE CHOICE

- 1. A patient's nutritional intake and lab work reflects hypoalbuminemia. This is critical to prescribing because:
 - A. Distribution of drugs to target tissue may be affected
 - B. The solubility of the drug will not match the site of absorption
 - C. There will be less free drug available to generate an effect
 - D. Drugs bound to albumin are readily excreted by the kidney

ANS: A PTS: 1

- 2. Drugs that have a significant first-pass effect:
 - A. Must be given by the enteral (oral) route only
 - B. Bypass the hepatic circulation
 - C. Are rapidly metabolized by the liver and may have little if any desired action
 - D. Are converted by the liver to more active and fat-soluble forms

ANS: C PTS: 1

- 3. The route of excretion of a volatile drug will likely be:
 - A. The kidneys
 - B. The lungs
 - C. The bile and feces
 - D. The skin

ANS: B PTS: 1

- 4. Medroxyprogesterone (Depo Provera) is prescribed IM to create a storage reservoir of the drug. Storage reservoirs:
 - A. Assure that the drug will reach its intended target tissue
 - B. Are the reason for giving loading doses
 - C. Increase the length of time a drug is available and active
 - D. Are most common in collagen tissues

ANS: C PTS: 1

- 5. The NP chooses to give cephalexin every 8 hours based on knowledge of the drug's:
 - A. Propensity to go to the target receptor
 - B. Biological half-life
 - C. Pharmacodynamics
 - D. Safety and side effects

ANS: B PTS: 1

- 6. Azithromycin dosing requires the first day's dose be twice those of the other 4 days of the prescription. This is considered a loading dose. A loading dose:
 - A. Rapidly achieves drug levels in the therapeutic range
 - B. Requires four to five half-lives to attain
 - C. Is influenced by renal function