MULTIPLE CHOICE

1. A nurse is caring for a 14-year-old patient with epilepsy. The child takes phenytoin and started taking Lamictal (lamotrigine) 50 mg/day approximately 10 days ago. The child's mother calls to report a newly noted rash across the girl's face and arms. Which of the following statements by the nurse is best? A. "Did your daughter use a new soap?"

B. "Has your daughter been exposed to poison ivy or other plant irritants?"

C. "Do not give the Lamictal; your daughter will need to be seen by the doctor today."

D. "This is commonly seen with Lamictal. A mild soap and calamine lotion may reduce any itching."

ANS: C

See Nursing Implications/Assessment for lamotrigine. Assess patient for skin rash frequently during therapy. Discontinue lamotrigine at first sign of rash; it may be life-threatening. Stevens-Johnson syndrome or toxic epidermal necrolysis may develop. The rash usually occurs during the initial 2–8 wk of therapy and is more frequent in patients taking multiple antiepileptic agents, especially valproic acid, and is much more frequent in patients <16 yr.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Anticonvulsants REF: Page 744

2. The nurse receives a call from an 82-year-old patient with advanced prostate cancer who is being treated with Eligard (leuprolide) therapy. Which of the following statements requires immediate notification of the physician?

A. "I've been having hot flashes lately, what should I do?"

B. "The pain in my bones seems worse since I started this medication."

C. "I forgot to get my shot 3 hours ago like I usually do, so I was going to take it now; is that okay?"

D. "My legs feel numb and weak; is that normal with this medication?"

ANS: D

See Patient/Family Teaching for leuprolide. Instruct patient to notify a health-care professional promptly if difficulty urinating, weakness, or numbness occurs. Advise patient that medication may cause hot flashes. Advise patient that bone pain may increase at initiation of therapy. This will resolve with time. Instruct patient to take medication exactly as directed. If a dose is missed, take as soon as remembered unless not remembered until next day.

KEY: Cognitive Level: Analysis DIF: Medium TOP: Therapeutic Classification: Antineoplastics REF: Page 763

3. The nurse is caring for a woman with metastatic breast cancer who was recently admitted with hypercalcemia. Which of the following medications does the nurse anticipate would be included in the treatment plan?

A. Zometa (zoledronic acid)

B. Oscal (calcium carbonate)C. Sandostatin (octreotide)D. Emend (aprepitant)

ANS: A

See Indications and Actions for zoledronic acid. Zometa is used in the treatment of hypercalcemia of malignancy. It inhibits bone resorption by inhibiting increased osteoclast activity and skeletal calcium release induced by tumors. Therapeutic effects include decreased serum calcium. Oscal is a calcium supplement and should be avoided if the patient's serum calcium level is too high. Sandostatin is used in the treatment of severe diarrhea including that caused by carcinoid tumors. Emend is used in the treatment of nausea/vomiting during chemotherapy.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Bone resorption inhibitors, Electrolyte modifiers, Hypocalcemics REF: Page 1292

4. The nurse is providing care for a 92-year-old patient who has a standing order for Ambien (zolpidem) prn for insomnia. When providing the medication for the patient as requested, which of the following actions by the nurse is best?

A. Inform the patient the medication will work within 10 min.

B. Ensure the patient is in bed, ready for sleep, and raise the bed side rails.

C. Instruct the patient to eat some crackers to reduce stomach irritation caused by the medication.

D. Suggest the patient take the medication routinely every night.

ANS: B

See Patient Teaching for zolpidem. Because of rapid onset, advise patient to go to bed immediately after taking zolpidem. Onset of action is 30 min or more and is increased in geriatric patients and patients with hepatic impairment. Do not administer with or immediately after a meal as food slows absorption. Due to the habit-forming nature of this medication, it should not be used for more than 7–10 days.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Sedative/Hypnotics REF: Pages 1297-1298

5. The nurse is caring for a patient with multiple medications, including Sinemet (carbidopa/levodopa) QID. The nurse knows this medication is effective by which of the following signs or symptoms?

A. The patient has fewer hand tremors.

B. The patient's apical pulse is regular.

C. The patient has less edema in the ankles bilaterally.

D. The patient's cough is well controlled.

ANS: A

See Evaluation/Desired Effect for carbidopa/levodopa. Effects include resolution of parkinsonian signs and symptoms. Therapeutic effects usually become evident after 2-3 wk of therapy but may require up to 6 months.

KEY: Cognitive Level: Analysis DIF: Medium TOP: Therapeutic Classification: Antiparkinson agents REF: Page 282

6. While caring for a patient who is taking Imodium (loperamide), the nurse would be most concerned by which of the following symptoms?

A. Patient reports abdominal cramping and loose stool.

B. Patient complains of a headache and a sore throat.

C. Pupils are equal, round, and reactive to direct and indirect light.

D. Tenting across the clavicular region and decreased reflexes are noted.

ANS: D

See Assessment for loperamide. Assess fluid and electrolyte balance and skin turgor for dehydration. Tenting is an indication of dehydration, and decreased deep tendon reflexes are indicative of hypokalemia. The patient is taking Imodium, which is used in the treatment of diarrhea, so symptoms of abdominal cramping and loose stool are expected. Viral symptoms are not the first priority and may be related to the cause of the diarrhea. PERRL is a normal finding. Diarrhea places the patient at risk for dehydration and hypokalemia, so this is the first priority.

KEY: Cognitive Level: Analysis DIF: Hard TOP: Therapeutic Classification: Antidiarrheals REF: Page 787

7. The nurse prepares to provide Zofran (ondansetron) in orally disintegrating tablet. Which of the following instructions should the nurse provide?

A. "Simply suck on the pill like a lozenge, and it will dissolve over a few minutes."

B. "Place the tablet on your tongue; it will melt in seconds and then you can swallow."

C. "Take this with a full swallow of water."

D. "I will dissolve this in some water, and you can drink it in one sip."

ANS: B

See Implementation for ondansetron. Immediately place tablet on tongue; it will dissolve in seconds. Then swallow with saliva.

KEY: Cognitive Level: Application **DIF:** Easy **TOP:** Therapeutic Classification: Antiemetics REF: Page 948

8. The nurse is caring for a patient taking Xenical (orlistat). Which of the following symptoms would be most concerning to the nurse?

A. Nausea and vomiting

B. Orange-colored oil noted in stool

C. Reports of fecal urgency

D. Flatus with discharge

ANS: A

See Side Effects for orlistat. Nausea and vomiting are not expected with this drug. Common GI side effects include fecal urgency, flatus with discharge, increased defecation, oily evacuation, oily spotting, and fecal incontinence.

KEY: Cognitive Level: Analysis DIF: Medium TOP: Therapeutic Classification: Weight control agents REF: Drugguide.com

9. The nurse is caring for a client who is to receive Trileptal (oxcarbazepine). The nurse recognizes this client most likely has a history of which of the following?

- A. Diabetes mellitus
- B. Depression
- C. Seizures

D. Hypothyroidism

ANS: C

See Indications for oxcarbazepine. Trileptal is used as monotherapy or adjunctive therapy of partial seizures in adults and children 4 years and older with epilepsy.

KEY: Cognitive Level: Knowledge DIF: Medium TOP: Therapeutic Classification: Anticonvulsants REF: Page 958

10. The nurse is caring for a patient receiving Aredia (pamidronate) for the treatment of Paget's disease. Which of the following symptoms would be most concerning to the nurse?

- A. Anorexia
- B. Bone pain
- C. Constipation
- D. Muscle twitching

ANS: D

See Side effects and Assessment for pamidronate. Observe for evidence of hypocalcaemia (paresthesia, muscle twitching, laryngospasm, and Chvostek's or Trousseau's sign).

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Bone resorption inhibitors REF: Pages 977-978 11. A student nurse caring for a patient who is taking Creon (pancrelipase) would include which of the following statements when reviewing medications with the instructor?

A. "This reduces inflammation of the pancreas seen with pancreatitis."

B. "This increases absorption of fats since the pancreas is not excreting normal enzymes."

C. "This is used to bind with proteins and reduce protein excretion in the urine."

D. "This helps relieve abdominal pain caused by liver damage in patients with a history of alcohol abuse."

ANS: B

See Action/Therapeutic Effect for pancrelipase. Effects include increased digestion of fats, carbohydrates, and proteins in the GI tract.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Digestive agents REF: Page 979

12. Which of the following would cause the nurse to intervene for a patient taking Protonix (pantoprazole)?

A. The client takes the medication an hour before breakfast.

B. The client orders eggs and bacon for breakfast.

C. The client drinks a glass of orange juice when taking the medication.

D. The client chews the medication before swallowing.

ANS: D

See Implementation for pantoprazole. Do not break, crush, or chew tablets.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Antiulcer agents REF: Page 985

13. Which of the following lab values should be followed periodically for a patient taking Paxil (paroxetine)?

- A. Complete blood count
- B. Electrolytes
- C. Thyroxine
- D. Creatinine

ANS: A

See Assessment/Lab test considerations for paroxetine. Lab Test Considerations: Monitor CBC and differential periodically during therapy. Report leukopenia or anemia.

KEY: Cognitive Level: Knowledge DIF: Hard TOP: Therapeutic Classification: Anti-anxiety agents, Antidepressants REF: Page 988 14. While caring for a patient who uses oral birth control pills and is taking PO (procaine penicillin G), which of the following instructions should the nurse include in the client teaching?

A. "You should stop taking your birth control pills for at least 3 months since you have to take this medication."

B. "You will need to use a barrier method of birth control through this therapy and until your next menstrual cycle."

C. "The doctor will want to give you a hormone patch in addition to the birth control pills for the next 30 days."

D. "There is no need to alter your method of birth control while you are taking this medication."

ANS: B

See Patient/Family Teaching for penicillin. Advise patient taking oral contraceptives to use an additional nonhormonal method of contraception during therapy with penicillin and until next menstrual period.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Anti-infectives REF: Page 1004

15. The nurse is caring for a woman in labor who is given Talwin (pentazocine). Which of the following actions should the nurse take next?

A. Elevate the side rails and instruct the patient to call before attempting to ambulate.

B. Prepare for the placement of an internal monitoring device.

C. Encourage the client to lie on her right side.

D. Monitor the patient's blood pressure every 15 min.

ANS: A

See Patient/Family Teaching for pentazocine. Medication may cause drowsiness, dizziness, or hallucinations, particularly in geriatric patients. Advise patient to call for assistance when ambulating.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Opioid analgesics REF: Drugguide.com

16. The nurse would be most concerned if a patient taking phenobarbital reported daily consumption of which of the following?

A. Grapefruit juice

B. Beer

C. Milk

D. Coffee

ANS: B

See Patient/Family Teaching for phenobarbital. Caution patient to avoid taking alcohol or other CNS depressants concurrently with this medication.

KEY: Cognitive Level: Application

DIF: Medium TOP: Therapeutic Classification: Anticonvulsants REF: Page 1018

17. A student nurse caring for a client with a history of anxiety disorder would expect which of the following medications to be included in the patient's treatment plan?

A. Atarax (hydroxyzine)

B. Bonine (meclizine)

C. Ativan (lorazepam)

D. Adalat CC (nifedipine)

ANS: C

See Indications for lorazepam. Ativan is an antianxiety agent. Atarax is provided for itching. Bonine is provided for vertigo. Adalat CC in provided for hypertension.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Antianxiety agents REF: Page 791

18. The nurse is caring for a patient who has an order for Osmitrol (mannitol) 1 g/kg to be infused over an hour. Which of the following actions should the nurse take prior to administering the medication?

A. Assess deep tendon reflexes.

B. Determine the blood pressure.

C. Evaluate level of consciousness.

D. Listen to bowel sounds.

ANS: B

See Assessment for mannitol. Mannitol is a diuretic used in the treatment of acute oliguric renal failure, edema, and increased intracranial or intraocular pressure. Monitor vital signs, urine output, CVP, and pulmonary artery pressures before and hourly throughout administration.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Diuretics REF: Page 804

19. The nurse is caring for a patient who is NPO after midnight for a cardiac catheterization scheduled for 1 p.m. The patient normally receives Glucophage (metformin) 1,000 mg po BID, and the morning dose is due at 8:30 a.m. The patient's blood glucose result was 115. Which of the following actions should the nurse take?

A. Hold the medication.

- B. Give the medication with a glass of juice.
- C. Give the medication with a sip of water.
- D. Call the physician for direction.

ANS: A

See Implementation for metformin. Because the patient is NPO, the medication should be held and blood sugars should be monitored frequently. Patients stabilized on a diabetic regimen who are exposed to stress, fever, trauma, infection, or surgery may require administration of insulin. Withhold metformin and reinstitute after resolution of acute episode.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Antidiabetics REF: Page 82

20. The nurse is caring for a patient with a known history of narcotic abuse. The patient is started on methadone 30 mg po daily during detoxification. Which of the following assessments would indicate the patient's dose may need to be decreased?

A. Chills

- B. Irritability
- C. Respirations = 8 per min
- D. Diaphoresis

ANS: D

See Assessment for methadone. If respiratory rate is less than 10 breaths per min, assess level of sedation. Dose may need to be decreased by 25–50%. Chills, irritability, and diaphoresis are all symptoms of narcotic withdraw and may be expected during detoxification.

KEY: Cognitive Level: Application DIF: Easy TOP: Therapeutic Classification: Opioid analgesic REF: Page 828

21. A nurse working on the postpartum floor is checking orders and notes the following, "Methergine (methylergonovine) 200 mcg po q 6 hr for 48 hr." Which of the following nursing interventions should be added to the patient's plan of care?

A. Assess respiratory rate and rhythm q 2 hr.

B. Monitor for signs of uterine atony or change in menstrual bleeding.

- C. Instruct patient to wear a tight-fitting bra and avoid facing the water during shower.
- D. Collect urine for protein dipstick every 4 hr.

ANS: B

See Assessment for methylergonovine. Methergine is used in the treatment of postpartum hemorrhage. Monitor blood pressure, heart rate, and uterine response frequently during medication administration.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Oxytocics REF: Page 838 22. While preparing to discharge a patient who has started taking Lopressor (metoprolol) during their hospitalization, the nurse recognizes further teaching is necessary by which of the following statements: A. "I should take my pulse every day before taking this medication."

B. "I need to stay on a low-salt diet to help control my blood pressure."

C. "I'll have to have my blood drawn frequently to monitor for toxic levels of this medication."

D. "I should contact the physician immediately if I notice any wheezing, difficulty breathing, or dizziness."

ANS: C

See Patient/Family Teaching for metoprolol. Blood levels are not followed for this medication. Teach patient and family how to check pulse daily and blood pressure biweekly and to report significant changes to a health-care professional. Reinforce the need to continue additional therapies for hypertension (weight loss, sodium restriction, stress reduction, regular exercise, moderation of alcohol consumption, and smoking cessation). Advise patient to notify health-care professional if slow pulse, difficulty breathing, wheezing, cold hands and feet, dizziness, light-headedness, confusion, depression, rash, fever, sore throat, unusual bleeding, or bruising occurs.

KEY: Cognitive Level: Analysis DIF: Medium TOP: Therapeutic Classification: Antihypertensives, Antianginals REF: Pages 849-850

23. The nurse is providing care for a patient in hospice who has been converted to a continuous infusion of morphine for pain control via the use of a patient-controlled analgesia pump. The nurse recognizes that break-through pain should be handled in which of the following ways?

A. No break-through pain is expected since the patient is on a continuous infusion of narcotic.

B. Additional intravenous bolus doses can be given by the nurse every 15-30 min

C. Additional predetermined bolus doses can be programmed to be available at patient request every 90 min.

D. Oral morphine can be given in liquid form every 2 hr.

ANS: B

See Assessment for Morphine. Patients on a continuous infusion should have additional bolus doses provided every 15–30 min, as needed, for break-through pain.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Opioid analgesics REF: Page 877

24. A patient is admitted with suspected overdose of Bloxiverz (neostigmine). Which of the following will be used as an antidote?A. NarcanB. Vitamin KC. Atropine

D. Epinephrine

ANS: C

See Assessment/Toxicity and Overdose for neostigmine. If an overdose occurs, atropine is the antidote.

KEY: Cognitive Level: Knowledge DIF: Medium TOP: Therapeutic Classification: Antimyasthenics REF: Drugguide.com

25. The nurse is caring for an infant with oral thrush whose medications include Mycostatin (nystatin) suspension 5 mL QID. Which of the following actions should the nurse take?

A. Dilute the medication in 30 mL of water and provide it to the infant in a bottle.

B. Use a needleless syringe to gently squirt small amounts into the baby's mouth.

C. Dip a pacifier into the medication and allow the infant to suck on the pacifier; repeat until the dose is consumed.

D. Use a cotton swab to paint the inside of the infant's cheeks, gums, and tongue.

ANS: D

See Implementation for nystatin. For neonates and infants, paint suspension into recesses of the mouth.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Antifungals REF: Page 927

26. The nurse is caring for a patient who recently started taking Compro (prochlorperazine) 10 mg po QID. Which of the following symptoms would cause the nurse to contact the physician immediately? A. Temp = 104.5° F and new onset urinary incontinence.

B. Pulse = 70 bpm and patient complains of constipation.

C. Blood pressure = 126/64 mmHg and complaints of hiccups.

D. Respirations = 18 per min and patient reports mild nausea.

ANS: A

See Assessment for prochlorperazine. Monitor for development of neuroleptic malignant syndrome (fever, respiratory distress, tachycardia, seizures, diaphoresis, hypertension or hypotension, pallor, tiredness, severe muscle stiffness, and loss of bladder control). Notify physician or other health-care professional immediately if these symptoms occur. Constipation is a known side effect with this medication, and the pulse is normal. Blood pressure is within normal limits and hiccups are not immediately concerning. Respirations are within normal parameters, and Compro is taken for nausea, so mild nausea may be expected.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Antiemetics, Antipsychotics REF: Pages 1050-1051 27. A hospice nurse is caring for a patient with end-stage stomach cancer who has a new order to be kept NPO. The patient complains of nausea and has a standard order for promethazine for this complaint. Which of the following actions should the nurse take?

A. Request intravenous dosing from pharmacy and start an IV.

B. Call pharmacy to request an oral tablet, and allow the patient to take it with one sip of water.

C. Obtain oral liquid preparation and add thick-it to reduce aspiration risk.

D. Request and provide the medication in rectal suppository form.

ANS: D

See Routes/dosages for promethazine. Because the patient has orders to be kept NPO, any oral preparation is contraindicated without an overriding order. Rectal dosing is available and can be used effectively, although it may be less reliable. This noninvasive route should be chosen over starting an IV.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Antiemetics, Antihistamines REF: Page 1055

28. To monitor the peak efficacy after providing oral Dilaudid (hydromorphone) Immediate Release for a patient reporting pain ranked 6 out of 10 on a numeric pain scale. The patient should report some relief in pain at the peak action of the drug. Which of the following reflects the peak action of Dilaudid Immediate Release?

A. 15–30min

- B. 30–90 min
- C. 1–2 hr

D. Over 2 hr

ANS: B

See Pharmacokinetics for hydromorphone. The peak action for this medication is 30–90 min.

KEY: Cognitive Level: Comprehension DIF: Medium TOP: Therapeutic Classification: Opioid analgesics REF: Page 658

29. A nurse caring for a patient who's prescribed Inderal LA (propranolol) is being tapered off over a 2-wk period. The nurse would include which of the following statements in the patient teaching?

A. "I bet you're glad to be getting off this medication since it is so expensive."

B. "Stopping this medication suddenly can be very dangerous, so it is important that you follow the taper schedule carefully."

C. "Patients usually only take this drug for a 1-2 wk cycle before switching to another medication."

D. "By slowly weaning you from this drug, the risk of rebound headaches is reduced."

ANS: B

See Assessment for propranolol. Abrupt withdrawal of propranolol may precipitate life-threatening arrhythmias, hypertension, or myocardial ischemia. Drug should be tapered off over a 2-wk period before discontinuation. Assess patient carefully during tapering and after medication is discontinued. Consider that patients taking propranolol for noncardiac indications may have undiagnosed cardiac disease. Abrupt discontinuation or withdrawal over too short a period of time (less than 9 days) should be avoided. While the cost of medications is important, it is not the highest priority.

KEY: Cognitive Level: Comprehension DIF: Medium TOP: Therapeutic Classification: Antianginals, antiarrhythmics (Class II), antihypertensives, and vascular headache suppressants REF: Page 1060

30. Which of the following would indicate to the nurse that treatment was effective in a patient being treated with propylthiouracil?

A. Patient reports sleeping 12 hr a day.

B. Fine tremors noted in both hands.

C. Patient gains 2 pounds in 4 days.

D. Pulse is 110 bpm.

ANS: C

See Evaluation for propylthiouracil. PTU decreases the severity of symptoms of hyperthyroidism (lowered pulse rate and weight gain). Symptoms of hyperthyroidism include tachycardia, palpitations, nervousness, insomnia, fever, diaphoresis, heat intolerance, tremors, weight loss, and diarrhea. Symptoms of hypothyroidism include intolerance to cold, constipation, dry skin, headache, listlessness, tiredness, or weakness.

KEY: Cognitive Level: Analysis DIF: Medium TOP: Therapeutic Classification: Antithyroid agents REF: Page 1064

31. While caring for a patient with myasthenia gravis and a history of dysphasia who is taking Mestinon (pyridostigmine), the nurse recognizes the need for further teaching by which of the following statements?

A. "I should set an alarm clock to make sure I take my medication on time."

B. "I may have trouble swallowing if I do not take my medication correctly."

C. "I will have to take this medication for a few months before my condition resolves."

D. "I should carry an identification card with my diagnosis and medication list at all times."

ANS: C

See Patient/Family Teaching for pyridostigmine. Patients with a history of dysphagia should have a nonelectric or battery-operated back-up alarm clock to remind them of exact dose time. Patients with dysphagia may not be able to swallow medication if the dose is not taken exactly on time. Taking dose late may result in myasthenic crisis. Taking dose early may result in cholinergic crisis. Patients with myasthenia gravis must continue this regimen as a life-long therapy. Advise patient to carry identification describing their disease and medication regimen at all times.

KEY: Cognitive Level: Analysis DIF: Hard TOP: Therapeutic Classification: Antimyasthenics REF: Page 1069

32. A client taking vitamin B_6 (pyridoxine) calls the nurse at 3 p.m. to report she is at work and didn't take the pill at breakfast. Which of the following statements by the nurse is best?

A. "You should make arrangements to take the missed dose as soon as possible."

B. "Missing a single dose is not critical."

C. "Why didn't you take the medication?"

D. "How are you feeling right now?"

ANS: B

See Patient/Family Teaching for pyridoxine. Instruct patient to take medication as directed. If a dose is missed, it may be omitted because an extended period of time is required to become deficient in vitamin B_{6} .

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Vitamin REF: Page 1070

33. The nurse is caring for a patient with tuberculosis who is on a diet with honey-thick liquids. Which action should the nurse take to administer the dose of Rifadin (rifampin)?

A. Obtain the medication in liquid form.

B. Give the pill with a small sip of water.

C. Call the pharmacy to request a parenteral dose.

D. Open the capsule onto a spoonful of applesauce.

ANS: D

See Implementation for rifampin. Capsules may be opened and contents mixed with applesauce or jelly for patients with difficulty swallowing. While the pharmacist can compound a syrup for patients unable to swallow solids, this patient has difficulty swallowing liquids. If honey-thick liquids are ordered, nonthickened water should be avoided. Parenteral therapy is not required.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Antituberculars REF: Page 1096

34. A nurse working at an adult care center for individuals with mental illness provides an individual with their dose of Risperdal (risperidone). The nurse should intervene if the client mixes the liquid medication with which of the following? A. Milk B. Cola C. Orange juice D. Water

ANS: B

See Implementation for risperidone. Oral solution can be mixed with water, coffee, orange juice, or low-fat milk; do not mix with cola or tea.

KEY: Cognitive Level: Application DIF: Hard TOP: Therapeutic Classification: Antipsychotics REF: Page 1103

35. A nurse caring for an individual taking Avandia (rosiglitazone) monitors which of the following lab results to help evaluate treatment effectiveness?

- A. Glycosylated hemoglobin
- B. Serum calcium
- C. Serum iron
- D. Cardiac troponin

ANS: A

See Assessment/Lab test considerations for rosiglitazone. Monitor serum glucose and glycosylated hemoglobin periodically during therapy to evaluate effectiveness.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Antidiabetics REF: Drugguide.com

36. The nurse observing a patient who uses a prescribed Serevent Diskus (salmeterol) recognizes that teaching has been effective if which of the following is observed?

A. The patient shakes the diskus vigorously before taking a dose.

B. The patient rinses the mouthpiece after administration.

C. The patient keeps the diskus horizontal at all times throughout administration.

D. The patient exhales into the diskus before inhaling a dose of medication.

ANS: C

See Patient/Family Teaching for salmeterol. Instruct patient using *powder for inhalation* never to exhale into diskus device and always to hold device in a level horizontal position. Mouthpiece should be kept dry and should never be washed.

KEY: Cognitive Level: Analysis DIF: Medium TOP: Therapeutic Classification: Bronchodilator REF: Page 1123 37. A nurse caring for a patient with non-Hodgkin lymphoma prepares to provide Leukine (sargramostim). Which of the following will indicate successful response to the medication?

A. Patient's white blood cell count increases.

- B. Patient's platelet count increases.
- C. Patient denies nausea or vomiting with chemotherapy.

D. Patient's hair does not fall out after chemotherapy.

ANS: A

See Action for sargramostim. Indications include accelerated recovery of bone marrow after autologous bone marrow transplantation, resulting in decreased risk of infection and other complications.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Colony-stimulating factors REF: Drugguide.com

38. While in the recovery room, the nurse cares for a post-anesthesia patient who reports severe nausea. The nurse would most likely request an order for which of the following medications?

- A. Eldepryl (selegiline)
- B. Transderm-Scop (scopolamine)
- C. Januvia (sitagliptin)
- D. Cialis (tadalafil)

ANS: B

See Indications for scopolamine. Scopolamine is used in the management of nausea and vomiting associated with opioid analgesia or general anesthesia/recovery from anesthesia. Eldepryl is used in the management of Parkinson disease. Januvia is used in the management of diabetes. Cialis is used for erectile dysfunction.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Antiemetics REF: Page 1128 | Page 1126 | Page 1143 | Page 1169

39. An infant being treated for colic was prescribed Mylicon (simethicone) drops and has returned to the clinic for follow-up evaluation. Which of the following nursing action has the highest priority?

A. Assessment of the infant's startle reflex.

B. Gentle palpation of the anterior fontanel.

C. Inspection and auscultation of the abdomen.

D. Measurement of the infant's head circumference.

ANS: C

See Assessment for simethicone. Assess patient for abdominal pain, distention, and bowel sounds prior to and periodically throughout course of therapy.

KEY: Cognitive Level: Application DIF: Medium

TOP: Therapeutic Classification: Antiflatulents REF: Drugguide.com

40. At a follow-up appointment at the urologist's office, the nurse is gathering data on a patient who takes VESIcare (solifenacin) for an overactive bladder. Which of the following statements would be most concerning to the nurse?

A. I started taking an aerobics class twice a week.

B. I drink three cups of coffee each day.

C. I smoke a half pack of cigarettes a day.

D. A friend recommended St. John's wort and I've been taking that for a few weeks now.

ANS: D

See Patient/Family Teaching for solifenacin. Advise patient to consult a health-care professional prior to taking Rx, OTC, or herbal products with solifenacin. Drug-Drug: Drugs that induce or inhibit the CYP3A4 enzyme system may significantly alter blood levels of solifenacin; ketoconazole ↑ blood levels and risk of toxicity (do not exceed 5 mg/day).

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Urinary tract antispasmodics REF: Page 1151

41. The nurse is caring for a patient who takes Betapace (sotalol) 80 mg po BID. Prior to administering the dose, which of the following actions should the nurse take first?

A. Assess respiratory rate and depth.

B. Determine apical pulse rate and rhythm.

C. Identify recent food intake.

D. Check color and presence of pulses in lower extremities.

ANS: B

See Implementation for sotalol. Take apical pulse prior to administering. If less than 50 bpm or if arrhythmia occurs, withhold medication and notify physician or other health-care professional.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Antiarrhythmics REF: Page 1153

42. While caring for a patient taking Carafate (sucralfate), the nurse recognizes the medication is effective by which of the following?

- A. Patient is able to pass formed stool daily.
- B. Patient has increased range of motion in the small joints of her hands.
- C. Patient reports decreased abdominal pain.
- D. Patient remains afebrile for 24 hr.

ANS: C

See Evaluation for sucralfate. Carafate is used in the treatment of duodenal ulcers, and desired results include decrease in abdominal pain.

KEY: Cognitive Level: Analysis DIF: Medium TOP: Therapeutic Classification: Antiulcer agents REF: Page 1155

43. While caring for a 31-year-old female client who is initiating therapy with Thalomid (thalidomide), the nurse recognizes the need for further teaching by which of the following statements.

A. "I can't start the medication until I've had a negative pregnancy test."

B. "I must have a pregnancy test every month for the first 3 months I take this medication."

C. "I must use two methods of birth control while I am taking this medication."

D. "I will not be able to donate blood while taking this medication."

ANS: B

See Implementation for thalidomide. Pregnancy testing must occur weekly during first month of therapy. Due to teratogenic effects, thalidomide may be prescribed only by prescribers registered in the System for Thalidomide Education and Prescribing Safety (STEPS) program. Thalidomide is started within 24 hr of a negative pregnancy test with a sensitivity of at least 50 mIU/mL and then monthly thereafter in women with a regular menstrual cycle. For women of childbearing years, two methods of reliable contraception must be used unless complete abstinence is used. For women with irregular menses, pregnancy testing should occur every 2 wk. If pregnancy occurs, thalidomide should be discontinued immediately. Instruct patient not to donate blood and male patients not to donate sperm while taking thalidomide.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Immunosuppressants REF: Page 1196

44. While caring for an individual taking Demadex (torsemide) for hypertension, the nurse would be most concerned by which of the following assessments?

- A. Patient's resting pulse is 68 bpm.
- B. Patient reports abdominal cramps and nausea.
- C. Patient has lost 2 pounds in one day.
- D. Patient eats two bananas for breakfast.

ANS: B

See Patient/Family Teaching for torsemide. Advise patient to contact a health-care professional immediately if muscle weakness, cramps, nausea, dizziness, numbness, or tingling of extremities occurs. Advise patient to contact a health-care professional if they gain more than 2–3 pounds per day. Instruct patient to consult a health-care professional regarding a diet high in potassium.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Antihypertensives REF: Page 1224

45. The nurse is caring for an individual receiving intravenous Vancocin (vancomycin). Which of the following assessments is most important to prevent permanent complication?

A. Serum vancomycin levels

B. Visual acuity

C. Gag reflex

D. Deep tendon reflexes

ANS: A

See Assessment for vancomycin. Evaluate eighth cranial nerve function by audiometry and serum vancomycin levels prior to and throughout therapy in patients with borderline renal function or those older than 60 years of age. Prompt recognition and intervention are essential in preventing permanent damage. No alteration in vision or reflexes is anticipated with vancomycin.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Anti-infectives REF: Page 1247

46. A nurse caring for an individual with diabetes insipidus who is taking Vasostrict (vasopressin). Which of the following assessments would indicate treatment has been effective?

A. Urine output is 800 mL at the end of an 8-hr shift.

B. Urine specific gravity is 0.998.

C. Patient has lost 2 pounds in 1 day.

D. Mucous membranes are dry and sticky.

ANS: A

See Evaluation for vasopressin. Desired outcome includes decrease in urine volume, relief of polydipsia, and increased urine osmolality in patients with central diabetes insipidus. Normal urine output is 60–100 mL/hr, so this value is within normal limits and indicates successful management of diabetes insipidus. Normal urine specific gravity is 1.010–1.030. Signs of dehydration indicate on-going fluid loss associated with diabetes insipidus.

KEY: Cognitive Level: Analysis DIF: Hard TOP: Therapeutic Classification: Hormones REF: Page 1255

47. The nurse recognizes which of the following individuals is at highest risk for developing orthostatic hypotension?

A. A 53-year-old patient taking Tigacil (tigecycline).

B. A 61-year-old patient taking Coumadin (warfarin).

C. A 49-year-old patient taking Zincate (zinc sulfate).

D. A 64-year-old patient taking Calan (verapamil).

ANS: D

See Adverse Reactions/Side Effects for verapamil. Calan is an antihypertensive that can cause orthostatic hypotension. Tigacil is an anti-infective that causes sedation. Coumadin is an anticoagulant without noted CNS side effects. Zincate is a mineral supplement without noted CNS side effects.

KEY: Cognitive Level: Analysis DIF: Medium TOP: Therapeutic Classification: Antihypertensives, Antiarrhythmias, Antianginals, Vascular headache suppressants REF: Page 1263

48. The nurse recognizes that which of the following individuals will need to receive supplemental vitamin B_{12} injections?

A. A 37-year-old patient with acute renal calculi.

- B. A 59-year-old patient with gastric resection for stomach cancer.
- C. A 24-year-old patient with sickle cell anemia.
- D. A 58-year-old patient with congestive heart failure.

ANS: B

See Implementation for vitamin B_{12} Preparation. Patients with small bowel disease, malabsorption syndrome, or gastric or ileal resections require parenteral administration.

KEY: Cognitive Level: Analysis DIF: Easy TOP: Therapeutic Classification: Vitamins, Antianemics REF: Page 1275

49. The nurse is counseling a patient who has been given a prescription for Imitrex (sumatriptan) for migraine headaches. Which of the following statements indicates teaching has been effective? A. "This medication will prevent migraine headaches."

B. "I can take this medication at any time during a migraine headache attack."

C. "I can repeat the medication in 15 minutes if I have not gotten relief from the first injection."

D. "I can use up to 4 doses in a 24-hour period."

ANS: B

See Patient/Family Teaching for sumatriptan. Instruct patient to administer sumatriptan as soon as symptoms of a migraine attack appear, but it may be administered at any time during an attack. Inform patient that sumatriptan should be used only during a migraine attack. It is meant to be used for relief of migraine attacks but not to prevent or reduce the number of attacks. If migraine symptoms return, a second injection may be used. Allow at least 1 hr between doses, and do not use more than two injections in any 24-hr period.

KEY: Cognitive Level: Analysis DIF: Medium TOP: Therapeutic Classification: Vascular headache suppressants REF: Page 1160 50. Which of the following patients would most likely be taking Quinidine Gluconate (quinidine)?

A. A 45-year-old patient with atrial fibrillation.

B. A 59-year-old patient with *pneumocystis carni* pneumonia.

C. A 68-year-old patient with gastroesophogeal reflux disease.

D. A 33-year-old patient with acute pyelonephritis.

ANS: A

See Indications for quinidine. They include restoration and maintenance of sinus rhythm in patients with atrial fibrillation or flutter, prevention of recurrent ventricular arrhythmias, and treatment of malaria.

KEY: Cognitive Level: Analysis DIF: Medium TOP: Therapeutic Classification: Antiarrhythmics REF: Drugguide.com

51. An individual with a history of angina takes sublingual nitroglycerine to relieve chest pain ranked 6/10. Five min later, the chest pain is 4/10. What action should the nurse take next?

A. Have a family member call 911.

B. Tell the individual to take a warm shower.

C. Instruct the individual to take another sublingual nitroglycerine tablet.

D. Monitor the individual for an additional 10 min before taking any action.

ANS: C

See Patient/Family Teaching for nitroglycerin. For an acute anginal attack, advise patient to sit down and use medication at first sign of attack. Relief usually occurs within 5 min. Dose may be repeated if pain is not relieved in 5-10 min. Call health-care professional or go to nearest emergency room if anginal pain is not relieved by 3 tablets in 15 min.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Antianginals REF: Page 918

52. An individual with chronic schizophrenia who recently started taking Zyprexa (olanzapine) is smacking his lips, puffing his cheeks, and chewing. Which of the following statements by the nurse is best?

A. "Don't worry, this is commonly seen with advancing schizophrenia; you may need a higher dose of medication."

B. "These are symptoms seen in withdrawal from the medication; have you stopped taking your medication for some reason?"

C. "These movements are a side effect of the medication; you should stop taking it."

D. "We see this a lot, it will go away after you've been on the medication for a month or so."

ANS: C

See Assessment for olanzapine. Monitor for tardive dyskinesia (uncontrolled rhythmic movement of mouth, face, and extremities; lip smacking or puckering; puffing of cheeks; uncontrolled chewing; rapid or worm-like movements of tongue; and excessive blinking of eyes). Report immediately, as it may be irreversible.

KEY: Cognitive Level: Application DIF: Medium TOP: Therapeutic Classification: Antipsychotics, Mood stabilizers REF: Pages 934-935

MULTIPLE RESPONSE

53. A nurse is counseling the parent of a 3-year-old child with chronic ear infections and fluid in the ears. The physician recommends Silfedrine Children's (pseudoephedrine) as a decongestant. Which of the following statements indicate that teaching has been effective? *Select all that apply*.

A. "The decongestant will help clear the fluid from his ears."

B. "I should give this medication at bedtime to help him sleep."

C. "I should call the doctor if I notice he is having any difficulty breathing."

D. "This medication will kill the bacteria causing the infection in his ears."

E. "Too much of this medication can alter his heart rate, so I need to keep it out of his reach."

F. "I should limit his fluid intake to help reduce the congestion in his ears."

ANS: A, C, E

See Indications and Patient/Family Teaching and Assessment for pseudoephedrine. It is used to open obstructed eustachian tubes in chronic otic inflammation or infection; it does not kill bacteria. Instruct patient to notify a health-care professional if nervousness, slow or fast heart rate, breathing difficulties, hallucinations, or seizures occur because these symptoms may indicate overdose. Administer pseudoephedrine at least 2 hr before bedtime to minimize insomnia. Maintain fluid intake of 1,500–2,000 mL/day to decrease viscosity of secretions.

KEY: Cognitive Level: Analysis DIF: Medium TOP: Therapeutic Classification: Allergy, cold, and cough remedies, Nasal drying agents/decongestants REF: Pages 1065-1066

54. The nurse recognizes that the treatment plan for which of the following individuals would likely include Metamucil (psyllium)? *Select all that apply*.

A. A 72-year-old patient who drinks prune juice on a daily basis and has a soft brown stool daily.

B. A 61-year-old patient hospitalized for an anterior myocardial infarction.

C. A 29-year-old patient with the flu who reports having diarrhea.

D. A 57-year-old patient reporting increased difficulty with constipation since the onset of menopause.

E. A 65-year-old patient who recently had a hemorrhoidectomy.

F. An 84-year-old patient who reports walking 3 miles every day in the mall.

ANS: B, D, E

See Indications for psyllium. They include management of simple or chronic constipation, particularly if associated with a low-fiber diet. It is useful in situations in which straining should be avoided (after MI, rectal surgery, or prolonged bed rest). It is used in the management of chronic watery diarrhea.

KEY: Cognitive Level: Analysis DIF: Medium TOP: Therapeutic Classification: Laxatives REF: Drugguide.com

55. A nurse working in the health department recognizes that the shingles vaccine (Zostavax) is contraindicated for which of the following individuals? *Select all that apply*.

A. A 55-year-old patient with a history of atrial fibrillation

B. A 49-year-old patient with HIV

C. A 61-year-old patient with an upper respiratory infection; $T = 101.4^{\circ}F$

D. A 33-year-old patient who is 6 wk pregnant

E. A 42-year-old patient with an allergy to eggs

F. A 51-year-old patient with a history of chronic obstructive pulmonary disease

ANS: B, C, D

See Contraindications for the Zoster Vaccine. It is contraindicated in a history of anaphylactic/anaphylactoid reactions to gelatin, neomycin; active infections; immunosuppression (including HIV); and pregnancy. There is no contraindication for chronic medical conditions that do not impart immunosuppression. Sensitivity to eggs is contraindicated for flu vaccine, but not for the shingles vaccine.

KEY: Cognitive Level: Analysis DIF: Hard TOP: Therapeutic Classification: Vaccines REF: Drugguide.com

56. Which of the following would be included in the patient teaching for a client receiving Lithobid (lithium) therapy? *Select all that apply*.

A. "This medication may cause dizziness or drowsiness so you should avoid driving until you know how the medication will affect you."

B. "It is important to reduce your fluid intake while taking this medication."

C. "Avoid drinking excessive amounts of coffee, tea, and colas while on this medication."

D. "Weight loss may occur with this medication, so you should try to eat at least 3,000 calories a day."

E. "Since you have a history of heart disease, you will need to have periodic electrocardiogram tests done."

F. "Notify the physician immediately if you have any fainting or difficulty breathing while taking this medication."

ANS: A, C, E, F

See Patient/Family Teaching for lithium. Lithium may cause dizziness or drowsiness. Caution patient to avoid driving or other activities requiring alertness until response to medication is known. Advise patient to drink 2,000–3,000 mL fluid each day and eat a diet with consistent and moderate sodium intake. Excessive amounts of coffee, tea, and cola should be avoided because of diuretic effect. Advise patient

that weight gain may occur. Review principles of a low-calorie diet. Explain to patients with cardiovascular disease or over 40 years of age the need for ECG evaluation before and periodically during therapy. Patient should inform health-care professional if fainting, irregular pulse, or difficulty breathing occurs.

KEY: Cognitive Level: Analysis DIF: Hard TOP: Therapeutic Classification: Mood stabilizers REF: Page 784

57. Which of the following interventions would be helpful for a patient taking Claritin (loratadine) who complains of a dry mouth? *Select all that apply*.

- A. Frequent oral rinses with water
- B. Sugarless gum or candy
- C. Flossing twice daily
- D. Increased intake of caffeine
- E. Fluid intake of 1,000 mL/day
- F. Use of alcohol-based mouth wash

ANS: A, B

See Patient/Family Teaching for loratadine. Advise patient that good oral hygiene, frequent rinsing of mouth with water, and sugarless gum or candy may minimize dry mouth. Patient should notify dentist if dry mouth persists longer than 2 wk. Flossing is not helpful in addressing dry mouth. Caffeine has a diuretic effect and will not be helpful. Normal recommended fluid intake is 1,500–2,000 mL/day. Alcohol-based mouth rinse may increase a sensation of dryness.

KEY: Cognitive Level: Comprehension DIF: Easy TOP: Therapeutic Classification: Antihistamines REF: Page 791

58. The nurse is advising a client whose triglyceride levels remain elevated despite 3 mo of following a low-fat, low-cholesterol diet. The client is started on Lovaza (omega-3 acid ethyl esters). Which of the following statements would the nurse include in the teaching? *Select all that apply*.

A. "You still need to follow a low-fat diet while you're taking this medication."

B. "This medication may be taken with meals."

C. "Limiting cholesterol intake is not as critical as limiting intake of carbohydrates."

D. "Diabetes contributes to elevated triglyceride levels, so it is important to maintain good control or your diabetes."

E. "It is important to establish an exercise routine that works with diet and medication to help control your weight."

F. "You probably inherited this from one of your parents, so aside from medication, there isn't much you can do."

ANS: A, B, D, E

See Patient/Family Teaching for omega-3 acid ethyl esters. It may be administered with meals. Advise patient that this medication should be used in conjunction with diet restrictions (fat, cholesterol,

carbohydrates, and alcohol), exercise, weight loss in overweight patients, and control of medical problems (such as diabetes mellitus and hypothyroidism) that may contribute to hypertriglyceridemia.

KEY: Cognitive Level: Comprehension/Application DIF: Hard TOP: Therapeutic Classification: Lipid-lowering agents REF: Page 945

59. While caring for a client who reports taking Prilosec (omeprazole), the nurse recognizes the need for further teaching if the client also reports taking which of the following? *Select all that apply*.

- A. Tylenol for occasional headaches
- B. Ibuprofen daily for arthritis
- C. Baby aspirin daily to prevent heart pain
- D. Maalox occasionally to reduce heartburn
- E. Flaxseed supplement to increase omega-3 intake
- F. Multi-vitamin with iron to promote health

ANS: B, C

See Patient/Family Teaching for omeprazole. Advise patient to avoid alcohol, products containing aspirin or NSAIDs, and foods that may cause an increase in GI irritation.

KEY: Cognitive Level: Application DIF: Hard TOP: Therapeutic Classification: Antiulcer agents REF: Page 947

60. While caring for a client with a history of epilepsy, the nurse would expect which of the following medications to be included in the patient's treatment plan? *Select all that apply*.

A. Clinoril (sulindac)

- B. Dilantin (phenytoin)
- C. Phenobarbital
- D. Depakote (divalproex sodium)
- E. nabumetone
- F. Tegretol (carbamazepine)

ANS: B, C, D, F

See Indications for sulindec, phenytoin, phenobarbital, divalproex sodium, nabumetone and carbamazepine. Phenytoin, phenobarbital, divalproex sodium and carbamazepine are all used in the treatment/prevention of tonic-clonic (grand mal) seizures and complex partial seizures. Sulindac and nabumetone are used in the treatment of arthritis.

KEY: Cognitive Level: Knowledge DIF: Hard TOP: Therapeutic Classification: Anticonvulsants REF: Drugguide.com (sulindac, nabumetone) | Page 276 | Page 1015 | Page 1022 | Page 1243 61. Which of the following laboratory values will be closely monitored for a patient newly started on procainamide after cardioversion? *Select all that apply*.

- A. Mean corpuscular volume
- B. Triglycerides
- C. White blood cell count
- D. Platelet count
- E. Magnesium
- F. Protein

ANS: C, D

See Lab Considerations for procainamide. Monitor CBC every 2 wk during the first 3 mo of therapy. May cause ↓ leukocyte, neutrophil, and platelet counts. Therapy may be discontinued if leucopenia occurs. Blood counts usually return to normal within 1 mo of discontinuation of therapy. Monitor ANA periodically during prolonged therapy or if symptoms of lupus-like reaction occur. Therapy is discontinued if a steady increase in ANA titer occurs. May cause ↑ AST, ALT, alkaline phosphatase, LDH, and bilirubin, as well as a positive Coombs' test result.

KEY: Cognitive Level: Knowledge DIF: Hard TOP: Therapeutic Classification: Antiarrhythmics REF: Drugguide.com

62. In the treatment of a postmenopausal woman with osteoporosis who has been prescribed Evista (raloxifene), which of the following should be included in the patient's plan of care? *Select all that apply*.

- A. Daily weight-bearing exercises
- B. Supplemental iron
- C. Education on smoking cessation
- D. Instruction to limit alcohol consumption
- E. Prolonged bed rest
- F. Dietary teaching to increase protein intake

ANS: A, C, D

See Patient/Family Teaching for raloxifene. Emphasize the importance of regular weight-bearing exercise. Discuss the importance of adequate calcium and vitamin D intake or supplementation; iron supplementation will not improve osteoporosis. Advise patient to discontinue smoking and alcohol consumption. Prolonged inactivity should be avoided due to increased risk of thrombosis. Dietary teaching should focus on increased/adequate intake of calcium and vitamin D.

KEY: Cognitive Level: Application DIF: Hard TOP: Therapeutic Classification: Bone-resorption inhibitors REF: Page 1079

63. A neighbor says to the nurse, "My arthritis is getting worse in this cold weather; what can I take?" The nurse would base the response on the knowledge that which of the following medications would provide both pain relief and help decrease inflammation associated with arthritis. *Select all that apply*.

A. Ecotrin (aspirin)

- B. Choline and magnesium salicylates
- C. Tylenol (acetaminophen)
- D. Advil (ibuprofen)
- E. Excedrin

F. Acephen (acetaminophen)

ANS: A, B, D, E

See Indications for salicylates, ibuprofen, and acetaminophen. Aspirin, other salicylates, and ibuprofen have anti-inflammatory and pain-relieving properties. Acetaminophen has no significant anti-inflammatory property.

KEY: Cognitive Level: ApplicationDIF: MediumTOP: Therapeutic Classification: AntipyreticsREF: Drugguide.com (choline and magnesium salicylates, Excedrin) | Page 102 | Page 191 | Page 666

64. An order for Restoril (temazepam) 30 mg po prn for sleep would be questioned for which of the following patients? *Select all that apply*.

A. A 42-year-old patient hospitalized with a broken femur

B. A 29-year-old patient admitted with depression and attempted suicide

C. A 51-year-old patient admitted with migraine headache

D. A 33-year-old patient admitted with exacerbation of Crohn's disease

E. A 79-year-old patient admitted with a hip fracture

F. A 48-year-old patient admitted with cirrhosis

ANS: B, E, F

See Contraindications/Precautions for temazepam. Use cautiously when there is a pre-existing hepatic dysfunction or history of a suicide attempt or drug addiction. Elderly patients have increased sensitivity to benzodiazepines. It appears on Beers list and is associated with increased risk of falls (\downarrow dose required).

KEY: Cognitive Level: Analysis DIF: Hard TOP: Therapeutic Classification: Sedative/hypnotics REF: Page 1178

COMPLETION

65. The nurse is preparing to provide Namenda (memantine) in liquid form. The ordered dose is 10 mg po BID. Liquid preparation is available in 2 mg/mL. The nurse should provide _____ mL.

ANS: 5 mL

See Dosage for memantine. With a dose of 10 mg due at this time and liquid preparation of 2 mg/mL, the provided dose is 5 mL [10 mg \div 2 mg/mL = 5 mL].

KEY: Cognitive Level: Knowledge

DIF: Easy TOP: Therapeutic Classification: Anti-Alzheimer agents REF: Page 812

66. The nurse is caring for a patient receiving chemotherapy that includes ifosfamide 1.2 g/m² and mesna; 20% of the mesna dose is to be given via IV at the same time as the ifosfamide; repeat 4 hr and 8 hr later. The patient's body surface area is 2 m². The nurse anticipates that the pharmacy will supply a _____ mg dose of mesna.

ANS: 480 mg

See Dosage for mesna: Since you need mg at the end of the calculation, change the dose to mg now!! 1.2 g=1200 mg. The ifosfamide dose is now 1200 mg/m². Multiply the dose, 1200 mg/m², times the BSA, 2 m²: 1200 mg/m² x 2 m² = 2400 mg. The mesna dose must be 20% of ifosfamide dose: 20% of 2400 mg = 480 mg. Dosage: Give a dose of mesna equal to 20% of the ifosfamide dose at the same time as ifosfamide and 4 and 8 hr after. Ifosfamide is given via IV (adults) 1.2 g/m²/day for 5 days; it should be coadministered with mesna.

KEY: Cognitive Level: Knowledge DIF: Hard TOP: Therapeutic Classification: Antidotes REF: Page 670 | Page 822