

Gutierrez: Pharmacotherapeutics: Clinical Reasoning in Primary Care, 2nd Edition

Test Bank

Chapter 2: Clinical Reasoning in Pharmacotherapeutics

MULTIPLE CHOICE

1. A patient arrives at the health clinic with a new prescription, which is questioned by the nurse. The nurse recognizes that the health care provider who does not have legal authority to prescribe a drug for a patient is a(n):
 - a. Advanced practice nurse
 - b. Pharmacist
 - c. Physician
 - d. Dentist

ANS: B

A pharmacist only has the legal authority to fill and dispense a drug order from physicians, dentists, and advanced practice nurses, who are allowed (within the limits of state law) to prescribe drugs for patients

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2. A mother arranges to have her children immunized with standard childhood vaccinations. What type of treatment objective does immunization achieve?
 - a. Prevention
 - b. Cure
 - c. Alleviation
 - d. Palliation

ANS: A

Providing childhood immunizations is an effective way to prevent certain diseases from occurring. Drugs used curatively treat an illness or disease that has already occurred. Drugs used to alleviate are part of the supportive therapy the patient receives when at risk for one health problem (such as an ulcer) that is due to the presence of another health problem (such as a major injury). Drugs used in palliation treat a symptom (such as pain) when the patient has an end-stage illness or disease.

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3. What treatment objective requires that the individual perceives the illness and also functions in the sick role?
 - a. Prevention
 - b. Cure
 - c. Alleviation

d. Palliation

ANS: B

The first step of clinical reasoning is to develop treatment objectives based on all available patient and drug information. Treatment objectives are influenced by the severity, the urgency, and the prognosis of the disease. Prevention, cure, alleviation, and palliation therapies are interrelated and interdependent, in many instances. In order for cure to occur, the patient must both perceive that the illness exists and simultaneously function in the sick role. Perceiving the illness can occur as part of prevention or alleviation, as well as palliation, but active functioning in the sick role would not simultaneously occur in connection with these treatment objectives.

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4. There are many factors that influence the decision to use a specific drug regimen. Consideration of which of the following factors includes evaluating the drug's therapeutic index?
- Safety
 - Tolerability
 - Efficacy
 - Price
 - Simplicity of use

ANS: B

There are a multitude of factors that influence the decision to use a particular drug regimen. Preskorn's "STEPS" mnemonic helps to organize drug information by level of importance:

S—Safety

T—Tolerability

E—Efficacy

P—Price

S—Simplicity of use

The drug variables affecting patient tolerance to a drug include (1) the drug's potency; (2) the therapeutic index, or the ratio of effective dose to lethal dose; (3) maximum effect, the greatest response possible regardless of the dose given; (4) latency, the time necessary for the onset of therapeutic effects; (5) peak, the time it takes for drug effects to reach maximum; and (6) duration of action, the length of time the drug is effective.

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5. There are many factors that influence the decision to use a specific drug regimen. Consideration of which of the following factors includes evaluation of how well the drug actually works?
- Safety
 - Tolerability
 - Efficacy

- d. Price
- e. Simplicity of use

ANS: C

Efficacy is the ability of a drug to produce an effect, usually a specifically desired effect, and therefore measures how well a drug works. For example, an efficacious vaccine has the ability to prevent or cure a specific illness.

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6. Health care record-keeping requirements are very specific. What is the time period for which all records related to controlled substances must be maintained and available for inspection?
- a. Maximum of 5 years
 - b. Minimum of 3 years
 - c. Maximum of 4 years
 - d. Minimum of 2 years

ANS: D

Each health care provider must maintain inventories and records of controlled substances listed in Schedules I and II separately from all other records maintained by the provider. Likewise, inventory and records of controlled substances in Schedules III, IV, and V must be maintained separately or in such a form that they are readily retrievable from the ordinary business records of the health care provider. All records related to controlled substances must be maintained and available for inspection for a minimum of 2 years.

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7. Compare the following pieces of legislation and select the one that permits pharmacists to take refill orders by telephone for noncontrolled drugs.
- a. Controlled Substances Act
 - b. Prescription Drug Marketing Act
 - c. Durham-Humphrey Amendment
 - d. Sherley Amendment

ANS: C

The Durham-Humphrey Amendment permits pharmacists to take refill orders by telephone for noncontrolled drugs, as well as for controlled substances on Schedules III and IV.

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MULTIPLE RESPONSE

1. What are the methods available to assess the degree of patient adherence and satisfaction with a drug regimen? Select all that apply.

- a. Pill counts
- b. Review of a drug diary
- c. Self-reports
- d. Direct observation
- e. Assessment of physiologic parameters
- f. Input from other health care workers
- g. Detailed daily patient journal entries

ANS: A, B, C, D, E, F

Methods available to assess the degree of patient adherence and self-satisfaction with the drug regimen may include pill counts, the review of a drug diary, self-reports, direct observation, assessment of physiologic parameters, and input from other health care workers, family members, or friends. Combining several methods provides for a more accurate assessment. There is no evidence that the use of detailed daily patient journal entries can be used to assess patient adherence to a drug regimen, especially until the patient's literacy level has been assessed accurately.

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