

Review Test Submission: Final Exam - Week 11

User	+A1
Course	DNRS-6630-5/NURS-6630N-5/NURS-6630C-5/NURS-6630F-5/DNRS-6630F-5- Approaches to Treatment-2021-Summer-QTR-Term-wks-1-thru-11-(05/31/2021-08/15/2021)-PT27
Test	Final Exam - Week 11
Started	8/12/21 8:32 AM
Submitted	8/12/21 10:06 AM
Due Date	8/16/21 1:59 AM
Status	Completed
Attempted Score	92 out of 100 points
Time Elapsed	1 hour, 34 minutes out of 2 hours and 30 minutes
Results Displayed	Feedback

Question 1

L. J. is a 55-year-old male who attended a funeral and found himself laughing during the service, but later that evening he was irritated with himself for what he had done. His wife said this was abnormal behavior and took him to his doctor to be evaluated. After L. J.'s MRI was reviewed, he was diagnosed with frontotemporal dementia. Which medication is recommended to help L. J. with his emotional outbursts?

- A . Memantine
- B . Escitalopram**
- C . Donepezil
- D . Risperidone

Response Feedback: under Treatment subtitle: "The behavioral features are sometimes helped by SSRIs, and these are the best-studied treatments for these disorders."

Question 2

When can buprenorphine be initiated in a patient who is suffering from an opioid overdose?

- A . As soon as the patient is stabilized
- B . It should be administered as soon as you find the patient unconscious
- C . Right after naloxone is administered to prevent the patient from going back into opioid overdose
- D . When the patient is experiencing mild-to-moderate symptoms of withdrawal**

Response Feedback: "To avoid this problem, the initial buprenorphine dose should not be administered until the patient demonstrates mild-to-moderate symptoms of withdrawal."

Question 3

Of the following neurotransmitters, which one(s) are known to be severely disrupted in the disease Dementia with Lewy Bodies?

- I. Acetylcholine
 - II. Glutamate
 - III. Dopamine
 - IV. GABA
 - V. Norepinephrine
- A . II only
 - B . III only

C . I and II

D . I and III

Response Feedback: under pathophysiology subtitle: “It is clear that both the cholinergic and dopaminergic neurotransmitter systems are severely disrupted.”

Question 4

Choose the correct statement regarding medications used for alcoholism

A . Disulfiram: NMDA receptor antagonist & GABAA agonist

B . Naltrexone: μ -opioid receptor antagonist that reduces the reinforcement/euphoria produced by alcohol

C . Acamprosate: enhances the effect of the inhibitory neurotransmitter gamma-aminobutyric acid on the GABA receptors by binding to a site that is distinct from the GABA binding site in the central nervous system.

D . Lorazepam: inhibits alcohol dehydrogenase, leading to a buildup of acetaldehyde

Response Feedback: Table 15-3 has the three MOAs listed for the FDA-approved treatments of alcoholism.

Question 5

Patient is a 75-year-old female with a confirmed diagnosis of Alzheimer’s Disease. She is currently on Donepezil 10 mg daily. She is accompanied to your clinic today by her daughter, who informs you that her mother has recently had an increase in depressive symptoms. She has no history of mood disorders. She has a history of hypertension and tonic-clonic seizures, but both are controlled. Assuming this patient will be thoroughly evaluated for the diagnosis of depression, what would you recommend as initial therapy?

A . Amitriptyline

B . Doxepin

C . Fluoxetine

D . Bupropion

Response Feedback: SSRIs are effective in treating depressive symptoms. Answer choices A & B are both TCAs and are advised against due to side effect profile and the fact this person is treatment naive (learned from previous exam) and answer choice D is contraindicated in a patient with seizures.

Question 6

Which neurotransmitters are likely involved in the pathophysiology of withdrawal seizures?

I. Serotonin

II. Endorphins

III. Glutamate

IV. GABA

V. Dopamine

A . I and II

B . II and V

C . I and III

D . III and IV

Response Feedback: “Thus when an individual suddenly ceases alcohol use, the decrease in inhibitory effects in combination with fewer GABA receptors and increased glutamatergic discharge contributes to over-excitation and possible withdrawal seizures.”

Question 7

Which medication below should be routine for all suspected cases of alcohol intoxication and dependence?

A . B vitamin thiamine 100 mg

B . Haloperidol 5 mg

C . Lorazepam 2 mg

D Acamprosate 666 mg

Feedback: vitamin thiamine (IM or IV) should be routine for all suspected cases of alcohol intoxication and dependence.”

Response Feedback: under Treatment of Wernicke’s encephalopathy:

“Administration of the B vitamin thiamine (IM or IV) should be routine for all suspected cases of alcohol intoxication and dependence.”

Question 8

T. C. is an 88-year-old male who is diagnosed at your clinic with Dementia with Lewy Bodies. He currently has some debilitating gait issues, which makes his quality of life very poor. His memory is still intact with minor deficits. Which medication would likely benefit T. C. as his initial therapy?

A . Levodopa/carbidopa

B . Galantamine

C . Memantine

D . Benztropine

Response Feedback: “Low dosages of levodopa/carbidopa (dopamine replacement) are sometimes helpful for the motor symptoms of DLB, although higher dosages of dopamine replacement therapy and direct dopamine agonists may exacerbate neuropsychiatric symptoms.” - Motor symptoms = gait issues

Question 9

In the pathophysiology of Alzheimer’s Disease, there are certain proteins that lead to the plaques and tangles that result in this progressive, irreversible brain disorder. Choose the appropriate protein with its corresponding pathology.

- I. Tau – tangles
- II. Beta-amyloid – tangles
- III. Tau – plaques
- IV. Beta-amyloid – plaques

- A . I and II
- B . II and III
- C . II and IV
- D . I and IV**

Question 10

T. K. is a 72-year-old female who has suffered many strokes in the past, likely due to uncontrolled hypertension and hyperlipidemia. She has now been diagnosed with vascular dementia due to memory loss and motor system slowing. What is the recommended treatment for T. K.?

- A . T. K. needs the drug donepezil to help with her memory loss only.
- B . T. K. needs the drug donepezil to help with her memory loss, but also needs her hypertension and hyperlipidemia controlled.**
- C . T. K. needs the drug donepezil to help with her memory loss, but also needs her hypertension controlled.
- D . T. K. needs her hypertension controlled only

Response Feedback: “Treatment for vascular dementia involves control of vascular risk factors (e.g., hypercholesterolemia, hypertension, inactivity, diabetes, excess alcohol use, cigarette smoking, hyperhomocysteinemia).” In addition to treating these causes of CNS vascular disease, some literature indicates that symptomatic treatments (such as cholinesterase inhibitors or memantine) may be helpful for cognition.

Question 11

Which of the following alcohol screening tools lack sensitivity to detect hazardous/problem drinking?

A . AUDIT

B . AUDITC

C . SASQ

D . CAGE

Response Feedback: "Compared to the SASQ or the AUDIT and AUDIT-C, the CAGE lacks sensitivity to detect hazardous/problem drinking."

Question 12

Which enzyme does disulfiram inhibit leading to a build-up of the ethanol metabolite acetaldehyde?

A . Alcohol dehydrogenase

B . Microsomal ethanol oxidizing enzyme

C . Aldehyde dehydrogenase

D . Aldehyde reductase

Response Feedback: "Disulfiram inhibits acetaldehyde dehydrogenase leading to a buildup of the ethanol metabolite acetaldehyde"

Question 13

Which of the following drugs in the treatment of Alzheimer's Disease requires administration with food?

A . Memantine

B . Donepezil

C . Rivastigmine

D . Galantamine

Response Feedback: “Rivastigmine should be administered with meals to reduce gastrointestinal side effects.”

Question 14

If a patient is being managed for chronic pain and is not getting better after months of therapy with multiple agents (i.e., NSAIDs with opioids, muscle relaxants with NSAIDs, etc.), what should be your next step in helping the patient?

- I. Add a high-dose opioid if patient is not already on the maximum dose.
- II. Assess for a co-morbid psychiatric condition.
- III. Tell the patient you have exhausted all your options and there is nothing more you can do.
- IV. Refer the patient for a second opinion.

A . I and II

B . II and IV

C . III only

D . IV only

Response Feedback: Both are good options. If the patient has never been assessed for a psychiatric condition, then it needs to be done to treat the underlying cause of his or her pain. And doing a referral will help get a second set of eyes on the patient to see where something may have been missed when initially treating the patient. - Page 208, Box 17-1 has a blurb: If treated with opioids for more than 3 months then get a second opinion. - Page 209 under conclusions: It explains how if the patient has a comorbid psychiatric condition, it will worsen their pain and disability and should be addressed in addition to treating the pain.

Question 15

Choose the correct statement regarding an anti-ADHD medication and its respectful mechanism of action

A . Methylphenidate – blocks reuptake of dopamine in the pre-synaptic neuron and promotes release of dopamine from their storage sites in the pre-synaptic neuron

B . Amphetamines – blocks reuptake of norepinephrine and dopamine into presynaptic neurons

C . Clonidine – blocks reuptake of dopamine in the pre-synaptic neuron and promotes release of dopamine from their storage sites in the pre-synaptic neuron

D . Atomoxetine – acts by blocking the norepinephrine pump on the pre-synaptic membrane

E . Guanfacine – blocks reuptake of norepinephrine and dopamine into presynaptic neurons

Response Feedback: under atomoxetine subtitle: A & B are having their MOAs switched and C & E is completely incorrect since they are alpha-adrenergic agonists

Question 16

Of the following neurotransmitters, which ones play a critical role in modulating attention in ADHD?

I. Dopamine

II. Epinephrine

III. GABA

IV. Norepinephrine

V. Glutamate

A . II, III, and V

B . II and IV

C . I and IV

D . III only

Response Feedback: "Stimulants increase intra-synaptic concentrations of dopamine (DA) and norepinephrine (NE)"

Question 17

Which medication below would you use in addition to benzodiazepine treatment if the patient is experiencing psychosis during alcohol withdrawal delirium?

A . Naltrexone

B Haloperidol

C . Propofol

D . Chlordiazepoxide

Response Feedback: "Haloperidol 50 to 10 mg PO or IM may be added and repeated after 1 to 2 hours when psychosis or agitation is present."

Question 18

If a patient suffers from a multitude of small strokes and later begins experiencing mood disturbances in an acute fashion that sometimes resolve, from what type of dementia would you think that patient may suffer?

Response Feedback: under the clinical features and diagnosis subtitle

Question 19

What is the difference between Ritalin and Focalin?

A. Focalin is a D-isomer

B . Ritalin is the D-isomer