

Pharmacology Test #1 Chapters 11-19

Multiple Choice

Identify the choice that best completes the statement or answers the question.

- _____ 1. While monitoring a patient who had surgery under general anesthesia 2 hours ago, the nurse notes a sudden elevation in body temperature. This finding may be an indication of which problem?
- Tachyphylaxis
 - Postoperative infection
 - Malignant hypertension
 - Malignant hyperthermia
- _____ 2. When assessing patients in the preoperative area, the nurse knows that which patient is at a higher risk for an altered response to anesthesia?
- The 30-year-old patient who has never had surgery before
 - The 45-year-old patient who stopped smoking 10 years ago
 - The 21-year-old patient who is to have a kidney stone removed
 - The 78-year-old patient who is to have gallbladder removal
- _____ 3. A patient is undergoing abdominal surgery and has been anesthetized for 3 hours. Which nursing diagnosis would be appropriate for this patient?
- Anxiety related to the use of an anesthetic
 - Risk for injury related to increased sensorium from general anesthesia
 - Decreased cardiac output related to systemic effects of local anesthesia
 - Impaired gas exchange related to central nervous system depression produced by general anesthesia
- _____ 4. When administering a neuromuscular blocking drug such as pancuronium (Pavulon), the nurse needs to remember which principle?
- It is used instead of general anesthesia during surgery.
 - Only skeletal muscles are paralyzed; respiratory muscles remain functional.
 - It causes sedation and pain relief while allowing for lower doses of anesthetics.
 - Artificial mechanical ventilation is required because of paralyzed respiratory muscles.
- _____ 5. A patient is being prepared for an oral endoscopy, and the nurse anesthetist reminds him that he will be awake during the procedure but probably will not remember it. What type of anesthetic technique is used in this situation?
- Local anesthesia
 - Moderate sedation
 - Topical anesthesia
 - Spinal anesthesia

- _____ 6. During the immediate postoperative period, the Post Anesthesia Care Unit nurse is assessing a patient who had hip surgery. The patient is experiencing tachycardia, tachypnea, and muscle rigidity, and his temperature is 103° F (39.4° C). The nurse will prepare for what immediate treatment?
- naltrexone hydrochloride (Narcan) injection, an opioid reversal drug
 - dantrolene (Dantrium) injection, a skeletal muscle relaxant
 - An anticholinesterase drug, such as neostigmine
 - Cardiopulmonary resuscitation (CPR) and intubation
- _____ 7. A patient has been taking phenobarbital for 2 weeks as part of his therapy for epilepsy. He tells the nurse that he feels tense and that “the least little thing” bothers him now. Which is the correct explanation for this problem?
- These are adverse effects that usually subside after a few weeks.
 - The drug must be stopped immediately because of possible adverse effects.
 - This drug causes the rapid eye movement (REM) sleep period to increase, resulting in nightmares and restlessness.
 - This drug causes deprivation of REM sleep and may cause the inability to deal with normal stress.
- _____ 8. A 50-year-old man who has been taking phenobarbital for 1 week is found very lethargic and unable to walk after eating out for dinner. His wife states that he has no other prescriptions and that he did not take an overdose—the correct number of pills is in the bottle. The nurse suspects that which of the following may have happened?
- He took a multivitamin.
 - He drank a glass of wine.
 - He took a dose of aspirin.
 - He developed an allergy to the drug.
- _____ 9. A patient is taking flurazepam (Dalmane) 3 to 4 nights a week for sleeplessness. She is concerned that she cannot get to sleep without taking the medication. What nonpharmacologic measures should the nurse suggest to promote sleep for this patient?
- Providing a quiet environment
 - Exercising before bedtime to become tired
 - Consuming heavy meals in the evening to promote sleepiness
 - Drinking hot tea or coffee just before bedtime
- _____ 10. Ramelteon (Rozerem) is prescribed for a patient with insomnia. The nurse checks the patient’s medical history, knowing that this medication is contraindicated in which disorder?
- Coronary artery disease
 - Renal insufficiency
 - Liver disease
 - Anemia

- _____ 11. The nurse notes in the patient's medication history that the patient is taking cyclobenzaprine (Flexeril). Based on this finding, the nurse interprets that the patient has which disorder?
- A musculoskeletal injury
 - Insomnia
 - Epilepsy
 - Agitation
- _____ 12. A patient has experienced insomnia for months, and the physician has prescribed a medication to help with this problem. The nurse expects which drug to be used for long-term treatment of insomnia?
- secobarbital (Seconal), a barbiturate
 - diazepam (Valium), a benzodiazepine
 - midazolam (Versed), a benzodiazepine
 - eszopiclone (Lunesta), a nonbenzodiazepine sleep aid
- _____ 13. A patient tells the nurse that he likes to drink kava herbal tea to help him relax. Which statement by the patient indicates that additional teaching about this herbal product is needed?
- "I will not drink wine with the kava tea."
 - "If I notice my skin turning yellow, I will stop taking the tea."
 - "I will not take sleeping pills if I have this tea in the evening."
 - "I will be able to drive my car after drinking this tea."
- _____ 14. A 6-year-old boy has been started on an extended-release form of methylphenidate hydrochloride (Ritalin) for the treatment of attention deficit hyperactivity disorder (ADHD). During a follow-up visit, his mother tells the nurse that she has been giving the medication at bedtime so that it will be "in his system" when he goes to school the next morning. What is the nurse's appropriate evaluation of the mother's actions?
- She is giving him the medication dosage appropriately.
 - The medication should not be taken until he is at school.
 - The medication should be taken with meals for optimal absorption.
 - The medication should be given 4 to 6 hours before bedtime to diminish insomnia.
- _____ 15. Before a patient receives triptans for the treatment of migraines, the nurse will assess for the presence of which condition, which is a contraindication if present?
- Hypotension
 - Renal disease
 - Liver damage
 - Cardiovascular disease
- _____ 16. The nurse has given medication instructions to a patient receiving phenytoin (Dilantin). Which statement by the patient indicates that the patient has an adequate understanding?
- "I will need to take extra care of my teeth and gums while on this medication."
 - "I can go out for a beer while on this medication."
 - "I can skip doses if the side effects bother me."
 - "I will be able to stop taking this drug once the seizures stop."

- _____ 17. The nurse is monitoring a patient who has been taking carbamazepine (Tegretol) for 2 months. Which effects would indicate that autoinduction has started to occur?
- The drug levels for carbamazepine are higher than expected.
 - The drug levels for carbamazepine are lower than expected.
 - The patient is experiencing fewer seizures.
 - The patient is experiencing toxic effects from the drug.
- _____ 18. The U.S. Food and Drug Administration has issued a warning for users of antiepileptic drugs. Based on this report, the nurse will monitor for which potential problems with this class of drugs?
- Increased risk of suicidal thoughts and behaviors
 - Signs of bone marrow depression
 - Indications of drug addiction and dependency
 - Increased risk of cardiovascular events, such as strokes
- _____ 19. A patient is experiencing status epilepticus. The nurse prepares to give which drug of choice for the treatment of this condition?
- diazepam (Valium)
 - midazolam (Versed)
 - valproic acid (Depakote)
 - carbamazepine (Tegretol)
- _____ 20. Phenytoin (Dilantin) has a narrow therapeutic index. The nurse recognizes that this characteristic means that
- the safe and the toxic plasma levels of the drug are very close to each other.
 - phenytoin has a low chance of being effective.
 - there is no difference between safe and toxic plasma levels.
 - a very small dosage can result in the desired therapeutic effect.
- _____ 21. A patient is taking gabapentin (Neurontin), and the nurse notes that there is no history of seizures on his medical record. What is the best possible rationale for this medication order?
- The medication is used for the treatment of neuropathic pain.
 - The medication is helpful for the treatment of multiple sclerosis.
 - The medication is used to reduce the symptoms of Parkinson's disease.
 - The medical record is missing the correct information about the patient's history of seizures.
- _____ 22. A patient has been given a prescription for levodopa-carbidopa (Sinemet) for her newly diagnosed Parkinson's disease. She asks the nurse, "Why are there two drugs in this pill?" The nurse's best response reflects which fact?
- Carbidopa allows for larger doses of levodopa to be given.
 - Carbidopa prevents the breakdown of levodopa in the periphery.
 - There are concerns about drug-food interactions with levodopa therapy that do not exist with the combination therapy.
 - Carbidopa is the biologic precursor of dopamine and can penetrate into the CNS.

- _____ 23. A patient has been treated with antiparkinson medications for 3 months. What therapeutic responses should the nurse look for when assessing this patient?
- Decreased appetite
 - Gradual development of cogwheel rigidity
 - Newly developed dyskinesias
 - Improved ability to perform activities of daily living
- _____ 24. Amantadine (Symmetrel) is prescribed for a patient with Parkinson's disease. The nurse informs the patient that which common adverse effects can occur with this medication?
- Dyskinesias, drowsiness
 - Dizziness, insomnia, nausea
 - Peripheral edema, fatigue, syncope
 - Heart palpitations, hypotension, urinary retention
- _____ 25. The nurse is assessing the medication history of a patient with a new diagnosis of Parkinson's disease. Which condition is a contraindication for the patient, who will be taking tolcapone (Tasmar)?
- Glaucoma
 - Seizure disorder
 - Liver failure
 - Benign prostatic hyperplasia
- _____ 26. A patient taking entacapone (Comtan) for the first time calls the clinic to report a dark discoloration of his urine. After listening to the patient, the nurse realizes that what is happening in this situation?
- This is a harmless effect of the drug.
 - The patient has taken this drug along with red wine or cheese.
 - The patient is having an allergic reaction to the drug.
 - The ordered dose is too high for this patient.
- _____ 27. When treating patients with medications for Parkinson's disease, the nurse knows that the wearing-off phenomenon occurs for which reason?
- There are rapid swings in the patient's response to levodopa.
 - The patient cannot tolerate the medications at times.
 - The medications begin to lose effectiveness against Parkinson's disease.
 - The patient's liver is no longer able to metabolize the drug.
- _____ 28. The nurse reads in the patient's medication history that the patient is taking buspirone (BuSpar). The nurse interprets that the patient may have which disorder?
- Anxiety disorder
 - Depression
 - Schizophrenia
 - Bipolar disorder

- _____ 29. Before beginning a patient's therapy with selective serotonin reuptake inhibitor (SSRI) antidepressants, the nurse will assess for concurrent use of which medications or medication class?
- Aspirin
 - Anticoagulants
 - Diuretics
 - Nonsteroidal antiinflammatory drugs
- _____ 30. When a patient is receiving a second-generation antipsychotic drug, such as risperidone (Risperdal), the nurse will monitor for which therapeutic effect?
- Fewer panic attacks
 - Decreased paranoia and delusions
 - Decreased feeling of hopelessness
 - Improved tardive dyskinesia
- _____ 31. A patient has been taking haloperidol (Haldol) for 3 months for a psychotic disorder, and the nurse is concerned about the development of extrapyramidal symptoms. The nurse will monitor the patient closely for which effects?
- Increased paranoia
 - Drowsiness and dizziness
 - Tremors and muscle twitching
 - Dry mouth and constipation
- _____ 32. A patient has been taking the monoamine oxidase inhibitor (MAOI) phenelzine (Nardil) for 6 months. The patient wants to go to a party and asks the nurse, "Will just one beer be a problem?" Which advice from the nurse is correct?
- "You can drink beer as long as you have a designated driver."
 - "Now that you've had the last dose of that medication, there will be no further dietary restrictions."
 - "If you begin to experience a throbbing headache, rapid pulse, or nausea, you'll need to stop drinking."
 - "You need to avoid all foods that contain tyramine, including beer, while taking this medication."
- _____ 33. A 22-year-old patient has been taking lithium for 1 year, and the most recent lithium level is 0.9 mEq/L. Which statement about the laboratory result is correct?
- The lithium level is therapeutic.
 - The lithium level is too low.
 - This lithium level is too high.
 - Lithium is not usually monitored with blood levels.
- _____ 34. A patient has been admitted to the emergency department with a suspected overdose of a tricyclic antidepressant. The nurse will prepare for what immediate concern?
- Hypertension
 - Renal failure
 - Cardiac dysrhythmias
 - Gastrointestinal bleeding

- _____ 35. Chlorpromazine (Thorazine) is prescribed for a patient, and the nurse provides instructions to the patient about the medication. The nurse includes which information?
- The patient needs to avoid caffeine while on this drug.
 - The patient needs to wear sunscreen while outside because of photosensitivity.
 - Long-term therapy may result in nervousness and excitability.
 - The medication may be taken with an antacid to reduce gastrointestinal upset.
- _____ 36. The nurse is reviewing the food choices of a patient who is taking a monoamine oxidase inhibitor (MAOI). Which food choice would indicate the need for additional teaching?
- Orange juice
 - Fried eggs over-easy
 - Salami and Swiss cheese sandwich
 - Biscuits and honey
- _____ 37. A 38-year-old male patient stopped smoking 6 months ago. He tells the nurse that he still feels strong cigarette cravings and wonders if he is ever going to feel “normal” again. Which statement by the nurse is correct?
- “It’s possible that these cravings will never stop.”
 - “These cravings may persist for several months.”
 - “The cravings tell us that you are still using nicotine.”
 - “The cravings show that you are about to experience nicotine withdrawal.”
- _____ 38. The nurse is presenting a substance-abuse lecture for teenage girls and is asked about “roofies.” The nurse recognizes that this is the slang term for which substance?
- cocaine
 - flunitrazepam
 - secobarbital
 - methamphetamine
- _____ 39. A patient is being treated for ethanol alcohol abuse in a rehabilitation center. The nurse will include which information when teaching him about disulfiram (Antabuse) therapy?
- He should not smoke cigarettes while on this drug.
 - He needs to know about the common over-the-counter substances that contain alcohol.
 - This drug will cause the same effects as the alcohol did, without the euphoric effects.
 - Mouthwashes and cough medicines that contain alcohol are safe because they are used in small amounts.

- _____ 40. The nurse is conducting a smoking-cessation program. Which statement regarding drugs used in cigarette-smoking-cessation programs is true?
- Rapid chewing of the nicotine gum releases an immediate dose of nicotine.
 - Quick relief from withdrawal symptoms is most easily achieved by using a transdermal patch.
 - Compliance with treatment is higher with use of the gum rather than the transdermal patch.
 - The nicotine gum can be used only up to six times per day.
- _____ 41. When an adrenergic drug stimulates beta₁-adrenergic receptors, the result is an increased force of contraction, which is known as what type of effect?
- Positive inotropic
 - Anti-adrenergic
 - Negative dromotropic
 - Positive chronotropic
- _____ 42. When a patient is taking an adrenergic drug, the nurse expects to observe which effect?
- Increased heart rate
 - Bronchial constriction
 - Constricted pupils
 - Increased intestinal peristalsis
- _____ 43. The nurse is administering a stat dose of epinephrine. Epinephrine is appropriate for which situation?
- Severe hypertension
 - Angina
 - Cardiac arrest
 - Tachycardia
- _____ 44. The nurse recognizes that adrenergic drugs cause relaxation of the bronchi and bronchodilation by stimulating which type of receptors?
- Dopaminergic
 - Beta₁-adrenergic
 - Beta₂-adrenergic
 - Alpha₁-adrenergic
- _____ 45. A patient is receiving a moderate-level dose of dobutamine for shock and is complaining of feeling more “skipping beats” than yesterday. What is the nurse’s next action?
- Assess the patient’s vital signs and cardiac rhythm.
 - Discontinue the dobutamine immediately.
 - Titrate the rate to a higher dose to reduce the palpitations.
 - Monitor for other signs of a therapeutic response to the drug.

- _____ 46. A patient is going home with a new prescription for the beta blocker atenolol (Tenormin). The nurse will include which content when teaching the patient about this drug?
- Never stop taking this medication abruptly.
 - The medication will be stopped once symptoms subside.
 - If adverse effects occur, stop taking the drug for 24 hours, and then resume.
 - Be watchful for first-dose hypotension.
- _____ 47. During initial rounds, the nurse notes that a dobutamine infusion has extravasated into the forearm of a patient. After stopping the infusion, the nurse follows standing orders and immediately injects phentolamine (Regitine) subcutaneously in a circular fashion around the extravasation site. What is the mechanism of action of the phentolamine in this situation?
- It neutralizes the extravasated dobutamine immediately.
 - It causes arterial vasoconstriction and reduced pain and swelling at the site.
 - It increases peripheral vascular resistance and reduces arterial pressure at the site.
 - It increases blood flow to the ischemic site by vasodilation to prevent tissue damage.
- _____ 48. The nurse is screening a patient who will be taking a nonspecific/nonselective beta blocker. Which condition, if present, may cause serious problems if the patient takes this medication?
- Angina
 - Hypertension
 - Glaucoma
 - Asthma
- _____ 49. During a teaching session about self-monitoring while taking a beta blocker at home, the nurse has taught the patient to take his apical pulse daily for 1 minute. If the pulse rate decreases to less than 60 beats per minute, the nurse will instruct the patient to:
- notify his prescriber.
 - reduce the dose of his beta blocker by half.
 - continue the medication because this is an expected effect.
 - skip the medication dose that day, and check his pulse again the next day.
- _____ 50. A 49-year-old patient is in the clinic for a follow-up visit 6 months after starting a beta blocker for treatment of hypertension. During this visit, his blood pressure is 169/98 mm Hg, and he eventually confesses that he stopped taking this medicine 2 months ago because of an “embarrassing problem.” What problem did the patient most likely experience with this medication that caused him to stop taking it?
- Urge incontinence
 - Dizziness when standing up
 - Excessive flatus
 - Impotence