

SELF-ASSESSMENT QUESTIONS
#99021 GERIATRIC POLYPHARMACY

After reviewing the course, complete the following Self-Assessment Questions.
Receive immediate feedback by reviewing the Study Guide provided on pages 29–30.
Please record the number of questions you correctly answered on the Evaluation.
The Evaluation must be completed in order to receive credit for this course.

This 5 contact hour activity must be completed by February 28, 2022.

1. In general, polypharmacy has been defined as
 - A) a single patient taking more than five drugs daily.
 - B) multiple medications taken to manage comorbid conditions.
 - C) multiple medications prescribed to manage the same disease.
 - D) the prescription of two drugs that may interact to result in adverse effects.
2. All of the following are new inclusions on the 2019 Beers criteria list, EXCEPT:
 - A) Pyrilamine
 - B) Glimepiride
 - C) Methscopolamine
 - D) Brompheniramine
3. Which of the following medications should be avoided in older adults due to the risk of *Clostridium difficile* infection and bone loss and fractures?
 - A) Antidepressants
 - B) Sliding-scale insulin
 - C) Proton-pump inhibitors
 - D) First-generation antipsychotics
4. The Screening Tool of Older Persons' potentially inappropriate Prescriptions (STOPP) criteria are organized according to
 - A) drug class.
 - B) adverse effects.
 - C) physiologic system.
 - D) specific disease/condition.
5. Which of the following is an age-related physiologic change that may affect the absorption of drugs?
 - A) Xerostomia
 - B) Faster stomach emptying
 - C) Altered pH of the stomach contents
 - D) Increased gastrointestinal tract motility
6. Age-related cellular atrophy may result in
 - A) cardiomegaly.
 - B) pulmonary disease.
 - C) skeletal deformities.
 - D) dementia and contracture.
7. What enzyme is the most important factor in the first phase of drug metabolism?
 - A) Alteplase
 - B) Peptidase
 - C) Peroxidase
 - D) Cytochrome P-450
8. The action of which of the following drugs is extended by age- and illness-related kidney changes?
 - A) Nafcillin
 - B) Morphine
 - C) Propranolol
 - D) Erythromycin
9. The use of multiple medications has been associated with decreased adherence due to
 - A) cost.
 - B) burnout.
 - C) complexity of regimens.
 - D) All of the above
10. The Centers for Medicare and Medicaid Services (CMS) regulations state that nursing facility residents should only receive medications when
 - A) under direct observation.
 - B) prescribed by a geriatric specialist.
 - C) the adverse effects can be managed by additional medications.
 - D) the potential benefits outweigh the risks or burden of treatment.

Self-Assessment questions continue on next page →

11. If a nursing home resident is found to have been prescribed an unnecessary drug, the facility may receive a(n)
 - A) warning.
 - B) F-Tag 757 citation.
 - C) CMS 3457 citation.
 - D) audit of their records.
12. Adverse drug reactions (ADRs) often involve
 - A) opioids.
 - B) anticoagulants.
 - C) anticonvulsants.
 - D) All of the above
13. Which of the following is NOT one of the major categories of ADRs?
 - A) Toxic reactions
 - B) Hypersensitivity
 - C) Prescribing errors
 - D) Idiosyncratic responses
14. The U.S. Food and Drug Administration (FDA) has issued a black box warning for warfarin regarding the risk of
 - A) suicidal ideation.
 - B) respiratory depression.
 - C) major or fatal bleeding.
 - D) stroke and myocardial infarction.
15. Which of the following factors in older patients with diabetes may lead to hypoglycemia unawareness?
 - A) More rapid intestinal absorption of calories
 - B) Heightened adrenergic response to low blood glucose
 - C) Misdiagnosed or unrecognized early symptoms of hypoglycemia
 - D) Lack of patient education on the signs and symptoms of hypoglycemia
16. For elderly patients with a longer duration of diabetes (more than 10 years) or comorbidities who requires combination therapy (including insulin), the American Geriatrics Society recommends a target glycosylated hemoglobin of
 - A) greater than 8%.
 - B) less than 6%–7.5%.
 - C) less than 8%–8.5%.
 - D) less than 11.5%.
17. What is a universally applicable prevention and treatment strategy that can improve sleep quality for those with and without a specific sleep disorder?
 - A) Benzodiazepines
 - B) A sleep hygiene regimen
 - C) Increased physical activity
 - D) Over-the-counter sleep aids
18. Elderly patients with dementia-related psychosis treated with antipsychotics are at an increased risk for
 - A) falls.
 - B) suicide.
 - C) clotting disorders.
 - D) death, mainly from cardiovascular or infectious causes.
19. A prescribing cascade occurs when
 - A) a patient's condition deteriorates as a result of his or her medication regimen.
 - B) a patient's limited life expectancy results in the cessation of some medications.
 - C) adverse drug reactions prevent the appropriate treatment of a treatable condition.
 - D) a patient has an adverse drug reaction and additional drugs are prescribed to control the symptoms of this reaction.
20. Medication reconciliation should be conducted
 - A) on admission.
 - B) after transitions of care.
 - C) before prescribing new medications.
 - D) All of the above

STUDY GUIDE

COURSE #99021 GERIATRIC POLYPHARMACY

This Study Guide has been included to provide immediate feedback about your achievement for the course learning objectives. The correct answer for the Self-Assessment Questions and their locations within the text are indicated below.

- In general, polypharmacy has been defined as**
A) a single patient taking more than five drugs daily. (*Polypharmacy Defined*)
- All of the following are new inclusions on the 2019 Beers criteria list, EXCEPT:**
D) Brompheniramine (*Identification of Problematic Medications in the Elderly; The Beers Criteria*)
- Which of the following medications should be avoided in older adults due to the risk of *Clostridium difficile* infection and bone loss and fractures?**
C) Proton-pump inhibitors (*Identification of Problematic Medications in the Elderly; Table 1*)
- The Screening Tool of Older Persons' potentially inappropriate Prescriptions (STOPP) criteria are organized according to**
C) physiologic system. (*Identification of Problematic Medications in the Elderly; STOPP/START Criteria*)
- Which of the following is an age-related physiologic change that may affect the absorption of drugs?**
C) Altered pH of the stomach contents (*Age-Related Physiologic Changes*)
- Age-related cellular atrophy may result in**
D) dementia and contracture. (*Age-Related Physiologic Changes*)
- What enzyme is the most important factor in the first phase of drug metabolism?**
D) Cytochrome P-450 (*Age-Related Physiologic Changes*)
- The action of which of the following drugs is extended by age- and illness-related kidney changes?**
B) Morphine (*Age-Related Physiologic Changes*)
- The use of multiple medications has been associated with decreased adherence due to**
D) All of the above (*Potential Problems Prescribing in Geriatrics*)
- The Centers for Medicare and Medicaid Services (CMS) regulations state that nursing facility residents should only receive medications when**
D) the potential benefits outweigh the risks or burden of treatment. (*Potential Problems Prescribing in Geriatrics; Nursing Home Regulations*)
- If a nursing home resident is found to have been prescribed an unnecessary drug, the facility may receive a(n)**
B) F-Tag 757 citation. (*Potential Problems Prescribing in Geriatrics; Nursing Home Regulations*)
- Adverse drug reactions (ADRs) often involve**
D) All of the above (*Adverse Drug Reactions*)
- Which of the following is NOT one of the major categories of ADRs?**
C) Prescribing errors (*Adverse Drug Reactions*)

14. **The U.S. Food and Drug Administration (FDA) has issued a black box warning for warfarin regarding the risk of**
C) *major or fatal bleeding. (Adverse Drug Reactions; Anticoagulant Therapy)*
15. **Which of the following factors in older patients with diabetes may lead to hypoglycemia unawareness?**
C) *Misdiagnosed or unrecognized early symptoms of hypoglycemia (Adverse Drug Reactions; Antidiabetic Medications)*
16. **For elderly patients with a longer duration of diabetes (more than 10 years) or comorbidities who requires combination therapy (including insulin), the American Geriatrics Society recommends a target glycated hemoglobin of**
C) *less than 8%–8.5%. (Adverse Drug Reactions; Antidiabetic Medications)*
17. **What is a universally applicable prevention and treatment strategy that can improve sleep quality for those with and without a specific sleep disorder?**
B) *A sleep hygiene regimen (Adverse Drug Reactions; Management of Insomnia)*
18. **Elderly patients with dementia-related psychosis treated with antipsychotics are at an increased risk for**
D) *death, mainly from cardiovascular or infectious causes. (Adverse Drug Reactions; Antipsychotic Medications in Long-Term Care)*
19. **A prescribing cascade occurs when**
D) *a patient has an adverse drug reaction and additional drugs are prescribed to control the symptoms of this reaction. (Prescribing Cascade)*
20. **Medication reconciliation should be conducted**
D) *All of the above (Medication Reconciliation)*