# UNIVERSITY OF ESWATINI FACULTY OF HEALTH SCIENCES

#### FINAL EXAMINATION

#### **SECOND SEMESTER AUGUST, 2020**

TITLÈ OF PAPER

-PHARMACOTHERAPEUTICS ACROSS THE

LIFE SPAN

**COURSE CODE** 

: GNS 606

:

TIME ALLOCATED

**TWO HOURS** 

MARKS ALLOCATED :

60

#### **INSTRUCTIONS:**

- 1. ANSWER ALL QUESTIONS
- 2. READ INSTRUCTIONS CAREFULLY

N.B. DO NOT OPEN THIS PAPER UNTIL PERMISSION HAS BEEN GRANTED BY THE INVIGILATOR

Multiple Ch	oice (1	Mark	each)
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Identify the choice	that best compl	letes the statement o	r answers the question.
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1000	Concentration will produce therapeutic effects
	Concentration will produce an adverse response
,	Time between doses must be shortened
1	Duration of action of the drug is too long
2	. Which of the following statements about bioavailability is true?
l	Bioavailability issues are especially important for drugs with narrow therapeutic ranges or sustained-release mechanisms.
2	All brands of a drug have the same bioavailability.
3	Drugs that are administered more than once a day have greater bioavailability than drugs given once daily.
1	Combining an active drug with an inert substance does not affect bioavailability.
3	. Drug antagonism is best defined as an effect of a drug that:
	Leads to major physiological and psychological dependence
2	Is modified by the concurrent administration of another drug
3	Cannot be metabolized before another dose is administered
	Leads to a decreased physiological response when combined with another drug
	Therapeutic drug levels are drawn when a drug reaches steady state. Drugs eady state:
	After the second dose
	After four to five half-lives
- 10	princes, prince of a compression of asset to receive a present and the contract of a second of the second of the contract of
2	When the patient feels the full effect of the drug

1	Therapeutic drug levels
٠	Adding or subtracting medications from the treatment regimen
	Ongoing provider visits
	Instructing the patient to report if the drug is not effective
6	5. Vitamin B <sub>12</sub> deficiency may lead to:
1	Hair loss
2	Insomnia
3	Dry scales on the scalp
 1	Exercises and the contract of
pri	Numbness and tingling of the hands  Taylor is a 10-year-old child diagnosed with major depression. The late first-line antidepressant for children is:
7 pri 1	Taylor is a 10-year-old child diagnosed with major depression. The late first-line antidepressant for children is:  Fluoxetine
pri 1 2	Taylor is a 10-year-old child diagnosed with major depression. The late first-line antidepressant for children is:  Fluoxetine Risperidone
7 pri 1 2	Taylor is a 10-year-old child diagnosed with major depression. The late first-line antidepressant for children is:  Fluoxetine Risperidone Sertraline
7 pri 1 2	Taylor is a 10-year-old child diagnosed with major depression. The late first-line antidepressant for children is:  Fluoxetine Risperidone
7 pri 1 2 3	Taylor is a 10-year-old child diagnosed with major depression. The late first-line antidepressant for children is:  Fluoxetine Risperidone Sertraline
7 pri 1 2 3	Taylor is a 10-year-old child diagnosed with major depression. The late first-line antidepressant for children is:  Fluoxetine Risperidone Sertraline Citalopram  Which of the following adverse effects may occur due to a dihydropyrdine cium channel blocker?  Bradycardia
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	Patient teaching related to amlodipine includes:
1	Increase calcium intake to prevent osteoporosis from a calcium blockade.
2	Do not crush the tablet; it must be given in liquid form if the patient has trouble swallowing it.
3	Avoid grapefruit juice as it affects the metabolism of this drug.
1	Rise slowly from a supine position to reduce orthostatic hypotension.
1	0. The choice of diuretic to use in treating hypertension is based on:
1	Presence of diabetes with loop diuretics being used for these patients
2	Level of kidney function with a thiazide diuretic being used for an estimated glomerular filtration rate higher than the mid-40mL/min range
3	Ethnicity with aldosterone antagonists best for those of African decent and older adults
4	Presence of hyperlipidemia with higher doses needed for patients with LDL
	above 130 mg/dL
	above 130 mg/dL  1. Long-acting beta-agonists received a Black Box Warning from the U.S. d Drug Administration due to the:
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in Adi	Increased incidence of cardiac events when LTBAs are used Increased risk of asthma-related deaths when LTBAs are used Risk for life-threatening alterations in electrolytes  12. Musa and his wife are traveling to Southeast Asia on vacation and he has to the clinic to review his medications. He is healthy with only mild hypertension well controlled. He asks about getting a shot to prevent blood clots like his friend d before international travel. The correct respond would be:  dminister one dose of low-molecular weight heparin 24 hours before evel.
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13.	Patients with pernicious anaemia require treatment with:
1 -	en e
l Iro	and the control of th
	lic acid
3 Ep	ogen alpha
4 Vit	amin B <sub>12</sub>
14.	Patients who are beginning therapy with vitamin B <sub>12</sub> need to be monitored
1 Hv	pertensive crisis that may occur in the first 36 hours
	COMPANIES OF THE PROPERTY OF T
<sup>2</sup> Hy	pokalemia that occurs in the first 48 hours
3 T.e.	ukopenia that occurs at 1 to 3 weeks of therapy
4 Th	rombocytopenia that may occur at any time in therapy
15.	Nonselective beta blockers and alcohol create serious drug interactions
ısulın	because they:
1 Inc	rease blood glucose levels
+ } + +, 0+	oduce unexplained diaphoresis
	erfere with the ability of the body to metabolize glucose
200	where with the ability of the body to inclabolize glucose
*   IVI	-1-4h1
	ask the signs and symptoms of altered glucose levels
16.	ask the signs and symptoms of altered glucose levels  Effects of oestrogen include:
	Effects of oestrogen include:
1 Re	Effects of oestrogen include: gulation of the menstrual cycle
l Re	Effects of oestrogen include: gulation of the menstrual cycle intenance of bone density by increasing bone reabsorption
1 Re	Effects of oestrogen include: gulation of the menstrual cycle intenance of bone density by increasing bone reabsorption
l Re	Effects of oestrogen include: gulation of the menstrual cycle intenance of bone density by increasing bone reabsorption intenance of the normal structure of the skin and blood vessels

17. Juakeem is a nasal methicillin resistant staphylococcus aureus (MRSA) carrier. Treatment to eradicate nasal MRSA is mupirocin. Patient education regarding treating nasal MRSA includes:	
1 Take the oral medication exactly as prescribed.	
<sup>2</sup> Insert one-half of the dose in each nostril twice a day.	
3 Alternate treating one nare in the morning and the other in the evening.	
Nasal MRSA eradication requires at least 4 weeks of therapy, with up to 8 weeks needed in some patients.	
18. Instructions for the use of selenium sulfide shampoo to treat scalp seborrhea include:	
Shampoo daily and rinse well.	
Worsening of seborrhea for the first week is normal.	:
3 Seborrhea usually clears up after a few weeks of treatment.	
4 Shampoo twice a week for 2 weeks, then weekly.	
19. Sarah is a 25-year-old female who is 8 weeks pregnant and has a urinary tract infection. What would be the appropriate antibiotic to prescribe for her?  1 Ciprofloxacin 2 Amovicillin/clavulanic	
tract infection. What would be the appropriate antibiotic to prescribe for her?  1 Ciprofloxacin 2 Amoxicillin/clavulanic	
tract infection. What would be the appropriate antibiotic to prescribe for her?  1 Ciprofloxacin 2 Amoxicillin/clavulanic 3 Doxycycline	
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uld be on:	Patients who have angina, regardless of class, who are also diabetic,
1 Nitr	ates $\ell$
	blockers
	E inhibitors
	and the state of t
4 Calc	ium channel blockers
_ 22. o also have	Beta blockers are especially helpful for patients with exertional angina
1 Arri	nythmias
<sup>2</sup> Hyp	othyroidism
and the second of the second o	A REPORT OF THE PROPERTY OF TH
<sup>3</sup> Hyp	erlipidemia
4 Ath	erosclerosis
4 Ath	The second of th
4 Athordal A	Medications are typically started for angina patients when:
4 Ath	Medications are typically started for angina patients when:  first permanent EKG changes occur
4 Ath  23.  1 The  2 The  3 The	Medications are typically started for angina patients when:  first permanent EKG changes occur  start of intermittant chest pain symptoms
4 Ath  23.  1 The  2 The  3 The	Medications are typically started for angina patients when:  first permanent EKG changes occur  start of intermittant chest pain symptoms  events trigger a trip to the emergency department
4 Ath  23.  1 The  2 The  3 The  4 Whe  24. ude:	Medications are typically started for angina patients when:  first permanent EKG changes occur start of intermittant chest pain symptoms events trigger a trip to the emergency department en troponin levels become elevated
4 Ath  23.  1 The  2 The  3 The  4 Whe  24.  ude:	Medications are typically started for angina patients when:  first permanent EKG changes occur start of intermittant chest pain symptoms events trigger a trip to the emergency department en troponin levels become elevated  Common mistakes practitioners make in treating anxiety disorders  tching medications after an 8- to 12-week trial simizing dosing of antianxiety medications
4 Atheres 4 Atheres 2 The 3 The 4 Whee 24. ude:	Medications are typically started for angina patients when:  first permanent EKG changes occur start of intermittant chest pain symptoms events trigger a trip to the emergency department en troponin levels become elevated  Common mistakes practitioners make in treating anxiety disorders  tching medications after an 8- to 12-week trial

L	Daily inhaled medium-dose corticosteroids
2	Short-acting beta-2-agonists (salbutamol) as needed
3	Long-acting beta-2-agonists every morning as a preventative
4	Antihistamine medciation daily
	6. To improve actual effectiveness of oral contraceptives women should be l regarding:
1	Use of a back-up method if they have vomiting or diarrhea during a pill packet
2	Doubling pills if they have diarrhea during the middle of a pill pack
3	The fact that they will have a normal menstrual cycle if they miss two pills
4	The fact that mid-cycle spotting is not normal and the provider should be contacted immediately
2	7. Vanessa has been diagnosed with scabies. Her education would include:
1	She should apply the scabies treatment cream for an hour and wash it off.
2	Scabies may need to be retreated in a week after initial treatment.
3	All members of the household and close personal contacts should be treated.
4	Malathion is flammable and she should take care until the solution dries.
	8. When the total daily insulin dose is split and given twice daily, which of wing rules may be followed?
1	Give two-thirds of the total dose in the morning and one-third in the evening.
2	Give 0.3 units per kg of premixed 70/30 insulin with one-third in the morning and two-thirds in the evening.
3	Give 50% of an insulin glargine dose in the morning and 50% in the evening.
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1	There with laws atomatics dishere
	Those with long-standing diabetes
	Older adults
·- ·	Those with no significant cardiovascular disease
4	Young children who are early in their disease
	Gastro-oesophageal reflux disease may be aggravated by the following ion that affects lower oesophageal sphincter tone:
1	Calcium carbonate
2	,
	Estrogen
·	Furosemide
3 4	Furosemide  Metoclopramide  31. Evidence is strong that the timing of heart failure interventions are best
3	Furosemide  Metoclopramide
3	Furosemide  Metoclopramide  31. Evidence is strong that the timing of heart failure interventions are best when:  The person enters stage C
3 4 1 1	Furosemide  Metoclopramide  31. Evidence is strong that the timing of heart failure interventions are best when:  The person enters stage C  The person has functional disabilities
3	Furosemide  Metoclopramide  1. Evidence is strong that the timing of heart failure interventions are best when:  The person enters stage C  The person has functional disabilities  At the earliest indication
3 4 1 2	Furosemide  Metoclopramide  31. Evidence is strong that the timing of heart failure interventions are best when:  The person enters stage C  The person has functional disabilities
3 4 1 2 3	Furosemide  Metoclopramide  1. Evidence is strong that the timing of heart failure interventions are best when:  The person enters stage C  The person has functional disabilities  At the earliest indication
3 4 4 3 3 4 4 3 3 3 4 4 3 3 3 4 4 3 3 3 4 4 3	Furosemide  Metoclopramide  31. Evidence is strong that the timing of heart failure interventions are best when:  The person enters stage C  The person has functional disabilities  At the earliest indication  When stage IV is determined
3 4 dd 1 2 3 4 4 3	Furosemide  Metoclopramide  31. Evidence is strong that the timing of heart failure interventions are best when:  The person enters stage C  The person has functional disabilities  At the earliest indication  When stage IV is determined  32. A challenge faced with antiretroviral therapy (ART) is:
3 4 4 3 4 4 3 3 4 4 4 4 4 4 4 4 4 4 4 4	Furosemide  Metoclopramide  31. Evidence is strong that the timing of heart failure interventions are best when:  The person enters stage C  The person has functional disabilities  At the earliest indication  When stage IV is determined  32. A challenge faced with antiretroviral therapy (ART) is:

1	300 mgEmtricitabine 200 mgEfavirenz 600 m	ng daily
2	Abacavir 600 mg daily- Lopinavir/ritonavir 800/	200 mg daily
3	Atazanavir 300 mg-ritonavir 100 mg daily	ere interest to the finite programme of the control
1	Darunavir/ritonavir 800/100 mg daily	The state of the s
3	Phenotype assays are used to measure	of antiretroviral therapy.
 [	Effectiveness	an company of the com
2	Genotype	The track to the first which increases the plant of the first of the f
3	Sensitivity	and the the the appear of the control of the contro
	*	
3	Hypersensitivity susceptibility  35. Beta blockers treat hypertension because the	iey:
3		iey:
3	35. Beta blockers treat hypertension because th	iey:
3 1 2	35. Beta blockers treat hypertension because th Reduce peripheral resistance	iey:
3 1 2	35. Beta blockers treat hypertension because the Reduce peripheral resistance  Vasoconstrict coronary arteries	16y:
3 1 2 3	35. Beta blockers treat hypertension because the Reduce peripheral resistance  Vasoconstrict coronary arteries  Reduce norepinephrine	
1 2 3 P	Reduce peripheral resistance  Vasoconstrict coronary arteries  Reduce norepinephrine  Reduce angiotensin II production  86. When starting a patient with hypothyroidise patient education would include:	m on thyroid replacement hor-
3 1 2 3	Reduce peripheral resistance  Vasoconstrict coronary arteries  Reduce norepinephrine  Reduce angiotensin II production  36. When starting a patient with hypothyroidise patient education would include:	m on thyroid replacement horto 2 weeks.

1	4 weeks
2	3 to 6 weeks
3	3 to 6 months
· :	1 year
38	In addition to antimicrobial therapy, patients treated for <i>Trichomonas</i>
ion	should be educated regarding:
1 1	Necessity of treating sexual partner simultaneously
2	Abstaining from intercourse until both partners are treated
3	Need for retesting in 3 months due to high reinfection rate
4	All of the above
,, ÷,	
39	O. Goals when treating tuberculosis include:
1	Completion of recommended therapy
2 :	Negative purified protein derivative at the end of therapy
3	Completely normal chest x-ray
4	All of the above
,	
4(	A child that may warrant watchful waiting instead of prescribing an an-
	or acute otitis media includes patients who:
1	Are low risk with temperature of less than 39°C
2	Have reliable parents with transportation
	Are older than age 2 years
- 4	All of the above
	All of the above

	Azithromycin
2 '	Trimethoprim/sulfamethoxazole
3	Amoxicillin/clavulanic acid
4	Ciprofloxacin
aus	2. Topical corticosteroids are prescribed cautiously in young children e: They may cause an intense hypersensitivity reaction
2	Of hypothalamic-pituitary-adrenal axis suppression
3	Corticosteroids are less effective in young children
4	Young children may accumulate corticosteroids, leading to toxic levels
4	3. A patient who has been taking isoniazid (INH) has a new prescription for ne. She is wondering why she needs this medication. The nurse explains that ne is often given concurrently with the isoniazid to prevent which condition?
oxi	
oxi	Hair loss
oxi oxi	Hair loss Renal failure
oxi oxi 1	
oxi	Renal failure

1	Gastrointestinal upset
2	Headache and nervousness
: 3	Reddish-orange urine and stool
4	Numbness and tingling of extremities
45. presence o examination	A patient with an eye injury requires an ocular examination to detect the f a foreign body. The nurse anticipates that which drug will be used for this on?
1	Phenylephrine
2	Fluorescein sodium
3	Atropine sulfate
4	Chloramphenicol 1%
	When reviewing the health history of a patient who will be receiving ou recall that antacids containing magnesium need to be used cautiously in th which condition?
antacids, y	When reviewing the health history of a patient who will be receiving ou recall that antacids containing magnesium need to be used cautiously in th which condition?
antacids, y	When reviewing the health history of a patient who will be receiving ou recall that antacids containing magnesium need to be used cautiously in th which condition?  Peptic ulcer disease  Renal failure
antacids, y patients w	When reviewing the health history of a patient who will be receiving ou recall that antacids containing magnesium need to be used cautiously in th which condition?  Peptic ulcer disease
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	Hydroxychloroquine is better absorbed and has fewer adverse effects if taken on an empty stomach.
2	The drug is started 3 weeks before exposure but can be discontinued once she leaves the area.
3	The medication is taken only when she observes mosquito bites because it can have toxic effects if taken unnecessarily.
4	The drug is usually started 1 to 2 weeks before traveling to endemic areas and is continued for 4 weeks after leaving the area.
1	Monophasic
ıl c	ycle?
1	Monophasic
	Biphasic
2	Biphasic
2	Triphasic
100	
3	Triphasic
3 4 9. W	Triphasic  Short acting  The nurse practitioner is teaching a review class to nurses about diabetes hich statement by the nurse is correct?
3 4 9. W	Triphasic Short acting The nurse practitioner is teaching a review class to nurses about diabetes
3 4 9. W	Triphasic  Short acting  The nurse practitioner is teaching a review class to nurses about diabetes hich statement by the nurse is correct?
3 4 9. W	Triphasic  Short acting  The nurse practitioner is teaching a review class to nurses about diabetes hich statement by the nurse is correct?  Patients with type 2 diabetes will never need insulin.
3 4 9.	Triphasic  Short acting  The nurse practitioner is teaching a review class to nurses about diabetes hich statement by the nurse is correct?  Patients with type 2 diabetes will never need insulin.  Oral antidiabetic drugs are safe for use during pregnancy.

50.	A patient, newly diagnosed with hypothyroidism, has received a prescrip-
tion for thyro	id replacement therapy. The nurse will instruct the patient to take this med-
ication at whi	ch time of day?

	In the morning	
	With the noon meal	
c.	With the evening meal	:
d.	At bedtime	

#### Short Answer

Please keep your answers succinct, write legibly and label accordingly.

#### I. (10 Marks)

You diagnose Make Thandi with new onset diabetes mellitus type II as her random blood sugars have been greater than 11.1 mmol/L on three separate occasions.

Outline her diabetic treatment plan including what first line medication for diabetes you plan to prescribe.

- II. HG is a 30 year old female who comes to you complaining of burning on urination and frequency. She has no medication allergies.
- a. What is the first line drug for a urinary tract infection? (2 Marks)
- b. What education will you give her concerning this medication regimen? (3 Marks)
- III. a. You diagnose JV a 25 kg child with Otitis media. You prescribe Amoxicillin 90 mg/kg/day for 5 days what is his twice daily dose? (2 Marks)
- **b.** What instructions will you give the mother concerning his medication regime? (3 Marks)