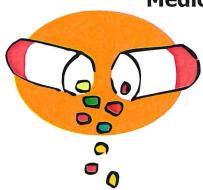
CENTRAL LOUISIANA STATE HOSPITAL Medication Competency Examination



PLEASE REVIEW MEDICATION HANDBOOK AND CLSH PHARMACY POLICY AND PROCEDURE MANUAL

Nam	ne:Date:
TRUE	/ FALSE
1	Health care personnel must be alert to the potential for various neuroleptics to sensitizes patients to the harmful effects of sun exposure.
2	Drugs listed DNG (Do Not Give) is place on the front of the patient's medical record only.
3	A patient 's WBC of 3000/mm and ANC 1900 is an indication that Clozaril to be continued.
4	Caffeine, citrus fruits, cola drinks, fruit punches, pickles, and tomatoes, need not to avoided if taking ASA, Erythromycin, or Penicillin but must be avoided if taking antibiotic Tetracycline.
5	It is O.K. to give Neuroleptics as well as Cogentin and Artane when NMS is present, because these drugs do not impair the autonomic nervous system.
6	The practice of rotating insulin injection sites is no longer advisable when clinical manifestation of diabetic neuropathy are present, because trauma and infection is relatively painless in the diabetic patient.
7 <u>. </u>	The Oxygen tank and Emergency Tray should be check on every shift.
8	Verbal orders to be sign within 72 hours of the time it is given.
9	It is O.K. for a nurse to borrow medications from another patient as long as it is replaced before the end of the shift.
10	A general rule; to prevent drug-induced EPS (extrpyramidal) side effects, routine and prophylactic use of SIDE-EFFECT medications are encouraged.
11	If a controlled drug is discontinued and the pharmacy cannot pick it up, you must continue to count the controlled drug and keep it secured until pharmacy pick it up.
12	Patient being treated concomitantly with Clozaril and other neuroleptics <u>during downward</u> <u>titration of the first neuroleptic</u> in anticipation of Clozaril only therapy will be excluded as a "polypharmacy" designation.

13	_Baseline Labs results should be in the chart before patients begin treatment with clozaril or any atypical Drugs
14	_The following is a valid order: Amoxicillin 500mg x7 days.
15	The following is a valid order, Multivitamin give one tablet po qd.
16	The following is a valid order, Vitamin E 400 iu po q am.
17	Second generation neuroleptics represent a significant change in treatment because they are effective in reducing both positive and negative symptoms of psychosis and decrease incident of EPS.
18	Medication that comes in liquid form can be helpful with patients who "cheek" medicine and later spit it out and can be used with patients who requires dose titration.
19	_DNG for patients on Clozaril includes: Low Potency Neuroleptics, Deconate Injections(Respiradal Consta), Carbamazepine/Tegretol and Bupropion/Wellbutrin.
20	On medication review printed orders, the physician may strike through a portion of a line and make a change.
21	Pregnancy status will be reviewed with at-risk females prior to initiating any psychotic medications and during subsequent follow-up.
22	A baseline measure should be obtain before or ASAP after the initiation of any atypical antipsychotic medication. Includes a family history of diabetes, hypertension, CVD, BMI, B/P, FBS(plasma) and <u>fasting lipid</u> profile.
23	Synthroid 0.025 milligram= <u>25</u> microgram.
24	Meds for patients returning from inpatient Hospital stay; all meds are automatically discontinued and all meds must be reordered upon return to CLSH.
25	The maximum dose of Benztropine per day is 8mg.
26. W	hich of the following statements are true about Valporic Acid?
b. c. d.	Effective in the treatment of manic-depressive illness May be used in conjunction with anti-psychotic agents Toxic effects closely related to serum blood levels. Acceptable serum VPA levels: 50-120mcq/ml All of the above
A. r b. r c. r d. r	the five rights in administration of medicine to a patient. ight ight ight ight ight

28. For what must the nurse Name six or more indica		is receiving atypical anti-psychotic medication?
		There is a narrow margin between the he therapeutic range and list sign and symptoms
of lithium toxicity	and SS	
30. Which of the following shuffling gait?a. Diazapam (Valiub. Amitriptyline (Electropine)b. Amitriptyline (Electropine)d. Methylphenidine	m) lavil) gentin)	sician prescribe for a client with tremors and

- 31. Joey, age 8, takes methylphenidate for attention-deficit-hyperactivity disorder. His mother complains to the nurse that Joey has a very poor appetite, and she struggles to help him gain weight. Which of the following answer would be an appropriate for the nurse to advise Joey 's mother?
 - a. Administer Joey's medication immediately after meals
 - b. Administer Joey's medication at bedtime
 - c. Skip a dose of the medication when Joey does not eat anything
 - d. Assure Joey's mother that Joey will eat when he gets hungry
- 32. The nurse noted that Mary was allergic to tegretol (carbamazepine) and the doctor ordered trileptal (oxcarbazepine):
 - a. The nurse should go on and administer the medication as ordered.
 - b. The nurse should hold the medication.
 - c. The nurse should wait and tell the physician tomorrow.
 - d. The nurse should hold the medicine and notify the physician to clarify the order and the pharmacy because both medications have some of the same chemical properties.

33. Identify the follow standard administration times:				
3X a day				
2 X a day	2 X a day			
4X a day				
Nightly	, , , , , , , , , , , , , , , , , , ,			
Every 4 hours				
34. Match the approximate metric equivalent from each column:				
1500ml	A. 1 fluid ounce			
2. 1,000ml	B. 1 fluid pint			
34 to 5 ml	C. 1 quart			
430 ml	D. 1 teaspoon			
5. 60 ml	E. 2 fluid ounces			

<u>Information can be found in the Nurse's Drug Handbook for #35 TO#38!</u>

- 35. The atypical agent with the greatest propensity to induce EPS in patient is:
 - a. thioridazine
 - b. clozapine
 - c. risperidone
 - d. olanzapine
 - e. aripiprazole
- 36. Atypicals can increase the incidence of certain metabolic side effects, the one specifically shown to increase Type II diabetes is:
 - a. thioridazine
 - b. clozapine
 - c. risperidone
 - d. olanzapine
 - e. aripiprazole
- 37. A medication that can cause such severe constipation that patients may have to be placed on a bowel regimen is:
 - a. thioridazine
 - b. clozapine
 - c. risperidone
 - d .olanzapine
 - e. aripiprazole
- 38. The psychotropic that has a particular risk of causing agranulocytosis and the CBC and ANS should be monitored closely is:
 - a. thioridazine
 - b. clozapine
 - c. risperidone
 - d. olanzapine
 - e. aripiprazole

Typical and Atypical Matching(Generic and BrandNames) and Place by each name if they are Typical with a $\underline{\mathsf{T}}$ or Atypical with an $\underline{\mathsf{A}}$:

 Navane	A.	Chlorpromazine HCL
_Abilify	В.	Loxapine Succinate
_Clozaril	C.	Ziprasidone
 _Thorazine	D.	Paliperidone
 _Loxitane	E.	Olanzapine
 _Geodon	F.	Fluphenazine
_Risperdal	G.	Quetiapine
 _Zyprexa	H.	Thiothixene
 _Haldol	I.	Aripiprazole
 Seroquel	J.	Risperidone
 _Invega	K	Haloperidol
Prolixin	L	Clozapine

Anti-anxiety and Amphetamine Matching

 Concerta	A.	Clonazepam
 Cylert	B.	Methylphenidate
 Ativan	C.	Atomoxentine HCL
 .Vistaril	D.	Diazapam
 .Klonopin	E.	Dextroamphetamine
 .Adderall	F.	MethylphenidateHCL(extended released)
 Ritalin	G.	Lorazepam
 Valium	H.	Permoline
 Strattera	I.	Hydroxyzine
 .Dexedrine	J.	Dextroamphetamine sulfate

ANTIDEPRESSANT TEST

Matching

 Prozac	A.	Fluvoxamine maleate
 _Zoloft	B.	Fluoxetine HCL
 _Desyrel	C.	Citalopram
_Wellbutrin	D.	Setraline HCL
 _Paxil	E.	Duloxetine
_Luvox	F.	Trazodone HCL
_Ludiomil	G.	Bupropopn HCL
 _Effexor	H.	Venlafaxine HCL
_Celexa	I.	Maprotiline HCL
Cymbalta	J.	Paroxetine HCL

Mood Stabilizer, Anti- Convulsant and Side Effect Medications Matching

Cogentin	A.	Carbolith-Eskalith-Carbonate
Gabitril	B.	Amantadine
Tergretol	C.	Diphenhydramine
Artane	D.	Valporic Acid-VPA
Neurontin	E.	Carbamazepine
Depakene	F.	Trihexyphendial
Trileptal	G.	Tiagabine HCL
Lithium	H.	Gabapentin
Benadryl	I.	Benztropine
Symmetrel	J.	Oxcarbazepine

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EMERGENCY TRAY INFORMATION

Emergency tray is located on all units, usually by the front door so all staff can open the door with the unit key and transport the emergency tray to the nurse and/or the physician in an emergency (ON THE ADOLESCENT SERVICE, IT IS KEPT IN THE KITCHE NET). The emergency tray is checked by the nurse on each shift. The nurse is checking for the expiration date and if the red tag is intact. A checklist is left inside of the locked cabinet to record on each shift. If the nurse uses the emergency tray or find it was opened, she must notify the pharmacy immediately (day, evening, and night shifts, weekends and holidays). The emergency tray is locked in the medication room once the emergency tray **opened!!!!**

(DRUG USE GUIDELINES POLICY AND PROCEDURES).

Drugs in the Emergency Tray:

- 1. Activated charcoal
- 2. Glucagon 1 mg Injection
- 3. Diphenhydramine (Benadryl) Injection
- 4. Dextrose 50% Injection
- 5. Epinephrine Injection 1:1000
- 6. Ipecac Oral Syrup
- 7. Nitroglycerin Tablet 1/150 gr
- 8. Albuterol Inhaler
- 9. Haldol Injection 5mg/ml
- 10. Risperdal M-Tab 2mg
- 11. Zyprexa/Zydis Tablets 15mg
- 12. Haldol tablets 10mg
- 13. Ativan tubex is to be taken from the unit refrigerator (no tubex on the units) in case of Emergency evacuation.

Other Items in Emergency Tray:

- 1. Assorted Needles
- 2. Assorted Syringes
- 3. Tourniquet
- 4. Padded Tongue Depressor
- 5. Tape 1"
- 6. Bandage Scissors
- 7. Thomas Collar
- 8. Band-Aids
- 9. Flashlight
- 10. Ace Bandages 3" or 4"
- 11. Telfa Pads
- 12. Gloves (sm, med, lg)
- 13. Kling (3)
- 14. Surgical Pads
- 15. Glucometer
- 16. Stethoscope & Manual B/P Cuff

Emplo	oyee Name (required):		
Date:_			
	EMERGENCY TRAY		
1.	The emergency tray is located:		
2.	The emergency tray is checked (how often) for and		
3.	. When the red seal is broken, the nurse should:		
4.	Name six drugs that are in the emergency tray:		
	a b	d e	
	c	f	
5.	Name six articles that are in the emergency tray:		
	a	d	
	b	e	
	c.	f.	