Chapter 34. Pain Management, Self-Assessment Questions

1. Which of the following would NOT be an appropriate choice for postoperative pain management in a patient dependent on opioids?
   A. Epidural analgesia with morphine and bupivacaine
   B. Patient-controlled analgesia with hydromorphone
   C. Oral oxycodone 5 mg po every 4 to 6 hours as needed for pain
   D. Morphine 10 mg IV every 4 to 6 hours as needed for pain

2. Mrs. B is an 85-year-old patient with a diagnosis of severe Alzheimer disease and metastatic breast cancer. Upon admission to the long-term care facility, pain management is listed in her care plan. Which of the following pain assessment tools may be helpful in monitoring the effectiveness of her pain medication?
   I. Visual analog scale
   II. PAINAD
   III. Physiological indicators
   
   A. I only
   B. III only
   C. I and II
   D. II and III
   E. I, II, and III

3. If tolerance occurs in a patient who is receiving long-term opioid therapy, this means that:
A. The patient has become addicted and should be referred to a drug treatment program
B. The patient has lost control over his or her use of the medication, and treatment should be discontinued
C. The patient is having a normal physiological response to the medication and will experience a withdrawal syndrome if the medication is stopped or quickly decreased
D. The patient has become tolerant to the drug, and another therapeutic category must be selected
E. The dose can be increased as needed to achieve pain relief

4. BA is a 58-year-old man with lung cancer and bone metastases who is currently receiving morphine oral solution 10 mg every 4 hours around the clock. In the last 24 hours, BA has used an additional 20 mg of morphine as rescue doses. He desires to switch to a sustained-release form of morphine, MS Contin. Suggest the most appropriate dose of MS Contin for this patient.
   A. MS Contin 60 mg every day
   B. MS Contin 90 mg every day
   C. MS Contin 30 mg two times daily
   D. MS Contin 45 mg two times daily
   E. MS Contin 80 mg every day

5. Which additional therapy may be appropriate for BA?
   A. Amphetamine
   B. NSAID
   C. Tricyclic antidepressants
6. MA is an oncology patient who is currently receiving morphine oral solution 10 mg every 4 hours. Recommend an appropriate rescue dose for this patient.
   A. 0.5 mg to 1 mg PO every 1 to 2 hours
   B. 3 to 6 mg PO every 1 to 2 hours
   C. 3 to 6 mg PO every 4 hours
   D. 0.5 mg to 1 mg PO every 4 hours
   E. 5 mg to 10 mg PO every 4 hours

7. Mrs. Jones is a 78-year-old woman with a history of diabetes, treated with oral medications. Recently, she has been complaining of pain in her feet that she describes as “numbness and tingling”. What is the most likely pathophysiologic type of pain in this case?
   A. Nociceptive
   B. Inflammatory
   C. Neuropathic
   D. Functional
   E. Acute

8. A physician requests your advice regarding use of an opiate for chronic, nonmalignant pain. Which of the following is the most appropriate response?
   A. Morphine IR (immediate release) is the gold standard
   B. Opioids should always be avoided in chronic pain situations
   C. Limited evidence exists for long-term opioid treatment
D. A mixed agonist/antagonist may be preferred
E. A short-acting opioid may be preferred

9. LB is a 67-year-old woman with complaints of pain in the knee. She has occasional swelling but no deformity. She describes pain as a 3 on a scale of 1 to 10. Her primary care physician asks you for advice regarding initial pain management for this patient.

What would you select as initial treatment for her pain?
A. Motrin IB (ibuprofen) 200 mg every 6 hours
B. Tylenol (acetaminophen) 325 mg every 4 to 6 hours
C. Tylenol Extra-Strength (acetaminophen) 500 mg two tablets every 6 hours
D. Ecotrin (enteric-coated aspirin) 325 mg every 4 to 6 hours
E. Celecoxib 200 mg daily

10. FG is a 65-year-old man with lower back pain. He complains of numbness and electric-shock–like pain localized to his lumbar region. Which of the following would be the most appropriate initial treatment for his type of pain?
A. Duloxetine
B. Gabapentin
C. Amitriptyline
D. Lidocaine transdermal
E. Pregabalin

11. C.K. is 45-year woman with a new diagnosis of fibromyalgia. Her main complaints are fatigue and difficulty sleeping. Which of the following would you recommend for initial treatment of her condition?
A. Amitriptyline 10 mg HS
B. Pregabalin 50 mg TID
C. Naproxen 500 mg BID
D. Tramadol 50 mg HS
E. Oxycodone SR 10 mg BID
12. RS is a 62-year-old investment banker who had been suffering with chronic low back pain for the past 2 months subsequent to a motor vehicle accident. He has been evaluated, and no pathology is noted. He is trying to adhere to a prescribed exercise plan but is limited by pain. His provider ordered morphine 5 to 10 mg orally every 4 hours, which provided good relief but caused itching. The prescriber has asked you to calculate a dose of oxycodone that will provide equivalent pain control. RS says a total daily dose of about 45 mg of oral morphine provides good pain control. What total daily dose of oxycodone would you recommend?

A. 60 mg
B. 45 mg
C. 30 mg
D. 20 mg
E. 15 mg

13. P.S. is a 62-year-old man with tetraplegia due to a motor vehicle accident 20 years ago. He complains of intense left flank pain due to hydronephrosis of the left kidney. He rates the pain as 7 or 8 on scale of 1 to 10 and describes it as constant. He is not a surgical candidate for removal of the diseased kidney. Which of the following would be the best recommendation for treatment of P.S.’s visceral pain?

A. Acetaminophen
B. Celecoxib
C. Hydromorphone
D. Gabapentin
E. Venlafaxine

14. Which of the following statements regarding the transmission of pain is correct?
I. C-fibers are responsible for transmission of acute, sharp pain

II. Nociceptors may be stimulated by a thermal, mechanical, or chemical stimulus

III. Modulation of pain impulses may occur in the dorsal horn, the brain, and the descending (efferent) system.

A. I only
B. III only
C. I and II
D. II and III
E. I, II, and III

15. CO is a 64-year-old woman with metastatic breast cancer. Pain has been controlled with the following medications: hydromorphone (Dilaudid) 10 mg IV every 1 hour and levorphanol (Levo-Dromoran) 10 mg PO every 4 hours. As the hospice care pharmacist, you are asked to convert this patient to a morphine infusion. Based on CO’s opioid requirement, recommend an initial infusion rate (mg/hour) of parenteral morphine.

A. 70 mg/hour
B. 55 mg/hour
C. 25 mg/hour
D. 110 mg/hour
E. 160 mg/h
Answers

1. A
2. D
3. E
4. C
5. B
6. B
7. C
8. C
9. C
10. D
11. A
12. D
13. C
14. D
15. B