1. The Centers for Medicare & Medicaid Services (CMS) report the percentage of residents in long-term care (LTC) facilities who regularly experience pain is:
   A. 10%.
   B. 26%.
   C. 75%.
   D. 83%.

2. Studies show that individuals with unmanaged pain can have negative outcomes related to:
   A. mobility, feelings of isolation, and enhancement of sleep.
   B. activities of daily living, confusion, and improved appetite.
   C. quality of life, anxiety, and disruption of sleep.
   D. independence, cognition, and increased socialization.

3. According to nurse practitioners, the most frequently reported barriers to providing effective pain management are:
   A. restrictions by regulating agencies.
   B. limitations on scope of practice.
   C. physicians’ resistance to prescriptive authority.
   D. deficits in education.

4. According to the Quality Care Coalition for Patients in Pain, the percentage of providers who reported up to 2-day delays in obtaining controlled medications was:
   A. 8%.
   B. 12%.
   C. 40%.
   D. 64%.

5. The ability of nurses to provide adequate pain management using schedule II medications is constrained by:
   A. timely delivery and administration.
   B. verbal orders for pain medications.
   C. lack of insurance coverage.
   D. overuse of nonpharmacological treatments.

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6. An appropriate role for the nurse practitioner in LTC is to:
   A. provide staff education on optimal pain management practices.
   B. withhold schedule II medications secondary to concern for potential abuse.
   C. question the policy on pain management.
   D. complete a study on the use of schedule II medications in the LTC facility.

Questions #7-10 refer to the following scenario: A.B., an 88-year-old man, was admitted to the LTC facility following hip replacement surgery. His response to pain using the McCaffery Pain Scale was a 7.

7. A challenge in assessing A.B.’s pain level is his:
   A. rehabilitation schedule.
   B. mental status.
   C. health.
   D. age.

8. A schedule II medication the physician might order for A.B. is:
   A. Norco.
   B. Tylenol with codeine.
   C. Fentanyl patch.
   D. Ketamine.

9. After a continued period without relief, the nurse knows that when pain medication becomes available, to expect a/an:
   A. request for nonpharmacological treatments.
   B. extended time for pain relief.
   C. long-term need for pain medication.
   D. order to begin the medication on a pre-set schedule.

10. Without adequate pain relief, A.B. could experience:
    A. long-standing chronic pain.
    B. early discharge from LTC.
    C. addiction to narcotic agents.
    D. possible long-term bed rest.

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