CNE Quiz: Pharmacological Approaches for the Management of Persistent Pain in Older Adults: What Nurses Need to Know

1. Abdulla et al. (2013) stated that persistent pain has been associated with:
   A. decreased hydration.
   B. increased mobility.
   C. bipolar disorder.
   D. social isolation.

2. A factor contributing to undertreatment of persistent pain in older adults is:
   A. family objectives.
   B. age-related physiological changes.
   C. fear of addiction.
   D. insurance coverage.

3. The gold standard for assessing pain is the:
   A. patient self-report.
   B. patterns of pain relief.
   C. PEG scale results.
   D. interprofessional assessment.

4. A cause of nociceptive pain is:
   A. nerve compression.
   B. Parkinson’s disease.
   C. chronic low back pain.
   D. post-herpetic neuralgia.

5. M.B. scored a total of 21 on the PEG scale. The score to guide his pain treatment plan is:
   A. 1.
   B. 3.
   C. 5.
   D. 7.

6. A focus of M.B.’s treatment plan would be:
   A. initiating acetaminophen.
   B. further testing.
   C. agreement on treatment goals.
   D. offering pain medication options.
7. The recommended guideline for first-line therapy for older patients with mild-to-moderate pain is:
   A. gabapentin.
   B. acetaminophen.
   C. naproxen.
   D. tramadol.

8. The class of drugs to treat older patients' pain at the lowest dose and for the shortest amount of time possible is:
   A. oral nonsteroidal anti-inflammatory drugs.
   B. analgesic medication combinations.
   C. opioid agents.
   D. steroid agents.

9. An effort to mitigate the problem of opioid misuse/abuse is:
   A. decreasing law enforcement efforts that target “pill mills.”
   B. educational initiatives delivered in churches and addiction support groups.
   C. release of opioid prescribing guidelines by state medical societies.
   D. implementation of overdose education and naloxone distribution programs.

10. The class of drugs shown to provide some benefit for older adults with neuropathic pain is:
    A. serotonin norepinephrine reuptake inhibitors.
    B. anti-inflammatory.
    C. muscle relaxants.
    D. narcotics.

11. A core aspect of managing pain in older adults is:
    A. conducting brief pain assessments for severity/intensity of pain.
    B. educating patients and family members that older adults are likely to have their pain treated.
    C. inquiring about and addressing patient-level barriers to pain care.
    D. suggesting that patients have the option of monitoring treatment outcomes.

12. In older adults, symptoms of substance abuse or dependence may be less evident because:
    A. cognition may be affected.
    B. role performance is limited.
    C. monitoring guidelines are designed for those younger than 50.
    D. tolerance of specific drugs is difficult to assess.

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