

Week 5 quiz

1. A patient on canagliflozin therapy reports symptoms of postural hypotension and dizziness, especially when standing up. What action should the healthcare provider take?

- A. Continue canagliflozin and monitor symptoms.
- B. **Decrease the dosage of canagliflozin.**
- C. Increase the dosage of canagliflozin.
- D. Discontinue canagliflozin and initiate insulin therapy.

2. A patient with type 2 diabetes mellitus and a history of cardiovascular disease is scheduled for elective surgery. The patient is currently on metformin and a sulfonylurea but has suboptimal glycemic control. The nurse practitioner plans to add a GLP-1 receptor agonist to the patient's regimen. What additional benefit does the nurse anticipate from adding a GLP-1 receptor agonist to the treatment plan?

- A. Weight gain
- B. **Cardiovascular risk reduction**
- C. Hypoglycemia
- D. Liver function improvement

3. A patient with type 2 diabetes is prescribed repaglinide (a meglitinide) and reports difficulty adhering to a strict meal schedule. How should the healthcare provider address this concern?

- A. Discontinue oral antidiabetic therapy and start insulin
- B. Switch to a sulfonylurea with a longer duration of action
- C. **Advise the patient to take repaglinide only when meals can be guaranteed.**
- D. Increase the dose of repaglinide to compensate for missed meals

4. A newborn is diagnosed with congenital hypothyroidism shortly after birth. Treatment is initiated within the first week of life. What is the expected outcome of early treatment initiation?

- A. **Normal physical and mental development**
- B. Delayed initiation of treatment is required for optimal outcomes
- C. Permanent disability despite treatment
- D. Partial improvement in symptoms

5. A patient with type 2 diabetes presents with signs of hypoglycemia, including fatigue and profuse sweating. The patient has normal renal function. What is the most appropriate action for the healthcare provider?