

Week 7 quiz

1. A patient with a long-standing history of gastroesophageal reflux disease has been using histamin-2 receptor antagonist for symptom management despite therapy, the patient's symptoms persist. What is the next appropriate step in medication management?
 - A. Continue the same dose of histamin-2 receptor antagonists
 - B. Add a proton pump inhibitor to the regimen
 - C. Switch to sucralfate
 - D. Increase the dose of the current histamin-2 receptor antagonists

2. A patient with IBS treated with a laxative but experiences severe constipation. What action should the prescriber take?
 - A. Discontinue alostron and switch to loperamide
 - B. Add a bulk forming agent to the treatment regimen
 - C. Increase the dose of alostron
 - D. Refer the patient to the gastroenterologist for further evaluation.

3. A patient in her first trimester experienced severe nausea and vomiting. What is the first-line therapy for managing her symptoms?
 - A. Doxylamine plus vitamin B6
 - B. Ondansetron
 - C. THC
 - D. Metoclopramide

4. A patient with a history of peptic ulcer disease is being treated with NSAIDs for an unrelated condition, given the increased risk for NSAID-induced ulcers, which medication would be the most appropriate choice for cytoprotective therapy?
 - A. Sucralfate
 - B. Proton Pump Inhibitors
 - C. Ranitidine
 - D. Misoprostol

5. Which interaction occurs with proton pump inhibitors that result in?
 - A. Decreased absorption of thiazide diuretics
 - B. Enhance antiplatelet effects of clopidogrel
 - C. Reduce absorption of calcium carbonate
 - D. Increased absorption of atazanavir

6. A patient with Crohn's disease is treated with systemic glucocorticoid. Which adverse effect is commonly associated with the long-term use of glucocorticoids in the treatment of IBD?
 - A. Adrenal suppression
 - B. Pancreatitis
 - C. Hypertension
 - D. Hemolytic anemia