1. A drug has only one generic name but can have many trade names
   a. True
   b. False

2. Interpret the following abbreviations
   a. NPO NOTHING BY MOUTH
   b. PEFR PEAK EXPIRATORY FLOW RATE
   c. q.s. QUANTITY SUFFICIENT
   d. BID TWICE A DAY
   e. a.c. BEFORE MEALS
   f. PRN AS NECESSARY, WHEN NEEDED

3. Name three types of nebulizers used to give aerosolized medications
   SMALL VOLUME NEBULIZERS, ULTRASONIC NEBULIZERS, LARGE VOLUME NEBULIZERS

4. Name two ways to properly confirm patient identification prior to administering a medication.
   PATIENT ID BAND & ASK THE PATIENT

5. What do the initials PDR stand for? PHYSICIAN DESK REFERENCE

6. Side effects such as palpitations, tremors, nausea, vomiting are also called ADVERSE REACTIONS.

7. Using a mathematical formula, differentiate between an additive effect, synergism and potentiation.
   ADDITIVE EFFECT: 1+1=2
   SYNERGISM: 1+1=3
   POTENTIATION: 1+0=2

8. Name the two trade names of albuterol
   a. PROVENTIL
   b. VENTOLIN

9. A rapidly developing tolerance with repeated dosages of a drug is often seen in Status Asthmaticus and is called TACHYPHYLAXIS.

10. List four routes of aerosol delivery
    a. NEBULIZERS (SMALL VOLUME, LARGE VOLUME, ULTRASONIC)
    b. IPPB (WITH INTEGRATED NEBULIZER)
    c. METERED DOSE INHALER
    d. DRY POWDER INHALER
11. What is the best way to prevent the spread of nosocomial infection? **WASH YOUR HANDS.**

12. A parenteral route of drug administration in children is intraosseous injection. This implies the drug would be injected into the **ANTEROMEDIAL ASPECT OF THE TIBIA.**

13. What does parenteral mean? **TAKEN INTO THE BODY IN A MANNER OTHER THAN THROUGH THE DIGESTIVE CANAL.**

14. An inactive substance resembling a medication that is given experimentally or for its psychological effects is called a **PLACEBO.**

15. An emetic is a substance that **INDUCES VOMITING.**

16. A drug or chemical that binds to a corresponding receptor (has affinity) and initiates a cellular effect or response (has efficacy) is called an **AGONIST.**

17. What are the steps you should take if your patient has an adverse reaction to a medication you are delivering?
   
   a. **STOP THE TREATMENT IMMEDIATELY!**
   b. **STAY WITH THE PATIENT AND NOTIFY THE NURSE.**
   c. **WHEN THE PATIENT IS OUT OF IMMEDIATE DANGER, CONTACT YOUR CLINICAL INSTRUCTOR/PRECEPTOR AND THE PHYSICIAN.**
   d. **DOCUMENT THE ADVERSE REACTION (INCLUDE ALL SIGNS/SYMPTOMS THE PATIENT IS EXPERIENCING), THE PATIENTS CONDITION AT THE TIME YOU LEFT THE ROOM (VITAL SIGNS); PERSONNEL YOU CONTACTED; ANY ORDER CHANGES FROM THE PHYSICIAN IF THE PHYSICIAN CHANGED THE MEDICATION ORDER, DOCUMENT ALL CHANGES ON THE RESPIRATORY TREATMENT SHEETS REPORT THE INCIDENT AT CHANGE OF SHIFT; DISCUSS WITH NEXT THERAPIST TAKING CARE OF THE PATIENT.**

18. A drug with a high therapeutic index needs to be monitored more closely than a drug with a low therapeutic index
   
   a. **True**
   b. **False**

19. Giving two similar drugs in which the combined effect is 1+1 = 5 is an example of **SYNERGISM.**

20. Which pulmonary function measurement is commonly measured at the bedside to assess response after administration of a bronchodilator? **PEAK FLOW (FEV<sub>1</sub> IS SOMETIMES ALSO USED).**

21. What does it mean if a drug is teratogenic? **A DRUG’S POTENTIAL TO DAMAGE A FETUS IN UTERO WHEN GIVEN TO PREGNANT WOMEN.**

22. What do the initials “Rx” mean? **PRESCRIPTION OR “TAKE”**