

“Implementing Pain Management Services in Pharmacy Practice”
Instructor Key

1. Chronic pain is:

- a. Seriously undertreated.
- b. Adequately treated by most primary care physicians.
- c. A rare condition.
- d. Affects 10 million Americans every year.

Correct: a. Undertreated pain is widespread and considered a major public health problem.

Incorrect:

- b. Many patients have reported great difficulty getting adequate pain relief from their primary care physicians.
- c and d. It is not rare, affecting 50 million Americans per year.

2. The primary reason that people go to the doctor is:

- a. The common cold.
- b. Pain.
- c. Physical examinations.
- d. Allergies.

Correct: b.

3. Unrelieved pain can:

- a. Cause weight gain.
- b. Decrease heart rate.
- c. Alter neurotransmission signals.
- d. Cause excessive drowsiness.

Correct: c.

Incorrect:

Answers a, b, and d are opposite of the metabolic effects caused by pain: weight loss, increased heart rate, sleep interference.

4. Factors contributing to undertreatment of pain include:

- a. Fear of regulatory oversight.
- b. Patients' exaggeration of their pain.
- c. Lack of effective medications.
- d. Lack of accreditation requirements for pain management.

Correct: a. Nearly one quarter of physicians responding to a survey said they limit the amount of pain medication they prescribe to avoid regulatory investigation.

Incorrect:

- b. Although some doctors believe their patients are exaggerating the severity of the pain, in fact patients' description of their pain is a reliable indicator.
- c. There are a wide range of effective medications, from over-the-counter preparations to opioids.
- d. The Joint Commission on Accreditation of Healthcare Organizations now has standards for pain management that institutions must meet in order to be accredited and to receive reimbursement from government health programs.

5. Physical dependence on an opioid:

- a. Is a chronic neurobiologic condition.
- b. Is a state in which withdrawal symptoms will occur if the drug is stopped.
- c. Is a warning sign that addiction is developing.
- d. Occurs when patients are undertreated for their pain.

Correct: b. Withdrawal can occur when the drug is stopped or the dose is reduced. It is a natural adaptation.

Incorrect:

- a. Addiction is a chronic neurobiologic condition; physical dependence is a state of adaptation.
- c. Physical dependence is not a sign of developing addiction.
- d. Behaviors exhibited by patients who are undertreated is called pseudoaddiction.

6. Studies have shown that pharmaceutical care programs:

- a. Help patients with high blood pressure to meet their goals.
- b. Save money for hospitals when pharmacists review charts and make rounds.
- c. Reduce adverse reactions to prescribed medications.
- d. All of the above.

Correct: d.

7. One of the goals of a pharmacy-based pain management service is to:

- a. Identify and resolve drug-related problems.
- b. Reduce the cost of prescription drugs.
- c. Prevent addiction to opiates.
- d. Reduce the use of dietary supplements for pain relief.

Correct: a.

Incorrect:

Answers b, c, and d are not stated goals of pain management programs.

8. Pharmacists practicing in states that do not allow them prescriptive authority:

- a. Cannot operate a pain management service.
- b. May not consult with physicians about a prescribed medication.
- c. Have many opportunities for providing pharmaceutical care for pain management.
- d. Can only manage pain medications in a hospital or hospice.

Correct: c.

Incorrect: a, b, and d. Pharmacists in these states can perform all pertinent services except prescribing medications.

9. Factors to consider when planning a pharmacy pain management service include:

- a. How closely local law enforcement monitors prescription of controlled substances.
- b. Whether the community hospital(s) meets JCAHO standards for pain management.
- c. How many patients/customers would benefit from such a service.
- d. The success of a colleague's pain management service.

Correct: c. You want to be sure that you have a sufficient base for such a program and can identify those who might benefit.

Incorrect:

- a and b. It is not related to law enforcement activities or accreditation of hospitals.
- d. Each pharmacist brings his own talents and abilities to his program; for example, you might be better trained in pain management, have better relationships with prescribing physicians than the colleague, etc.

10. The rewards from operating a successful pharmacy-based pain management service include:

- a. Excessive profits.
- b. Entrée into pharmacy benefits management companies.
- c. Gratitude of patients.
- d. Recognition by local medical associations.

Correct: c.

Incorrect:

- a. While some pharmacies may achieve an economic benefit, it is not likely to be major.

b and d. Relationships with pharmacy benefit management companies or awards from local medical associations are not commonly associated with operating a pain management service.