Davis's Drug Guide for Nurses 20th edition Sanoski Test Bank

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Drug Guide Test Bank

MULTIPLE CHOICE

1. A nurse is caring for a 14-yr-old patient with epilepsy. The child takes phenytoin (Dilantin) and began taking lamotrigine (Lamictal) 50 mg/day approximately 10 days ago. The child's mother calls to report a newly noted rash across the girl's face and arms. Which of the following responses by the nurse is best?
   A. "Did your daughter use a new soap?"
   B. "Has your daughter been exposed to poison ivy or other plant irritants?"
   C. "Do not give her Lamictal; your daughter will need to be seen by the doctor today."
   D. "This is commonly seen with Lamictal. A mild soap and calamine lotion may reduce any itching."

ANS: C
See Nursing Implications/Assessment for lamotrigine: Assess patient for skin rash frequently during therapy. Discontinue lamotrigine at first sign of rash; it may be life-threatening. Stevens-Johnson syndrome or toxic epidermal necrolysis may develop. The rash usually occurs during the initial 2–8 wk of therapy; is more frequent in patients taking multiple antiepileptic agents, especially valproic acid; and is much more frequent in patients <16 yr.

KEY: Cognitive Level: Application [Applying]
DIF: Moderate
TOP: Therapeutic Classification: Anticonvulsants

2. The nurse receives a call from an 82-yr-old patient with advanced prostate cancer who is being treated with leuprolide (Eligard) therapy. Which of the following questions requires immediate notification of the physician?
   A. "I've been having hot flashes lately. What should I do?"
   B. "The pain in my bones seems worse since I started this medication. Is that normal?"
   C. "I forgot to get my shot 3 hours ago like I usually do, so I was going to take it now. Is that okay?"
   D. "My legs feel numb and weak. Is that normal with this medication?"

ANS: D
See Patient/Family Teaching for leuprolide: Instruct patient to notify a health care provider promptly if difficulty urinating, weakness, or numbness occurs. Advise patient that medication may cause hot flashes. Advise patient that bone pain may increase at initiation of therapy. This will resolve with time. Instruct patient to take medication exactly as directed. If a dose is missed, take as soon as remembered unless not remembered until next day.

KEY: Cognitive Level: Analysis [Analyzing]
DIF: Moderate
TOP: Therapeutic Classification: Antineoplastics

Davis's Drug Guide for Nurses 20th edition Sanoski Test Bank

3. The nurse is caring for a woman with metastatic breast cancer who was recently admitted with hypercalcemia. Which of the following medications does the nurse anticipate would be included in the treatment plan?
   A. Zoledronic acid (Zometa)
   B. Calcium carbonate (Os-Cal)
   C. Octreotide (Sandostatin)
   D. Aprepitant (Emend)

ANS: A
See Indications and Actions for zoledronic acid: Zometa is used in the treatment of hypercalcemia of malignancy. It inhibits bone resorption by inhibiting increased osteoclast activity and skeletal calcium release induced by tumors. Therapeutic effects include decreased serum calcium. Os-Cal is a calcium supplement and should be avoided if the patient's serum calcium level is too high. Sandostatin is used in the treatment of severe diarrhea, including that caused by carcinoid tumors. Emend is used in the treatment of nausea/vomiting during chemotherapy.

KEY: Cognitive Level: Application [Applying]
DIF: Moderate
TOP: Therapeutic Classification: Bone resorption inhibitors, Electrolyte modifiers, Hypocalcemics

4. The nurse is providing care for a 92-yr-old patient who has a standing order for zolpidem (Ambien) prn for insomnia. When providing the medication for the patient as requested, which of the following actions by the nurse is best?
   A. Inform the patient the medication will work within 10 min.
   B. Ensure the patient is in bed and ready for sleep; then raise the bedside rails.
   C. Instruct the patient to eat some crackers to reduce stomach irritation caused by the medication.
   D. Suggest the patient take the medication routinely every night.

ANS: B
See Patient/Teaching for zolpidem: Because of rapid onset, advise patient to go to bed immediately after taking zolpidem. Onset of action is 30 min or more and is increased in geriatric patients and patients with hepatic impairment. Do not administer with or immediately after a meal, as food slows absorption. Due to the habit-forming nature of this medication, it should not be used for more than 7–10 days.

KEY: Cognitive Level: Application [Applying]
DIF: Moderate
TOP: Therapeutic Classification: Sedatives/Hypnotics

5. The nurse is caring for a patient with multiple medications, including carbidopa/levodopa (Sinemet) qid. The nurse knows this medication is effective by which of the following signs or symptoms?
   A. The patient has fewer hand tremors.
   B. The patient's apical pulse is regular.
   C. The patient has less edema in the ankles bilaterally.
   D. The patient's cough is well controlled.

Davis's Drug Guide for Nurses 20th edition Sanoski Test Bank

ANS: A
See Evaluation/Therapeutic Effect for carbidopa/levodopa: Effects include resolution of parkinsonian signs and symptoms. Therapeutic effects usually become evident after 2–3 wk of therapy but may require up to 6 mo. The medication is not intended to regulate heart rate, edema, or a cough.

KEY: Cognitive Level: Analysis [Analyzing]
DIF: Moderate
TOP: Therapeutic Classification: Antiparkinsonian agents

6. While caring for a patient who is taking levofloxacin po 750 mg daily, the nurse would be most concerned by which of the following symptoms?
   A. Patient has edema of ankles.
   B. Patient complains of a headache.
   C. Patient has had two loose bowel movements.
   D. Patient has a severe, widespread cutaneous rash.

ANS: D
See Adverse Reactions/Side Effects for levofloxacin: Severe, widespread cutaneous rash may be a warning of Stevens-Johnson syndrome. If it is accompanied with fever, fatigue, blisters, oral lesions, etc., the medication should be discontinued. Diarrhea and headache may be experienced but would not be of greatest concern. Edema is not an adverse reaction of levofloxacin.

KEY: Cognitive Level: Analysis [Analyzing]
DIF: Difficult
TOP: Therapeutic Classification: Anti-infectives

7. The nurse prepares to provide ondansetron (Zofran) in an orally disintegrating tablet form. Which of the following instructions should the nurse provide?
   A. "Simply suck on the pill like a lozenge, and it will dissolve over a few minutes."
   B. "Place the tablet on your tongue. It will melt in seconds and then you can swallow."
   C. "Take this with a full glass of water."
   D. "I will dissolve this in some water, and you can drink it in one sip."

ANS: B
See Implementation for ondansetron: Immediately place tablet on tongue. It will dissolve in seconds, then can be swallowed with saliva.

KEY: Cognitive Level: Application [Applying]
DIF: Easy
TOP: Therapeutic Classification: Antiemetics

Davis's Drug Guide for Nurses 20th edition Sanoski Test Bank

8. The nurse is caring for a patient who is to receive oxcarbazepine (Trileptal). The nurse recognizes this patient most likely has a history of which of the following?
   A. Diabetes mellitus
   B. Depression
   C. Seizures
   D. Hypothyroidism

ANS: C
See Indications for oxcarbazepine: Used as monotherapy or adjunctive therapy of partial seizures in adults and children 4 yr and older with epilepsy. Oxycarbazepine is not indicated for the treatment of diabetes mellitus, depression, or hypothyroidism.

KEY: Cognitive Level: Knowledge [Remembering]
DIF: Moderate
TOP: Therapeutic Classification: Anticonvulsants

9. The nurse is caring for a patient receiving pamidronate (Aredia) for the treatment of Paget disease. Which of the following symptoms would be most concerning to the nurse?
   A. Anorexia
   B. Bone pain
   C. Constipation
   D. Muscle twitching

ANS: D
See Side Effects and Assessment for pamidronate: Observe for evidence of hypocalcemia (paresthesia, muscle twitching, laryngospasm, and Chvostek or Trousseau sign).

KEY: Cognitive Level: Application [Applying]
DIF: Moderate
TOP: Therapeutic Classification: Bone resorption inhibitors

10. A student nurse caring for a patient who is taking pancrelipase (Creon) would include which of the following statements when reviewing medications with the instructor?
   A. "This reduces inflammation of the pancreas seen with pancreatitis."
   B. "This increases absorption of fats since the pancreas is not excreting normal enzymes."
   C. "This is used to bind with proteins and reduce protein excretion in the urine."
   D. "This helps relieve abdominal pain caused by liver damage in patients with a history of alcohol abuse."

ANS: B
See Action/Therapeutic Effect for pancrelipase: Effects include increased digestion of fats, carbohydrates, and proteins in the GI tract.

KEY: Cognitive Level: Application [Applying]
DIF: Moderate
TOP: Therapeutic Classification: Digestive agents

Davis's Drug Guide for Nurses 20th edition Sanoski Test Bank

11. Which of the following would cause the nurse to intervene for a patient taking po pantoprazole (Protonix)?
    A. The patient takes the medication 1 hr before breakfast.
    B. The patient orders eggs and bacon for breakfast.
    C. The patient drinks a glass of orange juice when taking the medication.
    D. The patient chews the medication before swallowing.

ANS: D
See Implementation for pantoprazole: The drug may be taken with or without food, but do not break, crush, or chew tablets.

KEY: Cognitive Level: Application [Applying]
DIF: Moderate
TOP: Therapeutic Classification: Antiulcer agents

12. Which of the following lab values should be followed periodically for a patient taking paroxetine (Paxil)?
    A. Complete blood count (CBC)
    B. Electrolytes
    C. Thyroxine
    D. Creatinine

ANS: A
See Assessment/Lab Test Considerations for paroxetine: Lab Test Considerations: Monitor CBC and differential periodically during therapy. Report leukopenia or anemia.

KEY: Cognitive Level: Knowledge [Remembering]
DIF: Difficult
TOP: Therapeutic Classification: Antianxiety agents, Antidepressants

13. While caring for a patient who uses oral birth control pills and is taking po penicillin V, which of the following instructions should the nurse include in the patient teaching?
    A. "You should stop taking your birth control pills for at least 3 months because you have to take this medication."
    B. "You will need to use a barrier method of birth control through this therapy and until your next menstrual cycle."
    C. "The doctor will want to give you a hormone patch in addition to the birth control pills for the next 30 days."
    D. "There is no need to alter your method of birth control while you are taking this medication."

ANS: B
See Patient/Family Teaching for penicillin V: Advise patient taking oral contraceptives to use an additional nonhormonal method of contraception during therapy with penicillin and until next menstrual period.

Davis's Drug Guide for Nurses 20th edition Sanoski Test Bank

KEY: Cognitive Level: Application [Applying]
DIF: Moderate
TOP: Therapeutic Classification: Anti-infectives

14. The nurse is caring for a 32-yr-old female patient with cystic fibrosis who will be discharged today with a prescription for elexacaftor/tezacaftor/ivacaftor (Trikafta). Which of the following information should the nurse provide concerning this drug?
    A. Have regular eye examinations.
    B. Be aware of the risk of DVT.
    C. Avoid fat-containing foods with medication.
    D. Notify health care provider of bloody stools.

ANS: A
See Assessment and Patient/Family Teaching for elexacaftor/tezacaftor/ivacaftor: Eye exams will be important to assess for cataracts/opacities prior to and periodically during therapy. The medication should be administered with fat-containing food. There are no indicators for DVT or bloody stools.

KEY: Cognitive Level: Application [Applying]
DIF: Moderate
TOP: Therapeutic Classification: Cystic fibrosis therapy adjuncts

15. The nurse would be most concerned if a patient taking phenobarbital reported daily consumption of which of the following?
    A. Grapefruit juice
    B. Beer
    C. Milk
    D. Coffee

ANS: B
See Patient/Family Teaching for phenobarbital: Caution patient to avoid taking alcohol or other central nervous system depressants concurrently with this medication.

KEY: Cognitive Level: Application [Applying]
DIF: Moderate
TOP: Therapeutic Classification: Anticonvulsants

16. A student nurse caring for a patient with a history of anxiety disorder would expect which of the following medications to be included in the patient's treatment plan?
    A. Eszopiclone (Lunesta)
    B. Meclizine (Bonine)
    C. Lorazepam (Ativan)
    D. Ondansetron (Zofran)

Davis's Drug Guide for Nurses 20th edition Sanoski Test Bank

ANS: C
See Indications for lorazepam: Lorazepam is an antianxiety agent. Eszopiclone is a sedative/hypnotic. Meclizine is provided for vertigo. Ondansetron is an antiemetic.

KEY: Cognitive Level: Application [Applying]
DIF: Moderate
TOP: Therapeutic Classification: Antianxiety agents

17. The nurse is caring for a patient who is NPO after midnight for a cardiac catheterization scheduled for 1 PM. The patient normally receives metformin (Glucophage) 1000 mg po bid, and the morning dose is due at 8:30 AM. The patient's blood glucose result was 115. Which of the following actions should the nurse take?
    A. Hold the medication.
    B. Give the medication with a glass of juice.
    C. Give the medication with a sip of water.
    D. Call the physician for direction.

ANS: A
See Implementation for metformin: Because the patient is NPO, the medication should be held and blood sugars should be monitored frequently. Patients stabilized on a diabetic regimen who are exposed to stress, fever, trauma, infection, or surgery may require administration of insulin. Withhold metformin and reinstitute after resolution of an acute episode.

KEY: Cognitive Level: Analysis [Analyzing]
DIF: Moderate
TOP: Therapeutic Classification: Antidiabetics

18. The nurse is caring for a patient with a known history of narcotic abuse. The patient is started on methadone 30 mg po daily during detoxification. Which of the following assessments would indicate the patient's dose may need to be decreased?
    A. Chills
    B. Irritability
    C. Respirations = 8 breaths per min
    D. Diaphoresis

ANS: C
See Assessment for methadone: If respiratory rate is less than 10 breaths per min, assess level of sedation. Dose may need to be decreased by 25–50%. Chills, irritability, and diaphoresis are all symptoms of narcotic withdraw and may be expected during detoxification.

KEY: Cognitive Level: Application [Applying]
DIF: Easy
TOP: Therapeutic Classification: Opioid analgesics

Davis's Drug Guide for Nurses 20th edition Sanoski Test Bank

19. A nurse working on the postpartum floor is checking orders and notes the following: "Methylergonovine (Methergine) 200 mcg po every 6 hr for 48 hr." Which of the following nursing interventions should be added to the patient's plan of care?
    A. Assess respiratory rate and rhythm every 2 hr.
    B. Monitor for signs of uterine atony or change in menstrual bleeding.
    C. Instruct patient to wear a tight-fitting bra and avoid facing the water during shower.
    D. Collect urine for protein dipstick every 4 hr.

ANS: B
See Assessment for methylergonovine: Used in the treatment of postpartum hemorrhage. Monitor blood pressure, heart rate, and uterine response frequently during medication administration.

KEY: Cognitive Level: Application [Applying]
DIF: Moderate
TOP: Therapeutic Classification: Oxytocics

20. While preparing to discharge a patient who has started taking a selective beta blocker during hospitalization, the nurse recognizes further teaching is necessary by which of the following patient statements?
    A. "I should take my pulse every day before taking this medication."
    B. "I need to stay on a low-salt diet to help control my blood pressure."
    C. "I'll have to have my blood drawn frequently to monitor for toxic levels of this medication."
    D. "I should contact the physician immediately if I notice any wheezing, difficulty breathing, or dizziness."

ANS: C
See Patient/Family Teaching for beta blockers (selective): Blood levels are not followed for this medication. Teach patient and family how to check pulse daily and blood pressure biweekly, and to report significant changes to a health care provider. Reinforce the need to continue additional therapies for hypertension (weight loss, sodium restriction, stress reduction, regular exercise, moderation of alcohol consumption, and smoking cessation). Advise patient to notify health care provider if slow pulse, difficulty breathing, wheezing, cold hands and feet, dizziness, light-headedness, confusion, depression, rash, fever, sore throat, unusual bleeding, or bruising occurs.

KEY: Cognitive Level: Analysis [Analyzing]
DIF: Moderate
TOP: Therapeutic Classification: Antihypertensives, Antianginals

21. The nurse is providing care for a patient in hospice who has been converted to a continuous infusion of morphine for pain control via the use of a patient-controlled analgesia pump. The nurse recognizes that breakthrough pain should be handled in which of the following ways?
    A. No breakthrough pain is expected because the patient is on a continuous infusion of narcotic.
    B. Additional intravenous bolus doses can be given by the nurse every 15–30 min.
    C. Additional predetermined bolus doses can be programmed to be available at patient request every 90 min.
    D. Oral morphine can be given in liquid form every 2 hr.

Davis's Drug Guide for Nurses 20th edition Sanoski Test Bank

ANS: B
See Assessment for morphine: Patients on a continuous infusion should have additional bolus doses provided every 15–30 min, as needed, for breakthrough pain.

KEY: Cognitive Level: Application [Applying]
DIF: Moderate
TOP: Therapeutic Classification: Opioid analgesics

22. A nurse is caring for a 20-yr-old female patient in a physician's office. The patient has been medicated for bipolar disorder and depression for over 5 yr. She is currently complaining of "odd movements in my face and tongue that I can't control." The nurse expects the patient will be prescribed which medication?
    A. Valbenazine (Ingrezza)
    B. Lorazepam (Ativan)
    C. Citalopram (Celexa)
    D. Lurasidone (Latuda)

ANS: A
See Indications for valbenazine: Indicated for tardive dyskinesia symptoms such as uncontrolled rhythmic movement of mouth, face, lip smacking, puckering, and worm-like tongue movements. Citalopram is a selective serotonin reuptake inhibitor used in the treatment of depression. Lorazepam is an antianxiety medication used in the treatment of anxiety disorders, status epilepticus, and preanesthetic sedation and amnesia. Lurasidone is an antipsychotic used in the treatment of schizophrenia.

KEY: Cognitive Level: Comprehension [Understanding]
DIF: Moderate
TOP: Therapeutic Classification: None assigned

23. The nurse is caring for an infant with oral thrush whose medications include nystatin suspension 5 mL qid. Which of the following actions should the nurse take?
    A. Dilute the medication in 30 mL of water and provide it to the infant in a bottle.
    B. Use a needleless syringe to gently squirt small amounts into the baby's mouth.
    C. Dip a pacifier into the medication and allow the infant to suck on the pacifier; repeat until the dose is consumed.
    D. Use a cotton swab to paint the inside of the infant's cheeks, gums, and tongue.

ANS: D
See Implementation for nystatin: For neonates and infants, paint suspension into recesses of the mouth.

KEY: Cognitive Level: Application [Applying]
DIF: Moderate
TOP: Therapeutic Classification: Antifungals

Davis's Drug Guide for Nurses 20th edition Sanoski Test Bank

24. The nurse is caring for a patient who recently started taking prochlorperazine (Compro) 10 mg po qid. Which of the following symptoms would cause the nurse to contact the physician immediately?
    A. Temperature = 104.5°F, and there is a new onset of urinary incontinence.
    B. Pulse = 70 bpm, and patient complains of constipation.
    C. Blood pressure = 126/64 mmHg, and patient complains of hiccups.
    D. Respirations = 16 per min, and patient reports mild nausea.

ANS: A
See Assessment for prochlorperazine: Monitor for development of neuroleptic malignant syndrome (fever, respiratory distress, tachycardia, seizures, diaphoresis, hypertension or hypotension, pallor, tiredness, severe muscle stiffness, and loss of bladder control). Notify physician or other health care provider immediately if these symptoms occur. Constipation is a known side effect with this medication and the pulse is normal. Blood pressure is within normal limits. Hiccups are not immediately concerning. Respirations are within normal parameters. Prochlorperazine is taken for nausea, so mild nausea may be expected.

KEY: Cognitive Level: Analysis [Analyzing]
DIF: Moderate
TOP: Therapeutic Classification: Antiemetics, Antipsychotics

25. To monitor the peak efficacy after providing oral hydromorphone (Dilaudid) Immediate Release for a patient reporting pain ranked 6 out of 10 on a numeric pain scale, the patient should report some relief in pain at the peak action of the drug. Which of the following reflects the peak action of Dilaudid Immediate Release?
    A. 15–30 min
    B. 30–90 min
    C. 1–2 hr
    D. Over 2 hr

ANS: B
See Pharmacokinetics for hydromorphone: The peak action for this medication is 30–90 min.

KEY: Cognitive Level: Comprehension [Understanding]
DIF: Moderate
TOP: Therapeutic Classification: Opioid analgesics

26. A patient who is prescribed a nonselective beta blocker is being tapered off over a 2-wk period. The nurse would include which of the following statements in the patient teaching?
    A. "I bet you're glad to be getting off this medication since it can have so many side effects."
    B. "Stopping this medication suddenly can be very dangerous, so it is important that you follow the taper schedule carefully."
    C. "Patients usually only take this drug for a 1- to 2-week cycle before switching to another medication."
    D. "By slowly weaning you from this drug, the risk of rebound headaches is reduced."

Davis's Drug Guide for Nurses 20th edition Sanoski Test Bank

ANS: B
See Assessment for beta blockers (nonselective): Abrupt withdrawal may precipitate life-threatening arrhythmias, hypertension, or myocardial ischemia. Drug should be tapered off over a 2-wk period before discontinuation. Assess patient carefully during tapering and after medication is discontinued. Consider that patients taking propranolol for noncardiac indications may have undiagnosed cardiac disease. Abrupt discontinuation or withdrawal over too short a period of time (less than 9 days) should be avoided. While the drug can have many adverse effects, it is not the highest priority.

KEY: Cognitive Level: Comprehension [Understanding]
DIF: Moderate
TOP: Therapeutic Classification: Antianginals, Antiarrhythmics (Class II), Antihypertensives, Vascular headache suppressants

27. A patient with plaque psoriasis is being started on apremilast (Otezla). Prior to starting therapy, the nurse should ask the patient which question?
    A. "Do you have a history of frequent urinary tract infections?"
    B. "Have you ever given yourself an injection?"
    C. "Have you ever been treated for depression?"
    D. "Do you have an allergy to sulfa medications?"

ANS: C
See Contraindications/Precautions and Assessment for apremilast: Use cautiously with a history of depression or suicidal ideation. Monitor mental status for signs and symptoms of depression frequently. Assess for suicidal tendencies, especially during early therapy. It does not contribute to urinary tract infections. It is given orally, not subcutaneously. It is not contraindicated with sulfa allergies.

KEY: Cognitive Level: Application [Applying]
DIF: Moderate
TOP: Therapeutic Classification: Antirheumatics, Antipsoriatics

28. While caring for a 47-yr-old female patient with multiple sclerosis, the nurse provides teaching concerning a drug ordered before discharge. The patient has been ordered teriflunomide (Aubagio). The nurse recognizes the need for further teaching by which of the following patient statements?
    A. "I will need a TB skin test prior to starting this medication."
    B. "I won't need any blood work with this medication like I do with my seizure medication."
    C. "I will notify the physician if I have numbness and tingling in my hands and feet."
    D. "I understand I may have hair loss while taking this drug."

ANS: B
See Implementation and Patient/Family Teaching for teriflunomide: Complete blood count and platelets are monitored periodically. Liver function tests must be monitored monthly. A tuberculin (TB) skin test is required prior to starting teriflunomide. Numbness and tingling in hands and feet are side effects that should be reported to the physician. Teriflunomide can cause hair loss.

KEY: Cognitive Level: Analysis [Analyzing]
DIF: Difficult
TOP: Therapeutic Classification: Anti-multiple sclerosis agents

Davis's Drug Guide for Nurses 20th edition Sanoski Test Bank

29. A patient taking ergocalciferol (vitamin D_2) calls the physician's office at 3 PM and tells the nurse that she is at work and did not take the pill at breakfast. Which of the following responses by the nurse is best?
    A. "You should take the missed dose as soon as possible."
    B. "Missing a single dose is not critical."
    C. "Why didn't you take the medication?"
    D. "How often do you miss a dose of this medication?"

ANS: A
See Patient/Family Teaching for ergocalciferol: Instruct patient to take medication as directed. If a dose is missed, take as soon as remembered that day. Missing a dose is not critical but is not the best answer. Asking why the medication was not taken or how often the medication is missed does not provide the patient with instruction on what to do.

KEY: Cognitive Level: Application [Applying]
DIF: Moderate
TOP: Therapeutic Classification: Vitamins

30. The nurse is caring for a patient with tuberculosis who is on a diet with honey-thick liquids. Which action should the nurse take to administer the dose of rifampin (Rimactane)?
    A. Obtain the medication in liquid form.
    B. Give the pill with a small sip of water.
    C. Call the pharmacy to request a parenteral dose.
    D. Open the capsule onto a spoonful of applesauce.

ANS: D
See Implementation for rifampin: Capsules may be opened and contents mixed with applesauce or jelly for patients with difficulty swallowing. While the pharmacist can compound a syrup for patients unable to swallow solids, this patient has difficulty swallowing liquids. If honey-thick liquids are ordered, nonthickened water should be avoided. Parenteral therapy is not required.

KEY: Cognitive Level: Application [Applying]
DIF: Moderate
TOP: Therapeutic Classification: Antituberculars

31. A nurse working at an adult care center for individuals with mental illness provides an individual with a dose of risperidone (Risperdal). The nurse should intervene if the patient mixes the liquid medication with which of the following?
    A. Milk
    B. Cola
    C. Orange juice
    D. Water

ANS: B
See Implementation for risperidone: Oral solution can be mixed with water, coffee, orange juice, or low-fat milk. Do not mix with cola or tea.

Davis's Drug Guide for Nurses 20th edition Sanoski Test Bank