

Learner Feedback Questions #304

- Which of the following statements about PCA is true?
 - It is less effective for pain management than the IV delivery route.
 - Once a patient self-administers the allotted dose of medication for the time period, the pump will not deliver another dose.
 - If patients are sedated, they can still push the button for more medication.
 - Patients may experience opioid peaks and valleys with PCA.
- Which negative outcome of PCA did King and Walsh cite in their study?
 - patient overuse of medication
 - increased side effects of nausea and vomiting compared to alternate delivery modes
 - elderly patients could not be taught to use PCA
 - allows nurses to distance themselves from patients
- PCA by proxy:
 - constitutes a dangerous practice
 - is recommended when a patient is sedated
 - had not been shown to cause additional medication errors
 - the proxy should always be a nurse
- Which of the following drugs is the gold standard for acute and chronic pain via PCA?
 - morphine
 - sublimaze
 - hydromorphone
 - oxycodone
- With epidural PCA:
 - the procedure is safer than IV infusion
 - there is less sedation and less nausea
 - cardiac patients are at greater risk
 - there is closer monitoring by nursing staff
- Which of the following data was collected about PCA safety by ISMP in a 5-year period?
 - almost 50 percent of errors were human errors
 - of the errors reported, 6.5 percent resulted in harmful outcomes
 - children ages 10-12 had the highest number of harmful outcomes
 - there were minimal equipment-related errors reported
- If a patient attempts to activate the PCA 2 times more than doses delivered, the nurse should:
 - explain to the patient he has reached his dose maximum
 - request an order for dosage increase or a shortened dose interval
 - suggest to the physician the patient is not a good candidate for PCA
 - monitor the patient more frequently for 1 hour and then call the physician
- Which of the following is NOT a recommendation for safer PCA use?
 - assess for pain and sedation levels every 30 minutes
 - provide PCA education to patients before rather than after surgery
 - restrict fentanyl PCA use to anesthesia, critical care or pain management team
 - add basal doses in patients who are opiate-naive
- Respiratory depression in patients receiving PCA is:
 - rare
 - over 10 percent for all patients
 - high for patients over age 50
 - less than the 10 percent of patients who experience under-treatment of pain
- Hydromorphone is the PCA drug of choice for patients with:
 - diabetes
 - substance abuse
 - renal disease
 - postop cardiac surgery

Evaluation

- I can compare and contrast patients for whom patient-controlled analgesia (PCA) is appropriate versus inappropriate.
 - strongly agree
 - agree
 - neutral
 - disagree
 - strongly disagree
- I can evaluate patients for complications and risks related to PCA use.
 - strongly agree
 - agree
 - neutral
 - disagree
 - strongly disagree
- I can provide nursing interventions, including education, appropriate to the patient receiving PCA.
 - strongly agree
 - agree
 - neutral
 - disagree
 - strongly disagree
- The objectives relate to the overall goal of the article.
 - strongly agree
 - agree
 - neutral
 - disagree
 - strongly disagree
- The article is well-written and logically organized, and defines terms adequately.
 - strongly agree
 - agree
 - neutral
 - disagree
 - strongly disagree

Patient-Controlled Analgesia

Earn 1 Contact Hour NOW!

Registration/Answer Form #304

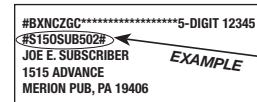
LEARNER FEEDBACK QUESTIONS

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Before **April 13, 2011**, print this page, complete the multiple choice questions by circling the correct answer and mail or fax to: *ADVANCE for Nurses*, Learning Scope, 2900 Horizon Dr., King of Prussia, PA 19406; 610-278-1426.

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