

## Learner Feedback Questions #321

- Which of the following is NOT regarded as a cardinal symptom of PD?
  - tremor
  - bradykinesia
  - rigidity
  - sleep disturbances
- All of the following are common "non-motor" symptoms of PD EXCEPT:
  - depression
  - hypertension
  - pain
  - dementia
- The gold standard of drug therapy for PD is:
  - carbidopa/levodopa (Sinemet)
  - ropinirole (Requip)
  - entacapone (Comtan)
  - rasagiline (Azilect)

- The diagnosis of PD is based largely on:
  - abnormalities of the midbrain seen on MRI imaging
  - genetics
  - environmental triggers
  - clinical symptoms and patient report

- Patients with PD should be cautious of high protein intake primarily because:
  - it may interfere with levodopa absorption
  - renal complications can occur
  - increased weight gain decreases mobility
  - increased protein reduces the liver's ability to break down all meds

- Deep brain stimulation:
  - is a viable treatment option for most PD patients
  - requires routine programming of the electrical stimulator
  - has been shown to dramatically improve gait dysfunction and postural instability
  - is only being used for patients with PD under age 50

- All of the following are appropriate treatment options for psychosis in PD EXCEPT:
  - reduction in the patient's PD medication regimen
  - clozapine (Clozaril)
  - quetiapine (Seroquel)
  - haloperidol (Haldol)

- The most critical nursing issue for patients with PD who are hospitalized is:
  - daily exercise and ambulation
  - physical therapy to prevent complications
  - individualizing medication schedules for each patient
  - increased fluids to prevent dehydration

- Motor fluctuations are best defined as:
  - the progression of parkinsonian symptoms over the course of disease
  - a phenomenon in which PD medications "wear off" and symptoms return prior to the next dose
  - gait abnormalities, such as freezing and shuffling
  - the time when medications begin to "turn on"
- The patient with PD is at risk for all of the following in the late stages of disease EXCEPT:
  - bowel impaction
  - bed sores
  - aspiration pneumonia
  - liver failure from chronic drug use

## Evaluation

- I can describe the complex symptom profile and complications of Parkinson's disease.
  - strongly agree
  - agree
  - neutral
  - disagree
  - strongly disagree
- I can discuss the treatment and management options for Parkinson's disease.
  - strongly agree
  - agree
  - neutral
  - disagree
  - strongly disagree
- I can discuss nursing strategies for Parkinson's disease care in various clinical settings.
  - 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

# Parkinson's Disease

Earn 1 Contact Hour NOW!

## Registration/Answer Form #321

### LEARNER FEEDBACK QUESTIONS

- A B C D
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### EVALUATION

- A B C D E
- A B C D E
- A B C D E
- A B C D E
- A B C D E

How many minutes did you need to complete this CE offering?

Minutes: \_\_\_\_\_

Before December 7, 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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Nursing School Student  
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 Nursing School:  
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### LPN

- Manager/Supervisor  
 Nursing Administrator  
 Nursing Faculty  
 Private Practice  
 Staff Development  
 Staff Nurse

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