

Care CEUs

Effective Pain Management Strategies

1. Which of the following best describes nociceptive pain?

- A. Pain resulting from nerve damage observed in diabetic neuropathy.
- B. Pain without a clear injury, inflammation, or disease source, typically involving chronic dysfunction of nociception.
- C. Pain occurring in response to noxious physical stimuli like touching something hot.
- D. Pain that starts suddenly with a known cause such as a surgical wound.

2. How does psychological counseling potentially help patients with pain management?

- A. It provides physical exercises to relieve pain in affected areas.
- B. It helps patients process emotional responses to pain, reducing anxiety and depression linked to increased pain.
- C. It ensures patients adhere strictly to their prescribed medication schedules.
- D. It identifies dietary changes that could alleviate pain.

3. In the context of setting pain goals with patients, why is understanding a patient's personal beliefs crucial?

- A. It allows healthcare providers to predict the exact duration of pain relief necessary.
- B. It helps in tailoring pain management strategies that align with patient expectations and cultural perceptions of pain.
- C. It ensures that patients follow the prescribed medicinal regimen without deviation.
- D. It assists in identifying potential allergies to pain medications.

4. When assessing pain, which diagnostic tool is NOT typically used to determine the type of pain a patient is experiencing?

- A. Laboratory tests to assess biochemical markers.
- B. Imaging studies to identify structural issues.
- C. Electrodiagnostic procedures to test nerve conductivity.
- D. Genetic testing to reveal hereditary pain conditions.

5. What aspect of chronic pain distinguishes it from acute pain?

- A. Chronic pain is characterized by a short duration and quickly resolves after the cause is addressed.
- B. Chronic pain persists beyond the usual healing period and may not have an identifiable cause.

- C. Chronic pain is always caused by a noticeable injury or immediate acute condition.
- D. Chronic pain occurs only at predictable intervals and has known triggers.

6. What is the importance of conducting a frequent pain assessment in managing a patient's pain?

- A. It helps establish a baseline for pain treatment.
- B. Frequent assessments can identify any changes in pain that may need additional intervention.
- C. Frequent assessments ensure that the patient's pain is monitored right after they report pain.
- D. It helps in adjusting pain medication based solely on the patient's first impression of it.

7. When assessing pain in a nonverbal patient, which of the following signs would NOT be an indicator of pain?

- A. Agitation
- B. Improved sleep patterns
- C. Moaning
- D. Refusal to eat

8. In the OPQRST mnemonic tool used for pain assessment, what does the 'P' represent?

- A. Pain intensity
- B. Palliation and provocation
- C. Past experiences
- D. Patient's description

9. Which pain assessment tool is most appropriate for evaluating pain in a preterm infant?

- A. Neonatal/Infant Pain Scale (NIPS)
- B. Neonatal Facial Coding System (NFCS)
- C. Faces, Legs, Activity, Cry, and Consolability (FLACC)
- D. Pain Assessment in Advanced Dementia Scale (PAINAD)

10. When setting pain management goals with patients, what is essential to consider?

- A. The patient's self-reported pain experience and treatment expectations
- B. The healthcare provider's previous experiences with similar cases
- C. The potential side effects of pain medication
- D. The patient's immediate pain relief without consideration of long-term goals

11. What is a key component of setting a personalized pain goal (PPG) with a patient?

- A. Focusing solely on achieving a pain level of zero.

- B. Considering what activities are important to the patient and what pain they are willing to tolerate.
- C. Only addressing physical activity without considering medication side effects.
- D. Setting the same pain goal for each patient regardless of individual circumstances.

12. How can the SMART framework contribute to effective pain management goal setting?

- A. By providing a flexible approach that can change daily.
- B. By ensuring pain goals are vague and open to interpretation.
- C. By creating goals that are Specific, Measurable, Action-oriented, Relevant, and Time-based.
- D. By allowing goals to be set without a clear timeline.

13. Which analgesic is primarily used for postherpetic neuralgia and peripheral neuropathic pain?

- A. Aspirin
- B. Lidocaine
- C. Acetaminophen
- D. Diazepam

14. According to the Dual-Process Model of Goal Adjustment, what might a patient experience if they cannot shift from assimilative to accommodative mode?

- A. Increased likelihood of achieving unrealistic goals.
- B. A sense of achievement despite difficulties.
- C. Feeling defeated or depressed.
- D. Immediate improvement in pain levels.

15. When using the '90% confidence rule' in pain goal setting, what is considered?

- A. Whether the patient can consistently reach the goal without any changes.
- B. Ensuring the patient's goals are unrealistic to increase motivation.
- C. Determining if the patient is 90% or more sure they can achieve the goal within the set timeframe.
- D. Focusing on achieving a pain score below 2 regardless of patient confidence.

16. Which of the following best describes the primary focus of the Brain Research through Advancing Innovative Neurotechnologies (BRAIN) initiative?

- A. Enhancing the discovery of new treatment modalities for chronic pain management.
- B. Exploring the development of non-opioid pain interventions to reduce opioid use disorders.
- C. Developing ways to reduce pain through modulating neural circuitry.
- D. Accelerating research on pain management therapies for acute pain.

17. What is a potential risk of Peripheral Nerve Stimulation as a pain management technique?

- A. Excessive nerve damage leading to chronic pain.
- B. Lead migration followed by infection.
- C. Inadequate pain relief due to incorrect lead placement.
- D. Stimulator device malfunction requiring surgical correction.

18. How does Transcutaneous Electrical Nerve Stimulation (TENS) primarily alleviate pain?

- A. By raising the pain threshold in the central nervous system.
- B. By altering the perception of pain using low-voltage electrical currents.
- C. By improving tissue healing with electrical stimulation.
- D. By disrupting neural pathways through high-voltage currents.

19. What is the role of non-pharmacological nursing interventions in pain management?

- A. To provide intermittent relief alongside pharmacological methods.
- B. To replace the need for any medication in managing chronic pain.
- C. To support patients physically and emotionally through complementary techniques.
- D. To primarily focus on correcting structural bodily dysfunctions.

20. Among the following, which complementary medicine technique is based on the principle of applying pressure to specific points on the feet?

- A. Chiropractic adjustments
- B. Osteopathic Manipulation
- C. Reflexology
- D. Acupuncture

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