Care CEUs

Prescribing Opioids for Chronic Pain

1. Chronic pain can refer to pain that lasts greater than 3 months or past the time of normal tissue healing.

A. True
B. False

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2. Which of the following statements is most accurate?

A. Type 1 evidence indicates that one can be very confident that the true effect lies close to that of the estimate of the effect
B. Type 1 evidence indicates that one cannot be very confident that the true effect lies close to that of the estimate of the effect
C. Type 2 evidence indicates that one can be very confident that the true effect lies close to that of the estimate of the effect
D. Type 3 evidence indicates that one can be very confident that the true effect lies close to that of the estimate of the effect

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3. Category A recommendations apply to all persons in a specified group.

A. True
B. False

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4. Which of the following statements is most accurate?

A. Long-term opioid therapy is defined as use of opioids on most days for greater than 8 months.
B. Long-term opioid therapy is defined as use of opioids on most days for greater than 3 months.
C. Long-term opioid therapy is defined as use of opioids on most days for greater than 6 months.
D. Long-term opioid therapy is defined as use of opioids on most days for greater than 4 months.

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5. A 42 year-old male patient is prescribed opioids for pain management. What effects may the opioids have on the patient?

A. Decreased pain
B. Tolerance
C. Physical dependence

D. All of the above

6. Which of the following factors are associated with increased risk for opioid misuse?

A. A history of substance use disorder
B. Advanced age
C. Major depression
D. Both A and C

7. Contextual evidence is complementary information that assists in translating clinical research findings into recommendations.

A. True
B. False

8. Which of the following statements regarding the CDC's recommendations for prescribing opioids is most accurate?

A. After starting opioid therapy for chronic pain, clinicians should establish treatment goals with all patients, including realistic goals for pain and function.
B. Before starting opioid therapy for chronic pain, clinicians should establish treatment goals with all patients, including realistic goals for pain and function.
C. After starting opioid therapy for chronic pain, clinicians should establish treatment goals with younger patients, including realistic goals for pain and function.
D. After starting opioid therapy for chronic pain, clinicians should establish treatment goals with elderly patients, including realistic goals for pain and function.

9. According to the CDC's recommendations, when starting opioid therapy for chronic pain, clinicians should prescribe extended-release/long-acting (ER/LA) opioids.

A. True
B. False

10. According to the CDC, clinicians should follow which of the following recommendations when initiating opioid therapy.

A. Clinicians should prescribe the lowest effective dosage.
B. Clinicians should assess the benefits and the risks of opioid therapy.
C. Clinicians should prescribe the highest effective dosage.
D. Both A and B

11. Long-term opioid use often begins with treatment of acute pain.

A. True

B. False

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12. Which of the following statements regarding the CDC's recommendations for prescribing opioids is most accurate?

A. Clinicians should evaluate benefits and harms with patients within 1 to 4 weeks of starting opioid therapy for chronic pain or of dose escalation.
B. Clinicians should evaluate benefits and harms with patients within 2 to 4 weeks of starting opioid therapy for chronic pain or of dose escalation.
C. Clinicians should evaluate benefits and harms with patients within 2 to 8 weeks of starting opioid therapy for chronic pain or of dose escalation.
D. Clinicians should evaluate benefits and harms with patients within 4 to 6 weeks of starting opioid therapy for chronic pain or of dose escalation.

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13. Which of the following factors may increase patients' risk for opioid overdose?

A. History of substance use disorder
B. Higher opioid dosages
C. Concurrent benzodiazepine use
D. All of the above

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14. According to the CDC's recommendations, when prescribing opioids for chronic pain, clinicians should use urine drug testing before starting opioid therapy.

A. True
B. False

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15. According to the CDC's recommendations, clinicians should avoid prescribing opioid pain medication and benzodiazepines concurrently whenever possible.

A. True
B. False

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16. Which of the following may be considered a sign or symptom of opioid withdrawal?

A. Vomiting
B. Diarrhea
C. Tachycardia
D. All of the above

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17. Which of the following statements is most accurate?

A. Opioids used in pregnancy are not associated with additional risks to both mother and fetus.

B. Opioids used in pregnancy might be associated with additional risks to both mother and fetus.
C. Opioids used in pregnancy may only be associated with additional risks to the fetus.
D. Opioids used in pregnancy may only be associated with additional risks to the mother.

18. Elderly patients typically have a larger therapeutic window between safe dosages and dosages associated with respiratory depression.

A. True
B. False

19. Which of the following statements is most accurate?

A. Naloxone is an opioid antagonist that can reverse severe respiratory depression.
B. Naloxone is an opioid agonist that can reverse severe respiratory depression.
C. Naloxone is an opioid antagonist that can increase respiratory depression.
D. Naloxone is an opioid agonist that can increase respiratory depression.

20. Clinicians should calculate the total daily dose for concurrent opioid prescriptions to help assess the patient?s overdose risk.

A. True
B. False