CVS PHARMACOLOGY TEST BANK

Which of the following drugs slows conduction through the AV node and has its primary action directly on L-type calcium channels?

- A) Adenosine
- B) Amiodarone
- C) Diltiazem
- D) Esmolol
- E) Flecainide
- F) Lidocaine
- G) Mexiletine
- H) Procainamide
- 1) Quinidine

Ans:C

A 36-year-old woman with a history of poorly controlled thyrotoxicosis has recurrent episodes of tachycardia with severe shortness of breath. When she is admitted to the emergency department with one of these episodes, which of the following drugs would be most suitable?

- A)Amiodarone
- B)Disopyramide
- C)Esmolol
- D)Ouinidine
- D)Verapamil

Ans:C

A Drug that treats baldness:

- a. Hydralazin
- b. Diazoxide
- c. Minoxidil



Angiotensin receptor blocker:

- a) Captopril
- b) Losartan
- c) Lisinopril

• The drugs which are useful in the treatment of heart failure and hypertension, can produce hyperkalemia but reduce salt and water retention are:

- a) Angiotensin converting enzyme inhibitors
- b) Vasodilators
- c) Angiotensin receptor blockers
- d) Digitalis
- e) Beta blockers

Ans: A

ACEs participate in the renin-angiotensin-aldosterone system to have which of the following physiologic effects?

- A. Inhibit conversion of angiotensin Il to angiotensin I.
- B. Vasoconstriction and sodium depletion.
- C. Promote sodium and water retention.
- D. Stimulate vasodilation and inhibit sodium depletion.

Note!! Here the question is about **ACE** not **ACE**!

ACE=Angiotensin converting enzyme.

Not the inhibitor

Ans: C

The action of an ACE inhibitor interrupts the reninangiotensin-aldosterone mechanism, thereby producing which of the following?

- A. Reduced renal blood flow.
- B. Reduced sodium and water excretion.
- C. Increased peripheral vascular resistance.
- D. Increased sodium excretion and potassium reabsorption.

Ans: D

• A treatment of angina that decrease the heart rate and prevent vasospastic angina attack:

- a) Verapamil
- b) nitroglycerin
- c) Nifedipine
- d) Propranolol
- e) Isosorbide dinitrate

Ans: A

- Cause angioedema:
- a) Labetalol
- b) Losartan
- c) Lisinopril
- d) Verapamil

You are asked to give an example of a long-acting nitrate. Which of the following would be correct?

- A. Nitroglycerin sublingual
- B. Nitroglycerin IV
- · C. Isosorbide PO
- D. Nitroglycerin transmucosal

Ans: C

 Which is the most appropriate action for the doctor to take before administering digoxin?

- A. Monitor potassium level.
- · B. Assess blood pressure.
- · C. Evaluate urinary output.
- · D. Avoid giving with thiazide diuretic.

Ans: A

 The action of a drug that is positively inotropic when it:

- A. Decreased afterload.
- B. Increases heart rate.
- C. Increases the force of contraction.
- D. Is used to treat CHF.

- Which of the following drugs has nitric oxide potentiating vasodilatory effects:
- a) esmolol
- b) carvedilol
- c) Labetalol
- d) Sildenafil
- e) Atenolol

 Routine laboratory monitoring in clients taking B blockers should include:

- · A. Sodium
- B. Glucose
- · C. Thyrotropin
- D. Creatine phosphokinase

- Which of the following calcium channel blockers is used to counteract or prevent cerebral vasospasm?
- A. verapamil
- B. nimodipine
- · C. nifedipine
- D. felodipine

- Which of the following calcium channel blockers has the most potent peripheral smooth muscle dilator effect?
- A. diltiazem (Cardizem)
- B. nifedipine (Adalat CC)
- C. nimodipine (Nymalize)
- D. verapamil (Calan)

- Which of the following effects of calcium channel blockers causes a reduction in blood pressure?
- A. Increased cardiac output.
- B. Decreased peripheral vascular resistance.
- · C. Decreased renal blood flow.
- D. Calcium influx into cardiac muscles.

 Conduction defects will most likely be an adverse associated with the use of:

- · A. verapamil
- B. nifedipine
- · C. diltiazem
- D. felodipine

 Doctor sarah just administered an ACE inhibitor to her client. Before ambulating the client for the first time after administration, the doctor should monitor for:

- A. Hypokalemia
- B. Irregular heartbeat
- · C. Edema
- D. Hypotension

A class of medications with multiple mechanisms of action that include: decreased preload, decreased oxygen demand, decreased afterload (at high doses), and increased myocardial oxygen delivery by dilating large epicardial arteries.

- a) beta blockers
- b) dihydropyridine calcium channel blockers
- c) nitrates
- d) non-dihydropyridine calcium channel blockers

Ans: C

• A doctor is interviewing a client who is about to receive metoprolol. Upon the history taking, the client is also taking insulin. Which of the following statements made by the doctor will correctly explain the possible interaction of these medications?

- A. "This medication will maintain the blood sugar level on a normal range".
- B. "This medication will have no effect on blood sugar level".
- **C**. "This medication may mask some of the symptoms of hypoglycemia such as tremor, palpitation, and rapid heartbeat.
- **D**. "This medication may mask some of the symptoms of hyperglycemia such as headache, increased thirst, and blurred vision".

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• Which of the following is a potential side effect of IV furosemide (Lasix)?

- A. Drowsiness
- · B. Diarrhea
- C. Cystitis
- D. Hearing loss

• ß blockers should be avoided in which of the following conditions?

- · A. Bronchoconstriction
- B. Hypertension
- · C. Angina
- D. Myocardial infarction

- · you know that the action of nitrates is:
- · A. Smooth muscle contraction
- B. Vasoconstriction
- · C. Smooth muscle relaxation
- D. Increase preload

• A 50-year-old client is prescribed to take nitrate each day for his condition. you know the result of nitrate administration is:

- A. Decreased myocardial oxygen demand.
- · B. Increased myocardial oxygen demand.
- C. Increased left ventricular end-diastolic volume.
- D. Increased atrial pressure.

A 63 yo male professor suffering from chest pain upon exertion is diagnosed with classical angina. A drug formulation that you should prescribe for rapid relief of symptoms, taken as needed is:

- a. metoprolol
- b. nitroglycerin patch
- c. oral nitroglycerin
- d. sublingual nitroglycerin
- e. verapamil

A drug prescribed for prophylaxis for the exertional (classical) form of angina, but NOT for variant (vasospastic) angina is:

- a) clopidogrel
- b) nifedipine
- c) nitroglycerin
- d) propranolol
- e) verapamil

 A 59 yo man with a history of angina is given a prescription for an oral nitrate formulation (isosorbide dinitrate) 20 mg bid. A second agent that this patient should be warned "NOT" to take while on this oral nitrate formulation is:

- a) aspirin (low dose)
- b) grapefruit juice
- c) metoprolol
- d) sildenafil

1.A 60 year old woman with a history of smoking presents with the chief complaint of chest pain that occurs at night while at rest. Tests reveal AV block (suggestive of occlusion of her right coronary artery) that are temporally associated with anginal attacks. Which drug will be contraindicated in her treatment?

- a) diltiazem
- b) isosorbide dinitrate
- c) metoprolol
- d) nitroglycerin sublingually
- e) verapamil

Ans: C