

1. Which of the following methods of treatment for patients with substance abuse who are experiencing an acute pain syndrome has been proven to be associated with a lower total dose of analgesia, a shorter hospitalization, and little or no chance of overdose?

- A. A standing order of long-acting opioids
- B. A standing order of benzodiazepines
- C. A pm order of opioid agonist-antagonists
- D. A pm order of benzodiazepines
- E. Patient-controlled analgesia

2. What is the average lowest lethal dose of methadone in nontolerant persons?

- A. 1-20 milligrams
- B. 40-60 milligrams
- C. 80-100 milligrams
- D. over 200 milligrams

3. Which of the following is an example of an opioid partial agonist?

- A. Buprenorphine
- B. Methadone
- C. Nalbuphine
- D. Naloxone
- E. Naltrexone

4. A 30-year-old patient with a history of substance abuse presents to the emergency department in an acutely psychotic state. If the cause of the psychosis is intoxication, which of the following is the most likely substance to be involved?

- A. Home-grown cannabis
- B. Heroin
- C. Clonazepam
- D. Ethanol
- E. Phencyclidine

5. MAOI use is contraindicated with:

- A. Methadone
- B. Meperidine
- C. Oxycodone
- D. Buprenorphine
- E. Levo-alpha-acetylmethadol

6. Which is not a distinct type of opioid receptor?

- A. kappa
- B. gamma
- C. mu
- D. delta

7. Opioid intoxication typically causes:

- A. Meiosis
- B. Mydriasis
- C. Miosis
- D. Myositis
- E. Maoism

8. A woman brings her unresponsive 29 year old boyfriend into your ER. She tells you he is a long-term heroin user, and "Doctor, I think he overdosed!" In addition to assessing for airway, breathing, and circulation, you reach for your handy supply of:

- A. Adrenaline, to give with a large bore hypodermic in a stabbing motion through the boyfriend's breastplate directly to the heart.
- B. Amyl nitrate
- C. Methadone
- D. Naloxone
- E. Naltrexone

9. A person who takes methadone regularly develops a seizure, for which he is hospitalized and treated with newly prescribed phenytoin, and his regular dose of methadone. A psychiatry consult is called when the patient becomes combative. You find that the patient has piloerection, muscle cramps, nausea, and abdominal pain. You suspect:

- A. Partial seizure activity
- B. Conversion disorder
- C. Antisocial personality disorder
- D. Opioid withdrawal
- E. Opioid intoxication