

Name: _____ Date: _____

1. Drugs used as anticoagulants typically cause which adverse drug reaction?
 - A) dose dependent anaphylactic shock
 - B) allergic reactions after five days
 - C) end stage renal disease
 - D) excessive bleeding

2. A receptor is thought of as a _____ and the drug that interacts with it as a _____ .
 - A) lock, key
 - B) ball, chain
 - C) glove, hand
 - D) saucer, cup

3. Metal ions as Calcium, Magnesium and Aluminum can reduce some drug absorption. They have this effect through a mechanism called
 - A) Sequestration
 - B) Sublimation
 - C) Complexation
 - D) Compliment fixation

4. When the bioavailabilities from two formulations are significantly different,
 - A) the blood concentration-time profiles are identical.
 - B) the products have the same bioequivalence.
 - C) the products are not bioequivalent.
 - D) the products contain the same amount of fillers, binders, lubricants, etc.

5. Iron salts from various sources can significantly decrease the absorption of tetracycline and doxycycline. How can these drugs be given concomitantly?
 - A) Have the patient take the iron salts with a glass of milk.
 - B) Separate the administration of the two drugs by about two hours.
 - C) Give both of the drugs at the same time with food.
 - D) Take the iron salt at bedtime.

6. In the blood concentration-time profile, the duration of action can be measured as the
- A) time between minimum effective concentration (MEC) and minimum toxic concentration (MTC).
 - B) time between dose administration and when the blood concentration first reaches the MEC.
 - C) time between dose administration and when declining blood concentrations reach the MEC.
 - D) time between when blood concentrations first reach the MEC and when the declining blood concentrations reach the MEC.
7. From a blood concentration-time profile, which parameter can be determined?
- A) onset of action
 - B) duration of action
 - C) therapeutic window
 - D) all of the above
8. _____ occur(s) when two drugs with similar pharmacological actions produce greater effects than the sum of individual effects.
- A) Additive effects
 - B) Displacement
 - C) Inhibition
 - D) Synergism
9. In chronic renal disease,
- A) the dosage of a drug eliminated by the kidney should be decreased.
 - B) the dosage of a drug eliminated by the liver should be increased.
 - C) the dosage of a drug eliminated by the kidney should be increased.
 - D) the dosage of a drug eliminated by the liver should be decreased.
10. The _____ is the blood concentration needed to produce a response.
- A) minimum toxic concentration (MTC)
 - B) onset of action
 - C) minimum effective concentration (MEC)
 - D) therapeutic window
11. The breakdown of drugs into metabolites is caused by
- A) enzyme induction.
 - B) bile.
 - C) enterohepatic recycling.
 - D) enzymes.

12. Bioavailability is measured by the
- A) rate and the amount of drug that is available to the site of action.
 - B) rate the drug is available to the site of action.
 - C) extent the drug is available to the site of action.
 - D) none of the above.
13. Most drugs given orally are absorbed into the blood from the
- A) small intestine.
 - B) large intestine.
 - C) stomach.
 - D) liver.
14. Half-life is the amount of time needed for blood concentrations of a drug to
- A) increase 50% of an initial value.
 - B) decline to one-half of an initial value.
 - C) decline from the MTC to one-half of the MEC.
 - D) progress from 50% the onset of action to 50% of the MEC.
15. Which route of administration/formulation has an extent of absorption that is 100%?
- A) oral administration/capsules
 - B) rapid intravenous administration/solution
 - C) rectal administration/emulsion
 - D) topical administration/cream

Answer Key

1. D
2. A
3. C
4. C
5. B
6. D
7. D
8. D
9. A
10. C
11. D
12. A
13. A
14. B
15. B

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