

DEH 2300
Pharmacology for Dental Hygiene
ANSWERS: Practice Quiz 3 - Part A (Anti-infective Agents)
May, 2014

1. Cephalosporin is ordered for a patient. Which of the following drug allergies would cause you to instruct the patient to not take this drug until he talks with his dentist or physician?
 - a. Aspirin
 - b. Alcohol
 - c. Tetracycline
 - d. Penicillin ANSWER**

2. Which signs/symptoms would indicate that a patient has developed nephrotoxicity as an adverse reaction to an anti-infective?
 - a. Confusion
 - b. Nausea, vomiting and diarrhea
 - c. Elevated BUN and creatinine levels ANSWER**
 - d. Decreased sodium and potassium levels

3. MRSA is the abbreviation for _____ **methicillin resistant staph aureus** _____.

4. What is the purpose of giving Benemid® (probenecid) with penicillin?
ANSWER: Benemid® (probenecid) decreases the metabolism rate of PCN so the antibiotic remains in the system longer.

5. What was the original indication (labeled) for Benemid® (probenecid)?
ANSWER: gout

6. Which medication is classified as a “penicillinase-resistant penicillin”?
 - a. Staphcillin® (methicillin) ANSWER**
 - b. Amoxil® (amoxicillin)
 - c. Principen® (ampicillin)
 - d. Bicillin® (penicillin G)

7. Which term applies to an infection which is acquired while a patient is in a healthcare facility?
 - a. Iatrogenic
 - b. Nosocomial ANSWER**
 - c. Opportunistic
 - d. Secondary or super

8. A hypersensitivity reaction to an orally administered anti-microbial agent usually occurs within ____ minutes.
 - a. 5
 - b. 10-15
 - c. 20-30 ANSWER**
 - d. 60

9. A sputum culture shows that the patient has MRSA. How should this be interpreted?
 - a. The organism is resistant to methicillin. ANSWER**
 - b. This patient has an opportunistic infection.
 - c. The patient only needs body substance isolation.
 - d. The infection can be treated with the macrolide class of anti-infectives.

10. Which classification of anti-infectives was the first true “antibiotic” and was called the “Miracle Drug”?
- Aminoglycosides
 - Penicillins ANSWER**
 - Cephalosporins
 - Tetracyclines

11. What is the danger of drinking alcohol while taking Keflex® (cephalexin)?

ANSWER: Antabuse-like reaction

12. Is Coumadin® (warfarin) likely to interact with macrolides? If so, what would be the most likely result?

ANSWER: Yes. Bleeding or hemorrhaging due to elevated INR and PT.

13. List common adverse reactions to macrolides.

ANSWER: See handout.

14. Serious adverse reactions to Septra DS® (sulfamethoxazole-trimethoprim) are most likely to involve which body system?

ANSWER: renal

15. What is the primary indication (use) for Fungizone® (amphotericin B)?

- UTI's
- Severe viral infections
- Staph or strep infections
- Systemic fungal infections ANSWER**

16. List 4 common indications for Mycostatin® (nystatin).

ANSWER: (organism usually candida) thrush; vaginitis; diaper rash; intestinal candida

17. What is the most common use of Cipro® (ciprofloxacin)?

ANSWER: UTI's (urinary tract infections)

18. What is the primary indication for Zovirax® (acyclovir)? Septra DS® (sulfamethoxazole-trimethoprim)? Tamiflu® (oseltamivir)? Relenza® (zanamivir)?

What is the primary indication for Zovirax® (acyclovir)?

ANSWER: Herpes

Septra DS® (sulfamethoxazole-trimethoprim)?

ANSWER: UTI's

Tamiflu® (oseltamivir)?

ANSWER: Treat uncomplicated flu in adults who have had symptoms less than 48 hours.

Relenza® (zanamivir)?

ANSWER: Treat uncomplicated flu in adults who have had symptoms less than 48 hours.

19. Do any of the drugs in question # 18 have “Effects on Dental Treatment”? If so, which ones and what are the effects? (See Drug Handbook by Wynn.)

20. Does amoxicillin have any “Effects on Dental Treatment”? What? **(See Drug Handbook by Wynn.)**

21. What is the “Dental Use” of Cipro[®] (ciprofloxacin)? **(See Drug Handbook by Wynn.)**

22. What is the “Dental Use” of Keflex[®] (cephalexin)? **(See Drug Handbook by Wynn.)**