

CME Test Questions

TREATMENT OPTIONS FOR CHRONIC OBSTRUCTIVE PULMONARY DISEASE

1. In the United States, COPD is ranked as the ____ leading cause of death.
 - a. first
 - b. second
 - c. third
 - d. fourth

2. Smoking is the cause of what percentage of COPD cases?
 - a. 15%–20%
 - b. 30%–45%
 - c. 70%–75%
 - d. ≥85%

3. The mortality rate for COPD between 1965 and 1998 has _____.
 - a. declined 35%
 - b. declined 59%
 - c. increased 64%
 - d. increased 163%

4. CD4+ lymphocytes, activated eosinophils, and mast cells with the cytokines IL-4, IL-5, and IL-13, as well as a host of other inflammatory and bronchoconstrictive mediators are involved in the pathogenesis of COPD.
 - a. True
 - b. False

5. According to the 1995 American Thoracic Society staging system, which of the following is characteristic of mild COPD?
 - a. $FEV_1 < 80\%$ of predicted but $\geq 50\%$ of predicted
 - b. $FEV_1 < 70\%$ of predicted
 - c. $FEV_1 \geq 35\%$ of predicted but $< 50\%$ of predicted
 - d. $FEV_1 < 35\%$ of predicted

6. Which of the following can prevent premature mortality in patients with COPD?
 - a. smoking cessation
 - b. pharmacotherapy
 - c. supplemental oxygen
 - d. all of the above

7. Is it possible to cure COPD?
 - a. Yes
 - b. No

8. Which of the following form the foundation of COPD therapy?
 - a. methylxanthines
 - b. inhaled corticosteroids
 - c. bronchodilators

9. Anticholinergic agents improve which of the following?
 - a. dyspnea
 - b. bronchial hyperreactivity
 - c. decreased rate of acute exacerbations
 - d. all of the above

10. A study of combined vaccination against influenza and pneumococcus showed a decrease (per 100,000 persons) in mortality of _____.
 - a. 29%
 - b. 36%
 - c. 46%
 - d. 57%

11. Which of the following produce greater improvements in FEV_1 , FVC, quality of life, symptoms, and exercise tolerance?
 - a. bronchodilator combination therapy
 - b. bronchodilator monotherapy

12. Which of the following is a significant first step goal in the treatment of COPD?
 - a. initiating a smoking cessation program
 - b. improving exercise tolerance
 - c. oxygen therapy
 - d. all of the above

13. What is the purpose of long-term oxygen therapy?
 - a. relieve dyspnea
 - b. prolong survival
 - c. improve lung function
 - d. stabilize FEV_1

14. Pulmonary rehabilitation programs are beneficial in each of the following EXCEPT

- a. increase exercise capacity
- b. reduce acute exacerbation rate
- c. improve arterial blood gases
- d. reduce hospitalizations

15. A low BMI is a predictor of long-term survival in COPD patients.

- a. True
- b. False

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CME Test Answer Sheet and Evaluation Form for TREATMENT OPTIONS FOR CHRONIC OBSTRUCTIVE PULMONARY DISEASE

Clinical Cornerstone® Supplement 2

Release Date of Activity: May 2004

Expiration Date of Activity for AMA/PRA credit: May 2006

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CME TEST

(Please circle correct answers)

- | | | | | |
|------------|------------|------------|-------------|-------------|
| 1. a b c d | 4. a b | 7. a b | 10. a b c d | 13. a b c d |
| 2. a b c d | 5. a b c d | 8. a b c | 11. a b | 14. a b c d |
| 3. a b c d | 6. a b c d | 9. a b c d | 12. a b c d | 15. a b |

COURSE EVALUATION: Please rate the overall course on a scale of 1 to 5, with 1 the lowest and 5 the highest.

1. Did the material provide an adequate overview of COPD? 1 2 3 4 5

2. How well did the material discuss epidemiology, pathogenesis, prevalence, course, and prognosis of COPD? 1 2 3 4 5

3. Did the material explain pharmacologic chronic management of COPD patients? 1 2 3 4 5

4. How well did the material discuss nonpharmacologic chronic management of COPD? 1 2 3 4 5

5. How well did the articles discuss the recognition and appropriate treatment of acute exacerbations of COPD? 1 2 3 4 5

6. Were the articles appropriate to the topic of this supplement of *Clinical Cornerstone*®?
 Yes No Comments: _____

7. Did you find the information presented to be objective, fair, balanced, and free of commercial bias?
 Yes No Comments: _____



8. How will the content of this publication be of use in your clinical practice?

9. When you receive literature that is accredited for AMA/PRA CME versus literature that is not accredited for CME, which are you more likely to review?

CME Non-CME Does not matter

10. What topics would you suggest for future issues?

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CME INSTRUCTIONS

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