

## BPMH QUIZ

### Question 1

1 pt

Examples of transitions of care include:

- A. Discharge from hospital to long term care
- B. Transfer from ward to another
- C. Admission to hospital from home
- D. All of the above

### Question 2

1 pt

Mr. T has brought his bottle of atorvastatin 20 mg tablets with him to the emergency room. The Drug Information System states that it was filled one month ago with the instructions "Take 1 Tablet Once Daily". By looking at the bottle and the DIS report, the nurse is certain the patient is taking atorvastatin 20 mg by mouth once daily.

- A. True
- B. False

### Question 3

1 pt

What statements concerning medication reconciliation are true?

- A. It is required by Accreditation Canada
- B. It has proven to prevent harm to the patient and decrease mortality
- C. It has not been shown to improve patient clinical outcomes
- D. A & B
- E. A & C
- F. All of the above

### Question 4

1 pt

Ideally, a BPMH should be completed within \_\_\_\_\_ hours of admission.

## Question 5

1 pt

What two sources below can be used in a BPMH?

- A. The patient interview and medication vials
- B. DIS and community pharmacy list
- C. MAR from long term care and DIS
- D. A & B
- E. A & C
- F. All of the above

## Question 6

1 pt

Blister packages will contain all oral medications that the patient is taking.

- A. True
- B. False

## Question 7

1 pt

Which patient is priority in regard to completing a BPMH?

- A. An 85 year old with Alzheimer's dementia.
- B. A 56 year old recently diagnosed with atrial fibrillation and taking apixaban.
- C. A 40 year old with a kidney transplant and getting medications from both Provincial Pharmacy and his local community pharmacy.
- D. All of the above

## Question 8

1 pt

Mrs. Z. is admitted to hospital and is quite confused about the medications she is on. Select all that apply.

- A. Check to see if a family member or caretaker is familiar with her medication history and administration
- B. See if a MAR is available if the patient is from a care facility
- C. Come back at a later time to see if the patient improves as they may be acutely confused
- D. Records meds from DIS and mark as preliminary and do not investigate any further

## Question 9

1 pt

A patient tells you that they are no longer taking pantoprazole 40 mg po daily as their physician discontinued it. You document on CERNER:

- A. It should not be included in the BPMH
- B. It should be documented on the BPMH with "Not Taking" in the comments section discontinued it last month.

## Question 10

1 pt

The patient tells you instead of 20 mg of rosuvastatin po daily as prescribed on the bottle, the physician has increased their dose verbally to take 40 mg rosuvastatin po daily. On CERNER, you document:

- A. Rosuvastatin 20 mg po once daily – still taking as directed, now 2 X 20 mg
- B. Rosuvastatin 20 mg po once daily- still taking not as directed, now taking 2 X 20 mg
- C. Rosuvastatin 40 mg po once daily - still taking as directed, now taking 2 X 20 mg

## Question 11

1 pt

The patient has told you that they take 120 mg diltiazem po once daily. On DIS, the pharmacy has documented that they filled diltiazem xc 120 mg tablets. On CERNER, you document:

- A. Diltiazem 120 mg po once daily - still taking, as directed
- B. Diltiazem 120 mg CD po once daily - still taking, as directed
- C. None of the above

## Question 12

1 pt

You enter Mr. B's room, introduce yourself, and instruct Mr. B that you will be conducting an interview to learn about his medications. He agrees, however, you notice that he is quite uncomfortable about participating in the discussion. Select the most appropriate response.

- A. Continue with the interview, hoping he gives you all the information as you have limited time available
- B. Initially at each interview, it is best to inform the patient the importance of such an interview and that one is making sure that the home medications are ordered correctly in hospital to ensure patient safety
- C. Come back at a later time
- D. All of the above

## Question 13

1 pt

The following BPMH has been completed:

Mrs. G: DOB 05/02/1979, Weight: 80 kg, Height: 160 cm

Allergies: Codeine, MRN 123456

Atorvastatin 40 mg po once daily - still taking, as directed

Methotrexate 25 mg po once weekly- Tues - still taking, as directed

Pantoprazole 40 mg po once daily - still taking, as directed

What is missing?

## Question 14

1 pt

Medication reconciliation is a formal process that involves the following:

- A. The patient and their families to ensure medication history is accurate
- B. Is a systematic process
- C. The completion of a BPMH
- D. Increases costs to the hospital to prevent adverse events.
- E. A & B
- F. A & C
- G. A, B & C
- H. All of the above

## Question 15

1 pt

Place the steps involved in the medication reconciliation process from first to last

Step	Match
First	Orders are Entered
Second	Discrepancies are Addressed
Third	Complete Discharge Plan
Fourth	Completion of a BPMH

## Question 16

1 pt

Mr. F. tells you that he takes 10 mg of ramipril po once daily in the morning. However, on his bottle, you notice they are 5 mg capsules with the instructions "Take 1 Capsule Twice Daily". He finds it easier to remember to take both capsules in the morning. You document the following:

- A. Ramipril 5 mg po twice daily - still taking, not as directed - Patient takes 2X 5 mg capsules in the morning.
- B. Ramipril 10 mg po once daily - still taking, not as directed - Bottle states 5 mg po twice daily, Patient takes 2 X 5 mg once daily
- C. Ramipril 5 mg po twice daily - still taking as directed - Patient takes 2 X 5 mg in the morning
- D. None of the above

## Question 17

1 pt

High risk medications have a increased risk of being used in error, increasing the risk of harm to the patient.

- A. True
- B. False

## Question 18

1 pt

When conducting a BPMH:

- A. Use open-ended questions: (“Tell me how you take this medication?”)
- B. Use medical conditions as a trigger to prompt consideration of appropriate common medications
- C. Verify accuracy: validate with at least two sources of information
- D. Use a BPMH trigger sheet or interview guide
- E. All of the above

## Question 19

1 pt

What types of medications should be included on the BPMH?

- A. Prescription Medications
- B. Vitamins
- C. Over the Counter Products (such as acetaminophen)
- D. Herbal products
- E. A & B
- F. A & C
- G. A, B, & C
- H. All of the above

## Question 20

1 pt

Communication is KEY in the medication reconciliation process.

- A. True
- B. False

# CERTIFICATE

— OF COMPLETION —

This certificate is awarded to \_\_\_\_\_ for completion of the  
BPMH E Learning Modules, on \_\_\_\_\_.



**Health PEI**