

MISCELLANEOUS PHARMACOLOGY MCQS:

1. What is a consequence of excessive vitamin D intake?

A: hepatotoxicity
B: hypercalciuria
C: hyperglycaemia
D: hypophosphataemia

2. Compared with IV calcium chloride, IV calcium gluconate

A: contains more mEq /mL of calcium
B: is less irritating to veins
C: is preferred in cardiac arrest
D: should be avoided via the intra-osseous route

3. When is the onset of warfarin reversal of vitamin K repletion?

A: 2 hours
B: 6 hours
C: 12 hours
D: 24 hours

4. Vitamin B12

A: circulates in a largely unbound form in plasma
B: has high daily dietary requirements
C: is mostly stored in the liver
D: requires folate for its effects

5. You remember to chart a patient's eye drops! What effect will topical timolol have?

A: decreased aqueous humor production due to lack of bicarbonate
B: decreased production of aqueous humor by the ciliary epithelium
C: improved drainage of aqueous humor by ciliary body contraction
D: opening of the trabecular meshwork, allowing aqueous humor drainage

6. In which situation is folate deficiency most likely?
- A: gastrectomy
 - B: haemodialysis
 - C: myelodysplasia
 - D: veganism
7. A child has eaten a jar of brightly coloured iron supplements a few hours ago. They now have
- A: hypochloraemic metabolic alkalosis
 - B: liver failure
 - C: necrotising gastroenteritis
 - D: vasodilatory shock
8. A patient presents with acute glaucoma. The side effects of topical pilocarpine include
- A: bronchospasm
 - B: confusion
 - C: muscle weakness
 - D: tachycardia
9. The risk of anaphylaxis (or similar symptoms) is greatest with this IV iron preparation:
- A: ferric carboxymaltose
 - B: ferumoxytol
 - C: iron dextran
 - D: sodium ferric gluconate complex
10. A PANDA patient has accidentally received 5000mg of IV thiamine for treatment of Wernicke's encephalopathy. What happens?
- A: delirium
 - B: jaundice
 - C: renal failure
 - D: resolution of eye signs