

Name:_____ Oasis:_____

Questions

CEPCP

**Professional Development:
Diabetes**

1)

Type 1 diabetes is characterized by which of the following:

- 1) adult onset, obesity
 - 2) juvenile onset, lean build
 - 3) auto-immune beta cell destruction
 - 4) peripheral insulin resistance
- a) 3 and 4
 - b) 2 and 3
 - c) 1 and 2
 - d) 1 and 3

2)

The most common cause of hypoglycemia is;

- a) not eating enough
- b) injecting too much insulin
- c) unusual amounts of exercise
- d) taking glyburide

3)

Diabetic Ketoacidosis is characterized by which of the following:

- 1) takes days or weeks to develop
 - 2) deep rapid respirations
 - 3) usually occur in the elderly that do not have access to water
 - 4) acetone breath
- a) 1 and 2
 - b) 1 and 3
 - c) 2 and 3
 - d) 2 and 4

4)

The following drug is classified as a sulphonylurea;

- a) glyburide
- b) metformin
- c) insulin
- d) none of the above

5)

Sulphonylureas work by:

- a) increasing peripheral insulin resistance
- b) increasing insulin production
- c) mimicking insulin
- d) blocking glucagon receptors

6)

The following are considered neuroglycopenic symptoms of hypoglycemia:

- a) seizure
- b) sweating
- c) palpitations
- d) tremulousness

7)

The dehydration experienced by hyperglycemic patients are caused by:

- a) sweating
- b) increased body temperature
- c) decreased renal function
- d) sugar drawing fluid out of the cells

8)

The first medication typically given to a type 2 diabetic to help control their blood sugar is:

- a) metformin
- b) insulin
- c) glyburide
- d) sulphonylurea

9)

What causes the hunger experienced by hyperglycemic patients:

10)

In type 1 diabetes this degree of beta cell destruction is usually present before any symptoms are detected:

- a) 5-10%
- b) 10-40%
- c) 45-80%
- d) 85-90%

11)

The renal problems suffered by many diabetics are caused mainly by:

- a) chronically high levels of sugar
- b) chronically low levels of sugar
- c) chronic exposure to exogenous insulin
- d) chronic exposure to metformin

12)

Insulin's main function is to;

- a) facilitate movement of sugar from the GI tract
- b) facilitate entry of sugar into the cells
- c) metabolize sugar
- d) change carbohydrates to simple sugars

13)

An 'A1C' measurement is valuable to the patient and physician because it:

- a) is faster than a blood sugar
- b) is less invasive than a blood sugar
- c) provides an average blood sugar over months
- d) provides and insulin to sugar ratio

14)

A diabetic patient is suddenly feeling sweaty, anxious and jittery. The most likely explanation is:

- 1) too much food without enough insulin
 - 2) too much insulin with not enough food
 - 3) low blood sugar
 - 4) high blood sugar
- a) 1 and 4
 - b) 1 and 3
 - c) 2 and 4
 - d) 2 and 3

15)

Provide a brief explanation as to why diabetic patients that take long-acting sulphonylureas should never be 'signed off':

16)

The following are side-effects to treatment of DKA with fluid:

- 1) adult respiratory distress syndrome
 - 2) cerebro vascular accident
 - 3) myocardial infarction
 - 4) cerebral edema
- a) 1, 3 and 4
 - b) 1,2 and 3
 - c) 1 and 4
 - d) 4 only

17)

Which of the following signs and symptoms are common to both HHS and DKA?

- 1) Kussmaul's breathing
 - 2) acetone breath
 - 3) abdominal pain
 - 4) nausea / vomiting
- a) 1 and 2
 - b) 1 and 3
 - c) 3 and 4
 - d) 2, 3 and 4

18)

How does metformin work to lower blood sugar?

19)

The longterm effects of diabetes are most often caused by:

- a) brain damage from repeated seizures
- b) vessel damage from sugar molecules
- c) vessel damage from beta cell fragments
- d) skin damage from repeated insulin injections

20)

During periods of high blood sugar, the cells are:

- a) overworked, trying to deal with all the sugar
- b) starved
- c) fluid overloaded
- d) hypoxic

21)

The usual first-line treatment for type 1 diabetes is:

- a) diet and exercise
- b) metformin
- c) glyburide
- d) insulin

22)

Deep rapid respirations are seen in which diabetic complication?

- a) diabetic ketoacidosis
- b) hyperglycemic hyperosmolar state
- c) hypoglycemia
- d) retinopathy

23)

Which of the following medications is LEAST likely to cause hypoglycemia?

- a) insulin
- b) glyburide
- c) glimepiride
- d) metformin

24)

Why is it that elderly patients often do not get the typical warning signs that their blood sugar is getting low?

25)

What is the most common precipitating factor to DKA or HHS?

- a) myocardial infarction
- b) cerebral vascular accident
- c) pancreatitis
- d) infection

26)

Metformin works by:

- a) enhancing insulin secretion by stimulating beta cells
- b) lowers glucose production by liver
- c) increases renal function
- d) increases gluconeogenesis

27)

Hyperglycemic hyperosmolar states usually develop over which period of time?

- a) 4 - 5 hours
- b) 6 - 8 hours
- c) a day
- d) days to weeks

28)

Meglitinide is:

- a) a type of insulin
- b) a drug that enhances endogenous insulin secretion
- c) a drug that enhances blood sugar levels through releasing stores
- d) a type of metformin

29)

Polyphagia is defined as:

- a) excessive thirst
- b) excessive urine output
- c) sleep deprivation
- d) excessive hunger

30)

Glucagon works by:

- a) releasing stored glucose (glycogen)
- b) enhancing cell permeability to glucose
- c) enhancing glucose absorption through the GI tract
- d) storing glucose in the form of glycogen