

# Cheap Nursing CEUs

## Chronic Fatigue Syndrome Diagnosis and Management in Adolescents

**1. Myalgic encephalomyelitis/chronic fatigue syndrome (ME/CFS) is a complex disease characterized by the body's inability to produce sufficient energy for the normal range of human activity.**

- A. True
  - B. False
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**2. Which of the following is considered to be a symptom of pediatric ME/CFS?**

- A. Malaise
  - B. Disturbed sleep
  - C. Cognitive impairment
  - D. All of the above
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**3. The most common secondary psychiatric symptoms of ME/CFS are depression and anxiety.**

- A. True
  - B. False
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**4. Severe depression with suicidal thinking is not typically present in ME/CFS without co-morbid major depressive disorder.**

- A. True
  - B. False
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**5. Post-exertional symptom worsening is a hallmark symptom of ME/CFS.**

- A. True
  - B. False
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**6. Pervasive refusal syndrome is a condition that describes a young patient who has despaired of any help from medical care and has lost all hope, as if wanting to die, and therefore rejects medical care.**

- A. True
  - B. False
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**7. Which of the following statements is most accurate?**

- A. Somatoform disorders are psychiatric disorders that cause bodily symptoms which can be traced back to a physical cause.
  - B. Somatoform disorders are psychiatric disorders that cause bodily symptoms which cannot be traced back to a physical cause.
  - C. Somatoform disorders are psychiatric disorders that do not cause bodily symptoms.
  - D. Somatoform disorders are psychiatric disorders that cause bodily symptoms which can be traced back to an illness.
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**8. The role of a health care professional in the management of ME/CFS should be to attempt to improve the daily function of the patient, expand activity and to support the patient and his or her family.**

- A. True
  - B. False
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**9. Which of the following statements is most accurate?**

- A. Pediatric patients with ME/CFS typically respond to much higher than standard doses of medication; the dosage of medications should start high and be increased slowly.
  - B. Pediatric patients with ME/CFS respond to much lower than standard doses of medication; the dosage of medications should start low and be increased slowly.
  - C. Pediatric patients with ME/CFS respond to much lower than standard doses of medication; the dosage of medications should start low and be increased rapidly.
  - D. Pediatric patients with ME/CFS do not typically respond to medications.
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**10. ME/CFS patients may receive clonazepam to help them sleep. What is the usual adolescent dose of clonazepam for ME/CFS patients?**

- A. 0.5 – 1 mg at bedtime
  - B. 5 mg at bedtime
  - C. 10 mg at bedtime
  - D. 25 mg at bedtime
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**11. An adolescent patient with ME/CFS is initiated on amitriptyline therapy. The patient and the patient's family have several questions regarding the use of the amitriptyline therapy. Which of the following counseling points should be included in the health care professional's response to the patient's questions?**

- A. Amitriptyline does not typically cause lightheadedness.
  - B. Amitriptyline does not typically cause fatigue.
  - C. Amitriptyline can take 4 weeks to become effective.
  - D. Amitriptyline is not useful for co-morbid fibromyalgia.
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**12. An adolescent patient is initiated on sertraline therapy. The patient and the patient's family have several questions regarding the use of the sertraline therapy. Which of the following counseling points should be included in the health care professional's response to the patient's questions?**

- A. Sertraline should be stopped suddenly if the patient experiences headaches.
  - B. Sertraline should be stopped suddenly if the patient experiences fatigue.
  - C. Sertraline should not be stopped suddenly. Patients should be weaned very gradually off sertraline.
  - D. Sertraline should not be stopped suddenly. Patients should be weaned very rapidly off sertraline.
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**13. Which of the following statements is most accurate?**

- A. Gabapentin can cause somnolence and weight loss.
  - B. Gabapentin can cause somnolence and weight gain.
  - C. Gabapentin does not typically cause somnolence.
  - D. The typical adolescent dosing interval for gabapentin is 6 times per day.
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**14. Guidelines for exercise in healthy, but sedentary young people are appropriate for patients with ME/CFS.**

- A. True
  - B. False
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**15. Cognitive impairment problems found in ME/CFS patients can be improved by which of the following?**

- A. Pacing activities
  - B. Performing mental work lying down
  - C. Snacks and frequent drinks
  - D. All of the above
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**16. Many young people with ME/CFS experience a variety of gastrointestinal symptoms that can interfere with nutrition.**

- A. True
  - B. False
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**17. Orthostatic symptoms associated with ME/CFS may include any of the following: increased fatigue, lightheadedness, white-outs or black-outs of the visual field, visual dimming, mental fog, headaches, nausea, pain, and/or shortness of breath.**

- A. True

B. False

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**18. Which of the following statements is most accurate?**

- A. Orthostatic hypotension is defined by a BP reduction of at least 20 mm Hg systolic or 10 mm Hg diastolic within the first 10 minutes of upright posture.
  - B. Orthostatic hypotension is defined by a BP reduction of at least 20 mm Hg systolic or 10 mm Hg diastolic within the first 3 minutes of upright posture.
  - C. Orthostatic hypotension is defined by a BP reduction of at least 40 mm Hg systolic or 10 mm Hg diastolic within the first 3 minutes of upright posture.
  - D. Orthostatic hypotension is defined by a BP reduction of at least 40 mm Hg systolic or 20 mm Hg diastolic within the first 3 minutes of upright posture.
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**19. Midodrine may be used to treat orthostatic intolerance (OI) in adolescent patients. What is the recommended starting dose for midodrine when used in adolescent patient populations?**

- A. 1 mg q 4 h while awake
  - B. 1.5 mg q 4 h while awake
  - C. 2.5 mg q 4 h while awake
  - D. 5 mg q 4 h while awake
- 

**20. Oral sodium chloride may be used to treat orthostatic intolerance (OI) in adolescent patients. What is the recommended starting dose for oral sodium chloride when used in adolescent patient populations?**

- A. 1 mcg tablets with meals
  - B. 1 mg tablets with meals
  - C. 1 g tablets with meals
  - D. 1.5 g tablets with meals
- 

**21. When treating orthostatic intolerance (OI) in adolescent patients, which of the following medications is considered first-line therapy for those with prominent cognitive dysfunction?**

- A. Midodrine
  - B. Methylphenidate
  - C. Dextroamphetamine
  - D. Propranolol
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**22. Allergies are more common in young patients with ME/CFS than in otherwise healthy young people.**

- A. True
  - B. False
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**23. Young people with ME/CFS often look ill but they do not typically appear noticeably pale.**

- A. True
  - B. False
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**24. Which of the following statements is most accurate?**

- A. Initial orthostatic hypotension (IOH) is characterized by a transient increase in BP immediately after standing, but resolving within 80 seconds.
  - B. Initial orthostatic hypotension (IOH) is characterized by a transient increase in BP immediately after standing, but resolving within 90 seconds.
  - C. Initial orthostatic hypotension (IOH) is characterized by a transient drop in BP immediately after standing, but resolving within 60 seconds.
  - D. Initial orthostatic hypotension (IOH) is characterized by a transient drop in BP immediately after standing, but resolving within 120 seconds.
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**25. Which of the following statements is most accurate?**

- A. The standing test for OI should begin with the subject standing with an automated BP cuff set to measure the patient's baseline HR and BP.
  - B. The standing test for OI should begin with the subject lying supine with an automated BP cuff set to measure the baseline HR and BP.
  - C. The standing test for OI should begin with the subject lying in the prone position with an automated BP cuff set to measure the patient's baseline patient's HR and BP.
  - D. The standing test may not be used to test a patient for OI.
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