## CONTINUING EDUCATION TEST

## New tools combat a complex antimicrobial resistance problem



AUGUST 2020 (This form may be photocopied. It is no longer valid for CEUs after February 28, 2022.)

## TEST QUESTIONS Circles must be filled in, or test will not be graded. Shade circles like this: Not like this: X Drug-resistant infections affect more than 9. HAIs still affect one in every \_\_ hospitalized 14. The Massive Open Online Course (MOOC) patients annually. patients, leading to morbidity, mortality, and aims to increase awareness of the role of to guide the appropriate use of antibiotics in A. 1.4 million C 28 million excess healthcare costs. C. 20 D. 25 A. 10 clinical medicine, screen for resistant infections R 22 million D 3.2 million in healthcare settings, and for surveillance to B. 15 and have driven a rise in monitor AMR trends and the effectiveness of 10. Prevention of CHKC focuses on: organisms that are resistant to these lifesaving stewardship interventions. druas. A. Performing basic prevention strategies of A. diagnostics A. usage of unapproved antibiotics hand hygiene and cleaning of the environment B. professional education B. excessive use of antimicrobials in food and equipment; understanding appropriate C. effective communications production prescribing practices. O. A and B C. Outmoded prescribing practices B. Performing basic prevention strategies of 15. Based on the source of the clinical sample and D. both B and C hand hygiene and cleaning of the environment the type of test completed, the diagnostic result and equipment; recognizing and managing The U.S. Centers for Disease Control and will provide clear information about the possible Prevention has identified antibiotic-resistant or infection. C. Developing performance and accountability organisms. A. Disease C. Source measures to assess infection-prevention O A. 8 Ŏ D. Bacteria B. Colonization practices and understanding appropriate B. 14 16. For CPO, the MOOC describes the role of prescribing practices The World Health Organization (WHO) found diagnostics for resistant organisms. They can D. Recognizing and managing outbreaks; widespread prevalence globally of patients with be used to screen for carriers to enable infection understanding the financial costs of poor antibiotic-resistant infections, but it did not prevention and control measures, to identify infection-prevention practices. find wide variations in the rate of occurrence, infected individuals to guide treatment, or for 11. An inappropriate test can lead to the wrong depending on the country. active surveillance of resistant HAIs to enable OB. False diagnosis, which can result in unnecessary A True alerts of outbreaks. \_, patient harm due to testing or treatment, The five objectives outlined in a global action A. True B. False unnecessary treatment, and to the health plan on antimicrobial resistance by the World CPOs can also be detected using culture on system and to the patient. Health Assembly included the following: plated media, which can take up to three days A. additional testing; higher costs and may lack sensitivity, but it is less expensive A. Improving awareness and understanding B. additional testing; lower costs \_ testing. of antimicrobial resistance through effective C. medications; higher costs communication, education and training. A. Antigen C. Molecular D. medications: lower costs B. Strengthening the knowledge and evidence B. Serology D. DNA sequencing 12. What factors lead to antimicrobials being base through surveillance and research. 18. Antimicrobial resistance is a complex problem prescribed empirically and often inappropriately? C. Reducing the incidence of infection by using that involves human health. management A. Patients do not want to wait for their test antibiotics less often to treat humans and and agriculture practices. results. animals A) population C) hygiene B. Physicians do not want to change patients' O. Both A and B B) animal D) environmental prescriptions from the original antibiotic they But the renewed focus on public health in 19. A report published by Wellcome Trust found that were given. can have a the response to O. Uninsured patients cannot be tested for public understanding of antimicrobial resistance lasting impact on the long-term effort to and its impact bacterial infections address the untreatable infections caused D. Diagnostic tests are frequently unavailable or A. has been strengthened by the COVID-19 by AMR. underutilized. pandemic A. COVID-19 C. Whooping Cough B. is currently limited 13. When combined with robust B. Influenza OD. AIDS C. has increased over the last few years diagnostics have provided shorter time to Resistant bacteria cause percent of central D. has not increased over the last few years optimal therapy, shorter hospital lengths of line-associated bloodstream infections stay, and lower hospital costs. 20. The COVID-19 pandemic has changed how we (CLABSIs) 15 percent of surgical site infections A. antimicrobial stewardship programs all think about public health and will result (SSIs) and \_\_percent catheter-associated urinary in appreciation among policymakers on the B. provider involvement tract infections (CAUTIs) in U.S. hospitals. C. patient monitoring importance of investing in robust public health C. 14;10 Δ 10·20 and healthcare delivery systems, including D treatments OB. 18; 10 D. 15;20 substantially strengthened and The Society for Healthcare Epidemiology of among the general public on the need to engage in safer hygienic practices. America (SHEA) has developed and launched a new training course in best practices in infection A. infectious-disease prevention capabilities prevention and control for hospital clinicians B. diagnostic capabilities with direct patient care responsibilities C. treatments A. True B. False D. A and B Tests can be taken online or by mail. Easy registration and payment options are available through NIU by following the links found at www.mlo-online.com/ce.

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