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## **18 RESPIRATORY PRACTICE QUESTIONS**

1. Mr. B. a 45-year-old uses AIR therapy to manage his asthma. He uses Symbicort 200 one puff up to 8 doses a day. His symptoms are not well controlled on his current treatment. He presents in your clinic seeking advice. What is your next line of action going to be ?
- A. Offer him a low-dose MART
  - B. Offer him a moderate dose MART
  - C. Offer him montelukast tablets
  - D. Offer him a LAMA
  - E. Check inhaler technique and adherence.

2. Mr. L is a regular patient, he comes into the pharmacy looking distressed as he can't taste his food, complaining that he's got a sore mouth. You notice some white patches on his tongue and around his mouth when he shows you his mouth. He further informs you that he is currently on the following medications:

- Metformin 500mg
- Clenil modulite 200mcg
- Ventolin 100mcg inhaler
- Ramipril 10mg
- Simvastatin 20mg

Which of the following advice would you give Mr.L?

- A. Apply daktarin- miconazole- oral gel to the affected areas four times daily for 10 days
- B. Gargle and rinse mouth with water after using clenil inhaler
- C. Recommend her to use chlorhexidine mouthwash

- D. Refer him to the GP as he cannot taste his food
- E. Make an appointment with the GP as soon as possible as it could be something alarming.

3. It is recommended that the spacer device for use with pressurised metered dose inhaler should be washed:

- A. once a month
- B. once a week
- C. every 6-12 months
- D. every 12 months
- E. After each use

4. Spacer devices should be replaced:

- A. once a month
- B. once a week
- C. every 6-12 months
- D. every 12 months
- E. After each use

5. A patient has been prescribed theophylline 200mg tablets for the first time. The prescriber is unsure of the monitoring requirements.

Which of the following is the most appropriate monitoring to advise?

- A. Plasma theophylline-concentration should be measured at least 2 days after a dose adjustment.
- A. Plasma theophylline-concentration should be measured at least 3 days after a dose adjustment.
- B. Plasma theophylline-concentration should be measured at least 4 days after starting the drug.
- C. Plasma theophylline-concentration should be measured at least 5 days after starting the drug.
- D. Plasma theophylline-concentration should be measured at least 6 days after a dose adjustment.

6. You are reviewing a 10-year-old patient with asthma. She is currently prescribed beclomethasone inhaler 100mcg BD and salbutamol 200mcg PRN. She is finding that she is using the salbutamol inhaler more frequently recently, often

Five to six doses a week. **According to the NEW guidelines**, which one of the following is the most appropriate next step in management?

- a) Add AIR therapy
- b) Add salmeterol
- c) Add montelukast
- d) Add ipratropium
- e) Increase dose of beclomethasone to 400mcg BD

7. A 15-year-old female patient has chronic asthma. This has been controlled with an AIR therapy inhaler - Symbicort. However, recently she has found that her asthma limits her from exercising, and she often has been unable to take part in sports in school. Which one of the following is the most appropriate advice you can suggest?

- a) Use her Symbicort during exercise when she feels short of breath.
- b) Refer her to a specialist
- c) Use her Symbicort immediately before exercise
- d) Increase the dose of the Symbicort inhaler.
- e) Add ipratropium to her regular medication

8. An 11-year-old patient diagnosed with asthma has been prescribed an inhaled corticosteroid to be used regularly and her mother is concerned about oral thrush.

Which one of the following advice is most appropriate for patients on inhaled corticosteroid?

- a) Use prophylactic miconazole oral gel
- b) Stop using the inhaler immediately if you develop a sore throat
- c) Do not use at the same time as the Salbutamol inhaler
- d) Use the inhaler once a day only
- e) Rinse mouth with water after using the inhaler

9. Jimmy, a 5-year-old boy is diagnosed with croup by his GP. His mother explained that Jimmy has swelling around the vocal cords, a barking cough and he is feeling poorly and unable to play with his friends. Which one of the following is the most appropriate treatment choice for Jimmy?

- a) Single dose adrenaline
- b) 1 week course of dexamethasone
- c) Single dose dexamethasone
- d) 1 week course of prednisolone
- e) Inhaled beclomethasone

10. Which of the following statements is not true about AIR therapy asthma management?

- A. Formoterol is the chosen long-acting beta agonist in AIR therapy.
- B. AIR therapy has replaced salbutamol inhaler in the new asthma guidelines in patients 12 years and over.
- C. Air therapy should be used regularly twice a day.
- D. Only approved inhaler device such as Symbicort – dry powder inhaler is permitted.
- E. If a patient experiences an asthma attack, they should use their AIR therapy inhaler initially before calling 999.

11. A 55-year-old man visits a clinic to be assessed for COPD. Which of the following is given to a patient before the use of a spirometer to calculate FEV1 and FVC values?

- A. Beclomethasone 200mcg tablets
- B. Salbutamol 100mcg inhaler
- C. Montelukast 10mg tablets
- D. sodium cromoglycate 2% drops
- E. Salbutamol 400mcg tablets.

12. A 63-year-old lady presents in your pharmacy with persistent dry mouth. She tells you her symptoms started ever since she started taking her new medication. Which of the following drugs are you mostly concerned about?

- A. Donepezil 10mg tablets
- B. Salbutamol 100mcg inhaler
- C. Simvastatin
- D. Cetirizine
- E. Montelukast

13. A 59-year-old patient walks into your pharmacy to purchase chlorphenamine 4mg tablets for hay fever. You discover that the patient also has a medical history of hypertension and glaucoma. What would be your next line of action?

- A. Refuse sale as patient suffers from hypertension.

- B. sell the medication as there is no concern at all.
- C. Refer to the GP.
- D. Recommend a suitable alternative such as loratadine.
- E. Refer patient to A/E due to glaucoma.

14. A 30-year-old pregnant woman would like to buy cetirizine tablets from your pharmacy over the counter. She confirms she is also asthmatic and uses salbutamol and clenil inhalers. What would be your next line of action?

- A. Sell loratadine instead.
- B. Refer to GP.
- C. Refer to A and E.
- D. Sell Cetirizine as it is totally safe in pregnancy.
- E. Sell chlorphenamine as it is the safest in pregnancy.

15. You are an independent prescriber. A 4-year-old boy visits your respiratory health clinic. His mother complains of wheezing, breathlessness, night-time waking about 3 to 4 times a week especially when the weather changes. What would you recommend?

- A. Recommend lifestyle changes only.
- B. Refer to a specialist.
- C. Prescribe salbutamol inhaler and peak flow meter.
- D. Recommend AIR therapy inhaler.
- E. Prescribe montelukast granules.

16. Mr. A has acute asthma and is now on Uniphyllin Continus (theophylline) tablets in addition to the Symbicort and Salbutamol inhalers he has been prescribed before. He has also been experiencing a low mood recently and he finds that he has lost interest in things he used to find enjoyable. After telling this to his GP at his appointment, he was initiated with mirtazapine 15mg tablets. What is the most likely electrolyte imbalance he would experience?

- A. hypokalaemia

- B. hyperkalaemia
- C. hyponatraemia
- D. hypomagnesaemia
- E. hypernatremia

17. Mrs. U. a 60-year-old female uses AIR therapy to manage her asthma. She uses Symbicort 200 one puff up to 8 doses a day. Her symptoms are not well controlled on her current treatment despite using the inhaler device correctly. She presents in your clinic seeking advice. What is your next line of action going to be?

- A. Offer her a low-dose MART
- B. Offer her a moderate dose MART
- C. Offer her montelukast tablets
- D. Offer her a LAMA
- E. Offer her an ICS

18. A 50-year-old male presents in your clinic. He smokes 20 cigarettes a day. He uses a moderate dose MART inhaler but wakes up four times a week with asthma symptoms. Which of these criteria would make you refer him to a specialist ?

- A. Waking three or more times a week with asthma symptoms.
- B. Low levels of blood eosinophils
- C. He is a smoker
- D. High levels of FENO
- E. High levels of serum creatinine.

19. A worried mother contacts you as her son has had an anaphylactic reaction after eating a prawn sandwich and she has administered an adrenaline injection to him, and he appears to be responding well. She is not sure if she should take her son to hospital.

Which of the following responses would be most appropriate for you to give?



- A. Tell the mother she does not need to call an ambulance if her son's symptoms are improving
- B. Tell the mother she should wait 10 minutes and continue to assess the child's condition before calling an ambulance
- C. Tell the mother if her son's symptoms do not improve, she should administer a second adrenaline injection 20 minutes after the first
- D. Tell the mother she should only call for an ambulance if her son requires a second dose of adrenaline
- E. Tell the mother she should call 999, ask for an ambulance and state "anaphylaxis", even if symptoms are improving.

20. Mr Sam is a 33-year-old male who recently had an anaphylactic shock after eating a cookie, which he later discovered contained peanut. Consequently, his GP recommended that he carries intramuscular adrenaline injection with him at all times.

Which of the following is the most appropriate dose of adrenaline that should be administered to Mr Sam in case of anaphylaxis?

- A. 100 mcg
- B. 150 mcg
- C. 200 mcg
- D. 300 mcg
- E. 500 mcg

## RESPIRATORY practice questions – ANSWERS

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day. His symptoms are not well controlled on his current treatment. He presents in your clinic seeking advice. What is your next line of action going to be ?

**e. Check inhaler technique and adherence**

2. Mr. L is a regular patient, he comes into the pharmacy looking distressed as he can't taste his food, complaining that he's got a sore mouth. You notice some white patches on his tongue and around his mouth when he shows you his mouth. He further informs you that he is currently on the following medications:

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Which of the following is the most appropriate monitoring to advise?

*Plasma theophylline-concentration should be measured at least 5 days after a new rx start*

6. You are reviewing a 10-year-old patient with asthma. She is currently prescribed beclomethasone inhaler 100mcg BD and salbutamol 200mcg PRN. She is finding that she is using the salbutamol inhaler more frequently recently, often

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*c) Add montelukast*

7. A 15-year-old female patient has chronic asthma. This has been controlled with an AIR therapy inhaler - Symbicort. However, recently she has found that her asthma limits her from exercising, and she often has been unable to take part in sports in school. Which one of the following is the most appropriate advice you can suggest?

*c) Use her Symbicort immediately before exercise*

8. A 33-year-old patient diagnosed with asthma has been prescribed an inhaled corticosteroid to be used regularly and is concerned about oral thrush.

Which one of the following advice is most appropriate for patients on inhaled corticosteroid?

*e) Rinse mouth with water after using the inhaler*

9. Jimmy, a 5-year-old boy is diagnosed with croup by his GP. His mother explained that Jimmy has swelling around the vocal cords, a barking cough and he is feeling poorly and unable to play with his friends. Which one of the following is the most appropriate treatment choice for Jimmy?

*c) Single dose dexamethasone*

10. Which of the following statements is not true about AIR therapy asthma management?

*C. Air therapy should be used regularly twice a day. AIR therapy should be used on demand i.e. when required.*

11. A 55-year-old man visits a clinic to be assessed for COPD. Which of the following is given to a patient before the use of a spirometer to calculate FEV<sub>1</sub> and FVC values?

*E. Salbutamol 400mcg tablets.*

12. A 63-year-old lady presents in your pharmacy with persistent dry mouth. She tells you her symptoms started ever since she started taking her new medication. Which of the following drugs are you mostly concerned about ?

*D. Cetirizine – side-effect of antihistamines*

13. A 59-year-old patient walks into your pharmacy to purchase chlorphenamine 4mg tablets for hay fever. You discover that the patient also has a medical history of hypertension and glaucoma. What would be your next line of action?

*D. Recommend a suitable alternative such as loratadine.*

14. A 30-year-old pregnant woman would like to buy cetirizine tablets from your pharmacy over the counter. She confirms she is also asthmatic and uses salbutamol and clenil inhalers. What would be your next line of action be?

B. Refer to GP. Cannot sell antihistamine OTC if pregnant.

15. You are an independent prescriber. A 4-year-old boy visits your respiratory health clinic. His mother complains of wheezing, breathlessness, night-time waking about 3 to 4 times a week especially when the weather changes. What would you recommend?

C. Prescribe salbutamol inhaler.

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A. hypokalemia – CAUSED BY SALBUTAMOL, SYMBICORT steroid inside and theophylline.

17. Mrs. U. a 60-year-old female uses AIR therapy to manage her asthma. She uses Symbicort 200 one puff up to 8 doses a day. Her symptoms are not well controlled on her current treatment despite using the inhaler device correctly. She presents in your clinic seeking advice. What is your next line of action going to be?

A. Offer her a low-dose MART

18. A 50-year-old male presents in your clinic. He smokes 20 cigarettes a day. He uses a moderate dose MART inhaler but wakes up four times a week with asthma symptoms. Which of these criteria would make you refer him to a specialist?

D. High levels of FENO

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E. 500 mcg