

## **“Improving Pain Management with the Department of Veterans Affairs Part 1”**

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### **Webcast Post-test Answers** (Answers are in **bold**)

1. Which is of the following statements regarding the Veteran’s Health Administration (VHA) development of the Opioid Safety Initiative (OSI) is FALSE? The OSI was developed in response to:
  - a. **Increasing levels of PTSD among returning veterans.**
  - b. Increasing rates of overdose related to prescription opioids.
  - c. Increasing rates of overdose related to combination benzodiazepine and opioid prescriptions.
  - d. Pressure by congress to stop over-prescribing of opioids.
  
2. In the veteran population, the highest level of opioid prescribing is in veterans:
  - a. Without mental health issues.
  - b. With mental health issues but without PTSD.
  - c. **With mental health issues and PTSD.**
  - d. With cancer and mental health issues.
  
3. Which of the following statements is true?
  - a. Research has shown that higher doses of opioids in patients with low back pain consistently result in increased physical functioning.
  - b. The employment rate is higher in patients taking higher opioid doses.
  - c. There is solid research evidence that long-term opioid use is effective and safe.
  - d. **There is solid research identifying long-term risks of opioid consumption.**

4. The VHA OSI:
  - a. Mandates the discontinuation of opioids in patients with persistent non-malignant pain.
  - b. **Provides education to providers and patients about opioid analgesics.**
  - c. Mandates the use of the opioid risk tool prior to opioid prescribing.
  - d. Concerns opioid prescribing alone when discussing pain management.
  
5. The VHA OSI consists of:
  - a. A system-wide approach to pain management.
  - b. Patient-centric goals of patient care.
  - c. A set of 9 goals to improve pain management.
  - d. Patient and staff education about pain management.
  - e. **All of the above.**