

Pain Management

1: Nociception activity is carried to the brain via the spinal cord.

- ☐ True
- ☐ False

2: Pain is a category of complex experiences and not a single sensation produced by a single stimulus.

- ☐ True
- ☐ False

3: This percentage of the U.S. adult population suffers from moderate to severe chronic non malignant pain.

- ☐ 9 percent
- ☐ 15 percent
- ☐ 27 percent

4: Pain due to a stimulus that does not normally provoke pain is:

- ☐ causalgia
- ☐ dysesthesia
- ☐ allodynia

5: An unpleasant abnormal sensation whether spontaneous or evoked is:

- ☐ causalgia
- ☐ dysesthesia
- ☐ allodynia

6: An increased response to a stimulus which is normally painful is:

- ☐ hyperalgesia
- ☐ hyperesthesia

7: Diminished pain in response to a normally painful stimulus:

- ☐ hypoesthesia
- ☐ hypoalgesia

8: Decreased sensitivity to stimulation that is normally painful is:

- ☐ hypoesthesia
- ☐ hypoalgesia

9: Slow pain is transmitted via type C fibers:

- ☐ True
- ☐ False

10: Fast spontaneous pain reaches the central nervous system via this tract:

- ☐ Neospinothalamic
- ☐ Paleospinothalamic

11: Slow increasing pain reaches the central nervous system via this tract.

- ☐ Neospinothalamic
- ☐ Paleospinothalamic

12: This type of pain receptor is capable of detecting a stretch gone too far:

- ☐ mechanical
- ☐ thermal
- ☐ chemical

13: This type of receptor can detect body products released during inflammation:

- ☐ mechanical
- ☐ thermal
- ☐ chemical

14: This individual proposed the specificity theory of pain:

- ☐ Ronald Melzack
- ☐ Renee Descartes
- ☐ Patrick Wall

15: The transmission of impulses from the body into the central nervous system is gated in the spinal chord.

- ☐ True
- ☐ False

16: Impulses along the large diameter nerve fibers tend to block pain transmission.

- ☐ True
- ☐ False

17: This nerve fiber carries the longer term throbbing and chronic pain signals:

- ☐ C fibers
- ☐ A beta fibers
- ☐ A delta fibers

18: This type of pain is caused by injury to the skin or superficial tissues:

- ☐ cutaneous
- ☐ visceral
- ☐ neuropathic

19: This type of pain is often called referred pain:

- ☐ cutaneous
- ☐ visceral
- ☐ neuropathic

20: This type of pain is usually described as dull or aching but localized:

- ☐ deep somatic pain
- ☐ visceral pain
- ☐ thoracic pain

21: This type of pain is not well localized and is described as pressure - like:

- ☐ deep somatic pain
- ☐ visceral pain
- ☐ neuropathic

22: This type of pain is severe and usually described burning and tingling:

- ☐ deep somatic pain
- ☐ visceral pain
- ☐ neuropathic

23: A study by Liem suggests that redheads are more susceptible to thermal pain.

- ☐ True
- ☐ False

24: The Wong - Baker faces rating scale is a visual representation of the numerical pain scale.

- ☐ True
- ☐ False

25: This type of pain accompanies arthritis and spine metastases.

- ☐ Visceral
- ☐ Somatic
- ☐ Neuropathic

26: This type of pain occurs to secondary liver metastases.

- ☐ Visceral
- ☐ Somatic
- ☐ Neuropathic

27: This type of pain is described as burning or lancinating.

- ☐ Visceral
- ☐ Somatic
- ☐ Neuropathic

28: According to the Mayday Fund survey this percentage of Americans report pain at some time in their lives.

- ☐ 20 percent
- ☐ 46 percent
- ☐ 60 percent

29: Pain in an area or region which is anesthetic

- ☐ Anesthesia Dolorosa
- ☐ Breakthrough pain

30: In patients who have moderate to severe pain, three components are usually present.

- ☐ True
- ☐ False

31: There are three types of breakthrough pain

- ☐ True
- ☐ False

32: Breakthrough pain strikes quickly and without warning in many cases.

- ☐ True
- ☐ False

33: Medications that are typically prescribed for persistent pain are called "longer-acting", "sustained-release", or "around - the - clock" medicine

- ☐ True
- ☐ False

34: Chronic pain can be one or two types: persistent pain, which is continuous pain, and breakthrough pain, or incident pain.

- ☐ True
- ☐ False

35: Breakthrough pain is generally a result of the same cause, or source, as persistent pain.

- ☐ True
- ☐ False

36: Currently, there is an independently validated assessment tool available to evaluate breakthrough pain.

- ☐ True
- ☐ False

37: Central pain is pain initiated or caused by a primary lesion or dysfunction in the central nervous system.

- ☐ True
- ☐ False

38: Hyperesthesia is decreased sensitivity to stimulation.

- ☐ True
- ☐ False

39: Hyperpathia is a painful syndrome characterized by an abnormally painful reaction to a stimulus.

- ☐ True
- ☐ False

40: Neuralgia is pain in the distribution of a nerve or nerves.

- ☐ True
- ☐ False

41: Fast pain is felt within a tenth of a second of application of the pain stimulus and is a sharp, acute, prickling pain felt in response to mechanical and thermal stimulation.

- ☐ True
- ☐ False

42: Receptors that are capable of detecting extreme heat or cold.

- ☐ Thermal
- ☐ Chemical

43: A noxious stimulus is one which is damaging to normal tissues.

- ☐ True
- ☐ False

44: The least stimulus intensity at which a subject perceives pain.

- ☐ Noxious stimulus
- ☐ Pain threshold

45: Pain initiated or caused by a primary lesion or dysfunction in the peripheral nervous system.

- ☐ Somatic pain
- ☐ Peripheral Neuropathic pain

46: This French philosopher, mathematician and scientist, proposed a theory of pain that survived until the mid 1960's.

- ☐ Dr. Breecher
- ☐ Descartes

47: Afferent pain-receptive nerves are responsible for bringing pain signals to the brain.

- ☐ True
- ☐ False

48: The peripheral nervous system has centers which regulate pain stimuli.

- ☐ True
- ☐ False

49: The neuromatrix theory is still evolving and the brain functions and mechanisms in this theory need to continue to be further explored and scrutinized.

- ☐ True
- ☐ False

50: Neuropathic Pain is caused by injury or disease of the nerve tissue.

- ☐ True
- ☐ False