

Managed Care's Role in Improving Adherence and Outcomes in Solid Organ Transplantation

Physician Credit

Instructions for Receiving Continuing Physician Education (CME) Credit: Testing and Grading Information

This activity is free online at www.ajmc.com/ce and at www.arcmesa.org, where you will be directed to the activity including the online posttest, activity evaluation, and request for credit. Instant online grading is available, along with a downloadable CME certificate.

Testing and Grading Directions

1. Each participant evaluating the activity and achieving a passing grade of 70% or higher on the online posttest will be eligible to receive a CME certificate.
2. Participants receiving a failing grade on the exam will be notified and permitted to take 1 reexamination at no cost.
3. To receive credit, go to www.ajmc.com/ce or www.arcmesa.org, locate this activity in the CE course list, click on the online posttest link, and complete the online posttest and activity evaluation form to receive your certificate.

Information about CME credit for this activity is available by contacting Penn State College of Medicine at 717-531-6483 or ContinuingEd@hmc.psu.edu. Reference course # G5714-15-T for the online version or G5713-15-R for the print version.

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Sample of Online Posttest

Choose the best answer for each of the following:

1. What was the median time to transplant for adult patients on the waiting list in 2008?
 - A. Less than 2 years
 - B. 2.7 years
 - C. 4.2 years
 - D. More than 5 years
2. What does the Model for End-Stage Liver Disease (MELD) scoring system assess?
 - A. Chance of death within 3 months post transplant
 - B. Chance of decline in creatinine clearance within 6 months post transplant
 - C. Patient survivability 1 year post transplant
 - D. Survivability of donor liver post transplant
3. What percentage of lung transplant patients continue to require assistance in their activities of daily living 5 years after transplant?
 - A. Less than 25%
 - B. 33%
 - C. 50%
 - D. 75%
4. What is not a common cause of mortality 5 years after a heart transplant?
 - A. Infection
 - B. Stroke
 - C. Myocardial infarction
 - D. Chronic lower respiratory diseases

Sample
Posttest

Pharmacy Credit

Instructions for Receiving Continuing Pharmacy Education (CPE) Credit: Testing and Grading Information

This lesson is free online; receive instant grading and request your CE credit at www.PharmacyTimes.org.

Testing and Grading Directions

1. Each participant evaluating the activity and achieving a passing grade of 70% or higher on the online posttest is eligible to receive CE credit.
2. Participants receiving a failing grade on the exam will be notified and permitted to take 1 reexamination at no cost.
3. To receive your credit online, go to www.PharmacyTimes.org, complete the online posttest (achieving a passing grade of 70% or better) and the online activity evaluation form. Your CE credit will be automatically uploaded to CPE Monitor™. Please ensure that your *Pharmacy Times* account is updated with your NABP e-profile ID number and your date of birth (MMDD format). Participation data will *not* be uploaded into CPE Monitor™ if you do not have your NABP e-profile ID number and date of birth entered into your profile on www.pharmacytimes.org.

5. RJ is a 47-year-old Epstein-Barr virus-positive male who was diagnosed with hypertensive nephrosclerosis in 2004. He received hemodialysis for 4 years and underwent a deceased donor kidney primary transplant in 2008. His induction regimen consisted of rabbit anti-thymocyte globulin (rATG) 1.5 mg/kg IV intraoperatively and on postoperative days 1, 2, and 4. RJ also received methylprednisolone 500 mg IV on day 1. What monitoring will RJ need while taking rATG?
- Platelets
 - White blood cells
 - Vital signs
 - All of the above
6. RJ will be started on his maintenance immunosuppressive regimen. Which of the following is the most commonly prescribed triple regimen?
- Cyclosporine, azathioprine, prednisone
 - Cyclosporine, mycophenolate mofetil, prednisone
 - Tacrolimus, azathioprine, prednisone
 - Tacrolimus, mycophenolate mofetil, prednisone
7. RJ was started on a triple immunosuppressive regimen which includes a calcineurin inhibitor. He has had excellent primary graft function and no rejection episodes since transplant. However, his clinical team is now concerned about the potential for calcineurin inhibitor-induced nephrotoxicity. Which of the following statements is true?
- mTOR inhibitors or belatacept can be used in place of the calcineurin inhibitor
 - Nephrotoxicity is a common occurrence in transplant recipients and should improve with time
 - The antiproliferative agent should be discontinued immediately as it is exacerbating the nephrotoxicity
 - All of the above are true
8. Which of the following pairings of medication and related adverse effect is incorrect?
- Antithymocyte globulin - cytokine release syndrome
 - Belatacept - hepatic artery thrombosis
 - Mycophenolate - neutropenia
 - Everolimus - delayed wound healing
9. According to the Express Scripts 2013 Drug Trend Report, what percentage of transplant patients is expected to be nonadherent?
- 15%
 - 22.3%
 - 33.2%
 - 77.7%
10. Which of the following is the most important effect of immunosuppressive nonadherence in transplantation?
- Increased risk of graft failure
 - Reduced revenue for pharmacy
 - Lower healthcare costs
 - Decreased risk of acute rejection
11. Which of the following is not a role of managed care and specialty pharmacy in solid organ transplantation?
- Understand appropriate generic substitution of immunosuppressive agents
 - Choose an immunosuppressive regimen with no drug interactions
 - Provide patient education
 - Address medication nonadherence
12. In a study that examined the barriers to adherence in transplant patients, what barrier had the biggest impact?
- Skipping doses when short of money
 - Skipping doses when going out of town
 - Missing doses when out of normal routine
 - Missing doses when feeling depressed