



Australian Pharmacy Council Ltd

Competency Assessment of Overseas Pharmacists (CAOP) Sample Examination Paper

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The CAOP Examination is 70-questions long and candidates have 2 hours to complete it.

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Q1 A patient requires a 10-day course of a medicine. The dose of medicine is 250 microgram once daily on days 1 to 3 and then 125 microgram once daily on days 4 to 10. The medicine is only available as a 150 microgram dispersible tablet, stable on production for 24 hours.

What is the minimum number of dispersible tablets required for the complete 10-day course?

- A. 20
- B. 16
- C. 13
- D. 10
- E. 8

Q2 How many mL of 90% alcohol, when diluted to 135 mL, produces 60% alcohol?

- A. 60 mL
- B. 73 mL
- C. 79 mL
- D. 81 mL
- E. 90 mL

Q3 A patient is prescribed clonazepam 0.8 mg per day. A bottle of clonazepam 2.5 mg/mL drops is provided, and one drop is equal to 0.04 mL.

What is the prescribed dose in drops?

- A. 80 drops
- B. 40 drops
- C. 16 drops
- D. 8 drops
- E. 4 drops

Q4 A medicine is provided as a 1 g powder which, when reconstituted with 9.6 mL of water for injection, provides a solution of 100 mg/mL. The dose of the medicine for a child is 50 mg/kg/day in two divided doses.

What volume of injection is required for each dose for a 35 kg child?

- A. 1.25 mL
- B. 2.5 mL
- C. 8.75 mL
- D. 12.5 mL
- E. 17.5 mL

Q5 An 80 kg man is being treated for ventricular fibrillation with lignocaine. The protocol for the lignocaine infusion (using a 5 mg/mL vial) is:

Bolus	1 mg/kg per minute for 2 minutes
Infusion	4 mg/min for 1 hour then 3 mg/min for 1 hour then 2 mg/min for 10 hours

What volume of lignocaine is required for the initial bolus and the first hour of the infusion?

- A. 40 mL
- B. 60 mL
- C. 60.5 mL
- D. 80 mL
- E. 4820 mL

Q6 Calculate the total dose of alteplase administered for a 50 kg female based on the following dose regimen:

Bolus	15 mg
Infusion	0.75 mg/kg over 30 minutes then 0.5 mg/kg over 60 minutes

- A. 15 mg
- B. 16.25 mg
- C. 62.5 mg
- D. 52.5 mg
- E. 77.5 mg

Q7 What is the **MOST** common side effect of inhaled corticosteroids?

- A. Dysphonia (difficulty speaking)
- B. Cataracts
- C. Dysphagia (difficulty swallowing)
- D. Weight gain

Patient Profile

Patient Name Tim Bowes
Address 18 Poppy Parade, Waterford
Age 34 Height 182 cm
Sex Male Weight 85 kg
Allergies Penicillin (rash)

DIAGNOSIS

Presenting Complaint:

1. Community-acquired pneumonia (mild persistent)
2. Pneumonia Severity Index (PSI) = Class 1

Medical History:

1. Asthma

LAB / DIAGNOSTIC TESTS

<u>Date</u>	<u>Test</u>	<u>Reference Range</u>
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MEDICATION RECORD

<u>Date</u>	<u>Medication</u>	<u>Quantity</u>	<u>Directions for use</u>
15/11	Prednisolone 5 mg	60	Take SEVEN tablets in the morning
5/11	Budesonide 40 microgram / dose	One Inhaler	Inhale TWO puffs twice a day
5/10	Beclometasone 100 microgram / dose	One Inhaler	Inhale TWO puffs twice a day
5/10	Salbutamol 100 microgram / dose	One Inhaler	Inhale TWO puffs every 4 hours

PHARMACIST NOTES

<u>Date</u>	<u>Comment</u>
5/10	Continuing therapy. Confirmed non-smoker.

- Q8** What is the **MOST** appropriate treatment for Tim for community acquired pneumonia?
- A. Roxithromycin
 - B. Clarithromycin
 - C. Gentamicin
 - D. Trimethoprin with sulfamethoxazole
- Q9** Following resolution of his pneumonia, Tim still does not have good control of his asthma. What is the **MOST** appropriate treatment option to help him get control of his asthma?
- A. Add salmeterol 50 microgram ONE puff twice a day
 - B. Change budesonide to fluticasone 500 microgram DPI TWO puffs twice a day
 - C. Add tiotropium 18 microgram daily
 - D. Increase budesonide to THREE puffs twice a day
- Q10** Tim is commencing budesonide, what other change(s) should be made to his medication?
- A. Cease beclomethasone, as effects are additive
 - B. Decrease beclomethasone dosage to 100 microgram/dose ONE puff twice a day
 - C. Step down beclomethasone, as stopping abruptly may precipitate an attack
 - D. Continue beclomethasone, as these two medications act on different receptors

END OF PATIENT PROFILE

Patient Profile

Patient Name Ralph Minter
Address 12 Nemesia Close, Tea Gardens
Age 64 Height 175 cm
Sex Male Weight 72 kg
Allergies Nil known

DIAGNOSIS

Presenting Complaint: 1. Angina

Medical History: 1. Depression
2. Hypercholesterolaemia

LAB / DIAGNOSTIC TESTS

<u>Date</u>	<u>Test</u>	<u>Reference Range</u>
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MEDICATION RECORD

<u>Date</u>	<u>Medication</u>	<u>Quantity</u>	<u>Directions for use</u>
14/11	Glyceryl trinitrate 600 microgram	100 tablets	Take as directed by your doctor for angina
14/11	Amlodipine 5 mg	30 tablets	Take ONE in the morning
30/10	Simvastatin 20 mg	30 tablets	Take ONE in the morning
28/10	Fluoxetine 20 mg	28 tablets	Take ONE in the morning
3/10	Aspirin 100 mg	112 tablets	Take ONE in the morning

PHARMACIST NOTES

<u>Date</u>	<u>Comment</u>
3/10	Ralph has indicated he is experiencing nocturnal chest pain.

- Q11** Ralph presents to you with a prescription for glyceryl trinitrate patches 10 mg / 24hr. What is the **MOST** appropriate regimen for Ralph for the use and application of glyceryl trinitrate patches?
- A. Apply in the morning and leave on 24 hours
 - B. Apply in the morning and take off at 10pm
 - C. Apply only when pain is experienced and leave on for two days
 - D. Apply the late afternoon and remove in the morning
- Q12** In an acute angina attack, which ONE of the following is the **MOST** appropriate way to use glyceryl trinitrate sublingual tablets?
- A. Dissolve 1 tablet under the tongue and wait 5 minutes. Call an ambulance if pain persists
 - B. Dissolve 1/2 to 1 tablet under the tongue and repeat if pain persists. Call an ambulance if 2 repeats over 10 minutes do not relieve pain
 - C. Dissolve 1/2 to 1 tablet under the tongue. Call an ambulance if pain is not relieved after 15 minutes
 - D. Dissolve 1 tablet under the tongue and repeat every 3 minutes if pain persists. Call an ambulance if 4 repeats over 15 minutes do not relieve pain
- Q13** Following the initiation of therapy with fluoxetine in this patient, the maximal anti-depressant effects is **MOST** likely achieved after:
- A. 1 week
 - B. 10 days
 - C. 4 weeks
 - D. 12 weeks
- Q14** Along with swelling of the ankles, which ONE of the following side effects is **MOST** commonly observed with amlodipine?
- A. Cough
 - B. Sedation
 - C. Chest pain
 - D. Dizziness

END OF PATIENT PROFILE

Q15 Which ONE of the following statements about a Permethrin 5% cream is **MOST** appropriate?
Permethrin 5% cream when used for scabies:

- A. should be applied daily for one week
- B. should be left on for 8 hours
- C. should be applied to warm, moist skin
- D. is not safe to use in pregnancy and breastfeeding

Q16 A female customer has recently given birth and is breastfeeding her baby. Her doctor has prescribed the progesterone only pill and as she has not used this type of pill before, she has a few questions.

Which ONE of the following counselling points would be **MOST** appropriate for her?

- A. The drug is not transferred in the milk to the baby
- B. When commencing the pill it is necessary to use an alternative method of contraception for seven days
- C. When breastfeeding ceases it will be necessary to change to the combined contraceptive pill
- D. It must be taken within three hours of the same time each day

Q17 A 45-year-old male patient, stabilised on warfarin at an International Normalised Ratio (INR) of 2.4, has decided to go on a vegetarian diet.

Which ONE of the following is the **MOST** appropriate advice to give him about his diet?

- A. You cannot go on a vegetarian diet whilst on warfarin
- B. Eat a consistent amount of leafy green vegetables day to day
- C. Take one iron tablet a day to maintain iron levels
- D. Increase mushroom intake for protein levels

Q18 With regard to injector pens, when used for the basal-bolus regimen in the control of insulin dependent diabetes which of the following is **INCORRECT**?

Injector pens give

- A. added independence for the visually impaired
- B. the ability to mix different types of insulin together
- C. greater discretion when insulin needs to be used in a public place
- D. increased flexibility to people with irregular lifestyles such as shift workers

Q19 The metalwork teacher from the local high school comes into your pharmacy with a student complaining of a red and painful eye. Upon examination you can see a small piece of metal lodged in the surface of his eye.

Which ONE of the following is the **MOST** appropriate action to take?

- A. Irrigate the eye under a stream of cool tap water for at least 10 minutes
- B. Recommend the use of anti-inflammatory eye drops, with the instruction to visit the doctor if the inflammation persists after 24 hours
- C. Lie the student down and tell him to keep still, whilst you remove the metal with a clean pair of forceps
- D. Close the eye, cover it with a bandage or sterile pad, tell him to keep his head still and arrange for transport to the nearest hospital

Q20 Which ONE of the following counselling points is **MOST** appropriate for alendronate?

- A. It can cause osteonecrosis
- B. Take in the morning with breakfast to avoid stomach upset
- C. Take at bedtime to avoid possible drowsiness
- D. Take one hour after a meal

Q21 George is an obese patient, with mature onset Type 2 diabetes. Attempts at treating the diabetes with diet modification have not worked. The **MOST** appropriate medicine recommendation is

- A. insulin
- B. a sulfonylurea
- C. a biguanide
- D. an alpha glucosidase inhibitor

Q22 A vial of insulin currently in use may be stored at up to 25°C without loss of potency for what length of time?

- A. One hour
- B. One day
- C. Two weeks
- D. Four weeks

Q23 Agranulocytosis is **MOST** commonly associated with which **ONE** of the following antipsychotics?

- A. Olanzapine
- B. Risperidone
- C. Haloperidol
- D. Clozapine

Q24 What is the **LEAST** appropriate SSRI for the management of depression during pregnancy?

- A. Citalopram
- B. Paroxetine
- C. Sertraline
- D. Fluoxetine

Patient Profile

Patient Name Cassandra Green
Address 86 North Terrace, Croydon
Age 21 Height 170 cm
Sex Female Weight 75 kg
Allergies Penicillin (anaphylaxis 10 years ago)

DIAGNOSIS

Presenting Complaint: 1. Pregnant with second child (38 weeks gestation)

Medical History: 1. Recurrent mastitis with previous child
2. Chronic depression

LAB / DIAGNOSTIC TESTS

<u>Date</u>	<u>Test</u>	<u>Reference Range</u>
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MEDICATION RECORD

<u>Date</u>	<u>Medication</u>	<u>Quantity</u>	<u>Directions for use</u>
1/09	Paroxetine 20 mg	30	Take ONE daily

PHARMACIST NOTES

<u>Date</u>	<u>Comment</u>
	Nil

Q25 Due to complications of mastitis with her previous child, Cassandra decides not to breastfeed this new baby.

Which ONE of the following is the **MOST** appropriate for the suppression of lactation?

- A. Metoclopramide
- B. Domperidone
- C. Bromocriptine
- D. Cabergoline

Q26 If Cassandra did develop mastitis, which is the **MOST** appropriate antibiotic for treatment?

- A. Flucloxacillin
- B. Clindamycin
- C. Ciprofloxacin
- D. Erythromycin

Q27 What is the **MOST** likely causative organism of mastitis?

- A. *Pseudomonas aeruginosa*
- B. *Escherichia coli*
- C. *Streptococcus pyogenes*
- D. *Staphylococcus aureus*

END OF PATIENT PROFILE

Q28 Which ONE of the following statements regarding the use of zolpidem is **CORRECT**?

Zolpidem:

- A. Is a benzodiazepine
- B. Has a long duration of action
- C. Is recommended for use in children
- D. Should be used with caution in patients with hepatic impairment

Q29 Mrs Jones, a 35-year-old woman, is a regular patient at your pharmacy. She reports pain in her Achilles tendon that appeared two days ago. She says that she had gastroenteritis on holiday in Thailand for which she was prescribed:

Metronidazole	400 mg three times a day
Ciprofloxacin	500 mg twice a day
Ranitidine	150 mg twice a day
Paracetamol/aspirin/caffeine	250/250/65 mg three times a day
Mebeverine	135 mg twice a day
Capsules containing lactobacillus	

Which ONE of these medicines **MOST** likely caused the pain?

- A. Metronidazole
- B. Ciprofloxacin
- C. Ranitidine
- D. Mebeverine

Q30 Which ONE of the following electrolytes can be affected by high dose inhaled salbutamol?

- A. Sodium
- B. Potassium
- C. Bicarbonate
- D. Magnesium

Q31 Which ONE of the following beta-blockers has been proven to reduce both morbidity and mortality in patients with left ventricular systolic heart failure?

- A. Atenolol
- B. Propranolol
- C. Carvedilol
- D. Sotalol

CAOP SAMPLE

Patient Profile

Patient Name	Judith Bannis		
Address	Room number 15		
Age	46	Height	170 cm
Sex	Female	Weight	63 kg
Allergies	Nil known		

DIAGNOSIS

Presenting Complaint:

1. Advanced breast cancer
2. Bone metastases

Medical History:

LAB / DIAGNOSTIC TESTS

<u>Date</u>	<u>Test</u>	<u>Reference Range</u>
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MEDICATION RECORD

<u>Date</u>	<u>Medication</u>	<u>Quantity</u>	<u>Directions for use</u>
30/9	Ondansetron 8 mg	10	Take ONE every 8 hours for 3 days
17/9	Dexamethasone 20 mg (oral)		stat
1/9	Doxorubicin 75 mg / m ²	IV	every 3 weeks

PHARMACIST NOTES

<u>Date</u>	<u>Comment</u>
	Nil

Q32 Judith presents with cardiac failure characterised by shortness of breath and peripheral oedema.

Which ONE of the following actions is **MOST** appropriate regarding the doxorubicin dosing?

- A. The medicine should be ceased.
- B. The medicine should be left unchanged, as the cardiac failure is unrelated.
- C. The medicine should be changed to a six-weekly cycle and reduced to 35 mg.
- D. The medicine should be changed to daunorubicin 75 mg/m².

Q33 The **MOST** likely indication for dexamethasone in Judith's medication profile is as what type of agent?

- A. Analgesic
- B. Anti-emetic
- C. Anti-cancer
- D. Immunosuppressant

Q34 Which ONE of the following statements about ondansetron is **INCORRECT**?

- A. It acts by central and peripheral 5HT₃ receptor blockade
- B. The dose needs to be reduced in severe renal impairment
- C. It is more effective for acute, rather than delayed, adverse effects of cancer therapy
- D. It decreases the analgesic effect of tramadol

END OF PATIENT PROFILE

Q35 Which ONE of the following combinations of medications is **LEAST** likely to cause serotonin syndrome?

- A. Fluoxetine and dextromethorphan
- B. Fluoxetine and lithium
- C. Dextromethorphan and phenelzine
- D. Dextromethorphan and codeine

Q36 When doxycycline is prescribed to travellers for malaria prophylaxis.

Which ONE of the following statements regarding doxycycline is **LEAST** appropriate?

- A. Offers broad protection against malaria
- B. Used in areas where there is mefloquine or chloroquine resistance
- C. Used in patients with low tolerance for mefloquine or chloroquine
- D. Used because dosing can be stopped on leaving an endemic area

Q37 Which ONE of the following therapies is **NOT** appropriate for an 80-year-old woman who presents with post herpetic neuralgia?

- A. Gabapentin 300 mg daily, titrated as tolerated
- B. Capsaicin topical application
- C. Transcutaneous electrical nerve stimulation (TENS)
- D. Citalopram 20 mg daily to a maximum of 40-60 mg

Q38 A customer presents with a new script for felodipine 5 mg daily.

Which ONE of the following points should you include in your counselling?

- A. A warning regarding consumption patterns of grapefruit juice
- B. The tablets may be crushed, if difficult to swallow
- C. A warning regarding constipation and the need for a high fibre diet
- D. A warning not to take potassium supplements while taking this medication

Q39 Which ONE of the following medications is strongly associated with constipation?

- A. Felodipine
- B. Amlodipine
- C. Nifedipine
- D. Verapamil

Q40 Which ONE of the following medicines **MOST** likely needs a dose adjustment in renal dysfunction?

- A. Prednisolone
- B. Allopurinol
- C. Indometacin
- D. Fluoxetine

Q41 When converting a patient from standard levodopa/carbidopa formulations to controlled release formulations, which of the following is **INCORRECT**?

- A. Current therapy should be continued for the first two days
- B. Sustained release preparations have lower oral bioavailability
- C. The total daily dose of levodopa usually has to be increased
- D. The frequency of dosing with the controlled release formulations is every 8 to 12 hours

Q42 Which ONE of the following medications is **LEAST** likely to cause gastric upsets?

- A. Enalapril
- B. Sulindac
- C. Prednisolone
- D. Fluoxetine

Q43 Which ONE of the following side effects is **MOST** likely to occur with high doses of hydrochlorothiazide?

- A. Photosensitivity
- B. Nightmares
- C. Urinary hesitancy
- D. Metabolic disturbances

Q44 Which ONE of the following medications may be taken at night to maximize its concentration in the blood and/or urine?

- A. Trimethoprim
- B. Atorvastatin
- C. Mirtazipine
- D. Perindopril

Q45 Phytomenadione (vitamin K) is used for which ONE of the following reasons?

- A. To counteract excessive heparinisation
- B. To supplement potassium loss
- C. As a vitamin supplement in children
- D. To counteract excessive warfarinisation

Patient Profile

Patient Name	Jane Smyth	
Address	32 Smith Street, Ginninderra	
Age	18	Height: 167 cm
Sex	Female	Weight: 60 kg
Allergies	Nil known	

DIAGNOSIS

Presenting Complaint: 1. Worsening acne

Medical History:

1. Cystic acne
2. Failed treatment with doxycycline
3. Failed treatment with cyproterone / ethinylestradiol

LAB / DIAGNOSTIC TESTS

<u>Date</u>	<u>Test</u>	<u>Reference Range</u>
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MEDICATION RECORD

<u>Date</u>	<u>Medication</u>	<u>Quantity</u>	<u>Directions for use</u>
20/12	Isotretinoin 10 mg	60	Take ONE in the morning; Take TWO at night
20/12	Ethinylestradiol / levonorgesterol	112	Take ONE daily
20/12	Doxycycline 100 mg	21	Take ONE daily
20/12	Vitamin B complex tablets	90	Take ONE daily

PHARMACIST NOTES

<u>Date</u>	<u>Comment</u>
20/2	Jane is distressed because her is acne not improving. Jane wants to try benzoyl peroxide cream in addition to isotretinoin. Jane discloses she regularly fails to the take the evening dose of isotretinoin.

- Q46** What is the **MOST** appropriate advice to give Jane about benzoyl peroxide cream?
- A. It is not appropriate to use benzoyl peroxide cream when taking isotretinoin
 - B. Exposure to more sunlight would be a better choice than benzoyl peroxide
 - C. She would be better to add in an abrasive exfoliative treatment with the isotretinoin
 - D. She would be better to use a product containing salicylic acid rather than benzoyl peroxide
- Q47** Which ONE of the following statements is the **MOST** appropriate with regard to improving Jane's compliance with isotretinoin therapy?
- A. Don't worry about the missed doses because the medicine is so potent
 - B. Recommend a once daily dosage regimen in the morning
 - C. Recommend she takes 3 capsules the morning following the missed dose
 - D. Recommend she take 2 capsules in the morning and 1 at night
- Q48** Which ONE of the following adverse events is the **MOST** common during isotretinoin therapy?
- A. Gastrointestinal upset including diarrhoea
 - B. Dry lips, skin, and mucous membranes
 - C. Aggressive behaviour
 - D. Convulsions

END OF PATIENT PROFILE

Q49 A customer who had a kidney transplant 6 months ago is taking ciclosporin regularly to suppress rejection. He has recently acquired a fungal infection under his toenails. His doctor phones to ask your advice on treatment of onychomycosis.

Which ONE of the following is the **MOST** appropriate medication?

- A. Fluconazole capsules
- B. Terbinafine tablets
- C. Griseofulvin tablets
- D. Clotrimazole lotion

Q50 Which ONE of the following groups of patients are **MOST** at risk of tendon damage if treated with quinolones?

- A. Patients on corticosteroids
- B. Patients between 20 - 50 years old
- C. Patients who have had a CABG
- D. Patients with heart failure

Q51 Which ONE of the following statements regarding the use of paracetamol for osteoarthritic pain is **LEAST** appropriate?

- A. Paracetamol is the treatment of choice for mild to moderate, persistent osteoarthritic pain
- B. Analgesic effects of paracetamol begin approximately 30 minutes after oral administration
- C. Lack of pain control with paracetamol is frequently due to inadequate dosing of paracetamol
- D. Strong evidence suggests that the risk of hepatotoxicity from paracetamol is increased in patients with chronic liver failure

Q52 What is the **MOST** common adverse effect of alendronate?

- A. Stomatitis
- B. Hypercalcaemia
- C. Osteonecrosis of the jaw
- D. Oesophagitis

Q53 Primary hyperaldosteronism results in which ONE of the following health outcomes?

- A. Elevated blood pressure and low plasma potassium
- B. Increased potassium resorption at the proximal tubule
- C. Hyperkalemia in most severe cases
- D. A rapid, often fatal, loss of blood pressure

CAOP SAMPLE

Patient Profile

Patient Name Audrey Jones
Address Wallaby Aged Care Facility
Age 80 Height: 160 cm
Sex Female Weight: 64 kg
Allergies Dried fruit

DIAGNOSIS

Presenting Complaint:

1. Severe epigastric pain
2. Persistent and unresolved nausea

Medical History:

1. Severe dementia (worsening)
2. Transient ischaemic attacks
3. Depression
4. Falls / fractures
5. Osteoporosis

LAB / DIAGNOSTIC TESTS

<u>Date</u>	<u>Test</u>	<u>Reference Range</u>
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MEDICATION RECORD

<u>Date</u>	<u>Medication</u>	<u>Quantity</u>	<u>Directions for use</u>
3/7	Aspirin 300 mg	100	Take HALF in the morning
3/7	Calcitriol 0.25 microgram	100	Take ONE twice a day
3/7	Calcium carbonate 600 mg	60	Take ONE twice a day
3/7	Galantamine 16 mg	28	Take ONE daily
3/7	Metoclopramide 10 mg	25	Take ONE three times a day as needed
3/7	Pantoprazole 40 mg	30	Take ONE daily
3/7	Paracetamol 500 mg	200	Take TWO in the morning

PHARMACIST NOTES

<u>Date</u>	<u>Comment</u>
3/7	Medications are current and ongoing.
3/7	Recommended doctor review patient's medicines in light of her exacerbation of epigastric pain and nausea.
3/7	Galantamine 8 mg ceased.

- Q54** An allergy to which ONE of the following requires that further considerations are met in excess of those normally in place for a person wishing to have an influenza vaccination?
- A. Peanuts
 - B. Sulfates
 - C. Oysters
 - D. Eggs
- Q55** Which ONE of the following treatment options would be the **MOST** appropriate to relieve Audrey's nausea/vomiting?
- A. Change metoclopramide dosage to 1 three times a day regularly
 - B. Add ondansetron 8 mg twice a day
 - C. Trial discontinuation of galantamine
 - D. Increase pantoprazole dosage to 40 mg twice a day
- Q56** Which ONE of the following tests may be considered to investigate her continuing gastric discomfort?
- A. Colonoscopy
 - B. B12/Folate
 - C. Urea breath test
 - D. Bronchoscopy
- Q57** Which ONE of the following medications is **LEAST** suitable to manage Audrey's depression?
- A. Sertraline
 - B. Mirtazapine
 - C. Doxepin
 - D. Moclobemide

Q58 Which ONE of the following medicines is **LEAST** likely to be contributing to Audrey's nausea/vomiting?

- A. Galantamine
- B. Calcitriol
- C. Aspirin
- D. Calcium carbonate

END OF PATIENT PROFILE

CAOP SAMPLE

Q59 Which ONE of the following medications is **LEAST** likely to increase the risk of lithium toxicity?

- A. Diclofenac
- B. Amiloride
- C. Frusemide
- D. Enalapril

Q60 Which ONE of the following Gram-negative bacteria is the primary cause of urinary tract infections?

- A. *Escherichia coli*
- B. *Helicobacter pylori*
- C. *Shigella dysenteriae*
- D. *Pseudomonas aeruginosa*

Q61 When counselling on the use of an azole antifungal cream, you would advise all of the following **EXCEPT** which ONE of the following?

- A. Fungal infections will be eradicated after 5-7 days
- B. It may not be necessary to use the entire tube
- C. Apply at regular intervals every day
- D. Keep area dry and open to the air

Q62 In regards to colic, which ONE of the following practices is **NOT** recommended?

- A. Continuation of breast feeding
- B. Reduction of environmental stimulation
- C. Adherence to routines
- D. Change of usual feed times

Q63 A person has a recent soft tissue injury and asks for your advice.

Which of the following should you recommend?

- A. Rest, heat, compression and elevation
- B. Massage, heat, compression and elevation
- C. Massage, ice, compression and elevation
- D. Rest, ice, compression and elevation

CAOP SAMPLE

PATIENT PROFILE

Patient Name: Dane Christiansen
Address: 85 Holloway Cres, South Port QLD 4036
Age: 62 Height: 180 cm
Sex: Male Weight: 70 kg
Allergies: Nil known

Diagnosis

Presenting Complaint: 1. Hyperglycaemia
Medical History:

Laboratory / Diagnostic Tests

Date	Test	Reference Range
11/5	Blood glucose 9.0 mmol/L	(3-8 mmol/L)
11/5	Serum creatinine 0.17 mmol/L	(0.05-0.12 mmol/L)
11/5	Urate 0.58 mmol/L	(0.2 – 0.45 mmol/L)

Medication Record

Date	Medication	Quantity	Directions for use
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Pharmacist's Notes

<u>Date</u>	<u>Comment</u>
	Nil

Q64 Dane has never had an attack of gout, but his urate level is elevated. Which ONE of the following is the **MOST** appropriate action to take?

- A Allopurinol be started at a dose of 100 mg daily
- B Allopurinol be started at a dose of 300 mg daily
- C Probenecid be started at a dose of 500 mg twice a day
- D No treatment needs to be initiated
- E Colchicine to be started at a dose of 0.5 microgram twice a day

Q65 Dane has a number of risk factors for cardiovascular disease. Which ONE of the following would be an additional risk factor?

- A Low homocysteine level
- B An elevated serum albumin
- C Hypertension
- D Postural hypotension
- E Poor renal function

Q66 If Dane was started on metformin, which ONE of the following statements is **CORRECT** in regard to this medication?

Metformin:

- A Can be used in patients with severe renal impairment with careful monitoring
- B Can be used in renal impairment but not below a CrCl of 60ml/minute
- C Can be used and its dose is not dictated by the state of the renal function
- D Can cause renal impairment and it should be ceased until renal impairment has resolved

Q67 Which ONE of the following is the **BEST** indicator of Dane's ongoing blood glucose control?

- A Random blood glucose levels
- B Three monthly HbA1C levels
- C Weekly fasting blood glucose levels
- D Regular serum creatinine measurements
- E Regular urine testing

END OF PATIENT PROFILE

PATIENT PROFILE

Patient Name:	Thomas Bean	Height:	120 cm
Address:	32 Hickory Drive, Melamine	Weight:	14 kg
Age:	3 years, 2 months		
Sex:	Male		
Allergies:	Rash following use of penicillin		

Diagnosis

Presenting Complaint:	1. Pain and fever
Medical History:	1. Otitis media

Laboratory / Diagnostic Tests

Date	Test	Reference Range
17/3	Temperature 38°C	36.8°C plus/minus 0.4 degrees

Medication Record

Date	Medication	Quantity	Directions for use
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Pharmacist's Notes

<u>Date</u>	<u>Comment</u>
17/3	Thomas has been experiencing localised pain in the ear for 2 days, which has not resolved with regular paracetamol use.

- Q68** If Thomas' mother is using paracetamol mixture 100 mg/mL, what directions are **MOST** appropriate for Thomas?
- A 1.4 mL 4 hourly, maximum 5 doses in 24 hours
 - B 2.1 mL 4-6 hourly, maximum 4 doses in 24 hours
 - C 4.2 mL 4-6 hourly, maximum 4 doses in 24 hours
 - D 1.2 mL 4-6 hourly, maximum 4 doses in 24 hours
 - E 4.2 mL 8 hourly, maximum 3 doses in 24 hours
- Q69** After five days of treatment, Thomas develops severe diarrhoea with the antibiotics that he is using. Which **ONE** of the following is the **MOST** appropriate treatment?
- A Cease the antibiotics and encourage fluids
 - B Cease antibiotic and use loperamide 2 mg stat and after each loose bowel motion
 - C Continue the antibiotics and encourage fluids
 - D Continue the antibiotics and use loperamide 2 mg stat and after each loose bowel motion
 - E Change antibiotics to another agent
- Q70** Which **ONE** of the following organisms is **MOST** likely to cause otitis media?
- A *Staphylococcus aureus*
 - B *Escherichia coli*
 - C *Streptococcus pneumoniae*
 - D *Mycoplasma pneumoniae*
 - E *Aspergillus*

END OF PATIENT PROFILE

END OF THE EXAMINATION

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CAOP

Sample 2: Answers

Question	Correct Answer
1	C
2	E
3	D
4	C
5	D
6	E
7	A
8	B
9	A
10	A
11	D
12	B
13	D
14	D
15	B
16	D
17	B
18	B
19	D
20	A
21	C
22	D
23	D
24	B
25	D
26	B
27	D
28	D
29	B
40	B
31	C
32	A
33	B
34	B
35	D
36	D
37	D
38	A
39	D

40	B
41	A
42	A
43	D
44	A
45	D
46	A
47	B
48	B
49	B
50	A
51	D
52	D
53	A
54	D
55	C
56	C
57	C
58	D
59	B
60	A
61	A
62	D
63	D
64	D
65	C
66	A
67	B
68	B
69	A
70	C