**Let’s Stop Moving:**

**Management of Acute Diarrhea in the Ambulatory Setting**

Pharmacist Post-Test

After completing this continuing education activity, the pharmacist will be able to:

* RECOGNIZE signs and symptoms associated with acute diarrhea, including those that require referral to a PCP or hospital
* IDENTIFY inappropriate oral rehydration techniques
* RECOGNIZE antidiarrheal misuse
* REVIEW the risks and benefits associated with the most commonly used strategies to manage diarrhea

**1. SK is a gardener who has been spraying his yard with weed killer. After all his hard work, he ate a gallon of ice cream and then developed diarrhea. His symptoms resolved upon avoiding dairy products. Which type of acute diarrhea did SK most likely experience?**

A. Halloween diarrhea

B. Lactose intolerance

C. Organophosphate toxicity

**2. Which is TRUE about acute diarrhea?**

A. It is treatable with stimulant laxatives

B. It usually resolves within 24 to 48 hours

C. It is associated with chronic disease (e.g., diabetes)

**3. Which anti-diarrheal agent is associated with tinnitus, potentially interacts with anticoagulants, and binds with tetracyclines?**

A. Bismuth subsalicylate

B. Loperamide

C. Lactobacillus GG

**4. Which statement is TRUE regarding the BRAT diet?**

A. It provides adequate calories to sustain an individual for several days to weeks

B. Patients consume bananas, rice, applesauce, and tomatoes for two days

C. It is no longer used to manage diarrhea because it is nutritionally inadequate

**5. JB woke up this morning experiencing diarrhea. He is afebrile and otherwise feels fine. What should JB’s first step be?**

A. Ensure adequate hydration

B. Start taking a prebiotic

C. Take 2mg of loperamide

**6. Several members of a patient's household are experiencing acute diarrhea. What should everyone do immediately?**

A. Ensure proper hand hygiene using alcohol-based hand sanitizer

B. Stock plenty of fruit juice in the home for hydration

C. Ensure proper hand hygiene using soap and water

**7. RK is a 50-year-old male who comes to your pharmacy looking for advice on how to manage his diarrhea that started two days ago. He has not been exposed to sick contacts or travelled. He did report that about a week ago, his PCP advised him to start taking omeprazole for acid reflux. RK is afebrile and does not complain of any additional symptoms. What is the best recommendation for RK?**

A. Offer to contact his PCP to discuss alternatives to omeprazole

B. Suggest he discontinue omeprazole and use a magnesium-containing antacid

C. Offer to contact his PCP for a prescription for an antibiotic

**8. MP is a 60-year-old male who has been experiencing diarrhea and self-treating at home. He now complains of black, tarry stools. Which antidiarrheal agent has MP likely been using to self-treat his symptoms?**

A. Psyllium seeds

B. Bismuth subsalicylate

C. Attapulgite clay

**9. SN is a 6-year-old whose classmate was diagnosed with COVID-19. SN later tests positive for COVID-19 herself, but she does not have any respiratory symptoms, only diarrhea. Her mother wants to know why COVID-19 causes diarrhea, but you explain to her that the mechanisms are still unknown. What is one proposed mechanism of COVID-19-associated diarrhea?**

A. Zinc toxicity related to COVID-19 treatment

B. Viral associated osmotic diarrhea secondary to lactase deficiency

C. Altered intestinal permeability causing enterocyte malabsorption

**10. MK was at your pharmacy yesterday and purchased three boxes of loperamide caplets, stating he must have eaten something that did not agree with him. When questioned, he said he was afebrile and felt otherwise fine. Today, he has returned to buy two more boxes of loperamide. What steps should you take?**

A. Suggest he see his PCP, as he must have an infectious form of diarrhea

B. Observe his behavior, as he may be abusing the loperamide

C. Suggest he also make a homemade oral hydration solution to prevent dehydration