Care of Adults with Down Syndrome: The NP Perspective

CE code TJNP92022
Valid until 10-1-2024
This activity awards 1 contact hour of which 0 credit is in the area of pharmacology

Choose the best answer for each question. Required minimum passing score is 70%. You will be charged only when you pass the test, regardless of how many attempts you make.

1. Which of the following statements identifies specific immune dysregulation experienced by adults with Down Syndrome?
   1. Innate immunity is disrupted
   2. Humoral immunity changes are noted as decreases in levels of IgG, IgM, and IgA
   3. T-helper cell production is increased with improved protection against respiratory infections
   4. Underproduction of certain T-cells is responsible for high rates of solid malignancies, such as lung and brain cancer

2. What presumptive signs of obstructive sleep apnea should lead the NP to complete a detailed assessment and diagnostic studies for a definitive diagnosis?
   1. Weight loss and decreased appetite
   2. Constipation
   3. Daytime sleepiness and fatigue
   4. Anxiety

3. Respiratory illnesses are a leading concern for adults with DS. Which of the following account for increased mobility/mortality?
   1. COVID illness requiring hospitalization is same as those in the general population
   2. Asthma often results in critical care admissions
   3. Influenza/pneumonia accounts for a high percentage of US deaths from these conditions.
   4. Enlarged adenoids, tonsils, and general hypotonia cause high levels aspiration pneumonia

4. Which type of DS results in fewer medical issues and less intellectual disability?
   1. Mosaic
   2. Translocation
   3. Trisomy 21/Primary
   4. Typical

5. What is the best screening method in measuring obesity in this population?
   1. Abdominal ultrasound
   2. Body adiposity index
   3. Height and weight
   4. Waist circumference measurements

6. To avoid misdiagnosis of Alzheimer Disease in these patients, the NP should consider:
   1. Family history of dementia is criterion for diagnosis
   2. If the individual has sensory problems, they have dementia
   3. Dementia usually occurs after the age of 65
   4. NPs should avoid diagnosing adults 39 and younger without complete workup

7. During transition planning who should be the primary informant and decision-maker?
   1. The parents because they know their child's medical history
   2. The individual's primary caregiver since childhood
   3. The healthcare proxy
   4. The individual with DS

8. Why is it important to start transition planning in adolescence or early adulthood?
   1. To provide a baseline for health preferences at young adulthood, when communication abilities are at their peak
   2. To relieve aging parents from their duties
   3. To avoid group homes or institutional placements
   4. To eliminate uncertainty for the family and close relatives
Evaluation of the CE Activity

Learning Outcomes: This CE learning activity is designed to augment the knowledge, skills and attitudes of nurse practitioners and assist in their ability to identify common health risks and co-occurring conditions that adults with Down Syndrome experience, offer new recommendations from evidence-based research, and help develop a transition plan in early adulthood to provide a high level of care for these individuals.

Educational Activity Objectives

A. Explore the genotype determined and phenotypical features that contribute to common co-occurring conditions and health risk in adults with DS
B. Identify the differences in the care guidelines between adults in the general population and those with DS
C. Explain the benefits of transition planning for individuals with DS and their families

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For questions, contact p.harvey@elsevier.com.