



### Self-Assessment Questions for Physicians and Nurses

Select the 1 best answer to each question and circle that letter on the Answer Grid on the evaluation form.

- The estimated prevalence of CIDP among adults is:
  - 1 to 2 per 100,000.
  - 1 to 3 per 100,000.
  - 1 to 4 per 100,000.
  - 1 to 5 per 100,000.
- Most patients with CIDP typically present with:
  - Asymmetric muscle weakness.
  - Asymmetric sensory weakness.
  - Symmetric muscle weakness.
  - Symmetric sensory weakness.
- Cranial nerves are affected in:
  - 10% to 20% of patients with CIDP.
  - 10% to 30% of patients with CIDP.
  - 10% to 40% of patients with CIDP.
  - 20% to 30% of patients with CIDP.
- Unlike CIDP, GBS is:
  - An acute disorder in which motor weakness does not progress beyond 8 weeks.
  - Characterized by a more aggressive disease course.
  - Distinguished by a general decrease or absence of deep tendon reflexes.
  - Marked by a more global muscle weakness of upper and lower extremities.
- The mandatory test for confirming a diagnosis of CIDP is:
  - Cerebrospinal fluid analysis.
  - Magnetic resonance imaging.
  - Nerve biopsy.
  - Nerve conduction study.
- The presence of a demyelinating neuropathy is strongly suggested by all of the following findings **EXCEPT**:
  - Conduction block.
  - Delay or absence of F waves.
  - Enhanced motor conduction velocity.
  - Prolongation of distal motor latency.
- The preferred first-line treatment for CIDP is:
  - Corticosteroids.
  - Immune globulin intravenous (IGIV).
  - Immunosuppressants.
  - Plasma exchange.
- Pure motor CIDP does not benefit from treatment with:
  - Corticosteroids.
  - IGIV.
  - Immunosuppressants.
  - Plasma exchange.
- When CIDP responds to initial treatment with IGIV, maintenance therapy is not needed for between:
  - 5% and 15% of patients.
  - 15% and 30% of patients.
  - 15% and 35% of patients.
  - 25% and 35% of patients.
- For patients who have both CIDP and diabetes mellitus, clinicians should avoid prescribing maintenance therapy with:
  - Azathioprine.
  - Corticosteroids.
  - IGIV.
  - Rituximab.