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DHS-1
Rev. 10/09

**RHODE ISLAND DEPARTMENT OF HUMAN SERVICES
APPLICATION FOR ASSISTANCE PART-1**

For Office use only
Applicant's Name _____ Date Received _____ Initials _____

Do you speak English? Yes No If no, what is the primary language spoken? _____
 Can you read and write in English? Yes No
 If you do not speak English, does any adult member of the household speak English? Yes No

I want to apply for: CASH ASSISTANCE (RHODE ISLAND WORKS PROGRAM-RIP)
 SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) (formerly called Food Stamps)
 MEDICAL ASSISTANCE (MA)
 GENERAL PUBLIC ASSISTANCE (GPA)

SECTION I. APPLICANT INFORMATION

Name _____ (Last/First/Middle/Other Name(s))
 S.S.N. _____
 Sex: Male _____ Female _____
 Marital Status: _____
 Spouse's Name: _____ Spouse's D.O.B.: _____ Spouse's S.S.N.: _____
 Residence Address: _____
 Street/Road Apt./Floor City State Zip
 Mailing Address: _____
 Street/Road Apt./Floor P.O. Box City/Town State Zip
 Telephone Number: Day _____ Evening _____

IF YOU ARE APPLYING FOR SNAP-FOOD STAMP BENEFITS—DO YOU PREFER A Telephone Interview (DHS will call you) (OR) Do you prefer an In-Office Interview (check one)?
IMPORTANT: If you do not choose An In-Office Interview, a Telephone Interview will be scheduled for you.
 Telephone Number where you can be reached for a telephone interview: _____
 If you wish to authorize someone other than yourself to apply on your behalf, please indicate below:
 I want _____ to apply on my behalf.
 (Name of Individual) (Signature Print #) (Living Print #)

My shelter arrangement is (Check one):
 01 Elderly/disabled housing 06 Own home/trailer 11 Non-traditional lobby, street, car
 02 Drug/alcohol rehab center 07 Rent home/apr/trailer 12 Residential care and assisted living
 03 Disabled/blind group home 08 Living in another's home/apr 13 Long-Term Care Facility
 04 Barred Women's shelter 09 No permanent address 99 Other (specify) _____
 05 Shelter 10 Halfway house

Did you move to Rhode Island within the last three (3) months? Yes NO If YES, Date: _____

If yes, what was your reason for moving here? (Check One)
 L Looking for Employment R Close to Relatives W To get Cash, Food Stamps, and/or Medical
 D Domestic Violence K Hurricane Katrina O Other _____ (please specify)

Where did you move from? _____ Do you receive any assistance now? Yes No
 Have you previously applied for, or received any type of assistance payments, benefits or Food Stamp/SNAP benefits in R.I. or in another state? Yes No
 If Yes, under what name? _____ Where? _____ When? _____ Type? _____

Applicant's Signature _____ Date _____

NBDE-DHA-HAAD
1055 Remembered Questions
NBDE Part 2, DHA and HAAD
Answers & Explanations

[PREVIEW AND DOWNLOAD PDF](#)



Prepared by M.L. Thompson, Ph. D., Dept. of General Dentistry, Tufts Dental School

Pharmacology Board Review 2005

This list of questions and topics is the result of going through about 10 years worth of old Board exams in Pharmacology, cutting out all the questions, categorizing them into topic areas (e.g. antibiotics, local anesthetics, etc.), and then further grouping them into the type of information about a category of drugs that was being asked for. When you do this, you see that many exams repeat questions (sometimes they reword them a little bit to make them look different), but in actuality it is possible to get a feel for the various facts that you are expected to know, and that there aren't that many of them. As you go through this handout, you will see that I point out to you the major facts that tend to get asked over and over again for the various major drug categories, and I also give you actual examples of questions (and the reworded versions), as well as the correct answer. In many cases, I have written out a detailed explanation of the answer, just to enlighten you further. So good luck and enjoy.

The downside is that these questions are from old Board exams. Some of the material is obviously dated, as drugs fall out of fashion, newer drugs get used instead of older drugs, etc. At the beginning of each section I will try to indicate some things that have changed and thus you may want to place less emphasis on some of the questions here.

On a positive note, there used to be a separate pharmacology section of 100 questions. Nowadays, you might see 25-30 in some versions, other versions less. Unfortunately, they still can draw from the realm of pharmacology so you gotta review it all. However, the good thing is that since they ask fewer questions, and since they are trying to ask more clinically relevant stuff, if you really focus your efforts on antibiotics, antibiotics, and anesthetics, you should be covered for the majority of questions.

There are always going to be some random, unpredictable questions that means you have to review more if you want to do really well. Maybe you will luck out, and these will be the questions they are testing and they don't count.

Local Anesthetics

I. The largest category of LA questions focuses on your ability to distinguish amide LAs from esters. **(This I hope is de-emphasized, since amide local anesthetics are used almost exclusively now)**

esters = procaine, tetracaine, cocaine. All the rest are amides: lidocaine, mepivacaine, bupivacaine, prilocaine, dibucaine. They also require you to know that amides are metabolized in the liver, esters mainly by esterases in plasma. An infrequent question asks which class of drugs has the most consistency in structure. LAs are the drug group most consistent in drug structure, because LAs are either amides or esters, differing only in their structure in the intermediate chain (is either an amide or an ester) that connects the aromatic group to the secondary or tertiary amino terminus.

II. The next category of questions has to do with toxic reactions to local anesthetics, especially those that occur with high systemic levels of local anesthetics in general (cardiovascular collapse due to myocardial depression,

hypotensive shock) or to a specific agent such as procaine, which causes methemoglobinemia.

III. A 3rd class of questions are aimed at your knowledge of the mechanism of action of local anesthetics: they prevent the generation of nerve impulses by interfering with sodium transport into the neuron.

IV. The last most frequent type of question regarding local anesthetics has to do with issues regarding absorption of local anesthetics. Remember, only the non-ionized (or free base form) form can penetrate tissue membranes. Ionized tissue has a lower than normal pH, which decreases the amount of non-ionized form available to penetrate.

V. Usually at least one question comes up asking you to calculate how many mg of local anesthetic a patient has received, e.g. how many mg of lidocaine in 1.8 ml of a 2% lidocaine solution? 2% lidocaine is 20 gm/100 ml or 20 mg/ml, so 36 in 1.8 ml.

1. Which of the following is a local anesthetic subject to inactivation by plasma esterases?
a. Procaine
b. Lidocaine
c. Prilocaine
d. Mepivacaine
e. Bupivacaine

(A) Procaine is the only ester listed -- all the rest are amides

2. Procaine differs from lidocaine in that
a. Procaine is a p-aminobenzoic acid ester and lidocaine is not
b. Lidocaine is a meta-aminobenzoic acid ester and procaine is not
c. The duration of action of procaine is longer than that of an equal oral dose of lidocaine
d. Procaine hydrochloride is metabolized into diethylaminoethanol and benzoic acid.

(A) This is basically a true-false type question. (A) is the only statement that is true

3. Which of the following local anesthetics would be expected to produce a sensitization reaction in a patient allergic to lidocaine?
a. Mepivacaine
b. Tetracaine
c. Procaine
d. Prilocaine
e. Dibucaine

I. (B), (D) and (E)
II. (E) (D) and (E)
III. (E) and (D) only
IV. (D), (E) and (D)
V. (D), (E) and (E)

(E) another ester vs. amide type identification question. Lidocaine is an amide, thus other amides will be cross-allergenic - mepivacaine, prilocaine and dibucaine are the other amides listed. Procaine and tetracaine are esters and will not be cross-allergenic.

9. The hydrolysis of procaine occurs mainly in the
a. Liver

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