**Pre- and post-training knowledge assessment questionnaire for Module 1: Introduction**

1. **Which of the following is NOT characteristic of psoriatic arthritis?**
2. Asymmetrical symptoms and swelling in joints
3. **Signs of gouty tophi (bulbous swellings) on the feet and hands**
4. Involves distal interphalangeal joints
5. Is a form of inflammatory arthritis
6. **According to the C**l**AS**sificationcriteria for **P**soriatic **AR**thritis **(CASPAR), a patient with psoriatic arthritis \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
7. Has psoriasis
8. May not have psoriasis but has a family history of psoriasis
9. Has dactylitis or a history of dactylitis
10. **All of the above**
11. **Which of the following is a peripheral form of psoriatic arthritis?**
12. Distal interphalangeal predominant arthritis
13. Enthesitis
14. Dactylitis
15. A & B
16. **A, B & C**
17. **Purplish discoloration of the joint may be present in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
18. Psoriatic arthritis
19. Rheumatoid arthritis
20. Osteoarthritis
21. **All of the above**
22. **Which of the following is affected in a patient with psoriatic arthritis?**
23. All joints of a digit
24. Same joint across digits
25. **A & B**
26. **Choose the statement that is FALSE**
27. About 30% of patients with psoriasis develop psoriatic arthritis.
28. Psoriatic arthritis is caused by chronic immune-mediated inflammation.
29. Psoriatic arthritis is linked to environmental and genetic risk factors.
30. **Psoriatic arthritis does not affect the spine and sacroiliac joints.**
31. **Which of the following are risk factors for psoriatic arthritis?**
32. Physical trauma
33. Bacterial/viral infection
34. Obesity
35. Smoking
36. **All of the above**
37. **Psoriatic arthritis can develop \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
38. Before psoriasis
39. At the same time as psoriasis
40. After the appearance of psoriasis
41. **All of the above**
42. **Psoriatic arthritis can \_\_\_\_\_\_\_\_\_\_\_\_\_**
43. Occur at any age
44. Cause joint erosion within 2 years
45. Cause deformed joints
46. B & C
47. **A, B & C**
48. **Poor prognosis in psoriatic arthritis is linked to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
49. Delay in diagnosis
50. Failure of previous medication
51. Reduction in erythrocyte sedimentation rate
52. **A & B**
53. A, B & C
54. **There is an association between psoriatic arthritis and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
55. Hypertension
56. Hyperlipidemia
57. Coronary artery disease
58. A & C
59. **A, B & C**
60. **Psoriatic arthritis \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
61. Affects a patient’s physical functioning
62. Affects a patient’s quality of life
63. Can cause fatigue
64. A & B
65. **A, B & C**

**Pre- and post-training knowledge assessment questionnaire for Module 2: Diagnosis and evaluations of psoriatic arthritis**

1. **Nurses’ roles include \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. Early identification and diagnosis of psoriatic arthritis
3. Being a key point of contact for treatment plans
4. Being a key point of contact for social/psychological needs
5. B & C
6. **A, B & C**
7. **Key characteristics of psoriatic arthritis include \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
8. Psoriatic skin lesions
9. Arthritis
10. Nail dystrophy
11. A & B
12. **A, B & C**
13. **Choose the statement that is FALSE**
14. Patients with psoriatic arthritis may experience inflammatory back pain.
15. Patients with psoriatic arthritis may experience morning stiffness.
16. Dactylitis is a key feature of psoriatic arthritis.
17. **Enthesitis is not a key feature of psoriatic arthritis.**
18. **Psoriatic arthritis that affects the joints in the feet and hands are defined as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
19. **Peripheral arthritis**
20. Axial psoriatic arthritis
21. **Psoriatic arthritis that affects the joints in the elbows and knees are defined as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
22. **Peripheral arthritis**
23. Axial psoriatic arthritis
24. **Psoriatic arthritis that affects the joints in the spine are defined as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
25. Peripheral arthritis
26. **Axial psoriatic arthritis**
27. **A patient has inflammation in four joints. This is characteristic of a \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ subtype of psoriatic arthritis.**
28. Arthritis mutilans
29. **Oligoarticular**
30. Polyarticular
31. Spondylitis
32. **A patient has inflammation in more than five joints. This is characteristic of a \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ subtype of psoriatic arthritis.**
33. Arthritis mutilans
34. Oligoarticular
35. **Polyarticular**
36. Spondylitis
37. **A radiograph indicated resorption of several bones of a patient’s hands and wrists. This is characteristic of a \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ subtype of psoriatic arthritis.**
38. **Arthritis mutilans**
39. Oligoarticular
40. Polyarticular
41. Spondylitis
42. **Choose the statement that is FALSE**
43. Patients with psoriatic arthritis will have psoriasis at some point in their disease course.
44. Some patients with mild psoriatic arthritis may have skin redness but no skin thickening and scaling.
45. Psoriatic skin lesions can appear as dry skin patches.
46. **Psoriatic skin lesions are unlikely to appear in skin folds.**
47. **Which of the following is NOT characteristic of psoriatic arthritis?**
48. Affects all joints within a particular digit
49. Asymmetric arthritis
50. Affected joints have purplish discoloration
51. **Neck pain is a key feature**
52. **Choose the statement that is FALSE**
53. Patients with psoriatic arthritis may have inflammatory back pain.
54. Patients with psoriatic arthritis may have morning stiffness.
55. **Patients with psoriatic arthritis do not experience fatigue.**
56. Patients with psoriatic arthritis may have back pain that awakens patient from sleep.
57. **Nail dystrophy \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
58. is a common feature of psoriatic arthritis.
59. can appear as longitudinal black streaks underneath the nail.
60. can appear as white discoloration and pitting.
61. A & C
62. **A, B & C**
63. **Dactylitis \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
64. Is swelling of a whole digit.
65. Can cause joint damage.
66. Is more likely to occur in the fingers than toes
67. **A & B**
68. A, B & C
69. **Enthesitis \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
70. May occur in the plantar fascia and Achilles tendons.
71. Is the first symptom of psoriatic arthritis for most patients.
72. Affects multiple sites in the body at a time.
73. **A & C**
74. A, B & C
75. **Psoriasis can occur at the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
76. Elbows and knees
77. Palms and soles
78. Trunk
79. A & B
80. **A, B & C**
81. **Psoriasis can occur at the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
82. Armpits
83. Groin
84. Behind and inside the ears
85. B & C
86. **A, B & C**
87. **This image shows that the patient has \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

A close up of a person

Description automatically generated

Photo courtesy of Gladys Kwok

1. **Psoriatic skin lesions**
2. Nail dystrophy
3. Dactylitis
4. Enthesitis
5. **This image shows that the patient has \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Photo courtesy of Professor Kishimoto Mitsumasa

1. Psoriatic skin lesions
2. **Nail dystrophy**
3. Dactylitis
4. Enthesitis
5. **This image shows that the patient has \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Photo courtesy of Gladys Kwok

1. Psoriatic skin lesions
2. Nail dystrophy
3. **Dactylitis**
4. Enthesitis
5. **This image shows that the patient has \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Photo courtesy of Professor Kishimoto Mitsumasa

1. Psoriatic skin lesions
2. Nail dystrophy
3. Dactylitis
4. **Enthesitis**
5. **The SJC66/TJC68 Joint Count \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
6. Measures musculoskeletal disease activity/peripheral arthritis
7. Assesses 66 joints for swelling
8. Assesses 68 joints for tenderness
9. B & C
10. **A, B & C**
11. **Which of the following screening tool has the best sensitivity for diagnosing psoriatic arthritis in a patient with psoriasis?**
12. **EARP**
13. PASE
14. PEST
15. ToPAS II
16. **Which of the following screening tool has the highest specificity for diagnosing psoriatic arthritis in a patient with psoriasis?**
17. EARP
18. PASE
19. PEST
20. **ToPAS II**
21. **Which of the following screening tool includes a mannequin for patients to identify affected joints?**
22. EARP
23. PASE
24. **PEST**
25. ToPAS II
26. **Patients with psoriatic arthritis should be screened for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
27. Uveitis
28. Inflammatory bowel disease
29. Cardiovascular disease
30. A & B
31. **A, B & C**
32. **Which of the following characteristic differentiates osteoarthritis from psoriatic arthritis?**
33. **Osteoarthritis does not present before the age of 45 years.**
34. Osteoarthritis has symmetrical erosion and ankylosis of the sacroiliac joints.
35. Osteoarthritis has deposits of monosodium urate crystals at the joints.
36. Inflammation is a key feature of osteoarthritis.
37. **Which of the following characteristic differentiates ankylosing spondylitis from psoriatic arthritis?**
38. Ankylosing spondylitis occurs with dactylitis.
39. Ankylosing spondylitis has less severe functional limitation.
40. **Ankylosing spondylitis has symmetrical erosion and ankylosis of the sacroiliac joints.**
41. Ankylosing spondylitis has inflammatory back pain.
42. **Presence of tophi is characteristic of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
43. Psoriatic arthritis
44. Rheumatoid arthritis
45. **Gout**
46. Osteoarthritis
47. **Which of the following affects the metacarpophalangeal joints of the hand, has symmetric distribution, and is not present with dactylitis or enthesitis?**
48. Psoriatic arthritis
49. **Rheumatoid arthritis**
50. Gout
51. Osteoarthritis

**Pre- and post-training knowledge assessment questionnaire for Module 3: Treatment and management of psoriatic arthritis**

1. **Which of the following are key elements for psoriatic arthritis management?**
2. Multidisciplinary management
3. Prevention of structural damage
4. Management of comorbidities
5. A & B
6. **A, B & C**
7. **Patient education on psoriatic arthritis should include \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
8. Diagnosis
9. Symptom control
10. Self management of the disease
11. A & B
12. **A, B & C**
13. **Patients with psoriatic arthritis should receive information on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
14. Pre-conception care.
15. Prevention of infection.
16. Treatments and their potential side effects.
17. B & C
18. **A, B & C**
19. **Nurses’ roles in psoriatic arthritis include screening for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
20. Arthritis
21. Uveitis
22. Inflammatory bowel disease
23. A & B
24. **A, B & C**
25. **Nurses’ roles in psoriatic arthritis include \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
26. Monitoring disease activity and disease progression
27. Providing long-term support
28. Promotion of self-management
29. A & B
30. **A, B & C**
31. **Which of the following psoriatic arthritis therapy is only for symptom control?**
32. Nonsteroidal anti-inflammatory drugs
33. Glucocorticoids
34. Ustekinumab
35. **A & B**
36. A, B & C
37. **In psoriatic arthritis, glucocorticoids \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
38. Is not recommended in most cases
39. Should be used at the lowest dose
40. Should be used only for a short duration
41. B & C
42. **A, B & C**
43. **Which of the following can be used as first line treatment or after a short course of NSAIDs in psoriatic arthritis?**
44. Methotrexate
45. Sulfasalazine
46. Leflunomide
47. A & B
48. **A, B & C**
49. **Complete blood count and liver function test should be conducted \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
50. Before starting DMARDs.
51. Regularly during treatment with DMARDs.
52. **A & B**
53. **Choose the statement that is FALSE**
54. A patient with mild form of psoriatic arthritis who is not responding to methotrexate can be switched to another conventional DMARD.
55. In a patient with sustained remission on methotrexate, the DMARD can be carefully tapered down to smaller doses as maintenance.
56. **Methotrexate can be used in pregnancy to treat psoriatic arthritis.**
57. Methotrexate can be used with NSAIDs in patients with psoriatic arthritis.
58. **Which of the following is a biologic DMARD?**
59. Adalimumab
60. Secukinumab
61. Ustekinumab
62. **All of the above**
63. **In psoriatic arthritis, TNFi, IL-12/23i, and IL-17i \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
64. Can be used after inadequate response to conventional DMARDs
65. Are administered as oral medications
66. Can be used as an add-on therapy to methotrexate
67. **A & C**
68. A, B & C
69. **For patients on biologic DMARDs, monitor changes in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
70. Renal function
71. Liver enzymes
72. Albumin levels
73. A & B
74. **A, B & C**
75. **Before starting biologics, patients may be screened for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
76. Tuberculosis
77. HIV
78. Hepatitis B and C
79. A & C
80. **A, B & C**
81. **In psoriatic arthritis, tofacitinib can be used \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
82. After inadequate response to conventional DMARD
83. After inadequate response to biologic DMARD
84. If the patient does not prefer subcutaneous injections
85. A & C
86. **A, B & C**
87. **Tofacitinib should NOT be used in patients with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
88. Hepatic impairment
89. Low neutrophil or lymphocyte count
90. Hemoglobin level > 9 g/dL
91. **A & B**
92. A, B & C
93. **In psoriatic arthritis, apremilast is used \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
94. After an inadequate response to conventional DMARDs
95. When biologic DMARDs or JAKi are not suitable
96. In patients with poor prognosis
97. **A & B**
98. A, B & C
99. **In a patient with psoriatic arthritis and severe renal impairment, the dose of apremilast should be reduced.**
100. **True**
101. False
102. **Choice of treatment for psoriatic arthritis \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
103. Should target as many manifestation of a patient’s disease as possible
104. Is driven by the most severe element of the patient’s disease
105. Should consider extraarticular manifestations such as inflammatory bowel disease and uveitis
106. A & B
107. **A, B & C**
108. **Which of the following can be used in psoriatic arthritis patients with concomitant inflammatory bowel disease?**
109. Adalimumab
110. Infliximab
111. Ustekinumab
112. A & B
113. **A, B & C**
114. **Which of the following can be used in psoriatic arthritis patients with concomitant uveitis?**
115. Adalimumab
116. Infliximab
117. Ustekinumab
118. **A & B**
119. A, B & C
120. **Which of the following comorbidities in patients with psoriatic arthritis should be detected early and managed?**
121. Cardiovascular disease
122. Diabetes
123. Depression
124. A & B
125. **A, B & C**
126. **Choose the statement that is FALSE**
127. Patients on biologics should be monitored for serious infections.
128. Influenza vaccination is recommended for patients with psoriatic arthritis.
129. **Biologic treatment should not be stopped in patients with psoriatic arthritis and infection.**
130. Patients on biologics may experience injection site reactions.

**Pre- and post-training knowledge assessment questionnaire for Module 4: Role of nurses in psoriatic arthritis management**

1. **Which of the following describes a multidisciplinary team model of care for psoriatic arthritis?**
2. Patient is assessed simultaneously by a dermatologist, rheumatologist and a specialist nurse.
3. Patient is first assessed in the dermatology or rheumatology clinic, followed by the other clinic.
4. **A & B**
5. **According to EULAR 2018, rheumatology nurses \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
6. Are part of a healthcare team
7. Provide evidence-based care
8. Involve patients in decision making
9. A & B
10. **A, B & C**
11. **The roles of nurses include \_\_\_\_\_\_\_\_\_\_\_**
12. Providing needs-based education to patients
13. Providing psychosocial support to patients
14. Coordinating referrals and collaborative care
15. A & C
16. **A, B & C**
17. **Nurses help with clinical assessment and monitoring.**
18. **True**
19. False
20. **Nursing interventions can help patients \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
21. Improve their quality of life
22. Reduce the burden of symptoms
23. Adhere to treatments
24. A & C
25. **A, B & C**
26. **Patients who had trouble doing daily tasks, such as opening a jar are likely to have the following psoriatic arthritis symptoms**
27. Axial disease
28. Nail dystrophy
29. **Peripheral arthritis**
30. A & B
31. A, B & C
32. **Patients who complained of low back pain are likely to have the following psoriatic arthritis symptoms**
33. **Axial disease**
34. Dactylitis
35. Peripheral arthritis
36. A & C
37. A, B & C
38. **Patients with pain in their heel, knee, or elbow are likely to have the following psoriatic arthritis symptoms**
39. Axial disease
40. **Enthesitis**
41. Dactylitis
42. B & C
43. A, B & C
44. **Patients with complete swelling of a single finger or toe are likely to have the following psoriatic arthritis symptoms**
45. Axial disease
46. Enthesitis
47. **Dactylitis**
48. Nail dystrophy
49. All of the above
50. **Patients with red, itchy, and scaly patches on their skin are likely to have the following psoriatic arthritis symptoms**
51. Axial disease
52. Enthesitis
53. Dactylitis
54. **Psoriatic skin lesions**
55. All of the above
56. **Choose the statement that is FALSE**
57. **The CASPAR criteria has high sensitivity but low specificity for psoriatic arthritis.**
58. Self-administered screening questionnaires are useful diagnostic tool in psoriatic arthritis.
59. PEST, PASE, and EARP questionnaires have been validated in patients with psoriasis.
60. In clinical practice, ruling out conditions that resemble psoriatic arthritis is important for a definitive diagnosis.
61. **Nurses are NOT encouraged to teach patients to administer subcutaneous biologic therapy at home.**
62. True
63. **False**
64. **Nurses should be familiar with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
65. Possible adverse events of treatments
66. Contraindications and drug interactions
67. Treatment monitoring requirements
68. A & B
69. **A, B & C**
70. **Which of the following composite disease activity measures for psoriatic arthritis involve the joints?**
71. DAPSA
72. MDA
73. PASDAS
74. A & B
75. **A, B & C**
76. **Which of the following composite disease activity measures for psoriatic arthritis focuses on enthesitis?**
77. DAPSA
78. MDA
79. PASDAS
80. **B & C**
81. A, B & C
82. **Which of the following composite disease activity measures for psoriatic arthritis focuses on dactylitis?**
83. DAPSA
84. MDA
85. **PASDAS**
86. A & B
87. A, B & C
88. **Which of the following composite disease activity measures for psoriatic arthritis focuses on skin?**
89. DAPSA
90. **MDA**
91. PASDAS
92. A & B
93. A, B & C
94. **According to EULAR, treatment aim for psoriatic arthritis can be \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
95. Remission
96. Minimal disease activity
97. **A & B**
98. **Treatment should be adapted according to disease activity. Other considerations include \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
99. Extra-articular manifestations
100. Comorbidities
101. Possible adverse events of treatments
102. B & C
103. **A, B & C**
104. **Choose the statement that is FALSE**
105. Patient-reported outcome measures are important because patients may rate their disease activity higher than their physicians.
106. **A full traditional 66/68 joint count is not necessary during follow-up assessments of psoriatic arthritis.**
107. For patients, achieving clear or almost clear skin is linked to clinically important differences in their quality of life.
108. The PASI calculator is available on the free GRAPPA mobile phone app.