

Date:	
EMT #:	

1. Your patient is a 28-year-old male who cut his thigh with a chain saw. It appears that he has lost about 600 cc of blood. Which of the following is NOT part of the proper management of this patient?

Name: \_\_\_\_

- A. Use of a tourniquet
- B. Replacement of fluid level by giving the patient adequate amounts of water
- C. Using direct pressure to control the bleeding
- D. Administering oxygen
- 2. Which of the following injuries requires the use of an occlusive dressing?
- A. An open wound to the neck
- B. An open wound to the abdomen from which a loop of intestine is protruding
- C. An open wound to the chest
- D. All of the above
- 3. When using the rule of palm to estimate the approximate body surface area burned, the patient's palm equals about what percentage of the body's surface area?
- A. 1 percent
- B. 2 percent
- C. 5 percent
- D. 3 percent
- 4. You're an off-duty EMT who encounters a patient sitting behind the wheel of a vehicle that ran off the road along an isolated county road. It appears the patient was unrestrained, or not wearing a seat belt, and struck the steering wheel with his chest. On assessment, you notice a paradoxical motion to the patient's chest on inspiration and expiration. When you radio for dispatch of an ambulance, which of the following pieces of information would you be sure to include?
- A. The patient may have an abdominal evisceration.
- B. The patient is showing signs of abdominal bleeding.
- C. The patient is showing signs of an open chest injury.
- D. The patient may have a flail chest.



- 5. Your patient is a 20-year-old college student who has fallen from a third-level balcony onto a wooden deck below. The patient responds to verbal stimuli, is pale in color with moist skin, and has a very obvious deformity with protruding bone ends of his right forearm. Which of the following is the BEST sequence of intervention for this patient?
- A. Provide manual in-line stabilization of the cervical spine along with assessment of breathing, pulse, and the presence of significant hemorrhage; apply high-concentration oxygen; perform a rapid trauma exam; immobilize to a long backboard; transport; and splint the extremity en route if time and resources allow.
- B. Open the airway; assess breathing; check the carotid pulse; splint the forearm injury; immobilize the patient to a long backboard; apply high-concentration oxygen; and transport.
- C. Provide immediate manual in-line stabilization of the cervical spine; apply high-concentration oxygen by nonrebreather mask; perform a focused history and assessment; apply the cervical collar; apply a padded board splint, sling, and swathe to the forearm injury; and transport.
- D. Provide manual in-line stabilization of the cervical spine along with assessment of breathing, pulse, and the presence of significant hemorrhage; apply highconcentration oxygen; perform a rapid trauma exam; immobilize to a long backboard; and check with medical control about the need to splint the forearm injury prior to transport.
- 6. Your patient is pregnant at 20 weeks' gestation and has been thrown from a horse. She is complaining of back pain. Which of the following is the correct procedure for immobilizing her spine?
- A. Use a short immobilization device and transport the patient in a sitting position.
- B. Place the patient supine on the backboard.
- C. Place the patient on her left side on the backboard.
- D. Place the patient supine on the backboard, then put a pillow under the right side of the backboard.
- 7. What is the Glasgow Coma Scale (GCS) of your adult male patient who has fallen off a horse, has his eyes open, can follow your commands to squeeze his hands, but is confused about what happened and his whereabouts?
- A. 12
- B. 14
- C. 15
- D. 13



8. According to CDC guidelines, a systolic blood pressure of less than _	
indicates a patient should be transported to a trauma center.	

- A. 90
- B. 110
- C. 130
- D. 80

#### 9. Without this element, the cell would dehydrate and die.

- A. Glucose
- B. Proteins
- C. Water
- D. Oxygen

# 10. This type of metabolism occurs when energy is created with a balance of adequate oxygen and nutrients.

- A. Anaerobic
- B. Aerobic
- C. Hypoxic
- D. Homeostatic

#### 11. What is a patent airway?

- A. A rigid suction device used to remove fluid and foreign objects from the pharynx to secure the airway
- B. A term used by EMS practitioners to indicate that the patient has a secured and opened airway necessary for life
- C. The condition of the patient's airway at the start of a lifesaving intervention
- D. An airway that is in need of securing via an oral or nasal pharyngeal airway

# 12. If a hole is created in the chest wall, air could escape or be drawn in, or if bleeding develops within the chest, air and blood can accumulate in the pleural space. This would force the lung to:

- A. increase respirations.
- B. increase the minute volume.
- C. collapse.
- D. work harder with minimal problems.



- 13. You have performed a head tilt-chin lift maneuver on a 17-month-old boy and are attempting to ventilate him with a bag-valve mask. You are experiencing a lot of resistance with each breath and the chest is barely rising. Prior to attempting ventilations again, you should:
- A. visually examine the airway.
- B. tilt the head back further due to the size of their head.
- C. perform chest thrusts.
- D. ease the head forward a little due to the size of their head.
- 14. You are ventilating an 85-year-old male without difficulty. A nurse tells you that the patient has dentures. To ensure a good mask seal, you should:
- a. tape the dentures in place.
- b. remove the dentures.
- c. leave the dentures in place.
- d. use an infant mask over the nose.
- 15. Which of the following is an advantage of using a nasopharyngeal airway?
- A. It eliminates the need for manual positioning of the patient's head to keep the airway open.
- B. It is ideal for patients with a suspected skull fracture.
- C. It may be tolerated by many patients with a gag reflex.
- D. All of the above



## 16. Which of the following patients does NOT require the administration of supplemental oxygen?

- A. A 60-year-old woman with a history of chronic obstructive pulmonary disease (COPD) who can speak two or three words at a time without a breath
- B. A 6-year-old male with a history of asthma whose breath sounds are silent and who is drowsy
- C. A 31-year-old male who is unresponsive due to an overdose of narcotics
- D. A 24-year-old woman who is breathing 28 times per minute after being in an argument with her husband
- 17. You are called to assist a 25-year-old female patient who is in profound respiratory distress. The patient has a history of asthma and severe allergies to peanuts. She has a prescribed albuterol inhaler and an epinephrine auto-injector. The patient states she was working on her garden when she accidentally stirred up a hornets' nest and was stung multiple times. The patient has wheezing in all fields, and is breathing at 28 times per minute. She states that she triggered her asthma by running across the yard to the safety of her home. As you apply oxygen, you notice that she is now speaking in two- to three-word sentences, her skin has splotches, and her tongue and neck appear to be swelling. Your next action is to call medical control and then do what?
- A. Request to assist the patient with her Albuterol inhaler for her asthma.
- B. Request to assist the patient with her epinephrine pen for anaphylaxis.
- C. Request to assist the patient with her Albuterol for anaphylaxis.
- D. Do not request to give epinephrine. It was prescribed for a peanut reaction, not for asthma.
- 18. You are on the scene at a fancy hotel room for a 60-year-old male patient who calls 911 at 10 p.m. for chest pains. He states he was about to go to bed when he suddenly had chest pain that would not go away. He rates his pain as a 7 out of 10 and is diaphoretic. His vital signs are stable, and he takes medications for hypertension, high cholesterol, and erectile dysfunction. The patient has used his erectile dyfunction medication with in the last 12 hours. The patient is allergic to morphine and has his prescribed nitroglycerin and aspirin with him. After placing the patient on oxygen what should you do next?
- A. to administer aspirin to the patient.
- B. to administer nitroglycerin to the patient.
- C. to administer both aspirin and nitroglycerin to the patient.
- D. no orders.



- 19. How does aspirin actually reduce the chances that a patient suffering a heart attack will die?
- A. It reduces the amount of pain in the heart.
- B. It prevents a deadly fever from developing.
- C. It reduces the inflammation in the heart.
- D. It reduces the ability of the blood to form clots.
- 20. You are on the scene of a 22-year-old female patient with a history of asthma who is complaining of respiratory distress. She states she was arguing with her boyfriend, and that triggered her asthma. Vital signs are blood pressure 120/80, pulse 110, respiratory rate 32, and SpO<sub>2</sub> 99 percent on room air. Her lung sounds are clear in all fields and there are no other significant findings. Her medications include an Albuterol inhaler and Xanax® for "stress." After performing your primary assessment, what should you do next?
- A. Provide oxygen by bag-valve mask.
- B. Assist the patient with her Albuterol medication.
- C. Provide oxygen by nonrebreather mask.
- D. Provide supportive care and reassess her vital signs.
- 21. You are on the scene of a 64-year-old male patient in respiratory distress. The patient is flushed and seated in the tripod position. He states he woke up with respiratory distress that is provoked by lying down. He is breathing 28 times a minute. He is alert and oriented to time, place, and person. His lung sounds are coarse crackles (rales) in all fields, blood pressure of 160/90, heart rate is 128, and his oxygen saturation level is 92 percent. The patient has a history of angina and has prescription nitroglycerin. However, he is not complaining of chest pain. After performing the primary assessment and requesting an ALS unit, what should you do next?
- A. Place the patient on 15 lpm by nonrebreather mask.
- B. Place the patient on 15 lpm per minute by bag-valve mask.
- C. Place the patient in the Trendelenburg position for shock.
- D. Administer nitroglycerin to the patient.



- 22. You are on the scene of a 5-year-old patient who is in respiratory distress. The mother states that the patient has been making a "seal bark"-sounding cough for the past 24 hours. The child is very scared. The patient has stable vital signs. He is leaning forward in the tripod position and is drooling profusely. After performing your primary assessment, what is your best treatment option?
- A. Provide high-concentration oxygen and have the parent hold it to the patient's face.
- B. Provide oxygen by nasal cannula.
- C. Use a tongue depressor to examine the patient's mouth to determine whether the patient has strep throat or croup.
- D. Calm the child as much as possible and provide oxygen by blow-by.
- 23. Which of the items below is not part of the Cincinnati Stroke Test?
- A. Test for equal grip strength.
- B. Ask the patient to smile.
- C. Have the patient repeat a simple sentence.
- D. Test the patient for arm droop or lack of movement.
- 24. You are called to the scene of a 16-year-old female patient complaining of severe left lower quadrant abdominal pain. The patient states she is sexually active. Upon palpation, you observe rebound tenderness in the right lower quadrant in creasing the pain. You suspect:
- A. appendicitis.
- B. ectopic pregnancy.
- C. cholecystitis.
- D. renal colic.
- 25. There are two main types of dialysis, hemodialysis and peritoneal dialysis. The main difference between them is:
- A. hemodialysis is usually done at a special facility and peritoneal dialysis is usually done at home.
- B. hemodialysis is usually done at home and peritoneal dialysis is usually done at a special facility.
- C. hemodialysis filters the blood and peritoneal dialysis filters the urine.
- D. hemodialysis filters the urine and peritoneal dialysis filters the blood.