Pretest
Comprehensive Advanced Life Support: Provider Course

Please, use the answer sheet provided to record your answers and bring the completed answer sheet to class. Answer sheets will be collected the first day of class (in the morning when you arrive), corrected and returned to you at the end of the first day. There is only one correct answer for each question.

1. Which of the following circumstances indicates the need for team activation?
   A. First time seizure patient who is awake and alert
   B. Patient injured in a MVC who has a systolic BP of 112
   C. Newborn infant who was limp at delivery, but is now crying vigorously
   D. A patient who is unconscious with an airway compromise

2. Which of the following patients would NOT be an ideal candidate for RSI?
   A. A patient with muscle rigidity with jaw clenching and hypoxia
   B. A head injured patient who is combative and agitated
   C. A patient with angioedema from an ACE inhibitor reaction
   D. An overdose patient responding only to pain

For questions 3-6, Column A contains statements regarding medications and Column B contains a list of medications. Choose the medication from Column B that best fits the statement in column A.

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. _____ Avoid if potassium is elevated</td>
<td>A. Etomidate</td>
</tr>
<tr>
<td>4. _____ Pre-medication for a child</td>
<td>B. Atropine</td>
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<td>5. _____ Use with caution in septic shock</td>
<td>C. Succinylcholine</td>
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<td>6. _____ Useful if the patient is an asthmatic</td>
<td>D. Ketamine</td>
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</tbody>
</table>

7. Which drug categories should the post intubation plan include?
   A. Sedative, analgesic, antibiotic
   B. Paralytic, analgesic, antiemetic
   C. Paralytic, sedative, analgesic
   D. Antibiotic, analgesic, antiemetic

8. Symptoms of an epidural hematoma with herniation include:
   A. Hypertension and bradycardia
   B. Decreased urinary output
   C. Bleeding from ear
   D. Hypotension and bradycardia

Revised April 24, 2011
9. The initial steps of neonatal care include:
   A. Stimulate, administer oxygen with the BVM, and medications
   B. Stimulate, administer chest compressions, and medications
   C. Dry, warm, position, suction, stimulate
   D. Dry, warm, position, medications, chest compressions

10. A baby is delivered in the Emergency Department. Thick green fluid is noted and the baby is limp. What is the initial step in resuscitation?
   A. Move the patient to the delivery room
   B. Suction the trachea for meconium
   C. Dry the baby thoroughly
   D. Stimulate the baby by rubbing the feet

11. A 36-year-old patient is brought to the emergency department by an ambulance with decreased level of consciousness and shallow breathing. The most effective initial airway management is:
   A. Rapid Sequence Intubation
   B. Cricothyrotomy
   C. Tracheotomy/Transtracheal Needle Ventilation
   D. Bag-valve-mask

12. HELPERR is the mnemonic used in:
   A. Vacuum delivery
   B. Shoulder dystocia
   C. Uterine atony
   D. Malpresentations

13. A 2 year-old child must be intubated. Which of the following statements is true?
   A. The larynx and tracheal cartilage are easily compressed during hyperextension
   B. The length of the child's trachea is similar to that of the adult trachea
   C. Lift the epiglottis, using a straight blade, to avoid gagging during intubation
   D. The cricoid cartilage forms the widest part of the airway in infants and small children

14. An unconscious 50 year-old obese patient with a thick neck must be intubated. Airway control with the bag-mask is very difficult. Visual examination is predictive of a difficult intubation. The first intervention would be:
   A. Increase the tidal volume and continue the use of the bag-valve-mask with an oral airway
   B. Perform a cricothyroidotomy
   C. Attempt intubation using a bougie
   D. Perform a nasal intubation

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15. A 26-year-old male has a penetrating injury on the left side of the thoracic spine. He is unable to move his left leg. He has movement but loss of sensation in the right leg. These findings suggest:

A. Sacral sparing
B. Central Cord syndrome
C. Brown-Sequard syndrome
D. Cauda Equina syndrome

16. A 48-year-old male involved in a MVC is receiving mannitol for a head injury. He has blood at the urinary meatus and a distended bladder. You would:

A. Start IV antibiotic
B. Insert a urinary catheter
C. Wait for a surgeon to insert a suprapubic catheter
D. Suspect a urethral disruption

For questions 17-20, match Column A to the airway device in Column B.

<table>
<thead>
<tr>
<th>Column A</th>
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<tbody>
<tr>
<td>17. _____ Blind insertion</td>
<td>A. TTNV</td>
</tr>
<tr>
<td>18. _____ Insertion guided with fingers</td>
<td>B. Cricothyrotomy</td>
</tr>
<tr>
<td>19. _____ Temporary device used less than 45 min.</td>
<td>C. LMA</td>
</tr>
<tr>
<td>20. _____ May be first choice in facial trauma</td>
<td>D. King tube</td>
</tr>
</tbody>
</table>

21. To inspect the back of a patient with an open book pelvic fracture:

A. Logroll
B. Perform a multiple person lift
C. Do not inspect the posterior surfaces
D. Palpate by sliding the hand behind the back

22. The major cause of shock in the trauma patient is:

A. Blood loss
B. Burns
C. Sepsis
D. Pain

23. A 3-year-old child presents with multiple trauma. An intraosseous needle was placed by prehospital. The child is tachycardic with delayed capillary refill. Which statement is NOT true?

A. Medications cannot be given through an intraosseous needle
B. A pressure infusor is necessary
C. An intraosseous needle should be used for fluid resuscitation
D. Administer a 20 ml/kg bolus using a syringe and stopcock for administration

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24. A 16-year-old with a known seizure disorder is brought to the ER with status epilepticus. He has been seizing for one hour. Which of the following statements is true?

A. Administer a Dilantin (Phenytoin) loading dose immediately  
B. Lorazepam (Ativan) is the first drug used with known seizures  
C. Diazepam (Valium) can only be given IV in the patient having seizures  
D. Lorazepam (Ativan) causes more respiratory depression than Diazepam

25. Fosphenytoin (Cerebyx) is ordered for a seizure patient. It is preferred over Phenytoin because:

A. It can be given intravenous or IM  
B. It costs the same as Phenytoin (Dilantin)  
C. It has no adverse reactions  
D. It can be given slower than Phenytoin (Dilantin)

26. A 34-year-old pregnant female presents to the ER following a motor vehicle collision. You suspect a pelvic fracture. Which problem(s) do you watch for?

A. Placental Abruptio  
B. Fetal distress/injury  
C. Uterine rupture  
D. All of the above

27. The first four drugs to consider using for the patient with acute coronary syndrome are:

A. B-Blockers, Nitroglycerin, Heparin, Ace Inhibitors  
B. Morphine, Oxygen, Nitroglycerin, Aspirin  
C. Oxygen, Nitroglycerin, Aspirin, Heparin  
D. B-Blockers, Nitroglycerin, Heparin, Magnesium

_for questions 28-31, Column A lists locations of infarct and Column B lists the area of the ECG that will correspond. Match Column B with Column A._

<table>
<thead>
<tr>
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<tr>
<td>28. ______ Anterior</td>
<td>A. 2, 3, AVF</td>
</tr>
<tr>
<td>29. ______ Inferior</td>
<td>B. 1, AVL, V5, V6</td>
</tr>
<tr>
<td>30. ______ Lateral</td>
<td>C. V1-V4</td>
</tr>
<tr>
<td>31. ______ Right ventricle</td>
<td>D. V4R</td>
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32. Which of the following patients would _NOT_ be a candidate for fibrinolytic therapy?

A. A 40 year-old female with her menstrual flow. The ECG indicates an inferior MI  
B. 66 year-old male resuscitated by prehospital after 5 minutes of CPR and one defibrillation  
C. 62 year-old male with a closed head injury after a MVC 8 weeks ago  
D. 85 year-old with diabetes and ECG changes indicate an anterior MI

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33. A 62 year-old female is brought to the ER by EMTs after a MVC. On arrival, she is unresponsive, decreased breath sounds on the right with jugular venous distention. She is difficult to ventilate. Your first action should be:

A. Obtain a chest x-ray  
B. Place a chest tube  
C. Perform a needle thoracostomy  
D. Perform a rapid sequence intubation

4. A 78 year-old patient is brought to the Emergency Department because of sudden paralysis of the left side and aphasia. His BP is 170/94. Before administering fibrinolytics, it is important to:

A. Obtain a CT to exclude intracerebral hemorrhage  
B. Initiate antihypertensive medication to lower the BP  
C. Confirm that symptom onset was less than 6 hours  
D. Call the pharmacy

35. A 24 year-old male is brought to the ER following a motorcycle collision. He responds to pain only. BP is 70/40, HR is 120 and he is being successfully ventilated by a bag-valve-mask. His abdomen is tender to palpation. The CT tech is not in house and the surgeon is out of town. The tertiary hospital is 75 miles away. Care for this patient should be:

A. Stabilize, obtain lab and x-rays and call for transport  
B. Call for transport, stabilize, and transport by air (weather permitting)  
C. Stabilize, type and cross, call for consultation, transport by ground  
D. Stabilize, obtain x-rays, and accompany patient to the tertiary hospital

36. The sequence for stabilization of the above patient would be to:

A. Establish IV access, do rapid sequence intubation, initiate pressors  
B. Establish IV access, do peritoneal lavage, give blood products  
C. Establish IV access, initiate fluid resuscitation, rapid sequence intubation  
D. Establish IV access, cricothyrotomy, fluid resuscitation

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