ITLS Pediatric Provider Course
Advanced Pre-Test

1. You arrive at the scene of a motor vehicle crash and are directed to evaluate a child who was in one of the vehicles. The patient appears to be a child with special health care needs. You should:
   A. Obtain the medical history of the child and then begin the ITLS Primary Survey
   B. Begin the ITLS Primary Survey and have the parent nearby to obtain additional information
   C. Decide the patient is load-and-go and prepare for transport because you will not be able to accurately assess the child due to the special health care needs
   D. Begin the ITLS Primary Survey and have the parent removed from the area because they will distract you from a proper assessment

2. A 4-year-old is in the rear seat of a car that was struck from behind. The child has a mid-abdominal seat belt abrasion and is complaining of abdominal pain. Which of the following associated injuries is most likely in this situation?
   A. Femur fracture
   B. Knee dislocation
   C. Lumbar spine fracture
   D. Skull fracture

3. What is the most commonly injured abdominal organ in a child?
   A. Duodenum
   B. Liver
   C. Pancreas
   D. Spleen
4. Which of the following is most consistent with EARLY hypovolemic shock in a 1-year-old?
   A. Pulse, 120 bpm; BP, 80/60
   B. Pulse, 120 bpm; BP, 60/30
   C. Pulse, 160 bpm; BP, 80/60
   D. Pulse, 160 bpm; BP, 60/30

5. Which of the following findings are most consistent with increased intracranial pressure in a child?
   A. High BP; fast pulse
   B. High BP; slow pulse
   C. Low BP; fast pulse
   D. Low BP; slow pulse

6. Which of the following is considered normal for newborn to 3-month-old infant?
   A. Respiratory rate of 40 bpm
   B. Pulse of 80 bpm
   C. Sunken fontanel
   D. Respiratory retractions

7. Injury to what area of the body is the leading cause of traumatic death?
   A. Extremities
   B. Head
   C. Chest
   D. Abdomen

8. Which of the following statements is most important in the field management of the hypothermic submersion?
   A. Keep the patient in the water until you are ready to transport
   B. Apply warm, moist towels to the body surface
   C. Initiate warmed humidified oxygen
   D. Remove wet clothing and dry the patient
9. Which of the following causes the greatest amount of stress to a 2-year-old child?
   A. Separation from parents
   B. Oxygen mask on the face
   C. Scolding by a relative
   D. Lost blanket

10. Which of the following is the LAST sign of compartment syndrome to develop?
    A. Absent pulse
    B. Decreased sensation
    C. Severe pain
    D. Swelling

11. Which of the following is the most common cause of traumatic cardiopulmonary arrest in a child?
    A. Cardiac tamponade
    B. Respiratory compromise
    C. Cervical spine fracture
    D. Tension pneumothorax

12. Which of the following is TRUE regarding flail chest in a child?
    A. Diagnosed by tracheal deviation
    B. Often associated with severe lung injury
    C. Treated with needle decompression
    D. Usually not very serious

13. You are called to the home of a 9-month-old child who has second-degree burns from the waist down. The mother says the child crawled into the tub, turned on the hot water, and then sat in the water. The boyfriend says the child’s 2-year-old sister turned on the water. What is the most appropriate course of action?
    A. Call the police to the house
    B. Explain to the family that you suspect abuse and ask for a better history of what happened
    C. Notify the local children’s services department and ask them to come to the house
    D. Transport the child to the hospital and then report your concerns to the appropriate agencies
14. A 10-year-old is first evaluated three hours after suffering third-degree burns to 50 percent of his body. His unburned skin feels cool and clammy, pulse is rapid, and breath sounds are clear and equal. Which of the following best explains these findings?
   A. Hemorrhage
   B. Hypovolemia
   C. Hypoxia
   D. Sepsis

15. Pediatric patients with suspected extremity fractures should:
   A. Be assessed in the same manner as an adult
   B. Be assessed utilizing the specialized pediatric fracture criteria (PFC)
   C. Not be treated for pain because they have a high pain tolerance
   D. Not have the joint above or below a fracture site immobilized because this may cause damage to the growth plates

16. You have completed the Scene Size-Up and Initial Assessment of a pediatric patient who was involved in a roll-over MVC. Your next step is to:
   A. Perform a Focused Exam
   B. Perform a Rapid Trauma Survey
   C. Perform an ITLS Ongoing Exam
   D. Load-and-go

17. Which one of the following is TRUE regarding pediatric vital signs?
   A. Normal vital signs vary among pediatric age groups
   B. Normal systolic BP is the child's age, in years, multiplied by 2 and added to 70
   C. Normal pulse rate is the child's age, in years, multiplied by 4 and subtracted from 150
   D. Normal respiratory rate is the child's age, in years, multiplied by 4 and subtracted from 40

18. The best way to recognize EARLY shock in children is:
   A. Tachycardia and poor perfusion
   B. Oxygen saturation of below 96% and tachycardia
   C. Rapid breathing and bradycardia
   D. Slow breathing and bradycardia
19. Which of the following statements is TRUE about spinal motion restriction for children?
   A. It is well tolerated by children because they think it is a game
   B. Adult equipment may be used as long as the principles of securing and neutral position are maintained
   C. Pediatric-specific spinal motion restriction devices are required
   D. It should not be performed on the conscious pediatric patient

20. Injury to which abdominal organ most commonly causes death in the child?
   A. Kidney
   B. Liver
   C. Pancreas
   D. Spleen

21. What is the narrowest portion of an infant’s airway?
   A. Epiglottis
   B. Oropharynx
   C. Subglottic area
   D. Vocal cords

22. Compared to an adult airway, which of the following is TRUE of the child’s airway?
   A. The epiglottis is angled away from the trachea
   B. The larynx is lower down in the neck
   C. The subglottic area is the widest portion of the larynx
   D. The tongue is relatively smaller

23. Needle decompression of the chest in children is indicated for:
   A. Open pneumothorax
   B. Massive hemothorax
   C. Unrelieved airway obstruction above the cricothyroid membrane
   D. Diminished breath sounds, hypotension, distended neck veins and tracheal deviation
24. Which of the following regarding pediatric intubation is TRUE?
   A. The glottic opening is the narrowest part of the pediatric airway
   B. Nasotracheal intubation is the method of choice in the traumatized child
   C. The Sellick maneuver should not be used on a child
   D. Suctioning an infant may cause bradycardia

25. A 3-year-old weighing 10 kg. is injured in a motor vehicle collision. His skin is cool and pale. Vital signs are: respiratory rate, 40 bpm; pulse rate, 140 bpm; and BP, 70/40. Which of the following initial intravenous fluid therapies is most appropriate?
   A. D5W at keep-open rate
   B. Normal Saline at keep-open rate
   C. Normal Saline 100 mL bolus
   D. Normal Saline 200 mL bolus