1. Which of the following organs is contained in the retroperitoneal region of the abdomen?
   A. Stomach
   B. Liver
   C. Kidney
   D. Uterus

2. What is Sellick's maneuver?
   A. A method allowing the rescuer to hold a mask on the face with both hands
   B. A system used to calculate minute volume
   C. Another name for Mallampati
   D. Posteriorly directed pressure applied to the cricoid cartilage

3. Which one of the following viruses is there currently an effective vaccine?
   A. Delta hepatitis
   B. Hepatitis B
   C. Hepatitis C
   D. Human immunodeficiency virus

4. A 16 year old girl is rescued from a burning house. She has 25% partial thickness burns, and the burned areas are hot to the touch. What is the appropriate treatment?
   A. Apply ice to burned areas until cool to touch
   B. Apply clean water to burned areas for up to 1-2 minutes
   C. Apply iced water to burned areas until cool to touch
   D. Do not apply anything to burned areas other than clean sheets

5. Proper immobilization of a forearm (radius and ulna) fracture involves splinting which of the following?
   A. Elbow and fracture site
   B. Fracture site only
   C. Wrist and fracture site
   D. Wrist, elbow, and fracture site

6. What treatment is NOT indicated in the routine management of the patient with a head injury?
   A. Administration of 100% oxygen
   B. Fluid resuscitation to a BP of 110-120 systolic if the patient is hypotensive
   C. Hyperventilation to obtain an EtCO2 of less than 30
   D. Stabilization of the cervical spine

7. Which of the following sets of vital signs is most compatible with a diagnosis of isolated head injury with increasing intracranial pressure?
   A. BP 170/100, pulse 50/min
   B. BP 80/60, pulse 130/min
   C. BP 80/60, pulse 50/min
   D. BP 170/100, pulse 130/min

8. Which of the following trauma situations would be considered “load and go”? 
   A. Awake and alert patient who has blood coming out of one ear
   B. Patient who had brief loss of consciousness but is now awake
   C. Patient with abdominal tenderness, clammy skin, blood pressure 100/70, and pulse 130/min
   D. Patient with tender, deformed lower leg
9. Which one of the following is a reason to interrupt the initial assessment?
   A. Cardiac arrest
   B. Multiple open (compound) fractures
   C. Severe head injury with brain tissue visible
   D. Severe shock

10. A 24 year old woman is found lying on the sidewalk after jumping from a fourth story window. She is hypotensive, diaphoretic, tachycardic, and unconscious. Injuries include open skull fracture, pelvis fractures, and flail chest. What should be your goal for your time?
   A. 5 minutes or less
   B. 5 to 10 minutes
   C. 10 to 15 minutes
   D. As long as necessary to assess and stabilize the patient

11. Which of the following injuries would change an otherwise stable trauma patient's category from "stable" to "load and go"?
   A. Bilateral clavicle fractures
   B. Bilateral femur fractures
   C. Bilateral humerus fractures
   D. Bilateral tibia fractures

12. What is most commonly injured, during a fall from a height, of an infant?
   A. Head
   B. Chest
   C. Abdomen
   D. Extremities

13. Which of the following will generally suffer the LEAST structural damage from a gunshot wound from a rifle?
   A. Spleen
   B. Kidney
   C. Liver
   D. Lung

14. Which one of the following is typically associated with, post-traumatic hemorrhage, EARLY shock?
   A. Ventricular dysrhythmias
   B. Hypotension
   C. Loss of 30% to 45% of blood volume
   D. Narrowed pulse pressure

15. Among the following, what is the most common cause of preventable trauma death in the injured adult patient?
   A. Airway obstruction
   B. Cardiac tamponade
   C. Hemorrhagic shock
   D. Spinal injury

16. In which of the following situations should an emergency rescue be used?
   A. Leaking antifreeze from radiator
   B. Paralyzed patient
   C. Presence of toxic fumes
   D. Pregnant patient
17. Which of the following is most typical of early, neurogenic shock?
   A. Increased pulse, clammy skin
   B. Increased pulse, warm and dry skin
   C. Decreased pulse, clammy skin
   D. Decreased pulse, warm and dry skin

18. A 23 year old man is injured in a motorcycle collision. The patient appears disoriented and grossly intoxicated. There is a large laceration on his scalp which is actively bleeding. The patient refuses treatment and threatens to call his lawyer if anyone touches him. What should you do?
   A. Allow the patient to phone his lawyer
   B. Have the patient sign a release form, then let him go
   C. Have the patient placed under protective custody then treat and transport the patient using restraints if necessary
   D. Wait until the patient passes out from his head injury or bleeding then transport

19. A 54 year old man is involved in a motor vehicle collision. The steering wheel is bent. During your initial assessment you note his skin is pale and his radial pulses are present. Breath sounds are clear, heart tones are not muffled. Which one of the following is most consistent with these?
   A. Cardiac contusion
   B. Traumatic aortic rupture
   C. Flail chest
   D. Tension pneumothorax

20. What is the most common cause of cardiopulmonary arrest in the trauma patient?
   A. Brain injury
   B. Hypoxemia
   C. Myocardial contusion
   D. Ventricular arrhythmia

21. A 45 year old woman is found unconscious at the scene of a motor vehicle collision. Her vital signs are blood pressure, 80/40; pulse, 130/min; and respirations, 30/min. Which of the following is the MOST likely cause for her vital signs?
   A. Fractured lower legs
   B. Intra cranial hemorrhage
   C. Bleeding into the chest or abdomen
   D. Spinal cord injury with neurogenic shock

22. Which of the following regarding flow restricted oxygen-powered demand valves is TRUE?
   A. Allows for a good estimate of lung compliance
   B. Easy to determine the amount of volume delivered
   C. Gastric distension is not likely to occur
   D. Use of them is controversial and they may not be recommended for use

23. You respond to an adult patient who has a respiratory rate of 36 per minute, end tidal carbon dioxide level of 30 mmHg and an oxygen saturation of 80%. You should administer oxygen via:
   A. Non-rebreather mask at 12 liters per minute
   B. Nasal cannula at 6 liters per minute
   C. Venturi mask at 40%
   D. Bag-valve-mask ventilation with supplemental oxygen
24. Which of the following findings would be a reason to interrupt the primary survey?
   A. Airway obstruction
   B. Gaspings respirations
   C. Impaled object in abdomen
   D. Very weak pulse

25. Changes in which of the following is most useful to follow in the child with head injury?
   A. Frequency of vomiting
   B. Level of consciousness
   C. Reflexes
   D. Sensory exam

26. Which area of the spine is most susceptible to injury in a rear-impact motor vehicle crash?
   A. Cervical
   B. Thoracic
   C. Lumbar
   D. Sacral-coccygeal

27. Weakness, fast pulse, and normal blood pressure suggest what condition?
   A. Compensated hypovolemic shock
   B. Decompensated neurogenic shock
   C. Late burn shock
   D. Late hemorrhagic shock

28. A trauma victim has the following findings on primary survey: difficulty breathing, rapid and weak pulse, flat neck veins, midline trachea, decreased breath sounds on the left, and dullness to percussion on the left. What is the most likely injury?
   A. Cardiac tamponade
   B. Flail chest
   C. Tension pneumothorax
   D. Massive hemothorax

29. A 32 year old man is involved in a motor vehicle crash. The steering wheel is noted to be bent. During your initial assessment you note present and equal bilateral breath sounds; his pulse is rapid and weak, and his radial pulse disappears when he inhales. Which of the following injuries most likely does he have?
   A. Cardiac contusion
   B. Cardiac tamponade
   C. Flail chest
   D. Tension pneumothorax

30. An unrestrained 18 year old male on the way to a post-graduation party leaves the road, bounces through a ditch and hits a tree. You find him behind the bent steering wheel, unconscious, cool, pale and clammy, blue around the lips with labored respirations of 30 and shallow, thready radial pulses of about 120, distended neck veins, tracheal deviation to the right, and an asymmetrical chest with absent breath sounds on the left. You assume he has a:
   A. Cardiac tamponade
   B. Tension pneumothorax
   C. Massive hemothorax
   D. Simple pneumothorax
31. Which one of the following mnemonics can be used to help predict which patients might potentially have difficult bag mask ventilation?
   A. MMAP
   B. IPPV
   C. RSI
   D. BOOTS

32. An unrestrained 18 year old male on the way to a post-graduation party leaves the road, bounces through a ditch and hits a tree. You find him behind the bent steering wheel, unconscious, cool, pale and clammy, with labored respirations of 30 and shallow, thready radial pulses of about 120, flat neck veins, trachea midline, an asymmetrical chest with absent breath sounds on the left. You assume he has a:
   A. Cardiac tamponade
   B. Tension pneumothorax
   C. Massive hemothorax
   D. Simple pneumothorax

33. A 23 year old female has won the “Let’s-see-who-can-lean-the-farthest-backward-over-the-second-story-balcony-railing” contest. You arrive to find her boyfriend standing over her, holding two beers, as she lies on the grass under the balcony. She opens her eyes to voice, her skin is normal in color, respirations about 16 and unlabored, pulse 54 and a little weak at the wrist, with no external bleeding. She has flat neck veins, a normal chest and abdomen and a stable pelvis. First responders who arrived just before you, tell you that her pulse ox reading is 94 and her blood pressure is 74/30. If this is true,
   A. Hypovolemic shock
   B. Relative hypovolemic (high-space) shock
   C. Mechanical (obstructive) shock
   D. Cardiogenic shock

34. Which of the following may affect the reliability of a pulse oxymetry reading?
   A. Cyanide poisoning
   B. High ambient light
   C. Carbon monoxide poisoning
   D. All of the above

35. During the Primary Survey you recognize your patient is in need of immediate ventilator support, you delegate this intervention to a team member and you continue the Primary Survey. This delegation of interventions is called:
   A. the “Just Do It” process
   B. the “Treat It as You Find It” process
   C. the “Get It Done” process
   D. the “Fix It” process

36. Which of the following conditions is your FIRST priority in management of a trauma patient?
   A. Open the airway and assess for breathing
   B. Provide ventilator support for your patient
   C. Control major external bleeding
   D. Begin chest compressions if pulses are absent
37. In the absence of herniation syndrome, adult head injured patients should be:
   A. ventilated at a rate of 8-10 per minute
   B. ventilated at a rate of 12-14 per minute
   C. ventilated at a rate of 16-18 per minute
   D. ventilated at a rate of 20 per minute

38. Supine hypotension syndrome in the pregnant patient is caused by:
   A. uterine obstruction of venous blood flow
   B. atelectasis (collapse of small airways) of the lungs
   C. uterine pressure on the vagal nerve
   D. gastric reflux

39. Which of the following has a greater chance of surviving traumatic cardiopulmonary arrest?
   A. Patients who suffer blunt force trauma to the torso
   B. Patients with non-dilated pupils
   C. Patients with dilated unresponsive pupils
   D. Patients with penetrating chest trauma who are hypothermic

40. Tourniquet application should be limited to less than:
   A. 1 hour
   B. 2 hours
   C. 3 hours
   D. 4 hours

41. Hemostatic agents applied directly to the source of bleeding must be used in conjunction with:
   A. direct pressure to the wound
   B. tourniquets proximal to the wound
   C. pressure points to arteries proximal to the wound
   D. elevation of the wound above the level of the heart

42. Which assessment tool(s) may assist in predicting patient deterioration for someone who otherwise appears stable?
   A. Serum lactate levels
   B. Blood sugar levels
   C. Abdominal ultrasound
   D. A & C

43. Which of the following concerning blast injury is TRUE?
   A. Primary injury is cased by heat
   B. Secondary injury is caused by materials propelled
   C. Tertiary injury is caused by toxic fumes
   D. Quaternary injury is caused by the displacement of the body
44. What are the most important factors in determining injuries sustained in a fall?
   A. Distance, impact area on the body, surface struck
   B. Distance, clothing worn, surface struck
   C. Distance, movement during the fall, underlying medical conditions
   D. Distance, underlying medical conditions, surface struck

45. You have a patient with an isolated stab wound to the lateral chest. According to recent studies, which of the following procedures should be avoided?
   A. Assisting ventilations
   B. Supplemental oxygen
   C. Occlusive dressing
   D. Spinal motion restriction

46. The “Golden Period” begins:
   A. at the time of injury
   B. at the time your unit is dispatched
   C. when your unit arrives on scene
   D. when your unit leaves the scene for the hospital

47. Pulsus paradoxus is best described by which of the following?
   A. The radial pulse disappears upon inspiration
   B. The radial pulse is absent
   C. The radial pulse is stronger than the carotid pulse
   D. There are unequal radial pulses

48. As intracerebral pressure rises, after an isolated head injury, what does the systolic blood pressure do?
   A. Stays the same
   B. Decreases
   C. Increases
   D. Changes randomly

49. A 35-year-old male is found at the scene of a motor vehicle collision. He is alert and oriented and complaining of knee pain. Your assessment reveals a respiratory rate of 16 per minute non-labored, pulse rate of 88 per minute strong, blood pressure 124/64, unequal pupils and swelling to the isolated knee injury. What is the most likely cause of the unequal pupils?
   A. Pre-existing condition (anisocoria)
   B. Increased intracranial pressure
   C. Alcohol intoxication
   D. Hypotension

50. In the elderly which of the following findings is most likely caused by an acute injury?
   A. Edema of the lower extremities
   B. Hypotension
   C. Loss of lung tissue elasticity
   D. Decreased peripheral vision