

1. **Upon arrival at a trauma scene, you should complete a(n):**
 - A. Initial assessment
 - B. Scene size-up
 - C. Rapid trauma survey
 - D. ITLS Reassessment Exam

2. **Prolonged scene times may reflect:**
 - A. A decrease in death rates
 - B. Delivery of better care
 - C. Accomplishment of interventions
 - D. Ineffective team collaboration

3. **Which of the following indicates a state of hyperventilation?**
 - A. An adult respiratory rate greater than 18 per minute
 - B. A tidal volume of less than 400 ml
 - C. An oxygen saturation greater than 94%
 - D. An end-tidal carbon dioxide level less than 30 mmHg

4. **An unresponsive 34-year-old female was struck by a motor vehicle. You observe asymmetrical chest wall movement with a flail segment on the right. Following delegation of c-spine control and opening the airway, you should:**
 - A. Perform positive-pressure ventilation
 - B. Intubate
 - C. Place a cervical collar
 - D. Stabilize the chest wall

5. **A 23-year-old female fell from a second-floor balcony. Upon arrival, you find her lying in the grass. She responds to verbal commands and your assessment reveals flat neck veins, and normal chest, abdomen and pelvis examinations. Vital signs are BP 74/40, P 54 and weak, and R 16. You should suspect:**
 - A. Hypovolemic shock
 - B. Relative hypovolemic (high-space) shock
 - C. Mechanical (obstructive) shock
 - D. Cardiogenic shock

6. **Which of the following is the preferred ventilation rate for an adult patient with evidence of cerebral herniation syndrome secondary to a traumatic brain injury (TBI)?**
 - A. 8-10 per minute
 - B. 12-14 per minute
 - C. 16-18 per minute
 - D. 20-22 per minute

7. Which of the following sets of vital signs is most compatible with a diagnosis of isolated traumatic brain injury with increasing intracranial pressure?
- A. BP 170/100; P 50
 - B. BP 80/60; P 130
 - C. BP 80/60; P 50
 - D. BP 170/100; P 130
8. Which of the following statements is incorrect regarding spinal motion restriction?
- A. Patients should be removed from the long spine board when it is safe and practical to do so
 - B. Neck traction should be applied to extend the neck upward during cervical collar application
 - C. Remaining on the board for prolonged periods can produce discomfort, pressure sores, and respiratory compromise
 - D. A long backboard is not indicated in penetrating wounds of the torso, neck, or head unless there is clinical evidence of a spine injury
9. Which of the following is the most common cause of abdominal trauma?
- A. Penetrating trauma
 - B. Caustic ingestion
 - C. Aggressive bag-mask ventilation
 - D. Blunt force trauma
10. A 52-year-old male has an isolated knee dislocation. He is alert and oriented, BP 144/84, P 88, R 20. Pulses distal to the location are absent. You have an extended transport time. You should:
- A. Splint the injury in the position found
 - B. Place patient in a Trendelenburg position
 - C. Gently apply traction in an effort to realign the extremity to restore pulses
 - D. Flex the knee and splint to the opposite leg
11. Which of the following actions are appropriate to delegate to a team member during the ITLS Primary Survey?
- A. Apply oxygen
 - B. Determine level of consciousness
 - C. Evaluate the posterior side of the patient
 - D. Obtain vital signs

- 12. Which of the following changes is most useful to monitor in the child with head injury?**
- A. Frequency of vomiting
 - B. Level of consciousness
 - C. Reflexes
 - D. Sensory exam
- 13. In the geriatric patient, 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
- 14. In which clinical condition might you expect to see distended neck veins?**
- A. Flail chest
 - B. Hemothorax
 - C. Open pneumothorax
 - D. Pericardial tamponade
- 15. A disoriented 23-year-old male is injured in a motorcycle collision. The patient appears to be intoxicated and does not want medical attention despite a large laceration on his scalp, which is actively bleeding. You should:**
- A. Have the patient call a friend or family member and have them drive him home and sleep it off
 - B. Discuss the impact of alcohol abuse with him
 - C. Treat him as a head injured patient
 - D. Wait until the patient loses consciousness and then transport
- 16. What is the most common cause of cardiopulmonary arrest in the trauma patient?**
- A. Brain injury
 - B. Hypoxemia
 - C. Myocardial contusion
 - D. Ventricular arrhythmia
- 17. You may have been exposed to a contaminant (air or fluid borne). You should:**
- A. Seek treatment within hours of the exposure
 - B. Report the exposure if testing shows a positive result
 - C. Only be concerned if the exposure was to Hepatitis B
 - D. Only be concerned if the exposure was to HIV

- 18. Which of the following is not an effective way to control external hemorrhage?**
- A. Hemostatic agent application directly on the injury site
 - B. Direct pressure on the injury site
 - C. Tourniquet application above the injury site
 - D. Pressure point above the injury site
- 19. A brief neurologic exam on an altered mental status patient includes:**
- A. Glasgow Coma Scale, glucose check, pupil examination
 - B. Glucose check, pulse oximetry, pupil examination
 - C. Glasgow Coma Scale, corneal reflex, ETCO₂
 - D. Corneal reflex, pupil examination, pulse/motor/sensory
- 20. Which of the following findings would indicate the airway needs to be suctioned?**
- A. Gurgling sounds with respiration
 - B. Poor respiratory effort
 - C. Shock
 - D. Presence of dried blood in the nares
- 21. A 72-year-old male was physically assaulted. He is conscious and alert complaining of diffuse abdominal pain. You should first:**
- A. Obtain a blood sugar level
 - B. Perform an ITLS Secondary Survey
 - C. Establish vascular access
 - D. If available, perform an abdominal ultrasound
- 22. You note during an en route ITLS Reassessment Exam that the trauma patient develops shallow and rapid breathing; cyanosis and a weak rapid carotid pulse with distended neck veins; and diminished breath sounds on the right. You should:**
- A. Elevate the patient's legs
 - B. Perform a detailed exam
 - C. Transport to the closest hospital
 - D. Insert an airway adjunct and change to non-rebreather mask
- 23. An unresponsive 24-year-old female is found lying on the sidewalk after jumping from a fourth-floor window. She is tachycardic and diaphoretic. Your assessment reveals open skull fracture, pelvis fractures, and flail chest. You should:**
- A. Complete the ITLS Secondary Survey prior to transport
 - B. Complete the ITLS Primary Survey and transport
 - C. Obtain a complete set of vital signs prior to transport
 - D. Immediately depart the scene prior to completing the ITLS Primary Survey

24. Which of the following is considered one of the four essential components to maintain normal perfusion?
- A. Serum lactate levels
 - B. ETCO₂ levels
 - C. SaO₂ levels
 - D. Fluid levels
25. Which of the following assessment findings is uncommon in cardiac tamponade?
- A. Distended neck veins
 - B. Narrow pulse pressure
 - C. Unequal breath sounds
 - D. Hypotension
26. 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
27. Based on the reported mechanism of injury, which patient is likely not to require spinal motion restriction?
- A. 7-year-old pulled unresponsive from a pond
 - B. 24-year-old with a gunshot wound to the chest
 - C. 15-year-old female with extremity numbness and tingling after falling backward
 - D. 14-year-old male with a stab wound to the back of the neck 5 cm from the spine
28. Which of the following organs is contained in the retroperitoneal region of the abdomen?
- A. Stomach
 - B. Liver
 - C. Kidney
 - D. Uterus
29. A 19-year-old female is involved in a motor vehicle collision. The steering wheel is bent, her skin is pale, breath sounds are clear, and radial pulses are present. You should suspect a:
- A. Flail chest
 - B. Ruptured aorta
 - C. Cardiac contusion
 - D. Tension pneumothorax

- 30. A 16-year-old female 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 the touch
 - B. Apply clean water to burned areas for up to 5-10 minutes
 - C. Apply iced water to burned areas until cool to the touch
 - D. Do not apply anything to burned areas other than clean sheets
- 31. An unresponsive 5-year-old female was struck by a car. She presents with retractions and nasal flaring. The airway is patent, breathing is fast and shallow, and the carotid pulse is weak and slow. Which of the steps in her management should be done first?**
- A. Initiate ventilatory assistance
 - B. Complete spinal motion restriction
 - C. Immediately load and transport
 - D. Call medical command
- 32. A 78-year-old female driver struck a parked car while she was traveling at a low rate of speed. She is complaining of shortness of breath and chest pain. Your assessment and treatment should include:**
- A. Breath sounds, history, place in a position of comfort
 - B. Breath sounds, history, nitroglycerine administration
 - C. Breath sounds, history, ECG
 - D. Breath sounds, history, aspirin administration
- 33. Supine hypotension syndrome in the pregnant patient is caused by:**
- A. Uterine obstruction of venous blood flow
 - B. Atelectasis of the lungs
 - C. Uterine pressure on the vagal nerve
 - D. Gastric reflux
- 34. 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
- 35. Which of the following concerning blast injury is true?**
- A. Primary blast injury is caused by heat
 - B. Secondary blast injury is caused by objects propelled by the explosion
 - C. Tertiary blast injury is caused by toxic fumes
 - D. Quaternary blast injury is caused by the displacement of the body

- 36. The purpose of the ITLS Primary Survey is to:**
- A. Identify all immediate life threats within the first 2 minutes
 - B. Establish measured baseline vital signs
 - C. Obtain a detailed medical history
 - D. Determine if the patient has any medical allergies
- 37. The oropharyngeal airway:**
- A. Protects the lower airway from aspiration
 - B. Is the airway adjunct of choice with laryngeal edema
 - C. May be used in conscious and unconscious patients
 - D. Separates tongue from posterior pharyngeal wall
- 38. An unconscious 45-year-old female was the unrestrained driver in a motor vehicle collision. Her vital signs are BP 80/40, P 130 and weak, R 30 and shallow. No external bleeding is noted. You should suspect:**
- A. Intracerebral hemorrhage
 - B. Bleeding into the chest or abdomen
 - C. Bilateral elbow dislocations
 - D. Neurogenic shock
- 39. Which of the following best describes pulsus paradoxus?**
- 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
- 40. A 23-year-old female fell from a second-floor balcony. Upon arrival, you find her lying in the grass. She responds to verbal commands and your assessment reveals flat neck veins, and normal examinations of the chest, abdomen and pelvis. Her skin is cool, clammy and ashen; respirations are rapid and shallow; radial pulses are too rapid to count and thready. You place her on the heart monitor and it shows a wide-complex tachycardia of about 280 per minute. You should suspect:**
- A. Hypovolemic shock
 - B. Relative hypovolemic (high-space) shock
 - C. Mechanical (obstructive) shock
 - D. Cardiogenic shock

- 41. A 25-year-old female was involved in a motor vehicle collision. The ITLS Primary Survey reveals a decreased LOC, rapid breathing, weak and rapid carotid pulse, distended neck veins, midline trachea, contusion to anterior right chest, and equal breath sounds and cyanosis. High flow oxygen by mask is being administered. You should next:**
- A. Complete spinal motion restriction and transport
 - B. Stabilize sternum
 - C. Stop the assessment and immediately transport
 - D. Obtain vital signs
- 42. An unresponsive 15-year-old male was struck on the head with a baseball bat. His arms and legs are extended and his right pupil is dilated and fixed. You should ventilate at:**
- A. 8-10 per minute
 - B. 12-14 per minute
 - C. 16-18 per minute
 - D. 20 -22 per minute
- 43. In which situation should an Emergency Rescue be performed?**
- A. Leaking antifreeze from a vehicle radiator
 - B. Amputated upper extremity
 - C. Sudden release of toxic fumes
 - D. Third trimester pregnant patient
- 44. Which one of the following patients has the highest probability of surviving a traumatic cardiac arrest?**
- A. A 16-year-old with blunt chest and abdominal trauma
 - B. A 72-year-old with multi-system trauma from a motor vehicle collision
 - C. A 35-year-old with an indirect lightning strike
 - D. A 6-year-old with extensive head trauma
- 45. Proper immobilization of a forearm (radius and ulna) fracture includes splinting the:**
- A. Elbow and fracture site
 - B. Fracture site only
 - C. Wrist and fracture site
 - D. Wrist, elbow and fracture site
- 46. A 33-year-old female receives 15% partial thickness thermal burns. You should:**
- A. Clean and cover the burns with an antimicrobial sheet
 - B. Clean and apply ice packs to the burned area
 - C. Cover the burn with a clean, dry dressing
 - D. Apply burn cream

47. **A 3-year-old male fell 9 feet (3 meters). He has a decreased level of consciousness and is making persistent "grunting" sounds with respirations. Your initial treatment is to:**
- A. Provide ventilatory support with supplementary oxygen
 - B. Suction the patient and apply oxygen with a nasal cannula
 - C. Apply a cervical collar and transport immediately
 - D. Quickly complete a rapid trauma survey
48. **Which one of the following is typically associated with post-traumatic hemorrhage early shock?**
- A. Ventricular dysrhythmias
 - B. Hypotension
 - C. Blood volume loss of 30% to 45%
 - D. Narrowed pulse pressure
49. **Weakness, tachycardia, and normal blood pressure suggest:**
- A. Decompensated neurogenic shock
 - B. Compensated hypovolemic shock
 - C. Late burn shock
 - D. Late hemorrhagic shock
50. **Which of the following statements regarding SPO₂ is correct?**
- A. An SPO₂ reading of 90% is equivalent to a PAO₂ reading of 90 mmHg
 - B. As a general rule, any pulse oximeter reading below 95% is cause for concern
 - C. You should try to maintain a pulse oximeter reading of 95% or higher in your trauma patient
 - D. SPO₂ is unreliable in trauma patients and has no value in their assessment

1	A	B	C	D
2	A	B	C	D
3	A	B	C	D
4	A	B	C	D
5	A	B	C	D
6	A	B	C	D
7	A	B	C	D
8	A	B	C	D
9	A	B	C	D
10	A	B	C	D
11	A	B	C	D
12	A	B	C	D
13	A	B	C	D
14	A	B	C	D
15	A	B	C	D
16	A	B	C	D
17	A	B	C	D
18	A	B	C	D
19	A	B	C	D
20	A	B	C	D
21	A	B	C	D
22	A	B	C	D
23	A	B	C	D
24	A	B	C	D
25	A	B	C	D

26	A	B	C	D
27	A	B	C	D
28	A	B	C	D
29	A	B	C	D
30	A	B	C	D
31	A	B	C	D
32	A	B	C	D
33	A	B	C	D
34	A	B	C	D
35	A	B	C	D
36	A	B	C	D
37	A	B	C	D
38	A	B	C	D
39	A	B	C	D
40	A	B	C	D
41	A	B	C	D
42	A	B	C	D
43	A	B	C	D
44	A	B	C	D
45	A	B	C	D
46	A	B	C	D
47	A	B	C	D
48	A	B	C	D
49	A	B	C	D
50	A	B	C	D