

- 1. Which of the following statements is incorrect regarding spinal motion restriction?**
  - A. Neck traction should be applied to extend the neck upward during cervical collar application
  - B. A long backboard is not indicated in penetrating wounds of the torso, neck, or head unless there is clinical evidence of a spine injury
  - C. Patients should be removed from the long spine board when it is safe and practical to do so
  - D. Remaining on the board for prolonged periods can produce discomfort, pressure sores, and respiratory compromise
  
- 2. Which of the following best describes pulsus paradoxus?**
  - A. The radial pulse is absent
  - B. There are unequal radial pulses
  - C. The radial pulse disappears upon inspiration
  - D. The radial pulse is stronger than the carotid pulse
  
- 3. A 33-year-old female receives 15% partial thickness thermal burns. You should:**
  - A. Clean and apply ice packs to the burned area
  - B. Apply burn cream
  - C. Clean and cover the burns with an antimicrobial sheet
  - D. Cover the burn with a clean, dry dressing
  
- 4. Which one of the following patients has the highest probability of surviving a traumatic cardiac arrest?**
  - A. A 72-year-old with multi-system trauma from a motor vehicle collision
  - B. A 35-year-old with an indirect lightning strike
  - C. A 16-year-old with blunt chest and abdominal trauma
  - D. A 6-year-old with extensive head trauma
  
- 5. Which of the following organs is contained in the retroperitoneal region of the abdomen?**
  - A. Liver
  - B. Uterus
  - C. Stomach
  - D. Kidney

6. **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 clean water to burned areas for up to 5-10 minutes
  - B. Do not apply anything to burned areas other than clean sheets
  - C. Apply ice to burned areas until cool to the touch
  - D. Apply iced water to burned areas until cool to the touch
7. **The purpose of the ITLS Primary Survey is to:**
- A. Establish measured baseline vital signs
  - B. Determine if the patient has any medical allergies
  - C. Identify all immediate life threats within the first 2 minutes
  - D. Obtain a detailed medical history
8. **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. Place patient in a Trendelenburg position
  - B. Flex the knee and splint to the opposite leg
  - C. Splint the injury in the position found
  - D. Gently apply traction in an effort to realign the extremity to restore pulses
9. **Supine hypotension syndrome in the pregnant patient is caused by:**
- A. Atelectasis of the lungs
  - B. Gastric reflux
  - C. Uterine obstruction of venous blood flow
  - D. Uterine pressure on the vagal nerve
10. **As intracerebral pressure rises after an isolated head injury, what does the systolic blood pressure do?**
- A. Decreases
  - B. Changes randomly
  - C. Stays the same
  - D. Increases
11. **Which of the following statements regarding SPO<sub>2</sub> is correct?**
- A. As a general rule, any pulse oximeter reading below 95% is cause for concern
  - B. SPO<sub>2</sub> is unreliable in trauma patients and has no value in their assessment
  - C. An SPO<sub>2</sub> reading of 90% is equivalent to a PAO<sub>2</sub> reading of 90 mmHg
  - D. You should try to maintain a pulse oximeter reading of 95% or higher in your trauma patient

- 12. What is the most common cause of cardiopulmonary arrest in the trauma patient?**
- A. Hypoxemia
  - B. Ventricular arrhythmia
  - C. Brain injury
  - D. Myocardial contusion
- 13. 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. Perform a detailed exam
  - B. Insert an airway adjunct and change to non-rebreather mask
  - C. Elevate the patient's legs
  - D. Transport to the closest hospital
- 14. In the geriatric patient, which of the following findings is most likely caused by an acute injury?**
- A. Hypotension
  - B. Decreased peripheral vision
  - C. Edema of the lower extremities
  - D. Loss of lung tissue elasticity
- 15. Proper immobilization of a forearm (radius and ulna) fracture includes splinting the:**
- A. Fracture site only
  - B. Wrist, elbow and fracture site
  - C. Elbow and fracture site
  - D. Wrist and fracture site
- 16. Prolonged scene times may reflect:**
- A. Delivery of better care
  - B. Ineffective team collaboration
  - C. A decrease in death rates
  - D. Accomplishment of interventions
- 17. Which of the following actions are appropriate to delegate to a team member during the ITLS Primary Survey?**
- A. Determine level of consciousness
  - B. Obtain vital signs
  - C. Apply oxygen
  - D. Evaluate the posterior side of the patient

- 18. In which situation should an Emergency Rescue be performed?**
- A. Amputated upper extremity
  - B. Third trimester pregnant patient
  - C. Leaking antifreeze from a vehicle radiator
  - D. Sudden release of toxic fumes
- 19. Which one of the following is typically associated with post-traumatic hemorrhage early shock?**
- A. Hypotension
  - B. Narrowed pulse pressure
  - C. Ventricular dysrhythmias
  - D. Blood volume loss of 30% to 45%
- 20. Which of the following has a greater chance of surviving traumatic cardiopulmonary arrest?**
- A. Patients with non-dilated pupils
  - B. Patients with penetrating chest trauma who are hypothermic
  - C. Patients who suffer blunt force trauma to the torso
  - D. Patients with dilated unresponsive pupils
- 21. 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. Suction the patient and apply oxygen with a nasal cannula
  - B. Quickly complete a rapid trauma survey
  - C. Provide ventilatory support with supplementary oxygen
  - D. Apply a cervical collar and transport immediately
- 22. Which of the following indicates a state of hyperventilation?**
- A. A tidal volume of less than 400 ml
  - B. An end-tidal carbon dioxide level less than 30 mmHg
  - C. An adult respiratory rate greater than 18 per minute
  - D. An oxygen saturation greater than 94%
- 23. 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. 12-14 per minute
  - B. 20-22 per minute
  - C. 8-10 per minute
  - D. 16-18 per minute

- 24. Based on the reported mechanism of injury, which patient is likely not to require spinal motion restriction?**
- A. 24-year-old with a gunshot wound to the chest
  - B. 14-year-old male with a stab wound to the back of the neck 5 cm from the spine
  - C. 7-year-old pulled unresponsive from a pond
  - D. 15-year-old female with extremity numbness and tingling after falling backward
- 25. 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 Primary Survey and transport
  - B. Immediately depart the scene prior to completing the ITLS Primary Survey
  - C. Complete the ITLS Secondary Survey prior to transport
  - D. Obtain a complete set of vital signs prior to transport
- 26. You may have been exposed to a contaminant (air or fluid borne). You should:**
- A. Report the exposure if testing shows a positive result
  - B. Only be concerned if the exposure was to HIV
  - C. Seek treatment within hours of the exposure
  - D. Only be concerned if the exposure was to Hepatitis B
- 27. A brief neurologic exam on an altered mental status patient includes:**
- A. Glucose check, pulse oximetry, pupil examination
  - B. Corneal reflex, pupil examination, pulse/motor/sensory
  - C. Glasgow Coma Scale, glucose check, pupil examination
  - D. Glasgow Coma Scale, corneal reflex, ETCO<sub>2</sub>
- 28. 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. Bleeding into the chest or abdomen
  - B. Neurogenic shock
  - C. Intracerebral hemorrhage
  - D. Bilateral elbow dislocations
- 29. Which of the following findings would indicate the airway needs to be suctioned?**
- A. Poor respiratory effort
  - B. Presence of dried blood in the nares
  - C. Gurgling sounds with respiration
  - D. Shock

- 30. Weakness, tachycardia, and normal blood pressure suggest:**
- A. Late hemorrhagic shock
  - B. Compensated hypovolemic shock
  - C. Decompensated neurogenic shock
  - D. Late burn shock
- 31. 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, nitroglycerine administration
  - B. Breath sounds, history, aspirin administration
  - C. Breath sounds, history, place in a position of comfort
  - D. Breath sounds, history, ECG
- 32. Which of the following changes is most useful to monitor in the child with head injury?**
- A. Level of consciousness
  - B. Sensory exam
  - C. Frequency of vomiting
  - D. Reflexes
- 33. 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 80/60; P 130
  - B. BP 170/100; P 130
  - C. BP 170/100; P 50
  - D. BP 80/60; P 50
- 34. A 72-year-old male was physically assaulted. He is conscious and alert complaining of diffuse abdominal pain. You should first:**
- A. Perform an ITLS Secondary Survey
  - B. If available, perform an abdominal ultrasound
  - C. Obtain a blood sugar level
  - D. Establish vascular access
- 35. Upon arrival at a trauma scene, you should complete a(n):**
- A. Scene size-up
  - B. ITLS Reassessment Exam
  - C. Initial assessment
  - D. Rapid trauma survey

- 36. 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. 12-14 per minute
  - B. 20 -22 per minute
  - C. 8-10 per minute
  - D. 16-18 per minute
- 37. 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. Discuss the impact of alcohol abuse with him
  - B. Wait until the patient loses consciousness and then transport
  - C. Have the patient call a friend or family member and have them drive him home and sleep it off
  - D. Treat him as a head injured patient
- 38. In which clinical condition might you expect to see distended neck veins?**
- A. Hemothorax
  - B. Pericardial tamponade
  - C. Flail chest
  - D. Open pneumothorax
- 39. 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. Ruptured aorta
  - B. Tension pneumothorax
  - C. Flail chest
  - D. Cardiac contusion
- 40. Which of the following is not an effective way to control external hemorrhage?**
- A. Direct pressure on the injury site
  - B. Pressure point above the injury site
  - C. Hemostatic agent application directly on the injury site
  - D. Tourniquet application above the injury site

- 41. Which of the following is considered one of the four essential components to maintain normal perfusion?**
- A. Fluid levels
  - B. ETCO<sub>2</sub> levels
  - C. Serum lactate levels
  - D. SaO<sub>2</sub> levels
- 42. The oropharyngeal airway:**
- A. Is the airway adjunct of choice with laryngeal edema
  - B. Separates tongue from posterior pharyngeal wall
  - C. Protects the lower airway from aspiration
  - D. May be used in conscious and unconscious patients
- 43. 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. Stabilize sternum
  - B. Obtain vital signs
  - C. Complete spinal motion restriction and transport
  - D. Stop the assessment and immediately transport
- 44. 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. Relative hypovolemic (high-space) shock
  - B. Cardiogenic shock
  - C. Hypovolemic shock
  - D. Mechanical (obstructive) shock
- 45. Which of the following is the most common cause of abdominal trauma?**
- A. Caustic ingestion
  - B. Aggressive bag-mask ventilation
  - C. Penetrating trauma
  - D. Blunt force trauma



- 46. Which of the following assessment findings is uncommon in cardiac tamponade?**
- A. Narrow pulse pressure
  - B. Hypotension
  - C. Distended neck veins
  - D. Unequal breath sounds
- 47. 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. Intubate
  - B. Stabilize the chest wall
  - C. Perform positive-pressure ventilation
  - D. Place a cervical collar
- 48. Which of the following concerning blast injury is true?**
- A. Secondary blast injury is caused by objects propelled by the explosion
  - B. Quaternary blast injury is caused by the displacement of the body
  - C. Primary blast injury is caused by heat
  - D. Tertiary blast injury is caused by toxic fumes
- 49. 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. Complete spinal motion restriction
  - B. Call medical command
  - C. Initiate ventilatory assistance
  - D. Immediately load and transport
- 50. 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. Relative hypovolemic (high-space) shock
  - B. Cardiogenic shock
  - C. Hypovolemic shock
  - D. Mechanical (obstructive) shock

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