Import Settings:

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Information Field: Complexity

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Highest Answer Letter: D

Multiple Keywords in Same Paragraph: No

**Chapter: Patients with Special Challenges - Patients with Special Challenges - TBNK**

**Multiple Choice**

1. When determining the optimal method to communicate with, assess, treat, and transport a patient with a special health care challenge, the paramedic should:

A) routinely call medical control before talking to a caregiver.

B) demonstrate confidence and enlist the expertise of the patient.

C) recall that caregivers are often upset and therefore unreliable.

D) remain professional and obtain initial information from a caregiver.

Ans: B

Complexity: Moderate

Ahead: Introduction

Subject: Patients with Special Challenges

Pages: 2251–2252

Feedback: Introduction, pages 2251–2252

2. Which of the following types of maltreatment is perhaps the MOST common?

A) Neglect

B) Physical abuse

C) Sexual abuse

D) Abandonment

Ans: A

Complexity: Moderate

Ahead: Care of Patients When Abuse or Neglect Is Suspected

Subject: Patients with Special Challenges

Page: 2254

Feedback: Care of Patients When Abuse or Neglect Is Suspected, page 2254

3. Which of the following types of maltreatment involves isolating the victim from others, resulting in a substantial change in the victim's behavior or cognitive function?

A) Neglect

B) Abandonment

C) Emotional abuse

D) Sexual exploitation

Ans: C

Complexity: Easy

Ahead: Care of Patients When Abuse or Neglect Is Suspected

Subject: Patients with Special Challenges

Page: 2254

Feedback: Care of Patients When Abuse or Neglect Is Suspected, page 2254

4. A man leaves his 4-year-old child home alone while he plays golf with his friends. This is an example of:

A) assault.

B) neglect.

C) abandonment.

D) emotional abuse.

Ans: C

Complexity: Easy

Ahead: Care of Patients When Abuse or Neglect Is Suspected

Subject: Patients with Special Challenges

Page: 2254

Feedback: Care of Patients When Abuse or Neglect Is Suspected, page 2254

5. Which of the following behaviors or actions should make you the MOST suspicious that a caregiver has abused his or her child?

A) Asking other siblings to leave the room while the child is examined

B) Demanding that you take the child to the hospital as soon as possible

C) Difficulty recalling the last time the child was seen by a physician

D) Offering unsolicited explanations for abnormal physical exam findings

Ans: D

Complexity: Moderate

Ahead: Care of Patients When Abuse or Neglect Is Suspected

Subject: Patients with Special Challenges

Page: 2254

Feedback: Care of Patients When Abuse or Neglect Is Suspected, page 2254

6. Which of the following injury patterns is MOST suggestive of child abuse?

A) Burns with splash marks

B) Bruises on the abdomen

C) Bruises on the lower leg

D) Laceration to the chin

Ans: B

Complexity: Easy

Ahead: Care of Patients When Abuse or Neglect Is Suspected

Subject: Patients with Special Challenges

Pages: 2254–2255

Feedback: Care of Patients When Abuse or Neglect Is Suspected, pages 22

7. You are assessing a 6-year-old Asian child who presents with a fever. During your assessment, you note red, flat, rounded lesions on the child's torso. This finding is MOST indicative of:

A) cupping.

B) coining.

C) physical abuse.

D) phytophotodermatitis.

Ans: A

Complexity: Moderate

Ahead: Care of Patients When Abuse or Neglect Is Suspected

Subject: Patients with Special Challenges

Page: 2256

Feedback: Care of Patients When Abuse or Neglect Is Suspected, page 2256

8. During your assessment of a 4-year-old female, you find injury patterns that are highly suggestive of abuse. The child's mother is present; she is apprehensive and is hesitant to allow you to transport her daughter. You should:

A) ask the mother to leave the room so that you can ask the girl if the injuries that she has were intentionally inflicted by someone else.

B) advise the mother that the child's injuries are inconsistent with accidental trauma and let her know that the child needs to be transported.

C) ask your partner to retrieve an extra set of latex-free gloves from the ambulance, as this will enable him or her to discreetly call the police.

D) act as though you are not suspicious, but call the child's father and inquire about the relationship between the child and her mother.

Ans: C

Complexity: Moderate

Ahead: Care of Patients When Abuse or Neglect Is Suspected

Subject: Patients with Special Challenges

Page: 2256

Feedback: Care of Patients When Abuse or Neglect Is Suspected, page 2256

9. When caring for a patient with suspected abuse or neglect, your FIRST priority should be to:

A) summon law enforcement personnel to the scene.

B) provide an immediate assessment of the patient.

C) remove the patient from the abusive environment.

D) take deliberate action to ensure your own safety.

Ans: D

Complexity: Moderate

Ahead: Care of Patients When Abuse or Neglect Is Suspected

Subject: Patients with Special Challenges

Page: 2256

Feedback: Care of Patients When Abuse or Neglect Is Suspected, page 226

10. Your assessment of an elderly man gives you reason to suspect that he has been abused. The patient does not appear to have any life-threatening injuries. His son, who is the only family member present at the scene, asks you if he can accompany his father in the back of the ambulance during transport. You should:

A) ask the son why he wants to accompany his father in the ambulance.

B) allow the son to accompany his father in the back of the ambulance.

C) advise the son to follow the ambulance in his own personal vehicle.

D) remain at the scene until law enforcement arrives and questions the son.

Ans: B

Complexity: Moderate

Ahead: Care of Patients When Abuse or Neglect Is Suspected

Subject: Patients with Special Challenges

Page: 2256

Feedback: Care of Patients When Abuse or Neglect Is Suspected, page 2256

11. Which of the following statements would be appropriate when documenting a case of suspected abuse?

A) “The patient's injury is not consistent with an accident.”

B) “The injury was reported to have occurred at 1420 hours.”

C) “The abdominal exam of the patient was within normal limits.”

D) “There was a gross discrepancy between the caregivers' stories.”

Ans: B

Complexity: Moderate

Ahead: Care of Patients When Abuse or Neglect Is Suspected

Subject: Patients with Special Challenges

Page: 2257

Feedback: Care of Patients When Abuse or Neglect Is Suspected, page 2257

12. A terminal illness is MOST accurately defined as a(n):

A) disease process that is expected to cause death within 6 months, verified by a physician.

B) disease that will ultimately cause death due to a lack of effective medical treatment.

C) disease that is fatal in greater than 50% of a given population, even with timely treatment.

D) disease process that will ultimately require ongoing treatment in order to prevent death.

Ans: A

Complexity: Easy

Ahead: Care of Patients With Terminal Illness

Subject: Patients with Special Challenges

Page: 2258

Feedback: Care of Patients With Terminal Illness, page 2258

13. Some patients with a terminal illness will continue aggressive medical treatment, hoping for a statistically improbable recovery or attempting to prolong life as much as possible. This is called:

A) hospice care.

B) curative care.

C) palliative care.

D) investigational care.

Ans: B

Complexity: Easy

Ahead: Care of Patients With Terminal Illness

Subject: Patients with Special Challenges

Page: 2258

Feedback: Care of Patients With Terminal Illness, page 2258

14. When a patient is receiving palliative care, medical care:

A) ceases, and the disease process is allowed to continue until the point of death.

B) ceases, and efforts focus on relieving pain until the point at which the patient dies.

C) continues, although aggressive, invasive, and uncomfortable interventions cease.

D) continues, and only minimally invasive procedures are performed to prolong life.

Ans: C

Complexity: Moderate

Ahead: Care of Patients With Terminal Illness

Subject: Patients with Special Challenges

Page: 2258

Feedback: Care of Patients With Terminal Illness, page 2258

15. Which of the following are often the primary tasks for paramedics who are caring for a patient with a terminal illness?

A) Airway care and thermal management

B) ECG monitoring and antidysrhythmic therapy

C) Antibiotic and antipyretic therapy

D) Pain assessment and management

Ans: D

Complexity: Moderate

Ahead: Care of Patients With Terminal Illness

Subject: Patients with Special Challenges

Page: 2258

Feedback: Care of Patients With Terminal Illness, page 2258

16. The purpose of hospice care is to:

A) render quality care to patients with a debilitating but temporary disease.

B) provide quality end-of-life care through pain and symptom management.

C) restore a person to his or her maximum physical and emotional potential.

D) render around-the-clock intensive care to prevent cardiopulmonary arrest.

Ans: B

Complexity: Moderate

Ahead: Care of Patients With Terminal Illness

Subject: Patients with Special Challenges

Page: 2258

Feedback: Care of Patients With Terminal Illness, page 2258

17. Morbid obesity is defined as a body mass index that is:

A) greater than 30 kg/m2.

B) between 30 and 39.9 kg/m2.

C) between 40 and 49.9 kg/m2.

D) greater than 50 kg/m2.

Ans: C

Complexity: Easy

Ahead: Care of Bariatric Patients

Subject: Patients with Special Challenges

Page: 2259

Feedback: Care of Bariatric Patients, page 2259

18. Which of the following factors complicates airway management in an obese patient?

A) Larger upper airway

B) Limited neck mobility

C) Smaller patient head size

D) Proportionately small tongue

Ans: B

Complexity: Moderate

Ahead: Care of Bariatric Patients

Subject: Patients with Special Challenges

Pages: 2259–2260

Feedback: Care of Bariatric Patients, pages 2259–2260

19. Bag-mask ventilation of the obese patient would MOST likely be ineffective when the patient is:

A) supine.

B) apneic.

C) semisitting.

D) in reverse Trendelenburg.

Ans: A

Complexity: Moderate

Ahead: Care of Bariatric Patients

Subject: Patients with Special Challenges

Page: 2260

Feedback: Care of Bariatric Patients, page 2260

20. Assumptions by the paramedic based on stereotypes of a particular communicable disease:

A) will maximize the paramedic's safety.

B) are a violation of the patient's privacy.

C) will expose the paramedic to legal action.

D) serve only to undermine patient care efforts.

Ans: D

Complexity: Easy

Ahead: Care of Patients With Communicable Diseases

Subject: Patients with Special Challenges

Pages: 2260–2261

Feedback: Care of Patients With Communicable Diseases, pages 2260–2261

21. Adult patients who have a tracheostomy tube in place and are ventilator dependent should receive:

A) cool, dry air through the ventilator circuit.

B) deep tracheal suctioning every other day.

C) humidification and heating of inspired air.

D) ventilation at a rate of 20 to 24 breaths/min.

Ans: C

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Pages: 2261–2262

Feedback: Medical Technology in the Prehospital Setting, pages 2261–2262

22. The inner cannula of a tracheostomy tube:

A) should be equipped with a cuff if used in pediatric patients.

B) has a 15-mm port that can be attached to a ventilator circuit.

C) is the larger tube that passes directly into the patient's trachea.

D) should only be removed during tracheostomy tube replacement.

Ans: B

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2262

Feedback: Medical Technology in the Prehospital Setting, page 2262

23. A fenestrated tracheostomy tube:

A) should be used for patients who require constant support from a ventilator.

B) is not equipped with an inflatable cuff and is secured in place with sutures.

C) allows the patient to speak, breathe, or clear secretions from the upper airway.

D) requires a special adapter in order to be compatible with a ventilation device.

Ans: C

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2262

Feedback: Medical Technology in the Prehospital Setting, page 2262

24. Which of the following interventions is especially important when caring for a patient with a tracheostomy tube?

A) Suctioning

B) Mask ventilation

C) Hyperventilation

D) Head positioning

Ans: A

Complexity: Easy

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Pages: 2262–2263

Feedback: Medical Technology in the Prehospital Setting, pages 2262–2263

25. When suctioning and cleaning the tracheostomy of a ventilator-dependent patient, it is MOST important to:

A) keep the patient well oxygenated.

B) have a new tube readily available.

C) suction for no longer than 5 seconds.

D) soak the inner cannula in sterile water.

Ans: A

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Pages: 2263–2264

Feedback: Medical Technology in the Prehospital Setting, pages 2263–2264

26. Upon arriving at the residence of a 27-year-old man who has a tracheostomy tube and is being mechanically ventilated, you note that he is breathing shallowly, is cyanotic, and is diaphoretic. You should:

A) disconnect the patient from the mechanical ventilator and begin bag-mask ventilations.

B) immediately check the settings on the mechanical ventilator to ensure that it is working properly.

C) remove the ventilator tubing from the tracheostomy tube and suction the tube for 10 to 15 seconds.

D) assess his oxygen saturation level and auscultate his breath sounds to determine if he is moving adequate air.

Ans: A

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2265

Feedback: Medical Technology in the Prehospital Setting, page 2265

27. Several attempts to clear a plugged tracheostomy tube with suction have failed. The patient, who is on a mechanical ventilator, has a pulse rate of 150 beats/min and is making exaggerated attempts to breathe. You should:

A) remove the tracheostomy tube, place a mask over the stoma, and ventilate with a bag-mask device.

B) deflate the cuff of the tracheostomy tube and ventilate the patient in the usual fashion with a bag-mask device.

C) administer high-flow oxygen via nonrebreathing mask as you prepare to replace the tracheostomy tube.

D) provide free-flow oxygen as you remove the tracheostomy tube and replace it with a similarly sized endotracheal tube.

Ans: B

Complexity: Difficult

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Pages: 2262–2263

Feedback: Medical Technology in the Prehospital Setting, pages 2262–2263

28. Phrenic nerve stimulators function by:

A) sending electrical impulses to the diaphragm, causing it to contract and passively relax.

B) keeping the upper airway patent in patients who experience frequent occurrences of sleep apnea.

C) sending electrical impulses to the respiratory centers in the brain that stimulate inhalation.

D) sending electrical impulses to the intercostal muscles, causing them to contract and expand the thorax.

Ans: A

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2265

Feedback: Medical Technology in the Prehospital Setting, page 2265

29. You are assessing a patient and discover that she has a ventricular assist device because of severe left heart failure. In this case, the device is MOST likely connected to the:

A) left atrium.

B) right atrium.

C) right ventricle.

D) left ventricle.

Ans: D

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2265

Feedback: Medical Technology in the Prehospital Setting, page 2265

30. You would MOST likely encounter the presence of a ventricular assist device in a patient who:

A) has severe emphysema.

B) has pulmonary hypertension.

C) is awaiting a heart transplant.

D) has transient right heart failure.

Ans: C

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2265

Feedback: Medical Technology in the Prehospital Setting, page 2265

31. You respond to a residence where an infant's apnea monitor has alarmed several times within the last 30 minutes. When you assess the infant, you note that she is alert, she has strong peripheral pulses, and her skin is pink, warm, and dry. You should:

A) expect that her oxygen saturation will be below 90%.

B) transport the infant and monitor her breathing en route.

C) administer blow-by oxygen to the infant and reassess her.

D) advise the parents to contact the apnea monitor manufacturer.

Ans: B

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Pages: 2265–2266

Feedback: Medical Technology in the Prehospital Setting, pages 2265–2266

32. A patient with a long-term vascular access device is in cardiac arrest and requires epinephrine. In order to remove any heparin from the device, the paramedic should:

A) follow the epinephrine with a 10-mL saline flush.

B) briskly flush the device with 20 mL of saline.

C) withdraw up to 10 mL of blood and discard it.

D) slowly inject 3 to 5 mL of sodium bicarbonate.

Ans: C

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2266

Feedback: Medical Technology in the Prehospital Setting, page 2266

33. Unlike a midline venous catheter, a peripherally inserted central catheter can be used for:

A) long-term drug therapy.

B) the delivery of antibiotics.

C) chemotherapy in cancer patients.

D) narcotic analgesia administration.

Ans: A

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2266

Feedback: Medical Technology in the Prehospital Setting, page 2266

34. Triple lumen central catheters are usually placed in the:

A) external jugular vein.

B) internal carotid artery.

C) antecubital vein in the arm.

D) subclavian or femoral vein.

Ans: D

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2266

Feedback: Medical Technology in the Prehospital Setting, page 2266

35. Which of the following vascular access devices is “tunneled” under the skin and placed into the superior vena cava?

A) Midline catheter

B) Broviac catheter

C) Dialysis catheter

D) Double lumen catheter

Ans: B

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2266

Feedback: Medical Technology in the Prehospital Setting, page 2266

36. Which of the following is a proper technique when accessing an implantable venous access device?

A) Aspirate 5 mL of blood and then block the flow in the line with the crimping device.

B) Stabilize the implantable device and insert the needle at a 45-degree angle to the skin.

C) Flush the device with 20 mL of normal saline as soon as you are able to aspirate blood.

D) Remove the syringe from the needle and then block the flow in the line with the crimping device.

Ans: A

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2267

Feedback: Medical Technology in the Prehospital Setting, page 2267

37. A 66-year-old man with severe left heart failure is receiving an inotropic medication via an infusion pump. He presents with an altered mental status, increased breathing difficulty, and hypotension. You should:

A) administer oxygen and discontinue the medication infusion by turning the pump off.

B) assist his breathing, slowly increase the dose of his inotropic medication, and transport.

C) support his breathing, continue his medication infusion, and contact medical control.

D) administer oxygen, discontinue the medication infusion, and establish a peripheral IV.

Ans: C

Complexity: Difficult

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Pages: 2267–2268

Feedback: Medical Technology in the Prehospital Setting, pages 2267–2268

38. Prior to replacing an ostomy device in a patient, it is MOST important to:

A) ensure that the patient is in a comfortable position.

B) wash the area around the stoma with soap and water.

C) use sterile technique when opening the new ostomy kit.

D) wash your hands and apply personal protective equipment.

Ans: D

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Pages: 2269–2270

Feedback: Medical Technology in the Prehospital Setting, pages 2269–2270

39. The purpose of the wafer that is included in an ostomy kit is to:

A) protect the skin from irritation.

B) seal the ostomy bag to the skin.

C) maintain sterility of the ostomy bag.

D) cover the stoma until the bag is attached.

Ans: A

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Pages: 2269–2270

Feedback: Medical Technology in the Prehospital Setting, pages 2269–2270

40. Following removal of an ostomy device and cleansing the stoma, you should:

A) apply the new device over the stoma.

B) flush the inside of the stoma with saline.

C) place a clean gauze pad over the stoma.

D) cover the stoma with the provided wafer.

Ans: C

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Pages: 2269–2270

Feedback: Medical Technology in the Prehospital Setting, pages 2269–2270

41. Patients with a colostomy:

A) require a collection bag to collect solid fecal material after a section of large intestine is surgically removed.

B) have a stoma that directs the small intestine to the outside of the abdomen where a collection bag is attached.

C) have had a surgical procedure that directs the large intestine out through a stoma in the anterior abdominal wall.

D) have a temporary surgical opening in the abdomen that collects waste material and allows the bowel to rest and heal.

Ans: C

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2269

Feedback: Medical Technology in the Prehospital Setting, page 2269

42. What should you do prior to inserting an indwelling urinary catheter if a home health care patient has sensation in the penile area?

A) Inject 10 mL of lidocaine into the urethra.

B) Administer a mild sedative prior to catheterization.

C) Minimize any pain by allowing the patient to sit up.

D) Coat the end of the catheter with an anesthetic gel.

Ans: D

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2271

Feedback: Medical Technology in the Prehospital Setting, page 2271

43. When urine becomes evident in the tubing during insertion of an indwelling urinary catheter in a male, you should:

A) connect the indwelling catheter to the urine drainage system, unclamp the tubing, and allow urine to drain.

B) inflate the balloon with the prefilled syringe and gently pull back on the catheter until you feel resistance.

C) continue inserting the catheter until the Y between the drainage port and the balloon port is at the tip of the penis.

D) insert the catheter approximately 1 inch farther, inflate the balloon, and then pull back on the catheter until you feel resistance.

Ans: C

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2271

Feedback: Medical Technology in the Prehospital Setting, page 2271

44. Unlike the insertion of an indwelling urinary catheter, insertion of an intermittent (straight) urinary catheter:

A) is necessary when the patient is bedridden for prolonged periods.

B) does not involve inflation of a balloon to hold the catheter in place.

C) is associated with a greater risk for damage to the urinary sphincter.

D) generally does not require catheter lubrication with a water-soluble gel.

Ans: B

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2271

Feedback: Medical Technology in the Prehospital Setting, page 2271

45. The female urinary meatus is located:

A) superior to the clitoris.

B) just above the vaginal opening.

C) inferior to the vaginal opening.

D) between the vagina and perineum.

Ans: B

Complexity: Easy

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2272

Feedback: Medical Technology in the Prehospital Setting, page 2272

46. When urine becomes evident in the tubing during insertion of an indwelling urinary catheter in a female, you should:

A) insert the catheter another 1 to 3 inches.

B) pull back on the catheter about 2 inches.

C) carefully secure the catheter to the leg.

D) inflate the balloon with the prefilled syringe.

Ans: A

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2272

Feedback: Medical Technology in the Prehospital Setting, page 2272

47. The fistula used for hemodialysis is a surgical connection between:

A) two large veins.

B) an artery and a vein.

C) two large arteries.

D) a vein and the peritoneum.

Ans: B

Complexity: Easy

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2273

Feedback: Medical Technology in the Prehospital Setting, page 2273

48. Which of the following drugs should be avoided in a patient with renal failure?

A) Calcium

B) Albuterol

C) Sodium bicarbonate

D) Succinylcholine

Ans: D

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2273

Feedback: Medical Technology in the Prehospital Setting, page 2273

49. When treating a dialysis patient, it is especially important to:

A) keep the patient in a supine position.

B) elevate the arm with the AV fistula.

C) carefully titrate any IV fluids given.

D) treat acidosis with sodium bicarbonate.

Ans: C

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2273

Feedback: Medical Technology in the Prehospital Setting, page 2273

50. A dialysis patient requires pharmacologically assisted intubation. Which of the following medications should be avoided?

A) Midazolam

B) Etomidate

C) Vecuronium

D) Succinylcholine

Ans: D

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2273

Feedback: Medical Technology in the Prehospital Setting, page 2273

51. You respond to a dialysis center for a patient with shortness of breath. When you arrive, you find the patient, an older female, still receiving dialysis. She is conscious and alert and is experiencing mild respiratory distress. As your partner administers oxygen, you should:

A) ask the dialysis technician how long the patient has been on the dialysis machine.

B) start an IV in the arm opposite the AV shunt and set the flow rate to 25 mL/hr.

C) instruct the dialysis technician to remove the patient from the dialysis machine.

D) administer a beta-2 agonist medication and contact medical control for guidance.

Ans: A

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2273

Feedback: Medical Technology in the Prehospital Setting, page 2273

52. Hydrocephalus may occur if:

A) too much cerebrospinal fluid is forced into the spinal canal.

B) cerebrospinal fluid absorption into the bloodstream is reduced.

C) bleeding in the brain causes an increase in intracranial pressure.

D) the brain produces less than 500 mL of cerebrospinal fluid per day.

Ans: B

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2274

Feedback: Medical Technology in the Prehospital Setting, page 2274

53. The outflow catheter of a cerebrospinal fluid shunt is MOST commonly placed into the patient's:

A) right atrium.

B) pulmonary cavity.

C) peritoneal cavity.

D) left ventricle.

Ans: C

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2274

Feedback: Medical Technology in the Prehospital Setting, page 2274

54. Which of the following clinical presentations is MOST consistent with a malfunctioning cerebrospinal fluid shunt?

A) Tachycardia, tinnitus, and a narrowing pulse pressure

B) Visual disturbances, headache, and altered mental status

C) Hypotension, sudden loss of hearing, and severe nausea

D) Tachypnea, fluid drainage from the ears, and restlessness

Ans: B

Complexity: Moderate

Ahead: Medical Technology in the Prehospital Setting

Subject: Patients with Special Challenges

Page: 2274

Feedback: Medical Technology in the Prehospital Setting, page 2274

55. The majority of current hemodynamic monitoring involves placement of different types of catheters into areas within the:

A) central nervous system.

B) brain and spinal cord.

C) pulmonary circulation.

D) cardiovascular system.

Ans: D

Complexity: Moderate

Ahead: Medical Technology Used During Interfacility Transport

Subject: Patients with Special Challenges

Page: 2275

Feedback: Medical Technology Used During Interfacility Transport, page 2275

56. You are performing an interfacility transfer of a patient who received a cardiac catheterization and has a sheath in his femoral artery. During transport, it is important that the patient:

A) remain in a supine position with his legs straight.

B) be placed onto his left side with his head elevated.

C) receive IV fluid boluses to keep the sheath patent.

D) remain in a sitting position to prevent an embolism.

Ans: A

Complexity: Moderate

Ahead: Medical Technology Used During Interfacility Transport

Subject: Patients with Special Challenges

Page: 2276

Feedback: Medical Technology Used During Interfacility Transport, page 2276

57. An intra-aortic balloon pump functions by:

A) deflating a balloon during systole, which pushes blood into the central circulation.

B) deflating a balloon during diastole, which creates a vacuum and decreases afterload.

C) inflating a balloon during diastole, which pushes blood into the systemic circulation.

D) inflating a balloon during systole, which creates a vacuum and decreases afterload.

Ans: C

Complexity: Moderate

Ahead: Medical Technology Used During Interfacility Transport

Subject: Patients with Special Challenges

Pages: 2276–2277

Feedback: Medical Technology Used During Interfacility Transport, pages 2276–2277

58. The transducer or drainage system of an intracranial pressure monitor is typically aligned at the same height as the patient's:

A) forehead.

B) ear canal.

C) eyebrow.

D) temporal bone.

Ans: B

Complexity: Moderate

Ahead: Medical Technology Used During Interfacility Transport

Subject: Patients with Special Challenges

Page: 2277

Feedback: Medical Technology Used During Interfacility Transport, page 2277

59. Down syndrome is a condition in which:

A) chromosome 23 fails to separate.

B) the ovum contains 21 chromosomes.

C) a triplication of chromosome 21 occurs.

D) the human somatic cell contains 24 chromosomes.

Ans: C

Complexity: Moderate

Ahead: Care of Patients With Cognitive, Sensory, or Communication Impairment

Subject: Patients with Special Challenges

Page: 2279

Feedback: Care of Patients With Cognitive, Sensory, or Communication Impairment, page 2279

60. Characteristic physical features of Down syndrome include:

A) a protruding tongue.

B) an excessively long neck.

C) bulging of the nose and face.

D) downward slanting eyes.

Ans: A

Complexity: Moderate

Ahead: Care of Patients With Cognitive, Sensory, or Communication Impairment

Subject: Patients with Special Challenges

Page: 2279

Feedback: Care of Patients With Cognitive, Sensory, or Communication Impairment, page 2279

61. A patient who presents with focal neurologic abnormalities as a physical manifestation of an underlying mental illness is experiencing:

A) hypochondriasis.

B) a conversion disorder.

C) paranoid schizophrenia.

D) obsessive-compulsive disorder.

Ans: B

Complexity: Moderate

Ahead: Care of Patients With Cognitive, Sensory, or Communication Impairment

Subject: Patients with Special Challenges

Page: 2280

Feedback: Care of Patients With Cognitive, Sensory, or Communication Impairment, page 2280

62. Intellectual disability is MOST accurately defined as:

A) the inability to provide adequate self-care because of intense emotional abuse during childhood.

B) a substandard intelligence quotient secondary to a congenital infection or complications at birth.

C) a genetic condition in which the patient is unable to interact normally and acts younger than his or her peers.

D) insufficient development of the brain that results in the inability to learn and socially adapt at the usual rate.

Ans: D

Complexity: Moderate

Ahead: Care of Patients With Cognitive, Sensory, or Communication Impairment

Subject: Patients with Special Challenges

Page: 2279

Feedback: Care of Patients With Cognitive, Sensory, or Communication Impairment, page 2279

63. Which of the following statements regarding autism is correct?

A) The vast majority of patients with autism are mute and have an IQ of less than 20.

B) Some patients with autism are able to easily solve complex mathematical problems.

C) Common causes of autism include traumatic brain injury and severe emotional trauma.

D) You should expect that a patient with autism will respond favorably to physical contact.

Ans: B

Complexity: Moderate

Ahead: Care of Patients With Cognitive, Sensory, or Communication Impairment

Subject: Patients with Special Challenges

Page: 2279

Feedback: Care of Patients With Cognitive, Sensory, or Communication Impairment, page 2279

64. The majority of acquired hearing loss in children and adults is the result of:

A) a tumor on the acoustic nerve.

B) frequent middle ear infections.

C) excessive exposure to loud noise.

D) long-term use of salicylates.

Ans: C

Complexity: Easy

Ahead: Care of Patients With Cognitive, Sensory, or Communication Impairment

Subject: Patients with Special Challenges

Page: 2280

Feedback: Care of Patients With Cognitive, Sensory, or Communication Impairment, page 2280

65. Sensorineural hearing loss is caused by:

A) decreased sound uptake through tiny hairs within the cochlea.

B) an inability of sound to travel from the outer ear to the inner ear.

C) destruction of the acoustic nerve from the use of certain drugs.

D) failure of the brainstem to transmit messages via the acoustic nerve.

Ans: A

Complexity: Moderate

Ahead: Care of Patients With Cognitive, Sensory, or Communication Impairment

Subject: Patients with Special Challenges

Page: 2280

Feedback: Care of Patients With Cognitive, Sensory, or Communication Impairment, page 2280

66. A person is able to hear, but is unable to interpret speech when other background noises are present. This is consistent with:

A) auditory neuropathy.

B) conductive hearing loss.

C) sensorineural hearing loss.

D) central auditory processing disorder.

Ans: D

Complexity: Moderate

Ahead: Care of Patients With Cognitive, Sensory, or Communication Impairment

Subject: Patients with Special Challenges

Page: 2280

Feedback: Care of Patients With Cognitive, Sensory, or Communication Impairment, page 2280

67. When troubleshooting a hearing aid that is not working, you should:

A) avoid attempting to clean the device.

B) soak the device in hydrogen peroxide.

C) ensure the device is set to telephone mode.

D) carefully clean the device with an alcohol prep.

Ans: A

Complexity: Moderate

Ahead: Care of Patients With Cognitive, Sensory, or Communication Impairment

Subject: Patients with Special Challenges

Page: 2282

Feedback: Care of Patients With Cognitive, Sensory, or Communication Impairment, page 2282

68. By placing one hand on your forehead and your other hand over your abdomen, you are asking a hearing-impaired person if he or she:

A) is hurt.

B) feels sick.

C) needs help.

D) is in pain.

Ans: B

Complexity: Moderate

Ahead: Care of Patients With Cognitive, Sensory, or Communication Impairment

Subject: Patients with Special Challenges

Page: 2281

Feedback: Care of Patients With Cognitive, Sensory, or Communication Impairment, page 2281

69. A person with amblyopia has:

A) difficulty visualizing object from afar.

B) an area missing from his or her visual field.

C) partial or complete vision loss in one eye.

D) difficulty visualizing objects that are close.

Ans: C

Complexity: Easy

Ahead: Care of Patients With Cognitive, Sensory, or Communication Impairment

Subject: Patients with Special Challenges

Page: 2283

Feedback: Care of Patients With Cognitive, Sensory, or Communication Impairment, page 2283

70. A patient presents with a sudden onset of unilateral eye pain and blurred vision. You should suspect:

A) acute optic nerve hypoplasia.

B) acute angle-closure glaucoma.

C) central retinal arterial occlusion.

D) spontaneous retinal detachment.

Ans: B

Complexity: Moderate

Ahead: Care of Patients With Cognitive, Sensory, or Communication Impairment

Subject: Patients with Special Challenges

Page: 2283

Feedback: Care of Patients With Cognitive, Sensory, or Communication Impairment, page 2283

71. Dysarthria is:

A) the inability to make speech sounds correctly.

B) a speech disorder that primarily affects adults.

C) the loss of ability to communicate in speech or writing.

D) caused by damage to the language center of the brain.

Ans: A

Complexity: Easy

Ahead: Care of Patients With Cognitive, Sensory, or Communication Impairment

Subject: Patients with Special Challenges

Page: 2283

Feedback: Care of Patients With Cognitive, Sensory, or Communication Impairment, page 2283

72. Which of the following statements regarding paralysis is correct?

A) A paralyzed patient has lost the ability to voluntarily move a body part.

B) Paralysis always entails the loss of both sensory and motor functions.

C) Injuries to the thoracic or lumbar spine generally result in quadriplegia.

D) Most patients who are paralyzed have normal sensation or hyperesthesia.

Ans: A

Complexity: Moderate

Ahead: Care of Patients With Cognitive, Sensory, or Communication Impairment

Subject: Patients with Special Challenges

Page: 2284

Feedback: Care of Patients With Cognitive, Sensory, or Communication Impairment, page 2284

73. During your assessment of a patient with paraplegia, you touch the patient's leg and he screams in pain. This is an example of:

A) parasthesias.

B) hypoplasia.

C) hyperplasia.

D) hyperesthesia.

Ans: D

Complexity: Moderate

Ahead: Care of Patients With Cognitive, Sensory, or Communication Impairment

Subject: Patients with Special Challenges

Page: 2284

Feedback: Care of Patients With Cognitive, Sensory, or Communication Impairment, page 2284

74. The signs, symptoms, clinical presentation, and treatment for cancer largely depends on:

A) the gender of the patient.

B) the patient’s family history.

C) the present location of the cancer.

D) whether or not the patient has diabetes.

Ans: C

Complexity: Moderate

Ahead: Other Notable Chronic Medical Conditions

Subject: Patients with Special Challenges

Page: 2286

Feedback: Other Notable Chronic Medical Conditions, page 2286

75. While transporting a cancer patient who is receiving chemotherapy, you should recall that:

A) it is likely that the patient's condition is terminal.

B) chemotherapy weakens a patient's immune system.

C) prophylactic antiemetic medications are often needed.

D) chemotherapy is only used to treat metastatic cancer.

Ans: B

Complexity: Moderate

Ahead: Other Notable Chronic Medical Conditions

Subject: Patients with Special Challenges

Page: 2286

Feedback: Other Notable Chronic Medical Conditions, page 2286

76. Cerebral palsy is a:

A) nonprogressive, bilateral neuromuscular disorder in which voluntary muscles are poorly controlled.

B) degenerative, unilateral neuromuscular disorder in which control of autonomic functions is impaired.

C) chronic dysfunction of the endocrine system that primarily targets the respiratory and digestive systems.

D) progressive weakening of the body's voluntary muscles that leaves the patient confined to a wheelchair.

Ans: A

Complexity: Moderate

Ahead: Other Notable Chronic Medical Conditions

Subject: Patients with Special Challenges

Page: 2286

Feedback: Other Notable Chronic Medical Conditions, page 2286

77. Common complications associated with cerebral palsy include all of the following, EXCEPT:

A) seizures.

B) visual impairment.

C) mental retardation.

D) cardiovascular disease.

Ans: D

Complexity: Moderate

Ahead: Other Notable Chronic Medical Conditions

Subject: Patients with Special Challenges

Page: 2286

Feedback: Other Notable Chronic Medical Conditions, page 2286

78. What is the pathophysiology of cystic fibrosis?

A) Acquisition of a virus or bacterium that takes residence inside the parenchyma of the lungs, resulting in the production of thin but copious secretions

B) A defective gene that makes it difficult for chloride to move through the cells, which causes unusually high sodium loss and abnormally thick mucus secretions

C) An underproduction of pulmonary surfactant, which causes chronic respiratory distress, thick pulmonary secretions, and severe intrapulmonary shunting

D) Delayed lung growth and development that is typically caused by a variety of congenital cardiovascular defects, most notably a ventriculoseptal defect

Ans: B

Complexity: Moderate

Ahead: Other Notable Chronic Medical Conditions

Subject: Patients with Special Challenges

Page: 2287

Feedback: Other Notable Chronic Medical Conditions, page 2287

79. Multiple sclerosis is:

A) a chronic central nervous system disease caused by destruction of the myelin and nerve axons within the brain and spinal cord.

B) most often secondary to a diffuse axonal brain injury and causes neuromuscular disability due to stretching or tearing of the axons.

C) a progressive disease in 90% of patients who have it, and is characterized by unrelenting pain, weakness, and visual impairment.

D) chronic in most cases, and is the result of degenerative changes in the muscle that results in muscle atrophy and decreased bone density.

Ans: A

Complexity: Moderate

Ahead: Other Notable Chronic Medical Conditions

Subject: Patients with Special Challenges

Pages: 2287–2288

Feedback: Other Notable Chronic Medical Conditions, pages 2287–2288

80. Muscular dystrophy can be defined as a(n):

A) autoimmune disease in which the skeletal muscles are rapidly destroyed.

B) nonprogressive neuromuscular disorder caused by fetal brain hypoxia.

C) birth defect caused by improper development of the fetal neural tube.

D) genetic disease that causes a slow, progressive degeneration of muscle fibers.

Ans: D

Complexity: Moderate

Ahead: Other Notable Chronic Medical Conditions

Subject: Patients with Special Challenges

Pages: 2288–2289

Feedback: Other Notable Chronic Medical Conditions, pages 2288–2289

81. Spina bifida occurs when:

A) hydrocephalus causes a significant increase in pressure within the spinal canal, resulting in chronic compression of the spinal cord.

B) the fetus's spinal column does not close properly or completely and vertebrae do not develop, leaving a portion of the spinal cord exposed.

C) trauma during birth causes distracting injuries to the cervical and thoracic vertebrae, resulting in partial or complete paralysis below the injury.

D) growth of the fetus's spinal column stops at the thoracic vertebrae, which leaves the lumbar portion of the spinal cord completely unprotected.

Ans: B

Complexity: Moderate

Ahead: Other Notable Chronic Medical Conditions

Subject: Patients with Special Challenges

Pages: 2289–2290

Feedback: Other Notable Chronic Medical Conditions, pages 2289–2290

82. Which of the following statements regarding poliomyelitis (polio) is correct?

A) Any warm-blooded animal can serve as a host for the polio virus.

B) Patients with nonparalytic polio usually have permanent neurologic injury.

C) Polio initially presents with a headache, sore throat, fever, and vomiting.

D) Subclinical polio is characterized by symptoms that last less than a month.

Ans: C

Complexity: Moderate

Ahead: Other Notable Chronic Medical Conditions

Subject: Patients with Special Challenges

Page: 2290

Feedback: Other Notable Chronic Medical Conditions, page 2290

83. When assessing a patient who is disabled from a previous brain injury, you should:

A) ask the patient's family what is normal for him or her.

B) be prepared to hyperventilate the patient if apnea occurs.

C) consider asymmetric pupils to be the result of the past injury.

D) recall that most disabled patients are unable to communicate with you.

Ans: A

Complexity: Moderate

Ahead: Other Notable Chronic Medical Conditions

Subject: Patients with Special Challenges

Pages: 2290–2291

Feedback: Other Notable Chronic Medical Conditions, pages 2290–2291

84. You are caring for an elderly woman with terminal sarcoma. She is conscious, extremely weak, and in severe pain. Her son tells you that she has a living will and an out-of-hospital do not resuscitate order, and produces the appropriate documentation. The patient is on home oxygen at 2 L/min via nasal cannula. You should:

A) recognize that the patient's death is imminent and remain at the scene to provide any needed emotional support.

B) administer an appropriate dose of morphine or fentanyl to the patient and provide emotional support to the son.

C) apply high-flow oxygen via nonrebreathing mask, establish vascular access, and transport her to the hospital.

D) leave the patient on her nasal oxygen, keep her warm, and transport her safely to the hospital for further palliative care.

Ans: B

Complexity: Moderate

Ahead: Care of Patients With Terminal Illness

Subject: Patients with Special Challenges

Pages: 2258–2259

Feedback: Care of Patients With Terminal Illness, pages 2258–2259