Import Settings:

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Highest Answer Letter: D

Multiple Keywords in Same Paragraph: No

**Chapter: Incident Management and Mass-Casualty Incidents- Incident Management and Mass-Casualty Incidents - TBNK**

**Multiple Choice**

1. A single command system is one in which:

A) the incident commander assumes all functional roles.

B) one person is in charge, even if multiple agencies respond.

C) one person is in charge, unless multiple agencies respond.

D) one person from each responding agency assumes command.

Ans: B

Complexity: Moderate

Ahead: The Incident Command System

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Feedback: The Incident Command System, page 2336

2. A mass-casualty incident is MOST accurately defined as an event in which:

A) mutual aid from other agencies is required to care for numerous patients.

B) there are at least 25 patients, more than half of whom are critically injured.

C) the number of patients exceeds the resources available to the initial responders.

D) there are more patients who require advanced life support than patients who do not.

Ans: C

Complexity: Moderate

Ahead: Introduction

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Feedback: Introduction, page 2333

3. Which of the following events would MOST likely cause an open, or uncontained, multiple-casualty incident?

A) Tornado

B) Bus wreck

C) Small explosion

D) Two-car collision

Ans: A

Complexity: Easy

Ahead: Mass-Casualty Incidents

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Feedback: Mass-Casualty Incidents, page 2344

4. A closed, or contained, multiple-casualty incident is a situation that:

A) does not have the potential to grow in size or complexity.

B) involves no more than 10 patients who are critically injured.

C) does not require mutual aid assistance from other agencies.

D) is not expected to produce more patients than initially present.

Ans: D

Complexity: Moderate

Ahead: Mass-Casualty Incidents

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Feedback: Mass-Casualty Incidents, page 2344

5. Using the incident command system provides a modular organizational structure that:

A) is overseen by the most experienced paramedic.

B) depends on the size and complexity of the incident.

C) requires a uniform approach to any major incident.

D) remains static in all incidents involving mass casualties.

Ans: B

Complexity: Moderate

Ahead: The Incident Command System

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6. \_\_\_\_\_\_\_\_\_\_\_\_\_ is the process in which individual units or different organizations make independent decisions about the next appropriate action.

A) Freelancing

B) Sole command

C) Unified command

D) Effort duplication

Ans: A

Complexity: Easy

Ahead: The Incident Command System

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Feedback: The Incident Command System, page 2335

7. An individual's span of control:

A) should be self-assigned and dependent on the incident size.

B) is the degree of responsibility assigned by a higher authority.

C) represents the number of personnel who report to him or her.

D) limits his or her autonomy to delegate tasks to another person.

Ans: C

Complexity: Moderate

Ahead: The Incident Command System

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Feedback: The Incident Command System, page 2335

8. Command functions include all of the following, EXCEPT the:

A) triage officer.

B) safety officer.

C) liaison officer.

D) public information officer.

Ans: A

Complexity: Moderate

Ahead: The Incident Command System

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Feedback: The Incident Command System, page 2336

9. Which of the following duties is NOT a responsibility of the incident commander?

A) Assessing the entire incident scene

B) Developing a plan to manage the incident

C) Establishing strategic objectives and priorities

D) Authorizing medical treatment interventions

Ans: D

Complexity: Moderate

Ahead: The Incident Command System

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Feedback: The Incident Command System, page 2336

10. During a small-scale incident, the incident commander:

A) will likely not respond to the scene.

B) may perform all the command functions.

C) primarily assumes the role of safety officer.

D) delegates all authority to the senior paramedic.

Ans: B

Complexity: Moderate

Ahead: The Incident Command System

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Feedback: The Incident Command System, page 2336

11. Which of the following statements regarding the unified command system is correct?

A) A unified command system is difficult to establish before an incident and is activated when the resources of one agency are significantly overwhelmed.

B) In a unified command system, multiple agencies from multiple jurisdictions work together to develop a plan that involves shared responsibilities.

C) A unified command system functions optimally if one incident commander from each agency is identified before a multiple-casualty incident actually occurs.

D) The response plan developed by a unified command system should focus only on major events such as building collapses, plane crashes, and terrorist attacks.

Ans: B

Complexity: Moderate

Ahead: The Incident Command System

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Feedback: The Incident Command System, page 2336

12. A single command system:

A) involves multiple agencies that share the responsibility for management of the incident.

B) generally increases an individual's span of control to include as many as 10 to 15 people.

C) is one in which a single person is in charge, even if multiple agencies respond to the incident.

D) is ideally used for long-duration, complex incidents that require the services of a single agency.

Ans: C

Complexity: Moderate

Ahead: The Incident Command System

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Feedback: The Incident Command System, page 2336

13. Prior to implementing any plans or operations at the scene of a multiple-casualty incident, you should FIRST:

A) notify your supervisor or the incident commander.

B) make sure the assigned safety officer is present.

C) move any unnecessary personnel away from the area.

D) acquire the assistance of at least seven other rescuers.

Ans: A

Complexity: Moderate

Ahead: The Incident Command System

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Feedback: The Incident Command System, pages 2337–2338

14. The transfer of incident command should occur:

A) when the most experienced paramedic arrives.

B) over the radio so all involved personnel can hear.

C) at least every hour throughout the entire incident.

D) face to face, if possible, and in an orderly manner.

Ans: D

Complexity: Easy

Ahead: The Incident Command System

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Feedback: The Incident Command System, page 2337

15. Broadly speaking, the finance section chief is responsible for:

A) documenting all expenditures at an incident and seeking reimbursement.

B) tracking all personnel overtime and ensuring that they are compensated.

C) determining what impact the incident will have on the economy of the affected area.

D) predetermining how much a major incident would affect the system's finances.

Ans: A

Complexity: Moderate

Ahead: The Incident Command System

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Feedback: The Incident Command System, page 2337

16. If responders at a major incident require additional medical equipment and supplies, they should notify the:

A) logistics section.

B) planning section.

C) operations section.

D) liaison officer.

Ans: A

Complexity: Moderate

Ahead: The Incident Command System

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Feedback: The Incident Command System, pages 2337–2338

17. At a very large incident, the operations section is responsible for:

A) locating food, shelter, and health care for you and the other responders present at the incident.

B) managing the tactical operations job usually handled by the incident commander on routine EMS calls.

C) ensuring that there is ample lighting and functional communications equipment during the incident.

D) obtaining data regarding problems that may arise at the incident and revising the plan to solve the problem.

Ans: B

Complexity: Moderate

Ahead: The Incident Command System

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Feedback: The Incident Command System, page 2337

18. Multiple-casualty equipment and supplies needed for airway control include all of the following, EXCEPT:

A) gloves, face shields, and a HEPA or N-95 mask.

B) oral and nasal airways, ET tubes, and Combitubes.

C) large-bore IV catheters for thoracic decompression.

D) rigid and flexible suction catheters and suction devices.

Ans: C

Complexity: Easy

Ahead: The Incident Command System

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19. Occlusive dressings and large-bore IV catheters for thoracic decompression are supplies used to address \_\_\_\_\_\_\_\_\_\_\_\_ issues at a multiple-casualty incident.

A) disability

B) breathing

C) circulation

D) airway control

Ans: B

Complexity: Moderate

Ahead: The Incident Command System

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20. The \_\_\_\_\_\_\_\_\_\_\_\_\_\_ has the authority and responsibility to stop an emergency operation if he or she believes a rescuer is in danger.

A) logistics chief

B) rescue officer

C) triage officer

D) safety officer

Ans: D

Complexity: Easy

Ahead: The Incident Command System

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21. If an incident is such that it warrants evacuation of people, the incident commander would MOST likely request that the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ disseminate that information as well as evacuation directions.

A) safety officer

B) liaison officer

C) operations chief

D) public information officer

Ans: D

Complexity: Easy

Ahead: The Incident Command System

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Feedback: The Incident Command System, page 2339

22. The National Incident Management System is designed to:

A) prepare for, prevent, respond to, and recover from domestic incidents, regardless of cause, size, or complexity.

B) provide a consistent template to enable state, federal, and local governments to respond safely to any act of terrorism.

C) educate state, federal, and local governments, as well as private-sector organizations, to effectively prevent a domestic incident.

D) maximize the capabilities of each state in the United States to manage a large-scale disaster effectively, regardless of the cause.

Ans: A

Complexity: Moderate

Ahead: The NIMS

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Feedback: The NIMS, page 2334

23. The National Incident Management System standard incident command structures are based on:

A) a unified command system, multijurisdictional cooperation, and continuous public education.

B) U.S. military oversight, coordination among multiple public and private agencies, and a warning system.

C) an incident command system, multiagency coordination systems, and public information systems.

D) a single command system, cooperation between state and local governments, and a mechanism to warn the public.

Ans: C

Complexity: Moderate

Ahead: The NIMS

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Pages: 2334–2335

Feedback: The NIMS, pages 2334–2335

24. Two MOST important underlying principles of National Incident Management System are:

A) compliance and funding.

B) flexibility and standardization.

C) personnel training and certification.

D) interoperability and public awareness.

Ans: B

Complexity: Moderate

Ahead: The NIMS

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Pages: 2334–2335

Feedback: The NIMS, pages 2334–2335

25. Preparedness in a given area should involve decisions and planning about:

A) major disasters, such as tornadoes and earthquakes.

B) the most likely disasters for the area, among other disasters.

C) international terrorist attacks and catastrophic natural disasters.

D) the most common disasters encountered throughout the world.

Ans: B

Complexity: Moderate

Ahead: EMS Response Within The Incident Command System

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Feedback: EMS Response Within The Incident Command System, page 2340

26. When sizing up the scene of a multiple-casualty incident, the LEAST of your initial concerns should be:

A) the nature of the incident.

B) requesting additional help.

C) how you will react initially.

D) why the incident occurred.

Ans: D

Complexity: Moderate

Ahead: EMS Response Within The Incident Command System

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Feedback: EMS Response Within The Incident Command System, page 2340

27. If your unit is the first to arrive at an incident, you should keep yourself safe, size up the scene, and then:

A) notify dispatch, identify your unit, apprise dispatch of the situation, and assume command.

B) request additional help and then begin triaging patients, treating the most critically injured first.

C) immediately contact medical control and request authorization to function as the medical officer.

D) quickly categorize all patients according to the severity of their injuries and request additional resources.

Ans: A

Complexity: Moderate

Ahead: EMS Response Within The Incident Command System

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Pages: 2340–2341

Feedback: EMS Response Within The Incident Command System, pages 2340–2341

28. After ensuring your own safety, you should consider the safety of, in order:

A) your partner, the patient, other rescuers, and any bystanders.

B) the patient, other rescuers, any bystanders, and your partner.

C) your partner, other rescuers, the patient, and any bystanders.

D) the patient, your partner, any bystanders, and other rescuers.

Ans: C

Complexity: Moderate

Ahead: EMS Response Within The Incident Command System

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Feedback: EMS Response Within The Incident Command System, page 2340

29. Initial command of an incident should be assumed by the:

A) police chief or his or her designee.

B) first paramedic to arrive at the scene.

C) most experienced public safety official.

D) highest-ranking individual at the scene.

Ans: C

Complexity: Easy

Ahead: EMS Response Within The Incident Command System

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Feedback: EMS Response Within The Incident Command System, page 2340

30. When functioning at the scene of a major incident, communication should:

A) incorporate signals for privacy purposes.

B) be face to face to minimize radio traffic.

C) involve the use of codes to limit air time.

D) occur via radio to keep everyone updated.

Ans: B

Complexity: Moderate

Ahead: EMS Response Within The Incident Command System

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Feedback: EMS Response Within The Incident Command System, page 2341

31. Which of the following is the MOST difficult aspect of being a triage leader?

A) Communicating with the EMS branch on your progress

B) Ensuring the movement of all patients to a treatment area

C) Documenting all the activities that occur in the triage area

D) Not initiating treatment until all patients have been triaged

Ans: D

Complexity: Moderate

Ahead: Medical Incident Command

Subject: Incident Management and Mass-Casualty Incidents

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Feedback: Medical Incident Command, page 2342

32. The primary duty of the triage unit leader is to:

A) quickly remove the deceased from the triage area.

B) ensure that every patient receives an initial assessment.

C) immediately identify the most critically injured patients.

D) evacuate patients to the most appropriate treatment area.

Ans: B

Complexity: Easy

Ahead: Medical Incident Command

Subject: Incident Management and Mass-Casualty Incidents

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Feedback: Medical Incident Command, page 2342

33. As soon as the treatment unit leader receives patients from the triage section, he or she should:

A) perform secondary triage and begin treatment.

B) immediately tend to the most critically injured.

C) obtain the names and addresses of each patient.

D) make radio contact with the transportation officer.

Ans: A

Complexity: Moderate

Ahead: Medical Incident Command

Subject: Incident Management and Mass-Casualty Incidents

Pages: 2342–2343

Feedback: Medical Incident Command, pages 2342–2343

34. The primary function of the treatment section is to:

A) expediently move patients to the transportation area.

B) rapidly assess each patient to determine injury severity.

C) separate and treat patients based on their triage category.

D) treat each patient in the order in which he or she presents.

Ans: C

Complexity: Easy

Ahead: Medical Incident Command

Subject: Incident Management and Mass-Casualty Incidents

Pages: 2342–2343

Feedback: Medical Incident Command, page 2342–2343

35. Communicating with area hospitals to determine their capabilities and resources is a responsibility of the:

A) treatment unit leader.

B) individual paramedic.

C) chief medical officer.

D) transportation unit leader.

Ans: D

Complexity: Easy

Ahead: Medical Incident Command

Subject: Incident Management and Mass-Casualty Incidents

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Feedback: Medical Incident Command, page 2343

36. The staging area manager is responsible for:

A) tracking the number of vehicles transporting patients.

B) supervising all responders who are providing treatment.

C) requesting additional medical supplies as they are needed.

D) coordinating with all incoming and outgoing ambulances.

Ans: D

Complexity: Easy

Ahead: Medical Incident Command

Subject: Incident Management and Mass-Casualty Incidents

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Feedback: Medical Incident Command, page 2343

37. If an emergency physician is present at the scene of a mass-casualty incident, he or she would be the LEAST likely to:

A) make initial and secondary triage decisions.

B) assume control over complex rescuer operations.

C) decide which patients require immediate transport.

D) provide on-scene medical direction for paramedics.

Ans: B

Complexity: Moderate

Ahead: Medical Incident Command

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Feedback: Medical Incident Command, page 2343

38. Which of the following statements regarding the rehabilitation group is correct?

A) Ideally, the rehabilitation section should be located within view of the scene so that responders can return to the incident quickly if they are requested to do so by a section officer.

B) In addition to meeting the responders' needs for rest, fluids, and food, the rehabilitation officer must be prepared to conduct a defusing session if a responder shows signs of stress.

C) The primary purpose of the rehabilitation section is to conduct brief physical examinations on all responders before they actively engage in functions that are required by the incident.

D) Victims of a major incident who are not physically injured should report to the rehabilitation section for food, water, rest, protection from the elements, and psychological support.

Ans: B

Complexity: Moderate

Ahead: Medical Incident Command

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Feedback: Medical Incident Command, page 2343

39. Because extrication and rescue are medically complex:

A) the officers responsible for these functions usually function under a speciality branch of the incident command system.

B) no lengthy extrication or rescue operation should commence until an emergency physician is present at the scene.

C) the position of extrication or rescue officer should always be assumed by an experienced EMT or paramedic.

D) anyone who requires extrication or rescue should be triaged and receive basic lifesaving care before being extricated or rescued.

Ans: A

Complexity: Moderate

Ahead: Medical Incident Command

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Pages: 2343–2344

Feedback: Medical Incident Command, pages 2343–2344

40. If a disaster situation requires a morgue unit leader, it is MOST important for the person who is assigned that function to:

A) work directly with law enforcement officials to positively identify the deceased as soon as possible.

B) leave all of the dead victims in their original locations until a coroner or mortician is at the scene.

C) be aware that some mass-casualty incidents involving numerous fatalities may be crime scenes.

D) quickly remove the bodies from the scene, even if a storage and removal plan has not been established.

Ans: C

Complexity: Moderate

Ahead: Medical Incident Command

Subject: Incident Management and Mass-Casualty Incidents

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Feedback: Medical Incident Command, page 2344

41. The goal of doing the greatest good for the greatest number of people mandates that:

A) life-threatening injuries should be treated during the triage phase.

B) there should be one triage officer for every 10 victims of a disaster.

C) triage assessment is brief and patient condition categories are basic.

D) every victim should receive a detailed physical exam during triage.

Ans: C

Complexity: Moderate

Ahead: Triage

Subject: Incident Management and Mass-Casualty Incidents

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Feedback: Triage, page 2345

42. In contrast to primary triage, secondary triage:

A) requires a more rapid assessment.

B) is performed in the treatment area.

C) is typically performed by a physician.

D) involves initial placement of triage tags.

Ans: B

Complexity: Moderate

Ahead: Triage

Subject: Incident Management and Mass-Casualty Incidents

Pages: 2345–2346

Feedback: Triage, pages 2345–2346

43. Which of the following statements regarding triage during a mass-casualty incident is correct?

A) Unless hypotension is present, patients with other signs of shock should be given a yellow tag.

B) Any patient with burns should be assigned a higher priority than patients with severe medical problems.

C) A patient with a back injury with spinal cord involvement should be placed in the immediate category.

D) If your resources are limited, apneic patients with a pulse may be placed in the expectant category.

Ans: D

Complexity: Moderate

Ahead: Triage

Subject: Incident Management and Mass-Casualty Incidents

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Feedback: Triage, page 2346

44. Which of the following injuries or conditions should be assigned the HIGHEST triage priority?

A) Partial-thickness burns

B) Respiratory distress

C) Cardiopulmonary arrest

D) Multiple long bone fractures

Ans: B

Complexity: Moderate

Ahead: Triage

Subject: Incident Management and Mass-Casualty Incidents

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Feedback: Triage, page 2347

45. Triage tags that have tear-off receipts are MOST useful to the:

A) triage supervisor.

B) treatment supervisor.

C) incident commander.

D) transportation supervisor.

Ans: D

Complexity: Moderate

Ahead: Triage

Subject: Incident Management and Mass-Casualty Incidents

Pages: 2347–2348

Feedback: Triage, pages 2347–2348

46. The FIRST step in the START triage system involves:

A) directing all the walking wounded to an easily identifiable landmark.

B) quickly removing the obviously dead victims to a predesignated area.

C) identifying the nonambulatory patients and assessing their breathing.

D) obtaining an estimate of the total number of critically injured victims.

Ans: A

Complexity: Moderate

Ahead: Triage

Subject: Incident Management and Mass-Casualty Incidents

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Feedback: Triage, page 2349

47. According to the START triage system, a nonbreathing patient should be triaged as immediate if:

A) he or she is in need of immediate intubation.

B) the airway is completely blocked by swelling.

C) a manual airway maneuver restores breathing.

D) he or she does not respond to two rescue breaths.

Ans: C

Complexity: Moderate

Ahead: Triage

Subject: Incident Management and Mass-Casualty Incidents

Pages: 2348–2349

Feedback: Triage, pages 2348–2349

48. According to the START triage system, if a patient has a strong radial pulse, you should:

A) place him or her in the delayed category.

B) control bleeding and assess mental status.

C) assess his or her ability to follow commands.

D) determine whether the pulse rate is slow or fast.

Ans: B

Complexity: Moderate

Ahead: Triage

Subject: Incident Management and Mass-Casualty Incidents

Pages: 2348–2349

Feedback: Triage, pages 2348–2349

49. According to the JumpSTART triage system for pediatric patients, infants or children not developed enough to walk or follow commands should be:

A) quickly moved to a designated area of the triage section and monitored closely.

B) taken to the treatment sector as soon as possible for immediate secondary triage.

C) labeled with a red tag and transported immediately to a pediatric trauma center.

D) assigned the same triage category as the walking wounded and evaluated later.

Ans: B

Complexity: Moderate

Ahead: Triage

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Feedback: Triage, page 2349

50. According to the JumpSTART triage system, if an infant or child is not breathing, you should:

A) deliver five rescue breaths.

B) manually open the patient's airway.

C) categorize the patient as expectant.

D) immediately assess for a pulse.

Ans: D

Complexity: Moderate

Ahead: Triage

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Pages: 2349–2350

Feedback: Triage, pages 2349–2350

51. Patients who are hysterical and disruptive to rescue efforts:

A) may need to be made an immediate priority and transported out of the disaster site, even if they are not seriously injured.

B) should immediately be directed to the rehabilitation section, where rehabilitation personnel can provide emotional support.

C) must be removed from the incident by law enforcement officials and detained in a separate area until they can be properly triaged.

D) should be assigned as a delayed patient and directed to the treatment section where they can be medically and psychologically evaluated.

Ans: A

Complexity: Moderate

Ahead: Triage

Subject: Incident Management and Mass-Casualty Incidents

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Feedback: Triage, page 2350

52. Which of the following statements regarding critical incident stress management at the scene of a mass-casualty incident is correct?

A) Critical incident stress management should begin only after all patients have been cared for appropriately.

B) At a multiple-casualty incident, rescuers are unable to self-heal and they lose their resiliency to cope with the stress.

C) Rescuers should be encouraged, but not forced, to report to the rehabilitation sector for a stress debriefing.

D) Critical incident stress management is a crucial and mandatory part of any disaster and should be enforced.

Ans: C

Complexity: Moderate

Ahead: Critical Incident Stress Management

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Feedback: Critical Incident Stress Management, page 2351

53. During an incident involving a building collapse, a paramedic is assigned eight rescuers to function under his authority. However, as the incident progresses, the paramedic finds that he is unable to effectively manage the personnel assigned to him. He should:

A) send two of the rescuers to the triage section since this is where they will most likely be needed.

B) transfer authority to one of the rescuers assigned to him and then follow that person's directions.

C) divide tasks and delegate supervision of some tasks to one or more of the rescuers assigned to him.

D) release half of the rescuers assigned to him and instruct them to report directly to the incident commander.

Ans: C

Complexity: Moderate

Ahead: The Incident Command System

Subject: Incident Management and Mass-Casualty Incidents

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Feedback: The Incident Command System, page 2335

54. You are caring for a patient with non–life-threatening injuries in the treatment section of a multiple-casualty incident when you are approached by several TV reporters who are seeking details regarding the incident. You should:

A) provide a brief overview of the current situation.

B) direct the reporters to the public information officer.

C) firmly tell the reporters to leave the scene immediately.

D) ignore the reporters' questions and continue patient care.

Ans: B

Complexity: Moderate

Ahead: The Incident Command System

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Feedback: The Incident Command System, page 2339

55. Your unit is the first to arrive at the scene of a bus crash. As you approach the scene, you see multiple patients, some of them lying on the ground not moving and others walking around in a dazed state. You should:

A) remain aware of the potential for hazards.

B) immediately request additional ambulances.

C) establish incident command and begin triage.

D) move the walking patients away from the bus.

Ans: A

Complexity: Moderate

Ahead: EMS Response Within the Incident Command System

Subject: Incident Management and Mass-Casualty Incidents

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Feedback: EMS Response Within the Incident Command System, page 2340

56. During an incident involving an explosion, you determine that two critically injured patients should be transported to a trauma center by air. After stabilizing the patients' conditions to the best of your ability, you should:

A) call the receiving trauma center and update them on the patients' conditions.

B) contact the incident commander and request permission to utilize air transport.

C) request air transport immediately and determine where you will land the helicopter.

D) notify the transportation supervisor and request that he or she establish a landing zone.

Ans: D

Complexity: Moderate

Ahead: Medical Incident Command

Subject: Incident Management and Mass-Casualty Incidents

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Feedback: Medical Incident Command, page 2343

57. Upon arriving at the scene of a major incident, you can clearly see that there are numerous patients, some of whom are receiving care and others of whom are walking around unattended. Your MOST appropriate action should be to:

A) immediately triage the unattended patients.

B) move the walking patients to a separate area.

C) notify dispatch and request air medical transport.

D) report to the staging area for further instructions.

Ans: D

Complexity: Moderate

Ahead: Medical Incident Command

Subject: Incident Management and Mass-Casualty Incidents

Page: 2343

Feedback: Medical Incident Command, page 2343

58. You are triaging four patients who were involved in a motor vehicle crash. Victim 1 has bilateral femur fractures, is in severe pain, and is conscious and alert. Victim 2 is unresponsive, apneic, and pulseless. Victim 3, who is profusely diaphoretic, is wearing a medical alert bracelet identifying her as a diabetic. Victim 4 is responsive to pain only and is in obvious respiratory distress. How should you categorize these patients?

A) Victim 1, immediate; victim 2, immediate; victim 3, delayed; and victim 4, delayed

B) Victim 1, delayed; victim 2, expectant; victim 3, immediate; and victim 4, immediate

C) Victim 1, delayed; victim 2, immediate; victim 3, delayed; and victim 4, immediate

D) Victim 1, immediate; victim 2, expectant; victim 3, immediate; and victim 4, delayed

Ans: B

Complexity: Difficult

Ahead: Triage

Subject: Incident Management and Mass-Casualty Incidents

Pages: 2346–2347

Feedback: Triage, pages 2346–2347

59. While triaging patients at a multiple-casualty incident, you rapidly assess a patient and determine that she is conscious and alert, but cannot feel or move anything below her umbilicus. You should:

A) apply full spinal motion restriction precautions at once.

B) conduct a more in-depth neurologic exam of the patient.

C) place a yellow tag on her and move on to the next patient.

D) categorize her as an immediate patient and continue triage.

Ans: C

Complexity: Moderate

Ahead: Triage

Subject: Incident Management and Mass-Casualty Incidents

Pages: 2346–2347

Feedback: Triage, pages 2346–2347

60. You are caring for numerous patients in the treatment section at the scene of a school shooting. During secondary triage, you encounter a patient wearing a yellow tag. Her level of consciousness is markedly diminished and she is breathing inadequately. You should:

A) recategorize her as an immediate patient, begin treatment, and notify the transportation officer.

B) downgrade her triage status to expectant because of the numerous other patients that also require treatment.

C) remove the yellow tag, replace it with a red tag, and continue secondary triage of the other patients in the section.

D) provide aggressive basic airway management for 5 minutes and recategorize her as an expectant patient if she does not improve.

Ans: A

Complexity: Moderate

Ahead: Triage

Subject: Incident Management and Mass-Casualty Incidents

Pages: 2345–2347

Feedback: Triage, pages 2345–2347

61. Upon arriving at the scene of a multiple vehicle crash, you call for additional resources and begin triaging patients using the START triage system. The first patient you assess is a young male who is unconscious and apneic. After manually opening his airway, you note that he starts breathing shallowly. You should:

A) categorize him as an immediate patient.

B) assess the rate and quality of his radial pulse.

C) secure his airway with an ET tube.

D) place a yellow tag on him and continue triage.

Ans: A

Complexity: Moderate

Ahead: Triage

Subject: Incident Management and Mass-Casualty Incidents

Pages: 2348–2349

Feedback: Triage, pages 2348–2349

62. You are assessing the circulation status of an injured patient using the START triage system. The patient, a 33-year-old woman, has strong radial pulses bilaterally. You should:

A) assign her a triage category of delayed.

B) control any bleeding and assess her mental status.

C) identify her with a red tag and continue triaging.

D) ask her if she can get up and walk to another area.

Ans: B

Complexity: Moderate

Ahead: Triage

Subject: Incident Management and Mass-Casualty Incidents

Pages: 2348–2349

Feedback: Triage, pages 2348–2349

63. A man stormed into a daycare center and opened fire with a semiautomatic rifle. The scene has been secured by law enforcement, and you are in the process of triaging the injured children. The first child you assess, a 4-year-old boy, is unresponsive and apneic but has a pulse. After manually opening his airway, he remains apneic. You should:

A) consider him nonsalvageable and place a black tag on him.

B) assist his ventilations while closely monitoring his pulse rate.

C) categorize him as an immediate patient and continue triaging.

D) provide five rescue breaths and reassess his respiratory status.

Ans: D

Complexity: Moderate

Ahead: Triage

Subject: Incident Management and Mass-Casualty Incidents

Pages: 2349–2350

Feedback: Triage, pages 2349–2350

64. Under the SALT triage method, gray tags are assigned to patients who are:

A) able to walk, but have possible life-threatening injuries.

B) not expected to survive, given the available resources.

C) dead and should not be moved from the point of injury.

D) have medical problems that make them a higher priority.

Ans: B

Complexity: Easy

Ahead: Triage

Subject: Incident Management and Mass-Casualty Incidents

Page: 2350

Feedback: Triage, pages 2350

65. Which of the following interventions would MOST likely be performed while triaging patients with the SALT method?

A) Intravenous fluid boluses

B) Complex fracture stabilization

C) Needle chest decompression

D) Supplemental oxygen therapy

Ans: C

Complexity: Moderate

Ahead: Triage

Subject: Incident Management and Mass-Casualty Incidents

Page: 2350

Feedback: Triage, pages 2350