



FuNCMeS - Finger Lakes, North Country, CNYEMS, Midstate, Monroe Livingston, Susquehanna

1. What is the best way to document dyspnea on exertion?
 - a. Document whether the patient gets short of breath during exercise or not
 - b. Document the number of flights of stairs the patient can climb before they get short of breath
 - c. Document the number of stairs the patient can climb before they get short of breath
 - d. Document that the patient told you they had DOE

2. What does PMI stand for?
 - a. Prehospital Myocardial Infarction
 - b. Post Menopausal Infarct
 - c. Point of Maximum Intensity
 - d. Past Medical Information

3. What does the PMI represent?
 - a. Distal portion of anterior lungs
 - b. Location of aorta
 - c. Base of heart
 - d. Apex of heart

4. The distal portion of the anterior lungs end:
 - a. At the nipple line
 - b. At the xiphoid process
 - c. At the bottom of the floating ribs
 - d. At the bottom of the rib cage

5. Which medication is the best choice for CHF patients?
 - a. Lasix
 - b. Morphine
 - c. Nitroglycerin
 - d. Nitro and Lasix

6. CPAP pushes fluid from the lungs in order to help CHF patients breathe better.
 - a. True
 - b. False

7. Abdominal tenderness could be a sign of heart failure.
 - a. True
 - b. False



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8. What does Triple "C" stand for?
 - a. CHF, CPAP, CO₂
 - b. COPD, CHF, COPA
 - c. CO₂, CPAP, COPD
 - d. CPAP, CO₂, CRV

9. What would cause a shifting PMI?
 - a. The spleen & liver push on the heart and lungs
 - b. The heart shifts due to trauma
 - c. The heart has enlarged
 - d. The heart drops due to a frail chest

10. What is the most common cause of heart failure?
 - a. A heart attack/ sudden cardiac accident
 - b. Eating Easter Dinner
 - c. Prescription medications
 - d. Lack of exercise

11. What change might show in a ECG tracing if the patient is taking anti-depressants?
 - a. Wide QRS
 - b. Prolonged Q-T interval
 - c. Irregular rhythm
 - d. Inverted T wave

12. What are "Turtle Creek" findings?
 - a. A meeting in which physicians came together to create protocols
 - b. A meeting in which physicians came to consensus on the positive effects of Nitro usage in the Prehospital setting
 - c. A meeting in which physicians came to consensus on the positive effects of lasix usage in the Prehospital setting
 - d. A meeting in which physicians came together to form local REMACs

13. What is a common reaction to the usage of Morphine?
 - a. Dyspnea
 - b. Tachycardia
 - c. Sweating
 - d. Hives

14. What are some common causes of incorrect pulse oximetry readings?
 - a. Hypothermia, blue nail polish, Fluorescent lighting, acidosis
 - b. Hyperthermia, Red nail polish, incandescent lighting, alkalosis
 - c. Movement, small fingers, good perfusion, IV access
 - d. Shaking extremities, large fingers, poor perfusion, jugular access



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15. A sign that your patient is experiencing Paroxysmal Nocturnal Dyspnea is?
 - a. Patient is able to be in supine position comfortably
 - b. Patient has bright red skin tone
 - c. Patient is sleeping in a chair or on large amount of pillows
 - d. Patient is sleeping on side with lots of pillows between knees

16. Why would a patient with a pulse oximetry reading above 90% be hypoxic?
 - a. O₂ not getting to the cells
 - b. Alveoli have collapsed
 - c. Oxygen tank is empty
 - d. Pts respirations are shallow

17. What tool in pre-hospital medicine can help you identify a patient's acid load?
 - a. Pulse oximetry
 - b. 12-lead ECG
 - c. Blood Glucose Monitor
 - d. Capnography

18. What is the primary reason for using Capnography in the pre-hospital setting?
 - a. To monitor patients perfusion
 - b. A tool to use in conjunction with others to confirm correct ET placement
 - c. Monitor number of breaths per minute
 - d. Monitor heartbeat

19. An increased CO₂ level could mean
 - a. Hypoventilation
 - b. Alkalosis
 - c. Increased acidosis and hyperventilation
 - d. Hypoventilation and alkalosis

20. What is the normal range for a patients CO₂
 - a. 40-55 mm/hg
 - b. 35-45 mm/hg
 - c. 30-50 mm/hg
 - d. 20-35 mm/hg