




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

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 profusion, IV access
   d. Shaking extremities, large fingers, poor profusion, jugular access

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. O_2 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