

Patient Assessment

From Brady's First Responder (8th Edition)

83 Questions

1. Which question is important if your patient may be a candidate for surgery?

p. 183

- *A.) When did you last eat?
- B.) What is wrong?
- C.) What medications are you taking?
- D.) Has this happened before?

2. When obtaining a patient's history of an elderly patient, who can you rely upon to fill in the gaps?

p. 183

- A.) Bystanders
- B.) Medicine cabinet
- *C.) Family members
- D.) Personal physician

3. In which trauma patient would you perform a focused trauma assessment?

p. 190

- A.) Significant MOI
- B.) Serious injury
- *C.) No significant MOI
- D.) Is unresponsive

4. Which situation usually will mean bleeding is coming from a vein?

p. 174

- A.) Dark red blood that is clotting
- B.) Bright red blood that is trickling
- *C.) Dark red blood that is flowing
- D.) Bright red blood that is spurting

5. What should be used to determine the condition of the patient's skin?

p. 189

- A.) Top of the forearm
- B.) Underside of the forearm
- *C.) Back of the hand
- D.) Palm of the hand

6. Where on the patient is the carotid pulse taken?

p. 174

- A.) Groin
- B.) Wrist
- C.) Armpit
- *D.) Neck

7. Which type of breathing will be seen when the patient is in shock?

p. 188

- A.) Slowed
- B.) Wheezing
- *C.) Rapid, shallow
- D.) Deep, gasping

8. Where should skin color, temperature and moisture be assessed when possible?

p. 188

- A.) Leg
- B.) Stomach
- C.) Arm
- *D.) Forehead

9. Which step is most often not needed on a trauma patient when there is no significant MOI?

p. 178

- A.) Focused trauma assessment
- B.) Patient history
- *C.) Detailed physical exam
- D.) Vital signs

10. What may need to be done to check for suspected internal injuries in an unresponsive patient?

p. 192

- A.) Push with force over the area
- B.) Take the patient's blood pressure
- C.) Wake up the patient with medication
- *D.) Remove clothing over the area

11. When does your actual assessment of a patient begin?

p. 170

- A.) Assessing the patient's circulation
- *B.) Determining level of responsiveness
- C.) Assessing the patient's airway
- D.) Forming a general impression

12. What should be done to check for rib fractures in the trauma patient?

p. 194

- *A.) Gently apply pressure on the sides of the chest with your hands
- B.) Firmly apply pressure on the sides of the chest with your hands
- C.) Firmly apply pressure on the top of the chest with your hands
- D.) Gently apply pressure on the top of the chest with your hands

13. What should be done after baseline vitals have been obtained for a trauma patient with no significant mechanism of injury?

p. 159

- A.) Contact dispatch operator
- *B.) Detailed physical exam
- C.) Chief complaint exam
- D.) Scene size-up

14. Which is NOT always done for the focused history and exam of a trauma patient?

p. 161

- *A.) Patient history
- B.) Physical exam
- C.) Determine MOI
- D.) Take vital signs

15. Which pulse must be checked before initiating CPR?

p. 185

- A.) Radial
- B.) Brachial
- *C.) Carotid
- D.) Femoral

16. What is performed based on the patient's chief complaint?

p. 157

- A.) Ongoing assessment
- *B.) Focused history
- C.) Baseline vitals
- D.) Detailed physical exam

17. What is the normal range for the pulse of a child between 5 and 12 years of age?

p. 186

- *A.) 70 to 110 beats per minute
- B.) 60 to 100 beats per minute
- C.) 120 to 160 beats per minute
- D.) 60 to 105 beats per minute

18. Which is designed to trigger questions about what the patient was doing when the pain began?

p. 196

- A.) Provocation
- B.) Severity
- C.) Time
- *D.) Onset

19. What can the patient do to allow you to evaluate the movement of the facial muscles?

p. 192

- A.) Grimace
- B.) Pout
- *C.) Smile
- D.) Stick out his tongue

20. What should be considered in a patient who has suffered a fall?

p. 166

- *A.) Spine injury
- B.) Chest injury
- C.) Arm injury
- D.) Internal injury

21. Which question in the bystander interview will a family member be better able to answer?

p. 183-184

- A.) Did you see anything else?
- B.) What happened?
- *C.) Does the patient take any medications?
- D.) Did the patient complain of anything before this happened?

22. Which pulse should be checked when the patient is NOT breathing?

p. 174

- A.) Femoral
- *B.) Carotid
- C.) Brachial
- D.) Radial

23. Which is designed to determine what the pain feels like to the patient?

p. 197

- A.) Onset
- *B.) Quality
- C.) Severity
- D.) Region or radiate

24. What is the last step taken when performing patient assessment?

p. 163

- A.) Detailed physical exam
- B.) Ongoing assessments
- C.) Communication
- *D.) Documentation

25. Which of the following is NOT a usual place to find a MedicAlert medallion?

p. 184

- A.) Neck
- *B.) Waist
- C.) Ankle
- D.) Wrist

26. Who should be questioned when treating a patient with a severe mechanism of injury?

p. 160

- A.) Dispatch
- *B.) Family
- C.) Patient
- D.) Other victims

27. What amount of time should it take to perform the rapid trauma assessment as a maximum?

p. 191

- A.) Four minutes
- *B.) Two minutes
- C.) Three minutes
- D.) One minute

28. What is the primary goal of the scene size-up?

p. 163

- A.) Recon
- B.) Patient location
- C.) Resource allocation
- *D.) Safety

29. Where on the scale is the patient who is talking with you?

p. 170

- A.) Painful
- *B.) Alert
- C.) Unresponsive
- D.) Verbal

30. What should be looked for that would indicate the patient is in respiratory distress?

p. 193

- *A.) Jugular vein distention
- B.) Skull deformities
- C.) Facial bone fractures
- D.) Impaled objects in the chest

31. Which of the following conditions may pupils that react sluggishly indicate?

p. 193

- *A.) Shock
- B.) Drug usage
- C.) Brain injury
- D.) Cardiac arrest

32. Which aspect of the pulse is being described with normal, rapid or slow?

p. 185

- A.) Strength
- B.) Rhythm
- *C.) Rate
- D.) Steadiness

33. Almost what amount of a child's total blood volume can be lost before blood pressure is affected by blood loss?

p. 175-176

- A.) One-third
- *B.) One-half
- C.) Three-fourths
- D.) Two-thirds

34. Which is your concern when checking for serious bleeding?

p. 174

- *A.) Total amount of blood lost
- B.) Location of the injury
- C.) Total time the patient has been bleeding
- D.) Speed of the bleeding

35. Which is important to note about an elderly patient's pulse?

p. 174

- *A.) Rate
- B.) Rate or regularity
- C.) Rate and regularity
- D.) Regularity

36. Which type of breathing will be seen with an airway injury due to heat?

p. 188

- A.) Gurgling
- *B.) Crowing
- C.) Wheezing
- D.) Snoring

37. How may the skin present when the patient is suffering from a diabetic emergency/

p. 190

- A.) Hot, moist
- B.) Cool, moist
- *C.) Cold, dry
- D.) Hot, dry

38. Which will be seen with stroke or a brain injury?

p. 187

- A.) No pulse
- B.) Rapid, weak pulse
- *C.) Slow, strong pulse
- D.) Rapid, strong pulse

39. What is the first rule of emergency care?

p. 198

- *A.) Do no further harm
- B.) Conduct a head to toe examination
- C.) Take vital signs
- D.) Watch the patient's skin for color changes

40. What is the bottom of the range of normal respiration rate for an adult patient?

p. 185

- A.) 7 breaths per minute
- B.) 5 breaths per minute
- *C.) 8 breaths per minute
- D.) 6 breaths per minute

41. How many times the height of a pediatric patient would begin to constitute a significant mechanism of injury?

p. 178

- A.) Four to five times their height
- B.) One to two times their height
- C.) Three to four times their height
- *D.) Two to three times their height

42. What should be the maximum amount of time it takes for the nail bed to become pink in color after being pressed?

p. 175

- A.) 3 seconds
- B.) 4 seconds
- *C.) 2 seconds
- D.) 1 second

43. Which should be done when you are treating a medical patient who is unresponsive?

p. 177

- *A.) Rapid physical exam
- B.) Focused physical exam
- C.) Focused trauma assessment
- D.) Rapid trauma assessment

44. What should you do if you arrive and a person with a higher level of training is caring for the patient?

p. 167

- A.) Leave the scene
- B.) Take over the case
- *C.) Offer to assist
- D.) Crowd control

45. Why is the age of a child important?

p. 182

- A.) It may assist in contacting the parents
- B.) It may make them more at ease with you
- *C.) It may determine the type of care given
- D.) It may create a legal case

46. What is indicated when the radial pulse is absent, but a carotid pulse can be found?

p. 186

- A.) Heart attack
- B.) Stroke
- *C.) Shock
- D.) Diabetes

47. Which is considered a subjective finding?

p. 177

- A.) Patient history
- B.) Signs
- *C.) Symptoms
- D.) Vital signs

48. Which is the most useful distal pulse?

p. 195

- *A.) Posterior tibial pulse
- B.) Anterior tibial pulse
- C.) Anterior popliteal pulse
- D.) Posterior popliteal pulse

49. Where should you begin the rapid trauma assessment?

p. 192

- A.) Chest
- B.) Waist
- *C.) Head
- D.) Feet

50. What would blood or clear fluid in the ear be a strong indicator of?

p. 193

- A.) Cardiac injury
- B.) Ear injury
- *C.) Skull fracture
- D.) Brain injury

51. What is your best source of information when examining a medical patient?

p. 181

- A.) Family members
- B.) Bystanders
- C.) Medicine cabinet
- *D.) Alert patient

52. What should you say to the patient after you have identified yourself as an Emergency Medical Responder?

p. 167

- *A.) "May I help you?"
- B.) "Are you hurt?"
- C.) "Do you know where you are?"
- D.) "What happened?"

53. Which term should be used when asking the patient about medications they make be taking?

p. 183

- A.) Assisters
- B.) Recreational drugs
- C.) Drugs
- *D.) Medication

54. Which place on the scale is the patient who responds to a loud verbal stimulus from you?

p. 170

- A.) Alert
- B.) Unresponsive
- *C.) Verbal
- D.) Painful

55. What is the normal range of the pulse rate for an adult?

p. 185

- A.) 80 to 120 beats per minute
- B.) 70 to 110 beats per minute
- C.) 50 to 90 beats per minute
- *D.) 60 to 100 beats per minute

56. What is the upper acceptable limit of rate of respiration in a child between six and ten years old?

p. 188

- A.) 15 breaths per minute
- B.) 50 breaths per minute
- C.) 25 breaths per minute
- *D.) 30 breaths per minute

57. What is the first thing on the neck that should be checked during the rapid trauma assessment?

p. 193

- *A.) Cervical spine
- B.) Thoracic spine
- C.) Circle of Willis
- D.) Mandible

58. With which type of patient may you be too involved in necessary patient care to perform a detailed physical exam?

p. 198

- *A.) Unresponsive medical
- B.) Responsive trauma
- C.) Unresponsive trauma
- D.) Responsive medical

59. Which does the medical patient rarely require?

p. 179

- A.) Vital signs
- B.) Patient history
- *C.) Detailed physical exam
- D.) Focused physical exam

60. How often should seriously ill or injured patients be reassessed?

p. 199

- A.) Every fifteen minutes
- B.) Every twenty minutes
- C.) Every ten minutes
- *D.) Every five minutes

61. Which pulse should be taken in an infant or small child?

p. 175

- A.) Carotid
- *B.) Brachial
- C.) Femoral
- D.) Radial

62. What should be NOT used to take the radial pulse?

p. 186

- A.) Ring finger
- B.) Middle finger
- *C.) Thumb
- D.) Index finger

63. Which is an assessment of the patient's ABCs to detect and correct any immediate life-threatening problems?

p. 161

- *A.) Initial assessment
- B.) Detailed physical exam
- C.) Focused history
- D.) Rapid trauma assessment

64. What should be used when inspecting the abdomen for tenderness?

p. 194

- A.) Back side of the fingers
- B.) Knuckles of the hand
- C.) Heel of the hand
- *D.) Palm side of the fingers

65. What is the first thing the Emergency Medical Responder should do once at the scene?

p. 157

- A.) Focused history
- *B.) Scene size-up
- C.) Physical exam
- D.) Initial assessment

66. What is the first thing that you do when performing the initial assessment of the patient?

p. 168

- A.) Assess the patient's airway and breathing
- B.) Make a decision on the priority of the patient for transport
- *C.) Form general impression of the patient
- D.) Assess the patient's mental status

67. What is the last thing that needs to be determined during scene size-up at a trauma call?

p. 164

- A.) Number of patients
- B.) The mechanism of injury
- *C.) Additional resources needed
- D.) The scene's safety

68. How should you press the pelvis to check for injuries?

p. 194

- A.) In and up at the same time
- *B.) In and down at the same time
- C.) In and then down
- D.) In and then up

69. What will determining the MOI and NOI allow the Emergency Medical Responder to do?

p. 166

- A.) Initiate a medical evaluation
- B.) Diagnose the patient's illness
- *C.) Deal with upcoming complications
- D.) Determine the cause of the issue

70. Which of the following is NOT considered a significant mechanism of injury for an adult?

p. 178

- A.) Falls greater than 20 feet (6 m)
- B.) Altered mental status
- C.) Ejection from a vehicle
- *D.) Medium-speed vehicle collision

71. Which is a quick, less detailed head-to-toe assessment of the most critical patients?

p. 176

- A.) MOI assessment
- B.) Patient history
- C.) Focused assessment
- *D.) Rapid assessment

72. What should the Emergency Medical Responder be concerned with after his own safety is ensured?

p. 163

- A.) Safely identify and provide care for problems that are serious
- *B.) Safely detect and correct life-threatening problems in the patient
- C.) Safely identify and provide care for problems that may become serious
- D.) Safely monitor the patient to quickly detect any changes in his condition

73. What may be present in the elderly patient that can make assessing mental status very difficult?

p. 172

- A.) Diabetes
- *B.) Dementia
- C.) Stroke
- D.) Hearing loss

74. What color is the skin when the patient is experiencing liver abnormalities?

p. 189

- A.) Pink
- B.) Blue
- C.) Red
- *D.) Yellow

75. What does the "B" stand for in BP-DOC?

p. 191

- A.) Bones
- B.) Bumps
- C.) Burns
- *D.) Bleeding

76. What should be done while you watch the chest for movement when assessing breathing?

p. 172

- *A.) Listen to the breaths
- B.) Talk to the patient
- C.) Take the pulse
- D.) Count the breaths

77. What will the Emergency Medical Responder NOT try to accomplish with a patient?

p. 157

- A.) Make the patient comfortable
- B.) Care for signs
- C.) Care for symptoms
- *D.) Diagnose the problem

78. Which statement about conducting the focused physical exam is NOT correct?

p. 197

- A.) Do not put words in the patient's mouth
- *B.) Paraphrase the history when transferring
- C.) Use the patient's words during documentation
- D.) Provide the patient with choices

79. What should you do if you find a guard dog on site at the incident?

p. 165

- A.) Keep an eye on it while you work
- B.) Restrain the dog yourself
- *C.) Stay back until it is restrained
- D.) Ask the patient to come to you

80. What does the "L" in SAMPLE stand for?

p. 183

- A.) Limit of liability
- *B.) Last oral intake
- C.) Light in the eyes
- D.) Level of pain

81. What is the last step of the patient assessment?

p. 158

- A.) Scene size-up
- B.) Detailed physical exam
- *C.) Ongoing assessment
- D.) Baseline vital signs

82. How much time should determining breathing status take at a maximum?

p. 174

- A.) 15 seconds
- *B.) 10 seconds
- C.) 20 seconds
- D.) 25 seconds

83. What should be used to check for priapism in a male patient when it is not obvious?

p. 194

- A.) Elbow
- B.) Palm of your hand
- C.) Forearm
- *D.) Back of your hand