

Mesa County EMS Protocol Test

2016

1. Which of the following is incorrect?
 - a. Each EMS and Fire agency should have protocols in place for evaluation of personnel involved in fire suppression operations
 - b. Patients with a room air SaO₂ < 90% and respiratory distress should be considered for CPAP.
 - c. If unable to obtain an IV in a severely hypoglycemic patient, an IO may be considered.
 - d. Commercially made tourniquets are greatly preferred over improvised tourniquets.

2. Which of the following is incorrect?
 - a. Chest compression depth in infants is 1.5 inches.
 - b. Magnesium stabilizes the potassium pump in cardiac cells, correcting repolarization.
 - c. Termination of resuscitation should not be used in drowning patients without mortal wounds.
 - d. Critical burns are those > 10% BSA 3rd degree, or > 20% BSA 2nd degree.

3. Which of the following are correct?
 - a. Atrial fibrillation is common below 88 degrees body temperature and usually responds to cardioversion.
 - b. Eclampsia is treated with 2-4 mg of magnesium IVP.
 - c. A systolic blood pressure < 100 is a contraindication to CPAP.
 - d. An EMT should wait for ALS to arrive before obtaining a 12 lead ECG on a chest pain patient > 34 years old.

4. Which is the most appropriate treatment for a tachyarrhythmia?
 - a. Tachyarrhythmias without poor perfusion need no specific therapy
 - b. Regular, narrow complex tachyarrhythmias > 200 require immediate cardioversion
 - c. Stable, wide complex regular tachyarrhythmias are most likely SVT with aberrancy.
 - d. Adenosine may be considered for wide complex, irregular tachyarrhythmias.

5. Which of the following are incorrect?
 - a. 12 lead ECGs done in chest pain patients > 34 years old is a current benchmark in our system.
 - b. The intramuscular dose of Versed in Mesa County is 5 mg for behavioral emergencies.
 - c. Providers should not be the primary care providers NOR drivers of EMS vehicles after a 24-hour shift without a rest period.
 - d. Definition of a “patient” includes persons with no complaint who lack decision-making capacity.

6. Which of the following is incorrect of patients who are not transported by EMS?
 - a. Provider must call in to EDP for any patient who had medications administered during call.
 - b. Encouraging a patient to refuse care is a Level I protocol deviation.
 - c. Documenting name of hospital contacted for refusal is required.
 - d. Capacity, not competency is what EMS must determine in the field.

7. Which of the following is correct?
 - a. Use of the bougie intubating stylet is recommended for every intubation attempt.
 - b. A tourniquet can cause nerve and tissue damage only if applied incorrectly.
 - c. Trauma patients who have been drinking but are clinically sober must have a c-collar placed.
 - d. Events where no walk up care is provided for the public require 2-week notice to the Medical Director for approval.

8. Which of the following is correct regarding Due Process?
 - a. E-mail without “Quality Management” in the subject line will not be considered written notice.
 - b. Level III deviations by providers will be referred within 96 hours to the Medical Director for investigation and remediation.
 - c. Driving an emergency vehicle in a reckless manner is a Level II deviation.
 - d. Providers who disagree with the findings of an investigation may refuse to sign and agree to remediation and continue working in the system as a provider.

9. Which of the following is incorrect?
- Oxygen should be titrated per protocol if pulse oximetry is available.
 - Cyanosis of the hands and feet in a newborn does not require intervention.
 - A trauma patient who withdraws from painful stimuli gets 4 points on the motor portion of the GCS.
 - Patients with stroke symptoms < 6 hrs. old should be taken to the closest available facility.
10. Which of the following is incorrect?
- Termination of resuscitation protocols do not apply to women > 20 weeks pregnant.
 - Inability to walk with minimal assistance may be considered incapacitating intoxication.
 - EMT-Is may administer hospice patients medications by standing order.
 - 2nd degree heart block is a contraindication to Amiodarone.
11. Which of the following is correct?
- A written handoff note is required for Search and Rescue personnel when transferring care to EMS.
 - An infant < 1 year old who has a brief choking episode with decreased muscle tone but returns to baseline needs to be transported to ED for evaluation.
 - Patients with high altitude pulmonary edema should have oxygen titrated to 94% SaO₂.
 - Patients with known narcotic overdose and altered mental status do not need a BG checked.
12. Which of the following is incorrect?
- If a provider is the only EMT on scene at that level or higher, they must document 2 calculations prior to giving IM epinephrine for anaphylaxis.
 - Patients who have a "Cardiac Alert" called require two large bore IV's.
 - Dopamine administration does not cause increased myocardial oxygen demand.
 - Special needs children with central lines may only have those lines accessed if in extremis or with base contact.

13. Which of the following is correct?
- The St. Mary's recorded line is 243-5506
 - The HopeWest Hospice nurse line is 241-2222
 - Patients are never pronounced dead in the ambulance
 - As long as Taser probes are not above clavicles or in genitalia EMS may remove probes at scene.
14. Which of the following are incorrect?
- Patients with laryngeal trauma should be intubated early.
 - Caffeine can antagonize adenosine.
 - A person experiencing heat stroke may have moist skin.
 - STEMI alerts are for patients between 35 and 85 years old.
15. Which of the following are incorrect?
- After an airway obstruction has been removed, patient should be placed in the left, lateral recumbent position.
 - The HIPPA provisions in the Guidelines supersede your agency guidelines.
 - IM epinephrine is indicated in severe asthma.
 - Low EtCO₂ may be caused by a pulmonary embolism.
16. Which of the following is correct?
- Diuretics are a mainstay of treatment for CHF.
 - The online EDP is allowed to give permission to act outside of scope of the provider.
 - Providing care without a valid State certificate may be considered a criminal act.
 - Prehospital end organ dysfunction is sepsis is characterized by altered mental status, hypoxia, or renal failure.
17. Which of the following is true of pediatric care?
- Maximum dose of midazolam for pediatric seizures is 3 mg IM.
 - Pediatric patients are defined as 13 years old or younger.
 - All shocks for pediatric defibrillation are at 4 joules/kg.
 - Neonates with HR < 60 should have CPR started.

18. Which of the following is incorrect?
- Contraindications to Butyrophenones include < 8 years old and pregnancy.
 - Anaphylactic reactions rarely occur > 60 minutes after exposure to a bite or sting.
 - HACE is a consideration for altered mental status in a patient touring the Colorado National Monument.
 - Take downs should be performed preferentially by law enforcement.
19. Which of the following are correct?
- GSW to head treated as penetrating trauma for trauma arrest protocols.
 - STEMI ECGs should be transmitted if possible, but should not delay care to transmit.
 - Call the VA hospital for medication orders if transporting the patient there.
 - Intranasal fentanyl may be given by standing order to patients < 12 years old with abdominal pain.
20. Which of the following is incorrect?
- Inferior MI is a contraindication to NTG.
 - > 25% of snakebites are “dry bites”, without envenomation.
 - A simple pneumothorax is not an indication for needle thoracostomy.
 - Labor for delivery of a child can take anywhere from 5 minutes to 12 hours or more.

True/ False Questions

21. T / F - After penetrating trauma to the abdomen, any eviscerated organs should be pushed back into abdomen, or covered with moist saline gauze.
22. T / F - Adult trauma patients should have a 16 g IV or larger placed.
23. T / F - Upper abdominal pain in a patient > 50 years old should get a 12 lead ECG.
24. T / F - Sympathomimetics and Amiodarone do not mix well.

- 25. T / F - Quality assurance (QA) is the process for continuously monitoring and improving the system performance.
- 26. T / F - Direct admit patients should be evaluated by EDP prior to going to floor if not seen by a physician in last 12 hours.
- 27. T / F - Abuse of the “communication failure” orders protocols shall be treated as a Level II deviation.
- 28. T / F - CPAP can cause hypotension and pneumothorax, and this risk is more pronounced in COPD patients.
- 29. T / F - Age < 12 is a RELATIVE contraindication to percutaneous cricothyrotomy.
- 30. T / F - Variance from the protocols should always be done with the patient’s best interest in mind and backed by documented clinical reasoning and judgment.