



BASIC TRAUMA LIFE SUPPORT Advanced Pre-test

The purpose of this exam is to assess your knowledge of the concepts presented in the BTLS textbook. Please read each question carefully. Select the BEST answer from the alternatives and record your answer on the answer sheet provided. You have one (1) hour to complete this exam.

Please do not write on the exam.

- 1 . You are treating a patient who has just been severely burned on the face, neck, chest, and back. What is your first priority?
 - A. determine percent body surface burned
 - B. cover burns
 - C. assess respiratory status
 - D. treat shock

- 2 . You are evaluating a child who has been shot in the chest. The Initial Assessment reveals the patient is unresponsive with no palpable pulse and agonal respirations. What is the next step?
 - A. do not attempt to resuscitate the patient
 - B. begin CPR and complete a Detailed Exam
 - C. begin CPR and "load and go" immediately
 - D. complete the Primary Survey, then start CPR

- 3 . In the pediatric patient, what body structure is most commonly injured during a fall from a height?
 - A. extremities
 - B. abdomen
 - C. head
 - D. chest

- 4 . A 15-year-old boy is injured after a bomb he was assembling exploded. The patient is cool and diaphoretic with weak peripheral pulses. A piece of metal is protruding 6 inches (15 cm) from his abdomen. Which one of the following is the best field approach to managing the metal in his abdomen?
 - A. gently attempt to move it to see how firmly it is lodged
 - B. remove if it appears to be close to the surface
 - C. remove it regardless of how deep it is embedded
 - D. secure in place without moving it

- 5 . Which of the following statements regarding patients infected with the human immunodeficiency virus (HIV) is TRUE?
 - A. healthcare workers can usually determine which patients are infected with HIV by looking at them
 - B. HIV is commonly transmitted to healthcare workers via saliva
 - C. most patients with HIV are asymptomatic and appear normal
 - D. only HIV patients with symptoms of the disease can transmit the virus to others

6. A trauma patient develops severe difficulty breathing, distended neck veins, diminished breath sounds on the right, cyanosis, and deviation of the trachea to the left. Vital signs are BP, 60/40; respirations, 36/min; and pulse, 130/min. Which of the following is the most appropriate next step?
- A. intubate the patient
 - B. needle decompress right chest
 - C. perform a Detailed Exam
 - D. start an intravenous line
- 7 . Which of the following is contained in the retroperitoneal region of the abdomen?
- A. kidney
 - B. liver
 - C. stomach
 - D. uterus
- 8 . A 20-year-old man has his thumb amputated in a knife fight. How should the amputated part be handled?
- A. leave at the scene to aid the police in their investigation
 - B. place in a container filled with dry ice and transport to hospital
 - C. place in a cup of saline and transport to hospital
 - D. place in a plastic bag immersed in water with a few ice cubes and transport to hospital
- 9 . Which of the following is the preferred method of assisted ventilation?
- A. mouth to mouth
 - B. mouth to mask
 - C. non-rebreather mask
 - D. high pressure demand valve
- 10 . A car going 50 miles per hour (80 KM/H) strikes a brick wall. The unrestrained driver's chest strikes the steering wheel of the car. At the EXACT instant that the chest strikes the steering wheel, at what speed are the driver's chest organs moving?
- A. not moving at all
 - B. moving forward 25 mph (40 km/h)
 - C. moving forward 50 mph (80 km/h)
 - D. moving forward 100 mph (160 km/h) forwards (vehicle speed plus occupant speed)
11. How many liters of blood can a patient with closed (simple) fractures of both femurs potentially lose?
- A. one quarter liter
 - B. one half liter
 - C. one liter
 - D. two liters

- 12 . You are treating a 72-year-old male pedestrian stuck by a car. The patient is unresponsive with shallow respirations at 30 per minute. There is no gag reflex or radial pulses. The central pulses are present, weak and rapid. You note pelvic instability and rib fractures. Which of the following would be the best airway management for the patient?
- A. oxygen 4 L/min via nasal cannula because the patient may have COPD
 - B. oxygen 12-15 L/min via non-rebreather mask because the patient has spontaneous respirations
 - C. assist ventilations with a BVM only. Intubation is not indicated in elderly trauma because they may have dentures
 - D. assist ventilations with a BVM and basic airway adjuncts until the patient can be intubated
- 13 . A 20-year-old woman falls from a third story window. Initial assessment shows no obvious injuries. During transport her respirations increase to 36/min and her pulse rate increases to 148/min. What should you do next?
- A. perform Ongoing Exam
 - B. perform Focused Exam
 - C. perform Rapid Trauma Survey
 - D. repeat Detailed Exam
- 14 . A 25-year-old woman is involved in a motor vehicle collision. The following findings are noted on the initial assessment and Rapid Trauma Survey (Primary Survey): rapid/shallow respirations, no gag reflex, contusion to the anterior chest, weak and rapid pulse, delayed capillary refill, distended neck veins, midline trachea, and equal breath sounds. What is (are) the most appropriate next action(s)?
- A. provide spinal motion restriction, assist ventilations with BVM and basic airway adjuncts and transport
 - B. needle decompress the right chest
 - C. start two large-bore peripheral intravenous lines with NS/LR and run at "wide open" rate
 - D. intubate the patient then provide spinal motion restriction
- 15 . What site is first choice for intraosseous infusion?
- A. proximal tibia
 - B. distal humerus
 - C. proximal femur
 - D. distal fibula
- 16 . A pregnant patient is found sitting behind the wheel of her wrecked car. The car is on fire. How should she be extricated?
- A. rapid extrication
 - B. long backboard
 - C. short backboard, then long backboard
 - D. emergency rescue

- 17 . Maintaining spinal motion restriction throughout the assessment and preparation for transport is important because:
- A. There is a high percentage of malpractice suits in relation to neck injuries
 - B. Additional movement may aggravate any spinal cord or column injury
 - C. Most trauma patients will have a seizure at some point
 - D. It is helpful to have someone near the head to talk to the patient
- 18 . Which one of the following is typically associated with EARLY shock?
- A. ventricular dysrhythmias
 - B. hypotension
 - C. loss of 30% to 45% of blood volume
 - D. narrowed pulse pressure
- 19 . What is the distance in centimeters from the teeth to the vocal cords in the average adult?
- A. 10
 - B. 15
 - C. 20
 - D. 25
- 20 . Physiologic hyperventilation is defined as:
- A. a respiratory rate greater than 30/min
 - B. a tidal volume of greater than 800 cc
 - C. an oxygen saturation of greater than 96%
 - D. a carbon dioxide level of less than 35 mmHg
- 21 . What treatment is NOT indicated in the routine management of the patient with a head injury?
- A. administration of 100% oxygen
 - B. fluid resuscitation to a BP of 100-110 systolic if the patient is hypotensive
 - C. hyperventilation at rate of 20-24 per minute
 - D. stabilization of the cervical spine
- 22 . In the multiple trauma patient, when is the cervical spine first stabilized?
- A. after the airway has been managed
 - B. at the same time the airway is managed
 - C. immediately after the Primary Survey (A-B-C's)
 - D. upon determining that a head or neck injury is present
- 23 . Which of the following is the most common cause of preventable trauma death in the adult?
- A. airway obstruction
 - B. cardiac tamponade
 - C. hemorrhagic shock
 - D. spinal injury

- 24 . A 43-year-old man is found at the scene of a motor vehicle collision sitting up and asking repeatedly, "what happened?" even after being told. According to a witness, he was unresponsive for one minute immediately after the collision. The patient has a forehead contusion, and complains of a mild headache and nausea. Neurological exam is otherwise normal and vital signs are normal. Which one of the following explanations for his behavior is your greatest concern?
- A. alcohol or drug intoxication
 - B. cerebral concussion
 - C. neurogenic shock
 - D. psychological shock
- 25 . Which of the following techniques will yield the most success when applied to an intoxicated patient?
- A. ask open-ended questions when obtaining a history
 - B. identify yourself and orient the patient often
 - C. perform procedures first, and then explain to the patient what you did
 - D. use this opportunity to educate the patient about the dangers of substance abuse
- 26 . Which of the following would be appropriate treatment for shock in the pregnant trauma patient?
- A. ask the patient to roll on her left side
 - B. inflate the pneumatic antishock garment, leg and abdominal compartments
 - C. intravenous fluids, at least four liters wide open
 - D. transport the patient with the backboard tilted to the left
- 27 . A 4-year-old child is injured in a motor vehicle collision. The mother, who was reported to be intoxicated, fled the scene. The child has bilateral femur fractures. What should be done with the child?
- A. attempt to contact another relative to obtain permission to transport the child
 - B. treat the patient on scene and don't transport until the mother has been located and gives permission to transport her child
 - C. obtain a court order to transport the child
 - D. transport the child and document the reasons for that decision
- 28 . Which of the following trauma situations would be considered "load and go"?
- A. awake and alert patient who has blood coming out of one ear
 - B. a patient who had brief loss of consciousness but is now awake
 - C. patient with abdominal tenderness, clammy skin.
 - D. patient with tender, deformed lower leg
- 29 . Which of the following sets of vital signs is most compatible with a diagnosis of isolated head injury with increasing intracranial pressure?
- A. BP 80/60, pulse 50/min
 - B. BP 80/60, pulse 130/min
 - C. BP 170/80, pulse 50/min
 - D. BP 170/80, pulse 130/min

- 30 .** An automobile has crashed into a power pole. There are high voltage wires down across the car and patients trapped inside. What should you do next?
- A.** call the power company to turn off the electricity
 - B.** remove patients from car, but don't touch wires
 - C.** remove wires using hot stick and rubber gloves
 - D.** remove wires using hot stick, rubber gloves, and rubber boots
- 31 .** A 54-year-old man is involved in a motor vehicle collision. The steering wheel is bent. During the initial assessment you note his skin is pale and his radial pulses are irregular and there is no history of cardiac diseases. Which one of the following is most consistent with these findings?
- A.** cardiac contusion
 - B.** simple pneumothorax
 - C.** flail chest
 - D.** tension pneumothorax
- 32 .** Tension pneumothorax causes what kind of shock?
- A.** cardiogenic
 - B.** hypovolemic
 - C.** mechanical
 - D.** hypoxemic
- 33 .** Which of the following is a "load and go" situation?
- A.** chemical burns to abdomen
 - B.** gunshot wound to the foot
 - C.** open fracture of tibia
 - D.** flail chest



BTLS - Advanced Pre-Test Answer Key

Question Number	Answer	Topic	Military Objective	Advanced Objective
1	C	Burns	16.4 a – page 231	16.4a - page 226
2	C	Trauma Arrest	21.2 – page 298	21.2 - page 294
3	C	Pediatric Trauma	17.2 – page 249	17.2 - page 245
4	D	Abdominal Trauma	14.2 – page 201	14.2g - page 200
5	C	Blood/Fluid Precautions	22.1 - page 305	22.1 - page 301
6	B	Thoracic Trauma	6.5 – page 94	6.5 - page 90
7	A	Abdominal Trauma	13.1 – page 195	13.1 - page 191
8	D	Extremity Trauma	14.2c – page 204	14.2c - page 200
9	B	Airway	4.4 – page 69	4.4 - page 67
10	C	Scene Size-up	1.5 – page 7	1.5 - page 8
11	D	Extremity Trauma	14.3 – page 202	14.3 - page 199
12	D	Elderly	18.3 – page 271	18.3 - page 267
13	A	Initial Assessment	2.7 – page 35	2.7 - page 34
14	A	Thoracic Trauma	6.9 – page 98	6.9 - page 94
15	A	Pediatric Trauma	9.2 – page 127	9.2 - page 123
16	D	Spinal Trauma	11.5 – page 156	11.5 - page 152
17	B	Spinal Trauma	11.3 – page 156	11.3 - page 152
18	D	Shock	8.2 – page 114	8.2 - page 109
19	B	Airway	4.1 – page 61	4.1 - page 59
20	D	Airway	4.2 – page 67	4.2a - page 65
21	C	Head Trauma	10.6 – page 134	10.6 - page 130
22	B	Initial Assessment	2.1 – page 29	2.1 - page 28
23	C	Shock	8.4 – page 115	8.4 - page 110
24	B	Head Trauma	10.2 – page 136	10.2 - page 132
25	B	Substance Abuse	20.2 – page 289	20.2 - page 286
26	D	Trauma In Pregnancy	19.5 – page 281	19.5 - page 277
27	D	Pediatric Trauma	17.4 – page 248	17.4 - page 244
28	C	Initial Assessment	2.5 – page 34	2.5 - page 33
29	C	Head Trauma	10.5 – page 135	10.5 - page 130
30	A	Burns	16.4 – page 240	16.4c - page 236
31	A	Thoracic Trauma	6.10 – page 100	6.10 - page 96
32	C	Shock	8.4 – page 115	8.4 - page 111
33	D	Initial Assessment	2.5 – page 34	2.5 - page 33



BASIC TRAUMA LIFE SUPPORT

Pre-Test Answer Sheet

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NAME: _____

COURSE DATE & LOCATION: _____

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| 1. | a | b | c | d | 25. | a | b | c | d |
| 2. | a | b | c | d | 26. | a | b | c | d |
| 3. | a | b | c | d | 27. | a | b | c | d |
| 4. | a | b | c | d | 28. | a | b | c | d |
| 5. | a | b | c | d | 29. | a | b | c | d |
| 6. | a | b | c | d | 30. | a | b | c | d |
| 7. | a | b | c | d | 31. | a | b | c | d |
| 8. | a | b | c | d | 32. | a | b | c | d |
| 9. | a | b | c | d | 33. | a | b | c | d |
| 10. | a | b | c | d | | | | | |
| 11. | a | b | c | d | | | | | |
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| 20. | a | b | c | d | | | | | |
| 21. | a | b | c | d | | | | | |
| 22. | a | b | c | d | | | | | |
| 23. | a | b | c | d | | | | | |
| 24. | a | b | c | d | | | | | |