Professional Development Anxiety

- 1. You are assessing a patient who appears to be anxious and is hyperventilating. Differential diagnoses would include:
 - a. Pulmonary embolism
 - b. Post-ventilation apnea
 - c. Panic disorder
 - d. Either a or c are possible
- 2. The part of the brain that mediates a basic primal fear response, and which may be highly sensitive to novel stimuli in people with anxiety disorders, is the:
 - a. frontal cortex
 - b. amygdala
 - c. hippocampus
 - d. basal ganglia
- 3. Deficiencies of which neurotransmitter is thought to be particularly important and correlated to anxiety and depression?
 - a. Gamma aminobutyric acid, or GABA
 - b. Norepinephrine
 - c. Serotonin
 - d. Dopamine
- 4. Hyperventilation may result in:
 - a. Hypocapnia
 - b. Post-hyperventilation apnea
 - c. Death
 - d. Any of the above are possible
- 5. The carbon dioxide that is measured with ETCO₂ comes from:
 - a. Normal aerobic cellular respiration
 - b. Anaerobic cellular respiration
 - c. Neither of the above are true
- 6. An excessive state of arousal with associated apprehension which occurs when there is no threat may be considered to be:
 - a. A panic disorder
 - b. Hyperventilation
 - c. A healthy component of the human experience
 - d. An anxiety disorder

- 7. The relationship between gender and anxiety disorder is:
 - a. Men are slightly more likely to experience anxiety disorder than women
 - b. Women are twice as likely to experience anxiety disorder than men
 - c. There is no known relationship between anxiety disorder and gender
- 8. A patient is presenting with chest pain, palpitations, exertional dyspnea and fatigue. She may be experiencing:
 - a. An acute myocardial infarction
 - b. A panic attack
 - c. Mitral valve prolapse
 - d. Any of the above are possible
- 9. Which type of anxiety disorder is characterized by physical symptoms which include sleep disturbances, difficulty concentrating, and restlessness?
 - a. Generalized anxiety disorder
 - b. Agoraphobia
 - c. Social anxiety disorder
 - d. Panic disorder
- 10. A patient with sepsis may present with a low ETCO₂. This is because:
 - a. Patients with sepsis are provided with too much oxygen in the pre-hospital setting
 - b. Systemic perfusion is compromised, resulting in a reduction in carbon dioxide returning to the lungs
 - c. The patient with sepsis always experiences panic and hyperventilation
 - d. All of the above are true
- 11. Lethal cardiac dysrhythmias may be precipitated by:
 - a. Myocardial infarction
 - b. Medications that prolong the QT segment
 - c. Panic
 - d. Any of the above are possible
- 12. Helpful interventions when faced with a hyperventilating patient include:
 - a. Having them rebreathe into a paper bag which will help improve their blood carbon dioxide levels
 - b. Having them rebreathe into a non-rebreather mask with the oxygen turned off in order to trick them into thinking they are not hypoxic
 - c. Preparing to resuscitate
 - d. All of the above are correct

- 13. A 40 year old has sustained thermal burns to his right hand and a sprain or possible fracture to his right ankle. Pain is rated at 7/10 severity for the hand and 6/10 severity for the ankle. Treatment options include:
 - a. Acetaminophen 500 mg po and Ibuprofen 200 mg po
 - b. Ketorolac 10 15 mg IM/IV (Morphine 2 5 mg IV for ACPs)
 - c. Acetaminophen 1000mg po and Ketorolac 10 15 mg IM/IV
 - d. No medications as this is not an isolated extremity trauma
- 14. If a patient has end stage renal disease (ESRD), which medications are contraindicated?
 - a. NSAIDS such as Ibuprofen and Ketorolac
 - b. Acetaminophen
 - c. All analgesics are contraindicated with ESRD
 - d. No analgesics are contraindicated with ESRD
- 15. You are administering Ketorolac 10 15mg IM into the vastus lateralis of an average sized adult. Which needle do you attach to the syringe to administer the medication?
 - a. 1/2"
 - b. 5/8"
 - c. 1"
 - d. 1.5"
- 16. You are treating a 60 kg adult experiencing a generalized allergic reaction. He is experiencing symptoms to two body systems: the GI tract and integumentary system. Specifically, he has some pruritis on his abdomen, and he is nauseated. Vitals are HR 100, BP 108/70, RR 18, SP02 96%, ETCO₂ 40 mmHg, temp 36.1C. You treat with:
 - a. Epinephrine 0.5mg IM followed by diphenhydramine 50 mg IV/IM
 - b. Diphenhydramine 50 mg IV/IM
 - c. Diphenhydramine 50mg IV/IM and Dimenhydrinate 50mg IV/IM
 - d. None of the above are correct
- 17. A 4 year old has been vomiting for several days. His blood pressure is 72/40. He is:
 - a. Normotensive
 - b. Hypotensive
 - c. Hypertensive
 - d. Any of the above may be true

- 18. A 10 day old infant experiences cardiopulmonary arrest. The correct ratio of compression to ventilation is:
 - a. 15:2
 - b. 30:2
 - c. 3:1
 - d. Asynchronous once a properly sized OPA is placed
- 19. A 2 month old, who weighs 8 kg, is found to be in ventricular fibrillation. What is the energy setting for the first defibrillation
 - a. 4 joules, or round up to the next setting
 - b. 8 joules, or round up to the next setting
 - c. 16 joules or round up to the next setting
 - d. 32 joules or round up to the next setting
- 20. A patent IV is running at one drop every 2 seconds. The drop factor is 10gtts/ml. How many mls will be administered during the transport time of 30 minutes?
 - a. 15ml, or TKVO
 - b. 45 ml
 - c. 90 ml
 - d. 145 ml