MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

1) Any occurrence in which blood or body fluids contact nonintact skin or mucous membranes is considered a(n):
   A) infection  B) contamination  C) incident  D) exposure

2) Social, religious, or personal standards of right and wrong are called:
   A) ethics.  B) morals.  C) culture.  D) common laws.

3) An occupation in which the practitioners have a competence in a specialized body of knowledge or skills that has been recognized by some organization or agency is called a:
   A) profession.  B) career.  C) vocation.  D) trade.

4) State laws requiring the reporting of births, deaths, certain infectious diseases, and child and elder abuse and neglect may require the paramedic to breach the obligation to protect the patient’s:

5) Eating habits that contribute to good nutrition include which of the following?
   A) Eat a variety of foods from the major food groups daily
   B) Eating primarily high-protein foods
   C) Consuming no more than 10 percent of calories from carbohydrates
   D) Consuming 8 to 10 glasses of fruit juice per day

6) _______ is NOT a matter of civil law.
   A) Marriage  B) Negligence  C) Malpractice  D) Battery

7) A patient is involved in a car crash. When the paramedics arrive, he complains of neck pain but refuses to let the paramedics immobilize his spine. The paramedics explain the risks of refusing treatment and have the patient sign a release-from-liability form. The patient suffers minor neurological damage and later sues, charging negligence on the part of the paramedics. Which of the following best explains why the patient is not likely to be awarded damages?
   A) The paramedics did not have a duty to act.
   B) A monetary award cannot be assigned to the damages.
   C) There was contributory negligence on the part of the patient.
   D) There was no violation of the standard of care.
8) "Case" law and "judge-made" law are other names for _______ law.
   A) legislative  B) administrative  C) constitutional  D) common

9) Your patient is a competent adult who has given permission for treatment and transport. You have loaded the patient into the ambulance, but just before you are ready to leave the scene, she changes her mind and says she does not want to go to the hospital. Which of the following statements about this situation is true?
   A) She can now be treated using implied consent.
   B) You must obtain an emergency detention order to continue treatment.
   C) She cannot withdraw consent after having given it.
   D) She can withdraw consent, but you must explain her condition and the possible consequences of refusing treatment and transport.

10) Your patient is a 45-year-old male with a history of bipolar disorder. He is sitting at the kitchen table, conscious, alert, and oriented. He is pleasant and greets you as you walk in. The patient's wife called EMS because he has refused to take his lithium and is "driving her crazy with his hyperactive attitude." She insists that you transport him to the hospital. The patient admits to voluntary noncompliance with his lithium, stating "I didn't like the way it made me feel." He denies any suicidal thoughts and states that he has not felt "this good for a long time." He is curious about your job and wants to know how he could get into a paramedic class. He states that he's also thinking about going to law school but wants to finish his PhD first. The physical examination is unremarkable, and HR = 82, BP = 122/80, RR = 10, SaO2 = 99%. He says, "See, I told you I'm fine. I don't need to go to the hospital." Which of the following is the best course of action?
   A) Request police backup, restrain the patient, and transport to the ED for evaluation.
   B) Restrain the patient if necessary and transport.
   C) Explain to the patient that he has no choice. If he is unwilling to take his medication, you must take him to the hospital for evaluation.
   D) Explain to the wife that you cannot force the patient to go to the hospital and that if he refuses you must have him sign a refusal of service form and leave.

11) Which of these efferent fibers supply nerves to the involuntary cardiac muscle and smooth muscle of the viscera?
   A) Somatic motor  B) Somatic sensory
   C) Visceral sensory  D) Visceral motor

12) The portion of the brain responsible for many involuntary reactions such as temperature regulation, sleep, water balance, and emotions is the:
   A) cerebellum.  B) diencephalon.  C) cerebrum.  D) pons.

13) The cranial nerve that directs swallowing and tongue movement is:
   A) CN-VII.  B) CN-V.  C) CN-IX.  D) CN-XII.
14) The difference in concentration between solutions on opposite sides of a semipermeable membrane is called the:
   A) osmotic gradient.  
   B) logarithmic function.  
   C) hypotonic gradient.  
   D) oncotic function.

15) When a foreign substance invades the body, the inflammatory response develops_______ compared to the immune response.
   A) more specifically  
   B) for longer  
   C) more quickly  
   D) with fewer cell types

16) Which of the following is NOT one of the functions carried out during the inflammation response?
   A) Development of humoral immunity  
   B) Removal of unwanted substances  
   C) Promotion of healing  
   D) Walling off of the infected and inflamed area

17) Which of the following is NOT one of the body’s three chief lines of defense against infection and injury?
   A) Anatomic barriers  
   B) Inflammatory response  
   C) Immune response  
   D) Homeopathic secretions

18) Allergy, autoimmunity, and isoimmunity are types of:
   A) hyposensitivity.  
   B) insensitivity.  
   C) hypersensitivity.  
   D) polysensitivity.

19) Which of the following serves as a guideline for the expected weight of a 4- to 6-month-old child?
   A) Gained at least 5 pounds  
   B) Doubled his or her birth weight  
   C) Tripled his or her birth weight  
   D) Increased birth weight by 2 to 3 pounds

20) Infants and children learn by building on what they have already learned, a technique known as:
   A) bonding.  
   B) attachment.  
   C) scaffolding.  
   D) cognition.

21) Which of the following guidelines applies when interviewing an adolescent patient?
   A) Remember that, although they look grown, adolescents still want to be treated like children.  
   B) Conduct the interview in private.  
   C) Try to have a parent or peer stay with the patient.  
   D) Avoid asking questions about such sensitive topics as substance abuse and sexual activity.
22) By the age of 80, cardiac vessel elasticity has decreased by approximately _______ percent.
   A) 70  B) 60  C) 50  D) 40

23) Which of the following medications prevents coagulation by antagonizing the effects of vitamin K?
   A) Warfarin (Coumadin)  B) Aspirin  C) Heparin  D) Streptokinase (Streptase)

24) An important physiologic distinction between the sympathetic and parasympathetic divisions of the autonomic nervous system is:
   A) the sympathetic division does not use acetylcholine as a neurotransmitter.
   B) only the sympathetic division innervates the target organs or tissue directly.
   C) the parasympathetic nervous system contains no ganglionic fibers.
   D) the sympathetic ganglia are close to the spinal cord.

25) Which of the following best explains why many former prescription drugs have become over-the-counter (OTC) drugs?
   A) Many drug actions, once believed to be harmful, have been found to be relatively safe.
   B) Consumers are more aware and pharmaceutical marketing strategies have improved.
   C) Prescription-only medications are much more expensive to manufacture.
   D) Physicians have lobbied to reduce the number of prescriptions they must write.

26) In which class of the Vaughn–Williams Classification system of antidysrhythmic medications does verapamil belong?
   A) IA  B) II  C) IB  D) IV

27) Which of the following patients, assuming each is in critical need of an IV and that you have made multiple unsuccessful attempts to start an IV, would be a candidate for intraosseous infusion?
   A) An 81-year-old male  B) A 9-month-old male infant
   C) A 35-year-old female  D) All of the above

28) Which of the following catheters would allow the greatest volume of fluid to be delivered in a given period?
   A) 14 gauge, 1 1/4”  B) 16 gauge, 1 1/4”  C) 14 gauge, 2”  D) 16 gauge, 2”

29) By which of the following routes will medication have the quickest onset of action?
   A) Subcutaneous  B) Oral  C) Intramuscular  D) Intradermal

30) A liquid preparation that contains small particles of medication is known as a(n):
31) With which of the following conditions should you NOT attempt endotracheal intubation of the patient unless airway failure is imminent?  
   A) Respiratory syncytial virus (RSV) infections  
   B) Pulmonary embolism  
   C) COPD  
   D) Epiglottitis

32) A(n) _______ may be used to facilitate nasotracheal intubation.  
   A) Endotrol tube  
   B) uncuffed endotracheal tube  
   C) lighted stylette  
   D) malleable stylette

33) A peak flow meter measures:  
   A) inspiratory reserve volume.  
   B) tidal volume.  
   C) the maximum rate of airflow during forced expiration.  
   D) the force expiratory volume.

34) A portable suction device should generate a flow rate of _______ liters per minute when the tube is open.  
   A) 40  
   B) 50  
   C) 30  
   D) 20

35) Which of the following questions would provide the best quality and quantity of relevant information?  
   A) "What have you had to eat and drink today?"  
   B) "Have you had breakfast?"  
   C) "When was the last time you had anything to eat or drink?"  
   D) "What time do you normally eat breakfast?"

36) Echoing a patient's message to the patient using your own words is a technique known as:  
   A) reflection.  
   B) clarification.  
   C) explanation.  
   D) facilitation.

37) You have overheard a tech in the emergency department talking with a patient who has pancreatic cancer. The tech said, "Don't worry, everything will be alright." This is an example of:  
   A) distraction.  
   B) false reassurance.  
   C) lack of concern.  
   D) empathy.
38) Upon questioning your patient about whether he has been feeling any particular stress lately, he asks, "Do you think I'll have to wait very long in the emergency department?" This is most illustrative of:
   A) confrontation.                     B) distancing.
   C) using avoidance language.          D) overuse of professional jargon.

39) Which of the following questions is designed to find out about palliation?
   A) "What makes the pain feel better?"
   B) "How long have you been having this pain?"
   C) "What does the pain feel like?"
   D) "What were you doing when this pain began?"

40) What is an example of referred pain?
   A) Chest pain located under the sternum associated with a cardiac condition
   B) Abdominal pain related to pancreatitis
   C) Flank pain associated with a kidney stone
   D) Epigastric pain associated with a cardiac disorder

41) Which of the following body positions best communicates that you care about your patient's problems?
   A) Standing close to the patient so that you are above him
   B) Sitting beside the patient, addressing him at eye level
   C) Standing far from the patient so as to practice good hygiene
   D) Sitting at the patient's level across the room

42) A sign or symptom that causes a patient or bystander to request medical help is known as the
   A) primary problem.                     B) present illness.
   C) associated symptom.                  D) chief complaint.

43) A 48-year-old female patient is complaining of arm pain. You inspect and palpate her arms and find no abnormalities. Your next step in the focused physical exam would be to:
   A) immobilize the extremity.            B) evaluate the range of motion.
   C) test deep tendon reflexes.           D) test for bilateral strength.

44) The technique of ________ involves careful, noninvasive, informed observation.
   A) palpation                           B) auscultation
   C) inspection                          D) percussion
45) A person who has a visual acuity test result of 20/100 can see at ________ feet what a normal person sees at ________ feet.
   A) 20, 100  B) 100, 100  C) 100, 20  D) 10, 2

46) A light, popping, nonmusical sound heard upon auscultation of the lungs is best described as:
   A) wheezing.  B) rhonchi.  C) stridor.  D) crackles.

47) You are treating a 27-year-old asthmatic patient outside a bar when a growing crowd becomes hostile and unruly. To protect yourself, your crew, and your patient, you should:
   A) use your vehicle to disperse the crowd.
   B) move the patient into the bar.
   C) remove yourselves and the patient from the scene.
   D) exit the scene, leaving the patient behind.

48) Which of the following provides a clue as to the nature of an illness?
   A) Surface on which a patient fell  B) Medication bottles on the nightstand
   C) Caliber of ammunition  D) Length of a knife

49) A fast, systemic assessment designed to identify other life-threatening injuries after the initial assessment is the:
   A) rapid trauma assessment.  B) focused physical exam.
   C) detailed physical exam.  D) 1-minute exam.

50) Forming a general impression as part of your initial assessment helps you to:
   A) make a determination about stabilization of the cervical spine.
   B) administer proper medication.
   C) determine general clinical status and priority.
   D) determine baseline mental status.

51) Your patient is emotionally distraught with a long, complicated medical history and presents with multiple problems. You consider the physical, emotional, and psychological aspects of her condition. This type of data processing is called:
   A) reactive.  B) divergent.  C) reflective.  D) convergent.

52) With your field diagnosis in mind, you develop a treatment plan for your patient. This part of the critical decision-making process is called:
   A) applying principles.  B) evaluating the results.
   C) forming a concept.  D) interpreting the data.
53) Which of the following choices is the correct sequence of steps in critical decision making?

1. Interpreting the data
2. Evaluating results
3. Reflecting on the incident
4. Forming a concept
5. Applying the principles

A) 3, 4, 5, 1, 2  
B) 4, 1, 5, 2, 3  
C) 1, 2, 4, 5, 3  
D) 4, 3, 5, 2, 1

54) In critical decision making, addressing life threats as they are found is an example of:

A) reacting.  
B) re-evaluating.  
C) reviewing.  
D) reading.

55) When preparing a written report, you must remain aware that it is a(n) _______ and a part of your patient’s permanent medical record.

A) representation of the care you provided  
B) legal record  
C) document used for continuous quality improvement  
D) all of the above

56) Immediate repetition of medical orders received during radio communications is known as the:

A) verification protocol.  
B) standard format.  
C) echo procedure.  
D) response algorithm.

57) In most systems, 911 callers are first routed to the______, who then sends the call to______ .

A) PSAP, EMD  
B) EMS-C, PSAP  
C) EMD, PAAP  
D) PSAP, base station

58) Regulation of communications at the federal level includes all of the following EXCEPT:

A) establishing technical standards.  
B) licensing technical personnel.  
C) establishing terminology.  
D) allocating radio frequencies.

59) Careful, thorough documentation has the effect of_______ frivolous lawsuits.

A) encouraging  
B) discouraging  
C) bolstering  
D) enabling

60) Which of the following situations poses an even greater risk of liability to the paramedic than patient refusal of care?

A) Transporting a mentally incompetent individual against his wishes  
B) Having the patient who wants to refuse speak directly with a medical control physician  
C) Transporting minors, with or without their consent  
D) Denying transport to an apparently stable patient who insists he needs an ambulance
61) Which of the following statements is inappropriate for a prehospital care report?

A) The patient was intoxicated.
B) The patient's appearance indicated a lack of self-care.
C) The patient stated, "I feel fine."
D) The patient had trouble walking.

62) Which of the following patients does NOT require specialty center capabilities beyond that offered by a trauma center?

A) 25-year-old with amputation of three fingers
B) 4-year-old with a closed head injury
C) 22-year-old with bilateral open femur fractures
D) 67-year-old with partial and full thickness burns over 50 percent of the body

63) Which of the following mechanisms of injury does NOT call for immediate transport to a trauma center?

A) Motor vehicle crash with a 20-miles-per-hour impact
B) 30-foot fall from a tree
C) Pedestrian struck by a vehicle at 20 miles per hour
D) Motor vehicle crash requiring 1 hour for patient extrication

64) As a paramedic, your role in trauma care consists of all of the following EXCEPT:

A) providing surgical interventions to stop hemorrhage.
B) providing rapid transport to appropriate facilities.
C) promoting injury prevention.
D) providing care to seriously injured trauma patients.

65) Which of the following is the most important priority when caring for a patient with a shallow-water diving injury?

A) Removing the patient from water as soon as possible
B) Assessing the cervical spine for deformity
C) Maintaining cervical spine stabilization while opening the airway
D) Initiating rescue breathing once out of the pool

66) Which of the following factors proportionately affect the kinetic energy of a bullet fired from a gun?

A) Velocity and mass
B) Mass and friction
C) Friction and velocity
D) Friction and distance
67) Which of the following is true of the differences between adult and pediatric pedestrians when struck by a vehicle?

A) Adults tend to turn toward the vehicle.
B) Children tend to be thrown onto the hood of the vehicle.
C) Adults tend to be thrown under the vehicle.
D) Children tend to turn toward the vehicle.

68) When assessing a patient with a gunshot wound to the chest, which of the following findings would tell you the most about the amount of damage?

A) A stellate entrance wound
B) Diminished breath sounds unilaterally
C) Subcutaneous emphysema
D) A large exit wound

69) Which statement about ballistics is true?

A) When a bullet tumbles, it decreases the damage.
B) In penetrating trauma, the mass of a projectile is more significant than its velocity when determining kinetic energy.
C) Damage is less when the bullet does not exit the body.
D) When a bullet yaws, it increases the damage.

70) Which of the following increases a bullet’s profile?

A) Tumbling 180 degrees upon impact
B) The use of rifling in the barrel of the firearm
C) "Mushrooming” on impact
D) A and C

71) Managing a laceration with arterial bleeding most often requires:

A) PASG.
B) direct pressure.
C) a tourniquet.
D) cauterization.

72) In a previously healthy individual, which of the following types of shock may NOT result in the typical signs of cool, pale, moist skin; tachycardia; and narrowed pulse pressure?

A) Hemorrhagic
B) Neurogenic
C) Cardiogenic
D) Hypovolemic

73) Which of the following early signs of shock is easily missed?

A) Tachycardia
B) Decrease in blood pressure
C) Narrowing pulse pressure
D) Decrease in respiratory rate and volume

74) The first stage of wound healing is:

A) epithelialization.
B) inflammation.
C) neovascularization.
D) hemostasis.
75) Which of the following medications may help treat the patient with a crush injury who has sustained significant blood loss?

1. Potassium chloride
2. Sodium bicarbonate
3. Furosemide
4. Mannitol
5. 5% dextrose in 0.45% sodium chloride solution

A) 1, 2, 3 B) 2, 4, 5 C) 2, 3 D) 1, 3, 5

76) Which of the following is a potential complication of crush injury?

A) Sudden death
B) Calcifications in the vascular and nervous systems
C) Renal failure
D) All of the above

77) Paralysis of the muscles of respiration may occur when there is body contact with electrical currents as low as ________ mA.

A) 100 B) 50 C) 5 D) 20

78) The type of electricity supplied to homes is ________ current. Contact with this type of current may result in ________.

A) direct, muscle tetany B) indirect, rhabdomyolysis
C) direct, rhabdomyolysis D) alternating, muscle tetany

79) Alkalis generally cause ________ extensive burns because they result in ________ necrosis of the tissue.

A) less, coagulation B) less, liquefaction
C) more, coagulation D) more, liquefaction

80) One of the earliest indications that compartment syndrome is developing in an injured extremity is:

A) ecchymosis. B) tension in the limb.
C) loss of distal pulses. D) increased pain.

81) A dislocated knee is most likely to damage which of the following vascular structures?

A) Popliteal artery B) Femoral vein
C) Femoral artery D) Great saphenous vein

82) The ability of bone to maintain its structure begins to decrease around age ________.

A) 18 to 20 B) 70 C) 55 D) 40
83) Which of the following features of the cranium exacerbates the severity of intracranial trauma?

A) It is formed of dense, heavy bone.
B) It is rigid and unyielding.
C) It is relatively thin in the frontal region.
D) The sutures allow for separation of the bones.

84) Which of the following best describes the probable effect of using transtracheal jet insufflation through a needle cricothyrotomy to ventilate the patient with traumatic brain injury?

A) Increased cerebral edema due to carbon dioxide retention
B) Decreased cerebral edema due to effective oxygenation
C) Decreased cerebral edema due to "blowing off" carbon dioxide
D) Increased cerebral edema due to hypoxia

85) During the initial assessment of the patient with suspected traumatic brain injury, which of the following best describes the approach to assessing the patient's neurological functioning?

A) Assessing the patient for level of consciousness and orientation to person, place, and time
B) Assessing a Champion trauma scale score
C) Assessing a revised trauma score
D) The use of AVPU

86) A patient who was involved in a frontal motor vehicle crash in which his face struck the windshield is most likely to have which of the following types of injuries?

A) Cervical hyperextension
B) Axial distraction
C) Cervical hyperflexion
D) Axial loading

87) Which of the following is NOT included in the prehospital neurological examination of the patient with a potential spinal cord injury?

A) Finger abduction/adduction
B) Hip flexion
C) Wrist extension
D) Plantar flexion

88) Which of the following best describes a herniated intervertebral disk?

A) The nucleus pulposa extrudes through a tear in the fibrous layer of the disk, applying pressure to the spinal cord.
B) The disk thins and becomes brittle, allowing the spine to become unstable.
C) The disk slips laterally, tearing the spinal ligaments at the site.
D) None of the above.
89) The finding of jugular venous distension in a patient with thoracic trauma would be most consistent with which of the following?
   A) Simple pneumothorax    B) Tension pneumothorax
   C) Hemothorax             D) Open pneumothorax

90) Your patient is a 31-year-old female with blunt trauma to the chest. You noted a contusion over the sternum and, during transport, the patient develops ventricular tachycardia. She has a radial pulse and a blood pressure 110/60. Which of the following is the best course of action?
   A) Perform a precordial thump.
   B) Defibrillate at 200 joules, repeating at 300 joules and 360 joules as needed.
   C) Administer an antidysrhythmic such as amiodarone or lidocaine.
   D) Cardiovert at 100 joules, repeating at 200 joules and 300 joules as needed.

91) Your patient is an 80-year-old male who was the unrestrained driver of a vehicle without airbags that was involved in a frontal collision with a parked car. Your assessment reveals that he is dyspneic, tachypneic, and tachycardic. He is awake but unable to respond to questions. There are no obvious signs of injury to the head or neck. The patient has paradoxical movement of the sternum with breathing, along with crepitus and subcutaneous air noted on palpation. Chest excursion is limited, and the patient has cyanosis of his lips, ears, and nail beds. Which of the following is MOST needed in this patient?
   A) Application of bulky dressings over the site of paradoxical motion
   B) Being placed in a prone position to stabilize the chest wall
   C) Intubation and positive pressure ventilation
   D) Infusion of isotonic crystalloid solution using two large-bore IVs

92) Which of the following best describes shear injuries to the abdominal organs?
   A) Sudden decompression of solid or hollow organs
   B) Impact of solid organs with the abdominal wall in rapid deceleration
   C) Tearing of the organ in which the organ is fixed at its point of attachment but free to move otherwise
   D) Sudden compression of gas-containing hollow organs resulting in their rupture

93) The liver is injured ______ percent of the time with penetrating abdominal trauma?
   A) 40    B) 25    C) 75    D) 10

94) The injury in which abdominal organs protrude through a large, deep laceration of the abdominal wall is best described as:
   A) herniation.    B) a gutting injury.
   C) evisceration.  D) disimpaction.
Which of the following statements comparing asthma and emphysema is TRUE?

A) Both diseases are common in children.
B) Asthma is characterized by reversible airway obstruction, emphysema by irreversible airway obstruction.
C) The late stages of an asthma attack are characterized by bronchospasm, the late stages of an exacerbation of emphysema by inflammation of the bronchioles.
D) Both diseases are primarily caused by cigarette smoking.

Which of the following statements comparing pulse oximetry and end-tidal CO₂ detection is TRUE?

A) Pulse oximetry gives the care provider feedback on the effectiveness of oxygenation, while capnography provides feedback on the effectiveness of ventilation.
B) Pulse oximetry gives the care provider feedback on the effectiveness of ventilation, while capnography provides feedback on the effectiveness of oxygenation.
C) Pulse oximeters and capnometers can both give erroneously high readings in cases of carbon monoxide poisoning.
D) Both pulse oximetry and colormetric CO₂ detection provide numerical feedback.

To which of the following medications does the late phase of an asthma attack best respond?

A) Albuterol
B) Corticosteroids
C) Ipratropium
D) Epinephrine 1:1000

Which of the following best characterizes successful defibrillation?

A) Uniform mass depolarization of myocardial cells, repolarization, intrinsic pacemaker function resumes
B) Stimulation of the SA node, impulse travels through cardiac conduction system, uniform contraction of the ventricles
C) Retrograde depolarization of the myocardial conduction system from the Purkinje fibers to the SA node, repolarization of the pacemaker cells of the SA node
D) Application of a stimulus strong enough to overcome the absolute refractory period, restoration of spontaneous electrical excitation

The lead to the left of the sternum at the fourth intercostal space is:

A) V1.
B) MCL.
C) V2.
D) AVF.

The pericardial sac normally holds about ______ mL of ______.

A) 100 mL, blood
B) 1 to 2, pericardial fluid
C) 25, pericardial fluid
D) 25, blood
101) Your patient is a 45-year-old female type I diabetic with a history of a nonhealing foot ulcer. On examination, you find that she lacks sensation in her foot. This is most likely due to:
   A) Brown-Sequard syndrome.  
   B) claudication.  
   C) Raynaud's disease.  
   D) peripheral neuropathy.

102) Your patient states that he often experiences a painful cramping and “freezing up” of his hands and feet while handwriting or walking. This best describes:
   A) palsy.  
   B) dystonia.  
   C) torticollis.  
   D) myoclonus.

103) Your patient is a 32-year-old male who is alert and oriented, complaining of severe pain. He states he has a history of disk herniation. Today, he experienced an acute onset of lower back pain while lifting a heavy box. Physical examination reveals a palpable muscle spasm and pain with palpation at the level of L4 and L5. He is lying on his right side and states that the pain is too severe for him to move. HR = 132, BP = 152/104, RR = 20, SaO₂ = 99%. Which of the following would NOT be appropriate?
   A) Right lateral recumbent position on a long backboard for transport  
   B) Valium IV  
   C) Cervical collar and supine immobilization on a long backboard  
   D) Morphine sulfate IV

104) Which of the following pathologies would necessitate the careful preparation of an IV site due to skin fragility and increased risk of infection?
   A) Graves' disease  
   B) Addison's disease  
   C) Cushing's syndrome  
   D) Myxedema

105) A 34-year-old female, conscious, alert, and oriented, is complaining of a 3-week history of increased appetite, weight loss, weakness, insomnia, and poor heat tolerance. Her husband states that over the same period she also has frequently been agitated and prone to mood swings. Based on these signs and symptoms, which of the following best describes the additional findings you could expect?
   A) Enlarged tongue and cool, puffy skin  
   B) Hyperpigmentation of the skin and hirsutism  
   C) Exophthalmos and goiter  
   D) Heart block and hypotension

106) It is noon, and you are presented with an unconscious 56-year-old male lying on his couch. His daughter states that he is a type I diabetic and confirms that he ate breakfast and took his insulin this morning. She also states that he has had a "chest cold" and a low-grade fever for the past 3 days. His heart rate is 118, BP is 112/84, and respirations are 12 and regular. Blood glucose is 24 mg/dL. What is the most likely cause of this patient's hypoglycemia?
   A) The patient's excessive breakfast  
   B) Too little insulin  
   C) The patient's recent illness  
   D) A myocardial infarction
107) Which of the following statements about vasopressor use in anaphylaxis treatment is TRUE?
   A) An epinephrine infusion can correct the peripheral vasodilation that occurs secondary to SRS-A release by basophils and mast cells.
   B) A dopamine infusion can correct the peripheral vasodilation that occurs secondary to histamine release by basophils and mast cells.
   C) A norepinephrine infusion encourages a net movement of plasma from the intravascular space to the vascular space, raising blood pressure.
   D) A norepinephrine infusion can correct the peripheral vasodilation that occurs secondary to SRS-A release by basophils and mast cells.

108) An allergen's most common route of entry in an anaphylactic reaction is:
   A) ingestion.  
   B) inhalation.  
   C) absorption.  
   D) injection.

109) Your patient is a 25-year-old female who is complaining of pain in the midline of the lower abdomen. Which of the following questions helps LEAST when determining the etiology of the patient's pain?
   A) "Are you having any pain with urination?"
   B) "Are you experiencing pain anywhere other than your lower abdomen?"
   C) "When was your last menstrual period?"
   D) "Do you feel nauseated?"

110) Your patient, who has a history of cholecystitis, is experiencing pain in her right shoulder. She is most likely experiencing _______ pain.
   A) cardiac  
   B) referred  
   C) visceral  
   D) traumatic

111) Kidney stones affect about _______ people in the United States every year.
   A) 1,000,000  
   B) 500,000  
   C) 250,000  
   D) 25,000

112) A patient is experiencing restlessness, agitation, dysuria, and flank pain radiating into the groin. Appropriate treatment for this patient would consist of all the following EXCEPT:
   A) morphine.  
   B) phenergan.  
   C) IV fluid therapy.  
   D) lasix IV.

113) Which of the following is NOT a warning sign of alcohol abuse?
   A) Tremulousness  
   B) Prone to drink alone and secretly  
   C) Green tongue syndrome  
   D) Pale and diaphoretic face and palms
114) Which of the following is appropriate for a patient with symptomatic cyanide inhalation?

A) Atropine, amyl nitrite, and sodium thiosulfate
B) Atropine, praloxidime, and sodium thiosulfate
C) Amyl nitrite, sodium nitrate, and sodium thiosulfate
D) Diphenhydramine, amyl nitrate, sodium nitrate, and sodium thiosulfate

115) Patients with lymphoma are most likely to experience abnormal function of:


116) Which of the following statements about sickle cell disease is FALSE?

A) Sickle hemoglobin has a flawed chemical structure that results in erythrocyte deformity when oxygen levels are low.
B) Patients with chronic sickle cell disease have chronic hemolytic anemia.
C) Sickled red blood cells have longer life spans than normal red blood cells.
D) Splenomegaly is a common problem of sickle cell disease.

117) Which of the following could be expected to occur in a patient who has suffered a fresh-water drowning or near-drowning?

A) Hemolysis secondary to the presence of hypotonic water in the alveoli
B) Pulmonary edema secondary to increased hydrostatic pressure
C) Pulmonary edema secondary to increased osmosis
D) Atelectasis secondary to surfactant washout and destruction

118) The type of heat stroke that commonly presents in those with chronic illnesses and is characterized by hot, red, dry skin is:

A) classic.  B) chronic.  C) moribund.  D) exertional.

119) Which of the following is NOT an important principle in public health practice?

A) Educating the public about the random nature of infectious diseases
B) Determining the potential community impact of a disease
C) Determining modes of disease transmission
D) Recognizing disease patterns

120) Which of the following is NOT considered a risk factor for the progression of liver fibrosis to cirrhosis in hepatitis C infection?

A) Gender
B) Age older than 50 at the time of initial infection
C) Alcohol consumption greater than 50g per day
D) Hypertension
121) Which of the following is NOT likely to negatively impact the emotional or behavioral status of a patient with a psychiatric disorder?
   A) Stressful situations
   B) Taking recreational drugs and using alcohol
   C) Following the same daily routine
   D) Medical illness

122) Your patient is a 76-year-old male who is alert and oriented. The patient's neighbor called EMS because of general concern about the patient's health. He states that the patient hasn't been himself since his wife's death 6 months ago. He hasn't taken care of his usually meticulous lawn and house, and he has lost a lot of weight. The patient says he misses his wife but doesn't need medical care. Which of the following is the BEST course of action?
   A) Tell the patient you cannot leave him and that if he refuses to go to the hospital, you will have to call the police and have him placed under immediate detention for psychiatric treatment.
   B) Explain to the neighbor that the patient is behaving as expected and the only treatment is time.
   C) Have the patient sign a refusal of service form, but let him know he can call you back if he changes his mind.
   D) Explain to the patient that it is common for people in his situation to feel depressed but that there is treatment available. Also state that you would like to help him by transporting him to the hospital.

123) Your patient is a 36-year-old female who is alert and complaining of abdominal pain. She states that she is having her period and that this pain is "much different than the cramps I usually get." She describes the pain as an ache throughout her pelvis and lower abdomen. She says that this has occurred the past three menstrual cycles and that she has experienced dyspareunia and spotting over the same period. She is G2P2 and has no other significant gynecological history. Physical examination reveals pain with palpation over her entire abdomen; her skin is warm and dry. HR = 84, BP = 124/76, RR = 12, SaO2 = 99%. Which of the following is the most likely diagnosis for this patient?
   A) Endometriosis
   B) Polycystic ovary disease
   C) Uterine fibroids
   D) Primary dysmenorrhea

124) Complications associated with endometritis include all of the following EXCEPT:
   A) sepsis.
   B) death.
   C) infertility.
   D) fibroid tumors.

125) Your patient is 34 weeks pregnant, complaining of a headache and nausea. Her blood pressure is 150/92, and she tells you that her doctor told her she has protein in her urine. You note that her face, hands, and feet are edematous. Which of the following is most likely?
   A) Hyperemesis gravidum
   B) Gestational diabetes
   C) Eclampsia
   D) Preeclampsia
126) You are assisting in the delivery of an infant after an extremely prolonged labor. During delivery of the head, you note the presence of thick, green meconium in the patient’s airway. What should your next course of action be?

A) Suction the nose and mouth with a bulb syringe, complete the delivery, then suction the hypopharynx and trachea using an endotracheal tube and a meconium aspirator.
B) Do not suction the nose and mouth, complete the delivery, then suction the hypopharynx and trachea using an endotracheal tube and a meconium aspirator.
C) Do not suction the nose and mouth, complete the delivery, then suction the oropharynx using an endotracheal tube and a meconium aspirator.
D) Immediately suction the hypopharynx and trachea before completing the delivery using an endotracheal tube and a meconium aspirator.

127) You are assessing a newborn who presents with respiratory distress, heart sounds auscultated over the right chest, and a small, flat abdomen. Which of the following is appropriate in his care?

A) Ventilation via an automatic transport ventilator
B) Elevation of the head and chest, endotracheal intubation
C) Needle chest decompression
D) Insertion of a gastric tube

128) You have arrived at a residence just as a 30-year-old woman has delivered her first baby 6 weeks before her due date. Assessment of the newborn reveals central cyanosis, apnea, and absence of the brachial pulse. Which of the following should you do next?

A) Begin chest compressions at a rate of 120 per minute and reassess after 1 minute.
B) Tell the mother that her newborn is not viable, wrap him in a receiving blanket, and allow her to hold the baby.
C) Suction the newborn’s mouth and nose with a bulb syringe and stimulate him by drying him off with a towel from the OB kit.
D) Intubate the trachea and instill 0.04 mg of epinephrine diluted in saline into the tube.

129) When selecting an appropriately sized blood pressure cuff for a pediatric patient, which of the following guidelines will help you select the right cuff for your patient?

A) The width of the cuff should equal the length of the little finger.
B) The width of the cuff should equal the distance from the antecubital fossa to the axilla.
C) The width of the cuff should equal the circumference of the arm.
D) The width of the cuff should be 2/3 the circumference of the arm.
Your patient is a 7-year-old female with a history of bee-sting anaphylaxis. She was stung by a bee and nearly immediately began having difficulty swallowing and breathing. Her father administered her prescribed 0.15 mg epinephrine autoinjector without result. On your arrival, the patient responds to painful stimuli; has labored, rapid, wheezing respirations; a heart rate of 60 and a blood pressure of 92/60. Her father tells you that she weighs 48 pounds. Which of the following is the best sequence of treatment for this patient?

A) Begin a nebulized albuterol treatment with supplemental oxygen, administer 0.20 mg of 1:1000 epinephrine subcutaneously, start an IV of normal saline and infuse a 400 ml bolus, and administer 25 mg of diphenhydramine, IM.

B) Assist respirations with a bag-valve-mask and supplemental oxygen, initiate a large bore IV of normal saline, and administer 0.20 mg of 1:10,000 epinephrine intravenously, followed by 25 mg of diphenhydramine, IV.

C) Assist respirations with a bag-valve-mask and supplemental oxygen, administer 25 mg of diphenhydramine subcutaneously, start an IV of normal saline, and administer 0.25 mg of 1:1000 epinephrine intravenously.

D) Hyperventilate for 1 to 2 minutes, intubate the trachea, administer 0.40 mg of 1:10,000 epinephrine endotracheally, start an IV of normal saline, and administer 25 mg of diphenhydramine, IV.

Which of the following is true of incontinence in the elderly?

A) Urinary incontinence only affects female patients.

B) It is normal in patients over age 80.

C) It only occurs in patients with impaired cognitive functioning.

D) Patients may not realize that their incontinence may be treatable.

Which of the following terms refers to the act of negatively stereotyping elderly people?

A) Gerontodiscrimination

B) Ageism

C) Misgerontegy

D) Antigeriatism

You arrive on scene of an alleged rape. The 25-year-old female has been physically assaulted quite badly and has numerous deep lacerations and fractured extremities. You must remove her clothes for a trauma assessment. What is the best procedure for handling her clothing?

A) You understand that you and the victim’s clothing are now part of the “chain of evidence.” You remove her clothes as carefully as possible and, if one is available, place them in a paper bag. You keep the the clothes in your sight until the bag is turned over to law enforcement.

B) It is not your problem; you are not the police.

C) Cut around the injury sites and leave the rest of the clothes on her.

D) You cut her clothes off as you have been taught to in order to expose injuries. You put her clothes in a pile on the floor of the ambulance, like you do with the clothes of all trauma patients. You then drop the clothes off at the ER. The police will pick them up.
134) Which factor makes abuse statistics inaccurate?
A) Poor data-collection techniques
B) Noncompliance with reporting by law enforcement
C) Overreporting
D) Underreporting

135) Multiple sclerosis is classified as which of the following types of disorders?
A) Autoimmune
B) Acquired immunodeficiency
C) Autoinflammatory
D) Autotoxic

136) What is enucleation?
A) Corrective laser surgery
B) Loss of vision in one eye due to trauma
C) Removal and replacement of the patient's eyeball with a prosthetic eye
D) Removal of the eyeball

137) What has been the primary reason for the increase of home health care?
A) Medicare rule changes
B) Cost containment
C) Decrease in the number of available hospital beds
D) Increased number of healthcare professionals

138) You are sent to a home for a cardiac arrest. You find a patient who has been under hospice care for end-stage AIDS in cardiac arrest. The nurse tells you that some family members who were present when the patient died did not feel that not providing care was a prudent thing to do, so they called 911. She apologizes. A relative interrupts and says she doesn't care what the nurse says, she wants you to help her brother. What should your next action(s) be?
A) Start CPR and ACLS. Do a round of drugs, then call for orders for field termination of resuscitative efforts.
B) Provide all the interventions you can. You have no standing not to.
C) Have the nurse provide the DNR. If it is in order, explain to the sister that you are bound to adhere to the orders.
D) Tell the sister that it is best to let him go.

139) Which of the following best describes the appropriate timing of the rapid trauma assessment?
A) After the focused history and assessment of the stable trauma patient
B) Upon making initial contact with the unresponsive trauma patient
C) After establishing airway, ventilation, and hemorrhage control in a critical trauma patient
D) When considering accepting a refusal of treatment and transport from a stable trauma patient
140) Which of the following statements best describes the criticality of the paramedic’s ability to proficiently perform patient assessment and formulate field diagnoses?

A) It allows the paramedic to select the proper standing order for the patient’s care.
B) It eliminates the need for a nursing history and assessment when the patient reaches the emergency department.
C) It allows the paramedic to formulate a management plan based on the patient’s needs.
D) It eliminates the need for consultation with medical control.

141) Which of the following is the most common route of exposure to hazardous materials?

A) Absorption  B) Ingestion  C) Injection  D) Inhalation

142) You are a paramedic assigned to a nontransporting ALS unit for a rural fire department. You are the only paramedic on duty in the county. You are dispatched and first on the scene of a crash along a two-lane road. A van carrying a family was turning in the family’s driveway when it was struck from behind by a tractor-trailer. There were 9 people in the van and 2 in the tractor. A neighbor, who is also a nurse in the local ER, lives next door and is on scene doing CPR on one of the children. What would be a prudent action for you to take and why?

A) Tell the nurse to stop CPR immediately and assist you with the rest of the victims.
B) Quickly sizeup and begin triage using START. Try to use the nurse by simply explaining that you need her to assist you with those patients who can benefit from her knowledge and training and that you will be unable to sustain CPR on one patient.
C) Use the START system and tag the patients. Do not commit to CPR and request appropriate resources.
D) Do a scene sizeup. Quickly triage the rest of the victims. Then, assist the nurse with CPR. Intubate the child and give her a BVM, then continue with START. If no other patients need ALS, go back and perform further interventions.

143) Which of the following is NOT a biotoxin?

A) HD  
B) Botulinum toxin  
C) SEB  
D) Ricin

144) The risk of contamination from nuclear fallout after a nuclear explosion is greatest during which of the following periods?

A) 72 hours after the blast  
B) The first month after the blast  
C) Between 1 and 48 hours after the blast  
D) The first hour after the blast
145) Which of the following best describes why paramedics should participate in continuing-education programs?

A) The fees paid to attend continuing-education classes are used to support national professional associations.
B) Continuing education is a mandatory rule imposed by the certifying agency.
C) It is a good way to network and be recognized for promotion.
D) It is a professional obligation to the occupation and one’s patients.

146) A city EMS service provides public education about the need for an outdoor residential pool to be surrounded by a 3-foot-high fence. This is an example of ______ prevention activity.

A) primary     B) tertiary     C) secondary     D) medullary

147) Paramedic Davis and his partner, EMT-I Smothers, are eating lunch in the hospital cafeteria and discussing the call they ran last week on well-known news anchor Adam Best. They discuss in detail the embarrassing circumstances in which Mr. Best found himself after using poor judgment to choose his social companion for the evening. Unbeknownst to Davis and Smothers, Mr. Best’s co-anchor, Trisha Thomas, who wants Best fired, is sitting directly behind them, hanging on their every word. She tells the station manager what she heard. In response, the station manager fires Best and airs a story on the incident. Which of the following best describes the actions of Davis and Smothers?

A) Breach of confidentiality     B) Slander
C) Libel     D) Negligence

148) Which of the following is true in the event that off-duty paramedics provide advanced life-support interventions at an emergency scene?

A) They may be charged with practicing medicine without a license.
B) They have nothing to worry about as long as they have valid paramedic licenses or certificates in the states in which they provided care.
C) They will be granted immunity from negligence as long as they follow the standard of care.
D) They are protected by Good Samaritan laws in all states.

149) As part of the manubrium, the sternal angle (angle of Louis) serves as a reference point to help the EMT-P quickly identify the:

A) 3rd rib.     B) 2nd rib.
C) 3rd intercostal space.     D) 2nd intercostal space.

150) At which of the following locations does the first rib articulate individually with the first thoracic vertebra?

A) Transverse process and intervertebral disk
B) Spinous process only
C) Transverse process and spinous process
D) Transverse process and vertebral body
151) Which type of shock is characterized by hypotension, tachycardia, and laryngeal edema?
   A) Anaphylactic  B) Eurogenic
   C) Cardiogenic  D) None of the above

152) Which of the following best describes an antibody?
   A) A substance produced by B lymphocytes that binds with an antigen
   B) A substance secreted by apocrine glands
   C) A cell that engulfs and destroys invading pathogens
   D) A toxin released when cells die

153) The normal birth weight of a full term newborn infant is _______ kg.
   A) 3.0–3.5  B) 2.0–2.5  C) 1.0–1.5  D) 4.0–4.5

154) Which of the following best describes authoritarian parents?
   A) Expectant that the partner parents will discipline the children
   B) Tolerant, with an accepting view of their children's behavior
   C) Responsive to the needs and wishes of their children
   D) Demanding and desires instant obedience from their children

155) Which of the following is an acceptable antidote for a specific poisoning?
   A) Amyl nitrite, sodium nitrite, and sodium thiosulfate for organophosphate exposure
   B) Sodium bicarbonate for muriatic acid ingestion
   C) Acetylcysteine (Mucomyst) for acetaminophen overdose
   D) Naloxone for diazepam overdose

156) Administration of medication into the dorsal gluteal muscle must be injected into which quadrant of the muscle?
   A) Upper, inner  B) Lower, outer  C) Lower, inner  D) Upper, outer

157) The reading obtained by the use of a pulse oximeter reflects the:
   A) amount of oxygen dissolved in the blood.
   B) amount of saturated hemoglobin per deciliter of blood.
   C) ratio of unsaturated hemoglobin to saturated hemoglobin.
   D) partial pressure of oxygen in capillary blood.
158) Which of the following responses illustrates the feedback technique of facilitation?
   A) "You said you weren’t having any pain, but I see you trying not to use your right arm."
   B) "I see. What happened after that?"
   C) "I'm not sure I understand. What you mean when you say, "It's a hard pain?"
   D) "So, you got up to go to the bathroom and tripped over something in the hallway?"

159) When you repeat your patient's words to encourage him to provide more details, you are using the technique called:

160) The condition of the patient's fingernails can give insight into the patient's:
   A) level of distress.    B) psychiatric history.
   C) motor activity.    D) self-care and hygiene.

161) Which of the following is NOT part of the medical history?
   A) Medical history    B) Type of medical coverage
   C) Current health status    D) History of the present illness

162) While people think under pressure, hormones can diminish their:
   A) ability to concentrate.    B) natural reflexes.
   C) sensory acuity.    D) muscle strength.

163) In addition to gathering the incident location, the dispatcher should also obtain the _______ from the caller.
   A) medical history    B) patient's insurance information
   C) caller's past 911 use    D) call-back number

164) When using direct patient statements, you should:
   A) identify the quote with quotation marks.
   B) subjectively interpret and record them.
   C) have your partner or another witness initial the statement.
   D) have the patient initial his agreement with them, if his condition permits.

165) The purpose of determining the mechanism of injury and the index of suspicion for the trauma patient at the same time is to allow you to:
   A) document a complete scene size-up.    B) decide whether to transport the patient.
   C) identify comorbid factors.    D) anticipate your patient’s injuries.
166) Which of the following statements about the impact of motorcycle helmet usage is true?

A) Helmet use moderately decreases the incidence of spinal trauma.
B) Helmet use substantially decreases the incidence of spinal trauma.
C) Helmet use neither increases nor decreases the incidence of spinal trauma.
D) Helmet use moderately increases the incidence of spinal trauma.

167) As the mass of an object increases, which of the following occurs?

A) The amount of energy decreases.
B) The amount of energy increases.
C) The maximum speed it can attain increases.
D) The maximum speed it can attain decreases.

168) Which of the following mechanisms is responsible for accumulating lactic acid in shock?

A) Anaerobic metabolism
B) Gluconeogenesis
C) The citric acid cycle
D) Hemostasis

169) Which of the following may result from an improperly applied tourniquet?

A) Increased blood loss
B) Neurovascular damage at the site of the tourniquet
C) Permanent tissue damage distal to the site of the tourniquet
D) All of the above

170) Which of the following has contributed most significantly to the decline in U.S. burn mortality?

A) Paramedic involvement in public education
B) Improved building codes and construction and sprinkler and smoke detector use
C) Visits to elementary schools by firefighters
D) Public service announcements on radio, television, and billboards

171) Which of the following types of fractures occurs in pediatric age groups but not in adults?

A) Oblique
B) Impacted
C) Greenstick
D) Transverse

172) For the patient with suspected traumatic brain injury, the ideal positioning of the patient for transport is:

A) in a left lateral recumbent position on the backboard.
B) on a long backboard with the foot of the backboard in a 15-degree Trendelenburg position.
C) on a long backboard with the head of the backboard elevated 30 degrees.
D) on a long backboard with the patient’s feet elevated on pillows to achieve a 15-degree angle.
173) Which of the following statements most accurately compares or contrasts nerve-root injuries and spinal cord injuries?

A) Nerve-root injuries affect one dermatome; spinal cord injuries affect multiple dermatomes.
B) A nerve-root injury affects multiple dermatomes unilaterally; a spinal cord injury affects multiple dermatomes bilaterally.
C) A nerve-root injury affects one dermatome unilaterally; a spinal cord injury affects one dermatome bilaterally.
D) Nerve-root injuries affect multiple dermatomes; spinal cord injuries affect one dermatome.

174) Your patient was the unrestrained driver of a motor vehicle without airbags. The vehicle struck a large utility pole at about 45 miles per hour. Your patient has a contusion over his chest and upper abdomen consistent with the shape of the steering wheel. You should suspect which of the following types of injury in this patient?

A) Compression  
B) Deceleration  
C) Compression and acceleration  
D) Compression and deceleration

175) Your patient is a 30-year-old pregnant woman at 36 weeks gestation. She was injured in a fall from a horse and is complaining of painful contractions. Her abdomen is tender to palpation over the uterus, and the uterus becomes firm with contractions, but she denies vaginal bleeding. The patient is anxious, but her skin is warm and dry. Her blood pressure is 112/70, her heart rate is 92, and her respirations are 24. Which of the following statements best describes this situation?

A) The mechanism and patient complaints are suspicious for placental abruption. The mother’s condition is not life threatening, but fetal demise has most likely already occurred.
B) The mechanism and patient complaints are suspicious for placental abruption. Both the mother and the fetus are in jeopardy.
C) The mechanism and patient complaints are consistent with uterine rupture. Both the mother and fetus are in jeopardy.
D) The mechanism and patient complaints are consistent with placenta previa. The mother is stable, but the fetus is in jeopardy.

176) A 19-year-old female with difficulty breathing produces a peak expiratory flow rate of 425, indicating:

A) severe bronchoconstriction.  
B) normal ventilatory state.  
C) moderate bronchoconstriction.  
D) mild bronchoconstriction.

177) On a properly calibrated ECG machine, 1 mV is equivalent to a height of _______ boxes.

A) 4 large  
B) 5 small  
C) 10 small  
D) 1 large
178) Your patient is a 23-year-old male in an alcohol treatment facility who is having tonic-clonic motor activity that began 15 minutes ago. The patient has no history of seizures, and one of the counselors cautions you that this patient would probably do anything to get out of rehab and that he might be faking the seizure. Which of the following findings is LEAST reliable when determining the authenticity of the patient’s seizure?

A) Unresponsiveness to painful stimuli  
B) Dropping his hand above his face to see if he avoids letting it hit him  
C) Incontinence of urine and tongue biting  
D) A current history of sudden alcohol abstinence

179) A patient has a fever of 105°F, irritability, delirium, tachycardia, vomiting, and hypotension. This patient is most likely experiencing problems associated with:

A) thyrotoxic crisis.  
B) myxedema.  
C) hypothyroidism.  
D) Graves’ disease.

180) Immunity resulting from a direct attack on a foreign substance by specialized cells in the immune system is:

A) humoral immunity.  
B) primary immunity.  
C) cellular immunity.  
D) secondary response.

181) All of the following contribute to the pathogenesis of diverticulosis EXCEPT:

A) low-fiber diet.  
B) increased colon pressure.  
C) decreased colon motility.  
D) herniation of mucosa and submucosa through the teniae coli.

182) All of the following may be associated with urinary tract infection EXCEPT:

A) prostatitis.  
B) cholecystitis.  
C) cystitis.  
D) pyleonephritis.

183) You are presented with a 42-year-old male who is unconscious with snoring respirations after a heroin overdose. HR = 64, BP = 98/50, RR = 6 and shallow, SaO₂ = 91%. Which of the following is the most appropriate initial treatment?

A) BLS airway management and ventilation with supplemental oxygen  
B) Intubate, ventilate with supplemental oxygen  
C) IV access, administer naloxone  
D) IV access, administer a 250cc fluid bolus
184) Of the following, which would be the most likely dysfunction experienced by a patient with multiple myeloma?
A) Decreased T cell production
B) Increased T cell production
C) Decreased parathyroid hormone secretion
D) Increased parathyroid hormone secretion

185) Hypothermia in a near-drowning victim can have protective effects on organs and tissues because:
A) hypothermia slows metabolism, decreasing oxygen requirements.
B) hypothermia results in hypoxia, which decreases metabolic demand.
C) the resulting hypoxia has an analgesic effect on tissues and organs, especially the brain.
D) the resulting hypoxia shunts blood to the vital organs, decreasing oxygen demand.

186) The alternate pathway that reacts quickly to foreign bodies and uses antibodies and inflammation to combat pathogens is the ________ system.
A) cell-mediated
B) lymphatic
C) humoral
D) complement

187) Which of the following is NOT an organic cause of a behavioral emergency?
A) Dementia
B) Alcoholic encephalopathy
C) Hypoglycemia
D) Tumor

188) Your patient is a 33-year-old female who is alert and in significant distress. She describes a 1-week history of diffuse lower left quadrant abdominal pain that became acutely worse and specific 1/2 hour ago. She has not had her menstrual period in 4 months. HR = 120, BP = 72/48, RR = 20. Which of the following would be LEAST likely to have contributed to her current condition?
A) Tubal ligation
B) Previous pelvic inflammatory disease
C) Oral contraceptive use
D) Previous ectopic pregnancy

189) A newborn presents with a heart rate of 80 that does not respond to 30 seconds of BVM ventilation with 100% O₂. The next step would be to:
A) ventilate with 100% O₂ for 30 seconds more and reassess.
B) perform endotracheal intubation and administer epinephrine.
C) initiate chest compressions and reassess.
D) continue ventilations, cannulate the umbilical vein, and administer epinephrine.

190) Which of the following parameters is the most important indicator of neonatal distress?
A) Decreased heart rate
B) Decreased respiratory rate
C) Increased heart rate
D) Increased respiratory rate
191) Your patient is a 4-year-old child whom you have intubated due to respiratory failure secondary to asthma. During reassessment of the child, which of the following would indicate increased end-organ perfusion?

1. Pupillary dilation
2. Increased muscle tone
3. Heart rate of 112
4. Warm skin

A) 3 and 4  
B) 2 and 4  
C) 1, 2, and 4  
D) 2, 3, and 4

192) Which of the following medications does NOT cause constipation in the elderly?

A) Diphenhydramine  
B) Docusate sodium  
C) Furosemide  
D) Codeine

193) What is a primary reason abused partners do not seek assistance?

A) They were abused as children and think it is part of life.  
B) They lack the knowledge and financial means to seek assistance.  
C) They really don’t mind the situations they are in.  
D) They have tried and no one would help.

194) Which of the following is true of individuals with cerebral palsy?

A) They can perform some activities of daily living but have difficulty communicating.  
B) They are not functional and require full-time care.  
C) They always depend on wheelchairs because they cannot walk.  
D) A full one-third of CP patients are intelligent and some are highly gifted.

195) Which of the following could be used for vascular access if necessary?

A) A PICC line  
B) Any VAD  
C) A PEG tube  
D) An arterial line

196) Your patient is a 28-year-old female who has taken an overdose of tricyclic antidepressants. She is drowsy but responds to verbal stimuli, has a heart rate of 116, a respiratory rate of 12, and a blood pressure of 92/64. Which of the following actions is indicated?

A) 50 ml of 50% dextrose, IV push  
B) Administration of 6 mg adenosine, rapid IV bolus  
C) Administration of 50 mEq of sodium bicarbonate, IV bolus  
D) 60 gm of activated charcoal, PO

197) Which of the following should be considered when determining the location of the command post in the incident management system?

A) Access to restrooms  
B) Easy media access for press conferences  
C) Being inside the operational area  
D) None of the above
198) Which of the following is the most effective way for EMS personnel to protect themselves against exposure to biological agents of terrorism?

A) Disinfect the ambulance  
B) Wear gloves  
C) Get immunized  
D) Use a HEPA mask

199) The most common situations involving allocation of scarce resources that paramedics will usually face are those involving:

A) triage in mass casualty incidents.  
B) deciding whether to terminate resuscitative efforts.  
C) administering expensive medications.  
D) transporting patients to high-quality versus low-quality hospitals.

200) Which of the following laws is designed to allow the paramedic who has potentially been exposed to an infectious disease access to the medical records of the patient to whom the paramedic was exposed?

A) EMTALA  
B) Good Samaritan Laws  
C) HIPAA  
D) The Ryan White CARE Act

201) The cartilage separating the right and left nasal cavities is called the:

A) inferior turbinates.  
B) larynx.  
C) epiglottis.  
D) septum.

202) Which of the following best describes the body's reaction to exposure to or invasion by antigens?

A) Immune response  
B) Adaptation  
C) Anaphylaxis  
D) Negative feedback

203) Psychological readiness for toilet training generally occurs at age _______ months.

A) 12 to 15  
B) 15 to 24  
C) 18 to 30  
D) 24 to 36

204) At the cellular level, the treatment of seizures is generally accomplished by:

A) inhibiting the influx of potassium ions into the neural cells.  
B) enhancing the influx of sodium and calcium ions into the neural cells.  
C) enhancing the influx of potassium ions into the neural cells.  
D) inhibiting the influx of sodium and calcium ions into the neural cells.

205) You are to give Mr. Jenkins 50 mg of Toradol (ketorolac) IM for musculoskeletal pain. Ketorolac is supplied 60 mg/2 ml. What volume of drug (in mL) is to be drawn up for administration?

A) 1.7  
B) 17  
C) 0.17  
D) 170
Without adequate airway maintenance and ventilation, the patient can succumb to brain injury or death in how many minutes?

A) 6-10  B) 4-6  C) 10-12  D) 2-4

______ may result in a failure of communication between a paramedic and a patient.

A) Prejudice  B) Lack of privacy  C) External distractions  D) All of the above

When you detect an inconsistency in a patient's story, which technique should you use to help keep the patient from hiding his feelings?

A) Interpretation  B) Clarification  C) Facilitation  D) Confrontation

Lesions found on the lips may indicate:

A) skin cancer.  B) dehydration.  C) anemia.  D) allergic reaction.

The sound of gurgling associated with breathing usually indicates:

A) complete foreign body airway obstruction.  B) fluid in the upper airway.  C) fluid in the alveoli.  D) bronchospasm.

Why is it NOT possible for paramedics to use a wholly algorithm-based system of patient care?

A) Algorithms address only first-line procedures.  B) Patients frequently present with complaints that do not fit a specific algorithm.  C) Procedures contained in algorithms are not specific to most problems.  D) Paramedics function under the license of a medical director.

______ communications are condensed and require a decoder to translate.

A) Telephone  B) Cellular  C) Analog  D) Digital

The paramedic's general impression is documented in the:

A) diagnosis section.  B) subjective narrative.  C) assessment/management plan.  D) objective narrative.

A trauma center that is committed to special emergency department training and has a degree of surgical capability but that usually stabilizes and transfers seriously injured patients is a Level ________ trauma center.

A) I  B) II  C) III  D) IV
215) Axial loading is most likely to occur in which type of impact?
   A) Frontal with a down-and-under pathway
   B) Lateral on the side of the vehicle opposite the occupant
   C) Frontal with an up-and-over pathway
   D) Rear with the head rest too low

216) The pathway of injury left in the wake of a penetrating mechanism of injury is called the:
   A) profile.
   B) trajectory.
   C) cone of injury.
   D) cavity.

217) A fracture of the femur may result in a hematoma that contains enough blood to make it a Stage
   _______ hemorrhage.
   A) 2
   B) 3
   C) 4
   D) 1

218) For most open, soft-tissue wounds managed by the paramedic in the prehospital setting, which of
      the following are desirable characteristics of the dressing and bandaging materials?
      1. Occlusive
      2. Nonocclusive
      3. Adherent
      4. Nonadherent
      5. Absorbent
      6. Nonabsorbent
      7. Sterile
      8. Nonsterile
      9. Wet
      10. Dry
      A) 1, 3, 6, 8, 10
      B) 1, 3, 6, 7, 9
      C) 2, 4, 5, 7, 10
      D) 2, 4, 5, 7, 9

219) Which of the following represents the modified body surface area percentages in the "Rule of
     Nines" for pediatric patients?
     A) Posterior chest is 7 percent.
     B) Lower extremities are 13.5 percent each.
     C) External genitalia is 1 percent.
     D) Upper extremities are 13.5 percent each.

220) A sprain is an injury best defined as which of the following?
    A) Complete displacement of bone ends from their normal position, causing noticeable deformity
    B) Muscle fibers that are stretched and torn
    C) A violent muscle spasm that tears away a small piece of bone
    D) Partial or complete tearing of the ligaments of the joint capsule
221) Which of the following about the use of prehospital fluid resuscitation in the patient with a traumatic brain injury is true?

A) Do not administer fluids unless the patient’s blood pressure drops below 60 mmHg, because the administration of fluids leads to increased cerebral edema.
B) Administer fluids as needed to maintain a systolic blood pressure above 90 mmHg.
C) The use of hypertonic fluids is indicated to maintain vascular volume while reducing tissue edema.
D) Administer fluids aggressively regardless of the patient’s blood pressure.

222) Which of the following best explains the presentation and prognosis of partial spinal cord transection injuries?

A) The areas of the spinal cord damaged by partial transection can regenerate as long as some cord tissue remains intact at the level of injury.
B) The spinal cord functions as an “all or none” conduit for nerve impulses. Therefore, whether cord transection is partial or complete has no practical significance.
C) Partial cord transections result in only temporary loss of function, because the intact portions of the spinal cord will take over the functions of the injured areas.
D) Different functions of the spinal tracts are located in anatomically different areas of the spinal cord, resulting in specific patterns of dysfunction depending on the location and mechanism of injury.

223) Which of the following statements about the mortality of thoracic injuries is true?

A) Most of these deaths are secondary to injury to the respiratory tree.
B) Most of these deaths are secondary to injury to the brain and great vessels.
C) Most of these deaths are primarily due to external thoracic trauma, such as ecchymosis or lacerations.
D) Most of these deaths are secondary to injury to the heart and great vessels.

224) Your patient is an 18-year-old male who was slashed across the abdomen with a machete. He has a mass of omentum and small bowel protruding from the wound. Which of the following is your primary concern with this patient?

A) Immediately covering the wound with an occlusive dressing, using your gloved hand if nothing else is available
B) Covering the wound with a sterile, saline-moistened dressing covered by an occlusive dressing
C) Ensuring an open airway by anticipating vomiting, providing oxygen, keeping the patient warm, and monitoring for and treating shock
D) Irrigating the exposed organs with sterile saline to remove debris, and gently tucking them back into the opening to keep them warm and moist and to prevent further contamination
225) Your patient is a 52-year-old male complaining of shortness of breath. He is sitting up, alert, and oriented and appears to be in moderate respiratory distress. He states that he "always gets a chest cold in the winter" and describes a 3-week history of productive cough and increasing shortness of breath. Physical examination reveals coarse rhonchi to the upper lobes bilaterally, air movement is decreased in the bases, and his skin is cool with peripheral cyanosis. You note that he is overweight and describes an 18-pack-a-year smoking history. Based on these clinical exam findings, you might also expect to find:

A) JVD, pedal edema, hepatic congestion.
B) barrel chest and increased anterior/posterior chest diameter.
C) pulmonary edema and hypotension.
D) pursed-lipped breathing.

226) Which of the following arteries supplies blood to the left ventricle, interventricular septum, and portions of the cardiac conduction system?

A) marginal  B) left coronary  C) posterior descending  D) right coronary

227) You are caring for a 62-year-old female patient experiencing a sudden onset of unilateral facial drooping and confusion. Other findings that could be expected in this patient include all of the following EXCEPT:

A) hemiparesis.  B) diplopia.  C) dysarthria.  D) polyphagia.

228) A type I diabetic female patient presents with deep, rapid respirations and a fruity odor on her breath. Administration of which of the following medications would best help correct the underlying physiologic disturbance?

A) D50  B) 100% oxygen  C) Insulin  D) Glucagon

229) Your patient is a 48-year-old female who is supine on the floor of a neighborhood health clinic. She became unconscious after receiving 250 mg of IM doxycycline. Clinic staff reports that the patient "broke out in hives and lost consciousness." The patient is being ventilated by bag-valve-mask and has an IV of normal saline running wide open. A nurse practitioner on the scene informs you that before your arrival he administered 2 doses of 0.5 mg of epinephrine IV, 50 mg of diphenhydramine IV, and 1 L of NS. Present vital signs are n HR = 138; BP = 84/60; RR = 12/min, assisted with BVM; SaO2 = 94%. Of the following, which is the most appropriate continued treatment of this patient?

A) Initiate a second IV of NS wide open, intubate and hyperventilate, transport
B) Intubate, administration of Dopamine IV infusion, rapid transport
C) Continue administering fluids and transport to the nearest facility
D) Intubate, Solu-Medrol IV, 250 cc NS fluid challenge, transport
230) Your patient is a 24-year-old male complaining of a 1-week history of abdominal pain. He describes the pain as in the upper-right quadrant, dull, and reproducible with movement and palpation. He also describes a decreased appetite, weight loss, and clay-colored stool over the same period. Of the following, which is the most likely cause of his clinical condition?
   A) Acute hepatitis   B) Colitis   C) Pancreatitis   D) Cholecystitis

231) Your 42-year-old patient with no medical history presents with a 2-day history of distended abdomen; edema to the face, hands, and feet; and oliguria. Of the following, which is the most likely clinical diagnosis?
   A) Chronic renal failure   B) Acute renal failure
   C) Congestive heart failure   D) Shock

232) Which of the following medication combinations is beneficial for a phenobarbital overdose?
   A) Lasix and sodium bicarbonate   B) Narcan and sodium bicarbonate
   C) Haloperidol and furosemide   D) Flumazenil and naloxone

233) A male will express hemophilia if he acquires _______ chromosome(s).
   A) one defective Y   B) two defective X
   C) one defective X   D) defective X and Y

234) Your patient is a 64-year-old female who is wet and shivering after a fall through the ice on a shallow pond. She is alert, but her speech is slightly slurred. The patient has no signs of injury, but her skin is very cold and wet. Vital signs: HR = 118, BP = 116/78, RR = 16. After removing the patient's wet clothing, placing her supine, using warm packs, and using blankets to prevent further heat loss, which of the following is the appropriate temperature (in degrees F) for IV fluids administered to the patient?
   A) 90°–95°   B) 105°–110°   C) 95°–100°   D) Ambient

235) Your patient is a 21-year-old male who is alert and oriented, complaining of a rash that started about 36 hours ago, first appearing on his trunk. The rash has now spread to his face and extremities. You notice multiple small, fluid-filled vesicles on the patient's body. The patient is concerned that he will miss work as a second grade student teacher. He has no medical history, including no childhood diseases. The patient is most likely suffering from:
   A) herpes simplex.   B) varicella.   C) rubella.   D) brucellosis.
236) Your patient is an 88-year-old female whose daughter called because her mother is more confused than usual and unable to care for herself. The patient is alert and pleasant but thinks you are her sister Doris’s son, and repeats herself frequently. The patient has a history of dementia but no acute complaints. The daughter states that her mother does not recognize her, which is not normal. Physical examination is unremarkable, and HR = 84, BP = 114/76, RR = 12, SaO₂ = 98%, blood glucose = 90 mg/dL. Which of the following is MOST appropriate?

A) Contact social services for nursing home placement
B) Oxygen via nasal cannula at 4 lpm, cardiac monitor, IV normal saline, transport
C) Oxygen via nasal cannula at 4 lpm, 12-lead EKG, neurological assessment including cranial nerve testing, IV normal saline, transport
D) BLS transport to the emergency department

237) A 33-year-old female presents with "a heavy menstrual flow" after not having her menstrual period for 2 months. What other signs and symptoms would you MOST expect with this patient?

A) Crampy abdominal pain and passing of clots and tissue
B) Dull, lower L quadrant abdominal pain
C) Sharp, lower R quadrant abdominal pain
D) Fever and purulent, foul-smelling discharge

238) Which of the following maternal changes is expected during pregnancy?

A) Increased cardiac output, increased blood volume
B) Decreased stroke volume, decreased heart rate
C) Increased heart rate, increased blood pressure
D) Increased blood pressure, increased cardiac output

239) Which of the following is NOT a consequence of respiratory insufficiency in the newborn?

A) Hyperglycemia
B) Acidosis
C) Hypoxia
D) Bradycardia

240) Your patient is a 9-month-old infant in respiratory distress with grunting respirations of 50 per minute, nasal flaring, and intercostal retractions. He is pale, and you note scattered bilateral wheezing on auscultation of the lungs. The mother states that the child is healthy and up to date on all his immunizations. Which of the following conditions is most likely, based on this information?

A) Bacterial tracheitis
B) Epiglottitis due to Haemophilus Influenza B
C) Bronchiolitis
D) New onset asthma
241) Which of the following is NOT true of cardiac dysrhythmias in the elderly?
   A) Premature ventricular complexes are the most common dysrhythmias.
   B) Dysrhythmia may be the only clinical manifestation of an AMI.
   C) Dysrhythmia may cause a syncopal episode.
   D) Dysrhythmia may be the underlying cause of a motor vehicle collision.

242) What is the estimated percent range of sexual assaults that are NOT reported?
   A) 25–35  B) 10–22  C) 63–74  D) 52–63

243) What is the more common cause of conductive deafness in children?
   A) Media inflammation  B) Otitis media
   C) Otitis cochlea  D) Otitis externa

244) Many patients with neuromuscular degenerative diseases receive chronic respiratory support at home. Ultimately, what step may you as a paramedic have to take immediately, regardless of the type of respiratory support available in the patient's home?
   A) Alter dosages of medications already in use to achieve a better effect.
   B) Rapidly become familiar with unfamiliar equipment.
   C) Call the patient's physician and get orders not addressed by your protocols.
   D) Intubate and ventilate.

245) Your patient is a 72-year-old female who is responsive to verbal stimuli, in obvious respiratory distress, and complaining of chest pain and difficulty breathing. The patient's skin is cool, pale, and diaphoretic. She has labored respirations at 30 per minute, a heart rate of 116, and a blood pressure of 72/54. The monitor shows a sinus tachycardia with frequent PVCs. The patient has crackles in the lower lung fields bilaterally. In addition to oxygen by nonrebreathing mask, which of the following is the best treatment plan?
   A) Continued assessment to obtain the patient's oxygen saturation, blood glucose level, and a 12-lead EKG
   B) IV normal saline at a keep-open rate, dopamine infusion at 400 mcg/minute
   C) IV of normal saline at a keep open rate, 0.4 mg nitroglycerin sublingually, 40 mg of furosemide, IV push, and morphine sulfate in 2 mg increments
   D) 250 ml fluid bolus, repeated once if there is no improvement in blood pressure; albuterol nebulizer; 50 mg of lidocaine, IV push, followed by a 2 mg/minute drip
246) You have responded to a residence for an injured person. On your arrival, you suspect that the patient as well as the five bystanders in the home are members of a local gang known for violence. The patient has been attacked by a perpetrator with a machete. He is missing the second through fifth digits on his right hand and has several lacerations on his forearms. Which of the following should you anticipate?

A) Bystanders may mistake you for law enforcement.
B) Danger is possible from returning rival gang members.
C) Bystanders may refuse to allow you to transport the patient.
D) All of the above are possible.

247) Terrorist attacks are most likely to be targeted toward which of the following?

A) Grocery stores
B) Structures symbolic of the government
C) Individuals
D) Family members

248) Which of the following professional characteristics is required in order for patients to trust paramedics in their homes, with their property, and with their personal information?

A) Empathy
B) Patient advocacy
C) Integrity
D) Leadership

249) In a lawsuit in which a paramedic has been charged with negligence, the paramedic is called the:

A) magistrate.
B) defendant.
C) plaintiff.
D) suspect.

250) Which of the following is NOT a structure of the upper airway?

A) Hypopharynx
B) Nasopharynx
C) Trachea
D) Larynx
1) D
ID: epc2b 1-123
Page Ref: 37

2) B
ID: epc2b 1-157
Page Ref: 53

3) A
ID: epc2b 1-22
Page Ref: 7

4) B
ID: epc2b 1-167
Page Ref: 58

5) A
ID: epc2b 1-87
Page Ref: 71

6) D
ID: epc2b 2-4
Page Ref: 66

7) C
ID: epc2b 2-35
Page Ref: 71

8) D
ID: epc2b 2-5
Page Ref: 66

9) D
ID: epc2b 2-46
Page Ref: 76

10) D
ID: epc2b 2-56
Page Ref: 75

11) D
ID: epc2b 3-165
Page Ref: 171

12) B
ID: epc2b 3-149
Page Ref: 164

13) D
ID: epc2b 3-106
Page Ref: 145

14) A
ID: epc2b 3-22
Page Ref: 99

15) C
ID: epc2b 4-13
Page Ref: 273

16) A
ID: epc2b 4-12
Page Ref: 274

17) D
ID: epc2b 4-1
Page Ref: 270

18) C
ID: epc2b 4-27
Page Ref: 279

19) B
ID: epc2b 5-1
Page Ref: 292

20) C
ID: epc2b 5-6
Page Ref: 296

21) B
ID: epc2b 5-12
Page Ref: 300

22) C
ID: epc2b 5-16
Page Ref: 301

23) A
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Page Ref: 351

24) D
ID: epc2b 6-30
Page Ref: 337

25) B
ID: epc2b 6-1
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26) D
ID: epc2b 6-53
Page Ref: 343

27) D
ID: epc2b 7-30
Page Ref: 435

28) A
ID: epc2b 7-26
Page Ref: 413

29) C
ID: epc2b 7-17
Page Ref: 400

30) D
ID: epc2b 7-9
Page Ref: 386

31) D
ID: epc2b 8-33
Page Ref: 480

32) A
ID: epc2b 8-55
Page Ref: 478

33) C
ID: epc2b 8-49
Page Ref: 467

34) C
ID: epc2b 8-19
Page Ref: 521

35) A
ID: epc2b 9-15
Page Ref: 537

36) A
ID: epc2b 9-11
Page Ref: 539

37) B
ID: epc2b 9-9
Page Ref: 539

38) C
ID: epc2b 9-18
Page Ref: 539

39) A
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Page Ref: 551

40) D
ID: epc2b 10-25
Page Ref: 552

41) B
ID: epc2b 10-4
Page Ref: 547

42) D
ID: epc2b 10-37
Page Ref: 551

43) B
ID: epc2b
Page Ref: 616

44) C
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Page Ref: 566

45) A
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Page Ref: 591

46) D
ID: epc2b 11-52
Page Ref: 608

47) C
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48) B
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Page Ref: 663

49) A
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50) C
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51) B
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Page Ref: 710

52) A
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53) B
ID: epc2b 13-24
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54) A
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55) D
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56) C
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Page Ref: 731

57) A
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Page Ref: 721

58) C
ID: epc2b 14-35
Page Ref: 733

59) B
ID: epc2b 15-40
Page Ref: 755

60) D
ID: epc2b 15-43
Page Ref: 755

61) A
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Page Ref: 737

62) C
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Page Ref: 764

63) A
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64) A
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82) D
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   Page Ref: 931

83) B
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84) A
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85) A
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   Page Ref: 979

86) A
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87) B
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   Page Ref: 1010

88) A
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   Page Ref: 1003

89) B
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   Page Ref: 1041

90) C
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   Page Ref: 1057

91) C
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   Page Ref: 1055

92) C
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   Page Ref: 1063

93) A
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   Page Ref: 1063

94) C
   ID: epc2b 26-10
   Page Ref: 1064

95) B
   ID: epc2b 27-14
   Page Ref: 1105

96) A
   ID: epc2b 27-10
   Page Ref: 1093

97) B
   ID: epc2b 27-18
   Page Ref: 1106

98) A
   ID: epc2b
   Page Ref: 1199

99) C
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   Page Ref: 1238

100) C
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    Page Ref: 1224

101) D
    ID: epc2b 29-38
    Page Ref: 1247

102) B
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    Page Ref: 1273

103) C
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    Page Ref: 1277

104) C
    ID: epc2b 30-15
    Page Ref: 1292

105) C
    ID: epc2b 30-17
    Page Ref: 1289

106) C
    ID: epc2b 30-23
    Page Ref: 1288

107) B
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108) D
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    Page Ref: 1299

109) D
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    Page Ref: 1309

110) B
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    Page Ref: 1308

111) B
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    Page Ref: 1330

112) D
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    Page Ref: 1345

113) D
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    Page Ref: 1384

114) C
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    Page Ref: 1359

115) D
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    Page Ref: 1400

116) C
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    Page Ref: 1398

117) D
    ID: epc2b 36-27
    Page Ref: 1424

118) A
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    Page Ref: 1414

119) A
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120) D
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121) C
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122) D
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123) A
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    Page Ref: 1513

124) D
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    Page Ref: 1515

125) D
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    Page Ref: 1532

126) B
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127) B
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128) C
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129) D
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130) B
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131) D
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132) B
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133) A
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    Page Ref: 1716

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136) D
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    Page Ref: 1787

140) C
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    Page Ref: 1779

141) D
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142) B
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143) A
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144) C
    ID: epc2b 49-6
    Page Ref: 1894

145) D
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    Page Ref: 30

146) A
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    Page Ref: 48

147) B
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    Page Ref: 74

148) A
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    Page Ref: 73

149) D
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150) D
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151) A
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152) A
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153) A
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154) D
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    Page Ref: 298

155) C
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    Page Ref: 370

156) D
    ID: epc2b 7-19
    Page Ref: 402

157) C
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    Page Ref: 463

158) B
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    Page Ref: 539

159) A
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    Page Ref: 548

160) D
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242) C
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   Page Ref: 1724

243) B
   ID: epc2b 45-4
   Page Ref: 1731

244) D
   ID: epc2b 46-13
   Page Ref: 1766

245) B
   ID: epc2b 47-38
   Page Ref: 1786

246) D
   ID: epc2b
   Page Ref: 1878

247) B
   ID: epc2b 49-2
   Page Ref: 1891

248) C
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