

***Paramedic Care Principles & Practice V2, 5e (Bledsoe)***  
**Chapter 2 Primary Assessment**

1) A patient with skin described as "clammy" has \_\_\_\_\_ skin.

- A) cool and dry
- B) warm and dry
- C) warm and moist
- D) cool and moist

Answer: D

Diff: 1 Page Ref: 30

Standard: Assessment (Primary Assessment)

Objective: 4

2) After determining that a patient does not respond to verbal stimuli, your next action would be to:

- A) place him in the recovery position.
- B) pinch one of his fingernails.
- C) insert an oropharyngeal airway.
- D) apply manual cervical spine stabilization.

Answer: B

Diff: 1 Page Ref: 25

Standard: Assessment (Primary Assessment)

Objective: 6

3) Forming a general impression as part of your primary assessment helps you to:

- A) determine baseline mental status.
- B) determine general clinical status and priority.
- C) make a determination about stabilization of the cervical spine.
- D) estimate vital signs.

Answer: B

Diff: 2 Page Ref: 22

Standard: Assessment (Primary Assessment)

Objective: 3

4) The sound of gurgling associated with breathing usually indicates:

- A) foreign body obstruction of the upper airway.
- B) fluid in the upper airway.
- C) thick mucus in the lower airways.
- D) constriction of the bronchioles.

Answer: B

Diff: 1 Page Ref: 25

Standard: Assessment (Primary Assessment)

Objective: 7

5) The purpose of manual stabilization of the cervical spine during the primary assessment of a trauma patient is to:

- A) allow you to control the patient.
- B) allow for easier airway manipulation.
- C) prevent the patient from moving his neck.
- D) help you avoid litigation.

Answer: C

Diff: 1 Page Ref: 23

Standard: Assessment (Primary Assessment)

Objective: 5

6) To assess an infant's airway, you should:

- A) perform a tongue-jaw lift.
- B) hyperextend the head and lift the chin.
- C) perform a jaw-thrust maneuver.
- D) carefully extend the head and neck.

Answer: D

Diff: 1 Page Ref: 25

Standard: Assessment (Primary Assessment)

Objective: 7

7) To determine whether a patient is breathing, you should:

- A) listen and feel for breathing at the mouth and nose.
- B) observe for movement of the abdomen.
- C) apply a pulse oximeter.
- D) auscultate the chest.

Answer: A

Diff: 1 Page Ref: 25

Standard: Assessment (Primary Assessment)

Objective: 7

8) Your patient appears awake, but barely looks at you when you call his name. His airway is open, and he is breathing at 34 times per minute. He appears cyanotic. Which of the following adjuncts is most appropriate at this point?

- A) Nonrebreather mask
- B) Bag-valve mask
- C) Nasopharyngeal airway
- D) Nasal cannula

Answer: B

Diff: 2 Page Ref: 28

Standard: Assessment (Primary Assessment)

Objective: 8

9) When assessing the airway, which of the following actions is NOT appropriate?

- A) Look for chest rise and fall.
- B) Feel for air movement.
- C) Listen for airflow.
- D) Count the number of breaths over a minute.

Answer: D

Diff: 2 Page Ref: 28

Standard: Assessment (Primary Assessment)

Objective: 7

10) You are assessing a 28-year-old man with multiple gunshots to his abdomen. You should expect his skin to be:

- A) cool and moist.
- B) hot and moist.
- C) warm and dry.
- D) cold and dry.

Answer: A

Diff: 1 Page Ref: 30

Standard: Assessment (Primary Assessment)

Objective: 9

11) Mottled, cyanotic, pale, or ashen skin color may indicate any of the following EXCEPT:

- A) hypertensive crisis.
- B) impaired blood flow to an extremity.
- C) significant blood loss.
- D) loss of spinal cord function.

Answer: A

Diff: 2 Page Ref: 30

Standard: Assessment (Primary Assessment)

Objective: 9

12) Steps in assessing circulation during a primary assessment include all of the following EXCEPT:

- A) controlling major bleeding.
- B) determining the blood pressure.
- C) checking for skin signs.
- D) checking for a radial pulse.

Answer: B

Diff: 2 Page Ref: 29-31

Standard: Assessment (Primary Assessment)

Objective: 9

13) You are assessing an adult patient. When you palpate her wrist to locate a pulse, you do not feel one. You should immediately palpate for a \_\_\_\_\_ pulse.

- A) brachial
- B) femoral
- C) apical
- D) carotid

Answer: D

Diff: 1 Page Ref: 29

Standard: Assessment (Primary Assessment)

Objective: 8

14) Which of the following statements regarding stridor is TRUE?

- A) Stridor originates in the lower airways.
- B) Stridor is seldom of clinical significance.
- C) The correct treatment of stridor depends on the underlying problem.
- D) The presence of stridor requires immediate intubation.

Answer: C

Diff: 2 Page Ref: 25-26

Standard: Assessment (Primary Assessment)

Objective: 7

15) Patterns of deterioration in patient condition may include all of the following EXCEPT:

- A) skin becomes cool, pale, and moist.
- B) the heart rate significantly increases or decreases.
- C) the respiratory rate significantly increases or decreases.
- D) the level of consciousness increases.

Answer: D

Diff: 1 Page Ref: 24

Standard: Assessment (Primary Assessment)

Objective: 10

16) During the primary assessment, your patient groans and tries to turn away when you apply a sternal rub. Otherwise, there is no other response. The patient's mental status can best be described as:

- A) alert.
- B) responds to painful stimulus.
- C) responds to verbal stimulus.
- D) unresponsive.

Answer: B

Diff: 1 Page Ref: 25

Standard: Assessment (Primary Assessment)

Objective: 6

17) Your patient is not alert but is responsive to painful stimulus. His airway is patent. He is breathing at eight times per minute. Your next action should be to administer oxygen via a:

- A) nasal cannula.
- B) simple face mask.
- C) nonrebreather mask.
- D) bag-valve-mask device.

Answer: D

Diff: 2 Page Ref: 25-28

Standard: Assessment (Primary Assessment)

Objective: 7

18) The best method for determining responsiveness to painful stimuli in an infant is to:

- A) pinch his cheeks.
- B) pinch his fingernails.
- C) rub his sternum.
- D) flick the soles of his feet.

Answer: D

Diff: 1 Page Ref: 25

Standard: Assessment (Primary Assessment)

Objective: 6

19) While performing a primary assessment on a trauma patient who has fallen from a roof, you discover absent lung sounds on the right side. Which of the following actions should you take next?

- A) Assess for signs of a tension pneumothorax.
- B) Intubate the patient.
- C) Continue the rapid trauma assessment.
- D) Decompress the patient's chest.

Answer: A

Diff: 2 Page Ref: 29

Standard: Assessment (Primary Assessment)

Objective: 7

20) Signs of inadequate breathing include all of the following EXCEPT:

- A) presence of bronchovesicular breath sounds.
- B) retractions of intercostal and supraclavicular tissues.
- C) nasal flaring.
- D) accessory muscle use.

Answer: A

Diff: 1 Page Ref: 28

Standard: Assessment (Primary Assessment)

Objective: 8

21) What does the "U" in A-V-P-U stand for?

- A) Unresponsive
- B) Unconscious
- C) Uncooperative
- D) Undetermined

Answer: A

Diff: 1 Page Ref: 24

Standard: Assessment (Primary Assessment)

Objective: 1

22) Medical patients with altered mental status are stabilized in a manner similar to that that is appropriate for:

- A) critical trauma patients.
- B) any other medical patient.
- C) a patient complaining of chest pain.
- D) a patient with isolated extremity trauma.

Answer: A

Diff: 2 Page Ref: 23

Standard: Assessment (Primary Assessment)

Objective: 6

23) Devices for maintaining airway patency in a five-year-old patient include all of the following EXCEPT a(n):

- A) endotracheal tube.
- B) oropharyngeal airway.
- C) suction unit.
- D) pharyngotracheal lumen airway.

Answer: D

Diff: 2 Page Ref: 25-27

Standard: Assessment (Primary Assessment)

Objective: 7

24) In an infant, the heart rate is best detected by either palpating the brachial artery or:

- A) auscultating the carotid pulse.
- B) palpating the femoral pulse.
- C) palpating the carotid pulse.
- D) auscultating the apical pulse.

Answer: D

Diff: 1 Page Ref: 29

Standard: Assessment (Primary Assessment)

Objective: 9

25) Your patient is awake and complaining of chest pain. His airway is patent, and he is breathing at 18 times per minute with adequate tidal volume. What is your next action?

- A) Administer oxygen at 15 lpm via nonrebreather mask.
- B) Begin positive pressure ventilations via bag-valve-mask device.
- C) Insert a nasopharyngeal airway.
- D) Administer oxygen at 2 lpm via nasal cannula.

Answer: D

Diff: 2 Page Ref: 25-28

Standard: Assessment (Primary Assessment)

Objective: 11

26) Which of the following best describes why patients with serious illnesses or injuries should be transported without delay?

- A) Definitive care cannot be provided in the prehospital setting.
- B) Most patients are uncomfortable with the level of care provided by paramedics.
- C) Paramedics must become available for additional calls as soon as possible.
- D) The shorter the contact time with the patient, the less the potential for liability.

Answer: A

Diff: 2 Page Ref: 31

Standard: Assessment (Primary Assessment)

Objective: 2

27) You locate a 55-year-old woman lying supine on the side of a road. There are no bystanders. You determine that the patient is unresponsive. Which of the following should be your next action?

- A) Apply a cervical collar.
- B) Provide high-flow oxygen.
- C) Open the airway with a jaw-thrust maneuver.
- D) Intubate the trachea.

Answer: C

Diff: 2 Page Ref: 23

Standard: Assessment (Primary Assessment)

Objective: 5

28) Your three-year-old patient opens her eyes and responds when you speak to her. Her mental status is best described as:

- A) alert.
- B) responsive to tactile stimuli.
- C) responsive to verbal stimuli.
- D) lethargic.

Answer: C

Diff: 1 Page Ref: 24

Standard: Assessment (Primary Assessment)

Objective: 6

29) When assessing the chest, you should cover any open wounds you locate with a(n) \_\_\_\_\_ dressing.

- A) wet
- B) occlusive
- C) antibacterial
- D) dry gauze

Answer: B

Diff: 1 Page Ref: 28-29

Standard: Assessment (Primary Assessment)

Objective: 8

30) Which of the following problems is it NOT critical to find during the primary assessment?

- A) Scalp hematoma
- B) Bright red blood spurting from a thigh wound
- C) Respiratory distress
- D) Foreign body airway obstruction

Answer: A

Diff: 2 Page Ref: 31

Standard: Assessment (Primary Assessment)

Objective: 2

31) Your patient is unresponsive to painful stimulus and has snoring respirations. What is your next action?

- A) Check for a pulse.
- B) Perform a head-tilt, chin-lift maneuver.
- C) Administer oxygen at 15 lpm.
- D) Suction.

Answer: B

Diff: 2 Page Ref: 25

Standard: Assessment (Primary Assessment)

Objective: 7

32) All of the following are signs of inadequate breathing in an infant EXCEPT:

- A) cyanosis.
- B) use of accessory muscles.
- C) altered mental status.
- D) a respiratory rate of 32 breaths per minute.

Answer: D

Diff: 1 Page Ref: 28

Standard: Assessment (Primary Assessment)

Objective: 8



33) Which of the following statements about airway management is TRUE?

- A) Immediate intubation is required for all unresponsive patients.
- B) Dual lumen airways are acceptable for use in children over the age of four years.
- C) If a patient cannot be intubated because of an intact gag reflex, a dual lumen airway can be used.
- D) Nasopharyngeal airways are contraindicated in patients with possible basilar skull fracture.

Answer: D

Diff: 2 Page Ref: 27

Standard: Assessment (Primary Assessment)

Objective: 7

34) Your patient does not respond to you when you call his name. What should you do next?

- A) Apply a painful stimulus.
- B) Continue shouting.
- C) Assume he is unresponsive.
- D) Insert an oral airway.

Answer: A

Diff: 1 Page Ref: 24-25

Standard: Assessment (Primary Assessment)

Objective: 6

35) Which of the following conditions is NOT typically associated with wheezing?

- A) Foreign bodies in the small airways
- B) Asthma
- C) Bronchospasm
- D) Upper airway swelling

Answer: D

Diff: 1 Page Ref: 26

Standard: Assessment (Primary Assessment)

Objective: 7

36) In infants, capillary refill is a good indicator of adequate circulation and can be checked in the:

- A) limbs.
- B) dorsum of the hand.
- C) torso.
- D) face.

Answer: B

Diff: 1 Page Ref: 30

Standard: Assessment (Primary Assessment)

Objective: 9

37) Which of the following sounds can typically be heard without the use of a stethoscope?

- A) Rhonchi
- B) Bowel sounds
- C) Stridor
- D) Crackles

Answer: C

Diff: 2 Page Ref: 25-26

Standard: Assessment (Primary Assessment)

Objective: 8

38) If an abnormal finding is noted in the patient's respiratory rate or pattern during the chest examination, you should:

- A) immediately ensure adequate ventilation.
- B) intervene only if pulse oximetry is less than 85 percent.
- C) immediately determine the exact cause.
- D) continue the examination before finding and treating the cause.

Answer: A

Diff: 1 Page Ref: 26-27

Standard: Assessment (Primary Assessment)

Objective: 8

39) Pulse quality refers to:

- A) rhythm.
- B) strength.
- C) location.
- D) rate.

Answer: B

Diff: 1 Page Ref: 30

Standard: Assessment (Primary Assessment)

Objective: 9

40) Your patient is a three-year-old who presents with a fever. His parents state that he has had diarrhea and vomiting for two days. The patient has not eaten in 24 hours. To best evaluate the patient's peripheral perfusion status, you should evaluate his:

- A) respiratory rate.
- B) fingertip sensation.
- C) capillary refill.
- D) blood pressure.

Answer: C

Diff: 1 Page Ref: 30-31

Standard: Assessment (Primary Assessment)

Objective: 9

41) You are examining a patient's peripheral vasculature when you note that he has no radial pulse. Your next step would be to:

- A) prepare for immediate transport.
- B) defibrillate with 200 joules.
- C) start CPR.
- D) palpate a carotid pulse.

Answer: D

Diff: 1 Page Ref: 29

Standard: Assessment (Primary Assessment)

Objective: 9

42) According to the 2015 AHA guidelines/recommendations, a patient who appears to be unresponsive and not breathing or breathing ineffectively should be assessed using which mnemonic memory aid?

- A) ABC
- B) BAC
- C) CBA
- D) CAB

Answer: D

Diff: 1 Page Ref: 22

Standard: Assessment (Primary Assessment)

Objective: 10