AMERICAN HEART ASSOCIATION - CENTRAL MARYLAND CHAPTER, INC.

BASIC LIFE SUPPORT
COURSE TEST

1. Heart attack symptoms can go away and return.

   a. True
   b. False

2. The least likely early warning sign of possible heart attack is:

   a. Sweating and shortness of breath
   b. A red colored lump near the carotid artery
   c. Vomiting and nausea
   d. Prolong pain in chest area extending to arm
   e. Oppressive pain up along the neck and jaw

3. The most dangerous part of a heart attack is:

   a. The first two hours
   b. The first week
   c. The first month

4. A person while at work experiences an aching in his chest and left arm for 15 minutes and is nauseated and lightheaded. He should:

   a. Place his head between his knees until lightheadedness clears
   b. Go home immediately
   c. Rest quietly and have someone seek a physician who can come to his aid, even if it means calling every physician in the directory
   d. Rest quietly while arrangements are made for entry into the appropriate life support system
   e. Take baking soda

5. The warning signs of heart attack are sometimes very mild and ignored, or attributed to some other cause.

   a. True
   b. False

6. Biological death occurs:

   a. During a clinical examination
   b. When the heart and respiration stop
   c. When irreversible brain damage has occurred

7. What do you do when you perform cardiopulmonary resuscitation?

   a. Artificial breathing
   b. Artificial circulation
   c. Both artificial breathing and artificial circulation
   d. Use a resuscitator to keep someone alive

8. CPR for a pulseless victim is too hazardous to perform:

   a. If the patient has numerous rib fractures
   b. If neck injury is present
   c. Following heart surgery
   d. None of the above

9. The basic breath rate for the resting normal adult is:

   a. 5 to 10
   b. 12 to 15
   c. 20 to 30
   d. 20 to 25

10. Clinical death occurs:

   a. During a clinical examination
   b. When the heart and respirations stop
   c. When irreversible brain damage has occurred

11. External cardiac compression:

   a. Builds up blood pressure for blood flow through the body
   b. Is as effective as spontaneous circulation
   c. Can only be performed by physicians, licensed nurses and paramedics in this State
   d. Is useful only for 4 - 6 minutes
   e. Can be done on any surface

12. A rescuer's initial effort to assure that the patient's airway is open should be:

   a. To listen to the chest for breathing sounds
   b. To clear foreign matter from the throat
   c. Extend the head
   d. Pinch the nose

13. Which of the following is true about external cardiac compression?

   a. Proper force is more important than hand position
   b. The heart is squeezed to force out blood
   c. The proper jabbing motion is more important than the rhythm
   d. Spontaneous circulation must be restored within 1/2-hour
   e. A precordial thump should be done on a 1:5 ratio with compressions

14. The purpose of CPR is:

   a. Prevent clinical death (heart-lung arrest)
   b. Prevent heart attacks
   c. Prevent strokes
   d. Prevent irreversible brain damage (biological death)
   e. Prevent liver damage

15. Which would indicate effective CPR?

a. Improved color
b. Detectable pulse during compressions
c. Pupils constrict
d. All of the above

16. Which of these is a good sign during CPR?

a. Wide open pupils that stay dilated when you expose them to light
b. Pupils that get larger when you expose them to light
c. Moderately dilated pupils which constrict when exposed to light

17. If cardiac arrest is suspected, the routine pulse to check first is:

a. Neck - Carotid
b. Groin - Femoral
c. Wrist - Radial

18. While in a drugstore, you see a child come in alone; he is wearing a wet bathing suit. He reaches into the ice cream freezer and suddenly cries out and "freezes" in position, shivering slightly. The first thing to do is:

a. Position the head, check for breathing, and begin mouth-to-mouth breathing if indicated
b. Thump the chest if indicated
c. Check for a pulse
d. Seek and use a non-conductive object to knock him away from the freezer and/or turn off the electricity to the freezer - whichever is most expedient

19. Three methods to determine if breathing is occurring are:

a. Look at the chest, feel with hand on chest, listen for air exchange
b. Look at the throat for swallowing, feel with hand on chest, listen for air exchange
c. Look at the chest, feel for air exchange with hand on chest, listen with ear on chest

20. What does it mean when the unconscious victim's chest moves up and down?

a. He is moving air in and out of his lungs
b. He is not breathing
c. He is making breathing attempts but may not be getting air into his lungs

21. Hearing or feeling ribs fracture during external compression:

a. Is an indication to stop compressing as the lung may become punctured
b. Indicates hand location should be re-assessed
c. Indicates the 60 lbs. of downward force is too much for this adult victim

22. With a person who has drowned, one should not begin mouth-to-mouth resuscitation until an effort has been made to drain or suction most of the water from his lungs.

a. True
b. False

23. Stomach distension is a condition which often occurs during artificial ventilation. Which of the following methods should be used to alleviate this condition in a child?

a. Hold the child upright and pat his back gently
b. Gently exert pressure on the child's stomach
c. Invert the child and strike sharply on the back
d. Apply heavy pressure on the child's upper abdomen

24. If breathing does not seem to be present after you have opened the airway:

a. Check skin color
b. Give blow to back
c. Feel for a pulse
d. Begin rescue breathing
e. Check pupils

25. If a lone rescuer finds a non-breathing, pulseless accident victim lying on his face in the road, and he suspects that the victim has a back injury, what should he do?

a. Turn the victim as a unit and begin CPR
b. Turn the victim's head to one side and begin CPR
c. There is nothing he can do until help arrives
d. Leave the victim in his present position and do whatever he can to apply the principles of CPR

26. Under which of the following circumstances may a non-physician discontinue CPR?

a. When the rescuer thinks the patient will not survive
b. When the rescuer suspects that the victim may suffer permanent brain damage
c. When the rescuer is exhausted and unable to continue
d. When an ambulance attendant states that the victim is dead

27. Always check for foreign matter in the victim's throat <u>before</u> starting to breathe for him.

a. True
b. False

28. When can the lay rescuer turn over the responsibility of maintaining CPR?

a. Anytime an ambulance arrives
b. Anytime the police arrives
c. When there is reasonable assurance that the CPR effort will be continued by qualified and capable individuals

29. The only reliable direct indication that rescue breathing is inflating the lungs is:

a. The patient loses much of his blue color
b. You can see the victim's chest rise and fall
c. When you blow into the victim's mouth, air enters easily
d. The pupils of the eyes become constricted

30. When should you check the pulse of a victim of an unwitnessed arrest who is not breathing?

a. Before you start breathing for him
b. After the first four adequate breaths
c. After the first eight to ten adequate breaths
d. Before you do anything else

31. In mouth-to-mouth resuscitation, dentures should routinely be:

a. Removed because they contain dirty bacteria
b. Left in (unless unusually loose) because they provide support and facilitate making an airtight seal
c. Removed because they frequently obstruct the airway
d. Left in because it is illegal to remove them without the victim's consent

32. Sometimes mouth-to-mouth breathing is all that it takes to revive an unconscious person.

a. True
b. False

33. When should the person doing rescuer breathing "interpose" a breath during two-man CPR?

a. During the fifth downstroke
b. During the fifth upstroke
c. During the 15th upstroke
d. Whenever possible

34. When a foreign body is obstructing the air passage and cannot be removed with fingers, always try to blow some air into the lungs. Then:

a. Deliver a firm blow over the spine between the shoulder blades
b. Call for a surgeon
c. Perform an emergency tracheotomy
d. Keep probing in throat with fingers

35. Which of these persons may be the victim of an airway obstruction:

a. A person whose skin is turning blue
b. A person with a swollen airway
c. A person with a piece of meat caught in his throat
d. A person with spasm of the larynx
e. All of the above

36. What is the most common cause of airway obstruction?

a. Tongue
b. Dentures
c. Secretions
d. Foreign body

37. The heel of the hand should stay in contact with the chest during cardiac compression because:

a. Chest expansion with respirations will be easier to feel
b. Correct position can be maintained
c. Slapping against the chest wall will cause more heart damage

38. What is the ratio for 2 rescuers performing CPR on an adult?

a. 5 compressions: 1 ventilation
b. 15 compressions: 1 ventilation
c. 5 compressions: 2 ventilations
d. 15 compressions: 2 ventilations

39. What ratio should a lone rescuer use when he performs CPR on an adult?

a. 5 compressions: 1 ventilation
b. 15 compressions: 1 ventilation
c. 5 compressions: 2 ventilations
d. 15 compressions: 2 ventilations

40. When performing rescue breathing on an infant, the rescuer need only blow small puffs into the victim's lungs. At what rate should this be done?

a. 10 breaths per minute
b. 20 breaths per minute
c. 30 breaths per minute
d. 40 breaths per minute

41. The average size 8 or 9 year old child requires:

a. Double size breaths
b. Puffs from the cheek
c. 1/4 size breathing
d. Breathing until chest rise adequately

42. Infants and small children are ventilated in basically the same way as adults, except that inflations are:

a. Faster and more forceful for children
b. Slower and more forceful for children
c. Faster and less forceful for children
d. Slower and less forceful for children

43. When performing external cardiac compression on an infant:

a. The compression rate should be 50-60 per minute
b. Place two fingers over the lower half of the sternum
c. Place two fingers over the middle of the sternum
d. Interpose one ventilation between every 9th and 10th compression

44. What particular point must a rescuer remember when placing a small child in open airway position?

a. The child's head should be back as far as possible
b. A small child's neck is less flexible than an adult's
c. Forcing the child's head back too far may result in a collapsed airway

45. Incorrect placement of your hands during cardiac compression may lead to:

a. Punctured lung
b. Punctured heart
c. Lacerated liver
d. Fractured ribs
e. All of the above

46. External cardiac compression may lead to complications. The one most common and least dangerous of these is:

a. Punctured lung
b. Laceration of the liver
c. Fractured ribs
d. Bruising of the heart

47. If heart-lung resuscitation is not done correctly, the rescuer may:

a. Damage the lungs
b. Break the ribs
c. Break the breast bone
d. Damage the liver
e. All of the above

48. Where on the chest would you deliver a blow with your fist in order to perform the chest thump?

a. Two or three fingers above the lower end of the sternum
b. On the upper third of the sternum
c. Where the sternum and collarbone meet
d. On the mid-portion of the sternum

49. A precordial thump is effective because:

a. It increases cardiac output to 60%
b. It is less tiring than external compression
c. It may result in creation of electrical activity sufficient to stimulate the heart
d. It creates negative pressure in the chest causing a spontaneous inhalation

50. The chest "thump" should be performed:

a. With the heel of the hand
b. By striking over the left chest
c. As part of the first step in a patient witnessed cardiac arrest
d. Starting 18 inches above chest
e. As the first step in an unwitnessed arrest

CPR TEST, Form 2

Name:_____

Date:_____

Please answer all questions. Mark only one answer per question.

1. Can a person be breathing but not have a heartbeat?

[ ] a. Yes
[ ] b. No

2. Where is the best place to check an adult's pulse in an emergency?

[ ] a. The wrist.
[ ] b. The neck.
[ ] c. The temple.
[ ] d. The groin.

3. Where is the pain likely to be worst in a heart attack?

[ ] a. The legs.
[ ] b. The back.
[ ] c. The chest.
[ ] d. The head.

4. Can people of any age have cardiac arrest?

[ ] a. Yes
[ ] b. No

5. When do you clean the mouth?

[ ] a. As the first step in mouth-to-mouth breathing.
[ ] b. Right after you check for breathing and find no breathing.
[ ] c. Never.
[ ] d. Only when you have a good reason.

6. When you start to give mouth-to-mouth breathing to an adult, what kind of breaths do you give?

[ ] a. Full, even breaths, at normal speed.
[ ] b. 2 quick, full breaths, then continue at normal speed.
[ ] c. 3 quick, full breaths, then continue at normal speed.
[ ] d. 4 quick, full breaths, then continue at normal speed.

7. Will chest compressions force blood to the brain while the victim is sitting up?

[ ] a. Yes
[ ] b. No

8. Does it matter when kind of surface the adult victim is on when you give chest compressions?

[ ] a. Yes, it should be hard.
[ ] b. Yes, it should be very soft.
[ ] c. Yes, it should be moderately soft.
[ ] d. No, it doesn't matter.

9. When you give chest compressions to an adult, you

[ ] a. straddle him.
[ ] b. sit on the floor or ground beside him.
[ ] c. kneel at his head.
[ ] d. kneel at his side.

10. How far do you compress the chest of an adult?

[ ] a. 1/4 to 1/2 inch.
[ ] b. 1/2 to 3/4 inch.
[ ] c. 3/4 to 1-1/2 inches.
[ ] d. 1-1/2 to 2 inches.

11. When compressing the chest, keep your elbows

[ ] a. straight.
[ ] b. bent slightly.
[ ] c. bent about 30 degrees.
[ ] d. flexible and able to bend as needed.

12. Should you practice chest compressions on someone who does not have cardiac arrest?

[ ] a. Yes
[ ] b. No

13. Where do you put your hands when you finish each chest compression?

[ ] a. Pushing firmly on the victim's chest.
[ ] b. Resting lightly on the victim's chest.
[ ] c. A few inches above the victim's chest.
[ ] d. Off the victim's chest completely, in your lap, or at your sides.

14. Pushing on the lower tip of the sternum (xiphoid) is likely to

[ ] a. increase circulation but not increase air exchange.
[ ] b. increase air exchange but not increase circulation.
[ ] c. increase both air exchange and circulation.
[ ] d. cause internal injuries, such as lacerations of the liver.

15. Which kind of CPR is more difficult to give?

[ ] a. One-rescuer CPR.
[ ] b. Two-rescuer CPR.
[ ] c. There is no difference.

16. In two-rescuer CPR, you blow into the lungs

[ ] a. when the chest is being compressed.
[ ] b. when the other rescuer's hands are going up.
[ ] c. during one complete cycle of compression and release.
[ ] d. whenever you are ready—just keep the breaths evenly spaced.

17. At what rate do you give chest compressions when you give two-rescuer CPR to an adult?

[ ] a. 30 per minute.
[ ] b. 60 per minute.
[ ] c. 80 per minute.
[ ] d. 100 per minute.

18. You and another rescuer are giving CPR, and a third person checks the victim's pupils—they get smaller (constrict) when a bright light is shined in his eyes. This means you

[ ] a. are getting oxygen to the brain with CPR.
[ ] b. are not getting oxygen to the brain with CPR.

19. You are giving CPR and find that pulse and breathing begin again. What will you do next?

[ ] a. Take the victim to a life-support unit.
[ ] b. Continue chest compressions without mouth-to-mouth breathing.
[ ] c. Continue mouth-to-mouth breathing without chest compressions.
[ ] d. Continue CPR.

20. What is the longest pause permitted in CPR for checking the pulse?

[ ] a. None.
[ ] b. 1 second.
[ ] c. 5 seconds.
[ ] d. 15 seconds.

21. How long should 15 compressions take in two-rescuer CPR for an adult?

[ ] a. About 7 seconds.
[ ] b. About 11 seconds.
[ ] c. About 15 seconds.
[ ] d. About 23 seconds.

22. In one-rescuer CPR for an adult, what kind of breaths do you give?

[ ] a. One quick breath.
[ ] b. Two quick breaths.
[ ] c. One slow breath.
[ ] d. Two slow breaths.

23. How many times do you give a precordial thump to an adult when care is delayed (unwitnessed)?

[ ] a. None.
[ ] b. One.
[ ] c. Two.
[ ] d. As many as needed.

24. You are giving immediate (witnessed) care. What do you do after you check the pulse the *first* time if the victim is not breathing but does have a pulse?

[ ] a. CPR.
[ ] b. Precordial thump.
[ ] c. Mouth-to-mouth breathing.
[ ] d. Keep watching and checking.

25. You are giving immediate (witnessed) care. What do you do after you check the pulse the *second* time if the victim is not breathing and does not have a pulse?

[ ] a. CPR.
[ ] b. Precordial thump.
[ ] c. Mouth-to-mouth breathing.
[ ] d. Keep watching and checking.

26. In giving delayed (unwitnessed) care, when do you check the pulse the first time?

[ ] a. Before you tip the head and check for breathing.
[ ] b. While you tip the head and check for breathing.
[ ] c. Right after you check for breathing.
[ ] d. Right after you give breaths.

27. What do you do at the same time you tip the head and check for breathing in a case of immediate (witnessed) care?

[ ] a. Nothing.
[ ] b. Check pulse.
[ ] c. Check for reduced body temperature.
[ ] d. Jut the jaw.

28. How do you remember the first steps for delayed (unwitnessed) care?

[ ] a. Check ACT Quick.
[ ] b. A ACT Quick.
[ ] c. A Quick Check.
[ ] d. ACT Quick Check.

29. Any person needing CPR should be moved to a hospital

[ ] a. before starting CPR.
[ ] b. after CPR has been started, only if he can be moved without stopping CPR for even one second.
[ ] c. after CPR has been started if CPR is not stopped for more than 15 seconds.
[ ] d. after CPR has been started if CPR is not stopped for more than a few minutes.

30. List and explain the first steps for immediate (witnessed) care for suspected cardiac arrest. The victim is unconscious.

Short Name of Step	*Explanation of Step*
_____	_____
_____	_____
_____	_____

(Use more space if necessary)

31. A lifeguard wades out to a swimmer who went under and pulls him onto shore. He starts giving mouth-to-mouth breathing in the water about 30 seconds after he saw him go under, and starts CPR on the shore in about one and one-half minutes. What kind of care is this?

[ ] a. Immediate (witnessed).
[ ] b. Delayed (unwitnessed).

32. In "fibrillation," the heart is

[ ] a. beating normally.
[ ] b. beating irregularly but still pumping blood.
[ ] c. completely stopped.
[ ] d. wiggling but not pumping blood.

33. Can a first-aider tell the difference between fibrillation and other forms of cardiac arrest?

[ ] a. Yes
[ ] b. No

34. Where do you give a precordial thump?

[ ] a. Solar plexus.
[ ] b. Middle of the back.
[ ] c. Middle of the sternum.
[ ] d. Just to the left of the cordium.

35. A man collapses on the street, but no one sees him collapse. You start helping him as soon as you find him. What kind of care is this?

[ ] a. Immediate (witnessed).
[ ] b. Delayed (unwitnessed).

36. In one-rescuer CPR for an adult, what is the ratio of breaths to compressions?

[ ] a. 1 breath to 5 compressions.
[ ] b. 1 breath to 15 compressions.
[ ] c. 2 breaths to 5 compressions.
[ ] d. 2 breaths to 15 compressions.

37. A lifeguard sees a swimmer go under and gets him out of the water onto a raft to give CPR, all in about 30 seconds. What kind of care is this?

[ ] a. Immediate (witnessed).
[ ] b. Delayed (unwitnessed).

38. What is the ratio of breaths to compressions in CPR for a baby?

[ ] a. 1 breath to 5 compressions.
[ ] b. 1 breath to 15 compressions.
[ ] c. 2 breaths to 5 compressions.
[ ] d. 2 breaths to 15 compressions.

39. How do you give breaths to a baby?

[ ] a. Mouth-to-mouth.
[ ] b. Mouth-to-nose.
[ ] c. Mouth-to-mouth-and-nose.

40. What kind of breaths do you give a baby?

[ ] a. Small puffs.
[ ] b. Slow, full, gentle breaths.
[ ] c. Normal breaths.
[ ] d. Large breaths.

41. How many times do you give a precordial thump to a small child?

[ ] a. None.
[ ] b. One.
[ ] c. Two.
[ ] d. As many as needed.

42. Which positions are OK for giving CPR to a baby?

[ ] a. Level or head higher than heart.
[ ] b. Level or head lower than heart.
[ ] c. Head higher than heart only.
[ ] d. Head lower than heart only.

43. How do you give chest compressions to a small child?

[ ] a. With the tips of two fingers.
[ ] b. With the heel of one hand.
[ ] c. With the heel of one hand, with the other hand on top of it.
[ ] d. With the heels of both hands, side by side.

44. Where do you check the pulse of a baby?

[ ] a. At the wrist.
[ ] b. In the area of the left nipple.
[ ] c. At the temple.
[ ] d. On the side of the neck, near the Adam's apple.

45. How far do you compress the chest of a small child?

[ ] a. 1/4 to 1/2 inch.
[ ] b. 1/2 to 3/4 inch.
[ ] c. 3/4 to 1-1/2 inches.
[ ] d. 1-1/2 to 2 inches.

46. Do you slow down or stop compressions to allow time for a breath when giving CPR to a baby?

[ ] a. Yes, stop giving compressions.
[ ] b. Yes, slow down the compressions just enough to allow time.
[ ] c. No, don't allow time—keep the same speed.
[ ] d. It doesn't matter.

47. At what rate do you compress a baby's chest?

[ ] a. 30 times per minute.
[ ] b. 60 times per minute.
[ ] c. 80 times per minute.
[ ] d. 100 times per minute.

50
Both
Sides

AMERICAN HEART ASSOCIATION - CENTRAL MARYLAND CHAPTER, INC.

CITIZEN'S COURSE - BASIC CARDIAC LIFE SUPPORT

1. Heart Attack symptoms can go away and return.

   a. True b. False

2. The least likely early warning sign of possible heart attack is:

   a. Sweating and shortness of breath
   b. A red colored lump near the carotid artery
   c. Vomitting and nausea
   d. Prolonged pain in chest area extending to arm
   e. Oppressive pain up along the neck and jaw

3. The most dangerous part of a heart attack is:

   a. The first two hours
   b. The first week
   c. The first month

4. The warning signs of heart attack are sometimes very mild and ignored, or attributed to some other cause.

   a. True b. False

5. Biological death occurs:

   a. During a clinical examination
   b. When the heart and respiration stop
   c. When irreversible brain damage has occurred.

6. What do you do when you perform cardiopulmonary resuscitation?

   a. Artificial breathing
   b. Artificial circulation
   c. Both artificial breathing and artificial circulation
   d. Use a resuscitator to keep someone alive

7. Clinical death occurs:

   a. During a clinical examination
   b. When the heart and respiration stop
   c. When irreversible brain damage has occurred.

8. The purpose of CPR is:

   a. Prevent Clinical death (heart-lung arrest)
   b. Prevent heart attacks
   c. Prevent strokes
   d. Prevent irreversible brain damage (biological death)
   e. Prevent liver damage

9. Which would indicate effective CPR?

a. Improved color
b. Detectable pulse during compressions
c. Pupils constrict
d. All of the above

10. With a person who has drowned, one should not begin mouth-to-mouth resuscitation until an effort has been made to drain or suction most of the water from his lungs.

a. True b. False

11. If a lone rescuer finds a non-breathing, pulseless accident victim lying on his face in the road, and he suspects that the victim has a back injury, what should he do?

a. Turn the victim as a unit and begin CPR
b. Turn the victim's head to one side and begin CPR
c. There is nothing he can do until help arrives
d. Leave the victim in his present position and do whatever he can to apply the principles of CPR

12. Under which of the following circumstances may a non-physician discontinue CPR?

a. When the rescuer thinks the patient will not survive
b. When the rescuer suspects that the victim may suffer permanent brain damage
c. When the rescuer is exhausted and unable to continue
d. When an ambulance attendant states that the victim is dead

13. When can the lay rescuer turn over the responsibility of maintaining CPR?

a. Anytime an ambulance arrives
b. Anytime the police arrives
c. When there is reasonable assurance that the CPR effort will be continued by qualified and capable individuals

14. Sometimes mouth-to-mouth breathing is all that it takes to revive an unconscious person.

a. True b. False

15. Incorrect placement of your hands during cardiac compression may lead to:

a. Punctured lung
b. Punctured heart
c. Lacerated liver
d. Fractured ribs
e. All of the above