DUMPSARENA

Advanced Cardiac Life Support

Test Prep ACLS

Version Demo

Total Demo Questions: 15

Total Premium Questions: 354

Buy Premium PDF

https://dumpsarena.co

sales@dumpsarena.co

sales@dumpsarena.co
dumpsarena.co

QUESTION NO: 1

You are evaluating a patient with 15-minute duration of chest pain during transportation to the emergency department. He is receiving oxygen, and 2 sublingual nitroglycerin tablets have relieved his chest discomfort. He has no complaints but appears anxious. Blood pressure is 130/70 mmHg. You observe the above rhythm on the monitor and your next action is

A. Give atropine 0.5 mg IV

B. Initiate transcutaneous pacing (TCP)

C. Continue monitoring patient, prepare for TCP

D. Administer nitroglycerin 0.4 mg SL

E. Start epinephrine 2 to 10 ug/min and titrate

ANSWER: C

QUESTION NO: 2

Which of the following patients require intubation?

A. conscious with a suspected stroke

B. unconscious with no gag reflex

C. normotensive with third degree heart block

D. cardiac arrest after three unsuccessful countershocks

ANSWER: B D

QUESTION NO: 3

After placement of an endotracheal tube, ventilate:

A. at 10-15 breaths per minute

B. after the 5th compression

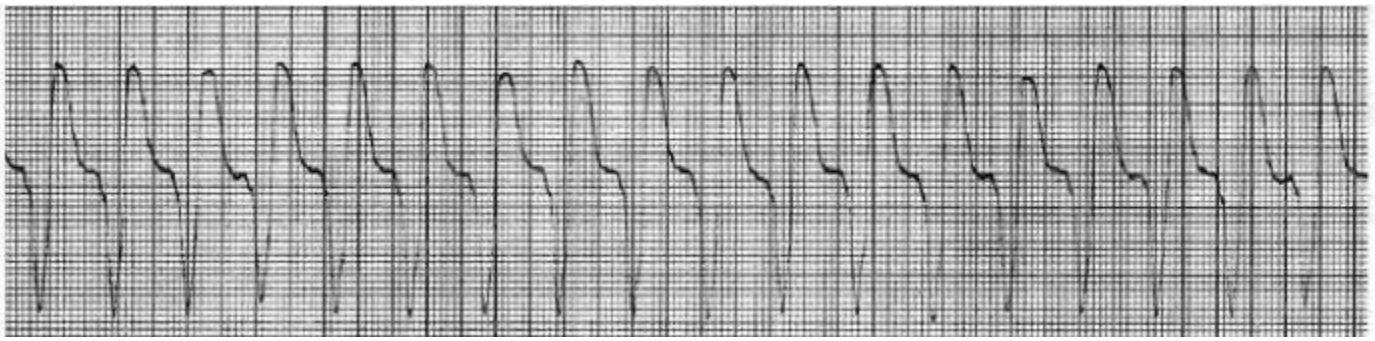
C. asynchronously to cardiac compressions

D. with room air

ANSWER: A C

QUESTION NO: 4

A patient complains of shortness of breath and chest pain radiating to the neck. Blood pressure is 80/50 mm Hg and the respiratory rate is 40 per minute. Oxygen and an IV has been started. The monitor shows the following rhythm. What should the next treatment be?



A. carotid massage

B. lidocaine

C. sedation, then synchronized cardioversion

D. adenosine

ANSWER: C

QUESTION NO: 5

This patient suddenly collapsed and is poorly responsive. The patient has a weak carotid pulse. A cardiac monitor, oxygen, and an intravenous line have been initiated. The code cart with all drugs and pF transcutaneous pacer is immediately available. Next you would

A. Initiate dopamine at 10 to 20 ug/kg per minute and titrate heart rate

B. Give atropine 1 mg IV up to a total dose of 3 mg

C. Initiate epinephrine at 2 to 10 ug per minute and titrate heart rate

D. Initiate dopamine at 2 to 10 ug/kg per minute and titrate heart rate

E. Begin transcutaneous pacing

ANSWER: E

QUESTION NO: 6

What is the evaluation and treatment for a patient with pulseless electrical activity? CPR, rapid fluid challenge, oxygen, check breath sounds bilaterally, and give epinephrine.

The three most treatable causes of pulseless electrical activity are:

A. massive pulmonary embolism

B. cardiac tamponade

C. hypovolemia

D. tension pneumothorax

E. massive myocardial infarction

ANSWER: B C D

QUESTION NO: 7

Identify the rhythm by selecting the best single answer:

A. Normal sinus rhythm

B. Sinus tachycardia

C. Sinus bradycardia

D. Reentry supraventricular tachycardia

E. First-degree AV Block

F. Second-degree AV Block (Mobitz 1 Wenckebach)

G. Second-degree AV Block (Mobitz II Block)

H. Third-degree AV Block

I. Atrial fibrillation

J. Atrial flutter

K. Monomorphic ventricular tachycardia

L. Polymorphic ventricular tachycardia

M. Coarse ventricular fibrillation

N. Fine ventricular fibrillation

O. Agonal rhythm/asystole

P. Pulseless electrical activity

ANSWER: D

QUESTION NO: 8

A patient has sinus bradycardia with a rate of 36 per minute. Atropine has been administered to a total dose of 3 mg. A transcutaneous pacemaker has failed to capture. The patient is confused and blood pressure is 100/60 mmHg. Which of the following is now indicated?

A. Start epinephrine 2 to 10 ug/min

B. Start dopamine 10-20 ug/kg per minute

C. Give normal saline bolus 250 ml_ to 500 ml_

D. Give additional 1 mg atropine

ANSWER: A

QUESTION NO: 9

Greater defibrillating current is expected with which of the following?

A. successive countershocks

B. firm paddle pressure

C. use of conductive medium

D. lower body weight

ANSWER: A B C

QUESTION NO: 10

A 35-year-old woman presents to the emergency department with a chief complaint of palpitations. She has no chest discomfort, shortness of breath, or lightheadedness. Which of the following is indicated first?

A. Give adenosine 3 mg IV bolus

B. Give adenosine 12 mg IV slow push (over 1 to 2 minutes)

C. Perform vagal maneuvers

D. Give metoprolol 5 mg IV and repeat if necessary

ANSWER: C

QUESTION NO: 11

Intubation with an endotracheal tube:

A. allows adjunctive ventilatory equipment to be used effectively

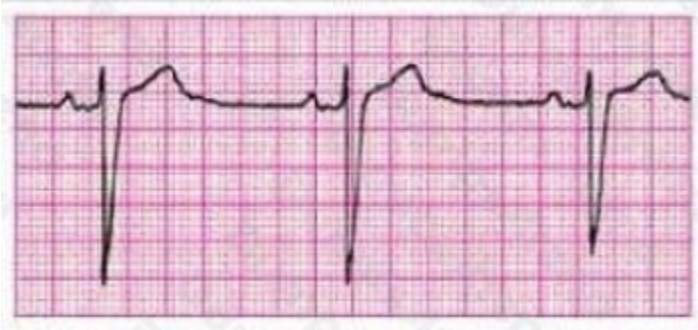
B. decreases the risk of aspiration

C. is the first priority in ventricular fibrillation

D. if performed improperly may result in only one lung being inflated

ANSWER: A B D

QUESTION NO: 12



Identify the rhythm by selecting the best single answer:

A. Normal sinus rhythm

B. Sinus tachycardia

C. Sinus bradycardia

D. Reentry supraventricular tachycardia

E. First-degree AV Block

F. Second-degree AV Block (Mobitz 1 Wenckebach)

G. Second-degree AV Block (Mobitz II Block)

H. Third-degree AV Block

I. Atrial fibrillation

J. Atrial flutter

K. Monomorphic ventricular tachycardia

L. Polymorphic ventricular tachycardia

M. Coarse ventricular fibrillation

N. Fine ventricular fibrillation

O. Agonal rhythm/asystole

P. Pulseless electrical activity

ANSWER: C

QUESTION NO: 13

Bag-valve-mask devices:

A. may be used by untrained individuals

B. with high flow and a reservoir deliver close to 100% oxygen

C. aredifficultfor one person to use effectively

D. usually provide greater tidal volume than mouth-to-mask ventilation

ANSWER: B C

QUESTION NO: 14

Transcutaneous cardiac pacing is appropriate for the following situations:

A. sinus bradycardia

B. sinus bradycardia with hypotension

C. complete heart block with pulmonary edema

D. prolonged asystole

ANSWER: A B

QUESTION NO: 15

Identify the rhythm by selecting the best single answer:

A. Normal sinus rhythm

B. Sinus tachycardia

C. Sinus bradycardia

D. Reentry supraventricular tachycardia

E. First-degree AV Block

F. Second-degree AV Block (Mobitz 1 Wenckebach)

G. Second-degree AV Block (Mobitz II Block)

H. Third-degree AV Block

I. Atrial fibrillation

J. Atrial flutter

K. Monomorphic ventricular tachycardia

L. Polymorphic ventricular tachycardia

M. Coarse ventricular fibrillation

N. Fine ventricular fibrillation

O. Agonal rhythm/asystole

P. Pulseless electrical activity

ANSWER: D