

Name: _____

Date: _____

Answer Key: Shatter Crisis Hurdles: Advanced First Aid for 12th Grade

Evaluate complex trauma scenarios and synthesize life-saving interventions for tension pneumothorax, toxicological emergencies, and mass casualty triage.

1. A victim of a high-velocity collision presents with tracheal deviation, distended neck veins, and absent breath sounds on the right side. Which intervention is the immediate clinical priority?

Answer: B) Needle decompression of the pleural space

Tracheal deviation and absent breath sounds indicate a tension pneumothorax, a life-threatening condition requiring immediate decompression to resolve intrathoracic pressure.

2. In a Mass Casualty Incident (MCI), using the START triage algorithm, a victim who is breathing but unresponsive to simple commands should be tagged with the color _____.

Answer: C) Red

Under the Simple Triage and Rapid Treatment (START) protocol, victims who cannot follow simple commands despite adequate perfusion/respiration are prioritized as 'Immediate' (Red).

3. True or False: When treating a victim of an suspected opioid overdose who is in respiratory arrest, the administration of Naloxone takes precedence over performing rescue breaths or CPR.

Answer: B) False

Basic Life Support (BLS) guidelines emphasize maintaining oxygenation and circulation first; ventilation and compressions are the primary life-saving measures while Narcan is being prepared.

4. During a wilderness excursion, a peer develops 'The Mumbles, Stumbles, and Grumbles,' showing signs of profound lethargy and a core temperature of 93°F. What is the most critical contraindication in their care?

Answer: C) Vigorous rubbing of the extremities to stimulate blood flow

Vigorous rubbing can trigger 'afterdrop' or ventricular fibrillation in moderate-to-severe hypothermia victims by sending cold, acidotic blood from the extremities back to the heart.

5. A patient exhibits pinpoint pupils, bradycardia, and excessive salivation after exposure to an unknown agricultural chemical. Which toxidrome is most likely present?

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Answer: C) Cholinergic

The symptoms (SLUDGE: Salivation, Lacrimation, Urination, Defecation, GI upset, Emesis) are classic indicators of cholinergic toxicity, often caused by organophosphate pesticides.

6. When assessing a burn survivor, the 'Rule of Nines' is used to estimate the Total Body Surface Area (TBSA). An adult with burns covering the entire right arm and the entire front of the torso has a TBSA percentage of _____ %.

Answer: B) 27%

According to the Rule of Nines, the entire arm accounts for 9% and the anterior torso (chest and abdomen) accounts for 18%, totaling 27%.

7. True or False: In the event of an arterial bleed in a limb that is not controlled by direct pressure, a tourniquet should be applied distal to the wound site.

Answer: B) False

Tourniquets must be applied proximal to the wound (between the wound and the heart) to effectively occlude arterial blood flow.

8. Which physiological compensatory mechanism explains why a patient in the early stages of compensated hemorrhagic shock might have a normal blood pressure but an elevated heart rate?

Answer: C) Release of catecholamines (epinephrine/norepinephrine)

In compensated shock, the body releases catecholamines to increase heart rate and induce peripheral vasoconstriction, maintaining blood pressure despite volume loss.

9. When managing an evisceration (an injury where organs protrude through the abdominal wall), the standard of care is to cover the organs with a _____ dressing.

Answer: B) Moist, sterile

Protruding organs must be kept moist to prevent tissue necrosis; a sterile dressing soaked in saline is the gold standard before covering with an occlusive layer.

10. True or False: Hypovolemic shock can occur due to severe dehydration even in the absence of external blood loss.

Answer: A) True

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Hypovolemia refers to low fluid volume in the blood; this can be caused by hemorrhage, but also by excessive sweating, vomiting, or diarrhea.