

## Immediate Life Support pre-course reading & Multiple Choice Quiz (MCQ)

Thank you for registering to join us for your ILS training.

This document contains the pre-course Multiple Choice Quiz which, **must be completed** before participating in the course. The quiz provides evidence of the core knowledge required to successfully complete the ILS course.

**Failure to complete the MCQ and associated reading may result in you having to leave the course and re-book on an alternative date.**

To assist you in completing this quiz, you have been provided with an ILS manual. Whilst we would recommend reading the manual in full, the quiz questions relate to the following chapters within the ILS manual:

- Improving patient outcomes from cardiac arrest and deterioration (Chapter 1)
- Recognition of the Deterioration and preventing cardiorespiratory arrest (Chapter 2)
- In-hospital resuscitation (Chapter 3)
- Advanced Life Support (Chapter 4)
- Airway management and ventilation (Chapter 5)
- Defibrillation (Chapter 7)
- Pulse oximetry and oxygen therapy (Chapter 9)

If you do not have a copy of the ILS manual please request this from your course administrator (the person that arranged your ILS course) at least 2 weeks before your course date.

### Multiple Choice Quiz (MCQ) Instructions

**All of the answers to the MCQ can be found in the ILS Manual.**

Mark each question on the answer sheet either True or False with an 'X'

For example, for the following question:

#### **1 During cardiopulmonary resuscitation:**

- a. a ratio of 2 ventilations to 30 cardiac compressions is correct
- b. chest compressions should be 3 cm deep
- c. use one hand for chest compressions
- d. give chest compressions at a rate of about 2 per second

The answer grid should be marked:

Question	True	False
1a	X	
1b		X
1c		X
1d	X	

## MCQ Questions

### 1. During cardiopulmonary resuscitation:

- a) A ratio of 2 ventilation breaths to 15 cardiac compressions is correct
- b) Check for normal breathing for less than 10 seconds to diagnose cardiac arrest
- c) The hands should be positioned over the upper third of the sternum to perform chest compressions
- d) Chest compressions should be 5-6 cm deep at a rate of 100-120 compressions per minute

### 2. Early warning scoring systems:

- a) Can be used to help detect patients who are deteriorating
- b) Must be calculated before you call for help when you think a patient is about to have a cardiac arrest
- c) Work best if the early warning score is acted upon early using an escalation protocol to call for help
- d) Use the patient's observations (e.g. blood pressure, pulse, respiratory rate) to calculate a score

### 3. Chest compressions:

- a) Must not be interrupted whilst planning what to do next
- b) Are not interrupted for ventilations once the trachea has been intubated
- c) Should be given before ventilations when starting cardiopulmonary resuscitation (CPR)
- d) Should be started in any unconscious patient

### 4. The following indicates a cardiac arrest and the need to start CPR:

- a) Normal breathing in an unresponsive individual
- b) Purposeful movements and eye opening
- c) Occasional gasps in a patient who is unconscious and unresponsive
- d) The inability of an inexperienced rescuer to easily feel a pulse in a drowsy patient who is breathing normally

### 5. During cardiac arrest:

- a) A two person bag mask technique can be used for ventilation
- b) Potential reversible causes of cardiac arrest include hypoxia, hyperlipidaemia, hypothermia and toxins
- c) Give 1 mg IV adrenaline after CPR has started and further doses every 3-5 minutes in a patient with an initial non-shockable rhythm
- d) Only rescuers trained to recognize cardiac arrest rhythms should use an automated external defibrillator (AED)

### 6. Oxygen:

- a) Should be given to patients during CPR
- b) Should always be given to sick patients, including those with a normal arterial oxygen saturation when breathing room air
- c) Must not be given to patients with chronic obstructive pulmonary disease
- d) Therapy should be adjusted to maintain a normal arterial oxygen saturation

**7. Regarding communication between team members:**

- a) "SBAR" stands for situation, background, assessment, recommendation
- b) "RSVP" stands for response, story, vital signs, plan
- c) "SBAR" or "RSVP" should only be used by the most senior member of staff present
- d) "SBAR" or "RSVP" are effective communication tools for discussing sick patients with clinical colleagues

**8. Appropriate treatment for a patient with acute coronary syndrome can include:**

- a) Diamorphine 2.5 mg given intravenously for pain relief
- b) High flow oxygen by facemask if oxygen saturation is low
- c) Aspirin 300 mg orally
- d) Glyceryl Trinitrate (GTN)

**9. Regarding chest compressions:**

- a) The correct hand position for chest compressions is the middle of the sternum
- b) Compressions should be at a rate of about two per second with a depth of 5 to 6 cm
- c) Defibrillation pads should be applied whilst chest compressions are ongoing
- d) The person doing chest compressions should switch every 4 to 5 minutes to ensure they do not get tired

**10. When managing an airway:**

- a) The correct size of oropharyngeal airway can be estimated by selecting one with a length equal to the vertical distance between the patient's incisors and angle of the jaw
- b) An oropharyngeal airway can be used in a conscious patient
- c) A nasopharyngeal airway can cause a nose bleed
- d) A chin lift or jaw thrust may still be required after the insertion of an oropharyngeal airway

**11. With reference to defibrillation:**

- a) Defibrillation should be delayed to secure intravenous access
- b) An automated external defibrillator (AED) allows rapid defibrillation in areas where staff have limited knowledge of rhythm recognition
- c) External defibrillator pads should not be used if the patient has an implanted cardiovascular implanted electronic device (ICD)
- d) There should be minimal interruptions in chest compressions

**12. Pulse oximetry:**

- a) Assesses the patient's venous oxygen saturation
- b) Provides a good guide to the adequacy of the patient's ventilation (breathing)
- c) Accuracy can be affected if the patient is wearing nail varnish
- d) Provides a reliable signal during CPR

## MCQ Answer Sheet

### Instructions:

Mark each question either **True** or **False** with an 'X' (see question paper for example)

Candidate name \_\_\_\_\_

QUESTION	TRUE	FALSE		QUESTION	TRUE	FALSE
1a				7a		
1b				7b		
1c				7c		
1d				7d		
2a				8a		
2b				8b		
2c				8c		
2d				8d		
3a				9a		
3b				9b		
3c				9c		
3d				9d		
4a				10a		
4b				10b		
4c				10c		
4d				10d		
5a				11a		
5b				11b		
5c				11c		
5d				11d		
6a				12a		
6b				12b		
6c				12c		
6d				12d		