**Advanced Cardiac Life Support** 

**Test Prep ACLS** 

**Version Demo** 

**Total Demo Questions: 15** 

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#### **QUESTION NO: 1**

Dopamine infused at greater than 10 mcg/kg/min will cause:

- A. increased myocardial contractility
- B. peripheral arterial vasoconstriction
- C. renal artery vasoconstriction
- D. respiratory depression

#### **ANSWER: A B C**

#### **QUESTION NO: 2**

In rescuing a near drowning victim, the rescuer should:

- **A.** compress the chest to drain water from breathing passages.
- B. assure their own safety.
- C. stabilize the cervical spine if a diving accident.
- **D.** start rescue breathing.

#### **ANSWER: BCD**

# **QUESTION NO: 3 - (FILL BLANK)**

ORRECT TEXT T/F: Beta-blockers depress the pumping function of heart muscle.

# **ANSWER: True**

**Explanation:** 

# **QUESTION NO: 4 - (FILL BLANK)**

How does the pharynx in an adult and child differ?

ANSWER: Infant and children's tongues take up proportionally more space in the mouth than adults do.

## **Explanation:**

#### **QUESTION NO: 5**



A patient with a possible ST-segment elevation MI has ongoing chest discomfort. Which of the following would be a contraindication to the administration of nitrates?

- A. Use of phosphodiesterase inhibitor within 12 hours
- B. Left ventricular infarct with bilateral rates
- C. Blood pressure greater than 180 mmHg
- D. Heart rate 90 per minute

**ANSWER: B** 

# **QUESTION NO: 6 - (FILL BLANK)**

#### ORRECT TEXT

A patient with pulseless electrical activity is undergoing CPR. Exam reveals distended neck veins. What diagnosis should be considered and how should it be ruled out?

ANSWER: Cardiac tamponade should be ruled out by performing pericardiocentesis.

## **Explanation:**

# **QUESTION NO: 7**

What are the end points of a procainamide loading infusion in the non-arrest situation?

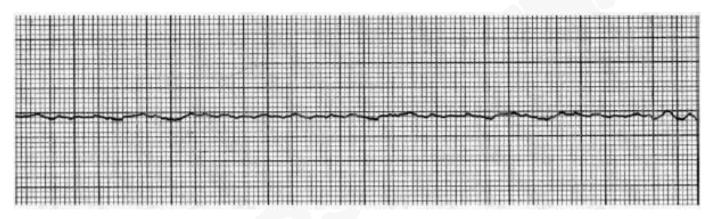
A. pretreatment QRS complex is widened by 50%

- **B.** hypotension
- C. 17 mg/kg drug has been injected
- D. the dysrhythmia is suppressed
- E. All of the above

# **ANSWER: E**

#### **QUESTION NO: 8**

You are performing synchronized cardioversion when the following rhythm suddenly appears. What is the recommended immediate treatment?



- A. lidocaine 100 mg IV bolus
- B. begin CPR
- C. unsynchronized countershock at 200 J
- D. synchronized shock at 200 J

# **ANSWER: C**

# **QUESTION NO: 9**

Regarding epinephrine, which of the following statements are true?

- A. increases coronary perfusion
- B. IV bolus dose is 1 mg q 3-5 minutes
- C. treatment for hypotensive ventricular tachycardia



D. increases cerebral blood flow during CPR

# **ANSWER: A B C**

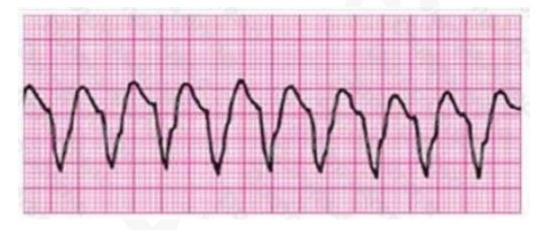
# **QUESTION NO: 10**

Ventricular fibrillation:

- A. may be mimicked by artifact on the monitor
- B. may produce a peripheral pulse
- C. produces no cardiac output
- D. treated with early defibrillation

# ANSWER: A C D

# **QUESTION NO: 11**

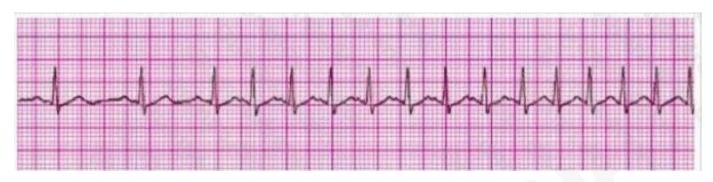


You are monitoring a patient. Chest discomfort has been relieved with sublingual nitrates and morphine sulfate 4 mg IV. He suddenly has the above persistent rhythm. You ask about symptoms and he reports mild palpitations, but otherwise he is clinically stable with unchanged vital signs. Your next action is:

- A. Give sedation and perform synchronized cardioversion
- B. Administer amiodarone 150 mg over 10 minutes; seek expert consultation
- C. Give immediate synchronized shock
- D. Give immediate unsynchronized shock
- E. Administer magnesium sulfate 1 to 2 g IV diluted in 10 mL D5W given over 5 to 20 minutes

# **ANSWER: B**

# **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: D**

#### **QUESTION NO: 13**

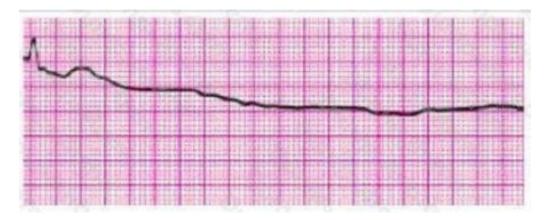


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- M. Coarse ventricular fibrillation
- N. Fine ventricular fibrillation
- O. Agonal rhythm/asystole
- P. Pulseless electrical activity

**ANSWER: C** 

**QUESTION NO: 14** 



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: 0** 

# **QUESTION NO: 15**

An incubated patient develops sudden onset narrow complex tachycardia, at a rate of 130 beats per minute.



Vital signs are 0-0-0. CPR is in progress. The most important action is:

- **A.** find the cause of the arrest
- **B.** give 1 mg epinephrine IVP
- C. give verapamil 5 mg IVP
- **D.** cardiovert at 360 J

**ANSWER: B**