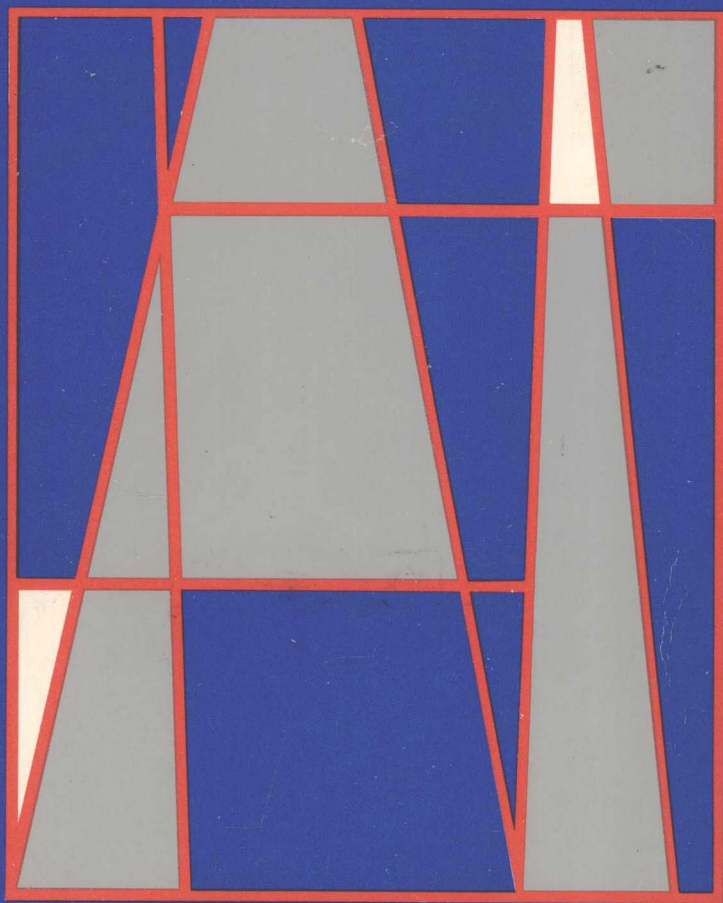


SHERYLE L. WILLS • SHARYN A. TREMBLAY

PARAMEDIC REVIEW



**A manual for
examination preparation**

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SHERYLE L. WILLS, R.N., R.E.M.T., B.S.N., J.D.

Emergency and Critical Care Education:
Curriculum Development and Implementation,
Fort Lauderdale, Florida

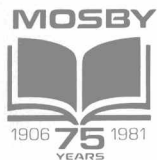
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To
Angela
and
Michele

Our joy today
Our hope for tomorrow

Preface

The emergency medical technician (EMT) program is one of the most rapidly expanding programs in the allied-health field. The role of the EMT in the health care team has matured to the level of EMT-A and EMT-paramedic in many states. Appropriate legislation has been passed to standardize practice through certification examinations and criteria for the mobile intensive care unit.

Unfortunately, the level of the texts and review texts has not matured as rapidly. Therefore, it has been our aim to prepare a review text for the EMT-paramedic that reflects understanding of the behavioral objectives set forth in the nationally approved curriculum. Furthermore, it has been our aim to prepare a review that, through integration of the natural and social sciences, is applicable to any member of the health care team interested in emergency medicine.

Through the use of a question-and-answer format, the reader can become acquainted with objective questions likely to appear on a certifying examination and is provided with im-

mediate feedback on the level of preparation required.

The examinations included in the appendixes are to be taken after the reader has read and completed the review questions within the text. Testing should be done under "examination conditions" and within the time frames indicated. Upon completion of Practice Examination A, the reader should review the areas missed by referring back to the appropriate part of the text. Positive review at this point in study is important! When the reader has strengthened his or her weak areas, Practice Examination B may be used to reevaluate progress. It may be advantageous to the reviewer's self-confidence to retake one of the examinations a few days before taking the state test.

It is our genuine hope that this text will be useful for self-evaluation, not only before a certifying examination but throughout the paramedic's career.

Sheryle L. Wills
Sharyn A. Tremblay

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And finally, to Michael, without whose support, help, and faith in me I would not “be”—thank you.

S.L.W.
S.A.T.

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How to prepare for and take an examination

WHY TAKE A TEST

Ours is a society of competition, regulations, and consumer protection. In essence, ours is a society of measuring up! And the method by which we judge who has weathered the competition, what is safe procedure, and who may place themselves before the public as a professional is by the test. Testing is the tool used to measure competency or fitness for a particular purpose.

PHYSIOLOGICAL RESPONSES TO A TEST

Testing is often the social and governmental yardstick for measuring success. Therefore, the word *test* causes many physiological and emotional changes within the body. Test taking or even the knowledge of a future examination causes stress and anxiety. The body responds to this anxiety as a threat to its calm, equal state. Although each of us may have mechanisms for coping with stress and anxiety, the body always reacts, in varying degrees, by preparing to “fight it out” or “fly away.” This reaction is known as the *general adaptation system* and is actually caused by the dominance of the sympathetic over the parasympathetic nervous system. Norepinephrine is secreted and blood pressure rises. Epinephrine is secreted and the central nervous system is activated; cardiac output increases; oxygen exchange is enhanced; pupils dilate, increasing vision; and ACTH is

produced, which indirectly allows for high-energy fuel to be released by the liver.

This type of reaction can be beneficial if harnessed and used to a person’s benefit. Thus, the statement that a small amount of anxiety and stress can be helpful is true. But, left uncontrolled, the continued dominance of the sympathetic nervous system can result in permanent emotional and physical harm, such as the inability to concentrate or maintain productivity and the development of an ulcer. Therefore, preparation for an anxiety- or stress-producing situation allows the individual to harness this powerful system and use it beneficially.

ANATOMY AND PHYSIOLOGY OF A MULTIPLE CHOICE TEST

The multiple choice test is an efficient tool to measure competency in an objective format. Its main objective is to discriminate between the poor learner and the good learner. However, the multiple choice test is not just a rote memory examination tool but can also assess reasoning ability. This fact is exemplified by the situational question in which the test taker must make logical assumptions that lead to a course of action.

The advantages of a multiple choice test are that:

1. It is objective.
2. Guessing is reduced.

3. It can be made accurate enough to consistently measure knowledge.

The disadvantages are that:

1. The person constructing the exam has a tendency to test for retention of facts only.
2. It is difficult to find good detractors or responses.

A standard multiple choice test item begins with an introductory statement that presents a problem or asks a question. It is followed by four or five "detractors," or choices. Only one answer is correct, and it is the examinee's task to choose the correct response.

By understanding how a multiple choice examination is correctly structured, the test taker can more logically approach the examination. It is really a giant puzzle for which the pieces have been fitted by a test constructionist. The test constructionist uses the following rules in putting a test together:

1. The responses should be chosen so that they seem likely.
2. There should never be more than five or less than three responses provided.
3. Speech patterns should be consistent to avoid giving clues (as might *a* or *an* or singulars and plurals).
4. Each of the responses should be of about the same length.
5. The right answer should be varied so that a pattern is not established.

Therefore, the test taker knows to be aware of:

1. Words that serve as clues.
2. Responses that are not consistent in length.
3. Detractors that are illogical or have no basis in fact.

One step in successful test taking is understanding the why or how of a respective testing technique. This understanding will help the test taker to conceptualize the objectives of the examination and selectively approach the answers.

THE SUCCESS METHOD OF TAKING TESTS

Taking an important examination requires an organized effort on the part of the examinee. Absolutely *nothing* will replace organization and structured study.

Study should begin sufficiently early, so that work and sleep habits will not be detrimentally altered. *Organize* your study time by putting in writing a timetable that includes material to be covered, daily study time, and self evaluation.

Then, begin by outlining the course from your notes and textbooks. That should give you the "big picture." At a single glance, you will be able to visualize how different concepts fit together and what aspects you need to research more. Once the outline has been completed, use it daily. Read it fast and slowly. Use it as a means to place concepts, facts, and protocols in their respective places. Then study a specific part of the outline in depth.

Maintaining an established study routine is important. But just as important are scheduled breaks for exercise and refreshment. If a break is not scheduled, but you are getting nowhere, stand up and stretch for 3 to 5 minutes and begin again. Do not use this as an excuse to shorten your study time! The day before an examination should be used for review and relaxation. If you have followed a study timetable, then you know the material. And if you did not, it is too late to learn it now. Eat well, relax, and review your routine. Go to bed early and get a good night's sleep. Examination day should begin with a well-balanced breakfast. Enjoy it and take your examination. Studying on the morning of an examination will only make you nervous and tend to make you question your knowledge of the material.

Once at the examination site, do not panic! Exude confidence. You have studied hard and you know the material. Be sure to read the directions carefully. Missing an important direction could cost you points. Quickly skim the

examination and plan your time accordingly. How many questions are there? How much time can you devote to each? Set your watch on the desk in front of you and begin.

Preread or skim a question first. Try to underline or eyeball important words. If you can, supply the correct answer before reading the alternatives. Select but do not mark the best response. Then, actively read the question. Ask yourself what the examiners want to know, and mark the best response. If you do not know the best response, stay calm. Take two deep breaths and use your common sense. If it is a Latin word, think of what the Latin root means. If it is a word you are unfamiliar with, break it down into its parts.

Do not take more than your allotted time on any one question. Go on and return to that one later. Should you guess? If you will not be penalized for guessing, by all means guess! You can enhance your chances by eliminating the detractors that you know are wrong. Then, guess. After finishing all of the questions, go over the test again. But think very carefully

before you change an answer. Usually your first response is the best response. You should recheck the questions because you could have made a sloppy mark that will nullify your answer or carelessly marked *a* instead of *b*. Always recheck if time permits. Take a final look at your paper and then confidently hand it in.

Do not second guess yourself once you have turned in the test. Forget it and wait for the results. Your nervous system will thank you for this kindness!

Remember, a method is needed to prepare for, to take, and to pass an examination. Try the SUCCESS method:

Select daily study time.

Utilize time efficiently both before and during the test.

Carefully read all directions.

Completely preread before actively reading items.

Evaluate and recheck answers.

Stay calm and confident.

Stroll home and forget the test until results arrive.

Duties and responsibilities of the paramedic

DUTIES OF THE PARAMEDIC

1. Which of the following is *not* an activity performed by an advanced-level emergency medical technician (EMT), or paramedic?
 - a. Caring for the vehicle and equipment.
 - b. Maintaining control of the accident scene.
 - c. Operating the vehicle within the perimeters of the law.
 - d. Delegating patient care duties that require the knowledge of a paramedic.

ANSWER: *d*

The advanced-level EMT, or paramedic, has an obligation to the public to give competent emergency care. In order to meet this responsibility, the paramedic performs many activities. The activities are a combination of medical skills, mechanical skills, and behavioral skills. It is the duty of the paramedic to maintain these skills at a level that produces safe patient care. Therefore, the paramedic must never delegate duties that require specialized knowledge and skills if that would compromise patient care.

2. Paramedics have the responsibility for providing emergency care to the community to the best of their ability. Which of the following is *not* a part of the paramedic's prehospital responsibilities?
 - a. Communicating concise, relevant physical findings to the physician.
 - b. Maintaining accurate records.

- c. Prescribing emergency medications for the victim of sudden illness.
- d. Administering emergency medications under medical supervision.

ANSWER: *c*

The paramedic has the responsibility for giving the public the best emergency care possible. This responsibility requires that the advanced EMT:

1. Evaluate and control the scene of the accident.
2. Evaluate the patient.
3. Communicate pertinent physical findings to the physician.
4. Provide competent care for the patient.
5. Safely extricate the patient and prepare for transport.
6. Prepare accurate records.
7. Maintain the vehicle and equipment.

The responsibilities of a paramedic are many, but they do not encompass prescribing medications. Prescribing any type of drug is a medical responsibility and not a role of the paramedic.

3. The emergency medical services (EMS) system is made up of many parts. Which of the following are components of the EMS system?
 1. Treatment according to local standards of care.
 2. Transportation.
 3. Communication.
 4. Planning.
 5. Research.
 6. Evaluation.

- a. 1, 2, 3.
- b. 1, 2, 5.
- c. All but 6.
- d. All of the above.

ANSWER: *d*

An EMS system is made up of many parts. Each part is necessary to the smooth functioning of the entire system. The 15 components of an EMS system are:

- 1. Manpower.
- 2. Training.
- 3. Communications.
- 4. Transportation.
- 5. Hospital emergency facility.
- 6. Critical care units.
- 7. Public safety agencies.
- 8. Consumer participation.
- 9. Accessibility to care.
- 10. Transfer of patients.
- 11. Standardized patient record keeping.
- 12. Public information and education.
- 13. Independent review and evaluation.
- 14. Disaster linkage.
- 15. Mutual aid agreements.

LEGAL RESPONSIBILITIES OF THE PARAMEDIC

- 4. The Medical Practice Act is legislation that:
 - a. Establishes the acceptable minimum qualifications of those who may perform various medical services.
 - b. Defines and establishes categories of hospitals and services.
 - c. Establishes a means of certification for the different categories of health providers.
 - d. *a and c.*

ANSWER: *d*

The Medical Practice Act is legislation promulgated to define the minimum qualifications required for those who render medical services. In order to demonstrate that these standards have been met, a certifying process is necessary. Therefore, the act also establishes a means of certification for those providing medical care.

- 5. The Good Samaritan Act was developed to protect:
 - a. The public from negligent medical care rendered in an emergency situation.
 - b. Those who render competent aid when they are otherwise not obligated to act.
 - c. Hospital and emergency personnel who render competent aid while on duty.
 - d. *b and c.*

ANSWER: *b*

The Good Samaritan Act is legislation developed to encourage the public, including health professionals, to render aid to the injured. However, the rescuer must be aware of two basic rules:

- 1. Liability to the patient can result only where omissions or commissions of the rescuer have proximately caused the injury to the patient.
- 2. There is no immunity for a negligent act.

A person, including the licensed health care provider, who in good faith and without pay renders emergency care at the scene of an accident or outside of a hospital will not be held civilly liable if the victim did not object and the rescuer acted as a reasonable and prudent person under the circumstances.

- 6. Individual state legislation for emergency medical services may differ. However, an important point to remember is that:
 - a. The EMT-P should act according to established procedures.
 - b. No paramedic has been named as a defendant in a malpractice suit.
 - c. The Emergency Medical Services legislation protects the paramedic from liability.
 - d. The Good Samaritan Act immunizes the paramedic from all libelous acts.

ANSWER: *a*

EMS legislation is necessary to protect the consumer from incompetent emergency care. These acts define the EMS system in their states and, furthermore, establish guidelines for standards of care. Therefore, the paramedic is pro-

tected from any suit for nonnegligent acts if the paramedic has complied with the requirements of the statute. In other words, paramedics are protected if they have met the standard of care by acting in accordance with established local procedures.

7. The paramedic has a responsibility for ensuring that the emergency vehicle:
 - a. Is in safe operating condition.
 - b. Meets the state standards for emergency vehicles.
 - c. *a and b.*
 - d. None of the above.

ANSWER: C

Laws in most states require that emergency vehicles meet specific design and equipment requirements. The paramedic has a duty to the consumer to ensure that state standards are met. If the paramedic knows or has reason to know that the vehicle is below legislative standards, it is the paramedic's duty to report this information. Continuing to use a substandard vehicle without reporting the violation may result in liability for any damage proximately caused by operating the substandard vehicle.

8. A paramedic is told to obtain an informed consent from the patient. This means that the patient:
 - a. Must be mentally competent.
 - b. Must understand the treatment for which consent is being given.
 - c. Must be over 21 years of age.
 - d. *a and b.*

ANSWER: d

Consent means that the individual has given permission for the paramedic to render aid. However, in order for the consent to be legally effective, the patient must understand the nature and extent of the treatment to be given. This type of consent is known as *informed consent*. It follows that, in order to understand, the patient must have sufficient mental capacity to make the decision to give informed consent. The age of majority and, therefore, legal ability to give informed consent will vary from state to state.

9. *Implied consent* may be substituted for informed consent when:
 - a. The paramedic receives consent from a police officer.
 - b. An unconscious victim is in a life-threatening situation.
 - c. A neighbor gives consent to treat a mentally retarded adult.
 - d. *a and b.*

ANSWER: b

10. The paramedic is said to have abandoned a patient if the paramedic:
 - a. Leaves the patient momentarily to treat another.
 - b. Delegates patient care to a registered nurse upon arrival at the emergency department.
 - c. Leaves the patient in the care of a bystander.
 - d. Leaves the patient with a private ambulance to be transported to the hospital.

ANSWER: C

Abandonment is a term used to indicate that patient care has been terminated, without the consent of a patient who is in need of medical care, before competent health personnel assume responsibility for the patient.

11. A physician delegates medical duties through the use of:
 - a. Standing orders.
 - b. Registered nurses and paramedics.
 - c. Protocols.
 - d. *a and c.*

ANSWER: d

A licensed physician may delegate the paramedic to perform certain medical procedures under specific conditions and in special circumstances. The delegation of the physician's practice is accomplished procedurally through the use of standing orders or protocols.

12. Mr. Lynn is unconscious following an automobile accident. The paramedic may treat him without obtaining actual consent. The doctrine of consent to be applied is:
- Informed consent.
 - Consent delegated.
 - Implied consent.
 - Emergency consent.

ANSWER: C

Consent is implied in an emergency situation (see Question 9).

13. Accurate record keeping is essential for:
- Documentation of the findings and the care rendered.
 - Evaluation of the EMS system.
 - Legal documentation for courts.
 - All of the above.

ANSWER: d

Record keeping is an important duty of the paramedic. Records are kept for many purposes. From a medical standpoint, the records will reflect physical findings on the scene and the corresponding care given. Administration is interested in accurate record keeping because it is from records that system evaluation is accomplished. Dates, times, and actions are important for legal documentation.

ETHICAL RESPONSIBILITIES OF THE PARAMEDIC

14. When paramedics are told to demonstrate ethical behavior, they are expected to:
- Follow only written legal guidelines.
 - Act within the profession's accepted standards of right and wrong.
 - Show professional concern for the welfare of others.
 - b* and *c*.

ANSWER: d

Ethics is the science of right and wrong. Each profession has its own code of professional responsibility or ethical behavior. This behavior is designed to demonstrate the profession's concern for the welfare of others in relation to moral duties.

15. The paramedic arrives at the scene to find Mr. Johnson lying under a piece of heavy equipment. The victim's lower torso has been severed at the waist. He is conscious, in shock, and bleeding profusely. You realize survival is unlikely. Ethically speaking, your actions would include:
- Appropriate emergency care.
 - Empathic relations with bystanders.
 - Honest and empathic communication with Mr. Johnson.
 - All of the above.

ANSWER: d

Ethical behavior in this situation involves both physical and emotional support of the victim. There is also a professional duty to alleviate the emotional trauma experienced by those who have witnessed the accident. Paramedics should remember that, legally, their duty is the physical care of the victim. However, ethical behavior requires the professional's concern for the welfare of others. The word *others* in this definition includes both the victim and the others at the scene.

DUTY AND RESPONSIBILITY TO THE DYING PATIENT AND FAMILY

16. Death and dying is an everyday occurrence to the paramedic. However, the paramedic should know that people deal with the death of a loved one:
- By crying.
 - By denying it.
 - In different ways.
 - a* and *b*.

ANSWER: c

Each person is a unique individual who deals with stress in a personal way. Therefore, the paramedic must accept the person and allow the individual an emotional outlet without making judgments.

17. Rescue 1 arrives at the residence of Mr. Apple, who appears to have been dead for several hours. His wife is crying and begging you to save her husband. You recognize Mrs. Apple's denial and know it is:
- Abnormal behavior.
 - A normal response.
 - Hysteria and requires treatment.
 - A delayed reaction to death.

ANSWER: *b*

Denial is an early and common reaction to the death of a loved one. There may even be some underlying guilt for not calling Rescue sooner. The role of the paramedic involves both recognition of the situation and empathic communication.

18. Mrs. Jones has been suffering from a terminal illness for 2 years. She is in cardiac arrest when you arrive. Because of the disease process, you are unable to resus-

citate her. The family accepts her death without crying or apparent grief. You feel that:

- They do not care about Mrs. Jones.
- They have accepted her death.
- This behavior is masked hysteria.
- This behavior is a conversion reaction.

ANSWER: *b*

The paramedic should be familiar with the five stages one goes through in accepting death. They are:

- Denial and isolation.
- Anger.
- Bargaining.
- Depression.
- Acceptance.

This family has had 2 years to work through the stages. Part of a paramedic's role is to comfort, and knowing at what stage of grief or acceptance a person is will guide the paramedic in offering comforting aid.

Psychosocial aspects of emergency care

PSYCHOSOCIAL ASPECTS OF PREHOSPITAL CARE

1. Abnormal behavior may be due to physical disturbances instead of emotional problems. Which of the following physical disturbances may contribute to abnormal behavior?
 1. Neurological trauma.
 2. Hypoglycemia.
 3. Cerebrovascular accident.
 4. Arteriosclerosis.
 5. Severe infection.
- a. 1, 2, 3.
- b. 4, 5.
- c. 1, 2, 3, 4.
- d. All of the above.

ANSWER: *d*

Abnormal behavior may be caused by either a physical disturbance, an emotional problem, or a combination of the two. The paramedic should be familiar with some of the more common causes of behavioral change. Common causes, both emotional and physical, are:

1. Head injury (neurological trauma).
2. Diabetes.
3. Chemical imbalances.
4. Cerebrovascular accidents.
5. Arteriosclerosis.
6. Alcohol and drug abuse.
7. Central nervous system disorders.
8. Severe, generalized infections.
9. Stress situations.
10. True psychiatric disturbances.

2. There has been a tragic accident involving a prominent citizen. The four witnesses are anxious and frightened. Some techniques available to the paramedic for preventing severe anxiety reactions in the witnesses are:
 - a. Removing the witnesses from the scene.
 - b. Delegating simple tasks to the witnesses.
 - c. Tending to the victim because the paramedic's duty is taking care of the victim, not the witnesses.
 - d. *a* and *b*.

ANSWER: *d*

The paramedic should be aware that a normal response to sudden illness or injury is anxiety. Anxiety may be manifested by the victim, witnesses, or bystanders. An anxious bystander may need intervention by the emergency team. Competent scene management can alleviate severe anxiety reactions, thus contributing to better patient care. Techniques available to the paramedic include:

1. Courteously removing persons from the scene.
2. Delegating simple tasks to bystanders.
3. Offering support and empathy.
4. Separating those who, because of anxiety, may be in conflict with one another.

3. Mr. Lynch has just witnessed an accident in which his cousin was injured. When Med 13 arrives on the scene, Mr. Lynch is crying and hysterically yelling, "You've killed him!" The victim is conscious and becoming anxious. Good scene management would include:
- Ignoring Mr. Lynch because he is upset.
 - Delegating a simple task to occupy Mr. Lynch's mind.
 - Courteously removing Mr. Lynch from the scene.
 - Telling Mr. Lynch to be quiet or *he* will kill his cousin.

ANSWER: *c*

A common reaction to anxiety is displaced aggression. However, that does not mean that the behavior can be ignored if it is interrupting patient care. Good scene management would include removing or having the anxious bystander removed from the scene.

4. Crisis situations may also affect the paramedic. In which of the following trying situations may the paramedic's emotions be adversely affected?
- Situations in which compassion and empathy are expressed.
 - Situations in which anger and impatience are directed toward the paramedic.
 - Situations in which sensitivity and sympathy are expressed by bystanders.
 - There is no situation in which the paramedic should be adversely affected.

ANSWER: *b*

Although paramedics are professionals who have been trained to handle emotionally charged situations, they will be adversely affected by some crises. The type of situation that adversely affects any individual paramedic is dependent on that specific individual's mental and emotional status at the time. However, in order to effectively cope with an unpleasant situation, the paramedic

should know that scenes involving strong expressions of anger, impatience, and anxiety may cause the professional to be uncomfortable and anxious.

5. Mr. Scott, a paramedic, arrives on the scene to find a 6-month-old victim of child abuse. The parents are yelling at one another with threats of violence. Finally, the mother breaks down, sobbing convulsively. Mr. Scott feels inadequate and angry. He should realize that:
- This is a normal reaction.
 - This is an unprofessional reaction.
 - He will never be able to maintain his job with those feelings.
 - b* and *c*.

ANSWER: *a*

Feelings of inadequacy and emotional reactions are normal behavior in crisis situations involving anger, impatience, and anxiety. The paramedic should realize that these are normal reactions. In fact, by recognizing both personal and professional limitations, the paramedic can more competently manage the scene and the patient.

6. Which of the following is the best approach to use in dealing with emotionally disturbed persons?
- A quick, unexpected slap to bring them to their senses.
 - Speaking in a louder, though controlled, voice to overcome their aggressiveness.
 - Speaking calmly while aggressively restraining them.
 - None of the above.

ANSWER: *d*

In managing emotionally disturbed patients, paramedics should intervene only to the extent that they feel capable. If, in any given situation, paramedics feel they have reached their professional limitations, they should seek assistance.

Paramedics should be sure to neither overreact nor personally react to any emotional situation. A quiet, controlled voice is the best policy.