

FLORIDA HEART 2020 PALS STUDY GUIDE

Please refer to your current 2020 PALS student text to complete this exercise.

1. A 3-week-old baby has not been feeding well. His BP is 53/39, and capillary refill time is 6 seconds. What is your assessment of this patient?
 - a. The baby is compensating
 - b. The BP is within normal limits
 - c. The infant is hypotensive
2. A toddler is having difficulty breathing. What finding would lead you to believe he has an UPPER airway obstruction?
 - a. Expiratory wheezes
 - b. Decreased expiratory effort and coughing
 - c. Increased respiratory effort with retractions
3. During a pediatric resuscitation event, which action is important during high quality CPR?
 - a. Check the pulse frequently
 - b. Allow the chest to recoil completely
 - c. Perform chest compressions greater than 2"
4. A 10 year old child is involved in a car crash. What symptom indicates the need for immediate intervention?
 - a. Warm, moist skin
 - b. Altered mental status
 - c. BP of 102/45
5. A child is in cardiac arrest and CPR is in progress. V-Fib is showing on the monitor. Defibrillation is delivered initially at 2j/kg. What is the next immediate intervention?
 - a. Checking the pulse
 - b. Checking the rhythm
 - c. Resuming high quality CPR
6. A 6-year-old child who has had fever and cough for several days is becoming increasingly lethargic. He is now grunting and difficult to arouse. His oxygen saturation is 75%. His respiratory rate is 38 and he has bilateral crackles. What finding indicates respiratory failure?
 - a. Respiratory rate
 - b. Shallow respirations
 - c. Oxygen saturation
7. What medication would be the best choice for the previous patient?
 - a. A vasopressor
 - b. An antibiotic
 - c. A dose of Atrovent

8. The maximum time you should check for a pulse before beginning CPR on any patient should be?
 - a. 5 seconds
 - b. 10 seconds
 - c. 15 seconds
9. What is a finding that suggests respiratory distress in a 5-year-old?
 - a. Decreased respiratory effort
 - b. Respiratory rate of 8 per minute
 - c. Audible inspiratory stridor
10. What is the initial dose for defibrillation in pediatrics?
 - a. 50 joules
 - b. 5 joules/kg
 - c. 2-4 joules/kg
11. What is the ratio for chest compressions and breaths on an 8-month-old infant with ONE RESCUER?
 - a. 5 compressions and 1 breath
 - b. 15 compressions and 2 breaths
 - c. 30 compressions and 2 breaths
12. An 11-year-old child has a heart rate of 118 and a has a temperature of 103.4. His capillary refill time is 6 seconds. How would you determine if the child is in compensated shock?
 - a. Lung sounds
 - b. Blood pressure
 - c. Respiratory rate
13. What is the typical fluid resuscitation range for infants and children?
 - a. 10-20mL/kg
 - b. 20 mL/kg
 - c. 5-20 mL/kg
14. A six-month-old infant has a 2-day history of fever, diarrhea and vomiting. He has been sleepy and irritable. HR is 185, temperature is 101.4, BP is 59/31. Cap refill time is 5 seconds, and he has cool extremities. The infant is 9kg. Which finding indicates that the child is hypotensive?
 - a. Cap refill time
 - b. Heart rate
 - c. Blood pressure
15. A 10-month-old infant has increased work of breathing, cough, fever and you hear stridor. She has retractions and her SaO₂ is 93% with clear lungs. What is the cause of her respiratory distress?
 - a. Lower airway obstruction
 - b. Upper airway obstruction
 - c. Pneumonia

16. When a child has a long expiratory phase and wheezing, we suspect
- Hypovolemic shock
 - Disordered control of breathing
 - Lower airway obstruction
17. A 6-year-old child is being seen in your unit for a seizure. The seizure has stopped, but the child still has slow, irregular respirations. What condition is consistent with these findings?
- Lung tissue disease
 - Disordered control of breathing
 - Lower airway obstruction
18. A 6-year-old drowning victim is brought to the ED. CPR is in progress, and there have been no palpable pulses. The following EKG is seen. What is the child's rhythm?



- Sinus brady
 - Pulseless Electrical Activity
 - Normal sinus rhythm
19. A young child was just given valium for seizures. He is now difficult to arouse and has slow, shallow respirations. He is snoring and has poor chest rise. What is your next action?
- Try suctioning the patient
 - Begin Bag-mask ventilation
 - Apply high flow O₂
20. In the post-cardiac arrest phase of resuscitation, oxygen saturation should be in the range of ____ to ____%, to avoid reperfusion injury.
- 90-98
 - 94-99
 - 95-100
21. A 9-year-old girl with leukemia is responsive but does not feel well. Temperature is 102.4. Heart rate is 118, Respiratory rate 38, and BP of 89/41. O₂ saturation is 98% on non-rebreather with an increase in work of breathing. Which vital sign concerns you the most?
- Heart rate
 - Oxygen saturation
 - Blood pressure
22. With the patient above, what intervention would be beneficial along with fluid replacement?
- Bronchodilator
 - Antibiotic administration
 - Check the glucose

23. What is seen on this patient's cardiac monitor?



- a. Sinus tachycardia
 - b. Supraventricular tachycardia
 - c. Normal sinus rhythm
24. The patient above is unresponsive, pale and has a BP of 70/45. Cap refill time is 5 seconds. What is the preferred treatment?
- a. Defibrillation
 - b. 20 mL/kg isotonic crystalloids rapidly
 - c. Synchronized cardioversion
25. An 8-year-old child who is undergoing chemotherapy has been febrile and is acting lethargic. She is pale and cap refill is 5-6 seconds. What is the appropriate intervention?
- a. Administer 10mL/kg rapidly
 - b. Administer 10-20mL/kg isotonic crystalloids
 - c. Obtain a chest x-ray
26. In which of the following situations may IO access be used?
- a. An extremity with a crush injury
 - b. An extremity with slow cap refill time
 - c. An extremity with signs of infection
27. Which child would need IMMEDIATE intervention?
- a. A child who is grunting
 - b. A child with a BP of 92 systolic
 - c. A child with oxygen saturation of 95% on room air
28. What should a team member do if he is not comfortable performing his assigned role?
- a. Assign it to someone else
 - b. Ask for a new task or role
 - c. Refuse to do it
29. You are evaluating a 5-year-old child with a history of nut allergies and asthma. He was recently given a cookie at a family picnic and began having difficult breathing. What is his likely condition?
- a. He has an upper airway obstruction
 - b. His asthma is acting up
 - c. He has lung tissue disease

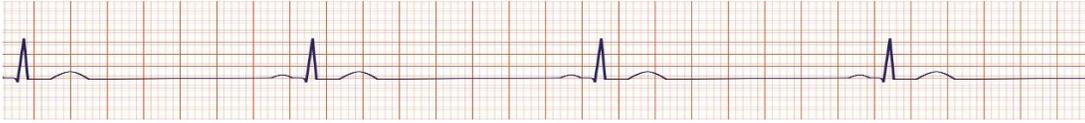
30. High quality CPR is in progress. The following rhythm is on the monitor. You defibrillate at 2j/kg. After the shock, what do you direct your team members to do?



- a. Check for a pulse
 - b. Resume compressions
 - c. Consider intubation
31. A 9-year-old child is found pulseless and not breathing. Two healthcare providers begin CPR. What is the correct compression to ventilation ratio?
- a. 15:1
 - b. 15:2
 - c. 30:2
32. While resuscitating a young child, the Team Leader asks for a dose of epinephrine at 0.1mg/kg. How should you respond?
- a. "OK I will administer the drug"
 - b. "Should I give that? It isn't the right dose?"
 - c. "I think the correct dose is 0.01mg/kg. Should I give that dose?"
33. An eleven-year-old child is complaining of a headache. What would be a normal finding for a child of this age?
- a. Respiratory rate of 8
 - b. Heart rate of 86
 - c. BP of 70/42
34. A 4-year-old child who is a trauma victim is brought to the ED. The child is alert, but upset, and he follows your commands. What is this child's AVPU score?
- a. Alert
 - b. Voice
 - c. Painful
 - d. Unresponsive
35. A 14-month-old child is being seen for increased work of breathing. HR is 171, and his RR is now 28 after initially being 66 per minute. He is becoming lethargic. What is the reason for this sudden change in his level of consciousness?
- a. The child may have a hidden head injury
 - b. The child seems to be heading towards respiratory failure
 - c. The child appears stable

36. A 7-year-old is given valium for a seizure. He is now unresponsive after vigorously trying to wake him. He is breathing about 10 breaths a minute and his oxygen saturation is 93% on 2 liters. He is snoring and his chest rise is shallow. What should you do?
- Give Narcan immediately
 - Insert an oral airway and consider increasing oxygen
 - Intubate the child
37. What is a sign of an upper airway obstruction?
- Wheezing
 - Subcostal retractions
 - Stridor
38. A 15-year-old child with leukemia is not feeling well. She is responsive, flushed and has a temperature of 102.4. HR is 121, SaO₂ is 96% on room air, and BP is 99/40. She has increased work of breathing and is on a non-rebreather mask at 100% O₂. Bloodwork shows lactic acidosis. Based on your assessment, what type of shock does she have?
- Distributive/septic
 - Cardiogenic
 - Obstructive
39. In a hypotensive, septic patient, what is the amount of fluid to administer for the first dose of normal saline?
- 5mL/kg
 - 10-20mL/kg
 - 20-30mL/kg
40. A 9 year with cough and fever is seen at the ED. What oxygen saturation would indicate that immediate intervention is needed?
- 96% on room air
 - 95% on 2 liters per minute
 - 87% on 4 liters per minute
41. An eleven-year-old young boy is playing soccer and feels that his heart is beating too fast. His radial pulse is 181. He is sweating and feels dizzy. If no pharmacological intervention is immediately available, what intervention is indicated?
- 20mL/kg rapidly
 - Synchronized cardioversion
 - Vagal maneuvers
42. If two rescuers are present during a resuscitation attempt, the compression/ventilation ratio should be:
- 30:2
 - 15:2
 - 15:1

43. A young boy is found by his Mom with a slow respiratory rate and SaO₂ of 68%. Paramedics rush him to the hospital. The following rhythm is on the monitor. What is the rhythm?



- a. Second degree heart block
 - b. Sinus bradycardia
 - c. Pulseless electrical activity
44. What should you do for this patient?
- a. Provide bag mask ventilations and consider CPR
 - b. Apply high flow O₂
 - c. Pace the patient
45. You decide to start CPR on the previously mentioned patient. What are your other considerations?
- a. Provide bag-mask ventilations, CPR and possibly epinephrine
 - b. Perform pacing
 - c. Intubate the patient
46. A 4-year-old child is being evaluated in your unit. What is a normal finding for this age child?
- a. BP of 57/32
 - b. Heart rate of 224
 - c. Respiratory rate of 24/min
47. A 6-month-old infant is being evaluated for bradycardia. What is the most likely cause of bradycardia in infants?
- a. Drug overdoses
 - b. Drowning
 - c. Hypoxia
48. What is the dose range for initial defibrillation?
- a. 4 j/kg
 - b. 2-4j/kg
 - c. 10j/kg
49. A young patient who is not breathing and does not have a pulse, so you begin CPR. How long should you do CPR before you notify EMS?
- a. 2 cycles of CPR
 - b. 5 minutes of CPR
 - c. 5 cycles or 2 minutes of CPR
50. According to the American Heart Association, a child is age:
- a. Birth to one year old
 - b. 1 year old to puberty
 - c. Around 12 years old