

Test for COPD

Print out the CE Answer Sheet from the web and mark your answers on it. Then turn the answer sheet into training.

1. You are responding to a difficulty breathing call. You find a 66 male who presents CAO x 3 and has a respiratory rate of 36 with wheezing noted. He is sitting on the side of his bed without a shirt on. He is a thin male with a barrel chest. He is using accessory muscles and does purse his lips to breath. Pulse ox shows 82% on room air. He denies chest pain and states he has emphysema. He has been having increasing difficulty breathing for the past twelve hours. He normally uses albuterol inhaler and nebulized treatments but has not refilled his prescription. What are the initial treatments for this patient?
 - A. Administer oxygen, start nebulized treatment with Albuterol, monitor EKG and initiate an IV NS at a TKO rate.
 - B. Start IV, administer oxygen, hyperventilate patient and perform RSI immediately.
 - C. Advise patient he is hyperventilating and have patient breath into a paper bag.
 - D. Administer oxygen, start nebulized treatment with Xopenex, monitor EKG and initiate an IV NS at a TKO rate.

2. The patient in question #1 now has respirations of 28 with pulse ox sats of 92%, he has completed 1 nebulized treatment of Albuterol. He states he does feel as though he can breath easier. Lung sounds reveal air movement to all fields with light wheezes noted to lower lobes. What are the next steps to take?
 - A. Start second Albuterol treatment; continue to monitor EKG and pulse ox readings and transport to hospital.
 - B. Advise patient the crisis is over and there is no need of transport to a hospital.
 - C. Start Xopenex treatment, monitor EKG and pulse ox readings and transport to hospital.
 - D. Administer Decadron 20 mg rapid IV push

3. What is the most common factor contributing to COPD?
 - A. Working in an environment of light exposure to asbestos.
 - B. Exposure to radiation
 - C. Air pollution
 - D. Smoking

4. Two thirds of men and one fourth of women have emphysema at time of death.
 - A. True
 - B. False

5. Classic Bronchitis symptoms include:
 - A. Productive cough, with progression over time to intermittent dyspnea.
 - B. Frequent and recurrent pulmonary infections.
 - C. Progressive cardiac/respiratory failure over time, with edema and weight gain.
 - D. Weight loss
 - E. A, B and C

6. COPD patients frequently refuse to place lower limbs on the bed, preferring to let legs and feet hang from side of bed.
 - A. True
 - B. False

7. Concerns about overriding the hypoxic drive of COPD patients in respiratory distress take precedence over administering oxygen.
 - A. True
 - B. False

8. COPD and CHF can share many of the same physical signs. What common treatments are used on both under Lubbock EMS protocol?
 - A. Oxygen, assist ventilations if inadequate, monitor EKG, IV NS TKO and administer Nitro-SL/Spray
 - B. Oxygen, assist ventilations if inadequate, monitor EKG, IV NS TKO and administer albuterol nebulized treatment
 - C. Administer morphine sulfate and albuterol treatment
 - D Both A and B

9. COPD generally affects individuals over 40 years of age.
 - A. True
 - B. False

10. Chronic bronchitis patients are referred to as “blue bloaters” and emphysema patients are referred to as “pink puffers”.
 - A. True
 - B. False