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# AHA PALS PRACTICE EXAM; QUESTIONS & ANSWERS/LATEST UPDATE; GUARANTEED A+GUIDE

1. A 5-year-old child presents with lethargy, increased work of breathing, and pale color. The primary assessment reveals that the airway is open and the respiratory rate is 30/min, with crackles heard on auscultation. The cardiac monitor shows sinus tachycardia at a rate of 165/min. The pulse oximeter displays an oxygen saturation of 95% and a pulse rate of 93/min. On the basis of this information, which of the following provides the best interpretation of the oxygen saturation of 95% by pulse oximetry?

A. Reliable; no supplementary oxygen is indicated B. Reliable; supplementary oxygen should be administered

- C. Unreliable; no supplementary oxygen is indicated
- D. Unreliable; supplementary oxygen should be administered

2. A 3-year-old child was recently diagnosed with leukemia and has been treated with chemotherapy. The child presents with lethargy and a high fever. Heart rate is 195/min, respiratory rate is 36/min, blood pressure is 85/40 mm Hg, and capillary refill time is less than 2 seconds. What is the child's most likely condition?

- A. Septic shock
- B. Hypovolemic shock
- C. Significant bradycardia
- D. Cardiogenic shock
- 3. A 2-week-old infant presents with irritability and a history of poor feeding. Blood pressure is 55/40 mm Hg. What term describes this infant's blood pressure?
- A. Hypotensive
- B. Normal
- C. Hypertensive
- D. Compensated -

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- 4. During a resuscitation attempt, the team leader orders an initial dose of epinephrine at 0.1 mg/kg to be given 10. What should the team member do?
- A. Administer the drug as ordered
- B. Administer 0.01 mg/kg of epinephrine
- C. Respectfully ask the team leader to clarify the dose
- D. Refuse to administer the drug
- 5. Which of the following is a characteristic of respiratory failure?
- A. Inadequate oxygenation and/or ventilation
- B. Hypotension
- C. An increase in serum pH (alkalosis)
- D. Abnormal respiratory sounds
- 6. Which of the following is most likely to produce a prolonged expiratory phase and wheezing?
- A. Disordered control of breathing

  B. Hypovolemic shock
- C. Lower airway obstruction
- D. Upper airway obstruction
- 7. A 4-year-old child presents with seizures and irregular respirations. The seizures stopped a few minutes ago. Which of the following most likely to be abnormal?
- A. Vascular resistance
- B. Pulse rate
- C. Lung compliance
- D. Control of breathing

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- 8. What abnormality is most likely to be present in children with acute respiratory distress caused by lung tissue disease?
- A. Decreased oxygen saturation
- B. Stridor
- C. Normal respiratory rate
- D. Decreased respiratory effort ANSWERDecreased oxygen saturation
- 9. An alert 2-year-old child with an increased work of breathing and pink color is being evaluated. Heart rate is 110/min, and respiratory rate is 30/min. What would best describe this patient's condition? A. Respiratory distress
- B. Respiratory arrest
- C. Respiratory failure
- D. Disordered control of breathing ANSWERRespiratory distress
- 10. The parents of a 7-year-old child who is undergoing chemotherapy report that the child has been febrile and has not been feeling well, with recent onset of lethargy. Assessment reveals the following: The child is difficult to arouse, with pale color. The child's heart rate is 160/min, respiratory rate is 30/min, blood pressure is 76/45 mm Hg, capillary refill time is 5 to 6 seconds, and temperature is 103°F (39.4°C). What is the most appropriate intervention?
- A. Obtain vascular access and administer 20 mL/kg of isotonic crystalloid over 30 minutes
- B. Obtain vascular access and administer 20 mL/kg of isotonic crystalloid over 5 to 10 minutes
- C. Obtain immediate blood cultures and chest x-ray D. Obtain expert consultation with an oncologist to determine the chemotherapeutic regimen ANSWERObtain vascular access and administer 20 mL/kg of isotonic crystalloid over 5 to 10 minutes
- 11. A 2-year-old child presents with a 4-day history of vomiting. The initial impression reveals an unresponsive child with intermittent apnea and mottled color. Heart rate is 166/min, respiratory rate is now being supported with bag-mask ventilation, capillary refill time is 5 to 6 seconds, and temperature is 102°F (38.9°C). What is the best method of establishing immediate vascular access? A. Two providers may attempt peripheral vascular access twice each
- B. Three providers may attempt peripheral vascular access once each

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